

Tackling child malnutrition

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Policy initiatives can be guided by collecting real-time data at the sub-district level

- Despite the National Family Health Survey-4 (NFHS-4) showing an encouraging improvement in child nutrition, India continues to fare poorly in world rankings on child nutrition.
- What needs to be done, where, how and by whom are the questions we need answers to.
- The focus must be on the pregnant, breastfeeding mother and the child, especially in the first two years of the child's life, which is the crucial phase for physical, mental and cognitive development.
- With the wealth of district-level data made available by NFHS-4, the focus districts can easily be identified.
- Even within the districts, pockets where child malnutrition is high should be identified, going down to the tehsil or taluka levels and further down to clusters of Anganwadis located in areas such as urban slums and those with high concentrations of disadvantaged populations.
- Policy initiatives can be guided by accurate real-time data at the subdistrict level.
- We need more public programmes with a direct or indirect impact on nutrition in the selected areas which should cover important nutritionspecific areas such as maternal nutrition, especially in the nine months of pregnancy and the six months of breastfeeding.
- They should also promote early and exclusive breastfeeding, proper feeding of the infant, and provide food security through a robust public distribution system.
- There should be support for healthcare for mothers from the antenatal care visit in the first trimester of pregnancy until after delivery — and for children in their first few years of life.
- Messages should be spread on hygiene and sanitation, particularly the need to do away with open defecation practices.
- Similarly, education for girls should be advocated, as should the

importance of enabling the financial independence of women through skilling and employment opportunities along with their inclusion in the formal financial network.

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