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## WHO report on infant and young child nutrition: Global problems and promising developments

More than 30% of the world's under-five-year-old children – about 192 million in all – are still malnourished and underweight. Over two-thirds (80%) of these children live in Asia – especially southern Asia – 15% in Africa, and 5% in Latin America. Nevertheless, there has been a worldwide decrease since 1975 in the prevalence of protein-energy malnutrition, except for Africa where the absolute number of malnourished children has increased due to population growth. This is one of the important conclusions of a report that summarizes the global situation of malnutrition among children under five years of age, and takes stock of action by WHO and its Member States to improve infant and young child feeding, including by giving effect to the International Code of Marketing of Breast-milk Substitutes, which the World Health Assembly adopted in 1981. The report has been discussed by the Executive Board of WHO at its Ninety-third Session (Geneva, 17–27 January 1994).\*

Apart from the data on protein-energy malnutrition just mentioned, the report reviews the situation concerning iodine, vitamin A and iron, which are all vital to human health. Iodine deficiency disorders (IDD), the greatest worldwide cause of

preventable brain damage in infants and young children, is currently a significant public health problem in 118 countries: 1571 million people live in iodine-deficient environments and are therefore at risk of IDD, while 655 million people actually have goitre. Approximately half the global total of those affected by IDD is found in Asia, but there are also 86 million affected by goitre in the African region. Even an estimated 11.4% of Europe's population is still affected. Tangible progress in salt iodization, the single most efficient long-term measure to prevent IDD, is being made in many countries – for example in China, in countries of South-East Asia, and in Africa. Despite the magnitude of the problem, WHO specialists anticipate that IDD will be eliminated as a major public health problem by the year 2000.

More than a quarter of a million children are estimated to go blind every year due to a deficiency of vitamin A, and some 14 million currently exhibit signs of clinical xerophthalmia ranging from dryness to severe ulceration. At least 50 million more children have deficient vitamin A body stores, which compromises their health and reduces their chances of survival. The report stresses that improving the

vitamin A status of deficient child populations six months to six years of age contributes significantly to decreasing the risk of mortality. The primary intervention strategies to achieve vitamin A goals are the improvement of vitamin A status by promoting exclusive breast-feeding for the first four to six months of life, and regular consumption of vitamin A-containing foods during the complementary and post-complementary feeding periods.

Iron deficiency in infants and young children is directly related to the truly massive problem of anaemia in women. Some 58% of pregnant women in developing countries are anaemic, with the result that infants are born with low birth weight and depleted iron stores. Iron deficiency in early childhood is associated with higher mortality and impairment of cognitive development. A 1985 WHO global assessment of anaemia indicated that 51% of under-five-year-old children in developing countries were anaemic. Breast milk contains enough iron for infants up to four

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\* Infant and young child nutrition (Progress and evaluation report; and status of implementation of the International Code of Marketing of Breast-milk Substitutes). Geneva, World Health Organization, document EB93/17.

months of age. Artificial feeding and weaning diets, however, are often very low in iron, and the iron from vegetable sources is very poorly absorbed partly owing to inhibiting substances, for example tannic acid in tea or phytates in flour, or low levels of vitamin C in the diet.

### Promoting breast-feeding

An important section of the report shows how WHO Member States, professional and other bodies, and consumer groups are encouraging and supporting breast-feeding, including through implementation of the joint WHO/UNICEF Baby-friendly Hospital Initiative. The Initiative is a global movement that aims to give every baby the best start in life by creating a health-care environment where breast-feeding is the norm. By September 1993 nearly 800 hospitals had received certificates of their "baby-friendly" status, with Asian countries leading the world in transforming maternity services according to the Initiative's criteria, including China with 207 hospitals, Indonesia 97, Philippines 102 and Thailand 45.

The report stresses the importance of monitoring trends in the prevalence and duration of breast-feeding, and describes how the WHO global data bank is being restructured using standard indicators derived from households and health care facilities. The report also explains why a revised international growth reference, consistent with the growth patterns of infants who are fed in keeping with WHO recommendations for exclusive breast-feeding during the first four to six months of life, is urgently needed.

Where the International Code of Marketing of Breast-milk Substitutes is concerned, the report describes new action taken in the last two years in 50 countries and

territories, and by the European Community. It notes how governments are using effectively for this purpose both legislative and non-legislative means that are geared to their specific circumstances.

Experience shows, the report notes, that trying to prove the precise effect of infant-formula advertising on breast-feeding practice misses the point that there are inherent dangers in encouraging uninformed decision-making and the bypassing of the mother's physician or other health worker. This is why WHO considers direct advertising of infant formula to mothers with infants in the first four to six months of life singularly inappropriate. Those who suggest that direct advertising has no negative effect on breast-feeding, the report advises, should be asked to demonstrate that such advertising fails to influence a mother's decision about how to feed her infant. The report notes the Health Assembly's distinction between situations where free or subsidized supplies of infant formula would be appropriate or not: whether or not maternity services are provided in a given context. It may be appropriate to provide free or subsidized supplies when: individual infants have to be fed on breast-milk substitutes, *and* a donation or low-price supply of infant formula is made over an extended period (that is, for as long as the infants concerned need it), *and* the donation or low-price supply is not used as a sales inducement.

Recent reports of large sums from public and private sources being spent, in wellmeant solidarity, to provide breast-milk substitutes for distribution through supplementary feeding programmes in countries of central and eastern Europe contrast with the scarcity of resources to protect and promote breast-feeding in these same environments. Clear and practical policy guidance is called for in this connection, for uniform applica-

tion by all governmental, inter-governmental and nongovernmental authorities concerned.

### Diet is crucial for all infants

It is true that in some environments not to breast-feed is particularly dangerous, even life-threatening, because of the high cost of infant formula, lack of clean water, difficulties associated with reading or following mixing instructions, and careless hygiene. However, the report insists, even where these conditions generally do not prevail, a deviation from the biological norm for virtually all infants may not be without danger where the health of infants and, not incidentally, that of their mothers is concerned. Dr Fernando Antezana, WHO Assistant Director-General, sums up the situation this way: "In *all* environments, infants who are artificially fed are at greater risk than infants who are breast-fed".

As the report notes in conclusion, adequate diet is more crucial in infancy than at any other time of life because of the infant's high nutritional requirements in relation to body weight, and the influence of proper or faulty nutrition during the first months on future health and development. The nutritional well-being of people is a precondition for the development of societies; it is all the more so where their most vulnerable members – infants and young children – are concerned. Governments will be unsuccessful in their efforts to accelerate economic development in any significant longterm sense until optimal child growth and development are ensured for the majority.

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