

# The cost of inaction:

## The economic and human capital benefits of investing in nutrition

**AT LEAST USD \$3.5 BILLION COULD BE SAVED ANNUALLY IN KENYA THROUGH SMART INVESTMENTS IN PROVEN, COST-EFFECTIVE, HIGH-IMPACT NUTRITION INTERVENTIONS.**

### BACKGROUND

In 2012, the World Health Assembly (WHA) set global nutrition targets to spur action and investment in addressing malnutrition. In May 2025, the targets were reevaluated, reset and extended to 2030. The 2030 targets aim to achieve a 40% reduction in the number of children under five who are stunted, a 50% reduction of anaemia prevalence in women of reproductive age, a 30% reduction of low birthweight among newborns and an increase in the rate of exclusive breastfeeding to 60% in the first six months. Targets have also been set on overweight and obesity, and on wasting.<sup>1</sup> At present, Kenya is on course to meet three of the six global nutrition targets (stunting, wasting, overweight) and has met the target on exclusive breastfeeding.<sup>2</sup> Despite progress made on stunting, 18.4% of children under five are still affected.<sup>3</sup>

In Kenya, 1.3 million children under five are stunted, over 2.5 million are anaemic, 150,000 are born with low birthweight and more than 500,000 are being sub-optimally breastfed for the first six months of life. Additionally, there are over four million cases of anaemia in older adolescent girls and women (15-49 years).<sup>4</sup>

The interrelated crises of the COVID-19 pandemic, climate change and cost of living increases have put unprecedented pressure on social sector accounts and caused many governments to consider diverting investments from public health and prevention programs to bolster short-term responses to urgent needs.

However, emerging data continues to support the importance of investing in nutrition and the compounding benefits that can be realized through smart nutrition interventions. The 2024 World Bank Group Investment Framework found that an additional USD \$13 billion is needed annually to scale up evidence-based nutrition interventions globally from 2025-2034. Every dollar invested in Kenya is estimated to generate USD \$5.8 in return.<sup>5</sup>

Through the development of an online, user-friendly Cost of Inaction Tool, Nutrition International has sought to support policymakers as they weigh their options. The tool provides an analysis of the costs of “inaction” – of allowing limited to no progress on key indicators of undernutrition to be made – and how doing so affects countries’ income in both the immediate and long term. The new tool demonstrates that investments in nutrition can generate significant economic savings as long as smart investments are made in proven, cost-effective and high-impact nutrition interventions.

### THE FINDINGS

The impacts of poor nutrition are wide-ranging and serious. Findings from the Cost of Inaction Tool estimate that the total global economic cost of undernutrition is more than USD \$761 billion per year. In Kenya, at least USD \$3.5 billion per year could be saved with increased investments in stunting, anaemia in children, adolescent girls and women of reproductive age, low birthweight, and the protection, promotion and support for breastfeeding.<sup>3</sup>

When a population is undernourished, it is more vulnerable to preventable infections and diseases. With adequate nutrition, not only does a population strengthen immune systems against preventable diseases and infections, but healthcare costs and treatment expenses are also reduced. Ensuring proper nutrition for vulnerable groups, such as infants, young children and pregnant women is key to unlocking their potential. When children are well-nourished, they are more likely to succeed in school, which in turn helps them to live a better life, thrive, and contribute to socio-economic development.

Kenya has shown strong commitment to improving nutrition through a range of national policies, strategies, and programs that address malnutrition in all its forms. Following the foundation of the first National Nutrition Action Plan (KNAP) 2012-2017, the country developed a second KNAP for 2018-2022. This plan, implemented under the National Food and Nutrition Security Policy, aimed to address malnutrition in all its forms, across all age groups and taking a life course approach. It emphasized a multisector collaboration to sustainably tackle the social determinants of malnutrition.<sup>6</sup>

Building on the progress made, Kenya is now in the final stages of developing its next national nutrition action plan. As part of its strategy to combat widespread micronutrient deficiencies, the Government of Kenya is prioritizing food fortification for its proven ability to deliver essential micronutrients at scale through widely consumed staple foods and condiments. In 2012, Kenya made the fortification of staple foods – including maize flour, wheat flour, fats and oils, and salt – with essential vitamins and minerals mandatory.<sup>7</sup> Through national fortification plans such as the Kenya National Food Fortification Strategic Plan (2018-2022), the country aims to further reduce the prevalence of micronutrient deficiencies nationwide.<sup>7</sup>

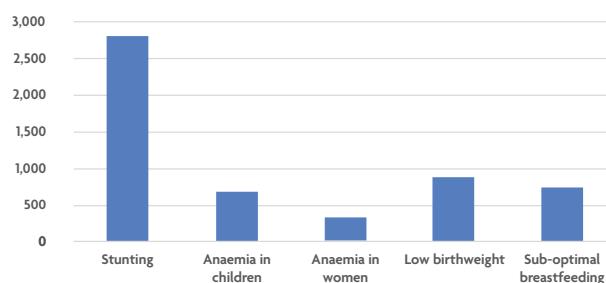


## KEY FINDINGS

Each year, in Kenya, the current levels of stunting, low birthweight, anaemia, and not protecting, promoting and supporting breastfeeding result in an estimated:

- **USD \$3.5 billion** in economic costs (or 3.2% of the gross national income) due to cognitive and mortality losses
- **2.7 million IQ points lost**
- **525,000** school years lost
- **9,500** child deaths
- **274** maternal deaths from cancers and type II diabetes

### ECONOMIC COST OF INACTION IN KENYA, USD \$ MILLION PER YEAR



\*The total economic cost is lower than the sum of each individual cost. This estimate avoids double counting of costs associated with co-occurrence of stunting, anaemia, low birthweight and sub-optimal breastfeeding.

Kenya ranks 41<sup>st</sup> out of 48 countries in sub-Saharan Africa for the highest prevalence of anaemia among adolescent girls and women and 86<sup>th</sup> out of 201 countries globally. With a current prevalence of 28.7%, Kenya's rate of anaemia in adolescent girls and women has slightly worsened from 28.4% in 2012 to 28.7% in 2019. Kenya's 2030 global nutrition target for anaemia in adolescent girls and women is 14.20%.<sup>3</sup>

## ABOUT NUTRITION INTERNATIONAL'S TOOLS

The Nutrition International Cost of Inaction Tool was released in 2024 by Nutrition International, in partnership with Limestone Analytics and with funding from the Government of Canada. The Cost of Not Breastfeeding Tool was created in 2017 by Alive & Thrive, with funding from the Gates Foundation, and it was updated by Nutrition International and Alive & Thrive in partnership with Limestone Analytics in 2022, with funding from Government of Canada. Both tools present results for over 140 countries using standardized data from global health and development agencies including World Health Organization, UNICEF, and the World Bank to see the potential benefits if action is taken now. All estimates included in this brief are as of July 2025. Visit both tools on Nutrition International's website to read about the methodology and data sources and to learn more about Nutrition International.

For further support, including additional analyses, tool demonstrations and technical assistance, you can reach out to Nutrition International at [healthecon@nutritionintl.org](mailto:healthecon@nutritionintl.org).

[Cost of Inaction Tool](#)

[Cost of Not Breastfeeding Tool](#)

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## POTENTIAL BENEFITS OF ACHIEVING GLOBAL NUTRITION TARGETS

Here are some of the benefits that Kenya stands to realize if the 2030 global nutrition targets were to be met:

- If Kenya were to meet the 2030 WHA global nutrition target on stunting, an estimated 40,000 cases of stunting would be averted annually, preventing 1,500 deaths, the loss of 420,000 IQ points and 67,000 school years. Overall, this would prevent USD \$448 million in economic losses.
- If Kenya were to meet the 2030 WHA global nutrition target on anaemia, an estimated two million cases of anaemia would be averted annually, preventing USD \$154 million in economic losses.
- If Kenya were to meet the 2030 WHA global nutrition target on low birthweight, close to 36,000 cases of low birthweight would be averted annually, preventing 1,000 deaths, the loss of 349,000 IQ points and USD \$213 million in economic losses.

Building on Kenya's success in achieving the 2030 WHA target on breastfeeding, meeting the national target of 75% would avert 78,000 cases of diarrhoea annually, prevent 935 deaths, and the loss of 527,000 IQ points and 184,000 school years. This would avert USD \$229 million in economic losses.

## REFERENCES

- 1 World Health Organization. (2025). World Health Assembly re-commits to Global Nutrition Targets and Marketing Regulations. World Health Organization. <https://www.who.int/news/item/27-05-2025-world-health-assembly-re-commits-to-global-nutrition-targets-and-marketing-regulations#:~:text=Countries%20at%20the%20seventy-eighth%20World%20Health%20Assembly%20have,to%20regulate%20the%20digital%20marketing%20of%20breast%20milk%20substitutes>.
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- 3 Jain S., Ahsan S., Robb Z., Crowley B., Walters D. (2024). The cost of inaction: A global tool to inform nutrition policy and investment decisions on global nutrition targets. *Health Policy and Planning*, Jul 17: czae056. <https://doi.org/10.1093/heapol/czae056>
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- 6 Ministry of Health, Republic of Kenya. (2018). *National Nutrition Action Plan 2018–2022: Scaling Up Nutrition*. Retrieved from [The-Kenya-Nutrition-Action-Plan-2018-2022.pdf](#); Nutrition International, & Global Alliance for Improved Nutrition. (2020). *Food Fortification in Kenya Policy Brief*. Nutrition International. [Retrieved from Kenya-Food-Fortification\\_FINAL\\_2020-11-02\\_WEB-1.pdf](#)
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