



Enhancing Nutrition Outcome through India's Social Safety Net Programs

Opportunities and Way Forward

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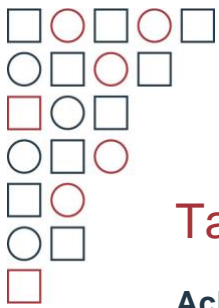
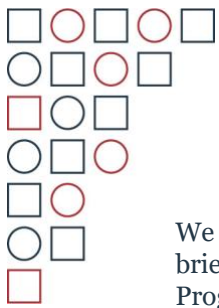


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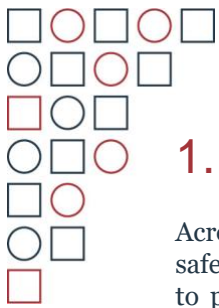


Acknowledgment

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We also wish to acknowledge the valuable inputs and insights shared by the participants of the consultation, representing various organizations and sectors. Their expertise and perspectives have been instrumental in shaping the recommendations outlined in this document.

This brief is a reflection of collaborative efforts, and we hope it serves as a resource for advancing nutrition outcomes through social safety net programs in India.



1. Introduction

Across the globe, social safety net programs (SSNPs) function as critical mechanisms to safeguard the most vulnerable populations from poverty and food insecurity. They are designed to protect low-income households from economic shocks and provide essential support for basic needs. At its core, SSNPs, as part of the broader social protection agenda, are founded on the principle of equity and fairness and are intended to ensure the welfare of those at the bottom of the pyramid. Over the years, food distribution through SSNPs has emerged as a promising delivery mechanism for providing food to underserved populations.

1.1 SOCIAL SAFETY NET PROGRAMS IN INDIA

India's SSNPs span over many decades and focus on employment, poverty and key social sectors including health, food and nutrition and education, among others. The government has introduced various schemes and missions such as the Mahatma Gandhi Rural Employment Guarantee Scheme and the National Rural Livelihoods Mission to create rural employment and livelihood opportunities to support rural development. Other than these, several other social safety nets are food-based and have an explicit focus on addressing food security and nutritional well-being. Distribution of food grains through the government-controlled Public Distribution System (PDS) has been a key government response to addressing hunger and food insecurity in India. The targeted public distribution system (TPDS) was launched in 1997 with a focus on the poor. In 2013, the Parliament approved India's National Food Security Act (2013) to support food and nutritional security by ensuring access to adequate quantities of quality food at affordable prices enabling people to live a life with dignity. A key initiative following the Act was the distribution of food grains to targeted households at a subsidized rate by revamping the TPDS. The National Nutrition Mission—also known as the POSHAN Abhiyan (Partnerships and Opportunities to Strengthen and Harmonize Actions for Nutrition in India)—was introduced in 2017 as an initiative to integrate all nutrition programs and interventions and include social protection programs that aim to improve the nutritional status of vulnerable population groups.

The three large food-based SSNPs in India include:

- The **Pradhan Mantri Garib Kalyan Anna Yojana (PMGKAY)**, previously called the **Public Distribution System**, through which free/subsidized food grains are provided to over 800 million identified beneficiariesⁱ.
- The **Pradhan Mantri Poshan Shakti Nirman (PM-POSHAN) scheme, earlier called Mid-Day Meal Scheme** that serves hot cooked meals to school-going children (6-14 years of age). The scheme covers around 118 million children across 1.12 million schools in the countryⁱⁱ.
- **Saksham Anganwadi and POSHAN 2.0, formerly called Integrated Child Development Services** which provide supplementary nutrition to children (6 months to 6 years), adolescent girls, and pregnant and lactating women. Services under the scheme have reached about 94.9 million beneficiariesⁱⁱⁱ.

Although these SSNPs have considerably improved people's access to food in the country (mainly comprising cereals such as rice and wheat), gaps exist in optimal nutrition provision. However, most of these programs were originally intended to make the vulnerable population food-secure and were not designed with explicit nutrition goals. As India progressed, many well-formulated nutrition policies and/or strategies focusing on multisector collaboration continued to be developed. However, the integration of nutrition in the social protection sector is relatively recent and has yet to be consistently implemented, providing meaningful opportunities for action in policy and program design. Moving forward there is a need to build more coherent and integrated social safety net programs to maximize nutritional outcomes.



1.2 OPPORTUNITIES FOR LEVERAGING SOCIAL SAFETY NET PLATFORMS FOR IMPROVED NUTRITION

Given the multiple causes and drivers of malnutrition, investing in a systems approach that seeks integration of responses across sectors is crucial for embedding nutrition in social protection programs. The increase in investments in social safety net programs, coupled with a deliberate shift toward greater nutrition sensitivity, creates an expanding array of opportunities. This strategic shift facilitates more effective linkages between health, nutrition and food systems within programs dedicated to assisting the most nutritionally vulnerable populations.

Recognizing this opportunity, Nutrition International conducted an extensive scoping review across 12 Asian countries^{iv}, including India, to evaluate how SSNPs can be better leveraged to improve nutrition outcomes. The findings from this Asia-wide assessment are further substantiated with a targeted consultation in India which further underscores the need to enhance nutrition security through SSNPs.

This policy brief emerges from the findings of the scoping review, deliberations from the consultation and Nutrition International's own experience of over three decades in the nutrition ecosystem. The document provides actionable recommendations for optimizing India's SSNPs to not only safeguard the most vulnerable population but also to ensure that they are able to achieve nutrition security to lead healthier, more resilient lives.

2. Recommendations

The following sections present a detailed, actionable roadmap across five key pillars – **policy, program implementation, evidence generation, nutrition financing, and social and behaviour change communication.**

2.1 POLICIES: ENHANCING NUTRITION – SENSITIVITY IN HIGH BURDEN GEOGRAPHIES

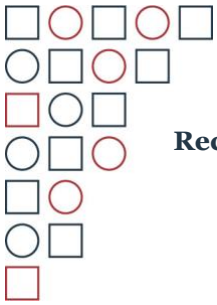
India's SSNPs currently provide coverage based on either beneficiary income or population groups like pregnant women, etc. but do not have a targeted approach in regions with the highest malnutrition burdens. Evidence^v shows that geographies with high levels of malnutrition require focused and customized strategies to achieve better nutrition outcomes.

Key Concerns

- SSNPs are mostly designed for universal implementation and do not account for regional variations in malnutrition prevalence.
- Program convergence is limited with multiple SSNPs operating in silos across different government departments.
- Local governance structures, such as Panchayats, are underutilized in implementing and monitoring SSNPs, despite their ability to influence grassroots outreach.

Panchayati Raj Institutions implementing National Health Mission initiatives

Panchayati Raj Institutions (PRIs) are playing an important role in the implementation of National Rural Health Mission (NRHM) and its subsequent transformation into the National Health Mission (NHM). PRIs, particularly Gram Panchayats, are involved in local health planning under NHM. They work with health departments and district administration to identify community health needs, prioritize interventions, and develop health plans tailored to local requirements. Panchayats also facilitate participatory processes such as Village Health Sanitation and Nutrition Committees (VHSNCs) to engage communities in health planning, monitoring and implementation.



Recommendations:

- 1. Target high-burden geographies with tailored approaches:**

National and state nutrition data should be used to identify regions with high levels of malnutrition. Based on the insights from these datasets, SSNPs should prioritize these regions with tailored nutrition interventions that cater to each area's specific challenges and vulnerabilities. This can be done in addition to the universal coverage for ongoing SSNP's.
- 2. Converge SSNPs for maximum impact:**

The coordination of multiple SSNPs (e.g., PDS, ICDS, PM-POSHAN) is critical in regions with high malnutrition rates. Convergence should be achieved by ensuring multisectoral collaboration among different government departments, changing the approach to view SSNPs not from the lens of specific departments, but from the lens of the population they serve. For example, beneficiaries in high-burden geographies may receive a nutritionally diverse food basket with pulses, millets, and other fortified foods, irrespective of the SSNP platform they access.
- 3. Leverage local governance structures for effective implementation:**

Local bodies, such as Panchayats, should be empowered to implement and monitor SSNPs. By incorporating specific nutrition targets into the responsibilities of local governance, such as tracking child growth or ensuring the distribution of nutritious foods, the reach and impact of SSNPs can be significantly enhanced.
- 4. Make nutritious foods accessible through innovative partnerships**

Along with accessibility and affordability, it is imperative to make nutritious food aspirational to the public. This may be done by exploring innovative ways to attract commercial capital into small-scale nutrition ventures or by seeking public-private partnerships (PPP). Quality control mechanisms by the government combined with the marketing expertise of the private sector can not only expand the consumer base of these products but also position them as aspirational items, appealing both in terms of taste as well as aesthetics.

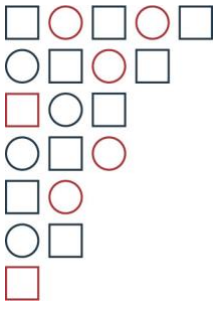
2.2 PROGRAM IMPLEMENTATION: TRANSITIONING FROM FOOD SECURITY TO NUTRITION SECURITY

The traditional food systems and policies in the country were a response to emergencies such as droughts and hunger, which were common phenomena before the 1970s. These policies focused on enhancing supplies and access to staple grains, especially rice and wheat, and have had considerable success in reducing the incidence of hunger in the country^{vi}. In 2013, the National Food Security Act (NFSA) was introduced with a focus on both food and nutrition security.

Despite the focus, food security remained the primary objective with a limited emphasis on nutrition security within the SSNPs. Coupled with this is the rising prevalence of obesity and the persistence of micronutrient deficiencies now comprise a significant share of the “triple burden of malnutrition”^{vii}.

Key Concerns

- While India's SSNPs, particularly the Public Distribution System (PDS) and Integrated Child Development Services (ICDS), have improved access to food, they continue to focus on caloric sufficiency rather than addressing the full spectrum of nutrition security. In recent times, there has been a growing recognition of the importance of incorporating dietary diversity into existing food-based SSNPs. However, the lack of



established mechanisms and frameworks remains a concern, particularly in the food basket under PDS which has predominantly focused on staples.

- Frontline workers, - the auxiliary nurse midwife (ANM), the accredited social health activist (ASHA), and the Anganwadi worker (AWW), also known as triple As, play a critical role in the effective implementation of SSNPs by addressing the multiple underlying drivers of malnutrition. Their services are highly complementary to these programs, particularly in promoting care and feeding practices, enhancing nutrition awareness and knowledge, supporting disease prevention and control, and fostering a healthy environment—all of which are essential for improving nutrition outcomes alongside the availability and access to healthy foods. However, they are - often undertrained in nutrition services, limiting their ability to deliver effective health and nutrition interventions. While all three types of FLWs receive pre-service and in-service training related to preventative aspects of maternal, newborn, and childcare and some aspects of nutrition, they lack adequate, supportive and continuous training when it comes to delivering nutrition services thus limiting their capacities to deliver nutrition services.
- Fair Price Shops (FPS), which traditionally have functioned as the hub for the distribution of food grains at subsidized prices, are not being fully utilized to provide diverse, nutritious food commodities or nutrition-related services.

Recently, the Government has been exploring ways to diversify the services offered by fair-price shops, turning them into multi-service centers, including reimagining them as nutrition hubs.

Recently, in March 2024, the Department of Food and Public Distribution, Government of India signed a Memorandum of Understanding with the Ministry of Skill Development and Entrepreneurship (MSDE) and the Small Industries Development Bank of India (SIDBI) with the objective of transforming fair price shops. Amongst others, the goal is to turn FPSs into nutrition hubs that leverage technology in their operations and also offer a diverse range of nutrient-rich non-PDS commodities to the public, going beyond the distribution of food grains.

Source: [Press Information Bureau, Government of India](#)

Recommendations:

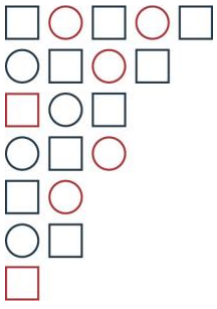
1. Diversify the food basket in SSNPs:

SSNPs must include a wider variety of nutritious foods, such as pulses, legumes, millets, eggs, milk, fruits and vegetables for holistic nutrition. This approach should be tailored to local dietary and cultural preferences and ensure that food security transitions into nutrition security while continuing to incorporate fortified foods in the basket.

Nutrition International carried out a series of analyses (public health and nutrition, economics, platform and political) that aimed to recommend diversified food baskets under SSNPs for the state of Telangana under the project on 'Scaling up Fortified and Diversified Food through SSNPs in India'. The analysis under this study concluded that it is feasible to diversify SSNPs and help reduce the gap in nutrition intake for beneficiaries across different population groups. An incremental increase in budgets would be required to meet the nutrition requirements of the targeted population groups.

However, for diet diversification to be successful, it is critical to align it with local preferences and availability. This, combined with awareness raising and nutrition literacy among beneficiaries, can together meet long-term goals of nutrition security.

Source: [Diversification of food baskets under social safety net programs.](#)



2. Repurpose fair price shops as nutrition hubs:

Around 5.45 lakh fair price shops^{viii} (FPS) are operational across the country, with high footfall making them ideal platforms to offer subsidized nutritious food items like fortified oils, pulses, and dairy products. These FPSs can also serve as multi-service centers, selling essential non-food products related to health, sanitation, and hygiene, such as soaps and menstrual products. Additionally, FPSs can be leveraged for promoting nutrition education by displaying information, education, and communication (IEC) materials, transforming them into hubs for health and nutrition awareness.

3. Strengthen the capacities of frontline workers:

Continuous training for frontline workers is essential for effective nutrition service delivery such as child growth monitoring and promotion, vitamin A supplementation, etc. Building their capacity through ongoing skill development in nutrition counseling, dietary diversity, and health education will improve program outcomes. Additionally, stronger supervisory support and incentivization systems are needed to sustain their engagement.

2.3 EVIDENCE BUILDING: ESTABLISHING A STRONG BASE FOR SSNPs

In India, there is a noticeable absence of substantial evidence regarding the impact of social protection programs^{ix}. SSNPs like ICDS and the Mid-Day Meal (MDM) have been operational in the country for several decades, however there is limited evidence of their direct impact on nutritional outcomes. Most existing program evaluations focus on food provision and enrollment numbers, with insufficient attention to measurable improvements in health or nutrition.

Key Concerns:

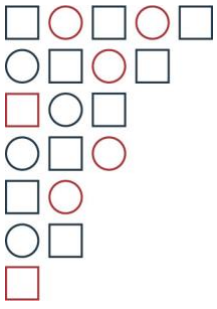
- While there are anecdotal reports of improvements in nutritional status among ICDS beneficiaries and positive outcomes of MDM such as increased school attendance and improved cognitive performance, rigorous studies that quantitatively measure these changes and attribute them specifically to ICDS or MDM interventions are limited or lacking.
- Clear nutrition indicators, such as stunting reduction, micronutrient uptake, dietary diversity, exclusive breastfeeding rates, etc. are often not integrated into program evaluations.
- The absence of robust, long-term studies makes it difficult to understand the true impact of nutrition interventions within SSNPs while also hampering evidence-based policy decisions.

Recommendations:

1. Conduct rigorous evaluations of the impact of SSNPs on nutrition:

Quantitative evaluations and assessment studies, including randomized control trials (RCTs) and longitudinal studies, should be undertaken to assess the impact of SSNPs on nutritional outcomes. This will enable policymakers to determine the effectiveness of interventions, such as the introduction of fortified foods or diversified meal provision under ICDS and MDM.

2. Define measurable nutrition indicators for SSNPs:



The monitoring framework of SSNPs should be reviewed and revised to incorporate clear indicators —such as nutrient deficiencies, stunting, wasting, etc. In addition, intermediate indicators such as exclusive breastfeeding rates, knowledge of recommended child feeding and hygiene practices, and attendance at maternal and child health (MCH) services, may also be included to enable a more robust evaluation. This will ensure that programs are evaluated not only on food distribution and number of beneficiaries but also on their ability to improve nutritional outcomes over time.

3. Develop integrated monitoring and data collection systems:

There is a need to establish monitoring systems that enable the collection and analysis of data across intersectoral programs to understand the various drivers of malnutrition and also assess changes in nutritional status, quality of implementation, access to nutritious diversified food, health education, and impact of behaviour change communication.

2.4 FINANCING: SECURING RESOURCES FOR NUTRITION INTEGRATION

Integrating nutrition-sensitive components into SSNPs requires financial prioritization. However, there are limited dedicated financing mechanisms for nutrition within these programs. Aligning budgetary resources with nutrition goals and outcomes is therefore crucial for improving their effectiveness.

Key Concerns:

- In India, current financing models for SSNPs do not prioritize nutrition outcomes, limiting their capacity to deliver comprehensive nutrition interventions.
- There is a lack of dedicated funds or financial instruments specifically aimed at improving nutrition within SSNPs.
- Budgetary misalignments often delay the release of funds^x, affecting the timely procurement of food and services for beneficiaries. For example, there are variations in the finance and unit costs of nutrition service delivery across different locations and states and some funds may be underutilized or unspent.

Recommendations:

1. Create dedicated nutrition funds within SSNPs:

A National Nutrition Fund may be established to ensure that a portion of the overall SSNP budget is specifically allocated for nutrition-sensitive activities. This fund could pool resources from government budgets, international donors, and public-private partnerships, ensuring consistent financing for nutrition goals.

2. Align budget allocations with nutrition outcomes:

Budget allocations for SSNPs should be directly tied to measurable nutrition outcomes, such as reducing anaemia or stunting. This will incentivize ministries to prioritize nutrition-sensitive interventions and ensure that financing is used effectively to meet nutrition goals.

3. Advocate for timely and adequate fund releases:

To improve program delivery, budgetary mechanisms should ensure that funds for SSNPs are released in a timely manner, aligned with the procurement of commodities. Additionally, increasing the unit cost of providing supplementary nutrition will enable programs to offer a more diverse and nutritious food basket.



2.5 SOCIAL AND BEHAVIOUR CHANGE COMMUNICATION FOR NUTRITION ACTION

Effective social and behaviour change communication (SBCC) is crucial for promoting nutrition-sensitive behaviours and practices. In recent years, the Government of India has shifted from awareness generation to a more comprehensive approach centered on sustainable behaviour change through programs like POSHAN Abhiyaan and the ‘Eat Right India’ campaign.

Enabling behavior change through Food Safety and Standard Authority’s Eat Right India Program

To promote behavior change, the program has employed theories from behavioral economics and developed and widely used a range of behavior change communication material – videos featuring celebrities, toolkits, e-commerce, an online quiz, and so on, reaching them at various touch points – homes, schools, workplaces, institutions. All messages were disseminated countrywide through the Swastha Bharat Yatra, one of the largest cyclothons in the world. During the 104-day cyclothon, 21,629 volunteer cyclists collectively covered 2,156 places and 20,233 kms with 1 million participants joining hands to reach 25 million people with Eat Right India messages.

Source: [Eat Right India: A Case Study Attempting to Transform India’s Food Ecosystem to Advance Public Health and Improve Lives.](#)

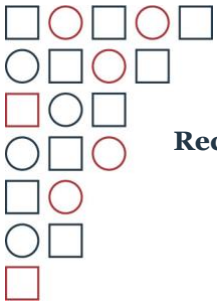
Key Concerns:

- While programs such as POSHAN Abhiyaan have adopted a convergence-based approach leveraging the existing campaigns of other key government programs such as the Swachh Bharat Abhiyaan, WASH, Mother’s Absolute Affection (MAA), Beti Padhao Beti Bachao, etc.^[3], most campaigns are centered around the issue of undernutrition and do not touch upon issues of overnutrition, obesity leaving significant scope to address malnutrition comprehensively.
- Locally produced, nutritious foods often lack market visibility compared to branded products, which limits their appeal to the population. Consumers often tend to equate high-quality with prominent brands in comparison to products that are manufactured locally and may not have the requisite resources for investing in a strong marketing strategy.
- While community platforms like self-help groups (SHGs) are active in select pockets, they are not fully utilized for delivering nutrition-related services (including SBCC) and addressing myths and misconceptions about diets.

Women collectives and their role in health and nutrition

The Deendayal Antyodaya Yojana – National Rural Livelihood Mission (DAY-NRLM), India’s key poverty alleviation program recognizes the importance of SHGs and the role they play in nutrition. Under the DAY-NRLN program, the FNHW interventions led by women’s collectives are focused on behavior change within communities to adopt practices for better health and nutrition outcomes, demand generation and linkages with services and entitlements. SHGs and their federations play a key role in engaging communities by discussing FNHW topics in their regular meetings and supporting mobilization for public nutrition and health services.

Source: [How Women Collectives are Spearheading Health and Nutrition Initiatives, UNICEF May 2023](#)



Recommendations:

- 1. Comprehensive Campaigns on Nutrition**

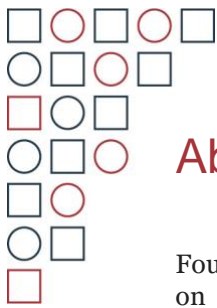
SBCC campaigns should cover the full spectrum of malnutrition, addressing both overnutrition and undernutrition. These interventions should be strongly grounded in **formative research and testing**, with active participation from communities and users to ensure relevance and effectiveness. Intersectoral and interdisciplinary convergence for nutrition education needs to be strengthened through a well-formed, evidence-based communication strategy. For example, integrating nutrition messaging into non-communicable disease (NCD) programs and promoting dietary diversity can help build healthier eating habits across different demographic groups. Additionally, SBCC initiatives should incorporate evaluations to measure their impact on knowledge and changes in key nutrition-related practices.
- 2. Leveraging the power of self-help groups to deliver nutrition SBCC**

SHGs should be trained and empowered to disseminate nutrition messages within their communities. These groups have strong local influence and can act as effective conduits for promoting healthy behaviors, addressing myths about nutrition, and improving community-wide dietary practices.

3. Way Forward

India has demonstrated a high level of political will to reduce poverty and improve the nutrition of vulnerable groups. However, India’s fight against malnutrition requires a strategic shift in how SSNPs are designed and implemented. The five pillars of recommendations presented in this brief—**policy reform, program implementation, evidence building, financing, and SBCC**—are critical to transforming these programs from being utilized as food security initiatives into comprehensive platforms for nutrition security as well. This approach is crucial for addressing both the immediate and long-term determinants of malnutrition.

By embedding nutrition at the heart of SSNPs, India has the opportunity to create lasting change, improving health outcomes for millions of vulnerable individuals while building a stronger, more resilient population for the future.



About Nutrition International

Founded in 1992, Nutrition International is a global organization. For 30 years, we have focused on delivering low-cost, high-impact, nutrition interventions to people in need. Working alongside governments as an expert ally, we combine deep technical expertise with a flexible approach, increasing impact without increasing complexity or cost. In more than 60 countries, primarily in Asia and Africa, Nutrition International nourishes people to nourish life.

Contact Us:

For more information, please visit www.NutritionIntl.org or contact Mini Varghese, Country Director-India at MVarghese@NutritionIntl.org

REFERENCES

- ⁱMinistry of Consumer Affairs, Food & Public Distribution, Press Release 21 JUL 2023 by PIB Delhi. [https://pib.gov.in/PressReleasePage.aspx?PRID=1941387#:~:text=As%20on%2030th%20June,Shops%20\(FPSs\)%20in%20India.](https://pib.gov.in/PressReleasePage.aspx?PRID=1941387#:~:text=As%20on%2030th%20June,Shops%20(FPSs)%20in%20India.)
- ⁱⁱ Pradhan Mantri Poshan Shakti Nirman (PM-POSHAN) scheme, Ministry of Education, GoI website: <https://pmposhan.education.gov.in>
- ⁱⁱⁱRashtriya Poshan Maah, Press release, PIB. September 15, 2022. <https://static.pib.gov.in/WriteReadData/specificdocs/documents/2022/sep/doc2022915104101.pdf>
- ^{iv} Making Social Protection work for improved nutrition: A scoping review of state and opportunities in the Asia Region. January 2024. Technical report. Krishna Belbase, Richard Morgan, Surabhi Mittal, Reem Masri, Sarah Zahr. (2024). <https://www.nutritionintl.org/learning-resource/making-social-protection-work-for-improved-nutrition-asia/>
- ^v Making Social Protection work for improved nutrition: A scoping review of state and opportunities in the Asia Region. January 2024. Technical report. Krishna Belbase, Richard Morgan, Surabhi Mittal, Reem Masri, Sarah Zahr. (2024). <https://www.nutritionintl.org/learning-resource/making-social-protection-work-for-improved-nutrition-asia/>
- ^{vi} Prabhu Pingali; Anaka Aiyar; Mathew Abraham and Andaleeb Rahman, (2019), [Transforming Food Systems for a Rising India](#), Palgrave Macmillan.
- ^{vii} J.V. Meenakshi, 2016. "Trends And Patterns In The Triple Burden Of Malnutrition In India," Working papers 256, Centre for Development Economics, Delhi School of Economics.
- ^{viii} Ministry of Consumer Affairs, Food & Public Distribution, Press Release 21 JUL 2023 by PIB Delhi. [https://pib.gov.in/PressReleasePage.aspx?PRID=1941387#:~:text=As%20on%2030th%20June,Shops%20\(FPSs\)%20in%20India.](https://pib.gov.in/PressReleasePage.aspx?PRID=1941387#:~:text=As%20on%2030th%20June,Shops%20(FPSs)%20in%20India.)
- ^{ix} Dreze, J., & Khera, R. (2017). Understanding leakages in the Public Distribution System. Economic and Political Weekly, 52(41), 25-27.
- ^{xxx} Acharya, Nilachala & Bose, Mampi. (2020). Delay in Fund Flow: Consequences, Causes and Remedies. In book: Fiscal Governance Reforms at District Level for Improving Fund Flow and Utilisation in Development Schemes. Publisher: Centre for Budget and Governance Accountability and CBGA and Tata Trusts. <https://www.cbgaindia.org/wp-content/uploads/2020/01/Delay-in-Fund-Flow-in-Social-Sector-Policy-Brief.pdf>