

OP-ED PIECE FOR INVESTING IN THE FUTURE: A UNITED CALL TO ACTION ON VITAMIN AND MINERAL DEFICIENCIES

Past financial crises have shown us that those most affected by economic downturn are often those who struggle to survive. During the Indonesian financial crisis of the late 1990s, higher food prices and lower incomes led to increased risk of malnutrition. Poor women sacrificed their own nutrition and reduced their intake of food so that they could provide more for their families. Children conceived during and immediately prior to the crisis suffered great health and development consequences, through increased mortality rates and decreased cognitive development.

The current economic climate is leading to much speculation of what might happen to development efforts around the world. Will traditional donor governments have adequate funds to continue funding projects in less developed countries? Where will donor governments invest the fewer dollars that they do have? How will this affect the lives of those who are already so vulnerable?

As the global financial crisis unfolds and available funds from all sources are shrinking, the need for development assistance is expanding at an alarming pace. It is more important than ever that investments are prioritized to favour measures that yield the highest rates of return.

And there is one simple development investment that can yield an incredible return – micronutrient programming. Micronutrients, vitamins and minerals that are needed by the body in only small quantities, ensure that children can grow healthy and strong, and that entire communities will realize reduced rates of illness, blindness and preventable mental disorders.

It's a solution so simple that it is often taken for granted in the industrialized world where each of us has access to the vitamins and minerals we need, either by taking supplements or consuming foods enriched with micronutrients such as iron, iodine, vitamin A and zinc.

Micronutrients are inexpensive commodities. Low-cost supplements and fortificants are already available. For instance, it is estimated that the cost of salt iodization is a mere five cents per person per year. Vitamin A capsules cost two cents each. Micronutrient programmes can easily be integrated into ongoing health services, or into existing methods for food production. With the low cost of interventions and their high returns in improved capacity, the benefit:cost ratio of micronutrient programming is unmatched by any other large-scale health or economic intervention.

This simple truth has been endorsed by a panel of eight of the world's most distinguished economists. In May 2008, the Copenhagen Consensus panel considered 30 options and ranked the provision of micronutrients as the **world's best investment for development**. They determined that vitamin A and zinc supplementation for children provided the very best returns: an annual investment of US\$ 60 million would yield benefits worth more than US\$ 1 billion per year. Micronutrient fortification ranked third; biofortification was fifth.

Delivering vitamins and minerals to large populations involves commitment, coordination, planning and cooperation – all held together by strong and durable partnerships. Key partners in micronutrient interventions include national governments, non-governmental organizations, donors, aid agencies, foundations, industry, community leaders and the agricultural sector.

Seven agencies, the Flour Fortification Initiative, GAIN, the Micronutrient Initiative, USAID, UNICEF, WHO and the World Bank, have been part of the driving force to increase development programming in micronutrients. Together we have released a new report *Investing in the Future: A united call to action on vitamin and mineral deficiencies*, which outlines what we can and must do to ensure that every child, woman and man has the chance to reach his or her full potential.

National and international support, as well as long-term funding commitments, are needed if we are to succeed in delivering large-scale micronutrient interventions to save lives and improve health. National governments in countries where vitamin and mineral deficiencies exist can take the lead by budgeting for such programs; they can create enabling environments for food fortification and incentive programs for small-scale food producers. With the guidance of non-governmental agencies, governments can also implement large-scale programs and launch awareness campaigns for vitamin A supplementation, iodized salt and fortified food consumption and the use of zinc to complement oral rehydration therapy for diarrhea treatment.

To ignore this call to action would be to deny more than two billion people who are currently living with vitamin and mineral deficiencies, many of whom are women of child-bearing age who risk passing these deficiencies onto future generations. To refuse funding for simple health solutions like micronutrients would mean the reversal of years of progress.

We are not just asking governments and partners to invest in micronutrients; we are asking them to help save lives, ease the burden of illness and help communities grow strong and prosperous. In these harsh economic times, this is a solution that can set the course for a healthy and productive global future.