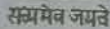


1995-96



**EVALUATION REPORT  
ON  
INTEGRATED CHILD DEVELOPMENT  
SERVICES SCHEME  
IN MEGHALAYA**

EVALUATION UNIT  
PROGRAMME IMPLEMENTATION DEPARTMENT  
GOVERNMENT OF MEGHALAYA, SHILLONG.

## FOREWORD

An Evaluation Study on Integrated Child Development Services (ICDS) Scheme was taken up at the instance of the State Evaluation Committee. The findings of the study, as incorporated in the Report, were based on data furnished by the implementing Department and represented in form of Tables and Annexures besides on-the-spot investigations and observations.

The basic objective of the ICDS Scheme has been to promote the nutritional and health status of the Children, in the age-group of 0-6 years, as well as the nursing mothers and pregnant women. The effective implementation of the Scheme, in the light of the suggestions offered in the Report, may prove beneficial towards achieving the objective of the scheme. This scheme also plays an important role in proceeding towards the goal of "Health For All in 2000 A.D."

I take this opportunity to thank all the concerned functionaries of the Social Welfare Department, right from the Directorate down to Anganwadi Centres for their co-operation in furnishing the requisite materials for the study. My appreciation goes also to Officers and Staff of Evaluation Unit who undertook great pains in preparing the Report.

My special thanks are, however, due to the Chief Secretary to Govt. of Meghalaya and Chairman of the State Evaluation Committee Shri D.K. Gangopadhyay who despite of being heavily pre-occupied, in his capacity, could nevertheless spare his valuable time in holding a meeting of the Committee(State Evaluation), for thread-bare discussion on the Draft Report and finally conveying approval of the same.

In fine, I do hope, that inspite of certain limitations, the findings and recommendations as highlighted in the Report will be found useful by the implementing Department, in taking suitable corrective measures towards effective execution of the scheme.

Dt. 12.06.97

R. V. Suchiang  
Ex-Officio Director of Evaluation,  
Programme Implementation Department.

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## Preface

An Evaluation Study on the Integrated Child Development Services (ICDS) Scheme was taken up at the request of the Social Welfare Department with prior approval by the State Evaluation Committee. The Scope, objectives, modus operandi etc. of the Scheme are narrated vividly in the Chapter-I where-in also the objectives of this study are specified.

2. This Centrally sponsored Scheme started operating in Meghalaya since 1975-76, but for the purpose of the present study, the reference period is confined to years between 1988-89 to 1991-92.

3. The findings presented in the Report are based on data furnished by the Directorate of Social Welfare, the 3(three) selected ICDS Projects, those (data) collected at the 8(eight) Sample Anganwadi Centres and as well as on physical observations and conversations/enquiries made during field studies.

4. The package of services purported to be delivered by the Scheme comprise, in main, Supplementary Nutrition Programme( SNP), health and non-formal education and the same are accordingly highlighted in chapters IV-VI with however, more comprehensive elaboration on the SNP which constitutes a major component both in terms of manual and financial aspects. How the Scheme is administered and the extent of its coverage, are incorporated in chapters-II and III respectively, while chapter VII deals with supervision etc. The assessment of its impact on the concerned beneficiaries is focussed in chapter VIII, which is followed by chapter IX highlighting certain impediments and loop-holes which hindered for the effective and smooth implementation of the Scheme. Last of all, we have chapter X spelling out briefly the main findings of the study.

5. Apart from the shortage of staff, the Report presents other limitations like non-availability of certain required data and inconsistency<sup>of</sup> some furnished figures, inadequacy of required publications etc.. These barriers disable the Report from arriving at, in certain aspects, lucid conclusions for its findings.

6. The Study was entrusted to F. Syndai, Deputy Director (in his earlier capacity as Research Officer) who carried out the whole spectrum of the work right from designing stage up to report drafting under my over-all supervision ( in my hitner-to capacity as Deputy Director). In the field study he was assisted by one Research Assistant Sri M. B. Lyngdoh while in compilation and Tabulation works the Services of both Research Assistants (Shri M.B. Lyngdoh and Shri S. Lyngdoh) were utilized.

7. The Evaluation Unit, P.I.D., expresses its sincere appreciation to all the involved Officers and staff of the Directorate of Social Welfare for their full co-operation with us in completing this study. In this connection, special mention may be made to Smti. L. Lyngdoh, Programme Officer (ICDS CLLL) and Smti S. Sharma Statistical Assistant ( of the Directorate) whose valuable assistance has enabled us in many ways towards finalising the Report as it is now. Our gratefulness goes also to the 2 District Programme Officers ICDS, all the CDPOs and the concerned Supervisors of the 3(three) selected ICDS Projects as well as the Anganwadi Workers of the 8(eight) sample Anganwadi Centres.

8. It is hoped that the Report, with all its limitations, will serve a useful feed-back to the implementing Department and may prove also valuable towards improvement in the working of the Scheme in order to ensure its enhanced efficacy and impact.

N. ROY,  
Joint Director,  
Evaluation Unit,  
Programme Implementation Department.

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# INTEGRATED CHILD DEVELOPMENT SERVICES SCHEME

## IN MEGHALAYA

### CHAPTER - I

#### INTRODUCTION

##### THE SCHEME :

1.1. The Integrated Child Development Services (ICDS) Scheme was initiated by the Govt. of India during the Fifth Plan Period with the aim of providing a package of Services consisting of supplementary nutrition; immunization, health check-up, referral services, nutrition and health education and non-formal pre-school education in an integrated manner to infants(0-1 year), toddlers(1-3 years+) and pre-school going children(3+5 years+), nursing mothers, pregnant and other, women within age-group of 15-45 years belonging to the weaker sections of the community. Specific services are expected to be imparted to each category of the selected beneficiaries. In Meghalaya, the scheme was first launched in 1975-76 as a centrally sponsored scheme. Till 1991-92, there have been 26 ICDS projects.

##### I.C.D.S. OBJECTIVES :

- 1.2. 1. To improve the nutritional and health Status of Children in the age group 0-6 years;
2. To lay the foundation for proper psychological, physical and social development of the child;
3. To reduce the incidence of mortality, morbidity, mal-nutrition and school drop-out;
4. To achieve effective co-ordination of policy and implementation amongst the various departments to promote child development.
5. 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.

##### THE OPERATIONAL SET-UP:

1.3. The operational areas of the Scheme's project, known as ICDS Project is coterminous with that of Community Development Block. It is therefore expected that there will be one project for every Community Development Block, though at present this target is yet to be achieved in full. The project is under an over-all charge of project Officer designated as Child Development Project Officer(CDPO) of the Social Welfare Department, assisted by a number of supervisors and ministerial staff, Under each project, there are village level workers entitled 'Anganwadis'

posted at villages selected as ICDS Centres, the pattern of which differs from project to project depending upon population, topography etc. of the project. Each Anganwadi is assisted by a helper. All these projects are under the administrative control of the Director of Social Welfare Department and his subordinate Officers in the Directorate. Apart from the latter (Officers in Directorate) the Department have set up (two) intermediary Offices each manned by District Programme Officer. ICDS posted at Shillong and Tura for the purpose of ensuring effective co-ordinations with the works of the CDPOs under their respective jurisdiction. With regard, however, to the Health component of the Scheme, the medical Officers posted at different Primary Health Centres (PHCs), the Auxiliary-Nurse-Midwives (ANM) and the other field staff of the Health Department are the active participants at the village level. Over and above co-ordination Committees are constituted at different levels.

#### 1.4. FINANCING PATTERN :

Being a Centrally Sponsored Scheme, a bulk of expenditure was found to be met from the Plan Budget as indicated in the figures furnished by the implementing Department for the period from 1988-89 to 1991-92 excepting that of 1990-91 where Non-Plan expenditure exceeded the Plan expenditure.

#### 5. NEED FOR THE STUDY :

1.5. The Study was conducted at the instance of the State Evaluation Committee as initially desired by the implementing Department.

#### 1.6. OBJECTIVES OF THE STUDY :

- i) To highlight the role played by an Anganwadi worker;
- ii) To Study measures taken in the Selection of beneficiaries;
- iii) To Study an extent of improvement effected in the nutritional Status of the target groups;
- iv) To Study an extent of Services coverage under the Health & education components of the scheme;
- v) To assess the level of co-ordination between the concerned departments;
- vi) To evaluate an impact of the scheme.

#### METHODOLOGY OF THE STUDY :

1.7. Owing to staff shortage, only three projects regarded as the good ones (i.e. in the sense where maximum information were expected to be readily available) were selected as samples for the study in consultation with the implementing Department.

Under each of the two selected ICDS Projects, namely, Thadlaskein and Rongram, 2(two) Anganwadi Centres were taken up as samples where as in respect of the remaining Phoi Area ICDS project, 4 (four) Anganwadi Centres were chosen due to the fact that this particular project covered 2(two) C.D. Blocks in the geographical area of its functions instead of one Block as it should be. The selection of all the centres (Anganwadi) was purposive, that is, where P.W.D.I.Bs/Rest Houses were available. This facility was necessary as the evaluation team needed to spend for some days in every centre in order to study and collect relevant data recorded in the Registers and other papers maintained by the Anganwadi workers. As regards beneficiary samples, the study selected at random, 10 Nos from among the children and 5 from the pregnant women/nursing mothers as recorded in the SN Register for the month of July, 1992.

#### TOOLS FOR THE STUDY

1.8. For the purpose of collection of data, the following separate schedules-cum-questionnaires were used :- for (i) Beneficiaries (ii) Anganwadi workers (iii) ANM (iv) C.D.P.Os (v) Directorate of Social Welfare. Besides, some guide points were kept ready for discussions with the Medical Officers and others during field works.

#### MAIN POWER

1.9. Field works were conducted by the Research Officer I/c who was assisted by one Research Assistant. The scrutiny and tabulation works also, these two personnel together with another Research Assistant performed the Job. Drafting of the Report was entrusted to the Research Officer.

#### REFERENCE PERIOD

1.10. In order to have some idea about the trends in the working of the Scheme data collected covered the period from 1988-89 to 1991-92.

#### LIMITATIONS

1.11. The Shortage of staff, especially for field works, compelled the Unit to take up very few projects and Centres as samples. Data received at different levels were not complete. These and other handicaps including belated receipt of the information from the implementing Department have considerably diminished the quality of the Report.

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CHAPTER - II

ADMINISTRATION OF THE SCHEME

Head Office :

2.1. For the implementation of the Scheme, the Director of Social Welfare Department is assisted by some Officers and staff whose pay and allowances are met out of the ICDS Scheme. The Officer directly involved with the Scheme is designated as Programme Officer (ICDS-Cell) and below her is the Statistical Assistant. Their duty is mainly of co-ordination in nature which includes compilation of Return, submitted from time to time by the CDPOs. Many of valuable information concerning the over-all working of the Scheme or even of any particular project are readily available from the Directorate of Social Welfare through the ~~service~~ rendered by the afore-said Officer and Statistical Assistant. Besides, ministerial Staff comprising of U.D.A.; L.D.A.; and Driver and one Peon are all appointed under the ICDS Scheme.

CDPOs' Offices :

2.2. At the Project Level, the staff consisted of C.D.P.O., Supervisors, Anganwadi workers, Helpers who took up the scheme at the grass-root level. They were assisted by supporting staff comprising Clerks, Typists and 4th Grade employees. The C.D.P.Os of all the three selected projects were the holders of Master Degree in Social work and had also attended the 3 months Job Training course and the Refresher course as well. The Rongram and the Bhoi Area ICDS projects were both started in 1982 while that of Thadlaskein in 1979-80. If the figures and furnished by the Projects, are correct, it shows that there was not much difference in the strength of staff during the initial period and that of the year 1991-92. Thus as per table No.2.1. the strength of the Lady Supervisors and the Anganwadi workers remained the same at 3 Nos and 60 Nos respectively from the beginning till 1991-92 at Rongram ICDS Project. So also with the case of Thadlaskein Project, the Lady Supervisors became stationery in position with 5 Nos. With regard to the Anganwadi workers and Helpers, the Project (Thadlaskein) showed an increase from 89 to 99 i.e. by 11.23 P.C. during a span of 1979-80 (starting year) to 1991-92. The figures pertaining to Thadlaskein Project shows that out of the 124 sanctioned Nos <sup>each</sup> of Anganwadi workers helpers (the same stated to have been there since the initial years) only 99 <sup>each</sup> were in position by 1991-92. A clarification from the Social Welfare Department was that the vacancies had actually all been filled up but

with the carving-out of the Amlarem ICDS Project from the composite Thadlaskein ICDS Project in 1990-91, the 25 Anganwadis falling under the new Project (Amlarem) had also consequentially been tagged to it. But the Thadlaskein ICDS Project still retained its sanctioning strength of Anganwadi Workers and helpers based on its population coverage. Concerning the Bhoi Area ICDS Project, the study cannot throw any similar comments for want of data required in this connection.

TABLE NO. 2.1.

STAFF POSITION OF THE SAMPLE ICDS PROJECTS

Staff designation	Rongram			Bhoi Area			Thadlaskein		
	Initi- tial posi- tion 'ed	1991-92 'Sanc- tion 'posi- tion 'ed	In 'In 'posi- tion 'ed	Initi- tial posi- tion 'ed	1991-92 'Sanc- tion 'posi- tion 'ed	In 'In 'posi- tion 'ed	Initi- tial posi- tion 'ed	1991-92 'Sanc- tion 'posi- tion 'ed	In 'In 'posi- tion 'ed
1. Lady Supervisors	3	3	3	N.A.	7	5	6	5	5
2. Anganwadi workers	60	61	60	N.A.	127	89	124	99	99
3. Helpers	60	61	60	N.A.	127	89	124	99	99
4. Clerks	3	3	3	N.A.	3	3	3	3	3
5. Typists									
6. Peons/Drivers	2/1	2/1	2/1		2/1	2/1	2/1	2/1	2/1

Sources : ICDS Projects.

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### Recruitment of Anganwadi Workers :

2.3. In the matter of recruitment of anganwadi worker, the first preference is to appoint the local candidate as far as possible. But due to non-availability of suitable local applicants, the Rongram ICDS Project had to recruit outside as many as 24(40.0%) out of the total 60 Anganwadi workers. The merits of such outside workers lie on their being relatively free from the encumbrances of domestic works and are therefore able to devote much of their time towards discharging their duties if they are sincere. Our two sample Anganwadi workers in this very Project appeared to be dutiful to their job. But demerits of non-local workers seem to be so many as to over-shadow their merits. For example, the non-readiness of the local people for construction of a shelter for the anganwadi worker poses serious problems for the smooth functioning of the scheme whenever no local house-owner can afford providing them a convenient room to stay-in. i. Besides, the insincere workers gave them easy pretext from avoiding attending their duties regularly. Some workers of the nearby centres visited by the Evaluation Party were not found in their respective place of working and even the local residents did not know about their movement. On the other hand, the other two sample Projects were able to appoint all their anganwadi workers from among the local candidates. The extent of co-operation of the village community in fulfilling the responsibility of erecting a shed for shelter to the Anganwadi worker and for housing a non-formal Pre-primary School shall be dealt with in the relevant Chapter.

### Functionaries' Training :

2.4. From the Table 2.2., it appears that the 3(three) Projects had made every effort to get the involved field staff duly trained in their respective sphere of activities as laid down in the Guide-lines. Rongram ICDS Project seemed to have achieved cent per cent in this regard when all the 3 Supervisors and the 60 Anganwadi workers had completed their respective training. In case of Bhoi Area ICDS Project, out of 7 Supervisors, 5(71.4%) of them get Trained while 114(89.8%) out of the total 127 Anganwadi workers had acquired Training. Thadlaskein ICDS Project fared the least pertaining to Supervisors' training when only 3(60.0%) out of the total 5 acquired training. In respect of Anganwadi workers, it however, recorded a better performance than that of Bhoi Area



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when 93(93.9%) including 5 under training were trained out of its total 99 Anganwadi workers. The over all achievement in this respect showed that 11(73.3%) of the 15 Supervisors and 267 (93.4%) of the 286 Anganwadi workers had received Training. Reason for non-sending upto training of the untrained personnel was either due to pregnancy or baby nursing. In our 8(eight) sample Anganwadi workers one of them remained untrained also due to this very reason.

TABLE NO. 2.2.

TRAINED/UNTRAINED FUNCTIONARIES AT PROJECT & ANGANWADIS LEVELS (AS IN 1991-92.)

Sl. No.	Name of Project	Supervisors			Anganwadi workers			Remarks
		Trained	Untrained	Total	Trained	Untrained	Total	
1.	2.	3.	4.	5.	6.	7.	8.	9.
1.	Rongram ICDS Project	3 (100.0)		3	60 (100.0)	-	60	1 post vacant *under deputation to Training.
2.	Bhoi Area ICDS Project	5 (71.4)	2	7	114 (89.2)	13	127	
3.	Thadlaskein ICDS	3 (60.0)	2	5	88 + 5* (93.9)	6	99	
Total		11 (73.3)	4	15	262 + 5* (93.9)	19	286	

Note : Figures in brackets indicate percentages to totals

Sources :- ICDS Projects.

Ratio of Supervisors to Anganwadi Workers :

2.5. As can be seen from Table No. 2.1., the ratio of Supervisors to Anganwadi Workers, as in 1991-92, of the three selected ICDS Projects viz. Rongram, Bhoi Area and Thadlaskein -worked out to 1:20, 1:18, 1:19.8 respectively. Compared to a ratio of 1:17 (Tribal areas) as envisaged in the Mannual, the existing strength of Supervisors in relation to the number of Anganwadi Workers, as they stood in 1991-92, appeared to be still snort of the said ratio laid down in the Scheme. There-

fore, but for the contiguity in the places of situation of some of the Centres, the Supervisor could hardly pay a visit even once a month into the centres assigned to her. Regarding the actual inspection made by the Supervisors to their respective Centre, the same is highlighted in Chapter VII.

2.6. To a question whether the existing staff were considered adequate for the effective implementation of the scheme, two of three selected ICDS Projects viz. Rongram and Thadlaskein replied in negative each stating that one more of supervisor was required while the remaining correspondent made no mention about this point. Besides, the Rongram Project pointed out that another supporting ministerial staff was also needed in order to cope with increasing office's works.

#### The image of Anganwadi Worker :

2.7. As already stated above one of the functionaries involved in the implementation of the scheme is designated as, Anganwadi worker. Her role, as observed during field study, appeared to be so vital that, other things remaining constant the success or failure of the scheme lies to a great measure on the sincerity or other wise of this category of worker. Since the sphere of her functions lies at the grass-root level, the entire package of services embodied under the scheme must needs be eventually delivered by her to the eligible target groups. She is thus aptly described as the kingpin of the scheme on her combined services of (i) a mother nourishing her child with nutritious foods, (ii) a teacher moulding and building up children's physical and intellectual up-growth and (iii) a nurse checking his/her daily health condition and rendering first-aid remedy, if necessary. The "Manual on Integrated Child Development Services" enumerates the responsibilities of the Anganwadi worker at para 2.18 thus: organizing pre-school activities arranging supplementary nutrition feeding for children, expectant and nursing mothers; giving health and nutrition education to mothers; making home visits for educating parents; eliciting community support and participation, assisting the P.H.C. staff in implementation of immunization, health check-up, etc. .... maintaining routine files and records ..... Besides, she is engaging in conducting family survey in order to be able to locate the eligible target groups. Entering from house to house was a

the consuming and tedious process but was nevertheless obligatory on her part especially at the initial stage of the implementation of the scheme. The process was repeated in the consecutive years also as found in some of the selected Anganwadi workers.

#### Records Maintenance :

2.8. Unlike her other counterparts (other village level workers) her responsibilities seem to stand unique in the sense that whatever daily activities she performed, she had to enter them in proper relevant Registers. In this way, maintenance of records of different activities constituted one of the important and regular features of the Anganwadis' functions. Thus, for any quantity of any food items consumed on any day was found to be recorded properly in the Stock Register even though at the time of delivery of foods to the ICDS (Anganwadi) Centres by the office, a daily rate of consumption per day for each item was already specified in the slip issued to them along with the SNP foods. This was however emphasised to be highly necessary as their stock-maintenance was liable to audit by the competent authorities. It is not known if there is any other Govt. employees, of their level, whose job is also subject to auditing. Pertaining to this very component of the scheme, the anganwadis maintained another Attendance Register for the daily participants (by name) of the supplementary nutrition Programme at their respective centre. Like wise, a school-attendance Register was there for the non-formal Pre-school besides many other Registers recording important village-level statistics such as births, deaths etc. To be precise, one can well understand how pre-occupied this category of village workers are from the various Registers found to be in possession by some of the selected Anganwadi Workers. Those Registers included (i) S.N.P. (ii) Stock (iii) Non-formal Pre-School (iv) Births and deaths (v) Health and Nutrition Education (vi) Abstract for births and deaths (vii) 6 + years children attending the local formal primary schools (viii) Visitors Registers (ix) Immunization Register (x) Assets (xi) Medicines Stock (xii) Family Survey and (xiii) Daily Dairy Register.

Estimated hours of work :

2.9. How diversified the functions performed by the anganwadis was amply demonstrated in the preceding paragraphs. To simplify our purpose, the study attempted to break up the varied activities of the anganwadis into 5(five) main divisions namely, feeding, pre-school, filling up of cards, registers etc., weighing and measuring of children, Health education. The extent of hours of work estimated to have been devoted to each of the 5 items of activities by the anganwadis is shown in the Table No.2.3. taking 25 working days in a month as per Office's directions implying thus that they were to be at work in all the days in a month, (save Sundays) with no public Holidays at all. The Table No. 2.3. depicts a certain degree of variance no doubt in the extent of time said to be engaged in each of the five different activities by the selected anganwadis, but going by average, the results shows that this worker had to set to work for 129 hours a month or 5 hours a day in discharging their day-to-day functions. Further, it (Table) demonstrates that out of the 5 (five) broadly classified activities, filling up of cards, Registers etc, accounted for nearly 47 hours monthly or almost 2(two) hours daily, followed by teaching in non-formal pre-school for 39 hours p.m. or 1 hour.47 min. a day and feeding 29 hours a month or 1½ hours a day. As against this duration of daily hours of work rendered by the anganwadis it is interesting to know that the L.P.School Teachers (regular Govt. Employees) are required to put in 4 hours of work a day only.

..... besides enjoying the Public Holidays and vacation facilities.

[As to what extent the selected A.W.s actually performed their duties, it will be observed in the subsequent chapters]

TABLE NO. 3.  
HOURS OF WORK IN A MONTH

S1. No.	Name of Anganwadi Centre.	Feeding	Pre-School	Hours in a month Filling up of Regis- ter etc.	Weight ing on children	Health educa- tion	Total
1.	2.	3.	4.	5.	6.	7.	8.
1.	Kyrdem	50:00	50:00	25:	3	5	133:00
2.	Sonidan	50:	25:	12:30	2	5	94:30
3.	Nongkhrah	25:	50:	50:	3	8	136:00
4.	Pilangkata	25:	25:	18:45	3	15	86:45
5.	Nartiang & Pohshnong	12:30	12:30	37:30	3	10	75:30
6.	Umjalasiaw	12:30	29:30	50:00	7	4	103:00
7.	Allegre	37:30	43:45	81:	37:30	3	202:45
8.	Dolongmenda	25:	75:00	100:	2:0	Not yet practised	202
Total :		237:30	310:45	374:45	60:30	50	1033:30
Average P.M.		29:41	33:50	46:50	7:34	7:08	129:11
Average Daily -		1:27	1:47	1:52	0:18	0:17	5:10

Sources : Anganwadi Centre.

#### HONORARIUM TO ANGANWADI WORKER :

2.10. Having discussed at length, (in the preceding paragraphs) about the multi-farious functions of the anganwadi workers, it is very appropriate to be aware also of the remuneration offered to these workers. . . According to the 2(two) CDPO's, the rate of honorarium differed marginally according to educational qualifications and period of service in that the matriculates were entitled to Rs.275/-p.m. while those of under-matriculates only to Rs.225/-p.m. but after having completed for 5 years continuous service, their earning was raised to Rs.250/-p.m. The remaining sample project seemed, however, to make distinction to neither of the afore-said two criteria. Instead, a flat rate of Rs.225/-p.m. was said to have been paid to every worker. In this connection it is to be mentioned that all the 8(eight) sample Anganwadi Workers were under-matriculate and they were accordingly paid by the sample projects as per their respective norms. For example, the Anganwadi worker at Allegre ICDS Centre, though having completed for 5 years since, still was getting only Rs.225/-p.m. Going thus by their accepted norms, it is observed



as per Table No. 2.4, that both the Rongram anganwadis were getting Rs. 225/- p.m. each, whereas that of Bhoi Area Project, out of 4 selected samples, two of them received Rs. 225/- p.m. each and another 2(two) at an enhanced rate of Rs. 250/- p.m. each. Regarding Thadlaskein Project both of the selected Anganwadi Workers (A.W.) were remunerated at Rs. 250/- p.m. each.

TABLE NO. 2.4.

## RATES OF HONORARIUM TO ANGANWADI WORKERS :

Name of ICDS	Rates quoted by CDPOs (R)			Sample size	Rate frequencies quoted by AWS. (R)		
	Matriculates	Under Matric	5 years service		275	225	250
1.	2.	3.	4.	5.	6.	7.	8.
Rongram		225		2	-	2	-
Bhoi Area	275/-	225/-	250/-	4	-	2	2
Thadlaskein	275/-	225/-	250/-	2	-	-	2

Helpers Honorarium :

2.11. All our respondents, both at village and project levels, corroborated in their statement that the rate of honorarium paid to Helper was Rs. 110/- p.m.

HONORARIUM AND VOLUME OF WORK :

2.12. All the three selected C.D.P.Os. agreed that the Anganwadi Workers were over-burdened with their day-to-day activities. Similarly as to a question whether the existing rate of honorarium was considered compatible to the quantum of works performed by them, they all emphatically replied in negative. So the rates considered justifiable should be in the range between 500 to 1000/- p.m. according to them. The C.D.P.O. of Rongram ICDS Project opined it Rs. 1000/- p.m. for Anganwadi Worker and Rs. 500/- for Helper while that of Bhoi Area suggested at Rs. 700/- for matriculates and Rs. 500/- for under matriculates. For the helper, she put it Rs. 300/-. The Thadlaskein CDPO on the other hand recommended a flat rate of Rs. 500/- p.m. each both for Anganwadi Worker and Helper, trying thus to value equally the status and responsibilities of these two categories of functionaries of the scheme which appeared to be paradoxical. Rates considered conducive according to the selected C.D.P.Os. are reproduced in the Table No. 2.5.

T A B L E NO. 2.5.

RECOMMENDED RATES OF HONORARIUM TO ANGANWADIS & HELPERS

C.D.P.O. OF	For Anganwadis		Helpers
	Matriculates	Under matriculates	
1.	2.	3.	4.
Rongram	1000/-	1000/-	500/-
Bhoi Area	700/-	500/-	300/-
Tnadilskan	500/-	500/-	500/-

Anganwadis view

2.13. On their part also, the anganwadis expressed woefully their dissatisfaction over the meagreness of the remuneration they were getting. It was considered quite inconsistent to the quantum and multiplicity of functions they had to carry out from day to day. Hence, keeping in view of the heaviness<sup>of</sup> works, they suggested that the rate of honorarium be raised substantially so as to have some bearing on the amount of works they were discharging. To this, they put forward varying rates considered justifiable ranging between Rs. 700/- to Rs. 1000/-p.m. Of the 8(eight) samples 3 of them agreed Rs. 1000/-p.m. while one each for Rs. 900/-, Rs. 800/- and Rs. 700/-p.m. The two remaining samples preferred however, to leave it to the Department judicious decision of the matter. With regard to the remuneration for the helpers the selected anganwadis recommended for the upward revision of rates spreading between Rs. 200/- to Rs. 500/-p.m. with 4 of them fall in line with the maximum limit (i.e. Rs. 500/-).

2.14. In fine, it is obvious that if an anganwadi worker is supposed to fulfil her duties as detailed in the guide-lines, she must be undoubtedly, heavily over-burdened in comparisons to her fellow village level worker<sup>A</sup> who are actually serving as regular Government employees. One of our samples, who, we were to old, was selected for National Award, appeared to be really so busy engaging herself most of the day in her job. It is also observed that their daily hours of working is one hour more than that of regular L.P. School Teachers whose monthly salary reaches the level of about 2000/-. Besides, the responsibility of their job seems to be greater than the other workers of their level in that their works are subject to audit by the local Audit. Their functions are multi-purpose in nature<sup>One</sup> thing that struck our mind was regarding the valuable village statistics that they were collecting and that the same were being maintained in proper



Registers which were found piling up in their respective small room and table. In the face of these stark realities it seems doubtful if the recently revised rates of Rs.400/- and Rs.350/- p.m. respectively for the matriculates and under-matriculates are conducive at all to the labour exerted by these particular village workers. It will be perhaps in the fitness of things if these workers side by side with their normal functions, can be absorbed as Teachers in Pre-primary Schools the scheme being introduced recently and paid accordingly through proper arrangement with the Education Department. From our observation, some of these trained anganwadis appeared to be very effective in dealing with our little toddlers. The local people of the sample villages did also testify before us regarding this same capacity they were possessing.

### CHAPTER - III

#### SCHEME COVERAGE

3.1. The Scheme envisages the setting up of one I.C.D.S. project for every C.D. Block. Till 1991-92, there had been, however, 26 I.C.D.S. Projects in functioning position (according to the 2 DPOs' reports) as against 30 C.D. Block in the State showing thus a shortfall of 4 Projects to achieve a desired target. Under this condition certain Projects may have to cover the area of their operation for areas covered by 2 C.D. Blocks. As an example, <sup>one of</sup> the three selected I.C.D.S. Projects namely, Bhoi Area was actually found to include 2(two) C.D. Blocks viz. Bhoi Area and the Nongpoh C.D. Blocks under its purview. Besides, while the population in the Tribal Project is assumed, according to Manual on I.C.D.S. (Page 17) to be in the range of 35,000 or so, the actual population of the 4(four) C.D. Blocks served by the 3 selected I.C.D.S. Projects numbered, according to 1991 census, between 43,480 to 76,751. Thus the Bhoi Area I.C.D.S. Project, which happened to cover the 2 Blocks had population of 1,27,312 (i.e. Bhoi Area C.D. Block = 76,751 + Nongpoh C.D. Block + 50,561).

#### The Anganwadi Centres

3.2. The focal point for the delivery of I.C.D.S. package of services is an anganwadi centre supposed to be set up at every village. There was however, a provision that big villages may have more than one Anganwadi. Accordingly, the number of Anganwadis may differ from project to project depending upon population, topography, communications etc. For the entire State

the number of Anganwadis rose from 1017 in 1988-89 to 1536 in 1991-92 as against 4902 nos of inhabited villages as per 1981 census. Taking the 1981 census No. of villages as remaining constant (which actually cannot be) the ratio of Anganwadis to villages ranged between 1:4.8 and 1:3.2. between 1988-89 and 1991-92.

3.3. The Anganwadi Centres under the three Selected Projects :  
For the 3(three) Projects, the study selected 8(eight) Anganwadi Centres for samples, of which 4 of them represented the Bhoi Area I.C.D.S. Project (Covering 2(two) C.D. Blocks under it), while 2(two) each from the remaining two projects, -Thadlaskein and Rongram. The three projects comprised altogether 274 Nos of Anganwadis which constituted 26.94% of the total anganwadis number (1017) in 1988-89. By 1991-92 the number of the centres stood at 287, i.e. 18.88% of the total No. (1536) in the State. The Table 3.1. indicated that while the number of anganwadis under Rongram remained 61 during 1988-89 to 1991-92, that of Bhoi Area and of Thadlaskein showed an initial increase from 108 to 127 and 105 to 114 respectively from 1988-89, to 1989-90. Further, while the number of anganwadis (127) under Bhoi Area remained constant from 1989-90 to 1991-92, that of Thadlaskein registered a decline from 114 in 1989-90 to 99 in 1990-91 till 1991-92. This abrupt fall in the number of anganwadis appeared to be due to the transfer of some Anganwadi Centres to the newly created Amlarem I.C.D.S Project, under Amlarem C.D. Block.

TABLE NO. 3.1.

NO. OF ANGANWADI CENTRES UNDER THE THREE SELECTED PROJECTS

Name of I.C.D.S. Project	1988-89	1989-90	1990-91	1991-92	Remarks
1.	2.	3.	4.	5.	6.
1. Rongram	61	61	61	61	*One anganwadi centre remained vacant without a worker.
2. Bhoi Area	108	127	127	127	
3. Thadlaskein	105	114	99	99	
Total :-	274	302	287	287	

Source : I.C.D.S. Projects.

### Extent of Coverage-villages and Population :

3.4. Out of 732 Nos. of villages, as per 1981 census, the total number of anganwadis under the three selected ICDS Projects, stood at 286 till 1991-92, working out thus a coverage of 2.5 villages per anganwadi. As against this situation, Thadlaskein project depicted a contrast picture, when the 99 anganwadis showed to have outnumbered the 1981 villages numbering 67 by 32.32 P.C. Under the remaining two projects, however, it was found that the number of anganwadis in 1991-92 was still to cover their respective 1981 No. of villages. As such, the Table No. 3.2. indicated that on average one anganwadi Centre was equivalent to 3.9. and 3 Nos of villages respectively under Rongram and Bhoi Area ICDS Projects. In terms of population, the ICDS Scheme envisaged that in tribal areas, one anganwadi was to cover for about 700 population. Thus, going by this norm, it was evident that except Bhoi Area Project, the two projects (Rongram and Thadlaskein) had already achieved this target with the latter (Thadlaskein) showed to have already crossed over this rate by 16.57 P.C. This is so because under this project the number of anganwadi centres in some villages exceeded more than one. In case of Bhoi Area however one anganwadi Centre had to cater on average, 1002 population as in 1991-92. i.e. in excess of 700 population.

\*/Note : It was clarified by the Social Welfare Department, that in respect of Meghalaya, the Govt. of India have relaxed a minimum population required for each anganwadi Centre to 300. 7

TABLE NO. 3.2.

#### NUMBER OF ANGANWADI CENTRES UNDER THE THREE I.C.D.S. PROJECTS

Sr. No.	Name of ICDS Project.	Population (1991) (Rural)	Inhabited Villages (1981)	No. of Anganwadis (1991-92)	Per Anganwadi on Average Population Covered (1981)	Village Covered (1981)
1.	2.	3.	4.	5.	6.	7.
1.	Rongram	43,480	236	60	725	3.9
2.	Bhoi Area	1,27,312	429	127	1002	3.4
3.	Thadlaskein	57,793	67	99	584	0.7
Total :		2,28,585	732	286	799.2	2.5

Sources : ICDS Projects.

### Criteria for selection of Anganwadis :

3.5. From the preceding paragraph it is evident that not all the villages could be covered by the two projects (Thadlaskein being an exception) till the time of our study. Besides, even in case of Thadlaskein ICDS where full coverage of villages seemed to have been achieved the setting up of the Anganwadis was actually done in phase manner. Hence the question of choice of preference for selection of any village(s) for starting the Anganwadis did naturally arise. In arriving at such decision, different criteria were taken into consideration by the sample ICDS Projects. It is however interesting to note that none of those factors was found to be identical from among these 3 projects. Some criteria found, however, to be common among them related to poor dietary, non-existence of (a) SNP Centre run by the C.D. Department; (b) primary and (c) nursery School. Other points of consideration included better communication facilities, remoteness poverty, bad health conditions and a minimum population of 300. Lack of uniformity in this regard was therefore quite obvious. Still, each of those criteria seemed to have its relevance to the scheme. Similarly, Boards/committees which decided for the selection of the Anganwadis Centres were not of the same. While Block Level Co-ordination Committee in consultation with the local Nokmas, Teachers and other leading men were the authorities to decide for the matter for selection of Anganwadi Centre according to Rongram ICDS Project, in case of Bhoi Area project, however it was the B.D.O. and the Medical Officer along with C.D.P.O. who took the decision over the matter. With regard to Thadlaskein project the Board Committee consisting of District Social Welfare Officer (DSWO), District Programme Officer (ICDS) and the CDPO exercised this particular power.

### Families/Population Coverage :

3.6. One of the duties of the Anganwadi Workers is to conduct survey from time to time in order to list house-holds, record population by age-group and ultimately identify the eligible beneficiaries. The study found, however that in some of these selected Anganwadis lacked complete and up-dated data. Two of such Anganwadis included, as reflected in the Table No. 3.3., Sonidan which did not conduct the survey after having done it once at the inception and the another one being Nongkhrah which had no Registers etc., at all saying that the sheets of the Registers were all torn out and used for wrapping medicines that she supplied to the beneficiaries. For the rest, the

field study was highly satisfied to find the efforts exerted by the concerned Anganwadi Workers in updating the families and population data through their continuing survey. The only difficulty was that two of the remaining Anganwadis were run by the newly recruited workers and hence their records were not complete.

3.7. The Table No. 3.3. indicated that barring one Centre (anganwadi) all the Anganwadis selected all the families that had been listed (surveyed) for the scheme's package of services. The Kyrdem Anganwadi which was an exception to this general tendency reported to have limited the benefits of the schemes to those eligible grades of children only unless they actually attended the non-formal pre-primary school. But then, she did not have the figures of such families actually covered by her. Thus from the available figures, the No. of families covered by the selected Anganwadis ranged between 50 to 102 Nos working out an average of 60 families per Anganwadi. With regard to population covered, the range was between 333 and 662 and the average being 401.9 per Anganwadi as shown in the Table No. 3.3.

TABLE NO. 3.3.

NO. OF FAMILIES AND POPULATION COVERED BY THE  
SELECTED ANGANWADIS

S1. No.	Name of Anganwadis	No. of families surveyed	Actually covered	Total population covered	Remarks
1.	2.	3.	4.	5.	6.
1.	Kyrdem	78(91)	Depending on grades and attending Pre-School.	662	Note: Figures in brackets refer the year the figures referred.
2.	Sonidan	60(85)	60	401	
3.	Nongkhrah	77	77	N.A.	
4.	Pilangkata	61(83)	61	485(91)	
5.	Nartiang-Pohshnong	72(91)	72	384	
6.	Umjalasiaw	58(91)	58	346	
7.	Allegre	102(91)	102	594	
8.	Dolongmanda	50(92)	50	333	
Total :		558	420	3215	
Average		69.8	60	401.9	

Sources : Anganwadis.



## CHAPTER - IV

SUPPLEMENTARY NUTRITION.AIMs

4.1. Having confirmed by several studies that malnutrition is the single major contributor to high rate of infant and child mortality and morbidity in India, the Scheme (ICDS) has then embodied supplementary nutrition as one of the chief components in the package of services. The aim has been to supplement the nutritional intake by about 300 calories and 8-10 grams of protein for children below 6 years of age and about 500 calories and 20-25 grams of protein for pregnant woman and nursing mothers. This measure, it is hoped will go a long way in improving the dietary deficiency of the beneficiaries in reducing the past alarming rate of child morbidity and mortality in the country.

Selection of beneficiaries (P.W. & N.M.)

4.2. Correct identification and enlistment of beneficiaries has been one of the important responsibilities that the anganwadis are to undertake in order to strive for the greatest "REACH OR COVERAGE". As to the identifying of eligible pregnant women and nursing mothers for S.N. the yearly survey conducted by the anganwadis appeared to suffice for the purpose since data collected in such survey did include, inter alia, the inmate's name, age, sex, marital status, occupation, land holding annual income etc. It was heartening to find that 6 out of the total 8 selected anganwadi workers, had records to show of their regular performance of this particular activity. The two new workers also were found to be conscious of this task. Of the remaining two, however, one of them said to have stopped surveying after three years' practice while the other one had no Registers at all (reasons as stated earlier). Notwithstanding of such survey, what we actually found in practice was that the participation by this group of beneficiaries (P.W. & N.M.) in all the selected SN Centres was quite negligible as can be seen in the subsequent paragraphs. Any how, the occupational pattern of the randomly selected samples is shown in Table No. 4.1. The majority of the household of the selected beneficiaries (P.W. & N.M. & Children below six years) (i.e. 57 out of 120 or 47.5%) as shown in the said Table were found to be engaging themselves as cultivators whose stated annual yield was less than 1054 kgs which was an hectare yield of Winter paddy as recorded in page 48 of Statistical Hand Book 1989. That is going by yield their land holding was less than a hectare and hence be classified as marginal farmers.

Next to cultivators, we have the Agricultural labourers who constituted 35 (29.2%) out of the total 120 samples followed by service category 18 (15%) who comprised of mostly L.P. School Teachers and 4th grade employees and petty business 8 nos or 6.7% of the total.

TABLE NO. 4.1.

OCCUPATIONAL PATTERN OF THE SELECTED SAMPLES'  
HOUSE-HOLDS

Name of Project	No. of Centres studied	OCCUPATION					Total
		Cultivator	AL	Service	Business	Rural anti-sams	
1.	2.	3.	4.	5.	6.	7.	8.
1. Rongram	2	20	2	3	5	-	30
2. Bhoi Area	4	21	22	13	2	2	60
3. Thadlaskein	2	16	11	2	1	-	30
Total :-		37	35	18	8	2	120

Identification of Children Beneficiaries ;

4.3. Barring the two newly recruited AWs, all the remaining six respondents asserted, during interview, to have conducted proper measurement of weights of beneficiaries before being enrolled in the SN. Attendance Register. Of these six AWs, only one them said to use the help of tricoloured mid-a circumference strip while the rest through a weighing scale. To verify the actual conducting of such identification during a short span of field study, it was found difficult mainly because no separate listing was made for the new beneficiaries during any particular year. Instead, all the beneficiaries were being equally serialised with no remarks as to show who among them was/were being enrolled a-new. From what we observed, during field study, it appeared to us, that no much rigidity was adhered to the screening of the beneficiaries due to many local problems narrated to us by our respondents. This issue that only eligible children were provided with SN services, will be dealt with more lucid in the subsequent paragraphs.



NO. OF SNP BENEFICIARIES (STATE LEVEL)

4.4. An over-all number of SNP beneficiaries recorded, as per figures furnished by the Directorate of Social Welfare, a steady increase from 48,885 in 1988-89 to 56,036 in 1991-92 in the State showing thus an increase of 14.62 P.c. in the 4 years or 3.66 P.c. annually. Throughout this period (1988-89 to 1991-92) the 0-6 years children constituted more or less 80% of the yearly total number of beneficiaries. Following the same trend as that of the aggregate number of beneficiaries, the 0-6 years children indicated a yearly increase from 38,274 in 1988-89 to 42,202 in 1989-90 which worked out to + 10.26%. Then by 1990-91 and 1991-92,, the rate of increase registered at 18.08 P.c. and 18.81 P.c. respectively from that of 1988-89 position. Of the remaining two groups, nursing mothers too maintained a constant rise from 4248 in 1988-89 to 4685 in 1991-92, which accounted to 10.29 P.c. during the 4 years period. The number of pregnant <sup>women</sup> recorded initially a rise from 6363 in 1988-89 to 6649 in 1989-90 (4.49 P.c.) but subsequently took a downward trend by falling down to 5394 in 1990-91 but by 1991-92, there again occurred a slight increase to 5877. Table No. 4.2. represents the State Level figures pertaining to the group-wise number of SNP beneficiaries during the reference period.

TABLE NO. 4.2.GROUP-WISE NO. OF SNP BENEFICIARIES IN THE STATE  
( 1988-89 - 1991-92 )

Year	SNP Beneficiaries (Nos)			Grand Total
	Children	Pregnant	Nursing	
	below 6 years	Women	mothers	
1988-89	38,274	6363	4248	48,885
1989-90	42,202	6649	4409	53,280
1990-91	45,193	5394	4495	55,082
1991-92	45,474	5877	4685	56,036

Sources : Directorate of Social Welfare.

Variation in no. of Anganwadi Centres and SNP beneficiaries Compared.

4.5. The figures received from the two District Programme Officers, ICDS(C), posted at Shillong and Tura, showed that there was an increase in the total number of Anganwadi workers from 1017 in 1988-89 to 1086 in 1989-90 working out a percentage increase of 6.49 as against 10.26 in case of children SNP beneficiaries. By the succeeding year (1990-91 the workers totalled to 1462 registering an increase of 35.01 P.c. from that of preceding year whereas the number of S.N.P. beneficiaries (Children) recorded an increase just at 7.09 P.c. These village level functionaries stood at 1536 in number in 1991-92 or 5.06 P.c. increase in 1990-91 as against 0.62 P.c. increase in respect of children beneficiaries. Another aspect that one can notice related to the comparative strength of these workers between that of Garo Hills and Khasi Jaintia. In 1988-89 there were 661 and 356 workers in Khasi Jaintia Hills and Garo Hills respectively. By 1991-92, their number rose to 986 (0.49 P.c. increase) in Khasi Jaintia Hills and 550 (0.54 P.c. increase) in Garo Hills. During these 4 years (1988-89 - 1991-92) the number of the workers rose from 1017 in 1988-89 to 1536 in 1991-92 giving thus a 51.03 percentage of increase or 12.76% annually.

T A B L E NO. 4.3.

NO. OF ANGANWADI WORKERS/CENTRES DURING 1988-89 to 1991-92  
IN THE STATE

Year	DPO I.C.D.S. (C)		State	Percentage of increase from preceding year	P.C. of increase from that of 1988.
	Khasi Hills	Garo Hills			
1.	2.	3.	4.	5.	6.
1988-89	661	356	1017	-	-
1989-90	706	377	1083	6.49	6.49
1990-91	912	550	1462	35.01	43.75
1991-92	986	550	1536	5.06	51.03

Sources : District Programme Officers ICDS(C).

### SNP Beneficiaries in the three Sample Projects :

4.6. The number of SNP beneficiaries presented in the Table No. 4.4. was derived by averaging the actual Nos. of beneficiaries as they stood on the first and last quarters ended 31st March and 31st December of the year as furnished by the CDPOs. From the data supplied by the three Selected Projects, it was found that Rongram ICDS Project excluded the 0-6 years children of Normal category from 1989 onwards while the remaining two projects continued to enlist them in the same manner as they did to children of other categories as they (normal group) were attending non-formal pre-school education conducted by the anganwadis as per provision incorporated in the last sentence of para 3.15 of the "Manual on ICDS" read thus "In other words, all children in the age group 3-5 attending the Anganwadi for non-formal pre-school education are eligible for supplementary nutrition and should be enlisted for that purpose". During field works, through conversation with sample beneficiaries and other local leading men, we came to know that in most of these sample centres, they (local people) regarded the Anganwadies as one of the rural institutions imparting education to their toddlers. As such, the parents sent their young ones to the ICDS Centres for that purpose also and not just for SNP service.

### Aggregate Variations :

4.7. Followed from the explanation narrated at the preceding paragraph (4.6) the total number of SNP beneficiaries under Rongram ICDS Project dropped from 1260 in 1988 to 1127 (11.05%) in 1989 but in subsequent year there occurred a rise, though slightly by 34 (2.7%) in 1990 and then significantly by 421 (33.4%) in 1991 from that of the year 1988. In respect of Bhoi Area ICDS Project, an alternate downward and upward movement was seen during this period from 1988 to 1991. Thus, from 5705 in 1988, the aggregate number of beneficiaries declined to 4521 (i.e. -20.75%) in 1989, then reversed the trend by swelling up to 5519 but by 1991, the number of beneficiaries receded sharply to 4188 (i.e. -26.6%) from that of 1988. Under Thadlaskein ICDS Project, we observed there had been at first, a significant increase in the total number of beneficiaries from 1325 in 1988 to 1689 in 1989 then fell down to 1088 in 1990 and abruptly to 752 or (-) 43.2% in relation to that of 1988. It is therefore to be observed that only Rongram had a positive trend and the other two being negative. Data as supplied by the CDPOs are reproduced in the Table No. 4.4.

Target-group wise variation :

4.8. During the year from 1988- to 1991 the variation in the 0-6 years beneficiaries, under Kongram Project, ranged between 805 to 812(+0.9%) followed by that of nursing mothers between 257 and 523(+103.5%) and lastly by that of the Pregnant women between 198 and 346. With regard to Bhoi Area Project, the number of the 0-6 years beneficiaries stood at 4310 in 1988, then increased slightly to 3974 in 1990 but rapidly slumped to 2616 (-39.3%) in 1991 where as in case of Pregnant women, from 575 in 1988, their number got reduced to 388 in 1989 but thenceforth, took an upward turn to 587 in 1990 and finally to 639(11.1%) in 1991. Similarly, the nursing mothers numbering 820 in 1988 decreased to 578 in 1989 but jumped to 958 in 1990 which worked out to 16.8% increase from that of 1988 and slightly came down to 933 (13.8%) in 1991. Thalaskain Project recorded on the other hand, at first, a maximum increase in the number of 0-6 years beneficiaries from 995 in 1988 to 1634 in 1989 which was equivalent to 64.2% rise but after that the same dropped to 627 in 1990 and steeply to 286 or (-) 71.2% in 1991 from that of 1988 level. In respect of Pregnant women, there registered initially a decrease from 196 in 1988 to 167 in 1989 but the trend changed into opposite direction by rising upward to 258 in 1990 and 250 (27.5%) in 1991. Following a similar tendency, the beneficial nursing mothers recording at 134 in 1988 fell markedly to 88 in 1989 but then rose to 203 in 1990 and lastly to 216 in 1991 giving thus an increase of 61.2% from that of 1988.

T A B L E NO. 4.4.

NUMBER OF BENEFICIARIES RIES BY GROUPS IN THE  
THREE I.C.D.S. PROJECT DURING  
1988 - 1991

Target groups of beneficiaries	1988	1989	1990	1991
1. Children of 0-6 years	805	4310	995	546
2. Pregnant Women	198	575	196	160
3. Nursing Mothers	257	820	134	421
Total	1260	5705	1325	1127

Note : Figures in brackets are percentages of increase or decrease (-) as compared from that of 1988 position.

No. of Anganwadis in the 3 Sample ICDS Projects :

4.9. During 1988-89, the number of anganwadis under the 3 Projects totalled to 274 and by 1989-90, rose to 302. Their number however, deflated to 287 in 1990-91 and 1991-92. The decrease may be attributed to the carving out of a part of the original Thadlaskein ICDS Project and the anganwadis there-of for constituting a new ICDS Project known as Amlarem ICDS Project. Observing by project, it was found that the anganwadis Centres under Rongram remained at 61 in no. throughout this period from 1988-89 to 1991-92. Besides that, one Centre was having no worker in 1991-92. In respect of the two Projects, while their Bhoi Area(anganwadis) number rose from 108 in 1988-89 to 127 in 1989-90 and stagnated at this level till 1991-92, that of Thadlaskein also, at first, following the same direction by rising from 105 in 1988-89 to 114 in 1989-90 but later by 1990-91, their (anganwadis) number dropped to 99 till the subsequent year, (the reason as stated earlier). A Table No. 4.5. is prepared to their effect.

T A B L E NO. 4.5.

<u>NO. OF ANGANWADIS UNDER THE THREE SELECTED PROJECTS</u> (1988-89 - 1991-92)					
<u>Projects</u>	<u>1988-89</u>	<u>1989-90</u>	<u>1990-91</u>	<u>1991-92</u>	<u>Remarks</u>
<u>1.</u>	<u>2.</u>	<u>3.</u>	<u>4.</u>	<u>5.</u>	<u>6.</u>
Rongram	61	61	61	61	*One Centre had no anganwadi worker.
Bhoi Area	108	127	127	127	
Thadlaskein	105	114	99	99	
<b>Total :</b>	<b>274</b>	<b>302</b>	<b>287</b>	<b>287</b>	

No. of Beneficiaries in the Sample Anganwadi Centres :

4.10. The actual number of SNP beneficiaries consisting of Children below 6 years, the Pregnant Women (PW) and the nursing mothers(NM) was collected as they stood on the months of March and December of any particular year, wherever, available. Therefore, the number appeared in the Table No. 4.6. represented the average no. of each target group. It will be seen that out of the eight samples only two of them could make available the data as required for all the years from 1988- to 1991. In contrast

one Centre (i.e. Nongkhrah under Bhoi Area Project) which is still functioning reported to have no Registers at all, as the same had been torn out and used for wrapping medicines. This state of affairs had already been brought to the knowledge of the concerned CDPO. Related to this Centre, there was another one viz. the worker of which was found to have some registers/papers but full of blank pages. These two workers have been in their respective posts since the beginning of the centres. The other remaining Centres were having incomplete information due to resignation of the respective Anganwadi worker.

4.11. During 1988, the total number of SNP beneficiaries ranged between 48 (Dolongmanda's) and 130 (Kyrdem's) with nil returns from 3 Centres. In 1989, Pilangkata took the lead with 110 Nos. of beneficiaries followed by Kyrdem (104 Nos) while that of Dolongmanda and Nartiang Pohshnong occupied the lowest position with 54 each. In 1990, however, Allegre, with 106 beneficiaries out-numbered very slightly the Kyrdem Centre having 103 Nos. Again, Dolongmanda had the least number of beneficiaries with just 52 only. In between we had Pilangkata, Sonidan and Nartiang Pohshnong with 89, 88 and 81 Nos. of SNP beneficiaries respectively. In 1991, Kyrdem and Allegre again topped the other centres having 128 and 127 Nos. of beneficiaries respectively followed by Nartiang Pohshnong (86), Pilangkata (85) and lastly Umjala-siaw (66). On average, however, the number of beneficiaries stood between 80 and 98 during this period. Figures collected from the sample Anganwadi Centres are presented in Table No.4.6.

TABLE NO.4.6.

NUMBER OF SNP BENEFICIARIES AS AVAILABLE FROM THE  
SAMPLE ANGAWADI CENTRES (1988 - 1991)

Sl. No.	Anganwadi Centres	Target Groups	1988	1989	1990	1991
1.	2.	3.	4.	5.	6.	7.
1.	Allegre	0-6 Yrs	N.A.	610	830	1050
		P.W.		5071	120106	130127
		N.M.		50	110	90
2.	Dolongmanda	0-6 Yrs	310	380	390	
		P.W.	10048	5054	35052	N.A.
		N.M.	70	110	80	
3.	Pilangkata	0-6 Yrs	910	820	750	730
		P.W.	70104	100110	4089	6085
		N.M.	60	180	100	60



1.	2.	3.	4.	5.	6.	7.
4. Nongkhrach	O-6 Yrs P.W. N.M.	N.A.	N.A.	N.A.	N.A.	N.A.
5. Sonidan	O-6 Yrs P.W. N.M.	N.A.	84 N.A. N.A.	88 N.A. N.A.	88	N.A.
6. Kyrdem	O-6 Yrs P.W. N.M.	103 13 14	130	92 104 14	85 4 14	104 7 17
7. Nartiang- Pohshnong	O-6 Yrs P.W. N.M.	50 5 1	56 N.A. N.A.	54 54 13	61 7 13	66 9 11
8. Umjalasiaw	O-6 Yrs P.W. N.M.	62 14 6	82	70 16 N.A.	86	44 19 13
Total :		420	563	519	492	638
Average -Total		84.0	80.4	86.5	98.4	
	O-6 Yrs	67.4	68.7	71.8	78.4	
	P.W.	9.8	8	5.3	8.8	
	N.M.	6.8	10.5	9.3	11.2	

Sources : Anganwadi Centres.

#### Physical Achievements :

4.12. Based on the relevant data furnished by the implementing agencies, the physical achievement of the scheme may be measured in terms of the average number of beneficiaries for anganwadi. This is indicated in the Table No. 4.7. In the State as a whole, as per Directorate's figures the average no. of beneficiaries per Anganwadi stood at 48 and 49 during 1988 and 1989 respectively. The number dropped down to 38 in 1990 and to 37 in 1991. The three sample projects' average number of beneficiaries per Anganwadi worked out to just 29 Nos in 1988 and 1990, 24 Nos in 1989 and 23 Nos in 1991. As against this gloomy feature presented by the 3 sample projects, the selected anganwadi Centres raised the figures as high as 84 Nos of beneficiaries per Centre in 1988, 87 Nos in 1989, 86 Nos in 1990 and further to up to 98 in 1991. The results showed a wide gap of discrepancy in the achievements at the three levels. While anganwadi Centres attained the highest no. of beneficiaries per centre, that of project touched the lowest. In this connection, it is to be noted that the sample anganwadi centres all belonged to the three selected projects themselves. Further, the trend in the movement of the figures from one year to another was not consistent between that of State and of the Centres. It is not



known if these results as derived from the data furnished by the three projects became satisfied to the implementing Department. When for instance during 1991, it worked out to only 23 beneficiaries per anganwadi Centre. This may be due to inconsistency of the figures maintained at different levels.

Relative Position of the Target Groups :

4.13. At the State level, the 0-6 years Children remained around 80 P.c. of the totals during 1988-1991, pregnant women between 10.5 and 12.5 P.c. and Nursing mothers around 8 P.c. The 0-6 years beneficiaries at the Project Level however oscillated between 79.2 and 56.5 P.c. of the total, Pregnant Women between 8.3 and 17.4 P.c. and while that Nursing mothers varied between 12.5 and 26.1 P.c. Coming to the anganwadi-centre level it is seen that in so far as the 0-6 years Children's proportion is concerned there was a similarity to that of the State Level position in which they comprised to around 80 P.c. of the totals during the reference period while that of Pregnant Women and Nursing mothers, a wide gap of divergence was noticed as can be seen from the Table No. 4.7.

TABLE NO. 4.7.

AVERAGE NUMBER OF BENEFICIARIES AT DIFFERENT LEVELS  
( 1989 - 1991 )

Year	0-6 years				Pregnant Women			Nursing Mothers			Total Target Groups		
	State	Pro-ject	An-gan-wadi	An-gan-wadi	State	Pro-ject	An-gan-wadi	State	Pro-ject	An-gan-wadi	State	Pro-ject	An-gan-wadi
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
1988	38	22	67	6	3	10	4	4	7	48	29	84	
	(79.2)	(75.9)	(79.8)	(12.5)	(10.3)	(11.9)	(8.3)	(13.8)	(8.3)				
1989	39	19	69	6	2	8	4	3	10	49	24	87	
	(79.2)	(79.2)	(79.3)	(12.2)	(8.3)	(9.2)	(8.2)	(12.5)	(11.5)				
1990	31	20	72	4	4	5	3	5	9	38	29	86	
	(81.6)	(69.0)	(83.7)	(10.5)	(13.8)	(5.8)	(7.9)	(17.2)	(10.5)				
1991	30	13	78	4	4	9	3	6	11	37	23	98	
	(81.1)	(56.5)	(79.6)	(10.8)	(17.4)	(9.2)	(8.1)	(26.1)	(11.2)				

Note : Figures in brackets indicate percentages to the respective total.

2. The figures in the table are rounded to the nearest integers.

Achievement by the three Selected Projects :

4.14. Among the three selected ICDS Projects viz. Rongram, Bhoi Area and Thallaskein, let us see their respective achievement in regard to the number of beneficiaries per anganwadi Centre. The Table No. 4.8. indicated that Bhoi Area was having beneficiaries numbering between 33 and 51 per Anganwadi during 1988 to 1991 nearly equivalent to that of State level shown in the Table No. 4.7. Rongram project could achieve just between 19 and 21 during the first three years of the period under reference but by 1991, the member had gone upto 29. Now, what is very pitiable to see is that of Thallaskein ICDS Project where the number of beneficiaries per anganwadi ranked at the lowest level ranging just between 7 and 12 during the period referred to above although it became the only project where the anganwadi Centres outnumbered the number of villages as per 1981 census. As against this gloomy feature reflected by the Thallaskein ICDS Project, it is necessary to point out that the two anganwadi Centres, **Selected** under the project as samples for the purpose of study, had shown the average number of beneficiaries as 69 (Nartiang-Pohshnong) and 78 (Umjalasiaw) during the period under reference. One therefore, may be justifiable to form doubt about the compilation of the relevant data obtainable from the anganwadi Centres and hence, the figures so furnished by CDPO for the purpose of this study without realising the implications of what she was doing.

T A B L E NO. 4.8.

NUMBER OF BENEFICIARIES PER ANGANWADI UNDER THE  
THREE SAMPLE PROJECTS

Year	0-6 years			Pregnant Women			Nursing Mothers			Total			
	Rongram	Bhoi Area	Thallaskein	Rongram	Bhoi Area	Thallaskein	Rongram	Bhoi Area	Thallaskein	Rongram	Bhoi Area	Thallaskein	
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
1988	13	39	9	3	5	2	4	7	1	20	51	12	
1989	9	28	5	3	3	1	7	5	1	19	36	7	
1990	12	34	6	3	5	3	6	7	2	21	46	11	
1991	14	21	3	6	5	2	9	7	2	29	33	7	

### Estimated SNP Beneficiaries (1991 Census)

4.15. A rough estimation of the SNP beneficiaries, worked out on the basis of Standard Calculation for 1000 population (as given in the Manual on ICDS at page 233 and reproduced at the ANNEXURE I of the Report) is shown in the Table NO. 4.9. in respect of State and the three Sample ICDS Projects. Since the State as a whole belongs to Tribal Area, hence the rates per 1000 population also are taken of those ones (rates) as given against the Tribal Area. The Scheme's targetted groups included (i) Severely malnourished Children (ii) Other Children in need of supplementary nutrition (iii) Pregnant Women and Nursing Mothers. The proportion of the (i), (ii) and (iii) SN beneficiaries was estimated at 17, 110 and 18 respectively per 1000 population and the results are given in the Table No. 4.9. for each category.

TABLE NO. 4.9.

#### ESTIMATED NUMBER OF SNP BENEFICIARIES AS PER 1991 CENSUS

Sl. No.	State Project	1991 Population (Rural)	No. of Severely malnourished children @ 17 per 1000	No. of Other children in need of SN @ 110 per 1000	Total (4+5)	SN beneficiary among pregnant and nursing mothers @ 18 per 1000	Total estimated No. beneficiaries (cols 6+7)
1.	2.	3.	4.	5.	6.	7.	8.
1.	State	1444731	24560	158920	183480	26005	209485
2.	Rongram/Block ICDS Project	43480	739	4792	5521	782	6303
3.	Bhoi Area ICDS Project (i.e. Nungpoh Bhoi Area C.D. Blocks)	127312	2164	14004	16168	2292	18460
4.	Thajlaskein Block/ICDS Project.	57793	982	6357	7339	1040	8379

Extent of Achievement as against the Estimated Nos. of Beneficiaries.

4.16. ~~Since many villages in the State were yet to be covered~~ by the Scheme, it is not therefore possible to cover either fully or nearly fully all the eligible beneficiaries in the State. Same was the expectation at least, for the two selected ICDS Projects which had not been able to set up anganwadi centres for all the villages. Just to have an idea, however, of the extent of achievement as in 1991, let us have a look on this aspect as illustrated in the Table No. 4.10. It will be seen that out of eligible of 183480 Nos. of the estimated SN Children, in 1991, only 45,474 equivalent to 24.8% of them only could be covered leaving out thus of 75.2%. Similarly out of the estimated 26005 Nos. of pregnant and nursing mothers only 10562 or 40.61% of them were reported to have been beneficial from the scheme. Taken together the estimated no. of beneficiaries (209485) in the State, the overall achievement (56,036) as in 1991 worked out to 26.85% i.e. about a quarter of the estimated target groups. The position was more or less the same under the selected sample projects when out of the targetted 5522 0-6 years Children, Rongram project was able to cater only 812 or just 14.7%. But in respect of pregnant women and nursing mother the number of beneficiaries (869) exceeded the estimated number (783). How the number of the pregnant and nursing mother SN beneficiaries could exceed that of 0-6 years children was a matter not clear to us. Taking, however, the total beneficiaries together, the extent of achievement touched the level of 26.7% very close to that of State position (26.8%). Under Bhoi Area, out of 16168 0-6 years children, the actual beneficiaries stood at 2616 rating thus at 16.2 P.c. Like its other counterparts, the percentage of achievement in respect of pregnant and nursing mother was recorded comfortably high i.e. 68.6 P.c. An over-all extent of achievement was however, found to be just 22.7 P.c. that is, lower than that of State level (26.8 P.c.). But the least of achievement of all was that of the Thadlaskein Project which, as matter of fact, secured a unique position among the three selected samples being the only one whose anganwadi Centres (99 nos.) in 1991 far out-numbered the 1981 census number of villages (67 nos.). As in 1991, the 0-6 years SN beneficiaries numbering 286 accounted very negligible just 3.9% of the estimated 7339 beneficiaries. In regard to pregnant and nursing mothers, the position was however of average with the percentage of coverage being 44.8. But again, the Project touched the bottom most level when taken the achievement 752(90P.c.) against the total 8379 beneficiaries.

TABLE NO. 4.10.

## ESTIMATED NO. OF SN BENEFICIARIES AND THE ACHIEVEMENT THERE-OF IN 1991.

State/Project	Estimated Nos. of SN beneficiaries in 1991			Achievement in 1991		
	0-6 years children	Pregnant women and nursing mothers	Total (2+3)	0-6 years children	Pregnant women & nursing mothers	Total (5+6)
1.	2.	3.	4.	5.	6.	7.
State	183480	26005	209485	45474 (24.8)	10562 (40.6)	56036 (26.8)
Rongram	5522	783	6305	812 (14.7)	869 (111.0)	1681 (26.7)
Bhoi Area	16168	2292	18460	2616 (16.2)	1572 (68.6)	4188 (22.7)
Thadlaskein	7339	1040	8379	286 (3.9)	466 (44.8)	752 (9.0)

Figures in brackets indicate percentage out of the respective estimated no.

Feeding Accommodation :

4.17. For the Distribution of foods to the beneficiaries, the study found that from among the 8(eight) Sample Anganwadi Centres, 3(three) of them conducted their feeding activities in the local community Halls and 2(two) in the local school buildings (i.e. after the school hours). It is, however, to be pointed out that of the above 3 Community Halls, 2(two) of them were also used as schooling and as such, feeding had to be served after school. There was only one case where, Community Hall was not utilized for schooling purpose. The anganwadi worker could, as such, utilize the building for feeding purpose right from morning time. Only in one centre, we had a separate shed constructed by the village community exclusively for this scheme. As a contrast to the above instances, there were however, two anganwadi centres which performed their food distribution activities in an open air due to absence of any accommodation. During rainy days, they managed it in what ever possible at the Anganwadi workers' or helpers' verandah.



Convenient Distance :

4.18. The study would like to take into consideration whether a distance from the beneficiaries residence to the feeding centre was within an easy reach by the former. This fact actually depends upon the topography of the concerned villages. Thus, from our sample the two selected Anganwadi Centres under Rongram Project were found to have dwelling houses located at different clusters which were quite apart from each other. Hence out of the total 30 selected beneficiaries, 8(26.7%) of them considered the distance of the feeding place to the respective residence as being inconvenient. In case of Bhoi Area Project (comprising 2 C.D. Blocks) we had only 3(5%) out of the total 60 samples who thought the feeding place as being far from their residence; whereas in Thadlaskein Project there was only 1(one) out of 30 selected beneficiaries who held a view as above. To be precise we may look at the Table No. 4.11. It will be seen that, on the whole, out of 120 selected beneficiaries, only 12(10%) of them viewed the feeding Centres as being far from their respective residence while 108 or 90% did not consider so.

TABLE NO. 4.11.

FEEDING CENTRES' DISTANCE TO BENEFICIARIES' RESIDENCES.

Name of Project	No. of Centres Selected	Beneficiaries' View		Total beneficiaries
		Far	Not far	
1.	2.	3.	4.	5.
1. Rongram	2	8	22	30
2. Bhoi Area	4	3	57	60
3. Thadlaskein	2	1	29	30
Total;	8	12	108	120

Amount of food served (Anganwadis)

4.19. As envisaged in the Scheme, there was a unanimity also among the interviewed anganwadi workers about a double share of SNP foods being served to the severely malnourished children graded under group nos. III & IV. To ensure uniformity in the amount of foods to be distributed to the beneficiaries, it is expected that the implementing Department should provide the workers with a standard content or spoon. But what actually happened was that 3 of the eight selected samples had no spoons supplied by the

Department. They had to use their own curry-spoon the size of which might not correspond to the ones issued by the Department. The usual practice among the workers was that while a curry-spoon-full was supplied to the malnourished children (MC), the severely malnourished Children (SMC) or Grades III and IV received two spoonfuls. A deviation to this general practice was however, found in case of one newly appointed worker who was yet to learn the operation of weighing machine for grading the beneficiaries according to their weights and ages. According to her an equal quantity was distributed to both categories of the malnourished Children. In relation to the pregnant women (PW) and nursing mothers (NM) the study found only 2 out of the 8 selected sample anganwadis stated to have provided a double share to them (PW & NM) as required by the Scheme. The rest treated these beneficiaries alike with those of MCs for this purpose.

#### Amount of foods received (Beneficiaries' view)

4.20. The study obtained also the view of the sample beneficiaries as to the estimated amount of foods they used to receive from the feeding Centres. It is observed, as per Table No. 4.12, that 96 (80%) of the total 120 samples indicate to have to been supplied with one curry-spoonful (csf) each of commodities (i.e. like Bengal gram, dry pea etc) which tallied with the statement of the anganwadis. Some respondents (parents of the children) being unable to attend personally the feeding Centre preferred to measure the quantity of foods distributed to their toddlers on the basis of contents they provided to them. Still in most cases, though the quantity was stated in different units, yet the same tended to be approximately equal to 1 csf. Hence, a cup-full, glass full, a mugful (small size) a handful (adult) all may be taken to equate to 1 csf. Therefore, if we add together the number of beneficiaries saying a cupful, a glass-ful, a mugful (small size) and handful, we got 1+2+3+4 respectively = 10 nos. Adding to 96, we had  $(96+10) = 106$  beneficiaries or 88.3% of the total samples whose statement of the quantity of SNP foods received was more or less equal to 1 curry-spoonful (csf). From these findings we may safely say that on average the recipients were getting one curry-spoonful each.

4.21. From the above inference and as per Table No. 4.12. none of the samples seemed to be awarded with 2 csfs, although some of them (samples), were clearly identified as belonging to Group III or IV. One of our samples, was even referred to a nearby PHC, but according to parent's estimation, he received just half of a small mug i.e.  $\frac{1}{2}$  csf. One can therefore hardly justify oneself in suggesting that a special care was taken in respect of the SMCS at the time of SNP food distribution. The reasons, as could be observed, may be ascribed to (i) the distribution of food was entrusted to a helper and (ii) the monitoring of the growth of a child did not get its due place to the anganwadi workers. (we shall substantiate this fact in subsequent paragraph(s). As already highlighted, the distribution of beneficiaries according to their stated amount of SNP foods received is shown in the Table No.4.12.

TABLE NO. 4.12.

Distribution of beneficiaries according to the stated amount of SNP foods received.

Project	No. of centres selected	1	2	3	4	5	6	7	8	9	10	11	12	13	14
		Csf	Cf	Gf	Mf	Hf	Ni	Total							
		1	2	1	2	1	2	1	2	1	2	1	2	1	2
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.		
Rongram	2	30	-	-	-	-	-	-	-	-	-	-	-	-	30
Bhoi Area	4	37	-	1	3	2	1	3	6	4	1	2			60
Thadlaskein	2	29	-	-	-	-	-	-	-	-	1	-			30
Total :-		96	-	1	3	2	1	3	6	4	2	2			120

Note Csf = Curry-spoonful; cf = cupful;  
Gf = glassful; Mf = mug-ful; Hf = handful  
Ni = No idea.

Food Items :

4.22. During the reference period, the main food items served in the ICDS anganwadi centres were found to consist of Bengal gram, ground nut, suji, rice, soya bean and dry pea besides complementary items like sugar, salt, M. oil and mug-dal. The proportion of the said food items to the total quantities of foods used during 1988-89 to 1991-92 are indicated in the Table No.4.13. Bengal gram, ground nut, suji and rice were predominant under the Rongram ICDS Project. During 1990-91 and 1991-92, Bengal gram occupied 54.4% and 53.3% respectively followed by ground nut 35.9% in 1990-91, suji 34.6% in 1988-89 and rice 23.9% in 1991-92 etc. Besides those already four mentioned food items,

soya bean and dry pea were added to the list of food items distributed to the remaining two selected projects (Bhoi Area and Thadlaskein). Thus, during 1989-90, dry pea assumed 48.2% and in 1991-92, soya bean accounted for 59.4%. Bengal gram and ground nut did also, however, take a significant position with 54.4% and 35.9% respectively during 1990-91. In so far as Thadlaskein project was concerned, it was observed, that rice comprised 49.2% in 1989-90, soya bean 51.9% in 1990-91 while Bengal gram 44.1% in 1991-92.

....37/-

PROPORTIONS OF THE MAIN SNP FOOD ITEMS SERVED TO THE THREE ICDS PROJECTS,  
1988-89 - 1991-92.

ST. No.	Food Items	1988-89	1989-90	1990-91	1991-92
1.	Bengal gram	19.5	26.8	54.4	53.3
2.	Ground nut	15.5	24.4	20.8	15.7
3.	Suji	34.6	14.2	26.7	26.1
4.	Rice	14.7	20.6	24.8	21.5
5.	Soya bean		22.3	16.1	18.2
6.	Dry pea			48.2	
7.	Other items	35.2	23.4	32.8	27.6
		100.0	100.0	100.0	100.0

Sources :- ICDS Project.



4.23. One of the guiding principles, suggested in the guideline in the matter of selection of food items is that it should be increasingly based on locally available food items (Para 3.21, Manual). In practice, however, it was found that only Soya bean (rice being an item of daily diet) appeared to satisfy this norm. The said food item was however, found conspicuous by its absence from among those (food items) issued to Rongram Project although it (Soya bean) flourishes well in the area. By not adopting this principle, the result was that very few varieties of food items could be supplied to the projects. As a consequence, most of the sample respondents i.e. among the pregnant women, nursing mothers and even among the mothers of child below 6 years also expressed their non-appreciation in the limitation of food items. They would be very happy if more varieties could be added like fruits of different kinds including banana, milk powder etc.

Beneficiaries by categories (at Project )

4.24. The 0-6 years beneficiaries are categorised according to degree of their malnutrition based on their body weights. Grading is normal, Grade I, II, III & IV with last two grades being classified as severely malnourished children (SMC) and the grade II & I simply as malnourished children (MC) whereas normal children are eligible for SNP foods just because of their participation in the non-formal pre-school education as mentioned earlier, (Para 4.6.) otherwise not, and are therefore grouped as MC. Accordingly, the number of beneficiaries were obtained from the three ICDS Projects by their respective grade for the months of March and December of the year 1988 to 1991. Ultimately, their respective average number, as they stood during the first and the last quarter, was obtained and the same was reproduced in the Table No. 4.14. including that of Pregnant women/Nursing mothers. Analysing of Data may be seen in the subsequent Chapter relating to impact of the Scheme. 7

TABLE NO. 4.14.

NO. OF '0-6 YEARS' SNP BENEFICIARIES CLASSIFIED AS SMC AND MC & ETC. ( 1988-89 - 1991-92).

Project	1988-89			1989-90			1990-91			1991-92		
	SMC	MC	PW/NM	SMC	MC	PW/NM	SMC	MC	PW/NM	SMC	MC	PW/NM
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
1. Rongram	22	989	455	29	518	581	40	716	540	107	731	870
2. Bhoi Area	229	3800	1394	137	3418	966	213	4131	1542	111	2543	1572
3. Thadla-skein	25	1105	329	38	1597	305	16	611	461	13	273	466

Grading beneficiaries at Anganwadi Centres :

4.25. From the selected Centres, as mentioned earlier, it was found that there was no regular measurement of the weights of the children below 6 years of age. In one or two centres, the absence of workers for certain period of time might be the cause of this irregularity. There were some centres where even the records for enrolment were not available not to say of grades for the beneficiaries. Some centres, which tries to fulfil this requirement but seemed to encounter certain difficulties either due to non-attendance of some beneficiaries on particular days set aside for this purpose or for some other reasons. As a result, there were still many of the beneficiaries remained ungraded during the two months (March and December) taken by us for the particular study. However for the sake of this study all these ungrading beneficiaries were treated as belonging to malnourished category because quantity of foods served to them was supposed to be made on that basis. So whatever data available, the same were indicated in the Table No. 4.15. It can be observed that out of eight selected samples, five of them did endeavour to carry out this particular function. The five centres included Allegre, Pilangkata, Kyrdem, Nartiang-Pohshnong and Umjalaw.

NO. OF 0-6 YEARS BENEFICIARIES BY GRADES IN THE SELECTED  
ANGANWADI CENTRES - (1988 - 1991)

Note :

N= Normal  
MC= Malnourished Children  
SMC= Severely Malnourished Children  
N.G.= Non-grading Children  
PW = Pregnant women  
NM = Nursing Mothers

Sources: Selected Anganwadi Centres.

Expenditure on SNP :

4.26. The food items with their involved cost used for SNP during 1988-89 to 1991-92 were listed in the Annexure II as received from the three selected ICDS Projects. The Bhoi Area project comprising the two C.D.Blocks (Bhoi Area & Nongpoh) should naturally embody an higher quantum of out-lay than any of the remaining two projects. Thus, its expenditure on SNP food bills amounted to Rs. 10 lakhs (nearing) in 1988-89 and rose to Rs. 10.74 lakhs in 1989-90 as against Rs. 7.29 lakhs and Rs. 9.29 lakhs by that of Thadlaskein during the corresponding period. A low scale was however exhibited by Rongram Project with Rs. 6.85 lakhs in 1988-89 and Rs. 7.37 lakhs in 1989-90. By 1990-91, a drastic slashing in the SNP out-lay was apparent in all the three projects when the cut was effected to Rs. 5.89 lakhs or 45.17 p.c. from that 1989-90 in case of Bhoi Area Project. The same trend was noticed in all the Projects through with varying degrees. The severest reduction was noticed in respect of Rongram Project when the amount dropped abruptly from Rs. 7.37 lakhs in 1989-90 to Rs. 2.56 lakhs or 65.26 p.c. In contrast, however, the fall in case of Thadlaskein appeared to be mild in comparison to the other two as it registered just 25.23 p.c. (i.e. from Rs. 9.29 lakhs in 1989-90 to Rs. 6.76 lakhs in 1990-91). At the same time the out-lay allowed to Thadlaskein during 1991-91 & 1991-92 was found to be much higher than that of Bhoi Area operating in the entire present Ri Bhoi District. These figures of expenditure are indicated in Table No. 4.16. The figures within the brackets under Table No. 4.16 depict the amount of expenditure supposed to be incurred daily as derived from the annual cost of SNP foods. The results give us a daily total amount involved under the three Projects ranging from Rs. 5072.59 to Rs. 9137.47 during the reference period from 1988-89 to 1991-92. This analysis gives us an idea of the financial implications the Scheme involves, if we are to take into account of all the 26 ICDS Projects as in 1991-92 and what more if all the 30 C.D. Blocks are to be all covered by the Scheme.

TABLE NO. 4.16.

EXPENDITURE ON SNP FOODS BY THE THREE SELECTED PROJECTS  
DURING 1988-89 - 1991-92

Sl. No.	Name of the ICDS Project	(Rs.)	1988-89	1989-90	1990-91	1991-92
1.	2.		3.	4.	5.	6.
1.	Rongram		6,84,669.00 (2,282.23)	7,37,544.00 (2,458.98)	2,56,317.00 (854.39)	5,76,296.00 (1,920.99)
2.	Bhoi Area		9,99,997.18 (3333.32)	10,74,103.90 (3580.55)	5,58,929.18 (1963.10)	6,01,207.22 (2004.03)
3.	Thadlaskein		7,29,364.44 (2431.21)	9,29,532.29 (3098.44)	6,76,529.37 (2255.10)	6,52,748.49 (2175.83)
	Total Daily		(8046.76)	(9137.47)	(5072.59)	(6100.85)

Notes : Figures in brackets indicate daily amount of expenditure.

Sources : ICDS Projects.

SNP Foods to Anganwadi Centres :

4.27. Initially, the aim was to obtain the particulars of food items issued to the Sample Anganwadi Centres from the records of the concerned workers themselves. It was, however, found that while some of them did have enough records for our requirement, in so far, as the period during which they were posted there-to, but some of them as already indicated did not maintain even the SNP Register, not to say of Stock Register. Besides, there was, in some cases, a discrepancy between the figures recorded by the workers(Anganwadis) and that of the concerned CDPOs' Offices. Under this condition it was thought advisable to get the year-wise list of foods items with their quantities issued to the selected Centres from the concerned CDPOs. Thus, the quantity of each food items issued to the 8(eight) sample Anganwadi Centres viz. Allegre, Dulongmunda(Rongram ICDS), Pilangkata, Nongkhrah Sonidan, Kyrdem(Bhoi Area), Nartiang-Pohshnong(Thadlaskein) was obtained from their respective CDPO and the same was detailed at Annexure-III.



The Value of SNP Foods Issued to Selected Anganwadi Centres :

4.28. Since the money value of every item of foods procured by the Sample ICDS Projects was already furnished by the latter, so the same was made use of in determining the cost involved for every food item distributed at the Anganwadi Centre as well. Accordingly, the Annexure-IV indicated the money value of each food item issued to the Centre during 1988-89 to 1991-92. The Statement worked out also the total cost per year as well as average daily expenses for each of the selected Centres in all the 4(four) years. For meeting the purpose of this study, this average daily expenditure on SNP involved in the sample Anganwadi Centres is reproduced in Table No. 4.17. The picture at Table No. 4.17 reveals an abrupt fall during 1990-91 in the amount of daily expenditure in all the Centres except Dolongmanda. This followed the tendency occurring in the Projects under which they belonged to. But while this trend continued to persist even in the subsequent year (1991-92) in respect of the 4(four) Centres viz, Pilangkata, Nongkhrah Sonidan & Kyrdem which were all under Bhoi Area ICDS, an opposite direction was however, registered in respect of the remaining Centres soon in 1991-92.

T A B L E NO. 4.17.

DAILY AVERAGE EXPENDITURE ON SNP FOODS IN THE SELECTED  
ANGANWADI CENTRES DURING 1988-89 -- 1991-92.

Year	A N G A N W A D I C E N T R E S (Rs.)								
	Allegre	Dolong-	Pilang-	Nong-	Soni-	Kyr-	Nartiang	Umja-	
		manda	kata	khrah	dan	dem	Poh-	la-	
							shnong	siaw	
1.	2.	3.	4.	5.	6.	7.	8.	9.	
1988-89	46.65	19.20	38.39	31.25	31.92	33.46	41.67	40.03	
1989-90	41.82	21.25	41.84	33.70	40.23	40.56	35.42	28.43	
1990-91	34.48	22.25	14.00	11.69	16.50	16.89	19.59	19.40	
1991-92	40.00	19.64	15.64	10.61	16.18	18.56	30.83	29.77	

Sources : ICDS Projects.

Sanctioned Rates to SNP Beneficiaries by Categories :

4.29. The rates sanctioned to SNP beneficiaries differed according to Categories. Thus, 0-6 years Children classified as severely malnourished Children (SMC) were entitled to an amount of food of 90 paise per head per day and the remaining SNP Children Categorized as Malnourished Children (MC) for 45 paise each per day

:- 44 -:

while that of Pregnant Women(PW) or Nursing Mothers(NM) they were earmarked to get an amount of SNP food equivalent to 75 paise per head during 1983-89 to 1991-92. The rates stood revised upward from 1991-92, at which rates the SMC was to get a quantity of food for Re. 1.00, MC=60 paise and PW/NM =80 paise each.

No. of Beneficiaries by Categories :

4.30. To some extent, the study faced some handicap pertaining to the numbering of beneficiaries by categories by the selected Anganwadi Centres. That is, besides those Centres having blank records for SNP beneficiaries, most of these selected Centres though having no doubt the list of beneficiaries but could not ensure regular and up-to-date categorisation of 0-6 years Children for certain practical difficulties as discussed at para 4.25. A back-log of Children remained ungraded. Therefore, for our purpose, the Children not graded(N.G.) numbered in Table No. 4.15, were conveniently classed as MC Children, in the belief that they were given with an amount of food rated of 45 paise/60 paise each during 1988-89 - 1991-92. Thus, the category-wise No. of beneficiaries arrived at by grouping the average Nos of MC Children and N.G. Children appeared in Table No. 4.15. is reproduced in Table No. 4.18, excluding those 3 Centres having no records on SNP beneficiaries viz. Dolongmanda, Nongkhrah and Sonijan.

T A B L E NO. 4.18.

CATEGORY-WISE AVERAGE NO. OF BENEFICIARIES IN THE FIVE SELECTED ANGANWADI CENTRES (DURING 1988- 1991)

Year	Grade	Alle- gre	Pilang- kata	Kyr- dem	Nartiang- Pohsnong	Umjalaslaw
1.	2.	3.	4.	5.	6.	7.
1988	SMC			2	-	1
	MC	N.A.	91	101	55	64
	PW&NM		9	14	3	7
1989	SMC			3	2	1
	MC	71	83	91	52	64
	PW&NM	5	14	6	-	8
1990	SMC	27	-	4	2	
	MC	70	75	82	60	NR.
	PW&NM	12	14	9	10	
1991	SMC	7	-	2	-	-
	MC	90	73	102	65	41
	PW&NM	11	12	12	10	14

Sources : Anganwadi Centres.

.....45/-

Actual Expenditure Versus Rates Sanctioned :

4.31. Now, having obtained the daily amount of expenditure and as well as the number of beneficiaries in categories, it is the normal methodology of Evaluation Study to evaluate the extent of achievement. That is how the actual amount spent on SNP did meet the rates sanctioned per head of beneficiaries. The procedure adopted in this connection is simple enough i.e. reducing the actual daily expenditure so arrived at to rates earmarked for individual beneficiary of different categories. An illustration of our exercise was detailed at Annexure V taking Allegre Anganwadi Centre as an example with reference to year 1990-91's amount of daily expenditure and an enrolment of 1990. The calculation arrived at and shown in the Annexure-V has clearly shown that should the amount of SNP foods served to the beneficiaries commensurate to rates earmarked for each, the amount per day should have come to Rs.64.80 during 1990-91. But the actual amount arrived at according to data supplied, recorded to Rs. 34.48 only instead per day during the period. Accordingly, the amount of SNP foods served to each SMC in 1990 was equivalent to 48 paise instead of 90, to MC=24 paise in place of 45 paise and to PW/NM =40 paise instead of 75 paise. In this way, the money value of SNP foods served to each beneficiary in the 5(five) Anganwadi Centres basing on the actual amount spent per day during the years 1988-89 to 1991-92 was worked out and shown in Table No. 4.19. According to the Results so calculated, it is obvious that only 2(two) Centres viz. Allegre and Nartiang Poh-shnong could achieve the stated rates for their beneficiaries but theirs also only for the period from 1988-89 to 1989-90, when 53 paise and 88 paise amount of foods was served to MC & PW/NM in 1989-90 respectively at Allegre Centre. At Nartiang Poh-shnong, MC got 69 paise each and PW/NM Rs. 1.16 paise each in 1988-89 and Rs.1.26 each for SMC in 1989-90 and 63 paise for PW/NM higher than the Scheduled rates of 90 paise for SMC & 75 paise each for PW/NM. For the remaining reference period (1990-91 & 1991-92), the Table No. 4.19. amply exhibited of the shortfall of the money value of SNP foods served to beneficiaries from their due rates of 90 paise for SMC, 45 paise for MC & 75 paise for PW/NM upto 1990-91 and Re. 1.00, 60 paise and 80 paise respectively from 1991-92.

T A B L E NO. 4.19.

MONEY VALUE OF SNP FOODS SERVED TO BENEFICIARIES BY GRADE IN THE SELECTED CENTRES (1988-89 - 1991-92).

Year	Grade	Allegre	Pilang-kata	Kyrdem	Nartiang-Poh-shnong-la	Umja-siew	Remarks
1.	2.	3.	4.	5.	6.	7.	8.
1988-89	SMC	N.R.*	-	0.52	-	1.03	Since no records relating to SNP enrolment etc. were available in respect of the 3 selected Anganwadi Centres viz. Dolongman-Ja, Nongkhrah and Sonidan so no figures could be worked out against them in this connection.
	MC		0.36	0.26	0.69	0.51	
	PW/NM		0.60	0.44	1.16	0.86	
1989-90	SMC	-	-	0.63	1.26	0.72	
	MC	0.53	0.39	0.31	0.63	0.36	
	PW/NM	0.88	0.05	0.52	-	0.60	
1990-91	SMC	0.48	-	0.32	0.48	-	
	MC	0.24	0.14	0.16	0.24	N.R.	
	PW/NM	0.40	0.24	0.27	0.40	-	
1991-92	SMC	0.57	-	0.25	-	-	
	MC	0.34	0.17	0.15	0.39	0.50	
	PW/NM	0.40	0.23	0.20	0.52	0.66	

\* Nos of beneficiaries not available.

T A B L E NO. 4.18(A)

Nutritive Values of SNP Foods :

4.32. It is imperative to assess the nutritive values of the SNP foods served at different Anganwadi Centres under different ICDS Projects in order to reflect the actual contribution made by the Scheme. In this connection, however, the non-availability in the local libraries of relevant authoritative publications like (i) **\*Recommended Dietary Intake for Indians, 1981** and (ii) **\*Nutritive value of Indian Foods\*** both by the Indian Council of Medical Research to serve as our reference Books had caused certain constrain towards achieving the afore-said desirable objectives. Somehow, however, to bridge this gap two publications entitled (i) **\*Food and Nutrition\*** published by Education Planning Group, particularly the Appendix-VI, an extract portion of which was duly reproduced at Annexure -VI plus (ii) **\*Applied Nutrition\*** by Rajalakshmi, Bio-chemistry Department M.S. University of Baroda-(Appendix -V), were used for this purpose. So with these limited sources of information a rough estimation was arrived at in highlighting the supplementation<sup>of</sup> nutritional intake<sup>as</sup> derived from foods served at the selected Anganwadi Centres.

Supplementary Nutritional Intake Required :

4.33. "The aim", to quote a portion of para 2.9. of the Manual on ICDS, "is to supplement nutritional intake by about 200 calories and 8-10 grams of protein for children below 1 year, about 300 calories and 15 grams of protein for children between one and 5 years of age and about 500 calories and 25 grams of protein for pregnant women and nursing mothers(PW/NM)". No dose was however specified for the severely malnourished child (SMC) but based from the budgetted allocation, it should be higher than that of PW/NM. Our endeavour was therefore, to show how the estimated daily quantities of foods distributed to the severely malnourished child(SMC), the malnourished child(MC) and the Pregnant woman/nursing mother could contribute the above envisaged doses of nutritional intake to the said groups of beneficiaries. In this connection it is to be pointed out that as no separate data were available for children below 1 year and for children between one and 5 + years of age, we may estimate calories for MC to be around 250 calories or 300 calories (as subsequently stated at para 3.5.) and between 10-15 grams of proteins. With regards to the SMC beneficiaries, there is no quantum of calories or proteins indicated. We know, however, that the cost of food for child belonging to this group is of higher scale than the other groups, hence, the quantum of nutritional intake should be also above the others.

Estimated Amount of Nutrition Supplemented :

4.34. Having obtained the money rates of SNP foods per individual, as shown in Table No. 4.19, it is an endeavour of the study to throw some idea as to what an extent the Scheme was able to fulfil its aim duly narrated at para 4.33. In proceeding with this task the yearly quantity of each item of the SNP foods served to the selected Anganwadi Centres, as listed at Annexure -III was reduced to its daily amount as done in case of the yearly amount of expenditure on the SNP foods. Then based on the calories and protein contents indicated against each food item in the Annexure VI & VI (a), the daily amount of calorie and protein for each food item was worked out and subsequently added together. The results thus obtained and showing for the period from 1988-89 to 1991-92 are incorporated in Table No. 4.20.



TABLE NO. 4.20.

CALORIES AND PROTEIN INTAKE PER DAY IN SELECTED  
ANGANWADI CENTRES DURING 1988-89 - 1991-92.

Sl. No.	Name of Centre	1988-89	1989-90	1990-91	1991-92
		Calo- 'rie	Pro- 'tein	Calo- 'rie	Pro- 'tein
1.	2.	3.	4.	5.	6.
7.	8.	9.	10.		
1.	Allegre	24327	740.1	18194	625.5
2.	Dolong-manda	9159	316.7	11184	316.4
3.	Pilangkata	17801	930.6	18356	1092.2
4.	Nongkhrah	13859	700.9	15008	864.3
5.	Sonidan	18315	894.2	20601	1183.9
6.	Kyrdem	21890	788.4	18948	1088.5
7.	Nartiang-Pohshnong	18131	904.3	16332	882.7
8.	Umjalasiaw	17309	857.3	15123	712.2

Estimated per Capita Nutritional Intake in the  
Selected Centres :

4.35. The daily amount of calories and Protein is taken to be equal to a daily amount of expenditure incurred for the same during the corresponding period. Since the estimated rates of daily per capita expenditure by category of beneficiaries in respect of the Selected Centres was already obtained vide Table No. 4.19. the amount of calories and protein due to each beneficiary by grade was thus determined accordingly, for each Centre, where-ever required data including no. of beneficiaries, were available. The results so derived was portrayed in Table No. 4.21. Certain general observations may be highlighted with regard to figures presented in the said Table No. 4.21. (i) Barring Nartiang-Pohshnong<sup>Umjalasiaw</sup> Anganwadi Centre, at least for the years 1988-89 & 1989-90, no Centre appeared to be able to supplement Calories and Protein intake to their respective beneficiaries equivalent to the quantum anticipated - MC=300 Calories and 10-15 gms. protein, PW/NM=500 Calories + 25gms of proteins while that of SMC more than that of PW/NM (ii) Pilangkata and Kyrdem AW Centres which represented Bhoi Area ICDS Project, shared the least amount of supplementary food ingredients in comparison to their counterpart, while Nartiang-Pohshnong followed by Umjalasiaw Centres (of Thadlaskein ICDS Project) showed on the other hand, to have procured the maximum amount of nutrition benefits towards their beneficiaries out of the Scheme. Allegre Centre belonging to Rongram ICDS Project lay in between the two extremes.



4.37. The situation narrated at the preceeding paragraph was further authenticated by all the selected Anganwadi workers. For example, one of centres pointed out that the quota for the months of August and September, 1992 was received at late as 9th November, 1992. Another worker was saying as there had been no regularity not only in dates of arrival of the consignments but also in the quantities of the contents (food items). The workers of the selected anganwadis made the same complaint about the inadequacy of the SNP foods issued to them so as to meet the requirement of the beneficiaries. This fact sounds contradictory to the figures supplied by the CDPOs in this regards and also as worked out in this study of the implications of those furnished data. When asked how they managed the situation, they all resorted to reducing the number of feeding days. That is, instead of serving foods to the beneficiaries for 25 days, they had to cut the no. of days to, say, 15 or 10 days. For instance, in our on-the spot data collection, to one centre on the 18th August, 1992, we were informed that her stock had already exhausted on the preceeding day (17th August) after having distributed foods for 13 days only. One worker adopted, however, a different device. She would stop feeding for some days in the middle of the month and then resume feeding by the week-end (of the month). But in their records and Returns they appeared to indicate it as though they performed feeding to the full no. of days required. Another interesting finding was that while many of the worker took no care to check if the quantity shown against each food item issued to them was actually alright, but two of them frankly stated that, on measuring, the shortfall from the stated quantities was often detected. For example from the shown quantity of 49.800Kg. of Bengal gram, the actual amount found was just 30.350kg only. One worker, however, indicated that the shortage was between 4 and 5Kgs. This fact, no doubt, corroborated the remarks passed by one CDPO (para 4.1.). It is therefore apparent that the changing in the system of SNP foods procurement could not cure the ills of irregularity and inadequacy in the supply of the food-stuffs.

#### Condition in Garo Hills ICDS Projects :

4.38. According to the D.O, Tura, so long as the supply was carried out by the Tura Branch of the MECOFED, the ICDS Projects in Garo Hills Districts were able to receive the required consignments of SNP foods just after one month's time since the indent was made. When the responsibility was, however, taken up directly by the Head Office of MECOFED, Shillong, the time-lag was lingered by 2 months time. This fact was also amply borne by the data submitted by the

selected ICDS Project (Rongram), when during the years preceeding 1991-92, the issuance of the Snp food-stuffs could be effected, at least once for every two month but since 1991-92 (the year that the supply was done by the MCOFED Head Office, Shillong) it was shown to be quarterly.

Number of Feeding Days :

4.39. In practice, the information transpired by the selected Anganwadi workers may perhaps suffice us to grasp the actual functioning of the scheme in relation to its supplementary nutrition component. At the risk of repetition, it was evident, that so long as stock was still available, the workers carried out the service of feeding daily to their beneficiaries, but stopped when there were no more foods. But some of them appeared to manage her records by showing the required optimum/nearly maximum number of feeding days although the same workers in replying to our schedule canvassing did admit the inadequacy of foods in relation to their respective centre's requirement. Any way the number of feeding days as indicated in the Table No. 4.22. was found to be in most cases, below the target which is 300 days in a year, Barring the two anganwadi centres Nartiang-Pohshnong, under Thadlaskein ICDS Project and Allegre, Rongram Project, the rest were found to record their feeding days vacillating from 116 to 271 days in a year during 1988 to 1991 as against the required 300 days. It can be observed that some workers did give certain remarks regarding the months during no stock was available and hence no feeding. In this case, Pilangkata centre was found to be very particular. During our study, the number of feeding days during the month of July '92 (a month immediately preceeding to our field study) was also obtained from the selected centres. Here also, we had different no. of days varying from 10 to 27. Out of 8 centres, only 3 of them could achieve the target i.e. 25 + days. The frequencies of feeding days by each selected Anganwadi Centre may be discerned from the Table No. 4.22.

## T A B L E NO. 4.22.

NO. OF FEEDING DAYS AS RECORDED BY THE SELECTED  
ANGANWADI CENTRES (1988-89 - 1991-92)

Sr. No.	Name of A.W. Centre	1988	1989	1990	1991	July 1992
1.	Kyrdem				147	13
2.	Sonidan	No records				10
3.	Mongkhrah					27
4.	Pilangkata	151	254	162	116	25
		Jany.-March Sept.- No supply Octr.- 10 days.		Octr. Nil.	Octr.- Jany., Decr. July No sup-Octr., ply Decr. Sept. nil 13 Sept.- days. 11 days.	
5.	Nartiang- Pohshnong	214	303	226	305	23
6.	Umjalasiaw	271	268	187	267	21
		June-Nil				
7.	Allegre	N.A.	306	288	300	15
8.	Dolongmanda	160	230	266	N.A.	27

Sources : Anganwadi Centres.

No. of feeding days according to Sample beneficiaries :-

4.40. Views of the parents of the selected Sample Children including samples from among the pregnant and nursing mothers were sought for in matter pertaining to the number of feeding days in a week during the years under reference, although, we cannot expect accuracy from such replies, but at least, it serves as a pointer in forming an idea regarding the function of the scheme vis-a-vis this particular aspect. Thus out of 30 selected samples, under Rongram Project, 5 nos (16.7%) of them recollected as about 6 days a week that the SNP food was served to them, while the remaining majority 25(83.3%) put it between 5 and 2 days only weekly, i.e. less than the proposed six days a week. The 60 sample beneficiaries comprising 4 anganwadi centres under Bhoi Area had as many as 28(48.7%) of them who remembered to have been generally served with supplementary nutrition for 6(six) days in a week, while 15 (25.0%) put it less than six days. A good number of 17(28.3%) stated to have no idea of this particular information. In case of Thadlaskein Project beneficiaries we had a matching no. of beneficiaries i.e. 15:15 saying 6 days and less than six days respectively in a week. Taking an over-all aggregate, we have 48



(40.0%) as giving 6 days a week and 55(45.8%) less than 6 days while 17(14.2%) having no idea at all. The compiled versions of the selected samples are reflected in Table No. 4.23.

4.41. The study would like further to know the specific no. of days they received foods during a month preceding the field study. In this case we had, under Rongram Project, 14 of the total 30 selected samples as putting between 24 to 16 days, another 14 of them putting it between 15 to 0 days while only 2 saying to remember it not. Coming to the beneficiaries of the other two Projects, it is regrettable to note that the majority 42(70.0%) of the 60 samples of Bhoi Area Project stated that they could not say it exactly while cent per cent of the Thadlaskein Project beneficiaries also fell under this same fate. All these results are shown in Table No. 4.23.

TABLE NO. 4.23.

APPROXIMATE NUMBER OF FEEDING DAYS WEEKLY ETC.  
ACCORDING TO SAMPLE BENEFICIARIES

Sl. No.	Name of Project	No. of selected A.W. Centres	No. of selected samples	No. of days during a week	No. of days during past month	No. of days during past month	No. of days during past month	No. of days during past month	No. of days during past month
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
1.	Rongram	2	30	5	25	--	14	14	2
2.	Bhoi Area	4	60	28	15	17	6	12	42
3.	Thadlaskein	2	30	15	15				30
Total :-		8	120	48	55	17	20	26	74

Sources : Beneficiaries.

CHAPTER - V

HEALTH COMPONENT

Immunization :

5.1. Prevention of children below 6 years of age against the attack of such Communicable diseases as tuberculosis, diphtheria, whooping cough, tetanus, measles and polio has been envisaged under the ICDS Scheme. For this purpose, immunization against these diseases was administered to the children below 6 years of age and also to the pregnant women to protect the latter as well as the new born infants from tetanus.

Achievement :

5.2. Data furnished by the Directorate of Social Welfare indicated a steadily upward movement of BCG beneficiaries from 4035 in 1988-89 to 5374 in 1991-92. During this period (1988-89 to 1991-92), the children administered with BCG vaccines totalled to 19680 and on average their number worked out to 4920 per year. Beneficiaries of preventive measures against the remaining diseases carried in number erratically from year to year during the aforesaid period. Added together, however, the number of DIT, Polio and typhoid beneficiaries for the 4 years period resulted to 21406, 19290 and 10346 respectively. Annually the average achievement in the State TURNED UP TO 5351 D.P.T., 4822 polio and 2586 typhoid beneficiaries. In case of women who were beneficial from T.T. injections, their total number reached the level of 18343 giving thus a yearly average of 4586. The figures pertaining to beneficiaries of 'VIT' 'A' Solution I.F.A. Tab showed their aggregate number as 146498 during the 4 years and that annually, the state had as many as 36624 women receiving Vit 'A' solution I.F.A. Tab under the ICDS Scheme. The achievement of the Scheme during the 1988-89 to 1991-92 is presented in the Table No.5.1.

TABLE NO.5.1.  
NUMBER OF BENEFICIARIES IMMUNIZED DURING 1988-89 to  
1991-92 UNDER ICDS SCHEME.

Immunization against	1988 -89	1989 -90	1990 -91	1991 -92	Total	Yearly average 1988-89 1991-92
<u>Children</u> <u>below 6 years</u>						
i) BCG.	4305	4638	5363	5374	19680	4920
ii) D.P.T.	4931	4614	6090	5771	21406	5351
iii) Polio	4530	4000	5504	5256	19290	4822
iv) Typhoid	2324	3216	2367	2439	10346	2586
<u>Women</u>						
v) T.T.	4312	2504	3529	6998	18343	4586
vi) Beneficiaries of Vit 'A' Solution I.F.A. Tab.	33619	43543	31913	37423	146498	36624

Sources : District Social Welfare

Assessment of achievement :Project level :

5.3. The number of ICDS Projects in the State stood at 17,21,26 and 26 respectively in 1988-89, 1989-90, 1990-91 and 1991-92 as per information furnished by the two District Programme Officers (ICDS Cell). Therefore, based on the year-wise number of the Projects and that of immunized beneficiaries (Table 5.1.), the year-wise average number of beneficiaries given prevention against each of the afore-

said diseases per ICDS Project was indicated in the Table No.5.2. During the four years, it may be observed, that the year-wise number of beneficiaries per ICDS Project was below 300 for all the five preventive services. Besides, in all the cases we notice a downward trend. Thus, in respect of immunization against B.C.G., the average number of beneficiaries declined from 253 in 1988-89 to 206 in 1991-92. For DPT the number of beneficiaries per ICDS Project was shown to drop from 290 in 1988-89 to 220 in 1989-90 and slightly tended to go up by 234 in 1990-91 but again decreased to 222 in 1991-92. Polio beneficiaries also got reduced from 266 in 1988-89 to 190 in 1989-90 and very slightly rose to 202 in 1991-92. A fall from 137 in 1988-89 to 91 in 1990-91 and 94 in 1991-92 took place in the number of beneficiaries given prevention against typhoid. Lastly, following the same trend, women administered with T.T. injections fell down in number from 254 in 1988-89 to 136 in 1990-91 but rose to 269 in 1991-92 per ICDS Project.

TABLE NO. 5.2.

YEAR-WISE NO. OF IMMUNIZED BENEFICIARIES PER ICDS PROJECT DURING 1988-89 TO 1991-92.

Immunizations against.	Average No. per ICDS Project during				Remarks
	1988-89	1989-90	1990-91	1991-92	
1.	2.	3.	4.	5.	6.
1. B.C.G.	253	221	206	206	Figures were mended.
2. D.P.T.	290	220	234	222	
3. Polio	266	190	212	202	
4. Typhoid	137	153	91	94	
5. T.T.	254	167	136	269	

5.4. Anganwadi Centre Level :

According to particulars received from the afore-said two District Programme Officers, the number of Anganwadi Centre as in 1988-89, 1989-90, 1990-91 and 1991-92 stood respectively at 1017, 1083, 1462 and 1536. So per Anganwadi Centres an average year-wise number of children below 6 years of age who were administered with preventive measures against BCG, DPT and Polio during 1988-89 to 1991-92 was obtained and indicated in Table No. 5.3. Those of T.T. beneficiaries were also incorporated in the same Table. The results as derived showed that the achievement per Anganwadi Centre per year proved to be very dismal since on average, the yearly achievement for all the five preventive measures vaccinated just between 2 and 4 nos. of beneficiaries. Thus, in respect of those (Children below 6 years of age) who were inoculated with BCG, DPT, Polio (oral),

their number tended to be just 4 nos. each annually during the period under reference, while those of typhoid the achievement rated between 2 and 3 nos. per anganwadi centre. T.T. injections for pregnant women centred around 2 and 4 beneficiaries per year per Centre.

TABLE NO. 5.3.

YEAR-WISE AVERAGE NO. OF IMMUNIZED BENEFICIARIES PER ANGANWADI CENTRE DURING 1988-89 TO 1991-92.

Immunizations against	Average No. per Anganwadi Centre				Remarks
	1988-89	1989-90	1990-91	1991-92	
1.	2.	3.	4.	5.	6.
1. B.C.G.	4	4	4	4	Figures were rounded.
2. D.P.T.	5	4	4	4	
3. Polio	4	4	4	3	
4. Typhoid	2	3	2	2	
5. T.T.	4	3	2	4	

Performance in the three ICDS Projects :

5.5. A year-wise number of immunizations against the said diseases in respect of the sample ICDS Projects viz. Rongram, Bhoi Area and Thadlaskein, was detailed in Annexure No. VII. The figures as furnished by the three Projects moved so unevenly from year to year. Therefore, to serve our purpose, we obtained a Cumulative and average number of beneficiaries per year during the period from 1988- to 1991 and that our evaluation of the performance of the scheme in the said three projects would be measured from the latter parameter (average number) as approached already in respect of State level achievement. The results of such exercise are displayed in Table No. 5.4.

B.C.G. Beneficiaries :

5.6. As can be observed from Table No. 5.4. it is found that in so far as prevention against B.C.G. was concerned, Thadlaskein ICDS Project showed to have excelled the other two projects by securing a maximum number of 417 beneficiaries per year <sup>while</sup> 203 and 187 nos. respectively by Rongram and Bhoi Area Project. Further, while the achievement by the last two Projects was comparable to that of State level as indicated in Table No.5.2. but that of Thadlaskein stood for above of the State figures.

D.P.T. and Polio beneficiaries :

5.7. Beneficiaries against DPT and Polio diseases referred to these children only who had completed the required 3 doses of immunizations and for the fresh cases only. For these two cases, Rongram Project with an average number of 623 DPT and 604 Polio beneficiaries led the other two Projects. There were only 333 children inoculated annually with DPT vaccines by Bhoi Area Project and 358 applied orally with Polio. The performance by Thadlaskein Project in this regard was 360 DPT beneficiaries per year but lagged far behind in respect of Polio beneficiaries when their number dropped to 160 only. Compared to State figures, achievement even by the two Projects (Bhoi Area and Thadlaskein), was much better in so far as DPT immunizations was concerned. But for that of Polio, while Bhoi Area having 358 beneficiaries still numbered that of State figures (between 190-260), but that of Thadlaskein showed poor performance with just 160 nos of beneficiaries annually on average.

Typhoid :

5.8. It is conspicuous to find that no injections against typhoid were administered in Rongram and Thadlaskein ICDS Projects which both submitted nil return against this particular information. The achievement by lone Bhoi Area Project in this case also was much lower than the State level achievement lying between 91 and 153 nos. annually.

T.T. Beneficiaries :

5.9. The figures as furnished by the three Projects appeared to include both fresh and Booster beneficiaries. This fact became very prominent in respect of Bhoi Area where the average annual no. of beneficiaries turned up to be 1377. In case of the remaining two projects the position was 324 beneficiaries per year under Rongram and 146 under Thadlaskein, which feature was more or less comparable to that of State figures.



TABLE NO. 5.4.

AN AGGREGATE AND ANNUAL AVERAGE NO. OF BENEFICIARIES  
IMMUNIZED AGAINST SELECTED DISEASES UNDER THE THREE  
ICDS PROJECTS DURING 1988 to 1991.

Particulars	ICDS Projects					
	Nongram		Bhoi		Thadlaskein	
	Total No.	Annual Average No.	Total No.	Annual Average No.	Total No.	Annual Average No.
1.	2.	3.	4.	5.	6.	7.
A. 0-5+ years						
1. B.C.G.	- 813	203	748	<u>187</u>	1668	<u>417</u>
2. D.P.T.						
(a) Fresh	- 2491	<u>623</u>	1332	<u>333</u>	1442	<u>360</u>
(b) Booster	- 295	74	600	150	135	34
3. Polio						
(a) Fresh	- 2416	<u>604</u>	1434	<u>358</u>	654	<u>163</u>
(b) Booster	- N.A.		510	127		N.A.
4. Typhoid						
(a) Fresh	0 - N.A.		210	<u>52</u>		N.A.
(b) Booster	0					
B. Pregnant Women						
Fresh/Booster	- 1296	<u>324</u>	5509	<u>1377</u>	584	<u>146</u>

Sources - ICDS Projects.

#### Immunization at the Anganwadi Centre Level :

5.10. B.C.G.: The immunization figures at the selected anganwadi Centres was obtained from the concerned ANMS who were incharge of the said Centres. During the field study, we could personally meet every ANM incharge of the sample Centres and that the proforma prepared for this purpose could be handed over to them in person with due explanation of the requirement there in. Unfortunately, however, two of the eight ANMS failed to submit the Returns despite reminders issued to the concerned CDPO to pursue for the same. The data so obtained were computed and tabulated as per Table No. 5.5. Among the 6(six) Centres, the ANM I/c of Nongkhran indicated to have provided the BCG inoculation to a total of 80 children for the four years period from 1988 to 1991. The yearly average worked out to 20 beneficiaries. It was this Centre which got the maximum number. The least number of beneficiaries immunized was recorded by Umjalasiaw Centre with a total of 21

nos or 5 nos. per year. Similarly, Pilangkata Centre by having 10 beneficiaries for 2 years, time or 5 nos. a year, the rate of achievement tended to be at par with that of Umjalasiaw. Ostensibly, however, Sonidan Centre recorded a nil data pertaining to B.C.G. on account of reported non-availability of vaccines.

5.11. D.P.T. & Polio etc.: With regard to DPT and Polio immunizations, Kyrden Centre recorded the largest number of beneficiaries (fresh) totalling to 66 for four years (1988-1991) or 16 annually on average, for each of the two vaccinations. Next to Kyrden, Nongkhrah Centre administered the two immunizations D.P.T. and Polio, to a total of 60 children each for 4(four) years or 15 nos. annually. At the lowest, we have Umjalasiaw(Thadlaskein ICDS Project) again having been able to provide immunization to a total number of 20 beneficiaries or 5 nos. annually each in respect of the two immunizations. Concerning prevention against typhoid, the ANM I/c. Sonidan Centre could render services to a total of 18 beneficiaries or 4 annually, followed by Nongkhrah - 16 nos. or 4 per year and lastly by that Kyrden Centre with an aggregate of 13 beneficiaries or 3 yearly. (All these three centres belonged to Bhoi Area Project). Interestingly, while Thadlaskein project submitted a nil return on typhoid immunizations, Umjalasiaw Centre, which is under the same project, was showing a 1(one) no. of beneficiary being inoculated with typhoid vaccine for the entire corresponding period.

5.12. T.T. Injections : The figures submitted by the ANM I/c. Pilangkata Centre related to 2(two) years' period only from 1990-1991. During these two years the no. of pregnant women treated with T.T. injections stood at 30 in number of 15 nos per year as against a total of <sup>25</sup> 25 nos of 6 annually attained by the ANM I/c of Dolongmunda Centre for the **four** years' period. Table No.5.5. may be studied concerning the performance of the selected Centres in regard to immunizations.

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T A B L E NO. 5.5.

TOTAL AND AVERAGE NO. OF BENEFICIARIES IMMUNIZED DURING  
1988-1991 BY THE SAMPLE ANGANWADI CENTRES.

Particulars	Allegre		Dolongmunda		Pilangkata		Nongkhrah	
	Total No.	Yearly ave- rage	Total No.	Yearly ave- rage	Total No.	Yearly ave- rage	Total No.	Yearly ave- rage
1.	2.	3.	4.	5.	6.	7.	8.	9.
1. B.C.G.	N.A.		53	13	10	5	80	20
2. D.P.T.								
Fresher	N.A.		42	10	26	13	60	15
Booster	"		Nil		N.A.		9	2
3. Polio								
Fresher	"		42	10	26	13	60	15
Booster	"		20	5	17	8.5	9	2
4. Typhoid								
Fresher	"		N.A.		Nil		10	4
Booster	"		-		-		-	-
5. T.T.								
Fresher								
Booster	"		25	6	30	15	10	2

\* Figures submitted by ANM I/c. of Pilangkata Anganwadi Centre related to the period of 1990 to 1991 only i.e. 2 years.

T A B L E NO. 5.5. (Continued)

Particulars	Sonidan		Nyrdem		Nartiang		Umjalasiaw	
	Total No.	Yearly ave- rage	Total No.	Yearly ave- rage	Total No.	Yearly ave- rage	Total No.	Yearly ave- rage
1.	10.	11.	12.	13.	14.	15.	16.	17.
1. B.C.G.	NIL		63	16	N.A.		21	5
2. D.P.T.								
Fresh	23	6	66	16	"		20	5
Booster	17	4	11	3	"		15	1
3. Polio								
Fresh	42	10	66	16	"		20	5
Booster	21	5	11	3	"		5	1
4. Typhoid								
Fresh	18	14	13	3	"		1	0
Booster	25	6	N.A.		"		N.A.	
5. T.T.								
Fresh and Booster	17	4	13	3	"		N.A.	

Note : Figures were rounded.

Sources : ANM I/C.

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5.13. The preceeding paragraphs revealed that in most cases the achievement, based on immunization figures supplied by the three selected ICDS Projects, stood at higher scale than that of derived figures per project as based on data submitted by the Directorate. The position became more ostensible if we compare the figures collected from the Selected Sample Anganwadi Centres with that of derived achievement per Anganwadi Centre as worked out from the information furnished by the Directorate. In other words measuring the achievement in terms of the number of Anganwadi Centres in the State as per figures received by the Directorate<sup>ate</sup>, it was found that the results was at a lower scale when compared to actual figures collected from the Selected Centres in the matter of immunizations. Thus, on average, there had been, only 4 nos. of B.C.G. beneficiaries per year for Anganwadi Centre during 1988-89 to 1991-92, according to figures furnished by the Directorate, where-as the primary data received from the Selected Centres showed the no. of B.C.G. beneficiaries <sup>varied</sup> between 5 and 20 annually. Similarly, in case D.P.T. and Polio, while the Secondary data showed the yearly achievement to <sup>be</sup> around 4 nos. each per Anganwadi Centre, the primary data in the other hand worked out to be between 5 and 10 nos. per Anganwadi Centre per year.

Probable reasons :

5.14. Although actual factors leading to low representation of the number of immunized beneficiaries as based on Secondary data cannot be pin pointed, yet it may be perhaps that in-action or non-submission of data by some Centres under the different Projects had been a prominent factor. For example, from our study, out of 8 Sample Anganwadi Centres 2(two) of them did not send their return (explained already earlier) and accidentally the two Centres ranked foremost when evaluated in the different spheres of their activities. So, this fact may be an eye-opener for the implementing authorities to ensure that every Centre should furnish their immunization Statistics so that our State will not be found lagging behind when compared with other States. The other reasons like irregular/shortage in supply of vaccines, frequent transfer of ANMs etc. may not be ruled out.

General Comments :

5.15. Whatever may be the causes attributing to the existing low key performance of the Scheme, it is quite obvious, that the achievement was not satisfactory at all. As indicated, the maximum number of beneficiaries innoculated for different vaccines for protection against the specified deadly diseases stood at 20 per year per Centre which worked out to hardly 2 beneficiaries per month, that is, as per data furnished by the ANMS I/c. Centre. How negligible it was, if we are to assess the achievement of the Scheme, vis-a-vis immunization as per Secondary data supplied by the Directorate of Social Welfare. The situation justifies no complacency on the part of the implementing authorities. Besides, considering the size of population covered by Bhoi Area ICDS Project which comprised 2(two) C.D. Blocks, its performance in respect of immunizations was prominently the lowest.

Extent of drops out :

5.16. As already pointed out earlier that unless a child completes all the three doses of either D/T immunization or oral polio Vaccine, it shall not be deemed as being a beneficiary of either even though it may have undergone up to two doses of the same. In case typhoid two doses need to be fulfilled. In this connection, it is also the intent of the study to evaluate the extent of drops out as per figures furnished both at the project and the anganwadi Centre level in respect of the three immunization services (DPT, Polio and typhoid).

At Project Level :

5.17. D.P.T. : The year wise number of 0-6 years children who had been administered with the first and the 3rd doses of DPT and Polio vaccines was detailed at Annexure-VII in respect of the three sample ICDS Projects for the period from 1988 to 1991. The same was also indicated in relation to typhoid injections, although this particular service was confined to Bhoi Area project only and actually there also the operation appeared to be quite insignificant. It was common to all the three projects that the number of beneficiaries who had completed the full doses was relatively lower than that of the first doses. This proved that there were many of them who failed to turn up for the required scheduled doses of these three immunizations. For the purpose of this study we just worked out the sum totals of the number of the first and the third/2nd doses for all the 4 years and obtained the difference there-of.



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Comparison (Table No. 5.3. and 5.5.)

5.13. The preceeding paragraphs revealed that in most cases the achievement, based on immunization figures supplied by the three selected ICDS Projects, stood at higher scale than that of derived figures per project as based on data submitted by the Directorate. The position became more ostensible if we compare the figures collected from the Selected Sample Anganwadi Centres with that of derived achievement per Anganwadi Centre as worked out from the information furnished by the Directorate. In other words measuring the achievement in terms of the number of Anganwadi Centres in the State as per figures received by the Directorate<sup>note</sup>, it was found that the results was at a lower scale when compared to actual figures collected from the Selected Centres in the matter of immunizations. Thus, on average, there had been, only 4 nos. of B.C.G. beneficiaries per year for Anganwadi Centre during 1988-89 to 1991-92, according to figures furnished by the Directorate, where-as the primary data received from the Selected Centres showed the no. of B.C.G. beneficiaries <sup>per</sup> ~~varied~~ between 5 and 20 annually. Similarly, in case D.P.T. and Polio, while the Secondary data showed the yearly achievement to <sup>be</sup> around 4 nos. each per Anganwadi Centre, the primary data in the other hand worked out to be between 5 and 10 nos. per Anganwadi Centre per year.

Probable reasons :

5.14. Although actual factors leading to low representation of the number of immunized beneficiaries as based on Secondary data cannot be pin pointed, yet it may be perhaps that in-action or non-submission of data by some Centres under the different Projects had been a preminent factor. For example, from our study, out of 8 Sample Anganwadi Centres 2(two) of them did not send their return (explained already earlier) and accidentally the two Centres ranked foremost when evaluated in the different spheres of their activities. So, this fact may be an eye-opener for the implementing authorities to ensure that every Centre should furnish their immunization Statistics so that our State will not be found lagging behind when compared with other States. The other reasons like irregular/shortage in supply of vaccines, frequent transfer of ANMs etc. may not be ruled out.

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Thus, as per Table No. 5.6. out of a grand total of 7677 children who received the first dose of DPT immunizations for all the 3 projects eventually, only 5065 did undergo the third dose resulting thereby 2612 or 34.02 percentage of drops out. Taking, however, a project-wise position, it was the Bhoi Area which had the highest percentage of drops out which was 48.11 when out of 2567 children who were administered with first dose of DPT immunizations, there were as many as 1235 of them who were missing the 3rd dose. The difference in the extent of drops out between that of Rongram and of Thadlaskein Projects was of moderate dimension with the latter, however, taking a higher scale of 29.23% (i.e. 513 absentees out of 1755) than that of the former with 25.75% (i.e. 864 drops out of 3355 children receiving the first dose) during the entire period from 1988 to 1991.

5.18. Polio : The Table No. 5.6. gave as many as 6803 children, for all the three ICDS Projects, who were given with the first dose of an oral polio vaccine during the entire reference period, and out of whom, 2299 or 33.79 P.c. of them evaded the 3rd dose. Among the three Projects, the high proportion of drops out, up to a level of 61.21% was recorded by Thadlaskein Project when out of a total 1686 first dose beneficiaries, 1032 of them gave up the remaining scheduled dose(s). Bhoi Area Project followed Thadlaskein with 751 children or 34.37 P.c. out of 2185 children applied with first dose of oral polio vaccine. In contrast, Rongram Project displayed its splendid performance in this regard having a minimum of 17.6% of drops out (i.e. 516 ).

2932

5.19. Typhoid : With bare 614 children served with first dose of typhoid injections by the Bhoi Area ICDS Project, eventually only 349 of them completed the required full course of injections. That is, the number of drops out worked out to 265 or 43.16%.

T A B L E NO. 5.6.

TOTAL NUMBER OF DROPS-OUT FOR DPT, POLIO AND TYPHOID  
IMMUNIZATIONS IN THE THREE ICDS PROJECTS DURING 1988-to 1991.

ICDS Project	D.P.T		POLIO		TYPHOID	
	No. of drops out of total 1st dose beneficiaries	P.C. of drops out	No. of drops out of total 1st dose beneficiaries	P.C. of drops out	No. of drops out of total 1st dose beneficiaries	P.C. of drops out
1.	2.	3.	4.	5.	6.	7.
Rongram	864 3355	25.75	516 2932	17.6	N.	A.
Bhoi Area	1235 2567	48.11	751 2185	34.37	265 614	43.16
Thadlaskein	513 1755	29.23	1032 1686	61.21	N.	A.
Total :-	2612 7677	34.02	2299 6803	33.79	265 614	43.16
				....64/-		

At Anganwadi Centre Level :

3.20. D.P.T. : The yearwise number of children who were administered with first and 3rd doses of D.T immunization and oral polio vaccine was indicated against each of the selected anganwadi Centre as per Annexure NO.VIII. In the same statement, particulars relating to that of typhoid injections were also incorporated. The total of children who had been given with first dose of DPT immunizations, typhoid injections and the oral polio vaccines during the period from 1988 to 1991 was shown in Table No. 5.7. In respect of DPT immunizations, we had 310 children who were administered with first dose of DPT immunizations in the six reporting anganwadi Centres during the reference period. Out of these 310 children, it was found that 79 or 25% of them did not complete the full prescribed doses. Going by centre, it could be seen that of Sonidan Centre had the highest percentage of drops out which stood at 57.41 followed by Umjalasiaw at 35.48%. In case of Kyrdem Centre, the Annexure-VIII showed that the absentees for the third dose occurred only in 1988 but became nil in the subsequent years. Dolongmanda had no drops out in all the 4 years, while that of Pilangkata Centre had only 1(one) child out of a total 27 children during the two years (1990-1991). In case of Nongkhran Centre, the drops out totalled to 20 out of 80 first dose beneficiaries or 25%.

5.21. Polio : Out of 329 Children given with first dose of oral polio vaccine during 1988 to 1991 in the 6(six) reporting anganwadi Centres, 73 or 22.19% of them failed to complete for the third dose. Sonidan anganwadi Centre recorded 25 or 37.3 P.c. drops out of the total 67 children served with first oral dose of the said vaccine. Next to Sonidan, we have Umjalasiaw anganwadi Centre with 11(35.48%) out of 31 children, orally applied with first dose of polio vaccine. The percentages of drops out in the remaining Centres in descending orders were 25.0, 19.51.3.7 relating to Nongkhran, Kyrdem and Pilangkata respectively. Dolongmanda Centre had no defaulters at all.

5.22. Typhoid : The defaulters in respect of Typhoid injections under Kyrdem Anganwadi Centre as shown in Table No. 5.7. and Annexure -VIII was of very high intensity i.e. 91.44 P.c. as out of 152 children being administered with first dose of injection there had been as many as 139 of whom who skipped over the 2nd dose of injection. Umjalasiaw Centre appeared to operate the scheme in one year only (1988) with 9 children administered with first dose but only 1(one) repeated the 2nd dose. Thus in terms of percentage the drops out touched the level of 88.89 P.c. while

that of Sonidan stood at 28.0 P.c. The over-all number of drops out for typhoid injections totalled to 158 (76.70%) out of 206 children in all who were given with first dose of typhoid injections.

T A B L E NO. 5.7.  
TOTAL NUMBER OF DROPS-OUT FOR DPT, POLIO AND TYPHOID  
IMMUNIZATIONS IN THE SAMPLE ANGANWADI CENTRES

Sl. No.	Anganwadi Centres	D.P.T.		POLIO		TYPHOID	
		No. of drops out of those served with 1st dose	P.C. of drops out	No. of drops out of those served with 1st dose	P.C. of drops out	No. of drops out of those served with 1st dose	P.C. of drops out
1.	2.	3.	4.	5.	6.	7.	8.
1.	Allegre	NO Return		NO Return			
2.	Dolongmunda	$\frac{Nil}{42}$	nil	$\frac{nil}{42}$		No. data	
3.	Pilangkata*	$\frac{1}{27}$	3.7	$\frac{1}{27}$	3.7	N. A.	
4.	Nongkhran	$\frac{20}{80}$	25.0	$\frac{20}{80}$	25.0	$\frac{4}{20}$	20.0
5.	Sonidan	$\frac{31}{54}$	57.41	$\frac{25}{67}$	37.31	$\frac{7}{25}$	28.0
6.	Kyrjem	$\frac{16}{82}$	19.51	$\frac{16}{82}$	19.51	$\frac{139}{152}$	91.44
7.	Nartiang Pongshnong	-----NO		Return -----			
8.	Umjalasiaw	$\frac{11}{31}$	35.48	$\frac{11}{31}$	35.48	$\frac{8}{9}$	88.89
Total :-		$\frac{79}{316}$	25.00	$\frac{73}{329}$	22.19	$\frac{158}{206}$	76.70

\* For period from 1990-1991

Sources : ANMs I/c.

#### Magnitude of drops-out :

5.23. The study as narrated in the preceeding paragraphs and as exhibited in the relevant Tables, it is evident that the extent of dropped-out children became more intense at the grassroot level, that is, the Anganwadi Centres, than that was presented by data given by the selected projects. By failing to comply with all the required doses of immunizations, it resulted in wastage of labour and of scarce vaccines. Besides, resorting to this step connotes an absence of clear understanding of an implication of such an act which is a loss to the beneficiaries and as well as the State exchequer. Considering this fact, we are constrained to opine that implementing authorities may devise measures to avoid this wasteful State of affairs.

### Referral Cases :

5.24. From among the 8(eight) anganwadi Centres taken as samples for our study nearly all of them did not have any records to show that any beneficiaries, either among the children or women was referred to any hospital due to seriousness of illness during the period under reference from 1988-1991. An exception to this finding was however stated in case of Nartiang-Pohshnong Anganwadi Centre when one child suffering from rickets was said to have been referred to appointed referral hospital. The Child had since returned and its condition was some-now better than previously. During our field study, we were also told by one Centre (Umjalasiaw) that during 1992, 2(two) Children both aged between 4-5 years were attacked with illness having symptoms of high temperature, turning yellowish the entire body and followed with swelling. Both were sent to the Private Hospitals-one at Shillong and another at Jowai, but unfortunately both of them met with fatal end before being treated by the Doctors.

## CHAPTER VI

### NON - FORMAL PRE - SCHOOL EDUCATION :

6.1. Imparting non-formal pre-school education to children of 3-5 years of age is another service rendered by the ICDS Scheme and for which the Anganwadi Workers themselves are to be engaged. As this activity constitutes an integral part of the workers' multifarious functions, so every centre appears to have a non-formal pre-school education as per information supplied.

#### 6.2. Enrolment :

The total State enrolment, as furnished by the Directorate of Social Welfare showed a rapid increase from year to year during the reference period (1988-89 to 1991-92). Their number rose from 33,317 in 1988-89 to 42,266 in 1991-92 showing thus an increase of 26.74% during the four years. Yearly, therefore, there was an increase of 6.68% in the State as a whole. The enrolment in the three sample ICDS Projects recorded on the other hand an irregular movement in all of them. On average, however, the yearly number of 3-5 years Children enrolled in the non-formal Pre-School education under Rongram, Bhoi Area and Thadlaskein Projects turned out to be 1815, 3400 and 2869 respectively. During 1991 only the 61 Anganwadi Centres of Rongram Project had altogether 2000 children enrolled in the non-formal Pre-School education. In case of Bhoi Area with 127 Centres there was a sharp decline in the enrolment from 4109 in 1990 to 3004 in 1991. With 99 Anganwadi Centres during 1991, the Thadlaskein ICDS Projects had in their



records as many as 3174 participants in their non-formal pre-school centres. Per anganwadi centre, the enrolment, during 1991, worked out to 32.8 under Rongram ICDS Projects, and 32.1 under Thadlaskein and just 23.6 under Bhoi Area. The results showed, by and large, a tendency of parity in the enrolment of non-formal pre-school education in the three sample Projects. The average enrolment per anganwadi centre under the 3 projects taken together was 28.5 as in 1991. Enrolment of the three selected ICDS Projects, as received from the three CDIOS for the period from 1988-1991 are reproduced in the Table No. 6.1.

TABLE NO. 6.1  
ENROLMENT IN NON-FORMAL PRE-SCHOOL EDUCATION  
IN THE SAMPLE ICDS PROJECTS ( 1988 -1991)

ICDS Project	1988	1989	1990	1991	Average strength 1988 -1991	Enrolment per anganwadi centre in 1991
1.	2.	3.	4.	5.	6.	7.
1. Rongram	1553	1914	1792	2000	1815	32.8
2.* Bhoi Area	2733	3755	4109	3004	3400	23.6
3. Thadlaskein	2809	2874	2619	3174	2869	32.1
Total (1991)				8178		28.5

\* Operational area comprising 2 CD Blocks.

Enrolment in the selected anganwadi Centres:

6.3. As shown in Table No. 6.2. two of the selected Centres recorded their enrolment above 50 while the rest ranging between 31 and 40 during 1988 to 1991. The yearly average number of children of the selected Centres during this period stood, however, between 30.0 and 53.3 while a combined average of all the Centres during the year 1988 to 1991 stood at 40.5 per year, but taken for 1991 only it worked out to 41.7, as against 28.5, being the figures for anganwadi centre, as derived from the figures furnished by the three selected ICDS Projects. It is therefore evident that the strength of the participants per anganwadi Centre, basing on the data collected at the grass root level, far exceeded the one obtained from the figures submitted by the three Projects under which the same sample centres belong to.

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TABLE NO. 6.2.

ENROLMENT IN NON-FORMAL PRE-SCHOOL EDUCATION OF SELECTED ANGANWADI CENTRES (1988-1991).

	1988	1989	1990	1991	Average
1. Allegre	N.A.	54	50	56	53.3
2. Dolongmunda	N.A. Old Registers kept by the ex-worker				
3. Filangkata	38	45	40	39	40.5
4. Nongkhrah	No records		40	43	41.5
5. Sonidan	N.A.	30	29	46	35.0
6. Kyrjem	52	51	55	49	51.7
7. Nartiang-Pohshnong	39	31	25	25	30.0
8. Umjalasiaw	N.A.	28	33	34	31.7
Total	129	239	272	292	
Average	43.0	39.8	38.8	41.7	40.5

Teaching Method :

6.4. Through our discourse, it revealed to us, that the local people seemed to have high opinion of these non-formal educational Centres treating them as equally as ordinary Schools in matter of education for their toddlers. An equal insistence was therefore given upon their young ones for their regular attendance to these ICDS educational Services as they used to do to the formal schools. Teaching aids like drawings, handicrafts, cuttings etc. prepared by the anganwadi workers themselves during their training period were used in order to draw the attention of the children and to make them understanding of teachings imparted to them. Besides, the conventional aids like counting frame and alphabet charts were also found in all the selected anganwadi Centre samples. Singing and praying were also practised. One Centre became unique in the methodology of its teaching which they termed as "Thematic method" according to which one theme or subject was divided into different sub-themes. For example, during our visit the theme taken for the class was on a "Flower". Dwelling on how flower came into being, they took up different stages right from soil preparation, seedling/ planting, watering so on so forth till a flowering stage.

School Working Days :

6.5. The non-formal schools are supported to be conducted daily irrespective of the availability of SNP food-stock. Supervisor's remarks in a Register of one Centre related to this very fact. The majority of the interviewed anganwadi workers did also confirm this view. During our field visits what we actually found was that

not all the selected Centre did conduct their schooling activities regularly as desired for one or other reasons. One worker candidly stated that since the food stuff was already exhausted, hence no school was there (i.e. on the day of our visit). Others had their own grounds for example, two Centres attributed to the absence of accommodation, another Centre due to occupying of the Hall by the Local Durbar, and another one due to maternity ground. On query, from the local inhabitants it transpired to us an idea that some of these selected Centres never held regularly the school but, at least, in three centres namely Allegre, Dolongmanla (Present worker) and Pilangkata, Schools were run daily even when there was no distribution of SMD foods. As regards, Kyrlem Centre, the school was run very efficiently by the worker but suspended during days when ever there was no food distribution.

#### Contribution of the Anganwadi Schools :

6.6. One of the aims of the anganwadi schools is to develop a linkage of these non-formal schools with the local elementary schools in the sense that when the children have come to an age will incline towards continuing their learning in the formal educational institutions. In evaluating the success of the selected anganwadis towards this end, it was found that very few of them maintained records relating to this information. As a result, all but one gave a vague reply. For example three of them said most of them, while one Centre guessed it to be one-fourth of the children and another Centre averaged the out turn to lie between 6 and 10 nos. annually. It was however well pleased that one Centre (i.e. Allegre) enumerated the products of her anganwadi year-wise thus - 1989 = 8 children, '90 = 10, '91 = 16 and in 1992 = 22 nos. The then worker took charge of the centre in 1988. Her statistics evinced commendable progress of her school. It is also considered helpful if the non-formal schools in other Centres be insisted to follow the example of this particular worker.

#### Parents attitude :

6.7. The study probed the matter further by discovering the parents' keenness or otherwise on their children's education. Out of 120 samples only 47(39.2%) of them confirmed to have sent their children for schooling to the local primary schools after they had crossed over the age of participating in the anganwadis' non-formal schools. From these 47 households, there were altogether 102 children who were the products of the ICDS non-formal schools but later got admitted in the regular Primary schools. The remaining

73 sample households which constitute 60.8% of the total 120 sample remained indifferent of their children's literacy showing thus that the non-formal education of the ICDS had little impact on the majority of the rural families in so far as of education for their young ones is concerned, as anticipated under the Scheme. The break by Project/Block between the families who did not send their children for further education after attending the non-formal school education of ICDS and those who did so, is given in the Table No. 6.3. Out of 30 samples, 12 each from Bhoi Area C.D. Block (i.e. part of the Bhoi Area ICDS Project) and Thallaskern Block/ICDS Project while only 10 samples under Nongpoh C.D. Block (part of Bhoi Area ICDS Project) and 13 families under Rongram C.D. Block/ICDS Project, who confirmed to have their children (who had been formerly the ICDS Beneficiaries) <sup>got</sup> admitted in the local primary Schools. The rest gave a negative reply.

T A B L E NO. 6.3.

NO. OF FAMILIES WHO SENT UP THEIR FORMERLY ICDS CHILDREN TO LOCAL PRIMARY SCHOOLS.

Name of ICDS Project	Under C.D. Block	No. of Samples	No. of families who sent up their formerly ICDS children to schools	No. of families who did not send up to schools their formerly children	No. of children who personally attended their primary education.
1.	2.	3.	4.	5.	6.
Rongram	Rongram	30	13	17	31
Bhoi Area	Nongpoh	30	10	20	19
Bhoi Area	Bhoi Area	30	12	18	29
Thallaskern	Thallaskern	30	12	18	23
Total :		120	47	73	102

## CHAPTER - VII

### SUPERVISION, CO-ORDINATION, MISCELLANEOUS :

#### Supervision :

7.1. For the effective implementation of the Scheme, it is envisaged, that the Child Development Project Officer will have to supervise and guide the work of the entire team of the Project which includes supervisors and Anganwadi workers. Besides, he/she will have to ensure the proper maintenance of registers and other records both at the project and the anganwadi centre levels.

For this purpose he/she will have to inspect the records periodically. Being the key functionary of the scheme, the CDPO has enormous responsibilities to perform at project level pertaining to administration combined with Supervisory activities at the anganwadi centre level. Considering the time taken by the three samples (ICDS Projects), selected for this study, in supplying the required data, it was apparent that the records were not properly maintained. Actually, it was an inordinate delay in receipt of desired information from one of the three selected ICDS Projects that had disabled us from executing the tabulation and other processes of the study in right earnest. Besides, the figures so furnished by the sample projects were found inconsistent. This fact can be easily observed from the various Tables incorporated in this Report. It may, however, be pointed out that their being preoccupied with varied activities gave them no time enough to personally scrutinise the figures as compiled by their staff as thoroughly as necessary.

7.2. Out of 8 Selected Anganwadi Workers, one of them was yet to complete one year period in her service. So of the remaining 7 Workers, 5 of them replied that their respective CDPO could pay a visit to their centre for once a year. One of them however stated it to be once or twice a year with no regularity in the frequency of her (CDPO) inspection, while another respondent just hinted the irregularity of the concerned CDPO's visit. In few Centres, there was found an attempt by the Workers to put in records the visit paid by any Officers of staff or their own or other Departments. It is not known whether in such a brief visit the CDPO could get time enough to examine the propriety of maintenance of records by the Anganwadi Workers under their jurisdiction. Considering the number of ICDS Centres under each CDPO, the time perhaps, in most cases, at their (CDPO) disposal could hardly permit them to ensure satisfactory supervision of their village level functionary units.

#### At Supervisors Level :

7.3. The effective supervision is, on the other hand, expected to be delivered by the supervisors appointed to act as immediate help and guide to the AWWs in various ways. As shown at para 3.5. the ratio between a supervisor and the AWWs, under the three selected ICDS Projects during 1991-92, worked out, on average, to 1:19. Under this condition, they cannot be expected to conduct a monthly supervision of the works of the AWWs under them. Besides, their normal supervisory functions, the services of these supervisors were also utilized for delivering the SNP



food-stuffs to the Centres. Hence, these field staff will hardly find sufficient time to spare for regular checking the normal activities of their village workers. Even then, some of the workers tended to treat such visiting of the supervisors (for delivery of SNP foods) as normal inspections and recorded the same accordingly in their Inspection Registers. It was evidently clear, however that in few Centres, the concerned supervisors did actually conduct necessary checking of the Records maintained by the workers and their Remarks pertaining to certain points were actually found during our field visit for the purpose of the study. The extent of inspection, made by the Supervisors, including most probably the latter's on-the-spot delivery of SNP was shown in the Table No. 7.1., according to statement made by the workers, and also as per records found in their Inspection Register. It is observed that two each of the total 8 samples indicated the frequency of visits by the supervisors to be (i) 4(four) times a year and (ii) monthly while one each said it to be (iii) 8 times (iv) 4-7 times and (v) 7-11 times a year. It was also reported by a newly appointed Anganwadi worker who joined in July '91, that so far (i.e. up to the time of our visit for the purpose of study sometimes in Nov. '92) only once did the concerned supervisor paid a visit to her Centre and that was for delivery of the SNP food Stuffs. As a matter of fact the latter worker needed special attention by the Supervisor for necessary instructions and guidance. Taking all the facts into consideration with a special reference to the maintenance of Records, we are inclined to say that the supervision needs substantial improvement in order to derive the maximum benefit from the scheme.

T A B L E N O . 7 . 1 .

FREQUENCY OF INSPECTION BY THE SUPERVISORS TO THE  
SELECTED ANGANWADI CENTRES.

Sl. No.	Frequencies of visits in a year.	No. of Samples
1.	Monthly	2
2.	4 times	2
3.	8 times	1
4.	7-11 times	1
5.	4-7 times	1
6.	Once so far	1

Co-ordination :

7.4. At Project level, there was a Block Level Co-ordination Committee (BLCC) chaired by a Block Development Officer in respect the two Selected ICDS Projects but by a sub-divisional Officer (Civil) in one Project. The CDPO became however a member Secretary in all the three ICDS Projects. Other members consisted of the representatives from the involved Departments like PHL, PWD, Health Education and one local M.L.A. The Committee was constituted with a view to, (a) ensuring Co-ordination among the involved departments located at Block level and (b) identifying any bottlenecks and practical difficulties and to suggest remedial measures. During 1991-92, the BLCC of Rongram ICDS Project had two sittings. In its last meeting, the ~~resolutions~~ adopted referred to (i) involvement of the AWWs in adult literacy Programme, (ii) supplying of safe drinking water in such AW Centres having as yet no such facilities and (iii) preference be given to roads leading to AW Centres etc. Concerning the BLCC of Thallaskein ICDS Project, though said to have met thrice in 1991-92, yet no proceedings of the last meeting was furnished by the CDPO. The CDPO of Bhoi Area ICDS project candidly admitted to have no meeting of the committee during 1991-92.

7.5. According to the CDPO, Bhoi Area there was, besides BLCC, a District Level Co-ordination Committee, under the Chairmanship of the Deputy Commissioner, East Khasi Hills, in which all the CDPO's, the District Heads of the involved Departments shared their views concerning any problems standing in the effective implementation of the ICDS Scheme.

7.6. Over and above, the co-ordination between the Social Welfare and Health Departments was further strengthened through series of meetings between the field Officers of the two Departments, in this connection, we had discussions with one lady supervisor of Thallaskein ICDS Project in their office since, their CDPO was not in station both at the time of proceeding to and returning from our field study. According to her (Lady Supervisor) monthly Sectoral Meeting used to be held regularly between the CDPO, the Medical Officer (M.O.) I/C of the Sector, the LHV, the concerned Lady supervisors (LS) and Anganwadi Workers. The main purpose of such a meeting was of Report compilation. In Bhoi Area Project, this kind of meeting was also said to be prevailing. Perhaps, the same was also held under Rongram Project, albeit, no mentioning of it was made. Apart from the said Sectoral Committee, the other two-tier of monthly meeting consisted of (i) Project meeting and (ii) District Level meeting

both under the Chairmanship of the Civil Surgeon. To the Project Meeting all the M.O.s, the LS, LHV's and the CDPO incharge of the Project shared each other in solving any problems besides the Report Compilation. The District Level meeting in Jaintia Hills comprised all the CDPO's, the M.O.s I/c ICDS, for full deliberations on the over-all performance of the ICDS Scheme in relation to its health services component. These three tier committees constructed undoubtedly the existence of effective Co-ordination between the two Departments if such meetings were held regularly. In so far as Jaintia Hills was concerned we were led to understand that till the time of our interviewing the said Lady Supervisor (Thadlaskein ICDS Projects) the meetings stated above sat regularly every month.

7.7. How far the PHE extended their effective co-operation towards the Scheme may perhaps be explained through its actual provision with safe-drinking water to the villages covered under the ICDS. As per data furnished by the three selected ICDS Projects though incomplete, it can be seen that out of 307 A W Centres, as in 1991-92, there were only 189 centres having water supply schemes through PHE, the percentage of coverage being 61.6%. On the part of the study it was intended to focus the new water supply Schemes provided to those villages already covered by the Scheme, but due to wanting of materials the objective cannot be materialised, except in respect of one Project viz. Rongram which indicated that during 1988-89 to 1991-92, there had been 6 water supply schemes raised in these areas brought already under the ICDS scheme. Table No.7.2. depicted in terms of figures of what was discussed in this paragraph.

TABLE - No. 7.2

EXTENT OF COVERAGE THE ANGANWADI CENTRES WITH  
RURAL WATER SUPPLY SCHEME

ICDS Project	No. of Angan-wadi Centres as in		No. of Angan-wadi Centres with W.S.S. as in		New water supply after ICDS during		Remarks
	1988-89	1991-92	1988-89	1991-92	1988-89	1991-92	
1.	2.	3.	4.	5.	6.	7.	8.
Rongram	61	61	19	25	6		*related to 1990-91 as no intimation from PHE for 1991-92
Bhoi Area	106	127	89	*90	1		
Thadlaskein	105	99	n.a.	74	n.a.		due to bifurcation of the Project
Total:		307		189			

7.8. Similarly out of 8 selected sampled Anganwadi Centres, 4 of them were found to have been provided with water supply scheme. All these four Centres were established during 1982 and 1983. There were three centres found to depend on ponds and wells for their drinking water purpose, while one Centre was served partially by the PHE W.S.S. and by the flowing stream.

#### Community :

7.9. Accommodation for carrying out the activities of the Centres should be the prominent item of contribution supposed to be obtained from the beneficial villages. For this purpose, the Community Halls raised under the Anti-poverty scheme in three of the sample centres turned to be the kind of contributory items by the community towards the scheme. Besides, the local school-buildings in two Centres served as accommodation for running the non-formal pre-schools. It was only in one Centre that a thatched house-building was actually constructed by the village exclusively for the ICDS Scheme, although without benches for the purpose of non-formal school. In two Centres, however, for want of public participation and concern, the Anganwadi workers had to conduct their SNP and non-formal school services in private compound in an open air. In one centre the local headman, it was alleged, just allayed the Anganwadi's anxiety by his repeated vain assurances for construction to be started for the Scheme. In our meeting with him also, the same plea was made to us. With regard to another Centre, through direct interrogation of the headman, it became clear that just because of the latter's misunderstanding with the worker, that led to the disallowing the worker from conducting her activities even under the roofs of the local school-building. In contrast to this situation, a good gesture shown by the community of Allegre village under Rongram ICDS Project, by providing a separate building for the Anganwadi Worker followed with annual repairing proved prominently of the local people's interest and contribution towards the Scheme. In course of field study in all the eight selected Centres, we tried to evaluate through observation, people's attitude towards the Scheme and found that theoretically almost all of them liked the scheme but practically very few were willing to come forward.

#### Women Organisations :

7.10. It was surprised to find that in all but one Centre, no women organisations existed. Hence, no co-operation ever came forth from the Women-folk. In one Centre (Allegre) where Women

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Organisation was in existence, sometimes, their services were available in assisting the Centre through distribution of SNP foods to the beneficiaries. When asked, all the selected beneficiaries samples expressed their readiness, however, to assist the workers in any possible way if and when required. But so far no such help was sought for, except those of Allegre Centre.

Miscellaneous :

Kit for Anganwadi Worker :

7.11. For the supply of SNP foods to the beneficiaries certain items of cooking vessels and other materials were issued to the anganwadi workers. The common equipments received by the sample workers are shown in the Table No. 7.3. It may be seen that cooking vessels and buckets were actually made available to all the selected workers but not with an equal number. According to the statement by the samples, it was found that 3 (three) out of 8 (eight) workers were able to get 2 nos. each of cooking vessels while 4 (four) of them received 2 nos. each of buckets. The remaining workers managed to get just one each the above two items. With regard to a curry spoon which served as a measurement for distribution of the share of the malnourished and the severely malnourished children, 3 (three) of the samples reported to have not received of the same and had therefore to manage thing of themselves. A kettle was received just by 1 (one) sample. With regard to table, 4 (four) workers failed to get the same while 3 (three) of them said to have received with one chair each and another 3 (three) with one rack/almirah each. So the fact amply demonstrated a non-uniformity in the quantity of different items of requisite equipments distributed to the anganwadi workers. As regards, a weighing machine, it is obvious that the same was issued to all but one worker had since returned it to the concerned CDPO's office because the machine became defective. Till the time of our visit, she had not been supplied with a substitute. Similarly, the Table 7.3 indicated that 3 of the buckets and 1 (one) table issued to the selected anganwadi workers had turned unserviceable.

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TABLE No. 7.3

EQUIPMENTS SUPPLIED TO THE SAMPLE ANGANWADI WORKERS

Sl No	Materials	Frequencies of the centre which received			Nos. of unserviceable
		1 no.	2 no.	Nil.	
1.	2.	3.	4.	5.	6.
1. Cooking vessel		5	3	-	-
2. Buckets		3	4	-	3
3. Curry-spoon		5	-	3	-
4. Kettle		1	-	7	-
5. Table		4	-	4	1
6. Chair		3	-	5	-
7. Rack/Almirah		3	-	-	1 Since returned concerned CDPO's office.

Arrangement for fuel:

7.12 In all the six selected Anganwadi Centres, i.e. under the Bhoi Area and the Thallaskain ICDS Projects, the helpers' expenses on fuel were subsequently made good through an annual re-imbursement of the same. But the rate of payment differed from one centre to another and also from year to year even for the same centre. Besides, the rates were said to have been cut down now from those of previous years. Thus, from among the 4(four) Centres which all belonged to the same Project, one of them said to have been paid annually at the rate of Rs.20/-P.M. as against the previous rate of Rs.50/-P.M. To the other one, the rate of payment was stated to be ranging between Rs.25/- and Rs.30/-P.M. The third sample indicated that their centre got a cash payment in lieu of fuel at the reduced rate of Rs.40/-P.M. from that of an earlier one of Rs.50/-P.M. while the fourth sample of the same Project (Bhoi Area) stated the amount of to be Rs.400/- as against Rs.600/- per annum previously. Coming to Thallaskain ICDS Project, one Centre indicated to have been paid a lumpsum of Rs. 400/- per year during 1990-91 and enhanced amount of Rs. 593/- in 1991-92. All these payments were paid direct to the helpers, that is why, one anganwadi pleaded for her ignorance of the matter. In contrast, the two selected Anganwadi Centre under Romgram ICDS Project, conveyed of their having no information of such facilities. This fact was also confirmed by the CDPO himself. They (helpers and Anganwadi workers) had to manage themselves for the fire-wood as the donation from the children was quite inadequate to meet the requirement for cooking the SNA foods. It is an undeniable fact that now-a-days even in remote places, the supply of fire-wood has

become very limited. Hence, the poor social workers need a sympathetic consideration by the Department so as to create incentive to them. Summing up, the study found that payment in cash was made to the helpers in the Anganwadi Centres (Bhoi Area and Thadlaskein) but at unfixed rates varying from Centre to Centre, while no such facility was extended to the AW Centres under Rongram ICDS Project.

## CHAPTER - VIII

### IMPACT OF THE SCHEME :

8.1. As the Scheme has, in main, three components. Accordingly, the impact of the ICDS Scheme may be studied, among other things under three aspects namely body growth due to supplementary nutrition, health conditions and education of the beneficiaries. It is true, no doubt, that physical health is the combined effect of nutrition and health care. For the sake of our study, however, we may assume that a direct and immediate impact on Child's body-weight may be attributed to good and nutritious foods.

#### Body growth :

8.2. Group-wise number of beneficiaries was obtained from the selected ICDS Projects and Anganwadi Centres as they stood during the first and the last quarters of each year under the reference period (1988-1991). The underlying idea was that positive impact of the supplementary nutrition in the beneficiaries may be reflected through a downward trend in the number of the Grade IV & III, beneficiaries by the last quarter as compared with that of the first quarter of the same year. Similarly, one may take it otherwise in case the number of the above two groups of beneficiaries remained either constant or enhanced during the last quarter as against of what they stood during the first quarter. Viewed from this point of consideration the data furnished by the Rongram ICDS Project (reproduced at Table No. 8.1.) seemed to have some bearing in this regard. For example, the Grade IV beneficiaries slightly dropped to 2 in their number during the last quarter of 1988 from their being 3 in number in the first quarter. This same trend was noticed in the subsequent years also. Thus in 1989, the number of Grade IV beneficiaries <sup>lowered</sup> from 12 in the first quarter to 9 in the last quarter, in 1990 from 9 to 7 and in 1991 from 24 to 18, as can be seen from the said Table No. To some extent, this tendency was also visible in respect of the Grade III beneficiaries. Hence, we are apt to conclude, that the number of severely malnourished Children (SMC) declined markedly during the last quarter as compared

pared with that of the first quarter of the year, in so far as Rongram ICDS Project was concerned implying thereby of a positive impact of the scheme on the concerned beneficiaries.

8.3. Figures pertaining to Bhoi Area Project indicated a mixed impact. That is, for the years 1988 and 1990 the Grade IV & III beneficiaries (both classified as SMC) tended to decrease visibly in the last quarters from that of the first. To be specific the number of Grade IV beneficiaries dropped from 60 during the first quarter to 38 or 36.7% in the last quarter of 1988 and from 60 to 40 or 33.3% during 1990 as can be observed from Table No. 8.1. The number of Grade III beneficiaries too behaved in the same manner for these two years as can be observed from the said Table No. . As against this positive feature, we have a negative consequence during 1989 and 1991, when the number of Grade IV beneficiaries recorded an increase up to 27 in the last quarter from that of 19 in the first quarter in 1989 and to 30 from 27 in 1991. With regard to Grade III beneficiaries their number registered an increase in the last quarter of one year only that is, in 1989. Otherwise, their number for the remaining years remained declined during the last quarter as compared from that of the first quarter. So here also, we can observe a trend testifying the partial impact of the Scheme.

8.4. Contrary to the picture presented by the two ICDS Projects the Grade IV beneficiaries, under Thaklaskein ICDS Projects, instead of showing a downward trend registered a sharp increase in the last quarter, as compared to that the first quarter of the two successive years beginning from 1988. Thus the figures at Table 8.1. showed that the number of Grade IV beneficiaries jumped from 1 No. in the first quarter to 7 nos in the last quarter of 1988 and from 6 to 10 in 1989, while, their number remained the same (i.e. 6) both in the first and the last quarter in 1990. During 1991, however, we have the opposite consequence in which their number abruptly dropped from 9 nos in the first quarter to a single one in the last quarter. The same erratic tendency was shown in respect of Grade III group beneficiaries (the another group constituting the severely malnourish children when their number vacillated from 4 nos in the first quarter of 1988 to 38 nos in the last quarter of the same year. While in 1989 they moved in an opposite direction, i.e. from 171 nos during the first quarter to 59 nos in the last quarter. Similarly, from 7 to 4 during the first quarter and the last quarter respectively in 1990. Then again, the number of Grade III beneficiaries moved inversely

from 4 nos in the first quarter to 13 nos in the last quarter of 1991. In view of this irregular direction in the movement of the number of the SMC between the first and the last quarter during the years under reference, it is difficult to determine what impact the scheme had on the beneficiaries. This situation so occurred may be perhaps due to inaccuracy in figures maintained by the CDPO's Office.

TABLE NO. 8.1.

GROUP-WISE NUMBER OF BENEFICIARIES DURING THE FIRST AND THE LAST QUARTER OF THE YEARS, 1988 - 1991.

Group	Rongram ICDS Project							
	1988		1989		1990		1991	
	Quarter		Quarter		Quarter		Quarter	
	1st	last	1st	last	1st	last	1st	last
1.	2.	3.	4.	5.	6.	7.	8.	9.
Normal	410							
I	447	435	401	382	552	520	577	561
II	140	135	125	127	187	172	166	157
III	19	19	19	17	32	33	89	83
IV	3	2	12	9	9	7	24	18
	1019	591	557	535	780	732	856	819

Group	Bhoi Area ICDS Project							
	1988		1989		1990		1991	
	Quarter		Quarter		Quarter		Quarter	
	1st	last	1st	last	1st	last	1st	last
I.	10.	11.	12.	13.	14.	15.	16.	17.
Normal	2077	1786	1581	1827	2411	1656	1515	993
I	1748	1158	1101	1237	1616	1253	1268	625
II	875	524	494	596	825	501	492	194
III	214	146	99	129	206	120	81	29
IV	60	38	19	27	60	40	27	85
	4774	3652	3294	3815	5118	3570	3383	1928

Group	Thadlaskein ICDS Project							
	1988		1989		1990		1991	
	Quarter		Quarter		Quarter		Quarter	
	1st	last	1st	last	1st	last	1st	last
I.	18.	19.	20.	21.	22.	23.	24.	25.
Normal	395	613	811	687	408	229	144	93
I	199	464	625	352	352	93	97	125
II	72	197	570	329	124	18	60	27
III	4	38	171	59	12	7	4	13
IV	1	7	6	10	6	6	9	1
	671	1319	2183	1437	902	353	314	259

Sources : CDPOs.

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..... 82/-

At the Anganwadi Centres Level :

8.5. Data of the same nature i.e. the group-wise number of beneficiaries, were collected from the eight selected anganwadi centres as per records found in their respective SNP Register. To our upset, it was, however, found that out of 8 selected Centres, only 3 of them appeared to be concerned in keeping records pertaining to the body weights of the beneficiaries. Further, even these 3 centres also, a good number of the beneficiaries bore no indication as to their weights i.e. grades against their names in the register. On query, we were told that such beneficiaries did not turn up on the date(s) set for weight measurement and that their foods were issued through their brothers/sisters. The 3(three) Centres considered to possess the required information albeit with many absentees, included Allegre (Rongram ICDS), Kyrdem (Bhoi Area) and Nartiang-Pohshnong (Thadlaskein). Thus, we could, anyhow, manage to have at least one Centre each for the three sample ICDS Projects. The workers of the two Centres, viz. Dblongmanda (Rongram) and Umjalasiaw (Thadlaskein) did have reasonable excuse on the ground of their being new hands. Another Centre, named, Pilangkata, (Bhoi Area) did no doubt attempt to fulfil this requirement, but the data for the two years were found incomplete. The remaining two Anganwadi Centres, namely, Sonidan and Nongkhrah, both under Bhoi Area ICDS Project were found lacking records completely on this particular indicator even though these same workers have been in their respective Centre since its inception.

Allegre Anganwadi Centre :

8.6. The worker was transferred to Allegre sometimes during the last part of 1988. Hence for the year 1988, there were no data relating to the grades of beneficiaries. The same were however, available for the significant number of beneficiaries who bore no remarks pertaining to their category. As per available data shown at Table No. 8.2., it may be observed that during 1989, while there had been only normal and grade I beneficiaries during the first quarter but by the last quarter, there had been 1 beneficiary whose weight touched the level of Grade III. Similarly, during 1990, there had been no grade III and grade IV beneficiaries during the first quarter but by the last quarter, the beneficiaries belonging to these two grades viz (III & IV) stood respectively at 20 and 7 in number, while the normal beneficiaries fell sharply in number from 28 in the first quarter to 7 in the last quarter and that of Grade I from 14 to 8.



In 1991, the grade III beneficiaries rose from 3 in number during the first quarter to 10 in the last quarter and that of grade IV from nil to 1. It therefore seemed that the SNP feedings and health services administered under the ICDS Scheme had no effect on the weights of beneficiaries.

Kyrdem Anganwadi Centre :

8.7. The Table NO. 8.2. showed that a large number of beneficiaries as many as 69 (73.4%) out of a total 94 during the first quarter and 77 (68.7%) out of 112 in the last quarter of the year 1988 remained ungraded. The figures of the reported beneficiaries indicated a rising trend of those classified as normal, grade I and grade II during the last quarter as compared to that of the first quarter, while that of grade III dropped from 3 to nil. There was, however, 1(one) number of grade IV beneficiary in the last quarter (1988) when there was none during the first quarter. This one beneficiary might be the one among these beneficiaries who got themselves newly registered after the first quarter of the year (1988). In 1989 it was found that 3 nos of beneficiaries classified as grade III during the last quarter when there was nil in the first quarter while there was no grade IV for both the quarters during the year. Almost the same tendency was found during 1990 with 6 grade III beneficiaries during the last quarter with none in the first quarter. During this year, however, there remained 1 beneficiary during the first and last quarter. By 1991, the grade III beneficiaries increased by 1(one) in the last quarter (i.e. from 1 to 2). During the year there was 1(one) grade IV beneficiary in the first quarter but there was no more in the last quarter.

Nartiang-Pohshnong Anganwadi Centre :

8.8. The non-reported beneficiaries escalated alarmingly in 1991 especially in the last quarter when out of a total 53 beneficiaries 42(79.2%) of them had no weight measurement at all due, perhaps, as pointed out earlier, to absence of weighing machine which had since been returned to the CDPO's Office being found defective. Prior to this year, their number, compared to the other centres, appeared to be moderate. During 1988, the SMC Children became nil in the first as well as in the last quarters of the year. In the following year (1989), however, the two numbers of grade III beneficiaries in the first quarter declined to 1(one) in the last quarter and from 2 to nil during 1990. Again, by 1991, there was none either for the grade III or grade IV beneficiaries. The fluctuation in the number of beneficiaries by grade was depicted in the Table No. 8.2.

TABLE NO. 8.2.

GRADE-WISE NO. OF BENEFICIARIES UNDER THE THREE  
ANGANWADI CENTRES DURING THE FIRST & LAST QUARTERS  
OF 1988 to 1991.

Grade	Allegre Anganwadi Centre							
	1988		1989		1990		1991	
	Quarter		Quarter		Quarter		Quarter	
	1st	Last	1st	Last	1st	Last	1st	Last
1.	2.	3.	4.	5.	6.	7.	8.	9.
Normal			54	26	28	7	29	26
I			4	19	14	8	24	20
II		N.A.	-	1	1	21	9	11
III			-	-	-	20	3	10
IV			-	-	-	7	-	1
N.R.				18	12	47	39	38
(Not Reported)								
Total :			58	64	55	110	104	106

Grade	Kyrjem Anganwadi Centre							
	1988		1989		1990		1991	
	Quarter		Quarter		Quarter		Quarter	
	1st	Last	1st	Last	1st	Last	1st	Last
1.	10.	11.	12.	13.	14.	15.	16.	17.
Normal	5	8	15	13	11	6	10	8
I	11	16	26	22	15	24	13	26
II	6	10	11	1	14	21	11	16
III	3	-	-	3	-	0	1	2
IV	-	1	-	-	1	1	1	-
N.R.	69	77	40	53	46	25	66	54
Total :	94	112	92	92	87	83	102	106

Grade	Nartiang-pohshnong Anganwadi Centre							
	1988		1989		1990		1991	
	Quarter		Quarter		Quarter		Quarter	
	1st	Last	1st	Last	1st	Last	1st	Last
1.	16.	19.	20.	21.	22.	23.	24.	25.
Normal	17	21	5	11	13	17	17	5
I	5	8	10	14	13	9	9	5
II	3	4	7	11	9	16	12	1
III	-	-	2	1	2	-	-	-
IV	-	-	-	-	-	-	-	-
N . R.	20	21	35	11	13	29	32	42
Total :	45	54	59	48	50	71	77	53

Sources : Anganwadi Centres.

:- 94 :-

Health improvement :

8.9. Lack of records : One of the impediments encountered was an inadequacy/non-availability of the relevant data which formed the important indicators for the purpose of the study. On the health aspect, it was considered necessary to have materials indicating the morbidity and mortality conditions prevailing prior to the commencement of the scheme which would serve as benchmark for future reference. The non-availability of such information in the sample centres both at the village records and as well as at the anganwadi workers made us impossible to offer in this study specific comments regarding the impact of the study on the target groups. Besides, among the 8 selected anganwadi centres, only 3(three) of them could give us information on the mortality rates among the 0-5 + years' Children in their respective Centre for the short period from 1988- to 1991. These three Centres did not, however, maintain records on the morbidity conditions of the vulnerable groups in their respective Centre.

8.10. Among the afore-said 3 Samples, Kyrjem Anganwadi Centre appeared to be more particular than the other two in keeping regular records for the death of Children below 6 years of age. According to her records, for the years 1988 to 1991, there were no deaths during 1988 and 1990, but incidence of death occurred in 1989 when a child of less than a year plus 3 Children aging between 1 and 3 years old passed away. Similarly, in 1991, 2 Children both below one year old died. As for the other two Centres, information concerning the child mortality was found to relate to one year only (1991). So Nartiang-Pohahnong Centre indicated the incidence of death on 2(two) Children both of less than a year old. Like-wise, the other Anganwadi Centre, namely, Allegre, a child of between 1 and 3 years old and another child between 4-5 years of age expired during 1991<sup>and</sup> no records for the previous years.

Resistant Power :

8.11. A healthy child is supposed to possess more resistant power than the one who is physically weak. From the selected 120 samples, 75(62.5%) of them assented that according to their observation their children who benefitted from the different services of the ICDS Scheme were found to be less susceptible to diseases commonly affecting the children of their age. Although they suffered from such diseases yet they came round within a brief period of their suffering. 39(32.5%) of the total samples expressed, however, their ignorance of the positive or other-

wise contribution of the Scheme, while the remaining 6(5.0%) indicated the absence of any good effect of the scheme on their children. The Table No. 8.3. demonstrated the project/Block-wise break-up of the beneficiaries' view pertaining to the impact of the scheme upon their children. Thus, under the Thallaskain Project, the said Table showed that out of 30 respondents only 13 or 43.3% of them indicated the favourable effects of the scheme when 14(46.7%) stated to have no idea at all either of the ill or good effects of the scheme. While 3(10.0%) of them said that the scheme had no effect at all. Almost alike to that of Thallaskain Project, we have that of Bhoi Area C.D. Block, (under Rongram Project) when 17(56.7%) spoke in favour of the scheme while 13(43.3%) remained non-committed but none had an adverse view against the scheme. As against this seemingly bleak opinion of the scheme we have the beneficiaries from the Nongpoh C.D. Block under Bhoi Area Project itself who accounted 23 or 76.7% of the total 30 selected samples saying that their children proved better off in resisting against diseases. Giving the similar view, we have from Rongram Project with 22(73.3%) of the 30 samples confirmed the positive contribution of the scheme to their children who were participating in the SNP and health <sup>services</sup> rendered by the scheme.

TABLE NO. 8.3.

THE BREAK-UP OF THE SAMPLES' VIEW REGARDING THE RESISTANT POWER OF THE ICDS BENEFICIARIES AGAINST COMMON DISEASES BY PROJECT/BLOCK.

Sl. No.	Name of the ICDS Project	Under the C.D. Block	Whether the resistant power of their ICDS Children against common diseases was better than non-ICDS beneficiaries.				Total
			Yes	No	No. Idea		
1.	2.	3.	4.	5.	6.		7.
1. Rongram		Rongram	22	3	5		30
2. Bhoi Area		Nongpoh	23	0	7		30
3. Bhoi Area		Bhoi Area	17	0	13		30
4. Thallaskein		Thallaskein	13	3	14		30
Total :-			75	6	39		120

Child Mortality (Parents' view)

8.12. The study sought for the sample beneficiaries' view regarding the intensity or other-wise of child mortality in their respective village since the operation of the ICDS Scheme. In this connection, it is heartening to note that none of the samples reported about the worse condition of the child mortality in their respective area with the introduction of the scheme. We have 75 (62.5%) of the total 120 samples who saw the declination in the deaths of young children since implementation of the ICDS Scheme while only 12 (10%) of them viewed things as usual. There were however as many as 33 (27.5%) of the total samples who responded as to their having no idea at all. The Table No. 8.4. indicated that out of 30 samples, each, those who observed that the child mortality had declined since the launching of the ICDS Scheme accounted in an ascending order, as 11(36.7%), 18(60.0%), 22(73.3%) and 24(80.00%) under Bhoi Area Block (of Bhoi Area Project) Thallaskein Project, Rongram Project and Nongpoh Block under Bhoi Area Project respectively. As to those who said to have no comments at all, we have a maximum no. from the Bhoi Area Block, under Bhoi Area Project with 16 in all or 53.3% of the total 30 samples.

T A B L E NO. 8.4.

THE BREAK-UP IN THE BENEFICIARIES VIEW REGARDING THE  
IMPACT OF THE ICDS SCHEME ON THE CHILD MORTALITY IN  
THEIR VILLAGE.

Sl. No.	Name of the Project	Under the C.D. Block	Whether child mortality since the launching of the ICDS Scheme remain-	Total			
			ed				
			De- as worse No				
			cli- usual idea				
			ned				
1.	2.	3.	4.	5.	6.	7.	8.
1. Rongram		Rongram	22	4	Nil	4	30
2. Bhoi Area		Nongpoh	24	1	Nil	5	30
3. Bhoi Area		Bhoi Area	11	3	Nil	16	30
4. Thallaskein		Thallaskein	18	4	Nil	8	30
Total :-			75	12	Nil	33	120



### Local People's view :

8.13. In course of our field study, we ascertained from the local headmen and the other inhabitants as to whether the on-going ICDS Scheme was found beneficial to the village. To this, everybody confirmed an immense contribution of the Scheme towards the health condition of the children in their respective village. They attributed the prevailing reduced rate in child morbidity and mortality mainly due to the services operated under the ICDS Scheme.

### Local People's vague conception of the Scheme :

8.14. Notwithstanding of the high opinion that people reported to have about the scheme, a note of caution may however, be sounded as to their clear-cut understanding of the full implications of the different services delivered under the Scheme. For example, we have seen in the Chapter V regarding the high percentage of drops-out in respect of DPT, Polio and typhoid immunizations. Those beneficiaries who might have completed even up to two dozen of DPT immunizations but missed the third one, is deemed as being non-beneficial of the same. So this implied their lack of clear conception of the implication of the DPT immunizations. Again, the presence of back-log of SNP beneficiaries who did not turn up for the weight measurement may be partly due to ignorance on the part of parents of the children. The cause of this situation may also be ascribed due to lack of public motivation that the village level functionaries are supposed to mobilize in the village. If they were fully conscious of the fact, that the body weight of a child is an indicator of a child's health condition, they should have become eager for the same as everybody is towards his/her child.

### Response to Ante-Natal Clinic :

8.15. Out of 120 samples 71(59.2%) of them reported to have attended the Ante-Natal Clinic during their pregnancy period while 49(40.8%) had no interest in doing so. From the Table No. 8.5., it was in the Rongram Project where the highest percentage (76.7%) of attendance took place when out of 30 total samples. 23 of them said to have participated in the provided facilities for the pregnant women. Next we have beneficiaries, belonging to Thajlaskein Project, whose response to the Ante-Natal Clinic rated at 63.3% (i.e. 19 out of 30). Those of Nongpoh and Bhoi Area C.D. Block, both under Bhoi Area Project, recorded almost a matching proportion of 50:50 between the participants and the non-participants. Taking an over-all picture, we may however,

safely conclude that the impact of the scheme in so far as the welfare for the pregnant women was by and large encouraging.

TABLE NO. 8.5.

EXTENT OF PARTICIPATION IN THE ANTE-NATAL CLINICS UNDER THE ICDS SCHEME.

Sl. No.	Name of ICDS Project	Name of C.D. Block	Number of Sample Beneficiaries		
			who attended Clinics	who did not attend Clinics	Total
1.	2.	3.	4.	5.	6.
1.	Rongram	Rongram	23	7	30
2.	Bhoi Area	Nongpoh	15	15	30
3.	Bhoi Area	Bhoi Area	14	16	30
4.	Thallaskein	Thallaskein	19	11	30
Total :-			71	49	120

Education :

8.16. The study found that the local people had high regard of the teaching given to their toddlers by the Scheme. But a negative aspect was that many of parents took no interest in keeping up their children education after their completion of age eligible for non-formal pre-school education. While 7 out of the 8 sample Anganwadi Centres maintained no records relating to out-turn of their pre-school education services, one centre had a distinction from the rest by having specific year-wise number of her beneficiaries who joined the local formal primary school.

CHAPTER - IX

PROBLEMS, SUGGESTIONS AND CONCLUSION :

Unmatching amount of honorarium :

9.1. The numerous functions, assigned to the Anganwadi workers, as envisaged in the scheme, required a full day exercise by the workers, especially for those who were having little education. This was a common complaint from every sample worker. There was a demand for spare sheets of paper for doing rough works (i.e. calculation, etc.). Considering therefore, the work load, they were called to perform with monthly amount of honorarium ranging between Rs. 225/- to Rs. 275/-, the sample workers considered their remuneration as highly incompatible. Owing to such unsatisfactory amount of honorarium, a good member of Anganwadi

worker quitted their job for better paid avenues of employment. This State of affairs occurring so frequently was hampering a lot for the smooth implementation of the scheme, according to the sample CDPOs.

#### Shelter :

9.2. The non-availability in some of the selected anganwadi Centres of Shelter wherein to carry out the normal feeding and schooling activities cast doubt if such centres could deliver satisfactorily the required services particularly the one relating to non-formal pre-primary school as envisaged in the Scheme. Even for those centres where the village community constructed temporary shelters either for conducting the different activities under the scheme or for accommodation to the Anganwadi Workers there arose the question of annual repairing of which, the same was not done in some centres.

#### Fuel :

9.3. The study found that there was no uniformity in the arrangement of fuel for the anganwadi centres. But hardships affected equally even to those who received the supply of this facility (fuel) in that they got the payment of their fuel Bill either quite late (annually) or less than the anticipated due amount. To the non-receipt of this facility, they had to manage themselves the fire-wood as the contribution by the beneficiaries was always inadequate of the requirement.

#### Note :

9.4. Conditions pertaining to regularity of supply, quality and adequacy of SNP foods already explained at paras 4.41-43 of Chapter IV.

#### Shortage of equipment for Anganwadis :

9.5. Almost all the selected sample workers, complained about their non-receipt of this or that item of equipment required for their effective functioning. Such items included rack, shelf, table, chair, spoon, bucket etc. One of the centres stated to have no weighing machine for some months before the time of our field study as the one issued to her had been returned to the CDPO's Office for necessary repairing of the defects. It was reported that the absence of such materials hampered greatly their normal functions. Another sample pointed out the requirement of enough sheets of plain papers for rough exercise works.

Negative attitude of some workers :

9.6. Keeping in view of the circumstances under which these poor honorary village workers have to perform with their multifarious functions, yet there were some of them whose discouraging attitude towards their duties was so glaring. Some of them appeared to be satisfied with mere discharging of SFP food distribution to the beneficiaries, though actually in many cases this particular responsibility was done by the helpers. The Registers of such workers remained blank for months/years together. It is not clear what kind of data the CDPO can get from such workers. There was also an instance where the relationship between the worker and the local people was not cordial at all.

Perfunctoriness in body weight measurement :

9.7. The omission of many beneficiaries from taking periodically their respective weight <sup>of SFP children</sup> showed no doubt a lack of seriousness on the part of functionaries towards this particular responsibility of theirs. Then with the absence of such service, we have missed one of the vital parameters spelling out the impact of the scheme upon the beneficiaries.

Omission of complete doses of immunizations :

9.8. The Anganwadi workers seemed to take no botheration about those beneficiaries who did not complete the required doses of immunizations for DPT, Polio and Typhoid putting the entire blame upon children's parents. They forgot that one of their prime responsibilities is to educate the ignorant villagers in all possible ways. Hence, they could not shirk their responsibility for the partial failure of this scheme in this particular item of services under the ICDS Scheme.

Lack of proper storage facilities :

9.9. According to the Directorate of Social Welfare, storage facilities at the Project Offices were not adequate. Incidentally however, none of our three sample Projects said to have any problem in this respect, when asked of them. So this may occur to the other ICDS Projects.

Vaccines Problem :

9.10. That the achievement under immunization services was extremely low goes beyond doubt as per data furnished by the functionaries and duly displayed in the relevant Tables of Chapter V. One of the factors that explained for this short

fall was the limited quantity of vaccines particularly for that of BCG as narrated by our ANM samples. The fact that cropped with this problem was storage facilities without which the vaccines cannot be stored beyond specified hours. That is why the Bhoi Area Project with many Anganwadi Centres lying in remote areas suffered for the most in this regard.

#### Irregularity in Health Check-up and Immunizations :

9.11. In their note concerning problems that impeded the effective implementation of the scheme, the Directorate of Social Welfare mentioned about irregular Health Check-up and immunizations in some ICDS Projects. The same Directorate also spoke about the shortage of M.O.S. at the P.H.Cs. level to look after the health services of the ICDS Scheme. The findings was that among the 8 (eight) selected samples, only 1(one) centre (Kyrlem) indicated to have a regular visit by the M.O. for every quarter, even when the PHC was not yet shifted to the place of its present location. We had another sample (Nartiang-Jhshnong) where the doctor used to pay a visit to Centre and conducted a health check-up for the children. The M.O.'s findings/notations were distinctly recorded. The remaining 6(six) samples said (most of them) that they had only once, so far, of an inspection by the Doctor to their respective Centre.

#### Inadequate Supervision :

9.12. As noted earlier, the frequencies of inspection by the supervisors and the like was found inadequate so as to ensure better services by the Anganwadis in the matter of record maintenance and other matters. Paucity of fund, as pointed out by one CDPO, might be responsible for the curtailment of touring by their supervisory personnel.

#### Suggestions for improvement in the functions of the Scheme (Enhanced rate of Honorarium) :

9.13. For boosting the incentive of the Anganwadi workers who are the key factors for the success of the scheme, it is suggested that the authorities may consider for an equitable enhancement of the rate of honorarium corresponding to the volume of works that these pecuniary workers are called upon to shoulder. The recommendation by the Rongram BLCG for involving the AMW in local Adult Education service is a right step in a right direction. This measure will alleviate, not only their low income earning but will be also a good service to the illiterate adults.



### Accommodation :

9.14. As laid down in the "Manual on ICDS", that the community should agree to provide accommodation to the outsider Anganwalis workers and also for the purpose of running the non-formal pre-school education, it is therefore imperative that such undertaking be obtained from the community and the same be strictly adhered to and enforced accordingly. That is, failure to fulfil their commitment means the shifting of the centre to some other places whose inhabitants are ready to provide the required shelter for the purpose.

### Uniformity in Fuel provision :

9.15. With the present deforestation goes on alarmingly unabated, the fire-woods have become scarce every where even in the most interior areas of the State, it is advisable that a provision for fuel for every Anganwadi Centre be earmarked and sanctioned to the latter.

### Constant Vigilance for timely supply of SNP food stuffs :

9.16. To check any slackness on the part of approved sole supplier including its different branches, it is suggested that regular monitoring of the supply of SNP food stuffs to all the projects be done by the Directorate of Social Welfare. Such measure will enable the implementing Department to identify a Branch or Branches of MECOFED belating the supply of food stuffs to the concerned Projects.

### Measures for tackling the alleged shortage in quantity issued from the stated quantity :

9.17. The DPO, ICDS Cell, Tura whose Projects were allegedly said to experience such anomaly, suggested that a physical presence of a staff from Project Office at the MECOFED godown at the time of taking measurement the consignment of commodities meant for their Project. Alternately, a weighing scale be installed to each and every Project Office for re-weighing the quantity of commodities delivered to their respective Project. In between the two, the second alternative appears to be easier than the first one, but has financial involvement which may not be found acceptable by the Government, So for easy approval by the Government, the first alternative is recommended.

### Quarterly Checking :

9.18. To ensure better performance from the Anganwadi Workers perhaps, there is no substitute to regular inspection of the Centre and checking of their Registers, at least once in three months.

for each Centre by the Supervisor I/c. These workers found to be insincere and incompetent despite repeated warnings and advices will have to be replaced after having been given enough time to explain themselves.

#### Insistence of body-weight measurement :

9.19. A periodical measurement of a body-weight of beneficiaries (0-6 years of age) being one of the specified duties of the workers it is suggested that the same may be carried out regularly and the results be indicated clearly against their beneficiaries' respective names. In case of new recruits, the same may be made to learn the technique of operation the matter. The supervisors may also be instructed to check the register in which the body-weight of the beneficiaries is recorded.

#### Increased efforts for immunization Services :

9.20. The immunization services delivered under the ICDS, as portrayed in the relevant Tables based on data supplied by the sample ICDS Projects and anganwadi Centres, proved to be at a very low key. All remedial measures need, therefore, be taken up towards removal of obstacles responsible for this paltry achievement. Vaccines particularly the one relating to BCG may be made adequate. Further, the parents be well instructed as not to miss the scheduled subsequent dose (s) of immunization that is, in respect of DPT, Polio and Typhoid.

#### Consistency of figures at Project level :

9.21. The data received from the selected projects particularly that of Thadlaskein, lacked ostensibly a feature of consistency. It is, therefore, suggested that necessary improvement be effected towards this direction, through proper scrutiny and regular maintenance of the data collected from the anganwadi centres.

#### Maintenance of Vital Statistics :

9.22. To serve as one of the indicators about the impact of the Scheme, a simple Vital Statistics relating to the target groups (i.e. 0-6 years children & pregnant woman) is considered quite necessary. In case of deaths, known causes may be indicated against each incidence. Perhaps such venture will provide a very valuable source, of information about the health conditions in the village.

Records for out-turn of the Non-formal Pre-school Education(NPE):

9.23. A simple additional effort, the Anganwadi workers may have to be made once a year in trying to find out the number of any out-going children of their respective NPE who joint the local primary school. The number so received may be recorded annually in their NPE Register itself.

Minimizing the work-load of the Anganwadi Workers :

9.24. Having heard a grumble from all our selected sample anganwadi workers and also by our own observation, we were quite satisfied that those poor honorary workers were really heavily overburdened. Seeing things by ourselves, with their limited knowledge, we feel quite justified for recommending of reducing their workload to the minimum possible so as to conform more or less with an amount of honorarium they are paid with. It is not clear why their stock Register etc. be subjected to local audit when a supervisor is there to go through their records. This is just to cite an example detail is left to the implementing Department as what things to be done in this respect.

Mobilization of Public participation :

9.25. In order to get an active participation from the public towards the implementation of the scheme, it is perhaps necessary for the CDPOs to make a point that once in two years, at least, they should be able to hold a local public meeting at each and every Anganwadi Centre to explain to the people about the scheme and to remind them of their responsibilities to make the scheme a grand success.

Conclusion :

9.26. Serving the rural community (i.e. target group) under the three dimensions namely, nutrition, health and education, -the most needed services of our rural population, the ICDS Scheme received deep appreciation from the local people with whom we held discussions during our field study. Describing it, as the only development scheme, that has actually come direct to the door of the rural poor, the sample beneficiaries desired that the Government would continue with the Scheme in their respective village/locality. By their own observation, they found the good effects of the scheme on their society. Of course, there were some of the samples who though they liked the scheme no doubt but revealed their dissatisfaction with the working of the local workers. Still there were few of them (samples) who appeared to be indifferent towards the Scheme.

In fine, we may, without any hesitation at all, conclude that the public do actually realise the importance & efficacious effects of the Scheme upon their society but an all out efforts need however, to be exerted in order to clear off the hurdles now impeding for the effective implementation of the Scheme, so that the beneficiaries can derive full benefits from it (Scheme).

## CHAPTER - X

### SUMMARY OF FINDINGS

#### Recruitment of Anganwadi Workers :

10.1. By and large, Anganwadi workers were recruited locally and except few (of them) all were trained (paras 2,3,4.).

10.2. (i) The ratio of Supervisors to Anganwadi Centres in the three selected ICDS Projects worked out to between 1:18 and 1:20 as in 1991-92 as against 1:17 envisaged in the Scheme. (ii) Incidentally, two of the three Selected ICDS Projects reported of a shortage of one Supervisor each in their respective Project. (Paras 2,5,6.).

#### 10.3. Anganwadi Worker :

(i) The study found that the village level worker of the Scheme was entrusted with multiplicity of functions. She was to maintain as many as about 13 Registers (Para 2.7.8.)

(ii) Taking only the main items of her activities, she was to engage approximately 5.00 hours daily. (Para 2.9.)

(iii) All the sample workers expressed their great dissatisfaction over the meagre amount of honorarium paid to them. This view was also shared by all the three sample CDPOs. (Para 2.10,14.)

#### Scheme Coverage :

10.4. (i) Till 1991-92, there had been 29 ICDS Projects (in functioning position) as against 30 C.R.D. Blocks. In the same year, the number of Anganwadi Centres stood at 1536 as against 4902 nos of inhabited villages in the State, according to 1981 census (Para 3.1.2.)

(ii) Of the three selected ICDS Projects, two of them were yet to cover their respective number of inhabited villages (1981) with Anganwadi Centres while in one of them, the Anganwadi Centres as they stood in 1991-92, had already outnumbered its 1981 Census inhabited villages (Para 3.4.)

#### Selection of Beneficiaries :

10.5. (i) In so far as the 6 out of 8 sample Anganwadi workers, the study found very satisfied with measures and exercises taken towards identification of eligible beneficiaries. Thus, almost all the sample beneficiaries were found to belong to low income group. (Para 4.2.)

(ii) A body weight of every SNP child was reported to be first measured invariably before being enrolled as eligible beneficiary. In practice, it appeared, however, that no rigidity was adhered to this condition (Para 4.3.)

#### SNP Beneficiaries :

10.6. (i) There was a steady increase in an over-all number of SNP beneficiaries in the State from 48,885 in 1988-89 to 56,036 in 1991-92 registering thus an increase of 14.63 P.c. in the 4 years period or 3.6 P.c. annually. The 0-6 years children constituted for over 80 P.c. of the total beneficiaries.

(ii) In the 3 selected ICDS Projects, while Rongram Project recorded, no doubt, an upward movement in the aggregate number of SNP Beneficiaries from 1260 in 1988 to 1681 in 1991 which was equivalent to 38.4 P.c. rise, but that of Bhoi Area and Thadlaskein indicated a steep decline by 26.6 P.c. and 43.2 P.c. respectively during the corresponding period. Taking only 0-6 years children the percentage of decrease in 1991 was 39.3. under Bhoi Area and 71.2. under Thadlaskein compared to that of 1988 position.

(iii) The selected Anganwadi Centres (one Centre having no records) showed, on average, to have more than 80 nos of SNP beneficiaries in their enrolment. (Para 4.4.6.)

10.7. The average combined no. of beneficiaries per Anganwadi Centre during 1988-1991 ranged between 19 and 29 nos under Rongram, 33 and 51 nos under Bhoi Area and between 7 and 12 nos under Thadlaskein ICDS Project. (Para 4.14.)

#### Achievement out of estimated no. of beneficiaries based on 1991 Census :

10.8. As regards 0-6 years, the State level achievement stood at 28.8 P.c., Rongram ICDS Project 14.7 P.c., Bhoi Area - 16.2 P.c. and Thadlaskein Project a dismal rate of 3.9 P.c. of their respective estimated number of beneficiaries based on 1991 Census. (Para 4.15.)

#### Accommodations :

10.9. Two of the eight selected Anganwadi Centres conducted their SNP feeding activities in an open air for want of accommodation. (Para 4.17.)

#### Body Weight measurement :

10.10. It was found that a body weight of a large number of 0-6 years children was not indicated against their name in the SNP Registers (Para 4.25.)



Estimated value of SNP foods distributed to beneficiaries :

10.11. The figures available at the grass root <sup>level i.e.</sup> in respect of the selected Anganwadi Centres showed that the value of an amount of SNP foods served to the three-tier group of beneficiaries was much lower than that of stipulated rates except in respect of Allegre and Nartiang-Pohshnong at least for the years 1988-89 and 1989-90 (Para 4.3.)

Supplementary Intake :

10.12. As demonstrated by the findings in the sample Anganwadi Centres, it revealed that none of the selected samples (Centres) could supplement their respective beneficiaries (by grades) with an envisaged amount of calories and protein except one Centre for 1988-89 and 1989-90 only (Para 4.35.)

Regularity and adequacy in the supply of SNP food Stuffs :

10.13. Regularity in the supply of SNP foods was yet to be realised. Shortage of actual quantity of SNP commodities received from that Stated amount was aired by the sample workers, some of whom took pain in re-weighing the same (Para 4.30-37.)

Feeding Days :

10.14. (i) The number of feeding days reported by the sample workers differed widely as between 110 and 271 days in a year as against slated 300 days. Similarly, for the month of July, '92 the variation in the feeding days was between 10 and 27 days depending according to their statement, upon the availability of food items at their disposal.

(ii) Nearly 46% of the selected respondents (beneficiaries) confirmed to be remembering that they were receiving SNP foods less than 6 days a week (Para 4.39 - 4.41.)

Health Component :

10.15. Immunizations :

(i) During 1988-89 to 1991-92, the yearly average no. of beneficiaries immunized in the State against the following diseases stood at :- (a) BCG - 4920 nos (b) DPT - 5351 nos (c) Polio - 4822 nos (d) Typhoid - 2580 nos (e) TT - 4586 nos.

(ii) The figures, so furnished by the Directorate of Social Welfare when being deluded to the achievement per IQDS Project in the State showed that the beneficiaries immunized against BCG, Polio, Typhoid and T.T. worked to be below 300 nos each per year.

(iii) If the same is further inferred to that of beneficiaries for Anganwadi Centre, the results gave us just about 4 nos (approx) per year for BCG, DDT, Polio, typhoid between 2 & 3 and TT between 2 & 4 nos per year during 1988-1991. (Para 5.2.)

Performance by the selected samples :

10.16. (i) In so far as BCG was concerned, the pace of achievement in the 3 sample ICDS Projects was more or less comparable to that of state level figures, where as in respect of DDT, Polio, etc., the position in the three Projects was of higher level.

(ii) At the sample Anganwadi Centres, the no. of beneficiaries administered with immunization against the afore-said diseases was found to be of higher scale than that of State level achievement (per Anganwadi Centre) e.g. BCG beneficiaries stood between 5 and 20 nos annually.

Drops-out :

10.17. (i) An over-all percentage of drops-out in respect of DPT and Polio stood at 34.02 and 33.79 respectively in the selected ICDS Projects.

(ii) The sample Anganwadi Centres indicated the rates of drops-out as 25% and 22.19% for DPT and Polio respectively but that of Typhoid remained as high as 76.7 P.c. (Para 5.9-10).

Non-formal Pre-School Education :

10.18. Every Anganwadi Centre including the selected samples, was reported and found to have a non-formal Pre-school (Para 6.1.)

Supervisions :

10.19. The Supervision both by the CDPOs and Supervisors did not appear to be satisfactory. (Para 7.3.)

Co-Ordination :

10.20. The study found a very satisfactory co-ordination that existed between the Social Welfare and the Health Department. (Para 7.4.)

Community Participation :

10.21. In practice, the community participation in most of the selected Anganwadi Centres was not encouraging. (Para 7.9.)

Impact :Body Weights :

10.22. (i) As to the relation between the SNP Services and the body weight of 0-6 years children, there appeared to exist a favourable impact in respect of the two out of three sample Projects, based on figures furnished by them.

(ii) The available figures from the 3 out of 8 selected Anganwadi Centres gave no clear indication as to the contribution of the ICDS Services to the body weights of the beneficiaries. (Para 8.)

Impact on Health :

10.23. (i) The absence of relevant data made it very difficult for us to throw specific comments in this regard.

(ii) 75% of the selected respondents (beneficiaries) maintained however, that their children who were participating in the services rendered by the Scheme, did have more resistant power against commonly known diseases than others.

(iii) The same proportion of selected samples testified to have observed a marked declining trend in child mortality in their respective village since the operation of the ICDS Scheme.

(iv) Response to Ante-natal clinic Services arranged under the ICDS Scheme was quite evident with 59.2% of the samples claimed to have utilized the given facilities. (Para 8.)

Education :

10.24. Local people showed equal keenness on the Non-formal Pre-school education as to those of formal Primary Schools.

Problem & Suggestions :

10.25. Problems besetting the smooth functioning of the Scheme as well as short-comings in its implementation were duly identified and briefly narrated in Chapter IX.

## MANUAL ON INTEGRATED CHILD DEVELOPMENT SERVICES

ANNEXURE 8.11

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SNF beneficiaries and fund Requirement in IDS Standard calculation for 1000 population.

	Rural	Tribal	Urban
	1,000	1,000	1,000
(1) Total population	1,000	1,000	1,000
(2) Total number of children below 6 years	170	170	170
(3) Number of severely malnourished children.	17	17	17
(4) Number of other children in need of supplementary nutrition (30%, 65% <del>30%</del> respectively)	15	110	51
(5) Number of pregnant women at a point of time (2-4% of population).	24	24	24
(6) Number of pregnant women in third trimester (1/3 of (5)).	8	8	8
(7) Number of lactating women (up to six month of lactation) at a point of time (1.6% of population)	16	16	16
(8) Total of (6) & (7)	24	24	24
(9) Beneficiaries of SN among pregnant women and nursing mothers (40%, 75% and 40% respectively).	10	18	10
(10) Annual Fund requirement			
(a) for row (2) @ Rs. 180 per year	3,060	3,060	3,060
(b) for row (4) @ Rs. 75 per year	3,825	8,250	3,825
(c) for row (9) @ Rs. 150 per year	1,500	2,700	1,500
(11) Total requirement of funds per year (Rupees).	8,385	14,010	8,385
(12) Total number of beneficiaries (rows 3-9)	78	145	78
Project Cost per Annum	8,38,500	4,00,350	8,38,500
(13) Total number of children below 6 years	170	170	170
(14) Number of severely malnourished children	17	17	17
(15) Number of other children in need of supplementary nutrition (30%, 65% respectively)	15	110	51
(16) Number of pregnant women at a point of time (2-4% of population)	24	24	24
(17) Number of pregnant women in third trimester (1/3 of (16)).	8	8	8
(18) Number of lactating women (up to six month of lactation) at a point of time (1.6% of population)	16	16	16
(19) Total of (17) & (18)	24	24	24
(20) Beneficiaries of SN among pregnant women and nursing mothers (40%, 75% and 40% respectively).	10	18	10
(21) Annual Fund requirement			
(a) for row (13) @ Rs. 180 per year	3,060	3,060	3,060
(b) for row (15) @ Rs. 75 per year	3,825	8,250	3,825
(c) for row (20) @ Rs. 150 per year	1,500	2,700	1,500

## Statement showing food items etc. used for SNP under IDS Scheme during 1988-89 - 1991-92 by the sample IDS Projects.

1988 - 89

Sl. No.	Commodities	Rongram		Bhot Area		Thedlaskein	
		Quantity	Amount	Quantity	Amount	Quantity	Amount
		(Kg)	Rs.	(Kg)	Rs.	(Kg)	Rs.
1.	Bengal gram	9051.940	67,889.00	24055.600	1,56,361.40	88,65,000	53,192.00
2.	Ground nut	13436.920	1,96,285.00	5706.000	75,604.50	2,12,21,000	3,33,420.64
3.	Suji	29955.660	1,22,839.00	17435.000	78,457.50	23,192,082	74,612.80
4.	Sugar	9648.340	75,450.00	3487.000	26,152.50	1004,000	23,055.00
5.	Rice	12729.600	55,227.00	25330.500	1,07,654.62	4474,000	20,133.00
6.	M. Oil (1st)	5607.730	1,22,242.50	1081.800	20,486.00	222(114)	5,724.00
7.	M. Dal	5193.500	43,316.00	7703.200	53,933.40	449,000	3,592.00
8.	Salt	744.000	1,421.00	2867.590	5,971.17	448,000	1,257.00
9.	Onion	-	-	1833.965	8,252.84	-	-
10.	Dates	-	-	5664.080	2,11,502.00	2657,862	61,130.00
11.	Soya bean	-	-	27684.100	2,47,238.25	6563,000	41,859.00
12.	Dry pea	-	-	-	-	13949,000	1,11,389.00
13.	Milk Powder	-	-	-	-	-	-
14.	Thin Arrowroot.	-	-	-	-	-	-
15.	Dalda	-	-	235,000	5,336.00	-	-
16.	Soap	-	-	340	3,108.00	-	-
		86458.690	6,84,669.00	123083.835	9,99,997.18	86855,166	7,29,364.44



1989 - 90

ANNEXURE -II

Sl. No.	Commodities	Rongram		Bhoi Area		Thadlaskein	
		Quantity Kg.	Amount Rs. P	Quantity Kg.	Amount Rs. P	Quantity Kg.	Amount Rs. P
1.	Bengal gram	20183.780	1,76,196.00	4340.000	3,38,426.25	12971.102	97,476.76
2.	Grohd nut	15674.020	2,38,215.00	9574.000	1,41,341.00	17871.655	2,77,099.64
3.	Suji	4641.000	20,885.00	-	-	55985.558	2,19,724.62
4.	Sugar	1219.000	17,979.00	-	-	3547.392	69,799.00
5.	Rice	18687.760	84,095.00	18624.000	1,04,247.75	-	-
6.	M. Oil(lit)	4557.020	1,14,622.00	2417.150	44,758.54	-	-
7.	M. Dal	7779.200	82,654.00	4159.950	45,409.65	-	-
8.	Salt	1342.000	2,897.00	3204.150	5,628.30	1075.000	2,022.00
9.	Onion			N.A	1206.00	-	-
10.	Lates			5422.000	60,398.00	936.705	21,544.20
11.	Soya bean			41731.000	3,27,050.00	20695.380	1,47,874.07
12.	Ery pea					-	-
13.	Milk Powder					1222.000(Tins)	39,104.00
14.	Thin Arrowroot					270.000 "	51,300.00
15.	Dalda					-	-
16.	Soap			1719(bars)	5,698.00	107 doz.	3,678.00
		75184.780	7,37,543.00	86472.250	10,74,163.90	113693.792	9,29,532.29

1990 - 91

ANNEXURE

Sl. No. of Commodities	Rongram		Bhoi Area		Thadlaskein	
	Quantity Kg.	Amount Rs.	Quantity Kg.	Amount Rs.	Quantity Kg.	Amount Rs.
1. Bengal gram	10524.900	98,556.00	18306.525	1,51,028.50	14188.000	1,36,204.80
2. Ground nut	6949.800	1,25,096.00	31115.476	48,289.88	-	-
3. Suji	-	-	391.700	3,917.00	24502.388	1,10,260.74
4. Sugar	-	-	-	-	1816.221	14,983.83
5. Rice	-	-	-	-	-	-
6. M. Oil(lit)	1372.800	31,573.00	508.000	14,224.00	-	-
7. M. Dal	-	-	-	-	-	-
8. Salt	485.000	1,092.00	556.925	1,663.35	875.000	1,160.00
9. Onion	-	-	503.500	2,769.25	-	-
10. Dates	-	-	2042.100	40,732.98	-	-
11. Soya bean	-	-	20026.900	3,03,022.00	3780.150	33,076.30
12. Dry pea	-	-	-	-	48784.000	3,80,844.00
13. Milk powder	-	-	-	-	-	-
14. Thin Arrowroot	-	-	-	-	-	-
15. Dalda	-	-	-	-	-	-
16. Soap	-	-	254 bars +63,500 Kgs.	3,397.25	-	-
17. Shira	-	-	*958.500	19,885.00	-	-
	19332.500	2,56,317.00	44294.150	5,88,929.18	93945.759	6,76,529.37

SD/-

1991 - 92

ANNEXURE - II

Sl. No.	Commodities	Quantity Kg.	Rongram Amount Rs. P	Bhoi Area Quantity Kg.	Amount Rs. P	Thadlaske in Quantity Kg.	Amount Rs. P
1.	Bengal Gram	14119.000	1,41,220.00	16997.600	1,63,157.05	35426.724	3,37,977.95
2.	Ground nut			4267.650	1,06,691.25	20455.388	1,15,159.81
3.	Suji					1192.472	12,401.71
4.	Sugar					3059.680	20,652.84
5.	Rice	6345.000	34,897.00	-	-	-	-
6.	M. Oil	2087.800	62,003.00	1284.950	32,296.20	188 11t.	6,956.00
7.	M. Dal	3088.800	40,154.00			631.748	7,896.85
8.	Salt	834.240	1,241.00	1753.312	3,320.12	832.750	1,814.80
9.	Onion			992.900	4,243.05	200.000	1,400.00
10.	Dates					-	-
11.	Soya bean			37458.636	2,89,110.05	6896.094	62,849.00
12.	Dry pea					11418.600	85,639.50
13.	Milk Powder					-	-
14.	Thin Arrow Root					-	-
15.	Dalda	25.600	568.00			-	-
16.	Soap	.085		281.500	2,389.50	-	-
		26500.440	2,80,878.00	63036.548	6,01,207.22	80301.456	6,52,748.49

Statement showing the quantity of Commodities issued to 8 sample  
Anganwadi centres for distribution to SNP beneficiaries under ICDS scheme, during

Sl. No.	Food Items	1988 - 89								Remarks
		Allegre (Qty (Kg)	Polong (Kg)	Pilang- (Kg)	Nongkhen (Kg)	Sonidan (Kg)	Kyrdem (Kg)	Nartiang (Kg)	Unjalsaiw (Kg)	
1.	Bengal gram	276.890	178.942	286.980	234.070	334.290	218.857	159.930	106.200	
2.	Ground nut	235.275	134.710	58.800	45.800	60.500	58.060	332.580	330.700	
3.	Suji	547.000	39.900	213.875	162.000	235.375	-	214.200	234.100	
4.	Sugar	180.000	19.912	42.875	32.400	47.075	35.425	16.065	17.557	
5.	Rice	312.135	160.664	292.175	233.675	98.595	258.990	100.800	100.000	
6.	M. Oil (lit).	108.425	39.178	9.400	9.700	9.120	9.758	3.000	31.175	
7.	M. Dal	183.235	66.880	92.490	70.880	102.320	219.905	10.080	10.000	
8.	Salt	20.000	18.000	24.988	25.280	27.760	24.327	12 p kts.	12.000	
9.	Onion	-	-	21.977	15.980	21.360	15.846	-	-	
10.	Dates	-	-	63.870	59.040	70.550	57.735	66.800	73.975	
11.	Soya bean	-	-	342.835	246.500	379.780	269.780	161.850	165.575	
12.	Dry pea	-	-	-	-	-	-	-	-	
13.	Milk Powder	-	-	-	-	-	-	-	-	
14.	Thin Arrow root	-	-	-	-	-	-	-	-	
15.	Dalida	-	-	-	2 Kg	2.000	2.000	-	-	
16.	Soap	-	-	-	3	3	5 bars	-	-	

Sources : ICDS Projects.

1989 - 90

ANNEXURE - III

Sl. No.	Food Items	Qty (Kg.)	made (Kg.)	kata (Kg.)	khrah (Kg.)	Soridan (Kg.)	Kyrdem (Kg.)	Nartiang (Kg.)	UMJala (Kg.)	Pohshnong	siaw	Remarks
1.	Bengal gram	353.175	178.942	389.900	364.800	456.500	463.900	105.457	143.547			
2.	Ground nut	265.875	134.710	190.800	83.700	96.00	105.900	153.129	154.816			
3.	Muji	78.750	39.900					508.204	446.718			
4.	Sugar	39.300	19.912					18.642	25.245			
5.	Rice	317.100	160.664	256.975	217.800	260.775	275.600	133.900	133.900			
6.	M. M. Oil (1st)	77.325	39.178	19.905	19.750	24.567	26.190		1.000			
7.	M. Dal	132.000	66.880	54.730	30.285	23.787	38.530	18.070	0.045			
8.	Salt	18.000	18.000	30.485	29.480	35.207	36.040	9.000	9.000			
9.	Onion			2.410	4.000	4.500	3.000					
10.	Dates			66.030	46.480	63.310	55.060	17.120	16.850			
11.	Soya bean			468.850	354.350	425.275	444.000	278.934	228.311			
12.	Dry pea							78.725				
13.	Milk Powder							8.115				
14.	Thin Arrow Root							144 pkts.				
15.	Dalda											
16.	Sopp			18 nos.	13	12.500	15bars	9 bundles				



### III

Sl. NO.	Food Items	Allegre Qty. (Kg.)	Doi Long-mada (Kg.)	Pilang-kata (Kg.)	Nang khrah (Kg.)	Sonidan (Kg.)	Kyridem (Kg.)	Nartiang Pohshnong	Umjatala-slaw	Remarks
1.	Bengal gram	196.160	172.760	130.200	116.600	135.750	175.600	159.365	82.530	During 1990-91
2.	Ground nut	343.980	200.653	13.050	15.600	55.950	18.400	-	-	
3.	Suji	-	-	-	-	-	-	204.280	340.567	1991-92 the supply is not regular due to non-willingness of supplier to supply at the accepted rates.
4.	Sugar	-	-	3.355	3.405	3.220	4.300	15.322	18.044	
5.	Rice	133.080 upto Septt. 1990.	77.630	-	-	-	-	-	-	
6.	M. Oil	43.800	25.550	2.000	3.000	3.000	3.000	-	-	
7.	M. Dal	64.800	37.800	-	-	-	-	-	-	
8.	Salt	17.520	10.220	6.534	24.075	6.890	5.920	13(Iodine)	12p kts.	
9.	Onion	-	-	4.000	3.900	4.490	3.894	-	-	
10.	Dates	-	-	23,100	9,500	28,950	21,800	-	-	
11.	Soya bean	-	-	209,050	165,900	195,725	229,00	29,720	29,110	
12.	Dry pea	-	-	-	-	-	-	387,160	451,497	
13.	Milk Powder	-	-	-	-	-	-	-	-	
14.	Thin Arrow root	-	-	-	-	-	-	-	-	
15.	Dalida	-	0.280	-	-	-	4.300	-	-	
16.	Scap	-	-	6 nos.	21.750	3.750	21.750	-	-	
17.	Shira	-	-	16,775	17,025	17,275	21,500	-	-	

1991 - 92

Sl. No.	Food Items	Allegre qty. (Kg.)	Dolong- mada (Kg.)	Pilang- kata (Kg.)	Nong- khrah (Kg.)	Sonidan (Kg.)	Kyrdem (Kg.)	Nartiang Pchshnong, (Kg.)	Umlala- saw (Kg.)	Remarks
1.	Bengal gram	220.800	128.800	143.000	154.800	192.750	175.000	443.519	319.921	
2.	Ground nut	275.340	160.615	36.700	44.900	38.400	40.450	-	-	
3.	Suji	-	-	-	-	-	-	212.772	228.828	
4.	Sugar	-	-	-	-	-	-	15.012	16.180	
5.	Rice	133.080	77.630	-	-	-	-	49.790	34.125	
6.	M. Oil	45.050	26.250	6.640	3.500	7.600	6.116	1.000	2.350	
7.	M. Dal	64.800	37.800	-	-	-	-	10.244	7.020	
8.	Salt	16.680	9.73	13.125	14.625	13.187	10.960	10.000	11.250	
9.	Onion	-	-	6.750	6.000	6.790	4.652	-	-	
10.	Dates	-	-	-	-	-	-	3.000	-	
11.	Soya bean	-	-	278.325	294.875	219.412	338.910	134.136	220.716	
12.	Dry pea	-	-	-	-	-	-	123.120	127.200	
13.	Milk Powder	-	-	-	-	-	-	-	-	
14.	Thin Arrow root	-	-	-	-	-	-	-	-	
15.	Daida	-	-	-	-	-	-	-	-	
16.	Soap	-	-	2 Kgs.	2.000	1.781	5.542	s.	-	

**ANNEXURE - IV**

Statement showing the estimated money value of the SNP foods supplied to the selected Anganwadi centres during 1988-89 -1991-92 (based at procuring price at Project) Rs.

Sl. Food Items No.	1988-89												Remarks
	Allegre	Doleng	Pilang	Nong	Sonida	Kyrdem	Narliang	Umjala-siw	Rs.	P.	Rs.	P.	
1. Bengal gram	2076.68	1342.06	1865.37	1521.45	2172.88	1422.57	959.58	637.20					Figures in brackets indicated the daily average expenses.
2. Ground nut	3435.02	1966.77	779.10	606.85	801.62	769.30	5224.83	5195.30					
3. Suji	2242.70	158.59	962.43	729.00	1059.18	-	689.72	753.48					
4. Sugar	1408.10	155.31	320.81	243.00	353.06	265.69	123.38	134.84					
5. Rice	1354.66	697.28	1241.74	993.12	419.03	1100.71	453.60	450.00					
6. M. Oil (lit)	2330.05	841.93	177.66	183.33	172.37	184.43	77.34	77.34					
7. M. Dal	1111.18	557.78	647.43	496.13	716.24	1539.34	80.64	96.00					
8. Salt	38.00	34.20	51.97	52.58	57.74	50.60	33.60	33.60					
9. Onion	-	-	98.90	71.91	96.12	71.31	-	-					
10. Dates	-	-	2384.90	2204.55	263.81	2155.82	1536.40	1701.42					
11. Soya bean	-	-	3061.52	2201.24	3391.43	2409.91	1032.60	1036.37					
12. Dry pea	-	-	-	-	-	-	2290.02	1874.58					
13. Milk P powder	-	-	-	-	-	-	-	-					
14. Thin Arrow root	-	-	-	-	-	-	-	-					
15. Dalda	-	-	45.40	45.40	45.40	45.40	-	-					
16. Soap	-	-	27.42	27.42	27.42	23.00	-	-					
	13996.39	5758.92	11664.65	9375.98	9576.30	10038.08	12501.71	12010.13					
	(46.65)	(19.20)	(38.89)	(31.25)	(31.92)	(33.46)	(41.67)	(40.03)					

1989 - 1990

## ANNEXURE - IV

Sl. No.	Food Items	All the Panchayat Unions											
		Allegre	Dojong	Pilang	Nong	Sonida	Kyrdem	Nartiang	Umjala	slaw			
		Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P	Rs. P
1.	Bengal gram	3053.20	1562.16	3017.82	2845.41	3560.70	3618.48	791.98	1078.04				
2.	Ground nut	4041.30	2047.59	2300.70	1799.55	2064.00	2276.85	2373.50	2399.65				
3.	Suji	354.83	179.55	-	-	-	-	1992.16	1751.13				
4.	Sugar	304.58	154.32	-	-	-	-	366.87	495.82				
5.	Rice	1376.21	697.28	1092.14	925.65	1108.30	1171.30	602.35	602.55				
6.	M. Oil (lit)	1944.72	985.33	500.61	496.71	454.98	485.04	-	18.52				
	M. Dal	1401.80	710.26	581.23	321.63	252.62	398.91	197.32	246.22				
	Salt	38.88	38.88	65.84	63.68	76.05	63.07	15.75	16.92				
9.	Onion	-	-	10.85	18.00	20.25	13.50	-	-				
10.	Dates	-	-	1518.69	1069.04	1456.13	613.37	190.72	387.55				
11.	Soya, bean	-	-	3352.28	2533.60	3040.12	3480.96	2186.84	1630.14				
12.	Dry, pea	-	-	-	-	-	-	529.80	-				
13.	Milk Powder	-	-	-	-	-	-	512.00	-				
14.	Thin Arrow root	-	-	-	-	-	-	720.00	-				
15.	Dalida	-	-	-	-	-	-	-	-				
16.	Soap	-	-	51.48	37.18	35.00	46.65	48.00	-				
		12545.12	6375.37	12551.64	10110.48	12068.75	12168.07	10627.29	8527.54				
		(41.82)	(21.25)	(41.84)	(33.70)	(40.23)	(40.56)	(35.42)	(28.43)				

1990 - 1991

Sl. No.	Food Items	Alleghre	Dolong-mada	Pilang-kata	Nongkrah	Sonidan	Kyrdem	Nartih	Pohshong
		Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.
1.	Bengal gram	1840.18	1617.03	1074.15	961.95m	1119.94	1448.70	1529.90	792.28
2.	Ground nut	6191.64	3611.75	202.28	241.80	867.23	285.20	-	-
3.	Suji	-	-	-	-	-	-	919.26	1062.55
4.	Sugar	-	-	33.55	34.01	32.20	43.00	126.41	148.86
5.	Rice	577.57	336.91	-	-	-	-	-	-
6.	M. Oil(110)	1007.40	587.65	56.00	84.00	84.00	84.00	-	-
7.	M. Dal	688.18	491.40	-	-	-	-	-	-
8.	Salt	39.42	23.00	19.54	71.98	20.60	17.70	17.16	16.00
9.	Onion	-	-	22.00	21.45	24.70	21.42	-	-
10.	Dated	-	-	46.84	189.52	577.55	434.91	-	-
11.	Soya bean	-	-	2119.77	1682.23	1984.65	2322.06	260.03	254.71
12.	Dry pea	-	-	-	-	-	-	3023.72	3526.19
13.	Milk P powder	-	-	-	-	-	-	-	-
14.	Thin Arrow root	-	-	-	-	-	-	-	-
15.	Dalda	-	5.88	-	-	-	94.56	-	-
16.	Soap	-	-	56.00	50.00	60.00	65.00	-	-
17.	Shira	-	-	160.75	170.75	177.75	250.00	-	-
		10344.39	6673.62	4198.88	3507.19	4948.62	5066.55	5876.50	5820.59
		(34.48)	(22.25)	(14.00)	(11.69)	(16.50)	(16.89)	(19.59)	(19.40)

1991 - 1992.

ANNEXURE - IV

Sl. Food Items	Allegre	Dolong-mada	Pilang-kata	Nongkrah	Sonidan	Kyrdem	Narriang	Umjala
No.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.	Rs. p.
1. Bengal gram	2208.00	1288.00	1372.80	1486.08	1927.50	1680.00	4231.17	3052.05
2. Ground nut	6883.50	2841.07	917.50	1047.50	960.00	1041.25	-	-
3. Suji	-	-	-	-	-	-	2212.82	2379.81
4. Sugar	-	-	-	-	-	-	101.33	109.21
5. Rice	731.94	426.96	-	-	-	-	273.84	187.69
6. A. Oil (lit)	1337.99	779.62	166.86	87.95	190.99	163.70	37.00	86.95
7. M. Dal	832.00	491.40	-	-	-	-	128.05	87.75
8. Salt	25.02	24.95	24.81	27.66	24.92	20.71	21.80	24.52
9. Onion	-	-	28.75	25.56	40.92	28.92	-	-
10. Dates	-	-	-	-	-	-	59.85	-
11. Soya bean	-	-	2148.67	2276.43	1693.87	2616.38	1221.98	2010.72
12. Dry pea	-	-	-	-	-	-	961.57	993.43
13. Milk Powder	-	-	-	-	-	-	-	-
14. Thin Arrow root	-	-	-	-	-	-	-	-
15. Dalda	-	-	-	-	-	-	-	-
16. Soap	-	-	32.00	32.00	28.48	56.00	-	-
	12018.45	5892.00	4691.39	4983.20	4854.68	5566.96	9249.41	3932.13
	(40.06)	(19.64)	(15.64)	(16.61)	(16.18)	(18.56)	(30.83)	(29.77)



Statement showing the calculation in estimating roughly the actual money value that each beneficiary by category, was supposed to derive out of the actual amount of expenditure incurred on SNP foods during for example, 1990-91 in respect of Allegre Anganwadi Centre, under Rong ram ICDS Project by reducing the said expenditure to the rates earmarked for different categories .

Particulars :-

1. Average daily expenditure during 1990-91 ..... = Rs.34.48

2. No. of beneficiaries - SMC=27, MC=70 (including... = 17  
non-gradid ones) PW & NM = 12

3. Rates earmarked up to (a) 1990-91 :-

(a) SMC = 90 paise; MC = 45 paise & PW/NM = 75 paise

(b) 1991-92:- SMC = Rs.1.00; MC = 60 paise; PW/NM = 80 Paise

4. Statement of Calculation:-

						(Rs)
Category of beneficiaries	Rates per beneficiary	Nos. of beneficiaries	Total daily amount due as per rates sanctioned	Actual amt. spent per day for all categories of beneficiaries	Reducing the actual amount spent to the amount due acc. to rates earmarked for different categories, the amount that the total no. of beneficiaries (by category) to receive per diem out of actual amount spent per day:-	
1.	2.	3.	4.	5.	6.	
SMC	90	27	24.30	34.48	$\frac{34.48}{64.80} \times 24.30 =$	12.93
Me	.45	70	31.50		$\frac{34.48}{64.80} \times 31.50 =$	16.76
PW/NM	.75	12	$\frac{9.00}{64.80}$		$\frac{34.48}{64.80} \times 9.00 =$	$\frac{4.79}{34.48}$

Category | Amount per beneficiary per day out of amount actually spent

1.	7.
S M C	$12.93 \div 27 = 0.48$
M C	$16.76 \div 70 = 0.24$
PW/NM	$4.79 \div 12 = 0.40$

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Appendix - VI.  
Pages 331 - 358.

Proximate Principles: Common Foods.

All values as per 100 gms. edible portion.

Sl.No.	Name of Foods-tuff	Protein(N x 6.25)	Energy K. cal.
1.	Bajra	11.6	361
2.	Barley (fugi)	11.5	336
4.	Jowar	10.4	349
9.	Rice, Parboiled, handpounded	8.5	349
10.	Rice, Parboiled, milled	6.4	346
11.	Rice, raw, handpounded	7.3	346
12.	Rice, raw, milled	6.8	345
13.	Rice, bran	13.5	393
20.	Wheat-Whole	11.8	346
28.	Bengal Gram Whole	17.1	360
29.	Bengal Gram Dal	20.8	372
30.	Bengal Gram (Roasted)	22.5	369
40.	Pease Green	7.2	93
41.	Pease Dry	19.7	315
44.	Red Gram Dal	22.3	335
46.	Soya bean	43.2	432
122.	Onion	1.2	59
123.	Onion small	1.8	59
202.	Ground nut	25.3	567
254.	Dates dried	2.5	317
255.	Dates fresh	1.2	144
432.	Skimmed milk(Powder (cow's)	38.0	357
433.	Whole Milk(Powder (Cow's)	25.8	496
438.	Cooking Oil	-	900
439.	Sugar Cane	0.1	398
441.	Jaggery(cane)	0.4	383

## Protein contents of Common Foods from

"Applied Nutrition" - Rajalakshmi

Biochemistry Department, M.S. University of Baroda,

## Appendix - V.

## Table - I.

Food	Calories/100 gms.	% Protein.
Pulses and Dals	330 - 370	18 - 24
Ground nut	550	27

One gram of protein fields 4 calories on oxidation in the body.

# A . N . X U R . E . - VII

BENEFICIARIES WHO WERE ADMINISTERED WITH BCG, DPT ETC  
DURING 1988 TO 1991 UNDER THE THREE SELECTED ICDS

ICDS PROJECTS												
Rongram				Bhoi Area					Thadlaskein			
1988	1989	1990	1991	1988	1989	1990	1991	1991	1988	1989	1990	1991
2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	
Children												
442	136	69	166	63	175	234	274	515	515	445	193	
1074	594	710	977	711	648	608	300	521	547	458	229	
922	554	681	334	363	364	270	335	292	353	413	384	
85	80	64	66	124	105	171	200	44	30	49	12	
303	589	556	484	684	642	372	487	515	551	394	226	
380	503	511	422	388	346	280	420	292	97	126	139	
N.A.				103	129	134	144	N.A.				
N.A.				105	199	138	172	N.A.				
N.A.				52	105	87	105	N.A.				
N.A.				N.A.					N.A.			
N.A.				842	4362	1607	1313	244	250	264	78	
N.A.				215	3684	1000	610	149	206	195	34	
N.A.				N.A.					N.A.			
109	17	254	606	N.A.					3387	3178	2399	1846

Sources:- ICDS Projects.

ANNEXURE - VIII

Statement showing the number of beneficiaries who received the 1st and 3rd doses of EPT immunizations and Oral Polio vaccines and the 1st and 2nd doses of Typhoid injections during 1988 to 1991 at the Sample Anganwadi Centres.

Sl. No.	Name of Anganwadi Centres	DPT					POLIO					TYPHOID				
		1988	1989	1990	1991	1992	1988	1989	1990	1991	1992	1988	1989	1990	1991	1992
1.	Allegre															
2.	Delongmunda															
3.	Pilangkata															
4.	Nangkhrak															
5.	Schidan															
6.	Kyrdem															
7.	Nartling Pohshung															
8.	Umjalasaw															

Sources : ANMS I/c. of the named Anganwadi Centres.

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