

Summary of submissions received for the theme of the Second intersessional event on Nutrition

The CFS OEWG-Nutrition workplan for 2016-2017, in line with the Strategy for *CFS engagement in advancing nutrition* endorsed in CFS 43, includes the organization of two intersessional events on Nutrition to “to develop common understanding of issues and lay the basis for informed CFS policy convergence work” (CFS 2016/43/9), based on UNSCN technical briefs or other technical background documents.

At the first OEWG-nutrition on 4 November 2016, participants agreed to hold the first event, scheduled on 9 May 2017, on “Investments for Healthy Food Systems”, supported by UNSCN’ discussion paper on the same theme. To determine the theme of the second event (scheduled 26 May 2017), the Chair of the OEWG Nutrition invited CFS members and participants to submit their preferred theme (either among the list of UNSCN available discussion papers, or suggesting a different topic).

Below is the summary of contributions received (with some constituencies expressing more than one preference):

- **“Impact assessment of policies to support healthy food environments and healthy diets”:** (Australia, Italy, FAO and WHO, CSM)
Suggested background material: UN SCN discussion paper
- **“Climate Change, Diets, Nutrition and Healthy Diets”:** (IFAD, France, Canada, CSM)
Suggested background material: UN SCN discussion paper
- **“Stunting”:** (EU, France, PSM)
Suggested background material : to be determined; see PSM proposal
- **“Nutrition governance”:** (Germany, WFP, CSM)
Suggested background material : UN SCN discussion paper

A discussion is foreseen in the 2nd OEWG-Nutrition meeting to agree on the theme of the second CFS intersessional event on Nutrition.

Annex 1 : List of UNSCN discussion papers and submitted elaboration on topics

Annex 1:

A. UNSCN-Provided Summaries of Existing and Forthcoming Policy Papers

Investment for Healthy Food Systems: Implementing the Framework for Action of the Second International Conference on Nutrition

Hard copies of the full report and the Executive Summary are available upon request

Food systems – from producer to consumer, from farm to flush – are created by a multitude of decisions from individuals, companies, and governments about what and how to produce, process, market and consume. Arguably, the most important of those decisions are about what to invest in, as those are the decisions that establish the long-term capacity and direction of a food system. This publication is intended to assist countries, and others, to make investments with long-term beneficial nutrition and health outcomes.

Impact Assessment of Policies to support Healthy Food Environments and Healthy Diets: Implementing the Framework for Action of the Second International Conference on Nutrition

Hard copies of the full report and the Executive Summary are available upon request

ICN2 highlighted the role of food systems and the Framework for Action lists a few recommended actions for sustainable food systems. In order to support the ICN2 recommended actions it is implied that policies need to be assessed for their impact on diets and access to nutritious food. This requires the ability to measure and monitor relevant food environment and dietary outcomes as well as a system to review policies across sectors for their (likely) impact on these outcomes. This paper explores opportunities for and challenges to the ICN2 goal of coherent policies that would support year-round access to food that meets people's nutritious needs. It proposes options for their likely impact on food environments and dietary outcomes, which rests on the ability to measure those outcomes.

Climate change, Diets, Nutrition and Healthy Diets

Currently under production

This paper presents a descriptive analysis of the interconnections of sustainable food systems, dietary patterns, health and nutrition in a context of climate change. The paper offers a framework for integrated policy development and identifies policy opportunities for joint action on nutrition, health, and climate by promoting sustainable and healthy food systems and diets.

UNSCN Nutrition Governance

Currently under production

This paper aims to describe the current nutrition architecture and provides a detailed overview of the main nutrition actors and their mandate. It highlights the role of UNSCN in the architecture focusing on the UN. The paper also argues to work towards governance for nutrition instead of nutrition governance.

Global Nutrition Narrative

Currently under production

The UNSCN Nutrition Narrative aims to present the global nutrition scene: the scope of the malnutrition problem and the targets the world set to achieve the elimination of various forms of malnutrition. The paper explains the interrelatedness between the targets as well how to achieve them using the guidance of the ICN2 Framework for Action. Finally, it links the nutrition targets with the 2030 Agenda.

B. Submitted Elaboration on Topics

1. PSM: Stunting

OEWG Nutrition 2nd inter-sessional event Proposal from the PSM: Stunting

The PSM proposes to have the second inter-sessional event in 2017 organized by the OEWG on Nutrition focus on the topic of stunting.

Stunting continues to be one of the most pernicious and widespread consequences of malnutrition: 3.1 million deaths of children under 5 (45%) are attributed to malnutrition every year, 160 million children under 5 are stunted¹. Stunting has a disproportionate impact on the most vulnerable populations compared with other types of malnourishment. It can have significant consequences for both human health outcomes, and social and economic participation. The effects of stunting can last a lifetime and impair intellectual development, weaken the immune system, and result in greater risk of non-communicable diseases like diabetes, CVD and cancer later in life. Beyond the individual impacts of this problem, stunting is an enormous drain on economic productivity and growth. Economists estimate that stunting can reduce a country's GDP by as much as 12%.

While the effects of stunting can last a lifetime, they can also be passed on from one generation to another. Stunting begins in the womb—with a mother who herself is not getting enough of the nutrition she needs to support her baby's growth and development during pregnancy and lactation. Girls who are born malnourished, and become stunted as children, often grow up to become malnourished mothers who in turn give birth to low birth weight and malnourished babies, and the cycle repeats itself. Undernutrition during pregnancy affects fetal growth and is a major determinant of stunting and consequently can increase the risk of developing obesity and non-communicable diseases in adulthood. Likewise, undernutrition during pregnancy is associated with higher risk for severe infectious diseases during early childhood—such as measles, diarrhea, and pneumonia—which are further contributing factors to reduced growth and development.

Stunting is a complex condition and more research needs to be done to better understand the variety of factors involved, their inter-relations and the interventions that can be made to address the problem in its entirety. The main causes of stunting are household and family environment, nutrition and infections². With regards to nutrition, the main causes of stunting can be attributed to inadequate breastfeeding and complementary feeding practices, poor quality foods and food and water safety. Poor micronutrient quality, low dietary diversity, poor protein intake and intake of animal-sourced foods are very common among stunted patients (the Healthy Growth Project, WHO³). With regards to the environment and infections, studies in the Gambia have shown that more than 40% of stunting can be attributed to environmental enteric dysfunction (EED), the chronic exposure to pathogenic bacteria, viruses, and parasites due to poor hygiene, contaminated water

¹ http://www.who.int/nutrition/publications/lancetseries_maternal_and_childundernutrition/en/

² http://www.who.int/nutrition/events/2013_ChildhoodStunting_colloquium_14Oct_ConceptualFramework_colour.pdf

³ <http://www.who.int/nutrition/healthygrowthproj/en/index1.html>

and open defecation causing epithelial atrophy, malabsorption and inflammation. As a consequence, nutrients are lost and diverted to immune responses rather than to growth⁴.

As stunting is almost always irreversible, early intervention by improving nutrition starting in utero for women & infant and young children, would be a decisive preventive measure, especially in the first 1,000 days period and until five years of age. In addition, new research indicates that it may be possible to correct damage done during the first 1000 days during the last growth phase between 12 and 15 years of age⁵. Adequate intake of all essential nutrients and omega-poly-unsaturated fatty acids (including high-quality protein⁶ and micronutrients: iron, zinc, vitamin A, iodine, calcium and vitamin D⁷, vitamin E, folate) in infants, young children, adolescent girls and women of reproductive age are thus essential to prevent stunting, and for reversing its effects of through catch up growth strategies. Ensuring availability of, and access to, food containing all essential micronutrients for adolescent girls and women of reproductive age is imperative. In addition, new research⁸ has shown that providing protein with sufficient levels of the essential amino acids is as important as providing micronutrients. In some situations, meeting Recommended Nutrient Intake (RNI) for micronutrients cannot be met even when diverse foods are part of the diet. Stunted children are, in reality, not receiving sufficient quality protein from their diet and this lack of essential amino acids means children will not grow normally even if they receive the necessary micronutrients. The protein challenge will require substantial investment and innovations in nutrition, health and agricultural sector.

Educational outreach is also needed to ensure science-based nutrition information is widely available to mothers, parents and caregivers of infants and young children to enable informed nutrition decisions. Efforts to place restrictions on the provision of science-based nutrition information will limit the consumers' ability to distinguish high-quality, safe, science-supported nutrition and, as such, are counterproductive. All stakeholders have a role to play in ensuring improved access to science-based nutrition information and supporting improved early life nutritional outcomes.

Relevance and global impact

Stunting, as a key limiting factor in growth and human development, should be considered a top priority for global initiatives aimed at decreasing the prevalence of malnutrition.

According to the WHO: "About 165 million children globally are stunted, according to 2011 figures, resulting from not enough food, a vitamin- and mineral-poor diet, inadequate child care and disease. As growth slows down, brain development lags and stunted children learn poorly. Stunting rates among children are highest in Africa and Asia. In Eastern Africa 42% were affected as of 2011."

Contribution to the achievement of the SDGs

This topic is directly related to SDG target 2.2:

By 2030 end all forms of malnutrition, including achieving by 2025 the internationally agreed targets on stunting and wasting in children under five years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons.

Contribution to the implementation of ICN2

Rome Declaration:

⁴ http://www.sightandlife.org/fileadmin/data/Magazine/2016/Mag1/Making_Stunting_a_Development_Indicator.pdf

⁵ <http://www.younglives.org.uk/content/maternal-undernutrition-child-development-adolescence-critical-window-interventions>

⁶ Semba *et al.*, Child Stunting is Associated with Low Circulating Essential Amino Acids, *EBioMedicine* 6 (2016) 246-252

⁷ <https://www.ncbi.nlm.nih.gov/pubmed/25933491>

⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3827643/>

“12. Note with profound concern that, notwithstanding significant achievements in many countries, recent decades have seen modest and uneven progress in reducing malnutrition and estimated figures show that:

- a) the prevalence of undernourishment has moderately declined, but absolute numbers remain unacceptably high with an estimated 805 million people suffering chronically from hunger in 2012-2014;*
- b) chronic malnutrition as measured by stunting has declined, but in 2013 still affected 161 million children under five years of age, while acute malnutrition (wasting) affected 51 million children under five years of age;*
- c) undernutrition was the main underlying cause of death in children under five, causing 45% of all child deaths in the world in 2013;*
- d) over two billion people suffer from micronutrient deficiencies, in particular vitamin A, iodine, iron and zinc, among others;*
- e) overweight and obesity among both children and adults have been increasing rapidly in all regions, with 42 million children under five years of age affected by overweight in 2013 and over 500 million adults affected by obesity in 2010;*
- f) dietary risk factors, together with inadequate physical activity, account for almost 10% of the global burden of disease and disability.”*

CFS value added and contribution to CFS objectives

There can be no higher goal than to focus on the early years of life and ensure for infants and young children a healthy start. CFS can make an important contribution to this effort by analyzing and strengthening policies and programs addressing stunting including:

- a) Methods to end stunting and wasting
- b) Programs to tackle stunting and wasting at a national and regional level, in particular in the 1000 days window
- c) Greater co-ordination of activities to address stunting
- d) Partnerships with governments, health care providers, the private sector and civil society to improve early life nutritional outcomes.
- e) Enhanced science-based and evidence supported nutrition education efforts involving all stakeholders.

2. WHO: Impact Assessment of Policies to support Healthy Food Environments and Diets

Dear Chair of the CFS OEWG on Nutrition,

We would like to thank you for this call for proposals for the theme of the 2nd intersessional event on nutrition in 2017. WHO/NHD's preferred theme for this event is *“Impact Assessment of Policies to support Healthy Food Environments and Healthy Diets”*.

This theme is very relevant to create a broader understanding about and to prepare the policy debate on food systems and nutrition. It relates to the role and mandate of CFS and supports that CFS can fully play a vital role in advancing nutrition.

Moreover, this theme addresses malnutrition in all its forms. We would like to suggest CFS, as the platform working towards ensuring food security and nutrition for all human beings, to address malnutrition in all its forms, and NOT to single out one form of malnutrition over another one. This would bare the risk of duplication with other initiatives and agency mandates. Addressing all forms of malnutrition is also in accordance with the outcomes of the INC2.

Furthermore, there is already a well-developed existing discussion paper for this theme and there would be no need to develop a new paper neither to base the session on a paper that has not yet been finalized. With this in mind, we support that the session is based on the UNSCN discussion paper *“Impact Assessment of Policies to support Healthy Food Environments and Healthy Diets”*.