Action to Improve Nutrition
Making ICN2 count over the next decade and beyond

Key Actions for the Decade of Action on Nutrition

In order to successfully guide, improve and enhance recommendations made in the Framework for Action (FFA), member states must prioritise the following additional key actions throughout the Decade of Action on Nutrition and the formulation of and support to National Plans of Action for Nutrition (NPANs):

- Enhance political commitment and achieve accountability in process ahead by ensuring social and civil society participation in planning, implementing, monitoring and evaluating global, regional and national nutrition strategies, policies and plans.

- Identify specific national and collective contributions by integrating the vision and commitments of the Rome Declaration and FFA into the Post-2015 Development Agenda and support the agreement of a new global goal on food and nutrition security and related targets that will sustainably eradicate undernutrition.

- Frame the Decade of Action on Nutrition around respecting, protecting and fulfilling human rights — such as the right to adequate food, safe water, sanitation and health, and other economic, social and cultural rights.

- Ensure comprehensive, aligned, coordinated and integrated multi-sectoral nutrition strategies through improved and costed NPANs in the three broad underlying areas: food, health and care environments and a significantly better coordinated UN system supporting the regional initiatives, the WHA, CFS and SUN.

- Urgently commit to improve coverage for treatment and prevention of malnutrition, by championing integrate Community-based Management of Acute Malnutrition (CMAM) into child health services, ensure free access to Universal Health Coverage (UHC) and take every action to achieve the 2025 World Health Assembly (WHA) nutrition targets on or before deadline.

- Build NPANs on an acknowledgement of the importance of women’s rights and empowerment as a root cause and cross cutting issue to tackle undernutrition.

- Focus the Decade of Action on Nutrition and NPANs so that agricultural policies are primarily focused on small-scale and family farmers and scale-up support for homestead gardens and livestock rearing for rural and urban communities.

- On both national and international levels member states, in collaboration with the ‘One UN’ system, must commit to a binding regulatory framework to protect vulnerable groups from possible conflicts of interest introduced by powerful economic actors and review Public-Private Partnerships (PPP) so that they do no harm.
Executive Summary

The Second International Conference on Nutrition (ICN2) has generated two main outcome documents: i) the high-level political ‘Rome Declaration on Nutrition’ and ii) a global policy ‘Framework for Action’ (FFA), intended to provide “a set of policy options and strategies which governments, acting in cooperation with other stakeholders, may incorporate, as appropriate, into their national nutrition, health, agriculture, development and investment plans, and consider in negotiating international agreements to achieve better nutrition for all.”

Historic opportunity

This paper assesses the FFA and presents additional key actions that ACF International believes must be carried through into implementation of the FFA and the proposed follow-up ‘Decade of Action on Nutrition’ in order to successfully guide, improve and enhance National Plans of Action for Nutrition (NPANs).

Co-led by the World Health Organization (WHO) and UN Food & Agriculture Organization (FAO), ICN2 presented an historic once-in-a-generation opportunity that can only now fulfill its ambition to eradicate malnutrition in all its forms if the FFA provokes a mobilization of the necessary political leadership, commitment, action and resources at the scale and intensity required at national and international levels. To this end, ACF believes the UN General Assembly (UNGA) should endorse the ICN2 Rome Declaration and FFA, as requested by member states, and closely monitor, scrutinize and oversee implementation of the FFA. The UNGA should also declare a Decade of Action on Nutrition from 2016 to 2025 with sufficient resources for its success.

What actions are required?

Given the FFA is voluntary in nature, both how the actions in it are seen and acted upon and what other action is required are critical to ensure greater alignment, coherence, integration and coordination of efforts by member states, UN agencies and civil society organisations (CSOs) to eradicate malnutrition in all its forms, for the Decade of Action on Nutrition to succeed and for the UN Post-2015 Sustainable Development Goals (SDGs) to be truly transformative for nutrition.

Every effort should now be made to achieve by 2025 the six existing World Health Assembly (WHA) targets on treating and preventing wasting, stunting and anaemia amongst women of childbearing age. The WHA are the only comprehensive set of global nutrition targets that currently exists.

The FFA can also underpin the proposed Post-2015 SDG to end hunger, achieve food security and improve nutrition by 2030, especially if the potential of its progressive content is realized in action by governments and others, and the fuller agenda for action set out here, is also taken up in implementation.

Member states must follow up on their promise to integrate the vision and commitments of the Rome Declaration and FFA into the Post-2015 Development Agenda. This means agreeing a new global goal on food and nutrition security with a target that has specific new 2030 levels of ambition on wasting and stunting and adopting targets in all the other goals that will help sustainably eradicate malnutrition in all its forms.

Integrating policies

Scaling up, integrating and coordinating policies to tackle malnutrition in all its forms is urgently required. Despite some gains and progress over the last decade in some regions, the scale of the challenge is huge, and rapidly evolving. On undernutrition (see Box1), as the Rome Declaration sets out, an estimated 805 million people suffer from chronic hunger. Wasting affects 52 million children under five, while 26% of the world’s young children, some 162 million, are stunted, and 101 million under-fives are overweight.

Over 2 billion people suffer from one or more micronutrient deficiencies (mainly vitamin A, iron, iodine and zinc), while 1.4 billion people are overweight, of whom 500 million are obese. Overall, some 45 percent of all child deaths were attributable to malnutrition in 2011, while an estimated 1 million children under five die from severe wasting each year (see Annex 1). Most countries are burdened by multiple forms of malnutrition – known as a ‘triple burden’ of malnutrition – which can coexist within the same country, household or individual. As food

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Executive Summary

markets globalize, incomes rise, urbanization increases, climate change hits production, environments are degraded, and diets shift towards eating more meat, diary, sugar, salt, fatty and processed foods, the FFA is right to acknowledge that various forms of malnutrition increasingly coexist, and it is right to advise they are addressed comprehensively.

However, progress in tackling malnutrition since ICN1 in 1992 has been weak and patchy because of inadequate commitment and leadership, financial constraints, weak human and institutional capacities, depletion of natural resources exacerbated by climate change and a lack of appropriate accountability mechanisms. The world is much wealthier than it was when ICN1 was held and the knowledge and evidence base of what works and what action is needed is far more advanced. ACF is therefore disappointed that the FFA and the Political Declarations are not more ambiguous and precise.

National Plans of Action for Nutrition

The Rome Declaration on Nutrition ambitiously declares “a common vision for global action to end all forms of malnutrition.” The FFA underlines that “governments have primary responsibility for taking action at country level.” The onus is now on affected governments to urgently cost and assess the recommended policies and actions in relation to national needs, conditions and priorities, and decide – informed by the ongoing and active participation of civil society and social movements – on the additional action to be taken in NPAWs. As highlighted in the first ever Global Nutrition Report national external assistance funding for nutrition is still very low compared to the needs. Donor nations must help to identify innovative and increased funding options for nutrition to sustain the realization of the right to adequate food.

Follow up to ICN2 is now essential

Agreed by over 190 member states, the FFA contains some high levels of ambition, some sensible policy options, and some major omissions. ACF finds it regrettable that more specific targets and accountability commitments did not find their way into the final outcome documents. We believe ensuring the following additional options and approaches are adopted through the implementation and follow up to ICN2 is now essential.

This document is informed by ACF’s work with some of the poorest rural communities in over 45 countries in Asia, Africa and Latin America – in emergency and non-emergency situations – and extensive field research, policy analysis and advocacy on addressing wasting and tackling undernutrition.

UNDERNUTRITION CONSEQUENCES

Wasting and other forms of undernutrition in the crucial first 1,000 days of a child’s life from conception to their second birthday – the nutrition ‘window of opportunity’ – can have profound, irreversible and intergenerational consequences, and for millions of children it means they are forever stunted and their potential is destroyed.11

Acute malnutrition puts children at greater risk of death and severe illness due to common childhood infections, such as diarrhea, pneumonia, measles, malaria and meningitis.12 A severely wasted child, for example, faces a nine times higher risk of dying than a healthy child.13

Undernutrition can negatively affect physical growth and cognitive development, and stunting is associated with poor school performance and achievement.14 Micronutrient deficiencies such as vitamin A deficiency can cause blindness and night blindness, calcium and iron deficiency anemia contribute substantially to maternal death, iodine deficiency can cause goiter, and zinc deficiency is associated with stunting and increased diarrhea and pneumonia.15

Undernutrition in early life is also linked to increased susceptibility of obesity in adulthood and developing non-communicable diseases.16

As a result of impaired potential, it is estimated undernourished individuals lose more than 10 percent of lifetime earnings, high-burden countries lose approximately 2-3 percent of GDP, and globally malnutrition in all its forms may impose costs of $2.8-3.5 trillion, equivalent to 4-5 percent of global GDP.17

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1 FAO (2013) The State of Food and Agriculture, FAO: Rome
2 http://globalnutritionreport.org
7 FAO (2013) The State of Food and Agriculture, FAO: Rome
Overview

Multi-dimensional and rights-based approach
Overall, the FFA appears too heavily weighted towards a food systems response (recommendation 8 to 16) without sufficiently highlighting the importance of a multi-dimensional response or acknowledging that nutritional status is influenced by three broad underlying factors or causes: food, health and care environments.\textsuperscript{18} Instead, follow up to ICN2 needs to further emphasize that malnutrition is driven by a complex mix of inappropriate health systems, agricultural and food systems, as well as poor water and sanitation, care practices and social inequalities – and requires a multi-dimensional response which looks beyond immediate causes.

The FFA refers to the Right to Adequate Food only in its recommended actions in international trade and investment. ACF believes that up-front framing of the implementation of FFA around respecting, protecting and fulfilling human rights – such as the right to adequate food, rights to safe water and sanitation, reproductive and women’s rights, and children’s rights to health and an adequate standard of living – should be a central pillar and core operating principle of the Decade of Action. Doing so legitimizes core human rights norms and principles, such as transparency, accountability, non-discrimination and participation – and demands a particular focus on the most vulnerable, excluded and marginalized communities and the effective participation of those most affected by malnutrition.

Such an approach allows a specific focus on the obligations and duties of governments under internationally agreed treaties and conventions, and enables different actors to hold governments accountable for legal duties resulting from key agreements such as the International Covenant on Economic, Social and Cultural Rights, which is now ratified by 162 UN member states\textsuperscript{19} and the UN Convention on the Rights of the Child Article 24 covers child malnutrition\textsuperscript{20}.

Women’s empowerment
The FFA highlights the role of women in its recommendations (44 to 48) on improving health systems and in areas that are specific to women, such as pregnancy and breastfeeding. The implementation of the FFA, however, must place far greater emphasis on women and gender. Women’s low education levels, unequal social status, widespread discrimination can negatively affect their nutritional status and the nutrition of their children.

The traditional gender-blind approach to nutrition is not neutral in its effects, and instead exacerbates inequalities by reinforcing the traditional roles of women and the dependence they face. Members should be guided explicitly on the importance of gender-sensitive nutrition targets and indicators, and the need for sex-disaggregated data for monitoring and evaluation (M&E). Member states must ensure an explicit commitment to empower women’s status as part of their NPANS including greater efforts to address the legal, social and economic barriers resulting in unequal access and control of productive resources.\textsuperscript{21}

Wasting
Importantly, tackling wasting is highlighted as a distinct issue in the FFA. While it is right that the FFA recommends (#34) that policies and actions are adopted and funding is mobilized “to improve coverage of treatment for wasting, using the community-based management of acute malnutrition approach [CMAM] and improve the integrated management of childhood illnesses”, the need for urgent action to scale up such proven and highly successful interventions in high-burden countries should be emphasized in line with the FFA recommendation (25 – 28) for strong and resilient health systems.

The integration of nutrition treatment into non-emergency child health services is very much welcomed by ACF but this is generally poorly understood. Governments, in line with the FFA, must promote CMAM beyond time bound emergency phase, and coverage must be significantly increased with full and free access to essential nutrition services for all affected communities in order to avoid the risk of child deaths.

Because they need to be treated differently, members should also clearly differentiate between severe acute malnutrition (SAM) and moderate acute malnutrition (MAM). More widely, members should establish national wasting targets and initiate targeted nutrition-specific interventions to tackle both SAM and MAM separately but within comprehensive national strategies.

\textsuperscript{19} For International Covenant on Economic, Social and Cultural Rights, see: www.ohchr.org/en/professionalinterest/pages/cescr.aspx
\textsuperscript{21} FAO (2011) The State of Food And Agriculture 2010-11, Women in Agriculture: Closing the gender gap for development, FAO: Rome development,

www.acf-international.org
Overview

To this end, members should explore successful approaches to preventing and treating MAM at district and primary health care levels, such as through Integrated Management of Childhood Illness (IMCI) and Integrated Community Case Management (ICCM) approaches. In many circumstances, MAM can be tackled through food-based approaches, cash-vouchers or cash transfers. Products should only be used in very specific or limited circumstances.

Alongside wider efforts to significantly strengthen health care systems at all levels with the preferred aim of ensuring rather than merely promoting Universal Health Coverage (UHC), members should further ensure that these health system-based approaches to tackling wasting—which include widespread community sensitization, mobilization and participation to facilitate early identification, detection and referral to the correct level of care—are integrated into longer-term NPANS, rather than being relegated to shorter-term emergency or disaster-focused initiatives, as they often are at present.

Smallholder agriculture & homestead gardens

Based on ACF’s analysis on the effective promotion of sustainable food systems and healthy diets, we stress that the follow up to ICN2 needs to go further than the current FFA where small holders are seen only as a force to: strengthen local food production and processing (recommendation 9). This is a far too limited assessment of the role small holders play in the global food system in promoting a sustainable food system. On this issue a successful Decade for Action must extend such a commitment and incorporate a wider, more socially, culturally, politically and ecologically sustainable vision of smallholder-focused agriculture and emphasize the centrality of small-scale and family food producers as the main investors in agriculture and key actors and drivers in local food systems.22 Members should clearly aim to focus support for low-input ‘agro-ecology’ approaches and should specifically promote nutrition-sensitive homestead gardens and small-scale livestock rearing for smallholders and vulnerable communities as effective ways to increase year-round access to nutrient-rich foods and more diverse diets.

Improve Accountability

Recommendation 58 of the FFA stipulates rightly that national governments establish nutrition targets and intermediate milestones, consistent with the timeframe for implementation (2016-2025). ACF believes that achieving accountability in the follow up to ICN2 is vital. It can only be established through a robust double accountability system and an explicit recognition of the crucial role and strategic importance of the active participation of civil society organizations (CSOs) and social movements—in particular by those representing or working with communities most affected by malnutrition—in planning, implementing and monitoring and evaluating national, regional and global nutrition strategies, policies, plans and programmes.

We regret that, thus far, none of the three recommendations on accountability envision encouraging the inclusion of consistent and transparent civil society inclusion on this issue. We support the importance of recommendation 1 of the FFA: Enhance political commitment and social participation for improving nutrition at the country level through political dialogue and advocacy and look to member states to have a working assumption that civil society is not just valuable to this dialogue and the establishment of NPANS but essential.

ACF agrees that the global and national policy space must be protected, in all phases and at all levels, against possible conflicts of interests posed by powerful economic actors, including multinational corporations. The Rome Declaration and FFA overlook this key issue, and instead member states should design, implement and enforce robust rules and regulations on conflict of interest and should accordingly review all nutrition-related public private partnership initiatives (PPPs) and be prepared to revise or terminate problematic ones if necessary.

Undernutrition, together with over-nutrition, is one of the two forms of malnutrition. Undernutrition is the outcome of insufficient food intake and repeated infections.\(^\text{23}\) It describes a range of conditions that are classified as:

- **WASTING OR ACUTE MALNUTRITION**
  - [low weight-for-height]
- **STUNTING**
  - [low height-for-age]
- **UNDERWEIGHT**
  - [low weight-for-age]
- **MICRO-NUTRIENT DEFICIENCIES**
  - [lack of vitamin or mineral required to be healthy]

Undernutrition can potentially affect all categories of the population but especially vulnerable groups, such as children under five, pregnant and lactating women, and people living with a disease or chronic illness. Undernutrition perpetuates itself in a vicious cycle that lasts beyond the life cycle of an individual.\(^\text{24}\) Poor nutrition often starts in utero and extends, particularly for girls and women, well into adolescence and adult life. Growth failure in early life is likely to be passed to the next generation.\(^\text{25}\) Undernourished girls have a greater likelihood of becoming undernourished mothers, who in turn have a greater chance of giving birth to low birth weight babies who are unlikely to catch up on lost growth, perpetuating an intergenerational cycle.\(^\text{26}\)
From Commitments to Action

BACKGROUND

The FFA acknowledges that progress in reducing hunger and undernutrition since ICN1 in 1992 has been ‘uneven’ and ‘unacceptably slow’ although the long-term international failure in tackling wasting with all the resulting human and associated costs is not explicitly acknowledged.

Wasting is a condition where a child’s weight drops to such a low level that they are at risk of dying, but this gravely life-threatening condition has been neglected and under recognized as a development issue and is often sidelined as a short-term humanitarian-related concern. As a result, progress in tackling wasting has been shamefully slow, and decreased by only 11 percent since 1990 – down from 58 million to 52 million amongst children under five – whereas stunting declined by 36 percent and underweight declined by 37 percent over the same period.27

The vast majority of children affected by wasting are in South and Southeast Asia and sub-Saharan Africa. One in six children in South Asia and one in 10 children in sub-Saharan Africa were wasted in 2011, while India has the highest burden, with 25 million wasted children.28 Contrary to popular belief, the majority of wasting occurs in countries not affected by humanitarian emergencies, such as India, Nigeria, Pakistan and Indonesia.29 Overall, 90 percent of children suffering from severe wasting are unable to access the treatment they need.30

Recognising this historic failure is imperative, as is recognising that nutrition status is a complex and truly multi-dimensional issue. The United Nations Children’s Fund (UNICEF) highlight that optimal nutritional status occurs when children have access to affordable, diverse, nutrient-rich food; appropriate maternal feeding and child-care practices; access to adequate health services; and access to a healthy living environment, including safe water, sanitation and good hygiene practices.31

Achieving ‘nutrition security’ is broader than ‘food security’ and means ongoing access to the basic elements of good nutrition – a diverse diet, safe environment, clean water and sanitation, adequate healthcare, and the knowledge needed to ensure a healthy, sanitary and active life – and the term recognizes that nutritional status is dependent on a broad range of factors.32

ICN2 follow up should stress that malnutrition is due to poor food and health systems, as well as poor care practices and unhealthy living environments – in particular by strengthening its recommended actions for sustainable food systems promoting healthy diets (page 3 and following). Addressing such multiple causes requires cross sectoral integration and coordination amongst a range of inter-related sectors and ministries – including food and agriculture, health, water and sanitation, gender, education, finance, social protection, economic development, environment, trade and investment, planning, information and consumer affairs.

Additional essential actions for 2015 and beyond

- NPANs must build on an acknowledgement that malnutrition is due to poor food and health systems, poor care practices and unhealthy environments
- Acknowledge that failure in tackling wasting since ICN1 by setting specific national target in line with the WHA 2025 target

From Commitments to Action

THE PURPOSE & TARGETS OF THE FFA

While it is right that the FFA accountability (recommendation 58) is aligned with WHA global nutrition and NCD targets to 2025 – such as reducing childhood stunting by 40 percent, reducing childhood wasting to under 5 percent, and halting the increase of obesity amongst adolescents and adults – governments should:

- Agree goals and targets in the UN Post-2015 Development Agenda that will support the sustainable eradication of all forms of malnutrition with new 2030 specific targets on stunting and wasting.

- Prepare for implementation of action within the context of the SDGs and establish reviews that will address how the FFA timeframe to 2025 will transition to further accelerated action to deliver on related SDGs between 2026 and 2030.

Greater alignment of global malnutrition goals and major initiatives requires greatly enhanced UN agency coordination including under the proposed Decade of Action on Nutrition – and the FFA should reflect this key objective. In the coming months and years member state mechanism and national governance must ensure improved and accountable planning and governance of NAPNs. At the same time high-level political leadership and the commitments must sustain the ambitions of the Rome Declaration on Nutrition.

Alignment of ICN2 follow up with the SDGs, the UN Secretary General’s ‘Zero Hunger’ Challenge and the 53 country-wide Scale Up Nutrition (SUN) Movement, the REACH initiative (Renewed Efforts Against Child Hunger and undernutrition), the WASH Initiative (Water, Sanitation and Hygiene) and Health in All Policies (HiAP) and WHA targets requires enhanced coordination of key UN agencies such as WHO, FAO, UNICEF and World Food Programme (WFP) at the country, regional and global levels, and the strengthening of mechanisms such as the national-level ‘One UN’ system, the Global Cluster Coordination Groups and key global fora, such as the UN Standing Committee on Nutrition (UNSCN) and the food and nutrition-sensitive focused multi-stakeholder Committee on World Food Security (CFS).

Additional essential actions for 2015 and beyond

Ensure enhanced UN alignment and coordination through the ‘One UN’ system and improved global governance on hunger and nutrition

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35 For Scaling Up Nutrition (SUN) Movement, see: www.scalingupnutrition.org
From Commitments to Action

CREATE AN ENABLING ENVIRONMENT FOR EFFECTIVE ACTION

We agree with the FFA that eradicating malnutrition in all its forms requires a sustained enabling policy environment and vastly improved governance across food, agriculture, health, water, sanitation, gender, education and related systems. To this end we hope that the spirit of an intent to “enhance political commitment and social participation” means civil society will play a full part in the dialogue.

However, an up-front recognition of the inter-related and indivisible human rights to adequate food, the right to health, safe water and sanitation, women’s sexual and reproductive rights and children’s right to health and an adequate standard of living guaranteed under the UN Convention on the Rights of the Child, and other key economic, social and cultural rights, should be a central pillar, core rationale and enabling operational framework for the implementation of the FFA.

Such rights-based UN legal covenants and obligations are entirely supportive of the principle of ‘no one left behind’, and the human rights framework can be highly enabling because it compels state bodies to focus efforts and available resources on the most vulnerable and marginalized populations – such as pregnant and lactating women, children, widows, the elderly, disabled and tribal, pastoralists, fisherfolk, forest dwellers and indigenous peoples – and it is legally and operationally based on the core principles of transparency, accountability, participation and nondiscrimination.

Action Against Hunger research and analysis from successful nutrition interventions in a wide range of countries, including Bangladesh, Brazil, Burkina Faso, Kenya, Malawi, Mozambique and Peru, identifies the following key recommendations for creating a successful enabling environment to tackle undernutrition and wasting. Implementation should be built on:

- Adopting a truly multi-sectorial approach
- Securing high-level political leadership and a high political impetus for eradicating malnutrition
- Ensuring civil society ownership and participation – especially involving the most affected communities – in planning, implementing and monitoring and evaluating nutrition policies, plans and programmes
- Adopting a multi-phased approach – combining a ‘twin-track’ of short and long-term integrated ‘nutrition-specific’ and ‘nutrition-sensitive’ approaches
- Ensuring effective institutional coordination and long-term commitment to scaling-up actions with the highest track record of reducing undernutrition
- Continuity of relevant financial investment from host governments and international donors, especially where continued budget support is required for policy effectiveness.

Three broad factors shape enabling environments; knowledge and evidence, politics and governance, and capacity and resources. We agree with the FFA on the need for high-level political leadership and the commitments of the Rome Declaration on Nutrition [to] be compiled jointly by FAO and WHO, in close collaboration with other United Nations agencies, funds and programmes and through a multi-sectoral approach.

A multi-sectoral approach identifies malnutrition as a priority public health issue and embeds nutrition goals and targets into policies, strategies and programmes across key ministries under NPNAs. The World Bank says economic growth alone is not enough to reduce undernutrition, and integrated planning, collaboration and complimentary interventions with explicit nutrition-focused targets, indicators and timelines are required in a range of key sectors, including: agriculture and the food system;

De Schutter (2011) Report submitted by the Special Rapporteur on the right to food, Olivier De Schutter, Human Rights Council, UN General Assembly, 26 December 2011, A/HRC/19/69


Effective coordination should be cross-ministerial on the horizontal axis and extend to provincial, municipal, district, local and village levels on the vertical axis. Strong political leadership helps embed nutrition objectives into key ministries, bodies and institutions, and high quality household nutrition survey data plus clear targets, indicators, milestones and timelines, and a strong M&E culture are vital to track the impact of policy actions, and incentivize and improve their implementation.

Securing a high political profile is vital enabling factor for success. Generating political impetus through grassroots participation and support from civil society organizations and social movements alongside high-level political leadership – such as shown by President Lula da Silva, who led and championed Brazil’s remarkably successful right to food-based ‘Fome Zero’ (or ‘Zero Hunger’) campaign – helps generate momentum and forge integration.

Food and nutrition councils
Besides establishing new multi-sectoral governance mechanisms, FFA follow up should recommend the establishment of civil society-focused national food & nutrition security councils both under the recommended actions to create an enabling environment for effective action as well as in the accountability section. This should be based on Brazil’s successful model council, CONSEA, which provides vital support, monitoring and policy advice, and consists of two-thirds civil society members and one-third government representatives.

Furthermore, the implementation should emphasise the key strategic importance of active CSO and social movement participation at all levels in planning, supporting, implementing, monitoring and evaluating nutrition strategies, plans and programmes. Members should encourage and support wide and vibrant civil society participation in national and global nutrition policy debates throughout the proposed Decade of Action on Nutrition.

Equity focus
Members should place a greater emphasis on equity and highlight the importance of creating an enabling environment that addresses the profound structural barriers and the needs of vulnerable, marginalized and excluded people. Women and children are more vulnerable to nutritional deficiencies, and special efforts are required to address the inequities they face – such as widespread gender discrimination. Collecting sex-disaggregated data and strengthened data gathering and nutrition surveillance systems should be recommended.

Additional essential actions for 2015 and beyond

- Incorporate human rights and adopt a rights-based approach at national and international levels.
- Encourage high-level political leadership under the umbrella of the UNGA for eradicating malnutrition in all its forms.
- Ensure multi-sectoral and multi-phased approach – including ‘nutrition-specific’ and ‘nutrition-sensitive’ interventions become the international default strategy to malnutrition.
- Governments and the UN to ensure active CSO and social movement participation and promote civil society-focused national food and nutrition ‘councils’.
- Ensure at all levels effective institutional coordination and long-term commitment to scaling-up actions with the highest track record of reducing undernutrition.

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40 FAO (2013) The State of Food and Agriculture, FAO: Rome
41 Brazil’s CONSEA food and nutrition security council stands for Conselho Nacional De Segurança Alimentar e Nutricional
42 FAO (2013) The State of Food and Agriculture, FAO: Rome
From Commitments to Action

SUSTAINABLE FOOD SYSTEMS
PROMOTING HEALTHY DIETS

The FFA endorses a food system approach as key to improving diet and nutrition, although linkages from the food system to nutritional outcomes are often indirect – mediated through incomes, prices, knowledge and other factors. Food systems – from production to processing, storage, marketing, retailing and consumption – determine whether the food people need for good nutrition is financially and geographically accessible, acceptable and of adequate quality and quantity.

Centrality of smallholders
There are many food systems (many of which co-exist), but the FFA fails to highlight, however, that three quarters of hungry people are smallholders, and that an estimated half a billion smallholders cultivate 570 million small farms of two hectares or less which support 1.5 billion people and which, according to FAO, produce 80 percent of the food supply in developing countries. The FFA highlights this group only once (in its recommendation on trade) which is regrettable and must be subject to further discussions. Member states should address agricultural models and recognize a majority food system built on local food and agricultural systems based on small-scale and family producers, agro-biodiversity, deep ecological and cultural foundations, native seeds, traditional knowledge, local markets and value chains, and sustainable use of natural resources.

Further recognition should be given to the place of local food systems which currently represent the majority of food value chains in developing countries. For example, only 10% of all food consumed in Africa is packaged food and traditional food distribution networks remain the primary channel for nutrient-rich foods such as fruits, vegetables and livestock products. Policy hence needs to account and adapt to these realities by supporting existing and functioning livelihood systems. Members must take the unique opportunity of ICN2 and its follow up to reshape food systems to improve health and nutrition outcomes and set out a vision on how to maximize the contribution of low-income smallholders – the majority of whom are women – to a more nutritious, low-carbon and socially and environmentally sustainable food system which ensures greater access to healthy, safe, diverse, culturally acceptable and nutritious food for vulnerable rural and urban communities.

To this end, ICN2 implementation should highlight support for low-input ‘agro-ecology’ and recommend that agricultural policies should foremost be at the service of small-scale and family farmers and incorporate social, ecological, cultural and political dimensions.

Some agricultural models driven by rapid globalization of trade and international food markets – such as high-input commercial agriculture, out-grower contract farming, or export-oriented smallholder cash crop production – can undermine nutritional status amongst smallholders and agricultural labourers, and serious associated threats are posed to smallholders by the widespread and growing phenomenon of ‘land grabbing’.

In order to safeguard access to essential productive resources – such as land, forests and artisanal fisheries – member countries should go further than the FFA and should urgently protect smallholders from land grabbing by adopting and implementing the Voluntary Guidelines on the Responsible Governance of Tenure of Land, Fisheries and Forests into domestic law, rules and practices.

Homestead gardens
The World Bank identify five pathways which link agriculture to nutrition, and two pathways in particular that empower women through targeted interventions and increased year-round availability of micronutrient-rich food for household consumption show the most positive nutrition impacts to date.

43 FAO (2013) The State of Food and Agriculture, FAO: Rome
47 FAO (2011) Save and Grow, A policy maker’s guide to the sustainable intensification of smallholder crop production, FAO: Rome
48 De Schutter (2011) Report submitted by the Special Rapporteur on the right to food, Olivier De Schutter, to the UN Human Rights Council, 26 December 2011, A/HRC/19/59
49 FAO (2013) The State of Food and Agriculture 2013: food system for better nutrition, FAO: Rome
51 The five pathways linking agriculture to nutrition are: i) increasing overall macroeconomic growth, ii) increasing access to food by higher production and decreased food prices, iii) increasing household income through the sale of agricultural goods, iv) increasing nutrient dense food production for household consumption, v) empowering women through targeted agricultural interventions. From: World Bank (2013) Improving Nutrition Through Multisectoral Approaches, World Bank: Washington, DC
52 World Bank (2013) Improving Nutrition Through Multisectoral Approaches, World Bank: Washington, DC
FAO and other experts say projects that support the diversification of home and smallholder production hold potential for improving consumption of a variety of foods and reducing micronutrient deficiencies. Small-scale home gardens, homesteads, backyard and community gardens – which promote year-round production and cultivation of diverse local and traditional varieties of micronutrient-rich fruit and green leafy vegetables, plus fish, small livestock, milk and eggs – can increase dietary diversity and impact micronutrient deficiencies, such as vitamin A status. Successful Homestead Food Production (HFP) programmes have improved food security for 5 million poor people in Bangladesh, significantly reduced anemia amongst infants aged 6 months to 59 months, and reduced the risk of childhood night blindness. Costing about $8/household per year and often working with women’s groups, the approach has also been adopted in Cambodia, Nepal, Niger and the Philippines, and research shows a nutrition effect is more likely when interventions target women and include women’s empowerment activities, such as improving knowledge and skills through behaviour change communication, or promotion of women’s increased control over income from the sale of extra produce.

Members should go further than the FFA and invest in scaling-up support for homestead gardens and small-scale livestock rearing for vulnerable rural and urban communities.

Climate change

Finally, food systems both contribute to greenhouse gas emissions (GHG) and are increasingly vulnerable to climate change and increases in extreme weather events, rising sea levels and changing precipitation levels in high burden countries. With rising environmental uncertainty, the resilience of food systems is becoming crucially important. Food systems and diets are likely to be affected through reduced crop productivity and changing water availability, plus increasing commodity price volatility. As a result, some experts predict rates of undernourishment in Sub-Saharan Africa could increase by 25-90 percent by 2050 due to climate change.

Follow up should urgently ensure that smallholder-based agricultural models contribute to the reduction of GHG emissions and adapt to the adverse impacts of climate change.

Additional essential actions for 2015 and beyond

- Ensure national, regional and global agricultural policies protect and priorities small-scale and family farmers and incorporate social, ecological, cultural and political dimensions
- National governments and regional initiatives must protect smallholders from land grabbing by adopting, implementing and enforcing the Voluntary Guidelines on the Responsible Governance of Tenure of Land, Fisheries and Forests into domestic law and practices
- Scale-up support and research on government and UN level for homestead gardens and small-scale livestock rearing for vulnerable rural and urban communities
- Urgently agree binding treaties for smallholder-based agricultural models which contribute to GHG reductions and adapt to climate change

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Whilst the Rome Declaration acknowledges that ‘trade is a key element in achieving food security and nutrition and that trade policies are to be conducive to fostering food security and nutrition for all’, the ICN2 outcome documents do not acknowledge that excessive market concentration and globalization of food supply chains and markets through World Trade Organization (WTO), free trade (FTAs) and bi-lateral investment agreements (BITs) and rules can close down national ‘policy space’ and negatively affect local smallholder-based food systems, land tenure rights and equitable access to healthy and diverse diets and affordable water and healthcare systems.

Aggressive agricultural liberalization measures can lead to harmful export food dumping and subsidized food import surges, increased land grabbing, and a shift in unhealthy diets for low-income communities – known as the ‘nutrition transition’ – towards cheaper, heavily-marketed, staple-rich, micronutrient-poor diets, with less dietary diversity and a higher proportion of harmful sugar and salt. The transmission of devastating staple food price volatility from global to domestic markets can exacerbate hunger and undernutrition levels, while domestic nutrition security safety nets, market stabilizers and shock absorbers, such as national food reserves, public stock holdings, anti-dumping measures and government procurement policies may be prohibited or challenged under international trade rules.

In addition, the adoption of sui generis WTO rules on intellectual property rights on crops and seeds can lead to the marginalization of local seeds and land races, higher seed prices, and corporate control of domestic seed markets.

Governments – at global and national levels – have a responsibility to ensure food markets promote and respect the right to food and that the activities of powerful economic actors, such as transnational corporations, are regulated to prevent abuses of power, land and water grabs, the promotion of junk food and infringements of human rights, such as rights to food, health, water and sanitation.

Governments should ensure key trade organizations, such as the WTO, plus relevant UN agencies, review all key trade and bilateral investment rules and ensure they are consistent with the full realization of human rights – such as the right to food and health – and promote the global goal to eradicate all forms of malnutrition.

Additional essential actions for 2015 and beyond

- **Ensure International trade and investment rules and agreements are reviewed for coherence with the full realization of economic, social and cultural rights**

- **On national and international levels the Decade of Action must provide frameworks that protect vulnerable groups from possible conflicts of interest introduced by powerful economic actors and Public-Private Partnerships (PPP) need to be reviewed to do no harm.**

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60 De Schutter (2011) Report submitted by the Special Rapporteur on the right to food, Olivier De Schutter, Human Rights Council, UN General Assembly, 26 December 2011, A/HRC/19/89

We agree that multi-sector strategies promoted by the FFA should be backed by strong nutrition-sensitive education and sensitization as suggested in recommendations 19 to 21. Based on national dietary guidelines, we are pleased that one of the FFA recommendations aims to build capacity for non-nutrition specialist field staff – such as frontline workers, social workers, agricultural extension workers, teachers and health professionals – and we believe that government staff in central ministries should also be targeted by such training at both local and national levels.

Our research on nutrition-sensitive agriculture in Burkina Faso, Kenya and Peru, for example, shows that non-health sector central ministries often ignore the role they have to play regarding nutrition, and nutrition education for such government staff should help rectify this.62 Nutrition sensitization is key to promoting good practices, however, consumers increasingly need to be informed about the dangers of over consuming food and drinks that are heavy in sugar, salt and trans-fats. Members should resist industry pressure and ensure they inform consumers about negative impacts of the over consumption of industrially produced trans-fats, sugar, salt and saturated fatty acid foods and drinks.

The FFA is right to incorporate nutrition objectives into social protection schemes and humanitarian safety nets (Recommendation 22: Incorporate nutrition objectives into social protection programmes and into humanitarian assistance safety net programmes) but members should commit to scale-up and finance coverage and ensure that nutrition-sensitive social protection is universally available for all vulnerable households not just in “humanitarian” interventions but also in protracted crises.

Social protection schemes make transfers to poor households to increase income, protect assets and boost resilience in the face of shocks, price spikes, natural disasters, disease outbreaks and during lean spells and seasonal food shortages. They comprise cash transfers, conditional cash transfers, food-based transfers – food aid, food stamps, coupons or vouchers – and cash-for-work schemes. However, only a dozen or so social protection schemes currently exist in poor countries at present, and they in turn only reach a small share of the population; Ethiopia’s Productive Safety Net Programme reaches 10 percent of the population, while Brazil and Mexico’s reach 25 percent. The FFA follow up should revisit its recommendation actions on social protection (22 to 24) to incorporate these important lessons.

Conditional cash transfers (CCTs) can enhance nutrition-sensitivity by linking transfers to regular child growth promotion, health checks, inoculations, regular school attendance and nutrition education sessions, and can be targeted at vulnerable communities or women in particular (women are more likely to spend extra income on their children’s health and nutritional needs.)

Research from Latin America indicates a positive effect on poverty, household food consumption, increased dietary diversity and use of health and nutrition services. Schemes in Mexico, Brazil and Nicaragua showed improvements in women’s control over financial resources, enhanced self-esteem and heightened knowledge and awareness of health and nutrition issues. However, evidence indicating that such schemes have improved child nutritional status is still limited; a review of CCT programmes showed an impact on stunting in two out of five studies, including the ‘Oportunidades’ programme in Mexico and ‘Familias en Acción’ in Colombia.

Unconditional cash transfers (UCT) are growing in popularity and are easier to administer, and there is some evidence that they frequently have a stronger impact on nutrition than other sources of additional income; of the three UCT programmes evaluated, two – South Africa’s Child Support Grants and Ecuador’s ‘Bono Solidario’ – reduced stunting. However, cash transfers should be linked to food price indexes to prevent shortfalls in purchasing power during periods of seasonal hunger and associated high local food prices.

Finally, members should go further than the FFA and commit to promoting school feeding programmes, and insist that a guaranteed and high proportion of food is procured from local smallholders and family farmers.

Additional essential actions for 2015 and beyond

Ensure nutrition-sensitive social protection is universally available for all vulnerable households – such as price-indexed cash transfers and donor support is scaled up in times of crisis to protect lives and assets of vulnerable population.

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We believe scaling-up nutrition-specific interventions is required in four key areas:

- **Optimal infant and young child feeding**
- **Addressing micronutrient deficiencies**
- **Therapeutic feeding of wasting or severe acute malnutrition of children under five**
- **Improved maternal nutritional status before, during and after pregnancy whilst still breastfeeding.**

To this end, members need to be bolder and more specific in their translation of recommendations 25 to 28 and should ensure urgent strengthening of health systems – from national to district, primary and community levels – with the aim of achieving Universal Health Coverage (UHC) to treat and prevent malnutrition in all its forms in conjunction with Ban Ki-moon’s Global Strategy for Women’s and Children’s Health. The focus should be on ensuring universal access of all direct nutrition actions – rather than simply promoting universal access.

While it is important that members promises to implement the WHO’s package of effective direct nutrition-specific interventions – outlined in the Global Strategy on Infant and Young Child Feeding, the Comprehensive Implementation Plan on Maternal, Infant and Young Child Nutrition and the WHO Global NCD Action Plan 2013-2020 – ICN2 follow up should commit to ensuring that improved nutrition services are free at the point of delivery.

**Wasting**

While we welcome that wasting is recognized as a distinct issue, members need to initiate urgent action to scale up interventions to address acute (wasting) and chronic malnutrition (stunting) in children, and anaemia in children, adolescent girls and women of reproductive age.

Governments should establish national wasting goals and targets, and differentiate between the two main types of wasting: moderate acute malnutrition (MAM) and severe acute malnutrition (SAM) in line with its recommendation that national governments are encouraged to establish nutrition targets and intermediate milestones, consistent with the timeframe for implementation (2016-2025), as well as global nutrition and non-communicable disease targets established by the World Health Assembly (recommendation 58).

While prevention is the first step towards management of severe acute malnutrition (SAM), urgent action is needed to minimize and avoid the risk of death. In many poor countries the majority of children who have SAM are never brought to health facilities. However, it is right that Community-based Management of Acute Malnutrition (CMAM) approach – which has been highly successful in treating and preventing SAM – is recommended by the FFA and must be pursued in the political negotiation on the NPANs.

Based on decentralized management and involving community mobilization, participation and sensitization and early detection in emergency and non-emergency settings, community health volunteers can identify children in the community affected by SAM by using simple color-coded plastic strips that are designed to measure mid-upper arm circumference and by assessing nutritional oedema in the feet. Nurses and community health workers assess identified children following the Integrated Management of Childhood Illness (IMCI) protocols in the health clinic, and dispense treatment in the community with regular visits or in-patient care depending on severity of illness.

Early detection through active case finding makes it possible to start management before the onset of life-threatening complications. After standard treatment at a health clinic comprising antibiotics, vitamin A and deworming drugs, about 80 percent of children can be cost effectively treated at home – with ready-to-use therapeutic food (RUTF) or locally available, micronutrient-dense foods.71 Typical cure rates are now an impressive 84 percent.72 An estimated 2 million children under five were treated for SAM in this way in 2011, and there is scope to scale-up and integrate the CMAM approach – or at least parts of it, such as SAM treatment – into child health systems and comprehensive nutrition strategies.

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MAM should be differentiated and can be included in the CMAM approach and effectively prevented and treated through holistic approaches such as Integrated Management of Childhood Illness (IMCI) and Integrated Community Case Management (ICCM). In many circumstances, it can be tackled through food-based approaches, cash-vouchers or cash transfers. Products should only be used in very specific or limited circumstances.

Based on the FFA’s recommendation on wasting and resilient health systems, governments should:

- **Urgently improve coverage for the treatment of wasting and integrate CMAM into child health services and preventative strategies**
- **Promote the full integration of all CMAM components into essential packages for managing common childhood illnesses using the Integrated Manage of Childhood Illness (IMCI) strategy at facility level and Integrated Community Case Management (ICCM) at community level**
- **Support high-burden countries to establish national wasting targets in line with WHO global targets to reduce acute malnutrition**
- **Urge governments and donors to increase domestic and long-term external funding for treatment and prevention of wasting especially in non-emergency settings.**
- **Take up actions highlighted in the WHO Wasting Policy Brief launched at ICN2.**

**Women’s empowerment**

Women’s low education levels, unequal social status, widespread discrimination, weak household and social decision-making power and limited access to productive resources – such as land, water, energy, credit, education, training and knowledge – can negatively affect their nutritional status and the nutrition of their children. Gender imbalances too can negatively affect the nutritional status of women and of their children. Ensuring an explicit commitment to preventing child, early and forced marriage, and protecting women and girls against struc-
tural and sexual violence is essential, and greater efforts should also be made to address the legal, social and economic barriers resulting in unequal access and control of productive resources.

Successfully breaking the intergenerational cycle of undernutrition begins with investing in antenatal and family planning interventions such as preventing pregnancies during adolescence, delaying age of marriage, increasing spacing between births, preventing unwanted pregnancies and overcoming social and cultural barriers to healthy practices and health-care seeking. Once pregnant, protection from stress factors is crucial, such as cigarette smoke, alcohol, narcotics, environmental pollutants and psychological stress. The FFA highlights the role of women only in its recommendation 44 to 48 on improving the health system and in areas that are specific to women such as pregnancy and breastfeeding (page 4 and 5). The FFA is weak on this and so instead members should ensure they clearly commit to respect, protect and fulfil women’s rights. The FFA is right to recommend strategies and policies to ensure access to sexual and reproductive health services for all women, although it is vital that members urgently act to prevent child, early and forced marriages and protect women and girls against all forms of violence. A gender perspective is needed throughout the topics raised but specifically in terms of women access to sustainable food systems, social protection and health.

Breastfeeding
The WHO sets out a package of effective direct nutrition specific interventions to improve maternal, infant and young child nutrition. Nutritional status before and during pregnancy influences maternal and child outcomes, while optimal infant and young child development requires adequate nutrition, dietary diversity, optimal breastfeeding and complementary feeding, the provision of micronutrient supplements and the prevention and management of disease. All these interventions are well covered in the FFA, and it is important that it highlighted that members should implement the International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions. However, members should ensure WHO recommendations on maternity leave and ensure social protection for pregnant and lactating women.

Additional essential actions for 2015 and beyond

**WASTING**

- Urgently improve coverage for the treatment of wasting and integrate CMAM into child health services at country level
- Governments (with support of international donors) must promote the integration of CMAM into essential packages for managing common childhood illnesses using Integrated Management of Childhood Illness (IMCI) approach and Integrated Community Case Management (ICCM) at community level
- UN organizations and donor states to support high-burden countries with knowledge and finance to establish national wasting targets in line with WHO global targets
- Ensure domestic and donor funding is increased for long-term treatment and prevention of wasting in emergency and non-emergency settings

**WOMEN’S RIGHTS**

- Respect, protect and fulfill women’s rights, and prevent child, early and forced marriages and protect women and girls against all forms of violence
- Ensure WHO recommendations on maternity leave and provide social protection for pregnant and lactating women

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74 FAO (2011) The State of Food And Agriculture 2010-11, Women in Agriculture: Closing the gender gap for development, FAO: Rome
From Commitments to Action

WATER, SANITATION & HYGIENE

We are pleased to see a focus on water, sanitation and hygiene as a key front in the fight against undernutrition. Ensuring universal access to safe drinking water, basic sanitation and improved hygiene facilities and practices can promote healthy environments and reduce infectious diseases amongst infants and mothers. Repeated bouts of diarrhoea, intestinal worms and faecal contamination – often contacted through open defecation – can impede nutrient absorption and decrease appetite, resulting in stunting and undernutrition.78

Some 69 percent of rural Indians ‘usually’ defecate in open spaces, and experts says such early exposure to fecal germs is a key reason behind India’s exceptionally high stunting and undernutrition rates.79 Nutrition-sensitive WASH Initiative interventions to ensure a healthier environment include: immunization, improving sanitation by creating environments free of open defecation, promotion of hand washing with soap, improved access to clean drinking water, the use of oral rehydration salt and therapeutic zinc to treat diarrhoea, and treatment and prevention of malaria with insecticide-treated bed nets.80

Additional essential actions for 2015 and beyond

WASH interventions can indirectly have strong positive effects on education and gender outcomes and can indirectly improve the nutritional status of local populations.

Diarrhoeal infections are a major contributor to wasting in children under five. NPANs, with donor support, must combine food-based interventions with the promotion of hygiene practices and interventions for improved access to clean water.

The commitment to achieve universal access to safe drinking water should be aligned with UNGA’s strategy on progressively eliminating inequalities in access to services that reflect the established principles of the human right to water and sanitation, and which is recognized by Resolution 64/292 of the UN General Assembly in 2010.

ACCOUNTABILITY MECHANISMS

There is a serious risk that commitments made at ICN2 remain empty promises without robust accountability and effective monitoring and evaluation.81 Governments and donors should adopt a double accountability system. This includes establishing inclusive, transparent and participatory accountability mechanisms through which a broad range of civil society actors and social movements can be reflected and independent monitoring and evaluation of time-bound NPANs can be conducted. Brazil’s civil society-focused National Food Security and Nutrition council, CONSEA, is an excellent example of this, 82 and such councils should be recommended.

Accountability at the domestic and local levels should also be enhanced through the adoption of national right to food-based laws and legislation that require the adoption of national strategies for the realization of the right to adequate food and which integrate the objective of guaranteeing the right to adequate diets for all.83 The FAO Council and member states have agreed a vision for realizing the right to adequate food for all – the Voluntary Guidelines on the Right to Food – and the FFA follow must use these as a foundation for guiding progress in establishing accountability mechanisms and institutions.84

‘One UN’ system coordination

Members should go beyond the current FAO and WHO dialogue resulting in the FFA, it should strive for joint collaboration with other United Nations agencies, funds and programmes and other relevant regional and international platforms. The goal of member state collaboration in the ICN2 umbrella should be to enhance the ‘One UN’ system approach to malnutrition, in order to guide and strengthen NPANs within the framework of the Decade of Action on Nutrition.

Currently, global leadership for efforts on malnutrition is split between five UN agencies:

- The UN Children’s Fund (UNICEF) leads on outpatient SAM treatment and WASH Initiative
- The World Health Organization (WHO) leads on inpatient SAM treatment
- The World Food Programme (WFP) leads on treatment of moderate acute malnutrition (MAM)
- FAO and the International Fund for Agricultural Development (IFAD) lead on nutrition-sensitive initiatives in agriculture.

This fragmentation can lead to policy incoherence and acts as a barrier to an integrated, aligned and coordinated approach.85 UN agencies should operate under a coordinated cluster system and incorporate all relevant UN agencies – such as WHO, FAO, UNICEF, WFP and IFAD – and agree on integrated strategies for tackling malnutrition in all its forms. Such coherence should be mirrored at the country level, where UN agencies should systematically coordinate and take responsibility for integrated strategies under the ‘One UN’ system alongside national governments and CSOs and social movements.

Led by a secretariat established by WHO and FAO, we agree that ICN2 global accountability will be enhanced through regular scrutiny and oversight by the UN General Assembly (UNGA). National targets should be aligned with global nutrition goals agreed under the post-2015 SDGs and member governments should systematically assess and monitor progress against targets, and should report back at least biannually – on the basis of agreed goals, targets, indicators, timelines, milestones and responsibilities – in a similar process to the UN’s Universal Periodic Reviews, and involving intergovernmental

82 FAO (2013) The State of Food and Agriculture, FAO: Rome
83 De Schutter (2011) Report submitted by the Special Rapporteur on the right to food, Olivier De Schutter, Human Rights Council, UN General Assembly, 26 December 2011, A/HRC/19/59
84 See Voluntary Guidelines to support the progressive realization of the right to adequate food in the context of national food security, adopted by the 127th Session of the FAO Council, November 2004, FAO: Rome, 2005
From commitments to action

The first Global Nutrition Report has been important for identifying information gaps and proposes some key priorities for action to strengthen accountability and data. The WHO and FAO governing bodies – such as the World Health Assembly (WHA) and the food and nutrition-sensitive focused multi-stakeholder Committee on World Food Security (CFS) – should be the key global governance spaces for monitoring, overseeing and following up implementation of ICN2 commitments.

Finally, WHO and FAO leadership should set out a road map to follow up and implement commitments made at ICN2 to ensure vastly improved NPANs and the likely inclusion of a global nutrition goal and targets in the SDGs.

**Data revolution**

ACF supports a key recommendation of the Global Nutrition Report and highlights the need that greater accountability should be built on improved data. More effective targeting and monitoring and evaluation requires major investment in an in-country ‘data revolution’. Real-time mapping, tracking, surveillance, sex-disaggregated assessments and evaluations of malnutrition and policy initiatives must go hand-in-hand with significant domestic and international donor investment in improved nutrition-focused surveys and tools, including Coverage assessments, Demographic and Health Surveys (DHIS), Multiple Indicator Cluster Surveys (MICS), Food Expenditure Surveys, Household Diet Diversity Scores (HDDS) and Vulnerability Analysis and Mapping (VAM).

What can be measured can be managed, and only by having an accurate real-time picture of the social geography, scale and scope of malnutrition – and hard facts on what works to combat it – do we hope to stand any realistic chance of eradicating malnutrition.

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Action Against Hunger | ACF International is an international humanitarian organisation committed to ending child hunger. Recognised as a leader in the fight against malnutrition, ACF works to save the lives of malnourished children while providing communities with sustainable access to safe water and long-term solutions to hunger. With over 30 years of expertise in emergency situations of conflict, natural disaster and chronic food insecurity, ACF runs life-saving programmes in over 40 countries helping some 9 million people last year.

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