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EDITORIAL ANALYSIS

Invest Dignity-First for Anganwadis

 ECONOMIC TIMES

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SOCIAL ISSUES ·

GS2

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Invest Dignity-First for Anganwadis

 The Economic Times

24 August 2026

GS2



INTERVIEW ANGLE

"An Anganwadi worker is called an honorary worker and paid an honorarium, which is what keeps her outside minimum wage law. Is that classification a description of her work, or a way of pricing it?"

Source: [Original editorial](#)

The Economic Times



Every fact web-verified against primary sources

THE LIFT LINE

India is about to modernise 1.4 million Anganwadi centres. The person who will run each one is classified as an honorary worker and paid an honorarium. Buildings are the easy part.

WHY THIS EDITORIAL MATTERS FOR YOUR EXAM

ICDS is among the most examined schemes in GS2, and the frontline-worker question connects it to labour, gender and administrative capacity in one move. The “dignity-first” framing is also a usable phrase for a Mains answer on scheme delivery.

GS Paper 2: Welfare schemes for vulnerable sections; issues relating to development and management of social sector services relating to health, education and human resources.

BACKGROUND AND CONTEXT

The **Integrated Child Development Services** was launched in **1975** and is among the world’s largest early-childhood programmes. It delivers six services through Anganwadi centres: **supplementary nutrition, pre-school non-formal education, nutrition and health education, immunisation, health check-ups and referral services**. The last three are delivered in **convergence** with the health system.

The scheme was restructured under **Mission Saksham Anganwadi and Poshan 2.0**, which brought ICDS, the Scheme for Adolescent Girls and the Poshan Abhiyaan under a single umbrella.

Anganwadi workers are not classified as government employees. They are treated as **honorary workers** receiving an **honorarium**, a classification that has kept them outside minimum wage entitlement and much of labour law, and that has been the subject of sustained litigation and protest.

THE ANALYSIS

The editorial's argument is a delivery argument, not a spending argument. Upgrading centres into modern support hubs is capital expenditure with visible outputs — buildings, equipment, digital tools. The service, however, is produced by a person, and if that person is underpaid, overburdened with data-entry duties and without security of tenure, the upgraded centre produces the same result as the old one.

The honorarium classification is the crux, and it is doing a lot of work. Calling the role honorary characterises it as voluntary social service rather than employment. That characterisation is what keeps the cost manageable at a scale of over a million workers, and it is also what caps the quality of what can be demanded in return. Both follow from the same choice.

The gendered dimension is not incidental. Anganwadi workers are overwhelmingly women, and the honorary classification of a feminised care workforce is a recurring pattern rather than an accident of this scheme. ASHA workers sit in the same category. Any serious answer on care work in India has to name this.

What “dignity-first” would actually mean. Not merely higher honorarium, but: a defined role with a bounded set of duties rather than accumulating survey and data-entry work from every department; predictable and timely payment; and a career and grievance structure. Each of those is administratively harder than a building.

DATA AND INSTITUTIONS VAULT

PRELIMS-GRADE FACTS:

ICDS was launched in 1975; it is being restructured after about five decades.

It delivers six services: supplementary nutrition, pre-school non-formal education, nutrition and health education, immunisation, health check-ups, referral services. The last three are delivered in convergence with the health system, not by the Anganwadi worker alone.

Nodal ministry: Ministry of Women and Child Development.

The scheme now sits under Mission Saksham Anganwadi and Poshan 2.0, which merged ICDS, the Scheme for Adolescent Girls and Poshan Abhiyaan.

Poshan Abhiyaan was launched in 2018, targeting stunting, undernutrition, anaemia and low birth weight.

Anganwadi workers are classified as honorary workers paid an honorarium, not as government employees, which places them outside minimum wage entitlement.

The workforce is overwhelmingly women, as is the case for ASHA workers under the National Health Mission.

NFHS-5 (2019-21) recorded stunting in children under five at about 35.5 per cent and wasting at about 19.3 per cent, which is the outcome baseline the system is judged against.

an Anganwadi worker, an ASHA and an ANM are three different roles. The ANM (Auxiliary Nurse Midwife) is a salaried health worker; the ASHA is an accredited activist paid by performance-linked incentive under the NHM; the Anganwadi worker is an honorary worker under the WCD ministry. Conflating them is common and costly.

THE DEBATE

For prioritising infrastructure: centres in poor physical condition genuinely deter attendance, and equipment and digital tools improve monitoring and reduce leakage. These are real gains.

For prioritising workers: the binding constraint at the last mile is a person's time, training and motivation, and no amount of equipment substitutes for it. Adding digital reporting duties without adding capacity actively reduces service time.

The reconciliation the editorial proposes: harmonise the two rather than sequencing them. That is right, and it is also the expensive answer, which is why it has not happened in fifty years.

HOW TO THINK ABOUT THIS

The transferable frame is **the last-mile worker as the real unit of a welfare scheme**. Whenever you assess a delivery programme, ask who physically performs the final transaction, how they are classified, what they are paid and how many duties have accumulated on them. Scheme design tends to add responsibilities at the frontline without adding capacity, because that is the cheapest place to add them.

The same lens explains variation in performance across PDS, NHM and school midday meals.

WAY FORWARD

- ❶ **Resolve the classification question**, since honorary status is what caps both pay and what can legitimately be demanded.
- ❷ **Bound the role**. Stop accumulating survey and data-entry duties from multiple departments onto one worker, which is the main hidden cost of digitalisation at the frontline.
- ❸ **Guarantee timely payment**, since delayed honorarium is a recurring and entirely administrative failure.
- ❹ **Sequence infrastructure and human resources together**, and report outcome indicators such as stunting and wasting rather than centres upgraded.

PYQ LINKAGE AND PRACTICE

Connects to standing themes on **nutrition and malnutrition, welfare delivery, and women in the care economy**. Practice question: *“The frontline worker, not the scheme document, is the unit of welfare delivery in India. Examine with reference to the Integrated Child Development Services.”*

Source: Invest Dignity-First for Anganwadis — Ujiyari.com | Free UPSC & State PCS Editorial Analysis

• KEY ARGUMENTS AT A GLANCE

The Economic Times argues that the Government's plan to revamp the Integrated Child Development Services after fifty years, transforming Anganwadi centres into modern support hubs against malnutrition, is overdue and welcome, but that effective change hinges on resolving worker concerns, since fair pay and improved working conditions for Anganwadi workers are what determine whether upgraded infrastructure translates into delivered services.



SUPPORTING

- Genuine reform must harmonise human resources and infrastructure rather than treating them as separate budget lines, because a modernised centre staffed by an underpaid and overburdened worker delivers no more than the old one did.
- The scheme is being restructured after five decades, which makes this the rare moment when the delivery model itself, and not only its funding, is open for redesign.
- Malnutrition is the outcome the system is judged on, and outcomes at the last mile are produced by the frontline worker rather than by the building she works in.



MAINS ANSWER FRAMEWORK

QUESTION

The Integrated Child Development Services is being restructured after five decades. Examine the role of frontline worker conditions in determining whether such a restructuring succeeds. (250 words)

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