



**FOOD CONSUMPTION
PATTERNS AND PRICES
IN POOR COUNTRIES**

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■ QUESTIONS

Where do poor consumers get their food from?

How are consumption patterns changing?

What are the major problems with infant diets?

AS INCOMES RISE, PROCESSED FOODS RISE

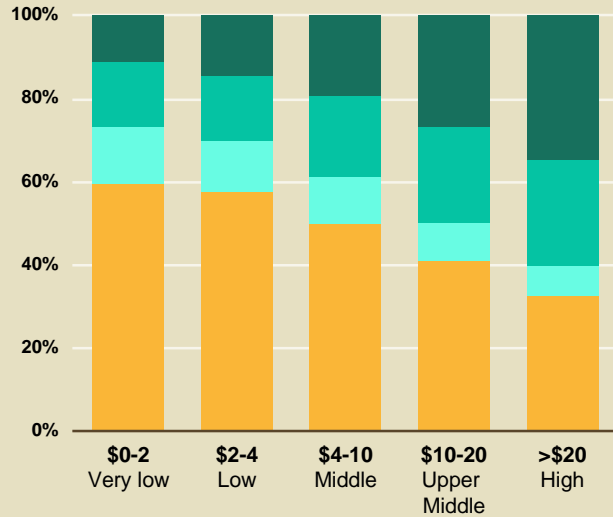
The food private sector already reaches consumers in both rural and urban poor populations

Percent of Monetary Value of Food Consumed from Different Categories

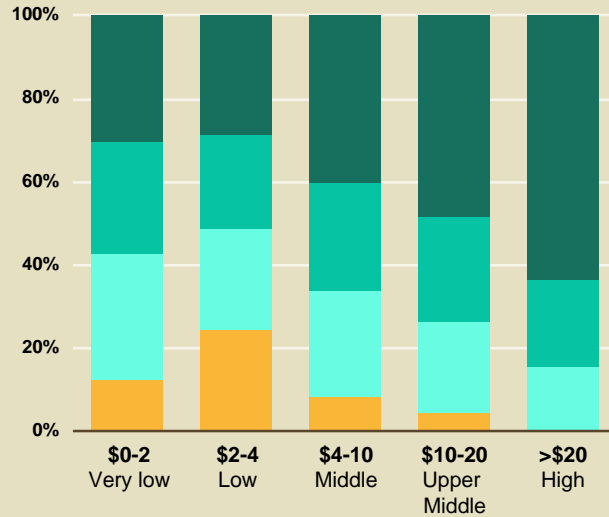
Ethiopia 2004/05, Uganda 2009/10, Tanzania 2010/11, Mozambique 2008/09, Malawi 2001/11, South Africa 2010

● Purchased: High Processed
 ● Purchased: Low Processed
 ● Purchased: Unprocessed
 ● Own Production

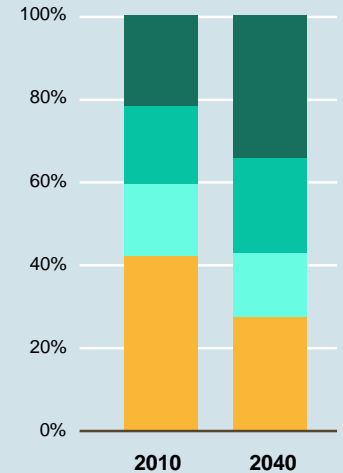
Today: Rural



Today: Urban

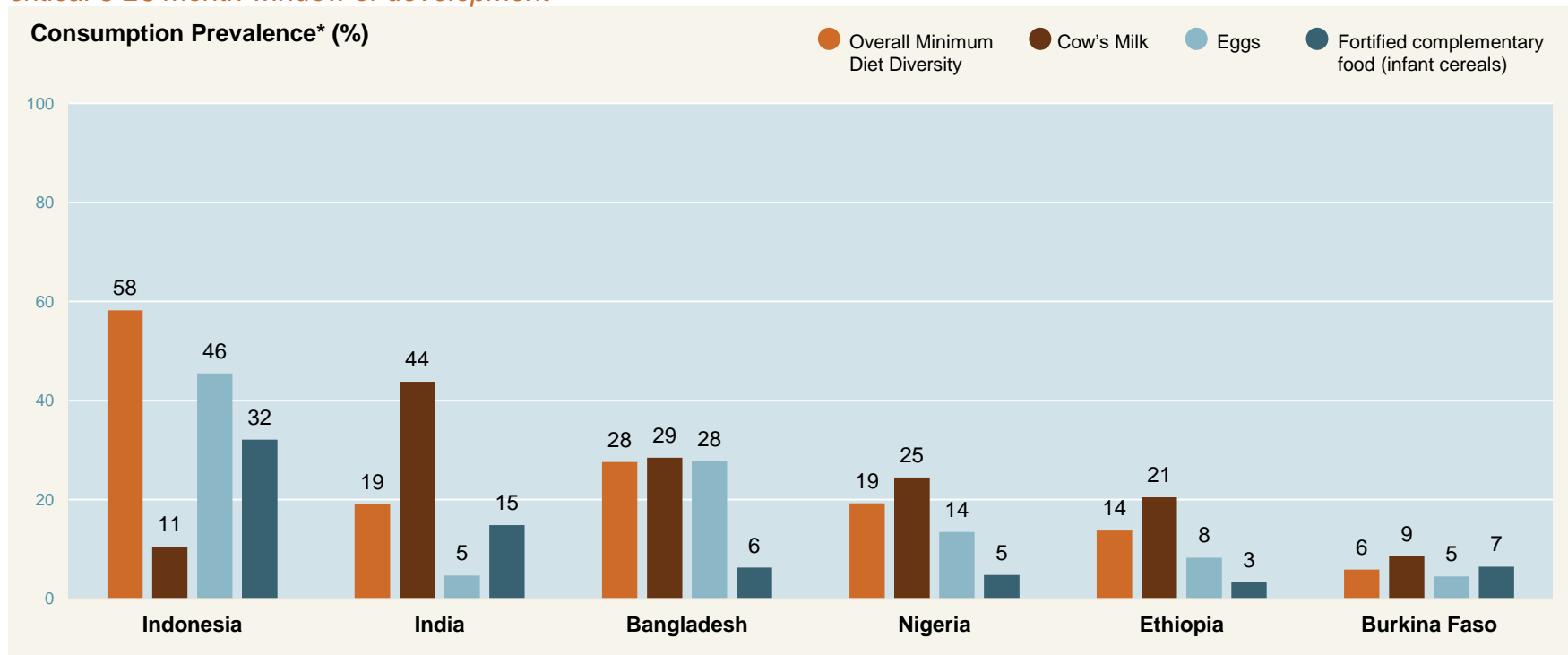


Projected Change to 2040 (All)



INFANTS HAVE VERY LOW DIET DIVERSITY

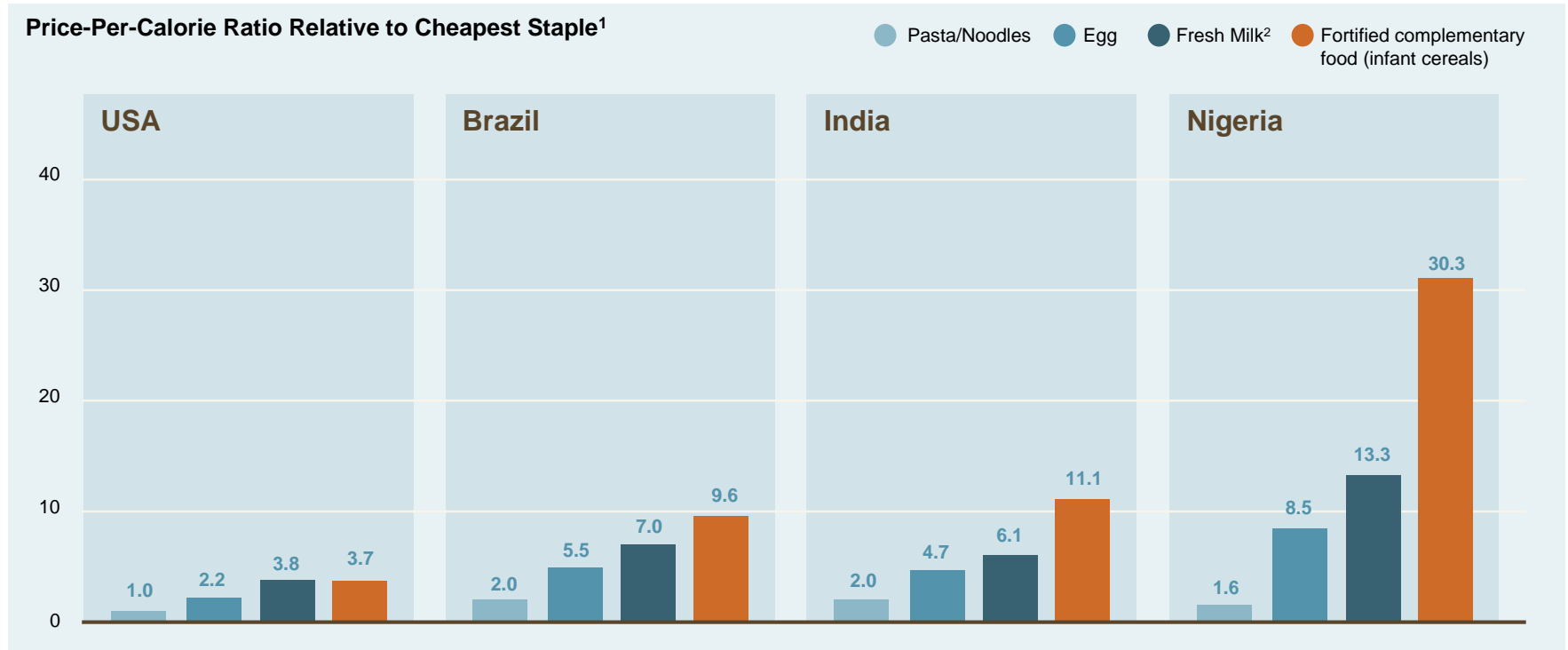
Poor diets are one of the major reasons children experiencing poor growth over the critical 6-23 month window of development



*Consumption recall based on past 24-hours, questions e.g.: Any Commercially fortified baby food like Cerelac, Nutren, Frisolac H, Weatabix, etc.?

POOR HOUSEHOLDS FACE HIGH PRICES FOR KEY FOODS

Diversifying diets is difficult due to high cost of other (nutritious) foods relative to staples

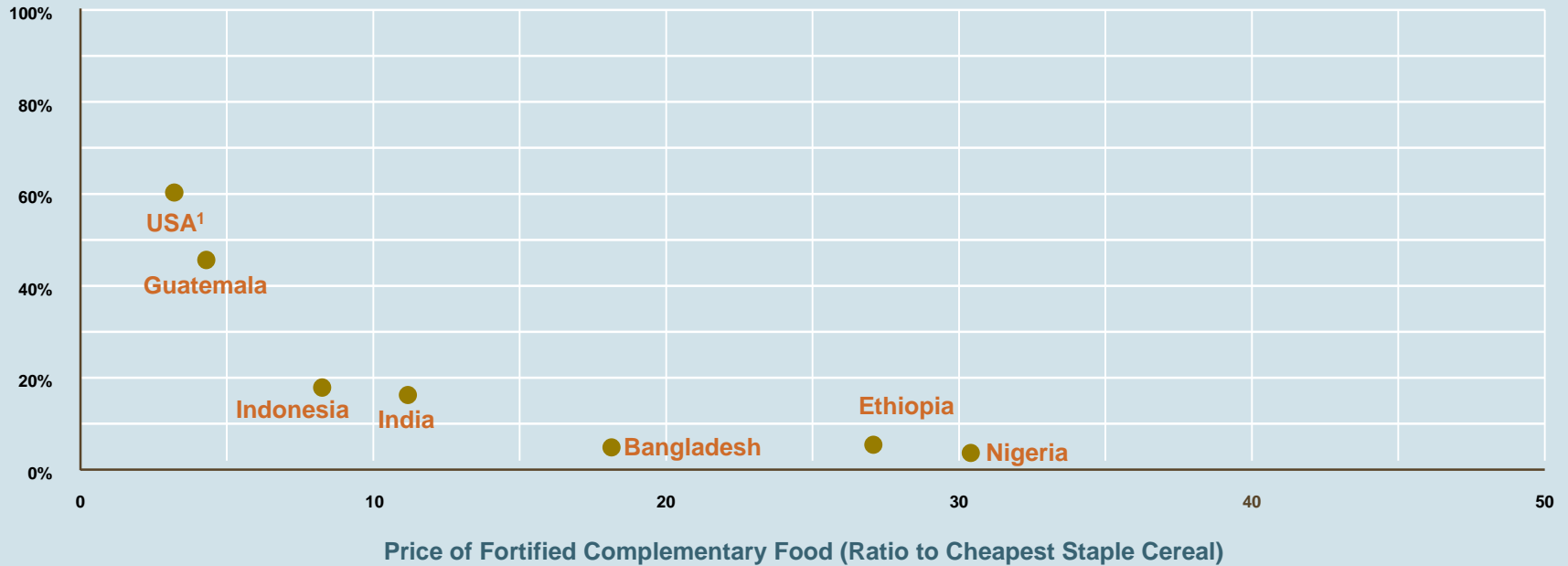


Source: World Bank International Comparison Program (United Nations Statistical Commission) 1. Staple of comparison is rice in India and Brazil, (packaged) bread in the U.S., maize flour for Nigeria. 2. Powdered milk is more consistent across countries, at ~3-5x cheapest cereal in these sample countries

CONSUMERS AND AFFORDABILITY

Increasing relative affordability can increase consumption, but the market fails to make some nutritious foods more affordable

Consumption of fortified complementary foods within last 24-hour period



1) US consumption data does not come from DHS survey, estimate based on expert interviews
Source: World Bank International Comparison Program (United Nations Statistical Commission) with DHS consumption data