

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA  
UNSTARRED QUESTION NO. 3457  
TO BE ANSWERED ON 13<sup>th</sup> MARCH, 2026**

**HEALTH AND NUTRITION IN TRIBAL DISTRICTS**

**3457. SHRI JASHUBHAI BHILUBHAI RATHVA:  
SHRI BALYA MAMA SURESH GOPINATH MHATRE:**

Will the **Minister of HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) the details of the health and nutrition programmes implemented in tribal dominated district in the country during the last three years;
- (b) whether recent data indicates changes in anaemia, malnutrition and maternal health indicators among tribal populations;
- (c) if so, the details thereof along with the corrective action planned for high-burden districts of the country; and
- (d) the steps taken by the Government to reduce malnutrition and mortality rates in tribal-populated district of Maharashtra, particularly in Molghat, Amravati, Nandurbar and Palghar districts?

**ANSWER**

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY  
WELFARE  
(SHRI PRATAPRAO JADHAV)**

(a) to (d): The National Health Mission (NHM) provides support for improvement in health infrastructure, availability of adequate human resources in health facilities, to improve availability and accessibility to quality healthcare across the country including all tribal-dominated districts in the country.

Various initiatives carried out under NHM by the Government of India in the country including Maharashtra are operationalisation of Ayushman Arogya Mandir (AAM), Free Drugs Service Initiative, Free Diagnostic Service Initiative, National Ambulance Services, Mobile Medical Units, ASHAs, 24 x 7 Services and First Referral Facilities, Prime Minister's National Dialysis Programme, various activities under Reproductive & Child Health, Anaemia Mukta Bharat (AMB) strategy, TB Mukta Bharat Abhiyaan and Universal Immunization programme.

The Ministry of Health and Family Welfare is implementing Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N) strategy in a life cycle

approach under NHM, which includes interventions to increase awareness and address undernutrition including calorie deficiency, protein malnutrition and reduce mortality rate across the country, including tribal-populated districts of Maharashtra, particularly in Molghat, Amravati, Nandurbar and Palghar districts as placed below:

- **Facility Based New-born Care:** Neonatal Intensive Care Units (NICUs)/ Special Newborn Care Units (SNCUs) are established at Medical College and District Hospital, New-born Stabilization Units (NBSUs) are established at First Referral Units (FRUs)/Community Health Centres (CHCs) for care of sick and small babies.
- **Kangaroo Mother Care (KMC)** is implemented at facility and community level for low birth weight/ pre-term babies. It includes early and prolonged skin-to-skin contact with the mother or family member and exclusive and frequent breastfeeding.
- **Mothers' Absolute Affection (MAA):** Early initiation and exclusive breastfeeding for first six months and appropriate Infant and Young Child Feeding (IYCF) practices are promoted under Mothers' Absolute Affection (MAA).
- **Nutrition Rehabilitation Centres (NRCs)** are established at public health facilities where children with Severe Acute Malnutrition (SAM) and medical complications are admitted for treatment.
- **Lactation Management Centres** are established to ensure availability of Mother's Own Milk or safe, pasteurized Donor Human Milk for feeding of sick, preterm, low birth weight babies admitted in Neonatal Intensive Care Units and Special Newborn Care Units.
- **Anemia Mukht Bharat (AMB)** is implemented to reduce the prevalence of anemia among six beneficiary groups - Children (6-59 months), Children (5-9 years), Adolescents (10-19 years), Women of reproductive age (15-49 years), pregnant women and lactating mothers in a lifecycle approach.
  - National Deworming Day (NDD)
  - Vitamin A supplementation Programme
  - Home Based New-born Care (HBNC) and Home-Based Care of Young Children (HBYC) programme
  - Monthly Village Health, Sanitation and Nutrition Day (VHSND)

Under Mission Poshan 2.0, the Government 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 age 6 months to 6 years, pregnant women, lactating mothers and adolescent girls at Anganwadi centres as per nutrition norms, based on principles of diet diversity that provides quality protein, healthy fats and micronutrients.

There are various mechanisms and survey agencies, which generate data on tribal healthcare on a periodic basis. National Family Health Survey (NFHS) provides details on major changes in anaemia, malnutrition and maternal health indicators among all the high-burden tribal districts across the country. Census of India provides population and household details including Tribal areas. National Sample Survey provides household surveys on various socio-

economic subjects. The State-wise list of key indicators NFHS-5 may be extracted from below mentioned link:

<https://www.nfhsiips.in/nfhsuser/publication.php>

Coordination mechanisms exist between the Ministry of Tribal Affairs (MoTA) and the Ministry of Health and Family Welfare, as well as with State Health Departments, for planning, funding and implementation of tribal health programmes to address malnutrition. Under NHM, this Ministry provides technical and financial support to the States/UTs, to strengthen the public healthcare system in rural areas, based on the proposals received in the form of Programme Implementation Plans (PIPs). Government of India provides approval for the proposals received in the form of Record of Proceedings (RoPs) as per norms & available resources.

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