OFFICE MEMORANDUM

Subject: Minutes of the second meeting of the Inter-Ministerial Committee on Health & Nutrition for North Eastern Region held under the Chairmanship of Secretary, MDoNER on 16th October, 2019 at Vigyan Bhawan Annexe, New Delhi.

The undersigned is directed to enclose herewith the minutes of the second meeting of the Inter-Ministerial Committee on Health & Nutrition for North Eastern Region held under the Chairmanship of Secretary, MDoNER on 16th October, 2019 at Vigyan Bhawan Annexe, New Delhi. The Action Taken Note (ATN) on the actionable points may be sent within a month's time.

Encl: As above.

To,

The Resident Commissioner, North Eastern States.

1. The Secretary, Ministry of Health & Family Welfare, Nirman Bhavan, Maulana Azad Road, New Delhi – 110011.
2. The Secretary, Department of Health Research, MoHFW, 2nd Floor, IRCS Building 1, Red Cross Road New Delhi -110003.
3. The Secretary, Ministry of AYUSH, AYUSH BHAWAN, B Block, GPO Complex, INA Colony, New Delhi, Delhi 110023.
4. The Secretary, Ministry of Women and Child Development, Shastri Bhawan, Dr Rajendra Prasad Road, New Delhi-110001.
5. The Secretary, Ministry of Drinking Water and Sanitation, Paryavarn Bhawan, CGO Complex, Lodhi Road, New Delhi - 110 003.
6. The Secretary, Department of School Education, Ministry of Human Resource Development, Shastri Bhawan, New Delhi-110001.
7. The Secretary, Department of Agriculture Research & Education.
8. The Secretary, Ministry of Food & Public Distribution, Krishi Bhawan, New Delhi - 110001.
9. The Secretary, Department of Animal Husbandry & Dairying, Krishi Bhawan, New Delhi - 110001.
10. The Secretary, Department of Fisheries, Krishi Bhawan, New Delhi - 110001.
11. The Principal Secretaries, Health Department, All NE States.
12. The Resident Commissioners, North Eastern States.
13. Shri Suman Singh, Commissioner Planning, Government of Manipur
14. Shri P.K.Singh, Resident Commissioner, Government of Manipur
15. Shri M.Nagaraju, Principal Resident Commissioner, Government of Tripura

(A.Kiruthika)
Assistant Director
17. Shri Rajeev Arora, Additional Development Commissioner, Government of Meghalaya
20. Shri K. Sreenivasulu, Principal Secretary, Health & Family Welfare, Government of Sikkim
21. Dr. RS Gupta, Adviser, National AIDS Control Organization (NACO).
23. Dr. D.K. Yadav, ADG(Seed), ICAR-DARE
24. Dr. Alok Mathur, Additional DDG, Ministry of Health & Family Welfare
25. Shri Kethosituo Sekhose, DRC, Government of Nagaland
26. Shri P. Ringbu, Director, North Eastern Institute of Folk Medicine, Pasighat, Arunachal Pradesh
27. Dr. P. Ashok Babu, Director, Ministry of Women and Child Development
28. Shri R.P. Sukhia, Deputy Secretary, Ministry of Drinking Water and Sanitation
29. Shri L.P. Sharma, Deputy Secretary (BP&SDF), Department of Food & Public Distribution
30. Dr. A. Raghu, Joint Adviser, Ministry of AYUSH
31. Dr. Sheetal Rahi, AC(C&ATI), Ministry of Health & Family Welfare
32. Ms. Deepa Anand, Deputy Secretary, Department of School Education & Literacy
33. Shri S.K. Rath, Assistant Commissioner (FY), Department of Fisheries
34. Shri Sachin Arora, Under Secretary, MHRD
35. Shri R. Ramesh, SRO, NITI Aayog
36. Dr. Kimi, OSD (Health), Govt of Mizoram

Copy to:

1. PPS to Secretary, Ministry of DoNER.
2. PS to Secretary, NEC.
3. PPS to Additional Secretary, MDoNER
4. JS(SLM)/JS(SE)/JS(RS)/EA, Ministry of DoNER.
5. Director (RC)/ Director(SG)/ Director (BNP)/ Director (LH)/ Director (AB)/ Director (UK)/ DS(NS)/ DS(SA)/ JD(JS), Ministry of DoNER.
Second meeting of Inter-Ministerial Committee (IMC) on Health & Nutrition for the North Eastern Region was convened under the Chairmanship of Secretary, MDoNER on 16th October, 2019 at Vigyan Bhawan Annexe, New Delhi. The list of participants attended the meeting in person and through VC is Annexed.

2. After welcoming all the participants and a brief introduction by attendees, the Chairman in his introductory remark mentioned that the 1st IMC on Health & Nutrition was held on 7th December, 2018 and we are supposed to have these meetings in more frequent intervals, say quarterly. He acknowledged the review meeting taken by Statistical Adviser on 26th August 2019 where all actionable points decided in the 1st meeting were reviewed and well-drafted minutes have been issued. He encouraged other Divisional Heads of MDoNER who are looking after other IMCs to take similar actions in future.

3. Then, he highlighted the letter No. EandP-19/19/2019-O/o JD(E and P) dated 1st October, 2019 on leveraging of accumulated balance in Non-Lapsable Central Pool of Resources (NLCPR) fund for holistic development of NER where comprehensive sector specific, state specific, Aspirational District specific proposals have been sought by MDoNER, from Central Ministries, Chief Secretaries of NE States and Deputy Commissioners of 14 Aspirational Districts in NER. The letter has an annexure where status of NE States on certain critical parameters in sectors like health, education, basic infrastructure & tourism, income levels and employment, etc. are indicated. It is desired that special mission mode projects to improve these parameters may be undertaken by the States. The thrust has been given to the five key sectors identified by NITI Forum for North East viz. bamboo, tea, tourism, pisciculture and dairy. The Ministry also envisages funding few other projects of other Central Ministries/ Departments who have already spent 10% GBS and have additional absorptive capacity. Ministry of DoNER expects projects within one month from NE State Governments, Central Ministries/ Departments and 14 Aspirational Districts of NE for taking up the matter further with Department of Expenditure, M/o Finance.

4. Secretary, MDoNER clarified that proposals should be in the form of Medium Term, say 3-5 years period and Long-term, and say more than 5 years and up to 10 years; the strategy / action plan the NE State, other Ministries / Departments and 14 Aspirational Districts of NE wants to undertake intervention for bringing the State indicator to the level of national average and then to the level of the best State in the country.

5. He also highlighted the need and importance of expenditure of 10% GBS by the non-exempted ministries in the NER with focus on all those Ministries/ Departments who have been invited for this meeting. He informed that Ministry of Health & Family Welfare has spent around 43% of the allocated budget of Rs.4700.10 crore during 2019-20 towards the development of NER. He further added that Ministry of DoNER has been authorized to recommend re-appropriation funds at RE stage of those Ministries/Departments who are not able to spend, to those Ministries/Departments who are in need of additional funds and have the additional absorption capacity, giving way to utilization of funds more appropriately.
6. Thereafter, a presentation was made by Statistical Adviser which had two parts. Part-A was action taken on the decisions taken during the first meeting of the IMC and Part-B on status of health & nutrition indicators. The Part–B of the presentation relied upon the data from NFHS-4 and Comprehensive National Nutrition Survey, 2016-18 conducted by M/o Health & Family Welfare. To tackle the issue of HIV/AIDS in NER, NEC has signed a MoU with NACO on 8.3.2019 and as a follow up of MoU, a Joint Working Group (JWG) has been constituted by NACO for drawing up an action plan. The first meeting of JWG will be conveyed soon. On the issue of giving more emphasis to the Aspirational districts, D/o School Education & Literacy as also M/o Health & Family Welfare through their ATNs have informed that NE States have been sensitised by them to give more emphasis for better implementation of Mid Day Meal Scheme (MDMS) and health intervention respectively. It was also presented that NEC has released Rs. 1 crore to each Aspirational District in NER to enable them to make substantial progress on various indicators including implementation of POSHAN Abhiyan, PMMVY schemes and capacity building of ASHA workers, Anganwadi workers & Auxiliary Nurse Mid-wife (AAA).

7. As a follow up of the 1st IMC, M/o DoNER took up the matter of rice fortification in the State of Meghalaya with D/o Food & Public Distribution. Towards the issue of high incidence of cancer in Papum Pare and Aizawl districts, M/o H&FW in their ATN had informed that in NER, 76 District Non Communicable Disease (NCD) Clinics, 12 District Cardiac Care Units (CCUs), 181 Common Health Centres (CHCs) NCD Clinics and 13 District Day Care Centres have been set up under the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Disease and Stroke (NPCDCS), which was launched in 2010 to prevent and control major NCDs. Further, under the Strengthening of Tertiary Cancer Centre facilities Scheme of NPCDCS, financial assistance is provided for setting up of State Cancer Institutes (SCIs) and Tertiary Care Cancer Centres (TCCCs) in different parts of the country. A population level initiative for prevention, control and screening for common Non-Communicable Diseases (diabetes, hypertension and cancer viz. oral, breast and cervical cancer) has been rolled out in over 219 districts of the country under NHM, as a part of comprehensive primary healthcare where 24 districts have been covered from NER (Mizoram - 4, Assam - 5, Manipur - 2, Meghalaya- 3, Nagaland - 3, Tripura – 2, Sikkim – 2 and Arunachal Pradesh – 3).

8. Regarding status of poor performing NE States with respect to POSHAN Abhiyan and PMMVY, the latest status furnished by M/o WCD portrays a similar unsatisfactory performance. State-wise fund utilisation was not only poor, but also most of the states have not completed the recruitment of various positions at State and district levels for implementation of POSHAN Abhiyan. Also, some of the States have not procured the Growth Monitoring Devices and Smart Phones which is prerequisite for ICDS-CAS roll out fully. Additional Secretary, DoNER through VC asked the Health Secretaries of NE States and those present in the meeting the reason for slow pace of utilisation of fund and procurement of devices, etc. Most of them opined that they have got the fund towards the fag end of the last Financial Year and it would be utilised soon in this Financial Year. Few cases of re-tendering for procurement of devices were also reported by them.

9. NEC, NERLP and NERCORMP have also attended the meeting under the Chairmanship of Secretary, M/oWCD held on 22nd December, 2018 at Guwahati for better coordination of POSHAN Abhiyan and PMMVY Scheme. On the issue of Ayurvedic Nutrition may also be provided under Mid-Day Meal Scheme, D/o SE&L in their ATN reiterated about the Mid-Day Meal guidelines which prescribes a cooked mid-day meal for primary classes providing 450 calories of energy and 12 grams of protein per child as well as for upper primary classes it should consist of 700 calories of energy and 20 grams of protein per child. The overall responsibilities
for providing cooked and nutritious mid-day meal to the eligible children lies with the State Governments and UTs. The States/UTs fixed their menu as per their local needs, in order to meet the prescribed nutritional content. Some States/UTs also provide additional items (eg. milk, eggs etc) from own resources. Of late, Ministry of HRD is emphasizing setting up School Nutrition Gardens in school premises, where products suitable to the local food habits will be grown for consumption as part of mid-day meals. The products may also include Ayurvedic products like Ashwagandha, Amla etc. for their high nutritional values.

10. So far as the field visits may be conducted by Senior Officers of the Ministry of DoNER to the areas where health indicators are alarming in nature, it was presented that visits to Aspirational districts as also other districts are being done by officials from DoNER. It was desired that senior Officers from concerned line Ministries/Departments should also undertake visits to NE States/districts.

11. Regarding Backyard Poultry & Kitchen Garden in Anganwadi Centres under Anganwadi Services and in the schools under Mid Day Meal Scheme to be promoted, M/o WCD through their ATN informed that Kitchen Garden in AWCs being promoted in all AWC’s where cultivable land is available through Innovation. States/UTs are granted funds to undertake any project under Innovation/augmentation of AWC. D/o SE & L also informed that under MDMS, all the States/UTs including NER States are being encouraged to set up Kitchen Gardens in the schools. It has also been decided that all the States/UTs including NER States will be provided Rs.5,000/- per Kitchen Gardens (School Nutrition Gardens) from flexi funds, on sharing basis (90:10 central: NER States) under the Scheme. Out of 87,268 schools in NER, 51,342 schools have Kitchen Gardens in NER States.

12. Regarding bio-fortification of crops through Conventional Plant Breeding in collaboration with ICAR, IRRI, M/o WCD through their ATN conveyed that a one-day Agri-Nutrition Conference was organised on 15th March, 2019 at New Delhi to develop an Agri-Nutrition convergence action plan to accelerate the progress towards improving nutrition indicators. ICAR is yet to provide information regarding bio-fortified varieties developed by ICAR in NE Region. So far as the Scaling up of AAA pilot in 14 Aspirational Districts is concerned, M/o WCD informed that AAA Pilot is at advanced stage of implementation. Expansion in 14 Aspirational Districts may be covered after successful roll-out of pilot.

13. In Part-B of the presentation, Statistical Adviser reiterated the expenditure under 10% GBS of the IMC on Health & Nutrition constituent Ministries/Departments. The concern of low expenditure by M/o WCD in NER during 2018-19 was pointed out with the request to all Central Ministries/Departments to spend their earmarked fund in the NER in 2019-20. The high prevalence of HIV in the NER (0.62%) particularly Mizoram (2.04%), Manipur (1.43%) and Nagaland (1.15%) as the cause of the concern were highlighted compared to the national average of 0.22%. Annual Notification Rate of TB per lakh population is quite high in Arunachal Pradesh (203), Sikkim (197), Mizoram (186), Nagaland (148) compared to national average of 138. To ameliorate the indicators of these communicable diseases M/o H&FW and NE State Governments needs to take special intervention. Under 5 mortality rate (per 1000 live births) is high in Assam (57) in NER compared by national average of 50. Institutional births except Mizoram (80.1%), Sikkim (94.7%) and Tripura (79.9%), all other 5 NE States are worse off compared to the national average of 78.9%. Infant mortality rate (IMR) is high in Arunachal Pradesh (36%), Assam (44%) and Meghalaya (39%) compared to the all-India average of 34%.
14. Nutritional indicators such as children under 5 years who are stunting (height-for-age), wasted (weight-for-height) and underweight (weight-for-age) were presented. Stunting is a concern in Meghalaya alone (43.8%) compared to 38.4% of national average as per NFHS-4 (2015-16). The same trend also follows in Comprehensive National Nutrition Survey (2016-18) in the region where Meghalaya stands at 40.4% compared to national average of 34.7%. In other two parameters, though NE States are better off compared to national average, still efforts should be made to reduce them further.

15. Continuing the nutritional status, Statistical Adviser outlined that percentage of children (6-23 months) with minimum dietary diversity is very less in Mizoram (19.8%), Nagaland (20.3%) compared to national average of 21%. Percentage of children (6-23 months) with minimum meal frequency is worse off in Assam (38.9%), Manipur (30.1%), Meghalaya (28%) and Mizoram (32.8%) compared to national average of 41.9%. Similarly, percentage of children (6-23 months) with minimum acceptable diet is not good in Mizoram (2.8%) and Nagaland (5.6%) compared to national average of 6.4%. Also, status of anemia and iron deficiency for children aged 1-4 years of NE States was presented which is not so much a concern in the region.

16. It was informed by the Additional DDG, M/o Health & Family Welfare that Indian Council of Medical Research (ICMR), Bengaluru has been maintaining National Cancer Registry, which could be used for monitoring prevalence of cancer in North Eastern States. Followed by which, he made a presentation on Situation of Psychological Disorder in North Eastern States. Status of implementation of program in each state was presented including number of districts covered in each State and fund release in 2018-19 along with utilization and allocation for 2019-20. It was observed that some of the North Eastern States have not been utilizing the funds released to them under National Mental Health Program (NMHP). His presentation highlighted the issue of (i) ensuring full utilization of funds and timely submission of UCs, (ii) submitting proposals to bring all the districts under District Mental Health Mental Program (DMHP) coverage, (iii) ensuring all districts supported under the program are functional, (iv) ensuring timely release of funds to the State Program Division, (v) ensuring early constitution of State Mental Health Authority (SMHA) and Mental Health Review Boards in the States, and (vi) ensuring enrolment of doctors, psychologists, social workers & nurses in Digital Academy. Additional Secretary, DoNER requested the State representatives present and those who were in VC to utilize the funds released under Mental Health Program.

17. Shri Saurabh Endley, Joint Secretary, MDoNER stated that the State Government of Mizoram has come up with proposal of setting up a Mental Health Institute. In this regard, Additional DDG, M/o Health & Family Welfare stated that it cannot give funds for setting up a new Institute since the same is not permissible under the Scheme guidelines. However, funds would be provided for up-gradation of an existing Hospital for which the States may submit a concrete proposal to the Ministry of Health & Family Welfare. Additional Secretary, MDoNER opined that the State of Mizoram could take up this on priority basis. Then he requested the representatives from different Ministries/ Departments present in the meeting for their ministries action on the issues highlighted in the presentations.

18. ADG (Seed), ICAR-DARE on bio-fortification of crops through Conventional Plant Breeding mentioned that almost 50 varieties of bio-fortified crops are there across the country which includes 6 rice varieties, 17 wheat varieties and 5 to 6 maize varieties etc. He stated that for NER, 3 rice varieties, 2 wheat varieties and varieties for maize, lentils and sweet potatoes have been released for commercial cultivation. It was suggested that source and availability of seeds may be shared with Ministry of DoNER and with Agriculture Departments of NE States.
19. Representative from Ministry of AYUSH informed that National AYUSH Mission (NAM), a Centrally Sponsored Scheme, is being implemented in the country including NE States for strengthening of educational systems, facilitate the enforcement of quality control of medicinal plants. He informed that Ministry of AYUSH has suggested all the State Governments to have a separate Directorate for AYUSH. So far, Assam and Manipur have created separate Directorate for AYUSH. State Governments may approach Central Government for this purpose. He also informed that as far as increasing nutritional values, not only through Mid-Day Meal Scheme but other schematic interventions, is concerned, an Inter-Ministerial Committee has been created with MWCD and MH&FW for incorporating traditional food practices into the mainstream; for this draft concept paper has already been developed, however, it will require some scientific footing. He also stated that last month, Hon’ble Minister of AYUSH had met Hon’ble Chief Minister of Tripura wherein the State Government had flagged the issue of making an exclusive AYUSH Education Institute in the State. Additional Secretary, MDoNER suggested that if Ministry of AYUSH falls short of funds, then re-appropriation mechanism of 10% GBS, as mentioned by the Chairman, will be taken into consideration.

20. Representative of North Eastern Institute of Folk Medicine (NEIFM) stated NEIFM was established during 2008 for documentation and scientific validation of traditional folk remedies and use the knowledge for imparting effective and cheap primary health care to the villagers including training of farmers in cultivation of medicinal plants thereby improving their income generation source. In that direction, it has completed documentation of traditional remedies of Assam. However, due to lack of manpower, it could not be molded into scientific shape. Recruitment of botanist is under process; once the process of recruitment is completed the Institute will come up with a booklet within two to three months. He further stated that the Institute is in the process of preparing a handbook on traditional practices of folk remedies of Manipur and Tripura; the draft of the same would be completed by the end of January or February 2020. A 50 bedded hospital with laboratory and equipment was established but couldn’t be operationalized due to lack of technical manpower like doctors and technicians.

21. Representative from Ministry of WCD apprised of the status of implementation of POSHAN Abhiyan in the North Eastern States. It was informed by the representative of MWCD that in respect of tagging of Anganwadi Centres, the status of implementation is not up to the mark in the States of Manipur (0%), Assam (25%) and Arunachal Pradesh (48%). Representative from Assam informed that they are facing problems in BTC areas, however, he assured that the entire process would be completed by the end of this month. Similarly, mobile procurement process needs to be expedited with States of Arunachal Pradesh, Assam and Manipur having 0%, 20% and 25%, respectively, as the rates of completion. Representative from health department of Manipur informed that the matter will be resolved within one week. He further informed that procurement of growth monitoring device has already been done for Aspirational District; other districts will be covered within 10-15 days. Representative from MWCD also informed that MWCD has released Rs.29 lakh to each district as a part of flexi funds for spending on things as per the local needs. He informed that the States of Manipur and Arunachal Pradesh are yet to submit their Plan of Action for spending these flexi funds. On this, representative from Meghalaya stated that they are in the process of finalizing the plan of action and will submit the same as early as possible. Additional Secretary, MDoNER suggested that States may make efforts for timely implementation of the POSHAN Abhiyan without any further delay.

22. Representative from Department of Food & Public Distribution informed that a Centrally Sponsored Pilot Scheme on Fortification Rice and its Distribution under PDS has been approved
for a period of three years beginning from 2019-20 with a total budget outlay of Rs.147.61 crore. To begin with, the Pilot scheme will focus on 15 districts, preferably one district per State. The decentralized model of fortification by States/UTs has been approved in the Pilot scheme with blending at the milling stage. However, State Government of Meghalaya had requested for post milling stage rice fortification model which is not approved under the Pilot scheme. Further, as per the Administrative approval of the pilot Scheme, the responsibility for identifying the district shall lie with the respective States/UTs. He further added that every option will be taken into consideration at the time of scaling up of the scheme. He informed that Government of Assam has identified a district for the pilot scheme. A Conference was also held on 14.10.2019 and 15.10.201.9 with State Governments wherein States were asked for providing suggestions so that these can be taken up at the time of scaling up of the Scheme.

23. Representative from Department of Fisheries informed that the Department had formulated Vision Document for the North Eastern States with a target of spending Rs. 431 crore in the next five years. Additional Secretary, MDoNER opined that the copy of the same may be shared with Ministry of DoNER. Representative also informed that fish seeds are costlier in NER as there is no feed mill in the hill States. Fish seeds from Assam and Tripura are transported to the other States of NER.

24. After detailed deliberations, the Committee took the following decisions:

(i) Central Ministries/ Departments to make full utilization of 10% Gross Budgetary Support (GBS) allocated towards development of North Eastern Region. [Action: Central Ministries/Departments]

(ii) To undertake intervention for bringing the State indicators, namely health, education, basic infrastructure & tourism, income levels and employment to the level of national average and then to the best State average in the country, proposals should be sent in the form of Medium Term and Long-term by NE States and 14 Aspirational Districts of NER. [Action: State Governments]

(iii) The Ministry envisages funding few projects of Ministries/ Departments who have already spent 10% GBS and have additional absorptive capacity from the unspent NLCPR pool. M/o DoNER expect projects within one month from Central Ministries for taking up the matter further with Department of Expenditure, M/o Finance. [Action: Central Ministries/ Departments]

(iv) State Government of Mizoram and other NE States to submit proposals for ensuring mental care facilities to Ministry of Health & Family Welfare as per their Scheme guidelines. [Action: State Governments/ Ministry of Health & Family Welfare]

(v) Under NMHP, NE States need to expedite the utilization of funds released under the Scheme and timely submission of UC. They need to submit proposals to bring all the districts under District Mental Health Mental Program (DMHP) coverage and also to ensure all districts supported under the District Mental Health Program are functional. States need to ensure timely release of funds to the State Program Division and early constitution of State Mental Health Authority (SMHA) and Mental Health Review Boards along with enrolment of doctors, psychologists, social workers & nurses in Digital Academy. [Action: State Governments]

(vi) High prevalence of HIV in the NER (0.62%) particularly Mizoram (2.04%), Manipur (1.43%) and Nagaland (1.15%) compared to the national average of 0.22%. is the cause of the concern. Also, Annual Notification Rate of TB per lakh population is quite high in Arunachal Pradesh (203), Sikkim (197), Mizoram (186), Nagaland (148) compared to national average of 138. To ameliorate the indicators of these communicable diseases
M/o H&FW and NE State Governments needs to take special intervention. [Action: M/o H&FW/ State Governments]

(vii) Under 5 mortality rate (per 1000 live births) is high in Assam (57) in NER compared by national average of 50. Institutional births except Mizoram (80.1%), Sikkim (94.7%) and Tripura (79.9%), all other 5 NE States are worse off compared to the national average of 78.9%. Infant mortality rate (IMR) is high in Arunachal Pradesh (36%), Assam (44%) and Meghalay (39%) compared to the all-India average of 34%. Interventions may be undertaken to improve these indicators. [Action: M/o H&FW/ State Governments]

(viii) Stunting is a concern in Meghalaya alone (43.8%) compared to 38.4% of national average as per NFHS-4 (2015-16). Rice fortification is the panacea. This would help to reduce malnutrition by involving local millers. [Action: Ministry of Food & PD and State Government of Meghalaya]

(ix) Percentage of children (6-23 months) with minimum dietary diversity is very less in Mizoram (19.8%), Nagaland (20.3%) compared to national average of 21%. Percentage of children (6-23 months) with minimum meal frequency is worse off in Assam (38.9%), Manipur (30.1%), Meghalaya (28%) and Mizoram (32.8%) compared to national average of 41.9%. Similarly, percentage of children (6-23 months) with minimum acceptable diet is not good in Mizoram (2.8%) and Nagaland (5.6%) compared to national average of 6.4%. Efforts may be made to improve these indicators. [Action: M/o H&FW/ MWCD/ State Governments]

(x) For bio-fortification of crops through Conventional Plant Breeding, it is suggested that ICAR-DARE need to furnish the source and availability of seeds to Ministry of DoNER and to Agriculture Departments of all NE States for commercial cultivation. [Action: ICAR-DARE]

(xi) State-wise fund utilisation was not only poor but also most of the states have not completed the recruitment of various positions at State and district levels for implementation of POSHAN Abhiyan. Also, some of the States have not procured the Growth Monitoring Devices and Smart Phones which is prerequisite for ICDS-CAS roll out fully. States to make efforts for timely implementation of the POSHAN Abhiyan

[xii) There has been considerable delay in bringing out the documentation on folk remedies of NE States by NEIFM. This has been largely due to inadequate man power and technical person in the Institute. Ministry of AYUSH may take necessary action in this regard. [Action: Ministry of AYUSH]

(xiii) Vision Document for the North Eastern States formulated by Department of Fisheries to be shared with Ministry of DoNER. [Action: Department of Fisheries]

(xiv) Field visits may be conducted by Senior Officers of the Ministry of DoNER and concerned line Ministries/ Departments to the areas where health indicators are alarming in nature. [Action: MDoNER and other Central Ministries/Departments]

The meeting ended with vote of thanks to the Chair.

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Annexure

List of Participants

Ministry of DoNER

1. Dr. Inder Jit Singh, Secretary – In Chair
2. Shri Indevar Pandey, Additional Secretary
3. Shri Saurabh Endley, Joint Secretary
4. Shri Chandramani Sharma, Statistical Adviser
6. Ms. Samita Arora, Deputy Secretary
7. Ms. A. Kiruthika, Assistant Director

Central Ministries/Departments

1. Dr. D. K. Yadav, ADG(Seed), ICAR-DARE
2. Dr. Alok Mathur, Additional DDG, Ministry of Health & Family Welfare
3. Shri R. Partap Sukhla, Deputy Secretary, Ministry of Drinking Water and Sanitation
4. Shri L. P. Sharma, Deputy Secretary (BP&SDF), Department of Food & Public Distribution
5. Dr. A. Raghu, Joint Adviser, Ministry of AYUSH
6. Dr. P. Ashok Babu, Director, Ministry of Women and Child Development
7. Dr. Sheetal Rahi, AC(C&ATI), Ministry of Health & Family Welfare
8. Ms. Deepa Anand, Deputy Secretary, Department of School Education & Literacy
9. Shri S. K. Rath, Assistant Commissioner (FY), Department of Fisheries
10. Shri Sachin Arora, Under Secretary, MHRD

Organizations

1. Dr. Ketaki Bapat, Scientist F, O/o PSA to Government of India
2. Shri C. H. Kharshiing, Planning Adviser, North Eastern Council
3. Shri P. Ringu, Director, North Eastern Institute of Folk Medicine
4. Shri R. Ramesh, SRO, NITI Aayog

State Governments

1. Shri Sumant Singh, Commissioner Planning, Government of Manipur
2. Shri P. K. Singh, Resident Commissioner, Government of Manipur
3. Shri M. Nagaraju, Principal Resident Commissioner, Government of Tripura
4. Shri K. Sreenivasulu, Principal Secretary, Health & Family Welfare, Government of Sikkim
5. Shri Kethosuto Sekhose, DRC, Government of Nagaland
6. Shri Rajeev Arora, Additional Development Commissioner,
8. Dr. Kimi, OSD (Health), Govt of Mizoram

State Governments through Video Conference

1. Shri Nitin Khare, Commissioner & Secretary, Transformation and Development Department, Government of Assam
2. Shri P. Bakshi, Secretary, Health and Family Welfare, Government of Meghalaya
3. Special Secretary, Department of Social Welfare, Government of Tripura
4. Representatives from Health Department of Government of Mizoram
5. Representatives from Department of Health and Family Welfare, Government of Nagaland
6. Other representatives from Health Departments of State Governments