Proposal

for

VILLAGE PHULWARIS (CRÈCHES)

(2021-2022)

Submitted to: **FoJSS UK**

Submitted by: **Jan Swasthya Sahyog**



Jan Swasthya Sahyog (JSS) is a voluntary, not-for-profit organization working in rural Bilaspur district of Chhattisgarh. It runs a very busy base clinic in Ganiyari village, as well as a community programme in 72 villages. JSS aims to reduce the prevalent inequity in health through provision of low-cost, effective health care services at primary and secondary levels. It works through a three-tier structure of village-based women health workers; three subcentres staffed by senior health workers, and the base clinic.

Undernutrition is perhaps the biggest problem that we face not only in Chhattisgarh, but all over India. It leads to increased chances of falling ill and sometimes dying due to it. Thus, in order to prevent these avoidable deaths, to make a dent into the poverty trap and to allow children to have optimal physical and mental growth, there is a pressing need to prevent, and treat undernutrition in the community.

As a part of the community work and in response to the very high levels of childhood malnutrition seen in this area, JSS began a crèche programme 12 years ago. In most households, both parents go out to work during the day, leaving young children in the care of older children. Sometimes elderly parents who are too old to work are left to take care of the child. Even though there are many reasons for malnutrition in young children below 3, we felt that the most important cause in poor families was that there was no one available to feed the child several times during the day. Eating twice a day, like adults do, is not enough for young children who need to be fed at least five times during the day.

Crèches (or *Phulwaris* as they are called in this programme) were opened with the following *Objectives*:

- a. To provide a safe, secure, and stimulating environment for young children, 6 months to 3 years of age, when their parents are out for work
- b. To demonstrate to mothers that older infants (beyond 6 months) can consume and digest food other than breast milk, and that they thrive on it
- c. To prevent malnutrition among this age group and where children are malnourished, to improve their nutritional status
- d. To help older siblings who have dropped out of school, for the care of the younger child, to return to school.
- e. To allow parents to go out for work and increase their income that accrues out of it.

Functioning of crèches and supervision

A *Phulwari* unit has one caretaker for ten children. Sometimes this goes up to 12 children. But any centre that has 13 or more children has two women to take care of them. It is physically exhausting and very difficult for one woman to take care of more than ten active young children. In some villages there may be 20-24 children in one centre, with two workers working together. These caretakers are from the same village community, and have received

training in basic child care, hygiene, nutrition and health. Their skills are being upgraded periodically in facilitating early child learning and play.

A large village may have more than one *Phulwari* so that the centre is close to the children's homes since parents are unwilling to send children far from the home to the centre. Parents drop the child off and collect them at the end of the day. A *Phulwari* can also be opened in any small hamlet that does not have ten children but has more than five and the community there wants a crèche facility.

The crèches normally function out of a rented room— sometimes two rooms are made available. The room needs to be large enough for the number of children, easy to clean, and in a safe location (as in, not located right next to a pond for instance). Cooking is not done in the same room where the children are kept: it is in another room, or in the open air. The crèche is not run in the home of the crèche worker unless no other space is available. This is to avoid the worker being distracted by her own household work demands during the time she should be looking after the children.

The crèches function from 8am to 5pm normally. However, they are flexible according to the needs of the community. Demand for crèche services peaks during periods of agricultural activity like sowing and harvesting as well as during times when NREGA is operational in the village. In the summer, when NREGA work begins at 4am to beat the heat, the crèches are functional by 3.30am: sleeping children are brought to the centre and left there as the parents leave for the worksite.

The diet at the centre consists of the following:

- 9am: Snack of Sattu- 60gm per child per day (A mixture of wheat (50%), barley (25%) and peanuts (25%) are cleaned, roasted and ground together. 200 gms of this is added to 100 gms of sugar to make a packet of 300 gm of sattu). One packet of sattu is served to five children each day.
- 12 noon: Meal of Khitchdi– Rice:Daal 5:1 (125 gm of rice and 25 gm of daal is cooked per child per day. Half of this is served at noon, with 5 ml of oil is added on top of the food after it is served onto the child's plate).
- 3pm: second meal of Khitchdi– same as the lunchtime meal.
- A boiled egg is provided to every child thrice a week.

Each crèche is provided with a complete set of cooking utensils as well as stainless steel plates and spoons and tumblers for the children. Soap for handwashing as well as towels are also provided. Water disinfection is done using UV light (This is a low-cost technology developed by JSS in which water in a drum is disinfected using UV light for 15 minutes). At centres without electricity, water is disinfected using chlorine solution which is replaced regularly. Mats for children to lie on, mosquito nets as well as toys are also supplied. Mothers provide old sarees to use as slings as many children prefer to sleep in them. Two sets of bed sheets

for every five children have been provided for the children who do not sleep in slings, one for the children to lie on and another for covering the children.

Hand washing before a meal has been encouraged from the beginning. Hand wash stations have been installed in all the Phulwaris with liquid soap dispensers. Children are able to use the hand wash stations like a play.

Health care is provided by the village health workers present in each village who visit the crèche once a week, or if they are called by the *Phulwari* worker to see a specific case. The crèche worker is also trained to prepare and administer ORS, and to give paracetamol to a child with fever. Most of the crèche workers are illiterate, so they keep minimal records. Someone in the family or village helps them to mark attendance. Crèche workers are trained in basic hygiene, child care and nutrition, management of diarrhoea, and in recognizing fever and giving the first dose of paracetamol before referring to the health worker. Besides this, all the Phulwari children are given iron syrup daily to prevent anaemia and albendazole syrup for deworming. Immunization of children at the crèche is done by the government ANM in those villages where she visits.

Early child education (ECE):

Age-appropriate safe toys are provided to all the crèches for children to play with, and the crèche workers are also taught songs and games for the stimulation and learning of young children.

We had introduced early child education programme which includes age-appropriate activities for children's development covering five domains such as physical, social, emotional, language and cognitive skills.

Growth monitoring

Anthropometric measurements are monitored every month by the Phulwari supervisor and undernourished children are given special attention—an additional ration of khitchdi. If there is no improvement in weight, the senior health worker examines the child and refers it to the subcentre clinic on the day the doctor visits. Those who are severely malnourished and need further investigation are referred to Ganiyari.

Advocacy

We intend to improve the Phulwari programme qualitatively and at the same time we would continue our efforts to push the State to own up its responsibility for this. Till now, we could influence the Madhya Pradesh and Chhattisgarh state to run such crèches in rural areas. Madhya Pradesh Government currently runs 150 Phulwaris in Anuppur and Singrauli districts and 450 new crèches have been approved for 4 other districts, namely Mandla, Dindori, Umaria and Shahdol. This year, we also propose a consortium of organizations that are working on under-three children in India to push child care agenda at a national level.

Impact of COVID-19

The past year has been a difficult one with the prevalence of SARS COVID-19 because of which our routine work has been hindered slightly. Seeing the surge in the number of cases, we had to temporarily shut down our Phulwaris from the last week of March 2020 with the subsequent lockdown and government orders to keep the Anganwadis closed. Lockdown also meant loss of livelihood and a possible staggering rise in malnutrition in children. Therefore, we made sure the activities continued in a slightly modified format.

Adapting to the new normal, the crèche workers continued their work of cooking khitchdi and delivering sattu, eggs, and the cooked food for each child to their homes. Despite the disruption caused by the pandemic, we were fortunate not to see a sharp increase in malnutrition levels even though the creches were closed. This is in contrast to many other parts of the country where child malnutrition and hunger were widely reported to have worsened. Parents had to remain home during the lockdown and hence they could take care of their children.

Though the last strain did not affect the children directly, in different parts of India, especially amongst the vulnerable sections, they were somehow still paying the price through indirect complications such as changes in their diet, social isolation, absence of education and so on. With enough registered demand for work and consequent restart of NREGA and agricultural labour, parents were keen to have a place to leave their children behind and re-join work to make up for the loss of wage. Hence, the creches were re-opened in January 2021 keeping the following precautions in check:

- a. Children to be kept outside in the open courtyard under a shade and not indoors
- b. Elderly creche workers with co-morbidities may help in cooking the food, but not interact with the children
- c. Families with senior citizens with co-morbidities to collect food from the crèche but keep their child at home (to eliminate the risk of the child being a carrier)
- d. Attendance at the crèche to be voluntary with parents given the option to simply collect the food from the crèche for their children
- e. Any child with fever and cold / cough to be referred to the sub-centre immediately

For few months, our creches were in full swing keeping the necessary safety protocols in check. The Phulwari workers, who had used the time during lockdown to learn different ways to make their creches more attractive and cheerful, could implement them to serve better.

However, with the spike in COVID cases in Chhattisgarh, we chose to close down the Phulwaris and continue the essential services ongoing starting April 2021.

Despite the necessary buzz with COVID and the consequent lockdown, we cannot put a stopper at serving the children who are otherwise victims of malnutrition and easily preventable diseases. Our food service delivery to their respective homes and growth monitoring using anthropometric measurements by the supervisors will continue until the situation gets safer and we can welcome our children back to their safe space.

Budget for Phulwari Programme:

Sr. No.	Description	Unit	Rate per unit	Number of Times/Period	Total (Rs.)
Α	Nutritional supplements and medicines				
1	Making food supplements and supplying to Phulwaris (including additional supplements for severely malnourished children) @ Rs 10.6/day/child	10	10.6	310	32,860
2	Treatment of minor illnesses like ARI, Scabies, Skin infections, and medicines like Albendazole and Iron @Rs 150/month/Phulwari	1	150	12	1,800
	Subtotal A				34,660
В	Supplies				
1	Bed net (twice a year)	1	300	2	600
2	Housekeeping supplies (including bucket, tub, mug, floor mat etc) @Rs 1200/annum/Phulwari	1	1200	1	1,200
3	Soft play tools @Rs 900/Phulwari once a year	1	900	1	900
4	Soap and related supplies for sanitary practices	1	85	1	85
5	Clothes (Bedsheets, towel, napkin, bibs)	1	1200	1	1,200
6	Fuel for cooking	1	2000	1	2000
	Subtotal B				5,985
С	Personnel cost				
1	Wage support for creche worker @Rs4700/month	1	4700	12	56,400
	Subtotal C				56,400
D	Monitoring and supervision cost				
1	Transport for supervisor (Using 2 wheelers for village meeting, supply chain and Phulwari visit @Rs 195/ phulwari	1	195	12	2,340
2	Repairs and maintenance @Rs. 25/phulwari	1	25	12	300
3	Transport for programme coordinator (Using 2 wheelers for village meeting, monitoring, supervision, mentoring etc @Rs 22/phulwari	1	22	12	264
	Subtotal D				2,904
	Total yearly cost (onetime and recurring) for 10 children (one phulwari)				99,949
	Total yearly cost for 95 Phulwaris				94,95,155
	Other costs				
E	Personnel cost				
1	Phulwari supervisors (10 Nos.) and One logistic manager @Rs 13200/month	11	13200	12	17,42,400

2	Phulwari coordinator (1 No) @Rs 36300/month	1	36300	12	4,35,600
	Subtotal E				21,78,000
F	Training of Phulwari workers				
1	Organizing meeting cum training (Food, logistics and housekeeping with night stay at centre @ Rs 120 per Creche worker for 1.5 day training every month).	125	120	12	1,80,000
2	(Development and Adoption of training material including printing & dissemination)	125	400	1	50,000
3	Transportation support to Phulwari workers for attending meeting and trainings @800/month/cluster	4	800	12	38,400
	Subtotal F				2,68,400
G	Other overheads				
1	Phulwari rent @Rs 300/Phulwari/month (given to 25 Phulwaris)	25	300	12	90,000
2	Phulwari office utilities	1	50000	2	1,00,000
	Subtotal G				1,90,000
	Total other cost				26,36,400
Grand total (One-time cost & Recurring cost+ other costs) for 95 Phulwaris					1,21,31,555
Per child/year					11553.86

We are proposing support for 55 Phulwaris for the financial year 2021-22. With the total budgeted cost for 95 phulwaris as the basis, per child per year cost would come down to Rs. 11553.86. The total number of children in these 55 Phulwaris being 539, we would like to request your support with Rs. 62,27,531 (in words: Rupees sixty-two lakh twenty-seven thousand five hundred and thirty-one). A list with composition of these Phulwaris is attached to this proposal.

We hope that with this support, we would be able to contribute significantly to improvement in nutrition and cognitive growth of future generations.

