

# Tackling Undernutrition in Fragile Places

10 April 2012

## Context

Undernutrition kills and irreversibly harms children. Nearly 3 million children still die annually because of undernutrition, accounting for about 7,500 deaths daily. This briefing has been taken from the World Vision UK *'The Best Start: Global Evidence for Scaling up Nutrition Interventions'*, and outlines World Vision's concerns regarding undernutrition in fragile contexts, highlighting causes and effects, global responses, the UK's current policy position, and specific policy recommendations.

## Key Points

- Every year 7.6 million children die before the age of 5 from preventable illnesses, with about 1/3 of these deaths attributed to undernutrition.
- The recent famine in the Horn of Africa highlights the extreme vulnerability of mothers and children living in fragile and conflict affected contexts. In areas of Somalia, chronic conflict and poor governance exacerbated an already precarious situation and halted humanitarian aid. Levels of child mortality in some areas were 7 times above emergency threshold cut offs.
- The World Bank estimates that malnutrition in high burden countries can lower GDP by as much as 2-3%.

## World Vision UK's Calls on the UK Government:

- To allocate a proportion of the UK's Overseas Development Assistance (ODA) specifically to improving nutrition outcomes, as a 'fair share' of the annual \$10.3 billion gap. This needs to be costed-out and funds earmarked to promote nutrition sensitive development as outlined in DFID's recent position paper.
- To ensure that support to scale up nutrition in very fragile contexts goes beyond humanitarian assistance, and to outline clearly how this will be done. These countries need support that gets to the root of both acute and chronic undernutrition in humanitarian, transitional and development contexts.
- To lead collaboration around scaling up nutrition, especially in the G8 and G20, to continue to show strong international leadership, for example, by pushing for a successor to the *L'Aquila Food Security Initiative (AFSI)* at the G8 and G20 meetings in 2012 and 2013.

## Undernutrition harms, disables, and kills

- Undernutrition can be caused by a deficiency in the intake of nutrients or because the body is not able to absorb the nutrients it consumes. For instance, a child who is severely undernourished is over 8 times more likely to die than a child in the same circumstances with a normal weight. A deficiency in Vitamin A accounts for about 6% of all deaths in children under the age of five years in developing countries.

- The first “1000 days” (from conception to the age of two years) is a key period for establishing a lifetime of growth and development. If children do not receive the right diet during these 1000 days, they are more likely to suffer from irreversible delayed development, stunted growth, and dangerous illnesses. Should these children survive and grow up, they are more likely to do poorly in school, and in turn be less economically productive as adults.
- It is estimated that 20% of maternal deaths are caused by short stature (as an outcome of childhood undernutrition) and iron deficiency anaemia.
- Recent studies have linked foetal undernutrition and increased risks for chronic diseases in adulthood (type 2 diabetes, high blood pressure and cardiovascular disease).<sup>1</sup>

## Nutrition levels in fragile contexts

- It is no coincidence that the Failed States Index’s top five fragile contexts (Somalia, Chad, Sudan, DRC and Haiti) also have some of the highest rates of hunger, child undernutrition and child mortality in the world.<sup>2</sup> The limited systems, structures and resources required to target undernutrition in some of the most fragile contexts challenge the ability of their governments to improve child nutrition internally.
- The combination of conflict, resource scarcity, marginalisation, and economic instability increase factors that aggravate levels of child undernutrition. Fragile and conflict-affected countries are some of the furthest from achieving the MDGs, and are prone to frequent or “protracted” crises, making them some of the world’s hardest places to live and thrive, especially for children. They often lack resources, community capacity or cohesiveness and political will to deal with significant issues affecting the population.
- In areas where there are frequent crises that decimate food availability (such as cyclical drought) it is difficult for undernutrition to be addressed effectively. According to the World Bank, people in fragile and conflict-affected areas are two times less likely to have enough food than those in other developing countries.<sup>3</sup> They are three times less likely to be able to send their children to school, twice as likely to see their children die before age five and more than twice as likely to lack clean water.
- It is thus unsurprising that, according to the United Nations Children’s Fund (UNICEF), of the 195 million children globally who are stunted (i.e. suffer from chronic undernutrition),<sup>4</sup> 80% live in just 24 countries,<sup>5</sup> and that child undernutrition increases as household income decreases; there is clearly a strong positive correlation between undernutrition and poverty.<sup>6</sup>
- We also know that conflict and poor governance exacerbate the severity of undernutrition; when looking at the 18 countries with the highest percentage of child stunting, all but 3 are considered ‘borderline’ to ‘critical’ fragile contexts.<sup>7</sup>

<sup>1</sup> UNICEF and WHO, “Low Birthweight: Country, regional and global estimates.” UNICEF, New York, 2004 UNICEF/WHO.

<sup>2</sup> WFP, “Interactive Hunger Map 2011: Fighting Hunger World Wide”; UNICEF, “State of the World’s Children 2011 – Statistics”; *Failed States Index 2011*

<sup>3</sup> World Bank, “World Development Report 2011”

<sup>4</sup> UNICEF. Childinfo. “Monitoring the Situation of Children and Women. Tracking progress towards MDG1”

<sup>5</sup> UNICEF. “Tracking Progress on Child and Maternal Nutrition. A survival and development priority”, 2009.

<sup>6</sup> UNICEF, “Tracking Progress on Child and Maternal Health”, *ibid*

<sup>7</sup> UNICEF, *ibid*; “Failed States Index 2011”,

- Therefore, responses to undernutrition in these contexts must be holistic, both meeting the humanitarian need and developing some of the systems and structures that will provide long term solutions to the undernutrition in their countries.

## Case study: Somalia

In 2011, East Africa experienced what many call the worst drought in the region in 60 years. The failure of sequential rainy seasons coupled with high food prices and poverty led to localised nutritional emergencies in Ethiopia, Kenya, Somalia, and Djibouti. In areas of Somalia, chronic conflict and poor governance exacerbated an already precarious situation and halted humanitarian aid. This contributed to mass displacement and higher levels of mortality and malnutrition than in more stable surrounding regions and countries. Levels of child mortality in some communities were 7 times above emergency threshold cut offs. With the ongoing conflict and governance issues in these critical areas, short and long term measures to address undernutrition nationally remain tenuous.<sup>8</sup>

## Global responses to undernutrition

Studies have shown that if basic affordable measures are put in place to tackle key immediate causes, child death could drop by as much as 25%.<sup>9</sup> Recent initiatives, such as the *2009 L'Aquila Food Security Initiative* (AFSI) of the G8, have taken steps to improve food security in vulnerable countries. Unfortunately, these financial commitments seem unlikely to be met, although the UK has actually met its own target. For instance, under the AFSI only 48% of the committed \$20 billion towards sustainable agricultural development is on track to be dispersed within the promised three year timeframe.

In April 2010, the Scaling Up Nutrition (SUN) framework was launched as a forum to guide the international community in a coordinated effort to address undernutrition, focusing on the special needs of the first 1000 days of a child's life and in turn hoping to improve global food security and achieve the Millennium Development Goals (MDGs). Over 100 agencies including governments, civil society, the private sector, research institutions and United Nations system signed onto this framework, which outlines a pathway for agencies and governments to address undernutrition through strategies in the national plans of those countries with high levels of undernutrition.

Estimates indicate that, in order to successfully implement a minimal package of proven nutrition interventions, as recommended in the SUN framework, in 36 high burden countries it will cost around \$10.3 billion (excluding community input).<sup>10</sup> Current SUN countries include Bangladesh, Burkina Faso, Ethiopia, Gambia, Ghana, Guatemala, Lao PDR, Malawi, Mali, Mauritania, Mozambique, Nepal, Niger, Peru, Senegal, Tanzania, Uganda, Zambia and Zimbabwe.<sup>11</sup>

## The UK Government's current policy

- The UK Government has stated that it is committed to addressing undernutrition and has shown that it is willing to act as a leader in this challenge, a commitment which World Vision commends. However, the needs of the most vulnerable living in the most fragile and volatile contexts go beyond the humanitarian response outlined in DFID's policy and, as such, World Vision recommends that DFID should look to outline clearly how undernutrition will be tackled in fragile contexts, beyond humanitarian responses.

<sup>8</sup> Somalia Famine & Disaster Situation Report No. 15, OCHA, 27 Sept 2011.

<sup>9</sup> Butta et al, "What works? Interventions for maternal and child undernutrition and survival", *The Lancet*, Volume 371, Issue 9610, Pages 417 - 440, 2 February 2008.

<sup>10</sup> Horton et al. *Scaling Up Nutrition, What Will it Cost? Directions in Development, Human Development*. World Bank. 2010.

<sup>11</sup> *Scaling up Nutrition: Portal for the SUN Movement: SUN Countries*

- The UK Government committed £1.1 billion in funding towards the AFSI pledges of \$20 billion investment in food security from 2009-2012. Of this, £352 million of funds have been dispersed or are in line to be released, and the Secretary of State for International Development is optimistic that the UK will reach its pledges in full by the end of the period. Discussions are already taking place as to what will be the best mechanism to support global efforts to improve food security after the AFSI is completed in 2012.

DFID has recently released a position paper on undernutrition which has set the goal to reach 20 million children under five years of age during 2011 to 2015 through UK aid initiatives. It states that DFID will:

- Target undernutrition through the scaling up of 13 nutrition specific interventions that, if delivered at scale, could reduce stunting by one third;
- Address immediate factors influencing undernutrition and will target pregnant women, adolescent girls and children under the age of five;
- Support nutrition-sensitive development that encompasses key sectors and activities including agriculture, health, gender empowerment, water and sanitation, and cash transfers;
- Use its influence to build an effective international response which includes supporting the SUN framework and coordinating with the private sector, civil society and multilateral agencies;
- Encourage new research that will help better understand successful means of improving nutrition in various contexts and will use new and existing evidence bases to support quality programmes that will have maximum impact.

Further to this, however, World Vision UK makes the following recommendations to DFID:

- To allocate a proportion of ODA to improving nutrition outcomes.
- To ensure that support to scale up nutrition in very fragile contexts goes beyond humanitarian assistance.
- To lead collaboration around scaling up nutrition, especially in the G8 and G20.

## About World Vision

World Vision is a child-focused Christian relief, development and advocacy organisation dedicated to working with children, families and communities in almost 100 countries worldwide to overcome poverty and injustice, with support from over 100,000 child sponsors in the UK alone. World Vision has a particular focus on child health, child rights and child protection, and humanitarian relief, last year contributing to 10 disaster responses, including the Horn of Africa Food Crisis. For more information on World Vision's work on child health please visit [childhealthnow.com](http://childhealthnow.com).

## For Further Information

This briefing is provided by the World Vision UK Government Relations Team to assist MPs and Peers in promoting in Parliament issues which affect children in poverty. For further information, or to discuss any issues in this briefing please contact:

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