

1. Hunger and malnourishment are two different things. Discuss this in the context of Global Hunger Index 2022. Also suggest measures to deal with malnourishment in India. (250 W).

Global Hunger Index, 2022 ranked India at 107, faced criticism over methodological issues. ~~It~~ The results are based on global, national & regional level, while sub-national levels are missing. National family health survey fares well, with sub-national data.

Hunger vs) Malnourishment.

Hunger and malnourishment are usually confused as similar but there are difference. Hunger is the manifestation of empty bowl, associated with food scarcity. while malnourishment is lack of adequate vital micronutrients in diet. GHI is using child mortality, nutrition as indicators but its preamble focus on access to nutritious foods. So it is mostly concerned with food production, while FAO places India as the largest producer & consumer of food grains. GHI listing of India as food scarce nation is caught with irregularities.

Shift: Focus to Malnourishment

Though India has rejected GHI metric, the ~~a~~ factor of malnourishment cannot be ignored. The NFHS-5

data on Malnutrition Indicators has to be taken into account. For eg: Less Nourished women will give birth to low birth child, with less immunity against infection.

Causes and Solution

1. Link between nutrition and post-natal effects.

That is, Less nutrient child will be prone to acute respiratory and Diarrhoeal diseases.

Focus must be on sanitation

2. Identification of Body Mass Index - like overweight and under weight children.

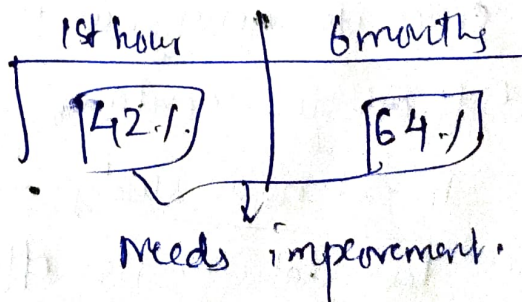
3. change in approach - Making nutritional approach simpler. Linking Actual diet with food intake

Challenge & Solution

1. Making simpler approach - adapted by Individual homes

eg: Breast feeding - in 1st hour and for 6 months is essential.

NFHS-5 data - Breast feeding



2. Feeding habits
 → Extending Beyond 6 months breastfeeding
 → semi solid food after 6 months
 → Dietary diversity in nutrition.

NFHS-5 data - there is ^{only} marginal increase in nutritional habits in Maharashtra, UP etc. Reason is lack of awareness
 eg: NGO study shows adding ghee to dal will provide adequate protein - But women are not aware.

3. poor nutrition

NFHS-5 → a. Stunting 36%, wasting 19%, underweight 32%

b. Anaemia - increased 8% to 67%.

Reason is priority in nutrition - High spending on pathological foods eg: in slum areas, than on proteinaceous food (eggs)
 (smtulu)

4. Enlargement of beneficiaries - To include newborn, toddlers etc. in to Nutritional Schemes
way forward

India has shown progress in maternal mortality, child mortality etc. There is a need to examine NFHS data to improve poshan habits, ~~so~~ like awareness to mothers on feeding & Diet diversity, nutrition and help to vulnerable sections, ~~is the need~~