

CHAPTER-14

IMPORTANCE OF ANGANWADI WORKERS AND CHALLENGES IN THEIR WORK

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ABSTRACT

Childhood marks the formative years of a person's life, laying the groundwork for their future development. It is during this critical period that children's physical, mental, psychological, and moral faculties undergo significant growth. Without proper guidance and direction, these tender individuals risk stunted progress. Thus, ensuring their holistic development becomes a matter of utmost importance. Recognizing this need, the government initiated the Integrated Child Development Services (ICDS) program, which operates through Anganwadi centers. The primary objective of this scheme is to foster the comprehensive development of children under the age of six. Moreover, it extends support and guidance to mothers, pregnant women, and adolescent girls, emphasizing the significance of their own health and that of their children. Anganwadi workers play a pivotal role in this endeavor, tasked with fulfilling various duties toward these beneficiaries and addressing the challenges encountered in their work.

Keywords: *Children, Anganwadi workers, ICDS, WHO.*

1. INTRODUCTION

Six years, of the early life of a child are more important. This is the period when his/her health physical as well as mental, interests, point of view are developed. This age is insecure as well. In India most of the children were mal-nutrient. They have to suffer many obstacles in their life.

Even their struggle for existence has begun from the time when they are in the womb of their mothers. Even today most of the delivery of pregnant women is done by the local untrained nurses. All the things happened in the hand of Almighty God. Due to this problem, the Indian Government started ICDS (Integrated Child Development Services) program. ICDS is a program of the central government which is run by the State governments.

However, when we talk about child care, teenage girls, pregnant women and lactating women cannot be left aside. Because they are the root of the birth of a child. So their health and nutrition are equally important. This is the main reason that our government added these women to this scheme. Their health and nutrition are also the targets of this program. ICDS program was started in 2 October 1975 in India. 'Anganwadi' (the courtyard shelter) is a scheme under ICDS Program. These Anganwadi centres provide rural health care services. Basic health care services with nutrition education, daycare for children and Preschool activities are the main part of it.

On 31st January, 2013 out of 13.7 Lakh, almost 13.3 Lakh Anganwadi and Mini Anganwadi centres are operational. These Anganwadi centres provide additional nutrition, non-formal pre-school education, diet, and fitness education, vaccination and routine health check-ups (Gupta et al., 2013). While the position of 31 March 2021 is that 13.87 Lakh Anganwadi and mini-Anganwadi centres (AWCs/mini-AWCs) are operational out of 13.99 Lakh sanctioned AWCs/AWC/mini-AWCs.

2. OBJECTIVE

Six declared objectives of this program (Patil 2013; Desai et al., 2012):

- To improve the health and nutrition level of children below six years of age.
- To lay the foundation of the physical, moral, mental and social level of a child.
- To bring coordination with different policies, of improving the all-round development of children of different departments.
- To decrease the death rate, illness, malnutrition and leaving the schooling.
- To educate teenage girls, pregnant women and lactating women about their health and their children's health.

3. CHALLENGES IN SERVICES

Anganwadi programmes are critical components of India's healthcare and child development strategy. These frontline workers play an essential role in providing mother and child health care at the community level. Their endeavours, however, are not without substantial hurdles.

i. Insufficient Resources

The recurrent issue of limited resources is at the heart of many issues in Anganwadi services. In its Annual Report (2019), India's Ministry of Women and Child Development emphasizes the critical need for expanded infrastructure investment.⁴ The study emphasizes the scarcity of fundamental resources, such as better-equipped centres, higher sanitation, and the accessibility of necessary instructional tools. Such resource limits impede the successful operation of Anganwadi centres. This makes it difficult to provide critical services. The capacity to handle the different needs of women and children is jeopardised in the absence of adequate infrastructure, creating a cycle of unsatisfactory service provision (Kaur et al., 2016).

⁴ Ministry of Women and Child Development. (2019). Annual Report.

ii. The Awareness Gap: Insufficient Training and Skill Development

Anganwadi workers have difficulties as a consequence of limited training and skill development, as they frequently have to deal with a varied range of tasks. Organisations such as UNICEF⁵ and the World Health Organisation (WHO)⁶ have performed research that emphasizes the critical significance of continual training in improving the efficacy of Anganwadi personnel. However, many frontline staff have knowledge and skill gaps, which affect the quality of services offered.

UNICEF and WHO emphasized the importance of continuing and thorough training programmes to overcome these gaps. Inadequate training impacts not just the workers' capacity to provide services, but also the wider effect of Anganwadi programmes on mother and child health.

iii. Limited Community Engagement

Community participation is critical to the success of Anganwadi programmes, but cultural norms, a lack of understanding, and reluctance to change often obstruct these efforts. The need of culturally sensitive engagement tactics is highlighted by the National Family Health Survey (NFHS-4, 2017) and community-based research programmes.⁷ To bridge the gap between Anganwadi staff and communities, specific strategies and public awareness campaigns are required. References to NFHS-4 and community-based research underline the importance of culturally sensitive approaches. Establishing confidence while promoting community engagement are complex processes that need a thorough awareness of local circumstances and sensitivities.

iv. Heavy Workload with Less Remuneration

Anganwadi centres provide people a platform to be connected with the society. These centres provide nutrient meals to children, their mothers, pregnant women and teenager girls time to time. Anganwadi centres provide people a platform to be connected with the society. Thus, the parents and husbands free and feel satisfied that Anganwadi worker is there to take care of their children as well as their mothers. Parents feel free when their children go to anganwadi centres and play there with their age group children. At that time, they learn how to adjust with the different kind of children. These anganwadi workers give the access to the government programs to the people of rural and urban areas.

⁵ UNICEF. (2018). Anganwadi Workers: Trained and Empowered.

⁶ World Health Organization. (2017). Strengthening quality midwifery education for Universal Health Coverage 2030.

⁷ International Institute for Population Sciences (IIPS) and ICF. (2017). National family health survey (NFHS-4)

The pressure of severe workloads along with inadequate compensation is a serious issue for Anganwadi staff. The evaluation of the research conducted by the National Institute of Public Cooperation and Child Development (2017) throws light on this subject, emphasizing the imbalance between the difficult nature of their labour and the financial recompense received.⁸ According to the study, this mismatch might lead to unhappiness among Anganwadi personnel, thereby affecting the quality and consistency of service delivery. The remuneration for their services is less than even the nominal wages.

When employees believe they are undervalued, it weakens their inspiration and commitment to their jobs. Addressing the problem of pay is critical not just for the workers' well-being, but also for the effectiveness of Anganwadi programmes in efficiently addressing underprivileged people.

v. Lack of Knowledge About Modern Technology

Anganwadi personnel frequently confront obstacles owing to restricted access to digital tools and platforms in an era where technology plays a critical role. In its Digital India programme (2015), India's Ministry of Electronics and Information Technology emphasizes the necessity of bridging the digital gap.⁹ In March 2021, Smart phones were provided to Anganwadi workers. It was said if there would be any fault in feeding the proper information of their centres then it could result in food and their salary suspension. Most of the workers don't know how to operate these phones. So, a lack of training and access prevents Anganwadi personnel from effectively integrating technology into their workflow.

References to government programmes emphasize the need of focused efforts to teach digital literacy and enable access to technical resources. Overcoming technical constraints is critical for increasing the efficiency of data administration, monitoring, and communication within Anganwadi services.

vi. Less Cooperation of Primary School Staff Members, Pradhans of Village, Officials of the Department

In some areas where Anganwadi centres have not been provided their own infrastructure (room, toilets etc.), they (Anganwadi workers) have been instructed to

⁸ National Institute of Public Cooperation and Child Development. (2017). Evaluation Study of ICDS.

⁹ Ministry of Electronics and Information Technology, Government of India. (2015). Digital India: A Program to Transform India into a Knowledge Economy.

run these centres in primary schools or anywhere else where the activities could run smoothly. Staff members of those schools where the centres are running and Pradhans of the village sometimes ill-treated these Anganwadi workers. They don't cooperate with them at all.

Even some officials at the district or block level threatened to snatch their service if they don't fulfil their demands. Some officials demand a fixed amount of money in every monthly meeting of Anganwadi members. Sometimes they forced these workers to sell a fixed number of bags of items like Sattu (powder form of wheat, grain, barley, sugar etc.). This powder is for distribution among women and children of the concerned villages. (This perception is based on the discussion with Anganwadi workers)

vii. Nature of the Work is Permanent not Temporary

Anganwadi workers and their assistants are busy making child nutrition easy. they are the leaders of the government's scheme. Their job is temporary while seeing the value and nature of their services, it is permanent in itself. The nature of their work is permanent not the part-time. Their work is of more comprehensive nature like to identify the beneficiaries, to cook and serve the nutrient food to the beneficiaries, to organize pre-schools for the children who are from 3 to 6 years of age group, to survey the homes for different kind of information etc.

4. SUPREME COURT'S OBSERVATION

In the case of **Maniben Maganbhai Bhariya vs. District Development Officer, Dahod & Others** (Civil appeal No.3153 of 2022), Honorable Supreme court decided that Payment of Gratuity Act,1972 will be applied on Anganwadi workers and their Assistant Anganwadi workers. The court observed that although these workers play very important role for the society but the payment in lieu of their services is very low. The court declared that now it is high time when the centre as well as the state governments should take this issue seriously. The establishment of the post of Anganwadi is indeed for the fulfilment of the objective of Article 47 in the constitution. This is for the accomplishment of state's duties. This is the right time to feel the importance of this post. Anganwadi workers provide social services to society at very nominal payment. The court gave the directions to the government to take proper actions for the upliftment of these workers.

5. CONCLUSION

This is to conclude that at national and international level programs have been launched. These programs focus on the all-round development of children (below 6 years of age), their mothers, pregnant women, teenager girls. And this task has been assigned to Anganwadi workers in rural and urban areas. These Anganwadi workers play different roles like of a mother when they provide nutrient meal to children and their mother as well as to girls in their teenage. They are teachers when they teach the children to read and recognize different words and things. They are doctor when they provide medical assistance to them. They are social workers when they provide knowledge of different government programs to people. But this has come in our knowledge that the people are not aware about their pious duty. Even they don't support the Anganwadi workers. On the other hand, Anganwadi workers are facing many social and financial challenges in performing their duties. The government should take proper steps to provide job security and financial security to these Anganwadi workers so that they could perform their duties with diligently and courageously. The Government should raise their budget for providing proper aids to them. There must be some more programs or advertisements from the side of Government s and NGO's to make people aware towards the healthy development of their family.

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