Let the Country Grow 03/06/13 15:39

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Home > Web Exclusives > Let the Country Grow

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Web Exclusives [2]

Bibtex 3 Endnote 4 RIS 5 Google Scholar 6

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As many as fifty per cent of Indians may suffer from mental deficiencies caused by malnutrition during childhood. This might impact the quality of India's huge and young workforce and dent its ambitions to become an economic superpower. The government is in the process of overhauling the, almost 40 year old, Integrated Child Development Services (ICDS) programme, to tackle with the grave issue of child malnutrition.

Diego Maiorano (maioranodiego@gmail.com [7]) is with the Institute of Human and Social Sciences, University of Liège, Belgium

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Almost fifty per cent of Indians may suffer from mental deficiencies, as a result of decades of inattention to child malnutrition. According to the third round of the National Family Heath Survey carried out in 2005-06, 43% of Indian children below five years of age are malnourished. This means, among other things, that their neuronal connections might already be irremediably damaged. This in turn will result in difficulties in remaining focused, an inability to think clearly, and poor low learning and social skills. The loss in terms of future economic growth will be immense.

Addressing children's malnutrition is not an easy task, most and foremost because the lack of food is only one among many interrelated causal factors. It is also the easiest to tackle, especially if the Opposition parties will be kind enough to allow the Parliament to pass the National Food Security Bill. The absence of toilets in most part of rural areas for example – 58% of the people defecating in the open in the world live in India – causes flies to spread germs that ultimately make children unable to absorb nutrients. Lack of potable water causes widespread diarrhoea. Above all, malnourished mothers often do not recognise their children's malnutrition, or they accept it as a normal social fact. The challenges are enormous and need to be addressed as the government's top priority.

Not Given a Chance to Deliver

The government's largest and only programme for tackling child malnutrition is the Integrated Child Development Services (ICDS), which has been running since 1975. The Comptroller and Auditor General's report on the performance of the scheme released in January 2013 shows that the ICDS failed to meet even its own halfway targets and that malnutrition indicators are worse than those of neighbouring – and less prosperous – countries like Sri Lanka and even Bangladesh.

Indeed, the ICDS was not given a chance to deliver. Serious underfunding, an extremely centralised design, and a complete absence of monitoring, condemned the programme to a substantial failure, even though the Anganwadi Centres do represent a crucial reference point for communities living in remote areas. Perhaps more crucially, the ICDS represents a startling example of government coordination failure. Since malnutrition is caused by a multiplicity of factors, for the ICDS to deliver it is necessary to ensure coordinated action between different branches of the state apparatus. Food procurement needs to be coordinated with the Food Ministry; health check-ups and follow-up actions need the full involvement of the Health Ministry; pre-school education must be coordinated with the education department; sanitation issues must be addressed through the Rural Development Ministry; and so on. This is just not happening.

It is astonishing how a political leadership so obsessed with macroeconomic indicators and fiscal discipline fails to recognise the problem and to take appropriate action. The Prime Minister, in his Independence Day speech in 2007, called child malnutrition "a national shame". But the embarrassment of the government did not translate in swift action to address the problem. True, the Prime Minister established a council on malnutrition in November 2008. However, it took two years for the first – and only – meeting to be convened; and it took two additional years for the "strengthening and restructuring" of the ICDS to be finally approved, even though a broad consensus about what was needed had emerged at least since 2007, when the National Advisory Council had submitted a detailed list of recommendations to the Planning Commission. The problem was that a comprehensive solution to address child malnutrition needed significant resources to be invested and the political will to commit such resources was simply not there.

Future Repercussions

The government failed to realise two obvious things. The first one is that future economic growth and India's ambitions to become an economic superpower will be seriously hindered by the low quality of its huge and young workforce. The demographic dividend that, according to many analysts, is supposed to form the basis for the country's transition from a developing to a fully developed economy, is unlikely to be translated into real gains if half of the working population will be affected by learning and reasoning deficiencies.

The second obvious fact that the government apparently does not realise is that a sizable part of the resources invested to raise educational levels through policies like the Sarva Shiksha Abhiyan (Rs. 61,734 crore in 2011-12) is unlikely to achieve much, if about half of the children attending schools suffer from not-repairable brain damage. Not to speak of the consequences in terms of enduring inequalities – malnourished children are more likely, although not exclusively, to be found among the weakest sections of the society – and hence of social and political stability.

Restructuring the ICDS

In December 2012 the Cabinet approved a "restructuring and strengthening" of the ICDS. The Planning Commission has committed significant resources (Rs. 1,29,000 crore over the XII plan period). The scheme will be run on a "mission mode", on the example of the National Rural Health Mission. This is an historic opportunity.

The reformed ICDS can potentially represent a solution to child malnutrition in a medium term perspective. Some of the problems that condemned the scheme to failure have been addressed. Significant resources have been allocated for the XII plan period (2012-17); the focus has been shifted to children below three; the opening hours of the Anganwadi centres have been extended and Anganwadi-cum-crèches have been introduced in 5% of the cases; additional human resources have been allotted; a more decentralised framework has been designed; a clearer and more efficient flow of funds has been outlined; a (timid) effort to involve local communities in the management of malnutrition has been made; an attempt to ensure interdepartmental coordination has been made; a monitoring system has been established; and an effort to change the very conception of the scheme from a feeding programme to an integrated system for child development has been made.

03/06/13 15:39 Let the Country Grow

However, all of these efforts will be at risk if effective monitoring is not put in place. The recently established five-tier monitoring system may remain largely on paper, if political pressure from the centre and from the states is not applied to administrators at lower levels. For this reason, the establishment of a national task force for child malnutrition – a request repeatedly made by supporters of the programme, to no avail – that could exercise such pressure and ensure effective inter-ministerial coordination from the top to the bottom of the system is crucial. It would also be a sign that the political leadership has understood that children may not vote, but they still represent the country's future.

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Links:

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- [4] http://www.epw.in/endnote/75330

- [5] http://www.epw.in/iris/75330
 [6] http://scholar.google.com/scholar?
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