



Acute Malnutrition Prevention Innovation Lab 2019

Fostering an ecosystem to prevent acute malnutrition



A slum in Jahangirpur, North-West Delhi, where the inhabitants are waste pickers.

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Acute Malnutrition Prevention Lab

Acute Malnutrition in the urban context is a complex social challenge. A challenge like this cannot be solved with a “silver bullet” in terms of one technology (e.g. polio vaccine), or a new policy (health care for all) or even more money (double the budget). It requires a co-ordinated and systemic approach across a range of factors to create change and transformation.

As we move into the solution space we see a range of solutions have been tried in to treat the problem in rural scape of India, but the prevention of problem has left unattended and the nutrition sensitive approach, that advocates the multi-factor interventions.

The Acute Malnutrition Prevention Lab is a social innovation lab with a focus on low income communities of urban Indian cities and the associated contextual perspective and causal factors of acute malnutrition. This Lab will focus on enabling a range of solutions to be tried and tested at the same time at one location by creating a partnership across a range of actors and their programs, projects, products and policies - we can create systemic change.

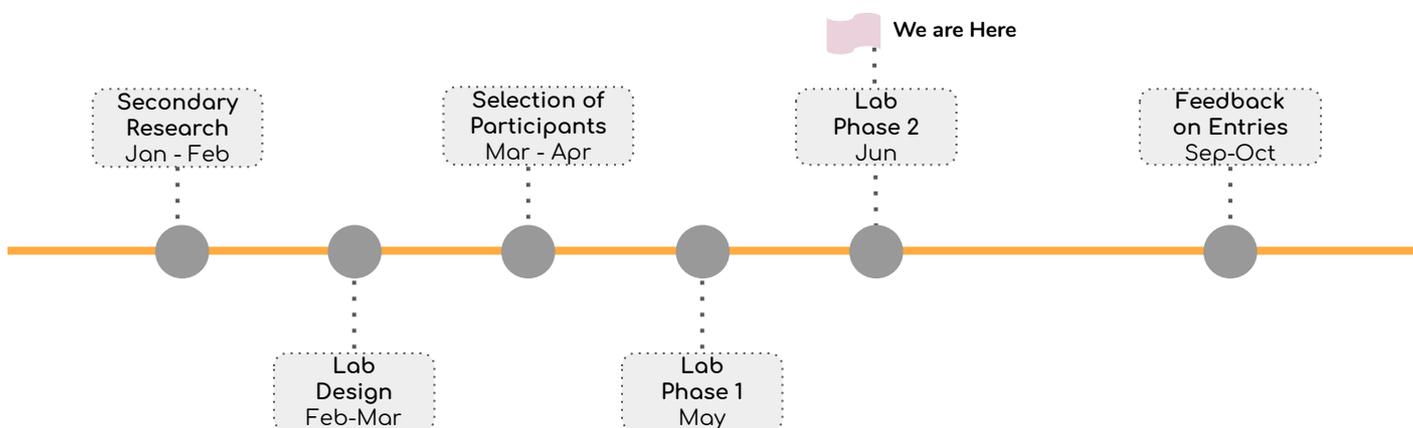
The Lab is designed as innovation opportunity for diverse participants to collaborate and discover, design, & develop new systemic approaches to reach a common goal. They will be guided by globally renowned innovation practitioners with a world-class curriculum.

The innovation is in the “coming together” of the various actors. To answer the question, “What is the best combination of actors for a specific location to prevent acute malnutrition?”.

Russell Ackoff, the famous systems thinker gives the following analogy which is quite suitable in our context. Imagine 500 of the best cars in the world in one place. Experts now evaluate and pick the best tyre, best engine, best seats, best entertainment system etc from each car. Now imagine piecing together a new car from each of the “best” parts of all the cars. Will this new car work? Of Course not. A car is more than its parts.

In a similar way we see the goal of the Lab is to find the “car” that can work rather than individual parts that are best or innovative.

The Timeline



Urbanization of Malnutrition

“India carries half of the global wasting burden with 25.5 million children and a third of the world’s burden for stunting with nearly 46.6 million children.”

India has exhibited a robust economic growth over the past two decades with World Bank ranking India as the third largest economy in terms of the size of its GDP in 2017. Paradoxically, its economic growth doesn't mirror overall well being of its population. With an accelerated move towards urbanization, India's urban slum population has estimatedly increased from 65.5 million in 2011 to a staggering 104 million in 2017. The metropolitan cities in India are observed as the engines of economic growth, attracting people from all the surrounding regions, a prime contributor for rural-urban migration. The metropolitan cities are witnessing increase in socio-economic pressures in the lives of the people and the quintessential infrastructure facilities.

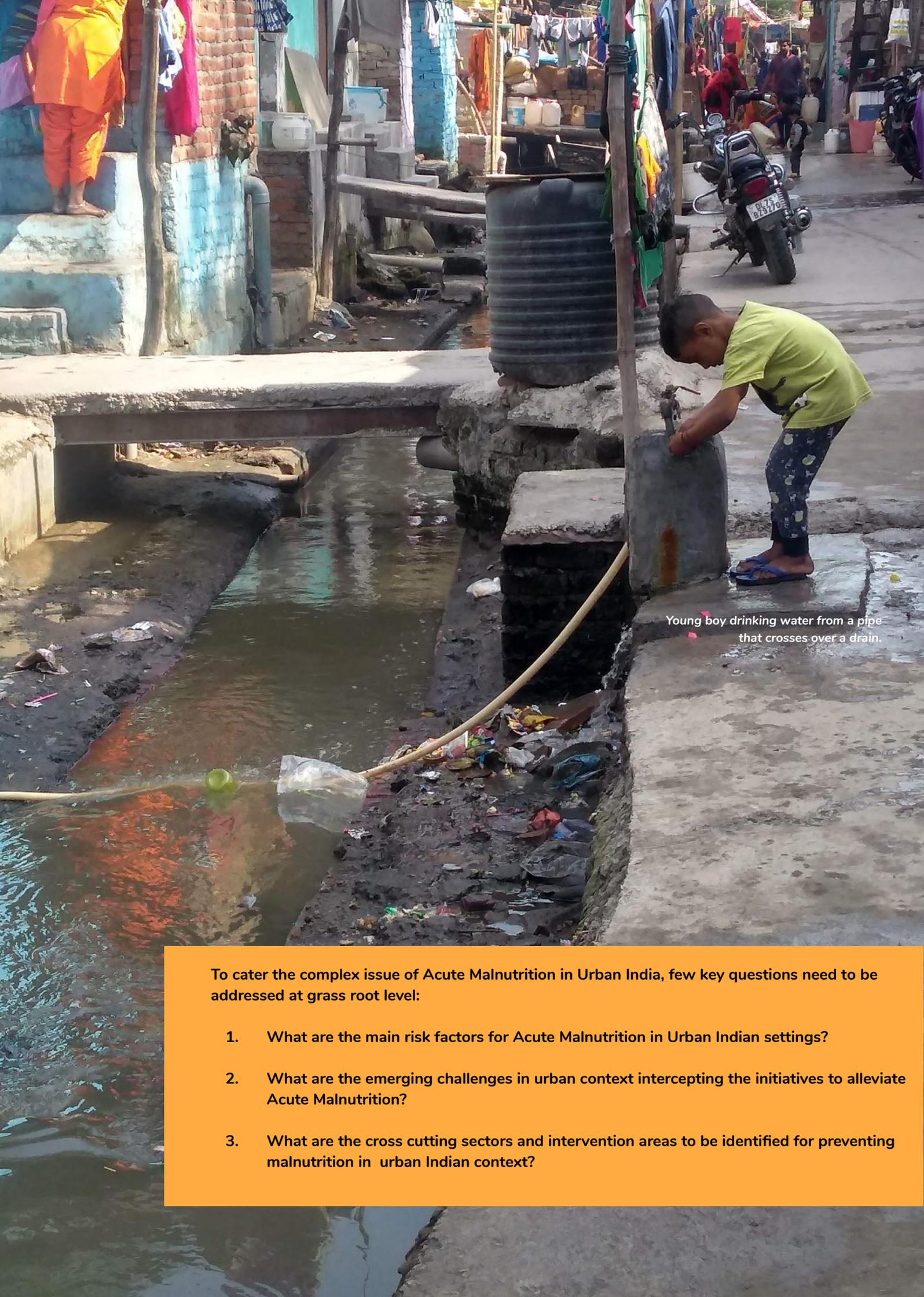
Increasing economic performance has also not guaranteed healthy lives of people. Malnourishment is one serious issue India has been fighting with since decades now albeit through its nutrition specific strategies, yet its amongst one of the highest -ranking country having malnourished children.

To its credit India has pioneered in policy initiatives such as-

1. Integrated Child Development Scheme (ICDS)- 1975
2. Public Distribution System (PDS)- 1992
3. Mid-Day Meal Scheme (MDMS)- 1990
4. National Food Security Act (NFSA)- 2013
5. Poshan Abhiyan (National Nutrition Mission)- 2018

The intervention strategies adapted as yet have been nutrition specific where the approach has been around treating the issue. However, with India urbanising at a fast pace, a nutrition sensitive approach is a dire need. Such approach will acknowledge the changing scape of country and underlying causal factors of migration, inefficient urban infrastructure facilities, and effective knowledge gap in people, that has left unidentified for decades. Lack of sectoral convergence and intervention strategies approach, essential for a holistic solution has highlighted the urgency to adapt wide range strategies that involve multi-stakeholder approach in preventing acute malnutrition.





Young boy drinking water from a pipe that crosses over a drain.

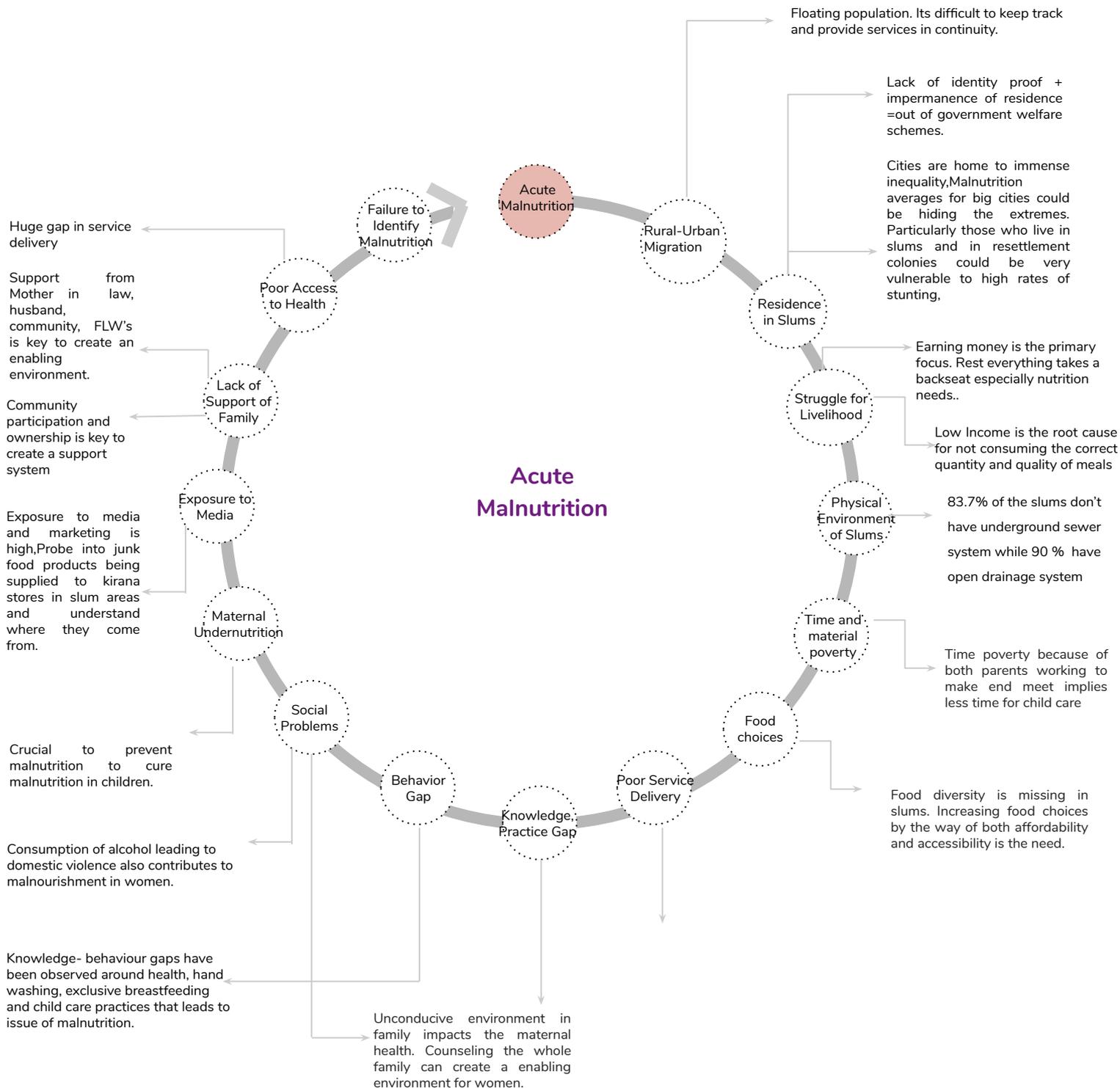
To cater the complex issue of Acute Malnutrition in Urban India, few key questions need to be addressed at grass root level:

1. What are the main risk factors for Acute Malnutrition in Urban Indian settings?
2. What are the emerging challenges in urban context intercepting the initiatives to alleviate Acute Malnutrition?
3. What are the cross cutting sectors and intervention areas to be identified for preventing malnutrition in urban Indian context?

Data Collection

What Literature and Experts' Say?

To understand actors behind situating acute malnutrition in urban India settings, the team interviewed experts from different domains like Nutrition, Health, WASH, FMCG, Urban development, Livelihood et al, who belonged to Research Institutes, NGO's, Government Bodies and Private sector. The cycle of acute malnutrition highlights the interconnected factors that cause acute malnutrition in urban India setting.



The Causal Factors

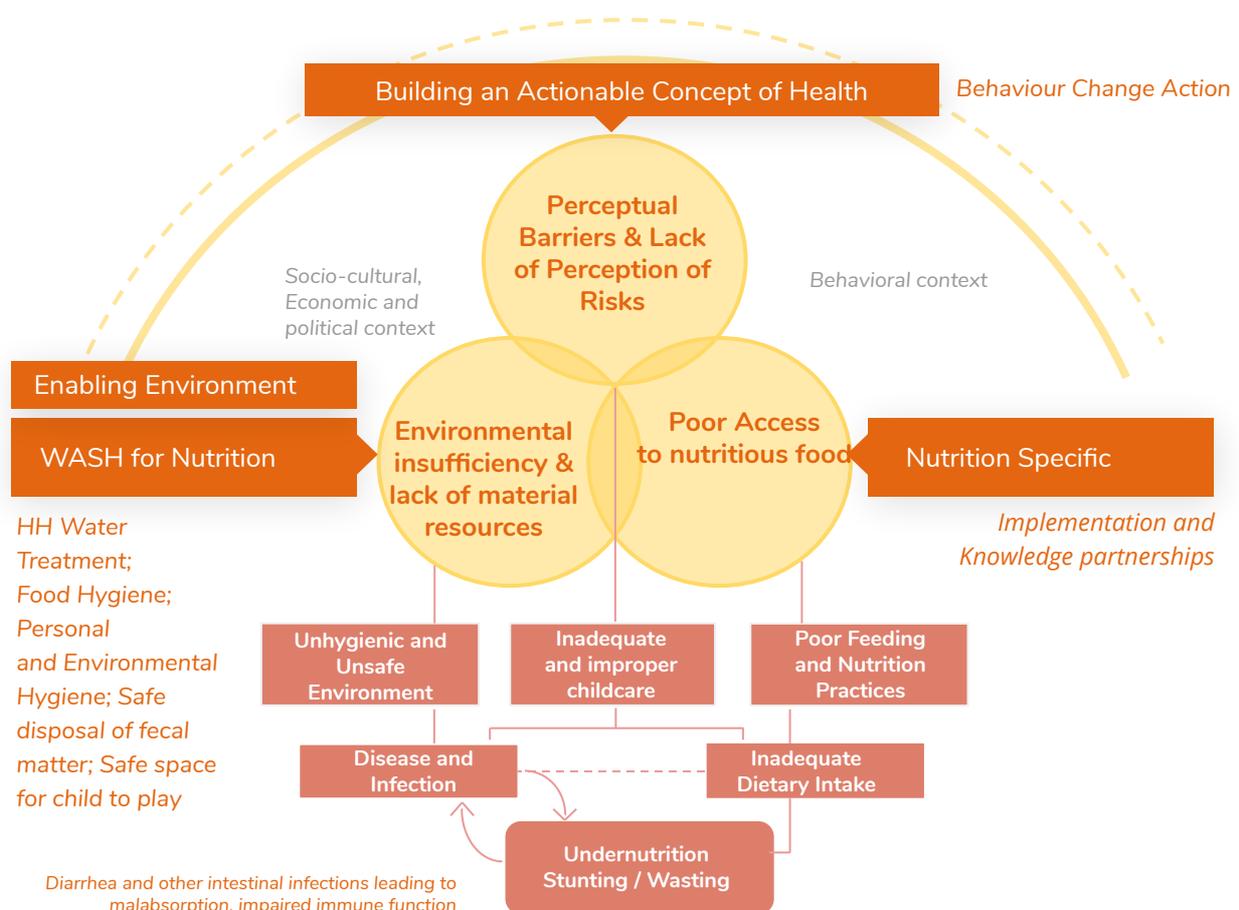
Rationale and Multisectoral Approach

As per definition in UNICEF's (1990) conceptual framework of Acute Malnutrition causality in children is multisectoral in nature. To further strengthen this and validate it, secondary research, expert interviews and a quick immersion in the households in the urban slum communities of Delhi was done to understand the contextual causal factors. As per UNICEF, the determinants have been classified into three categories:

1. Immediate Causes: Inadequate dietary intake and diseases
2. Underlying Causes: Unhygienic and Unsafe Environments, Inadequate and Improper Childcare, and Poor Feeding and Nutrition Practices
3. Basic Causes: Livelihood, Poverty, Politics, etc.

However, the literature understanding coupled with field understanding brought up new contextual perspectives and determinants common to all the low income communities from urban Indian cities.

The study places the argument of acute malnutrition not just about treatment of health problem but a existence of strong inter-linkages between various sectors and their insufficiencies. The research indicates the presence of predominantly three broad sectors: socio-economic, environmental, and food security, laying major impetus to the model of multisectoral nutrition sensitive approach for urban Indian cities' context and a systems rethinking for a curative and preventive stance over the issue of acute malnutrition.



The Ecosystem

A contextual understanding of urban India

Urban India's challenge of acute malnutrition brings in diverse range of factors that affect the health of a human being. Illiteracy and lower socio-economic status of women play a major role in precipitating ill health and undernutrition.

Rural poor after migrating to different slums with the hope of better living, fall easy prey to unhygienic life, overcrowding, and malnutrition. Evidence suggest, that lack of clean water supply and sanitation makes children more vulnerable to water borne diseases. High dependency on street foods, substandard packaged food, and low healthy behavior knowledge knits well with the poor surroundings and form a large ecosystem of malnutrition in urban slums of India.

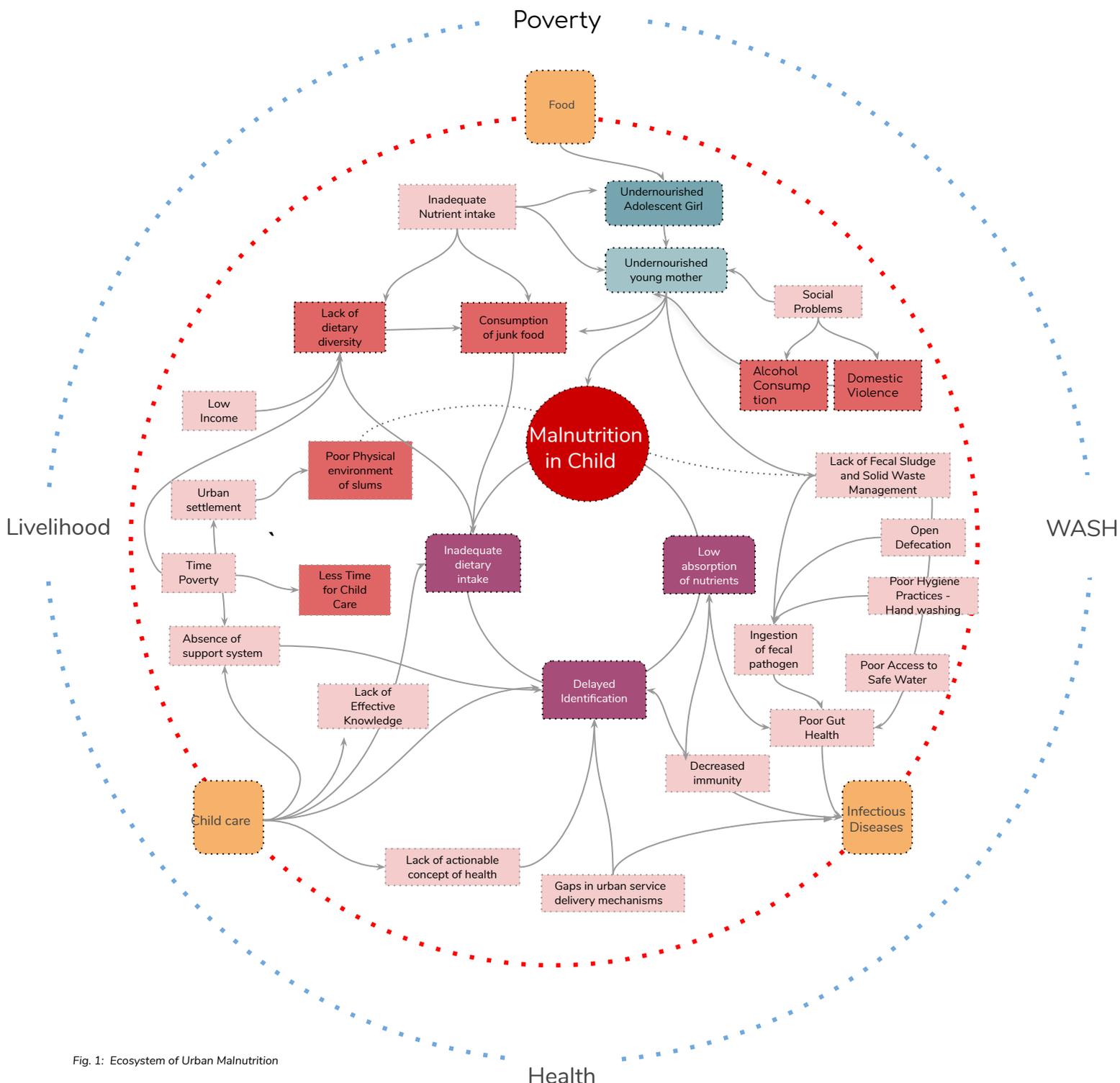
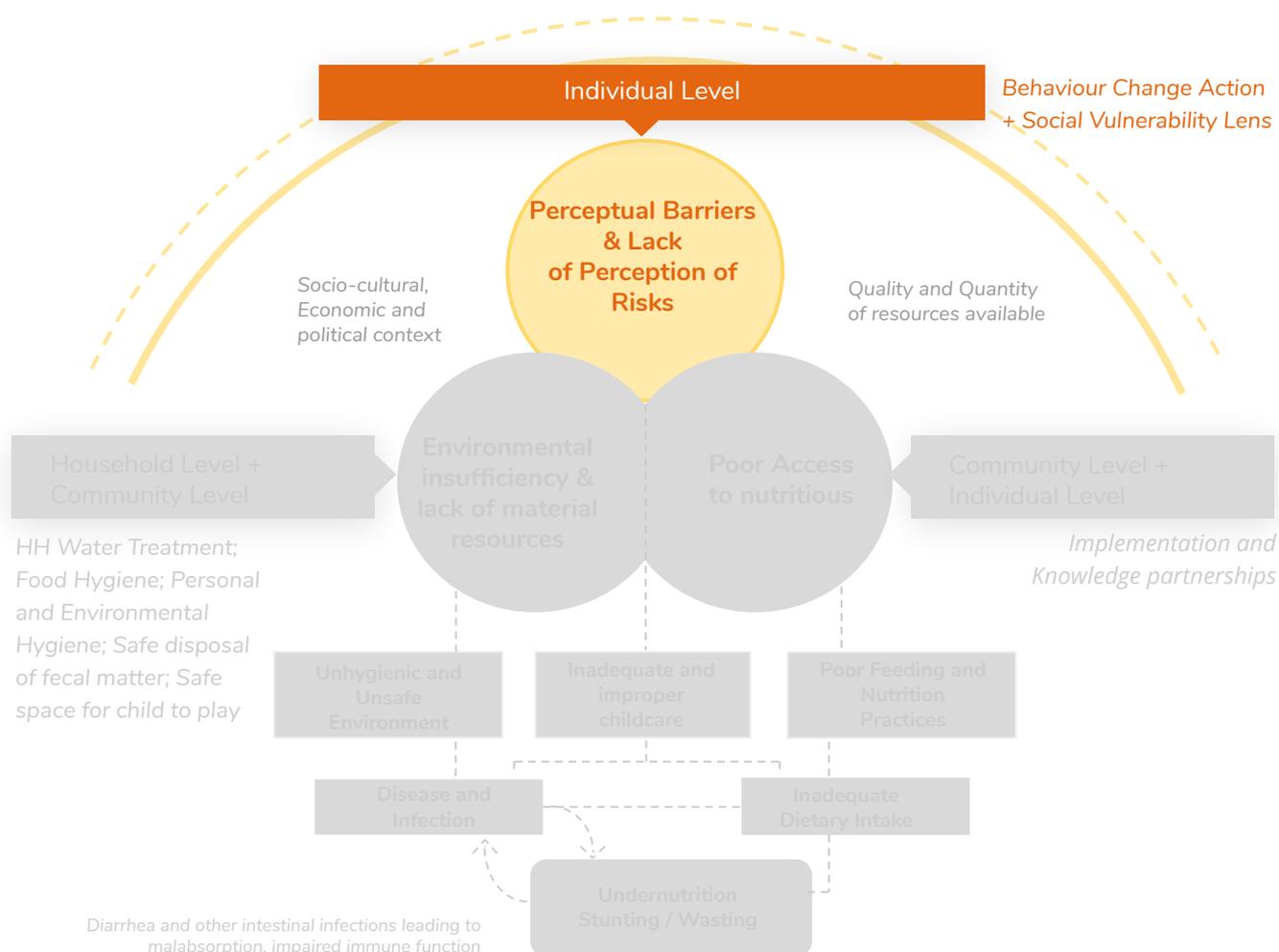


Fig. 1: Ecosystem of Urban Malnutrition

The Intervention Areas

A Cross Sectoral Approach

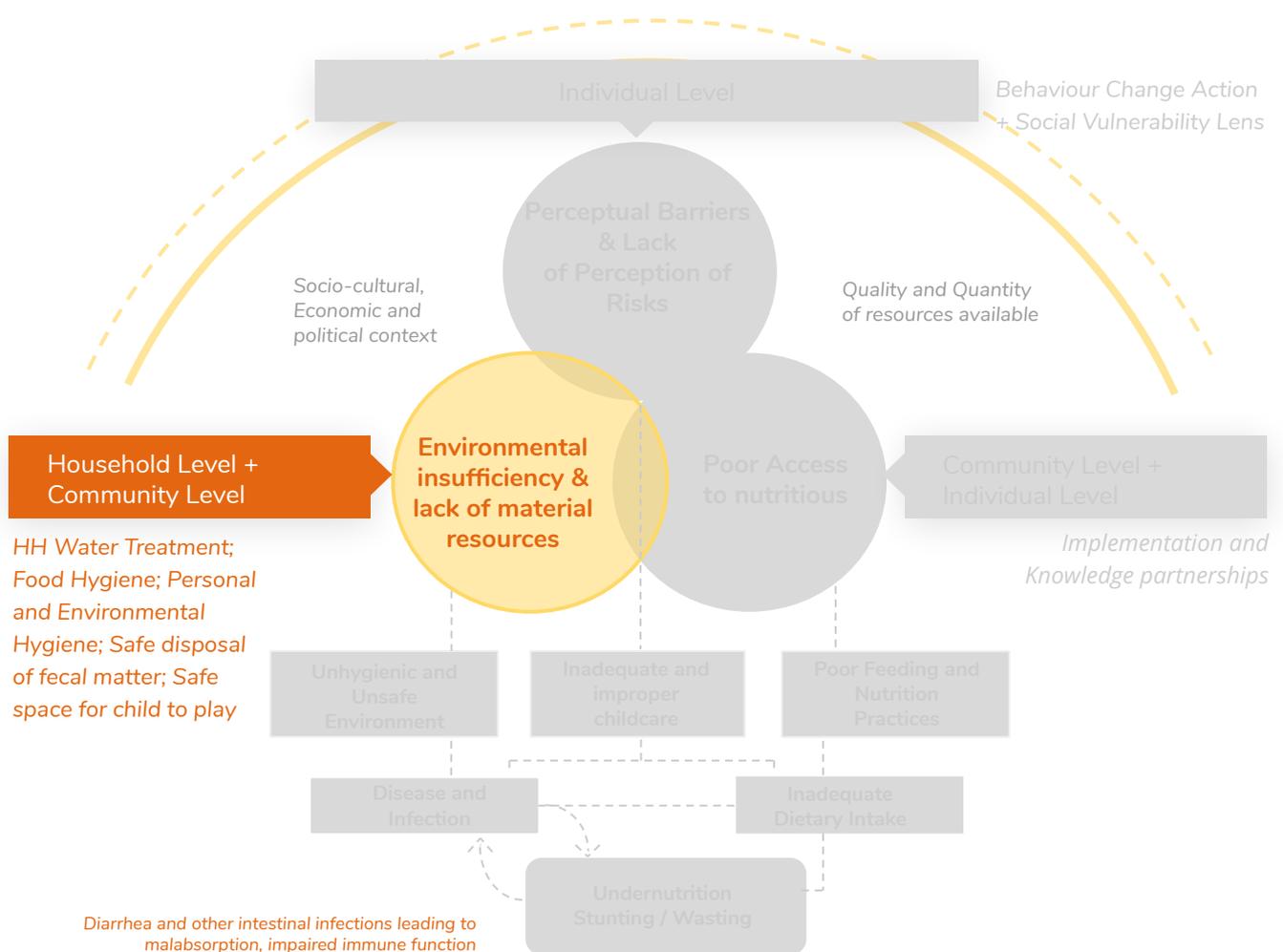
1. **Coaching Care-Givers and Creating Enabling Environment**
Building a choice architecture, to bridge the intent - behavior gap
2. **Find Malnourished / High Risk children and Ensure Continuum of Care**
Identification of malnourishment in children by either parents or health service providers to prevent compounding effect on their condition
3. **Creating Social Resources for Care**
Creation of action groups to to enable and support women in forming complex decisions



The Intervention Areas

A Cross Sectoral Approach

4. Make Low income Settlements a Safe and Healthy Space Rethinking the urban infrastructure facilities for healthier surroundings



The Intervention Areas

A Cross Sectoral Approach

- 5. Enabling Nutrition Security**
 Creation of action groups to to enable and support women in forming complex decisions

