

NUTRITION AND CHILD SURVIVAL

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EU plans new approach to tackle 'worst form of poverty'

The European Commission is calling for a more robust emphasis on the long-term nutritional needs of infants and mothers to address malnourishment, a leading cause of death in impoverished nations, a year after European auditors criticised the EU's response to food insecurity in developing countries.

If the pledges made in the Commission's new communication on child and maternal health are carried out, it would mark a significant shift away from treating food and nutrition as a humanitarian issue and towards development policy - in other words, moving from crisis response to long-term investment.

The communication is designed to provide guidance in overseas aid policy and comes as global efforts to reduce hunger are failing to defeat malnutrition in the most impoverished nations. Nutrition is more in the spotlight internationally: the topic of a special G8 meeting in June, and a Unicef international conference in Paris next month.

For Dr George Ameh of Unicef, the



UN's children's agency, the shift couldn't come sooner.

"Nutrition doesn't attract the same level of visibility like a cholera epidemic where people die over days, or measles where they die over days. Nutrition is more of a latent, progressing problem. It's not really that visible," he said in a telephone interview from Bamako, Mali.

"There is international evidence now which shows that it has to be addressed as an underlying cause of child mortality around the world. I think there is overwhelming evidence now and donors and agencies are positioning themselves to respond to this situation."

Poor nutrition is the biggest threat to human health, UN figures show, including rising levels of obesity in advanced nations.

It is magnified in developing nations, where malnutrition is blamed for one-third of all child deaths and one-in-five maternal fatalities, a wasting process that can drag out over months or even years.

Millions go hungry, millions more deformed

More than 850 million people are poorly nourished, most of them in sub-Saharan Africa and South Asia, and the figures have been on the rise since the millennium began. But poor nutrition is not just a killer.

Some 165 million children - more than the populations of Germany, France

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and the Netherlands combined - suffer from retarded physical growth, or stunting, because of inadequate nourishment during foetal development and in infancy. There are some 5 million stunted children in Ethiopia and 2.4 million in Kenya - two countries hit hard by recent droughts and food shortages - according to the global Scaling Up Nutrition initiative backed by the EU.

In Africa's Sahel region that includes Mali, Niger and Mauritania, some 10.3 million people lack sufficient food and 4.5 million children under five are vulnerable to severe to moderate malnutrition, EU and UN figures show. The UN estimates that 226,000 million children die every year from malnutrition in the region.

Nutrition 'neglected'

Andris Piebalgs, the EU development commissioner who launched the new communication on nutrition on 12 March, has called malnutrition "the worst form of poverty."

Piebalgs acknowledged that "nutrition has been neglected" in development policies, including the United Nations' Millennium Development Goals, or MDGs, which are to be replaced with a

new poverty-fighting agenda after 2015.

"The current MDG framework has failed to capture this hidden tragedy sufficiently. We must redress this situation and ensure a real focus on hunger and nutrition in the future framework," the commissioner told a conference on food and nutrition security in Dublin on 15 April.

But while praising the Commission's efforts to elevate nutrition as a development goal, there are fears that it will not go beyond rhetoric. Tighter aid budgets could affect future initiatives, aid and health advocates say, while others are concerned that pressing world food emergencies drain funding and attention from long-term needs.

The UN's Food and Agriculture Organisation urged donors and their partners in developing countries to reverse a two-generation-long slide in farm investment to address food as well as nutritional needs in poor states.

"The rationale for public investment in agriculture by governments and development partners rests on three interrelated benefits for society that can come from enhancing agricultural productivity: economic growth and poverty reduction, food and nutrition security, and

environmental sustainability," the FAO said in a recent report.

The report highlights a sharp decline in investment and donor aid to agriculture, with farming as a share of aid falling from 18.8% in 1980 to 5.9% in 2010 in developing and middle-income countries. In sub-Saharan Africa, farm aid has slumped from 19.6% to 7.4% in the same period.

Audit recommends changes

The European Court of Auditors, in a review of the EU's aid for food security in sub-Saharan Africa, recommended a re-boot of aid to address food and nutrition needs. In their March 2012 report, which helped spur this year's policy shift, the auditors said "the Commission has not placed adequate emphasis on nutrition and could have more to encourage countries to set up appropriate nutrition policies and programmes at an earlier stage."

The Luxembourg-based auditors also noted that the Commission's development policies could have done more "given the scale of food insecurity in the region and what is generally acknowledged as an insufficient level of funding for agriculture and nutrition by the donor community."

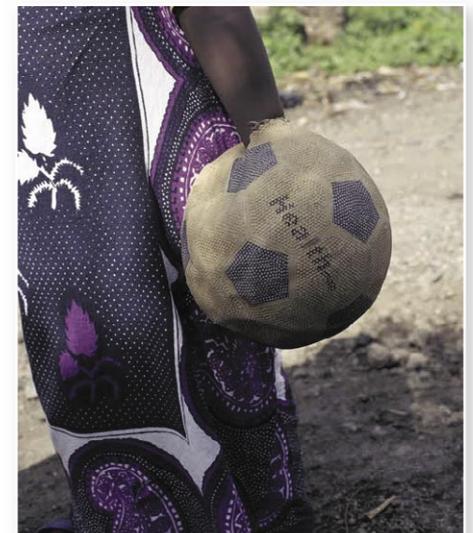
Poorer nations face an unwanted European import: obesity

Developing nations that are struggling with food supply uncertainty and malnutrition increasingly face a health challenge that is all too well known in Europe: obesity.

The World Health Organization identifies obesity as "one of the most serious public health challenges of the 21st century" and the problem is expected to grow as countries emerge from poverty, although obesity is still overshadowed by headline-making famines and severe malnutrition in developing regions.

The European Commission in March issued a new communication on child and maternal nutrition, outlining plans to target overseas development aid more towards boosting dietary education and the food needs of pregnant women and infants. The document makes no mention of poor nutritional habits that can lead to excess weight and chronic obesity.

"This problem of obesity all over the world obviously is linked to the change in



The World Health Organization says obesity is "one of the most serious public health challenges of the 21st century." WHO photo

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the environment that we are facing today in the Western as well as in the developing countries,” said Dr Gabriele Riccardi, a member of the Barilla Centre for Food and Nutrition advisory board and medical professor at the University of Naples.

“The availability of food which is cheap and is not nourishing, that’s the main problem,” Riccardi said in a telephone interview, identifying food companies as a culprit for selling cheap, prepared foods that are high in calories but low in vitamins, fibre and minerals.

Bad habits

Demographic trends show that children and adults in developing countries are already following the western model of sedentary urban lifestyles and diets of fatty, prepared foods and snacks.

“What is happening is that in the developing countries, we are going to track the same route that we have faced in our countries in the Western world. You are moving from a condition of undernutrition to a condition of malnutrition and obesity,” Riccardi said.

The fight against hunger was one of eight priorities set out in the United Nations Millennium Development Goals (MDGs), which call for halving world hunger by 2015.

Despite the greater emphasis the MDGs put on fighting poverty, 868 million people are poorly nourished today, most of them in sub-Saharan Africa and South Asia, and the figures have been on the rise since the millennium began. Globally, more than 1.5 billion people are obese or overweight, according to new report by the Barilla Centre.

Some development advocates have called for nutrition to be included in the successor to the MDGs, which expire in 2015. Discussions are now under way to develop new goals.

Jan Vandemoortele, a former UN official who helped draft the MDGs in 2001, said recent proposals from the European Commission and independent

panel of experts risked “overload” and recommended the post-2015 framework should be simple and focus on a few global challenges, not just those of the developing world. He recommended that nutrition be one of those global goals.

“When we talk about nutrition, we should not rely only on talk about hunger and the underweight, but about obesity and overweight,” he told a 9 April conference on development policy organised by the European Commission.

There are also growing international calls to reverse the shrinking investment in developing country’s farms to address both food supply needs and production of more locally grown, healthful foods.

Commission focuses on nutrition

The Commission’s new nutrition communication proposes a more robust emphasis on the long-term nutritional needs of pregnant women and infants. Released on 9 April, it came a year after European auditors criticised the EU’s response to food insecurity and lack of support for the nutritional needs of developing nations.

The communication recommends working with governments receiving food aid to increase spending on nutrition and dietary education.

Health experts say the first 1,000 days of a child’s life are critical in setting good eating practices throughout life. Inadequate vitamin and mineral intake in infancy can cause wasting, stunting and other serious long-term health problems.

Data show that for every overweight child in developing countries, there are nearly two who are wasted and at least five who are stunted. Wasting is the gradual erosion of the body and its functions due to severe malnutrition, while stunting is a condition of slow physical growth.

“Stunting can kill opportunities in life for a child and kill opportunities for development of a nation,” Anthony Lake, director of the UN children’s agency Unicef, said in a releasing a new global nutrition report. “Our evidence of the

progress that is being achieved shows that now is the time to accelerate it.”

Some 165 million children under the age of five suffer from stunting, according to the global Scaling Up Nutrition initiative backed by the EU. Unicef figures show that an estimated 80% of the children live in just 14 developing countries.

Rising levels of obesity

While these health conditions are mostly the province of poor nations in sub-Saharan Africa and Asia, obesity is catching up. WHO estimates there are 42 million children under the age of five who are obese, 35 million living in developing countries.

Four sub-Saharan African countries are near the top in global rankings with highest percentages of obese and overweight children. Four of the top five countries with the highest numbers of severe malnutrition are also in sub-Saharan Africa.

Overweight children invite future health problems, including higher rates of cardiovascular disease, diabetes and high blood pressure, the Barilla study shows. Overweight children tend to be more lethargic and extra weight can hamper worker productivity in adult life.

The Barilla Centre’s report, “Eating in 2030: Trends and Perspectives,” challenges policymakers to rethink nutrition, including shifting to agricultural policies that promote healthful and nutritious foods.

Riccardi, meantime, urges Europe to take a closer look at its own health challenges as it works with developing nations.

“We are not able learn from the mistakes we have done in the Western world and to transmit them to these countries,” Riccardi said.

“And so the problem will be how to be able in these countries, once the economic conditions are improving, to have the opportunity to approach in a correct way nutritional problems and give emphasis to fruit and vegetables and whole grain cereals and healthy foods, rather than fast food that people are getting today and probably [will] get more and more in the future.”

US plan for EU-style food aid policy seen as boost for farmers, nutrition

The Obama administration is proposing a major overhaul of food aid that would for the first time put America's overseas policy in line with European practices of providing cash and other alternatives to bulk shipments.

The White House plan, which is included in the 2014 budget proposal, marks a significant shift in US policy and could speed up the response to crises, boost local production and improve the nutritional value of food aid, say campaigners who had long lobbied for the change.

Eric Muñoz of Oxfam called the proposal a "bold step" that has already gained some top-level support in the US Congress.

"We have a one-size-fits-all approach to addressing acute humanitarian crises ... a system that was designed in the 1950s and has largely remained based on 1950s policies," said Muñoz, the senior policy advisor for agriculture and food security at Oxfam's Washington office.

"It is highly significant that this proposal has been put on the table - this is a huge step in the right direction and it's something that we've been fighting for for a number of years," he said by telephone.

In step with the EU, Canada

President Barack Obama's proposal could face a less welcome reception in Congress, where farm-state lobbies have considerable muscle. President George W.



US plan for EU-style food aid policy seen as boost for farmers, nutrition
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Bush's call for similar reform fizzled.

But if approved, it would mark the first time that Washington moves away from buying surplus food from American farmers and shipping it to developing countries or disaster zones. The proposal would put the Americans in line with the EU and more recently Canada to use cash transfers and vouchers in times of food insecurity.

US congressional figures show that America has traditionally provided about half of global food aid, compared to 27% for the EU, and is the main contributor to the World Food Programme, accounting for 45% of its donations compared to 29% for the EU.

The White House has asked Congress for \$1.8 billion, or €1.4 billion, to fund foreign food assistance for 2014. The EU spends about €1 billion annually on food security and farm development in developing countries.

"The president's proposal commits to a more rapid, cost-effective, and life-saving food aid programme that pairs the continued purchase of American food aid with a diverse set of tools, including local procurement and food vouchers," said Rajiv Shah, who heads the US Agency for International Development.

"As we ask for this increased flexibility, we commit to maintaining our purchase of American food - and increasing our focus on the higher value, more nutritious products that are so critical to improving child nutrition and saving lives."

The US is also focusing more on investing in child nutritional support and education in foreign aid policies, in line with new European Commission proposals. Last year, the G8 nations agreed to support an alliance for food security and nutrition with African nations, and food and nutrition are the focus of a G8 summit in Northern Ireland in June.

Cold War relic

Pressed by Britain, European countries agreed in the 1990s to move towards a food aid system based on regional food procurement through cash transfers and vouchers rather than bulk food deliveries.

Though the change has not replaced the need for food donations - especially during disasters or in times of humanitarian crisis - the approach is seen as a way to boost local production while providing fresher, more nutrition-rich

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foods to needy communities.

The World Food Programme, the UN agency that is often at the vanguard of famines and food emergencies, also is using cash transfers and food vouchers, citing the economic value of sourcing food locally and the nutritional value of fresh produce over bulk imports.

But the US has stuck to a formula which dates to post-war reconstruction efforts in Europe and Asia, and was reinforced through the first international food aid convention in 1967.

Oxfam and other organisations have long contended that the US programme hurt smallholder farms in recipient nations by deflating prices by “dumping” surplus commodities.

The Oakland Institute, a think tank in California, has in the past accused the US government of using aid to create export markets for American farmers. In one highly critical report, the think tank said: “Used as a foreign policy instrument and as a way to expand export markets, US food aid still largely serves US interests. By nature, it does not contribute to the eradication of hunger as it is based on the incorrect assumption that both farmers in

the US and in recipient countries benefit from food aid.

“Feeding people will not solve the problem of hunger. The US has not yet acknowledged that the alleviation of hunger in the poorest countries requires a massive effort to promote self-sufficient agriculture in these countries,” the report said.

Europe has also come under fire for negotiating trade policies that are seen as hurting developing nation farmers, who are unprepared to meet European safety regulations or unable to compete with subsidised European goods.

More flexibility and faster response

Oxfam’s Muñoz explained the multiple benefits of cash- and voucher-based food assistance. It saves money on long-term storage, reduces transport times from “months to days,” and encourages development of resilient agriculture in countries or regions prone to food emergencies.

Cash transfers are seen as a development tool because local sourcing of food creates markets for farmers and jobs in distribution.

“We can set up these systems very

quickly, we can get resources to people in need very efficiently,” Muñoz explained, “and we can do it in a way that maintains some of the same, or increases, the accountability of the system to ensure that the people we are trying to aid actually are the recipients of the aid and that it doesn’t get syphoned off.”

Vouchers can also be designed to encourage the purchase of vitamin and nutrient-rich foods, critical to childhood development and physical resilience to diseases. In contrast, Muñoz said, bulk foods can deliver “a whole lot of calories but that doesn’t mean a lot of nutrients and micronutrients.”

The US policy shift is partly based on lessons learned in conflict zones, where fighting hampered delivery of relief supplies.

Recalling efforts to deliver food supplies to Somali refugees, USAID’s Shah said in a recent speech in Washington: “Armed groups openly affiliated with al-Qaeda blocked our access, attacked our food convoys, and targeted food distribution centers. In the hardest hit areas of southern Somalia where these militants ruled, food aid couldn’t save lives.

“But cash transfers could.”



UN food official: Donor flexibility is vital to crisis response

The World Food Programme is UN's front-line agency in disaster and conflict areas. Its new director in the Horn of Africa, Valerie Guarnieri, says the European Union's recent crisis response in sub-Saharan Africa should set a new standard for financing humanitarian action.

Valerie Guarnieri was named the World Food Programme's regional director for East and Central Africa in February. Previously, she was based at the WFP's Rome office. The following are excerpts of an interview with EurActiv's Timothy Spence in Brussels.

There was a serious drought and food crisis in East Africa in 2011. What is the situation today?

Certainly we're not in the regional crisis situation that we faced in 2011, in part because the broader food security situation in the region better, that is clear, but also because we don't on top of it have the haemorrhaging of Somalia to be coping with and the impact that had on the main countries, Kenya and Ethiopia, that were dealing with the burden.

In Somalia we have a very nascent government, we're all quite encouraged that moves are being made in the right direction, but it's going to be a long way to go before the situation is stable and we're still fundamentally working at the community level in Somalia. But the refugee outflow situation – both the needs in Dadaab and the needs in Dolo Ado



UN food official: Donor flexibility is vital to crisis response
Photo of Valerie Guarnieri © FAO/Giulio Napolitano

[refugee camps in Kenya and Ethiopia, respectively] – are very much under control now in terms of having all the care and maintenance arrangements in place to deal with the current population, and the continued much small numbers who move out. So that's quite encouraging. ...

We're in a better position to respond than we were in 2011 but we're still not in the position that we should be as an international community to respond to what remain of pockets of food insecurity, including some quite severe pockets. So we're concerned there. ... We see needs continuing at a significant scale in Ethiopia, though there is a good system there in order to respond through these regular rounds of assistance ...

And there are pockets in Djibouti and in Kenya in the arid and semi-arid lands that we're worried about. But overall, regional production is quite promising this year so within the region we feel we

have largely the resources to respond. The question is making sure we have the funding to do it and then in areas like Somalia the access continues to be a problem.

Childhood nutrition has suddenly a big policy push in Brussels as well as internationally. In the broader scope of hunger, where does this fit?

It's a big problem. It's a problem on two counts: because in several of the countries in the region – mainly in South Sudan, in Somalia, in the arid and semi-arid lands, in Kenya, and in vulnerable regions in Ethiopia – every time there is a shortage, we see spikes of acute malnutrition that vastly exceed the emergency threshold of 15%. So that's a recurring problem that we have to deal with.

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But in addition to that, we know now that when you have an underlying high rate of stunting [slow physical development of children] – and most of not all of the countries in the region exceed the 30% level of stunting – then it's a precursor for a critical acute situation when a crisis hits.

There are going to be droughts and floods and other sorts of disaster in the region. If we don't get the chronic malnutrition, the stunting problem, under control, then we're not going to be able to get in front of these acute nutritional spikes that happen every time there is a crisis.

What is your opinion of the European Commission's new policy on aid for child and maternal nutrition in developing countries?

I think it's a good policy. We had quite a bit of opportunity to engage in it and what will be important is to ensure that in its implementation, that the longer-term investments are made in these areas – not just the countries, but in the areas that are subject to recurring crisis.

The statistics on stunted children are quite alarming – more than 5 million in Ethiopia, more than 2 million in Kenya. Millions more suffer from other acute nutrition-related health problems. Who is to blame for this toll?

I don't really see it as assigning blame. It's more an issue of what's causing it.

We know in terms of stunting it's a great composite indicator because in order to prevent stunting, you need to have adequate access to healthcare, particularly for women of child-bearing age and young children, you need to have adequate access to clean water and appropriate sanitation, and you need to have adequate access to nutritious food.

So that's quite the recipe ... and most people in poor and marginalised communities, some don't have sufficient access to any of those things but few would have access to all of them.

It requires action across those sectors, but ultimately of course it's the responsibility of governments to ensure that their populations have access to clean water, healthcare, sanitation and food. But realising that responsibility is obviously a challenge for countries where their own production doesn't meet their country's needs, where they're economically struggling to ensure the well-being of their population. And agencies do their best with the resources available to try to help the governments address those gaps.

These problems are recurring and so many donor resources seem to be spent on crisis and humanitarian response. Does there need to be a re-boot to focus on long-term development solutions rather than crisis response?

It's not fair to say donors in general are focused on crises, because in fact there are vastly more resources available globally for development than there is for humanitarian assistance. ...

The shift that needs to happen is twofold. Donors should ensure maximum flexibility possible in the programming of their humanitarian resources [to] allow for addressing these issues that only make humanitarian crises more expensive and only make the problems more acute for the people.

But at the same time we've got to pull the development donors, or the development resources from the same resources, into those very countries, and then not just into the countries but into the areas that are subject to the crisis. ...

So you will have a country like Kenya, and to achieve production markers or health markers that would be established from a development perspective, most of the resources wouldn't be channelled to the [country's] arid and semi-arid lands. They would be channelled to other parts of the country. Meanwhile, we have governments that have invested in the more productive areas of the country, sometimes for economic reasons and sometimes for other reasons. So these very marginal areas are

the very areas that have been neglected by development and really continue to be neglected by development.

What's exciting about the resilience approach is the opportunity to really have that dialogue that allows us to help pull these longer-term investments into the very areas that are subject to the recurring crises.

This means mixing humanitarian funding and development aid?

It's a mix of humanitarian and development. We need flexibility with humanitarian resources [and] you don't already have that flexibility, or the donors don't have that flexibility.

Most of the donors don't have the flexibility themselves, including the Europeans. The legislation is such that humanitarian funds are in most cases appropriated and then subsequently allocated subject to fairly strict criteria both in terms in of the time horizon ... as well as in terms of what those funds can be used for.

So it's quite encouraging ... some of the progress that the EU made in the context of the Sahel [drought and food crisis in 2012] to really try to push that envelope in terms of the humanitarian resources. And I think there are some promising steps that were taken that hopefully can become mainstreamed.

Such as?

"The resources that were appropriated on the humanitarian side were stretched in terms of the types of activities that would be used to fund, particularly in the area of nutrition. So there was a major investment – I know we benefitted at WFP – from ECHO [EU humanitarian aid] resources in Niger that were used in a blanket supplementary feeding programme that was used both to address the acute malnutrition as well as to prevent the underlying stunting problem from ... exacerbating the acute crisis.

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We were using special highly nutritious, ready-to-use supplementary foods ... allowing all children to get this food as part of a mother-and-child health programme that then helped ensure that those children didn't then become acutely malnourished. ...

I would like to see that kind of action within the [European Commission], but of course also with the individual countries and the other donors to move beyond an ad-hoc decision made in a compelling crisis to something that is more mainstream. Maximise the legislative flexibility that they have, and then on the legislative side so that flexibility is legislated.

This must be one of the toughest assignments at WFP.

It's tough because it's big. It's the

biggest operational region. The scale of the need as well as the scale of our operations is significant. And because we're 100% voluntarily funded, we're on this treadmill of raising resources to support and in moments of high visibility, those resources come in relatively easier, but then when the region is off the radar screen it gets harder and harder to keep the momentum up to raise the resources. So it's challenging in that way. But the opportunities are huge, too...

What should European Union be doing to help?

From the Parliament, I'd be looking for legislation that both permits and requires the flexibility in the use of resources, so we need to break down the silos between humanitarian and development. It makes a tough job even

harder if we have pitch to different silos and if we don't have the opportunity for longer-term investment and engagement in these countries, and the parts of the countries, where we have the chance to support populations over time and to make them more resilient.

For the region - and it goes a bit to the European public - East Africa is not a basket case. It's a region with a lot of challenges, but it's a region where there is growth and there is promise and there is more investment needed to help that multiply.

So I'd like to see the region benefiting and participating in that kind of dialogue and see donor attention focused more on [long-term] investments without ignoring the need to continue live-saving assistance, and not to only think about the region when the cameras are flashing on drought victims.

Rising costs pose challenge for poor nations' vaccinations

Rising drug costs and supply uncertainty threaten efforts to achieve universal immunisation after decades of steady progress in vaccinating African infants against crippling and deadly diseases, health workers say.

In the world's poorest region, sub-Saharan Africa, the rate for basic vaccinations has risen fifteen fold since 1980 - from 5% of children to 77% - backed by an outpouring of aid from the EU and other donors and public-private schemes to provide low-cost vaccines in developing countries.

Yet a growing number of

recommended immunisations for children under five and limited competition have contributed to the rising costs even as the price for some traditional vaccines has fallen through collaborative schemes to help the world's poorest countries.

The European Union, a leading source of developing nation assistance, has pledged to make health a priority of a new development aid framework that focuses on the lowest-income countries, mostly in sub-Saharan Africa. As part of a broader push to reduce childhood disabilities and illness, the European Commission has also proposed a new framework to improve nutrition for infants.

But concerns about the decline in assistance from Europe and other leading donors also weighs on concerns about future support.

"There has been a large amount of funding that has been given by donors over many years and significant improvements have been made," said Shingai Machingaidze, a researcher at the Vaccines for Africa Initiative at the University of Cape Town.

"Unfortunately, there are many

issues that have to be configured with immunisation programmes: infrastructure, human resources and preparing the vaccines. Putting all these together, the coverage has just not reached what was hoped for and anticipated, which is universal coverage for all children," Machingaidze said in a telephone interview.

Machingaidze and other South African colleagues last month published a report showing that the cost per child of vaccination regimes has risen from \$6 (€4.60) in 2000 to \$25 (€19) to and could rise far higher - to \$58 (€44) - when new vaccinations for pneumonia and diarrhoea are included.

"These costs are just far greater than African countries can afford to pay per child," Machingaidze said. "So even with donor funding it's still a very large amount of money that's needed to ensure that every child in Africa gets vaccinated."

Public-private alliance

Developing countries enjoy substantial discounts on vaccines through a public-

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private partnership, the GAVI Alliance. Founded in 2000 as the Global Alliance for Vaccines and Immunisation, the group now helps fund affordable vaccines for more than 70 nations.

The Geneva-based organisation received \$110 million (€77 million) in direct funding from the European Commission from 2003-2012 and 11 EU states have also contributed, along with other public and private donors.

GAVI and its partners, which in addition to European donors include the WHO, the UN children's agency Unicef and the World Bank, has helped vaccinate 370 million children in 73 countries since it was founded in 2000.

The alliance leverages this vast market, plus ties with suppliers and public and private donors, to provide low-cost supplies of leading vaccines for hepatitis B, rotavirus, diphtheria, tetanus and other diseases.

But GAVI has come under criticism from advocacy groups for failing to bargain for even lower prices. The medical charity Médecins Sans Frontières (MSF) contends that GAVI has worked too closely with major pharmaceutical firms in Europe and the United States rather than diversifying its supply chain.

Doctors group seeks more cost control

MSF's Access Campaign, established in 1999 to press for better access to low-cost vaccines, also advocates public investment in the development of vaccines that are easier to administer and can be stored in formidable environments where storage and refrigeration are problematic.

Kate Elder, the vaccines policy advisor for the Access Campaign, praised GAVI's achievements but says costs are still too high for poor countries and medical charities.

"We all have the same goal – we all want to get kids vaccinated," Elder said in a telephone interview. "Yes, GAVI has been able to reduce prices ... and yes that is laudable. But the point is we could actually



go a lot further. We know that these vaccines are bringing blockbuster revenues for pharmaceutical companies."

"There is much more room to push down the cost of these vaccines even further," she said.

MSF's "conservative" estimates for vaccine regimes are in similar to those estimated by the South African researchers, prices Elder said were unsustainable for the poorest nations and charities like here.

Elder urged donors to throw support behind efforts to replicate India's success in building domestic pharmaceutical industry that turns out low-cost vaccines that still qualify under World Health Organization (WHO) safety standards.

GAVI sings deal with Indian producer

In a bid to expand its supply chain, the GAVI Alliance announced on 18 April – ahead of World Immunisation Week – that it had forged a new supply deal with India's Biological E Ltd. that will save \$150 million (€115 million) in vaccination costs over four years and shave the cost of the pentavalent vaccine from \$2.17 to \$1.19 per dose. The vaccine is a single dose for type B influenza, hepatitis B, diphtheria, whooping cough and tetanus.

"This is great news for children in the world's poorest countries and it shows that our innovative public-private partnership model is working well," said Dr Seth Berkley, the alliance's chief executive.

"A decade ago we had just one European supplier and a price of \$3.56.

Today we have five suppliers, including two in India, and a price that is down to its lowest level yet," Berkley said in announcing the agreement. "This marks the realisation of a vision that GAVI started a decade ago to create a healthy, competitive and sustainable global market for pentavalent vaccine."

More collaboration to reduce prices

But Dr Charles S. Wiysonge, programme manager at the Vaccines for Africa Initiative, also said African nations should be developing what doesn't exist today – domestic vaccine producers.

"African needs to come to the party and start discussing with manufacturers in other low- and middle-income countries - like Brazil and India and China - to be able to acquire the technology to manufacture low-cost vaccines," he said in a telephone interview.

Health experts say immunisations are critical to prevent unnecessary illness, suffering and disability – and that the costs pay off in the long run through better health and productivity.

Although need varies by region, vaccines against polio, tetanus, whooping cough, measles and hepatitis B are relatively standard, and the WHO recommends up to a dozen vaccinations in early childhood depending on the risk of viral or communicable disease.

"There are always competing priorities in the landscape of medical needs," MSF's Elder said, "but we have to say vaccines are really one of the best public health tools."

In Mali, a perilous push to vaccinate children

Braving minefields and sporadic fighting, health workers have carried out a campaign in recent days to vaccinate thousands of children in northern Mali against measles, polio and other deadly diseases.



The 10-day operation ahead of World Immunisation Week, which runs through Saturday, highlights the challenges of EU and international efforts to improve health, nutrition and food security in Mali and the rest of Africa's fragile Sahel region.

The European Commission unleashed €250 million in development aid for Mali last month to help the struggling government in Bamako, which sought French help to repel a rebel advance from the nation's impoverished north.

Fighting between the internationally backed southern government and northern rebels has subsided since France sent an intervention force on 11 January, but months of unrest took a toll on health facilities, disrupting medical

services and the delivery of vaccines and nutritional assistance to children.

Providing vaccinations has been "very, very challenging," Dr George Ameh, health manager for the UN's children's agency Unicef in Mali, told EurActiv by telephone from Bamako. "You don't have skilled manpower, the [refrigeration] facilities are non-existent, vehicles are non-existent and have been looted. But we also have a humanitarian obligation to go in and make sure that the children have protection against preventable diseases."

The immunisation campaign comes on top of a measles outbreak two

months ago and reports of more than 200 cases of cholera in the northern part of the country last year that left at least 19 dead.

Troubled Sahel

Mali is at the epicentre of the broader Sahel, a formidable region where the Sahara desert transitions into savannah. Along with Mali, Burkina Faso, Chad, Niger and Mauritania have all faced drought, food shortages and insecurity in the past two years.

Some 10.3 million people in the region lack sufficient food and 4.5 million children under five are vulnerable to severe to moderate malnutrition, EU and UN figures show. The UN estimates that 226,000

million children die every year from malnutrition.

The UN has requested \$1.66 billion (€1.23 billion) in aid this year, \$623 million for food and \$273 million to avert malnutrition.

The EU responded by stepping up aid and development efforts in the Sahel, in addition to the €200 million in development aid and €172 million in humanitarian assistance it had planned for the region.

The EU has also set up Global Alliance for Resilience Initiative in the Sahel to improve nutrition.

Rebuilding clinics

Mali, a nation of 16 million, erupted in conflict last year when army officers deposed the civilian government while Tuareg fighters who had been sheltering in Muammar Gaddafi's Libya returned home to renew their long-time rebellion. Civilian rule was restored, paving the way for the restoration of EU and international aid this year.

The French intervention has stabilised the south and the influx of aid has allowed relief organisations to begin restoring war-damaged clinics in populated northern areas despite continuing threats of rebel attacks.

Unicef estimates that there are more than 300,000 children under the age of five in northern Mali but precise numbers are unknown because families have sought refuge in the south and neighbouring countries.

The UN's humanitarian agency reported on 10 April that 467,000 people had fled northern regions due to conflict and food insecurity. The International Committee for Red Cross says civilians continue to stay away.

"The fact that displaced people are hesitant to go back to their homes is largely attributable to a general sense of not feeling secure, and also to the impossibility of generating income amid

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such instability,” Jean-Nicolas Marti, who heads the ICRC regional delegation for Mali and Niger, said in a statement.

Health workers face other challenges beyond vaccinating children for polio, measles, diphtheria and other conditions. Nutrition is major concern.

In 2011, before the northern rebel offensive began, the UN estimated that

one in four children in the north ran the risk of acute malnutrition.

“And now, as you can imagine, the food security situation has worsened, access to healthcare has worsened,” said Ameh, who estimated that 40% of children had access to care before, and “now we estimate just about half of that, about 20% have access to care for the management of nutrition.”



Prime Minister Diango Cissoko of Mali during February meetings in Brussels to seek EU aid for his country. European Commission photo

Swift move by EU helped ease nutrition crisis, UN official says

Faced with a worsening drought and food crisis in Africa’s Sahel region last year, the United Nations got a sudden infusion of EU cash to provide nutritional help to 1.5 million pregnant women and children.

UN officials say the European Commission’s decision to divert €30 million in EU humanitarian aid to the World Food Programme’s emergency nutrition effort – a week after allocating €275 million for the the Sahel – helped prevent a far deeper crisis, but also showed the value of flexible response and funding.

The Commission’s humanitarian arm, ECHO, “channelled” money to the WFP to provide emergency food and nutritional supplements for pregnant women and children under two to help prevent stunting and other serious health effects of severe malnutrition, said Valerie Guarnieri, WFP’s regional director for east and central Africa.

The money was used to address “the acute malnutrition as well as to prevent the underlying stunting problem from turning into and exacerbating the acute crisis.”



Swift move by EU helped ease nutrition crisis, UN official says
A woman in Sudan’s Darfur region receives food aid from the WFP.
Photo by Albert González Farran/UNAMID

The Sahel crisis is far from over. Some 10 million people are still facing food shortages and 1.4 million young children are suffering from malnutrition, UN figures show.

But Guarnieri said the Sahel offered lessons in the importance of early intervention and, in what relief organisations have long pressed for, more nimble humanitarian response from the EU and other donors.

Relief workers donors are often too slow to move and call for allowing more flexible use of humanitarian as well as development funding to respond to crises, like those in the Sahel, refugee crises like the one in Syria, and the severe drought in 2011 that affected more than 13 million people the Horn of Africa.

Most donors are locked into annual or multiannual appropriations, requiring

guesswork on the part of number-crunchers trying to forecast spending needs.

“The legislation is such that humanitarian funds are in most cases appropriated and then subsequently allocated subject to fairly strict criteria, both in terms in of the time horizon ... as well as in terms of what those funds can be used for,” Guarnieri told EurActiv in an interview.

“So it’s quite encouraging,” she said, “some of the progress that the EU made in the context of the Sahel [was] to really try to push that envelope in terms of the humanitarian resources. And I think there are some promising steps that were taken that hopefully can become mainstreamed.”

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Budget challenges ahead

A bigger challenge on the horizon may be less about fiscal flexibility than sustainability.

Though an EU budget deal for 2014-2020 still has not been hammered out by the European Commission, Council and Parliament, funding for foreign development and humanitarian assistance is expected to stagnate or decline.

In the meantime, few European states are expected to meet their commitments to development aid, potentially undermining the EU's pledges to do more for the least developed countries. It has also launched a new communication that promises to prioritise childhood and maternal nutrition in its food and health programmes.

Commissioners Andris Piebalgs, in charge of development aid, and Kristalina Georgieva, who oversees humanitarian assistance, have pledged to fight budget cuts, citing challenges and EU commitments in developing countries and conflict zones.

"If there would be cuts in the Commission's proposal, the question would be: Will they be deeper in the area of humanitarian aid? I hope not," Georgieva told EurActiv in a recent interview, "because we trust the facts, and the facts are that the humanitarian budget is tiny, it's 0.62% [of the total EU budget], but with this money we help 150 million people. And for them, this is the most important thing the Commission does, Europe does."

Funding is a major concern for WFP, which depends on the EU for more

than one-quarter of its contributions for humanitarian operations. Total contributions from the Commission and EU states topped €1.63 billion in 2011 and 2012.

Guarnieri took over the WFP's eastern African operations in February. Asked what the EU could do to make her new job easier, she said: "I'd be looking for legislation that both permits and requires the flexibility in the use of resources, so we need to break down the silos between humanitarian and development."

"It makes a tough job even harder if we have to pitch to different silos and if we don't have the opportunity for longer-term investment and engagement in these countries, and the parts of the countries, where we have the chance to support populations over time and to make them more resilient."

OPINION

A golden opportunity to combat global malnutrition

On the threshold of several prominent international meetings, there is no better time than this to boost resources for nutrition and to work together to tackle both the causes and symptoms of child malnutrition and stunting, writes British MP Stephen O'Brien.

Stephen O'Brien is a Conservative member of the British House of Commons. A former international development minister, he is the UK Special Representative for the Sahel and co-chair of the Conservative Friends of International Development. This commentary first

appeared here and is reprinted with permission.

"I strongly welcome the launch of Unicef's significant and hard-hitting report on child nutrition.

The report identifies both the key statistics and evidence from across the world about child nutrition rates, with particular regard to pre-natal care, breastfeeding, and various vitamin and mineral consumptions; and also outlines how, as a global community, we can tackle the pressing issues of child malnutrition and stunting. These are vital concerns which I have seen on my countless visits over the last 35 years to some of the most challenged and vulnerable parts of the world, especially in Africa, but also in Central and South America, in the Middle and Far East, and in the Indian subcontinent.

The prominence of child (mal)nutrition has emerged strongly in the last few years amongst development partners, international organisations and NGOs. It was a key part of my focus during my time as an international development minister and, in my current

role as the prime minister's envoy and UK special representative to the Sahel in North and West Africa, it remains so now.

Stunting is the irreversible impact of not receiving enough nutritious food within the first 1,000 days of life, from pregnancy to a child's second birthday. Staggeringly, there are today around 165 million stunted children around the world – more than one quarter of the world's children under age five are unable to develop physically or mentally as they should. Whilst the vast majority of children in the UK are well fed and nourished, the situation in many developing countries is in stark contrast, as 90% of children affected by malnutrition and stunting live in Africa and Asia.

The link to extreme poverty is incontrovertible – as children in the poorest communities are more than twice as likely to be stunted, particularly in rural areas where as many as one third of children are affected. In addition to this, every year 2.3 million children die of malnutrition.

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As the Unicef report notes, it is imperative to focus on the first 1,000 days of a child's life as the crucial window of opportunity for change – it is during this time that proper nutrition has the greatest impact on a child's health and potential future wellbeing and opportunities. There are proven low cost solutions for reducing stunting – indeed, the report outlines a set of 13 direct interventions which target pregnant women, breastfeeding, and complimentary feeding. Given this cogent evidence, I urge the prioritisation and allocation from the UK's committed development resources for an extra boost to combat malnutrition. This is vital, recognised by all who study the evidence and who, across the political spectrum, are concerned about the avoidable ravages of global poverty.

Unicef's report and its recommendations can be unequivocally supported because they point the way to what is do-able, let alone desirable. Tackling malnutrition is inextricably linked to the wider development goals we are pursuing as a nation through the admirable humanitarian and development commitments the coalition government has made and is rightly sticking to. This is the more crucial in light of the potential impact of climate change (whatever one's view of its cause) whose demonstrable effects are the more immediate and devastating on the poorest people in the least developed nations on the planet.

The International Food Policy Research Institute (IFPRI) have estimated that there will be an extra 25 million more malnourished children by 2050 as a result of the drastic volatility in food prices, agricultural yields and adverse weather. Tackling malnutrition is an economic investment – addressing stunting can break the cycle of poverty and boost the economic development of a nation. Leading economists have estimated that every \$1 spent to reduce chronic malnutrition can have a \$30 payoff. The World Bank has estimated that the funding shortage to address



child malnutrition is \$10.3 billion a year – of which the UK share would be \$232 million.

With developing countries contributing half of the budget, there is potential to save the lives of 2 million children around the world. As stunting negatively affects the school attendance and performance of these children, tackling malnutrition must also be seen as a long term social investment. This funding would help ensure that children are properly nourished and is, therefore, essential in protecting children from illnesses, allowing them to develop physically and mentally, helping them to learn and concentrate in school – thereby raising IQ – and it is estimated, in time, to increase their earning potential.

Tackling malnutrition is a vital investment in the health of a nation. Consider that undernourished mothers have a much greater chance of giving birth to low birth weight babies and that an estimated 60-80% of neonatal deaths occur

among low birth weight babies – we need to work together as the generation with the power to bear down on and eliminate these problems which, with political will, are totally tractable. This is absolutely key to the 'golden thread' of development espoused and promoted by Prime Minister David Cameron – ensuring that we tackle all the causes of extreme poverty as well as the symptoms of it.

It is clear that this year is a golden opportunity for the UK government to shape the international agenda. In November 2012, the prime minister pledged to "lead the way in the battle against hunger" and, with the Hunger Summit and the G8 approaching, I believe there is no better time than this to call for the allocation from our budgets of prioritised boosted resources for nutrition and to work together to tackle both the causes and symptoms of child malnutrition and stunting – one of the surest ways to secure sustainable, demonstrable results and improved lives and hope."

OPINION

Mobilising against poverty, hunger and inequality

People are losing trust in their leaders. What the bottom half of humanity sees is a new apartheid that divides a global rich and predatory minority from the overwhelming majority's growing poverty, joblessness and social inequality, writes Jay Naidoo.

Jay Naidoo, a former South African minister of reconstruction and development, is the chairman of GAIN, the Global Alliance for Improved Nutrition, in Geneva. This commentary was originally published here and is reprinted with the permission of the author.

"The drought is brutal in the north of Kenya around Lake Turkana. The rains seldom come and the lake is drying up. So is the hope of the Turkana, a proud people. They are mainly pastoralists. But the grazing lands are fast disappearing as are the fish in the rapidly receding lake.

Heavily armed marauding bands of bandits from the Horn of Africa regularly raid lands and seize the cattle of the Turkana. As one herder said, "They take our wealth and our food. Our cows are our bank. We are alone. There is no government here to protect us. It is the rule of the gun. Our homes are torched, our innocent are murdered. They want to drive us from our land. Our children are not safe. They must go to the city."

Here poverty is driven by climate change, a precursor to the new resource



wars to be fought over water, land, food and competition over scarce resources. The poverty is chronic, systemic and leaves many in despair, abandoned by the political and economic elites of the world.

That story is repeated in the many villages I have been to in the India subcontinent, in the slums of Africa and Asia where families live in a space that is barely bigger than the bathroom of middle class families. In these communities people feel that God has forsaken them.

While we have undoubtedly made progress, when I see the official reports suggesting "Enormous progress has been made towards achieving the Millennium Development Goals (MDGs). Global poverty continues to decline, more children than ever are attending primary school, child deaths have dropped dramatically; access to safe drinking water has been greatly expanded..."

I wonder when these gains will trickle down to the billion people I encounter at the edges of our humanity.

The World Bank 2011 World Development report on Conflict, Security and Development, the Advisory Committee on which I sat on, found that at least 1 in 3 people live in conflict ridden countries and that no country that has experiences serious conflict will achieve any MDG goal. A country that goes through a civil war will take at least 25 years to recover its pre-conflict GDP. In places like the Great Lakes of Africa the primary victims of conflict are women where rape

is used as an instrument of war that also forces thousands of children in the brutal game of soldiers of war.

Last week, Irish President Michael Higgins described global hunger as a gross human rights violation and the greatest ethical challenge facing the global economy. In illustrating the failure of the global development system he said further: "What is required is a robust regulatory framework which protects our fragile and threatened environment and which respects the right of small landholders to remain on their land and retain access to water sources."

President Higgins has his hand on the pulse of the rising anger in a world. People are losing trust in their leaders in political, economic and even in civil society. What the bottom half of humanity sees is a new apartheid that divides a global rich and predatory minority from the overwhelming majority's growing poverty, joblessness and social inequality.

The high-level panel, appointed by UN Secretary-General Ban Ki-moon, is expected to submit its final report on a post-2015 development agenda when it meets in New York at the end of May. There is an urgency to develop an alternative vision of the world we want.

The Millennium Declaration in 2000 promised that "Men and women have the right to live their lives and raise their children in dignity, free from hunger and

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from the fear of violence, oppression or injustice. Democratic and participatory governance based on the will of the people best assures these rights.”

The current ferment in the world demonstrates that patience is running out. The ‘youth bulge’ in the developing world is alienated by the corruption in our political and economic systems. Citizens are demanding voice and transparency. They want jobs and social protection, safety and justice – all issues that were not included in the original MDGs.

We need to go beyond measuring progress as a set of narrow input and output indicators. We need to address the underlying drivers of poverty and that the data has hidden a growing social and economic inequality which has risen dramatically in the world.

Let us disaggregate the laudable goal we set of the reduction of poverty by half by 2015. Development bureaucrats claim victory in many of the discussions I have attended. Poverty has been defined as an income of less than \$1.25 a day. Because figures are not disaggregated what is ignored is the fact that China accounts for the bulk of this success.

Sub-Saharan Africa, on the other hand, is not on track on its poverty reduction and will fall short of nearly all the goals. But more importantly, can we answer the question that many pose to me “Name one Minister or bureaucrat in any global institutions who can support a family on \$1.25 a day. In fact there are only a few that go into power in Government and come out poor.”

We need a new framework that addresses sustainable development holistically; human rights, economic, social and environmental rights. At its core it has to place human well-being and the fact that our consumption patterns have pushed the world to the limit of its planetary boundaries. Therefore a top-down, donor driven and intergovernmental process that led to the MDG’s is unlikely to work today.

We need a bottom up process also

which co-creates the vision of our future world. That creates the tools that allows communities at a grass root level ensure there is transparency and accountability of those in power.

We need reliable data in our countries to be able to measure progress. But we need to unpack our morbid fascination with evidence that just that satisfies ‘bean counters’ in foreign capitals and concentrate on data that meets the needs of the poor and improves the capacity and quality of service delivery.

So how can we legitimise the process towards a new future we hope to agree? We need to recognise the need for:

- An inclusive and participatory process in which the voices of the poor are heard in the corridors of power.
- Bold leadership at a local, national and global level and a set of shared rights and responsibilities across the public, private and civil society sectors.
- The universality of human rights and its inter-connectedness to environment and poverty.
- That growing inequality within countries is fuelling corruption and social tensions.
- The need for Open Data networks that building accountability from the bottom up that creates tools for citizens to hold the leaders accountable.

Comprehensive development framework that integrates the discussions for a post-MDG agenda and ‘Sustainable Development Goals’ (SDGs) as agreed at the Rio+20 summit in June 2012.

In a world where over 1.3 billion people today have no access to electricity. What is the value of universal education when kids are taken out of school to go and find firewood or herd the family livestock?

Mary Robinson, the former Irish president and UN high commissioner for human rights, has often said to me: “Scientists now agree that we are on a trajectory of a 4 degree rise in

temperature, unless we radically change direction. People all over the world have a right to development. We need a smart collaboration between the developed and developing world, between government, business, civil society and the UN system to avoid violent and extreme fluctuations in weather patterns, leading to declining food production and greater social and political tensions. The poor will continue to pay the heaviest price unless show courage today.”

I am reminded that Nelson Mandela once said, “Overcoming poverty is not a task of charity, it is an act of justice. Like slavery and apartheid, poverty is not natural. It is man-made and it can be overcome and eradicated by the actions of human beings. Sometimes it falls on a generation to be great. YOU can be that great generation. Let your greatness blossom.”

Now is the time to act.”

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