

## Child Friendly Panchayat – A Study of Child Development Indicators in Rural Panchayats of Tamilnadu



Research Study Sponsored by

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*New Delhi*

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## Executive Summary

**Child Development: A Priority Area?** Children grow, develop & learn throughout their lives from birth & infancy to adulthood. The child's development can be measured through social, physical & cognitive developmental milestones. If children fail to develop properly, they may be unable to reach their full potential. However, health care professionals & parents can work together as partners to help children grow healthy & strong. The intent of early child interventions is to lay a foundation in conjunction with the family to support infants as they grow & mature into healthy individuals. A healthy status means achieving the best possible outcome for a child in physical, mental & social functioning.

Though children grow, develop and learn throughout life the first five years of life are critical, and so an increasing number of early childhood interventions are being developed and implemented both by the government & the private sectors. Apart from these social, religious, economic and political institutions, media & cultural values can also influence how children live their lives. Study of child development is important because it provides practical guidance for all those who care for children. International agreement on standard child development indicators has been reached only for health and nutrition. The commonly used child development indicators can be broadly divided into health indicators, nutrition indicators and cognitive development indicators.

**The new context of Child Development in Tamil Nadu !** Tamilnadu is one of the more developed states of India with a geographical area of 1.30 lakh km. The state has 31 districts with a population of 62 million as per 2001 census. Nearly 42% of the population lives in urban areas. Agriculture continues to be the prime sector of the economy. The per capita income of the state is Rs. 25,965 at 1998 - 99 prices. The human development index of Tamilnadu is 0.657 as compared to 0.571 for India. The health for all, by 2000 had its objectives as immunization against infectious diseases, control of endemic diseases, provision of maternal & childcare and provision of essential drugs.

In 1994 the Tamilnadu Panchayat act was passed and in 1996 the first Panchayat elections were held in the state. Local Governance has unfolded the potential that we could ensure Child development and build Child friendly Panchayats.

This study stems out of Shanti Ashram's primary commitment of strengthening governance at the Panchayat level and the capacities of elected representatives in addressing Child Development, locally. The constant and meaningful interaction with Panchayat leaders has also provided a unique opportunity for initiating innovative programs. Working for children and the potential for creating '**Child Friendly Villages**' or '**Child Friendly Panchayats**' has been part of thematic discussion, both within the Ashram and with our Panchayat representatives. This possibility has further been concretized by the Tamil Nadu Government's backing of participatory and integrated planning at the Panchayat level. Currently, the Panchayat Raj institutions have no role to play in the functioning of the educational and health care institutions with special focus on children. The Panchayats in addition have no policy & budget provision for child development in their governance agenda.

**Shanti Ashram**, a voluntary organization, inspired by the Gandhian vision of Sarvodaya, pioneered the peoples movement for panchayat raj in the early 1990's. Over 100 NGO's formed part of the Ashram's coalition for realizing Panchayat Raj through appropriate constitutional amendments. After the first and second Panchayat elections, the Institute of Social Sciences & CAPART, organized training programs for the elected Presidents and Members of the Panchayats. This was done with the aim to enable them to run the panchayats effectively and efficiently. India is a signatory of international *Convention on the Rights of the Child* (CRC). The challenge before the Panchayats is to take up the task of honoring the rights of children. The achievement of Child Friendly Panchayat is also linked to our commitment to realizing the millennium development goals (MDG's).

**Government across India has implemented the Integrated Child Development Services (ICDS)** scheme since 1975. It is one of the most important government interventions implemented for children, particularly vulnerable children who require additional support & resources. The scheme has three components i.e. nutrition, early childhood health care and pre school education. The target audience of the scheme is children up to six years of age belonging to the poorest families living in disadvantaged areas. This scheme was developed on the rationale that care, psychosocial development, and child health and nutritional well-being, mutually reinforce one other.

**The general objective of the study was to find out to what extent the selected Panchayats were child friendly<sup>1</sup>** fulfilling the indicators identified by the present study..

This specific objectives were :

- *To review existing micro level frame works on policy and programs for integrated child development at the Panchayat level.*
- *To identify the specific parameters of a child friendly Panchayat and develop through consultation with Panchayat representatives, technical experts in child health, education and nutrition, specialized UN agencies including UNICEF who are working with children NGO & CBO representatives.*
- *To formulate village development plans at Panchayat level as a pilot initiative to achieve child friendly panchayat.*
- *To implement the plan developed by convergence of the existing programs in partnership with various agencies.*
- *To document the experience for scaling up and replication.*

**Methodology identified for the conduct of the study:** An initial meeting of Panchayat Presidents and voluntary organizations involved in Child Development, located around Shanti Ashram was organized. The objectives of the study were explained to them. After technical presentations on the topic under study, a detailed discussion followed on the variables that could be part of the proposed composite indicator on Child Friendly Panchayats. The variables thus identified were debated & finalized. The following six Panchayats from Coimbatore and two from Nilgiris district were selected for the study.

**Coimbatore District :**

- ✓ Somaiyampalayam
- ✓ Nachipalayam
- ✓ Maruthur
- ✓ Valukkuparai
- ✓ Madvarayapuram
- ✓ Kalampalayam

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<sup>1</sup> Child Friendly Panchayats

## Nilgiris District :

- ✓ Denadu
- ✓ Kodanadu

A comprehensive pre-tested interview schedule was prepared and data collected by using the personal interview method from all the villages of the eight selected Panchayats. 23 indicators as given below were identified to consider a Panchayat as a Child Friendly Panchayat

1. *Births are registered*
2. *Children's population is enumerated*
3. *80% immunization with EPI is achieved*
4. *Extended immunization programs have been initiated*
5. *All pre-school children are covered by programs including ICDS*
6. *100% school enrolment is achieved*
7. *The school drop out rate is calculated and return to school initiatives are in place in particular to ensure that there is no child labour*
8. *80% Utilization of Special government interventions for girl children is achieved (iron supplementation; provision of cycles)*
9. *Annual health check ups are conducted through school health program*
10. *Schools are provided with drinking water and sanitation facilities*
11. *Village level Vulnerability mapping is done to identify the children at risk*
12. *Amutham – nutritional - depots to be established by Women-led self help groups*
13. *Youth-led awareness programs on HIV/AIDS to cover 80% of the children above 10 in the Panchayats*
14. *Recreational space and infra-structure is created*
15. *Bala Sabhas are organized under the leadership of youth and children*
16. *Five child-led community service activities to be held during the calendar year.*
17. *Awareness programs on environmental friendly practices & adoption to be reached through schools*
18. *To use local media and performing arts to share this message of child development.*
19. *In cooperation with local faith-based organizations, NGOs and educational institutions, value education classes to be provided to children in schools.*
20. *Parenting workshops & materials to be organized in cooperation with the lead NGOs, health-care providers and educators*
21. *At the Panchayat level, annual policies for children to be articulated.*
22. *Budget heads to be created for child development with the annual budget outlay as part of Annual Panchayat planning*
23. *To establish an inter-sectoral committee for child friendly villages*

## **Results & Discussion**

- The general characteristics of the Panchayats revealed that the population of the Panchayats varied from 3127 in Kodanadu to 7917 in Maruthur. The sex ratio is almost 1000 in all the Panchayats. This is an achievement as against the national sex ratio, which is negative and stands at 928:1000. Children in the age group of 6 to 14 years were found to be more as compared to other groups. Children formed nearly 20% of the population of the identified Panchayats.

Though every birth is to be registered with the Village Administrative Office, most of the birth registration is done in the hospital itself since most of the deliveries are taking place in the hospitals. Government programs like mid-day meals, provision of free books, free uniform, free notebooks for children for scheduled castes and scheduled tribes are in operation in the schools studied. Their utilization has also been very high.

Apart from Government institutions, very few voluntary agencies and community-based organizations are working in the villages for the benefit of the children. Besides Nachipalayam and Kalampalayam villages, it was found that all the Panchayats did not have any non-government organizations working for child development. The two Panchayats in Nilgiris district do not have any community-based organizations. It is thus evident that the children in the villages mostly depend upon Government institutions for services & interventions for their development.

*There does exist the need for developing integrated frameworks of working both in policy & action for Child development at the Panchayat level involving local government & voluntary sector.*

- o The details of the educational institutions collected revealed that except in Valukkuparai Panchayat all the villages have elementary schools. In Somayampalayam Panchayat, out of seven villages only two have the basic facility of elementary schools. It could be inferred that the minimum basic educational facility are not available to the children in the Panchayats studied.

The analysis of the availability of other enabling facilities like drinking water, playground and toilet in the schools of selected Panchayats showed also a mixed picture. Drinking water facility is available in all schools except one in Kalampalayam Panchayat. The picture is not encouraging in the case of facilities like play grounds and toilets. Non-availability of space adjoining the schools is a major constraint for providing playgrounds. Toilet facilities are available only in schools in Soyamampalayam, Valukkuparai, Kalampalayam and Denadu Panchayats. In the other Panchayats, this is not available in all the schools. The number of classrooms and teachers available in the elementary & middle schools showed that the elementary schools in Nachipalayam, Valukkuparai and Kalampalayam do not have the minimum human resource & infrastructure requirements of five teachers and five classrooms. Non-availability of classrooms and teachers as pointed out by the people interviewed will certainly affect the quality of teaching.

<b>Where do children access education ?</b>				
<b>S.No.</b>	<b>Name of Panchayat</b>	<b>No. of villages with Balwadi</b>	<b>No. of children</b>	<b>Percentage of children covered</b>
1	Somaiyampalayam	3	81	90
2	Nachipalayam	3	60	60
3	Maruthur	5	94	60
4	Valukkuparai	3	64	65
5	Madvarayapuram	4	80	90
6	Kalampalayam	4	100	60
7	Denadu	7	90	88
8	Kodanadu	5	50	94

None of the eight selected Panchayats had a separate budget for education for rural children. As a result the panchayats are currently not incurring any expenditure on education for the schools located in their panchayats. Almost all the schools in the villages are connected by roads and transport facilities. Minimum health services like annual health assessment alone is being done for the children in the educational settings.

*Currently 20% of the population served by Panchayat Raj Institutions in the studied panchayats is made up of children. However the Panchayat neither has a policy framework nor a resource head for child development. As principle leaders for governance their current engagement in integrated child development is minimal & informal. The Panchayat leaders have shown interest to lead & strengthen concrete work for children.*

Health is an important factor in the growth and development of children. The data on availability of primary health centres in the villages shows that two panchayats have primary health centres (PHC) and five have sub centres (SC). There is no tertiary care government hospital in any of the studied panchayats. The absence of private doctors & hospitals in most of the panchayats shows again the predominant dependency of people on Government facilities.

Except in Valukkuparai, Denadu and Kodanadu panchayats, all the other villages were not covered by ICDS. ICDS program is in operation only in selected blocks of the state. The data on immunization coverage shows that there is 100% coverage. Data shows that there are malnourished children in all the selected panchayats except Somaiyampalayam. The percentage of malnourished children works to about 4%, significantly less than the national average of 30%. The absolute number of handicapped children in the study villages is 74. Provision of vitamin drops to children and iron tablets to growing girl children was found to be in operation in only 50% of the village.

### Counting Malnourished Children:

A healthy status means the best possible outcome for a child on physical, mental & social functioning.

S.No.	Name of the Panchayat	Number of malnourished children		
		2004	2005	2006
1.	Somaiyampalayam	Nil	Nil	Nil
2.	Nachipalayam	17	12	12
3.	Maruthur	34	28	30
4.	Valukkuparai	4	2	7
5.	Madvarayapuram	5	11	4
6.	Kalampalayam	47	57	45
7.	Denadu	5	4	4
8.	Kodanadu	20	12	13
	<b>Total</b>	<b>132</b>	<b>126</b>	<b>115</b>

As regards sanitation, toilet facilities are available in only 50% of the households studied. Apart from this common toilet facilities are available in 23 villages. Another issue of concern is the availability of drainage facilities. Only 25 villages out of the 55 villages studied have drainage facilities. Similarly, waste & garbage collection is solely done by the panchayats. Both the capacity & the frequency of the service is not regular. Similar to that of the education budget the panchayats also do not have any budget for health.

## Are these Panchayats Child Friendly?

**The central question the study posed was: Are these panchayats child friendly?**

To declare a Panchayat- *Child Friendly* the scores of each Panchayat on the 23 variables was assessed. A total score thus enabled us to declare the status of *Child Development* in each Panchayat. It could be inferred that most of the variables making up the child development indicator was realized in the selected panchayats.

### Details of Indicators and their level of Presence

S.No.	Indicator	1	2	3	4	5	6	7	8
1	Birth Registered	✓	✓	✓	✓	✓	✓	✓	✓
2	Child Population Enumerated	✓	✓	✓	✓	✓	✓	✓	✓
3	80% Immunization coverage	✓	✓	✓	✓	✓	✓	✓	✓
4	100% Pre-school children covered under ICDS	x	✓	x	✓	x	x	✓	✓
5	100% School enrolment	✓	✓	✓	✓	✓	✓	✓	✓
6	Drop Outs returned to school	✓	✓	✓	✓	✓	✓	✓	✓
7	80% Utilization of Government programs for girls	✓	✓	✓	✓	✓	✓	N/A	N/A
8	Annual Health check up in schools	✓	✓	✓	✓	✓	✓	✓	✓
9	Drinking water & sanitation facilities in schools	✓	x	x	✓	x	✓	✓	X
10	Annual Policies for children at Panchayat level	X	X	X	X	X	X	X	x
11	Budget head for child development in Panchayat	X	X	X	X	X	X	X	X
12	Extended Immunization Program	X	✓	✓	X	x	✓	X	X
13	Awareness program on environmental practices	Drainage and garbage removal – partial coverage							

#### Note:

1. Columns with Sl. No. 1 to 8 indicate the names of Panchayats in the order as given in the earlier tables.
2. N/A indicates **Not available**.

It could be seen from the above table that most of the child development indicators identified are in practice in the studied Panchayats. However, the reach & quality in some cases have been found wanting. The panchayats have no policy for child development in their agenda and there is no budget provision for health, education & development of children in the villages. Children are served by many individual departments often in isolation of the other. For better outcomes in Child development, a panchayat-level integrated development plan may prove more useful than the current approach. This will also help in developing locally appropriate targets & benchmarks to meet the educational, health, sanitation, environment and social needs of rural children.

*The proposed Child Development indicator allows for both integrated analysis and specialized interventions for children to be counted. Recording achievements & performances will allow a Panchayat or Village to be declared 'Child friendly'. This process in itself will have an intrinsic element of Participatory Monitoring & Evaluation. Such indicators will not only help in measuring the impact of different interventions but also inspire local leadership & communities to look ways in which a better quality of life can be assured for children.*



## Introduction

Tamilnadu, one of the developed states of India is the southern most state of the country. The state shows rich variety & diversity in its geography & climate. The state has a geographical area of 1,30,000 km. & is the fourth largest state in the country. Tamilnadu has 31 districts based on the policy of reducing the size of the districts in order to accelerate development. According to 2001 census the state's population is 62 million with a sex ratio of 986. The decadal growth is 11.19%. The density of population, a true indicator of population distribution is 478 persons per sq. km.

Tamilnadu is the most urbanized state in the country with 42% of its population living in urban areas. Agriculture has been the mainstay of the state economy with more than 60% of the population depending on this sector for living. However, with the economic development the share of agriculture in the net state domestic product gradually declined due to higher production and productivity in the non-agricultural sector. Tamilnadu ranks next to Maharashtra in terms of the contribution of the manufacturing sector to net domestic product. The per capita income of the state at 1998 - 99 prices is Rs. 25,965/- which is above the national per capita income.

The state's policy of '**Health for All by 2000**' had as its objectives: immunization against infectious diseases, control of endemic diseases, provision of maternal & child care & provision of essential drugs. All of this has had a positive impact. Tamilnadu is close second to Kerala in providing all the six summary indicators of antenatal care. Tamilnadu's Human Development achievements have been largely as a result of its educational heritage. The literacy rate of the state as per 2001 census stands at 73.47%. The Human Development Index (HDI) for Tamilnadu is 0.657 as compared to 0.571 for India.

## **Child development: A Priority Area**

Children grow, develop & learn throughout their lives from birth & infancy to adulthood. The child's development can be measured through social, physical & cognitive developmental milestones. If children fail to develop properly, they may be unable to reach their full potential. However, health care professionals & parents can work together as partners to help children grow healthy & strong. The intent of early child intervention is to lay a foundation in conjunction with the family to support infants as they grow & mature into healthy individuals. A healthy status means the best possible outcome for a child on physical, mental & social functioning.

A variety of factors influence child development. Heredity guides every aspect of physical, cognitive, social, emotional & personality development. Family members, peer groups, school environment in the community influence how children think, socialize and become self-aware. Factors such as nutrition, medical care & environmental hazards in air & water affect the growth of the body & mind. Social, religious, economic & political institutions, media & cultural values guide how children live their lives. Above all children contribute significantly to their own development. This occurs as they strive to understand their experiences, respond in individual ways to people around them and choose activities, friends & interests. Thus the factors that guide child development arise from both outside and within the person.

Study of child development is important because it provides practical guidance for parents, teachers, childcare providers and others who care for children. It also enables the society to support healthy growth. It helps also the therapists and educators had better assist children with special needs. Understanding child development contributes to self-understanding. Many developmental scientists believe that children do not proceed through universal stages are process of development. To socio-cultural theorists children's growth is deeply guided by the values, goals & expectations of their culture. Development scientists study

children in their everyday settings – at home, at school, on the play ground, in a childcare centre, or in the neighborhood.

During middle childhood children acquire heightened capacities for judgement, reasoning, social understanding, emotion management & self awareness. At the same time the social world of middle childhood broadens beyond the family to include school, neighborhood, peer group and other influences. In contrast to rapid physical development of the earlier years children grow more slowly and gradually during middle childhood. Older children seem to think more quickly than younger children because they know how to do so.

Intellectual growth in middle childhood is not just a result of the growth of the mind in combination with class room practices, parental support is another crucial ingredient. As the children move in different social world older children begin to grasp the informal rules for each settings and manage themselves accordingly. Children act differently at home and in the class room. Parents remain central in the expanding social world of middle childhood. It is believed that one's behaviour and personality as an adult are inevitably determined by earlier influences. Childhood sets the stage for adult life and experience, with the understanding that a person understanding may be changed by subsequent event and experiences.

### **Child Development Indicators**

The choice of child development indicators poses many problems. International agreement on standard indicators has been reached only for indicators of health & nutrition. Universally applicable standards might very well be irrelevant in many contexts because of the diversity in race, social – economic status and cultural practices. However, some countries have installed a nation-wide developmental test for entrance to primary school. The most common and direct child development indicators are mainly related to survival, health & nutrition. This means that the indicators do not directly measure the cognitive development but instead look at variables that are assumed to be related to it. Some of the commonly used child development indicators include:

### **Health Indicator**

- Infant mortality rate
- Child mortality rate
- Morbidity rate
- Leading causes of death of young children
- Leading causes of morbidity of young children
- Immunization rate
- Oral rehydration therapy use rate

### **Nutrition Indicators**

- ✓ Percentage of infants with low birth weight
- ✓ Percentage of children under 5 that are moderately, severely malnourished
- ✓ Anthropometric measures
- ✓ Mid-arm circumference
- ✓ Levels of micro nutrients
- ✓ Daily per capita calorie supply

### **Cognitive Development**

- Age at entry in first grade
- Gross enrollment rate
- Net enrollment rate
- Primary school completion rate
- Average years of schooling completed
- Percentage of children reaching grade 5
- Repetition rate
- Dropout rate
- Free school enrollment.

### **Government intervention for child development**

The integrated child development services (ICDS) scheme is one of the most important Government intervention implemented for child development since 1975. It is a centrally sponsored scheme and the three essential components are nutrition, early childhood health care & preschool education. The scheme aims to improve the nutritional & health status of pre school children, pregnant women & nursing mothers by providing a package of services including supplementary nutrition, pre school education, immunization, health check up, referral services & nutrition and health education.

*The objectives of the scheme are*

- Improve the nutritional and health status of children below the age of 6
- Lay the foundation for the proper psychological, physical & social development of the child.
- Reduce the incidents of mortality, morbidity, malnutrition and school drop outs.
- Achieve effective coordination of policy and implementation among various Government departments to promote child development
- Enhance the capability of the mother to look after the normal health & nutritional needs of the child through proper health & nutritional education.

This scheme targets most vulnerable groups of the population including children up to 6 years of age belonging to poorest of the poor families and those living in disadvantaged areas including rural area, tribal areas & urban slums. In addition to children below 6 years the scheme also takes care of the essential needs of pregnant women & nursing mother residing in socially & economically backward villagers & urban slums. The child centered approach to programming is based on the rationale that care, psycho-social development & child's health and nutritional well being mutually reinforce each other. In addition, the scheme has coverage of important support services such as safe drinking water, environmental sanitation, women's development & education program. ICDS conceived in the early years of Fifth Five Year Plan and launched in 33 experimental blocks across the country had reached 5652 project units in 2002.

### **Shanti Ashram's People Movement for Panchayat Raj:**

Shanti Ashram along with many other organizations, leaders & individuals pioneered the people's movement for Panchayat Raj. A strong 100 membered NGO alliance worked for preparing a conducive environment for the first Panchayat election in Tamilnadu. Since then the Ashram in partnership with CAPART and Indian Institute for Social Sciences has organized two cycles of training in effective governance for Panchayat representatives. The second cycle of training providing a platform for reviewing the functions of Panchayats as well as the 29 subject currently under the purview of Panchayats was made. The continuous work with Panchayat Raj Institutions and their local leadership stems out of Shanti Ashram's commitment of strengthening governance at the Panchayat

level. Constant and meaningful interactions with Panchayat leaders provided a unique opportunity for initiating innovative programs. Working for children and the potential for creating child friendly Panchayats has been part of thematic discussions both within the Ashram and with our Panchayat representatives.

The 73rd Constitutional Amendment allows people's participation in Grama Sabha and given powers to approve developmental activities, monitor and implement development programs falling within the responsibility of the Panchayat. This empowering governance opportunity allows the recognition of felt needs at the micro level and developing appropriate strategies with optimal utilization of resources locally available. India is a signatory of the International convention for the rights of children. The rights of the children include rights for survival, rights for growth, rights for development and rights for participation. In the normal process, children being non voters do not have the voice or forum to present their needs nor do they really understand their needs. So Governments whether at national, state or local level do not give first priority to children. Investing in children is a logical and effective way to abolish poverty, to improve economic and social development. Therefore, the challenge to the Panchayats to take up the task of honoring the right of the children. The Panchayat can initiate action to make their Panchayats child friendly by providing funds for nutrition, health, immunization, education and environment. The achievement of child friendly Panchayat is closely linked to our commitment to meet development aspirations as laid down in millennium agenda with millennium development goals.

### **Objectives of the Study**

To find out to what extent the selected Panchayats are child friendly fulfilling the indicators identified by the present study. The general objective was that of conceptualizing the development of child friendly Panchayat as a pilot initiative.

### **The specific objectives are:**

- To review existing micro level frameworks on policy and programs for integrated child development at the Panchayat level.
- To identify the specific parameters of a child friendly Panchayat and develop through consultations with Panchayat representatives, technical experts in child health, education & nutrition, specialized UN agencies including UNICEF who are working with children, NGO's & CBO representatives.
- To formulate village development plans at the Panchayat level as a pilot initiative to achieve child friendly Panchayat.
- To implement the plan developed by convergence of the existing programs in partnership with various agencies.
- To document the experience for scaling up and replication.

## Methodology

In order to finalize the Panchayats to be selected for the study a preliminary meeting of the village Panchayat Presidents located around Shanti Ashram, Panchayats with their Presidents involved in committed development works and the voluntary organizations involved in child development who have expressed willingness to work with local Panchayats was organized. The aim and objectives of the study on child friendly Panchayats was explained and the assistance required from the Panchayat Presidents to carry out the study was discussed in detail. After detailed discussions the following eight village Panchayats, six from Coimbatore and two from Nilgiris district were selected for this pilot initiative. The list of Panchayats along with the names of villages under each Panchayat taken up for this study is furnished below:

S.No.	Name of Panchayat	Names of villages
<b>Coimbatore district</b>		
<b>1.</b>	<b>Somaiyampalayam</b>	<b>Somaiyampalayam Kasthurinaickenpalayam Sultaniapuram Kalappanaickenpalayam Kuppanaicken palayam Navavoor Marudamalai Adivaram</b>
<b>2.</b>	<b>Nachipalayam</b>	<b>Nachipalayam Pacchapalayam Kumarapalayam</b>

		Karunchami Goundanpalayam Kamba goundanpalayam
3.	Maruthur	Maruthur Pungampalayam Thimbampalayam Thimbampalayampudur Chellapanoor Kembanur Marappa goundanpudur Kanavai palayam Jothi puram Chinnatiyur
4.	Valukkuparai	Meenatshipuram Valukkuparai Kannamanaickanur
5.	Madvarayapuram	Thembuli palayam Eruttupallam Mundam thurai Nallurpathi Sappanimadai Seengapathi Chadivayalpathi Kalkothi pathi Vella pathi Potta pathi
6.	Kalampalayam	Kalampalayam Thayanur Pujanganur Seeliyur Mathanna Goundan pudur Thambada Thasanur Pillichy goundanur Vijayanagaram
<b>Nilgiris District</b>		
1.	Denadu	Om Nagar Kadasholai Sholur mattam Amman nagar Queen shola Kil Kotagiri Pudu colony
2.	Kodanadu	Bankadu Vetri nagar Kerada mattam Bharati Nagar Sundatty



A comprehensive pre tested interview schedule was prepared and data collected by personal interview method from all the villages of the eight Panchayats. The data collected included age wise distribution of population, ongoing Government programs for children, voluntary agencies working, educational facilities, health facilities, sanitation facilities, Panchayat budget for child development, community participation in child development etc...

To finalize the indicators of child friendly Panchayats the Ashram developed the following indicators after review of past work. The indicators identified are as follows:

1. *Births are registered*
2. *Children's population is enumerated*
3. *80% immunization with EPI is achieved*
4. *Extended immunization programs have been initiated*
5. *All pre-school children are covered by programs including ICDS*
6. *100% school enrolment is achieved*
7. *The school drop out rate is calculated and return to school initiatives are in place in particular to ensure that there is no child labour*
8. *80% Utilization of Special government interventions for girl children is achieved (iron supplementation; provision of cycles)*
9. *Annual health check ups are conducted through school health program*
10. *Schools are provided with drinking water and sanitation facilities*
11. *Village level Vulnerability mapping is done to identify the children at risk*
12. *Amutham – nutritional - depots to be established by Women-led self help groups*
13. *Youth-led awareness programs on HIV/AIDS to cover 80% of the children above 10 in the Panchayats*
14. *Recreational space and infra-structure is created*
15. *Bala Sabhas are organized under the leadership of youth and children*
16. *Five child-led community service activities to be held during the calendar year.*
17. *Awareness programs on environmental friendly practices & adoption to be reached through schools*
18. *To use local media and performing arts to share this message of child development.*
19. *In cooperation with local faith-based organizations, NGOs and educational institutions, value education classes to be provided to children in schools.*
20. *Parenting workshops & materials to be organized in cooperation with the lead NGOs, health-care providers and educators*
21. *At the Panchayat level, annual policies for children to be articulated.*
22. *Budget heads to be created for child development with the annual budget outlay as part of Annual Panchayat planning*
23. *To establish an inter-sectoral committee for child friendly villages*

This was discussed in detail in a meeting of village Panchayat Presidents, health workers, academicians working in community medicine and social workers and finalized for implementation.

## **Results and Discussions**

The data collected for the villages of the eight Panchayats were tabulated and analyzed keeping in mind the objectives of the project. The results are presented and discussed below:

### **a). General Characteristics**

The population details for the eight Panchayat is presented in table - I

**Table - I Population Statistics**

S.No.	Panchayat	Male	Female	Total	Children		
					0-3	4-5	6-14
1.	Somaiyampalayam	3236	3121	6357	274	282	1270
2.	Nachipalayam	2006	1928	3934	123	89	639
3.	Maruthur	4084	3833	7917	353	191	904
4.	Valukkuparai	2209	2269	4478	121	76	803
5.	Madvarayapuram	3339	3280	6619	199	144	1159
6.	Kalampalayam	3343	3357	6700	255	206	929
7.	Denadu	3473	3516	6689	0-5 395		6-10 983
8.	Kodanadu	1578	1549	3127	319		321

The data in the above table shows that the sex ratio is almost 1000 in all the Panchayats, which is a welcome sign. It is marginally higher in Valukkuparai, Kalampalayam & Denadu Panchayats. The share of female in the total population is 48.4% in Maruthur Panchayat. As regards the children's' population children in the age group of 6-14 years are more compared to 0-3 & 4-5 age group. However the share of children in the total population varied from 19.7% in Denadu Panchayat to 28.7% in Somaiyampalayam Panchayat. With children forming 1/5 of the population in general in the study area it is necessary for the Panchayats to provide the needed infrastructure for the promotion of the education and health of the children in the villages.

**b) Birth Registration**

As per the rules every birth that is taking place in the villages are to be registered with the Village Administrative Office. Since most of the deliveries are taking place in the hospital the registration is done at the hospital itself. The data from the health workers of the Primary Health Centre in the study Panchayat were collected and given in table - II

**Table - II Births registered**

S.No.	Panchayat	2004	2005	2006
1.	Somaiyampalayam	36	27	29
2.	Nachipalayam	57	57	56
3	Maruthur	96	100	96
4.	Valukkuparai	74	72	81
5	Madvarayapuram	82	75	64
6	Kalampalayam	74	75	84
7	Denadu	161	132	51
8	Kodanadu	57	53	24

**c). Government Programs**

Government of Tamilnadu is operating a number of welfare programs in the areas of health and education for the benefit of the school children. The programs which are in operation are midday meals scheme, provision of free books, free uniform, free note book for children of scheduled caste & scheduled tribe and Rs. 8,500/- per school per year under serva shiksha abiyam for strengthening of infrastructure and educational aids.

**d). Voluntary Organizations**

Apart from Government Institutions voluntary agencies are also working in the villages to provide the facilities for the education & health of the children. The data on the existence of voluntary organizations and community based organizations in the villages of the selected Panchayats is given in table - III

**Table - III Details of Voluntary Organizations**

S.No.	Panchayat	NGO's		CBO's	
		Yes	No	Yes	No
1.	Somaiyampalayam	3	4	1	6
2.	Nachipalayam	-	5	1	4
3.	Maruthur	3	7	6	4

4	Valukkuparai	3	-	3	-
5	Madvarayapuram	3	7	1	9
6	Kalampalayam	-	8	3	5
7	Denadu	4	3	-	7
8	Kodanadu	2	3	-	5

The data in the above table shows that in Valukkuparai Panchayat all the three villages have Non Governmental Organization or private institution working for the welfare of the children. All the other Panchayats except Nachipalayam & Kalampalayam do not have Non Government Organization in its villages. As regards Community Based Organization again all the three villages in Valukkuparai Panchayat have community-based organization followed by 60% of the villages in Maruthur Panchayat with CBO's. Contrary to the availability of NGO's the Panchayats of Denadu and Kodanadu do not have CBO's in any of its villages. From the data in could be concluded that the presence of NGO's/CBO's is limited in the selected Panchayats meaning that the people are not provided the education and health services by voluntary agencies. They have to depend completely on Government institutions for their development.

#### e). Education

The details on the availability of educational institutions, number of boys & girls in the schools, enrollment, dropout rate & facilities available in the schools were collected for all the villages in the selected eight Panchayats to understand the status of education in these Panchayats. The data are presented and discussed below:

**Table - IV Number of schools**

S. No	Panchayat	Number of schools			
		Elementary	Middle	High	Hr. Sec.
1.	Somaiyampalayam	2 (81+105)	1 (206+185)	-	-
2.	Nachipalayam	4 (136+148)	-	-	-
3.	Maruthur	4 (126+126)	2 (175+206)	-	-
4.	Valukkuparai	3 (153+169)	-	1 (NA)	-
5.	Madvarayapuram	3 (276+243)	-	1 (329+296)	-

6.	Kalampalayam	5 (231+203)	-	-	1 (NA)
7.	Denadu	3 (90+93)	3 (NA)	1 (NA)	1 (NA)
8.	Kodanadu	3 (73+71)	1 (98+79)	-	-

*Note : Figures in parentheses indicate the number of boys and girls in the school.  
NA : Data not available*

With all the developments taken place so far it is surprising to see that only in Valukkuparai Panchayat all the villages have elementary schools. In Nachipalayam & Kalampalayam Panchayats more than 60% of the villages have elementary schools. In the case of other Panchayats it is less than 50%. In Somaiyampalayam the situation is worst. Out of seven villages only two villages have elementary schools. From the above discussion it could be concluded that minimum basic education facilities are not available to the children in the Panchayats studied.

With regard to the availability of Middle School, High school and Higher Secondary School, Middle School is available only in two out of the six Panchayats in Coimbatore district, where as the two Panchayats in Nilgiris district has the above facility. High schools are available in two Panchayats and one Panchayat respectively in Coimbatore & Nilgiris district. Higher secondary schools are available in one Panchayat each in Coimbatore & Nilgiris districts. This might be due to the number of children in the nearby villages to go for higher studies.

The basic minimum facilities required for the children in the schools like drinking water, play ground and toilets were collected for the schools in the eight Panchayats and the data are presented in Table - V

**Table - V Facilities in Schools**

S. No.	Panchayat	Drinking Water		Play ground		Toilets	
		Yes	No	Yes	No	Yes	No
1.	Somaiyampalayam	3	-	3	-	3	-
2.	Nachipalayam	4	-	4	-	3	1
3.	Maruthur	6	-	6	-	5	1

4.	Valukkuparai	4	-	3	1	4	-
5.	Madvarayapuram	3	1	3	1	3	1
6.	Kalampalayam	6	-	4	2	6	-
7.	Denadu	8	-	7	1	8	-
8.	Kodanadu	4	-	3	1	3	1

It could be seen from the table that all the schools in the villages of the selected eight Panchayats has the minimum basic needs like drinking water facilities except in one school in Kalampalayam Panchayat. The picture is not encouraging in the case of other facilities like play ground and toilets. As regards the availability of play grounds in the schools 50% of the schools in Kalampalayam Panchayat did not have this facility. The situation is 25% in Valukkuparai, Madvarayapuram and Kodanadu Panchayat and it is 12.5% in Denadu Panchayat. This was mainly because there is no space adjoining the schools for play ground. However, due to the importance of extra curricular activities for the growth & development of the children the Panchayats should look for the available vacant spaces in the villages for play grounds. A look at the data on the availability of toilets in the schools showed that only in Somaiyampalayam, Valukkuparai, Kalampalayam & Denadu Panchayats all the schools have toilet facilities. In the case of other Panchayats one school in each do not have this facilities.

The data on the number of class rooms and teachers available in the schools were collected and presented in Table - VI

**Table - VI Educational Facilities**

S.No.	Panchayat	No. of Schools	No. of Class Rooms	No. of Teachers
1.	Somaiyampalayam	3	17	15
2.	Nachipalayam	4	12	10
3.	Maruthur	6	26	21
4.	Valukkuparai	4	13	8
5.	Madvarayapuram	4	26	29
6.	Kalampalayam	6	15	13
7.	Denadu	8	19	15
8.	Kodanadu	4	20	17

Due to the non availability of comparable data for the High schools & Higher secondary schools functioning in these Panchayats the discussion on the number of classrooms and teachers revolved mainly for elementary & middle schools. The

data in the above table shows that even if one assumes that there is only elementary school in the Panchayats, Nachipalayam, Valukkuparai, & Kalampalayam schools do not have even five teachers and five classrooms. The position is little better in Maruthur, Denadu & Kodanadu as compared to the earlier Panchayats. If the availability of middle schools are taken into consideration all the schools in the study Panchayats do not have the minimum requirement of one room & one teacher per class. The existing situation will certainly affect the quality of teaching.

The details of Panchayat budget for education showed that all the eight-selected Panchayats do not have a separate budget for education and hence there is no annual expenditure by the Panchayats on education for the schools located in their area. However, in Somaiyampalayam, Nachipalayam, Denadu & Kodanadu Panchayats the community/private organizations help in the conduct of special initiatives like: Independence day, distribution of prizes & study materials to the children in the schools. In villages where there are no elementary schools it was found that the children had to walk a minimum of 1 km. to 2.5k.m. for the nearest schools. The location of the schools as well as the connectivity to the school showed that all the schools except two in Somaiyampalayam and one in Kodanadu do not have good road facilities. Similarly, all the schools in the villages are reachable by transport facilities except one school in Maruthur and two schools in Somaiyampalayam Panchayats. Since these are mostly elementary & middle schools there is no science club, NCC, children's clubs etc.. for promoting extra curricular and co-curricular activities among the children.

Another important provision in the schools for the development of children is annual health check ups. It is mandatory on the part of the Administration to have annual health check up of all the students in the schools functioning within the Panchayat area. The data collected from the schools revealed that the children of all the schools have a minimum of two health check ups every year except in two schools in Somaiyampalayam and one in Kodanadu Panchayat. This showed that the Head Masters of the schools are aware of the program and have also made

arrangements for the implementation for the program for the benefit of the school children.

#### f) Health

Health is an important factor in the growth & development of the children. What is more important is the access to the health promotion facilities. Generally the villages are expected to have primary health sub centers as a minimum facility to take care of the health of the children. The details of the health facilities available in the study Panchayats was collected and presented in Table - VII

**Table - VII Health facilities**

S.No.	Panchayat	PHC	PHSC	Govt. hospital	Private hospital
1.	Somaiyampalayam	-	2	-	-
2.	Nachipalayam	-	-	-	-
3	Maruthur	-	-	-	-
4.	Valukkuparai	-	1	-	-
5.	Madvarayapuram	-	1	-	-
6.	Kalampalayam	1	-	-	-
7.	Denadu	1	4	-	2
8.	Kodanadu	-	2	-	2

**Note :** PHC - Primary Health Centre  
PHSC - Primary Health Sub Centre

It could be seen from the table that out of the eight-study panchayats only two have primary health centre and five have primary health sub centre. Being small village panchayats and in the absence of taluk head quarters there are no Govt. hospitals in these panchayats. Similar could be the reason for the non-availability of private doctors in these panchayats. There are two private doctors each in Denadu & Kodanadu panchayats. This might be due to the fact that these panchayats are in the hilly tract of Niligiris district and the small size of the catchment population does not provide the viability (including financial) of running a private practice.



For promotion of health of pre school children & women as well as for the education of pre school children Intensive Child Development Scheme (ICDS) is in operation in Tamilnadu villages for over three decades. The number of villages covered by ICDS schemes in the study panchayats is furnished below:

**Table - VIII Villages covered under ICDS schemes**

S.No.	Panchayat	Villages covered	Children covered		
			2004	2005	2006
1.	Somaiyampalayam	3	16	48	46
2.	Nachipalayam	3	70	75	60
3.	Maruthur	5	120	110	109
4.	Valukkuparai	3	80	82	77
5.	Madvarayapuram	4	89	85	80
6.	Kalampalayam	4	113	98	98
7.	Denadu	7	19	43	283
8	Kodanadu	5	10	9	142

The data in the above table shows that except in Valukkuparai, Denadu & Kodanadu Panchayats all the villages are not covered by the intensive child development scheme. The coverage is only 50% in Somaiyampalayam, Maruthur, Madvarayapuram & Kalampalayam Panchayats. This might be due to the fact that ICDS program is in operation only in selected blocks in the state.

Immunization is one of the health promoting activities initiated by the Government as a step to reduce the burden of preventable disease amongst children. Data was collected from all the primary health centres on the number of children immunized for the various diseases and given in table - IX

**Table IX Children covered under Immunization**

S.No.	Name of the Panchayat	BCG			DPT			OPV			Measles			MMR		
		2004	05	06	04	05	06	04	05	06	04	05	06	04	05	06
1.	Somaiyampalayam	9	18	13	9	18	13	9	18	13	16	14	11	-	-	-
2.	Nachipalayam	58	63	60	58	63	60	58	63	60	58	63	60	58	63	60
3.	Maruthur	96	101	95	96	101	105	96	101	105	95	99	92	52	51	42
4.	Valukkuparai	74	72	81	74	72	81	74	72	81	74	72	81	-	-	-
5.	Madvarayapuram	82	75	75	82	75	75	82	75	75	82	75	75	-	-	-
6.	Kalampalayam	65	75	84	65	75	84	65	75	84	65	75	84	25	27	35
7	Denadu	161	180	99	223	241	144	247	276	178	172	163	92	-	-	-
8.	Kodanadu	23	122	116	23	99	95	23	108	95	23	122	125	-	-	-

The data on immunization coverage and the number of births are collected by the Village Health Nurses of the Primary Health Centers. But there is no cross checking between the number of births and the immunization coverage either at the village level or at PHC level. However, a look at the number of births during the three years under study and the immunization coverage shows that there is 100% coverage. The difference between the number births and the number of children immunized is significant in the two hill Panchayats namely Denadu & Kodanadu. In the past MMR is not given through the PHC's.

A look at the level of malnutrition among the children and the prevalence of child labour & child abuse was also made in the study villages. The data on the extent of malnutrition in the study Panchayats is given in table X.

**Table X Level of Malnutrition**

S.No.	Name of the Panchayat	Number of malnourished children		
		2004	2005	2006
1.	Somaiyampalayam	Nil	Nil	Nil
2.	Nachipalayam	17	12	12
3.	Maruthur	34	28	30
4.	Valukkuparai	4	2	7
5.	Madvarayapuram	5	11	4
6.	Kalampalayam	47	57	45
7.	Denadu	5	4	4
8.	Kodanadu	20	12	13
	<b>Total</b>	<b>132</b>	<b>126</b>	<b>115</b>

It could be seen from the above table that except in Somaiyampalayam Panchayat there are malnourished children in all the other study Panchayats. A look at the above data shows that the number of malnourished children was high in Maruthur, Kalampalayam & Kodanadu Panchayats compared to the other Panchayats. If one takes the children population under five in these Panchayats the level of malnourished children worked out to about 4%. This might be due to the fact that in Balwadis the malnourished children once identified are given nutritive food to improve their weight and closely monitored.

Another issue with the children that needs attention is the number of handicapped children and the number of children under institutional care. The data on the number of handicapped children showed that currently 74 children are handicapped in the study villages of the eight Panchayats. Similar to that of the prevalence of malnutrition among

children the presence of handicapped children is more in number in Kalampalayam, Denadu & Kodanadu Panchayats. A look at the number of children under institutional care revealed that 29 children are under institutional care during the period under study. The children under institutional care are prevalent only in Somaiyampalayam, Madvarayapuram, Valukkuparai and Kodanadu Panchayats. Of the total number of children under institutional care nearly 80% are in Madvarayapuram.

Child labour & child abuse are not seen in almost all the villages of the study Panchayat. Child labour was found in one village each in Somaiyampalayam, Kalampalayam, Kodanadu Panchayat. Cases of child abuse was reported in two villages of Denadu Panchayat.

Government has established Balwadis in the villages for taking care of the pre school children both on their health and educational aspects. The details of villages having Balwadis and the number of children covered are furnished in Table XI

**Table XI Details of Balwadis**

S.No.	Name of Panchayat	No. of villages with Balwadi	No. of children	Percentage of children covered
1	Somaiyampalayam	3	81	90
2	Nachipalayam	3	60	60
3	Maruthur	5	94	60
4	Valukkuparai	3	64	65
5	Madvarayapuram	4	80	90
6	Kalampalayam	4	100	60
7	Denadu	7	90	88
8	Kodanadu	5	50	94

A look at the data shows that except in the hill Panchayats of Denadu & Kodanadu all the villages in other Panchayats do not have balwadis in each village. There are 34 balwadis functioning in 55 villages of the study Panchayats. The balwadis are mainly to take care of the children of poor families. An analysis the number of children attending the balwadis shows that most of the children in the age group of 3-5 either attend Government balwadis or go to private nursery school in the villages.

Iron & vitamin supplementation are provided to the children and girls in the age group of 15 respectively through the anganwadi workers. The details of the villages covered under the scheme and the number of children benefited are given in Table - XII

**Table XII Iron & Vitamin Supplementation**

S.No.	Name of Panchayat	No. of Villages covered	No. of Children covered	No. of adults covered
1.	Somaiyampalayam	4	205	240
2	Nachipalayam	4	342	88
3	Maruthur	6	124	281
4	Valukkuparai	3	248	227
5	Madvarayapuram	4	99	287
6	Kalampalayam	5	434	249
7	Denadu	6	383	NA
8	Kodanadu	NA	NA	NA

The scheme on provision of vitamin drops to children and iron tablets to growing girls is in operation only in 27 villages out of the 55 villages covered in the study Panchayats. The coverage of children with vitamin drops is comparatively more in Kalampalayam, Denadu & Maruthur Panchayats. As regards iron tablets the coverage is almost similar in all the Panchayats except in Nachipalayam Panchayat.

The details of toilet facilities available in the houses and the common facilities created in the villages were collected and given in Table XIII

**Table XIII Availability of toilet facilities**

S.No.	Name of the Panchayats	Percentage of houses with toilet	No. of common toilet
1.	Somaiyampalayam	33	4
2	Nachipalayam	4	4
3	Maruthur	72	7
4	Valukkuparai	5	1
5	Madvarayapuram	40	3
6	Kalampalayam	25	1
7	Denadu	22	3
8	Kodanadu	NA	NA

It could be seen that toilet facilities in the houses are available in less than 50% of the households in the study Panchayats. There exists great variation in the percentage of houses with toilets among the Panchayats. It is as low as four and five percent respectively in Nachipalayam and Valukkuparai Panchayats to 72% in Maruthur Panchayat. This is an indication of the level of sanitation prevailing in the study villages. Among the 55 villages common toilet facilities are available only in 23 villages. The major

problem in the provision of common toilet facilities is its maintenance rather than lack of funds.

Another important issue is the provision of drainage facilities by the panchayat for the removal of drains from the houses and to prevent stagnation in some areas. Similarly to ensure sanitation it is the responsibility of the panchayats to remove garbages and put them in a distant place for further processing or convert them into manure. The data collected on the above are presented in Table - XIV.

**Table XIV details of sanitation facilities**

S.No	Name of Panchayat	Panchayats having facilities for	
		Drainage	Garbage removal
1.	Somaiyampalayam	3	3
2	Nachipalayam	4	2
3	Maruthur	5	5
4	Valukkuparai	2	1
5	Madvarayapuram	1	2
6	Kalampalayam	4	2
7	Denadu	4	2
8	Kodanadu	6	3

It could be seen from the above table that out of the 55 villages in the study panchayats drainage facilities are available only in 25 villages. Among the Panchayats, the situation is worst in Maruthur & Nachipalayam Panchayats. In these two panchayats out of ten villages in each drainage & garbage removal facilities are available only in 1 & 2 villages respectively in Maruthur panchayat and in 4 & 2 villages respectively in Nachipalayam panchayat.

Currently there is no health budget in the budget of the panchayats. Similarly there are no government programs in the villages of these panchayats for sanitation.

### **Are these Panchayats Child Friendly?**

The data collected on the various aspects of infra-structure needed to keep the Panchayats as Child Friendly are presented and discussed in the earlier pages. Now the major issue is to find out whether these Panchayats are fulfilling the child development indicators identified by the experts to declare these Panchayats as **Child Friendly**. Some of the

quantifiable indicators were taken and the extend of their presence in the Panchayats are given in the Table XV.

**Table XV - Details of Indicators and their level of Presence**

S.No.	Indicator	1	2	3	4	5	6	7	8
1	Birth Registered	✓	✓	✓	✓	✓	✓	✓	✓
2	Child Population Enumerated	✓	✓	✓	✓	✓	✓	✓	✓
3	80% Immunization coverage	✓	✓	✓	✓	✓	✓	✓	✓
4	100% Pre-school children covered under ICDS	x	✓	x	✓	x	x	✓	✓
5	100% School enrolment	✓	✓	✓	✓	✓	✓	✓	✓
6	Drop Outs returned to school	✓	✓	✓	✓	✓	✓	✓	✓
7	80% Utilization of Government programs for girls	✓	✓	✓	✓	✓	✓	N/A	N/A
8	Annual Health check up in schools	✓	✓	✓	✓	✓	✓	✓	✓
9	Drinking water & sanitation facilities in schools	✓	x	x	✓	x	✓	✓	X
10	Annual Policies for children at Panchayat level	X	X	X	X	X	X	X	x
11	Budget head for child development in Panchayat	X	X	X	X	X	X	X	X
12	Extended Immunization Program	X	✓	✓	X	x	✓	X	X
13	Awareness program on environmental practices	Drainage and garbage removal - partial coverage							

**Note:**

1. Columns with Sl. No. 1 to 8 indicate the names of Panchayats in the order as given in the earlier tables.

2. N/A indicates **Not available**.

It could be seen from the above table that most of the child development indicators identified are in practice in the studied Panchayats. However, the education related indicators are looked after by the teachers of the schools whereas health related indicators are taken care by the staff of the Primary Health centers and Anganwadies. In the case of coverage of pre-school children by the ICDS Program and provision of drinking water and sanitation facilities in the schools, the achievements are not encouraging. Some of the schools in the villages lack this most important facility. In the case of coverage of pre school children by the ICDS program, it was found that all the pre-school children are enrolled either with the Balwadies or with private nursery schools, depending upon the income of the family.

What is of grave importance is that currently the Panchayat Raj institutions, the chief governing structure have no role to play with the functioning of the educational and health institutions functioning in their area focusing on children. Further, currently the Panchayats have no policy for child development in their agenda. Similarly, there is no budget provision for educational/health development of the children in the villages. If one looks into the environmental condition of the villages, the position is not satisfactory with regard to drainage facility and garbage removal. Though the children in the villages of these Panchayats have access to education and health facilities, the environment in which they live, is not good. Similarly, their linkage with the social activity is also limited. The Panchayats should prepare an integrated development plan for meeting the educational, health, sanitation, environment and societal needs of their children and implement the plan with the Panchayats outlay.

### **Conclusion:**

Government policy on **Health for All** emphasizes the importance of immunization and maternal and childcare. The higher human development index for Tamil Nadu is mainly due to the achievements made in the field of education. Child development has to take into account social, physical and cognitive development of the children. There are many factors that influence child development. An understanding of child development is not only important for the parents but also for the teachers and health care providers. To measure child development, an attempt has been made to develop relevant indicators of child development. Panchayat as local governance has a vital role in providing the needed infra-structure for promoting education, health and environment for child development. It is also necessary for the local governance to monitor their activities to achieve the holistic development of children and to make the Panchayat as Child Friendly.

Eight Panchayats, six in Coimbatore district and two Nilgris district of Tamil Nadu was selected for the study. The required data on education, health and environment were collected for all the 55 villages of the eight districts. An analysis of the data showed that most of the Panchayats have the minimum facility for education and health of the children. The environmental and sanitary conditions of the villages need improvement. Though the Panchayats fulfill some of the conditions of the set indicators, there is need for integrating the activities of the various departments by the Panchayats to make them as **Child Friendly**.