

Infant and young child nutrition

The Executive Board,

Having considered the quadrennial progress report on infant and young child nutrition,¹

RECOMMENDS to the Sixty-third World Health Assembly the adoption of the following resolution:

The Sixty-third World Health Assembly,

Having considered the quadrennial progress report on infant and young child nutrition;

Recalling resolutions WHA35.26, WHA37.30, WHA39.28, WHA41.11, WHA43.3, WHA45.34, WHA46.7, WHA47.5, WHA49.15 and WHA54.2 on infant and young child nutrition and WHA59.11 on nutrition and HIV/AIDS;

Conscious that achieving the Millennium Development Goals will require the reduction of maternal and child malnutrition;

Aware that worldwide malnutrition accounts for 11% of the global burden of disease, leading to long-term poor health and disability and poor educational and developmental outcomes; that worldwide 178 million children are underweight and 20 million suffer from the most deadly form of severe acute malnutrition each year; and that nutritional risk factors, including underweight, suboptimal breastfeeding and vitamin and mineral deficiencies, particularly of vitamin A, iron, iodine and zinc, are responsible for 3.9 million deaths (35% of total deaths) and 144 million disability-adjusted life years (33% of total disability-adjusted life years) in children less than five years old;

Aware that countries are faced with increasing public health problems posed by the double burden of malnutrition (both undernutrition and overweight), with its negative later-life consequences;

Acknowledging that 90% of stunted children live in 36 countries and that children under two years of age are most affected by undernutrition;

¹ Document EB126/9.

Mindful of the challenges posed by the HIV/AIDS pandemic and the difficulties posed for formulating appropriate policies for infant and young child feeding, and concerned that food assistance does not meet the nutritional needs of young children infected by HIV;

Aware that inappropriate feeding practices and their consequences are major obstacles to attaining sustainable socioeconomic development and poverty reduction;

Concerned about the vast numbers of infants and young children who are still inappropriately fed and whose nutritional status, growth and development, health and very survival are thereby compromised;

Mindful of the fact that implementation of the Global Strategy for Infant and Young Child Feeding and its operational targets requires strong political commitment and a comprehensive approach, including strengthening of health systems and communities and careful monitoring of the effectiveness of the interventions used;

Recognizing that the improvement of breastfeeding practices could save annually the lives of about one million children under five years of age and that each year the deaths of more than half a million such children could be prevented by adequate and timely complementary feeding along with continual breastfeeding for up to two years or beyond;

Aware that, for successful scaling up of evidence-based safe and effective nutrition interventions, multisectoral food and nutrition policies are needed;

Recognizing the need for comprehensive national policies on infant and young child feeding that are well integrated within national strategies for nutrition and child survival;

Convinced that it is time for governments, civil society and the international community to renew their commitment to promoting the optimal feeding of infants and young children and to work together closely for this purpose;

Convinced that strengthening of national nutrition surveillance is crucial in implementing effective nutrition policies and scaling up interventions,

1. URGES Member States:

- (1) to increase political commitment to reducing malnutrition in all its forms;
- (2) to strengthen and expedite the implementation of the Global Strategy for Infant and Young Child Feeding with emphasis on giving effect to the International Code of Marketing of Breast-milk Substitutes, adopted in resolution WHA34.22;
- (3) to develop or review current policy frameworks addressing the double burden of malnutrition and allocate adequate human and financial resources to ensure its implementation;
- (4) to scale up interventions to improve infant and young child nutrition, including the protection and promotion of breastfeeding and timely, safe and appropriate complementary feeding; the implementation of supplementary and therapeutic feeding interventions for severe malnutrition; and the control of vitamin and mineral deficiencies;

- (5) to include these strategies in comprehensive maternal and child health services and supporting to the aim of universal coverage and principles of primary health care, including strengthening health systems as outlined in WHA62.12;
 - (6) to strengthen nutrition surveillance systems and improve use and reporting of agreed Millennium Development Goals indicators to monitor progress;
 - (7) to implement the WHO Child Growth Standards by their full integration into child health programmes;
2. CALLS UPON the food industry to observe the International Code of Marketing of Breast-milk Substitutes and enhance their corporate social responsibilities;
3. REQUESTS the Director-General:
- (1) to strengthen the evidence base on effective and safe nutrition actions to counteract the public health effects of the double burden of malnutrition and describe good practices for successful implementation;
 - (2) to mainstream nutrition in all WHO's health policies and strategies and confirm the presence of essential nutrition actions in the context of the reform of primary health care;
 - (3) to continue and strengthen collaboration with other United Nations agencies and international organizations involved in the process of ensuring improved nutrition including clear identification of leadership, division of labour and outcomes;
 - (4) to support Member States, on request, in expanding nutritional interventions related to the double burden of malnutrition, monitoring and evaluating impact, strengthening or establishing effective nutrition surveillance systems, and implementing the WHO Child Growth Standards;
 - (5) to develop a comprehensive implementation plan on infant and young child nutrition as a critical component of a global multisectoral nutrition framework for preliminary discussion at the Sixty-fourth World Health Assembly and for final delivery at the Sixty-fifth World Health Assembly, through the Executive Board and after broad consultation with Member States.

Seventh meeting, 21 January 2010
EB126/SR/7

= = =