CASE STUDY
OF THE STATUS OF INDIA’S
EARLY CHILDHOOD CARE AND EDUCATION
SERVICES

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for
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### ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIIMS</td>
<td>All India Institute of Medical Sciences</td>
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<tr>
<td>CDPO</td>
<td>Child Development Project Officer</td>
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<tr>
<td>CRC</td>
<td>(UN) Convention on the Rights of the Child, 1989</td>
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<tr>
<td>DIET</td>
<td>District Institute of Educational Training</td>
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<td>DPEP</td>
<td>District Primary Education Programme</td>
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<tr>
<td>DST</td>
<td>Department of Science and Technology</td>
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<tr>
<td>DWCD</td>
<td>Department of Women and Child Development</td>
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<tr>
<td>ECE</td>
<td>Early Childhood Education</td>
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<td>ECCE</td>
<td>Early Childhood Care and Education</td>
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<tr>
<td>EE &amp; L</td>
<td>(Department of) Elementary Education and Literacy</td>
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<tr>
<td>EFA</td>
<td>Education for All</td>
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<td>ICDS</td>
<td>Integrated Child Developed Services</td>
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<td>IGNOU</td>
<td>Indira Gandhi National Open University</td>
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<tr>
<td>MHRD</td>
<td>Ministry of Human Resource Development</td>
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<td>MOHFW</td>
<td>Ministry of Health and Family Welfare</td>
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<tr>
<td>NCERT</td>
<td>National Council for Educational Research and Training</td>
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<td>NHED</td>
<td>Nutrition Health Education</td>
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<td>NHP</td>
<td>National Health Policy</td>
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<td>NIDDCP</td>
<td>National Iodine Deficiency Disorder Control Programme</td>
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<tr>
<td>NIEPA</td>
<td>National Institute of Educational Planning and Administration</td>
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<tr>
<td>NIPCCD</td>
<td>National Institute of Public Cooperation and Child Development</td>
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<td>NPA</td>
<td>National Plan of Action</td>
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<td>NPP</td>
<td>National Population Policy</td>
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<td>NPE</td>
<td>National Policy on Education</td>
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<tr>
<td>NGO</td>
<td>Non-Governmental Organisation</td>
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<tr>
<td>PHC</td>
<td>Primary Health Centre</td>
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<tr>
<td>SSA</td>
<td>Sarva Shiksha Abhiyan</td>
</tr>
<tr>
<td>3 R’s</td>
<td>Reading, writing, arithmetic</td>
</tr>
</tbody>
</table>

### GLOSSARY

Anganwadi Centre: The village level child development centre being run under ICDS.
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1. NATIONAL FRAMEWORK FOR DELIVERY OF ECCE SERVICES

1.1 Child development in India has been addressed through a range of means by different organizations/institutions in the Government and private sector. Constitutional provisions backed by policy statements and statutes provide the broad framework for operations in the delivery of early childhood care and education services. The UN Convention on the Rights of Children (CRC)\(^1\) has influenced India's perspective considerably during the decade 1990-2000 and continues to do so. ‘World Fit for Children'\(^2\), the outcome document of the UN General Assembly Special Session on Children (May 2002) seeks to globally further the cause of child development to which India is committed.

1.2 India, as a signatory to the Declaration adopted at the World Conference on Education for All in March 1990 in Jomtien, is committed to the education for all (EFA) Goals that includes expansion of early childhood care and development. Early childhood education (ECE) is considered a significant input to compensate for early environmental deprivations at home by providing a stimulating environment to children. While on the one hand, it is expected to provide the necessary maturational and experiential readiness to the child for meeting the demands of the primary curriculum, it also impacts on the enrolment and retention of girls in primary schools by providing substitute care facility for younger siblings.\(^3\)

1.3 The well being of children has been a concern and has been an integral part of the country’s developmental planning since 1951. At independence, pre-school education was primarily in the hands of a few voluntary organizations. During the 1960s, the major responsibility of developing child-care/development services had primarily rested with the voluntary sector, with a welfare-oriented approach. The 1970s marked a shift from welfare to development and accordingly child welfare services were expanded to the health, education, nutrition, etc. sectors. The National Policy for Children was adopted in 1974 and the Integrated Child Development Services (ICDS) scheme was launched as a sequel to it in 1975. Survival, protection, equal opportunity, and participation are basic to holistic child development.

1.4 Child care services to the 0-8 year olds is divided into two age sets, viz., 0-6 years and 6\(^{+}\)-8 years. The 0-6 years set is covered under early childhood care and education services while the 6-8 year old set enter the primary cycle. Again, within the 0-6 year old set the 0-3 year old children are targeted under child development programmes while the 3\(^{+}\)-6 year olds comprise the target group for pre-school education. In several States of India, the cut off age for entry into primary school has now been fixed at 5\(^{+}\) years while it continues to be 6\(^{+}\) in other States.

1.5 Constitutional provisions including the Constitution Eighty-sixth Amendment Act

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\(^1\) Articles 3, 6 and 18 of the UN Convention on the Rights of the Child requires the States Parties to ensure to the maximum extent possible the survival and development of the child, render appropriate assistance to parents and legal guardians in performance of their child-rearing responsibilities and ensure the development of institutions, facilities and services for the care of children. It also requires States Parties to take all appropriate measures to ensure that children of working parents have the right to benefit from child-rearing services and facilities for which they are eligible

\(^2\) Children must get the best possible start in life. Their survival, protection, growth and development in good health and with proper nutrition are the essential foundation of human development. We will make concerted efforts to fight infectious diseases, tackle major causes of malnutrition and nurture children in a safe environment that enables them to be physically healthy, mentally alert, emotionally secure, socially competent and able to learn.

\(^3\) India Year 2000 Assessment Education for All, Ministry of Human Resource Development, Government of India and National Institute of Educational Planning and Administration, New Delhi.
1.5.1 The following provisions laid down in the Constitution of India as *Fundamental Rights* or *Directive Principles of State Policy* could be effectively employed in promoting quality ECCE services in the country.

- Article 15(3) of the Constitution of India (Fundamental Right) empowers the State to practice positive discrimination favouring economically and educationally weaker groups which allows for special provisions for girls and children of disadvantaged social groups and in difficult situations ... not discriminate against any citizen ... (3) nothing in this article shall prevent the state from making special provisions for women and children.

1.5.2 Under the Directive Principles of State Policy of the Constitution of India specific Articles provide for a supportive framework for early childhood care and education in the country.

- Article 39 (f)
  That children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity and that childhood and youth are protected against exploitation and against moral and material abandonment.

- Article 42
  *Enjoins the State to secure just and humane conditions of work and maternity relief.* (Though this has direct relevance to working women, children get benefited by child care services as statutory provisions.)

- Article 45
  Until the Constitution Eighty-sixth Amendment Act, 2001 was passed, Article 45 (Directive Principles of State Policy) of the Indian Constitution directed the State to provide free and compulsory education to all children up to the age of fourteen. The earlier inclusion of the 0-6 year old children within this constitutional directive implied the intent to provide conditions for holistic child development with pre-school education as an important component.

  The Constitution Eighty-sixth Amendment Act, 2001 has split the age group 0-14 years into two clear categories to cover their interests under separate Articles in the Constitution. Article 21A has been introduced as a fundamental right after Article 21 to read “The State shall provide free and compulsory education to all children of the age of six to fourteen years in such manner as the State may, by law, determine.” Articulating the intent to specifically cater to the needs of the 0-6 year old children the constitution eighty sixth amendment act has substituted Article 45 (Directive Principles of State Policy) to read “The State shall endeavour to provide early childhood care and education for all children until they complete the age of six years.”

- Article 47
  This article stipulates that the State shall endeavour to raise the level of nutrition and standard of living of its people and the improve public health.

1.6 *Policy impinging on delivery of Early Childhood Care and Education (ECCE)*

1.6.1 Child development and education are concurrent subjects that imply shared federal and State responsibility in ECCE service delivery.

1.6.2 Apart from the Constitution there are subject specific policy documents with specific application as well as legislative measures that govern the provisioning of early childhood care services. In addition, there are major federal schemes and programmes for early childhood care and education.

1.6.3 Provisioning of early childhood care and education services in India that entails multiple components is governed by policies such as:
It has been stated that "it shall be the policy of the State to provide adequate services to children, both before and after birth and through the period of growth, to ensure their full physical, mental and social development. The State progressively increases the scope of such services so that, within a reasonable time, all children in the country enjoy optimum conditions for their balanced development." Key measures identified include coverage of the 0-6 year old children by a comprehensive health programme, implementation of programmes to provide nutrition services in order to remove deficiencies in the diet of children and informal pre-school education.

Motivated by the UN Convention on the Rights of the Child (CRC), 1989, India formulated its National Plan of Action (NPA) : A Commitment to the Child in 1992. With the framework of the NPA for Children, each State was encouraged to formulate its own State Plan of Action for Children (SPAC) based on the status indicators for child development and resource situation in the States. The SPAC deals with multi-dimensional issues for child protection, survival, development and growth. For each of the areas covered in the SPAC, time-bound goals and strategies have been laid down to guide the course of activities in that time period.

National Nutrition Policy, 1993
The National Nutrition Policy recognizes children below 6 years as nutritionally vulnerable and one of the "high risk" groups and accords highest priority to them through policy articulations and programmatic interventions. The problem of malnutrition is envisaged to be tackled through direct nutrition intervention for specially vulnerable groups and also through conditions created for improved nutritional status.

The composition and terms of reference for the proposed National Nutrition Mission (NNM) are in the process of finalization.

National Health Policy (NHP) 2002
The NHP sets targets of reducing IMR to 30/1000 live births and MMR to 100/lakh by the year 2010, the target group obviously including the 0-6 year olds.

In summing up, NHP 2000 states that under the umbrella of the macro-policy prescriptions in this document, governments and private sector programme planners will have to design separate schemes, tailor-made to the health needs of women, children, geriatrics, tribals and other socio-economically under-served sections.

National Population Policy (NPP), 2000
The health of children is an acknowledged area of concern in the population policy as it is seen to be a clear strategy for population stabilization.

National Policy on Education and Programme of Action
"The National Policy on Children specially emphasizes investment in the development of young child, particularly children from sections of the population in which first generation learners predominate.

Recognising the holistic nature of child development, viz., nutrition, health and social, mental, physical, moral and emotional development, Early Childhood Care and Education (ECCE) will receive high priority and be suitably integrated with the Integrated Child Development Services scheme, wherever possible. Day care centers will be provided as a support service for universalisation of primary education, to enable girls engaged in sibling care to attend school and as a support service for working women belonging to poorer sections.

Programmes of ECCE will be child oriented, focus around play and the individuality of the child. Formal methods and introduction of the 3 R’s will be discouraged at this stage. The local community will be fully involved in these programmes.
A full integration of child care and preprimary education will be brought about, both as a feeder and a strengthening factor for primary education and for human resource development in general."

The National Policy on Education (NPE) 1986 views ECCE as a crucial input in the strategy of human resource development, as a feeder and support programme for primary education and also as a support service for working women.

- National Policy for the Empowerment of Women, 2001
  The policy views child care services as a necessary support service for women. "The provision of support services for women, like child care facilities, including crèches at work places, educational institutions, homes for the aged and the disabled will be expanded and improved to create an enabling environment and to ensure their full cooperation in social, political and economic life."

1.7  **Statutory provisions vis-à-vis ECCE**

1.7.1  In India, there are two types of legislative measures with a bearing on child development. Though not directly related to service delivery, there are some statutory provisions that are concerned with the child's right to life and health, and access to equal opportunities. These legal measures are designed to lead up to effective implementation of strategies and schemes. Availability of child care services has been made statutory in certain work situations in order that working women with infant and young children are provided a supportive work environment which also promotes the growth and development of the children.

- Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994
  This piece of legislation provides for the regulation of the use of pre-natal diagnostic techniques for the purpose of detecting genetic or metabolic disorders or chromosomal abnormalities or certain congenital malformations or sex linked disorders and for the prevention of the misuse of such techniques for the purpose of pre-natal sex determination leading to female foeticide.

- Infant Milk Substitutes, Bottles and Infant Food (Regulation of production, Supply and Distribution) Act, 1992
  The object of this legislation is to protect and promote breastfeeding and ensuring proper use of infant food.

- Persons with Disabilities (Equal Opportunities Protection of Rights &Full Participation) Act 1995
  Section 25 in Chapter IV of the Act lays down that appropriate Governments and local authorities in an effort to prevent the occurrence of disabilities will initiate surveys, investigations and research concerning the cause of occurrence of disabilities; promote various methods of preventing disabilities; annually screen children for identifying at risk cases; training staff at the primary health centres; sponsor awareness campaigns or disseminate information on hygiene, health and sanitation; take measures for pre-natal, perinatal and post-natal care of mother and child; educate the public through pre-schools, schools, primary health centres, village level workers and anganwadi workers; and create awareness amongst the masses through television, radio and other mass media on the causes of disabilities and the preventive measures to be adopted.

1.7.2  Day care facility in the form of crèches is mandated as a statutory provision under several labour acts subject to fulfillment of certain conditions that pertain to the number of women employed, the number of eligible children and the size of the plantations/factories. Specific Acts that provide for crèches are:

- The Factories Act, 1948 (Amended in 1954)
- Mines Act, 1950
- Plantations Labour Act, 1951
The Beedi and Cigar Workers Act, 1966
Maternity Benefits Act, 1961
Contract Labour Act, 1970
Inter State Migrant Workers Act, 1980

1.7.3 These central acts provide the overall guidelines and the State Governments formulate rules under each act that go into greater details of the facilities to be provided by the services, the qualifications of the service provider, the basic physical conditions that must be available in providing the services, etc.

1.7.4 The statutory maternity entitlements have been drawn from the Maternity Benefits Act, 1961 which cover the organized sector. The Supreme Court judgement in 2000 has sought to enlarge the scope of the Act to cover muster role workers as well.

1.7.5 For the welfare of workers in the construction industry the Building and Other Construction Workers’ Welfare Cess Act, 1996 has been enforced. As per provisions in this act, employers of such labourers have to make contributions towards their welfare. Their contributions are envisaged to be managed by a board. The States are in the process of constituting the boards in most cases while Kerala is one State where the benefits of the cess collected has begun reaching the concerned workers. Delhi has made progress to the extent of setting up the board and collection of cess is concerned.

1.7.6 As most of the legislative provisions are applicable to women in the organized sector, women in the informal sector will receive special attention during the Tenth Plan as they account for more than 90 per cent of working women. The Tenth Plan will endeavour to extend to the informal sector important labour legislations where the employers have a mandatory binding to provide basic minimum working conditions along with necessary welfare services for women workers. While formulating policies and programmes for the betterment of women in the informal sector, the findings of the Fourth Economic Census (2001) as well as the unattended recommendations of the National Commission on Self Employed Women and Women in the Informal Sector (Shram Shakti), will be taken into consideration.4

1.8. Ministerial and sectoral charge for the 0-8 year old children

1.8.1 Four federal Ministries are involved in provisioning early childhood services. Each of the Ministries have their respective sectoral responsibility for particular age groups of children in the delivery of the different components of early childhood services that are as given in Table 1 below:

<table>
<thead>
<tr>
<th>Area of responsibility</th>
<th>Age of Children</th>
<th>Ministry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutritional supplementation, nutrition and health education (NHED), referral</td>
<td>0-6 years</td>
<td>Department of Women and Child Development (DWCD), Ministry of Human Resource development (MHRD)</td>
</tr>
<tr>
<td>Immunisation</td>
<td>0-6 years</td>
<td>Department of Family Welfare, MOHFW</td>
</tr>
<tr>
<td>Pre-school education</td>
<td>3-6 years</td>
<td>DWCD &amp; Department of Elementary Education &amp; Literacy (EE &amp; L)</td>
</tr>
<tr>
<td>Child care</td>
<td>0-5/6 years</td>
<td>DWCD, Ministry of Labour</td>
</tr>
<tr>
<td>Prevention and early detection of disabilities</td>
<td>Pre-natal onwards</td>
<td>Ministry of Social Justice &amp; Empowerment</td>
</tr>
</tbody>
</table>

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| Primary education and nutritional supplementation | 6-11 years | Department of Elementary Education & Literacy |

Not only this, the Ministries are responsible for policies, legislations and implementation of schemes and programmes. An attempt has been made to present this at a glance in Table 2.
<table>
<thead>
<tr>
<th>MINISTRIES</th>
<th>POLICY</th>
<th>ACTS</th>
<th>SCHEMES/PROGRAMMES</th>
<th>LINK INSTITUTIONS</th>
</tr>
</thead>
</table>
| Ministry of Human Resource Development : Department of Women and Child Development | • National Policy for the Child 1974  
• National Plan of Action : A Commitment to Children 1992  
• National Policy on Empowerment of Women 2001  
• National Nutrition Policy, 1993  
• National Plan of Action on Nutrition, 1995 | • Infant Milk Substitutes, Bottles and Infant Food (Regulation of Production, Supply and Distribution) Act, 1992  
• Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 | • Integrated Child Development Services Scheme (ICDS)  
• National Crèche Fund  
• Scheme of Assistance to Crèches for Working and Ailing Mothers  
• Balika Samridhi Yojana | • Central Social Welfare Board (CSWB)  
• National Institute of Public Co-operation and Child Development (NIPCCD)  
• Food and Nutrition Board |
| Ministry of Human Resource Development : Department of Elementary Education and Literacy | • National Policy on Education 1986  
• Programme of Action 1992 | • Constitution (Eighty-sixth Amendment) Act, 2001 | • Sarva Shiksha Abhiyan (SSA)  
• District Primary Education Programme (DPEP)  
• Mahila Samakhya  
• Janshala  
• Lok Jumbish  
• National Programme of Nutritional Support to Primary Education (Mid Day Meal)  
• Teacher Education Scheme  
• DIET Scheme | • National Council for Teacher Education (NCTE)  
• The Department of Elementary Education in the National Council for Educational Research and Training (NCERT), under the Department of Secondary and Higher Education, is a national level support institution working closely with the Dept. of EE & L |
| MOHFW - Health | National Health Policy 2002 |  | • National Iodine Deficiency Disorder Control Programme (NIDDCP) | • National Institute of Health and Family Welfare |
| MOHFW - Family Welfare | National Population Policy 2002 |  | • Reproductive and Child Health Programme | • National Institute of Health and Family Welfare |
| Ministry of Labour | • The Factories Act, 1948 (Amended in 1954)  
• Mines Act, 1950  
• Plantations Labour Act, 1951  
• The Beedi and Cigar Workers Act, 1966  
• Maternity Benefits Act, 1961  
• Contract Labour Act, 1970  
• Inter State Migrant Workers Act, 1980  
• Building and Other Construction Workers’ Welfare Cess Act, 1996 |  |  | • National Labour Institute |
<table>
<thead>
<tr>
<th>MINISTRIES</th>
<th>POLICY</th>
<th>ACTS</th>
<th>SCHEMES/PROGRAMMES</th>
<th>LINK INSTITUTIONS</th>
</tr>
</thead>
</table>
| Ministry of Social Justice and Empowerment | • Persons with Disabilities (Equal Opportunities Protection of Rights and Full Participation) Act, 1995  
• The Rehabilitation Council of India Act, 1992  
• The National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999. | • Distrid Rehabilitation Centre Scheme(DRC) provide services for prevention and early detection  
• The National Programme for Rehabilitation of Persons with Disabilities (NPRPD) supports awareness campaign on prevention of occurrence of disabilities through grant-in-aid assistance.  
• The National Institutes/Apex Level Institutions among other activities also run model pre-schools and undertake community awareness programmes. The Parent-Infant Programme of the Ali Yavar Jung National Institute for Hearing Handicapped (NIHH), Mumbai trains parents of children with hearing impairment less than 3 years of age and the pre-school programme trains children between 3-6 years of age.  
• A four-tier structure for service delivery at GP, Block, District and State levels focuses on early detection and intervention at the grassroot level and referral services at district and State level.  
• The RCI under the National Programme of Orientation of Medical Officers working in Primary Health Centres (PHCs) to Disability management, aims to orient all medical officers working in PHCs to disability related issues and disseminate information about prevention, early identification, intervention and rehabilitation thereby making available a referral mechanism for persons with disabilities. | • National Institute for the Mentally Handicapped (NIMH), Secunderabad  
• Ali Yavar Jung National Institute for Hearing Handicapped (NIHH), Mumbai  
• National Institute for the Visually Handicapped (NIVH), Dehradun  
• National Institute for the Orthopaedically Handicapped (NIOH), Kolkata  
• Institute for the Physically Handicapped, New Delhi  
• National Institute for Rehabilitation Training and Research (NIRTAR), Cuttack  
• Artificial Limbs Manufacturing Corporation (ALIMCO), Kanpur  
• National Handicapped Finance and Development Corporation (NHFDC) |
1.9 Direction for 2002-2007: The Tenth Plan

1.9.1 The road map for the current plan period from 2002-2007 (10th plan) has been articulated in the Tenth Plan document that has just been released and provides the direction the country aspires to take during these five years in provisioning early childhood care and education services. The Department of Women and Child Development has covered the 0-6 year old child in totality while the Department of Elementary Education and Literacy concerns itself with ECE services for the 4-6 year olds.

1.9.2 Pertaining to ECCE this plan document highlights the broad approach to development of children by adopting a rights based approach and the strategies proposed for effective child development. Finer details include the creation of a facilitative climate with revised policies and instituting appropriate organs.

COMMITMENTS OF THE TENTH PLAN TO CHILDREN

The Approach
- To reaffirm the commitment of the 'Development of Children' with a special focus on the early childhood development, not only as the most desirable societal investment for the country's future, but as the right of every child to achieve his/her full development potential
- To adopt a Rights-based Approach to the development of children, as being advocated by the draft National Policy and Charter for Children (2002).

Major Strategies
- Reaching every young child in the country to ensure their 'survival', 'protection' and 'development' as prescribed in the two National Plans of Action (1992) – one for Children and the other for the Girl Child
- To ensure development through effective implementation of policies and programmes in the areas of health, immunization, nutrition and education through the 3 nation-wide programmes of RCH, ICDS, SSA and other related programmes.
- To continue ICDS as the mainstay for promoting the over-all development of young children and mothers, especially that of the Girl Child all over the country
- To recognize that while the early childhood up to six years is critical for the development of children, the pre-natal to first three years is the most crucial and vulnerable period in the life for laying the foundations for the achievement of full human development potential and cumulative life-long learning.
- To reinforce the commitment of family-focused and community-based interventions, in addition to the institution-based interventions, which is critical for enhanced survival, growth and development of young children, adolescent girls and women across the life-cycle.
- To expeditiously achieve universal coverage under the Universal Immunisation Programme, and to undertake area-specific micro-planning to meet their needs through high quality integrated RCH services.
- To make focused interventions aimed at improving the nutritional status of children below 6 years, with special priority for children below 24 months, through the direct feeding programme of the Special Nutrition Programme.
- To operationalise universal screening of children belonging to those families living below the poverty line for macro and micro-nutrient deficiencies as the children below six years are the risk group and to improve the dietary intake through a change in the feeding practices and intra-family food distribution.
- To expand the support services of crèche/day care services and thus help reduce the burden of working/ailing mothers and of the girl child who is expected to bear the burden of sibling care.

TENTH FIVE YEAR PLAN: WOMEN AND CHILDREN, p.265

1.9.3 The Tenth Plan is committed to completing the already initiated task of instituting a National Policy and Charter for Children in place of the existing National Policy for Children, 1974. It will work towards setting up a National Commission for Children. This Commission as visualised, would protect/safeguard the rights of children with a strong legal base and services of a public defender to take up the individual cases on behalf of children and also to investigate/redress the individual complaints and grievances, along the lines of the National Human Rights Commission.
1.9.4 The Tenth Plan also recognizes the increasing need for support services of Crèches/Day Care Centres for the children of working and ailing mothers, especially in the context of where more and more women are coming out for employment both in the organized and un-organized sectors. In this context, the National Crèche Fund will be further strengthened to develop a wide network of crèches all over the country.5

1.9.5 ICDS, the flagship child development programme will adopt a synergistic approach to strengthen the capacity of care givers and communities to provide a conducive physical and social environment for the young child in the family/community and at the Anganwadi Centres. Among the thrust areas earmarked for ICDS the significant ones include:

- address needs of the urban poor
- preventing under-nutrition and malnutrition
- conversion of Anganwadi Centres into Anganwadi-cum-Creches (make full day care services available)
- Child Care facilities for women labourers working at construction sites
- Community involvement/community contribution
- Fostering innovations

1.10 **Government and private sector in delivery of ECCE**

1.10.1 The Government and private sector share the responsibility of provisioning ECCE services. While the Government services are free and outreach is primarily in the rural setting, the private sector initiatives are usually commercial ventures operating in the form of pre-schools, preparatory schools, play schools, nursery and kindergarten schools as also day care centres. Though these usually cover the middle and upper middle classes, or the economically affluent, there has been a proliferation of such services to smaller towns and their increase in popularity is evident from the demand. Apart from these profit making ventures, there are National and localized non-Government organization (NGO) initiatives in the field of early childhood service either through direct service delivery or through supportive activities that facilitate the delivery of ECCE. NGO initiatives are either running on funding from Government/non-Government sources or by charging nominal fees from the parents of the children.

1.10.2 Sporadic information in this regard is available as there is no mechanism for periodic collection of information pertaining to the private sector initiatives in ECCE. According to estimates the number of children enrolled in private sector initiatives (including family day care homes, nurseries, kindergartens and pre-primary classes) in 1996-976 was about 10 million. During the same period, the total enrolment of 0-6 year old children in the Government and Voluntary sectors was 22.383 million accounting for 19.64 per cent of the children.

1.10.3 The Sixth All India Educational Survey, 19977, also provides some insights into this aspect and details provided are as given below.

| Total Villages | 586,465 |
| Villages with Balwadi/Anganwadi | 158,779 |
| Independent Pre-primary School | 7,386 |
| Pre-primary classes attached to a school | 17,489 |

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5 *Ibid.* p. 271
7 The Seventh All India Educational Survey with the cut off date of 30.9.2002 is being finalized
Table 3: Number of pre-school facilities by type and the enrolment in each
(6th All India Educational Survey, 1997)

<table>
<thead>
<tr>
<th>Type of Pre-school Facility</th>
<th>Number by type</th>
<th>Enrolment by type of Pre-school Facility</th>
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<tr>
<td></td>
<td>Total</td>
<td>Rural</td>
</tr>
<tr>
<td>Balwadi/Anganwadi</td>
<td>257912</td>
<td>234422</td>
</tr>
<tr>
<td>Independent Pre-primary School</td>
<td>14068</td>
<td>10376</td>
</tr>
<tr>
<td>Pre-primary Classes attached to School</td>
<td>34495</td>
<td>22622</td>
</tr>
</tbody>
</table>

10.1.4 A system of registering and standardizing private sector early childhood services with the Government was introduced by statute in the State of Maharashtra through the Maharashtra Pre-school Centres (Regulation of Admissions) Act, 1996. This Act sought to ensure a systematic approach to pre-school services in the State in order to improve the quality and standards of services available.\(^8\) This Act met with severe resistance and the matter is sub judice.

10.1.5 The Department of EE & L has constituted a National Core Group on ECE with the Additional Secretary as the Chairperson. Committee members have been drawn from the Department of EE & L, Department of Health, DWCD, NIPCCD, NCERT, NIEPA and two subject experts. A report from this committee is expected by 30\(^{th}\) July 2003 for the following terms of reference:

1. To look at coverage of ECE facilities and recommend requirement including financial requirement for additional facilities so as to provide ECCE to all children in the age group 3-6
2. To look at feasibility and make recommendations for promoting convergence between the school system and the ECCE including issues of location of ECCE centres, synchronization of timing with primary school, continuity in curriculum from pre-school stage to primary stage
3. To look at the need for providing minimum essential quality in terms of infrastructure, materials, programme content, worker/teacher quality, etc. as a norm for ECE
4. To look at the need and feasibility of regulating pre-primary education/ECE centres in the private and public sectors including the flow of FDI into this sector.

2. FORMS OF ECCE SERVICES

2.1 Diversity in ECCE services is seen in terms of the age of the children covered, programmatic content of the services, standards followed in the selection of teachers - their qualification – and training, quality checks, budgetary inputs and free/paid services. Differences are quite often related to the service provider (Government or private – non-profit or commercial) and the target children. Early childhood services in India include:

- Day care – Crèche (custodial or custodial including elements of child development)
- Child development: Health check up; Immunization; Referral services; Supplementary feeding; Pre-school education; Nutrition and health education
- Prevention and early detection of disabilities
- Pre-school/school readiness

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\(^8\) The Act laid down that:

- All pre-school centres be registered
- The outreach of the centres should on a priority cover children of the neighbourhood with the management free to exercise discretionary powers in the selection of 20 per cent of the children
- Neither children nor their parents will be subjected to any interview or test for the purpose of admission
- No specific books or set of booklets will be prescribed by the pre-school authority
- Informal method of education shall be followed in the pre-school centre
- Children between the ages of 3-5 years shall be admitted to the pre-school centres.
2.2 Basic details about some of the services available for the 0-6 year old children through Government and non-Government efforts are given in Table 4.

### Table 4 : Details about ECCE Service Delivery

<table>
<thead>
<tr>
<th>Name of the Service</th>
<th>Setting</th>
<th>Age Served</th>
<th>Opening Hours</th>
<th>Enrolment</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GOVERNMENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ICDS</td>
<td>Anganwadi Centre (4889 Projects as on 31.12.2002)</td>
<td>0-6 years</td>
<td>Varies across States but at least 3 hours</td>
<td></td>
<td>DWCD at Centre and its line Departments in the States</td>
</tr>
<tr>
<td>National Crèche Fund (NCF)</td>
<td>Centre</td>
<td>0-5 years</td>
<td>8 hours (timings fixed according to local context)</td>
<td>122125 (2001-02)</td>
<td>DWCD – through NGOs</td>
</tr>
<tr>
<td>Scheme for Assistance to Crèches for Working and Ailing Mothers</td>
<td>Centre</td>
<td>0-5 years</td>
<td>8 hours (timings fixed according to local context)</td>
<td>311750</td>
<td>DWCD – through CSWB, Bharatiya Adim Jati Sevak Sangh, Indian Council for Child Welfare</td>
</tr>
<tr>
<td>ECE</td>
<td>Centre</td>
<td>4-6 years</td>
<td>Same as AWC or synchronized with primary school timing</td>
<td>33,000 (at 30 children per centre)</td>
<td>DPEP, Dept. of EE &amp; L and State Missions</td>
</tr>
<tr>
<td>Strengthened ECE component in AWC</td>
<td>Centre</td>
<td>4-6 years</td>
<td>Not fixed. Need based</td>
<td>200,000 (at 20 children per centre)</td>
<td>DPEP, Dept. of EE &amp; L and State Missions</td>
</tr>
<tr>
<td>ECE</td>
<td>Centre</td>
<td>3-6 years</td>
<td>NA</td>
<td>77 Assam 731 Gujarat NA Bihar 1210 UP</td>
<td>Mahila Samakhya, Dept. of EE &amp; L – Assam, Bihar, Gujarat, Uttar Pradesh</td>
</tr>
<tr>
<td>Janshala – Joint GOI-UN Project</td>
<td>Centre AP 1019 Maharashtra 1179 Rajasthan 55</td>
<td>4-6 years</td>
<td>Andhra Pradesh and Rajasthan - 5 years Maharashtra - 3-6 years</td>
<td>22418 AP 25936 Mahaarashtra 1210 Rajasthan</td>
<td>Janshala, Dept. of EE &amp; L – Andhra Pradesh, Maharashtra, Rajasthan</td>
</tr>
<tr>
<td>Day care - Jhoolaghar</td>
<td>Centre</td>
<td>0-6 years</td>
<td>NA</td>
<td>12000 (approximately)</td>
<td>DPEP Madhya Pradesh</td>
</tr>
<tr>
<td><strong>Ka-Sreni (one year pre-primary class in primary school)</strong></td>
<td>Classroom in primary school</td>
<td>4+ years</td>
<td>Same as primary school</td>
<td>NA</td>
<td>Department of Elementary Education, Government of Assam</td>
</tr>
<tr>
<td>Nursery</td>
<td>Primary schools</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Department of Education, Government of Haryana</td>
</tr>
<tr>
<td>KG I &amp; KG II</td>
<td>Classes in primary school</td>
<td>4+ years</td>
<td>NA</td>
<td>NA</td>
<td>Department of Education, Government of Nagaland</td>
</tr>
<tr>
<td>Pre-schools</td>
<td>Centre</td>
<td>3-6 years</td>
<td>NA</td>
<td>NA</td>
<td>Parent teacher Associations, Kerala</td>
</tr>
<tr>
<td>Mid Day Meal (2002-2003)</td>
<td>Primary School</td>
<td>6-11 years</td>
<td>9.00am – 12.00 noon</td>
<td>4000 (approx)</td>
<td>Department of EE &amp; L, GOI</td>
</tr>
<tr>
<td>Balwadis</td>
<td>Centre (160)</td>
<td>3-6 years</td>
<td>As per AWC timings</td>
<td>18,800 (approximately)</td>
<td>Lok Jumbish through VIHAAN, Jaipur *</td>
</tr>
<tr>
<td>Strengthening Anganwadi Centres</td>
<td>Centre (1011)</td>
<td>0-6 years</td>
<td>Nutrition 0-3: 14548123 3-6: 16955641 Pre-school Edu 3-6: 1665533 (March 2003)</td>
<td>12000 (approximately)</td>
<td>Lok Jumbish through VIHAAN, Jaipur *</td>
</tr>
<tr>
<td>Name of the Service</td>
<td>Setting</td>
<td>Age Served</td>
<td>Opening Hours</td>
<td>Enrolment</td>
<td>Responsibility</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------</td>
<td>------------</td>
<td>---------------</td>
<td>-----------</td>
<td>----------------</td>
</tr>
<tr>
<td><strong>STATUTORY PROVISIONS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Creche (under Plantations Labour Act)</td>
<td>Centres in Plantations</td>
<td>0-6 years</td>
<td>NA</td>
<td>NA</td>
<td>Plantation management and system set up under the law by the State</td>
</tr>
<tr>
<td>Creche (under Factories Act)</td>
<td>Centres in Factories</td>
<td>0-6 years</td>
<td>NA</td>
<td>NA</td>
<td>Factory management and system set up under the law by the State</td>
</tr>
<tr>
<td><strong>NON-GOVERNMENTAL (EXAMPLES)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baliwadi (March 2003)</td>
<td>Centre</td>
<td>3-5 years</td>
<td>2 1/2 hours (timings as per local context)</td>
<td>Mumbai 20480 Delhi 7500</td>
<td>Pratham</td>
</tr>
<tr>
<td>Vikaswadi –ECCE</td>
<td>Centre</td>
<td>0-6 years</td>
<td></td>
<td></td>
<td>Community</td>
</tr>
<tr>
<td>Baliwadi</td>
<td>Centre</td>
<td>3-6 years</td>
<td>4 hours</td>
<td>7000</td>
<td>Uttarakhand Seva Nidhi Paryavaran Shiksha Sansthan, Almora</td>
</tr>
<tr>
<td>Day Care Ahmedabad-urban, Banaskantha, Kheda, Kutch, Surendranagar</td>
<td>Centre</td>
<td>0-6 years</td>
<td>8 hours 9 am - 5 pm</td>
<td>Approx. 5000</td>
<td>Self Employed Women’s Association (SEWA) – Union of women workers</td>
</tr>
<tr>
<td>ECCE Programme</td>
<td>Centre</td>
<td>Creche: Under 2 yrs Pre-school: 2 - 5 years Primary School : 6 years</td>
<td>8.30am - 4.30 pm six days a week</td>
<td>Delhi 4500 Mumbai 4084 Pune 4857 Total 13,360</td>
<td>Mobile Creches</td>
</tr>
<tr>
<td>Poorva Shaala Programme</td>
<td>Centre (urban Jaipur and rural Alwar)</td>
<td>3-5 years</td>
<td>9.00am - 12.00 noon</td>
<td>550</td>
<td>Bodh</td>
</tr>
<tr>
<td>Bal Vatika</td>
<td>Pre-school centre</td>
<td>3-6 years</td>
<td>9.00 am - 12.30 pm</td>
<td>96 (3 classes with two groups each with 16 children per group)</td>
<td>Sawai Madho Singh School, Jaipur</td>
</tr>
<tr>
<td>Day care facilities</td>
<td>Centre</td>
<td>0-5 years</td>
<td>8 hours</td>
<td>30-40 children per centre</td>
<td>AIIMS, IGNOU, NCERT, MST **</td>
</tr>
<tr>
<td>Play School, Preparatory School, Nursery, Kindergarten</td>
<td>Centre/School based</td>
<td>3-6 years</td>
<td></td>
<td></td>
<td>Up market private and commercial ECE services charging high fees with a lot of amenities.</td>
</tr>
</tbody>
</table>

* The interventions have been discontinued since 31st December 2002. Decision to continue is pending.
** AIIMS - All India Institute of Medical Sciences  
IGNOU – Indira Gandhi National Open University  
NCERT – National Council of Educational Research and training  
MST - Ministry of Science and Technology

2.3 In the Government, the main Ministry dealing with the 0-8 year old children is the MHRD. Its DWCD deals with the 0-6 year olds through its ICDS programme, the National Crèche Fund and the crèche scheme. The age wise beneficiary child and the service entitlement as described in the ICDS scheme is as follows:
<table>
<thead>
<tr>
<th>Beneficiary</th>
<th>Service</th>
</tr>
</thead>
</table>
| 1. Children less than 1 year | • Supplementary nutrition  
| 2. Children 1-2 years  
(upper limit is 2\* but below 3 years) | • Immunization  
| | • Health check-up  
| | • Referral services |
| 3. Children between 3-5 years  
(upper limit is 5\* but below 6 years) | • Supplementary nutrition  
| | • Immunization  
| | • Health check-up  
| | • Referral services  
| | • Non-formal pre-school education |

2.4 The Department of EE & L in the same Ministry being charged with the responsibility of elementary education has extended coverage to the 3-6 year olds with pre-school education through its programmes and schemes viz., DPEP, Mahila Samakhyta, and Janshala. Additionally, this department also provides nutritional inputs to children in the 6-11 years age group through its mid day meal scheme. The national scheme of Sarva Shiksha Abhiyan that seeks to attain universal elementary education by 2010 also has provisions for ECCE.

2.5 Realizing the importance of pre-school learning and ECCE, the Sarva Shiksha Abhiyan aims to support (i) strengthening pre-school component in ICDS by need-based training of Aanganwadi Sevika, provision of additional person, learning materials etc, (ii) setting up balwadis as pre-school centres in uncovered areas, (iii) building advocacy for the importance of early child development, (iv) organizing training programmes for community leaders (v) providing for intensive planning for ECCE, (vi) development of materials and (vii) promoting convergence between the school system and the ECCE. But the scheme has provision for Rs. 15 lakh per district per year for opening ECCE centres.

2.6 The spread and nature of services provided by NGOs are varied. The above table has tried to cite the examples of NGOs with a relatively large coverage. The NGO models and funding pattern also differ.

2.7 The agencies, within and outside the Government, that play a vital facilitative role include the National Council for Educational Research and Training (NCERT) and the National Institute of Public Cooperation and Child Development (NIPCCD), under the Department of Secondary and Higher Education and DWCD, respectively. The Department of Elementary Education in NCERT has engaged in framing the curriculum, developing teaching learning materials and activities for pre-schoolers. It conducts ECE training programmes for functionaries from the States. In pursuit of quality services, this department has provided the specifications for pre-schools and included pre-school education in the National Curricular Framework that have been widely used to model ECCE interventions in specific contexts. NIPCCD is primarily concerned with the training of functionaries, research, monitoring for two segments of children, the 0-3 year olds (child care/development age group) and the 3-6 year olds (pre-school education age group) as a part of the ICDS package.

2.8 Besides this, there are specialist organizations in the private sector that focus on particular aspects of ECCE and play a facilitative role in service delivery, such as Sutradhar Educational Resource Centre in Bangalore and Centre for Learning Resources in Pune.

3. MECHANISM FOR CO-ORDINATING ECCE SERVICE DELIVERY

3.1 Nodal agencies for ECCE

3.1.1 Different components of ECCE services fall within the administrative jurisdiction of different Ministries. The Department of Women and Child Development in the Ministry of Human Resource Development is the nodal agency for provisioning ECCE services with other Departments and Ministries contributing towards specific aspects of child development.
3.1.2 The DWCD in implementing the largest child development programme in the form of ICDS through a large network of State level service providers plays the lead role in securing the support of related departments and Ministries for ensuring the reach of health, immunization and pre-school services. The Department draws upon the services of specialist agencies like NIPCCD for training and research and networks with the concerned Departments of Family Welfare and Elementary Education for particular components of the package of services in ICDS.

3.1.3 The details of specific norms where possible for each of the services envisaged as a part of the ICDS package of services are worked out in consultation with the respective departments and specialists. The participation of the Ministry of Health and Family Welfare in the scheme of ICDS is as follows:

- The Ministry has indicated the norms of the health services to be attained in the project area
- The PHC (Primary Health Centre) and subordinate health infrastructure will deliver the following health services to the beneficiaries in the scheme of Integrated Child Development Services:
  - Health and check up
  - Referral services
  - Immunization

3.1.4 The scheme details the medical and para-medical staff to be provided under ICDS to supplement the existing staff of the Health Department to be able to deliver the envisaged health services to the target children. This arrangement was valid until Central assistance was made available to the States for upgrading the health set up to nationally accepted norms. The administrative control over such staff, their training, etc., remained with the Department of Health.

3.2 Mechanism for co-ordination & convergence

3.2.1 Besides what has been laid down in the ICDS Scheme, subsequent efforts at implementation in a convergent mode is evidenced with the Department of EE & L. The provision of ECE services under DPEP was by design aimed at supplementing the efforts of ICDS and discouraged duplication of efforts. The DPEP guidelines clearly stated that ECE Centres would be set up in areas that are not covered by ICDS. It also encouraged the programme to strengthen the ECE component in the existing ICDS programme in the States. Subsequent to the implementation of the ECE programme under DPEP both the DWCD and Department of EE & L have endeavoured to work in harmony based on a common understanding. To effectuate this, several meetings were held between both the Departments and a joint letter was issued to the State Secretaries of Women and Child Development/Social Welfare and Elementary Education informing them of the areas of convergence. As the DPEP is on the point of closure, there was a serious concern about the future of the ECE centres set up with DPEP support. Both the Departments of Women and Child Development and Elementary Education and Literacy have arrived at such an understanding that the ECE Centres set up by DPEP will be taken over by the DWCD (vide letter DO NO.3-7/2002-CD-21 dated 23.12.2002, issued by Joint Secretary, DWCD). The States have been informed accordingly.

3.2.2 A National Standing Committee for ECE has been put in place by the Department of Elementary Education with members from the department, department of Health, DWCD, NIPCCD, NCERT, NIEPA, and representatives from civil society. The committee is chaired by the Secretary, Department of Elementary Education and Literacy. This committee looks into the whole issue of coordination on a continued basis.

3.2.3 The National Conference on ECCE in the Context of Sarva Shiksha Abhiyan, held in August 2002 has among several recommendations suggested that a National Core Group on ECCE be set up to advice and support policy formulations related to SSA. The National Standing Committee already constituted by the Department of EE & L can serve the purpose envisaged of the Core Group at the National Conference.

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4. **ASPECTS OF ECCE SERVICES**

4.1 **Access**

4.1.1 Estimations have been attempted at different points in time to assess the coverage of the 0-6 year old children by ECCE services. The overall proportion of children in the 3-6 years age group enrolled in different pre-school centres was estimated to be around 15 per cent in 1989-90. This grew to 19.64 per cent in 1996-97. The GER for ECCE was 10.33 per cent in 1990 which grew to 16.9 per cent in 1997-98.

4.1.2 As per the statistics available with the Department of EE & L the total number of children enrolled at the pre-primary level is 2617403. If the estimated population of 3-6 year old children is calculated at seven percent of the total population of 843,387,888 as per Census 1991, the GER for ECE is 4.43 per cent.

4.1.3 The Programme of Action (POA) 1992 had targeted to set up 10 lakh ECCE centres in 1995 and 20 lakh in 2000. But the present coverage is only 5.5 lakh centres, covering about 18.8% of the total child population of about 886 lakh in the age group of 3-6 years in 2001. The major provider of ECCE is the Integrated Child Development Services (ICDS) scheme which covers 158 lakh children (which is 17.8% of the child population of 3-6 years) through about 5.20 lakh Anganwadis in 35 states and Union Territories (UT). Early Childhood Education or Pre-School Education, as it is termed, is only one of the 6 components of the ICDS scheme. With inadequate attention, it is one of the weaker components in ICDS. ECCE is also provided by crèches and day care centres run by voluntary agencies with the assistance of the Central Social Welfare Board (CSWB), covering 3.11 lakh children through over 12,470 centres. Besides, there are 660 centres under the ECE scheme in non ICDS areas, over 6000 Balwadis managed by State Governments and local bodies and 2455 crèches under the National Crèches Fund (NCF). DPEP supplemented the efforts by opening by 10000 ECCE centres and strengthening about 50000 Anganwadis.

4.1.4 According to the NSSO (55th Round Employment Survey, 1999-2000) the proportion of 3-5 year olds attending pre-school range between 0-12 percent to 48-60 per cent. The lowest proportion of the children are found in Arunachal Pradesh, Assam, Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Orissa, Rajasthan, Uttar Pradesh, Uttaranchal, and West Bengal. There are hardly any States and Union Territories in the high coverage bracket. Most of the other States and Union Territories have 12- 36 per cent coverage of the 3-5 year olds in pre-school.

4.1.5 All of these estimates that are available have pointed out low coverage of children in the eligible age group, which reiterate the inadequacy of access. To some extent the involvement of different Ministries has probably resulted in slow coverage of the eligible children. ICDS, the single largest programme for integrated child development is deemed to have universalized coverage with projects having spread to all community development blocks in the country. Such a restricted view of universalization has meant partial outreach, resulting in large segments of eligible children still unable to access ECCE facilities. Thus, for the policy articulations to actually benefit the children of this country, the concept of universalization needs to be formulated in a manner that bulk of the eligible children are able to access ECCE services.

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10 *India, Year 2000 Assessment Education for All, Government of India and Institute of Educational Planning and Administration, New Delhi.* p.27
12 *India, Year 2000 Assessment Education for All, Government of India and Institute of Educational Planning and Administration, New Delhi.* p. 28
4.1.6 Besides this, the findings of the recently concluded evaluation of ICDS by NCAER has pointed out that all the eligible children within the catchment area of Anganwadi Centres are not covered. The present coverage is about 66 per cent. This is obviously impacting on the overall access situation in the country.

4.2 Quality

4.2.1 The present scenario in India in the delivery of ECCE is marked by diversity of programmatic approach, content and standards. There are no standard practices followed. All of this has a direct bearing on the quality of services being provided.

4.2.2 Though quality matters in the delivery of ECCE services, there are no norms, guidelines or framework binding on implementers. Minimum Specifications for Pre Schools, is a suggestive guide published by NCERT in 1996. This document serves as a guideline for policy makers and implementers for laying down basic norms and specifications for Early Childhood Education (ECE). In its attempt at setting some standards and norms, the document covers the following aspects:

<table>
<thead>
<tr>
<th>Broad Aspects Covered</th>
<th>Specific Aspect for which Guidelines Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical structure and facilities</td>
<td>Location; play areas; facility for drinking water; sanitary facilities; sleeping facilities; storage space</td>
</tr>
<tr>
<td>Equipment and material</td>
<td>Outdoor equipment/material for large muscle development; Indoor equipment/material; First aid kit</td>
</tr>
<tr>
<td>Safety precautions</td>
<td>Safety of play space; not to use self locking doors; materials that could harm children should be stored in areas inaccessible to children; no toxic colour/paint should be used for play equipment; regular maintenance of outdoor equipment; avoid sharp edges in equipment, etc.</td>
</tr>
<tr>
<td>Pre school staff</td>
<td>Staff structure and adult child ratio; qualifications of the teacher; qualifications of the helper; salary structure</td>
</tr>
<tr>
<td>Age for admission</td>
<td>Explains the age specific development of the child vis-à-vis appropriate age for pre-school</td>
</tr>
<tr>
<td>Admission procedure</td>
<td>Alternative strategies suggested as a departure from the practiced admission procedure</td>
</tr>
<tr>
<td>The pre-school programme</td>
<td>Timings; Content and methodology</td>
</tr>
<tr>
<td>Record and registers</td>
<td>Admission records; progress records; teachers’ diary; registers – attendance of staff and children, accounts, stock and staff profile</td>
</tr>
</tbody>
</table>

4.2.3 The above have served as valuable guidelines for setting up ECE/pre-school centres but implementers are free to design their interventions independent of these guidelines. Some NGOs point out that working under ideal conditions remains a distant dream in slums of cities like Mumbai and Delhi where housing itself is such a problem. Thus, the guidelines serve the purpose of providing insights into the desirable for suitably adapting the norms in accordance with the prevalent conditions.

4.2.4 Keeping a constant watch on quality parameters, a MIS for ICDS has been instituted. The DWCD has installed a micro-computer and the special software has been developed on MIS for ICDS. Periodic monitoring reports such as the quarterly progress reports/monthly progress reports are being generated. Each Anganwadi Centre furnishes monthly progress reports that ultimately feed into the
system at the National level. Quarterly status reports and performance reports are sent to the State nodal departments for taking necessary corrective action. Presently, data on enrolment of 0-3 year and 3-6 year along with the number of beneficiaries under the nutrition programme and pre-school education programme are analysed. The information on immunization status is not routinely analysed and it is not possible to assess the coverage of ICDS in this regard. The Department has developed a format for State level consolidated monitoring reports to strengthen the monitoring system of ICDS. Information flow on these formats from the States has commenced.

4.2.5 At the field level, the operational structure allows for Supervisors – one for every 20 Anganwadi Centres – who visit the centres regularly to check the maintenance of records, receipt and utilization of inputs made to the centre, and any other matter that is concerned with the functioning of the centres.

4.2.6 A range of options have been used to monitor the ECE interventions being provided by the Department of EE & L. The programme functionaries, academic support systems, DIET faculty, specially constituted resource groups as well as the community are all involved in monitoring the ECE interventions. This is done primarily through sets of monitoring formats that have been developed. Regular review meetings held at the cluster and block levels together with centre visits by programme functionaries have contributed towards quality of services. Links with the school and greater community involvement in the delivery of ECE have also impacted on the quality of services.

4.3 Training

4.3.1 Induction and in-service training programmes are provided to the Anganwadi Workers, Supervisors, and the Child Development Project Officers (CDPO) of the ICDS programme. NIPCCD is the apex institution in the country that coordinates training of ICDS functionaries. It provides technical input to the DWCD on all issues related to training, prepares modules, curriculum and training material. Training to the grassroots functionaries is provided in partnership between the Government and non-Government sectors through the Anganwadi Workers Training Centre and the Middle Level training Centre for the Supervisors and CDPOs.

4.3.2 There is some training backlog of ICDS functionaries at all levels in the country. The evaluation of the ICDS Scheme by NCAER found that 84 per cent of the functionaries to be trained but most of the training is pre-service and in-service training remains an unmet gap. Many functionaries are in the field running the Anganwadi Centres without induction training. An effort has been made to compensate for the usual training with a compressed training to at least familiarize the functionaries with the project and its implementation. A case in point is the UNICEF supported training (five days crash course) that has been provided by the Government of Assam with the help of NIPCCD Regional Centre at Guwahati.

4.3.3 Provisions have been made in DPEP to train the ECE functionaries as well as the community representatives on ECE as the management of ECE Centres has been vested with the Village Education Committees. Regular induction and in-service training programmes are provided. NCERT along with the SCERTs and DIETs have been involved with ECE service delivery in the DPEP districts. Members of the resource groups set up have also been trained and sent on exposure visits to learn from the working of good examples of ECE interventions.

4.3.4 NCERT has initiated a year long training programme for those already engaged in provisioning ECE/pre-school services. The NCERT run Nursery School in IIT Delhi houses the ECE Resource Centre that invites applications for training in ECE. The cost of training is met from the fees collected from the participants. This initiative was triggered from the finding that many of the good schools in the National Capital were providing faulty pre-school education with an emphasis on the 3 R’s. After a few years of successful management of the training programme, two more ECE Resource Centres have been set up – one in Delhi and another in Jaipur. Today, the training programme caters to a variety of institutions and agencies of diverse backgrounds.

4.3.5 The National Council of Teacher Education, a statutory body, has the mandate to provide the norms and Standards for Pre-School Teacher Programme and for Nursery Teacher Education Programme.
Norms and Standards for Pre-School Teacher Programme, this lays down the following for pre school teachers for children in the 4-6 age group:

- Course of one academic year, 150 teaching days
- Qualification of trainees should be Class X or equivalent
- Curricular transaction should emphasise approaches and methods like role playing, games, quiz, material preparation, project work, bal mela etc.

Norms and Standards for Nursery Teacher Education Programme: This lays down the following for pre school teachers for children in the 4-8 age group:

- Course of two academic years, 150 teaching days
- Qualification of trainees should be class XII or equivalent
- Curricular transaction should emphasise approaches and methods like role playing, games, quiz, material preparation, project work, bal mela etc.

4.3.6 Once the norms laid down by NCTE are enforced, definite changes in the background of the ECCE workers/ECE teachers are expected to be seen.

4.4 Curriculum

4.4.1 At present there is no uniformity in the curriculum followed in the ECCE Centres. Service providers have developed their curriculum on the basis of the material available. The understanding among programme implementers is not always in line with the desired. There is continued emphasis on the 3 R’s in pre-school centres and this is a cause of concern.

4.4.2 The National Curricular Framework includes a section on the curricular content of pre–school education. It states the following:

During the pre-primary stage, enormous changes take place in the children’s physical growth and mental development. From a state of dependence and helplessness the children gradually attain independence and become curious learners. As their bodies grow and respond to the social and cultural cues, their nervous systems mature and their cognitive experiences are enhanced. They quickly adapt to the world and slowly begin to imagine and discover methods for storing away the memories of the past and present events. Play fosters the overall development of the learners who may engage in functional play, i.e., simple and repetitive movements with or without an object, and constructive activity - physically manipulating objects in order to construct or create something. This period is marked by the development of language, the use of symbols and egocentric thinking, i.e., failure to distinguish between one’s own point of view and that of another individual. Children at this stage also engage in fantasy play.

For the development of beliefs, habits and attitudes associated with physical well-being, emotional maturity and proper social orientation, the years of pre-primary and primary education are the most impressionable and formative period of the child’s life. This fact has to be realised in all seriousness by the curriculum designers and practitioners so as to provide appropriate and adequate learning experiences to the learners.

4.5 Funding

4.5.1 Funding for ECCE services is available from the Government, corporate sector, and international donor agencies. Generation of funds for running ECCE services is another means of meeting or supplementing the expenses of running ECCE services. Contrasted to this, there are the private enterprises that operate as commercial profit making ventures charging high fees to parents of children enrolled with them.

4.5.2 Funding for Governmental programmes in the social sector that is applicable to ECCE services are of the following three kinds:

- central programmes that are entirely funded by the federal Government
- centrally sponsored programmes that are mutually funded by central and State Governments
- State programmes that are funded entirely by the State Government
4.5.3 There is a spurt in the interest of the corporate sector in the provisioning of ECE services which is now seen as an imperative for UEE. The ICICI Social Initiatives Group, for example, is supporting two NGOs, Pratham and Jana Sanskriti Centre to run pre-school programmes.

5. DUPLICATION/OVERLAP AND VARIATIONS IN DELIVERY OF SERVICES

5.1 Duplication/Overlap

5.1.1 Duplication and overlap of services has been with respect to the content of services provided and the geographic coverage of the services. Delivery of ECCE services has been targeted at the following age groups of children:
- up to 2 years
- 0-5 years
- 0-6 years
- 3-6 years

5.1.2 On account of the multiplicity of service providers and shared responsibility for specific age groups of children, there has been a tendency to address needs of the children in the 0-6 year age group in part. This is the outcome of sectoral/agency interest to keep in tune with the stated thrust areas of each service provider.

5.1.3 It would seem fair to state that a larger proportion of the 0-3 year old children are covered in some way or the other by the different interventions available. But it is also true that holistic child development has not been the concern of all service providers as the services available to this age group range from custodial care (as in the case of the crèche/day care programme), immunization (concern of the Family Welfare department) to provisioning of supplementary nutrition (by the ICDS).

5.1.4 Coverage of the 3-6 year olds under pre-school education programmes has been available through the ICDS, DPEP, Mahila Samakhya programme and Janshala in the Government and by a variety of interventions offered by the private sector. The ECE intervention under DPEP has been to strengthen the ECE component in the ICDS centres and also to set up own models of ECE in areas not covered by ICDS.

5.1.5 In consonance with the spirit of the Tenth Plan, conscious efforts were made to synergise the geographic spread of the various child care and development programmes run by the Government with ICDS in order to avert duplication of services (the phasing out beginning towards the end of the Ninth Plan period). As a result, the department’s (DWCD) own schemes of Balwadi Nutrition Programme as well as the ECE programme have been abolished through an exercise of relocating the centres as a part of the effort at universalizing coverage under ICDS. Similarly, the ECE interventions under DPEP and the Mahila Samakhya Programme have either been rationalized to serve those areas unserved by ICDS or will be handed over to ICDS (as in the case of the ECE Centres started by DPEP).

5.2 Variations in Delivery of Service

5.2.1 The obvious areas of difference in the delivery of ECE services are the curriculum, staff background, timings followed and the extent of community involvement, at least by design if not achieved. No standard curriculum is followed in imparting ECCE services there are wide variations to be seen in this regard. The curricular content has been developed in accordance with local or organizational perceptions and priorities based on individual understanding of what pre-school education is all about. However, with the introduction of ECE in the National Curricular Framework, service providers should soon fall in line with the desired approach, content and method for pre-school education and abandon the emphasis on the 3 R’s.

5.2.3 The staffing pattern followed in the pre-school centres differs from organization to organization or from programme to programme. The most common model has been to work through a worker and a help
in the centre. This team of two provides all the inputs at the centre, depending on how the centre positions itself. There is no set norm for the adult to child ratio.

5.2.4 The norms for educational qualification of the staff have also been varied. To some extent the very model and the job description of the staff members have determined their basic minimum qualifications. For instance, the crèches being run by SEWA are managed by women who are members of the union. These women do not necessarily have the qualifications or background to make them suitable for working in the area of child care/development. But, the SEWA model is such that it is imperative for them to work through the women members. In the case of well defined educational background for the ECCE workers, there are instances when for want of appropriately qualified persons, positions are either lying vacant or compromises have been made to keep the programme running. The remuneration pattern followed in different models of ECCE has also been a critical determinant of the educational level of the personnel.

6. STATUS OF ECCE DELIVERY AND WAY FORWARD

6.1 There are several concerns about the present set of ECCE services available to children in India. Reach, coverage and quality of ECCE services for the 0-8 year olds in the Indian context are major concerns – particularly with reference to urban areas, the hard to reach groups of children, inclusion of all eligible children, and inclusion of age groups. In the context of access, the coverage plan of ICDS will need to be reviewed as also other similar interventions. The present coverage of 18 per cent of the 3-6 year old children under ICDS is ample indication for concerted efforts to improve coverage.

6.2 India has several forward looking legislations that mandate the provision of crèche/day care facilities but the States are at different stages of implementing them for several reasons. On the one hand, the inspectorate for overseeing the implementation of these statutes is often seen to be hindering the implementation process. On the other hand, the shortage of human resource in the inspectorates has kept the staff engaged in the considered high priority aspects of implementation and provisioning of crèche/day care facilities certainly is not a high priority issue.

6.3 ECCE services as an important precursor to elementary education has been recognized in the newly formulated Article 45. The Government is now committed to endeavour to provide early childhood care and education for all children until they complete the age of six years.

6.4 Better coordination among the departments/Ministries as also the apex institutions can effectively contribute in improving the quality of services available. Needs of the child and the essentials of child development can then be addressed in a complementary mode to enhance possibilities of better results.

6.5 Absence of norms and regulatory authority has hindered the growth of ECCE services in the desired direction. Whatever is available in the form of National Curricular Framework, norms laid down by NCTE and the Minimum Specifications for Pre-schools by NCERT need to be woven together to strengthen the ECCE services available in this country through the Government and private sector.

6.6 Several studies have indicated that ICDS has had a positive impact on beneficiaries and improvement has been reported in major indicators of health and nutritional status and immunization coverage. The evaluation of ICDS undertaken in 1992 by NIPCCD also endorsed the positive impact of the programme on children’s health and nutritional status. The findings revealed that 89 per cent of children between the age of 3 and 6 years who had attended ICDS pre-schools actually continued their education at the primary level. On the other hand, only 52-60 per cent of 3-6 year olds who did not have pre-school education either in ICDS or non-ICDS areas were enrolled in primary schools. This comprehensive approach to early childhood services contributed to a decline in the mortality of children 4 years old or below from 54 per cent in 1970 to 24 per cent in 1994. Similar findings have been recorded by the NCAER evaluation carried out in 1998-1999. The potential of the available services to ensure holistic child development and completion of primary education is beyond doubt. The challenge is to be able to improve the performance of the available services by devising ways of impacting on the quality of services.
6.7 Despite the fact that ICDS has been functioning in the country for more than 25 years and has shown positive results:

- the IMR and MMR continue to be high
- there is low immunization coverage
- of the children who survive, one third have low birth weight, only about half receive exclusive breastfeeding and about half are malnourished. This being the overall picture, the picture in particularly deprived segments can be construed to be even worse.

The rate of progress of child development indicators has been slow and one concrete contributing factor is child rearing practices in the community. This is a cause for concern.

6.8 Given this overall situation, it has been stated in the Tenth Plan document that “The integrated approach adopted for the holistic development of children will continue during the Tenth Plan as it has already proved its credentials through the programme of ICDS. In fact, ICDS will continue to be the mainstay of the Tenth Plan and endeavour to promote the overall development of the young children all over the country through its universalization. Thus the present coverage of ICDS through 4608 projects covering 31.5 million children and 6 million mothers will be expanded to cover 54.3 million children and 10.9 million mothers through 5652 ICDS projects during the Tenth Plan. The scope of the on-going approach to converge the basic services of health, nutrition and pre-school education to promote holistic development of the young child, as embodied in ICDS, will be further strengthened with community participation/community action to reach the un-reached, i.e., children below 3 years. During the Tenth Plan, efforts will be made to expand/widen the scope of the development of children with necessary interventions related to the empowerment of women, with a special focus on the girl child and the adolescent girl.”

6.9 The Tenth Plan document acknowledges that the major challenge will be to achieve increased community ownership and qualitative improvement of various child welfare/child development programmes. Priority will be accorded to strengthen the knowledge, skills and capabilities of frontline workers to understand community perceptions, practices and emerging situations/demands. Thus, the major thrust will be to develop decentralized training strategies with innovative ground-based approaches. In consonance with the above, new approaches for mobilizing assistance, both in cash and kind, for the sustenance of child development programmes will be experimented, along with community participation in and contribution to ICDS. Also, efforts will be made to involve the corporate sector to adopt ICDS projects and thus fulfill their societal obligations.

6.10 Strategies and approaches identified by the Working Group on Elementary and Adult Education Tenth Five Year Plan 2002-2007 for improving ECCE coverage and services include:

- Universal access to ECCE should be provided to all children in 3-6 age group. While new centres should be opened in non-ICDS areas, the pre-school education component of ECCE centres in ICDS areas should be strengthened. As ECCE is an indispensable first step in total educational continuum and starting point for intervention aimed at UEE, education sector should assume greater responsibility for providing ECCE.

- The linkages between ECCE programme with primary education should be further strengthened. It may include co-locating ECE/ICDS centres with schools, synchronizing timings, training functionaries, extending timing of centres, providing part-time teachers in ICDS centres, paying extra honorarium to Anganwadis workers for extended work, providing play material and kits and improving quality aspects of pre-primary schooling.

- The continuity in curriculum from the pre-school stage to the primary stage should be ensured. Other steps are (i) extension of the child centred and joyful learning methodology into the curriculum at primary stage, (ii) inclusion of a school readiness package at the beginning of class I curriculum.

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16 Ibid. p.271
based on local needs, to facilitate entry and adjustment of children who make a direct entry into primary school without any ECE experience and (iii) joint training of primary teachers and ECE workers/personnel to facilitate better appreciation of the nuances of ECE-primary linkage and need for continuity.

- Innovative and alternative models to ICDS should be experimented. There is a need to look out for “out of the box” solutions and models. This includes (a) ICDS – Department of Education convergence model where 0-3/4 year olds are covered by ICDS and 4-5/6 year olds relocated to the school as a pre-primary class as successfully tried out in DPEP in Madhya Pradesh and Assam (b) Two worker model in the ICDS design (c) Integrated ECE model or Bal Kendras covering 3-8 year olds with a specific ECE play based curriculum to cover ECE and grades I and II. This model serves as feeder centres for primary schools and has several pedagogical advantages for preparing children for the primary grades (d) Home based model as tried out by NCERT and NIPPCD, which can be operationalised through women’s groups and (e) ECE for 3-6 year olds run as part of the primary school and covered by the mid-day meal programme and school health programme if it exists. These flexible approaches and models should take into account the local context and needs.

- A non-negotiable minimum essential quality in terms of infrastructure, materials, programme content, worker/ teacher quality etc. should be specified as a norm for ECCE.

- In urban semi-urban areas, nurseries and preschool – often with English medium – have mushroomed. Apart from dubious preschool education programmes and practices, many of these institutions resort to exploitation of teachers and parents. Mechanism to regulate the establishment of such institutions will need to be thought of.

- Efforts have to be made to achieve greater convergence of ECCE programmes implemented by various Government Departments as well as voluntary agencies by involving urban local bodies and gram panchayats.

- ECCE should follow holistic approach aimed at fostering health, psycho-social, nutritional and educational development of the child.

- The resources, material, financial and human, available for ECCE are also not commensurate with the need for a quality programme. Training programme for teachers of ECCE still need to be further strengthened and professionalised for improved personnel preparation.

- Community mobilisation and support, including involvement of NGOs and PRIs in a more constructive mode is crucial to the success of the programmes and will need greater attention in the Tenth plan through large scale advocacy and extension activities.

- Resource capacity in ECE should be built at all levels of the existing institutional structures in the education sector from state through district to sub-district levels which can facilitate and be responsible for the qualitative improvement of the ECE programmes at the field level.

- A Bureau/Cell for ECE should be set up in the Department of Elementary Education and Literacy, MHRD to initiate and monitor implementation of programme, facilitates coverage and coordination between different related sectors and provides administrative support.

- Strengthen the national resource group for ECCE at the NCERT to carry out research, training development and extension activities. Create ECE expertise in all the States/UTs, particularly in the SCERTs, DIETs, BRC and schools. There should be effective mechanism for decentralized resource support for academic supervision and monitoring of the programme.

6.11 In the context of improved ECCE services it is relevant to mention that a network of concerned NGOs and individuals, under the umbrella of FORCES, has formulated a Comprehensive Child Rights Code (FORCES, Maternity and Child Care Code : Concept and Content) to replace the statutory provisions, policies and programmes that exist. As part of that code, it has been suggested that the basic components of an ECCE Code be targeted at parents, children from birth to two years, children from three to six years.17

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17 Children in Globalising India Challenging Our Conscience, HAQ Centre for Child Rights, 2002. p.151