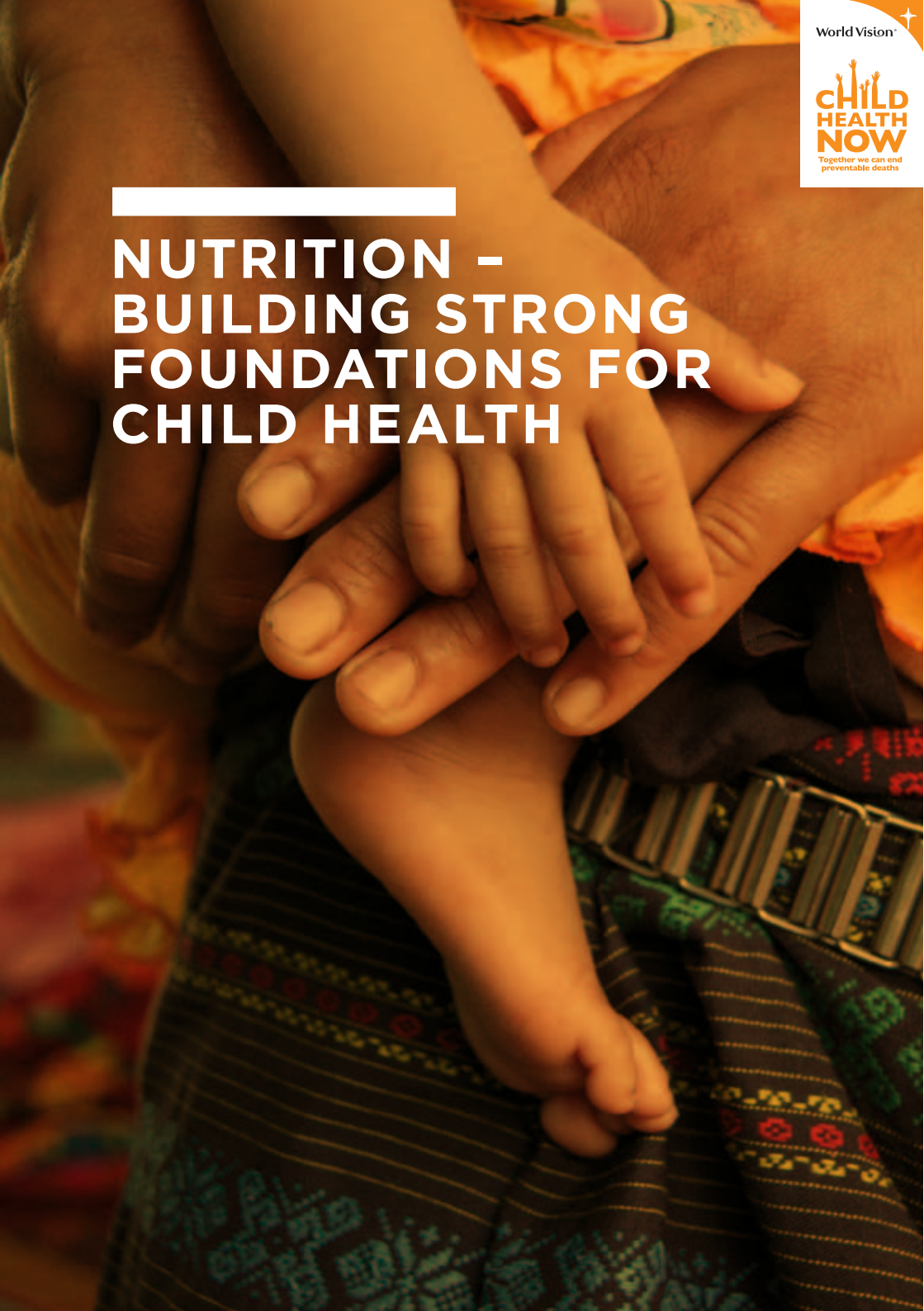



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# NUTRITION - BUILDING STRONG FOUNDATIONS FOR CHILD HEALTH





**Scaling up nutrition is critical. We must all work together to see progress in the fight against undernutrition and its contribution to millions of preventable child deaths.**

Kevin Jenkins, President and CEO,  
World Vision International

**Cover photo /**  
Le Thiem Xuan

The hand of Ho Thi Hung (one year old, Van Kieu ethnic minority) and the hand of her mother, Mrs Ho Thi Nui, who has breastfed her child applying what she learned from nutrition training in Huong Phung Commune, Quang Tri Province, Vietnam.

**Photo /** Hasanthi Jayamaha



## KEY MESSAGES

### **PUTTING CHILDREN, FAMILIES AND COMMUNITIES AT THE HEART OF EFFORTS TO SCALE UP NUTRITION**

An unprecedented opportunity exists to address one of the world's biggest health challenges, child undernutrition. The failure to provide adequate nutrition for all children is not just a moral outrage, but also a fundamental violation of children's rights, including the most basic right to survive. One third of the annual eight million under five child deaths is directly attributed to undernutrition. In response to the need for urgent and sustained action, World Vision is firmly committed to the challenge of scaling up nutrition, alongside national and donor governments, international agencies, civil society, communities, academics and the private sector.

Nutrition is critical for the health and wellbeing of children, communities and countries. Evidence tells us that undernutrition can significantly affect the development potential of a nation, but in many countries the political will and resources needed to turn knowledge about the burden of undernutrition into action is still lacking. Undernutrition

carries development and cost burdens for countries because of its debilitating effects on productivity and cognitive development, and its links to recurring illness, infection, and mortality, especially in young children.

Overall, children's nutritional status worldwide has improved since 1990. The percentage of underweight children is estimated to have declined from 25% in 1990 to 16% in 2010, and stunting in children under five has decreased globally from 40% to 27% over the same period. But 104 million children are still underweight and the World Health Organisation projected an increase in stunted children in Africa from 45 million in 1990 to 60 million in 2010.

Global progress on undernutrition is at risk of being reversed in the coming years due to the global economic downturn, rising food prices, climate change and severe under-resourcing. Without scaled up nutrition interventions, it will be extremely difficult to achieve the Millennium Development Goals to reduce hunger and improve maternal and child health.

Reducing child undernutrition requires political will, increased resources and coordinated action at the family and community level, as well as at the national, regional and global level. There

must be stronger focus on accountability for resources and results at every level.

The Scaling Up Nutrition movement aims to address these challenges by bringing together a wide range of stakeholders at all levels – to improve nutrition outcomes amongst particularly vulnerable and critical populations: pregnant women and children under two.

The 1,000 day period from pregnancy to 24 months of age is a crucial window of opportunity for addressing undernutrition and its lifelong adverse effects. The damage to physical growth, brain development, and human capital formation that occurs during this critical period, is extensive and largely irreversible. The effects of undernutrition are felt across generations. Maternal undernutrition increases maternal mortality risks and often leads to low birth weight, which contributes to 60% of neonatal deaths. Children with a low birth weight that survive can experience severely impeded development.

The underlying and basic causes of undernutrition are multi-faceted, and families therefore need support from the multiple sectors responsible for food security, water and sanitation, education, social protection, and health.

While many nutrition interventions

can be implemented through the health system, certain aspects of nutrition do not fit easily into the responsibilities of a particular government department. As such, nutrition-sensitive development is required in sectors like agriculture and education to ensure that such systems are alert to how their programmes can contribute to reducing undernutrition.

Countries where multi-sectoral approaches to undernutrition have been achieved have often had high ranking political leadership on nutrition, occasionally dedicated cabinet positions, as well as 'champions' at national, and sub-national level representing a breadth of actors from government and civil society.

As we focus in on the health and nutrition links in particular, it becomes apparent that expanding the reach of health services to include nutrition-focused interventions as part of community outreach is crucial to meeting the needs of the world's poorest families and to securing sustainable global gains in nutrition. Ultimately, improved nutrition amongst children and their families must happen in households and in communities where the need is concentrated.

The delivery of critical health services and nutrition interventions must take

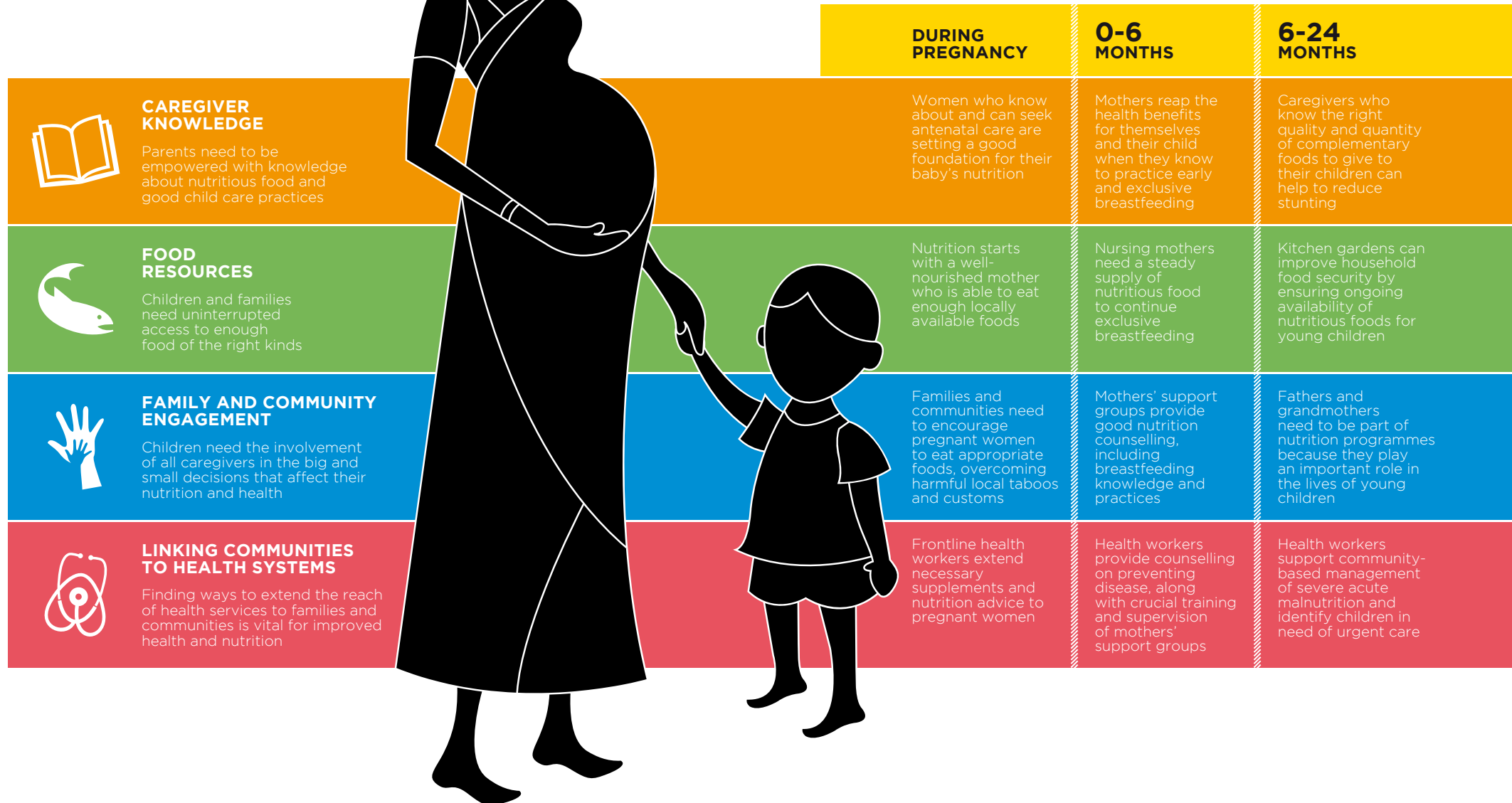
place where they are needed most and can be easily accessed, through approaches that also seek to strengthen health systems from local to national. Efforts to strengthen health systems to deliver improved nutrition for mothers and children must build human and technical capacity at all levels and, importantly, be able to monitor and review quality and reach of services, as well as measure impact. The fight against undernutrition will be won family by family and community by community.

## WORLD VISION'S ROLE

World Vision is well placed to contribute to efforts to reduce undernutrition, working alongside families and communities where the need is greatest, engaging with government and other stakeholders at the local, national and global level. Nutrition is a central element of World Vision's evidence-based global health and nutrition strategy. Our field experience has also shown the benefits of nutrition-sensitive development across sectors such as health, agriculture and education. This twin-track approach is accompanied by a strong focus on research and advocacy, and commitment to partnering for greater impact.

# NUTRITION FOR LIFE

Right now a global movement to improve nutrition is building and everyone has a part to play. Success rests not only with strong health systems, but with capable families and communities. Here's World Vision's view of some practical solutions to support them.



# CASE STUDIES

## A POSITIVE APPROACH TO IMPROVING NUTRITION PRACTICES - PD HEARTH

Positive Deviance Hearth is an intensive behaviour change intervention that uses the 'positive deviance' approach. This involves identifying positive behaviours practised by the mothers or caretakers of well nourished children from poor families, and seeking to transfer these practices to others in the community with poorly nourished children.

PD Hearth programmes provide communities with an empowering way to realise they have the abilities and potential to change and improve their children's health. The PD Hearth approach particularly recognises the expertise of women and strengthens their leadership role in addressing key development challenges in their communities.

Impacts of PD Hearth seen by World Vision include:

- In a programme in Mali, the percentage of normal weight children increased to 84% from 59%
- The participation of the poorest families within a community, with an active role for all family members and an emphasis on community solidarity and women's leadership

- The promotion of integrated rural development approaches, including economic development, agriculture and health
- In a programme in Nicaragua, the percentage of malnourished children decreased from 43% to 31% and was sustained three months after the programme had ended

### CAMBODIA'S BABY-FRIENDLY COMMUNITY INITIATIVE

The Baby-Friendly Community Initiative (BFCI) has expanded considerably since its launch by the Cambodian Ministry of Health in 2004.

Starting out in just 50 villages, today the initiative covers 2,675 villages - 20% of all the villages in the country. It has played a role in improving exclusive breastfeeding rates over a ten year period, due in part to the comprehensive nature of integrated and targeted programming at community level.

The BFCI features legislation, policies and strategies at national level that are decentralised to district and local level, the formation of mothers' support groups with supervision from frontline health workers, and regular 'child friendly clinics' for children under five in the community.

Participants in a typical BFCI mothers' support group include a traditional birth attendant and two "model mothers", with many also including the village chief. Additionally, local health volunteers are on hand to serve as intermediaries between the villagers and health centre staff, a key bridging example between the formal health system and the community. Besides holding frequent informal discussions with pregnant women, nursing mothers, and those with young children in their own villages, members of mothers' support groups from several villages also gather for quarterly meetings at a local health centre to compare notes on their experiences.

Mothers' support groups worldwide are a key tool for improving maternal and child nutrition and health, sharing a common purpose of providing a safe environment where women can exchange experiences, learn from, and support one another.

### WORKING WITH COMMUNITIES - AN INTEGRATED APPROACH

Anaemia among children and women is a serious health issue in Malawi. In 1996, 86% of children 6-59 months and 51% in non-pregnant women were anaemic. In response, World Vision implemented the CIDA-funded MICAHA programme from 1995-2006, in Malawi and 4 other countries. MICAHA used integrated, community-based approaches to improve the micronutrient status of women and children under five.

Community programmes were coupled with national level advocacy and capacity building. Home gardens and small-animal revolving funds helped improve household food security, community groups and national radio promoted the importance of micronutrients and appropriate child-feeding practices (eg, exclusive breastfeeding, complementary feeding). Frontline health workers were supported to deliver health-related interventions associated with poor nutrition outcomes, such as iron supplementation, distribution of bednets, malaria treatment, and improved hygiene, water and sanitation.

MICAHA adopted an integrated approach to anaemia control, employing strategies to increase iron intake and access to iron as well as addressing the high burden of malaria and parasitic infections. These included iron supplementation for children and women, promotion of iron-rich vegetables, small animal raising, fortification of staple foods and extensive nutrition education. Together, these efforts improved families' eating and food preparation habits.

Nationally, multi-sectoral anaemia control policies were established in collaboration with the Ministry of Health. The Domasi Fortification Unit was set up and continues to fortify staple foods with iron and other nutrients today.

The nutrition of women and children in target communities in Malawi improved dramatically as a result of the MICAHA programme:

- Anaemia amongst pregnant women dropped from 59% to 48%
- 70% of mothers reported they breastfed exclusively for six months, compared to 15% at baseline
- Stunting in children under five went from 56% to 40%
- The prevalence of underweight children fell from 29% to 13%

## RECOMMENDATIONS

Addressing child undernutrition is an urgent challenge. We have the means and the knowledge to make the necessary changes. World Vision calls on all stakeholders to support the implementation of the following five critical, in-country reforms which will contribute significantly to improving nutrition and saving children's lives.

- Identify and support nutrition champions at all levels to raise the profile and address the challenge of child undernutrition;
- Ensure adequate resourcing and commitment for a comprehensive nutrition package, including through dedicated national and local budget lines;
- Ensure accountability for results in addressing child undernutrition through clear targets, monitoring and evaluation, with a strong emphasis on the collection and inclusion of data from the local level;
- Establish or strengthen groups to address child undernutrition which bring together all relevant actors, including representatives from health, education, agriculture and finance sectors and civil society. These groups should be replicated at national, district and local levels; and
- Ensure adequate human resources and technical capacity are allocated at or close to the level of families and communities.







World Vision is a Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. We are a federal partnership and work in almost 100 countries worldwide, serving more than 100 million people.

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