

(c) and (d) The Government of India had constituted a High Level Empowered Committee (HLEC) on 29th July 2018 under the Chairmanship of Cabinet Secretary, to address the issues of stressed thermal power projects. The HLEC has submitted its report on 12th November 2018. As per HLEC report, various factors which are responsible for stress in some of the coal based power plants including issues related to Coal supply, slow growth in Power demand as compared to addition in capacity, delayed payments by DISCOMs, inability of the Promoter to infuse equity and service debt, slow implementation of project by the developers, issues related to Banks/FIs, Aggressive tariffs quoted by bidders in competitive bidding process, Regulatory and contractual disputes, legal issues related to auctioned coal mines and other Operational Issues.

The Government has approved a new coal linkage allocation policy in May 2017, named SHAKTI (Scheme for harnessing and allocating koyla transparently in India). Under the scheme, auction of coal linkages for Independent Power Producers (IPPs) with PPAs based on domestic coal has been conducted on 12th September 2017. IPPs having PPA but no coal linkages have participated in the auction and linkages have been granted to 11549 MW capacity (10 projects) including five stressed projects of total 8490 MW capacity, and these projects have been resolved.

Anaemia in women

*100. SHRI P.L. PUNIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that 51.4 per cent of Indian women in the reproductive age group are anaemic;

(b) if so, the details thereof along with data for the Scheduled Castes, Scheduled Tribes and Minority Communities; and

(c) whether Government has taken or proposes to take any measures for reducing the instances of anaemia among women in reproductive age group, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) As per National Family Health Survey (NFHS) - IV (2015-16), 53% women in reproductive age group (15-49 years) are anemic.

(b) As per NFHS-4, prevalence of anemia among Scheduled Castes, Scheduled Tribes and Minority Communities is as follows-

Schedule Caste -55.9 percent

Schedule Tribe -59.9 percent

Minority Community - 20.9 percent Muslim women and 28.5 percent women of other minority communities are anemic.

(c) Under the National Health Mission (NHM), following steps have been taken for reducing anaemia among women in reproductive age group:

- Reduction of Anemia is prioritized under the recently launched POSHAN Abhiyaan as it aims to reduce anaemia prevalence by 3 percent per year among children, adolescents, women in reproductive age group and pregnant women between the year 2018 and 2022. In this regard, Anemia Mukh Bharat (AMB) / Strategy (also known as Intensified National Iron Plus Initiative) has been formulated for holistic and comprehensive management of anemia. The AMB strategy includes six target age groups, six interventions and six institutional mechanisms (6X6X6). Details of AMB are given in the Statement (See below).
- Guidelines have been issued to the States/UTs for universal screening of pregnant women at all health facilities. 180 Iron and Folic Acid (IFA) tablets are to be given in the ante-natal period and 180 IFA tablets are to be given in the post-natal period to all pregnant women. If pregnant women are found to be clinically anemic, they are given double doses of tablets as part of treatment regimen. For Adolescent girls of 10-19 years of age, IFA tablet is provided weekly.
- To address anaemia due to worm infestation, deworming of pregnant women is done after first trimester of pregnancy and biannually in children and adolescents.
- To tackle the problem of anemia due to malaria particularly in women and children, Long Lasting Insecticide Nets (LLINs) and Insecticide Treated Bed Nets (ITBNs) are being distributed in endemic areas.
- Health and nutrition education through Information, Education and Communication (IEC) materials in the form of posters, hoardings, wall-writings and audio-visuals is undertaken.

Statement***Anaemia Mukh Bharat (AMB) strategy (6X6X6)***

- The Six target groups are i) children 6-59 months and ii) 5-9 years, (iii) Adolescents Girls and Boys aged 12-19 years, iv) women in reproductive age (15-49 years), v) pregnant women and vi) lactating women.
- There are six interventions, they are i) Prophylactic Iron and Folic Acid supplementation, ii) Deworming, iii) Intensified year-round Behaviour Change Communication Campaign, iv) Test and treat using digital method & point of care, v) Provision of Iron and Folic Acid fortified foods in public health programmes, vi) Addressing non-nutritional causes of anemia.
- There are six institutional mechanisms i) Intra-ministerial coordination, ii) National Anemia Mukh Bharat Unit, iii) National Centre of Excellence and Advanced Research on Anemia Control, iv) Convergence with other ministries, v) Strengthening supply chain and logistics vi) Anemia Mukh Bharat Dashboard and Digital Portal.

Implementation of recommendations of Sachar Committee

*101. SHRI BINOY VISWAM: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) the steps taken by Government during the last three years to implement the recommendations made by Sachar Committee Report;

(b) whether Kasturba Gandhi Balika Vidyalayas have been opened in Muslim populated areas in the last three years;

(c) whether any Equal Opportunity Commission (EOC) has been set up in the last three years to look into the grievances regarding discrimination by Government, if so, the details thereof; and

(d) whether civil rights centres have been opened in any University as per the follow up action, if so, the details thereof?

THE MINISTER OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) The Government took several decisions in respect of the follow-up action on the recommendations of Sachar Committee report aimed at improving the socio-economic