

GOVERNMENT OF INDIA  
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

**LOK SABHA**  
**UNSTARRED QUESTION NO. 930**  
TO BE ANSWERED ON 05.12.2025

**NUTRITIONAL LEVELS IN PARTICULARLY VULNERABLE TRIBAL GROUP**

930. MD ABU TAHER KHAN:

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

- (a) whether the Government maintains data on nutrition levels among children belonging to Particularly Vulnerable Tribal groups (PVTGs), if so, the details thereof;
- (b) whether any tribal dominated districts have reported closure, irregular functioning/food shortage in Anganwadi centres, if so, the details thereof;
- (c) whether the Government has introduced a “Tribal Nutrition Card” with millet-based diet supply, considering high anaemia among tribal children, if so, the details thereof; and
- (d) whether the Ministry proposes a separate budget line for nutrition in Forest Rights Act (FRA) and Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) households with 0–6-year children, if so, the details thereof?

**ANSWER**

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

**(a) and (b):** The details of nutrition indicators among children in the country including all Particularly Vulnerable Tribal groups (PVTGs) and other details related to Anganwadi Centres (AWCs) are available at <https://www.poshantracker.in/statistics> .

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, behavioural 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, 2013. 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 (Calcium, Zinc, Iron, Dietary Folate, Vitamin A, Vitamin-B6 and Vitamin B-12). **Extra Supplementary Nutrition is provided to Severely Acutely Malnourished (SAM) children as per National Food Security Act, 2013 (NFSA).**

Further, 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.

Ministry vide notification dated 12th September 2022 issued Integrated Nutrition Support Programme- Saksham Anganwadi and Poshan (2.0), Rules 2022 to regulate the entitlements specified under the provisions of National Food Security Act, 2013 for every pregnant woman and lactating mother, till six months after childbirth and every child in the age group of six months to six years.

Further, Ministry of Women & Child Development and Ministry of 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. The community-based approach involves timely detection and screening of children with severe acute malnutrition in the community, management for those without medical complications with wholesome, local nutritious foods at home and supportive medical care. The CMAM protocol includes an appetite test and screening process for children aged 6 months to 6 years who are severely acute malnourished (SAM) or severely underweight (SUW). Post-screening, such children are referred to Nutrition Rehabilitation Centers (NRC) or hospital facilities for further care.

**(c) and (d):** No specific policy measure has been taken by the Government on “Tribal Nutrition Card” however, to address the challenge of malnutrition, 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). It is a Centrally Sponsored mission, where the responsibility for implementation of various activities lies with the States and UTs. Further, this mission is a **universal self-selecting umbrella scheme where there are no entry barriers** for any beneficiary to register and receive services.

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