Efforts to reduce global food insecurity and malnutrition in all its forms: perspectives from FAO

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PART I
Introduction
CHALLENGES

- Adequate nutrition is essential for health and well-being
- Every person on this planet has a right to food that is safe, sufficient and nutritious and to be free from hunger and malnutrition in all its forms
- Yet, 1 in 3 persons globally suffers from at least one form of malnutrition – undernutrition, micronutrient deficiencies, overweight and obesity
  Malnutrition is estimated to rise to 1 in 2 people if current trends continue (GLOPAN, 2016 – Foresight Report)
- Different forms of malnutrition now co-exist within the same country, community, household or individual
- Combatting malnutrition in all its forms is one of the greatest challenges that countries are facing

CURRENT MALNUTRITION SITUATION

- 795 m people undernourished  [SOFI, 2015]
- 156 m children stunted due to chronic malnutrition [UNICEF, WHO, WB, 2016]
- 50 m children wasted due to acute malnutrition [UNICEF, WHO, WB, 2016]
- Over 2 b people affected by micronutrient deficiencies [FAO (SOFI), 2015]
- 42 m overweight children under five years of age [UNICEF, WHO, WB, 2016]
- More than 1.9 b adults are overweight, of which over 600 m are obese [WHO, 2016]
WHY INVEST IN NUTRITION?

Malnutrition
- is greatest impediment to fulfillment of human potential
- acts as brake on development
- undermines economic, social and cultural fabric of nations

Malnutrition in all its forms costs $2.8-3.5 trillion (US$1.4–2.1 trillion for undernutrition and micronutrient deficiencies), equivalent to 4-5% of the global GDP, or $400-500 per person FAO/WHO, 2013

Investing in nutrition is not only a moral imperative, but also
- improves productivity, economic growth
- reduces health care costs
- promotes education, intellectual capacity, social development

PART II

Global Nutrition Governance
A network of actors whose primary, designated function is to improve nutrition outcomes through processes and mechanisms for convening, agenda setting, decision making (including norm-setting), implementation and accountability.

Source: UNCN discussion paper, 2017

NUTRITION AND NCD TARGETS TO BE ACHIEVED BY 2025

- Stunting among children by 40%
- Child wasting to less than 5%
- Low birth weight by 30%
- Exclusive breastfeeding by 50%
- Anemia in women by 50%
- Increase in childhood overweight
- Rise in adult diabetes and obesity
World leaders committed to establishing national policies aimed at eradicating malnutrition in all its forms, including hidden hunger, and transforming food systems to make safe and diversified healthy diets available to all.

ICN2 OUTCOME DOCUMENTS

Rome Declaration on Nutrition
10 commitments for more effective and coordinated action to improve nutrition
- Eradicate hunger and prevent all forms of malnutrition
- Increase investments
- Enhance sustainable food systems
- Raise the profile of nutrition
- Strengthen human and institutional capacities
- Strengthen and facilitate, contributions and action by all stakeholders
- Ensure healthy diets throughout the life course
- Create enabling environment for making informed choices
- Implement commitments through Framework for Action
- Integrate vision and commitments into post-2015 agenda

Framework For Action
60 policy recommendations for implementation of the political commitments
- Different thematic areas for action
- Governments primary responsibility to take action, in dialogue with a wide range of stakeholders
SUSTAINABLE DEVELOPMENT GOALS (SDGS)

17 goals and 169 targets
The 2030 Agenda offers a vision of a fairer, more prosperous, peaceful and sustainable world in which no one is left behind.

GOOD NUTRITION IS CORE ELEMENT OF THE SDGS
SDG 2

SDG2: End hunger achieve food security and improved nutrition and promote sustainable agriculture

IMPROVE FOOD SYSTEMS

**Target 2.1**: By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round

IMPROVE NUTRITION

**Target 2.2**: by 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons
The Nutrition Decade provides an umbrella for all relevant stakeholders to voluntarily consolidate and align nutrition actions across different sectors and facilitate policy processes across the areas identified in the ICN2 outcome documents.

SIX CROSS-CUTTING AREAS

Action area 1: Sustainable, resilient food systems for healthy diets
Action area 2: Aligned health systems providing universal coverage of essential nutrition actions
Action area 3: Social protection and nutrition education
Action area 4: Trade and investment for improved nutrition
Action area 5: Safe and supportive environments for nutrition at all ages
Action area 6: Strengthened governance and accountability for nutrition
AIM OF THE NUTRITION DECADE

Decade of **impact** for all stakeholders

- To catalyse and facilitate **alignment** of ongoing **collective efforts** worldwide towards **eradicating hunger and ending all forms of malnutrition**

- To stimulate effective **translation** of **ICN2 commitments** and **2030 Agenda into concrete policies, programmes, and investments**

- To mobilise coordinated support from across society to **increase the scale, scope and impact of actions for improved nutrition**

- To promote **mutual learning and collective accountability** for achieving **global, regional and national nutrition targets**

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PART III

**Role of nutrition and health professionals**
ACTION AREA 2

Aligned health systems providing universal coverage of essential nutrition actions

Work in this action area is based on ICN2 FfA recommendations:
- for strong and resilient health systems (# 25, 26, 27, 28);
- to address wasting (# 34, 35) and stunting (# 36, 37); and
- on health services to improve nutrition (# 44, 45, 46, 47, 48, 49).

- Evidence-informed nutrition interventions and services for all ages
- Integrate all relevant nutrition actions in health system design; support health workers at all levels to deliver nutrition actions; and ensure the availability of the necessary equipment and supplies
- Detection, referral and treatment of acute malnutrition; the provision of nutrition and health care to women, beginning with adolescent girls and continuing through pregnancy and lactation; the promotion of exclusive breastfeeding up to six months and continued breastfeeding up to two years and beyond, with adequate complementary feeding; the provision of required micronutrient supplements to pre-school children and women.

ACTION AREA 3

Social protection and nutrition education

Work in this action area is based on ICN2 FfA recommendations:
- for nutrition education and information (# 19, 20, 21); and
- on social protection (# 22, 23, 24).

- Social protection measures, such as food distribution, cash transfers, decent job creation and school feeding, can increase incomes and strengthen resilience.
- When combined with relevant health services, well-designed social protection programmes result in improved height, reduced anaemia, increased dietary diversity and raised consumption of nutrient-dense foods, especially in low-income households with infants and children.
- Knowledge and education empower people to make informed healthy dietary and lifestyle choices in harmony with nature, to improve infant and young child feeding practices and care, to improve hygiene and health-promoting behaviour, and contribute to sustainable development. Lifestyle and behaviour change is an important objective of nutrition education. It can also help reduce food losses and waste and boost sustainable resource use.
ACTION AREA 5

Safe and supportive environments for nutrition at all ages

Work in this action area is based on ICN2 FfA recommendations:
- for sustainable food systems promoting healthy diets (# 13, 15, 16);
- to promote, protect and support breastfeeding (# 29, 30, 31, 32, 33);
- to address childhood overweight and obesity (# 38, 39, 40, 41);
- to address anaemia in women of reproductive age (# 42, 43); and
- on water, sanitation and hygiene (# 51, 52).

- Importance of environmental determinants in malnutrition outcomes is stressed, including the school, home, hospital and work environments, food production as well as urban environments. It also focuses on promotion, protection and support of breastfeeding in environments such as hospitals and the workplace. The use of regulatory and fiscal tools, such as labelling, taxation, subsidies consistent with the promotion of healthy diets and supply-side incentives, is needed to achieve a healthy food environment.

PART IV

Key messages
Together, the ICN2, the 2030 Agenda and the Nutrition Decade have placed nutrition firmly at the heart of the sustainable development agenda with the recognition that transformed food systems have a fundamental role to play in promoting healthy diets and tackling malnutrition in all its forms.

Low quality diets contribute to all forms of malnutrition. The food system presents a huge opportunity to act to improve diets.

While the global food system has succeeded in feeding a growing population in terms of providing enough dietary energy...

ensuring availability and accessibility of a variety of foods and food products that contribute to healthy diets and good nutrition remains a challenge.

We need a radical transformation of the food system to nourish and not just feed a population of more than 9 billion people in 2050.
SOME ILLUSTRATIONS OF FRAMEWORKS AND INITIATIVES

COUNTRY LEVEL

HEALTHY FOOD ENVIRONMENT POLICY INDEX (Food-EPI)

REGIONAL LEVEL

REACH

GLOBAL LEVEL

UNITED NATIONS DECADE OF ACTION ON NUTRITION 2016-2025

N4G - Nutrition for Growth


THANK YOU!

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