Preventing and managing malnutrition

**FACT**

**Children are at risk of malnutrition when:**
- they are not eating enough (quantity)
- they are not eating the right foods (quality)
- they suffer from diseases (e.g. diarrhoea, malaria) or infections (e.g. hookworm infections, HIV/AIDS).

Young children are at high risk of malnutrition, especially from the age of 6 months, when breast milk alone is not enough food, until the age of 3 years.

**Continuous steady weight gain shows the child is healthy and growing well**

Healthy babies and young children grow very fast.

Families and health workers can find out if children are well nourished by weighing them regularly and registering their weights on growth charts.

Each time the child is weighed, his/her weight is plotted as a dot on the growth chart. Joining the dots forms a line which shows whether the child is growing well. The printed lines on the growth chart represent the ideal growth of a healthy child.

- If the plotted line goes up and stays close to the centre line, the child is growing well, and is almost certainly healthy and eating well.
- If the plotted line goes too far from the centre line, the child is malnourished. There are three situations which may need special attention:
  - The plotted line stays flat: the child is not growing well. The child may be sick and/or not eating enough.
  - The plotted line goes down: the child is in danger, is not eating enough and is certainly ill.
  - The plotted line goes up very steeply: this probably means that the child is catching up weight lost during illness. It can also mean the child is gaining more weight than normal and may become overweight or obese.

**Preventing malnutrition**
A healthy, balanced diet is the best way to prevent malnutrition.

Sometimes it may be difficult to eat a healthy, balanced diet, and then supplements like iron and vitamin A may be prescribed for children and pregnant women. However, supplements cannot replace a healthy, balanced diet.

In areas with severe acute malnutrition, children may be given so called Ready-to-Use Therapeutic Foods (RUTF). These sachets provide all nutrients a child needs to recover from undernutrition. But RUTF is an emergency treatment and, like supplements, is not a long term solution to malnutrition.

**ACT**

- Have your child weighed during every visit to a health care centre. From birth to two years, weigh children regularly.
- Make sure your child has a growth chart.
- If your child is found to be undernourished, keep a close eye on his/her weight. Consult the health worker about how to help the child grow normally – for example, by eating more food or different food, or by eating more often. Sometimes a child needs more emotional support or stimulation or more physical activity to become healthy. If you think you cannot provide a healthy, balanced diet for your child, try to get supplementary feeding or supplements from the health worker.
- Always follow good hygiene practices to prevent diseases which cause malnutrition (see Fact Sheet 1 & 2).

**BE CAREFUL! Treat severe malnutrition immediately**

When a child is very very thin and/or has both feet swollen, it may mean severe malnutrition. This is a dangerous illness. Take the child to hospital immediately, and keep him/her warm and fed during the journey.

**Immunisation protects the child’s health**

Every child needs a series of immunisations during the first year of life to be protected against dangerous diseases (e.g. whooping cough, polio, measles, diphtheria, tetanus) which can lead to serious illness, disability and death.

Even if a child has minor illness (e.g. fever, cold, cough), a disability or is malnourished, it is safe to immunise.

All pregnant women should check with a health worker for advice on tetanus vaccination. Tetanus can be dangerous for the mother and the new born baby.