

PRENATAL VITAMINS FOR PREGNANT WOMEN

Many pregnant women cannot get all the nutrients they need from their diet alone. Multiple-micronutrient supplements (MMS) are a prenatal vitamin containing 15 **essential vitamins and minerals.**



Despite being cost-effective and ready to scale, **the vast majority of pregnant women in low- and middle income countries (LMICs) do not have access to MMS.**



In low and middle income countries, women are affected by various forms of undernutrition,

including anemia and micronutrient deficiencies, which puts them at increased risk during pregnancy and can also have negative effects for their babies. MMS can help prevent this by providing a sufficient quantity of nutrients that mothers often lack in low resource settings.¹



Not only does MMS prevent maternal death and stillbirths, it also

substantially increases the chances a baby will be born at a healthy weight and survive to his or her second birthday.



Providing a full 90-day dosage of MMS to pregnant women in 8 countries could **save an additional 563,940 children's lives over 5 years (including stillbirths averted).**

¹ Black RE, Victora CG, Walker SP, Bhutta ZA, Christian P, de Onis M, Ezzati M, Grantham-McGregor S, Katz J, Martorell R, Uauy R; Maternal and Child Nutrition Study Group. Maternal and child undernutrition and overweight in low-income and middle-income countries. Lancet. 2013 Aug 3;382(9890):427-451.

Fighting Severe Malnutrition: The Power 4 Nutrition Interventions

Severe malnutrition occurs when a child reaches the most serious stage of any form of malnutrition and is at the greatest risk of death, disease, and long-term disability. High-risk forms of malnutrition include children who are too thin (wasted), too short (stunted), or too small (underweight). Risks increase when a child experiences a combination of these, when a child is sick, or when a baby is born malnourished.

Every year, millions of children worldwide are severely malnourished, and roughly 3 million children die because of severe malnutrition. Not only are severely malnourished children much more likely to die than their well-nourished

peers, but those who survive are also much more likely to suffer from lifelong illness and impaired cognitive development. Severe malnutrition is the number one killer of kids under 5, killing more kids every year than AIDS, malaria, and tuberculosis combined.

There are four essential actions we can take **now** to prevent children from dying of severe malnutrition. These interventions span the course of the critical 1,000-day period between a woman's pregnancy and a child's second birthday, when there is a unique window of opportunity to build healthier and more prosperous futures for mothers and their babies.

Supply all pregnant women with prenatal vitamins



Despite the proven benefits of supplying pregnant women with a full dosage of multiple-micronutrient supplements (MMS), the majority of women do not have access to these critical supplements. MMS not only prevents maternal death and still births, it also increases the chances a baby will be born at a healthy weight and survive to his or her second birthday.

Continue large-scale Vitamin A Supplementation



Supplying a child with two high doses of Vitamin A every year is one of the most cost-effective ways to protect children from blindness, diarrhea, and other fatal illnesses. Until recently, Vitamin A supplementation was routine and easily accessible because it had been paired with national polio vaccination efforts. However, now that polio has been mostly eradicated, these vaccination campaigns are being phased out. After years of increasing, the number of children who have access to Vitamin A coverage has started to drop alarmingly. Transitioning national Vitamin A supplementation efforts to a sustainable delivery platform is essential to ensuring children continue to receive this critical preventive regimen.

Support breastfeeding mothers



Babies get the best start at life when they drink nothing but breastmilk until they are 6 months old, and continue breastfeeding until they are 2 years old while also consuming other nutritious complementary foods. Even though breastfeeding is the best way to protect newborns from malnutrition, infections, and disease, only 41% of babies around the world are exclusively breastfed. Many mothers who would like to breastfeed cannot access the support and information they need to be successful. One-to-one and group breastfeeding counselling helps provide mothers with the support they need to reach their breastfeeding goals.

Expand coverage of specialized foods for treatment



The first priority of any nutrition program should be to make wasting treatment unnecessary by preventing children from ever becoming wasted. Unfortunately, millions of children every year still require wasting treatment. Ready-to-Use Therapeutic Food (RUTF) is an energy-dense, life-saving product that gives wasted children the nutrients they need to survive. Yet we are reaching less than a quarter of even the most severely malnourished children. Expanding coverage of services will help ensure no child dies because they don't have access to the fundamental treatment they need to stay alive.

1,000 Days is the leading non-profit organization working in the U.S. and around the world to ensure women and children have the healthiest first 1,000 days.



Learn more at www.thousanddays.org