

**RECORD OF DISCUSSIONS HELD IN THE FIRST MEETING OF PRIME MINISTER'S NATIONAL COUNCIL ON INDIA'S NUTRITION CHALLENGES HELD ON 24.11.2010**

List of participants is at Annexure.

2. The Principal Secretary to the Prime Minister, who is the convener of the Council, welcomed the participants and apprised them of the steps taken after the constitution of the Council to evolve, through wide ranging multi-stakeholder consultations, working / discussion papers outlining the measures for tackling the nutrition challenge, for the consideration of the Council. He then requested the Prime Minister to give his opening remarks to the Council after which the items on the agenda could be taken up for consideration.

3. The Prime Minister in his opening address stated that malnutrition, or under-nutrition is a complex problem caused by multiple factors and has long term consequences on the growth, development and well being of our nation. In spite of the impressive growth of our economy and a number of programmes aimed at meeting the nutritional challenge, the levels of under-nutrition continue to remain unacceptably high and the rates of reduction in under nutrition over time disappointingly low; this is simply unacceptable. The focus of ICDS on children under 3, pregnant and breastfeeding mothers is relatively weak and there is therefore a need to take a hard look at the ICDS to improve the programme. This should be accompanied by an examination of the Public Distribution System, the Mid Day Meal Scheme, the National Rural Health Mission, the Total Sanitation Campaign and other schemes which can play a part in tackling malnutrition. Under-nutrition is not a problem for one particular department or Ministry to deal with; a convergence of ideas and action is needed at all levels - centre, state,

district, block and Gram Panchayat. We need effective institutional mechanisms to ensure this. The Prime Minister then invited all members of the Council and invitees to deliberate on issues relating to under-nutrition so that decisions that will help frame better policies and re-design programmes could be arrived at and deliverable outcomes laid down.

4. The agenda 1, namely, status of malnutrition in India and agenda 2, namely, suggested measures for restructuring of ICDS to address the issue of under-nutrition, were taken up. The Secretary, Ministry of Women & Child Development, in a presentation on the two issues, made the following important points, among others: (i) The rate of malnutrition in India was very high with 23% of children being born with low birth weight, 42.5% of children under 5 being underweight and 70% suffering from anaemia; (ii) Mortality rate of children under age three was 53 per thousand live births, 35.6% of women had low body mass index and 55.3% of women suffered from anaemia.

5. The Ministry pointed out that child under-nutrition was a complex and multi-faceted problem with inter-generational implications. The *first* approach to addressing the nutrition challenge was to focus on prevention of under-nutrition through multi-sectoral approaches of accelerated action on the determinants, better integration of policy and focussed attention on nutrition. The *second* approach was direct intervention targeting the vulnerable groups, children under age six and pregnant and lactating mothers and adolescent girls. On the way forward in tackling malnutrition the Ministry suggested, *inter alia*, creation of a National Nutrition Mission Authority for inter-sectoral convergence, nutrition centric planning and convergence of national flagship programmes like NRHM, SSA,

MDM, TSC, National Drinking Water Supply Programme, etc. and strengthening of the RCH and nutritional components of the NRHM.

6. On restructuring of the ICDS, the Ministry proposed, *inter alia*, that –
  - a. ICDS should be restructured into a mission mode programme with flexible mode of implementation focussing on children under two, pregnant and lactating mothers, early childhood care and education, optimal infant and young children feeding practices and strengthening of the infrastructure for Anganwadis with appropriate institutional mechanism at Central, State, District and Block levels;
  - b. the cost of supplementary nutrition should be indexed to the wholesale price index on the lines of the Midday Meals programme;
  - c. nutritional counselling service should be strengthened with an additional Anganwadi worker; and
  - d. adequate human and financial resources should be provided.

7. The Member Secretary, Planning Commission made a presentation on the recommendations for action that emerged from the multi stakeholders consultations carried out under the *aegis* of the Planning Commission (agenda 3). The following were the main recommendations:

- (i) Initiate a national programme for mother and child malnutrition, prevention and reduction by focusing on the critical age groups (children under two, mothers and adolescent girls) in a life cycle approach;
- (ii) Create a new institutional arrangement with a national and inter-ministerial empowered executive authority including experts and civil society representatives under the Prime Minister's National Council;

- (iii) Similar councils be set up at the State and district levels. (The National Nutrition Mission of 2003 should be replaced with the above suggested institutional arrangement). A policy coordinating unit should be set up in the Planning Commission;
- (iv) Programmes to tackle malnutrition should be led by Panchayati Raj Institutions with the active involvement of women (particularly mothers) and women Panchayat members. Malnutrition free Panchayats should be honoured with awards on the lines of Nirmal Gram Puraskar. The mandate of Village Health and Sanitation Committees set up under the NRHM should extend to nutrition and ICDS and it should be a sub-committee of the Gram Panchayat;
- (v) Conditional Cash Transfer should be piloted and the programmes like the Rajiv Gandhi Scheme for Empowerment of Adolescent Girls and the Indira Gandhi Matritwa Sahyog Yojana should be up scaled up and universalized. The Anganwadi should become a focal point of convergence for children, adolescent girls and women;
- (vi) The ICDS should be restructured with focus on the critical age groups, improvement in quality of early care and learning and adopting decentralized models. ICDS should be on mission mode with flexibility in implementation on the lines of SSA and NRHM. Nutritional counselling as a service should be introduced with an additional Anganwadi worker so as to focus on home visits for children under 2 and mothers;
- (vii) A national nutrition communication campaign should be launched and it should be linked with Bharat Nirman Campaign and Sakshar Bharat;
- (viii) A national nutrition surveillance system should be operationalised and the National Nutrition Monitoring Bureau should be extended to vulnerable States/Districts; the use of ICT particularly GIS and link with UID should be

promoted. The coverage of DLHS should be increased and it should be made more regular.

8. The issues raised in the two presentations were discussed in detail. The expert members of the Nutrition Council shared their views. Dr. Arun Gupta emphasized the criticality of breastfeeding in prevention of under-nutrition and called for efforts to increase the coverage with focus on initiation of breastfeeding within one hour of child birth and exclusive breastfeeding for six months. While endorsing the recommendations of the multi-stakeholder retreat, he called for constitution of an Authority to deal with Nutrition under the PM's Council. He also pointed out that any public private partnership in nutrition should be free from conflict of interest. Dr. Prema Ramachandran, while, endorsing the recommendations of the multi-stakeholder consultation, emphasized the importance of fortification of foods with nutrients and micro nutrients. She pointed out that anaemia was the biggest nutrition challenge and one effective way of tackling this was to promote the use of iron fortified salt. She stated that the National Institute of Nutrition had developed the technology of double fortification of salt and a campaign for the use of double fortified salt would go a long way in the prevention of anaemia. Dr. Rohini Nayyar emphasized the importance of local action at the grass roots level in tackling malnutrition. She said education, sanitation and hygiene were critical factors. It was possible to find nutritious food at the level of local community provided the right education and nutritional counselling was provided.

9. The Minister of State (IC) for Women & Child Development stated the Ministry had achieved near universalisation of the ICDS with sanction of more than 13 lakh Anganwadis, 12 lakhs of which were operationalized. She said

restructuring of ICDS on mission mode was very essential to improve the delivery of services. She also stated that programmes like SABLA and Indira Gandhi Matritwa Sahayog Yojana would go a long way in tackling the issues of malnutrition.

10. The Agriculture Minister stated that the Government was making efforts to invest in agriculture to increase food production and to streamline public distribution system so as to increase both availability and access to food. He, however, expressed the limitations the Government faced in procuring food grains beyond 50 million tonnes. The Human Resource Development Minister stated that retaining the girls in schools beyond upper primary level was crucial for preventing early marriages and pregnancies. He pointed out that there was a need to universalize secondary education among girls. He also emphasized the importance of employing science and technology in tackling this challenge. He stated that student health profiles could be created and regularly monitored through the use of information and communication technologies and the UID. The Rural Development and Panchayati Raj Minister emphasized the need for training the Panchayat members to sensitize them to take up the challenge of malnutrition in their Panchayats.

11. Dr. Syeda Hameed, Member, Planning Commission outlined the multi-stakeholder consultation organized by the Planning Commission and emphasized the urgent need to set up a Mission or an Authority under the Prime Minister's National Council on Nutrition so that one empowered institution can take charge of the subject of nutrition, in view of the multi-disciplinary nature of the challenge. She stated that an additional Anganwadi worker was crucial for focusing on children below 2 and mothers and for introducing the nutrition counselling service.

12. The Deputy Chairman, Planning Commission said that the problem of malnutrition was serious and clearly Government had to do more. However, world over countries have tackled this issue in different ways. Cash transfers have proved effective and we must try them. The Ministry of Women and Child Development should come up with two or three alternative models for tackling this challenge. He suggested that a highly decentralized model could be tried in 100 of 200 high burden districts where Panchayats get cash with the clear understanding that they will take measures to tackle malnutrition and deliver agreed outcomes.

13. After discussion, the Prime Minister concluded that it has been a very useful meeting. A number of valuable suggestions have been made which will be kept in view as the concerned Ministries and Planning Commission take follow up action. The following decisions were agreed upon:

1. The ICDS requires strengthening and restructuring. The Ministry of Women & Child Development will take steps in this direction, with special focus on pregnant and lactating mothers and children under three. The ICDS also needs to forge strong institutional convergence with National Rural Health Mission and Total Situation Campaign particularly at the district and village level. It needs to provide flexibility for local action and empower mothers in particular and the community in general to have a stake in the programme. **[Action: Ministry of Women and Child Development in consultation with Planning Commission and other relevant Ministries]**
2. A multi-sectoral programme to address the maternal and child malnutrition in selected 200 high-burden districts would be prepared. This programme will bring together various national programmes through strong

institutional and programmatic convergence at the State, District, Block and Village levels. While designing this programme the suggestion made by the Deputy Chairman, Planning Commission about alternate models may be considered. **[Action: Ministries of Women and Child Development in consultation with the Planning Commission, Ministry of Health & Family Welfare and other relevant Ministries]**

3. A nation wide information, education and communication campaign, coordinated by the Ministry of Women & Child Development, in consultation with the Planning Commission and Ministry of Health and Family Welfare, would be launched against malnutrition so as to address issues of status of women, the care of pregnant mothers and children under two, breastfeeding, and the importance of balanced nutrition, health, hygiene and sanitation. The active involvement of people's representatives, civil society activists, media persons and leaders of the entertainment industry would be ensured. **[Action: Ministry of WCD]**
4. The Ministries that deal with Health, Drinking Water Supply and Sanitation, School Education, Agriculture and Food & Public Distribution will bring strong nutrition focus to their programme. **[Action: the relevant Ministries]**

14. In conclusion, Prime Minister requested the Ministry of Women & Child Development and the Planning Commission to review the progress in implementation of the decisions of the Council after three months. **[Action: Planning Commission and Ministry of Women and Child Development]**

## Annexure

Sl.No.	Name
1.	Shri Sharad Pawar, Minister of Agriculture, Consumer Affairs, Food & Public Distribution
2.	Shri Kapil Sibal, Minister of Human Resource Development
3.	Shri C.P. Joshi, Minister of Rural Development & Panchayati Raj
4.	Shri Montek Singh Ahluwalia, Dy. Chairman, Planning Commission
5.	Smt. Krishan Tirath, Minister of State (IC), Women & Child Development
6.	Shri Sachin Pilot, Minister of State for Telecommunications
7.	Shri T.K.A. Nair, Principal Secretary to PM
8.	Shri K.M. Chandershekhar, Cabinet Secretary
9.	Smt. Sudha Pillai, Member Secretary, Planning Commission
10.	Dr. Syeda Hameed, Member, Planning Commission
11.	Dr. Arun Gupta, Breast Feeding Association National Coordinator
12.	Dr. Prema Ramachandran, Director, Nutrition Foundation of India
13.	Dr. Rohini Nayyar, B-5, New Friends Colony West, New Delhi
14.	Ms. Sushama Nath, Secretary, Department of Expenditure
15.	Dr. B.C. Gupta, Secretary, Department of Food & Public Distribution
13.	Shri D.K. Sikri, Secretary, Ministry of Women & Child Development
14.	Shri B.K. Sinha, Secretary, Ministry of Rural Development
15.	Shri A.N.P. Sinha, Secretary, Ministry of Panchayati Raj
16.	Shri Rajiv Takru, Additional Secretary, Ministry of Information & Broadcasting
17.	Shri P.K. Pradhan, Additional Secretary, Department of Health & Family Welfare
18.	Shri R.C. Misra, Additional Secretary, Ministry of Urban Development
19.	Dr. Shreeranjana, Joint Secretary, Ministry of Women & Child Development
20.	Shri Harish Khare, Media Adviser to the Prime Minister
21.	Shri R. Gopalakrishnan, Additional Secretary to the Prime Minister
22.	Smt. Vini Mahajan, Joint Secretary to the Prime Minister
23.	Shri L.K. Atheeq, Director, Prime Minister's Office