



2016



Summary

FROM PROMISE TO IMPACT

Ending Malnutrition by 2030

Few challenges facing the global community today match the scale of malnutrition, a condition that directly affects one in three people. Malnutrition manifests itself in many different ways: as poor child growth and development; as individuals who are skin and bone or prone to infection; as those who are carrying too much weight or whose blood contains too much sugar, salt, fat, or cholesterol; or those who are deficient in important vitamins or minerals. Malnutrition and diet are by far the biggest risk factors for the global burden of disease: every country is facing a serious public health challenge from malnutrition. The economic consequences represent losses of 11 percent of gross domestic product (GDP) every year in Africa and Asia, whereas preventing malnutrition delivers \$16 in returns on investment for every \$1 spent. The world's countries have agreed on targets for nutrition, but despite some progress in recent years the world is off track to reach those targets. This third stocktaking of the state of the world's nutrition points to ways to reverse this trend and end all forms of malnutrition by 2030.

Over the past decade, momentum around nutrition has been steadily building: In 2012 the World Health Assembly adopted the 2025 Global Targets for Maternal, Infant and Young Child Nutrition. The following year, it went on to adopt targets for noncommunicable diseases (NCDs), including those relevant to nutrition. Also in 2013, at the first Nutrition for Growth (N4G) Summit, donors committed US\$23 billion to actions to improve nutrition. With the Second International Conference on Nutrition (ICN2) in 2014 and with the recent naming of 2016–2025 as the United Nations Decade of Action on Nutrition, more and more people have begun to recognize the importance of addressing malnutrition in all its forms. In 2015, the UN Sustainable Development Goals enshrined the objective of “ending all forms of malnutrition,” challenging the world to think and act differently on malnutrition—to focus on all its faces and work to end it, for all people, by 2030.

Now, 2016 brings major opportunities to translate this commitment into action. These opportunities include countries' adoption of their own targets related to the Sustainable Development Goals, the ongoing Nutrition for Growth process, and Japan's growing leadership on nutrition in the lead-up to the 2020 Tokyo Olympics and Paralympics.

The *Global Nutrition Report* is the only independent and comprehensive annual review of the state of the world's nutrition. It is a multipartner initiative that holds a mirror up to our successes and failures at meeting inter-governmental nutrition targets.¹ It documents progress on commitments made on the global stage, and it recommends actions to accelerate that progress. The *Global Nutrition Report* aims to be a beacon, providing examples of change and identifying opportunities for action. This year's report focuses on the theme of making—and measuring—SMART commitments to nutrition and identifying what it will take to end malnutrition in all its forms by 2030.

KEY FINDINGS

1 Malnutrition creates a cascade of individual and societal challenges—and opportunities.

Malnutrition and poor diets constitute the number-one driver of the global burden of disease. We already know that the annual GDP losses from low weight, poor child growth, and micronutrient deficiencies average 11 percent in Asia and Africa—greater than the loss experienced during the 2008–2010 financial crisis. This report presents new data on the cost of malnutrition to both societies and individuals. In the United States, for example, when one person in a household is obese, the household faces additional annual health care costs equivalent to 8 percent of its annual income. In China, a diagnosis of diabetes results in an annual 16.3 percent loss of income for those with the disease. All of these figures mean that the burden of malnutrition falls heavily on all of us, whether directly suffering or not. But these costs also represent large opportunities for human and economic betterment, and this report provides many examples of countries that have seized these opportunities to improve the lives of their people and the health of their societies by addressing malnutrition.

MALNUTRITION IN ALL ITS FORMS



CHILD STUNTING
Low height for age



CHILD WASTING
Low weight for height



CHILD OVERWEIGHT
High weight for height



ADULT OVERWEIGHT
Overweight or obese body fat with a body mass index ≥ 25



MICRONUTRIENT DEFICIENCY
Iron, zinc, iodine, vitamin A, vitamin B12, and folate below healthy thresholds



ADULT OBESITY
Overweight or obese body fat with a body mass index ≥ 30



NON-COMMUNICABLE DISEASES
Diabetes, heart disease, and cancer

2 The world is off track to reach global targets—but there is hope.

If we continue with business as usual, the world will not meet the global nutrition and NCD targets adopted by the World Health Assembly. However, this assessment hides significant variations and some surprises: Many countries are on course for meeting targets related to stunting, wasting, and overweight among children under age 5 and exclusive breastfeeding. Nearly all countries are off course, though, for meeting targets on anemia in women and adult overweight, diabetes, and obesity. Obesity and overweight, rising in every region and nearly every country, are now a staggering global challenge. The number of children under 5 who are overweight is approaching the number who suffer from wasting. The headline also hides regional variations: the number of stunted children under 5 is declining in every region except Africa and Oceania; the number of overweight children under 5 is increasing most rapidly in Asia. Behind these rather gloomy numbers are a cause for hope: modest changes could put many countries on course to meet global targets. This report outlines where those opportunities lie.

3 Nutrition is central to the Sustainable Development Goals.

At least 12 of the 17 Sustainable Development Goals contain indicators that are highly relevant for nutrition, reflecting nutrition's central role in sustainable development. Improved nutrition is the platform for progress in health, education, employment, female empowerment, and poverty and inequality reduction. In turn, poverty and inequality, water, sanitation and hygiene, education, food systems, climate change, social protection, and agriculture all have an important impact on nutrition outcomes. The report shows that women's power and status constitute a particularly important driver of malnutrition: mothers age 18 or under are more likely to have stunted children, and children are less likely to be stunted if their mother has secondary education. It is thus important to incorporate nutrition targets into development and social sectors, where many governments spend more than 30 percent of their budgets, and to measure the impacts of spending in these sectors on people's nutrition.

4 Current commitments do not match the need.

Given the scale of the malnutrition problem, current spending designed to overcome it is too low. Analysis shows that 24 low- and middle-income governments allocate just 2.1 percent of their spending to reducing undernutrition, whereas they spend a total of more than 30 percent on agriculture, education, health, and social protection. Donors' allocations to nutrition-specific interventions are stagnating at \$1 billion, although donor allocations to nutrition through other development and social sectors are, we believe, increasing. Spending on nutrition-related NCDs also appears low. At present we do not know how much governments allocate to combating nutrition-related NCDs. In 2014, donors spent \$611 million on all types of NCDs—less than 2 percent of their overall health spending. And despite the fact that nutrition-related NCDs account for nearly half of all deaths and disability in low- and middle-income countries, new data presented in this report show that donors spent just \$50 million on these types of NCDs in 2014.

5 SMART commitments and targets matter.

The report finds that donors and governments that prioritized nutrition in their policy documents spent more on nutrition. Businesses with stronger commitments to nutrition have a stronger ability to deliver products, marketing, and labeling that support nutrition. Countries that set undernutrition targets also reduce stunting faster. Despite this, analysis shows that most nutrition plans do not include the full set of targets for maternal, infant, and young child nutrition, and when countries have set targets, only two-thirds of them are SMART. In addition, only 30 percent of countries have targets for obesity, diabetes, and salt reduction in their national NCD plans. For N4G, our analysis shows that just 29 percent of the 2013 commitments are SMART, and the majority of them did not specify which types of malnutrition they were seeking to address.

Specific
Measurable
Achievable
Relevant
Time bound

6 We must move beyond talk to action.

The report highlights the need to dramatically strengthen the implementation of both policies and programs. Core policies and programs that promote breastfeeding are seriously lagging: only 36 percent of countries implement all or many provisions of the International Code of Marketing of Breast-milk Substitutes. No country has adopted a comprehensive approach to regulating the marketing of foods and nonalcoholic beverages to children. Two-thirds of countries have made no progress in carrying out three core WHO recommendations to promote healthy diets (salt reduction, trans- and saturated-fat reduction, and implementation of WHO's Recommendations on Marketing to Children). In the same vein, the scale-up of direct programs for undernutrition has been slow and inequitable. Mechanisms to coordinate actions across sectors are key to successful implementation, but to make a difference they must be backed by high-level support and human and financial resources.

7 Today's data and knowledge are not sufficient to maximize investments.

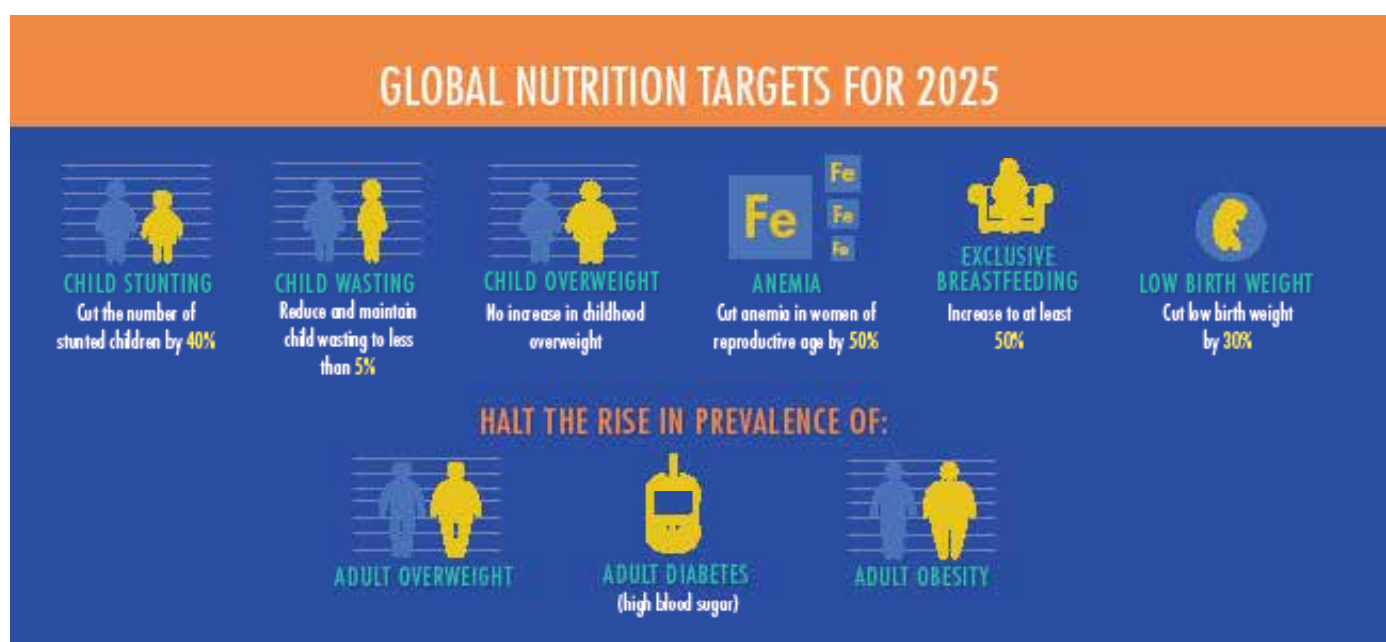
The report supports the call for a data revolution for nutrition. The scarcity of data prevents us from identifying and learning from real progress at the global and national levels. It also hides inequalities within countries, making it more difficult for governments to know about them and for others to hold governments fully accountable. The report recommends disaggregating data to better understand where malnutrition exists: in an analysis of more than 50 countries, the stunting rate in the subnational region with the highest rate is three times that of the sub-

national region with the lowest rate. In 13 countries, stunting rates in the wealthiest quintile of society exceeded 20 percent, belying the notion that income necessarily equals good nutrition. We face significant data gaps related to spending on nutrition-sensitive actions and on actions to fight obesity and nutrition-related NCDs; the coverage and impact of programs tackling all forms of malnutrition; the nutrition status of the 60 million people displaced by conflict; and malnutrition prevalence and trends in fragile states. Lastly, we confront knowledge gaps in understanding episodes of success and stasis and comprehending the underlying drivers of obesity and NCDs.

CALLS TO ACTION

1 Make the political choice to end all forms of malnutrition.

We are off course to attain targets for nutrition. Anemia, for example, is declining so slowly that at current rates we will reach the global target closer to 2130 than 2030. Obesity and overweight, far from declining, are on the rise, putting global nutrition milestones at risk. But this gloomy situation can change: dramatic reductions in malnutrition in Brazil, Ghana, Peru, and the Indian state of Maharashtra were fueled by governments and others that made commitments—and kept them. Ending malnutrition is ultimately a political choice that leaders from governments, donors, civil society organizations, and businesses at international, national, and subnational levels need to take. Making SMART commitments to nutrition would plot a different development trajectory for countries—and individuals—across the world.



Go online to find:

- the full *Global Nutrition Report*
- nutrition profiles of 193 countries, 28 regions and subregions, and the world
- datasets and data visualizations
- blog posts



#NutritionReport

@GNRReport

2 Invest more, and allocate better.

Investing in ending malnutrition is one of the most cost-effective steps governments can take: every \$1 invested in proven nutrition programs offers benefits worth \$16. To meet key global nutrition milestones, governments and donors will need to triple their commitments to nutrition over the next decade. Rapid increases in spending, and consequent improvements in nutrition, are possible, as places like the Indian state of Maharashtra have shown for undernutrition. At the same time, governments, civil society organizations, donors, and businesses need to do more to ensure that budgets in various sectors—agriculture, education, food systems, health systems, social protection, and water, sanitation, and hygiene—allocate more resources to ending malnutrition in all its forms. We need more spending to build capacity to address obesity, diabetes, and other nutrition-related NCDs. And we need to start seeing nutrition investments as a means to economic growth rather than seeing better nutrition as a result of economic growth.

3 Collect the right data to maximize investments.

Data gaps are a significant roadblock to nutrition progress throughout the world. Every country has a different nutrition context and should gather the national and subnational data it needs to understand—and act on—its own unique situation. In the spirit of the SDGs, governments, donors, businesses, and civil society organizations should track—and regularly report—their spending and impact on all forms of malnutrition, including stunting, wasting, anemia, obesity, and NCDs, as well as on exclusive breastfeeding.

4 Invest in carrying out proven and evidence-informed solutions—and in identifying new ones.

We currently have sufficient experience, data, and evidence to act decisively to improve nutrition outcomes. Examples from Brazil, Ghana, Peru, and other countries, presented in this report, can inform country approaches. We know which interventions are most effective to address undernutrition. We know which public policies stand a good chance of working to reduce malnutrition in all its forms.

We have learned that it is important to work with citizens and civil society, and to develop intersectoral governance mechanisms. At the same time, governments, funders, and researchers should work to close the knowledge gaps that are holding back action: for example, our lack of knowledge on the underlying drivers of wasting, nonexclusive breastfeeding, obesity, and overweight hampers our ability to mobilize resources from outside of the health sector to prevent them. Knowing more about why some countries can overcome implementation barriers and achieve high coverage rates in nutrition programs when others cannot will help overcome bottlenecks. And identifying new, less expensive ways to use existing subnational data—and to collect new data where needed—will help ensure that we leave no one behind in the SDG era.

5 Tackle malnutrition in all its forms.

Governments, businesses, civil society organizations, and individuals need to tackle malnutrition in all its forms. This means low- and middle-income-country governments must move to dramatically reduce undernutrition before obesity and nutrition-related NCDs become even more overwhelming. It means these countries must integrate the prevention and control of diabetes and obesity into their nutrition plans and implement the policies and interventions that can tackle them. It means OECD countries must learn from experiences elsewhere in the world to improve their domestic strategies for fighting obesity and NCDs. It means donors must expand their focus to recognize the threat that nutrition-related NCDs and obesity pose to global nutrition. It means all stakeholders need to increase the efficiency of their investments and policies by identifying and implementing double-duty actions that tackle more than one form of malnutrition at once. And it means that all stakeholders need to come to grips with the “new normal” of dealing with malnutrition, in all its forms, in the same place, at the same time—a problem for nearly half of all countries.

This synopsis was prepared by the authors of the *Global Nutrition Report 2016*.

This is a peer-reviewed publication. Any opinions stated herein are those of the authors and are not necessarily representative of or endorsed by the International Food Policy Research Institute or any of the partner organizations involved in the *Global Nutrition Report 2016*. The boundaries and names used do not imply official endorsement or acceptance by the International Food Policy Research Institute.

International Food Policy Research Institute

2033 K Street, NW, Washington, DC 20006-1002 USA | T. +1-202-862-5600 | F. +1-202-467-4439 | Email: ifpri@cgiar.org | www.ifpri.org

Copyright © 2016 International Food Policy Research Institute. All rights reserved. Contact ifpri-copyright@cgiar.org for permission to republish

DOI: 10.2499/9780896299948