



Global Nutrition Targets

For Prelims: [Malnutrition](#), [Anaemia](#), [Global Nutrition Targets](#), [Obesity](#), [Midday Meal Scheme](#), [hypertension](#), [Mission Poshan 2.0](#), [Integrated Child Development Services \(ICDS\) Scheme](#)

For Mains: Global Nutrition Targets and India's progress, Double burden of malnutrition, Policy interventions for nutrition in India.

[Source: TH](#)

Why in News?

A recent **Lancet** study evaluating **global progress on [Global Nutrition Targets \(GNTs\)](#) from 2012 to 2021** showed **slow progress** in tackling maternal and [child malnutrition](#), undernutrition, and [overweight](#).

- The findings raise concerns about policy design and the need for innovative strategies to address these ongoing issues.

What are Global Nutrition Targets (GNTs)?

- **World Health Assembly Resolution, 2012:** Endorsed a Comprehensive Implementation Plan on **maternal, infant, and young child nutrition**, setting six global nutrition targets for 2025.
- **Global Nutrition Targets:**
 - Achieve a **40% reduction in the number of children under-5** who are stunted.
 - Achieve a **50% reduction in [anaemia](#)** in women of reproductive age.
 - Achieve a **30% reduction in low birth weight**.
 - Ensure that there is **no increase in childhood overweight**.
 - Increase the **rate of exclusive breastfeeding in the first 6 months to at least 50%**.
 - Reduce and **maintain [childhood wasting](#) to less than 5%**.

Key Terms

- **Malnutrition:** It is an **imbalance between the nutrients the body needs** and the **nutrients it receives**.
 - It encompasses both **undernutrition** (including **stunting** (low height for age), **wasting** (low weight for height), and **underweight** (low weight for age)) and **overnutrition** (overweight and [obesity](#)), posing a **dual burden on public health**.
- **Anaemia:** Anaemia is a condition of low red blood cells or [haemoglobin](#), reducing oxygen supply to tissues, mainly affecting women and children.

What are the Key Findings of the Study?

- **Slow and Insufficient Progress:** Across 204 countries, there has been slow and insufficient progress in meeting the **GNTs from 2012 to 2021**, with projections up to 2050 showing limited success.
 - Few countries are expected to meet the targets for **stunting** in children under 5.
 - None of the countries are projected to meet the targets for **low birth weight, anaemia, and childhood overweight** by 2030.
- **Anaemia and India:** Anaemia in India has **remained static for two decades**.
 - **Iron deficiency** is assumed to be the cause **but accounts for only one-third of anaemia cases**, unknown causes contribute to the other significant third.
 - Anaemia prevalence increased during the **Covid-19 lockdown** when school meals (**Midday Meal Scheme**) stopped, highlighting the need for a broader nutrition approach.
 - The study found discrepancies in **anaemia measurements**, in India, **venous blood-based** (blood is drawn from a vein) **anaemia prevalence** (as recommended by **WHO**) was half that of **capillary blood-based** (blood is taken from a fingertip) **prevalence** in national surveys.
- **Stunting:** Stunting often develops within the **first two years of life**, increasing from 7-8% at birth to 40% by age two in India.
 - Overfeeding children after age **2 years may lead to being overweight rather than correcting stunting**.
 - Poor children in India consume only **7 grams of fat per day**, against the required 30-40 grams.
- **Childhood Overweight:** Overweight among children is increasing globally, including in India, contributing to "**metabolic overnutrition**," which could lead to **chronic health problems** such as non-communicable diseases.
 - A significant portion of **Indian children (50%)** face **metabolic overnutrition**, which contributes to non-communicable diseases.
- **Recommendations: Diversify diets to address anaemia**, as it's not solely caused by iron deficiency.
 - Focus on **prevention of stunting in the first two years of life**.
 - Improve **energy intake, particularly fat intake**, for children under 3.
 - Adopt **more accurate and context-specific methods** for measuring anaemia and stunting.
 - Address both **undernutrition and overnutrition in policy** to prevent **non-communicable diseases**.

What are the Challenges for Achieving GNTs?

- **Global:**
 - **Persistent Anemia:** The global prevalence of anemia among women of reproductive age **has remained largely unchanged**.
 - Anaemia burdens **low-income countries, especially rural, poor, and uneducated populations**, due to **insufficient awareness and targeted policies**.
 - **Slow Progress on Stunting:** Despite efforts, the number of stunted children is projected to reach **127 million by 2025**, missing the target of 100 million, due to a **lack of early policies targeting the initial days of a child's life**.
 - **Rising Overweight and Obesity:** The rising prevalence of overweight and obesity, affecting **37 million children under 5 and over 390 million children and adolescents aged 5-19 in 2022**, is driven by factors such as urbanization, changing dietary patterns, and reduced physical activity.
 - **Childhood Wasting:** Childhood wasting affects an estimated 45 million children under 5 globally.
 - Childhood wasting prevention faces challenges like **food insecurity, limited healthcare, and poor sanitation**, especially in South Asia.
- **India:**
 - **Limited Dietary Diversity:** Diets in India are often dominated by **rice, wheat, and cereals**, with insufficient intake of **fruits, vegetables, dairy, and proteins**, leading to poor nutrition.

- The lack of dietary diversity, especially among **lower-income households**, limits access to essential micronutrients.
- The [National Family Health Survey \(NFHS\)-5](#) found that only **11.3% of children aged 6 months to 2 years** receive a 'minimum acceptable diet' as per WHO standards, highlighting significant gaps in both food quality and feeding frequency.
- **Economic Barriers:** A significant portion of the population **struggles to afford a nutritious diet** due to low incomes and **high food prices**, contributing to **malnutrition**.
- **Inadequate Data:** The absence of **comprehensive national surveys** on dietary diversity hampers targeted nutrition interventions.
 - While the **NFHS** provides some insights, it lacks detailed data on the quantities of food consumed, limiting its utility in addressing nutrition gaps.
- **Non-Communicable Diseases (NCDs):** The rising diet-related **NCDs like obesity, diabetes, and hypertension** is increasing the burden on public health systems, requiring more focus on addressing both **under- and over-nutrition**.
- **Food Systems Constraints:** **Climate change and extreme weather events** further threaten food security, impacting crop yields and the availability of diverse foods.

India's Initiatives Related to Nutrition

- [Mission Poshan 2.0](#)
- [Integrated Child Development Services \(ICDS\) Scheme](#)
- [Pradhan Mantri Matru Vandana Yojana \(PMMVY\)](#)
- [Mid-Day Meal Scheme](#)
- [Scheme for Adolescent Girls \(SAG\)](#)
- [Mother's Absolute Affection \(MAA\)](#)
- [Poshan Vatikas](#)

Way Forward

- **Policy Realignment:** Incorporate flexible and region-specific dietary solutions in national programs like [POSHAN Abhiyaan](#) and promote initiatives like [National Millets Mission \(NMM\)](#).
 - Address systemic gaps in the [Public Distribution System \(PDS\)](#) to include nutrition-dense food items.
- **Set National-Level Targets:** Establish baselines and annual reduction goals specific to country contexts.
- **Strengthen Resource Allocation:** Mobilize **financial and human resources to implement nutrition-specific** and nutrition-sensitive programs.
- **Integrate Nutrition Across Sectors:** Incorporate nutrition outcomes into health, food systems, and [water, sanitation, and hygiene \(WASH\)](#) policies.
 - Strengthen **primary healthcare for effective maternal and child nutrition** services.
- **Develop Monitoring Mechanisms:** Enhance surveillance systems to track progress on selected nutrition indicators.

Drishti Mains Question:

Discuss the Global Nutrition Targets endorsed by the World Health Assembly and the challenges in achieving them.

Prelims

Q. Which of the following is/are the indicator/indicators used by IFPRI to compute the Global Hunger Index Report? (2016)

1. Undernourishment
2. Child stunting
3. Child mortality

Select the correct answer using the code given below:

- (a) 1 only
- (b) 2 and 3 only
- (c) 1, 2 and 3
- (d) 1 and 3 only

Ans: (c)

Q. How do District Rural Development Agencies(DRDAs) help in the reduction of rural poverty in India? (2012)

1. DRDAs act as Panchayati Raj Institutions in certain specified backward regions of the country.
2. DRDAs undertake area-specific scientific study of the causes of poverty and malnutrition and prepare detailed remedial measures.
3. DRDAs secure inter-sectoral and interdepartmental coordination and cooperation for effective implementation of anti-poverty programmes.
4. DRDAs watch over and ensure effective utilization of the funds intended for anti-poverty programmes.

Which of the statements given above is/are correct?

- (a) 1, 2 and 3 only
- (b) 3 and 4 only
- (c) 4 only
- (d) 1, 2, 3 and 4

Ans: (b)

Mains:

Q. Can the vicious cycle of gender inequality, poverty and malnutrition be broken through microfinancing of women SHGs? Explain with examples. (2021)

Q. Despite Consistent experience of high growth, India still goes with the lowest indicators of human development. Examine the issues that make balanced and inclusive development elusive. (2019)

