

**The Fourth Islamic Conference of Health Ministers
Jakarta, Republic of Indonesia, 22 – 24 October 2013**

Concept Paper

Eight Working Session: Panel Discussion V on Nutrition and Stunting

Stunting and other forms of undernutrition reduce a child's chance of survival, while also hindering optimal health, growth and development. A stunted child enters adulthood with a greater propensity for being overweight and for developing chronic diseases. With increasing urbanization and shifts in diet and lifestyle, the result could be burgeoning epidemic of such conditions in many low- and middle-income countries. Stunting is associated with suboptimal brain development, which is likely to have long-lasting harmful consequences for cognitive ability, school performance and future earnings. This in turn can affect the development and wealth of nations, with losses of at least 2-3% of their GDP because of poor nutrition. Undernutrition is not exclusive to the lowest-income countries or the poorest communities. It can occur in children who live in food-secure households and in food-secure countries. Children in the poorest families are twice as likely to be stunted globally, and in rural areas are also much more likely to be stunted.

Recognizing that investing in nutrition is a key way to advance global welfare, nutrition is rising on the agendas of many global fora. For example, the global nutrition community is uniting around the Scaling Up Nutrition (SUN) movement. Of the current 33 SUN countries, 15 are OIC member states. The World Health Assembly has adopted a new target of reducing the number of stunted children by 40 per cent by 2025. The other targets address wasting, low birthweight, anemia, breastfeeding and obesity, and all countries need to be accountable to implement adequate nutrition measures and report on progress. The OIC can also play a key role in advocating for increased attention, commitment and action on nutrition among all of its member states.

In tackling child undernutrition, there has been a shift from efforts to reduce underweight prevalence (inadequate weight for age) to prevention of stunting (inadequate length/height for age). There is better understanding of the crucial importance of nutrition during the critical 1,000-day period covering pregnancy and the first two years of life, and of the fact that stunting reflects deficiencies during this period.

Globally, about one in four children under 5 years old are stunted. While some regions such as the Middle East/North Africa and Asia have made substantial progress, reduction has been much slower and smaller in Sub-Saharan Africa. Eighty per cent of the world's 165 million stunted children live in just 14 countries. Half of these countries are members of the OIC, and together have around 41 million stunted children.

Other forms of undernutrition such as wasting – or acute malnutrition – are also highly prevalent in many OIC member states. Children who suffer from wasting face a markedly increased risk of death. Six of the ten countries with the highest prevalence of wasting (>13%) are OIC member states. While a significant number of the world's 52 million wasted children live in countries where cyclical food insecurity and protracted crises exacerbate their vulnerability, the majority reside in countries not affected by emergencies.

Rates of overweight continue to rise across all regions. Overweight was once associated mainly with high-income countries, but in 2011, 69 per cent of the global burden of overweight children under 5 years old were in low- and middle-income countries. Eight of the 13 countries with the highest prevalence of overweight (>10%) are OIC member states. Micronutrient deficiencies, especially of iron, iodine, vitamin A, zinc and folate, also affect many OIC member states.

The status of interventions to combat malnutrition varies greatly between countries. The main direct or “nutrition-specific” interventions include: maternal nutrition and prevention of low birthweight; infant and young child feeding (breastfeeding and complementary feeding); prevention and treatment of micronutrient deficiencies; prevention and treatment of severe acute malnutrition. “Nutrition-sensitive” interventions which impact nutrition outcomes involve multiple sectors including agriculture, social protection, water, sanitation and hygiene, health care, education, and women’s empowerment.

The Panel Discussion on nutrition provides opportunity to review the trends and situation of nutrition and actions in the OIC Member Countries and to discuss approaches for enhancing efforts to address undernutrition.

Date: 23 October, 2013	Time: 15:00 hours	Room:
Moderator: Minister of Health, Sultanate of Oman		
Rapporteur: UNICEF		
Session Programme and Speakers::		
No.	Name	Organization
1.	Dr Werner Schultink, Chief Nutritionist	UNICEF
2.	Executive Director	UNFPA
3.	Minister of Health	Pakistan
4.	Minister of Health	Niger
5.	Minister of Health	Indonesia
6.	Minister of Health	Yemen

Key Questions to be addressed by Panel Members

1. UNICEF

- To provide the latest evidence of the causes, consequences, and effective approaches to addressing undernutrition and global nutrition initiatives
- To provide examples of successful community mobilization and awareness raising initiatives in Islamic countries;
- To highlight the key challenges in reducing undernutrition in OIC Member States;
- To highlight areas where additional support from the OIC leaders will be critical to enhance undernutrition programme.

2. UNFPA

3. Islamic Republic of Pakistan

- To highlight the success of nutrition and undernutrition programme in Islamic Republic of Pakistan;
- To highlight support and role of Non-Governmental Organization for nutrition and undernutrition programme;
- To highlight the role that religious leaders and Islamic scholars can play to build community support and secure access to nutrition and undernutrition programme and other health services.

4. Republic of Niger

5. Republic of Indonesia

- To highlight the successful approach taken by Indonesia in reducing undernutrition;
- To highlight the role play by other partners in nutrition and reducing undernutrition programme;
- To highlight the innovative reducing prevalence of nutrition as a model for other health initiatives and work with other partners.

6. Republic of Yemen

- To highlight the nutrition and undernutrition programme in Yemen;
- To present accountability measures put in place to track progress towards successful nutrition and undernutrition programme initiative;
- To highlight the role of philanthropists and new partners in providing financing support for the nutrition and undernutrition programme.