MILLENNIUM DEVELOPMENT GOAL (MDG) 1: ERADICATION OF EXTREME POVERTY AND HUNGER BY HALF TRACKING PROGRESS ON THE PREVALENCE AND TRENDS OF CHILD UNDERNUTRITION IN THE PHILIPPINES

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BACKGROUND

MDG 1 focuses on eradication of poverty and hunger by aiming to halve the proportion of people suffering from hunger between 1990 and 2015. One of the measures is the reduction of underweight among children under-five years old. The country needs 6.4 percentage-points reduction from 2013 to reach the MDG of 13.6 percent by 2015.

OBJECTIVE

The study aimed to evaluate the Philippine status on the achievement of MDG 1 by tracking trends in the prevalence of undernutrition in children from 1990 to 2015.

MATERIALS AND METHODS

Underweight prevalences of children under-five years from the National Nutrition Surveys of the Department of Science and Technology-Food and Nutrition Research Institute (DOST-FNRI) were used to track trends in 1990 until 2013. The weight and height data of children (n=16,763) from 42,310 randomly selected households in 2015 Updating Survey were utilized to generate undernutrition prevalence. Calibrated instruments were used by trained professionals to measure weight and height of children. Data were validated, processed and analyzed to generate prevalence rates.

RESULTS

There was slow decline in the prevalence of underweight from 1990 to 2015 with an annual average reduction of 0.23 percentage-points. The prevalence rate of underweight significantly increased by 1.5 percentage-points between 2013 (20.0%) and 2015 (21.5%). The most vulnerable were children, 2 years old and over but the sharp increase was observed between 0-5 months (9.2%) and 6-11 months (17%). Rural areas and the poorest quintile had higher rates of underweight prevalence than the urban areas and the richest quintile.

CONCLUSIONS AND RECOMMENDATIONS

The country failed to reach the MDG 1 target of reducing by half the underweight prevalence among children under-five. Underweight continues to be a public health problem. In-depth analysis of data is needed to know the factors that may contribute to non-achievement of MDG 1 for proper targeting and intervention. Nutrition policies and programs particularly on the first 1000 days should be heightened as the window for intervention, to make up for missing MDG 1 target. Scale-up nutrition-sensitive and nutrition-specific interventions to improve maternal and child health, particularly in rural areas and the poorest quintile households. Make nutrition as the top priority development agenda alongside with poverty and food security, among others in order to achieve the Sustainable Development Goals by 2025 as the MDG ends in 2015.