

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION NO. 3486
TO BE ANSWERED ON 21.03.2025

ANEMIA AMONG WOMEN

3486. SHRI MANI A:
SMT. VIJAYLAKSHMI DEVI:
MS. MAHUA MOITRA:
DR. NISHIKANT DUBEY:

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

- (a) the number of women suffering from anemia and children affected by malnutrition in the country especially in Jharkhand and particularly in Dharmapuri Parliamentary constituency in Tamil Nadu;
- (b) the details of the measures being taken by the Government to address said issues, including specific programs and initiatives launched therefor;
- (c) the number of women with anemia and malnourished children in said States, district-wise;
- (d) the details of funds, resources, and assistance provided to said States to address the above issue; and
- (e) the details of the incidence of malnutrition from pregnancy to age of five during the last ten years, State-wise, year-wise?

ANSWER

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

(a) to (e) 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 mission, where the responsibility for implementation of various activities lies with the States and UTs. This mission is a universal self-selecting umbrella where there are no entry barriers for any

beneficiary to register and receive services. This mission is being implemented across the country including Jharkhand and Tamil Nadu.

The objectives of Mission are as follows:

- To contribute to development of human capital in the country;
- Address challenge of malnutrition;
- Promote nutrition awareness and good eating habits for sustainable health and wellbeing

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 mission, 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 in January 2023. 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 for 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 at least once a week for preparation of Hot Cooked Meal 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 this Mission, one of the major activities undertaken is Community Mobilization and Awareness Advocacy to educate people on nutritional aspects as adoption of good nutrition habit requires sustained efforts for behavioural change. State and UTs are conducting and reporting regular sensitisation activities under Jan Andolans 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.

Anemia Mukht Bharat (AMB) program is implemented by Government of India to reduce prevalence of anemia among children and women including pregnant women and lactating mothers in life cycle approach through implementation of six interventions- Prophylactic Iron and Folic Acid supplementation (IFA Syrup is provided biweekly to Children 6-59 months, IFA Pink tablet is provided once weekly to children 5-9 years, IFA Blue is provided once weekly to adolescents 10-19 years, IFA Red is provided once weekly to Women of Reproductive age group and IFA Red tablets (daily for 180 days) are provided to pregnant women and lactating mothers), Deworming (Pregnant women are provided albendazole tablet in second trimester and all children are provided albendazole tablets during National Deworming Day), Intensified Behavioral Change Communication campaign, Testing for anemia and treatment as per anemia management protocols, mandatory provision of IFA fortified food in public health program and addressing non nutritional causes of anemia especially malaria, fluorosis and hemoglobinopathies) via robust institutional mechanisms.

Details of women suffering from anaemia are released under National Family Health Survey (NFHS), which is conducted by the Ministry of Health & Family Welfare. As per National Family Health Survey 5 (2019-21), the prevalence of anaemia among all women aged 15-49 years is 57 percent in the country.

The District wise prevalence of anemia among women as per National Family Health Survey-5 (2019-21) for the State of Jharkhand and Tamil Nadu, is available at <https://www.data.gov.in/catalog/national-family-health-survey-5-nfhs-5-india-districts-factsheet-data>

Under Mission Poshan 2.0, funds released to Jharkhand and Tamil Nadu since 2021-22, is provided at **Annexure – I**.

The State-wise malnutrition indicators of children (0-5 years) in the country for Feb 2023, Feb 2024 and Feb 2025 as per Poshan Tracker is provided at **Annexure – II**.

The District-wise malnutrition status of children (0-5 years) in Jharkhand and Tamil Nadu including in Dharmapuri Parliamentary Constituency (which includes Dharmapuri and Salem districts) is provided at **Annexure – III**.

The detail of women suffering from anemia in the Jharkhand, Tamil Nadu and Dharmapuri Parliamentary constituency (which includes Dharmapuri and Salem districts) in Tamil Nadu is provided at **Annexure-IV**.

The detail of measures taken by Ministry of Health & Family Welfare to address anemia, in addition to mentioned above, is provided at **Annexure-V**.

Annexure-I

ANNEXURE REFERRED IN REPLY TO PART (d) OF LOK SABHA QUESTION NO. 3486 FOR 21.03.2025 REGARDING “ANEMIA AMONG WOMEN” ASKED BY SHRI MANI A, SMT. VIJAYLAKSHMI DEVI, MS MAHUA MOITRA AND DR. NISHIKANT DUBEY

Under Mission Poshan 2.0, funds released to Jharkhand and Tamil Nadu since 2021-22 are as follows:

(in crore)*

Jharkhand	Tamil Nadu
1,899.31	2829.35

* Funds released up to 28 February 2025

Annexure-II

ANNEXURE REFERRED IN REPLY TO PART (e) OF LOK SABHA QUESTION NO. 3486 FOR 21.03.2025 REGARDING “ANEMIA AMONG WOMEN” ASKED BY SHRI MANI A, SMT. VIJAYLAKSHMI DEVI, MS MAHUA MOITRA AND DR. NISHIKANT DUBEY

State wise details of malnutrition indicators of children (0-5 years) in the country for Feb 2023, Feb 2024 and Feb 2025 as per Poshan Tracker are as follows:

S. No.	State	Feb-23	Feb-24			Feb-25				
		Stunted%	Wasted%	Underweight%	Stunted%	Wasted%	Underweight%	Stunting%	Wasting%	Underweight%
1	Andhra Pradesh	20.00	4.95	9.69	20.30	5.49	9.77	18.27	4.83	7.91
2	Arunachal Pradesh	32.07	4.90	12.50	30.26	4.72	8.97	37.18	4.54	10.76
3	Assam	38.76	7.17	18.27	40.28	4.50	15.63	42.79	4.12	16.41
4	Bihar	41.60	10.52	25.10	41.44	9.99	23.25	47.33	9.58	24.09
5	Chhattisgarh	37.40	13.54	17.11	33.57	9.90	15.20	26.20	6.96	13.35
6	Goa	25.79	6.03	11.17	18.36	2.37	5.56	7.51	1.10	2.46
7	Gujarat	51.80	7.69	22.43	43.48	8.30	19.82	36.53	7.95	19.84
8	Haryana	30.74	7.33	12.49	26.40	4.98	7.90	27.63	4.17	8.38
9	Himachal Pradesh	25.05	3.47	8.97	19.79	1.88	5.93	19.47	2.07	6.31
10	Jharkhand	40.40	9.70	23.09	41.52	7.86	18.58	43.91	6.39	19.14
11	Karnataka	39.41	8.41	19.95	40.72	7.86	18.33	41.20	3.68	17.61
12	Kerala	35.73	8.70	14.43	32.93	3.20	9.41	37.05	2.93	10.30
13	Madhya Pradesh	54.12	7.69	26.22	41.26	6.47	21.89	46.60	7.04	25.42
14	Maharashtra	46.06	7.11	19.83	48.63	5.42	18.19	44.45	3.80	14.63
15	Manipur	17.76	1.64	7.48	16.89	1.55	7.97	9.69	0.66	2.77
16	Meghalaya	28.42	2.49	8.01	22.94	1.39	5.22	19.02	0.92	4.21
17	Mizoram	22.08	4.05	6.51	24.64	3.26	6.21	29.53	2.49	6.44
18	Nagaland	42.86	6.43	12.14	27.02	5.52	7.16	31.15	5.61	7.26
19	Odisha	31.17	5.00	14.62	28.17	3.60	12.27	28.95	2.98	11.88

20	Punjab	26.05	7.39	12.35	18.65	4.11	6.69	20.67	3.50	6.49
21	Rajasthan	34.10	11.43	20.32	37.43	7.71	17.63	38.57	6.31	18.67
22	Sikkim	14.97	3.10	3.81	12.53	2.61	2.24	10.26	2.04	2.02
23	Tamil Nadu	19.27	5.15	9.43	15.08	3.98	7.05	13.76	3.46	6.40
24	Telangana	27.27	4.86	13.41	29.25	4.63	12.55	33.39	5.25	15.44
25	Tripura	39.22	8.74	17.11	38.08	7.18	15.45	41.35	6.99	17.28
26	Uttar Pradesh	47.66	7.42	20.92	46.17	5.24	19.19	48.72	4.34	19.76
27	Uttarakhand	33.29	7.54	9.05	34.23	5.77	8.31	23.76	2.40	6.21
28	West Bengal	40.77	9.59	15.26	37.36	8.21	12.01	35.22	6.57	11.01
29	Andaman & Nicobar Islands	25.41	6.73	10.71	20.19	4.34	7.67	8.33	2.11	3.62
30	Dadra & Nagar Haveli - Daman & Diu	53.13	11.79	36.42	48.16	10.28	31.03	38.15	2.47	14.46
31	Delhi	22.40	2.01	10.01	38.43	2.00	15.92	42.90	2.51	17.81
32	J&K	15.37	1.85	5.89	16.38	2.28	4.41	14.32	1.28	3.47
33	Ladakh	22.32	3.66	6.67	13.13	0.89	2.58	10.31	0.19	1.54
34	Lakshadweep	NA	NA	NA	44.25	14.84	26.96	40.62	11.86	22.17
35	Puducherry	26.59	8.21	11.53	32.69	7.44	11.25	41.13	7.36	13.22
36	UT-Chandigarh	33.09	2.64	14.09	25.32	0.27	7.12	26.77	1.66	9.21
	Total	39.37	7.71	18.44	38.22	6.26	16.52	39.09	5.35	16.60

Annexure-III

ANNEXURE REFERRED IN REPLY TO PARTS (a and c) OF LOK SABHA QUESTION NO. 3486 FOR 21.03.2025 REGARDING “ANEMIA AMONG WOMEN” ASKED BY SHRI MANI A, SMT. VIJAYLAKSHMI DEVI, MS MAHUA MOITRA AND DR. NISHIKANT DUBEY

1) The District-wise malnutrition status of children (0-5 years) in Jharkhand for the month of Feb 2025 from Poshan Tracker is as follows:

S. No.	District	Stunted%	Wasted%	Underweight%
1	Bokaro	43.13	7.29	18.23
2	Chatra	42.92	6.09	13.98
3	Deoghar	40.99	6.41	15.93
4	Dhanbad	37.82	6.94	14.95
5	Dumka	48.18	6.16	21.34
6	East Singhbhum	48.61	5.11	22.07
7	Garhwa	41.60	8.69	15.38
8	Giridih	39.08	4.32	14.67
9	Godda	49.72	6.69	26.41
10	Gumla	46.15	5.99	19.43
11	Hazaribag	47.68	6.48	18.90
12	Jamtara	40.90	7.77	15.78
13	Khunti	46.25	7.20	22.34
14	Koderma	45.34	5.21	19.29
15	Latehar	48.69	6.39	25.85
16	Lohardaga	43.07	4.37	16.81
17	Pakur	45.73	5.34	18.53
18	Palamu	41.92	6.57	17.90
19	Ramgarh	52.41	8.10	26.39
20	Ranchi	32.68	6.64	13.39
21	Sahibganj	36.62	5.51	9.88
22	Seraikela-Kharsawan	45.78	4.51	21.65
23	Simdega	33.05	6.98	12.89
24	West Singhbhum	65.63	9.17	43.89
	Total	43.91	6.39	19.14

(2) The District-wise malnutrition status of children (0-5 years) in Tamil Nadu including in Dharmapuri Parliamentary Constituency (which includes Dharmapuri and Salem districts) for the month of Feb 2025 from Poshan Tracker is as follows:

S. No.	District	Stunted%	Wasted%	Underweight%
1	Ariyalur	12.09	3.23	6.59
2	Chengalpattu	12.84	3.71	7.07
3	Chennai	10.85	2.35	5.54
4	Coimbatore	11.42	2.81	5.13
5	Cuddalore	15.54	3.41	6.26
6	Dharmapuri	11.21	2.21	3.29
7	Dindigul	17.00	3.86	7.40
8	Erode	11.46	3.66	6.89
9	Kallakurichi	14.64	3.99	7.69
10	Kanchipuram	8.95	2.17	4.26
11	Kanyakumari	8.75	2.33	4.03
12	Karur	16.03	4.83	8.37
13	Krishnagiri	22.75	4.44	8.78
14	Madurai	13.48	3.49	6.78
15	Mayiladuthurai	16.91	3.74	5.96
16	Nagapattinam	13.08	3.96	6.25
17	Namakkal	15.45	5.04	8.09
18	Perambalur	19.38	5.21	10.37
19	Pudukkottai	17.02	4.26	7.68
20	Ramanathapuram	12.15	3.52	5.85
21	Ranipet	19.60	4.85	8.98
22	Salem	8.76	2.25	3.54
23	Sivaganga	11.39	3.94	6.47
24	Tenkasi	14.76	3.88	7.01
25	Thanjavur	11.08	3.19	4.99
26	The Nilgiris	25.67	5.14	14.00
27	Theni	16.88	4.31	6.66
28	Thiruvallur	16.57	3.53	7.54
29	Thiruvarur	14.80	3.77	5.30
30	Tiruchirappalli	11.73	3.40	6.78
31	Tirunelveli	17.96	3.87	8.75
32	Tirupathur	14.24	2.96	4.77
33	Tiruppur	8.19	2.62	4.19
34	Tiruvannamalai	13.53	3.37	6.17
35	Tuticorin	13.15	3.06	6.18
36	Vellore	16.60	4.30	7.82
37	Villupuram	13.54	3.47	6.00
38	Virudhunagar	18.25	3.96	8.88
	Total	13.76	3.46	6.40

Annexure-IV

ANNEXURE REFERRED IN REPLY TO PARTS (a and c) OF LOK SABHA QUESTION NO. 3486 FOR 21.03.2025 REGARDING "ANEMIA AMONG WOMEN" ASKED BY SHRI MANI A, SMT. VIJAYLAKSHMI DEVI, MS MAHUA MOITRA AND DR. NISHIKANT DUBEY

As per National Family Health Survey-5 (2019-21), the prevalence of anemia among women in Jharkhand and Dharmapuri Parliamentary constituency (Dharampuri and Salem district) in Tamil Nadu is as below:

Jharkhand	Tamil Nadu	Dharampuri district	Salem district
65.3%	53.4%	42.5%	46.3%

Annexure-V

ANNEXURE REFERRED IN REPLY TO PARTS (b and d) OF LOK SABHA QUESTION NO. 3486 FOR 21.03.2025 REGARDING “ANEMIA AMONG WOMEN” ASKED BY SHRI MANI A, SMT. VIJAYLAKSHMI DEVI, MS MAHUA MOITRA AND DR. NISHIKANT DUBEY

The detail of measures taken by Ministry of Health & Family Welfare to address anemia, in addition to mentioned above:

The Ministry of Health and Family Welfare implements Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N) strategy in a life cycle approach under National Health Mission (NHM), which includes interventions to address anemia and malnutrition as placed below:

- Nutrition Rehabilitation Centers (NRCs) are set up at public health facilities to provide in-patient medical and nutritional care to children under 5 years suffering from Severe Acute Malnourishment (SAM) with medical complications with special focus on improving the skills of mothers and caregivers on timely, adequate and appropriate feeding for children.
- Mothers' Absolute Affection (MAA) Programme is implemented to improve breastfeeding coverage which includes early initiation of breastfeeding and exclusive breastfeeding for first six months followed by counselling on age-appropriate complementary feeding practices.
- Lactation Management Centres: Lactation Management Units (LMU) are facilities established to provide lactation support to mothers and to facilitate expression of mother's own milk and Comprehensive Lactation Management Centres (CLMC) are established to ensure availability of safe, pasteurized Donor Human Milk for feeding of sick, preterm and low birth weight babies admitted in Neonatal Intensive Care Units and Special Newborn Care Units.
- Under National Deworming Day (NDD) albendazole tablets are administered in a single fixed day approach via schools and Anganwadi centres in two rounds (February and August) to reduce the soil transmitted helminth (STH) infestation among all children and adolescents (1-19 years).
- 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 including nutrition in convergence with Ministry of Women and Child Development.

The States are provided funds by the National Health Mission based on the proposals received in their Annual Programme Implementation Plans.
