Nutrition in India

Key Findings from the 2005-06 National Family Health Survey (NFHS-3)

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Nutrition in India
National Family Health Survey
(NFHS-3)
2005-06
“India’s record in countering hunger and famine is strangely mixed. The rapid elimination of famine since independence is an achievement of great importance... And yet India’s overall record in eliminating hunger and undernutrition is quite terrible. Not only is there persistent recurrence of severe hunger in particular regions, but there is also a dreadful prevalence of endemic hunger across much of India. Indeed, India does worse in this respect than even sub-Saharan Africa.”
Undernutrition in Children under Age 5

Bar chart showing:
- Stunted: 48
- Underweight: 43
- Wasted: 20
Are Indian Children Naturally Small?

No - Indian children grow at the same rate as children elsewhere when they are allowed to reach their full genetic potential.

Seminal study from the Nutrition Foundation of India (1992)

Differentials in Underweight Prevalence

- Almost no difference between girls and boys (same finding as in NFHS-1 and NFHS-2)
- Inadequate nutrition higher in rural areas, SC/ST children, children with short birth intervals, and higher-order births
- Underweight decreases sharply with mother’s education and household wealth
Underweight Prevalence by Wealth

Percent of children under 5 years underweight

- Lowest: 57%
- Second: 49%
- Middle: 41%
- Fourth: 34%
- Highest: 20%
Trends in Child Nutrition

Percent of children under age 3

- Stunted: 51 (NFHS-2), 45 (NFHS-3)
- Underweight: 43 (NFHS-2), 40 (NFHS-3)
- Wasted: 20 (NFHS-2), 23 (NFHS-3)
Anaemia Widespread in India

- Anaemia is characterized by a low level of haemoglobin in the blood.
- Anaemia in children often leads to impaired cognitive and motor development.
- Anaemia is usually caused by nutritional deficiencies (iron, vitamin A, vitamin B₁₂, folate, etc.) or infections such as malaria or hookworm.
## Anaemia in Children Is Widespread in India

<table>
<thead>
<tr>
<th>Anaemia Prevalence</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaemia prevalence more than 70 percent</td>
<td>Bihar, Madhya Pradesh, Uttar Pradesh, Haryana, Chhattisgarh, Andhra Pradesh, Karnataka, Jharkhand</td>
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<tr>
<td>Anaemia prevalence less than 50 percent</td>
<td>Goa, Manipur, Kerala, Mizoram</td>
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</tbody>
</table>

India’s anaemia prevalence for children is almost twice as high as the WHO estimate of anaemia in children in all developing countries.
Anaemia High in All Groups

- Percent of children with any anaemia
  - Urban (63%)
  - Wealthiest households (56%)
  - Children whose mother’s have 12+ years of education (55%)
  - Girls (69%), boys (70%)
Anaemia among Children 6-35 Months

- Any anaemia: NFHS-2 (74), NFHS-3 (79)
- Severe anaemia: NFHS-2 (4), NFHS-3 (5)
The poor nutrition conditions of young children in India have received much attention recently, but adults are also experiencing a variety of nutritional problems.
In the highest wealth quintile, 31% of women are overweight, including 8% who are obese.
Even in the slums of Chennai and Hyderabad, one-third of women are overweight/obese.
Dual Burden of Malnutrition

Percent of women age 15-49

- Overweight
- Underweight

Total: 36
Urban: 25
Rural: 41
No education: 42
<8 years: 35
8-11 years: 33
12+ years: 22
Anaemia in Women and Men

- Women: 55% Any anaemia, 17% Moderate to severe anaemia
- Pregnant women: 59% Any anaemia, 33% Moderate to severe anaemia
- Men: 24% Any anaemia, 11% Moderate to severe anaemia
Anemia among Women
Conclusions for Adults

- The adult population suffers from a dual burden of undernutrition and overweight/obesity.
- Almost half of women in most population subgroups are either too thin or too fat.
- Women’s nutrition has not improved in the last seven years, and overweight/obesity is a growing problem.
Conclusions for Adults

- Men are much less likely than women to be anaemic (as expected), but their nutritional status is still not satisfactory.

- Although the percentage of women and men who are overweight or obese is still much lower than it is in more developed countries, the potential threat of growing problems of overweight cannot be ignored.
Conclusions for Children

- Children in India suffer from some of the highest levels of stunting, wasting and underweight in the world and the situation has not improved markedly in recent years.

- Anaemia levels among children have actually increased since the time of NFHS-2.

- Most recommended infant and young child feeding practices are widely ignored by parents.

- Over the last 30 years, the ICDS programme has not been able to reduce malnutrition to acceptable levels in any state.
The good news is that there is no longer any doubt that nutritional problems in India need to be urgently addressed. Many health officials now seem energized to take on the challenge and to develop innovative programmes to get results, but their chances of success remain to be seen.

We hope that NFHS-4 and other data collection efforts in the coming years will be able to document the fruits of their efforts.
THANK YOU