



ARTICLE:

COLLECTIVE ACTION ON NUTRITION: MORE IMPORTANT THAN EVER IN LIGHT OF COVID-19

2020 was set to be a pivotal year for the international community to accelerate progress on ending childhood malnutrition, culminating in the Nutrition for Growth (N4G) Summit in December, hosted by the government of Japan.

Then came COVID-19, posing an immediate threat to child survival in the highest burden countries, where one in every two or three children are already malnourished. It is entirely possible that COVID-19 combined with malnutrition could kill millions of children in these countries, along with destroying decades of steady progress against malnutrition in other nations. The U.N. World Food Program and partners

estimate that the number of people globally who face extreme hunger could double from 135 million to 265 million people by the end of 2020.

Good nutrition is crucial for child survival, protecting children against illness and infection and supporting their recovery. COVID-19 has therefore crystalized the urgency of focusing attention on nutrition as essential to defeating this pandemic and improving resiliency. Given this urgency, we call on all nutrition stakeholders and decision makers to intensify the focus on N4G. While recognizing that it may need to be slightly delayed due to the pandemic, stakeholders

BOX 1

THE WORLD HEALTH ASSEMBLY TARGETS ON MATERNAL AND CHILD NUTRITION AND SUSTAINABLE DEVELOPMENT GOAL 2.2.

In 2012, the 65th WHA endorsed a comprehensive plan for maternal and child nutrition that established [six global nutrition targets](#). As a group, the targets aim to reduce malnutrition in all its forms by 2025 (see right).

In 2015, 193 countries adopted a package of 17 interrelated goals known as the Sustainable Development Goals. Goal 2.2., ending all forms of malnutrition by 2030, incorporates the 2025 timeframe to achieve the WHA targets on reducing stunting and wasting among children under 5.

In 2016, the U.N. General Assembly launched the U.N. Decade of Action on Nutrition to encourage countries to step up implementation of policies and programs to achieve SDG 2.2.

In 2017, the [Investment Framework for Nutrition](#) estimated that additional investment averaging \$7 billion a year for 10 years will be needed to finance a full package of nutrition interventions to achieve the WHA targets for stunting, wasting, anemia, and breastfeeding—and avert 3.7 million child deaths.

With only five years remaining to achieve the 2025 WHA nutrition targets, it is more urgent than ever

to increase commitment, investments, and both new and immediate actions designed to save and improve the lives of millions of young children.

- 1 achieve a 40% reduction in the number of children under-5 who are stunted;
- 2 achieve a 50% reduction of anaemia in women of reproductive age;
- 3 achieve a 30% reduction in low birth weight;
- 4 ensure that there is no increase in childhood overweight;
- 5 increase the rate of exclusive breastfeeding in the first 6 months up to at least 50%;
- 6 reduce and maintain childhood wasting to less than 5%.

should take collective action on maternal and child nutrition to ensure that nutrition is recognized, more than ever, as critical in protecting human health.

In light of the harsh realities facing the world's most vulnerable children, a global call to action on nutrition, with bold financial and policy commitments to fight COVID-19, is absolutely needed to preserve gains made over the last several years and to put the world on track to achieve the goals it has set. These include meeting the World Health Assembly (WHA) maternal and child nutrition targets by 2025 and meeting Sustainable Development Goal 2.2, ending hunger and all forms of malnutrition, by 2030 ([see Box 1](#)).

Battling COVID-19

The COVID-19 global pandemic is unquestionably exposing stark health and economic inequities between and within nations. Vulnerable people with compromised immune systems and limited access to health care are dying at rates both shocking and disproportionate. As the international development community prepares responses to the global pandemic, a clear and urgent priority is protecting the most vulnerable people in countries with fragile health systems, high levels of infectious diseases and malnutrition, and/or humanitarian crises.

The critical role of nutrition in child survival, health, and development has never been clearer. Over the next year, health systems will become increasingly overwhelmed by the anticipated waves of COVID-19 infections. It is essential to ensure that millions of mothers and children in poor contexts have the best possible immunity and resilience by protecting their access to good nutrition. One reason that 45 percent of all deaths of children younger than 5 is attributable to malnutrition is that they are nine times as likely to die from illnesses as well-nourished children. The pandemic therefore poses an immediate risk to malnourished children, who will be increasingly unable to get the medical treatment they need because of both restrictions on movement and overcrowded hospitals and clinics.

The stark reality is that progress toward the 2025 World Health Assembly targets on maternal and child nutrition may not only slow, but reverse. From past health and economic crises, we know that rising food insecurity leads to increases in maternal and child undernutrition over the longer term. The secondary impacts of the pandemic, such as worsening indicators of dietary quality, care services for mothers, and WASH (water, sanitation, and hygiene), are all aggravating factors.

The U.S. government must step up and lead, as it has done during so many earlier crises, by taking the following actions:

- 1. Scale up programs for both prevention and treatment of acute malnutrition** in USAID's emergency food assistance programs. Ensure an adequate supply of specialized nutritious foods through reliable supply chains and, as needed, local procurement.
- 2. Strengthen and rapidly integrate nutrition services into new or existing USAID global health programs** that target mothers and children. Specifically, scale up the "Power 4" set of nutrition interventions: prevention and treatment programs for children affected by wasting, multiple micronutrient supplementation for mothers, adequate breast feeding/complementary feeding for infants, and Vitamin A supplementation for children.
- 3. Maximize the flexibility of ongoing USAID-funded health and nutrition programs** to enable them to rapidly adapt to local COVID-related restrictions. This may include shifting nutrition programs outside health clinics, by providing additional resources for missions to build the capacities they need.
- 4. Increase investments in technical assistance in-country.** The ability to carry out rapid nutrition assessments to understand evolving needs and identify effective ways to fill critical gaps, in both the near and medium term, is an essential tool. Another key investment will be to strengthen national safety net programs so that they are able to target mothers and children at risk and meet their nutrition needs. This will be increasingly important as the secondary effects of the COVID-19 pandemic increase over the coming months.

U.S. global leadership on nutrition beyond COVID

If N4G does not take place, the U.S. government, as part of collective action on maternal and child nutrition, could exercise visionary leadership to galvanize the global community to achieve sustainable progress against malnutrition. We must elevate nutrition as central to health and food systems, and as necessary both to protect against malnutrition and nourish healthy and productive futures.

Collective action could "unite financial commitments, policy solutions, knowledge, and resources from country governments, donors and philanthropies, businesses, NGOs, and beyond" to transform the way the world tackles malnutrition. Reaching the WHA targets by 2025 requires an urgent and fundamental shift in our approach to maternal and child nutrition, particularly in areas where there has been no progress. Moreover, overall donor investments still fall short of what is needed to accelerate progress to levels commensurate with achieving either the WHA targets or SDG 2.2.

USAID's 2019 report [Acting on the Call](#) highlights the undeniably critical role of nutrition in preventing maternal and child deaths. However, as the report also notes, of all U.S. government funding between 2012 and 2018 dedicated to preventing maternal and child deaths, only 5 percent was spent on nutrition. It is appalling that the number of severely malnourished children has remained unchanged for several years now—and that most countries are still not on track to

reach the WHA indicators. It is time for an innovative, targeted approach to break the cycle of malnutrition.

1. **The U.S. government should exercise global leadership by making a bold and transformative commitment at the N4G Summit.** An ambitious pledge would send a powerful signal to all stakeholders that the time has come for everyone to step up and focus their efforts on collective action—action that will move the world toward sustainable solutions to the problem of starving children. It would also build on the legacy of U.S. nutrition leadership over the [past 60 years](#). Millions of lives have been saved—and millions and millions more have been improved—as a result of U.S. leadership on nutrition.
2. **Through a new nutrition initiative, reorient USAID global nutrition programs** in select priority countries toward scaling up the “Power 4” set of proven nutrition interventions.
3. **USAID should ensure that its field programs better reflect the centrality of nutrition** to overall global health and development outcomes. Successful nutrition outcomes depend on coordination across multiple sectors. Among them are health, food security, agriculture, and WASH. USAID has taken a number of positive steps, including adopting the Multi-Sectoral Nutrition Strategy in 2014 and recently establishing the Nutrition Leadership Council and the Center for Nutrition. While these are promising developments, USAID’s field programs

across the Bureaus of Global Health, Resilience and Food Security, and Food for Peace should integrate nutrition so as to best support maternal and child needs.

4. **USAID should elevate nutrition within its [Journey to Self-Reliance \(J2SR\)](#).** Good nutrition is key to building resilience and human capital and therefore to enabling a country to put itself on a path to self-reliance. The J2SR strategy supports partner governments to achieve lasting results by building national capacity and availing themselves of expertise in civil society and the private sector. This aligns with the objectives of the Scaling Up Nutrition (SUN) Movement, particularly supporting national ownership and establishing multi-stakeholder platforms that include local businesses and civil society, both intended to deliver sustainable improvements in maternal and child nutrition.

Now is the time for the international community to take collective action and set a course correction to achieve the WHA targets and lead the way towards ending hunger and malnutrition by 2030. The COVID-19 global pandemic reveals plainly the unacceptable depths of vulnerability that poor nutrition inflicts on millions of mothers and children in poor contexts. The U.S. government must seize this opportunity to provide bold leadership and investments to achieve transformative change that unequivocally enshrines nutrition as fundamental to all health and food systems. After all, the United States is known for its nutrition leadership and innovation.