

# Working Together for The Future of Ethiopia:

## A Call to Action on Nutrition For Civil Society Organizations

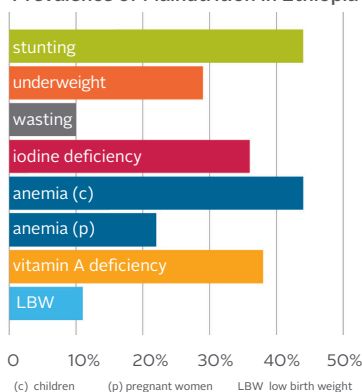
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**E**thiopia has recently seen remarkable economic growth and is on track to meet several of the Millennium Development Goals, including eradicating poverty and hunger, achieving universal primary education, and reducing child mortality. However, without improvement in nutrition, further progress is not possible.

- Despite continued investment by the Government of Ethiopia and donors, **malnutrition rates in Ethiopia remain among the highest in sub-Saharan Africa.**
- **Among children under 5 years, 44% are malnourished.** Malnutrition takes many forms, including stunting (short for age), wasting (low weight for height), underweight (low weight for age), iron deficiency anemia, vitamin A deficiency, iodine deficiency, and low birth weight (< 2.5 kg).
- The **causes of malnutrition in Ethiopia include repeated infections, poor health, and inadequate dietary intake**, as well as the underlying causes of food insecurity, gender inequality, poverty, and lack of safe water, hygiene, and sanitation.<sup>3</sup>

■ **Malnutrition in Ethiopia is intergenerational in nature.** Infants who are born with low birth weight become malnourished children and adolescents. Adolescent girls are married early and many begin bearing children during their adolescent years, while they themselves are malnourished. During pregnancy, women and girls often do not gain adequate weight, which results in the birth of a low weight infant. Even when infants are born with normal birth weight, malnutrition begins early in life.<sup>3</sup>

Prevalence of Malnutrition in Ethiopia<sup>1,2</sup>



### Why does this matter to civil society organizations?

These rates of malnutrition have serious ramifications.

- **Malnutrition has a cumulative negative effect on health, education, and economic development**, costing developing countries up to 3% of GDP annually.<sup>4</sup>
- **Malnutrition is the underlying cause of as many as 45% of child deaths** in Ethiopia.<sup>3,5,6</sup>
- **Children who are malnourished are at greater risk of infections** (such as diarrhea and respiratory infections) **and chronic diseases** (such as diabetes and heart disease).<sup>5,6</sup>
- **Malnutrition also results in developmental delays and impairs cognitive ability.** Children with chronic malnutrition (stunting) learn to sit, stand, and walk later; have poorer cognitive function; enroll in school later; perform worse in school; have more days out of school due to illness; and are more likely to repeat grades and drop out of school than well-nourished children.<sup>6,7</sup>
- **Stunting alone will cost Ethiopia US\$25 billion** in economic productivity losses by 2025.<sup>3</sup>

If there is no change in nutrition by 2025:<sup>4</sup>

**664,000**  
lives of children under 5 will be lost related to **stunting**

almost **16,000** mothers' and **84,000** newborns' lives will be lost related to **maternal anaemia**

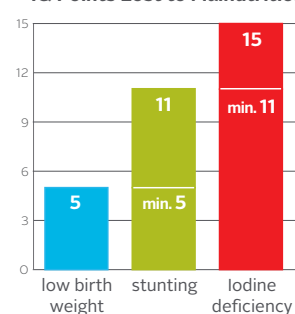
**500,000**  
lives of children under 5 will be lost related to **low birth weight**

**323,000**  
lives of children under 5 will be lost related to **vitamin A deficiency**

**475,000**  
lives of children under 5 will be lost related to **wasting**

**12.8 million**  
children will be born with **irreversible brain damage** with a decrease in IQ related to **maternal iodine deficiency**

IQ Points Lost to Malnutrition<sup>7</sup>



Main data sources include: <sup>1</sup> Ethiopia Demographic and Health Survey 2011, <sup>2</sup> Ethiopia Micronutrient Survey 2005, <sup>3</sup> Ethiopia PROFILES 2012 Technical Report, <sup>4</sup> World Bank 2006, <sup>5</sup> Lancet Nutrition Series 2013, <sup>6</sup> Cost of Hunger in Ethiopia Summary Report, <sup>7</sup> Grantham-McGregor et al. 1999, and <sup>8</sup> Copenhagen Consensus 2012.

But malnutrition is preventable. We can improve the future of Ethiopia *if we act now.*

- By investing in proven, effective nutrition interventions implemented at scale by 2025, hundreds of thousands of lives would be saved and improved.<sup>3</sup>
- Improvement in nutrition outcomes would result in children staying in school longer and performing better in school.<sup>6</sup>
- Improved nutrition also results in a healthier Ethiopian workforce, resulting in economic productivity gains in the future.<sup>3,6</sup>
- For a country like Ethiopia, nutrition is a smart investment: For every US\$1 spent on nutrition, there is a US\$30 return in health and economic benefits.<sup>8</sup>

How can you, as a civil society organization, help?

As a member of civil society, you play a critical role in improving nutrition in Ethiopia.

- **Support the Government of Ethiopia's National Nutrition Program**, which focuses on the first 1,000 days (from conception to a child's second birthday) and the country's most vulnerable demographic groups, including pregnant and lactating women, adolescents, and children under 5 years of age by:
  - **Integrating nutrition interventions into your organization's strategic plan and research activities, including those that focus on four critical areas for Ethiopia:**
    - Improving adolescent nutrition
    - Improving maternal nutrition during pregnancy and the postpartum period
    - Improving nutrition of children under 2
    - Improving prevention and treatment of severe and moderate acute malnutrition among children under 5
- Allocate resources for implementation of nutrition interventions
- Identify, document, and disseminate proven practices

### Examples of Proven, Effective Solutions to Improve Nutrition as Potential Areas of Programming for CSOs in Ethiopia

- Prevention of stunting and wasting
- Promotion of optimal breastfeeding and appropriate complementary feeding
- Promotion of delayed marriage and first pregnancy
- Improved hygiene and sanitation practices including provision of safe water
- Treatment of wasting with special foods, such as ready-to-use therapeutic foods
- Vitamin A supplementation
- De-worming
- Iron-folic acid and calcium supplements for pregnant women and lactating mothers
- Salt iodization
- Fortification of staple foods
- Multiple micronutrient powders for children under 2
- Promoting women's empowerment, access to and control over productive resources, capital, and income generation
- Diversifying food production and making animal protein (e.g., dairy, eggs, meat, poultry, and fish) and micronutrient-rich foods (e.g., fruits and vegetables) more available including in schools
- Improvement of post-harvest handling
- Supporting and expanding early childhood development programs to promote optimal cognitive development
- Supporting and expanding secondary school education for girls and boys



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