

‘HIGH LEVELS OF MATERNAL, CHILD UNDER-NUTRITION CONTINUE TO PLAGUE INDIA’

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

Arjan De Wagt , head of nutrition, UNICEF (United Nations Children’s Fund) India speaks on how high levels of maternal and child under-nutrition continue to plague the country. He notes that for the future of children in India, controlling COVID-19 and ending malnutrition are equally important and urgent.

How has India fared on child and maternal nutrition in recent times?

Overall, India has made impressive gains in economic and human development in recent decades. However, high levels of maternal and child under-nutrition continue to plague the country. Large-scale surveys, like the Comprehensive National Nutrition Survey (CNNS) and National Family Health Survey-4 (NFHS), show that about one-third of children under five years of age in India are stunted, a third of them are underweight, and almost two out of 10 children are nutritionally wasted; many of these children suffer from multiple anthropometric deficits. The CNNS also highlights the emerging problems of overweight, obesity and micro-nutrient deficiencies.

The launch of the Poshan Abhiyan in March 2018 refocused the national development agenda on nutrition. However, with the spectre of COVID-19, there is a heightened risk of increasing malnutrition, and parts of progress made in the past may get undone.

How is COVID-19 likely to affect nutritional interventions in India?

Broadly, we know that the impact of COVID-19 has adversely affected access to livelihoods. The containment measures to prevent the spread of the virus threatened livelihoods, resulted in price hikes due to reduced production of goods and services, and in the disruption of supply chains for many families.

Global research in 2020 on the effect of COVID-19 estimated about 14.3% increase in wasting globally. No specific data are available yet on the impact of COVID-19 on the nutritional status of the Indian population. First of all, like other infections, the COVID-19 infection negatively affects the nutritional status of a child.

Second, as the period of pandemic prolongs, food insecurities and nutritional challenges will intensify too.

On completion of six months, children need nutrient dense complementary foods in addition to breast milk to adequately fuel the growth of their growing bodies and brain.

Food insecurity arising out of the pandemic may cause families to shift to cheap food with low nutritive value, causing long-term adverse impact on the cognitive development of children.

Third, health and social services, such as anganwadi centres, nutrition rehabilitation centres, and village health sanitation and nutrition days (VHSND), were disrupted. As schools remained closed for a large part of 2020 and well into 2021, we also noticed that distribution of iron and folic acid tablets to children in schools was significantly reduced, and awareness campaigns in schools on nutrition were suspended. It was not until early 2021 that more and more States

started opening anganwadi centres again, but centre-based activities soon were suspended due to the second wave of COVID-19.

As COVID-19 demanded extraordinary attention, health workers were diverted from nutrition programmes.

Fourth and most importantly, COVID-19 related priorities could threaten delivery and financing of nutrition and nutrition security responses.

Given that the threat of subsequent COVID-19 waves looms, what do you foresee as the biggest challenge in the nutrition space?

We fear double threats here. On the one hand, pandemic response services, such as COVID-19 vaccination, will need to be prioritised. This puts a tremendous strain on systems, capacity and resources earlier dedicated to deliver routine health, nutrition, and social protection interventions.

On the other hand, COVID-19 may inflict repeated shocks on families and communities.

As COVID-19 affects resources and priorities, how should the government address nutrition-related challenges?

Six areas need immediate attention. First and foremost, strong leadership at all levels — from national to district — is essential to bring back focus to address food, income and nutritional security.

Second, uninterrupted, universal, timely and high-quality coverage of essential evidence-based nutritional services must be ensured, with special focus on children below two years of age, pregnant women and adolescent girls, which are critical development periods.

Thirdly, the pandemic calls for strategies adapting to COVID-19 guidelines and innovations in the service delivery mechanism.

Fourthly, adequate financing is needed to ensure delivery of high impact interventions, and additional financing will be required for ensuring food and nutritional security, especially for the vulnerable population groups.

Multisectoral interventions that directly or indirectly impact nutrition like health, nutrition and social protection schemes need to be delivered effectively to the same household, same woman, same child. Migrant labourers and urban poor need special focus.

Finally, nutrition needs to be retained as a key indicator for development. For the future of children in India, stopping COVID-19 and stopping malnutrition are equally important and urgent.

Full interview at <https://bit.ly/DeWagt>

For the future of children in India, stopping COVID-19 and stopping malnutrition are equally important

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