

U N I C E F . T H E S T A T E O F T H E W O R L D ' S C H I L D R E N 1 9 9 8
BY
MRS . O . O . A K A N J I

PREAMBLE

The report being reviewed (today) is an annual event of the United Nations Children's Fund (UNICEF), in which different developmental issues, ranging from the conventional right of the child to adequate care and good living, are featured. The UNICEF over its 50 years of existence has made great strides with millions of children's lives saved. However, it has been established that political, legal and cultural factors may have constrained the best efforts of households through UNICEF assistance to attain healthy living. These include the degree to which the rights of women and girls are protected by law and custom, and the political and economic system that govern the social sector. The 1998 report, which focuses on Nutrition, is a 131 page document made up of two chapters. Chapter I discusses malnutrition: causes, consequences and solutions, while chapter II presents statistical tables.

Studies have shown that two regions of the world have the highest rates of childhood malnutrition - The Sub-Saharan African and South Asia. It would be of interest to note that the aggregate resource flows to these two regions in 1996 were \$1.6 billion and \$5.2 billion, respectively or 0.7 per cent and 2.2 per cent of the total \$232 billion aggregate resource flows to the developing world. It is therefore of great importance that we join the United Nations to address this silent, invisible emergency to overcome entrenched poverty and under-development.

SUMMARY OF THE REPORT

Chapter I in discussing "Malnutrition: Causes, Consequences and Solutions", focussed on three major sections, adopting the approach of Panel discussions in explaining the state of the World's children in relation to malnutrition and proffered workable solutions. The report was tied to seventeen (17) panels which discussed issues ranging from "Vitamin A supplements that save pregnant women's lives to the topic of "Making food enrichment programmes sustainable".

•Mrs. O.O. Akanji is a Deputy Director in the Research Department, Central Bank of Nigeria.

The report viewed malnutrition as the consequence of poverty. Also, malnutrition was largely seen as an invisible emergency because, three-quarters of the children who die world wide of malnutrition-related causes are mildly to moderately malnourished and betray no outward signs of problems.

The toll of malnutrition world-wide showed that over 6 million children under five or 55 per cent of that population died each year in developing countries, mainly from preventable causes which are either directly or indirectly related to malnutrition. Factors responsible are: anaemia in infancy and early childhood lower Intelligence Quotient (IQ), Vitamin A deficiency which affects about 100 million young children worldwide and measles which kills nearly 1 million annually.

Consequent to these factors, nearly 67 million children were estimated to be wasted, which means that they were below the weight they should be for their ages. The report noted that more than 2 billion people, principally women and children- are iron deficient, while the World Health Organisation (WHO) estimated that 51 per cent of children under the age of four in developing countries are anaemic.

However, the report brought out the effect of good nutrition, citing the most obvious proof of the power of good nutrition as evident in the taller, stronger, healthier children of many countries separated by only a generation from their shorter, less robust parents. It also noted and emphasised that timing is of essence in tackling the issue of malnutrition because, a child's organs and tissues, blood, brain and bones are formed, and physical potential is shaped, during the period from conception through age three. Consequently, growth during the foetal stage depends on how well nourished a woman was before pregnancy, as well as during pregnancy. Measures that are essential for an expectant mother are equally important when a woman is breast feeding her child. Breast feeding perfectly combines the three fundamentals of sound nutrition food, health and care.

Spotlighting the causes of malnutrition, the report indicated that it has an interplay between inadequate dietary intake and illness - thus creating a vicious cycle. A malnourished child, whose resistance to illness is compromised, falls ill, and malnourishment worsens. Three clusters were identified as responsible for

malnutrition vicious cycle, that is, inadequate access to food in a household; insufficient health services and an unhealthy environment; and inadequate care for children and women.

The solutions to the causes of malnutrition were treated in the report as follows:

- (i) Household food security defined as sustainable access to safe food of sufficient quality and quantity to ensure adequate intake and a healthy life for all members of the family;
- (ii) Health services, safe water and sanitation which should be accessible and affordable;
- (iii) Caring practices which when lacking, inspite of adequate food in the house, safe and healthful environment and access to health services, could still make children to become malnourished. In communities where mothers are supported and cared for, they are in turn, better able to care for young children. Among the caring behaviour the report emphasised are feeding, protecting children's health, providing emotional support and cognitive stimulation for children, caring for and supporting mothers.

The report discussed workable approaches for addressing nutritional problems. For nutrition to improve many factors are necessary. The report highlighted direct approaches that could give more rapid and focussed effect on nutritional improvement. Specific factors are:

- (i) nutrition and economic growth;
- (ii) nutrition and the status of women;
- (iii) nutrition and social-sector spending.

Country experiences such as those of Tanzania, Niger and Thailand, showed that workable and successful approaches were developed. First, community mobilization was found to be ideal where community-based growth monitoring helped in assessing the nutritional well-being of individual and collective village children. Second, protecting, promoting and supporting breast feeding as evident in "The

Baby-Friendly Hospital Initiatives (BFHI)." Third, targeting specific nutritional deficiencies in terms of food fortification and supplementation programmes. Such fortification are in the areas of iodization of consumer salt to reduce iodine deficiency disorders; capitalizing on Vitamin A's benefits to protect children against blindness; responding to anaemia arising from iron deficiency which is probably the most prevalent nutritional problem in the world, and improving basic health services by having access to both curative and preventive health services. However, the report noted that success of child immunization programmes had been a major boost to child health.

Furthermore, the report noted eight useful lessons of the success stories of the approaches taken to tackle the age-old problems of nutrition and these are:

- * Solutions must involve those most directly affected.
- * A balance of approaches is necessary.
- * Nutrition components work better in combination.
- * Progress hinges on continuing research.
- * Food production is important but not enough.
- * Every one has an obligation to child rights.
- * Community and family-based involvement is vital.
- * Government policies must reflect the right to nutrition.

The report commented that although science and technology would never solve all the problems associated with inadequate food and care, as well as lack of health services and sanitation that lead to childhood malnutrition, it is still crucial to bring science to bear. This section of the report also described some of the crucial scientific advances that are helping to shape specific interventions to reduce malnutrition or that may do so in the future.

New tools to tackle the essential task of nutritional assessment and the new ways that agricultural science could be brought to bear on the problem, were also discussed in the report. Some of the scientific breakthroughs are:

- * Nutritionally acquired immune deficiency - The 'cure' for immune deficiency due to malnutrition has been known for centuries. It is achieved by ensuring

an adequate dietary intake containing all essential nutrient.

* Nutrition and Acquired Immune Deficiency Syndrome (AIDS) - The role of nutrition in preventing infection is now being investigated as one possible way to help reduce the transmission of AIDS. Studies are still on, on how Vitamin A could form part of the arsenal needed to combat HIV.

* Using nutrition to reduce maternal deaths - Maternal mortality is a tragedy in social, economic and public health terms because they are preventable. However, research and science have proved worthwhile as new findings have shown the utility of Vitamin A, zinc, iodine and calcium supplementation to dramatically reduce maternal mortality.

* Breast feeding: Good for mothers' health too - A number of studies have shown that initiating breast feeding immediately after birth, stimulates the contraction of uterus and reduces blood loss.

* Prevention of chronic diseases such as heart disease. Over 30 studies around the world showed that low-birth weight babies who were not born prematurely have a higher incidence of hypertension later in life than those with normal birth weight.

The report offered a new way to reduce malnutrition deaths in emergencies called Rehydration Solution Malnutrition (ReSoMal) which is similar to the Oral Rehydration Salts (ORS). It contains more potassium and different concentrations of elements than those in standard ORS. However, the report emphasized the need for rapid attention to clinical factors, such as low body temperature (hypothermia) and low body sugar (hypoglycemia), as well as to less strictly medical factors such as meeting malnourished children's great needs for emotional support, and intellectual stimulation and play.

It also noted that measuring malnutrition could pose problems and therefore, difficult to place the issue on the policy and programme agenda. However, assessment and analysis techniques that are easy to use and understand, produce rapid results and are low in cost, are already on the shelf. These are:

- * A simplified way to look for Vitamin A, using "dark adaptometry" which estimates the impairment of the pupillary reflex by flashing a simple hand-held light.
- * Dipsticks' for iodine deficiency by analysing urine sample using reagent-treated testing strip or 'dipstick'.
- * Improved test kits for iodized salts using small plastic bottles of test solution that cause salt to turn blue if it is iodized.
- * Computerizing anaemia surveys using portable electronic haemoglobinometers.

Chapter I concluded on the note that more effective action for nutrition would be required and that all the technical advances described in the report, whether new research on nutrition and illness or better ways to detect problems, are not magic bullets. They will contribute to sustainable improvement in nutrition only if they sharpen the ability of people, including the poor, to assess and analyse the causes of malnutrition around them - and to plan and carry out appropriate responses. However, meeting these challenges the report noted, is a matter of political will because for the well-being and protection of children and the human development of the world, the course of action is clear.

Chapter II, which contains the statistical tables, presents vital indicators of the care, nurture and resources that children receive in their communities and countries. The chapter gives in tabular form the economic and social statistics on the nations of the world, with particular reference to children's well-being. A general note and the explanation of symbols were discussed, while countries are shown in descending order of their estimated 1996 under-five mortality rates. There are eight tables which give the broadest possible coverage of important basic indicators for nutrition, health, education and demography. Economic indicators and the situation of women, including the rates of progress and regional summaries are also available. They include complete data as available on less populous countries covering 193 countries in all, listed alphabetically.

COMMENTS

The report displayed a thorough understanding of the issues involved in malnutrition, which it rightly described as largely an invisible emergency. It is a good reference material that would guide both policy formulators and implementers particularly in the socio-medical arena on the full implications of malnutrition within the global context. The fact is that the issues facing policy makers and the arguments put forward in the discussion on the power of good nutrition and caring practices have remained the concern of Women in Development (WID). It has revealed the enormous task facing the governments of the world in overcoming entrenched poverty and underdevelopment, particularly the governments of the third world in South Asia and Sub-Saharan Africa. The developing countries overall external debt which was put at more than \$2 trillion in 1995, is a source of concern in the course of combating the basic causes of malnutrition. It is my candid opinion that countries with high debt profile should be assisted by the comity of nations such that they will have enough resources to marshall out actions that have been presented against malnutrition. This is imperative and is possible.

However, the fact that Nigeria is already tackling specific nutritional deficiencies in spite of our financial resource constraint is a good development which UNICEF has contributed in making possible. Nigeria has started iodizing the edible salt being marketed, and the means of enhancing the intake of Vitamin A has improved. In collaboration with the Family Support Programme, the brainchild of the First Lady, Dr. (Mrs) Maryam Sani Abacha, the immunization coverage for protecting children from preventable diseases rose from 17.0 per cent in 1995 to 49.1 per cent in 1996, owing to the National Programme on Immunization (NPI), launched in Abuja in mid 1996. Since a balanced approach is necessary for monitoring nutrition, programmes such as the Family Economic Advancement Programme (FEAP) which is a holistic programme is a very ideal strategy for achieving effective management of malnutrition. I therefore encourage UNICEF to embrace this programme.

A very important lesson that is worthy of note to Nigeria from the revelation in this report is that government intervention is a very effective tool for combating the problem of malnutrition and that "Everyone has an obligation to child rights". One therefore, feels that the Nigerian Government should increase funding to health and child care particularly now that the country is still faced with inadequate Medicare. However, the present government, through the efforts of the Petroleum (Special) Trust Fund PTF has made impressive marks in the area of drugs and other hospital needs. I would like to congratulate the government for its efforts in this direction. What we really need to do at this stage of our development may be, to review our national policies that are directly and indirectly affecting nutrition. This, however, (in the context of the Vision 2010 project) may have been addressed and it is my firm belief that relevant/direct policies in the area of education, information, agriculture, health and medicare addressed in the envisioned programme, would be implemented immediately so as to complement UNICEF's global efforts, while the Government is called upon to give immediate attention to indirect policies in the area of income and prices. Currently, the Nigerian purchasing power is very low and would slow down efforts being made to reduce malnutrition. It has been established by the Federal Office of Statistics (FOS) data that 69% of income of the average Nigerian is spent on food. Of this percentage, 41.48% is allocated to staples alone, while only 12.7% is spent on proteinous food. Medicare takes only 11%. This is indicative of the invisible problem of nutrition which we have been discussing.

Distinguished Ladies and Gentlemen, in conclusion, it is my pleasure and privilege to have reviewed this report. The report has been really enlightening to me and would like to quote from the report that "Government policies must reflect the right to nutrition". I therefore commend the efforts of UNICEF in putting this report together, particularly the statistical section. I recommend the report to the Government, Non-Governmental Organisations and all those interested in Health and Child care, particularly Women In Development group.

I thank you all for your attention.

MRS O.O. AKANJI

Deputy Director of Research
Statistical Services Division
Central Bank of Nigeria, Abuja.