BURRYING NUTRITION MYTHS AND ACTIVATING CHOICES FOR OUR CHILDREN’S DEVELOPMENT

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Child undernutrition will continue to be a major development challenge in the 21st century. Accelerating its reduction will require concerted action from various angles ranging from international development assistance to community-based interventions; but efforts to mobilize action at the national and international levels are often thwarted by lack of fact-based information. This lack of information and poor understanding of existing information by policymakers has resulted in several myths about child nutrition in developing countries.

Myths are seductive but they crowd out facts. When the facts make a compelling case for action, they tend to be buried by myths. In this paper I will attempt to bury six myths that have made us complacent about undernutrition and stifle our collective appetite for action—action to eliminate undernutrition as a fate awaiting future generations. However, is achieving such a goal by the year 2020 truly possible? I hope to convince you, the reader, that we are closer than you may think.

It is clear that undernutrition is not solely due to a lack of food. If, for some monstrous reason one wanted to make an infant undernourished, depriving it of food would certainly be effective. The effects of depriving the infant of care from its mother, clean water, good sanitary facilities, and effective health care would be equally malignant. Food, care, and health—this, then, is the holy trinity of good nutrition.

Unfortunately the world is adept at creating undernourished infants. Globally we estimate about 150-160 million of them. The good news is that their numbers are decreasing steadily. The bad news is that this may be Myth 1. What about the global estimates that say the numbers are going down? Well, they may be right. But we cannot be so sure. For a large number of countries, there are no decent data and we have to rely on guesswork. Looking only at countries for which there are good trend data, a decidedly less rosy picture emerges. Undernutrition is going down in only 31 out of the 58 developing countries that have good data over time. The remaining 27 countries are witness to growing numbers of wasted and stunted children. Overall, for these 58 countries, the number of undernourished children has dropped from 137 million in the 1980s to 131 million in the 1990s. At that rate, goals for halving the number of undernourished children will only be accomplished by year 2094.

So, at best, the numbers are not going down fast enough. They are even increasing in a large number of countries, particularly in urban areas. So what? If one needs to answer that question at all, the most obvious response is surely that the humanitarian costs are obscene and unnecessary. Moreover, the rights of a billion family members to tend to their infants’ most basic needs are being violated day after day.

Surely good nutrition is about more than this. Without it, other good things cannot happen. Good nutrition is the bedrock upon which the present generation secures a future for itself and for the next generation. Myth 2, then, is the claim that “nutrition has little to do with my work in eradicating poverty and advancing economic growth”.

In response, let me highlight recent estimates that suggest that the economic costs of undernutrition may exceed 3.5% of GDP year in, year out [1]. How big is this loss? After 10 years in the absence of undernutrition, GDP would be 41% higher than it would have been. After 20 years it would double. Over the 1990s these GDP losses are comparable to the losses sustained by some Asian economies due to the financial crisis of a few years ago.

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We also know that babies that are better nourished in the mother’s womb are more likely to survive birth and beyond, reducing one strong incentive for parents to want larger families. It is now established that underweight babies will grow into adults more prone to diabetes, coronary heart disease, and some forms of cancer [2]. There is research to show that undernutrition hastens the progress of the AIDS virus once infection has occurred and better nutrition possibly inhibits transmission of the virus from mother to baby [3]. Undernourished children enter school later and are less able to learn once they get there. Education initiatives such as those proposed for Africa at the Genoa summit will likely squander millions of dollars if good nutrition is not seen as the first step on the road to a secure livelihood [4]. Thus eliminating child undernutrition may be one of the most fundamental economic activities for future economic growth.

So, we want better nutrition and for many reasons. However, income growth—fuelled in the poorest countries by agricultural productivity gains [5] will take care of things on its own? This is Myth 3. Income growth is crucial, but not enough on its own. Simulations based on survey data on what income growth does to child undernutrition shatters this myth[6]. Of the 10 countries in the sample, only in Morocco will have robust growth of 5% per year for the next 20 years halve undernutrition. Such growth rates are fading gleams in the eyes of those worried about a global recession.

Even if rapid income growth rates were possible, the nutritional status of the majority of today’s children will be untouched by it. If so, why don’t parents in developing countries care enough to invest more in their children’s nutrition? This is Myth 4. Of course they care, but such an investment is a tall order for people earning less than one dollar a day. They are already spending 70% or so of their money on food. One may ask: why can’t they borrow for their children’s nutrition? Can you imagine what they would say to a lender? “Could you lend me enough money to purchase a decent diet, child care, and water, sanitation and health care for my children for the next five years? In 20-30 years they’ll earn more than they would without these fundamental things and be able to pay off the debt. Oh, and by the way, I have no collateral.” This is a classic market failure and a strong justification for public sector investment in child nutrition [7].

So public sector involvement is needed, but if the nutrition experts knew what to do, we would not be in this situation. This is Myth 5. We know what to do to end undernutrition. Of course there are some important gaps in knowledge—programs for adolescent girls, for example—and some technological options that we need to explore, such as conventional and transgenic breeding for micronutrient-dense cereals. Of course the context matters—good governance, the high status of women, control of HIV/AIDS and an absence of conflict are of obvious importance. Yet we have an extensive menu of cost-effective nutrition interventions to order from. It includes community-led programs to strengthen parents’ behaviors about the feeding, caring and health of their infants, and programs to monitor child growth, distribute micronutrient capsules, fortify foods such as salt and dry milk; improve access to clean water; and improve the baby-friendliness of health clinics and hospitals [8].

Crucially, the missing items on the menu are financial resources and the capacity to spend them wisely. Capacity is not simply about what people know. It is also about whether they have incentives to use their knowledge and to add to it. If salaries are low, accountability mechanisms absent, and little priority is given to problem solving, capacity to spend effectively will be weak. The nutrition community has neglected capacity in this broadest sense. We need to spend more effort on assessing capacity, understanding when it is the key constraint to action, and developing it in ways that further community goals.

Inadequate resources, however, are a large part of the reason why malnutrition persists. Is it incredibly expensive to eradicate
Third World undernutrition? This is Myth 6. Estimates suggest that it would cost one to 6% of current public expenditure on health to get every undernourished child into a community nutrition program [7]. Are these numbers large or small? There are certainly difficulties in achieving these increases. However, there are also opportunities to do so. What can the more developed countries do? If they would only choose to focus Overseas Development Assistance more on the least developed countries, this would be good for nutrition. Developing countries have opportunities too. For example, public health expenditures are often skewed away from the poor.

The nutrition community does not get off the hook. We must recognize and exploit resource opportunities within the new financial arrangements. For example, we should be thinking hard about how to build nutrition concerns into the poverty reduction strategy processes currently being prepared by over 20 of the poorest countries.

How, then, do we generate increased pressure for nutrition-sensitive resource allocation? Two approaches are important: get deeper into the hothouse of policymaking but also get further away from it.

Getting in deeper means finding out why policymakers are not asked, "Are the children growing?" as opposed to "Is the economy growing?" Why do some countries decide to spend one percent of their GNP on development assistance and some one tenth of that? Why do some provinces decide to spend 20 times more on their undernourished children than others do? The research community has been too timid in addressing such questions. It will not be easy or comfortable but such efforts will help to hold decision-makers accountable for their choices and will lead to improved aid and budget choices.

At the same time getting further away from the hothouse means that we need to engage the public more directly. Systematically interacting with the general public on our work might surprise us. We hear about research that finds that Americans think they spend 15 times more on foreign aid than they actually do and that those who want to spend less on foreign aid are far more vocal than the majority who want to spend more. We need more work along these lines to bridge the reality gap between the public, the media and the policymakers.

The civil society activism witnessed at various international conferences and meetings over the past three years has surprised many. The street violence has become the story, giving politicians an easy ride and the media an easy story. We need to eschew the violence and retain the energy, sustaining it and channeling it with solid empirical evidence—evidence that explodes myths and liberates action.

Evidence that tells us that undernutrition is not decreasing as fast as we think it is; that good nutrition underpins development; that income growth alone will not deal with undernutrition quickly enough; that private markets fail parents who want to invest in their kids’ nutrition; that we know how to eliminate undernutrition; that the resources to deal a severe blow to undernutrition are relatively small; and that there are plenty of opportunities to find these resources. To get the resources we need to become more activist—with the policymakers and with the public—all the while backed by rigorous research findings.

Unless consolidated action is taken towards elimination of child undernutrition, the loss towards human capital and economic development could be very high. We need to do much better to address undernutrition in the next few years to come. We can if we choose to.
REFERENCES


