

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

STARRED QUESTION NO:83
ANSWERED ON:30.07.2010
DEATHS DUE TO MALNUTRITION OF CHILDREN
Guddu Shri Premchandra,Sinha Shri Yashwant

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

- (a) whether the infant mortality rate is on the rise on account of malnutrition amongst the children during the last three years;
- (b) if so, the number of infant deaths due to malnutrition reported during the last three years and the current year; and
- (c) the steps taken/proposed to be taken by the Government in this regard?

Answer

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD)

(a)to(c): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 83 FOR 30TH JULY, 2010

(a) & (b) Malnutrition is not a major cause of infant death though it can increase morbidity and mortality by reducing resistance to infections. As per the latest data available from Registrar General of India (RGI) for the period 2001-03, 2% of the total infant deaths were due to nutritional deficiencies.

As per the Sample Registration System (SRS), Registrar General of India (RGI), the Infant Mortality Rate has declined from 57 per thousand live births in the year 2006 to 53 per thousand live births in the year 2008.

(c) Government of India has taken the following measures to improve health and nutritional status of the vulnerable population.

A. Measures taken by Ministry of Health & Family Welfare.

1. Medical Supplementation

Vitamin A supplementation – for children till the age of 5 years.

Iron Folic Acid supplementation – for children upto 10 years, pregnant and lactating women.

Promotion of Iodised salt for daily use.

Zinc supplementation for treatment of diarrhea in children above 2 months of age.

2. Nutritional Rehabilitation Centres (NRCs) –

Establishment of 609 Nutritional Rehabilitation Centres (NRCs) in health facilities for inpatient management of severely malnourished children, where mothers are counselled on feeding practices and after recovery sent back home for regular follow up.

3. Training of Health Personnel on Integrated management of Neonatal and Childhood Illnesses.

On preventive, promotive and curative aspects and skill development on management of illness including Severe Acute Malnutrition (SAM) in community settings.

B. Measures taken by Ministry of Women & Child Development-

Integrated Child Development Services Schemes (ICDS) including supplementary nutrition - Addressing children under 6 years of age and providing a package of six services, namely supplementary nutrition, immunization health checkups, referral services, pre-school education, nutrition and health education.

C. Activities done with the convergence of both Ministry of Health & Family Welfare and Ministry of Women & Child Development.

Infant and Young Child Feeding Programme –

For promotion of early initiation of breast feeding (within one hour of delivery), exclusive breast feeding till 6 months and timely complementary feeding with continued breast feeding.

Village Health and Nutrition Days under National Rural Health Mission to provide nutritional counseling and preventative health services at the Aganwadi Centres by ANMs, ASHAs and AWW.

Nutritional Education to increase the awareness and bring about desired changes in the dietary practices including the promotion of breast feeding and dietary diversification.