



Ministry of Women & Child Development promoting social and economic empowerment of women through cross-cutting policies and programmes, mainstreaming gender concerns, creating awareness about their rights and facilitating institutional and legislative support for enabling them realize their human rights and develop to their full potential.² Ensuring development, care and protection of children through cross-cutting policies and programmes, spreading awareness about their rights and facilitating access to learning, nutrition, institutional and legislative support for enabling them to grow and develop to their full potential.

For the holistic development of the child, the Ministry has been implementing the world's largest and most unique and outreach programme of *Integrated Child Development Services (ICDS)* providing a package of services comprising supplementary nutrition, immunization, health check-up and referral services, pre-school non-formal education. The major policy initiatives undertaken by the Ministry in the recent past include universalisation of ICDS and *Kishori Shakti Yojana*, launching a nutrition programme for adolescent girls, establishment of the Commission for protection of Child Rights and enactment of *Protection of Women from Domestic Violence Act*. The Gram Panchayat (GP) can play a very crucial role in the protection and nurturing of children and in this way, make a very important contribution to the wellbeing of people. Development of women and children is one of the 29 functions listed in the Constitution to be devolved to Panchayati Raj Institutions.

Salient features of Anganwadi Services Scheme under Umbrella ICDS Scheme:

- Anganwadi Services under Umbrella ICDS Scheme (earlier known as ICDS) was launched in 1975 with the following objectives:
- to improve the nutritional and health status of children in the age-group 0-6 years;
- to lay the foundation for proper psychological, physical and social development of the child;
- to reduce the incidence of mortality, morbidity, malnutrition and school dropout;

- to achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and
- 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 focuses on providing a comprehensive care to the mother and the child through its 6 components. The schemes try to address the multi-faceted needs of child development as well as reach out to different beneficiaries. Following are the core focal areas of the components:

- Pre School Education
- Supplementary Nutrition
- Immunization
- Health Check
- Referral Services
- Nutrition and Health Education

Pre-School-Education (PSE) focuses on total development of the child, in the age up to six years, mainly from the underprivileged groups.

- Beneficiaries between the age groups of 3 to 6 are to be provided PreSchool Education, before they enter class 1.
- It is provided at the Anganwadi centre, by the Anganwadi worker and includes non-formal education and playful activities.

Supplementary Nutrition: The objective of the component is to focus on supplementary feeding and growth monitoring for prevention of Vitamin A deficiency and nutritional anemia. It targets children below the age of 6, Pregnant and Lactating (P&L) mothers.

- Beneficiaries are to be provided Supplementary Nutrition (difference between recommended dietary allowance and average dietary intake) for 300 days in an year at the Anganwadi Centre(AWC)
- Severely malnourished children are given special supplementary feeding and referred to Health Sub-Centers, Primary Health Centers, etc.

Immunization: Immunization of pregnant women and infants (0-9 months) to protect children from six preventable (through administering vaccines) diseases e.g. poliomyelitis, diphtheria, pertussis, tetanus, tuberculosis and measles.

- Beneficiaries are immunized on specific days in public health infrastructures (such as sub-centers, primary care centers)
- The Iron and Vitamin "A" supplementation (IFA tablets) are provided to children and pregnant women under the immunization programme

Health Check and Referral Services: Health care to children and antenatal care of expectant mothers and postnatal care of nursing mothers.

- At the Anganwadi, children, adolescent girls, pregnant women and nursing mothers are examined at regular intervals by the Lady Health Visitor (LHV) and Auxiliary Nurse Midwife (ANM) who diagnose minor ailments and distribute simple medicines
- The Anganwadi worker has also been oriented to detect disabilities in young children.

Nutrition and Health Education: Behavior Change Communication (BCC) strategy for women so they can look after their own health, nutrition and development. Focused on women in the age group of 15-45 years, the program is implemented by Anganwadi workers who disseminate information on:

- Knowledge about breast feeding (colostrum feeding)
- Treatment of diarrhea/other illness
- Preparation of Oral Rehydration Solution (ORS)
- Preparation of nutritious food
- Importance of education of the child
- About cleanliness and hygiene
- Immunization during pregnancy
- Institutional delivery

At the Village level, the package of health, nutrition and educational services are provided at the Anganwadi Center (AWC) located in the village. Hence, Anganwadi serve as link between Primary Health Centre and the Village, wherein PRIs play an important role in monitoring at

different level particularly at village level through Village Health & Sanitation Committee (VH&SC).

Coverage of the Anganwadi Services Scheme:

- The Scheme of Anganwadi Services was launched in 1975 with 33 Projects and 4891 Anganwadi Centres (AWCs) and was gradually expanded to 5652 Projects and 6 lakhs sanctioned AWCs in the country, by the end of IX Plan. The coverage of Anganwadi Services Scheme, till IX Plan, was thus not universal as it covered only about 42% of the 14 lakh habitations.
- The Anganwadi Services scheme today operates through a network of 7075 fully operational Projects and 13.81 lakh AWCs as on 31.03.2020. The services are currently being provided to 855.05 lakh beneficiaries of which 686.30 lakh are children under six years of age and 168.75 lakh are pregnant women and lactating mothers.

2.1 POSHAN Abhiyaan

It is a known fact that under nutrition is an outcome of not one but multiple detrimental factors. These factors play their role in helping sustain this continuous burden of under nutrition; leading to our inability to achieve our desired human resource potential, generation after another. In order to achieve its true potential and play the role as a global superpower India will need to focus on eradication of malnutrition so as to ensure that the coming generations are healthy, enabling higher intellectual potential, leading to enhanced work productivity. On 8th March, 2018; Honøble Prime Minister launched **POSHAN Abhiyaan – PM’s Overarching Scheme for Holistic Nourishment (National Nutrition Mission)** from Jhunjhunu in Rajasthan. Overall budget is 9046 Crore .

To ensure a holistic approach, all 36 States/UTs and districts have been covered. All the States except West Bengal is implementing the scheme. More than 10 crore people will be benefitted by this programme. Never before has nutrition got so much prominence at the highest level in the country.

Goals:

The goals of POSHAN Abhiyaan are to achieve improvement in nutritional status of Children from 0-6 years, Adolescent Girls, Pregnant Women and Lactating Mothers in a time bound manner during the three years with fixed targets as under:

Sl.No	Objective	Target	The Abhiyaan aims to reduce mal-nutri
1.	Prevent and reduce Stunting in children (0- 6 years)	By 6% @ 2% p.a.	
2.	Prevent and reduce under-nutrition (underweight prevalence) in children (0-6 years)	By 6% @ 2% p.a.	
3.	Reduce the prevalence of anemia among young Children(6-59 months)	By 9% @ 3% p.a.	
4.	Reduce the prevalence of anemia among Women and Adolescent Girls in the age group of 15-49 years.	By 9% @ 3% p.a.	
5.	Reduce Low Birth Weight (LBW).	By 6% @ 2% p.a.	

tion from the Country in a phased manner, through the life cycle concept, by adopting a synergized and result oriented approach. The Abhiyaan will ensure mechanisms for timely service delivery and a robust monitoring as well as intervention infrastructure. Target is to bring down stunting of the children in the age group of 0-6 years from 38.4% to 25% by the year 2022.

POSHAN Abhiyaan ensure convergence of various programmes of different Ministries/Departments. Every State/District/Block develops its Convergence Action Plan which includes their specific constraints and bottlenecks and what can they address in short, mid or long term.

The Abhiyaan empowers the frontline functionaries i.e. anganwadi workers and Lady Supervisors by providing them with smartphones. The software application, ICDS-Common application Software especially developed for this purpose enables data capture, ensures assigned service delivery and prompts for interventions wherever required. This data is then available in near real time to the supervisory staff from Block, District, State to National level thorough a Dashboard, for monitoring. The procurement and distribution of mobile devices is a part of the

project. The application is aimed to augment system strengthening in ICDS service delivery and looks at improving the nutrition outcomes through effective monitoring and timely intervention.

- **Community Mobilization and Behavioral Change** is another important component of the Abhiyaan. The Abhiyaan is focusing on converting the agenda of improving nutrition into a Jan Andolan through involvement of Panchayati Raj Institutions/Villages Organizations/SHGs/volunteers etc. and ensuring wide public participation. Accordingly, inter-Ministerial Guidelines on Jan Andolan have been developed and released, to build consensus, achieve convergence and synergise efforts towards achieving the desired Goals. States/UTs to carry out IEC activities on regular basis for which funds to the tune of Rs. 19.00 lakh per district per year has been already allotted to the States/UTs. Month of September is celebrated as the Rashtriya Poshan Maah across the Country.
- **8Capacity Building of the front line ICDS functionaries through Incremental Learning Approach (ILA):** The Abhiyaan focuses on building the capacity of front-line ICDS functionaries in effective and consistent service delivery by using Incremental Learning Approach (ILA). Under ILA, functionaries are being trained on thematic modules following the cascade of training of State Resource Group (SRG), District Resource Groups (DRGs) and Block Resource Groups (BRGs). Total 21 ILA modules have been provided to the States/UTs. States/UTs have started rolling out ILA Modules. A digital version of ILA has also been developed. The frontline functionaries can learn using a mobile application and the progress can be monitored on the dashboard. 21 Modules have been digitised.
- **Organization of Community Based Events (CBEs):** In order to strengthen processes for community engagement, empowerment of beneficiaries and increased social accountability of ICDS, the POSHAN Abhiyaan provides for the organization of Community Based Events (CBEs) twice in a month on a fixed day of a week by each Anganwadi Centers. The processes under this component also encompass outreach visits by Anganwadi Worker to prioritized households to promote Infant and Young Child Feeding (IYCF) practices; development of well-researched designed and tested communication plan & IEC materials and intensive Mass Media Campaign on Nutrition. Detailed Guidelines on conduct of CBE

have been issued. The events are being organised in a converged manner (AWW, ASHA, ANM, DAY-NRLM etc).

- **Innovation:** States/UTs may choose innovation pilot either keeping in view the target fixed under POSHAN Abhiyaan. The norms for allocation of funds to States/UTs under the Innovation activities is @ ₹ 27.85 Lakhs per district for the entire duration of the project. States/UTs are setting up Nutri/Kitchen Garden also from this fund.

Convergence: Specifically following activities may be carried out in Gram Panchayats with the help of frontline workers of MoW&CD and MoH&FW:

- All pregnant women are to be registered.
- Registered pregnant women are to be given ANC (Ante Natal Checkups).
- Dropout pregnant women eligible for ANC are to be tracked and services are to be provided to them.
- All eligible children are to be given vaccines against six Vaccine-preventable diseases.
- All dropout children who do not receive vaccines as per the scheduled doses are to be tracked, mobilized and vaccinated.
- Vitamin A solution is to be administered, to children.
- All children are to be weighed, with the weight being plotted on a card and managed appropriately in order to treat malnutrition.
- Anti-TB drugs are to be given to patients of TB.
- All eligible couples are to be given condoms and OCPs as per their choice and referrals are to be made for other contraceptive services.
- Supplementary nutrition is to be provided to underweight children.