GLOBAL NUTRITION SUMMIT 2017: MILAN

UNITED NATIONS DECADE OF ACTION ON NUTRITION
2016-2025


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AN AGENDA FOR ACTION TO CLOSE THE GAP ON WOMEN'S AND GIRLS' NUTRITION

NOVEMBER 2017

The Opportunity

Women and girls are drivers of development as individuals and as influencers of the health and well-being of their families and communities. To succeed in school, maximize work productivity and have their own wanted healthy children in the future, they must have access to adequate nutrition and healthy diets. Yet more than one billion women and girls do not have access to the nutrition they need to survive and thrive. By prioritizing women's and girls' nutrition, we can open a pathway to greater opportunities and achieve a ripple effect for women, their families and nations.

This action agenda aims to increase attention to and investment in action for women's and girls' nutrition by empowering women and girls to take control over their nutrition and overall health. Women and girls represent a substantial portion of the malnutrition burden; focused attention will drive strategic and rapid progress towards the agreed World Health Assembly nutrition targets, SDG 2.2 (ending all forms of malnutrition), and other global goals linked to women's and girls' nutrition. In particular:

- SDG 3: Good health and well-being;
- SDG 5: Gender equality; and
- SDG 8: Decent work and economic growth.

Key Messages

- More than one billion women and girls do not have access to the adequate nutrition and healthy diets they need to survive and thrive.
- Adolescents have been largely neglected on the nutrition agenda. This must change in order to achieve global goals.
- Investing in adolescent nutrition has a triple return: for adolescent health now, for adult health later, and for the health of future generations.
- Only by prioritizing critical actions to address the women and girls who are currently left behind can we accelerate progress toward SDG 2.2 and at the same time contribute to many of the SDGs.

Over the past decade, research has dramatically expanded our understanding of how to improve nutrition for women and children. The 1,000-day period from early pregnancy through the first two years of life is the best-known window of opportunity when the return on investment in nutrition and health is greatest. Yet, growth and development are faster during adolescence than at any other time except the first year of life. This period therefore offers an important second window of opportunity for investing in nutrition to achieve immediate and life-long benefits. Similarly, the period between pregnancies can provide the opportunity for women to restore their nutrient stores and be adequately prepared and well-nourished to support a subsequent planned pregnancy.


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Why Women's and Girls' Nutrition?

Anemia

Anemia is dragging down the health and productivity of more than half of women in developing countries, yet its effects—including fatigue and lost productivity—are largely invisible. Half a billion women of reproductive age and four out of 10 pregnant women worldwide suffer from anemia, leading to impaired health, decreased productivity and earning potential. Anemia is estimated to contribute to 20 percent of maternal deaths, and during pregnancy increases the risk of fetal death, prematurity and low birth weight.[i] Anemia also has a serious negative impact on growth and development during adolescence. Iron deficiency anemia is the number one cause of adolescent Disability-Adjusted Life Years (DALYs).

Noncommunicable Diseases (NCDs)

In most countries, a higher proportion of women and girls are malnourished than males. This includes overweight/obesity and undernutrition, both important risk factors for many noncommunicable diseases (NCDs). In 2016, 15 percent of women were obese, 39 percent of women were considered overweight and over 340 million children and adolescents aged 5-19 were overweight or obese. Two thirds of Disability-Adjusted Life Years (DALYs) in women are due to NCDs, representing a major health, social and economic burden affecting women globally.

Intergenerational Cycle of Malnutrition

A woman's nutritional status directly impacts the next generation: maternal undernutrition contributes to stunting, small for gestational age (SGA) births, preterm births and risk of neonatal death. The impacts can last a lifetime; an estimated 20 percent of children who suffer from post-natal stunting were born small for gestational age, a condition caused in part by maternal undernutrition and micronutrient deficiency. This means that 32 million children globally suffer the lifelong, irreversible consequences from stunted growth and development because their mothers lacked the right nutrition.[ii] Maternal undernutrition also increases the risk of hemorrhage and eclampsia—two of the leading causes of maternal death.

Focusing on Adolescent Girls

Healthy diet and physical activity during adolescence is critical to meet the demands of physical and cognitive growth and development, provide adequate stores of energy for illnesses and pregnancy, and prevent adult onset of nutrition-related diseases. A recent report from WHO and partners, *Global accelerated action for the health of adolescents (AA-HA!): Guidance to support country implementation* assists governments in how to respond to health needs of adolescents.

An Action Agenda for Women's and Girls' Nutrition

By prioritizing women's and girls' nutrition—which to date has largely been neglected—the nutrition community can drive rapid progress toward SDG 2.2 and support many of the SDGs. The opportunity of the *UN Decade of Action on Nutrition (2016-2025)* should be fully leveraged to advance adolescent girls' and women's nutrition. The following priority actions are recommended:

i Black RE, Victora CG, Walker SP, Bhutta ZA, Christian P, de Onis M, Ezzati M, Grantham-McGregor S, Katz J, Martorell R, et al. Maternal and child undernutrition and overweight in low-income and middle-income countries. The Lancet. 2013;382 :427-451.

ii Ibid

1) ***Close the gaps on financing, evidence and data:***



- ✓ **Close the funding gap by leveraging innovative financing solutions.** Despite the magnitude of the problem, the world has gravely underinvested in nutrition. On average, countries spend about two percent of their domestic budgets on nutrition and donors allocate less than one percent of total development assistance to the issue. As the global economy and the development landscape shifts, it is now more important than ever that we seek new and innovative financing sources for nutrition, particularly for women and girls, such as the Global Financing Facility (GFF) and the Power of Nutrition.

- ✓ **Close the gap on the evidence base.** While significant progress can be made solely by scaling up proven interventions that are available now, a focused learning agenda is needed to develop, test and roll out new solutions and address the obstacles to effective implementation, with a focus on the neglected life stages of pre-conception and adolescence. More implementation research is needed on the delivery science of proven interventions. We need more guidance about how best to scale-up existing interventions as well as develop and test the effectiveness of new ones. New delivery platforms need to be identified, particularly to reach adolescents who may not be in school.

- ✓ **Close the huge data gap.** Greater investments in data systems and more regular review and reporting of progress toward achieving targets, goals and impact are needed to close the significant data gaps on women's and girls' nutrition. The Global Nutrition Report calls out the huge data gap around adolescents (in particular, young adolescents <15 years). Nutrition data is not collected specifically for the adolescent age range; age- and sex-disaggregated data is needed. Programs should review all national systems for health-data collection and find ways to incorporate a focus on adolescents. Beyond nutrition, most national information systems around the world do not collect data on the issues that disproportionately affect women and girls; more and better gender data is needed to bring visibility to the issue so we can prioritize and act accordingly.

2) ***Mainstream gender-sensitive nutrition interventions across multiple sectors.*** Integrating gender-sensitive nutrition interventions into multiple sectors (i.e. health, family planning, agriculture and education) and into existing and emerging platforms is critical to achieving and sustaining progress. We must seek opportunities to work with other sectoral partners and increase evidence of proven approaches.

3) ***Adopt a lifecycle approach that prioritizes adolescents.*** We can take an important step towards breaking the vicious cycle of intergenerational malnutrition, chronic diseases and poverty if we consider nutrition policies and programs through the lens of a lifecycle approach that addresses the nutrition needs of adolescents. Healthy and empowered adolescents become healthy adults who can in turn raise healthy children, if and when they choose to do so. While the first 1,000 days is still a critical window to intervene, investments in nutrition must also extend to people beyond children under two, including adolescent girls and women of reproductive age.

   Women's nutrition should be acknowledged in its own right, separately from how a woman's nutritional status may impact future offspring. A broader lens is needed to fully consider and address all the barriers women face to achieving gender equality; we will not solve the nutrition challenges of women and girls without addressing women's rights, including sexual and reproductive rights and education.

4) ***Tackle anemia for women and adolescents.*** Eliminating anemia could result in an increase in adult productivity of up to 17 percent.[iii] Yet no country is on track to meet the WHA targets to reduce anemia among women of reproductive age, and the number of women with anemia has increased since 2012. The Global Nutrition Report estimated that at the current rate of progress it would take until the year 2084 to reach the anemia target. The World Bank investment framework for nutrition, including anemia, is compelling. Scaling up a core package of multisectoral nutrition-specific and nutrition-sensitive (including food-based) interventions[iv] would potentially:

   - Prevent 265 million cases of anemia in women in 2025;
   - Avert nearly 800,000 child deaths;
   - Reduce anemia prevalence to 15.4 percent;
   - Generate $110.1 billion for the economy; and
   - Yield a benefit-cost ratio of $12 for every 1 dollar invested.[v]

iii Horton, S., and Ross, J, The Economics of Iron Deficiency. Food Policy. 2003, 28: 51-75.

iv Multiple micronutrient supplementation including iron and folic acid supplementation for nonpregnant women; staple food fortification, micronutrient supplementation for pregnant women, and Intermittent Presumptive Treatment in pregnancy (IPTp) – countries with high malaria burden

v Shekar, Meera, Jakub Kakietek, Julia Dayton Eberwein, and Dylan Walters. 2017. *An Investment Framework for Nutrition: Reaching the Global Targets for Stunting, Anemia, Breastfeeding, and Wasting.* Directions in Development. Washington, DC: World Bank. doi:10.1596/978-1-4648-1010-7. License: Creative Commons Attribution CC BY 3.0 IGO

While current investments in anemia prevention fall far short of what is needed to reach the target, with an additional $230 million per year from donors (on top of what is currently being spent), achieving the target is possible.

5) ***Advocate for political leadership and mobilize new resources.*** A sustained advocacy effort will: galvanize political leadership and mobilize new and additional resources; spur policy changes needed to scale-up proven interventions; and achieve a multiplier effect through prioritization within existing financing mechanisms. Upcoming advocacy moments include:

   - Scaling Up Nutrition (SUN) Movement Global Gathering, Abidjan, November 2017
   - Sixty-Second Session of the Commission on the Status of Women, New York, March 2018
   - World Bank Spring Meetings, Washington, DC, April 2018
   - World Health Assembly, Geneva, May 2018
   - 1st Global Financing Facility replenishment event, September 2018
   - Committee on World Food Security 45th annual session, Rome, October 2018
   - Women Deliver conference, Vancouver, Canada, June 2019

We can't achieve our global goals if half the world's population continues to be left behind, and their potential and talent continues to go untapped. Interventions to improve women's and girls' nutrition are among the most effective and sustainable means of achieving impact and reducing inequalities across future generations, and as such, should be placed high on the development agenda. If we prioritize closing the inequity gaps and reaching those who are currently not being reached with critical nutrition interventions, we can course correct and catalyze progress towards the entire 2030 Agenda.



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This Action Agenda is meant to serve as a preliminary framework for collective action as proposed by this set of partners and as an initial call for action for the global community. We encourage others to join and share their inputs with us as we seek to accelerate progress towards SDG 2.2 by prioritizing the needs of women and girls within our nutrition strategies and programs. To maintain the momentum, we will use our membership of different fora including the SUN Movement and Committee on World Food Security to bring awareness to the Action Agenda, and to create convening opportunities in 2018 for engagement and subsequent action.

Annex

Global Frameworks

- The *ICN2 Rome Declaration* reaffirmed that nutrition and other related policies should pay special attention to women and empower women and girls.
- The *UN Decade of Action on Nutrition (2016-2025)* promotes a multi-sectoral approach to fight malnutrition in all its forms, and addresses all people everywhere, particularly women and youth as key stakeholders for success.
- *The Global Strategy for Women's, Children's and Adolescents' Health (2016-2030)* notes the critical role nutrition plays in ending preventable deaths, achieving health equity and improving health outcomes for women and girls.