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‘Worldwide historical child stunting since the nineteenth century’

Poor child health remains an important global problem with an estimated 171 million children in 2014 experiencing stunted growth,^[1] i.e. being too short for their age (Galasso and Wagstaff 2019). Stunted growth reflects poor nutrition and chronic illness in childhood and leads to poor health and human capital outcomes in later life (Hoddinott et al. 2013). Child stunting rates are a widely used indicator of population health, but to date, there is very limited evidence on stunting rates before the 1980s. Anthropometric historians have focussed on collecting the more prevalent data on adult stature, and while it is clear that stunting has been eradicated in most rich countries, we do not have a detailed understanding of how prevalent child stunting was in these countries in the nineteenth century and how quickly it was eradicated since then.

This paper reports on the findings of a team of nearly 50 anthropometric historians seeking to reconstruct how child stunting has changed around the world since the nineteenth century. Covering c. 40 countries in detail, the team will use published growth studies and surveys which report the mean and distribution of height by age to reconstruct trends in historical child stunting rates. The team will also collect new stunting estimates for as many countries as possible back to the 1960s. This research is innovative in the anthropometric history literature because it focuses mainly on young children (under age 10) and focuses on the distribution of heights (stunting rate) rather than the mean height of children. This new database will provide insight into how the health transition occurred historically around the world and can serve as a counterpoint to other indicators of wellbeing such as life expectancy, adult height, real wages, GDP, etc. It will also extend the World Bank’s stunting dataset providing two sets of useful stylised facts for economic history and current policy: 1) it will reveal countries that managed to eliminate stunting rapidly (or slowly) which could be used as case studies to understand which policies were most effective (least effective) in eradicating stunting and 2) a broader understanding of how long it took to eradicate stunting fully in a number of countries which would be informative for setting development goals today.

^[1] Stunted children are children under age five whose height-for-age Z-score relative to the 2006 WHO child growth standard is below -2.