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"Children and Recession"

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Seeds, a non-profit corporation, is committed to encouraging and enabling Christians to respond to the poor, not just with charity but with biblical justice. Seeds seeks a mature understanding of the spiritual, political and economic realities that lie at the root of hunger.

Further, Seeds seeks action to the limits of the Church's resources and faith which reflects God's hope for the hungry of the earth.

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Children and Recession

By James P. Grant

Despite all past failures and present frustrations, child death rates have been halved in almost every region of the developing world. Our generation is seeing for the first time in history a fall not only in the rate but also in the absolute numbers of child deaths. In 1950 more than 25 million children under five years old died. By 1980, that figure had been cut to just under 16 million. Today, it has almost certainly been brought

down toward, and possibly below, the 14 million mark. This has been achieved despite a 25 percent increase since 1950 in the absolute number of births per year.

This progress has been one of the greatest achievements of this century. Yet an estimated 38,000 young children still die every day from the combination of common infections and poor nutritional health.

The next phase of this story is another health revolution which could

re-accelerate progress, continue the decline in the population growth rate and again halve the rate of death and malnutrition among the world's young children.

Primary health care is inching along the road from rhetoric to reality. Recent results suggest that the child survival and development breakthrough of the late twentieth century has already begun. The driving force behind this next advance in child well-being will not be medical or scientific. It will be political and social. For it depends upon a political commitment at all levels of national life to mobilize all possible organized resources behind informing and supporting parents in applying today's knowledge.

But now, both past achievement and present potential are threatened by another great force that affects millions in the developing world in the 1980s.

Adjustment to Recession

The threat comes from the lingering recession that still rests its crushing weight on much of the developing world and appears unlikely to lift in the immediate future as the United States, Japan and other industrial powers struggle with the necessary restructuring of their own economies.

Raw material prices are at their lowest levels in 30 years, debt servicing claims about 25 percent of the third world's revenues, bank lending has dropped 60 percent, overseas aid has stagnated, and both rich and poor countries have failed to solve international economic problems. These forces have caused the rate of per capita economic growth to be negative or negligible for two-thirds of the developing nations in the 1980s.

More than 700 million people, or



Photo: UNICEF/Sean Sprague

Mothers in Indonesia realize the significance of having their children monitored regularly at a health post.

states. States with high WIC food costs are penalized by USDA's Food and Nutrition Service regardless of ruralness or other specific conditions that may raise food costs.

Recently in a summer feeding program a full-time outreach coordinator has helped increase needed participation in many rural areas and in Indian communities. Indian participation has increased by over 200 percent. Thirteen rural communities joined the program in 1987 and doubled the participation. But the program is now seriously threatened by insufficient funds and resources. Without additional funding the outreach program will be dropped in 1988, and the recent progress made in serving the rural poor will be halted.

The Food Distribution Program on Indian Reservations (FDPIR) delivers USDA-donated commodity foods to low-income American Indians. Family-sized packages may include up to 35 items; some do not receive perishables because they have no refrigeration.

The only emergency food provider, the Roadrunner Food Bank in Albuquerque, is severely hindered by lack of resources and transportation. This hits rural New Mexico hard. The Albuquerque center distributes food to about 200 agencies throughout the state. Although 55 percent of the agencies are located in rural areas, many of the rural on-site feeding programs are extremely small, in some cases serving only five or 10 people. To date the

Roadrunner Food Bank has no special programs set up specifically for either the Indian or Hispanic communities, nor does it participate in government commodity programs. All food in the program is salvaged food collected by the agency.

Recommended Changes

Public Voice for Food and Health Policy recommends changes in New Mexico's food stamp program that would ease the burden for the state's rural poor. A waiver of the value cap on vehicles should be granted so families like the Andrews who have to haul water can meet their needs. Sub-offices should be reopened, and itinerant services should be set up in the state's larger counties. Monthly reporting should be greatly decreased and limited to circumstances where benefit errors are likely. The Voice recommends the establishment and funding of a coalition of state, local and federal workers to do outreach, to train community lay advocates, to identify early populations of need and to evaluate the food program. Finally, they recommend that a culturally appropriate nutrition education program be made available to food stamp participants.

Adapted from Profiles of Rural Poverty, a report by Public Voice for Food and Health Policy.

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just under 30 percent of the developing world's population, live in nations with zero or negative economic growth. (Several of the most populous countries, including China and India, managed to insulate themselves from the worst of the recession.) Average incomes in three quarters of African and Latin American countries have dropped by 15 percent and 10 percent respectively during this decade. Africa's recent physical and financial droughts, combined with regional and internal conflicts, have withered much of the continent.

The ones who have suffered the most from this recession are the young children of poor communities in affected countries. Their families have had to cut back on necessities. They are also the most dependent on government services and subsidies which so many governments have felt obliged to decrease to adjust to the recession.

It cannot be stressed too often that the young child just cannot ride out such austere periods. Ninety percent of the growth of the human body occurs in the first five years. A child who has to go without adequate food or health care in those years will not grow to his or her physical or mental potential. There is no second chance.

In the 1980s so far, more than 70 governments have had to adopt economic adjustment policies to reduce balance-of-payments deficits, honor debt repayments, reduce inflation and try to get their stalled economies going again. In most of those nations, such policies have meant cutbacks in government spending on the social services and on subsidies for staple foods.

The well-being of the young has been measurably deteriorating in at least 30 developing nations. In many African countries, for example, malnutrition is known to have increased. Health care and education have also suffered. In the early 1980s Ghana's education system lost 4,000 teachers and Zaire's lost 7,000.

In 1987 in a sample of 10 countries selected by UNICEF for more detailed study, malnutrition was found to have risen in five, child death rates had risen in three and school

attendance was falling in eight.

A Better Way

The greatest burden of recession is being passed on to the weakest and most vulnerable. Not even on economic grounds can such a process be justified. Sacrificing the growth of today's children for the growth of tomorrow's economy makes neither economic sense nor human sense.

Yet that is what present adjustment policies, with notable exceptions in some countries, have amounted to. To millions of small children, when all the financial euphemisms of recession and adjustment are stripped away, it means that the once-in-a-lifetime chance for normal growth must be foregone.

We know far more about viewing figures for TV shows than about changes in the health of children.

There are practical alternatives. Just as it was necessary to fight for basic needs policies in the 1970s to try to ensure that food, health care, education and housing for the poor were given some priority in a time of economic growth, so it is now necessary to fight for a policy that protects what has been achieved and makes sure the poor do not suffer disproportionately in a period of economic decline.

The effect of adjustment policies on the most vulnerable, particularly children, should be studied in advance. Such policies should seek to improve the productivity and incomes of the poor. Subsidies and services that form part of the fabric of survival should be reinforced rather than discarded.

To those who argue that these services simply cannot be afforded, we must answer that this is a question not of inevitabilities but of priorities. Even if a government has to sharply cut spending, it can choose where to cut. In defense or in the health of its people? In subsidies to national

airlines serving the richest 2 percent or to food programs serving the poorest 20 percent? Even if spending on health and education does have to take on its share of the financial strain, governments can still choose whether to cut into the budgets of universities or primary schools, city hospitals or rural primary health care clinics, cardiac research or child immunization programs.

This is not to suggest that economic constraints can be disregarded. It means, rather, that the maximum protection for the most vulnerable has to be squeezed from every dollar available for health care, education or social welfare. One of the best ways to do this is to teach parents about basic health actions—immunization, oral rehydration therapy, birth spacing, breast-feeding, safe weaning, growth monitoring, control of respiratory infections, safe motherhood and basic hygiene.

These are the battlegrounds of child health. These are the areas where action is possible at such low cost that almost any nation and almost any family can afford them even in difficult economic times.

Some countries are trying to pioneer this response to recession. *Indonesia*, for example, faced with the need to cut overall spending as a result of falling oil revenues, has cut back its hospital investment costs by 75 percent. At the same time, funding has increased to speed up the development of the *posyandus* (200,000 of them by March, 1988) which provide immunization and family planning services and help parents with oral rehydration therapy and growth monitoring in over 47,000 villages. *India* is also restraining spending on hospitals while stepping up programs to provide immunization and other vital low-cost services to the majority. *Chile* has increased spending on social services targeted to the poorest even though overall government expenditures have been cut back. And in *Algeria*, where spending cuts have been made this year in every ministry except the Ministry of Health, hospital spending has been held back while the nation attempts to put oral rehydration therapy, immunization and clean water at the dis-

posal of every family in the nation.

The international responsibility

But for some countries, national action alone cannot be sufficient, even with the most heroic political and economic efforts. If long-term economic growth is to be restored, and if the most vulnerable members of society are to be protected in the process, then the industrialized world will have to offer fairer aid and trade policies and further financial help.

In many nations today, children are going without food or health care or schooling because of a financial drought which cannot easily be captured by television cameras. Yet the lack of financial resources can be just as harrowing as lack of rainfall for those who are its victims. In Brazil alone, for example, an estimated 60,000 children have died as a result of recession in the 1980s.

This crisis is not only of the poor world's making. Despite all past mistakes in policy or priority, the fact is that many of the elements in the economic storm—falling commodity prices, high interest rates, an unstable dollar, fluctuating oil prices, falling aid levels—have been beyond the influence of those who have been hardest hit.

Such a dramatic deterioration in the developing world's economy in the 1980s is not widely appreciated in the industrialized nations. Perhaps this is because its causes cannot be so readily understood or its consequences so easily photographed as the deterioration in the physical climate which has become part of our standard imagery of the developing world. The net flow of financial resources between rich and poor worlds has been almost completely reversed in the last five years. When all the calculations are done, the bottom line is that the developing world transferred more than \$30 billion to the industrialized world in 1985. That is a dramatic about-face. In 1980, the net transfer was more than \$40 billion from the rich to the poor. Even the World Bank and the International Monetary Fund themselves are now net recipients of resources from Latin America and Africa. They have been since 1984. And, with current policies, they will be for the rest of this decade.

This financial famine has to be ended if growth is to be restored. And it has to be ended quickly if the most vulnerable groups, especially children, are not to suffer in the meantime. It will mean that many debts will have to be written off or restructured. It will mean that levels of real aid and concessionary loans will have to rise again. And it will mean that private commercial lending at reasonable interest rates will have to be resumed. Only increased cooperation among the industrialized countries can achieve this.

In the slightly longer term, the restoration of economic growth to larger areas of the developing world will depend on an expanding world economy accompanied by lower interest rates, a range of commodity agreements to secure fair and stable prices for raw materials, and a rolling back of the protectionism which is gradually stifling the third world's ability to sell to and buy from the industrialized world. Difficult as these measures might be to agree on and coordinate, they are in the long-term political and economic interests of all nations, the only sure foundation for sustained prosperity, stability and peace.

To begin this process, any govern-

Present policies sacrifice growth of children for growth of economies.

ment which now shows a willingness to put the poor first should have the generous support of the industrialized world. The director of Oxfam UK has said, "Eight hundred million people who spend part of each year malnourished need help today, not in a future age when—after 15 years of economic growth—their governments are better placed for responding to the needs of the poor."

For the industrialized world to play its part, those who shape public opinion also have an urgent job to do. Somehow, a new ethos has

to be created, a new ethos which sees the "silent emergency" of infection and malnutrition as unacceptable as the loud emergency of sudden starvation.

Finally, to protect the most vulnerable there must be a process which can be monitored and measured. While most nations produce up-to-date quarterly statistics on the health of their economies, few nations can produce even annual statistics on the health of their children. This failure to monitor the effects of economic and social changes on the well-being of the most vulnerable, and particularly on the growing minds and bodies of young children, is both a cause and a symptom of the lack of political priority afforded to this task. Yet the most important test for any government is whether or not it is protecting the nation's vulnerable and the nation's future—and its children are both.

Today, the indicators for measuring that duty—the quarterly measurement of, for example, changes in child nutrition or immunization coverage—are not even in place. Indeed, we know far more about changes in the weather, or in viewing figures for television shows, or in consumer preference and the monthly sales of video recorders, than we do about changes in the nutritional health of children.

UNICEF, WHO and the Food and Agriculture Organization of the United Nations (FAO) are now cooperating to find ways to more sensitively monitor the nutritional health of a nation's children so that, as with national economic indicators, up-to-date quarterly figures can be produced for politicians, press and public.

Progress as measured by such indicators should become both an aim and a measure of development policy. In times of economic growth, they could reveal whether or not the poorest groups were sharing equally in the benefits of that growth. In leaner years, they would reveal whether the poor and the vulnerable were suffering disproportionately from the effects of recession and adjustment policy.

James P. Grant is Executive Director of UNICEF and a Seeds contributing editor.