

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

UNSTARRED QUESTION NO:1052  
ANSWERED ON:05.08.2011  
IMPACT OF ILLICIT LIQUOR ON CHILDREN  
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**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

- (a) whether the poor parents in tribal areas of Andhra Pradesh feed their children illicit liquor instead of milk;
- (b) if so, the details thereof;
- (c) the impact of this on the growth of children; and
- (d) the steps taken by the Government in this regard?

**Answer**

THE MINISTER OF STATE FOR HEALTH & FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY)

(a) & (b): Ministry of Health & Family Welfare does not have any such report or information.

(c) & (d): In view of the above, the question does not arise. However, milk is a wholesome food and its low consumption along with low consumption of other foods such as cereals, pulses, vegetables and fruits would adversely affect the growth of children.

The Government of India is implementing several interventions to prevent and control malnutrition among under five year children and other vulnerable groups, some of which are as follows:

(1) Under the Integrated Child Development Services (ICDS) scheme, supplementary nutrition is provided to bridge the gap between the Recommended Dietary Allowance and the Actual Dietary Intake. Children under six years are provided with 500 k.calories and 12-15 g of protein in the form of Take Home Ration and /or morning snack and hot cooked meal. Besides the supplementary nutrition, the other services under ICDS included pre-school non-formal education, nutrition & health education, immunization, health check-up and referral services for women and children.

(2) Under the Reproductive & Child Health Programme of Ministry of Health & Family Welfare, Iron and Folic Acid and Vitamin A Syrup are provided for prevention and control of anaemia and Vitamin A deficiency in children.

(3) Promotion of infant and young child feeding practices that includes exclusive breastfeeding for first six months, introducing age-appropriate and safe complementary foods at six months of age, and continuing breastfeeding for up to two years or beyond, is being implemented by various levels of health workers including ASHAs.

(4) Nutrition Rehabilitation Centres (NRCs) have been established at district/taluk/CHC level to provide care in Severe and Acute Malnutrition cases.

(5) Village Health and Nutrition Days are organized under National Rural Health Mission every month to provide nutritional counselling and preventative health services at the Anganwadi Centres with participation of ANMS, ASHAs and AWWS.

(6) The Government of India and respective State Governments have been implementing several programmes to improve the household food security among the vulnerable groups in the rural, tribal and urban and drought affected areas, such as, Public Distribution System (PDS)/ Targeted Public Distribution System (TDPS).

(7) A recently introduced Rajiv Gandhi Schemes for Empowerment of Adolescent Girls (RGSEAG), namely SABLA provide a package of services including health and nutrition to adolescent girls in the age group of 11-14 years for out of school girls and 15-18 years for all girls for nutrition in 200 districts as a pilot.

(8) Another new scheme, the Indira Gandhi Matritva Sahyog Yojana (IGMSY), is piloted in 52 districts initially to provide an enabling environment for improved health and nutrition to pregnant and lactating mother and support for providing early & exclusive breastfeeding for the first six months of life.