Saving lives, investing in future generations and building prosperity – the UK’s Global Nutrition Position Paper

OCTOBER 2017
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Foreword from the Secretary of State

Earlier this year the world faced a series of unprecedented crises and the real threat of famine in four countries. Britain led the humanitarian response to each of these crises, providing life-saving support and helping to avert an even greater tragedy. Crucially, we got other countries to step up and pull their weight too. But there is no room for complacency, and we will continue to press for an end to the conflict and broken politics that is at the root of these crises.

Today, the world faces a silent emergency which is just as urgent and deadly as the threat of acute famine: the crisis of undernutrition that affects two billion of our fellow human beings around the world. You won’t see this crisis in the headlines. But its effects, in terms of lives lost and potential wasted, is vast. 155 million children are stunted and at least 52 million are wasted.

Beyond the immediate threat to life, the effects of undernutrition are devastating and lasting. When children, early on in their lives, are denied the proper nutrition their bodies and minds need to grow to their full potential the effects of this can never be fully reversed.

Today millions of children in the world’s poorest countries are being robbed of their potential due to undernutrition and, as a result, their countries are also being stopped from reaching their full potential. Poor nutrition is keeping people in grinding poverty and preventing countries from moving on from aid dependency. The economic consequences of undernutrition represent losses of national GDP of 10%, year-on year. In contrast a 40% reduction in stunting, by 2025, could add $83billion to national incomes in Africa from 2035 to 2060.

Following decades of neglect, nutrition has rightly sped up the global agenda in recent years. Global Britain has led the way. In the last two years alone UK aid has helped more than 26 million young children, adolescent girls and women get the essential nutrition they need. In 2013, the UK Government brought global leaders and businesses to London for the Nutrition for Growth Summit, where we collectively committed to reduce the number of stunted children in the world by 20 million by 2020.

Britain will continue to lead the world on this crucial agenda, aiming to improve nutrition for at least 50 million people by 2020. This Position Paper sets out how we will focus on reaching the poorest and most excluded people, including women, adolescent girls and children.

We will increase our work to address the needs of young children, particularly focusing on the first two years, to prevent stunting, wasting and micronutrient deficiencies. We will also put girls and women at the heart of our work on nutrition, particularly targeting unequal access to food, water and other essential services. Alongside this, we will take action to prevent famine by helping countries build their resilience to drought and other shocks.
I’m clear we need to respond fast to today’s crises; saving lives in the short-term and preventing a devastating legacy. Others must follow our lead and I call on countries, donors, the private sector and civil society to step up and intensify their efforts to tackle undernutrition. If we do not speed up progress now, there will still be more than 100 million stunted children in 2030. There can be no excuses for failure. Together we must rise to the challenge and help to build a healthier, more stable, more prosperous world for us all.

Rt Hon Priti Patel,
Secretary of State for International Development
1. Why ending malnutrition is important

1.1 For the first time ever, the world has committed to end malnutrition in all its forms. This ambitious target, enshrined in the 2030 Global Goals, focuses on a problem that holds back the growth and development of both people and countries. Malnutrition affects one in three people globally. Two billion experience deficiencies in essential vitamins and minerals, 155 million children are stunted, and 52 million children suffer from wasting. In addition, more than two billion people are overweight or obese. Nearly a quarter of women of reproductive age are underweight and 30% are anaemic. Anaemia in women reduces capacity to work and contributes to a quarter of maternal deaths. Women affected by undernutrition are more likely to give birth to small babies who, in turn, are more likely to be disadvantaged throughout their lives. Undernourished children are more likely to die young, contributing to 45% of all under-five deaths. Children who survive do less well at school, have 10% lower lifetime earnings, and are more likely to have undernourished children themselves. The economic consequences of undernutrition in affected countries represent losses of national GDP of 10% year-on-year.

1.2 Following decades of neglect, nutrition is increasingly in the international spotlight. The Scaling Up Nutrition (SUN) Movement now includes 59 governments committed to tackle poor nutrition. Donors, civil society and businesses have made substantial pledges in recent years. The set of targets defined by the World Health Assembly to reduce malnutrition by 2025 (see figure 2) paved the way for the Global Goals, including Goal 2, to end hunger and malnutrition by 2030. The number of countries on track to meet the target to reduce stunting has increased in the last few years. Progress has been made but there is much more to do.

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1 Malnutrition refers to deficiencies, excesses or imbalances in a person’s intake of energy and/or nutrients. The term malnutrition covers two broad groups of conditions. One is ‘undernutrition’ which includes stunting (low height for age), wasting (low weight for height), underweight (low weight for age) and micronutrient deficiencies or insufficiencies (a lack of important vitamins and minerals). The other is obesity, which can cause diet-related non-communicable diseases (such as heart disease, stroke, diabetes and cancer).

2 2017 UN joint estimates on malnutrition

3 Global Nutrition Report 2015

Global Nutrition Report 2015
1.3 The 2016 Global Nutrition Report highlighted that malnutrition is not being reduced fast enough to deliver Global Goal 2. Unless action is accelerated, there will still be more than 100 million stunted children in 2030, and anaemia among women will not be eliminated until the 22nd century. The number of people who are obese is also on the rise around the world. Unless current trends can be reversed, half the world’s population will be affected by malnutrition in one form or another by 2030. Inequalities in malnutrition are increasing. Girls, excluded ethnic groups, and children with disabilities are disproportionately affected.

1.4 Progress in meeting the Global Goals has been particularly slow in fragile and conflict-affected states, in areas affected by climate-related shocks, and in areas with large displaced populations. In these contexts, people are both more vulnerable and less able to access basic public services. A lethal combination of vulnerability, drought, floods and conflict has created the conditions for famine and near-famine declarations in several countries over the last five years. Famine has short term consequences for survival, as well as longer term impacts on growth and development. Crises cause not only high levels of wasting but also lead to stunting and other forms of malnutrition, putting those who survive at a lifelong disadvantage (see Box 1).

1.5 Further accelerating progress on nutrition requires countries to strengthen the design and implementation of their own national plans, not only in nutrition specifically, but by deriving benefits for nutrition from other sectors such as health, education, agriculture and water and sanitation (WASH). Only such a multi-sectoral approach can address both the immediate and underlying causes of malnutrition. Greater effort is also needed to reach the poorest, those living in fragile and conflict affected states, the displaced and the most marginalised. This includes strengthening resilience to shocks and being prepared to scale up support when crises hit. Sustaining reductions in malnutrition will require greater support for governments as they develop and implement their own policies and plans. It will also require much smarter ways of working, including through future-proofing for climate and environmental change.

1.6 Enhancing countries’ own capacity to invest more and use resources better is essential. Current domestic investment in nutrition is low. Countries are on average spending only 1-2% of their health budgets on high impact nutrition programmes that save lives and pay significant dividends in later years.  

1.7 The global community needs to pull together in support of countries with a high burden of malnutrition. There are many nutrition initiatives globally. If harnessed effectively, these could bring transformational change. But if governments do not get the support they request to piece together the support that is available, there is a risk of fragmentation and confusion. Ensuring the global architecture supports coherent and coordinated action on nutrition is essential for achieving an end to malnutrition by 2030.

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4 Investing in Nutrition: Results for Development Institute, The Foundation for Development, World Bank, 1000 Days
Box 1: The impact of famine

The risk of famine remains all too common in the countries where DFID is aiming to improve nutrition. Famine is defined by three factors: food insecurity, acute malnutrition (wasting) and loss of life associated with hunger and malnutrition. Levels of acute malnutrition typically rise above emergency levels well before famine is declared. This means that even in the absence of a famine declaration, substantial numbers of people – particularly children – living in these settings are at high risk of dying. Without treatment, children with severe acute malnutrition are nine times more likely to die and risk of death can be even higher during emergencies.

The immediate impacts of famines are substantial. But we know that the longer term effects can be profound. Just one episode of acute malnutrition can have lifelong impacts on the brain development and growth of a young child. This stunted growth during the early years of life means that children go on to do less well at school and earn less as adults.

Preventing famine is not simple. Drought, conflict and lack of access to those affected are a complex and lethal combination. Reducing the likelihood and impact of famine will require major changes to the way the international system deals with humanitarian crises. Through our work on nutrition in particular, we will continue to promote even better ways to address malnutrition in fragile and conflict affected contexts. For example:

- In countries such as South Sudan, Nigeria and Somalia, DFID will continue to boost the ability of health services to deliver effective treatment for acute malnutrition even when caseloads increase. Effective treatment remains essential for reducing the impact of acute malnutrition on growth and development;
- DFID will launch a new data initiative to strengthen surveillance and early warning for nutrition in fragile settings, making the most of digital technology and open access data;
- DFID will continue to push for innovation and new evidence of what works to treat and prevent acute malnutrition as part of our contribution to the No Wasted Lives Coalition. Through this support, we will aim to help increase the proportion of children with severe acute malnutrition who can access treatment by 2020.

Finally, we will also urge actors such as the World Bank, UNICEF and WFP to work together as effectively as possible to reduce nutrition vulnerability and to prevent crises emerging. Only through this level of action will it be possible to ensure more countries get on track to achieve targets to reduce malnutrition in all its forms.
2. The UK commitment

2.1 At the Nutrition for Growth (N4G) Summit in 2013, DFID pledged to invest:
   - £375 million more for programmes that address the immediate causes of undernutrition than would have been spent based on 2010 baseline figures (equating to a total of £575 million between 2013 and 2020)
   - an additional £280 million for direct nutrition programmes to match new financial commitments by other partners
   - £604 million more over the same period for programmes to address the underlying causes of undernutrition than would have been spent based on 2010 figures (equating to £2.1 billion between 2013 and 2020)

2.2 In 2015, the UK government committed to improve the nutrition of 50 million people by 2020. DFID continues to plan to deliver this result with a focus on quality and value for money. This will also help deliver on the collective G7 commitment to lift 500 million people out of hunger and malnutrition by 2030.

2.3 DFID investments in nutrition will support the delivery of the primary objectives of the UK aid strategy:
   - strengthening global peace, security and governance: hunger and malnutrition can be both a cause and a consequence of conflict. Ensuring people are properly nourished and healthy is fundamental to well-being and has a lasting impact on whole societies;
   - strengthening resilience and response to crises: malnutrition places tremendous costs on individuals, families and entire nations; preventing malnutrition gives children a strong start in life and puts them and their families in a much better position to reduce their vulnerability to shocks. Developing prevention, resilience and response services that build in improvements in nutrition will save lives and also ensure future generations can thrive;
   - promoting global prosperity: preventing malnutrition increases productivity and economic growth. Children whose growth is stunted due to poor diet and ill health do less well at school, earn less as adults and go on to have malnourished families of their own. It is estimated that a 40% reduction in stunting by 2025 could add $83 billion to national incomes in Africa over the period 2035 through to 2060;
   - tackling extreme poverty and helping the world’s most vulnerable: preventing malnutrition is one of the most cost-effective ways of spending UK aid. It helps people escape extreme poverty, boosts economic growth and reduces the need for aid in the long-term. Economists estimate that every dollar invested to reduce stunting delivers a return of sixteen times as much in increased economic productivity and reduced burden on public services.

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2.4 The Bilateral Development Review 2016 reaffirmed the high priority the government attaches to nutrition, and its pledge to lead the world and boost action on nutrition. The Economic Development Strategy 2017 also sets out how DFID’s approach to economic development will help improve nutrition.

2.5 This position paper sets out the accelerated and intensified action DFID will now take, both to deliver on its own plans, and to galvanise other governments, international organisations, the private sector and civil society to step up so that the world can get on track to achieve Global Goal 2.

18 month old, Emmanuel John, drinks milk at the malnutrition ward in Al Sabbah hospital Juba, South Sudan © Albert Gonzalez Farran/UNICEF (2017)
3. New DFID priorities

3.1 DFID will scale up its work to address the needs of young children, which will remain at the core of everything DFID does on nutrition. Investments will be prioritised to the ‘1000 day window’ from conception to 2 years-of-age when undernutrition can be prevented most easily and most economically. Support will also be provided to ensure that the most severe forms of undernutrition in children up to five years old are treated and that these children benefit from other services aimed at promoting healthy growth and development.

3.2 Between now and 2020, in addition to this ongoing work, DFID will give new priority to:

- preventing wasting, micronutrient deficiencies and low birthweight, alongside existing work to prevent child stunting. Evidence shows that these forms of undernutrition frequently coexist and that dealing with all forms of undernutrition will deliver maximum impact;
- addressing the nutritional needs of women and adolescents, particularly adolescent girls. Good nutrition is important to help adolescent girls stay healthy, learn and become economically empowered. Reaching adolescent girls before they become pregnant also helps reduce the risk of malnutrition among any children they choose to have in the future. DFID will therefore test innovative ways to reach adolescent girls, including using digital technology. DFID will also seek to strengthen the voice of women and girls in the production, purchase and distribution of food, and increase the control women and girls have over decisions about infant feeding. DFID will support equal access to resources (including food, water, energy) and work to break down discriminatory taboos. Action to improve the nutrition of women and girls will be underpinned by DFID’s commitment to increase access to family planning services, end early and forced marriage, and to empower women and girls more broadly;
- strengthening the breadth and quality of DFID’s nutrition-sensitive\(^8\) multi-sector investments as a result of the evidence showing that nutrition-specific\(^9\) interventions will only address 20% of stunting;
- enabling countries to be ready for the future by strengthening leadership and delivery, and by building resilience to future shocks;
- achieving a global architecture for nutrition that works in support of countries that face a high burden of malnutrition;
- improving the quality and availability of nutrition data.

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\(^8\) Nutrition-sensitive approaches address the underlying determinants of malnutrition, covering a range of ‘sector’ activities (e.g. agriculture, social protection, WASH). Including an explicit goal to reduce malnutrition, assessing how an intervention can support better nutrition among women, adolescent girls and children, and monitoring nutrition outcomes all help ensure a programme is nutrition-sensitive.

\(^9\) Nutrition-specific interventions work on the direct causes of malnutrition and include breastfeeding, complementary feeding, supplementation with micronutrients, zinc supplementation during diarrhoea and treatment for acute malnutrition.
3.3 Tackling undernutrition will remain DFID’s nutrition focus. But failing to consider the risk of obesity will leave many countries with a costly public health problem. DFID will not work directly on this issue but will seek to ensure our work to prevent undernutrition in low-income countries minimises rather than contributes to the chances of people becoming overweight or obese. Preventing undernutrition is a good starting point. Children who grow up free from stunting are less likely to suffer from obesity or diet-related non-communicable diseases later in life.

3.4 Section 4 sets out DFID’s new approach, combining effective current approaches with the new priorities set out above.
4. DFID’s new approach

4.1 In line with the latest evidence, DFID will continue to support the scale-up of nutrition-specific services in the countries where it works, but will also increase the coverage and impact of nutrition-sensitive interventions. Providing nutrition-specific and nutrition-sensitive services together and in the same places where possible will help maximise impact on malnutrition. UK investments will leave no one behind by focusing on reaching the extreme poor, the most marginalised and those in fragile and conflict affected states. DFID will prepare for the future by supporting government leadership, capacity and system strengthening to deal with current and new challenges to nutrition. This will include challenges arising from climate and environmental change and urbanisation. And DFID will step up its work to leverage private sector investments that are beneficial to nutrition. This four-pronged approach will benefit those most at risk of malnutrition today and reduce risk among future generations. The case study from Nigeria (Box 2) illustrates what this approach looks like in practice.

**Box 2: A whole-of-system approach in Nigeria**

Nigeria is home to more than 10 million stunted children, a burden second only to India. There are 2.5 million wasted children and nearly half of women are anaemic. DFID plans to reach more than 3 million women, adolescent girls and children through existing programmes and new investments. DFID will:

- Deliver a comprehensive nutrition programme that addresses the immediate and underlying causes of undernutrition for the most vulnerable groups in priority states;
- Introduce nutrition-sensitive cash transfers into its humanitarian programme;
- Integrate nutrition into health, education and agriculture investments;
- Deliver basic nutrition services to conflict-affected areas and displaced people through a multi-year humanitarian programme;
- Invest in national capacity to design, implement and monitor nutrition-related programmes by integrating basic nutrition training into DFID’s health programmes;
- Incorporate robust monitoring and evaluation into its nutrition programmes.

DFID will work with others to hold the government of Nigeria to account for increasing its own funding for nutrition. DFID will support relevant ministries by:

- Providing technical assistance to the Federal Ministry of Agriculture and DFID’s priority states to implement their food and nutrition security strategy;
- Supporting the Special Adviser in the office of the President to develop a national safety net programme, using evidence, to promote nutrition outcomes;
- Ensuring the National Health Act includes nutrition-specific actions as part of primary care; that these services are financed domestically; and that nutrition indicators are in the health information system and reported on regularly;
- Supporting the development of Food and Nutrition Security Policy, an associated costed plan, and promoting implementation particularly in DFID’s priority states;
- Harnessing the Scaling Up Nutrition (SUN) movement to improve coordination and foster accountability.
Maximising impact

4.2 Nutrition-specific interventions are essential to help prevent malnutrition and save lives. But evidence now shows that this package will only reduce stunting rates by 20%. As such, DFID will increasingly prioritise nutrition-sensitive interventions that address the underlying and root causes of malnutrition.

4.3 DFID will particularly promote nutrition-sensitive health programmes. It will:
- support governments to deliver a full package of evidence-based nutrition-specific services alongside other essential health interventions. This support will include increasing the numbers of children receiving effective treatment for severe undernutrition through the health sector (see Box 3);
- promote better analysis of the barriers to maternal, infant and young child nutrition, and draw on new research on the social factors that influence the dietary choices that people make to ensure information, education and communication on nutrition is as appropriate and effective as possible;
- support the scale up of micronutrient supplements delivered through the health sector to address key deficiencies and complement this with investments in food fortification and the roll out of bio-fortified crops.

4.4 DFID will also enhance the nutrition-sensitivity of its investments in agriculture, WASH, social protection and education. Specifically, DFID will:
- increase the number of nutrition-sensitive WASH programmes in priority countries and launch a new global programme to deliver nutrition-sensitive WASH services. This will be designed to benefit women, adolescent girls and children and to build high quality research evidence to support effective integration of nutrition and WASH;
- expand its work on nutrition-sensitive agriculture and food systems. DFID will support the adoption of farming, harvesting, storage and processing techniques that preserve nutrients and improve food safety, and the selection of crop choices that maximise nutrition benefits in line with national nutrition goals. Working with the private sector, DFID will strengthen national and global food systems to make nutritious diets more affordable and accessible to the poor, in particular for women, adolescent girls and children. DFID will also work with CDC and other development finance institutions to better understand and increase the positive nutritional impacts of their investments;
- build on its strong track record in supporting long-term social protection programmes that improve the nutrition of the poorest and most vulnerable women and children. DFID will, for example, promote adoption of a nutrition-focused Child Development Grant by the Government of Nigeria; and continue to fund the nutrition-sensitive productive social safety net programme in Tanzania;
- assess the potential to increase the nutrition-sensitivity of DFID education programmes, particularly where this will help reach adolescent girls; and support families to enhance...
brain development through better nurturing in early childhood alongside improved nutrition.

4.5 To be classified as nutrition-sensitive, programmes will be required to make the prevention of malnutrition or improvement of diets an explicit objective. These investments will also have to be designed to meet the needs of women, adolescent girls and children, and to monitor benefits effectively. Research has identified that the nutrition-sensitivity of programmes can be enhanced by: improving targeting towards at-risk groups (particularly women, adolescent girls and young children); including explicit nutrition goals and action in programme design; and focusing on improving women’s physical and mental health, workload and empowerment.10

4.6 Strengthening the nutrition-sensitivity of investments in the above sectors not only delivers better results; it also represents better value for money. Delivering multiple outcomes through programmes maximises the impact of every pound spent.

Box 3: Integrating health and nutrition

The majority of nutrition-specific interventions are reliant on health systems for successful delivery and yet in many countries these interventions continue to be neglected or missing components of an essential package of health services. Coverage of many components of the package remains low. For example, coverage rates of zinc treatment for diarrhoea is less than 5%, iron-folic acid supplementation in pregnancy is less than 30% and only 15% of cases of severe acute malnutrition get treated. These coverage rates are considerably lower than those of other child survival interventions, including treatment for pneumonia (54%) and malaria (34%). Many gaps exist across the health system that contribute to these low rates of coverage, for example: (i) medical doctors and nurses have not routinely been trained in nutrition; (ii) nutrition commodities, particularly Ready to Use Therapeutic Food, are not included on essential medicines lists or integrated into health supply chains; and (iii) indicators to track coverage of nutrition interventions are not incorporated into health management information systems.

Addressing this lack of integration will be a focus of a number of DFID’s health and nutrition programmes. For example:

- in Kenya, DFID will improve the capacity of the health system to deliver high-impact nutrition interventions with a particular focus on the Arid and Semi-Arid Lands;
- in South Sudan, DFID will support the effective integration of severe acute malnutrition treatment and other nutrition services in the Health Pooled Fund;
- in Somalia, DFID’s new health and nutrition programme will support revision of the Essential Package of Health Services. The objective is to improve coverage and quality of nutrition interventions and to make sure delivery partners are held accountable.

Leaving no one behind

4.7 The Global Goals emphasise the importance of reaching the extreme poor and the world’s most vulnerable, excluded and disadvantaged people. The UK is committed to provide leadership for the Leave No One Behind Promise agreed by heads of state in September 2015. DFID’s focus on reaching women, adolescent girls and children most at risk of undernutrition will help realise this commitment, because undernutrition disproportionately affects the poorest and most marginalised. DFID will focus on the hardest to reach by:

- investing in and redesigning agriculture and social protection programmes so that they have more positive impacts on nutrition and help the extreme poor escape a cycle of undernutrition and disadvantage;
- promoting nutrition-sensitive multi-year humanitarian programmes that prevent and treat malnutrition in its various forms in fragile and conflict affected states and, as far as possible, designing these investments so that they leave a legacy of strengthened delivery and support systems to address malnutrition in the longer term;
- using evidence generated from DFID’s humanitarian research to improve the design of social protection systems to prevent undernutrition when shocks and disasters arise. DFID will also invest to generate evidence on effective ways to build resilient health systems that can prevent malnutrition effectively and provide quality treatment for severe undernutrition;
identifying and testing cost-effective approaches for preventing undernutrition in all forms among long-term displaced populations. As part of a comprehensive cross-government approach to addressing the migration crisis, DFID is working in countries in Africa and Asia to reduce the pressures that might lead people into forced migration. As DFID scales-up its support for displaced populations, nutrition-sensitive approaches will be integrated where appropriate into its assistance. DFID is encouraging multilateral organisations to take a longer-term, more developmental approach to supporting displaced populations. This includes ensuring livelihood opportunities lead to better nutrition outcomes;

- seeking to better address the nutritional needs of people with disabilities, and those living with HIV.

4.8 DFID will deliver emergency nutrition support in line with humanitarian principles in contexts where government systems are unable to address needs. In doing so DFID will ensure the international system takes a coherent approach to prevent and treat malnutrition and that it acts in accordance with international standards, including to ensure safe feeding for infants and young children affected by emergencies. DFID will monitor and report on the numbers of people reached with nutrition support in rapid onset emergencies.

4.9 DFID recognises that in order to leave no one behind, we all need better data. DFID will therefore invest to improve the collection and use of data, including by governments. It will also invest in innovative modelling using open access data and digital technology to improve nutrition early warning systems. This will enable timely and effective action to prevent undernutrition among vulnerable populations living in fragile contexts.

Preparing for the future

4.10 Delivering impact on nutrition now does not automatically mean future generations will be protected. Achieving a long term end to malnutrition will require concerted investment in leadership, policy, systems and capacity.

4.11 DFID will put governments in the driving seat by making technical assistance available where it is needed. It will give particular focus to fostering leadership and action on nutrition in fragile and conflict affected states. UK-funded technical expertise will help strengthen analysis of the drivers of malnutrition in high-burden countries. This will include identifying how climate change and urbanisation will affect nutrition trends and economic growth and what can be done to reduce negative impacts. This action will be underpinned by work done by the Global Panel on Agriculture and Food Systems for Nutrition to identify policy solutions to ensure food systems are climate and nutrition smart.

Leveraging the private sector

4.12 DFID will work with Nutrition for Growth stakeholders, the SUN Business Network and others to increase the contribution business makes to reducing malnutrition. This will include both nutrition-specific and nutrition-sensitive business interventions. Investing in healthier and more productive workforces and societies should sit more firmly within private sector core business models as part of their responsible and sustainable growth strategies.

4.13 DFID will specifically seek to mobilise greater private sector investments in agriculture and food systems that improve the quality of diets for women, adolescent girls and children. DFID will, with others, do so by helping remove barriers that prevent poor people from accessing markets for nutritious foods. In addition, DFID will facilitate and incentivise
greater private sector action on nutrition by improving the knowledge and evidence base on what works and what doesn’t, and by strengthening accountability mechanisms. This will include promoting responsible business behaviour, including adherence to the International Code on the Marketing of Breast Milk Substitutes.

4.14 As set out in the new Economic Development Strategy, DFID will challenge itself and others to make economic development work better for health and nutrition to maximise its impact on poverty reduction and prosperity. DFID’s investments in economic transformation will also seek to improve the nutrition of women, adolescent girls and children and to avoid adverse impacts.
5. How DFID will work

5.1 To deliver this ambitious agenda, DFID will: foster effective international leadership and coordination; set high expectations of the partners DFID works with; help harness new resources; innovate and build evidence of what works; promote accountability for action; and ensure value for money.

Fostering effective international leadership and coordination

5.2 Progress has been made through the SUN Movement, but challenges remain around the coordination of action on nutrition by the UN, civil society, donors and the private sector in support of government priorities. Quality of leadership and coordination for nutrition in emergencies also continues to be inconsistent.

5.3 DFID will empower government leadership by making world class expertise available to governments to support policy development, implementation and to strengthen monitoring and accountability. In supporting delivery of the 2016–2020 SUN Roadmap, DFID will want to see that priorities are decided at country level, that all actors align behind these national priorities, and that countries understand what global financing options are available. DFID will also support south-south engagement and learning on nutrition through its funding to the SUN Movement.

5.4 DFID will also work with members of the SUN Movement to ensure that commitments made at Nutrition for Growth and through other global events are harnessed most effectively in support of country-led action.

Setting high expectations of partners

5.5 Effective action by multiple actors is critical for delivering transformational change for nutrition. DFID will work with the SUN donor, business and civil society networks to galvanise a step change in the global effort on nutrition. DFID will also work closely with key multilaterals working on nutrition to ensure that UK core funding contributions help deliver effective, transparent, value for money nutrition results. DFID will expect relevant multilateral partners to focus their efforts on key challenges such as supporting private sector initiatives to produce low cost, healthy foods that can be accessed by women and children. DFID will also work to introduce indicators to track the performance of key multilaterals on nutrition, and to track effective inter-agency collaboration. DFID will also push its multilateral partners to improve their results reporting.

5.6 DFID will continue to build on the legacy of N4G. DFID is supporting the N4G event in Italy in November 2017 as part of our work to mobilise additional commitments and to keep nutrition in the global spotlight. DFID will also seize opportunities via other international platforms to promote global action on nutrition.

5.7 DFID will also work with other UK government departments to draw upon their learning, skills and knowledge in addressing global nutrition challenges.
Harnessing new resources to address malnutrition

5.8 Analysis of the cost of achieving global nutrition targets indicates the magnitude of the task ahead. Official Development Assistance will be important but far from sufficient to cover the costs of scaling up nutrition actions. Increasing domestic financing will be critical.

5.9 The UK Aid Strategy committed to double the amount DFID invests in improving the tax systems of developing countries. Some of the increased domestic revenue can be invested in nutrition. DFID’s technical assistance through the SUN Movement will make sure that country nutrition action plans are costed and that domestic financing is prioritised appropriately. Alongside this, DFID will directly engage with governments to increase their funding for nutrition-specific and nutrition-sensitive services.

5.10 Globally, DFID will leverage additional donor and private sector resources through its matched funding and its support to the Power of Nutrition catalytic financing facility.

Innovating and building evidence of what works

5.11 The UK Aid Strategy affirms the importance of the use of high quality evidence in decision making. DFID will ensure its nutrition investments are based on rigorous evidence and include robust evaluation. DFID has been instrumental in expanding and strengthening the quality of the evidence base for nutrition. Further accelerating the generation of high quality evidence in key areas will be critical to meet nutrition targets by 2030.

5.12 DFID will provide global leadership in commissioning research and evaluations that directly inform programming and policy across DFID and the wider development community. DFID’s evaluation portfolio will recognise the potential for improvements in nutrition outcomes arising from multiple sectors including health, agriculture, WASH, social protection, infrastructure, climate and environment. Given the particular evidence gap in what works to prevent wasting, micronutrient deficiencies and low birthweight, DFID will make sure evaluations measure these nutrition outcomes whenever possible.

5.13 DFID will work with its professional cadres to build technical capacity and share evidence within DFID’s country programmes and with the wider development community. It will support efforts to make nutrition-relevant data globally available and unrestricted through the Global Open Data on Agriculture and Nutrition initiative. It will aim to strengthen the evidence base in the following areas:
  - the role of strengthening health systems to improve nutrition outcomes especially for women and children;
  - policies to strengthen agriculture, nutrition and food systems and increase resilience to climate change;
  - the development and use of bio-fortified crops and other agricultural technologies to improve nutrition outcomes;
  - the design of health and social protection systems that are better placed to respond to shocks and prevent undernutrition;
  - the role of improving water, sanitation and hygiene in reducing malnutrition.

5.14 DFID’s nutrition investments will also support innovation. This will include research on innovations that harness digital technology to improve nutrition, including mNutrition, nutrition information platforms and an investment to strengthen surveillance and early warning systems.
Promoting accountability for action on nutrition

5.15 The history of nutrition is beset with commitments that have not been fully realised. Monitoring progress and holding all actors to account is therefore critical.

5.16 The UK will lead by example by making sure it meets its own commitments to nutrition, and by reporting progress annually through the Global Nutrition Report. DFID will support the Global Nutrition Report up to 2020 to enable comprehensive monitoring and accountability. DFID will also foster a culture of accountability and action through global N4G events.

5.17 DFID will inspire a data revolution for nutrition to enable effective monitoring and accountability globally and in the countries where it works. Globally, DFID will collaborate with the Bill & Melinda Gates Foundation and others to foster coordinated action on data, identify new tools to improve the quality and availability of data, and encourage greater investment. At country level, DFID will support the development of nutrition information platforms to enable governments to monitor coverage of nutrition services, identify the most cost-effective strategies for reducing malnutrition, and to track progress towards World Health Assembly targets and the Global Goals.

Ensuring Value for Money

5.18 DFID has a duty to the UK taxpayer and those living in extreme poverty to ensure it does everything it can to maximise value for money. DFID is taking further steps to cut waste and subject aid to robust independent scrutiny. DFID will work with its partners to drive reform of the international system to embrace much greater transparency, accountability and value for money. DFID will ensure aid reaches those who need it most and improves the lives of the poorest people in the world.