A CHANGING WORLD

It is twenty years since *The State of the World’s Children* last examined children’s nutrition, and, in that time, much has changed.

We have changed where we live: more families have left behind the countryside and moved to cities.

We have changed our roles: women are increasingly joining the formal workforce, balancing work responsibilities with their role as primary caregivers, and often with little support from families, employers and societies.

Life on our planet has changed: climate change, the loss of biodiversity, and environmental damage now raise concerns over whether we can feed this generation of children sustainably, never mind the generations to come.

And we have changed what we eat: we are leaving behind traditional diets and embracing modern diets that are frequently high in sugars and fats, low in essential nutrients.

This is the backdrop to children’s malnutrition today. Like so much else, it, too, is changing. A word once inextricably linked in the public’s mind to images of hunger and famine, *malnutrition* must now be used to describe children with stunting (short stature for age) and wasting (low weight for height), but also those suffering from the ‘hidden hunger’ of deficiencies in essential vitamins and minerals as well as the growing numbers of children and young people who are affected by overweight or obesity.

These are the children who are *not* growing well.

Their numbers are worryingly high. Globally, one in three children under the age of 5 is stunted, wasted or overweight and, in some cases suffers from a combination of two of these forms of malnutrition. In South Asia it is one in two.

The triple burden of malnutrition

*Undernutrition* continues to affect tens of millions of children. Its presence is visible in the stunted bodies of children deprived of adequate nutrition in the first 1,000 days and beyond. These children may carry the burden of early stunting for the rest of their lives and may never meet their full physical and intellectual potential. Undernutrition is also evident in the wasted bodies of children when circumstances like food shortages, poor feeding practices and infection, often compounded by poverty, humanitarian crises and conflict, deprive them of adequate nutrition and, in far too many cases, result in death. In 2018, 149 million children under 5 were stunted and almost 50 million were wasted.

In South Asia, 58.7 million children under 5 were stunted and 25.9 million were wasted.

Deficiencies of essential vitamins and minerals – *hidden hunger* – rob children of their vitality at every stage of life and undermine the health and well-being of children, young people and mothers. The numbers of children and women affected by various forms of hidden hunger are striking. Recent global estimates by UNICEF and partners indicate that at least 340 million children under 5 (one in two) suffer from hidden hunger.
The number of girls and boys with obesity between the ages of 5 and 19 have soared since the mid-1970s, rising by between 10- and 12-fold globally. **Overweight and obesity**, long thought of as conditions of the wealthy, are now increasingly a condition of the poor, reflecting the greater availability of ‘cheap calories’ from fatty and sugary foods around the world. They bring with them a heightened risk of non-communicable diseases, like type 2 diabetes. Analysis carried out as part of the Global Burden of Disease study suggests that diets lacking adequate nutrition are now the leading cause of death worldwide.

**Surviving, but not thriving**

More children and young people are surviving, but far too few are thriving.

To understand malnutrition today requires a focus on food and diet at every stage of a child’s life. The picture that emerges is a troubling one: **Far too many children and young people are eating too little healthy food and too much unhealthy food.**

These problems start early on: In their first six months, only two out of five children are being exclusively breastfed globally (in South Asia the figure is 54 per cent) depriving them of the best food a baby can get. When it comes to the ‘first foods’ that infants should start consuming at around the age of 6 months, these too are, in far too many cases, not meeting children’s needs: Less than one in three children worldwide and only one in five in South Asia between 6 and 23 months are eating foods from the minimum number of food groups that can support their rapidly growing bodies and brains. For the poorest children, the proportion globally falls to only one in five.

**Making food systems work for children**

At current levels, the impact of food production on the environment will only grow, with food demand set to increase by at least half by mid-century. This demand will have to be satisfied against the backdrop of a world that, after decades of decline, is seeing a slow rise in hunger, with 820 million people worldwide suffering from undernourishment in 2018.

Understanding how food systems work is essential to improving our diets. But far too often, the interests of a very important group of people are left out of food systems analysis – children. This is a dangerous omission. Poor diets have lifelong impacts on children’s physical growth and brain development. That is why they must be at the heart of our thinking about food systems. If food systems deliver for children, they are delivering for us all.

Good nutrition can break the intergenerational cycles through which malnutrition perpetuates poverty, and poverty perpetuates malnutrition. Children who are well nourished have a firm foundation from which they can develop to their full potential. And when children do that, societies and economies develop better, too.

Our goal must be to give children diets that are **nutritious, safe, affordable** and **sustainable**.
Where are children not growing well?

FIGURE 1 | Prevalence of children under 5 who are not growing well (stunted, wasted or overweight), South Asia

Note: Country data are the most recent available estimate between 2006 and 2018; where only data prior to 2000 are available, the dark grey color denoting no recent data is used. The designations employed in this publication and the presentation of the material do not imply on the part of the United Nations Children’s Fund (UNICEF) the expression of any opinion whatsoever concerning the legal status of any country or territory, or of its authorities or the delimitations of its frontiers.

‘Growing well’ is defined as free from stunting, wasting and overweight.

What are young children eating?
The importance of first foods

FIGURE 2 | Percentage of children aged 6–23 months fed food groups, by type, South Asia, 2018

- Breastmilk: 82%
- Grains: 73%
- Dairy: 52%
- Vitamin A rich fruits & vegetables: 37%
- Other fruits & vegetables: 26%
- Eggs: 14%
- Flesh foods: 14%
- Legumes: 13%

Only 25% of children in South Asia are being fed much-needed nutrients from animal source foods.

56% of children in South Asia are not fed any fruits or vegetables.

When children start eating soft, semi-solid or solid foods at 6 months old, they need nutritious and safe diets with a range of nutrients to grow well.

Without enough diversity in children’s diets, they may not get enough nutrients to grow well, which can take a devastating toll on children’s bodies and brains. UNICEF and WHO recommend that children at this age eat a minimum of five of eight food groups.

FIGURE 3 | Percentage of children aged 6–23 months eating at least 5 of 8 food groups (Minimum Dietary Diversity), by country 2018

4 in 5 children do not eat foods from the minimum number of food groups in South Asia.

 FIGURE 4 | Percentage of children aged 6–23 months fed food groups, by type and age, South Asia, 2018

Children 6-11 months are eating less diverse diets compared to children 12–23 months.

Note: The regional and global estimates were generated using the most recent data available for each country between 2013 and 2018. UNICEF regional and global estimates are population weighted averages using the 2018 estimates from the World Population Prospects, 2019 revision as weights.

Climate change threatens child nutrition in Bangladesh

Over 19 million children spread across Bangladesh are at the front line of climate change disasters – a quarter of them under 5. Floods and riverbank erosion are driving families to city slums, where they face overcrowding and a lack of access to adequate health and nutrition services, adequate nutritious food especially during first 1,000 days, education, sanitation, hygiene and safe water. In slums, children must often fend for themselves and are at greater risk of malnutrition, child labour, child marriage and exposure to pollution, violence and abuse.

Extreme climatic events such as drought and flash floods cause severe agricultural losses. In a country where 60 per cent of the population counts on agriculture for their livelihood, this means children from the poorest families are most likely to go hungry. The reduced production also leads to an increase in food prices, hitting the poorest families the hardest.

A rise in communicable and noncommunicable diseases linked to changing climate conditions and unplanned urbanization also threaten children and their families. These include diarrhea, hepatitis A, cholera, dysentery, typhoid, dengue and chikungunya fever.

Ruma, her husband, Ali Akbar, and their two children, Sunjida, 3, and Shahaun, 9, moved to the Chalantika slum of Dhaka after their home was repeated flooded by the Meghna River. “At least we can stand on dry ground here even if we struggle with the cost of living,” she said. “My husband earns about 7,000 Taka ([US$83]) a month. By the time we have paid our rent and bought our groceries there is very little left over. But at least we are able to earn here, which we often weren’t able to do when we lived in the countryside.”

Ruma shares a small kitchen – a few planks of wood atop bamboo poles set in a swamp – with at least 10 other families. While they initially used butane gas, this proved impossible to share equitably. Wood is now preferred, further worsening the slum’s air quality. Her family eats rice and lentils most days, she says, and can occasionally afford meat or fish. Her son, Shahaun, is showing signs of malnourishment.

In addition to the arduous challenge of trying to provide her family with healthy food, Ruma describes an unhealthy environment with no access to safe water, basic toilets or adequate hygiene. Electricity in the slum is irregular, and rodents and insects in their single room “make our lives an absolute misery,” she says.

The Government of Bangladesh will begin the second phase of its Climate Change Strategy and Action Plan this year, placing greater emphasis on the needs of the poorest and most vulnerable and demanding more attention and resources to ensure that child nutrition, health, education, social protection, and other services are shielded from the effects of climate change.
An agenda to put children’s nutrition first

This agenda is driven by two imperatives. First, children have unique nutritional needs and can suffer unique harm from malnutrition. Putting children’s needs first is key to ensuring that every child and young person has the nutrition they need to get the best start in life. Second, all children and young people will need nutritious, affordable and sustainable diets if societies are to meet the economic, social and environmental challenges of our changing world in the 21st century.

1 | Empower families, children and young people to demand nutritious food

Demand affects supply as food producers respond to consumers’ behaviours and aspirations. When healthy options are affordable, convenient, and desirable, parents and caregivers make better food choices for children. As children grow older, knowledge and information can make them powerful agents of change. Stimulating demand for nutritious foods means not only educating consumers on the benefits of healthy diets, but also leveraging cultural and social aspirations.

2 | Drive food suppliers to do the right thing for children

Demand alone is not enough: Healthy food must also be available, affordable, safe, and convenient. Food producers and suppliers have a key role to play, and so do governments, which must create a level playing field for all producers and suppliers, ensuring their actions align with children’s best interests. Food systems are diverse, and so are solutions. But all food production and consumption must become sustainable if we are to protect children’s nutrition today and tomorrow.

3 | Build healthy food environments for all children

The personal and external food environments are where children and their caregivers interact with the food system. While the forces of supply and demand shape food environments, context-appropriate actions such as mandatory front-of-pack labelling and protection against exploitative marketing and mandatory labelling can help create food environments conducive to nutritious diets for children.

4 | Mobilize supportive systems to scale up nutrition results for every child

As well as food systems, four other key systems must be mobilized to deliver nutrition services, improve nutrition practices and achieve nutrition outcomes at scale. The health, water and sanitation, education and social protection systems must all deliver interventions in a coordinated fashion. A systems approach to children’s nutrition can help ensure that children and families have access to healthy diets and that children receive the nutrition services they need to develop to their full potential.

5 | Collect, analyse and use good-quality data and evidence regularly to guide action and track progress

Lack of adequate data prevents governments from responding with effective policies, strategies and programmes. Accurate and timely data is needed to understand malnutrition, take coordinated, evidence-based action, and hold all actors accountable. Data collection methods and frequency must be transformed to expand what we know about the diets and nutrition of children, adolescents and women at every stage of life. Data systems must become responsive and develop a culture of data sharing and transparency.
What do adolescents and young mothers think about nutrition and eating habits?

“Our economic condition is poor and we don’t have access to healthy food. We know vegetables are good but we don’t have access to [them].”

–Girl, 14 years old, Afghanistan

“We are not able to eat healthy food because we have already tasted junk food and now attracted to that only.”

–Boy, 14 years old, India

“Financial problems and markets far from home makes it difficult to properly feed my child.”

–Mother, 19 years old, Bangladesh

“Shops are far, we have to go far off, and that is why family members are not able to bring food items.”

–Mother, 25 years old, India