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

### LOK SABHA UNSTARRED QUESTION. NO. 963 TO BE ANSWERED ON 22<sup>ND</sup> JULY 2022

### **DEATH DUE TO MALNUTRITION**

#### 963. SHRI DUSHYANT SINGH: SHRI RAHUL KASWAN:

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

(a) whether the deaths of children due to malnutrition have been reported from various parts of the country, particularly in the tribal areas and if so, the details thereof, State/UT-wise from 2016-2022;

(b) whether the Government has conducted any inquiry into the reported deaths of children due to malnutrition in the country;

(c) whether the Government has devised any mechanism to minimize the malnutrition deaths especially in tribal areas of the country;

(d) if so, the details thereof and the other measures being proposed in this regard, along with the shortcomings noticed in the implementation of current policies/schemes; and

(e) the details of the funds spent on tackling malnutrition in tribal areas of the country from 2018-2022, State/UT-wise?

# ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. BHARATI PRAVIN PAWAR)

(a) to (e): Malnutrition is not a direct cause of death in children; however, it can increase morbidity and mortality by reducing resistance to infections.

In order to bring down child mortality all across the country including in tribal areas, the Government is supporting all States/UTs in implementation of Reproductive, Maternal, Newborn, Child, Adolescent health and Nutrition (RMNCAH+N) strategy as a life cycle approach under National Health Mission (NHM) based on the Annual Program Implementation Plan (APIP) submitted by States/UTs. Interventions/schemes for improving Child survival has been place at Annexure 1.

The Ministry of Health and Family Welfare, Ministry of AYUSH and Ministry of Women & Child Development are the sectoral Ministries with regard to Health and Nutrition, including tribal people. These Ministries allocate funds under Schedule Tribe Component (STC). Ministry of Tribal Affairs also provides funds to the States based on their specific proposals as gap filling to address the issues covering health & nutrition of tribal population. The Ministry of Tribal Affairs have emphasized capacity building, IEC material (use of traditional

food, minor millet in the food basket through intervention in schools, inclusion in curriculum personal hygiene, habit of clean toilets etc.) for dissemination by Tribal Research Institutes as well. The funds allocated to the State/ UT governments for Health & Nutrition by Ministry of Tribal Affairs (MoTA) is given below:

Health & Nutrition	
Years	Fund Approved (Rs. In lakh)
2018-19	11563.86
2019-20	9945.12
2022-21	10611.61
2021-22	7692.02

#### Interventions for improving Child survival:

- 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 including tribal children in the community.
- Mothers' Absolute Affection (MAA): Early initiation and exclusive breastfeeding for first six months and appropriate Infant and Young Child Feeding (IYCF) practices are promoted under Mothers' Absolute Affection (MAA).
- Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS) initiative is implemented since 2019 for reduction of Childhood morbidity and mortality due to Pneumonia.
- Universal Immunization Programme (UIP) is implemented to provide vaccination to children including tribal children against life threatening diseases such as Tuberculosis, Diphtheria, Pertussis, Polio, Tetanus, Hepatitis B, Measles, Rubella, Pneumonia and Meningitis caused by Haemophilus Influenzae B. The Rotavirus vaccination has also been rolled out in the country for prevention of Rota-viral diarrhoea. Pneumococcal Conjugate Vaccine (PCV) is introduced in all States/UTs.
- Rashtriya Bal SwasthyaKaryakaram (RBSK): Children from 0 to 18 years of age are screened for 30 health conditions (i.e. Diseases, Deficiencies, Defects and Developmental delay) under Rashtriya Bal SwasthyaKaryakaram (RBSK) to improve child survival. District Early Intervention Centres (DEICs) at district health facility level are established for confirmation and management of children including tribal children screened under RBSK.
- Nutrition Rehabilitation Centres (NRCs) are set up at public health facilities to treat and manage the children with Severe Acute Malnutrition (SAM) admitted with medical complications.
- Intensified Diarrhoea Control Fortnight / Defeat Diarrhoea (D2) initiative is implemented for promoting ORS and Zinc use and for reducing diarrhoeal deaths.
- Anaemia Mukt Bharat (AMB) strategy as a part of POSHAN Abhiyan aims to strengthen the existing mechanisms and foster newer strategies to tackle anaemia which include testing & treatment of anaemia in school going adolescents & pregnant women, addressing non nutritional causes of anaemia and a comprehensive communication strategy.

- **Capacity Building**: Several capacity building programs of health care providers are taken up for improving maternal and child survival and health outcomes.
- 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 in convergence with Ministry of Women and Child Development. Health and nutrition education through mass and social media is also promoted to improve healthy practices and to generate demand for service uptake.
- Mother and Child Protection Card is the joint initiative of the Ministry of Health & Family welfare and the Ministry of Woman and Child Development which addresses the nutrition concerns in children including tribal children.
- The Government of India has been implementing **POSHAN** (**Prime Minister Overarching Scheme for Holistic Nourishment**) Abhiyan, to address malnutrition in India through convergence, behaviour change, IEC advocacy, training and capacity building, innovations and demand generation. Ministry of Women and Child Development is implementing Anganwadi Services, a centrally sponsored flagship programme to improve the nutritional status of children including tribal children. The scheme provides package of six services i.e. Supplementary Nutrition, Pre School Non-formal Education, Nutrition and Health Education, Immunization, Health Check-ups and Referral services.
- Under the Ministry of Consumer Affairs, Food and Public Distribution, the National Food Security Act, (NFSA) legally entitles up to 75% of the rural population and 50% of the urban population to receive subsidized food grains under Targeted Public Distribution System. About two thirds of the population therefore is covered under the Act to receive highly subsidized food grains.
- Ministry of Consumer Affairs, Food and Public Distribution in association with Ministry
  of Women & Child Development and Department of School Education & Literacy has
  planned to distribute fortified rice under ICDS/ Pradhan Mantri Poshan Shakti Nirman PM POSHAN (erstwhile Mid-Day Meal Scheme{MDM}) across the country during
  this year in an effort to scale up the distribution of fortified rice in the country to help in
  fighting deficiency of micro-nutrients like Iron, Folic Acid & Vitamin B-12 Pradhan
  Mantri Poshan Shakti Nirman PM POSHAN (erstwhile Mid-Day Meal
  Scheme{MDM}) under Ministry of Education provides supplementary feeding to
  school going children including tribal children.