

It's not yet mission accomplished on the Centre's Poshan Abhiyaan

S.V. Subramanian

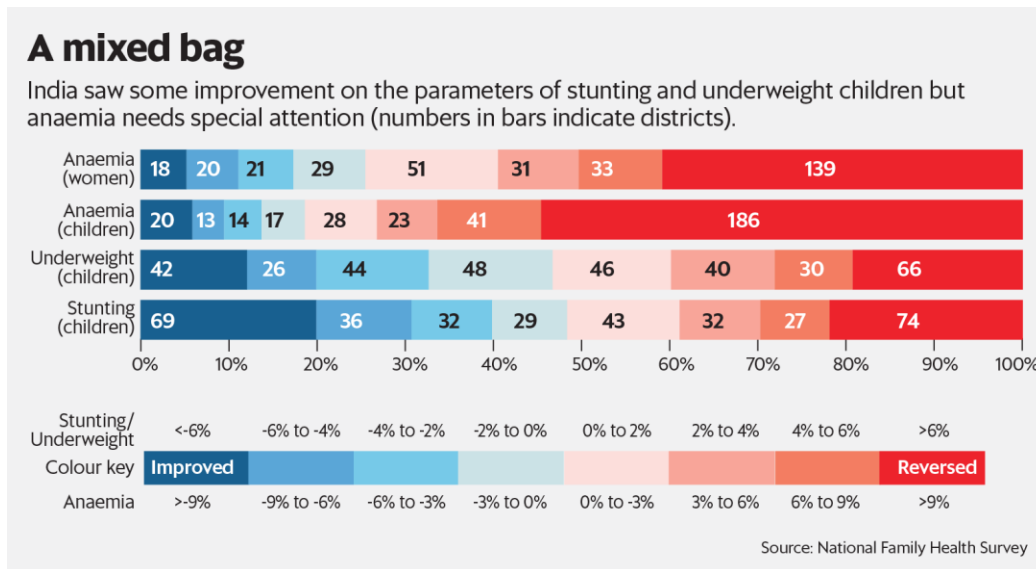
While some improvement has been made by the country, efforts to ensure nutritional security are more important than ever

It's been three years since the Government of India launched the Prime Minister's Overarching Scheme for Holistic Nutrition, or [Poshan Abhiyaan](#). The goal was to improve the nutritional status of children and adolescent girls, as well as pregnant and lactating mothers. The urgency was evident as a clear [time-frame of three years](#) was set, and five indicators—prevalence of low birthweight, stunting, underweight and anaemia among children and women—were identified for substantial improvement. The government showed its commitment by putting money where its mouth was; it allocated ₹9,046.17 crore for the mission.

The trigger to go on an all-India mission was the disconcerting statistics revealed by the fourth National Family Health Survey ([NFHS-4, 2015-16](#)) on the above indicators. The fact sheets for 342 districts from 17 states and five Union territories (UTs) from the NFHS-5, (bit.ly/2WQA51y) conducted in 2019-20, are now out. With the exception of prevalence of low birthweight, the just released district fact sheets provide data on four of the five Poshan Abhiyaan indicators. So, how have the 342 districts done with regard to meeting the targets set?

Comparing performance across districts: Of the four indicators, stunting across districts improved the most, with 69/342 districts experiencing a decline of more than 6 percentage points (the Poshan Abhiyaan target) between the two surveys. Child

underweight followed a pattern similar to stunting with 42/342 districts meeting the target. Anaemia, however, is a different story; the Poshan Abhiyaan target of a 9-percentage-point decline in three years was observed for only 18/342 (women and adolescent girls) and 20/342 (children) districts.



Some degree of decline in the prevalence of stunting and underweight was observed in nearly half of the districts. At the same time, a little over half of them also disconcertingly experienced a reversal. In 74/342 (stunting) and 66/342 (underweight) districts, the reversal was of the same magnitude as the target (i.e., 6 percentage point), but in the detrimental direction.

Anaemia not only showed minimal improvement across districts, it reversed in 81.3% (278/342 for children) and 74.3% (254/342 for adolescent girls/women) of the districts. Disturbingly, the reversal was greater than 9 percentage points in 186/342 (children) and 139/342 (adolescent girls and women) districts.

The way forward: The following two insights emerging from the [data patterns](#) would be crucial to consider if India chooses to upgrade and implement Poshan Abhiyaan 2.0.

First, within the same state, there are districts that [experienced improvement as well as reversal](#), especially with regards to stunting and underweight findings. It is important that an immediate effort is made to learn from both success and failure in these districts. Such learning can focus on both the distinct components of the Poshan Abhiyaan programme, as well as how synergistically they were implemented.

Second, the fact that a notable number of districts experienced improvement and reversal suggests that inequality between districts (even within the same state) has increased. This might be an unintended consequence of a concentrated focus on certain districts over others in recent years.

Prioritizing certain districts over others is inevitable in any policy formulation and implementation. An examination of the districts that experienced substantial improvement or reversal, and whether they were priority districts for Poshan Abhiyaan or not would be necessary. Learning from this should then be used to modify or tweak using other [methods for prioritization](#), both for efficiency as well as for promoting geographic equity. Further indicator-specific prioritization is also necessary as the data reveals different patterns for anthropometric-based nutritional measures of stunting/underweight from the more direct measures of dietary deficiency.

[Recent evidence](#) also makes it clear that it would be prudent to equally focus on within-district variation, in [particular between villages](#). Villages are not only a setting for social engagement, but also are the unit where public policies and programmes come to fruition for the target population.

The three-year time-frame of Poshan Abhiyaan, incidentally, ended this month. It is unclear what the future of Poshan Abhiyaan will be. Regardless, the NFHS-5 data makes it obvious that reducing the burden of undernutrition, especially among children and women, will need to remain a greater priority than ever before. It is,

therefore, imperative that the government undertakes a rigorous assessment of Poshan Abhiyaan, including an exploration of any changes and course corrections that may be necessary.

It is critical to remember that these statistics reflect a scenario prior to the covid pandemic and the 2020 lockdown. From all accounts, these two events hurt health and nutrition services, which are vital to any child's first 1,000 days and a core feature of Poshan Abhiyaan. Whatever form the next phase of India's mission to eliminate undernutrition takes, reversals experienced by a majority of districts on nutrition indicators suggest that [India needs to make food security](#) a centrepiece of its overall development agenda.

Laxmi Kant Dwivedi of International Institute for Population Sciences and Weiyu Wang and Weixing Zhang of Harvard Center for Population and Development Studies assisted with this article.

S.V. Subramanian is professor of population health and geography, Harvard Center for Population and Development Studies.

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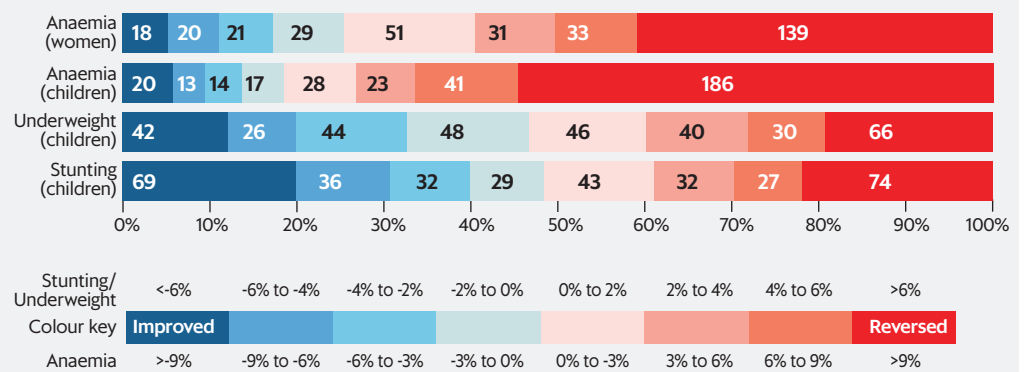
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PRIYANKA PARASHAR/MINT

A mixed bag

India saw some improvement on the parameters of stunting and underweight children but anaemia needs special attention (numbers in bars indicate districts).



Source: National Family Health Survey

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lages (bit.ly/2JnFHOa). Villages are not only a setting for social engagement, but also are the unit where public policies and programmes come to fruition for the target population.

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