

Wasting Reset

Catalysing action and accountability on child wasting: Prevention, early detection and treatment



**There is
no time
to lose or
waste: the
time has
come for
a wasting
'reset'**

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A synthesis of working group recommendations to guide the development of the 'Wasting Reset' manifesto

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A 'reset' on childhood wasting

Wasting is the most visible type of malnutrition and carries the highest risk of death.¹ Children with severe wasting are nine to 12 times more likely to die than healthy, well-nourished children (Olofin *et al.*, 2013). Despite strong evidence on solutions that work, we urgently require higher levels of political commitment and financial investment to ensure that no child suffers or dies from a condition that is entirely preventable.

In recent years, while there has been an increased interest in, and investment aimed at, reducing wasting, including strong support from national governments, the pace of progress has been much too slow to achieve global goals and targets. Historically, wasting has not received as much attention as other types of malnutrition (Gross & Webb, 2006). Little progress has been made towards achieving the Sustainable Development Goal 2 (SDG 2) (Zero Hunger) target, which calls for less than 3% prevalence of wasting by 2030 (WHO & UNICEF, 2018). To save lives and stop millions of children becoming gravely ill each year, we urgently need to intensify our efforts to reduce child wasting worldwide.

We therefore need a **'reset' of childhood wasting prevention, early detection and treatment**. This

reset aims to galvanise multiple stakeholders around the key actions needed to stimulate progress and ensure accountability in the 2022–2030 period, and will be used by governments and organisations to inform their political and financial commitments to tackle wasting (see **Box 1** for details on the Wasting Reset and **Box 2** for more information on wasting).

Effective nutrition programming relies on a financial and policy environment that is driven by **strong political will** to establish food, health and social protection systems that operate to prevent undernutrition. In addition, the only way to significantly reduce the numbers of children experiencing wasting is to ensure that prevention strategies are implemented alongside, and are strategically integrated with, treatment. We are currently in the Nutrition Year of Action, which has seen the publication of the 2021 Lancet series on Undernutrition Progress, which calls for **collective, coordinated action** leading up to the Nutrition for Growth (N4G) Summit (Heidkamp *et al.*, 2021). Both the United Nations Food Systems Summit in September 2021 and the N4G Summit in December 2021 offer a unique opportunity to catalyse global action and accountability to achieve global wasting targets.

¹ Other forms of malnutrition include stunting (being shorter than expected compared to those of the same age in a well-nourished population) micronutrient deficiencies (not having enough specific vitamins and minerals in the diet), overweight and obesity.

Box 1 The Wasting Reset: Action needed to significantly reduce child wasting by 2030

Why is this reset needed?

Action and accountability for wasting must be urgently elevated from technical domains to political levels, and from a medicalized problem to one that is addressed via improvements in food systems. This ‘reset’ is needed because progress in tackling child wasting has been much too slow, due to numerous constraints. To address these constraints, an interagency effort involving multiple stakeholders has developed a series of consensus-driven actions and solutions across six key themes.

What are the constraints and how will this reset address them?

Numerous blockages hampering the scale-up of wasting prevention, early detection and treatment were identified across each of the six themes, ranging from inadequate and irregular financing to fragmented leadership and poor coordination, lengthy processes for innovation, and insufficient attention to preventive actions across all contexts, etc. We make the case that concerted action by multiple stakeholders on the priority recommendations outlined in this brief can significantly move the dial on child wasting.

How does this reset build on existing initiatives?

Each of the working groups used the United Nations joint Global Action Plan (GAP) and the United Nations Children’s Fund’s (UNICEF’s) No Time to Waste documents as the starting point for discussion (see **Box 3**). This reset therefore builds on the important work done to date, but goes further, by defining specific actions required across the six themes in clear and concrete ways. This process has mobilised a broader set of stakeholders who can complement the key United Nations efforts through mobilising their skills and energy to ensure transformative, enduring solutions. A final important point is that this reset emphasises the need to strengthen accountability at global and national levels, focussing on objective mechanisms such as the Global Nutrition Report.

Box 2 The nature and scale of the problem

Wasting is a process that occurs when nutrient intakes are insufficient for what the body needs to function and grow, often as a result of an inadequate diet and/or infection. Rapid weight loss and reduced immunity make the child even sicker. Wasting occurs most frequently in the first few months of life and greatly increases the child’s risk of infection and death. Approximately 30% of wasting is already present at birth, resulting from poor maternal nutrition and inadequate growth of the child during pregnancy.

It is estimated that 45.4 million children under the age of five currently suffer from wasting across the world (UNICEF *et al.*, 2021). However, the real number is likely to be much higher because new cases emerge throughout the year as many children fall into wasting during certain seasons (Isanaka *et al.*, 2016). High levels of wasting are seen in both fragile and stable development contexts, with the highest numbers in Africa and South Asia (UNICEF *et al.*, 2021). Further challenges, such as the effects of climate change (FAO *et al.*, 2018) and the COVID-19 pandemic, will likely increase wasting and other forms of undernutrition. Across the world, hunger has been on the rise again over the last few years, and an estimated 118 million more people faced hunger in 2020 than in 2019 (FAO, 2021). Furthermore, estimates predict that the pandemic could result in up to an **additional** 13.6 million wasted children by 2022 (Osendarp *et al.*, 2021).

Development of a manifesto

To provide technical recommendations on what needs to be done to significantly reduce child wasting, six independent working groups were established. These working groups were made up of representatives of more than 40 organisations and governments, who discussed and agreed upon key messages and actions. Each group produced a short technical brief building on existing frameworks, such as the United Nations joint GAP² for child wasting (see **Box 3**), and proposed realistic actions to be taken, organised by the following themes: 1) financing; 2) advocacy; 3) prevention; 4) treatment scale-up; 5) nutritional products for treating wasting; and 6) policies and guidelines (see **Figure 1**).

This synthesis document summarises the critical components of the six working group briefs, outlining the two main recommendations for each of the six themes. It also provides background for the upcoming round-table meeting, the objective of which is to translate the technical recommendations into a succinct, engaging manifesto that is appropriate for a political audience. The manifesto will be launched at the upcoming N4G Summit.

Box 3 How the Wasting Reset builds on existing frameworks and partnerships

The **GAP on child wasting** is a United Nations inter-agency framework describing the evidence-based actions that governments and their partners can implement to improve the prevention, early detection and treatment of child wasting. Prevention is central to the approach, which highlights the need for coordinated action in all areas: food, health, social protection, and water, hygiene and sanitation systems. Under the GAP, national governments and their partners develop Operational Roadmaps of their own to prioritise and resource both services and actions, which address context-specific needs and opportunities.

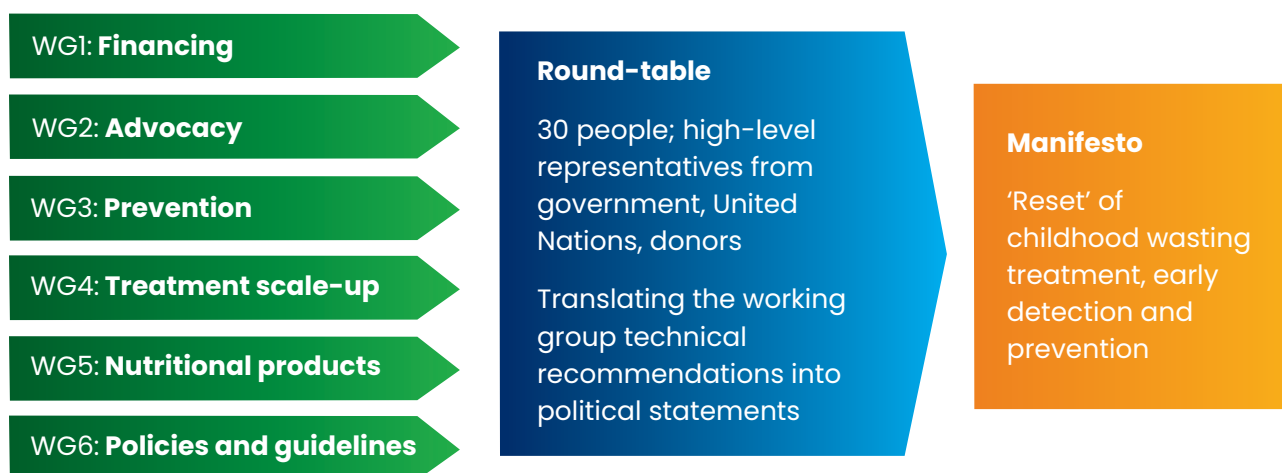
The **UNICEF and WFP Partnership Framework** recognises the need for a more integrated approach to addressing child wasting. To facilitate this, the two organisations have joined forces to support each other's strengths when helping countries to accelerate progress in reducing wasting.

UNICEF's **No Time to Waste** approach aims to scale up the prevention, early detection and treatment of wasting among the world's most vulnerable children: the youngest of the young, the poorest of the poor, and those left behind by humanitarian crises. Guided by UNICEF's 2020–2030 Nutrition Strategy, the approach offers concrete actions and commitments to address child wasting at the scale, and with the level of urgency, required.

This Wasting Reset incorporates the GAP framework, while broadening the range of stakeholders involved, to increase the momentum and uptake of actionable solutions. Informed by a large interagency effort, the manifesto aims to secure political buy-in for action to complement, widen and build on the GAP and related roadmaps, partnerships and frameworks.

² United Nations agencies involved in developing the GAP for child wasting were: the Food and Agriculture Organization (FAO), the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), and the World Health Organization (WHO).

Figure 1 Process for developing the wasting reset manifesto



Priority recommendations for the Wasting Reset

The two priority recommendations outlined in each of the six technical briefs are summarised below and in **Box 4**. The full briefs are [available online](#) and give the rationale, key messages, full set of recommendations and detailed actions derived from each of the working groups.

Theme 1: Financing

- **Recommendation: Increase political and financial commitments to reach Zero Hunger**

USD 12.6 billion per year in financial commitments is urgently needed to achieve SDG 2 by 2030.³ Urgent political momentum will be required to achieve this target, through all possible sources, including domestic resources, international donors, philanthropists and private sector investment.

Countries should be encouraged to set targets for domestic funding in support of multi-sector wasting management plans (e.g., GAP Operational Roadmaps).

- **Recommendation: Develop more accurate and comprehensive financial estimates for wasting prevention**

Current estimates focus on the costs of severe wasting treatment only; they do not include costs for the prevention of wasting or for the treatment of moderate wasting. Comprehensive financial estimates on wasting prevention are needed, to complement cost estimates for stunting prevention, so that they can form part of a broader multi-sector approach to nutrition. This will require an expanded evidence base, including evidence on the cost-effectiveness of solutions that work. Generating this evidence will also require funding.

Theme 2: Advocacy

- **Recommendation: Build political will and commitment to tackle child wasting**

High-level political commitment at all levels is needed to prioritise child wasting, to set targets and to ensure

³ Estimates underpinning this figure are explained in the financing working group brief, available [here](#).

Box 4 Priority recommendations for wasting prevention, early detection and treatment

Financing

- Increase political and financial commitments to reach Zero Hunger
- Develop more accurate and comprehensive financial estimates for wasting prevention

Advocacy

- Build political will and commitment to tackle child wasting
- Strengthen accountability for wasting at the global and national levels

Prevention

- Improve situation and causal analysis to map out context-specific causes of child wasting
- Prioritise and scale up packages of preventative interventions, based on evidence

Treatment scale-up

- Integrate child wasting treatment in strengthened health systems
- Improve the efficiency of services tackling child wasting

Nutritional products to tackle wasting

- Ensure that medical facilities of all kinds are stocked with the necessary supplies to treat wasting among children and pregnant and lactating women
- Improve the cost-effectiveness of both the production of nutritional products and of programmes tackling wasting

Policies and guidelines

- United Nations agencies should develop timely, evidence-based and adaptable guidance on how to implement wasting guidelines
- National governments, with support from United Nations agencies, should act on up-to-date global guidance in a timely manner, adapting this for their own contexts

that adequate, long-term financing is dedicated to tackling wasting. Multi-sector and multi-stakeholder engagement is key to sustaining political will.

At the N4G Summit, governments in particular should be encouraged to make ambitious pledges: to reduce wasting; to develop high-level strategies that make wasting a public health and development priority; and to allocate sufficient long-term funding to support the implementation of policies and services. This should be supported by United Nations agencies, civil society and donor efforts to:

- champion multi-sector approaches that strengthen relevant systems to tackle wasting across both humanitarian responses and national sustainable development plans
- develop multi-sector advocacy and engagement strategies

- assist in budget analysis, funding acquisition, and budget support, where appropriate.

- **Recommendation: Strengthen accountability for wasting at the global and national levels**

Accountability mechanisms, with universal measurement and regular reporting at all levels, are essential to ensure the commitments made bring about real and sustained change. Accountability mechanisms will be most effective if they are connected across global, regional and national levels, and across multiple stakeholders, and if they include proactive, targeted and funded activities. See the accountability section below for specific examples.

Box 5 Use of 'exemplars'

A series of case studies was recently conducted of countries that have made good progress in reducing the prevalence of stunting ('**exemplar countries**'), to determine what works in stunting prevention (Bhutta *et al.*, 2020). A similar exemplar series for wasting would provide an understanding of approaches that have been successful in the prevention, early detection and treatment of wasting, focusing on resource allocations, programmatic approaches, coverage and the role of different sectors (Sadler *et al.*, 2021). This would help to inform the design and adaptation of intervention packages in diverse settings.

Theme 3: Prevention

Preventing wasting is critically important but has received very little attention. This is partially due to a strong focus on wasting treatment in humanitarian contexts, and on the prevention of stunting in development contexts. Due to both limited resources and a failure to prioritise wasting prevention, opportunities to stop new cases of wasting developing have been missed. It is important to note that the current focus on wasting treatment means that global wasting goals will be impossible to reach, because treatment alone does not address the factors that lead to children becoming wasted in the first place. To 'stem the tide' of millions of children becoming wasted each year, we urgently need to scale up effective preventative strategies that are adapted to each context. The use of 'exemplars' (see **Box 5**) may help with tailoring approaches across a variety of settings.

There is a consensus that a multi-systems approach is needed for the prevention of wasting. Coordination across the food, health, water and sanitation, education, and social protection systems should take place, with the aim of delivering safe and nutritious diets and essential nutrition services, and of facilitating positive nutrition practices for infants, children, adolescents and women.

- **Recommendation: Improve situation and causal analysis to map out context-specific causes of child wasting**

Tools and research methods should be developed and/or improved to enable the design and implementation of programmes that prioritise and respond to context-specific causes of wasting, including those directly and indirectly related to the impacts of COVID-19 pandemic. These should be:

- feasible to implement in all settings

- define actions that target the most vulnerable
- focus on how building a supportive environment for nutrition impacts wasting (including local capacities and governance)

- **Recommendation: Prioritise and scale up packages of preventative interventions, based on evidence**

Financial commitments are needed to expand the coverage, quality and delivery of proven interventions outlined in the 2021 *Lancet Series*⁴ and in GAP Operational Roadmaps. Policy directives and funding support should focus on intervention packages that:

- tackle the root causes of wasting, considering particular vulnerabilities of the population, taking into account gender considerations and issues at different life stages
- are guided by policies that strengthen important systems; e.g., food, health, water and sanitation, education, and social protection
- prioritise actions with demonstrated effects on preventing wasting alongside other forms of malnutrition ('double duty' actions) to leverage shared opportunities and improve cost-effectiveness

Theme 4: Treatment scale-up

- **Recommendation: Integrate child wasting treatment in strengthened health systems**

Further integration of essential nutrition actions in routine health services is needed. This will require coordinated efforts and leadership from the health and nutrition sectors to support:

- earlier detection of wasting and treatment referral
- the putting in place of a well-trained workforce

⁴ The *Lancet* 2021 Series on maternal and child undernutrition summarises 11 direct nutrition interventions with a strong evidence base.

- the availability of nutrition supplies
- sufficient funding allocation

In contexts where high numbers of children are suffering from wasting, and where health systems are unable to meet the demand, other community-based and private-sector solutions are needed to complement efforts to strengthen government services.

- **Recommendation: Improve the efficiency of services tackling child wasting**

Child wasting services need to build on evidence-based approaches and be adapted to different contexts, including taking a holistic approach to supporting mothers and children. Nutritional interventions must start during – or even before – pregnancy, and once the infant is born, early detection, referral and treatment of all wasted children is critical, especially for small and vulnerable infants less than six months old. After recovery, the prevention of relapse is also important.

To improve the coverage (i.e., numbers of affected children being reached with treatment) and the public health impact of wasting treatment programmes, simplified and contextualised treatment approaches should be considered.

Theme 5: Nutritional products for tackling wasting

- **Recommendation: Ensure that medical facilities of all kinds are stocked with the supplies needed to treat wasting amongst children and pregnant and breastfeeding women**

Increased domestic resource allocation can help to improve the availability of the products needed to treat wasting at country level. This might mean including them in national essential medicines/commodities lists, strengthening supply chains, and increasing and improving local production capacity (where it can improve product availability).

- **Recommendation: Improve the cost-effectiveness of both the production of nutritional products and of programmes tackling wasting**

Greater cost efficiencies in the production of nutritional products used to treat wasting can be achieved through:

- the development, scale-up and use of new, more cost-effective, ready-to-use food formulations
- increased visibility of the demand for suppliers
- improved efficiency of quality testing, and price adjustment, as required.

These processes can be supported by adopting simplified approaches that treat wasting using dosages that are tailored to children's severity of illness.

Theme 6: Policies and guidelines

- **Recommendation: United Nations agencies should develop timely, evidence-based and adaptable guidance on how to implement wasting guidelines**

Guidance on how to implement wasting guidelines should focus on achieving optimal coverage of services for prevention, early detection and treatment. Effective implementation of these services can be achieved through better integration of wasting programmes in health system structures. To optimise efficiency, guidance should:

- ensure that strong community health worker systems are at the centre
- be responsive to emerging evidence



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- be adaptable to different contexts
- include mechanisms for the monitoring of nutrition programmes.

Mechanisms to evaluate and adapt global guidance on implementation are also needed to understand what works and to inform future adaptations for various contexts.

- **Recommendation: National governments, with support from United Nations agencies, should act on up-to-date global guidance in a timely manner, adapting this for their own contexts**

For successful uptake of policies and guidelines, consultation with national-level civil society actors, health providers and academia, and collaboration with all key sectors, is essential. This inclusive approach will also ensure that both guidelines and implementation guidance can be contextualised for local systems – health, water and sanitation, social protection and food. To aid learning and accountability, it will be important to evaluate levels of uptake and any contextual adaptations that are made.

Accountability

To achieve SDG 2, including the target on child wasting, stakeholders must be held accountable for their commitments to scaling up the prevention, early detection and treatment of wasting. Additionally, wasting needs to be mainstreamed across, and embedded within, wider nutrition agendas and activities. In order to review and respond quickly to progress (or the lack thereof) on this Wasting Reset, well-established mechanisms must be utilised; e.g., the **Global Nutrition Report (GNR)**. The annual GNR has tracked the commitments made at N4G since 2014. It also provides governments, donors, civil society organisations and researchers with evidence of the current scale of malnutrition and the measures being taken to tackle it, as well as highlighting what remains to be done. In 2021, the GNR will build on these existing efforts by creating the world's first independent and comprehensive global accountability framework for nutrition.⁵ The GNR is therefore well-placed to guide the implementation of accountability mechanisms across settings and sectors, to drive stronger action and accelerate progress towards achieving Zero Hunger.

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The content of this synthesis document reflects the priority recommendations of the six working groups. The working groups drew on the professional experience of individual members who engaged in a personal capacity in order to represent the nutrition sector as a whole, and did not reflect the position of any single institution. Where complete consensus on points was not achieved within the group, the majority view was used.

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⁵ This will draw on elements from other existing accountability frameworks, such as the Global Access to Nutrition Index, the Global Nutrition Monitoring Framework, the Sendai Framework for Disaster Risk Reduction, the Progressing Action on Resilient systems for Nutrition through Innovation and Partnership (PARSNIP) framework, etc. The recently established 'Action Review Panel' can also provide important information for accountability for wasting.

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