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

LOK SABHA UNSTARRED QUESTION NO.1015 TO BE ANSWERED ON 4TH DECEMBER, 2015

NATIONAL NUTRITION POLICY

1015. SHRI RAJESH RANJAN: SHRI ARJUN MEGHWAL:

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

(a) whether the Government proposes to implement the National Nutrition Policy;

(b) if so, the details and salient features thereof along with the time by which the policy is likely to be implemented;

(c) whether the Government has constituted any Inter-Ministerial Group (IMG)/Expert panel to help to frame the policy, if so, the details thereof along with the recommendations/observations made by the group on the said policy;

(d) the role being played by the NITI Aayog in evolving a strategy on nutrition in view of the latest data available on malnutrition; and

(e) whether the Government proposes to provide special assistance to States and districts registering poor performance on the nutrition front and if so, the details thereof?

ANSWER THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA)

(a): National Nutrition Policy (NNP) has been adopted by the Government in 1993.

(b) & (c): The National Nutrition Policy (NNP) identified key action in various areas having impact on Nutrition such as agriculture, food production, food supply, education, information, health care, social justice, tribal welfare, urban development, rural development, labour, women and child development, people with special needs and monitoring and surveillance.

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The core strategy envisaged under NNP is to tackle the problem of nutrition through direct nutrition interventions for vulnerable groups as well as through various development policy instruments which will improve access and create conditions for improved nutrition.

- The direct short-term nutrition intervention suggested by NNP include: (i) Nutrition interventions for specially vulnerable group such as children below 6 yrs, adolescent girls and pregnant and lactating women, expanding the safety nets, facilitating behaviour change among mothers, reaching the adolescent girls and ensuring better coverage of expectant women; (ii) Fortification of essential food items with appropriate nutrients; (iii) Popularisation of low cost nutritious foods prepared from indigenous and locally available raw materials; (iv) Control of micronutrient deficiencies among vulnerable groups.
- The indirect long term nutrition interventions leading to institutional and structural changes including: (i) Food security for improved availability of food grains; (ii) Improvement of dietary patterns through production and demonstration; (iii) Policies for effecting income transfers so as to improve the entitlement package of the rural and urban poor – improving the purchasing power and strengthening public distribution system; (iv) Land reforms measures for reducing vulnerabilities of landless and landed poor; (v) Strengthen health & family welfare programme; (vi) Imparting basis health and nutrition knowledge; (vii) Prevention of food adulteration; (viii) Improvement in nutrition surveillance; (ix) Monitoring of nutrition programmes; (x) Research into various aspects of nutrition; (xi) Equal remuneration for women; (xii) Communication through established media (xiii) Minimum wage administration to ensure its strict enforcement and timely revision and linking it with price rise through a suitable nutrition formula –a special legislation for providing agricultural women labourers the minimum support, and at least 60 days leave by the 'employer in the last trimester of her pregnancy; (xiv) Community participation for generating awareness on NNP - active participation of community members in management nutrition programmes & related interventions through beneficiaries committees, participation of women in food production & processing, promoting kitchen gardens, food preservation, preparation of weaning food, generating demand of nutrition services; (xv) Education and literacy; (xvi) Improvement in status of women.

Further to this a National Plan of Action on Nutrition (NPAN) 1995 was laid down focusing on reducing undernutrition which entails a Multi-sectoral approach for accelerated action on determinants of malnutrition.

(d) & (e): NITI Aayog has been mandated to examine the emerging data on undernutrition and prepare, in consultation with ministries of Women and Child Development and Health and Family Welfare, a specific strategy for poor performing states/districts.

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