



IMPROVING NUTRITION AND FEEDING FOR CHILDREN WITH DISABILITIES AND CHILDREN WITHOUT FAMILY CARE



Early nutrition is fundamental for children to grow, develop, and thrive.¹ Poor nutrition in early childhood can cause irreversible delays, and approximately 45% of all child deaths are related to undernutrition.² Nutrition works with other factors like protection and early education to form nurturing care, a set of factors that allow children to thrive.³ Early nutrition also has benefits for families, communities, and economies. Research estimates that each dollar invested in reducing stunting generates a return of up to USD \$18,⁴ and nutrition for all is instrumental to delivering at least 12 of the 17 Sustainable Development Goals.⁵

Globally, malnutrition is a leading cause of death and illness among children. Close to 150 million children suffer from stunting, and nutrition inequities place vulnerable children at particularly high risk.⁶ In many cases, successful nutrition interventions simply aren't reaching the children who are at highest risk, including children without permanent family care, and children with disabilities. It is impossible to deliver meaningful progress on child nutrition, and unlock the benefits of good nutrition on health and development, without addressing the needs of these populations of children.

NUTRITION, DISABILITY, AND FAMILY SEPARATION

It is estimated that more than 291 million children and youth have a disability,⁷ and tens of millions of children are living without family care.⁸ These populations are more likely to suffer from poor health and nutrition due to existing health conditions, stigma, barriers to accessing services, and lack of nurturing care.⁹ Children with disabilities are more likely to lose family care, and loss of family care can contribute to or exacerbate disabilities.¹⁰

Children with disabilities are three times as likely to be malnourished as other children, and twice as likely to die from malnutrition during childhood.¹¹ They are often excluded from public health programs, and lack access to nutrition and health services.¹² Families of children with disabilities may also face social isolation, economic burdens, or biases from healthcare or other service providers.¹³ Up to 85 percent of children with developmental disabilities experience feeding difficulties, such as difficulty chewing or swallowing. These difficulties, if not addressed, can lead to respiratory illnesses and undernutrition.¹⁴

Without family care, children often lose access to the nutrition they need, and to the caretaker interactions they need for brain development.¹⁵ Institutional care is harmful for children's growth and development.¹⁶ SPOON's work across 17 countries has found consistently high rates of malnutrition (up to 91%) in children who live in residential care. This malnutrition can result from a very limited diet, few chances to engage with caregivers, and barriers to accessing health, feeding, or nutrition services. Studies have shown significant improvements in nutrition and brain development when children move from institutions to family care,¹⁷ re-affirming that all children need family care to grow and thrive.

MALNUTRITION IS RESPONSIBLE FOR 45% OF CHILD DEATHS

CHILDREN WITH DISABILITIES ARE 3x AS LIKELY TO BE MALNOURISHED & 2x AS LIKELY TO DIE FROM MALNUTRITION DURING CHILDHOOD

RATES OF MALNUTRITION CAN BE AS HIGH AS 91% IN CHILDCARE INSTITUTIONS

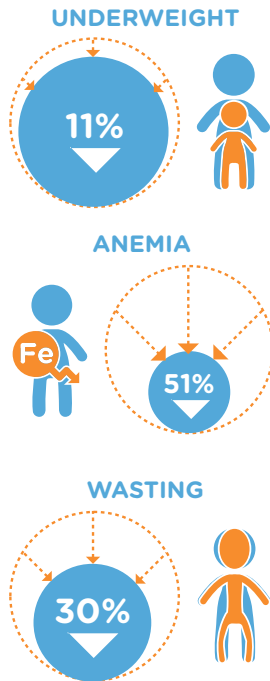
80% OF CHILDREN WITH DISABILITIES HAVE FEEDING DIFFICULTIES

EVERY CHILD'S RIGHTS TO HEALTH AND FAMILY

The United Nations Convention on the Rights of the Child (CRC), the Convention on the Rights of People with Disabilities, and the 2019 UNGA Resolution on the Rights of the Child, affirm every child's right to family life. They also affirm that every child has the right to health, including appropriate health services that promote dignity, self-reliance, and participation. The CRC emphasizes that these rights apply to all children, including those without permanent families and those with disabilities.



RESULTS FROM SPOON'S WORK



Based on preliminary data from *Count Me In*, representing 900+ children across 6 countries.

SOLUTIONS TOWARDS EQUITY IN NUTRITION

Inequities in nutrition for vulnerable children are solvable. These key actions hold the potential to ensuring that children without family care, and children with disabilities, have the nutrition they need to grow and thrive.

1) Support caregivers: Caregivers have the power to transform nutrition and feeding. Simple techniques can allow families, caregivers, and support professionals to ensure that children are positioned to eat safely, have access to nutritious food, and are fed in a nurturing environment. By providing training and support to caregivers, SPOON has seen decreases in multiple indicators of malnutrition among children with disabilities and children without family care, along with improved positioning during feeding for infants and children with disabilities.¹⁸

2) Include all children in nutrition programs and systems: Many of the nutritional issues facing vulnerable children have existing solutions that are simply not reaching them. Currently, existing nutrition projects and services are often inaccessible, or are not prepared to meet the needs of these populations of children. Including vulnerable children in nutrition programs must include dedicated outreach, training to ensure providers are prepared to respond to children's needs, and including these populations in monitoring and accountability structures.

3) Incorporate nutrition into care reform: Efforts to reform care systems and ensure every child's right to family care must include nutrition. Nutrition and feeding can strengthen outcomes for children in all types of alternative care, including preventing family separation, meeting the basic needs of children in residential care, and supporting transitions to family-based care. This should include equipping caregivers, assessing and monitoring nutrition, promoting good nutrition and feeding practices, and developing inclusive care systems.

4) Improve data and research: There remain significant gaps in research and data on nutrition issues for vulnerable children, as well as best practices to optimize nutrition.¹⁹ Children without family care are typically excluded from community services, and many population-level surveys do not collect information about disabilities in children. Limited data and information make it difficult for policy makers and health system leaders to target resources where they are needed, and contributes to the needs of these populations being perceived as a low political priority.

5) Develop inclusive policies: Leaders must prioritize the needs of the most vulnerable children in policies, strategies, and programs. Their needs must be specifically addressed in policy priorities, with resources directed to include those who are typically excluded, and clear accountability measures to hold decision makers accountable.



CALLS TO ACTION

Including vulnerable children in progress towards better nutrition will make a strong contribution to achieving universal health care, attaining the sustainable development goals, and successfully transforming child care systems to provide family care for every child. It will also mean that millions of children experience one less barrier to enjoying the quality of life they deserve. Everyone has a role to play in building an environment where vulnerable children enjoy the benefits of good nutrition.



GOVERNMENTS

- Prioritize children with disabilities and children without family care in policies, guidelines, and accountability measures related to nutrition, family care, and early child development
- Invest in programs to improve nutrition for all children, including eliminating barriers to health services



GLOBAL POLICY MAKERS

- Recognize and champion all children's rights to good nutrition, safe feeding, and nurturing family care
- Include vulnerable children in the Sustainable Development Goals agenda and efforts to achieve universal health care
- Generate and share evidence and best practices



PROGRAM IMPLEMENTERS AND RESEARCHERS

- Ensure nutrition programs include evidence-based approaches to improve nutrition in children without family care, and children with disabilities
- Incorporate nutrition into care reform programs and efforts to prevent family separation
- Track and publicly report on inclusion of vulnerable children in programs



FUNDERS

- Provide leadership and resources to efforts to improve equity in nutrition
- Prioritize nutrition and feeding in care reform programs
- Develop, track, and report on specific criteria to ensure that all programs are inclusive of vulnerable children



ADVOCATES

- Champion the rights, needs, and potential of children with disabilities and children in alternative care in all areas
- Hold decision makers accountable for including vulnerable children in nutrition programs and for meeting children's rights to nutrition and family care



ABOUT SPOON

SPOON is a nonprofit organization working to improve feeding and nutrition for vulnerable children through capacity building for caregivers. We are building a world where children living without permanent families and those with disabilities are seen, nourished, and given a chance to thrive. SPOON's app, *Count Me In*, is the first tool to collect and track nutrition and feeding data specifically for children with disabilities, children without family care, and children at risk of family separation.

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