

**GOVERNMENT OF INDIA**  
**MINISTRY OF WOMEN AND CHILD DEVELOPMENT**  
**RAJYA SABHA**  
**QUESTION NO 21.12.2009**  
**ANSWERED ON**  
**MALNOURISHED CHILDREN**

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Smt. Jaya Bachchan

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

- (a) : whether it is a fact that, in terms of certain indicators such as underweight and stunted growth of children in the country, the situation is worse than sub-Saharan countries such as Ethiopia, Angola, Sudan and Congo;
- (b) : if so, the reasons therefor; and
- (c) : the steps Government has taken in the recent years to address the situation?

**ANSWER**

MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT

(SHRIMATI KRISHNA TIRATH)

(a)& (b):As per National Family Health Survey 3 (2005-06) the percentage of underweight and stunted children below 5 years of age in India is 42.5% and 48% respectively.

As far as comparison with other countries is concerned there are no authentic and comparable sources of data. One of the Reports captioned `Tracking Progress on Child and Maternal Malnutrition` by UNICEF has given country-wise data. However, such data is for the reference years 2003-2008, which is not uniform and in case of some countries, the data is limited and has variations as indicated in the footnotes. Hence comparison cannot be made on a rational basis.

The problem of malnutrition is multi-dimensional and inter-generational in nature, the determinants of which include household food insecurity, illiteracy and lack of awareness especially in women, access to health services, availability of safe drinking water, sanitation and environmental conditions and purchasing power etc. Besides early age at marriage of girls, teenage pregnancies resulting in low birth weight of the newborns, poor breastfeeding practices, poor complementary feeding practices, ignorance about nutritional needs of infants and young children and repeated infections further aggravate the malnutrition amongst children.

Tackling malnutrition amongst children requires an integrated approach. Prevention of early marriage, appropriate spacing in pregnancy, better Infant and Young child Feeding Practices including exclusive breast feeding, age appropriate complementary feeding, better hygienic conditions, immunization, Vitamin A supplementation, deworming, Oral Rehydration, Zinc supplementation during diarrhea, timely and quality feeding for acute malnutrition conditions, improved nutrition for adolescent girls, prevention of anemia, improved food and nutrient intake during pregnancy and lactation, better information and awareness about nutritional needs & behaviors and prevention and control of diseases would need to be promoted for mitigated the impact of malnutrition. All these need to be addressed in a holistic manner by effective intersectoral coordination, convergence and improved systems of delivery of services under different schemes and programmes of central and state governments.

(c):The Ministry of Women & Child Development is implementing the Implementing the Integrated Child Development Services (ICDS) Scheme through State Governments/UT Administration. The scheme provides a package of six services namely supplementary nutrition, immunization, health check-up, referral services, pre-school non-formal education and nutrition & health education for children 0-6 years, pregnant and lactating mothers.

To address the problem of malnutrition and ensure effective implementation of the scheme, the Government has recently Universalized the Scheme with special focus on SC/ST and minority habitations, revised the cost norms as well as the Nutritional and Feeding norms of the Supplementary Nutrition component of ICDS among others.

The revised Nutritional and Feeding norms are as under:

Category	Revised Rates (per	Revised Nutritional	beneficiary per day)
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Calories	Protein
(Kcal)	(g)

Children (6 months to 72 months)	Rs.4.00	500	12-15
(ii) Severely malnourished Children (6 months-72 months)	Rs.6.00	800	20-25
(iii) Pregnant women and Nursing mothers	Rs.5.00	600	18-20

Besides this, the schemes being implemented by different Ministries aimed at improving the nutritional status of children have been listed in Annex-I.

#### ANNEXURE-I SCHEMES / PROGRAMMES WHICH ADDRESS MALNUTRITION

1.Reproductive & Child Health Programme under the National Rural Health Mission being implemented by the Ministry of Health & Family Welfare has interventions for proper growth, development and survival of children which include: ?Janani Suraksha Yojana (JSY) to promote institutional deliveries, improved coverage and quality of Antenatal care, skilled care to pregnant women, etc. ?Immunization ?Integrated Management of Neonatal and Child Hood Illness ?Specific Programmes to prevent and combat micronutrient deficiencies of Vitamin A and Iron & Folic Acid through Vitamin A Supplementation for children till the age of 5 years and Iron & Folic acid Supplementation for infants, preschool children, adolescent girls, pregnant and lactating women. Iodised salt is being provided for combating Iodine Deficiency Disorders ?Treatment of severe acute malnutrition through Nutrition Rehabilitation Centres

(NRCs) set up at public health facilities

2.Nutrition Programme for Adolescent Girls in 51 districts to provide free food grains to undernourished adolescent girls and Kishori Shakti Yojna by Ministry of Women and Child Development.

3.National Programme for Nutritional Support to Primary Education (Mid Day Meal Scheme) by the Department of School Education & Literacy.

4.Nutrition and Health Education to increase the awareness and bring about desired changes in the dietary practices including the promotion of breast feeding and dietary diversification. Food and Nutrition Board of the Ministry of Women & Child Development is engaged in advocacy, trainings and generating awareness on important nutrition issues among different level of functionaries and the masses. Increased emphasis on Promotion of appropriate Infant and Young Child Feeding Practices which are as follows:- ?Initiation of breastfeeding immediately after birth, preferably within one hour. ?Exclusive breastfeeding for the first six months ?Appropriate and adequate Complementary feeding from six months of age while continuing breast feeding. ?The National Guidelines on Infant and Young Child Feeding have been developed and disseminated all over the country. ?Implementation of The Infant Milk Substitutes, Feeding Bottles and Infant Foods

(Regulation of Production, Supply and Distribution) Act 1992 and amended in 2003.

5. Availability of essential food items at subsidized cost through Targeted Public Distribution System, Antodaya Anna Yojna by the Department of Food & Consumer Affairs

6. Other measures include improving agricultural and horticulture produce and improving the purchasing power of the people through various income generating schemes.