

PROCEEDINGS

Development Dialogue

On

Malnutrition among Children and Women in Bihar

April 25, 2017

Organized by



A N Sinha Institute of Social Studies



In partnership with

The United Nations Children's Fund

A N SINHA INSTITUTE OF SOCIAL STUDIES
NORTH WEST GANDHI MAIDAN, PATNA 800001, INDIA
www.ansiss.res.in, +91-612-2219395

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Coordinators

Neetu Choudhary, choudharyneetu@gmail.com

Abhijit Ghosh, abhijitghosh2007@rediffmail.com

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Forward

Development loses its essence once malnutrition becomes invasive and invades the growth trajectories of children. While it tends to overshadow other human development indicators and reduces them to insignificance, its long term adverse impact is magnified further through functional impairment and degeneration of human reproductive mechanism. Its backlash on the generations that follow is incomprehensibly large and could sufficiently explain trajectory of civilization crisis.

Bihar seems to have been caught up with an archetypical scenario showing serious contradictions within the basic postulations of economic development. While the state has witnessed fairly decent economic growth leading to a decline in poverty as well, its inconsequential fall-out on nutritional well-being poses an invincible development challenge. The research work carried out by my colleagues Dr. Neetu Choudhary and Dr. Abhijit Ghosh in collaboration with UNICEF has systematically analyzed the multidimensional character of malnutrition that the state is grappling with. They have also indicated a set of interventions that the state and community together must consider to address the problem.

Hence, the questions are (1) why the incidence of malnutrition in Bihar outweighs the impact of economic growth and (2) how does one reverse this trend? The present 'Development Dialogue' is organized to address such questions and to find out a plausible way out. This is the fourth 'Development Dialogue' in the series that has been set in motion in the institute. It provides a broad platform where substantive issues related to contemporary development of the state and the economy are raised by a handful of researchers to be followed by an intense debate and discussion by all stakeholders including officials drawn from the government and international development organizations, civil society organizations, academicians, researchers and others. Such an endeavour must finally take everybody on board to design the feasible way out. Besides, it must deepen the understanding of the problem and explore grey areas for further research. I am sure that the proceedings of the Dialogue that the institute has brought out will be useful to all stakeholders.

(Sunil Ray)

About the dialogue

Subsequent to the completion of the study on ‘Malnutrition among Children and Women in Bihar: A Comprehensive Picture’ conducted by the A N Sinha Institute of Social Studies, Patna with the support from UNICEF, a development dialogue was held to share the findings from this study as well as to brainstorm on the issue of malnutrition in Bihar. The dialogue was meant to bring researchers, practitioners and policy makers on a common platform to facilitate a nuanced understanding on the ground realities. In the process, it also engaged with all the stakeholders to arrive at a common framework on nutrition policy and intervention and to develop a consensus on the strategy to combat the crisis of malnutrition in Bihar. One of the agenda of the dialogue was also to advocate for the cause of women and child nutrition in Bihar with state leadership and concerned government departments.

About the study

With around 48.3 % of her children being stunted as per NFHS 4, Bihar is one of the most undernourished states of India. Although this reflects a decline from 55.6% during NFHS 3, it can hardly be considered as satisfactory over a span of ten years. It is well recognized now that child malnutrition has a multidimensional dynamics underlying it, which does not necessarily correspond to levels of economic growth. This is corroborated by the fact that Bihar has recorded fairly decent economic growth rates during the last decade, leading to a decline in poverty ratio from 54.40% in 2004-05 to 33.74% in 2011-12¹. Yet child malnutrition (stunting) during this period could decline only by around 7%, thus indicating that an inadequate proportion of each additional growth gain has been diverted towards the cause of nutritional well-being. While this does not mean that poverty reduction is unimportant, it does necessarily imply that the issue of child malnutrition has failed to figure strongly in the list of policy priorities in Bihar.

In terms of research, a surge of interest on Bihar is observable during recent period (see for example - Choithani and Pritchard 2015, Dreze and Khera 2015, Dreze et al 2015, Sikka 2015, Kumar 2014, Fraker et al 2013, Parulkar and Aggarwal 2013, WFP 2009). However, most of these interventions have focused on basic functioning of food and nutrition support machinery and its delivery mechanism. A holistic perspective on the extent and dynamics of child malnutrition in Bihar remains scant and this could be one of the reasons that the issue does not form an aggressive agenda of governance. Further, the issue of equity has not been at the centre of malnutrition discourse in Bihar though group inequality in food insecurity and hunger is a well-recognized phenomenon (e.g. Kumar 2014, Khera 2008). The dimension of equity is central to the Sustainable Development Goals, as is zero hunger and gender equality. Additionally, it is intrinsically as well as instrumentally important in the highly stratified society that the state of Bihar has. Ostensibly, the understanding on malnutrition scenario in the state needs to align itself with that on inequality – across social and income groups. It is in this context that the A N Sinha Institute of Social Studies (ANSISS) with support from UNICEF, Patna has conducted a study and has organized the development dialogue wherein the larger goal has been to prepare a ground for nutrition – centric development process.

¹ Based on Mixed Reference Period (MRP) Consumption,
<https://www.rbi.org.in/scripts/PublicationsView.aspx?id=15283>

In fact, failing to give foremost attention to child malnutrition is self-defeating for any agenda of development given the impact child malnutrition has on child growth and subsequently on overall quality of human development. Particularly critical from the perspective of development, is the need to address the level of child stunting - an indicator of long-term cumulative growth deficiency, which is known to cause functional impairment in later adulthood (UNICEF, 1994). The situation of the girl children suffering from stunting is likely to deteriorate further due to their reproductive role. To the extent these girls are likely to be future mothers, stunting among women would have an inter-generational effect wherein the infants born to them will have low birth weight in all likelihood. This is ostensibly indicative of a vicious circle unless interrupted through conscious policy intervention. Moreover, as a measure of vulnerability, current levels of stunting among children also reflects the proportion of population that may not reach full growth potential and thus has retarding consequences for its productivity and economic contribution. Additionally, for female population stunting represents a multiplier effect in terms of nutritional deprivation and productivity retardation. The potential spill-over effect of child stunting on human and economic development necessarily brings us to the issue of 'economics of nutrition'. This is another aspect that the study has examined and which the development dialogue was designed to examine.

Objectives

This study has attempted to offer an inter-temporal and spatial understanding into the dynamics underlying malnutrition among children and women in Bihar. The objective has been to conduct a nuanced analysis of the dimensions and processes of malnutrition in the state as well as to critically reflect on associated policy issues. An attempt has been made to assess the economic cost inflicted on the state due to given levels of malnutrition, particularly of child stunting - an indicator of long-term cumulative growth deficiency, leading to irreversible cognitive implications and functional impairment in later adulthood.

Specifically, the objectives addressed by the study were to,

- i. develop a comprehensive and equity-centric picture of the state of child malnutrition- particularly stunting in Bihar
- ii. assess inter-temporal and spatial dimension of child malnutrition in the state
- iii. examine the status of malnutrition among children and women within state's development agenda

- iv. estimation of economic deceleration caused by each additional burden of child stunting

Key observations

1. Indeed, it is the economic cost in terms of sub-optimal school performance and adult productivity loss that may perhaps give a more appealing logic to policy processes to divert attention and resources to the issue of malnutrition. This study adopts the methodology proposed by CARD, UNICEF & WFP (2013) and Hunt (2005) to estimate the annual economic loss incurred due to malnutrition in Bihar.
2. The study projects that Bihar incurs an approximate annual economic loss of Rs. 150 - 200 crores due to sub-optimal school performance of the stunted (48.3%) children below five years of age. The estimated annual economic loss incurred due to moderate and severe stunting among children in Bihar is approximately Rs. 100 crores and Rs. 300 crores respectively. Similarly, the approximate annual economic loss incurred by Bihar due to anemia among adult men and women is estimated at Rs. 536 crores and Rs. 706 crores respectively.
3. Ostensibly, failing to give foremost attention to malnutrition, particularly child malnutrition - is self-defeating for any agenda of development given the impact child malnutrition has on child growth and subsequently on overall quality of human development.
4. Bihar has recorded fairly decent economic growth rates in recent period, yet child malnutrition (stunting) could decline only by around 7% points to reach at 48.3 % between the third and fourth rounds of NFHS. This may be indicative of the fact that an inadequate proportion of each additional growth gain has been diverted towards the cause of nutritional well-being.
5. Despite the increase in monthly per capita consumption levels, it remains one of the lowest in the country. In terms of per capita calorie intake, Bihar does not lag much behind other states of India and the state seems to be relatively less disadvantaged in terms of starvation or acute food insecurity and more disadvantaged in terms of long term and cumulative forms of deprivation, as compared to rest of the country. The former is measured by wasting, which is lower in Bihar than the national average whereas the latter measured by stunting is almost the highest in Bihar.
6. Bihar has been able to arrest the prevalence of low BMI among women almost at comparable levels as other key states. However, this is not the trend for child

stunting. The visible incongruence in the performance of stunting and low BMI indicators in Bihar between third and fourth rounds of NFHS necessarily indicate (subject to further testing) that the decline in malnutrition among women has not been able to translate into a corresponding decline in child stunting. In other words, other environmental factors than the mother-child reproductive link appear to be more responsible for high stunting levels in Bihar.

7. Malnutrition in Bihar is a group (typically various castes) phenomenon and it is this pattern that is keeping the average malnutrition levels in Bihar rather high. For example, as per the RSOC data the percentage of underweight and wasted children is 27.5 and 11.7 respectively among general (non-backward) caste categories, the same is 46.5 and 14.7 respectively among the Schedule Caste (SC) categories, 38.4 and 14.2 among Schedule Tribes (ST) categories and 35.4 and 12.7 among the Other Backward Class (OBC) categories. The SC group remains the most disadvantaged as far as the progress towards nutrition security is concerned.
8. Inter -group disparity in prevalence of low birth weight is not as high as in prevalence of child stunting. Nutrition deprivation is relatively greater among children than among new born babies. It can be inferred that nutrition deprivation accumulates over the child's early growth year. This may in turn be attributed to social inequality in access to resources (determinants) of nutrition.
9. Among the districts Sitamarhi has the highest level of child stunting at staggering 57.3%. In fact, nine districts of Bihar viz. Vaishali, Gaya, Jehanabad, Nalanda, Lakhisarai, Kaimur, Madhepura, Purnia and Seohar have more than 50% of their children as stunted, which is an extremely discouraging scenario. Gopalganj at 35.6% has the lowest proportion of the stunted among children below five years of age. Siwan is the only district after Gopalganj, which has a prevalence of child stunting below 40%.
10. In rural Bihar, the prevalence of stunting among children below three years of age, increased marginally from 55% to 56% while in urban areas it rose from 42.2% to 48.4%. Similarly the prevalence of wasting increased from 21.4% to 27.4% in rural Bihar while in urban Bihar it increased from 17.1% to 25.2%. Thus, even though the level of urbanization is low in Bihar, urban challenges of nutrition need to be given attention.
11. As found in myriads of existing studies, socio-cultural and behavioral factors such as maternal education and child care practices etc. are significant determinants of prevalence of stunting among children in Bihar. While religion

of household does not seem to make any difference, child from a Scheduled Caste (SC) household has significantly higher probability of being stunted as compared to those in households from general caste categories. An interesting finding is the positive impact of mother's access to money for independent use (given by indicator on whether women have bank account that they themselves use in NFHS 4), which implies that the greater the access of mother to money for own use, the lesser is the probability that her child will be stunted.

12. Living environment and health practices have direct bearing on child nutrition outcomes in the state. Access to sanitation very significantly improves a child's chances of not being stunted. Health and care practices such as pre-natal medical checkup also have significantly positive impact on child's height. Having a health card is a proxy for responsible child health practice and does affect child nutrition in a positive manner. Diarrhea is one of the immediate and direct drains on child's nutritional well being and therefore child's exposure to diarrhea in recent past reflects in increased likelihood of a child being stunted.
13. Given its vulnerability to natural disaster – both flood and drought, an immediate question that comes up is whether this vulnerability shapes up the vulnerability to malnutrition in the state. However, there does not appear any significant difference in the prevalence of stunting between disaster prone districts and normal districts. Neither is the difference significant between per capita income and consumption levels of districts classified as disaster prone and others. However, the issue may need further inquiry as the nature and geography of calamities – whether flood or drought- has itself changed.
14. The districts of Gopalganj and Siwan where prevalence of stunting is relatively low, also have unique and consistent positioning in terms of performances on identified social determinants of child stunting. Also these two districts are placed nearly together on all indicators considered in the panel. Gopalganj and Siwan with sex ratio of 1021 and 988 respectively, are unique not only in Bihar but also in India. In terms of adult female literacy and work participation as well, these districts are better off than many other districts. Alongside, Sitamarhi with more than 57% level of child stunting, performs low on these parameters. One observation is that to reduce child stunting, a convergence is needed in terms of performance of various underlying factors.
15. The study on Bihar re-asserts the centrality of gender roles and social structure in child nutritional outcomes wherein many of behavioural factors are found to improve with women's education and their ability to exercise freedom of

- choice. This is also indicative of the policy imperative to address structural causes of child malnutrition rather than just concentrating on incremental steps.
16. The prevalence of high stunting levels inflicts considerable cost in terms of child's school performance and health status. Using methodology followed in existing studies, it is estimated that with current level of stunting at 48.3% among children below two years of age, nearly 3500000 children (based on Census of India 2011) in Bihar are going to lose schooling by one year just because their linear growth is retarded. Alongside, if the problem of underweight is addressed among the children, the current rate of Under Five Mortality Rate in Bihar could be controlled at 31.5.
 17. The critical review of the state's approach towards malnutrition in Bihar, leads us to underline that public policy in Bihar has adopted a somewhat soft approach towards the issue. As in the rest of the country, in Bihar also initial interventions came in the form of programmes targeting food security of the population, which certainly had an impact on the status of hunger induced nutritional deficiencies. Yet considerable inequality in consumption level is observed. The performance of National Food Security Act (NFSA) and Integrated Child Development Services (ICDS) in India has witnessed wide variation across states. Bihar continues to be one of the worse performing states.
 18. Preventive healthcare constitutes the access to services that diminishes the possibility of exposure to diseases and is particularly important for two reasons. Firstly, it is cost effective and secondly, it is found that in Bihar (as in many other places) poor access to sanitation contributes greatly to the deprivation of stunting and underweight. The implementation of Total Sanitation Campaign (TSC) in Bihar has been relatively poor while it is early to assess its performance under the Swachh Bharat Mission. Bihar also lags behind in providing access to improved drainage system and garbage disposal system.
 19. This study also involved field visits which unfold some critical problems in the functioning of nutrition support system. This ranges from gaps in beneficiary selection and coverage and lack of inter-departmental coordination to resource gap at the levels of state departments and grass root units. The central government only contributes 50% of the cost of supplementary nutrition. The new Centre-State financial devolution formula has only put Bihar at a disadvantage.
 20. Situating Bihar alongside UNICEF's conceptual framework on the determinants (immediate, underlying and basic) of child malnutrition, reveals that the state

performs relatively better on immediate level (e.g. access to food) and relatively more deprived at the level of underlying (living environment, education etc.) determinants. This however, itself emanates from weaknesses and structural barriers at the basic level (e.g. institutional factors). At the **basic** level – access to resource and control within and outside the household- is quite gendered in nature and is stratified across castes in Bihar, resulting in group inequality in consumption and malnutrition, which itself is instrumental to the downward rigidity in child stunting.

21. Bihar faces **structural barriers** but unfortunately, the state suffers from **weak agency** interface as well. The blasphemy of malnutrition finds very negligible space in public discourse. Even media (both printing and electronic) coverage is nearly absent unless some kind of carnage (such mid day meal carnage in Bihar) takes place. Thus the scope for building of public opinion on the issue gets narrowed down and consequently, there is no demand or pressure from the bottom to seek more or better nutritional support interventions from the state.
22. Some **lessons** that this study could come up with include but may not be limited to the following:
 - Since nutrition is a multidimensional phenomenon, policy process needs to adopt commensurately dynamic design to address the challenge. As discussed above, in context of Bihar the issue of malnutrition needs to be addressed most strongly at basic and underlying levels. Policy approach must be sensitive to such an understanding.
 - Aggressive drive to alter the socially stratified (in terms of caste) and gendered ways of life needs to be mainstreamed in programme structure in contrast to the current situation where the issue of gender is confined to Social Welfare Department of Government. This one drive could have long term implications for several development indicators (most importantly for nutrition) apart from improvement in women's condition which is important in itself.
 - Awareness on sanitation needs massive campaign and this is not impossible. The fact that the states have had a successful polio eradication programme based on aggressive and mass scale approach – proves that if the states are willing they can undertake similar approach towards eradication of malnutrition. Sanitation and good nutrition should be incorporated compulsorily in the educational curricula.

- Given that due to high population base a few states contribute to majority of the malnourished population of the country, the central government should partner with those states in particular. These relatively poorer states are at a disadvantage as far as their ability to spend on nutrition interventions is concerned. The cost sharing formula in schemes like ICDS may be altered at least for these critical states so that there is sustainable flow of fund to the block level.
 - At operational level, an effective engagement of local people through local bodies may yield far reaching benefits. Strengthening rural and urban local bodies is therefore, indispensable. There is much scope for involvement of civil society in this regard. Horizontal and vertical coordination between various government departments and their line offices is indispensable to avoid wastage of resources and create synergy. Strong monitoring systems is required to track programme implementation and beneficiaries as well as for an effective and functional grievance redressal System. Information Technology support may be sought to develop relevant system in this regard.
23. The state – at centre or state level- cannot absolve itself on the ground of resource gap as far as its responsibilities towards population nutrition are concerned. The state of Bihar needs to steer out of its passivity on this particular issue and must examine the scope for innovations in terms of context specific interventions. The question that Bihar needs to introspect today is whether it can afford the drain on human resources and state economy caused due to malnutrition. The right to nutrition is an issue of human security and needs to be addressed at a war footing – rather than as a welfare agenda.

INAUGURAL SESSION

Welcome Address: Sunil Ray, Director, ANSISS

Inaugural address: Vandana Kini, Principal Secretary, Dept. of Social Welfare Government of Bihar

Address by Guest of Honour: N Vijayalaxmi, Managing Director, Women Development Corporation, Bihar

Opening remarks: Asadur Rahman, CFO, UNICEF Bihar

Keynote address: Jean Dreze

'De-stunting' Bihar? Some reflections: Neetu Choudhary, ANSISS

Vote of Thanks: Abhijit Ghosh, ANSISS

Rapporteur: Vidyarthi Vikas, Reeti, Avay K Parida

Welcome address

The programme started with the welcome address by Sunil Ray. Ray enlightened the participants about the series of development dialogue being carried out by the institute. He stated that the concerned Development Dialogue is an outcome of the study on “Malnutrition among Women and Children in Bihar” which has been carried out by the institute and is unique in some sense, as there is dearth of a systematic study on the issue as far as Bihar is concerned. Ray argued that this study has been an eye-opener and clearly indicates that the state of Bihar and its economy increasingly are pushed to a situation where it is bound to lose its resilience as nearly half of the children are stunted in spite of two digit growth rate on average, over past years. He raised the question as to why the state is caught up in such type of development paradox. Is this an



outcome determined in structural terms - both socially and economically? Is this a question of political economy? Ray emphasized that without removing the structural bottleneck it would not be possible to deal with the crisis. The scale and nature of intervention that is being made by the present government and non-government entities are far from adequate and efficient.

Ray stated that the development dialogue can provide a plausible way out of such a paradoxical development syndrome, which has cumulative impact on crippling the economy.

He concluded with the hope that the present dialogue will enrich our understanding and strategy formulation for coping up with malnutrition issue in Bihar.

Opening Remarks

Asadur Rahman initiated the opening remarks with the hope that the dialogue will lead us to find a pragmatic approach to improve nutrition scenario in the state. He explained that India has one third of world's stunted childhood - that is 46.8 million out of 159 million children in the country are stunted. Bihar's recent progress in achieving good nutrition and health



condition is significant for the achievement of WHA/SDG targets for the country. NFHS-4 data, which showed improvement in many health indicators, has a dismal show for nutrition achievements. It reflected deterioration in complementary feeding practice in the state. Rahman argued that

Bihar's 6.9 million stunted children contribute to 4.3% of global stunting burden (159 million) and prevalence of stunting among children in Bihar is the second highest in India (after Uttar Pradesh). The average annual rate of reduction in child stunting in Bihar has been less than one percent - a pace that is insufficient to achieve India's share of global commitments of reducing child stunting by 40% by 2025. He explained that the poor nutrition indicators are further compounded by dismal socio-economic conditions with wide gender disparities, low literacy level of women, highly prevalent child marriage, high fertility rates, and low environmental sanitation leading to a vicious cycle of disease and under nutrition.

Rahman advocated for interventions that cut across several departments since nutrition is a multi-sectoral outcome and requires a convergent approach of intervention. Nutrition programming needs to be done in a mission mode with greater focus on the life cycle approach starting with adolescence to children under the age of two years. Rahman also stated that Bihar perhaps has realized the fact and recently has constituted a Manav Vikas Mission which encompasses the aspects of nutrition and health among others.

Inaugural Address

The inaugural address was given by Vandana Kini wherein she stated that the monograph brought out by ANSISS is indeed the need of the state and will help us to understand the malnutrition scenario more realistically. She said that malnutrition in Bihar is a serious problem and such type of discussion and deliberations are very much required. Kini explained that according to NFHS-4 survey there is some improvement sign on the front of malnutrition but there is a need to have a very comprehensive strategy to combat the problem in Bihar. Kini put forward Government's approach in this regard and stated that the attempt to combat malnutrition in Bihar is channelized through various schemes like ICDS, PDS, NFS, MDMS, SHGs, Mahila Samakhya and so on.

Still the situation is not improving due to bad cultural, behavioural, and social practices and lack of knowledge and awareness regarding better nutritional practices and condition. She argued that there is need to educate the mothers and the household on what is to be given to the child in successive months and years. The state like Bihar has sufficient variety of food and there is no dearth of food. The state is facing 'expert deficiency' on nutrition point. She also mentioned that the government is seeking a good advice, strategy from experts to combat malnutrition in the State.



Address by Guest of Honour

N Vijayalaxmi oriented her address around a government initiative in Bihar called 'Gramvarta' - a village level dialogue - for improved health, nutrition, and sanitation. She explained that it is an *initiative of the community, by the community, for the community*. 'Gramvarta' is a participatory learning and action oriented approach to mobilize women through Self Help Groups to improve family health, nutrition and water, sanitation and hygiene (WASH) in Bihar. In literal terms it is a village dialogue, which may act as an agent of change as far as the malnutrition scenario in Bihar is concerned. Vijayalaxmi explained that *Gramvarta* is an approach complementary to the effort of ICDS program through

expected increase in demand and utilization of services. Thus, as she shared, the dialogue will sensitize women and the wider community including field level workers towards nutrition, health, water and sanitation and gender issues. Sensitization of the *Gramvarta* members is done through the medium of interactive games and storytelling - held around festivals and agricultural seasons as well as other personal and domestic commitments. Vijayalaxmi shared that currently *Gramvarta* consists of 4445 Facilitators, 809 Supervisors, 132 Master Trainers, 67 Block coordinators, and 67 MIS coordinators and the end line survey shows improved condition than baseline survey on certain indicators such as consumption practices of iron folic acid tablets by pregnant women.

The pilot project was started in 2011 in two panchayat of Maner Block of Patna district. It is scaled up in another 85 blocks of 19 districts with the help of Jeevika. However, Vijayalaxmi acknowledged that there are certain challenges in implementation of the programme such as generating interest from villagers, lack of commitment, lack of involvement from male members, problems in coordination etc. As she shared, although the initiative has increased the demand for services, there is a lack of supply (both under Health/ICDS system) in some places leading to conflict between facilitators, group members and service providers.



'De- stunting' Bihar? Some reflections

Neetu Choudhary shared key reflections from the research study on malnutrition among children and women in Bihar. She initiated her presentation with strong emphasis on economic cost of more than 200 crores per annum that Bihar is incurring on account of child malnutrition. Choudhary explained that malnutrition, particularly stunting among children is

a group phenomenon as it is concentrated in socially backward communities particularly the Scheduled Castes (SC) and the rate of decline within these groups is also much lower relatively. In the light of such an inequality she questioned the ideological credentials of the state which has been dominated by spirit of socialism in Bihar. Choudhary analyzed how calorie consumption and wasting in Bihar are comparable to average national level which indicates that lack of food is not as big an issue for Bihar as malnutrition – speaking relatively.

Her presentation also shared the cases of two districts of Bihar - Gopalganj and Siwan, where stunting is relatively low as compared to rest of the state. She attributed this to some extent to the fact that these districts also have a unique and consistent positioning in terms of performances on identified structural determinants of child stunting including female work participation rate, sex ratio, proportion of SC population etc. With reference to the UNICEF's framework on dynamics of malnutrition, Choudhary argued that Bihar suffers from structural barriers and poor malnutrition outcomes are directly related to the growth structure adopted by the state government as well as the social structure that the state traditionally has. Unfortunately, the state suffers from weak agency interface as well. She concluded by affirming the point that there is considerable scope for building of public opinion and creating pressure from the bottom on the issue.



Keynote address

At the outset of his keynote address, Jean Dreze appreciated the study in context of the humanitarian emergency that malnutrition represents in Bihar. Dreze argued that half of the children are stunted in Bihar and no country has such crisis ridden status of nutrition not even



in Sub-Saharan Africa. He defined the situation as ‘war on children’. He discussed some critical indicators from NFHS-4 data and explained that although stunting and wasting are more or less at par with Jharkhand, access to sanitation is only 25% in Bihar, 40% of girls are

married at an age before 18 years, fertility rate is 3.4 and so on. Dreze particularly pointed out that Bihar is the only state where female literacy rate is just above 50%. Literacy levels are low even among young groups (15-24 years) of males and females.

However, Dreze also shared some positive news for Bihar. For example - compared to 2001 proportion of literate among mothers has overwhelmingly improved, which will benefit them through better access to education, bank facility etc and they know better as to how to take care of their children. He also appreciated the initiatives taken by the government in last 10 years which enhanced literacy levels in Bihar. Proportion of child immunization has improved considerably to match with the national average and Bihar has also jumped significantly on the front of institutional delivery and Anti Natal Care. What remains concerning Dreze argued is that the percentage of children deprived of any immunization is 12% in Bihar, which is much higher than the national average.

Dreze referred to the ‘South Asia Enigma’ (co-existence of better growth-poor nutrition) and argued that there is also an ‘Indian Enigma’ within which there is a Bihar enigma as well. He took the example of Bangladesh which despite being poorer than India has a health and sanitization condition much better than India. Dreze also highlighted the issue of inequality and pointed out how the compounding of caste, class and gender inequality further accentuates disparity and affects the empowerment of the marginal community. Dreze

particularly underscored the significance of the inequality factor and shared that the access of ICDS facility by the Dalit has improved gradually due to government and NGO intervention.

Jean Dreze put forward some action points such as - look south not west, and 'west' does not mean Europe but refers to Delhi or Central government which is actually less sensitive to malnutrition issues; look south means focus towards Bihar and Jharkhand. Dreze also offered critical reflection on some of government's initiatives that have implications for health and nutrition. He explained that the recent notification making Aadhaar compulsory for accessing mid-day meals in government schools, has attracted the criticism it deserves. This notification serves no clear purpose other than to force children to get enrolled under Aadhaar and this is just the latest in a series of attacks on child-related rights during last three years.

Another example that Dreze cited is the failure of Central government to give maternity entitlements as provided under the National Food Security Act (NFSA), 2013 for more than three years, although the Economic Survey 2015-16, has a chapter on "Mother and child", which notes that maternity benefits offer very high returns on investment. Ironically, as Dreze pointed out, the Union Budget that followed for 2016-17, did not make any provision for maternity entitlements beyond the pilot scheme (for 53 districts only) initiated by the previous government, despite that the Central government had assured the Supreme Court in writing (on October 30, 2015) that this scheme — Indira Gandhi Matritva Sahyog Yojana — would be extended to all districts in 2016-17. The allocation of Rs. 2,700 crore in Union Budget (2017-18) is barely enough to cover a fourth of all births in India, even with the proposed 60:40 ratio for Centre: State funding. Dreze argued that the Central government is also giving a short shrift to the Integrated Child Development Services (ICDS) - a critical programme that was making good progress until it was hit by Budget cuts in 2015-16, which was criticized by even the Minister for Women and Child Development, Government of India.

Similarly, the midday meal scheme received shock treatment in the 2015-16 with an initial budget cut of 36%. The allocation for midday meals in current budget is still 25% lower in monetary terms than the corresponding allocation four years ago (in real terms, the decline would be even larger). The point that Dreze intended to highlight is the efforts of the government of India to backtrack on provisions made under NFSA as well as on other entitlements offered through various schemes, ultimately affecting child rights. Somehow, their well-being is not seen as an important part of the "*Sabka Saath, Sabka Vikas*" slogan.

The silver lining is that there is still some action for children at the State level. For instance, Tamil Nadu, Odisha and Telangana have introduced maternity entitlement schemes with their own resources. However, Dreze articulated the threat that the indifference towards children at the Centre may percolate to State governments sooner or later. That would be a tragic loss, not just for the children but also for the entire nation.

On a concluding note - Dreze said that the development dialogue is a very meaningful initiative to address the issue of malnutrition as a humanitarian emergency.

Thus, the inaugural session at the very beginning gave momentum to the dialogue. The unacceptability of high malnutrition in Bihar surfaced up as a unanimous opinion. An interesting gap that emerged from this session and which further established the importance of the ANSISS-UNICEF study as well as the dialogue is the lack of nutrition oriented research and specialized knowledge in Bihar. The subsequent sessions of the dialogue attempted to fill this gap, to a considerable extent.

TECHNICAL SESSION I: Malnutrition in Bihar: Dimensions and Processes

Chair: Usha Singh, Professor, Dr. Rajendra Prasad Central Agricultural University, Pusa

Speakers

Udaya S Mishra, *Persistence of Undernourishment in Bihar: A Diagnosis*

Basudeb Guha-Khasnobis, *Relation between women's empowerment and child health: do we measure what we want to measure?*

Neha Raykar, *Insights from the India Health Report: Nutrition 2015 for Bihar*

Rapporteur: Bipul Kumar, Ritesh Ravi, Jaya Kumari

Persistence of Undernourishment in Bihar: A Diagnosis

Udaya Mishra's paper was based on the National Family and Health Welfare data and explained that the characterization of adverse outcomes is based on knowing the determinants. According to Mishra, undernourishment is an outcome of bad health and Bihar has the highest percentage of undernourished children as compared to most of the countries across the globe despite government interventions. Undernourishment he explained is caused by a number of factors such as lack of optimum intake of calorie food, lack of quality health service, non-availability of cheaper medicines and last but not the least poor institutional delivery system in place.

Behavioural component of nutrition such as safe water consumption differs widely across India as criteria of safe water is culture specific. Therefore, Mishra advocated the need for standardization of water as India's nutritional scenario is not good overall. He also argued that as per district level analysis there has been instances of co-existence of the following: higher the practice of using health care practices lower is the share of undernourished children, higher is the food supplement lower is the undernourishment among children and greater share of undernourished mothers coexist with a greater degree of child under nourishment and finally anemia among children usually coexists with undernourishment among children. The pattern of associations indicate that there remains scope to improve situation by increasing food supplements since the usage of food supplements is still low across all the 38 districts of Bihar.

Relation between women's empowerment and child health: do we measure what we want to measure?

Basudeb Guha-Khasnobis stated that malnutrition is prevalent among one- third of pre-school aged children in less developed countries and South Asia has the highest rate of child malnutrition. The so called South Asian Enigma has been attributed to the low status of women in these societies including India wherein states like Bihar although are among the fastest growing, accord lower status to women in societal practices. Guha-Khasnobis referred to the empirical findings from different countries and underscored the issue of bargaining status of women within the household. Interestingly, he pointed out that households where women have more bargaining power with their male counterparts have shown instances of domestic violence. Employing the regression framework Khasnobis explained the role of women towards child nutrition outcomes. He pointed out that factor such as access to micro-credit to mother, access to natal care is important in terms of nourishment of the children. In fact, he argued that the measures of women empowerment can be gauged with the help of the level of nourishment and occurrences of diseases.

Insights from the India Health Report: Nutrition 2015 for Bihar

Neha Raykar outlined reflections from the India Health Report: Nutrition released in 2015 and talked about its comprehensiveness in terms of understanding nutrition scenario in India. She argued that the report is a compilation of multiple sources of data viz. state level data and national level data like Demographic and Health Survey, Census of India (2011) and the Rapid Survey of Children data (2013). The report also showed disparities across geographical

hamlets, social classes and demographic groups. As per the 2025 Sustainable Development Goals set, malnutrition is one of the targets that need to be addressed. Discussing about the issue of malnutrition in the state of Bihar, Raykar argued that the data shows improvement in child undernutrition but away from WHO target. She illustrated that Bihar is doing well in terms of breastfeeding of the children.

The presentations invited comments from the participants, which centred on the need to utilize local practices to solve the problem of under-nourishment, role of hazards emanating due to climate change in pursuance of 2025 Sustainable Development goals, data reliability, food basket for the poor and the need for a solution. Overall, this session offered relevant reflection on the nature of malnutrition problem as well as its structure and determinants.

TECHNICAL SESSION II: Interventions and outcomes: Critical Reflections

Chair: Arjan De Wagt, Section Chief, UNICEF

Speakers

Neerja Chowdhury, *Malnutrition and Its Advocacy*

Reetika Khara, *Critical reflections on food and nutrition security in Bihar*

Nilachala Acharya/Saumya Shrivastava, *Budget outlay for nutrition specific interventions*

Rabi N Parhi, *Nourishing Bihar's Children: Need for Multi-sectoral Approach*

Rapporteur: Kaushal Kishor, Smriti S Singh, Varsha Maheshwari

Malnutrition and Its Advocacy

Neerja Chowdhury began her presentation with an expression of concern over the fact that India will not remain a viable entity with her grave problem of malnutrition and advocated a mission mode approach to address the problem. She argued that if the Prime ministers and Chief Ministers are not keen to attend the issue, we should move as a community to ensure that things work on ground. She proposed to prepare a yearly report on Malnutrition in Bihar with different aspects and put forth the question as to why malnutrition does not figure in the seven point agenda of the Chief



Minister of Bihar. Chowdhury stated that we all know the seriousness of malnutrition and its consequences and therefore it is more important to create new energies to fight against it through conversing not only with each other but also through an outreach to the worst affected. In the process, she also highlighted the importance of advocacy in spreading the messages more effectively.

Critical reflections on food and nutrition security in Bihar

Reetika Khera offered critical reflections on food and nutrients security in Bihar. She appreciated the fact that the Public Distribution System (PDS) is definitely working better in Bihar and the reason behind this better functioning of PDS is political interest although this is in danger as one comes across the debate on efficacy of cash transfers instead of food articles. From the point of view of child nutrition, Khera highlighted the urgent need to improve the quality of food provided in schools and anganwadis. Khera explained the initiatives of different state governments such as Odhisa and Tamil Nadu which provide for maternity benefits and provide higher cash transfer in comparison to Bihar from their own budgets. She used the metaphor ‘techno-mania’ to explain the uselessness of biometric system based on Aadhar in PDS and other social security schemes and apprehended that this actually may head towards very limited cash transfers or benefits. She explained that the system was introduced to counter leakages from PDS but different studies substantiate its failure in correcting the situation and there are in fact added problems created through this technoutopia.

Budget outlay for nutrition specific interventions

Nilachala Acharya and Saumya Shrivastava spoke on Direct Nutrition Intervention (DNI) budget in Bihar- last three years’ trends of outlay and its adequacy for DNI. They showed that the data highlights the decreasing trend of DNI budget in total State budget. This implies less prioritization of these schemes by the state government, which is problematic. Further as Acharya and Shrivastava illustrated, the bulk of the budget is for supplementary nutrition while only a minuscule portion is allocated to micronutrients, IEC, SAM. At the same time, as they pointed out, important interventions like de-worming, calcium for pregnant women, insecticide treated bed-nets received no allocations in 2016-17, which is a matter of concern. Acharya and Shrivastava shared their assessment revealing that if seen against actual utilisation, the resource gap increases further. Lack of disaggregated data, as they pointed out has been a constraining factor in tracking budgets for DNI. However, existing data

substantiates that the budget outlays are less, not only in terms of prioritisation within overall state budget but also in terms of adequacy.

Nourishing Bihar's Children: Need for Multi-sectoral Approach

Rabi N Parhi to begin with, defined the present situation of malnutrition in India as well in Bihar as a ‘Silent Emergency’, which can be addressed only if a convergent plan of action with each sector’s contribution is mapped and monitored on a regular interval at the highest level. He invoked the sense of emergency by bringing forth the ramifications of malnutrition. For example – he argued that the reduction in mortality rates in children particularly in neo-natal as well as infancy can only be accelerated by addressing the under-nutrition situation in Bihar. Further, as he discussed, the realization of goals such as high wage earning potential, school attainment, empowerment of girls and women have shown to have positive correlation



with better nutrition and wellbeing. Parhi explained that the state has shown a mixed resolve to address the issue of malnutrition. He reflected on key institutional interventions that have implications for nutrition scenario in Bihar such as the creation of Manav Vikas Mission, campaign of ‘Bal

Kuposhan Mukht Bihar’ and so on. However, as Parhi aptly explained the interventions need to be strengthened further wherein a multi-sectoral approach is indispensable. Parhi advocated for an equity approach to programme implementation and also expressed that Bihar and UP hold the key to combat malnutrition problem because of their high prevalence rates and sheer number of children under the age of five years.

As seen from the above, technical session two offered very interesting perspective on policy approach towards malnutrition in Bihar, as well as on the role of advocacy by media and civil society organizations. The role of dialogue among various stakeholders was emphasized, which is usually a point less attended to. The reflection on policy process was quite enriching in the sense that it looked both at state’s approach towards malnutrition as well as the

structure of public expenditure i.e. resources that are channelized in this regard. The session also highlighted some of the achievements of Bihar, even though they are far from satisfactory.

VALEDICTORY SESSION

Chair: Vyas Ji, Vice Chairperson, BSDMA

Speaker: Binayak Sen, Hunger and Genocide

Arjan De Wagt, Closing remarks

Sunil Ray, Closing remarks

Vote of Thanks: Neetu Choudhary

Rapporteur: Sandhya R Mahapatro, Rajendra K Mallick, Rani Kumari

Hunger and Genocide

Binayak Sen in the valedictory address defined hunger and malnutrition as no less than genocide and he focused on state's role in perpetuating people's deprivation and suffering. He articulated his point by explaining that an important element in the survival of tribal communities despite their poverty- is the access these communities have enjoyed to common property resources.

He illustrated how this access is being severely curtailed today in many instances through infiltration by both - finance capital and militarized state power, culminating into genocide like situation. Sen also highlighted how the quality and content of the subsidized diets are giving rise to epidemics of non communicable diseases.

He drew upon the findings of a study carried out by the National Nutrition Monitoring Bureau on the workers in tea gardens of West Bengal and explained that more than 50% of workers in the tea gardens were chronically poor having lower than minimum required calorie intake. Therefore, he argued that there is also a need to improve the calorie intake of people to combat malnutrition. Sen emphasised that there is a linkage between the non-communicable diseases and malnutrition, which must be understood and considered in various interventions. So far, there has also been a total failure to recognize the inter-linkages of nutrition and disease. Apart from drugs, nutritional supplements should also be provided to the patients to combat malnutrition.

In his closing remarks, Arjan De Wagt pointed out that although the magnitude of malnutrition in the state of Bihar has declined, the progress is far from satisfactory. Wagt

added emphasis on certain measures in the process to identify and treat health conditions of children, such as - 1.need to increase awareness on dietary improvement and breast feeding practices, 2. role of ICDS programmes, 3.focus on WASH, 4. poverty reduction, 5. institutional set up for nutritional education, and 6. role of stakeholders. While concluding Wagt added that to promote nutrition we should use right language to right people.

Sunil ray, advocated the ecology centric approach towards malnutrition. Further he pointed out that there is a need to investigate seriously why the status of nutrition has not showed any significant improvement in Bihar despite higher growth, allocation of budget and decline in leakages. Overall, he observed that malnutrition can't be studied in isolation rather it should be considered as a political agenda. A road map dedicated to nutritional well being needs to be prepared by the government.

The valedictory session of the development dialogue was chaired by Vyas ji, who introduced the session by sharing experiential observations on the issue of malnutrition in Bihar. Vyas Ji in fact went a step ahead while concluding the session and proposed that the access to various government departments that he has as a former bureaucrat, may be utilized by ANSISS and UNICEF to advocate the cause with Bihar government and enter into regular dialogue.



The discourse concluded with an expression of vote of thanks to all participants particularly speakers and session chairs, who came from different parts of the country and made it a vibrant and meaningful exercise.

ANNEXURE I

Programme schedule

April 25, 2017

09:30-10:00hrs	Registration
10:15-11:45hrs	Inaugural Session
Welcome Address	Sunil Ray, Director, ANSISS
Opening remarks	Asadur Rahaman, CFO, UNICEF Bihar
Inaugural address	Vandana Kinni, Principal Secretary, Social Welfare Dept., GoB
Address by Guest of Honour	N Vijaylaxmi, Managing Director, Women Development Corporation, GoB
Release of ANSISS Monograph 'De- stunting' Bihar? Some reflections	Vandana Kinni Neetu Choudhary, ANSISS
Keynote address	Jean Dreze, Visiting Professor, Ranchi University
Vote of Thanks	Abhijit Ghosh, ANSISS
11:45-12:00 hrs: Tea/Coffee Break	
12:00 -13:30 hrs: Technical Session I: Malnutrition in Bihar: Dimensions and Processes	
Chair: Usha Singh, Professor, Dr. Rajendra Prasad Central Agricultural University, Pusa	
Speakers	
Udaya S Mishra, <i>Persistence of Undernourishment in Bihar: A Diagnosis</i>	
Basudeb Guha-Khasnobis, <i>Relation between women's empowerment and child health: do we measure what we want to measure?</i>	
Neha Raykar, <i>Insights from the India Health Report: Nutrition 2015 for Bihar</i>	
13:30-14:30 hrs: Lunch	
14:30-16:00hrs: Technical Session –II: Interventions and outcomes: Critical Reflections	
Chair: Arjan De Wagt, Section Chief, UNICEF	
Speakers	
Neerja Chowdhury, <i>Malnutrition and Its Advocacy</i>	
Reetika Khera, <i>Critical reflections on food and nutrition security in Bihar</i>	
Nilachala Acharya/Saumya Shrivastava, <i>Budget outlay for nutrition specific interventions</i>	
Rabi N Parhi, <i>Nourishing Bihar's Children: Need for Multi-sectoral Approach</i>	
16:00-16:15 hrs: Tea/Coffee Break	

16:15-17:30 hrs: **Valedictory Session**

Chair: Vyas Ji, Vice Chairman, BSDMA

Speaker: Binayak Sen, Public Health Specialist and Social Activist

Closing remarks: Arjan De Wagt, Section Chief, UNICEF

Sunil Ray, Director, ANSISS

Vote of Thanks: Neetu Choudhary



ANNEXURE II

Speakers

April 25, 2017

Jean Drèze

Visiting Professor at the Department of Economics, Ranchi University

Binayak Sen

Public Health Specialist and Social Activist

West Bengal

Arjan De Wagt

Section Chief – Nutrition

UNICEF New Delhi

Vyas ji

Vice Chairperson

Bihar State Disaster Management Authority

Vandana Kini

Principal Secretary

Department of Social Welfare

Government of Bihar

N Vijayalaxmi

Managing Director

Women Development Corporation

Government of Bihar

Sunil Ray

Director

A N Sinha Institute of Social Studies, Patna

Asadur Rahman

Chief of Field Operations

UNICEF Bihar

Udaya Mishra

Professor, Centre for Development Studies

Thiruvananthapuram

Neerja Chowdhury
Senior Journalist and Activist

Basudeb Guha-Khasnobis
Senior Economics Advisor, UNDP Nepal

Reetika Khera
Associate Professor, IIT Delhi

Rabi N Parhi
Nutritional Specialist
UNICEF Bihar

Neetu Choudhary
Assistant Professor of Economics
A N Sinha Institute of Social Studies, Patna

Neha Raykar
Lead Economist, Public Health Foundation of India
New Delhi

Saumya Shrivastava
Centre for Budget and Governance Accountability
New Delhi

Nilachala Acharya
Centre for Budget and Governance Accountability
New Delhi