



Early childhood care  
and development in  
Hazrat Nizamuddin  
Basti

*A partnership project  
between*

*Department of Women and  
Child Development*

and

*Aga Khan Foundation*

**A Report**

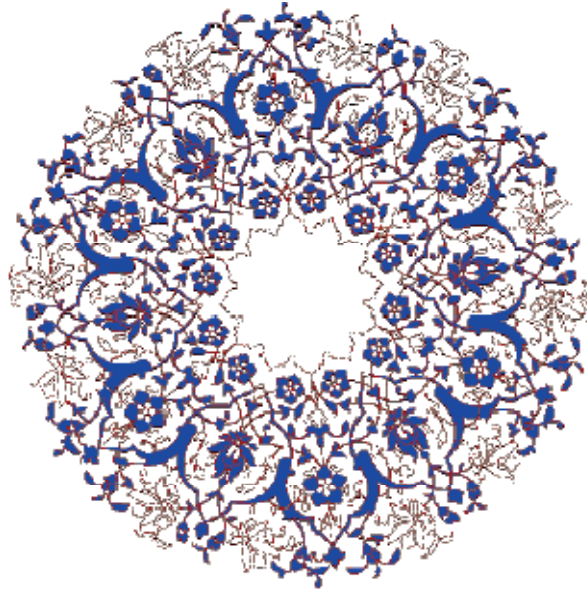
January 2010 to May 2012

HUMAYUN'S TOMB : urban renewal initiative

SUNDER NURSERY

NIZAMUDDIN BASTI

A PUBLIC-PRIVATE PARTNERSHIP INITIATIVE OF ARCHAEOLOGICAL SURVEY OF INDIA  
MUNICIPAL CORPORATION OF DELHI – CENTRAL PUBLIC WORKS DEPARTMENT  
AGA KHAN FOUNDATION-AGA KHAN TRUST FOR CULTURE



“The Urban Renewal Initiative is based on the philosophy of the Aga Khan Historic Cities Programme to ensure that conservation work benefit local communities. Working in close collaboration with partner agencies, AKDN connects conservation with socio-economic development in a synergetic and enabling manner to create and ensure a self sustaining and improved quality of life for the indigenous community. This landmark non-profit initiative establishes both an innovative practical paradigm and benchmark for similar projects worldwide.

AKDN’s socio-economic initiatives aim to improve the quality of life of the residing population by strengthening urban basic services through interventions in areas of health, education and environmental sanitation and interventions to promote livelihoods and economic empowerment opportunities.”

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## 1.0 BACKGROUND TO THE PROJECT

The Humayun's Tomb-Hazrat Nizamuddin Basti-Sunder Nursery Urban Renewal Initiative is being implemented under a not-for-profit public-private partnership (PPP) programme. The partners in the initiative are the Archaeological Survey of India (ASI), Central Public Works Department (CPWD) and Municipal Corporation of Delhi (MCD) as the public partners and the Aga Khan Foundation (AKF) and Aga Khan Trust for Culture (AKTC) as private partners. The partnership was formed following the signature of a Memorandum of Understanding in July 2007. The Nizamuddin Urban Renewal Initiative is a unique project that aims to combine conservation with socio economic development. It aims to revitalize and unify three historical sites – Humayun's Tomb, Nizamuddin Basti and Sunder Nursery into a unique heritage zone. This is a rare occasion when multiple agencies have come together in a not-for-profit public-private partnership.

The Nizamuddin Basti, development intervention combines conservation, urban improvements and socio-economic development through a community centred collaborative approach to improve the quality of life of the resident population. The socio-economic initiatives comprise strengthening basic services through interventions in areas of health, education and environmental sanitation and interventions to promote livelihood and economic empowerment opportunities, especially for youth and women. These initiatives have been conceptualized and designed in consultation with the residents, specific target groups and key opinion makers. A detailed socio economic survey and sector specific assessments inform all programme interventions. Interpreting data from these surveys, coupled with consultations with residents is an ongoing process to design strategies and activities aimed at improved quality of life of a heterogeneous population residing in this small area.

### Humayun's Tomb

- Reveal, Conserve and Restore the aesthetic and historical value of the monuments
- Revive and Preserve traditional building craft traditions through training opportunities

### Sunder Nursery

- Create a significant public space with vibrant ecological-heritage zones and cultural assets for future generations
- Establish Delhi's first arboretum and develop Nature trails to promote environmental education

### Nizamuddin Basti

- Improve the quality of life for local communities through improved urban environment and access to education, health, and economic opportunities
- Cultural revival through documentation and dissemination of local music, heritage and craft traditions

## RATIONALE FOR WORKING WITH EARLY CHILDHOOD GROUP

The first 6-8 years of life of a child are very crucial to development of a child. Developing a strong base is an essential responsibility of the community and government at large. It has been well established through research and experience that development happens at the fastest pace among this age group. Most of the brain cells are formed by the age of two and synaptic connections form at a very fast pace at this age, *however after the age of 3, the learning acquired if not put in use, the synaptic connections fade away, resulting in loss of learning.* In this context early learning is very essential. In this preschool age certain crucial competencies related to life skills and learning are acquired. They begin to develop attitudes, ideas, behaviours and skills which become part of them as they grow. The preschool education in our



country often does not come under the scrutiny required. As there is no policy governing the early education, many private preschools have sprouted where the quality of education is not guaranteed. It is thus important for ICDS to work toward providing a quality preschool service to children.



An equally crucial reason for working with children is that they are entitled to quality services for care and development. It is their right to be able to develop to their full potential. As they are largely dependent on adults to fulfil their needs, chances for being vulnerable heighten. Under such circumstances it is crucial that the needs of the children under six are addressed. The ICDS scheme is the flagship programme of the government which is catering to this age group. As early childhood education has been left

out from Right to Education, it is imperative for ICDS to take up this role in full swing considering the possibility of the huge impact due to reach of the programme.

## **BASELINE SURVEY ON EARLY CHILDHOOD CARE AND DEVELOPMENT**

One of the initial activities as per the MoU was to conduct a baseline survey. Accordingly, it was conducted at the beginning of project period in the year 2010. This study was conducted by Ambedkar University with the support of Aga Khan Foundation. A comprehensive baseline of early childhood services in the basti was established through the study. The aim of the study was to look at key early childhood related issues. Services for children, pregnant and lactating women, and adolescent girls within the basti were looked at and their quality was assessed. Perceptions of parents as well as other key stakeholders such as Aanganwadi workers, school teachers etc were gathered regarding early childhood. The issues addressed were malnutrition, preschool education, immunization, early stimulation as well as health of mother and child.

Following are some of the key findings of the baseline survey:

### *Safe Motherhood*

- Average age at marriage: 19 years; Age at first pregnancy: 20 years
- Positive correlation: Age at marriage and reported miscarriages (30%)
- 53 % of pregnant women were found to be anaemic
- 57 % of families have three or more children
- 83 % of mothers reported abnormal weight gain during pregnancy
- 91 % women were found to have inadequate knowledge on good dietary practices during pregnancy.
- 48 % of women faced problems during pregnancy.
- 60 % women underwent antenatal check-ups during the first trimester.
- 61 % of women availed institutional deliveries



### *Adolescent health*

- Awareness on reproductive health poor, boys get preference on food and quality of education, girls demand to learn vocational skills

### *Child Health: Neo-natal (Until 1 month after birth)*

- 85 % of women aware of colostrum and breast fed within an hour of delivery.
- 15 % children were underweight at birth
- 43 % mothers aware of the appropriate time to introduce complementary feeding

### *Child Health: Growth & Nutrition (0-3 years)*

- 49 % children underweight: (Wasting: 44%; Stunting: 64%)
- 76 % of children were anaemic

- 57 % children were immunised on time
- 15 % children not vaccinated at all

*Child Development and Early Education*

- Mothers do not understand the importance of interacting with infants
- 79 % children in 3-5 age are in preschools
- School Readiness amongst 5 year olds: Poor with respect to phonological awareness, skills of classification, pattern making and sequential thinking
- Early Childhood Environment Rating (ECER): Poor physical infrastructure, pedagogical practices

*Facilities*

- 50 % women aware of Aanganwadi services
- Poor space and infrastructure, capacities and various administrative responsibilities along with running the centers limit the Aanganwadi workers perform their roles on adolescent health, mothers on childcare, and pre-school education
- Poor coordination amongst the Aanganwadi workers and the health department affecting reach of immunization facilities for children
- Need for open space and play activities for children

These issues from the baseline were crucial to determine AKF's strategy for ECCD interventions. Early childhood care and development is a complex issue requiring intervention at various levels. Equally important is to work with stakeholders such as Aanganwadi workers and parents to bring about a shift in understanding about care during early childhood. The ECCD programme has been designed to follow a multipronged approach to work on the issue of early childhood. The interventions are as follows:

Capacity building of Aanganwadi workers



Direct Interventions with children and the community



Infrastructural and resource material provision



**INTERVENTIONS**

CAPACITY BUILDING OF AANGANWADI WORKERS

*Training sessions on early childhood education:*

The Aanganwadi workers are directly working with children, so they need a high level of skill set in terms of understanding children. In the capacity building done by the ICDS, preschool education is perhaps not as high priority as the other programmes. The capacity building has been done not only on imparting quality preschool education but also on development of children. As Aanganwadi workers, it is crucial to know about how children develop and the way different situations such as a preschool impact on them.



The following table lists the trainings which have been conducted by the Aga Khan Foundation on the issue of early childhood education.



Issues covered	Duration	Participants	Dates
<b>2010</b>			
Developing skills to plan activities on weekly and yearly basis	2 Days	Aanganwadi workers(7); Nursery teacher; Community teachers (5); School teachers (4)	13 <sup>th</sup> May 15 <sup>th</sup> May
Developing skills to plan activities and conducting activities with children in the centres	3 days	Aanganwadi workers(7); Nursery teacher; Community teachers (5); School teachers (4)	16 <sup>th</sup> August 17 <sup>th</sup> August 18 <sup>th</sup> August
To recapitulate learning from previous training	2 days	Aanganwadi workers (7); Community teachers(6);	6 <sup>th</sup> October 7 <sup>th</sup> October
How children grow and develop	1 day	Aanganwadi workers (6); Community teachers (3); Self help group members (7); Community workers (2);	22 <sup>nd</sup> November
<b>2011</b>			
Reading Tagore (A parrot's training)	1 day	Aanganwadi workers (7); Community teachers (4), School teachers (2)	4 <sup>th</sup> February
Developmental milestones and understanding Tagore's idea about education	1 day	Aanganwadi workers (7); Community teachers (4), School teachers (2)	11 <sup>th</sup> February
Reading Divaswapna by Gijubhai Badheka	1 day	Aanganwadi workers (5); Community teachers (4), School teachers (2)	18 <sup>th</sup> February
Understanding Badheka's philosophy on education and use of activity cards to explore the various activities	1 day	Aanganwadi workers (6); Community teachers (4), School teachers (2)	25 <sup>th</sup> February
Understanding play based learning	1 day	Aanganwadi workers (5); Community teachers (4),	11 <sup>th</sup> March
Music, movement and rhythm as a medium of teaching in early childhood	1 day	Aanganwadi workers (6); Community teachers (4),	25 <sup>th</sup> March
Training on making musical instruments from everyday material	1 day	Aanganwadi workers (7); Community teachers (6), School teacher (1); Project functionary (1)	15 <sup>th</sup> April
<b>2012</b>			
Workshop on curriculum focused on urban areas	2 days	Aanganwadi workers (6), aanganwadi helpers (6), Community teachers (4)	15 <sup>th</sup> May 16 <sup>th</sup> May

*Growth monitoring and nutritional counselling*

Growth monitoring and nutrition counselling is an important part of the ICDS mandate, specifically in the context of persistent high rates of under nutrition among children. In 2011 a pilot was initiated within the project are to regularize the growth monitoring. The first step was to conduct a growth monitoring workshop with the Aanganwadi workers and the community workers. The workshop was conducted in the light of newly introduced World Health Organisation growth monitoring standards. The workshop covered issues such as the need for growth monitoring, proper technique to weigh children, marking the weight on growth chart as well as counselling required with the caregivers.



*On the success of the training with the Nizamuddin basti Aanganwadi workers, the training was organized for 87 other Aanganwadi workers of the Nizamuddin Project of ICDS.*

#### *Handholding in growth monitoring*

A regular growth monitoring cycle is very essential to chart the growth of each and every child. It not only helps to see the trajectory of growth but also allows an Aanganwadi worker to know if the child is healthy or not. A sudden drop in weight of the child may indicate an infection which needs to be immediately referred to a doctor. The number of children moderately undernourished or severely undernourished has a huge implication on the ICDS programme. Ensuring a positive and holistic growth of the children is one of the most crucial aims of the ICDS programme.

After the initial handholding of the participants, growth monitoring is now being conducted on a regular basis in three of the existing Aanganwadi centres in Nizam Nagar, Dildar Nagar and Khusro Nagar. Around 210 children have been covered through the process of monitoring.

Subsequently, Aanganwadi workers and the community workers trained in growth monitoring also counsel the mothers on the importance of nutrition and what are some of the ways in which good development of the child can be assured.



### *Exposure Visits*

Exposure visits have also been a part of the capacity building programme for the Aanganwadi workers. These visits often help in attaining multiple goals. First and foremost being the capturing of immense knowledge and experience which other organizations have to offer. Many organizations have been working in the area of early childhood education and have gathered a number of years of experience. Visiting such organizations helps understanding the early childhood education from a different perspective. Secondly, the exposure visit also gives participants a chance to see the challenges and advantages of each situation despite which pre schools are being run. Last but not the least, it helps creating a bond between the participants and help overcome certain inhibitions. Since 2010, following exposure visits have been conducted with the Aanganwadi workers and the community team:

- AKES,I, Gujarat
- Uttrakhand Sewa Nidhi, Almora
- Santa Maria School, New Delhi
- IIT Nursery School, New Delhi



## DIRECT INTERVENTIONS WITH CHILDREN AND COMMUNITY

### *Support of community teachers in the preschool and growth monitoring component*

The preschool component at all the Aanganwadi centres is being supported by four community teachers. Community teachers have been selected from Nizamuddin basti and have been trained along with the aanganwadi workers to conduct preschool education. Each worker is currently working at two centres. They work with the aanganwadi workers and helpers of the centres on alternate days to ensure that preschool education takes place. The presence of community workers is helpful due to their understanding of the local context. There is a greater interaction between the parents and the community workers as they are from the locality. They provide support to Aanganwadi workers to ensure holistic development of children as well as develop language skills and school readiness.



### *Art education*

Art is a very important medium to work with children. It not only interests them immensely but simultaneously works on different aspects of development. From scribbling on a paper to being able to fill colours within the boundary, they develop fine motor skills. While drawing if one asks a child, what she is drawing, she will come up with minute details of what is happening on the blank piece of paper. Expression through language and art thus simultaneously develops. Sitting together in a circle, children share colours and learning a crucial social skill needed to function in society. There are multifarious uses of this simple exercise with children. Art is an inherent aspect of each preschool classroom. Apart from this there have been many workshops that have been conducted with Bal Bhavan which have been the most enjoyable experience for children.





*Summer camp*



A summer camp is conducted for children studying at MCD school every year. Since 2011, children from Aanganwadi centres have also been included in the summer camp. In 2011, this was a month long camp. In 2012, it is for 15 days to accommodate visits to grandparents. It involves various interesting activities which often are not possible to be conducted in an Aanganwadi centre thus giving children an opportunity to experience something interesting. Also certain basic concepts are worked on each year which facilitate in school readiness.

*Puppet shows for children*

The community teachers have been trained in the art of puppetry by Ms Anurupa Roy, a noted puppeteer. They have used this training to conduct puppet shows for children, at the school where children from Aanganwadi centres were invited and also at an Aanganwadi centre, to welcome children to a new space. More shows will be conducted in the coming months.



### *Art and toy development workshops with mothers*

Mothers of children coming to Aanganwadi centres have also been engaged in different workshops over time. An interesting workshop was held last year when some mothers with the help of artists from Bal Bhavan worked on decorating the MCH centre. Another workshop on toy development took place where mothers were engaged with a resource person from Happy Hands foundation to develop toys for children.



### *Awareness generation through mobile community viewing*

Mobile community viewing was conducted on the issue of hygiene and sanitation. A TV would be taken on a cart to different parts of the basti and a *galli galli sim sim* episode on hygiene would be shown, followed by discussion on the same. This was done not only to initiate dialogue on hygiene but also to generate greater awareness about Aanganwadi centres. About 20 such viewings were conducted in the basti. This is an ongoing programme.



### *Development of a curriculum focused at urban Aanganwadi centres*

Aanganwadi centres in urban areas suffer from not only lack of space but also the fact that most curricula designed for aanganwadi centres does not take into account the special conditions of urban areas and their constraint of space. Keeping this in mind, a curriculum is being designed for the Aanganwadi centres which will keep in mind the space constraints that are present in an Aanganwadi centre. While constantly advocating for better spaces, certain activities need to be present with the Aanganwadi worker so that she can continue imparting the preschool education. Most of the activities designed can be modified according to the space and resource availability.

The curriculum will deal with 4 major points of issues:

- Language Development
- Social development
- Curiosity
- School readiness

For developing this curriculum, a comprehensive literature review was done of existing early childhood curricula and best practices from across the curriculum extracted. An orientation to this curriculum has been done with the Aanganwadi workers and helpers. The finer details of the curriculum are being worked out. This will be field tested in the project area and then refined and then made available to the larger ECCD community.

### *Khel Tamasha: A community event*

A community event was conducted which involved children from the MCD school. Various activities had been organized for a span of week. The festiveness of the event extended to the Aanganwadi centres as children from the centres also participated in an art competition and a race. The culminating event was opened up for all the members of the basti.

### *Diploma in Early childhood education from a centralized university*

To increase awareness about the importance of ECCD and present it as an option for future employment, financial assistance was extended to 17 girls from the basti to take admission into a Diploma in Early childhood care and education programme at Jamia Millia Islamia. This diploma also helps young girls from the basti to continue their higher education.

### *Initiation of a community health programme focusing on maternal and child health*

A community health programme has been initiated this year with a focus on reproductive health as well as child health. As highlighted in the baseline survey, maternal health is a high priority for intervention. Often presence of health facilities does not guarantee the access to that facility. For instance even though immunization happens at the polyclinic, there are many children who are not fully immunized. Thus a system of follow up and information is needed through which the access to these services

improves. Also maternal health has huge implications for children, so working on issues such as antenatal care, post natal care etc will improve the status of children.

#### INFRASTRUCTURAL AND RESOURCE SUPPORT

##### *Establishment of a Maternal and Child Health (MCH) Centre*

An MCH centre has been established within the MCD polyclinic. The centre acts as a training centre for early childhood care and development as well as a demonstration centre for preschool education. It is also a space for interaction with the community. It was developed keeping in mind the lack of space at the Aanganwadi centres in the basti. This was also agreed upon in the MoU. Through this centre children from each centre get an opportunity to access a larger space and play material once a week. The activities at this centre are mirrored from the activities conducted at the Aanganwadi centres. This MCH centre provides a useful opportunity to demonstrate a good quality preschool education to the community members and also provide an example to the Aanganwadi workers.



##### *Provision of play materials and growth monitoring equipments*

Play material, growth monitoring equipments and other resources have been made at the Aanganwadi centre. However keeping in mind lack of storage space the material is present at the MCH centre which can be used as and when required by the workers. This provision of resources has been substantiated by involving Aanganwadi workers in developing some





low cost teaching and play material which they can use in their centres.

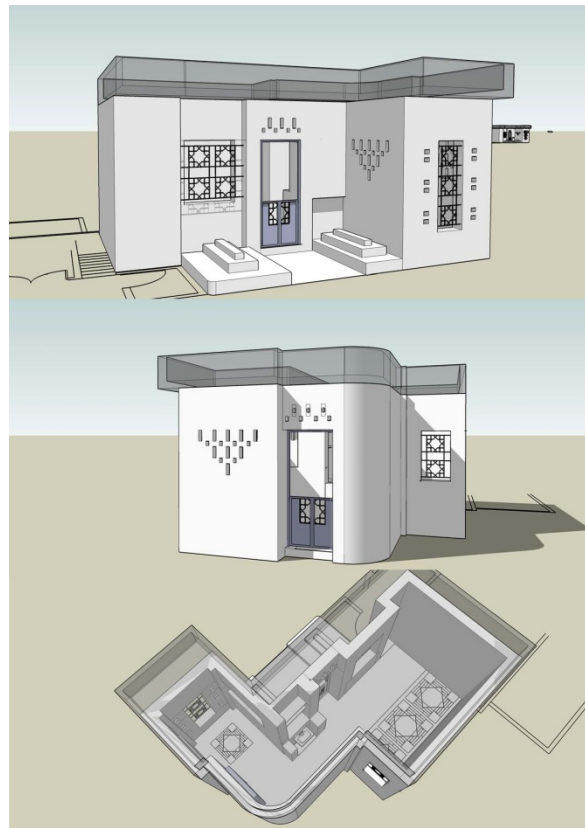
### *Development of a module on early childhood education for Aanganwadi workers*

A module *Khelo Karo Sekho* has been developed, written by Ms Savitri Singh, ex principal of IIT nursery school and with guidance of Dr Amita Govinda. This module emendated from workshop proceedings conducted with the Aanganwadi workers. Due to this reason, it will be easier for Aanganwadi workers to understand the module. The module talks about different aspects of development of children as well as different activities that can be conducted as a part of an early childhood education centre. It also has a compilation of children's rhymes which can be very useful to the teachers.



### *Physical improvement of Aanganwadi centres*

Physical improvement of Aanganwadi centres has been taken up as part of the project. One of the Aanganwadi centre has been shifted to the MCD polyclinic compound after consultation with the DWCD and written permission from the department. It is a much better space for children as well as the Aanganwadi workers as it is dedicated just to the centre. Another Aanganwadi centre is being developed in Nizam Nagar area, as part of the project's urban improvement programme, after dialogues with a member of the community. The space allocation for Aanganwadi centres can go a long way in ensuring quality of services.



### *Urban improvements: Development of parks and open spaces*

Another integral part of the PPP project is to develop parks and open spaces within the basti. Parks are essential in life of children, especially in a context where the living spaces are cramped and constrained. A park especially for women and children, adjacent to the MCD School has been developed. A central park open to the whole basti population has also been developed. Another park on the outskirts of the basti is being developed. Undeniably these parks will aid in holistic development of children.



## **CHALLENGES**

**Fabric of the urban areas** (migration, lack of feeling of community): This is a crucial challenge working in a slum settlement area. High transition rate in the population creates hindrances in process of sustained interventions. However this is the population which needs most support.

**Overload on Aanganwadi workers** often leads to a compromise in quality of preschool education. They are often given responsibilities such as census, polio campaign, pension scheme enrolment among others, so the focus on children is completely taken away. The maintenance of records also takes up considerable amount of time.

**Lack of consistency** in the presence of Aanganwadi workers at the centre is often noticed. Since the Aanganwadi workers are not from the basti they take up considerable time to travel and the centre

almost never opens on time. And since the workers are not from the basti, there is **little accountability to the community**.

With the given rent, the **space is a major constraint**. Of the 7 aanganwadi centres, five centres are operating within household spaces which are not conducive to preschool situation. The members of household are often carrying out domestic activities. Given the space, most aanganwadi centres are unable to house more than 10 children at a time.

**Low motivation to conduct preschool education** is often seen. It does not feature as high priority task in the scheme of things at the Aanganwadi centre. This hampers the pace of the programme.

## **WAY FORWARD**

**Motivation to the Aanganwadi workers** by improving their status is the first step that needs to be taken up if we want the status of Aanganwadi centres and subsequently status of children to improve. An Aanganwadi worker is at the lowest rung and is thrust upon so many responsibilities apart from care of children that there is no possibility of care being taken. A higher status to the Aanganwadi workers needs to be accorded so as to keep the motivation levels high.

An **increase in rent** will be favourable for the Aanganwadis to function in a better way. The current space and rent are in no way adequate for running an Aanganwadi centre.

**Collaboration with other government agencies** such as DDA, MCD to establish spaces for running Aanganwadi centres is very crucial. Also collaboration with health department is crucial to fulfilling aims of ICDS.

Further **handholding to Aanganwadi workers for the preschool component** by the supervisor is very essential in helping Aanganwadi workers gain confidence as well as effectively conduct preschool education.

Development and adoption of a **preschool curriculum focusing on urban areas** is underway as the part of the project. This can be disseminated for further use.

**Building capacities of Aanganwadi helpers** has been recognized as an important step as they are very close to the community by virtue of living there. They can be trained to take up some part of preschool component. This will not only improve the overall quality of Aanganwadi centres but also provide work satisfaction to helpers as for few hours in a day they will be pulled away from the job of maintaining the centre.

**Aanganwadi workers from the community** are a must. This will play a major part in efficient functioning of the centre as she will be accountable to the members of community she lives and works in.

**Creating mothers' groups and self help groups** is going to be a major part of next phase of the programme. Though work with community has happened in some way or the other, much more intense effort to work with community based groups is needed.

**Strengthening of the MCH centre** is also required in the next phase of intervention. It is a good opportunity to establish a model early childhood centre in an urban settlement area.