## GOVERNMENT OF INDIA WOMEN AND CHILD DEVELOPMENT LOK SABHA

UNSTARRED QUESTION NO:137 ANSWERED ON:22.02.2013 ANEMIA AMONGST WOMEN AND CHILDREN Dhurve Jyoti;Naranbhai Shri Kachhadia

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

- (a) the details of various health programmes being run by the Government to check the prevalence of anemia amongst the children and women, State-wise with particular reference to Gujarat, Jharkhand and Madhya Pradesh;
- (b) whether the present programme to supply Iron and Folic Acid supplements is sufficient to check the anemia amongst women and children;
- (c) If not, the reasons therefor and the reaction of the Government thereto; and
- (d) to corrective measures adopted/ proposed to be adopted by the Government in this regard?

## **Answer**

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

(a) to (d): A mix of prevention, treatment, food diversification, awareness and education is a strategy adopted for reducing the prevalence of anemia in the country.

The Government is implementing various health programmes including the Reproductive & Child Health Programme under the umbrella of the National Rural Health Mission (NRHM) in all States/UTs including Gujarat, Jharkhand and Madhya Pradesh. Some of the steps taken to check prevalence of anemia under the NRHM are:

- i. Iron and folic acid supplementation by providing iron and folic acid tablets having 100 mg of elemental Iron and 0.5 mg of folic acid for at least 100 days to pregnant & lactating women, iron and folic acid syrup having 20 mg of elemental Iron and 100 mcg of folic acid per ml of liquid formulation to 6 months to 5 years children, small tablet having 30 mg elemental Iron and 250 mcg of folic acid to children 6-10 years
- ii. The Weekly Iron-Folic Acid supplementation Scheme (WIFS) has been launched targeting adolescent girls in order to decrease prevalence of anemia.
- iii. Identification and tracking of severely anemic pregnant women at all the sub centres and PHCs for their timely management.
- iv. Deworming: Children under 5 years of age are provided deworming tablets/syrups twice a year.
- v. Malaria control programme including distribution of Long Lasting Insecticide Nets (LLINs) and Insecticide Treated Bed Nets (ITBNs) in endemic areas to tackle the problem of anaemia due to malaria particularly in pregnant women and children.
- vi. Introduction of Safe Motherhood booklet and Mother and Child Protection (MCP) card which are tools to enhance awareness and improve access to quality antenatal, intranatal and postnatal care services.
- vii. Besides the above, Schemes/programmes such as Integrated Child Development Services Scheme (ICDS), Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG), namely, SABALA, and the Mid-day Meal (MDM) provide supplementary nutrition/meal. NRHM, ICDS and SABLA (200 pilot districts) also have an inbuilt health and nutrition education component. Health and nutrition education is one of the activities during Village Health and Nutrition days (VHNDs) to promote dietary diversification, inclusion of iron folate rich food and increase the awareness to bring about desired changes in the dietary practices including the promotion of optimal Infant and Young Child Feeding Practices.
- viii. Besides, Food and Nutrition Board (FNB) of the Ministry of Women and Child Development with its 43 field units in India is engaged in creating awareness in nutrition in collaboration with State Government / institutions through exhibitions; advertisement in audio-visual and print medium; demonstrations of nutritious recipes; training of field functionaries of ICDS and NRHM; training in food preservation; celebration of nutrition related important days etc.