

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION NO. 3398
ANSWERED ON 07.08.2026

STUNTING, WASTING AND ANAEMIA AMONG CHILDREN

3398. SMT. APARAJITA SARANGI:

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) whether the Government has evaluated the progress of Mission Saksham Anganwadi & POSHAN 2.0 in reducing child stunting, wasting and anaemia, if so, the details thereof;
- (b) the details of the children identified as malnourished and treated during the last three years, State/UT-wise including Odisha; and
- (c) the details of the corrective measures proposed for high-burden districts?

ANSWER

MINISTER OF STATE IN THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI SAVITRI THAKUR)

(a) to (c): An outcome-based evaluation study of Mission Saksham Anganwadi and Poshan 2.0 was conducted by Development Monitoring and Evaluation Office (DMEO), NITI Aayog in 2025 in 12 States and one Union Territory. Evidence from institutional assessments and household surveys indicated that in its current form, Mission Saksham Anganwadi and Poshan 2.0 (Mission Poshan 2.0) represents the Government's latest effort to holistically combat malnutrition and promote child development, by building on past programs with a converged and strengthened approach. Also, a third-party evaluation and impact assessment of Poshan Abhiyaan, the predecessor programme to Mission Poshan 2.0, was conducted by NITI Aayog in 2020. It found the relevance of Poshan Abhiyaan to be satisfactory for tackling malnutrition in the country.

Ministry of Women and Child Development (MoWCD) under Mission Poshan 2.0 has rolled out the Poshan Tracker as an ICT-based tool for continuous monitoring of beneficiaries registered at Anganwadi Centres (AWCs). The application facilitates dynamic identification and monitoring of malnutrition indicators such as stunting, wasting, and underweight prevalence among children. The State-wise and year-wise information on nutrition indicators

among children under 5 years is available at Poshan Tracker public dashboard at the given link: <https://www.poshantracker.in/statistics>.

As informed by the State Government of Odisha, the recovery rate among discharged SAM children improved steadily from 54% in 2023 to 79% in 2024 and 82% in 2025. As of 5 August 2026, the cumulative recovery rate further increased to 83%, with 1,01,469 of the 1,22,789 discharged children reported as cured, indicating sustained improvement in treatment outcomes under Purna Aahara.

The State of Odisha has adopted a continuum of nutrition-specific and nutrition-sensitive interventions, with intensified identification, treatment and follow-up of children at risk. The following measures are prioritised in high-burden districts:

- Early identification and active case tracking: Strengthen regular growth monitoring at AWCs and conduct focused drives such as Ojan Utsav. Utilising Poshan Tracker for beneficiary registration, portability, monitoring and timely follow-up.
- Intensified treatment through Purna Aahara: Ensure uninterrupted provision of augmented energy-dense Take-Home Ration (THR) and one egg to SAM children for 112 days (16 weeks), supported by fortnightly counselling and growth monitoring. Review every non-responsive case individually.
- Clinical referral and protocol-based care: Refer children with medical complications to NRCs or health facilities for specialised management. Provision of medicines, deworming and other treatment as per the approved protocol, with post-discharge follow-up.
- Enhanced nutrition support for MAM and SUW children: Provision of age-specific additional support under SNP and MSPY, including Chhatua, premixes, eggs, bananas or seasonal fruits, and hot cooked meals to address acute and chronic dietary gaps.
- Last-mile coverage in hard-to-reach habitations: Expansion of effective implementation of Pada Pusti Karyakram by decentralising spot feeding in remote hamlets and tagged villages, including morning snacks and hot cooked meals for preschool children.
- Family counselling and behaviour change: Use home visits, recipe demonstrations, community events, Poshan Maah and Poshan Pakhwada to reinforce breastfeeding, appropriate complementary feeding, dietary diversity, hygiene and timely care-seeking.
- POSHAN Abhibhabaks: Senior district-level officers are assigned as POSHAN Abhibhabaks to monitor high-burden Anganwadi Centres, identify implementation gaps and facilitate timely corrective action.
- District Nodal Officer Monitoring: Department has assigned senior officers as nodal officer for each district who are regularly touring and monitoring the nutritional interventions in field.

- Technology-enabled THR Quality Assurance: Department is ensuring quality of THR through use of computer vision cameras installed in various THR producing units. Quality THR ensures adequate nutritional entitlements reach the beneficiaries.
- T2T2 (Target-2 Transform-2): T2T2 is an initiative of the Department of Women & Child Development, Government of Odisha, aimed at improving the overall functioning and service delivery of Anganwadi Centres across the State. Under the initiative, the two lowest-performing Anganwadi Centres in each ICDS Project are identified based on key performance indicators. These Centres are provided focused guidance, regular monitoring and need-based support to address operational gaps, improve performance across critical parameters and ensure effective delivery of services to beneficiaries.
- Convergence and accountability: Converge AWC services with health check-ups, VHSNDs, IFA supplementation, sanitation and social-protection support. Review high-burden areas regularly through block and district dashboards covering enrolment, treatment completion, recovery, non-response, referrals and stock continuity.
