

NUTRITION

The foundation of Human Development



Abstract

Good nutrition is not only the basis for a healthy and active life for all people worldwide. The right to adequate nutrition is foremost an internationally acknowledged human right. And yet, malnutrition levels remain unacceptably high around the globe, with undernutrition particularly affecting countries in the Global South. As a consequence, millions of children are deprived of reaching their full potential, resulting in economic losses and heavy burdens on health systems of affected countries. Tackling malnutrition effectively requires multi-sectoral and integrated responses at different levels, while lasting and systemic change can only be achieved when strong nutrition governance ensures integration and prioritization of nutrition in relevant sector programs and coherent policy action.

Good nutrition is vital for human development and well-being. However, hundreds of millions of people are unable to meet their needs for safe and healthy diets – they are malnourished. While every country faces the challenge of malnutrition, most of the data points to undernutrition of women and children living in rural areas in the Global South. Thus, overcoming malnutrition remains a key challenge of rural development.

Any form of malnutrition constitutes a violation of the human right to food (cf. Section Right to Food). Malnutrition includes undernutrition, caloric overnutrition, and micronutrient deficiencies. Undernutrition manifests itself either in wasting (too thin for height, acute malnutrition) or stunting (too short for age, chronic malnutrition), at different levels of severity, and also in combination. Caloric overnutrition leads to overweight/ obesity. People affected by the micronutrient deficiencies suffer from so-called hidden hunger – they consume enough calories but lack important micronutrients, especially Vitamin A, iron, iodine, or zinc. Malnutrition can have severe effects on bodily functions and impairs cognitive and mental development during childhood, work performance in adults, and the economic performance of an entire country. The cost that malnutrition causes in low-income countries through productivity losses has been estimated at 3 to 16

percent of their GDP, whereas the socio-economic gains of investing in nutrition are significant and lasting. Every dollar spent on nutrition interventions can generate a return of up to 16 USD.

The reasons behind the global burden of malnutrition are complex. The conceptual framework of Nutrition Security, originally developed by UNICEF, highlights intertwined drivers at three levels: immediate causes such as dietary intake and diseases; underlying causes including determinants concerning food security, income and gender inequality, inadequate care practices, health services, water, sanitation and hygiene (WASH), social protection, and education; and basic causes, such as the economic and societal structures which limit or deny access to resources and services for adequate nutrition, perpetuating poverty, and deepening existing inequalities and power imbalances. These structures are shaped by political framework conditions and policies. Furthermore, conflict and climate change negatively affect food availability and accessibility, while loss of biodiversity reduces nutrition-rich plant varieties.

Today, a considerable number of countries face a phenomenon known as the “triple burden of malnutrition” – acute and chronic undernutrition, and micronutrient deficiencies, co-existing with rising rates of overweight and obesity. An underlying global development is the nutrition transition – the rapid shift in dietary patterns from traditional diets of whole and minimally processed food to growing consumption of unhealthy and increasingly affordable ultra-processed foods and drinks that are high in sugar, salt, and fat. As a result, non-communicable diseases (NCDs) such as diabetes, hypertension, stroke, and certain cancers have proliferated.

Given the complexity of the problem, tackling malnutrition requires a multisectoral, multi-level, and systemic response.

During critical situations such as conflicts, disasters, or economic shocks, addressing acute malnutrition is crucial. Yet, this condition also persists in more stable situations or in so-called chronic nutrition emergencies. Here, targeted interventions are used to manage wasting, address specific micronutrient deficiencies, and ensure adequate food con-

sumption with the goal of preventing malnutrition-related deaths. Possible measures include early detection of acute malnutrition via screening and referral to health centers, or a period of treatment with “ready-to-use therapeutic food” (RUTF), and supplementation of specific or a mixture of other specialized nutrition products. Community Management of Acute Malnutrition (CMAM) programs are often part of national health systems, but coverage is still inequitable within certain regions, and population subgroups are left behind. In emergencies, food assistance is the most important immediate intervention to avoid malnutrition.

Programs focusing on acute malnutrition should be entry points that support rather than replace longer-term actions seeking to address underlying causes of poor nutrition. Chronic malnutrition (stunting), a consequence of a mixture of these causes, can be irreversible if not treated adequately and should therefore be prevented in the first 1,000 days (from conception until the first two years of life) through multisectoral interventions. This requires the promotion of optimal maternal, adolescent, infant, and young child feeding (MAIYCF) practices, linking nutrition and related health behaviors throughout the lifecycle. Meeting micronutrient needs is also particularly important during the first 1,000 days – for pregnant and lactating women, children and adolescent girls, both as a preventative and a curative measure. Controlling micronutrient deficiencies is based on a variety of approaches, like dietary diversity, supplementation, and food fortification. But administering micronutrients does not address the structural causes of malnutrition and should therefore be embedded in comprehensive national, regional, and local nutrition strategies.

Many factors affect the variety of food people have on their plates, and how they feed and care for their children. This includes cultural preferences and taboos, personal tastes, time constraints, and gender roles. Effective, long-term and contextualized social behavior change (SBC) programming encompassing all these aspects must therefore be at the core of nutrition interventions and integrated into other relevant sectors. It works well in group-based settings, for example through established mother or father groups, or by integrating nutrition-related content in farmer group trainings, school education, or community health clubs. It can shift patterns on food consumption and proper child feeding practices, adequate care, sanitation, and hygiene, and empower adolescents, women, and men to make better choices for themselves and their families.

Potential to improve access to food and food diversity for poor, rural households arises directly from subsistence and market-oriented farming of smallholder farmers (cf. Section Agriculture). Enhancing

farm and homestead production diversity (e.g. kitchen gardens, small-livestock rearing, and collection of wild or underutilized foods) can contribute to dietary diversity. Supporting income-generating activities (IGAs), in particular for women, can increase households’ cash resources and ability to invest in nutrition enhancing goods and services (cf. Section Rural Economy). The use of biofortified crops – which are rich in certain nutrients – represents an opportunity to further promote a diversified diet provided that the seeds are available and accessible, and the produce is accepted by the consumers. Agriculture policies and programs introducing biofortified staples should ensure that a diversified and sustainable agricultural production for balanced diets is equally promoted.

Water, sanitation and hygiene (WASH) related preventable infections such as diarrhea, environmental enteropathy, and intestinal worms result in decreased dietary intake and malabsorption of nutrients. This leads to undernutrition, which itself reduces resistance to infection, increasing the likelihood of repeated infection. Contextualized transformative WASH programs reflecting population-specific disease burdens and considering the multifaceted pathways for environmental pathogen exposure (e.g. through human feces or livestock at the homestead) are required (cf. Section WASH).

Commonly, women are the main caregivers for the family. In regions where women have a better socioeconomic position (education, access to resources, income, political representation, legal status), they eat healthier and can provide better for their families, which is reflected by lower levels of malnutrition in their children. Reducing gender disparities and strengthening women’s status and role in society are therefore among the most powerful levers to combating malnutrition (cf. Section Gender Justice). Empowerment measures should include adolescent girls in their roles as future mothers to prevent early marriages and thus additional maternal and child malnutrition.

As a powerful means of reducing poverty, social security systems have shown to improve household food availability and dietary quality among the chronically poor and/ or conflict affected populations. They can also protect the nutrition and health of poor farming households struggling with seasonality, climate shocks, or other crises (cf. Section Social Security). Nutrition objectives should be consciously included, e.g. by providing vouchers for nutritious foods, targeting nutritionally vulnerable groups with meaningful sizes of cash transfers, or promoting school feeding programs with healthy – if possible home-grown – meals.

In many countries, nutrition coordination mecha-

nisms have been created in high government offices. But lack of funding and improper budget allocation for multi-sectoral nutrition strategies remain as major challenges to delivering relevant nutrition interventions. In settings where governance or implementation is weak, there is a role for civil society actors and NGOs to strengthen or even support the setup of nutrition coordination processes, ensure representation of most affected groups, or train frontline workers in relevant sectors.

Since the Green Revolution, many countries in the Global South have focused on high-yielding staples and energy intake to combat undernourishment. To effectively address malnutrition, food policies must increase the availability and affordability of healthy foods, such as pulses, fruits and vegetables. This also requires investing more in research on production of locally adapted nutrient-rich food crops, preferably by making use of the knowledge of small-holder farmers.

Furthermore, an enabling environment includes secure access to land and use of communal natural resources, in particular for women and rural and indigenous populations (cf. Section Land).

Climate change, environmental degradation, and biodiversity loss threaten all the dimensions of nutrition security. At the same time, the current global food system is a major contributor to such threats. This calls for a transformation toward equitable, inclusive, sustainable, and resilient food systems (cf. Section Food Systems). Being part of such food systems would equip communities to respond well to challenges such as changing climate, extreme weather events, economic shocks, and violent conflict. It is only then that sustainable, healthy diets which reduce pressure on natural resources while being socio-culturally acceptable and economically accessible to all can be ensured for future generations.

Welthungerhilfe's involvement in relation to nutrition:

- Delivering modular and locally contextualized nutrition education sessions aiming at Social and Behavior change (SBC) for optimal nutrition behavior (breastfeeding, health, hygiene, cooking, and care practices).
- Promoting measures to increase the availability of diverse nutrient-rich foods at household level, through homestead gardens, sustainable use of wild or underutilized foods, biofortified crops, small animal rearing (e.g. livestock, poultry, fish), as well as nutrient-saving and hygienic food preparation, preservation, and processing, WASH interventions, and challenging gender roles.
- Identifying and treating acute malnutrition in collaboration with local government structures and other relevant partners through mass screening and referral support, also by developing innovative tools (e.g. Child Growth Monitor); delivery of supplementary feeding programs and supplementation of specific micronutrients; providing community-based interventions (e.g. nutrition camps).
- Supporting (homegrown) school meal programs coupled with nutrition education, improvement of school meal quality, and nutrition school gardens.
- Linking Agriculture and Natural Resource Management plus WASH towards Nutrition Security (LANN+) by investing in sustainable agriculture, sustainable management of natural resources, promoting the responsible use of underutilized and/ or wild foods, WASH interventions, and income generation linked to a modular nutrition education curriculum.
- Building capacities of communities in nutrition-sensitive participatory community planning, informing them on their Right to Adequate Food, empowering them to claim better delivery of public services, and advocating to improve policy frameworks, thus ensuring long-term systemic changes.
- Establishing Nutrition Smart Communities – a systemic approach that combines four interlocking strategies: (1) foster behavior change at household level; (2) strengthen and support community-based institutions; (3) activate and improve nutrition relevant services at community level; (4) promote community-based advocacy for the progressive realization of the Right to Adequate Food.

Welthungerhilfe's demands related to nutrition:

- Countries of the Global South must implement Governments as duty bearers must work consistently for the realization of the Right to Adequate Food and Nutrition.
- All actors must focus on improving the quality of nutrition by promoting sustainable healthy diets and prioritizing nutritionally vulnerable groups, in particular children during their first 1,000 days.
- Governments and donors must ensure that sufficient budgets are allocated for nutrition through multisectoral action plans that include the strengthening of nutrition essential services and high coverage of quality SBC interventions.
- Governments and donors must accelerate the implementation of multisectoral plans and ensure they are thoroughly monitored by transparent and data-driven accountability mechanisms.
- Governments must ensure that food policies – from rural development and agriculture to food assistance and fiscal policies – increase the availability and affordability of healthy foods and include nutrition as an explicit objective, also in non-nutrition-specific sectors.
- Governments and donors should scale up nutrition-sensitive social protection programs to prevent poor households from falling into a food and nutrition crisis because of external shocks.
- All actors should ensure that nutrition security programs take at least a gender-responsive approach and address the causes and drivers of gender inequality.

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This section is an excerpt of the WHH Position Paper Rural Development. Please also consult all other sections at www.welthungerhilfe.org/position-paper-rural-development

Bonn/Berlin July 2022

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