

A Plan to Scale-up Nutrition

Investing in the Survival, Health and Productivity of India's Most Vulnerable

**Presentation to
The Planning Commission, Government of India
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www.micronutrient.org

Nutrition is Key to Health and Productivity

- Without micronutrients – essential vitamins and minerals – the human body does not grow and function properly
- More than 1/3 of child deaths and 10% of the global disease burden is due to maternal and child undernutrition
- Poor fetal growth or stunting in the first two years of life leads to irreversible cognitive damage.
- Investing in micronutrients makes economic sense: identified as world's most cost-effective development investment and can increase a country's GDP by 2-3% annually

Positive Impact of Micronutrients

MN	Impact of micronutrients
Vit A	Significantly improves child survival rates
Zinc	Reduces frequency & severity of diarrhoea, a major cause of child mortality
Iodine	Lowers rates of miscarriage, stillbirth and neonatal deaths and improves mental health function.
Iron	Improves maternal survival rates

Micronutrients and MDGs: Major impact on MDGs 4 (reduce child mortality) and 5 (improve maternal health). MDG 1, 2 and 3 also impacted.

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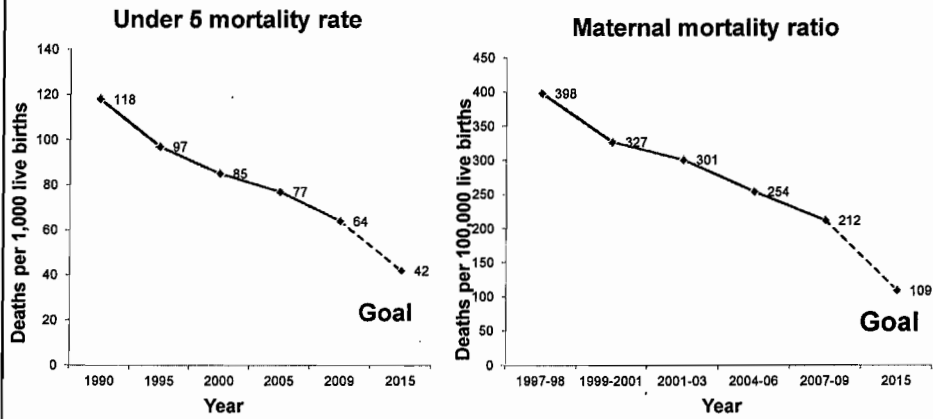
Nutrition in India: Need for Action

- Undernutrition drains India's human, economic and national potential
- Simple low-cost high impact solutions are available and affordable and do-able
- GOI has made improved nutrition a priority
- Despite progress, 40% of the 8.9 million child deaths and undernourished globally are India's children



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Need to Accelerate Survival by Scaling up Nutrition



Source: SRS

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The 11th Plan's 5-pronged Approach is Still Relevant!

Dietary Approaches: Micronutrient-rich foods in adequate quantities

Supplementation: Tablets, capsules and syrups to vulnerable groups

Horticultural Interventions: Nutrient-rich crops, including green leafy vegetables

Public Health Measures: Controlling diseases (malaria, measles, diarrhea) and parasitic infections to help the body absorb and retain essential vitamins and minerals

Fortification: Adding vitamins and minerals to foods or condiments regularly consumed



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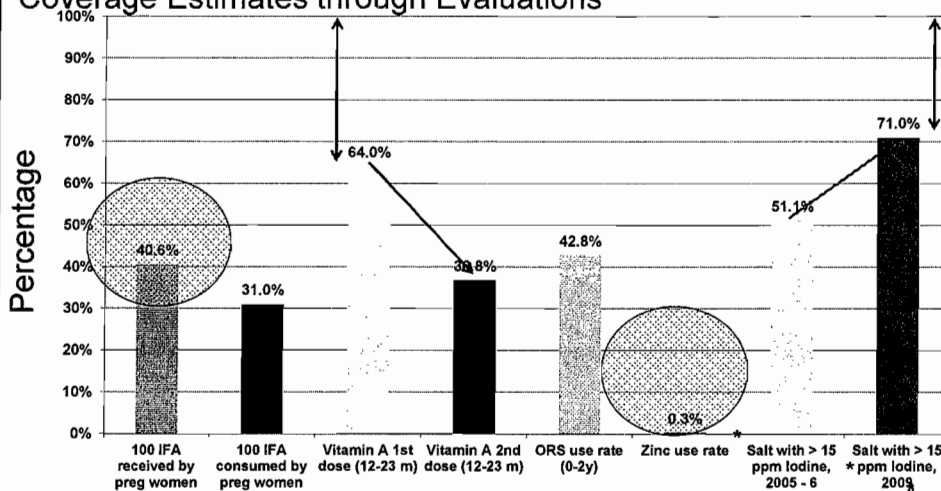
Progress to Date

- To reduce anemia by 50% among women and girls
Coverage still remains poor
- IFA for infant and young children in syrup form, and adolescent girls through weekly iron supplements
IFA syrup in Kit A, last supplied in 2009; weekly IFA supplements to adolescent girls in 200 districts

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Progress to Date

Coverage Estimates through Evaluations



Source: CES 2009; * NFHS 3

Progress to Date

- All children 9 – 59 m to receive Vit A;
Coverage to be 90% by 2009
VA 1st dose coverage – 64%; 2nd dose coverage – 36.8%
- Promotion of breastfeeding will be taken up for prevention of VAD
Initiation of breastfeeding within 1 hour of birth: 33.5%; exclusive breastfeeding – 56.8%

Source: CES 2009

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Progress to Date

- DLHS will recognize malnutrition including micronutrient as a serious public health problem...
Last survey in 2007-08 where VA and IFA coverage were assessed
- ...and monitor prevalence of micronutrient deficiencies on priority
Did not monitor prevalence of MN deficiencies

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Progress to Date

- NNMB of ICMR will be expanded to all States/UTs to assist in monitoring micronutrient deficiencies through existing programmes
Still confined to few states
- Research and studies to be undertaken on micronutrients
Some results available; holistic view still unattained

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Progress to Date

- A vigorous awareness campaign in the form of *Poshan Jagriti Abhiyan* will be launched utilizing all available channels of communication
Still awaited
- A high level inter-agency coordination mechanism will be set up to enable policy directions to the concerned sectors
Still awaited

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Achieving the Goals: Key Enabling Factors

- High-level political commitment
- A coordinated approach with time-bound targets against which performance is reviewed regularly by an independent multi-stakeholder body
- Allocation of additional resources linked to the performance targets

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Recommendations

- GOI has made improved nutrition a national priority – now it is time for action. Significant progress can be achieved by 2015.
- Need to function in a high level mission mode (for an initial time period of up to five years) with specific budgetary allocations
- Identify lead ministry and a strong coordination mechanism under the PMO or the Planning Commission
- Key Stakeholders (including civil society and the private sector) to be co-opted into the program through partnership, legislation and regulation

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