trafficking have been issued on 09.09.2009 and 12.10.2011 by the Government of India to all States/Union Territories. Further, the Ministry has been implementing the "Ujjawala" Scheme, under which financial assistance is being provided for prevention of trafficking and for rescue, rehabilitation and re-integration of victims of trafficking for commercial sexual exploitation.

Continuance of malnutrition

2631. DR. T.N. SEEMA: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) the total number of women and children suffering from malnutrition in the country, State-wise;
- (b) the reasons for the continuance of this pathetic situation even after 60 years of planning; and
 - (c) the steps that are being taken by Government to address this issue?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI KRISHNA TIRATH): (a) to (c) As per the National Family Health Survey-3 (NFHS-3), 2005-06, 42.5% children under 5 years are underweight and 69.5% are anemic. 35.6% of women in the age group of 15-49 years suffer from chronic energy deficiency (CED) (measured as low body mass index) and 55.3% are anemic. The State-wise details of the underweight and anemic children and women are given in Statement-I and II (See below).

The rate of malnutrition has declined from 42.7% in 1988-99 (NFHS-2) to 40.4% in 2005-06 (NFHS-3) for children below 3 years of age. However, anemia in children (6-35 months) has risen from 74.3% (NFHS-2) to 78.9% (NFHS-3) respectively. Similarly in women aged 15-49 years, the anemia has increased from 51.8% to 56.2%.

Malnutrition is manifestation of several underlying factors and causes and is complex, multi-dimensional and inter-generational in nature. The causes are varied and include inadequate consumption of food, frequent infections, lack of availability of safe drinking water and proper sanitation, illiteracy specially in women, poor access to health services, low purchasing power, socio-cultural factors such as early marriages of girls, lack of care during pregnancy and infancy, ignorance about nutritional needs of infants and young children etc.

The Government has accorded high priority to the issue of malnutrition and is implementing several schemes/programmes of different Ministries/Departments through State Governments/UT Administrations. The schemes/programmes include the Integrated Child Development Services (ICDS) Scheme, National Rural Health Mission (NRHM), Mid Day Meal Scheme, Rajiv Gandhi Schemes for Empowerment of Adolescent Girls (RGSEAG) namely SABLA, Indira Gandhi Matritva Sahyog Yojana (IGMSY) as Direct

targeted interventions. Besides, indirect Multi-sectoral interventions include Targeted Public Distribution System (TPDS), National Horticulture Mission, National Food Security Mission, Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS), Total Sanitation Campaign, National Rural Drinking Water Programme etc. All these schemes have potential to address one or other aspect of Nutrition. The responsibility of implementation of most of the above schemes lies with State Governments/UT Administrations.

Several of the existing schemes/programmes have been expanded/universalized just before or during the Eleventh Five year Plan, hence, the results are likely to be visible after some time. Further, States/UTs have been advised, from time to time, to set up State Nutrition Council, Interdepartmental Coordination Committee, District Nutrition Council and draw up State Nutrition Action Plans and District Nutrition Action Plans. In addition, the States have also been advised to conduct surveys on nutrition related indicators in order to get an updated position.

Statement-I

Prevalence of Underweight in children (under 5 years) and hronicEnergy Deficiency
(CED) in women (age 15-49 years), - NFHS 5, (2005-06),
State-wise

Sl.	State	% Underweight children	% Underweight Women
No.		(below 5 yrs of age)	(age 15-49 yrs)
			(BMI below normal)
1	2	3	4
1.	Andhra Pradesh	32.5	33.5
2.	Assam	36.4	36.5
3.	Arunachal Pradesh	39.5	16.4
4.	Bihar	55.9	45.1
5.	Chhattisgarh	47.1	43.4
6.	Delhi	26.1	14.8
7.	Goa	25.0	27.9
8.	Gujarat	44.6	36.3
9.	Haryana	39.6	31.3
10.	Himachal Pradesh	36.5	29.9
11.	J&K	25.6	24.6

1	2	3	4
12.	Jharkhand	56.5	43.0
13.	Karnataka	37.6	35.5
14.	Kerala	22.9	18.0
15.	Madhya Pradesh	60.0	41.7
16.	Maharashtra	37.0	36.2
17.	Manipur	22.1	14.8
18.	Meghalaya	48.8	14.6
19.	Mizoram	19.9	14.4
20.	Nagaland	25.2	17.4
21.	Orissa	40.7	41.4
22.	Punjab	24.9	18.9
23.	Rajasthan	39.9	36.7
24.	Sikkim	19.7	11.2
25.	Tamil Nadu	29.8	28.4
26.	Tripura	39.6	36.9
27.	Uttar Pradesh	42.4	36.0
28.	Uttarakhand	38.0	30.0
29.	West Bengal	38.7	39.1
	India	42.5	35.6

Statement-II

Prevalence of Anemia in Children and Women-NFHS 3 (2005-06), State-wise

S.N	State	ANEMIA	
		Children (6-59 months) %	Women (15-49 yrs) %
1	2	3	4
1.	Andhra Pradesh	70.8	62.9
2.	Assam	69.6	69.5

203

1	2	3	4
3.	Arunachal Pradesh	56.9	50.6
4.	Bihar	78.0	67.4
5.	Chhattisgarh	71.2	57.5
6.	Delhi	57.0	44.3
7.	Goa	38.2	38.0
8.	Gujarat	69.7	55.3
9.	Haryana	72.3	56.1
10.	Himachal Pradesh	54.7	43.3
11.	J&K	58.6	52.1
12.	Jharkhand	70.3	69.5
13.	Karnataka	70.4	51.5
14.	Kerala	44.5	32.8
15.	Madhya Pradesh	74.1	56.0
16.	Maharashtra	63.4	48.4
17.	Manipur	49.1	35.7
18.	Meghalaya	64.4	47.2
19.	Mizoram	44.2	38.6
20.	Nagaland	NA	NA
21.	Orissa	65.0	61.2
22.	Punjab	66.4	38.0
23.	Rajasthan	69.7	53.1
24.	Sikkim	59.2	60.0
25.	Tamil Nadu	64.2	53.2
26.	Tripura	62.9	65.1
27.	Uttar Pradesh	73.9	49.9
28.	Uttarakhand	61.4	55.2
29.	West Bengal	61.0	63.2
	India	69.5	55.3