

# **Integrated Child Development in MP**

## **Pilot Study**

### **Process Documentation Report II**

**January to March 2006**

**Educational Resource Unit**

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## **Integrated Child Development in MP - Pilot Study**

### **Process Documentation Report II**

#### **January to March 2006**

This is the second process documentation of the first phase of the Integrated Child Development Pilot project in Bajna Block of Ratlam District, Madhya Pradesh. The report takes into account the progress of the pilot through the first quarter of 2006, January to March, which was reviewed from 30<sup>th</sup> March to 1<sup>st</sup> April.

On the first day of the visit, a review meeting was organized which solicited the presence of the District Magistrate and team members from the World Bank, Indicus Analytics, Naandi Foundation and ERU. During the meeting findings of the baseline survey, the resource mapping (which was part of the activities of the previous quarter) and the progress of the project in general were presented. On the following two days the teams visited the field area in Bajna, meeting with people and interacting with the Naandi Team.<sup>1</sup>

### **I. Gathering Momentum**

At the outset it is worth mentioning that the pilot has shown tremendous progress since the last quarter. Keeping in mind the staff and office situation at Bajna in December 2005, the decision to take the project coverage to the entire block i.e. 221 villages from the originally identified 60 villages, seemed a tall order. However, since then the field programme has expanded and matured considerably which speaks of the commitment to take the project forward despite the initial setbacks.<sup>2</sup> This also led to the need for expansion of the Naandi team to 3 PAs (Programme Assistants) and 20 Jan Mitras (JMs-facilitators) who are local youth (men and women). It has picked up many of the loose threads in terms of personnel, programme strategies and activities Briefly, the milestones achieved can be seen below.

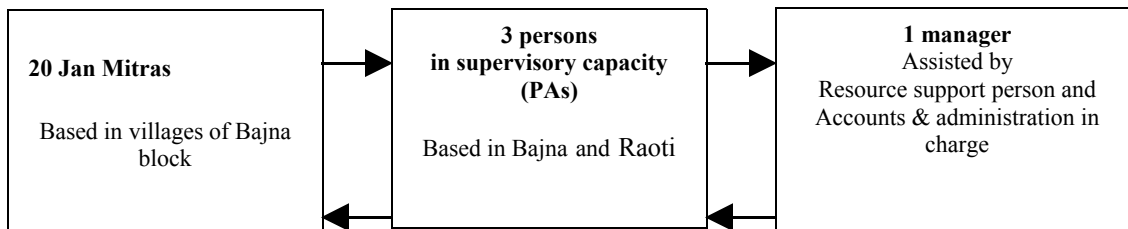
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<sup>1</sup> Refer Annexure I for Details of the field visits

<sup>2</sup> Refer Annexure II for Update Timeline

<b>Activities Planned/Suggested in the previous Quarter</b>	<b>Present Status</b>
<ul style="list-style-type: none"> <li>• Orientation of Block level functionaries</li> <li>• Survey &amp; resource mapping of project area</li> <li>• Collation of resource mapping data</li> </ul>	<ul style="list-style-type: none"> <li>• Achieved</li> <li>• Achieved in 221 villages (with some modifications in the original formats)</li> <li>• Achieved for all the villages being translated into Hindi</li> <li>• Community meetings initiated in all villages</li> <li>• A team of 3 PAs and 20 Jan Mitras identified and in place (except for 2 JMs)</li> </ul>
<ul style="list-style-type: none"> <li>• Community meetings</li> <li>• Identification and selection of village level facilitators and Programme Assistants (PAs)</li> </ul>	<ul style="list-style-type: none"> <li>• A 3- day orientation for the facilitators conducted.</li> <li>• Workshops for village level service providers ANMs, AWWs &amp; teachers of 60 villages</li> </ul>
<ul style="list-style-type: none"> <li>• Training of the field team –PAs and facilitators (Jan Mitras)</li> <li>• Meetings with all existing committees / Panchayat</li> <li>• Community mobilisation strategy revisited and refined</li> <li>• Information dissemination and awareness generation of service providers about ICD Project</li> </ul>	<ul style="list-style-type: none"> <li>• Formation of Sandesh Vahini Dals for awareness &amp; community mobilisation</li> <li>• Workshop organised for block level functionaries of the three government departments of Education, Health and WCD.</li> </ul>
<ul style="list-style-type: none"> <li>• Specific sensitization and inputs to AWWs</li> </ul>	<ul style="list-style-type: none"> <li>• Orientation programme organised for two groups of AWWs (with around 60 AWWs in each group)</li> </ul>
<ul style="list-style-type: none"> <li>• Start up processes for constituting VRGs</li> </ul>	<ul style="list-style-type: none"> <li>• VRGs constituted in 128 villages. Scheduled to be oriented in April</li> </ul>

As per suggestions made during the previous quarter the entire field team is now based in Bajna. The team includes the cluster level Programme Assistants followed by the Jan Mitras (Facilitators). There is also a state manager, one person in charge of administration and accounts, and one person for resource support in place now, though not on a full time basis.



**Jan Mitras – Selection & Orientation:** The selection of Jan Mitras, has been from among the local tribal and non- tribal community. Tribals have been given priority even if their qualification levels are low. The JMs belong to the villages/areas of their

operation. Even though this is a predominantly tribal region, the minority non-tribal population, being more educated and economically enabled, is prominent as service providers. This creates a social dynamics loaded against the majority population. Naandi has tried to avoid this when selecting its JMs as it wants the programme to connect with the local community.

The resource mapping exercise entailed introducing the facilitators (now JMs) to the area so that they got to know the villages first hand. They met the community, gathered information from the service providers and got acquainted with uncharted territory, which would become their work area. Each Jan Mitra has responsibility for 10 villages. Since the induction of new Jan Mitras was a phased process, some of them had to cover 12-15 villages in some areas initially. After an orientation of 3 days the JMs started visiting the villages in groups to understand the local issues and problems. Two more JMs have to be identified and inducted. A 3-day intensive orientation programme was organised for the JMs in March which covered different aspects of their field work e.g. basics of conducting a meeting, identification of issues to be addressed, handling uncomfortable situations etc. Along with these, one session was marked for developing an understanding of the Village Resource Group (VRG) – its composition and role.

**Sandesh Vahini Dals:** In January the community mobilisation strategy was revisited and refined by the new team. Since the population in Bajna is predominantly illiterate, it was decided to focus on audio-visual folk media for communication. Different aspects of child development, health, nutrition and education components of government programmes were selected for information dissemination. The innovative medium of *Sandesh Vahini Dals* (SVD) was used here too after seeing its success in the Naandi project in Sheopur district of Madhya Pradesh. This group with orientation on the objectives of the project and some basic theatre and music skills, put up low cost, high-powered performances (comprising songs, plays and interactive sessions) in villages. Local folk drama troupes and cultural groups were identified in preparation of the Bajna based *Sandesh Vahini Dals*. The team also collected information on local melas and weekly bazaars to make use of these public events for reaching out to the community.

In Bajna a youth group was identified and a three-day comprehensive cultural workshop was organised for them. During the workshop they learnt songs, wrote short skits on the subject of child development and relevant government schemes. The group put up 14 performances in different villages across the area. The creation of Bajna based SVDs has resulted in the formation of a resource pool from within the community, which should be a sustainable resource for the future. The SVD performances have attracted a large number of women as well. The block level officials, especially the Block Medical Officer (BMO) and the Child Development Project Officer (CDPO), make it a point to be present at some of performances and to give support to the programme. At present there are two trained SVDs while three more are to be added. Some local musicians and writers have been invited to enrich the creation of skits and songs.

**Orientation Workshops for Service Providers** - The next round of workshops was held for village level service providers from different government departments – Auxiliary Nurse & Midwife (ANMs), Anganwadi Workers (AWWs) and teachers. These

workshops were held in 4 different venues so as to cover personnel of as many as 60 villages. The purpose of these workshops was to reinforce the various aspects of child development. These workshops generated a lot of interest among members of Parent Teacher Associations (PTAs), Panchayats and the community. Elected members of the Zilla Panchayat were also present in two workshops. The CDPO and Block Resource Centre Coordination (BRCC) were part of the resource group for the orientation.

A 2-day residential training and awareness programme was organised for two groups of Anganwadi Workers (with 60 participants in each group). As most of the participants were illiterate older women, a participative methodology was adopted. Different aspects of child development and role of the Anganwadi Workers were discussed. The response from the women was overwhelming. International Women's Day was also celebrated with Anganwadi Workers on 8<sup>th</sup> March. Over a hundred of women took part in the around a few villages, with colourful banners. The Sandesh Vahini Dal, too was a part of the procession.

**Formation of Village Resource Groups:** The JMs have commenced the process of Village Resource Group (VRG) formation in the villages through consultations with the community. Since in most of the villages entire households have migrated due to the drought the process of VRG constitution will take some time. A one-day orientation training for the members of 128 VRGs has been scheduled in April wherein they will be introduced to the idea of VRG. The strategy for developing the village plans has yet to be evolved within the Naandi team.

In this period village level meetings continued simultaneously. Along with these JMs gradually learnt skills for conducting community meetings for strengthening interactions with the community. In Imalaipada village (visited by ERU team in the previous quarter), the discussions were centred on the primary school – appearance of an ideal school, location of kitchen shed and other facilities. This meeting resulted in the construction of a second classroom for the school. The redundant PTA got activated and took up the construction and relocation of the kitchen shed. Even the nearby hand pump was repaired within a week. For Naandi, this was the first validation of the fact that the team was on the right track. It demonstrated that similar initiatives would come forth with intensive interactions at community level.

## **II. Moving Ahead ...Plans for the next quarter**

Naandi team has made its first plan for activities of the next quarter, which focuses on improving convergence across sectoral programmes for children and promoting awareness regarding over all children development. The following activities are envisaged for the period April-June 2006:

- Formation of Village Resource Groups (VRGs)
- Sharing of resource mapping findings with VRGs in innovative ways

- Orientation of VRGs on government schemes, specific outcomes desired for each sub stage of childhood with respect to health, education and nutrition and related determinants, VRGs own role in planning and monitoring at the village level
- Capacity building of Anganwadi Workers, ANMs and teachers
- Developing close linkages with PRIs
- Addressing needs of adolescent girls from a life cycle perspective particularly in terms of hygiene issues and early marriage.
- Organising Bal Panchayats with school children where they will learn about services and institutions that are meant for the development of children.
- Development of Village level plans (3- year plans for children from pre-natal to 11+ years in each village).

Some other strategies that have been identified for taking the programme towards desired outcomes:

- School health programme with the health department
- Fixed day services at AWCs with the coordination of ICDS and health department
- Residential school facilities for children during migration season
- Community kitchens
- Capacity building of teachers to handle multi-grade teaching
- Joyful learning approach for academic support for children

All of these may not be used in the next quarter, but some beginnings would be made to see how they work out.

### **III. Glimpses from the Survey & Mapping**

Findings of the Baseline Survey and Resource Mapping conducted by Indicus Analytics and Naandi Foundation respectively highlighted the actual status of health, ICDS and education services in the area.<sup>3</sup> The baseline survey was taken up in 114 randomly chosen villages in 45 Gram Panchayats of the block and 2500 households (having a child in 0-11 years of age). Total 112 Primary schools, 23 Sub Centres and 109 AWCs were surveyed. Testing children for school readiness in AWCs and learning achievement in Grade II were also undertaken. Similarly the resource mapping data is collected from the entire 221 villages.

It is significant to note that the area has a fairly homogenous population with poor socio-economic indicators. People migrate twice a year from March to June and September to November in search of temporary employment. The service providers attempt to carry out their assigned tasks to the best of their limited abilities but due to lack of awareness the overall RCH and education indicators are poorly reflected. Though the administration is apparently responsive clear-cut directions at implementation level in the field are required.

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<sup>3</sup> Detailed reports available with the World Bank

According to the baseline almost 80% of the parents are sending their children to AWC and out of these 93% parents informed that their children receive SNP at the center. Though 95% AWWs reported providing supplementary nutrition but on the days of visit to the centers by the survey team only 44% of the AWC were providing the same. 70% of AWW reported receiving the food stocks in time. All the workers interviewed had attended induction training and 87% had also attended special training programmes. Almost all the AWCs did not report receiving the contingency funds. The quality of weighing scales at AWCs pose a concern as 30% are in poor condition

Amongst the 5-10 years age group children 84% were attending school. Of the remaining 16% not attending school, 42% are dropouts while 58% never went to school. Of the children attending school, 96% reported receiving mid day meal Most primary schools reported receiving funds and supplies on time though 15% schools reported irregularities in receiving food inventory for MDM. Only 50% of the schools reported receiving contingency funds

All the ANMs interviewed had attended both the induction as well as at least one refresher training. Majority of the ANMs had to either walk or use public transport for visits, 1 -2 time per month to the village. 90% of the ANMs reported working closely with AWW and schoolteacher in dispensing their duties, while 59% had attended joint trainings with ANM. Most Sub Centres reported receiving their stocks in time, though few ANMs complained of delays in getting their claims cleared promptly

Simultaneously to the baseline survey, Naandi conducted a resource mapping. The information gathering by the volunteers helped them to get acquainted with the location of the villages, get introduced to the community and have a sense of the problems/issues at local level. They collected secondary information from AWCs, schools and health centres. The data collected thereby has been collated giving a picture of the situation of services for children in the area.<sup>4</sup>

The findings show that majority of villages (77%) have number of households ranging from 30 to 120. All the villages have schools and a middle school (Std. I to VIII) for every 5 primary schools and one EGS (Education Guarantee School) per 4 primary schools. There is a sharp decrease in enrolment of children as level of classes increases. In higher classes- Std. VI to Std. VIII, enrolment for girls is 50% of boys. Nearly 30 to 50 % schools do not have TLM (Teaching Learning Material) relevant to the curriculum. There are 88 villages in which no one has studied up to Std 10<sup>th</sup>. Though majority of the villages (84.2%) are served by ICDS centers and out of these 70% AWCs have or use play materials and TLMs. All the AWCs serve nutrition to the children and women registered (as per records). Almost 86% of villages are covered by the services of ANM and in 54% villages people need to travel over 2 kms to access basic health services. Health department records show prevalence of -2SD level of malnutrition (276 cases from 132 villages) and IMR (Infant Mortality Rate) at 136 cases per 115 villages for the 0-5 year age group. The ratios of deliveries at health centre, through TBAs (Traditional Birth Attendants) and at home conventionally are 10:11:14

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<sup>4</sup> Refer Annexure III for a sample Resource Mapping Data Collation Sheet

Perceptions of Community about the services		
Health	Anganwadi Centres	Schools
The facilities at a distance from the village. The ANM does not move within the village and her visits to the village are infrequent.	The AWWs are irregular. There is no shed or drinking water facility for the centre and children are not given SNP regularly. In some villages people said that the ANM does survey the village, the midday meal is served in the school and the AWCs give SNP on time	They do not run on time or regularly. The teachers are also too few and irregular. There is very little teaching activity in the schools. There is a need for toilets, kitchen sheds and drinking water in the schools.

Except for school enrolment data both sets of information, collected through baseline survey as well as mapping, are in consonance with each other. The findings do not vary to a great extent as they reveal the inadequacy of effective outreach in this difficult terrain. The resource mapping data, which has been collated and is being translated in Hindi would be shared with the VRGs and used during village planning.

Given the extensive sample area, both the exercises have generated a rich information base for future programmatic planning and strategizing towards achieving desired outcomes for Integrated Child Development.

#### **IV. Snapshots from the Field**

Some of the facts that emerged in the baseline survey and resource mapping were borne out during visits made to few villages in the Bajna and Raoti areas and through interactions with the community.

- **Community Mobilisation -**

In Chikni village a huge crowd of about 500 people had gathered in the shade of trees to witness the show put up by the *Sandesh Vahini Dal*. People had also come from the neighbouring village of Devipada. The messages communicated through humorous skits and songs in the local dialect were about village cleanliness and sanitation, accessing health services for children and mothers through the health centres, registration of births, immunization, nutrition, incentive schemes for mothers, education etc. The performance was very much appreciated by the audience, as they were deeply engrossed while sitting through it. At the close of the programme the village leaders and opinion makers spoke about their commitment to the initiatives for children. The Sarpanch inaugurated the 'Apna Board', which was for the village to record information regarding the status of health, nutrition and education of children. People agreed that it should be maintained in the village. They would share responsibilities to upgrade it monthly. After the function the people took the Board in a procession into the village to install it in a central place for visibility. Such inaugural functions for Apna Boards have been planned for each Gram Panchayat.

- **VRG Meeting**

The team met the Village Resource Group of Bhurighati village (Tikaria Gram Panchayat) at the Panchayat Bhawan. The group included Sarpanch, AWW, presidents of PTA for primary as well middle school and other community members. Since the schoolteacher had to invigilate the ongoing Board examinations, he could not attend the meeting. The VRG had recently been constituted and was unclear about its objectives and roles. The discussion surfaced the ambiguity amongst members regarding VRG vis-à-vis PTAs responsibilities (might be due to commonality in structure). Some of the members, who decided to speak, mentioned that they were there to monitor functioning of the school. Like many other villages in Bajna, here too large numbers of people migrate twice a year. But none of these families were included in the VRG which left one wondering about nature of the group formed - whether it is inclusive or exclusive! The Sarpanch seemed to be forthcoming and so were some of the members. They were familiar with the Jan Mitra and were ready to extend possible cooperation to her in the future, which makes the environment conducive for Naandi's future intervention in the village. Evidently the VRG has been physically formed but is yet to be developed into a resource group in true sense. It is also reflective of the low conceptual clarity and understanding of the Jan Mitra.

**When the Programme Assistant and Jan Mitra went to Lawanipada village in Raoti cluster for the first community meeting, they were presented with the most immediate requirement for the village – a functional hand pump. On their way back they visited the block PHED office and requested the officials to install one in Lawanipada. With their pursuance, a hand pump was quickly installed in the village. Since then things changed, The Naandi team is welcomed, people listen to them and of course now they are offered tea and snacks!!**

- **Interactions with AWWs**

During the launch of the Apna Board the team was able to interact with some of the AWWs present. These women had been serving as AWWs from 12 -20 years. They reported that they had received the induction and refresher trainings. They were very happy to have participated in a workshop organized by the Naandi team but were not able to recall what they had learnt as such. The AWWs were very clear about the different take home rations for the women and the nutrition for children on the different days of the week. It was very significant that when there was no supply of supplementary nutrition then children did not come to the AWC. Some times this was the case for 1-2 months. They also reported that not all children enrolled in the centre came on a daily basis. The AWWs spoke of difficulties like no covered space to run the centre, lack of a drinking water facility nearby and irregular supply of nutrition. Earlier the nutrition was sent to the centres but now they had to collect it themselves from the Block.

In the Raoti area, the AWC in Ajabgarh was operating in the primary school. There were 30 children sitting very quietly – 20 from the AWC and 10 siblings who had brought the young ones. The children were unkempt and not so clean though the room was spic and

span. Basically they were waiting for the nutrition to be distributed. They had come with their own plates and bowls, as the same were unavailable at the centre. The AWW said that most pregnant women who lived further away from the centre came to collect their take home rations on a weekly or monthly basis. If they took the whole lot together then it was eaten up by the family rather than the mother to be.

There was no play or other activity with the children though the classroom where they sat had some charts of alphabets, fruits animals and birds on the walls. There was even a freshly painted board right around the walls. When asked whether she could sing songs or take up activities with the children she was silent. In fact a couple of JMs sang some songs and asked the children to repeat, but they were dumbstruck due to the new faces and unfamiliar activities around them. Though the AWW was educated up to class 8 she was unable to take up any activities with the children. She said that she had maintained all her registers herself.

### **The Silent School!**

**The Ajabgarh primary school was in very good shape- painted, clean with classrooms all ready to receive the children with brand new charts and illustrations on the walls. The front verandah of the school had the timetable of the class five exams written on the freshly painted black board. Another small board had a notice for the previous day's local holiday. The school had information about its year of establishment- 1998-99, the names of 2 assistant teachers and a village map on the outside wall. The only missing link in this school was the teacher!!**

**One of the 2 teachers had been transferred and the other did not take his responsibility seriously. He had come to the school on the day prior to the team's visit, which happened to be last day of the month – to close registers and to announce the board exams. This school had enrolled children but there were no children coming to the school as it never opened for more than a couple of days in a month. No wonder it was in pristine condition as it was not in use. The school building is being used as an AWC where the children come, sit in one classroom, receive their nutrition and go home silently.**

**The community members who gathered on team's arrival said the teacher is always drunk and says that they cannot do anything to him, as he is a confirmed, permanent employee of the government. This silent school with children deprived of an opportunity is actually located at the entrance to the village on the main road and yet there is no monitoring. Even the community is not demanding action or taking measures to ensure education for their children.**

During the visit to the school the Bal Sanjivani team of the health department also visited the AWC to follow up on the immunization and hold check ups for women and children Perhaps that is why the children were waiting there in perfect order. The Team comprised of the Health Sub Centre Doctor, two ANMs and the ICDS Supervisor who were on their follow up rounds. They spoke briefly about the attitudes of the tribals, saying that they were very rigid in accepting any health related medical advice. Earlier the community in the area was extremely secluded, only now they have opened up. The women take the nutrition given to them but are reluctant to take the IFA tablets and other

medicines. Many a time they just take them and throw them away. This team said it would be good if the JMs motivated and created awareness in the community about health practices, government schemes and the benefits of active participation.

- **Meeting with Jan Mitras**

The ERU team had meetings with JMs and PAs (cluster supervisors) in the Bajna office. The plan for the next quarter was discussed with them. Since they were in the process of constituting VRGs, a need was felt for them to understand the process of collectively reviewing work plans on a monthly basis before moving on to plan for the forth-coming month. This was a kind of practice session to help them to do some forward thinking. The exercise was also to facilitate the concept of bottom up planning, as shortly they would be doing the same with the community, more specifically with VRGs. They were able to get a sense of learning to develop monthly work plans (in relation to the quarterly plan developed) for routine activities as well as specific community mobilization events. The JMs developed an understanding of having to make preparation with specific agendas when they went for a village visit or meetings, this in turn would lend focus to the discussions with the community.

Since the VRGs are going to be a critical link in the programme, a visualisation exercise was conducted to discuss the need for a VRG, activities it will take up, its roles and responsibilities and rules and regulations for membership. The group also debated on a name to be given to the VRGs (like 'Jan Mitra') so that local people could identify and relate to it. Some names came up from which one would be selected after discussions with some community groups. The team developed further clarity on the parameters of a sustainable VRG with an identity at village level i.e. it should be aware, have a perspective of child development issues/needs, must be committed for rendering services, be active in the village and be a strong autonomous body to take up activities and tasks. These and other similar issues will surely be taken up during the orientation of VRGs scheduled for April. However, this dialogue was imperative at this juncture as the process of VRG formation and discussions with the community going on with full intensity. The need for JMs to have clarity on the above issues is critical so that they can provide the right guidance from the very beginning.

Another point flagged was the maintenance of monthly reports in duplicate for tracking the progress and the processes at ground level, before they get obscure in memory, both individual and institutional.

## **V) Issues to Ponder...**

### **a) Programme Strategies and interventions**

- SVDs have proven to be an effective strategy for awareness generation on a large scale. This forum should be used to strengthen the dialogue between community and service providers for joint action. Service providers especially teachers, ANMs and AWWs (not only from the particular village, but from the catchment area) could participate more actively during the event. For taking forward the momentum generated by SVD events follow up strategies, have to be pre-planned by the JMs for their respective group of villages.

- Since VRG is the pivot of the programme, its development becomes crucial from inception. Therefore its formation is to be process oriented and constitution inclusive by involving all the sections of community. In the given scenario where families migrate twice a year for work opportunities, it is possible that their representation gets excluded. This is likely to impact negatively upon their participation in the village planning process and reaping its benefits in longer run. Therefore factors like timing of VRG formation, processes for approaching the community, their level of involvement become critical at this formative stage. When village plans evolve the development indicators for child development have to be kept in mind. For this the JMs and PAs need clarity so that this does not get sidelined. They need some handouts regarding the concept of the project and its milestones in the three phases so that they can also keep track where they are going.
- After the formulation of all the VRGs, the next step would be development of village plans by the VRGs. In Raoti cluster some villages where village maps are painted on school walls (under the watershed management project by JVT), these could be used as the starting point for the social mapping process to locate children who are unreached by institutional service providers/mechanisms. These maps will become basis of identification of children and related issues. This would ensure that each household gets covered in the plans formulated. All migratory households have to be noted for working out special strategies to include them in the process. In Bajna and Kundanpur areas the village social mapping, a must for effective community based planning, would be a good start up process for environment building and strengthening the VRGs. When village plans evolve the indicators for child development have to be kept in mind. For this the JMs and PAs need clarity so that this does not get sidelined.
- Given the context that schools are generally not so active in the area, with teachers being the weakest link, some extra efforts have to be made at district/state level to ensure that the commitment of the government is translated into field level action. Regularity of teachers is a major issue because of the inaccessibility of the area. Some via media with the government has to be worked out to ensure that schools function regularly from the next session. May be a simple alternative report on school functioning could be prepared with the involvement of the people to take up the matter with the government.
- Despite the Sarpanch being part of VRG, the linkages with PRIs at the ground level, are still tenuous. This is perhaps because the team still needs to develop an understanding on the importance of PRIs. These linkages could be developed during the Sandesh Vahini events and the Apna Board launch. Some Panchayat members and Sarpanches can certainly be tapped to become allies to the programme. They can then prove to be role models for partnerships in other villages too, whether through the VRGs or outside them.
- Findings of the baseline survey suggest that there is little awareness amongst most service providers i.e. AWW, ANM and schoolteacher, regarding allocation for

various schemes, mechanism of funds flow and their own financial entitlements. The role for Naandi could be to access the information from the District and Block level officials and to share it with the field level service providers, JMs and VRG members. This would also guide Naandi to synchronize the village plans with the allocations within the operational plan for the coming financial year. Hence, all allocations for child development, health and education have to be accessed to engender a block level plan for children. This consciousness has to be developed among the government functionaries through feed back and joint planning with them within the next quarter.

- In accordance with the agreed administrative arrangement, quarterly meetings at district level and monthly meeting at block level need to be systematically adhered to. This would ensure updating the government regarding the programme, clarifying issues and bottlenecks with them and facilitating information flow from top to the villages and vice versa.

### **b) Programme Management Systems**

At this stage when the programme is entering the implementation phase, the management and monitoring systems have to be firmly put in place. Monthly/quarterly plans have to be developed at each level so that they can be followed up and reviewed subsequently both horizontally and vertically. This will also help in internal programme and personnel appraisal in the near future. Filing and recording systems have to be accordingly organized for the needs of the programme.

At field level too, when village plans have been developed they have to be maintained and tracked by the VRGs. Baseline data, mapping of services and support facilities, and outcomes achieved village wise will also need to be maintained in easy to use simple pictorial formats in each village. The entire process of bottom up planning and tracking has to evolve through intensive discussions and dialogue to include outcomes at different levels.

Qualitative process documentation of field processes, trainings, events and issues is imperative and should be undertaken by functionaries on a timely basis. Even monthly, quarterly and six monthly progress reports will have to be maintained by the supervisors and JMs to inculcate the habit of recording, reporting and reviewing. Brief reports of major field events like Sandesh Vahini programmes, Jathas, Apna Boards etc. should be wonderful for the project history. Categorized information about IEC materials, skits, songs etc as well as lists of resource persons with names and addresses should be kept accessible.

There is still a continued requirement to invest in building the capacities of the Naandi team in Bajna. They need in depth knowledge and sharpen their skills to conduct community meetings with a focused agenda of child development. They need some handouts regarding the concept of the project and its milestones in the three phases so that they can also keep track where they are going. JMs also need to have a reckoner of all schemes and programmes of the government readily available in their bags to be able to give correct information at community level. After all the information of schemes and

programme (specially for women & children) is accessed it could be collated in simple language and photocopied or printed for them to use. This would be useful in establishing rapport with government service providers.

Jan Mitras need to gain a perspective on issues of education, health and child development. It is a young, enthusiastic and motivated team, which with a little more investment would go a long way!

## Annexures I

### Itinerary-

30 <sup>th</sup> March	Review Meeting in Ratlam
31 <sup>st</sup> March	Field visit to Chikni Village, Bajna Cluster Meeting with Naandi field team at Block Office
1 <sup>st</sup> April	Field visit to Ajabgarh and Singat Mau in Raoti Cluster and Bhurighati village in Bajna Cluster Discussions with Jan Mitras and Programme Assistants

### Participants in the Review Meeting on 30<sup>th</sup> March 2006

Ms Dipti G Mukherjee	District Collector Ratlam
Ms Venita Kaul	Member World Bank
Ms Deepa Sankar	Member World Bank
Ms Meera Priyadarshi	Member World Bank
Dr. L Bhandari	Indicus Analytics
Ms Aali Sinha	Indicus Analytics
Mr. R K Singh	Indicus Analytics
Ms Rohini Mukerjee	Naandi Foundation
Mr. Ravikant Thakur	Naandi Foundation
Mr. JS Shiva Reddy	Naandi Foundation
Mr. PK Chaudhury	Consultant to Naandi
Ms Nishi Mehrotra	Educational Resource Unit
Ms Niti Saxena	Educational Resource Unit

### Persons met (from 31<sup>st</sup> March – 1<sup>st</sup> April 2006)

- Community members in Chikni and Ajabgarh villages
- VRG members in Bhurighati village
- School teachers (2) from Chikni and Singat village
- Instructor of Shishu Shiksha Kendra in Singat Mau
- Children from Ajabgarh and Singat Mau
- AWWs in Chikni (5) and Ajabgarh (1)
- Bal Sanjivani team of Raoti Health Sub Centre – Supervisor, and ANMs (3)
- Programme Associates (3) and Jan Mitras of Bajna (20)

### Document Referred to

- Presentations made at the Review Meeting by Indicus Analytics and Naandi Foundation
- Project Report (October 2005 to March 2006) – Submitted to the World Bank by Naandi Foundation

**Annexure II**

**TIMELINE (UPDATED)<sup>5</sup>**

April 2005	Initial Meeting with the State Government Officials, Naandi Foundation and World Bank representatives. Meeting held at the World Bank Office, New Delhi
May 2005	State level Meeting organised at Shivpuri (MP) by the State Government Officials. It also included representatives from WB, Naandi and Indicus. In this meeting the basic framework of the project was discussed and criteria for selection of project areas and indicators were finalised. It was also decided that Indicus in coordination with the State officials would collate required information for the selected districts.
September 2005	Meeting of Naandi and Indicus representatives with the Bank (held at the Bank, New Delhi). Discussion regarding selection of districts and blocks. Mandsaur came up as a prospective district. However keeping accessibility in mind Ratlam was selected as it has better rail connectivity There was a concern that intervention in one block cannot be taken as a sample for replicability so it was agreed upon that later more blocks would be taken up in other districts.
Sept/October 2005	Discussions also held regarding selection of blocks and Panchayats. Meetings of Naandi representative with Director, State Education Centre and other officials. District level workshop was proposed Dr. John was hired as a Consultant for preliminary of work of reckoning the area and its potentials.
October 2005	District level Workshop at Ratlam including officials from Sailana and Bajna blocks. In this workshop the project plan was presented. Bajna was selected as the block for intervention; Naandi appointed a District Project Coordinator; DPO visited the block. Initial meetings were held with the block officials a local block level office was set up at Bajna Naandi team along with block level key officials selected Gram Panchayats and villages for interventions. Since the entire block is socio-economically backward, interconnected Panchayats and accessibility specially during monsoon were taken into consideration for selecting the villages. Identification of local people as volunteers for resource mapping. The basic criteria for selection were qualification (at least 10 <sup>th</sup> pass) with some understanding about the issue. Twelve persons were identified by the DPO.
November 2005	Training of volunteers (5 days) at Bajna regarding resource mapping. Block officials from Education, Women and Child Development and Health Departments also gave their inputs on the ongoing programmes/schemes in the block.

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<sup>5</sup> As of 31<sup>st</sup> March 2006

December 2005 Training included field visits to some villages, sample resource mapping and group work.  
 Resource Mapping Exercise started in the area.  
 DPO leaves and new APO appointed immediately  
 One day Sensitization workshop for the service providers was conducted with block officials at Bajna. Looking at the imminent need along with suggestions from the district officials this activity, originally scheduled for January 2006, was pre-poned.  
 Review of the filled in forms submitted by the volunteers by the Naandi team.  
 Keeping the quality of the mapping exercise conducted and also through in-depth discussions with the volunteers, 6 facilitators were short listed  
 Basic Orientation of facilitators at Bajna.  
 First visit of Process Documentation team.

January 2006	<p>Community mobilisation strategy revisited and refined. The focus shifted to communicating through audio- visual folk media. Formation of a Sandesh Vahini Dal (adapted from Naandi’s Sheopur project) selected as the key strategy for this.                  Facilitators named as <i>Jan Mitra</i>.                  Programme expanded to 221 villages in the block. Change in planning and activity parameters. At the end of the second round of mapping, 14 more <i>Jan Mitras</i> were selected.                  The next round of workshops was held for village level service providers of different government departments – ANMs, Anganwadi workers and teachers. The purpose of these workshops was to reinforce the various aspects of child development.                  Village level meetings continued by <i>Jan Mitras</i>.                  Identification of local folk drama troupes &amp; cultural groups to form Sandesh Vahini Dals.</p>
February 2006	<p>The Sandesh Vahini Dal (SVD) from Naandi’s Sheopur project visited Bajna to launch the mass contact campaign in villages of Bajna and how an SVD can be an effective medium for awareness generation                  An enthusiastic team identified in Bajna. They put up 14 performances in different villages.</p>
March 2006	<p>A 3–day intensive orientation programme was organised for the <i>Jan Mitras</i>.                  A residential training and awareness programme was organised for two groups of Anganwadi Workers (with 60 participants in each group).                  International Women’s Day celebrated with Anganwadi Workers on 8<sup>th</sup> March.                  The entire team, of 20 Jan Mitras, 3 persons in supervisory capacity based in Bajna, one person in charge of administration &amp; accounts, a state manager and one person for resource support in place now.                  Collation of resource mapping data                  Launch of first Apna Board                  District level Review Meeting, attended by District Magistrate, The World Bank Team, Indicus Analytics, Naandi and ERU</p>

**Annexure III**

**Consolidated Resource Mapping Data for Thikariya Gram Panchayat, Bajna, MP (A Sample)**

Thikariya Panchayat Resource mapping - Jan 06			Bazana Block - Ratlam, MP					
<b>Population</b>								
Age group	Male	Female	Households:	340	Caste:			
0-3 year old	98	86	Population:	1830	Male Literates:	128		
3-5 year old	63	58	Population/Household:	5.4	Female literates:	84		
5-11 year old	135	126	Male:Female	931:899	Male:Female 0-5 year age group:			
				1000:966		(1000:894)		
<b>Panchayat &amp; village level</b>		Panchayat	Thikariya	Khora	Bhandariya	Kotharia	Hlakara Khurd	
House holds		340	150	85	51	30	24	
Population		1830	327	408	450	290	355	
<b>Panchayat level</b>		Male ^	Female ^					
Graduate		3	1					
10+2 pass		4	4					
10 pass		4	2					
8th pass		13	11					
Traditional (Jari Buti)		13	0					
Allopathic		0	0					
Daai (trained)		0	5	No. of SHGs				

**10-(10+2) pass or Graduates**



Pharmacist	1	0	10
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^ number of males/females

### Health services and Accessibility

Panchayat and village level	Panchayat	Thikariya	Khora	Bhandariya	Kotharia	Hlakara Khurd		
Medicine shop (Pharmacist)	1	0	1	0	0	0		
No. of Trained Daai	5	1	1	1	1	1		
Basic Facility available		Up Kendra	Up Kendra	Up Kendra	ANM	Up Kendra		
Emergency service distance+			8		7	10		
ANM visits in a month			1	1	1	1		

Child Birth & Health (Panchayat & village level)	Panchayat	Thikariya	Khora	Bhandariya	Kotharia	Hlakara Khurd		
Child birth at center	5	0	0	2	2	1		
Child birth (dai observation)	5	0	2	1	1	1		
Child birth conventionally	0	0	0	0	0	0		
Malnutrition	12	2	2	5	1	2		
Child death	1	0	1	0	0	0		

Child deaths	0	0	0	0	0	0		
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10 or 10+2 pass or Graduates

Male	11
Female	7

<b>Aanganwadi/ICDS/IEC</b>							
	Panchayat	Thikariya	Khora	Bhandariya	Kotharia	Hlakara Khurd	
0-5 year old children enrolled	307	60	68	43	86	50	
Pregnant women enrolled	33	5	5	10	9	4	
Education level of karyakarta		std. 6	std. 5	std. 5	std. 2	std. 2	
Space available at center		20	30	20	40	0	
Center open daily?		Daily	Daily	Daily	Daily	Not daily	
Nutrition food to child		Yes	80 Gram	80 Gram	Yes	Yes	
Care to Pragenant woman		attended	attended	attended	attended	attended	
<b>Govt. Primary(std.I-V) /mid. Schools(std I-VIII)</b>							
	Panchayat	Thikariya	Khora	Bhandariya	Kotharia	Hlakara Khurd	
School		Mid. Sch.	Pri. Sch.			Pri. Sch.	
Attendance/Enrollment	248/341	124/176	37/46	33/41	13/40	41/38	
Child-teacher ratio(On Enrollment)	56.8	88	46	41	40	38	
No. of teachers available	6	2	1	1	1	1	
No. of rooms	10	3	2	2	2	1	
School timing followed		yes	yes	yes	yes	yes	
Text book to children		Yes	Yes	Yes	Yes	Yes	
Learning tools in schools - in use ^^		4/4	1/1	2/2	2/2	2/1	
School building *		6	6	5	6	4	

Drinking water in use		in use	unavailable	available	unavailable	in use	
Toilet facility for girls in use		not in use	not in use	not in use	unavailable	In use	
Mid day meal given		00-Jan	yes	yes	yes	yes	
School management committee		training given	training given	training given	training given	training given	

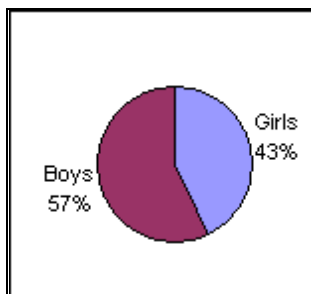
\* This gives out of 6 sections no. of sections of school in good condition

^^ 3 - 2 : tools for 3 subject areas are available and tools for 2 subject areas are in use (surveys collected information on tools for 5 subject areas)

**Enrollment, attendance & Pass (Govt. schools and ICDS/IEC)**

		Enrollment	% Attendance
ICDS/age 3-5.	Girls	65	
	Boys	58	
std. 1-2.	Girls	79	75.9
	Boys	75	77.3
std. 3-5	Girls	60	66.7
	Boys	62	69.4
std. 6-8	Girls	24	75.0
	Boys	41	70.7

**6-14 year old Boys-girls out-of school**



**Out of school/Irregular children (number)**

Panchayat total		
	Girls	Boys
3-5 year	0	0
6-11 year	1	3
11-14 year old	5	5
<b>TOTAL</b>	<b>6</b>	<b>8</b>

**Attendance in test & pass children - No. of children (panchayat total)**

	ICDS children graduated	Std 1-II		Std III-V		Std VI -VIII		Out of school children
		Girls	Boys	Girls	Boys	Girls	Boys	
Attendance		73	89	47	43	6	37	6
Pass	20	55	62	41	43	16	27	8