

IT IS TIME TO ACT: REDUCE INEQUITIES IN FOOD AND NUTRITION SYSTEMS

The Global Nutrition Report calls on governments, businesses, and civil society to step up efforts to address malnutrition in all its forms and tackle injustices in food and health systems. Everyone deserves access to healthy, affordable food and quality nutrition care. This access is hindered by deeper inequities that arise from unjust systems and processes that structure everyday living conditions. The 2021 Global Nutrition Report uses the concept of nutrition equity to elucidate these inequities and show how they determine opportunities and barriers to attaining healthy diets and lives, leading to unequal nutrition outcomes. We examine the global burden of malnutrition with an equity lens to develop a fuller understanding of nutrition inequalities. In doing this, we pinpoint and prioritise key actions to amplify our efforts and propel progress towards ending malnutrition in all its forms.

The Global Nutrition Report calls for a pro-equity agenda that mainstreams nutrition into food systems and health systems, supported by strong financing and accountability. With only five years left to meet the 2025 global nutrition targets, time is running out. We must focus action where the need is greatest for maximum impact.

THE GLOBAL BURDEN OF MALNUTRITION

Today, one in every nine people in the world is hungry, and one in every three is overweight or obese. More and more countries experience the double burden of malnutrition, where undernutrition coexists with overweight, obesity and other diet-related non-communicable diseases (NCDs).

The trend is clear: progress is too slow to meet the global targets. Not one country is on course to meet all 10 of the 2025 global nutrition targets and just eight of 194 countries are on track to meet four targets. Almost a quarter of all children under five years of age are stunted. At the same time, overweight and obesity are increasing rapidly in nearly every country in the world, and it is showing no signs of slowing.

The progress on malnutrition is not just too slow; it is also deeply unfair. New analysis shows that global and national patterns mask significant inequalities within countries and populations, with the most vulnerable groups being most affected. Nutrition outcomes also vary substantially across countries. Underweight is a persisting issue for the poorest countries and can be 10 times higher than in wealthier countries. Overweight and obesity prevail in wealthier countries at rates of up to five times higher

than in poorer countries.

Within every country in the world, we see striking inequalities according to location, age, sex, education, and wealth while conflict and other forms of fragility compound the problem. This report finds a strong urban–rural divide, and even larger differences across communities. In children under five years of age, wasting can be up to nine times higher in certain communities within countries, four times higher for stunting, and three times higher for overweight and obesity. There is a clear link between infant and young child feeding practices and household characteristics. Continued breastfeeding up to 1 or 2 years of age is less common for children in wealthier households, urban areas, or with a more educated mother. In contrast, rates of solid food introduction and minimum diet diversity are substantially lower for children in the poorest households, in rural areas, or with a less educated mother. Although more granular high-quality nutrition data is needed, we have enough to act.

TACKLING INJUSTICES IN FOOD AND HEALTH SYSTEMS

Poor diets and resulting malnutrition are among the greatest current societal challenges that cause vast health, economic, and environmental burdens. To fix the global nutrition crisis equitably, we must shift our approach dramatically in two ways: focusing on food and health.

First, we must address inequities in food systems, from production to consumption. Current food systems do not enable people to make healthy food choices. The vast majority of people today simply cannot access or afford a healthy diet. The reasons for this are complex. Existing agriculture systems are largely focused on an overabundance of staple grains like rice, wheat, and maize rather than producing a broader range of more diverse and healthier foods like fruits, nuts, and vegetables. Meanwhile, highly processed foods are available, cheap, and intensively marketed. Their sales are still high in high-income countries and growing fast in upper-middle- and lower-middle-income countries.

The climate emergency makes it critical to rethink food systems. This presents an opportunity to shift to approaches that ensure that healthy and sustainably produced food is the most accessible, affordable, and desirable choice for all. These approaches must amplify the voices of marginalized groups and address the true cost of food to the environment and human health. Likewise, they must work both within specific contexts and across sectors to address all elements of the food system.

Second, we must address nutrition inequities in health systems. Malnutrition in all its forms has become the leading cause of ill health and death, and the rapid rise of diet-related NCDs is putting an intolerable strain on health systems. Yet, most people cannot access or afford quality nutrition care for prevention or treatment. Worldwide, only about one-quarter of the 16.6 million children under five years of age with severe acute malnutrition received treatment in 2017. This highlights the urgent need to address this unacceptable burden. Nutrition actions represent only a tiny portion of national health budgets although they can be highly cost-effective and reduce healthcare spending in the long term. These are largely focused on undernutrition and are rarely delivered by skilled nutrition professionals. At the same time, health records and checks are not optimised to screen, monitor, and treat malnutrition, such as through assessments of diet quality and food security.

Global commitment to universal health coverage is an opportunity to integrate nutrition carefully into health systems. Essential nutrition services – preventive and curative – should be universally available to all, especially to those who need it most. Strong governance and coordination across sectors are keys to building functional and resilient health systems. Mainstreaming and scaling up nutrition care within health systems would save lives and reduce staggering healthcare spending.

Only by tackling injustices in food and health systems will we achieve the transformations needed to end malnutrition in all its forms.

INVESTMENTS TO IMPROVE NUTRITION OUTCOMES

The intensified drive needed to meet global targets and end malnutrition is the collective responsibility of all sectors and countries. Domestic funding by country governments is crucial to ensure sustained improvements. At the same time, the international donor community has a duty to step up where governments lack the resources to respond effectively.

So far, investments have focused on addressing undernutrition. We have seen some success here, as rates of stunting are gradually decreasing over time. In contrast, overweight and obesity are rapidly increasing. The funding gap to address overweight, obesity, and other diet-related NCDs is growing too. Countries have to be equipped to fight both sides of malnutrition at the same time.

We need to examine investments in nutrition through an equity lens. Investments must respond to needs and volumes of financing should be proportionate to the burden. We should proactively develop new financing mechanisms that can complement existing sources. Nutrition inequalities exist across countries as well as within communities. Therefore, decisions on resource allocation by need should be informed by granular data at the subnational level through evidence-based and cost-effective solutions. Coordination is essential to prioritise equitable nutrition investments. Directing resources and programmes to communities and people most affected would enable faster, more equitable progress towards ending malnutrition.

CRITICAL ACTIONS TO ACHIEVE NUTRITION EQUITY

Food is an important global issue – crucial to health, equity, sustainability, economies, and livelihoods. Increased global recognition that governments, businesses, and civil society are accountable for healthier and more equitable food and health systems provides an opportunity for us to invest in nutrition to preserve our future.

To drive the transformative change needed to achieve nutrition equity, and end malnutrition in all its forms, we must focus on food systems and health systems. The Global Nutrition Report proposes the following specific actions. Governments must work with stakeholders across sectors to overcome the inequities holding back progress to end malnutrition.

FOOD SYSTEMS

To ensure that healthy and sustainably produced food is the most accessible, affordable, and desirable choice for all, sectors must work together to mainstream nutrition into all elements of the food system:

- Implement strong regulatory and policy frameworks to support healthier diets for all at country and community levels and across sectors, from production to consumption.
- Optimise agricultural subsidies and increase public investment to produce a broader range of more diverse and healthier foods.
- Provide support for public transport schemes and shorter supply chains for fresh-food delivery products, particularly to the most nutritionally disadvantaged or harder-to-reach groups.
- Implement, monitor, and evaluate evidence-based food policies to support healthy, sustainable and equitable diets, such as fiscal, reformulation, school- and worksite-based, labelling and marketing policies.
- Hold the food industry accountable for producing and marketing healthier and more sustainable food products through strengthened mechanisms.
- Strengthen and increase research spending to address major nutrition questions, identify cost-effective solutions and stimulate innovation.

HEALTH SYSTEMS

To save lives and cut healthcare costs, sectors must collaborate to mainstream nutrition as a basic health service through leveraging existing infrastructure and introducing new technologies:

- Roll out nutrition services within health services by developing costed nutrition care plans that should be scaled up and sustained to cover all forms of malnutrition, including overweight, obesity, and other diet-related NCDs.
- Invest in human resources to increase the number of qualified nutrition professionals and level out access to quality nutrition care.
- Use a variety of health professionals and workers to alleviate inequities in access and enhance their performance through educational and development opportunities.
- Include nutrition-related health products like therapeutic foods and innovative technological solutions like digital nutrition counselling, where appropriate, especially when working with more remote and harder-to-reach communities.
- Optimise health records and checks for nutrition care, to deliver preventive and curative nutrition services and identify those in greatest need.
- Commit to routine and systematic collection of equity-sensitive nutrition data at the community level, disaggregated by key population characteristics to strengthen the evidence base and inform targeted priority-setting.

Source:

Executive summary of the 2020 Global Nutrition Report: Action on equity to end malnutrition. Bristol, UK: Development Initiatives. https://globalnutritionreport.org/documents/566/2020_Global_Nutrition_Report_2hrssko.pdf