

**GOVERNMENT OF INDIA
WOMEN AND CHILD DEVELOPMENT
LOK SABHA**

UNSTARRED QUESTION NO:1813

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MALNUTRITION

Bhagat Shri Sudarshan;Botcha Lakshmi Smt. Jhansi;Chaudhary Shri Arvind Kumar;Chauhan Shri Sanjay Singh;Joshi Shri Pralhad Venkatesh;McLeod Smt. Ingrid;Paswan Shri Kamlesh ;Ramshankar Dr. ;Reddy Shri Magunta Srinivasulu

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

(a) the number of newborn girl died in the country during the last three years and the reasons for such death and the corrective steps taken by the Government in this regard ;

(b) the number and percentage of children died due to malnutrition in the country during the last two years along with its percentage in terms of total malnutrition deaths in the world;

(c) whether the current initiatives are adequate to meet the target as envisaged to address the problem of malnutrition among children by 2015 in the UN Millennium Summit; and

(d) if so, the details thereof and the steps taken by the Ministry to tackle malnutrition of children in the 0-5 age group?

Answer

MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT(SHRIMATI KRISHNA TIRATH)

(a) to (d): The Infant Mortality Rate which is the number of infant deaths (age less than one year) per thousand live births has been 56, 55 and 52 for the years 2007, 2008 and 2009 for girls.

As per the Report on 'Causes of Death – 2001-03 in India' by Registrar General of India, nutritional deficiencies are responsible for only 2% death of infants. Among infants, top 10 causes of death are Perinatal conditions (46%), Respiratory infections (22%), Diarrheal diseases (10%), Other infections and parasitic diseases (8%) etc. Deaths due to perinatal conditions are in a higher proportion among males whereas deaths due to most of the other causes are higher in proportion among females. Globally, 21% of deaths in children younger than five years is attributable to stunting, severe wasting, low birth weight etc. largely due to synergistic relationship with infectious diseases. (As per The Lancet, 2008).

The Millennium Summit, 2000 ratified the UN Millennium Declaration outlining the Millennium Development Goals(MDGs). The Millennium Development Goal (MDG) -1 is regarding eradication of extreme poverty and hunger, which targets to halve by 2015 the proportion of people who suffer from hunger. The problem of malnutrition is complex, multi-dimensional and inter-generational in nature, and cannot be improved by a single sector alone. Poverty and hunger along with household food insecurity, illiteracy and lack of awareness especially in women, access to health services, availability of safe drinking water, sanitation and proper environmental conditions are some of the determinants of malnutrition. Infact, improvement in malnutrition is linked to achievement of six of the Millennium Development Goals

The Government accords high priority to the issue of malnutrition and child mortality and has been implementing several schemes/programmes of different Ministries/Departments through State Governments/UTs. Under the National Rural Health Mission (NRHM), the Reproductive and Child Health Programme Phase II comprehensively integrates interventions that improve child health and address factors contributing to morbidity and mortality.

The Interventions under the Child Health for reducing child morbidity and child mortality are as follows:

Integrated Management of Neonatal and Childhood Illness (IMNCI) and Pre Service Integrated Management of Neonatal and Childhood Illness.

Facility Based Integrated Management of Neonatal and Childhood Illness(F-IMNCI)

Early detection and appropriate management of Diarrhoea disease.

Early detection and appropriate management of Acute Respiratory Infections and other infections

Navjaat Shishu Suraksha Karyakaram (NSSK), a programme for training health care providers on Basic newborn care and resuscitation.

Infant and Young Child feeding.

Immunization against six vaccine preventable diseases.

Vitamin A supplementation and Iron and Folic Acid supplementation.

Establishment of Sick New Born Care at District Hospitals, New Born Care corners at 24x7 Primary Health Centres (PHCs) to provide new born and child care services.

Establishment of Nutritional Rehabilitation Centres to address severe and acute malnutrition.

Besides the above there are schemes/programmes which directly or indirectly have an impact on the nutritional status. These schemes, interalia, include Integrated Child Development Services (ICDS) of Ministry of Women and Child Development, Mid Day Meals Scheme of Ministry of Human Resource Development, Drinking Water & Total Sanitation Campaign, National Rural Livelihood Mission (NRLM), Mahatma Gandhi National Rural Employment Guarantee Scheme (MNREGS) of Ministry of Rural Development & Targeted Public Distribution System of Department of Food & Public Distribution etc.

Several of the schemes namely, ICDS, NRHM, Mid Day meal (MDM), National Rural Livelihood Mission have been expanded to provide for increased coverage and improved services to the people which would further improve the nutrition situation and move towards achieving the MDGs..

The Integrated Child Development Services (ICDS) Scheme provides a package of six services, namely, supplementary nutrition, pre-school non-formal education, nutrition & health education, immunization, health check-up and referral services. The Scheme, at present is operational in 6719 Projects and 12.49 lakh AWCs. The scheme being self selecting, the services are being availed by 918.65 Lakh beneficiaries which include 751.03 Lakh children and 167.62 Lakh Pregnant and Lactating Mothers as on 31.12.2010.