

Addressing malnutrition is critical to laying a strong foundation for human development.

Published On: 06-11-2022

In News: The frontliners of the first 1,000-day window of life. As some stories of change from across India show, it is crucial to empower frontline health workers who are driving mother and child nutrition and development outcomes at the last mile

What is Malnutrition?

Malnutrition refers to deficiencies or excesses in nutrient intake, imbalance of essential nutrients or impaired nutrient utilization. The double burden of malnutrition consists of both undernutrition and overweight and obesity, as well as diet-related noncommunicable diseases.

With India striving hard to achieve its MDG targets and reduce malnutrition, the attention needs to be focused on especially vulnerable groups to correct the bigger picture. Migrants are one of these and mostly come from the low socio-economic strata. Most of the migration for livelihood is either cyclical or distress migration, the latter being most common.

To address the persistent high burden of malnutrition, India has been undertaking several policy and programmatic efforts which include the flagship programme, the Prime Minister's Overarching Scheme for Holistic Nourishment (POSHAN) Abhiyaan (launched in April 2018) under the Ministry of Women and Child Development (MWCD)

What are all the main causes of Malnutrition?

1Poverty: Household food insecurity (NFSA is yet not effective, Mid-Day Meals and Supplementary iron and vitamins should be encouraged more).

2Illiteracy:

allliteracy especially in women

bIgnorance about nutritional needs of infants and young children and repeated infections further aggravate the situation.

cRight to Education Act can change scenario,

dNGO and community welfare programmes will also educate women about family planning and child nourishment.

eCases of severe acute under-nutrition are managed at home with simplified protocols and also clinically (wherever required) under appropriate medical supervision.

3Social strains on Women:

aEarly marriages of girls

Kamaraj IAS Academy

Plot A P.127, AF block, 6 th street, 11th Main Rd, Shanthi Colony, Anna Nagar, Chennai, Tamil Nadu 600040 Phone: **044 4353 9988 / 98403 94477** / Whatsapp : **09710729833**

bTeenage pregnancies resulting in low birth weight of the new-borns

cPoor breastfeeding practices

dPoor complementary feeding practices

eSchemes Like: RGSEAG namely SABLA and Indira Gandhi Matritva Sahyog Yojna (IGMSY) should be implemented comprehensively.

4Lack of infrastructure:

aPoor access to health services (Rural Health Mission need to sharpen and implemented tactfully)

bLack of availability of safe drinking water

cPoor sanitation and environmental conditions and low purchasing power etc.

dMNREGA has helped to achieve some milestones but much still needs to be done to improve rural infrastructure.

The increased malnutrition among children of migrants basically stems from the fact that they have to compromise and adjust in harsh, unhygienic conditions and temporary settlements. The Causes are:

1Poor socio-economic conditions hence affordability of food hampered

2Temporary settlements leading to unhygienic conditions

3Child labour ex: brick kilns

4Lack of sanitation and open defecation

5Inadequate access to health facilities and immunization

6Inadequate and improper breast-feeding and weaning

7No access to PDS facilities due to migration leading to poor nutrition in mother and children.

8Content of diet does not suffice for diverse nutritional requirement of children

9Small land holdings leading to inadequate production

What are all the steps taken by the Government?

1Weekly Iron Folic Acid Supplementation for adolescent (19-20 age) for anaemia treatment and fortified food must help them.

2SABLA scheme by Government of India.

3Integrated Child Development Scheme (ICDS)

4POSHAN Abhiyan

Who are Frontline Health Workers?

The ICDS team comprises the Anganwadi Workers, Anganwadi Helpers, Supervisors, Child Development Project Officers (CDPOs) and District Programme Officers (DPOs). Anganwadi Worker, a lady selected from the local community, is a community based frontline honorary worker of the ICDS Programme. She is also an agent of social

Kamaraj IAS Academy

Plot A P.127, AF block, 6 th street, 11th Main Rd, Shanthi Colony, Anna Nagar, Chennai, Tamil Nadu 600040 Phone: **044 4353 9988** / **98403 94477** / Whatsapp: **09710729833**

change, mobilizing community support for better care of young children, girls and women. Besides, the medical officers, Auxiliary Nurse Midwife (ANM) and Accredited Social Health Activist (ASHA) form a team with the ICDS functionaries to achieve convergence of different services.

The ICDS team comprises the Anganwadi Workers, Anganwadi Helpers, Supervisors, Child Development Project Officers (CDPOs) and District Programme Officers (DPOs). Anganwadi Worker, a lady selected from the local community, is a community based frontline honorary worker of the ICDS Programme. She is also an agent of social change, mobilizing community support for better care of young children, girls and women. Besides, the medical officers, Auxiliary Nurse Midwife (ANM) and Accredited Social Health Activist (ASHA) form a team with the ICDS functionaries to achieve convergence of different services

What is Integrated Child Development Scheme?

Integrated child development scheme (ICDS) helps provide health and related facilities to children from mother's womb (pre-natal) till 6 years age, in an integrated way. It provides- Immunisation, nutritional food, referral services, non-formal preschool education, health check-ups, training of pregnant and nursing mothers for better child rearing.

ICDS has helped India curb its maternal mortality rate (to 190) and infant mortality rate (to 44). It covers approximately 7.6 million pregnant women and lactating mothers and around 36 million children less than six years of age.

It provides supplementary nutrition like egg, dal etc. therefore good for development of children. Anganwadi enables children to inculcate school going habit. mothers are also taken care off well and are taught how to take care of their children.

What is POSHAN Abhiyan?

- POSHAN Abhiyaan (National Nutrition Mission) is a flagship programme of the Ministry of Women and Child Development.
- The Mission is aimed at improving the nutritional status of Children from 0-6 years, Adolescent Girls, Pregnant Women and Lactating Mothers in a time bound manner during the next three years beginning 2017-18.
- The Abhiyan aims to achieve convergence with various programmes i.e., Anganwadi Services, Pradhan Mantri MatrVandana Yojana, Scheme for Adolescent Girls, Janani Suraksha Yojana, National Health Mission, Swachh-Bharat Mission, Public Distribution System, Mahatma Gandhi National Rural Employment Guarantee Scheme.

Poshan Abhiyan: Analysis:

- Poshan Abhiyaan which focuses on reducing stunting, under-nutrition and anaemia in women and adolescents through direct cash transfers is a massive step towards eradicating malnutrition.
- Poshan Abhiyaan has got global recognition for its effort to eradicate malnutrition.
- Cash transfers under the mission provide an additional support to the family income.
- The whole issue of malnutrition requires concrete action starting from the grassroot level at households as well as the community level.
- The first and the most important step for reducing malnutrition in India is providing sufficient nutrition to pregnant and lactating mothers. The child then automatically is at much less risk of being malnourished.

Kamaraj IAS Academy

Plot A P.127, AF block, 6 th street, 11th Main Rd, Shanthi Colony, Anna Nagar, Chennai, Tamil Nadu 600040

Phone: 044 4353 9988 / 98403 94477 / Whatsapp: 09710729833