2021

Impact of COVID-19 on Child Nutrition in India: What are the Budgetary Implications?

A Policy Brief

CHILD RIGHTS AND YOU

CBGA

Authors

Shruti Ambast, Protiva Kundu and Shivani Sonawane

For further information please contact: protiva@cbgaindia.org

Technical Inputs

Happy Pant (CBGA), Nupur Pande (CRY), Shreya Ghosh (CRY) and Priti Mahara (CRY)

Designed by

Common Sans, 1729, Sector 31, Gurgaon, Haryana

Cover Illustration

Yashoda Banduni

Published by

Centre for Budget and Governance Accountability (CBGA)

B-7 Extension/110A (Ground Floor), Harsukh Marg,
Safdarjung Enclave, New Delhi-110029
Tel: +91-11-49200400/401/402
Email: info@cbgaindia.org
Website: www.cbgaindia.org

and

Child Rights and You (CRY)

632, Lane No.3, Westend Marg, Near Saket Metro Station,
Saiyad-ul-Ajaib, New Delhi-110 030
Tel: +91-11- 2953 3451/52/53
Email : cryinfo.del@crymail.org
Website: www.cry.org

Financial support for the study

This study has been carried out with the financial support from CRY.

Views expressed in this policy brief are those of the authors and do not necessarily represent the positions of CBGA and CRY.

Abbreviation

AMB	Anaemia *Mukt Bharat*
ANM	Auxiliary Nurse Midwife
APMC	Agricultural Produce Market Committee
ASHA	Accredited Social Health Activist
CDPO	Child Development Project Officer
CHC	Community Health Centre
CNNS	Comprehensive National Nutrition Survey
EC	Essential Commodities
FCI	Food Corporation of India
FSA	Food Security Allowance
HMIS	Health Management Information System
ICDS	Integrated Child Development Services
IFA	Iron and Folic Acid
IYCF	Infant and Young Child Feeding
MDM	Mid-Day Meal
MMR	Mumbai Metropolitan Region
MoHFW	Ministry of Health and Family Welfare
MWCD	Ministry of Women and Child Development
NCDHR	National Campaign on Dalit Human Rights
NEP	National Education Policy
NFHS	National Family Health Survey
NFSA	National Food Security Act
NHM	National Health Mission
NRC	Nutrition Rehabilitation Centre
NSS	National Sample Survey
ONORC	One Nation One Ration Card
PDS	Public Distribution System
PHC	Primary Health Centre
PMGKY	*Pradhan Mantri Garib Kalyan Yojana*
POSHAN	Prime Minister's Overarching Scheme for Holistic Nutrition
PPE	Personal Protective Equipment
RKSK	*Rashtriya Kishor Swashthya Karyakram*
RPWDA	Rights of Persons with Disabilities Act
SAG	Scheme for Adolescent Girls
SAM	Severe and Acute Malnutrition
SC	Scheduled Caste
SDG	Sustainable Development Goal
SNCU	Special Newborn Care Unit
SNP	Supplementary Nutrition Programme
ST	Scheduled Tribe
UT	Union Territories
YUVA	Youth for Unity and Voluntary Action
ZBNF	Zero Budget Natural Farming

Context

The most crucial time to meet a child's nutritional requirements is the first 1,000 days of life, through pregnancy and infancy. Poor nutrition during this period leaves children with lifelong impairment in physical and mental development. Therefore, investing in nutrition is the key to secure a country's future generation.

India's policy framework includes many proven nutrition interventions. In 2015, India committed to achieve the Sustainable Development Goal (SDG) of zero hunger. As a step towards meeting the targets by 2030, the Government of India launched the Prime Minister's Overarching Scheme for Holistic Nutrition (POSHAN) *Abhiyan* in 2017. Targets were set to reduce stunting, under-nutrition and low birth weight by two per cent each and anaemia by three per cent by 2022. Unfortunately, COVID-19 has increased the risk factors for child malnutrition in India. With the disruption of *Anganwadi* services and Mid-Day Meal (MDM), a large number of children no longer have access to regular, nutritious meals. The overburdening of health systems has impaired service delivery of critical health and nutrition interventions for children. Finally, the economic impact of the pandemic has reduced the frequency and quality of meals consumed by households.

India has a significant burden of child malnutrition. Malnutrition was found to be the leading risk factor for death of children under the age of five in India (Lancet, 2019). In 2018, 34.7 per cent of children under five were stunted, 17.3 per cent were wasted and 33.4 per cent were underweight (MOHFW et.al, 2019). Anaemia prevalence was also high, at 53 per cent among all women of reproductive age, and 54 per cent among girls aged 15-19 years (Anaemia *Mukt Bharat* Portal). While these indicators have improved from earlier years, they remain a cause for concern. Further, it has been predicted that India will fail to meet targets for improvement in nutrition indicators set under POSHAN *Abhiyan* (earlier National Nutrition Mission) for 2022, and WHO-UNICEF targets for 2030 (Lancet, 2019). In fact, the recently released National Family Health Survey (NFHS)-5, 2019-20 shows that in some of the states the prevalence of malnutrition among children has increased as compared to the previous survey year, 2015-16. Of the partial data released for 22 states and Union Territories (UT), childhood stunting saw an increase in 13 states, wasting in 12 states and underweight in 16 states (NFHS-5, 2020). While all these data pertain to the period before the pandemic, it can only be expected that the situation is much worse now.

High levels of malnutrition are attributable to a range of social determinants, including policy targeting and coordination across nutrition-related developmental sectors (Rajpal et al 2020). Malnutrition needs to be addressed through a combination of nutrition specific interventions, which target diet and health, along with nutrition sensitive interventions which target complementary sectors including social protection, education, and water and sanitation. With increasing recognition of the 'shadow pandemic' of hunger, this is an opportunity for governments to take strong, multi-sectoral measures to improve child nutrition and accord budgetary priority to targeted measures for addressing these gaps. This policy brief highlights the need for increased public provisioning on child health and nutrition and identifies a range of short-term and long-term policy measures to build a resilient nutrition system.

1. Disruption in service delivery of feeding programmes

Existing challenges

- The Supplementary Nutrition Programme (SNP) under *Anganwadi* Services (erstwhile Integrated Child Development Services - ICDS) and MDM are two large-scale programmes delivering food entitlements to children in India. 64 million children in the age group of six months to six years benefit from dry rations or hot cooked meals under SNP (MWCD, 2020). 115.9 million school-going children in classes I-VIII benefit from one hot cooked meal a day under MDM (MDM Portal).
- With the closure of *Anganwadis* and schools following the lockdown imposed in March, both services have been disrupted. In March, the Supreme Court had directed States to take measures to provide nutritious food to children in lieu of this disruption (In re MDMS, 2020). Some States have been providing home delivery of dry ration for children. However, there are many gaps and irregularities in implementation (Jain, 2020).
- The coverage of both programmes has been inadequate. Even prior to COVID-19, only 50 per cent rural and 21.4 per cent urban children reported that a free midday meal was provided by the institution (NSO, 2019). In 2019, only 46 per cent of pregnant and lactating women received Take Home Ration under SNP, against an enrolment rate of 78 per cent, while 17 per cent children received a Hot-Cooked Meal, against 64 per cent enrolment (PTI, 2019).
- A large number of vacancies are observed under *Anganwadi* Services in posts of child development project officers (CDPOs) and lady supervisors (LSs) (MWCD, 2019). This hinders implementation and monitoring of the programme.

Existing policies and budgetary interventions

- To address the disruptions caused by the pandemic, the Centre increased the cooking cost of MDM in April for the year 2020-21, from Rs. 4.48 to Rs. 4.97 for primary children, and from Rs. 6.71 to Rs. 7.45 for upper primary children (MDM Portal, 2020). An ad hoc grant of Rs. 2567 crore was also released to States for this purpose. In a later order, the MHRD asked States to provide pulses, oil etc. (equivalent to cooking cost) along with food grains as Food Security Allowance (FSA) to eligible children instead of transferring the cooking cost to children/their parent's bank accounts (MDM Portal). The Centre also directed States to distribute food and nutrition items once in fifteen days, at the door step of *Anganwadi* beneficiaries including children, and pregnant and lactating women.
- In the Union Budget 2020-21, a sum of Rs. 35,600 crore was announced for 'nutrition-related programmes', although the component /scheme-wise break up of this amount was not available. The allocation for *Anganwadi* Services increased by 3.5 per cent over last year, while the allocation for MDM remained the same. The 15th Finance Commission identified the need for higher spending on nutrition, and recommended additional grants of Rs. 7735 crore to States for increased spending under SNP, based on inflation and the need for food fortification.

Policy measures needed

- The government should ensure continued home delivery of meals and cooking material to beneficiaries in the coming months, for as long as *Anganwadis* and schools remain closed. If needed, additional budgetary support should be provided to States/UTs for the logistics of meal distribution and monitoring.
- Guidance should be provided to *Anganwadi* workers, parents and teachers on nutritious and well-balanced diets for children, along with proper hygiene practices, for the duration that *Anganwadis* and schools remain closed.
- The SNP budget should be increased in line with the recommendation of the 15th Finance Commission, and local ingredients and items with high nutritional value such as eggs and milk should also be prioritised.
- Higher allocations should be made to set up more *Anganwadis* in urban areas which are under serviced. In the long term, there should

be a move towards universalisation of *Anganwadi* Services.

- The Centre should provide budgetary support to States/UTs to fill up vacant supervisory posts under *Anganwadi* Services.
- The National Education Policy (NEP), 2020 has recommended that provisions be made for serving breakfast along with the mid-day meals to improve foundational learning (MHRD, 2020). In order to effectively implement these recommendations, the government will have to significantly increase the budget for MDM in the current and forthcoming financial years.

2. Disruption in health services for children

Existing challenges

- Several key nutrition-specific interventions for children are delivered through primary health infrastructure and the National Health Mission (NHM). These include immunisation, Iron and Folic Acid (IFA) supplementation, and prevention and treatment of childhood diarrhoea, and tracking and treatment of Severe Acute Malnutrition (SAM). It has been predicted that child malnutrition could increase by up to 10-20 per cent because of COVID-19, and an additional 6000 children could die every day from preventable causes because of the disruption in health services (Awasthi, 2020).
- Data from the Health Management Information System (HMIS) shows that far fewer children received immunisation and health vital tests in March and April compared to the same period last year (Rukmini, 2020). Similarly, there were 1315 children admitted across 966 Nutrition Rehabilitation Centres (NRCs) in April 2020, which is only 9 per cent of the 15796 children admitted in April 2019 (Chandra, 2020).
- Anaemia is prevalent in 41 per cent of pre-school children, 24 per cent school age children and 28 per cent of adolescents (MOHFW et.al, 2019). Female adolescents had a higher prevalence of anaemia (40 per cent) than male adolescents (18 per cent). However, only 14.9 per cent of children 6-59 months received IFA supplementation by the last quarter of 2019-20, and only 9.1 per cent had received it by the end of the first quarter of 2020-21 (Anaemia *Mukt Bharat* Portal) Only 2.9 per cent of children in the same age group received deworming tablets in 2019-20, and only 0.3 per cent have received them this year. Further, there have been disruptions in supply chains of IFA tablets under Anaemia *Mukt Bharat* (AMB) (Accountability Initiative, 2020)
- There are significant staff vacancies at sub-centres, Community Health Centres (CHCs), Primary Health Centres (PHCs) and district hospitals, as well as gaps in basic infrastructure at these facilities (MoHFW, 2019). For instance, 23.5 per cent of sanctioned posts for doctors at PHCs, and 72.5 per cent of sanctioned specialist posts at CHCs were vacant in 2019. In the same year, 18.9 per cent of sub-centres did not have regular water supply, while 26.3 per cent did not have regular electric supply.

Existing policies and budgetary interventions

- In April, the Union Cabinet had approved a COVID package for health, of Rs. 15,000 crore (PIB, 2020). This was to be utilised in three phases, up until 2024. This includes an insurance cover of Rs. 50 lakh for health professionals, along with 'essential items' and testing labs and kits, and funds already released to States.
- The Ministry of Health and Family Welfare (MoHFW) issued directions to all States/UTs on "Provision of Reproductive, Maternal, Newborn, Child, Adolescent Health plus Nutrition services during and post COVID-19 pandemic." (PIB, 2020a) The directions include home delivery of IFA, and other essential medicine like ORS, calcium and zinc, to target beneficiaries in containment zones. In non-containment zones, distribution has been advised through Village Health Sanitation and Nutrition Days in a phased manner, maintaining physical distancing norms by frontline workers.
- Webinars have been organised by MoHFW on the implementation of outreach services related

to Anaemia, NRC, Special Newborn Care Units (SNCUs), Diarrhoea prevention, National Deworming Day, and Infant and Young Child Feeding (IYCF) practices.

- The *Rashtriya Kishor Swashthya Karyakram* (RKSK) under NHM, is a comprehensive health programme for adolescents in the age group of 10-19 years. It addresses sexual and reproductive health, nutrition, non-communicable diseases, substance misuse, injuries and violence (including gender-based violence) and mental health. 40 new Adolescent Friendly Health Clinics under RKSK were constructed between March and September 2020 (PIB, 2020b).

Policy measures needed

- Sufficient allocations should be made to ensure stock of iron, calcium and Vitamin A supplements, and essential medicines for children at Primary Health Centres, for distribution by frontline workers. Gaps in supply chains of IFA tablets under AMB should be addressed.
- Tracking of acute malnutrition during the pandemic should be accelerated through regular, mobile-based communication by frontline health workers (ASHAs and ANMs). Budgetary support for facilitation and training for these activities should be provided.
- The government must invest in personal protective equipment (PPE) and appropriate incentives for frontline workers including ASHAs and ANMs in the coming months.
- States must invest in decentralised procurement and decision-making, so that zones with different levels of COVID-19 transmission can choose between mechanisms for service delivery (doorstep delivery or community level).
- Allocations for important schemes addressing child and adolescent health such as RKSK and Scheme for Adolescent Girls (SAG), must be increased in the coming years.
- Critical shortages of health professionals in rural and urban health facilities must be addressed and adequate investments made to upgrade physical infrastructure at existing facilities. For this, there must be adequate provisioning under NHM and the Health and Wellness Centre component of *Ayushman Bharat.*

3. Reduction in food security

Existing challenges

- The State of Food Security and Nutrition in the World Report 2020 shows that India continues to have the largest population of food insecure people accounting for 22 per cent of the global burden of food insecurity. In fact, food insecurity in India has increased by 3.8 percentage points between 2014 and 2019 (Bansal, 2020).
- Plummeting means of income and depleting savings due to COVID-19 will further increase the proportion of food insecure people in India which directly affects children's nutrition. Persistent food insecurity is not only detrimental to children's long-term health but also damages their cognitive development and learning abilities (Fledderjohann et al, 2019).
- A survey conducted across 12 states following the nation-wide lockdown found that 83 per cent urban and 73 per cent rural households were consuming less food than before (Azim Premji University, 2020). In an assessment done by Child Rights and You (CRY), one-third respondents reported that in their opinion, the lockdown had impacted the eating pattern of their child to a great extent (CRY, 2020).
- Women and girls are especially affected because gaps in the intra-household distribution of food may increase as a result of reduced food security (Salcedo-La Vina et al, 2020).
- The financial distress caused due to the pandemic has increased the dependency of the poor on the Public Distribution System (PDS). However, the PDS was already facing multiple challenges of exclusion due to the computerisation and Aadhaar-enabled service which led to manipulation by ration dealers, technology glitches and other issues (Economic and Political Weekly, 2020a). A study from Jharkhand shows that many vulnerable people i.e. widows, elderly and manual labourers, were unable to buy ration due to Aadhaar related

problems (Dreze et al, 2017) and it caused mass cancellation of ration cards of those who failed to link their Aadhaar Card (Sen, 2020). Further, 108.4 million people (8 per cent of the population) in India are currently excluded from the PDS because the Government continues to use Census 2011 data to determine the number of beneficiaries. However, India's population has grown in the past 9 years and 922 million instead of 814 million should be eligible for PDS (Agarwal, 2020).

- Despite the relief packages announced under the *Pradhan Mantri Garib Kalyan Yojana* (PMGKY), the provisions of increased ration and other entitlements have failed to reach all beneficiaries. In 11 States, the distribution was less than 1 per cent of the allocated grains (Sharma, 2020). Migrant workers, who already faced the brunt of the lockdown, have also been unable to access ration in their current city of residence since the PDS is linked to the place of origin. A survey by Youth for Unity and Voluntary Action (YUVA) across 10 cities in the Mumbai Metropolitan Region (MMR) revealed that only 45.49 per cent had ration cards registered in the MMR. This figure was even worse for households living in construction sites where only 10.38 per cent had ration cards registered in the city they were currently staying (YUVA, 2020).
- A survey by Dvara Research reported that although state governments had extended PDS services to people without ration cards, it had reached only 1 per cent of the respondents. Only 49 per cent of households received food grains from PDS, 38 per cent remained excluded because of non-enrolment, 11 per cent did not attempt to collect and 2 per cent despite attempting to collect, could not avail the benefits either due to the access point running out of stock or because of technical errors (Dvara,2020).
- The stock of foodgrains in India has been at a historic high. The total buffer food stock with the Food Corporation of India (FCI) was 411 LT in September (PIB, 2020c). Yet many people did not have access to food.

Existing policies and budgetary interventions

- Food subsidy accounts for 95 per cent of the budget allocation to the Department of Food and Public Distribution. In 2020-21, the Department received a 6 per cent higher allocation than the revised estimate of 2019-20. However, since 2016-17 the Department's actual expenditure is much lower than the funds allocated. For example, in 2019-20, 40 per cent of the funds allocated were unspent (Union Budget, 2020-21). This cycle of under-allocation and underutilisation is affecting food production and distribution.
- The allocations towards the FCI remain much less than the actual food subsidy for the last few years. Though additional grains are being provided as part of COVID-19 relief measures, there was an allocation of only Rs. 10,000 crore as additional budgetary provision for FCI in the supplementary budget of 2019-20. This continuous underfunding might lead to weakening of price support to farmers and which can have an indirect effect on food production and hence nutrition.
- The Union Finance Minister had announced a package of Rs. 1.70 lakh crore under the PMGKY which included free supply of food grains (5 kg of wheat/rice and 1 kg of pulses) to the poor and needy, in addition to the ration received under PDS. This scheme has been extended until November 2020 with an additional budget outlay of Rs. 90,000 crore (PIB, 2020d). Free rations were announced for 80 million migrant workers and their families under the *Atmanirbhar Bharat* package.(PIB, 2020e).
- 24 States/UT so far have enabled 'One Nation One Ration Card' (ONORC) w.e.f 1st August 2020 covering 80 per cent of the total National Food Security Act (NFSA) beneficiaries. ONORC is being implemented to ensure nation-wide portability of the ration card (PIB,2020f).
- Highly subsidised cooked meals were distributed to the urban poor through community kitchens such as the *Amma* Canteens in Tamil Nadu, *Mukhyamantri Dal-Bhat Yojana* in Jharkhand, the *Annapurna*

Rasoi in Rajasthan, *Aam Admi* Canteen in New Delhi, etc. (Parajuli, 2020) and others in States of Kerala, Uttar Pradesh, Maharashtra, Odisha etc. (D'costa, 2020).

- Other relief measures provided by the States were (CBGA, 2020):

  Telangana - Provided 12 kg of rice to all ration card holders for free and Rs. 1500 for buying groceries and vegetables

  Madhya Pradesh - Provision of ration has been made unconditional without any requirement of eligibility slips as mandated by the National Food Security Scheme

  Odisha - Provided food for all sick, indigent, destitute persons and migrant workers with the State Disaster Response Fund. Free kitchens have been set up in every *Gram Panchayat* to provide free cooked meals to needy people.

Policy measures needed

- Government should continue the distribution of free grains under PMGKY after November 2020.
- Effective measures are needed to solve issues that hamper distribution of PDS. In a situation of hunger crisis, the biometric identification and legal documentation should be eased. Ration should be provided to all regardless of whether they have linked their ration card to Aadhar card and a system should be in place to update the ration cards to include names of children born after 2011.
- It is critical to strengthen the coverage of the food based social security nets to include the large number of vulnerable people who are currently out of the food system across different States. The PDS should be universalised and expanded to include all vulnerable groups, like migrant workers, homeless, sex workers, and transgender people. This measure is necessary to address malnutrition among children belonging to such vulnerable households. Universal PDS models have proved to be an effective way to reduce exclusion errors and leakages. Evidence from Tamil Nadu, which has a universal PDS, shows that it has the lowest number of leakages. Similarly, Chhattisgarh who has a 'near universalisation' system, has recorded low rates of leakages (Sinha,2020).
- The Government of India should provide an adequate budget to strengthen the system of FCI.
- There is a need to maintain transparency and improve accountability in the distribution system. Inspections and grievance redressal constituted with the PDS or local government should be strengthened to ensure smooth functioning of the food distribution system and minimize power asymmetries.
- Food-based social security nets i.e. PDS, ICDS and MDM should be strengthened by adding food grains with higher nutritive value like ragi, bajra, jowar etc.

4. Reduction in dietary quality

Existing challenges

- Financial constraints due to the pandemic will impact the dietary intake of poor households as they shift towards cheaper and less nutritious food. Past research shows that in low-income countries, nutrient-rich vegetables, fruits, animal-sourced food is 10 times more expensive than calories from staple food like rice, wheat, maize, cassava (Heady and Ruel, 2020).
- Assessing the affordability of nutritious diets for rural poor in India, it is found that even if they spent all their income on food, 63.3 per cent of the rural population would not be able to afford a nutritious meal. If they set aside a third of their income for non-food expenses, then 76 per cent of the rural population would not be able to afford a nutritious diet (Raghunathan et al, 2020).
- According to the recent 'Hunger Watch Survey', 71 per cent of respondents reported that the nutritional quality of their food had worsened. Two-thirds of households reported that the quantity of food consumption either decreased somewhat or decreased a lot and 73 per cent reported that their consumption of green vegetables decreased (Sinha and Narayana, 2020).
- Two recent phone surveys conducted in Uttar

Pradesh and Bihar report that 32-48 per cent households faced shortage of food items and 49-59 per cent had to reduce their food intake. Further, families who reduced intake reported compromising on fruits, vegetables and flesh food because of reduced incomes (Acharya, 2020).

- The same surveys further showed that the reduction of food intake was higher among women. Pregnant women were found to be consuming less than the recommended five food groups.
- Even prior to the pandemic, dietary diversity was inadequate. According to the Comprehensive National Nutrition Survey (CNNS) 2016-2018, while 42 per cent of children aged 6-23 months were fed the recommended minimum number of times as per their age, only 21 per cent were fed an adequate diverse diet and only 6 per cent were fed a minimum acceptable diet. There was also large variation among States. The percentage of children aged 6-23 months who received a minimum diverse diet varied from Meghalaya (62 per cent) to Jharkhand (12 per cent) and Rajasthan (12 per cent) (MOHFW et.al, 2019).
- The dry rations currently provided in lieu of the MDM and SNP fall short of the required nutritious and micronutrient-rich food. Children are missing out on wholesome meals consisting of lentils, vegetables, fruits, eggs, milk, nuts and dessert which they otherwise receive as part of these programmes.
- It is argued that the PDS is more focused on staple crops and calorie adequacy rather than access to balanced diets and improving dietary diversity for the poor. Since only rice, wheat, sugar and kerosene are provided to consumers, access to PDS increases the availability of cereals but does not have any impact on the consumption of other micronutrient rich foods (Pingali et al, 2017). As per National Sample Survey (NSS) data, out of the total calorie intake in rural India, 57 per cent came from cereals; pulses, nuts and oilseeds contributed 12 per cent, vegetable and fruits contributed 7 per cent and meat, eggs and fish contributed only 3 per cent (NSS 68th Round, 2014).

Existing policies and budgetary interventions

- The Government of India launched the Poshan *Abhiyaan* in 2017 with an aim to improve nutritional outcomes for children, adolescents, pregnant women and lactating mothers. The Mission emphasises on dietary diversification among the 15 key nutrition strategies and interventions.
- In 2020-21, Poshan Abhiyan received an allocation of Rs. 3700 crore, a 9 per cent increase from previous year's revised estimates (RE). However, utilisation has been low. It is reported that only 32.4 per cent allocated for the programme in 2019-20 were utilised by December 2019 (CBGA, 2020). Further, between FY 2017-18 and November 2019, only 34 per cent of the allocated funds have been utilised (Paul and Kapur, 2020).
- A few States have taken initiatives to expand the items provided under the PDS to ensure dietary diversification. Kerala and Tamil Nadu are providing millets. Chhattisgarh provides iodised salt, black gram and pulses to the poorer households in addition to mandatory grains (Pingali et al, 2017). The Government of Odisha is set to introduce Ragi as part of the SNP for the first time. It will also be distributed as a part of the PDS in 14 districts (Shalya, 2020).
- The Government of India has approved the Centrally Sponsored Scheme on "Fortification of Rice and its distribution under Public Distribution System" for a period of three years beginning 2019-20 with a total budget outlay of Rs. 174.64 crore. The rice will be fortified with iron, folic acid and vitamin B-12. 9 States - Andhra Pradesh, Kerala, Karnataka, Maharashtra, Odisha, Gujarat, Uttar Pradesh, Assam & Tamil Nadu had consented and identified their respective districts for implementation of the Pilot Scheme (PIB, 2020g).
- The Central Government has been encouraging the production of millets in mission mode under the National Food Security Mission. There is now a growing trend towards the introduction of millets under the PDS since 2018. *NITI Aayog* is also pushing for the introduction of millets in SNP and MDM (Gupta,2020).

Policy measures needed

- Food assistance programmes should move towards nutritional improvement rather than staple grain sufficiency by providing non staple food grain such as pulses and millets at subsided costs. PDS can be a useful instrument in ensuring that the poor have adequate access to a healthy, balanced and diverse diet.
- Similarly, more nutrient rich food such as eggs, milk, and fruits should be included in existing programmes like MDM and SNP to improve nutrition among children.
- Nutri-Gardens can be set-up at scale with technical support from agricultural institutions as they provide a cost-effective way to grow nutrient-rich crops for personal/community consumption. It can be executed in *Anganwadi* Centres and schools to improve the quality of food provided in SNP and MDM. States such as Mizoram, Chhattisgarh and Chandigarh are already implementing the model in schools and *Anganwadis*.
- Agricultural policies should enhance farmers' ability to diversify production systems to non-staple foods since it is now heavily based on three major staple crops – rice, wheat and maize. Zero Budget Natural Farming (ZBNF) should be promoted. Andhra Pradesh has been the frontrunner in implementing ZBNF at a mass scale. Other States like Himachal Pradesh, Kerala, Karnataka, Gujarat and Haryana have also taken steps to implement natural farming.
- Measures need to be adopted to sensitise and educate communities on the importance of an overall nutritious diet and effective ways to improve the diet of children by changing family-feeding practices. Importantly, there needs to be focused counselling on making intra-household distribution of food more gender equitable.

5. Increase in food prices

Existing challenges

- Accessibility and affordability of food highly depends on the price of the food products. In response to the COVID-19 and subsequent lockdown, while the staple grain prices have remained stable, prices for more nutritious foods like pulses, vegetables, and eggs have risen, making it more difficult for Indian consumers to afford them. Thus, the access to nutrient-rich food which was already skewed, has become more inequitable during this pandemic.
- During the pandemic, local food systems were disrupted as it coincided with the country's peak harvesting time of a variety of crops of the season and time for summer vegetables and fruits.
- During the initial phases of lockdown, there was a huge surge in the demand for processed foods like noodles and biscuits. However, as the food processing activities stopped and also there was shortage of raw materials resulting in low production rate, retailers took advantage of the situation by imposing higher prices on existing stocks.
- During lockdown, because of shortage of labours, machineries and blockade in transportation routes, rural farmers could not access markets for the sale of produce, and thus foods remained dumped in rural areas. whereas urban locales experienced price hikes in essential commodities. The resulting unaffordability of food contributes to higher malnutrition to the children.
- The demand for food at home was on the rise as people were having meals at home. Therefore, the panic induced buying to stock up essentials has also led to price rise of essentials.
- Even after normalisation of the situation post lockdown, in November, retail inflation was at an eight-month high of 7.34 per cent on spiralling prices of food items, especially vegetables (The Economic Times, 2020a). Though there was some drop in the inflation rate in December, there was a decline only in the vegetable price; the price of cereals and pulses got dearer.

Existing budgetary and policy interventions

- To ensure adequate supply of foodgrains to the public, the Government of India allowed states

to collect food grains on credit from the Food Corporation of India for three months starting from April, 2020 (Nair, 2020).

- Recently, Government of India modified the Agricultural Produce Marketing Committee (APMC) Act and the Essential Commodities (EC) Act. With the new EC Act amendment, the government proposes to remove cereals, pulses, oilseeds, edible oils, onion and potatoes from the list of essential commodities. The price of these earlier essential commodities will now be determined by market forces.
- Scaling up supply of fortified rice in the country especially in the 112 aspirational districts for PDS, SNP and MDM scheme would require nearly 13 million tonnes of fortified rice. In a recent order Government of India has asked FCI to tie up with the rice mills in different regions for necessary investments in procurement of fortified rice (Economic Times, 2020b).

Policy measures needed

- Government procurement and public distribution can be important measures to preserve food system functioning and avoid food price inflation. Government should implement a universal PDS and provide larger quantities of food grains to each individual at least for the next six months.
- The sustained relative stability of cereal prices and higher prices for other food groups will distort consumer spending, preserving excessive reliance on staples as a major component of the Indian diet at the cost of more nutritious options. Therefore, insulating non-staple supply chains from price shocks and fluctuations is critical to the objective of improving nutrition.

6. The marginalised at risk

Existing challenges

- Children from the marginalised sections of the population including *Dalits, Adivasis,* Persons with Disabilities, migrants, and homeless, are already vulnerable to malnutrition. Undernutrition among Scheduled Tribe (ST) children is much higher than that for all groups taken together. In India, 44 per cent of tribal children under five years of age are stunted, 45 per cent are underweight and 27 per cent are wasted; Vitamin A Supplementation was 59.5 per cent for children from all groups against 60 per cent for Scheduled Caste (SC) children and 59.4 per cent for ST children (NFHS-IV, 2015-16).
- Girls belonging to marginalised sections, especially adolescent girls, are the worst affected during the pandemic. Inadequate diet and disease, household food insecurity, poverty, poor access to health and WASH services, the key factors responsible for undernutrition - all have increased multi-fold during the pandemic (Varghese, 2020).
- More than 80 per cent of adolescents in India suffer from hidden malnutrition – deficiency of one or more micronutrients such as iron, folate, zinc, vitamin A, vitamin B12 and vitamin D as revealed in a study by UNICEF (Sethi et. al, 2019). However, functioning of the schemes responsible for health and nutrition of adolescent girls have been impaired by the pandemic.
- A survey by the National Campaign on *Dalit* Human Rights (NCDHR) shows that 53 per cent of the surveyed *Dalit* households and 45 per cent of the surveyed *Adivasi* households had not received nutritional food support under SNP. Around 32 per cent and 50 per cent of the surveyed *Dalit* and *Adivasi* households respectively, received less than the full quota of the free food grains under the National Food Security Scheme (The WIRE, 2020a).
- According to the recent 'Hunger-watch survey', 7 per cent of the particularly vulnerable tribal groups families, 76 per cent of *Dalits*, and 54 per cent of the *Adivasis* reported that their quantity of food consumption decreased in September-October as compared to pre-lockdown period. The survey also highlighted discrimination reported by *Dalit* and Muslim families while accessing food (The Wire, 2020b).
- UNICEF Odisha reports that young children in

Odisha's tribal dominated belt are severely affected due to disrupted nutrition services. Even post lockdown, as of September, an acceptable diet was available only to 52 per cent tribal children.

- A survey of 1000 children from tribal migrant families in rural Rajasthan shows that child malnutrition (weight-for-age less than -2 standard deviation) has increased from 68 per cent to 76 per cent during COVID-19.
- Research shows that impairment in nutritional status, consequent to quantitative and qualitative inadequacy of the diet, could be one of the first steps in the development of co-morbidities in disabled people. Among 21 types of disabilities as identified under Rights of Persons with Disabilities Act (RPwD), 2016, 12 were related to medical/health disability and some of those conditions progressively worsen as they are not provided nutritious diet and medical/health care services.

Existing policies and budgetary interventions

- For setting up of *Anganwadi* and Mini-*Anganwadi* centres in the tribal areas, population norms have been relaxed under *Anganwadi* Services scheme (Srivastava, 2018).
- To uplift the nutritional status of adolescent girls, there is Scheme for Adolescent girls (SAG), RKSK, and Anaemia *Mukt Bharat* Programme. The schemes cover provision of nutritious food to school dropouts, distribution of IFA supplements, and other health services for adolescent girls. PURNA in Gujarat and *Suposhan Abhiyan* in Chhattisgarh are some state -specific initiatives for adolescent girls.
- Some of the state specific interventions to address the challenges of malnutrition of tribal children are described below:

    1. Gujarat government has been implementing '*Doodh Sanjeevani Yojana*' since 2006-07, to improve and enrich the level of nutrition of primary school going tribal students.
    2. Maharashtra government launched APJ Abdul Kalam *Amrut Aahaar Yojana* in 2015, a full-meal scheme for pregnant and lactating women and Village Child Development Centre for severely undernourished children in tribal areas.
    3. *Atal Bal Aarogya Evam Poshan* Mission in Madhya Pradesh was launched in 2010 to bring about a systematic reduction in child malnutrition.

Policy measures needed

- The Centre must allocate resources for additional supplementary nutrition or booster meals for children from vulnerable communities. This can be done under SNP, or through a new targeted initiative.
- The Centre and States/UTs must invest resources in collecting, monitoring and publishing beneficiary data disaggregated by social identity for all important nutrition and health schemes for children. This can make nutrition and health service delivery more responsive to vulnerable children.
- As lack of livelihood options is one of the basic causes of the nutrition deficit in most vulnerable members of the households, especially during the pandemic, the Government needs to focus on employment generation programmes.

References

Acharya, Rajib (2020): "Reduced food and diet quality, and need for nutrition services during COVID-19: Findings from surveys in Bihar and Uttar Pradesh", International Food Policy Research Institute, July; https://southasia.ifpri.info/2020/07/09/15081/

Accountability Initiative. 2020. A Hidden Cost: The Pandemic's Impact on Nutrition. Accountability Initiative, Centre for Policy Research, New Delhi. Accessed at https://accountabilityindia.in/wp-content/uploads/2020/12/Nutrition-Brief_.pdf

Agarwal, Kabir (2020): "Coronavirus lockdown: As hunger grows, the fear of starvation is real", The Wire, 16th April; https://thewire.in/rights/covid-19-100-million-hunger-pds-universal

Awasthi, Prashasti (2020): "Covid-19 pandemic can increase malnutrition in Indian children by 10-20%: UNICEF Nutrition Chief", 20th September

https://www.thehindubusinessline.com/news/national/covid-19-pandemic-can-increase-malnutrition-in-indian-children-by-10-20-unicef-nutrition-chief/article32652323.ece

Azim Premji University (2020): COVID-19 Livelihoods Survey;https://cse.azimpremjiuniversity.edu.in/wp-content/uploads/2020/06/Compilation-of-findings-APU-COVID-19-Livelihoods-Survey_Final.pdf

Bansal, Vaishali (2020): "More evidence of India's food insecurity", The Hindu, 24th August https://www.thehindu.com/opinion/lead/more-evidence-of-indias-food-insecurity/article32424037.ece

Business Today (2020): "Rebooting Economy 41: India's growing poverty and hunger nobody talks about", 2nd November;https://www.businesstoday.in/opinion/columns/indian-economy-coronavirus-impact-indias-growing-poverty-and-hunger-due-to-covid19-pandemic-effect/story/420575.html

Centre for Budget and Governance Accountability (2020): "Numbers on the Edge: Assessing India's Fiscal Response to COVID-19";

https://www.cbgaindia.org/wp-content/uploads/2020/05/Numbers-on-the-Edge-Indias-Fiscal-Response-to-COVID-19-1.pdf

Chandra, Jagriti (2020): "Coronavirus lockdown: Care for malnourished children hit" , 1st September; https://www.thehindu.com/news/national/coronavirus-lockdown-care-for-malnourished-children-hit/article32497817.ece

Child Rights and You (2020): Rapid Online Perception Study about the Effects of COVID-19 on Children; https://www.cry.org/wp-content/uploads/2020/05/Report-CRY_COVID-19-Study.pdf

D'costa, Annabelle (2020): "Fight hunger during the lockdown, one community kitchen at a time", Living Foodz, 11th June; https://livingfoodz.com/stories/fight-hunger-during-the-lockdown-one-community-kitchen-at-a-time-2390

Drèze, J., Khalid, N., Khera, R., &Somanchi, A. (2017)." Pain without gain? Aadhar and food security in Jharkhand". Economic and Political Weekly, 52(50); https://www.epw.in/journal/2017/50/special-articles/aadhaar-and-food-security-jharkhand.html?destination=node/150571

DT Next (2020): "Food supplied to disabled not nutritious enough", 25th June https://www.dtnext.in/News/TamilNadu/2020/06/25053020/1237811/Food-supplied-to-disabled-not-nutritious-enough.vpf

Dvara Research (2020): "COVID-19 Impact on Daily Life (CIDL) Survey";https://www.dvara.com/research/wp-content/uploads/2020/06/COVID-19-Impact-on-Daily-Life-CIDL-Survey.pdf

Economic and Political Weekly (2020a): "Food Security and COVID-19: Why India's Public Distribution System requires an overhaul"; https://www.epw.in/engage/article/food-security-and-covid-19-why-indias-public

Fledderjohann, Jasmine; Aurino,Elisabetta; Vellakkal, Sukumar (2019), "Lack of access to sufficient food may be damaging Indian children's ability to learn", The Quartz India, April 20thhttps://qz.com/india/1600185/food-insecurity-may-be-damaging-indian-childrens-abilities/

Gupta, Radhika (2020): "The Magic of Millets", Outlook Poshan, 4th Septemberhttps://poshan.outlookindia.com/story/poshan-news-the-magic-of-millets/359836

Heady, Derek; Ruel, Marie (2020): "The COVID-19 Nutrition Crisis: What to expect and how to protect", International Food Policy Research Institute, April;https://www.ifpri.org/blog/covid-19-nutrition-crisis-what-expect-and-how-protect

In Re: Regarding Closure of Mid-day Meal Scheme ("In re MDMS"), Suo Motu Writ Petition (C) No. 2/2020, Supreme Court of India (2020); https://main.sci.gov.in/pdf/LU/18032020_112059.pdf

Jain, Shruti (2020): "Jaipur: Without Anganwadi food service, families struggle to meet nutritional needs", The Wire, 28th October; https://thewire.in/rights/jaipur-anganwadi-cooked-meals-families-struggle-covid19-lockdown

Live Mint (2020): "Cabinet approves Rs 15,000 crore package for fighting COVID-19 outbreak"; https://www.livemint.com/news/india/cabinet-approves-rs-15-000-crore-package-for-fighting-covid-19-outbreak-11587555395714.html

Ministry of Health and Family Welfare (MoHFW), Government of India, UNICEF and Population Council (2019): "Comprehensive National Nutrition Survey (CNNS) National Report", New Delhi. https://nhm.gov.in/WriteReadData/l892s/1405796031571201348.pdf

Ministry of Health and Family Welfare (MoHFW) (2019): Rural Health Statistics 2018-19, Government of India, New Delhi. Available at https://main.mohfw.gov.in/sites/default/files/Final%20RHS%202018-19_0.pdf

Ministry of Human Resource Development (MHRD) (2020a): National Education Policy, 2020

Ministry of Women and Child Development (MWCD) (2019): Lok Sabha Unstarred Question no. 169; http://164.100.24.220/loksabhaquestions/annex/171/AU169.pdf

Ministry of Women and Child Development (MWCD) (2020): Annual Report 2019-20; https://wcd.nic.in/sites/default/files/WCD_AR_English_2019-20.pdf

Mohan, Sanjana Brhamawar; Mhan, Pavitra; Amon, Arpita (2020): "Covid-19 impact: In south Rajasthan clinics , doctors see spike in TB and child malnutrition", 22nd October; https://scroll.in/article/976115/covid-19-impact-in-south-rajasthan-clinics-doctors-see-spike-in-tb-and-child-malnutrition

National Statistical Office (NSO) (2014): Nutritional Intake in India, 2011-2012, (July 2011-June 2012), NSS 68th Round; http://mospi.nic.in/sites/default/files/publication_reports/nss_report_560_19dec14.pdf

National Statistical Office (NSO) (2019): Unit level data on NSS 75th Round for Schedule- 25.2, (July 2017 - June 2018), Social Consumption : Education; http://mospi.nic.in/sites/default/les/publication_reports/KI_Education_75th_Final.pdf

Nair, Rema (2020) : "States can collect foodgrains from FCI on credit to ensure supply amid COVID-19 threat", The Print, 23rd March; Link: https://theprint.in/india/states-can-collect-foodgrains-from-fci-on-credit-to-ensure-supply-amid-covid-19-threat/386698/

New Indian Express (2020): "Covid brought diet troubles for tribal children", 29th Septemberhttps://www.newindianexpress.com/states/odisha/2020/sep/29/covid-brought-diet-troubles-for-tribal-children-unicef-2203376.html

Pant, Happy; Ambast, Shruti (2020): "While malnutrition rages, nutrition-related schemes get 19% less funding", India Spend, 13th February; https://www.indiaspend.com/while-malnutrition-rages-nutrition-related-schemes-get-19-less-funding/

Parajuli, Bishow (2020): "How India can improve its food security after the pandemic passes", 18th May; https://thewire.in/agriculture/how-india-can-improve-its-food-security-after-the-pandemic-passes

Paul, Meghna; Kapur,Avani (2020): "Poshan Abhiyan", Accountability Initiative, Budget Briefs, Vol12/Issue3; https://accountabilityindia.in/publication/poshan-abhiyaan-pre-budget/

Pingali, P., Mittra, B., & Rahman, A. (2017). The bumpy road from food to nutrition security-Slow evolution of India's food policy. Global food security, 15, 77-84.https://doi.org/10.1016/j.gfs.2017.05.002

Press Information Bureau (PIB) (2020): Government of India sanctions Rs. 15000 crores for India COVID-19 Emergency Response and Health System Preparedness Package; https://pib.gov.in/PressReleasePage.aspx?PRID=1617070

Press Information Bureau (PIB) (2020a): Ministry of Health & Family Welfare 2020 ACHIEVEMENTS https://pib.gov.in/PressReleasePage.aspx?PRID=1684546

Press Information Bureau (PIB) (2020b): Malnutrition in School Children https://pib.nic.in/PressReleasePage.aspx?PRID=1658306

Press Information Bureau (PIB) (2020c): Availability and distribution of buffer foodgrainshttps://www.pib.gov.in/PressReleasePage.aspx?PRID=1656292

Press Information Bureau (PIB) (2020d): Finance Minister announces Rs. 1.70 lakh crore relief package under Pradhan Mantri Garib Kalyan Yojana for the poor to help them fight the battle against Coronavirus; https://pib.gov.in/PressReleaseIframePage.aspx?PRID=1608345

Press Information Bureau (PIB) (2020e): Free food grains to 8 crore migrant labourers and their families to be provided under AtmaNirbhar Bharat Abhiyaanhttps://pib.gov.in/PressReleasePage.aspx?PRID=1624455

Press Information Bureau (PIB) (2020f): One Nation One Ration Card - Journey so far and journey ahead; https://pib.gov.in/PressReleasePage.aspx?PRID=1646954

Press Information Bureau (PIB) (2020g): Distribution of nutritious rice under PDShttps://pib.gov.in/PressReleasePage.aspx?PRID=1579502

PRS Legislative Research: "Demand for Grants 2020-21 Analysis: Food and Public Distribution", 14thFebruary;https://www.prsindia.org/parliamenttrack/budgets/demand-grants-2020-21-analysis-food-and-public-distribution

Press Trust of India (PTI) (2019): " Only 46% pregnant, lactating mothers receive take home ration under nutrition programme". The Hindu. Available at https://www.thehindu.com/news/national/only-46-pregnant-lactating-mothers-receive-take-home-ration-under-nutrition-programme/article28812840.ece

Raghunathan, K., Headey, D. and Herforth, A., (2020). "Affordability of nutritious diets in rural India", International Food Policy Research Institute; ;http://ebrary.ifpri.org/utils/getfile/collection/p15738coll2/id/133638/filename/133851.pdf

Rautray, Samanwaya (2020): "COVID-19: Ensure supply of midday meals amid school closure, says SC", The Economic Times , 19th March; https://economictimes.indiatimes.com/news/politics-and-nation/ensure-supply-of-midday-meals-amid-closure-sc/articleshow/74699626.cms?from=mdr

S, Rukmini ; Bordia, Radhika (2020): "Covid-19 has disrupted India's routine health services ; and led to shutdown of Anganwadis - two articles", 6th September; https://janataweekly.org/covid-19-has-disrupted-indias-routine-health-services-and-led-to-shutdown-of-anganwadis-two-articles/

Salcedo-La Vina et al (2020). Rural Women Must Be at the Heart of COVID-19 Response and Recovery. World Resources Institute; https://www.wri.org/blog/2020/09/rural-women-must-be-heart-covid-19-response-and-recovery

Sen, Jahnavi (2020): "New study backs reports that Aadhaar-PDS link in Jharkhand led to exclusions", The Wire, 21st February; https://thewire.in/rights/aadhaar-pds-ration-cards-jharkhand-jpal

Sethi V, Lahiri A, Bhanot A, Kumar A, Chopra M, Mishra R, Alambusha R, Agrawal P, Johnston R and de Wagt A. Adolescents, Diets and Nutrition: Growing well in a Changing World, The Comprehensive National Nutrition Survey, Thematic Reports, Issue 1, 2019.

Shalya, Chinmayi (2020): "Odisha set to introduce locally produced millets into ICDS, PDS", Down to Earth, 30th June; https://www.downtoearth.org.in/news/agriculture/odisha-set-to-introduce-locally-produced-millets-into-icds-pds-72039

Sharma, Samrat (2020): "Modi's free ration scheme fails to take off; 11 states didn't distribute even 1% foodgrains", Financial Express, 2nd July; Link:https://www.financialexpress.com/economy/modis-free-ration-scheme-fails-to-take-off-11-states-didnt-distribute-even-1-foodgrains/2010848/

Singh, Sushant; Magazine, Aanchal (2020): "Explained: Indian migrants, across India", 29th April; Link: https://indianexpress.com/article/explained/coronavirus-india-lockdown-migran-workers-mass-exodus-6348834/

Sinha,Dipa; Narayana, Rajendran (2020): "Hunger, nutrition are worse than before lockdown. PDS must be universalised", The Indian Express, 26th November

https://indianexpress.com/article/opinion/columns/india-hunger-index-poor-pds-welfare-programme-coronavirus-lockdown-narendra-modi-7061645/

Sinha, Dipa (2020): "Food for all during lockdown:State Governments should universalise PDS", 20th April; https://thewire.in/rights/covid-19-lockdown-food-supply-pds

Srivastava, Saumya (2018): " Why Undernutrition Persists in India's Tribal Population", The Wire, 25thSeptember; Link:https://thewire.in/health/why-undernutrition-persists-in-indias-tribal-population

The Economic Times (2020a): "Govt working on short, medium-term measures to control price rise: FM Sitharaman", 12th November; Link: https://economictimes.indiatimes.com/news/economy/policy/govt-working-on-short-medium-term-measures-to-control-price-rise-fm-sitharaman/articleshow/79191545.cms?from=mdr

The Economic Times (2020b): "Govt asks FCI to tie up with rice mills to boost supply of fortified rice", 3rd November; Link: https://economictimes.indiatimes.com/news/economy/agriculture/govt-asks-fci-to-tie-up-with-rice-mills-to-boost-supply-of-fortified-rice/articleshow/79020691.cms?from=mdr

The Wire (2020a): "COVID-19 Relief Hasn't Reached Most SC, ST Households Across India, Finds Study"; Link: https://thewire.in/rights/covid-19-relief-sc-st-pmgky-pmjdy-ncdhr-study

The Wire (2020b) : "Hunger Index Among Poor in 11 States Continues to Be Dire Post-Lockdown: Survey", 13th December. Link: https://thewire.in/rights/hunger-watch-survey-lockdown

Unicef India (2020): "UNICEF India COVID-19 Monthly Situation Report July 2020"; https://www.unicef.org/india/media/4346/file/UNICEF%20India%20COVID-19%20Situation%20Report%204%20July%202020.pdf

Varghese, Mini (2020): "COVID-19 will worsen the already abysmal state of nutrition among women", Nutrition International, June 14; Link: https://nutritionintl.org/news/all-blog-posts/covid-19-will-worsen-the-already-abysmal-state-of-nutrition-among-women/

Youth for Unity and Voluntary Action (2020): Living with Multiple Vulnerabilities: Impact of COVID-19 on the Urban Poor in the Mumbai Metropolitan Region; Link: https://yuvaindia.org/wpcontent/uploads/2017/03/COVID19_MMRImpact_UrbanPoor-1.pdf

Government of India (2019). Report for the Year 2020-21. Finance Commission XV. Accessed at https://fincomindia.nic.in/ShowContent.aspx?uid1=3&uid2=0&uid3=0&uid4=0

Websites

Anaemia Mukt Bharat (AMB) Portal: https://anemiamuktbharat.info/

India Government Website: https://www.india.gov.in/spotlight/poshan-abhiyaan-pms-overarching-scheme-holistic-nourishment#:~:text=Its%20aim%20to%20ensure%20holistic,covered%20in%20the%20third%20year

MDM Portal: http://mdm.nic.in/mdm_website/; as accessed on 17th December, 2020

National Family Health Survey (NFHS)-4 Report: http://rchiips.org/nfhs/factsheet_NFHS-4.shtml

National Family Health Survey (NFHS)-5 Report: http://rchiips.org/nfhs/factsheet_NFHS-5.shtml access as on 4th January, 2021

Union Budget, 2020-21: https://www.indiabudget.gov.in/

www.cry.org

Ensuring lasting change
for children

CRY – Child Rights and You

632, Lane No.3, Westend Marg, Near Saket Metro Station,
Saiyad-ul-Ajaib, New Delhi - 110 030

Tel: +91-11- 2953 3451/52/53

Email : cryinfo.del@crymail.org

Centre for Budget and Governance Accountability

B-7 Extn/110A (Ground Floor) Harsukh Marg,
Safdarjung Enclave, New Delhi - 110029, India

Tel: +91-11-49200400/401/402

Email: info@cbgaindia.org