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Malnutrition Prevention for Infants of Five

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Commentary

Malnutrition is one of the leading causes of death in children under the age of five, as well as one of the most common factors endangering the lives and health of children. Malnutrition can be reduced through analysing nutrition policy and addressing existing issues in children. The goal of this study was to examine Iran's existing malnutrition prevention policies for children under the age of five.

Malnutrition is a frequent and prevalent condition characterised by a lack of energy, protein, or micronutrients in the diet. Malnutrition is one of the leading causes of death among children under the age of five, as well as one of the most common causes of deterioration in children's health and well-being, resulting in impaired learnability, inefficiency, and inability to acquire skills. Malnutrition is responsible for approximately half of the deaths of children under the age of five in Asia and Africa. Inadequate nutrition raises the risk of death from common infections, increases the number and severity of infections, and may cause infection recovery to be delayed [1].

Malnutrition is measured using three key indicators: stunning (low height for age), wasting (low weight for height), and underweight (low weight for age). According to a UNICEF report published in 2014, the global prevalence of underweight, stunning, and wasting was 15%, 25%, and 8%, respectively. According to the most recent national survey (Demographic and Health Survey, 2010), Iran's numbers were 4.08 percent, 6.83 percent, and 4 percent, respectively. The World Health Assembly passed a resolution in 2012 establishing a comprehensive mother and child nutrition strategy, which included six global nutritional goals for 2025. The goals included a 40% reduction in the global number of stunted children under the age of five, a 50% reduction in anaemia in women of reproductive age, a 30% reduction in low birth weight, no increase in childhood overweight, a 50% increase in exclusive breastfeeding in the first six months, and finally, a reduction and maintenance of childhood wasting to less than 5%. According to global data on stunting, the number of children with low stature decreased from 255 million to 159 million between 1990 and 2014. The frequency of nutritional stunting in children in developing nations is expected to decline from 29.8% in 2000 to 16.3 percent in 2020 [2].

Stunning (low height for age), wasting (low weight for height), and underweight are three major signs used to estimate malnutrition (low weight for age). According to a UNICEF report from 2014, the prevalence of underweight, stunning, and wasting was 15%, 25%, and 8%, respectively, in the world. According to the most recent national survey (Demographic and Health Survey, 2010), Iran's numbers were 4.08 percent, 6.83 percent, and 4%. The World Health Assembly passed a resolution in 2012 calling for a comprehensive mother and child nutrition strategy, which included six global nutritional goals for 2025. The objectives included a 40% reduction in the global number of stunted children under the age of five, a 50% reduction in anaemia in women of reproductive age, a 30% reduction in low birth weight, no increase in childhood overweight, a 50% increase in exclusive breastfeeding in the first six months, and finally, a reduction and maintenance of childhood wasting to less than 5%. According to global data on stunting, the number of children with low stature decreased from 255 million to 159 million between 1990 and 2014. The frequency of nutritional stunting in children in developing nations is expected to decline from 29.8% in 2000 to 16.3 percent in 2020 [3].

Despite economic improvement, malnutrition in children remains a serious health problem in developing countries, according to several studies. According to an analysis of the text of nutrition policies in various nations, these policies all have the same general goals of assisting children, particularly vulnerable children. The National Document for Nutrition and Food Security can be considered the most complete document available among the current texts in terms of the content of food and nutrition policies in Iran. This publication was created using the definitions of nutritional and food security, as well as worldwide experiences, analytical assessments of prior food and nutrition reports and plans, and the perspectives of experts and intersect stakeholders [4]. The results of Iran's policies on child malnutrition prevention show that they are generally successful in reducing child malnutrition; yet, there are still issues with existing policies and legislation. As a result, this research looked into Iran's current malnutrition prevention policies for children under the age of five. Although the area of child nutrition is critical, some associated concerns are not high on policymakers' priority lists. Lack of some micronutrients, which is very common in youngsters, necessitates policies that must be pursued more aggressively. Breastfeeding programmes, supplemental nutrition, and therapeutic supplementation for children, as well as fortification and supplementation for mothers, should all be carefully formulated and implemented. One of the most significant factors to examine in policy is each region's advantages and skills. In diverse places, the utilisation of ethnic and regional foods, the repair of malnutrition, and the promotion of nutritional literacy should be considered. Furthermore, because different organisations' policies interact with one another and a lack of coordination between these policies might impair the overall success of policies enacted, there is a strong need for increased cooperation to achieve macro objectives.

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Conflict of Interest

None

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