



Internship at

**Integrated Child Development
Services(ICDS) Navsari, Gujarat**

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Dissertation Study

Title of the Study

“Assessment of quality of data collected under ICDS at Anganwadi Centers in Navsari District”.

Introduction

- ICDS Scheme today is the World's largest Programme aimed at enhancing the health, nutrition and learning opportunities of infants, young children (0-6 years) and their mothers
- For realization of objectives of ICDS and widely approved consensus on accurate, timely and regular information systems, great emphasis has been laid on data capturing at each facility, block and district level which is further collated at state and National level.
- For this, a continuous flow of good quality information on inputs, outputs and outcome indicators was needed along with a strong Monitoring and Evaluation system which is essential for tracking programme performance and designing new interventions.
- At the heart of the M & E system is the *Management Information System* (MIS), focussed on improving the collection and use of data related to core programmes.
- However, despite the potentials the MIS have; the collection, compilation, analysis and utilization of health data remains to be practically major problems in this system.

Problem Statement

- Presently, ICDS has an in-built monitoring system through which regular reports and returns (MPRs) flow upwards from AWC to blocks, district HQs, State Directorates.
- However, the current monitoring system is geared towards coverage rather than outcome indicators.
- Also due to large number of registers to be filled the quality of the data is being compromised.
- There is no proper monitoring to check the quality in terms of completeness, consistency and timeliness of data being reported



Research Question

What is the quality of data collected under ICDS in an Anganwadi Center?

Objectives

- To assess the different registers at Anganwadi Center for completeness, timeliness and consistency of data
- To identify the causes of incompleteness, inconsistency and untimeliness of data reported by AWCs.

Methodology

- **Study Design:** Cross-sectional descriptive study.
- **Study Area:** 5 blocks (Navsari, Gandevi1, Jalalpore 1, Chikhli 1, Vansda 1) of Navsari district.
- **Sample size:** 20 AWCs (Total 100 AWCs) selected from each block
- **Study Variables:**
 - Completeness of data, Timeliness of submission of reports, Consistency in filling the data,
- **Data Collection Tools:** Semi-structured questionnaire

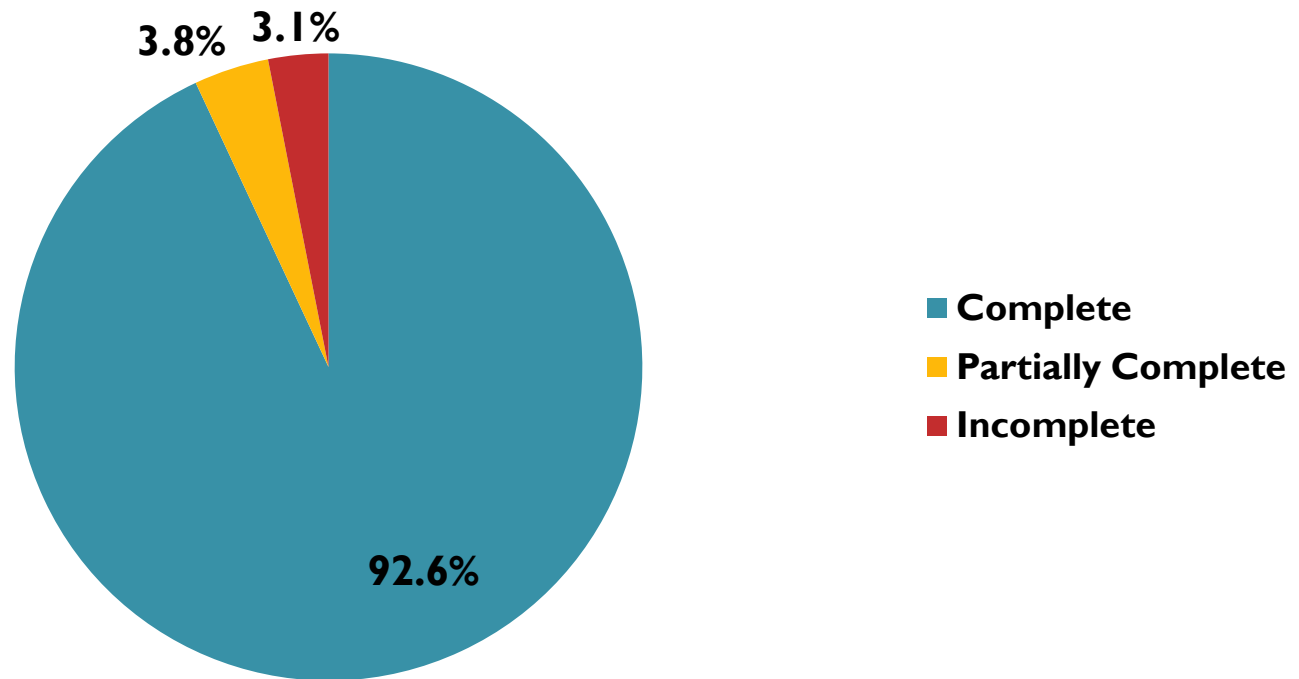


Findings

List of main registers present in the AWCs under survey

S.No.	Name of Register at Anganwadi	No. Of Anganwadi at which register present
1	Survey Register	100
2	Services for Adolescent Girls	90
3	Immunization register	100
4	Service for Pregnant and Lactating Mother	100
5	Growth Card	100
6	Medicine Distribution	20
7	Referral	66
8	Village Health	90
9	Supplementary Nutrition	95
10	Stock Register	90
11	Daily Diary	80

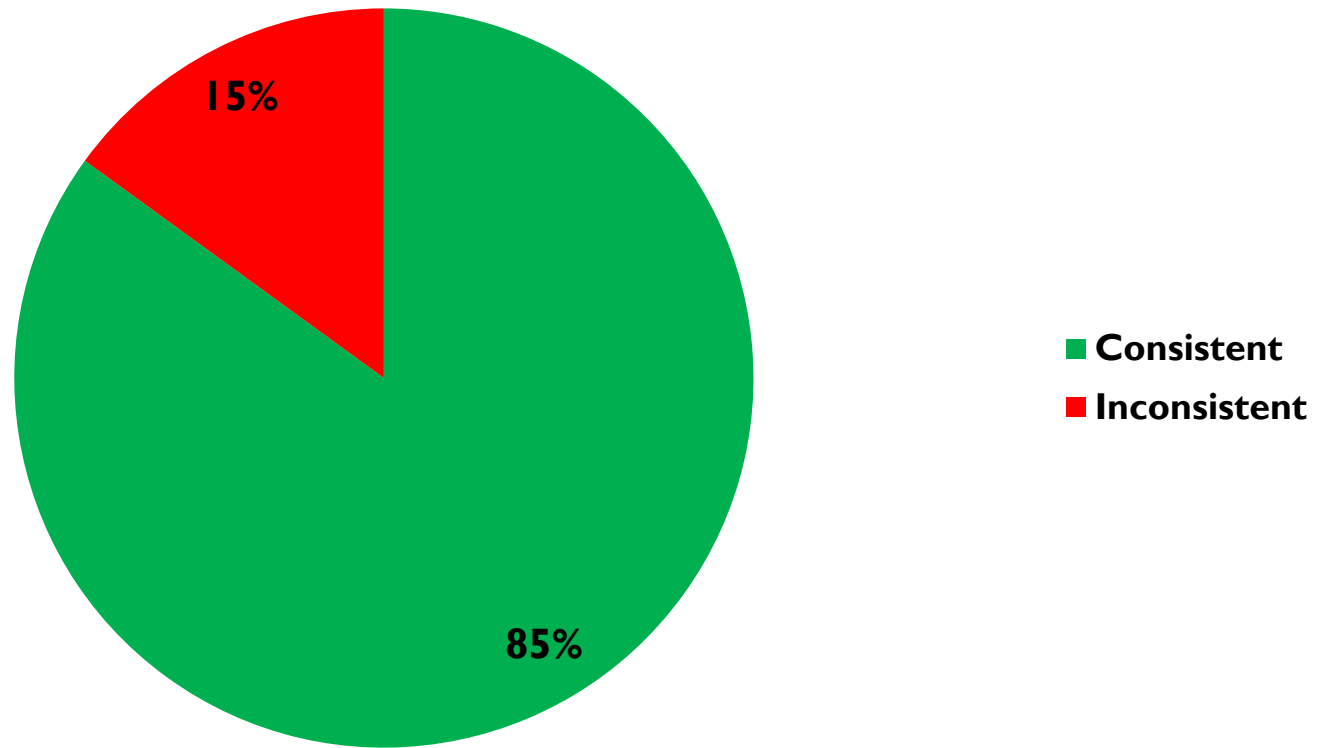
Percentage of the registers based on their completeness



Quality of data in terms of timeliness

- All the data is being submitted to the block level regularly ON TIME

Percentage of Consistency in filling the Registers



Discussion

- Although previous literatures reviewed on MIS/HMIS put emphasis on the importance of quality of data, little has been proved or shown regarding following the same.
- Though MIS was proposed in ICDS to focus on improving the collection and use of data related to core programmes, it has shown little positive results in the AWCs under study.
- Most of the AWCs were observed to be maintaining incomplete data i.e, majority of registers observed were partially filled, some important columns were found to be lacking any inputs.
- Growth registers, which are an important aspect of recording the growth of child in order to tackle any discrepancies arising or any illnesses arising as a cause of malnourishment, were not being filled properly in most of the AWCs.

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- Also most of the AWCs had no records of referrals showing a hitch in the system of records
 - Most of the AWCs conducted immunization on a regular basis
 - These observations suggest the lack of training and enthusiasm of those responsible for data inputs.

Conclusion

- From the survey conducted among the 100 AWCs in five blocks it has been observed that though some important registers were maintained properly at the AWCs, a close insight into them made us realise the flaws in the data inputs, the inconsistency in the registers, the lack on the part of AWWs to enter correct standard data which may be due to lack of capacity or plain enthusiasm
- All these indicate the low priority given to nutritional statistics in these AWCs and thus delimiting the scope for which MIS was primarily enforced into ICDS.
- Thus this can be a reason for the poor statistics across the country.
- Thus to improve the scenario and increase the effectiveness of MIS, strong management and supervision is required at the AWC for both data and workforce.
- There is a need to move from ***reporting undernutrition*** to ***preventing undernutrition*** by proactive using of MIS System.



THANK YOU