received from nine States namely Arunachal Pradesh, Maharashtra, Meghalaya, Sikkim, Tamil Naidu, Uttrakhand, West Bengal, D & N Haveli and Lakshadweep.

Vedanta running anganwadi centres

4630. SHRI PRASANTA CHATTERJEE: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) whether Government of India or some State Governments have involved M/s Vedanta in running anganwadi centres in some States;
- (b) if so, the details of the same including terms and conditions, location etc.;
- whether any other Corporate or business houses/NGOs etc. have also been involved in addressing the issue of malnutrition among children;
- (d) whether Government has entered into an agreement with such Corporate of business houses to involve them in ICDS; and
 - (e) if so, the terms and conditions of such agreement?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI KRISHNA TIRATH); (a) to (e) The Scheme of ICDS is a Centrally Sponsored Programme implemented through the State Governments/UT Administrations. The Scheme, since inception, envisaged involvement of Voluntary Organisations, Central Social Welfare Board, local bodies, Panchayati Raj Institutions; (where these are functioning efficiently) etc. to be actively involved in this Programme for implementation, soliciting community support etc.

The States have been given the autonomy, within the overall framework of the ICDS, to entrust whole or part of the ICDS projects to a voluntary organization including NGOs for which grants to them would be provided by the concerned State Government/UT Administration. The responsibility for deciding on terms and conditions of MOUs, Agreements with NGOs etc. rests with the State Governments/ UT Administrations. The Central Government has not involved M/s. Vedanta in running AWCs in any State/UT.

High incidences of malnourishment

4631. DR. JANARDHAN WAGHMARE: SHRI N.K. SINGH:

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether Government has taken note of high incidences of malnourishment among children and women in the country;

- (b) if so, the details thereof and the reaction of Government thereto;
- (c) whether Government proposes to revamp/restructure the Integrated Child Development Services (ICDS) scheme; and
 - (d) if so, the details and the justification thereof?

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

Malnutrition is manifestation of several underlying factors and causes and is complex, multidimensional and inter-generational in nature. The approach to dealing with the nutrition challenges has been two pronged: Multi-sectoral approach for accelerated action on the determinants of malnutrition in targeting nutrition in schemes/programmes of all the sectors. As the multi-sectoral approach takes some time to show results and when implemented together, have a trickle down and horizontal effect to benefit the population over a period of time, other part of the approach is direct and specific interventions targeted towards the vulnerable groups such as children below 6 years, adolescent girls, pregnant and lactating mothers.

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 Yojna (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. 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.

The responsibility of implementation of most of the above schemes lies with State Governments/UT Administrations who have been advised from time to time to set up State Nutrition Council and other mechanisms to address the issue.

To address the issue of malnutrition, some of the recent decisions by the Prime Minister Council on India's Nutrition Challenges are to (i) strengthen and restructure ICDS with special focus on pregnant and lactating mothers and children under three (ii) prepare a multi-sectoral programme to address the maternal and child malnutrition in selected 200 high-burden districts (iii) launch a nationwide information, education and communication campaign against malnutrition and (iv) bring strong nutrition focus in programmes in sectors like health, drinking water supply and sanitation, school education, agriculture, food and public distribution. Work on all these issues is in progress. In addition, the proposed National Food Security Bill contemplates provision of supplementary nutrition under the ICDS scheme and maternity benefits for pregnant and lactating mothers and will contribute to Food security.

(c) and (d) The scheme of ICDS was initiated in 1975 with 33 projects and 4891 Anganwadi centres (AWCs). The scheme was gradually universalised, in phases, and finally in 2008-09 with approved 7076 projects and 14 lakh AWCs. The universalisation of the scheme led to increased outreach which necessitated operational, programmatic and other reforms.

In order to address various programmatic, managemental and Institutional reforms as well as to meet administrative and operational challenges, the Ministry of Women and Child Development has formulated a comprehensive proposal on ICDS Strengthening and Restructuring which inter-alia include addressing the gaps and challenges with (a) special focus on children under 3 years and pregnant and lactating mothers (b) strengthening and repackaging of service including, care and nutrition counseling services and care of severely underweight children (c) a provision for an additional Anganwadi Worker cum Nutrition Counselor for focus on children under 3 years of age and to improve the family contact, care and nutrition counseling for P&L Mothers in the selected 200 high-burden districts across the country, besides having pilots on link worker, 5% creche cum Anganwadi centre (d) focus on Early Childhood Care and Education (ECCE) (e) forging strong institutional and programmatic convergence particularly, at the district, block and village levels (f) models providing flexibility at local levels for community participation (g) improving Supplementary Nutrition Programme including cost indexation, (h) provision for the construction and improvement of Anganwadi centres (i) allocating adequate financial resources for other components including Monitoring and Management and Information System (MIS), Training and use of Information and communication technology (ICT) and (j) to put ICDS in a mission mode etc.

State-wise details of under weigh children and women

| Sl.No State | | Undernutrition | |
|-------------|-------------------|----------------------------|---|
| | | Children (below 5 years) % | Women (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 | 32.5 | 16.4 |
| 4. | Bihar | 55.9 | 45.1 |
| 5. | Chhattisaarh | 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. | Jammu and Kashmir | 25.6 | 24.6 |
| 12. | Jharkhand | 56.5 | 43.0 |
| 13. | Karnataka | 37.6 | 35.5 |
| 14. | Kerala | 22.9 | 18.0 |
| 15. | Madhva Pradesh | 60.0 | 41.7 |
| 16. | Maharashtra | 37.0 | 36.2 |
| 17. | Manipur | 22.1 | 14.8 |
| 18. | Meghalava | 48.8 | 14.6 |
| 19. | Mizoram | 19.9 | 14.4 |
| 20. | Nagaland | 25.2 | 17.4 |

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|--------------------|---------------|----------------|-------------------------|
| 1 | 2 | 3 | 4 |
| 21. | Odisha | 40.7 | 41.4 |
| 22. | Puniab | 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. | Uttrakhand | 38.0 | 30.0 |
| 29. | West Benaal | 38.7 | 39.1 |
| | India | 42.5 | 35.6 |

Demand for Anganwadi in Karnataka

- 4632. DR. VIJAY MALLYA: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:
- (a) whether the State Government of Karnataka had submitted to the Ministry a district and Taluk wise lists of Anganwadis totaling to 1156 Anganwadi;
- (b) whether the Minister would state what further action is proposed to be taken in this regard to expedite establishment of these institutions in the State; and
- (c) whether the State Government be apprised of the approval in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI KRISHNA TIRATH): (a) to (c) State Government of Karnataka sent a proposal for 1156 Anganwadi Centres. Government of India has since sanctioned 1141 Anganwadi Centres to the State of Karnataka.

Filling of reserved vacancies

4633. SHRI SANJAY RAUT: SHRI ANIL DESAI:

Will the PRIME MINISTER be pleased to state:

(a) whether it is a fact that DoPT has asked to submit a status report on whether the 60,000-odd reserved vacancies in Government jobs, including for the OBCs, have been filled;