

# Double burden of malnutrition and its determinants among adolescent boys and girls (10-19 years):

Evidence from a nationwide longitudinal survey in Bangladesh

## Fahmida Akter

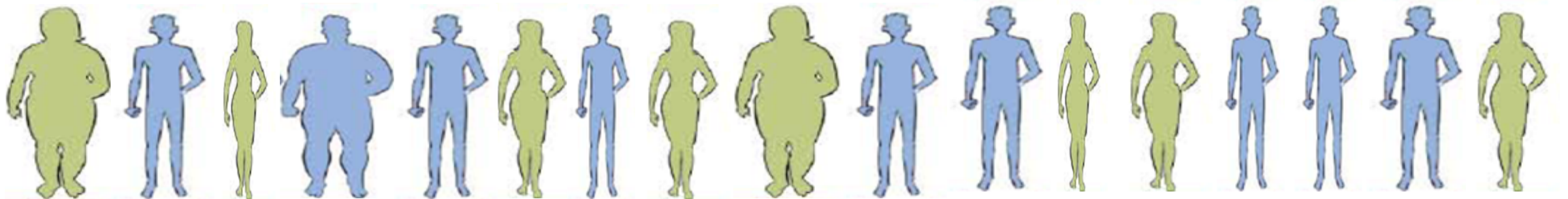
Centre for Non-communicable Diseases and Nutrition (CNCDN)  
BRAC James P Grant School of Public Health (BRAC JPGSPH), BRAC University

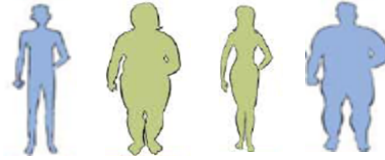
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# Rationale/objectives

- Like other South Asian countries, Bangladesh is experiencing the **double burden of malnutrition (DBM)** across all age groups, including **adolescents**
- However, there is a **lack of nationally representative data** on nutritional status, particularly among boys
- We aimed to **assess the level of DBM and its determinants** among adolescent **boys and girls**





# Methods

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**Study design and area:** The second wave of a longitudinal study conducted in 90 (rural:64, non-slum urban:16, and slum:10) sentinel sites in Bangladesh

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**Sampling procedure:** Multistage cluster sampling (separately for rural, non-slum urban, and slum areas)

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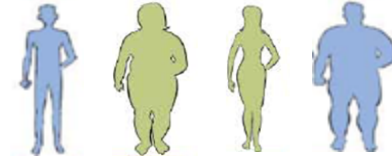
**Sample size:** 11,240 adolescents (5,600 boys and 5,640 girls)

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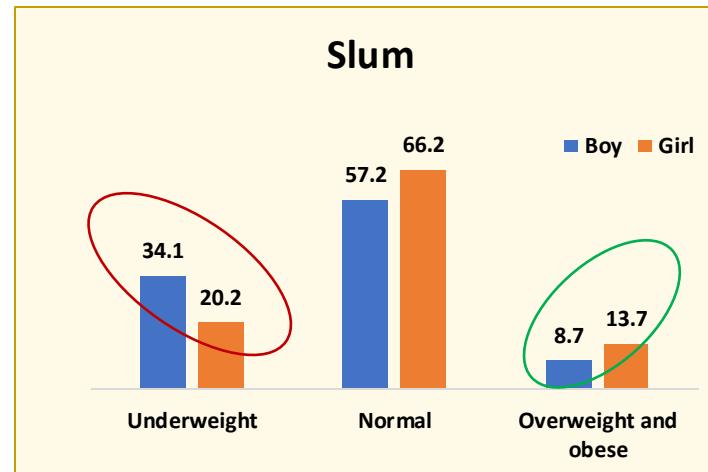
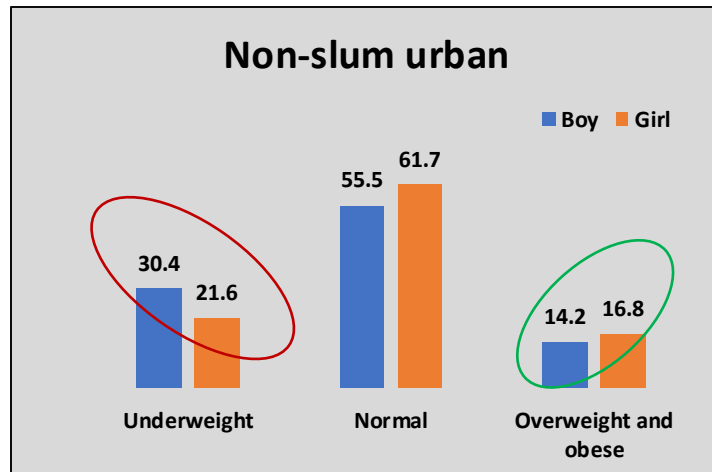
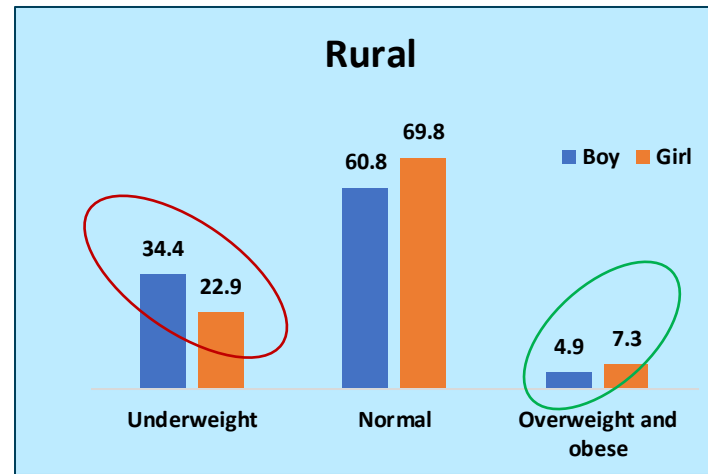
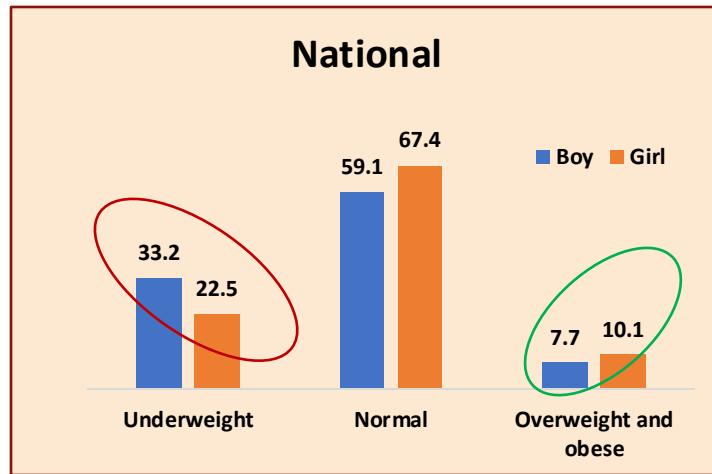
**Outcome variable:** DBM (underweight, normal, and overweight/obese) was assessed using body mass index (BMI) for age z-score (BAZ)

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**Data analysis:** Weighted prevalence of DBM and multinomial logistic regression, separately for adolescent boys and girls

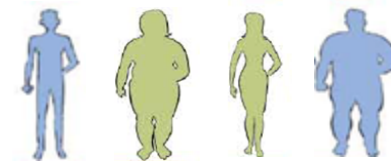


# Results: The prevalence of DBM



- Boys are more undernourished than girls (33.2% vs. 22.5%)
- Overweight/obesity are more prevalent among girls than boys
- These patterns are consistent across rural, non-slum urban, and slum areas
- Overweight/obesity prevalence is the highest in non-slum urban areas

# Results: Associated factors of DBM

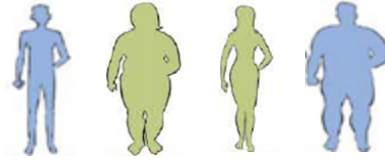


## Multinomial logistic regression of DBM, separately for boys and girls

Indicators		Boy Underweight	Boy Overweight /obesity	Girl Underweight	Girl Overweight /obesity
Individual	<b>Age in years (ref: 10-14y)</b>				
	15-19y	<b>0.76</b>	<b>0.62</b>	<b>0.84</b>	0.86
	<b>Adolescent occupation (ref: student)</b>				
	Others	0.98	0.84	0.83	1.24
	<b>Marital status (ref: married)</b>				
	Others	--	--	<b>1.66</b>	0.75
Parental	<b>Maternal education (ref: grade 0-4)</b>				
	Grade 5-9	0.97	1.21	0.98	1.18
	Grade 10 and above	0.91	<b>1.48</b>	<b>0.71</b>	1.40
	<b>Paternal education (ref: grade 0-4)</b>				
	Grade 5-9	<b>0.83</b>	1.21	0.91	1.23
	Grade 10 and above	<b>0.78</b>	<b>1.69</b>	1.00	<b>1.91</b>
Household	<b>Religion (ref: Islam)</b>				
	Other than Islam	1.07	1.09	1.20	1.05
	<b>Household size (ref: 1-3 members)</b>				
	4-5 members	<b>1.23</b>	0.92	1.06	1.00
	≥6 members	<b>1.45</b>	0.83	1.08	0.97
	<b>HH food security (ref: food secure)</b>				
	Mild food insecure	<b>1.19</b>	0.82	<b>1.24</b>	<b>0.72</b>
	Moderate to severe food insecure	<b>1.18</b>	0.79	<b>1.45</b>	<b>0.70</b>
	<b>Area of residence (ref: rural)</b>				
	Non-slum urban	<b>0.79</b>	<b>3.22</b>	1.00	<b>2.65</b>
Slum	0.95	<b>2.06</b>	1.04	<b>1.99</b>	
<b>Wealth index (ref: richest)</b>					
Poorest	0.80	1.00	1.06	1.02	
Poorer	0.90	1.16	1.04	1.15	
Middle	0.90	0.94	1.00	1.01	
Richer	0.89	0.97	<b>0.80</b>	1.07	

Indicators		Boy Underweight	Boy Overweight /obesity	Girl Underweight	Girl Overweight /obesity
Behavioral	<b>Any animal source food (ref: no)</b>				
	Yes	0.98	1.07	0.87	1.12
	<b>Dietary diversity (ref: ≥5 food groups)</b>				
	<5 food groups	0.94	0.86	0.87	0.98
	<b>Fruits &amp; vegetables consumption (ref: ≥5 servings)</b>				
	<5 servings	1.31	<b>0.54</b>	0.86	<b>0.46</b>
	<b>Depression (ref: no depression)</b>				
	Depression	<b>1.22</b>	<b>0.73</b>	0.98	<b>0.75</b>
	<b>Television time (ref: 0 min)</b>				
	≤60 min	0.94	0.86	0.88	1.03
	>60 to ≤120 min	0.97	0.98	<b>0.76</b>	0.95
	>120 min	0.95	0.78	<b>0.78</b>	1.16
	<b>Sedentary time (ref: ≤6h)</b>				
	>6h	0.99	<b>1.28</b>	0.90	<b>1.31</b>
<b>Sugar-sweetened beverage consumption (ref: no)</b>					
1-3 times	<b>0.82</b>	0.90	0.91	0.93	
4-6 times	<b>0.76</b>	1.35	0.86	1.20	
7 or more times	0.96	1.00	0.92	1.04	

**Bold indicates the Relative Risk Ratio (RRR) at 95% CI is statistically significant (p<0.05), Blue color indicates decreased the RRR & Red color indicates increased the RRR.**



# Results: Summary of associated factors

	Boys	Girls
Underweight	<ul style="list-style-type: none"> <li>• <b>HH food insecurity</b></li> <li>• <b>Larger HH size</b></li> <li>• <b>Depression</b></li> <li>• <b>Older boys (15-19y)</b></li> <li>• <b>Paternal higher education</b></li> <li>• <b>Residence in non-slum urban area</b></li> <li>• <b>Sugar sweetened beverage intake</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>HH food insecurity</b></li> <li>• <b>Marital status: no</b></li> <li>• <b>Older girls (15-19y)</b></li> <li>• <b>Maternal higher education</b></li> <li>• <b>Higher HH wealth (richer)</b></li> <li>• <b>Higher television time</b></li> </ul>
Overweight/obesity	<ul style="list-style-type: none"> <li>• <b>Paternal higher education</b></li> <li>• <b>Maternal higher education</b></li> <li>• <b>Residence in non-slum urban area</b></li> <li>• <b>Residence in slum area</b></li> <li>• <b>More sedentary time</b></li> <li>• <b>Consumption of &lt;5 servings of fruits &amp; vegetables</b></li> <li>• <b>Depression</b></li> <li>• <b>Older boys (15-19y)</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Paternal higher education</b></li> <li>• <b>Residence in non-slum urban area</b></li> <li>• <b>Residence in slum area</b></li> <li>• <b>More sedentary time</b></li> <li>• <b>Consumption of &lt;5 servings of fruits and vegetables</b></li> <li>• <b>Depression</b></li> </ul>

# Implications: Way forward

Boys are more malnourished than girls

Overweight/obesity is higher among girls

Age

Marital status

Paternal education

Maternal education

Larger HH size

Residence in non-slum urban & slum areas

HH food insecurity

HH wealth

Consumption of <5 servings of F&V

Sugar sweetened beverage intake

Higher screen time

More sedentary time

Depression

- Need to target adolescent boys in nutrition initiatives across rural, non-slum urban and slum areas
- Overweight/obesity prevention and control intervention should be prioritized nationwide

- These variables can be taken into consideration for targeting adolescent boys and girls

- Non-slum urban and slum areas should be prioritized to prevent overweight and obesity

- Need nutrition sensitive social safety net and income generating interventions to improve economic resilience at the HH level

- Strengthening and continuation of norm-responsive SBCC interventions for better dietary practices
- Ensure enabling environment for translating desired behavior into practice
- Integrated mental health services in primary health care

**Thank you 😊**