## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:5767 ANSWERED ON:11.05.2012 TRIBAL CHILD MORTALITY Naik Dr. Sanjeev Ganesh

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

(a) whether it is true that a large number of tribal children are dying even before they reach the age of six due to widespread malnutrition;

(b) if so, the details thereof;

(c) whether Government has formulated any special scheme for treatment of tribal children with severe acute malnutrition and to prevent and combat micronutrient deficiencies among tribal children;

(d) if so, the details thereof; and

(e) if not, the reasons therefor?

## Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

(a) & (b): Malnutrition is not a direct cause of death in children. As per estimates, malnutrition is an underlying cause of death in about 50 percent under five deaths.

There is no data available regarding death due to malnutrition in children including tribal children below six years of age.

(c)& d): The schemes to treat children with severe acute malnutrition and to prevent and to combat micronutrient deficiencies among children are being implemented through National Rural Health Mission (NRHM) and have a universal coverage for all the children including tribal children across the country . Under NRHM, 264 High Focus districts have been identified based on higher SC, ST population and week health indicates for focussed attention and additional resources. Similarly multi sectoral programme to address child nutrition in selected 200 high burden districts has been undertaken by department of women and child development.

The following interventions are being carried out under the Reproductive and Child Health Programme of National Rural Health Mission, and funds are being provided each year for carrying out following set of activities:

# Promoting appropriate infant and young child feeding practices through Village Health and Nutrition Days (VHNDs).

# Treatment of children with severe acute malnutrition at special units called the Nutrition Rehabilitation Centres (NRCs). Presently 657 such centres are functional all over the country. Priority is being given to establishment of NRCs in districts with large tribal population.

# Specific program to prevent and combat micronutrient deficiencies of Vitamin A and Iron & Folic Acid. Vitamin A supplementation for children till the age of 5 years and Iron & Folic Acid supplementation for children of 6 to 60 months.

# Management of malnutrition and common neonatal and childhood illnesses at community and facility level by training service providers in Integrated Management of Neonatal and Childhood Illnesses (IMNCI).

(e) Does not arise.