

**ODISHA STATE POLICY ON EARLY
CHILDHOOD CARE AND EDUCATION 2017
(1st Draft)**

**Women and Child Development Department
Government of Odisha**

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1. Introduction & Background to the Policy

1.1. Defining Early Childhood Care & Education

A child learns well before entering into primary school. It begins at birth and thus its very critical phase of human development. Comprehensive Early Childhood Care and Education (ECCE) fosters holistic development and learning of young children from birth to eight years of age. Early childhood care and development (ECCD¹) which encompasses ECCE is primarily about the support required for development of children in the age group of 0-60 months. It is accepted in different literatures that early childhood encompasses the period of human development from prenatal to 8 years of age. Based on research, ECCD links the young child's cognitive, social, emotional, and physical processes with the care (by families, communities, and the nation) required which support their development.

1.2. Historical Overview of International, National Policy Frameworks

UN Convention on Rights of the Child provides for an interdisciplinary nature of ECCD. This includes health, nutrition, education, social science, economics, child protection, and social welfare. Articles 3, 6 and 18 of the UN Convention on the Rights of the Child requires the States Parties to ensure to the maximum extent possible the survival and development of the child, render appropriate assistance to parents and legal guardians in performance of their child-rearing responsibilities and ensure the development of institutions, facilities and services for the care of children. It also requires States Parties to take all appropriate measures to ensure that children of working parents have the right to benefit from child-rearing services and facilities for which they are eligible. Obligation of State parties or the corresponding rights of the child under the convention include:

- 'Best Interests' of the Child must be a primary consideration for the authorities of a State while taking decision, which affects the child (Article-3).
- Respect for family's responsibilities, rights and duties of parents towards child (Article-5)
- Inherent right to life, right to survival and development (Article-6).
- Rights of the Child to be registered after birth, right to acquire a name and nationality, right to know and be cared for by his or her parents (Article-7).
- Right of the child to preserve his/her identity, including nationality, name and family relations (Article- 8).
- Rights of Child to continue in family unit (Article-9).
- Enforcement of Responsibility of parents (Article-18).
- Prevention of deprivation of family environment and proper regulation of Adoption (Article-20).
- Right of the child to the enjoyment of the highest attainable standard of health.
- Guarantee of Social security and a good standard of life (Article-26).
- Imparting of compulsory Primary Education (Article-28).
- Social and Cultural rights of the child (Article –31).
- Prevention of Economic exploitation of the Child (Article-32).
- Protection of children from illicit use of narcotic drugs and psychotropic

¹ ECCD is also known as early childhood development (ECD) and encompasses early childhood education (ECE), early childhood care and education (ECCE), and other designations. www.ecdgroup.com

- The Rights of the child for correctives for the situation on separation from family (Article-10).
- Prevention by State Parties of illicit traffic in children (Article-11).
- Personal Freedoms of the child (Article-12).
- substances (Article-33).
- Prevention of Sexual exploitation and sexual abuse of the child (Article-34).
- Prevention of Abduction, sale or traffic in children (Article-35).
- Prevention of torture or other cruel, inhuman or degrading treatment or punishment to the child

At the global level, Millennium Development Goals (MDGs) were designed with a set of eight goals to be achieved by 2015. Six out of eight MDGs very much directly and pragmatically connect to meeting of the Rights of the Child – to equality, education, health and protection. All these are put under the programme ‘World Fit for Children’; and achieving as well as sustenance of these goals largely depends on realization of the provisions of ECCD through various national flagship programmes like Integrated Child Development Scheme (ICDS), Total Sanitation Campaign and Integrated Child Protection Scheme which includes supplementary nutrition programme, psycho-motor development of children, monitoring of growth and physical development for children under the age of 12-60 months. India is committed to achievement of MDG and without children it would not be possible to achieve this international commitment. Various indicators for monitoring of MDG for children have been formulated out of which the following MDGs² have direct impact on the children.

MDG 1: (Eradicate extreme poverty and hunger): Promoting healthy lives to children.

- Reduce by half the proportion of children who suffer from hunger by 2015

MDG 2: (Achieve universal education): Providing quality education to children.

- Ensure that all boys and girls complete a full course of primary schooling

MDG 3: (Promote gender equality and empower women): every girl and boy has equal opportunity to have a quality education and the knowledge, skill and support to fight HIV/AIDS while eliminating gender disparities.

- Eliminate gender disparity in primary and secondary education

MDG 4: (Reduce child mortality): Providing healthy lives to children by reducing child mortality.

- Reduce by two thirds the mortality rate among children under five

MDG 5: Improve maternal health

- Reduce by three quarters the maternal mortality ratio.

MDG 6: (Combat HIV/AIDS, malaria etc.): Promoting healthy lives to children by combating malaria/HIV.

- Combat HIV/AIDS, Malaria and other diseases
- Halt the spread of HIV/AIDS; reverse the incidence of malaria and other diseases

MDG 7: (Ensure environmental sustainability): Ensuring every boy and girl the access to safe drinking water and adequate sanitation.

- Integrate the principals of sustainable development into country policies and programmes; reverse the loss of environmental resources
- Reduce by half the proportion of people without sustainable access to safe drinking water
- Achieve improvement in lives of at least 100 million slum dwellers by 2022.

² Source: www.unicef.org/mdg/28184_28230

The Sustainable Development Goals (SDGs) were officially adopted at a UN summit in September 2015 and became applicable from January 2016. The Sustainable Development Goals (SDGs), or Global Goals, are a new, 10 universal set of goals, targets and indicators³. There are 17 goals and 169 targets that aim to tackle poverty, inequality and climate change. The SDGs follow and expand on the Millennium Development Goals (MDGs). Early childhood development is directly addressed in Goal 4: “Ensure inclusive and equitable education and promote life-long learning opportunities for all.” It is specifically mentioned in Target 4.2: *By 2030 ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.* ECD’s inclusion in and reflection across the SDGs framework means that all countries now have the responsibility to ensure that their youngest citizens not only survive but also thrive. The focus now should be on how to deliver and measure success of the goals and targets that relate to ECD in partnership with civil society organizations (CSOs) and other stakeholders.

Constitution of India has clearly mentioned the importance of improving the well-being of children, relevant provisions are:

Article 14: The state shall not deny to any person equality before the law or the equal protection of laws within the territory of India.

Article 15: The state shall not discriminate against any citizen...Nothing in this article shall prevent the state from making any special provisions for women and children.

Article 21: No person shall be deprived of his life or personal liberty except according to procedure established by law.

Article 21 A: The state shall provide free and compulsory education to all children of the age 6-14 years in such manner as the state may by law determine. (Accepted as fundamental right by 86th constitutional amendment in the year 2002).

Article 23: Traffic in human beings, beggar and other forms of forced labour are prohibited and contravention of this provision shall be an offence punishable in accordance with the law.

Article 24: No child below the age of 14 years shall be employed to work in any factory or mine or engaged in any other hazardous employment.

Article 39F: State should ensure that the children are given opportunities and facilities to develop in healthy manner and in conditions of freedom and dignity and children and youth are to be protected against exploitation and moral material abandonment.

Article 45: The state shall endeavour to provide early childhood care and education for all children until they complete the age of 6 years.

Article 243G: Provides for institutionalization of child care by seeking to entrust programmes of Women and Child Development to panchayat apart from education, family welfare, health and sanitation (Items of XIth schedule)

The rights of children to free and compulsory education act which came into effect from April 1 2010 has also addressed ECCD under section 11 of the act which states *with a view to prepare children above the age of three years for elementary education and to provide early childhood care and education for all children until they complete the age of six years, the appropriate government may make necessary arrangement for providing free pre-education for such children.*

³ List of Sustainable Development Goals <https://sustainabledevelopment.un.org/?menu=1300>

1.3. National Policy on ECCE

In 2013, the Union Government of India introduced a national ECCE policy that covers all early childhood care and education programmes and related services in public, private and voluntary sectors in all settings across regions. These services include anganwadis (AWC), crèches, play schools, preschools, nursery schools, kindergartens, preparatory schools, balwadis, and home-based care.

The policy seeks to universalize the provision of ECCE for all children, mainly through the ICDS scheme in the public sector and other service provisions across systems. It also proposes that the Anganwadi Centres be repositioned as “vibrant child-friendly Early Childhood Development Centres” with adequate infrastructure and resources for ensuring a continuum of the ECCE in a life-cycle approach and child-related outcomes. It also envisions the conversion of AWCs into AWCs-cum-crèches with a planned early stimulation component and interactive environment for children below 3 years. It also talks about taking specific measures to reach out to young children with different abilities.

The National ECCE Policy also seeks to standardize the quality of ECCE available to children, basic quality standards and specifications that are applicable and valid across public, private and voluntary sectors. It also proposes a Regulatory Framework for the ECCE to ensure basic quality inputs and outcomes, across all service providers undertaking such services – to be progressively evolved at the national level and implemented by States in the next five years.

The policy also proposes the development of a developmentally appropriate National Curriculum Framework for the ECCE, with an aim to promote play-based, experiential and child-friendly provision for early education and all-round development. In order to sustain the multi-sectoral and inter-agency collaboration, a thematic ECCE Committee with experts has been proposed under the ICDS Mission Steering Group initially. This would be later formed as a National ECCE Council, with corresponding councils at the State level, and later at the district level. The council has been projected as the apex body to guide and oversee the implementation of the policy as well as keep ECCE programmes consistent with the National ECCE Policy.

The Ministry of Women and Child Development (MWCD) is the nodal department for ECCE. MWCD is responsible for the Integrated Child Development Services (ICDS) programme, which is a centrally sponsored and state administered ECCE programme, covering around 38 million children through a network of almost 1.4 million anganwadi centres (a village courtyard). ICDS includes delivery of an integrated package of services such as supplementary nutrition, immunization, health check-up, preschool education, referral services and nutrition & health education. ECCE is one of the components and aims at psycho-social development of children and developing school readiness.

1.4. Situation Analysis of Odisha

Odisha is home to 50.354 Lakh children under the age group of 0-6 years and 63.065 Lakh children in the age group 6-14 years of age. Research and empirical evidences on child care and education

⁴ Provisional population census report 2011

⁵ District Information on School Education 2008-09

suggest that this is the age of building the foundation of a responsible citizen and good human being; and investments made in this age group offers a lifelong learning and development dividends. The development of attitude and values as well as interest to learn are also influenced at this stage, while lack of support or neglect can lead to negative consequences, which are irreversible. The field evidence indicates that early childhood represents the best opportunity for breaking the inter-generational cycle of multiple disadvantages: chronic under-nutrition, poor health, gender discrimination and low socio-economic status.

The data from provisional census 2011 shows that the overall population of children in the age group of 0-6 years has gone down from 5.35 million to 5.03 million. In comparison to rural child population of 4.33 million, the urban child population is just 0.7 million only. Odisha reportedly has lower percentage of child population in comparison to total population in India. If we consider the children in need of care and protection and children in conflict with law, the situation is worsening day by day and the implementation of progressive acts for children like Juvenile justice care and protection act 2002 remains an area of concern.

The state of Odisha has been lagging behind in several respects with the national average. For example, the current IMR of Odisha is 63 against the national average of 51. The MMR is 258 against the national average of 212 per 100,000 live births⁶.

Comparing some of the indicators of child survival with national average Odisha is far behind the national average in terms of underweight children, exclusive breast feeding of children, breastfeeding with one hour of birth and providing semi solid food to a child in age group of 6-9 years⁷. More than 50 percent of India children are malnourished with Odisha having 54 percent malnourished children

Immunization is one of the major needs for survival of a child at early years of age. Despite several campaigns to ensure complete coverage of children under immunization Odisha remains far away from target. Coming across specific indicators of immunization Odisha has performed better than the national average, but it is lagging behind on indicator of polio vaccine coverage, DPT vaccine and there is a very low turnover compared to national average in terms of acute respiratory cases brought to health facility.

A comparative analysis of children health and children right to development with national average further complicates the matter and brings Odisha to the bottom of Early Childhood care and Development outcomes. The Under 5 mortality rate is 84 as compared to 64 at national level. Odisha is much below as compared to indicators of maternal health at national level.

2. Purpose of the Odisha State ECCE Policy

This Policy acknowledges recognition by the Government of Odisha of the universal right of all children from the pre-natal period to six years of age in Odisha (irrespective of caste, sex, ethnicity

⁶ Source: Annual Health Survey 2010-11

⁷ National Family Health Survey report 2008-09

and language) to early childhood care and education (ECCE). It duly recognizes the considerable significance of providing each child with a holistic early childhood.

The policy lays down the way forward for careful adoption of a targeted approach so that all children including those belonging to extra-disadvantaged communities like tribals, Dalits, minorities, migrant communities and especially girl children are provided with a sound foundation for survival, growth and development through adequate focus on early childhood care and learning. This is key in a multi-caste, multi-ethnic and multi-lingual state like Odisha. The Policy also duly recognizes the synergistic and inter-dependent relationship amongst the health, nutrition, psycho-social, emotional and learning needs of the child.

It articulates a comprehensive set of commitments to i) develop a strong and enabling ECCE system; ii) set up the related requisite institutional structures; iii) supplement and compliment the national ECCE programmes and services by providing adequate public funding and infrastructure; and in doing so iv) ensure sustainable universal availability and equitable access to comprehensive and quality ECCE childhood development programmes and services for the period from conception until age 06 (when children enter formal school).

More specifically, it:

- Enunciates an overarching multi-sectoral framework of ECCE definitions. Within the ambit of this framework all relevant state specific laws, programmes and strategies are to be developed, implemented and synergized;
- Spells out the commitments and responsibilities of the State Government to ensure the provisioning of a universal comprehensive ECCE programme for children;
- Defines a comprehensive set of measures to support the national ECCE programme;
- Identifies the relevant duty bearers and their roles and responsibilities for the provision of the various components of ECCE;
- Seeks to establish a benchmark on the quality, quantity, proximity and periodicity of the ECCE provisions from various government programmes;
- Defines the measures to be taken by the Government of Odisha to ensure that the ECCE services reach the extra-disadvantaged children like children belonging to tribal, dalit, minority, migrant communities and especially the girl children
- Draws a sketch as to what could be an effective ECCE management, leadership and coordinating structure to facilitate effective planning and monitoring of, and reporting on, the realization of i) universal availability of and ii) equitable access to ECCE by all children;
- Support the strengthening and convergence of services to improve the availability of and access to all ECCE services;
- Plan, fund, implement and monitor a state level integrated early childhood care and education related communication strategy.

1.5. Vision of the Policy

All children from the pre-natal period to six years of age in Odisha (irrespective of caste, sex, ethnicity, geography and language) are provided with free, universal, inclusive, equitable, joyful and contextualized opportunities for maximum survival and optimal growth and development.

1.6. Mission of the Policy

The mission of the Odisha State ECCE Policy is to expound a target-driven approach for making comprehensive and qualitative ECCE universally available in 'sufficient quantities and proximity' so that children from all sections enjoy an equal opportunity to access them.

1.7. ECCE Objectives

With a view to realizing the above stated vision and mission statements, the Government of Odisha including other key stakeholders like communities and private players would need to be guided by the following policy objectives while taking any legislative, programmatic, funding and other measures:

- Ensuring universal availability of comprehensive and qualitative ECCE services in 'adequate quantities and in adequate proximities' to all children and their care-givers by putting in place appropriate programmatic, infrastructural, financial and human resource related arrangements;
- Respecting the diversity of contexts, and developing and promoting 'geographically, culturally and linguistically' appropriate and adaptive strategies, measures, and material to address the barriers preventing the extra-vulnerable such as children from the tribal, dalit, minority, migrant communities and especially girl children from accessing the ECCE services;
- All along adopting a decentralized, participatory and locally responsive approach.
- Defining standards as to the quality, quantity, proximity, periodicity and the curriculum framework for ECCE provisions and ensuring their enforcement/ adherence
- Deploying adequate and capable human resources and building their capacity to deliver needs-based and quality ECCE services to children and their families;
- Generating awareness about the significance of ECCE amongst parents and community members and promoting strong partnerships with them so as to help them monitor and improve the quality of life of the targeted young children;
- Ensuring the alignment and harmonization of sectoral policies, laws and programmes responsible for ECCE services so as to ensure a coherent and synergized multi-sectoral ECCE response system;
- Ensuring adequate and effective leadership, coordinated planning, funding, implementation, monitoring of progress and on-going quality improvements to ensure realization of the vision, mission, and objectives articulated in this policy document as also in the National ECCE Policy Statement.

1.8. Guiding Principles behind the Odisha State Policy on ECCE

The principles, which show the way to the Odisha State Policy on ECCE, and which would guide the development of all legislations, programmes, funding and monitoring and evaluation frameworks and institutional arrangements relating to its implementation, are as follows:

Holistic ECCE: A Matter of Human Right: This Policy is built on the foundation of a ‘human rights-based approach’ to ECCE.

- It seeks to translate the Government of India’s international and national commitments to recognize, respect, protect and promote the universal rights of all children between the pre-natal period to six years of age in Odisha and their caregivers.
- It recognizes that all children from the pre-natal period to six years of age in Odisha have a universal right to life, to survival and to develop to their full potential: that is, to be physically healthy, mentally alert, socially competent, emotionally sound and ready to learn;
- It acknowledges that the Government of Odisha is committed to ensuring the realization of the above-said rights for all children and their families.

The human rights-based approach requires that roles and responsibilities are spelt out in clear terms so that the duty bearers can be held accountable for the realization of the universal enjoyment of young children’s rights.

Equity and non-discrimination: This Policy recognizes that each individual child enjoys the above-said rights, and that no child would be excluded from access to any of the ECCE services on the basis of their gender, mother-tongue, religion, race, culture, ethnicity, age, disability, belief, birth, and marital status.

Joyous and Playful Learning: The right to play is enshrined in Article 31 of the UN Convention on the Rights of the Child. It is a defining characteristic of childhood. Play is the principal medium through which children learn and explore the world around them, while developing cognitively, socially, emotionally, creatively and physically. This policy recognizes that ‘education’ in early childhood essentially means the opportunity to learn through ‘joyous and play-based’ activities supported by caring adults, rather than to be ‘taught’ in a formal sense.

Locally Relevant and Context-Based Service Delivery: The Odisha State ECCE Policy is founded on the recognition that the learning needs and the protective and risk factors differ, depending on the children’s context, including their age, backgrounds, geographic location, health and socioeconomic circumstances. The ECCE services of Odisha would thus be responsive to the ethnic, cultural and linguistic contexts in which the children live as well as to their specific age and developmental stage needs.

Need for Cross-sectoral/ Departmental Convergence: Fulfilment of the overarching rights of the young children to survive and to develop to their full potential is hugely dependent on the realization of not just one or two, but the full set of their rights. The full set of rights include their

rights to social protection, basic services, health care, nutrition, education, safe environment, information and others. The Odisha state ECCE Policy recognizes this interdependence.

However, lack of inter-sectoral/departmental convergence is a huge gap in achieving the above stated policy objectives. Accordingly, this Policy and all actions to be taken under its ambit would ensure convergence amongst the package of services being delivered by the different departments. This would help the target children secure their multiple rights.

In keeping with this, this Policy acknowledges that ensuring effective ECCE services to all children cannot rest with only one department or one level of government or sector. It requires an integrated, cross-sectoral policy-making and planning that involves all government departments, civil society organizations, the corporate sector, religious organizations, non-governmental organizations, development partners, parents and children. Care would thus be taken to ensure better convergence amongst the relevant government departments, community as also the private sector through efforts aimed at i) common objective setting, ii) detailing out effective operational approaches, iii) laying out clear roles and outcomes, and iv) putting place clear mechanisms for joint planning and monitoring, including common monitoring indicators – with a view to ensuring holistic development of children in the early childhood ages.

Recognition of and Respect for Parents, Families, and Community as Key Stakeholders: The role of parents, families, and community leaders as natural allies to the survival, growth, development and protection of children to their full potential is recognized as a fundamental principle of the Odisha State ECCE Policy. Enlisting parental support, including material inputs, and in the psychosocial, health and educational processes, starting from the ante-natal period until the child enters school, would lay the foundation of the delivery of state ECCE programmes and services.

Interests of the Young Children First Priority: The best interests of the young child must be a primary consideration in all actions. All decisions made and actions taken that impact on the well-being of the young children must be based on their best interests. This includes decisions and actions taken by the government duty bearers, professionals, practitioners, parents, and others responsible for the care and development of young children.

It also applies to all laws and policies that are being or to be developed, administrative and judicial decisions to be taken, and services provided, including those that directly affect children of the said age group, (for example, health, care and education systems) ; and indirectly impact on children, such as environmental and other systems.

Young children are as entitled as older children to express their views. This right is often overlooked. This policy acknowledges that the principle of respecting the views and opinions of the young children would be anchored through appropriate and timely research and consultation. This requires that adults start listening to children and respecting their dignity and points of view. This requires adults to adopt a participatory, hands-on approach to the young child's early learning and development.

3. Focus Areas, Policy Directives and Action Points

3.1. Life Cycle Approach and Sub Stages

In line with the National Early Childhood Care and Education (ECCE) Policy 2013, the Odisha State Policy for Early Childhood Care and Education shall take into account primarily three sub stages of the life cycle during early childhood: conception to birth, birth to three years and three years to six years. Having specific needs there is a requirement for age specific care, attention and interventions. These are as follows:

Conception to Birth: Ante and post-natal nutritional care of mother, maternal counselling, safe childbirth, maternity entitlements, child protection and non- discrimination.

Birth to three years : survival, safety, protective environment, health care, nutrition including infant and young child feeding practices for the first six months, attachment to an adult, opportunity for psycho social stimulation and early interaction in safe, nurturing and stimulating environments within the home and child care centres.

Three to Six Years: Protection from hazards, health care, nutrition, attachment to an adult, developmentally appropriate play based pre-school education with a structured and planned school readiness component for 5 to 6 year olds.

3.2. Focus Areas

Based on the consultations, few Focus Areas are identified that are regarded as highly essential and inseparable domains to comprehensively ensure mental and physical growth alongside efforts to ensure equity, social protection. These Focus areas include **Ensuring Access & Equity; Ensuring Quality of Services, Ensuring mother-tongue based multi-lingual education; Ensuring Grievance Redressal; Ensuring Capacities, Capabilities, Functional Awareness of Service Providers; Ensuring Enabling Environment.** Each focus area has situational analysis followed by Policy Directives and action points. The strategies and action points have taken into account different sub stages of life cycle mentioned above.

3.2.1 Ensuring Access & Equity

Odisha is a land of diversity in terms of ethnicity, geography and socio economic conditions. There are hard to reach pockets across different districts, 62 tribal groups whose home language differs from mainstream Odia language. Hence, it is imperative though challenging to ensure universal access to services focusing on equity to ensure rights of the citizens mandated by The Constitution of India.

ECCE services in Odisha are mostly delivered through the Integrated Child Development Services (ICDS) and to a small extent by private Trusts, Agencies which are mostly limited to urban and semi

urban pockets. In Odisha the services are delivered in 71134 Anganwadi Centres in 338 ICDS Projects including 20 Urban Projects. Each Anganwadi Centre covers a population of about 400-800 in the non-tribal areas and 300-800 in the tribal areas in Odisha. To ensure universal access and equity in service delivery, the Government has taken a number of equity oriented initiatives in the recent past to cover up equity gap. The Health Equity Strategy (2009) and Nutrition Operation Plan (2010) are directed towards equitable health and nutrition outcomes. The State Government through directives has ensured priority to mother tongue based pre-school education. Nua Arunima Tool kit has been developed in ten different tribal languages to address the need of tribal children and ensure more effective learning. In order to ensure geographic exclusion, ECCE Centres have been established at habitations without any Anganwadi centre where more than 20 children of 3-6 age groups are present.

3.2.1.1 Policy Directives

- The state Government shall ensure that no child residing in Odisha is left without ECCE services. All children of the age group mentioned in this policy document shall be covered under the ECCE Services without any discrimination in terms of religion, cast, creed, gender, geography, and language and socio economic status.
- All aspects of diversity like gender, language, culture, geography etc. shall be respected and equitable measures shall be undertaken to ensure that specific needs are met to ascertain better physical and mental growth of children.

3.2.1.2 Strategies and action points

- The periodic child survey processes shall be further strengthened to ensure that the pre-school enrolment improves.
- Special ECCE Centres shall be opened where there are at least 20 children of the age group of 3-6.
- Special provision for children of daily wage labourers/ migrant labourers whose children accompany them to the work site shall be made to ensure that they are not left out.
- Provisioning of services shall continue to be delivered by Public, private and Non-Government service providers. The primary service provider shall be ICDS. Private agencies, and Non-Government Organisations (Trusts, Societies, International Agencies) are allowed to provide ECCE services with due approval, but shall be strongly monitored by the State Government for ensuring quality benchmarks in infrastructure, safety-security and class room transaction etc.
- Under no circumstances, children shall be asked to undergo eligibility/ admission tests in any form, written or oral in either Govt. Facilities or in private Centres run by the private agencies or Non-Government Organisations.
- There shall be complete prohibition of corporal punishment and any activity or action that creates physical and mental stress on children in the ECCE Centres. Stringent action shall be undertaken as per law by appropriate authorities on those involved.
- Special efforts shall be made to encourage children from minority communities and disadvantageous Groups to access the ECCE services.

- Innovations to improve the access to ECCE services shall be encouraged through pilots both by ICDS & Non Govt. Organisations. Financial and Human Resources shall be allocated wherever necessary.
- Early identification of Children at risk of developmental delays or disability shall be done with the support of specialists at the AWCs and referral services shall be recommended to the parents if required. The private Service Providers shall be instructed accordingly to follow the practice.
- It shall be ensured that there is no discrimination in service provisioning among children attending the ECCE Centre in terms of gender, religion, cast, creed or economic status.
- Appropriate infrastructural facilities shall be made in the Anganwadi Centres to make it accessible for children with disability.
- Appropriate mechanisms to be established between the ECCE Centres (Anganwadi and ECCE Centres) and the neighbouring Primary School to ensure continuum of learning.

3.2.2 Ensuring Quality of Services

The Govt. of Odisha is adhering to the National Early Childhood Care and Education (ECCE) policy with the quality standards prescribed as a follow up action on the policy recommendations. Given the vast geography and diversities, it is immensely important to frame and implement uniform quality standards. Due to different categories of service providers in Odisha, it is challenging to ensure uniformity in quality standards. However, it is immensely important to carefully standardize quality parameters in service delivery and at the same time it is required to establish a strong quality check mechanism to ensure quality deliverables. It is equally important to bring parity in quality of services provided by the ICDS and private agencies who promote different philosophies and innovations and pilots.

3.2.2.1 Policy Directives

- In line with the National ECCE Policy, ECCE Curriculum Framework and Quality Standards for ECCE prescribed by Govt. Of India, the state shall ensure that in all ECCE centres both run under ICDS and private agencies, the minimum standards shall be maintained. These include :
 - An ECCE programme of 4 hours duration with snack/break time of half an hour.
 - 1 classroom measuring at least 35 square meters (carpet area) for a group of 30 children and availability of adequate (at least 30 square meters) outdoor space for a group of 30 children.
 - Adequately trained staff.
 - Age and developmentally appropriate, child centric curriculum transacted in the mother Tongue/local vernacular.
 - Adequate developmentally appropriate toys and learning materials.
 - The building should be structurally safe and within easy approach. It should be clean and should have surrounding green area.

- Adequate and safe drinking water.
 - Adequate and separate child-friendly toilets and hand wash facilities for girls and boys.
 - Separate space allocated for cooking nutritionally balanced meals and nap time for Children.
 - Immediate health service in terms of First Aid/ Medical Kit available at the center.
 - The adult/ caregiver: child ratio of 1:20 for 3-6 year old children and 1:10 for under 3 years children should be available at the ECCE Centre. Children should not be unattended at any point of time.
- The state Govt. shall further customize the quality standards for ECCE centres in Odisha as per local context. The quality standards may be classified under the following categories: Interaction, Health, Nutrition, Personal Care and Routine, Protective Care and Safety, Infrastructure/ Physical Environment etc. within six months of the notification of the state policy.
 - The state Govt. shall be responsible for equipping the ECCE Centers with quality teaching learning materials/ equipment and human resources through adequate capacity building of Service providers as per norms laid down by the quality standards.
 - The mother tongue/ home language/ local vernacular of the child will be the primary language. In cases where the mother tongue/ home language/ local vernacular is other than Odia, use of Odia language shall also be promoted in a meaningful manner based on an age appropriate multi lingual strategy.
 - The local folk tales, songs and lullabies, legends of Odisha shall be used during interaction with children and shall be incorporated in the resource materials and training curriculum meant for the service providers. It should also be ensured that the ECCE centres operated by the private agencies (NGOs, Trusts etc.) follow a curriculum approved by a designate authority and also encourage the use of Odia folk tales, songs, lullabies and examples from Odia legends.

3.2.2.2 Strategies and action points

- The Odisha State Early Childhood Care and Education (ECCE) Council shall be formed. This shall be an apex body at the state level with appropriate professional expertise, autonomy to guide and oversee the implementation of the State ECCE Policy. It would contribute to strengthen the foundation of ECCE programmes in Odisha by establishing a comprehensive ECCE system and developing an integrated framework facilitating and supporting multi modal and multi component interventions such as modalities of training, developing curriculum framework, setting quality standards and related activities; promoting action research among others. The Council will have representatives from all related Departments/Ministries, State Departments/ UT

Administrations, Academic Resource Institutions, NGOs, civil society organisations, professionals and experts, practitioners, academicians, etc.

- The State ECCE Council shall not only monitor the quality aspects of all categories of ECCE Centres, but shall operate as appropriate authority for registration to accreditation and ultimately to regulation of all ECCE service provisions for private service providers.
- There shall be periodic assessments and evaluation to examine the effectiveness of the methods prescribed under the quality standards defined by the state. This shall enable to take corrective measures.

3.2.3 Ensuring mother-tongue based multi-lingual education

Children whose mother tongue (primary language) is not the language of instruction in the ICDS centres are more likely to drop out of the centres or lag behind in early stages of learning. Research has shown that children's mother-tongue is the optimal language for literacy and learning throughout the primary stages of learnings (UNESCO). This policy acknowledges this and mandates that children whose mother tongue is not the mainstream Odia be initiated into the learning process and material first through their mother tongue, and subsequently and slowly help them graduate through a 'language transition program' to the mainstream language of Odia. The policy also recommends that the ECCE service providers in such areas be adequately conversant in the locally prevalent language – so as to enable them to develop locally suitable learning processes and packages.

3.2.3.1 Policy Directives

- Mother tongue or language more familiar to the local community shall be used in the Anganwadi Centres during Health and Nutrition Education and other relevant interactions to ensure more receptiveness and making the centre more accessible to the community.
- Mother tongue based pre-school education shall be encouraged, and practiced in Anganwadi Centres as medium of instruction in tribal pockets of the state to ensure quality transactions and to ensure fear free learning environment.
- By providing multi-lingual education, it would be ensured that the children slowly graduate from their mother tongue to the mainstream Odiya with much more ease and interest.

3.2.3.2 Strategies and action points

- The state government would gradually ensure that the ICDS workers serving in the tribal scheduled districts of Odisha are either from the local communities having first-hand knowledge of the locally prevalent language, or are provided with the necessary training in the local language so as to be able to use the same in the pre-school teaching/learning transactions.

- The ICDS workers would be instructed as to how to involve the local community members (especially parents) for drawing up their support in developing the pre-school level teaching/learning material in the local language.
- The state government would also develop guidelines as to how to start the teaching/learning processes from the mother-tongue and slowly graduate to the mainstream Odiya while providing the pre-school education to the children enrolled in the ICDS centres.

3.2.4 Ensuring Grievance Redressal

Traditionally, there is no separate grievance redressal mechanism for ECCE services. It is covered under the grievance redressal mechanisms adopted for whole of ICDS services at various levels like AWCs, Block, District and State level. It has been noticed that most of the grievances are with regard to the infrastructure and absenteeism of the AWWs. Govt. Of Odisha is keen to address the grievances in relation to entitlement, protection of rights of children as well as quality of services. A robust system of grievance redressal is crucial to strengthen accountability and ensure a platform for registering and resolving complaints of beneficiaries.

3.2.4.1 Policy Directives

- Govt. Of Odisha shall strengthen the existing grievance redressal mechanisms to ensure more freedom and opportunity to communities and children to express their views on various aspects of service provisioning and delivery more specific to ECCE services.

3.2.4.2 Strategies and action points

- The VHSNC would act as the Grievance Redressal Committee at the village level, while at the block level, the Panchayat Samiti / Standing Committee would be the responsible committee for addressing all complaints / grievances. At the district level, the Zila Parishad lead by the District Magistrate / Collector would be responsible for the registration and redressal of all complaints / grievances.
- The Odisha State Commission for Protection of Child Rights (OSPCRC) shall hold public hearing to hear any grievance or complain with regard to the ECCE services.
- The State shall engage all stakeholders in developing mechanisms for children to share their grievances without fear in all settings; monitor effective implementation of children's participation through monitor able indicators; develop different models of child participation; and undertake research and documentation of best practices.

3.2.5 Ensuring Capacities, Capabilities, Functional Awareness of Service Providers

Training and capacity building is immensely crucial in the context of ECCE as the service delivery solely rests on the technical capacities of the frontline workers. Capacity building of Service providers basically AWWs and Lady Supervisors have been very systematically conducted by Govt.

Of Odisha in coordination with National Institute of Public Cooperation and Child Development (NIPCCD) through 26 Anganwadi Training Centres (AWTCs) in the state. This has always been a challenging area to train the front line workers on ECCE because of the technicalities involved. Attempts have been made to simplify the training package and the curriculum in the recent initiatives like *New Arunima*. More concerted efforts are required to further strengthen the efforts with need based approaches and addressing infrastructure requirements.

3.2.5.1 Policy Directives

- The State Government shall further profesionalize the ECCE service provisioning by streamlining the capacity building processes with support from national and state based technical support agencies. The emphasis shall be on addressing capacity building needs of functionaries given the multi group and multi lingual scenario of Odisha.
- The state shall further enhance its technical capacities by coming up with its own technical support agency specifically meant for ECCE services.
- Wherever required, the state shall involve private agencies and individuals to strengthen the capacities of the ECCE functionaries.
- A separate IEC plan to be developed and executed to educate all relevant stakeholders including parents, Panchayati Raj Institutions and opinion leaders at community level on ECCE needs and services.

3.2.5.2 Strategies and action points

- A state resource centre for ECCE shall be established to provide technical resource support for the ECCE services to the AWTCs.
- Training needs assessment shall be carried out and based on that a comprehensive plan for training and capacity building of frontline workers as well as other stakeholders including members of panchayati raj institutions, etc. as well as families and community at all levels.
- Develop and implement a comprehensive human resources management policy to provide support for capacity building at all levels including PRIs/community.
- An ECCE Training Task Force at State level to be built to assess the quality of trainings at State and District level on a regular basis.
- Training to other relevant stakeholders like parents, PRIs et al. To be dealt separately planned for each of the ICDS projects separately.
- Regular coordination between different national and state institutions like NIPCCD, NCERT, SCERT, OPEPA, NHM to be made to improve the capacity building efforts.

3.2.6 Ensuring Enabling Environment

All the efforts made for providing qualitative and equitable ECCE services shall not be fruitful without providing an appropriate social back up. Most often, it is presumed that skilled and trained human resources and material and infrastructural support would enable quality services

and result in desired outcome. However, the efforts may be futile if the children and the service providers do not get the support of the entire eco system involving parents, community and other stakeholders who actually smoothen the implementation process and make it more result oriented. There are prejudices and gender stereotypes that come up as major deterrents in the process. Communities and parents presume that this is solely the responsibility of the Govt. System, where as in the families it is still presumed that the responsibility of grooming the child is primarily mother's responsibility. Unless and until these bottlenecks are overcome developmentally appropriate ECCE cannot be envisaged. Although some efforts have been made in Odisha to sensitize the parents and others to ensure their involvement nothing much could be achieved. There is a requirement to ensure that at the community level better understanding is developed on the ECCE services and a change in mind sets is called for to ensure maximum benefit to the children.

3.2.6.1 Policy Directives

- The State Govt. shall ensure that specific measures are undertaken to involve all major stakeholders at all levels and comprehensive approaches to be undertaken to provide enabling environment for effective implementation of ECCE services.

3.2.6.2 Strategies and action points

- A comprehensive Behaviour Change Strategy to be devised to change the existing mindsets and mental blocks pertaining to ECCE which centre on factors like gender, disability, religious and caste based discrimination etc.
- The ECCE Services shall move beyond the Anganwadi Centers. Parent-led home-based Intervention: As a pilot initiative, the parents would be encouraged to hold ECCE interventions in their home settings. Regular training and capacity building to parents would be ensured by developing a separate capacity building curriculum.
- Extensive use of folk media and local cultural modes shall be used to generate awareness among the communities specifically parents.
- A regular parent's interaction at AWC level shall be facilitated to inform and counsel the parents about the development of their children on a periodic basis.
- Strengthen the demand from community.

4. Framework for Operationalization

4.1. Institutional Mechanism & Monitoring

The indicators of early childhood development depend on psychosocial care, the early learning environment and the quality of caregiver interaction, nutrition, as well as upon health, drinking water, sanitation, female literacy, empowerment, etc. In order to ensure that the laid out policy is implemented with the spirit and vision in which it is being conceptualized, it would be essential to

implement it in line with various norms quality parameters issued from time to time both at national and state level. The most important aspect is to establish a nodal agency, here in this case, The Odisha State Early Childhood Care and Education (ECCE) Council along with a robust interdepartmental convergence mechanism.

4.1.1. The Odisha State ECCE Council

The Odisha State Early Childhood Care and Education (ECCE) Council shall be formed. This shall be an apex body at the state level with appropriate professional expertise, autonomy to guide and oversee the implementation of the State ECCE Policy. It would contribute to strengthen the foundation of ECCE programmes in Odisha by establishing a comprehensive ECCE system and developing an integrated framework facilitating and supporting multi modal and multi component interventions such as modalities of training, developing curriculum framework, setting quality standards and related activities; promoting action research among others. The Council will have representatives from all related Departments/Ministries, State Departments/ UT Administrations, Academic Resource Institutions, NGOs, civil society organisations, professionals and experts, practitioners, academicians, etc.

The State ECCE Council shall not only monitor the quality aspects of all categories of ECCE Centres, but shall operate as appropriate authority for registration to accreditation and ultimately to regulation of all ECCE service provisions for private service providers.

4.1.2. Inter Departmental convergence

Since the success of ECCE interventions are highly dependent on multiple and a diverse indicator, a strong intersectoral convergence mechanism is crucial for success of the interventions. There has to be convergence at all functional levels like State, District, Block, Panchayat, Village (AWC) level. Appropriate functionaries of respective departments at different line departments and agencies have to ensure appropriate convergence looking at relevant needs.

At different level, Following are some of the issues related to inter departmental convergence.

Department/ Institutions	Agencies/ Institutions	Issues of Convergence
Dept. Of Health & Family Welfare/ NHM		<ul style="list-style-type: none"> • Regular Fixed Monthly VHNDs. • Immunization Sessions • Ensure availability and supply of medicine kits, drugs. • Ensure health services to ECD centres beyond ICDS like ECE under SSA, Creches, NGOs etc. • Joint visits of AWW and ANMs to ECD centres beyond AWC. • Joint review and planning meetings at the State, District and Block level. • Participation of in Village Sanitation and Nutrition Committee
Dept. Of School and Mass Education/ OPEPA/SCERT		<ul style="list-style-type: none"> • Harmonization with primary Schools for direct enrolment. • Joint planning in SSA PIP. • Preferably collocating AWC in primary school wherever feasible. • Monthly fixed village ECCE day.

	<ul style="list-style-type: none"> • Local teacher participation in ECCE day. • School Readiness Package.
Dept. Of Panchayatiraj	<ul style="list-style-type: none"> • Provide support in mobilization and sensitization of village Community • Collaboration and coordination of PRIs with Monitoring & Review Committees at different levels to review progress in implementation of ECCE services.
Dept. of Social Security and Empowerment of Persons with Disabilities	<ul style="list-style-type: none"> • Extending disability detection services through AWC. • Referrals to District Rehabilitation centres / Health System. • Devising special training courses for AWWs and other functionaries through RRTCs. • Preparation of reference material for AWWs on early detection of disabilities. • Block level special centres for early intervention.
SCPCR	<ul style="list-style-type: none"> • Grievance Redressal through Public hearings and other mechanisms to monitor and understand that all entitlement and rights of children are protected and grievances are heard regarding rights and quality issues and adequate measures are advised to the appropriate authorities.

4.1.3. Engagement with NGOs:

In order to improve quality of output, basically learning outcomes need based engagement with NGOs / voluntary organisations shall be made. Following are the areas where the NGOs can be engaged:

- Testing out pilots in different locations of the state to test innovations related to quality services, community engagement, grievance redressal etc.
- Development of Resource/ IEC materials for community mobilization. Organize Folk Media shows for community mobilization.
- Promote Mother Tongue based Multi Lingual Education.
- Documentation of best practices.
- Support organizing Public Hearings.
- Work as a support force to the local ICDS to monitor quality services at AWC level.
- Training of AWWs and Health Workers.
- Provide quality suggestions at State, District, Block and Village level to improve the quality of implementation.

4.1.4. Monitoring

Monitoring and supervision mechanisms shall be further strengthened with a logical monitoring framework with concrete output, outcome indicators. This shall be developed by the state ECCE Council in consultation with various Govt and Non Govt. stakeholders. The Management Information

System shall be further improved to capture the progress on all indicators. Along with regular supervisory mechanisms, there shall be periodic surveys and assessments to understand the status of various indicators.

4.1.5. Documentation

In order to strengthen the evidence base, there shall be process documentation, evaluation and similar activities which shall be undertaken on a regular basis. The same shall be used for disseminating information to various levels about achievements. These shall also help in developing quality of the interventions.

4.1.6. Review

This policy shall be reviewed every five years. However, mid-course corrections can be made based on the periodic evaluations and findings through the MIS system.

4.2. Financial Resources

Since expenditures on every sector has a direct and indirect impact on the development of children in the age group of 0-6 years, exclusive disaggregation of financial expenditure for this group needs a strong methodology. Similarly, there are also investments on women (mother) which indirectly benefit the children. However, Integrated Child Development Service (ICDS) and Supplementary Nutrition Programme (SNP) are the two big programmes which directly benefit the children. These two schemes cater to the nutrition, health and education need of the young children. So the amounts of investment on young children mostly depend on the budget for ICDS and SNP programme.

In 2015-16, budget for Integrated Child development Services (ICDS) programme was estimated at Rs. 1714.27 Cr but was further decreased to Rs. 1014.27 Cr in 2015-16 Revised Estimate. During 2016-17, the budget for the ICDS programme was increased to Rs. 2233.97 Cr. Budget for Pre School Education has substantially increased from Rs. 17.93 Cr in 2015-16 to Rs. 34.00 Cr in 2016-17. Allocation for Supplementary Nutrition Programme (SNP) has remained unchanged as Rs 843.68 Cr. in 2016-17 as compared to the budgeted expenditure in 2015-16. In Odisha, population in the age group of 0-6 years which constitute 12 percent of total State's population; but paradoxically the total cross cutting allocation (across all the departments) for this sector for the financial year 2012-13(RE) remains as low as four percent (4%) of total state budget which needs attention. Thus, the policy prescribes:

- There will be increased budget allocation for the children in the age group of 0-6 years to the tune of size of the population in this group. This proportionate allocation can fulfil the infrastructural as well as quality gaps in the ECCD;
- The state would publish an ECCD Budget Statement (EBS) which will categorize allocations as per defined methodology. The ECCD Budget Statement will be one of the annexures of the budget document.
- There will be a subcommittee chaired by the Secretary, WCD for regular revision of the unit costs of different components of the ECCD. The policy prescribes that the unit costs will be revised as per the Consumer Price Index (CPI).
- There will be budgetary provisions for fulfilling the new operational mandates as suggested in the policy.

3 Annexures

5.1. Annexure 1: Formulation Process

5.2. Annexure 2: References