

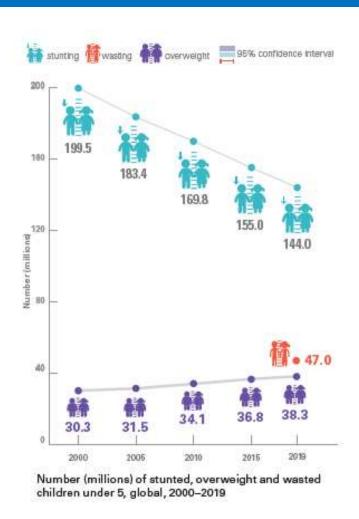
Child malnutrition and COVID-19

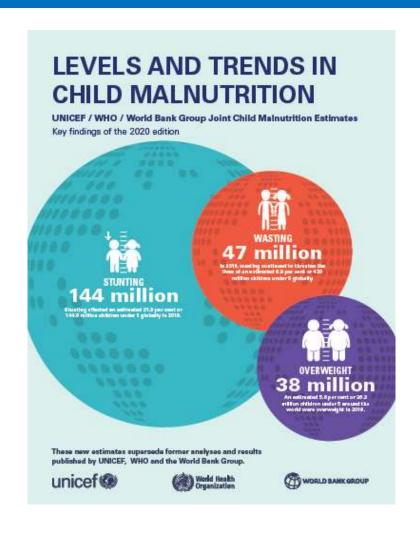
The time to act is now

Victor Aguayo, PhD



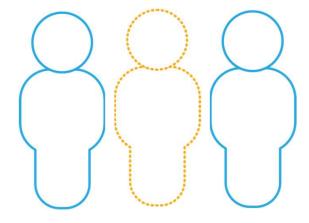
Double burden of child malnutrition



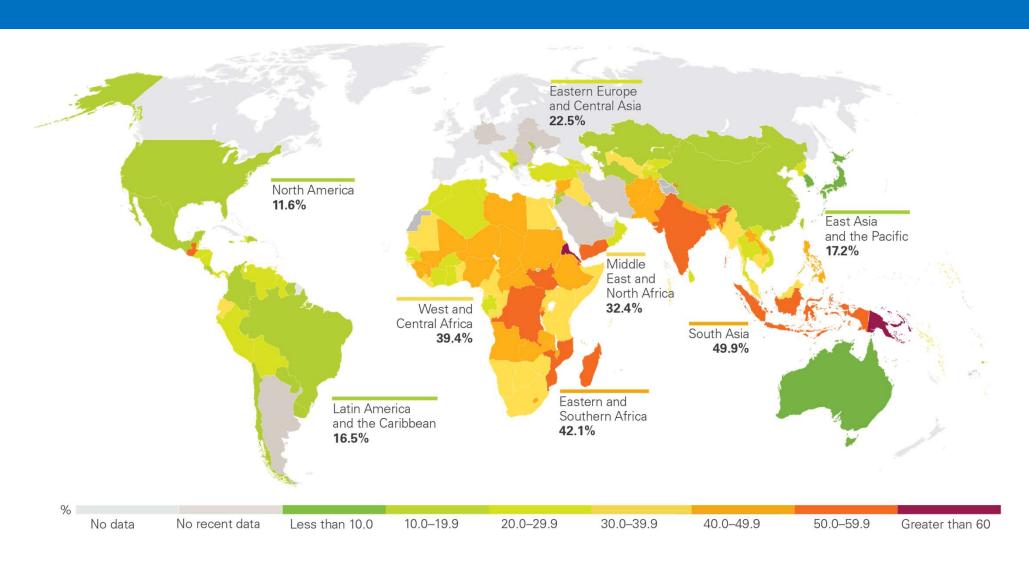


Proportion of children not growing well

1 in 3 children is not growing well (stunted, wasted, or overweight)

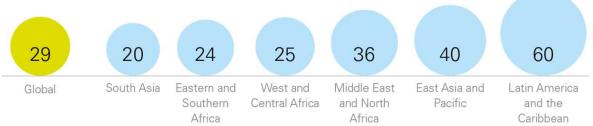


Proportion of children not growing well



Two in three children are not fed a minimum adequate diet







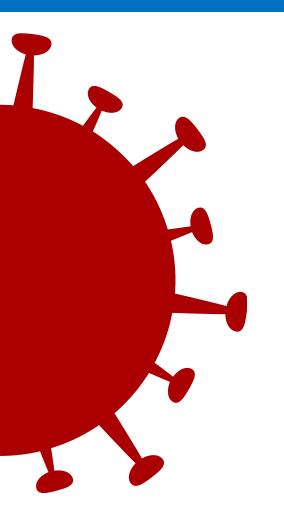


59% of children worldwide are not being fed much-needed nutrients from animal source foods.



44% of children worldwide are not fed any fruits or vegetables.

COVID-19 will worsen this situation



- Physical distancing
- School closures
- Trade restrictions
- Country lockdowns
- Disrupted services
- Halted humanitarian response
- Unemployment
- Poverty



Impacts of COVID-19 on childhood malnutrition

Impacts of COVID-19 on childhood malnutrition and nutrition-related mortality



The unprecedented global social and economic crisis triggered by the COVID-19 pandemic poses grave risks to the nutritional status and survival of young children in low-income and middle-income countries (LMICs). Of particular concern is an expected increase in child

economic and health systems impacts from COVID-19 on malnutrition and mortality: MIRAGRODEP's macro-economic projections of impacts on per capita gross national income (GNI);⁴ microeconomic estimates of how predicted GNI shocks impact child wasting using

Published Online July 27, 2020 https://doi.org/10.1016/ S0140-6736(20)31647-0 See Online/Comment https://doi.org/10.1016/ S0140-6736(20)31648-2

- Number of children wasted ↑ 14.3%
- 6.7 million (additional) children wasted
- During the first 12 months of the pandemic

The time to act is now!

Child malnutrition and COVID-19: the time to act is now



The COVID-19 pandemic is undermining nutrition across the world, particularly in low-income and middle-income countries (LMICs).¹ The worst consequences are borne by young children. Some of the strategies to respond to COVID-19—including physical distancing,

four life-saving interventions: prevention of wasting in children at risk; treatment for children who are wasted; biannual vitamin A supplementation for children aged 6–59 months (90% coverage); and mass communication for the protection, promotion, and support of breast-

Published Online July 27, 2020 https://doi.org/10.1016/ S0140-6736(20)31648-2 See Online/Comment https://doi.org/10.1016/ S0140-6736(20)31647-0

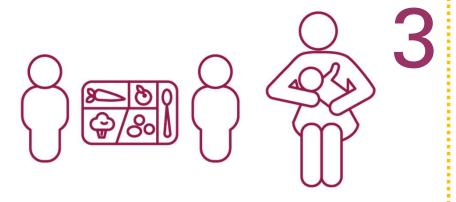


- UNICEF
- FAO
- WFP
- WHO



Protect, promote and support access to nutritious, safe, and affordable diets as a cornerstone of the response to COVID-19

Maintain school meals for vulnerable children through home delivery, takehome rations, and cash/vouchers while schools are closed



Prioritize nutrition through pregnancy and early childhood, protect breastfeeding, and prevent marketing of infant formula

Reactivate and scale up services for the early detection and treatment of child wasting while expanding other nutrition services



Scale up social protection programmes to safeguard access to nutritious diets and essential services among the poorest households.



