



# Investing in Nutrition to Achieve Sustainable Development

*Despite extraordinary returns on investment and a high cost-benefit ratio, current global spending for basic solutions to improve nutrition totals less than 1% of development aid (estimated at \$0.25-0.3 billion). Scale-up of nutrition-focused aid is crucial to end malnutrition and – ultimately- save lives.*

## Malnutrition is a global problem

Every country in the world suffers from at least one form of malnutrition: undernutrition, overweight/obesity or micronutrient deficiencies. Globally 161 million children under age 5 - approximately 1 in every 4 - are stunted (low height for age) and 51 million suffer from wasting (low weight for height). Long term stunting and wasting result in limitations to both physical and cognitive development. Nearly 40% of pregnant women suffer from anemia, a risk factor for preterm delivery and subsequent low birth weight. Furthermore, a staggering 2 billion people suffer from overweight or obesity. We are now in a world where the new normal involves dealing with multiple burdens of malnutrition which are connected financially, physiologically, and politically.

## Sustainable development requires adequate nutrition

Good nutrition is not just an outcome of development, but also a driver of economic growth and human development. Ensuring adequate nutrition for all will make vital contributions to achieving the SDGs and set countries on a strong social and economic growth trajectory.

The first 1,000 days of a child's life - from the start of a woman's pregnancy to her child's 2<sup>nd</sup> birthday - is the window of opportunity to take action and prevent irreversible damages caused by poor nutrition. Ensuring good nutrition for women and adolescent girls is critical to laying a strong foundation for healthy and productive adults and children. Undernourished women are likely to give birth to children prone to stunting, wasting, and micronutrient deficiencies which prevent them from attaining their full growth and future economic potential. Thus, undernutrition pushes individuals into a vicious cycle of ill health, poverty, and unnecessary suffering perpetuated across generations. Furthermore, undernutrition in the womb also sets the stage for non-communicable diseases in later life.

Overweight and obesity negatively impact strides in development, as they increase the risk of developing non-communicable diseases such as diabetes and heart disease. They are a high burden for health systems and result in lower productivity, lower incomes and even premature deaths.

## The human and economic costs of NOT addressing malnutrition are high

Undernutrition, micronutrient deficiencies and overweight and obesity are all preventable conditions. Timely investment in preventive strategies for these conditions early in one's life can mitigate both the long term consequences and large costs across one's lifespan.

Undernutrition and micronutrient deficiencies during the first 1,000 days of life can reduce a child's IQ by up to 10%. Undernourished children are therefore likely to complete fewer years of school and have a reduced earning potential of at least 10% of their lifetime earnings.<sup>1</sup> Collectively the costs of poor nutrition as a result of impaired national productivity represent an estimated loss of 2-3% of a country's GDP,<sup>1</sup> yet these losses can be as high as 16%.<sup>2</sup>

Furthermore, it contributes to 45% of deaths of children under 5 years of age and approximately 40% of maternal deaths.

Overweight and obesity rates are on the rise across all regions of the world, of which direct costs are estimated to account for 5-10% of a country's health care spending.<sup>3</sup> Indirect costs, such as reduced productivity and premature mortality, are also incurred. In totality, direct and indirect global costs of overweight and obese persons are currently estimated at \$2 trillion.<sup>4</sup>

### Investing in nutrition has high human and economic returns

Investments in good nutrition are competitive with investments in roads, irrigation, and health<sup>5</sup> as they are associated with better health and education outcomes, and increased productivity. Moreover, there is evidence to show the benefits of low-cost and high-impact interventions to address poor nutrition. Supplementation and fortification to tackle micronutrient deficiencies were found to be the most cost effective interventions to advance global welfare, according to the Copenhagen Consensus. Every dollar spent in scaling up nutrition interventions targeting the first 1,000 days of life yields a return of at least \$16,<sup>5</sup> and every additional centimeter of adult height is associated with a 4.5% increase in wage rates.<sup>6</sup> The benefits of these onetime investments last a lifetime.

### Big strides towards ending all forms of malnutrition is possible in our lifetime

Evidence based interventions with a proven track record to reduce undernutrition exist. A set of 10 interventions addressing the immediate causes (inadequate diet and disease burden) of undernutrition has been identified. These interventions include exclusive breastfeeding for the first 6 months, adequate complementary feeding, and micronutrient supplementation. Existing evidence suggests that scaling up this set of 10 interventions will reduce stunting rates by 20% and severe wasting by 61%.<sup>7</sup> The cost of scaling up this set of interventions for 90% coverage in the 34 countries bearing over 90% of the stunting burden will require an additional \$9.6 billion per year.<sup>7</sup>

Nutrition-sensitive interventions addressing the underlying causes of undernutrition (food insecurity, inadequate care and lack of health services and sanitation) have been identified and are embedded across several sectors including agriculture, health, WASH, social protection and education. These interventions have an enormous untapped potential and are essential to reducing undernutrition and meeting the comprehensive goals of the SDG Agenda.

Policies and actions aimed at improving maternal and child malnutrition in the first 1,000 days of life can also prevent childhood overweight<sup>8</sup> and non-communicable diseases later in life.

### We Urge Global Leaders to:

- Make transformative financial commitments for nutrition within other sectors to tackle malnutrition in all of its forms.
- Increase ODA to 0.7% of Gross National Income, and increase and allocate funds for nutrition.
- Make national budget allocations specifically for nutrition interventions.
- Track current levels of domestic resource allocation to nutrition.
- Commit to accountability and transparency mechanisms in monitoring nutrition spending and linking investments with outcomes.
- Strongly support the inclusion of indicators to track all 6 WHA targets, dietary diversity and budget allocated to nutrition, as this would further the momentum for increased action to tackle malnutrition.

**This brief was developed by Concern Worldwide and The Hunger Project, with input from the International Coalition on Advocacy for Nutrition**

<sup>1</sup> Horton S. et al. Scaling Up Nutrition What Will It Cost?. The World Bank 2010. <http://siteresources.worldbank.org/HEALTHNUTRITIONANDPOPULATION/Resources/Peer-Reviewed-Publications/ScalingUpNutrition.pdf>

<sup>2</sup> The Cost of Hunger in Africa. Implications for the Growth and Transformation of Ethiopia. Social and Economic Impacts of Child Undernutrition in Ethiopia. <http://documents.wfp.org/stellent/groups/public/documents/newsroom/wfp263405.pdf>

<sup>3</sup> Gilden Tsai A. et al. Direct medical cost of overweight and obesity in the United States: a quantitative systematic review. *Obes Rev.* 2011 Jan; 12(1): 50–61.

<sup>4</sup> Dobbs R. et al. How the world could better fight obesity. McKinsey Global Institute. November 2014

[http://www.mckinsey.com/insights/economic\\_studies/how\\_the\\_world\\_could\\_better\\_fight\\_obesity](http://www.mckinsey.com/insights/economic_studies/how_the_world_could_better_fight_obesity)

<sup>5</sup> Haddad L et al. Global Nutrition Report. IFPRI 2014 <http://www.ifpri.org/sites/default/files/publications/gnr14.pdf>

<sup>6</sup> Horton S, Steckel R. Global economic losses attributable to malnutrition 1900- 2000 and projections to 2050. Copenhagen Consensus on Human Challenges 2011. <http://www.copenhagenconsensus.com/sites/default/files/malnutrition.pdf>

<sup>7</sup> Bhutta ZA et al. Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost? *Lancet* 2013; 382: 452-77

<sup>8</sup> Global Nutrition Targets 2025. Childhood Overweight Policy Brief. [http://apps.who.int/iris/bitstream/10665/149021/2/WHO\\_NMH\\_NHD\\_14.6\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/149021/2/WHO_NMH_NHD_14.6_eng.pdf)