

# **NUTRITION ON THE RISE**

# A MULTIMEDIA PRESENTATION SCRIPT

# THE RENEW PROJECT

(REENERGIZING NUTRITION—EXPANDING WORLDWIDE)

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# Nutrition on the Rise

The presentation opens with a black screen. When ready to begin, click the forward arrow.

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As we look back across the decades, we have witnessed a global revolution on many fronts....

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More women and men are using modern methods of family planning, which has risen to 55 percent throughout the developing world.

Children are healthier..... and child deaths under the age of 5 have fallen to 7 percent;

Maternal mortality is dropping, from 450 deaths for every 100,000 live births in 1990 to 290 in 2009:

And girls are better educated, with nearly 85 percent of girls completing primary education—a remarkable achievement.

BUT.....there is one challenge where we are sadly behind.....

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......malnutrition in mothers and children, which continues to impose a staggering cost worldwide—despite having the solutions.

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Today, malnutrition contributes to the deaths of millions of children every year.....which translates into more than 1 out of every three child deaths.

Let's take a look at our trend graph to see how malnutrition has changed over the last 20 years across the globe.

# ► Slide: Click Forward (*Trendalyzer* scenario)

Here we have the bubble graph where we're going to focus on the relationship between malnutrition and life expectancy.

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On the left axis we have the percent of children under the age of 5 who are chronically malnourished with their growth stunted, or low height for age. This axis goes from zero up to 75 percent.

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On the bottom axis we have life expectancy, or the average number of years a newborn infant can expect to live, going from 25 up to 80 years.

Each color represents a different region of the world.

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So starting with the red, we have East Asia and the Pacific...

Orange is Central Asia and Europe...

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Yellow is for North and South America...

# ► Slide: Click Forward

Green is the Middle East and North Africa...

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The light blue is for South Asia...

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And the dark blue is for Sub-Saharan Africa. These countries are located more toward the back of the pack with lower life expectancy in 1988......and the size of each bubble corresponds to the population size of that country—so the bigger the bubble, the bigger the population.

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In 1988, we can start to see an association......countries with lower levels of stunting have higher life expectancies.

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The big light blue bubble here is Bangladesh, with about 70 percent of children stunted and life expectancy only 52 years.

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Also back 20 years ago, the yellow North and South American countries are spread out across the trend graph.

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.....Bolivia and Peru have about a 40 percent rate of stunting ........

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....while Brazil has a significantly lower percent of children stunted at 21 percent.

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......And this large yellow bubble down here is the United States, with only 3 percent of children stunted and a life expectancy of 75 years back in 1988.

So let's play this forward and look at what has happened over the decades........and keep in mind that as time passes, new countries will pop in on the screen.

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Right away you can see countries moving to the right as life expectancy is going up......and some countries bouncing up and down as they try to reduce levels of chronic malnutrition......that big red bubble is China...

And when we come to 2006, we see that most of the countries have moved toward that bottom, right corner with lower rates of stunting and higher life expectancy.

While the light blue South Asian countries have certainly made progress in raising life expectancy at birth......countries like Bangladesh,

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India, and Nepal continue to have high rates of stunting—at nearly 50 percent.

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Looking at the dark blue sub-Saharan African countries, we can see that they cover a wide range of the graph in 2006.

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Some of these countries have stunting rates that are comparable to South Asia.

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While, countries like Ghana and Togo have lower rates of stunting and a higher estimated life expectancy.

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And among the yellow North and South American countries......

# ► Slide: Click Forward

Peru made significant strides in decreasing stunting over the last two decades .....

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and Brazil and Chile making excellent progress in reducing stunting and improving life expectancy......with both countries having made major investments in policies and programs to reduce malnutrition.

What this bubble graph is showing us is that there is an association between early childhood malnutrition and a person's health even much later in life. A well-nourished child grows into an adult with fewer chronic diseases that can end life prematurely. So improving growth outcomes in childhood can have a long reach into adulthood.

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So what has the experience and research on nutrition interventions taught us over the vears?

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It's taught us that nutrition is a smart investment, because it helps children reach their full potential, providing a lifetime of benefits!

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Nutrition is a smart investment because it accelerates progress on key global health targets...... including reducing deaths and illnesses in mothers and children..... helping us to achieve the Millennium Development Goals 4 and 5.

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...and nutrition is a smart investment, because it accelerates progress on key economic development targets.

It's truly hard to think of another investment that can accomplish this much.

Nutrition interventions add value to all of our other investments, taking them up to the next level. Some believe that we may be hitting the ceiling......and we may not be able to see additional improvements with investments in health, education, or poverty reduction...... unless we combat malnutrition.

So how do nutrition investments help achieve all of these goals?

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Well, the story starts in the 1000 day window of opportunity between pregnancy and a child's first two years.......... this period becomes the "best shot" at helping a child reach his or her potential.......and sets the stage for life.

Let's take a closer look at just how critical this period is.....

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Starting in the womb, before birth, the fetus is at risk if the mother lacks essential vitamins, minerals, and nutrients needed for brain, bone, and organ development. About half of all women in developing countries suffer from vitamin and mineral deficiencies during pregnancy.

Once the baby is born .......From birth to the first 6 months, early and exclusive breastfeeding without adding any other foods or liquids is the very best way to ensure a healthy baby......

And starting at 6 months, adding nutritious solid foods along with continued breastfeeding is absolutely necessary to make sure that the child grows correctly......most stunting happens in this critical period.

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.....THERE IS NO GOING BACK ......

The cost of malnutrition during this 1000-day window is almost always irreversible...

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- damage to the brain, leading to poor educational performance and lower IQ
- poor growth and development, and...remarkably...
- this early deprivation increases a child's risk of developing chronic diseases as an......

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......adult, which we mentioned earlier. Chronic diseases like diabetes, high blood pressure, and heart disease......

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......all debilitating and potentially life-threatening, requiring hospitalizations, continued attention, and care later in life.

Another huge challenge is that malnutrition in children can happen and persist for years......and we can't always see it.

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These three little girls, Roshani, Raman, and Sonam, are all from the same remote village in South Asia ......all three girls are the same age.....but they show very different levels of development.

The first two girls suffer from stunting and underdevelopment owing to poor nutrition.....and it's unlikely that they will ever catch up and reach their full height, or their full weight, or their full potential like their village playmate on the right.

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The invisible nature of chronic malnutrition also sets up a pattern that we see happening generation after generation.......

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This intergenerational cycle of growth failure starts with a malnourished woman. This mother is stunted and at a greater risk of obstetric complications. She also has a greater risk of delivering an infant with low birth weight.

# ► Slide: Click Forward)

.....like this baby girl, who is at higher risk of illness and death, and at higher risk of delayed emotional and intellectual development, and....

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.....she is also likely to suffer from growth failure in those important, early developmental vears ...... which....

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...in turn lead to low weight and stunting in the teen years .....

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And that takes us back to our malnourished woman......And the cycle of poor nutrition perpetuates itself across generations.

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Adolescent pregnancy also heightens the risk of low birth weight and adds to the difficulty in breaking the cycle.

We need support for good nutrition during pregnancy and childhood (that 1000-day window of opportunity)...... so we **can** break this cycle of growth failure, and turn it into a virtuous cycle with strong healthy mothers and children.

(Pause)

Now, in addition to breaking this cycle, good nutrition also produces economic benefits.

Research has found that nutrition investments are a "best buy" in today's financially strapped environment.....because investments in nutrition pay for themselves.

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Healthy nutrition during the 1000-day window produces a lifetime of benefits for individuals, families, and nations. (....And that includes producing the most outstanding football players in the league!)

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Healthier children complete more years in school and have better performance, which leads to increased personal income and can add at least 10 percent to lifetime earnings.

One interesting study from Guatemala, showed that the boys who received a high-protein supplement in childhood, 35 years ago.....

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.....earned on average 46 percent higher wages as adults than the boys who did not receive the protein supplement.

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Since healthy nutrition in the 1000-day window can increase educational performance, well nourished children grow into a more productive labor force....... and that can mean a boost in GDP growth by as much as 3 percent annually for the country.

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And if we look at the cost-to-benefit ratio—the cost of key nutrition interventions compared with the savings—investment in nutrition produces returns up to 16 times greater than the initial investment. That's a savings of \$16 dollars for every \$1 spent.

But, despite the potential for huge benefits......official development assistance for nutrition is appallingly low.

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According to the Organization for Economic Cooperation and Development, while total development assistance contributions for health (Click Forward) and for HIV/AIDS have substantially and steadily increased over the years.....nutrition (Click forward) has remained grossly underfunded (Click Forward).

We must finance priority investments and kick-start the scale up of interventions immediately because......

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We know what makes a difference!

Three well-tested, sets of interventions can protect mothers and children .....beginning with.....

Ensuring that mothers and children have access to—and are consuming!—essential vitamins and minerals.

(Pause)

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Secondly, making sure that parents and caregivers get information on improved feeding and care practices, and the support that they need to feed their children in the best way possible.

(Pause)

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And thirdly, making sure that mothers and children have access to the right foods, and the right amount of foods—plus access to therapeutic foods to treat moderate to severely malnourished children when it's necessary.

(Pause)

Over the last decade, we have learned much more about how these basic interventions can lead to rapid improvements in nutritional status...

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Let's take a look at three high-flying performers.....these are countries which have made remarkable progress—in a very short amount of time.

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Going back now to our trend graph one last time, we are going to look at the percent of malnourished children in Senegal, Thailand, and Brazil.

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On the left axis is the percent of children who are stunted, and it goes from zero up to 40 percent.

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On the bottom axis is time, which ranges from 1987 to 2007.

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In 1987, we see that in Senegal, about 28 percent of children were stunted,

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Thailand had 25 percent stunted.....and

# ► Slide: Click Forward

In Brazil, 22 percent of children were stunted—

So let's see what has happened over the course of time.

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Right away we can see that Thailand and Brazil are dropping dramatically with Senegal not

doing as well going up a bit, but then catching up and going down and down until by 2007 all three countries have much lower overall rates of stunting compared to earlier.

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Brazil made great headway since the 1980s. The Government launched a multisectoral program that focused on health, education, and nutrition, including a cash transfer system that provided vouchers to the lowest income families, making sure they could buy enough food, and the right types of food to maintain good nutritional status of their children.

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In Thailand, the Government implemented an impressive community nutrition program during the 1980s & early 1990s that reduced stunting at a rate of 3 percent per year, one of the most rapid declines ever documented, and Thailand is continuing to make progress over the last decade, with only about 15% of children stunted in 2007.

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Meanwhile, we see that even though Senegal got off to a slower start and went up a bit, it has made tremendous progress in reducing stunting since the mid-1990s. After 1993, with support from international partners, the Government of Senegal created the Nutrition Enhancement Program to reduce malnutrition. The program targeted the poorest districts using village health volunteers, who weighed and measured babies, provided food supplements to children nutritionally at risk, and gave nutrition education to mothers and caregivers.

Rapid progress in reducing malnutrition is possible, as these high flyers have proven!

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Today, we have unprecedented opportunities to make a difference and scale up nutrition interventions....more than ever before.

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New global health initiatives are creating opportunities to integrate nutrition into community-based health interventions......like we saw in the success of reducing stunting in Senegal.

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New efforts to tackle the global food crisis through expanded investment in food security and agriculture development programs are providing more opportunities to introduce and scale up key nutrition interventions.

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There are innovative public/private partnerships between agencies and the food processing industry, which could dramatically expand the consumption of essential vitamins and minerals.....on the screen here is an example from Egypt where flour is being fortified with iron and folic acid and baked into bread.

We are also working to create new products that provide vitamins and minerals directly to children at risk of micronutrient deficiencies. For example, Sprinkles, that come in small sachets like packets of sugar, contain a blend of micronutrients in powder form, and is easy to sprinkle on foods that are prepared in the home.

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And we have exciting new movements like the "SUN" which stands for "Scaling up Nutrition" —a global effort aimed at bringing country and global leaders together to fight against malnutrition.

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Today, more than 20 countries from three continents have indicated that they are scaling up nutrition and have committed to the SUN, and many more countries are showing interest in becoming SUN countries.

The member countries have joined over 100 international organizations and donors to..... for the first time...... rally around a common agenda and solutions, with the hope of mobilizing broad commitment to advance the nutrition agenda.

| ► Slide: Click Forward  Malnutrition is a global problem |  |
|--|--|
| finding a solution must be a shared responsibility.      |  |
| (Pause)  |  |

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We have the evidence.....and we know what works.

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We must build on the SUN movement to scale up nutrition interventions....... global movements don't just happen......we need to band together to build public understanding and political will.

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We need to mobilize additional resources and better align assistance from development partners.....recognizing that the private sector has a positive role to play and is likely to be an important part of the solution.

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And we must ensure that key nutrition interventions are integrated into development strategies across all sectors.....including health, agriculture, education, rural development, and social protection programs.

We can't afford to lose any opportunities.

| ► Slide: Click Forward  By staying positive and working together                           |
|--|
| (Pause)  |
| we can build on our past achievements  |
| (Pause)  |
| We can scale up interventions in the 1000-day window of opportunityfor those most in need. |
| (Pause)  |
| And we can keep nutritionon the rise!  |