

An Exploratory Analysis of Mission Saksham Anganwadi and POSHAN 2.0



Discussion Paper
2023

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List of Acronyms

APIP	Annual Program Implementation Plan
AWC	Anganwadi Centre
AWH	Anganwadi Helper
AWW	Anganwadi workers
BE	Budget Estimates
CAP	Convergence Action Plan
CDPO	Child Development Project Officer
CSR	Corporate Social Responsibility
DPO	District Project Officer
DWCD	Department of Women and Child Development
DWO	District Welfare Officer
ECCE	Early childhood Care and Education
FC	Finance Commission
FGD	Focus Group Discussion
ICDS	Integrated Child Development Services
IEC	Information, Education and Communication
ILA	Incremental Learning Approach
MAM	Moderate Acute Malnutrition
MGNREGS	Mahatma Gandhi National Rural Employment Guarantee Scheme
MLALADS	Members of Legislative Assembly Local Area Development Scheme
MPLADS	Members of Parliament Local Area Development Scheme
MWCD	Ministry of Women and Child Development
NFHS	National Family Health Survey
POSHAN	Prime Minister's Overarching Scheme for Holistic Nourishment
RIDF	Rural Infrastructure Development Funds
SAM	Severe Acute Malnutrition
SNP	Supplementary Nutrition Programme
TA	Travel Allowance

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Introduction

Child undernutrition – a persistent problem in low and middle-income countries. This is undermining progress towards wider human development goals. Early childhood undernutrition is one of the key factors for high child mortality rate. It also affects learning capacity of children. Undernourishment is also impacting the human productivity which is vital to economic development. A global estimate shows that the direct cost of child undernutrition is between \$20 to \$30 billion per year (Save the Children, 2010).

Investing to improve nutrition is cost effective. According to a recent estimate, an average annual investment of 7 billion dollar would be required over the next 10 years in reducing stunting among children and anaemia in women, increasing exclusive breastfeeding rates, and mitigating the impact of wasting (Shekar et.al, 2016).

The Copenhagen Consensus 2018 in India (for Rajasthan), listed combating undernutrition as one of the best development investments considering its benefit-cost ratio. The study shows Rs. 14144 investments on individual package of nutrition in Rajasthan could yield benefit of Rs.91, 577 per beneficiary or 20% reduction in stunting (Joe et.al, 2018).


According to the National Family Health Survey (NFHS)-V, there is marginal decrease in malnutrition among children in India between 2015-16 and 2019-20. Earlier, the Comprehensive National Nutrition Survey carried out by UNICEF in 2019 reports that about 50% children under five years are either stunted or wasted. The economically disadvantaged population found themselves more vulnerable to malnutrition and food insecurities during lockdown.

To prevent any further deterioration of nutrition indicators, in 2021 Union Budget, Government of India announced the launch of Mission Saksham Anganwadi and POSHAN 2.0 (Mission Poshan 2.0 hereafter). Three schemes under the erstwhile umbrella Integrated Child Development Services (ICDS) have been merged to form this new mission. The schemes are Anganwadi Services, Prime Minister's Overarching Scheme for Holistic Nourishment (POSHAN) Abhiyan, and Scheme for Adolescent Girls. The rationalisation of schemes is in line with the recommendations of the 15th Finance Commission (FC).

The mission covers maternal nutrition, infant and young child feeding Norms, treatment of Moderate Acute Malnutrition (MAM) and Severe Acute Malnutrition (SAM) and wellness through AYUSH. The implementation period of this restructured scheme is 15th Finance Commission period i.e, 2021-22 to 2025-26.

Mission POSHAN 2.0 including Poshan Abhiyan has a total financial implication of Rs.1,81,703 crore, comprising Rs. 1,02,031 crore as Central share and Rs. 79,672 crore as State share. The increase in Central share is approx. Rs 10,108.76 crore (10.99%) in comparison to 14th Finance Commission period (PIB, 2022).

However, in the Union budget, the Nutrition specific schemes under Mission POSHAN 2.0 saw shrinking of the resource envelope by 18.5 % in 2021-22 (Budget Estimates -BE) as compared to the combined allocation for these schemes in 2020-21 (BE). Increase in allocation for the



scheme in 2022-23 (BE) by 0.79 % is too small. By discounting the inflation, the absolute increase for these interventions would amount to lower than the allocation received in previous years. This indicates the decreasing budgetary priority for nutrition.

While it is important to evaluate how far the scheme remains successful in addressing the concerns of child malnutrition, three years from the launch is too early to achieve the desired outcomes. However, post rationalization, as the scheme is getting implemented with the new guidelines, it would be more relevant to explore the whether there is any change in the planning, budgeting and implementation of the scheme which could have created enabling environment for delivery of nutrition service in the field.

In this backdrop, the study looks for the following aspects of the scheme

1. Institutional structure of Mission POSHAN 2.0
2. Fund flow architecture under Mission POSHAN 2.0
3. How states are planning and budgeting under this restructured scheme?
4. Is there any reprioritisation of funds among the sub-schemes under the new umbrella scheme?
5. Whether there is any improvement in the coverage and quality of service delivery with the new Mission?

The analysis is carried out at the Union level and in four states namely Maharashtra, Rajasthan, Odisha, and Telangana. A mixed method with a combination of quantitative and qualitative analysis is used to examine different aspects of the scheme. Besides analysing the detailed schematic budget of Union government as well as four states for 2021-22, 2022-23 and 2023-24, the study also captured perception of different stakeholders associated with public provisioning of nutrition including state officials from Department of Women and Child Development, District officials, Child Development Project official (CDPO), Supervisor, Anganwadi workers (AWW) and Anganwadi helpers (AWH).

II. The status of nutrition in select states

Table 1: Performance of states in select nutritional indicators


	2019-21	2015-16	2019-21	2015-16	2019-21	2015-16	2019-21	2015-16
	Maharashtra		Odisha		Rajasthan		Telangana	
Mothers who consumed iron folic acid for 180 days or more when they were pregnant (%)	30.9	28	34.4	4.2	14.4	6	57.9	52.7
Children under 5 years who are stunted (height-for-age) (%)	35.2	34.4	31	34.1	31.8	39.1	33.1	28
Children under 5 years who are wasted (weight-for-height)	25.6	25.6	18.1	20.4	16.8	23	21.7	18.1
Children under 5 years who are underweight (weight-for-age)	36.1	36	29.7	34.4	27.6	36.7	31.8	28.4
Women whose Body Mass Index (BMI) is below normal (BMI)	20.8	23.5	20.8	26.5	19.6	27	18.8	22.9
Children age 6-59 months who are anaemic	68.9	53.8	64.2	44.6	71.5	60.3	70	60.7
Pregnant women age 15-49 years who are anaemic	45.7	49.3	61.8	48.6	46.3	46.6	53.2	48.2

Note: Green stands for improvement, Red – deterioration, Blue – No change

Source: NFHS-V (2019-21)

Before reviewing the function and performance of Mission Poshan 2.0, it is important to see the status of the study states in terms of nutritional achievement in the last five years.

Table 1 shows performance of study states in terms of some nutritional indicators pertaining to children and pregnant and lactating mothers. A comparison of data between 2015-16 and 2019-21 (the years of NFHS IV and V) in four states shows improvement in most of the indicators related to stunting, wasting, Body Mass Index and consumption of iron folic acid for



Odisha and Rajasthan, and a mixed performance result in Maharashtra and Telangana. However, there is increase in number of anaemic children across all study states. Except Maharashtra, proportion of anaemic mothers have also increased or remained unchanged in the remaining three states in the last five years. Whatever states achieved over the years, COVID-19 is reported to have intensified the hunger and malnutrition among people, especially for children and pregnant and lactating mothers belonging to marginalised communities, as evident from literature. Thus, the newly launched Mission POSHAN 2.0 has an enormous role to play in building back better. The next section takes a stock of impact of the pandemic on the nutrition sector from various aspects.

III. Mapping impact of COVID-19 on nutrition sector

The COVID-19 pandemic has impacted the children of all ages, across the country, in innumerable ways. Disruption in service delivery of feeding programmes, reduction in food security and dietary quality during the pandemic reported to have intensified vulnerabilities, development challenges, hunger and child malnutrition in India. The impact of COVID-19 has been scrutinised to see the following aspects

- Challenges faced by AWW
- Quality of food delivered
- Quality of anganwadi services
- Challenges faced by beneficiaries

Challenges faced by AWWs

- Under the ICDS scheme, AWWs and AWHs are seen as voluntary social workers and not employees. Therefore, instead of wage /salary, they have been provided with honorarium. This honorarium varies from State to state, roughly ranging from Rs. 4000 to Rs.10,000. During pandemic, there was delay in receiving honorarium in states. The informal nature of employment leaves them vulnerable to exploitation and deprives them of essential benefits like Provident Fund, pension and Employees' State Insurance cards.
- Anganwadi workers were employed in multiple spaces with an increased workload during covid-19. They were responsible for distributing masks, sanitisers and sensitise people about precautions against COVID-19, conducting surveys, door-to-door delivery of take-home ration, conducting vaccination drives and many other activities This disrupted their core Anganwadi services. The disparity between their wage and their working hours was glaring.
- During the pandemic, the supply of nutritional supplements was limited in many states and and with the rise in prices of cooking gas cylinders, AWWs paid out of their pockets to manage the centres (Hindu, 2022). In Odisha, 'Beg, borrow or mortgage' was followed by Anganwadi workers in Jeypore block in managing the supplementary nutrition programme (SNP) under ICDS due to unavailability of funds for the purpose. Over 3,100 AWWs reported of not getting their dues on time.

Quality of food delivered

From pandemic induced lockdown, the provision of hot prepared meals and snacks to children enrolled in Anganwadis was terminated. ICDS beneficiaries in many states reported about distribution of sub-standard take home ration under ICDS. In many cases, the quantity was insufficient and did not meet the nutritional norms as per ICDS. The financial distress caused due to the pandemic has increased the households' dependency on the public service delivery. However, the disrupted service under ICDS as well as other government interventions like Public Distribution System increased the food insecurity of children, especially girls and



women of the family because of gap in the intra-household distribution of food (Ambast et.al, 2021)

Quality of anganwadi services

Inadequate infrastructure is a major challenge for anganwadi centres (AWCs) in India. Before the pandemic, 4.5 lakhs or 25% of AWCs in India did not have drinking water facilities and 36% of these did not have toilets. Nearly one-fourth of anganwadis in the country operate from rented premises. A survey undertaken by WaterAid India of 1,020 AWCs in March 2021 revealed that only 7% had adequate WASH facilities and only 2% had both adequate and child-friendly structures. In Odisha, only 22 % of AWCs have tap water connection. Media report shows that in Andhra Pradesh, power supply to many AWCs in Anantapur district were disconnected due to non- payment of electricity bills. The condition of AWC building and basic infrastructures in AWC were worsened due to closure of the AWCs for a longer period of time.

Challenges faced by beneficiaries

For every 100 anganwadi beneficiaries in the country, only seven are in urban areas compared to 93 in rural areas (Chandra, 2020). Because of a severe lack of AWC in cities, leading to poor coverage of services for early childhood development. To ensure the access of the government's Take Home Ration scheme to the migrating families, the central government instructed the state govt. for digitisation of anganwadi services. Continued closure of AWCs during the pandemic hindered the pan-India nutrition programme, especially migrant and urban children were affected disproportionately. Closure of AWCs also affected the pre-school education and health-checkups of children (Indian Express, 8th April, 2022). Due to short supply of adequate dry rations, many of the states were not able to provide the stipulated supply of rations/foods to children and pregnant and lactating mothers (Singh, 2022). For example, Anganwadis under the Vadodara Municipal Corporation in Gujarat, stopped serving meals due to delay in cooking oil procurement (Indian Express, 14th Apr, 2022).

IV. Examining guideline of the Mission Saksham Anganwadi and Poshan 2.0

Mission Poshan 2.0 is an Integrated Nutrition Support Programme under the Ministry of Women and Child Development (MWCD). It seeks to address the challenges of malnutrition in children, adolescent girls, pregnant women and lactating mothers through a strategic shift in nutrition content and delivery. In Financial Year 2021-22, Government of India (GoI) restructured the ICDS, POSHAN (Prime Minister's Overarching Scheme for Holistic Nourishment) Abhiyaan, and the Scheme for Adolescent Girls into Saksham Anganwadi and POSHAN 2.0 to converge nutrition-related initiatives and strengthen outcomes. The major components of the Mission Poshan 2.0 include:

- SNP for POSHAN
- Early childhood Care and Education (ECCE) for 3-6 years age group children and early stimulation (0-3 years)
- Upgradation of Anganwadi infrastructure under Saksham Anganwadi and
- Poshan Abhiyan

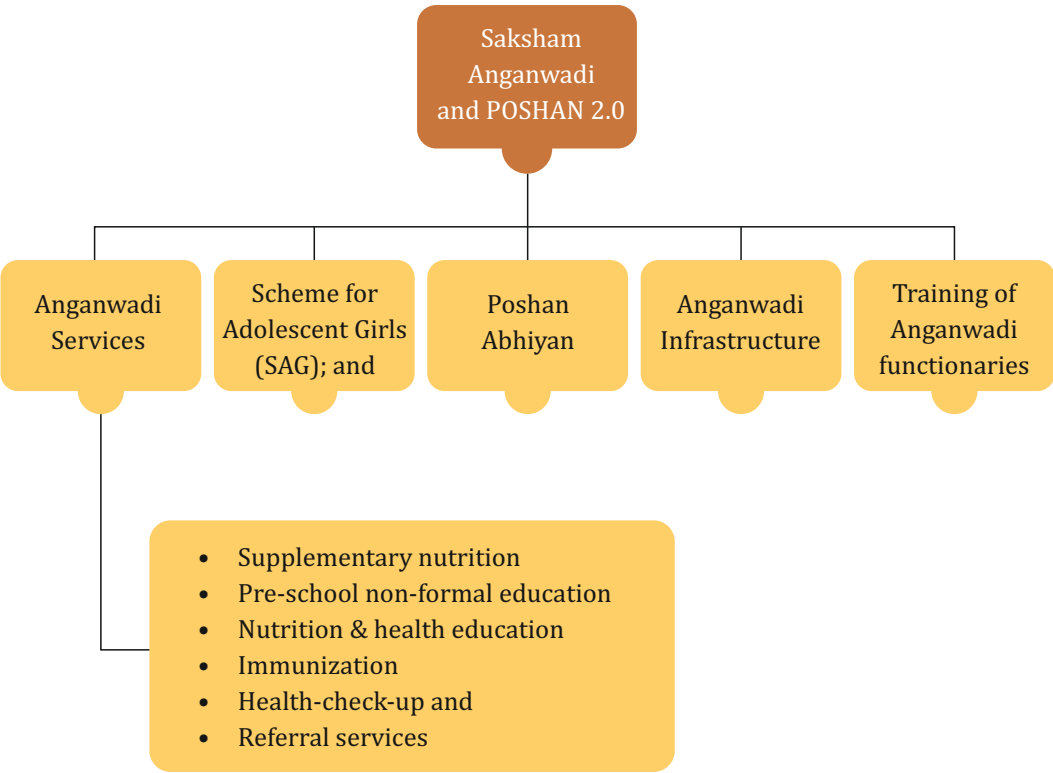
Table 2: Profile of Mission Poshan 2.0

Ministry/Department	Ministry of Women and Child Development
Scheme Type	Centrally Sponsored Scheme
Implemented during	15th Finance Commission Period (2021-22 to 2025-26)
Key Objectives	<ul style="list-style-type: none"> • To contribute to human capital development of the country. • Address challenges of malnutrition. • Promote nutrition awareness and good eating habits for sustainable health and wellbeing; and • Address nutrition related deficiencies through key strategies.
Targeted Beneficiaries	<ul style="list-style-type: none"> • Children upto the age of 6 years. • Pregnant Women and Lactating Mothers (PW&LM) and • Adolescent Girls (14-18 years) in Aspirational Districts and North Eastern States.
Main actors	<ul style="list-style-type: none"> • National Level- MWCD • State/UTs Level- Nodal Department for Implementing ICDS • District - District Collector • Block Level- Child Development Project Officer (CDPO) • Cluster Level- Supervisor • Anganwadi Level- Anganwadi Worker

Ministry/Department	Ministry of Women and Child Development
Planning of the Scheme	<ul style="list-style-type: none"> • Districts Plans are made by incorporating the demands and plans from blocks • District Plans are consolidated to prepare Annual Program Implementation Plan (APIP) at state level. • APIPs are scrutinized by the Central and State Level Societies and funds are released after approval
Institutional Architecture	<ul style="list-style-type: none"> • Central Level: Central Empowered Programme Committee under Anganwadi Services • State Level: State Level Steering Committee • District Level: District Nutrition Committee • Village Level: Village Health Sanitation & Nutrition Committees (VHSNC), Mothers Groups etc.

Source: Poshan 2.0 Guidelines, 2022

Figure1: Components of Mission Poshan 2.0



Source: Poshan 2.0 Guidelines, MWCD, 2022

- **Anganwadi Services:** The Anganwadi Services Scheme provides an integrated services comprises i. supplementary nutrition ii. pre-school non-formal education iii. nutrition & health education iv. Immunization v. health check-up and vi. referral services to eligible beneficiaries Three of the six services; immunization, health check-up and referral services, are related to health and are provided through National Health Mission and Public Health Infrastructure.
- **Scheme for Adolescent Girls:** Under Mission Poshan 2.0, the scheme for adolescent girls has been revised and the targeted beneficiaries have been revised to adolescent girls in the age group of 14 to 18 years in aspirational Districts of States including Assam and North Eastern States instead of out of school girls in the age group of 11-14 years, as in the earlier Scheme.
- **Poshan Abhiyan:** The Abhiyaan is focusing on awareness generation among people for improved nutrition through involvement of Panchayati Raj Institutions/Villages Organizations/SHGs/volunteers etc. and ensuring wide public participation.
- **Anganwadi Infrastructure:** Under Saksham Anganwadi, 2 lakh government owned AWCs @ 40,000 AWCs per year shall be strengthened, upgraded and rejuvenated across the country for improving nutrition delivery.
- **Training of Anganwadi functionaries:** Training of frontline functionaries including CDPOs, supervisors, AWWs and AWHs is a critical component under the Mission for effective implementation of Anganwadi Services and to achieve their intended outcomes,

Financing Pattern

Salaries paid only to District Project Officer (DPO), 1 Statistical Assistant each at district level, Child development Project Officer (CDPO) and 1 Statistical Assistant each at Project Level and Supervisors (1 each for 25 main AWCs) and honorarium to paid to AWWs/AWHs are shared at the following cost sharing ratio between Centre and States/UTs. In the new guideline, while the composition of salaried service providers remained unchanged, the central support to states for posts has been reduced. The existing posts under ICDS/Anganwadi Services would continue at Project/District/State level but would be funded from the State budget (MWCD, 2022).

Table 3: Fund sharing pattern in Mission Poshan 2.0

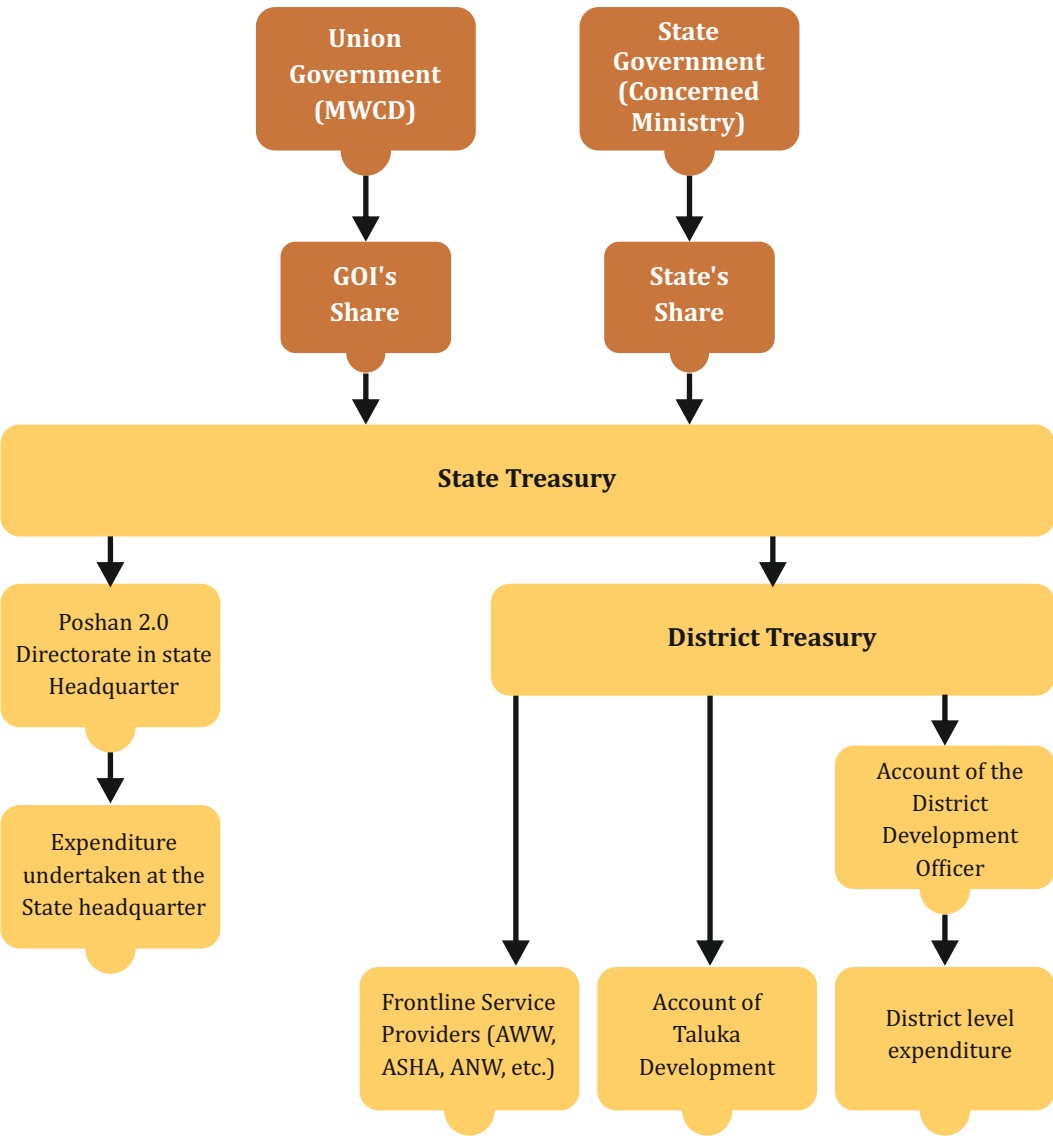
Component	States & UTs (with legislature)	NE/Himalayan States (including J&K)	UTs (without Legislature)
Anganwadi Services (General)	60 : 40	90 : 10	100 : 00
Salary	25 : 75*	90 : 10	100 : 00
Honorarium	60 : 40	90 : 10	100 : 00
Supplementary Nutrition	50 : 50	90 : 10	100 : 00
Construction & Upgradation of AWC Buildings	60 : 40	90 : 10	100 : 00

Note: *Salary under Anganwadi Services Scheme is allowed only for selected staff of Anganwadi Services

Source: Poshan 2.0 Guidelines, MWCD, 2022

As per the guideline, the financial norm for construction of an AWC building is Rs.12.00 lakh, out of which Rs. 8 lakh will be provided through MGNREGS, Rs. 2 lakh from 15th Finance Commission grant and Rs. 2 lakh by MWCD, which would be shared between Centre and States in 60:40 ratio. Construction of toilets in AWCs and provision of drinking water has been provided through Swachh Bharat Mission with a unit cost of Rs. 36,000/- per AWC and Rs. 17,000/- per AWC respectively..

Figure 2: Fund flow architecture in Mission Poshan 2.0



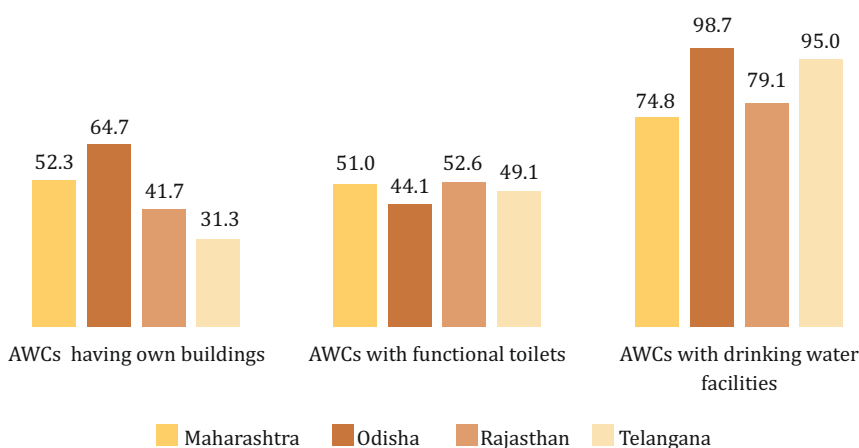
Source: Poshan 2.0 Guidelines, 2022.

V. Performance of select states under the Mission captured through Poshan Tracker

Along with the scheme, a mobile based app called 'Poshan Tracker' was launched in 2021 by MWCD. Purpose of this real time data tracker was better governance of the Mission through efficient delivery and monitoring of the programme components. Over time number of AWCs have increased in all the study states, but in many AWCS the required infrastructures are not in place. For example, in Telangana, only 31% AWCs have their own buildings, remaining are operated from rental space; only around 50% of AWCs have functional toilets. None of the study states have drinking water facilities in all the AWCs (see figure). As basic infrastructure like drinking water and toilet facilities are crucial components for nutritional growth, there is a need for adequate investment towards infrastructure building.

There is a provision for construction of 50,000 Anganwadi buildings in convergence with Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) during 15th FC period. Ministry has also issued directions to States/UTs to co-locate those Anganwadi Centres which are running on rent without sufficient infrastructure, with the nearby Primary Schools. In addition, States/UTs have also been advised to continue to tap funds for construction of AWC buildings from various schemes such as MPLADs, MLALADS, Backward Regions Grant Fund, Rural Infrastructure Development Fund (RIDF), FC Grants to Panchayati Raj Institutions, MGNREGA, Multi-Sectoral Development Programme of Ministry of Minority Affairs, etc. States at their level in their own discretion shall involve individuals, companies, business houses and institutions of repute and Corporate Social Responsibility (CSR) funds for construction of AWCs purely on pro bono basis without any obligation. Similarly, the District Magistrates (DMs) shall encourage/mobilise resources for this purely on pro bono basis and without any obligation. State Government of Telangana in a reporting to MWCD shared that states have been taken up construction of AWC buildings under MGNREGS, RIDF and Pradhan Mantri Adarsh Gram Yojana (Loksabha, 2022).

Figure 3: Infrastructure in AWCs



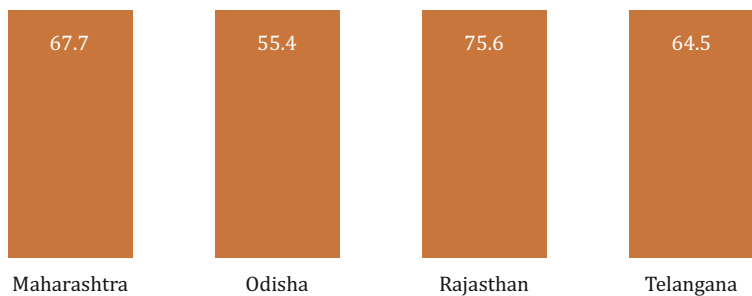
Note: Accesses as on 31st July, 2023.

Source: Poshan Tracker.

SNP is a critical component of the Government's efforts to address malnutrition among women and children. The coverage and quality of SNP are crucial indicators of the effectiveness of nutrition interventions in India. The major components of SNP include the provision of nutritious food, such as fortified cereals and supplementary nutrition, to pregnant and lactating women, and children under the age of six. This food is distributed through AWCs and other delivery platforms, ensuring that the targeted populations have access to essential nutrients. Therefore, strengthening the role of AWW is critical to ensuring that the benefits of nutrition interventions reach the most vulnerable populations, including women and children.

AWWs are the pillar of the Mission. The role of AWWs is manifold. About 25 types of activities have been reported as responsibilities of AWW in the new Mission guideline. While there is no norm related to AWW beneficiary ratio in the scheme guideline, it should not be more than 30 children for one AWW (reference to the Nipun Bharat guideline for pre-school education). However, the following figure of number of beneficiaries per AWW in the four study states indicates the extent of shortage of AWWs under the scheme.

Figure 4: Beneficiary AWW ratio



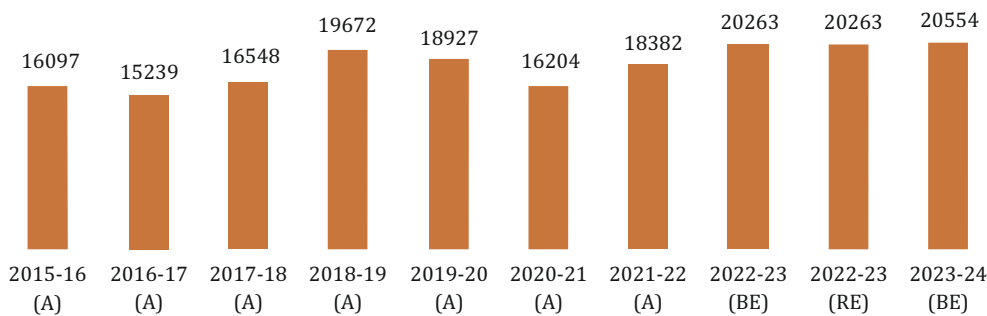
Note: Accessed as on 31st July, 2023.
Source: Poshan Tracker.

For many children and pregnant and lactating mothers, food distributed through AWCs are the key source of nutrition. As per the Mission guideline, supplementary nutrition should be served for minimum 300 days in a year or at least 25 days in a month in respect to morning snacks, hot-cooked meal and take-home ration. However, not all the AWCs were open for the whole month, as reported in the Poshan Tracker. For Maharashtra, 88% AWC was open for at least 21days in July. The numbers are 92%, 82% and 89% for Odisha, Rajasthan and Telangana respectively. This could have impact on the nutritional outcomes of the beneficiaries under the Mission.

VI. Budgetary analysis of Mission Poshan 2.0

The allocation of funds toward nutrition-specific programmes has a direct impact on the coverage and reach of these programmes. With increased funding, these programmes are expected to expand their reach and provide more comprehensive services to women and children, particularly in rural and low socio-economic areas where malnutrition is more prevalent. However, it is also crucial to monitor and evaluate the impact of these programmes and allocate funds accordingly to ensure that they are effectively addressing the root causes of malnutrition and benefiting the targeted populations.

Figure 5: Trend of Total Union Budget Expenditure/Allocation for Mission POSHAN 2.0 (Rs. Crore)

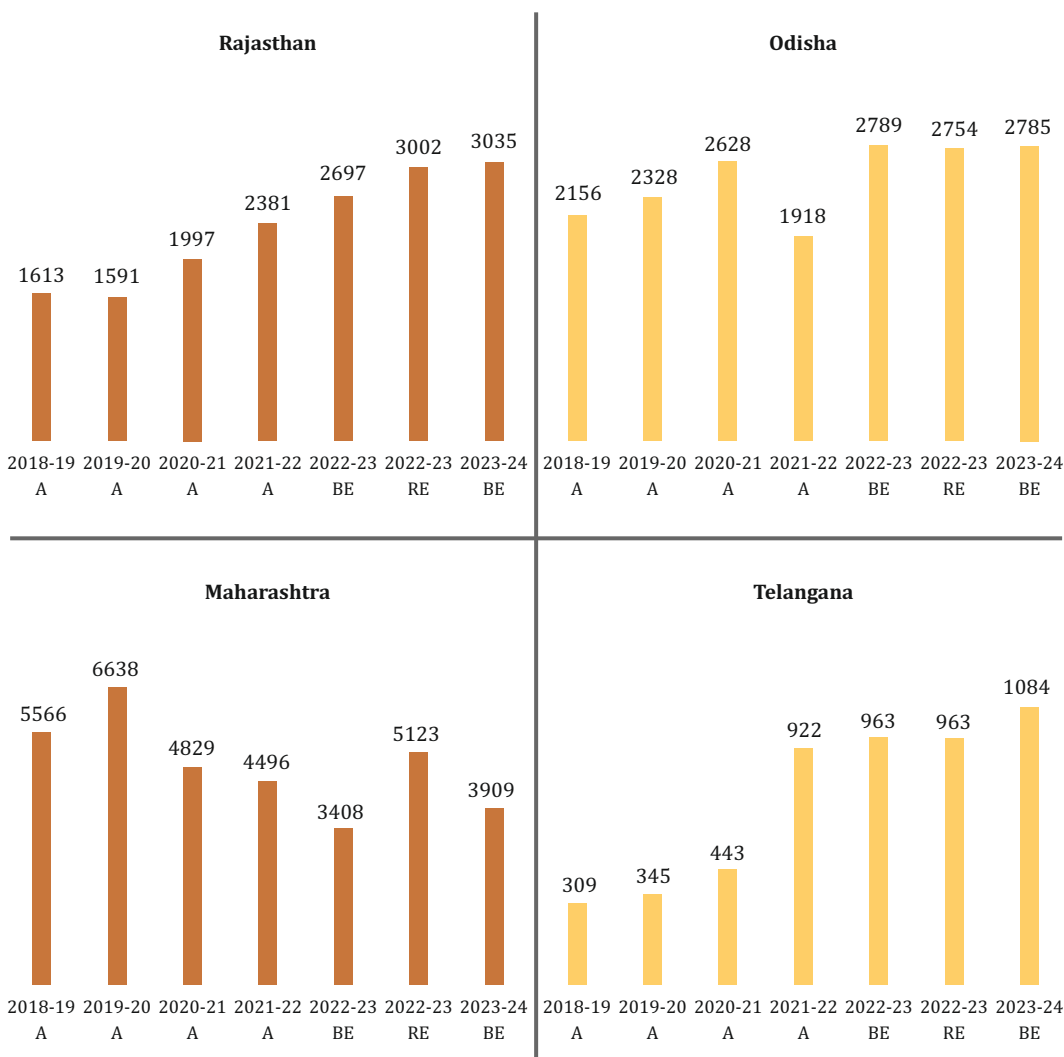


Source: Analysis of Union Budget, CBGA, 2023.

The trend in budget allocation for the Mission Poshan 2.0 schemes has showcased a slow increase over the years (Figure 5). The programme accounts for about 80% of the total budget of the MWCD. In the 2023-24 Union budget, while the increase in the allocation amount towards these schemes reflects the Government's commitment to addressing malnutrition in India, however an inflation adjusted figure reflects inadequate allocation towards the nutrition-related issues that have been highlighted in the survey reports of NFHS-5. In 2023-24 (BE), allocation under Mission Poshan 2.0 increased by only 1.4 % as compared to 2022-23 (BE).

State wise budgetary allocation under the scheme


Figure 6: Allocation and expenditure on ICDS/ Mission POSHAN 2.0 (Rs. Crore)



Note: all the components of Mission POSHAN 2.0 were added with ICDS budget for the period 2018-19 to 2021-22 to make the data comparable.

Source: State Budget Documents, various years.

As resource allocation by the Union government is largely stagnant over the years, ownership of the programme and onus of investment is now more on states. The success of the programme is therefore, largely dependent on how states are planning, budgeting and implementing the programme.



An analysis of state budget document shows that other than Odisha, none of the states are reporting expenditure under budget head 'Mission Poshan 2.0'. The states are still reporting data under 'ICDS' budget head. The expenditure on ICDS shows a mixed pattern over the last few years. While Rajasthan and Telangana show a higher allocation during the covid period, Maharashtra's spending on nutrition was higher in the pre-covid period.

A steady increase of Mission Poshan 2.0 budget is observed in Rajasthan. The state experienced around 88% increase in the Mission budget in the last five years. In its 2023-24 state budget speech, Rajasthan government proposed to open 8000 AWCs and 2000 mini AWCs and a provision of Rs. 320 crore was made for this purpose. Another Rs. 70 crore was allocated for regular health checkup of children in AWCs.

The 2023-24 budget speech of Maharashtra Government proposed to increase the honorarium of AWWs from Rs. 8,325 to Rs. 10,000; the honorarium of mini AWWs from Rs. 5,975 to Rs. 7,200 and the honorarium of AWHs from Rs. 4,425 to Rs.5,500. The budget speech also mentioned about recruiting 20,000 vacant posts of anganwadi, mini anganwadi sevikas and helpers in the state. Despite that, the overall ICDS budget of Maharashtra remained low as compared to 2022-23(RE) and even the actual expenditure incurred in 2021-22.

In 2022-23, the Telangana government has also made appointment in 2,356 AWWs posts and 568 Supervisors posts. The 2023-24 budget speech of Telangana mentioned of increase in honorarium to Rs.13,650 per month to anganwadi teachers, significantly higher than Rs.7,500 in Rajasthan and Rs.8,325 in Maharashtra. The increased honorarium component is reflected in the increased state budget in the last two years.

VII. Implementation of Mission Poshan 2.0: Experience from the study states

Budgetary analysis at the state level does not reflect the pros and cons of merger of earlier nutrition schemes into the new umbrella Mission programme. To understand how the Mission is working at the implementation level, a district level qualitative analysis was carried out in three of the study states – Odisha, Rajasthan and Telangana. For this purpose, key informant interviews have been conducted with state officials, district officials, supervisors, AWWs and AWHs, at the district level associated with the Mission. Despite Maharashtra being one of the study states, the study could not gather district level information due to not managed to get permission of Department of Women and Child Development (DWCD) in Maharashtra for bi-lateral interaction with state and district officials.

The following section highlights state and district level information based on the primary survey.

Odisha

Poshan Abhiyaan has been rolled out in all the districts of Odisha, including remote and backward areas from August 2021. As shared by official from DWCD in Odisha, there is improvement in scheme implementation in the last two years. As stated by the official, 'The Poshan Tracker has leveraged the use of technology to monitor Poshan, resulting in a reduction of 2% in stunting, wasting, and underweight cases per year, and a 3% reduction in anaemia cases per year'.

The details of the coverage of the scheme, total beneficiaries registered on the Poshan Tracker application are given in the table below:

Table 4: Profile of Mission Poshan 2.0 in Odisha

State	Districts	Projects	Sectors	AWCs	Total Beneficiaries
Odisha	30	338	2,811	74,153	41,07,868

Source: Poshan Tracker Dashboard, accessed as on 28th August, 2023.

Since it was implemented recently, there haven't been any significant challenges encountered at the implementation level. The APIP format remains the same (as was under ICDS), with a single format being used at the state level. The state prepares the APIP, which is then reviewed and approved by the Union Secretary. There is no separate APIP prepared for each sub-scheme. The department meets with other relevant departments for better implementation of the scheme. While the Convergence Action Plan (CAP) is supposed to be conducted on a quarterly basis, but that is not getting followed in the state.

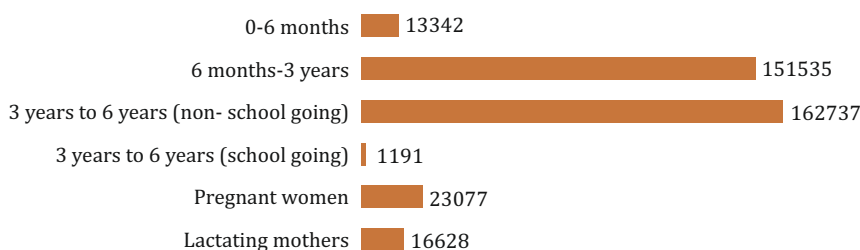
As per the new guideline, 'States at their level in their own discretion shall involve Individuals, Companies, Business Houses and Institution of repute, CSR funds for construction of AWCs purely on pro bono basis without any obligation'. It has been shared that for activities under

ICDS General, state has received CSR funds from organisations such as the Odisha Mineral Bearing Areas Development Corporation.

Ganjam

For Odisha, Ganjam district has been selected for the case study. In terms of geographical area, Ganjam is the 5th largest district in Odisha. It is house to 35.3 lakh population and 39% of them are children of age 0-19 years. As shared by CDPO of the district, there are 5161 Anganwadi and Mini Anganwadi centres, of which 591 are co-located with the nearby primary schools.

Figure 7: Coverage of beneficiaries under Mission Poshan 2.0 - Ganjam, Odisha



Source: Primary survey.

Focus Group Discussion (FGD) with Supervisor, AWW and AWH in aspirational block Surada in, Ganjam district revealed that they have heard about merger of three schemes and have a partial knowledge about the new scheme. They got to know about this merger in a sector meeting. It has also been shared that the supervisors received training on the new guidelines of the scheme. In 2022-23, the AWWs attended three one-day trainings on 1) Tathya (2) Height and Weight (3) POSHAN, and a 4-day training on ECCE. The training on ECCE covers issues like role of care givers, guidelines for Mothers, conducting Parents Meetings, conducting awareness campaign, and role play with PRI members. The trainings were conducted offline. While there was no accommodation provided, but at the end of the training period, the AWWs got Rs. 600 each as travel allowance (TA). While supervisor participated in the training programme, he was not given any TA for the same.

Each AWW has received a smartphone from government. They need to operate four apps related to the scheme from the mobile. These are E-Mamata, Poshan, Mo Chatua & Tathya. They have received training on how to operate the applications in the mobile. The AWW receives Rs. 200 as incentives every month and Rs 500 for recharge in every six months.

Rajasthan

Rajasthan government has implemented the Mission Saksham Anganwadi and POSHAN 2.0 guideline just after the guidelines related circular received from the Union government.

Table 5: Profile of Mission Poshan 2.0 in Rajasthan

State	Districts	Projects	Sectors	AWCs	Total Beneficiaries
Rajasthan	33	304	2203	61,870	46,10,505

Source: Poshan Tracker Dashboard, accessed as on 28th August, 2023.

However, the new mission is largely merger of schemes and renaming as 'Mission Saksham Anganwadi and POSHAN 2.0'. There are not significant changes observed in the planning, funding and implementation process.

Though three schemes have been merged under the Mission, there is no change happened in the format of APIPs and separate APIPs are getting prepared for each sub-scheme. As shared by the state officials, the financial burden of the state government has increased as the Union government curtailed fund for salary component under Saksham Anganwadi. Many posts like Block programme Assistant, Data Entry Operator have been removed and thus the implementation of programmes at block and below levels is getting affected.

For construction of AWCs, Rajasthan government has signed Memorandum of Understanding with Vedanta for upgradation of 25000 AWCs with all the facilities as 'Nandghar'. Regular meetings are organized with other departments (i.e., Education, Horticulture, Rural Development And Panchayati Raj, Health etc.) on quarterly basis for making CAP with other concerned departments. Such convergence meetings are organized in the chairmanship of Chief Secretary of the Rajasthan Government.

There are no specific guidelines for children with special needs. Raj Poshan Application has been developed for monitoring of proper implementation of ICDS services in the state. Rajdharaa Application is developed for real time monitoring of AWCs by Deputy Director, CDPO, Supervisors and others staff of ICDS in the state.

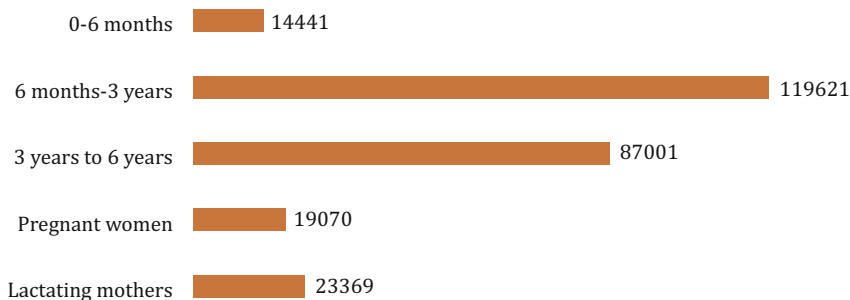
Jaipur and Karauli have been selected for the case study in Rajasthan.

Jaipur

There are total of 4254 AWCs (4054 AWCs and 200 Mini AWCs) in Jaipur district. Out of which 2075 AWCs have been co-located with nearby primary schools. However, there is no financial support for co-located AWCs from the Dept. of Education.

As on 8th May, 2023, there are a total of 263502 children and pregnant and lactating mothers in Jaipur are covered under the scheme.

Figure 8: Coverage of beneficiaries under Mission Poshan 2.0 - Jaipur, Rajasthan



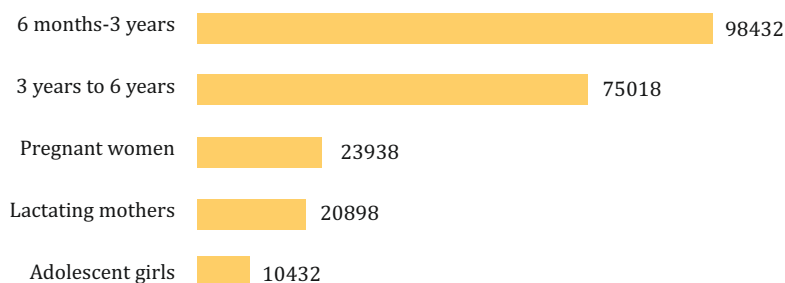
Source: Primary survey.

Around 878 AWCs in Jaipur have been selected for developing as Nand Ghar (including 700 AWCs for renovations). However, no village in Jaipur district has been declared as 'Kuposhan Mukht' village. It has been shared that low unit cost of supplementary nutrition programmes is one of the reasons behind not achieving the desired outcome. The unit cost of SNP for children (6 months to 6 years) and pregnant and lactating mothers are Rs. 8/day and Rs. 9.5/day under the scheme. These unit costs are prevailing from 2017-18. While there was a need for revising the financial norms and make it inflation-indexed, the new guideline continued to follow the same unit costs.

Karauli is an aspirational district. Thus, along with children and pregnant and lactating mothers, there is provision for supplementary nutrition for the adolescent girls. There are total of 1309 AWCs in Karauli district, of which 1208 are AWCs and 101 are Mini AWCs. Out of which 443 AWCs have been co-located with nearby primary schools. However, there is no financial support for the co-located AWCs from the Dept. of Education.

As on 16th May, 2023, there are a total of 228718 children, adolescent girls and pregnant and lactating mothers in Karauli district are covered under the scheme.

Figure 9: Coverage of beneficiaries under Mission Poshan 2.0 - Karauli, Rajasthan



Source: Primary survey.

As shared by CDPO of Mission Poshan 2.0, regular visits are carried out for monitoring of the programme at district, block and below levels (i.e. sector and AWC level) by CDPO and supervisors and there is provision of car for the field visits. In the last financial year, the department conducted two offline and online trainings on ECCE and how to operate smart-phones and data feeding in Poshan tracker, as shared by DCPO and supervisor in Karauli district during FGD. While TA are provided by the department for attending trainings but delay in payment was major issue with regards to TA.

As shared by an AWW, they received Smart Phone in 2017-18. But for many of them, the device stopped working after few months and hence they are using their own mobile. The AWW also receives Rs. 160 per month for mobile recharge, which is Rs.200 as per the financial norm of Mission Poshan 2.0. However, the amount is low in comparison to market price of data plan. Moreover, given they have to perform many activities related to AWCs and allied schemes, the data requirement is higher than what the existing plan offers.

Recently, there is revision of honorarium of AWW and AWH in the states. In 2023-24 budget, the state government announced a 15% hike in the honorarium. The table below provides the amount of honorarium received by AWW and AWHs in the state.

Table 6: Honorarium of AWW and AWH in Rajasthan

Head	Honorarium (w.e.f April 1, 2022)	
AWW	8460	15% increased from previous years with effect from April 1, 2023
AWH	4890	
MiniAWWs	6470	

Source: Primary survey.

The perception survey with AWW and AWH in sample AWCs in Karauli district reveals that the quality of POSHAHAR was not good for some months. The unit cost of fuel/gas cylinder is very low and stagnant at 45 paisa per child. Mother's groups are formatted in the sample AWCs but Poshan panchayats are not formatted yet and therefore, the trainings related to Poshan Panchayat guideline are not happened.

Telangana

Table 7: Profile of Mission Poshan 2.0 in Telangana

State	Districts	Projects	Sectors	AWCs	Total Beneficiaries
Telangana	33	149	1431	35,693	22,20,899

Source: Poshan Tracker Dashboard, accessed as on 28th August, 2023.

Yadadri Bhongir

For Telangana, Yadadri Bhongir district has been selected for the case study. As shared by the CDPO of the district, around 901 AWCs are there in Yadadri Bhongir district, of which 57 are mini Anganwadi Centres. They serve around 43034 children and pregnant and lactating mothers (See Table below). A total 432 AWCs have been co located with the nearby primary Schools. However, these AWCs do not get any financial support from the Department of School Education.

In an interaction with CDPO of of Mothkur Rural Project in Yadadri Bhongir district, it was informed that there are 136 AWC and mini AWC under his supervision; of which 68 AWCs have been co located with the nearby primary Schools and 38 of which run from own buildings and 30 are from existing school buildings. While no fund was received for co-location of anganwadi with primary school, but as shared by CDPO, Department of Education painted five buildings in that area.

Table 8: Coverage of beneficiaries under Mission Poshan 2.0 - Yadadri Bhongir, Telangana

Children				Pregnant Women	Lactating Mothers	Grand Total
7 months - 1 Year	1-3 Years	3-6 Years	Total			
5148	16704	12320	34172	4680	4182	43034

Source: As per MPR – March 2023.

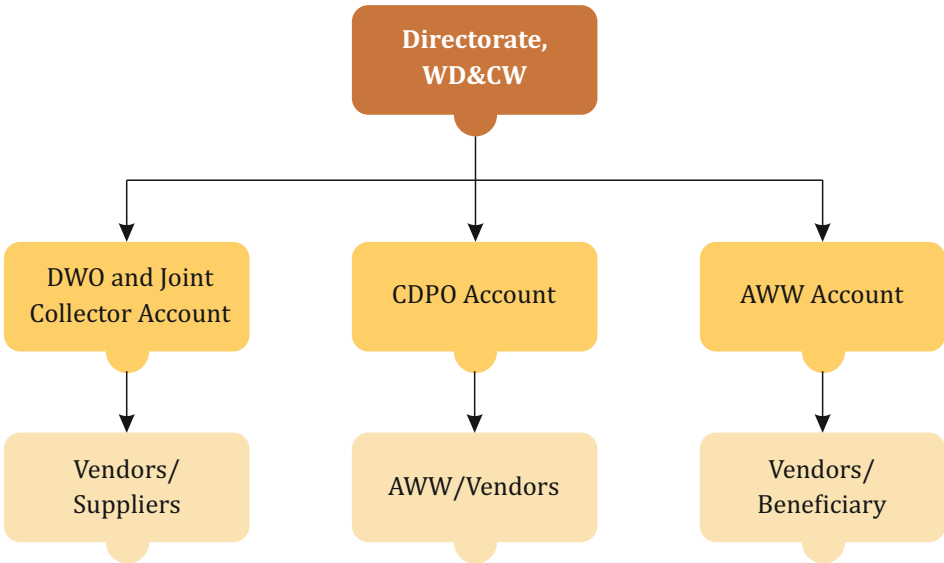
The coverage of the scheme has increased over time. However, there is no specific budgetary interventions from the state under Mission Poshan 2.0 for children with disabilities and children and women from Scheduled caste (SC) and Scheduled tribe (ST) communities, though the nutritional deprivation is more prominent among these group. In this connection, it is to be noted here that Telangana government runs Arogya Lakshmi scheme, a nutritional program launched in 2015 to support pregnant and lactating women. States are also running Bhavita centres as Inclusive Education Resource Centre that are responsible for school preparedness of disabled children of 4-18 years.

As shared by The District Welfare Officer (DWO), there is no change in the process of preparing workplan under the new guideline. The district prepares single APIP for all the three schemes, i.e, Anganwadi services, Scheme for Adolescent Girls and Poshan Abhiyaan as was the case earlier. Though there is provision for strengthening upgradation of existing AWCs into Saksham Anganwadi, state did not receive any such fund. However, in 2022-23, five new AWCs (Alair-1, Ramannapet -2, Bhongir-2) were constructed using CSR funds, as shared by DWO.

Each AWC in the district received a grant of Rs. 500 per month in 2022-23 to conduct two community-based events in the district. The money was spent on events including early registration, Akshara Bhasyam, Anna prasana, Suposhana divas, and Hand wash. As per the new guideline, each district will also be provided Rs. 5 lakh per annum for Information Education

and Communication (IEC) and Rs. 5 lakh/ annum for Poshan Maah and Poshan Pakhwada. However, none of the study districts in Telangana received any fund for IEC. Yadadri Bhongir reported a receipt of only Rs.10,000 for Poshan Pakhwada.

Figure 10: Fund flow pattern of Mission Poshan 2.0 in Telangana




Source: Perception survey.

As shared by DWO of Yadadri Bhongir district, the fund flow pattern from state to districts varies with components. Part of the funds directly get transferred from the DWCD to the DWO account, and part of the funds get transferred to the joint account of the DWO and joint district collector account. A part of the funds from DWO getting allocated for conducting district level trainings and other activities such as Incremental Learning Approach (ILA), Poshana Maa and Poshana Pakhwada which is conducted by the district-level Resource Group and block resource group. Funds for training purpose like expenditure on Flexi banners, snacks, food, projectors, stationery, vehicles, hall charges, get transferred to the account of vendors.

Funds get transferred from the DWCD to the CDPO Account and from there to the Vendors/ AWW account for conducting sector level trainings (expenditures like Flexi banner, snacks, food, projector, stationery, and hall charges) on ILA Training, and Poshan Maa. Block Resource Group and supervisors conduct these trainings for AWW and AWH.

Honorarium, the performance incentives and funds for monthly Community Based Events directly get transferred to the account of AWWs. The honorarium of AWW and AWH in Telangana state is Rs. 13650 and Rs.7800 respectively.

Though there is no delay in the fund flow from state to district as reported by DWO, due to huge staff shortage, the implementation of programmes gets affected, especially there is delay in the submission of utilization reports. This affects fund utilisation under the scheme.



AWC supervisors in Telangana are salaried employee. As shared by one supervisor, he receives Rs. 50, 000 per month and the salary was revised in December, 2022. They have been provided smart phones by government for the monitoring purpose as supervisors need to upload information on Poshan tracker app on a day-to-day basis. Data recharge and maintenance cost are borne by the DWCD.

Supervisor of Alair Project in Yadadri Bhongir District shared that she was informed about the new scheme guideline and merger of three schemes under Mission Poshan 2.0 through an orientation programme. The supervisor also attended two training programmes on ECCE and incremental learning approach, each one was of 3 days duration. The trainings were conducted both online and offline. For offline training, TA and dearness allowance were provided.

In most of the projects in Telangana, Poshan Panchayats, Mothers' Groups and Village Health and Sanitation committee have been formed. The Poshan Panchayats get regular training by CDPO and supervisors.

VIII. Conclusion and Policy Suggestions


Government of India adopted the Mission Saksham Anganwadi and POSHAN 2.0 in 2021-22 to address the malnutrition challenge of children, adolescent girls and pregnant and lactating mothers and strengthening the eco-system of ECCE in India. The programme has been implemented in mission mode for a five-year time period, ending in 2025-26. Therefore, in the half-way of the implementation period, this study explored how the programme is getting implemented at the sub-national level, and whether the merger of schemes helped to utilise human resources and financial resources more effectively as compared to the earlier ICDS programme. To understand the institutional and fund-flow architecture of the Mission, the guideline of the programme is thoroughly studied. This was followed by a budgetary analysis of the scheme at the Union level and in four states namely Maharashtra, Odisha, Rajasthan and Telangana. The states are chosen from four regions with a mixed performance in nutritional indicators as reflected in NFHS.

The analysis shows that in terms of coverage, other than children of 0-6 years and pregnant and lactating mothers, the new programme has expanded the nutritional intervention to all 14-18 years age group adolescent girls in aspirational districts and north-east region. In ICDS, the intervention was for 11-14 years age group out of school girls. However, given the high rate of anaemia among girls and women in the country, the scheme should consider incorporating all girls of 11-18 years for nutritional intervention under the Mission.

While there is improvement in fund release and fund utilisation process, the implementation is still a challenge because of shortage of human resources. A cut in share by the Union government on salary component made the situation a bit difficult as the responsibility of recruitment is now on state governments. Due to resource crunch, posts like Block programme Assistant, Data Entry Operator have been removed and thus the implementation of programmes at block level and below is getting affected.

Several studies have highlighted that an effective implementation of ICDS requires revision of financial norms including honorarium of AWW and AWHs, per child spending on SNP, rent, construction of AWC. However, this programmatic gap is continued in the Mission Poshan 2.0 with largely unchanged financial norms for majority of the components. Therefore, the study highlights the need for revisiting the financial norms proposed under Mission Poshan 2.0.

Learning from various studies and inputs received from states through perception survey and FGDs with Anganwadi functionaries reveals no significant change in programme implementation at the district level. The states are continuing preparing three separate APIP for the three schemes merged under the Mission. Other than Odisha, no other study states have even started reporting expenditure under budget head 'Saksham Anganwadi and Poshan 2.0', as reflected in the state budget document. The allocation and expenditure are still getting reported as ICDS, National Nutrition Mission and programme for adolescent girls. States should report the budgetary allocation under a single head 'Saksham Anganwadi and Poshan 2' with disaggregated budgetary details of all the interventions under the Mission. This could only help in understanding the resource gap and utilisation pattern in each intervention.



Perception survey also revealed that at sector level training, Anganwadi functionaries got to know about the new Mission and merger of schemes. However, most of the functionaries are not aware about the guideline and programmatic details of the new Mission. States need to strengthen the training component under the Mission and this would require prior planning and adequate budgeting.

Data shows uneven implementation of the Mission across the study states. A major challenge of ICDS implementation was inadequate funding. However, budgetary allocation by the Union government in 2023-24 shows only a 1.4% increase in allocation from 2022-23, even after merger of three schemes. However, a significant increase in budget is observed in Rajasthan (88%) and Telangana (250%) between 2018-19 and 2023-24. All the study states have made recruitment against vacant posts of AWW and AWH. States have also revised the amount of honorarium. This reflects larger commitment of states towards achieving desired nutritional outcomes. While the guideline shows a comprehensive role of village panchayats and communities in implementation process, they need to be supported with adequate resources to execute their role. Therefore, to make the Mission effective both Union government and State governments need to step up investment and meet the budgetary implication of Rs. 1,81,703 crore as envisaged during the inception of the Mission.

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