

1	2	3	4
21	Orissa	40.7	65.0
22	Punjab	24.9	66.4
23	Rajasthan	39.9	69.7
24	Sikkim	19.7	59.2
25	Tamil Nadu	29.8	64.2
26	Tripura	39.6	62.9
27	Uttar Pradesh	42.4	73.9
28	Uttarakhand	38.0	61.4
29	West Bengal	38.7	61.0
	India	42.5	69.5

Shortcomings in implementation of ICDS

2590. PROF. ANIL KUMAR SAHANI: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether the National Institute of Public Cooperation and Child Development (NIPCCD) conducted an evaluation study entitled 'Three Decades of ICDS' and noticed shortcomings in the implementation of ICDS and if so, the details thereof;

(b) whether no action has been taken by Government to remove the shortcomings noticed in NIPCCD survey; and

(c) whether only 50 per cent children under ICDS were getting supplementary nutrition and if so, the steps taken to provide supplementary nutrition to all the targeted children covered under ICDS?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI KRISHNA TIRATH): (a) and (b) Yes, Sir. The study conducted in 2005-06, covered 150 ICDS Projects from 35 States/UTs covering rural, urban and tribal projects. Major shortcomings in the implementation of ICDS Scheme observed by the study are as below:

- Around 60 percent Anganwadi Centres (AWCs) studied, had no toilet facility and in about 17 percent AWCs, this facility was found to be satisfactory;

- 44 per cent of AWCs covered under the study were found to be lacking in pre-school kits;
- 52.9 per cent of AWCs reported interruption in supply of supplementary nutrition. Major reasons causing disruption reported were delay in supply of times of supplementary nutrition;
- 36.5 per cent mothers reported non-weighment of new born children;
- Coordination of ICDS functionaries with Health Department was lacking at field/village level, especially in tribal areas and even in projects which are run by NGOs. This resulted in not-so-regular health check-ups at Anganwadi level.
- 29 per cent children were born with low weight which was below normal (less than 2500gm);
- 37 per cent AWWs reported non-availability of materials/aids for nutrition and health education; etc.

Soon after the findings of the NIPCCD survey were made available, all States/UTs were requested to address the deficiencies identified in the study, including filling-up of vacancies at all levels, operationalization of new projects/AWCs, better coordination and convergence with various departments especially with health. Besides, steps have been taken by the Government of India in the recent past to increase the coverage and effectiveness of the delivery of services under ICDS. Some of them are:

- (i) Universalization of ICDS scheme through the third phase of expansion of the scheme sanctioning 789 additional Projects, 1.89 lakh additional AWCs and 77,102 Mini-AWCs with special focus on coverage of SC/ST and Minority population.
- (ii) Revision in cost norms of existing interventions;
- (iii) Revision in nutritional and feeding norms of supplementary nutrition;
- (iv) Provision of flexi-funds at Anganwadi centre level;
- (v) Introduction of new World Health Organization (WHO) Growth Standards Introduction of a common Mother and Child Protection Card for both ICDS and NRHM to strengthen the continuum of care for pregnant mothers and children under three years of age, Etc.

(c) The supplementary nutrition under ICDS is self selecting. It is difficult to give the exact number of beneficiaries as it would vary from month to month. However, from the data made available by the States/UTs, of the 11.85 crore children (0-6 years) in 11.04 lakh operational AWCs/Mini-AWCs across the country, 7.18 crore children in the age 6 months to 6 years were availing supplementary nutrition under ICDS as on 31.12.2009. This comes to 60.61% of the surveyed children. The NIPCCD study has also revealed that 78% of the registered children 6 months to 3 years old and 75% of 3-6 years old children were availing the supplementary nutrition in the sampled 150 projects across 35 States/UTs.

Although the ICDS Scheme is intended to cover all children of 0-6 year of age, yet the Scheme is self selecting. States have been requested to operationalise all pending AWCs/mini-AWCs. Population norms for opening of an AWC/mini-AWC have been revised for better coverage. Nutritional and financial norms of supplementary nutrition have also been improved.

Aid to rape victims

2591. SHRI RAJEEV CHANDRASEKHAR: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) the number of rape victims registered during the last three years, year-wise;
- (b) the details of the amount of aid provided to such victims; and
- (c) the steps taken/proposed to be taken by Government for rehabilitation of such victims?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI KRISHNA TIRATH) : (a) As per the National Crime Records Bureau data, 19348, 20737 & 21467 cases were registered during the years 2006, 2007 & 2008 respectively.

(b) and (c) There is a proposal to provide for relief and rehabilitation of rape victims, the Scheme is yet to be finalized.

Implementation of ICDS

2592. SHRIMATI MOHSINA KIDWAI: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) whether in view of mounting evidences of malnutrition deaths in various States particularly in Madhya Pradesh, Orissa and Bihar, the Ministry has urged all the State Governments to ensure better implementation of the ICDS programmes;