

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

UNSTARRED QUESTION NO:3096

ANSWERED ON:15.03.2013

ANAEMIA CASES

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

- (a) whether there is rise in anaemia cases amongst children, adolescents and women particularly pregnant women in rural as well as urban areas;
- (b) if so, the details of the cases reported along with the reasons therefor during each of the last three years and the current year, State/UT-wise;
- (c) the funds allocated and spent in the urban and rural areas for curbing the disease during the said period, State/UT-wise; and
- (d) the steps taken/being taken by the Government to curb the rise in number of anaemic cases in the country?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD)

(a): As per available National Family Health Survey (NFHS) report there is slight increase in percentage of anaemia among children and pregnant women in both rural and urban areas. However, the percentage of adolescent women with anaemia has shown a decline. The details are at annexure I

(b): The reasons attributed to anaemia among children is due to lack of intake of Iron rich food and poor absorption of iron from food due to various cultural practices. The State wise details are at annexure II.

(c): The funds allocated and spent for the purpose is under the RCH & NRHM Flexi - pool funds. The funds are allocated to States & UTs under various interventions of Child Health Programmes.

(d): Under the National Rural Health Mission for Controlling Iron Deficiency Anaemia following activities are being undertaken:

# Every pregnant and lactating woman is given 100 tablets of iron and folic acid (large) for prevention of anaemia. Pregnant/lactating women who are anaemic are given an additional 100 tablets.

# All children from the age of 6 months to 5 years are provided with 100 doses of iron and folic acid syrup in a year for prevention of anaemia. Treatment of anaemic cases is undertaken at the facilities.

# 'National Iron Plus Initiative' has been launched recently as an effective strategy for supplementation and treatment of anaemia in children, adolescents, pregnant and lactating women, in programme mode through life cycle approach.

Administration of supervised Weekly Iron and Folic Acid Supplements to adolescent girls and boys in government schools and adolescent girls who are not in schools through Anganwadi centres.

# Nutrition counselling of pregnant and lactating women, adolescents etc. by frontline workers e.g. ASHAs, Anganwadi Workers and ANMs to ensure regular intake of Iron Folic Acid, to promote dietary diversification and consumption of iron rich food, to promote exclusive breast feeding in infants for the first six months of life etc. is done in Village Health and Nutrition Days.

# Bi-annual de-worming (Albendazole 400mg) in children under five years of age, six months apart, for control of intestinal parasitic infestation.

# Screening of target groups for mild/moderate/severe anaemia and referring these cases to an appropriate health facility.

# Steps have been taken by the States for identification and tracking of cases of severe anaemia in pregnant women and their timely management.

# To tackle the problem of anaemia due to malaria in pregnancy, Long Lasting Insecticide Nets (LLINs)/ Insecticide Treated Bed Nets (ITBNs) are provided to pregnant women in endemic areas.