Driving commitment for nutrition within the UN Decade of Action on Nutrition

Policy Brief

The global community has committed to ending all forms of malnutrition, everywhere.

We must act to make this happen.



DRIVING COMMITMENT FOR NUTRITION

The United Nations Decade of Action on Nutrition 2016-2025 (the Nutrition Decade; http://www.un.org/nutrition) aims to trigger intensified action to end hunger and eradicate all forms of malnutrition worldwide, and ensure universal access to healthier and more sustainable diets for all people, whoever they are and wherever they live. Within the framework of the Sustainable Development Goals (SDGs), the Nutrition Decade presents a unique opportunity for all countries and stakeholders to align activities around a shared framework and timeline, and to increase the visibility, coordination, and effectiveness of nutrition actions worldwide. Achieving and sustaining on-the-ground reductions in malnutrition will require strong commitment from many people and organizations including policy-makers and governments, implementing agencies and teams, civil society groups, research institutions, businesses and communities. Such commitment does not come easily: it must be created, sustained and strengthened over time. This policy brief sets out factors that drive commitment for nutrition, and is intended to guide actions that will increase commitment by all stakeholders.

THE GLOBAL CHALLENGE: ENDING ALL FORMS OF MALNUTRITION

Malnutrition is one of the greatest health and development challenges of our time, affecting at least one in three people in the world today (Box 1). This includes the 815 million people who are chronically undernourished and the 1.9 billion adults who are overweight or obese [1, 2]. Among children under 5 years of age, 151 million (22.2%) are stunted and a further 38 million (5.6%) are either overweight or obese. Wasting, resulting from severe hunger and/or affects 51 million disease. (7.5%)Undernutrition contributes to an estimated annual 3.1 million deaths, representing 45% of all deaths in this age group [3, 4]. Furthermore, unhealthy diets is one of the leading risk factors for the global burden of disease [5].

Box 1. The global burden of malnutrition

Worldwide:

- 815 million people are chronically undernourished [1]
- 1.9 billion adults are overweight or obese [2]
- 264 million women of reproductive age are affected by iron-deficiency anaemia [6]
- 151 million (22.2%) children under 5 years of age are stunted (low height for age) [3]
- 38 million (5.6%) children under 5 years of age are overweight [3]
- Undernutrition contributes to 3.1 million (45% of total) deaths in children under 5 every year [4]

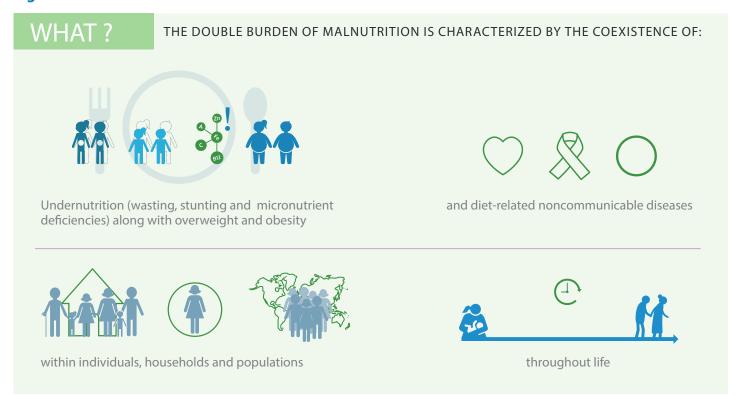




Many countries now face a double burden of malnutrition, with high rates of undernutrition (including wasting, stunting and micronutrient deficiencies) co-existing alongside overweight, obesity and dietrelated noncommunicable diseases (NCDs) [Figure 1]. These different forms of malnutrition can affect individuals, households and populations simultaneously

[7, 8]. Conversely, good nutrition is fundamental to the health of individuals, families, and communities and to the economic and social development of countries. Well-nourished children are more likely to reach their full physical and cognitive potential, and are less likely to die early, suffer disability or live in poverty over their lifetime [7].

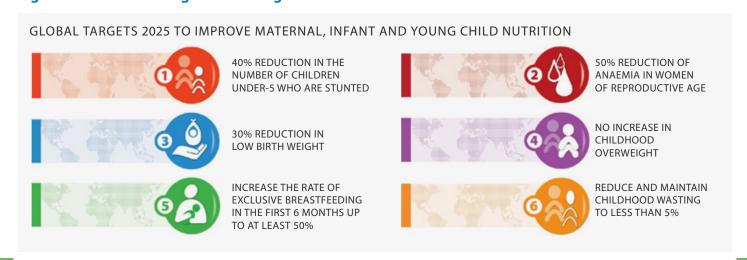
Fig. 1. What is the double burden of malnutrition?



NOW IS A GOOD TIME TO ACCELERATE COUNTRY-LED ACTION

The Nutrition Decade provides a timely opportunity to initiate new or accelerate existing country-led actions. Nutrition is firmly positioned within the 2030 Agenda for Sustainable Development through SDG 2, including target 2.2 (ending all forms of malnutrition by 2030) [7], and is a bedrock for achieving other SDGs [9].

Fig. 2. Global nutrition goals and targets



NUTRITION AS AN ENABLER FOR NCD TARGETS AND OBJECTIVES



Reduce premature mortality from NCDs

NUTRITION AS A DIRECT SUSTAINABLE DEVELOPMENT GOAL



End all forms of malnutrition (2.2)

DIET RELATED NCD TARGETS



30% relative reduction in mean population intake of salt/sodium



25% relative reduction in the prevalence of raised blood pressure or contain the prevalence of raised blood pressure according to national circumstances



Halt the rise in diabetes and obesity

NUTRITION AS AN ENABLER FOR HEALTH-RELATED SUSTAINABLE DEVELOPMENT GOALS AND TARGETS



Women (3.1) and children (3.2)

NCDs (3.4)

Communicable diseases (3.3)

Emergencies (3.d)

NUTRITION AS AN ENABLER FOR OTHER

GOALS





































The Nutrition Decade increases momentum for achieving the SDGs and global nutrition targets set in the WHO action plans on maternal, infant and young child nutrition and on NCDs [Figure 2]. The six action areas of the Nutrition Decade and recommendations of the Framework for Action of the Second International Conference on Nutrition (ICN2) provide countries with a broad range of policy options for customizing and extending their activities [Figure 3].

WHAT IS A COMMITMENT FOR NUTRITION AND WHY DOES IT MATTER?

Simply put, a commitment is "the will to act and keep on acting until the job is done" [10]. This includes both the intention to act and sustained actions over time by all stakeholders to reduce and eliminate the causes and manifestations of malnutrition [11]. Strengthening commitment for nutrition is crucial if governments and other key stakeholders are to accelerate nutrition actions within countries and achieve on-theground results [12, 13]. Three key reinforcing forms of commitment are important [Figure 4].

Fig. 3. Six action areas



^{1.} For a more elaborate overview of these and other forms of commitment see: Baker P, Hawkes C, Wingrove K, Demaio A, Parkhurst J, Thow AM, Walls H (2017) What drives political commitment for nutrition? A review and framework synthesis to inform the United Nations Decade of Action on Nutrition. BMJ Global Health; DOI: 10.1136/bmjgh-2017-000485.

Fig. 4. Reinforcing forms of commitment for nutrition¹[12]



EVIDENCE OF...

- High-level speeches about nutrition
- Media statements about nutrition
- Making SMART commitments
- High-level awareness within government
- Enabling legislation, policies and plans
- Coordinating agency
- Institutional framework
- Data, monitoring and accountability system
- Budget line for nutrition and adequate amount
- Full disbursement of nutrition budget
- Enforcement of laws and regulations
- Trained, competent and motivated staff

Expressed commitments are verbal or written statements, for example by political leaders, government officials, civil society groups or businesses [12], recognizing that nutrition is a serious issue and that action is both needed and forthcoming. Such commitments are stronger when they are clearly defined

and trackable (with specific time-bound and measurable targets) and when they are accompanied by efforts to mobilize support for action [10, 11]. Box 2 describes criteria for ensuring that expressed commitments are clear and strong.

Box 2. Think "SMART" when setting commitments for action

As a part of the Nutrition Decade, governments and partners are encouraged to make SMART commitments that build upon and extend existing food and nutrition policies and actions. SMART commitments are specific, measurable, achievable, relevant and time-bound. Such commitments clearly specify what actions are intended, enable tracking and enhance accountability.

S	SPECIFIC	The commitment refers to a specific action and indicates who is responsible for achieving it.
M	MEASURABLE	The commitment includes an indicator(s) to enable the monitoring of progress and achievement.
A	ACHIEVABLE	The commitment is realistic given the availability of resources and level of progress achieved in the past.
R	RELEVANT	The commitment reflects a country's situation, national priorities and the challenges it faces.
Т	TIME-BOUND	The commitment's key milestone is to be met within a realistic timeframe for achievement.

To be meaningful, expressed commitments must be converted into deeper **institutional commitments**. These include the adoption of laws, policies and operational plans, and the establishment of institutional systems for coordinating inputs and driving actions across sectors (for example health, agriculture, education, social protection and trade) and levels (national, regional and local) [10]. Empowered institutions can mobilize further attention and resources, thereby generating further commitment and sustaining it [10, 11].

To have impact, institutional commitments must in turn be converted into **operational commitments**, including the mobilization of resources (financial, human and technical) for delivering programmes and on-theground actions for impact. This can be demonstrated, for example, by having a clear nutrition line item in government budgets, making financial disbursements that are sufficient for achieving results, and the presence of sub-national implementation teams that are well staffed, highly motivated and have low turnover [10].

Ultimately, successful implementation of outcomes reinforce all forms of commitment because stakeholders will be more likely to provide ongoing support for policies and programmes that achieve results [10]. A further indicator of commitment is the extent to which all three forms are sustained in the face of emerging opposition, competing priorities, changing conditions and facing challenges. In essence, commitment is strong when there is a continuity of resolve to get the job done [10, 11].

Box 3. Support for converting expressed commitments into institutional and operational commitments within countries



Countries are regularly called on to make commitments to nutrition. Examples include those made through the Nutrition for Growth (N4G) platform, the ICN2 commitments, and SMART commitments made explicitly as a part of the Nutrition Decade. The joint FAO/WHO Secretariat of the Nutrition Decade is dedicated to supporting countries to translate expressed commitments into deeper institutional and operational commitments to ensure action on the ground that leads to impact. This comprises support for: (i) setting, tracking and achieving SMART commitments, (iii) providing technical assistance and guidance in formulating policy and operational activities, (iii) facilitating international and regional collaboration and learning, including through the support of country-led action networks, and convening conferences and forums and (iv) undertaking evidence-informed advocacy and communications. The joint FAO/WHO Secretariat works closely with other relevant UN organizations, coordinating mechanisms and platforms.

For more information: http://www.un.org/nutrition

WHAT DRIVES COMMITMENT FOR NUTRITION?

Commitment is not something that simply exists or emerges accidentally: it must be created and strengthened over time [12, 13]. Past experience provides evidence on what drives commitment and how, once achieved, it becomes sustained.

Empowered nutrition policy communities

Nutrition policy communities are the individuals and organizations who share an interest in tackling malnutrition within a given country and who act together to do so. Such communities drive commitment in many ways: they can raise awareness and advocate for action, they generate data and evidence, frame nutrition problems and solutions, coordinate policy development and implementation activities, build capacity and mobilize resources. They may begin as loosely organized and informal, and later evolve into highly coordinated and formalized alliances [12].

Community members may include political leaders, parliamentarians, government officials, researchers, international organizations and civil society representatives among others. The process of forming and strengthening such communities can be accelerated in various ways by, for example, creating spaces and opportunities (conferences, formal governance bodies, working groups, networking events) for information-sharing, consensus-building and conflict resolution [12].

Nutrition policy communities tend to be more effective at building commitment when they are cohesive, have strong leadership, have a common narrative, are responsive to emerging challenges and opportunities, and are possessing capacities and resources (Box 4). Peru is an example where strong leadership and the participation and gradual convergence of stakeholders around a common narrative was important to advancing an integrated policy response to child malnutrition [14].



Box 4. Features of empowered nutrition policy communities [12]

1 COHESIVENESS

Community cohesion is a foundation for collective action. This is more likely in the presence of strong leaders capable of nutrition community members, and when space and time is made available for sharing information, building relationships and managing conflicts.



2 SPEAKING WITH A SHARED VOICE

Communities are more likely to increase their influence when they share common principles and beliefs, and when they find ways of developing a unified discourse about the causes of malnutrition, optimal solutions and ideal governance arrangements.



3 STRONG LEADERSHIP

Nutrition leaders can form, unify and mobilize communities, champion policies, translate technical ideas into feasible policy options, and leverage emerging opportunities. Several leaders may emerge within nutrition policy communities, within and/or outside of government.



4 STRATEGIC ALLIANCE-BUILDING

Building multi-stakeholder alliances can expand nutrition policy community membership, raise awareness, expand the resources and expertise available to the community, and increase leverage with decision-makers.



5 CAPACITIES AND RESOURCES

Commitment-building can be enhanced through acquiring and strengthening relevant technical, organizational and strategic knowledge and expertise, as well as human and financial resources for managing and coordinating community activities.



6 RESPONSIVENESS

This means anticipating and taking advantage of emerging opportunities and/or overcoming challenges that arise because of changing conditions or events (such as elections, natural disasters, food crises, economic trends, social policy reforms).



High-level political champions and nonpartisan coalitions for nutrition

Political leaders and parliamentarians can act as important champions for nutrition and can promote accountability by overseeing government policy responses, agencies and expenditures. Building nonpartisan (multi-party/-faction) coalitions for nutrition can help to sustain commitment in the long term. For example, in Brazil a nonpartisan coalition for nutrition has provided sustained support for the country's multi-sectoral food security and nutrition policy [15]. At the regional level, the Parliamentary Front against Hunger and Nutrition in Latin America and the Caribbean is an initiative that aims to foster nonpartisan support for action within countries.

Civil society mobilization and involvement

society groups include nongovernmental organizations and grassroots social movements that represent the interests of citizens. A mobilized civil society can play many roles in strengthening nutrition commitment by, for example, raising awareness and generating demand for action, strengthening policy development and implementation activities, acting as a voice for vulnerable and marginalized groups, monitoring stakeholder commitments and holding them to account. This is more likely to happen when governments involve civil society groups as active and meaningful participants in governance, policy and programming activities. For example, civil society in Brazil provides input into food and nutrition policy processes through a range of legal, institutional and informal mechanisms. This also promotes transparency and enhances accountability [16].

Awareness-raising

The low visibility of some forms of malnutrition (for example stunting and anaemia) within affected communities and among policy-makers and other stakeholders can constrain demand for action. Policy initiatives and programmes can also lack visibility when improvements in nutrition status are not immediately obvious to beneficiaries or traceable to those who

championed them. Awareness can be raised through establishing data systems and visualization tools for communicating the severity, causes and consequences of malnutrition, showcasing nutrition improvements resulting from policy initiatives, and multi-pronged communication activities (e.g. media campaigns, policy briefs, direct engagement of parliamentarians) that target various audiences.

Responsiveness

Long-term changes in societal conditions as well as shorter-term events can present opportunities for building commitment. For example, drought, food insecurity and famine may focus attention directly onto nutrition or related issues; sustained economic growth may provide greater resources for action; social policy reforms may present a broader policy discourse that nutrition actors can influence; the election of a new government can provide new opportunities for advocacy. Nutrition policy communities will be more capable of taking advantage of such opportunities when they have sufficient foresight, leadership and capacities [17].

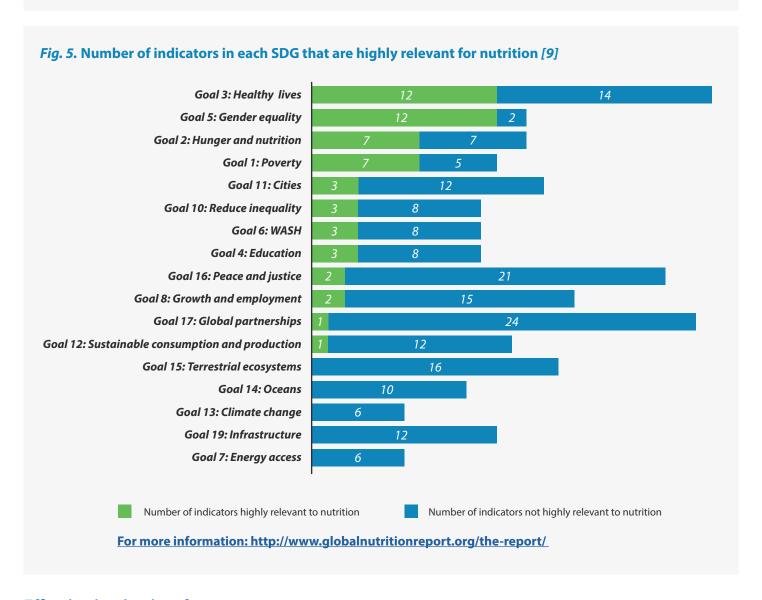
Frames that resonate

Publicly portraying ("framing") nutrition issues in ways that resonate with the beliefs, priorities and needs of different audiences can mobilize support for action [12]. For example, an economic rationale emphasizing costs of malnutrition to national health systems and workforce productivity may resonate with finance policy-makers; the human right to adequate food and to freedom from hunger may inspire civil society groups; and the vulnerability of children to malnutrition may resound with all audiences. Sensitizing and positioning nutrition within wider policy discourses (for example achieving the SDGs or economic and social policy reform) can also help to generate commitment (Box 5).



Box 5. Nutrition as a bedrock for achieving the SDGs

Action on nutrition presents a win-win option for many sectors working to achieve the SDGs. Because of the cross-cutting causes and consequences of malnutrition, at least 12 of the 17 SDGs contain indicators that affect or are affected by malnutrition [Figure 5]. Achieving targets on poverty reduction, education, food systems, climate change, social protection, agriculture and water, sanitation and hygiene will generate significant co-benefits for nutrition. The Nutrition Decade and its six action areas provide an inclusive umbrella for consolidating and aligning policy and programming across the sectors involved.



Effective institutional systems

Sustaining commitment requires responses that achieve results. These in turn require effective and credible institutional systems for coordinating policy and programming activities, engaging all stakeholders and strengtening accountability [12]. Effective institutional systems can include a governance body, a coordinating agency, an institutional framework and a data-sharing and communication system (Box 6). Institutional systems for nutrition may be more effective when planning activities are coordinated centrally, but implementation is a sectoral responsibility.

Box 6. Characteristics of effective institutional systems for nutrition [12]



1. A GOVERNANCE BODY for overseeing policy initiatives and engaging high-level stakeholders. To enhance transparency, ownership and accountability, this body can provide a space for including national and sub-national government officials, civil society representatives and other stakeholders. Ideally, it should directly involve a high-level political champion (such as the president, prime minister or mayor).



2. A COORDINATING AGENCY with a mandate to develop policy, coordinate actions and evaluate responses. Such an agency is likely to be more effective when located centrally within government and when possessing sufficient authority, capacities, financial resources and leadership. The long-term survival of a coordinating agency may depend on the extent to which agency staff advocate for ongoing attention and resources.



3. A MULTI-SECTOR/-LEVEL INSTITUTIONAL FRAMEWORK with clearly defined roles and responsibilities. In addition to the governance body and coordinating agency this may include sectoral agencies (such as the departments of health, agriculture, education, welfare and trade), and decentralized structures for coordinating sub-national activities (for example, regional and local food and nutrition bodies).



4. A DATA-SHARING AND COMMUNICATION SYSTEM for enhancing institutional accountability, monitoring and performance. Data-sharing and communication systems can enable institutional responsiveness, whereby centralized policies are calibrated in response to feedback on changing on-the-ground conditions, challenges and demands.

Strong cooperation incentives

multi-sector and multi-level are more likely when there are strong incentives to cooperate [12]. These incentives include enabling legislation, policies and operational plans, shared and sector-specific goals, performance measures, and aligned political motives. The participation of sub-national stakeholders responsible for implementation central policy development may increase their ownership enhance commitment. Establishing nutrition government line items in budgets, expanding budgetary commitments and adopting and/or performance-based financing mechanisms can enhance accountability, create entitlements among parliamentarians, administrators and citizens, and further promote cooperation.

Effective safeguarding against conflicts of interest

Private sector involvement in developing and implementing food and nutrition policies can present opportunities, but also risks that undermine commitment when private and public interests are misaligned. Identifying and preventing conflicts of interest are imperative through the establishment of effective safeguards.

Box 7. Building institutional systems for nutrition: the case of Brazil [7, 15]

The National System of Food Security and Nutrition (SISAN) in Brazil is an institutional system with clearly defined roles and responsibilities and strong incentives for multi-sector/-level cooperation. It was designed as a 'capillary structure' involving ten ministries and special secretariats under the leadership of the President. The National Council on Food and



Nutrition Security (CONSEA) is responsible for convening actors, consolidating actions, formulating policy and monitoring implementation, with similar councils established at sub-national levels. The Interministerial Chamber on Food and Nutrition Security (CAISAN) is responsible for facilitating sub-national government engagement and participation, and the Ministry of Social Development and Fight Against Hunger (MDS) for planning and implementing programmes.

Civil society provides direct input through a range of legal, institutional and informal mechanisms, thereby improving transparency, accountability and responsiveness. Enabling legislation and policies provide a mandate for action and a framework for coordination. This includes a Food and Nutrition Security Law that enshrines access to adequate food as a human right and mandates national whole-of-government, multi-level and multi-sector cooperation. Results-based budgeting further incentivizes cooperation, improves transparency and accountability within the system, and enhances the efficiency of programmes. The system is also supported by a multi-sector/-level system for information-sharing and communication.

Data systems for monitoring and accountability

Robust data collection and reporting systems can provide a foundation for dialogue and the development of a unified discourse about what is driving malnutrition and how to address it [12]. Such systems can also inform policy design decisions and policy calibration in response to changing conditions and implementation challenges. Furthermore, fit-for-purpose data systems are needed for benchmarking and monitoring progress, and strengthening accountability. Data that demonstrate 'policy success' can be used to advocate for sustained commitment.

CONCLUSIONS

The Nutrition Decade presents an unprecedented opportunity for accelerating country-led actions to end hunger, eliminate all forms of malnutrition, and ensure access to healthier and more sustainable diets for all people everywhere.

Achieving on-the-ground results will require strong and sustained commitment from many people and organizations working within countries. Such commitment does not come easily: it must be created, strengthened and sustained over time.

Expressions of commitment must be translated into deeper institutional and operational commitments to achieve action on the ground that leads to impact.

The drivers of commitment set out in this policy brief can be utilised by all stakeholders to support actions that strengthen commitment for improved nutrition over the long term.

Strong commitment – from all stakeholders at all levels – is essential to ending hunger and eradicating all forms of malnutrition.

FOR MORE INFORMATION

Department of Nutrition for Health and Development

World Health Organization

Avenue Appia 20, CH-1211 Geneva 27, Switzerland

Fax: +41 22 791 4156 Email: nutrition@who.int www.who.int/nutrition

SUGGESTED CITATION

World Health Organization, Food and Agriculture Organization of the United Nations. Driving commitment for nutrition within the UN Decade of Action on Nutrition: policy brief. Geneva: World Health Organization; 2018 (WHO/NMH/NHD/17.11).

ACKNOWLEDGEMENTS

This policy brief was produced by the World Health Organization, Department of Nutrition for Health and Development, and the Food and Agriculture Organization of the United Nations, Division of Nutrition and Food Systems. Dr Alessandro R Demaio oversaw the preparation of this document. Dr Phillip Baker was the lead author on the scientific review underpinning this brief. Additional valuable inputs were contributed by Ms Hala Boukerdenna, Dr Francesco Branca, Professor Corinna Hawkes, Dr Anna Lartey, Ms Lina Mahy, Dr Lisa Murphy, Dr Justin Parkhurst, Dr Anne Marie Thow, Dr Helen Walls, Dr Trudy Wijnhoven, Ms Kate Wingrove, Ms Cathy Wolfheim and Dr Marzella Wüstefeld.

FINANCIAL SUPPORT

WHO & FAO thank the Bill & Melinda Gates Foundation for providing financial support for this work.

REFERENCES

- Food and Agriculture Organization of the United Nations, International Fund for Agricultural Development, United Nations Children's Fund, World Food Programme, World Health Organization. The State of Food Security and Nutrition in the World 2017. Building resilience for peace and food security. Rome: Food and Agriculture Organization of the United Nations; 2017.
- UNCD Risk factor collaboration. Trends in adult body-mass index in 200 countries from 1975 to 2014: a pooled analysis of 1698 population-based measurement studies with 19.2 million participants. The Lancet. 2016; 387: 1377-1396.
- United Nations Children's Fund (UNICEF), World Health Organization, International Bank for Reconstruction and Development/The World Bank. Levels and trends in child malnutrition: key findings of the 2018 Edition of the Joint Child Malnutrition Estimates. Geneva: World Health Organization; 2018.
- 4. Black RE, Victora CG, Walker SP et al. for the Maternal and child nutrition study group. Maternal and child undernutrition and overweight in low-income and middle-income countries. The Lancet. 2013; 382: 427-451.
- Lim SS, Vos T, Flaxman AD et al. A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990–2010: a systematic analysis for the Global Burden of Disease Study 2010. The Lancet. 2012; 380: 2224-2260.
- The global prevalence of anaemia in 2011. Geneva: World Health Organization; 2015.
- Global nutrition report. Washington, DC: International Food Policy Research Institute; 2016.
- 8. The double burden of malnutrition: Policy Brief. Geneva: World Health Organization; 2017.
- Global nutrition report. Washington, DC: International Food Policy Research Institute; 2017.

- Heaver R. Strengthening country commitment to human development: Lessons from nutrition. Directions in Development. Washington, DC: World Bank; 2005.
- 11. Te Lintelo DJH and Lakshman RWD. Equate and conflate: political commitment to hunger and undernutrition reduction in five high-burden countries. World Development. 2015; 76: 280-292. doi: 10.1016/j.worlddev.2015.07.013
- 12. Baker P, Hawkes C, Wingrove K, et al. What drives political commitment for nutrition? A review and framework synthesis to inform the United Nations Decade of Action on Nutrition. BMJ Global Health. 2017; doi: 10.1136/bmjgh-2017-000485.
- 13. Gillespie S, Haddad L, Mannar V, et al. The politics of reducing malnutrition: building commitment and accelerating progress. The Lancet. 2013; 382: 552-69.
- 14. Mejía Acosta A and Haddad L. The politics of success in the fight against malnutrition in Peru. Food Policy. 2014; 44: 26-35.
- Mejía Acosta A. Examining the political, institutional and governance aspects of delivering a national multi-sectoral response to reduce maternal and child malnutrition. Analysing nutrition governance: Brazil country report. Brighton: Institute of Development Studies; 2011.
- 16. Mejía Acosta A and Fanzo J. Fighting maternal and child malnutrition: analysing the political and institutional determinants of delivering a national multisectoral response in six countries. Brighton: Institute of Development Studies; 2012.
- 17. Pelletier DL, Menon P, Ngo T, et al. The nutrition policy process: the role of strategic capacity in advancing national nutrition agendas. Food and Nutrition Bulletin. 2011; 32: S59-S69.
- Addressing and managing conflicts of interest in the planning and delivery of nutrition programmes at country level. Technical report. Geneva: World Health Organization; 2016.



