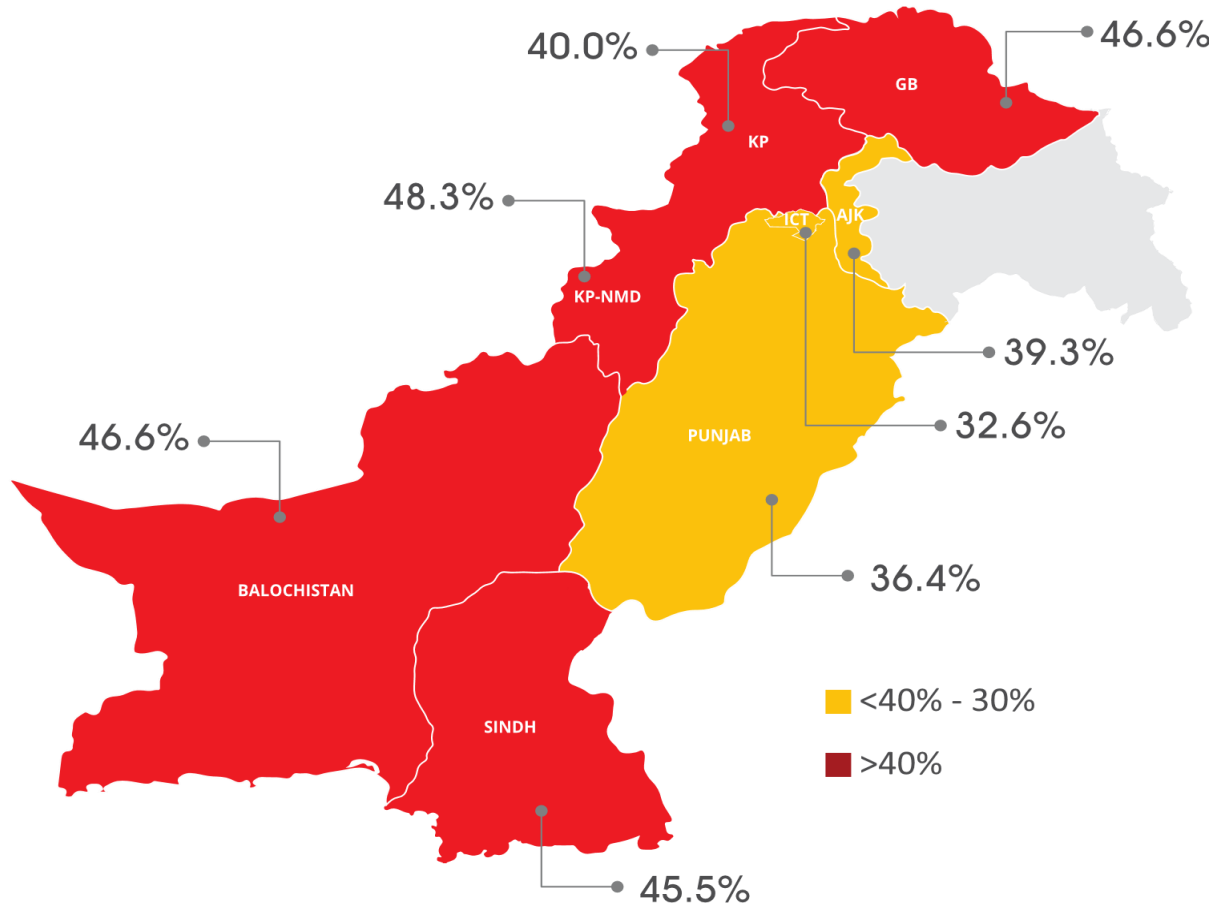


National Nutrition Survey 2018



KEY FINDINGS ON GB

SDG Support Unit, P&DD,
Government of GB

National Nutrition Survey 2018¹

Introduction

The National Nutrition Survey (NNS 2018), is the largest national nutrition survey in Pakistan. It is designed to provide a unique set of nutrition-related data including environmental, anthropometric and biochemical indicators to help evidence-based planning and policy making. NNS is conducted by Ministry of National Health Services, Regulations and Coordination, Islamabad in collaboration with the Aga Khan University and UNICEF. NNS 2018 is the fifth national nutrition survey since 1965, but the first to yield district-representative data and to include adolescents and a component on water. The Ministry of Health Services, Islamabad has published Key Findings Report of NNS 2018, however, detailed report is awaited.

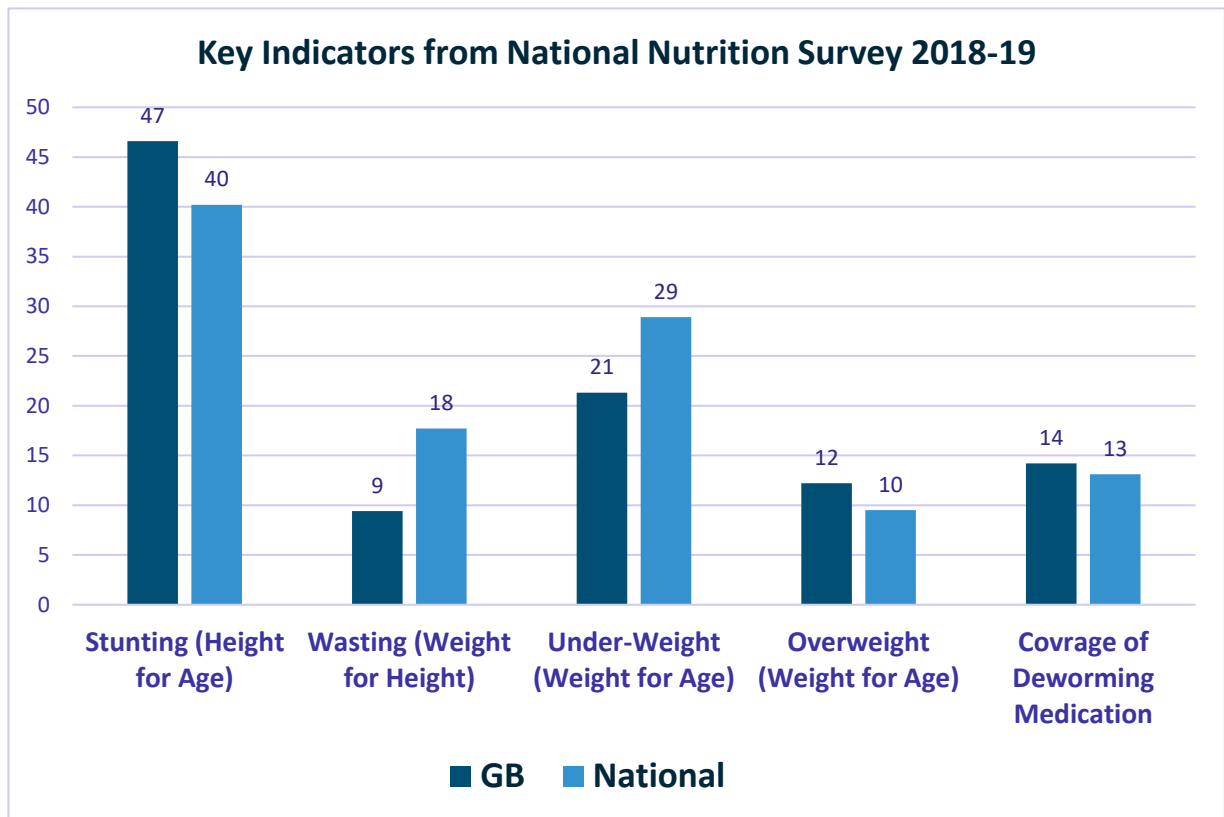
The study group included children, women of reproductive age (WRA) and adolescent boys and girls. NNS 2018 employed a cross-sectional survey design at the household level to collect information on children, women of reproductive age (WRA) and adolescent boys and girls. It used a mixed-method data collection methodology with both quantitative and qualitative approaches. It provides regionally representative results for AJK and GB. A national, provincial and district representative sample of 76,742 children (aged 0–59 months), 145,847 adolescents (10–19 years) and 145,324 WRA (15–45 years) was selected from 115,600 households.

¹ Brief prepared using the NNS Key Findings Report 2018-19

In GB, a total of 5671 including 4933 Rural and 738 urban households were sampled with 98% HH RR. Overall 10128 women (15-49) were eligible for interview with a RR of 70.3%. The number of eligible adolescent (10-19 Years) were 5237. There were 5420 under five children with a RR of 71.4 in GB.

Key Findings from National Nutrition Survey (2011 vs 2018)

In Pakistan, four out of ten children under five years of age are stunted while 17.7% suffer from wasting. The prevalence of stunting has declined from 48% in 1965 to 36% 1994 but increased from 42% in 2001 to 44% in 2011. In 2018, the figure still stands at approximately 40 percent which is a critical situation from the global standards. With the average annual reduction rate, estimated at 0.5%, it is very unlikely that Pakistan will achieve the target set out under the SDGs.



Stunting has been a challenging issue in the context of GB as it is observed highest in Pakistan. The proportion of under 5-year-old stunted children have in fact gone up from 2011 to 2018 in GB. The proportion of under five-year-old children suffering from underweight was 23% in 2011 which declined slightly to 21 percent in 2018. In

Pakistan, the double burden of malnutrition is becoming increasingly apparent, with almost one in three children underweight (28.9%) alongside a high prevalence of overweight (9.5%) in the same age group. The

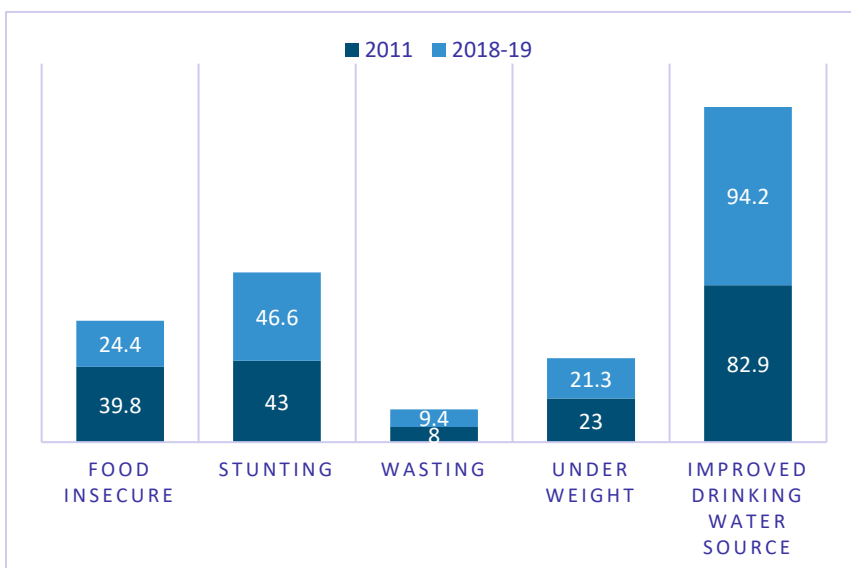


Figure 1: Trends in nutrition indicators from 2011 to 2018 (NNS)

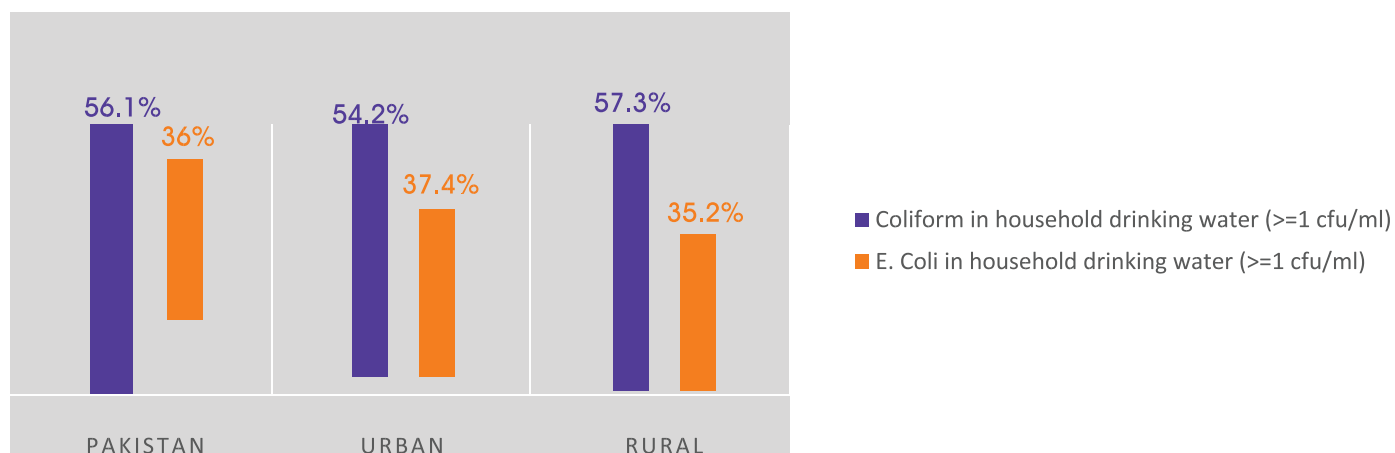
prevalence of overweight among children under five has almost doubled over seven years, increasing from 5% in 2011 to 9.5% in 2018.

The proportion of underweight (weight for age) children in GB is lower than the national average which stands at 29% approximately. The proportion of under five-year-old children whose weight for height is lower than the standards is lower in GB at 9 percent compared to the national average of 18 percent. The proportion of under five-year-old children whose weight for height is above the standard range is 12 percent in GB which is slightly above the national average of 10 percent.

Although NNS doesn't provide statistics on prevalence of undernourishment currently. However, NNS is the most relevant survey which can be aligned to provide data on undernourishment.

Over nine out of ten households (92.6%) in Pakistan have access to improved sources of drinking water. There is some disparity in urban and rural populations, and variations between provinces/regions. However, the report further observed that drinking water from 56.1% of households in Pakistan is contaminated with coliforms, with a slightly higher rate in rural (57.3%) than in urban areas (54.2%). The highest prevalence of coliform contamination is in ICT (92%) and the lowest in GB (12%)

About 36.0% of households in Pakistan drink water contaminated with E. Coli, with a slightly higher rate in urban (37.4%) than rural areas (35.2%). The highest prevalence of E. Coli contamination is in KP-NMD (78.3%) and the lowest in Punjab (30.4%).



Food insecurity has been reduced drastically from 40 to 24 percent in GB from 2011 to 2018. GB has comparatively higher social protection coverage followed by Sindh. The national social protection coverage is 4.9%.

GB	Sindh	Punjab	KPK	Balochistan	ICT	AJK
10.3	12.7	1.8	5.1	0.3	0.9	4.9

Nutritional Status of GB in comparison with National status

Indicator	Pakistan	GB	GB in comparison with National
Stunting	40.2%	46.6%	The prevalence of stunting is higher in GB compared to the national average.
Wasting	17.7%	9.4%	Wasting (Weight for Height lower than -2 SD from the median of WHO standards) is lower in GB as compared to National average. Lowest in Pakistan, 9.4% which is way below the emergency threshold of 15%.
Underweight	28.9%	21.3%	Underweight (weight for age less than -2 SD of the Z score) in GB is less than national average.
Overweight	9.5%	12.2%	Overweight (weight for Height is greater than +2 SD from the median of WHO standards) in GB is higher than the national average.
Deworming	13.1%	14.2	Coverage of deworming medication is highest in GB (14.2%) and Punjab (14.1%) and lowest in ICT (6.5%) and KP-NMD (6.7%).
Early initiation of Breastfeeding	45.8%	20.1%	The practice of early initiation of breastfeeding varies from 20.1% in GB to 61.1% in Balochistan

Exclusive Breast feeding (within 1 hour)	48.1%	54.9%	The proportion of children who are exclusively breastfed for the first six months of life is above the national average
Age appropriate complementary feeding	36%	40%	All complementary feeding indicators are far below acceptable levels in the country as whole
Improved source of drinking water (up to 6 month)	92.6% Urban:93.8% Rural:91.9%	94.2%	Punjab has the Highest proportion of households with access to improved sources of drinking water (95.9%).GB has the third highest proportion of household with access to improved sources of drinking water (94.2%)
sanitation facility	Rural:78% Urban:95.8% Total:84.7%	79.7%	ICT (98.2%) and Punjab (92.7%) have the highest proportion of households with access to an improved sanitation facility
Food In-Security	36.9 % [Mild Food Insecure: 11.1%, Moderate Food Insecure: 7.6%, Severe Food Insecure: 18.3%]	24.4% [Mild Food Insecure: 13.2%, Moderate Food Insecure: 7.5%, Severe Food Insecure: 3.7%]	Food insecurity as per FIES scale is lower in GB compared to the national level.
Social protection	total:4.9% Rural:6.2% Urban:2.9%	10.3%	Sindh has the highest proportion of Population covered under social protection