

PROFILING UNDERNUTRITION: TIMOR-LESTE

FAST FACTS ON GOOD NUTRITION

➤ In 2013, more than six million children died around the world before their fifth birthday.

➤ **Undernutrition is responsible for an astonishing 45% of these deaths**, representing 3 million deaths each year.



➤ Yet we know how to **end preventable child deaths** and the damage caused by undernutrition.

➤ The first 1,000 days of life – from conception to your second birthday – are the most important for growing a healthy body and brain.

➤ Giving children the right nutrition early in life helps them perform better at school, grow into healthy adults, earn more at work and provide their own children a healthy start to life.

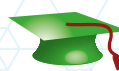
➤ **INVESTING** in improved nutrition during the first critical 1,000 days of life can:



+ **Directly save more than 1 million lives each year;**



+ **Boost a country's GDP by at least 2–3% annually;**



+ **Build self-sufficiency: well-nourished children are more likely to continue their education, have higher IQs, and earn up to 46% more over their lifetimes; and**



+ **Help end hunger and break the cycle of poverty: well-nourished children are 33% more likely to escape poverty as adults.**

➤ Investing in nutrition delivers the biggest bang for our aid buck.

\$1 → \$138

For every dollar spent, up to \$138 worth of benefits are gained in better health and increased productivity.

Despite all this evidence, ONLY 0.4% OF ALL AID from donor countries goes to nutrition-related projects, and most donors (including Australia) do not prioritise nutrition.

UNDERNUTRITION IN TIMOR-LESTE



Did you know?

- + In 2012 around 2,000 children under 5 died in Timor-Leste, and rates of undernutrition are extremely high
- + **More than half (58%) of all Timorese children have had their growth permanently stunted by undernutrition**
- + Around 19% are underweight for their height (or wasted) because they do not have enough food
- + Nutrient deficiencies are very common
- + Significant regional and income inequalities remain
- + Timor-Leste has met the child health Millennium Development Goal, but is not on track to meet the hunger Goal



Population	1.1 Million
Gross National Income (GNI) per person	US\$6,230
Average annual GDP growth rate, 2007 to 2012 inclusive	14.6%
Life Expectancy at birth	67 years
Babies born with low birthweight	12%
Population with access to clean water	61%
Population using sanitation facilities	39%
Stunting in children under 5	58%
Wasting in children under 5	19%
Human Development Index Ranking	134
People living on less than US\$2 per day	37%

IN 2012 AROUND 2,000 CHILDREN UNDER 5 DIED IN TIMOR-LESTE

More than half (58%) of all children under five in Timor-Leste are too short for their age, or stunted

This means they have suffered **long-term insufficient nutrient intake** and frequent infections, stunting their growth. Stunting generally occurs before age two, and effects (including delayed motor development, impaired cognitive function and poor school performance) are largely irreversible.

Around 19% weigh less than they should considering their height (known as wasted)

Wasting is usually the result of significant food shortage, or a serious disease. A child with wasting is nine times more likely to die than a well-nourished child.

Nutrient deficiencies are very common

A lack of vitamin A, iron, zinc, and other nutrients during early childhood puts children at higher risk of experiencing chronic disease, delayed cognitive development, delayed enrolment in school, and reductions in academic achievement and future earnings. Nutrient deficiencies in Timor-Leste are very common. **Nearly 1 in 2 children in Timor-Leste are vitamin A deficient**, which makes them more susceptible to diarrhoea, measles and respiratory infections. **Nearly half of preschool-aged children, and a quarter of Timorese women, are anaemic** (iron deficient).

Significant income and regional inequalities exist

With independence in 2002, Timor-Leste inherited a health system decimated by civil war.

Health infrastructure in Timor-Leste remains weak, especially outside the capital. Despite extremely strong economic growth, funding for health infrastructure has remained very low. 40% of Timorese do not have access to clean water, and nearly 60% do not have adequate sanitation.

Poverty is a serious threat to child health in Timor-Leste, as about half of the country's people live below the poverty line. 70% of Timorese live in rural areas, where poverty rates are higher than in urban centres. Food security is also a significant issue. As a net food importer, Timor-Leste is very susceptible to shocks in food prices.

Timor-Leste has met the child health Millennium Development Goal, but is not on track to meet the hunger Goal

Timor-Leste has been identified as one of only eight fragile and conflicted affected states to have met MDG 1, having halved the number of people living on less than \$1.25 per day. However, this has not translated into improved child nutrition: **the prevalence of children undernourished is one of the three highest in the world**, with Afghanistan and Burundi.

While nutrition has not improved, child mortality has fallen compared to the post-war mortality rate, and the MDG target has been achieved.

WHAT ACTION IS NEEDED?

There are 10 simple nutrition interventions proven to have a significant impact on maternal and child health if provided to everyone. About one fifth of the existing burden of stunting can be completely averted if we use the following approaches:

1. Use iodised salt in food
2. Provide pregnant women with micronutrient supplements including iron and folate
3. Provide pregnant women with calcium supplements
4. Ensure pregnant women have additional nutritional intake especially balanced in protein
5. Provide children with vitamin A supplements
6. Provide children with zinc supplements
7. Promote breastfeeding
8. Provide education for mothers on good food and nutrition practices for children weaning from breast milk to family foods
9. Provide weaning children with food supplements with extra nutrients
10. Improve clinical management of severe undernutrition