

Better nutrition, better future

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A family sleeps on a sidewalk in Phnom Penh. Malnutrition is a common problem among the rural and urban poor. Photograph: Sovan Philong/Phnom Penh Post

Cambodia's gross domestic product grew by an average of 8.2 per cent between 2000 and 2010, making it the world's 15th-fastest-growing economy, according to the World Bank.

The Kingdom's economic performance remains strong – 6.9 per cent growth last year – driven by robust expansion of exports, private investment and consumption.

This is a remarkable achievement for the Cambodian people, who have worked hard to overcome conflict and fragility.

During the same period, maternal mortality has dropped by more than half and child mortality by almost two-thirds, already exceeding Millennium Development Goal targets.

Despite these impressive accomplishments, malnutrition remains a serious problem. Nearly 40 per cent of Cambodian children under the age of five are short for their age, according to the 2010 Cambodia Demographic and Health Survey – one of the highest rates in the region.

Twenty-eight per cent of children in the same age group are underweight. Of those, almost 11 per cent are dangerously thin and more than half are anaemic.

Why should we be concerned? Because malnutrition has irreversible effects on health and human development.

The first 1000 days, from the beginning of pregnancy to a child's second birthday, are considered a critical "window of opportunity" during which poor nutrition can result in stunted growth, diminished immune response, impaired intellectual ability, poor school performance and lower economic productivity.

Early-life malnutrition is also associated with increased risk of diabetes, cardiovascular disease and other non-

communicable illnesses later in life.

This means the economic costs of malnutrition are substantial, and need to be addressed to sustain Cambodia's future economic growth.

It is estimated that individual productivity losses are approximately 10 per cent of lifetime earnings.

Vitamin and mineral deficiencies alone cost Cambodia more than US\$140 million each year.

The Royal Government of Cambodia recognises the challenge. In May this year, it convened a national seminar on food security and nutrition to strengthen the national response, and it has taken significant steps towards improving nutrition.

Tackling nutrition requires a multi-sectoral approach, including improved maternal and child-care practices, and more equitable access to clean water, sanitation and health services. These demands are a challenge for many governments.

This is why it is important for civil society, donors and other partners to work with Cambodia, engaging the principles of development effectiveness.

The World Bank and bilateral partners such as Australia and the United Kingdom's Department for International Development can contribute by mobilising global knowledge and resources to ensure that the full spectrum of development work, ranging from health, water and sanitation to gender, will have a positive impact on nutrition.

From experience, we know well- designed cash-transfer programs can encourage poor pregnant women and children to use health services, including nutrition programs.

Specific, community-driven development programs have also helped reduce stunting in children.

In agriculture, priority can be given to policies that provide diverse diets for women and children.

In Cambodia, Australia (through its AusAID organisation), Britain's Department for International Development, UNICEF and the World Bank provide pooled financing for the Royal Government's Second Health Sector Support Program, which includes support for vitamin A distribution and communication campaigns to promote improved child-feeding practices.

But more can be done. Nutrition is considered one of the most cost-effective investments in development, with very high returns in the form of better school outcomes, higher work productivity and improved health.

It is also the critical multiplier goal, offering a strong opportunity for preventive action. Improved nutrition will contribute to every other goal, with positive implications for child mortality, maternal health, cognition and poverty.

On the closing day of the London Olympics, British Prime Minister David Cameron and Brazilian Vice-President Michel Temer hosted a summit to urge the world to take decisive action to transform lives by addressing the problem of maternal and child malnutrition.

They said: "It is only by acting together in genuine partnership that we can identify and implement collective responses and produce concrete results to tackle malnutrition."

It is time for action. The international community, working in partnership with government and civil society, can rise to the challenge facing the children of Cambodia.

Britain has made a global commitment to reach 20 million children under the age of five and pregnant women with nutrition programs by 2015, and its ongoing support of Cambodia's health-sector program will contribute to that.

Australia, already a big contributor to the health sector, has committed to increase its support for maternal and child health in Cambodia.

The World Bank, a development institution representing 188 member countries whose mission is to eradicate poverty,

stands ready to work with development partners to fulfil a collective responsibility to help Cambodians end malnutrition.

Annette Dixon is the World Bank country director for Cambodia, Mark Gooding the British ambassador to Cambodia and Penny Richards Australia's ambassador to Cambodia.

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