

GOVERNMENT OF INDIA  
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

**LOK SABHA**  
**UNSTARRED QUESTION NO. 3124**  
TO BE ANSWERED ON 09.08.2024

**MALNUTRITION AMONG WOMEN AND CHILDREN**

3124. SHRI BIDYUT BARAN MAHATO:

Will the Minister of Women and Child Development be pleased to state:

- (a) The details of the schemes presently run by the Government to eradicate malnutrition among women and children;
- (b) Whether any complaints have been received regarding the said schemes;
- (c) If so, the details thereof along with the action taken by the Government against the concerned persons, so far;
- (d) Whether the Government is considering to monitor the said schemes, if so, the details thereof; and
- (e) The names and details of the schemes related to child and maternal health in remote rural areas and villages far away from the district headquarters?

**ANSWER**

MINISTER OF WOMEN AND CHILD DEVELOPMENT  
(SHRIMATI ANNPURNA DEVI)

**(a) to (e)** Anganwadi services, Poshan Abhiyaan and Scheme for Adolescent girls (14-18 years in Aspirational Districts and North-East region) were subsumed under Mission Saksham Anganwadi and Poshan 2.0 (Mission Poshan 2.0) during the 15th Finance Commission. Mission Poshan 2.0 seeks to address the challenge of malnutrition through improved nutrition content and delivery. This is a universal self-selecting (no entry barriers) scheme available to all the beneficiaries who enroll at the Anganwadi Centers (AWCs) and is being implemented in all States/UTs across the country.

Under Mission Poshan 2.0 a strategic shift has been made for reduction in malnutrition and for improved health, wellness and immunity through community engagement, outreach, behavioral change, and advocacy. The scheme 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 wasting, underweight prevalence, stunting and anaemia.

Under this scheme, Supplementary Nutrition is provided to Children (6 months to 6 years), Pregnant Women, Lactating Mothers and Adolescent Girls to address the intergenerational cycle of malnutrition by adopting a life cycle approach. The Supplementary nutrition is provided in accordance with the nutrition norms contained in Schedule-II of the National Food Security Act. To address the challenge of malnutrition more effectively, these norms have been revised. 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 quality protein, healthy fats and micronutrients.

Fortified rice is being supplied to AWCs to meet the requirement of micro-nutrients and control anaemia among women and children. Greater emphasis is being given on the use of millets for preparation of Hot Cooked Meal at least once a week and Take Home ration (THR – not raw ration) at Anganwadi centers for beneficiaries.

Ministry of Women & Child Development and Ministry of Health & Family Welfare jointly released the protocol for Community Management of Malnutrition (CMAM) to prevent and treat severe acute malnutrition in children and for reducing associated morbidity and mortality.

Under Mission Poshan 2.0, one of the major activities undertaken is Community Mobilization and Awareness Advocacy leading to Jan Andolan to educate the people on nutritional aspects. State and UTs are conducting and reporting regular sensitisation activities under community engagement programmes during Poshan Maahs and Poshan Pakhwadas celebrated in the months of September and March-April respectively. Community Based Events (CBEs) have served as a significant strategy in changing nutrition practices and all Anganwadi workers are required to conduct two Community Based Events every month.

IT systems have been leveraged to strengthen and bring about transparency in nutrition delivery support systems at the Anganwadi centres. The 'Poshan Tracker' application was rolled out on 1st March, 2021 as an important governance tool. The Poshan Tracker facilitates monitoring and tracking of all AWCs, AWWs and beneficiaries on defined indicators. Technology under Poshan Tracker is being leveraged for dynamic identification of stunting, wasting, under-weight prevalence among children. The mobile application has also facilitated digitization and automation of physical registers used by AWWs that helps in improving their quality of work. Poshan Tracker is available in 24 languages including Hindi and English. It has facilitated near real time data collection and monitoring of Anganwadi Services, at all levels, which include daily attendance, Early Childhood Care and Education (ECCE), Provision of Hot Cooked Meal (HCM)/Take Home Ration (THR-not raw ration), Growth Measurement etc.

Mission Poshan 2.0 is a Centrally Sponsored scheme, where the responsibility of implementation of the scheme falls under the ambit of State Government/UT administration. Various matters pertaining to implementation of scheme are reviewed with States at various levels through sustained engagements/meetings/video conferences on regular basis.

In addition, Ministry of Women & Child Development is also implementing Pradhan Mantri Matru Vandana Yojana (PMMVY) which is a centrally sponsored scheme. It aims to provide cash incentive through Direct Benefit Transfer (DBT) mode to Pregnant Women & Lactating Mothers (PW&LM) for partial compensation for wage loss so that she can take adequate rest before and after delivery and to improve her health seeking behaviour. Benefit of ₹5,000/- in two instalments are provided for first child. Further, as per the new guideline for 'Mission Shakti', applicable with effect from 01.04.2022, the scheme seeks to promote positive behavioural change towards girl child by providing additional cash incentive of ₹6,000/- for the second child, if that is a girl child.

As informed by Ministry of Health and Family Welfare (MoHFW), the Ministry has implemented various interventions for addressing nutrition concerns among women and children across the country, including in rural areas:

1. Nutrition Rehabilitation Centres (NRCs) are set up at public health facilities to provide in-patient medical and nutritional care to children under 5 years of age suffering from Severe Acute Malnutrition (SAM) with medical complications. In addition to curative care, special focus is given on timely, adequate and appropriate feeding for children, correction of micronutrient deficiencies, improving the skills for mother and caregivers on complete age-appropriate caring and feeding practices.
2. Anaemia Mukh Bharat (AMB): The Government of India implements Anemia Mukh Bharat (AMB) programme to reduce prevalence of anemia among six beneficiary groups - Children 6-59 months, Children 5-9 years, Adolescents 10-19 years, Pregnant women, lactating mother and Women of Reproductive Age (20-49 years). The interventions are Prophylactic Iron and Folic Acid Supplementation, deworming among children 1-19 years and pregnant women, Intensified Behaviour Change Communication (BCC) Campaign, Provision of IFA fortified food in government funded public health programme and addressing non-nutritional causes of anaemia in endemic pockets with special focus on malaria, haemoglobinopathies and fluorosis, implemented via robust institutional mechanism.
3. Under National Deworming Day (NDD) albendazole tablets are administered in a single fixed day approach via schools and anganwadi centres in two rounds (February and August) to reduce the soil transmitted helminth (STH) infestation among all children and adolescents (1-19 years).
4. Mothers' Absolute Affection (MAA) Programme is implemented to emphasize on improving breastfeeding coverage which includes early initiation of breastfeeding and exclusive breastfeeding for first six months followed by age-appropriate complementary feeding practices through capacity building of frontline health workers and comprehensive IEC campaigns.

5. Lactation Management Centres: Comprehensive Lactation Management Centres (CLMC) are facilities established to ensure availability of safe, pasteurized Donor Human Milk for feeding of sick, preterm and low birth weight babies admitted in Neonatal Intensive Care Units and Special Newborn Care Units. Lactation Management Unit (LMU) are established for providing lactation support to mothers within the health facility for collection, storage and dispensing of mother's own breast milk for consumption by her baby.
6. Mother and Child Protection Card is the joint initiative of the Ministry of Health & Family welfare and the Ministry of Woman and Child Development which addresses the nutrition concerns in children.

\*\*\*\*\*