



European  
Commission

# NUTRITION QUICK TIPS SERIES



## INTRODUCTION

To support the mainstreaming of nutrition into key sectors, the European Commission's Directorate-General for International Partnerships (DG INTPA) F3 Nutrition and One Health Sector, with support from Capacity for Nutrition<sup>1</sup>, has developed a series of **Quick Tips**. The series provides practical advice and guidance for European Union (EU) Delegation staff on how programming and support across multiple sectors can be enhanced and adapted to contribute to improved food security and nutrition outcomes.

This introductory paper provides a background on the problem, nature and scale of malnutrition and related EU commitments, as well as a brief overview of the Nutrition Quick Tips Series and some of the key terminology used. The series builds on the original EuropeAid Reference Document N.13, Addressing Undernutrition in External Assistance<sup>2</sup> and complements other nutrition guidelines, courses and resources that are accessible on INTPA Academy and Capacity4Dev.

## Background

Malnutrition is an intergenerational problem, which undermines human development and exacerbates inequalities, trapping millions around the globe in a vicious cycle of poor health and poverty. It can take different forms – undernutrition, including stunting and wasting, micronutrient deficiencies, and over-nutrition in the forms of overweight and obesity – often referred to as the 'triple burden' of malnutrition, and as such presents a complex global problem, challenging the successful achievement of the Sustainable Development Goals (SDGs) and thwarting socio-economic progress. To meet global nutrition targets<sup>3</sup> in most countries, progress will need to accelerate substantially, as globally five out of six of these maternal, infant and young child nutrition (MIYCN) targets are off track globally and the effects of the COVID-19 pandemic are knocking progress further off course<sup>4</sup>.

Despite some variation between regions, no region in the world meets recommendations for healthy diets, with diet-related disease and mortality rates high and on the increase in most regions. The harmful impacts of human diets on the planet are alarming and increasing, whilst the financial costs of addressing poor diets and malnutrition have risen (ibid.).

- 1 Capacity for Nutrition (C4N) is a joint action funded by the European Union and the German Federal Ministry for Economic Cooperation and Development (BMZ) and implemented by GIZ.
- 2 <https://op.europa.eu/en/publication-detail/-/publication/33eb169f-b056-4b79-b267-b426b67ff7ea/language-en>
- 3 <https://op.europa.eu/en/publication-detail/-/publication/6b8b10e4-c103-42d7-ae08-f8604ae8dfab/language-en>
- 4 Global Nutrition Report 2021 <https://globalnutritionreport.org/reports/2021-global-nutrition-report/>

Figure 1: Global stunting, wasting and overweight prevalence in children under 5 years of age<sup>5</sup>



Women and adolescent girls are especially likely to have poor diets and malnutrition due to increased nutritional requirements (for example during menstruation, pregnancy and lactation) and factors such as social norms (e.g. traditional beliefs on foods not to be given to pregnant or breastfeeding women) and gender inequalities. Investments to reduce malnutrition in women are important not only for women's own health but also for the health and nutrition of their children, given the link between maternal nutrition status and reproductive outcomes<sup>6</sup>. The vicious circle of poverty and undernutrition is perpetuated throughout lives and across generations, as babies born with low birth weight become stunted children and go on to become malnourished adolescents and adults, with physical, cognitive and economic implications.

According to FAO's State of Food Insecurity and Nutrition in the World 2021 (SOFI 2021) report<sup>7</sup>, between 720 and 811 million people faced hunger in 2020, up by an additional 118-160 million people compared with 2019. Although food insecurity has been rising since 2014, the estimated increase in 2020 of

almost 320 million food insecure people was equal to that of the previous 5 years combined: in a single year, nearly one in three people in the world, equivalent to a population of 2.37 billion, did not have access to adequate food<sup>8</sup>. Acute and protracted crises situations cut or further limit the availability and/or access to adequate food, leading to excess morbidity and mortality from malnutrition. The COVID-19 pandemic and measures to contain it play a significant role also, with millions of people losing jobs, livelihoods and incomes, disruption to supply chains, the collapse of weak public health systems and lack of social protection leading to deaths, increased morbidity, indebtedness and poverty. Among other factors, undernutrition is a major consequence of food insecurity and the resulting lack of access to affordable healthy diets, with potentially devastating and lifelong implications. Although it is not yet possible to assess the impact of the COVID-19 pandemic due to data limitations, SOFI 2021 (ibid.) reports that figures on malnutrition, particularly for stunting and wasting, are expected to be higher than those reported, due to the effects of the COVID-19 pandemic.

'Nutrition is one of the smartest investments governments and donors can make in the health and economic prosperity of people and nations.

Good nutrition helps ensure that children reach their full physical and cognitive potential. They are less prone to illness and death, better equipped to succeed in school, and are more productive when they join the workforce.

Nutrition investments are critical to economic growth and generate some of the highest rates of return among health interventions.

- Improved nutrition could add \$3.5 trillion per year to the global economy (and potentially \$5.7 trillion a year by 2030<sup>9</sup>); African countries could increase GDP by up to 15%.
- For every \$1 invested in nutrition, \$16 is returned to the local economy.'

Nutrition for Growth (N4G) 2021<sup>10</sup>

5 UNICEF/WHO/WB [Joint Child Malnutrition Estimates](#) (JME) 2021.

6 Victoria C. [The Lancet Series on Maternal and Child Undernutrition Progress](#), Virtual Event, March 2021.

7 [The State of Food Security and Nutrition in the World](#). FAO, 2021.

8 HLPE (2020). [Food Security and Nutrition: Building a Global Narrative towards 2030](#). A report by the High Level Panel of Experts on Food Security and Nutrition of the Committee on World Food Security.

9 Global Nutrition Report 2021.

10 [https://nutritionforgrowth.org/wp-content/uploads/2021/04/KeyMessages\\_4.6.21.pdf](https://nutritionforgrowth.org/wp-content/uploads/2021/04/KeyMessages_4.6.21.pdf)



## EU commitments

The EU has had a long-standing commitment to reducing malnutrition. At the first Nutrition for Growth Summit in 2013, the EU pledged to allocate EUR 3.5 billion between 2014 and 2020 to improve nutrition in partner countries. By 2020, this commitment had not only been achieved but was surpassed by EUR 800 million. In the 2021 N4G, the European Commission pledged EUR 2.5 billion for 2021-2024 to reduce all forms of malnutrition. The commitment to reduce the number of stunted children under the age of five by at least 7 million by 2025, is anchored in the 2013 Communication on Enhancing Maternal and Child Nutrition in External Assistance<sup>11</sup> and the 2014 Action Plan on Nutrition<sup>12</sup>. To date, considerable progress has been made in terms of reducing the prevalence of stunting (an average of 6.2 percentage points in 38 out of 42 EU priority countries) and since 2014, an estimated 4.2 million children will have been averted from stunting by 2025 in 40 priority countries. Additional progress to World Health Assembly targets<sup>13</sup> has been made in the majority of countries prioritising nutrition with respect to child wasting, reducing low birth weight and increasing rates of exclusive breastfeeding<sup>14</sup>. The European Commission recognises nutrition as central to meeting the SDGs, both as a maker and as a marker of development, crucial in supporting the achievement of other sectors' agendas. The EU Action Plan on Nutrition identifies opportunities to scale up actions (both 'nutrition-specific' and 'nutrition-sensitive' actions<sup>15</sup>) to improve nutrition outcomes across relevant sectors: agriculture, health, social protection, education and water, sanitation and hygiene (WASH). The EU promotes a policy and programming approach

spanning the humanitarian-development nexus, with potential to address both chronic and acute forms of malnutrition (stunting and wasting), which can exist simultaneously and/or subsequently within one individual.

The EU Action Plan for Nutrition (ibid.) stresses the conviction that what works best for improved nutrition is a locally adapted, sustained, multi-sectoral and rights-based approach, with a strong focus on tackling entrenched inequalities such as those relating to wealth and gender. The report also emphasises how this approach will continue to be at the heart of the EU's efforts to address malnutrition in all its forms. To this end, individual Country Nutrition Profiles have been developed for priority EU delegations, highlighting the nutrition situation in the country, country government response as well as EU response and investments, and perspectives for further mainstreaming of nutrition into EU priority areas to support EU delegation planning and programming.

In placing the Farm to Fork Strategy<sup>16</sup> at the centre of the European Green Deal, the EU has underlined its commitment to making Europe's food system equitable as well as economically, environmentally and socially sustainable, inspiring a global transition to inclusive and sustainable food systems. Crucially, with its aim of enabling access for all to sufficient, safe, affordable and nutritious food, the achieving of this strategy will have important consequences in terms of improving food security and nutrition outcomes.

### Why these Quick Tips?

The drivers of malnutrition operate at several levels and across multiple sectors, requiring a convergent and cross-sectoral approach in response (see Figure 2). It is therefore critical that professionals working in sectors including agriculture and rural development, food assistance, social protection, education, health, and water, sanitation and hygiene (WASH) are aware of these drivers and equipped with ideas and the 'know-how' to design, adapt and implement approaches which favour improved nutrition outcomes within their own areas of work. Between 2014 and 2020, 23% of all EU development nutrition investments were in agriculture<sup>17</sup>, representing a significant proportion of the EU's total investment in nutrition. Given this emphasis, related Quick Tips describe in more detail the role of agri-food systems in improving food security and nutrition

outcomes, providing technical guidance on how programmes and policies in these areas can be designed or adapted to ensure this, and signposting related resources.

EU delegations and staff must take into consideration an extensive range of themes and priorities across their priority programme areas and therefore require easy access to reliable and concise information. The Nutrition Quick Tips series therefore aims to provide staff in the European Commission, delegations and partner institutions with accessible, practical guidance or 'tips' on *how to mainstream nutrition into different sectors at both policy and programme level*, thus strengthening the contribution of EU international cooperation and development policy to sustainable development.

11 [EUR-Lex - 52013DC0141 - EN - EUR-Lex \(europa.eu\)](#)

12 EU Action Plan on Nutrition. [https://knowledge4policy.ec.europa.eu/global-food-nutrition-security/action-plan-nutrition\\_en](https://knowledge4policy.ec.europa.eu/global-food-nutrition-security/action-plan-nutrition_en)

13 Global Nutrition Targets 2025. WHO Policy Brief Series. <https://www.who.int/publications/i/item/WHO-NMH-NHD-14.2>

14 Sixth Progress Report on the EC Action Plan on Nutrition, April 2020 – March 2021.

15 See glossary.

16 EC Farm to Fork Strategy. [https://ec.europa.eu/food/horizontal-topics/farm-fork-strategy\\_en](https://ec.europa.eu/food/horizontal-topics/farm-fork-strategy_en)

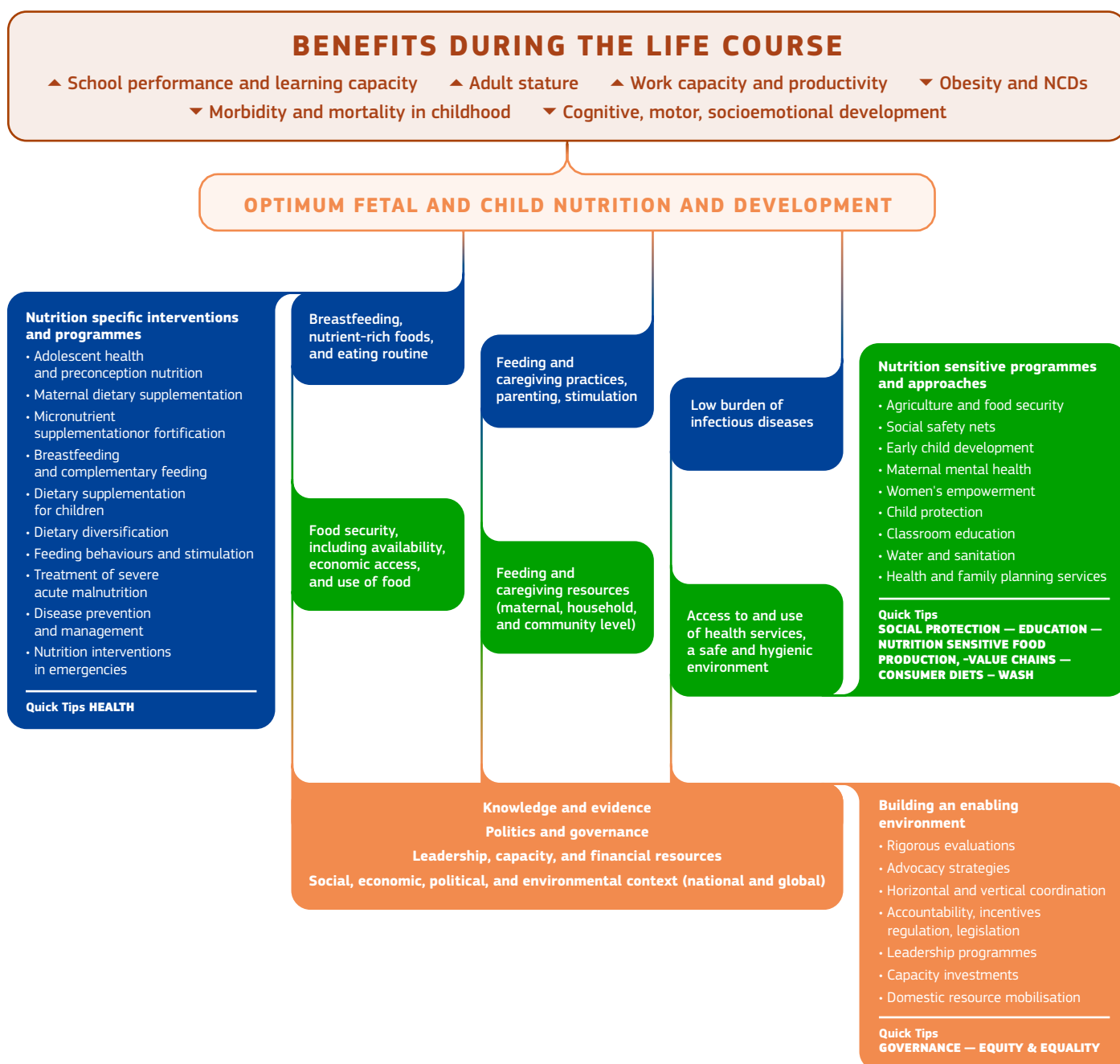
17 Nutrition Resource Tracking Report (int) 2021.

Figure 2 below presents The Lancet's framework<sup>18</sup> to describe multisectoral pathways to improved nutrition and the role of multisectoral nutrition-specific and nutrition-sensitive interventions and programmes in supporting these. The framework proposes responses across different sectors and at different levels to address the direct, underlying and basic causes of malnutrition, as described in the UNICEF Framework on the Causes of Malnutrition (see Europeaid Reference Document N.13, Addressing Undernutrition in External Assistance, Figure 5). The framework highlights the multisectoral drivers of malnutrition, including 'underlying' drivers (such as inadequate infant and young child feeding (IYCF) and caregiving practices, food insecurity characterised by inadequate access to and availability of nutritious foods and healthy diets, lack of access

to or poor quality health services, poor environmental health, lack of access to water and sanitation and inadequate hygiene practices) and 'basic' drivers (including governance and political priorities, leadership, capacity and financial resources and the socio-economic and environmental context). The figure also presents how the Quick Tips resources relate to the different intervention areas at both basic and underlying causal levels.

Since the development of the Europeaid Reference Document N.13 and the UNICEF conceptual framework, the EU now places emphasis on a food systems approach to deliver sustainable, healthy diets, with investments in nutrition from 2021 to 2027 focusing largely on the Green Deal and/or Human Development.

Figure 2: A multisectoral approach to improved nutrition<sup>19</sup>



18 Black et al. *The Lancet* 2013. Framework for actions to achieve optimum fetal and child nutrition and development.

19 Black et al. (2013). *The Lancet*. Framework for actions to achieve optimum fetal and child nutrition and development.

## Quick Tips structure and content

### The Quick Tips series include the following topics:

- Quick Tips: Nutrition-sensitive food production
- Quick Tips: Nutrition-sensitive value chains
- Quick Tips: Creating and maintaining consumer demand for healthy diets
- Quick Tips: Equality, equity and nutrition
- Quick Tips: Nutrition, gender equality and women's empowerment
- Quick Tips: Multisectoral nutrition governance
- Quick Tips: Social protection and nutrition
- Quick Tips: Health and nutrition
- Quick Tips: Water, sanitation and hygiene (WASH) and nutrition
- Quick Tips: Education and nutrition
- Quick Tips: Nutrition policy marker reporting to OECD-DAC.

### Each Quick Tips follows a similar structure:

- An introductory section emphasising the link between nutrition and the sector/topic of focus
- Definitions
- Key messages
- Related EU commitments
- Strategies or 'tips' to improve nutrition outcomes through sector-specific policy and programming
- Further information and support.

The series complements the more in-depth and detailed intervention-specific online tools, courses and resources<sup>20</sup> available in the [EU International Partnership Academy](#).



## Glossary of commonly used terminology

- **Agri-food systems** encompass the entire range of actors and their activities involved in the production, aggregation, transportation, processing, distribution, consumption and waste management of agricultural and food products from agriculture (including livestock), forestry, fisheries and aquaculture, and parts of the broader economic, societal and natural environments in which they are embedded<sup>21</sup>.
- **Affordability** refers to the ability of people to buy foods in their local environment. It refers to the cost of food relative to a person's income, minus other required expenses.
- **Animal source foods** include all types of meat, poultry, fish, eggs, milk, cheese and yoghurt, and other dairy products.
- **Diarrhoeal diseases** cause diarrhoea (runny stools, with or without blood).
- **Diet quality** is comprised of four key aspects: variety and/or diversity (within and across food groups), adequacy (sufficiency of nutrients or food groups compared to requirements), moderation (foods and nutrients that should be consumed with restraint) and overall balance (composition of macronutrient intake). Exposure to food safety hazard is another important quality aspect<sup>22</sup>.
- **Dietary diversity** refers to the variety in the number and type of foods in a person's diet over a reference period. Indicators of dietary diversity are considered to be useful as measures of impact for programmes designed to address nutrition through agricultural pathways. Individual dietary diversity indices, the minimum dietary diversity for women (MDD-W) and the minimum dietary diversity (MDD) for children aged 6-23 months have been shown to be a rough proxy for diet quality and nutrient adequacy.

<sup>20</sup> Available topics include: Nutrition Causal Analysis, Agriculture and Food Systems, Food Security and Livelihoods, Value Chains and School Feeding.

<sup>21</sup> European Commission, Guidance Note on Agri-Food Systems.

<sup>22</sup> The State of Food Security and Nutrition in the World Report (SOFI), 2021.

- **DHS or demographic and health surveys** are nationally representative household surveys conducted every five years or so. The surveys provide data for a wide range of monitoring and impact evaluation indicators in the areas of population, health and nutrition.
- **Emergency or humanitarian crisis** is a situation requiring humanitarian assistance. A crisis stems from natural or man-made causes, is rapid or slow-onset, and of short or protracted duration.
- **Food security** exists when all people, at all times, have physical, economic and social access to sufficient safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.<sup>23</sup> **Acute food insecurity** is found in a specified area at a specific point in time and is of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. **Chronic food insecurity** is food insecurity that persists over time mainly due to structural causes.
- **Gender-based violence and discrimination** refers to any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life<sup>24</sup>.
- **Gender-sensitive approaches** seek to accommodate gender differences in pursuit of outcomes.
- **Gender-transformative approaches** seek to transform gender relations to promote equity as a means to reach outcomes<sup>25</sup>.
- **Global nutrition targets** here refer collectively to the World Health Assembly (WHA) targets both on maternal, infant and young child nutrition (MIYCN) and on diet-related NCDs. These were adopted in 2012 (MIYCN) and 2013 (NCDs) by the WHA to be reached by 2025. The targets include low birth weight, stunting in children under 5 years of age, wasting in children under 5 years of age, overweight in children under 5 years of age, anaemia in women of reproductive age, and exclusive breastfeeding. The targets for four diet-related NCD indicators in adults are salt/sodium intake, raised blood pressure, diabetes and obesity.
- **Healthy diets** are diets that are of adequate quantity and quality to achieve optimal growth and development of all individuals and support functioning and physical, mental and social well-being at all life stages and physiological needs. Healthy diets are safe, diverse, balanced and based on nutritious foods. Healthy diets vary depending on an individual's characteristics (e.g. age, gender, lifestyle and degree of physical activity), geographical, demographical and cultural patterns and contexts, food preferences, availability of foods from local, regional and international sources, and dietary customs<sup>26</sup>.
- **Infant and young child feeding (IYCF) practices** during the first two years of life are important for the growth and development of a child. IYCF describes the feeding practices for infants (aged less than 12 months) and young children (aged from 12 to 23 months).
- **Malnutrition** refers to deficiencies, excesses or imbalances in a person's intake of energy and/or nutrients. Malnutrition in all its forms includes:
  - undernutrition, which includes **wasting** (low weight-for-height, being an **indicator of acute malnutrition**), **stunting** (low height-for-age, being an **indicator of chronic malnutrition**) and **underweight** (low weight-for-age);
  - micronutrient-related malnutrition, which includes **micronutrient deficiencies** (a lack of important vitamins and minerals, for example iron or vitamin A) or micronutrient excess; anaemia may be caused by lack of iron, folate or vitamin B12; and
  - **overweight, obesity and diet-related non-communicable diseases (NCDs)** (such as heart disease, stroke, diabetes and some cancers)<sup>27</sup>.

23 CFS Voluntary Guidelines on Food Systems and Nutrition.

24 Declaration on the Elimination of Violence Against Women. UN General Assembly resolution 48/104 of 20 December 1993. <https://www.ohchr.org/en/professionalinterest/pages/violenceagainstwomen.aspx>

25 UNFPA, *Gender Transformative Programming. Engaging Men and Boys in Gender Equality and Health*, a Global Toolkit for Action.

26 [CFS, 2021. Voluntary Guidelines on Food Systems and Nutrition.](#)

27 World Health Organization. Malnutrition Factsheet. 1 April 2020. <https://www.who.int/news-room/fact-sheets/detail/malnutrition>

- **Nutrition interventions** can broadly be classified into two categories:
  - **Nutrition-specific interventions** refer to interventions that address the immediate determinants of fetal and child nutrition and development. These can include promotion of adequate food and nutrient intake; feeding, caregiving and parenting practice; and prevention of infectious diseases. Examples are breastfeeding promotion, disease management and treatment of acute malnutrition in emergencies.
  - **Nutrition-sensitive interventions** influence the underlying determinants of nutrition. For example, water, sanitation and hygiene; agriculture; social protection education; and women's empowerment.
- **Nutritional status** is the physiological condition of an individual that results from the balance between nutrient requirements, intake and the ability of the body to use these nutrients.
- **Social and behaviour change communication** uses communication strategies that are based on behavioural science to positively influence knowledge, attitudes and social norms among individuals, institutions and communities.
- **Social norms** are shared standards of acceptable behaviour within groups. These can be both informal understandings that govern the behaviours of a society and written rules and laws.
- **Unpaid care and domestic work** refers to non-market, unpaid work carried out in households (by women primarily, but also to varying degrees by girls, men and boys). This includes both direct care (of persons) and indirect care (such as cooking, cleaning, fetching water and fuel, etc.)<sup>28</sup>.

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28 Actionaid, 2021. Unpaid care and domestic work. <https://www.actionaid.org.uk/our-work/womens-economic-rights/unpaid-care-and-domestic-work>