Why Development Assistance Can’t Wait

We’ve all heard the old adages on procrastination: a stitch in time saves nine and so forth. The temptation is to just pay lip service. Maybe this latest problem isn’t truly urgent. A homeowner, for example, may say to herself, maybe I’ll have more time/money/enthusiasm for repairing the gutters next week—or next month.

It’s quite possible that nothing will go wrong if the gutter repairs are put off. On the other hand, a bad storm could cause water damage to the interior of the house. The homeowner is playing the odds: what is the likelihood of the worst-case scenario, and how bad would it be if it did happen?

• Foreign assistance focuses on prevention. This is critical in the case of early childhood nutrition and, of course, when there is a possibility of famine.

• Malnutrition is most dangerous during the 1,000-day window between pregnancy and age 2, when it can cause death or irreversible physical and cognitive damage. Early childhood malnutrition can also drain a country’s development potential.

• Yet early malnutrition can be prevented at a modest cost with basic nutrition care.

• Famine early warning systems are now sophisticated, forecasting accurately up to a year in advance. Foreign assistance cannot prevent natural disasters, but it can help save many lives.

• The potential human consequences of inaction—particularly for children under 2—should be weighed carefully in decisions about emergency relief.

• U.S. development assistance should focus on resilience—equipping people to develop strategies to cope with threats to their food security.
*Development Works* explains why U.S. development assistance is important. This chapter offers two examples—each affecting hundreds of millions of people—of why development assistance cannot wait until we have more money or enthusiasm for it.

**Opening the Window of Opportunity**

We all know that very young children develop quickly. One day they can barely sit up, and three months later, they're walking. It's almost literally “blink and you miss it.”

The scientific consensus is that this period—from pregnancy through a child’s second birthday—is the most important time not to go hungry, precisely because of this rapid pace of development. It’s often called the 1,000-day window of opportunity.

Children who are malnourished during the window don’t really get a second chance. They have a much higher risk of infections, illnesses, and death. One-third of all deaths among young children are caused by malnutrition. Those who survive will not be able to catch up by eating healthy meals and taking extra vitamins in kindergarten. Damage from malnutrition during the 1,000 Days lasts a lifetime.

The percentage of children with stunted growth is an accurate indication of the severity of a nation’s malnutrition burden. Being very short for one’s age is the most obvious sign of chronic malnutrition, but stunting has far deeper implications. For their entire lives, stunted children will be more susceptible to both infectious and noninfectious diseases. Their cognitive development has also been stunted; they will finish fewer grades in school and earn less income.

This is obviously a tragedy for the children and their families. It also drains the potential for development of entire countries. In some developing countries, more than 40 percent of all children are stunted. The world—particularly developing countries—faces complex problems. We can’t afford to miss the window of opportunity, tilting the odds permanently against so many children who are still toddlers.

The Copenhagen Consensus is a group of world-renowned economists who named fighting malnutrition the top priority and best use of development resources. As Nobel laureate economist Vernon Smith put it, “The benefits from [reducing malnutrition]—in terms of increased health, schooling, and productivity—are tremendous.”

The good news is that we now know how to ensure that children are well-nourished at age 2—and it’s not complicated. It requires straightforward actions such as ensuring that pregnant women get essential nutrients, supporting new mothers in breastfeeding exclusively for six months, treating children for worms and diarrheal diseases, and providing supplemental vitamins and minerals.

This may sound expensive, but the dollar figures, both in absolute terms and in the “return on investment” of giving children a fair chance in life, are modest. For example, recent research by IFPRI shows that a specific package of nutrition actions could reduce chronic malnutrition by 36 percent. The cost? Just $100 per child.

More good news—that child nutrition efforts can bring quick results—comes from the Scaling Up Nutrition (SUN) Movement, a group of developing countries (31 at last count) and international organizations working together to expand effective nutrition actions during the 1,000 Days. SUN countries each develop a plan that includes specific targets to improve maternal/child nutrition.

SUN reports, “Countries which have taken concerted action to reduce [malnutrition] have shown remarkably fast rates of reduction. Brazil, Peru, Thailand and China are among these. This shows what can be done with the
right policies and [programs] in place. Through SUN, these countries can influence and support others to do the same.”

SUN is part of the energy—the increased global leadership and political commitment of recent years—that is fueling progress against hunger. Many of the poorest countries are sharing in this progress.

The SUN Framework for Action includes tasks such as increasing children’s consumption of vitamins and minerals. “Making Snacks More Nutritious” was the theme of a meeting attended by Bread for the World Institute staff in Chaumala, a village outside the city of Dhangadhi in western Nepal. The gathering of about 25 women with young children was made possible by U.S. development assistance, which funded Nepal’s Action Against Malnutrition through Agriculture (AAMA) project.

Young women demonstrated how to prepare and cook the snack, cutlets made of potatoes and seasonal green vegetables coated in an egg-based batter. They are a more nutritious but still affordable alternative to plain fried potatoes. Afterward everyone sampled the cutlets, served with sliced sweet potato. Luckily, they were a hit with their most important critics—the toddlers who most need those nutrients.

Another key “component” of AAMA could be heard quite clearly: several squawking hens in a wooden coop. Parents need information (for example, growing children need protein) and skills (how to incorporate two eggs into a family meal). But, of course, children won’t actually consume more protein unless families can produce or purchase protein-rich foods. Training in poultry management is what makes it feasible to include eggs in the diets of young children from families of modest means. Once an AAMA participant receives training in how to keep poultry healthy, she is given a gift of five laying hens so her children can begin to benefit from eggs, a “renewable resource.”

In Nepal, AAMA is implemented by U.S. nonprofit Helen Keller International. Its staff, almost all Nepali, keep careful records and use them to determine how well strategies or activities are working. During the five-year project, this region of Nepal improved by 42 percent to 92 percent in categories such as “the percentage of children ages 6 to 24 months who eat four or more food groups a day” and “the percentage of women and children who eat a plant-source food rich in iron and Vitamin A every day.” That translates into many more children who will be able to contribute fully to their communities.

**Hunger Emergencies: Hindsight Is 20/20**

If there’s one time when prompt international assistance is urgently needed to save lives, it is when famine strikes. The most devastating recent example is Somalia in 2011. How did as many as 100,000 Somali children die of hunger in just months? Will the world be able to prevent future famines?

Development assistance has no power to change many of the factors that contributed to the famine in Somalia. Two of these are armed conflict and the absence of a functioning national government; there are others.

But this does not mean there is nothing the global community can do to respond effectively to hunger emergencies and save many lives. One reason for hope is progress on developing early warning systems. U.S. development assistance funds the Famine Early Warning Systems Network (FEWS NET), which relies on sophisticated methods of gathering and analyzing data (trends in weather, food prices, malnutrition rates, livestock mortality, and so on).

According to nonprofit development organizations Oxfam and Save the Children, in their 2012 report, *A Dangerous Delay: The Cost of Late Response to Early Warnings in the 2011 Drought in the Horn of Africa*, the early warning system functioned well, raising concerns in August 2010 and
again in November 2010. *A Dangerous Delay* argues that humanitarian relief would have done more good if donors and relief organizations had thought in terms of the likelihood and severity of a crisis (as the homeowner mentioned earlier did when considering gutter repairs).

“It would have been clear from around January 2011,” the report says, “that the high probability of poor March–May rains in the Horn of Africa, magnified by the failure of the previous rains in late 2010, would constitute a critical risk.”

[Image of a chart showing Humanitarian funding for Ethiopia, Somalia, and Kenya, May 2010 to October 2011.](chart)

Southern Somalia exceeded the U.N. trigger for emergency action—a malnutrition rate of 15 percent—in August 2010, when malnutrition reached 16 percent. By January 2011, it was 25 percent. But funding for relief did not rise significantly until August 2011, once famine was declared.

As the saying goes, “Hindsight is 20/20.” Donors may have worried that releasing emergency funding unnecessarily or prematurely would be worse. (“What if it’s not as bad as they say, and we look like we’re wasting money?” Or: “What if we spend the money, and later there’s a real emergency?”). Decision makers should carefully weigh the details of the early warnings, and the potential consequences of not sending help in time, against these concerns.

As the *Dangerous Delay* report points out, record high malnutrition rates are not the early warning. They are the disaster itself. Not responding quickly means the costs are largely borne by children under 2, since even short periods of malnutrition can cause them long-term damage.

Where Prevention Really Starts

Southern Somalia had an acute malnutrition rate of 16 percent—higher among young children—“before” the crisis, when no one was calling the situation an emergency. Everyday life is perilous for most Somalis. In richer countries, we often consider disasters an exception to normal life. A “state of emergency” is declared, help is rushed in, and we expect that, even after major disasters such as Hurricane Sandy in 2012, things will return to normal.

In poor countries, where the lines are far more blurred, thinking of hunger caused by “disaster” as separate from “normal,” everyday hunger may interfere with the search for lasting solutions. After all, airlifts of emergency supplies won’t continue indefinitely, but cycles of “disaster” and “normal” may, particularly given climate change.

What’s needed, but not yet in place, is a bridge between assistance for emergencies and sustainable development. U.S. development assistance should focus on enabling poor communities to build resilience—equipping and supporting them to develop strategies to cope with the many factors beyond their control. Greater resilience is urgent now and will only grow more urgent. USAID took an important step forward in December 2012 with the launch of its first-ever Resiliency Policy.

Resilience can, in fact, be built. Ethiopia is Somalia’s neighbor and its people also suffered greatly during the 2011 drought. But because “building resilience” was already under way, Ethiopian children did not die by the thousands, and far fewer people needed emergency aid than during the previous drought.

In the intervening years, Ethiopia established a Productive Safety Net Program, established new health centers that enabled many more people to reach nutrition support in 2011, and made efforts to help the most vulnerable diversify their ways of earning a living.

U.S. development assistance helped. A Pastoralist Livelihood Initiative project improved livestock survival rates by 10 percent, which made a big difference as families started over. Another U.S.-funded project, in Ethiopia’s Oromiya region, gave participants food in exchange for clearing an access road to the nearest town. The road is making a lasting difference to the local economy because it cuts the time to get crops to market from about three days to only half a day.

Development assistance can’t wait for a more convenient time because it is about human beings and our basic needs—needs that cannot be changed. U.S. development assistance can help people become well-nourished and resilient, but only if we don’t put off making it available.
Myth: Not much can be done to improve child nutrition without money—a lot of it.

Reality: For about $8, a child can be provided with a package of nutrients and medications designed to help prevent irreversible damage from malnutrition. Thus, the United States helps large numbers of children even with our current modest nutrition assistance budget (about $95 million a year).

Nutrition during the 1,000-day window is in the category of “things it’s too expensive not to do,” since it can cost a country as much as 11 percent of its economic output in lost productivity, not to mention significant extra healthcare costs.

Realizing how critical early nutrition is, national governments are the main investors in SUN countries’ nutrition initiatives. Ghana, Nepal, and Tanzania, for example, have tripled national resources dedicated to nutrition.

Myth: There’s nothing we can do to prevent famine. It’s been happening for thousands of years.

Reality: Drought, hurricanes, and the like are natural phenomena. People cannot prevent or control them. Famine in the 21st century is a human failure. It happens simply because people who need help do not receive it in time.

In many instances, prevention is far less costly than post-famine recovery efforts. In Ethiopia, for example, studies showed that restocking sheep and goats cost at least 6 times more than providing food for animals so they could survive drought. Restocking cattle cost 14 times more than supplementary feeding.
Countries Making the Fastest Gains Against Child Malnutrition

Top 15 countries with fastest progress (annual % decrease in stunting)

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<tr>
<th>Country</th>
<th>Annual % Decrease</th>
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<tr>
<td>Uzbekistan</td>
<td>6.7%</td>
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<td>Angola</td>
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<td>China</td>
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<td>Turkmenistan</td>
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<td>Brazil</td>
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<td>Vietnam</td>
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<td>Bangladesh</td>
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<td>Cambodia</td>
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Average annual rate of reduction in child stunting (%), ~1990-2010

-8% -6% -4% -2% 0% 2% 4% 6% 8%


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