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 and wasting, 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 5 is stunted, wasted or overweight and, in some cases suffers from a combination of two of these forms of malnutrition. In West and Central Africa, the number rises to two in five, with half of children in the Democratic Republic of the Congo not growing well.

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 West and Central Africa, 28.9 million children under 5 were stunted and 7.9 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. In the Western Africa UN sub-region 67% of children under 5 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 suggest 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, (34% are exclusively breastfed in WCAR) 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: More than three in four children in West and Central Africa between 6 and 23 months are not eating foods from the minimum number of food groups to support their rapidly growing bodies and brains.

Consumption of sugary and savoury snack foods is also of concern given their wide availability, promotion and potential to replace nutritious foods. Research shows up to 46 per cent of African children consumed these snacks food in their second year of life – with up to 58 per cent reported in Senegal.

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), West and Central Africa Region, (WCAR)

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

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.

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<tr>
<th>Country</th>
<th>Grains</th>
<th>Dairy</th>
<th>Other fruits &amp; vegetables</th>
<th>Breastmilk</th>
<th>Vitamin A rich fruits &amp; vegetables</th>
<th>Flesh foods</th>
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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.

How local solutions saved Louise’s life

Little Louise Traoré has been through a lot in her short life. But with the support of her grandmother, uncle and members of her community and UNICEF in Guinea, the 4-year-old is now growing up strong and healthy.

Louise Traoré was just four months old when both her parents died. It was a tragic loss for the little girl, who was healthy and had been exclusively breastfed by her mother. After her parents died, Louise went to live with her paternal grandmother, Elisa Nialé, in Bossou, a rural town in Guinea’s southeast N’Zérékoré region.

To help her grandmother cope, Louise’s young uncle Michel Bonimya dropped out of high school and took on farm and other work. But despite Elisa and Michel’s combined efforts, the little girl’s health deteriorated.

It was Yarama Male, a community health worker, who recognised what was wrong. During a household visit, she spotted that little Louise was suffering from malnutrition as a result of a poor diet.

“My mission is to monitor children under 5 and pregnant women for the implementation of essential family practices, including infants and young children feeding,” Yarama explains. “One day, I was visiting this household and found Louise in a worrying condition. I referred her to the health centre for treatment and care.”

While Louise was being treated, a local non-governmental organization, Centre d’Etude et d’Appui au développement (CEAD), taught her grandmother how to prepare nutritious and age-appropriate meals based on locally available foods, including first foods specifically adapted for infants and young children under 24 months. When Louise got back home, her grandmother was able to provide her with a diet of nutritious complementary foods based on local products.

UNICEF in Guinea supports training and the provision of equipment to women’s groups to prepare high-energy, protein-based complementary meals based on local products. Participants who have benefited from this support pass on their knowledge to other women through practical cooking sessions organized at the community level. The result is that community members integrate these good practices into their daily cooking habits.

To the deep relief of her grandmother and uncle, Louise has now fully recovered.

“After the death of my older brother, things were not easy for us,” says Louise’s uncle Michel. “Thanks to UNICEF’s support through its programme for children affected by malnutrition, today Louise is healthy. As for me, I will be able to return to school next year.”
An Agenda to Put Children’s Nutrition First in West and Central Africa

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 in the region are to meet the economic, social and environmental challenges of our changing world in the 21st century. A comprehensive approach to improve access to and use of nutritious, safe, affordable, and sustainable diets for children in the region with a focus on young children is needed. This comprehensive approach will require actions at all levels, and across health, water and sanitation, education and social protection systems, as well as the food system which is critical.

1 | Empower families, children and young people to demand nutritious food, in the first two years of life and beyond

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. What, when and how children eat is more important during the first two years than at any other time in life. Children who are fed the right foods, in the right way and at the right time in their development are more likely to survive, grow, develop and learn. As children grow older, knowledge and information can make them powerful agents of change. Stimulating demand for nutritious foods means not only raising awareness of 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 and promote locally-produced complementary foods

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 with a focus on improving the availability and accessibility of complementary foods for young children. Food systems are diverse, and so are solutions. But all food production, including the local production of complementary foods, and consumption must become sustainable if we are to protect children’s nutrition today and tomorrow. Enhancing the local production of high-quality complementary foods can serve as an entry point for community-led integrated resilience and nutrition programmes that include the improvement and affordability of available foods through agricultural production, nutrition activities, women empowerment and income generation as well as micro-credit and social safety net transfers.

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. In the region, the development of a business model and standards for the local production of complementary foods is a priority.

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, including in the first two years of life. Evidence also suggests that empowering women improves nutrition for the entire family. It is important to support women and adolescent girls develop their capacity on areas such as managing small businesses, accounting and reporting.

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

Lack of adequate data prevents governments and regional institutions 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 for decision-making in the region.
What do adolescents and young mothers think about nutrition and eating habits?

“[Healthy foods] are expensive...The money you have is not enough for buying them.”

–Boy, 15, Ghana

“Some do not like the taste of healthy food and some parents do not know where to purchase healthy food.”

–Girl, 15, Nigeria

“Sometimes... you have the money, but you don’t have the food stuff to buy.”

–Mother, 26, Ghana

“She [unavailability of healthy foods] outside the home is a problem for me.”

–Mother, 19, Ghana