

CHILDHOOD STUNTING: Challenges and opportunities



REPORT OF A COLLOQUIUM



World Health
Organization

Childhood Stunting: Challenges and Opportunities



Report of a webcast
colloquium on the operational
issues around setting and
implementing national
stunting reduction agendas

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EXECUTIVE SUMMARY


While global mobilization around stunting is visible, a lot remains to be done in defining how effective actions/interventions – many of them known – are to be implemented at scale to achieve sustained impact. Global trends (1990 to 2012) show an overall reduction in the burden of under-five stunting but regional and by income level trends are disparate. For example, whereas the number stunted was halved in Asia and Latin America/Caribbean, the burden in Africa increased by 24% in the same period. (1) Similar disparities are observable within regions, sub-regions and countries, and imply that measures to prevent stunting must address exact causes embedded in socioeconomic and geographic contexts.

“High-level political commitment to implement actions/interventions at scale is an important first step that should give momentum to the design of country-specific plans for stunting reduction down to grassroots level”

The stunting reduction agenda has been driven to date by global actors steering high-level initiatives and procuring significant donor commitments. A growing number of countries is taking up the global initiatives by setting priorities for action and mobilizing for improved maternal and child nutrition, with childhood stunting as the main indicator for monitoring progress. The Scaling Up Nutrition (SUN) Movement supports national mobilization efforts in a structured approach based on four objectives: creating political and operational multi-stakeholder platforms; incorporating best practices into national policies; developing costed country plans with an agreed results framework and mutual accountability; and tracking finance and increasing resources for coherent, aligned, effective actions and maximum impact.

High-level political commitment to implement actions/interventions at scale is an important first step that should give momentum to the design of country-specific plans for stunting reduction down to grassroots level. A detailed situation analysis should be used to identify the causes of stunting and existing gaps in capacity and resources for intervention/action at disaggregated subnational levels. An operational framework should then be developed and agreed among committed partners to guide and facilitate horizontal inter-sectoral and vertical collaboration in the implementation of actions and monitoring of outcomes.

The colloquium provided a forum for the exchange of government, civil society, academia, donor, UN agency and SUN Movement perspectives on the challenges and opportunities of setting and implementing stunting reduction agendas at country level. This report is a synthesis of insights expected to be of interest to persons involved in national stunting reduction as central level coordinators or stakeholders, sub-national implementers and as community and grassroots mobilizers.

A photograph of a young boy with dark skin and curly hair, wearing red and blue shorts, standing against a height measurement board. A healthcare worker in a white lab coat is measuring his height. Another person in a blue and white striped shirt is partially visible in the foreground, looking down at the boy. The background shows a simple room with a white wall and a blue door frame.

The number stunted was halved in Asia and Latin America/Caribbean, the burden in Africa increased by 24% between 1990 and 2012

BACKGROUND

"The stunting reduction agenda would benefit greatly from an alignment of the goals driving global mobilization, national level coordination, subnational level implementation of plans, and grassroots participation"

Childhood stunting is an outcome of maternal undernutrition and inadequate infant and young child feeding (IYCF), a correlate of impaired neurocognitive development, and a risk marker for non-communicable diseases and reduced productivity in later life. The ambitious World Health Assembly (WHA) target to achieve, by 2025, a 40% reduction in the number of under-five stunted children¹ has provided a focus and rallying point for commitments by national governments and international development partners.

A number of high-level political processes are underway globally to put in place collaborative mechanisms, develop coordination and monitoring frameworks, mobilize resources and build strategic alliances.²

Complementary efforts are ongoing to build the evidence base, refine strategies, and provide technical assistance to countries to address stunting and other maternal and child malnutrition priorities. For example,

Scientific evidence presented at a UNICEF-hosted seminar in August 2012 re-emphasized the importance of the 1000-day window (from conception to 24 months of age) when the foundation is laid for an individual's physical size as well as their physiological and intellectual capacities in later life. The expert speakers at the seminar explained the biology of early growth and development, the long-term consequences of childhood stunting, and what is needed in terms of nutrition and care to optimize child growth and development.

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