

From National Coordinator's Desk

Urging India to Adopt WHO Growth Standards The way to achieve optimal growth of infants and young children

It was in 1994 that the 47th World Health Assembly (WHA) adopted a resolution to the effect to call for an international study to establish growth standards for children around the world. This was to create a benchmark to assess the growth of 'breastfed children' since earlier references available so far were of mostly a population of artificially fed babies in the United States. Finally, in the year 1997-2003 WHO multi-centric growth reference study was undertaken on approximately 8500 children from six nations: Brazil, Ghana, India, Norway, Oman and USA representing a wide range of ethnic and cultural settings. The result was phenomenal. We have with us now, ONE international standard for children from birth to five years on how *children should grow*. The new child growth standards have been generated to assess the growth of infants and young children; this is a crucial development in improving infant and young child nutrition globally. India should adopt the WHO Growth Standards and follow the parameters as prescribed.



Unlike the old growth charts, the new standards (1) describe how children "should grow," (2) establish breastfeeding as the biological "norm," and (3) provide international standards for all healthy children, as human milk supports not only healthy growth, but also optimal cognitive development and long-term health. Previous growth standards, which were used to monitor a child's progress, had higher weights as they were based on mixed-fed children (infants both breastfed and formula fed). This led to frequently held misconception that breastfed babies did not grow fast enough and supplementation and early cessation of breastfeeding was becoming normal behavior. The study actually showed that children can grow remarkably similar, provided certain basic conditions are met and this effect is not due to genetic or ethnic reasons but because of optimal environmental conditions.

What are these conditions? Firstly, optimal breastfeeding i.e. beginning breastfeeding within one hour, exclusive breastfeeding for the first six months (should be protected, promoted and supported; with appropriate and adequate complementary feeding beginning after six months along with continued breastfeeding). Secondly, fully implementing the objectives of the *Global Strategy for Infant and Young Child Feeding (2002)*, as well as national guidelines for child nutrition. Thirdly, all children should receive vaccinations and good health care, and all women receive good care during pregnancy. Fourthly, creating a smoke free environment during pregnancy. Howsoever difficult these may seem, conditions are achievable with determination and will to support women to achieve optimal growth and development of infants and young children. There is no point having a newly printed growth curve, unless we make these conditions widely available to women and children.

Because the new standards replace the old references which only described how a sample of children were growing at that time and place, new growth standards have to be understood as tool for evaluation and effectiveness of our programmes for women and children, and how an individual child *should grow*. Every child in the world has the potential to grow and develop if her/his basic needs are met.

The new standards establish the breastfed infant as a norm. This is a strong advocacy tool for tackling under-nutrition among infants and young children. For those who are worried about obesity, the new standards make an effective tool for detecting obesity early.

The new standards are going to be useful to all those aiming at improved health of children e.g. parents, doctors, managers, advocates and policymakers to improve their understanding of what is good nutrition, health, and development.

There is a strong case for considering the new international growth standard as an indicator for the child having realized its right to grow optimally, and to develop to his or her full potential. This should be used as a measuring stick that evaluates the growth of a 'child' or a population of children. Indian government, including all state governments, should look at the prospects of WHO Growth Standards and adopt these, and make a triumph to improve child health and development.

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