

FOR EVERY CHILD

UNICEF Canada Magazine
Fall/Winter 2010



Nourishing Growing Bodies & Minds

Surviving food crisis in the Sahel
Micronutrients reaching millions of children
Nutrition crisis in Haiti averted
A farewell from Nigel Fisher

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canada

A farewell message from Nigel Fisher, UNICEF Canada's CEO since 2005

As some of you may know, in February I was temporarily posted to Haiti to lead the UN relief and recovery efforts. The work has been difficult and the challenges great, but hope is alive and thriving in Haiti. It's in the children going back to school. It's in the twinkle in their eyes.

In an emergency like Haiti, or the recent flooding in Pakistan, the road to recovery is long and arduous and success requires continuous leadership. And so, after considerable reflection, I have decided to stay on in Haiti to oversee the combined UN efforts for long-term recovery and transformation.

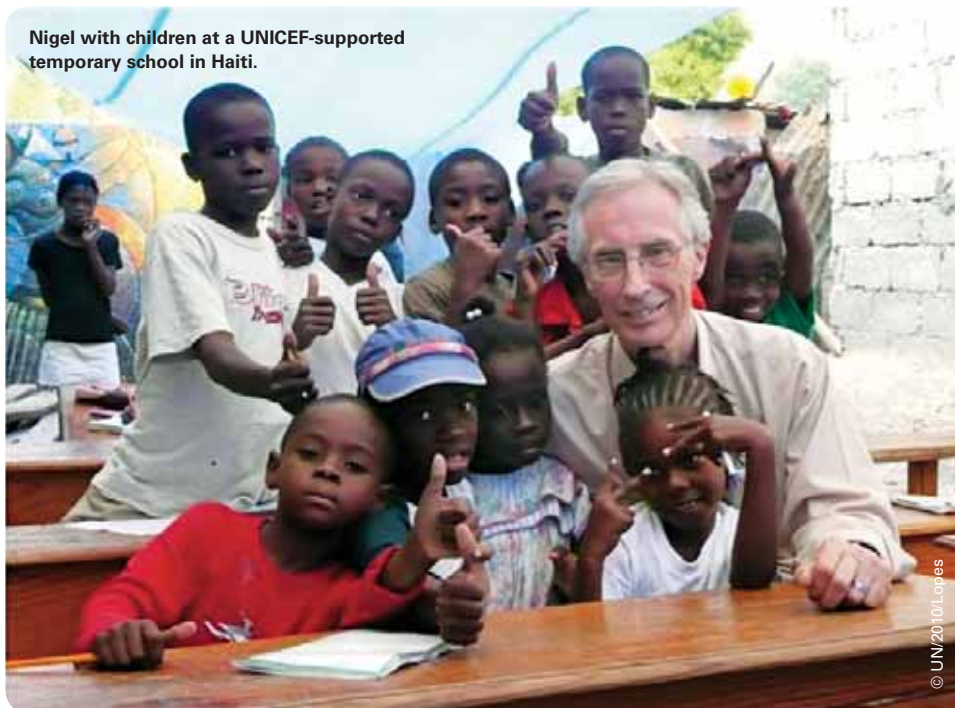
The decision to leave UNICEF Canada has been a difficult one, especially because we have come so far together—striving to ensure that every child has every opportunity, both in Canada and around the world.

Through my work over the past 25 years in numerous humanitarian missions, I have seen time and again *without fail*, the life-saving impact that UNICEF donors like you make each day. You help save lives, assure clean water and reunite lost children with their families. You help avert nutrition crises, get kids back to school and enable communities to rebuild their lives. These achievements would not be possible without your unwavering commitment to transforming children's lives.

Thank you for believing so fiercely in what UNICEF can do for children. I know that together we will continue to shape a world fit for all children.



Nigel Fisher



Nigel with children at a UNICEF-supported temporary school in Haiti.



UNICEF is the world's leading child-focused humanitarian and development agency. Through innovative programs and advocacy work, we save children's lives and secure their rights in virtually every country. Our global reach, unparalleled influence on policymakers, and diverse partnerships make us an instrumental force in shaping a world in which no child dies of a preventable cause. UNICEF is supported entirely by voluntary donations and helps all children, regardless of race, religion or politics.

FOR EVERY CHILD

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© UNICEF/NYHQ2007-0632/Pirozzi
A girl in Liberia eats lunch at a UNICEF-supported school.

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THIS ISSUE:

ALL ABOUT NUTRITION

The benefits of proper nutrition can't be overstated. A well-nourished child is more likely to be healthy, able to learn and productive. Good nutrition benefits families, their communities and the world as a whole.

Malnutrition is, by the same logic, devastating. It plays a part in more than one third of all child deaths in developing countries. Yet only a fraction of these deaths occur in catastrophes such as famine or war. Malnutrition cripples children's growth daily, renders them susceptible to disease and blunts their intellect. It saps the productivity of everyone it touches and perpetuates poverty.

This Fall issue of *For Every Child* looks at how the UNICEF initiatives you support help us work toward eliminating malnutrition—an entirely feasible goal. From its founding, UNICEF has worked toward this goal with high-impact nutrition programs reaching children worldwide. Today there are fewer undernourished children in the world than in the 1990s. We won't stop until every child is well-nourished and protected against deficiencies.

Thank you for your continued solidarity as we work to see all children given the best start in life.

Malnutrition commonly refers to a state of undernutrition, although it can also mean overnutrition (associated with issues like obesity). The immediate causes are inadequate dietary intake and infectious disease.

HOW CHILDREN ARE AFFECTED:

Acute malnutrition

Low weight for height ('wasting'), or the presence of swelling caused by fluid retention.

Chronic malnutrition

Low height for age ('stunting'), with irreversible impacts on physical and mental development.

Micronutrient malnutrition

Deficiencies of essential vitamins and minerals.

Tiny but mighty
Micronutrients keep hidden nutritional deficiencies at bay. **2**

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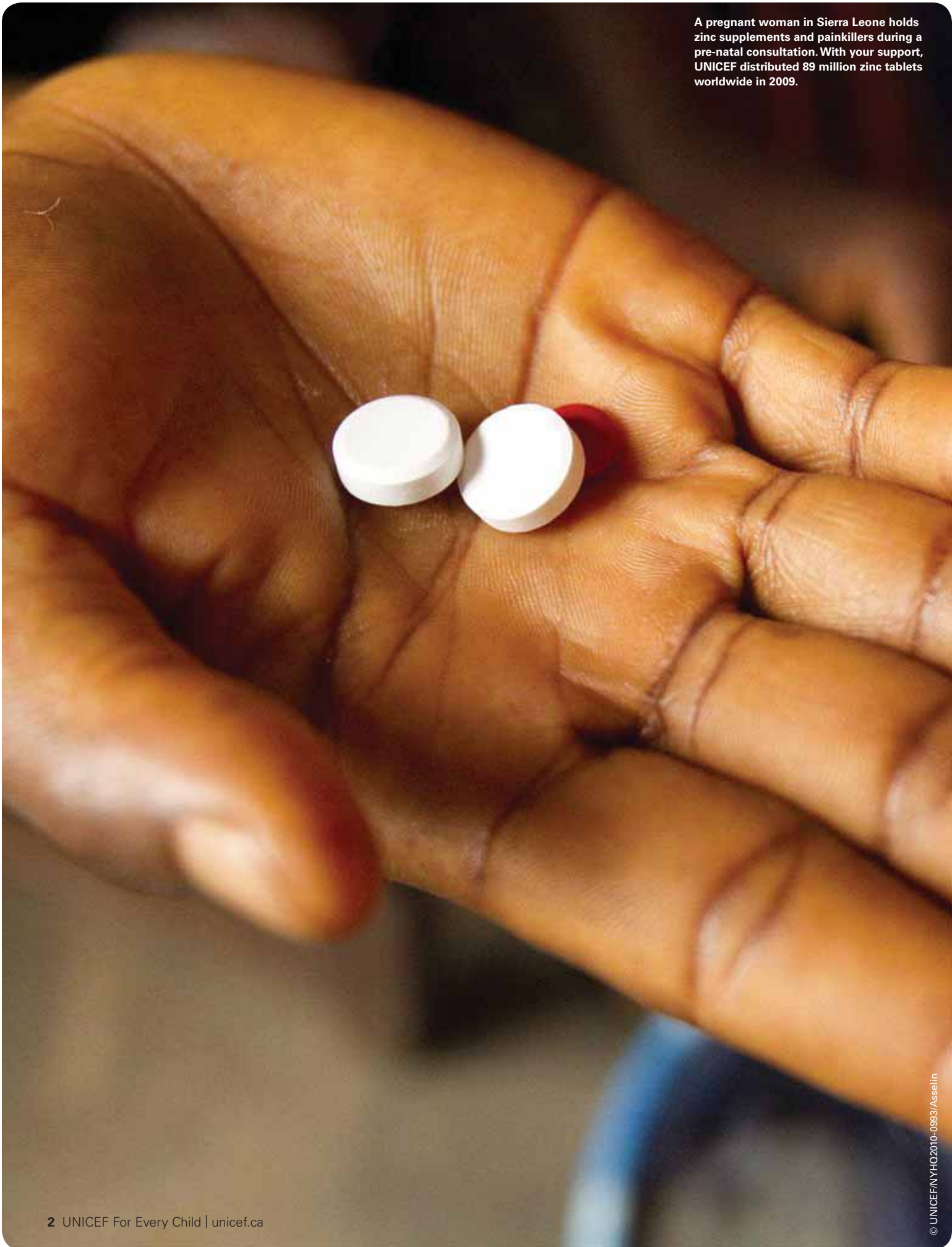
Spotlight on supporters
Leading Canadian mineral company Teck kick-starts life-saving zinc initiative. **17**

In Canada
Stopping the onslaught of junk food ads aimed at Canadian kids. **17**



Some children are so undernourished their upper arms are no wider than a cherry tomato. Learn how your support provides urgent nutritional care to babies like Hissène caught in the midst of the Sahelian food crisis. Full story on page 6.

A pregnant woman in Sierra Leone holds zinc supplements and painkillers during a pre-natal consultation. With your support, UNICEF distributed 89 million zinc tablets worldwide in 2009.



TINY BUT MIGHTY

The vitamins and minerals that
combat hidden malnutrition

Micronutrients are essential vitamins and minerals required in tiny amounts over a lifetime for proper physical and mental development. When diets lack nutrient-rich foods, micronutrient supplements can fill in the gaps. UNICEF works with governments and diverse partners around the world to deliver essential micronutrients, advocate for their wide-scale adoption and increase awareness of their life-saving qualities.



TINY BUT MIGHTY:
A health worker administers vitamin A drops to a child at a UNICEF-supported health centre in Kiribati, an island nation in the Pacific.



VITAMIN A

Vitamin A boosts immune systems, improving a child's chances of survival by up to 25 percent. It helps maintain healthy sight during early childhood and can reduce maternal deaths. It is estimated that 22 percent (190 million) of preschool-age children around the world are deficient in vitamin A.

>> STEPS FORWARD

In Africa, vitamin A supplementation has increased fivefold since 2000 and now reaches 88 percent of people. UNICEF supports 95 percent of the world's vitamin A supplements, distributing them mainly through Child Health Days in conjunction with immunization and other health services. In 2009, UNICEF supplied more than 570 million vitamin A capsules, reaching children in 74 countries.



IODINE

Iodine is crucial to supporting fetal brain development. Without it, a child is susceptible to severe mental impairment, deafness, speech defects or dwarfism. Iodine deficiency is the primary cause of preventable mental retardation, causing almost 18 million babies a year to be born mentally impaired.

>> STEPS FORWARD

Each year nearly 91 million children are protected with iodine-fortified salt—a food consumed by most people on a regular basis. UNICEF promotes the production and use of iodized salt, leveraging its global purchasing networks to provide equipment and iodine additives, while helping countries develop legal frameworks and industrial standards. UNICEF's partnership with the Government of Laos and salt producers has boosted household consumption of iodized salt in Laos to more than 90 percent.



IRON

Iron helps red blood cells carry oxygen to the muscles and brain, essential for physical activity, brain growth and motor development and especially important for pregnant women. Without enough iron, the body produces less red blood cells, causing anemia. An estimated 2 billion people in the developing world are anemic. Anemia increases complications during childbirth and is implicated in 20 percent of maternal deaths.

>> STEPS FORWARD

UNICEF and its partners are working to ensure pregnant women receive a low-cost iron/folate supplement that can prevent maternal and infant deaths. Because malaria can be a key underlying factor of anemia, UNICEF's provision of insecticide-treated bed nets for children and mothers is also critical for preventing anemia. UNICEF purchased 43 million nets in 2009 alone, reaching 49 countries.

Did You Know?

Measured against a ratio of social benefit to cost, fortifying flour with micronutrients is one of the most effective interventions possible to improve lives throughout the world.



© UNICEF NYHQ2006-2474/Pirozzi



ZINC

Zinc is essential for strong immune system functioning and cell growth. Severe zinc deficiency can delay growth, cause diarrhea, skin lesions, loss of appetite and hair loss. It claims the lives of more than 450,000 children each year.

>> STEPS FORWARD

Having created and shaped a global market for life-saving oral rehydration salts, UNICEF and the World Health Organization are working to shape a market for zinc tablets to make them readily accessible around the world. In 2009, 10 potential manufacturers were added to UNICEF's supplier base, and UNICEF continued wide-scale distribution of 89 million zinc tablets worldwide. UNICEF also supports distribution of micronutrient powder enriched with zinc and other vitamins and minerals.

Fortified food – what is it?

Fortifying foods involves adding vitamins or minerals to staples to increase their nutritional content. Salt iodization is one great example. It has led to tremendous health improvements among large populations, as has fortifying flour with iron and folic acid. In Canada, for example, serious birth defects went down by more than one third following the introduction of mandatory folic acid fortification of flour and cereal products in the late 1990s.

UNICEF works with governments in developing countries to promote industrial and legislation standards around food fortification and to ensure food fortification policies are adopted, so that more children receive the nutrients they need.

FLOUR fortified with folic acid, iron, zinc and B vitamins has been helping to reduce micronutrient deficiencies for more than 60 years.

SUGAR fortification has virtually eliminated vitamin A deficiency in Guatemala where the technology was pioneered. Sugar can also be fortified with iron and zinc.

RICE is fortified with vitamins A, E, B-1, B-12, niacin, folic acid, zinc, iron, and selenium.

OIL is not yet widely fortified, but is an excellent and affordable method of vitamin A fortification.

FISH SAUCE in Viet Nam and soy sauce in China are fortified with iron, leading to significant improvements in iron levels.



Children in Laos test household salt samples as part of a school activity. UNICEF partners with schools to promote increasing use and demand for iodized salt.

© UNICEF/LaoPDR02722/Holmes

FOOD CRISIS IN THE SAHEL

There was no question that 18 month-old Hissène needed help when he arrived at the UNICEF-supported nutrition centre in the dusty town of Moussoro, Chad.

When a nutrition worker measured the circumference of Hissène's upper arm the gauge on the bracelet slipped into the red zone, signifying severe malnutrition—a condition that affects more than 100,000 children in Chad who will need live-saving care this year.

In Moussoro, malnutrition among children has been a serious issue for a decade, but this year is far worse. With below average rainfalls, food stocks have dwindled, cattle are dying and crops are poor. Since January 2010, nutrition centres supported by UNICEF have admitted twice the usual number of malnourished children.

Life is difficult for families like Hissène's. They have been selling their key livelihood—their goats—at giveaway prices to buy maize to feed their five children. It is the only food they can afford and may stop the hunger, but it lacks the nutrients their growing children need.

Your continued support means UNICEF is there, expanding its community-level screening and nutrition centres to reach more children like Hissène and prevent further malnutrition. Since April 2009, mobile teams have been going into villages, training volunteers to refer malnourished children to care. More than

At first Hissène coughs and refuses the mixture. But his mom Eta keeps on trying, putting the peanut butter-like food on her finger for him. Hissène finally swallows and stops frowning. He grabs the brightly coloured bag of food and cries for more, his appetite returning.

9,000 children received life-saving care last year and in 2010, new centres are helping to reach even more children.

After Hissène's initial assessment, a nutrition officer provides him with a bag of ready-to-use therapeutic food. Then they wait. If Hissène eats all or part of it within an hour, he can be treated at the centre once a week. If not, he will require therapeutic treatment at the hospital.

At first Hissène coughs and refuses the mixture. But his mom Eta keeps on trying, putting the peanut butter-like food on her finger for him. Hissène finally swallows and stops frowning. He grabs the brightly coloured bag of food and cries for more, his appetite returning.

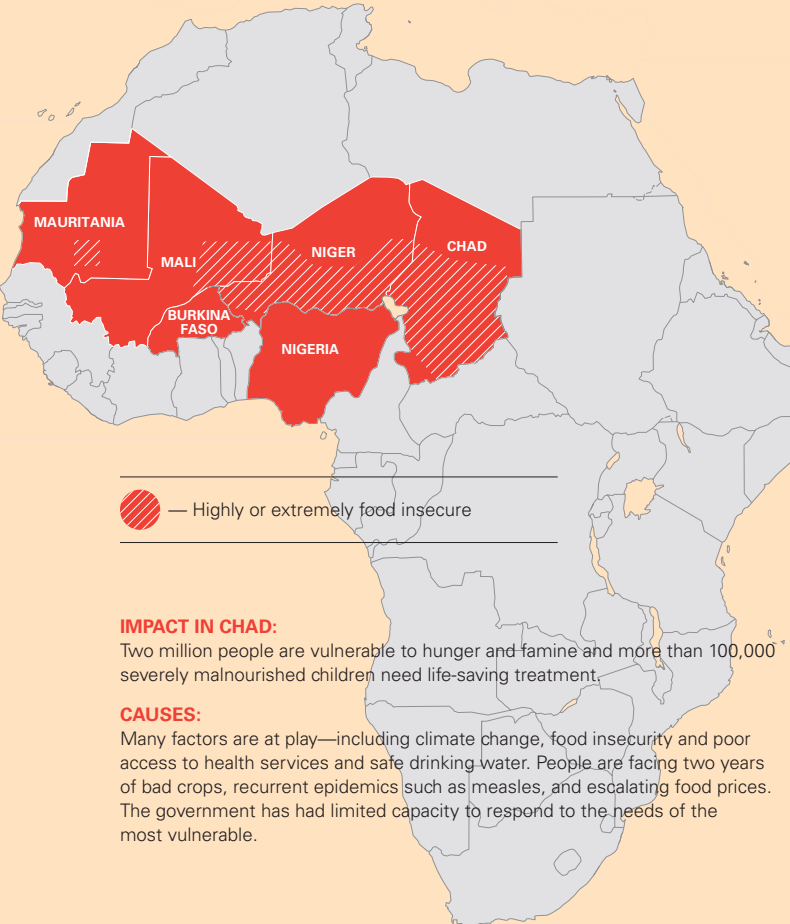
Eta smiles, deeply relieved her son won't need to go to the hospital. Her baby will soon get better, thanks in large part to the donations of donors like you.

A girl carries her baby sibling through a haze of dust to be screened for malnutrition at a mobile health centre in the Kanem region of Chad.



Who is affected by the Sahel Food Crisis?

Countries in the Sahelian region of Africa including Burkina Faso, Chad, Mali, Mauritania, Niger, and northern Nigeria.



UNICEF is one of less than a dozen NGOs and UN agencies working in the Sahelian belt of Chad, helping the government implement a multi-pronged response to the food crisis. With your support:

26 UNICEF-supported nutrition centres have opened since April 2009.

93 health workers have been trained to manage acute malnutrition in remote villages.

159 tons of ready-to-use therapeutic food have helped treat more than 4,000 severely malnourished children in 2009 in Kanem—one of the most badly affected regions.

Plans for 2010: New outreach centres open, community-level screenings multiply, and a nutrition surveillance system is in place providing reliable data for decision-making.

RAINFALL:

The 2009 rainfall registered in Kanem was half that of 2007, leading to a more than 80 percent drop in the cereal harvest.



FOOD SCARCITY AND COSTS:

Food on local markets is becoming more scarce and expensive, while family incomes are decreasing. Livestock—a major source of livelihood—is being exchanged at give-away prices.



POPULATION MOVEMENT:

Many people are selling their cattle to survive, and moving away to towns in search of work and money. Men are the first to go, and women and children now represent 80 percent of the population in Kanem.

Speeding real-time nutrition data at the tip of your fingers



Which food supplements are running low? In remote rural areas and crisis zones, paper has been used to transmit critical nutrition data like this, risking weeks and months of delays, or even loss of records.

In 2009, working to transform this process, UNICEF began expanding RapidSMS technology—utilizing mobile phone technology to compile text message data into real-time correlated reports. UNICEF first piloted the use of RapidSMS in its response to drought in Ethiopia in 2008, reporting gaps and stock-outs of therapeutic food at remote health posts to a central warehouse that responded immediately, strengthening relief coordination for children in need.

This innovative tool designed by UNICEF takes advantage of growing mobile phone activity in Africa, where there are more

mobile phone subscribers than in Canada and the US combined. Even the most basic mobile phones can interact with the web via SMS text message. And because the software code is open-source, anyone can use it to build tools customized to their needs.

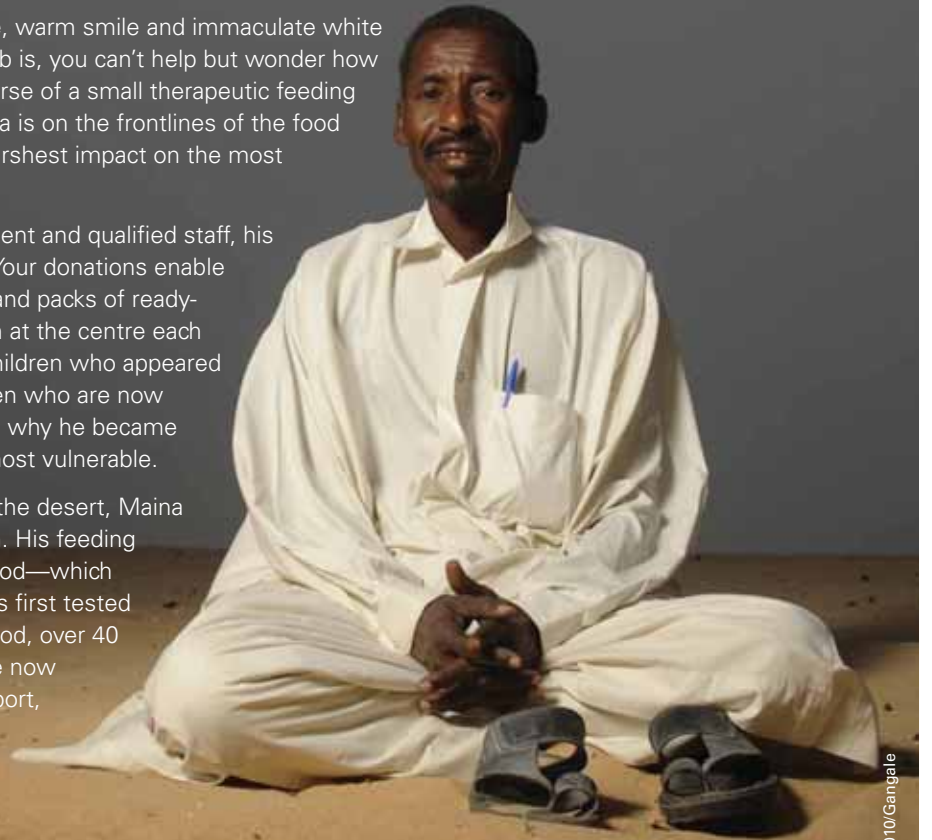
In 2009, UNICEF partnered with the Malawian government and graduate students from Columbia University to transmit data from three growth-monitoring clinics to a central database, providing instant feedback on the nutritional status and treatment needs of children. The system is being expanded to 140 locations across Malawi. UNICEF programs in several other African countries are also using RapidSMS to track diverse data from bed net distribution to prenatal care for pregnant women.

Maina: Local hero in the battle against malnutrition

Everything about Maina—his energetic handshake, warm smile and immaculate white tunic—radiates grace. Knowing how difficult his job is, you can't help but wonder how he maintains such positive energy. As the head nurse of a small therapeutic feeding centre in Mao, in the Kanem region of Chad, Maina is on the frontlines of the food crisis in Chad and bears witness each day to its harshest impact on the most vulnerable children.

Though Maina's feeding centre lacks good equipment and qualified staff, his team is working tirelessly to save children's lives. Your donations enable UNICEF-supplied food, including therapeutic milk and packs of ready-to-use therapeutic food, to reach some 30 children at the centre each month. Maina proudly compares the pictures of children who appeared lifeless when they first arrived, to the same children who are now gaining strength and recovering. This is the reason why he became a nurse: to dedicate himself to the weakest and most vulnerable.

From this modest feeding centre in the middle of the desert, Maina has contributed to prominent research on nutrition. His feeding centre was one where ready-to-use therapeutic food—which ushered in a revolution in nutrition treatment—was first tested in the 1990s. With UNICEF-supplied therapeutic food, over 40 nutrition centres and three therapeutic centres are now saving lives each day in Kanem. Through your support, UNICEF works worldwide with exceptional local partners like Maina to help shape a world where children receive the care they need to thrive.



From his feeding centre in the middle of the desert, Maina helps nourish the weakest and most vulnerable children affected by the food crisis.

© UNICEF Chad/2010/Gangate

Horn of Africa update

Your donations hard at work



Last fall, UNICEF issued an urgent appeal to assist children and families affected by a food crisis in the Horn of Africa region. Your donations have been hard at work:

In Somalia, despite the targeting of aid workers and the looting of humanitarian supplies, UNICEF has worked with over 100 national and international partners supporting 90 percent of the humanitarian response. Some 33,000 children were reached with life-saving nutritional treatment in the first half of 2010. As the lead provider of drugs and medical equipment nationwide, UNICEF has helped deliver essential services to some 3 million people so far this year.

In Ethiopia, UNICEF has been supporting the Ministry of Health to ensure therapeutic feeding programs in almost 80 percent of drought-affected districts. More than 75,000 children received treatment for severe acute malnutrition from January to April 2010 and more than 1,000 metric tons of ready-to-use therapeutic food were distributed. UNICEF helped train 30,000 health extension workers on the management and treatment of severe acute malnutrition and is helping regional governments better prepare and respond to future emergencies.

Q & A



In the field with Canadian UNICEF staffer, Claudia Hudspeth

As the Chief of Child Survival and Development with UNICEF Uganda, Claudia provides strategic direction and management to UNICEF's health and nutrition program in Uganda, including day-to-day management of a team of 20.



Claudia Hudspeth with children in Uganda.

© UNICEF Uganda

"I work for UNICEF because the work we do to bolster national systems touches the lives of millions."

How has Uganda been affected by the Horn of Africa food crisis? How has UNICEF responded?

Locally we've seen rises in the inflation rate and sharp increases in food prices. Staple foods such as maize and cassava have more than doubled in price in a three-month period. Most people in Uganda are not able to absorb any price rises, let alone sudden jumps. As a result they switch to less nutritious and cheaper foods or reduce their food intake.

UNICEF has supported the establishment of an innovative SMS-based early warning system to track and map key nutrition data and identify pockets where urgent action is required. We're working to prevent and reverse malnutrition among the most vulnerable women and children in those areas. Last year more than 10,000 severely malnourished children were treated through UNICEF programs.

Does your work bring you face-to-face with children who are impacted by UNICEF's nutrition programs?

Yes, often. In one therapeutic feeding centre I met this little girl who appeared a bit brighter than most of the other malnourished children at the centre, though she could barely walk. She and her three siblings had each suffered from severe malnutrition because their mother was unable to produce breast milk, and being poor, she didn't have an alternative. The shock came when I learned the child was 18-months-old. She looked no more than eight-months-old and was tiny in comparison to my hands. It really made me appreciate the gravity and challenges ahead.

What motivates you to work with UNICEF?

190,000 children under five die every year in Uganda—98 percent of these deaths are preventable and treatable. This is a country where simple, high-impact interventions could save tens of thousands of lives every year.

I work for UNICEF because the work we do to bolster national systems touches the lives of millions. We don't work on small-scale projects. And because of UNICEF's strong reputation with governments, I can discuss health sector issues with decision-makers in the Ministry of Health, and they listen.

How do climate change and other environmental issues impact nutrition for children?

Global warming, extreme weather variations, floods, droughts and unseasonal rain patterns can affect food availability, alter the conditions needed for food safety (including availability of clean water) and change the geographic range and incidence of infectious diseases. All of this again increases the risk of undernutrition that, in turn, makes populations more vulnerable to infectious diseases, a vicious cycle.

Effects of climate change can be seen in the Karamoja region in northeastern Uganda, where drought and unseasonal rain patterns last year resulted in reduced crop yields and caused severe household food insecurity, leading to rising acute malnutrition. The eastern part of Uganda was also affected by floods that left many homeless, plantations washed away and livestock destroyed, increasing children and families' vulnerability to both malnutrition and other diseases.

UNICEF works to mitigate the impact of these shocks. During an emergency—such as the landslides we saw in early 2010—UNICEF steps in to provide life-saving services. We run large-scale nutrition programs to treat and prevent malnutrition, and use data to improve early warning systems for timely and effective response.

Claudia Hudspeth is part of UNICEF Canada's Field Partner Program—a unique and exclusive opportunity for UNICEF Canada supporters to be partnered with Canadian UNICEF workers in the field. You can correspond with Claudia or another Field Partner to gain a deeper understanding of UNICEF's work on the ground, and how your support is helping to shape a positive transformation for children. To learn more, please visit unicef.ca/fieldpartner.

Challenging traditions to save lives

Monika cradles baby Mohina, who has been exclusively breastfed and healthy since Monika learned about nutrition and hygiene practices from community health workers.



When her baby was born in the spring of 2010 in the Nahortoli Tea Estate community in the northern Indian state of Assam, Monika Bedi drew on much of her own mother's wisdom to care for her daughter Mohima. But unbeknownst to her, some of that knowledge was actually harmful—like the tradition of discarding breast milk produced in the 24 hours after delivery.

Most people in Monika's community have viewed this nutrient-rich milk as dirty, not understanding the overall importance of breast milk to the health and survival of newborns. Exclusive breastfeeding for the first six months builds immunity, protects against undernutrition and gives babies the best start in life. It can also reduce deaths of children under five by 19 percent; a life-saving message in Assam, where many babies in tea estate communities succumb to preventable deaths.

With your support UNICEF is working with local partners in this community to help change harmful traditions. Community health workers like Durowpadi Bedia are the key. Raised on the Nahortoli Tea Estate and speaking the local dialect of Sadri, she conducts monthly meetings in new and expectant mothers' homes to teach them the importance of exclusive breastfeeding.

Durowpadi notes that even though the local doctor was advising mothers to breastfeed, they were still giving goat's milk to newborns and putting goat dung on the umbilical cord as medicine.

Health and nutrition workers like Durowpadi meet monthly in each village, draw up a list of nursing women or those in their last trimester of pregnancy and establish a schedule for regular home visits. Visiting mothers at home also means that Durowpadi can emphasize proper hygiene and the importance of handwashing with soap.

"When they come and talk in our own language, I understand better," says Monika. "I feel comfortable with them."

More mothers like Monika are now exclusively breastfeeding their newborns. Baby Mohima has been growing healthily, with no bouts of diarrhea to date. "I say mother's milk is the best," says Monika. "If you feed mother's milk, the baby is very healthy."

Did You Know?

Even though there is a chance that a mother living with HIV will transmit the virus to her baby during breastfeeding, *not* breastfeeding can carry even greater risks. It is believed that mixed feeding—breastfeeding combined with formula feeding—in the first six months can damage an infant's already delicate and permeable gut wall, accelerating transmission of the HIV virus. Because formula can become contaminated, this also poses risks of diarrhea—the second greatest cause of child deaths worldwide. Through your support, UNICEF works to inform and counsel mothers living with HIV on suitable infant feeding options.



Jameslay Petit is kissed by her mother at the Hôpital Universitaire de l'État d'Haïti in Port-au-Prince, where she has been receiving life-saving treatment for malnutrition.

HAITI: NUTRITION CRISIS AVERTED

In some parts of Haiti, children are better nourished now than before the earthquake; how your support helped avert a second crisis



© UNICEF/NYHQ/2010-1269/Ramomeida



Jameslay Petit is still too young to understand the damage caused by the devastating earthquake that hit Haiti earlier this year. Born after the quake, she was spared its impact, but is now living in the thick of its aftermath. Jameslay was just a few weeks

short of meeting her father, who died in the quake. Her family's home was completely destroyed, and her mother and three siblings are now living in a makeshift settlement. Jameslay is malnourished and receiving life-saving therapeutic treatment in a UNICEF-supported hospital facility in Port-au-Prince. As the hospital was damaged in the quake, Jameslay is treated in a nearby tent.

The earthquake compounded an already unimaginable situation where one in three children under five was chronically malnourished. But remarkably, there has been no spike in malnutrition levels since the earthquake, and in some affected areas, nutrition levels are actually higher today than they were before the earthquake.

Remarkably, there has been no spike in malnutrition levels since the earthquake—a powerful testament to the impact of relief operations.

This is a powerful testament to the impact of relief operations by UNICEF and its partners in Haiti—all of it made possible by donors like you.

Since day one, UNICEF has been reaching vulnerable families like Jameslay's with urgent nutritional support and has been leading the coordination of nutrition efforts among all international humanitarian partners in Haiti. As our support evolves from meeting immediate needs, we continue working with the Haitian government, NGOs and community members to further their goals for recovery and transformation.

A multi-layered nutrition response

LARGE-SCALE FEEDING PROGRAMS

To avert dropping nutrition levels among children immediately following the quake, UNICEF worked with partners like the World Food Programme (WFP) to run large-scale feeding programs. This included fortified blended foods like cornmeal with soy flour, and ready-to-use therapeutic foods like Plumpy'Nut. More than 550,000 children and women have benefited from ready-to-use therapeutic foods and UNICEF is now working with Haitian partners to scale up locally produced nutrition products. UNICEF and WFP are also proposing a national midday meal schools program to ensure schoolchildren will receive at minimum a daily nourishing meal.

MALNUTRITION TREATMENT AT THERAPEUTIC FEEDING CENTRES

To date, UNICEF has supported 126 therapeutic feeding programs and 28 stabilization centres for the most severely malnourished children in Haiti, providing life-saving care to more than 2,000 children.

BABY-FRIENDLY TENTS

UNICEF and NGO partners have been assisting mothers and babies at baby-friendly tents—spaces where mothers receive nutritional information and advice on proper feeding practices for their children. The spaces also provide milk supplies and a safe space for breastfeeding. Some 40,000 mother-baby pairs have been supported to date.

TRAINING HEALTH AND COMMUNITY WORKERS

This is one of the most crucial elements of UNICEF's nutritional interventions, as it will help lay the groundwork to build the local capacity needed in Haiti to prevent and treat malnutrition in the future. Training on infant feeding and community management of acute malnutrition is being planned for 200 health professionals and 300 community workers.

MICRONUTRIENT SUPPLEMENTATION

Essential vitamins and minerals will be distributed to children to alleviate the micronutrient deficiencies that were prevalent before the earthquake, such as anemia, which affected more than 60 percent of children. Vitamin A and other micronutrient supplementation is scheduled to reach more than 500,000 children and pregnant women.

UNICEF and WFP are proposing a national midday meal schools program to ensure schoolchildren will receive at minimum a daily nourishing meal. UNICEF is also working with Haitian partners to expand locally produced nutrition products.



As part of UNICEF's nutrition response, baby-friendly tents provide milk, nutrition information and a safe place for mothers to breastfeed.

SEEING YOUR CHILDREN THRIVE

Transforming lives in Guatemala through *Sprinkles* and a little help from Canadian supporters.

The youngest daughter in the Torres family enjoys a nourishing meal fortified with *Sprinkles*.

© UNICEF Guatemala/2010



A few months ago, Micaela Ixchop de Torres and her husband Juan watched helplessly as chronic malnutrition ravaged their seven children. Today, they are celebrating a seemingly impossible transformation thanks to the support of donors like you.

Providing care and nourishment for their children has never been easy for Micaela and Juan. Each of their seven children had shown the danger signs of being chronically malnourished: lower-than-average height, prone to diseases, difficulty learning and paying attention, poor school performance, and overall lack of activity. A few months ago, their youngest son suffered such acute malnutrition, he needed urgent medical care and therapeutic treatment to save his life.

The Torres family is not alone. Close to half of all children in Guatemala are chronically malnourished. Malnutrition levels in their home province of Totonicapán—a mainly rural and indigenous region of the country—affects three-quarters of children.

Through the support of Canadian donors, UNICEF has been working to reach these families with preventive healthcare and timely therapeutic treatment for acute malnutrition. The Torres children are now benefiting from vital micronutrient supplements known as *Sprinkles*, which fortify their food. Juan says that since his children received *Sprinkles*, they don't get sick as often and they are more active and alert. Micaela loves how easy it is to prepare food with these supplements, and that they are so easily accepted by her children.

UNICEF Canada donors have been supporting this critical nutrition project in Totonicapán since 2009. In addition to providing micronutrient supplements and therapeutic foods, UNICEF has been helping to strengthen national and regional management of both acute and chronic malnutrition. This has involved training local health personnel as well as nutritional educators, who establish bonds of trust with families and ensure healthy eating habits can be understood and adopted.

Sprinkles are micronutrient-filled sachets used to fortify food with essential vitamins and minerals. The powder is mixed with any homemade food without changing its taste or colour. One *Sprinkles* sachet each day provides a child with daily requirements of iron and other micronutrients. As in Guatemala, UNICEF typically supports the delivery of *Sprinkles* through a country's health system, at no cost to families.

Did You Know?

Guatemala has the fourth highest rate of malnutrition in the world.

Q & A

with Dr. Stanley Zlotkin—inventor of life-saving *Sprinkles* powder

Dr. Stanley Zlotkin from the Hospital for Sick Children in Toronto is the researcher behind the multiple micronutrient powder *Sprinkles*. He also founded the *Sprinkles* Global Health Initiative to ensure *Sprinkles* reaches as many children worldwide as possible.

What makes *Sprinkles* such an innovative solution to childhood micronutrient deficiencies?

Fortified baby foods are a well-accepted concept in Canada where many parents don't make baby food from scratch. However, most parents in the developing world make their own baby food from what is locally available, which is often lacking sufficient nutrients. *Sprinkles* allow parents to fortify any type of food at home. They come in picture-based sachets that can be understood even by illiterate parents.

What motivated you to pursue the development of *Sprinkles*?

In the late 1990s UNICEF was deciding whether to supply iron and other micronutrients to children through nutrition programs. They asked me to help.



What has been the benefit of collaborating with UNICEF?

As a researcher, I have limited capacity to reach and talk to governments or to initiate scale-up of initiatives on a mass scale. UNICEF does, and has been involved from the very beginning. This collaboration has been absolutely essential to applying the benefits of the research and is a great example of how partnerships between the academic environment and UNICEF lead to important innovations for children.

Is it possible to quantify how many young lives have been strengthened as a result of these initiatives?

Based on the amount that is produced and the number of countries, we are reaching about 4.5 million children a year—an estimate only. I am currently working with UNICEF to get a sound statistical understanding of the number of children reached annually.

Have *Sprinkles* ever been used in Canada?

Here in Canada, most children have access to fortified foods so problems with micronutrient deficiencies are not seen on a large scale. However, vulnerable pockets, including some



“No matter where you go, whether you’re talking to parents in a hut in Mongolia or a tent in Afghanistan, parents all want the same things for their children: they want them to be healthy, educated, to get a good job and have a family. It’s wonderful that UNICEF can help parents meet these expectations.”

Aboriginal and First Nations children, could benefit from micronutrient supplements. I’m still hoping a private sector company will take on the production and distribution for the Canadian market.

In your research trips around the world you’ve met with parents whose lives have been impacted by *Sprinkles*. What do they say?

It’s well known that iron-deficient children don’t explore their environments well—they may cling to their mothers, appear shy, reticent and passive. An amazing thing we see time and time again is a dramatic behaviour change that occurs in kids within two to three weeks of starting *Sprinkles*. Parents often comment that their children become ‘naughty’—but not in a pejorative sense. Their kids are finally starting to behave like kids—running around, energetic, acting silly. Parents say this to me with a twinkle in their eye.

Families wade through knee-deep floodwater in Pakistan, where recent flooding has affected more people than the 2004 tsunami and the 2010 Haiti earthquake combined.

SURVIVING A SLOW-MOTION TSUNAMI

Your donations provide a lifeline to flood-stricken families in Pakistan

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Described as a 'slow-motion tsunami', the titanic deluge that began this past summer in Pakistan is the worst flooding in the country's history, affecting more than 20 million people—half of whom are children. That's more than the 2004 Indian Ocean tsunami and the recent earthquake in Haiti combined.

Though waters have begun to recede, the torrents have left in their wake an unimaginable situation. Massive destruction to food crops spanning more than 4 million acres of land has left millions of impoverished families vulnerable to malnutrition. Thousands of schools, clinics, roads, bridges and wells are in need of repair and replacement.

With your support, UNICEF is working with partners to provide the largest humanitarian assistance effort on the ground. We've reached some 250,000 women and children with life-saving nutrition supplies, including micronutrients, high-energy biscuits and other therapeutic foods to prevent malnutrition.

Malnutrition can wreak havoc on an ill child with a weakened immune system. Similarly, illness also exacerbates malnutrition. This dynamic becomes ever more apparent in crisis situations like Pakistan, where millions of children are now vulnerable to waterborne diseases. Synergies between UNICEF-supported efforts including the provision of therapeutic foods, safe water

With your support, UNICEF is reaching more than 2.5 million people with clean water each day and expanding life-saving health and nutrition services in flood-affected areas.

and medicines are helping to provide the holistic care needed to keep children healthy.

For baby Tauseef, who lost significant weight after a horrible bout of diarrhea, this has meant not only a need for food to regain lost nutrients, but also urgent treatment for diarrhea and access to clean water and safe sanitation. At a UNICEF-supported health centre, health workers advised oral rehydration salts to treat Tauseef. His mother Amina also received advice on how to ensure good hygiene and take special care of her son to prevent future waterborne diseases.

UNICEF and its partners are reaching more than 2.5 million people like Tauseef and Amina with clean water each day, and expanding life-saving health and nutrition services in flood-affected areas. Mobile health teams are providing checkups, medicines and vaccines, while spreading vital messages to help prevent disease and save lives.

UNICEF Canada is so grateful for the support donors have shown to date. For more information on the crisis and how you can help reach children and families affected by the flood crisis, please visit unicef.ca/pakistanfloods.

Teck kick-starts life-saving zinc initiative

What do Canada's largest diversified mining company and the world's leading children's organization have in common? The answer is zinc—that vital micronutrient all growing bodies need—and the determination to eliminate zinc deficiency in children around the globe. An ambitious vision, but one within reach.

That's why Teck, one of the world's largest miners of zinc, is supporting UNICEF's life-saving zinc supplementation to undernourished children.

Teck is a committed member of the International Zinc Association (IZA), a key UNICEF partner driving the Zinc Saves Kids global fundraising initiative. Zinc Saves Kids is dedicated to raising \$5 million to support critical micronutrient programs for children in Nepal and Peru. All IZA members have been encouraged to donate, and Teck Resources was first to the plate, kick-starting the initiative with a donation of more than \$1.67 million.

Zinc deficiency is a little-known but serious health threat for children in developing countries. According to the World Health

Organization, zinc deficiency is responsible for some 800,000 lives lost each year, more than half of whom are children.

Don Lindsay, President and CEO of Teck and Chair of the IZA is dedicated to supporting UNICEF's work and contributing to the solution. "Children are our greatest resource, and our industry is committed to working with UNICEF to raise the awareness of zinc deficiency in children worldwide and to raise funds to help solve the problem," said Mr. Lindsay.

Beyond the Zinc Saves Kids initiative, Teck has also shown its commitment to children by supporting earthquake survivors in Haiti in January 2010. Rallying staff to raise funds for children, Teck matched employee donations, contributing \$80,000 in total to UNICEF's emergency response in Haiti.

Thank you Teck for the generous commitment you have shown to helping more children grow up properly nourished, and protected in times of disaster.

IN CANADA

Stopping the onslaught of junk food ads aimed at kids

Did you know one in five Canadian children has an unhealthy weight?

A number of factors are at play, one of them the unchecked promotion of junk food advertising aimed at children daily. Statistically, less than one percent of food ads targeted at children promote nutritious veggies, fruits or juices.

Only children in Quebec are legally protected against commercial marketing targeting them. Sweden and Norway now have similar laws and, two years ago, the United Kingdom instituted a ban on many TV ads promoting unhealthy food and drink to children.

UNICEF Canada has been working to champion the health and well-being of Canadian children and protect them from targeted commercial marketing. Joining a lobbying effort led by the Canadian Centre for Science in the Public Interest, UNICEF Canada and partners are urging the federal government to establish a national law that will help stem the flow of

marketing tactics that exploit Canadian children through the Internet, TV and other media.

Through donor support, we continue working to protect Canadian children from unhealthy food ads, furthering discussions with Canada's Minister of Health to ensure national leadership around this important issue.



YOU KNOW HOW GOOD IT FEELS TO GIVE?

Now take that feeling and multiply it.

UNICEF Gifts of Magic® can change the world. Whether you choose to make a generous donation yourself, or bring friends together to purchase large-scale items, Group Giving is an inspiring way to expand the joy of giving. Group Giving brings together friends, family or colleagues to fundraise through social networks or social media. Together, you'll provide a truly inspired gift to change the world for children.



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