

NO WASTED LIVES

Accelerating
joint action
on nutrition

Photo: D. Burmu © Action Against Hunger Nepal, 2015



SEVERE ACUTE MALNUTRITION RESULTS IN BETWEEN
1 & 2 MILLION PREVENTABLE CHILD
DEATHS EACH YEAR

SEVERELY MALNOURISHED CHILDREN ARE
9X MORE LIKELY TO DIE FROM COMMON INFECTION THAN THEIR
BETTER-NOURISHED PEERS, AFFECTING CHILDREN'S PROSPECTS
OF SURVIVING AND THRIVING IN ALL AREAS OF THEIR LIVES



Treatment for this most lethal form of malnutrition is simple & effective.

MORE THAN **70%** OF THOSE TREATED
ARE CURED

BUT LESS THAN **20%** OF CHILDREN AFFECTED ARE ABLE TO
ACCESS THE TREATMENT THEY NEED

It does not have to be this way:

**WE HAVE THE KNOWLEDGE, THE ABILITY
AND THE RESOURCES TO CHANGE THIS**

MALNUTRITION

THE KILLER FACTS

Global efforts to address diseases such as malaria and pneumonia have led to a dramatic decline in the number of children dying each year.

In 2015, 5.9 million children under five died, compared to 12.7 million in 1990. However, the world still missed the Millennium Development Goal target of reducing child deaths by two thirds by 2015.

Nearly half of all deaths in children under five are attributable to malnutrition. Failure to treat it undermines the effectiveness of efforts to tackle other diseases such as malaria, diarrhoea and pneumonia. Malnourished children are more likely to get sick: their immune systems don't develop properly and they can't defend themselves against illness and infectious disease.

AS PART OF THE NEW SUSTAINABLE DEVELOPMENT GOALS, SET IN NEW YORK IN SEPTEMBER 2015, GLOBAL LEADERS HAVE COMMITTED TO ELIMINATING ALL PREVENTABLE CHILD DEATHS BY 2030. THIS WILL NOT BE POSSIBLE WITHOUT MORE CONCERTED & COORDINATED ACTION TO TACKLE THE MAIN UNDERLYING CAUSE OF CHILD MORTALITY: MALNUTRITION.



SEVERE ACUTE MALNUTRITION AFFECTS OVER 16 MILLION CHILDREN AROUND THE WORLD, AND IS RESPONSIBLE FOR BETWEEN 1 & 2 MILLIONS DEATHS ANNUALLY.ⁱ

DEADLY BUT CURABLE

Yet, in spite of the lives it claims, this extreme and lethal form of malnutrition is curable via simple, effective interventions. In the last two decades, the development of innovative products, innovative delivery mechanisms, and increased knowledge and understanding, have improved survival prospects and pushed down costs.

However, making these new approaches and services widely available has been a challenge, and only 3.2 million children a yearⁱⁱ (less than 20% of the estimated total) are able to access the care they need. Immediate and concerted action is necessary to address key challenges in health and nutrition policy, practice and financing.

A PIECEMEAL APPROACH

Historically, severe acute malnutrition has been understood as a consequence of humanitarian emergencies. This has led to specialisation and a 'silo' approach whereby those working in longer-term development have focused more on chronic malnutrition and its effects and remedies.

And yet, it is increasingly clear that all forms of malnutrition are interrelated, often occur in the same communities and individuals, and should be addressed as consequences of the same problem. Severe acute malnutrition has many triggers and is a recurring issue in many communities. Failure to consider it as part of the development context and to make efforts to prevent and treat it threatens to undermine overall efforts to reduce poverty and promote child survival.

UNLOCKING THE POTENTIAL FOR CHANGE

The impact of severe acute malnutrition on overall child mortality means that scaling up prevention and treatment should be an indispensable part of global efforts to meet the Sustainable Development Goals and other global health and development targets. Early detection and treatment does not just save lives but increases the success of other health interventions and improves children's overall prospects. Research suggests treatment for severe acute malnutrition has the potential to save more lives and be more cost-effective than any other nutrition intervention.ⁱⁱⁱ

However, in 2014, donors provided only \$450 million^{iv} for severe acute malnutrition – less than 25% of funding needs. Screening, monitoring, prevention of and treatment for severe acute malnutrition has not been systematically integrated into most country's health systems, and initiatives to tackle malaria, pneumonia and diarrhoea have failed to recognise or address severe acute malnutrition as an underlying cause of death.

ⁱ Collins, S. et. al (2006) Management of severe acute malnutrition in children (*The Lancet*, Volume 368, Issue 9551, p. 1992-2000)

ⁱⁱ UNICEF (2014) *Nutridash Global Report 2014* (UNICEF, New York, p. 41)

ⁱⁱⁱ Bhutta, Z. et.al. (2013) Evidence-based interventions for improvement of maternal and child nutrition: what can be done and what cost? (*The Lancet*, Volume 382, Issue 9890, p. 452-477)

^{iv} Kakiyete et.al. (2016) *Investing in Nutrition: The Foundation for Development* (World Bank, Results for Development, Bill & Melinda Gates Foundation, Children's Investment Fund Foundation and 1,000 Day, Washington DC, 2016)

A NEW COALITION TO CATALYSE GLOBAL ACTION

Recognising the scale of the challenge and the opportunity for change, UNICEF, the UK government, the European Commission, Action Against Hunger and the Children's Investment Fund Foundation have joined forces to accelerate collective global action to prevent and double the number of children receiving treatment to 6 million a year by 2020. *No Wasted Lives* will promote a joined up approach to child health and nutrition, which builds on the excellent work already being done, while supporting governments, donors and NGOs to realise the synergies of cooperation.

In this the UN Decade of Action on Nutrition, *No Wasted Lives* will put the prevention and treatment of severe acute malnutrition back on the mainstream health and nutrition agenda, and keep it there.



THE *NO WASTED LIVES* COALITION HAS THREE CLEAR OBJECTIVES

01

MAKE SEVERE ACUTE MALNUTRITION A POLITICAL & PUBLIC HEALTH PRIORITY

Articulate a clear case for action based on demonstrable and quantifiable potential for impact. Fill gaps in data and evidence needed to define the problem and describe viable solutions and support national governments, donors and other key stakeholders to act.

02

DISCOVER & DISSEMINATE EFFECTIVE WAYS TO PREVENT & TREAT SEVERE ACUTE MALNUTRITION

Invest in and accelerate the roll-out of the best approaches to preventing and treating severe acute malnutrition, and help ensure new ideas get put into practice quickly.

03

MOBILISE MORE MONEY & MAXIMISE EFFECTIVENESS OF CURRENT SPENDING

Invest in and test new ways of reducing the cost of prevention and treatment, to make existing resources go further. Use this information to support and encourage national governments and donors to increase investment and target existing funds strategically.

To achieve the objectives, the coalition will develop three key work streams:

A TECHNICAL ACCELERATOR, A DONOR FORUM AND AN ADVOCACY AGENDA



TECHNICAL ACCELERATOR

The coalition will invest in cutting edge ideas and bold hypotheses to drive forward global learning and action on prevention and treatment of severe acute malnutrition. We will convene and coordinate the first-ever technical panel of independent experts on severe acute malnutrition, with a view to increasing knowledge and speeding up the time it takes for good ideas to be put into widespread practice.

The independent Council of Research & Technical Advice on Severe Acute Malnutrition (CORTASAM) will review new and existing ideas and support the World Health Organisation, UNICEF and other leading policymakers and practitioners to incorporate the most successful ones into policy and practice. The Council will review the options for treatment and prevention, provide donors with the evidence and information they need to release funding, and work with NGOs and governments to implement new approaches at scale.

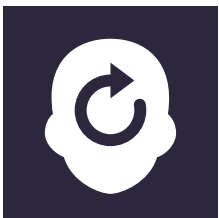
The advice and findings of the Council will be publicly available. Council experts will seek out evidence and contributions from those operating on the ground. Communities, practitioners, and donors will be invited to request advice and feed back on how easily the new methods are integrated into different health systems and contexts.



DONOR FORUM

We will convene and host a Forum for governments and other donors involved in funding the response to severe acute malnutrition. The group will bring together traditional and non-traditional donors and recipient governments with a view to increasing the overall amount of money available, improving coordination of existing investments, unlocking new health and long-term funding, and bringing new donors and businesses to the table.

The Forum will provide a place to share the latest intelligence on impact, current funding, and projected needs. It will help donors compare their messaging, approaches and priorities to ensure they are coherent with each other. It will encourage better integration of funding for severe acute malnutrition into global health budgets and will give donors, governments and service providers the best chance of driving down costs and maximising economies of scale.



ADVOCACY AGENDA

The coalition will engage governments and other actors to support them in making the best decisions about prevention of and treatment for severe acute malnutrition. First and foremost, the coalition will ensure that key stakeholders understand exactly what severe acute malnutrition is, where and why it happens, and how easy and effective treatment can be. It will support governments, donors and implementing agencies to develop policies and practices that realise the potential to increase global child survival rates.

We will provide the evidence, intelligence, and data that governments and other key actors need to make informed decisions. The coalition will work with national governments in high burden countries to inform practical action and policymaking and help them set national targets for reducing severe acute malnutrition and for treatment coverage. It will provide NGOs and other agencies with support to inform their programming and advocacy, and will help identify and remove challenges in programming so that good and proven ideas can be quickly rolled out.

JOIN US

Ending unnecessary deaths from severe acute malnutrition is not just possible, it is achievable. And the actions to do so would yield benefits far beyond their immediate target. Scaling up efforts to prevent and treat this neglected disease, could save 2 million lives a year, and lay the foundations for progress in many other areas, from child health, to education, and development.

To start with, governments and donors should scale up proven and costed interventions that have already benefitted children in many countries around the world. ***No Wasted Lives*** aims to catalyse the financial, technical, and political support they need to do so.

Secondly, we need to increase our collective knowledge and capacity to act on it. By investing in and identifying the most cutting-edge ideas the ***No Wasted Lives*** coalition will help governments adopt new policies with confidence, and support those on the ground to roll them out effectively and efficiently.

Finally, we need to act together. ***No Wasted Lives*** will build on existing efforts, create and maximise synergies, and bring new players on board to accelerate progress and overcome the challenges. We have convened a coalition of partners to kick-start this journey.

BUT WE CAN'T DO THIS ALONE. JOIN US.



TO FIND OUT MORE VISIT:
www.nowastedlives.org

DELIVERING SUCCESS

The overall aim of the coalition's work is to

**DOUBLE THE NUMBER OF CHILDREN RECEIVING TREATMENT TO
6 MILLION A YEAR BY 2020**

In order to realise this overarching goal, the coalition will pursue the following outcomes by 2020

The cost of curing a child suffering from severe acute malnutrition is reduced to
\$100 or less
i.e. by at least 20%

The cost of Ready to Use Food per child cured is reduced by
50%

New treatment approaches prove capable of reaching over
70%
of cases in areas of intervention

5
key high burden countries adopt reduction & treatment coverage targets

**THE NUTRITION POLICIES OF ALL KEY BILATERAL DONORS SUPPORT
SCALE-UP OF TREATMENT FOR SEVERE ACUTE MALNUTRITION**

**ALL KEY HIGH BURDEN COUNTRIES HAVE NATIONAL NUTRITION POLICIES
THAT PROMOTE PREVENTION AND COMMUNITY-BASED TREATMENT
FOR SEVERE ACUTE MALNUTRITION**

**NEW FINANCIAL PLEDGES ARE MADE THAT SUPPORT
TREATMENT FOR SEVERE ACUTE MALNUTRITION**