GOVERNMENT OF INDIA
MINISTRY OF WOMEN & CHILD DEVELOPMENT

RAJYA SABHA
UNSTARRED QUESTION NO. 1272
TO BE ANSWERED ON 27.07.2022

MALNUTRITION FREE BY 2022

1272. SHRI V. VIJAYASAI REDDY

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) the details of targeted interventions that the Ministry has undertaken to address malnutrition in the country;
(b) whether it is a fact that the Ministry has set a target of making India malnutrition-free by 2022;
(c) if so, the details thereof;
(d) whether any assessment has been made about the number of malnourished children under six years of age, adolescent girls, pregnant women and lactating mothers;
(e) if so, the details thereof, State-wise; and
(f) to what extent POSHAN 2.0 announced is helping to address the above issues?

ANSWER

MINISTER OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI SMRITI ZUBIN IRANI)

(a) Government has accorded high priority to the issue of malnutrition and is making serious efforts to address this issue. POSHAN Abhiyaan, a flaghip scheme of the Government was launched in 2018 to address the malaise of malnutrition by adopting a synergised and result oriented approach. Further, to address various policy and systemic needs, the Integrated Child Development Scheme and Anganwadi Services schemes were re-evaluated in respect of programme design, implementation process, outcome and impact and for re-assessing the relevance of the programme in achieving its aims and goals. The efforts under the Supplementary Nutrition Programme under Anganwadi Services, Scheme for Adolescent Girls and POSHAN Abhiyaan have been re-aligned as 'Saksham Anganwadi and POSHAN 2.0' for maximizing nutritional outcomes. It seeks to address the challenges of malnutrition in children, adolescent girls, pregnant women and lactating mothers through a strategic shift in nutrition content and delivery and by creation of a convergent eco-system to develop and promote practices that nurture health, wellness and immunity.

(b) & (c) POSHAN Abhiyaan aims to reduce malnutrition in the country by adopting a synergised and result oriented approach. The targets laid down under the Abhiyaan are as under:

S.No	Objective	Target
1.	Prevent and reduce Stunting in children (0- 6 years)	@ 2% p.a.
2.	Prevent and reduce under-nutrition (underweight prevalence) in children (0-6 years)	@ 2% p.a.
3.	Reduce the prevalence of anaemia among young Children(6-59 months)	@ 3% p.a.

4.	Reduce the prevalence of anaemia among Women and Adolescent Girls in the age group of 15-49 years.	@ 3% p.a.
5.	Reduce Low Birth Weight (LBW).	@ 2% p.a.

(d) & (e) The estimated number of underweight, malnourished and severely malnourished children under 5 years of age is obtained under National Family Health Survey (NFHS) conducted by the Ministry of Health & Family Welfare. As per the recent report of NFHS-5 (2019-21), the nutrition indicators for children under 5 years have improved as compared with NFHS-4 (2015-16). Stunting has reduced from 38.4% to 35.5%, Wasting has reduced from 21.0% to 19.3% and Underweight prevalence has reduced from 35.8% to 32.1%. Further percentage of women (15-49 years) whose BMI is below normal has reduced from 22.9 in NFHS-4 to 18.7 in NFHS-5. The State/UT wise prevalence of malnutrition among children under five years of age, and women (age 15-49 yrs) as per NFHS-5, 2019-21 is at **Annexure I, Annexure-II** respectively**.**

(f) The efforts under the Supplementary Nutrition Programme under Anganwadi Services and POSHAN Abhiyaan have been rejuvenated and converged as 'Saksham Anganwadi and POSHAN 2.0' (Mission Poshan 2.0). It seeks to address the challenges of malnutrition in children, adolescent girls, pregnant women and lactating mothers through a strategic shift in nutrition content and delivery and by creation of a convergent eco-system to develop and promote practices that nurture health, wellness and immunity.

Poshan 2.0 shall focus on Maternal Nutrition, Infant and Young Child Feeding Norms, Treatment of MAM/SAM and Wellness through AYUSH. It will rest on the pillars of Convergence, Governance, and Capacity-building. Poshan Abhiyan will be the key pillar for Outreach and will cover innovations related to nutritional support, ICT interventions, Media Advocacy and Research, Community Outreach and Jan Andolan.

Under Poshan 2.0, focus is on diet diversity, food fortification, leveraging traditional systems of knowledge and popularizing use of millets. Nutrition awareness strategies under Poshan 2.0 aim to develop sustainable health and well-being through regional meal plans to bridge dietary gaps. Strategy of Jan Andolan, was developed to strengthen convergent actions across multiple stakeholders with focus on exclusive breast-feeding, complimentary feeding, growth monitoring, prevention of diarrhoea, hygiene, water and sanitation, anemia prevention, importance of Poshan Vatikas for cultivation of local vegetables, medicinal plants/herbs and fruits at the community level, etc. Poshan Abhiyaan has provided a strong platform for targeted home visits, community-based events (CBEs) and growth monitoring with greater emphasis placed on home visits to promote maternal, infant and young child nutrition practices. More than 40 crore activities have been carried out under Poshan Maah and Poshan Pakhwada and 3.70 lakh CBEs have been conducted since the launch of the Abhiyaan. Best practices have been disseminated through zonal work-shops to address the challenges of malnutrition.

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Annexure-I

Statement referred to in reply to Part (d & e) of Rajya Sabha Un-starred Question No.1272 for 27.07.2022 by Shri V. Vijayasai Reddy regarding number of Malnourished children under six years of age.

States/UTs-wise nutritional status of children, NFHS-5, 2019-21

State/union territory	Stunted (height-for-age)[1]	Wasted (weight-for-height)[1]	Underweight (weight-for-age)[1]
India	**35.5**	**19.3**	**32.1**
Andaman & Nicobar Islands	22.5	16.0	23.6
Andhra Pradesh	31.2	16.1	29.6
Arunachal Pradesh	28.0	13.1	15.4
Assam	35.3	21.7	32.8
Bihar	42.9	22.9	41.0
Chandigarh	25.3	8.4	20.6
Chhattisgarh	34.6	18.9	31.3
Dadra & Nagar Haveli and Daman & Diu	39.4	21.6	38.7
Delhi	30.9	11.2	21.8
Goa	25.8	19.1	24
Gujarat	39.0	25.1	39.7
Haryana	27.5	11.5	21.5
Himachal Pradesh	30.8	17.4	25.5
Jammu & Kashmir	26.9	19.0	21
Jharkhand	39.6	22.4	39.4
Karnataka	35.4	19.5	32.9
Kerala	23.4	15.8	19.7
Ladakh	30.5	17.5	20.4
Lakshadweep	32.0	17.4	25.8
Madhya Pradesh	35.7	18.9	33.0
Maharashtra	35.2	25.6	36.1
Manipur	23.4	9.9	13.3
Meghalaya	46.5	12.1	26.6
Mizoram	28.9	9.8	12.7
Nagaland	32.7	19.1	26.9
Odisha	31.0	18.1	29.7
Puducherry	20.0	12.4	15.3
Punjab	24.5	10.6	16.9
Rajasthan	31.8	16.8	27.6
Sikkim	22.3	13.6	13.1
Tamil Nadu	25.0	14.6	22.0
Telangana	33.1	21.7	31.8
Tripura	32.3	18.2	25.6
Uttar Pradesh	39.7	17.3	32.1
Uttarakhand	27.0	13.2	21.0
West Bengal	33.8	20.3	32.2

Source: NFHS-5 National reports

Note:

[1] Below -2 standard deviations, based on the WHO standard

[2] Below +2 standard deviations, based on the WHO standard

Annexure-II

Statement referred to in reply to Part (d & e) of Rajya Sabha Un-starred Question No.1272 for 27.07.2022 by Shri V. Vijayasai Reddy regarding number of Malnourished women (age 15-49 yrs).

As per NFHS-5 (2019-21), %tage of women (age 15-49 yrs) whose Body Mass Index (BMI) is below normal (BMI<18.5 kg/m^2)

State	NFHS-5
	%tage of Women with BMI <18.5 kg/m^2
India	**18.7**
Andaman & Nicobar	9.4
Andhra Pradesh	14.8
Arunachal Pradesh	5.7
Assam	17.6
Bihar	25.6
Chandigarh	13.0
Chhattisgarh	23.1
Dadra Nagar Haveli and Daman & Diu	25.1
Delhi	10.0
Goa	13.8
Gujarat	25.2
Haryana	15.1
Himachal Pradesh	13.9
Jammu & Kashmir	5.2
Jharkhand	26.2
Karnataka	17.2
Kerala	10.1
Lakshadweep	8.0
Ladakh	4.4
Madhya Pradesh	23.0
Maharashtra	20.8
Manipur	7.2
Meghalaya	10.8
Mizoram	5.3
Nagaland	11.1
Odisha	20.8
Puducherry	9.0
Punjab	12.7
Rajasthan	19.6
Sikkim	5.8
Tamil Nadu	12.6
Telangana	18.8
Tripura	16.2
Uttar Pradesh	19.0
Uttarakhand	13.9
West Bengal	14.8

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