

Every year, US government funding provides life-saving treatment for more than **200,000** starving children in southern Niger

This success story was provided by USAID.

When children don't have enough nutritious food to eat, they can lose a dangerous amount of weight and become wasted, a severe condition that leaves children up to 11 times more likely to die than their well-nourished peers. Fortunately, wasting is treatable, and even though millions of children still die from wasting every year, these deaths are preventable. Ready-to-Use Therapeutic Food – packed with energy, protein, and micronutrients that are critical to recovery – is a safe, cost-effective treatment that saves lives.

In Niger, UNICEF and its partners are committed to preventing and treating malnutrition. With generous funding from the United States, UNICEF treats more than 200,000 children for wasting every year in the Maradi and Zinder regions, alone, where about 1 in 8 children under age 5 are wasted.

Key Stats - Ready-to-Use Therapeutic Food (RUTF)

- Even before the COVID-19 pandemic, **47 million children under 5 years of age were wasted**
- **RUTF has a long shelf-life** and is easy to distribute and administer
- RUTF reaches only about **15% of the children who need it across the globe**



Khadjetou is one of the mothers in Maradi whose child suffers from wasting. Her daughter Aicha was referred to the hospital for treatment. “Aicha was very sick when we arrived to the [in-patient facility]. Her feet were swollen. She didn't eat. She didn't laugh. As soon as I looked at her she cried. And I cried too,” remembered Khadjetou with tears in her eyes. “I thought I would lose my daughter. [But] when I saw how healthcare workers took care of us, I was hopeful. After three days of treatment Aicha started to eat and play.”

Souley Adamou is in charge of nutrition at the UNICEF office that covers the regions of Maradi and Zinder. Every morning he goes to check on children who are being treated for severe wasting in the Regional Hospital of Maradi, where they receive medical intervention and other therapeutic services including Ready-to-Use Therapeutic Food. UNICEF also works closely with communities to prevent malnutrition. Souley explains, “In my opinion, our programs should be scaled up to reach more families in Niger.”

Severe malnutrition stunts potential and wastes lives, but it doesn't have to. Scaling up proven interventions like wasting treatment – 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.