

PROBLEMS OF ANGANWADI WORKERS ON VARIOUS GOVERNMENT SCHEME

A special reference In Uttar Kannada District

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Abstract: Main purpose of this paper is to study the problems of Anganwadi Workers on various Government Scheme. Method use in this paper Anganwadi centres were selected by stratified sampling technique. Out of 678 Anganwadi centre select 150 in survey of four taluka out of eleven taluka in Uttar Kannada District. The function of this paper is interviewing Anganwadi workers for their literacy status, years of experience, their knowledge about the services rendered by them and problems faced by them. Result in this paper is most of AWWs were from the group of between 20-25 years; half of them were matriculate and 52.34% workers had an experience of more than 5 yrs. Majority of AWWs had a knowledge assessment score of above 55.46%. They had best knowledge about nutrition and health education. 20.31% of the AWWs workers were complained of inadequate honorarium, lack of help from community and other problems were infrastructure related supply and more work overload and record maintenance. Conclusions in this paper is Majority of AWWs were beyond 35 years of age, matriculate, experienced, having more than knowledge related to their job etc. Complaints mentioned by them were honorarium related and more workload less salary etc.

Keywords: Government Schemes, Problems of Anganwadi Workers

Introduction:

Anganwadi is a type of rural mother and child care centre in India. They were started by the Indian government in 1975 as part of the Integrated Child Development Services program to combat child hunger and malnutrition. Anganwadi means "courtyard shelter" in Indian languages. A typical Anganwadi centre provides basic health care in Indian villages. It is a part of the Indian public health care system. Basic health care activities include contraceptive counseling and supply, nutrition education and supplementation, as well as pre-school activities. The centres may be used as depots for oral rehydration salts, basic medicines and contraceptives. As many as 13.3 lakh (a lakh is 100,000) Anganwadi and mini-Anganwadi centres (AWCs/mini-AWCs) are operational out of 13.7 lakh sanctioned AWCs/mini-AWCs, as of 31 January 2013. These centres provide supplementary nutrition, non-formal pre-school education, nutrition and health education, immunization, health check-up and referral services of which later three services are provided in convergence with public health systems.

The responsibilities of Anganwadi workers (AWW) are extremely significant. They ensure antenatal and postnatal care for pregnant women and immediate diagnosis and care for new born children and nursing mothers. They administer the immunisation of all children below the age of 6 years. In addition, they supervise the distribution of supplementary nutrition to children below the age of 6 as well as pregnant and nursing women. Monitoring regular health and medical check-ups for women and children is one of their key responsibilities. The Anganwadi workers often takes on the role of a teacher and aims to provide pre-school education to children between the age of 3 and 5 year.

The Ministry of Women and Child Development has laid down guidelines for the responsibilities of Anganwadi workers (AWW). These include showing community support and active participation in executing this programme, to conduct regular quick surveys of all families, organize pre-school activities, provide health and nutrition education to families especially pregnant women on how to breastfeed, etc., motivating families to adopt family planning, educating parents about child growth and development, assist in the implementation and execution of Kishori Shakti Yojana (KSY) to educate teenage girls and parents by organizing social awareness programmes etc., identify disabilities in children, and so on. One Mukhya Sevika supervises every 40 to 65 Anganwadi workers. They provide on-the-job training.

In many ways, an Anganwadi worker is better equipped than a physician in reaching out to the rural population. Since the worker lives with the people, she is in a better position to identify the cause of health problems and hence counter them. She has a very good insight of the health status in her region. Secondly, though Anganwadi workers are not as skilled or qualified as professionals they have better social skills thus making it easier to interact with the people. Moreover, since these workers are from the village, they are trusted which makes it easier for them to help the people.

Officers and their helpers, who are typically women from poor families, staff Anganwadis. The workers do not have permanent jobs with comprehensive retirement benefits like other government staff. Worker protests (by the All India Anganwadi Workers Federation) and public debates on this topic are ongoing. There are periodic reports of corruption and crimes against women in some Anganwadi centers. There are legal and societal issues when Anganwadi-serviced children fall sick or die.

In announcing the 2008-2009 budgets, Indian Finance Minister P Chidambaram stated that salaries would be increased for Anganwadi workers to Rs 1500 per month and helpers to Rs 750 per month. In March 2008, there was debate about whether packaged foods (such as biscuits) should become part of the food served. Detractors, including Nobel Prize winner Amartya Sen, disagreed saying it will become the only food consumed by the children. Options for increasing partnership with the private sector are continuing.

The Integrated Child Development Services (India) Scheme did not have provision for construction of AWC buildings as this was envisaged to be provided by the community except for the North Eastern States. For them, financial support was provided for construction of AWC buildings since 2001-02 at a unit cost of Rs.175,000.

As part of the strengthening and restructuring the ICDS Scheme, the government approved a provision of construction of 200,000 Anganwadi centre buildings at a cost of Rs. 450,000 per unit during XII Plan period in a phased manner with cost sharing ratio of 75:25 between centre and states (other than the NER, where it will be at 90:10).

In a desperate attempt to improve the poor state of governance of the Anganwadi scheme in his budget speech for the financial year 2011-12, Finance Minister Pranab Mukherjee increased the salary for Anganwadi workers to Rs 3000 per month and helpers to Rs 1500 per month — about one tenth of the salary of government office assistant.

Last but not the least, Anganwadi workers are well aware of the ways of the people, are comfortable with the language, know the rural folk personally etc. This makes it very easy for them to figure out the problems being faced by the people and ensure that they are solved.

Objective of this study:

- The main purpose of this study is problems of Anganwadi Workers on various Government Scheme in Uttar Kannada District.
- To know the educational qualification, job responsibilities, community participation, and coordination with the superiors of AWWs.

Methodology of this study:

The present study at the Uttar Kannada District in problems of AAWs. There are 150 AWWs functioning in the urban field practice area of Uttar Kannada District beneficiaries of these AWCs constituted the study population. Total 150 beneficiaries were selected randomly from the registers maintained in the AWWs; this included ten participants from each AWWs: mothers of two children aged between 7 months to 3 years, mothers of two children aged between 3 to 6 years, two adolescent girls, two pregnant women and two lactating mothers. The selected beneficiaries were interviewed using a Field Survey Questionnaire designed by Right to Food Campaign 8; necessary modifications were made after conducting a pilot study. The study was conducted from January to December 2017. . For the operational aspect of the study, the city is geographically divided into four sectors i.e. sectors A, B, C and D. The Anganwadi centres had been numbered from 1 to 150. Each sector on an average consisted of 37.5 Anganwadi centres. Maximum numbers of workers, 48 were in the age group of 20-25 yrs and 43 each in the age group of 15-19 years. Lowest number i.e., 10 belonged to the age group of 31-35 yrs. Almost half of AWWs were matriculate. Only 3.12% AWWs were post- graduate. Majority 52.34% of AWWs had an experience of more than 5yrs. It was observed that amongst the different services provided by AWWs, they had the best knowledge about work.

RESULT:

Total 150 participants were interviewed in this study. About 59.37% of the respondents were Hindus. About 49.21% of the respondents had above Poverty Line ration card and 90% belonged to classes II and III as per Social Classification.

Table 1
Details of knowledge of AWWs regarding different services provided

SL.no	Type of service	Total no. of respondent	Correct respondent	Total no. of Percentage
1	Nutrition and health education	41	37	90.24
2	Referral services	36	29	80.55
3	Immunization	23	19	82.60
4	Prophylaxis against blindness and anemia	17	14	82.35
5	Growth monitoring	13	10	76.92
6	Supplementary nutrition	20	19	95.00
	Total	150	128	85.33

(Source: Survey of Anganwadi workers)

Table 2
Ariganwadi worker's assessment score related to her experience

Experience in years	No. of AWWs	Percentages of the experience assessment score
< 5yrs	67	52.34
5-10 yrs	48	37.5
> 10 yrs	13	10.15
Total	128	100

(Source: Survey of Anganwadi workers)

Notes:

Highest percentage of Anganwadi workers is correct respondent on Nutrition and health education and Experience more than 5 years.

Table 3
Anganwadi worker's assessment score related to her educational

Educational	No. of AWWs	Percentages of the educational assessment score
Matriculate	71	55.46
PUC	54	42.18
Graduate	09	7.03
Post-graduate	04	3.12
Total	128	100

(Source: Survey of Anganwadi workers)

Table 4
Variables AAWs works in Uttar Kannada District

Sl no.	Variables	No. of AWWs	Percentages
1	Mothers of Children Aged 7 Months to 3 Years	52	40.62
2	Mothers of Children Aged 3 to 6 Years	47	36.71
3	Adolescent Girls	26	20.31
4	Pregnant Women	08	6.25
5	Lactating Women	05	3.90
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 5
Age (in years) of AAWs works in Uttar Kannada District

Sl no.	Age (in years)	No. of AWWs	Percentages
1	15 – 19	43	33.59
2	20 – 25	48	37.5
3	26 – 30	37	28.90
4	31 – 35	10	7.81
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 6
Religion of AAWs works in Uttar Kannada District

Sl no.	Religion	No. of AWWs	Percentages
1	Hindu	76	59.37
2	Muslim	43	33.59
3	Christian	09	7.03
4	Sikh	-	-
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 7
Occupation of AAWs works in Uttar Kannada District

Sl.No.	Occupation	No. of AWWs	Percentages
1	Housewife	69	53.90
2	Self employed	31	24.21
3	Employed	28	21.87
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 8
Type of family of AAWs works in Uttar Kannada District

Sl.No.	Type of family	No. of AWWs	Percentages
1	Nuclear	61	47.65
2	Joint	67	52.35
	Total	128	100

(Source: Survey of Anganwadi workers)

Notes:

Highest percentage of Anganwadi workers is responses on Matriculate, Mothers of Children Aged 7 Months to 3 Years, 20 – 25, Hindu, Housewife.

Table 9
Socioeconomic status of AAWs works in Uttar Kannada District

Sl.No.	Socioeconomic status	No. of AWWs	Percentages
1	I	12	9.37
2	II	49	38.28
3	III	67	52.34
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 10
Type of Ration card of AAWs works in Uttar Kannada District

Sl.No.	Type of Ration card	No. of AAWs	Percentages
1	Below Poverty Line	58	45.31
2	Above Poverty Line	63	49.21
3	Do not have	07	5.46
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 11
Regularity of food of AAWs works in Uttar Kannada District

Sl.No.	Regularity of food	No. of AAWs	Percentages
1	Very Regular	86	67.18
2	Not very regular	42	32.81
3	Irregular	-	-
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 12
Quantity of food of AAWs works in Uttar Kannada District

Sl.No.	Quantity of food	No. of AAWs	Percentages
1	Adequate	120	93.75
2	Inadequate	08	6.25
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 13
Quality satisfaction of AAWs works in Uttar Kannada District

Sl.No.	Quality satisfaction	No. of AAWs	Percentages
1	Satisfied	41	32.03
2	Not satisfied	59	46.09
3	Cannot say	28	21.87
	Total	128	100

(Source: Survey of Anganwadi workers)

Table 14
Problems faced by Anganwadi workers

Sr. no.	Type of problem	No. of AAWs with the problem	Percentage of AAWs with the problem
1	Inadequate honorarium	26	20.31
2	Excessive record maintenance	27	21.10
3	Work overload	21	16.40
4	Logistic supply related	16	12.50
5	Infrastructure related	19	14.84
6	Inadequate supervision	11	8.59
7	Lack of help from community	08	6.25
	Total	128	100

(Source: Survey of Anganwadi workers)

Notes:

Highest percentage of Anganwadi workers is responses on III Socioeconomic Status, Above Poverty Line, Very Regular of food, Adequate Quantity of food, Not satisfied, Inadequate honorarium and Excessive record maintenance.

Discussion:

As per the findings of our study, 55.46 % of AWWs have a knowledge assessment score of above 50% as per the questionnaire provided. Maximum no. of workers 48 (35%) were in the age group of 20-25 yrs.

Found that out 37% of the Anganwadi workers belonged to the age group 20-25 years. In our study the problems felt by AWWs were mainly "inadequate honorarium (20.31%) and excessive record maintenance. Problems mentioned in other: studies are also mainly related to inadequate honorarium and Excessive record maintenance.

Conclusion:

Most of the AWWs in Uttar Kannada District were from age group 20-25 yrs, matriculate, experienced, having knowledge of more than 50% in their daily functions at AWCs. The knowledge increases with experience as an AWW, but has no relation with their educational qualification. Problems felt by them were mainly due to inadequate honorarium and excess workload. So, timely increments in honorarium should be considered.

In our study, 55.46% of AWWs were matriculate, which is consistent with studies. Maximum no. of workers (52.34%) had an experience of more than 5 years. Researchers have reported that more than 50 % of AWWs had worked in the 5 years.

As per the findings of our study, AWWs have best knowledge about the component of nutrition and health education (90.24%) while least about supplementary nutrition (95%). More than 85.33% workers correctly knew about the stages related.

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