

Impact Assessment Report
**Anganwadi
Construction Project**

by Supreme Petrochem

(Project completed in F.Y. 2023-24)



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Disclaimer

- This impact assessment has been conducted in accordance with the **Companies (Corporate Social Responsibility Policy) Amendment Rules, 2021**, notified on **22 January 2021**.
- This report shall be disclosed only to authorized stakeholders in its entirety without removing this disclaimer. CSRBOX has not performed an audit and does not express an opinion or any other form of assurance. Further, the comments provided in this report are not intended to be interpreted as legal advice or opinion.
- This report contains an analysis by CSRBOX based on publications available from secondary sources and inputs gathered through interactions with the leadership team of **Supreme Petrochem Limited**, project beneficiaries, and other relevant stakeholders. While information obtained from the public domain has not been independently verified for authenticity, CSRBOX has taken reasonable care to rely on sources generally considered reliable.
- In preparing this report, CSRBOX has relied on data and information gathered through field visits, stakeholder consultations, research reports, and discussions with personnel involved in the project implementation and assessment process.

Specific to the Impact Assessment of Anganwadi Construction Program

- CSRBOX has neither conducted an audit nor a financial due diligence of the program and has not validated the financial statements or projections provided by Supreme Petrochem Limited.
- Wherever complete information was not available in the public domain, reasonable assumptions were made to interpret and present the findings.
- CSRBOX emphasizes that the realization of the outcomes and benefits discussed in this report is dependent on the continued validity of the assumptions and contextual factors on which the analysis is based. These assumptions may need to be revisited if there are changes in program implementation, regulatory requirements, or operating conditions.
- The premise of an impact assessment is based on the **objectives, outputs, and outcome indicators defined in the program design and implementation framework**. Accordingly, CSRBOX's assessment framework has been designed and executed in alignment with these objectives and indicators to evaluate the program's contribution to improving Anganwadi infrastructure and early childhood service delivery.

Executive Summary



Executive Summary

Supreme Petrochem Limited (SPL), under its Corporate Social Responsibility (CSR) initiative, supported the construction of **11 Anganwadi Centers in Roha block, Raigad district, Maharashtra during FY 2022–2023**, benefiting **153 community members**. The project aimed to address the lack of adequate infrastructure in rural Anganwadi Centers by creating **safe, child-friendly spaces** that support early childhood education, nutrition, and basic health services under the **Integrated Child Development Services (ICDS)** system.

To assess the effectiveness of this initiative, **CSRBOX conducted an impact assessment using a mixed-method approach**, including surveys, stakeholder interactions, and field observations. Guided by the **IRECS evaluation framework**, the study examined the program's relevance, inclusiveness, service delivery, and sustainability, providing insights into its impact and opportunities for strengthening future interventions.

Key Findings

- **Before the intervention**, Anganwadi services were often conducted in **temporary sheds (55%) or open spaces (38%)**, and **7% reported no Anganwadi facility earlier**. Additionally, **48% stated that earlier centers lacked adequate space**, and **72% reported that the infrastructure did not meet the needs of pregnant and lactating mothers**. After construction, the centers now provide safer and more structured environments, with **97% of respondents satisfied with cleanliness and maintenance**.
- **Participation in Anganwadi services has improved significantly**. All respondents (**100%**) confirmed that their children are currently enrolled and attending the centers, while **86% reported a significant improvement in children's attendance**, indicating increased utilization of services.
- **Service delivery and infrastructure conditions have improved considerably**. Around **97% of respondents rated the quality of pre-school learning activities as very good**, and **97% confirmed the availability of functional drinking water and handwashing facilities**, supporting better hygiene and learning environments.
- **Community expectations and satisfaction levels are high**. Nearly **48% of respondents expected safer spaces along with improved education and nutrition services**, and **41% expected improvements across all aspects of Anganwadi services**. Overall, **76% of respondents reported being very satisfied with Anganwadi services**, reflecting strong community confidence in the improved facilities.

Chapter 1

Project Background and Overview



सुप्रिम पेट्रोकेम लि.
अंतर्गत बांधणी
(सौजे - चाफेव)

1. Introduction & Project Background

1.1 Project Context

Supreme Petrochem Ltd. (SPL) is a leading Indian petrochemical company engaged in the manufacture and global distribution of polystyrene and related styrenic polymers. Promoted jointly by **The Supreme Industries Ltd.** and the **Rajan Raheja Group**, the company has grown significantly since its establishment in 1995 and today exports its products to more than 100 countries worldwide.

As part of its **Corporate Social Responsibility (CSR)** initiatives, SPL supported the construction of **Anganwadi Centers during FY 2022–2023** in selected villages of **Roha block, Raigad district, Maharashtra**, namely **Waghranwadi, Pimpalwadi, Lavechiwadi, Bhapkyachiwadi, and Wasgaon**. The centers were developed to provide **permanent, safe, and functional infrastructure** for delivering early childhood education, nutrition, and basic health services under the **Integrated Child Development Services (ICDS)** program. This intervention aims to strengthen the functioning of Anganwadi Centers by creating a safe and supportive environment for children, pregnant women, and lactating mothers in the community.

1.2 Organizational Profile:

Supreme Petrochem Ltd. is promoted jointly by **The Supreme Industries Ltd.**, India's largest plastics processor, and the well diversified **R. Raheja Investments Pvt Ltd.**

The Supreme Industries Limited, founded in 1942 has been relevant with the changing times and continues to be a household name solely because of the core values that they uphold.¹

Supreme Petrochem Limited (SPL) recognizes that sustainable growth and responsible corporate conduct are integral to long-term business success. As a leading manufacturer of polystyrene and styrenic polymers in India, the company integrates environmental stewardship, social responsibility, and ethical governance into its core operations. Through its Corporate Social Responsibility (CSR) and sustainability initiatives, SPL aims to create shared value for communities, industry stakeholders, and the environment.

SPL's sustainability approach focuses on reducing environmental impact while promoting efficient resource utilization and responsible manufacturing practices. The company invests in green technologies and environmentally sound production systems, including initiatives such as **Zero Liquid Discharge (ZLD) facilities**, adoption of gases with **low ozone-depleting potential**, and the development of products that contribute to **energy efficiency in buildings**, such as Expandable Polystyrene (EPS) and Extruded Polystyrene (XPS) insulation materials. These efforts help reduce energy consumption and associated carbon emissions across the product lifecycle.²

¹ <https://supremepetrochem.com/profile/#>

² <https://supremepetrochem.com/sustainability/>

1.5 Geographical Coverage

The project facilitated the provision of **Anganwadi centers** in villages of Roha block, Raigad district, Maharashtra, namely **Waghranwadi, Pimpalwadi, Lavechiwadi, Bhapkyachiwadi, and Wasgaon**

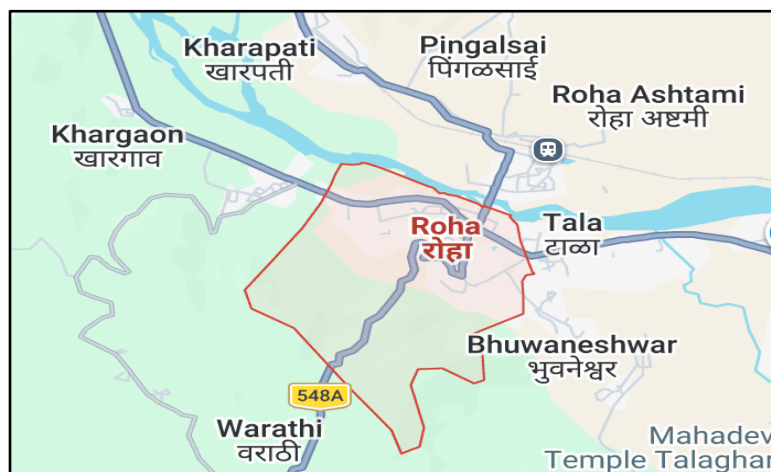


Figure 1 : Geographical Coverage

1.6 Alignment with Schedule VII

The program's intervention also aligns with Schedule VII of the Companies Act, 2013. The program aligns with the activities below:

Schedule VII and Alignment	
(i) Eradicating hunger, poverty, and malnutrition, promoting health care, including preventive health care, and sanitation	The program directly contributes to this clause by addressing accessibility. The construction of Anganwadi's ensures better hygiene and preventive health care for children and mothers.
(ii) Promoting education, including special education and employment-enhancing vocational skills, especially among children	The project strengthens early childhood education by improving preschool learning environments in Anganwadi Centres. By constructing new Anganwadi's it builds the foundation for lifelong learning and supports children's readiness for formal schooling.

<p>(iii) Promoting gender equality, empowering women, and supporting vocational skills for women</p>	<p>The initiative directly contributes to women’s empowerment by strengthening the skills, confidence, and professional capacity of Anganwadi Workers, who are women frontline service providers under the ICDS system. Improved infrastructure, organised workspaces, and access to functional facilities enable Anganwadi Workers to perform their roles more effectively and with greater confidence within their communities.</p>
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Table 1 : Alignment with Schedule VII

1.7 Alignment with ESG Framework

The program’s intervention also aligns with the ESG Sustainability Report of the corporate. Particularly with respect to the Business Responsibility & Sustainability Reporting Format (BRSR) shared by the Securities & Exchange Board of India (SEBI), the program aligns with the principle mentioned below.

<p>Principle 4</p>	<p>Businesses should respect the interests of and be responsive to all stakeholders.</p>
<p>Principle 6</p>	<p>Businesses should respect and make efforts to protect and restore the environment.</p>
<p>Principle 8</p>	<p>Businesses should promote inclusive growth and equitable development.</p>

1.8 Alignment with National Policies

The program is well aligned with key national schemes and policies that focus on early childhood care, education, and health. The major points of coherence are outlined below:

National Policies and Alignment	
Integrated Child Development Services (ICDS) Scheme	The project is closely aligned with ICDS, which is India's flagship program for early childhood care and development. By strengthening Anganwadi infrastructure, the capacity of workers, and the delivery of health, nutrition, and preschool education services, the initiative directly supports the objectives of ICDS
National Education Policy (NEP) 2020	The project is closely aligned with NEP 2020, which recognises Early Childhood Care and Education (ECCE) as a critical foundation for lifelong learning. By strengthening preschool learning environments and equipping Anganwadi workers with improved pedagogical tools, the program supports the policy's emphasis on universal access to quality ECCE by 2030.
National Health Policy 2017	The initiative supports the objectives of the National Health Policy by strengthening Anganwadi infrastructure that facilitates access to government-led preventive and promotive healthcare services for mothers and children.

Table 2 :National Policies and alignment

1.9 Alignment with Sustainable Development Goals

The SDGs, adopted by the United Nations in 2015, set a global agenda to end poverty, improve health and education, and promote sustainable development by 2030. The program contributes directly to these goals through its focus on nutrition, health, education and hygiene, ensuring that local action supports global priorities.




Alignment with Sustainable Development Goals	
	<p>The project aligns with SDG 2 (Zero Hunger) by strengthening Anganwadi infrastructure that enables access to government-led supplementary nutrition and related child development services. By providing safe and functional spaces for nutrition-related activities, the program supports the effective delivery of ICDS services in Raigad</p>
	<p>The program aligns with SDG 3 (Good Health and Well-being) by strengthening Anganwadi infrastructure that improves access to government-led health services such as immunisation and health check-ups. Safe and functional centres support frontline workers in conducting health-related activities more effectively.</p>
	<p>The project is closely aligned with SDG 4, which aims to ensure inclusive, equitable, and quality education. By improving early childhood care and education (ECCE), strengthening classroom environments, the program supports school readiness and lifelong learning opportunities for children from marginalised communities.</p>

Table 3 : Alignment with Sustainable Development Goals

1.10 Theory of Change

Activities	Outputs	Outcomes	Impact
Construction of Anganwadi Centers	<ul style="list-style-type: none"> 11 fully constructed and operational Anganwadi buildings built in the year 2022-2023 	<p>In FY 2022–2023, a total of 153 beneficiaries directly gained from Anganwadi construction, leading to improved access to services and enhanced quality of early childhood care.</p>	<ul style="list-style-type: none"> Improved early childhood development outcomes Enhancing Access to Basic Services for Disadvantaged Families
	<ul style="list-style-type: none"> Improved physical infrastructure for service delivery 		

Table 4 : Theory of change

Chapter 2

Assessment Strategy & Approach



Chapter 2: Assessment Strategy & Approach

2.1 Objective of the Impact Assessment Study

CSRBOX conducted an impact study to capture the current status of infrastructure, in the target Anganwadi's, and to establish a benchmark for measuring the project's impact.

The study includes both project and student objectives, as outlined below.

Assess the effectiveness of the program using IRECS framework

Examine the effectiveness and utility of the upgraded Anganwadi Centres in providing hygienic, safe, and engaging environment for children

Examine how effectively the projects have reached marginalized and underrepresented communities

Review the quality of design and implementation of infrastructure improvements and assess how well they align with community needs and early childhood development goals.

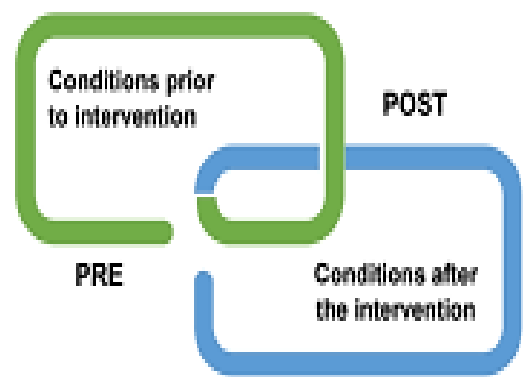
Evaluate sustainability and continuity, looking at the long-term viability of the centres, their ongoing maintenance, and their potential to serve as replicable models for early childhood care.

Assess how the program has resulted in increased level of awareness about importance of health, hygiene and education

Identify barriers and provide actionable recommendations

2.2 Study Design

The impact assessment adopts a **mixed-methods design** to capture both measurable improvements and experiential insights from beneficiaries and key stakeholders. This approach ensures a comprehensive understanding of how the Project has influenced infrastructure quality, learning environments and overall service delivery across the villages. To assess the program's contribution, the study follows a **pre-post program evaluation approach**. Beneficiaries were asked to recall and describe their experiences and service conditions before the intervention, and to compare them with the current situation after the construction of new Anganwadi's. The



differences reported provide an indicative measure of the program’s influence on improving access and utilisation. While this method offers valuable insights into progress, the study acknowledges that some changes may also be shaped by external factors beyond the program’s scope.

Therefore, the focus is on assessing the program’s contribution rather than establishing full attribution. The evaluation design adopts both **retrospective and prospective perspectives**, enabling an understanding of on-ground improvements while also identifying areas requiring further attention, learning, or strategic adjustments. It examines the program’s processes, outputs, and emerging outcomes to provide evidence-based insights for future decision-making.

2.3 Assessment Framework

To assess the inclusiveness, relevance, expectation, convergence, service delivery, and overall value of the Anganwadi construction program, the impact assessment adopted the IRECS Evaluation Framework. Guided by the program’s logic model and the criteria embedded within the IRECS framework, the evaluation examined the SPL team’s contribution to the observed changes, while recognising that multiple external factors may also influence outcomes at the community level.

2.4 Framework Indicators

To ensure a structured and comprehensive assessment of the Anganwadi infrastructure development project, a robust evaluation framework has been developed. This framework is guided by key pillars that capture both the quantitative and qualitative dimensions of the intervention, enabling a holistic understanding of its effectiveness, relevance, and sustainability.

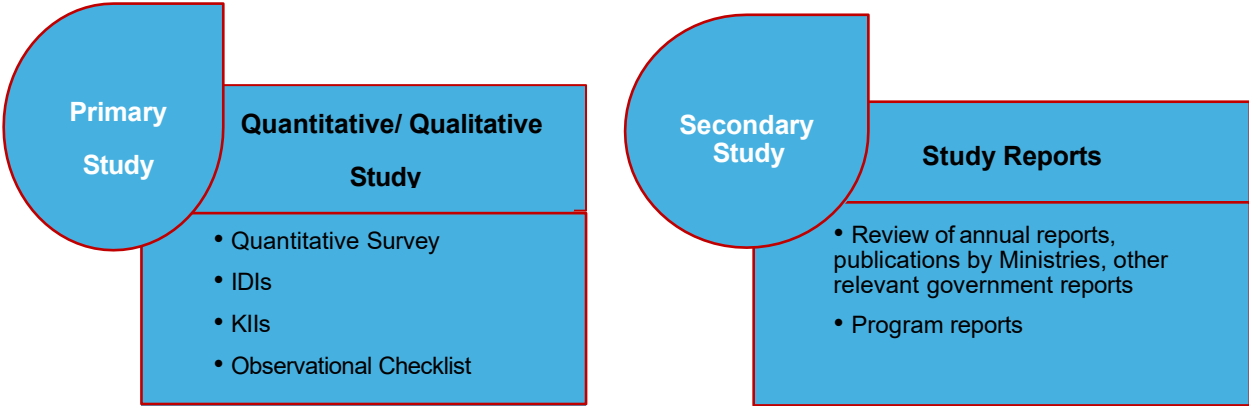
Framework Pillars	Information Indicators
Inclusiveness	<ul style="list-style-type: none"> Representation of beneficiaries across different vulnerable communities Representation of beneficiaries from disability groups.
Relevance	<ul style="list-style-type: none"> The Degree to which the project addresses the identified gaps in access to AWC services (centre's importance) Extent of accessibility features in Anganwadi buildings (e.g., ramps, toilets, child-friendly design). Beneficiaries’ and local partners’ perception of the usefulness and appropriateness of the interventions Readiness of the Centres with proposed infrastructural changes
Coherence	<ul style="list-style-type: none"> The extent to which the projects complement existing public or private sector educational schemes. Alignment with UN SDGs Alignment of Intervention vis-à-vis government policies in the aspect of ICDS policies

Expectations	<ul style="list-style-type: none"> • Extent of parents satisfied with the quality of the Anganwadi environment (safety, hygiene, space) • Extent of improvement in the hygiene status of the centres • Extent of change in enrolment and attendance rate of the children post-intervention at the AWCs. • Average satisfaction score of ICDS staff regarding improved working conditions. • Extent to which expectations of local stakeholders (PRI members, CDPO, community leaders) are met • Extent of change in awareness level about health, hygiene and education
Service Delivery	<ul style="list-style-type: none"> • Timely completion and effective resource utilisation of the project. • Maintenance and continuing utilisation of the changed AWC infrastructure • Improved retention rate of the children at the centres. • Ownership of the local government bodies in the maintenance of the centres post completion of the project.

Table 5 : Framework Indicators

2.5 Data Collection

A comprehensive two-pronged approach was adopted for the assessment, drawing on both primary and secondary data sources. This enabled a 360-degree understanding of the program’s impact across all key stakeholder groups. Primary data was collected through field visits using structured interview guides, In-Depth Interviews (IDIs), Key Informant Interviews (KIIs), and a checklist-based observation tool to capture on-ground conditions and experiences



Alongside the field assessment in **Raigad**, relevant project documents related to the **Anganwadi construction initiative** were reviewed to contextualize findings and validate field insights. These included the **project proposal, construction plans, implementation timelines, progress reports, and other supporting documentation** related to the development of the Anganwadi Centers. Together, these sources provided a comprehensive understanding of the **infrastructure development process, implementation progress, utilization of the constructed facilities, beneficiary reach, and the outcomes associated with the improved Anganwadi infrastructure.**

2.6 Sampling

2.5.1 Geographic Sampling

For the impact assessment of the Anganwadi Construction Project, villages under the **Roha block of Raigad district implemented during FY 2022–2023** were considered for geographic sampling. The villages **Waghranwadi, Pimpalwadi, Lavechiwadi, Bhapkyachiwadi, and Wasgaon** were randomly selected to ensure representation of diverse geographic and operational contexts within the project area. Anganwadi Centers located in these villages were covered as part of the assessment.

This sampling approach enabled the study to capture variations in infrastructure quality, utilization of the constructed facilities, and community engagement, while also ensuring feasibility for conducting detailed qualitative assessments and field-level observations.

2.6.2 Quantitative Sampling

A **stratified random sampling technique** was adopted to ensure adequate representation across key strata, including geography and beneficiary categories. This approach helped capture diverse experiences and perspectives of community members benefiting from the Anganwadi Centers.

The survey covered a **sample size of 48 respondents from a universe of 153 community beneficiaries for FY 2022–2023**, based on a **95% confidence level and a 10% margin of error**. This sample size provides **statistically reliable insights while maintaining operational feasibility for field data collection**. This sample will provide statistically valid insights while maintaining operational feasibility.

Year	Universe	Target sample of beneficiaries	Achieved sample of beneficiaries
2022-2023	153	48	29

Table 6 : quantitative sampling

Year	Universe	Target sample of anganwadis	Achieved sample of anganwadis
2023-2024	11	5	5

Table 7 : Anganwadi Sampling

2.6.3 Qualitative Sampling

In addition to interactions with Community beneficiaries (parents), qualitative discussions were conducted with a diverse set of stakeholders connected to the Anganwadi Construction Program. These included In-Depth Interviews (IDIs) and Key Informant Interviews (KIIs), and structured field observations. The qualitative process helped capture on-ground experiences, operational realities, and stakeholder perspectives on the functioning and outcomes of the upgraded AWCs.

Stakeholder	No of Interactions	Tool
Anganwadi workers	5	IDI
ICDS Personnel	1	IDI
CSR Head	1	KII

Table 8 : Qualitative Sampling

2.7 Limitations to the Study

- The data collection process was constrained by the limited availability of parents, as a significant proportion of households in the project villages depend on daily wage labour, resulting in their absence during survey hours.
- The presence of multiple social functions in the villages during the fieldwork period led to lower attendance of children at the Anganwadi Centres on the days of visits.
- The operational timings of the Anganwadi Centres (9:00 AM to 2:00 PM) restricted the number of centres that could be visited in a single day for data collection.
- Additionally, the Anganwadi Centres were geographically dispersed across the villages, which affected travel time and slowed the pace of field data collection.

2.8 Ethical Considerations

- During fieldwork, all participants, including Anganwadi Workers (AWWs), helpers, caregivers, and community members, were informed about the purpose of the study in simple and clear language before participation.
- Informed consent was obtained verbally or in writing, depending on the context, ensuring that participation was voluntary and participants could withdraw at any point.
- In-depth interviews were conducted in safe and comfortable settings, respecting the convenience and privacy of respondents, particularly women or caregivers.

- Participants were assured that all personal information and responses would remain confidential and that the findings would be presented only in aggregated form, without disclosing individual identities.
- The study team ensured that no harm, pressure, or discomfort was caused to participants and that the data collected would be used exclusively for research and program improvement purposes.

Chapter 3

Key Impact Findings



Chapter 3: Key Impact Findings

The section of the report highlights the key findings and insights derived from the impact assessment study based on the IRECS framework's standard parameters. These insights have been developed using a comprehensive approach to data collection, incorporating both quantitative and qualitative methods to gather information from multiple stakeholders involved in the program. The findings presented in this section are based on structured surveys, stakeholder consultations, and field observations conducted during the assessment, providing a holistic understanding of the program's implementation, utilization, and perceived benefits within the community.

3.1. Inclusiveness

Socio-Demographic Profile

The graph shows the relationship of respondents to the children enrolled in the Anganwadi Centers. **Fathers constitute the largest proportion of respondents (31%), followed by mothers (28%) and grandparents (27%),** while other caregivers account for 14%. This distribution indicates that the responses were gathered from a diverse group of family members involved in childcare, providing varied household perspectives on the functioning and benefits of the Anganwadi Centers.

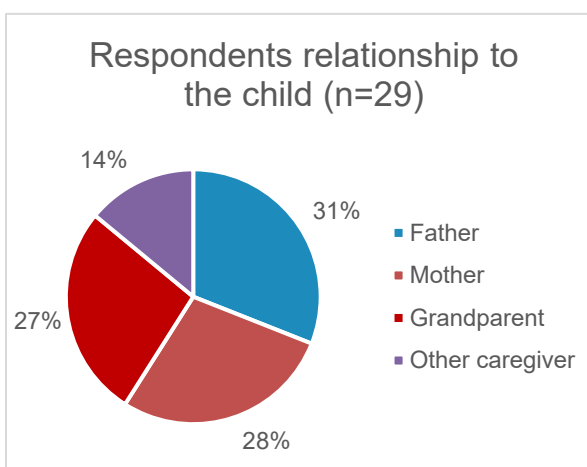


Figure 2: Respondents relationship to the child

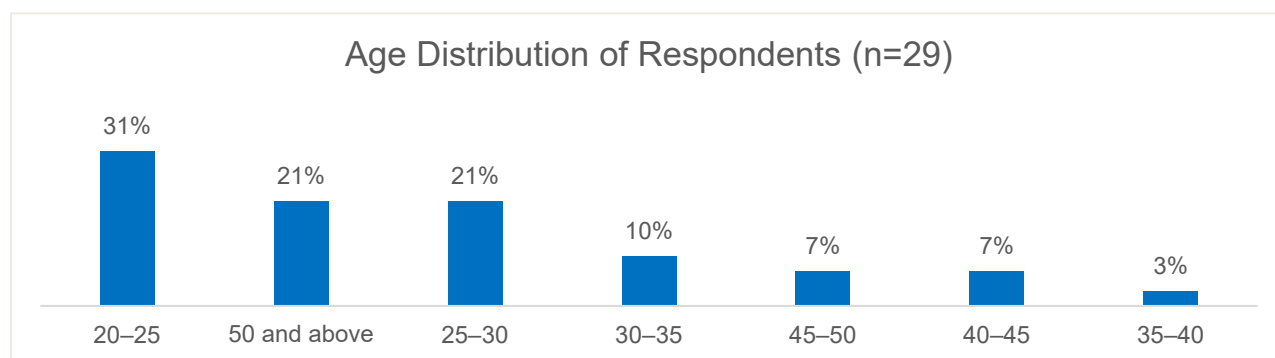


Figure 3: Age Distribution of Respondents

The graph presents the age distribution of respondents participating in the survey. The largest proportion of respondents (31%) falls within the 20-25 age group, followed by 25-30 years and 50 years and above, each accounting for 21% of the sample. Smaller proportions are represented

by other age groups. This distribution indicates that **most respondents belong to the young adult and middle-aged groups, who are typically responsible for childcare** and are directly engaged with the services provided by the Anganwadi Centers.

The age distribution of enrolled children shows that a majority (**69%**) fall within the **0–3 years age group**, while **31%** are between **3–6 years**. This pattern indicates that Anganwadi services are reaching younger children at an early stage of development, highlighting the center’s role in supporting early childhood care, nutrition, and foundational learning during the critical initial years of growth.

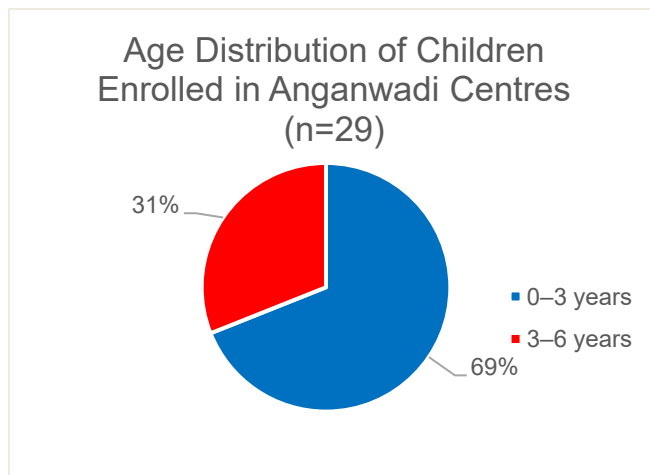


Figure 4 : Age Distribution of Children Enrolled in Anganwadi Centers

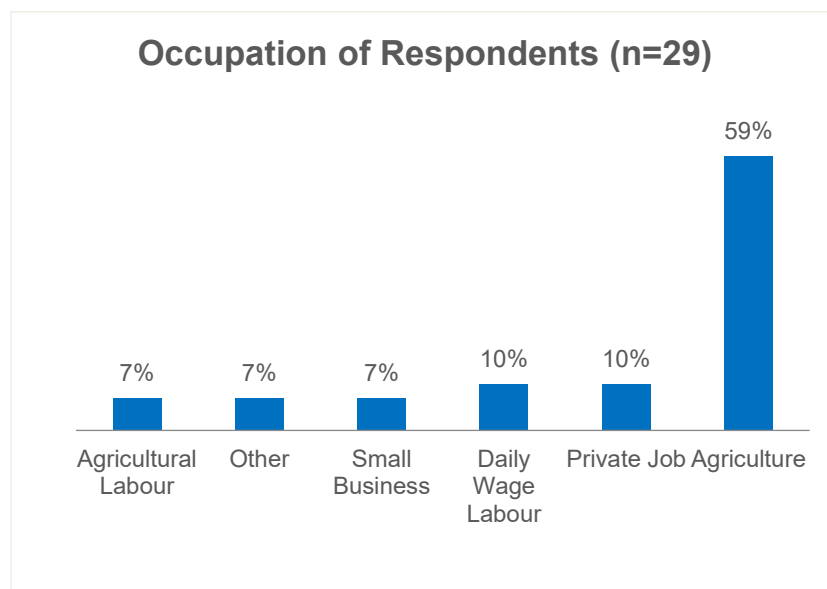


Figure 5 : Occupation of Respondents

a Most fathers of children enrolled in the Anganwadi Centers are engaged in agriculture, accounting for 59% of respondents, indicating that farming is the primary livelihood in the community. A smaller share of respondents work as daily wage laborers and in private jobs (10% each), while others are involved in agricultural labor, small businesses, and other occupations (7% each). This pattern highlights the predominantly rural economic structure of the surveyed households.

Further, **all respondents (100%) reported owning their houses, with household incomes below ₹50,000 per month**. The **(100%) respondents also belong to Scheduled Caste and Scheduled Tribe (SC/ST) communities**, indicating that the program primarily serves socially and economically vulnerable groups within the region.

“Children are now more enthusiastic about coming to the Anganwadi center and actively participating in learning activities. Earlier, when there was no proper building, they often wanted to go home early and showed less interest in daily activities.”

- Waghranwadi – Anganwadi Worker

The educational background of parents shows that a considerable proportion have completed schooling up to the secondary level. Among mothers, 36% have completed secondary education (Class 6–10), followed by 25% who have attained higher secondary education (Class 11–12). Similarly, fathers also show a comparable trend, with 38% having completed secondary education and 24% reaching higher secondary level. A smaller proportion of parents reported primary education or no formal education. Overall, the distribution indicates that most parents possess basic to moderate levels of education, which can influence their awareness and engagement with early childhood education, health, and nutrition services provided through the Anganwadi Centers.

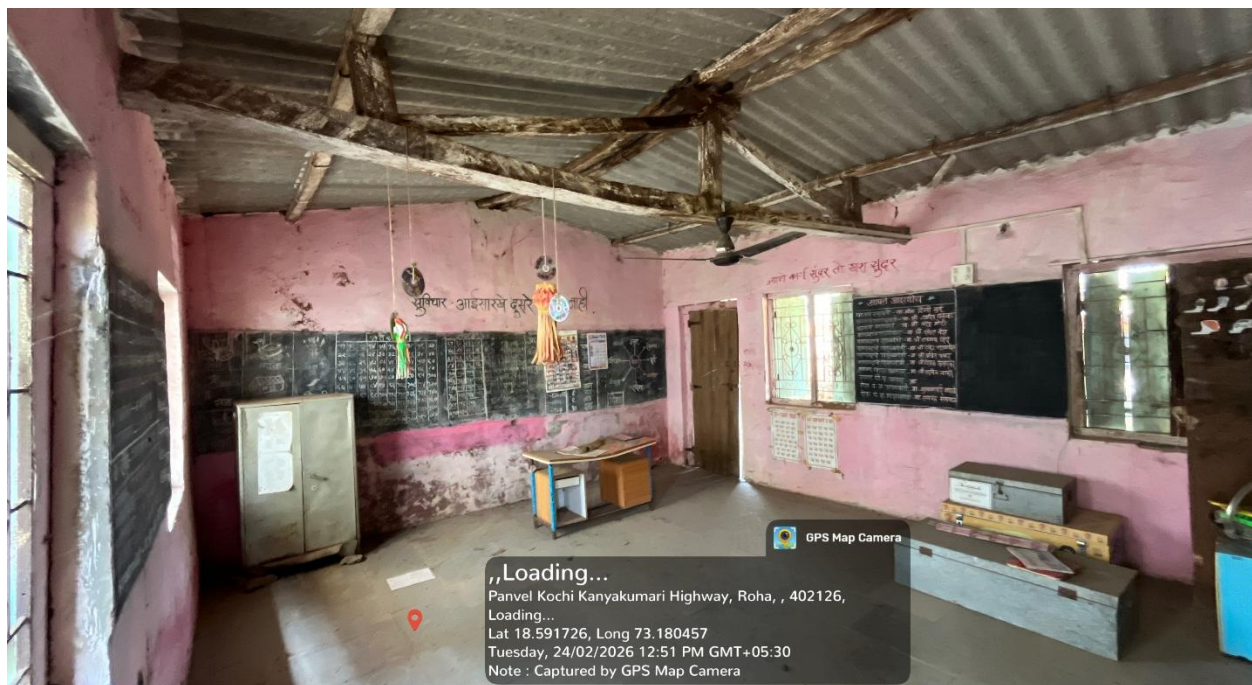


Figure 6 : Bhapyachiwadi old Anganwadi

Educational Attainment of Children's Fathers (n=15)

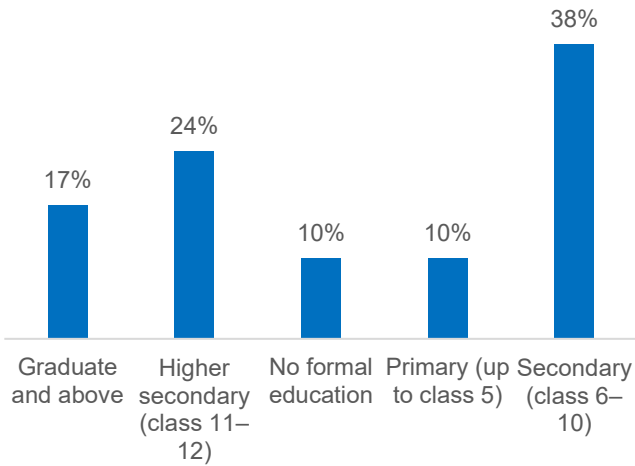


Figure 7 : Educational Attainment of Children's Fathers

Education Level of Mothers of Enrolled Children (n=29)

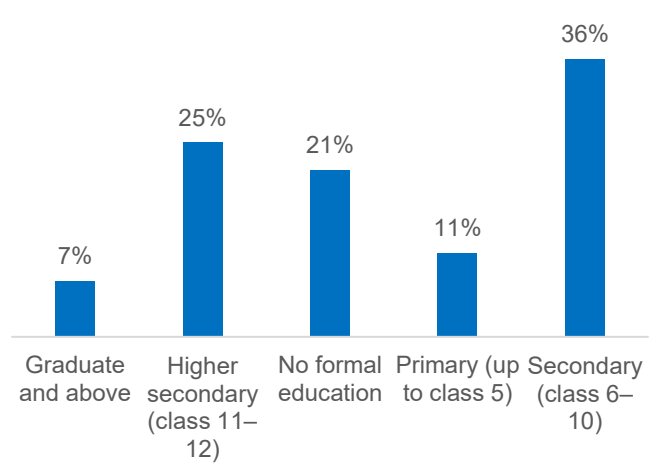


Figure 8 : Education Level of Mothers of Enrolled Children

Housing conditions among the surveyed households vary across different types of structures. A **majority of respondents (42%)** live in semi-pucca houses, followed by **34% residing in pucca houses** and **24% in kutcha houses**. This distribution indicates mixed housing conditions within the community and reflects varying levels of household infrastructure among the respondents.

Type of Housing of Respondents (n=29)

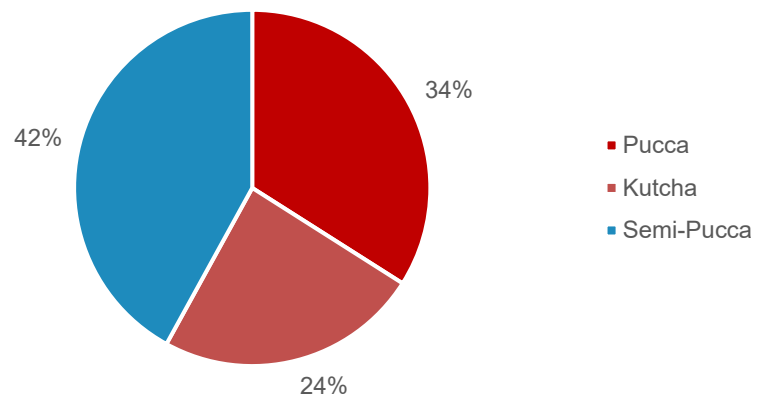


Figure 9 : Type of Housing of Respondents

“Activities such as immunization and health checkups are easier to organize in Anganwadi centers that have independent buildings. Dedicated infrastructure helps us to conduct health service more effectively”
 - ICDS Member

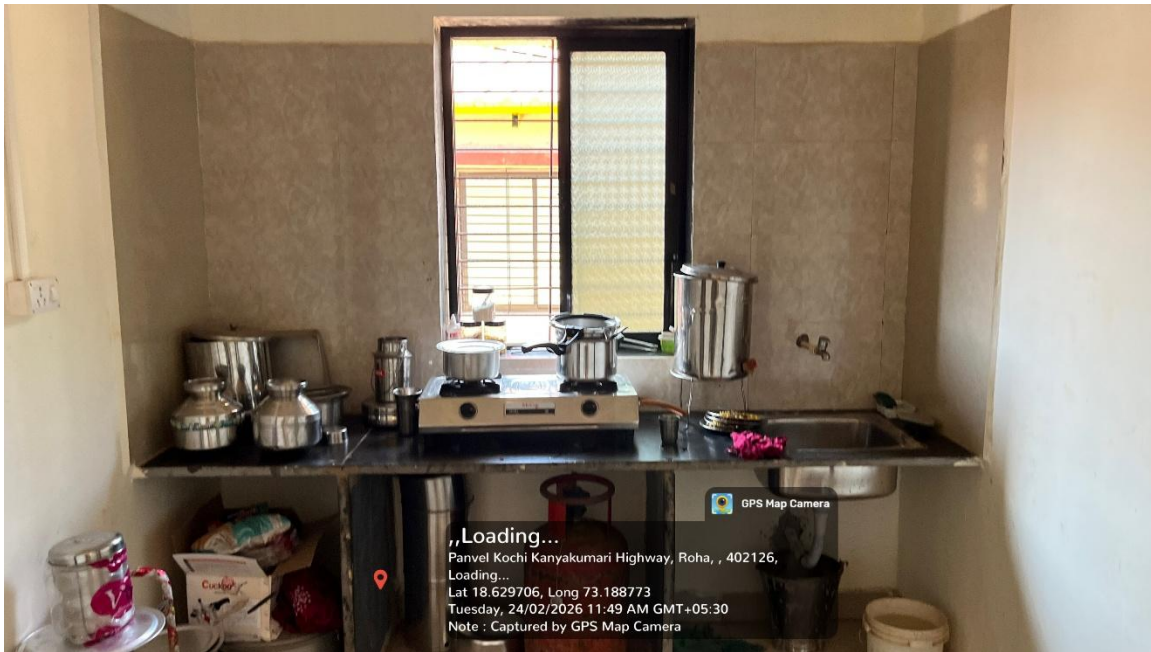


Figure 10 : Tadgoan Anganwadi kitchen

3.2 Relevance

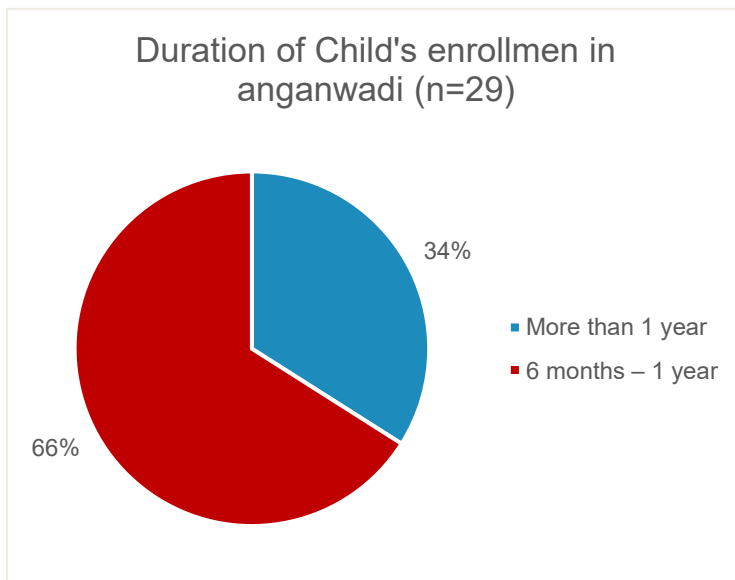


Figure 11 : Child's Anganwadi attendance duration

Children's participation in Anganwadi services reflects sustained engagement from families in the community. Most **children (66%)** have been attending the centers for **6 months to 1 year**, while **34% have been enrolled for more than one year**. This pattern indicates that **families are actively utilizing Anganwadi services** and that children are consistently accessing early childhood care and learning opportunities provided at the centers.

Findings indicate strong participation of families in Anganwadi services. **All respondents (100%) confirmed that their children are currently enrolled and regularly attending the Anganwadi center**, reflecting consistent utilization of services and the center's important role in supporting early childhood care, learning, and nutrition in the community. Additionally, **all respondents (100%) reported that children from different religions and caste groups attend the center**,

highlighting the inclusive and equitable nature of the Anganwadi as a shared community space for families from diverse social backgrounds.



Figure 12 : Wagheranwadi Anganwadi Students

Many respondents indicated that the earlier Anganwadi centres lacked adequate space for children's activities. Nearly **48%** reported that the previous centres did not have sufficient space, while **31%** felt that space was available only to some extent. Only **21%** stated that the earlier Anganwadi centres had adequate space for children. These findings point to clear infrastructural limitations in the previous facilities and highlight the importance of establishing dedicated and spacious Anganwadi buildings to support safe learning and play environments for children.

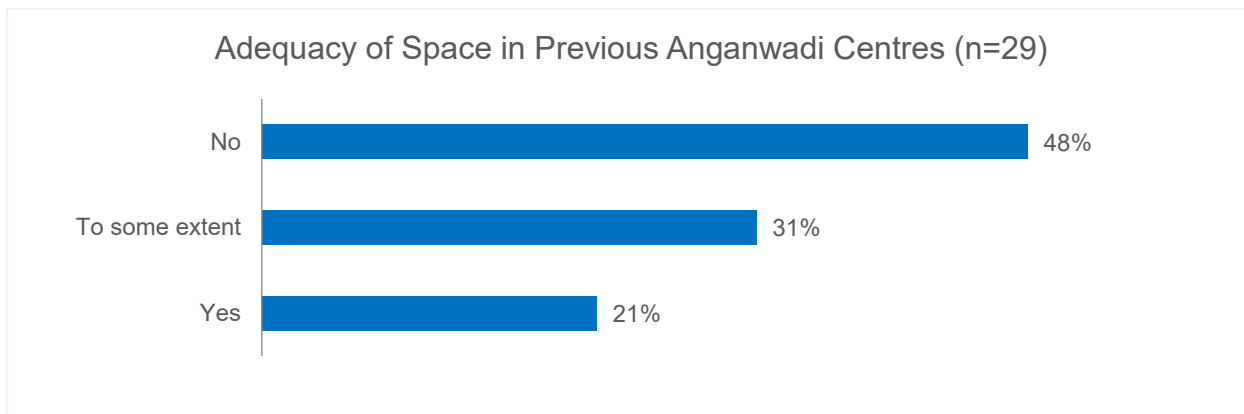


Figure 13 : Availability of Safe Space for Children in Previous Anganwadi Centers

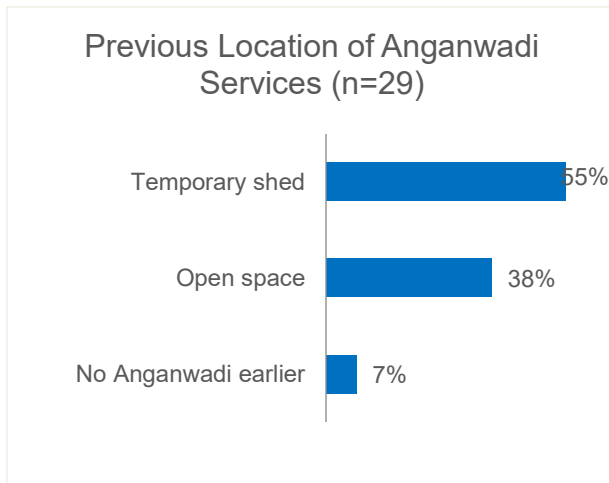


Figure 14 : Previous Location of Anganwadi Services

Before the construction of dedicated Anganwadi buildings, services were often delivered in temporary or inadequate spaces. A majority of respondents (55%) reported that Anganwadi activities were conducted in **temporary sheds**, while 38% indicated that services were held in **open spaces**. Additionally, 7% mentioned that there was **no Anganwadi facility earlier** in their area. These findings highlight the infrastructural constraints faced by earlier Anganwadi services and underline the importance of establishing proper centers to ensure a safe and structured environment for children and beneficiaries.

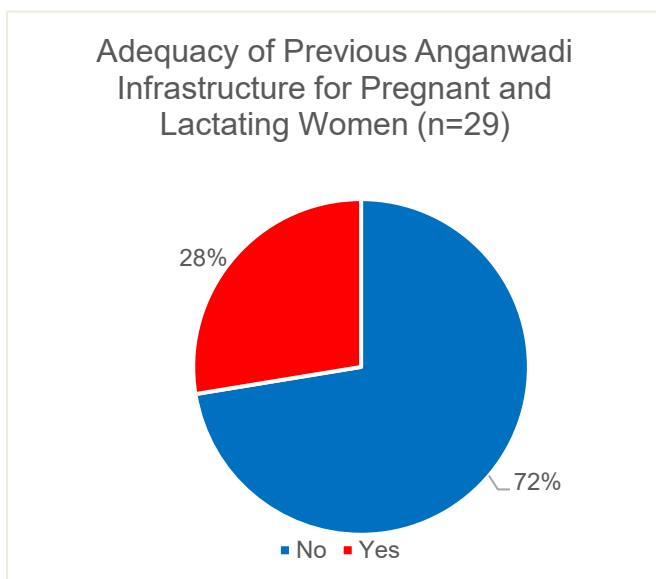


Figure 15 : Adequacy of Previous Anganwadi Infrastructure for Pregnant and Lactating Women

Responses indicate that the earlier Anganwadi infrastructure was largely inadequate in addressing the needs of pregnant women and lactating mothers. A significant proportion of respondents (72%) reported that the previous facilities did **not** meet their needs, while only 28% felt that the infrastructure was adequate. These findings highlight the limitations of the earlier Anganwadi setup in supporting maternal health and nutrition services, underscoring the importance of improved infrastructure to better cater to the needs

“ The new Anganwadi activities were conducted in temporary or limit spaces, with new building children now have comfortable space to learn and play, and parents are more willing to send their children regularly”

- Anganwadi Worker

3.4. Coherence

The coherence of the programme is assessed by examining how well it aligns with other ongoing interventions in the country.

Alignment with National Policies

The programme is well aligned with key national schemes and policies that focus on early childhood care, education, and health. The major points of coherence are outlined below:

Alignment with National Policies	
Integrated Child Development Services (ICDS) Scheme	The project is closely aligned with ICDS, which is India's flagship programme for early childhood care and development. By strengthening Anganwadi infrastructure, the capacity of workers, and the delivery of health, nutrition, and preschool education services, the initiative directly supports the objectives of ICDS.
National Education Policy (NEP) 2020	The project is closely aligned with NEP 2020, which recognises Early Childhood Care and Education (ECCE) as a critical foundation for lifelong learning. By strengthening preschool learning environments and equipping Anganwadi workers with improved pedagogical tools, the programme supports the policy's emphasis on universal access to quality ECCE by 2030.
National Health Policy 2017	The initiative supports the objectives of the National Health Policy by strengthening Anganwadi infrastructure that facilitates access to government-led preventive and promotive healthcare services for mothers and children.

3.3. Expectation

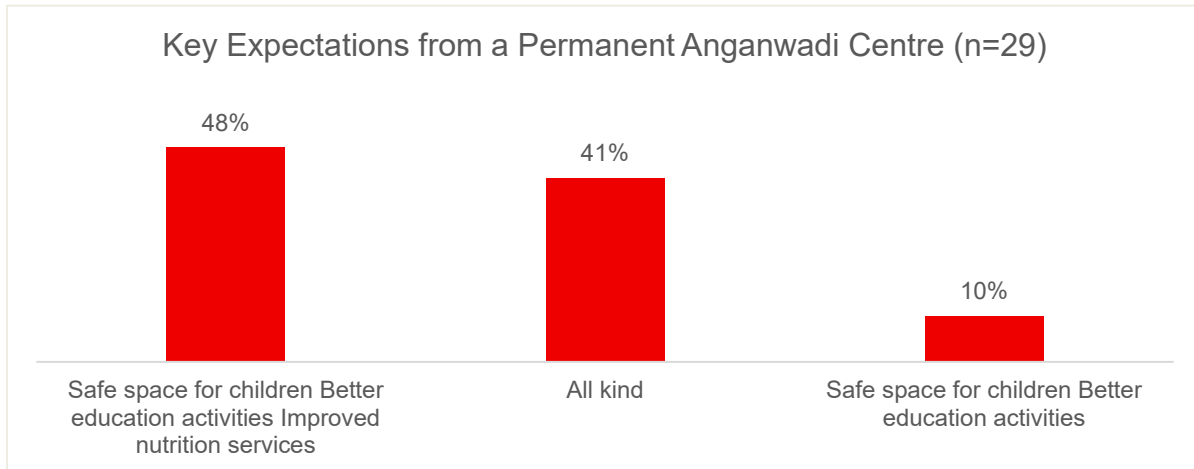


Figure 16 : Key Expectations from a Permanent Anganwadi Centre

The responses reveal that community members associate a permanent Anganwadi building with improvements across multiple aspects of early childhood services. Nearly **48% of respondents expected the new infrastructure to ensure a safe space for children along with better educational activities and improved nutrition services**, indicating the importance placed on creating a holistic environment for child development. Additionally, **41% of respondents selected “all of the above,”** reflecting the community’s expectation that a permanent facility should simultaneously enhance safety, learning opportunities, and nutritional support. A smaller share (**10%**) emphasized improvements in **safe spaces and educational activities**.

Overall, these responses suggest that the community views the establishment of a permanent Anganwadi building not merely as an infrastructure upgrade but as a critical step toward strengthening the quality and effectiveness of early childhood care, education, and nutrition services within the village.

The feedback from respondents reflects a highly positive perception of the newly constructed Anganwadi building. A large majority (**89.66%**) indicated that the new infrastructure has **fully met their expectations**, particularly in terms of improved safety, comfort, and better access to Anganwadi services. A smaller proportion (**10.34%**) felt that the building has **partially met their expectations**, suggesting that while the infrastructure has brought noticeable improvements, certain facilities or services could still be strengthened.

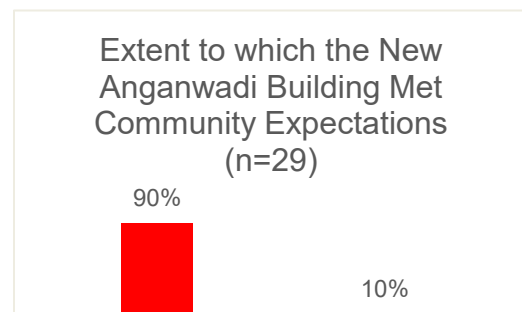
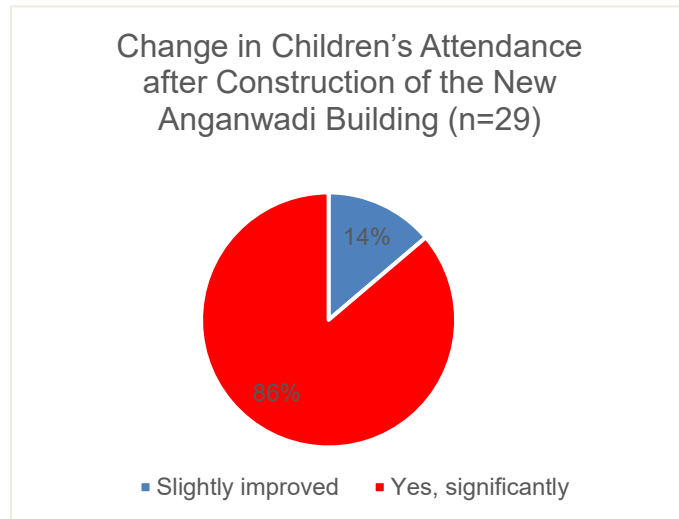


Figure 17 : Extent to which the New Anganwadi Building Met Community Expectations

Overall, the responses suggest that the new Anganwadi building has significantly enhanced the service environment for both children and community members.



The introduction of the new Anganwadi building appears to have positively influenced children's attendance at the center. A substantial proportion of respondents (**86%**) stated that attendance has **significantly improved**, while **14%** reported a **slight improvement**. This trend suggests that the improved infrastructure and better learning environment have encouraged greater and more consistent participation of children in Anganwadi activities.

Figure 18 : Change in Children's Attendance after Construction of the New Anganwadi Building

The findings reflect a very high level of satisfaction among respondents regarding the cleanliness and maintenance of the Anganwadi building. A large majority (**97%**) reported being **very satisfied**, while a small proportion (**3%**) indicated that they were **somewhat satisfied**. This suggests that the newly constructed Anganwadi building is being maintained well and provides a clean and hygienic environment for children and beneficiaries.

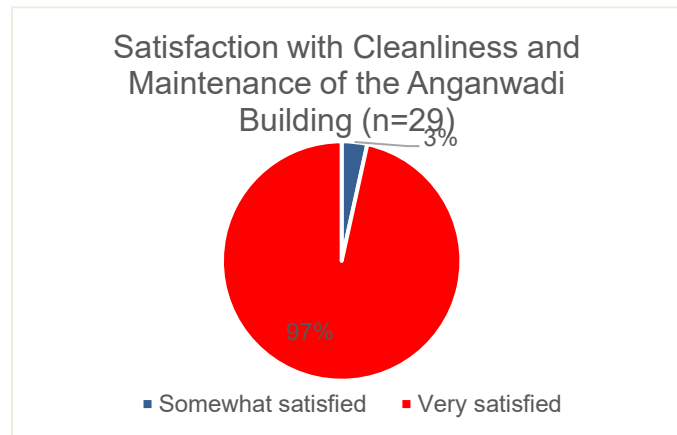


Figure 19: Satisfaction with Cleanliness and Maintenance of the Anganwadi Building

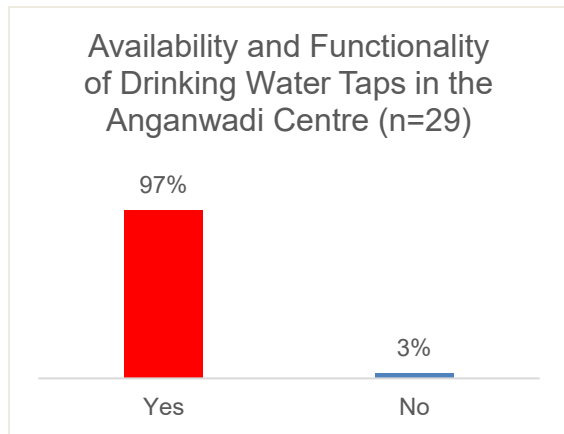


Figure 21: Availability and Functionality of Drinking Water Taps in the Anganwadi Centre

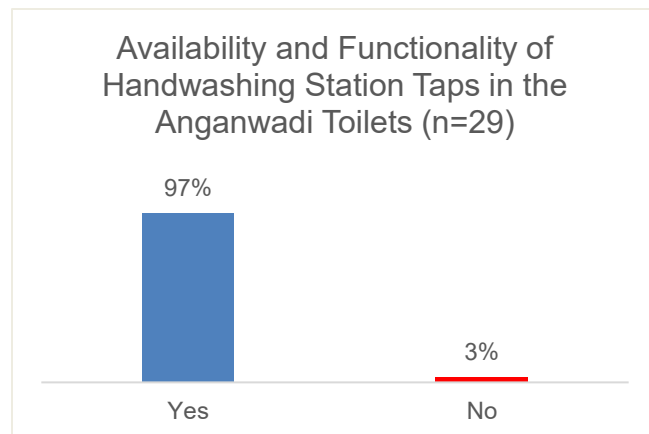


Figure 20 : Availability and Functionality of Handwashing Station Taps in the Anganwadi Toilets

The **availability of functional drinking water and handwashing facilities** at the Anganwadi center reflects an important improvement in the infrastructure supporting children’s health and hygiene. A significant majority of respondents (**97%**) confirmed that **drinking water taps are present and functional**, while only **3%** reported otherwise. Similarly, **97% of respondents stated that handwashing station taps in the toilets are available and functional**, with just **3%** indicating their absence or non-functionality. These findings highlight that the Anganwadi center is well-equipped with essential water and sanitation facilities, which contribute to promoting **better hygiene practices, a safer environment, and improved well-being for children and beneficiaries.**

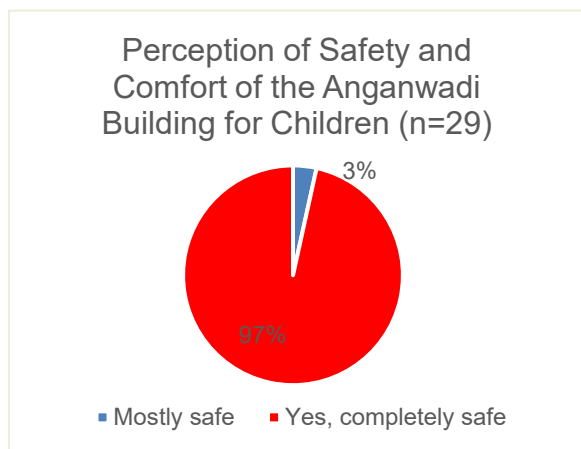


Figure 22 : Perception of Safety and Comfort of the Anganwadi Building for Children

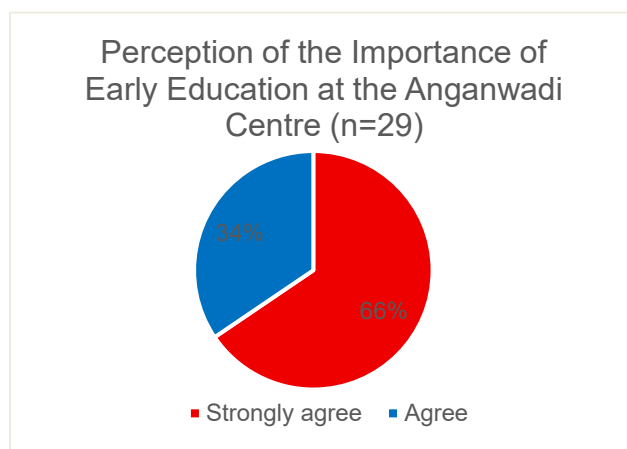


Figure 23 : Perception of the Importance of Early Education at the Anganwadi Centre

The responses highlight strong community confidence in the role of Anganwadi centers in supporting early childhood development. A large majority of respondents (**65%**) **strongly agreed** that early education at the Anganwadi center is important for children, while the remaining **35% agreed**, indicating unanimous recognition of the value of early learning during formative years.

Alongside the importance of education, perceptions regarding the **safety and comfort of the Anganwadi building** were also highly positive. Nearly **97% of respondents reported that the building is completely safe for children**, while **3% considered it mostly safe**. Together, these findings suggest that the improved Anganwadi infrastructure not only provides a secure and comfortable environment but also strengthens community trust in the center as an important space for children’s early learning and development.

3.4. Service Delivery

The quality of pre-school learning activities at the Anganwadi center received highly positive feedback from respondents. A vast majority (**97%**) rated the learning quality as **very good**, indicating that the activities effectively support early childhood development and meet the needs of children attending the center. A small proportion (**3%**) rated the quality as **good**, suggesting that while the learning environment is already strong, there may still be minor areas for enhancement. Overall, these responses reflect a high level of satisfaction with the pre-school education provided at the Anganwadi center.

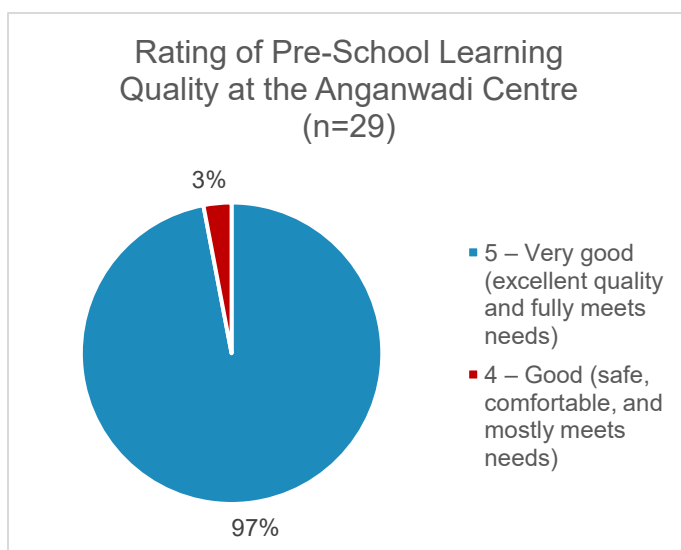
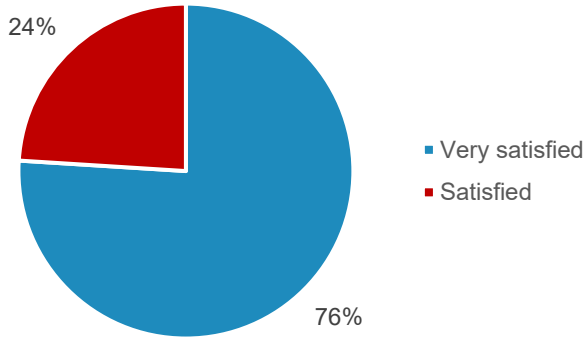


Figure 24 : Rating of Pre-School Learning Quality at the Anganwadi Centre

Overall satisfaction with Anganwadi services (n=29)



The overall perception of Anganwadi services among respondents is highly positive. A majority of respondents (**76%**) reported being **very satisfied** with the services provided at the center, while **24%** indicated that they are **satisfied**. These responses suggest that the Anganwadi center is effectively meeting the needs of children and families, reflecting a high level of trust and appreciation for the services delivered.

Figure 25: Overall satisfaction with Anganwadi Services



Figure 26 : Pimplwadi class room

Chapter 4

Impact Stories



Chapter 4: Impact Stories

Impact Story 1: A New Beginning for Learning in Lavechiwadi

In the small village of **Lavechiwadi**, the Anganwadi center has long been a crucial space for early childhood care and development. **Leading this center is Mansi Mangesh**, an Anganwadi worker who has been dedicatedly serving her community for the past **9 years**.

For years, Mansi carried out her responsibilities in **challenging conditions**. The earlier Anganwadi setup lacked even the most basic infrastructure **there was no proper seating arrangement, and the space was neither safe nor conducive for children**. Conducting daily activities, managing young children, and delivering essential services like nutrition and early education became a struggle. The absence of a secure and structured environment often affected both **children's participation and the efficiency of service delivery**.

However, this situation changed significantly with the **construction of the new Anganwadi building**. Today, the center stands as a **safe, spacious, and child-friendly environment**. The new building provides **ample space for children to sit, learn, and play comfortably**, transforming the overall learning experience. With improved infrastructure, Mansi is now able to **carry out her activities more efficiently and effectively**, ensuring better engagement with the children.

Currently, the Anganwadi caters to **10 children**, all of whom benefit from a **secure and nurturing environment** that supports their early development. The improved space has not only enhanced children's participation but has also **strengthened the confidence and motivation of the Anganwadi worker**.



Impact Story 2: Bringing Services Closer: A Story from Bhapkyachiwadi

In **Bhapkyachiwadi under Kondgaon Group Gram Panchayat**, the Anganwadi center plays a vital role in supporting early childhood care and community well-being. **Serving as the Anganwadi worker, Pooja P** has witnessed a remarkable transformation in how services are delivered in her village.

Earlier, the Anganwadi operated under extremely **challenging and inadequate conditions**. There was **no proper building**, and activities were conducted **under a tree or in open spaces**. During the rainy season, this became even more difficult, disrupting daily activities and affecting children's attendance. The lack of a safe and structured environment made it hard to provide consistent early childhood education and nutrition services.

Adding to these challenges, the earlier Anganwadi location was **situated far downhill**, making it difficult for children and parents to access the center. Due to this **long distance and inconvenient location**, many parents were reluctant to send their children regularly.

Pooja also faced operational difficulties. She had to **prepare meals at her own home**, which was located far from the Anganwadi. Managing cooking, transporting food, and handling center activities single-handedly became a significant burden, especially as she was working **without adequate support**.

However, with the **construction of the new Anganwadi building**, the situation has improved significantly.

Today, the center is located in a **more accessible and convenient area**, making it easier for children and parents to reach. The new building provides a **safe, spacious, and organized environment**, enabling smoother functioning of daily activities. It has also made it easier to conduct **ICDS-related sessions for women**, improving community participation and engagement.

Although cooking is still managed from her home due to the **absence of a gas cylinder registered under the Anganwadi**, the shorter distance now allows Pooja to **easily access her home and manage food preparation efficiently** without disrupting services.

Chapter 5

Recommendations



Sr. No	Current Scenario	Recommendations
1	Earlier Anganwadi services were conducted in temporary sheds (55%) and open spaces (38%) , limiting safe learning and service delivery.	<ul style="list-style-type: none"> - Continue supporting construction of permanent Anganwadi infrastructure in underserved villages. - Ensure centres are equipped with basic facilities such as electricity, water supply, and sanitation.
2	Improved infrastructure has led to higher participation, with 100% enrolment and 86% increase in attendance , indicating strong utilisation.	<ul style="list-style-type: none"> - Strengthen pre-school learning through activity-based teaching methods and additional Teaching and Learning Materials (TLM). - Provide age-appropriate play equipment to enhance early childhood development.
3	While hygiene conditions are good, regular maintenance of WASH facilities is essential for sustainability.	<ul style="list-style-type: none"> - Establish routine monitoring and maintenance systems for drinking water and handwashing facilities. - Promote hygiene awareness among children and caregivers through regular activities.
4	Community satisfaction with Anganwadi services is high (76% very satisfied), indicating strong trust in the centres.	<ul style="list-style-type: none"> - Encourage community participation and Gram Panchayat involvement in maintaining the centres. - Conduct periodic awareness sessions on nutrition, health, and early childhood education to strengthen engagement.

Table 9 : Recommendations

Observational Checklist – Anganwadi Centers (FY 2022–23)

A. Infrastructure & Building Condition

- Availability of **permanent Anganwadi building**
- Structural condition of building (**good / satisfactory / poor**)
- Adequate **internal space for activities**
- Proper **roofing, flooring, and ventilation**
- Presence of **designated kitchen space**

B. Accessibility & Location

- Center located in an **accessible area**
- **Unobstructed entry** to the building

C. Cleanliness & Maintenance

- Overall **cleanliness of premises**
- Clean and usable **toilet facilities**

D. Water, Sanitation & Hygiene (WASH)

- Availability of **functional drinking water facility**
- Availability of **handwashing stations**
- **Functional toilets for children and staff**

E. Safety & Child-Friendly Environment

- Premises are **safe and secure for children**
- Adequate **lighting and ventilation**
- Child-friendly **learning and play environment**

F. Space for Service Delivery

- Adequate space for:
 - **Pre-school learning activities**
 - **Nutrition distribution**
 - **Health services (immunization, check-ups)**

Summary table

Component	Observation Status	Remarks
Infrastructure Quality	Good	Permanent, well-constructed buildings available
Accessibility	Good (Minor Gap)	Accessible locations but lack of ramps
Cleanliness & Maintenance	Very Good	Premises clean and well-maintained
WASH Facilities	Functional	Drinking water and handwashing facilities available
Safety & Environment	Highly Safe	Child-friendly and secure environment
Space Availability	Adequate	Sufficient for preschool and ICDS services
Service Delivery Support	Effective	Infrastructure supports structured service delivery

Table 10 : Summary table

Annexures

Field observations across the Anganwadi Centers indicate that the newly constructed buildings provide **safe, functional, and well-maintained infrastructure** for delivering early childhood services. All centers are in accessible areas with **internal access roads and unobstructed entry to the buildings**, and the surrounding premises were generally found to be **clean and safe for children and community members**. The overall building configuration appears suitable for Anganwadi operations, with layouts that support preschool activities and service delivery under the ICDS program.

The infrastructure across centers shows **consistent design features**, including standard building dimensions and adequate internal space for conducting Anganwadi activities. However, the observations also highlight a **minor gap in accessibility infrastructure**, as ramps for wheelchair or stroller access were not available in several centers. Despite this, the centers overall provide **improved physical environments compared to earlier temporary or open-space facilities**, supporting safer learning spaces, better hygiene conditions, and more structured service delivery for children, pregnant women, and lactating mothers.

Please find [here](#) the observational checklists for each Anganwadi for the year 2022-23



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