

A GLOBAL LEADER

THE UK'S ROLE IN ENDING MALNUTRITION

RESULTS

What is malnutrition?

“LACK OF MONEY TO BUY THE RIGHT COMBINATION OF FOOD, AND LACK OF KNOWLEDGE OF HOW TO COOK A BALANCED DIET IS THE CAUSE OF MALNUTRITION”

HADIZA, 17, BANGLADESH¹

Malnutrition is caused by having key nutrients missing from your diet. It is responsible for more ill health than any other cause.²

Malnutrition is a key driver and a symptom of poverty

Malnutrition prevents vaccines from working and devastates immune systems. This can cause death, lifelong serious illness and dramatically hinders the ability for countries and communities to develop economically.

The good news is that malnutrition is preventable and treatable - and 2020 will be a key moment in the fight to end it once and for all.

The UK has spearheaded the global fight against malnutrition

In 2020, Japan will host the next Nutrition for Growth summit.

The Nutrition for Growth agenda was kicked off by the British Government at a summit in 2013, where partners pledged \$24bn over seven years to ending malnutrition.

The summit caused a 33% uplift in global nutrition spending.⁷

The UK is currently the world's leading global donor on nutrition, followed very closely by the World Bank and the US.

Nutrition programs run by the UK's Department for International Development (DfID) alone have reached 42m people between April 2015 and March 2018.⁸ That's a population five times that of London whose lives have been saved or transformed by UK interventions.

What are interventions in nutrition?

Interventions in nutrition can take many forms but broadly fit under two categories; nutrition specific or nutrition sensitive. 84% of DfID's interventions are nutrition sensitive.⁹

Nutrition specific projects explicitly improve nutrition outcomes. Examples are humanitarian food packages or provision of treatment for people suffering from acute malnutrition.

Nutrition sensitive interventions contribute to nutrition objectives but also help to achieve a number of other goals. Examples are

DIVERSE DIETS



Zambian diets are heavily reliant on maize, which is rich in carbohydrate but low in protein and fat and lacks many essential vitamins. As a result, 44% of the Zambian population suffer lifelong physical or cognitive stunting due to missing vital nutrients at key points in their growth.³

45%

of under-5 deaths worldwide malnutrition is a root cause⁴

1 IN 4

children worldwide suffer lifelong physical or cognitive stunting as a result of malnutrition⁵

\$3.5 TN

cost of malnutrition to the global economy⁶

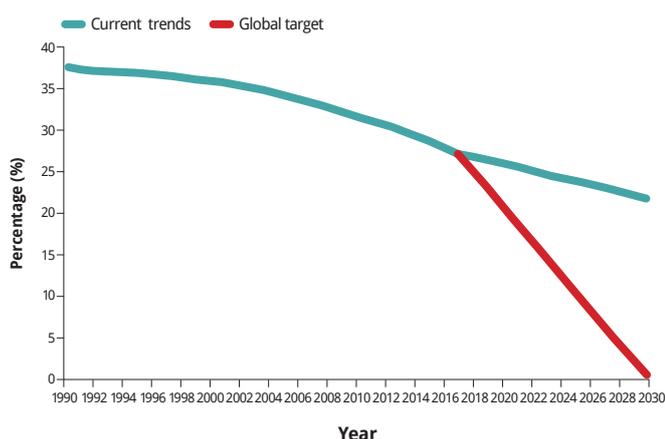
provisions to help farmers grow nutritionally rich foodstuffs or education campaigns about health.

What needs to happen?

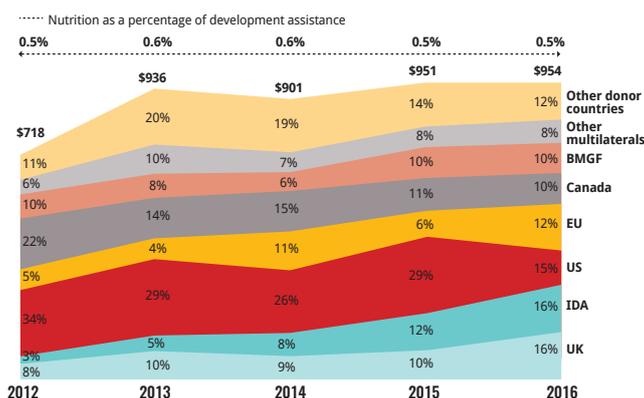
In 2015, governments agreed to end malnutrition in all its forms by 2030. Despite immense progress, at current rates the UN expects this target to be “largely missed.”¹⁰

In 2020, existing Nutrition for Growth pledges will expire and Japan will host the next summit in Tokyo. The summit is our chance to get back on track and end malnutrition once and for all - but that will not be possible unless the UK continues in its role as global leader.

ENDING STUNTED CHILD GROWTH

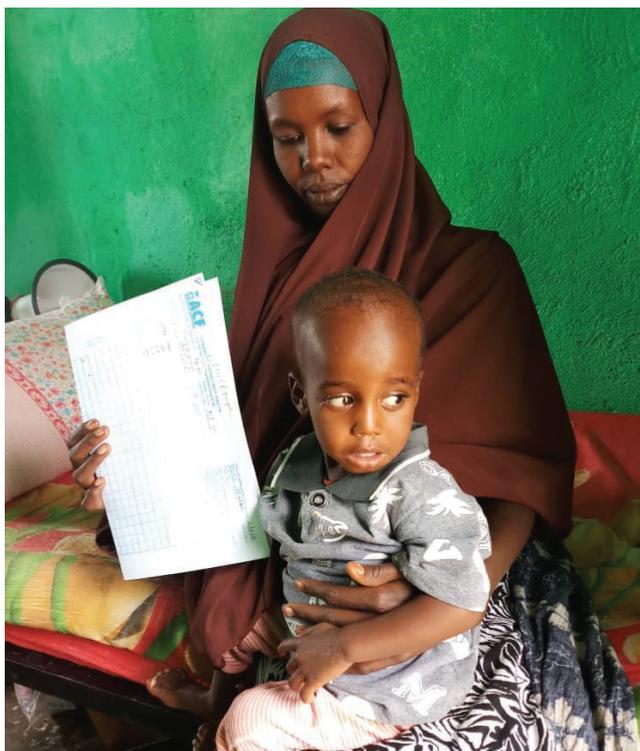


TOTAL DEVELOPMENT ASSISTANCE FOR NUTRITION 2012-2016



OECD CRS. Gross disbursements; in 2016 prices; US\$millions. 'Nutrition' refers to the funding for 'basic nutrition' (CRS purpose-code 12240). 'BMGF' refers to the Bill & Melinda Gates Foundation.

SAVED FROM SEVERE ACUTE MALNUTRITION



Mohamed Abdi is a 14 month old from an area of Somalia struck by famine. Five months ago, Mohamed suffered from Severe Acute Malnutrition. Unlike most children his age, he was unable to stand or sit upright. He was sad, irritable and cried often.

“It all began with a fever, then diarrhea and vomiting that lasted two weeks. His condition deteriorated by the day and he started losing weight rapidly”, said Luul Umar, his mother.

Mohamed was referred to the DfID funded Action Against Hunger Stabilization center. On admission, he weighed 6.3kg. “He was thin, bony and extremely wasted. He had elevated temperature of 40 degrees and could hardly feed due to sores in his mouth,” described his nurse, Abdinur.

“We started him on antibiotics and therapeutic nutritive milk. The response was immediate. On the second day his fever was gone and, within a week, his oral sores healed and he was able to feed”.

While Mohamed was treated, Luul was taught about child health by the nurses to ensure that Mohamed would continue to get the support he needed once discharged.

Through treatment, Mohamed gained more than 1kg. He was cheerful and playful, a sign of recovery. “It was hard to recognize him!” exclaimed Abdinur. “Thanks for saving his life” said his mother, as they left the centre.

Reference: Action Against Hunger Somalia

LIFE CHANGES THROUGH NUTRITION

Fatima Babanne is from a remote part of northern Nigeria. Pregnant and with three children, she struggles to afford the healthy diet she and her family need.

Following an assessment, Fatima was enrolled onto DfID’s Child Development Grant Programme (CDGP). The programme provided her with an unconditional monthly cash transfer of 4,000 NGN (£8) and enrolled her on an education course about child health and nutrition.

Fatima used her grant to buy healthy food and saved a small amount each month in order to start a millet grinding business, with which she now generates 10,000 NGN (£21) profit per month.

She can now afford to buy her family a diverse diet, give her children an education and she now shares the information she learnt through the programme with others in her community through community talks, meetings and food demonstrations.

Reference: Action Against Hunger Nigeria



TO HELP IN THE CAMPAIGN AS WE APPROACH TOKYO 2020, PLEASE CONTACT N4G@APPG-N4G.ORG.UK / 0207 793 3970.

Endnotes

- 1 Save the Children, Our Nutrition Our Future project, 2017.
- 2 Global Nutrition Report 2018, Executive Summary, available at <https://globalnutritionreport.org/reports/global-nutrition-report-2018/executive-summary/>, accessed 27 March 2019.
- 3 Save the Children, Malnutrition in Zambia, 2016, available at <https://www.savethechildren.org.uk/content/dam/global/reports/health-and-nutrition/malnutrition-in-zambia.pdf>, accessed 27 March 2019.
- 4 World Health Organisation, Malnutrition Factsheet, available at <https://www.who.int/news-room/factsheets/detail/malnutrition>, accessed 27 March 2019.
- 5 Thousand Days, The Issue, available at <https://thousanddays.org/the-issue/>, accessed 27 March 2019.

- 6 UN Food and Agriculture Organisation, The State of Food and Agriculture, 2013, p11, available at <http://www.fao.org/3/i3300e/i3300e.pdf>, accessed 27 March 2019.
- 7 Donor Tracker data, 2018, available at donortracker.org/sites/default/files/highlightstories/pdf/DT_HighLightStory_AreWeMakingProgress_March2018_1.pdf, accessed 27 March 2019.
- 8 DfID Annual Reports and Accounts 2017-18.
- 9 Development Initiatives, DfID’s aid spending for nutrition 2016, 2018, available at <http://devinit.org/post/latest-trends-uk-aid-spending-nutrition/>, accessed 27 March 2019.
- 10 The UN, SDG2, available at <https://unstats.un.org/sdgs/report/2016/goal-02/>, accessed 27 March 2019.

RESULTS

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