

# MALNUTRITION IN INDIA IS A WORRY IN A MODERN SCENARIO

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

'There is a greater need now to increase investment in women and children's health and nutrition' | Photo Credit: K.K. MUSTAFAH

Good nutrition has the power to empower the present and future generations. India's greatest national treasure is its people — especially women and children — but even after 75 years of independence, a majority of them do not get the required diet to meet their nutritional needs. A child's nutritional status is directly linked to their mother. Poor nutrition among pregnant women affects the nutritional status of the child and has a greater chance to affect future generations. Undernourished children are at risk of under-performing in studies and have limited job prospects. This vicious cycle restrains the development of the country, whose workforce, affected mentally and physically, has reduced work capacity.

While there has been some progress in tackling malnutrition among children and women over the past decade, the improvement has been modest at best. This is despite declining rates of poverty, increased self-sufficiency in food production, and the implementation of a range of government programmes. The National Family Health Survey (NFHS-5) has shown marginal improvement in different nutrition indicators, indicating that the pace of progress is slow. Children in several States are more undernourished now than they were five years ago.

While there was some reduction in stunting rates (35.5% from 38.4% in NFHS-4) 13 States or Union Territories have seen an increase in stunted children since NFHS-4; this includes Gujarat, Maharashtra, West Bengal and Kerala. (Stunting is defined as low height-for-age.) Malnutrition trends across NFHS surveys show that wasting, the most visible and life-threatening form of malnutrition, has either risen or has remained stagnant over the years (Wasting is defined as low weight-for-height).

India also has the highest prevalence of anaemia in the world (Anaemia is defined as the condition in which the number of red blood cells or the haemoglobin concentration within them is lower than normal). The NFHS-5 survey indicates that more than 57% of women (15-49 years) and over 67% children (six-59 months) suffer from anaemia. My home State, Assam, is among the low-performing States, with a huge burden of anaemic cases — 66.4% of women (15-49 years) and 68.4% children (6-59 months) are affected. It is imperative to introspect about these problems, which remain persistent, pervasive, and serious. Anaemia has major consequences in terms of human health and development: it reduces the work capacity of individuals, in turn impacting the economy and overall national growth. Developing countries lose up to 4.05% in GDP per annum due to iron deficiency anaemia; India loses up to 1.18% of GDP annually.

There is a greater need now to increase investment in women and children's health and nutrition to ensure their sustainable development and improved quality of life. While the Government's focus has been on the consolidation of several programmes to improve outcomes, there is a need for increased financial commitment. Experts have pointed out that Saksham Anganwadi and the Prime Minister's Overarching Scheme for Holistic Nourishment (POSHAN) 2.0 programme have seen only a marginal increase in budgetary allocation this year (20,263 crore from 20,105 crore in 2021-22). Additionally, 32% of funds released under POSHAN Abhiyaan to States and Union Territories have not been utilised.

India must adopt an outcome-oriented approach on nutrition programmes. It is crucial that parliamentarians begin monitoring needs and interventions in their constituencies and raise awareness on the issues, impact, and solutions to address the challenges at the local level. There has to be direct engagement with nutritionally vulnerable groups (this includes the elderly, pregnant women, those with special needs and young children), and contribute toward ensuring last-mile delivery of key nutrition services and interventions. This will ensure greater awareness on the one hand and proper planning and implementation of programmes at the grass-roots level on the other, which can then be replicated at the district and national levels.

With basic education and general awareness, every individual is informed, takes initiatives at the personal level and can become an agent of change. Various studies highlight a strong link between mothers' education and improved access and compliance with nutrition interventions among children. We must ensure our young population has a competitive advantage; nutrition and health are foundational to that outcome.

I strongly believe that there should be a process to monitor and evaluate programmes and address systemic and on the ground challenges. As a policymaker, I recommend that a new or existing committee or the relevant standing committees meet and deliberate over effective policy decisions, monitor the implementation of schemes, and review nutritional status across States. The country's response to malnutrition and its growing anaemia burden should be practical and innovative. This is critical to make an India that is malnutrition-free and anaemia-free a reality, and not just an aspiration. Every one is a stakeholder and should contribute towards ending malnutrition and anaemia. We should not become part of a tragedy that is preventable.

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