Malnutrition in Asia

Promoting Child Nutrition in Asia
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Stunted 3 Year Old – Stunted Adult

Average growth from 3-18 years 77 cm

Severe: Height at 3 y = 81.2 cm, Height at 18 y = 158.0 cm
Moderate: Height at 3 y = 85.3 cm, Height at 18 y = 162.5 cm
Mild: Height at 3 y = 89.5 cm, Height at 18 y = 167.3 cm
Well-nourished: Height at 3 y = 94.5 cm, Height at 18 y = 170.9 cm

(Guatemala, INCAP Oriente Study)
Global picture of malnutrition

• Over 162 million children under 5 are stunted (too short for their age)

• 51 million children are wasted, 17 million severely wasted – (too thin) - and require special treatment; they are at high risk of death

• At the same time, 44 million children are overweight and at risk of chronic illness such as diabetes

• 2 billion people are deficient in key vitamins & minerals.
Very high rates of stunting in South Asia
Stunting prevalence still of “public health significance” (>20%) in 12 East Asia-Pacific countries

Ref: UNICEF database reflecting national surveys in the year shown such as DHS, MICS, national nutrition surveys or living standards surveys.
How many stunted children are there in Asia?

106 million, two-thirds of developing world total of 162 million

India (48%); 57'878'880
Pakistan (44%); 9'678'240
Bangladesh (41%); 6'180'340
Afghanistan (59%); 2'928'760
Nepal (41%); 1'223'440
Sri Lanka (17%); 24'140
Bhutan (59%); 1'223'440

78 million stunted children in South Asia

Source: UNICEF 2014, State of the World's Children (brackets refer to the prevalence of stunting)
How many stunted children are there in Asia?

28 million stunted children in East Asia-Pacific

Source: UNICEF 2014, State of the World’s Children (brackets refer to the prevalence of stunting)
How fast are countries reducing stunting?

South Asia

Annual percentage points of decline in stunting

3.9% annual reduction required to achieve the global target of 40% fewer stunted children
How fast are countries reducing stunting?

East Asia

Annual percentage points of decline in stunting

- Thailand: 0.33
- Malaysia: 0.34
- Philippines: 0.46
- Timor: 0.50
- Laos: 0.52
- China: 0.75
- Indonesia: 0.83
- Mongolia: 1.01
- Myanmar: 1.03
- Cambodia: 1.34
- Global average: 1.8
- Viet Nam: 2.28
- DPRK: 2.57

Percentage points
How many children are expected to suffer from severe wasting each year?

*Almost 24 million in 6 countries in South Asia*

- India: 18,127,548
- Pakistan: 3,105,704
- Bangladesh: 1,600,000
- Afghanistan: 494,709
- Nepal: 178,245
- Sri Lanka: 101,245

Coverage of treatment was 1.4% in 2013 (340,000 children): huge gap!
How many children are expected to suffer from severe wasting each year?

4.3 million annual cases in the 10 countries with treatment programmes in East Asia

- Indonesia: 2,995,379
- Philippines: 528,531
- Myanmar: 216,335
- Vietnam: 201,475
- PNG: 138,234
- Laos: 136,406
- DPRK: 20,918
- Mongolia: 5,048
- Timor-Leste: 30,911
- Cambodia: 99,505

Reported coverage of treatment only ~ 0.8% in 2013 (33,000 children) in the 10 countries
Anemia has multiple causes, not limited to inadequate iron and other micronutrient intake.

Other causes of anemia include worm infestation, malaria, other infections and genetic blood disorders.
Breastfeeding practices in South Asia

Ref: UNICEF database. Source of data is national surveys such as DHS, MICS, national nutrition surveys. Date of survey is shown; if different surveys for the two indicators, first date is for early initiation and second is for EBF.
Breastfeeding practices in East Asia: only 4 countries have met global target

Ref: UNICEF database. Source of data is national surveys such as DHS, MICS, national nutrition surveys. Date of survey is shown; if different surveys for the two indicators, first date is for early initiation and second is for EBF.
Success story: Stunting reduction in Maharashtra State, India

Success factors:
• Improvement in infant and young child feeding, care for women before and during pregnancy, & access to health and sanitation, focus on most deprived
• High level political commitment
• Continuity of leadership: 10 years
• Multi-sectoral response
• Addressing child malnutrition cannot be the agenda of one department-It should have political buy in, through citizens’ alliance with MPs from all parties, business leaders, media, NGOs, activists and development partners.

Annual average rate of reduction: 6.7%
Maharashtra: Findings from the stakeholder analysis

Perceptions about why stunting has declined

• Strong economic growth
• Improved social, nutrition and health programming (especially the NRHM—ANC, skilled birth attendant, early initiation of breastfeeding)
• State’s Nutrition Mission seen as a key way of making nutrition visible
• Increased state budget allocations to nutrition
• Strong media and civil society
• Strong focus on frontline worker strengthening in nutrition and health
• Introduction of community management of severe acute malnutrition in Village Child Development Centres
• Yet to be resolved: poor access to sanitation and improved water, tribal inequalities, urban poverty
Success story: Stunting reduction in Nepal

Combining health and nutrition interventions at facilities and in communities:

- Delivery of interventions through community-based programming facilitated by the nation’s cadre of female community health volunteers (FCHVs) located throughout the country.
- Improved coverage of safe motherhood programmes, iron-folic acid supplementation to all pregnant women and breastfeeding mothers, deworming, maternal care and child survival interventions.
Success story: Breastfeeding in Cambodia

- **2000**: Annual breastfeeding event – now one month each year
- **2004**: Baby-friendly community initiative – now covers over 2,500 villages in 12 provinces
- **2004**: Broadcast of TV & radio spots focusing on early initiation & exclusivity; continuing promotion
- **2005**: Sub-decree banning promotion of formula for children < 2 years

![Graph showing breastfeeding rates from 2000 to 2010]
Bangladesh: change in breastfeeding is evident when efforts intensified

Modalities for intensification

- Household level
  - Home visits to support mothers
- Community level
  - Groups, forums
  - Dialogue
- National level
  - Coordination
  - Mass media
  - Advocacy
  - Partnerships

Exclusive breastfeeding rate

Source: BDHS 2011
Key messages

• Prevalence of stunting remains unacceptably high despite economic and development progress
• Largest burden of stunting and wasting is in Asia
• Stunting reduction is possible to accelerate in a relatively short time
• And success is possible in improving breastfeeding rates.
• Strong political commitment is essential to scaling up effective programmes
THANK YOU!