National Plan of Action for Children (NPAC) 2016

Focus policy
Draft National Plan of Action for Children (NPAC)
• Key Priority Area 1: Survival, Health and Nutrition

Current policy scenario

All persons below the age of 18 years are considered as ‘children’, and this constitutes 39 per cent of India’s population as per the 2011 Census. Approximately, 60 per cent of them are engaged in agriculture as labourers or cultivators.

While no formal evaluation of the NPAC 2005 has been undertaken, many of the goals remain unfulfilled, like reducing infant mortality rate to 30 per 1000 live births and maternal mortality rate to 100 per 100,000 live births; 100 per cent coverage for rural sanitation, universalisation of early childhood care and education services, elementary education, complete abolition of child labour and child marriage by 2010.

Some of the key priority areas of the NPAC 2016 include ensuring registration of birth of all children and reducing early marriage among girls.

The NPAC 2016 will replace NPAC 2005 and take into account the key priority areas for children as listed in the National Policy for Children (2013), to ensure the implementation and monitoring of national constitutional and policy commitments and the UNCRC.
LANSA research evidence

A state level analysis of agriculture and child nutrition linkages in India exploring the associations between agricultural prosperity and rural child undernutrition after controlling for access to sanitation and safe drinking water concluded that agricultural prosperity as indicated by agricultural growth, worker and land productivity and per capita food grain production has a positive influence on reducing child undernutrition.

The prevalence of undernutrition, viz. underweight, stunting and wasting was found to increase as the age increased from 0 to 24 months to 24 to 60 months in the two locations of the ongoing Farming System for Nutrition (FSN) study in Wardha, Maharahstra and Koraput, Odisha. This could be primarily due to insufficient energy intake as this is the transition period when the child is shifted completely from breastfeeding to family food. Among school going children and adolescents, boys were found to be more undernourished.

Another ongoing LANSA study on pro-nutrition value chains suggests linking local farmers with the Supplementary Nutrition Programme (SNP) under ICDS. We found the provision of vegetable (rich source of micronutrients) is not consistent and depends a lot on price and availability in the markets.

Evidence from state and district level studies also highlights the importance of enabling environment of social protection measures like access to safe drinking water, sanitation and healthcare for improving nutrition outcomes.

Recommendations for Policy

For Key Priority Area 1: Survival Health and Nutrition

Addressing sub-objectives

The Right to adequate, safe and nutritious food should be a separate objective under Key Priority Area 1, to highlight its importance as the basis for a healthy child. Nutrition sensitive agriculture is the key to ensuring the availability of nutritious cereals, pulses, fruits and vegetables and animal foods. The Ministry of Agriculture and Farmers’ Welfare should be highlighted as a key nodal agency in the framework of action.

Addressing sub-objectives 1.1 and 1.2: Using household based approach

While targeting particular groups is important, there should be a household/family-based approach, as often behind a malnourished mother or child is also a malnourished family. While focus on the health of the girl child is important from an intergenerational perspective, focus on all children both boys and girls, is
NPAC highlights the high proportion of children engaged in agriculture. The Ministry of Agriculture does not however figure as a nodal agency.

Addressing Sub-objective 1.3:
Using interventions based on continuum of care, with emphasis on nutrition, safe drinking water, sanitation and health education

It is important that water provision is linked to sanitation/toilets to ensure their use. Ongoing research under the FSN study shows that when there is a single piped water source in a village, women who are more distant or do not have the time, are unable to access it easily and depend on less reliable sources. Issues of caste and gender also need to be taken into account in ensuring provision of safe drinking water.

In addition to the above, it is recommended that the midday meal is provided to all children up to the age of 18 years, attending government and government aided schools. The midday meal served in schools is an opportunity for children from vulnerable sections of the population to get access to a balanced nutrient rich diet.

Addressing sub-objectives 1.4 and 1.7:
Using communication strategies for behaviour change

The emphasis has to be on participatory approaches that take local knowledge and understanding into account. Top down communication and messages often don’t work. LANSAs research shows the need for more participatory approaches especially with adolescents, both boys and girls, to discuss their fears and aspirations.

Awareness on the nutritive content of different foods should be an important component in communication strategies targeted at different groups. A module on Agriculture for Nutrition should be introduced in all schools at the middle school and secondary school level.
Addressing sub-objective 1.6:
Using community and home-based approaches in the strategies to address micro-nutrient deficiencies

1. Household nutrition gardens of nutrient-rich vegetables and fruits should be promoted with special focus on the needs of vulnerable groups and the specific micro-nutrient deficiencies to be addressed. Different models of these are available to suit the area available for nutrition gardens. The Department of Horticulture and Panchayati Raj Institutions (PRIs) should be key nodal agencies mandated for the implementation of this measure.

2.1 School Nutrition Gardens of fruits and vegetables should be promoted in all government and government aided schools including residential schools to feed into the Midday Meal (MDM). There are several Civil Society Organisation (CSO) initiatives in this direction including MSSRF’s own experience in Wardha and Koraput under LANSA that provide evidence of the usefulness and impact of this measure.

Besides ensuring the availability of fresh vegetables on a daily basis for the midday meal, the nutrition gardens also serve as an important educational tool for orienting children on the nutritive value of fruits and vegetables and the importance of consuming them. In rural areas of Bangladesh, mothers’ groups cultivate and supply vegetables to the schools covered under the School Noon meal Programme.

2.2 Nutrition Gardens of fruits and vegetables should be promoted at ICDS Centres wherever hot-cooked meals are provided.

Wherever feasible, schools and ICDS Centres may be linked to local growers for daily supply of vegetables.

Using household level food diversification:

1. Identify and train Community Hunger Fighters (CHF) as champions at the village and municipality level to spread the message. Given the load on the ICDS/Anganwadi Worker on various fronts, training local youth (both male and female) will foster community ownership. MSSRF has successfully piloted this model in villages in Koraput, Odisha. As part of the nutrition awareness strategy under the FSN study, community members are being trained to be champions at the village level. CSOs and PRIs can be the implementing agencies.

2. Ensure access to local food resources from the local ecosystem including forests and water bodies.

3. The indigenous knowledge of the community on local foods should be taken into account in promoting dietary diversification.


Credits
LANSA MSSRF team based on research conducted in India (2013–2016).

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LANSA is an international research partnership, exploring how agriculture and agri-food systems can be better designed to advance nutrition in South Asia. Led by MS Swaminathan Foundation, members include BRAC, Collective for Social Science Research, Institute of Development Studies, International Food Policy Research Institute and Leverhulme Centre for Integrative Research for Action on Health. LANSA is funded by the UK Government. The views expressed in this document do not necessarily reflect the UK Government’s official policies.

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