

Ted Greiner

When in 1975-1976 I took Michael Latham's introductory and advanced courses in international nutrition at Cornell University, New York, I decided on this as my career direction. It appeared to be a way to make a difference for millions of disadvantaged people in the low-income countries. Because I doubted (and continue to do so) that professionals from rich countries can or should play very active technical roles (other than capacity building), I chose for my master's research an issue where rich countries certainly were the problem: the impact of commercial baby food advertising on infant feeding patterns, conducted in St. Vincent, West Indies.

During the spring of 1977 I lived for a few months in Ghana and my former wife lived in Cote d'Ivoire, as we did a study for FAO on the economic value of breastfeeding in west Africa. It was the most detailed of such studies at the time. Published in 1979 by FAO in English and French, they told me a few years later that it was their 'best seller'. (It was of course sent for free to anyone who requested it).

In 1978-81, with a Rockefeller Foundation grant, I planned, managed and organised a three-part evaluation of a 3-year breastfeeding promotion project in Yemen. This was the topic of my PhD dissertation. In the following decades, the average duration of breastfeeding there doubled in both rural and urban areas. From 1983 to 1985, I returned to Yemen, employed by the ministry of health to help set up its first nutrition unit.

Since then I have worked as a consultant for UN agencies, the World Bank, and others, dealing with a large number of governments and their agencies and with civil society organisations. Much of my work has been concerned with capacity building on policy, programme and research approaches in low-income countries, mostly dealing with maternal and child nutrition, and often specifically with breastfeeding.

From 1985-1994, I was a dedicated full-time consultant to the Swedish International Development Cooperation Agency (Sida) based at Uppsala University's International Maternal and Child Health unit (IMCH). I assisted in planning, follow up and evaluation of their large nutrition portfolio in Asia and Africa, and their support to international breastfeeding non-governmental organisations. Then until 2004 I remained at IMCH as associate professor of International Child Health, running multi-year Sida-funded capacity building programmes for Tanzania and Zimbabwe that strengthened everything from technical nutrition capacity, to accounting, to libraries. Experts from Sweden, the US or the UK provided specific defined services to meet their identified needs and requirements. Sida really does most of its development assistance this way – the budgets are negotiated at a higher level, but ministry departmental officials made most of the decisions on how the money allocated to them would be used.

During this period I continued to do consultancy work, largely with the World Bank and the World Alliance for Breastfeeding Action (WABA). At Uppsala my students' research work focused on public health nutrition issues related to infant feeding, micronutrient malnutrition, and obesity. Most of them came from economically developing countries and did their research in their countries.

During my 19 years at Uppsala University, I made duty travel visits of an average duration of two weeks perhaps 25 times to Tanzania, 20 to Zimbabwe, 15 to Bangladesh (mainly to northern rural areas), 10 to Zambia, 7 to South Africa, 3 to Sri Lanka, 2 to China, and 2 to Yemen. I lived in India most of the time during 1997-1998 working on ICDS projects in three states and travelled there perhaps a dozen other times. Perhaps half of this time in the field was used for planning, follow up, or evaluation of projects and the other half was for capacity building.

During 2001-2002 I spent about 6 months living in Penang, Malaysia helping WABA, mainly in planning the technical components of their forum in Arusha, Tanzania, and the preceding WABA-UNICEF Colloquium on HIV and Infant Feeding, as well as editing the published proceedings from the latter.

From 2004-2008 I worked with the Program for Appropriate Technologies in Health (PATH), largely as director of the Ultra Rice Project (focusing on fortifying rice in China, India, Brazil and Colombia) and in research and advocacy efforts on HIV and infant feeding, largely in Rwanda, Cote d'Ivoire, and Kenya. In 2008 I became professor of nutrition at Hanyang University in Seoul Korea where I teach a wide range of nutrition courses and assist with a number of public health nutrition research studies.

In an unjust world, most of the resources available for combating poverty and malnutrition reside among the poor themselves. However, expecting impoverished populations and communities to pull themselves up by their bootstraps, while they are being held down by health and nutritional problems that sap their energy and inhibit their children from learning, just adds insult to injury.