GOVERNMENT OF INDIA WOMEN AND CHILD DEVELOPMENT LOK SABHA

STARRED QUESTION NO:79 ANSWERED ON:25.11.2011 MALNUTRITION Ram Shri Purnmasi;Solanki Shri Makhansingh

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

(a) whether the Government has constituted any Committee to deal with the problem of malnutrition among women and children in the country including rural/tribal/backward/remote areas/slums;

(b) if so, the details thereof, including the extent of malnutrition thereof, State-wise and Union Territory-wise;

(c) whether malnourishment is still prevalent in the country despite various schemes/programmes having been implemented by the Government;

(d) if so, the details thereof and the reasons therefor;

(e) the corrective steps taken by the Government to eradicate the problem of malnutrition; and

(f) the funds sanctioned and released alongwith its utilization reported by the State Governments/Non-Governmental Organizations to tackle the problem of malnutrition, Scheme-wise?

Answer

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

(a) to (f): A Statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO PART (a) to (f) of LOK SABHA STARRED QUESTION NO. 79 TO BE ANSWERED ON 25.11.2011 BY SHRI MAKAN SINGH SOLANKI: SHRI PURNMASI RAM REGARDING MALNUTRITION

As per the National Family Health Survey-3 (NFHS-3), 2005-06, 42.5% children under 5 years are underweight and 69.5 % are anemic. 35.6% of women in the age group of 15-49 years suffer from chronic energy deficiency (CED) (measured as low body mass index) and 55.3% are anemic. The State-wise details of the underweight and anemic children and women are at Annex 1 to 3.

Malnutrition is manifestation of several underlying factors & causes and is complex, multi-dimensional and inter-generational in nature. The causes are varied and include inadequate consumption of food, frequent infections, lack of availability of safe drinking water and proper sanitation, illiteracy specially in women, poor access to health services, low purchasing power, socio-cultural factors such as early marriages of girls, lack of care during pregnancy and infancy, ignorance about nutritional needs of infants and young children etc.

The Government has adopted National Nutrition Policy (NNP) 1993 and the National Plan of Action on Nutrition (NPAN) 1995. The approach to dealing with the nutrition challenges has been two pronged: Multi-sectoral approach for accelerated action on the determinants of malnutrition in targeting nutrition in schemes/programmes of all the sectors. As the multi-sectoral approach takes some time to show results and when implemented together, have a trickle down and horizontal effect to benefit the population over a period of time, other part of the approach is direct and specific interventions targeted towards the vulnerable groups such as children below 6 years, adolescent girls, pregnant and lactating mothers.

The Government has accorded high priority to the issue of malnutrition and is implementing several schemes/programmes of different Ministries/Departments through State Governments/UT Administrations. The schemes/programmes include the Integrated Child Development Services (ICDS) Scheme, National Rural Health Mission (NRHM), Mid Day Meal Scheme, Rajiv Gandhi Schemes for Empowerment of Adolescent Girls (RGSEAG) namely SABLA, Indira Gandhi Matritva Sahyog Yojna (IGMSY) as Direct targeted interventions. Besides, indirect Multi-sectoral interventions include Targeted Public Distribution System (TPDS), National Horticulture Mission, National Food Security Mission, Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS), Total Sanitation Campaign, National Rural Drinking Water Programme etc. All these schemes have potential to address one or other aspect of Nutrition. Several of the existing schemes/programmes have been expanded / universalized just before or during the Eleventh Five year Plan, hence, the results are likely to be visible after some time

The responsibility of implementation of most of the above schemes lies with State Governments/ UT Administrations. They have been advised from time to time to set up State Nutrition Council, Interdepartmental Coordination Committee, District Nutrition Council and draw up State Nutrition Action Plans and District Nutrition Action Plans. Further, frequent reviews with the State Governments are undertaken along with the monitoring mechanisms which are also inbuilt in various respective programmes. Based on these,

advisories and feedback are also sent to States/UTs by respective programmes under concerned Ministries for corrective actions.

Two new schemes have been introduced. One of them namely, Rajiv Gandhi Schemes for Empowerment of Adolescent Girls (RGSEAG), or SABALA would provide a package of services including health and nutrition to adolescent girls in the age 11- 18 years in 200 districts on a pilot basis. The other, namely Indira Gandhi Matritva Sahyog Yojna (IGMSY) would provide better enabling environment for improved health and nutrition to pregnant and nursing mothers. This is being implemented in select 52 district as a pilot to begin with. Both are using ICDS infrastructure and system.

The above mentioned measures are some of the steps taken in terms of consolidating the ICDS and towards reduction of malnutrition. Further, some of the recent decisions by the Government to improve the nutrition situation have been to (i) strengthen and restructure ICDS with special focus on pregnant and lactating mothers and children under three (ii) prepare a multi-sectoral programme to address the maternal and child malnutrition in selected 200 high-burden districts (iii) launch a nationwide information, education and communication campaign against malnutrition and (iv) bring strong nutrition focus inprogrammes in sectors like health, drinking water supply and sanitation, school education, agriculture, food & public distribution.

With the continuing attention to nutrition these targeted interventions and the cumulative effect of various schemes including new schemes which have been introduced, the malnutrition levels are expected to show a decline in the next NFHS survey as and when it is undertaken. The reduction in malnutrition levels is a gradual process being contingent upon a host of factors.

Funds released to the States/ UTs under ICDS, SABLA, IGMSY are Rs. 7487 crore, Rs. 512 crore and Rs. 294 crore respectively during 2011-12.