

Covid-19: Feeding the future of India

<https://iihmr.edu.in/event/articles>

Covid-19: Feeding the future of India

Check nutritional vulnerability amongst poor children during the lockdown.



By Sunil Rajpal

In India, inequitable distribution of resources is a major challenge that has impeded access to nutrition for a sizeable population and harmed the children the most. According to the National Family Health Survey, 2015-16, every second child, aged 0-5 years, from the poorest 20% households in India suffers from some form of undernutrition, i.e. stunting or underweight or wasting. However, the conventional indicators of stunting (height-to-age), underweight (weight-to-age) and wasting (weight-to-height) are based on binary cut-offs (Yes-1/No-0) and do not reflect those children who are just around the cut-off.

The issue assumes urgent policy salience in the current time of distress due to the outbreak of the Covid-19 pandemic and ensuing policy response that has caused catastrophic impacts on food and [health](#) delivery systems.

Most affected: Bihar, UP and MP

A recent study, conducted by this author and co-authors William Joe and SV Subramanian, titled 'Living on the Edge? Sensitivity of Child Undernutrition Prevalence to Bodyweight Shocks in the Context of the 2020 National Lockdown Strategy in [India](#)', published in the Journal of [Global Health Science](#), contextualises the sensitivity of undernutrition among poor children in India amidst Covid-19-induced disruption.

Given the policy response of the national lockdown to arrest the spread of the virus, it is plausible to assert that children from the poorest strata will succumb to dietary shock both in terms of quantity as well as quality. These shocks can be possible weight-loss among children of the poorest households, including casual labourers. By using household-level data from NFHS 2015-16, the study reveals that even with a minor weight-loss of 0.5%, the prevalence of underweight and wasting among poor children can increase substantially—for a child weighing 10 kg, such change would imply losing about 50 gm. Assuming a scenario of 5% weight-loss, India will experience an increase of 4,393,178 and 5,140,396 additional cases of under-weight and wasting, respectively. About 5 million children are at risk of falling in the wasting category of malnourishment, while an additional 2 million children are at risk of being severely wasted.

Bihar, Uttar Pradesh and Madhya Pradesh will be the most affected and will account for the higher share of possible increase in undernutrition cases. It is critical for these states to navigate their policy focus to remedy high magnitudes of job losses and mass in-migration of poor families. The problem can further intensify with the poor coverage of public health interventions—such as the Integrated Child Development Services ([ICDS](#))—in these states.

Continue achievements under POSHAN Abhiyaan

The study asserted that India runs the risk of reverting to the old trajectory of slow improvements and compromise with the recent achievements made under POSHAN Abhiyaan. As the effects of lockdown are lingering on and are expected to further aggravate because of bleak economic outlook for the next few quarters, about 77 million face the risk of undernourishment, expected to be higher particularly in rural areas as more than half of children rely on food supplementation from government schemes such as the ICDS, and the mid-day meal programme. The diversion of Anganwadi Workers (AWWs) towards Covid-19-related tasks has disrupted their usual activities of providing food supplementation via hot cooked meals and take-home ration, and is likely to impact dietary intake of children adversely.

Directing the policy focus towards the poorest section is recommended as they are most vulnerable to these shocks and economic distress. Ensuring smooth and uninterrupted supply of nutritious meals and food supplements is particularly imperative to maintain the nutritional status of poor children. Measures such as direct cash benefits/transfers to those from the lowest economic strata, as done by the government a few months ago, may need to be extended. The increase in burden will be substantially larger in states like Uttar Pradesh and Bihar due to higher population base along with mass in-migration. Enabling ground-level functionaries (ASHA, AWWs) to maintain their active participation in preserving ongoing nutrition efforts will also be critical.

The author is assistant professor, Health Economics, IIMR University, Jaipur.