An introduction to undernutrition

**Target 2.2**

By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons.

- **What is undernutrition?**
  Undernutrition is a term which describes the various health conditions caused by the body not receiving enough energy (food) or nutrients (which are obtained by eating many different foods and food groups). Undernutrition can affect people in a variety of ways; they can become too short for their age (stunted); dangerously thin (wasted); and deficient in vitamins and minerals (micronutrient deficient), although in reality someone may suffer from several types of undernutrition at the same time.

  Despite being easily preventable, undernutrition claims the lives of 3.1 million children each year, making it the single largest killer of children worldwide. This is a very concentrated problem, with only 24 countries accounting for 80% of all cases of child undernutrition.

- **Why is it important?**
  Good nutrition is a fundamental building block for achieving a whole range of interrelated health and development outcomes. Improving nutrition globally will significantly reduce child and maternal mortality; improve educational outcomes and increase productivity and economic growth; while poor nutrition can perpetuate a cycle of poor health and poverty.

- **Why is it a problem?**
  Despite a significant decline in global poverty in the last two decades this has not been accompanied by corresponding improvements in nutrition. Approximately one in nine people suffer from undernutrition with the majority of these living in developing countries. Economic growth alone has been proven insufficient to improve nutrition, which can be seen in countries such as India, where despite significant economic growth, there are still 60 million stunted children, about 1/3 of the world's total.

- **Long-term development**
  Adequate nutrition is particularly important during the first 1000 days of life (a child grows faster during this time period than at any other point in their life). Poor nutrition during the first 1000 days can lead to wasting and stunting - where a child is too short for their age. Stunted children are not just shorter - studies show they are less likely to attend school, complete fewer years of school and earn less as an adult. For many the impacts are not only long-term, but are inter-generation and irreversible.

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**The truth about undernutrition**

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<td>Malnutrition underlies nearly half of all deaths of children under the age of five years</td>
<td>In 2014, 159 million children under five were stunted and 50 million children were wasted</td>
<td>Over two billion people globally suffer from micronutrient deficiencies, and a further two billion are overweight or obese</td>
<td>Every year, nearly 18 million babies are born with brain damage due to iodine deficiency</td>
<td>With more than 90% of stunted children living in Africa (34%) and Asia (58%), the burden of undernutrition falls disproportionately on the poorest children in the world.</td>
<td>Every dollar invested in nutrition can yield at least 16 in return</td>
<td>Yet, global Overseas Development Assistance (ODA) allocated to nutrition is only around 1%.</td>
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The truth about undernutrition
What can be done?

The many direct and indirect causes of undernutrition are complicated and deeply embedded in some societies. Therefore, any approach to improving nutrition in children requires a long term, comprehensive and wide ranging approach which seeks to tackle the direct and indirect causes together.

Investment in nutrition-specific interventions More investment is needed to scale up nutrition specific interventions which have been proven to be effective (those which directly treat undernutrition) such as promoting exclusive breastfeeding for six months, micronutrient supplementation and fortification, promoting nutrition awareness and education, and scaling up programmes for screening and treating wasting.

Investment in nutrition - specific interventions In addition to investing in nutrition specific programmes it is also critical to invest in programmes which address underlying causes of poor nutrition such as sanitation programmes, provision of social safety nets and programmes to increase agricultural outputs, gender issues etc. However, these must be designed to have an impact on nutrition outcomes and targeted to reach the most vulnerable populations.

TACKLING ANAEMIA IN INDIA

In India, just three in every ten children in the age group of six to 59 months are not anaemic. The other seven will be prone to frequent fatigue and illness, have poorer attention spans and IQs, are more likely to drop out of school and as a result, are less likely to secure a healthy and prosperous future.

Worse still, over half of all women and girls of reproductive age (15-49 years) in India are also anaemic. In addition to hindering the health and development of girls, entering pregnancy as an anaemic woman has grave consequences for both the mother and the child. Anaemia is a leading cause of low-birth weight and premature babies, haemorrhages and maternal mortality.

Tackling anaemia requires a multi-pronged strategy with preventive and therapeutic approaches. These include micronutrient supplementation such as Iron and Folic Acid, fortification of staples, and the promotion of dietary diversity and absorption, alongside worm infestation prevention and sanitation.

India has long introduced supplementation for pregnant and lactating women through its health and Integrated Child Development Services (ICDS) Scheme. In recent years, they have introduced Weekly Iron and Folic-acid supplementation (WIFS) to adolescent girls and boys. This programme utilises a school based delivery system for school-going girls and boys, whilst community health workers help reach out-of-school girls. It aims to reach 112 million adolescent in total – 84 million in school and 28 million out of school.

Addressing anaemia and breaking the intergenerational cycle will be imperative for India’s women, girls, and children to survive, thrive, and actively contribute to society.