



Hunger and Malnutrition in India

KEYWORDS

Malnutrition, Children, Global Hunger Index, Food security Paper

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ABSTRACT *Hunger is usually understood to refer to the distress associated with lack of food. Despite progress, the problems of chronic hunger and malnutrition persist on a mass scale. India has failed to ensure adequate access to food for its people. The 2014 Global Hunger Index (GHI) Report ranked India 55th out of 76 with a serious hunger situation. Amongst South Asian nations, it ranks third behind only Afghanistan and Pakistan. It trails behind Sri Lanka and Nepal. While no longer in the "alarming" category, India's hunger status is still classified as "serious," according to the GHI. Children and women suffer the most. In September 2013 the Indian Government passed the National Food Security Act, 2013 more popularly known as the Right to Food bill. Food security is a big-ger issue beyond just providing a basic human need and right. The Public Distribution System needs to be strengthened. The government should come up with more holistic schemes. It should be ensured that nutritional objectives should be an integral part of all the poverty alleviation programmes.*

Hunger is usually understood to refer to the distress associated with lack of food. The Food and Agriculture Organization of the United Nations (FAO) defines food deprivation, or undernourishment, as the consumption of fewer than about 1,800 kilocalories a day—the minimum that most people require to live a healthy and productive life. Hunger can also be equated with chronic food insecurity. Malnutrition refers more broadly to both under nutrition (problems of deficiencies) and over nutrition (problems of unbalanced diets). This often happens as a result of the inability to access food because of lack of purchasing power. According to Kirit S. Parikh, "Food should be provided to all as a matter of right without inflicting any humiliation on the poor." "The hungry in the world are hungry because they are poor. They are poor because they own too little resources of land, capital, or skills. Hunger is primarily a problem of poverty and not of food production."

Hunger and development have cyclical impacts on one another. Mukherjee said "Because the poor are undernourished they fail to convert their full potential labor power to actual labor power. Because the conversion of potential labor power into actual labor power is inadequate for the poor, their capacity to obtain food to improve their nutritional status is also low." Therefore, malnutrition not only prevents people from surviving and thriving as productive members of society, it also holds countries back in a cycle of poor nutrition, poor health, lost productivity, persistent poverty, and reduced economic growth. This demonstrates why not only the right to food, but also access to the right type of food at the right time, is important for both individual well-being and countries as a whole.

A wide range of authors and scholars cover the topic of food security, looking at it in varying contexts, both international and state-specific. Dreze and Sen argue that post-Independence India has dealt effectively with periods of food shortages, droughts and other food crises in a way so as to prevent a famine situation. However, the country has failed in tackling the problem of chronic hunger. Amartya Sen theorizes that food security is equal to a lack of entitlements, which are "a set of different alternative commodity bundles that the person can acquire through the use of the various legal channels of acquirement open to

someone in his position," – food being a possible commodity bundle. Sen's theory introduces a person's capabilities, or capacity to obtain food, rather than solely the government's provision of food, to the discussion. There is a large body of literature that shows a strong correlation between diet quality and socioeconomic status. The FAO acknowledges the cyclical pattern of food security and poverty – poverty is a cause of hunger, but lack of proper nutrition is a cause of poverty.

A number of indicators are used to measure hunger. The Global Hunger Index (GHI) is a tool designed to comprehensively measure and track hunger globally. A country's GHI score is calculated by averaging the percentage of the population that is undernourished, the percentage of children younger than five years of age who are underweight, and the percentage of children who die before the age of five. The severity of hunger—from "low" to "extremely alarming"—is associated with the range of possible GHI scores. The 2014 GHI has been calculated for 120 countries. Hunger and starvation also have regional and geographical dimensions. South Asia and Africa south of the Sahara have the highest 2014 GHI scores, at 18.1 and 18.2 respectively as shown in Table 1.

Table 1

Regions	2014
Developing Countries	12.5
Africa south of Sahara	18.2
South Asia	18.1
East and South East Asia	7.6
New East and North Africa	4.9
Latin America And the Carribean	4.4
Eastern europe and common wealth of Independent states	2.6

Source : Global Hunger Index Report 2014

From 1947 onwards, achieving food security for all has been a national goal. Nehru articulated this goal by emphasizing, "everything can wait, but not agriculture." There has been an impressive economic progress with achievements in the domain of agriculture contributing significantly. The green revolution initiated in the late 1960s was a historic watershed that transformed the food security situ-

ation in India .India ranks second worldwide in farm output . The country succeeded in the laudable task of becoming a food self sufficient nation, at least at the macro level. India has made substantial progress in health determinants over the past decades .Indian government rolled out and expanded several programs that targeted a mix of direct and indirect causes of under nutrition. Nutrition-specific interventions that were scaled up after 2006 include (1) a final push to expand the Integrated Child Development Services program that aims to improve the health, nutrition, and development of children in India and establish 1.4 million centers; and (2) the launch of the National Rural Health Mission, a community-based outreach and facility-based health initiative to deliver essential health services to rural India .

Despite progress ,the problems of chronic hunger and malnutrition persist on a mass scale. India has failed to ensure adequate access to food for its people. The prevalence of malnutrition is much higher than in very poor countries of sub-Saharan Africa.The 2014 Global Hunger Index (GHI) Report ranked India 55th out of 76 with a serious hunger situation as shown in table :2 . Amongst South Asian nations, it ranks third behind only Afghanistan and Pakistan .It trails behind Sri Lanka (39)and Nepal (44). While no longer in the "alarming" category, India's hunger status is still classified as "serious,"according to the GHI.Children and women suffer the most .

Table :2

Year	South Asia	India	Bangladesh	China	Sri Lanka	Mauritius	Burundi
1990	30.6	31.2	36.6	13.6	22.2	8.3	32
1995	27.3	26.9	34.4	10.7	20.2	7.6	36.9
2000	25.0	25.5	24.0	8.5	17.6	6.7	38.7
2005	23.4	24.2	19.8	6.8	16.8	6.0	39
2014	18.1	17.8	19.1	5.4	15.1	5.0	35.6
Rank	-	55	57	05	39	01	76

Source : Global Hunger Index Report 2014

The problem of malnutrition is especially critical in case of women and children. The National Family Health Survey shows that, the proportion of under-weight children below 3 year is 40% in 2005-06 as shown in table :3 . As evident from the NFHS, under- nutrition is substantially higher in rural areas than in urban areas. In urban areas, one in every 3 children is stunted, that is short in height for age and in rural areas almost half of the children are stunted. The key indicator of child malnutrition is inadequate maternal health . The NFHS-3 estimates of health and nutrition among women and children speak to India's present and its future. As per to 2011 statistics:Life expectancy of women was 64.2 years.According to National Family Health Survey III: 55 per cent women were anaemic ,36 per cent of women had body mass index (BMI) which was less than normal .

Table :3

Trends in Nutritional status of children	U	R	I
Children Stunted (Height for age) %	37.4	47.2	44.9
Children Wasted (Weight for height) %	19.0	24.1	22.9
Children Underweight (Weight for age)%	30.1	43.7	40.4

Source : NFHS-3 2005-06

India's high growth has had little impact on food security and the nutrition levels of its population. Per capita availability as well as consumption of food grains has decreased; unemployment among agricultural labour households has

sharply increased ;Overpopulation is linked to competition for food where access to food is limited ; large proportion of informal workforce have further added to the problems ; Inadequate distribution of food through public distribution mechanisms (PDS) ; Higher food prices have contributed to a decrease in food demand ; A number of programmes (Midday Meal programme ,Integrated Child Development Scheme) with improving nutrition as their main component are not properly implemented.

Chronic hunger and undernutrition is the worst tribulation of the poverty that still plagues millions of households in India and the plight of children is of special concern. Mahatma Gandhi famously said "There are people in the world so hungry, that God cannot appear to them except in the form of bread" .India is a signatory to the Universal Declaration of Human Rights (1948) and the International Covenant on Economic, Social, and Cultural Rights (1966), which recognise a Right to adequate food. The Directive Principles of State Policy in the Constitution of India provide that it is the duty of the State to raise the level of nutrition and standard of living of its people, and improve public health .In September 2013 the Indian Government passed the National Food Security Act, 2013 more popularly known as the Right to Food bill . The Bill seeks "to provide for food and nutritional security in human life cycle approach, by ensuring access to adequate quantity of quality food at affordable prices to people to live a life with dignity and for matters connected therewith and incidental thereto".

The National Food Security Bill, 2011 proposes food grain entitlements for up to 75 percent of the rural and up to 50 percent of the urban population. Of these, at least 46 percent of the rural and 28 percent of the urban population will be designated as priority households. The rest will be designated as general households. The priority households will be entitled to 7 kg of subsidized food grains per person per month. General households will be entitled to at least 3 kg. The Bill proposes meal entitlements to specific groups. These include: pregnant women and lactating mothers, children between the ages of six months and 14 years, malnourished children, disaster affected persons, and destitute, homeless and starving persons. The PDS issue prices are given in Schedule I: Rs 3/2/1 for rice/wheat/ millets .

Food security is a bigger issue beyond just providing a basic human need and right. It is an integral part of human development. Food security has four basic components ; availability ,accessibility ,utilization and stabilization . It is essential to ensure availability of food grains to the common people at an affordable price. In the contest of persistently high food price inflation over the last few years ,it was argued that the supply constraint causing high food prices was rooted in the slow growth of agriculture .Therefore ,the challenge of meeting the food requirement of an ever increasing population can only be met by practicing sustainable agriculture ,protecting natural resources and using production technologies that conserve and enhance the natural resource base of crops . Mahatma Gandhi wrote in ' Young India in 1920 , "We want to organize our national power not by adopting the best methods of production only,but by the best method of both production and distribution ". The Public Distribution System needs to be strengthened . The government should come up with more holistic schemes . It should be ensured that nutritional objectives should be an integral part of all the pov-

erty alleviation programmes. Need based IEC and training materials should be developed for effective dissemination of nutrition messages. Local community education on key family health and nutrition practices using participatory and planned communication methodologies will be helpful. Revamping of existing direct nutrition programmes to enable management by women's Self Help Groups (SHGs) and /or local bodies along with orientation and training of community health workers, Panchayati Raj Institution (PRI) members, other opinion leaders, care givers and other stakeholders can be another area, if addressed, can give positive results.

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