SECTION I
LITERATURE REVIEW
The Literature review involved three main aims to be fulfilled. First, we wanted to build an understanding of the construct of early childhood from different perspectives - theoretical, research and regarding laws & the policies of the country. Second, to build on this framework, we have included effective national and international curricula, which capture the wide range of good practices in ECCE in the country and in the world. Third, the review also takes into account the socio, economic and cultural ecology of the child to emphasize on the context in which the child and the family lives.

**PROCESS OF THE LITERATURE REVIEW**

The Literature review begins with discussion on the significance of the preschool years in terms of rapid periods of physical growth and brain development. This is followed by a brief profile of the young child in India. The Review further proceeds towards exploring the Education/development component of the ECCE framework. This includes Active Stimulation, Social Skills, Language and School readiness. Certain ECCE curricula have been included in the review to emphasize on the nature of effective practice and diversity of curricula. A brief summary about ICDS and its functioning in India is followed by the implementation and its status in the Nizammudin basti. The review also looks into essential principles that guide an effective ECCE curriculum. Finally the literature review will shed light on the Agha Khan Foundation - Basti relationship in terms of what is already being done in the area of ECCE.

**1. THE EARLY YEARS**

As diverse is the country in terms of culture and policies for different categories of people, so are the early childhood education services available for children and families. Over the years, the importance of Early Childhood Care and Education has been augmented by compelling research evidence, that confers an indispensable relationship between the holistic development of child and early child childhood education provided to him/her.

**1.1 The Critical period of Growth and Development**

The Preschool years (age 0-6) have been termed significant period by widespread fields of study including Nutrition, Child development and psychology for several reasons. It is a period of rapid growth and development of the brain as well as the body. The health, nutrition and psychosocial development are three major aspects that are fundamental for assuring child's as well as family's wellbeing.
Recent research in the field of neuroscience has provided with convincing evidence that the early years of life are entailed in 'critical periods' that lay the foundation for later development of the child. What therefore is of important concern is the enabling environment provided to the child. Figure 1 depicts the critical period for various aspects related to the cognitive development of the child.

Figure 1: Critical Period for various aspects related to Cognitive development (0-6 years)

![Graph showing critical period for various aspects related to cognitive development](image)

Source: Reaching Out to the Child, HDS, World Bank, 2004

The National Focus Group report (NCERT, 2006) state three important factors (also reflected in the Millennium Development Goals) that contribute to both cognitive and physical development of the child:

- Child's Health.
- Child's Nutrition
- Child's emotional and Psychosocial development

All the three aspects account for two important principles that emphasize on child's development being **continuous and cumulative**. Hence any form of intervention should address the entire childhood continuum. All the above mentioned aspects are synergistically interrelated (Working group on children under six, 2007) hence any intervention should be **holistic in approach**. Also, child development is optimized when the particular intervention is inclusive of the context in which the child lives.

Figure 2 shows the development of the child in the three areas over a period of 6 years.
**Prenatal to one month**

**Determinant**
- Maternal health, nutrition adequacy and quality of care of newborn
- Safe delivery, family and community support for the mother and baby
- Environmental hygiene, safe water and sanitation

**Outcomes**
- Healthy responsive newborn

**Indicators**
- Mother not anemic or underweight
- Child weight more than 2500 grams
- Child moves head side to side on being stimulated

**One month to three years**

**Determinant**
- Nutrition adequacy, including exclusive breast feeding
- Responsive complementary feeding, quality of mother/caregiver-child interaction
- Immunization, management of diarrhea and other illnesses
- Health and hygiene practices
- Sensory motor and language stimulation and opportunities for play and exploration
- Cultural attitudes and stereotypes

**Outcomes**
- Freedom from intermittent diseases (diarrhea and ARIs)
- Nutritional security
- Curiosity, sociability
- Confidence—self help and sensory motor skills

**Indicators**
- Full immunization by end of year one
- Completion of all prophylaxis (e.g., vitamin A) by end of 3 years
- Toilet trained
- Ability to communicate clearly and confidently
- Sociality and ability to stay away from family for a few hours
- Appropriate height and weight for age
- Age-appropriate gross motor and auditory visual skills

**Three to six years**

**Determinant**
- Quality ECCE
- Basic healthcare services including disability screening
- Nutrition adequacy and incidence of intermittent diseases
- Literacy level of parents, educational environment at home

**Outcomes**
- Interest in learning and school readiness skills (language, numeracy and psychological skills)
- Activeness, self-confidence, awareness of environment
- Freedom from intermittent diseases, nutritional security
- Management of any identified disability

**Indicators**
- Active participation in ECCE activities
- Ability to narrate experience confidently
- Demonstration of curiosity
- Age-appropriate self-help and social skills
- Age-appropriate height and weight
- Regular pre-school attendance

**Six to Eight years**

**Determinant**
- ECCE experience/school readiness
- Access to schooling
- Nutritional adequacy
- Quality of school
- Socio-cultural factors—extent of inclusion (gender, tribe, caste, etc.)
- Early detection of learning disabilities
- Social norm, role-models and supportive home environment
- Safe water and sanitation, incidence of infestation and infection affecting regular attendance
- Female teachers

**Outcomes**
- Sociability, self-confidence/self-esteem
- Ability to read and write, with a continued interest in learning
- Freedom from anemia and intermittent diseases

**Indicators**
- Demonstration of competencies for class 2 by the end of age 8
- Regular attendance
- No worm infestation or anemia

*Source: New Concept Information Systems 2003*
Consequently, an Early Childhood Care and Education (ECCE) programme should be inclusive and integrate the different components of Nutrition, health and Education to ensure optimum development of the child.

1.2. The status of the Young Child.

As of 2011, there are the population of children under 6 is 158.8 million (Census, 2011) and form 13.12 % of the total population. The child sex ratio has declined to 914 females per 1000 males in 2011.

Further focussing on the health component, the status of the young child is dismal. Almost half (46 per cent) of all children under three are under weight (NFHS-3, 2005-06). Only 44 per cent of all children in the 12-23 months age group have received all recommended vaccines and only half the pregnant women had at least three ante-natal check-ups. The Infant mortality rate is 57 per 1000 live births. Under the nutrition component, India is home to largest number of malnourished children in India (UNESCO, 2003), 47 per cent of all children below 2 years are malnourished. There are almost 80% of children in age group of 6-35 months who are anaemic. Only 46% children are breastfed exclusively for the first six months (NFHS-3, 2007).

Looking at the Development/Education component, about 60 million children, less than 5 years of age, live below the poverty line (UNESCO, 2003). Amongst them, only 19.4 million children (3–5 years) receive Early Childhood Education under the Integrated Child Development Scheme (ICDS), India's Largest Early childhood care and Education programme.

A major shift in the focus on Early childhood and Education was provided by the eighty sixth amendment in article 45 of the Indian Constitution that stated, “The State shall endeavor to provide early childhood care and education for all children until they complete the age of six years”. Several ECCE practitioners have expressed their disappointment in the apparent weak enforcement for the young child in the law disregarding the needs and rights of the child (NCERT, 2006).

2. SO WHAT IS ECCE?

ECCE was first defined in the Indian policy framework in 1986 with the National Policy of Education, as an integrated and holistic aspect of care and education of children between 0-6 years of age (Kaul & Sankar, 2009). The care (and early stimulation) component forms a prominent part of 0-3 years. The care aspect along with Early Childhood Education form the essential part of 3-6 years. Thereby, while planning any provision in the spectrum of early childhood care and education, it is essential to consider the age group of the child (Working group on children under six, 2007).
Strategies for Children under Six, a document prepared under the Planning Commission in 2007, provide the details of strategies and effective practices in the different age groups with regard to Early childhood care and Education.

<table>
<thead>
<tr>
<th>Components</th>
<th>Age 0-6 months</th>
<th>Age 6 months-3 years</th>
<th>Age 3-6 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Immunization, growth monitoring and support in neonatal care</td>
<td>Immunization, growth monitoring and iron supplementation</td>
<td>Immunization, growth monitoring and iron supplementation</td>
</tr>
<tr>
<td>Nutrition</td>
<td>Exclusive Breastfeeding, Counselling and supplementary nutrition to the mother</td>
<td>Supplementary Nutrition</td>
<td>Supplementary Nutrition</td>
</tr>
<tr>
<td>Development/Education</td>
<td>Creches and maternal Entitlements</td>
<td>Creches</td>
<td>Preschool education that is play based and joyous, Creches</td>
</tr>
</tbody>
</table>


2.1 The Education/development component

The Literature review now focuses on the Preschool Component of ECCE. A Child Centered approach to education is pertinent for holistic and active participation of the child. This is a critical period as the child moves out of the realm of family into the community and expands her/his understanding of the outer world (Kakar, 1983). It is during the Early childhood period that children begin to gain understanding of their surroundings and develop attitudes, values, beliefs, skills and behavior that will become an essential part of their thought process as they grow. Hence Early childhood education lay the foundation stone for the child's physical, cognitive, socio-cultural-emotional development. ECCE begins from the family and their immediate community which includes adults and their age mates. Soon many children enter into formal settings of ECCE, where they experience structure and chaos both at the same time.
2.2 Components of ECCE

Early childhood education is much broader and inclusive in capturing the developmental needs of the child than preschooling (UNESCO, 2007). The following components form a significant part of all activities and experiences that the child should inculcate in an ECCE setting.

2.2.1 Active Stimulation should be considered as a major component of ECCE. Young children learn by touching and feeling things in their environment. The use of the five senses rapidly evolves during this period. A common sight is that of children manipulating objects in their surroundings, exploring the nature of live and inanimate things using trial and errors. Stimulation within a caring environment provides a secure base (Ainsworth & Bowlby, 1991) for the child to seek her/his environment and make meaning of the world around.

2.2.2 Social Skills are integral to the healthy development of the child. Warm and positive relationships that children form with adults during this period has long term impact on their lives (NCERT, 2006). The trusted adult enables the child to get familiarized to her/his cultural setting. The emotional support and affection that the child receives ingrains a sense of personal and physical security. It also engenders a sense of competence and builds on the child's self-esteem (Bandura, 1989). The child gains the understanding of empathy, sharing one's feeling and generates a sense of autonomy to practice these newly acquired skills (Erikson, 1950). For example, an early childhood education worker asking the child about his day's experience or daily routine in his family not only gives the child opportunity to speak, but also facilitates her/his identification with the cultural setting and knowledge of the diversity of experiences that children have.

2.2.3. The role of Language as an imperative source for the child to construct knowledge has recently gained momentum (Mohanty, 2006). Research validates that development of language is a result of shared process in a cultural setting. It not only enables a basic comprehension of the world around the child but evolves its understanding in a socially embedded system (Mohanty, 2006, Viruru, 2001). For example, the ways in which children interpret relationships, deal with problems of word order and grammatical relationships will different for different languages (Kuntay & Slobin, 1999). This aspect also highlights the importance of diversity in a group which is common scenario in a widespread community in India. Such experiences also lead to increased familiarity with other cultures. The child becomes respectable and inclusive of others needs and also takes pride in her/his background. Several Researchers also emphasize the significance of learning in one's mother tongue. Children who communicate in their mother tongue face lesser problems in a ECCE setting (NCERT, 2006). But it is not an easy task, given that the teacher has to know the mother tongue of so many children. The problem can be
solved if the teacher is sensitive and provides opportunity to the child to interact in her/his mother tongue. For example, if a teacher asks all the children to wish morning in their own mother tongue, she/he is including language as a medium to build relationships without much training required.

2.2.4. School Readiness is an essential component of ECCE. It involves the development of basic skill that would enable children to read and write when she/he enters primary school. School readiness also includes the introduction of structure and routine that the child is most likely to experience in a school setting. The grasping skills enhanced by manipulating blocks and toys also need to be familiarized with holding pencil to draw, write etc. Providing the freedom to scribble and draw without restraint of boundaries encourages the child to explore beyond the textbooks. The foundation for Readiness in terms of numeracy and reading skills is also laid during ECCE. The child learns better in a familiar environment. Use of traditional ways to teach words like folk stories and identifying things at home are always considered better than trying to explain the child about an alienated environment.

School readiness shouldn't incorporate a downward form of primary schooling (NCERT, 2006). This is to say that too much structure, rote learning and excelling in reading and writing words should not be forced upon children.

These four major components together, result in an integrated education and development. Some common principles to be followed by all the components are as follows:

- Development of any curricula for ECCE should be appropriate to the local socio-economic and cultural context of the child. A child going to a rural early childhood setting compared to a child going to a private preschool will have different resources and social meaning attached to the curricula. However every child has a right to quality intervention irrespective of the context.

- A common thread that binds all the components is the Early childhood teacher who should be a facilitator to the child. She/he by providing opportunities for experiences and support scaffolds the child’s learning to a higher level (Vygotsky, 1978). Another important factor is the willingness of the teacher to involve the child in everyday decision making.

National focus group report (2006) mentions four major aspects that should be the objectives of an effective curriculum (pp36):

- Developmentally appropriate, activity based, and related to the child’s needs, interests, and abilities, according to age;
An integrated set of experiences to foster holistic growth and development in all domains, such as health and well-being, and cognitive, physical, social, emotional, and language development through an interlinked approach;

Flexible enough to suit the diverse social, cultural, economic, and linguistic contexts of our country, as well as adaptable enough to suit individual differences among children;

Able to help the child to adjust to the routines of primary school as well as to the demands of more formal teaching

3. SOME EFFECTIVE NATIONAL AND INTERNATIONAL EARLY CHILDHOOD CURricula

This section of the review discusses some of the Early childhood curricula that has been functioning in different parts of the country and the world. Myers (1992) candidly wrote that when one thinks of an ECCE program, a common picture drawn is that of 25-30 children, playing with blocks in shelter that is bright and colorful. There are joyous faces and voices of 3-5 year olds around the house. The entire scenario is supervised by a 'preschool teacher'. The mammoth diversity with which these ECCE programmes thrive debunks any such picture. Besides the socio-cultural practices of the place, the programme is indispensably effected by the resources available, the involvement of the head, inclusion of the community along with thoughts and beliefs of people about the importance of ECCE programme for the young child and the family.

Myers gives a comprehensive framework for an ECCE programme that is essential for its effectiveness.
These programmes are not 'traditional' nor 'expensive' but enhance well-being of children in their sociocultural milieu considering the developmental as well as ecological aspects that influence the child. These programmes provide a learning environment to the child besides the home. The success of any ECCE programme is measured in terms of how it has impacted the child's health, nutrition and psychosocial development (Myers, 1992).

**Integrated Child Development Centres**

With an integrated approach to development, these centres combine the health, nutrition and psychosocial development to ensure a holistic approach to child's growth and development. In several cases, these programmes extend into community development programs.

**3.1 A Brazilian Approach - PROAPE**

It is an integrated ECCE centre where children in the age group of 4-6 years receive food and nutrition supplementation. The programme also involves children in psycho-motor activities and in also includes the health component (vaccination,
checkups). Along with a preschool teacher, volunteers (mothers from the community) participate on rotating basis. It was found that the repetition rate of children who participated in these programmes reduced (Myers, 1992).

### 3.2 The High scope Curriculum-Michigan

The curriculum developed by David Weikart was designed to work with children and youth in disadvantaged conditions. Longitudinal studies have shown that children from this program have adopted better to societal demands and have had better employment opportunities. The principal focus of the curriculum is on active learning and this is realized by encouraging children to pursue their personal interests and goals by making choices about activities and materials. The curriculum lays down the key experiences categorized into 5 groups that are essential for healthy development of the child.

Figure gives a description of the categories of key experiences of the child

<table>
<thead>
<tr>
<th>Key experiences for young children – 5 groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Creative Representation (to draw, paint, role play, pretend, make models).</td>
</tr>
<tr>
<td>2. Language and Literacy (to talk about personally meaningful experiences, describe, write, have fun with language.)</td>
</tr>
<tr>
<td>3. Initiative and Social Relations (to make plans, decisions, solve problems encountered in play, express feeling, be sensitive to others.)</td>
</tr>
<tr>
<td>4. Movement and Music (to feel and express steady beat, move in various ways and with objects, explore the singing voice, develop melody)</td>
</tr>
<tr>
<td>5. Logical Reasoning (to classify--explore and describe similarities, differences, and attributes of things; to seriate--comparing, arranging and fitting and ordering things by attributes; to develop number--comparing, one-to-one correspondence, counting; to be aware of space--changing shape, experiencing different play spaces, and interpreting spatial relations; to be aware of time--starting and stopping, time intervals, anticipating and describing sequences of events.)</td>
</tr>
</tbody>
</table>

These five categories of key-experiences represent objectives of learning as well as the act of learning. They form the content that teachers use to evaluate child progress on the High/Scope® Child Observation Record.

Source: OECD, 2004
The teachers and caregivers are partners who work with children at the same level facilitating the learning process of the child. The curriculum teaches academic skills through sequenced activities, drills, telling and reading stories to the child. Art and music are an essential part of the everyday activities. This art based approach to learning and effective use of language is an integral part of the High scope curriculum.

3.3 The Guatemela Community Day Care Program

It was established in the early 1990s to provide facilities for health, nutrition and development for children of poor communities in Guatemela. It is currently underway in many Latin American Countries. Its main aim was to help working women in urban areas who would send their young children to the centres allowing them to work outside without worrying about who is going to take care of their children. To ensure the overall development of the child, the program also initiated community participation.

A group of parents select a woman from the local community who is the caregiver for 10 children in the age group of 0-7 years of age. Parents make a small monthly contribution to sustain the program. Children receive hot cooked meals, care, affection and hygiene is maintained.

An assessment undertaken by Ruel and Quisumbing (2005) claimed that the program provided high quality and affordable child care providing integrated development to children and freedom for mothers to work outside.

3.4. Te Whāriki- A New Zealand Approach

This curriculum embraced a socio-cultural approach to learning based on learning dispositions, placing the child in the context of multiple cultures reflecting the reality of the child. The five major aims to be fulfilled for the child were:

- Mana Atua/Well-being
- Mana Whenua/Belonging
- Mana Tangata/Contribution
- Mana Reo/Communication
- Mana Aoturoa/Exploration

Family was enunciated as a key factor in holistic development of the child, that is only possible in presence of responsive and reciprocal relationship.
The following table provides an explicit description of the different aspects essential for development.

<table>
<thead>
<tr>
<th>Development, cultural and learning goals for each strand</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>The health of children is promoted</td>
<td></td>
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<tr>
<td>Their emotional well-being is nurtured</td>
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<tr>
<td>They’re protected and safe from harm</td>
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<tr>
<td>Connecting links with the family &amp; the wider world are affirmed and extended</td>
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<tr>
<td>They know that they have a place here</td>
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<tr>
<td>They feel comfortable with the routines, rituals and regular events</td>
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</tr>
<tr>
<td>They know the limits and boundaries of acceptable behaviour</td>
<td></td>
</tr>
<tr>
<td>There are equitable opportunities for learning irrespective of gender, disability, age, ethnicity or background</td>
<td></td>
</tr>
<tr>
<td>They are affirmed as individuals</td>
<td></td>
</tr>
<tr>
<td>Opportunities to learn with and alongside others are encouraged</td>
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<tr>
<td>They develop non-verbal communication skills for a range of purposes</td>
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<tr>
<td>Play is valued as meaningful learning, and spontaneous play is important</td>
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<tr>
<td></td>
<td></td>
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<tr>
<td>They develop verbal communication skills for a range of purposes</td>
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<tr>
<td>They experience the cultures’ stories and symbols</td>
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<tr>
<td>They discover different ways to be creative and expressive</td>
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<tr>
<td>Confidence in the control of one’s body is developed</td>
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<tr>
<td>They learn strategies for active exploration</td>
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<tr>
<td>They develop working theories for making sense of their living physical and material world</td>
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</tbody>
</table>

Source: OECD, 2004

Based on specific needs and capacities of the child, the programme categorizes children into 3 groups - infants (0-18 months), toddlers (18-36 months) and young children (2.5-5 years).

3.5 ECCE services in India are vast and widespread. Government, Private and Public sector provide early childhood care and education services to children and families. The variations are evident in terms of content of services, teaching standards, training, quality assessment, budget and salaries (NCERT, 2006). According to a government report, amongst the children in the age group of 3-6 years, only 19.64% are covered under ECCE programmes like ICDS and others in the voluntary sector (MHRD, 2004). Though no clear estimates are available for private sector, some claim that only 1 crore children are covered. (NCERT, 2006)

The Government of India initiated the ECCE programme especially to cater to the disadvantaged section of the society. The Integrated Child Development Services (ICDS) programme spread throughout the country since its inception in 1975 and is the most cost effective ECCE programme. It is not only the largest ECCE programme in term of it size and spread but also the plethora of services it promises such as child care, health and nutrition, sanitation and community involvement.
The anganwadis are the ICDS preschool centres that have reached the remotest parts of the country. The programme also comprises of training all stakeholders, organizing awareness and advocacy campaigns.

There are many innovative ECCE programs thriving in different parts of the country that provide valuable learning experiences to the child as well as family and the community.

3.5.1 The Deccan Development Society (DDS)

Started in 1983 as a grassroot level organization works with 75 villages in Andhra Pradesh. Child care and education is an important area of concern for DDS. The DDS balwadis take care of Children of women who work in other sectors of the DDS. The balwadis have evolved into centres of creative learning and nutritional care. The community involvement is evident in terms of their contribution in cash and kind to ensure functioning of the balwadis. The 25 balwadis cater to 700 children in the age group of 1 and half to six years, 60% of whom are girls. There are two balwadi teachers, one for children of 1½ to 3 years and the other for children of 3-6 years. The balwadis run till 4 in the evening.

In terms of nutrition, children receive healthy, traditional food. A study on the balwadis claimed that none of the children in the balwadis were malnourished (Aide et Action, 2006). The balwadis follow a Monthly thematic curricular approach to early education experiences. Materials like games, songs, puzzles, creative work, and casual talk are developed on the chosen themes. Excursions are organized for children once a week. Also, exhibitions are held to show children work to their parents. All balwadis have drinking water and outdoor play facilities including sandpits.

Regarding health care, a trained health worker visits the balwadis every week and does regular checkups. DDS makes special effort to bring in local cultural consciousness amongst children through food, biodiversity, folk stories, and theatre. For example, they arranged children’s fair called Jatra where children played, danced, sang and ate together.

Every month, the balwadi teacher participates in training discussing their successes and issues of concern with each other so that eventually the training becomes a self-managed activity. The teachers also get together framing the contents for the curriculum which ultimately take the shape of Balwadi Patrika. A distinct quality for the DDS balwadis is the Community considers the centre as ‘Its own’. The supervisors, teachers and the community take the full responsibility supporting the balwadis by taking up roles for its smooth running.
3.5.2 Mobile Creches (MC)

Mobile crèches has been in the ECCE sector since 1969. The MC centres became trusted shelters for mothers who worked in nearby construction sites. Mobility that is an essential part of the program arose from the special needs of the family as they move from site to site due to their occupation.

MC works with a dual focus. **The Child below 6 years**- Intervention at this stage includes presence of a trained adult, early stimulation, nutrition and health care. The training for the staff takes place every month on different issues. MC also involves the youth and the wider community to sensitize others about several issues including the importance of ECCE.

The ECCE has three categories of children groups-

0-3 years (Creche section), 3-6 years (balwadi section) and above 6 years (Non Formal Education section).

In terms of Health and Nutrition, following measures are undertaken

- Supplementary Nutritional
- Immunization
- Special diet for malnourished child
- Care for pregnant and lactating mothers
- Health and nutritional education for parents and communities (Anandalakshmy and Balagopal, 1999)

**Education and Development**

Stimulation to the child is provided through creative ways like using low cost play materials. Caregivers involve children in dance and songs and make them participate in age-appropriate activities.

For the balwadi children, besides stimulation, simple concepts are explained using stories, songs, poems and extensive focus on the play-way method. A common thread that bonds all categories is **sensitivity to the socio-economic and cultural factors** of the families and involvement of the members of family and community. The figure shows the distribution of activities at Mobile Creches.
A very frequent site in a MC centre is that of children singing a song or playing a game doing actions and dancing with joy and laughter. A primary character of MC is that it strongly follows the policy of integration. For example, Infants and young children are there in the same centre doing activities sometimes together and sometimes separately. Health, nutrition and educational practices are all included in a day's schedule. The caregivers are trained to work with all age groups. It provides supervisory support and on the job training to all its workers.

3.5.3 Integrated Child Development Services (ICDS)

Constant Debates on whether ICDS is being implemented optimally, the budget allocated to the ECCE sector, the impact of voluntary and the private sector in ECCE have been going on for decades now. Though the poor implementation becomes evident in these debates, unfortunately, the largest and the most widespread programme of any kind - ICDS - have not
been assessed for its impact longitudinally. A more fundamental question to ask is what quality intervention is for ECCE. And how significant it is for the child as of now and for her/his future? But the fact remains that neither of the two questions has been discussed in form of evident based research. ICDS is the largest public provider of Early Childhood Education in India. The figure depicts the main components of the ICDS programme.

A study at NIPCCD (Gopal, 2008) presented at the Thematic workshop on ECCE for ICDS gives the present status of ECE in ICDS.

- There is a lack of proper programme planning.
- There is poor conceptual clarity about child development and learning amongst the functionaries.
- One of the major issues is the lack of infrastructure, proper equipment and space.
- The study observed weak linkages between the ECE centre and the family/community.
- The programme lays more emphasis on school readiness in terms of reading and writing compared to other aspects of cognitive development and other domains of development.
- There is poor coordination and supervision amongst the members at different hierarchical positions.
- The AWWs are poorly trained and most of the time overloaded with extra work.

Adhikari (NIPCCD, 2008) stresses that there is lack of age appropriate curricula and inadequate use of learning kits at the ICDS centres. There are limited efforts to sensitize the parents about the ECE programme of ICDS. The child below 3 years of age is not given enough focus in terms of ECE.

The current efforts to bring reforms in the ICDS programme have considered ECE as the main focus. The main aspects will be ensure an effective teacher child ratio, making the curriculum developmentally appropriate, progress monitoring and convergence with the primary schools (NCERT 2006).

### 4. ECE IN THE NIZAMUDDIN BASTI

The Nizamuddin Basti is an interesting paradoxical site which on one hand is rich with cultural heritage in form of shrines, mausolems and baolis and on the other hand it is a busy community clustered around the dargah with limited space depicting a typical picture of urban poverty (CECED, 2010). Located in the urban part of Delhi, it has a predominantly muslim population. An ecological approach to ECE intervention looks into the interaction between the child and his/her environment that includes the physical environment as well. The cramped spaces, accumulated of garbage, overburdened sanitation system are the immediate environment of the child in the basti. Amongst the total population of children in the age group of 3-5 years, 72.6% are going to school (CECED, 2010).

The study by CECED (2010) sponsored by the Agha Khan Foundation tried to ascertain the early childhood care and development of children between 3-5 years. In terms of health status of the child, 64% of the children were found to be stunted. Four out of five children were found to be anemic. To assess the school readiness, the study administered the School Readiness Scale (World Bank) scoring children on pre number and space concepts, Sequential thinking, seriation, pattern making, word and sentence making and following instructions. Out of a maximum score of 40, only 3 out of 32 children scored more than 30. A significant finding was that 2 out of 3 children who went to AWC scored well but their performance can’t be exclusively credited to AWC (CECED, 2010).

**Early Childhood Educational services in the Basti**
There are seven anganwadi centres within the community, 2 schools run by NGO, a nursery class in an MCD school and some private run preschools (CECED, 2010). These 7 AWCs cater to a population of 12500 people and naturally perceived as inadequate. The study found that 79% of the children were receiving preschool education out of which only 16.4% went to the anganwadis. The study assessed the quality of the AWCs using an adapted tool - Early Childhood Environment rating Scale.

- **Physical infrastructure** - the study found that there was shortage of space for children in the centres. There were hardly any toilet facility and no proper sitting arrangement. Safety of the buildings was questionable and there was inadequate storage space for teachers to keep materials.

- **Pedagogical Practices** - AWCs did not start before 10 despite the scheduled timing of 9 AM and the children were sent away by 11 instead of the scheduled 12 PM dismissal. The daily routine comprised of children sitting in rows, filling registers and records by AWW. Most of the times, children were ask to keep quiet and maintain order. Sometimes, children along with AW sang a few rhymes. There was no fixed plan of activities and most of the time the AWCs blamed the inadequate infrastructure for the dismal situation of ECE in the centres.

5. **SO WHAT COMPRIS ES QUALITY ECE CURRICULUM.**

Indicators for norms and standards of ECE centres and curriculum are decided worldwide. The basic standards are affordable by all. Broadly speaking, a quality ECE curriculum must promote a healthy environment for the child, support the nutritional status and provides opportunity for psychosocial development (NCERT, 2006).

Some basic measures to be taken for quality program are:
The national Focus group report on Early childhood education gives some broad principles for curricular framework for ECCE (NCERT, 2006). These principles are essential for an ECCE program as it is not limited by resources or infrastructure facilities. These have been guided from the ideas of Gandhi’s Basic Education and pioneers like Rousseau, Froebel and Montessori, Vygotsky and other child development researchers.

- **Play as the basis for learning**

  Play stimulates curiosity and exploration, mastery of skill and body control. It also contribute to development of emotional and language skills. Simple, recycled, reused, local materials can be used as toys or other play material for stimulation and learning. Both indoor and outdoor free play is essential for development in all domains. Play is also evident in form of expression of free drawing and coloring.

- **Arts as essential to curriculum**

  Fostering contexts of joyful expression and exploring the environment using the senses is pertinent to learning. Aesthetic experiences through music and art provides opportunity to the child to express his/her creativity and provide freedom of movement. A simple example is that of singing songs with actions in the morning. Others include introducing drama in class using basic props. Other important aspect would be to enrich the child’s knowledge of local art work and heritage in his/her context through visits and sharing of experiences.
• **Recognizing special features of child’s thinking**

The teacher must understand that children have a natural desire and capacity to learn and explore the world to make sense of it. Common experiences along with Research hold that children learn through hands-on experiences, developing concepts through observations, conversations, experiencing environment with their sense of touch and expressing the meaning in different forms. Teachers must foster these experiences with freedom to explore and express their feelings.

• **Linking the Academic skills to the context**

The emphasis on the 3 R’s – Reading, writing and arithmetic should not undermine the remaining, more important aspects of the curriculum. However, a basic introduction of the concepts is essential for school readiness. Instead of a monotonous, repetitive and highly structured activity, the pre-literacy and pre-numeracy skills may involve art and play activities. Group interactions, storytelling, visual demonstrations like flashcards can be included in the curriculum in interesting ways.

• **Balancing formal and informal interactions**

Children must feel safe to express themselves without fear and recrimination. *Personalizing the pedagogical space* is crucial as children should feel free to discuss their thoughts in the preschool space. Besides formal sitting activities, there should be time for informal conversations where children talk of their personal experiences and events that hold special meaning in their lives.

• **Bringing in both Familiarity and Challenge**

Repetition is necessary to learning. It provides the child with the comfort of familiarity and enhances a sense of security. But it should not result in unnecessary rote learning. Teachers should be able to bring variety and flexibility in the curriculum by bringing in new challenges. Through this, the teacher scaffolds the child by starting at where the child is to where the child can reach through his/her potential (Vygotsky, 1978).

• **Diversity of Experiences**

Children should be a part of a diverse range of activities as they have varied cultural and social life experiences. Learning about multiple cultures through their languages, festivals, foods, habits will not only increase their awareness about social diversity but also enhance their tolerance and inclusive attitude to different cultures.

• **Including the local context in learning**

The curriculum should be able to extend in to the community and the families of the children. Asking children to get leaves, pebbles from surrounding and other harmless waste materials from home to do sorting and other activities will
enhance their social competence and will also work well for low cost ECCE settings. The benefit of including local arts, language, stories and folklore in to the curriculum is integral to inculcating the feeling of social inclusion in children.

- **Developmentally Appropriate activities**

The activities must spread across the domains of development that includes- physical, cognitive, social and emotional. These activities should be age-appropriate and respect the individual developmental trajectories. The teacher must ensure that the classroom experiences are multicultural, sensitive to gender/caste/ethical concerns. **The teacher should be a facilitator and not an instructor in the curriculum transaction.**

- **Orientation to life skills**

The wellbeing of the child should be of utmost importance in the ECE setting. Inculcation of life skills such as maintaining healthy habits of cleaning self and keeping the surrounding habits is imperative to any form of learning. This will also foster self-motivation and competency to take care of oneself. It also stresses on the social learning of caring and sharing to overcome social barriers and learn in an environment of harmony and joy.