



**NEED, DEMAND,
AND EFFECTIVENESS
OF CHILDCARE MODELS
FOR CHILDREN UNDER
THE AGE OF 3 IN
SELECTED STATES
OF INDIA**



BACKGROUND

It is widely recognised globally that adequate care in the first three years of a child's life are critical for lifelong physical and cognitive development, necessitating the need for centre-based childcare for the under-3 age group. In developing countries, children in the earliest years of their lives run a greater risk of malnutrition and it is known that there is a critical need to support comprehensive ECD interventions for under 3 children. In India, evidence to support the distinct needs and demand of childcare for under 3 children is scarce and targeted interventions for this age group are inadequate. These children are considered the primary responsibility of families and centre-based childcare interventions for this age group are fragmented and inadequate. Women in poverty or low-income households, who don't have a choice but to seek employment, irrespective of the age group of the child, often leave the children in compromised arrangements, if centre-based facilities are not available, inflexible or inadequate. Or else, the nature of employment that they can enter into gets compromised by the needs of childcare.

Even if these are well known facts, the actual research and evidence for these facts is limited to pre-school children (3-6 year age group). In India, the universal need for a public-funded childcare infrastructure has not gained adequate attention of the State, in terms of policy and budgets. Integrated Child Development Services (ICDS), one of the largest child development programs in the world, provides health, nutrition, and education services to children below 6 years, adolescent girls, and women. In the past four decades, ICDS has expanded widely, however it has a limitation of not reaching out to children under 3 years and the program tends to have more focus on food distribution for this age group rather than meeting their health, nutrition, and care needs holistically.



THE PRESENT STUDY

Given the above context of the importance of special care provisions for children in early childhood, this study, conducted by the Institute for Human Development, New Delhi and Mobile Creches, has examined the demand, status and conditions of creche provision for U-3 children in two states in India, with a focus on public-funded creches. It has attempted to understand the unique needs and demands of childcare in the context of U-3 children and examined models for such care and their impact in Odisha and Kerala through a detailed look at the situation in two districts each of the two states. Both gender concerns and ECD concerns have formed the basis for the questions addressed.



Research Questions

The following research questions have been addressed in the study:

1. **What is the status of childcare policies and programmes for U-3 Children in the selected states?**

2. **What are the needs of and how is the demand expressed for centre-based childcare for U-3s? How do women/households manage the childcare needs for their U-3 children?**

3. **What options and models are available to working parents to meet the childcare needs of U-3s?**

4. **Do existing Options/Models (Govt., Non-Govt., Public-Private) meet the distinct needs of U-3s and that of their caregivers (mothers mostly) in terms of sufficient availability, flexibility and quality parameters?**

Methodology and Sample Size

Two districts each from Odisha and Kerala, with both rural and urban areas were selected for field work. The selection of the districts was based on the condition that they have at least a few crèches run by Government or any other non-Government agencies under the aegis of a formal scheme initiated by the Central or State government. The final selection of the districts was done after a five day pilot study each in both the states conducted in April-May 2023. Rayagada and Sundargarh in Odisha and Thiruvananthapuram and Kozhikode in Kerala were selected.

The study included a primary field survey in the two selected states with a combination of qualitative and quantitative parameters being assessed for U-3 childcare provision. Fieldwork between June and September 2023 provided the quantitative and qualitative information based on a household survey, key informant interviews, focus group discussions and case studies.

MODELS OF CENTRE-BASED CHILDCARE FOR U-3 CHILDREN IN ODISHA AND KERALA



The Odisha models of U-3 creche facilities are five in number, consisting of government schemes such as the National Creche Scheme (NCS), the Nutrition Resource Centre initiative for Particularly Vulnerable Tribal Groups (PVTGs) and the Mo Kalika Kendras under the District Mineral Fund, the PPP initiative with partners like the Azim Premji Foundation and the Public Health Resource Initiative and creches for women government employees. These creche programmes are executed through local NGOs that focus on community participation, particularly recruiting local women as creche workers. Across all the schemes, there is a special emphasis on nutritional requirements of the children in the area and on targeting poor and vulnerable families.

The emphasis on creche facilities for U-3 children in Kerala is largely from the NCS scheme, with two types of initiatives under this: first, creches directly under NCS, administered through the Department of Women and Children's Welfare and run by NGOs such as the Kerala Council for Child Social Welfare and other NGOs ; second, creches that have been repurposed under NCS for workplaces, with the state government introducing various modifications that are deemed possible, such as enhanced remuneration for staff and a block fund for the setting up of new creches, subject to the constraints of the NCS and three, mobile creches for children of migrant workers. The nutritional requirements of the target U-3 age-group of children is perhaps expected to be covered under the general child nutrition schemes of the Government of Kerala, making the U-3 creches primarily places where the children can be left during the day and where stimulation can be provided.

THE DEMAND FOR CENTRE-BASED CHILDCARE FOR U-3s IN THE SELECTED STATES/DISTRICTS



In both the states and within them, both the districts covered, it has emerged that the demand for centre-based childcare for U-3 children is clearly expressed by the women and families that were studied. A large segment of the information collected has been from poor households in both the states, with different asset profiles and livelihood opportunities, but the following aspects have clearly emerged: one, childcare and domestic work are what constrain women from joining the labour market, or adjusting their outside work to the demands of the former; two, ranging from women with poor levels of education to those who are

well qualified, the ability to participate in work is seriously constrained by the demands of childcare and domestic work; three, especially from poor households, women clearly express the desire for good childcare facilities for both employment reasons as well as the changes that it brings in the health, nutrition as well as social and behavioural attributes of children.

The majority of households surveyed in both states are poor, with a significant share of family members (men and women included, 35%) earning their livelihood from employment in agriculture (both self employment



Two important points clearly emerge from the above presented information regarding the link between women's labour force participation and the availability of centre based childcare: is that even in the case of relatively high levels of educational attainment among women, unpaid care work, of which childcare and associated activities are a significant proportion, is a major deterrent for women with small children joining the workforce.

and casual labour) and casual labour in Odisha and from regular wage income and casual and self-employment in non-agriculture (37%) in Kerala. The households in Odisha are engaged in the said activities in the mining and tribal areas of the two districts studied in Odisha and in varied sectors in Kerala. In the latter, the prevalence of relatively high levels of education, including undergraduate and postgraduate degrees in sectors such as nursing, pharmacy and office assistant kind of training was seen, even if employment seeking was limited by the constraints of care work, especially childcare.

Further, a large proportion of women from the whole range of background seen in the two states express the demand for reliable childcare facilities in order to be able to join the workforce. This demand is reflected in the use of creche facilities, when they are available, for fulfilling various needs: for fulfilling nutritional needs of children and enhancing their health and cognitive status, especially in very poor households in both states; for allowing mothers the opportunities to seek employment, or where they don't seek employment, to get time off from childcare for other activities, such as NTFP collection, SHG participation, or leisure; for better



socialisation and community engagements for households and the mothers and children. On the ECD front, across the board, the demand for creches is expressed in terms of the need to enhance the possibility of having children who are well-fed, stimulated and socialised within the creches, even if the conditions of creches or the extent of availability fall short of expectations. Thus, at the same time as a demand for U-3 creches is expressed clearly by the majority of women in the study in both states, trust issues and affordability come up as major constraints to the availing of childcare. An important dimension relating to the demand for creches has been that among reasons cited for not using creches, an important one has been the lack of availability close to the home and the inability to avail paid creche services, even if there is a willingness to pay. In poor

households with dependence on informal livelihoods, the poor conditions of work and the economic status of the households leaves little possibility for availing paid creche services, even if there is a willingness to pay in order to give children good care.



THE SUPPLY SIDE:

Sufficiency, flexibility and quality parameters of existing models (Govt., Non-Govt., Public-Private) in meeting the distinct needs of U-3s and that of their caregivers

While the models that exist in both the states attempt to provide a range of services in the creches to children, the following conclusions can be drawn regarding the availability, sufficiency and quality dimensions of various models of U-3 childcare in the two states:

1

The National Creche Scheme and its functioning are characterized by a number of features like: (a) Inordinately long delays in the transfer of funds from the Central Government to the state and the disbursements to the eventual destinations, i.e., the creches. There are different pathways for the disbursal of funds in the two states, but the modalities and the constraints remain the same. This causes serious delays in purchase of food, medical supplies, doctor visits, also resulting in the creche workers (teacher and ayah, in typical cases) being unpaid for long periods of time and feeding the children often out of their own money, in anticipation that they will be reimbursed (b) long delays in communication between the government departments in charge of the NCS, the district officials and the nodal organisations or NGOs who run the creches (c) resultant reliance on the goodwill and dedication of the people involved in running the creches, including the creche staff, (d) the very poor rates of remuneration for the staff that work in the creches under the NCS.

2

The creches run for children of government employees and employees of private establishments, which function like targeted interventions for a specific category of children, function better in both states, even under the NCS. Even so, the numbers that are catered to are very small because these initiatives are few in number.

Despite the constraints under the NCS, the commitment of staff and local communities to the running of creches, often without remuneration or any direct benefits, is commendable, underlining the need for the facilities even more.

3

4

The models run under the specialized initiatives, like the Mo Kalika Kendra under the DMF and the PPP model in Odisha are truly commendable for the coverage of children, the focus on nutrition and stimulation and in making transformative changes in the lives of the communities that are catered to. Some of the specific changes noticed were, especially in Odisha, enabling older siblings to attend school more regularly, providing a safe and hygienic environment for children, feeding with calorie-dense and protein-rich food three times a day, helping parents go to the forest to collect produce without worrying about their children getting bitten by forest creatures and increasing the cognitive abilities of the children.

GENDERED LABOUR, ALTRUISM AND CARE WORK

Some Insights From the Situation of Creche Workers

It may be concluded from this study that creches for U-3 children, when they are available and especially when they work well to focus on needs of U-3 children, play an important role in addressing both ECD needs and employment needs of mothers. Local people in both states from varied sectors of activities, who are mostly poor informal sector workers, use creches as places to effect important changes in their lives; as a safe place to leave the children, even if essential facilities such as functioning toilets, well equipped kitchens, educational materials or regular electricity are not available.

However, when it comes to the lives of creche workers (teachers and staff assisting them), there is much to be desired and the mode of functioning of the system brings forth important dimensions of gendered care work. This study has found that creche staff, whose publicized rates of remuneration, under NCS or other schemes of state governments, or of PPP initiatives, are low to begin with, are further degraded through long

delays in payment of salaries and the lack of any security of wages or employment. It was observed in the study that creche workers, who are often not paid for months, even years, sincerely come to the creche, look after the children, cook food for them, sometimes out of anganwadi rations or provisions that they themselves bring from home and devise various kinds of stimulation activities for the children. This study thus highlights an important dimension of gendered care work outside the home for women such as the creche workers: the reliance on altruism and emotional labour that allows for degradation in terms of actual conditions of employment.



CONCLUSIONS AND RECOMMENDATIONS

The National Creche Scheme (now known as Palna Scheme) experienced certain challenges resulting decline in number of creches across states. Under new Palna scheme, Anganwadi cum creches should be expanded with adequate budgeting, monitoring and disbursement of fund on time.

The rates of remuneration for staff as well as the financial allocation to various expenditure heads need to be revised upwards significantly, in addition to timely disbursal of funds.

There is a very clearly expressed demand for creche facilities for U-3 children, both among employed and unemployed mothers. This is because of the observed impact of such facilities on children and families, where they exist and are implemented well, as well as from the point of view of women's employment and time availability. Sectoral initiatives, like the creches started in mining and tribal areas in Odisha, are likely to impact vulnerable populations positively. It is recommended that such sectoral initiatives, focussed on specific populations among the poor, be replicated and expanded.





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