



MAKE WASTING HISTORY

Asia and Pacific Regional High-level Advocacy on Accelerating Prevention and Treatment of Child Wasting

Meeting Summary Notes

14th July 2021

Introduction

The Asia-Pacific region is home to over 70% of the world's wasted children, with over 31 million children becoming wasted each year. The deleterious impact of COVID-19 may further exacerbate these figures. As a result, the growth, survival, and development of millions of children is at risk. Most countries in the region are not on track to meet the SDG target to maintain or reduce the prevalence of wasting to <5% by 2025 and to <3% by 2030. Numerous countries throughout the region are poised to implement policy shifts and scale-up efforts to prevent and treat wasting. However, more actions are needed to meet the SDG goals.

UNICEF, WFP, FAO, and WHO convened a virtual high-level advocacy meeting on 14 July 2021 to identify required actions to accelerate progress in preventing and treating child wasting. The meeting brought together over 300 participants from the region and beyond, representing governments, academia, UN agencies, and local and international non-governmental organizations.

Main discussion points

The latest data on child wasting in the region presented and the slow pace of progress towards the SDG wasting targets underscored why wasting must remain an important public policy priority in Asia and the Pacific. The centrality of multisectoral approaches in addressing child wasting was also highlighted. Food, water sanitation and hygiene, health, social protection systems were identified as critical sectors in addressing the multiple drivers of wasting in the region. Further, the Framework for Action for the [Global Action Plan \(GAP\) on Child Wasting](#) was identified as a strategic tool to support country planning and prioritization of interventions.

Participants highlighted that wasting and stunting are interconnected and that wasting is linked to slowed linear growth and thus hinders stunting reduction efforts. Siloed approaches in addressing wasting and stunting were identified as a key barrier in reducing both forms of undernutrition. Thus, wasting, and stunting reduction should be seen as interrelated priorities. Owing to its links with childhood stunting, and its effects on morbidity and mortality, the

prevention and treatment of wasting should be elevated and prioritized in current national and sub-national nutrition plans.

The panel discussion highlighted the importance of prioritizing prevention efforts to prevent wasting and all forms of malnutrition. But, when prevention efforts fail, early detection and treatment of children suffering from wasting is critical. Less than 10 percent of severely wasted children were able to access early detection and the treatment care they needed in 2020 in our region. Primary health care (PHC) has a primary role in strengthening early detection and treatment of child wasting.

Meeting participants in response to a question by one of the participants “What do you think are the barriers to scaling up actions to address wasting in the region” identified lack of political will and commitment, particularly at the sub-national level; inadequate and sustainable financing of wasting intervention; human resources availability, motivation and capacity; and poor multi-sector accountability to wasting reduction as the four major barriers.

Call to Action

A call to action was made for governments to accelerate progress in the prevention and treatment of wasting in Asia Pacific. It included the following action points that emerged from the meeting deliberations:

1. To inform efforts to further prioritize the most responsive interventions to child wasting, the understanding of the specific drivers of child wasting across different contexts, populations, and seasons must be improved.
2. Many wasted children in the region are also stunted; wasting and stunting also share common drivers. As such, wasting and stunting should be addressed in tandem as part of the country's efforts to address all forms of malnutrition.
3. To reduce the number of children suffering from child wasting to prevention efforts must come first. However, when prevention efforts fail, programmes should ensure the early detection and treatment of children suffering from wasting.
4. To protect children and families from shocks that underlie wasting, multi-sector approaches in health, food, water and sanitation and hygiene, and social protection systems should be intensified.
5. To inform the scale up of interventions to prevent and treat wasting, the GAP framework is a useful tool in supporting countries to align and plan for scaling up of the most responsive multi-sector actions in health, food, WASH and social protection systems to the context-specific causes of child wasting.
6. To increase financial investments for the prevention and treatment of wasting, data systems need to be strengthened to identify investment priorities, and sectoral



plans and budgets need to better account for wasting as a nutrition priority.

Looking ahead

The advocacy meeting showcased numerous promising examples from countries to strengthen the prevention and treatment of wasting. The examples they showed that with collective action, we can Make Wasting History in the Asia-Pacific region.

Eight countries in the region have seized the opportunity presented by the GAP framework to renew commitments to accelerate progress in the prevention and treatment of child wasting. The GAP framework has provided these countries an opportunity to revisit existing multisectoral plans and ensure alignment of interventions to the country-specific drivers of wasting and refocus efforts on the populations with the highest prevalence of wasting. More countries in the region are encouraged to consider using this tool.

In 2021 the UN Food Systems and the Nutrition for Growth Summits serve as important opportunities to spotlight and garner additional commitments for the prevention and treatment of wasting to end all forms of malnutrition by 2030.