

F. No. 5-9/2005/ND/Tech (Vol.II)
Government of India
Ministry of Women and Child Development

Shastri Bhavan, New Delhi
Dated 24th February, 2009

To,

1. The Secretaries of all States/UTs, Women and Child Development Department/ Social Welfare Department (dealing with ICDS Scheme)
2. The Directors (ICDS) of all States/UTs

**Subject: Revised Nutritional and Feeding Norms for Supplementary
Nutrition in ICDS Scheme**

Sir/Madam,

As you are aware, that despite the rapid progress made by the country with respect to agricultural production and economic development in the past few decades, undernutrition continues to be a major public health problem, especially among adolescent girls, women and young children. Over the years, the Integrated Child Development Services (ICDS) Scheme has been the biggest intervention of the Government of India implemented through State Governments/UTs to combat maternal and child undernutrition. Three decades of implementation of ICDS has contributed significantly to the overall development of children. However, its impact on physical growth and development has been rather slow.



2. The facts and figures reported by the NNMB Survey and NFHS-3 clearly indicate that the levels of calorie and micronutrient gap have changed from 1975, when the ICDS nutritional norms were first fixed. Therefore, there is an urgent need to adopt a comprehensive approach which includes promotion of optimal Infant and Young Child Feeding Practices (IYCF), dietary diversification, supplementation, micronutrient fortification of supplementary nutrition and public health measures such as promotion of personal hygiene, environmental sanitation, immunization, etc. Under the Scheme of ICDS, it must be ensured that the nutritional gap is effectively bridged and all children and women in the target group are brought under its coverage.

3. Recognizing this, it has been decided to continue the implementation of the Scheme of ICDS in the 11th Five Year Plan and expand its coverage. With this end in view, third phase of expansion of the Scheme has been approved by Government to universalize the Scheme with particular focus on SC/ST/Minority habitations. Based on the proposals received from States/UTs, the administrative sanctions have been issued in December 2008 with a condition that for location of AWCs:

(a) Villages pre-dominantly inhabited by population belonging to SC/ST and minority community should be given priority;

(b) Within a village also, location of an AWC as far as feasible, should be in the areas inhabited by population from SC/ST and minority community and

(c) The State Government to certify that all SC/ST and minority community habitations have been saturated.



4. The Government of India has also approved some new interventions under the Scheme of ICDS and has revised existing cost norms including the norms of Supplementary Nutrition Programme which have already been communicated to States/UTs. The revised cost norms of SNP are as under:

| Category | Pre-Revised norms | Revised Norms w.e.f. 16.10.08 (per beneficiary per day) |
|--|-------------------|---|
| (i) Children (6-72 months) | Rs.2.00 | Rs.4.00 |
| (ii) Severely underweight children (6-72 months) | Rs.2.70 | Rs.6.00 |
| (iii) Pregnant women and Nursing mothers | Rs. 2.30 | Rs.5.00 |
| WEIGHTED AVERAGE | Rs.2.06 | Rs.4.21 |

5. The existing calorific norms for SNP were fixed since the inception of the Scheme in 1975. These calorific norms were not adequately meeting the gap between the Recommended Dietary Allowance (RDA) and Average Dietary Intake (ADI), which meant that the desired impact in the incidence of malnutrition was not taking place. This issue has been under the consideration of the Government for some time. After due deliberations and taking into account the recommendations of experts, it has now been decided to revise the existing nutritional and feeding norms with immediate effect as given below:

(a) Promoting Optimal Infant and Young Child Feeding Practices:

Sustained improvement in maternal and child nutrition is possible through behaviour change and improved caring practices. In view of this and prevailing sub-optimal infant

N. S.

and young child feeding practices (IYCF), accelerated implementation and monitoring of the National Guidelines on Infant and Young Child Feeding issued by the MWCD, Government of India in 2006 should be ensured. (Copy of the guidelines is available on www.wcd.nic.in)

- (b) **Children in the age group of 0-6 months:** For children in this age group, States/UTs may ensure continuation of current guidelines of early initiation (within one hour of birth) and exclusive breast-feeding for children for the first 6 months of life.
- (c) **Children in the age group of 6 months to 3 years:** States/UTs may ensure compliance with the Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Amendment Act, 2003 that specifies continued breastfeeding for two years and beyond. It should also be ensured, that along with breastfeeding, complementary feeding to children from the age of 6 months must be started. In order to bridge the gap between RDA and ADI amongst children of this age group, food supplement of 500 calorie of energy and 12-15 gm of protein per child per day in Supplementary Nutrition Programme (SNP) should be provided. For children in this age group, the existing pattern of Take Home Ration (THR) under the ICDS Scheme shall continue. However, in addition to the current mixed practice of giving either dry or raw ration (wheat and rice) which is often consumed by the entire family and not the child alone, THR should be given in the form that is palatable to the child and is seen as food to be exclusively consumed by the child instead of the entire family. The THR could be given in the form of Micronutrient Fortified Food and/or Energy-dense Food that

Handwritten signature

may be marked as 'ICDS Food Supplement'. Since a child under 3 year is not capable of consuming a meal of 500 calories in one sitting, the State Governments/UTs may consider advising mothers to give THR in small frequent meals to the child.

For the severely underweight children, States/UTs may provide food supplement of 800 calories of energy and 20-25g of protein in the form of Micronutrient Fortified Food and/or Energy-dense Food as THR. Considering the inability of under-3 year old child (6 months to 3 years) to consume a meal of 800 calories in one sitting, the State Governments/UTs may consider advising mothers to give THR in small frequent meals to the child. Severely underweight children requiring medical intervention may be given locally appropriate feeding and care under medical advice.

- (d) **Children in the age group of 3 to 6 years:** States/UTs may provide food supplement of 500 calories of energy and 12-15g of protein per child per day at the Anganwadi Centres (AWCs) to supplement home feeding. Arrangements should be made for serving Hot Cooked Meal in AWCs and Mini-AWCs under the ICDS Scheme within the next two years. Since a child of this age group is not capable of consuming a meal of 500 calories in one sitting, the State Governments/UTs may consider serving more than one meal to the children who come to AWCs. Since the process of cooking and serving hot cooked meal takes time, and in most of the cases, the food is served around noon, State Governments/UTs may provide 500 calories over more than one meal. State Governments/UTs may arrange to provide a

Handwritten signature

morning snack in the form of milk/banana/egg/seasonal fruits/Micronutrient Fortified Food etc.

For severely underweight children in the age group of 3 to 6 years, additional 300 calories of energy and 8-10g of protein (in addition to 500 calories of energy and 12-15g of protein given at AWC) should be given in the form of Micronutrient Fortified Food and/or Energy-dense Food as THR. Severely underweight children requiring medical intervention may be given locally appropriate feeding and care under medical advice.

(e) **Pregnant Women and Lactating Mothers:** States/UTs may provide food supplement of 600 calories of energy and 18-20g of protein per beneficiary per day in the form of Micronutrient Fortified Food and/or Energy-dense Food as THR. However, in addition to the current mixed practice of giving either dry or raw ration (wheat and rice), which is often consumed by the entire family and not the mother alone, it should be given in the form of Micronutrient Fortified Food or food that may be consumed by the pregnant and lactating mothers rather than the whole family.

6. The details of revised feeding norms are summarized below:

| Category | Revised Rate (per beneficiary per day) | Calories (K Cal) | Protein (g) |
|---|--|------------------|-------------|
| Children (6-72 months) | Rs.4.00 | 500 | 12-15 |
| Severely underweight children (6-72 months) | Rs.6.00 | 800 | 20-25 |
| Pregnant women and Nursing mothers | Rs.5.00 | 600 | 18-20 |

Handwritten signature

7. Micronutrient Fortification: The Supplementary Food may be fortified with essential micronutrients (energy and protein excluded) with 50% of RDA level per beneficiary per day, as indicated in the table below:

| RECOMMENDED DIETARY ALLOWANCES, NUTRIENT INTAKES AND GAPS | | | | | | | | | | | | |
|---|---------------------|--------|-----|---------------------|--------|------|----------------|--------|-----|-----------------|--------|------|
| | Age Group 1-3 years | | | Age Group 4-6 years | | | Pregnant Women | | | Lactating Women | | |
| | RDA | Intake | Gap | RDA | Intake | Gap | RDA | Intake | Gap | RDA | Intake | Gap |
| Energy (Kcal) | 1240 | 687 | 553 | 1690 | 978 | 712 | 2175 | 1654 | 521 | 2425 | 1852 | 573 |
| Protein (g) | 22 | 18.6 | 3.4 | 30 | 26.5 | 3.5 | 65 | 45 | 20 | 75 | 46.7 | 28.3 |
| Iron (mg) | 12 | 4.3 | 7.7 | 18 | 6.8 | 11.2 | 38 | 12 | 26 | 30 | 11.8 | 18.2 |
| Vitamin A (µg.) | 400 | 56 | 344 | 400 | 66 | 334 | 600 | 111 | 489 | 950 | 107 | 843 |
| Calcium (mg) | 400 | 161 | 239 | 400 | 66 | 334 | 1000 | 352 | 648 | 1000 | 320 | 680 |
| Thiamin (mg) | 0.6 | 0.4 | 0.2 | 0.9 | 0.6 | 0.3 | 1.1 | 1.0 | 0.1 | 1.2 | 1.2 | 0 |
| Riboflavin (mg) | 0.7 | 0.3 | 0.4 | 1.0 | 0.3 | 0.7 | 1.3 | 0.5 | 0.8 | 1.4 | 0.6 | 0.8 |
| Niacin (mg) | 8.0 | 4.7 | 3.3 | 11.0 | 7.4 | 3.6 | 14.0 | 12.4 | 1.6 | 16 | 14.4 | 1.6 |
| Vitamin C (mg) | 30 | 9 | 21 | 40.0 | 15.0 | 25 | 40 | 26 | 14 | 80 | 28 | 52 |
| Free Folic Acid (µg.) | 30 | 18 | 12 | 40 | 26 | 14 | 400 | 48 | 352 | 150 | 53 | 97 |

8. Food Safety and Nutrient Composition: The States/UTs with the support of Food and Nutrition Board (FNB) should ensure the quality of supplementary nutrition being provided under SNP with reference to the norms of food safety as well as nutrient composition. The supplementary nutrition should conform to the prescribed standards laid down under the Prevention of Food Adulteration Act and the Integrated Food Law to ensure consistent quality and nutritive value of the intervention per serving (as per Nutritional Norms). FNB in collaboration with the State Governments/UTs will carry out periodic checks to ensure that prescribed standards are adhered to and quality and nutritive value of supplementary nutrition is maintained. In case of Hot Cooked Meal, it may be ensured that it is prepared in proper kitchen sheds having

[Handwritten signature]

adequate sanitation and safe drinking water so as to maintain hygienic conditions. Anganwadi Workers and Anganwadi Helpers are also expected to sensitize children in the hygienic practices like washing hands before eating and after visiting the toilet. Similarly, it may also be ensured that the Micronutrient Fortified Food/Energy Dense Food also meets the norms as per Recommended Dietary Allowance (RDA) and the quality and nutritional value of such food is maintained.

9. The above guidelines shall supersede all previous guidelines on nutritional and feeding norms under the ICDS Scheme.

Yours faithfully,



24/02/09.

(Mahesh Arora)

Director & TA (IC) FNB

Copy forwarded for information to:

1. PS to MOS (IC)
2. PS to Secretary
3. PS to JS (LK)
4. Food and Nutrition Board, Jeevandeep Building, New Delhi