

Child And Maternal Nutrition In India

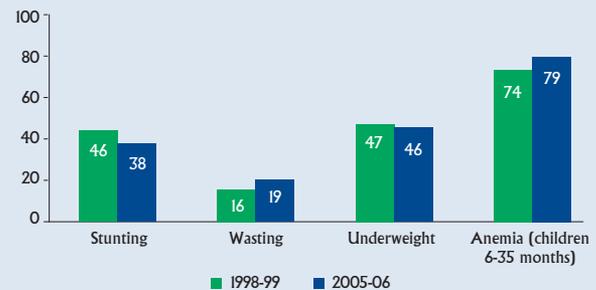
Malnutrition in India has been called 'The Silent Emergency'. The proportion of under-nutrition among children and women in India is one of the highest in the world. India is committed to halving the prevalence of underweight children by 2015 as one of the key indicators of progress towards the Millennium Development Goal (MDG). In spite of unprecedented economic growth, improvements in childhood nutritional status in India over the last decade have been slow. Suboptimal infant and young child feeding practices in particular continue to be a serious challenge to reducing malnutrition among children. High rates of maternal under-nutrition measured by low body mass index and anemia adversely affect the health and survival of mothers and newborns.

In contrast to other development indicators, several indicators of malnutrition are on the increase, including anemia and wasting. Furthermore, significant disparities in nutrition levels exist across regional and societal groups.

Some facts about child nutrition

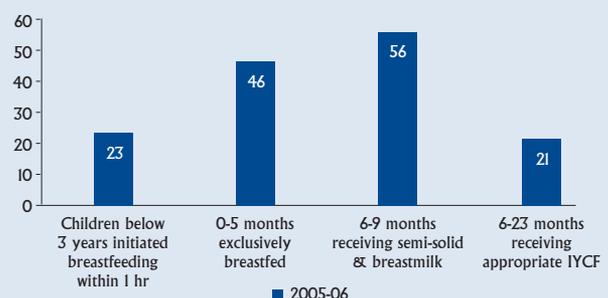
- Malnutrition is the major underlying cause of 50% of deaths among children.
- 8.3 million babies are born low birth weight (less than 2,500 grams).
- Nearly half (46%) of children under 3 years of age[†], or 31 million children[‡] are underweight (low weight for age). This number of malnourished children is equivalent to the entire population of Canada[€].
- 25.5 million, or 1 in 3, children under 3 years of age are stunted (low height for age) as a result of poor nutrition[‡].
- 13 million, or 1 in 5, children below 3 years of age are wasted (low weight for height)[‡].
- Eight in ten children 6 – 35 months of age are anemic[†].

Percent of children under 3 years of age stunted, wasted and underweight, India, NFHS II & NFHS III



- For children 6-59 months, 26% have mild, 40% have moderate, and 3% have severe anemia[†].
- Only 23% of children below 3 years of age in India initiated breastfeeding within one hour of birth as recommended by WHO[†].
- Less than half (46%) of children under 6 months of age are exclusively breastfed[†].
- Only half (56%) of children aged 6 – 9 months are provided with the recommended semi-solid complementary foods and breast milk[†].
- Only one in four children aged 12 – 35 months receive the six monthly Vitamin A supplement[†].
- Appropriate feeding practices in children under 2 are crucial for intellectual and physical development. Malnutrition among children under 2 years of age has serious, lifelong consequences.

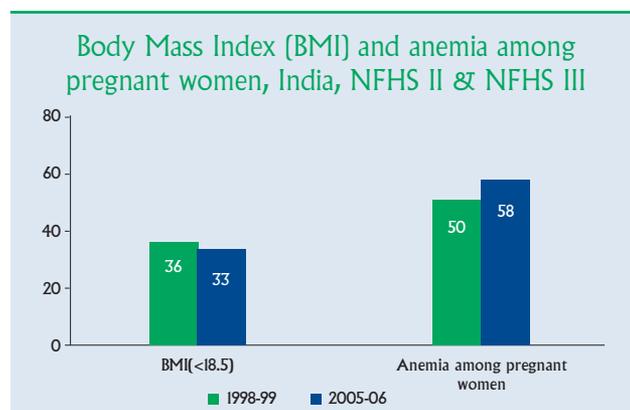
Infant and young child feeding practices in India, NFHS III



- Only 1 in 5 children 6 – 23 months of age receive the recommended appropriate feeding[†].
- Interventions for the treatment of severe acute malnutrition.

Some facts about maternal nutrition

- One in three women 15 – 49 years of age has a Body Mass Index (BMI) below 18.5 indicating severe nutritional deficiency and under-nutrition[‡].



- Among pregnant women, 58% are anemic[‡]. Anemia increases the risk of maternal death.

What we know that works

- Effective promotion of infant and early child feeding practices.
- Breastfeeding within the first hour of life.
- Complementary feeding with or without provision of food supplements.
- Micronutrient interventions (Vitamin A and Zinc fortification and supplementation) for children.
- For maternal health, sufficient and healthy dietary intake during pregnancy with iron, folic acid and calcium supplements.
- General supportive strategies for improving family and community nutrition and reducing disease burden.

What more is needed

- A heightened level of political commitment, significant increases in resources, and strong leadership to combat the nutrition emergency.
- Policies translated into concrete and well coordinated, convergent actions.
- Evidence of how to take proven nutritional interventions to large scale.
- Information and monitoring systems that focus on results of nutrition interventions rather than inputs.
- Communication strategies and interventions that emphasize behavior change.
- Targeting children under 2 years of age for improved quality, quantity and frequency of infant and young child feeding.
- Micronutrient supplementation to children and women.
- A better understanding of the direct and indirect causes of persistent and recurring severe and moderate malnutrition.
- More evidence of the effectiveness of community and facility-based rehabilitation for severely and moderately malnourished children.

References

[†]National Family Health Survey (NFHS 3), 2005 – 06, India: Volume I, & National Fact Sheet, International Institute for Population Sciences, Mumbai, September 2007

[‡]Estimate based on the project population of India by the Technical Group on Population Projection, RGI, India, 2008.

[¶]World Population Prospects: The 2006 revision, UN Population Division database (<http://esa.un.org/unpp/>)

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