According to the World Health Organization, malnutrition is the underlying cause of 3.1 million child deaths each year and leads to lasting damage for millions of other children. Chronic malnutrition or stunting—when children are too short for their age because they have not been adequately nourished, received inadequate care and/or live in unhygienic environments—can leave a devastating and permanent impact on a child’s physical and cognitive capabilities.

**Improving nutrition is key to ending preventable child deaths.** Well-nourished children are better equipped to fight disease, grow and thrive, learn and contribute to their communities. Mothers who are healthy have healthier children and more prosperous families, and societies with well-nourished populations are more productive, economically viable and secure. The **first 1,000 days**—from the start of a woman’s pregnancy through her child’s second birthday—is the timeframe we emphasize as the “window of opportunity” for nutrition to improve survival and build healthy futures for children. Damage done during these early years is largely irreversible, making the first 1,000 days critical to child development and future success.

**Our approaches to prevent malnutrition**

Save the Children **works with partners** at global, regional, national, community and household levels to prevent malnutrition by bringing **multi-sectoral nutrition interventions to the most disadvantaged families**. Reaching women before they become pregnant, or even earlier as adolescents, is part of an effective, life-cycle approach to ensure that girls reach adulthood well-nourished and equipped with skills to care for their future children and achieve their full potential. While our main focus is mothers and children, our strategies actively foster family support from fathers, grandmothers and other caregivers.

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**Key Facts**

- In 2016, 155 million children under age 5 were stunted, 52 million wasted and 16.9 million were severely wasted (UNICEF).
- Malnutrition makes children more vulnerable to severe diseases and was the underlying contributing factor in about 45% of child deaths in 2016 (WHO).

**Our Impact**

- We have trained 150,000 providers on nutrition-related topics and made 16 million beneficiary contacts since 2012.
- Our programs have reduced stunting by 20% in four of the five largest regions of Ethiopia since 2011.
- In Cambodia, 25,000 children have been screened for malnutrition and 10,000 home gardens established to promote nutritious diets since 2014.
- In Nepal, our programs increased the percentage of households with soap and water at a handwashing station from 49.1% to 74.5%.

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*Save the Children believes every child deserves a future. In the United States and around the world, we give children a healthy start in life, the opportunity to learn and protection from harm. We do whatever it takes for children - every day and in times of crisis - transforming their lives and the future we share.*

March 2018

Contact: Christopher Lindahl (clindahl@savechildren.org)
We emphasize **effective, integrated approaches** to address the range of underlying causes of malnutrition and increase our reach. Our programs include **evidence-based strategies to improve access to safe food and food production** through the integration of nutrition-sensitive agriculture; water, sanitation, and hygiene (WASH); social protection; and livelihoods’ interventions.

Through such integrated activities, we take a transformative approach to gender, building women’s resources, skills and participation in households and communities, including financial inclusion. **Empowering women** can lead to beneficial changes in diets, practices and care-seeking behaviors within the first 1,000 days period and beyond.

We support **optimal infant and young child feeding** through exclusive and continued breastfeeding and appropriate complementary feeding beginning at six months, along with other critical practices such as feeding during and after illness, food safety and health care-seeking.

We also support families with young children to access quality nutrition services delivered through health workers and volunteers in the community. Working through existing structures, our projects **build the capacity of local health systems to deliver nutrition services** in communities and at facilities, such as management of acute malnutrition, supplementation and complementary feeding.

Social and behavior change communications (SBCC) is an essential element of our approach for preventing and alleviating malnutrition. Through our SBCC strategies, we **increase demand for nutrition and health services and better nutrition practices** by tailoring approaches to local strengths and resources and fostering positive social and gender norms related to nutrition. We use traditional print and mass media, technologies such as cell phones and community videos, and our vast experience in community mobilization to strengthen community systems and engage grandparents, siblings, traditional leaders and other key influencers in the community.

**Policy and advocacy initiatives**

Galvanizing and capitalizing on political commitment for nutrition at global and national levels is critical to ensure progress within communities. In pursuit of these aims, we support the Scaling Up Nutrition (SUN) movement, a global network active in 60 countries that unites civil society, governments, businesses and other partners to work toward a world without hunger or malnutrition. We host the SUN Civil Society network at the global level and facilitate coalitions in several countries to build capacity in nutrition planning and policy. We also support the U.S.-based 1,000 Days partnership and play a pivotal role in revising and strengthening national nutrition policies and plans in numerous countries.

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**Nutrition in Humanitarian Settings**

In humanitarian settings, we focus on the detection and treatment of acute malnutrition and infant and young child feeding (IYCF) among the world’s most vulnerable populations. Through a community-based management approach, we treat acute malnutrition with ready-to-use therapeutic foods and medical treatment on an outpatient basis, close to home. We also work with parents and communities to protect, promote and support safe and appropriate IYCF practices. Programs include training volunteers to conduct support and education sessions for women with young children, establishing private and secure breastfeeding areas in temporary settlements and training health workers to enable mothers to initiate and continue optimal IYCF practices.
NUTRITION PROGRAM HIGHLIGHTS

Growth through Nutrition

In Ethiopia, we lead the USAID- and Feed the Future-funded Growth through Nutrition project, a 5-year (2016–2021), multi-sector, integrated nutrition program that builds and expands on the success and achievements of USAID’s flagship multi-sector nutrition project in Ethiopia, Empowering New Generations to Improve Nutrition and Economic Opportunities (ENGINE). Focusing on first 1,000 days households, the project works with the Government of Ethiopia (GOE) to reduce stunting/chronic undernutrition by 20% and reach 28,000 poor/vulnerable households with nutrition and livelihood support in 100 districts (‘Woredas’) in four of the five largest regions of Ethiopia. Growth through Nutrition strengthens GOE capacity to develop and institutionalize national nutrition programs and policies; increases access to diverse, safe and quality food for rural communities; improves nutrition and health care services; implements comprehensive SBCC to promote optimal nutrition, WASH and agriculture behaviors; increases access to safe water; leverages the private sector to increase access to products needed for improved uptake of WASH practices; and supports gender and a robust nutrition learning agenda. To learn more, visit: https://ethiopia.savethechildren.net/programs/growth-through-nutrition.

NOURISH

In Cambodia, we lead NOURISH, a five-year (2014–2019) USAID- and Feed the Future-funded multi-sectoral nutrition, WASH and agriculture project. NOURISH aims to improve the nutritional status of women and children in underserved, rural communities during the first 1,000 days. The project works with the Royal Government of Cambodia from the national to local levels to accelerate stunting reduction by focusing directly on several of the key causal factors of chronic malnutrition. In pursuit of this goal, NOURISH has four key strategies: 1) improving community delivery platforms to support better nutrition; 2) creating demand for health, WASH and agriculture practices, services and products through social and behaviour change communication, conditional cash transfers and vouchers to incentivize use of key health and nutrition services and products and community-led total sanitation (CLTS); 3) engaging the private sector to expand supply of agriculture and WASH products; and 4) building government and civil society capacity in integrated nutrition. NOURISH supports 563 villages across three provinces, reaching 500,000 women and children each year.

Projet Nutrition et Hygiène

In the Sikasso region of Mali, we lead the five-year (2013–2018) USAID-funded Projet Nutrition et Hygiène (PNH) project, which supports harmonizing the actions of Malian communities, the Malian Ministry of Health and the private sector toward the improved growth and development of Malian children. The project aims to assist the Ministry of Health to improve services for children with acute malnutrition by supporting the integration of quality nutrition counseling into routine service delivery in six health districts covering 236 villages. PNH includes a variety of community-based approaches that enable community members and groups to take actions that effectively promote and support optimal nutrition behaviors and practices. The project integrates WASH interventions that engage the private sector in increasing the supply of WASH products and the community in implementing CLTS and other means to increase the demand for latrine construction and household water treatment. SBCC interventions work through community structures and promote specific behaviors, engaging community members in Women Support Groups, Women Farmers’ Groups, Farmer Field Schools and Family Farmer Management Systems.
Nurture

In Laos, we lead the USAID Nutrition project (2016–2018), which is focused on improving the nutritional status of women and children through an integrated nutrition and WASH approach in 471 villages across six districts in Khammouane and Savannakhet provinces. The project establishes interpersonal communication through house-to-house and peer group support, strengthens linkages between and improves the quality of health services and utilizes community mobilization approaches for integrated nutrition and WASH that incorporate modified CLTS. Communities appraise and analyze their own nutrition and WASH environment in order to strengthen local systems to engage adolescent girls, first 1,000 days households including fathers and grandmothers and the wider community to improve maternal, infant and young child nutrition and WASH behaviors. The project leverages private sector relationships to facilitate the ready supply and marketing of products needed for improved uptake of WASH practices. USAID Nutrition strengthens the enabling environment through human resource capacity building and multi-sectoral coordination and planning, particularly at provincial and district levels, to build an enabling environment for scale up within and beyond operational provinces.

Good Tea Plantations

The Good Tea Plantations project in Sri Lanka, funded by the Margaret A. Cargill Foundation (2016–2018), aims to improve maternal and child nutrition among some of the most vulnerable women—those living and working on tea estates, primarily teapluckers—and their children. The project addresses key barriers to good nutrition among these working mothers and their children in the first 1,000 days by: 1) increasing access to and improving the quality of pre-conception nutrition services, pregnancy care and postnatal care as well as child care in estate-managed centers; 2) improving maternal and infant and young child nutrition practices at home and in the workplace; and 3) strengthening public-private partnerships with tea companies to support the adoption of workplace policies and practices that translate into a sustainable standards of maternal and child services and care for working mothers, including spaces and support to express breastmilk and take full maternity leave entitlements. Project learning is used to increase the national and global body of evidence on how to effectively improve nutrition among working mothers and their children. Save the Children will directly reach over 200,000 working mothers and their children on 350 tea estates.

Strengthening Partnerships, Results, and Innovations in Nutrition Globally

As a partner on the Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING), the 7-year (2011–2018), USAID flagship nutrition project, we assist in strengthening global and country efforts to advance supportive nutrition policies and scale up high-impact nutrition interventions. SPRING provides technical support to create social and behavior change through communications; links agriculture and nutrition services and approaches; and finds new ways to prevent stunting and maternal and child anemia. We currently work with SPRING to help improve country policies and implement evidence-based nutrition programs at scale in Bangladesh, Burkina Faso, Ghana, Kyrgyz Republic and Niger. To learn more, visit: https://www.spring-nutrition.org/.

Additional Programs

Along with partners, we implement multi-year, USAID-funded Food Assistance Programs in Burkina Faso, Guatemala, Liberia, Malawi, Nepal and Niger. These projects support interventions that address undernutrition and chronic food insecurity through targeted food assistance and multi-sectoral interventions that include the promotion of optimal infant and young child feeding and care practices, healthy timing and spacing of pregnancies and improvements in WASH.

Working with partners, we also implement projects that contain specific nutrition components. In Zambia, we are a partner on the USAID Systems for Better Health project (2015-2020), working closely with the Zambian government to improve capacity and coordination in the health system to support nutrition strategies and programming. In Tanzania, we are a partner on an EU-funded award (2017-2021) with the World Food Program (WFP), implementing community-based nutrition and agriculture SBCC activities to complement the WFP facility-based interventions. In Mali, we lead the USAID-funded Services de Santé à Grand Impact project (2014-2019), which includes a maternal nutrition component.