

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

RAJYA SABHA
UNSTARRED QUESTION NO. 1438
TO BE ANSWERED ON 11.02.2026

POSHAN 2.0

1438. DR. K. LAXMAN:

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

- (a) The details of initiatives taken to strengthen nutrition under POSHAN 2.0 during the last three years;
- (b) The progress made in improving malnutrition indicators among children and adolescent girls; and
- (c) Whether any independent assessment has been conducted to evaluate programme's impact?

ANSWER

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

(a) to (c) To address the challenge of malnutrition, Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (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). 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 scheme open to all eligible beneficiaries, i.e., Children under 6 years of age, pregnant women, lactating mothers till 6 months after childbirth and adolescent girls (14-18 years of age) in Northeastern States and Aspirational Districts of the country. The Mission is being implemented across the country. 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, behavioural 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, anaemia and being underweight.

Supplementary Nutrition is also provided to Children (6 months to 6 years), Pregnant Women, Lactating Mothers and Adolescent Girls in accordance with the nutrition norms contained in Schedule-II of the National Food Security Act, 2013. 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 (Calcium, Zinc, Iron, Dietary Folate, Vitamin A, Vitamin-B6 and Vitamin B-12). Extra Supplementary Nutrition is provided to Severely Acutely Malnourished (SAM) children as per National Food Security Act, 2013 (NFSA).

Further, 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.

Ministry vide notification dated 12th September 2022 issued Integrated Nutrition Support Programme- Saksham Anganwadi and Poshan (2.0), Rules 2022 to regulate the entitlements specified under the provisions of National Food Security Act, 2013 for every pregnant woman and lactating mother, till six months after childbirth and every child in the age group of six months to six years.

Further, Ministry of Women & Child Development and Ministry of Health & Family Welfare have jointly released the protocol for Management of Malnutrition in Children to manage malnourished children at the community level and for reducing associated morbidity and mortality. The community-based approach involves timely detection and screening of children with severe malnutrition, management for those without medical complications with wholesome, local nutritious foods at home and supportive medical care. The protocol includes a screening process for children aged 6 months to 6 years who are severely acute malnourished (SAM) or severely underweight (SUW) for medical complications. Post-screening, children are referred to Nutrition Rehabilitation Centers (NRC) or hospital facilities for further care if medically complicated.

Poshan Vatikas or Nutri-gardens are being set up across the country to provide easy and affordable access to fruits, vegetables, medicinal plants and herbs. To encourage diet-diversity and consumption of wholesome local produce, Poshan Vatikas have been developed at AWCs.

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 Maah and Poshan Pakhwada 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.

The ‘Poshan Tracker’ application was rolled out as an important governance tool. The Poshan Tracker facilitates monitoring and tracking of all AWCs, AWWs and beneficiaries on defined indicators. Technology under Poshan Tracker is being leveraged for dynamic identification of stunting, wasting, underweight prevalence among children. It has facilitated near real time data collection for Anganwadi Services such as, opening of AWCs, daily attendance of children, ECCE activities, Growth Monitoring of children, Provision of Hot Cooked Meal (HCM)/Take Home Ration (THR-not raw ration), Growth Measurement etc. The Poshan Tracker Application data of malnutrition indicators on underweight, stunting and wasting among the children under five attending Anganwadi Centres and receiving Anganwadi services at home in the country and also the data of adolescent girls (aspirational districts and north-eastern states) for the last 3 years is available at <https://www.poshantracker.in/statistics>. The data shows consistent improvement on all the three indicators.

In 2021, a survey was conducted on Poshan Abhiyaan by the World Bank in 11 priority states. 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 assessments of Poshan Abhiyaan were conducted by NITI Aayog in 2020 as well as in 2025. They have found its relevance to be satisfactory for tackling malnutrition in the country.
