

Growth charts — WHO standards versus India crafted

High levels of child undernutrition have been a persistent problem in India. It is well recognised that the determinants of undernutrition are multiple, and include food intake, dietary diversity, health, sanitation, women's status and the over-arching context of poverty. The most common measures of childhood undernutrition are based on anthropometric standards such as height-for-age (stunting/chronic undernutrition) and weight-for-height (wasting/acute undernutrition). Monitoring these is key to tracking progress in terms of actual outcomes. India, like most other countries, uses the globally accepted World Health Organization (WHO) Growth Standards to measure malnutrition. However, there is an emergent debate on a number of issues related to the use of these growth standards in India, some of which are discussed below.

On using the MGRS as the base

The WHO standards are based on a Multicentre Growth Reference Study (MGRS) that was conducted in six countries between 1997 and 2003 (Brazil, Ghana, India, Norway, Oman and the United States). The purpose was to determine the pattern of growth (from birth to five years) of children who did not face any known deficiencies in their environments. The references that were previously used (WHO-National Center for Health Statistics references) were based on children only from the U.S., many of whom were not breastfed but formula-fed. The MGRS took a prescriptive approach, with the specific aim of setting growth 'standards' (how children ought to grow, provided they have a healthy environment) and not growth 'references' (how children of the reference group grow). The sample for India in the MGRS was drawn from a set of privileged households living in South Delhi, of children who met all the eligibility criteria for the study including having a 'favourable' growth environment, being breast-fed and having non-smoking mothers.

Some researchers who have analysed data from other surveys for India suggest that these standards overestimate undernutrition. However, such comparisons with other large datasets would only be valid if these could provide samples that meet all the criteria of a favourable environment for growth, as defined by the MGRS. As it happens, an adequate number of equivalent samples are difficult to find in large-scale surveys in India given the high levels of inequality as well as the underrepresentation of the rich in these datasets. For instance, even among children (six-23 months) in households of the highest quintile in National Family Health Survey (NFHS)-5 (2019-21), only 12.7% meet the



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A look at the pros and cons of shifting from World Health Organization child growth standards to a nationally compiled one

requirements of a 'minimum acceptable diet' as defined by WHO. While almost all mothers in the MGRS sample had completed more than 15 years of education (in 2000-01), 54.7% of women in NFHS-5 had completed 12 or more years of schooling.

Such comparisons could also be misleading because the study norms of the WHO-MGRS were very different from these prevalence studies. For example, the MGRS included a component of counselling to ensure appropriate feeding practices, which is obviously missing in the NFHS or Comprehensive National Nutrition Survey. In fact, once it is understood that the MGRS sample was for the purpose of setting prescriptive standards, most of the sampling concerns are resolved. Some further issues raised vis-à-vis the MGRS methodology such as pooling of data from different countries have been discussed in detail in the study reports.

Genetic growth, other concerns

Another important set of issues with regard to using the MGRS standards is the difference in genetic growth potential of Indians with respect to others and the influence of maternal heights on child growth. At an individual level, maternal height is undeniably a non-modifiable factor for the growth of her child. Therefore, there is a question of how much improvement is possible in one generation, if at all. However, low average maternal heights are themselves a reflection of the intergenerational transmission of poverty and poor status of women, and, therefore, a measure of an environment of deprivation. An appropriate indicator of a deficient environment, such as stunting, needs to capture this deprivation as well.

Albeit relevant a question still remains on whether the standard is too plastic to be useful, considering these issues of maternal heights and genetic potential. The fact is that a number of countries with similar or even poorer economic conditions, including those in the South Asian region, have shown higher improvements in stunting prevalence using the same WHO-MGRS standards. Regional differences within India, both in the prevalence of stunting as well as increases in adult heights, also indicate that some States such as Odisha, Chhattisgarh, Tamil Nadu and Kerala are achieving much faster reductions than others. It also needs to be considered that gene pools also shift at the population level with greater socio-economic development – a fact demonstrated by the growing average heights of countries such as Japan, refuting the immutability of genetic potential.

Another serious concern is related to inappropriately high standards leading to a misdiagnosis of the situation, and a resultant

potential overfeeding of misclassified children under programmes of the government introduced to address undernutrition, thereby resulting in an increase in overweight and obesity. This is a worry, given the increasing burden of non-communicable diseases (NCDs) in India. Nevertheless, given the dietary gaps that children have and the poor coverage of schemes such as mid-day meals and supplementary nutrition in anganwadis, such fears appear largely unwarranted. Indeed, the quality of the meals under these schemes must be improved to ensure that they are not cereal-heavy, include all nutrients, and contribute to dietary diversity. Recommendations such as including eggs in meals for children and pulses in the Public Distribution System must be acted upon urgently. It is also well understood that along with improving diets, multiple interventions such as better sanitation, access to health care, childcare services and so on are required for better nutritional outcomes.

There is also no doubt that there are also many gaps to fill in the more distal determinants of stunting, mainly, livelihoods and poverty, access to education and women's empowerment. These goals are inextricably linked to the overall development of the country, with equitable distribution of resources. Their reflection in anthropometric indicators only enhances the importance of these summary indicators rather than detract from it. It is relevant to acknowledge that individual children grow uniquely, and trained child health personnel such as treating physicians can apply judgement calls on the interpretation of growth charts in the context of individual children in their care. What these standards are used for are mainly to understand population trends. Using the appropriate standards is also important for international comparisons and intra-country trends – an advantage that would be lost with any new country-specific standard.

ICMR recommendation

In light of these discussions, the Indian Council of Medical Research has constituted a committee to revise the growth references for India. It has been reported that this committee has recommended a detailed rigorous study to be conducted across the country to examine child growth with the purpose of devising national growth charts, if necessary.

Yet, while acquiring newer, and more precise information on child growth is a welcome move – considering our high aspirations of reaching development to every last person by 2047 and its advantages of comparability – it seems logical to stick to the aspirationally high but achievable standards suggested by the WHO-MGRS.

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The quest for 'happiness' in the Viksit Bharat odyssey

Viksit Bharat has now been formally launched. The idea of making India a developed nation by 2047, the 100th year of its Independence, sounds exciting. This goal looks achievable, given the pace with which the country is moving ahead. This moment also gives us an opportunity to assess the idea of development intended. The focus and priorities in the choice of development planning are crucial and complex. In Viksit Bharat, economic development is overemphasised. But post-developmentalists argue that this is a Euro-centric notion of development which reflects the interests of its practitioners.

The aspects included in Viksit Bharat are structural transformation; organising labour markets; increasing competitiveness; improving financial and social inclusion; governance reforms, and seizing opportunities in the Green Revolution. Aspiring to claim the title of being the world's largest economy will not fulfil every desire and ambition this country holds dear. The need for material development can be accepted, but this will be one of many things India will aspire for by 2047. Critics of development have consistently raised concerns about the conventional models of economic growth, challenging the contentious notions surrounding modernity and progress. The current idea of Viksit Bharat needs to be reimagined to assess what other aspects of development would assume importance for India.

'Happiness' has become a goal

Instead of 'Viksit Bharat', the theme ought to be 'Happy India-Developed India' (Khushhal Bharat-Viksit Bharat). Happiness ought to be the central pursuit in this journey. Without achieving happiness, development has no meaning. Ironically, the nations have developed, but people are not happy. Rich nations are not essentially happy nations. Wealthy nations have only performed on GDP and per capita income but have failed miserably in the context of social and psychological well-being indicators. This development scheme conveniently overlooks



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A happiness-induced development model for India is more pertinent than the current model of mere economic development

mental health and wellness. The World Happiness Report 2023 shows many developed nations have poor happiness markers. Some nations have attained both in a balanced way. India's case is also crucial because it is ranked 126 out of 137 countries despite being the fifth-largest economy. The curious question would be whether India will have a better rank in the happiness index in the years to come. Development and the Viksit Bharat agenda will remain a dream if we fail to imagine how to rise in the happiness index.

Happiness measures have already become the goals of public policy in many countries. Happiness is no longer a subjective matter. Since its inception in 2012, the *World Happiness Report* has devised a robust method to measure and calculate it. The happiness matrix includes six variables: GDP per capita; healthy life expectancy at birth; generosity; social support; freedom to make life choices, and perception of corruption. The Happiness Report of 2023 placed extra emphasis on trust and benevolence in crisis situations such as COVID-19.

Social connections are key

Lara B. Akinin, one of the co-authors of the *Happiness Report 2023*, has said, "We see those various forms of everyday kindness, such as helping a stranger, donating to charity, and volunteering, are above pre-pandemic levels." The report found that despite the pandemic, economic crisis, and personal losses, acts of kindness have increased globally. The report also highlighted the importance of social connections and relationships in contributing to happiness and well-being.

According to the report's parameters, Finland, Denmark, Iceland and the Netherlands are the happiest countries. These countries achieved development not at the cost of social disruption. Instead, they have built up social connections and support systems.

A happiness-induced development model for India is highly pertinent as we are significantly governed by social relationships and cultural

mandates. On the contrary, the current model of mere economic development is highly disruptive to our social order. This form of development leads to disorders and crime. All aspects of life in this development cycle do not change simultaneously, creating imbalances and contradictions. Such things are visible in our society, where industrial and economic developments are changing alarmingly, but quality aspects of life continue to lag.

Looking beyond GDP

The need to include social indicators for development becomes more pertinent as GDP estimates fail to consider life's human and social aspects. The European Commission's focus is also moving beyond GDP, shifting to a measurement of economic performance and social progress. Specific indices already developed could make the agenda for Viksit Bharat@2047 more inclusive and comprehensive. For instance, a weightage to the Human Development Index, which consists of life expectancy, educational attainment, and income level, could be considered. Further, the United Nations Research Institute for Social Development in 1970 created a Social Development Index with 16 core indicators could be another inclusion.

Similarly, the World Bank's Environmentally Sustainable Development Division has developed a 'Green Index' that measures a nation's wealth by incorporating three components: produced assets, natural resources and human resources. An International Human Suffering Index also measures the country on different parameters of human suffering. In conceiving a national vision for development, indices such as the Global Innovation Index, Rule of Law Index, Poverty Index, Corruption Perceptions Index, Gender Equality Index, and World Press Freedom Index will be pretty significant to give effect to the idea of a happy India. Revisiting the pursuit of a developed India as Happy-India will be pivotal in Viksit Bharat's journey.

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The views expressed are personal

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