



Policy Asks for a Renewed Focus on Ending Child Wasting

Developed by the Wasting Advocacy Coalition
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In the face of worsening conflict, climate change, rising cost of living, and COVID-19 aftershocks, scaling up wasting prevention, detection, and treatment services will make a marked difference in child survival and well-being. Undernutrition accounts for about 45% of deaths among children under five.¹ The most deadly form of undernutrition, wasting (dangerously low weight for height), impacts over 45 million children around the world daily and kills over 1 million children per year.²

¹ [Global Nutrition Report, About Malnutrition](#) (2022)

² [UN News, Child deaths from wasting are predictable and preventable: WHO chief](#) (20 November 2023)

The number of children globally who are suffering from wasting continues to dramatically increase as these multiple crises rage on. Greater emphasis is needed on prevention, detection, and treatment of child wasting across emergency and development contexts, as two thirds of all children living with wasting globally do not live in emergency contexts³.

Renewed efforts are needed so that children with severe wasting can not only survive but also thrive. Protection from and prevention of wasting require greater investment and prioritization on the global stage. This has the potential to save the lives of the most vulnerable children.

Upcoming global moments, such as the Paris Nutrition for Growth (N4G) Summit in March 2025, provide the opportunity for the nutrition community to coordinate our actions to increase our global impact and reduce malnutrition, especially its most deadly form - child wasting.

The Wasting Advocacy Coalition is a civil society-led, multi-stakeholder global advocacy coalition that aims to ensure that each child vulnerable to wasting has access to prevention, detection, and treatment. To maximize our collective impact on child survival in the hunger and nutrition crisis, we recommend the following policy actions:

1. All governments should develop detailed **policy and financial (costed and budgeted) plans to implement existing nutrition policies**⁴ with clearly designated nutrition budget line items. Decision-makers should strategically plan investments in consortium with affected communities and civil society. Governments should progressively mobilise the national budget for nutrition required to fully fund implementation of existing policies.
2. **Donors should collectively pledge** to reach the [\\$7 billion per year required](#) to achieve the 2025 [Global Nutrition Targets](#), aligned to national costed plans and policies. Funding should be predictable, sustainable, accountable, and coordinated. This strengthens long-term impact, development, and resilience needed to improve the prevention, detection, and treatment of wasting. Financing that prioritizes effective, evidence-based interventions and supports catalytic match-funding to domestic nutrition funding is encouraged.⁵
3. National governments should work towards **targeting 100% of children and pregnant and breastfeeding women affected by wasting** for treatment.
4. **Governments, donors, and partners should commit** significant, multi-sectoral, and sustained [investments in nutrition supply chains](#), workforce, and comprehensive systems

³ [Global Action Plan on Child Wasting](#)

⁴ E.g. the new [WHO's Guidelines on the Prevention and Treatment of Wasting and Nutritional Oedema](#) aligned to [SDG2, National Nutrition Plans](#), where relevant the [Global Action Plan on Child Wasting \(GAP\)](#), and utilizing initiatives like the [Global Alliance Against Hunger and Poverty](#).

⁵ For example, by allocating funds to growing community health worker/volunteer occupational groups; investing in prenatal supplements; strengthening health systems to deliver multiple services at singular points of contact; and scaling evidence-backed approaches to treatment including enhanced early detection at household level through family MUAC and treatment of oedema and SAM to full recovery.

strengthening proven interventions to food, health, WASH and social protection systems in a [gender-transformative way](#) to improve the prevention of wasting.⁶

5. Governments, donors, UN agencies, non-governmental organizations, and research institutions should partner to **fund research and generate evidence** that will close the remaining evidence gaps named in the [WHO's Guidelines on the Prevention and Treatment of Wasting and Nutritional Oedema](#) and support implementation of the guidelines in different contexts. WHO should support national governments to lead, facilitate, and coordinate the rollout of these guidelines through coordination with UNICEF, World Food Programme, national Ministries of Health, civil society, and other key stakeholders.⁷
6. Governments should **support the extension of the 2025 [Global Nutrition Targets](#) and the [UN Decade of Action on Nutrition](#) to 2030**. UN Member States, along with Non-State Actors, should mobilise support for both these important UN-led global nutrition processes, adding an operational process target for wasting reduction into the 2025 Global Nutrition Targets.
7. Commitment-makers should include in their N4G commitments financial pledges to reach the \$8 million needed to **sustainably fund the [Nutrition Accountability Framework](#)** (NAF). Sustainable funding will enable the Global Nutrition Report to continue sharing progress towards all wasting, nutrition-specific, and nutrition-sensitive investments. Commitment-makers must be held accountable by reporting progress on their commitments into the NAF.



⁶ [Prevention of Wasting - Advocacy Narrative](#) (IRC, September 2024)

⁷ WHO has ongoing work to develop a core set of outcomes for wasting research.