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Preface

Malnutrition is both a distinctive cause and a scarring consequence of poverty. The malnourished child is poverty's most telling aspect. Malnourished Asian children have offered for generations a specter of despondency and also a challenge to patterns of economic growth that bypass the poor. Three fourths of the world's malnourished children are Asian. If malnutrition were eliminated by 2020, and concerted efforts could make this happen, the global prospects for human development and peace would be immeasurably brighter. The world would be a very different place.

The consequences of chronic malnutrition, beginning with mothers and their young children, are intergenerational and account for a large proportion of child deaths, mental disability, and less productivity among earning citizens. In low-income Asia, six million preschool children die each year, and more than half are underweight. The surviving underweight children are likely to be stunted and will suffer from frequent illness, have lower mental ability and achievement in schooling, are more likely to drop out of primary school, and earn lower wages as adults. As the East Asian financial crisis revealed, untreated malnutrition leaves mental and psychosocial scars on a generation of young children even after crises abate. This is how the intergenerational cycle of poverty and malnutrition perpetuates itself.

Recent evidence also links the malnutrition of mothers and their young children to a life-long susceptibility to diet-related chronic illnesses, including diabetes, high blood pressure, coronary heart disease, and cancer. Therefore, the poor suffer a "double burden" of disease arising from malnutrition in early life.

In the early 1990s, notably at the World Summit for Children (WSC), Asian nations made bold promises to reduce maternal and child malnutrition through adopting better policies and programs and increasing the level of -resource commitments to solve the nutrition problem. Halving underweight malnutrition among preschoolers and the virtual elimination of micronutrient malnutrition (Vitamin A, iodine and iron deficiencies) were the specific WSC goals targeted for 2000.

However, not enough has been done over the last decade to find affordable and sustainable solutions to eliminate malnutrition in low-income Asia, not least to raise resources commensurate to the problem. The economic costs of malnutrition have been to depress economic growth rates and household incomes substantially in most of Asia.

Over the last several years, the Asian Development Bank (ADB) and the United Nations Children's Fund (UNICEF) jointly undertook a regionwide assessment of how nutrition of young women and children improves and how additional resources should be used. The agencies acted together because Asian governments were making slow progress in reaching the WSC goals.

This special double issue of the Review distills the lessons learned from this unique collaboration between ADB and UNICEF and offers clear direction to the Asian region on how to eliminate malnutrition in a cost-effective and sustainable manner. The volume includes regional issues papers by leading experts who were deeply involved as advisors to the countries involved in the study.

Seven countries, namely, Bangladesh, Cambodia, People's Republic of China, India, Pakistan, Sri Lanka, and Viet Nam, were involved in the assessment. The eighth country, the Philippines, withdrew. Collectively, these countries cover about two thirds of the world's 150 million preschool children under five in the developing world. The regional project set out to build capacity for policy analysis and identification of investment priorities by the participating Asian countries. Each country prepared a ten-year investment program for progressing toward the WSC goals based on common investment guidelines. Each country study presents a nutrition situation analysis; reviews the linkages between health and nutrition service delivery programs and community-based interventions for children; analyzes supportive policies for improving nutrition (including food security measures, safety nets, employment and gender approaches); and lastly defines an improved and costed nutrition strategy with financing roles for central and local governments, private sector, and development partners. The country investment plans have been endorsed in most cases by the governments themselves and are being used as the basis for raising resource commitments from development partners.

The lessons learned about how nutrition can improve rapidly in the Asian region are striking.

First, the educated and socioeconomically empowered Asian woman is the key to improving the nutrition and mental acuity of young children, and that improvement sets in motion lifelong prospects for heightened learning and earning with benefit streams to families, communities, and nations. Improving women's nutrition and their capacity to care for the young infant has a direct bearing on reaching the educational goals of Asian nations. Mainstreaming gender concerns is essential if nutrition programs are to succeed. Food availability and other traditional measures of nutrition security are much less important.

Second, communities have a major role in supporting families to improve the nutrition of their children, and partnerships between local governments and communities are an emerging Asian trend that will determine whether the nutrition and human potential of the poor will improve. Community-based programs are successful when they involve communities in the analysis, assessment, and design

of locally tailored action programs to solve the nutrition problem. Decentralized management of programs, with generous support for social mobilization and nutrition information systems to aid prudent use of resources, supports effectiveness. Serious national political commitment to poverty reduction, as in Thailand where targets for improved child nutrition were published and evaluated and local governments were held responsible under the national Poverty Alleviation Program, help to link the macro-micro interface.

Third, there are clear priorities for programs. Focus public policies and resources on preventing malnutrition during pregnancy and the nursing period and for infants under two, otherwise a syndrome of developmental impairment will persist across generations. Successful programs provide food, health, and infant care, combining service delivery and community nutrition promotion in centers and homes.

Fourth, conventional food subsidies are wasteful unless they are properly targeted, stimulate employment, and support women's empowerment including microcredit programs targeted for women. Otherwise, countries and donors are best advised to reallocate their funds to community-based programs that are -gender-sensitive. Partnerships between the public and private sectors should be welcomed.

Given the high economic and mortality costs of child malnutrition, the low-cost solutions that are well-tested and readily available, and the high returns on nutrition investment demonstrated in this volume, why isn't more being done to eliminate this tiresome obstacle to human progress? In addition to well-known political economy factors, there is a lack of understanding among governments that malnutrition is much more than a health problem, that it undermines national aspirations for sustained and equitable economic growth. Within most public sectors, there is a fragmented policy environment for making nutrition a benchmark of economic and social development.

It is however remarkable that the seven countries in the regional assessment mobilized all relevant sectors and civil society to consider the short and long-term needs of their children and are now engaged in a vivid search to match investment to need. This offers hope that the knowledge honed through this novel policy process will form abiding partnerships that will retire the unseemly drama of chronic undernutrition and poverty for good.

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