

Nepal increased exclusive breastfeeding from 45% to **71%** in 5 years

This success story was provided by USAID.

Breastfeeding gives babies the best start to life. Breastmilk protects newborns from malnutrition, infections, and disease – but, only 44% of babies around the world are exclusively breastfed. Many mothers who would like to breastfeed cannot access the support and information they need to reach their breastfeeding goals.

In Nepal, malnutrition is common among women and children, with more than 35% of children under 5 malnourished. But, through efforts to support pregnant women and new mothers, USAID increased the rate of exclusive breastfeeding in supported communities in Nepal from 45% to 71% in 5 years.

Key Stats - Breastfeeding

- **Every \$1 invested** in breastfeeding interventions yields **~\$35 in economic gains**
- **Suboptimal breastfeeding is associated with economic losses of about \$302 billion each year**, or 0.49 percent of world gross national income
- **Breastfeeding duration is associated with higher IQ and income** as well as greater educational attainment
- Scaling up global breastfeeding practices could prevent the **deaths of 823,000 children under 5-years-old and 20,000 women annually**



USAID's Suaahara II program works to improve the health and nutrition of women and children in 40 rural districts in Nepal. The program works at the community and household levels to promote better nutrition and health practices, support families to overcome barriers, and motivate individuals to become role models in their communities.

Bimala Chaudhary is one of these role models. At age 25, Bimala is many things: a daughter, a wife, a support for other women, a leader in her community. But the role she is most proud to be? A mother. Every month, Bimala takes her daughter to a health mothers' group meeting. Here, female community health volunteers teach Bimala and other caregivers about small actions they can take to improve their health and that of their children. The community health volunteers also regularly visit Bimala's home to give one-on-one nutrition counseling. With this support, Bimala learned to feed her daughter only breastmilk for the first six months, and she is still breastfeeding along with feeding her daughter nutrient-rich foods like eggs, bananas, and porridge. Now, Bimala uses what she has learned to teach other mothers in her community.

Severe malnutrition stunts potential and wastes lives, but it doesn't have to. Scaling up proven interventions like breastfeeding support – one of the Power 4 Nutrition Interventions – will allow children around the world to escape these preventable deaths.

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.

As the development community responds to the global impact of COVID-19, we cannot allow the emerging and concurrent malnutrition pandemic to be overlooked. The stakes are too high. For the sake of the children whose lives are at risk today, and the entire generation that risks losing out on tomorrow, these interventions are of the utmost importance.