Children, food and nutrition
Growing well in a changing world
At a time when one in three children under 5 is not getting the nutrition they need to grow well, The State of the World’s Children 2019 examines children’s malnutrition today. Communities increasingly face a triple burden of malnutrition: despite declines, 149 million children aged under 5 still suffer from stunting and almost 50 million from wasting; 340 million children suffer from the hidden hunger of deficiencies of vitamins and minerals; and rates of overweight are rising rapidly.

In the 21st century, children’s malnutrition must be understood against a backdrop of rapid change, including the growth of urban populations and the globalization of food systems, which is leading to increased availability of food high in calories but low in nutrients.

Malnutrition profoundly harms children’s growth and development. Unless it is addressed, children and societies will struggle to reach their full potential. This challenge can be met only by addressing malnutrition at every stage of the child’s life and by putting children’s unique nutritional needs at the heart of food systems and the supporting systems of health, water and sanitation, education and social protection.
In the spoonful a mother or father feeds to a toddler, food is love. In the feast a family cooks for a child’s coming of age, food is community. In the shouts and laughter of teenagers sharing snacks after school, food is joy. And for every child and young person everywhere, food is life – a fundamental right and a foundation of healthy nutrition and sound physical and mental development.

Sadly, as this *State of the World’s Children* report shows, far too many of our children and young people are not getting the diets they need, which is undermining their capacity to grow, develop and learn to their full potential. That hurts not just individual children and young people, it hurts us all.

This situation forces us to ask some difficult questions: How is it in the 21st century that we still have 149 million children under 5 with stunting and almost 50 million with wasting? How is it possible that overweight and obesity in children and young people are continuing to rise, and increasingly among the poor? And why are healthy diets becoming more expensive while unhealthy, non-nutritious diets are becoming cheaper?

Nutrition has long been at the core of UNICEF’s work. In 2018, we helped provide life-saving therapeutic feeding for 4.1 million children with severe acute malnutrition; we improved the quality of diets for over 15.6 million children through home-based fortification; we supported programmes to prevent anaemia and other forms of malnutrition for 58 million adolescent girls and boys; and we ensured that over 300 million children received services for the prevention of stunting and other forms of malnutrition.

Nutrition has also long been key to our thought leadership. In 1990, our pioneering malnutrition framework broke new ground in setting out the multiple causes of poor nutrition. In 2019, we have rethought our framework to emphasize what creates good nutrition – from the diets of children and women to the care they benefit from, the food environments in which they live, and the ways in which our societies underpin the right to adequate nutrition through our values and political commitment. Each of these determinants presents an opportunity to improve the nutrition of our children, young people and women.
As Executive Director of UNICEF and Chair of the Lead Group of the Scaling Up Nutrition Movement, I want to emphasize again my commitment, and the commitment of UNICEF, to use all of these opportunities to work for better nutrition for every child, especially in the crucial first 1,000 days – from conception to age two years – and during adolescence, the two unparalleled windows of opportunity. We are underscoring this commitment by launching this report along with UNICEF’s new nutrition strategy, which sets out our priorities and plans to improve the nutrition of children, young people and women, in the years to come.

We already know so much of what works to prevent malnutrition in all its forms, from conception, through early childhood and into adolescence. But this is a battle we cannot win on our own. It needs the political determination of national governments, backed by clear financial commitments, as well as policies and incentives that encourage the private sector’s investment in nutritious, safe and affordable food for children, young people, women and families. And, increasingly, it needs a determination to make children’s nutrition a priority across not just the food system but also in the health, water and sanitation, education and social protection systems. Success in each of these supports success in all.

Young people and women know the value of good nutrition and eating well. “Eating healthily is being responsible for your own health,” said a 16-year-old girl in China during one of more than 70 workshops organized for this report. In India, a 13-year-old girl told us that “food is important for us so that we are able to study well.” They are clear, too, on the barriers to healthy nutrition: “I don’t have enough money to buy food for me and my baby,” a 20-year-old mother said in Guatemala; “I lack knowledge about what kinds of food are healthy,” an 18-year-old girl said in Zimbabwe.

Good nutrition paves the way for a fair chance in life. Let us work together to lower these barriers and to ensure that every child, young person and woman has the nutritious, safe, affordable and sustainable diets they need at every moment of life to meet their full potential.

Henrietta H. Fore
UNICEF Executive Director
At least 1 in 3 children under 5 is undernourished or overweight and 1 in 2 suffers from hidden hunger, undermining the capacity of millions of children to grow and develop to their full potential.

Globally, at least 1 in 3 children under 5 is not growing well due to malnutrition in its more visible forms: stunting, wasting and overweight.

Globally, at least 1 in 2 children under 5 suffers from hidden hunger due to deficiencies in vitamins and other essential nutrients.

Undernutrition continues to exert a heavy toll. In 2018, almost 200 million children under 5 suffered from stunting or wasting while at least 340 million suffered from hidden hunger.

Overweight and obesity continue to rise. From 2000–2016, the proportion of overweight children (5 to 19 years old) rose from 1 in 10 to almost 1 in 5.

The number of stunted children has declined in all continents, except in Africa while the number of overweight children has increased in all continents, including in Africa.

The triple burden of malnutrition – undernutrition, hidden hunger and overweight – threatens the survival, growth and development of children, young people, economies and nations.

Stunting – a clear sign that children in a country are not developing well – is both a symptom of past deprivation and a predictor of future poverty.

Wasting can be lethal for children, particularly in its most severe forms. Contrary to common belief, most wasted children around the world live in Asia and not in emergency settings.

Hidden hunger harms children and women. Iron deficiency reduces children’s ability to learn and iron deficiency anaemia increases women’s risk of death during or shortly after childbirth.

Child overweight can lead to early onset of type-2 diabetes, stigmatization and depression, and is a strong predictor of adult obesity, with serious health and economic consequences.

The greatest burden of all forms of malnutrition is shouldered by children and young people from the poorest and most marginalized communities, perpetuating poverty across generations.
The triple burden of malnutrition is driven by the poor quality of children’s diets: 2 in 3 children are not fed the minimum recommended diverse diet for healthy growth and development.

- Only 2 in 5 infants under six months of age are exclusively breastfed, as recommended. Breastfeeding could save the lives of 820,000 children annually worldwide.

- Use of breastmilk substitutes is of concern. Sales of milk-based formula grew by 41 per cent globally and by 72 per cent in upper middle-income countries such as Brazil, China and Turkey from 2008–2013.

- Poor diets drive malnutrition in early childhood: 44 per cent of children aged 6 to 23 months are not fed fruits or vegetables and 59 per cent are not fed eggs, dairy, fish or meat.

- Only 1 in 5 children aged 6 to 23 months from the poorest households and rural areas is fed the minimum recommended diverse diet for healthy growth and brain development.

- Many school-going adolescents consume highly processed foods: 42 per cent drink carbonated soft drinks at least once a day and 46 per cent eat fast food at least once a week.

Globalization, urbanization, inequities, humanitarian crises and climate shocks are driving unprecedented negative changes in the nutrition situation of children around the world.

- Globalization is shaping food options and choices: 77 per cent of processed food sales worldwide are controlled by just 100 large firms.

- In cities, many poor children live in ‘food deserts’, facing an absence of healthy food options, or in ‘food swamps’, confronted with an abundance of high-calorie, low-nutrient, processed foods.

- Poor families tend to select low-quality food that costs less. Because of poverty and exclusion, the most disadvantaged children face the greatest risk of all forms of malnutrition.

- Climate shocks, loss of biodiversity, and damage to water, air and soil are worsening the nutritional prospects of millions of children and young people, especially among the poor.

- UNICEF and its partners treated more than 3.4 million children with severe malnutrition in humanitarian settings in 2018, from Afghanistan and Yemen to Nigeria and South Sudan.

Improving children’s nutrition requires food systems to deliver nutritious, safe, affordable and sustainable diets for all children.

- Millions of children are eating too little of what they need, and millions are eating too much of what they don’t need: poor diets are now the main risk factor for the global burden of disease.

- National food systems must put children’s nutrition at the heart of their work because their nutritional needs are unique and meeting them is critical for sustainable development.

- Financial incentives should be used to reward actors who increase the availability of healthy and affordable foods in markets and other points of sale especially in low-income communities.

- Financial disincentives on unhealthy foods can improve children’s diets. For example, taxes on sugary foods and beverages can reduce their consumption by children and adolescents.

- Fortification of complementary foods and staple foods with micronutrients can be a cost-effective intervention to combat hidden hunger in children, young people and women.
**Food environments are crucial.** When healthy options are affordable, convenient and desirable, children and families make better food choices.

- Children, adolescents, young people, parents and families need support to demand nutritious foods, but food environments need to promote and support healthy diets.

- Innovative, fun, memorable and engaging communication strategies to promote healthy eating can leverage the cultural and social aspirations of children, adolescents and families.

- Legislation plays a key role in promoting good diets for children, such as by regulating the marketing of breastmilk substitutes to mothers and families, and of unhealthy food to children.

- The marketing of unhealthy foods and sugar-sweetened beverages is directly linked to growing overweight and obesity in children.

- Front of package labelling – visible, accurate and easy to understand – helps children, young people and families make healthier food choices and incentivizes suppliers to deliver healthy food.

- Governments need to promote healthy food environments in schools, including healthy meals and limiting the sale and advertising of ‘junk food’ in proximity to schools and playgrounds.

- The health, water and sanitation, education and social protection systems also have crucial roles to play in promoting and supporting good nutrition for children, adolescents and women.

*Investing in nutrition for children and young people is a cornerstone investment if the world is to achieve the Sustainable Development Goals by 2030.*

- Investing in child nutrition is key to human capital formation because nutrition is central to children’s growth, cognitive development, school performance and future productivity.

- A large and young labour force – with a great creativity and productivity potential – is emerging in Africa and Asia. However, malnutrition risks limiting this demographic dividend.

- Returns from investment in nutrition are high. For example, every dollar invested in reducing stunting generates an economic return equivalent to about US$18 in high-burden countries.

One word must be at the heart of our response to children’s malnutrition – action. We need action that reflects the core role of food systems, that strengthens the supply of – and demand for – better food, that improves children’s food environments, and leverages the role of key supportive systems.

With action comes another imperative: accountability. Progress must be measured, shared, acted on and celebrated. Sound nutrition is fundamental to children’s well-being and the achievement of the Sustainable Development Goals. It needs to be put at the heart of government policy and supported by key stakeholders, including civil society and the private sector.

*The State of the World’s Children 2019* report concludes with the following **Agenda to Put Children’s Nutrition Rights First:**

1. Empower families, children and young people to demand nutritious food.

2. Drive food suppliers to do the right thing for children.

3. Build healthy food environments for all children.

4. Mobilize supportive systems – health, water and sanitation, education and social protection – to scale up nutrition results for all children.

5. Collect, analyse and use good-quality data and evidence regularly to guide action and track progress.
How the triple burden of malnutrition harms children, adolescents and women

- **Undernutrition: stunting and wasting**
  - Poor growth, infection and death
  - Poor cognition, school-readiness and school performance
  - Poor earning potential later in life

- **Hidden hunger: deficiencies in micronutrients**
  - Poor growth and development
  - Poor immunity and tissue development
  - Poor health and risk of death

- **Overweight (including obesity)**
  - Short-term: cardiovascular problems, infections and poor self-esteem
  - Long-term: obesity, diabetes, and other metabolic disorders
EXECUTIVE SUMMARY

149 million children under-5 stunted
Almost 50 million children under-5 wasted
40 million children under-5 overweight
More than 1 in 3 children not growing well
Over 340 million children suffering from deficiencies of essential micronutrients (vitamins and minerals)

Undernutrition: stunting and underweight
- Perinatal complications
- Prematurity and low birth weight
- Chronic diseases for child in later life

Hidden hunger: deficiencies in micronutrients
- Maternal mortality and morbidity
- Neural tube defects in newborns
- Prematurity, low birth weight and impaired cognitive development in newborns

Overweight (including obesity)
- Gestational diabetes and pre-eclampsia
- Obstetric complications
- Overweight and chronic disease for child in later life

PREGNANT WOMEN

At least 1 in 2 children with hidden hunger
Introduction:
Children, food and nutrition

It is 20 years since *The State of the World’s Children* report last examined children’s nutrition. In that time, much has changed.

We have changed where we live: more and more families have left the farm and the countryside behind and have moved to cities, a global shift that will only grow in the years to come.

We have changed our roles
In societies around the world, women are increasingly joining the formal workforce, balancing work responsibilities with their role as primary caregivers, often with little support from families, employers or society at large.

The conditions of life on our planet have changed. The crisis of climate change, the loss of biodiversity, and the damage done to water, air and soil, now raise concerns over whether we can feed this generation of children sustainably, never mind the generations to come.

Finally, we have changed what we eat. We are leaving behind traditional and indigenous diets and embracing modern diets that are frequently high in sugars and fats, low in essential nutrients and fibre, and often highly processed.

This is the backdrop to children’s malnutrition today. As with so much else, it, too, is changing. A word once inextricably linked in the public’s mind with images of hunger and famine, malnutrition must now be used to describe a much broader swathe of children – children with stunting and wasting, but also those suffering from the hidden hunger of deficiencies in essential vitamins and minerals, as well as the growing numbers of children and young people who are overweight or obese.

These are the children who are not growing well.

Their numbers are worryingly high. One in three children under the age of 5 has stunting, wasting or overweight and, in some cases, a combination of two of these forms of malnutrition. Further, at least one in two children suffers from hidden hunger due to deficiencies – often not visible – in vitamins and essential nutrients, which can harm survival, growth and development at every stage of life.
Malnutrition – a triple burden

The children who are not growing well are the victims of the three strands of the ‘triple burden’ of malnutrition that is rapidly emerging in communities around the world, including in some of the world’s poorest countries.

The first strand is undernutrition. Despite some declines, undernutrition continues to affect tens of millions of children. Its presence is visible in the stunted bodies of children deprived of adequate nutrition in the crucial first 1,000 days – from conception to the child’s second birthday – and often beyond. These children may carry the burden of early stunting for the rest of their lives and may never meet their full physical and intellectual potential. Undernutrition is also evident in the wasted bodies of children at any stage of life when circumstances such as food shortages, poor feeding practices and infection, often compounded by poverty, humanitarian crises and conflict, deprive them of adequate nutrition and, in far too many cases, result in death. In 2018, 149 million children aged under 5 had stunting, and just under 50 million had wasting.

The second is hidden hunger. Deficiencies of essential vitamins and minerals rob children of their vitality at every stage of life and undermine the health and well-being of women and mothers and their children. This heavy toll is made all the more insidious by the fact that hidden hunger is rarely noticed until it is too late to do anything. The numbers of children and women affected by various forms of hidden hunger are striking. Based on the most recent data available, UNICEF estimates that at least 340 million children under 5 suffer from micronutrient deficiencies.

The third is overweight and, in its more severe form, obesity. The numbers of obese girls and boys between the ages of 5 and 19 have soared since the mid-1970s, rising by between 10- and 12-fold globally. Overweight, long thought of as a condition of the wealthy, is now increasingly a disease of the poor, reflecting the greater availability of ‘cheap calories’ from fatty and sugary foods in almost every country in the world. It brings with it a heightened risk of non-communicable diseases, such as type 2 diabetes and coronary heart disease. Analysis carried out as part of the Global Burden of
More children and young people are surviving, but far too few are thriving

Disease study suggests that diets lacking adequate nutrition are now the leading cause of death worldwide.

Behind all these numbers are the real lives of the children and women. They are the toddlers like Moteab, who, like hundreds of thousands of other children in Yemen, has had to fight for his life from severe wasting. Moteab survived, but many other children living through conflicts and humanitarian crises around the world have not. They are the infants like Joemar in the Philippines, who live far from warzones but who also suffer from severe wasting. They are the children of mothers like Uruma in Tanzania, who go to school on an empty stomach because their parents cannot afford to buy food. They are the teens like Zahfa in Indonesia, who get too little time to exercise and who are surrounded by unhealthy food options. And they are the mothers like Xaiathon in rural Laos, who must balance breastfeeding her child and feeding her family with the demands of working on a farm.

Surviving, but not thriving

The state of children’s malnutrition in the 21st century can be summed up like this: more children and young people are surviving, but far too few are thriving. They are not thriving in the crucial first 1,000 days of life, when the foundations for healthy, lifelong physical growth and mental development are laid. And they are not thriving at other crucial development stages of life across childhood and into adolescence.

Malnutrition has many causes. A mother’s health and nutritional status, for example, profoundly affects her child’s development, as does the child’s feeding in the first hours and days of life. For far too many children, the causes of malnutrition also include poor access to healthcare and to clean water and adequate sanitation, which can lead to illnesses that prevent the child from absorbing nutrients.

To understand malnutrition, there is an increasing need to focus on food and diet, at every stage of the child’s and young person’s life. The picture that emerges is a troubling one: far too many children and young people are eating too much unhealthy food and too little healthy food.

These problems start early on. In their first six months, only two out of five children are being exclusively breastfed, depriving them of the best food a baby can get. When it comes to the ‘first foods’ (or complementary foods) that infants typically start consuming at around the age of 6 months, these, too, are, in far too many cases, not meeting children’s needs. Fewer than one in three children between 6 and 23 months is eating the sort of diverse diet that can support their rapidly growing bodies and brains. For the poorest children, the proportion falls to only one in five. Among older children, low consumption of fruits and vegetables is widespread. This is true, too, of many adolescents, many of whom also regularly miss or skip breakfast and consume soft drinks and fast food.

The diets of children today increasingly reflect the global ‘nutrition transition’, which is seeing communities leave behind often more healthy, traditional diets in favour of modern diets. For many families, especially poorer families, this means an increasing reliance on highly processed foods, which can be high in
To make food systems work better for children, we need to understand the unique nutritional needs of children at every stage of life.

Saturated fat, sugar and sodium and low in essential nutrients and fibre, as well as on 'ultra-processed' foods, which have been characterised as formulations containing little or no whole food and which are extremely palatable, highly energy dense, and low in micronutrients. Often missing from these diets are whole grains, fruit, nuts and seeds, vegetables, and omega-3 fatty acids.

There is increasing concern about the impact of these diets on human health. Much of the focus is on rising overweight and obesity, but modern diets are also implicated in undernutrition. In Nepal, a recent study suggested that children under 2 may be getting on average a quarter of their energy intake from items such as biscuits, instant noodles and juice drinks, which is lowering their intake of essential vitamins and minerals. Children eating the most of these sorts of snacks and beverages were shorter than their peers.

A greater focus on food systems

Health impacts are not the only concern around modern diets. In a world facing multiple environmental crises, there is also concern about their sustainability. Food production accounts for almost a third of greenhouse gas emissions and 70 per cent of freshwater use, and current modes of food production are the leading cause of environmental change. Climate-related shocks, such as flooding, are already challenging the capacity of some communities to feed themselves and are exposing children to increased risk from waterborne diseases. If current trends continue, the impact of food production on the environment will only grow, with food demand set to increase by at least half by mid-century. This demand will have to be satisfied against the backdrop of a world that, after decades of decline, is seeing a slow rise in hunger, with 820 million people suffering from undernourishment in 2018.

In response to these challenges, and in this UN Decade of Action on Nutrition, there is a growing focus on the role of food systems – all the elements and activities involved in the production, processing, distribution, preparation and consumption of food, as well as the outcomes of these activities, including nutrition and health. In other words, everything and everyone involved in bringing food ‘from farm to mouth’.

Food systems are becoming more complex. More food now crosses borders, and production is concentrated in the hands of a relatively small number of businesses – just 100 large firms account for 77 per cent of processed food sales worldwide. For families around the world, business is playing a growing role in providing the food they eat and, through marketing, in shaping what they want to eat and their aspirations.

Understanding how food systems work is essential to improving our diets. Far too often, the interests of a very important group of people are left out of food systems analysis – children. This is a dangerous omission. Children are a unique group. Poor diets have lifelong impacts on their physical growth and brain development. That is why they must be at the heart of our thinking about food systems. If food systems deliver for children, they are delivering for us all.
Making food systems work for children

Thirty years ago, the Convention on the Rights of the Child spoke of the need to provide children with “adequate nutritious foods” to combat disease and malnutrition. That goal has not changed. What has changed are the contexts in which this needs to happen, and the realization that food systems are a key – and underappreciated – part of the puzzle.

To make food systems work better for children, we need to understand the unique nutritional needs of children at every stage of life, particularly in the first 1,000 days – but also on day 1,001, and then on through the school years, when a well-nourished child can focus better and learn more in the classroom, and throughout the vital years of adolescence, when physical and mental development again speeds up and when lifelong eating habits are established.

To make food systems work better for children, we need to understand the rapidly evolving contexts that are shaping and reshaping children’s diets. Climate change, urbanization and globalization are profoundly altering how and what children eat, as well as the social and cultural values we attach to food.

To make food systems work better for children, we need to respond to the challenges families, children and young people are facing around the world – the high costs of healthy foods, the time pressures families are increasingly facing, the limited availability of fresh fruits and vegetables in many communities, and the pressure many families feel from marketing and advertising.

To make food systems work better for children, we need to address the scandal of child labour in agriculture and food production, much of which is hazardous. In 2016, 108 million children aged between 5 and 17 were engaged in agricultural labour, accounting for 71 per cent of all child labour.

And to make food systems work better for children, we need to ensure they work with, and are not undermined by, all the other systems that affect children’s lives. The healthcare, water and sanitation, education and social protection systems must all work together to provide children and their families with the knowledge, support and services they need to ensure that nutritious diets translate into better growth and development.

When food systems work better for children, we all benefit. Good nutrition can break the vicious intergeneration cycles through which malnutrition perpetuates poverty, and poverty perpetuates malnutrition. Children who are well nourished have a firm foundation from which they can develop to their full potential. When children do that, societies and economies develop better, too. It is no accident that 12 of the 17 Sustainable Development Goals contain indicators that are crucial for nutrition.

Our goal must be to give children diets that are nutritious, safe, affordable and sustainable.

The State of the World’s Children 2019 concludes with a five-step agenda to put children’s nutrition rights first. This begins with the need, on the one hand, to empower families, children and young people to demand nutritious food and, on the other, to encourage food suppliers to do the right thing for children by making healthy food more available, affordable, safe and convenient. Children and young people also need to be surrounded by healthy food environments that protect them from exploitative marketing and empower families and caregivers to make the best decisions. As well as these actions in the food system, four other key systems – health, water and sanitation, education and social protection – must be mobilized to deliver nutrition services and achieve nutrition outcomes at scale. Finally, there is an urgent need to collect high-quality data and evidence regularly to guide action and track progress towards improving children’s nutrition in the 21st century.
Where are children not growing well?

1 in 3 children worldwide under the age of 5 is not growing well.
What are young children eating?
The Importance of first foods

When children start eating soft, semi-solid or solid foods at 6 months old, they need nutritious and safe diets with a range of nutrients to grow well.

Without enough diversity in children’s diets, they may not get enough nutrients to grow well, which can take a devastating toll on children’s bodies and brains. UNICEF and WHO recommend that children at this age eat a minimum of five of eight food groups.

59% of children worldwide are not being fed much-needed nutrients from animal source foods.

44% of children worldwide are not fed any fruits or vegetables.

Fewer than 1 in 3 children eats foods from the minimum number of food groups

Only 1 in 5 children from the poorest households and rural areas eats foods from the minimum number of food groups

Percentage of children aged 6–23 months fed food groups, by type, global, 2018*

<table>
<thead>
<tr>
<th>Food Group</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Grains</td>
<td>78%</td>
</tr>
<tr>
<td>Breastmilk</td>
<td>76%</td>
</tr>
<tr>
<td>Dairy</td>
<td>48%</td>
</tr>
<tr>
<td>Vitamin A rich fruits &amp; vegetables</td>
<td>47%</td>
</tr>
<tr>
<td>Flesh foods</td>
<td>32%</td>
</tr>
<tr>
<td>Other fruits &amp; vegetables</td>
<td>27%</td>
</tr>
<tr>
<td>Legumes</td>
<td>22%</td>
</tr>
<tr>
<td>Eggs</td>
<td>22%</td>
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</tbody>
</table>

Percentage of children aged 6–23 months eating at least 5 of 8 food groups (Minimum Dietary Diversity), by UNICEF region, 2018**

<table>
<thead>
<tr>
<th>Region</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Global</td>
<td>29%</td>
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<tr>
<td>South Asia</td>
<td>20%</td>
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<tr>
<td>Eastern and Southern Africa</td>
<td>24%</td>
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<tr>
<td>West and Central Africa</td>
<td>25%</td>
</tr>
<tr>
<td>Middle East and North Africa</td>
<td>36%</td>
</tr>
<tr>
<td>East Asia and Pacific</td>
<td>40%</td>
</tr>
<tr>
<td>Latin America and the Caribbean</td>
<td>60%</td>
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Percentage of children aged 6–23 months eating at least 5 of 8 food groups by wealth quintile and place of residence, global, 2018***

<table>
<thead>
<tr>
<th>Quintile</th>
<th>Rural</th>
<th>Poorest</th>
<th>Richest</th>
<th>Urban</th>
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<tbody>
<tr>
<td>%</td>
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<td></td>
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<tr>
<td>Poorest</td>
<td>21%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richest</td>
<td>38%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>23%</td>
<td></td>
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<tr>
<td>Urban</td>
<td>39%</td>
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* Analysis based on a subset of 72 countries with data available between 2013–2018 covering 61 per cent of the global population.
** Regional and global estimates based on the most recent data for each country between 2013–2018.
*** Analysis based on a subset of 74 countries with disaggregated data available between 2013–2018.

What do young people think about healthy eating?

More than 450 young people in 18 countries took part in The State of the World’s Children 2019 workshops to talk about what they eat and why. The workshops were held along with similar events for mothers. Here we present an initial analysis of what participants in 12 countries said about the obstacles to eating healthily and how they try to improve their diets. A full analysis will be published in 2020. Responses have been translated and edited for clarity where necessary.

Do young people know which foods are healthy?

Overall, the adolescents who participated in the workshops reported making more healthy than unhealthy food choices. After describing what they ate over a 24-hour period, they were asked to rate whether the items were healthy or unhealthy. Their assessments were accurate for around half the items, but inaccurate for about a fifth. For just under a third of the items, they were unable to say whether the choice was healthy or unhealthy. Overall, adolescents appear to have a limited understanding of the nutritional qualities of over half the foods they commonly encounter.

What prevents young people from eating healthily?

Adolescents said they faced significant barriers to healthy eating. Cost and taste were top of the list:

“We lack money here to stay healthy … Our family is unable to find good jobs.”  
*Girl, 16, India*

“We need money to eat healthy, that’s why I eat junk food.”  
*Boy, 16, Zimbabwe*

Many perceived healthy foods to be more expensive:

“Cheap food is not healthy, and healthy food is not cheap.”  
*Girl, 13, China*

Taste was another barrier:

“I really like junk food.”  
*Girl, 14, Guatemala*

“Healthy food is mainly not delicious.”  
*Girl, 14, Kyrgyzstan*

Taste was a particularly relevant factor for urban participants. Some suggested that their food preferences had been affected by the ready availability of junk food:

“We are not able to eat healthy food because we have already tasted junk food and are now attracted to that only.”  
*Boy, 14, India*

Many adolescents reported that nutritious foods were not sold near their homes:

“Meat is not available. We have money to buy meat, but the place is too far away.”  
*Girl, 14, Ghana*

“Unhealthy food is easier to come by.”  
*Boy, 17, USA*

Access and affordability were acute issues for some. In the Sudan, adolescents in a refugee camp were nearly three times more likely than rural participants to identify cost as a barrier to healthy eating. Lack of access to healthy food was also a key barrier.

The workshop participants pointed to the role of parents and caregivers in determining what they eat. They also highlighted time constraints for both themselves and their parents:

“My choice of food is not prepared for me. My parents decide what we will eat.”  
*Girl, 15, Ghana*

“Sometimes, there is no time to cook so I eat fast food.”  
*Girl, 15, Guatemala*

“Mothers do not have time.”  
*Boy, 14, Mexico*

How do adolescents try to improve their own diets?

Young people from all the countries surveyed reported taking personal action to eat better. Many said they valued eating well and set themselves personal goals:

“I remind myself to prioritize my health for at least one meal a day.”  
*Girl, 18, USA*

“I try to make a better plan of what I’m going to do during the day to avoid those types of [unhealthy] food.”  
*Girl, 15, Serbia*

Summary

Large numbers of adolescents value healthy eating and go to some lengths to improve their own diets. However, many face significant obstacles, notably cost and access to healthy food.
What are mothers’ infant-feeding practices?

The World Health Organization recommends that babies be exclusively breastfed for their first 6 months of life, and then introduced to first (or complementary) foods, which gradually replace breastmilk between the ages of 6 and 23 months. Results from the workshop suggest that feeding practices in many instances are not optimal. Almost all the women breastfed either from birth or within the first 10 days after birth. However, around two out of five mothers introduced breastmilk substitutes (BMS) by the time their baby was 8 weeks old, and most were combining breastmilk and BMS (and, often, other liquids) before their baby reached 6 months of age. Most mothers introduced first foods at 6 months of age, but a fifth started before their baby was 5 months old. Some waited until the baby was between 7 and 9 months.

What barriers do mothers face in feeding their babies well?

**Overwhelmingly, the main barrier to feeding babies healthily was financial:**

“I cannot even afford to give my baby unhealthy foods as I do not have the money.”  
*Age 20, Zimbabwe*

“Money. I am not able to buy food to feed the child.”  
*Age 25, India*

“There is no money at home.”  
*Age 24, Ghana*

**Mothers often echoed the perception of a 38-year-old workshop participant in the United States, who said, “Healthy food is expensive.”**

“In Australia, many things are expensive, like fish … vegetables and meat. It should be cheap so that anyone can buy it.”  
*Age 29, Australia*

“Sometimes, some foods are expensive.”  
*Age 22, Mexico*

**Access and availability are also obstacles:**

“Sometimes healthy food is not available in the house.”  
*Age 28, Egypt*

“It is difficult to get a vehicle to go … to buy food.”  
*Age 30, Ghana*

“IT is hard to get fruits and vegetables, melon, watermelon, cucumber, carrot.”  
*Age 22, Guatemala*

**Mothers reported feeding challenges when babies disliked certain foods, or were ‘fussy’ or sickly.**

“My baby doesn’t like healthy food.”  
*Age 24, Egypt*

“Children do not want to eat healthy food – they pester us, they start crying.”  
*Age 25, India*

“[I find it difficult to find] food that my child wants; my child does not accept a particular type of food.”  
*Age 29, Sudan*

“My child does not like to suck my nipple.”  
*Age 29, China*

“When baby is not feeling well, when the baby is teething, it makes it difficult to feed.”  
*Age 20, Ghana*

**Summary**

Cost is by far the biggest obstacle to feeding and eating healthily for mothers, followed by a lack of availability and access to healthy foods. Many mothers described a range of other challenges, including babies’ dislike of certain foods, ‘fussy’ eaters and family pressure.
An agenda to put children’s nutrition first

1 in 3 children is not growing well

For every child to grow well

1 Empower families, children and young people to demand nutritious food

Drive food suppliers to do the right thing for children

2

Build healthy food environments for all children

3

Mobilize supportive systems to scale up nutrition results for all children

4

Collect, analyse and use quality data and evidence regularly to guide action and track progress

5

SOCIAL PROTECTION

WATER & SANITATION

FOOD

HEALTH

EDUCATION
This agenda is driven by two imperatives. First, children have unique nutritional needs and can suffer unique harm from malnutrition. Putting children’s needs first is key to ensuring that every child and young person has the nutrition they need to get the best start in life. Second, all children and young people will need nutritious, affordable and sustainable diets if societies are to meet the economic, social and environmental challenges of our changing world in the 21st century.

1 | Empower families, children and young people to demand nutritious food

Demand affects supply as food producers respond to consumers’ behaviours and aspirations. When healthy options are affordable, convenient, and desirable, parents and caregivers make better food choices for children. As children grow older, knowledge and information can make them powerful agents of change. Stimulating demand for nutritious foods means not only educating consumers on the benefits of healthy diets, but also leveraging cultural and social aspirations.

2 | Drive food suppliers to do the right thing for children

Demand alone is not enough: Healthy food must also be available, affordable, safe, and convenient. Food producers and suppliers have a key role to play, and so do governments, which must create a level playing field for all producers and suppliers, ensuring their actions align with children’s best interests. Food systems are diverse, and so are solutions. But all food production and consumption must become sustainable if we are to protect children’s nutrition today and tomorrow.

3 | Build healthy food environments for all children

The personal and external food environments are where children and their caregivers interact with the food system. While the forces of supply and demand shape food environments, context-appropriate actions such as mandatory front-of-pack labelling and protection against exploitative marketing and mandatory labelling can help create food environments conducive to nutritious diets for children.

4 | Mobilize supportive systems to scale up nutrition results for every child

As well as food systems, four other key systems must be mobilized to deliver nutrition services, improve nutrition practices and achieve nutrition outcomes at scale. The health, water and sanitation, education and social protection systems must all deliver interventions in a coordinated fashion. A systems approach to children’s nutrition can help ensure that children and families have access to healthy diets and that children receive the nutrition services they need to develop to their full potential.

5 | Collect, analyse and use good-quality data and evidence regularly to guide action and track progress

Lack of adequate data prevents governments from responding with effective policies, strategies and programmes. Accurate and timely data is needed to understand malnutrition, take coordinated, evidence-based action and hold all actors accountable. Data collection methods and frequency must be transformed to expand what we know about the diets and nutrition of children, adolescents and women at every stage of life. Data systems must become responsive and develop a culture of data sharing and transparency.
For the first time in 20 years, UNICEF’s *The State of the World’s Children* examines the issue of *children, food and nutrition*, providing a fresh perspective on a rapidly evolving challenge. Despite progress in the past two decades, one third of children under 5 are malnourished – stunted, wasted or overweight – while two thirds are at risk of malnutrition and hidden hunger because of the poor quality of their diets. These patterns reflect a profound triple burden of malnutrition – undernutrition, hidden hunger and overweight – that threatens the survival, growth and development of children and of nations. At the center of this challenge is a broken food system that fails to provide children with the diets they need to grow healthy. This report provides new data and analyses of malnutrition in the 21st century and outlines recommendations to put children’s rights at the heart of food systems.