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RESEARCH ARTICLE

IMPACT OF ANGANWADI SERVICES ON RURAL DEVELOPEMENT: A STUDY ON THE ANGANWADI CENTRES OF DURG DISTRICT, CHHATTISGARH.

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Manuscript Info	Abstract
Manuscript History:	An Anganwadi worker is an important link between the local residents of a
Received: 12 April 2016 Final Accepted: 19 May 2016 Published Online: June 2016	particular area and the government. She plays a very important role in the development of a particular area the Anganwadi worker acts as a link between government and the local residents. There are six basic services rendered from an Anganwadi by an Anganwadi worker and the helper.
Key words: Anganwadi, Anganwadi workers, Rural development.	Through this paper, we have tried to find out the impact of each of these services on the Anganwadi worker. We have studied the area under consideration i.e. Durg district of Chhattisgarh for over one year and found out the results that follow.

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India is the world's second largest populated country. After sixty years of independence, India still has a large number of people residing in slums, villages and are deprived from basic amenities. Time and again the government of the country has taken several steps to help the poor, the needy and the helpless. The Integrated Child Development Scheme is one of such initiatives taken by the government.

ICDS is a comprehensive scheme designed and developed to ensure the development of children, nursing and pregnant women. It is one of the largest child and mother care schemes in the world and is in operation for the past four decades. At the grass root level the scheme is operated through an Anganwadi. The Anganwadi scheme in India started in the year 1975. In rural and urban parts of our country to cater the health and nutritional needs of those who are deprived of it.

The rate of rural development in our country is low because the rural India is suffering from three basic problems of malnutrition, high mortality rate and poverty. In order to counter the health and mortality issues gripping the rural parts of our country, a need of medical and health care experts was felt by the government.

An integrated and comprehensive early childhood service is regarded as the investment in future economic and social progress of both urban and rural areas. An for this purpose the Anganwadi scheme was launched. It reached Madhya Pradesh and parts of Chhattisgarh right from its Inception.

Rural development:-

The rate of rural development in India is lesser than urban development. By rural development here, we mean the actions which are mainly taken for socio economic development of rural development of our country. The rural economy in India is mainly agriculture based and is of tremendous importance due to it has vital supply and demand in industries. In rural India, inhabits 70% of population. Rural economy has been playing an important role towards the overall economic growth and social development of India. Rural development is also characterised by its emphasis on locally produced economic development strategies. The rural development actions are mainly and mostly due to social and economic development of rural areas.

The rural development programmes are usually top down from local or regional authorities, NGOs and other government bodies, but local population can also bring about changes or at least initiate changes for development to improve rural lives with participation of rural people themselves so as to meet the needs of the local areas.

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Durg district in Chhattisgarh was a part of those early birds to get the services of Anganwadi since its inception.

Anganwadis:-

In our country the basic reason for slow development of rural areas as compared to the urban areas is basically due to the problems of malnutrition, high mortality rate and poverty. In order to cater to these needs and have an equal rate of development a need for a health programme that could reach all villages was felt. An integrated and comprehensive early childhood service is regarded as the investment in future economic and social progress of both urban and rural areas.

Accordingly a scheme for integrated child care services was worked out for the implementation in all parts of the country. The Integrated Child Care service was then launched in India in the year 1975 with 33 projects in community development blocks and 4891 Anganwadi centres. On pilot basis keeping in view the need to address health, nutrition and child care services in children and future mothers. This ICDS scheme integrates several aspects of early childhood and maternal development.

The integrated child development scheme is are a collaborative effort of the central and the state government. It is implemented through platform of an Anganwadi . In rural areas an "angan" is a place where people socialise .A typical anganwadi centres is a kind of playschool cum health centre. It may also be known as a place where the people get their medicines and ORS and contraceptives and they are informed about the government schemes which are of benefit to them.

An Anganwadi is a part of the community health programme. In all these years, it has emerged as one of the most effective strategies to address for the shortage of health services in isolated areas. The basic aim of ICDS scheme to open up Anganwadi centres was to respond to the problems of prolonged huger and early deaths (annie liu).

The government of India had approved one lakh anganwadi centers till 2010. Through an anganwadi system the country is trying to meet its goal of enhanced health health facalities that are affordable and easily accessible by local population. The basic aim of an anganwadi is to provide each rural resident the basic health services which he deserves .

An Anganwadi is taken care of by an anganwadi worker and a helper. An Anganwadi worker is the newest addition to India's frontline health worker embedded with state health services with a focus on child care and nutrition services. (kyte). She is considered a part of the informal sector. She is a frontline health worker usually high school passed given four months training in health care and nutrition. They are grass root functionaries to implement the ICDS schemes in remote areas. They work on an average of four to five hours a day on voluntary basis

Durg district:- (Chhattisgarh)

Chhattisgarh state was formed in the year 2000. Nearly 74% of its population resides in rual areas. It now has 27 districts out of which Durg is the second most populous after Rajanandgaon. We shall exclusively see the Anganwadis of Durg, District of Chhattisgarh State.

Since Durg district is close to the capital the infrastructural and health facilities are relatively better than the interior districts of the state. The district health programmes and the ICDS scheme runs into two parts. rural and urban. (panchayat).

Talking of the Anganwadi scheme, there are two hundred eighteen (218) in Durg rural area and two hundred twenty two (222) in Durg urban District.

Since we are trying to find the impact of Anganwadi services on rural development . we shall take only the Anganwadi centres of Durg district, rural

Services rendered by anganwadis: - (www)

The various services rendered by an Anganwadi include.

- Nutrition and health care
- * Regular health check ups.
- Immunisation
- * referral services,
- pre-school education
- **Supplementary nutrition.**

All these services are taken care of by an Anganwadi Helper and Anganwadi worker.

We shall now see each of these services in detail.

- Nutrition and health care—under this service, the Anganwadi worker and helper survey their area every three months to find out the children below six years of age and pregnant ladies and feeding mothers. They are then identified registered in the Anganwadi centres, after which they are provided with Vitamin A capsules, Folic Acid and Iron Capsules and Supplementary nutrition food.
- Regular health Check-ups: This includes health care of children less than six years of age, expectant mothers and nursing mothers. The various health services provided to them by Anganwadi workers, Anganwadi Helpers and Primary Health Centre (PHC) staff, include regular health check-ups, recording of weight, immunization records, management of malnutrition.
- ❖ Immunisation it is the most important service rendered by an Anganwadi worker in which she takes care of the immunisation schedule of the children under six years of age and the expecting ladies so that they can be protected from six deadly diseases.
- Referral services- under this kind of service the Anganwadi worker refers the cases of severe malnutrition and irregular health checkups to the Primary Health centres or district Hospitals.
- Pre-School Education- Another important service rendered by the Anganwadi worker is to give pre-school education to the children under six, inculcating the good habits in them.
- Supplementary Nutrition- An Anganwadi is a place where the registered children, the Pregnant ladies and lactating mothers are provided with ready to eat food which acts as a source of supplementary nutrition.

Impact of the anganwadi services:-

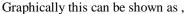
To see the impact of these services on the district we conducted a survey on random basis of ten villages of Durg District, Chhattisgarh. Ten people from each village were interviewed and the results are as under.

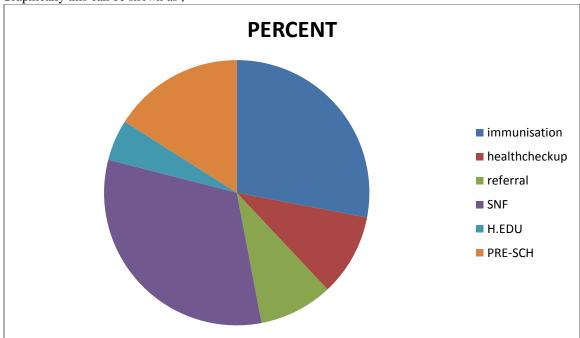
sno	Name of the Village	Number of respondents
1	Nagpura	10
2	Borai	10
3	Malood	10
4	Bailoudi	10
5	Bhedsar	10
6	Anjora	10
7	Dhaba	10
8	Dandesara	10
9	Ganiyari	10
10	Amlidih	10
	Total Respondents	100

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The percentage	WICE	distribilition	of the	Services	was as under
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Sno	Services used	Percentage
1	Immunisation	28
2	Health Checkups	10
3	Referral services	9
4	Supplementary nutrition	32
5	Health education	5
6	Pre-schools.	16

Source- field survey.





SNF- Supplementary Nutrition food; H.EDU-Health Education; PRE-SCH- pre school.

Through this we can easily see that people are largely dependent for Supplementary Nutrition food and Immunisation on the Anganwadis.

To see the impact we applied chi-squared test on our data. This was done to see whether the Anganwadi services have a significant or an insignificant impact on the people for their development.

We applied the formula, $X^2 = \sum (O-E)^2$

Where O is the observed frequency and E is the expected frequency.

The highest percentage and frequency of immunisation shows us that this is the most important service. And is directly proportional to the significance of impact.

Another attribute that was taken was referral services, its frequency and percentage were among the least. On applying chi-squared test,

	Immunisation	Referral services
Significant	22.06	3.93
Insignificant	33.39	6.06

Chi- squared – 0.0315.

This shows us that the Immunisation services have a Significant impact on social development. When Children are immunised, they contribute to better and Healthy citizens, when the expected mothers are immunised with tetanus doses on time it reduces the Child Mortality rate and Maternal Mortality rate. Thereby leading to social development.

It can therefore be seen that the various services which are rendered through an Anganwadi have a Significant impact on rural development; specially in a state like Chhattisgarh where the percentage of rural population is more than the urban population.

The Anganwadi services not only act as a crèche but also as place for getting Supplementary nutritious food and knowing about various government services.

Conclusion:-

We can now conclude that the Anganwadi services have a Significant impact on the rural population. The best part of it is that An Anganwadi is opened on all days and the Anganwadi worker and helper are volunteers among the rural population. So people can utilise their services very easily. The package of six composite services helps in bringing a healthier and cleaner and better environment in the rural part of this state.

Ancknowledgement:-

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