



SURVEY OF EXISTING COMMUNITY BASED EARLY INTERVENTION SERVICES FOR PRE-SCHOOL CHILDREN

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Abstract

The present research is an attempt to study and analyse the early intervention practices and to evaluate the effectiveness of these services on the different aspects of development of child such as physical, social, emotional, cognition etc. The study was carried out with the objectives to survey the existing community based early intervention services for pre-school children in Chandigarh and to assess the quality of early intervention services of young children in age group of 3-6years. 13 Anganwari workers, 22 Nursery school teacher and 160 children between the age group 3-6 years were included for observation of early intervention practices in the following areas of development i.e. physical, motor, cognitive, social, emotional, language and self help skill. To collect the data for the study two tools were prepared by investigator : Questionnaire on early intervention practices in Anganwadi centres and Pre-primary schools; and Observation schedule of the child for early intervention activities. It was encouraging that these services are doing a commendable job regarding the physical and the mental development of children. Besides that, opportunities are provided for the social development of the children as well. There are various activities organised for the children. It helps children to become productive members of the society, imbibe leadership qualities among children. Children coming to these centres learn cooperative living, tolerance and social norms, they learn to behave and adjust with others. So these centres are helping in the overall development of the children. No doubt the programme has been quite effective but there are certain areas which need to be strengthened. As observed by the investigator there is no financial help from the local community, most of the Anganwadi centres are not getting funds regularly from the govt. due which they are not able to organize health related programmes for children, so local community can also contribute to make this programme effective.

Keywords: *Community based early intervention services, pre-school children, Anganwadis, Nursery School, Education, Chandigarh, Balwadis, Survey, Childhood, Development.*

In the independent India, education has been given due recognition. The constitution of the India lays down that the state shall provide for free and compulsory education for the children up to the age of 14 years. The need and the importance of early childhood education have also been recognized.

Moreover, this expansion was slow in reaching the under privileged children living in rural areas or urban slums, where pre-school education is provided in “Anganwadis” and “Balwadis” run by different government agencies and child welfare council respectively.

"Early childhood" is usually defined as before the age of normal schooling – five years in most nations, though the U.S. National Association for the Education of Young Children defines "early childhood" as before the age of eight. Prekshi et al. (2008) conducted a study on 300 preschool children (150 males and 150 females) aged 4-5 years, belonging to 6 villages of Gurgaon district of Haryana. Intake of fats and oils among boys and girls was 19.29 g and 19.06 g, which was significantly lower than RDI. Sampath(2006) conducted a study to evaluate the status and obstacles to community participation and offer suggestions to enhance community participation in the ICDS programme. Neal and Gunn (2003) under the U.S. department of health & Human Services created Early Head Start to serve as a two-generational program with goal of enhancing “children’s development and health, strengthen family and community partnership, and support the staff delivering new services to low-income families with pregnant women, infants, or toddlers”. The first 143 program were funded between 1995 and 1996. Currently the programme operates in 664 communities and serves approximately 55,000 children. Arora and Mahajan (2003) conducted a study for Evaluation of non-formal pre-school education provided at anganwadi centres and to know the awareness and utilization level of these services. The study recommended that physical set-up of anganwadi centres should be improved. Equal emphasis should be given to all the services of ICDS rather than focusing only on nutrition. Saini, Sharma and Seema(2002) studied the perceptions of the parents about the importance of learning stimulation for pre-schoolers aged 3 to 6 years, and investigated facilities provided at home and at anganwadis.

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McMillan and Owen (1963) maintains that , A nursery is not a place of formal education but rather a community nursery where children up to the age of 5 or 6 years may have appropriate opportunity for the physical, mental and social growth through playing in small groups under the supervision of qualified teachers.

According to Grace (1963), a pioneer in the field of early childhood education mentioned 7 objectives of pre-primary schools.

- To provide healthy environment to the children like space, fresh air, light and sunshine.
- To provide a healthy, happy and regular life.
- To provide continuous medical supervision.
- To assist in the formation of the healthy and good habits.
- To give opportunities for the development of different interest and skills of various kinds.
- To give experience of social life on a small scale where children work and play together.
- To establish real unity between external environment and home life.

The importance of pre-school has been recognized by various educational commissions and committees appointed by government of India time to time. Secondary education commission (1965) observed that “At this stage the child is introduced to the joy of learning through companionship and recreational activities and slowly guided to proper habits of life, cleanliness and healthy modes of living as well as in the activation of social habits. Kothari commission (1964-66) has also stressed the need and importance of pre-primary education by saying “Pre-primary education is of great significance to the physical, emotional and intellectual development of the children, especially more with unsatisfactory backgrounds.” The national policy of education (1986) has suggested number of programmes of early childhood care and education (ECCE) .it has also pointed out that the need for organising programmes for all round development of the child.

In pursuance of the National Policy for children, which laid emphasis on the integrated delivery of early childhood services and services for expectant and nursing women and based on recommendations of the inner ministerial study team, setup by planning commission, the scheme of integrated child development services (ICDS) was evolved to make coordinated efforts for an integrated programme of delivery of package of such services. This scheme launched in 1975, aims at all round development of pre-school children.

One of the most important programme of the scheme is to provide non-formal pre-school education to the children between the age group 3-6 years, through an anganwadi (child care centre) to be setup in each urban sub unit with a population of about 100. Pre-school period demands greatest care from both i.e. the parents and the community. In the absence of such care the children might suffer from lack of socialization, illiteracy, unhygienic living conditions and developmental delays. So taking into consideration the significance of early years on subsequent development ,the meager resources for education in our country, the recent trends of community participation in early intervention programme the investigator was curious to study the existing community based early intervention services in Chandigarh.

In view of this, the researcher thought of taking in depth study to assess the early intervention services. The findings of the study are expected to make substantial contributions to the effectiveness of early intervention services.

STATEMENT OF THE PROBLEM

SURVEY OF EXISTING COMMUNITY BASED EARLY INTERVENTION SERVICES FOR PRE-SCHOOL CHILDREN

OBJECTIVES OF THE STUDY

The study was carried out with the following objectives:

1. To survey the existing community based early intervention services for pre-school children in Chandigarh.

2. To assess the quality of early intervention services of young children in age group of 3-6years.

DELIMITATIONS OF THE PROBLEM

1. The sample for the present study was taken from pre-primary schools and Anganwadi centres from Chandigarh only.
2. The present study was conducted to five Anganwadi centres and ten Nursery schools only.
3. The study was conducted to 160 children within age group 3-6 yrs only.

DESIGN OF THE STUDY

In order to study present problem the descriptive survey method was employed which aims at evaluating and analyzing the existing community based early intervention services for Pre-Primary school children in Chandigarh.

Descriptive research study was used to obtain pertinent and precise information concerning the current status of phenomenon and whenever possible, to draw valid general conclusions from the facts discovered. 13 AWW and 22 Nursery school teacher and 160 children between the age group 3-6 years were included for observation of early intervention practices in the following areas of development i.e. physical, motor, cognitive, social, emotional, language and self help skill.

SAMPLE

The sample for the present investigation was drawn randomly from Anganwadi centres and pre-primary schools of Chandigarh. Sample includes Anganwadi workers, schools teachers and students of five Anganwadi centres and ten pre-primary schools. The final sample included thirteen anganwadi workers, twenty two pre-primary schools teachers and 160 students; 50 students from anganwadi centers and 110 students from pre-primary schools.

TOOLS USED FOT THE STUDY

To collect the data for the study the following tools were employed:

- Questionnaire on early intervention practices in Anganwadi centers and Pre-primary schools (prepared by investigator).

- Observation schedule of the child for early intervention activities (prepared by investigator).

DEVELOPMENT OF THE TOOL

Planning of the questionnaire

The purpose of these two questionnaire was to assess the quality and impact of early intervention practices on the all round development (physical, social, cognitive, language, emotional development and self help skills) of both Anganwadi centers and pre-primary school children. The test items with alternative response type items (yes/no) along with the few questions to be answered briefly were included in the questionnaire. Each item carried one mark for all 'yes' answers and 'zero' for all no answers.

Preparation of the questionnaire

Before constructing the questionnaire, the investigator read thoroughly the literature related to integrated child development scheme and early intervention services. Then, she discussed the purpose of the study with the subject experts. The items were framed on the various aspects of development; physical, cognitive development, social, emotional, language development and self help skills.

First draft of the test

For Questionnaire on early intervention practices in Anganwadi centres and Pre-primary schools preliminary draft of 25 items were prepared and for Observation schedule of the children for early intervention activities, 50 items were prepared. In both the tools the first part deals with the profile of the respondents. The second part of the questionnaire consists of items dealing with the objectives of the study.

Final draft of the test

For Questionnaire on early intervention practices in Anganwadi centres and Pre-primary schools, 12 items were selected with 3-4 sub parts measuring the various aspects of development. For Observation schedule of the children for early intervention activities, finally 30 items were selected covering the various aspects of development. The test was administered by the investigator itself. Some instructions to be followed for filling the questionnaire were given to the respondents by the investigator.

Scoring

In the present research work, there are 12 items in the Questionnaire on early intervention practices in Anganwadi centres and Pre-primary schools and 30 items in the Observation schedule of the children for early intervention activities. Some of the items were of “yes” or “No” type whereas some were of multiple choice. The scoring was done by giving weightage to “one” mark for all “yes” answers and “zero” for all No answers. In this way investigator gets the scores for the subparts of various dimensions and total score for each dimension and hence, simple technique of calculating the frequencies and percentage for each response in the questionnaires, meant for two categories of respondents was used.

Reliability of the test

The reliability of the test was found by test-retest method. The same questions were asked to same Anganwadi workers and teachers after 12 days. The reliability coefficient found to be 0.72 so the test was found to be reliable.

2.4.7 Validity of the test

Validity can be estimated under content validity, criterion related validity and construct validity. In the present study, content validity was established by giving the final draft of the test to five experts. The five judges agreed upon their judgement therefore this shows that the questionnaire is fulfilling the criterion of validity.

PROCEDURE FOR DATA COLLECTION

To avoid the danger of obtaining distorted data, the investigator preferred to contact the respondents personally. The researcher first of all approached the school authorities and the social welfare Department of Chandigarh and got permission for collection of data and convinced the personnel about the purpose of the research study. Time for visiting Anganwadi centres and Schools was fixed with the concerned authorities. The investigator selected a random sample of five AWWs and ten Nursery schools of Chandigarh. In each of these AWWs and Nursery schools, three AWW and Nursery teachers were taken up for the present study. Fifty children were taken from five AWWs; ten children randomly selected from each centre and similarly one hundred ten students were taken from ten Nursery schools; eleven randomly selected from each school. The personal contact provided the researcher an

opportunity to have correct answers by explaining various questions in detail wherever the respondent was unable to comprehend. The respondents were requested to fill their profile and answer all the questions honestly and to the best of their knowledge. Sufficient time was given to answer the questions, wherever they did not understand the same was made clear to them. The questionnaire had to be filled by the investigator herself after getting the reply from them orally. The respondents co-operated with the investigator for carrying out the study.

STATISTICAL TECHNIQUES USED

In the present research work, the nature of data was such that each item had to be analyzed and discussed separately. Some of the items were of “yes” or “No” type whereas some were of multiple choices. In accordance with the objectives of the study, advanced level of techniques was not needed for analyzing the data. Hence, simple technique of calculating the frequencies and percentage for each response in the questionnaires, meant for two categories of respondents was used.

RESULTS AND DISCUSSION

(a) Questionnaire on early intervention practices in Anganwadi centres and Pre-primary schools

It is encouraging to find out that all the Anganwadi workers and Nursery school teachers were concerned about the physical development of the child, all observe the physical health of children and in case of any problem they consult the doctor at the same time all monitor the height, weight, health and personal hygiene of the children. Majority of Anganwadi workers and nursery school teachers engaged children in the motor activities like Running, jumping, skipping and playing different games.

In all the Anganwadi centres and Nursery schools children were taught counting, were made to learn names of different colours, fruits, days. Only nursery schools were teaching simple addition and subtraction to the students. All the schools and centres were putting emphasis on developing the thinking, reasoning, attention and memory of their students. It is deduced from above analysis that no Anganwadi worker was helping the parents in identifying the learning disabilities among their children where as nursery schools were helping the parents to identify the learning disability as well as speech and hearing problem among children. 66% Anganwadi workers were helping the parents to identify the speech

problem of their children whereas 33% Anganwadi workers were helping the parents in identifying hearing impairment and social/ emotional problems among their children.

All Anganwadi workers and Nursery schools are helping children in learning cooperative living, etiquettes, tolerance and toilet habits only 66% Anganwadi workers said they help children in learning social norms whereas all the nursery schools are helping them to learn the social norms. All Anganwadi workers were helping parents in identifying aggression, bullying and teasing. Only few Anganwadi workers said that they help in identifying attention problem and not the hyperactivity and anxiety among children whereas in case of Nursery schools, they help parents in identification of all behaviour problems among children.

Majority of respondents were helping children in building general vocabulary and specific vocabulary like building number vocabulary, colour vocabulary, etiquette vocabulary. No respondent replied for money vocabulary. All the nursery schools teachers are helping children in correct pronunciation, formation sentences and clarity of speech whereas it not seen the case of Anganwadi workers. All respondents were helping the children to build their confidence by asking questions and reading aloud in the class.

All nursery school teachers and Anganwadi workers were helping children in their emotional development through helping them in understanding their own feelings, expressing themselves; their needs and feelings. Anganwadi workers were not encouraging children in making their own decisions and developing empathy for others whereas nursery school teachers were helping them. Nursery school teachers were encouraging children to participate in all the activities; role playing, music, dance, poetry recitation, storytelling, drawing and painting competition whereas Anganwadi centres were also encouraging the children in all activities apart from role play.

All respondents were encouraging the children to keep their books neat and clean and to wash their hands before taking meal. Anganwadi worker were not encouraging children to tie their shoe laces, buttoning and zipping, knowing about directions, to do their homework without any assistance whereas Nursery school teachers were helping them to perform all the tasks by their own.

(b) Observation schedule of the child for early intervention activities

Majority of children participate in running, jumping and enjoy participating in various games like musical chair, ludo, plying with toys. Very few children are involved in cycling and skipping.

Majority of children were able solve questions of mathematics. Only few children were able identify the sign for addition. 83% children of Anganwadi centre were able to tell the correct spelling of Apple and 16% children were not able to identify the correct spelling whereas nursery school children were able to tell the correct spelling. Half of the children were able to write their names correctly. All children were able to recite their favourite poem. All children wished their teacher by saying good morning and share food with their friends. All children replied that they do not feel happy when teacher punishes their class fellow. Majority of children always help their friends whenever they need their help. All children replied that they feel happy when their friend wins the prize. All children of Anganwadi centre and Nursery Children participate in one or more competitions like singing, dancing, drawing, poetry etc. which is a positive sign for their social development. Analysis shows that schools and Anganwadi centres are emphasising on the all-round development of the children.

More than half of respondents do not like to be nicknamed. Majority of the children liked to become monitor of the class. 100% children replied that they can ask for help from their teachers or friends whenever they need it. All children replied liked to make friends and coming to school. All children of Anganwadi centres and Nursery schools said that they can ask questions from teachers if they fail to understand anything in the class. 43% school children were able to count from 1 to 30 .23% were able to count only from 1 to 20 whereas 33% counted till 1to 10 whereas 93% school children counted till one to thirty. 6% children were not able to count till one to thirty they counted from one to twenty only.

Majority of respondents were able to tell the name of different fruits, colours. Among Anganwadi children only 53% respondents were able to tell the name of days .46% respondents gave no response. All children of nursery school were able to tell the name of days. Majority of respondents replied with thank you, whenever somebody does a favour for them.

All the children of Anganwadi centres and Nursery school brush their teeth daily. More than half of the children were not able to tie their shoe laces and needed the assistance of parents. Majority of children washed their hand before eating anything. More than half of the children replied that they need parents' assistance to finish their homework. Children of

Anganwadi centres were more dependent upon their parents to prepare their school bag than the children of Nursery schools. Children of both Anganwadi centre and Nursery school children were keeping their notebooks neat and clean.

STRENGTHS OF THE PROGRAMME

Community based intervention services are a step towards providing the right to development to children right from childhood. It is also a stage for preparation to the next level when children start going to pre-school. Children are very well aware about their health and hygiene, even their parents come to the centres whenever doctors come for the health check-up of the children so, These centres are doing a commendable job regarding the physical and the mental development of children. Not only that, opportunities are provided for the social development of the children as well. There are various activities organised for the children .It helps children to become productive members of the society, imbibe leadership qualities among children. Children coming to these centres learn cooperative living, tolerance and social norms, they learn to behave and adjust with others. So these centres are helping in the overall development of the children.

WEAKNESSES OF THE PROGRAMME

No doubt the programme has been quite effective but there are certain areas which need to be strengthened. As observed by the investigator there is no financial help from the local community, most of the Anganwadi centres are not getting funds regularly from the govt. due which they are not able to organize health related programmes for children, so local community can also contribute to make this programme effective. Then the Methods of teaching need to be strengthened by the Anganwadi centres. Moreover, Teachers are not aware of the needs of the exceptional children so some orientation programmes should be organized for them.

One of the most important aspects which are being ignored is the need for the counsellor. Counselling services are not organised for the children, which is the need of the hour. Teachers are not aware of the importance of the counsellor and its services. Parents must be made aware about these services so that they also cooperate with the counsellor and understand the needs of the children. It will be a fruitful step towards the development of the children. Growth of vocabulary is an important phase of child development because effective learning is dependent on the progressive mastery of language but teachers are not taking any initiative to develop the language of the children it was quite visible in the case of Anganwadi

centre children , they were not able to communicate and express themselves. They failed to understand questions asked by the investigator in English whereas this was not seen in case of nursery school children. Efforts should be made to remove these weaknesses.

THREATS OF THE PROGRAMME

Early years of children are crucial and children's physical, social, intellectual capacities need to be discovered, nurtured and developed. All these capacities are useful for becoming a good citizen, but when these capacities are not nurtured and developed then it can harm the individuality of the child. Our aim is to prepare a child to solve his own problem. Child is the future of nation and without giving right education how can we expect our future to shine. When children are not given quality education, they will not be able to face the world with full confidence. Only developing the physical aspect of the child will not fulfil any purpose there is also a need to develop the language, emotional and intellectual capacities of the child. If the intellect is not developed then child will fail to think rationally. This programme only fulfils the criterion of the govt. not the community. Community involvement is very less. There is no participation of the community in the programmes of the early intervention services. There are some weaknesses in the programme and these are threatening for the all-round development of the children so these weaknesses must be removed and efforts should be made to strengthen this programme.

EDUCATIONAL IMPLICATIONS

- There should be more pre-services on the job training's for the AWWs and nursery school teachers. So that they can provide better services.
- The government should provide sufficient grants which should be made available well in time, so that the money can be effectively utilized for the purpose for which it is meant, at the time when needed.
- There should be expansion of pre-primary school education centres like kindergartens, nursery schools, Balwadis and anganwadis etc.
- Various programmes for the awareness and motivation of parents to send their children to the kindergartens, nursery schools and anganwadis should be implemented. Pre- school education should be stressed more and more.

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