



# STUNTING

## THE GOAL

By 2025, reduce by 40% the number of children aged under 5 years who are stunted

### WHY IT MATTERS

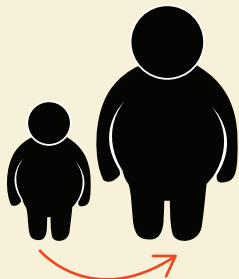


Stunting is a largely irreversible outcome of **inadequate nutrition & repeated bouts of infection**

during the first **1,000 days** of a child's life



Stunting has **long-term effects, including:** Diminished cognitive and physical development, reduced productive capacity and **poor health**



Stunted children have an increased risk of becoming **overweight or obese later in life**



Reduced school attendance results in diminished earning capacity; **an average of 22% loss of yearly income in adulthood**



### RECOMMENDED ACTIONS

#### SCALE UP PREVENTION

**WHAT?** Scale up coverage of stunting-prevention activities



**HOW?** Improve the identification, measurement and understanding of stunting

#### MATERNAL NUTRITION

**WHAT?** Improve the nutrition of women of reproductive age



**HOW?** Enact policies and/or strengthen interventions to improve maternal nutrition and health, beginning with adolescent girls

#### SUPPORT BREASTFEEDING

**WHAT?** Support optimal breastfeeding practices



**HOW?** Implement interventions for improved exclusive breastfeeding and complementary feeding practices

#### COMMUNITY SUPPORT

**WHAT?** Provide community-based strategies to prevent infection-related causes of stunting



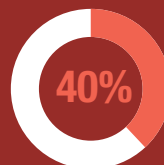
**HOW?** Strengthen community-based interventions, including improved water, sanitation and hygiene

Globally, approximately **162 million children** under the age of 5 years are stunted

### SCOPE OF THE PROBLEM

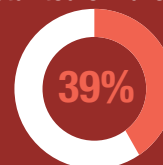


Sub-Saharan Africa and South Asia are home to **three quarters** of the world's stunted children



Sub-Saharan Africa

40% of children under 5 are stunted



South Asia

39% of children under 5 are stunted