Malnutrition in India

India cannot tackle hunger if it suppresses embarrassing data

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SOME of India's rulers have strong views on food. The home minister, Rajnath Singh, has called for a nationwide ban on slaughtering cows, which as a Hindu he considers holy. At least 20 Indian states and territories (out of 36) ban cow-killing. Since March it has been illegal to possess beef in Maharashtra, and lawmakers in Haryana say those who slaughter cows should be punished as severely as murderers. The education ministry suggests that vegetarian and non-vegetarian students should be segregated in some college canteens; another minister says beef-eaters should move to Pakistan.

Since India is roughly 80% Hindu, it is not surprising that Indian politicians pay respect to Hindu beliefs (many of which they passionately share). But if they care about people as well as sacred animals, they should worry about adding to the national menu, as well as cutting it back.

India has more malnourished people than any other country. Around 30% of children under five are underweight, according to the Rapid Survey on Children (RSOC), which was carried out in 2013 and 2014 by the UN and the Indian government. That is a welcome improvement from an estimated 43% a decade ago. But it still leaves children worse-fed in India than Africa and much less healthy than in China, where only 3% of them are underweight.

Favouring curry

Malnutrition leaves Indians weaker and more vulnerable to disease, but that is not the worst of it. When children are underfed it is not only their bodies that are stunted; it is also their minds. The country will

never fulfil its gigantic potential if the brains of its young people never develop properly for lack of nutrients. Fighting hunger harder should therefore be a national priority. Unfortunately, progress is slower than it should be, thanks to taboos, corruption and political pride.

Consider India's school-lunch scheme. Since the late 1990s pupils at public schools have been entitled to a free midday meal. The programme has reduced malnutrition and boosted attendance. Yet it could work much better if it were honestly and competently administered. The food served is sometimes rotten, and studies in some states find that a quarter of the subsidies are stolen. Now religious strictures are making things worse. The chief minister of Madhya Pradesh, a state with lots of poor and ill-fed children, recently banned eggs in school lunches because many people consider them non-vegetarian. This is a big mistake: eggs brim with protein and are hard to adulterate, unlike milk, which in India may be illicitly mixed with glucose, cooking oil or even detergent.

Political pride is stopping the publication of data that would help India's states learn from each other. The RSOC survey we cite is big, based on weighing 90,000 children and conducting 210,000 interviews. It was finished eight months ago. Yet apart from a few figures on immunisation rates released in October, the Indian government has failed to make its results public. The UN says the study is sound and blames the government for the delay. The most probable reason for that is because the report casts a shadow over Gujarat, the state once governed by Narendra Modi, the prime minister. *The Economist* has obtained the full RSOC report and is publishing much of the data this week (see article). Most states show gains, but Gujarat, though prosperous, has worse-than-average rates of child malnutrition. Plausible reasons for that include poor public hygiene and low rates of immunisation.

One reason Indians are less well-nourished than Africans is that more Indians defecate outdoors, so more contract diarrhoea and other diseases that make it harder for children, especially, to absorb the nutrients they consume. The failure to inoculate allows some of these diseases to spread. To deal with these problems, India would have to spend more than a risible 1% of GDP on public health. Alas, Mr Modi as prime minister has overseen cuts in health spending.

Rather than suppress embarrassing information, Mr Modi's government should publish any data that might help inform better policies. These should focus on girls and women, who are typically worse-fed than their brothers and husbands. Malnourished pregnant mothers give birth to malnourished babies. Even in the wealthiest 20% of Indian households, 26.5% of children are stunted and 17.5% are underweight. It is a fair guess that most of these are female. States, such as Kerala, that try harder to identify the vulnerable and provide them with education and health care achieve better results. Better food policies would make India happier—and cleverer, too.

Nutrition in India

Of secrecy and stunting

The government withholds a report on nutrition that contains valuable lessons

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A REMARKABLE story has been unfolding in the past decade in India. A new study—conducted by the government and the UN agency for children, Unicef—offers evidence of a steady and widespread fall in malnutrition. But the picture is still grim. Judged by measures such as the prevalence of "stunting" (when children are unusually short for their age) and "wasting" (when they weigh too little for their height), India is still vastly hungrier than Africa.

India's government has been sitting on the report for months, though it has been ready since at least October. One rumour suggests official concern about the quality of the data, but Unicef has voiced no such worry. Another possible reason is the pride of India's prime minister, Narendra Modi, who ruled Gujarat for a dozen years. The new data indicate his relatively prosperous state performed worse than many poorer ones. *The Economist* has obtained the report, known as the Rapid Survey on Children (RSOC). It shows gains at both national and state levels.

Much of what hitherto was known about nutrition in India came from the National Family Health Survey (NFHS) conducted by the government in 2005 and 2006. Work on a follow-up is under way. Unicef and the government agreed in the meantime to conduct the RSOC. It involved 210,000 interviews across 29 states and territories in 2013 and 2014; more than 90,000 children were measured and weighed, as well as 28,000 teenage girls.

Unicef's nutrition adviser for South Asia, Victor Aguayo, says India's overall gains have been "unprecedented". A decade ago 42.5% of all children under five were underweight. Now the reported rate is just below 30%. That improvement coincided with a period of rapid economic growth, rising household incomes and more spending on welfare such as free cooked midday-meals in schools. Madhya Pradesh in central India cut the proportion of its children who go hungry from 60% to 36%; Bihar in the north, from 56% to 37%.

The case of Maharashtra, a wealthy state on the western coast, is revealing. The proportion of children there who are underweight fell from 37% to 25%. Mr Aguayo cites Maharashtra as a "good example" of how to deal with malnutrition, identifying four crucial changes there: better and more frequent feeding of infants, more care for pregnant women, higher household incomes and a rise in the age at which women begin having babies. Officials and politicians in Maharashtra played a crucial role by helping to target worst-afflicted groups such as tribal people known as *adivasis*.

Other national trends follow similar patterns. The RSOC suggests that the proportion of children who are wasted fell from nearly 20% to 15%, and the stunting rate fell from 48% to nearly 39%. Yet still, more than half of children in Uttar Pradesh, a massive northern state, are below normal height. And amazingly, even among the wealthiest fifth of Indian households, more than a quarter of children are stunted. This may be because of sexism: mothers and girls get less food, health care and education than males. Over half of all girls aged 15-18 had a low body-mass index, meaning they were likelier to produce undernourished babies.

The RSOC highlights several failures. A deworming campaign has achieved little: not even 28% of under-fives had been given a recent dose. And though many women gave birth in institutions, fewer than half of babies were, as the WHO recommends, breastfed within an hour of birth.

India's age-old habit of defecating in the open—which distinguishes it from many other developing countries—makes matters worse. The proportion of Indians who do this has fallen from 55% a decade ago to 45%, but that is more than enough to help spread diseases, worms and other parasites that make it more difficult to absorb nutrients even when food is abundant. Poor public hygiene may account for much of India's failure to make faster improvements in nutrition. There is a clear correlation between open defecation and hunger (see chart).

Coincidentally or otherwise, states run in the past decade by Mr Modi's Bharatiya Janata Party (BJP) appear to be laggards compared with several states that are (or were) under the control of rivals. The most sensitive example is Gujarat, which Mr Modi has touted as a model because incomes there are high. The RSOC shows that the proportion of hungry children in the state fell from 44.6% to 33.5%, but that remains worse than the national average. Maharashtra next door has similar incomes and has fared much better. Gujarat is also worse than average for stunting (42%), severe stunting (18.5%) and wasting (18.7%). Nearly two-fifths of its population defecate out of doors.

Asked about child malnutrition in Gujarat in 2012, Mr Modi told the *Wall Street Journal* that it was a middle-class, vegetarian state, and that: "The middle class is more beauty conscious than health conscious...If a mother tells her daughter to have milk, they'll have a fight. She'll tell her mother, 'I won't drink milk. I'll get fat." Some found that answer about as satisfying as a cardboard biryani.

Amartya Sen, an economist and Nobel laureate, says Mr Modi does not provide strong leadership on health policy. He notes that spending on health care fell in this year's national budget. India devotes barely 1% of GDP to it, far behind China, for example.

In African countries, the proportion of children who are underweight is 21%—well below India's level. For India to match that, more states will have to act like Maharashtra. Growth alone is not enough. Politicians also need to help women and other vulnerable groups get the food, medicine and toilets they need.