## THE CASE FOR NUTRITION AS A KEY ELEMENT OF PRIMARY HEALTHCARE

The UN declaration on Universal Health Care (UHC) recognises primary health care as the most inclusive, effective, and efficient whole-of-society approach to ensuring people's physical and mental health and social well-being. The declaration further highlights the fundamental role of healthy diets and of healthy, equitable, and sustainable food systems - along with quality education, gender equality, and women's empowerment, access to safe drinking water and sanitation, and social protection mechanisms - in building healthier societies.

The case for including nutrition as an integral component of primary healthcare is compelling:

- · For decades, health systems and clinicians have focused on the medical, drug-treatment-based model of disease that ignores fundamental causes such as diet and lifestyle. The consequences of this narrow approach are evident: the global malnutrition epidemic has swept the world.
- pay. Poor diets are among the leading health and societal challenges of the 21st century, leading to disability and death, growing inequalities, staggering healthcare costs, and environmental implications.
- As governments and policymakers increasingly recognise the depth and breadth of malnutrition burdens, they are compelled to act. Integrating nutrition actions into health systems to promote healthier eating and prevent and treat undernutrition and diet-related chronic diseases could generate substantial health gains and be highly cost-effective.1

There is increased recognition that key stakeholders, including governments and the private sector, are accountable for healthier and more equitable food and health systems. This change reflects a shift has translated into growing population-based nutrition actions on a global scale. Population-based as compared with individual-based approaches. Such 'upstream' strategies should benefit everyone, particularly those less privileged and of lower socioeconomic status, especially if integrated within a

away from placing the full responsibility - and blame - on individuals for making healthier choices, and interventions can reach broader segments of society, require less individual effort, and can be less costly

The 2019 United Nations General Assembly had for the first time a dedicated focus on universal health coverage (or universal healthcare) (UHC). This General Assembly reaffirmed that "health is a precondition for and an outcome and indicator of all three dimensions of sustainable development" and strongly committed to "achieve universal health coverage by 2030, with a view to scaling up the global effort to build a healthier world for all". The call for achieving universal health coverage as enunciated in Sustainable Development Goal (SDG) 3.8, is loud and clear: all countries of the world should make efforts to ensure that everyone has access to a minimum set of high-quality healthcare interventions without facing financial hardship. Optimal health and well-being is a human right and not the

privilege of only those who can afford to

<sup>1</sup> The Lancet, 2013. Nutrition series: Maternal and child nutrition; Lee Y., Mozaffarian D., Sy S. et al., 2019. Cost-effectiveness of financial incentives for improving diet and health through Medicare and Medicaid: a microsimulation study. PLoS Med,16:3, e1002761.

universal health coverage system. While policies and programmes were created over decades to address hunger and food insecurity, far less was known about how to improve diet quality and address dietrelated noncommunicable diseases (NCDs). Recent advances and efforts in nutrition policies to prevent NCDs can inform current priority areas and contribute to the development of a universal health coverage plan to address diet-related chronic diseases.

Ensuring equitable access to effective nutrition interventions within health systems can play a pivotal role in improving diets, preventing and treating disease, reducing healthcare costs, and ultimately improving everyone's health. However, these justifications are not yet matched by a robust approach that unites nutrition and healthcare in terms of equitable policy, financing, monitoring and evaluation. Nutrition is frequently under-prioritised in national healthcare policy and financing discussions. The current Global Nutrition Report highlights the need to integrate nutrition into universal health coverage<sup>2</sup> as an indispensable prerequisite for improving diets, saving lives and reducing healthcare spending, while ensuring that no one is left behind.

This brief highlights some key challenges and opportunities in the comprehensive integration of nutrition into healthcare, so that everyone can access the nutrition care they need, when and where they need it and without financial hardship.

## Sources:

Chapter 03. Mainstreaming nutrition within universal health coverage. 2020 Global Nutrition Report: Action on equity to end malnutrition. Bristol, UK: Development Initiatives. Available online: <a href="https://globalnutritionreport.org/">https://globalnutritionreport.org/</a> reports/2020-global-nutrition-report/mainstreaming-nutrition-within-universal-health-coverage/#note-source-C\_vilojpG

Full report: https://globalnutritionreport.org/documents/566/2020\_Global\_Nutrition\_Report\_2hrssKo.pdf

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<sup>2</sup> World Health Organization, 2019. Nutrition in universal health coverage. WHO, Geneva. (WHO/NMH/NHD/19.24). License: CC BY-NC-SA 3.0 IGO.