



Women and Nutrition

This editorial is based on [“Diversifying Plates for Girls”](#) which was published in The Hindu on 26/05/2022. It talks about how the women-centric issues are developing in the society as well as the current situation of the same along with the measures that can be taken to improve the situation.

For Prelims: National Family Health Survey (NFHS) 5, Anaemia, Malnutrition, Women Empowerment

For Mains: Women Issues highlighted in NFHS 5, Issues Related to Women, Related Measures

As per multiple studies, adolescence is a nutritionally demanding phase of life. Even though both adolescent boys and girls face emotional changes during this period, girls face more physiological demands as compared to the boys and thus require a higher intake of [macro and micronutrients](#).

However, in society, women are traditionally discriminated against and excluded from political and family-related decisions. Despite their daily contribution to support their families, their opinions are rarely acknowledged, and their rights are limited.

Society does indeed recognize many women's rights, including the rights to political involvement, family allowance, and setting up a business. Nevertheless, in rural areas, poverty and a lack of information represent real barriers to women's independence and empowerment.

What are the Various Issues Related to Women?

▪ Female Infanticide and Foeticide:

- India has one of the **highest rates of female foeticide** in the world.
- [Female foeticide](#) is due to strong son preference, the practice of dowry, and the patrilineal necessity of heir.
- The census of 2011 has recorded the **lowest ever sex ratio** of 914 in the age group 0-6 years with 3 million missing girls; from 78.8 million in 2001 to 75.8 million in 2011.

▪ Child Marriage:

- Each year, at least 1.5 million girls under 18 get married in India, which makes it home to the largest number of child brides in the world - **accounting for a third of the global total**. Nearly 16% of adolescent girls aged 15-19 are currently married.
- While [child marriage](#) has declined, it has been marginal: from 27% in 2015-16 to 23% in 2019-20, according to [National Family Health Survey \(NFHS\) 5](#).

▪ Education:

- Girls are encouraged and **engaged more in household work** and drop out of school at an early age.
 - A study by the International Centre for Research on Women has found that girls out of school are 3.4 times **more likely to be married** or have their marriage already fixed than girls who are still in school.

- **Health and Mortality:**
 - Girls in India **face discrimination** both inside their homes and outside in their communities. Inequality in India means unequal opportunities for girls.
 - Under-five **mortality** for girls in India remains 8.3% higher than for boys. Globally this is 14% higher for boys.
- **Malnutrition:**
 - Both boys and girls are almost equally likely to be undernourished. For the girls, the nutritional intake is relatively inferior **both in terms of quality and quantity**. The health of the girls also suffers due to the additional burden from early and multiple pregnancies.
 - Due to a **patriarchal society**, boys are given relatively more nutritious food as they are deemed breadwinners of the family, especially if the family is poor and is not in a position to provide nutritious food to all the children.
 - The poor nutritional status of women during the reproductive period is responsible for the under-nutrition of children.
- **Domestic Violence:** **Violence against women** continues to be **an obstacle** to achieving equality, development, and peace as well as to the fulfillment of women and girls' human rights.
- **Household Inequality:** Household relations show **gender bias** in infinitesimally small but significant manners across the globe, more so, in India e.g., sharing the burden of housework, childcare and menial works by **so-called division of work**.

What is the Current Situation of Women's Health?

- **Growth in Risk of Anaemia:** The National Family Health Survey (NFHS)-5 data (2019-20) show an **increase in anaemia** among adolescent girls by 5% when compared to NFHS-4.
- **Pre-Pandemic Outcomes:** The **Comprehensive National Nutrition Survey** 2019 shows that even before the pandemic, consumption of diverse food groups among adolescents was low.
- **Post-Pandemic Outcomes:** The fallout of **Covid-19** has further worsened dietary diversity, especially among women, adolescents and children.
- According to a study by the Tata-Cornell Institute for Agriculture and Nutrition, **women's dietary diversity in India declined by 42% during Covid-19** lockdowns as they consumed fewer fruits, vegetables, and eggs.
- **Reduction in Supply of Nutrition Services:** The lockdowns also led to the loss of mid-day meals and interruptions in **Weekly Iron Folic Acid Supplementation** (WIFS) and nutrition education in schools for adolescent girls.
 - This was compounded by challenges in providing nutrition services to out-of-school adolescent girls which further increased their vulnerability to poor nutrition outcomes.
- **Need for Dietary Diversity:** Adolescence is the window of opportunity where practices of dietary diversity can be built to correct nutritional deficiencies and replenish the body with much-needed nutrients, especially for girls.
- **Micronutrient Deficiencies:** Currently, 80% of adolescents suffer '**hidden hunger**' due to micronutrient deficiencies. The trend is more prevalent in girls as they already suffer multiple nutritional deprivations.
 - It is **required to strengthen the initiatives** to address deficiencies of not just iron and folic acid, but also vitamin B12, vitamin D, and zinc.

What are the Women-Centric Findings of NFHS-5?

- **Underage Marriages:**
 - The national average of underage marriages has come down.
 - According to NFHS-5, 23.3% of women surveyed got married **before attaining the legal age of 18 years**, down from 26.8% reported in NFHS-4.
 - The figure for underage marriage among men is 17.7% (NFHS-5) and 20.3% (NFHS-4).
 - **Highest Surge:**
 - The rate has increased in **Punjab, West Bengal**, Manipur, Tripura and Assam.
 - **Tripura has seen the largest jump** in marriages for women from 33.1% (NFHS-4) to 40.1%, and from 16.2% to 20.4% among men.
 - **Highest Rate of Underage Marriages:**
 - West Bengal, along with Bihar, remains **one of the states with the highest rate of underage marriages**.

- **Lowest Rate of Underage Marriages:**
 - J&K, Lakshadweep, Ladakh, Himachal Pradesh, Goa, Nagaland, Kerala, Puducherry and Tamil Nadu.
- **Teenage Pregnancies:** Teenage pregnancies are **down from 7.9% to 6.8%**.
- **Domestic Violence Against Women:**
 - **Overall:** Domestic violence has **come down marginally** from 31.2% in 2015-16 to 29.3% in 2019-21.
 - Highest and Lowest (States):
 - Domestic violence against women is **highest in Karnataka** at 48%, followed by Bihar, Telangana, Manipur and Tamil Nadu.
- **Women's Empowerment:** [Women's empowerment](#) indicators portray considerable improvement at all India level and across all the phase-II States/UTs.
 - **Significant progress has been recorded** between NFHS-4 and NFHS-5 in regard to women operating bank accounts from 53% to 79% at all-India level.
 - More than 70% of women in every state and UTs in the second phase have operational bank accounts.
- **Anaemia:** The incidence of anaemia in women (53.1 to 57%) and men (22.7 to 25%) has worsened in all States of India (20%-40% incidence is considered moderate).
 - Barring Kerala (at 39.4%), **all States are in the “severe” category.**

What can be the Way Forward?

- **Integrated Efforts for Better Health Services:** The NFHS findings are a reminder of the urgent need to **close gaps in girls' education** and address the poor health status of women.
 - Current times require integrated and coordinated efforts from all health institutions, academia and other partners directly or indirectly associated with the health care services to make these **services accessible, affordable and acceptable**, especially for those who can't easily afford them.
- **Promoting Technology-Based Services among Women:** In the next few years, the combination of mobile technology, banking, education and women's economic empowerment will be significant drivers to address informal discriminatory norms.
 - Although the **percentage of women using mobile, internet and banking facilities has increased**, this is still not at par with those of men.
 - There should be sufficient stress on promoting and teaching the use of such facilities to women as availability and utilization of such resources is also **an indicator of empowerment** among women.
- **Need to Resolve the Issues Together:** Crime against women **cannot be resolved in the court of law alone**. A comprehensive approach & changing the entire ecosystem is what is required.
 - All the stakeholders need to get their act together, including Law makers, police officers, forensic dept, prosecutors, judiciary, medical & health dept, NGOs, and rehabilitation centers.
- **Addressing Discriminatory Social Norms:** To empower women and ensure gender justice, it is **imperative to address harmful practices**, such as child marriage and gender-biased sex selection.
 - There is a need to enhance the value of women and girls by working on transforming unequal power relations, structural inequalities and discriminatory norms, attitudes and behaviours.
 - Also, it is **important to engage with men and boys**, particularly in their formative years, to promote positive masculinity and gender-equal values.
- **Need Inclusion of Diverse Diet Sources & Nutrition Counselling:** Along with continued service delivery of WIFS, the **government's health and nutrition policies need to emphasise** on strong compliance to diverse diets and physical activities. This includes locally sourced fruits and vegetables, seasonal diets, and the inclusion of millets.
 - This further needs to be supplemented by strengthened nutrition counselling for adolescent girls through community workers' home visits, by building a strong ecosystem in schools to promote healthy habits and diets, virtual counselling, and comprehensive nutrition counselling through community-based events and Village Health, Sanitation and Nutrition Days.

- **Improvisation of Policy Interventions:** An integrated approach is needed along with women-centric policymaking where women are not treated as passive beneficiaries but are seen as potential contributors to society.
 - Reformative steps such as the recent [amendment of increasing the legal age of marriage for women from 18 years to 21 years](#). An integrated approach is needed along with women-centric policymaking where women are not treated as passive beneficiaries but are seen as potential contributors to society.

Conclusion

Along with all the policies and interventions, it is equally crucial to ensure that girls remain in school or formal education, their safety is ensured, and their health and nutrition are prioritized. Only then can such measures provide opportunities for girls to improve their nutritional and health outcomes.

Drishti Mains Question

“In society, women are traditionally discriminated against and excluded from political and family-related decisions along with all the concerns inadequate nutrition is also a major one.” Elaborate.