

CHAPTER - II

REVIEW OF LITERATURE

AND

METHODOLOGY

2.1 INTRODUCTION :

The literature review is an integral part of the entire research process. It makes a valuable contribution to almost every operational step. It acquaints the investigator with current knowledge in the field of area, which may be more fruitful for further study.

A careful review of related literature, that may be research journals, books, dissertations, thesis and other sources of information on the problems to be investigated is one of the most important steps in the planning of any research study. Infact, the research review serves the base for providing right direction of the present research work. The specific purpose of the review of related literature may be well understood from the following explanations made herewith :

- Review of related literature enables the researcher to know what has already been done in a particular area of study and its analysis is a stepping stone to resume what can yet to be done.
- Review of related literature helps the researcher to sort out what has already been done in a particular field. This is important to avoid unnecessary duplication in the specific area of operation.

- Review of related literature leaves room from the researcher to focus on the research needs.
- Review of related literature ascertains to formulate objectives for the study.
- Review of related literature confirms appropriate direction of the research by selecting hypothesis so that the formulated objectives could be tested.¹

Related literature helps the researcher to bring clarity and focus to one's research problem, where one cannot effectively undertake a literature search without some idea of the problem to investigate. On the other hand, the literature review can play an extremely important role in shaping the researcher's research problem because the process of reviewing literature helps to understand the subject area better and thus helps one to conceptualize the research problem clearly and precisely. It also helps one to understand the relationship between the research problem and the body of the knowledge in the area.

Another important aspect of related literature is that one can improve the appropriate methodology of research relating to the researcher's problem and accordingly the researcher's can select the tools for the collection of data, where one can evaluate and interpret the significance of one's findings. In other words, the most important function of the literature review is to ensure one reads widely around the subject area in which one intends to conduct the research study.

It is obvious that the main role of the mass media are to act as a bridge between the people and the government. Since, the media can be considered as the fourth institution in a democracy. Similarly, the government use mass media like Print media, Radio, Television and Traditional media to disseminate information about

their policies and programmes. The government also try to implement various welfare programmes for social and economic development of the weaker section of the society. Significantly, the media is also playing a major role in promotion of child development. The three major functions of media are information, education and entertainment. It educates the mass people especially on child development. It also educate people by giving information about food health, housing, sanitation, environment, technology etc.(Traber, 2003)² With the development of media technology and the growing need and importance of the people of participate in development efforts, the ICDS programmes assumes a greater significance.

Since, children are backbone and future of a nation, therefore to develop proper phychological, physical and social growth, the key is the ICDS programme. The ICDS is the first country wide programme anywhere in the world, functioning on a large scale and involving co-ordinated efforts for providing an integrated package of services for pre-school children and their mothers. Since, the inception of the ICDS programme has generated considerable interest among academicians, planners and representative of implementary agencies. The mass media can also be very effective for the overall development of children and also their mothers.

As a result, a large number of research studies have been conducted the role played by mass media on various components of ICDS to evaluate and assess the impact of the programme on the beneficiaries. Some surveys and several post graduate and doctoral dissertations have attempted to research on the various aspects of the programme and assess its impacts.

Keeping the view the specific objective of the present study, an earnest effort was made by the investigator to collect the literature related to it either directly or indirectly. It has been divided in to two categories one is theoretical frame work and

another is conceptual frame work. Under theoretical frame work, it deals with media – a key role in facilitating child right and extension education and another is media’s impact. Besides this, under conceptual frame work it explains the models seem to be related to the present study. It is categorized under the following caption.

2.2 Media – A key role in facilitating Children’s Rights and Extension Education.

2.3 Impact of Media.

2.4 Research inputs.

2.4.1 Studies related to Media and Child Welfare Services.

2.4.2 Studies related to Media and ICDS programme.

2.4.3 Some other related studies.

2.4.4 Emerging points from the review.

2.2 MEDIA- A KEY ROLE IN FACILITATING CHILDREN’S RIGHT AND EXTENSION EDUCATION :

The mass media are a very important component of society. It plays a significant role in facilitating children’s right and extension education. The children are the nations assets and future resource of manpower. Their development with dignity is a matter of great concern throughout the world. The ICDS is one of the outreach extension programme for child care and development. The task of extension programme is accomplished by different extension method or media which may come under individual, group and mass contacts. The mass contact, which includes mass media may be also an advocacy tool to achieve policy change – improving child care and development the status of children and young people live. It also helps in getting awareness about the world. The media influences on children and children rights.

(Partha Sarathi, 2005)³. Mass media is also the popular tool of any extension education. Therefore, the media, especially Newspaper, Radio and Television are powerful tools in raising awareness or as partners in an advocacy campaign to promote children's right. Thus, mass media plays a significant role to meet the need of the children so that each child should be able to enjoy their rights. Since, children's rights are human rights, but children are not always recognized as citizens with such rights. The world is flooded by the media. Children now a days have wide choices, many local, national and even international Radio programmes, several local Television Channels, hundreds of Video film, many different news papers, magazines and even computer games and entertainment on the internet are powerful tools in raising awareness or as partners in an advocacy campaign to promote children's rights.

The role of media in protecting child rights is a matter of great concern all over the world to concern over child labour, child prostitution and the civil rights of children are a benchmark by which any nation's commitment to human rights and democracy can be judged. Actually, it is also seen that raising the awareness about the rights of children and promotion of children's rights is a challenge to media and those who work in journalism. In this regards, media must not just report fairly, honestly and accurately on the experience of childhood but they must also provide space for the diverse, colourful and creative opinions of children themselves.

Therefore, the media has a significant role to play to –

- Raise awareness of children's rights and responsibilities.
- Ensure children's rights are promoted and protected.
- Report on failures and neglect.

- Highlight successes and hold government and society accountable to the commitments made and goals set to promote and protect children's rights (*Singh, 2007*)⁴.

In the this regards, mass media must be encouraged in raising awareness of issues affecting children both for the public and policy makers and get involved in safe guarding the rights of children because inadequacy of child rights. However, the of mass media can assist in teaching children, knowledge of their rights to integrity and protection from, healthy eating habits and lifestyle, and ways to assert themselves and their rights in a positive acceptable manner.

2.3 IMPACT OF MEDIA :

The media, known as the fourth pillar of democracy has a huge impact on society. Since, media is very integral part of our lives therefore they generate popular interest and debate about any social problem. The media's impact is different for different section of people.

There are both positive and negative impacts of media has on society. Media coverage has a major impact (*Stanly and Goddard 1999 : 62*)⁵. Media representations are the primary source of information on social problems for many people (*Hutson and liddiard, 1994*)⁶. *Maley (2000)* noted that in social and cultural matters, the various media provide the main platforms of debate and their choices of subjects, participants and opinions shape the agenda and much of its contents.⁷

In regards of positive effects :

- Media provide news and information required by the people.
- Media can educate the public.
- Media can entertain people.
- Media helps a democracy function effectively.

- Media can act as an agent of change in development.
- Media can bring in positive social changes.

On the other hand, negative effects :

- The traditional culture of a country is adversely affected by mass media.
- Entertainment has become the main component of mass media. This affects the primary objectives of media to inform and educate the people.
- Media promote violence : Studies have proved that violence shown on television and *Rajkhowa (2013)*⁸, quoted that “may be, its due to influence of media or real incidents on the ground, the children are becoming more prone to violent activities.
- Mass media promote the desire in people to buy and own products that are advertised through the media but which may not be essential for them (*Gupta, 2006*)⁹.

2.4 RESEARCH INPUTS :

The available literature conducted in India and other countries are described under the following heads :

2.4.1 STUDIES RELATED TO MEDIA AND CHILD WELFARE SERVICES :

Saunders and Goddard, (2002) carried out a study “The role of mass media in facilitating community education and child abuse prevention strategies”¹⁰. The findings of the study revealed that mass media programmes as a tool to advocate for children’s rights and more specifically to promote awareness of and to prevent child abuse.

The media play a significant role informing and influencing people's attitudes and behaviour. Issues paper 14, child abuse and the media (*Goddard and Saunder 2001*)¹¹, it was found that the essential role of media in increasing society's awareness of and response to, child abuse and neglect.

A study on 'Radio and Television children programmes and child rights was undertaken by *Khamakhem (2002)*.¹² The study revealed that the extent of the suitability of Radio and T.V. children programmes to Arab legislation according to child rights.

A study on child abuse (2007) was carried out by the *Ministry of Women and Child Development (MWCD)*.¹³ It was found that many children still suffer from abuse. These abuses include not only physical, sexual and emotional abuse but also poor education and health, hazardous employment, early marriage and discrimination.

As per *UNICEF (2005)* report on the state of the world's children under the title "Childhood under threat, speaking about India, states that millions of Indian Children are equally deprived of their rights to survival, health, nutrition, education and safe drinking water".¹⁴ It is reported that 63 percent of them go to bed hungry and 53 percent suffer from chronic malnutrition. The report says that 147 million children live in kuccha houses, 77 million do not use drinking water from tap, 85 million are not being immunized, 27 million are severely underweight and 33 million have never been to school. It estimates that 72 million children in India between five and 14 years do not have access to basic education.

A survey of 600 people in *Australia (2006)*¹⁵ found that more than half the respondents thought news stories about young people were negative – only 18 percent could remember positive stories in the previous 12 months. While this may reflect the

amount of good news in the media overall, such perceptions have the potential to reinforce negative stereotypes about young people.

*Nahed (2005)*¹⁶ conducted a study aimed to investigate “the role of the family and social psychological guidance and media on overcoming the adolescence stop problem”. To achieve the objective of the study questionnaire was made. The findings of the study showed that the means of media have a positive role in the availability of good religious and moral education for adolescents.

A national consultation was organized on October’30, (1995)¹⁷ to initiate the process to meet the challenges of ICDS universalization. Its key objective was to evolve an operational framework for ICDS state specific training plans through audio-visual media. A participatory methodology was follow amongst the participants in the consultation, building up on their rich knowledge base and experience. In this consultation, the importance of PLA (Participatory Learning Action) techniques adopted through audio-visual media. PLA was seen as being relevant for a qualitative improvement in ICDS. Researcher has however indicated a need to strengthen delivery of two components of ICDS namely Nutrition and Health education and Referral services. Community participation with is vital for success of the programme, is confined only to a passive acceptance of ICDS services. The community in most projects has been involved marginally. The low level of participation has been attributed to lack of awareness and knowledge of ICDS programme, poverty, lack of time on the part of beneficiaries and inabilities of project functionaries to argument community participation.

2.4.2 STUDIES RELATED TO MEDIA AND ICDS PROGRAMME :

2.4.2.1 PRE-SCHOOL COMPONENT :

Seshama, Anuradha (1984) carried out a study on “Attitude of Pre-school Teachers on media towards Pre-school education programme.”¹⁸ The study was conducted in 35 Anganwadi Centres in the urban ICDS Block of Tirupati. A majority of Pre-school teacher felt that the traditional media like flash card, puppetry and electronic media like Radio are the most effective tool for play activities for the development of pre-school children. Anganwadi workers had positive attitude about media to organize play activities for pre-school children.

Sulochana and Sugumar (2000) conducted a study on “Audio-Visual media in imparting nutrition education”.¹⁹ A study in Pondichery found that the pre-scholar while they were taught nutrition education showed a special interest towards the method of action song.

A study on “Impact of media on ICDS of pre-school education and development of children” was conducted by *Adish et.al (1990)*.²⁰ The sample comprised of 114 children from rural ICDS are and 108 from non-ICDS area in Aligarh District. The findings revealed that the intellectual status of the children in ICDS village was difinitely better than that of the children.

“A study on Radio in support of Mother and child care programme”, was undertaken by *Sunder Lal et.al (1983)*.²¹ The study was conducted in 10 rural ICDS blocks in Haryana. The sample comprised 2,000 expectant and nursing mothers who were registered beneficiaries of ICDS. They were interviewed to identify the health and nutrition problems of mothers and children and beliefs and practices related to these problems. It was found that it covered messages for broad-casting, health and nutrition problems of mothers and young children and health care of expectant and

nursing mothers in the non-ICDS villages and higher intellectual status in ICDS area was due to the impact of pre-school education and better nutritional status of children.

Rao, Reddy & Peri (1985) conducted “A study to assess the role of media on nutritional status of Pre-school children and to evaluate the nutritional indices like height, weight and mid-arm circumference in the age independent assessment of nutritional status.”²² The study was conducted in ICDS block of Andhra Pradesh. The sample comprised 1000 Pre-school children. They found that leaflets and booklets play an effective role for percentile values of the indices were better and more scientific in the evaluation of nutritional status of different communities.

Prinja, Lal, Prakash, Gaur (1985) conducted a study on “Morbidity pattern among Pre-school children.”²³ The study was conducted in 10 Anganwadi randomly selected from rural ICDS Block, Haryana. They revealed that the incidence of sickness was more among children of 1-2 years age as compared to 2-3 years of old. Maximum episodes of illness per sick child were cough, fever, diarrhoea and sore eyes. These diseases accounted for two-thirds of the total morbidity in 2-3 years age.

A study entitled “Early Childhood Education- An Effort to enhance school Enrolment” was conducted by *Sunderlal and Rajwati (1989)* in Haryana.²⁴ The study revealed that 70 percent children who had received pre-school education in the Anganwadis were enrolled in the primary school and 80 percent children attended Anganwadi were well adjusted and their scholastic performance was better as compared to other children.

Wati Raj & Surender Lal (1981) conducted a study on “Enrolment pattern and dropout rate of children who attended”²⁵ the Anganwadis in their early childhood. The study was conducted in villages of rural ICDS block. They found that 70 percent children who had received pre-school education in the Anganwadis were enrolled in

the Primary School. Over 80 percent children who had received Pre-school education in Anganwadis were well adjusted and their scholastic performance was better in compared to other children.

2.4.2.2 HEALTH AND NUTRITIONAL COMPONENT :

Sundar Lal (1984) was undertaken “A study on feedback of a Radio Broadcast in support of Mother and Child Health Programme, Haryana.”²⁶ The study was conducted in three rural ICDS blocks, namely, Kathura, Beri and Chiri. The sample comprised of 200 women assembled in the Anganwadis during the radio broadcast. It was found that 80 percent women listened to the programme attentively. Sixty percent group animators made an attempt to organize group discussion at the end of the broadcast. Almost all the group animation felt that Radio broadcast was an effective way of imparting information.

A study carried out by *Kumar, Vasudeva (1978)* on “Referral system in Health component of ICDS in the rural ICDS block, Kathura, Haryana.”²⁷ Three Medical officers of PHC comprised the sample and interviewed using an open-ended interview scheduled. They recommended that a regular health check-up at the sub-center would eliminate many problems, help to identify at - risk mothers and children.

Bhandari and Mandowara (1977) carried out “A study on evaluation of delivery of Nutrition and Health Services in an ICDS Block, Rajasthan.”²⁸ The study was conducted in three phases in the tribal ICDS Block. A sample of 1,181 children below six years of age were selected and using weight-for-age index assessed their nutritional. They found that the supply of supplementary nutrition and other inputs were not regular. Personnel of medical and social welfare department should have proper co-ordination for effective functioning of the scheme.

Kamala and Devi (1985) carried out “A study on nutritional and immunization status of infants at one year, Madras”²⁹ The sample comprised of 457 infants born during the four-month period was taken for the study. They were followed up till they attained the age of one year. They found that continued breast-feeding beyond one year contributed to good nutritional status.

Natranjan (1985) was carried out “A study to assess the pattern and types of referral services given at Government Royapettah Hospital, Madras.”³⁰ The study was conducted in the urban ICDS block project. He found that imparting regular health and nutrition education to mothers would help to eliminate diet deficiencies in children and also enable the mothers to eliminate many problems.

2.4.2.3 IMPACT AND AWARENESS OF MEDIA AND ICDS PROGRAMME :

Adhish, Sinha & Siddique (1982) carried out “A study on impact of media on Pre-school Education and Development of Children”.³¹ They emphasized mainly on the impact on intellectual status of children through audio-visual media. The sample covered 114 children from ICDS area and 108 Children from non-ICDS area. They revealed that the intellectual status of the children in ICDS area was definitely better than that of the children in non-ICDS area. Higher intellectual status in ICDS area was due to the impact of TV and Radio on Pre-school education and better Nutritional status of children.

Chakladar, Rao, Kumari (1983) Conducted “A study to assess the impact of media on ICDS, Udupi Project, Karnataka”.³² They carried out this study in 14 Anganwadis Centers. They compared their findings with non-ICDS area. They recommended that influence of media on ICDS programme should be based on the needs of the people and services should be change accordingly.

Pandey and Devadas (1994) carried out a study entitled “Impact of the pre-school education component in the ICDS on the cognitive development of children”,³³ the data on both experimental and central groups were collected from Coimbatore city, project number four at Singalallur. The findings of this study have brought to light the superior nutritional and health status and cognitive development in children, who attended the ICDS programme as compared with their control counterparts, belonging to the same socio-economic background.

A study conducted by *Swapna (2006)* on “A sociological study on ICDS and its impact on rural communities of Assam.”³⁴ A case study of Dhakuakhana Development block under Lakhimpur District. The study was conducted in 35 Anganwadis selected randomly. The sample comprised of 393 from selected Anganwadi Centre (AWC). She revealed that in general, Anganwadi Centers were not functioning so far satisfactorily. The planning and implemented of feeding programme was lack in Anganwadi Centers. It was also found that a few i.e. 5 (14.28 percent) Anganwadi centers had satisfactorily implemented the health check-up services. Participation and involvement of beneficiaries in ICDS was found to be minimal. She recommended that the achievement of package of services by the beneficiaries Health and referral Services need to be strengthened more.

A study carried by *Bapat. V & Mod. L (1982)* with a view to monitor the “Impact of ICDS on severely malnourished pre-school children in Baroda”.³⁵ They found that the incidence of severe malnutrition were almost double in female children as compared to male. They recommended that the factors responsible for severe malnutrition were lack of antenatal care, low birth weight and nuclear family system.

Venugopal (1985) carried out “A study on awareness and extent of utilization of services under ICDS”.³⁶ The study was conducted in three Anganwadis of ICDS

block of Tirupati. They administered two interview schedules to be mothers to find out general information and the extent of awareness and utilization of services. She found that only 25 percent families were aware of ICDS and the Anganwadi Center. The Anganwadi was referred, as Uppamau School and many of them did not have a clear understanding about the services offered.

2.4.3 SOME OTHER RELATED STUDIES :

In addition to these, some studies given below are particularly related to the present study. There are comparatively fewer studies available on different aspect of ICDS programme.

A study was carried by *Joshi, A.C. (1985)* to improve and implement the ICDS programme with Changing Communication Technology i.e. television, films etc.³⁷ The study was conducted in 33 ICDS Blocks in West Bengal. The sample comprised CDPOs, Supervisors and Anganwadi Workers. It was found that ICDS workers were not sufficiently trained. Visual aids were found to be quite effective for training ICDS functionaries. Training institutes in the field of communication and mass media experts should be involved in ICDS Programme.

An attempt has been made by *Chopdar (1981)* on “Use of thinness chart in an ICDS project”.³⁸ The study was conducted in the tribal ICDS block, Orissa. The sample comprised 1,443 children in the age group 0-6 years selected randomly. Malnourished children were detected by using both thinness and conventional weight Chart. He recommended that this thinness chart should be used in all ICDS projects.

Narmada (1985) was conducted a study known as “Infant feeding practices prevalent in ICDS Block, Tamilnadu”.³⁹ A sample of 204 mothers and interviewing the mothers collected data regarding the habits of Infants. The study revealed that

Nutrition Education imparted in the Anganwadi Center had a good impact on nursing mothers.

2.4.4 EMERGING POINTS FROM THE REVIEW :

In addition to the above small scale studies, a large number of research studies have been conducted to evaluate and assess the impact of the programme. A review of some such research studies are discussed below:

AN ASSESSMENT OF ICDS BY UNICEF :

“A significant study taking an overall perspective of ICDS including nutritional, medical, social and economical aspects was conducted by *Krishnamurthy and Nadkarni (1983)*, on behalf of UNICEF”,⁴⁰ Sixteen projects, where ICDS programme was initiated in 1978-79, were randomly selected to assess the overall functioning of the scheme, effectiveness of the services and benefits against resources invested in the programme. The study found the positive attributes of the scheme as compared to other programmes like SNP and ANP. It concluded that despite its wider range of services, ICDS is less expensive and therefore, should be extended in coverage and more resources and media exposure allocated for the scheme.

AN ASSESSMENT OF ICDS BY NIPCCD (National Institute of Public Cooperation and Child Development) :

NIPCCD carried out “A study in thirteen ICDS block spread over six states and one union territory during 1985-86 to develop a system for monitoring social components namely, pre-school education, nutrition and health education and community participation”.⁴¹ The main objective of the study was to identify key indicators for monitoring social components, it also provided useful insights in to the implementation of ICDS scheme. It studied the perception and views of beneficiaries from 195 Anganwadis and 8,076 households regarding the programme. The findings

provided comprehensive, empirical information on the efficacy of the delivery of services and the extent to which the objectives of the scheme were being achieved. The long-term benefits of the scheme were also ascertained on selected outcome indicators.

“NIPCCD Regional centre, Guwahati also conducted another study on ICDS in Meghalaya, An Evaluation (1995-2002)”.⁴² The study revealed that enrolment of pre-school children for pre-school education was found to be satisfactory with a total enrolment of children about 80 percent. It recommended that to improve attendance in pre-school education, efforts are required to be made to educate the parents on importance of pre-school education.

STUDY CARRIED BY CTC (Central Technical Committee), 1995 :

Most of the study carried out by Consultants of CTC focused on health and nutritional components of the ICDS programme. Around 624 baseline/repeat surveys and 250 research studies have been collected in a document ‘ICDS evaluation and Research (1975-88) prepared under the auspices of CTC.’⁴³ Both these documents are an excellent source of information consisting of micro level studies on ICDS. A joint multicentric study by the National Institute of Nutrition and CTC (1995) highlights the impact of psychological development and recommended expansion of ICDS as a powerful ally to the existing health system.

STUDY CARRIED OUT BY THE NATIONAL COUNCIL OF APPLIED ECONOMIC RESEARCH (NCAER), 1996-2000 :

NCAER conducted another nationwide evaluation survey of the ICDS programme.⁴⁴ This evaluation was done during 1996-2000 in 4,388 blocks across the country. The findings clearly indicated the positive role played by the media on ICDS programmes, but NCAER stressed the need for equity and accessibility and proposed

that 35 percent of pre-school children not covered by the programme be brought under its purview.

Media plays an important role in reaching out and influencing the lives of the common people by providing information and entertainment. Without mass media there would be no social, economic and political system. The Government uses mass media to disseminate information about its policies and programmes through its media agencies which is huge impact on society. Since, ICDS describes as India's gift to her children is a unique scheme that was aroused worldwide interest, especially in most of the Third World countries, ICDS cares for children below six years at age. It also taken care of essential needs of pregnant women and nursing mothers residing in socially backward villages and urban slums. The Indian constitution has also a framework within which ample provisions exist for the protection, development and welfare of the children and the mother.

It is unfortunate to note that a very few studies have revealed that media plays a powerful tool for implementation of ICDS scheme which is unique to early childhood care.

But the above mentioned research studies have highlighted considerably to the understanding of the programme and helped in identifying the problems and lacunae in the implementation of the scheme. In this regards, the light of the conceptual understanding of researcher varied a great deal with respect to role played by media different component of ICDS.

However, the experience and knowledge reflected in these studies have taught to identify crucial and relevant strategies for the present investigation of the services to assess the role of media in ICDS in Assam and its impact on beneficiaries, particularly in Rupahi Development Block under Nagaon District. Since, this area

remains uncovered by any study. Hence, the present study was the first to be conducted at Rupahi Development Block under the District at Nagaon.

2.5 METHODOLOGY :

Methodology is the soul of research. The term methodology is concerned with the process and procedures adopted to carry out the particular objectives of a research study (*Kothari, 1998*)⁴⁵. Here it is an attempt to explain the methods and procedures adopted in the study concerning the source of data, the tools and techniques used for collection of data and statistical measures used for the analysis of data and so on.

The methodology of the study involved in detail under the following sub-heads :

2.5.1 RESEARCH DESIGN :

To carry out any type of investigation, data must be gathered. Therefore, the investigator adopted the tools and techniques by a thorough survey to the research problem. The research design of the present study is a survey, content, analytical and descriptive in nature. To gain insight in to the ICDS programmes both qualitative and quantitative research method is adopted.

2.5.2 STUDY AREA :

There are twenty Development blocks in the Nagaon District. Out of this one block namely Rupahi Development Block had been selected for the purpose of the present study. The figure has appended in Appendix – I

2.6 UNIVERSE OF THE STUDY :

The ICDS services is Indian's response to the challenges of meeting the holistic need of the child. It symbolize Indians commitment to the children. Since the study is related to ICDS under Rupahi Development Block of Nagaon District. The universe of the study constitutes all the beneficiaries who had attended 221

Anganwadi Centers located in 43 villages of 14 different Gaon Panchayats. However, out of the total 14 Gaon Panchayats, the researcher randomly selected 12 villages fallen under 6 Gaon Panchayats under Rupahi Development Block. The researcher had been selected 12 villages from the selected Gaon Panchayats for the purpose of drawing sample for this study keeping in view to achieve the objectives of the study.

In the universe, there are two hundred twenty one (221) Anganwadi Centers under Rupahi Development Block out of which 20 percent i.e. forty four (44) Anganwadi Centers had been selected for the purpose of the present study.

2.6.1 CRITERIA FOR SELECTING THE UNIVERSE :

For the purpose of the present study, 12 villages from six Gaon Panchayats had been selected randomly from the following Gaon Panchayats for the purpose of the present study.

1. Rupahi Gaon Panchayat.
2. Fakali Gaon Panchayt.
3. Saidaria Gaon Panchayt.
4. Hatipukhuri Gaon Panchaya
5. Gatanga Gaon Panchayat.
6. Gereki Gaon Panchayat.

While selecting the Anganwadi Centers from the Villages the following criteria were followed :

1. The centers must be located between 0-5 Km from the Rupahi Development Block.
2. The centres must be located more than 5 Km from the Rupahi Development Block.

Apart from the above criteria, the following consideration were also made while selecting the villages and the Anganwadi Centers :

1. The Villages / Centers should be located in the villages where Most Other Backward Class population concentrated.
2. The Villages / Centers should be selected from the Schedule Caste dominated population.
3. The Villages / Centers should be selected from the Schedule Tribes dominated population.
4. The Villages / Centers should be located in the villages where mostly General and Backward Class population concentrated.

2.7 POPULATION AND CHARACTERISTICS :

The following table (No. 2.1) shows a clear picture about the population and characteristics of the villages under six Gaon Panchayats selected for the study :

TABLE – 2.1

Population and characteristics of the selected villages under Gaon Panchayats

Sl. No.	Name of the Panchayats	Name of the villages	Population	Caste
1	Rupahi Gaon Panchayat	1. Rupahi Bhakat Gaon	2007	OBC/SC
2	Fakali Gaon Panchayt	2. Fakali Gaon	3667	MOBC/ST
		3. Rowmari Gaon	4237	MOBC
		4. Koch Gaon	1765	MOBC

3	Saidaria Gaon Panchayat	5. Niz Saidaria Gaon	3206	MOBC
		6. Puthikhaity Gaon	3844	MOBC
		7. Telia Chaporitoop	2523	MOBC
4	Hatipukhuri Gaon Panchayat	8. Gehua Chalchali Gaon	5562	MOBC
5	Gatanga Gaon Panchayat	9. Lau Gaon	4206	ST/GC
		10. Balorguri Gaon	2675	ST
6	Gereki Gaon Panchayat	11. Kumar Gaon	3628	SC/OBC
		12. Gereki Gaon	5808	ST/OBC

Brief profile of the socio-economic background of the study area had been discussed under the background of the study.

2.8 SAMPLE OF THE STUDY :

Due to the constraints of time, manpower and other factors 44 Anganwadi Centers had been selected through a stratified random sampling technique. In the first stage, there were two hundred twenty one (221) ICDS centres under Rupahi Development Block. Out of which 20 percent that's 44 centres from the Rupahi Development Block had been selected randomly. Thus the total nos of Anganwadi centres becomes 44.

In the second stage the respondents has been selected under the following categories :

The study were broadly deal with two aspects i.e. the Beneficiaries and the functionaries at different level, the respondents for this study were also divided into two categories.

Category I :

The Beneficiaries of each selected Anganwadi Centre's were interviewed as per as categorization of the ICDS programme, i.e. :

- * Pregnant women

- * Nursing mother

- * Mothers with Pre-school Children

From the list of the Beneficiaries registered at the forty four (44) Anganwadi Centres, two Beneficiaries from each categories were taken as sample i.e. six (6) Beneficiaries from each Anganwadi Center made the total no of Beneficiaries two hundred sixty four (264) were respondents for the present study. Since the age groups of Pre-school Children are minor to take them as respondent, therefore instead of them their mothers were considered as respondent for these categories. The address of the Beneficiaries household were noted from the records. On visiting the households if Nursing mothers or pregnant woman registered with the Anganwadi Centres were available, they were also included in the sample. It was therefore, possible that more than one respondent was drawn from the same household for the study.

Category II :

The existing functionaries of the ICDS programme include :

- * CDPO

- * Supervisors

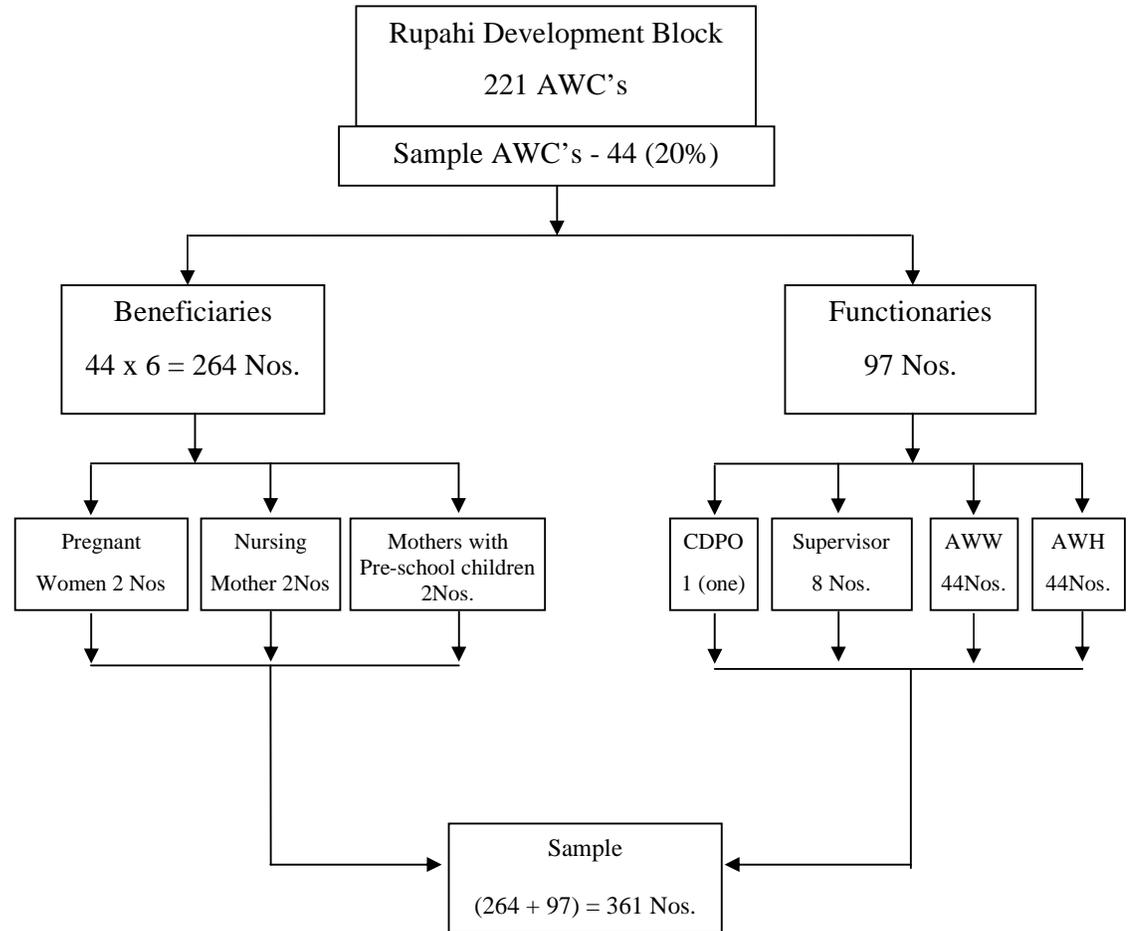
* Anganwadi Workers

* Anganwadi Helpers

In this category, the existing forty four (44) Anganwadi Workers and Forty Four (44) Anganwadi helpers from each forty four (44) sample Anganwadi Centres were selected as a grass root level functionaries. Besides, eight (8) Supervisors from forty four (44) Anganwadi Centres i.e. one Supervisors concerned with Six Anganwadi Centres and one CDPO who looked after the whole ICDS programme in Rupahi Development Block were selected as a administrative functionaries for the purpose of the present study. The total ninety seven (97) respondents in this category were selected and interviewed.

Combining the category I with category II, altogether three hundred sixty one (361) respondents were selected for the purpose of the study. The schematic presentation of the sample were shown figure - 2.3

Schematic Presentation of the Sample



AWW = Anganwadi Worker

AWH = Anganwadi Helper

CDPO = Child Development Project Officer

Figure – 2.3

2.9 TYPES AND SOURCES OF DATA :

In order to fulfill the objectives of the present study both primary and secondary data have been used. The primary data were collected both from the beneficiaries and functionaries of ICDS in a face to face interview.

For general discussion and analysis, the investigator has to depend on the secondary data a derived of Government publication, journals, books, thesis of the research workers publications from NIPCCD, Social Welfare Department, ICDS Office of Rupahi Development Block. The record of the Anganwadi Centre and also publications of specified institutions of the different states of the country.

2.10 DEVELOPMENT OF TOOLS FOR THE STUDY :

Development of tool is an important task of any investigation, as it helps to extract out actual information for the study. So, it is indispensable one. In order to collect the required information and data for the study, appropriate scheduled were prepared. These were administered in local language to facilitate communication with respondents. For this purpose, three sets of interview schedules with related questions and one observation sheet were constructed to collect the requisite information.

INTERVIEW SCHEDULE – I

This is developed to find out the detail information about the Anganwadi Centres. The information regarding the commencement of the center, enrollment of beneficiaries, awareness of beneficiaries towards the mass media, media ownership, reason for sending their children to AWC, qualities of services delivered at Anganwadi Center etc. were collected through this Schedule. The researcher observed the routine of the Anganwadi Centers from the time of its opening and collected relevant information of the performa (Appendix-II)

INTERVIEW SCHEDULE - II

This schedule was developed for getting information from the beneficiaries of the ICDS programme. This schedule aimed at getting information of the background variables like age, caste, marital status, educational level, size of the family, type of the family, income of the family, sources of information about ICDS programme, appropriate media used in teaching learning method at ICDS centre, role of media played on ICDS programme and views on media etc. This was also developed for getting information relating to attitudes and views of pregnant women, nursing mothers and mothers with pre-school children. (Appendix-III)

INTERVIEW SCHEDULE - III

This Administrative support schedule comprises two schedules, one each for the Anganwadi workers and Anganwadi helpers and one for the Supervisors and CDPO of the ICDS under study. These schedules were meant to assess the role of mass media played by the above both for the beneficiaries and functionaries in planning and implementation of ICDS programme with special reference to the delivery of services of ICDS programme. (Appendix - IV)

OBSERVATION

To observe the exact condition prevailing in the Anganwadis, observation method was also adopted in collecting data for the present study. The attitude of beneficiaries towards the media used in the AWC, awareness and participation of AWCs, availability of media, teaching aids, play materials etc. were studied through observation. (Appendix - V)

DATA COLLECTION :

The researcher was collected data from forty four (44) selected centers of Rupahi Development Block, by paying personal visits to each Anganwadi Center. The

investigator administered the schedules mention above in an informal interview session lasting 30-45 minutes. The interview session was conducted in the local languages spoken by the respondents. For collecting data the investigator worked from June' 2011 to July 2012.

DATA ANALYSIS :

In order to analyse the objectives of the study, the data obtained from respondents were classified in to the contingency table. I had been discussed thoroughly under the section of analysis and interpretation of data. Tabulation was also done manually employing suitable statistical method like frequencies and percentages.

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