



LEBANON  
NUTRITION  
SECTOR

# NUTRITION IN TIMES OF CRISIS

Lebanon | February 2022



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As Lebanon reels from a convergence of crises that have plunged the majority of the population into poverty, a new nationwide nutrition survey on under five-year-old children and women paints an alarming picture of malnutrition in the country, marked by major food and nutrition insecurity, poor health and nutrition practices, and a lack of access to quality services.

According to the data collected from 3,550 children and 9,200 women of reproductive age, an estimated 200,000 children under the age of 5 suffer from a form of malnutrition, including anaemia, stunting and wasting. These numbers are likely to rise significantly unless rapid, concerted action is taken.

The Lebanon Anthropometric Nutrition Survey also indicates that 9 out of 10 children aged 6–23-months-old do not receive the minimum acceptable diets needed for their health, growth, and development.

The survey was conducted in the third quarter of 2021 by Lebanon's Ministry of Public Health (MoPH), supported by nine partners, as part of the Nutrition Sector led by UNICEF and Action Against Hunger (AAH).<sup>1</sup>

<sup>1</sup> The nutrition sector also includes FAO, WHO, UNHCR, UNRWA, WFP, International Orthodox Christian Charities (IOCC), Mercy USA and Save the Children

***“What, when and how children eat before age 2 is more important than at any other time in their lives. Yet, today in Lebanon, thousands of infants and young children are not receiving the nutrition they need to survive and thrive, in many cases with irreversible life-long consequences. Good nutrition is the bedrock of child survival and development. Well-nourished children are more resilient in the face of crises such as the COVID-19 pandemic - they are better able to grow, learn, play and participate in their communities.”***

***Ettie Higgins, UNICEF Lebanon Representative a.i.***

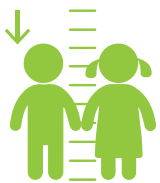




## MALNUTRITION

The survey indicates that 7 per cent of children are stunted – too short for their age – an indicator of chronic malnutrition. Stunting affects children’s cognitive potential, effectively hindering their ability to learn and, eventually, to earn and contribute to society. Stunting rates are alarmingly high among Syrians, at 25 per cent – up from 17 per cent in 2013 – among children in Beirut (11 per cent) and in Palestinian camps (10.5 per cent).

Another 1.8 per cent of children at national level and 4 per cent of Palestinian children are acutely malnourished. Among pregnant and lactating women, the acute malnutrition rates reach 5 per cent nationally, 7.6 per cent for Syrians and 9.5 per cent for Palestinians. While trends over the past 10 years show a slight improvement in the incidence of acute malnutrition among Lebanese and refugee children, there are serious concerns the rates could rise significantly among the most vulnerable women and children, as the country contends with a devastating economic depression exacerbated by the impact of the COVID-19 pandemic and the aftermath of the massive August 2020 Beirut explosions.



**7% of children**  
*are too short for their age*



**1.8% of children at national level and  
4% of Palestinian children**  
*are acutely malnourished*



## ANAEMIA

The survey shows that 41 per cent of children are affected by a degree of anaemia. Chronic poor diets can result in anaemia, which is often caused by a lack of iron and other micronutrient deficiencies. Anaemia, an indicator of both poor health and poor nutrition, can irreversibly impact children’s cognitive capacity and weaken their immune systems – leaving them more vulnerable to COVID-19 and other diseases. 42 per cent of women of reproductive age are also affected by a degree of anaemia. Anaemia makes women weaker during pregnancy and delivery, and can lead to stillbirth, low birthweight, wasting<sup>2</sup> and developmental delays in children.



**41% of children are**  
*affected by anaemia*

<sup>2</sup> Wasting is a life-threatening form of malnutrition. Children with wasting are too thin and their immune systems are weak, leaving them vulnerable to developmental delays, disease and death.



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## INFANT AND YOUNG CHILD FEEDING (IYCF)

70 per cent of children in Lebanon are not exclusively breastfed. While over 60 per cent of newborns have an early breastfeeding initiation, only 47 per cent of children continue to be breastfed until the age of 23 months. Breastfeeding is an important child survival intervention that provides the best start in life. When initiated within the first hour of birth, provided exclusively for six months<sup>3</sup> and continued up to two years or beyond together with complementary feeding, it provides a powerful defence against malnutrition and acts as babies' first vaccine, protecting them against many common childhood illnesses.



**70% of children**  
*are not exclusively breastfed*



## WHAT CHILDREN EAT IN LEBANON?

Over 94 per cent of 6-23 months old children are failing to receive minimum acceptable diets needed for their health, growth, and development. In 60 per cent of cases, children's diets do not have sufficient vitamin A and proteins, while 80 per cent of children miss Minimum Meal Frequency<sup>4</sup> and the diets of 70 per cent are not well diversified from five food groups. The foods that are rich sources of proteins and Vitamin A do not reach the plates of almost 80 per cent of children in Lebanon. This poor dietary status during early childhood could be a reason for the levels of stunting and micronutrient deficiencies in Lebanon, which have irreversible lifelong impacts on brain development, and cause low immunity and major risks to the survival of the child.

**Over 94 per cent of 6-23 months old children**  
*do not receive their diet needs.*

<sup>3</sup> Meaning only breast milk, and nothing else, is provided.

<sup>4</sup> Defined as twice a day for breastfed infants aged 6-8 months, three times for breastfed children aged 9-23 months and four times for non-breastfed children aged 6-23 months.



## A NEED FOR URGENT ACTION



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As part of the Nutrition Sector Response to date, 15 partners have participated actively in delivering coordinated essential nutrition interventions to address the growing nutritional needs in Lebanon. During 2021, micronutrient supplements were provided to 30,009 children, and subsidized treatment was provided to 2,240 acutely malnourished children – 1,520 of them moderately acutely malnourished (MAM) and 720 severely acutely malnourished (SAM).

63 per cent of newborns in Lebanon benefited from early initiation of breastfeeding, which is twice the average in the Middle East and North Africa region. This is in large part a result of the extensive support in institutionalizing the Baby Friendly Hospital Initiatives and its 10 Steps to Successful Breastfeeding in 12 hospitals through partners.

In partnership with the parliamentary Women and Children committee, MOPH, and more than 60 partners, a nationwide Infant and Young Child Feeding campaign, coupled with a IYCF hotline has been operationalized to increase outreach, referral, and counselling across the country.

- The campaign reached almost 4.2 million people in 2021 through its social media.
- 601,732 caregivers of children under age 2 received awareness messages on optimum IYCF, more than 45,000 pregnant and lactating women were given face-to-face counselling on IYCF, and more than 1,000 mothers were supported to re-lactate.
- 1,229 frontline workers, and 80 lactation specialists and hotline staff were provided essential knowledge and skill sets.

With the compound crises showing no sign of abating, the estimated number of children suffering from malnutrition could increase drastically, unless the response is swiftly scaled up. To scale up efforts and maximize efficiencies to improve the nutritional well-being of children and women, the nutrition response must apply four guiding principles:

- 1 | Prevention comes first; when prevention fails, treatment is necessary.
- 2 | Nutrition needs must be met throughout the life cycle, with a strong focus on the first 1,000 days of life – between a woman’s pregnancy and her child’s second birthday.
- 3 | The response needs to focus on improving diets, as well as nutrition practices and services for all children and women.
- 4 | Key stakeholders from relevant ministries and partners, including the health, food and agriculture, social protection and welfare, education, and water and sanitation sectors, as well as municipalities and community leaders, need to be accountable, involved and mobilized.

While efforts have been made, the Nutrition Sector governance and capacity needs to be strengthened, notably by raising the profile of nutrition in response plans, availing required resources to scale up the response, empowering the coordination and generating evidence for programming, and standardizing the approaches and protocols. In this way, more children, adolescents, and women will benefit from adequate diets, practices, and services, and will have improved nutritional status in Lebanon.



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*“Improving nutrition has the power to protect the health of children and their mothers by reducing disease and mortality. It improves cognitive development, school performance and physical work capacity. So, clearly, investing in nutrition not only fulfils children’s right to health and nutrition, but it is also a smart, cost-effective investment in the socio-economic development of Lebanon.”*

*Amirhossein Yarparvar, Lebanon Nutrition Sector Coordinator.*



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