



INTEGRATED CHILD DEVELOPMENT SERVICES

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ICDS



Integrated Child Development Services

- Launched on 2nd October 1975.
- Blueprint prepared by Ministry of social welfare.
- One of the world's largest and most unique programmes for early childhood development.
- Implemented through Public health infrastructure and comes under purview of Ministry of Women and Child development

- India's response to the challenge of
 - Providing pre-school education on one hand.
 - Breaking the vicious cycle of malnutrition, morbidity, reduced learning capacity and mortality, on the other.

Purpose of Initiation

1. Routine MCH services not reaching target Population.
2. Nutritional component not covered by Health services.
3. Need for community participation.



Every fifth young child in the world lives in India

Every second young child in India is malnourished

Three out of four young children in India are anaemic

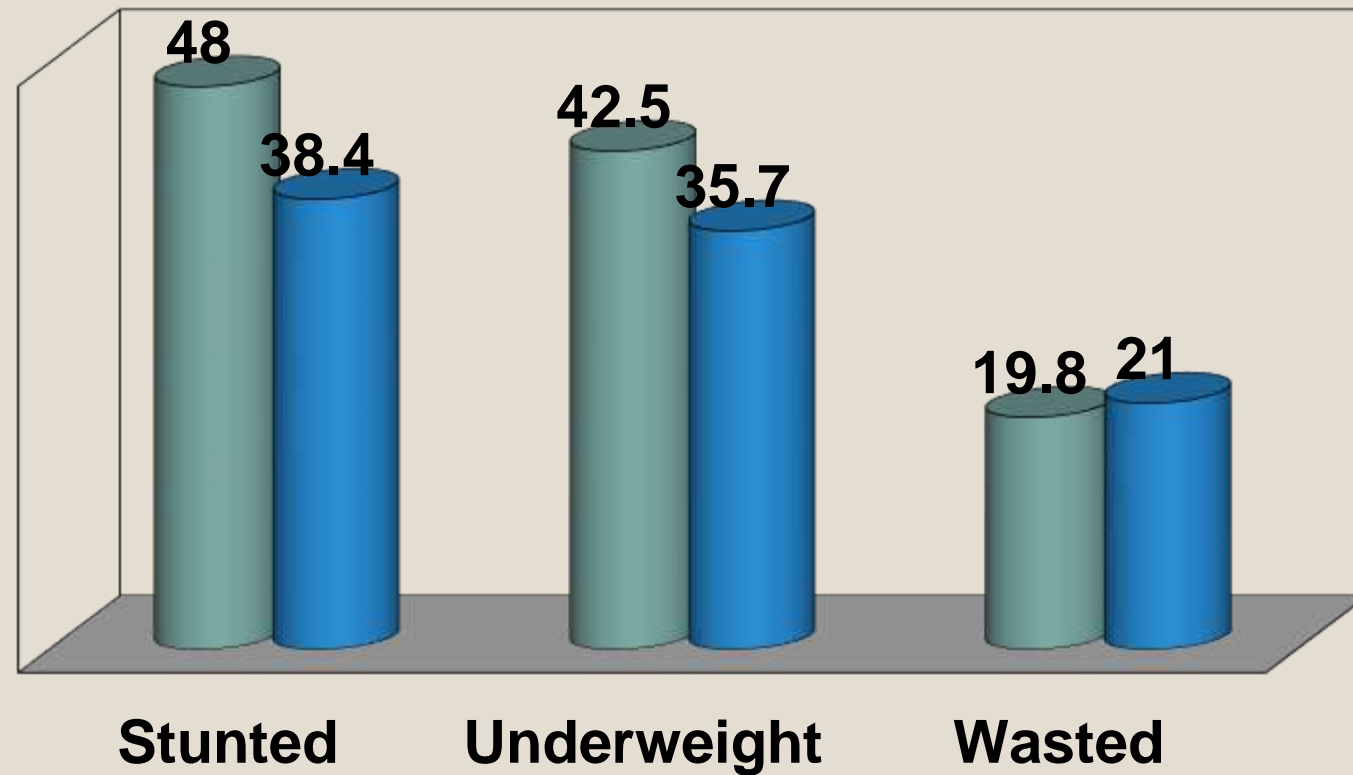
Every second newborn in India is at risk of reduced learning capacity due to iodine deficiency

Malnutrition limits development potential and active learning capacity of the child

Under nutrition in Children under Age 3

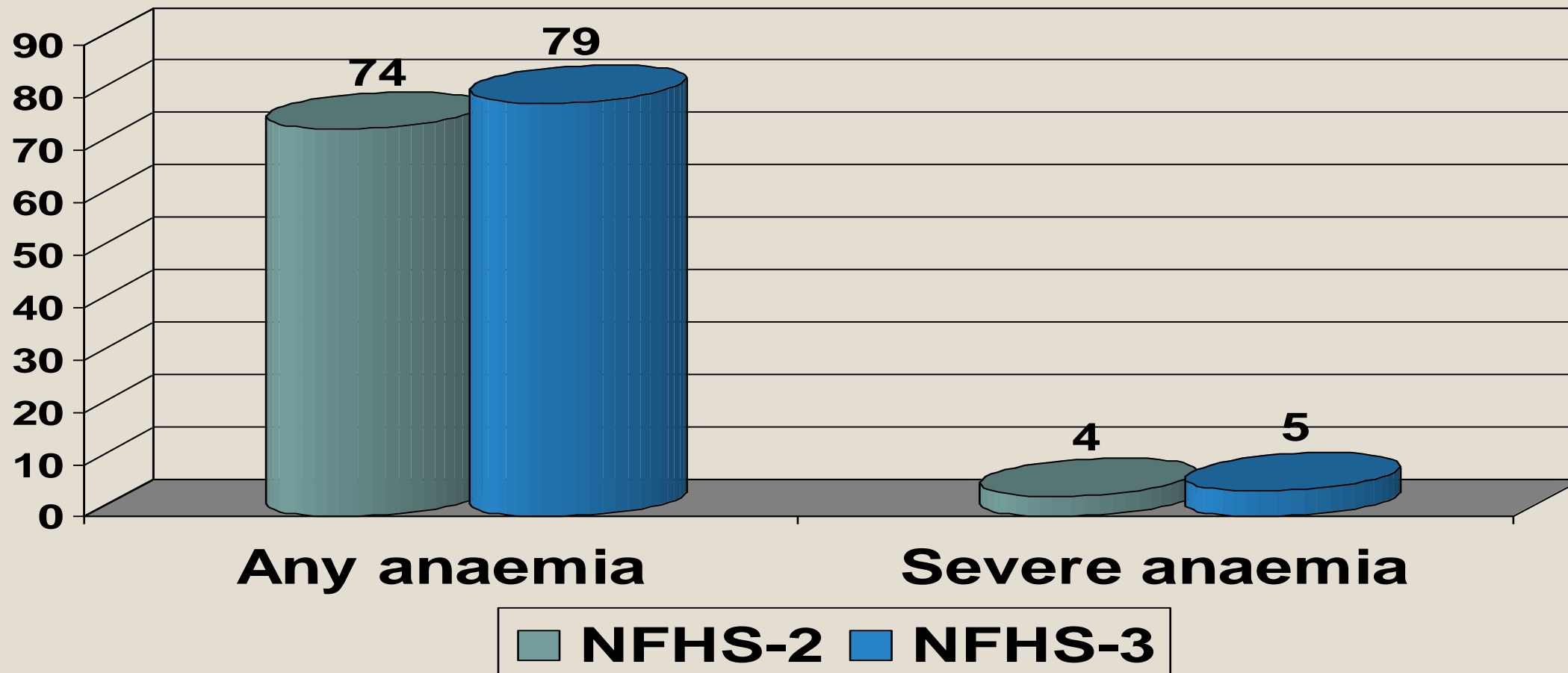
Chart Title

■ NFHS-3 ■ NFHS-4



SOURCE: NFHS-3 2005-6

Anemia among Children Age 6-35 Months



SOURCE; NFHS -3 2005-6

Objectives

1. To improve the nutritional and health status of children in the age-group 0-6 years.
2. To lay the foundation for proper psychological, physical and social development of the child.
3. To reduce the incidence of mortality, morbidity, malnutrition and school dropout.

4. To achieve effective co-ordination of policy and implementation amongst the various departments to promote child development.

5. 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.

Beneficiaries

- Children of 0 to 6 years age group
- Pregnant mothers
- Lactating mothers (during first 6 months)
- Other mothers of reproductive age group (15 to 49 years)
- Adolescent girls(11-18 years)



**Children under
1 year**



1-3 years



3-6 years



**Health
Check-ups**



Immunization



**Growth Promotion and
Supplementary Feeding**



Referral Services



**Early Childhood Care
& Pre-school Education**



**Nutrition & Health
Education**

**Adolescent
Girls - Kishori
Shakti Yojna
(11-18 years)**



**Pregnant
Women**



**Nursing
Mothers**



**All Women
(15-45 years)**



Services under ICDS

1. Supplementary nutrition,
2. Immunization
3. Health check-up
4. Referral services
5. Pre-school non-formal education and
6. Nutrition & health education.

THE TARGET GROUPS

BENEFICIARY

- Pregnant women
- Nursing Mothers
- Children less than 3 years
- Children between 3-6 years
- Adolescent girls(11-18 years)

SERVICES

- Health check-ups, TT, supplementary nutrition, health education.
- Health check-us supplementary nutrition, health education
- supplementary nutrition, health check-ups, immunization, referral services
- supplementary nutrition, health check-ups, immunization, referral services, non formal education
- supplementary nutrition, health education

Anganwadi :

- A village courtyard.
- All the services are provided in this anganwadi.
- Providing and ensuring a natural, joyful and stimulating environment



Contd.

- Its program for the three-to six years old children is directed towards providing and ensuring a natural, joyful and stimulating environment, with emphasis on necessary inputs for optimal growth and development.
- The early learning component--- a significant input for providing a sound foundation for cumulative lifelong learning and development.
- It contributes to the universalization of primary education, by providing to the child the necessary preparation for primary schooling.
- Offers substitute care to younger siblings, thus freeing the older ones – especially girls – to attend school.

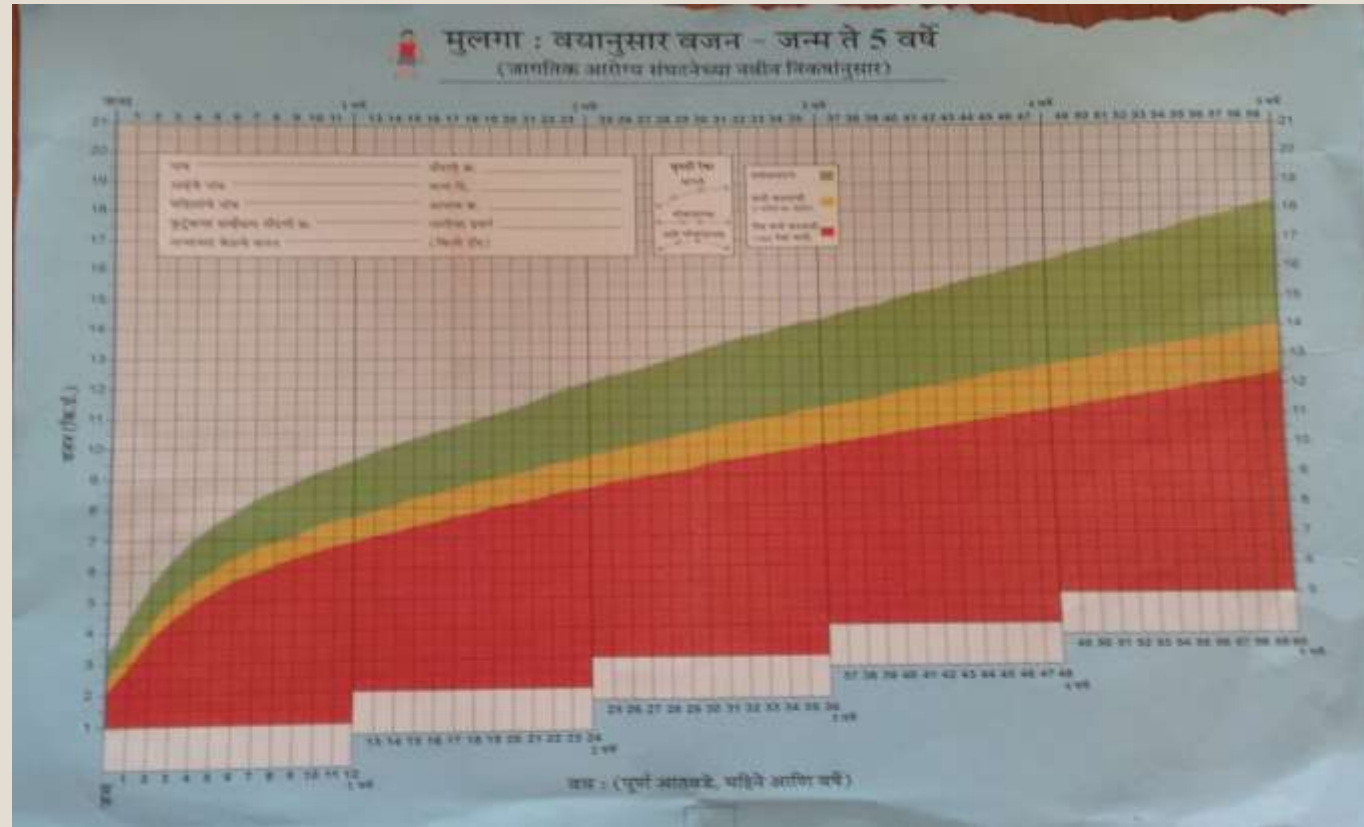
1. Supplementary Nutrition

- This includes supplementary feeding and growth monitoring.
- Growth Monitoring and nutrition surveillance are two important activities that are undertaken.
 - Children <3 years of age are weighed once a month.
 - children 3-6 years of age are weighed quarterly.
- They avail of supplementary feeding support for 300 days in a year.

Supplementary Nutrition per day

Beneficiary	Pre-revised		Revised w.e.f. Feb. 2009	
	Calories (KCal)	Protein (G)	Calories (KCal)	Protein (Gm)
Children (6-72 months)	300	8-10	500	12-15
Severely malnourished children (6-72 months)	600	20	800	20-25
Pregnant & Lactating	500	15-20	600	18-20

Growth Chart



Uses of growth chart

- For growth monitoring.
- The growth is plotted on the growth chart and any faltering in the growth is detected and suitable action initiated.
- Diagnostic tool : Identifying high risk children
- Planning and policy making : By grading malnutrition
- Educational tool : Mother can be educated to take proper care of her own child.

2.Immunization

- These services are provided by Health Department
- Protection of children from VPDs Poliomylitis, Diphtheria, Pertusis, Tetanus, Tuberculosis , Hepatitis B ,HiB and Measles.
- Immunization of pregnant women against Tetanus also reduces maternal and neonatal mortality



3. Health Checkup

- Record of weight and height of children at periodical intervals
- Watch over milestones
- Immunization
- General check up for detection of disease
- Treatment of diseases like diarrhea, ARI
- Deworming
- Prophylaxis against vitamin A deficiency and anemia
- Referral of serious cases

- Now under RBSK, Rashtriya Bal Swasthya Karyakram.
- Special dedicated teams consisting of Medical Officers (M & F), ANM, Pharmacist
- 3 to 4 such teams per block depending on population of block.
- This is done once in 6 months in a year.
- Detection of 4 D i.e.
 - Defects at birth,
 - Deficiencies,
 - Childhood diseases,
 - Developmental delays and disabilities.
- Treatment of minor ailments

4. Referral Services

- For sick or malnourished children
- For children with 4 Ds
- Who are in need of prompt medical attention and services of specialist doctors.
- Referred to the Primary Health Centre , District Hospitals.
- DEIC – District Early Intervention Center

5. Non Formal Pre School Education

- PSE is considered the backbone of the ICDS programme.
- This is also the most joyful play-way daily activity, visibly sustained for three hours a day. It brings and keeps young children at the anganwadi centre.



6. Nutrition and Health Education

- Key element of the programme.
- Low cost interventions
- Use of locally available foods
- This forms part of BCC (Behaviour Change Communication) strategy



Adolescent girls scheme (Kishori shakti yojna)

- General health check ups
- Immunization
- Treatment of minor ailments
- Deworming
- Prophylactic measures against anemia, IDD, vitamin deficiency
- Referral

Organization and Structure of ICDS Project

- One **Anganwadi** for 400-800 population in rural/urban area and for 300-800 population in tribal area. One **mini anganwadi** for 150-400 and 150-300 population respectively. Anganwadi on demand for 40 children.
- Each project consists of **3 levels** of staff members.
- Anganwadi worker at Anganwadi level.
- Mukhya Sevika as supervisor.
- Child Development Project Officer (CDPO) at block level.
- Each project consists of approx. 100 Anganwadis.

Integrated Child Development Scheme (ICDS) in India (IMPACT)

- Increase in birth weight
- Decrease in malnutrition
- Increased immunisation coverage
- Decreased infant and child mortality

- At the end of 2018, 7,076 ICDS projects and 13.63 lakh Anganwadi centres are functional in the country
- 751 lakh children and 167.2 lakh pregnant and lactating women are getting benefits of the scheme



International Assistance

- United Nations International Children' Emergency Fund (UNICEF)
- Cooperative for Assistance and Relief Everywhere (CARE)
- World Food Programme (WFP)
- United States Agency for International Development (USAID)

ICDS and SDG

Govt. Programs	Contributing to SDG Goal	Concerned Departments
NREGS, PDS etc ICDS,	1- No Poverty 2-Zero hunger 5- Promote Gender equity and empower women 3- Reduce child mortality 6-Clean water and sanitation	WCD, Food & civil supplies Corp.

○THANK YOU!!

