

## BOX 5

## Fighting Child Malnutrition in Sri Lanka amidst the Economic Crisis

## Introduction

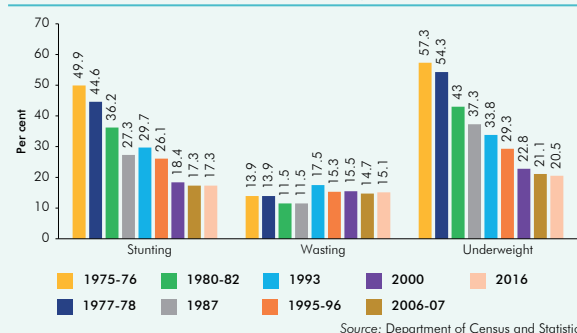
Rising malnutrition among children has become a forefront policy concern in Sri Lanka amidst heightened food insecurity of households caused by the host of economic and social issues that exacerbated during the economic crisis in 2022. According to the World Health Organisation (WHO), malnutrition refers to deficiencies or excesses in nutrient intake, imbalance of essential nutrients, or impaired nutrient utilisation. Thus, it entails a double burden of undernutrition and overnutrition. Undernutrition occurs in the form of wasting (low weight for height), stunting (low height for age), being underweight (low weight for age), and micronutrient deficiencies. Overnutrition is a health risk, which develops along with abnormal or excessive fat accumulation in the human body that can result in overweight and ultimately obesity concerns. Malnutrition among the population is perceived as a growth regressive factor, with its direct influences on human capital productivity and intergenerational impact on human capital augmentation in the long run. According to the report on State of Food and Agriculture (2013) by Food and Agriculture Organisation of the United Nations, malnutrition imposes a global social and economic burden of an estimated US dollars 3.5 trillion annually, which is approximately equivalent to US dollars 500 per person, per annum. Given the critical role of human capital in economic growth, the issue of malnutrition has gained significant global attention, resulting in the implementation of a plethora of policy measures aimed at combatting it across the world. Sri Lanka adopted its first National Nutritional Policy (NNP) in 1986 and carried out numerous nutrition schemes to reduce malnutrition and improve the nutritional status of the population. Despite the improved status of human development indicators, the progress made in combatting child malnutrition has remained stagnant for several decades, underlining the flaws of nutrition interventions and persistent income inequalities within the economy. Against this backdrop, food security and nutrition anomalies of the population have been further exacerbated by the pandemic and thereafter by the worsened economic crisis via many channels, including surging food prices, supply chain disruptions caused by the energy crisis, shortages in food commodities, loss of livelihood and the decline in disposable income, among others.

## Child Malnutrition Status of Sri Lanka Prior to the Economic Crisis in 2022

Since independence, Sri Lanka has embarked on numerous initiatives to enhance the socio-economic wellbeing of citizens via numerous programmes on food security, nutrition, safety net schemes, etc. They

include provisioning of school meals, provisioning of food/cash allowances for pregnant and lactating mothers, the Thripasha programme, school water sanitation and hygiene programmes, and the salt iodisation programme, among others. Reflecting the impact of these efforts and commitments spanning over several decades, malnutrition among children declined remarkably during the period from 1975 to 1995, with stunting among children below five years of age almost halved to 26.1 per cent in 1995, compared to 49.9 per cent in 1975, while the underweight child population declined to 29.3 per cent in 1995 from 57.3 per cent in 1975. However, the progress towards alleviating malnutrition has moderated over the last few decades. According to the latest Demographic and Health Survey (DHS) - 2016, prevalence of wasting in children under five years remained at 15.1 per cent, reaching the emergency threshold level of wasting among children. Also, the prevalence of wasting among children under five years showed no significant progress in the survey rounds since 1995/96 to the 2016 period. According to the World Bank statistics, Sri Lanka ranked the second worst affected country in the South Asian region in terms of wasting among children under five years. Further, underweight among the same group of children remains around 20.0 per cent since 2000, while no significant advancement was reported in terms of children with stunted growth.

Figure B 5.1  
Child Malnutrition Status (below 5 years old)  
(1975-2016)



Meanwhile, the persistent disparities in malnutrition prevalence across regions and economic sectors in the country suggest that nutrition anomalies remain unresolved for a prolonged period. Across residential sectors, the estate sector has become the most vulnerable sector with the highest prevalence in stunting and underweight children under five years. According to the DHS-2016, around 31.7 per cent of children in the estate sector are stunted, compared to 14.7 per cent in urban areas and 17.0 per cent in rural sector. Further, 29.7

per cent of children under five years in the estate sector were underweight. Across districts, the highest prevalence of underweight and stunted children under five years was reported in Nuwara Eliya. The spatial disparities in nutritional status are primarily attributable to the socio-economic factors, such as economic security, access to health and education, connectivity, infrastructure development, etc. For instance, the mother's education level has been recognised as a major factor that influences the nutritional status of children. As such, the prevalence of stunting and underweight children born to mothers with no formal education is as high as 37.6 per cent and 33.9 per cent, respectively, compared to those of 12.1 per cent and 10.0 per cent reported, respectively, of children born to mothers with educational qualifications of degree or above. The Child Multidimensional Poverty Indicator (CMPI) of Sri Lanka, which is based on Household Income and Expenditure Survey-2019, signifies that one third of children aged 0-4 years are multidimensionally poor and either underweight or stunted. Meanwhile, the Sustainable Development Report 2022 (Sachs. J. et al., 2022) shows that Sri Lanka is lagging behind in progressing towards the zero hunger target by 2030, as reflected by moderate improvements in hunger indicators, which remained insufficient to attain the Sustainable Development Goals targets as envisaged.

### Impact of the Current Economic Crisis on the Nutritional Status of Children

The UNICEF conceptual framework for malnutrition,<sup>1</sup> identifies economic factors as one of the major primary underlying causes of malnutrition, which could have a detrimental impact on the nutritional status of the population. Turbulent economic conditions can particularly disrupt supply channels and food systems, as well as means of income of the people, thereby directly impacting the nutritional well-being of the population by reducing households' access to and the affordability of nutritious food. Economic shocks often drive marginalised population to prioritise consumption of calorie-rich but nutrient-poor food, leading to a deterioration in dietary quality and eventually resulting in increased malnutrition.

Sri Lanka exemplifies how its worst economic recession on record and the resulting heightened macroeconomic instabilities have created unprecedented and far reaching social and economic consequences, of which deterioration in nutritional wellbeing of the population,

particularly child malnutrition represents a deep concern that carries a generational burden. With the crisis induced supply chain disruptions and higher cost coupled with drop in domestic food production due to acute fertiliser shortages, food prices in Sri Lanka started to escalate since the latter part of 2021, recording the historically highest food inflation (CCPI) of 94.9 per cent in September 2022, compared to 9.2 per cent at end 2020 and 22.1 per cent at end 2021. Despite some deceleration observed in food inflation since the latter part of 2022, food prices remained elevated during 2022. The surge in inflation caused a significant deterioration in the real income of households, while loss of livelihoods, particularly in the informal sector due to the crisis has exacerbated the household burden. With the informal sector accounting for 58.4 per cent of employment and a poverty level of 14.3 per cent, the potential consequences of economic turmoil on livelihoods, food security, and nutritional status remain significant. This compels households to adopt alternative coping strategies during the crisis.

According to the Remote Household Food Security Survey of the World Food Programme (WFP), which consists of 2,137 surveys across all nine provinces conducted through a computer assisted telephone interviewing data collection approach, the food security status of the country remained vulnerable as at end 2022, with 68.0 per cent of the population adopting food based coping strategies by limiting portion sizes, reducing the number of meals, and relying on less preferred food. Meanwhile, a portion of population of around 40 per cent has resorted to livelihood based coping strategies by reducing their spending on education and health, which could eventually lead to deterioration in long term nutritional conditions and wellbeing. The latest official assessment of the Family Health Bureau of Ministry of Health that was conducted under the concept of Nutrition Month in October 2022 on nutritional status of children under five years, reveals that the nutritional status of children deteriorated in 2022 reflecting the decline in household wellbeing during the economic crisis. The assessment results indicate a worsening in all major nutrition indicators for children, particularly, stunting, wasting, and underweight in the under five-year age category. At the national level, the percentage of underweight children under five years increased to 15.3 per cent in 2022 from 12.2 per cent in 2021. Both stunting and wasting among children under five years increased to 9.2 per cent and 10.1 per cent, respectively, in 2022, from 7.4 per cent and 8.2 per cent, respectively, recorded in 2021. However, the percentage of overweight children showed some improvement in 2022.

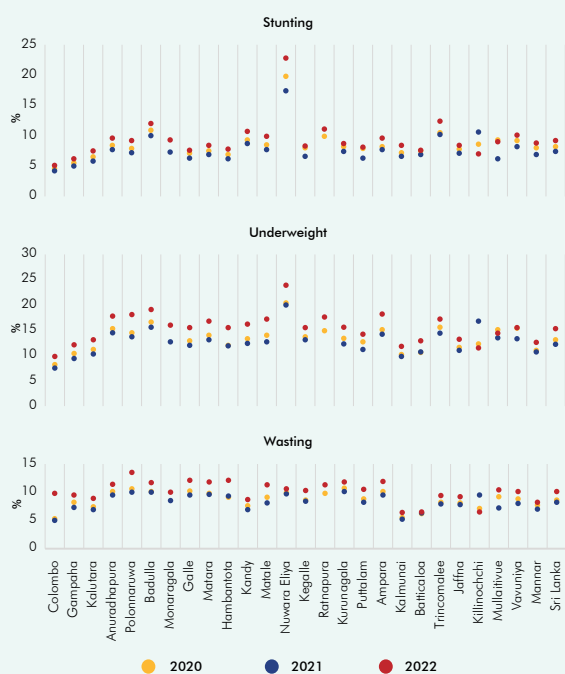
1. The immediate causes of malnutrition are poor dietary intake (quality/quantity), physical inactivity and disease conditions, while household food insecurity, inadequate care for children and women, sub-optimal health service delivery and sedentary lifestyle and behaviours are considered underlying causes of malnutrition. The basic causes of malnutrition are socio-cultural, economic, and political factors as well as climate variability and weather extremes. These factors could affect both availability and affordability of food.

Table B 5.1  
Recent Statistics of Child Malnutrition Status

Indicator	% of Children under 5 years age						
	2016	2017	2018	2019	2020	2021	2022
Underweight	15.6	14.5	14.3	14.0	13.1	12.2	15.3
Stunting	9.2	9.0	8.9	8.4	8.2	7.4	9.2
Wasting	11.3	11.1	10.2	9.9	8.6	8.2	10.1
Overweight	0.5	0.5	0.6	0.6	0.8	0.8	0.6

Source: Family Health Bureau, Ministry of Health

Figure B 5.2  
District Level Worsening Status of Child Malnutrition



Source: Family Health Bureau, Ministry of Health

According to the Survey, child malnutrition has deteriorated in most districts, exacerbating the existing nutrition anomalies among children across the country. The Nuwara Eliya District had the highest percentage of stunted children, with a reported percentage of 22.8 per cent, while the Colombo District had the lowest percentage of stunted children of 5.1 per cent. Further, the Nuwara Eliya District reported the highest percentage of underweight children under the age of five, at 23.9 per cent, while the Colombo District had the lowest percentage of underweight children at 9.8 per cent. It is apparent that nutrition anomalies in the country have been persisted despite government intervention efforts, and these inequalities are likely to worsen during economic crises unless addressed cohesively.

## The Government's Responses

To combat the devastating effects of the economic and food crisis on the nutritional status of the population and prevent further deterioration of malnutrition conditions, the Emergency Nutrition Plan for 2022-2024 was developed by the Ministry of Health. The plan aims at addressing critical issues, such as food availability and affordability inequalities, gaps in health system services for vulnerable groups, and communication and empowerment gaps to prevent nutritional problems. Accordingly, all the stakeholders are involved in planning and implementing identified strategies and key activities of the plan, while also monitoring progress at each level of implementation. Meanwhile, several financial assistance programmes were implemented by the Government targeting vulnerable populations, including low income pregnant mothers, lactating mothers, women headed families, children under five years, and people suffering from malnutrition with the assistance of the international agencies. These programmes were aimed at ensuring food security for households, while measures were taken to continue the provisioning of balanced meals to school children through school meal programmes. Meanwhile, provisioning of supplementary therapeutic food for severely malnourished children continues, along with other health services provided through the Family Health Bureau.

## Policy Agenda to Combat Child Malnutrition

Policy initiatives taken by successive governments to combat child malnutrition have been insufficient to withstand sudden socio-economic shocks. This underscores the need for reformulating strategies aimed at preserving food security and alleviating malnutrition within a multisectoral framework. In this regard, policies should be formulated as short run, and medium to long run solutions, while addressing the gaps in the existing nutrition programmes. Short run solutions should be targeted at compensating for the negative income impact due to the surge in food prices, such as providing safety nets and scaling up of existing social protection programmes, while ensuring better targeting of these welfare benefits with proper exit mechanisms, to achieve the desired outcomes. Given the limited fiscal space for government led nutrition interventions, it is crucial to extensively seek avenues for food assistance from donor agencies and peer countries to reduce hunger among vulnerable sectors in the near term, while ensuring the monitoring and evaluation of such programmes transparently. Encouraging community-based programmes, such as 'community kitchens', could be beneficial as such movements offer a common platform

to address a wide range of causes of undernutrition. As indicated in the UNICEF system approach to improve maternal and child nutrition, the long term strategies to combat child malnutrition must be grounded on five systems: food system, health system, water and sanitation system, education system, and social protection system. Accordingly, reforms and investments in food systems, which deliver availability and affordability of nutritious and safe food in a sustainable manner are vital, while enabling better food choices for families. In this regard, notable transformations in a country's food system are essential to deliver a healthy diet for people at an affordable price. These include improving productivity in the agriculture sector along with more innovations and research and development, reducing post-harvest losses, more value addition in the agriculture sector, reducing import dependency of food systems, introducing climate resilient food crops, promoting a wide range of nutrient rich foods, particularly through the popularising integrated farming, rebalancing agriculture sector subsidies, and tax policies and improving agronomic practices as well as maintaining adequate food buffers to face food emergencies.

The health system should be improved to play its role as a delivery platform for prevention and treatment of malnutrition, in addition to contributing towards fostering positive nutrition practices among the public. In this regard, it is needed to encourage new investments in basic health and nutrition services with a view to expanding access to such services, while introducing a basic nutrition package for the most underprivileged community. Further, investing in education, particularly targeting the vulnerable population, remains crucial, as education and malnutrition show a strong inverse relationship. Investing in women's education plays a vital role in determining children's nutrition levels, where income opportunities for women created through education help support the nutrition vulnerability of households.

Considering the far reaching socio-economic consequences of renewed threats of child malnutrition amidst the crisis, policy makers should focus on reformulating strategies spanning from short run and medium to long run to combat malnutrition among children in Sri Lanka. In this regard, collective and coordinated efforts of all the stakeholders of the economy, particularly the Government, health systems, education systems, and participants in the food systems along with the support from all the citizens of the country remain important in transforming policies to actions, thereby supporting to uplift the nutritional conditions of the children. These concerted efforts can strengthen the linkages between stakeholders in formulating nutrition strategies, strengthening capacities of existing nutrition programmes and mobilising funds for such initiatives, while enabling a data centric evidence based decision making process to secure children's right to nutrition.

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