



# Early childhood care and development in Hazrat Nizamuddin Basti

*A partnership project*

*between*

*Department of Women and  
Child Development*

and

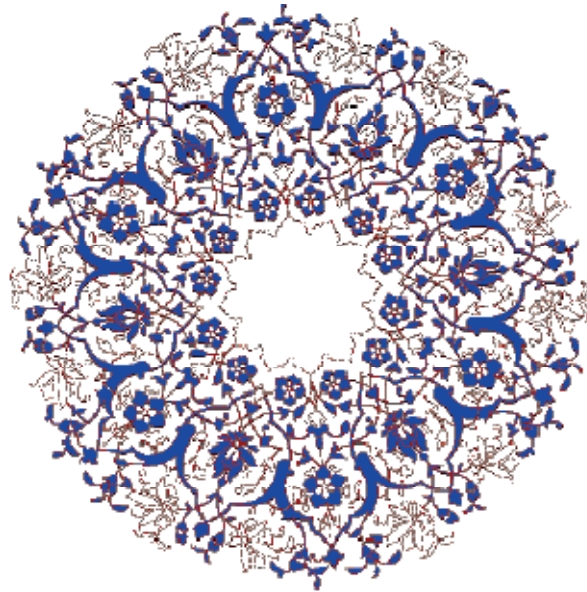
*Aga Khan Foundation*

## A Report

January 2015 to July 2017

HUMAYUN'S TOMB : urban renewal i  
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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## **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 after signing of a Memorandum of Understanding in July 2007. 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 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.

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.

For the early childhood care and development component, there is an exclusive memorandum of understanding between the Department of Women and Child Development, Delhi and the Aga Khan Foundation. This MoU commenced in January 2010, renewed again in July 2012 and then January 2015. The focus of this engagement is to strengthen the existing aanganwadi centres (For details of the MoU, please refer to Annexure 1).

## **BASELINE SURVEY AND SCHOOL READINESS STUDY**

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 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.

The baseline survey informed the ECCD interventions in the basti. The programmes that emerged were:

- Improving school readiness
- Addressing malnutrition
- Early stimulation

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:

### Improving School Readiness



### Addressing malnutrition



### Community Engagement



### Support to working women



After pre-school interventions over a time period of 5 years, there was school readiness assessment done in 2015-16 by Ambedkar University. One of the findings of this assessment was that children in AKF supported anganwadis are performing well in most domains of development due to high emphasis on language and reasoning experiences as well as creative activities. The study also pointed out that teachers are well trained and very effective in teaching.

## INTERVENTIONS

### 1. IMPROVING SCHOOL READINESS

- SUPPORT TO AANGANWADIS

Aga Khan Foundation signed the first MoU with the Department in 2010. The preschool component at five out of seven Anganwadi centres in Nizamuddin ward, has been strengthened with the support of the AKF appointed community teachers.

The anganwadi centres lack the appropriate space for preschool activities which is a concern across urban centres. The community teachers are specifically oriented towards modifying the activities to be conducted in the given space till the time proper space is made available through increased rents for the anganwadi centres (despite the revision of norms for rent).



Figure 1: Pre-school activity by Community teacher

To address the need for affordable childcare, Aga Khan Foundation has also supported the Department in running an anganwadi cum crèche. Despite an approval in June 2016, the crèche started a year later due to the absence of an aanganwadi worker. Thus AKF placed its own community teacher as Creche worker and provided resource support.

- IMPLEMENTING CONTEXTUALISED CURRICULUM

A contextualised and theme-based curriculum was designed in 2012-14, keeping the space constraint of the urban context in mind. The aim was to work towards improving the school readiness, fulfilling age appropriate developmental needs of children.

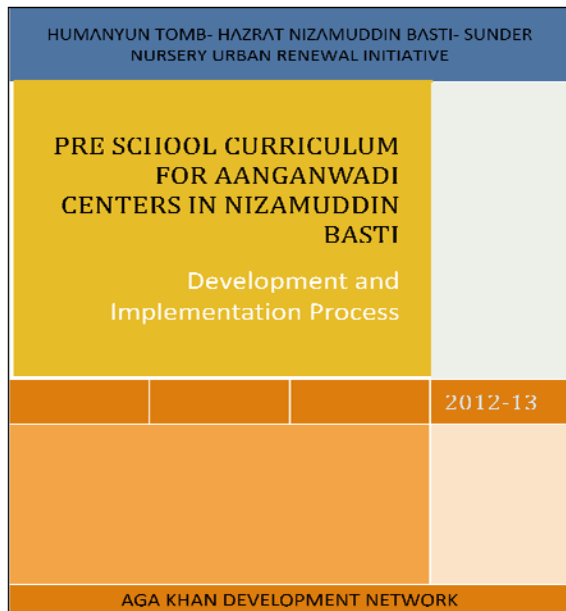


Figure 2: Front cover of Pre-School Curriculum

The curriculum is being currently implemented in five (out of 7) aanganwadis by the AKF community teachers with the support of the aanganwadi workers and helpers. There are weekly meetings with the teachers to do lesson planning for the following week as per the curriculum. This has been made possible after a long process of developing a framework, developing activities, building capacities of the teachers to conduct those activities and field testing them. Regular observations are done to oversee the transaction of classroom processes and give inputs on the curriculum implementation.

- CAPACITY BUILDING OF TEACHERS

Capacity building is a very crucial aspect of AKF’s preschool education programme. It makes the teachers well equipped to work sensitively with children and to be able to achieve the learning outcomes. In this reporting period, 90 days’ capacity building of the community teachers was done on topics like psycho-social development amongst children, arts based therapy and strengthening pedagogy through better classroom management and curriculum transaction. Also an essential aspect of these training sessions is to create linkages between learning at pre school and primary level focussing on teaching language and maths specifically.



Figure 3: Teacher’s Training on pre-school education

In addition, there has been hand holding support to the community teachers through a process of classroom observation and weekly meetings.

- **INFRASTRUCTURE IMPROVEMENT AND RESOURCE SUPPORT**

AKF has consistently been providing support in terms of resources and infrastructure



**Figure 4: AWC No 17 after revamping**

improvement to make the aanganwadis more inviting and vibrant learning spaces. For instance, AWC 17 was colourfully painted in theme of Under-Water theme with aquatic animals/ elements hanging. In addition, AKF has been supporting by sharing rent costs of two aanganwadis as the rents have gone soaring high in last few years. The above mentioned aanganwadis were running in very cramped spaces earlier.

*Support to DWCD aanganwadi centres*

The DWCD provides a rent ranging from Rs ..... to Rs .... per month. While the maximum rent offered by the DWCD is Rs 5000 per month; there are few houses in Nizamuddin Basti that would fulfil the criteria. The houses that will fulfil the criteria are not available on rent.

Aga Khan Foundation is financially supporting the DWCD rent better premises in 2 of the 7 aanganwadi centres.

Two other aanganwadi centres have been upgraded under our housing improvement programme.

Improved physical spaces have contributed towards a better physical and learning environment for the children.

**PLAY GROUP**

According to a study by NUEPA (2003-04), the rate of drop outs is consistently higher in grades 1 and 2, which reflects the transition from home/ preschool to grades 1 and 2 to be the most vulnerable. As most children in Nizamuddin Basti are first generation learners, AKF initiated a Play Group Programme to support children (5-8 years) for a smoother transition to grades 1 and 2. Under the Play Group Programme, activity based methodology is being used by AKF teachers, to fill the gaps in early learning. The play group aims to keep some of these principles of child development to aid the learning of vulnerable children.

**2. ADDRESSING MALNUTRITION**

- **GROWTH MONITORING**



Growth monitoring is a crucial step in addressing malnutrition and comprises not only accurately weighing of children but also interpreting the growth chart to counsel the mothers on appropriate feeding practices. The AWWs are not trained on weighing process, and even if they are trained, the counselling aspect is completely neglected. The lack of space for weighing also poses an issue. On the other hand, resistance by the community against weighing also hampers the process. Through the interventions we have aimed at both, training of AWWs in weighing and counselling; and raising awareness in the community to get the children weighed.

- Weighing of 750 children under six years of age is being done at household level by the community health workers.
- It is being attempted that Community Health Workers support the Aanganwadi workers in conducting growth monitoring at centre level on a monthly basis.
- Through community based monitoring, Aanganwadi Support groups have also started to monitor if regular growth monitoring is being done at the centres.



Figure 5: Growth monitoring by Community Health Worker

#### • SUPPLEMENTARY NUTRITION PROGRAMME



Figure 6: Feeding of children under programme

Regular growth monitoring was initiated by the AKF Community Health Team in 2012, after unsuccessfully trying to regularise it at the aanganwadi level; data pointed to there being atleast 35-40 young children to be severely malnourished. With the situation not changing over a couple of years of our growth monitoring intervention and there being no corroboration with the government records, we initiated a supplementary nutrition programme in May

2015. Under this programme, the identified malnourished children are first examined

thoroughly by the paediatrician to check for any childhood illnesses. Following this they are enrolled under the AKF run supplementary nutrition programme wherein they are provided two meals a day and simultaneously there is nutrition counselling and demonstrations done with the mothers/ caregivers. Through this programme, there has been an improvement in the nutritional status of 80 children out of the 130 children enrolled under the programme.

#### *Addressing Malnutrition*

Aayat is a 3 year old child in Nizamuddin. Her mother works as a domestic help and father as a casual labourer.

She weighed 8 kg which is moderately underweight for her age.

She was enrolled in the Aga Khan Foundation's nutrition programme from May to December 2016.

Her current weight is 11 kg which is normal.

Aayat is now enrolled in the aanganwadi.

- **ZAIKA-E-NIZAMMUDIN**

In the baseline study conducted in 2010, malnutrition amongst young children was found to be very high and thus emerged as a major issue of concern. During a consequent study done it was found bad eating habits like many children consuming 'cheez' or junk food items having very little nutritive value was one of the reasons for poor nutritional level. During community meetings this was highlighted and the need to develop low cost healthy options for young children was realized. A group was formed, comprising of 11 mothers from basti who were interested in healthy food items. The group called itself 'Zaika-e- Nizamuddin'.

The group has received a lot of training on recipes of nutritious snacks and been supplying meals under nutrition programme.

In addition after taking prior permission from the CDPO, distribution of these healthy snacks items was started both in the anganwadis and in the basti.



Figure 7: Work in progress by ZeN

Ideally, it could be retailed through the aanganwadi centres, subject to permission from the Department of Women and Child Development.

### **3. BUILDING COMMUNITY ENGAGEMENT FOR QUALITY ECCD**

- **MONTHLY ECCD DAYS**



Figure 8: ECCD Day celebration on 19<sup>th</sup> April, 2017

AKF Community teachers have been organising ECCD Days on a monthly basis with the support of Anganwadi workers and helpers. These melas are an important forum for the community to understand the role of aanganwadis in early childhood care and development and the importance of sending their children regularly to the aanganwadis. They also help to build a better relationship with the community

and raise awareness about ECCD issues. Over a period of time, the aanganwadi

workers are playing a major role in the organising ECCD days.

- **PARENTING PROGRAMME**

The parenting programme emerged from the observation that young mothers particularly first time mothers living in nuclear need help to understand issues related to maternal and child health as well as development of children. There are 11 sessions under the programme focussing on understanding menstruation, pregnancy, pre natal and postnatal care, breastfeeding and nutrition of children, immunization and developmental milestones of children. The sessions are structured and activity based so that field workers can conduct them with some supervision and hand holding, engaging women



Figure 9: Parenting Programme meeting

to transmit information in an interesting manner. This has taken the form of an 11 module parenting programme manual.

350 women have participated in the programme so far in different batches.

- **SUMMER CAMP AND SPECIAL EVENTS**

Summer camp was organised for 15 days in three years' consecutively with over 220 children. It is an opportunity for children of learning with fun through varied experiences of activities in arts, music and theatre. For many children its a first step towards pre-school after which they get enrolled in the anganwadis or MCH. Also its a good opportunity for parents to see and understand what ECCD is all about when they come to drop or pick up their children.



Figure 10: Discussion with mothers on early stimulation

- **MOTHERS MEETINGS**

The AKF community teachers maintain regular contact with the parents of children studying in the aanganwadi centers. Some of the issues which are taken up during these meetings are related to regularizing attendance of children to anganwadis, early stimulation and nutritious meals for children.

- **APNI BASTI MELA**

The apni basti mela is another annual feature of the project and is held every year. This annual event showcases the project activities to the community at large to disseminate our objective and approach. This mela is visited by many residents of the basti and aims to celebrate the unique identity of Nizamuddin.

The ECCD team has been using this opportunity to showcase a model aanganwadi and the importance of play and nutrition in child development. The teachers present different play materials and activities which are used in the classroom so that parents get a flavor of the way an aanganwadi centre functions. Toy making workshops were held for mothers and children. Various games and quiz are organized to disseminate messages related to child care. Art work created by children through out the year is also showcased for the members of the community.

These large scale events help in creating a positive atmosphere related to various ECCD interventions in the basti. This has been received very well by the community and the ECCD stall has always been full of children. These events then acts as springboard for further contact with the community.

- **COMMUNITY BASED MONITORING**

An *Anganwadi Sahayta aur Nigrani Samooh* in 2016-17 has been formed to proactively support and monitor the services at aanganwadis and demand for quality services. Under this programme, there have been to build awareness amongst community members or parents of children coming to aanganwadis regarding the ICDS programme. In the process the group members have been sensitised to the workload on aanganwadi workers and systemic problems with programme implementation. The following steps have been taken:

- Group discussions with parents and active community members to share data on quality of services at aanganwadis w.r.t needs of children
- Workshops to deepen understanding on the ICDS programme and formation of a group called *Aanganwadi Nigrani aur Sahayta Samooh* (comprising of parents and active community members)
- Visits at each aanganwadi on a weekly basis by group members and preparing a report card
- Submission of report card on programme quality to the CDPO and State Department Officials, to urge them to take appropriate action for improvement of ICDS services. Three report cards have been submitted to the Department so far.

ऑंगनवाड़ी रिपोर्ट कार्ड								
क्र.स.	ऑंगनवाड़ी गुणवत्ता के सूचक	ऑंगनवाड़ी स. 1	ऑंगनवाड़ी स. 3	ऑंगनवाड़ी स. 4	ऑंगनवाड़ी स. 5	ऑंगनवाड़ी स. 6	ऑंगनवाड़ी स. 17	ऑंगनवाड़ी स. 20
1.	पर्याप्त एवं सुरक्षित जगह खेलने व बैठने के लिए ?	Green	Green	Orange	Green	Orange	Green	Green
2.	शौचालय की व्यवस्था है ?	Green	Green	Orange	Red	Green	Red	Red
3.	पीने के पानी की व्यवस्था है ?	Green	Green	Orange	Green	Orange	Green	Green
4.	क्या ऑंगनवाड़ी में जानकारी बोर्ड लगा है ?	Green	Green	Green	Green	Green	Green	Green
5.	क्या ऑंगनवाड़ी समय पर खुलती/बंद होती है और कम से कम 4 घंटे खुलती है ?	Orange	Green	Orange	Orange	Orange	Orange	Orange
6.	क्या ऑंगनवाड़ी कार्यकर्ता और सहायिका समय पर आती है ?	Orange	Green	Orange	Orange	Orange	Orange	Orange
7.	कितने 3-6 वर्ष के बच्चे ऑंगनवाड़ी में उपस्थित थे ?	Orange	Orange	Orange	Orange	Orange	Green	Orange
8.	क्या ऑंगनवाड़ी कार्यकर्ता बच्चों के साथ आयुनुसार गतिविधियाँ जैसे खेल, कविता इत्यादि करा रही थी ?	Green	Red	Red	Red	Green	Green	Orange
9.	क्या बच्चों को व्यवस्था से खाना खिलाया गया ?	Green	Green	Red	Green	Green	Green	Green
10.	क्या बच्चों का वजन हर महीने रखा है ?	Orange	Orange	Orange	Red	Red	Green	Green
11.	कमज़ोर या कुपोषित बच्चों को किसी अन्य सेवाओं से जोड़ा जा रहा है ? यदि हाँ तो कितने ?	Green	Red	Red	Orange	Orange	Green	Red
11.	पोषण के मुद्दे पर महिलाओं को नियमित तौर पर जानकारी दी जाती है ?	Orange	Orange	Orange	Orange	Orange	Green	Orange

SAMPLE REPORT CARD – MAY 2017

As a result of these efforts, there have been some steps taken in response like - Sharing of data on malnourished children by the Community Health team to register them in aanganwadis, discussion with AWWs and Samuh members to understand some of the challenges of aanganwadi functionaries , hygeinic arrangement for washing of utensils, etc.

#### 4. SUPPORT TO WORKING WOMEN

- **COMMUNITY CRECHE**

With more women stepping out for work to supplement family incomes, there was a greater need for a crèche within the basti, for the care and protection of their younger ones. There are few creches available around the basti, however there is always an increasing need of these services, especially a neighborhood centre. Thus a crèche was opened by a woman residing in the Kot Mohalla area of the basti. She has also worked as a part time worker with the community health based initiatives of the project and has an understanding of health and care needs of young children.

The crèche being in the neighbourhood, is very convenient and is a flexible model as the timings are based on work timings of parents. The crèche runs from 9:00 am to 2:00 pm and there are currently 18 children coming to the crèche between the ages of 1 to 6 years old. The

families contribute some amount as fees and AKF is subsidizing some of the costs till it becomes a profitable venture and it also generates income for the woman running creche.

- **ANGANWADI CUM CRECHE**

After continued dialoguing, the Department of Women and Child Development approved to begin an aanganwadi cum crèche in Nizamuddin basti. The Anganwadi worker and additional Creche worker have been deputed by Aga Khan Foundation while the helper has been assigned by Department. In addition AKF has also provided resource support for set up of aanganwadi-cum-creche. The crèche became functional on 5<sup>th</sup> June 2017, providing affordable care to 19 children of working parents enrolled here.



## CHALLENGES

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.

**Aanganwadi workers from outside the locality** which implies lower accountability to the community. This also leads to delays in arrival and irregularity in the functioning of the aanganwadis

**Aanganwadi workers perception of their workload**; they have spoken on several occasions and forums on their workload and diversion from their primary responsibilities leading to a dilution of the six key ICDS services that are to be implemented through the aanganwadis.

**Low motivation for community activities like preschool education, growth monitoring and community meetings** has also been. It does not feature as high priority task in the scheme of

things at the Aanganwadi centre as the most measured activities are supplementary nutrition and immunisation.

## **WAY FORWARD**

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.

**Motivation to the Aanganwadi workers** by improving their status would be crucial in improving their performance and accountability.

**Legitimation of community based monitoring** by the DWCD would increase accountability.

**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.

A **structured programme for mothers meetings** at the aanganwadi centres could go a long way in engaging with mothers.

**Building capacities of both Anganwadi 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.

**Strengthening of mothers' groups** is going to be a major part of next phase of the programme. The role of community is very crucial in making the programme effective and successful.