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Case Study Of An Aanganwadi Worker Of Nauhatta Block Of Rohtas District (Bihar)

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Abstract: The word Aanganwadi means "courtyard shelter" in Hindi. They were started by the Indian government in 1975 as part of the Integrated Child Development Services program to combat child hunger and malnutrition. The word Aanganwadi is derived from the Hindi word "Aangan" which refers to the courtyard of a house. In rural areas an Aangan is where people get together to discuss, greet, and socialize. The Aangan is also used occasionally to cook food or for household members to sleep in the open air. The Integrated Child Development Services (ICDS) Programme is the world's largest and comprehensive outreach programme dealing with child's interrelated physical, intellectual and emotional needs. The present study on "Awareness about Aanganwadi. The Case Study of Aanganwadi worker Meera Minj from Kuba Village of Pipardih panchayat of Nauhtta block and Rohtas district.

Key Words: Anaemia, Adolescents girls, IEC, Malnutrition, Haemoglobin, ICDS, WIFS Program, IFA Tablets etc.

Background/Introduction: The Integrated Child Development Service (ICDS) Scheme, providing for supplementary nutrition, immunization and pre-school education to the children, is a popular flagship programme of the government. Launched in 1975, it is one of the world's largest programmes providing for an integrated package of services for the holistic development of the child. ICDS is a centrally sponsored scheme implemented by state governments and union territories. The scheme is universal covering all the districts of the country.
The Scheme has been renamed as Aanganwadi Services.

Objectives of Aanganwadi Services: Are mentioned as below.

- To improve the nutritional and health status of children in the age-group 0-6 years;
- To lay the foundation for proper psychological, physical and social development of the child;
- To reduce the incidence of mortality, morbidity, malnutrition and school dropout;
- To achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and
- 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: Are mentioned as below.

- Children in the age group of 0-6 years
- Pregnant women and Lactating mothers
- Adolescent girls.

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Services under ICDS: It offers a package of six services, viz.

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

Three of the six services namely Immunization, Health Check-up and Referral Services delivered through Public Health Infrastructure under the Ministry of Health & Family Welfare.

Anganwadi Worker responsibilities: The Ministry of Women and Child Development has laid down guidelines for the responsibilities of Anganwadi workers (AWW), these include:

1. Showing community support and active participation in executing this programme.
2. To conduct regular quick surveys of all families.
3. Organize pre-school activities.
4. Provide health and nutrition education to families especially pregnant women on how to breastfeed, etc.
5. Motivating families to adopt family planning.
6. Educating parents about child growth and development.
7. Assist in the implementation and execution of Kishori Shakti Yojana (KSY) to educate teenage girls and parents by organizing social awareness programmes etc.
8. Identify disabilities in children, and so on.

Anganwadi Worker functions: Are enumerated below:

- They need to provide care for new born babies and ensure that all children below the age of 6 are immunized.
- They are expected to provide antenatal care for pregnant women and ensuring that they are immunized against tetanus. In addition to this they provide post-natal care to nursing mothers.
- Since they primarily focus on poor and malnourished groups, they provide supplementary nutrition to children below the age of 6 and nursing and pregnant women.
- They ensure that regular health and medical check-ups for women 15- to 49-years-old take place and that all women and children have access to these check-ups.
- They work toward providing pre-school education to children who are between 3 and 5 years old.
- Anganwadi Worker (AWW) guides ASHA in performing activities such as organising Health Day once/twice a month at Anganwadi Centre and orientating women on health related issues such as importance of nutritious food, personal hygiene, care during pregnancy, importance of immunisation etc. Anganwadi worker is a depot holder for drug kits and will be issuing it to ASHA.

Statement of the Problem: Human resource is the wealth of the country and is very essential for attaining development as well as growth in a country. ICDS programme in India is one of the largest welfare programmes in the world. The ICDS scheme is one of the initiatives taken

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by the central government which provide a package of six services such as supplementary nutrition, health check-up, immunization, referent service, nutrition and health education for mother or pregnant women, nursing mother and adolescent girls through aanganwadi centres. Adulthood is a significant phase of transition accompanied by physical and psychological changes. This is the time to make adolescent aware of and informed about various facets of life in order to promote a healthy way of living. Awareness of health, nutrition, life style related behaviour and adolescent reproductive and sexual health need to be positioned easier transitions to women hood. During the period nutritional originating earlier in life as well as those occurring during the period itself can addressed. Going beyond this, adolescent girls need to be viewed not just in terms of their needs but even as individuals who would become productive members of society in future. ICDS its opportunity for early childhood development seeks to reduce both social economic and gender inequality. To better address concern for women and child, it was necessary to design intervention girl for adolescent girls. The significance of ICDS programme is growing and it touches all aspects of child and women's who need and effective programme to promote their capabilities and to achieve self-development. In this context a study is needed to understand the accessibility and utilization of schemes and services for adolescent girls implemented and proposed by government through ICDS.

Review of Literature: UNICEF Report (2011) found that girls iron requirement increases dramatically to adolescents as a results of the expansion of the lean body mass, total blood volume, and the onset of menstruation, the changes make adolescent girls more susceptible to anaemia, which has lasting negative consequences for them and for the survival, growth development of their children later in life to solve this problem the government of India introduced a anaemia control programme for adolescent girls. The main objective of the programme is to reduce the prevalence and severity of anaemia in school going adolescent girls using school as the delivery channel and in out of school adolescent girls using the community Aanganwadi centre of India's integrated child development service programme as the delivery

platform.

Objective of The Study

To enquire the role of Aanganwadi worker in the Nauhatta block of Rohtas District, Bihar, and whether these workers are able to successfully communicate with the adolescent girls about food, nutrition and health practices and raise their awareness regarding. Also to find out whether the Aanganwadi worker is disposing her duty effectively and responsibly.

Method: Case Study

Qualitative data based on Semi-structured interview schedule, discussion and observation.

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Findings and Observations:

Name of Aanganwadi Worker: Meera Minj **Hamelet:** Kuba Tola

Panchayat: Piaprdih Panchyat **Block:** Nauhtta

Combating the burden of Anaemia in the Hilly tribal population of Rohtas district, the innovation proposal under NNM which was sanctioned and approved by state government. The two panchayats i.e. **Pipardih** & **Rohats Garh** for which innovation proposal got sanctioned by state are one of the toughest Panchayats to live in. The tribal population who live there have very limited resources, they don't have proper roads, only solar lights available at few places, no mobile network connectivity, very less resources of safe drinking water which even scarce at the time of summer. The hills are almost 2000 feet above the ground level.

When the Author and ICDS team from districts visited for 7 days and 6 nights stay at the hills for initiating Haemoglobin testing and base line survey of the households. We come to know many astonishing facts. We also include B.P, diabetes, Malaria and other skin diseases test along with Haemoglobin and baseline survey. For that District ICDS team also collaborated with health department and take a team of ANM, ASHA and lab technician also with themselves. The entire team was led by ICDS district team.

Facts & Findings: During this visit the team found an adolescent girl namely **Manisha Kumari** who is fourteen years old. She is suffering from severe Anaemia her **Hb count** was only **6.5**. Due to this severe Anaemic condition she even develops swelling in her face. It was the incidence of **25th of September 2019**, when the team found severe Anaemic Manisha Kumari, and then the team immediately met her mother Sunia Kunwar and father Mahender Uraw who were a residence from Kuba Tola (Hamlet), from Pipardih Panchyat of Nauhtta block. The team counsel the family and explains them the seriousness of condition. The family ensure us to take care of her daughter.

Here the **Aanganwadi worker Meera Minj** played a very crucial role she not only provides her personal attention and regular home visit to the family and counsel Manisha on daily basis. Meera also give WIFS IFA tablets to Manisha and as per suggestion of doctor recommend her to take WIFS tablets on daily basis and ensure its intake in her presence. The Aanganwadi worker also motivates the family to take iron rich food to the family like green leafy vegetables, drumstick, amla, sprouted Chana, gur and black til etc. In addition to that she also gifted an iron pot from her side to the family and insisted family to cook their food on this iron pots only. So, by overall efforts of Meera Minj the **Hb count** of Meera has increased to **11.2** on **21st November 2019**. Now the Meera don't have any swelling on face and feel more energetic as she never feels before and helping her parents in paddy cutting on fields. This is something which was wholly and solely done by the efforts of Aanganwadi worker which changes the life of one Adolescent girl and a family. This was highly recommendable and appreciable.

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Conclusion:

The Aanganwadi Worker, Meera Minj, has been successful to an appreciable degree in guiding and changing the food, nutrition, hygiene and health behaviour of the adolescent girls. Her efforts have yielded in a decline in the occurrence of anaemia in adolescent girls in Village of Pipardih panchayat of Nauhtta block and Rohtas district.

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