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Prime Minister's Overarching Scheme for Holistic Nutrition (POSHAN) Abhiyaan: An Analysis

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ABSTRACT

While India's malnutrition rates have improved over the recent years, the country is still home to the largest number of stunted and wasted children in the world. To combat the dismal state of nutrition in the country, the government launched the Prime Minister's Overarching Scheme for Holistic Nourishment (POSHAN) Abhiyaan ('movement') in 2017, a flagship mission that aims at a convergence mechanism for the country's response to malnutrition."

"Despite several programmes targeted towards improving the health and nutrition of women and children, we have not been able to solve this persistent problem. The ICDS programme is India's primary intervention in this area. However, despite being implemented for decades now, the results of the programme are sub-optimal at best. In order to secure the well-being of the children, and to fully realize the growth potential and capitalize on the demographic dividend; India needs drastic reductions in the prevalence of malnutrition."

"This paper analyses the reasons due to which under-nutrition continues to remain a threat and presents the current strategy of the government to curb it. The researchers present a theoretical analysis of the developmental aspects utilized in the schemes that are being implemented. The paper argues that without channelizing cross-sectoral interventions towards the first 1000 days, achieving geographic and programmatic convergence and creating a janandolan, success in this area is highly unlikely."

Keywords: *Poshan Abhiyaan, nutrition, law, capability approach.*

I. INTRODUCTION

There are so many hungry people that God cannot appear to them except in the form of bread. This quote by Gandhi unfortunately stood the test of time. In this rapidly developing world, the fruits of development have not been reaped by all equally. Post millennium, the globalization acted as a growth engine, but it did little to increase the development of the countries. The

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standard of human life is still sub-par and there is hardly any development for the poorest of the poor sections. India still ranks 102 of 117 countries in Global Hunger Index(GHI)³. To combat the same, the governments in India have made several efforts in the direction of alleviation of hunger and malnutrition.

“The goal is to fulfill the SDG 2 of ending malnutrition by 2030, including the internationally agreed 2025 target of eliminating stunting and wasting in children under 5 years. This is a tall goal given that the decadal decline in stunting, from 48 percent in 2006 to 38.4 percent in 2016, is only one percentage point a year. It warrants an immediate alignment amongst ministries, the proper juxtaposition of health and nutrition programmes right from pregnancy until the child reaches five years of age, and critical monitoring of progress made over the course of the programme.”⁴

The POSHAN ABHIYAN is another brick in the wall being erected to leave malnutrition on the other side. The scheme was launched in 2017 to provide holistic nutrition for women and children, the more vulnerable sections of the Indian society.

(A) Research Problem

The POSHAN ABHIYAN under its flagship is trying to combat the issue of hunger. The fact that the economic growth of a country like India has skyrocketed, but the basic necessities like food are still scarce is staggering and ghastly. India has the world’s largest number stunted and wasted children.⁵ These figures clearly show a flaw in the development models that have been applied. Through the paper, the researchers would evaluate the policy and the problem of hunger in the light of the developmental approaches proposed by various scholars like Gandhi and Amartya Sen in the Indian context.

(B) Research Question

Would the Gandhian developmental model still hold its relevancy in this rapidly changing world? (vicious cycle)

Would the approach of counting development only through the HDI be the way to gauge the development most efficiently and accurately?

³ Global Hunger Index 2019. <https://www.globalhungerindex.org/about.html>

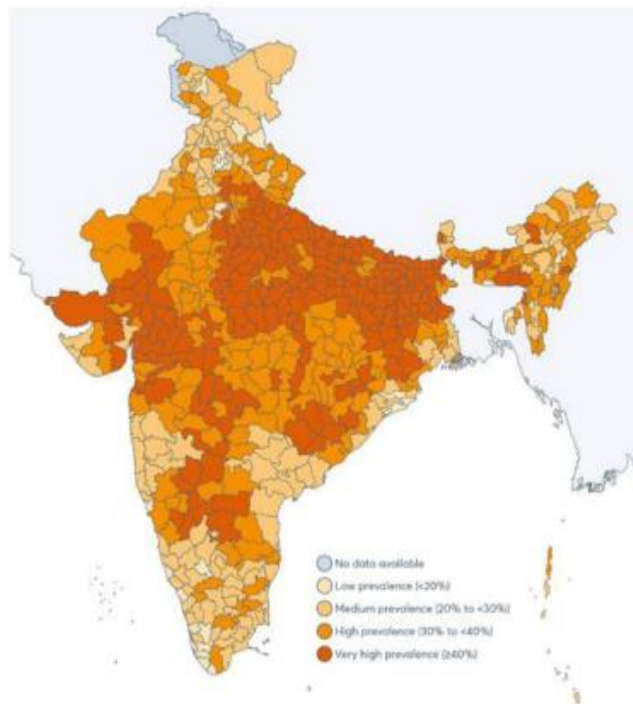
⁴ Kriti Kapur and Shobha Suri, *Towards a Malnutrition Free India: Best Practices and Innovations from POSHAN Abhiyaan* (Observer Research Foundation, March 2020), 7.

⁵National Family Health Survey 2015-16, India Fact Sheet, Accessed in Jan 2020, <http://rchiips.org/nfhs/NFHS-4Reports/India.pdf>

II. INDIA'S NUTRITIONAL CHALLENGES

Indians often express pride in the fact that over half a century after independence, India has remained a stable and effective democracy, one of the largest in the world. It has thus confounded the gloomy predictions which were made by many western scholars at the time of independence. Regular, and relatively free elections, a free press, an independent judiciary and apolitical army, and respect for constitutional procedures and laws, are some of the features of Indian democracy which are often cited with pride.

However, it is paradoxical to that along with the development that ensued with the democratic framework, India usually performs exceptionally poor on a wide range of undernutrition indicators, exhibiting high rates of stunting (38%), wasting (21%) and anemia (58%) among preschoolers, and underweight (23%) and anemia (53%) among adult women.⁶ High prevalence rates combined with a large population mean that India is the single largest contributor to maternal and child undernutrition world-wide.



Source: Global Nutrition Report 2020³³

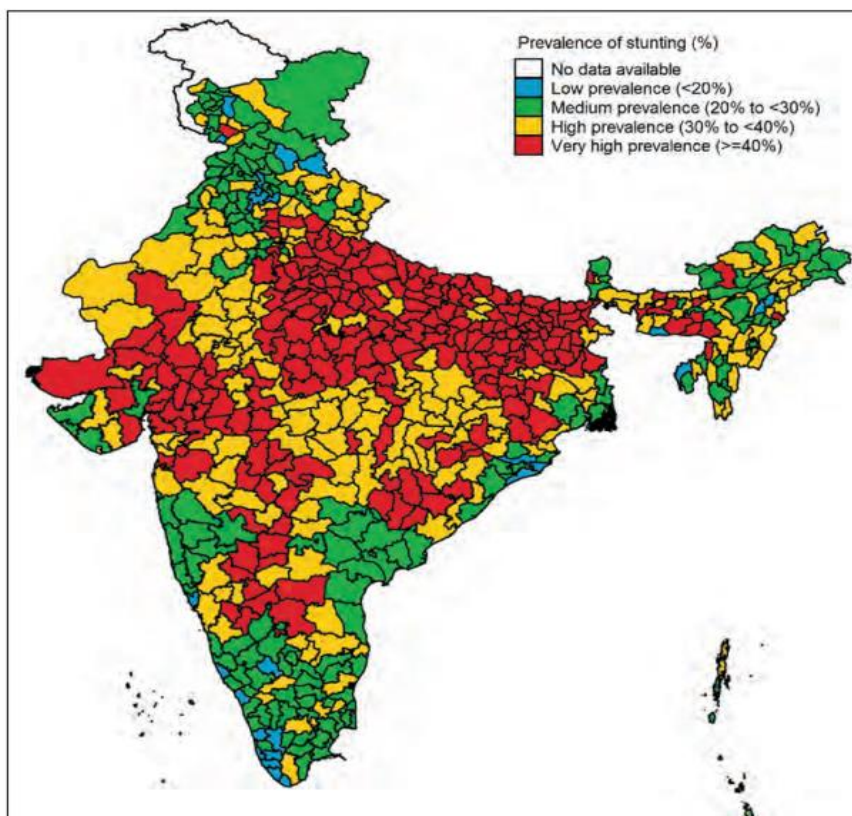
Prevalence of stunting among children under five years at subnational level

The sluggish speed of decrease in malnutrition notwithstanding promising economic development keeps on bewildering policymakers and specialists all across India. The outcomes of early stunting and its irreversible sway on life span, vulnerability to diseases including non-

⁶ IIPS, 2015. National Family Health Survey-4: India Fact Sheet.

communicable diseases, physical and mental development, execution in school and grown-up productivity has been widely reported.⁷

Among India's most serious yet imperceptibly tended to advancement challenges are malnutrition, which contributes altogether to the country's disease trouble. As it is eagerly awaited upon to reap the benefits of India's demographic dividend, the urgency to address malnutrition has never been more potent. It is estimated that about two-third of India's present workforce was stunted in their childhood.⁸ Even as NFHS-4 data shows that the country's malnutrition rates have gone down, half of all children from families in the lowest income quintile are as yet stunted (51%) or underweight (49%).⁹ Today India is home to the biggest number of stunted children (46.6 million) and squandered kids (25.5 million) on the planet.¹⁰



Source: IFPRI 2017 <http://ebrary.ifpri.org/cdm/ref/collection/p15738coll2/id/131162>

The Indian strategy is loaded with intercessions focused on working on the wellbeing and sustenance status of women and children. However, their effect can be expressed as less than ideal, that too in the best-case scenario, principally because of administration and execution issues.

⁷ Bhutta, 2013; Smith & Haddad, 2015

⁸ Galasso & Wagstaff, 2015

⁹ National Family Health Survey 2015-16, India Fact Sheet, Accessed in Mar 2022, <http://rchiips.org/nfhs/NFHS-4Reports/India.pdf>

¹⁰ Ibid

The POSHAN Abhiyaan presents a unique opportunity to make a dent in this area. A new strategy, presented here, has been carved out to eradicate under-nutrition from its roots. As it transforms into a “janandolan”, that the researchers hope and explain further in this paper, it is essential that the Abhiyaan is co-owned by all stakeholders in order to amplify its efforts to reach its final objective of a drastic reduction in under-nutrition levels in India.

The Advent of PM’s Overarching Scheme for Holistic Nutrition (POSHAN) Abhiyaan:

“India has attempted several nutrition programmes over the last 40 years, with the formulation of the Integrated Child Development Services (ICDS) and the nationwide execution of the mid-day meal scheme. However, nutrition and stunting continue to persist as roadblocks for the country. Stunting has wide-ranging repercussions on human capital, poverty alleviation and the promotion of equity. It also significantly diminishes educational potential,¹¹ resulting in fewer professional opportunities. The return on investment in reducing stunting and wasting is manifold (US\$18) on every US\$1 invested.”

The historical lack of adequate investment in health and education has led to slower economic growth. The World Bank states,¹² “A 1% loss in adult height due to childhood stunting is associated with a 1.4% loss in economic productivity.” Stunting also has lasting effects on future generations.

“According to the National Family Health Survey 4 (NFHS-4) 2015-16, India has unacceptably high levels of stunting, despite marginal improvement over the years. India has nearly halved the proportion of its stunted children (38.4 percent) from what it was in the late 1980s (66.2 percent). The percentage of under-five children who are stunted declined to 38.4 percent from 48 percent a decade ago. Meanwhile, the percentage of children under-five who are wasted increased over the last ten years, from 19.8 percent in 2005-06 to 21 percent in 2015-16. The proportion of children who are severely wasted also increased from 6.4 percent to 7.5 percent between 2005-06 and 2015-16, respectively.¹³”

“The survey data shows increased prevalence of stunting with age, peaking at 18-23 months. Timely interventions of breastfeeding, age-appropriate complementary feeding, full immunization, and vitamin A supplementation have been deemed essential in enhancing nutrition outcomes in children.¹⁴ However, data shows that only 41.6 percent of children are

¹¹ Global Nutrition Report 2018. <https://globalnutritionreport.org/reports/global-nutrition-report-2018/>

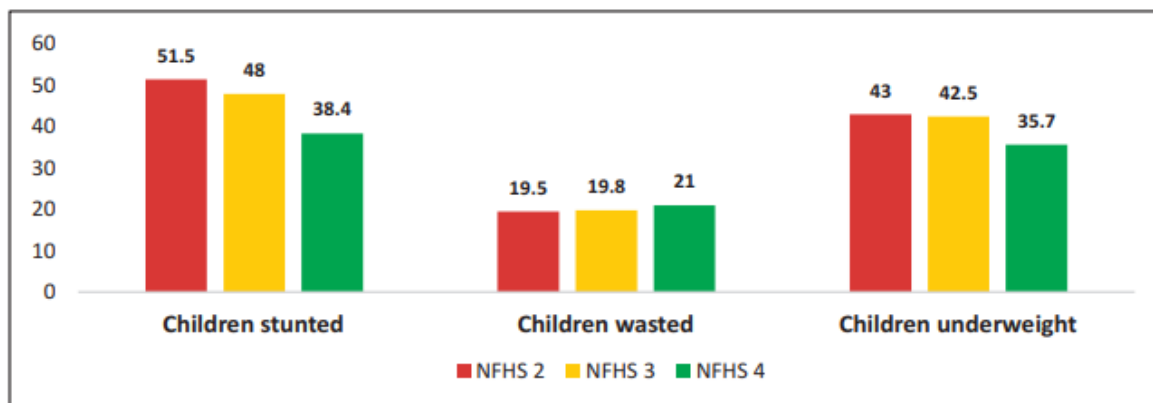
¹² Shekar, Meera, Richard Heaver, and Yi-Kyoung Lee, *Repositioning nutrition as central to development: A strategy for large scale action* (World Bank Publications, 2006).

¹³ ORF Special Report, March 2020

¹⁴ Oommen C Kurian and Shoba Suri, *Weighed Down by the Gains: India’s Twin Double Burdens of Malnutrition and Disease* (ORF Occasional Paper, May 2019, Observer Research Foundation) 193.

breastfed within one hour of birth, 54.9 percent are exclusively breastfed for six months, 42.7 percent are given timely complementary foods, and only 9.6 percent of children below two years of age receive an adequate diet.¹⁵

Figure 1: Malnutrition Trends in India



Source: National Family Health Survey 4, 2015-16 @Observer Research Foundation's India Data Labs

“India’s primary nutritional and child development scheme, ICDS, has expanded steadily across the country during the 45 years of its existence. Launched in 1975, today the scheme covers almost all development blocks of the country and has addressed some of the most important underlying causes of undernutrition.”

“The programme adopts a multi-faceted approach to children’s well-being by integrating health, educational and nutritional interventions through a community network of Anganwadi centres (AWCs). These measures include Supplementary Nutrition Programme, growth monitoring and promotion, nutrition and health education, immunizations, health checkup and health referral, as well as preschool education.”

“The primary beneficiaries have been children below six years, as well as pregnant and lactating women. In 2006, ICDS became the flagship programme of the Ministry of Women and Child Development in addressing India’s fight with malnutrition. The Anganwadi Services¹⁶ Scheme today operates through a network of some 7,075 fully operational projects and 1.37 million AWCs.”

“The Midday Meal scheme,¹⁷ providing hot meals to children attending government schools, dates back to 1925, having been started locally by the Madras Municipal Corporation. To enhance enrollment, retention, and attendance in schools, and simultaneously improve

¹⁵ Ibid.

¹⁶ Ministry of Women & Child Development. Government of India. Annual Report 2018-19. <https://wcd.nic.in/sites/default/files/WCD%20ENGLISH%202018-19.pdf>

¹⁷ Mid Day Meal Scheme. Ministry of Education. Government of India. http://mdm.nic.in/mdm_website/

nutritional levels among children, it was launched nationally from 1995. About 91.2 million children across 1.14 million schools benefit from the scheme”.¹⁸

Regardless of a variety of projects accommodating food security and improved maternal and child wellbeing and sustenance, the take-up of administered services has stayed low. Just 51% of pregnant women go to at least four antenatal centers and just 30% consume iron folic corrosive (IFA) tablets.¹⁹

Uptake of strengthening sustenance fluctuates from 14 to 75 percent among kids and is 51% and 47.5 percent among pregnant and lactating women respectively. Just 50% of pregnant and lactating women are signed up for the maternity benefit scheme across states. Proper newborn and child feeding practices stay low.

Opportune inception of breastfeeding is just at 42%, in spite of 79% conveyances being institutional. Selective breastfeeding for a long time is only 55% and convenient presentation of correlative feeding tumbled from 52.6 percent in 2015 to 42.7 percent in 2016.

In 2017, the government of India launched POSHAN Abhiyaan or its flagship National Nutrition Mission (NMC) that aims to improve nutrition amongst children, pregnant women, and lactating mothers.

The essential objective²⁰ of POSHAN Abhiyaan is improving the nutritional status of children from 0-6 years, adolescent girls, pregnant women, and lactating mothers. POSHAN Abhiyaan is a three-year program laid out to guarantee a comprehensive methodology, covering every one of the 28 States and 8 Union Territories. The technique presents an exceptional open door to the destruction of undernutrition in the grassroots. An overall multi-clerical combination mission, it aims to have a malnutrition-free India by 2030.

“The mission is a combination of different plans/programs, including the PMMVY, Anganwadi Services, Scheme for Adolescent Girls of Ministry of Women and Child Development (MWCD), National Health Mission (NHM) of Ministry of Health and Family Welfare, Swachh Bharat Mission of Ministry of Drinking Water and Sanitation (DW&S), Public Distribution System (PDS) of Ministry of Consumer Affairs, Drinking Water and Toilets with Ministry of Panchayati Raj, Mahatma Gandhi National Rural Employment Guarantee Scheme

¹⁸ Barkha Mathur, “National Nutrition Month: 10 Things To Know About India’s Mid-Day Meal Scheme, World’s Largest School Feeding Program”, *NDTV*, (September 21, 2020) <https://swachhindia.ndtv.com/national-nutritionmonth-things-to-know-about-india-mid-day-meal-scheme-world-largestschool-feeding-program-38040/>.

¹⁹ Shobha Suri and Kriti Kapur *POSHAN Abhiyaan: Fighting Malnutrition in the Time of a Pandemic*, (Observer Research Foundation, December 2020) 14.

²⁰ Ministry of Women and Child Development, Government of India, POSHAN Abhiyaan <http://poshanabhiyaan.gov.in/#/>

(MGNREGS) of Ministry of Rural Development (MoRD), Food and Public Distribution (CAF&PD), and other Urban local bodies through pertinent Ministries.²¹”

“The Food Fortification Resource Centre (FFRC)²² was set up to provide information to the various Ministries of the government to fortify the five staples—rice, wheat, oil, milk, and salt—and provide aid to the states on how these can be disseminated through Public Distribution System, Mid-Day Meals or the ICDS. One of the greatest benefits of having fortified staples is that without tablet distribution or monitoring, staples containing essential micronutrients can be provided to the people.”

POSHAN Abhiyaan tends to judiciously utilize the existing national and state resources in a manner that is sustainable in its impact and directional in objective delivery and achievement. Converged with the existing schemes for general public welfare, the Abhiyaan stands apart as a pedestal for developmental aspects that can be incorporated in schemes. Generally centered around two broad theories of development studies:

1. The Gandhian Approach of Development,
2. The Human Capability Approach of Development,

the scheme caters to the needs for a developing nation like India. The same is further explained by the researchers in the below mentioned analysis.

III. GANDHIAN APPROACH OF DEVELOPMENT

Gandhi believed that societies change constantly and that the purpose of this change should be development. The goal of Gandhian development is to build a self-sufficient society. Gandhi gave models like decentralization of economy, Sarvodaya and the doctrine of trusteeship.

Gandhi believed in developing the rural economy as the backbone of the country post-independence. He believed in enhancing the human capital and also in development for the betterment of the standard of living of the people and not for growth alone, which often left many behind. Gandhi propagated “Gram Swaraj” because he was aware of the effect of the accumulation of wealth and capital in the hands of few. Gandhian socialism directed the taxing of the few rich and furthered the equitable distribution of wealth by providing employment opportunities.

The hunger problem of India is one of the biggest obstacles hindering the development in the

²¹ Ministry of Health and Family Welfare, Government of India, Convergence action plan guidelines for effective implementation under POSHAN Abhiyaan, November 2018, <https://icds-wcd.nic.in/nnm/NNM-Web-Contents/LEFTMENU/Guidelines/Operational-Guidelines-for-Convergent-Action-Plan-02-11-2018.pdf>

²² Food Fortification Resource Centre, Food Safety and Standards Authority of India, <https://ffrc.fssai.gov.in/>

country. Even today child and maternal undernutrition is the single largest health risk factor in India and is responsible for 15 percent of India's total disease burden.²³ The food distribution in India is skewed in a way that it doesn't really favor the most vulnerable sections, this perpetually continues the vicious circle of poverty and malnutrition. The ICDS, which is the main scheme for the alleviation of India malnutrition was introduced in 1975. But even in this programme, historically irregular, inefficient, and inadequate budgetary allocations per malnourished child and high levels of undernutrition was seen in the poorest states. This shows the disparities that were there and even arose due to the distribution channels.

The COVID-19 pandemic is not only fueling the global nutrition crisis but is also highlighting the importance of good nutrition in our diet.²⁴ The Global Nutrition Report 2020 also suggests that the pandemic might reverse the progress that has been achieved so far in combatting hunger in the country.²⁵ The nutritional deficiencies particularly affect the health of women and children and often cause life challenging issues. The National Family Health Survey 4 of 2015-16 revealed that, nationally 50.4% women in the reproductive age are anemic. This has long term repercussion on the health of both the women and their children, who are breastfed. The awareness regarding the breastfeeding for six months and then a healthy diet complimented by breastfeeding is also less. As per NFHS data, only 54.9% children are exclusively breastfed and only 42.7 are given proper supplementary food.

These critical numbers became more relevant and the plight of the poor who are suffering suddenly took a center stage as the pandemic spread and travesty of the migrant labourer's displacement unfolded. Thousands and millions were bereft of their livelihood and their homes away from home. The nation saw millions being displaced from the cities, where they had established their life due to the existence of opportunities and the hope of a better standard of living. This crisis has been called the greatest exodus since the partition of India.²⁶

If one was to apply the Gandhian model of decentralization and the growth of the village economy, then the displacement of the people from their roots would not occur. Also, the self-sufficient units would be capable to face crisis and the distributory justice for the development

²³ Swaminathan, Soumya, Rajkumar Hemalatha, Anamika Pandey, Nicholas J. Kassebaum, Avula Laxmaiah, Thingnganing Longvah, Rakesh Lodha et al. *The burden of child and maternal malnutrition and trends in its indicators in the states of India: the Global Burden of Disease Study 1990–2017. The Lancet Child & Adolescent Health* 3, no. 12 (2019): 855-870. [https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(19\)30273-1/fulltext](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(19)30273-1/fulltext)

²⁴ 2021 Global Nutrition Report: The state of global nutrition. Bristol, UK: Development Initiatives.

²⁵ Global Nutrition Report 2020.

²⁶ Hannah Ellis Petersen and Manoj Chaurasia *India racked by the Greatest Exodus since Partition due to Coronavirus*, (30 Mar 2020).

would be easily executed.

Often due to the preexisting disparities and the centralization and accumulation of capital, benefits do not seep till the grassroots. Children born to under-nourished mothers face huge risks of fatality and less fetal growth. Those who survive are mostly undernourished and pass on their malnourishment to their future generations. Gandhi propagated the principle of trusteeship, which was based on the idea of everyone's livelihood without anyone's exploitation. These ideas of Gandhi may seem very utopian, but even their partial or modified execution can help in the upliftment of many.

Sarvodaya means the upliftment of all, Gandhi proposed a developmental model which was inclusive and sustainable. His model focused more on strengthening the grassroots and then building on it to achieve development. Instead, the first two planning commission policies exclusively focused on the industrialization and economic growth of the country. The rampant capitalization and the neglect of the rural areas led to major inequalities. The idea of passing down the benefits after making strides in development at the top is not only elitist, but also stripes the excluded and marginalized sections from securing the means for attaining the capability to develop themselves as human capital. India ranks 116 out of 157 countries in the Human Capital Index.²⁷ Poor nutrition in the early days of an infant leads to stunted growth and this in turn creates an intergenerational cycle of malnutrition.²⁸ It decapitates people from reaching their full potential which hinders their social mobility and economic upliftment.²⁹

This corroborates the idea of vicious circles as presented by Gunnar Myrdal, wherein complex web of interlocking vicious circles constitute a chain of cause-and-effect relationships where one unfavorable circumstance paves the way for another such circumstance and leads to a downward spiral. This downward spiral cannot be remedied without a rampant revamping of the structure and massive aid. The stunting has far reached effects, it does not just affect the individual, it affects the whole society as many such individuals who form a part of the social fiber are affected. Not only this, the cumulative effect of this is also seen. Gunnar Myrdal developed the theory of circular cumulative causation. According to him, of things are left in the hands of the market forces alone without any state control, excessive capitalization will lead to the cultural and economic development of some areas, while leaving the other areas of the

²⁷ The world bank, *Human Capital Index: Country briefs and Data*, 2020, https://databank.worldbank.org/data/download/hci/HCI_2pager_IND.pdf

²⁸ Georgiadis, Andreas and Mary E. *Penny Child undernutrition: opportunities beyond the first 1000 days* (The Lancet Public Health 2, no. 9 2017) 399. [https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(17\)30154-8/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(17)30154-8/fulltext)

²⁹ FAO 2014. Understanding the true cost of malnutrition. <http://www.fao.org/zhc/detail-events/en/c/238389/>.

country in sort of a backwater. He studied the two possible effects of development of an area on the whole region, the spread effect and the backwash effect. The backwash effect includes the rapid growth of certain areas and the stagnation in the development of other areas. This leads to net movement of population and capital to the progressive regions and the stagnated regions are continuously ignored. Also, it has been noted that in rapidly developing countries, the backwash effect is usually dominating. Thus, the equilibrium is never attained, and the cumulative effect is usually a downward spiral. A study shows that one percent shortening in adult height due to childhood stunting is associated with a 1.4% loss in economic productivity.³⁰

IV. SEN'S CAPABILITY APPROACH OF DEVELOPMENT

Sen, a noble Laurette for welfare economics has evolved this approach to gauge the true development. As per him development should mean the freedom to do or to not do anything. All are aware with the Maslow's hierarchy of needs, the basic needs of humans need to be fulfilled. All humans have a fairly similar motivation to fulfil these, in many the motivation may be passive, but it does exist. Capabilities approach adds freedom to the motivation to attain the needs. Capabilities approach is a moral framework which combines what a person has the freedom to achieve and the freedom that they have in choosing what they value.

This approach treated people as ends in themselves rather than means to achieve growth. The human development includes various factors other than economics. The standard of living of the people, the extent of literacy, the life span, etc. This approach really sets into perspective the real picture of the extent of development. Its inclusive nature brings forth the true disparities that exist. If one puts this approach in the evaluation of nutrition in India, the ghastly picture of malnourishment and undernutrition is revealed. India scored 131 in the Human Development Index. (HDI)

Freedom means the real opportunity that one has to accomplish what they value. In the case of India, instead of trying to accomplish goals or aspirations, which form the part of the belonging and esteem needs from Maslow's triangle; people are still fighting to get the resources to meet their basic and safety needs. 85% of the development of the brain's capacity takes place by the time a child turns 2 and data suggests that undernutrition sets in the first two years of age.³¹

The expectancy of life at birth may have increased over the years, but leaps and bounds are yet

³⁰ Shekar, Meera, Richard Heaver, and Yi-Kyoung Lee. *Repositioning nutrition as central to development: A strategy for large scale action* (World Bank Publications, 2006). <https://www.unhcr.org/45f6c4432.pdf>

³¹ Victora, Cesar G., Linda Adair, Caroline Fall, Pedro C. Hallal, Reynaldo Martorell, Linda Richter, Harshpal Singh Sachdev, and Maternal and Child Undernutrition Study Group. "Maternal and child undernutrition: consequences for adult health and human capital." *The lancet* 371, no. 9609 (2008): 340-357.

to be made when it comes to infant mortality. A research by Lancet in 2013 revealed that by scaling up nutritional interventions and developing proper distribution chains global stunting can be reduced by 20% and child mortality can be reduced by 15%.³²

As mentioned above, malnutrition not only adds to the disease burden but also inhibits the people affected from attaining their potential, it hinders their capability to achieve things that are of value to them. In other words, it takes away their freedom to choose and act. Human development requires resources in the form of different types of capitals. The financial capital, natural capital, social capital, physical capital and human capital. The human capital includes education, knowledge, skills and health. Due to massive lag in the basic health infrastructure, which includes no access to nutrition the human capital is not capable enough to reap the benefits of the other resources. Thus, it hinders the human development as people's capabilities are not realized.

V. CONCLUSION

“Proactive measures are needed to address the longstanding issues of malnutrition and food insecurity. The imperative is to devise structured, time-bound, and location-specific strategies with due consideration to the effects of socio-economic factors, and the impact of the pandemic. It is also crucial to create a comprehensive approach that will address the different sectors and dimensions of nutrition. There are two complementary approaches to reducing undernutrition: direct nutritional interventions and indirect multi-sectoral approaches. Direct interventions, such as breastfeeding, complementary feeding and handwashing practices, complement the long-term sustainable multi-sectoral approach. Active surveillance, enhancement of resources for nutrition programming, and micro-level participatory planning as well as monitoring, are necessary to achieve progress towards a malnutrition-free India. Strengthening convergence can also aid in better achieving nutrition and health outcomes”

“Regular trainings for Anganwadi workers will go a long way in improving the efficacy of the POSHAN Abhiyaan programme, along with better supervision, rational and equitable distribution of work, and improved logistics. While some sections have seen outstanding improvement, others have been lacking. The programme requires an objective assessment to strengthen the weaker links. Availability of basic amenities such as electricity, growth monitors, supplies are imperative for proper functioning of the AWCs and the effective provision of

³² Bhutta, Zulfiqar A., Jai K. Das, Arjumand Rizvi, Michelle F. Gaffey, Neff Walker, Susan Horton, Patrick Webb et al. “Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost?.” *The lancet* 382, no. 9890 (2013): 452-477

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