## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:7034 ANSWERED ON:18.05.2012 CALORIFIC VALUE OF FOOD Lagadapati Shri Rajagopal

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

- (a) whether protein and calorific value of food consumed per day per person has come down sharply in urban as well as rural areas of the country;
- (b) if so, the details of average protein and calorific value of food consumed per day per person in 1993-94 vis a vis 2009-2010 both in urban and rural areas;
- (c) the reasons for alarming decline in intake of protein and nutrients; and
- (d) steps taken/being taken by the Government to address the situation?

## **Answer**

## MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY)

(a) & (b) As per National Sample Survey Organisation Report (NSSO) on Nutritional Intake in India 2009-10 the protein & calorific value of food cousumed per day per person has come down in urban & rural areas of the country. The average protein & calorific value of food consumed per day per person during 1993-94 & 2009-10 in urban & rural areas is as given below:

Urban Rural

Protein(gm)

1993-94 57.2 60.2

2009-10 53.5 55.0
(Sech-I)

Calorie(K.Cal)

1993-94 2071 2153

(Sech.I)

(c) & (d) There could be multiple reasons for decrease in intake of protein and calorie. Government has been taking the following

measures to improve nutritional and health status of the population living in rural and urban areas of the country:

- 1. Targeted Public Distribution System.
- 2. Antyodaya Anna Yojana (AAY) for the poorest segments of the BPL Population.
- 3. Annapurna Scheme.
- 4. Integrated Child Development Services Schemes (ICDS).
- 5. Rajiv Gandhi Scheme for Empowerment of Adolescent Girls [RGSEAG] (SABLA).
- 6. National Programme of Nutritional Support to Primary Education (Mid Day Meal Programme).
- 7. Reproductive Child Health Programme under National Rural Health Mission (NRHM) includes:
- # Emphasis on appropriate Infant and Young Child Feeding.
- # Promotion of ORS with zinc supplementation for a period of two weeks during the diarrhoea management.
- # Integrated Management of Neonatal and Childhood Illnesses and malnutrition.
- # Treatment of severe acute malnutrition through Nutrition Rehabilitation Centers (NRCs) set up at public health facilities.
- # Specific Programme to prevent and combat micronutrient deficiencies of Vitamin A, Iron & Folic Acid. Vitamin A supplementation for children from 9 months till the age of 5 years. Iron & Folic Acid syrup to children from the age of 6 months to 5 years. Iron & Folic Acid Supplementation to pregnant and lactating women & adolescents.
- # National lodine Deficiency Disorders Control Programme (NIDDCP) for promotion of adequately iodated salt consumption at household level.
- 8. Prime Minister's National Council on India's Nutrition Challenges was set up in October, 2008 for policy direction, review & effective coordination between Ministries which all will have a sectoral responsibility for the challenge of Nutrition.
- 9. A National Nutrition Policy has been adopted in 1993 and a National Plan of Action for Nutrition (1995) is being implemented through various Departments of Government.
- 10.Nutrition Education to increase the awareness and bring about desired changes in the dietary practices including the promotion of breast feeding and dietary diversification is being encouraged under both the Integrated Child Development Services Scheme (ICDS) and National Rural Health Mission (NRHM).