GLOBAL ACTION PLAN ON
CHILD WASTING

Briefing note | May 2025

ENDING CHILD WASTING

A Multisystem Approach Towards 2030

Food and Agriculture Organization of the United Nations
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This briefing note is designed to support national governments and implementing partners in developing policies, strategies and programmes for the prevention of child wasting across contexts. It aims to strengthen efforts to reduce wasting prevalence to below 5 per cent, in line with the 2030 target to be proposed at the 2025 World Health Assembly. Its primary purpose is to drive coordinated, multisystem action and investment in evidence-based policies, programmes and interventions to prevent child wasting effectively.

Specifically, this briefing note aims to:

1. Guide decision-makers in adopting multisystem approaches to address the underlying and immediate causes of child wasting through their policies, programmes and plans.
2. Align global and national efforts towards achieving global nutrition targets and strengthening resilience to shocks and crises.
3. Provide a clear rationale for investing in and prioritizing evidence-based measures to accelerate progress in reducing the prevalence of child wasting.

Wasting: A global crisis in urgent need of action

Child wasting[1] is a global crisis that endangers the lives of millions of children and undermines the potential of future generations. Wasting weakens children's immunity, increases their susceptibility to infections and significantly raises their risk of death, particularly for those under 5 years of age. Wasting also increases the risk of other forms of malnutrition, such as stunted growth and development in early childhood and obesity and non-communicable diseases later in life.[2] Despite ongoing efforts, progress in reducing wasting has been alarmingly slow.

- In 2022, some 45 million children under 5 years of age (6.8 per cent) were suffering from wasting and 13.7 million (2.1 per cent) from severe wasting[3].
- Over the past decade, the global prevalence of child wasting decreased by only 0.7 percentage points. At this pace, projections indicate that by 2030, 6.2 per cent of children under 5 years of age will still be affected, missing the World Health Assembly's target of reducing wasting prevalence to less than 5 per cent.[4]

1 The term wasting is used in this technical note to refer to wasting and/or nutritional oedema or acute malnutrition. Wasting is defined as children under 5 years of age with a weight-for-height or weight for-length z-score that is more than 2 standard deviations below the median of the WHO child growth standards (WHZ or WLZ< -2) and/or a middle-upper arm circumference of less than 125 mm. Nutritional oedema is bilateral pitting oedema, which starts in the feet and can progress up to the legs and the rest of the body, including the face.

2 Emergency Nutrition Network (ENN) and the Programme and Policy Sub-Working Group of the WaSt Technical Interest Group (TIG), *Best practice in Preventing Child Wasting within the Wider Context of Undernutrition. A Briefing Note for pokers and programme implementers*, ENN, 2021,

3 United Nations Children's Fund, World Health Organization and World Bank Group, *Levels and trends in child malnutrition: UNICEF/WHO/World Bank Group Joint Child Malnutrition Estimates, 2023 edition*, New York, 2023.

4 United Nations Children's Fund, World Health Organization and World Bank Group, *Levels and trends in child malnutrition: UNICEF/WHO/World Bank Group Joint Child Malnutrition Estimates, 2023 edition*, New York, 2023.

- Wasting prevalence remains alarmingly high in several regions. South Asia has the highest prevalence, with 14.8 per cent of children affected – nearly three times above the global target. Sub-Saharan Africa also faces significant challenges (5.2 per cent), with persistently high prevalence in many countries.[5]
- Preventing wasting is even more critical during crises, such as climate shocks, food insecurity and displacement, as concurrent factors like disease further heighten the risk of mortality when wasting occurs.

Providing treatment to children once they are already affected by wasting is not enough. Timely, evidence-based preventive actions are essential to halt wasting before it begins, minimize its overall impact, and achieve the 2030 Sustainable Development Goals target. By investing in preventive measures now, we have a transformative opportunity to enhance child survival, promote optimal growth and development for children and secure long-term social and economic benefits for communities worldwide. For every US$1 invested in addressing undernutrition, the average return is estimated at $23, making the prevention of undernutrition one of the most cost-effective strategies for improving global well-being.[6] These economic benefits far outweigh the costs of inaction on addressing undernutrition, which run at around $21 trillion over 10 years.[7]

Renewing efforts to end wasting

Preventing child wasting requires a bold shift towards sustainable, multisystem solutions that address the immediate and underlying determinants of child wasting. Prevention efforts must prioritize access to nutritious, safe and affordable diets from sustainable food systems, essential nutrition services as well as responsive feeding and care practices to promote optimal growth and development. These interventions are particularly important for children and women living in fragile, food-insecure, low-income and/or forcibly displaced settings where the risks of wasting are the highest.

The 1,000 days from conception to a child's second birthday are a unique window of opportunity to prevent child wasting. Ensuring adequate maternal nutrition during pregnancy and while breastfeeding as well as supporting early initiation and exclusive breastfeeding during the first six months of an infant's life and appropriate complementary feeding with continued breastfeeding up to two years of age and beyond are key to supporting healthy growth and development.

Why has progress on reducing wasting been so slow until now?

1. Limited attention to prevention due to the multiple determinant nature (immediate and underlying) of child wasting
2. Disjointed single system responses.
3. Insufficient focus on maternal nutrition, which is critical to preventing child wasting.
4. Insufficient investments that hinder the scale, duration, type and sustainability of interventions.

Equally important is access to quality nutrition and health services through primary healthcare.[8] By focusing on this critical period, prevention efforts can be more effectively embedded within broader multisystem strategies, strengthening long-term efforts to address wasting at scale. Given the multiple determinants (immediate and underlying) of child wasting, a multisystem approach is essential. Aligning actions through four key systems as presented in the UNICEF nutrition strategy 2020–2030 and referenced in the GAP Framework – food, health, water and sanitation, and social protection – maximizes the opportunity for children to receive the nutrition and care they need to grow and thrive.[9]

For lasting impact, these systems must work together in an integrated way, ensuring children, women and families have access to the right foods, receive the right nutrition services, and adopt positive nutrition and care practices at the right time. From pregnancy through childhood and adolescence, access to essential foods, services and practices must be continuous, coordinated and responsive to changing needs.[10] A systems approach can protect and promote diets, services and practices that support optimal nutrition, growth and development for all children, adolescents and women. This is critical to support enhanced integration of preventive actions in a meaningful manner.[11]

5 United Nations Children's Fund, World Health Organization and World Bank Group, *UNICEF-WHO-World Bank Joint Child Malnutrition Estimates, 2023 edition – Interactive Dashboard*, 2023.

6 Akseer, N., Moineddin, R., Qureshi, U. R., et al., 'Assessment of differences in child mortality estimates in low- and middle-income countries in 2019 vs 2000', *EClinicalMedicine*, vol. 44, 2022, pp. 101283.

7 Shekar, M., Shibata Okamura, K., Vilar-Compte, M., Dell'Aira, C. (eds.), *Investment Framework for Nutrition 2024*. Human Development Perspectives Overview booklet, World Bank, Washington, DC, 2024,

8 https://www.unicef.org/media/109716/file/No%20time%20to%20waste.pdf

9 https://www.unicef.org/media/92031/file/UNICEF%20Nutrition%20Strategy%202020-2030.pdf . https://www.childwasting.org/media/1126/file/GAP-Framework-All-FINAL-2021-11-15.pdf

10 Emergency Nutrition Network, *Wasting Reset: Wasting Prevention, Early Detection and Treatment to Catalyse Action and Accountability*. Prevention: Solutions From the Prevention of Wasting Working Group, 2021

11 https://www.unicef.org/media/109716/file/No%20time%20to%20waste.pdf

Multisystem action: Aligning global initiatives

The Global Action Plan (GAP) on Child Wasting, introduced in 2020, represents a significant milestone in bringing together global efforts to meet the World Health Assembly and Sustainable Development Goal targets. The GAP Framework has four core outcomes. Three of the four — reducing low birthweight through improved maternal nutrition, improving child feeding and care, and improving child health — are focused on prevention of all forms of malnutrition and provide a clear pathway to reducing the burden of wasting.[12]

To drive progress, 23 front-runner countries, including those with a high burden of child malnutrition, have developed national roadmaps.

These plans align actions with local priorities to address the root causes of wasting through coordinated investments in food, health, water and sanitation, and social protection systems.

12 Food and Agriculture Organization, United Nations High Commissioner for Refugees, United Nations Children's Fund, World Food Programme, and World Health Organization, *Global action plan on child wasting: A framework for action to accelerate progress in preventing and managing child wasting and the achievement of the Sustainable Development Goals*, 2020.

Addressing wasting across national systems

As per the 2023 WHO Guideline on the prevention and management of wasting and nutritional oedema, in contexts where wasting occur, preventive interventions should ideally be implemented through a multisectoral and multisystem approach (i.e. food, health, safe water, sanitation and hygiene, and social protection systems). These interventions should include access to nutritious, safe and affordable diets and nutrition and health services as appropriate, counselling (breastfeeding, health and nutrition related, and access to locally available nutrient-dense foods), to address the households nutritional needs, and should involve psychosocial elements of care to ensure healthy growth and development.

FOOD SYSTEM

Tackling child wasting requires food systems that ensure that the nutrient-rich foods needed for child growth and development are available, accessible and safe and affordable. However, global hunger continues to rise, due to ongoing climate crises, economic shocks and protracted conflicts, which stress food systems and exacerbate food and nutrition insecurity, placing young children at heightened risk of wasting.[13]

According to UNICEF's 2024 Child Nutrition Report,[14] around 181 million children worldwide under 5 years of age – or 1 in 4 – are experiencing severe child food poverty, which makes them up to 50 per cent more likely to experience wasting. Severe child food poverty affects all regions in the world, but not equally: South Asia and sub-Saharan Africa are home to more than two-thirds (68 per cent) of the 181 million children living in severe child food poverty. Children living in severe food poverty are children living on the brink. Right now, millions of young children face this reality, with potentially irreversible consequences for their growth, brain development, and overall survival.

Addressing child food poverty and nutrient gaps requires a comprehensive food systems approach. This includes strengthening supply chains and market systems to ensure the availability, accessibility, affordability and desirability of nutritious and safe foods, such as animal-source foods (eggs, dairy, fish, poultry, and meat) and nutrient-rich fruits, vegetables, seeds and pulses, particularly for young children and women.

Actions to address both individual and household needs while addressing gaps in the wider food system can ensure that the nutrient-dense foods children require to survive and thrive are available, safe accessible and affordable.

Food system actions to contribute to preventing child wasting

Priority Actions

- Enhance the production and supply of climate resilient nutrient-dense foods (biofortified staple crops (e.g., vitamin A-rich sweet potatoes, iron-rich beans), animal-source foods (e.g., dairy, eggs, fish), and nutrient-rich fruits and vegetables (e.g. dark green leafy vegetables and Vitamin A-rich fruits and vegetables) through targeted agricultural interventions including sustainable farming practices, home gardening, and small-scale animal husbandry
- Strengthen market-based approaches to improve affordability and accessibility of nutritious foods (including appropriate safe fortified foods for young children), through leveraging social protection programs for vulnerable households with pregnant women and children under 2 years of age
- Increase demand for nutritious foods through behaviour change and social protection programs,
- Strengthen local food environments to support positive dietary behaviours and feeding practices

In humanitarian settings, the provision of nutrition supplements for vulnerable households may be provided including targeted balanced energy-protein supplementation to pregnant women who are at risk of, or currently undernourished, especially in populations with high nutritional deficiencies; and the provision of nutritional supplements such as fortified cereals or lipid-based nutrient supplements for children aged 6–23 months in food-insecure contexts.

13 Food and Agriculture Organization of the United Nations, International Fund for Agricultural Development, United Nations Children's Fund, World Food Programme and World Health Organization, *The State of Food Security and Nutrition in the World 2024: Financing to end hunger, food insecurity and malnutrition in all its forms*, FAO, 2024.

14 https://data.unicef.org/resources/child-food-poverty-report-2024/

HEALTH SYSTEM

The fight against child wasting begins with ensuring children are born to healthy, well-nourished mothers and receive the care, nutrition and health services they need to survive and thrive. However, many children still face barriers to adequate nutrition and health care. Poor maternal nutrition contributes to low birthweight and increases the risk of wasting, with challenges persisting beyond birth. Inadequate infant and young child feeding, limited access to nutrition services, and gaps in universal health coverage leave children vulnerable to illness and malnutrition.

The GAP Framework underscores the need to strengthen national health systems to support both mothers and children. This includes antenatal and postnatal care, essential nutrition actions and interventions that promote optimal infant and young child feeding, nutrition and care. Integrating health, nutrition and social protection systems ensures children not only survive but also develop to their full potential. Addressing the immediate and underlying causes of wasting requires coordinated efforts to improve access to life-saving treatment while preventing malnutrition through sustained investments in child health.

Strengthening prevention-focused health and nutrition actions through the health systems will ensure children receive essential nutrition services and timely health care. A comprehensive, multisystem approach can reduce low birthweight, prevent child wasting and improve child survival, health and well-being.

Health system actions to contribute to preventing child wasting

Priority actions

- Integrate essential nutrition actions into primary health care and national health plans, ensuring nutrition is systematically and sustainably included within budgets.
- Ensure that all pregnant women have access to good antenatal nutrition and nutrition counselling, ideally delivered through existing platforms of ante-natal care. This should include weight monitoring early counselling and support on breastfeeding, iron-containing supplements or multiple micronutrients and for the most vulnerable women, food rations or balanced energy protein (BEP) supplements
- Ensure that all maternity facilities integrate and implement the Ten Steps to Successful Breastfeeding of the Baby-Friendly Hospital Initiative as a standard of care, to provide support and counselling to ensure good maternal nutrition, early initiation of breastfeeding, exclusive breastfeeding, continued breastfeeding up to two years and beyond, and age-appropriate complementary feeding practices.
- Deliver childhood vaccinations and ensure access to essential vaccination services to complete immunization schedules, preventing illnesses that exacerbate wasting.
- Develop systems to ensure well-child visits are carried out at the facility or community level in line with WHO guidance, enabling early detection of poor growth and nutrition issues,[15] including regular growth monitoring and promotion and assessment of infant and young child feeding practices.
- Develop and implement national complementary feeding guidelines to produce and promote nutrient-rich, locally available foods in collaboration with the food sector.
- Support responsive care and caregiver mental health by integrating counselling and support for caregiver well-being during routine child health and nutrition services.
- Promote good health and hygiene practices through innovative social behaviour change initiatives and provision of WASH-related products (e.g. soap, chlorine tablets).
- Train and supervise health workers on: (1) quality counselling on infant and young child feeding and related nutrition and care; (2) integrated management of childhood illness and integrated community case management, ensuring nutrition is well integrated; (3) well-child visits, focusing on nutrition, growth monitoring and health promotion; (4) identification and management of infants under 6 months at risk of poor growth and development.
- Strengthen surveillance systems to collect data on wasting, its determinants, and process indicators including minimum dietary diversity, IYCF counselling. Ensure availability of nutrition products including iron and folic acid supplementation/multiple micronutrient supplements as appropriate to women of reproductive age.
- In food-insecure contexts, consider the provision of nutritional supplement such as SQ/MQ LNS for children aged 6–23 months.

15 World Health Organization. (2024). *Improving the health and wellbeing of children and adolescents: guidance on scheduled child and adolescent well-care visits.* Geneva: World Health Organization.

SOCIAL PROTECTION SYSTEM

Global poverty reduction has stalled, with 3.5 billion people (44 per cent of the population) living in poverty and 700 million (8.5 per cent) in extreme poverty, concentrated in sub-Saharan Africa and fragile, conflict-affected countries. Social protection systems are critical for addressing the root causes of wasting – poverty, vulnerability and social exclusion.

The link between malnutrition, hunger, and poverty is undeniable. Child food poverty and malnutrition lead to poorer cognitive skills, limit school attainment, and reduce future earnings, increasing the likelihood of poverty. In turn, poverty worsens children's nutrition, raising their risk of becoming and remaining malnourished. During crises, the poorest are often the most affected by child food poverty and malnutrition.

Evidence shows that well-designed social protection programmes can break this link and improve nutrition outcomes. By providing financial stability, social protection reduces harmful coping strategies (e.g., selling assets or cutting food intake) and enables access to safe, affordable and nutritious diets. Cash transfers in social protection programmes empower caregivers, foster productive assets (e.g., through agricultural support), and strengthen decision-making. The benefits of this type of support are greatest when targeted at the most vulnerable and when provided to women during the first 1,000 days from conception to age two. Combining cash transfers with evidence-based policies, essential nutrition services, and quality counselling further enhances nutrition practices and access to care for women and children.

In addition, social protection measures can stabilize demand for nutritious foods, incentivize production, lower prices and encourage positive nutrition behaviours, such as increased health service use.

Social protection has the potential to drive significant change, particularly in fragile and forced displacement contexts. A focused effort to expand and strengthen social protection programmes for vulnerable households can enhance their impact and provide essential support to those most at need. This should focus on strengthening their ability to adapt to shocks while placing greater emphasis on nutrition outcomes. By intentionally integrating nutrition, these programmes can deliver sustainable change for women and children while reducing and preventing wasting.

Social protection actions to contribute to preventing child wasting

Priority Actions

- Strengthen data and targeting systems to identify and prioritise nutritionally vulnerable groups, especially women and children during the first 1,000 days.
- Design social protection programmes to meet the needs of vulnerable groups such as adding top-ups to household support, ensuring integration with behaviour change activities.
- Provide timely, predictable, and regular transfers to improve nutrition outcomes, ensuring consistency, accounting for seasonal needs and maintaining reliable support in hard-to-reach areas.
- Prioritise vulnerable populations in social protection policies by expanding social transfers (cash, vouchers, in-kind) and integrating behaviour change initiatives for better access to nutritious diets and essential health services.
- Link social transfers with food system actions to enhance availability, affordability, and consumption of nutritious foods through local production, market access and fortification
- Connect social protection with maternal and child health services to improve uptake of antenatal/postnatal care, breastfeeding counselling, and child growth monitoring.
- Strengthen social protection systems to adapt to shocks and to scale up support for vulnerable households during crises.
- Empower women and promote responsive caregiving through policies supporting maternity/parental leave, childcare subsidies, and compensation for unpaid care work.

WATER, SANITATION AND HYGIENE SYSTEM

With 26 per cent of the global population lacking access to safe drinking water and 46 per cent without basic sanitation, the risk of exposure to harmful pathogens remains high.[16] Young children are especially vulnerable due to behaviours such as putting objects in their mouths, crawling on contaminated surfaces and exposure to improperly disposed faeces or unsafe water and food, which increase their risk of ingesting pathogens, leading to illness and malnutrition.

Water and sanitation systems are critical in preventing child wasting by addressing the underlying environmental factors that lead to malnutrition. Poor WASH conditions, such as unsafe water, inadequate sanitation and poor hygiene practices contribute to wasting through diarrhoea, environmental enteric dysfunction, and soil-transmitted infections. These conditions impair nutrient absorption, increase nutrient losses, and weaken children's immunity, making them more vulnerable to malnutrition.

The GAP Framework highlights WASH as a core contributing system for prevention of child wasting. It recommends integrating WASH interventions with nutrition programmes, prioritizing WASH investments that target vulnerable populations, particularly young children and their caregivers, to prevent the cycle of poor health and malnutrition and promote development and survival.

Programmes should prioritise WASH interventions for children the most vulnerable to wasting, including more frequent household-level support from community health workers. Children living in contexts with high prevalence of malnutrition can face a higher risk of disease and mortality. A poor WASH environment is of particular risk to these children and threatens their recovery. Targeted WASH activities can help prevent relapse.

WASH actions to contribute to preventing Child wasting

Priority Actions

- Prioritize households with young children, pregnant or breastfeeding women to mitigate wasting risks.
- Embed WASH interventions within national nutrition action plans and frameworks.
- Strengthen data and monitoring systems: incorporate WASH indicators into national nutrition action plans; use context-specific data to highlight links with wasting prevention; and build capacity to monitor WASH services and their impact on nutrition.
- Generate and share evidence on the effectiveness of WASH-nutrition programmes to guide policies.
- Improve environmental hygiene: promote interventions to reduce children's exposure to contaminated environments and encourage safe disposal of child faeces.
- Adopt child-specific hygiene programmes that address the behaviours of young children (e.g., crawling and mouthing objects).
- Ensure safe water access by promoting point-of-use water treatment methods.
- Enhance food hygiene by educating caregivers on proper food preparation, cooking and storage practices to minimize contamination risks.
- Promote safe sanitation: affordable, age-appropriate sanitation facilities and accessible storage solutions to protect food from contamination.

16 United Nations Educational, Scientific and Cultural Organization, UN-Water and World Water Assessment Programme, *The United Nations World Water Development Report 2023: Partnerships and cooperation for water*, United Nations, 2023.

Strengthening governing systems, policies and accountability to address child wasting

Addressing child wasting sustainably requires well-coordinated, adequately financed and robustly governed systems underpinned by strong monitoring and evaluation. These actions strengthen the capacity to prevent and treat malnutrition while ensuring alignment across systems and the effective delivery of interventions.

Improving young children's diets requires programmes grounded in evidence-based interventions at scale, with quality and equity. To achieve the desired impact, such interventions must be designed and implemented to respond to the context-specific drivers of children's diets. These interventions will be implemented through one or more systems – food, health, water and sanitation, and social protection.[17]

1. Enhancing coordination across systems and ministries

To effectively address child wasting, governments must establish strong coordination mechanisms across sectors by:

- Creating multi-stakeholder platforms, such as national nutrition councils, to plan, implement and evaluate nutrition programmes
- Formalizing inter-ministerial partnerships and defining clear roles and shared responsibilities across key systems
- Aligning humanitarian, development and peacebuilding efforts in fragile and conflict-affected and forced displacement settings
- Strengthening subnational coordination and train local actors to incorporate nutrition actions into decentralized plans, including emergency preparedness and anticipatory action
- Promoting resource mobilization and align national budgets, track progress and leverage financial and technical resources from stakeholders.

2. Integrating wasting prevention into policies and strategies

National strategies must prioritize addressing wasting by embedding explicit objectives in relevant plans and frameworks by:

- Update national policies to identify gaps for nutrition
- Integrate nutrition actions to prevent child wasting into disaster management plans and emergency strategies
- Develop guidelines for emergencies and establish protocols to ensure timely interventions to prevent wasting during crises
- Build political support by highlighting the economic and social benefits of investing in nutrition to secure political buy-in
- Embed GAP roadmap actions into sectoral and multisectoral national strategies for coherence.[18,19]

3. Strengthening nutrition data and measurement

Accurate, timely data is critical for tracking progress and identifying areas for action. This can be achieved by:

- Enhancing national nutrition information systems to capture real-time data on wasting prevalence and its key drivers
- Conduct regular integrated nutrition surveys to provide updated information on trends and determinants
- Develop digital dashboards to be used at national and subnational levels to monitor progress and identify gaps.
- Invest in national early warning systems, including nutritional vulnerability analysis linked to nutrition information systems, to enable anticipatory action and the early scale-up of actions in response to climate-related shocks and other crises.

17 UNICEF. (2020). A systems approach to improving children's diets. United Nations Children's Fund.

18 Food and Agriculture Organization, United Nations High Commissioner for Refugees, United Nations Children's Fund, World Food Programme and World Health Organization, *Global Action Plan on Child Wasting: Country Roadmaps*, 2021.

19 Scaling Up Nutrition (SUN) Movement, *SUN Movement Strategy 2021–2025*, SUN Movement, 2021.

4. Financing for nutrition

Countries must ensure sufficient and sustainable financing to scale up nutrition interventions by:

- Assessing financing gaps to identify costs, current spending and funding shortfalls for wasting prevention
- Mobilize innovative financing and exploring options such as:
  - Repurposing agrifood subsidies for nutritious diets
  - Leveraging climate funds and social bonds
  - Introducing taxes on unhealthy foods
- Enhancing accountability by implementing budget tracking tools to monitor investments and ensure efficient resource use.

5. Strengthening governance and accountability

Strong governance and accountability mechanisms can deliver results by:

- Enforcing legislative frameworks such as mandatory food fortification, maternity protection and regulations on marketing breastmilk substitutes
- Building the capacities of policymakers, programme managers and local leaders to effectively design and implement interventions across the four systems
- Ensuring inclusive participation by engaging caregivers, community leaders and vulnerable groups in programme design to ensure cultural relevance and ownership
- Monitoring progress:
  - Developing scorecards and dashboards to track targets
  - Establishing community feedback mechanisms to improve service quality
  - Publishing annual progress reports to promote transparency and share lessons learned.

6. Support for humanitarian crises

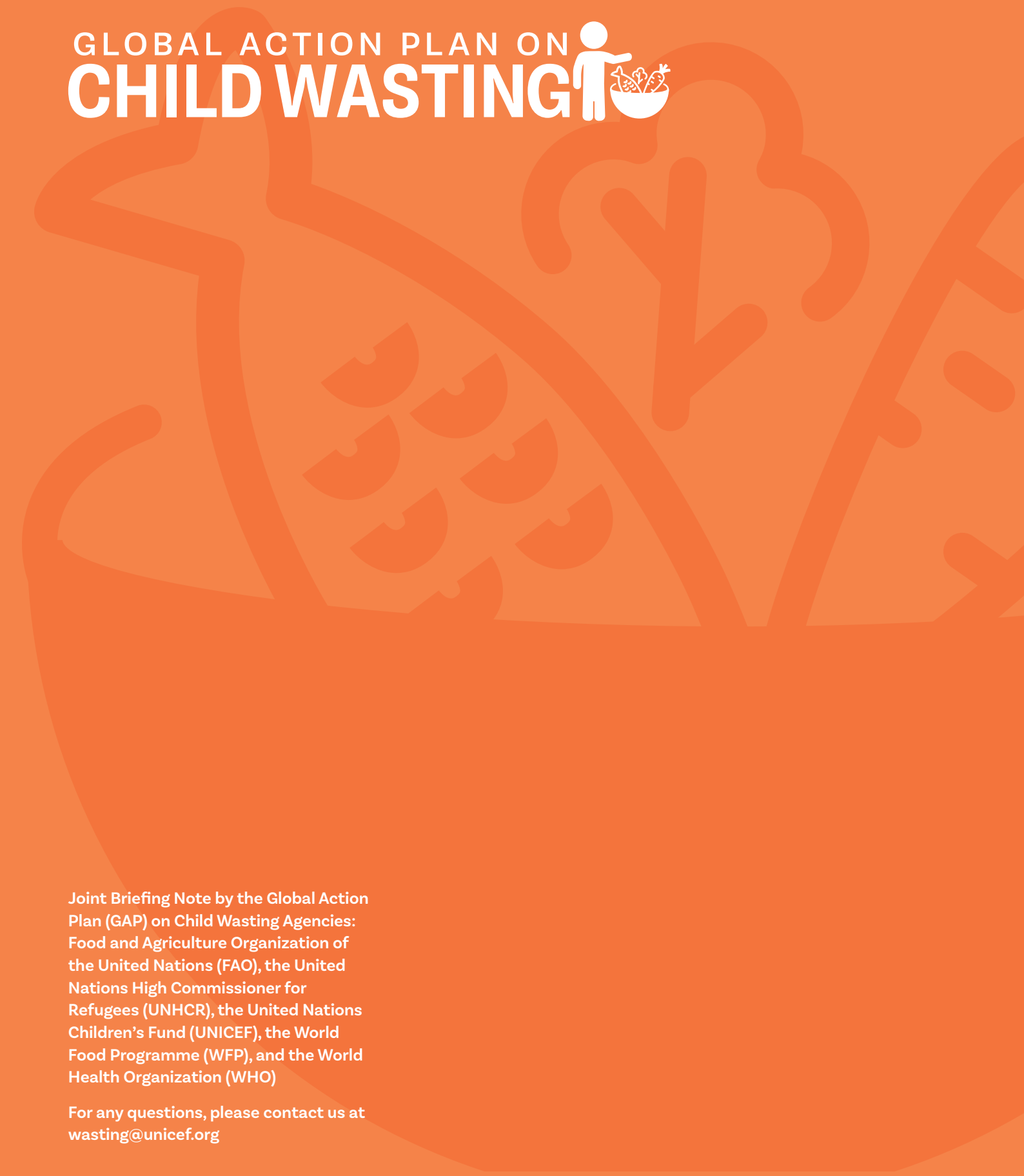
In humanitarian crises, national capacity may be supported through the humanitarian system to address the elevated needs of crisis-affected populations. This support helps prevent increases in child wasting and mortality caused by shocks and support to stabilize the situation.

Conclusion

Addressing child wasting requires proactive, multisystem actions aimed at prevention at scale targeted to vulnerable populations. Food security, health services, WASH and social protection systems must work together in a coordinated way to address the underlying drivers of child malnutrition and ensure that individuals receive the right support at each stage of life. A life cycle approach is essential to building resilience and breaking the cycle of malnutrition in vulnerable populations.

Strengthening governance, financing and accountability mechanisms is critical to sustaining progress and ensuring that policies translate into a measurable reduction in wasting. Urgent and sustained investments will not only save lives but also yield long-term social and economic benefits. With integrated and coordinated global action, we can accelerate progress, achieve the SDG 2030 targets and secure a future where all children can survive and thrive.

GLOBAL ACTION PLAN ON CHILD WASTING



Joint Briefing Note by the Global Action Plan (GAP) on Child Wasting Agencies: Food and Agriculture Organization of the United Nations (FAO), the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), and the World Health Organization (WHO)

For any questions, please contact us at wasting@unicef.org

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