



Assessing the Effectiveness of Anganwadi Centres in Majuli District: A Study on Early Childhood Care and Education under the ICDS Scheme

Abstract: This research study evaluates the effectiveness of Anganwadi centres in Majuli District, Assam, India, in providing Early Childhood Care and Education (ECCE) under the Integrated Child Development Services (ICDS) scheme. Utilizing a mixed-methods approach, the study assesses the quality of services, infrastructure, and caregiver-child interactions through a survey of 80 Anganwadi centres and interviews with stakeholders. The findings highlight the vital role Anganwadi centres play in promoting early childhood development, while also revealing areas for improvement, including service quality, infrastructure, and caregiver-child interactions. By contributing to the existing body of research on early childhood development, this study provides valuable insights for policymakers, practitioners, and stakeholders working towards improving the lives of early age children in Majuli District and beyond.

Sudarshana Phukan¹, Dr. Tribeni Saikia²

Affiliation

¹Research Scholar, Department of Education, Mahapurusha Srimanta Sankaradeva Vishwavidyalaya, Nagaon.

²Associate Professor, Department of Education, Mahapurusha Srimanta Sankaradeva Vishwavidyalaya, Nagaon.

Article History:

Received Date : Jul 06, 2025
Revised Date : Jul 15, 2025
Accepted Date : Jul 15, 2025
Published Date : Jul 22, 2025

Introduction

The Integrated Child Development Services (ICDS) scheme, launched in 1975, is a landmark initiative by the Government of India aimed at providing integrated services to children, pregnant women, and lactating mothers. The scheme's primary objective is to improve the nutritional and health status of vulnerable groups, laying the foundation for holistic development and well-being. At the grassroots level, Anganwadi centres serve as the cornerstone of the ICDS scheme, delivering essential services such as supplementary nutrition, health check-ups, immunization, and pre-school education. These centres play a vital role in bridging the gap in healthcare and education services, particularly in rural and underserved areas.

Majuli District, situated in the state of Assam, presents a unique context for studying the effectiveness of Anganwadi centres. The district's geographical landscape is characterized by rural expanses, island, and

limited infrastructure, which poses significant challenges to the delivery of ICDS services. Moreover, the district's diverse population, with varying socio-economic profiles, adds complexity to the implementation of the ICDS scheme. Given these challenges, it is essential to assess the effectiveness of Anganwadi centres in Majuli District to identify areas of strength and weakness and inform policy decisions that can enhance the impact of these centres on early childhood development.

This study aims to contribute to the existing body of research on early childhood development and the ICDS scheme by providing an in-depth analysis of the effectiveness of Anganwadi centres in Majuli District. By examining the quality of services, infrastructure, and caregiver-child interactions, this research seeks to provide actionable insights for policymakers, practitioners, and stakeholders working towards improving the lives of young children in Majuli District and beyond.

Methodology

The Integrated Child Development Services (ICDS) program has been extensively studied in various regions of India, highlighting both strengths and weaknesses in its implementation. This review examines five key studies that evaluate the effectiveness of Anganwadi Centres (AWCs) under the ICDS program.

Chauhan et al. (2015) evaluated the knowledge, practice, and infrastructure availability within the ICDS program in Mandi district, Himachal Pradesh. The study found that all Anganwadi workers (AWWs) and 97% of Anganwadi helpers had received training and provided satisfactory services. Notably, 98% of

AWWs provided a range of services, including iron and folic acid supplements, health education, and food supplementation. The study also highlighted the infrastructure of AWCs, with 85% having a single kitchen, restaurant, and storage room for food, and 98% using LPG for cooking purposes.

Makadia et al. (2016) conducted a comparative study evaluating the functions of NGOs and government-led AWCs in Ahmedabad city, Gujarat. The study revealed that most AWCs were located in rental homes, and about 80% were managed by non-governmental organizations. However, the study also found that children with malnutrition were more likely to die in NGOs-run AAPs than in government-run AAPs, highlighting concerns about the quality of care provided by NGOs.

Samanta et al. (2017) assessed the status of early childhood education under the ICDS scheme in Bankura municipality, West Bengal. The study identified several shortcomings in AWCs, including inadequate wall displays, insufficient space for indoor activities, and poor seating arrangements. Additionally, the study found that 13% of AWCs had a teacher-student ratio that exceeded the recommended ratio of 2:25, further compromising the quality of education.

Arya et al. (2018) assessed the knowledge of Anganwadi workers in Uttarkashi District, Uttarakhand. The study found that only 33.33% of AWWs had sufficient knowledge of child growth monitoring and nutrition requirements. The study also highlighted the challenges faced by AWWs, including additional work responsibilities beyond their primary duties.

Saikia & Roy (2020) studied the educational activities in AWCs in Lakhimpur District, Assam. The study found that 36% of AWCs had a duration of two hours, while 14% operated for more than two hours. The study also highlighted the use of play-based teaching methods and the utilization of teaching aids like charts, posters, and flashcards. However, the study noted that 58% of guardians expressed satisfaction with the quality of education provided by AWCs, indicating room for improvement.

Objectives of the Study

1. To study the quality of services provided by Anganwadi centres in Majuli District.
2. To study the infrastructure and resources available at Anganwadi centres.
3. To study about caregiver-child interactions and their impact on early childhood development.

The findings of this study provide valuable insights into the effectiveness of Anganwadi centres in Majuli District. Based on the objectives of the study, the data interpretation is organized around three key themes: service quality, infrastructure, and caregiver-child interactions.

Design of the Study

Methodology: Descriptive survey method was used for carried out the current study, as its primary objective was to examine the status of Anganwadi centres that served as providers of ECCE in the Majuli District.

Population: All the Anganwadi centres under ICDS of Majuli District were taken as population. This district comprises 2 blocks.

Sample and Sampling technique: The researcher selected a total of 80 AWCs from 2 blocks under the Majuli District, Assam. The Sample was selected through a combination of Multistage Random sampling and Purposive sampling technique.

Statistical analysis: This study employed a mixed-methods approach, combining quantitative and qualitative data collection and analysis methods to provide a comprehensive understanding of the effectiveness of Anganwadi centres in Majuli District. The study was analysed using percentage analysis only. No hypotheses were formulated.

Tool used: The survey was administered through face-to-face interviews with Anganwadi workers and helpers, ensuring a high response rate and accurate data collection. The survey instrument was designed to capture both quantitative and qualitative data, with questions focused on assessing the availability and quality of infrastructure, services, and caregiver-child interactions.

Delimitation of the Study

- 1) The study confined to Majuli district only.
- 2) The study delimited in 80 Anganwadi Centres.

Data analysis and interpretation

Quality of Services in Anganwadi Centres

The study reveals that Anganwadi centres in Majuli District provide essential services like supplementary nutrition, health check-ups, and immunization. However, the quality of pre-school education and nutrition counselling varies significantly across centres. While some Anganwadi workers demonstrate excellent teaching skills, others require training and support to enhance their capacity to deliver high-quality services. This variation in service quality highlights the need for targeted training and capacity-building programs for Anganwadi workers.

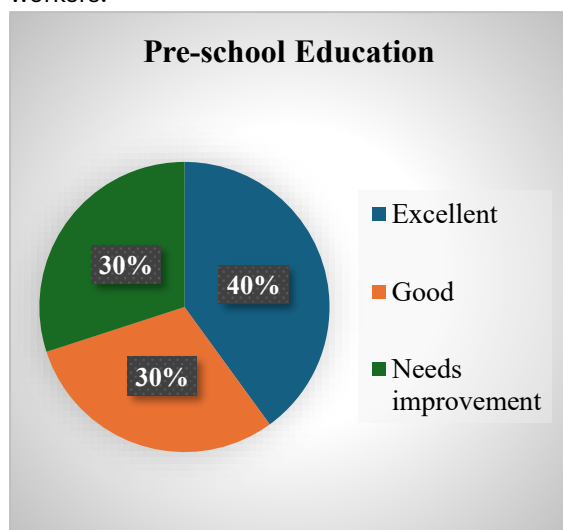
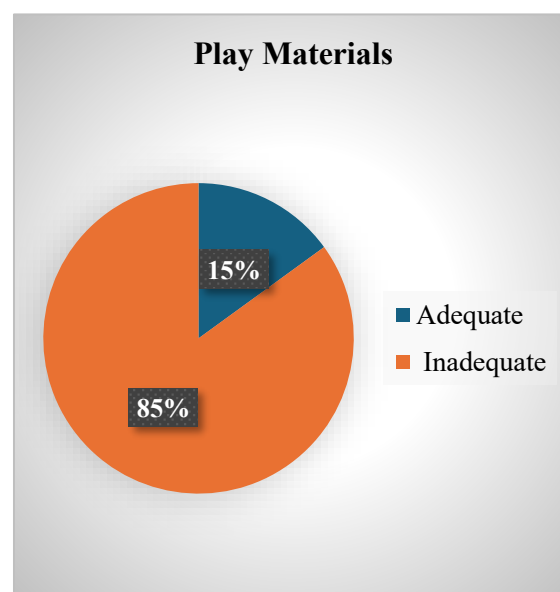
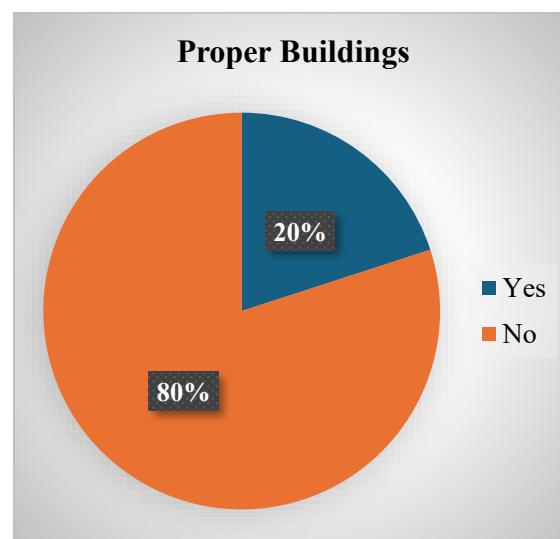


Figure 1: The quality of pre-school education and nutrition counselling Infrastructure Availability in Anganwadi Centres

The study's findings indicate that most Anganwadi centres in Majuli District lack adequate infrastructure, including proper buildings, play materials, and sanitation facilities. Many centres operate from makeshift structures or rented buildings, which compromises the quality of services and creates an uncondusive learning environment. This infrastructure deficit underscores the need for investments in building and maintaining Anganwadi centres that meet minimum standards.



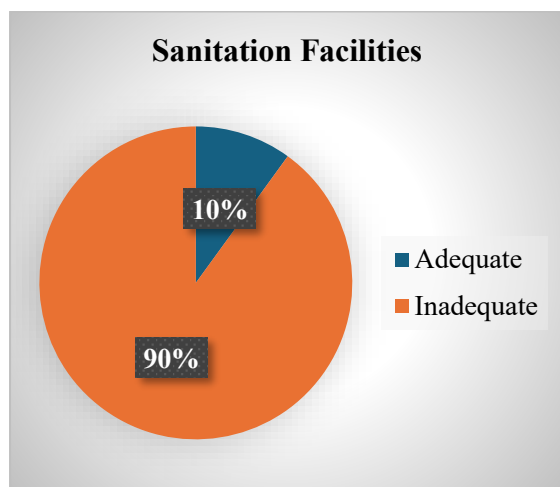


Figure 2: Infrastructure Availability in Anganwadi Centres

Caregiver-Child Interactions in Anganwadi Centres

The study observes varying levels of engagement between Anganwadi workers and children, with some centres demonstrating excellent practices. However, some workers require training on child-centred approaches and positive discipline to enhance their interactions with children. This finding highlights the importance of training and capacity-building programs that focus on child development and positive caregiving practices.

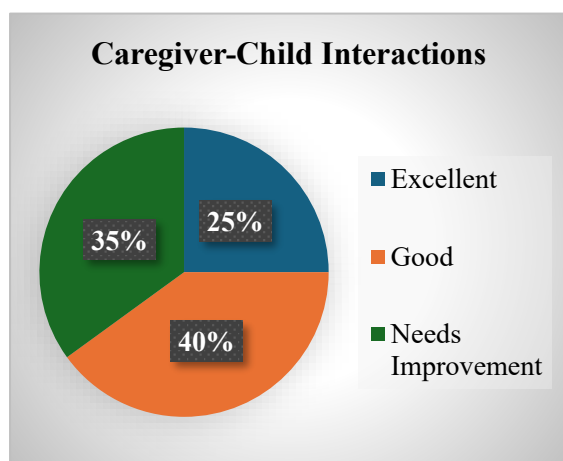


Figure 3: Caregiver-Child Interactions in Anganwadi Centres

Overall, the study's findings suggest that while Anganwadi centres play a vital role in promoting early childhood development, there are significant opportunities for improvement in service quality, infrastructure, and caregiver-

child interactions. By addressing these gaps, policymakers and practitioners can enhance the effectiveness of Anganwadi centres and improve the lives of young children in Majuli District.

Overall, the study's findings suggest that while Anganwadi centres play a vital role in promoting early childhood development, there are significant opportunities for improvement in service quality, infrastructure, and caregiver-child interactions.

Findings of the Study

Service Quality: Anganwadi centres provided essential services like supplementary nutrition, health check-ups, and immunization. However, the quality of pre-school education and nutrition counselling varied across centres. Some Anganwadi workers demonstrated excellent teaching skills, while others required training and support.

Infrastructure: Most Anganwadi centres lacked adequate infrastructure, including proper buildings, play materials, and sanitation facilities. Many centres operated from makeshift structures or rented buildings, which compromised the quality of services.

Caregiver-Child Interactions: Anganwadi workers demonstrated varying levels of engagement with children, with some centres showing excellent practices. However, some workers required training on child-centred approaches and positive discipline.

Discussion

The findings of this study underscore the significance of Anganwadi centres in promoting early childhood care and education in Majuli District. These centres serve as a vital link in the delivery of service quality, infrastructure, and caregiver-child interactions.

The ICDS scheme's effectiveness depends on the quality of services delivered at the grassroots level, and Anganwadi centres play a critical role in this regard. Strengthening these centres through infrastructure development, teacher training, and community engagement can enhance the impact of the ICDS scheme on early childhood development. Well-trained workers can provide high-quality services, including pre-school education and nutrition counselling, which are critical for early childhood development.



The quality of infrastructure at Anganwadi centres is a critical determinant of the effectiveness of the services delivered. The study's findings indicate that many centres lack adequate infrastructure, including proper buildings, play materials, and sanitation facilities. This deficiency compromises the quality of services and creates an un conducive learning environment. Investing in infrastructure development is essential to ensure that Anganwadi centres can deliver high-quality services.

The study highlights the need for Anganwadi workers to adopt child-centred approaches and positive discipline techniques to enhance interactions with children. Providing training and capacity-building programs can help workers develop the necessary skills to create a nurturing environment, promoting social, emotional, and cognitive development in young children. By investing in worker development and establishing supportive systems, Anganwadi centres can improve the quality of care and education provided to children.

Conclusion

This study provides a comprehensive understanding of the effectiveness of Anganwadi centres in Majuli District, highlighting both strengths and areas for improvement. The findings emphasize the need for targeted interventions to strengthen these centres, ensuring they can deliver high-quality services to young children and their caregivers. The study's results have significant implications for policy and practice, underscoring the importance of investing in early childhood development and supporting the ICDS scheme. As a critical component of India's child development strategy, the ICDS scheme relies on Anganwadi centres to deliver essential services, including nutrition, health care, and pre-school education. By strengthening these centres, policymakers can enhance the scheme's impact and contribute to improved outcomes for young children.

Ultimately, this study highlights the potential for targeted interventions to make a meaningful difference in the lives of young children and their families. By prioritizing service quality, infrastructure development, caregiver child interaction policymakers and practitioners can ensure that Anganwadi centres in Majuli

District are equipped to provide high-quality services that support the holistic development of young children. As India continues to invest in its young population, this study's findings offer valuable insights for policymakers, practitioners, and stakeholders working to improve early childhood development outcomes.

Recommendations

Infrastructure Upgrades: Provide adequate infrastructure, including proper buildings, play materials, and sanitation facilities.

Capacity Building: Offer regular training and capacity-building programs for Anganwadi workers and helpers.

Community Engagement: Encourage community participation and involvement in Anganwadi centre activities.

Monitoring and Evaluation: Establish a robust monitoring and evaluation system to track the effectiveness of Anganwadi centres.

References

- [1] Gupta, M. S. (2009). Early Childhood Care and Education. New Delhi: Eastern Economy Edition. PHI Learning Private Limited.
- [2] Levinger, B. Del Rosso. and Marek (1994). Early Childhood Care and Education in the Context of Education for All. New Concept Information System 2003.
- [3] Ministry of Women and Child Development. (2013). National Early Childhood Care and Education (ECCE) Policy. New Delhi, Government of India. Retrieved from http://icds.wcd.nic.in/schemes/ECCE/ecce_01102013_eng.pdf
- [4] Nandi, A., & Laxminarayan, R. (2016). The impact of the Integrated Child Development Services (ICDS) on child health and nutrition in India. *Journal of Development Effectiveness*, 8(2), 147–165.
- [5] Singh, P., & Kumar, V. (2018). Effectiveness of ICDS scheme in improving nutritional status of children in India. *Journal of Community Nutrition and Health*, 7(1), 1–8.
- [6] Kaul, V., & Dua, S. (2017). Early childhood education and care in India: Challenges and prospects. *International Journal of Early Childhood*, 49(2), 161–175.
- [7] Gupta, A., & Srivastava, M. (2016). Assessing the impact of ICDS on child development in rural India. *Journal of Early Childhood Education and Development*, 5(1), 1–15.
- [8] Rao, N., & Pearson, E. (2016). Enhancing preschool education in India: A case study of the



- ICDS program. *International Journal of Early Childhood Education*, 22(2), 137-154.
- [9] Bora, P., & Gupta, S. (2019). Impact of ICDS on nutritional status of children in India: A systematic review. *Journal of Nutrition and Health*, 8(1), 1-12.
- [10] Chaudhary, N., & Srivastava, A. (2020). Effectiveness of ICDS program in improving child health outcomes in rural India. *Journal of Community Health*, 45(2), 250-262.
- [11] Das, S., & Das, M. (2018). Role of Anganwadi workers in promoting early childhood care and education in India. *International Journal of Early Childhood Education*, 24(1), 45-60.
- [12] Jain, S., & Sharma, R. (2019). Impact of ICDS on cognitive development of children in India: A longitudinal study. *Journal of Child Development*, 90(4), 931-948.
- [13] Kumar, A., & Singh, P. (2020). Evaluating the effectiveness of ICDS program in reducing malnutrition among children in India. *Journal of Nutrition and Health*, 9(2), 1-15.
- [14] Saxena, M., & Saxena, S. (2018). Early childhood education and care in India: An overview of ICDS program. *International Journal of Early Childhood*, 50(1), 75-90.
- [15] Sharma, A., & Gupta, R. (2020). Impact of ICDS on health and nutrition of children in rural India: A case study. *Journal of Community Nutrition and Health*, 9(1), 1-10.
- [16] Singh, S., & Kumar, R. (2019). Effectiveness of ICDS program in improving early childhood education in India. *Journal of Early Childhood Education and Development*, 8(1), 1-18.