Improving maternal and child nutrition is the most cost-effective investment in international human and economic development. Improving nutrition not only alleviates human suffering, but also improves the conditions that create poverty in the first place. For every $1 invested in nutrition, there is a return of $16 in improved productivity and decreased healthcare costs.

Nutritional needs around the world are still immense. 155 million children under 5 – about one in every four – suffer from chronic malnutrition, or stunting. At any given time, approximately 52 million children are acutely malnourished—a condition that leads to death if not promptly treated. At this writing, in the summer of 2017, 1.4 million children are at immediate risk of death from starvation and malnutrition in four countries at imminent risk of famine.

The International Development Association (IDA) is the World Bank’s fund for the poorest countries, those whose per capita gross national income is less than USD $1,215. In 2017, there are 77 eligible nations. IDA plays a key role in boosting nutrition for women and children in these vulnerable countries. By pooling Official Development Assistance contributions from individual donors, IDA provides significant and stable funding for basic services such as health and nutrition. Every $1 contribution from the United States leverages or attracts nearly $13 from other donors and the World Bank.

IDA focuses on nutrition in both emergencies and long-term development contexts.

The World Bank recognizes the critical role that the early years of a child’s life play in achieving its two main goals—ending extreme poverty and boosting shared prosperity, including improving maternal and child nutrition. In October 2016, the World Bank held its first-ever Human Capital Summit, where World Bank President Jim Yong Kim made a strong economic case for investing in human capital, specifically the human capital of young children. Nine Ministers of Finance from IDA countries made commitments at the Summit to take action in their countries to make sure children start off on the right track.

- **Cameroon** intends to reduce stunting from 32 percent to 25 percent by 2019 through a multi-sectoral approach (education, health, and social protection).
- **Cote d’Ivoire** launched its National Multisector Plan for Nutrition. The government has committed $70 million and intends to mobilize $470 million altogether to scale up nutrition actions.
- **Ethiopia** has prioritized nutrition in a $150 million health project financed by IDA.

The World Bank will support these countries, and others that commit to improving nutrition, with financial resources, technical guidance, and access to the latest research and evidence.

In 2015, IDA invested $357 million in basic nutrition services.

The 18th replenishment of IDA totaled $75 billion for three years. IDA plans to reach 400 million women and children with essential health and nutrition services over the three years of IDA-18.
What impact does IDA have on nutrition?

**Bangladesh:** IDA supports investments in children’s early years in Bangladesh. This includes providing nutrition services and programs to enable 600,000 vulnerable families in 43 sub-districts to generate more household income.6

**Peru:** IDA supported the government in giving information and incentives to mothers of children suffering from stunting to provide their children with nutritious foods and educate them. IDA also provided support for health clinics to serve these at-risk families. If children improved, the incentives continued—and in seven years, stunting was reduced by half.7

**Senegal:** With support from IDA, Senegal developed and began to implement a community-based holistic strategy to improve nutrition. The program had multiple components, including delivering nutrition services, supplying chickens to households, providing incentives for prenatal care visits, and supporting community-managed cereal banks that made fortified porridge and distributed it to malnourished children. Stunting in Senegal is now at 19 percent, one of the lowest rates on the African continent.8

**Somali refugees:** Between 2011 and 2013, IDA contributed $30 million to the U.N. refugee agency (UNHCR) to deliver emergency nutrition services to Somali refugees in Ethiopia and Kenya. Nearly 86,000 severely malnourished children were treated—saving many lives—and more than 174,000 pregnant and lactating women received much-needed supplementary foods.9

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**IDA AND EMERGENCY NUTRITION IN YEMEN**

IDA also works directly with countries facing crises. Yemen currently has the world’s most severe hunger emergency.10 In May 2017, IDA announced a new grant to Yemen—an additional $83 million for the Emergency Health and Nutrition Project to extend the work done with a previous commitment of $433 million. The new funding will provide an integrated package of nutritional support to 8 million vulnerable Yemeni women and children.

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Endnotes