

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION NO. 1919
TO BE ANSWERED ON 06.12.2024

INTEGRATED NUTRITION SUPPORT PROGRAMME

1919. SHRI ARVIND GANPAT SAWANT:
SHRI DHARMENDRA YADAV:
SMT. BHARTI PARDHI:
SHRI SHRIRANG APPA CHANDU BARNE:

Will the Minister of Women and Child Development be pleased to state:

- (a) whether States are facing challenges of malnutrition in children, adolescent girls, pregnant women and lactating mothers;
- (b) if so, the details thereof, State-wise, particularly in Maharashtra, Uttar Pradesh and Madhya Pradesh;
- (c) whether the Government has implemented an Integrated Nutrition Support Programme to address the said challenges;
- (d) if so, the details of the success achieved so far in addressing the said challenges, State-wise particularly in Maharashtra, Uttar Pradesh and Madhya Pradesh;
- (e) whether there are any gaps and shortcomings in the on-going nutrition programme which create hindrances to improve implementation of an Integrated Nutrition Support Programme; and
- (f) if so, the details of the steps taken by the Government to overcome and address the shortcomings in the on-going nutrition programme along with the success achieved therein particularly in the said States?

ANSWER

MINISTER OF STATE IN THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI SAVITRI THAKUR)

(a) to (f) Under the 15th Finance Commission, various components like Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (of 14-18 years in Aspirational Districts and North-Eastern region) have been subsumed under the

umbrella Mission Saksham Anganwadi and Poshan 2.0 (Mission Poshan 2.0) to address the challenge of malnutrition. It is a Centrally Sponsored Scheme, where the responsibility of implementation of the scheme is with the States/UTs.

Nutrition goes beyond mere eating of food; it requires proper digestion, absorption, and metabolism which are influenced by factors like sanitation, education and access to safe drinking water. As malnutrition requires a multi-sector approach involving dimensions of food, health, water, sanitation and education, it is crucial to effectively address the issue of malnutrition. The challenge of malnutrition is being addressed under Mission Saksham Anganwadi and Poshan 2.0 by establishing cross cutting convergence amongst 18 Ministries/Departments.

Under Mission Poshan 2.0 a new strategy has been made for reduction in malnutrition and for improved health, wellness and immunity through multiple activities like community engagement, outreach, behavioral change, and advocacy. It focuses on Maternal Nutrition, Infant and Young Child Feeding Norms, treatment of Severe Acute Malnutrition (SAM)/ Moderate Acute Malnutrition (MAM) and wellness through AYUSH practices to reduce prevalence of wasting, stunting, anaemia and being underweight.

Under this scheme, Supplementary Nutrition is provided to Children (6 months to 6 years), Pregnant Women, Lactating Mothers and Adolescent Girls to beat the intergenerational cycle of malnutrition by adopting a life cycle approach. Supplementary nutrition is provided in accordance with the nutrition norms contained in Schedule-II of the National Food Security Act. These norms have been revised and upgraded last year. The old norms were largely calorie-specific; however, the revised norms are more comprehensive and balanced in terms of both quantity and quality of supplementary nutrition based on the principles of diet diversity that provides quality protein, healthy fats and micronutrients.

Fortified rice is being supplied to AWCs to meet the requirement of micro-nutrients and to control anaemia among women and children. Greater emphasis is being laid on the use of millets for preparation of Hot Cooked Meal at least once a week and Take Home ration at Anganwadi centers.

Ministries of Women & Child Development and Health & Family Welfare have jointly released the protocol for Community Management of Malnutrition (CMAM) to prevent and treat severely acute malnutrition in children and for reducing associated morbidity and mortality.

Under Mission Poshan 2.0, one of the major activities undertaken is Community Mobilization and Awareness Advocacy leading to Jan Andolan to educate people on nutritional aspects. State and UTs are conducting and reporting regular sensitisation activities under community engagement programmes during Poshan Maahs and Poshan Pakhwadas celebrated in the months of September and March-April respectively. Community Based Events (CBEs) have served as a significant strategy in changing nutritional practices and all Anganwadi workers are required to conduct two Community Based Events every month.

Various rounds of the National Family Health Survey (NFHS) conducted by Ministry of Health & Family Welfare since 1992-93 have shown improvement in malnutrition indicators in children across India. Details of these indicators for children since NFHS-1 to NFHS-5 are given below:

NFHS Survey	Stunting %	Underweight %	Wasting %
NFHS-1 (1992-93)*	52	53.4	17.5
NFHS-2 (1998-99)**	45.5	47	15.5
NFHS-3 (2005-6)***	48.0	42.5	19.8
NFHS-4 (2015-16)***	38.4	35.8	21.0
NFHS-5 (2019-21)***	35.5	32.1	19.3

* Under 4 years

** Under 3 years

*** Under 5 years

The above table gives a representative picture of malnutrition indicators among all children of 0-3 years, 0-4 years and 0-5 years age at the relevant time.

The projected population of all children up to 5 years in India for the year 2021 is 13.75 crores approximately (source: Population Projections for India and States 2011-2036, National Commission on Population, Ministry of Health & Family Welfare). However, only 7.54 crores children up to 5 years are enrolled in Anganwadis and registered on Poshan Tracker of the Ministry of Women & Child Development as per the October 2024 data. 7.31 crores of these children were measured on growth parameters of height and weight. 38.9% of these children have been found to be stunted, 17% children have been found to be underweight and 5.2% wasted.

Further, the projected population of all children in India up to 6 years for the year 2021 is approximately 16.1 crores (source: Population Projections for India and States 2011-2036, National Commission on Population, Ministry of Health & Family Welfare). As per the October 2024 data of Poshan Tracker, 8.82 crores children (0-6 years) are enrolled in Anganwadis out of whom 8.55 crores were measured on growth parameters of height and weight. 37% of these children (0-6 years) have been found to be stunted and 17% children (0-6 years) have been found to be underweight.

The analysis of the above NFHS data and the Poshan Tracker data shows improvement in malnutrition indicators in children across India.

The State wise details of malnourished children including Maharashtra, Uttar Pradesh and Madhya Pradesh for the last three years are **Annexed**.

Annexure

ANNEXURE REFERRED IN REPLY TO PARTS (b and d) OF LOK SABHA QUESTION NO. 1919 FOR 6.12.2024 REGARDING “INTEGRATED NUTRITION SUPPORT PROGRAMME” ASKED BY SHRI ARVIND GANPAT SAWANT, SHRI DHARMENDRA YADAV, SMT. BHARTI PARDHI AND SHRI SHRIRANG APPA CHANDU BARNE

State wise details of malnourished children (0-5 years) in the country for October 2022, October 2023 and October 2024 from Poshan Tracker are as follows:

State	Oct, 2022			Oct, 2023			Oct, 2024		
	Stunted (%)	Wasted (%)	Under weight (%)	Stunted (%)	Wasted (%)	Under weight (%)	Stunted (%)	Wasted (%)	Under weight (%)
Andhra Pradesh	21.2	5.3	10.5	18.2	5.4	8.7	22.6	5.3	10.8
Arunachal Pradesh	33.3	5.3	14.6	27.2	4.6	9.1	32.7	4.1	9.6
Assam	39.0	8.2	19.0	39.0	5.0	15.9	42.4	3.8	16.3
Bihar	42.9	11.0	25.8	45.0	9.0	22.7	43.8	9.2	22.9
Chhattisgarh	39.0	10.4	17.9	29.4	11.3	15.5	21.5	7.0	13.1
Goa	37.2	9.0	16.2	18.8	2.3	5.8	4.1	0.6	1.7
Gujarat	53.6	8.1	23.1	43.6	8.9	20.7	40.8	7.8	21.0
Haryana	30.1	8.5	14.0	25.9	5.7	8.9	28.2	4.1	8.7
Himachal Pradesh	26.1	4.6	10.8	21.7	2.4	7.2	18.4	1.7	6.3
Jharkhand	43.2	12.1	25.9	38.8	8.8	18.8	43.8	6.2	19.3
Karnataka	41.0	8.9	20.7	39.7	7.5	17.5	39.7	3.2	17.1
Kerala	37.2	9.5	15.3	33.1	4.8	10.1	34.4	2.3	9.5
Madhya Pradesh	52.4	9.7	33.0	40.5	8.2	23.6	46.5	6.9	26.5
Maharashtra	49.5	7.1	21.8	48.1	5.6	17.5	47.7	4.1	16.5
Manipur	17.8	2.8	7.6	16.3	1.2	7.7	7.7	0.3	2.6
Meghalaya	27.4	3.1	8.7	24.7	1.8	6.6	18.2	0.4	4.5
Mizoram	20.0	4.2	6.2	23.5	3.7	5.6	26.7	2.3	5.9
Nagaland	27.8	6.9	9.8	22.9	4.6	7.0	28.0	5.3	6.6
Odisha	30.6	5.9	14.7	34.3	4.0	14.8	29.1	2.9	12.8
Punjab	32.9	9.2	12.9	18.0	5.4	7.9	18.4	3.0	5.9
Rajasthan	37.0	11.6	20.0	35.7	7.5	16.7	36.6	5.5	17.7
Sikkim	12.2	2.8	2.7	14.1	2.8	3.1	9.2	1.5	1.7
Tamil Nadu	22.6	6.1	10.5	16.6	4.8	8.1	13.4	3.6	7.1
Telangana	29.6	5.7	14.3	30.8	4.6	13.5	32.6	5.6	16.2
Tripura	36.9	9.2	16.3	37.8	7.2	15.4	40.5	6.3	16.6
Uttar Pradesh	45.2	9.5	21.7	45.7	5.7	19.4	48.0	3.9	19.4
Uttarakhand	31.8	6.7	8.4	33.4	6.3	8.4	21.0	1.5	5.4
West Bengal	41.1	10.1	16.2	38.1	8.6	12.5	38.0	7.5	13.0

Andaman & Nicobar Islands	24.0	6.9	10.8	20.7	4.5	8.2	8.7	2.3	3.9
Dadra & Nagar Haveli - Daman & Diu	52.9	15.4	40.1	45.2	12.5	32.8	35.9	3.3	16.1
Delhi	32.8	4.5	16.5	33.6	4.8	19.1	41.9	3.0	20.6
J&K	14.5	2.5	5.6	18.1	2.5	5.1	12.1	0.7	3.0
Ladakh	27.9	5.3	8.0	15.9	1.8	3.5	11.0	0.2	2.0
Lakshadweep	100.0	0.0	75.0	39.9	11.8	19.4	46.5	11.9	25.1
Puducherry	26.0	9.3	12.0	29.0	7.9	11.6	40.2	6.8	13.0
UT-Chandigarh	36.6	4.5	18.0	34.1	0.7	12.0	26.3	1.8	11.8
