One billion people in the world suffer from chronic hunger. Two thirds of them live in Asia. This is a crisis with devastating and far-reaching effects, which is robbing millions of children of their full potential for growth and development. The European Union (EU) and the United Nations’ Children’s Fund (UNICEF) have joined forces to improve nutrition security.

**NUTRITION SECURITY** is more than just food security. It is the outcome of good health, a healthy environment, and good caring practices. However, despite good economic growth in several Asian countries, there has been insufficient progress in reducing undernutrition in recent years.*

- More than a third of children under 5 years of age in East and South Asia are stunted: they are too short for their age because of long-term insufficient nutrient intake and frequent infections. The physical and mental damage caused by stunting is largely irreversible after two years of age. Poor foetal and young child growth negatively impacts a child throughout his life, resulting in poorer academic achievement, reduced earnings, and increased risk of disease.
- Eighteen per cent of babies are born with a birth weight that is too low.
- Twenty-seven per cent of under-fives weigh too little for their age. This is a general reflection of undernutrition.
- Thirteen per cent of under-fives are wasted, meaning that they rapidly lose weight because of illness or lack of food.
- Nearly half of pregnant women and preschool children are anaemic. Anaemia in pregnancy can lead to low birth weight and other poor pregnancy outcomes, while anaemia in young children negatively effects their mental and physical development.

These figures can be even higher in, or even within, some countries.

*Sources:
WHO, Global Database on Anaemia – 2008
Ensuring adequate nutrition during the critical ‘1000 days window of opportunity’ from pregnancy to age two can prevent long-term and irreversible damage to children’s health and cognitive and physical development. Improving nutrition is a necessity for achieving the Millennium Development Goals. MDGs 1, 4 and 5 will not be reached unless the nutrition of women and children is prioritised in national development programmes and strategies.

The EU-UNICEF Maternal and Young Child Nutrition Security Initiative in Asia
To help fight the widespread and growing problem of undernutrition in Southeast and South Asia, the EU and UNICEF have launched the Maternal and Young Child Nutrition Security Initiative in Asia (MYCNSIA) to improve nutrition security among women and young children in the region.

The MYCNSIA initiative is supporting five Asian countries – Bangladesh, Indonesia, Lao PDR, Nepal and the Philippines – under a four-year programme (2011-2014). These countries bear a heavy burden of child undernutrition, yet they are able to build on existing nutrition programmes, and develop and manage new Infant and Young Child Feeding (IYCF) and maternal nutrition programmes.

What the MYCNSIA does:
- Improve child survival, growth and development during the first ‘1000 days window of opportunity’ including pregnancy
- Help to put in place pro-nutrition policies in a wide range of sectors
- Strengthen capacities and information systems
- Scale up high-impact interventions for women and children

To achieve this, UNICEF will work with governments and partners targeting 30 million children and five million pregnant and lactating women in the five Asian countries. The EU has provided a €20 million grant as a vital contribution to a wider multi-donor initiative, and is playing a strong leadership role.

Good nutrition begins with exclusive breastfeeding for first 6 months of life.
role in bringing together governments, NGOs and international organisations in the fight against undernutrition.

This sound investment for the future will contribute greatly to sustainable development as well as children’s health and education.

Building Multi-sector Partnerships
Sustained improvements in nutrition require coordination at the national, regional and global levels. Coordinating multiple sectors, including health, education, agriculture and water and sanitation, around nutrition must be a priority for governments and development partners. The initiative operates at four levels:

REGIONAL LEVEL:
- Inform policy dialogue, strengthen knowledge, and support policy development on nutrition security
- Promote integration between relevant sectors (e.g. health and agriculture)
- Build on existing coordination mechanisms in partnership with REACH (WHO, WFP, FAO and UNICEF) as well as other regional initiatives such as the South Asia Food and Nutrition Security Initiative (SAFANSI), and institutions such as the Association of Southeast Asian Nations (ASEAN) and the South Asian Association for Regional Cooperation (SAARC)

NATIONAL LEVEL (BANGLADESH, INDONESIA, LAO PDR, NEPAL, PHILIPPINES):
- Communication and counseling for Infant and Young Child Feeding (IYCF)
- Promote consumption of locally produced micronutrient-rich foods
- Distribute and promote the use of micronutrient powders
- Training of Trainers (TOT), allowing to train and equip thousands of community level IYCF counselors
- Help local and national institutions with data analysis and interpretation → stronger evidence base → better informed national policies and programmes

The Four Pillars of the Initiative

1. Up-Stream Policy & Nutrition Security Awareness. Adoption of a harmonised framework of goals, targets, policies, strategies and tools by regional institutions and their respective Member States.

2. Capacity Development. Enhanced capacities at all levels to address maternal and child undernutrition in collaboration with national and regional institutions through a strong nutrition community network.

3. Data Analysis & Knowledge Sharing. Strengthened nutrition security information systems, data collection and analysis including monitoring and evaluation with effective mechanisms for knowledge sharing and management.

4. Scaling Up Interventions. Improved infant, young child and maternal nutrition through at-scale implementation of key direct interventions.
For example, the initiative in Nepal will contribute to finalising and implementing the Multi-Sectoral Nutrition Plan. In the Philippines, a focus will be on developing IYCF support centers for working mothers, and ensuring the distribution of fortified rice to vulnerable populations. In Indonesia, cash transfer programmes will link poor families to improved community nutrition services. In Laos, micronutrient powders and use of improved IYCF counseling tools will help to improve feeding practices and the quality of food for young children. In Bangladesh, one aspect of the programme will strengthen the routine health monitoring system by making nutrition indicators available in real-time.

The presence of the initiative in each of the targeted countries creates opportunities for cooperation and pooling of resources to support national coordination, and scaling-up of efforts that accelerate the reduction of maternal and child undernutrition. Strengthening capacity of local and national institutions in data analysis and interpretation will contribute to a stronger evidence base, which will in return provide the basis for better informed national policies and programmes.

DISTRICT LEVEL:
The programme aims to strengthen capacity for nutrition planning and coordination. Training will target managers of various sectors, strengthening their skills for planning, implementing and supervising nutrition programmes as well as coordinating nutrition-related activities across multiple sectors.

HOUSEHOLD LEVEL:
The range of activities mentioned above will enable households to have better access to resources (e.g. livelihood and social transfer programmes) and nutrition services, and better knowledge and skills to protect the health and provide adequate food for pregnant women and young children.
The initiative will include a large number of actions and practices that have already proven their worth and are highlighted in the Lancet Series, and by the World Bank and the Scaling Up Nutrition (SUN) movement.

**Promote good nutritional practices**
- Exclusive breastfeeding for first 6 months of life
- Appropriate complementary feeding for children aged 6-23 months
- Improved hygiene practices, including hand washing

**Increase intake of vitamins and minerals**
- Multiple micronutrient powder for children aged 6-23 months
- Iron-folic acid/multiple micronutrient supplements for pregnant and lactating women
- Iron fortification of staple foods
- Therapeutic zinc supplements for diarrhoea management
- Periodic vitamin A supplements
- Salt iodisation

**Therapeutic feeding for malnourished children with special foods**
- Prevention or treatment of moderate undernutrition
- Treatment of severe acute undernutrition with ready-to-use therapeutic foods (RUTF)

**Link nutrition to agriculture, poverty reduction, and water and sanitation**
- Encouragement of home production of foods and animal products rich in nutrients
- Inclusion of nutrition services in social protection and cash transfer programmes
- Better access to safe water and improved sanitation facilities
