

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

RAJYA SABHA
UNSTARRED QUESTION NO. 3678
TO BE ANSWERED ON 02 April 2025

POSHAN ABHIYAAN

3678. DR. PARMAR JASHVANTSINH SALAMSINH:
SHRI TEJVEER SINGH:
SMT. MAYA NAROLIYA:

Will the Minister of Women and Child Development be pleased to state:

- (a) the steps taken to improve maternal and child nutrition under the Poshan Abhiyaan scheme;
- (b) whether there has been an assessment of the scheme's impact on malnutrition rates;
- (c) if so, details thereof; and
- (d) the new strategies implemented to enhance the effectiveness of Poshan Abhiyaan in underdeveloped regions?

ANSWER

MINISTER OF STATE IN THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI SAVITRI THAKUR)

(a) to (d): Under the 15th Finance Commission, various components like Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (of 14-18 years in Aspirational Districts and North-Eastern region) have been subsumed under the umbrella Mission Saksham Anganwadi and Poshan 2.0 (Mission Poshan 2.0) to address the challenge of malnutrition. It is a Centrally Sponsored mission, where the responsibility for implementation of various activities lies with the States and UTs. This mission is a universal self-selecting umbrella where there are no entry barriers for any beneficiary to register and receive services. This mission is being implemented across the country including underdeveloped region.

The objectives of Mission are as follows:

- To contribute to development of human capital in the country;
- Address challenge of malnutrition;

- Promote nutrition awareness and good eating habits for sustainable health and wellbeing

Under Mission Poshan 2.0 a new strategy has been made for reduction in malnutrition and for improved health, wellness and immunity through activities like community engagement, outreach, behavioral change, and advocacy. It focuses on Maternal Nutrition, Infant and Young Child Feeding Norms, treatment of Severe Acute Malnutrition (SAM)/ Moderate Acute Malnutrition (MAM) and wellness through AYUSH practices to reduce prevalence of wasting, stunting, and being underweight.

Under this mission, Supplementary Nutrition is provided to Children (6 months to 6 years), Pregnant Women, Lactating Mothers and Adolescent Girls to beat the intergenerational cycle of malnutrition by adopting a life cycle approach. Supplementary nutrition is provided in accordance with the nutrition norms contained in Schedule-II of the National Food Security Act. These norms have been revised in January 2023. The old norms were largely calorie-specific; however, the revised norms are more comprehensive and balanced in terms of both quantity and quality of supplementary nutrition based on the principles of diet diversity that provides for quality protein, healthy fats and micronutrients.

Fortified rice is being supplied to AWCs to meet the requirement of micro-nutrients and to control anaemia among women and children. Greater emphasis is being laid on the use of millets at least once a week for preparation of Hot Cooked Meal and Take Home ration at Anganwadi centers.

Ministries of Women & Child Development and Health & Family Welfare have jointly released the protocol for Community Management of Malnutrition (CMAM) to prevent and treat severely acute malnutrition in children and for reducing associated morbidity and mortality.

Under this Mission, one of the major activities undertaken is Community Mobilization and Awareness Advocacy to educate people on nutritional aspects as adoption of good nutrition habit requires sustained efforts for behavioural change. State and UTs are conducting and reporting regular sensitisation activities under Jan Andolans during Poshan Maahs and Poshan Pakhwadas celebrated in the months of September and March-April respectively. Community Based Events (CBEs) have served as a significant strategy in changing nutritional practices and all Anganwadi workers are required to conduct two Community Based Events every month.

To further enhance the efficiency of the programme, various initiatives have been taken up from time to time. Following are few initiatives undertaken recently:

- Suposhit Gram Panchayat Abhiyaan: 1000 Suposhit Gram Panchayats will be selected and an incentive of Rs. 1 Lakh each will be given to them under Suposhit Gram Panchayats Abhiyaan to motivate Gram Panchayats and Anganwadi functionaries to take proactive measures in improving nutrition through provision of incentives.
- Poshan Tracker has been implemented for monitoring and tracking of infrastructure and service delivery at Anganwadi Centres (AWCs) and beneficiaries on defined indicators.
- Face authentication module: For last mile tracking of Service Delivery, MWCD has developed two-factor authentication mechanisms for the distribution of Take Home

ration to ensure that benefit is given to the intended beneficiaries registered in Poshan Tracker. Regular follow-up is being done with States/UTs for its 100% adoption.

Various rounds of the National Family Health Survey (NFHS) conducted by Ministry of Health & Family Welfare since 1992-93 have shown improvement in malnutrition indicators in children across India. Details of these indicators for children since NFHS-1 to NFHS-5 are given below:

NFHS Survey	Stunting %	Underweight %	Wasting %
NFHS-1 (1992-93)*	52	53.4	17.5
NFHS-2 (1998-99)**	45.5	47	15.5
NFHS-3 (2005-6)***	48.0	42.5	19.8
NFHS-4 (2015-16)***	38.4	35.8	21.0
NFHS-5 (2019-21)***	35.5	32.1	19.3

* Under 4 years

** Under 3 years

*** Under 5 years

The above table gives a representative picture of malnutrition indicators among all children of 0-3 years, 0-4 years and 0-5 years age at the relevant time.

The projected population of all children up to 5 years in India for the year 2021 is 13.75 crores approximately (source: Population Projections for India and States 2011-2036, National Commission on Population, Ministry of Health & Family Welfare). However, only 7.49 crores children up to 5 years were enrolled in Anganwadis and registered on Poshan Tracker of the Ministry of Women & Child Development as per the February 2025 data. 7.25 crores of these children were measured on growth parameters of height and weight. 39.09% of them have been found to be stunted, 16.60% have been found to be underweight and 5.35% wasted.

Further, the projected population of all children in India up to 6 years for the year 2021 is approximately 16.1 crores. As per the February 2025 data of Poshan Tracker, 8.80 crores children (0-6 years) were enrolled in Anganwadis out of whom 8.52 crores were measured on growth parameters of height and weight. 37.75% of these children (0-6 years) have been found to be stunted and 17.19% children (0-6 years) have been found to be underweight.

The analysis of the above NFHS data and the Poshan Tracker data shows improvement in malnutrition indicators in children across India.

In 2021, the World Bank conducted a survey in 11 priority states (Andhra Pradesh, Bihar, Chhattisgarh, Gujarat, Jharkhand, Karnataka, Madhya Pradesh, Maharashtra, Rajasthan, Tamil Nadu and Uttar Pradesh) with the highest rates of anemia and stunting. The aim of this survey was to assess the program's delivery of nutrition services, whether the nutritional knowledge of beneficiaries had improved and if they had adopted more appropriate nutrition and feeding practices.

The findings demonstrated that the services delivered through the Poshan Abhiyaan – the receipt of relevant messages, home visits by the anganwadi worker, and attendance at community based events – were associated with improved nutrition behaviors. The survey also found that the program's nutrition messages reached more than 80% of women, and that 81% of women practiced exclusive breastfeeding for the first six months.

Further, A third party evaluation and impact assessment of Poshan Abhiyaan was conducted by NITI Aayog in 2020 and found its relevance to be satisfactory for tackling malnutrition in the country.
