

### Rise in deaths due to cardiovascular diseases

1335. SHRIMATI KANIMOZHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware of a recent World Bank report which points to an impending "health crises" situation in South Asian countries;

(b) the details of steps taken by Government to combat the rise of cardiovascular diseases, which are said to become the leading cause of deaths in 2030;

(c) whether Government proposes to create awareness of healthy dietary habits among today's youth; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD):

(a) Yes.

(b) The Government of India has initiated a National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Disease and Stroke (NPCDCS) at an estimated outlay of Rs. 1230.90 crore for the Eleventh Five Year Plan. The programme focuses on health promotion, capacity building including human resource development, early diagnosis and management of these diseases and integration with the primary health care system. During 2010-11, the programme is being implemented in 30 selected districts of 21 States.

(c) and (d) Prevention and Behaviour change, which is the major component of the NPCDCS, *inter-alia*, provides for sustained IEC campaign to promote healthy lifestyle among the community, including healthy dietary habit in youth.

### Prevalance of anemia among children

†1336. SHRI BRIJLAL KHABRI:

SHRIMATI MAYA SINGH:

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

(a) whether it is a fact that the number of anemia has come down by a mere 4 per cent since 1998;

(b) if so, whether the National Rural Health Mission (NRHM) and other schemes have failed in providing benefit to targeted people;

(c) if not, the reasons for not being able to solve the problem of anemia among the children;

(d) the number of anemic children in the country, State-wise; and

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†Original notice of the question was received in Hindi.

(e) whether it is possible to solve this problem within a time limit?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD):

(a) As per NFHS -III (2005-06), the percentage of children with anaemia had reduced by 4.8 percent since 1998-99.

(b) Under NRHM launched in 2005 various steps have been taken for target population which include:

(i) Iron and Folic Acid supplementation as an important strategy under the Reproductive and Child Health programme. Supplementation of all children found to be anaemic is done with iron supplements from the age of 6 months to 10 years. Iron Folic Acid (IFA) in the form of tablets and liquid formulation are distributed through the sub-centres and through out-reach activities at Village Health and Nutrition Days.

(ii) Health and nutrition education to improve over all dietary intakes and promote consumption of iron and folate-rich foodstuffs.

(iii) Deworming of children twice a year.

(c) Does not arise

(d) The country and state-wise percentage of anaemic children is given in Statement (See below).

(e) Anaemia in children is multifactorial. It is influenced by cultural food practices, availability and consumption of iron rich food, sanitary condition, health and nutritional status of mothers of newborns, breastfeeding practices and birth weight. Therefore actions by various sectors over a period of time are required to solve this problem.

**Statement**

*State-wise prevalence of Anemia in children—NFHS-III (2005-06)*

Sl.No.	State	Anemia Children (6-59 months)%
1	2	3
1.	Andhra Pradesh	70.8
2.	Assam	69.6
3.	Arunachal Pradesh	56.9
4.	Bihar	78.0
5.	Chhattisgarh	71.2
6.	Delhi	57.0

1	2	3
7.	Goa	38.2
8.	Gujarat	69.7
9.	Haryana	72.3
10.	Himachal Pradesh	54.7
11.	J&K	58.6
12.	Jharkhand	70.3
13.	Karnataka	70.4
14.	Kerala	44.5
15.	Madhya Pradesh	74.1
16.	Maharashtra	63.4
17.	Manipur	41.1
18.	Meghalaya	64.4
19.	Mizoram	44.2
20.	Nagaland	n.a
21.	Orissa	65.0
22.	Punjab	66.4
23.	Rajasthan	69.7
24.	Sikkim	59.2
25.	Tamil Nadu	64.2
26.	Tripura	62.9
27.	Uttar Pradesh	73.9
28.	Uttarakhand	61.4
29.	West Bengal	61.0
	INDIA	69.5

**Encouragement to cultivation of herbal and medicinal plants**

†1337. SHRIMATI BIMLA KASHYAP SOOD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

†Original notice of the question was received in Hindi.