**MHRD**

**GOVT OF INDIA**

**National Policy on Education 1986**

**EARLY CHILDHOOD CARE & EDUCATION**

THE PRESENT SITUATION

1. Some of the significant parameters of the quality of life of any nation are the infant mortality rate, incidence of malnutrition, the morbidity picture and the literacy rates. The
2. infant mortality rate today stands at 104 (1984). The rural-urban IMR differential is striking, being 113 and 66. Respiratory disorders, diarrhoea and parasitic infestations and nutritional deficiencies are significant contributors of child morbidity. Eighty three per
3. cent of children have body weights below normal standards. These include 42 per cent mildly malnourished, 35 per cent moderately malnourished and six per cent severely malnourished. Cognitive stimulation at home during early childhood, which is so vital for
4. the later years of life, is poor because of low female literacy rate which is 24-88. At present, by the most generous estimate, only around 12 per cent of the child population (0-6 years) of the country is being reached by one or more of the six services in the ICDS package, though within ICDS project areas, a large proportion of disadvantaged childrenare benefited by the comprehensive package of six services. Taking into account the various other programm es and that ECCE age group is 0-6 while the other programmes 8 cater to differently defined age group (mostly 3-6), it appears that less than 10 per cent of the child population (0-6 years) of the country receives all the essential services, from conception to the age of 6 years.
5. Realising the crucial importance of rapid physical and mental growth during early childhood, Government started a number of programmes of early childhood care and education (ECCE). Declaration of a National Policy for Children (1974) shows the commitment of Government for the development of children. The existing ECCE
6. programmes include :
   1. Integrated Child Development Services (ICDS);
   2. Scheme of assistance to voluntary organisations for conducting early childhood education centres (ECE);
   3. Balwadis and day-care centres run by voluntary agencies with Government's assistance;
   4. Pre-primary schools run by the State Governments, Municipal Corporations and other agencies;
   5. Maternal and child health services through primary health centres and sub-centres and other agencies.
7. The Integrated Child Development Services is currently the biggest programme of early
8. childhood development. This programme over the years has demonstrated that even a
9. modest investment in child development goes a long way in developing human esources. It needs to be fully integrated with the Universal immunisation programme started with effect from 19th November, 1985.
10. IMPLICATIONS OF THE STATEMENTS CONTAINED IN NPE
11. The National Policy on Education has given a great deal of importance to ECCE. It views ECCE as an important input in the strategy of human resource development, as a feeder and support programme for primary education and as a support service for working women of the disadvantaged sections of society. It has also taken into account the holistic nature of ECCE and has pointed out the need for organising programmes for the all-round development of the child. The significance of play and activity approach and the need for child-centredness in the programmes of ECCE as well as in primary school education have been spelt out, and it cautions against the dangers of using Formal methods of teaching and early introduction of the 3 R's. The importance of community involvement has also been highlighted. The need to establish a linkage between ICDS and ECCE programmes has been pointed out. The desirability of a podular, development so as to upgrade the former into the latter institution on a full blown basis has been mentioned. In addition, there is also a commitment to taking up other diverse kinds of 9day-care centres. The Policy specifically focuses on the need for early care and stimulation of children belonging to the poverty groups.
12. THE STRATEGY OF IMPLEMENTATION
13. The ECCE involvesthe total development of child, i.e. physical, motor, cognitive, language, emotional, social and moral. The age span under consideration in ECCE is from conception to about 6 years. Even a modest development process during this period includes care of mother during pregnancy (ante-natal health check-up, nutritional support, control of anemia, immunization for prevention of tetanus following delivery, etc.), hygienic and skilled birth attendance, nutritional care of mother during lactation, correct infant feeding practices, immunization of infant from communicable diseases, mothers' education in child care, early childhood stimulation, and health and nutritional support throughout. Thus, ECCE is a complex integral function. it requires workers with integrate d ECCE training, integrated worksites or ECCE centres where the essential services flow to young children through the period of their growth and preparation for formal education, and coordinated functioning of various agencies, governmental and non-governmental, striving to meet different needs of young children.
14. One of the weakest points in the existing programmes is inadequate child: worker ratio.Efforts will be made to strengthen the programmes and make them developmental instead