### GOVERNMENT OF INDIA MINISTRY OF WOMEN AND CHILD DEVELOPMENT

# LOK SABHA UNSTARRED QUESTION NO. 3126 TO BE ANSWERED ON 13.12.2024

#### SAKSHAM ANGANWADI AND POSHAN 2.0 IN ODISHA

#### 3126. SMT. SANGEETA KUMARI SINGH DEO:

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

- (a) whether the Government has assessed the implementation of the Saksham Anganwadi and POSHAN 2.0 scheme in Odisha;
- (b) if so, the details of Anganwadi centres upgraded under the scheme and the funds utilized thereon in the State; and
- (c) the measures taken to address malnutrition among children and pregnant women in aspirational districts of Odisha?

#### **ANSWER**

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

(a) to (b): Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (14-18 years in Aspirational Districts and North-East region) have been subsumed under the umbrella Mission Saksham Anganwadi and Poshan 2.0 (Mission Poshan 2.0) during the period of 15<sup>th</sup> Finance Commission. Mission Poshan 2.0 seeks to address the challenge of malnutrition through improved nutrition content and delivery. It is a Centrally Sponsored Scheme, where the responsibility of implementation lies with the States/UTs.

This Ministry continuously monitors the implementation of Mission 2.0 through sustained engagement with the States/UTs through Video Conferences, meetings and through online Poshan Tracker system including in the State of Odisha.

Ministry has issued guidelines to all States/UTs on 13.01.2021 to streamline several aspects such as quality assurance, roles and responsibilities of duty holders, procedure for procurement, integrating AYUSH concepts and data management and

monitoring through "Poshan Tracker" for transparency, efficiency and accountability in the delivery of Supplementary Nutrition.

The 'Poshan Tracker' application was rolled out by the Ministry on 1st March 2021 as a governance tool to strengthen and bring about transparency in nutrition delivery support systems. Technology under Poshan Tracker is being leveraged for (i) dynamic identification of stunting, wasting, under-weight prevalence among children and (ii) last mile tracking of nutrition service delivery. The Poshan Tracker enables real time monitoring and tracking of all Anganwadi Centres (AWCs), Anganwadi Workers (AWWs) and beneficiaries on defined indicators. Beneficiaries are Aadhaar seeded to ensure last mile tracking. Poshan Tracker helps Mission Poshan 2.0 in generating data, providing feedback to Program Managers and documenting the impact of the scheme on nutrition indicators. The Ministry/ States/ Districts are being able to make effective timely interventions, based on the data from the tracker; continuous evaluation through reputed institutions and the progress of different components.

Under the guidelines, the District Magistrate (DM) has been designated as the Nodal Point in the district for monitoring nutritional status of beneficiaries and quality standards. A District Nutrition Committee under the chairpersonship of DM/Collector with certified nutrition experts as members has been constituted to review the progress every month.

Under Saksham Anganwadi and Poshan 2.0, two lakh selected AWCs (@ 40,000 AWCs per year) are being strengthened and upgraded for improved nutrition delivery for stimulating the creative, social, emotional, cognitive and intellectual development of children under 6 years of age in convergence with education development programmes.

As on date, 1,70,337 Anganwadi Centres (41192 for FY 2022-23, 50916 for FY 2023-24 and 78229 for FY 2024-25) have been approved for upgradation to Saksham Anganwadis in the States/UTs, out of which, 10432 Anganwadi Centres have been approved for upgradation to Saksham Anganwadi in the State of Odisha and Rs.62.59 Crores have been allocated to the State for this purpose.

(c): 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 challenges of malnutrition are being addressed under Mission Saksham Anganwadi and Poshan 2.0 by establishing cross cutting convergence amongst 18 Ministries/Departments.

Under this Mission, a new strategy has been made for reduction in malnutrition and for improved health, wellness and immunity through 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.

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.

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.

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