

A young child with dark skin is sitting on a bed, looking upwards and to the right with a thoughtful expression. The child is wearing a light green diaper and a colorful, patterned blanket. The background is a blue wall with some white patches. The text is overlaid on the right side of the image.

The First 1000 Days: Shaping Children's Future

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**G7 International Symposium on
Food Security and Nutrition**

Tokyo, Japan

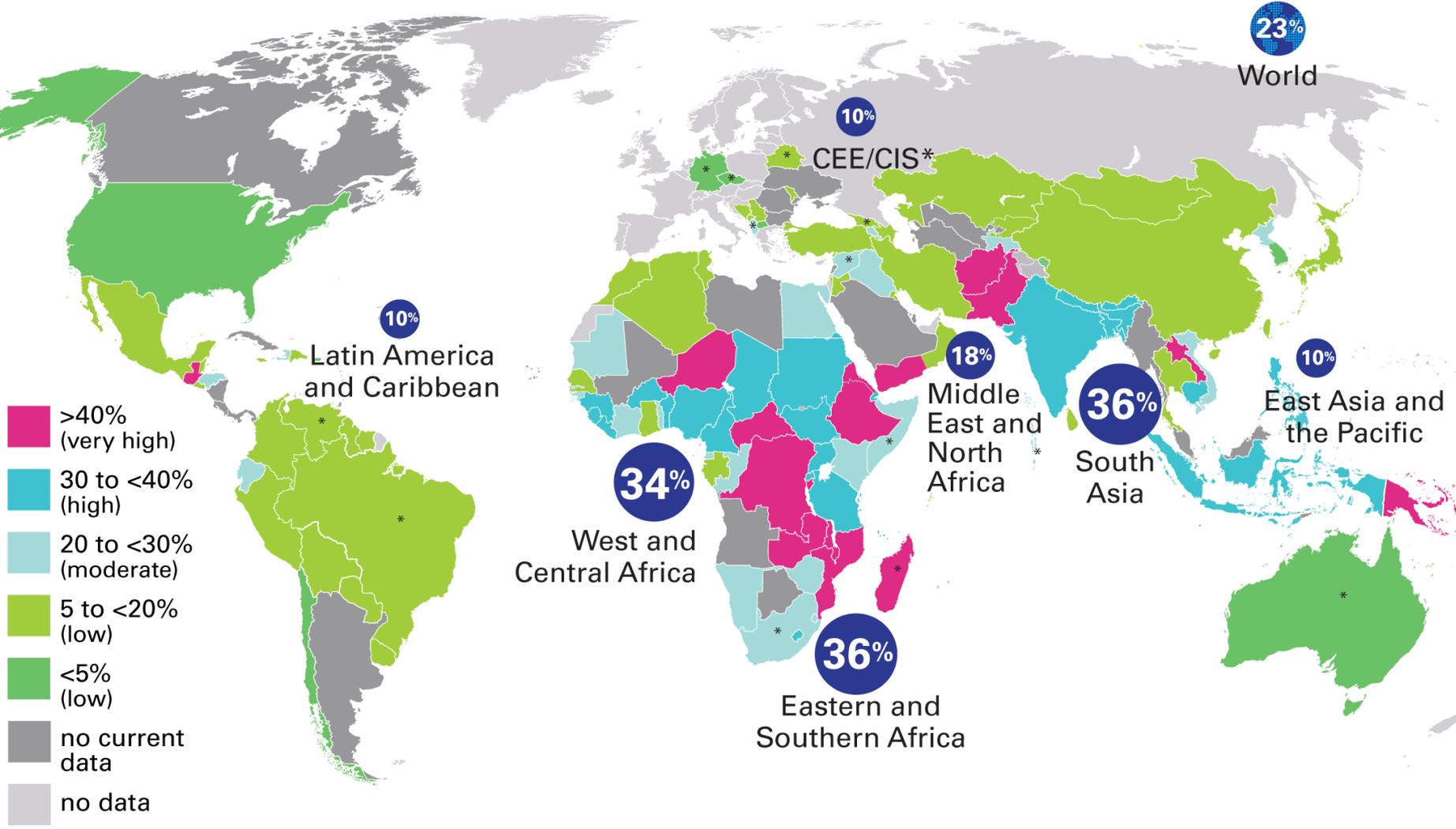
25-26 October 2016

What would you do if you knew that something existed that helps...?

- Children to survive
- Prevent common illnesses in children
- Children grow
- Children reach their full potential
- Contribute to economic growth

And more....

High rates of stunting persist



▲ Per cent of stunted children under 5, 2015

There are also other forms of malnutrition

Stunting

- 156 million children under 5 are stunted

Wasting

- 50 million children under 5 are wasted
 - 16 million are severely wasted

Micronutrient deficiencies

- About 2 billion people are deficient in key vitamins & minerals
 - Women and children are most vulnerable

Overweight/obesity

- 42 million children under 5 are overweight/obese

What is stunting?



Consequences of stunting

Short-term consequences



Mortality

5X greater likelihood of a stunted child to die from all causes ¹



Morbidity

50% of years lived with disability in children under 4 are attributable to nutritional deficiencies ²

Long-term consequences



Increased risk of overweight and raised blood pressure in adulthood

With faster relative weight gain after age 2 (compared to linear growth), there is an **1.5**-fold increased risk of overweight and **1.07**-fold increase in risk of hypertension in adulthood ³



Increased risk of cardiovascular disease

A 1 kg rise in birthweight is associated with a **12%** reduction in cardiovascular mortality for low birthweight babies ⁴



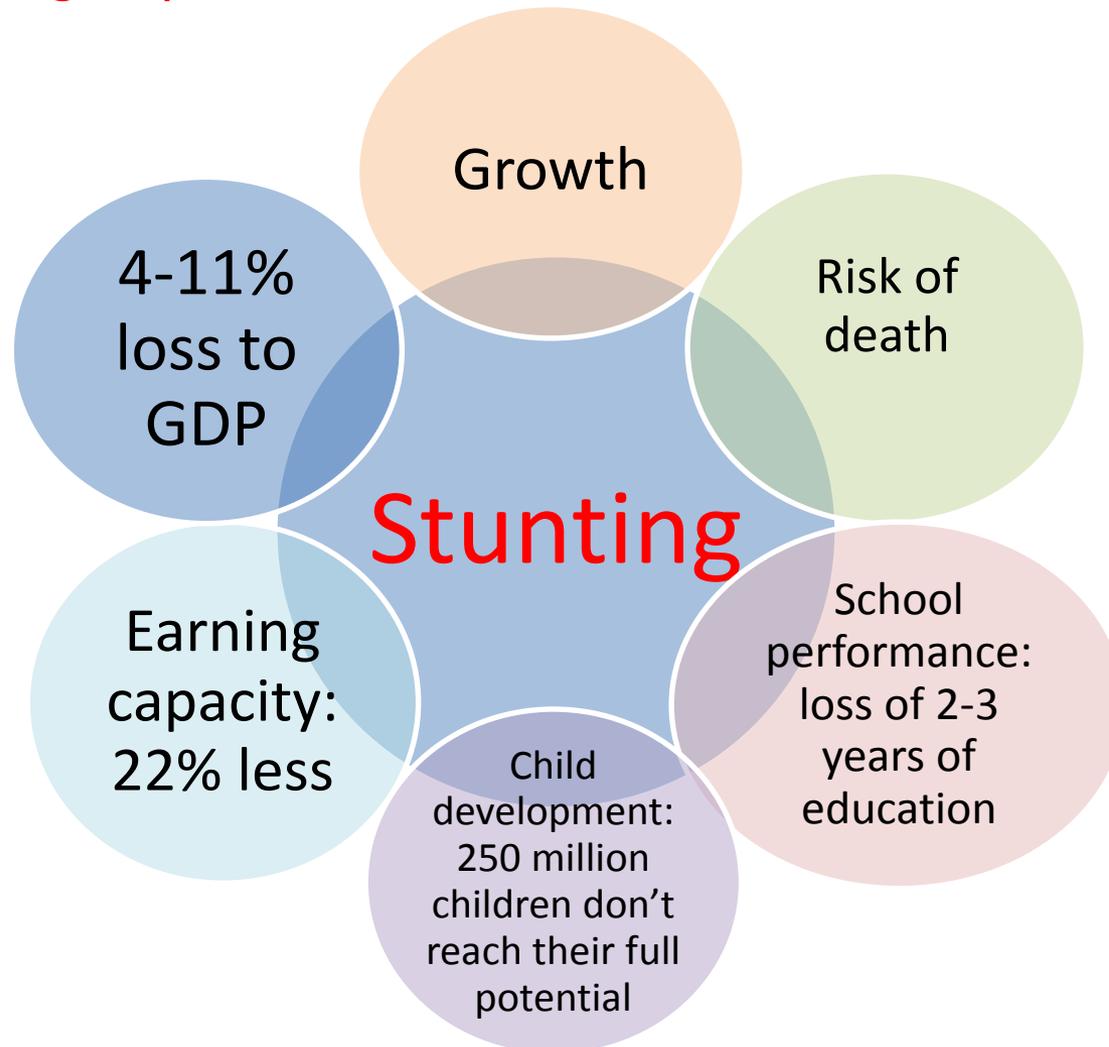
Intergenerational transfer

Stunted women are **3X** more likely to give birth who are stunted at age 2 ⁵

Sources: 1. Olofin et al., 2013; 2. Vos et al., 2012 (includes other nutritional deficiencies); 3. Adair et al. 2013; 4. Risnes et al., 2011; 5. Haddad, 2013.

Stunting causes multiple deprivations

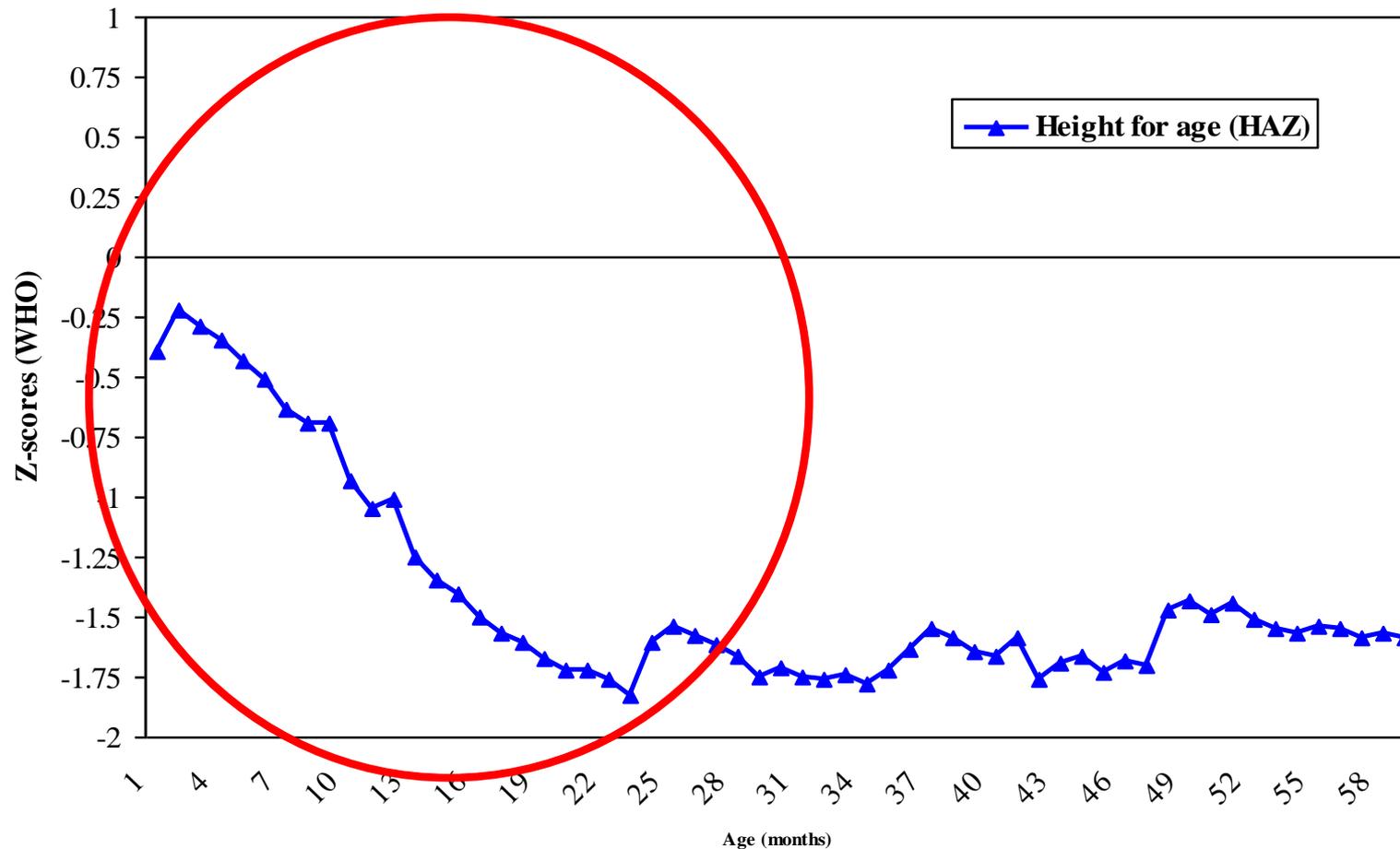
Stunting impacts more than health and nutritional status:



What can be done?

The first 1000 days: The 'window' of opportunity – pregnancy through 2 years of age

The majority of growth faltering occurs during the first 2 years of age

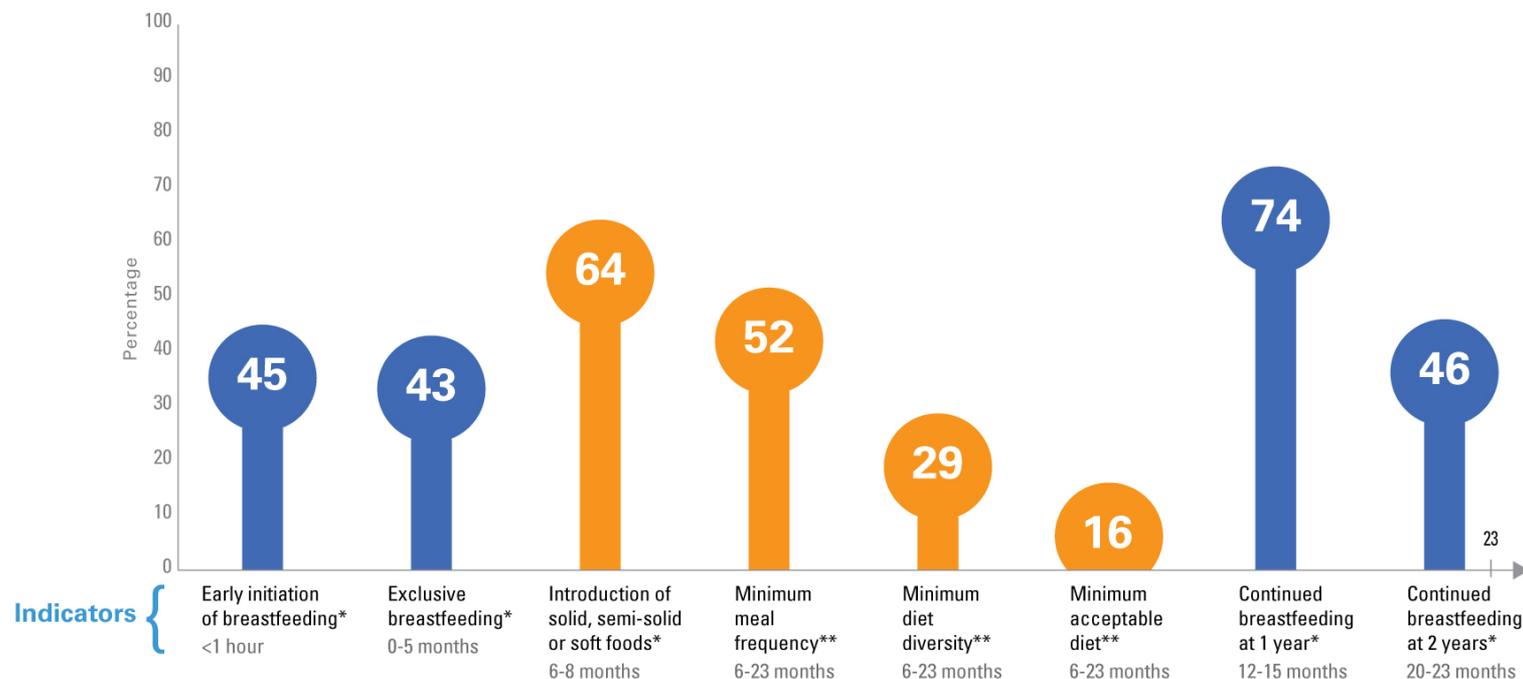
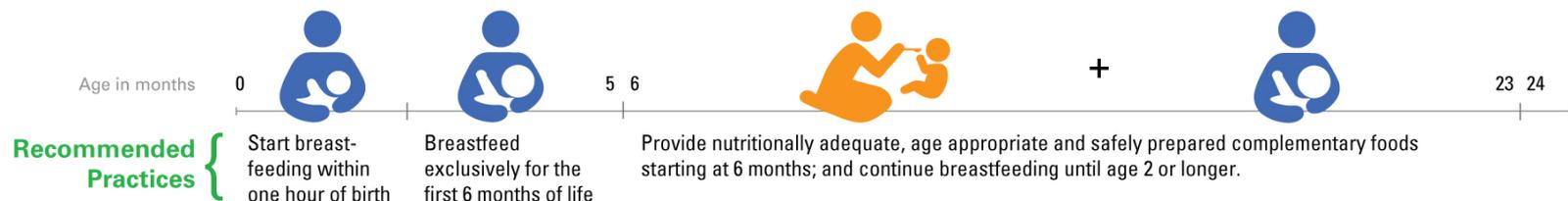


Mean anthropometric z-scores by age for all 54 studies, relative to the WHO standard

SCALE UP A CORE PACKAGE OF NUTRITION SPECIFIC INTERVENTIONS



Too few children are getting the nutrition they need to survive, grow and develop during the first 1,000 days



Per cent of children: put to the breast within one hour of birth, exclusively breastfed (0-5 months); introduced to solids (6-8 months), with a minimum meal frequency, minimum diet diversity and minimum acceptable diet (6-23 months) and continued breastfeeding at 1 year (12-15 months) and 2 years (20-23 months), 2015*.

Making the case for improved infant and young child feeding: The importance of breastfeeding

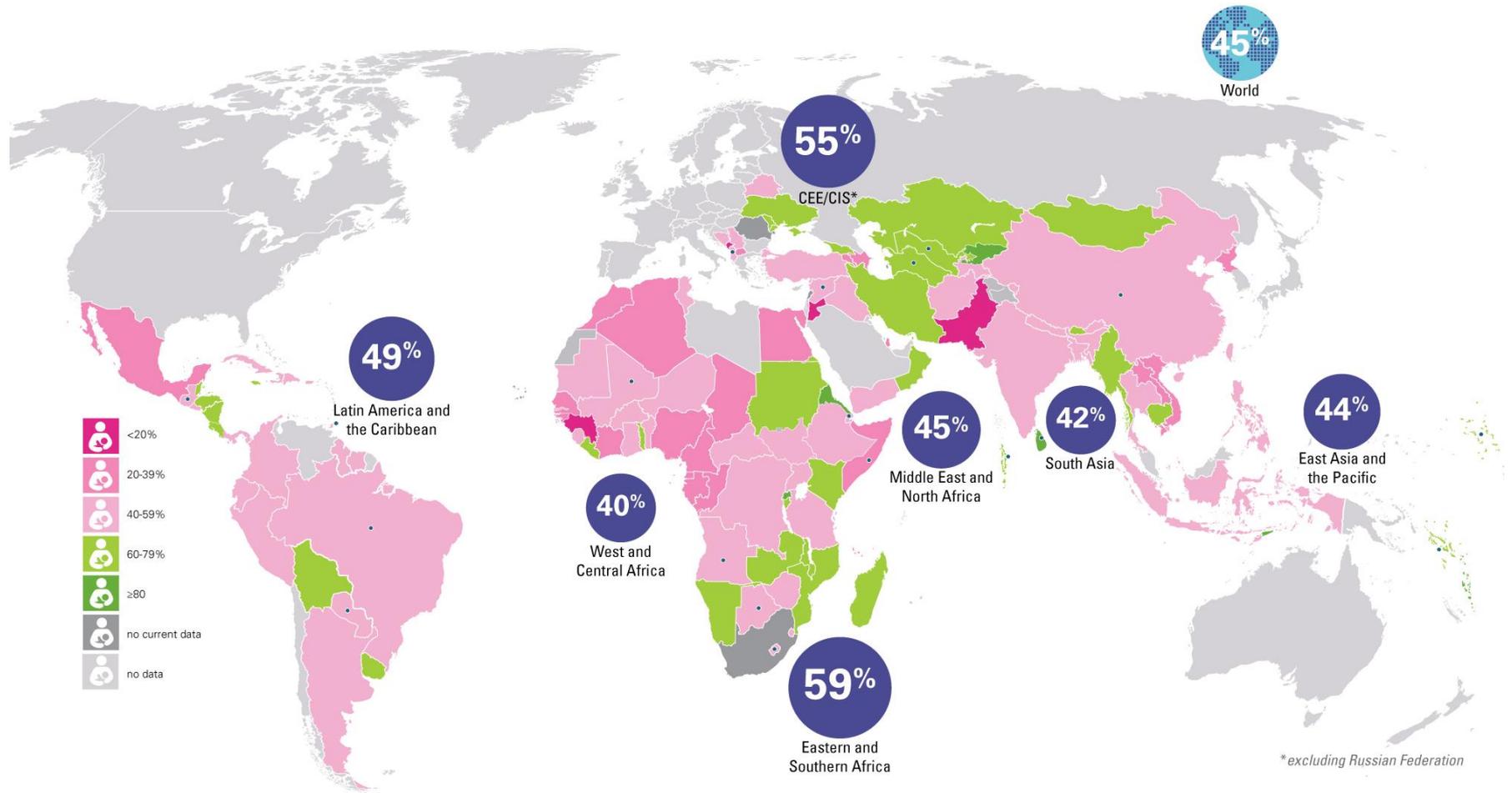
- Breastmilk is more than just food – it is a **potent medicine** tailored to the needs of each child.
- Exclusive breastfeeding is the **safest and healthiest** option for children everywhere.
- Long periods of breastfeeding are associated with **higher intelligence scores**, and there is evidence that this translates into improved academic performance and long-term earnings
- There is growing evidence that breastfeeding may also **reduce the incidence of overweight, obesity and chronic diseases** later in life.

Black, RE et al. Maternal and child undernutrition and overweight in low-income and middle-income countries. *The Lancet*, 2013;382, 427-51.

Victora, C.G., et al., Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect. *Lancet*, 2016. 387(10017): p. 475-90.

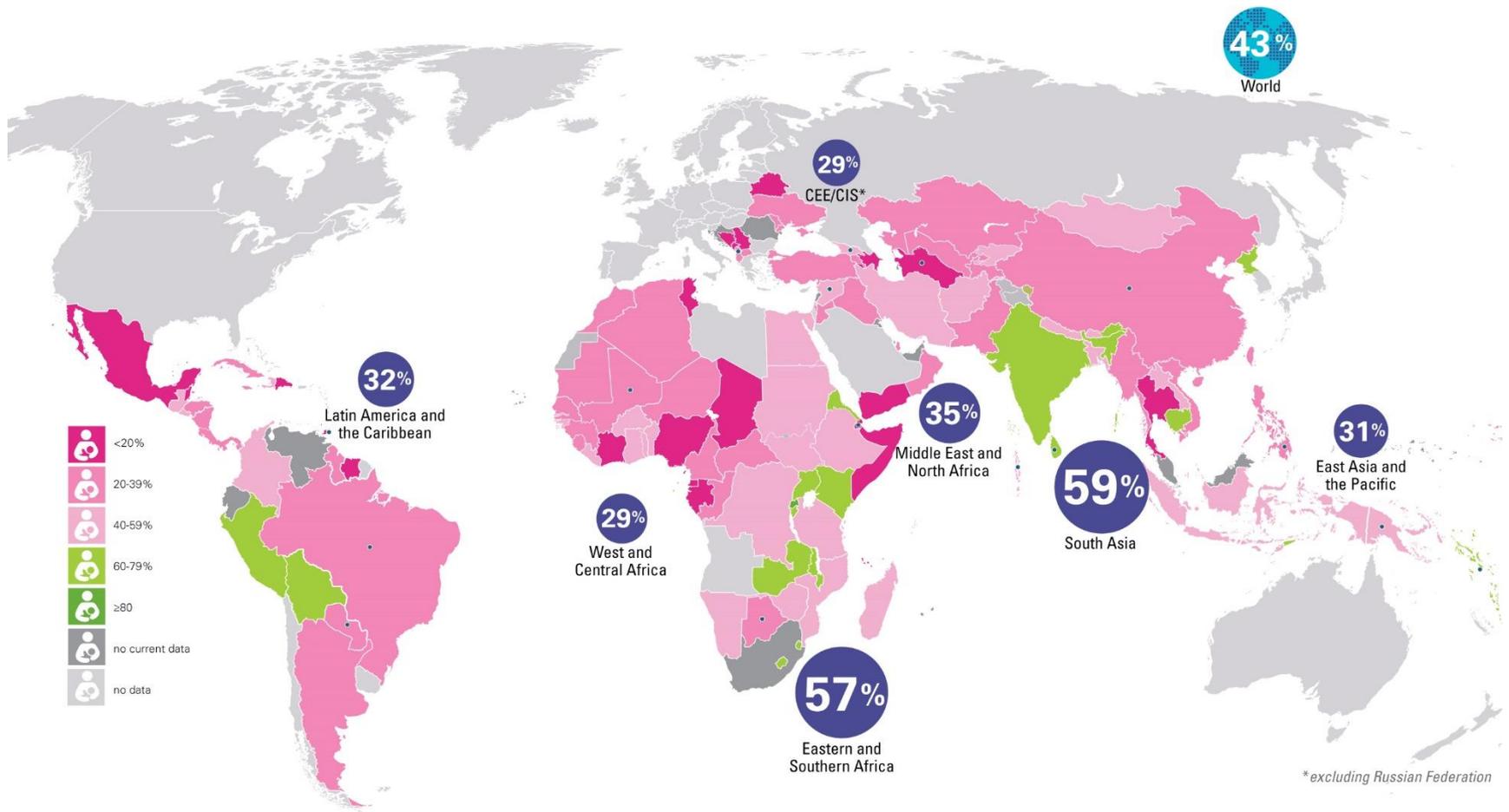
Sankar, M.J., et al., Optimal breastfeeding practices and infant and child mortality: a systematic review and meta-analysis. *Acta Paediatr*, 2015. 104(467): p. 3-13.

Globally, less than half of all newborns are put to the breast within one hour of birth



 Per cent of newborns put to the breast within one hour of birth, by country and region, 2015

Globally, just over two out of five infants are exclusively breastfed



Per cent of infants 0-5 months of age exclusively breastfed, by country and region, 2015

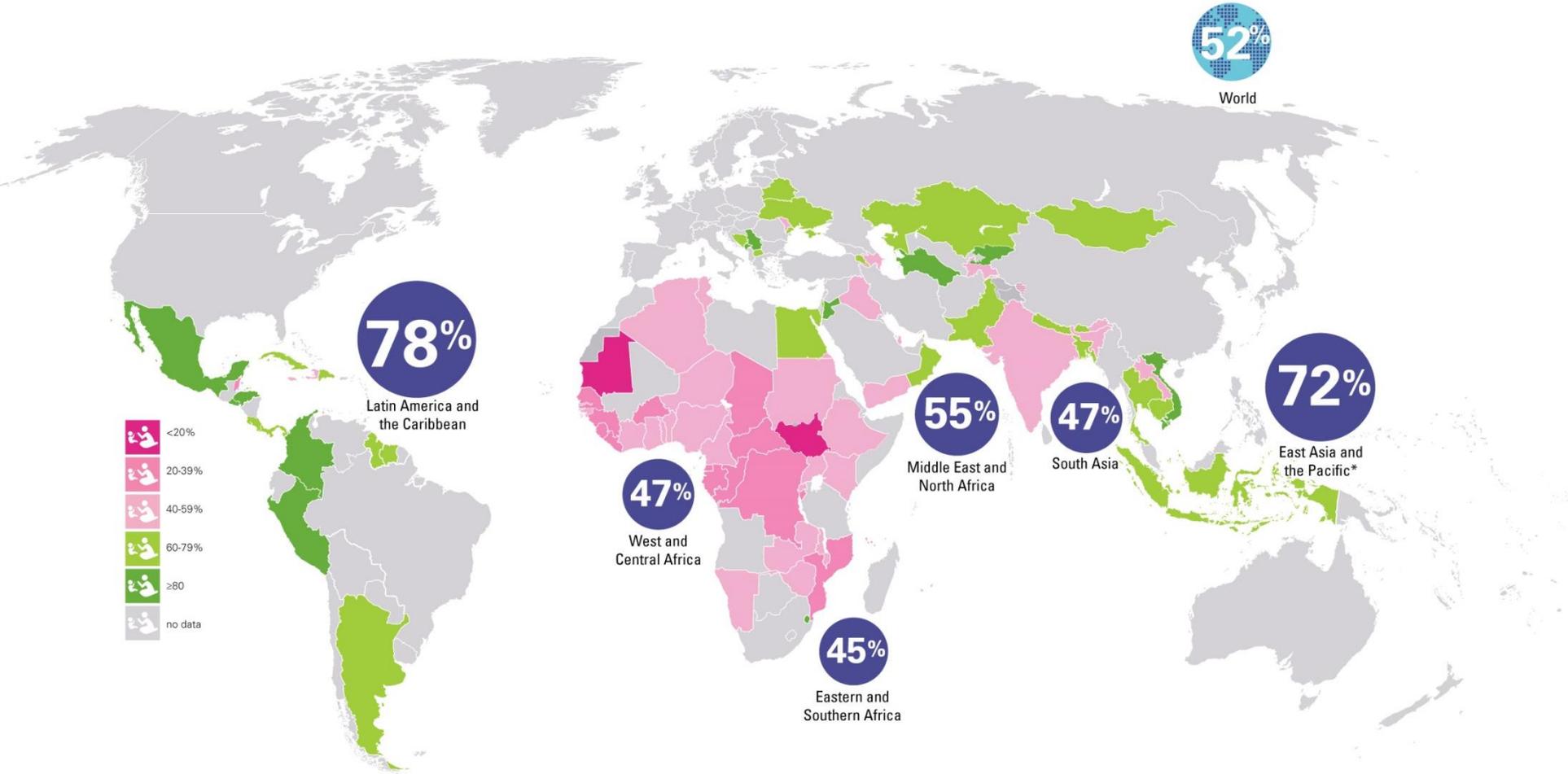
Making the case for improved infant and young child feeding: The importance of complementary feeding

- Starting at 6 months of age, children's nutrient needs are greater than what breastmilk alone can provide. Feeding of solid, semi-solid or soft foods from 6 months of age is key to prevent deficiencies that could result in undernutrition.⁴
- Feeding patterns that meet at least minimum frequency and diversity standards are essential to **preventing micronutrient deficiencies, stunting and wasting.**
- If appropriate complementary feeding practices were scaled-up to nearly universal levels, **approximately 100,000 deaths in children under five could be averted each year.**⁵

4. WHO Programme of Nutrition., Complementary feeding of young children in developing countries: a review of current scientific knowledge. 1998, Geneva: World Health Organization. 228 p.

5. Bhutta, Z.A., et al., Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost? Lancet, 2013. 382(9890): p. 452-77.

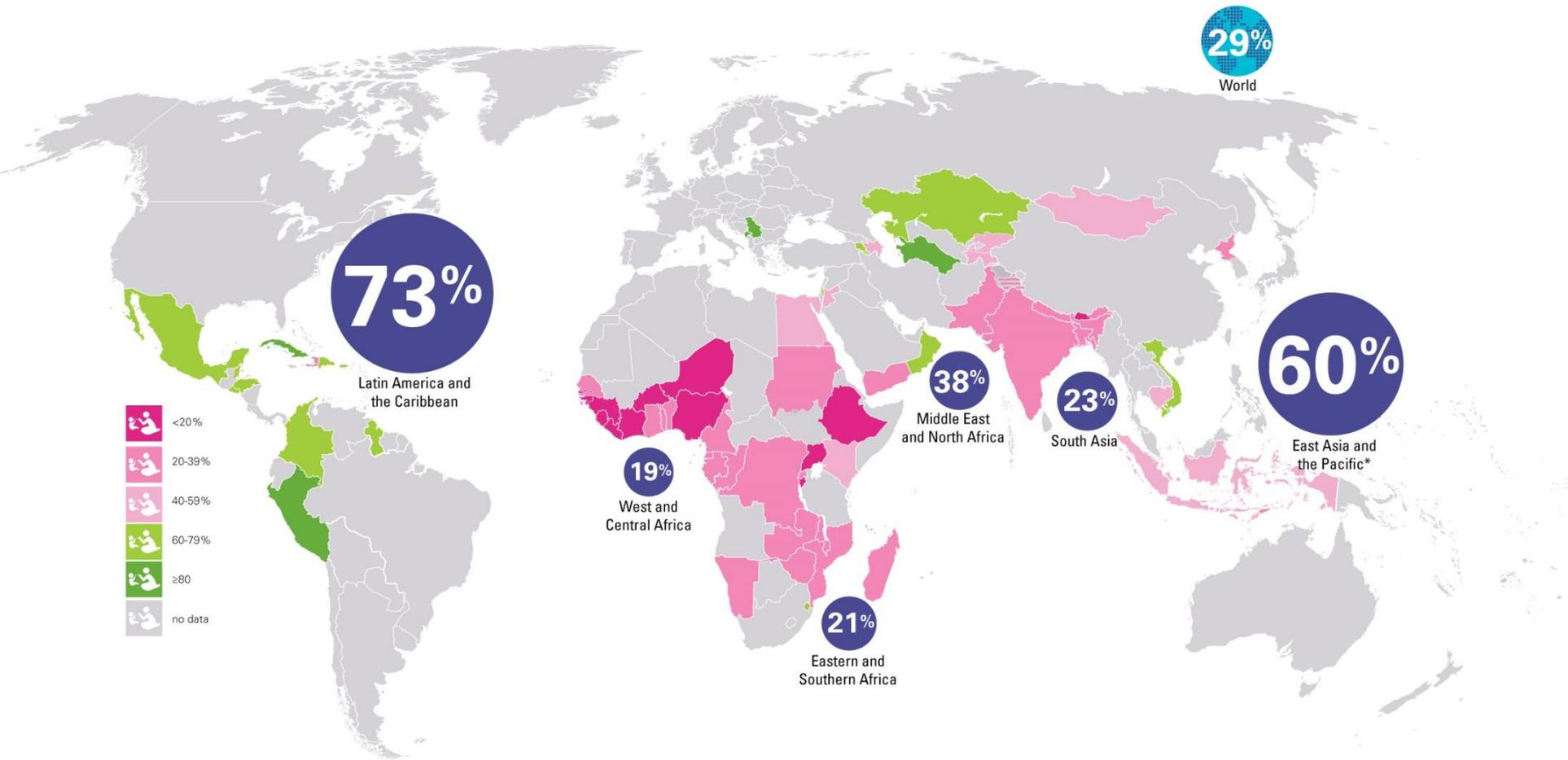
Globally, even in the richest households, far too few receive a minimum meal frequency



Per cent of children 6-23 months of age with minimum meal frequency, 2015

Source: UNICEF global databases, 2016

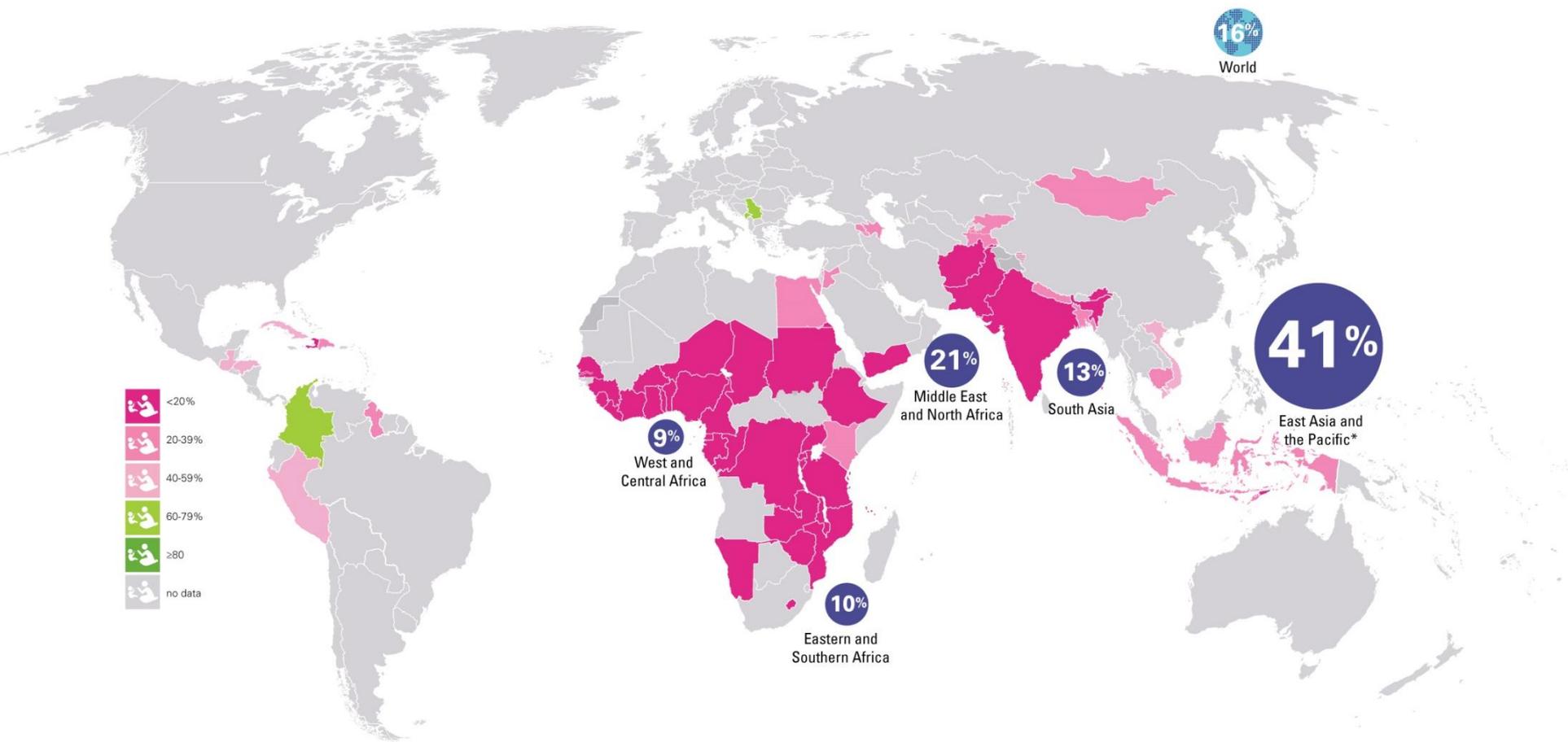
Only one in four children is eating food from the minimum number of food groups



Per cent of children 6-23 months of age with the minimum diet diversity, 2015

Source: UNICEF global databases, 2016

The per cent of children eating a diet that has both the minimum diversity and minimum frequency is shockingly low



Per cent of children 6-23 months of age with a minimum acceptable diet, 2015

Children's diets are a shared responsibility – no single household can do it alone

All sectors of society need to contribute to guarantee that nutritious food for children is available, affordable, safe and provided with care.



The Way Forward for Infant and Young Child Feeding

- Fully implement the International Code of Marketing of Breastmilk Substitutes
- Enact legislation and adopt policies in line with the Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children
- Enact family leave and workplace breastfeeding policies
- Select and combine multiple strategies and interventions
- Coordinate actions among key government sectors
- Harness the potential of the private sector
- Create monitoring systems

Access the full report and Key Findings brochure:

<https://data.unicef.org/resources/first-hour-life-new-report-breastfeeding-practices/>

**Thank You
Arigato**

