

The Economic Case for Investing in Nutrition in sub-Saharan Africa¹ Summary of Key Findings – 23 May 2016

Good nutrition is not just an outcome of development, but also a driver of human development and economic growth. Better nourished populations are more economically productive. Africa's future economic success lies in increasing human capital, which is an important determinant of labor productivity and raising labor productivity lies at the heart of raising incomes across Africa.

Undernutrition in sub-Saharan Africa remains pervasive. Across Africa, 56 million or 36% of children under the age of 5 are chronically undernourished and 13 million or 8.5% are acutely undernourished. Micronutrient deficiencies are widespread and overweight and obesity is increasing.

Malnutrition continues to be one of the main barriers that prevents children and societies from realizing their full potential, and hence represents a significant economic burden. Investing in nutrition interventions, along with policy actions to address the underlying causes of malnutrition would help millions of children to develop into healthy and productive members of society.

Key Findings:

- The Cost of Hunger in Africa reports found that malnutrition imposes high social and economic costs. It costs African economies **between 3 and 16% of GDP** annually. National estimates for the cost of undernutrition include (in % of GDP)²:

Ethiopia: 16.5%	Malawi: 10.3%
Rwanda: 11.5%	Burkina Faso: 7.7%

- New research released today based on analysis by John Hoddinott shows **that for 15 African countries, meeting the 2025 World Health Assembly target for stunting will add \$83 billion** to national incomes. This includes approximately:

Benin: \$1.6 billion	Niger: \$5.5 billion
Chad: \$3.7 billion	Nigeria: \$29.3 billion
Ethiopia: \$15.9 billion	Rwanda: \$1 billion
Lesotho: \$151 million	Senegal: \$1.7 billion
Madagascar: \$1.8 billion	Togo: \$842 million
Malawi: \$1.5 billion	Uganda: \$7.5 billion
Mali: \$2.8 billion	United Republic of Tanzania: \$8 billion

- The benefit:cost ratios of 15 African countries indicate that investments to reduce chronic undernutrition are excellent investments. Any investment with a benefit:cost ratio that exceeds one is a good investment. Benefit:cost ratios associated with reduction in stunting assessed in this analysis includes:

Senegal: 21.2: 1	Benin: 16.2: 1
Uganda: 17.4: 1	Togo: 15.8: 1
Niger: 17.1: 1	Mali: 14.2: 1

For additional information: <http://glopan.org/news/achieving-nutrition-security>



¹ Summary is based on new analysis by John Hoddinott, "The economics of reducing malnutrition in Sub-Saharan Africa," May 13, 2016, produced for the Global Panel on Agriculture and Food Systems for Nutrition.

² Figures from the Cost of Hunger in Africa reports, www.CostofHungerAfrica.com. Project led by the African Union Commission (AUC) and the New Partnership for Africa's Development (NEPAD) Planning and Coordinating Agency and supported by the UN Economic Commission for Africa (ECA) and the UN World Food Programme.

Investing in Nutrition: Costs to Scale Up in Sub-Saharan Africa Driving Progress Towards the Malabo and Global Nutrition Targets

There is an urgent need for global action on nutrition. In 2012, the 194 member states of the World Health Assembly (WHA) endorsed the first-ever global targets to improve nutrition focusing on six areas: stunting, exclusive breastfeeding, wasting, anemia, low birth weight, and overweight. While some of the targets were enshrined within Sustainable Development Goal 2, the world is not on track to achieve any of the six nutrition targets.

Accelerating progress against malnutrition will require investment in both proven nutrition interventions and research to understand how to bring promising solutions to scale in a cost-effective manner. To inform action, the World Bank, Results for Development Institute, and 1,000 Days, with support from the Bill & Melinda Gates Foundation and the Children's Investment Fund Foundation conducted an in-depth costing analysis and developed an investment framework for achieving four of the six global nutrition targets:

Stunting: 40% reduction in the number of children under-5 who are stunted

Anemia: 50% reduction of anemia in women of reproductive age

Breastfeeding: Increase rate of exclusive breastfeeding in first 6 months up to at least 50%

Wasting: Reduce and maintain childhood wasting to less than 5% from 8%

Building on these, African leaders agreed the Malabo targets in 2014, which included a commitment to reduce stunting to 10% by 2025 and reduce underweight to 5%.

Key Findings:

- Achieving these four global nutrition targets in sub-Saharan Africa would require an increased investment of approximately \$2.7 billion/year for 10 years. This represents investment from across partners, including governments, donors, businesses and other sources. Achieving the targets would require increased investment of approximately \$1.8 billion/year from donors **and \$750 million/year from African governments** over the next decade. Achieving just the stunting target would translate into the significant GDP growth described previously.
- While this is a significant sum, progress toward these targets can be catalyzed by focusing initial investment on a core set of the most cost-effective interventions. **These priority interventions (those bolded above) can be implemented across sub-Saharan Africa for increase in spending with \$203 million/year from African governments and \$400 million additional from donors.**
- These are eminently achievable in the next few years and are an affordable first step. Countries and donors alike should make specific financing commitments to realize this priority package by the 2nd Nutrition for Growth summit, tentatively set for summer 2017.

Interventions included in costing

- **Vitamin A supplementation**
 - **Promotion of good infant and young child nutrition and hygiene practices**
 - **Multiple micronutrient supplementation in pregnancy**
 - **Intermittent preventive treatment of malaria for pregnant women**
 - **Treatment of severe acute malnutrition**
 - **Iron folic-acid supplementation**
 - **Food fortification (wheat and maize flour)**
 - **Pro-breastfeeding social policies**
 - **National breastfeeding promotion campaign**
 - Public provision of complementary foods
 - Prophylactic zinc supplementation
 - Balanced energy-protein supplement
- Bolded interventions are in the priority, most cost effective package*

For Additional Information: www.thousanddays.org/the-issue/invest-in-nutrition/