Pakistan, Malnutrition

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How Pakistan’s Efforts to Combat Malnutrition Fail Young Women and Children

There is no greater irony than starvation in a nation that has an abundance of food. However, this is the situation in Pakistan. For a country with a large area of cultivable land (Subohi, 2019), the increase in malnutrition amongst its population seems confusing. External factors have prevented its agriculture sector from growing to its full potential. The main perpetrators are inequality and lack of education, which both contribute to the inability to access Pakistan’s resources. This inequality un-proportionally affects Pakistan’s most vulnerable citizens: women and children living in poverty. An effect of Pakistan’s failure to effectively combat this issue is increased wasting and stunting, and consequentially malnutrition, among children (unicef.org, 2017). The main fault lies in the organization of Pakistan’s agricultural sector, along with its national nutritional policies and lack of awareness among its population. Malnutrition is an increasing concern since a sizable proportion of malnourished reproductive-aged women are giving birth to babies who are also malnourished due to their inability to access adequate resources (unicef.org, 2017). If this issue is addressed, there will be numerous benefits to Pakistan that include, but are not limited to, the direct achievement of the first and second sustainable development goals, which aim to end hunger and poverty, and unprecedented improvements to the country’s economy.

Malnutrition is widespread in the nation, with nearly 61% of the country’s districts classified as food insecure meaning “respondents from these districts do not feel that they have adequate resources to meet their food needs” (unicef.org, 2017, p.50). The common theme present in these households is poverty; children of rural and urban families living in poverty have the highest risk of suffering from malnutrition (Bhutta, 2016). In certain provinces, periodic food insecurity is an issue 40-50 percent of families face, specifically families in “Balochistan, Sindh, South Punjab, and parts of Khyber Pakhtunkhwa and Fata” (Bhutta, 2016, para. 4). While disparities do exist based on location, the family structure that exists in impoverished families is very consistent. Pakistan is considered a prominently agrarian society (Ziring & Burki, n.d). Extended families often live together in a single compound (Ziring & Burki, n.d); this is especially true for low-income families since they do not have the means to go elsewhere. This contributes to the lack of knowledge many families have regarding nutrition, especially for females and infants. Whatever someone’s grandmother knows about reproductive and female health, is what they know. Many assumptions about women’s health are false and can cause negative repercussions to a woman and her children. This problem is difficult to combat since men leave home more often than women. This is significant because it indicates that young women are not often exposed to outside information about how to take care of their children and their well-being, subjects that can be considered “taboo” in many households. Many women are unable to leave their homes due to their responsibilities, and even if they do, most do not actively search for new information, since they do not realize the damaging effects of their misinformed assumptions.

A mother’s “nutritional status” has a direct effect on their child’s risk of malnutrition (unicef.org, 2017). Malnutrition during pregnancy can lead to fetal growth restriction, “small size of the baby during pregnancy” (Bhutta, 2016, para. 2). The failure to provide adequate nutrients during the fetal period can increase the risk of life-long physical and mental impediments if it does not lead to death first (Bhutta, 2016). Pakistan has one of the highest-infant mortality rates in the world as a result of rampant malnutrition (Afp, 2019). Unawareness of proper feeding techniques and inadequate infantile care, especially in rural areas, contribute to food insecurity among children and feed a repeating cycle of poor
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and malnourished citizens (unicef.org, 2017). The importance of breastfeeding and infantile care is something many households in Pakistan fail to grasp fully. Adequately nourished mothers are the key to ensure the well-being of infants in Pakistan. Breastmilk and breastfeeding habits amongst Pakistan’s most at-risk populations are frighteningly low. In 2014, only 28.9% of infants under six months in Sindh were exclusively breastfed (unicef.org, 2017). Rates of exclusive breastfeeding throughout the country have been exponentially dropping as well. In 2008 49% of infants under six months were exclusively breastfed in Punjab (unicef.org, 2017); in 2014, the percentage dropped to 17% (unicef.org, 2017). In a country where 14% of reproductive-aged women are wasted, 37% of pregnant women suffer from iron deficiency as a result of malnutrition, and rates of malnourishment seem to be increasing, there must be various approaches from different angles to make a significant change.

For effective policies and changes to be enacted, the factors that have been preventing progress must be considered. Societal beliefs and lack of cohesive strategies have acted as barriers halting progress and causing more damage to occur (Subohi, 2019). It is important to note that there is no shortage of food in Pakistan. For example, the US Department of Agriculture exported 500,00 tonnes of wheat and 7.4 million tonnes of rice from May 2018 to April 2019 (Afp, 2019). In fact, in 2019, a Pakistani newspaper reported a “potato glut” (Afp, 2019, para. 7). Dr. Kaiser Bengali, a former economist, even stated that “Pakistan is quite well off in wheat production” (Afp, 2019, para. 11). All the major causes of this issue are socio-economic (Afp, 2019). Dr. Ambreen Fatima, a senior research economist, said: “There are four key pillars of food security in Pakistan: The first is availability, then accessibility, utilization, and stability” (Afp, 2019, para. 8). The amount of food in the country is not concerning, but the amount of people gaining access to it is, “just because food is available, does not mean people can access it” (Afp, 2019, para. 8). This calls into question the government’s efforts to build adequate means for rural communities to get food and urban low-income families to afford it. In multiple surveys done of malnourished communities in Pakistan, it was found that, along with a lack of food, they were experiencing “a shortage of basic needs, including health, clean water, and electricity” (Afp, 2019, para. 16). Almost 40% of Pakistanis live in some form of multi-dimensional poverty, meaning that affordability is a significant obstacle in reaching food security (Afp, 2019). This also indicates that the people living below the national poverty line has trouble placing food on their table, another motivator to make an immense change. Investments to place infrastructure in more remote areas of Pakistan could assist families in getting food; however, access does not equate to affordability, and additional measures must be placed to ensure that families acquire and consume enough nutrients.

One way to accomplish this is food-fortification programs, in which additional nutrients are added to staple foods. These programs are one way to maximize the number of nutrients people consume. Past implementations of these programs have been incredibly effective, especially for populations that consume limited quantities of food. In 2016, with funding from the UK, Pakistan enacted a food-fortifying program that acted as a national intervention (Grant, 2016). Nutrients were added to “wheat flour, edible oils, and ghee at source in mills and factories” (Grant, 2016, para. 2). There is an underlying genius in how the country executed this program. Firstly, they chose foods that all households, rich and poor, consume. In addition to this, nutrients were added to the ingredients directly in the production plants, before they were distributed throughout the country, maximizing the number of people who consume the additional nutrients. Programs such as this are incredibly beneficial for women and children. Health policy advisor, Lucy Palmer, said that “Stunting is inter-generational. If you are poor and your mother is stunted, it could take a few generations to iron out, which perpetuates inequalities” (Grant, 2016, para. 5). If infrastructure improves throughout the country, more groups of people will be able to access food and overcome the barrier of affordability. Programs such as this will be more critical to
ensure that families that can still only afford limited quantities of food, will receive adequate amounts of nutrients.

For drastic change to be made, however, pre-existing problematic practices must be abandoned on a large scale. If this were to occur in Pakistan, Pakistan would accomplish the fifth and tenth sustainable development goals, which aim to end gender inequality. Long-held social beliefs are significant progress preventers throughout the nation, arguably the most critical factor to address. Among the uneducated rural and urban poor, open discussion about women’s health during pregnancy, and in general, can be topics that most people see as private matters (Grant, 2016). With a lack of awareness and outside sources, false beliefs have irreversibly damaged young women’s health, which, in turn, has damaged their children’s health. With no outside information, taboos are passed down throughout generations. Women may be “told they can’t eat many eggs or meat in pregnancy, which are foods that are rich in protein and iron that they need. Women may eat less nutritious food than other family members, and they often can’t access healthcare” (Grant, 2016, para. 6). If a woman and her child’s health is compromised during pregnancy, then it is likely that the child’s health will be adversely affected in its first two years of life, the most critical stage to determine lifetime development. With the importance of breast milk overlooked, mothers in isolated areas especially turn to dangerous alternatives to feed their babies (Bhutta, 2016). There is no support or assistance, so many mothers who cannot produce adequate amounts of breastmilk because they are malnourished use alternative fluids such as tea, which can be lethal for children under six months (Bhutta, 2016).

To create more awareness, the government and charitable organizations must bring healthcare and nutritional services that are specially tailored to meet the needs of women and children living in poverty. Various initiatives must be implemented to empower young women. This can be done by monthly stipends that could be used for practical and educational purposes. If poor women have greater independence it could assist in their efforts in overcoming poverty. A certain degree of financial freedom could be gained if poor women were given their livestock such as hens, goats etc. This could address personal income issues as well as food insecurity. Teachers, religious leaders, and other respected community members can also act as catalysts in encouraging a healthier lifestyle among the urban and rural poor (Bhutta, 2016). Women’s health is not often discussed because hardly anyone in small, impoverished communities knows anything about it. Today’s generation is using the same eating and feeding habits used by past generations. There must be more effort to break the cycle before this issue hinders another generation of Pakistanis. Even if food is present in poor communities, there must be an understanding as to why women and children should receive a surplus of it. If rural populations understand why the health of women and children are crucial in ensuring a productive community, then they can be agents of change.

The process in which this issue can be solved is not a linear path. Current prime minister Imran Khan stated, “Many steps have to be taken [to eradicate poverty]” (Masood, 2019, para. 21). The social and physical barriers that prevent food from getting where it needs to be have to be addressed. However, already and in the past, initiatives have been started to make change begin to occur. The introduction of government health experts in impoverished communities is an excellent way to begin a national intervention. However, there must be assistance from influential community members, especially in rural areas that hardly receive any outside influence. If health experts can rely on permanent community members to spread factual health information, especially for women and children, then a seed has been planted for long-term change. It will not be enough only to send government employees for a short amount of time, to have them leave without any real change occurring. Ordinary citizens can also play a
role in creating change. Multiple charities and initiatives to assist poor communities have already been set up across the nation. Citizens can easily donate to those causes and contribute their skills and knowledge to help those communities adopt new habits. Simultaneously, as more residents, hopefully, become more understanding of their errors, they will begin to adopt new food distribution techniques at their dinner table, prioritizing women and children more.

The hardest part about these types of plans is reaching every community in Pakistan that needs help. For many isolated communities, government interference is the last thing they want and may make them even more opposed to change. This is once again, where community leaders and citizens come in to help. The key to this process is a slow revelation. The government must enlist the help of citizens and officials whose words will make an impact in communities. There is no exact way to do this, but no matter what, it will take time and effort, and every community will require different people. While programs that accomplish this are being implemented, food fortification programs, such as the ones already implemented, become even more necessary so that people who need nutrients receive them in some manner. Improved infrastructure to get food to rural areas will take over a decade, given the number of rural communities dispersed throughout the nation. It will also be crucial to begin to address the condition of housing in all impoverished communities as this intervention unfolds. Real results will not be seen for many years, since malnutrition is multi-generational. However, this is an issue that can be solved; it is only a matter of selecting the right mix of solutions.

Malnourished children are an economic disadvantage to Pakistan as they will not be able to participate in the country’s economy (Grant, 2016). The nutrients a child receives in its first 1,000 days of life determine whether it will grow up to have a fully functioning brain and immune system (Grant, 2016). With rates of malnourishment among youth increasing, Pakistan needs to turn the situation around. Currently, not enough initiatives are being implemented, and not enough strategies have been formed on a national level. The problem is not only limited to lack of food, but also unhygienic living conditions, inadequate healthcare, and lack of sanitation in communities that are experiencing the most adverse effects of malnourishment (Bhutta, 2016). The government must realize that a population of healthy children has limitless benefits for the nation in multiple sectors. National development can exponentially improve if this issue is properly addressed, and Pakistan’s sustainable development goals can be met if real change is enacted (Bhutta, 2016). Another generation should not be born only to be limited by the misinformed practices of their predecessors and lack of efforts by their government. If changes happen on a mass scale, Pakistan can become a global model in combatting nutritional issues among women and children. The amount of work that will have to take place beforehand is immense; however, other countries can look to how Pakistan analyzed its situation and found multi-step solutions to address their massive issue. Finding ways to effectively send changemakers into communities, while simultaneously building infrastructure, and implementing food fortification programs, are multiple ways that Pakistan can start solving the rampant malnutrition present throughout the country.
Works Cited


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