

South African Early Childhood Review 2024



3. Nutrition

Hall K, Almeleh C, Giese S, Mphaphuli E, Slemming W, Mathys R, Droomer L, Proudlock P, Kotze J, and Sadan M. South African Early Childhood Review 2024. Cape Town: Children's Institute University of Cape Town and Ilifa Labantwana

High prevalence of malnutrition

South Africa faces the complex challenge of having to contend with a **high prevalence of both over- and undernutrition**, both of which are forms of malnutrition.

Stunting is the most common form of malnutrition in South Africa, affecting **27% (over 1.5 million) children under the age of five.**



Overweight is the second most common form of malnutrition, affecting **13% of children under five years in South Africa (approximately 730,000 young children).**

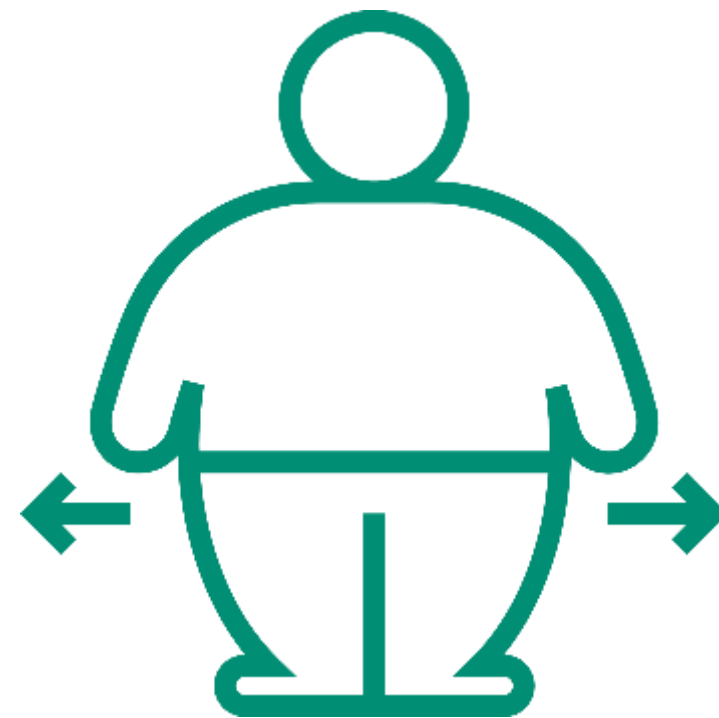
Stunting

- Children are stunted if they are **too short for their age**. Stunting occurs because of **chronic undernutrition**.
- Stunted children are more likely to start school with developmental delays, perform poorly at school, be unemployed when they grow up, and suffer from chronic conditions such as obesity, hypertension, and diabetes in adulthood.
- All the surveys point to **high rates of child stunting**.
- Community stunting prevalence rates in some districts were **substantially lower than the overall stunting prevalence levels in their respective provinces**.
- South Africa's **under-5 stunting rates have remained persistently high over the past 30 years**, and the country is not on track to reach any of the global targets.
- Provincial stunting estimates in 2021-23 were higher than the 2016 estimates in the Eastern Cape, Western Cape, Northern Cape, KwaZulu-Natal, Mpumalanga, and North West.

Overweight

- A child is defined as overweight if their weight is **more than two standard deviations above the median compared to their height.**
- Being overweight does not necessarily mean that the child is receiving **enough nutrition.**

In South Africa, being overweight is often related to **poor dietary practices and poverty.**



The prevalence of overweight among children under five had **increased to 23% in 2021-23.**

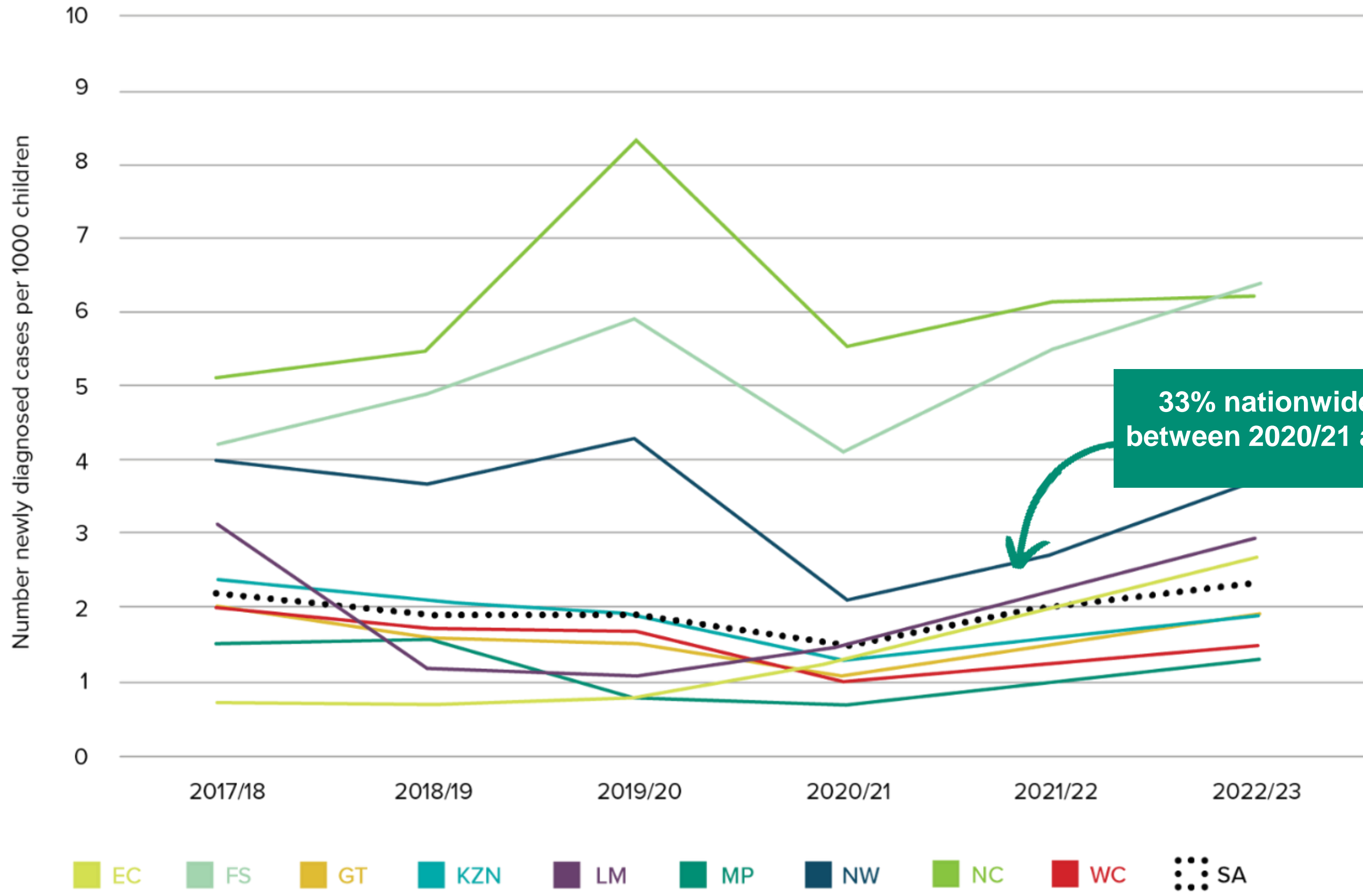
Wasting and severe acute malnutrition



In 2022/23, a staggering 15,000 children required hospitalisation due to severe acute malnutrition

- Severe acute malnutrition (SAM) is the **most immediate, visible, and life-threatening form of malnutrition** and is defined as a weight that is too low compared to a child's height.
- New cases of SAM are alarming, with a **33% nationwide increase between 2020/21 and 2021/22**. More recent data from the Department of Health showed that the **incidence rate had increased by a further 20% by mid-2023**.
- Alongside the increase in SAM incidence is an **8% rise in the proportion of children admitted with SAM in healthcare facilities who do not survive**. In 2020/21, 7.9% of all hospitalisations of children with SAM resulted in death.
- For every one child in South Africa who suffers from SAM approximately **135 children are affected by stunting**. Children who recover from early stunting still perform more poorly in cognitive tests than their peers

FIGURE 11: INCIDENCE OF SEVERE ACUTE MALNUTRITION AMONG CHILDREN UNDER FIVE



Source: DHIS data published in Health Systems Trust (2020) District Health Barometer data file; Ndlovu N, Gray A, Mkhabela B, Myende N & Day C (2023) Health and related indicators 2022 In: Padarath A, Moeti T, (Eds). South African Health Review 2022. Health Systems Trust.

Suggested interventions to improve nutrition











Food inflation has been particularly high in recent years and the CSG is substantially below the food poverty line



In 2022, 20% of children under 6 years lived in households that ran out of food during the month due to a lack of money.

- Nutrition programmes for young children in **ECD facilities**.
- Reduce food insecurity and child malnutrition through increased **social assistance for children and mothers. Restore the CSG to the food poverty line, starting with children under 6 years.**
- Expand **home-based community health services**.
- Prioritise **maternal nutrition** before and during pregnancy.
- Monitor **micronutrient deficiency** and ensure the micronutrients are accessible and affordable for pregnant women and their young children.
- **Breastfeeding** support.
- Develop strategies to reduce or counter **food price inflation**.







TABLE 5: NUTRITIONAL INDICATORS FOR PREGNANT WOMEN AND CHILDREN UNDER 6 YEARS, BY PROVINCE




3 Year change	Indicator	SA	EC	FS	GT	KZN	LP	MP	NW	NC	WC	Data year	source
Population	 Low birth weight % infants born with weight below 2500g	13,2%	14,3%	14,8%	14,0%	12,3%	10,6%	12,0%	14,0%	18,2%	14,4%	2021/22	d
	 Child hunger Children <6 in households where children suffer hunger	854 000 12%	50 000 6%	46 000 14%	109 000 7%	269 000 19%	33 000 4%	92 000 15%	101 000 19%	41 000 26%	110 000 15%	2022	b
	 Food insecurity Children <6 in households that ran out of food due to lack of money	1 408 000 20%	151 000 19%	76 000 22%	208 000 13%	428 000 31%	26 000 3%	175 000 28%	176 000 34%	50 000 32%	119 000 17%	2022	b
	 Low food diversity Children <6 in households who reduced variety of food due to lack of money	1 798 000 26%	273 000 34%	106 000 32%	306 000 19%	470 000 34%	43 000 5%	189 000 31%	179 000 34%	59 000 38%	173 000 24%	2022	b
Service access/delivery	 Infant breastfeeding Infants exclusively breastfed at 14 weeks (as proportion of 3rd vaccination clients)	44%	43%	44%	47%	56%	33%	39%	33%	49%	40%	2021/22	d
	 Early initiation of breastfeeding First breastfeed within 1 hour of birth	89%	71%	90%	91%	95%	84%	92%	87%	95%	98%	2021-2023	g
	 Exclusive breastfeeding - 6 months Children aged under 6 months who are exclusively breastfed	22.2%	25,0%	26,4%	30,0%	10,3%	21,3%	32,6%	30,8%	22,1%	24,2%	2021-2023	g
	 Vitamin A coverage in children (12 - 59 months)	60,3%	63,7%	55,7%	57,1%	78,2%	49,5%	57,9%	50,9%	42,5%	51,4%	2021/22	d

continued



TABLE 5: NUTRITIONAL INDICATORS FOR PREGNANT WOMEN AND CHILDREN UNDER 6 YEARS, BY PROVINCE

3 Year change	Indicator	SA	EC	FS	GT	KZN	LP	MP	NW	NC	WC	Data year	source
Outcome	 Severe acute malnutrition incidence per 1,000 in children under 5	2,0	2,0	5,5	1,6	1,6	2,2	1,0	2,7	6,1	1,3	2021/22	e
	 Severe acute malnutrition fatality as % of children with severe acute malnutrition in health facilities	7,9%	9,7%	8,6%	7,7%	10,4%	6,2%	10,9%	6,6%	5,9%	2,4%	2021/22	d
	 Stunting in children under 5	28,8%	33,3%	32,1%	23,9%	27,5%	14,9%	21,8%	30,3%	46,2%	46,4%	2021 - 2023	g
	 Wasting in children under 5	5,3%	3,8%	4,3%	6,8%	2,1%	6,6%	7,4%	5,3%	23,8%	3,8%	2021 - 2023	g
	 Underweight in children under 5	7,7%	5,3%	11,4%	7,7%	4,4%	8,8%	8,4%	14,4%	27,6%	5,3%	2021 - 2023	g
	 Overweight in children under 5	22,6%	25,9%	14,2%	16,4%	30,1%	24,5%	17,5%	16,3%	8,1%	26,6%	2021 - 2023	g

  numbers have increased or decreased since the pre-COVID baseline  no significant change between pre-COVID baseline and most recent data

 worsening / negative  improving / positive  no significant change  no discernible change due to lack of comparative data

Data gaps

- South Africa needs more regular data on child nutrition, micronutrient deficiencies, and nutritional outcomes.
- There is a need to invest in collecting more data at the small area level for all forms of malnutrition, particularly for stunting.
- There is also a need to standardise nutrition survey methodologies so that estimates are comparable and can be used for tracking progress.
- Stunting, the most common form of malnutrition in South Africa, should be routinely monitored (for example through more regular Demographic and Health surveys).
- Routine and accurate growth monitoring and plotting children's weight and height in their Road to Health Book enables early detection and treatment of malnutrition.