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.

Young children who were stunted were 33% less likely to escape poverty as adults.

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

SCOPE OF THE PROBLEM

Globally, approximately 151 million children under the age of 5 years are stunted.

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

55% of stunted children are living in Asia
39% of stunted children are living in Africa