

ICDS: Steering an Ungainly Ship

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KR Venugopal, formerly with the Government of Andhra Pradesh and former secretary to the prime minister of India, reports here on a social audit of Integrated Child Development Services (ICDS) in the Anantapur district of Andhra Pradesh. As we know from other reports, the account here is a good representation of ICDS performance throughout the country.

As stated early in the book, the purpose of the social audit is “to see whether the scheme is achieving its stated objectives”. Of course, the answer was already well known. The audit confirmed the obvious weaknesses, and offered a deeper understanding of them. The shortcomings of ICDS are well-documented, in this book and elsewhere.

Later, Venugopal says, “It is vital that social audit is seen as a dynamic process tool, aimed at triggering accountability amidst unequal power relations to ensure delivery of legally enshrined rights”, and speaks about changes the audit is intended to accomplish. Is the social audit a one-off assessment, largely by outsiders, to see whether the scheme is achieving its objectives and to describe its problems? Or, is it to be a permanent component of the programme, ensuring accountability on a regular basis? Is the social audit primarily about diagnostics, or is it seen as the remedy for the problems?

Navigation and Goal-Seeking

Venugopal offers many good recommendations for strengthening ICDS. There have been many other’s suggestions,

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including my own recommendations for a more strongly rights-based programme (“ICDS and Right to Food”, EPW, 11 November 2006). However, it is possible to become overly absorbed in the details of service delivery, and lose sight of the major goals. Perhaps an approach could be devised that would pull together many of the diverse suggestions.

In the book’s Foreword, Muchkund Dubey, the president of India’s Council for Social Development, insisted, “we cannot afford to let this flagship continue to drift. We have to bring it safely to harbour”. That raises a sharp question. How could ICDS be decisively navigated to achieve its goals? Implementing a few improvements might do no more than leave ICDS to drift from another position. How does one steer such an ungainly ship?

It might be useful to reflect on how navigation and goal-seeking actually work.

Some organisations, such as successful businesses, are good at achieving their goals. They have clear goals, such as maximising profit. Management continuously fine-tunes the variables that are under its control, allocating and reallocating resources with an eye on the impact in achieving the goal. Usually, the adjustments are small, but at times management might take bold steps. The Japanese describe this as *kaizen*, meaning management through continuous improvement.

Unfortunately, social service organisations often “fly blind”. They might focus on the achievement of service delivery targets, but have no clear idea of how that might relate to goal achievement. Many organisations have little clear data to guide their day-to-day management, and thus their operations become ineffective, and they fall short in achieving their goals. In some cases the goals themselves are not well-articulated. With a clear understanding of what is required in goal-seeking, changes in their methods of operation could lead to stronger results, achieved at lower cost.

Monitoring and Feedback

Pursuing a goal requires steady monitoring and feedback – not just an occasional social audit. Monitoring tells you where you are and allows you to compare that with where you want to be. A signal conveying the difference between the two, fed back to an adjustment mechanism, like a rudder on a boat, can be used to carry out commands to correct the position.

To get your boat to a chosen port, you need a navigator and some means for steering. Whether in mechanical systems or social systems, successful goal-seeking requires regular mid-course corrections. You have to pay attention and make constant adjustments to keep the vehicle headed towards your destination. There must be constant corrections for deviations from the path towards the goal.

There is self-regulation of this sort in mechanical, biological, ecological, social and other kinds of systems. A target is set, and some mechanism makes adjustments as needed to return the system to the desired path.

Goal setting must precede goal-seeking. Absent or muddled goals make systematic goal-seeking impossible. In some

cases it might not make sense to set precise goals. Having no clear goals can be a good way of avoiding criticism about having failed to achieve the goals. This might be why some workers prefer to avoid discussion of goals.

ICDS Goals

Where clear goals are established, an organisation that wants to see them achieved will need a method for making systematic mid-course corrections on the way to achieving them. Where there is reluctance to set up effective goal-seeking systems, one should question the seriousness of the commitment to the goal.

These concepts could be applied in a systematic way in the management of ICDS, to guide it towards achievement of its goals.

ICDS was launched in 1975 with the following goals:

(i) To improve the nutritional and health status of children below the age of six years and pregnant and lactating mothers. (ii) To lay the foundation for the proper psychological, physical and social development of the child. (iii) To reduce the incidence of mortality, morbidity, malnutrition and school dropouts. (iv) To achieve effective coordination of policy and implementation among various ministries to promote child development. and (v) To enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper health and nutrition education.

These goals are pursued by providing six major services: (1) supplementary nutrition, (2) immunisation, (3) health check-up, (4) referral services, (5) pre-school non-formal education, and (6) nutrition and health education.

Achievement of Goals

All of these services contribute to the achievement of the goals in some measure. However, the anganwadis differ, so results would vary even if they were treated in the same way. No matter what the total budget might be, there is a question of how those resources could be allocated in the best possible way for the achievement of the goals.

How could the optimum mix of services be identified? In theory the question could be addressed in analytical terms,

using mathematical models for optimisation of the use of resources. However, the data available in ICDS are not of a quality that would allow useful formal analysis. The alternative is to make regular incremental changes to improve outcomes in accordance with the best judgments that can be made on the basis of available information.

Consider, for example, the issue of child mortality, children who die before the age of five. According to World Bank data, India's child mortality rate for 2010 was 63, meaning 63 children died before their fifth birthdays for every thousand born alive. The rate for India was comparable to that for many low-income countries, but since India is such a large country, its number of child deaths was extraordinarily high. In 2010 India had about 16,96,000 child deaths, 22% of the world total of 76,14,000 child deaths in that year.

As part of its work towards reducing child mortality (ICDS goal iii), India could set a target of reducing child mortality rates in every one of its states to, say, 40 or lower. Annual reports on child mortality from each state of India would help ICDS managers to judge what works in reducing the rate. Anganwadi workers in states that reduce the mortality rates significantly could be recognised and perhaps awarded bonuses, and the ICDS managers could pay closer attention to the lagging states to determine what could be done to improve the situation. After the child mortality rate was reduced to 40 in all states, the target could be reset to a lower number.

The quality of child mortality data depends on the country's vital registration system, the system for collecting information on births and deaths. The government would need to collect that information, compile it into orderly data records, and transmit those records to key ICDS managers on a timely basis. ICDS could work with annual reports on child mortality in each of India's states. Careful study of these data by the national ICDS office, coupled with deep knowledge of conditions and of ICDS actions in each of the states, should give the managers a clear idea of what works and does not work, and guide them in making adjustments.

State-level managers, using reports of child mortality based on districts within the state, could use the same approach. If the target was to reduce the national child mortality rate to, say, 40, then every district of the nation would be asked to pursue the same target. Through this approach, attention and other resources could be focused on those locations with the greatest need for improvement.

This approach to reducing child mortality could be adapted to achieve steady improvements in nutrition status, education status, and many other indicators of interest. It could be used to support clearly defined sub-goals, especially those related to major deficiencies highlighted in the social audit. For example, the fact that "attention to the 0-3 cohort is admittedly dismal" could be corrected in part by doing more to promote optimum breastfeeding. NGOs with expertise on the topic, such as the Breastfeeding Promotion Network of India, could help in establishing targets and monitoring systems.

Preparation of Reports

Annual reports might be sufficient when dealing with slow-moving indicators, especially those based on high levels of aggregation, such as child mortality rates. For other indicators it would be better to have more frequent reports. For example, children who are significantly underweight for their age and gender should be monitored at least monthly, with treatments adjusted as needed. With full use of computers and the internet, the time lag between data observations, adjustments and new data observations could be sharply reduced. Effective navigation requires short time lags between observations and adjustments.

With suitable monitoring arrangements, it would be possible to examine broad hypotheses about what works. For example, the idea of providing bonuses to ICDS workers for producing good results might sound attractive, but various arrangements for doing that would have to be tested to determine which were actually effective.

Similarly, it might be that ICDS has gone too far in feeding children directly, taking over some of the normal functions of parents and, in effect, marginalising

