

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
STARRED QUESTION NO. 197
TO BE ANSWERED ON THE 15TH DECEMBER, 2023**

NUTRITIONAL REHABILITATION CENTRES

***197. SHRI DHANUSH M. KUMAR:
SHRI SELVAM G.:**

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of Nutritional Rehabilitation Centres (NRCs) currently operational in the country including Tamil Nadu;
- (b) the number of children enrolled by these NRCs during the last three years and the current year, State/UT-wise;
- (c) the number of children having severe and acute malnutrition as of today and whether any mechanism has been put in place to identify and improve the condition of such children;
- (d) if so, the details thereof; and
- (e) the steps taken/proposed to be taken by the Government to make the said NRCs more effective?

**ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(DR MANSUKH MANDAVIYA)**

(a) to (e) A Statement is laid on the Table of the House.

**STATEMENT REFERRED TO IN REPLY TO LOK SABHA
STARRED QUESTION NO. 197 FOR 15TH DECEMBER, 2023**

(a) and (b) As per the reports received from the States/UTs, 1129 Nutrition Rehabilitation Centres (NRCs) are currently operational across the country in 29 States/UTs with 8 NRCs functional in Tamil Nadu.

The number of children under 5 years suffering from Severe Acute Malnutrition (SAM) with medical complications admitted in the NRCs across 29 States/UTs in last three years, as per reports received from States/UTs is placed below:

| Year | Number of children under 5 years suffering from Severe Acute Malnutrition with medical complications admitted in NRCs |
|--------------------------|--|
| 2023-24(Up to June 2023) | 0.56 Lakh |
| 2022-23 | 1.89 Lakh |
| 2021-22 | 1.32 Lakh |
| 2020-21 | 1.04 Lakh |

State/UT wise details are placed at **Annexure I**.

(c) to (e) As per report received from the Ministry of Women and Child Development, Government of India, the number of children suffering from Severe Acute Malnutrition (SAM) is 11,11,357.

The Ministry of Health and Family Welfare implements Reproductive, Maternal, Newborn, Child, Adolescent health and Nutrition (RMNCAH+N) strategy under National Health Mission (NHM), which includes various activities to improve child health and nutrition including addressing Severe Acute Malnutrition. The interventions are placed at **Annexure II**.

In order to strengthen the effective utilization of the NRCs, the Government provides support through the National Health Mission based on the proposals received from the States/UTs in their Annual Programme Implementation Plans. This includes Operational Cost which covers wage compensation and diet for mothers, treatment and special diet for admitted children, Human Resource and their training, Equipment, incentive to ASHAs for referral and follow up of children suffering from Severe Acute Malnutrition with medical complication and infrastructure upkeep. In addition to the curative care, efforts are made to build capacities of the mothers/caregivers through reiterative counselling and support on timely, adequate and age-appropriate feeding practices and caring of children after discharge from the NRCs.

A National Centre for Excellence (CoE) for Severe Acute Malnutrition (SAM) management has been established to provide technical support to the States/UTs for functionalising the NRCs including capacity building, robust monitoring and

supportive supervision support to strengthen and improve the quality of care provided in NRCs.

Regular National level reviews, along with supportive supervision visits and Common Review Mission tours of the States/UTs are undertaken to support and strengthen the Nutrition interventions in the States/UTs.

From September 2022, ASHA incentive for referral of children suffering from Severe Acute Malnutrition with medical complications to NRC and follow up of these children after discharge from NRC has increased from Rs 150 to Rs 300 per child (Details: Rs 250 for referral and follow up and Rs 50 for SAM free status of child). Allowance for transportation of referral of children under 5 years suffering from Severe Acute Malnutrition (SAM) with medical complications to NRC , and admission and follow ups is covered within the JSSK. Additional provisions approved for mother's diet during stay at NRC with the child with Severe Acute Malnutrition.

The Government of India implements Poshan Tracker which facilitates monitoring and tracking of all AWCs, AWWs and beneficiaries on defined indicators and leverages technology for identification of stunting, wasting, under-weight prevalence among children.

IT systems have facilitated near real time data collection for Anganwadi Services such as, daily attendance, ECCE, Provision of Hot Cooked Meal (HCM)/Take Home Ration (THR-not raw ration), Growth Measurement etc. The App also offers counselling videos on key behaviours and services which help disseminate messages on birth preparedness, delivery, post-natal care, breastfeeding and complementary feeding.

Other interventions by Government include National Food Security Act (NFSA) 2013, which provides highly subsidized food grains under Targeted Public Distribution System (TPDS) for coverage upto 75% of the rural population and upto 50% of the urban population. Supplementary Nutrition is provided to children age 6 months to 6 years at Anganwadi centres as per nutrition norms under Schedule II of NFSA Act 2013.

The Pradhan Mantri Poshan SHAKti Nirman Yojana (PM POSHAN) under Ministry of Education, provides one hot cooked meal in Government and Government-aided schools as per nutrition norms under Schedule II of National Food Security Act, 2013 to school going children from Balvatikas (pre-school) to Class VIII.

**STATE/UT WISE ADMISSIONS OF CHILDREN UNDER 5 YEARS SUFFERING FROM
SAM WITH MEDICAL COMPLICATIONS IN NRCs
(Source: Reports received from States/UTs)**

| S. No. | State/ UT | FY 2020-21 | FY 2021-22 | FY 2022-23 | FY 2023-24 (Up to June 2023) |
|--------|----------------------------|---------------|---------------|---------------|---------------------------------|
| | INDIA | 104405 | 132191 | 189530 | 56143 |
| 1 | Andhra Pradesh | 1415 | 3623 | 9592 | 1330 |
| 2 | Arunachal Pradesh | 1 | 1 | 1 | 5 |
| 3 | Assam | 1032 | 1860 | 2728 | 721 |
| 4 | Bihar | 3543 | 2738 | 5188 | 1752 |
| 5 | Chandigarh | 68 | 117 | 197 | 46 |
| 6 | Chhattisgarh | 6845 | 10997 | 18332 | 6413 |
| 7 | DNH&DD | 12 | 30 | 25 | 12 |
| 8 | Delhi | 169 | 475 | 1078 | 258 |
| 9 | Gujarat | 9606 | 13048 | 18978 | 5694 |
| 10 | Haryana | 1298 | 1896 | 2430 | 946 |
| 11 | Himachal Pradesh | 187 | 603 | 633 | 212 |
| 12 | Jammu & Kashmir | 680 | 774 | 1257 | 300 |
| 14 | Jharkhand | 7112 | 9651 | 11561 | 4004 |
| 15 | Karnataka | 3930 | 5648 | 7359 | 1822 |
| 16 | Kerala | 87 | 199 | 304 | 51 |
| 13 | Ladakh | 67 | 28 | 79 | 22 |
| 17 | Madhya Pradesh | 41629 | 46433 | 53490 | 16276 |
| 18 | Maharashtra | 2405 | 4124 | 6187 | 1493 |
| 19 | Manipur | 76 | 104 | 185 | 44 |
| 20 | Meghalaya | 222 | 188 | 341 | 117 |
| 21 | Nagaland | 0 | 3 | 13 | 12 |

| | | | | | |
|----|----------------------|-------|------|-------|------|
| 22 | Odisha | 10150 | 7990 | 12776 | 4465 |
| 23 | Rajasthan | 3448 | 4402 | 6834 | 1888 |
| 24 | Tamil Nadu | 1045 | 1774 | 2328 | 740 |
| 25 | Telangana | 1278 | 986 | 5431 | 1379 |
| 26 | Tripura | 6 | 16 | 37 | 10 |
| 27 | Uttar Pradesh | 5819 | 9148 | 15209 | 4258 |
| 28 | Uttarakhand | 26 | 43 | 182 | 74 |
| 29 | West Bengal | 2249 | 5292 | 6775 | 1799 |

Other Interventions of the Government to improve child health and nutrition including addressing Severe Acute Malnutrition.

1. **Mothers' Absolute Affection (MAA)** to improve breastfeeding coverage which includes early initiation of breastfeeding and exclusive breastfeeding for first six months followed by age-appropriate complementary feeding practices through capacity building of frontline health workers and comprehensive IEC campaigns.
2. **Nutrition Rehabilitation Centres (NRCs)** are set up at public health facilities to provide in-patient medical and nutritional care to children under 5 years suffering from Severe Acute Malnutrition (SAM) with medical complications.
3. Under **Home Based New-born Care (HBNC) and Home-Based Care of Young Children (HBYC)** programme, home visits are performed by ASHAs to improve child rearing practices and to identify sick new-born and young children.
4. **Anemia Mukht Bharat (AMB)** strategy is implemented strategy to reduce anemia among six beneficiaries age group - children (6-59 months), children (5-9 years), adolescents (10-19 years), pregnant and lactating women and in women of reproductive age group (15-49 years) in life cycle approach through implementation of six interventions via robust institutional mechanism.
5. Under **National Deworming Day (NDD)** albendazole tablets are administered in a single fixed day approach via schools and anganwadi centres in two rounds (February and August) to reduce the soil transmitted helminth (STH) infestation among all children and adolescents (1-19 years).
6. **Rashtriya Bal Swasthya Karyakaram (RBSK)** covers children from 0 to 18 years of age for screening for Diseases, Deficiencies, Defects and Developmental delays to improve child survival.
7. **Intensified Diarrhoea Control Fortnight** initiative is implemented for promoting ORS and Zinc use, for reducing diarrhoeal deaths and associated malnutrition.
8. **Universal Immunization Programme (UIP)** is implemented to provide vaccination to children against life threatening diseases.
9. **Village Health Sanitation and Nutrition Days (VHSNDs)** are observed for provision of maternal and child health services and creating awareness on maternal and child care including nutrition in convergence with Ministry of Women and Child Development.
