

Regional Perspective on Maternal Nutrition and Complementary Feeding

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Overview of the Nutrition Situation in ASEAN



The triple burden of malnutrition in East Asia and the Pacific

Causes of all forms of malnutrition:



- Poverty and inequality
- Social cultural factors
- Poor water quality
- Poor sanitation and hygiene
- Maternal nutrition
- Poor diets

In East Asia and the Pacific,
13 million under 5 children are stunted,
4.5 million under 5 are wasted



In East Asia and the Pacific,



46%
of children
have a
micronutrient
deficiency

50 million
children under 5
are micronutrient
deficient



27%
of women
of reproductive
age are anemic

01 Undernutrition



Triple Burden

02 Micronutrient deficiencies



03 Overweight & Obesity



9.7 million
children under 5 are
overweight or obese

80 million
school children
are overweight



The Triple Burden can exist at the individual, household, or country level



Individual:

Children can be stunted,
overweight and micronutrient
deficient at the same time



Household:

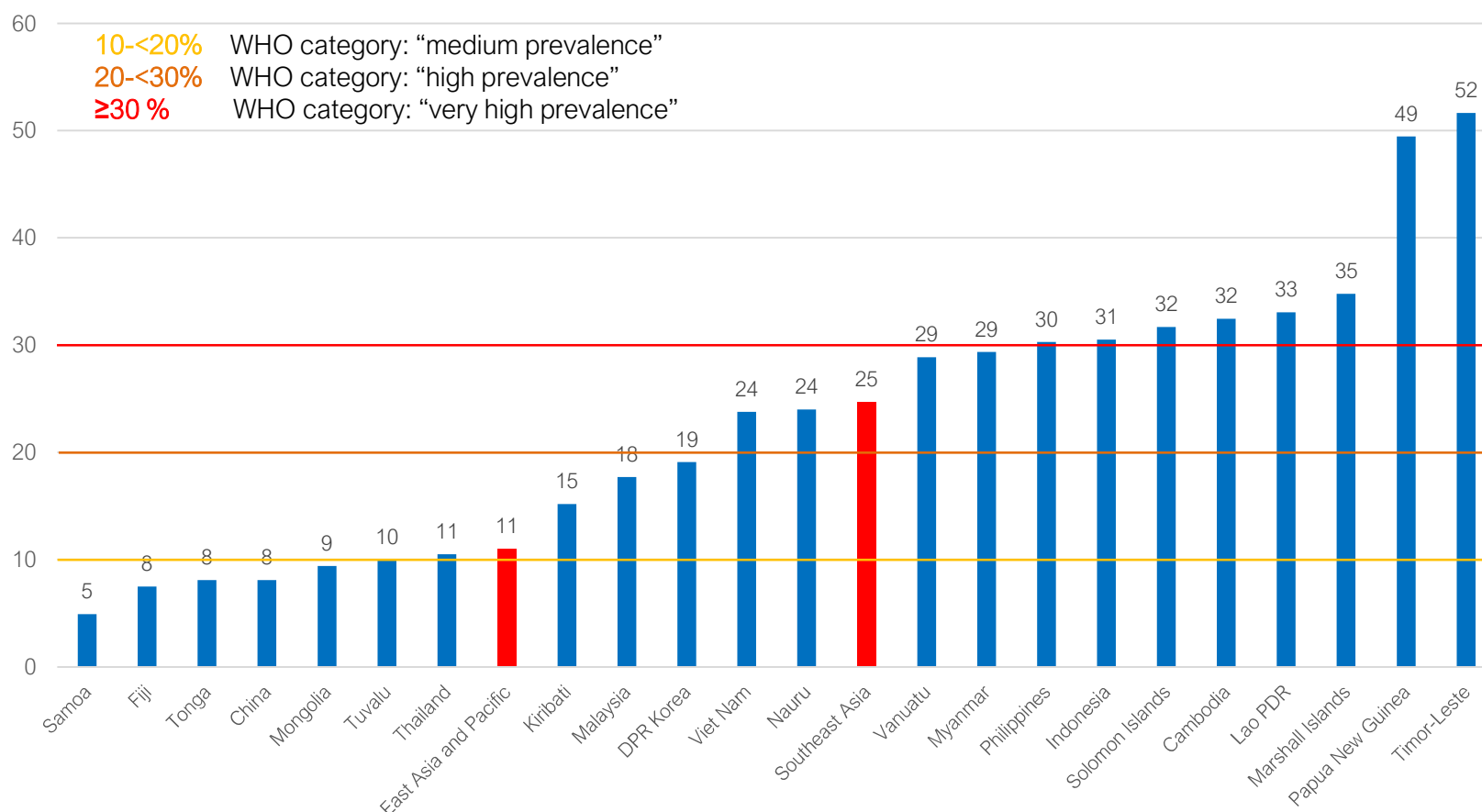
A household can have a mother
who is anemic and overweight,
and a young child who is wasted
and stunted



Country:

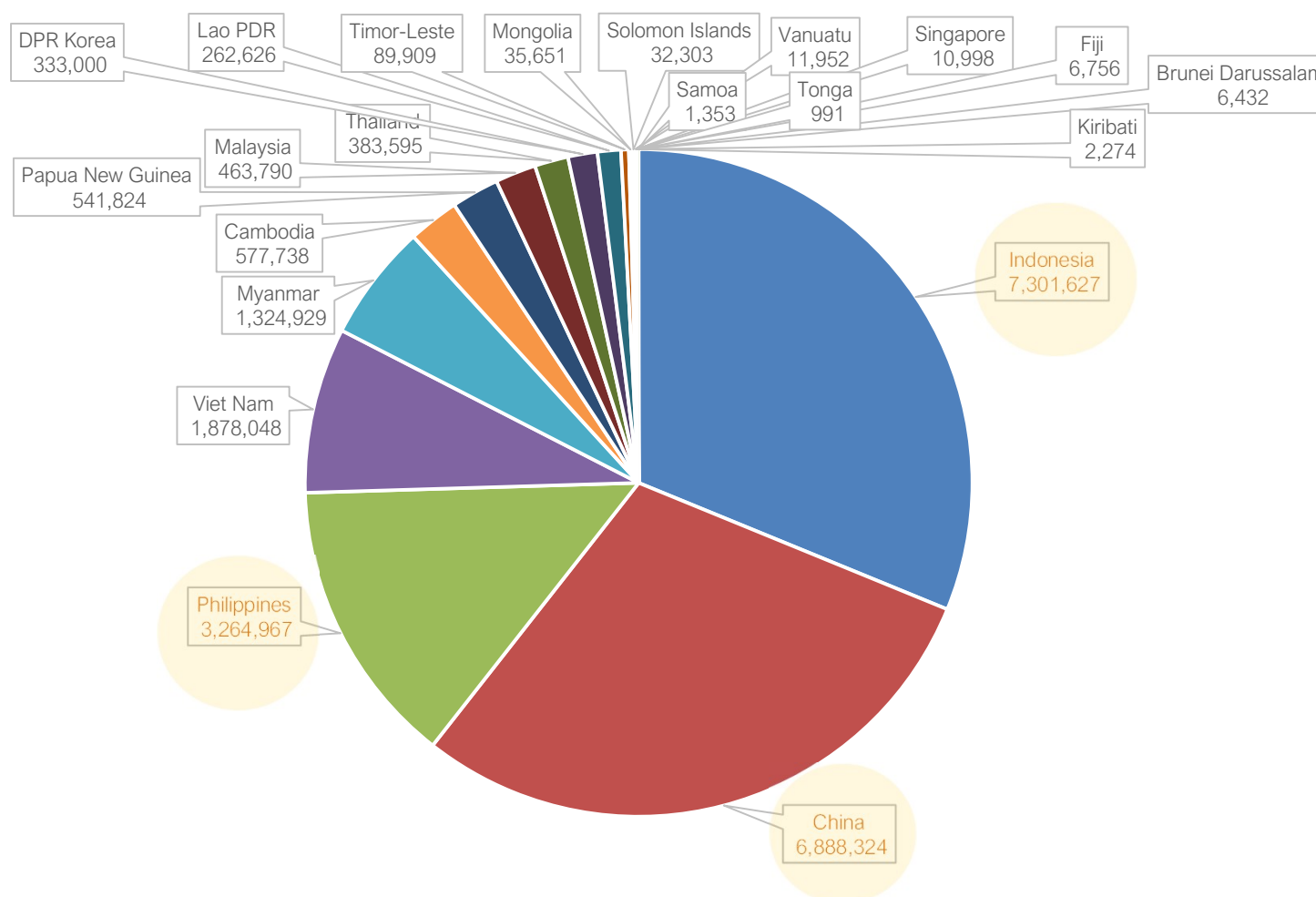
A country can have overlapping
burdens of undernutrition, overweight
and micronutrient deficiencies

While progress has been made to reduce stunting in EAPR, **prevalence is still high (>20%) in 12 EAPR countries**



Reference: Country data obtained from JME 2020 inclusive of recent national survey from Kiribati 2019; Regional estimates obtained from JME 2020
 NB: UN SE Asia region excludes China, Mongolia and DPRK

Three countries (Indonesia, China, Philippines) contain 75% of the stunted children in EAPR

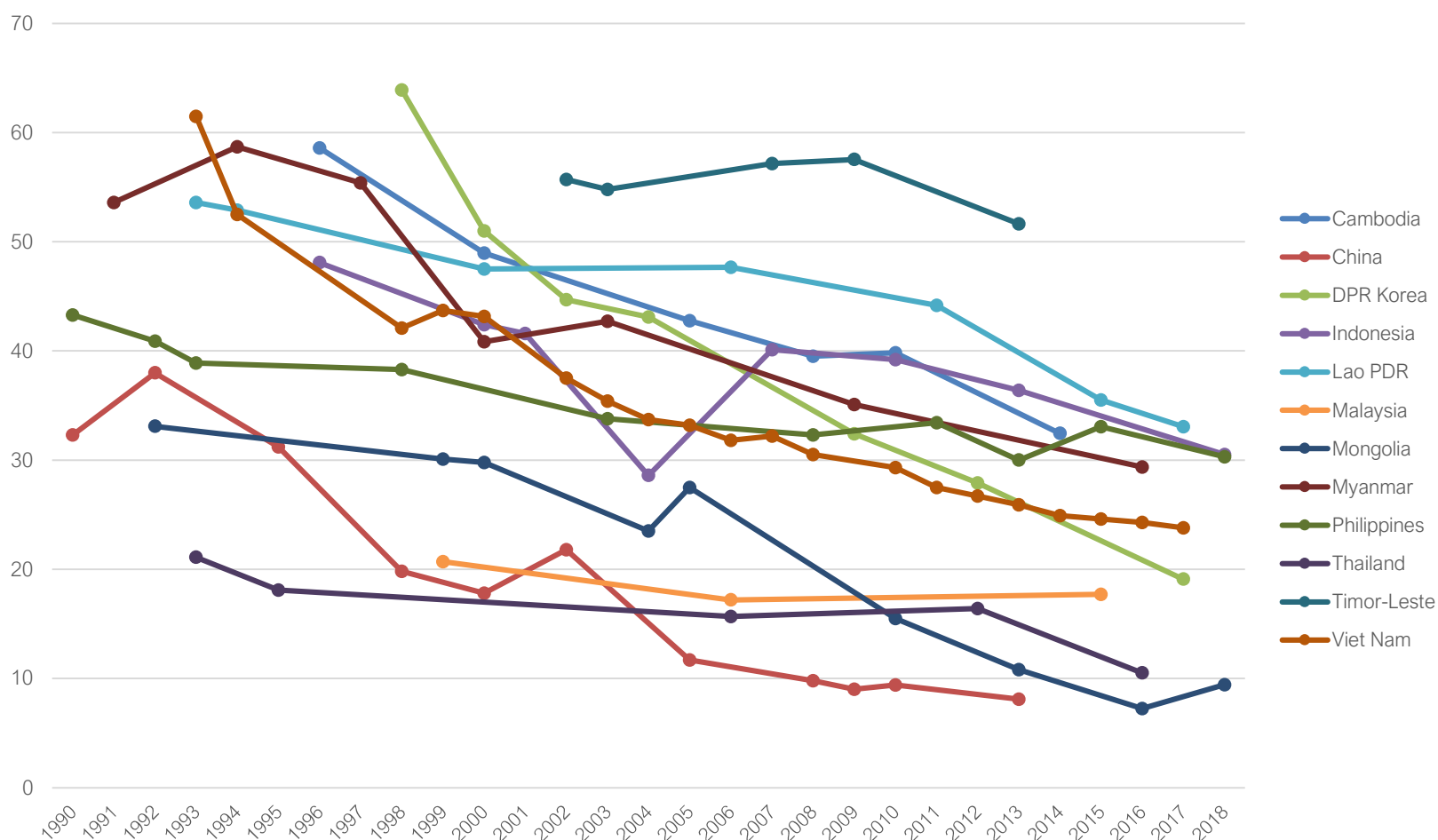


Reference: Country data obtained from JME 2020 inclusive of recent national survey from Kiribati 2019

Population estimates: World Population Prospects 2019, File POP/15-1: Annual total population (both sexes combined) by five-year age group, region, subregion and country, 1950-2100 (thousands), Estimates, 1950 - 2020, POP/DB/WPP/Rev.2019/POP/F15-1

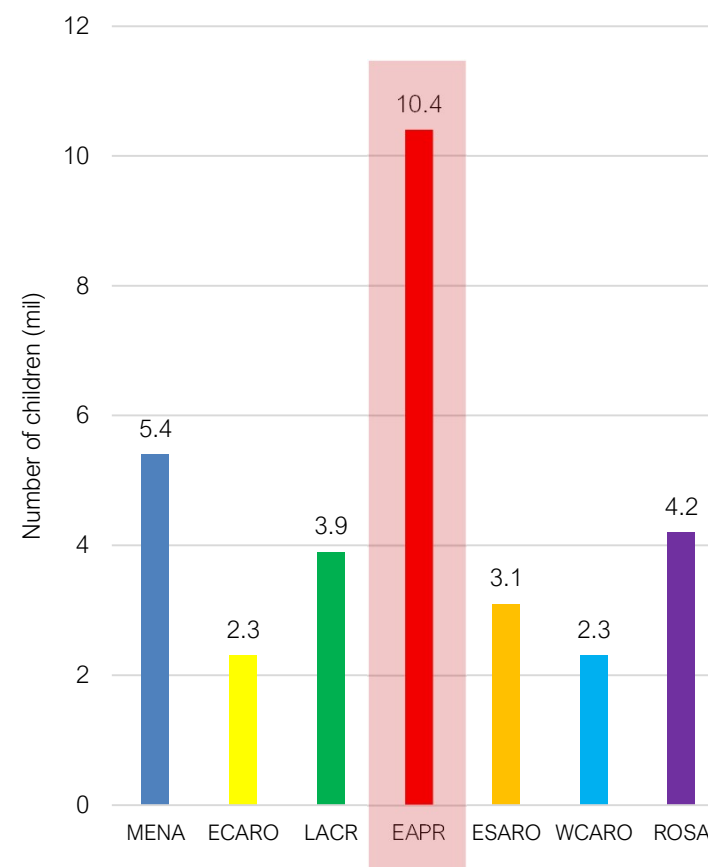
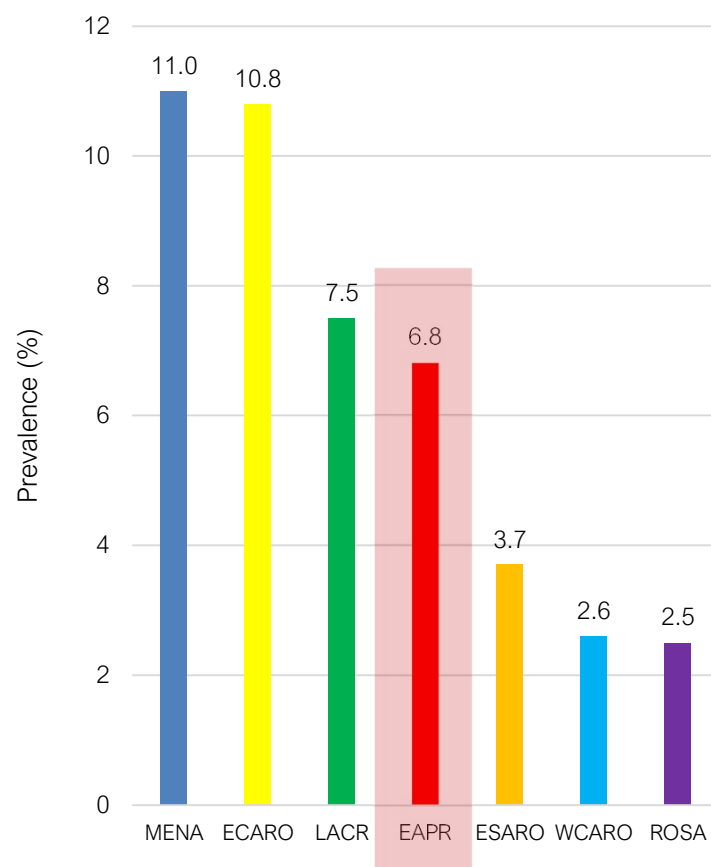
Stunting trend in selected countries:

Most countries are making progress since 1990, but progress has slowed since 2010.



Reference: Country data obtained from JME 2020

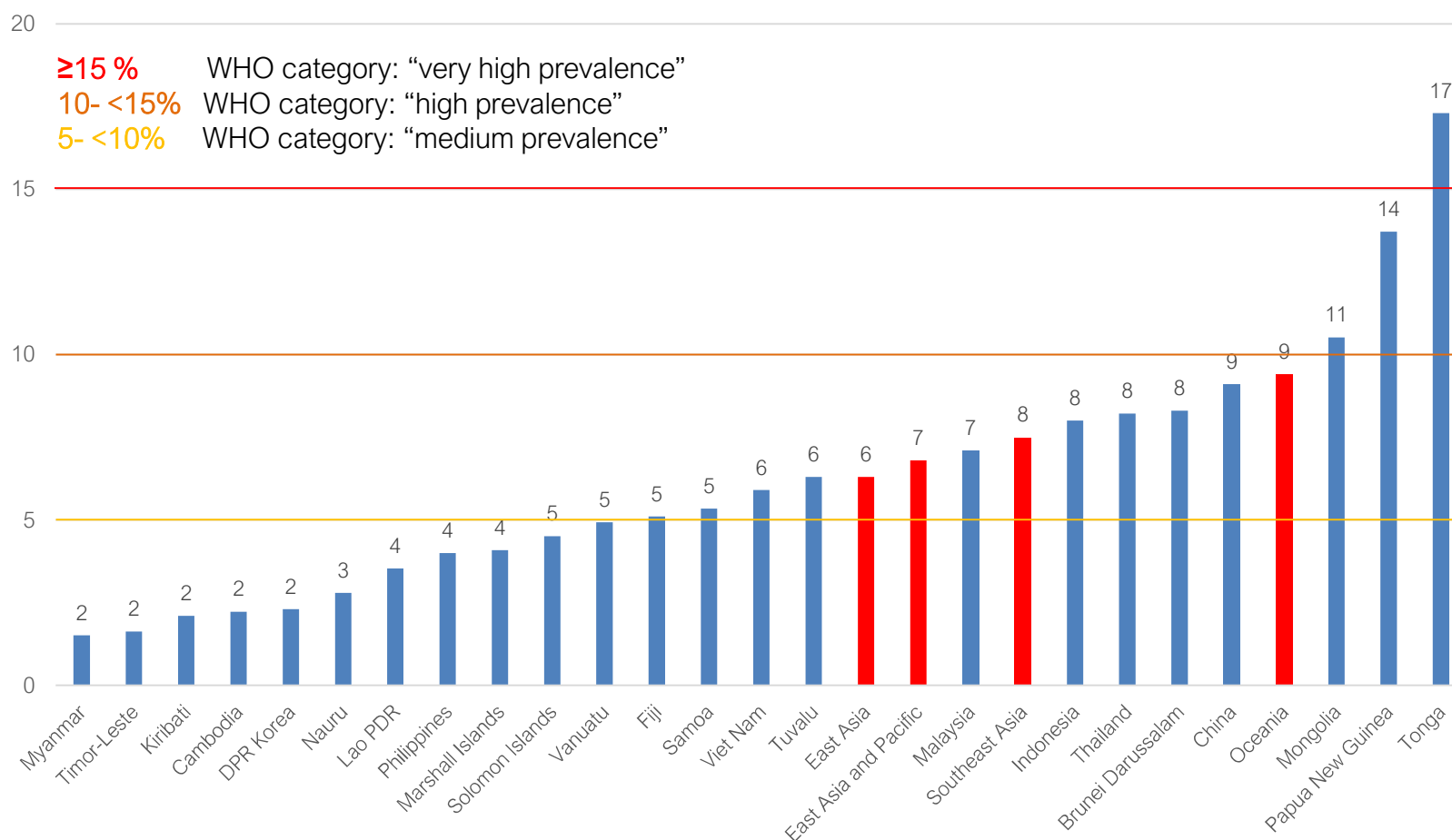
Child overweight is increasingly a concern in EAPR with the **largest burden of overweight children under 5 years globally in 2019.**



Reference: Regional estimates obtained from JME 2020

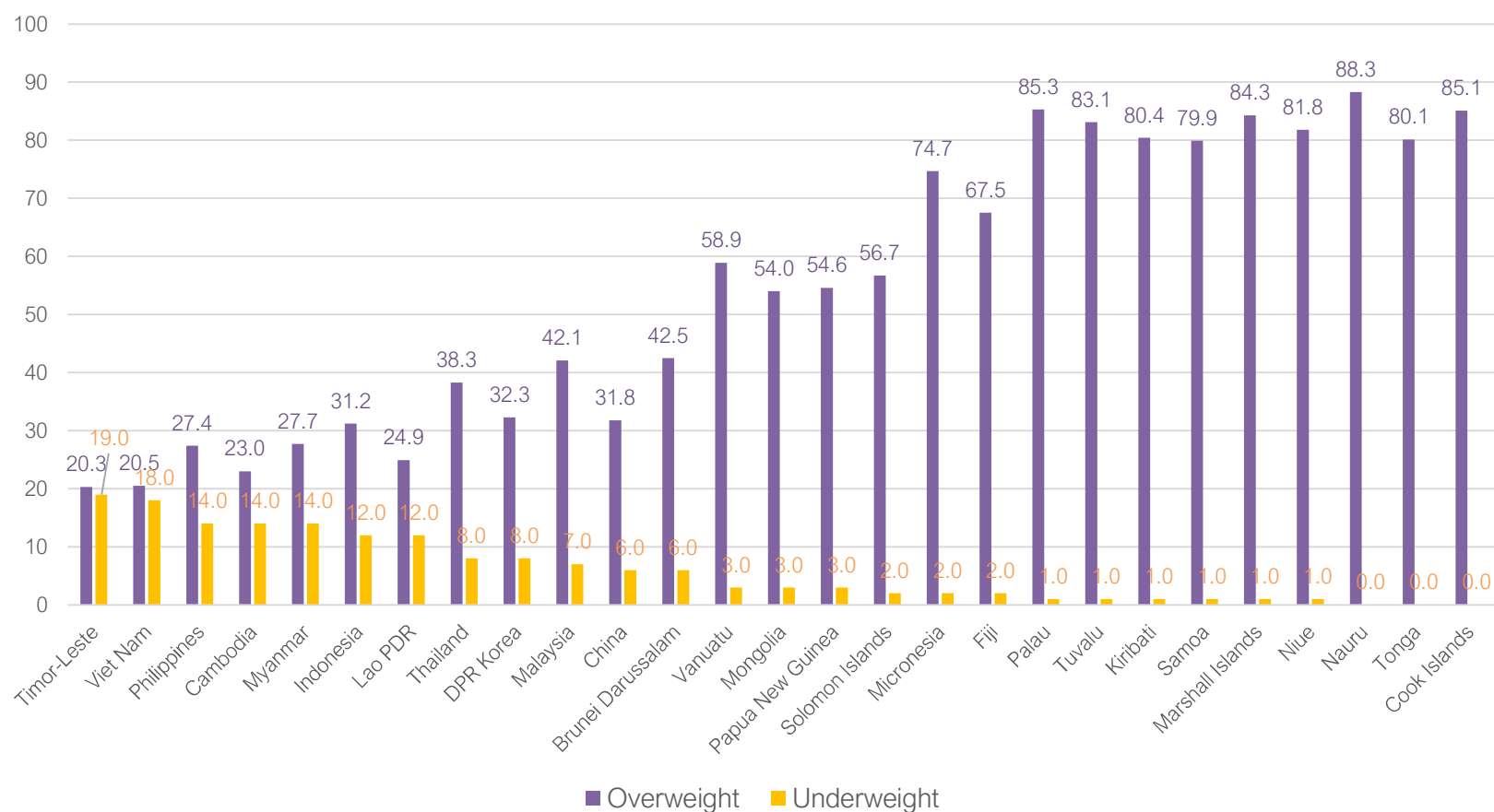
Population estimates: World Population Prospects 2019, File POP/15-1: Annual total population (both sexes combined) by five-year age group, region, subregion and country, 1950-2100 (thousands), Estimates, 1950 - 2020, POP/DB/WPP/Rev.2019/POP/F15-1

2 out of every 3 countries in EAPR
have an **elevated prevalence** of under 5 child overweight.



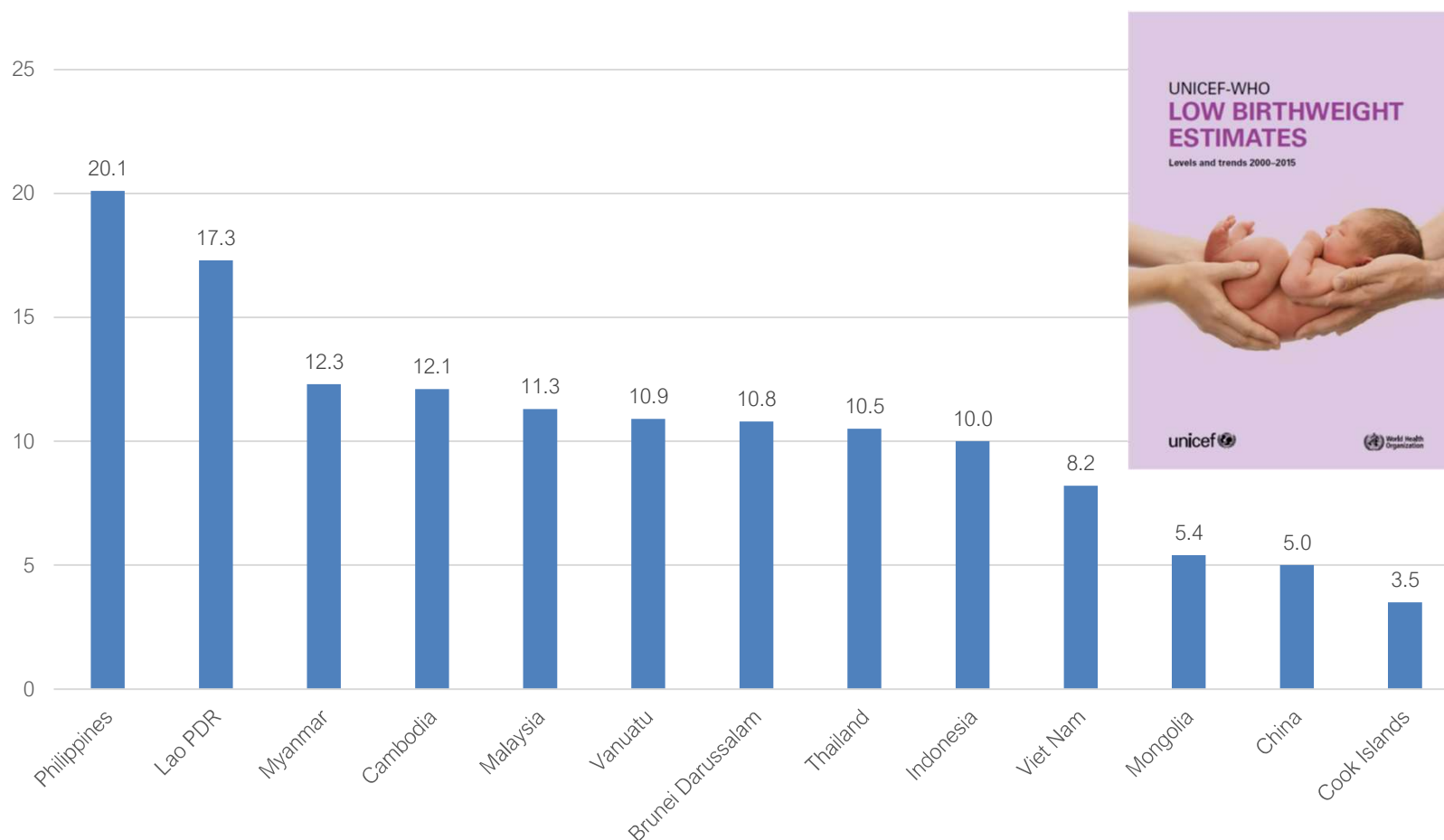
Reference: Country data obtained from JME 2020 inclusive of recent national survey from Kiribati 2019; Regional estimates obtained from JME 2020

Overweight is increasing for all population groups in EAPR.
For all countries, the prevalence of overweight is **significantly higher in adult women** compared to underweight.

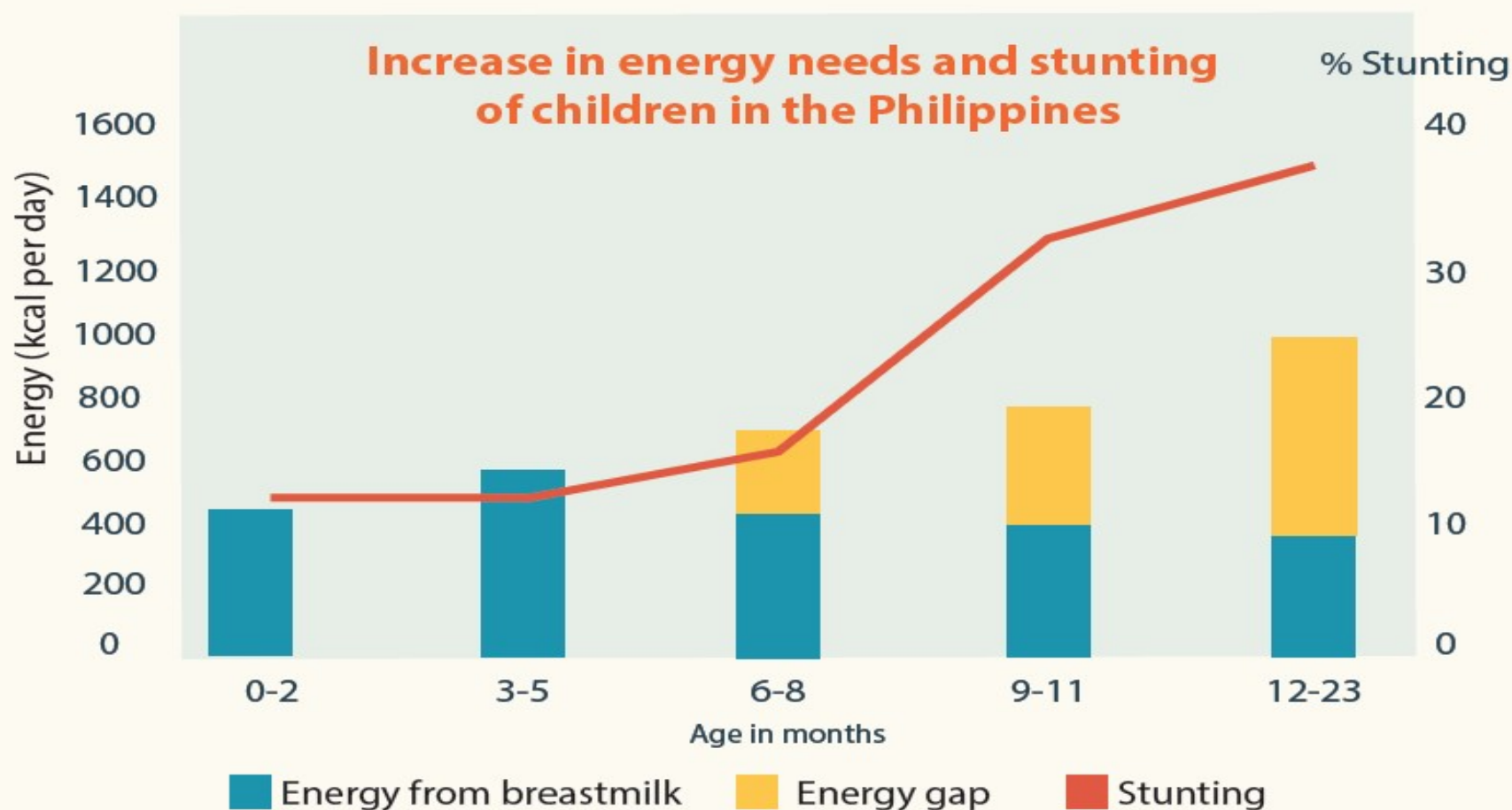


Reference: Latest estimate obtained from The State of the World's Children 2019 Statistical Tables (<https://data.unicef.org/resources/dataset/sowc-2019-statistical-tables/>) and historical data from: <https://data.unicef.org>

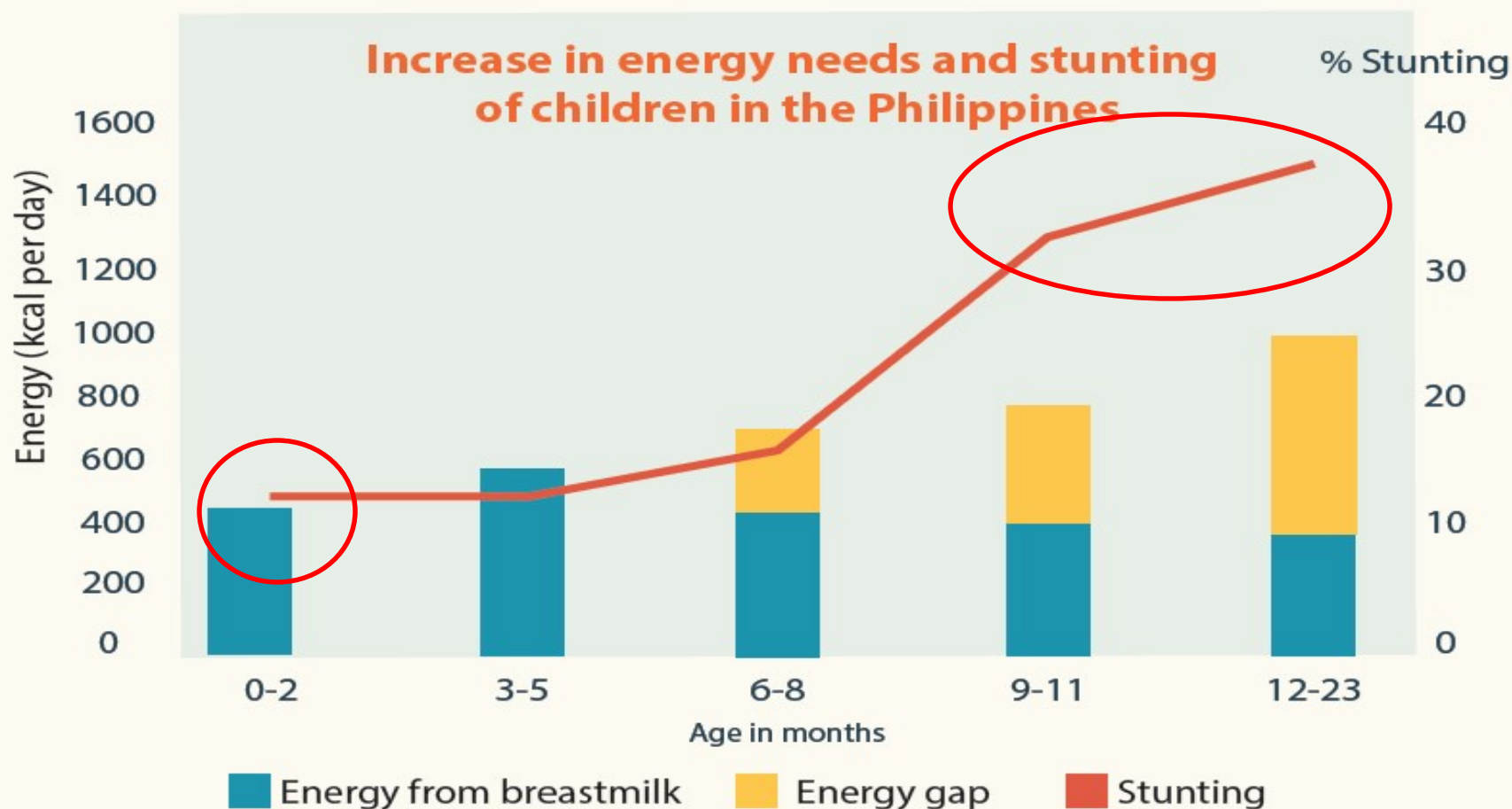
New data on prevalence of low birthweight indicate that throughout EAPR, low birthweight is a **significant contributing factor to child malnutrition.**



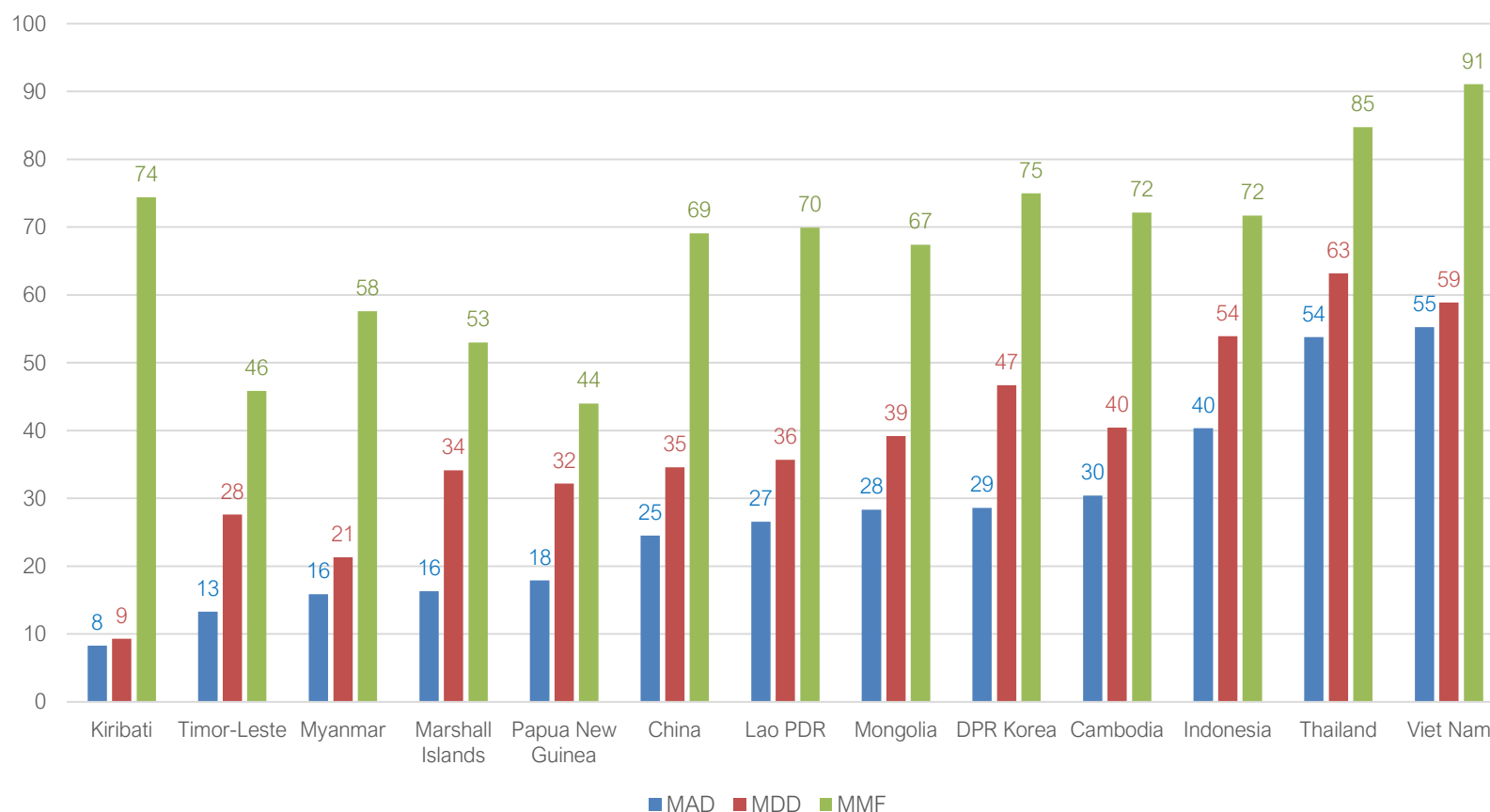
Complementary Feeding and Maternal Nutrition are leading drivers of child stunting



Complementary Feeding and Maternal Nutrition are leading drivers of child stunting

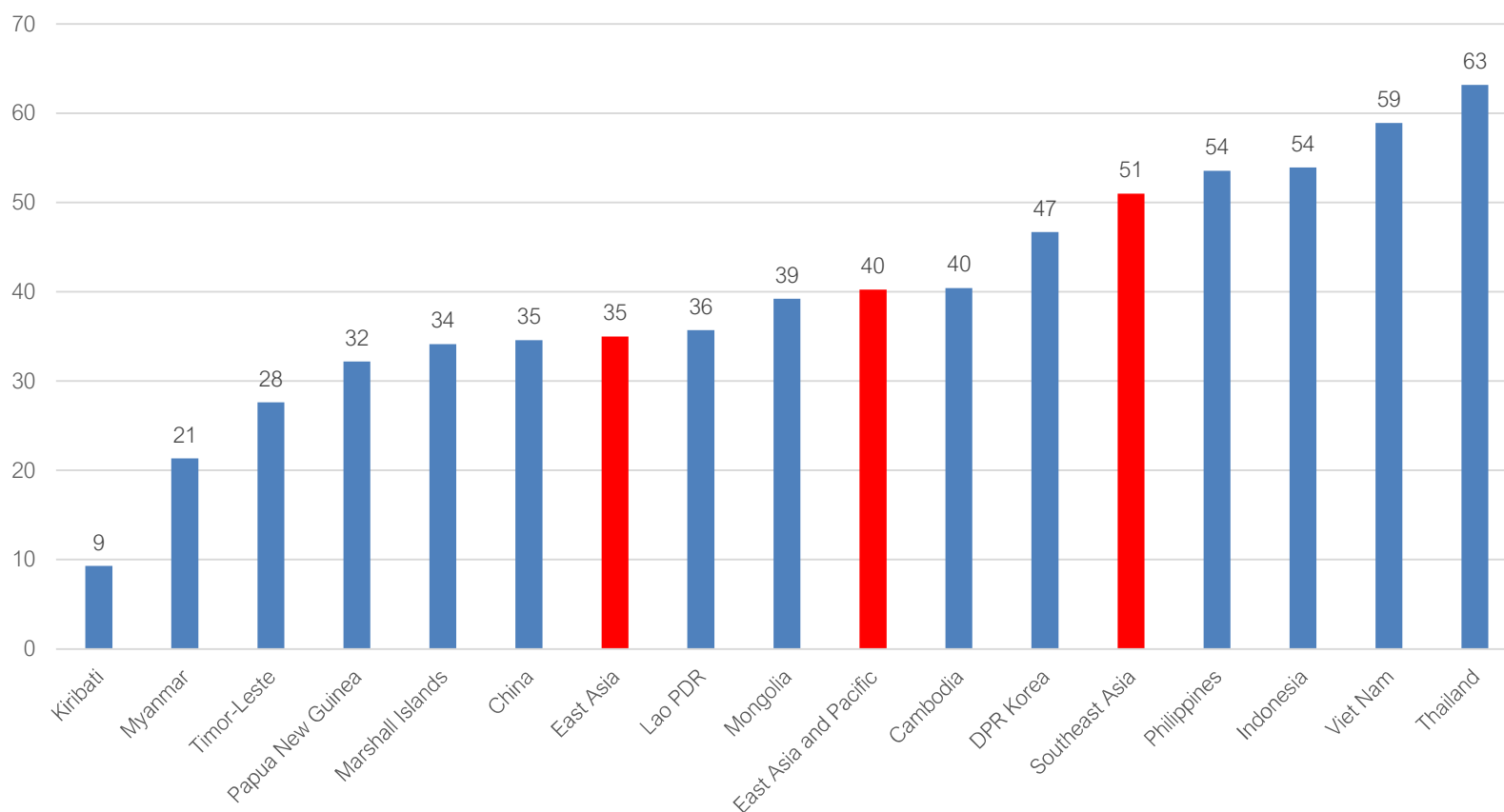


Complementary feeding practices are insufficient in EAPR with children not receiving appropriate diets in sufficient quantity and quality.



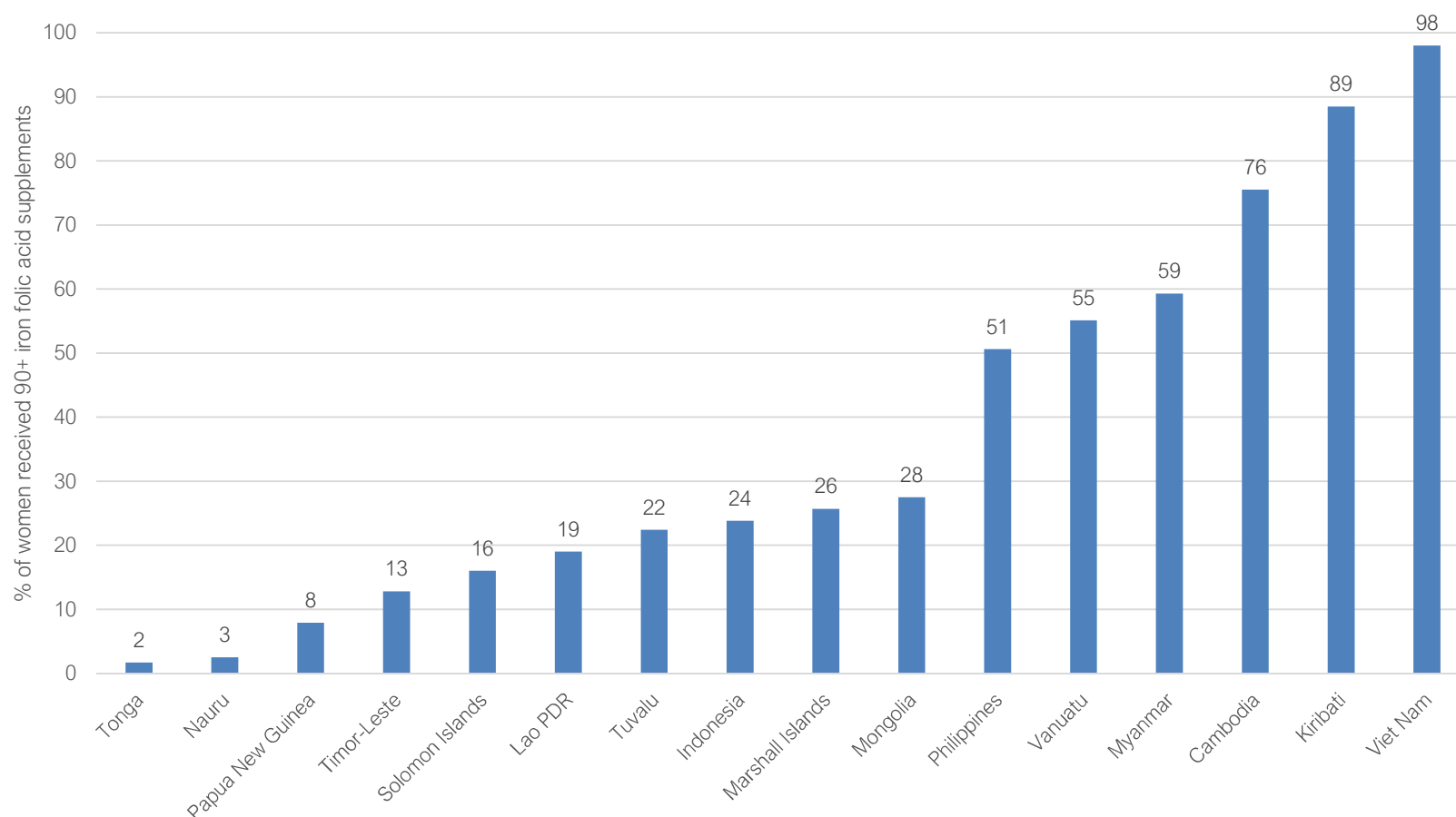
Reference: Country data obtained from www.unicef.data.org inclusive of recent national surveys from Kiribati 2019 and Mongolia 2018

Less than half of all young children receive a diet with minimal dietary diversity in EAPR.



Reference: Country data obtained from www.unicef.data.org inclusive of recent national surveys from Kiribati 2019 and Mongolia 2018

Receipt of **90+ iron folic acid supplements during pregnancy** is poor in EAPR with only Vietnam and Kiribati achieving higher than 80% coverage.



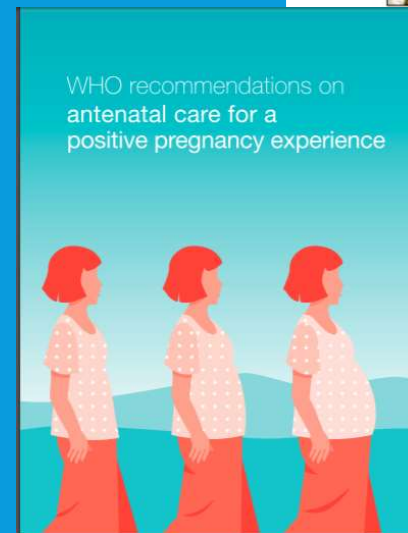
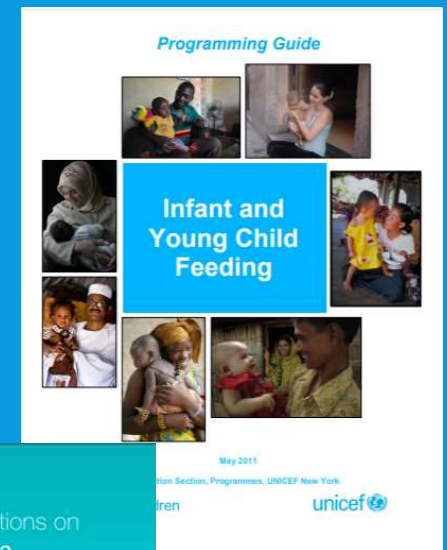
Reference: ICF, 2015. The DHS Program STATcompiler. Funded by USAID. <http://www.statcompiler.com>. April 28 2020. Inclusive of recent national surveys in Kiribati 2019 MICS, Solomon Islands 2015 DHS, Indonesia 2018 RISKESDAS, Marshall Islands 2017 ICHNS and Mongolia 2018 SISS



Regional Initiatives to Improve Maternal Nutrition and Complementary Feeding

GLOBAL GUIDANCE FOCUSES ON WHAT TO DO BUT NOT HOW TO DO IT

- At the global, regional and country level, facilitate action-oriented programming for improving the diets of young children (aged 6-23 months) and pregnant and lactating women based on drivers and using multiple delivery systems.
- **Help answer “how can access and quality of young children’s and maternal diets be improved using food, health, social protection, education and WASH delivery systems”**
- Fit within existing IYCF and national nutrition strategies



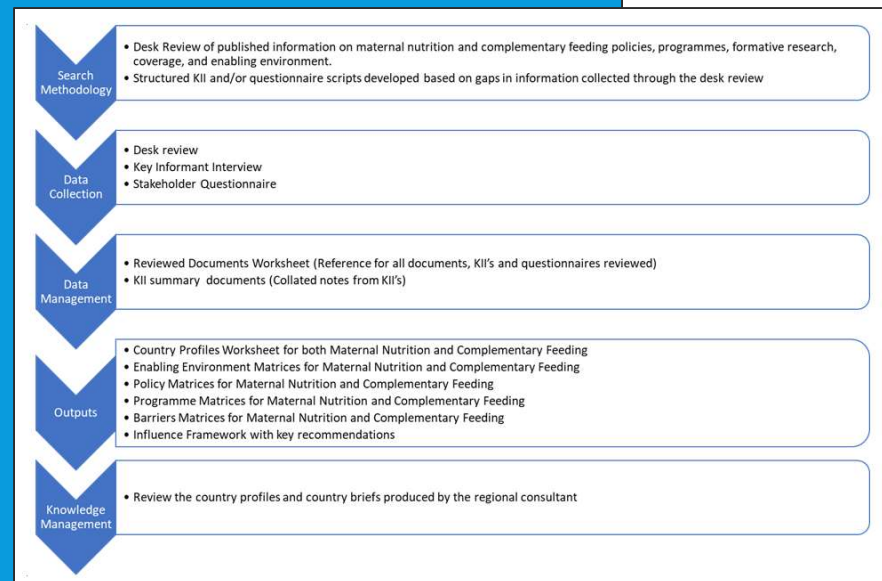
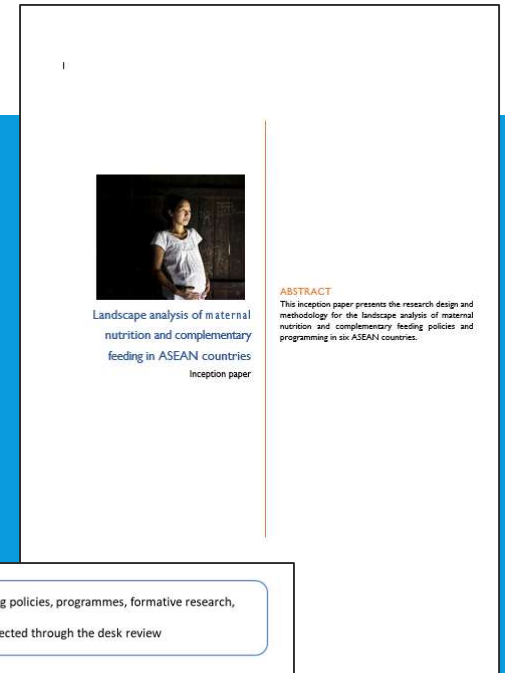
Landscape Analysis on Complementary Feeding and Maternal Nutrition



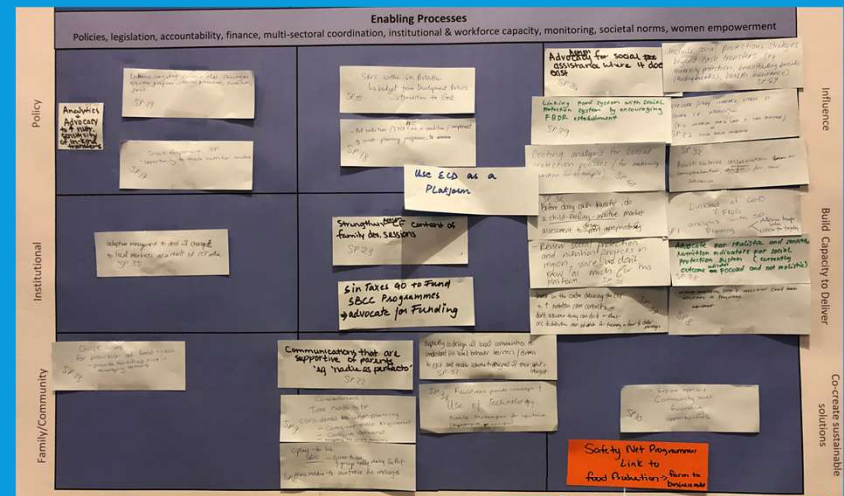
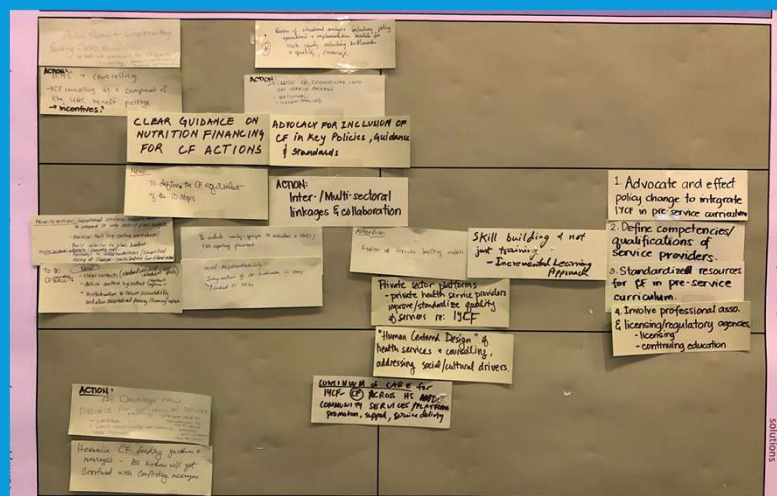
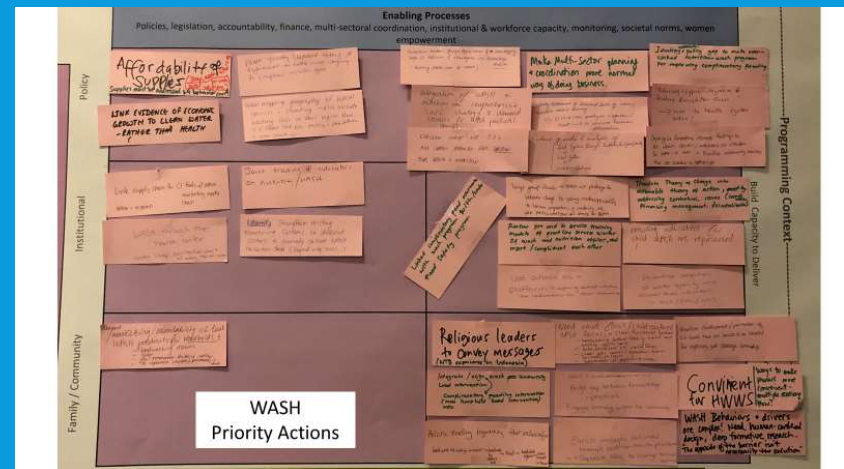
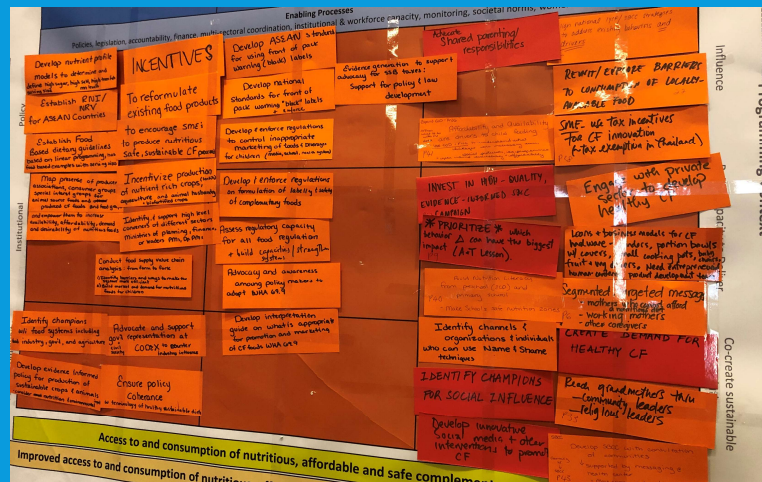
Provide a clear understanding of the enabling environment for complementary feeding and maternal nutrition, translation of policy to programmatic actions, and remaining gaps, barriers and enabling factors which need to be addressed.

MULTI-COMPONENT LANDSCAPE ANALYSIS CONDUCTED IN 7 REGIONS GLOBALLY

- Desk review of published information on maternal nutrition and complementary feeding
 - Policies and legislation
 - Programme implementation and coverage
 - Formative research
 - Enabling environment
 - Bottlenecks and gaps
- Rapid stakeholder mapping
- Key informant interviews
- Online survey of bottlenecks and gaps



REGIONAL TECHNICAL CONSULTATION- JANUARY 2019: MAPPING OUT STRATEGIC PRIORITY ACTIONS



ACTIONS TO IMPROVE COMPLEMENTARY FEEDING IN SOUTHEAST ASIA

OVERARCHING ACTIONS

SOCIAL BEHAVIOUR CHANGE COMMUNICATION

- Develop innovative mass communication strategies including use of social media.

INFORMATION SYSTEMS

- Include complementary feeding indicators in routine monitoring.

NATIONAL ACTION PLANS

- Include complementary feeding actions in national nutrition strategies and plans of action.

QUALITY RESEARCH

- Address research gaps across multiple- systems- food, health, WASH and social protection

FOOD system:

1. Incentivise the production of nutritious, safe, and sustainable processed complementary foods.
2. Establish food-based dietary guidelines for children under 2.
3. Develop ASEAN and national standards for front-of-pack warning 'black' labels.
4. Enforce regulations to control the marketing of unhealthy foods and beverages for children under 2 years.

WASH system:

1. Support WASH actions at the facility and community level that improve complementary feeding practices and food safety.
2. Integrate environmental hygiene into WASH services targeted to households with children under 2 years.

SOCIAL PROTECTION system:

1. Target the First 1,000 Days.
2. Embed support for complementary feeding within existing early childhood development, parenting, micro-financing and other social protection platforms.
3. Establish delivery mechanisms for fortified complementary foods and supplements through social protection platforms that can be scaled up during shock responsive programming.

HEALTH system:

1. Develop standards, guidelines and tools for the delivery, monitoring and supervision of complementary feeding counselling in public and private institutions and as part of universal health care.
2. Deliver micronutrient supplements in a suitable form for children under 2 years.
3. Introduce mandatory skill focused online complementary feeding training for health workers.



The Southeast Asia Regional Action Framework for Complementary Feeding was developed through a consultative workshop January 22-25th with UNICEF, World Health Organization, World Bank, Helen Keller International, Global Alliance for Improved Nutrition, Save the Children, Alive & Thrive, Nutrition International, Food and Agriculture Organization, World Food Programme, Mahidol University, and Nutrition Center of the Philippines.

ACTIONS TO IMPROVE MATERNAL NUTRITION IN SOUTHEAST ASIA

OVERARCHING ACTIONS

- Develop a comprehensive and innovative SBCC strategy including social media
- Improve collection and reporting of MN data through surveys and routine data
- Operational research to understand how to improve service delivery through the health center and SBCC



EDUCATION system:

- Strengthen universal IFA supplementation for all adolescent girls

SOCIAL PROTECTION system:

- Increase coverage and finance for maternal nutrition within social protection schemes

FOOD system:

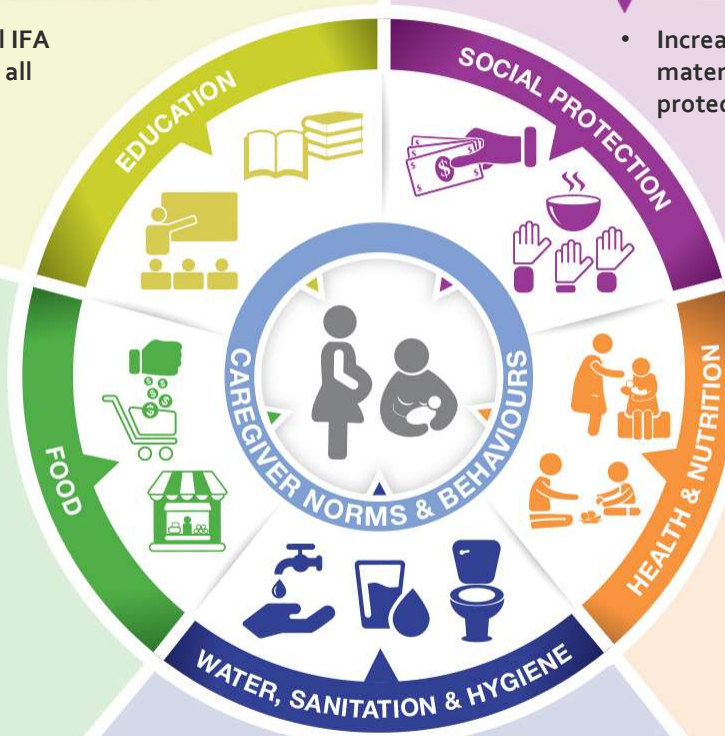
- Strengthen controls on the marketing of unhealthy foods to women by focusing on monitoring and information systems and on the implementation of policies and guidance

HEALTH system:

- Mandatory assessment/monitoring of the nutritional status of pregnant women
- Strengthen capacity to delivery services by improving preservice and in-service training with online learning
- Improve the procurement, storage, distribution, delivery and use of micronutrient supplements including MMS

WASH system:

- Integrate WASH into maternal nutrition counseling and SBCC strategies





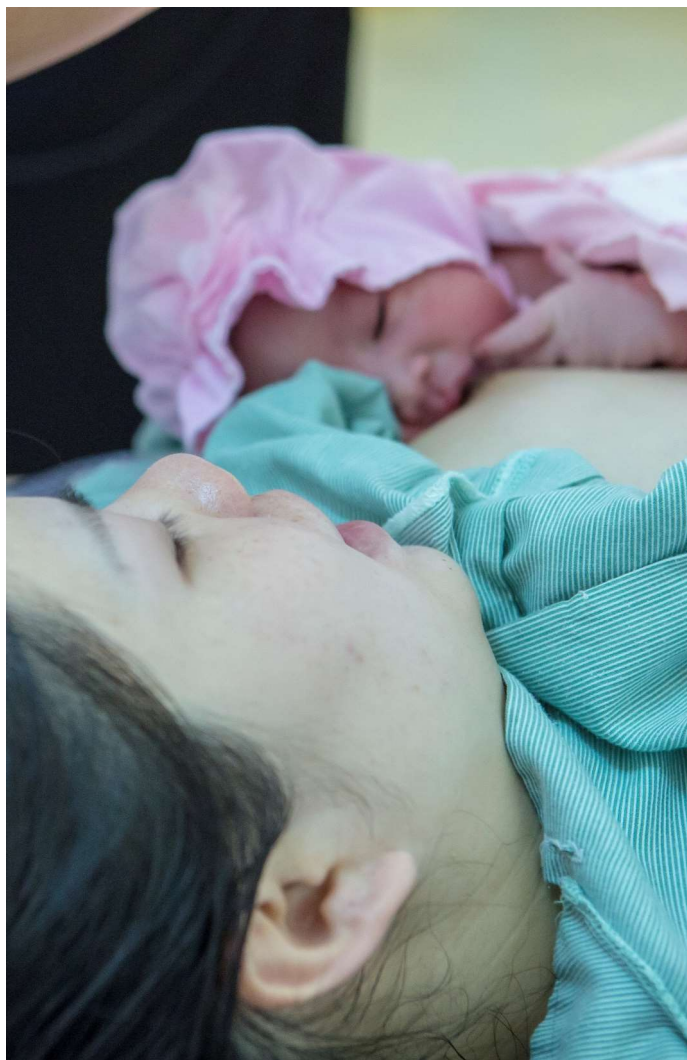
Next Steps to Improve Complementary Feeding and Maternal Nutrition in ASEAN

DEVELOPMENT OF ASEAN GUIDELINES AND MINIMUM STANDARDS FOR THE PROTECTION, PROMOTION AND SUPPORT OF BREASTFEEDING AND COMPLEMENTARY FEEDING



- Establishes a set of minimum policies, programmes and interventions that ASEAN Member States should use as a part of a robust nutrition strategy to improve IYCF practices
- The purpose is to guide countries on how to protect and promote diets and practices through specific interventions and nutrition services that support optimal IYCF practices and to improve implementation of the Breast-milk Substitutes (BMS) Code in ASEAN Member States.

DEVELOPMENT OF ASEAN GUIDELINES AND MINIMUM STANDARDS FOR MATERNAL NUTRITION



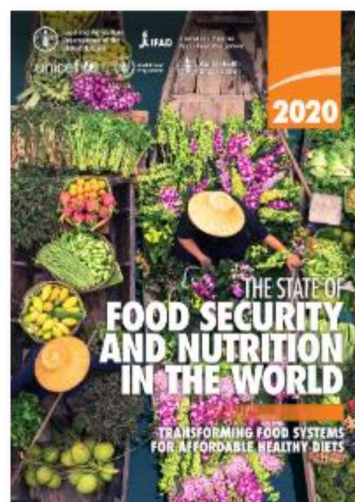
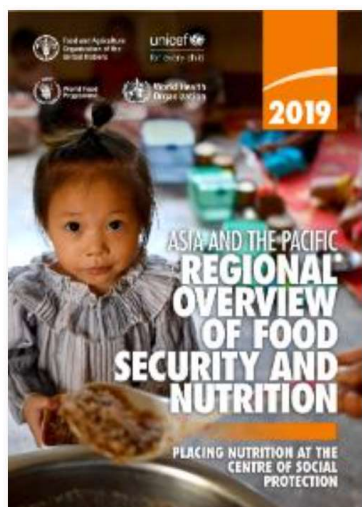
- The guidance outlines the essential strategies, interventions and approaches countries should aim to include in a comprehensive maternal nutrition strategy
- Multisectoral approaches to the design, implementation, and monitoring of maternal nutrition practices in the ASEAN region
 - Provision of counselling
 - Weight gain monitoring
 - Micronutrient supplementation during pregnancy
 - Postpartum nutrition support
 - Receipt of IFA for adolescent girls
 - SBCC strategies for maternal nutrition

REVIEW OF MICRONUTRIENT SYRUP QUALITY FROM FIVE ASEAN COUNTRIES



- Assessment of macronutrient and micronutrient content of micronutrient syrup samples collected from Cambodia, Indonesia, Myanmar, Philippines and Vietnam.
- Marketed to children under 5 years of age for the contribution of essential nutrients the diets of young children.
- External validation of the nutrient content against product labels.
- Used to inform programmatic recommendations on the promotion and use of commercially marketed micronutrient syrups in the five EAPR countries.

ASIA AND THE PACIFIC REGIONAL OVERVIEW OF FOOD SECURITY AND NUTRITION WILL BE LAUNCHED IN 2020



- The 2020 Theme is: A Systems Approach to Maternal and Young Child Diets in the Asia Pacific Region

LAUNCH OF MATERNAL AND CHILD NUTRITION JOURNAL SUPPLEMENT: “TRIPLE TROUBLE: RESEARCH AND ANALYSIS ON THE MULTIPLE BURDENS OF MALNUTRITION IN SOUTHEAST ASIA AND THE PACIFIC REGION” AT THE MICRONUTRIENT FORUM: CONNECTED IN NOVEMBER

• <https://onlinelibrary.wiley.com/journal/17408709>



THREE STATUS AND DETERMINANTS OF FOOD SECURITY AND UNDERNUTRITION (SDFU) SURVEYS ONGOING IN PHILIPPINES, INDONESIA AND MYANMAR



- Targeted to urban poor communities
- Methodology modified for COVID-19 with a focus on food security and dietary intake in young children and their mothers

unicef 
for every child

