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# FRAMEWORK TO STUDY EXCLUSION IN ICDS CENTRE: A CASE OF KANCHEEPURAM DISTRICT, TAMIL NADU

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#### **Abstract**

In India there is huge inequality in the various social and economic outcomes. To understand the inequalities in the society, it is required to understand the concept of social exclusion and discrimination from the Indian context. This paper has used the works of Amartya Sen, Naila Kabeer and Thorat to understand the concept. Using this concept this paper attempted to understand the existing forms of exclusion and discrimination in various government programme. Secondly, based on the study findings on ICDS programme conducted at Kancheepuram District, Tamil Nadu this paper examined how the inequality and exclusion is continuing in the society at the grass root level. The study was conducted in 11 villages using mixed method, information was collected from 102 respondents, service providers and key informants. The study used Macintyre framework to understand the functioning by looking at the contextual, compositional and collective factors. The study proposes a framework to understand the exclusion in ICDS centre. The findings have shown that there is both general and group specific problems. There are problems at the resource allocation for infrastructure, man power, administrative, priority and lack of support from the PRI and community.

Key Words: Exclusion, Discrimination, ICDS, Undernutrition, Government Programme

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#### 1. Introduction

Eradicating poverty lies at the heart of the development policies of all the developing countries, where a large chunk of population are living in the intolerable circumstances in which starvation is a constant threat, sickness is a familiar companion, and oppression is a fact of life (Kanbur& Squire, 2000). The definition of poverty, beginning with a focus on command over market purchase goods (income), latter has expanded to embrace other dimensions of living standards such as longevity, literacy and health. The expansion of the concept helped us to reflect a concern with vulnerability and risk, and with powerlessness and lack of voice. But the concept has his own limitation; it never looks into the relational aspect, which is very important to understand the deprivation of certain communities on the basis of their social, political and cultural status in the society. Poverty must be seen in terms of poor living, rather than just as lowness of incomes. Income may be the most prominent means of a good life without deprivation, but it is not the only influence on the lives we can lead (Sen, 2000)

In India the gap between rich and poor has always been a matter of concern. It is now widely accepted that the issue is not just confined to economic inequalities, but the inequalities of opportunities needs to be addressed (Roy et.al, 2004). In many instances the people are denied of the opportunities and excluded from the process. The denial of opportunities is to create differences between the people and make the society a inequal society, where it grades some people as capable and some incapable. This denial may happen either in terms of social participation, economic, cultural or political participation. Since these are all interlinked in a society the process is dynamic, so a mixture of factors excludes the people from the process. It is prevailed always to maintain a status-quo in the society. The incapable people are looked down as inferior and branded as not suitable for the society, even if they are allowed to participate, either they were discriminated or exploited in terms of paying the returns.

The primary source of the income of house holds in accordance with NSSO data of 50<sup>th</sup> and 61<sup>st</sup> round clearly shows that 52.22 % of the SC were working as agriculture labourer in 1993-94 and though there was a decline in 2004-05 but it was marginal, only 10% has got reduced and they have shifted to self employed in non agriculture and other labour. Where as the Hindu non SC/ST only 23% were working as agriculture labour in 1993-94, whereas 47% of them were self

employed in agriculture (which means have their own land). In 2004-05 the self employ in agriculture was 43% and the agriculture labour was 20% (Das, 2007). Though there is decline in self-employed in agriculture during 2004-05, they have moved to self employment.

The poverty ratio also clearly shows there is a wide disparity among the SC/STs and other socioreligious group. According to the NSS 50<sup>th</sup> round, 49% belongs to the SC/STs where poor as compared to the national average of 36%. Even in the 61st round though there was some decline but is was marginal, about 40% of SC/STs were poor as compared to the nation average was 27%. The total illiteracy rate in India is 73%, whereas the illiteracy level of SC is 66%, ST is 59 % and non-SC/ST is 76 per cent (Census, 2011). Only 1.58% of the SCs were able to attain graduation and above in compare with the nation average of 2.83 (Das, 2007). Even in case of under nutrition, infant mortality rate, maternal mortality rate or any other health indicators for children or women there is huge inequality across the social-religious groups (Diwakar, 2015). If we take the poor as a whole we could not see who among the poor are the most vulnerable and deprived of opportunities. So, the way out to eradicate the problem will become difficult. So, it is always needed to disaggregate the data to get more clear idea about the intensity of the problem. The disaggregated data clearly showed the poor are not unified, within poor there are specific socio religious group are most affected. If we subside this issue and the poor will not be eradicated. The dynamics of the society needs to be understood to know this disparity among the various socio-religious group.

#### 2. The Concept of Social Exclusion

The inequalities created in the society make some of the people deprived of some of the capabilities which make them vulnerable and excludes them from the process. The term social exclusion was coined by Rene Lenoir in 1974. He looked it as the rupture of the social fabrics, and attributed to a failure of the state. It concept has two main defining characteristics, first it is a multidimensional concept and second it implies focus on the relational and process that cause deprivation (De Hann,2001). The term is seen as 'the process through which individuals or groups are wholly or partially excluded from full participation in the society within which they live'.

Sen looked social exclusion from the perspective of Aristotelian and Adam Smith, the former told the "impoverished life is one without the freedom to undertake important activities that a person has reason to choose" and the latter told "being able to appear in the public without shame" though they have not used the word exclusion. But the implied meaning is that the people are deprived of capability with creates deprivation within them that takes the form of exclusion.

The concept was related to poverty, vulnerability and relative deprivation and look into its implication. As we have already discussed poverty in its multidimensional approach fails to look into relational aspect of deprivation. The vulnerability is closely related to the concept since it looks into the insecurity, defenselessness and exposure to risk and shock. In case of relative deprivation is more closely related to the social exclusion concept.

Sen stressed that what counts is not what the people possess, but what it enables them to do. Capabilities are absolute requirements for full membership of society. He draws attention away from the mere possession of certain goods, towards rights, and command over goods, using various economic, political, and social opportunities within the legal system. In a recent contribution, Sen (1998) welcomes the social exclusion framework, because of its focus on relational roots of deprivation. He believes that a social exclusion framework reinforces the understanding of poverty as capability deprivation.

The exclusion could also manifest itself in diverse ways in terms of "causes and outcomes". Sen therefore refers to various meanings and manifestations of social exclusion, particularly, with respect to the causes or the processes of discrimination and deprivation in a given society. Exclusion could occur through direct exclusion, violating fair norms of exclusion (that is unfavorable exclusion), or through inclusion, but under unfavorable conditions, again violating fair norms of inclusion (that is unfavorable inclusion), or through deliberate government policies (that is active exclusion), and through unintended attempts and circumstances (passive exclusion), or exclusion caused through inability of some persons to relates to other persons (constitutive relevance). The mainstream economists have further elaborated the concept of discrimination that operates particularly through markets.

NailaKabeer characterized social exclusion in terms of *privileged* inclusion, *secondary* inclusion, *adverse incorporation or problematic* inclusion, *self-exclusion* and *hard-core* exclusion. Privileged insiders are those who occupy the central positions within mainstream institutions of a society, and whose collective influences shapes the framework of rules and norms within which all the key decisions of social life are make. Secondary insiders occupy a more peripheral position in relation to this group, but nevertheless enjoy some of their privileges. Adverse incorporation or problematic inclusion are those whose problem has been identified as less one of exclusion, than of the problematic terms on which they have been included. Self- excluded, who may have be devalued by the dominant social groups, but nevertheless prefer their outsider status because it allows them to define their own values and priorities. Hard core exclusion occurs when principles of unequal access in different institutional domains reinforce, rather than offset, each other, creation situation of radical disadvantages.

There are certain speculation on the usage of this concept in Asian and other developing countries. The concept was coined in France, so it is possible to use the term as a unified concept. There has been increasing attention paid to the possible relevance of the concept to social policy analysis in developing countries. In fact, the danger is that, given the roots of the concept in the northern social policy discourse, it will simply serve to re-label long-standing and locally developed approaches to social problems or alternatively, that it will promote a tendency to assess southern realities in terms of the extent to which they converge, or diverge from some standard northern model (Kabeer, 2000). Some of the southern realities will be not addressed and some time it will dilute the issues if we fail to assess the implication of the concept in the given socio-cultural scenario.

#### 3. Social Exclusion and Discrimination in Indian Context

So I would like to look this concept, how far it is relevant in Indian and to the social policy formation? How it has been used in the Indian context?. I will take some of the studies undertook in India and see how they have used the concept and will also try to locate the gap when it is used in India. The concept was used vastly to looked and correlated with the capability deprivation, relative deprivation, entitlement etc in western concept.

In India caste system plays a prominent role in determining the opportunities a person to participate in the social life and social institution. The denial of opportunities to a person made them deprived of their capabilities and to get eliminated from the process. They are not only deprived of the entry into the market which deprives their economic capital. They were in the lower strata of the graded caste hierarchy, which makes them to deprived of the social and cultural capital. Moreover, they were not allowed to participate in the social processes and institutions. Their culture is always seen as the inferior one. This process clearly shows how a person excluded from the process in the name of caste.

'Exclusion' means prohibition from participation, whereas, 'discrimination' denotes participation with a negative distinction (Thorat& Nidhi, 2010). There is always a gap between the exclusion and the discrimination it has to be understood when we look into any process. The exclusion in India has to be seen from the perspective of social and religious groups, since it appears to accentuate the exclusion by denying certain opportunities and access to services (Acharya, 2010).

Discrimination and exclusion of dalit in the delivery of services in various programme is often visible. The dalit children have been discriminated in the delivery of health services and the services were not often accessible. These children are not given the space to participate and learn like others in school (Numbissian, 2010) and express explicitly to the care providers in the health care centre (Acharya, 2010). The PDS were not accessible to the dalit community, as a national average 81% of the PDS shop in the respondent village were owned and run by the dominant class leaders. National average of about 26% of the respondent villages practiced untouchability in the physical act of distribution of the PDS goods. About 48% of the respondents told there is prevalence of caste based favoritism (Thorat and Lee, 2010).

Uttar Pradesh and Bihar, where one-third of Indian Dalit reside, deny the Dalit and other poor children 'access to' their legislated entitlements in Mid Day Meals Scheme (MMS) from the very beginning. There was wide spread corruption and caste based discriminatory distribution were widely reported. In measuring the Dalits participatory empowerment in and ownership of the MMS showed poor trend both at national and inter-state level(Thorat& Lee, 2010). In the

Maharashtra Public work programme the exclusion and inclusion of geographic area is very much prevalent. Selective inclusion of certain group of people and exclusion of lower caste people on the basis of political affiliation and political gain. The politics and caste determine the beneficiary of the programme (Pellissery, 2005). A study by Sabharwal et.al (2014a) on 'Janani Suraksha Yojna'shows there is wide spread exclusion in the access to ANC, PNC and Institutional delivery. In another study by Sabharwal et.al (2015b) shows discriminatory practices in the midday meals. Not only in these programmesin almost all the government programmes we can see exclusionary practices in India. These exclusion and discrimination have resulted in the low socio-economic status of SC and ST (Borooah et.al, 2014). They have very poor nutritional status and the improvement is very less as compared to other social group even after government having specific initiatives to improve their nutritional conditions (Diwakar, 2014).

So, we have to see it from the structural- functional level. The precautions they need to take while formulating a policy to reach the targeted population. In India the social, cultural, economic and cultural aspects are interlinked and plays a prominent role. If we ignore these and try to formulate any policy it will not ripe the fruits (Mamgain and Diwakar, 2012). They decide the accessibility and utilization of the programme. If we are not taking these things into account, it will exclude some of the people from the process. It will also become an exploitative and discriminative programme where the real targeted people will be missed out (ibid). The resources will be drained without of much use. Therefore, the policy formulation should keep the interlinkages of the social, economic, political and cultural aspects

The other thing that has to be seen in a programme is the implementation of it. The programme in many times conceptualized properly and did not reach the target people it is mainly due to some discrepancy in the implementation. It is an upheaval task to formulate a programme and implement it appropriately in the Indian scenario. The implementers unheed the socio-political and cultural factors in the way in which it is been implemented.

The policy makers make some changes in the programme both at the policy level as well as at the implementation level. Mainly they get to know about the gaps from the evaluative studies conducted by the Government, NGOs, academicians etc. Some time they get the directions from the court to bring some changes.

Even in case of the ICDS programme also it did not fetch the expected result on par with the money invested in it. There were many gaps in the policy level and at the implementation level. The supreme court has given many directions for the improvement and make the programme more inclusive. The study aims to look into the absorption of the directions by the state government of Tamil Nadu and the implementation of it.

# 4. Research Methodology

### 4.1. Selection of Study Area

The present study was conducted at Kancheepuram District, Tamil Nadu to study the functioning and implementation of ICDS programme. The district was selected based on HDI index, it is the best performing rural district. The best performing Sriperumbadur block was selected from the district. To identify the ICDS centre, 8 indicators were selected based on correlation analysis, one year data was collected for all the ICDS centres in the Block, an index was created and they were ranked based on their performances. In Sriperumbudur 11 anganwadi centre were taken for study of which six AWC are from better performing Makanyam cluster and 5 AWC from poor performing Chetipedu cluster were taken for primary study.

# 4.2. Sampling and Tools

Tools such as Indepth interview, Focus Group Discussion and Observation were used for the data collection. Indepth Interviews were conducted among 102 respondents, since some of the respondents are multiple beneficiaries so information of 148 types of services were collected. Basic infrastructure and facilities available in the 11 anganwadi centres were collected. Interview of 9 Anganwadi worker and 10 Anganwadi helper was collected. Six cluster supervisors, one grade I supervisor and CDPO were also interviewed. Interviews were also collected among the PRI members and other key stake holders in the village. To assess the performance of the ICDS centres, this study used the Macintyre model.

# 4.3. Conceptual Framework

Macintyre model gives emphasis on the conceptual, compositional and collective factor to study the 'Place effect on health' (Macintyre et.al., 2002). With certain modification by giving emphasis not only on the 'place' but also equal importance on the 'people' the framework is used in the study.

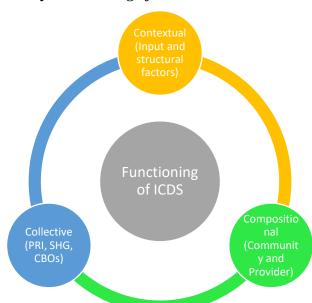
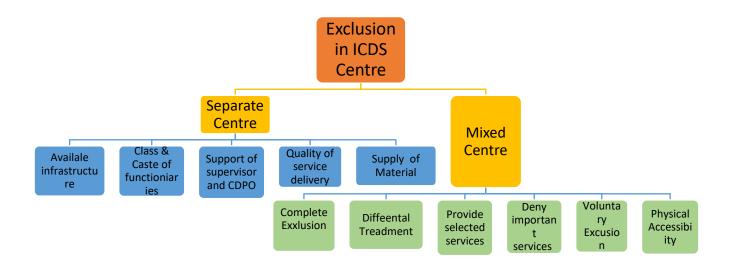


Fig I: Framework to study Functioning of ICDS

Input and structural factors were considered for contextual factors. The characteristic of the respondents and providers were taken as composition factors. The role of the PRI, SHG, community based organisation and other stake holders were taken to examine collective factors. The interactions between these factors were studied to understand the access and hindrances to the eligible beneficiaries of the programme.

During the field survey it was found that there were 3 different type of AWC functioning in the study area, they can be categorized as 1) SC beneficiary centre, 2) OBC beneficiary centre and 3) Mixed centre. Broadly they can be categorised as Mixed centre and centers functioning exclusively for different caste groups. So indicators to assess the marginalization were derived on these broad categories.

Fig 2: Framework to study exclusion in ICDS centre



In the mixed centers marginalization were examined through 1) Eligible beneficiaries not accessing 'any services' and excluded on the basis of class and caste, 2) Beneficiaries were allowed to access all the services but with discriminatory treatment (sit and eat separately, call by caste name, differential treatment and punishment), 3) Beneficiaries included in the services which were not important for them, 4) Beneficiaries not allowed to access services which are most important for them, 5) Beneficiaries exclude themselves voluntarily as they did not like to mingle with other class and caste, and 6) Physical accessibility.

In case of separate AWC, if there was demand then the prioritization was given to those who were politically empowered. Marginalization happened in indirect forms so it was examined through 1) Available infrastructure, 2) Class and caste of AW functionaries and the beneficiaries, 3) Support of the supervisor and CDPO, 4) Quality of service delivery, and 5) Supply of food, education and other materials.

# 5. Major Findings

#### 5.1. Contextual Factors

The influence of compositional, contextual and collective factors on marginalization was understood. There were few evidences of marginalization emerged from the contextual factors. Lack of centres marginalized access to five of the study village till 2006. After 2006, 5 centres were opened and it provided opportunity to many people to access the ICDS services. Though there were lots of limitations in the new centres it was administrative and functional problems. However, it clearly emphasized the need to open new centres in the non-ICDS area to increase the coverage and to increase access.

Another finding emerged was the importance of having own building. Most of the facilities toilet, separate kitchen, gas, electricity, wall painting etc. in the ICDS centre was based on the availability of own building. The centres which had their own building capitalized this and got the basic services while the other centres lacked the basic facilities.

There was one mini anganwadi centre in the study village it clearly showed there was no staff appointed in the centre since its inception on 2006. SNP was the only service provided with help of nearby centre. Rest of the services was not provided to the beneficiaries, so they all the beneficiaries in the centre were denied of other essential services. In Kancheepuram district there were 168 mini anganwadi centre during 2008, in Sriperumbudur block there were 14 mini anganwadi centres. In all mini centre the similar situation prevailed. The other major problem was the dual responsibility of the AWW and AWH. In 5 AW centres AWW and AWH had dual responsibilities, they have to take care of other centre. This happened because of timely non-recruitment of vacant positions in ICDS. It affected the function and performance of the ICDS centre.

#### 5.2. Compositional Factors

The composition factors were very crucial it helped to understand the caste and class based marginalization in ICDS programme. The income, housing, mother's education, occupation and landholding were seen to locate the marginalized community in the study village. The income data showed SC in low income level in the village so 75 per cent of the sample fall below less

than 4500 income category but in case of OBC only 60 per cent of the sample fall below the 4500 income category. The housing data showed 81 per cent of the SC were living in the huts and tiled houses whereas 67 per cent of OBC are living in concrete and tiled houses. In mother's education showed 75 per cent of SC were studied below high school on the other hand 46 per cent of OBC were studied below high school. Almost half of the scheduled caste were mainly worked in company and driver, but in case of OBC half of the respondents engaged in cultivation and skilled work. Among the respondents only the OBC had agriculture land and engaged in cultivation.

The interview with mothers clearly revealed that the improper functioning of the centre made them to keep the children in home rather than sending to anganwadi centre for pre-school. To get perspective on pre-school both OBC and Dalits were interviewed. On looking into proportion wise it showed more number of children in OBC were not sent to pre-school, mainly the pre-school was accessed by the Dalit children. However, not all the enrolled children went to pre-school regularly only in the centre which functioned well there the children were going regularly, in rest of the centre they went 2-3 days in a week. In some cases they went very rarely to the centre.

While looking into the characteristics of children going to nursery it showed that 92 per cent of respondent were above Rs 4500 income group. Only 1 respondent below the Rs. 4500 income group sent their children to the Nursery. The fees in the private school is very high they shrink all their other expenses and send their children to private nursery school. They wanted their children to get English medium education as the school did not admit directly in 1st std they were sending them from nursery onwards. Moreover, the peer pressure as an effect even on the poor to send their children to private nursery school. Mainly pregnant women from the lower income category utilized the SNP from the AWC, the rich got their supplementation from the open market. Even in case of children also 95 per cent of the children below Rs. 4500 income category only received the SNP from AWC.

While looking at the function of the ICDS centre, the study found that they gave importance to only pre-school and SNP. Immunization was fully taken care by the VHN. The remaining

nutrition health and education, growth monitoring and health referrals were not given importance. Though these are the most important programme to address the under nourishment at the early stage. Moreover, the 0-2 years children were also not given importance they mainly concentrated on the pre-school children 3-5 years. Consequently, the main target group which could bring in reduction of under nourishment were remained untouched. The commitment of the anganwadi worker emerged as one of the key factor in proper functioning of the centre. Therefore, thegovernement should identify proper personnel who shows commitment to the work.

Indicators were derived from the literature to assess the functioning of the ICDS services rendered on health, education and nutrition. Based on the performance they were caterogised as good, moderate and poor. As there are two categorise of AWC based on the caste of beneficiaries i.e. 1) mixed centre and 2) exclusive centre for separate caste. While looking into these centres in the light of the functioning it showed some of the mixed centres are functioning good and some are poor, in the same way even in the exclusive centre for separate caste also some are performing good, some moderate and some poor.

In the mixed centre category Kandivakkam and Chetipedu were performing good, Om Mangalam was moderately performing and Katchipattu IV, KappanKottoor centres were performing poor. In the centre serving for OBC beneficiary Mahadevi Mangalam and Kannanthangal were moderately performing and Gunakarambakkam centre was performing poor. In the center functioning for SC beneficiary Katchipattu III was performing good, Katchipattu I and II, were moderately performing and Gunakarambakkam colony and Navallur were performing poor.

The mixed centres are always located in the OBC area, far away from the SC hamlet. For the eligible beneficiaries it is very difficult as they could not walk long distance as their condition is vulnerable. So most of them were excluded on the basis of physical inaccessibility. In KappanKottoor the centre locate in the OBC area but none attended the pre-school as their parents did not want their children to study with SC children. It clearly showed voluntary exclusion of certain community in the mixed centre.

In the centre functioning exclusive for OBC had only 10-15 children on an average attended the pre-school, whereas in the SC centre 20-25 children attended the pre-school. Altogether the accessibility of SC was more compare to the OBC it clearly showed the felt need of the people for the programme. Even in the worst performing centre also SC sent their children as it helped them to go for work. The government has constructed only one building for SC beneficiary and they give very less priority to the SC centres. Even in providing the basic facilities in the AWC they give preference to the OBC and mixed centre, the SC centre mainly dependent on a corporate social responsibility programme of a private company to get the facilities.

Experiences of the people about the AWC and the providers varied a lot. Apart from the class and caste factor availability of infrastructure facilities is important as it creates impression about the centre which helps in formulating opinion of the centre as better or poor performing. However, the field observation implied that there were many other factors which created the opinion about the centre. The performance of the centre and the service delivery is one such factor. The commitment of the worker and their relationship with the community is one of the prime factors in creating opinion to the people. Expectation and the experiences of the community varied based on the economic condition.

#### 5.3. Collective Factors

The community involvement especially the PRI functionaries and SHG is very poor in the study village. Even committee formed in each anganwadicenter to ensure proper function is almost nonfunctional in all the villages. Experiences and the opinion of the providers were formed based on their interaction with the community and the support rendered by the community. The support given by the community in implementing the activities provided a good opinion about them and also motivated them to work enthusiastically. Moreover, the eligible beneficiaries support reduced the burden in carrying out their activities, and created a good opinion about them. But the experiences and opinion of the providers and the community is not formed only by their interaction, the contextual and composition factors played a major role in framing their mind.

6. Conclusion

The analysis of the inequality and the social exclusion in Indian context has shown that still in

India there is huge inequality existing in various spheres such as health, education, employment,

Public Distribution system, Midday Meals and in various other schemes. A case of ICDS

programmes was taken at Sriperambudur to understand the nature and forms of exclusion

existing in the programme. The findings have shown that at the level of compositional,

contextual and collective level still the exclusion is existing. Because of these exclusions it

affects the programme functioning in general and the marginalized communities like Scheduled

Caste in particular.

At the general level the government is not allocating the resources for the infrastructure

uniformly, so some of the villages are getting the building and other facilities whereas the others

did not get any infrastructure facilities. Similarly, the government has not filled the vacant seats

this has affected the function of the centre and quality delivery of the services.

The analysis at the compositional, contextual and collective factors has shown gaps at

infrastructural, administrative, man power, priority and lack of support from the PRI and

community. These problems have to be addressed to ensure better provision of services.

Moreover, this programme will not be sufficient to address the undernutrition among the children.

The NFHS 4 Shows decline in the undernutrition but the rate of decline is slow, so, they need

more comprehensive programme to improve the household food security. Secondly, they have to

improve the nutrition education and access to better health provisioning for the marginalized

communities.

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