‘Training Anganwadi Workers and Supervisors’
Training Programs for Anganwadi Workers & Supervisors

Project – Urban95 Program, Udaipur

City Partner – Udaipur Municipal Corporation (UMC)

Funder cum Supporting Partner – Bernard Van Leer Foundation (BvLF).

Technical Partner – ICLEI- South Asia
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1. Urban95 in Udaipur

Udaipur city associated with the Urban95 Program of the Bernard Van Leer Foundation (BvLF) to become an Infant, Toddler and Caregiver (ITC) friendly city. Udaipur Municipal Corporation (UMC) joined the global Urban95 program in early 2019, becoming the third Indian city to do so. ICLEI – Local Governments for Sustainability, South Asia is providing technical support to the on-ground implementation of this program.

Under the Program, a series of tactical and pilot interventions were planned in identified pilot demonstration wards, to apply ideas on the ground in Udaipur to generate interest and showcase impact to the people. Other than tactical and pilot interventions, four trainings were conducted in two phases for anganwadi workers. The training program was for 150 anganwadi workers (one from each anganwadi) and two city-level supervisors of the Udaipur city area. Prior to the training of workers, the technical team conducted a literature review which can be accessed in the Annexure I.

1.1. Training for Anganwadi Workers and Supervisors

Anganwadis are government-run early childcare centres, set up under the national government’s Integrated Child Development Services (ICDS) scheme. The anganwadi workers are frontline workers who promote early childhood care, health and nutrition among the caregivers, and oversee the engagement of young children and their caregivers in the services provided under various Government schemes. They are responsible for encouraging community participation in running the ICDS program, promoting non-formal preschool activities, organizing supplementary nutrition feeding for children (0-6 years), weighing each child every month, and recording their height graphically on the growth card, besides several other tasks that are necessary during the early childhood period. They also help in implementing government guidelines on the ground.

The government trains and also keeps a record of their performance on a regular basis because of their important and specialised role. It was planned that as part of the Urban95 program, all 150 anganwadi workers in Udaipur would be trained to utilize the available built environment and space. This would help them to include it in their teaching approaches and in adding engaging elements for young kids. Additionally, they were to be trained to share their learnings with parents and caregivers as part of their monthly feedback and exchange activities.

Four training workshops were organized in two phases, covering all ‘urban’ anganwadi workers in the city, in association with the UMC and the ICDS department. While 150 workers attended the first phase held in October 2019, 140 workers attended the second phase of training held in February 2020.
The training program aimed to promote the optimal development of young children in the age groups of 0-3 years and 3-6 years, using innovative pedagogical approaches.

Additionally, the training aimed to reach out to parents and community members through the workers, to encourage their participation in the functioning of the anganwadi centers. This would promote a stimulating early learning environment for young children, not only at the center, but in their homes as well.

1.2. Process

The process adopted by the technical team for conducting the trainings is presented below:

![Diagram showing the process of conducting trainings](image)

**Figure 1: Methodology Adopted for conducting Anganwadi Trainings**

### 2. Training Modules

#### 2.1. Introduction

The training modules were developed by the project’s early childhood development (ECD) expert. The content and schedule of the training program was finalised, and then approved by the ICLEI South Asia and BVLF teams. The aim of these modules was to develop a holistic approach on the significance of early growth and development, proper health, nutrition and nurturing care for children, by including the immediate surroundings and built environments at anganwadis, homes and community surroundings.
2.2. Objectives

- To convey the Urban 95 approach, based on the needs of young children in their formative period.
- To manage daily classroom activities, using the principles of ECD, referring to early stimulation, child’s nutrition and health, and by using the resources at hand.
- To encourage anganwadi workers to ensure a safe and stimulating early learning environment for children under the age of six in their centres using the Urban95 framework, involving the use of the floor, walls, corners and other available spaces.

2.3. Content Details

The four trainings were envisaged to be held in two phases, covering all 150 workers and two supervisors. Each day of the training (6-7 hours) consisted of half the workers and one supervisor. The learnings from Day 1 were to be applied to Day 2. In the first phase, the day-long training program was divided into multiple sessions, with topics like ‘Significance of Holistic Child Development; ‘The First 1000 days (0-3 Years Children)’; ‘Early Learning Activities for Children’; and ‘Unpacking on-Ground Field Challenges.’ These were covered in different sessions, involving a mix of presentations and hands-on activities, with the anganwadi workers being directly involved to make the program more interactive and participatory.

The second phase included a revision of some important learnings from the first phase, including a session demonstrating how to convince parents about their role, and on the inclusion of parents in anganwadi work. The ECD expert also presented a session on communication skills and message preparation, and included indoor and outdoor activities. It was followed by a discussion on the challenges faced by the anganwadi workers in their work. Group activities on the use of waste and low-cost materials in the learning environment at the anganwadis was also an interesting part of the training.

(Refer Annexure II for module details)

3. Interaction with Key Departments

The ICDS department in Udaipur has been set up under the Ministry of Women and Child Development, Government of Rajasthan. This department is responsible for executing the government schemes and programs related to women and children. A Deputy Director leads the ICDS department in the district, followed by CDPOs and anganwadi supervisors. The functioning of anganwadis is monitored by the supervisors. There are two lady supervisors in Udaipur and 150 anganwadis in the city. As the focus of the Urban95 program is on Udaipur city, these urban anganwadis were targeted for the training.
A meeting was held with the Deputy Director of the ICDS department to inform him about the Urban 95 program, the training program and the inclusion of an ECD expert to conduct the event. Based on the interaction and in recognition of the value of the proposed event, it was suggested that the trainings should be held in two phases on weekends, so as to not put too much pressure on the workers. Each training was envisaged to include 75 anganwadi workers and one supervisor per day.

The UMC, as the city partner and the host of the training program, provided the necessary leadership by facilitating the interactions with the ICDS department. It also arranged for the Deendayal Upadhyaya Auditorium, which it owns, to be the venue of the training program.

4. Preparation for the Training Program

4.1. Background and status assessment

The project team and the ECD expert, based on secondary assessment, developed a general understanding of the ICDS program and the working of anganwadis at Rajasthan state level. Interactions were held with the Deputy Director, ICDS and supervisors, along with site visits to a few anganwadis to gauge the situation in terms of the level of service and the aspirations of workers that the trainings could include.

4.2. Venue preparation and material procurement for group activities

As the trainings were meant to be hands-on and participatory sessions, the venue had to be appropriately prepared to simulate an anganwadi setting. Relevant materials were procured for the planned group activities. These included materials such as white board, pens, flip charts, picture cards, chart paper, thermocol glasses, small stones and pebbles, old socks, buttons, beads, plastic wires, small thermocol balls (colorful), non-toxic clay, plain dupatta, among others, in adequate quantities.

5. Training Program Proceedings

The four-day training program was conducted in two phases, each phase consisting of two day long trainings. The 140-odd participants in each phase were divided into two batches, comprising 70 participants each. Each batch attended a day’s training session. The two supervisors - Mrs. Sharda Bansiwal and Mrs. Nidhi Rani Joshi—led a day’s session each in both phases. The training program was conducted by Ms. Ikanshi Khanna, who is an Early Childhood Development (ECD) Expert for ICLEI – SA, and is also associated with Centre for Early Childhood Development and Research (CECDR) at Jamia Millia Islamia University, New Delhi.
Besides the anganwadi supervisors and workers, members of the technical team from ICLEI- SA and the City Coordinator, Urban95, Udaipur, from BvLF were also present during the trainings. The participants were given refreshments and lunch on all four training days.

5.1. Phase 1
The training programs in phase 1 was organized at the Deendayal Auditorium on the 18th and 19th of October 2019.

5.2. Sessions
The training program was divided into multiple sessions, which covered topics such as ‘Significance of Holistic Child Development’; ‘The First 1000 days (0-3 Years Children)’; ‘Early Learning Activities for Children’ and ‘Unpacking on-Ground Field Challenges’.

Figure 2: Technical team welcomes anganwadi workers and supervisors

Figure 3: ECD Expert, Ms. Ikanshi Khanna
Figure 4: Anganwadi workers and supervisors attending the training program

Two videos on the development of a child’s brain and the role of environment in ensuring a child’s optimal growth and development were also shown in between sessions.

5.3. Group Activities

After the sessions, the anganwadi workers were divided into eight groups, provided white charts and color pens and were asked to prepare a sketch of an anganwadi that utilizes its space well and has innovative ways of imparting learning.

Figure 5: Group Activities

In another activity, the participants were given low-cost material and asked to prepare innovative items with them. This was an activity to help them learn how to engage children in the anganwadis and to create a learning environment using the available resources. The anganwadi workers also presented efficient ways of measuring the growth of the children, and tracking and maintaining their records.

Figure 6: Creating interesting educational items with low-cost materials
5.4. Phase 2
The second phase of the training program was conducted at the Deendayal Sabhaghar on the 28th and 29th of February 2020.

5.5. Sessions
The day-long training program was divided into multiple sessions and started with a recap of the training imparted in Phase I in October 2019. It was followed by discussions with the anganwadi supervisor, workers and caregivers, mainly on the role of caregivers at home. Some of the other topics covered were ‘Effective Communication & Message Making,’ with focus on indoor and outdoor activities. The on-ground field challenges were also discussed.
Figure 8 Anganwadi Workers interacting with ECD expert during sessions

5.6. Group Activities
The group activities included preparing charts on how the learning process in anganwadis could be revitalised by using spaces such as walls and floors. The participants learned to use different spaces for different activities, including putting up growth and learning charts at more accessible heights.

Figure 9: Group Activities - Chart preparation on given subjects
A panel discussion was held on the need to convince the parents of young children to get involved in early childhood care, and on the significance of having discussions with them on the challenges faced.

Figure 10: Panel Discussion
In another activity, the teams were asked to transform corners or available spaces into attractive zones of learning and play, with the help of the material given to them.
Figure 11: Demonstrating the use of different materials in transforming corners and spaces into attractive zones of learning

Figure 12: Group photo of the technical team, the ECD expert, supervisors and anganwadi workers
6. Media Coverage

The training program was covered in print media.
7. Learnings

Even though anganwadi workers had received sufficient training from the ICDS department, it was found that they appreciated the stress given in the training program on using the built environment to engage and involve children, on using easily available materials for communicating with them and on the role of play-way learning. They also appreciated the innovative ways these trainings introduced for making parents share the work of the anganwadi workers.

The program team was able to build a rapport with the anganwadi workers and include them in additional activities being implemented as part of the Urban 95 program, such as Young Kids’ festival, household interactions and surveys and local tactical interventions.
8. Annexure I—Literature Review

8.1. Childhood in India

India is home to the largest child population in the world. Ensuring healthy lives and promoting children’s well-being is thus, essential to the country’s sustainable development. Significant strides and interventions have been made for improving the quality of a child’s life by reducing some of the common causes associated with child mortality and safety. Major progress has been made under different interventions to reduce malnourishment, malaria, tuberculosis, polio and the spread of HIV/AIDS among children and caregivers.

With a population of 1.21 billion, India has 164.5 million children in the age group 0-6 years and 372.4 million in the age group 0-14 years which constitute 13.59% and 30.76% of the total population respectively. The share of children (0-6 years) to the total population is 13.1% in 2011 whereas the corresponding figures for male children and female children are 13.3% and 12.9% (Census 2011). Among these 164.5 million children (2011 census), about 97 million are anemic and undernourished. Children below 5 years, 38.7% are stunted (below normal height for the age), 19.8% are wasted (underweight and short) and 42.4% are underweight.

On the other hand, it is observed at all India level, 54% of children age 0-12 months have received all basic vaccinations. The percentage of children age 12-23 months who have also received all basic vaccinations increased from 44% in 2005-06 to 62% in 2015-16 (NFHS -4) with the support of asha and anganwadi workers. However, more focused solutions are needed to fully eradicate a wide range of childhood diseases and further develop a safe and healthy environment for young children.

The National Early Childhood Care and Education (ECCE) Policy 2013, elaborated the significance of ensuring a sound foundation for child’s survival and growth. It further visualizes nurturance of holistic development and active learning capacities of all children below 6 years of age by promoting free, universal, inclusive, equitable, joyful and contextualized opportunities for laying strong foundation and attaining their full potential. This has provided impetus to the ECCE activities mentioned in the revised service package of ICDS and have built capacities of the anganwadi functionaries to provide quality services to children.

National Plan of Action for Children, 2016 launched by Ministry of Women and Child Development in the pursuit of well-being of children to provide a roadmap that links

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1. [https://wcd.nic.in/sites/default/files/National%20Early%20Childhood%20Care%20and%20Education-Resolution.pdf](https://wcd.nic.in/sites/default/files/National%20Early%20Childhood%20Care%20and%20Education-Resolution.pdf)
these Policy objectives to actionable strategies under the 4 key priority areas (i) survival, health and nutrition, (ii) education and development, (iii) protection, and (iv) participation. It aims at establishing effective coordination and convergence among all stakeholders, including Ministries and Departments of Government of India and civil society organizations to address key issues pertaining to rights of children.

The Constitution of India guarantees Fundamental Rights to all children in the country and empowers the State to make special provisions for children. The study of the demographic profile of its child population helps to understand the population dynamics of this group, which has vital role to play in shaping the future of the Country. Ensuring safety and security of children ought to be a prime concern of all societies, the early years of a child’s life are very important for his or her health and development.

Child-friendly neighborhoods, data driven policies and quality early childhood development (ECD) programmes help in providing a positive start to a child’s life. For developing and implementing child-focused interventions and programmes, organisations needs to cultivate strategic partnerships with various key stakeholders that brings together trained staff, thoughtful leadership, strong monitoring mechanisms and motivated caregivers.

8.2. Children of Rajasthan

Rajasthan- is a state that is rich in culture and has lot of unique activities and excursions to offer within the state to keep children engaged, at the same time immersing them culturally into the colorful tradition of Rajasthan. 74% of the children (0-6 years) live in rural areas (Census 2011) these figures are not new for us, but definitely significant to work with. Children living in rural parts of Rajasthan, often have limited access to their basic needs such as nutrition, access to healthcare facilities, quality early childhood education, and protection. The high percentage of children living in rural areas often result in negative repressions child labour, child abuse or child marriage. According to Rapid Survey on Children-2014, 23.8 per cent of children in urban Rajasthan aged 0-59 months are also found to be underweight. Around 7.6 per cent urban children in the same age group are severely underweight. Children in the early years (0-6years) are the most vulnerable, but the

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3 https://wcd.nic.in/sites/default/files/National%20Plan%20of%20Action%202016.pdf

4 https://nhrc.nic.in/sites/default/files/ChildrenRights.pdf

5 https://wcd.nic.in/sites/default/files/RSOC%20FACT%20SHEETS%20Final.pdf
urban children are at a higher risk where the concept of “urban advantage” and “importance of early years” are not very clear. (Bartlett, 2008; Van de Poel, et al., 2007). This is especially among those living in poverty, with lack education and life opportunities.

Children may perhaps face the impact of environmental changes where access to safe spaces and availability of basic facilities like clean water, sanitation, health and education is either inadequate or restricted. Understanding the needs of growing population and young children, the sustainable development GOAL 11- making cities and human settlements inclusive, safe, resilient and sustainable by United Nations General Assembly 2015 have ensured to address this challenge. The Goal 11 further, aims to provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities by 2030.

With Rajasthan being adjudged as one of the best states for Beti Bachao Beti Padhao (BBBP) many young children especially girls are sent back to schools through constant effort by the government. Beti Bachao, Beti Padhao (Save girl child, educate a girl child) is a programme that aims to generate awareness and improve the efficiency of welfare services intended for girl child. BBBP addresses the declining Child Sex Ratio (CSR) and related issues of women empowerment over a life-cycle continuum. It is a tri-ministerial effort of Ministries of Women and Child Development, Health & Family Welfare and Human Resource Development.

Furthermore, Government of Rajasthan through the Department of Women and Child Development have been actively involved in conducting various training workshops for anganwadi workers and supervisors to build their capacities and strength to work with young children and their caregivers. Interestingly, the Rajasthan Mahila Vidyalaya in Udaipur has a dedicated training centre to impart trainings on various child development issues to the ICDS functionaries. The centre was developed by the state government in 1982. Most of the trainings are conducted on the module designed by WCD, and a few of them are also aligned with the UNICEF’s (Rajasthan) & DIET’s (Dungarpur) community level initiative on early childhood care and education (ECCE) that includes the training of the Anganwaadi workers on the five developmental domains among children.

8.3. About Udaipur District
The tribal population of Udaipur is highly exposed to the incidences of child malnutrition. According to the Child Fund (India), one of the world's largest voluntary

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7 https://wcd.nic.in/bbbp-schemes
organizations working on child development, many children in the 0-6 age group in south Rajasthan’s tribal belt (comprising the six districts of Udaipur, Banswara, Pratapgarh, Chittor and Rajsamand and Dungarpur) are Vitamin-A deficient and among them 60-70% of them suffer from malnutrition. Droughts in western Rajasthan are identified as serious threats to the well-being of children under 5 years of age causing an inadequate intake of daily food leading to multiple illness among children.

Considering the figures stated above, there is an urgent need to understand the significance of investing in early years. Experiences during the early childhood development stage influences the child’s overall growth & development. Therefore, it is utmost important to intensify the efforts taken for the welfare of the children. Constitutional Provisions by GoI under its Part III (Fundamental Rights) and Part IV (Directive Principles of State Policy) guarantees the rights to the children of India. One of the most significant among the list is the “Article 45: The State shall endeavor to provide early childhood care and education for all children until they complete the age of six years”. Meanwhile, the Government of Rajasthan has also prioritized their agenda of providing quality childhood services to all children in their state with the special focus on malnutrition for children below 3 years. The state government is adapting a number of schemes and programmes launched by the Ministry of Human Resource Development and Ministry of Women and Child Development. The Ministry of Women and Child Development itself is strongly engaged in implementing schemes like POSHAN Abhiyaan, anganwadi services and scheme for adolescent girls under the ICDS programme in the state of Rajasthan.

Another noticeable scheme- Pradhan Mantri Matru Vandana Yojana (PMMVY), launched in 2017 has shown positive results in improving the living conditions of children and caregivers in Udaipur and Dungarpur. The PMMVY intends to provide partial compensation for the wage loss in terms of cash incentives to the pregnant woman so that she can take adequate rest before and after delivery of the first living child. This cash incentive has resulted in improved health seeking behavior amongst the pregnant women and lactating Mothers (PW&LM).

Another scheme is Rajiv Gandhi National Crèche Scheme (RGNCS)\(^8\), a Central Sector Scheme launched to provide crèche facility to the children of age group of 6 months to 6 years of working women who is employed for a minimum period of 15 days in a month or 6 month in a year. The objective includes promoting physical, cognitive, social and emotional development (Holistic Development) of children and to educate and empower parents/ caregivers for better childcare. This scheme has revealed the positive learning outcomes of children measured on different age-appropriate tasks by the creche/anganwadi workers in the district.

\(^8\) [https://wcd.nic.in/sites/default/files/Revised%20RGNCSScheme_210515.pdf](https://wcd.nic.in/sites/default/files/Revised%20RGNCSScheme_210515.pdf)
Under the anganwadi services of the umbrella ICDS Scheme, supplementary nutrition is provided to children below 6 years of age in the form of take home ration, morning snacks and hot cooked meals as per the provisions of the national food security act, 2013. Mobilizing communities to address early childhood development through government anganwadis is an effort to create community awareness of quality early childcare and growth among children by the Udaipur Government. There are about 150 AWC in Udaipur with about 138 AWC having satisfactory staff on regular appointment.

There are still many children and individuals reported as abandoned during the survey conducted by NFHS and Census 2011. For this reason, the Social Justice and Empowerment Department of the Rajasthan Government has launched the Mukhyamantri ‘Palanhar Yojana’ for the uncared, unsheltered, uneducated orphans to maximize their future well-being. The Palanhar Yojana scheme, was introduced in 2005 with the aim to secure food, clothing, education and other benefits for children living in a family environment. Therefore, the Palanhar Yojana can be said to be an instrument for family preservation.

India is also home to one of the largest pool of children with Severe Acute malnutrition (SAM) in the world; we have around 80 lakh children which consist of 42 % of Global load of children with SAM. In Rajasthan alone there are about 638166 children with SAM as of 2012 (NFHS III- SAM Rajasthan 7.3%). Department of Health and Family welfare collaborated with local NGOs to initiate the facility based care for SAM children and complications through POSHAN strategy. The strategy targets to promote -proactive and optimum care of children, through Social- Household Approach for Nutrition” for community based management of children with SAM is the most dangerous form of malnutrition.

The Rajasthan State Action Plan on Climate Change (RSAPCC) envisions the state “to achieve sustainable development by reducing vulnerability to climate change by enhancing the resilience of ecological, economic and social systems in Rajasthan” especially in Udaipur slums. Children and caregivers are given due importance in the health & nutrition sector of RSAPCC and their specific vulnerabilities due to climate change are identified and support is provided with the help of anganwadi and asha workers.

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Seva Mandir, since 1968 is one of the oldest NGO- running urban day-care centres in Udaipur. Seva Mandir works in the field of education, early childhood care, maternal and child health, environmental conservation and livelihood promotion, with the aim to benefit the marginalized population of the district. Seva Mandir has built strong Balwadi programme to address the needs and challenges related to the early childhood years.

The state government of Rajasthan has collaborated with UNICEF- Rajasthan to provide support in the implementation of the State Girl Child Policy. The key objective of this policy is to provide a conducive environment for the children especially girls in the tribal villages as well as in the city. This initiative work closely in few district of Rajasthan like Udaipur, Banswara, Dungarpur with an aim to build opportunities for children and protect them against child marriage.

These are few of the existing initiatives that are inspired to work towards ensuring safe, loving and stimulating environment for children and caregivers. They are not only working towards promoting child’s overall well-being but also aspire organisations to create an enabling environment for parents & caregivers, to engage with their children meaningfully.

Udaipur, a city known for lakes and forts is worth visiting with young children to make them experience rich culture and history of Rajasthan. From the endless corner chat(savory snacks) stalls at Fateh Sagar Lake to boating in the lakes or watching puppet shows at different parts of the city, Udaipur does offer interesting activities to engage young children. However, what is important to notice is that these activities are majorly used by tourist and not the local children who belong to the city. It is significant to consciously think about interventions that are for the city children and can be integrated into their daily routine. It is critical to design & develop corners, utilize space s- ECE centres, schools, hospitals, orphanages etc. appropriately to provide learning and stimulating environment for children on day to day basis.

8.4. Designing an Early Childhood Development program

Early Childhood Development is a multi-dimensional concept, encompassing several aspects of a child’s well-being. Even though there is a plethora of evidence highlighting the importance of early childhood development programs, misconception regarding the age- appropriate developmental needs among most of the ECD professionals is still emerging in India.

Learning in children begins immediately at birth or soon after birth. Evidence from neuroscience shows that over 85% of a child’s brain growth occurs prior to the age of 6 years, indicating the importance of adequate care and stimulation during early years to promote sustained and healthy brain development and growth. Children
exposed to various levels of neglect or deprivation of learning opportunities in their early years highlights the corresponding adverse effects on cognitive and emotional processing. Quality care, nurture, nutrition, physical activity, psycho-social environment, and cognitive and emotional stimulation during a child’s first six years are thus considered extremely critical for ensuring optimal child’s growth and development.

For the economic growth of our country, the development of a strong ECCE programme is considered as a paramount investment that India could make. Timely investment in ECCE programmes gives the best chance for children to grow up into moral, thoughtful, creative, educated, empathetic, and productive human beings. Studies tracking student learning outcomes like IECEI by CECED clearly demonstrate that children who start early tend to achieve their developmental milestones on time. At the current time, there is a severe learning crisis in India, where children are enrolled in primary school but are failing to attain even basic skills such as foundational literacy and numeracy.

These centres at multiple locations have provided support to parents and built communities. AWCs have provided critical nutrition and health awareness, immunisation, basic health check-ups, referrals and access to local public health systems, thus preparing children and caregivers for healthy overall development. However, while providing some essential cognitive stimulation, play, and day care, most anganwadis have remained relatively light on the early learning aspects of ECCE (NPE 2019).

It is safe to conclude that, access to the holistic child development programs should be the foremost right of every young child in India. Due to wide-range of reasons like poverty, malnutrition, micronutrient deficiencies, poor living conditions, restricted learning environments, children failing to attain age-appropriate milestones. This limitation in early years contributes to poor learning performance, and ultimately, results in limiting the opportunities to achieve success in life.

Key components affecting Children Development Plan are mentioned below

When planning an initiative for any city or district, mapping the status of the ongoing initiatives, government schemes & programs is necessary. When these activities are at drafting stage, they should not only aim to promote child development by preventing the occurrence of risks, but also refute the negative effects of these risks in the early years of life by creating safe and stimulating environment for children. Udaipur being one of the important districts of Rajasthan has a number of national-state schemes, public & private interventions that are working towards promoting child’s health and nutrition, education, over well-being of pregnant and lactating mothers etc. Furthermore, these themes are elaborated according to their objectives, few examples are- a) child needs to be healthy; repeated illness eventually reduces learning potential b) child need love, stimulating
and responsive environments that provide opportunities for emotional security and early learning, c) child needs secure and safe surrounding to play and experiment.

The data exemplified from the Udaipur city has been combined to view the facilities available for children under components like survival, growth and development. To make these services accessible for children and their caregivers a thoughtful planning is required, ensuring the quality of basic services within the city for children, good care practices within the family and community, and the implementation of ECD policies. If these components are combined, there will be a greater impact on children’s well-being\textsuperscript{13}. These initiatives work using the Bronfenbrenner’s ecological systems theory of development at four levels\textsuperscript{14}.

8.5. An Analytical Review

National child population in the age group of 0-6 years stands 164.5 million, out of which 43.2 million are in the urban areas (India National Health Profile, 2016). Cities in India are increasingly becoming vulnerable to the effects of natural or man-made disasters and climate extremes. Children living in low-income settlements, slums and streets, and those who are either destitute or at risk are the most vulnerable with poor access to health, water, sanitation, education and physical safety and protection.

Many psychologists like Jean Piaget, Lev Vygotsky, and Erik Erikson highlighted the importance of stimulation during early years and the positive impact of inclusive child development programmes on children. As part of the literature search, an ECD analytic framework was identified and used for reviewing the childhood development programs, schemes & initiatives in Udaipur, shown in Figure 2. The framework is derived from the social environment, health & early learning model. In the logic model, “opportunities for education and for developing capacity” serve as an intermediate indicator\textsuperscript{15}. For this review, the early childhood development programs were classified under publicly funded, non-government organisations, corporate social responsibilities and others that are on-going to increase social competence in children. Programs reviewed included ICDS Udaipur as well as other early childhood programs serving children in the city. The review tried to gauge these childhood programs under four different development outcomes: cognitive, social, health, and family.

\textsuperscript{13} https://www.unicef.org/earlychildhood/files/programming%20experiences%20in%20early%20childhood.pdf

\textsuperscript{14} https://journals.sagepub.com/doi/pdf/10.1177/2158244015590840

8.6. Conclusion

Childhood is an integral part of life with a value of its own. A sustainable and child-friendly approach is necessary for the holistic development and protection of children and their caregivers. The National Policy for Children, 2013, reaffirmed that every child is unique and a supremely important national asset. Special measures and affirmative actions, are consequently required to change the existing unsafe growing conditions for children in a city.

All children have the right to grow in a safe environment, in an atmosphere of happiness, love and stimulation. Families are to be supported by a strong social safety net in caring for and nurturing their children. In view of the furtherance of the objectives of the National ECCE Policy was formulated and circulated to all states and UTs.

The Ministry of WCD has framed “Quality Standards for ECCE” to provide a framework that will assess the successful implementation of the ECCE programmes across the country. The standards are helpful in assisting the ECCE centres and service providers in developing and maintaining dynamic quality programmes that reflect the objectives, the programmes, standards and practices of the ECCE policy.

Early Childhood Development or early childhood care and education in India refers both to (1) an outcome defining a child’s status – being adequately nourished, physically healthy, mentally alert, emotionally sound, socially competent and ready to learn and (2) a process - comprehensive and closely linked cross-sectoral interventions achieving the outcome. The basic ingredients of optimal development for a child are nutrition and health, hygiene, protection and responsive stimulation, which together constitute ‘nurturing care’.

Interventions like Urban 95, which is one of its own kind of strategic partnership between Udaipur Municipal Corporation (UMC), BVLF and ICLEI that believes in transforming the city through children’s lens is working towards enriching altogether a learning—living—livelihood experience for young children and their caregivers in Udaipur city.

Each scheme and intervention listed above aims to provide an overview of the existing early childhood development services made available to children and caregivers in Udaipur district by UMC and active NGOs like Seva Mandir. Looking at the current scenario, it is recommended that organizations working for children and caregivers need to plan and design interventions that reinforce the importance of child development among the key stakeholders. Organisations should also formulate strategies to orient and train anganwadi functionaries about the importance of developing safe indoor and outdoor spaces for children below 6 years.
9. Annexure II - Training Module

The training module was prepared with an aim to provide a comprehensive understanding to the anganwadi workers and supervisors about the significance of early childhood development under the Urban95 project. Urban95 program is the Bernard van Leer Foundation’s initiative that focuses on the needs of young children and their caregivers into the city design, planning and management. The module developed will be a guiding resource to orient and train anganwadi workers (AWWs) and supervisors at the city level working under Integrated Child Development Services (ICDS) programme. Training the AWWs and supervisors is crucial at this stage, as they are at the forefront in delivering quality early childhood development, care and education services to the children (0-6 years) and their caregivers. The purpose of the module is to develop a holistic understanding among anganwadi workers about the significance of first 1000 days, early stimulation, age-appropriate health and nutrition needs, and role of nurturing care for children. It also incorporates the idea to encourage supervisors, community leaders, AWWs, parents and caregivers to promote a stimulating environment for children to grow holistically in their safe neighbourhoods. The sections below discuss about the module developed.

9.1. Brain development during the early years

According to the World Health Organization (2009), early childhood stage is the most important phase in a child’s life. From birth to age of 5 years, a child’s brain develops faster than at any other time in life. This is because, at birth, an infant’s brain contains 100 billion neurons, roughly as many nerve cells as there are stars in the Milky Way, and almost all the neurons the brain will ever have.16 The brain starts forming prenatally, about three weeks after conception. Before birth, the brain produces trillions neurons and “synapses” (connections between the brain cells) than sometimes it needs. Healthy brain development has a lasting impact on a child’s ability to learn and succeed in school and life. At birth some neurons and synapses are already present, as the neurons begins to mature, multiple synapses are formed. At birth, the number of synapses per neuron is 2,500, but by age two or three, it’s about 15,000 per neuron.17 The brain also eliminates connections that are seldom or never used, which is a normal part of brain development.

16 https://extension.umaine.edu/publications/4356e/

For instance, scientists have determined that the neurons for vision begin sending messages back and forth rapidly at 2 to 4 months of age, peaking in intensity at 8 months. It is no coincidence that babies begin to take notice of the world during this period. Thus, exposure to stress and trauma during these early years can have long-term negative impact on children over development and well-being. It is crucial to ensure availability of resources and skills to provide child-friendly atmosphere, positive nurturing and responsive care for children in this age-group. Stimulating environment has a big role to play in the child’s brain and holistic development. Synapsis works as a web that improves connectivity and efficiency of these networks that support learning, memory, and other cognitive abilities. Therefore, experiences during early childhood years not only determine what information enters the child’s brain, but also influence how their brain processes information. The earliest messages that the brain receives have an enormous and long lasting impact on child’s overall growth & development. These early years are a window of opportunity for parents, caregivers, and communities to utilize this sensitive period and influence child’s achievement, success, and happiness positively.

9.2. Early Childhood care and Education

Early childhood care and education (ECCE) is more than just preparing children for formal education. It aims at the holistic development of a child's social, emotional, cognitive and physical needs in order to build a solid foundation for lifelong learning and wellbeing. Quality ECD programs create a realm of opportunities that allows children to explore and experiment with their surroundings, further enhancing their abilities to achieve developmentally-appropriate milestones.

The National Policy on Education (2019) and the National Curriculum Framework (2005) have cautioned against the teaching of 3 R’s (formal reading, writing, and arithmetic concepts) and formal teaching at the early childhood stage. These documents by the Ministry of Human Resource Development (MHRD) and National Council of Educational Research & Training (NCERT) emphasizes on the meaning making of the concepts rather than rote learning and copying.

Objectives of Early Childhood Care and Education:

18 https://www.cdc.gov/ncbddd/childdevelopment/early-brain-development.html


The broad objectives of the early childhood care and education as described in the National Curriculum Framework 2013 are:

a) Ensure each child is valued, respected, feels safe and secure and develops a positive self-concept
b) Ensure sound foundation for physical and motor developmental of each child as per child’s potential
c) Stimulate intellectual curiosity and develop conceptual understanding of the world around by providing opportunities to explore, investigate and experiment
d) Encourage aesthetic appreciation and stimulate creative learning processes
e) Enable smooth transition from home to ECCE centre to formal schooling
f) Develop good healthy habits and build basic skills necessary for personal adjustment, such as dressing, cleaning, washing, eating
g) Develop the child’s ability to express her/his thoughts, needs, and feelings in their home and preschool language.

9.3. Understanding Integrated Child Development Services

Children in the age group of 0-6 years constitute around 158 million of the population of India (2011 census). Ministry of Women and Child Development (MWCD) is continuously engaged in implementing various schemes for the welfare, development and protection of young children. Integrated Child Development Services (ICDS) Scheme is one such flagship programme by the Government of India that represents one of the world’s largest and unique programmes for early childhood care and development. The beneficiaries under the scheme are children in the age group of 0-6 years, pregnant women and lactating mothers.

Objectives of the Scheme are:

a) to improve the nutritional and health status of children in the age-group 0-6 years;
b) to lay the foundation for proper psychological, physical and social development of the child;
c) to reduce the incidence of mortality, morbidity, malnutrition and school dropout;
d) to achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and
e) to enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

The ICDS Scheme also offers a package of six services,

a) Supplementary Nutrition
b) Pre-school non-formal education
c) Nutrition & health education  
d) Immunization  
e) Health check-up and  
f) Referral services

Unfortunately, there is a perception about ICDS as a “feeding” programme (Khichuri Schools) for children. Therefore, Government of India in the year 2009 decided to strengthen and restructure the ICDS programme to accelerate improvement in nutrition and child development outcomes. Some of the important features in the re-structured ICDS are as follows:

1. Repositioning the AWC as a “vibrant ECD centre” to become the first village outpost for health, nutrition and early learning – minimum of six hours of working,
2. Strengthening training and capacity as well as technical human resource
3. Strengthening Package of Services – strengthening ECCE, focus on under-3s, Care and Nutrition Counselling service for mothers of under-3s and Management of severe and moderate underweight.
4. Provision of safe, child friendly and developmentally appropriate play and learning materials.
5. Promote use of traditional songs, stories, lullabies, folk tales, local toys and games as play and learning material.

The ICDS Mission in the long run targets to attain three main outcomes; i) Prevent and reduce young child under-nutrition (% underweight children 0-3 years) by 10 percentage point; (ii) Enhance early development and learning outcomes in all children 0-6 years of age; and (iii) Improve care and nutrition of girls and women and reduce anemia prevalence in young children, girls and women by one fifth.

9.4. Summary

Early childhood is the most formative period of life, as children have the capacities to learn more and faster during this stage. All children require an interactive atmosphere and positive attachment with caregivers in a nurturing environment. It is then, significant to understand the need of young children through an early childhood development lens and in particular socio-emotional stimulation for young children. While working with young children it is necessary to plan a variety of activities to promote the concept of holistic development through cognitive, motor and psychosocial stimulation, and better feeding-hygiene practices. The child’s brain needs nutrition and health inputs along with care, responsiveness and stimulation in order to grow and develop to its full potential as the foundation of

22 [https://icds-wcd.nic.in/icds.aspx](https://icds-wcd.nic.in/icds.aspx), [https://icds-wcd.nic.in/](https://icds-wcd.nic.in/)
brain development are established early in life. The child development principles also discuss the process of brain development from a life-course perspective with a particular emphasis on early childhood development (ECD), skills formation, resilience, and aging. There is mounting evidence that early and sustained investments in brain development have economic and social returns that can benefit current and future generations. With an ethos of shared responsibility between parents, care-givers, families and service providers, ICDS is the world’s largest outreach programme targeting infants and children below six years of age, expectant and nursing mothers that follows an integrated approach to enhance the quality of early childhood services available for children in India. Also, it is important to understand that Anganwadi Workers are the community based voluntary frontline workers of the ICDS programme, hence are the focal point for delivery of ICDS services to children and mothers. Thus, indeed it becomes critical to train them on the principles and components related to child development as outlined in the sections above.
