



STUNTING

THE GOAL

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

WHY IT MATTERS

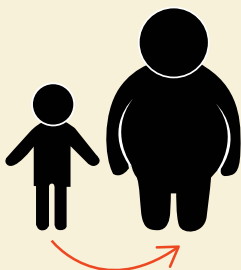


Stunting is a largely irreversible outcome of **inadequate nutrition & repeated bouts of infection**

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**

Updated October 2018

RECOMMENDED ACTIONS

SCALE UP PREVENTION

WHAT? Scale up coverage of stunting-prevention activities

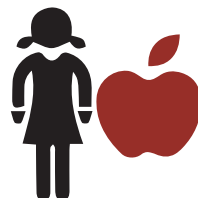
HOW? Improve the identification, measurement and understanding of stunting



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

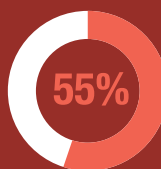


Globally, approximately **151 million children** under the age of 5 years are stunted



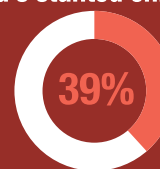
SCOPE OF THE PROBLEM

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



Asia

55% of stunted children are living in Asia



Africa

39% of stunted children are living in Africa