

The ICDS Programme in West Bengal: Scopes and Challenges¹

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There is hardly any disagreement in the diagnosis: early childhood care and development (ECCD) is a critical foundation not only of children but of society on the whole. But the evidences of coming to term with the diagnosis are as fewer as invisible. The government was very quick in launching a programme, called the Integrated Child Development Services (ICDS), in 1975 following the proclamation of the National Policy for Children 1974². But, the performance of the programme – barring in few states – has been more lacklustre than indicative of a serious effort to eradicate the evils that are severely detrimental to the development of the Indian children. Even after three decades of the launching of the programme, as the FOCUS report found in 2006, it could bring only a quarter of the children into its fold. And, hardly the quality of the services provided was up to any mark. While the design of the programme included a number of composite services (see box 1 below), in many parts of the country it was taken as the *khichri* programme, since it only provided a mixture of rice and pulses cooked together undermining the rest of the important services. In addition, despite being a centrally sponsored programme the performance of the programme has been widely varying from region to region.³ While some of the Indian provinces, particularly Tamilnadu, have made remarkable progresses in achieving the goal of universalising the programme with quality, many of the constituents of the republic seems to have performed dreadfully poorly. They neither seemed to follow the national commitment nor was there any evidence to learn from the performing states.

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² "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 shall progressively increase the scope of such services so that within a reasonable time all children in the country enjoy optimum conditions for their balanced growth."

³ See *Focus On Children Under Six (FOCUS) Report*, Citizens' Initiative for the Rights of Children Under Six 2006, New Delhi

However, strong public resentment combined with judicial following up⁴ has made some major advancement in making the national and state governments to take immediate measures to streamline the delivery of this centrally important programme. Yet, as the FOCUS report and other studies show, there is a long way to go to eradicate the deprivations of children and ensure their rights to survival, growth, education and health.

Box 1. Services Provided Under the ICDS Programme

- *Supplementary Nutrition – to provide cooked food to children and lactating mothers*
- *Health Check-up*
- *Immunization – with the help of Auxiliary Nursing Midwives (ANM)*
- *Referral Services – Hospitals and Health Centres*
- *Nutrition and Health Education*
- *Non-formal Pre-school Education for the 0-6 children*

Health Check-up, again, has four direct interventions:

- ☐ *Anti-natal and Post-natal Check-up of mothers*
- ☐ *Detection of Anaemia and other diseases*
- ☐ *Prevention of Disabilities*
- ☐ *Child Growth Monitoring through regular weighing and height measurement*

The case of West Bengal and the relevance of ICDS

According to the 2001 Census, the number of children below six years of age in West Bengal was 1,14,14,222. In other words they formed 14.23 percent of the total population against the all India average of 15.92 percent. However, the proportion of 0-6 children among Muslims (18.7 percent), Scheduled Castes (15.08 percent) and Scheduled Tribes (16.72 percent) in West Bengal were higher than the state average (and also the national average among the Muslims and Scheduled Tribes). Again, the 0-6 population among these traditionally disadvantaged groups formed 64 percent of the total 0-6 population. Mention may here be made that these three communities formed 54 percent of the total population, but more than two third (71 percent) of the total agricultural labourers. The Pratichi Trust studies in West Bengal have found that on the one hand the children of the disadvantaged sections were in a dire need of state support (for nutrition, health and education) and on the other they found themselves at the receiving end of harsh discrimination of class, caste, gender and so on.⁵ Yet, the public attention that was required seemed to be lacking. As the recently released findings of the National Family Health Survey III (NFHS III) show that the general progress has not only been slow but also there have been some reversed tendencies too. If the rate of reduction in the proportion of stunted children is sluggish (from 42 percent to 33 percent) the figure for underweight children is deplorably slower (from 49 percent to 44 percent). And the

⁴ Since 2001, the Supreme Court has been monitoring the Implementation of the ICDS, *inter alia*, Mid-day Meal, SGRY, Antyodaya Anna Yojana, Targeted PDS, National Family Benefit Scheme, National Maternity benefit Scheme, Annapurna and National Old Age Pension Scheme, following a public interest litigation (PIL) on right to food (Peoples' Union of Civil Liberties vs the Union of India and Others, Civil Writ Petition 196 of 2001).

⁵ Sen, Amartya, (2002) in the Introduction to the *Pratichi Education Report I*, TLM Books, Delhi.

proportion of wasted children has actually increased from 14 percent to 19 percent. The other indicators also do not give a better picture (see table 1).

Table 1: Some of the Key Indicators for West Bengal: NFHS

	NFHS - III (2005-06)	NFHS-II (1998-99)
Children under 3 years who are stunted (%)	33	41.5
Children under 3 years who are wasted (%)	19	13.6
Children under 3 years who are underweight (%)	43.5	48.7
Women whose Body Mass Index is below normal (%)	37.7	43.7
Children age 6-35 months who are anaemic (%)	69.4	78.3
Ever married women age 15 - 49 who are anaemic (%)	63.8	62.7
Pregnant women age 15-49 who are anaemic (%)	62.6	56.9

While these findings indicate towards the poor level of development of the children under six in West Bengal the silence about these issues in larger public domain is much more appalling. There has been very little discussion concerning the status of children under six and the ICDS programme that has immense potential to bring forth a major change in the level of development of the children. It may also worth a note that there has been a general trend in West Bengal to either maintain a sophisticated silence on or wield clear hostility towards the social issues, particularly primary education, health, food security, rural employment, etc. It was only in the recent time that the Pratichi Trust's intervention in primary education and basic health that helped initiating discussions on these issues. Again, when the launching of the Mid-day Meal scheme has shown some remarkable changes in primary education sector, including enhancement in the rate of attendance of children, reducing absenteeism among the teachers, better functioning of the schools, etc. majority of the urban and rural voices appeared to take a resolute move against the programme. This is perhaps not unrelated to the socio-economic fabric of West Bengal: the well-off have their options in private arrangements for health, education and nutrition that resulted in their aloofness from – and even sometime hostility to – the public delivery system. Given the demographic composition of West Bengal in general (where the majority come from underdog background) and the partial extent of the ICDS programme (majority of the Anganwadi centres being set up among the marginal population) the voices capable of influencing the delivery system never considered this to pay any attention, let alone hollering around the issue. This added to the urgency of making an inquiry into the delivery of the ICDS programme that was designed to address the issues related to the children under six.

The inquiry was taken up in 2006 in six randomly selected districts of West Bengal, namely, Bankura, Bardhaman, Dakshin Dinajpur, Jalpaiguri, Murshidabad and South 24 Parganas. We selected 14 Child Development Projects (6 rural, 3 urban and 5 tribal) from the above districts. A structured questionnaire was canvassed among the Child Development Project Officers (14), Anganwadi workers (28), helpers (28), and mothers (280). Apart from the structured questions the study team recorded the notes from a number of group meetings

and open ended conversations. This paper attempts to highlight the major findings of the study.

II

As a part of the “only major national programme to address the needs of the children under the age of six years”, the Integrated Child Development Services’ popularly abbreviated as the ICDS, began in West Bengal - simultaneously with other states - in 1975, i.e. during the 5th five-year plan. It was a modest beginning. There were only two projects to initiate the programme. However, the sanctioned number of projects has increased to 416 by the end of 2006. Similarly, there were, to begin with, only 281 Anganwadi Centres that have increased to 73860 during the last three decades. The Central Government has sanctioned another 17,512 centres for hilly areas of Darjeeling, the wetlands of Sundarbans and in the tribal areas across the state with the norm of establishing one centre for every 350 population.⁶ The programme began with a miniscule number of beneficiaries: 7000 children and 1000 mothers. These figures have also, and quite obviously, increased manifold: now there are 40,00,000 children and 480,000 mothers under the programme’s coverage.⁷

The enhancement, despite being slower (till the end of 2006 the coverage was only 50 percent), was a much required step forward. Given the socio-economic fabric of West Bengal with a large section of people belonging to the disadvantaged communities, depending on poor level of income the children suffer from several deficiencies, including nutrition, health and also education.

While carrying out our first study on primary education in West Bengal in 2001, we have seen, how the ferocity of hunger forced some of the children of primary schooling age to remain enrolled in the ICDS centres just to ensure a dough of flour. The cooked Mid-day Meal (MDM) programme, for which our study found a very strong justification⁸ and which was proved after its implementation⁹, was yet to be launched. A dry ration of 3 kg of rice used to be provided in questionable regularity. Such a situation provided a section of children a crucial reason to go for an ensured food on a daily basis sacrificing both primary education and the uncertain daily ration.

It was in a time when the general perception on the performance of the ICDS centres was far from being dignified. The budget allocation for the ICDS programme was far too inadequate to provide the children a dish of reasonable quality (the budget was 80 paise per child)¹⁰. Today, the situation is different; the MDM is operational and it is doing the same, in

⁶ 6. Haq, S.N (2007).: *Integrated Child Development Services: The West Bengal Perspective - A-Quality Review*, Department of Women and Child Development and Social welfare, Government of West Bengal, paper presented at the 5th Kolkata Group workshop, organised by Pratichi Trust, UNICEF, Global Security Initiative, Harvard University and Institute of Development Studies, Kolkata, on *Child Rights and Development* at the Alipur Campus of the Calcutta University Kolkata, on 12-14 February 2007.

⁷ Haq, *op. cit*

⁸ Rana et al (2002), *The Pratichi Education Report I*, TLM Books, Delhi

⁹ Pratichi Research Team (2004), *The Impact of Cooked Mid-day Meal Programme in West Bengal*, Pratichi Trust, Delhi; can be harvested from www.righttofoodindia.org; also Rana K (2004), “The Possibilities of Mid-day Meal Programme in West Bengal”, paper presented at the workshop, *West Bengal: Challenges and Choices*, organised by and at the Centre for Studies in Social Sciences, Calcutta on 27-28 August 2004; Rana k (2005), “Food for Thought”, *The Little Magazine*, Vol. 6, issue I & II, Delhi; Rana K (2007) , “The Aspiration for Education”, *Info Change Agenda*, Pune

¹⁰ Rana et al (2002), *The Pratichi Education Report I*, TLM Books, Delhi

many cases, what the ICDS centre did for the poor children – attracting the under-aged children, who are supposed to be enrolled in ICDS centres, to the primary schools. At the same time, with some additional public attention (increase in budget, coverage, etc.), the performance of the ICDS centres has started to be dignifiedly recognised. That there are several reasons to be dissatisfied about the delivery of the programme is unquestionable.

But at the same time it is inescapably important to recognise the overall relevance of the programme for the children under 0-6 which is well reinstated by the general acceptance of the programme by the poor not in the old form that used to be perceived as a government largesse but in a newer right based approach emerged as a sympathetic resonance of the Mid-day Meal programme. Many of the parents we have talked with had the resentment on the quality of food served at the ICDS centres. The resentment was clearly grounded on the exemplary performance of the Mid-day Meal programme that has offered the people an opportunity to make a comparative evaluation of the ICDS: “when the same government offers a delicious meal to the primary school children why does it discriminate the smaller children?”

At the same time, the enhanced opportunity of schooling through the MDM programme *inter alia* other factors has seemingly broadened the understanding of the process of acquiring education. That the launching of the MDM has resulted in enhanced rate of enrolment and attendance is agreed even by the fervent critique of the programme. This has had its other impacts too: lessening the absenteeism of the teachers, enhanced level of schooling, etc. At the same time children, particularly from the underdog backgrounds, who never attended the school, have been facing some crucial difficulties in their process of learning. The difficulties include, not understanding the lessons, not being able to communicate with the teacher, and so on. Obviously, they result in the level of achievement of learning. As is well known, these children cannot afford to buy private assistance in their learning the school is the only help for them. But the schools have their own difficulties, including shortage of teacher, etc. This situation has seemingly induced a strong sense among the parents that the pre-school programme in the ICDS could help the children overcoming many of the difficulties. As, many of the mothers pointed out that the pre-school activities, singing, dancing, recognising colours, etc. would help their children following the lessons to be given in the primary schools in the imminent future

Apart from the enhancement in aspiration for education and the urgency to eradicate widespread hunger and malnutrition the very process of implementation of the programme has the potential, as found in the study, to widen the embedded scope of participation of the local people, particularly the mothers. Almost all the mothers asserted their keenness to join the meetings and taking part in other activities. While this has in offer a much better delivery of the programme through the mothers’ involvement in the activities the scope can extend itself further to enhance the level of awareness on different aspects, particularly health and nutrition. Also the linking of the programme with the self-group through which rice and other ingredients could be procured locally can actually ensure a double benefit: while guaranteeing a good quality of materials it will also give some opportunity for income for the SHGs. In fact, in some parts of the state, namely Bankura, such an initiative proved to be very profiting¹¹.

¹¹ District Panchayat and Rural Development Officer, Bankura (2006)

The amalgamation of the different factors mentioned above has seemingly given much wider and urgent relevance to the activities of the Anganwadi centres in the public eyes. This has, in fact, widened the scope to take up this immensely rewarding challenge of seeing the ICDS programme rightfully implemented.

III

While the scope of the programme is immeasurably wide, there seems to be a good number of challenges that need to be urgently addressed with stronger commitment.

Coverage and allocation

The sharp increases in the number of projects, centres and beneficiaries have not yet reached the desired level to meet the actual requirement for a universal delivery of the programme. According to the government (of West Bengal) statistics, the programme has not yet been able to extend these very basic services to half of the eligible children and mothers.¹² The reason behind the lacking in reaching all the eligible children and mothers, as stated by the authority, is (a) the difficulty in accessing the centres, (b) affluent groups' refusal to receive the benefits, and (c) the difficulty of working mothers to access the centres as their working time (for gainful employment) does not allow them to take their children to the centres.¹³ However, the authority was not quite explicit in recognising the shortages of centres, which causes to the deprivation of the beneficiaries from realising these centrally important services.

Table 2. 0-6 Children Covered by the Selected ICDS Projects#

Districts	ICDS Projects	0-6 Population*	Total no. of Children covered	% of total 0-6 children covered
Jalpaiguri (as on March 2007)	Madarihat	29744	9094	30.57
	Mal	45919	20410	44.45
Dakshin Dinajpur (As on December 2006)	Hilli	12373	3387	27.37
	Balurghat	12452	3258	26.16
	Gangarampur	43411	11352	26.15
Murshidabad (As on December 2006)	Nabagram	33796	16943	50.13
	Bhagawangola - I	30407	19081	62.75
Bankura (As on July 2006)	Bishnupur	22726	8375	36.85
	Khatra - I	14912	9115	61.13
Bardhaman (As on June 2006)	Aushgram - II	19682	5190	26.37
	Asansol (U)	29728	9408	31.65
	Manteswar	33886	17285	51.01
Dakshin 24 Parganas (As on October 2006)	Behala (U)	41971	4524	10.78
	Gosaba	34164	13535	39.62

Computed from Monthly Progress Report (MPR) data provided by district level authorities.

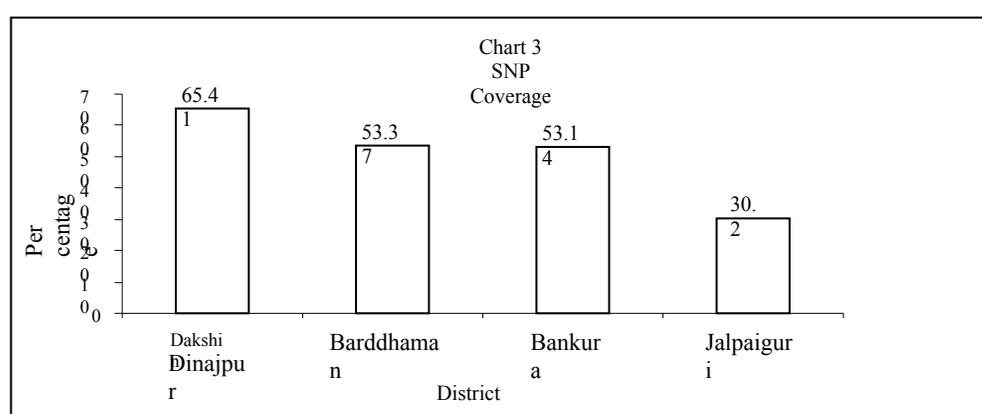
* according to 2001 Census, current estimates were not available.

¹² Annual Report of the Department of Social Welfare 2005-6; Also, Haq (2007)

¹³ Haq (2007)

With the general paucity, the reach of the programme seems to be constrained by some particular regional phenomenon. While the state level figures¹⁴ gives us a sharp inter-district variation of the programme the data provided by the concerned authorities of some of our study districts brings out the intra-district (inter-project) differences in a clearer way (table 2). While in some of the projects the coverage of the eligible children was as high as 63 percent (as in Bhagabangola I of Murshidabad district) in some projects, as in Hili and Gangarampur of Dakshin Dinajpur it was much lower – only about one fourth of the children are provided with the services.

Again the regional contrasts in the implementation of the programme seem to be a major affecting factor for the delivery. The following graph based on the summarised data on SNP available from some of the district level offices clearly brings out this regrettable condition. While the SNP coverage (percent of total covered beneficiaries) in Dakshin Dinajpur, one of the poorest districts in terms of extent of the programme, was as high as 65 percent, it was much less in Jalpaiguri in spite of the district's wider coverage in terms of reaching the total beneficiaries.



In spite of having a long range of components mentioned above, it has generally been found that the SNP has become the central functional intervention of the scheme. Crucial in itself, as a large number of children in the state suffer from gross undernutrition, the SNP programme has seemingly become a mere formality than an effective step to change the situation. The very low priority that the nutritional aspects of the children had received could be seen from the fact that a meagre 80 paise per children was allocated before January 2006. Though the allocation has increased to Rs 2 per child (from 1 January 2006), it is still insufficient to meet the “magic figure” of 300 calorie let alone the actual deficit of 500 as calculated by National Nutrition Bureau¹⁵.

Irregularity and Inadequacy of Supply

When the lower allocation of fund than required makes the operation of the programme somewhat lacklustre there are other stories of far disastrous consequences. One such is the terribly short and irregular supply of the ingredients needed for the SNP.

Table 3 : Project wise requirement and supplied ingredients for feeding in the last year (in Quintal) (2005-6)

Districts	ICDS Projects	Rice	Dal

¹⁴ Annual Report of the Department of Social Welfare 2005-6

¹⁵ Quoted in Working Group On Children Under Six (2007), “Strategies for Children Under Six”, in Economic and Political Weekly, December 29, 2007

		Re qui red	Su ppl ied	D e f i c i t (%)	Re qui red	Su ppl ied	D e f i c i t (%)
Jalpaiguri (as on March 2007)	Madarihat	12 36	72 2	4 1 5 9	51 6	15 2	7 0 5
	Mal	42 31. 44	14 42. 5	6 5 9 1	17 63	43 5.2 5	7 5 3 1
Dakshin Dinajpur (As on Decem ber 2006)	Hilli	81 0	81 0	0	34 0	34 0	0
	Balurghat (U)	63 6	53 9.5	1 5 1 7	26 4	22 0.5	1 6 4 8
	Gangarampur	49 88. 7	20 24	5 9 4 3	20 78. 62	67 4	6 7 5 7
Murshidabad (As on Decem ber 2006)	Nabagram	34 10	92 0	7 3 0 2	14 20	50 0	6 4 7 9
	Bhagawango la – I	94 0	52 0	4 4 6 8	30 7	13 7	5 5 3 7
Bankura (As on July 2006)	Bishnupur	18 00	92 7.5	4 8 4 7	76 0	38 7	4 9 0 8
	Khatra – I	N A	N A	N A	N A	N A	N A
Bardhaman (As on June 2006)	Aushgram – II	86 8.7 2	45 9	4 7 1 6	34 5.8 6	18 2	4 7 3 8
	Asansol (U)	N A	N A	N A	N A	N A	N A
	Manteswar	N A	N A	N A	N A	N A	N A
Dakshin 24 Parganas (As on Octobe r 2006)	Behala (U)	N A	N A	N A	N A	N A	N A
	Gosaba	29 06	26 96	7 2 3	12 11	10 66	1 1 9 7

While there was a general deficit in the supply of ingredients in the studied blocks for which data was available for the year 2005-6, in some of the projects the level of short supply was just dreadful. Data available from the 10 projects show that all but one project has to suffer from the shortages of supply of rice and pulses and the level of deficit was sometime 73 percent in case of rice, and 75 percent in case of pulses.

Poor Physical Infrastructure

The low priority was even conspicuous in the physical condition of the ICDS centres: only 35 percent of the centres studied had their own buildings while the rest were operated from

clubs, *Verandas* of primary schools or Sishu Siksha Kendras, temples or mosques, common places like *atchala* or simply under the trees. No surprise that some of the ICDS centres were named after *amtala* centre (centre beneath the mango tree) or *lichutala* centre (centre beneath the lichhu tree). This too, like other aspects, was seen to be marked with wide regional disparities. While in Manteswar (rural) of Bardhaman 62 percent of the total centres had their own buildings, in Gosaba (rural) of South 24 Parganas the corresponding figure was only 13 percent. In addition to the regional disparities the condition of the buildings, in many cases, was terrible.

The fragility of infrastructure affected the programme in many different ways: pre-schooling, storages of materials, keeping the teaching learning materials and other equipments and papers, and so on. The lack of a separate kitchen shed affected the SNP in many different ways. Non – availability of source of water (for both drinking and other purposes) was another big problem. In some cases AWHs had to carry water from sources 1- 2 kms away from thye centre. Even open pond water was also found to be used - undermining the hygiene issue - in some centres.

The other inadequacies involved weighing machine and other equipments. We have already discussed these at length in section 6.

Poor quality of services

The poor delivery of the services was found to be a major area of concern. Regrettable as it was in most cases the programme was found to be limited to Supplementary nutrition and Pre-primary schooling leaving the other agendas aside. Even these two programmes had apparently failed to gain appreciation from parents. Strangely enough the supplementary nutrition provided to the children in the anganwadis is a standard ever unchanged menu – khichuri (dal and rice boiled together with salt, turmeric and very little oil and some vegetables, the quantity of which varies from time to time and centre to centre). As a disgusted worker pointed out, “even the poorest of poor would revolt against a repetitive menu. But the children are voiceless. They are so hungry that they never complain. But, you know, children whose parent can provide them food at home never take the *khichuri* in the centre.”

The aspiration of the mothers to acquire education by their children was found to be very high (65 percent ranked this component in top of their priorities). They thought that some bit of schooling at the pre-school age would help their children (a) develop a habit of schooling, (b) eradicate the gap of communication with the teachers, (c) help them grasp the lessons in the primary schools when enrolled in the next years. In contrast, however, the performances of the pre-school programme seemed not to satisfy a majority of the mothers. While 29 percent said that there have been no pre-schooling a all, most of the mothers from the group who confirmed the carrying out of pre-schooling did it with some qualifications: in many cases the pre-schooling was only in the name (*kebal name hoy*).

Again, in both the cases of SNP and PSE there have been a large variation between different areas – from quite good to worst, which demands a uniform line of implementation of the programme.

Inadequacy and uneven distribution of Staff

While there was a general shortage of staff noticed across the projects the uneven distribution of the staff had probably made things worse. This clearly led to a poor functioning of the programme as often the workload of the concerned staff become too heavy to deliver.

Huge workload of AWWs

Often the AWWs were found to be perturbed with excessive workload. In addition to the regular activities concerning SNP and pre-primary schooling they needed to maintain a number of registers, carry out home-visits, conduct meetings, helping in health related programmes and so on. The condition complained to be much worse when some more works related to various social programmes, such as, sanitation, SHG, collection of village level data, etc. were also added to the list of the AWWs work schedules. At the time of our field work at Dakkshin Dinajpur the the AWWs were found to be engaged in carrying out the SNP even on Sundays. This was to comply with the Supreme Court's order to provide SNP for 300 days in a year. Clearly, it was the failure of the policy that attracted Supreme Court's attention, but the penalty was eventually imposed on the poorly paid workers who had to sacrifice even the Sundays. The excess workload of the workers, in effect, seemed to have a negative impact on the quality of the services delivered.

Poor coordination between Health and Social welfare department

There seemed to be a lack of coordination between various departments involved in the maternal and child health programmes. While this resulted in an overall fragile delivery of the programme it also caused in distorting the programme in particular areas to a larger extent. Like all other cases the delivery of immunisation and pre and post natal services were also found to be enormously tilted rather than following a systematic pattern. It was seen that the areas where the coordination between the concerned departments could effectively be established the outcome was also quite satisfactory.

Lack of supervision

The status of supervision of the programme has already been discussed earlier (see section 6). While the weakness had its obvious negative influence on part of the workers motivation and delivery the penalties, in fact, were found to be much heavier. Supervision does not mean policing. It is a process that bridges the lower level delivery points with the higher level policy authorities. As was seen in some areas the visits of the supervisors and block level officials had actually made the workers benefited by providing different inputs including motivation and confidence, technical assistance, and so on.

Lack of training

The workers and helpers often complained that they found themselves helpless on many occasions as they had no sufficient training to handle particular situations. The lacking, as reported, concerned various issues – from services (health, nutrition, education, etc.) to administrative affairs (keeping accounts, maintaining registers, etc) and public communications.

Lack of Public Participation

Public participation – a major key to the success of any social programme – was found to be at a very lower level if not completely absent. Basically, the scope of participation of the parents and other locales was found to be very restricted. Only a few of the centres studied were found to have conducted regular meetings. This, in fact, was a locally initiated step. Nevertheless parents and other people showed their keenness to take part in the process of delivery of the services, but so far, there had not been any systematic policy attempt to capitalize this resource.

Unattached officials

Some of the government officials were found not only to be uninvolved but also unenthusiastic and even discouraging in their attitude. A top level official in Kolkata told us that he did not believe in social programmes, which were “detrimental to economic progress of the country.” “Why public money should be spent on feeding the children free of cost?” he asked. One can well imagine about the sort of result the programme could yield under the leadership of such an official. Nevertheless, we came across many dedicated officials and workers during the course of the study. In fact, a section of concerned officials had come ahead to find solutions to the problems attached with the implementation of the ICDS. They had recently organised a seminar¹⁶ on this and the deliberations in the meeting could be proved to be very helpful for further policy modifications.

IV

The scopes of and the challenges before the ICDS programme, we would argue, emerge from the same root. The wide prevalence of hunger, malnutrition and ill health among a very large section of the 0-6 children of West Bengal is directly connected with their social and economic background. As seen above, nearly two third of the 0-6 children come from the traditionally disadvantaged groups –perennial victims of hunger, ill health and illiteracy. The situation not only strengthens the relevance of the ICDS programme but also creates immeasurable scope for a uniform and equitable delivery of the programme based on the ground level requirements. Nevertheless, the very nature of the West Bengal society where the line of division between the poor and rich, powerful and powerless, advantaged and disadvantaged tends to spin around a main divisive line on the basis of social identity causes to the emergence of the formidable challenges for the implementation of the programme. The scope of the programme in making a sea change in the status of the disadvantaged sections - not just the children but also the whole population, as Amartya Sen has clearly shown¹⁷ - is repeatedly challenged by the opposition of the power centres of West Bengal, either through sophisticated silence or through explicit hostility. The issues of the children under six have seldom received any attention in the legislative, media, mainstream politics and academia. The functioning of the implementing agencies headed by the officials representing the ‘high class people’ tend to follow a pathologically lethargic line that does not only show their unsympathetic attitude towards the people but also a serious derailment from the duties for which they are paid for.

The challenges are formidable, but not insurmountable. The experience of the cooked Mid-day Meal programme reminds us the similar challenges: silence, hostility,

¹⁶ “Emerging Challenges before ICDS on the Onset of the 11th Five Year Plan” organised by the Association of the Officers of the West Bengal Junior Social Welfare Service (AOWBJSWS) on 16 June 2007 at *Abanindra Sabha Griha*, Kolkata.

¹⁷ Sen A (2004), “men and Women”, in *The Argumentative Indian*, and in many of his writings.

insensitivity among sections of officials, and so on. But the demand of the situation added with larger and informed public action supplied the essential energy to combat the difficulties. Indeed, there is a lot to learn from the process of implementation of the cooked MDM programme: involving the lower level of agencies – panchayats, parents, and other local communities, not only in ground level implementation but also in developing policies. To ensure a universal and equitable delivery of the ICDS programme, the urgency of which is immeasurable, there is no other way but building up a larger collaboration of all possible agencies.¹⁸

¹⁸ We have some recent reports from North Bengal where members of larger civil society – women’s groups, other activists, etc, - have forced the authorities to ensure the implementation of the ICDS in a much-improved way. It is in Mal block of Jalpaiguri district, where the performance of the programme was very poor even a year’s back. But, as a result of public grumbling the project has improved itself to elevate it to the top of the best performing ones in West Bengal. (Interview with Swadhikar, Jalpaiguri and Mal).