

COVID-19 BRIEFING FOR THE SUN MOVEMENT

16 October 2020

THE FIGURES: COVID-19 cases across SUN and around the world

The highest number of reported COVID-19 cases, so far, in a single week – over 2.2 million new cases and 39,000 deaths – has been reported since 5 October, around the world.¹ Between 30 December 2019 and today (16 October 2020), just above 39 million COVID-19 cases and almost 1.1 million deaths have been reported globally. Still, the most amount of global cases (48%) and deaths (55%) continue to be in the Americas, while the two African regions have reported a substantial rise in deaths (27%) the past week.

Total confirmed SUN country infections – across our now 62 member States, with Timor-Leste joining SUN this week – are at 3,331,936, up from 3,178,898 last week.² SUN country infections account for only 8.55% of global infections today, which is an improvement. On the other hand, Nepal and Myanmar have seen particularly large increases since last Friday. The most affected SUN countries remain the same (Peru, Bangladesh, Philippines, Indonesia and Pakistan) and they, together, account for 2.26 million infections, or almost 68% of the total infections across SUN countries. New SUN country Timor-Leste and Papua New Guinea both have very few infections, with only 29 and 23 reported cases, respectively. Estimates³ suggested that infections are on the rise in 13 SUN countries: in Honduras, Nepal and now Kyrgyzstan new cases are higher and projected to stay high. New cases are lower but on the increase in Myanmar as mentioned above, but also in Ethiopia, Sri Lanka, Zambia, Papua New Guinea, Togo, Kenya, Mali, Benin and Chad. Promisingly, as was the case last week, infections are going down in Peru – although at more than 850,000 – and still low and projected to stay so in a further 48 SUN member States.

THE PROBLEM: COVID-19 and nutrition

We are at serious risk of **losing the gains we have made in nutrition (but also towards the SDGs)** over the past decade. Even short-term food & nutrition insecurity and disruption of essential nutrition programmes have **irreversible effects on maternal and child survival, health and development.**

The COVID-19 pandemic is expected to **increase many forms of child malnutrition, including wasting, stunting, micronutrient deficiencies, and overweight.**

- Children who experience undernutrition are more likely to die – those who survive do less well at school and go on to have lower earnings throughout their lifetime. Women who are poorly nourished during pregnancy are more likely to die or give birth to smaller babies. COVID-19 has placed half a million more girls at risk of child marriage in 2020 ([Save the Children report](#)).
- Undernutrition may exacerbate COVID-19: people who are undernourished are more likely to die from infectious diseases, including pneumonia.
- In countries that have seen the first or second waves of COVID-19, obesity and diet-related non-communicable diseases have been associated with more severe outcomes of the virus.
- Before the crisis, 3.1 million girls and boys under 5 died from causes attributable to malnutrition (or 45% of all child deaths). If strong multi-sectoral action targeting wasting is not implemented at scale, the best projections identify that the effects from COVID-19 can increase monthly child mortality rates by over 40,000 girls and boys and 10 to 40% per month. **NEW:** An extra 10,000 children per month may die this year from malnutrition due to the COVID-19 crisis ([WHO, Dr Tedros](#)).
- In 2019, 144 children were stunted (down from 149 in 2018), 47 million were wasted (down from 49 million in 2018), and 38 million children were overweight (down from 40 million in 2018).
- Acute malnutrition in children under five could rise by 20% (or an extra 10 million girls and boys) due to the socio-economic impacts of COVID-19 on food security. Impacts from the closure of health facilities will increase the rates even further ([WFP acute child malnutrition projections](#)).
- Every percentage point drop in global GDP is expected to result in an additional 0.7 million stunted children.
- Resulting from the disruption of health systems and decreased access to food, maternal and child mortality will increase, as will wasting ([The Lancet](#)):
 - Depending on the severity of impact, models suggest additional increases between 2,030 and 9,450 in maternal deaths, and between 42,240 and 192,830 child deaths per month. It is projected that in 2020 we will see 128,605 additional deaths in children younger than 5 years ([The Lancet estimates of 27 July](#))
 - We will see an additional estimated 6.7 million children with wasting in 2020 – 80% of whom will live in South Asia and sub-Saharan Africa ([The Lancet estimates of 27 July](#))
 - UNICEF reports from the early months of the COVID-19 pandemic suggest a 30% reduction in the coverage of essential nutrition services in low and middle-income countries and declines of 75-100% in lockdown contexts ([UNICEF data and estimates](#)). **NEW:** An additional 150 million children are being severely deprived in their access to health, education, nutrition, water and sanitation and housing services ([Save the Children report](#))
- By the end of the year 12,000 people per day could die from hunger linked to COVID-19, potentially more than will die from the disease itself ([Oxfam brief on hunger, malnutrition & COVID-19](#)).

¹ Analysis taken from the [WHO weekly epidemiological situation update \(11 October\)](#)

² Data from [Johns Hopkins University](#), updated on 16 October 2020. As of today, Timor-Leste is included in this overview. India is not considered, however. Tanzania has not reported cases since June, which means that the 509 cases they last reported are included in this overview. Note that underreporting or standardised, accurate reporting of confirmed cases remains a challenge, also in middle and lower-income contexts.

³ Analysis from the [New York Times](#) of 14 October using data from Johns Hopkins University, as referenced above.

<p>COVID-19 is severely disrupting livelihoods & the production, transportation, storage and sale of food.</p> <p>This undermines people's ability to access safe, nutritious and diverse diets, including a likely increase in people's reliance on staple foods.</p>	<ul style="list-style-type: none"> • Ensuring enough calories is not enough, good nutrition needs to be at the centre of food security efforts during and beyond this crisis. • Globally, the cost to health, nutrition, and the natural environment from failing food systems is estimated to be USD 12 trillion dollars a year and rising (GLOPAN report). • We face an impending global food emergency⁴ of unknown, but likely very large proportions. COVID-19-related disruptions can result in consequences for health and nutrition of a severity and scale unseen for more than half a century. (UN Secretary-General policy brief on food security and nutrition). • Acute hunger set to double by the end of 2020 (from 130 million to 265 million) (WFP projections). WFP was awarded the 2020 Nobel Peace Prize for efforts to combat hunger. • The impacts of crises are never gender-neutral, and COVID-19 is no exception. This pandemic is a crisis on top of a crisis in parts of Africa, Latin America and Asia: • In 2019, 3 billion people around the world could not afford a healthy diet. (SOFI 2020) • 1.6 billion people working in the informal economy (half of global labour force) at risk of losing their livelihoods, and therefore have less access to healthy, nutritious food. Women are among the most hard-hit, as they are overrepresented in the informal sector and in service industry jobs that cannot easily move online (Freund and Hamel 2020). Only 1/8 countries worldwide have measures in place to protect women against the social and economic impacts of COVID-19 (UN Women/UNDP gender tracker). NEW: Yet, only 3.5% of COVID-19 decision making bodies and task forces from 87 countries have achieved gender parity (BMJ Global Health) • Labour income losses are much higher than previously thought: the equivalent of 495 million full-time jobs have been lost because of the pandemic, with women and young people especially hard hit (ILO Monitor sixth edition: COVID-19 and the world of work). • A study from Latin America and the Caribbean shows that COVID-19 disproportionately affects low-income workers' finances in developing countries: 71% report that a household member has lost their job and 61% that a household member closed their business, in comparison to highest income respondents, where just 14% of whom reported that a household member lost their job and 54% that a household member closed their business (Inter-American Development Bank report). • Estimates suggest that earnings will fall by 28% in upper-middle-income countries, and 82% in lower-middle and low-income countries (Glopan Policy Brief: COVID-19: safeguarding food systems and promoting healthy diets) • The cost of a basic food basket has risen by 5-10% in eight countries and by over 10% in a further nine countries.⁵ (New Food and Land Use Coalition) • The Desert Locust upsurge remains alarming, mainly in East Africa and Yemen, where 35 million are experiencing acute food insecurity. • School closures to stop the spread of COVID-19 are having an adverse impact on learning outcomes and social and behavioural development of children and youth. They have affected over 90% of the world's student population—1.6 billion children and youth. 370 million children are missing free school meals due to the pandemic. (UNSG HLPF report) • Businesses in 'low- and middle-income' countries, collectively, lose between USD 130-850 billion a year through malnutrition-related productivity reductions, equivalent to between 0.4% and 2.9% of those economies' combined GDP (at the least). (Chatham House business case for nutrition report)
<p>We could be looking at a global GDP fall of 6-10%, which would push more people, especially women, who live in sub-Saharan African and South Asian countries, into extreme poverty.</p> <p>The OECD forecasts a decline of 4.5% in 2020 with unprecedented damage.</p>	<ul style="list-style-type: none"> • This the first increase in global poverty in more than 20 years (UNSG HLPF report). So far, the pandemic has led to a 7% increase in extreme poverty, with an additional 37 million people living below USD 1.90 a day (Bill & Melinda Gates Foundation Goalkeepers report). 96 million people (of whom 47 million will be women and girls) will be pushed into extreme poverty by the end of the year due to a slowing economy, job losses and lack of social protection (UN Women/UNDP report). In 2021, 247 million women and 236 million men above 15 years of age will be living in extreme poverty (UN Women/UNDP report). By 2030, an additional 130 million people may join the ranks of people living in extreme poverty. Many of these vulnerable people are themselves involved in food production or food systems-related work to secure their own food access. (UNSG food security nutrition brief). • Analysis from the 2008 food price crisis found that child wasting increased by up to 50% in highly affected countries. COVID-19 will cause a 40% drop in foreign direct investment (FDI) in 2020. (UNCTAD, World Investment Report 2020)

⁴ The UNSG brief defines a food emergency as “an extraordinary situation in which people are unable to meet their basic survival needs, or there are serious and immediate threats to human life and well-being”.

⁵ The countries with a severe increase in the basic food basket price (or 10% or above) include: **Cameroon, CAR, Chad, Ghana, Guinea-Bissau, Mozambique, Rwanda, Sierra Leone, Sudan and Zambia.**

WHAT MUST BE DONE: Key messages

<p>A comprehensive, multi-sectoral approach to nutrition needs to be integrated into COVID-19 response & recovery efforts, especially actions across health systems, food systems and social protection systems. (SUN country practices are highlighted in orange)</p>	<ul style="list-style-type: none"> • SUN Movement Focal Points and multi-stakeholder platforms (MSPs) need to be involved in COVID-19 response and recovery efforts. It is important to build on existing multi-stakeholder, multi-sectoral efforts. In 19 SUN countries, the SUN Focal Point is a part of the COVID-19 emergency response efforts: Bangladesh, Cambodia, El Salvador, The Gambia, Guatemala, Honduras, Indonesia, Lao PDR, Liberia, Nepal, Mauritania, Mozambique, Pakistan, Peru, Philippines, Sierra Leone, Sudan, Viet Nam and Zambia. • A global Covid-19 response index by Foreign Policy magazine has given Senegal the highest possible score for its communication strategy, and is ranked 2nd highest in the world. • In Cameroon, FAO is training producers to use innovative solar dryers to process and conserve fruit and vegetables while preserving their nutritional status. • In Cameroon, Congo and Gabon, ‘Green Classes’ have been introduced in schools to ensure nutrition-sensitive agriculture and food systems, with FAO support. • Nigeria has developed a National Food and Nutrition Response Plan for the COVID-19 pandemic. • In Sudan and Ethiopia, SUN stakeholders have been supporting the development and dissemination of guidance on nutrition during COVID-19. • Burkina Faso is harnessing digital and transformative opportunities for both integrated management of childhood illnesses and malnutrition – leading to a significant rise in correct undernutrition classifications. A workshop was organised by the SUN Focal Point for MPs during crisis on the importance of nutrition. • In Comoros, an information system on severe acute malnutrition (SAM) management has been built during the COVID-19 crisis. • El Salvador, Costa Rica, Guinea-Bissau, Madagascar and Togo have stepped up communication on the importance of nutrition to fight COVID-19, also targeting children. • In El Salvador, the SUN Civil Society Alliance is delivering food parcels to those most in need. • In Bangladesh, the National Nutrition Services (NNS) is conducting online surveys to assess the functionality of 366 severe acute malnutrition centres. • Lao PDR is mainstreaming nutrition into its emergency plan. • In Niger, the Technical Group on Nutrition, based within the Ministry of Health, and composed of key nutrition stakeholders, are working together to improve coordination via guidelines for the response to COVID-19. • Myanmar is boosting governmental efforts to screen potential COVID-19 cases within the 4 million migrant workers returning from Thailand and China and ensure a 3-week quarantine period in designated centres, ensuring adequate shelter, health, nutrition and hygiene standards. Nutrition messages and nutrition guidance package on COVID-19 have been developed, together with video/audio clips for key nutrition messages in community. • Peru’s Ministry of Economy has a long-standing online portal, <i>Consulta Amigable</i>, that monitors allocations for nutrition interventions and now COVID-19 interventions. • In Central America, the Central American Integration System (SICA) has launched a Regional Contingency Plan where food security and nutrition is well positioned, as SICA will coordinate actions within this framework to avoid food crises, and will monitor indicators, especially related to adequate access, availability of food and stability. • In Pakistan, the Civil Society Network (CSN) has undertaken many activities, including mobilising philanthropists, raising awareness, mobilising local resources, providing food baskets, personal protective equipment, and hand washing stations helping people contact and register with government support programmes. • The SUN Civil Society Asia Coordination Group has launched a campaign “Nutrition Can’t Wait”.
<p>Nutrition must be essential pillar of post-COVID recovery & emergency preparedness moving forward – to build immunity and resilience of people & communities.</p>	<ul style="list-style-type: none"> • Poor quality diets without the range of nutrients needed for immune function, brain development and health more broadly leave a permanent legacy. • Every response to this crisis must be appropriate for the context, led by countries themselves and ensuring effective coordination between humanitarian and development actors and between different sectors. • Vulnerability factors such as poverty, inequality (also based on gender), pre-existent malnutrition, infectious diseases such as HIV/AIDS, non-communicable diseases such as diabetes, crowded living conditions, poor access to healthcare and clean water and sanitation must be considered and addressed. • National and global responses aiming to prevent a hunger crisis need to critically look at the role and status of women and girls in food systems and nutrition actions, as responses to COVID-19 and related hunger crises are either ignoring women and girls or treating them as victims who have no role in addressing the problems they face. (CARE analysis)

THE SUN MOVEMENT'S RESPONSE TO COVID-19: Our priorities

<p>The SUN is taking a Movement-wide approach to COVID-19, bringing together the entire Global Support System ⁶ to jointly advocate to safeguard nutrition during and following this crisis, and providing support to SUN countries during the emergency, recovery and beyond.</p>	<ul style="list-style-type: none"> To better equip stakeholders in SUN countries to play a role in COVID-19 response & recovery efforts, and to keep ensuring a multi-sectoral, multi-stakeholder approach to nutrition, we focus on facilitating coordinated action by SUN Movement stakeholders, at all levels, and providing information and support. We engage with SUN country stakeholders, on an ongoing basis, to understand the current situation and how it affects nutrition. <p>Some examples:</p> <ul style="list-style-type: none"> ✓ Secretariat workstreams up and running, with three workstreams and monthly meetings, also across the Global Support System ✓ The October period will be used to revise and update many of the pieces below, with a focus on building back better: ✓ SUN Lead Group COVID-19 engagement mapping (<i>draft finalised</i>) ✓ The 2020 SUN Movement Joint-Assessment incorporates a range of questions also related to COVID-19 (<i>deadline is 31 October</i>). ✓ SUN COVID-19 knowledge hub (<i>last analysis shows more than 2,000 visits per month</i>). ✓ SUN Movement information note and key messages (<i>popular tools on the SUN website but also used by Focal Points and other stakeholders in Pakistan, Gabon, Burkina Faso, El Salvador (govt) Guatemala (UNICEF), Honduras (govt), Liberia (govt), Zambia (govt), Rwanda (UNRC, information note, factsheet)</i>) ✓ SUN key asks for each stakeholder group (<i>finalised in English, French and Spanish</i>) ✓ SUN and COVID-19 factsheets (<i>October editions in English, French and Spanish forthcoming, and Portuguese version in the pipeline, with SUN Business Network/WFP support</i>) ✓ SUN country situation papers and SMS-wide follow-up spreadsheet (<i>7 reports and overview report finalised with MQSUN+ support, and good practices showcased above, webinars held 22-26 June</i>). In addition, regional reports and an overview have been created ✓ Joint advocacy and communication strategy & action plan (<i>finalised translated, plan is updated regularly</i>) ✓ Donor mapping for donor-specific asks (<i>ongoing</i>) ✓ Integrating SUN approach into new Global Nutrition Cluster guidance (<i>webinar held 29 Sep</i>) ✓ Harnessing moments and the media (<i>such as the launch of the Global Nutrition Report, including interviews featured in the FT and Le Monde</i>) ✓ Sharing and learning, through calls and webinars (including a <i>GAIN-SUN organised webinar on the role of food fortification in a time of pandemic, bringing together a range of stakeholders including the SUN Coordinator, Executive Committee member Anna Lartey and the SUN Focal Point in Pakistan, held 7 October</i>) ✓ SUN Pooled Fund grantee scopes have been revised to support countries' COVID-19 response through nutrition. SUN government focal points have been encouraged to converge with CSAs to seize the opportunity and include important actions. In parallel, revision of timeframes to mitigate the impact of COVID on results. ✓ The UNGA resolution on the COVID-19 response was adopted on 11 September with strong language on nutrition, also as a result of joint SUN advocacy. ✓ UNGA 75 was largely virtual, but the SUN Movement Coordinator took part in a range of events, including the Every Woman Every Child-PMNCH Accountability Breakfast on 29 September. ✓ CFS High-Level Special Event on Food Security and Nutrition held this week, with strong visibility of SUN actors. ✓ World Food Day webinars with ENRICH, Youth Leaders, the SUN Coordinator and Lead Group member Inger Ashing and a GAIN-organised webinar with Lead Group member Sophie Healy-Thow
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WHAT MUST BE DONE: Key asks for each stakeholder group⁷

<p>SUN governments: Governments are responsible for regulating, coordinating, implementing and monitoring national health, social protection, and food systems, and for the national COVID-19 responses and recovery.</p> <p>Governments are leading multi-sectoral, multi-</p>	<ul style="list-style-type: none"> • Ensure nutrition is prioritised in COVID-19 response and recovery plans, with a focus on the most vulnerable, and women and girls who often eat last and least; • Ensure COVID-19 response planning and coordination leverage existing nutrition capacity and multi-sectoral, multi-stakeholder coordination structures, including the SUN Focal Point and MSPs; • Continue implementing a multi-sectoral, multi-stakeholder approach to nutrition. Stay “open for business” and engage with key constituency groups on COVID response, including civil society; • Continue investing and implementing interventions to prevent and treat malnutrition across health, food, and social protection systems, and maintain nutrition-sensitive programming in WASH, gender and other relevant sectors; • NEW: An additional USD 19 billion a year from low- and middle-income countries' own budgets should be given for food security and nutrition to accompany development cooperation (Ceres2030)
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⁶ The Global Support System, to this end, includes the SUN Networks, the Executive Committee, the Lead Group and the SUN Coordinator.

⁷ These asks are the final key asks developed by the joint COVID-19 advocacy and communication task team, to be updated in September-October.

<p>stakeholder coordination for nutrition, which should continue throughout the COVID-19 response and recovery.</p>	<ul style="list-style-type: none"> • Over 100 million women and girls could be lifted out of poverty if governments implement a comprehensive strategy aimed at improving access to education and family planning, fair and equal wages, and expanding social transfers (UN Women/UNDP report) • Maintain and adapt approaches in accordance with technical guidance; • Adopt and enforce guidelines that support actors in reaching people with nutrition supplies and services; • Monitor access to essential nutrition services, food prices (including nutritious foods), purchasing power, consumption patterns, and nutritional status; • Put in place, monitor and implement policy and fiscal measures that promote access to healthy food. Promote consumption of safe and healthy diets and ensure the supply of fortified foods and specialised nutrition commodities.
<p>Bilateral & multilateral donors & philanthropies: Donors can play a vital role. Nutrition is a sensible and effective investment, but, often, even if countries do have nutrition as a priority funding levels do not follow.</p> <p>Donors continued commitment to funding nutrition and to a multi-sectoral, multi-stakeholder approach is key for continued nutrition progress.</p> <p>Donors (especially high-profile politicians and philanthropists) have a strong advocacy voice.</p>	<ul style="list-style-type: none"> • Scale up funding! Donors only spend 1% of their budgets on nutrition (GNR 2018) – but even current level of funding could be at risk due to COVID-19 at a time when needs are greater than ever. Aid to agriculture in developing countries fell from nearly 25% of all donors’ sector-allocable aid in the mid-1980s to only 5% in 2018 (UNSG HLPF report). NEW: An additional USD 14 billion is needed from donor governments to stop millions more people from going hungry in wake of COVID-19 globally, but also to double the incomes of 545 million small-scale farmers, and limit agricultural emissions in line with the Paris climate agreement. This means roughly doubling the amount of aid given for food security and nutrition each year (Ceres2030). • NEW: To date, less than 30% of the COVID-19 Global Humanitarian Response Plan (GHRP) – which requires USD 10.34bn – has been funded. (Global Humanitarian Response Plan COVID-19 September Progress Report). NEW: 5 of the worst hunger spots have received zero COVID-related nutrition assistance (Oxfam report). • Increase flexibility to extend support across sectors to adapt and implement amidst the changing context (e.g. through flexible budgeting to cover unforeseen expenses, being supportive of no-cost extensions, or re-shaping projects to allow, for example, shifting focus to support vulnerable families/populations); • Continued commitment to a multi-sectoral, multi-stakeholder approach to nutrition at the country level, linking humanitarian and development efforts; • Support innovation, research, and development that can strengthen the nutrition response to COVID-19; • Support SMEs – with focus on those producing nutritious food - in partnership with governments and other stakeholders. Support can be given through short term (emergency) operating capital to SMEs, either on a grant or loan basis, by adapting funding to make it more accessible to SMEs (shorter terms/longer repayment, and payment in local currency); • Provide technical assistance to low- and middle-income countries based on country needs; • Use their voice to advocate for nutrition in the context of COVID-19, including in regional and global decision-making fora and in the media.
<p>The United Nations: The UN plays an essential role in investing in, coordinating and implementing the COVID-19 response and nutrition-related programmes across health, social protection and food systems in support of governments.</p> <p>UN agencies develop technical and operational guidelines, supporting data collection, monitoring, evaluation and learning.</p>	<ul style="list-style-type: none"> • Ensure that key UN actors coordinating the COVID-19 response at national level liaise with nutrition actors, including SUN government FPs and MSPs; • Work as ‘one UN’ at country level, ensuring effective coordination across humanitarian and development actors and coordination mechanisms; • Continued commitment to a multi-sectoral, multi-stakeholder approach to nutrition at country level, amplifying key nutrition messages at UNCT meetings and fostering involvement of SUN networks (including Focal Points and MSPs) in country-level COVID-19 response efforts; • Support government and liaise with civil society and other key partners to provide and disseminate up-to-date guidance from the UN and considerations within specific country contexts; • Deliver clear, actionable operational guidance for frontline workers and policymakers; • Improve coordination, communication and support to help governments navigate the “information overload”; • Share emerging evidence regarding COVID-19 and nutrition; • Document and share country experiences to promote learning across borders; • Raise awareness, including through UN leadership, about the importance of good nutrition in the context of COVID-19 and the potentially devastating effects of the pandemic on people’s nutrition.
<p>Civil society: Civil society has important roles as implementing partners in the COVID-19 response, and in nutrition</p>	<ul style="list-style-type: none"> • Maintain or adapt nutrition programming in line with ongoing guidance; • Support the dissemination of standard messaging (to dispel misinformation), especially to vulnerable populations, in coordination with government, UN and other partners; • Utilise operational capacity to support implementation efforts amidst the COVID-19 response across sectors, in coordination with government and partners;

<p>programmes across health, food systems and social protection. They are critical advocacy, communication and community engagement actors.</p>	<ul style="list-style-type: none"> • Advocate to ensure nutrition remains a priority during and after the pandemic; • Advocate for and help facilitate community engagement to ensure vulnerable communities are consulted and heard in design of COVID-19 response plans; • Continued commitment to a multi-sectoral, multi-stakeholder approach to nutrition at country level, aligning programmes and advocacy efforts; • Ensure coordination of CSO contributions to COVID-19 response and recovery, within civil society and with government and other stakeholders; <p>Document country experiences and encourage sharing across borders.</p>
<p>Businesses/private sector: Business is also vital. Big companies need to help keep the value chain open. In addition, if income levels fall in developing countries, food systems risk collapse.</p>	<ul style="list-style-type: none"> • Contribute to the production and delivery of nutritious foods and food products, with a focus on the most vulnerable; • Donate nutritious foods for distribution through established channels; • Follow internationally recognised “do no harm” guidelines and agreements; • Avoiding donating, marketing and promoting unhealthy foods high in saturated fats, free sugar and/or salt; • Adhere to the International Code of Marketing of Breast-milk Substitutes and subsequent WHA resolutions; • Advocate for and support SMEs in a broader food systems’ response to support local efforts, with particular support given to women-led business. • Adopt and deliver workforce nutrition programmes for all employees, including sick leave policies that allow for additional time off to self-quarantine and care of dependents; • Food business associations can improve access to market information and linkages to safe distributors/retailers in operation; • Advocate for private sector investment in government led COVID responses; • Engage in efforts to maintain international supply chains for imports and exports of food products; • <i>Longer-term: Improve local food systems for enhanced domestic food sourcing</i>

WATCH THIS SPACE: New developments and interesting reads

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Across SUN countries and regions</p>	<p>Timor-Leste: And Now, a Bright Spot: Timor-Leste Weathers a Pandemic</p> <p>Philippines: Zero Hunger task force focusing on addressing stunting, malnutrition among kids</p> <p>Bangladesh: Bangladesh brings in landmark legislation to support salt iodisation</p> <p>Myanmar: Poverty and food insecurity during COVID-19: Telephone survey evidence from mothers in rural and urban Myanmar (October 2020)</p> <p>Viet Nam: Perceptions and Attitudes Toward COVID-19-Related National Response Measures of Vietnamese: Implications for Pandemic Prevention and Control</p> <p>India: Covid-19 pandemic can increase malnutrition in Indian children by 10-20%: UNICEF Nutrition Chief</p> <p>West Asia/MENA region: COVID-19 pandemic could kill 51,000 children in MENA region, UN warns</p> <p>Uganda: Japan injects \$600,000 in malnutrition fight in Karamoja</p> <p>Kenya: African Development Bank response to COVID-19 in Kenya (video)</p> <p>Southern Africa: COVID-19 Policy Brief: Why does Food Security and Nutrition Matter in Social Protection Responses to Systemic Shocks in the Southern African Region?</p> <p>West Africa: COVID-19 leads to 60 percent increase in children who need urgent humanitarian assistance across West Africa</p> <p>Africa: Are warnings of a COVID-19 famine in Africa overblown?</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Globally</p>	<p>UNSG: UN chief announces major push to transform harmful food systems</p> <p>ILO/IFAD/WHO/FAO: Joint statement: Impact of COVID-19 on people's livelihoods, their health and our food systems</p> <p>WEF: COVID-19 is increasing multiple kinds of inequality. Here's what we can do about it</p> <p>Save the Children: Financing Social Spending in Times of COVID-19 Briefing</p> <p>SUN Donor Network/GAFSP: Global Agriculture and Food Security Program donors announce US\$300 million to end hunger and malnutrition</p> <p>GAIN: Mindful Eating or Eating for Your Mind?</p> <p>G-20: G20 countries tackle post-COVID-19 water, food security issues</p> <p>Opinion: Nobel Prize for the WFP is an appeal for greater cooperation</p> <p>Global Alliance for the Future of Food: Systemic Solutions for Healthy Food Systems: Approaches to Policy & Practice – a guide for government action</p> <p>COVID-19 update: Males dominate COVID-19 decision making</p> <p>COVID-19 update: The World Health Organization reported a global daily record of more than 350,000 new coronavirus cases on Friday</p> <p>COVID-19 update: Coronavirus Safety Runs Into a Stubborn Barrier: Masculinity</p> <p>COVID-19: Covid-19 updates: One in 10 worldwide may have had virus, WHO says</p> <p>Nutrition update: COVID-19: Google trends reveal global nutrition focus</p> <p>Nutrition in politics: COVID-19, food and nutrition, and the presidential debates - opinion</p>