

GOVERNMENT OF INDIA  
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

**LOK SABHA**  
**UNSTARRED QUESTION NO. 1307**  
TO BE ANSWERED ON 9.2.2024

**HEALTH SURVEY ON WOMEN AND CHILDREN**

1307 SHRI THIRUMAVALAVAN THOL:

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

- (a) whether National Family Health Survey (NFHS) is taken only to ascertain the data about the conditions of Women and Children in the country;
- (b) whether the under-nutrition, wasting, stunting in children worsened in the National Family Health Survey-5 (NFHS-5) compared to the previous survey;
- (c) if so, the details and the reasons there for;
- (d) whether the anaemia in girls and women in the active age group of 15-49 has also worsened in the NFHS-5 compared to the previous survey; and
- (e) if so, the details and the reasons there for?

**ANSWER**

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

(a) to (e) The National Family Health Survey (NFHS) is a large-scale, multi-round survey conducted in a representative sample of households throughout India that captures various data points on family including data about the conditions of Women and Children in the country. The National Family Health Survey (NFHS) is conducted by Ministry of Health & Family Welfare (MoHFW). The report is available on National Family Health Survey portal ([http://rchiips.org/nfhs/factsheet\\_nfhs-5.shtml](http://rchiips.org/nfhs/factsheet_nfhs-5.shtml)).

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). Wasting has improved from 21% (NFHS-4) to 19.3% (NFHS-5), Under-weight has improved from 35.7% (NFHS-4) to 32.1% (NFHS-5) and stunting has improved from 38.4% (NFHS-4) to 35.5% (NFHS-5).

Moreover, as per the data of Poshan Tracker for the month of December 2023, around 7.44 crore children under 6 years were measured, out of whom 36% were found to be stunted and 17% were found to be underweight and 6% children under 5 years were found to be wasted. The levels of underweight and wasting as obtained from Poshan Tracker are much less than that projected by NFHS 5.

Further, with regard to the prevalence of anaemia in women (15-19 years) as per the National Family Health Survey 5 (2019-21) is 59.1 percent and as per NFHS-

4 (2015-16) is 54.1 percent. The prevalence of anaemia in women (15-49 years) as per NFHS-5 is 57.0 percent and as per NFHS 4 is 53.1 percent.

As informed by MoHFW, according to the WHO report on Global Prevalence of Anaemia 2011, 50 percent cases of anaemia are attributed to the iron deficiency. Other causes of anaemia include other micronutrient deficiencies (e.g. folate, riboflavin, Vit-A and B-12), acute and chronic infections (e.g. malaria, cancer, tuberculosis, parasitic infections and HIV), and inherited or acquired disorders that affect haemoglobin synthesis (e.g. haemoglobinopathies).

The key interventions of MoHFW to improve maternal and child health including nutritional deficiencies and anemia, *inter alia*, are placed at **Annexure I**.

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## ANNEXURE I

### ANNEXURE REFERRED IN REPLY TO PART (e) of LOK SABHA UNSTARRED QUESTION NO. 1307 FOR 09.02.2024 REGARDING “HEALTH SURVEY ON WOMEN AND CHILDREN” ASKED BY SHRI THIRUMAVALAVAN THOL, M.P.

Interventions of Nutrition Division of MoHFW to improve maternal and child health including nutritional deficiencies and anemia are:

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. **Community Based care of New-born and Young Children:** Under Home Based New-born Care (HBNC) and Home-Based Care of Young Children (HBYC) program, home visits are performed by ASHAs to improve child rearing practices and to identify sick new-born and young children in the community.
3. **Nutrition Rehabilitation Centres (NRCs)** are set up at public health facilities to provide in-patient medical and nutritional care to Severe Acute Malnourished (SAM) children under 5 years of age with medical complications. Under nutritional management of SAM children admitted in NRCs, therapeutic diet is provided during Stabilization phase and during rehabilitation phase. In addition to curative care, special focus is given on timely, adequate and appropriate feeding for children, correction of micronutrient deficiencies, improving the skills for mother and caregivers on complete age-appropriate caring and feeding practices and counselling support is provided to mothers for identifying nutrition and health problems in child.
4. **Anemia Mukht Bharat (AMB)** strategy aims 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. The interventions are Prophylactic Iron and Folic Acid Supplementation; Deworming; intensified year-round Behaviour Change Communication Campaign for improving Iron and Folic Acid Supplementation and age appropriate infant and young child feeding practices; testing of anaemia using digital methods and point of care treatment; provision of Iron and Folic Acid fortified foods with focus on harnessing locally available resources; addressing non-nutritional causes of anaemia in endemic pockets with special focus on malaria, hemoglobinopathies and fluorosis.
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).

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