

GOVERNMENT OF INDIA
MINISTRY OF WOMEN & CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION NO. 3720
TO BE ANSWERED ON 11.08.2023

MALNUTRITION AND ANAEMIA AMONG CHILDREN

3720. SHRI HEMANT TUKARAM GODSE:
SHRIMATI DELKAR KALABEN MOHANBHAI:
SHRI GAJANAN KIRTIKAR:

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

- (a) the status of malnutrition and anaemia among children in the country vis-a-vis other countries;
- (b) the details of malnutrition and anaemia among children across the country, State-wise including Dadra & Nagar Haveli, Daman and Diu and Maharashtra;
- (c) the amount provided under the Integrated Child Development Scheme to end the problem of malnutrition and anaemia among children in Dadra & Nagar Haveli, Daman and Diu and Maharashtra during the last three years;
- (d) whether the percentage of children suffering from malnutrition-anaemia is not declining; and
- (e) if so, the steps taken by the Government to reduce the said percentage, State-wise?

ANSWER

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

(a to (c) The data on nutrition indicators in the country is captured under the National Family Health Surveys conducted periodically by the Ministry of Health and Family Welfare. As per the latest round of NFHS conducted during 2019-21 (NFHS-5), the nutrition indicators for children under 5 years have improved as compared with NFHS-4 (2015-16). The prevalence of stunting has reduced from 38.4% in NFHS-4 to 35.5% in NFHS-5, wasting from 21.0% to 19.3% and underweight from 35.8% to 32.1%. Further, as per data recorded in Poshan Tracker, ICT application for Mission Poshan 2.0, close to 7 crore children were measured in the country in the month of June 2023 as per which, 7% were wasted and 19% underweight, which is significantly lower than NFHS indicators.

The State/UT-wise data on the prevalence of malnutrition and anemia among children, including Dadra & Nagar Haveli, Daman and Diu and Maharashtra is **annexed**.

During the last three years (FY 2020-21, 2021-22 and 2022-23), an amount of Rs. 1265.42 lakh has been released to Dadra & Nagar Haveli and Daman and Diu and Rs. 273746.5 lakh has been released to Maharashtra under the Supplementary Nutrition Programme of the Anganwadi Services.

(d) & (e) POSHAN Abhiyaan under Saksham Anganwadi and Poshan 2.0 (or Mission Poshan 2.0), is a programmatic approach to address the life cycle issues of malnutrition, including anemia through behaviour change, technology and convergence. Anemia awareness and prevention is one of the core focus areas under the Abhiyaan as part of *Poshan ke Paanch sutra*.

Mission Poshan 2.0 is designed to address the issue of malnutrition including anaemia through transparency, accountability, balanced diets, diet diversity and quality, greater grassroots involvement and last-mile delivery of services supported by key strategies, viz., corrective strategies to address nutrition related deficiencies like anaemia, nutrition awareness strategies to develop good eating habits for sustainable health and well-being, strategies for communication and development of green eco-systems such as Poshan Vatikas. 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.

Further, supplementary nutrition is provided to pregnant women, lactating mothers and children up to the age of 6 years as per the nutritional norms. Recently, these nutrition norms have been revised to provide balanced nutrition including quality protein, healthy fats and 7 essential micro nutrients (calcium, zinc, iron, dietary folate, Vitamin-A, Vitamin B-6 and Vitamin B- 12).

Under Poshan 2.0, greater emphasis is being given on the use of millets for preparation of Hot Cooked Meal and Take Home rations (not raw ration) at Anganwadi centres for Pregnant Women, Lactating Mothers and Children below 6 years of age, in view of their high nutrient content to address anaemia and micro-nutrient deficiencies in women and children. Under Supplementary Nutrition Programme, it is mandatory to provide millet based diet at least once a week. Further, under Mission Poshan 2.0, only fortified rice is allocated to States/UTs.

Ministry of Health and Family Welfare has launched Anemia Mukh Bharat (AMB) strategy with the target to reduce anemia in women, children and adolescents in life cycle approach. The 6x6x6 strategy under AMB implies six age groups, six interventions and six institutional mechanisms. The six interventions under Anemia Mukh Bharat strategy include, Prophylactic Iron Folic Acid Supplementation, Periodic de-worming, intensified year-round Behaviour Change Communication Campaign, Testing and treatment of anemia, using digital methods and point of care treatment, Convergence and coordination with other line departments and ministries for strengthening implementation etc.

Further, under National Health Mission (NHM), several other programmes are implemented under Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N) strategy as a life cycle approach, which contribute in addressing the problem of anemia in children. It includes Community Based care of New-born and Young Children, Mothers' Absolute Affection (MAA), Universal Immunization Program, Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS); Intensified Diarrhoea Control Fortnight (IDCF) initiative, Nutrition Rehabilitation Centres (NRCs), Rashtriya Bal Swasthya Karyakaram (RBSK), Janani Shishu Suraksha Karyakram (JSSK) and Village Health Sanitation and Nutrition Day (VHSND).

State/UT wise prevalence of stunting, wasting, underweight and anaemia among children under five years of age as per NFHS 5 (2019-21)				
State/UT	Children under 5 years who are stunted (height-for-age) (%)	Children under 5 years who are wasted (weight-for-height) (%)	Children under 5 years who are underweight (weight-for-age) (%)	Children age 6-59 months who are anaemic (<11.0 g/dl)(%)
Andaman & Nicobar Islands	22.5	16	23.7	40
Andhra Pradesh	31.2	16.1	29.6	63.2
Arunachal Pradesh	28	13.1	15.4	56.6
Assam	35.3	21.7	32.8	68.4
Bihar	42.9	22.9	41	69.4
Chandigarh	25.3	8.4	20.6	54.6
Chhattisgarh	34.6	18.9	31.3	67.2
Dadra & Nagar Haveli and Daman & Diu	39.4	21.6	38.7	75.8
Delhi	30.9	11.2	21.8	69.2
Goa	25.8	19.1	24	53.2
Gujarat	39	25.1	39.7	79.7
Haryana	27.5	11.5	21.5	70.4
Himachal Pradesh	30.8	17.4	25.5	55.4
Jammu & Kashmir	26.9	19	21	72.7
Jharkhand	39.6	22.4	39.4	67.5
Karnataka	35.4	19.5	32.9	65.5
Kerala	23.4	15.8	19.7	39.4
Ladakh	30.5	17.5	20.4	92.5
Lakshadweep	32	17.4	25.8	43.1
Madhya Pradesh	35.7	19	33	72.7
Maharashtra	35.2	25.6	36.1	68.9
Manipur	23.4	9.9	13.3	42.8
Meghalaya	46.5	12.1	26.6	45.1
Mizoram	28.9	9.8	12.7	46.4
Nagaland	32.7	19.1	26.9	42.7
Odisha	31	18.1	29.7	64.2
Puducherry	20	12.4	15.3	64
Punjab	24.5	10.6	16.9	71.1
Rajasthan	31.8	16.8	27.6	71.5
Sikkim	22.3	13.7	13.1	56.4
Tamil Nadu	25	14.6	22	57.4
Telangana	33.1	21.7	31.8	70
Tripura	32.3	18.2	25.6	64.3
Uttar Pradesh	39.7	17.3	32.1	66.4
Uttarakhand	27	13.2	21	58.8
West Bengal	33.8	20.3	32.2	69