**EXECUTIVE SUMMARY**

**GOOD NUTRITION IS THE BEDROCK OF HUMAN WELL-BEING. BEFORE BIRTH AND THROUGHOUT INFANCY, GOOD NUTRITION ALLOWS BRAIN FUNCTIONING TO evolve without impairment and immune systems to develop more robustly. For young children, good nutrition status averts death and equips the body to grow and develop to its full potential. Over the course of the human lifespan, it leads to more effective learning at school, better-nourished mothers who give birth to better-nourished children, and adults who are likelier to be productive and earn higher wages. In middle age, it gives people metabolisms that are better prepared to ward off the diseases associated with changes in diet and physical activity. Without good nutrition, people’s lives and livelihoods are built on quicksand.**

1. People with good nutrition are key to sustainable development.
   - Malnutrition affects nearly every country in the world.
   - More nutrition indicators need to be embedded within the Sustainable Development Goal accountability framework.
2. We need to commit to improving nutrition faster and build this goal into the Sustainable Development Goal targets for 2030.
   - The 2030 Sustainable Development Goal targets should be more ambitious than simple extensions of the 2025 World Health Assembly targets. A new consensus about what is possible needs to be established.
3. The world is currently not on course to meet the global nutrition targets set by the World Health Assembly, but many countries are making good progress in the target indicators.
   - More high-quality case studies are needed to understand why progress has or has not been made.
4. Dealing with different, overlapping forms of malnutrition is the “new normal.”
   - Nutrition resources and expertise need to be better aligned toward the evolving nature of malnutrition.
5. We need to extend coverage of nutrition-specific programs to more of the people who need them.
   - More attention needs to be given to coverage data—an important way of assessing presence on the ground where it counts.
6. A greater share of investments to improve the underlying determinants of nutrition should be designed to have a larger impact on nutritional outcomes.
   - We need to keep tracking the proportion of nutrition resources to these approaches.
   - We must also provide more guidance on how to design and implement these approaches to improve their effectiveness and reach.
7. More must be done to hold donors, countries, and agencies accountable for meeting their commitments to improve nutrition.
   - Stakeholders should work to develop, pilot, and evaluate new accountability mechanisms. Civil society efforts to increase accountability need support.
   - We need to develop targets or norms for spending on nutrition.
8. Tracking spending on nutrition is currently challenging, making it difficult to hold responsible parties accountable.
   - Efforts to track financial resources need to be intensified—for all nutrition stakeholders.
   - Of the many information gaps, the ones that most need to be filled are those that constrain priority action and impede accountability.
10. National nutrition champions need to be recognized, supported, and expanded in number.
    - We must fill frontline vacancies, support nutrition leadership programs, and design country-led research programs.
Good nutrition is also central to the sustainable development agenda that is taking shape in the form of the Sustainable Development Goals (SDGs) now under discussion. Inherently sustaining, good nutrition flows throughout the life cycle and across the generations. It promotes individual resilience in the face of shocks and uncertainties generated by climate change and extreme price fluctuations. It supports the generation of innovations needed to meet the joint challenge of improving the lives of current and future generations in ways that are environmentally sustainable.

This Global Nutrition Report is the first in an annual series. It tracks worldwide progress in improving nutrition status, identifies bottlenecks to change, highlights opportunities for action, and contributes to strengthened nutrition accountability. The report series was created through a commitment of the signatories of the Nutrition for Growth Summit in 2013. It is supported by a wide-ranging group of stakeholders and delivered by an Independent Group of Experts in partnership with a large number of external contributors.

This report has a number of unique features. First, it is global in scope. Nearly every country in the world experiences some form of malnutrition, and no country can take good nutrition for granted. Second, because global goals require national action, the report aims to speak to policymakers, practitioners, scientists, and advocates in all countries. It assembles copious country-level data and other information in an accessible manner and highlights the experiences of a large number of countries from Africa, Asia, Europe, Latin America and the Caribbean, North America, and Oceania. Third, a key focus of the report concerns how to strengthen accountability in nutrition. Many of the core features of malnutrition—including its long-term effects, the need to work in alliances to counter it, and the invisibility of some of its manifestations—make accountability challenging. We thus identify actions to strengthen key mechanisms, actors, and information in ways that will help hold all of us to account in our efforts to accelerate improvements in nutrition status. Finally, the report is delivered by an Independent Expert Group charged with providing a view of nutrition progress and an assessment of nutrition commitments that are as independent and evidence-based as possible.

From the point of view of the authors, the report itself is an intervention against malnutrition: it is designed to help reframe malnutrition as a global challenge, to raise ambitions about how quickly it can be reduced, and to reenergize actions to reduce it. To accomplish this, we bring together a wide-ranging set of key indicators of nutrition status, actions, and resources for all 193 United Nations member states. We analyze these data in order both to assess worldwide progress in improving nutrition status and to locate individual country progress and experiences within the broader global and regional trends. In addition we provide an accountability mechanism for the commitments made by the 96 signatories of the Nutrition for Growth Summit, monitoring and assessing their self-reported progress against those public declarations of intent to act for nutrition.

**KEY FINDINGS**

The report offers a number of findings regarding the progress that has been made in improving nutrition status, scaling up nutrition action, meeting the commitments made by signatories to the Nutrition for Growth Compact, and reducing data gaps.

**Progress in Improving Nutrition Status**

1. **IMPROVING PEOPLE’S NUTRITION STATUS IS CENTRAL TO ATTAINING SUSTAINABLE DEVELOPMENT.** We summarize evidence to show that improvements in nutrition status will make large contributions to SDGs on poverty, food, health, education, gender, and employment. We also show that investments in nutrition have high returns. We estimate new benefit-cost ratios for scaling up nutrition interventions in 40 countries. Across these 40 countries, the median benefit-cost ratio is 16—meaning that for every dollar, rupee, birr, or peso invested, at the median more than 16 will be returned. The benefit-cost ratios from investing in nutrition are highly competitive with investments in roads, irrigation, and health.

2. **MALNUTRITION AFFECTS NEARLY EVERY COUNTRY.** All countries in the world, bar two, that collect nutrition data experience one of the following forms of malnutrition: stunting, anemia, or adult overweight. If the anemia rates in the two outlier countries were just 0.6 percentage points higher, then all countries in the world with nutrition data would be classified as experiencing one of these three forms of malnutrition.

3. **ON A GLOBAL SCALE, THE WORLD IS NOT ON COURSE TO MEET THE GLOBAL NUTRITION TARGETS AGREED TO BY THE WORLD HEALTH ASSEMBLY (WHA).** Under existing assumptions, projections from the World Health Organization (WHO) and UNICEF show that the world is not on track to meet any of the six WHA nutrition targets. Globally, little progress is being made in decreasing rates for anemia, low birth weight, wasting in children under age five, and overweight in children under age five. Progress in increasing exclusive breastfeeding rates has been similarly lackluster. More progress has been made in reducing stunting rates in children under five, but not enough to meet the global target under current projections.

4. **ON A COUNTRY-BY-COUNTRY BASIS, THOUGH, MANY COUNTRIES ARE MAKING GOOD PROGRESS IN IMPROVING NUTRITION OUTCOMES.** If the global WHA targets were to be applied on a country-by-country basis, how many countries would be on course to meet the targets? Of the four WHA indicators for which we can make country-level assessments, 99 countries have sufficient data to allow for such assessments. Of the 99 countries, 68 are on course for at least one of four WHA global targets and 31 are not on course for any. Out of 109 countries that have data on stunting of children under age five, 22 are on course for meeting the WHA target. Out of 123 countries with data on wasting of children under age five, 59 are on...
course. Out of 107 countries with data on overweight of children under age five, 31 are on course. Finally—and of great concern—only 5 out of 185 countries with data on anemia are on course for anemia reduction. There is great potential to learn from country experiences, but it is not being exploited because of a lack of country case studies that examine the wide range of factors affecting progress.

5. **THERE IS A BASIS FOR SETTING MORE CHALLENGING TARGETS FOR NUTRITION IMPROVEMENT.** How is this finding consistent with a world that is off course for the WHA global targets? First, country-level variation suggests that there are plenty of examples of progress from which to draw inspiration and insight. Second, experiences from the Indian state of Maharashtra as well from Bangladesh, Brazil, and the United States suggest that significant change in nutrition status can happen over the medium term as a result of determined action sustained over a period of 6–12 years. If just a few large countries improved their performance, it would change the basis for earlier projections of progress. Finally, for India—the second-most populous country in the world—new and preliminary national data suggest it is experiencing a much faster improvement in WHA indicators than currently assumed. For example, if the new preliminary estimates undergo no further significant adjustments, then the numbers of stunted children under the age of five in India has already declined by more than 10 million.

6. **THE FACE OF MALNUTRITION IS CHANGING: COUNTRIES ARE FACING COMPLEX, OVERLAPPING, AND CONNECTED MALNUTRITION BURDENS.** Most countries experience some combination of under-five stunting, anemia in women of reproductive age, and adult overweight; fewer than 20 countries have only one of these forms of malnutrition. These different burdens are connected not only at a physiological level, but also at a resource and political level. Researchers and practitioners urgently need to develop tools and strategies to prioritize and sequence nutrition-relevant actions in these complex contexts. Given these multiple burdens and the trend toward decentralization of nutrition programming, disaggregated analyses of nutrition outcomes are more important than ever. This is a major data gap, though it may not exist in all countries.

**Progress on Scaling Up Nutrition Action**

7. **COVERAGE OF NUTRITION-SPECIFIC INTERVENTIONS IS LOW.** The lack of national coverage data for nutrition-specific interventions reflects the low coverage of the programs themselves. Of 12 key nutrition-specific interventions that have been identified as crucial for reducing undernutrition, many countries have national coverage data for only 3 (vitamin A supplementation, zinc treatment for diarrhea, and universal salt iodization). Given the lack of progress on wasting rates, the lack of coverage data for programs to treat moderate and severe acute malnutrition (MAM and SAM) is a major concern. Geographic coverage is poor, even in countries with very large burdens of SAM. Direct coverage estimates are needed to properly assess people’s access to treatment for both MAM and SAM. Ways need to be found to get the best blend of rapid stand-alone surveys and periodic national surveys to estimate MAM and SAM coverage in a timely and credible way.

8. **UNDERLYING DRIVERS OF NUTRITION STATUS ARE IMPROVING.** Underlying drivers—such as food supply, clean water and sanitation, education, and health care—can contribute a great deal to improving nutrition status. Estimates of undernourishment based on food supply are decreasing, but—with 805 million people below a minimum calorie threshold in 2012–2014—they are still high. Access to improved water and sanitation services is steadily improving, although large coverage gaps remain in Eastern, Western, and Middle Africa for water and in Southern and South-Eastern Asia and most regions of Africa for sanitation. Trends in female secondary education enrollment are positive for all regions, although the rate is still just 50 percent for Africa. Health services, though, are still lacking in Africa and Asia. Europe has the most physicians per 1,000 people (at 3.5) and Africa the least (0.5), while North America has the most nurses and midwives per 1,000 people (9.8) and Africa the least (1.3). Asia has two times as many community health workers per 1,000 people as Africa, but the numbers are low for both regions (1.4 compared with 0.7).

9. **THE POTENTIAL FOR EXPANDING RESOURCES TO NUTRITION-SENSITIVE PROGRAMS IS CLEAR; THE QUESTION IS, HOW?** Investments in nutrition-sensitive programs and approaches that address the underlying determinants of malnutrition can be important components of a portfolio of actions to improve nutrition status. We present data on government expenditures on the related sectors of agriculture, education, health, and social protection. Different governments make different choices about these sectors, and expenditure levels vary between regions and within regions. Social protection spending is increasing rapidly in many African and Asian countries, providing a major opportunity to scale up nutrition-sensitive actions. But evidence is limited on how to make interventions that address underlying determinants more nutrition sensitive. The report offers some ideas for agriculture; social protection; education; health; and water, sanitation, and hygiene.

10. **COUNTRIES CANNOT CURRENTLY TRACK THEIR FINANCIAL COMMITMENTS TO NUTRITION.** Several tools exist to accomplish this, and investments will need to be made to build the organizational capacity to do so. Guatemala provides an inspiring case study. Spending by donors is somewhat clearer than spending by countries. Between 2010 and 2012, commitments from 13 donors to nutrition-specific interventions rose by 39 percent, and disburse-
ments rose by 30 percent. Nutrition-sensitive donor commitments declined by 14 percent, but nutrition-sensitive disbursements for the 10 donors that reported data increased by 19 percent. The percentage of official development assistance disbursed to nutrition in 2012 was just above 1 percent. Donor reporting on nutrition is becoming more harmonized but has further to go owing to differences in definitions and timing.

11. POLICIES, LAWS, AND INSTITUTIONS ARE IMPORTANT FOR SCALING UP NUTRITION. These elements of the policy environment can be measured. The Scaling Up Nutrition (SUN) process score approach is noteworthy for being a participatory measurement process that stimulates reflection among stakeholders on how they can strengthen coordinated action on nutrition. Assessments of the strength of policies, laws, and institutions can point out disconnects, such as the coexistence of weak policy environments on diabetes and populations with rates of raised blood glucose levels.

Monitoring the Nutrition for Growth Commitments

12. REPORTING ON THE 2013 NUTRITION FOR GROWTH (N4G) COMMITMENTS WAS CHALLENGING FOR ALL GROUPS OF SIGNATORIES. Valuable lessons were learned in this “baseline year.” Ninety percent of the signatories responded to requests for updates against their N4G commitments. Very few signatories were off course on their commitments, although there were many “not clear” assessments due to the vagueness of commitments made and of responses provided. In terms of progress against N4G targets, there were no obvious causes for concern from any group, at least at this early stage in the reporting period of 2013–2020. The assessment will be strengthened in 2015 by more data, more streamlined processes, and, we suspect, participants that are more motivated given their understanding of how their responses will be reported.

13. NUTRITION ACCOUNTABILITY CAN AND MUST BE BUILT. Civil society actors are particularly important in building accountability, although they need support to be most effective. National evaluation platforms and community feedback mechanisms are promising ways of strengthening nutrition accountability, but they need to be piloted and evaluated. National and international nutrition research programs that are driven by the problems of countries themselves are likely to improve accountability at the national level.

Reducing Data Gaps

14. THERE ARE MANY GAPS IN DATA ON NUTRITION OUTCOMES, PROGRAMS, AND RESOURCES. For example, for the four of six WHA indicators where rules exist to classify countries as “on course” or “off course,” only 60 percent of the 193 UN member countries have the data to assess whether their contribution levels are on or off course to meet the global WHA targets. Ensuring all countries can report on the WHA indicators is a priority for governments and UN agencies. To identify data gaps beyond the WHA indicators, we posed the question: In what areas are data gaps leading us to fail to prioritize the issues that need to be prioritized and the actions that need to be taken to reduce malnutrition? We identified three nutrition-status indicators—anemia, overweight/obesity, and low birth weight—where progress is slow and data gaps could be holding back action. We also identified data gaps that we believe are holding back the scaling up and context-specific blending of nutrition-specific, nutrition-sensitive, and enabling environment interventions. These gaps included data on countries’ capacity to implement and scale up nutrition actions, program costs, and financial resource tracking. Many decisions about how to prioritize the filling of data gaps need to be undertaken at the national level, based on nutrition policies, plans, and strategies.

15. NOT ALL DATA GAPS NEED TO BE ADDRESSED BY COLLECTING NEW DATA. We identified several ways of filling data gaps: (1) using existing data better, (2) strengthening existing data collection quality, (3) improving data comparability across countries, (4) collecting new data where there are not enough for good accountability, and (5) increasing the frequency of national nutrition survey data collection. Three to four key data gaps were identified under each of these five areas, and ways to begin filling these gaps were proposed. Many of these data gaps can be filled by investing in the capacity of nutrition analysts, program managers, and policy units to make better use of existing data.

WE CAN IMPROVE NUTRITION MORE RAPIDLY: STRONGER ACCOUNTABILITY IS KEY

Almost all countries suffer from high levels of malnutrition. Countries should make a common cause and exploit opportunities to learn from each other. It is clear that the low-income countries do not have a monopoly on malnutrition problems and that the high-income countries do not have a monopoly on nutrition solutions.

Failure to intensify action and find solutions will cast a long shadow, bequeathing a painful legacy to the next generation. Our generation has the opportunity—and the ability—to banish those shadows. To do so, we must act strategically, effectively, in alliances, and at scale. And we need to be held to account.

The annual series of Global Nutrition Reports—their data, analyses, examples, messages, and recommendations—represents one contribution to meeting this collective 21st-century challenge.