

1	2	3	4	5	6	7
17. Meghalaya		0	0	0	0	0
18. Mizoram		0	0	0	0	0
19. Nagaland		0	0	0	0	0
20. Odisha		0	0	1	15	17
21. Punjab		0	2	5	8	8
22. Rajasthan		5	5	6	12	6
23. Sikkim		0	0	0	0	0
24. Tamil Nadu		56	47	77	55	55
25. Telangana			13	15	19	25
26. Tripura		1	1	2	1	1
27. Uttar Pradesh		5	10	4	3	4
28. Uttarakhand		0	0	1	1	1
29. West Bengal		43	37	40	41	49
30. Andaman and Nicobar Islands		0	0	1	1	0
31. Chandigarh		0	0	0	0	2
32. Dadra and Nagar Haveli		0	0	0	0	0
33. Daman and Diu		0	0	0	0	0
34. Delhi UT		1	2	0	1	1
35. Lakshadweep		0	0	0	0	0
36. Puducherry		1	3	0	5	0
TOTAL		222	280	293	326	395

#### Acute malnutrition in India

1273. SHRI AHMED PATEL: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether it is a fact that according to a recent UNICEF report, children in India are in the grip of severe acute malnutrition and India is far behind from Nepal, Pakistan and Bangladesh;

(b) if so, the details thereof;

(c) what are the reasons behind it when Government godowns are overflowing with foodgrains; and

(d) what effective remedial measures Government proposes to take in this regard?

THE MINISTER OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI SMRITI ZUBIN IRANI): (a) and (b) As per the report of Comprehensive National Nutrition Survey (CNNS) conducted by UNICEF during 2016-18, prevalence of severe acute malnutrition among children is 4.9%, which indicates further reduction when compared to the levels reported by NFHS-4 as 7.4%.

(c) Malnutrition is a multi-faceted problem. The important determinants are inadequate food, level of poverty leading to low purchasing power, poor socio-economic status of women, female illiteracy, high rate of population growth and low access of population to health education, safe drinking water, environmental, sanitation, hygiene and other social services. Key reasons for malnutrition setting in early life are early marriage, faulty and sub-optimal infant and young child feeding practices, childhood illnesses and low birth weight. The nutritional status of the population is outcome of complex and inter-related set of factors and cannot be improved by the efforts of single sector ^ alone. Therefore, it needs a multi-pronged approach.

(d) The Government has accorded high priority to the issue of malnutrition and is implementing several schemes/programmes of different Ministries/Departments through States/UTs to address various aspects related to nutrition. This Ministry is implementing POSHAN Abhiyaan, Pradhan Mantri Matru Vandana Yojana, Anganwadi Services and Scheme for Adolescent Girls under the Umbrella Integrated Child Development Services Scheme (ICDS) as direct targeted interventions to address the problem of malnutrition in the country. Children with Severe Acute Malnutrition are treated at the Nutrition Rehabilitation Centres established by the Ministry of Health and Family Welfare.

Government has set up POSHAN Abhiyaan on 18.12.2017 for a three year time-frame commencing from 2017-18. The goals of POSHAN Abhiyaan are to achieve improvement in nutritional status of children from 0-6 years, Adolescent Girls, Pregnant Women and Lactating

Mothers in a time bound manner during the three years with fixed targets as under:

S.No.	Objective	Target
1.	Prevent and reduce stunting in children (0- 6 years)	By 6% @2% p.a.
2.	Prevent and reduce under-nutrition (underweight prevalence) in children (0-6 years)	By 6% @ 2% p.a.
3.	Reduce the prevalence of anaemia among young Children(6-59 months)	By 9% @ 3% p.a.
4.	Reduce the prevalence of anaemia among Women and Adolescent Girls in the age group of 15-49 years.	By 9% @ 3% p.a.
5.	Reduce Low Birth Weight (LBW).	By 6% @ 2% p.a.

The Abhiyaan aims to reduce malnutrition in the country in a phased manner, through a life cycle approach, by adopting a synergised and result oriented approach. The Abhiyaan has mechanisms for timely service delivery and a robust monitoring as well as intervention infrastructure. The major activities undertaken under this Abhiyaan are ensuring convergence with various other programmes; Information Technology enabled Common Application Software for strengthening service delivery and interventions; Community Mobilization and Awareness Advocacy leading to Jan Andolan- to educate the people on nutritional aspects; Capacity Building of Frontline Functionaries, incentivizing States/ UTs for achieving goals etc.

#### **‘YUWAAH’ youth skilling initiative**

1274. SHRIMATI WANSUK SYIEM: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether India has now latched onto the global ‘Generation Unlimited’ movement started in New York last year, by launching its national version YuWaah to provide relevant skills to a large number of adolescent population in the country;

(b) whether YuWaah aims at a paradigm shift in skilling and re-skilling by targeting adolescent population between ages 10 to 24; and