COMMITTEE ON INTERNATIONAL CHILD HEALTH

MALNUTRITION IN THE WORLD'S CHILDREN

THE PROBLEM

Protein-calorie malnutrition coupled with infection is the greatest killer of infants and young children and the major cause of retarded child growth and development in today's world. It has been estimated that by 1968 there would be 276,000,000 child victims of serious malnutrition in 29 developing countries. Its greatest toll is during the weaning period and in children below the age of 2 years. Some of these young children will die. Others, who survive severe disease, may sustain brain damage which impairs learning, limits achievement, and condemns them to the fate of their parents, thus perpetuating a cycle which interferes with national development itself.

The occurrence of protein-calorie malnutrition is not limited to developing countries, particular ethnic groups, or tropical climates. This affliction is found in the United States, although less frequently and rarely in extreme degree when compared to developing countries. More accurate information about its prevalence in the United States will soon be available.

The causes of protein-calorie malnutrition can be described within a variety of different conceptual frameworks: political, economic, educational, socio-cultural, agricultural, industrial, and medical-nutritional. The interrelation of the size of the world's population and its food supply is so vital a factor that inadequate programs of family planning increase the likelihood of malnutrition. Programs to eliminate malnutrition must be delineated within these different frameworks, and each must be brought into appropriate collaboration with the others.

Obviously, no statement of ours can cover this multiplicity of factors completely. We can speak only as pediatricians to whom any degree of malnutrition is unacceptable. In this statement we address ourselves primarily to the responsibilities and role of the United States in assisting developing countries to provide foods to children. However, we first wish to emphasize that a network of community health services that reach young children is an important component of any program to attack the problems of protein-calorie malnutrition. Such a network of services is also a natural and effective base for family planning activities which will permit parental choice to determine family size. In addition, these community health services provide an arena within which universities and other educational institutions can fulfill their essential roles of preparing physicians and allied health personnel in a manner relevant to the problem.

THE PROVISION OF FOODS FOR MALNOURISHED CHILDREN

It is obvious that, when acute famine exists, external supplies of food and assistance in its distribution are urgently necessary measures. The chronic, low-grade nutrient-specific deficiencies which prevail in underdeveloped countries, and to a lesser extent in the United States, constitute a different situation. Despite emotional appeal and the availability of American surplus food, the mere act of supplying foods to developing countries is less important in the long run in eradicating malnutrition than other measures aimed at promoting broad technological and social change.

However, the human need is such that food from the United States is, in fact, shipped to developing countries. Furthermore, the capacity of agriculture in the United States to produce surplus food can be greatly increased. Although legislation under which existing programs operate may hamper immediate implementation of our...
recommendations, when foods produced in this country are sent abroad, we urge that:

1. Except in case of emergency, food from the United States should be donated to developing countries only when they are requested by the country to support or help to initiate a long-range national plan that will eventually result in meeting national food needs and only if the United States' commitment can be firm and unalterable over the time period agreed upon.

2. Such foods should not: (a) interfere with the promotion of normal breastfeeding, or (b) compete with local products which are nutritionally satisfactory and available to children.

3. The nutrients of the foods shipped should be substances presently unavailable to children in the quantities needed by them.

4. The food supplied should be tested for safety, for efficiency in providing for adequate growth, acceptability, and actual use.

5. As the initial phase of a program to combat malnutrition, ideally the foods should reach a target population of children under 2 years of age whose nutritional needs are not being met by breast milk, children who have already experienced some degree of malnutrition, and those who live in the areas of its highest prevalence. Nutrition education and an efficient distribution system are essential to the success of the program, including information on composition, preparation, use, and storage of such foods.

If malnutrition is to be eradicated, nutritionally appropriate foods must reach and pervade the usual channels of marketing and distribution in adequate quantities so that they can take their place as part of the regular daily diet. For most developing countries, American capital and agricultural and industrial technology can help achieve this goal. If American aid focuses upon helping such countries produce and distribute their own food and special food mixtures, the goal can be attained even more rapidly. This approach to the problem in the long run is sounder than the mere supply of food produced in the United States.

In recent years a number of special food mixtures enriched with high quality protein and appropriate for younger children have been developed on a mass production basis. The sources of such proteins are present in countries outside the United States, and industries to produce foods based upon them can be developed more rapidly than a dairy industry. Excellent guidelines for the development and testing of such products have been prepared by the Protein Advisory Group (PAG) of the World Health Organization-Food and Agricultural Organization-United Nations Children's Fund. These guidelines should be followed by any organization in the United States, public or private, that enters this field.

We welcome the growing interest and involvement of the American food industries in the production and distribution of special foods for children. We hope that this will be extended and that plans for such extension will be coordinated with the strengthening of production resources and industrial development of other countries. Competition and profit may be desirable elements of such developments, but they are not desirable if they act to the detriment of children or to the detriment of the nutritional development of another country.

Protein-calorie malnutrition in children can be prevented or alleviated. Its persistence should not be tolerated by any nation. Eradication of malnutrition by every means available to society must become a high priority consideration. Although protein-calorie malnutrition is not a major problem in affluent, technologically advanced societies, they too must recognize its importance, commit their influence, and allocate sufficient resources to eliminate severe malnutrition among children.

The Committee has prepared the foregoing statement in the hope that the re-

†Special food mixtures include preparations such as Incaparina, which is manufactured in some Central and South American countries by the Quaker Oats Company.
sources of the United States of America will be committed to eliminate malnutrition in today's world. It believes that such a commitment must be made if the children of the world are to survive and to achieve their maximum potential.

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