



World Food Programme

SAVING LIVES
CHANGING LIVES

Nutrition programming in the first 1,000 days

WHAT ARE THE FIRST 1,000 DAYS?

The first 1,000 days of life is the period from a woman’s pregnancy until her child is 2 years old. It is a time of unparalleled growth for children’s bodies and brains, during which the foundations are laid for lifelong health and development. The first 1,000 days are considered the ‘window of opportunity’ for nutrition interventions because, during this phase, optimum nutrition has the biggest positive impact, while poor nutrition can have adverse effects which last a lifetime.

THE CONSEQUENCES OF MALNUTRITION DURING THE FIRST 1,000 DAYS

Children who don’t receive the right nutrients at the right time during the first 1,000 days are at risk of malnutrition. Malnourished children are more likely to become ill and have a higher risk of dying. In fact, malnourished children are up to 12 times more likely to die than their well-nourished peers, and malnutrition remains the underlying cause in 45% of all deaths in children under 5.

For those who survive, malnutrition can have devastating effects on children, their families, communities and entire nations. Malnutrition in the first 1,000 days can cause irreversible damage to children’s growing bodies and brains. This affects their ability to do well in school, and makes it harder for them to rise out of poverty when they grow up. As adults they are also at



1,000 DAYS PROGRAMMING IN PAKISTAN

In Pakistan, WFP is implementing the government-funded Benazir Nashonuma Programme (BNP). The BNP is a nationwide programme, which reaches 700,000 women and children. It aims to address stunting in children under 2 years old, and to break the intergenerational cycle of malnutrition.

Pakistan has very high levels of both maternal and child malnutrition. Stunting affects 40% and wasting 18% of children under 5; 14% of women of reproductive age are underweight¹. The BNP provides a specialised nutritious food (SNF) for children under 2 and pregnant and breastfeeding mothers, alongside a cash transfer to help families afford nutritious foods. WFP provides SNFs and health support in government facilitation centres.

¹ National Nutrition Survey (NNS) 2018

increased risk of nutrition-related chronic diseases, such as diabetes, hypertension and heart disease.

For women and girls, their nutritional status not only impacts their own health and life opportunities, but also any children they may have. If a woman is malnourished, her children are likely to be so too, perpetuating a vicious circle of malnutrition.

THE IMPORTANCE OF INVESTMENT IN THE FIRST 1,000 DAYS

Investing in nutrition during the first 1,000 days ensures that children not only survive but thrive. It helps to end the intergenerational cycle of malnutrition, and supports the development of nations. Due to reduced healthcare costs and increased human capital, every US\$1 invested in nutrition during the first 1,000 days yields US\$16 in return; few interventions deliver such a high return on investment. The right nutrition at the right time enables children, families and communities to reach their full potential, and investments in nutrition catalyse improvements in health, education, poverty reduction and resilience.

WFP'S FIRST 1,000 DAYS PROGRAMMING

WFP focuses on reaching those with highest vulnerability, including young children, pregnant and breastfeeding women and girls, and people living with HIV. We work with national governments to prioritize women and children's nutrient needs in the crucial 1,000-day window.

In WFP-supported communities and clinics around the world, women bring their young children to be measured and weighed. We aim to prevent malnutrition first, and act fast to manage it while the impact on a child's health is still reversible. We use our General Food Assistance programmes to reach vulnerable households which contain pregnant and breastfeeding women, and children under 2, with a top up of specialized nutritious foods (SNFs) to stop malnutrition before it starts. Where markets are functioning, this top up is in the form of cash for nutritious foods, usually provided directly to women. When children and pregnant and breastfeeding mothers are already malnourished, WFP provides SNFs to support their recovery. In cases without medical complications, SNFs can be 80-90% effective in reversing malnutrition.

We also provide nutritional support and education for pregnant and breastfeeding mothers, and work with them to promote the best infant feeding and care practices, disease prevention and good hygiene. In many projects, women are supported to start growing their own foods that will provide better nutrition for their families.

WFP works towards healthier diets for all, recognizing that all forms of malnutrition have common root causes, including poverty, inequality and poor diets.



1,000 DAYS PROGRAMMING IN MOZAMBIQUE

Child malnutrition costs Mozambique 11% of its GDP each year, equivalent to US\$1.7 billion.² The country has one of the highest rates of stunting in the world, affecting 43% of children under 5, and 28% of babies under 6 months.

The Gender Transformative, Nutrition Sensitive (GTNS) project takes an innovative and holistic approach to reduce stunting prevention, focussing on women's empowerment to ensure children eat a nutritious diet. Activities are integrated across several WFP units to provide a complementary package of services including food assistance for assets which focus on the dietary needs of women and children; training and tools for climate resilient agriculture; technology to reduce post-harvest loss; and social and behaviour change to promote key messages on nutrition sexual and reproductive health, and positive gender relationships.

² *Cost of Hunger in Africa Report, 2017*