

Nutrition:

Getting to Grips With a Neglected Issue

In this sheet we look at the consequences of neglecting nutrition. We also look at the links between nutrition and the other Millennium Development Goals (MDGs), and why investing in nutrition now will provide an excellent return on that investment.

Nutrition: the consequences of a 'forgotten MDG'

The second target of MDG1 commits world leaders to halve the proportion of people who suffer from hunger by 2015. This aims to address more than just the sensations of hunger (e.g. weakness & discomfort) that results from a lack of food, but to address the different manifestations and consequences of prolonged involuntary access to food, such as undernutrition. However, there has been widespread failure to address this hunger aspect of MDG1. As a result, the progress in nutrition has been very slow and tiny sums are being spent on preventing undernutrition. Globally, nutrition funding represents less than 0.3% of total official development assistance (ODA).

Less than a quarter of developing countries are on-track for achieving the hunger target of MDG1 by 2015, and it is unlikely the global MDG1 hunger target will be achieved. In fact, the number of undernourished people in developing countries has increased from 824 million in 1990 to 925 million in 2010.

The human consequences of this failure to address undernutrition are enormous, and they are particularly severe for children. Undernutrition is the single largest killer of children globally, responsible for more than one third (35%) of all child deaths. It is estimated that 165 million children under 5 years of age are **stunted**, 10% of all children globally (55 million) are **wasted** and 112 million children are **underweight** - 28% of whom are in eastern Africa and 33% in south-central Asia.

The economic costs are also high. Children who experience poor nutrition in the **first 1000 days** (from conception to 2 years) have a higher risk of developing lifelong physical and mental impairments, which have negative consequences for their education, employment and income level. This reduces their ability to make a full contribution to the social and economic development of their households and communities. This can keep families, communities and countries locked in a cycle of poor health and poverty. Undernutrition causes a huge economic drain due to lost

productivity, which translate into a loss of 10% of lifetime earnings and up to 3% of Gross Domestic Product (GDP) in some countries.

Malnutrition... undernutrition... underweight... aren't they all the same thing?

The terms malnutrition and undernutrition are often used interchangeably, but they are in fact different. [See *Figure 1. Malnutrition by type*].

Malnutrition

Malnutrition is a broad term that refers to poor nutritional status caused by nutritional deficiency or excess (undernutrition or overnutrition).

Undernutrition

Undernutrition is a form of malnutrition. It occurs due to poor diet. Meals may be lacking in quantity, nutrient, protein and calorie density, and/or eaten infrequently, which is subsequently not adequate for growth and maintenance. Undernutrition can also occur when a person is unable to fully utilize the food they eat due to illness (e.g. diarrhoea).

There are four main indicators of undernutrition:

Stunting (chronic malnutrition)

Stunting is a reduced growth rate in human development and reflects low height-for-age. Stunting is the collective effect of long-term deficits in food intake, poor caring practices and/or illness. Stunting is irreversible.

Wasting (acute malnutrition)

Wasting reflects low weight-for-height. Wasting occurs due to a recent and severe shock that has led to substantial weight loss. This is usually the result of starvation (e.g. floods or crop failures) and/or disease. Wasting is reversible, given the right treatment.

Underweight

Underweight reflects low weight-for-age, and can be the result of chronic or acute conditions.

Micronutrient deficiencies or "hidden hunger"

Micronutrient deficiency is often a hidden problem, affecting people in both developing and developed countries. People may have an adequate supply of energy from the food they eat, but the nutritional value is insufficient to meet their needs for growth and

development. For example, vitamin A deficiency (VAD) can cause blindness, and increase the risk and severity of infectious disease and death.

Undernutrition and poverty

Undernutrition is a pervasive but hidden problem, mainly affecting the poorest families. It is a manifestation, cause and consequence of poverty.

- 80% of all cases of child undernutrition occur in just 20 countries (the majority in Africa or Asia).
- 90% of the 165 million children under the age of five who are stunted reside in Africa and Asia.
- Stunting levels are almost three times higher among the poorest households compared with the better off.

Undernutrition and the MDGs

The progress of the MDGs has been slower than desired. The global development community now recognise that undernutrition has been a key factor in the slow gains.

E.g. MDG 6 – Combat HIV/AIDS, malaria and other diseases

Undernutrition has a deadly synergy with disease: infections result in decreased dietary intake and reduces the body's ability to absorb the nutrients, leading to undernutrition, which itself weakens the immune system, increasing susceptibility to infections and illness, thus increasing the likelihood of repeat infections. Consequently, undernutrition magnifies the impact of diseases such as HIV, TB and malaria.

- Undernutrition increases the risk of developing active TB, and active TB compounds the severity of undernutrition. TB patients who are suffering from undernutrition are twice as likely to die during treatment.
- People living with HIV require nutritious food to increase the effectiveness of their antiretroviral (ARVs), manage the side effects, and maintain a healthy immune system that resists opportunistic infections. Undernutrition can trigger the progression from HIV to AIDS.
- Undernutrition reduces malaria survival rates.

It will not be possible to meet the MDGs without proactively dealing with undernutrition; it is a foundation for their attainment.

Effective solutions are well known

Effective interventions for combatting undernutrition are well known. In 2008, the Lancet identified 13 **nutrition specific interventions**, addressing the *immediate* causes of undernutrition, which would yield significant results if

implemented. These specific interventions promote practices to improve nutrition (e.g. breastfeeding), reduce deficiencies in essential micronutrients in high-risk populations (e.g. vitamin A supplements), and prevent and treat moderately malnourished and acutely malnourished children.

Nutrition specific interventions, if scaled up properly, could reduce child deaths by 25% and stunting by one third. In addition, **nutrition sensitive interventions** are needed to make up the rest. Nutrition sensitive interventions address the *underlying* causes of undernutrition, which are embedded in the household and community level context. These include improving food security, the status of women, childcare practices and access to water and sanitation.

Value for money

Investing in nutrition is tremendous value for money. According to expert economists at the Copenhagen Consensus, nutrition specific interventions could deliver the best value for money of all development interventions. For example, if 13 proven nutrition specific interventions were delivered at scale, they could reduce stunting by one third, at a benefit:cost ratio of 16:1. The human returns are also high. The World Bank estimated the human return on investment would be over 1 million child deaths prevented, 30 million fewer stunted children under the age of five years and halving the prevalence of severely wasted children.

Hunger Summit – June 2013

In June the Department for International Development (DFID) will be hosting a Hunger Summit to coincide with the G8 conference, where we hope a number of countries and foundations will announce new financial commitments to support nutrition action plans in high-burden countries.

RESULTS will be encouraging the government to put undernutrition at the top of the global agenda, especially while Britain holds the Presidency of the G8, and to use this platform to ensure the largest possible pledges for new investments in nutrition.

RESULTS will be making the case that economic investment now will pay dividends for economic growth in the future. In the lead up to the Hunger Summit we will be asking you to raise the profile of nutrition with decision-makers, MPs and the media and help ensure nutrition is a priority for DFID. Your advocacy and your fundraising efforts through *Live Below The Line* will play a key role in this.