

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

**LOK SABHA  
UNSTARRED QUESTION NO. 4199  
TO BE ANSWERED ON 13<sup>TH</sup> DECEMBER, 2019**

**ANAEMIA AMONG WOMEN**

**4199. SHRIMATI NUSRAT JAHAN RUHI:**

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

- (a) whether according to National Family Health Survey (NFHS) -IV (2015-16), the prevalence of anaemia among women aged 15 to 49 years is 53.1 per cent, if so, the details thereof;
- (b) whether despite taking lots of initiatives by the Government in the last 49 years to control the problem of anaemia in the country it has remained unsolved; and
- (c) if so, the reasons therefor?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(SHRI ASHWINI KUMAR CHOUBEY)**

(a): Yes. The detailed State-wise prevalence of anemia among women aged 15-49 years is annexed.

(b) & (c): The anemia control programme review indicated challenges in IFA supply chain management, demand generation and monitoring. Considering, the slow progress i.e. less than 1% per annum in reduction of anaemia from 2005 to 2015, the Govt of India has launched the Anemia Mukta Bharat (AMB) strategy under the Prime Minister's Overarching Scheme for Holistic Nourishment (POSHAN) Abhiyaan and the targets has been set to reduce anaemia by 3% per year.

The 6x6x6 strategy under AMB implies six age groups, six interventions and six institutional mechanisms. The strategy focuses on ensuring supply chain, demand generation and strong monitoring using the dashboard for addressing anemia, both due to nutritional and non-nutritional causes.

a) The six population groups under AMB strategy are:

- Children (6-59 months)
- Children (5-9 years)
- Adolescents girls and boys (10-19 years)
- Pregnant women
- Lactating women

- Women of Reproductive Age (WRA) group (15-49 years)

b) The six interventions are:

- Prophylactic Iron and Folic Acid Supplementation
- Deworming
- Intensified year-round Behaviour Change Communication (BCC) Campaign and delayed cord clamping
- Testing of anaemia using digital methods and point of care treatment,
- Mandatory provision of Iron and Folic Acid fortified foods in Government funded health programmes
- Addressing non-nutritional causes of anaemia in endemic pockets with special focus on malaria, hemoglobinopathies and fluorosis and the six institutional mechanisms.

c) The six institutional mechanisms are:

- Inter-ministerial coordination
- National Anemia Mukh Bharat Unit
- National Centre of Excellence and Advanced research on Anemia Control
- Convergence with other ministries
- Strengthening supply chain and logistics
- Anemia Mukh Bharat Dashboard and Digital Portal- one-stop shop for Anemia.

This comprehensive strategy is expected to yield positive results in Anemia control.

## Annexure

Table 1: State-wise **high prevalence** and **low prevalence** of ANY anaemia among women of reproductive age (15-49 years) as against National average as per NFHS-IV

Sr No	State	Any anaemia (<12 gm/dl)
1	Dadra And Nagar Haveli	79.5
2	Chandigarh	76.0
3	Andaman And Nicobar Islands	65.6
4	Jharkhand	65.2
5	Haryana	62.7
6	West Bengal	62.5
7	Bihar	60.3
8	Andhra Pradesh	60.0
9	Daman And Diu	58.9
10	Telangana	56.6
11	Meghalaya	56.2
12	Tamil Nadu	55.1
13	Gujarat	54.9
14	Tripura	54.5
15	Delhi	54.3
16	Punjab	53.6
17	Himachal Pradesh	53.5
18	Madhya Pradesh	52.6
19	Puducherry	52.4
20	Uttar Pradesh	52.4
21	Odisha	51.0
22	Jammu And Kashmir	49.4
23	Maharashtra	47.9
24	Chhattisgarh	47.0
25	Rajasthan	46.8
26	Assam	46.0
27	Lakshadweep	46.0
28	Uttarakhand	45.2
29	Karnataka	44.8
30	Arunachal Pradesh	43.2
31	Sikkim	34.9
32	Kerala	34.3
33	Goa	31.3
34	Nagaland	27.8
35	Manipur	26.4
36	Mizoram	24.8
	All India	53.1