Policy 360 – Episode 67 – The First 1,000 Days - Transcript

Kelly Brownell (KB): Hello and welcome to Policy 360. The first thousand days of a child's life are crucial, but around the world, many women face huge obstacles when it comes to helping their children grow and thrive, especially in those first thousand days. My next guest traveled to four communities, from the highlands of western Guatemala, to rural Uganda, over to India and back home to Chicago. His goal was to see, in an intimate way, how those crucial early years play out in four very different locations. My guest is Roger Thurow, and he wrote a book called "The First Thousand Days: A Crucial Time for Mothers and Children - and the World." Welcome, to Policy 360.

Roger Thurow (RT): Thank you. Glad to be here.

KB: So, what happens when children don't get the nutrition they need?

RT: Yeah, it's devastating, not only for the individual child and the family, but for all of us. When you think about it and you extrapolate, a lack of the nutrients, the vital minerals, the vital minerals and nutrients and vitamins at that time, in the thousand days from when the mom becomes pregnant to the second birthday of the child, the lack of those nutrients, the lack of access to the food that provides them, then results in stunting of the child.

Because so many things are happening during that time in the thousand days in terms of the physical growth of the child, the epigenetics that are going on in the body. So, the epigenetics then, already with the child in the womb- can the genes be turned on and off with signals that the baby in the womb is getting from the food and nutrients that the mom is taking in.

So, the baby may be getting the signal, "Hey, you're going to be born in a resource-scare world." And so, the conservation of fat, or energy, might be increased, maybe the metabolism slows. There's other things that are going on in the body, and so when the child is born, to kind of prepare them for that world, say, later in life, when circumstances change ... maybe when the child is 5 or 6 or a teenager or something and they just started eating more fast foods, more fats, all that is being conserved because the body is preconditioned to do that, and so that will then cause all sorts of problems then.

[Also] the brain is developing so rapidly and expansively already in this thousand-day period, and that's all fueled by good nutrition. And so, the lack of ... the prolonged lack of the vital micronutrients during that period, any lack of access to foods then can result in stunting, and stunting can be both physical or cognitive. And you can kind of talk about it, you know, “stunting” is like a horrible, harsh, ugly word-"stunting.” It's really brusque, a rude word, but that doesn't really convey the significance and impact of what stunting is. The clinical definition is "too short for height,” but what it means for these children is it's basically a life sentence of underachievement that's already rendered by the time a child is two or three years old. And that you carry then throughout life; a stunted child becomes a stunted adult. So that's why I say that a stunted child anywhere becomes a stunted child everywhere, because when you think about it, a lost chance of greatness for a child anywhere becomes a lost chance for us everywhere because who knows what a stunted child may have accomplished for all of us, were they not stunted.

KB: So, in your book, you focus on four locations. Can you tell us why you chose the four you did?
RT: Yes, because there were specific reasons- that's where the journalism begins. So - India because India, with its large population, there's more children that are born every day in India than any place else. There's more underweight children born in India then there is any place else, there's more malnourished children, there's more stunted

[I focused on] Uganda, because in Uganda I wanted to show, the vital importance of bringing together agriculture and nutrition. So as a lay person, [you think] of course agriculture is nutrition, there is nutrition in the food that is being grown. But in practice, agriculture and nutrition- there's been a huge gap that has grown up between those two over the years. That agriculture and the agriculturalist would basically be looking at their main task of ever-increasing yields and increasing the income of farmers, not looking at then the people that are actually eating the food. And so, how then does the world and the ag system and the food system bring nutrition more into focus at a center point of agriculture.

And so, in Uganda, the moms that I followed there in northern Uganda, they've already started then growing two new crop, orange-fleshed sweet potatoes, which are rich in Vitamin A, and then bean varieties where the iron which is already in the beans, but the iron level is then is raised and elevated. Vitamin A and Iron- two extremely crucial nutrients, particularly in the first thousand days. So, to see what benefits are those moms and the families then reaping as they harvest those crops over a couple of seasons?

And Guatemala -- Guatemala has the worst childhood malnutrition stunting rates in the Western Hemisphere. It's worse than Haiti. And in the Western highlands of Guatemala, where we followed the families, they're largely Mayan communities. Their stunting rates upwards of 70% and the childhood malnutrition rates in those communities- it's just a devastating problem. So that's why Guatemala.

And in Chicago, I wanted some place in the United States that would then also be able to show, "Look, these aren't only problems over there somewhere, they're also so critical for us." And maybe it's the other side of the nutrition coin, maybe not so much undernutrition, but then it would be the other food choices that are being made and the poor quality of food

RT: So, what surprised you about the women you met in particular?

RT: They're all- one of the surprising things as a journalist is how over time you're able to build relationships with them. So, in the course of the reporting, I went back to all these places five or six times in the course of the reporting. And so, as I would return time after time they were kind of ready to regale me with the stories that are new things that had gone on and show off- and with great pride- of "look at my children" and see how they're progressing. (I was measuring them as it went along.) So it's very kind of unscientific or an academic research that was doing, it was very much of a journalistic approach- but I think also somebody basically saying, "Tell me about your life and what's going on."

You know, one of the things that I found is that perhaps the most common craving of pregnant moms around the world is a craving for knowledge, particularly on food and the types of food that should be eaten, whether it's the mom pregnant for the first time or second, third, fourth time. [They'd ask]"what can I do now? What can I do better? What can I do different for this child that I maybe hadn't done for the others? What's new, particularly on a nutrition front?" And the other thing that as I would ask the moms, and dads, "What are your ambitions for this child?" It was universal, all of them would say that their top priority, their great ambition is a good education for the child.
KB: Can you talk about, in Uganda, meaning a woman named Esther and her son Rogers, could you tell us why they were interesting to you?

RT: Esther, the first time I met her, it was her first pregnancy and she's a smallholder farmer herself, and right from the beginning she was, "Can you come visit my house?" And that she then also was entertaining ambitions for her child from the beginning.

And so, the first day I had met her, then she invites me to see her place and then she says, "Hey, you know," it was tomorrow or the day after then she said, "I'll be meeting at the clinic I go there, and there's *Susan E. John*, the midwife at the clinic. She then becomes very influential to me in the reporting of the book, not just in Uganda, but a lot of the things that she was saying to the moms in Uganda as the midwife at that clinic, it was as if she was addressing, kind of, all the moms, because right away at that first meeting, it was really hot day temperatures were pushing 100, sun beating down, a couple dozen moms had including Esther walked, you know, some two, three, four miles to this clinic to, kind of, gather together in whatever shade there was from the overhang on the tin awning of the clinic, so they were sitting on the concrete floor on the veranda, and there was Susan and she was had various charts and, you know, pictures of food and nutritious foods and things, just talking about nutrition, you know, the various vitamins, the minerals that are in there.

And then she says something that got everybody's attention, including mine. And she said, "If you do all these things that I'm talking about and when you pay attention to the nutrition, your child can achieve great things." And why that was so profound to the moms, and also to me, that I thought about it is, in that area of Uganda, and the moms immediately there was kind of whispers or a ripple, kind of went throughout the moms on the veranda, "Greatness? Did she say greatness?" For moms even to dare dream of greatness for your child, kind of, hadn't even been within the realm of possibility, because in that area, for so long these moms had grown up during the time of Joseph Kony, the warlord, and his Lord's Resistance Army and the horrible reign of terror that they had unleashed in that area.

There were all sorts of health care problems in the area of malnutrition, kind of, all of the legacy and residue of the insecurity and the conflict. And so, it was, you know, the main goal was mere survival of your child, and that's what, "I hope my child survives. Where do you even start dreaming of greatness? And here's this midwife all of a sudden saying, "Your child can achieve great things."

And she was talking, and she looks across the gathering, says, "I think that the next president may come from this group." Wow! Isn't that a real thing for somebody to think about, right? "I could be carrying, or maybe the little one that I'm holding, sitting here on the veranda, could become president? So, all of a sudden, she was almost teaching by aspiration and she was thinking that, "By connecting the aspiration to what I'm telling them about nutrition, that may increase the chances that they'll pay attention to this, they'll adhere to the advice that she's giving.

And so, that I thought was a really, kind of, clever way of doing that, but also really profound that that was then something I was experiencing then in every other setting that I was in, including Chicago. The doula there for the two main moms that have primary moms that I'd been following there - it was- you know, things are happening already in this thousand-day period that are already influencing how your child will perform in school. And so for you to achieve the dreams of your child at some stage during their life, that all begins now, in this thousand-day period and with good nutrition.
KB; Are there any examples you saw during your research or afterwards of agriculture changing- what people are growing changing in response to what’s known about the first thousand days?

RT: Yeah, so I think in Uganda- so those orange-flesh sweet potatoes, to high-iron beans, that’s kind of all part of the program of Harvest Plus, which is an organization that has pioneered bio-fortification, which is not like GMOs or anything, but it’s through this agriculture process of highlighting the mineral content that’s already in the crops.

And so, you’re not bringing anything foreign, but these are already traits that are in the crops, and so through breeding you can then highlight these.

And you could see, kind of, on the market areas, how those then would become you know premium, sought-after crops as people started to know, or the stories went around it, the moms would say, there would be all sorts of instances of- here’s a child that was really sick and kind of everybody figured, "We don’t know what’s wrong with the child. We don’t have much hope for the child." *And then the* child recovers. " Oh, mother, what did you do? Did you do anything that has changed?" [and they say] “I felt was my kind of the last resort was- here’s these beans with a lot of iron in, and these orange plus sweet potatoes, maybe that’ll help, that’s what we’re hearing." And so, just fed the child that, and then now you can see, they’ve recovered.

So, there’s enough stories of that, the moms talking about how their pregnancies are going better now that they’re growing and consuming these crops.

In Guatemala, the knowledge would spread- because a lot of the moms, you know, they would also be working in the fields, if the land’s not owned by the family themselves then they’d be working for other farmers, and a vast majority, in a number of cases, of the crops that they were growing, at least of the vegetables would then go off, and go to the market, to go to the mainly to the export market, so we’ll find them and will have eaten them and consuming them, and Whole Foods some of our stores here that will get them. So, here’s the crops that they’re growing, the vegetables that are highly sought-after in, say, the urban markets and here in our country because of their great nutritious value, but they weren’t kept there by the farmers that are growing them because they wouldn’t necessarily, don’t have a taste for them, they’re not in their diet mix. And the main reason is, “Oh, these are being grown for export."

And so, then, kind of, through the education and things in the nutrition classes, "Hey, all these crops that you’re growing there are going to be really valuable particularly in this time for you mom, and for your child, keep some of them at home, ask perhaps to be paid in these crops,” and, you know, “Here’s cooking classes that you can build them, incorporate them in the diet."

So, you would see then, kind of, that consciousness of then crops to grow and to retain at home, and then also crops and foods then to seek after in the in the marketplace. And that knowledge that some of us here may think, "Well, it should be common knowledge," just isn’t for so many people, including for the moms in Chicago.
I mean, what would be available, say, in the farmers markets, or even in their regular stores, what would be available with their SNAP, the food stamp program, or the WIC- the Women, Infants and Children supplemental programs.

In Chicago there was a supplemental program to WIC, where they would get coupons specifically to buy fruits and vegetables, and the doula said that at one stage she had she was going around to all the moms that she was working with a kiwi and saying, "Okay, have you seen a kiwi?" [and they’d say] "No, I've never seen a kiwi? What do you do with it?" "Yeah, it’s a weird-looking fruit but it's really, you know, it's good, it's nutritious. So, yeah, it looks funny but then you cut it open and it still looks a little funny you know, but here taste it you eat it with cereal, there's other ways you can prepare it." And then she said, it was kind of a grand moment, kind of a eureka moment for her. She says one of the moms had had, the next time she saw her said, "Thank you for introducing me to kiwis. I was just at the WIC store a couple of days ago and they had a new shipment of kiwis that came in, so I used my supplementary coupons for that. Otherwise I would have had no idea what they were and would have stepped around them, or something, but they were there." She said, "So, thank you," and so she's like "Yay! I got through to one of the moms!" And so that was a moment of great celebration for her.

KB: So, you painted two pictures here. One is tremendous world need for better nutrition and the dire consequences of poor nutrition in those first thousand days, but you've also told some success stories. So, overall, how do you come out about this? Are you optimistic about the way things are going?

RT: Yeah, I am. I'm more optimistic, I guess, than when I started. The stories, and as you kind of see the moms grow in their knowledge and then the children develop, and hopefully I continue to follow them, that I'll continue to see that they're healthy. And also, then the continuation of the growing momentum of the thousand days movement. This gain in nutrition, global program- a lot more talk in governments not only rich-world governments, but in governments around the world about the importance of nutrition. The World Bank foundations, institutional investors, businesses, the corporate, the private sector - kind of all looking at new investment devices so they can invest in nutrition. The World Bank’s talking about more in the African Development Bank is investments in gray-matter infrastructure, so not just bridges and roads and dams and the bricks and mortar of development, but in the gray matter, the brain development of the children that's so important and critical and also for the growth of these economies.

And so, hopefully that momentum continues to build and the recognition of this and that nutrition is moving out from the dark corner of development. I mean, it's staggering when you think that it's like 1% or less than 1% of all overseas development assistance money totally spent in the world is on nutrition.

And you figure, "Wait a minute. Nutrition's the building block and a cornerstone of all development efforts. And so, now these efforts to really get in there and build up the importance of nutrition.

KB: Well, it's fascinating to hear these stories through the eyes of the people that you visited around the world, and then subsequently through your eyes, so thanks so much for joining us today.

RT: Thank you, thanks for this discussion.
KB: So, our guest today was Roger Thurow, who's a Senior Fellow on Global Food and Agriculture at the Chicago Council on Global Affairs. His latest book is "The First Thousand Days: A Crucial Time for Mothers and Children, and the World". We'll have a link on our web site, policy360.org. We'll also have a link to his podcast there, as well. Until next time, I'm Kelly Brownell.