

# ADDRESSING MALNUTRITION THROUGH POLICY

Integrated Child Development Scheme and Mid-day Meal Scheme in India

# Children's Right to Food in India

- High malnutrition rates – 46% underweight among children under three (NFHS -3)
- Huge calorie deficits among children (NNMB)
- Direct government interventions in India for children's right to food/tackling malnutrition:
  - ▣ **Integrated Child Development Services (ICDS)** for children under six years of age, pregnant and lactating mothers and adolescent girls
  - ▣ **Mid Day Meal Scheme (MDMS)** for children in government primary and upper primary schools (children aged 6 – 14)
- Significant orders on the ICDS and MDMS by the Supreme Court under the 'Right to Food' Case (PUCL vs Union of India, CWP 196/2001)

# Mid Day Meal Scheme - History



- Existed in Tamil Nadu since the 1960s
- In 1995, Government of India introduced it as the National Programme of Nutritional Support to Primary Education but many states provided only “dry rations” until 2001
- Cooked meals only provided in Gujarat, Kerala, Tamil Nadu and parts of Madhya Pradesh and Orissa
- Supreme Court order in 2001 for the provision of **hot cooked meals** in all government and government aided primary schools (in the ‘Right to Food’ case)

# MDMS – Present Status

- Hot cooked meals provided in all states – recently expanded to include children in upper primary schools as well – covering 130 million children with annual budget (only central government) of almost Rs. 80 billion.
- New norms with enhanced nutritional and cost allocations introduced:

Net Content	Primary (I-V)	Upper Primary (VI-VIII)
Calories	450	700
Protein	12	20
Food grain(Wheat/Rice)	100 grams per child/school day	150 grams per child/school day
Cooking cost	Rs.2.00 per child/school day	Rs.2.50 per child/school day

# MDMS – Supreme Court

- On 28 November, 2001 the Supreme Court issued the following order:“implement the Mid-Day Meal Scheme by providing every child in every government and government assisted primary school with a prepared mid-day meal with a minimum content of 300 calories and 8-12 grams of protein each day of school for a minimum of 200 days”
- Further, orders were also issued directing governments to give priority to **disadvantaged groups** in appointment of cooks and helpers, make provision for **kitchen sheds**, **improve quality** and extend to summer vacations in drought-prone areas
- Repeated and strict reminders issued to states that did not implement the mid day meal scheme

# MDMS - Impact

- Mid-day meals help to protect children from hunger (including “classroom hunger”, a mortal enemy of school education)
- If the meals are nutritious, they can facilitate the healthy growth of children – not much evidence on this yet
- Improve enrolment, retention and attendance in schools – evidence shows large impact on enrolment especially for girls, SCs and STs. Mid-day meals contribute not only to the right to food but also to the right to education
- MDMs help to undermine caste prejudices, by teaching children to sit together and share a common meal.
- They reduce the gender gap in school participation, provide an important source of employment for women, and liberate working women from the burden of having to feed children at home during the day
- mid-day meals can be seen as a source of economic support for the poorer sections of society, and also as an opportunity to impart nutrition education to children.

# MDMS – Challenges/Way Forward

- Although there is a meal served in most parts of the country serious issues related to quality and regularity remain
- With rising prices, the allocations are not enough for a nutritious meal. What is given in most parts of the country is just boiled rice and a watery ‘dal’
- Many schools now have kitchen sheds, but infrastructure – clean drinking water, plates, utensils still not available in most places
- Community participation in actual implementation and monitoring low, although there is demand and the scheme is very popular
- Some success stories in Tamil Nadu, Karnataka, Gujarat which can be replicated – separate staff for meal, eggs and fruits in meal, integration with a school health programme

# Integrated Child Development Services

## - History

- The only comprehensive programme in the country to address the needs of children under six.
- Started in 1975 “to provide an integrated package of services in a convergent manner for the holistic development of the child”.
- The government describes it as “India’s response to the challenge of providing pre-school education on one hand and breaking the vicious cycle of malnutrition, morbidity, reduced learning capacity and mortality, on the other.”
- Implemented through ‘anganwadi’ centres and ‘anganwadi’ helpers and workers.

# ICDS – Present Status

- Current coverage is about 30% of all children under six, with 80% of required anganwadi centres in place
- Supplementary nutrition given to children in the age group 6 months to 6 years, pregnant and lactating mothers
- Current Norms for this:

Category	Rate	Calories (K Cal)	Protein (g)
Children (6-72 months)	Rs. 4.00	500	12 - 15
Severely underweight Children (6 - 72 months)	Rs. 6.00	800	20 - 25
Pregnant women and nursing mothers	Rs. 5.00	600	18 - 20

# ICDS – Supreme Court Orders

- The first order related to ICDS in 2001 directing universalisation – coverage of ALL ‘settlements’ and ALL eligible beneficiaries
- Further orders in 2004, 2006 and 2007
- Supreme Court directs that at least 14 lakh anganwadis are to be sanctioned and operationalised by December 2008
- Coverage of all SC/ST habitations and urban slums on a priority basis
- Universal coverage – ALL children under six, ALL pregnant and lactating mothers and ALL adolescent girls
- **‘ANGANWADI ON DEMAND’**
- Contractors not to be used for supply of nutrition
- Increase SNP norm from Re.1 to Rs. 2

# ICDS – Impact

- Limited impact of the scheme on malnutrition. Some studies show that it did contribute to decline in infant mortality and severe malnutrition
- In terms of coverage, it has been improving. When the case started about 6 lakh anganwadis in the country . Currently more than 10 lakh sanctioned.
- The allocations of supplementary nutrition also increased from Re. 1 to Rs. 2 to now Rs. 4
- A lot of focus on the programme in the recent past – by Supreme Court, by government, by civil society and by media

# ICDS – Challenges



- ❑ Low coverage
- ❑ Focus has been more on 3 to 6 year age group and for this group on feeding and not pre school education
- ❑ Poor infrastructure
- ❑ Workers – low motivation, over-burdened, poorly paid
- ❑ SNP is of poor quality
- ❑ No convergence with health services
- ❑ Community participation is low

# Managing malnutrition: Essential components

- **The Food Component:** making available sufficient food, which is acceptable, which is varied- (adequate quality- energy dense, micronutrient rich etc..)
- **The System of Child Care:** supplements care by the family; enables and empowers women ; care needs to be provided by informed, interested adult carers with appropriate infrastructure
- **System of Health Care:** provides prompt locally available care for common but life threatening illnesses- both prevention and management

# Comprehensive Services for Children under Six

- 'Universalisation with quality' of the ICDS
- Crèches and day care facilities
- Maternity entitlements
- Support for “infant and young child feeding” (IYCF), particularly breastfeeding
- Prevention of interference of commercial interests through 'packaged' or 'ready to eat' food or 'public private partnerships' in government programmes for child health and nutrition.

# Children and the Right to Food Act....



- The Supreme Court converted benefits of the ‘schemes’ into legal entitlements for children under six and school-going children; especially significant as there is no ‘law’ that covers rights of children under six
- The Supreme Court orders also establish the principle of universalisation, in a context where there is increasing pressure to have targeted programmes
- The proposed Right to Food Act is an opportunity to provide a legal framework for comprehensive services for children, protecting their right to food.

## Further information/resources:



- [www.righttofoodindia.org](http://www.righttofoodindia.org) (esp. see primers on ICDS and MDMS)
- [www.sccommissioners.org](http://www.sccommissioners.org)
- 'Strategies for Children Under Six in the 11<sup>th</sup> Plan' by the Working Group for Children Under Six (of the Right to Food campaign and Jan Swasthya Abhiyan)
- FOCUS Report