



## NUTRITION PROGRAMMES IN INDIA- A CRITICAL STUDY

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### ABSTRACT

*This paper presents by mentioning Associate in Nursing unfortunate however continued trend - terribly low priority of nutrition within the health sector. To an oversized extent, this can be because of the shortcoming of the nutritionists to project the importance of nutrition in conjunction with the risks of deficiency disease.*

**KEY WORDS:** mentioning Associate , nutritionists , risks of deficiency disease.

### INTRODUCTION

Deficiency disease downside includes a distinct draw-back in not attracting public attention, and thus, is of not abundant interest to politicians and call manufacturers. 5 cases of epidemic cholera in an exceedingly town lead to public agitation forcing the authorities to try to to one thing. within the same neck of the woods, hundred youngsters wordlessly affected by deficiency disease and dying go unremarked. the consequences of deficiency disease square measure insidious and unloving and this can be the explanation why the matter hardly gets a priority place - even within the health sector. On high of this, any tutorial exercise to reduce its magnitude, while not having this totally mentioned among persons WHO square measure expected to grasp a lot of regarding the matter and its extent, isn't a wise step. [1-4]

### NUTRITION PROGRAMMES

Nutrition Programmes coming back specifically to nutrition programmes, it's troublesome to come to a decision exactly on once such programmes in and of itself started. Roughly, the records offer indication that in the thirties, nutrition programmes started showing in Asian nation among the Provincial Health Sectors. probing the nutrition programmes from then on to the current stage, four distinct phases may well be known. These are: i. Medical/Clinical part - supported by bio-chemist and laboratory specialists. ii. Food Production and Technology part - supported by Food technologists. iii. Community Development part. iv. Multi-sect oral stage with stress on socio-economics of deficiency disease. In every part, the involved sector took the predominant role. Thus, within the 1st part, nutrition programming was a lot of or less the responsibility of the medical or health sector. within the second part, food and agriculture sector took the leading role\* within the third, the community development and within the gift part, .all connected sectors with welfare because the nodal agency. The success or failures of every part LED to the strategy of succeeding part.

### FOOD PRODUCTION PART –

As expected at the tip of this part there was disillusion. foremost the good thing about exaggerated food production, that was achieved terribly quickly in Asian nation, failed to bit the poorest segments of the population. Even the revolution created the made farmer richer, and therefore the poor farmers and

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therefore the landless agricultural rural labor remained wherever they were or probably sided down on the economic scale. .

### CONCLUSION

In summary, Associate in Nursing analysis of deficiency disease programme in Asian nation has been mentioned.

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