



The global evidence-base for what different sectors can do to contribute to undernutrition

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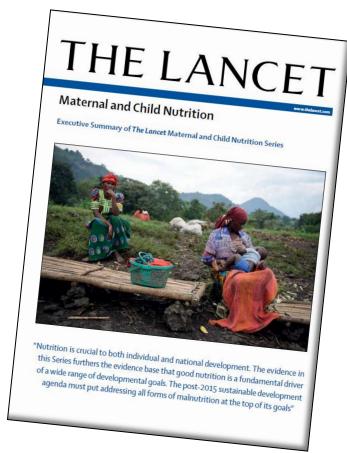
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Lancet 2013 - Nutrition: A Massive Unfinished Agenda

- ➤ 165M children stunted (1 in 5 children)
- Malnutrition is responsible for 45% of < 5 deaths (3.1M)
- Micronutrient deficiencies continue to be widespread, esp. in mothers and children
- Rapidly increasing overweight/obesity



2013 Series Executive Summary



India's Stubborn Burden of Malnutrition

Children

- 48% children < 5 y are stunted (61M)
- India hosts ~30% of the world's stunted children
- 20% are wasted
- Has the highest number of LBW babies ~7.4 M/y
- 70% children anemic



Mothers

- 33% Underweight (low BMI)
- Anemia: ~56%
- Overweight/obese: 15%

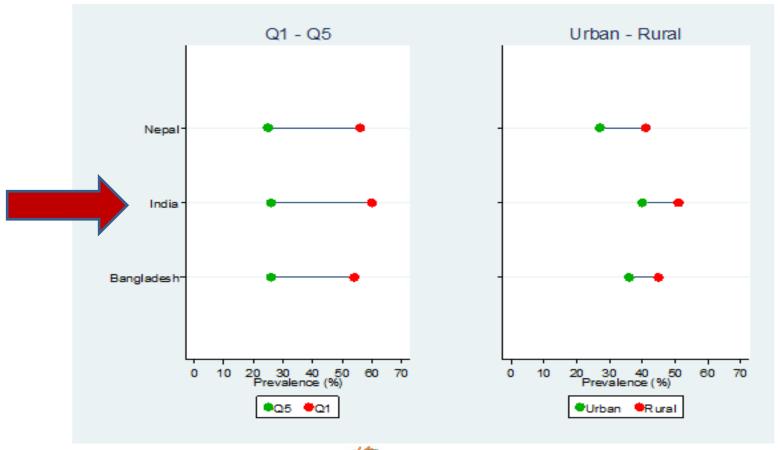


India: Large Disparities

Stunting

By Wealth Quintile

By area of residence



Source: International Center for Equity in Health (www.equidade.org), 2012/13



What to Do: Scale-up Nutrition-Specific Interventions

Optimal maternal nutrition during pregnancy

- Maternal multiple micronutrient supplements to all
- Calcium supplementation to mothers at-risk of low intake³
- Maternal balanced energy protein supplements as needed
- Universal salt iodization

Infant and young child feeding

- Promotion of early, exclusive breastfeeding for 6 months; continued breastfeeding until 24 months
- Appropriate complementary feeding education in food secure populations and additional complementary food supplements in food insecure populations

Micronutrient supplementation in children at risk

- Vitamin A supplementation between 6-59 months age
- Preventive zinc supplements between 12-59 months of age

Management of acute malnutrition

- Supplementary feeding for moderate acute malnutrition
- Management of severe acute malnutrition



34 Countries Account for 90% of Global Burden of Malnutrition

Scaling up 10 Afghanistan nutrition-specific Pakistan Bangladesh Egypt interventions to Myanmar 90% coverage in India Mali Niger **Philippines** Sudan Yemen these countries Ethiopia Ghana would reduce Uganda Nigeria Kenya Cameroon Indonesia Rwanda Tanzania stunting by 20% DR Congo Madagascar Angola^a Malawi Zambia Mozambique South Africa High burden countries Other countries



We need complementary actions:

- nutrition-sensitive programs and policies from a variety of sectors
- an enabling environment for nutrition
 to help accelerate progress in improving nutrition

What Does Nutrition-Sensitive Mean?

- ✓ Address critical underlying determinants of undernutrition: poverty; food insecurity; women's low social status, education, empowerment; poor care and feeding practices; lack of access to health, water, sanitation
- ✓ Include nutrition goals and nutrition actions and interventions
- ✓ Can be leveraged to serve as delivery platforms for scale-up of nutrition-specific interventions



Examples of Potentially Nutrition-Sensitive Sectors



Social Protection



Agriculture



Water and Sanitation



Health



Gender

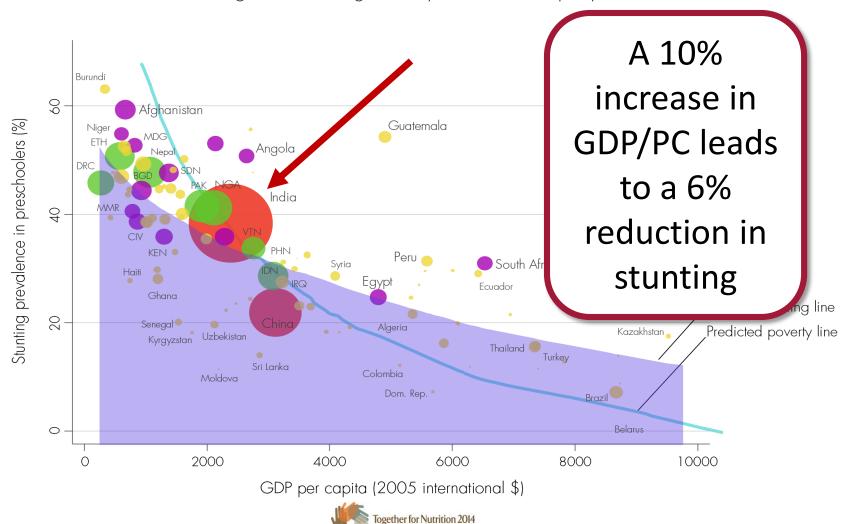


WHAT ARE THE MAIN PATHWAYS OF IMPACT OF NUTRITION-SENSITIVE PROGRAMS ON NUTRITION?



Income Growth Can Improve Nutrition But Other Inputs Are necessary

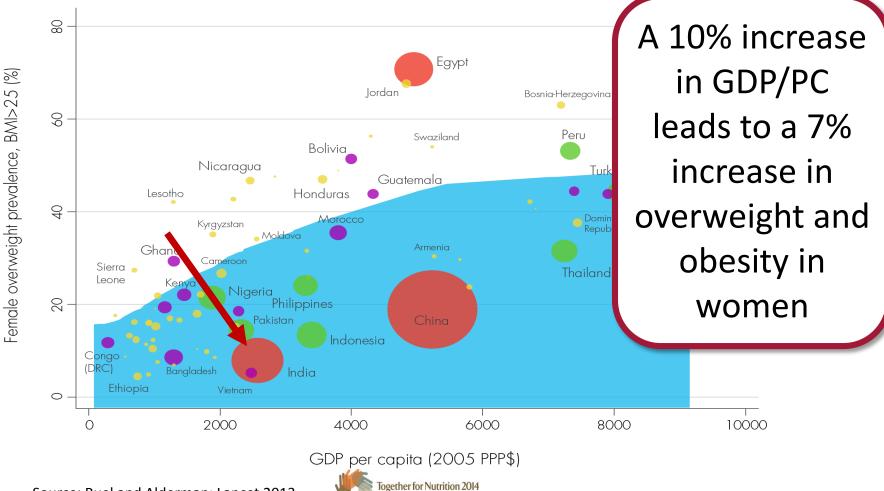
Prevalence of stunting in children aged 0-5 years and GDP per person



Source: Ruel and Alderman; Lancet 2013

Income Growth Can Also Have Unintended Consequences on Risks of Overweight and Obesity

Prevalence of women overweight or obese (BMI > 25) and GDP per person, for low-income and middle-income countries



Source: Ruel and Alderman; Lancet 2013

Women's Empowerment is Critical for Improving Maternal and Child Nutrition

Women's empowerment is associated with better use of resources and positive practices that foster child health and nutrition and household food security





Positive impacts of well-targeted and designed cash transfers and agricultural programs on measures of women's empowerment and maternal and child nutrition

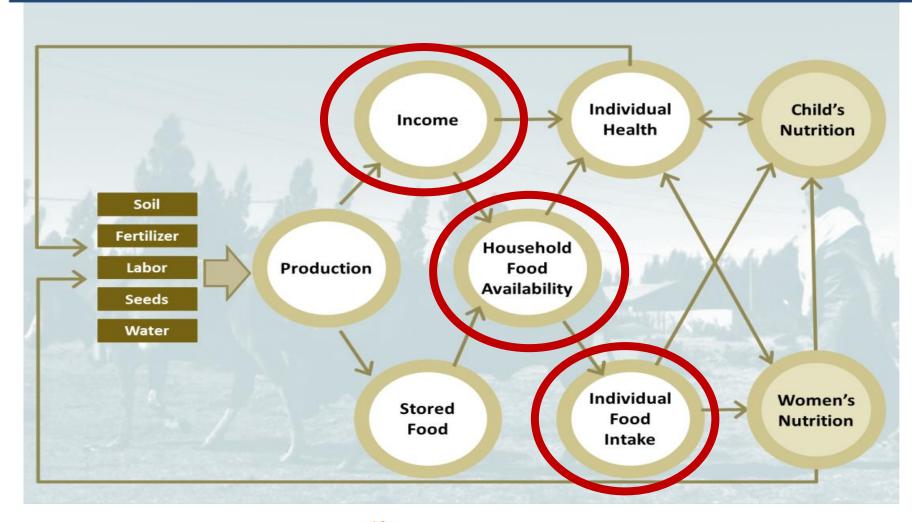


AGRICULTURE



Pathways of Impact of Agriculture

Income; Food Security; Dietary Intake



Source: Sundberg and Birx; BMGF Learning Session; January 2014



Women At the Center of Ag-Nutrition Linkages

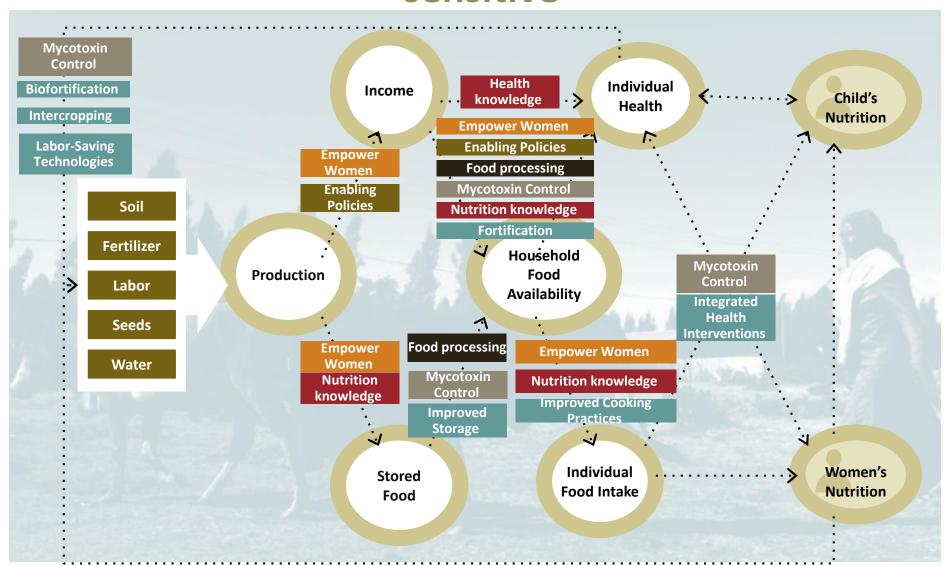
The critical role of women's empowerment, time, health, nutrition



Source: Sundberg and Birx; BMGF Learning Session; January 2014



Making Agriculture More Gender- and Nutritionsensitive



Source: Sundberg and Birx;

BMGF Learning Session; January 2014



SOCIAL SAFETY NETS

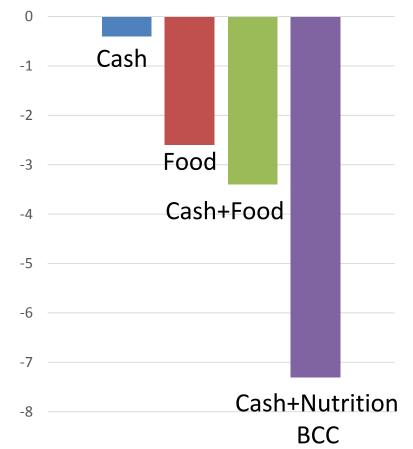


Social Safety Nets

- Provide transfers to a billion poor people worldwide
- Often well-targeted, highcoverage of poor
- Impacts on poverty, food security, women's empowerment, use of services
- Limited impact on nutrition so far

Bangladesh WFP program

(Stunting reductions (pp) compared to control)

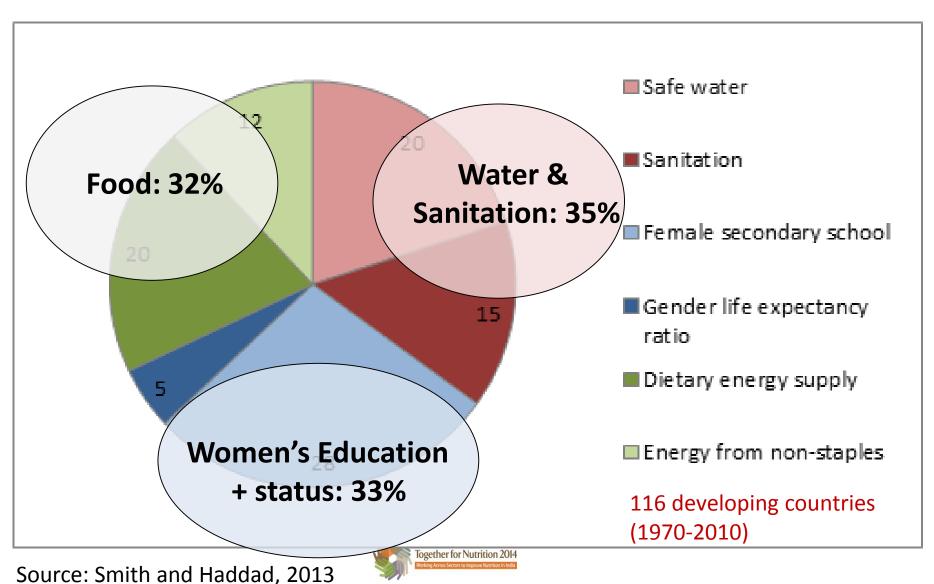




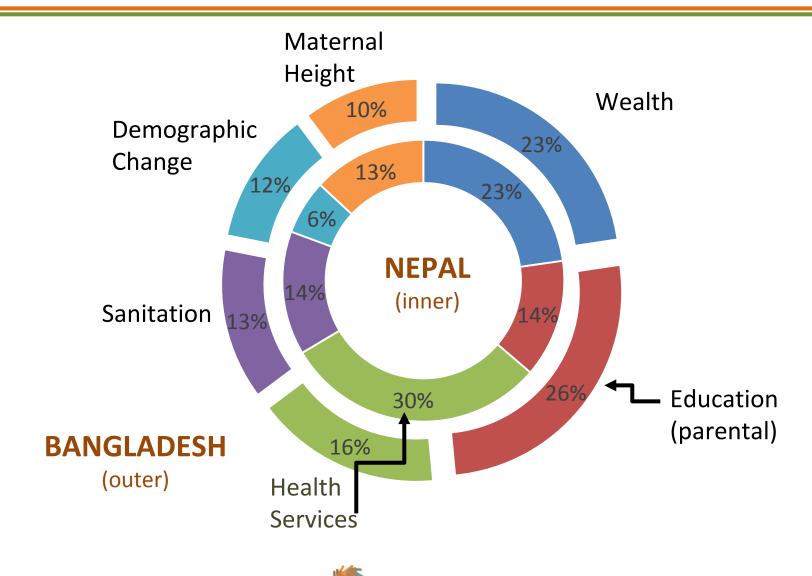
WHY DO WE NEED MULTIPLE SECTORS TO IMPROVE NUTRITION?



Contribution of Different Sectors to Improving Nutrition Globally



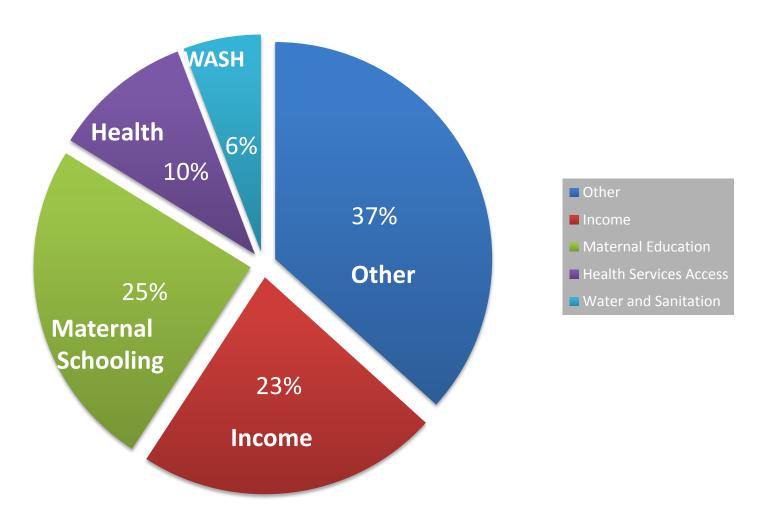
Bangladesh/Nepal: Drivers of Stunting Reductions (1997-2011)



Together for Nutrition 2014

Source: Headey et al. 2014

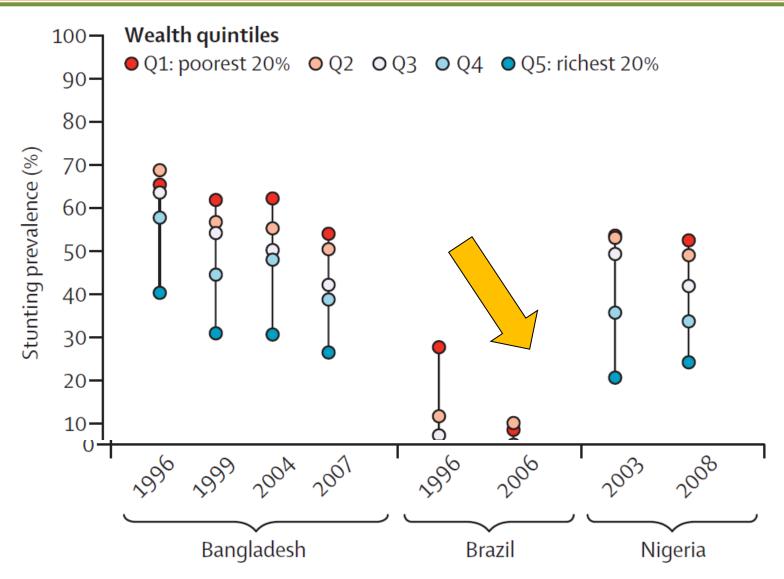
Brazil: Drivers of Reductions in Stunting over 3 Decades (1976-2006) – from 37% to 7%







Need to Reduce Inequalities



Source: Lancet Series; Black et al. 2013

Conclusions

- Nutrition is a multi-faceted, multi-causal problem that requires multi-sectoral solutions
- Scaling-up nutrition-specific interventions is necessary but not sufficient
- To achieve greater and faster improvements in nutrition, we need to leverage multiple sectors and make them more nutrition- and gender-sensitive
- Need to reduce inequalities better targeting and coverage of the por – focus on all their basic needs
- Focus on PREVENTION girls throughout the lifecycle, children during first 2 y)

