

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UN-STARRED QUESTION 3572
TO BE ANSWERED ON 13.03.2026

MALNUTRITION AND ANEMIA AMONG CHILDREN

3572. SHRI ANURAG SHARMA:

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

- (a) the details of the specific initiatives/schemes undertaken by the Government to address anemia and malnutrition particularly among children and adolescents in Jhansi and Lalitpur districts in Uttar Pradesh;
- (b) the details of the progress made in reducing malnutrition, stunting and wasting rates in the said districts along with the measures being taken to strengthen Anganwadi services therein;
- (c) whether the Government plans to implement community-based nutrition models and fortified food distribution programmes in the said district to address hidden hunger; and
- (d) if so, the details thereof along with the timeline for its implementation in the said districts?

ANSWER

MINISTER OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI ANNPURNA DEVI)

(a) and (b) To address the challenge of malnutrition, Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (of 14-18 years age 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. This Mission includes beneficiaries; Children under 6 years of age, pregnant women, lactating mothers and adolescent girls of the country including Jhansi and Lalitpur districts in Uttar Pradesh.

The Poshan Tracker Application data of malnutrition (Stunting, Wasting and Underweight) among those children under five in Jhansi and Lalitpur of Uttar Pradesh, who attended

Anganwadi Centres (AWCs) or received Anganwadi services at home is available at: <https://www.poshantracker.in/statistics>.

In addition, regular anthropometric monitoring—comprising systematic measurements of height and weight—is undertaken across the State. Special attention is accorded to children identified as malnourished, who are provided with counselling and need-based referral services to enable timely nutritional intervention and recovery.

One of the major activities undertaken under Mission Poshan 2.0 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 Maah and Poshan Pakhwada 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 (AWWs) are required to conduct two Community Based Events every month.

Further, Ministry of Women & Child Development and Ministry of Health & Family Welfare have jointly released the Protocol for Management of malnutrition in Children to prevent and treat severely acute malnutrition in children.

(c) and (d) : A key component is to enable the right kind of nourishment through Poshan Vatikas or Nutri-gardens that are located in AWCs across the country to provide easy and affordable access to fruits, vegetables, medicinal plants and herbs. To encourage diet-diversity and consumption of wholesome local produce, Poshan Vatikas have been developed at AWCs. The States and Union Territory Administrations are encouraged to decide menu suitable to the local conditions within the prescribed nutrition and food norms and to procure locally grown food items like millets, vegetables, condiments etc. The selection of ingredients, recipes and menu for supplementary nutrition rests with States/UTs in accordance with local palate and includes locally available cereals/millets, pulses, vegetables, nuts and fats.

The eligible beneficiaries—namely children aged 06 months to 06 years, pregnant women, and lactating mothers—are provided with supplementary nutrition. In accordance with the communication issued by the Department of Child Development and Nutrition, Government of Uttar Pradesh, dated 01 October 2020, and under the decentralized system, production units have been established at the block level in 43 districts of the State, including Jhansi and Lalitpur. These units are operated by Self Help Groups under the Uttar Pradesh State Rural Livelihood Mission and are responsible for the production and supply of recipe-based supplementary nutrition.

The recipe-based supplementary nutrition is fortified with Iron, Calcium, Magnesium, Zinc, Vitamin A, Vitamin B1, B2, B3, B6, B9, B12, and Vitamin C.

In view of the time required for establishing production units across all districts/projects, interim arrangements have been made in the remaining districts/projects. Under this arrangement, fortified edible oil and fortified wheat porridge are being supplied through NAFED, while fortified rice is being provided to beneficiaries through the Food and Civil Supplies Department. Fortified wheat porridge and fortified rice are enriched with Iron, Vitamin B9, and Vitamin B12, while fortified edible oil is enriched with Vitamin A and Vitamin D2.

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 nutrition concerns among adolescent girls, pregnant women, lactating mothers and children under 5 years, across the country including aspirational districts. Details are placed below:

- **Anemia Mukht Bharat (AMB)** strategy is implemented to reduce prevalence of anemia among children and women 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, and IFA Red tablets are provided weekly to women of reproductive age), Deworming, Intensified behavioral change communication campaign, Testing for anemia and treatment as per protocols, mandatory provision of IFA fortified food in public health programmes and addressing non nutritional causes of anemia via robust institutional mechanism.
- **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 Moderate and Severe Acute Malnourishment with medical complications with special focus on improving the skills of mothers and caregivers on timely, adequate and appropriate feeding for children.
- Under **National Deworming Day (NDD)** albendazole tablets are administered in a single fixed day approach via schools and Anganwadi centers in two rounds (February and August) to reduce the worm 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 childcare including nutrition in convergence with Ministry of Women and Child Development.
