

## Progress for Children: A Report Card on Child Nutrition Key Findings

- Despite humanitarian promises and appeals, the proportion of underweight children in developing countries has declined only slightly in the last 15 years – falling just five percentage points since 1990.
  - One in four children under five is underweight (27% in developing countries, or 146 million). Nearly half live in just three countries: India, Bangladesh and Pakistan. This situation underlies the deaths of about 5.6 million children under five every year.
  - Lack of progress on child nutrition is crippling other critical development efforts to control disease, boost education rates and spur economic progress for current and succeeding generations.
  - All but two regions of the world are unlikely to meet the first Millennium Development Goal (MDG) target to halve the world's proportion of underweight children under five by 2015.
  - The worst-performing region is South Asia, with staggeringly high underweight prevalence rates of 46%. Half of all the world's underweight children live here. Bangladesh (48%), India (47%) and Nepal (48%) have the world's highest national underweight tallies – on a par with Ethiopia.
  - In this region, insufficient quantity of food is less to blame for child undernutrition than poor food quality and safety, women's low social status, early marriage leading to low birth weights and poor sanitation causing energy-draining diarrhoeal diseases.
  - The Latin America and the Caribbean region is on track, with underweight prevalence at just 7% and an Average Annual Reduction Rate (AARR) of 3.8% between 1990 and 2004<sup>1</sup>.
  - The East Asia and the Pacific region - with underweight rates at 15% and an AARR of 3.6% - is only on track due to the success of China.
  - China's success story stands out – a giant leap to reduce underweight prevalence rates by more than half, from 19% in 1990 to 8% in 2002. At the same time, China's child mortality rates have also declined from 49 per 1000 births to 31 per 1000. The virtual elimination of iodine deficiency has boosted the brainpower of China's children. However, the poor still face grave nutrition problems in remote areas.
  - Over one quarter of all African children under five are underweight for their age – a catastrophe for African development. In famine-prone Eastern and Southern Africa, underweight prevalence has remained static since 1990 and the actual number of underweight children has increased. Population growth, a decline in agricultural production, conflict, drought and HIV/AIDS have all played a role. West and Central Africa has seen a slight improvement from 32% to 28%, alongside a rise in breastfeeding rates.
  - In the Middle East and North Africa, undernutrition rates in large population countries Iraq, Sudan and Yemen have been getting worse since 1990.
  - In the industrialized world social inequalities are rising, and significant undernutrition rates can still be found in minority groups. Obesity is also becoming a major public health problem.
  - During emergencies, undernutrition can set in swiftly and threaten lives. An improved international response to high-profile emergencies has reduced undernutrition-related deaths. But millions of children living in longstanding emergency conditions face extreme nutrition deprivation, and need more attention.
  - Reaching the MDG on reduction of global underweight rates would transform the lives of millions of children in the decade ahead. There is still time to achieve this - but it cannot be accomplished with emergency food deliveries alone.
  - Programmes to address micronutrient deficiencies (such as universal iodization of salt and vitamin A supplementation) have been shown to deliver spectacular results. Promoting exclusive breastfeeding is one of the most powerful tools available to ensure good nutrition in early childhood and beyond.
  - Pregnancy and the first two years of life are the most critical to safeguard human potential. Children undernourished during this development stage may never fully recover.
  - We will only make progress when child nutrition becomes central to global and national development policies and budgets - to provide support to communities, with a special focus on the youngest and poorest.
  - Policies to safeguard child nutrition must be linked with better nutrition knowledge in families and communities, as well as other basic health services like disease control, safe water and basic sanitation, and backed up by adequate emergency planning and response.
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