



MINIMUM DIETARY DIVERSITY - POLITY

NEWS: A recent study published in the National Medical Journal of India highlights that nearly 80% of children in certain Indian states experience Minimum Diet Diversity Failure (MDDF).

WHAT'S IN THE NEWS?

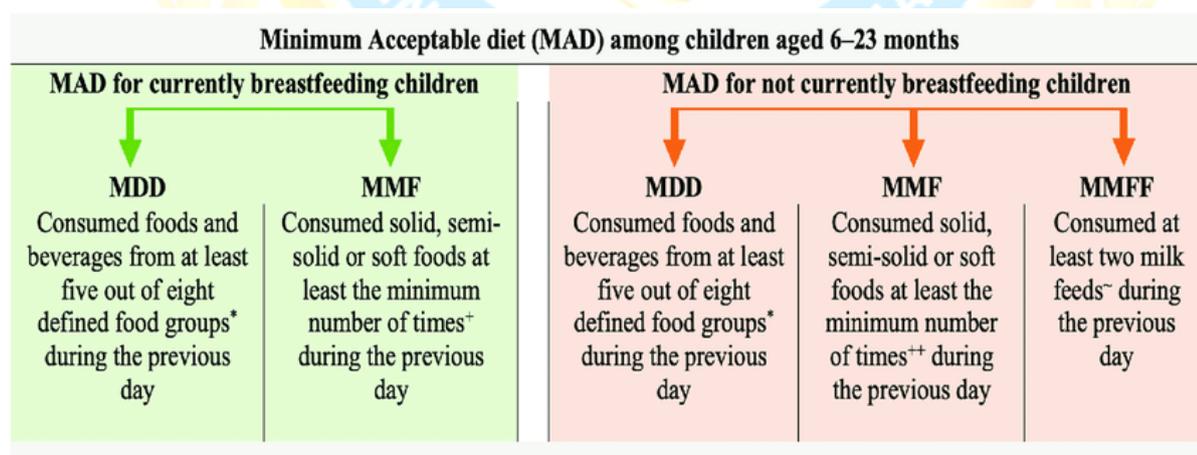
Minimum Diet Diversity Failure (MDDF) indicates an insufficient diversity in children's diets, which can lead to severe health risks.

The study published in the National Medical Journal of India is based on National Family Health Survey (NFHS) data, provides critical insights into dietary diversity issues across India and highlights the need for comprehensive nutritional interventions.

Highlights of the Study

- Eight states in northern, central, and western India, including Uttar Pradesh, Rajasthan, Gujarat, Maharashtra, and Madhya Pradesh, show alarmingly high MDDF rates, with over 80% of children aged 6-23 months not meeting minimum dietary diversity standards.
- The central region has the highest MDDF rates, with 84.6% prevalence as of the 2019-21 NFHS-5 survey. On a district level, only 95 out of the 707 districts analyzed had MDDF prevalence below 60%.
- Although national MDDF rates have decreased from 87.4% in 2005-06 (NFHS-3) to 77.1% in 2019-21 (NFHS-5), the numbers remain concerning, and reflect the need for accelerated nutritional improvement efforts.

Between NFHS-3 and NFHS-5, there has been an increase in the consumption of foods rich in Vitamin A, eggs, vegetables, and flesh foods among children. This dietary diversity is essential for providing key nutrients and supporting children's growth and development.



What is Minimum Diet Diversity and Why Is It Important?

Minimum dietary diversity is a **metric that assesses whether children consume a combination of food groups that ensure adequate intake of essential nutrients.**



The **World Health Organization (WHO)** identifies it as a **reliable indicator for evaluating diet quality**. The standard involves a minimum intake across eight food groups, which includes items like grains, legumes, dairy, vegetables, and animal-source foods.

Possible reason of MDDF

- Children born to young or illiterate mothers are more likely to suffer from MDDF.
- Female children and those from economically disadvantaged households face higher MDDF rates.
- Children with low birth weight, anemia, or those who lack regular health checkups are more likely to experience MDDF.

Limited engagement with anganwadis and the Integrated Child Development Services (ICDS) program, which offers health services and nutritional counseling, further exacerbates MDDF.

Health Risks of Low Dietary Diversity

- **Poor dietary diversity damages children's cognitive and motor skill development**, limiting their ability to achieve developmental milestones and impacting long-term academic and social outcomes.
- **Low diversity in diet weakens the immune system**, making children more susceptible to infections, diseases, and nutrient deficiency conditions such as anemia and stunting.

Globally, malnutrition contributes to approximately 35% of child deaths. It is also a substantial factor in 11% of the total disease burden.

Recommendations

- The study emphasizes the **need for enhanced policy interventions to improve dietary diversity** and nutrition outcomes among children.
- Poshan Abhiyaan, ICDS, and the Public Distribution System (PDS) are important initiatives that require stronger coordination and focus on diet diversity. These programs must also improve outreach to communities with high MDDF.
- **Nutrient-rich foods should be made available and affordable in high-MDDF regions**. Subsidies or inclusion of diverse food items in the PDS could help low-income families access a wider variety of foods.
- Programs that educate mothers on the importance of dietary diversity, even within limited resources, can help improve children's nutritional outcomes.
- Ensuring that children receive routine checkups and nutritional advice from anganwadis and ICDS centers can help monitor growth and intervene early in cases of MDDF.

The study highlights the **need for local self-governance systems to actively participate in the implementation of nutrition-related programs**, making resources and counseling accessible to those in need.

Source: <https://www.downtoearth.org.in/health/80-children-in-8-indian-states-have-dietary-diversity-failure-report-authors-explain-the-dangers-of-this>