

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION NO. 902
TO BE ANSWERED ON 29.11.2024

STUNTING AND WASTING AMONG CHILDREN

902. SHRI S VENKATESAN:

SHRI SUBBARAYAN K:

SHRI DILESHWAR KAMAIT:

COM. SELVARAJ V:

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

- (a) whether the Government has any data on under nourishment among women, stunting, wasting and under weight among children;
- (b) if so, the details thereof indicating the number and percentage of women and children affected by the said deficiencies, State/UT-wise;
- (c) whether the Government has conducted any study of the economic, social and gender determinants among the stunted, wasted and underweight children;
- (d) if so, the details thereof and if not, the reasons therefor; and
- (e) the details of the efforts made by the Government to address the increasing incidents of stunting?

ANSWER

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

(a) and (b) Details of anaemia and Body Mass Index (BMI) among women are released under National Family Health Survey (NFHS), which is periodically conducted by the Ministry of Health & Family Welfare. The report of NFHS-5 is available on National Family Health Survey portal (<http://nfhsiips.in/nfhsuser/publication.php>). As per the report, 18.7% of Women of reproductive age group (15-49 years) have Body Mass Index (BMI) below normal (BMI <18.5 kg/m²) and 57% women of reproductive age group (15-49 years) are anaemia. The details of State wise prevalence of anaemia among all women aged 15-49 years are placed at **Annexure I**.

State wise details of malnourished children in the country are at **Annexure-II**.

(c) to (e) In 2021, the World Bank has conducted a survey in 11 priority states (Andhra Pradesh, Bihar, Chhattisgarh, Gujarat, Jharkhand, Karnataka, Madhya Pradesh, Maharashtra, Rajasthan, Tamil Nadu and Uttar Pradesh) with the highest rates of anemia and stunting. The aim of this survey was to assess the program's delivery of nutrition services, whether the nutritional knowledge of beneficiaries had improved and if they had adopted more appropriate nutrition and feeding practices.

The findings demonstrated that the services delivered through the Poshan Abhiyaan – the receipt of relevant messages, home visits by the anganwadi worker, and attendance at community based events – were associated with improved nutrition behaviors. The survey also found that the program's nutrition messages reached more than 80% of women, and that 81% of women practiced exclusive breastfeeding for the first six months.

Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (14-18 years in Aspirational Districts and North-East region) were subsumed under the umbrella Mission Saksham Anganwadi and Poshan 2.0 (Mission Poshan 2.0) during the 15th Finance Commission to address the challenge of malnutrition through improved nutrition content and delivery. This is a self-selecting (no entry barriers) scheme available to all the eligible beneficiaries who enroll at the Anganwadi Centers (AWCs) and is being implemented in all States/UTs across the country.

Under Mission Poshan 2.0 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.

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.

Annexure-I

ANNEXURE REFERRED IN REPLY TO PART (a and b) OF LOK SABHA QUESTION NO. 902 FOR 29.11.2024 REGARDING “STUNTING AND WASTING AMONG CHILDREN” ASKED BY SHRI S VENKATESAN, SHRI SUBBARAYAN K, SHRI DILESHWAR KAMAIT AND COM. SELVARAJ V

State-wise Prevalence of Anemia among Women aged 15-49 years in the Country
(Source: NFHS 2019-21)

State/UT	All women age 15-49 years who are anaemic (%)
Andaman & Nicobar Islands	57.5
Andhra Pradesh	58.8
Arunachal Pradesh	40.3
Assam	65.9
Bihar	63.5
Chandigarh	60.3
Chhattisgarh	60.8
DNH& DD	62.5
Goa	39.0
Gujarat	65.0
Haryana	60.4
Himachal Pradesh	53.0
Jammu & Kashmir	65.9
Jharkhand	65.3
Karnataka	47.8
Kerala	36.3
Ladakh	92.8
Lakshadweep	25.8
Madhya Pradesh	54.7
Maharashtra	54.2
Manipur	29.4
Meghalaya	53.8

Mizoram	34.8
Nagaland	28.9
Nct Of Delhi	49.9
Odisha	64.3
Puducherry	55.1
Punjab	58.7
Rajasthan	54.4
Sikkim	42.1
Tamil Nadu	53.4
Telangana	57.6
Tripura	67.2
Uttar Pradesh	50.4
Uttarakhand	42.6
West Bengal	71.4

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The State wise details of malnourished children (0 - 5 years) enrolled in Anganwadis across the country are as follows*:

State	Stunted %	Wasted %	Underweight %
Andhra Pradesh	22.6	5.3	10.8
Arunachal Pradesh	32.8	4.2	9.6
Assam	42.4	3.8	16.4
Bihar	43.8	9.2	22.9
Chhattisgarh	21.5	7	13.1
Goa	4.1	0.6	1.7
Gujarat	40.8	7.8	21
Haryana	28.2	4.1	8.7
Himachal Pradesh	18.4	1.7	6.3
Jharkhand	43.8	6.2	19.3
Karnataka	39.7	3.2	17.1
Kerala	34.4	2.3	9.5
Madhya Pradesh	46.5	7	26.5
Maharashtra	47.7	4.1	16.5
Manipur	7.7	0.3	2.6
Meghalaya	18.2	0.4	4.5
Mizoram	26.7	2.3	5.9
Nagaland	28	5.3	6.6
Odisha	29.1	2.9	12.8
Punjab	18.4	3	5.9
Rajasthan	36.6	5.5	17.7

Sikkim	9.2	1.5	1.7
Tamil Nadu	13.4	3.6	7.1
Telangana	32.6	5.6	16.2
Tripura	40.5	6.3	16.6
Uttar Pradesh	48	3.9	19.4
Uttarakhand	21	1.5	5.4
West Bengal	38	7.5	13
Andaman & Nicobar Islands	8.7	2.3	3.9
Dadra & Nagar Haveli - Daman & Diu	35.9	3.4	16.1
Delhi	41.9	3	20.6
J&K	12.1	0.7	3
Ladakh	11	0.2	2
Lakshadweep	46.5	11.9	25.1
Puducherry	40.2	6.8	13
UT-Chandigarh	26.3	1.8	11.9

* Data is for the month of October 2024 from Poshan Tracker
