

Integrated Child Development Services Scheme: Presenting Innovative Panorama

*I*ntegrated Child Development Services Scheme , popularly abbreviated as ICDS, is one of the innovative programme of its kind (Court, 2000;WHO 1999) and the largest public initiative in the world (Chaturvedi,2000;Joshi,2000; Prochner,2002;Sharma,1987; Watanabe,1999) to offer the early childhood care and educational services. The basic premise of the programme revolves around the growing consensus among researchers and practitioners that childcare and education are inseparable issues and must be considered as one (UNICEF,1993). Based upon this fundamental assumption, the modus operandi of the programme has been designed in such an integrated way so as to address these twin issues on a continuum basis adopting holistic approach. The process execution of the programme includes integrated package of minimum basic services - care, nourishment and educational nurturance to children, adolescent girls and pregnant and lactating mothers so as to reach a multitude of objectives encompassing children's improved health and nutrition status, development of their psychological competencies, preparation of adolescent girls for safe motherhood and mother's improved health and child bearing and rearing practices. (World Bank, 1998)

Centrally sponsored, the ICDS programme is known to be a major policy intervention with continuous doses of heavy financial and human resource inputs since its inception in 1975. As the major responsibility of programme implementation lies with various sub national systems operating in the name of states/UTs so the programme has been heavily subjected to context specific variations of socio - cultural and economic circumstances together with administrative efficiency and varied innovations carried out over time. Currently, the Government of India is managing the programme by funding its entire expenditure except supplementary nutrition which is being provided by state and in some cases with support from CARE (702 blocks in 8 states namely AP, Bihar, Chhattisgarh, Jharkhand, MP, Rajasthan, Orissa & UP) and WFP (371 blocks in 5 states namely MP, Rajasthan, Orissa, UP & Uttaranchal).

The scheme has seen a harmonized unprecedented rapid expansion from merely 33 trial based projects to almost at the threshold of near universalization in all the

community development blocks of the country at the beginning of Tenth Five Year Plan . In recent years, along with quantitative enlargement of the programme, there has been a paradigm shift in the focus of the programme from merely supply side interventions of increasing the availability of access of services towards demand driven strategy of improving utilization, quality, impact and sustenance of the programme. (Sharma, 1998; World Bank,1998). Thus, over the years, the scheme has come out as a super system having multiple sub systems dealing with many varied inputs; multiple point entries and accreditation mechanism based on thoroughly designed monitoring information system. Within short span of time, since its inception, the programme has acclaimed of traveling momentous path by transforming mere from the intervention project designed for child development to major social development programme extending beyond the limits of early childhood to broader concept of social well being (Dayal,1980) .

After recognizing the impressive gains of the programme and taking clue of the fact that children's programme can be the basis for integrated and sustainable social development (Arango et al,2000), several international agencies like World Bank, UNICEF,UNESCO, USAID,CARE, WFP, the European Commission have upsurge their interest (Young,1996) to bring about qualitative improvements in the noninvasive tool of ICDS designed by Govt. of India for survival, growth, protection and participation of the children. The testimonial merit of the ICDS system augmenting of case-to-case method of micro targeting approach with combined input of psychological, physical, health and nutritional well being of the child is evident form replication of the model in other countries across the global as well.

More than three decades of long journey of the programme has seen of carrying out numerous macro/micro level research and evaluation studies by international, national bodies, technical institutions and centers for higher learning. Meta analysis of these retrospective research endeavor reveals the fact that sizeable number of these attempts was convergent in nature adopting nomothetic research design and employing almost similar interpretive templates for describing the results. Though each of these research inquiries have aroused an impressive empirical support to apprehend the dynamics of differential dimensions of the programme, yet systhesisation of these result presents an vicissitude picture having loose array of diverse findings without their

integration and interpretation of how these operates together to produce the desired results. Further, there had always been added focus on drawing post finding actions based upon presupposition, preconception and propositions.

Such an country wide ubiquitous mega scheme of ICDS with a wider contextualized network of about seven lakh Anganwadi Canters (AWCs)- focal point of delivery of services - encounters number of input and process based functional problems operating in divergent ways for non accomplishment of desired objectives as specified in the scheme. However, despite their prime importance of identification for taking corrective measures, there appears to be a scarcity of attempts not only for their systematic exploration but also to advance the understanding of their relative positioning in comparison to others. Thus, there seems to be a pressing need to address both of these issues concomitantly. The study in hand was an attempt in this direction.

OBJECTIVES

The study aimed to;

- ***Decipher*** the interrelations of various perceived problematic factors and their relative influential rankings in implementation of ICDS;
- ***Provide*** a powerful database for presenting a solid and cutting edge panorama of ICDS
- ***Creating*** a three tier classification system of factors affecting the implementation of ICDS and to
- ***Accelerate*** a common understanding of analyzing the programme as a whole.

METHOD

Participants

The study took place during 2001/2 and was based on the data collected from two sub sets of convenience sample namely Child Development Project Officers/Assistant Child Development Project Officers (CDPOs/ACDPOs) and Trainers of ICDS. The number of participants from first sub set of sample was 76 and from second sub set was 33, for a total N of 109. As the sample was drawn using purposive method so it was not

representative of the population at large. A further breakup of the sample showed that while the respondents of first sub set were comprised of functionaries working in the sub national systems of Delhi (7),Goa (1), Gujarat(11), Haryana (3), Himachal Pradesh (3), Jammu and Kashmir(20) Maharashtra (18) ,Orissa (2), Punjab (5) and Rajasthan (6) , the sample of second sub set were drawn from the states of Maharastra (27), Himachal Pradesh (1), Haryana (4) and Andhra Pradesh (1). Table 1 depicts out the available descriptive information of the sample .

Table 1
(Characteristics of Respondents)

	CDPOs/ACDPOs				Trainers					
	Range	n	Cf	%	M	Range	n	Cf	%	M
Age	25-57	76			39.32	25-44				30.9
25-30		09	09	11.8		18	18	54.5		
31-35		14	23	18.4		11	29	33.3		
36-40		23	46	30.2		02	31	6.0		
41-45		14	60	18.4		02	33	6.0		
46-50		11	71	14.4		-	-	-		
51-55		03	74	3.9		-	-	-		
56-60		02	76	2.6		-	-	-		
Experience (Years)	01-32				10.50	01-19				6.6
1-5		21	21	27.6		15	15	45.4		
6-10		27	48	35.5		13	28	39.3		
11-15		12	60	15.7		04	32	12.1		
16-20		06	66	7.8		01	33	3.0		
21-25		07	73	9.2		-	-	-		
26-30		01	74	1.3		-	-	-		
31-35		02	76	2.6		-	-	-		
Gender										
Male		37	37	48.6		07	07	21.2		
Female		39	76	51.3		26	33	78.7		
Education										
Above PG		03	03	3.9		-	-	-		
PG		43	46	56.5		29	29	87.8		
UG		27	73	35.5		04	33	12.1		
Under UG		03	76	3.9		-	-	-		
Project										
Urban		12	12	15.7		Not Applicable				
Rural		57	69	75.0						
Tribal		07	76	9.2						
Training Centre										
MLTC		Not Applicable				06	06	18.1		
AWTC						27	33	81.8		

PG = Post Graduate, UG= Under Graduate, MLTC= Middle Level Training Centre,
AWTC= Anganwadi Workers Training Centre

Data Gathering Instrument

Five point rating scale was used to gather the data. The scale was having 39 perceived problematic areas spread over in ten major dimension of Human Resource Management (n= 11); Convergence and Coordination (n=5); Community Ownership (n= 2); Service Delivery Management (n=6); Hierarchy and Organisational Set up (n=4);Material Input (n=3); Beneficiaries Perception (n=1), Modus Operandi (n=4), Social ills (n=1) and Budgetary Regulaitons (n= 2). In order to eliminate the acquiescence response set bias, the items were placed randomly and worded in both directions of +ve and – ve . The scale was self administering in nature and allowed each subject to indicate his/her level of agreement about the perceived problem on a potential range of 1 to 5 giving score of 5 for Strong Agreement; 4 for Agreement ; 3 for Can't Say; 2 for Disagreement and 1 for Strongly Disagreement .

Analytical Strategy

First of all, for each individual item, Composite Group Confidence Rating (CGCR) was obtained by applying the statistics as follows

$$CGCR = 1/ N [5* A + 4*B+ 3*C + 2*D + 1*E]$$

1,2,3,4CGCR

Here , N stands for total number of respondents

A----- n opted for SA (5)

B -----n ----- A (4)

C -----n ----- CS (3)

D -----n-----DA (2)

E -----n-----SD (1)

1,2,3,4 -----represents item no 1 to 39

This technique of exploration of views entailed each member of the group to be a constituent unit and thus hold his/her view while collecting data from the group as a whole and withhold the domination of powerful members of the group over others. A log linear analysis was undertaken to test the difference of CGCR ratings between the two cohorts of CDPOs and Trainers of ICDS. This model was found to be specifically

suitable as standard t test or chi square tests are unable to take the ordinal categorical characteristics of data into account. The coefficient of B was calculated to know the degree of convergence between the ratings of both these two panels of CDPOs and Trainers. Z test was then applied to test the statistical significance of B by measuring the differences in ratings between both the groups (Agresti,1990). Andrich rating scale analysis (Andrich,1998) was performed to classify such factors and further rank them according to their relative importance .

The final calibration, d reflects the relative influencing strength of each factor. The larger the d , the more influence the factor possesses on implementation of ICDS. Based on this transformed logit scale, all the influencing factors were categorized in three series. Those factors with their d exceeding average calibration +1SD of d were classified as most important influencing factors; those with their d less than average calibration -1SD were classified as unimportant factors; and those between these two limits of + 1SD were judged as important factors.

Although the rankings provided by Trainers and CDPOs cohorts were different to some extent but for the purpose of analysis, they were aggregated together. The combination of these responses of two different cohorts may be justified in the light of six grounds. First, the split of this relative small sample into further groups would certainly reduce the power of analysis. Second, this study was an attempt to bring together the trainer and implementer views due to considering them as think tank and transformers of the scheme respectively. Third, the major objective of the study was to identify those problems of implementation of ICDS which are important for policy development so the pooling of the CDPOs and Trainers view seemed to be extremely justified. Fourth, the range of views expressed by CDPOs and Trainers were no more diverse than the range amongst CDPOs and Trainers from different contextual background, length of service and gender. Fifth, based on the Z test, the results of the study showed insignificant differences between the ratings of both the groups except for two items namely defective organizational arrangement and inflexible management system. . Sixth, in order to nullify the informants own biases, shortcomings and strengths, the convergent measures aroused from dual source of information seemed to be more reliable and valid. Lastly, experts opinion in the area of ICDS was the sole criterion used

to select the cohorts of participants. Thus, the aggregation undertaken was justified up to maximum extent possible.

LIMITATIONS

Although the findings of the study were derived after systematic exploration of the opinion of the respondents, yet the study had certain limitations which call for caution in generalizing the results as a whole. These limitations were predominantly associated with ;

- Relatively small sample size of 109 respondents comprising two cohorts of CDPOs/ ACDPOs and Trainers of ICDS;
- Choosing convenient sample of the respondents only from ten states in case of CDPOs/ACDPOs and four states in case of Trainers of ICDS and thus marginalizing the experiences of other states/UTs;
- Likely reflection of the informants views at the two opposite ends of long association with the scheme on the one side and just beginning the career in ICDS on the other and
- Presentation of only 39 perceived problematic areas for getting them rated by the participants in spite of operating many more other areas also.

RESULTS

Column 1 and 2 of table 2 lists the broad and sub categories of factors which were offered in the study as possible perceived influencing determinants of ICDS. Column 3 lists the coefficient *B* and significant test results for the comparison of ratings of respondents of two reference groups (CDPOs and Trainers). Based on the *Z* test results, the significant difference between the ratings of two groups was found to be only for two items namely defective organizational arrangement and inflexible management system.

Table 2
(Coefficient *B* and Significance Test Results)

SI No	Broad Category	Sub Categories	<i>B</i>
1.	Human Resource Management	Lack of interest among ICDS functionaries	0.231
		Routine job performance	0.152
		Ineffectiveness of CDPOs	-0.146
		Lack of motivation among Supervisors	0.147
		Non recognition of work	-0.135
		Large number of vacant posts	0.294
		Lack of enthusiasm among Anganwadi Workers	0.243
		Lack of commitments	0.125
		Regularisation for becoming government employee	0.187
		Ineffectiveness of Supervisors	0.314
		Slow career progression	0.298
2.	Convergence and Coordination	Medical Officers reluctance to visit AWCs	0.232
		Lack of coordination between CDPOs and District Programme Officers	-0.149
		Lack of coordination with health functionaries	0.093
		Ineffectiveness of ICDS committees	0.176
		Lack of coordination among ICDS functionaries	0.264
3.	Community Involvement	Poor community participation	0.241
		Low community response	0.192
4.	Service Delivery Management	Poor status of nutrition & health education	0.373
		Lack of pre project activities	0.413
		Variation in quality of care	-0.105
		Non attendance by needy people	0.249
		Lack of referrals	0.267
		Carrying out supplementary nutrition to home	-0.093

5.	Hierarchy And Organisational Set Up	District Programme Officers position is redundant	0.226
		Irregular meetings	0.242
		Defective organizational arrangement	-0.075*
		Political interference	0.120
6.	Material Input	Poorly equipped AWCs	0.268
		Interruption in food supply	0.273
		Non availability of drugs	0.127
7.	Beneficiaries Perception	Percipience of ICDS as sarkari yojana	0.314
8.	Social Ills	Prevalence of caste system	0.292
9.	Modus Operandi	Need of contextual sensitivity	0.214
		Lack of time to overburdened mothers	0.279
		Adopting top down approach	0.318
		Inflexible management system	-0.183*
10.	Budgetary Regulations	Low utilization of funds	0.264
		Financial corruption	0.242

*p < 0.05

Table 2 summarizes the participants combined responses on influencing factors of ICDS. The column Mean gives the average rating of each factor, and its standard deviation is reported in column SD. All factors have been ranked according to their final calibration measure d in descending order of relative positioning. The average calibration which may also be termed mean of d was found to be zero with SD of 0.7. Fourteen factors were identified as statistically most important factors which pose very significant influence on implementation of ICDS. The value of each of these d exceeds mean of d or average calibration, which was $0 + 1SD$ (0.7) of overall calibration. Seven factors were identified as unimportant factors with their d less than $- 0.7$ or the average calibration of $0 - 1SD$. The remaining eighteen factors, which stood in between $+ 1SD$ distance from mean of d were classified as statistically important determinants of ICDS.

Table 2
(Summary Statistics of Influencing Factors of ICDS)

Factors	Components	Mean	SD	d*	CGCR**
Most Important	Low community response	4.210	0.862	1.696	4.361
	Poorly equipped AWCs	4.753	0.532	1.432	4.265
	Large number of vacant posts	4.133	0.431	0.983	4.215
	Political Interference	3.863	0.841	0.974	4.159
	Adopting Top Down Approach	3.785	0.921	0.951	4.114
	Demanding Government Employee Status	4.063	1.321	0.940	4.064
	Low Utilization of funds	3.765	0.642	0.937	3.953
	Percipience of ICDS as Sarkari Yojana	3.130	0.844	0.934	3.013
	Poor Community Participation	3.535	0.741	0.911	3.835
	Lack of time to Overburdened mothers	3.756	0.865	0.840	3.753
	Reluctance of Medical Officer to Visit AWCs	3.259	1.252	0.832	3.744
	Slow Career Progression	3.245	1.153	0.822	3.622
	Lack of motivation	2.995	1.132	0.801	3.612
	Non availability of drugs	2.653	0.983	0.795	3.603
Important	Carrying supplementary nutrition to home	3.462	0.953	0.698	3.483
	Inflexible management system	3.214	0.832	0.694	3.321
	Variation in quality of care	2.143	0.853	0.693	3.301
	Non Recognition of Work	2.164	1.044	0.643	3.253
	Lack of commitment	2.694	0.953	0.641	3.245
	Need for contextual sensitivity	3.482	0.955	0.590	3.203
	Interruption in food supply	2.092	1.254	0.561	3.062
	Lack of coordination with health staff	2.340	0.984	0.413	3.055
	Thin attendance of needy persons	3.265	0.943	0.412	3.046
	Financial Corruption	2.564	0.561	0.411	2.933

	Poor status of nutrition & health education	2.181	0.432	0.342	2.911
	Ineffectiveness of Supervisors	2.563	0.853	0.341	2.852
	Defective Organizational Arrangements	2.132	0.784	0.341	2.782
	Lack of Coordination with District Programme Officer	2.544	0.853	0.340	2.695
	Irregular Coordination meetings	2.113	0.863	0.300	2.244
	Lack of interest among functionaries	2.112	0.653	0.274	2.213
	Prevalence of caste system	2.113	0.854	0.273	2.202
	Ineffectiveness of CDPOs	2.194	0.765	0.270	2.064
Unimportant	District Programme Officer position is redundant	2.227	0.684	-0.712	3.443
	ICDS committees are ineffective	2.194	0.942	-0.711	3.431
	Absence of pre project activities	2.342	0.653	-0.709	3.413
	Routine job performance	2.384	0.854	-0.706	3.403
	Lack of referrals	2.341	0.985	-0.705	3.383
	Lack of enthusiasm among Anganwadi Workers	2.543	1.231	-0.690	3.072
	Lack of Coordination among ICDS Staff	2.583	0.863	-0.686	3.051

* *d* ,Final Calibration, ** Combined Group Confidence Rating

DISCUSSION

So far as three tier classification of input and process based perceived problematic areas of ICDS and their relative positioning in implementation of the programme is concerned, fourteen determinants were categorized as most important , eighteen as important and remaining seven factors as unimportant factors from trainers and service providers perspectives. The discussion of these factors may be ventured as under;

- **Human Resource Management**

Slow career progression of ICDS functionaries, lack of motivation amongst supervisors and Anganwadi Workers (AWWs) inner wish to become regular class III employee were identified as most important factors adversely affecting the implementation of ICDS. Lack of commitment, interest and ineffectiveness of supervisor

were also found as important factors. These findings seem to be in concordance with the general conception and earlier established results (CHETNA,1989;Kumari,1987;NIPCCD,1992;Murthy,1984;Rane,1989) that it is the second chain of Supervisors (in the three tier system of CDPOs, Supervisors and AWWs) whose role in operating ICDS has been in dwindle. These finding may also be ascribed in the light of multiple potential explanations. First, the burden of excessive and unmanageably larger system of than what was envisaged in schematic pattern of ICDS melts the real spirit of supervision. Second, due to rapid expansion of the programme than institutional capacity to manage it push these supervisors towards adopting more pressure oriented mechanism leaving no room for accommodating inter personal authenticity, firmly support and advice. Third, the supervisors are generally recruited from two extremely different panels of promoting AWWs on the one hand and possessing higher degrees of M.Sc, M.S.W and some cases even M.Phil and Ph.Ds on the other. Both of these extremely differed groups find it difficult to manage the business of supervision due to either their inferiority complex (as in case of promote AWWs) or superiority complex (as in case of exceptionally qualified supervisors). Fourth, the absorption of surplus staff of other allied departments with their lack of supervisory skills and basic context of ICDS further adds fuel in the fire. Similarly, due to germination of antique visionary model, the AWWs have starts demanding their regularization at par with group C employee of the government due to performing multifarious type of job. Besides this, the strangulation of the programme by Government machinery has taken the scheme miles away from its basic ideology of recognizing the programme as a vehicle for rendering social support to vulnerable section of society.

This whole gamut of micro level management and control system of supervision requires serious reorganization. However, few lighted lamps are guiding our destiny and promise new hopes for the future. It is needed to create more of this kind. It has to be believed that hardware of the programme is as important as the relevant soft ware. Hardware material by themselves does not create the process. New managers are required for executing new process of ICDS. Low budget with high boldness are preferable than high budget with meek spirit (Passi,1999) .

- **Community Participation**

Recent analysis by World Bank economist Lant Pritchett demonstrates an amazing correlation between project success and participation... success is sharply affected by the degree of beneficiary participation in the design, construction and operation. International Labour Organisation has also given this message in its recent evaluation of nine case studies from around the world. The input and process mechanism of ICDS too is also based on the idea that many of the technical aspects built into the operational design of the programme rely heavily on optimal acceptability and utilization of services by the community with its full support and cooperation. Such support is required to be cultivated not only for installation of the project, but also for substantiation of intended benefits in due course of time. With this in view, the dynamics of community participation was considered as an essential ingredient of the programme. However, what strikes one in going through findings of the past researches is the almost total absence of the concept of community participation in the implementation of the programme. It might be due to the polarization of the situation at two extreme ends. While community leaders stand away from the programme due to their non involvement in the initial stage of the programme, the service providers often voiced their frustration with criticism of the ICDS programme management or community interface. With this background, only two factors namely low community response and poor community participation were placed before the respondent for their rating in the sub component of influencing factors of community involvement. Both of these factors were identified as most important factors adversely affecting the implementation of ICDS.

These findings share many similarities with those obtained in other studies pointing out community participation as a very weak link in the implementation of ICDS (Coonar & Mohan, 1985; Nutrition Foundation of India, 1988; NIPCCD, 1988; Phillips & Kurien, 1986). The findings may also be explained in the light of the twin facts. First, is that community participation is often talked about than implemented and, second, is about the misconception of the basic connotation of the concept by the project managers of the scheme. Most of the time, they infer the community participation either in terms of added money value in the resources of the programme by way of money, material and labour or by making the community aware about adopting improved practices of child

bearing, rearing and upbringing process. These programme functionaries are further confessed of interpreting the quantifiable meaning of community participation in terms of participation in benefits, participation in activities, participation in campaigns or any other activity. This framework, in fact camouflages the basic issue of community participation which *inter alia* includes impressing community to respect all aspects of the programme as their own and to develop confidence among themselves to start arriving forward to look ICDS centers as their own. Further, the roots of the lack of community participation may also be traced in the fact that though the initiative of ICDS was designed keeping in onus the minimum possible support by the state and greater support by the public but the experiences of last more than three decades indicates the dilution of this concept by overshadowing the supply side interventions over the process of demand generation among the masses. Granting the participants of the programme as merely the status of passive recipients and thus targeting them as subject of mere beneficiaries can best be seen to exemplify this sorry state of affairs. Not only this, the community at large has been put at a greater and greater distance from the locus of planning and execution of programme which in turn promotes a growing sense of inadequacy and incompetence among the people. Further, unlike of utopic state of equality and taking care of divergent interest of caste, class and gender, these programme functionaries of ICDS tends to describe the community as constituent unit which is homogenous and non-exploitative in nature. They do not pay heed to the broader socio economic stratification characterized by political and socio cultural system. Inevitable results of all these ill practices being adopted right from inception of the programme have developed a depending attitude among the community on the state and the outside agencies. Thus, it is urgently needed to replace the concept of community participation with that of peoples participation encompassing all those (technocrats, managers, middle level functionaries, socio political system, community at large and of course the beneficiaries), concerned with policy / decision making process and project formulation and implementation mechanism.

- **Material Input**

Poorly equipped AWCs was identified as lone second most important factor adversely affecting the implementation of ICDS. This finding again found to be in

consonance of social assessment report of ICDS carried out by World Bank pointing out inadequacies of space and pre school equipments/ material as the basic reason to weak delivery of services. This finding has again perpetuated the end results of preliminary reconnaissance that ICDS functionaries lacks the basic directional philosophy of the scheme. As per the structural model of the programme, the material and equipments to be used in AWCs have to be indigenous in origin and thus requires to be designed and managed by AWWs themselves or by local artisans (NIPCCD,1984). The emphasis should be on improvisation of material from local resources. Similarly, local panchayat should also to be made squarely responsible for providing help and support to the project by identifying land/building for AWCs. If at all, there requires any provision, the same has to be made in the nature of token support form the state owned agencies. Thus the basic context of the scheme is to optimally utilize the local resources and institutional facilities without asking for additional budgetary requirements. Although early childhood education has to be imparted through low cost no cost environment but it is very often seen that the programme functionaries fails to take the richness of the local surroundings up to fuller extent due to inflexible nature and rigidity in use of these locally available rich source. They always put them in need of readymade availability and eagerness to use early childhood education aids supplied by state owned agencies. This deep-rooted dependent habituation of public ,in fact, spoils the basic challenge emanating from community. Thus, we have to avoid high cost model of ICDS and should prefer to work with a model promoting the provision of necessities. In service education providers are required to take note of this while designing their courses of ICDS functionaries.

- **Service Delivery**

Carrying out home the supplementary nutrition was identified as most important factor adversely affecting the implementation of ICDS. This finding has once again supplemented the miss conjectured views of ICDS by its functionaries. Though the manual of the scheme envisage the on the spot feeding of vulnerable child and mother but in the interest of the wider coverage of the target group and reaching out to inaccessible and traditions and superstitions, alternate delivery management system of take home ration has also been suggested as and when required (NIPCCD,1984). Suggestive provision has also been made for combination of both these approaches . The policy

designers and decision makers are required to take a view on the matter in the light of the respondent views, who are in favour of discouraging this practice. However, before taking any decision, community views may also be solicited.

- **Organisation and Management**

Political pressure and large number of unfilled posts were identified as most important factors of ICDS under the sub component of organization and management. These findings once again provides further corroboration to the notion that it is difficult for ICDS functionaries to elude the pressure expected by the local politicians (NIPCCD,1992) and observation that due to delays in the appointment of project staff large number of vacancies are remains unfilled.

- **Budgetary Regulations**

Though, one of the major hurdle in ensuring the required financial inputs for the improvement of quality of ICDS lie in inadequateness of financial resources but the same might be experienced due to combination of their possible diversion to other measures and low utilization of funds by the implementing agencies. The finding of the present study in the form of presence of low utilization of budget supports this pre conceived notion. The occurrence of this observation may be explained in the light of the fact that only earmarking of funds for ICDS may not always guarantee their effective and full utilization in the absence of a well designed technical support service for its utilization. Further, due to inefficient work culture in government system, the new ideas and practices are never welcomed . As a poor consequences of this , large amount of budgetary allocation made for different heads of innovative activities are remain surrendered or unutilized .This trend could easily be countered by articulating decisive measures for proper and effective utilization of financial resources, whatever is available.

CONCLUSIONS AND POST FINDING ACTIONS

One of the major concern that has come to the fore from the study is that implementation of ICDS sufferers a lot not due to poor input or weak process defined mechanism but on account of wrong perception of the programme by service providers accentuated with managerial constraints. The findings of the study further makes an strong ground to conclude that all endeavor for supplementation of physical and financial resources and altering the ill rooted mechanism of process manifestation will go in vain

unless human resource managerial issues raised in the paper are not being addressed holistically.

Though the study was conducted on limited number of participants yet three sets of implications meant for policy makers , researchers and service providers flow from this study. Policy makers can derive benefits from the findings which provide a better understanding of the factors influencing ICDS. This receives special significance at a crucial juncture when Department of Women and Child Development , Government of India has initiated the work of modifying and revising the basic structural guidelines and approaches of the scheme in the light of the umpteen developments took place during the last two decades. In fact, after putting for more than 30 years of state owned model mechanism, there is a need to come out with alternate viable system of project mode delivery of implementation. The multiple added advantage of this model in the form of thorough accounting and performance budgetary system along with public scrutiny will definitely set new trends in rendering professional support to the community in the deeper sense. Once a quality consciousness will arise through such decisive efforts on experimental basis, It is likely that the model will receive popularity and demand for its successive continuation.

The researchers may take the advantage of the study by extending their efforts towards more rational organization of data paving the way to better monitoring of those factors which have been identified as most important factors of ICDS. They may further carry out the investigations using Delhi methodology which has emerged as a useful technique to determine consensus amongst study participants (Meuleners, 2002) not only by expressing themselves anonymously and in controlled feed back situation (Xiao et al,1997) but also by maximizing their participation through ownership of final products. The study will further generate a deeper insight among the large number of service providers of not only their diversion from the basic ideology of the programme but also towards the need of change in their mind set. This, in turn, will reconceptualize the ICDS system by generating promising signs from managers of the programme to perform their professional role as a healing agent for creating basic process adjustment changes on the one hand and for overall enriching the process mechanism of ICDS system on the other .

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