

SOCIO-ECONOMIC IMPACT OF MALNUTRITION IN CHILDHOOD IN INDIA – A STUDY

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Abstract

Since independence (1947), achieving food security has been a major goal of our country. Due to the Bengal Famine created awareness of the need for paying priority attention to the elimination of hunger. Food is the basic need to every human being in the World. One of the most important areas that should be targeted is nutrition. It is the most basic facets of human life.. Foundations of long-term economic development are based on a well-nourished society. Fighting with malnourishment is also one of the most effective tools to empower people left behind to participate in the growth process in the country. The economic advantages of investing in proper nutrition are several: improving nutritional outcomes would help in controlling diseases, reduce infant and maternal mortality, empower women, break the vicious cycles of malnutrition, improve worker productivity and even improve learning outcomes for students. The main objective of this research paper is to examine the multifaceted economic consequences of women and childhood malnutrition in India. It delves into the intricate relationship between childhood malnutrition and various aspects of the Indian economy, including labour productivity, educational outcomes, intergenerational poverty, healthcare costs, and national economic growth. The paper highlights how childhood malnutrition affects the physical and cognitive development of individuals, resulting in reduced labour productivity and limited access to quality education and employment opportunities. The findings underscore the urgent need for comprehensive interventions and policy reforms to address childhood malnutrition as a critical driver of economic disparities and impediments to national development in India.

Keywords: Malnutrition, Socio-economic development, Physical and cognitive development

Introduction:

Since the last few decades, childhood malnutrition became one of the major public health concerns in low and middle-income countries. Estimates from the United Nations Children's Fund (UNICEF) suggest that, globally about 165 million children under the age of 5 years were found to be stunted (low height for age), 101 million children were found to be underweight (low weight for age), and 52 million children were found to be wasted (Weight for height) Further, from the estimates from United Nation (UN), about 6.3 million under age-five mortality were occurred in India, of which 45% died due to malnutrition.

The Global Nutrition Report 2017 show that, despite the significant steps the world has taken towards improving nutrition and associated health burdens over recent decades, nutrition is still a large-scale and universal problem. Many studies reported the health and physical consequences of child malnutrition include delaying their physical growth and motor development, lower intellectual quotient (IQ), greater behavioural problems, deficient social skills, and susceptibility to contracting diseases. Child malnutrition may also lead to higher levels of chronic illnesses in adult life which may have intergenerational effects, as malnourished females are more likely to give birth to low-weight babies. Malnutrition is not a simple problem with a single and simple solution. Multiple and hierarchically interrelated determinants are involved in causing malnutrition most immediate determinants are inadequate dietary intake and disease which are themselves caused by a set of underlying factors: household food insecurity, poor maternal/child caring practices, and lack of access to basic health services including lack of safe water supply and unhealthy living environment such as open defecation.. In turn, these underlying causes themselves are influenced by economic, political, and sociocultural conditions; national and global contexts; capacity, resources, environmental conditions, and

governance. Due to inadequate calories, protein, and other important nutrient intake child experience delays in physical and mental development, lower body weight, and a vicious circle of illness and malnutrition. The impacts of malnutrition on child health and development are a lifelong process. Therefore, these effects are categorized into two parts. In the shorter time period, lack of nutrition, particularly foetal under nutrition at a critical level, causes to permanent changes in the structure of the body, i.e., weight loss due to depletion of muscle mass and fat and metabolism even if there existed no nutritional insults subsequently, in later life this can cause to increase in the probabilities of chronic non -infectious disease. In the longer term, there is a strong correlation between the health of children and the economic growth of the country. When we relate the exogenous growth model with good health as a necessary condition to provide labor services, we use health that is produced under the condition of decreasing return. In contrast, human capital is produced under the condition of increasing return.

Socio-culture issues related to family, local, and national levels also cause children's malnutrition. In poor houses sex biasedness is the most common issue in Pakistan. Mostly parents favour their sons a lot than their daughters (Gupta, 1987). Mothers also give their sons better food and ignore their daughters by giving them poor-quality food (Mehrotra, 2006). Parents create this discrimination in food and education by considering that their son will have a source of income and survival (Gupta, 1987). Illiteracy is also an important factor in malnutrition. An illiterate mother is more likely to affect by malnutrition than a literate mother. During pregnancy, illiterate mother unable to know which type of food or supplements necessary for her and her baby. This negligence creates severe health issues, including malnutrition (Ali, Chaudry, & Naqvi, 2011).

Need of the study:

Despite these efforts, women and childhood malnutrition remains a pressing concern in India, with severe consequences for child health, cognitive development, and future economic productivity. It is within this intricate web of demographic, economic, cultural, and social factors that researchers and policymakers strive to comprehend and combat childhood malnutrition in the Indian context. Understanding these complexities is crucial for formulating effective interventions and policies to mitigate the economic consequences of this pervasive issue. The purpose of this study is to comprehensively examine the economic consequences of childhood malnutrition in India. Recognizing the persistent and multifaceted nature of this issue, this research aims to shed light on the intricate relationships between childhood malnutrition and the broader Indian economy. By doing so, this study seeks to achieve several specific objectives:

Objectives of the Study:

1. To provide a comprehensive assessment of the economic costs associated with childhood malnutrition in India.
2. To identify the underlying social factors and determinants contributing to childhood malnutrition and to evaluate the effectiveness of existing government policies in India.

Methodology:

The study is based secondary data collected from Government reports, Websites, books, journal research papers and other magazines, Newspapers etc.

Analysis:

The impact of childhood malnutrition on labour productivity and earning potential is a critical aspect of the broader economic consequences of malnutrition in India. Malnutrition during early childhood can have profound and long-lasting effects on an individual's ability to participate in the workforce and earn a sustainable income. At a broader level, the aggregate impact of widespread childhood malnutrition on labour productivity and earning potential can have significant implications for a nation's economy. A large population with reduced productivity and lower earning potential can hamper economic growth and development. The healthcare costs associated with malnutrition extend far beyond the immediate nutritional interventions. They encompass a wide spectrum of medical care, hospitalization, medications, and rehabilitation. Addressing malnutrition not only improves individual health but also contributes to the overall economic well-being of societies by reducing the healthcare burden and allowing resources to be allocated more efficiently toward preventive and curative measures.

Malnutrition –social consequences

The Social determinants of health are factors that impact our health status, functioning and quality of life. They are grouped into five domains: Economic stability, Education, Healthcare, Environment and Social/Community. Malnutrition can result from a variety of sources and factors that extend beyond food. They may include places where we live and work, the people we interact with, the education we receive and businesses and services around us, as well as the community and physical environment where we live. All these factors influence our access and consumption of healthy food. The social determinants create the road for our lifestyle and health.

Beyond the economic aspect, there are social costs associated with reduced labour productivity and earning potential due to malnutrition. These costs include increased healthcare expenditures, higher social welfare costs, and potential social unrest resulting from income inequality and poverty. Addressing the impact of malnutrition on labour productivity and earning potential requires multifaceted interventions. These may include improved access to quality healthcare, nutrition education, school feeding programs, and efforts to break the inter-generational cycle of malnutrition and poverty. Additionally, policies aimed at increasing access to education and vocational training can empower individuals to overcome the limitations imposed by childhood malnutrition, ultimately contributing to economic growth and reducing income disparities in India. The United Nations Children's Fund framework on the "causes of malnutrition and death" discusses underlying outcomes for child nutrition. These include the relationship between nutrient intake and immunity at the immediate level, which is affected by access to food and health systems, adequate childcare, and sanitary environments. It is the social determinants of health which cover a range of social, economic, and political drivers affecting malnutrition in all its forms. Taking small steps to understand the complex mix of factors that make up the basic determinants helps one understand the importance of good nutrition and access to healthy food for all populations.

Education:

Access to and uptake of education must be a key driver of all development policies. Education has a fundamental role to play in personal and social development. Learning throughout life will be one of the ways to meet the challenges of the 21st century, building on the four pillars that are the foundations of education—learning to be, learning to know, learning to do, and learning to live together (UNESCO, 1996).

Sanitation Access: To reduce malnutrition sanitation played a crucial role. Sanitation indirectly effect on malnutrition. Sanitation directly related to health of people. Ill health leads to malnutrition.

Pure water access: Water played a key role in the balanced and good health maintenance in the society. Drinking water is scarce in many of the areas in the urban areas as well as in rural areas also. Due to water so many diseases are arise among the people. Now a days water is an important economic variable in the economy.

Malnutrition and its consequences – economic

The persistently malign effects of under nutrition in early life have significant economic consequences in adulthood. A number of studies show that shorter individuals have lower earnings in adulthood although the precise reason for this – the direct effect of height on physical productivity; the social benefits associated with height – vary from place to place. There is evidence that under nutrition in early life, manifested as low birth weight, increases susceptibility to coronary heart disease, non-insulin dependent diabetes, and high blood pressure – the Barker hypothesis. However, the biggest economic consequences are those resulting from neurological damage. Studies that have followed undernourished preschool children find that they attain fewer grades of schooling and develop poorer cognitive skills such as those relating to problem solving. By contrast, there is strong evidence that interventions that combat under nutrition in early life convey lifelong benefits. Everywhere in the world, schooling and cognitive skills are vital for success in the labor market. A useful rule of thumb is that every additional grade of schooling raises wages by eight to 12 percent. So individuals without such skills and with less schooling earn lower wages, which makes it more likely that will be poor.

The intergenerational transmission of poverty is a complex and pervasive phenomenon that refers to the cycle in which poverty is passed down from one generation to the next within families or communities. It occurs when children who grow up in impoverished households are more likely to experience poverty as adults, continuing a cycle that can persist across multiple generations. Breaking the intergenerational

transmission of poverty is a complex and long-term endeavour that requires collaboration between governments, communities, and organizations. By addressing the root causes and providing opportunities for individuals to escape poverty, societies can work towards a more equitable and prosperous future.

Malnutrition and its consequences – physical and neurological

The first thousand days, in utero and the first two years after birth, are critical for a child's physical and neurological development. During this period, children's nutritional status is affected by the quantity and quality of food they consume. Exclusive breastfeeding in the first six months conveys critical benefits and it is vitally important that complementary foods introduced after this contain the right quantities of macronutrients – calories and protein – as well as micronutrients. What happens when these are lacking? As discussed elsewhere in this book, children need energy to grow. Where this energy is absent, or where a child is repeatedly ill with infections that divert energy from growth while suppressing appetite, children fail to grow at a healthy rate. Studies that have followed children from infancy through to adulthood find that this lost growth is never fully regained and so these individuals end up shorter in height than they would have been if their diets had been adequate and they had not been subject to repeat infection. Vitamin A deficiencies kill. Current estimates suggest that more than 145,000 deaths in children under five occur each year because children lack vitamin A. This number has significantly declined in recent years due to the improved reach of vitamin A capsule distribution programs. Zinc deficiency affects children's physical growth and leads to increased susceptibility to a number of infections including diarrhoea and pneumonia.

Both macro- and micronutrient deficiencies have insidious effects on neurological development. Iodine deficiency adversely affects development of the central nervous system leading to loss of IQ and mental retardation. Iron is needed to make brain chemicals (neurotransmitters) that aid in concentration; iron deficiency constrains cognitive development in children. Chronic under nutrition has neurological consequences that lead to cognitive impairments. The prefrontal cortex is especially vulnerable to under nutrition with the result that undernourished children can suffer from attention deficits and reduced working memory. Other neurological insults resulting from chronic under nutrition include damage to the parts of the brain responsible for spatial navigation and motor skills, The parts of the brain (axons) responsible for transmitting signals from one neuron (brain cell) to another are damaged by chronic under nutrition with the result that these signals are passed more slowly and inefficiently.

Malnutrition and obesity

The word “malnutrition” encompasses under nutrition, deficiencies in macro- and micronutrients, and what is somewhat inelegantly termed over nutrition, excessive caloric intake, exacerbated by diseases such as diabetes and low levels of physical activity. Overweight and obese individuals are one manifestation of over nutrition. Overweight and obesity are significant public health problems in much of the developed world and increasingly in developing countries. Across the developing world, however, under nutrition is the major form of malnutrition.

The effect of childhood malnutrition on national economic growth and development is a critical concern because it can hinder a country's progress on multiple fronts. Malnutrition, particularly during early childhood, has wide-ranging and long-lasting economic implications that extend beyond individual health.

Reduction of malnutrition Programs and policies in India:

The Ministry of Women and Child Development have come up with several schemes deciding the norms of child nutrition. These are reviewing time to time according to the needs of beneficiaries in the country.

1. National Guidelines on Infants and Young Child Feeding - guidelines emphasize the importance of breast feeding
2. National Nutrition Policy - monitoring the nutrition levels across the country and sensitizing government machinery on the need for good nutrition and prevention of malnutrition. Also includes the Food and Nutrition Board, which develops posters, audio jingles and video spots for disseminating correct facts about breastfeeding and complementary feeding.
3. The Integrated Child Development Services Scheme - providing services to pre-school children in an integrated manner so as to ensure proper growth and development of children in rural, tribal and slum areas.

4. Udisha - train child care workers across the country. Its scope reaches as far as remote villages.
5. National Policy for Children- lays down that the State shall provide adequate services towards children, both before and after birth and during the growing stages for their full physical, mental and social development.
6. National Charter for Children emphasizes Government of India's commitment to children's rights to survival, health and nutrition, standard of living, play and leisure, early childhood care, education, protection of the girl child, empowering adolescents, equality, life and liberty, name and nationality, freedom of expression, freedom of association and peaceful assembly, the right to a family and the right to be protected from economic exploitation and all forms of abuse.
7. National Plan of Action for Children includes goals, objectives, strategies and activities for improving the nutritional status of children, reducing Infant Mortality Rate, increasing enrolment ratio, reducing dropout rates, universalization of primary education and increasing coverage for immunization.

Addressing childhood malnutrition requires comprehensive strategies, including investments in healthcare, education, social protection, and nutrition programs. By prioritizing nutrition and human capital development, nations can break the cycle of malnutrition and realize the economic benefits of a healthier, more skilled, and productive population, ultimately contributing to sustained economic growth and development. Governments and international agencies can set in place conditions which will foster public participation and facilitate bottom-up approaches. The essential requirements are:

1. Strengthening democracy and encouraging political participation. Dialogue between the people and government should take place at all levels. Debate can be fostered through open and transparent policymaking. Processes for consultation and input into policy-making involving the public and NGOs are needed. Free elections, freedom of speech and a vigilant free press are, of course, important.
2. Establishing mechanisms for gathering the views of people whose voices often go unheard. Procedures for local consultation and participation are important.
3. Methods should be used which specifically seek out the views of particular groups such as women, urban slum dwellers, people living in small villages and children.
4. Empowering individuals so that they can in turn mobilise communities. Information is a key feature of empowerment. To be effective, however, information must be in an accessible and meaningful form. This means using appropriate languages, translating information from the written word, and finding meaningful and interesting ways of conveying information.

Conclusion:

Since the last few decades, childhood malnutrition became one of the major public health concerns in developing countries. The present scenario of globalization in the area of economic growth, health and nutrition indicates that the country is undergoing rapid socioeconomic, demographic, and nutritional and health transitions. Unfortunately under nutrition continues to be persistently high in India and remains a challenge. The brightest nation depends upon the healthy children. Physical and cognitive development primarily held upon the nutrient intake of mother. Thus the Targeted interventions should be designed to reduce prevalence of low birth weight in addition to improving mother's education on intake of Nutrient and feeding practices and improve other socio-demographic conditions. Bringing changes in National level target settings for the reduction of Malnutrition. The professional social worker plays primary role in the screening, sensitizing, counselling, networking and brings changes for the healthy nation. The findings underscore the urgent need for comprehensive interventions and policy reforms to address childhood malnutrition as a critical driver of economic disparities and impediments to national development in India. Efforts to address childhood malnutrition must be comprehensive and integrated, involving not only healthcare interventions but also improvements in education, social welfare, and economic opportunities. Investments in early childhood nutrition, quality education, and healthcare access are essential for breaking the intergenerational cycle of malnutrition and poverty. Equally important is the need for policy reforms that address the root causes of malnutrition, reduce income inequality, and promote social inclusion. The eradication of childhood malnutrition is not only a moral imperative but also an economic imperative that holds the key to a brighter and more prosperous future to India.

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