

WEEKLY BRIEFING FOR THE SUN MOVEMENT

19 February 2021

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

The COVID-19 pandemic continues to spread its wings all over the world. Today, more than 110 million women, men and children have been sickened by the coronavirus, and some 2.4 people have lost their lives.¹ In some good news, however, the number of new cases reported continued to fall the last week, with 'only' 2.7 million new infections globally. This is a 16% decline – or over 500,000 fewer new cases – compared to the previous week. Globally, new deaths reported also fell, with a decline of 10%.² Furthermore, infections also appear to be on the decrease across all 5 SUN Movement regions, with all SUN regions reporting a double-digit percentage decline these past 7 days.³ **Today, and across the SUN Movement's 62 member States, 6,552,670 people have been infected by COVID-19 so far, which is 5.94% of the global figure and a little more than 190,00 more infections since last week.**⁴ Indonesia, the most populous SUN country, has now – for the first time – overtaken Peru as the most affected SUN country (in terms of reported infections), and these 2 countries – with a little over 1.25 million infections each – make up almost 37% of all SUN country infections. For the first time, this overview also looks at where registered COVID-19 variants of concern can be found.⁵ The most widespread variant is VOC 202012/01 (initially detected by the UK), which today can be found in 9 SUN countries,⁶ followed by the 501Y.V2 variant (initially detected by South Africa). Today, this variant of concern can be found in 7 SUN countries.⁷ Peru is the only SUN member State where the variant of concern P.1 (initially detected by Brazil/Japan) has been verified. No SUN country has, as of yet, registered having all 3 variants of concern, although 2 variants can now be found in Viet Nam, The Gambia and Peru.⁸ Looking at vaccination rollout, more than 181.1 million vaccine doses have been administered worldwide, equal to 2.4 doses for every 100 people. There is already a stark gap between vaccination programmes in different countries, with many yet to report a single dose.⁹ With the knowledge that for the vaccine (and subsequent immunity) to work anywhere, it has to be administered everywhere, **only 9 SUN countries¹⁰ – all across South and Southeast Asia and Latin America – have rolled out their vaccination campaigns, reaching a total of 3,710,681 women and men, or 0.16% of the population of all SUN countries.** Looking ahead, COVID-19 infections are projected to stay high in only Peru but increase in a further 8 countries.¹¹ This means that across 85% of SUN countries, COVID-19 infections are projected to decrease or remain low for the next weeks, which is very promising.

THE PROBLEM: COVID-19 and nutrition

We are at serious risk of **losing nutrition gains (but also towards the SDGs)** over the past decade.

The COVID-19 pandemic is expected to **increase many forms of child malnutrition.**

- Children who experience undernutrition are more likely to die – those who survive do less well in 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.
- 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. Nutritional status may impact susceptibility to COVID-19 and health strategies to reduce micronutrient deficiencies and undernutrition are essential. Further, preventing obesity and type 2 diabetes can also markedly reduce the risk of severe COVID-19. ([Oxford University and London School of Hygiene and Tropical Medicine](#)). Diabetes, hypertension, heart disease, cancer and respiratory diseases account for over 74% of deaths globally and worsen outcomes of patients with COVID-19. ([WHO/Bloomberg NCD call to action](#))
- Before the crisis, 3.1 million girls and boys under 5 died from causes attributable to malnutrition (or 45% of all child deaths). 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).
- If strong multi-sectoral action targeting wasting is not implemented at scale, the best projections show an increase in monthly child mortality rates by over 40,000 girls and boys and 10-40% per month. An extra 10,000 children per month may die this year from malnutrition due to the COVID-19 crisis. ([WHO](#)) Malnutrition could kill 153 children every day over the next two years because of COVID-19 ([Save the Children](#))
- Early months of the COVID-19 pandemic saw 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](#)).
- 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.
- Every percentage point drop in global GDP is expected to result in an additional 0.7 million stunted children.
- **The impacts of COVID-19 disruptions will likely persist for at least the next 3 years** unless action is intensified now. Resulting from the disruption of health systems and decreased access to food, maternal and child mortality will increase, as will wasting, (acute malnutrition), stunting (chronic malnutrition), maternal low BMI and maternal anaemia ([The Lancet, December 2020](#)):

¹ Data from [Johns Hopkins University](#), updated on 19 February 2021. India is not considered in this overview. Tanzania has not reported cases since June 2020 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.

² Analysis taken from the [WHO weekly epidemiological situation update \(of 16 February\)](#).

³ Supra note 2.

⁴ Supra note 1.

⁵ Supra note 2.

⁶ Peru, Bangladesh, Pakistan, Philippines, Nigeria, Viet Nam, Sri Lanka, The Gambia, Nepal.

⁷ The Gambia, Viet Nam, Ghana, Mozambique, Botswana, Zambia, Kenya.

⁸ Supra note 2.

⁹ Analysis from the [New York Times](#) of 18 February. The data is compiled from government sources by the [Our World in Data](#) project at the University of Oxford.

¹⁰ **Costa Rica** (has vaccinated 96,948 people), **Sri Lanka** (has vaccinated 196,163 people), **Bangladesh** (has vaccinated 1,359,613 people), **Indonesia** (has vaccinated 1,658,110 people), **Nepal** (has vaccinated 158,487 people), **Peru** (has vaccinated 109,498 people), **Myanmar** (has vaccinated 103,142 people), **Pakistan** (has vaccinated 27,228 people) and **Cambodia** (has vaccinated 1,492 people).

¹¹ South Sudan, Benin, Ethiopia, Somalia, Guinea, Kenya, Burundi, Papua New Guinea. Analysis from the [New York Times](#) of 18 February, using data from Johns Hopkins University, as referenced above.

	<ul style="list-style-type: none"> ○ By 2022, COVID-19 could result in an additional 9.3 million wasted and 2.6 million stunted children, 168,000 additional child deaths, 2.1 million maternal anaemia cases, 2.1 million children born to low BMI women and USD 29.7 billion future productivity losses due to excess stunting and child mortality. The estimated additional burden of childhood stunting and child mortality due to COVID-19 disruptions in nutrition services would result in future productivity losses between the ages of 18 and 65 years (depending on country life expectancy) of USD 29.7 billion under the moderate scenario. Additional cases of anaemia during pregnancy would result in USD 79 million in lost productivity between 2020-2022, under the moderate scenario. An additional USD 1.2 billion per year is needed to mitigate these effects. (The Lancet, December 2020) • The Sahel region is now home to over 60 per cent of the children suffering from wasting in West and Central Africa (UNICEF) • In 2020, of the 305,000 children screened and referred for treatment in the 147 WHO-supported nutrition surveillance sites across Yemen, almost a third of the children aged 6–59 months were suffering from severe or moderate wasting, and around two-thirds of them showed signs of stunting. (WHO) • 60 million children across eight of the biggest humanitarian crises need help to survive this year. (Save the Children) The number of children receiving treatment for malnutrition has decreased by 20-12.5% across conflict-affected countries. (International Rescue Committee report) • 11 million children under five at risk of extreme hunger or starvation across eleven countries (all SUN countries: Afghanistan, Burkina Faso, DRC, Haiti, Mali, Niger, Nigeria (N/NW), Somalia, South Sudan, Sudan, Yemen (South)). (Save the Children) • COVID-19 has adversely impacted diets, eating habits and lifestyles of children. Since April 2020, about 370 million children have missed out on meals and essential health and nutrition services, with a potential impact of up to 24 million dropouts and USD 10 trillion in lost future earnings for the current cohort of learners. (UNESCO, UNICEF, WFP, WHO joint statement). Close to half a billion pupils are still affected by school closures; and the most and the most marginalised, including at least 11 million girls, are at high risk of never returning to school (UN DSG Mohammed). Children in Latin America have lost four times as many school days than children in the rest of the world (UNICEF). Out of 1.3 billion children excluded from school because of coronavirus restrictions in the past year, 370 million children for whom schools are a key source of daily nutrition have missed out on 39 billion meals – or 40% of their usual intake. (UNICEF/WFP)
<p>COVID-19 has triggered the deepest global recession since the 1930s.</p> <p>We face an impending global food emergency¹² of unknown, but likely very large proportions.</p> <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"> • 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 brief on food security and nutrition) By the 2020, 12,000 people were projected to lose their lives from hunger linked to COVID-19, potentially more than those likely to die from the disease itself (Oxfam brief on hunger, malnutrition & COVID-19). • 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). • This pandemic is a crisis on top of a crisis in parts of Africa, Latin America and Asia, and, the impacts of crises are never gender-neutral – COVID-19 is no exception. • Acute hunger has most likely doubled to 270 million people in 2020 compared to 135 million in 2019 and 80 million in 2015 (Trócaire). • Famine is becoming a reality in Burkina Faso, (Northeast) Nigeria, South Sudan and Yemen (ECHO), with a further 20 countries likely to face spikes in high acute food insecurity. (FAO) • 33 million additional women, men and children are at risk of facing hunger due to remittances losses (WFP/IOM report) • In 2019, 3 billion people around the world could not afford a healthy diet. (SOFI 2020) A healthy diet is out of reach for 1.9 billion people in Asia-Pacific (FAO, UNICEF, WFP and WHO). December 2020 saw global food prices reach a six-year high, with analysts expecting prices to continue to rise in 2021, fuelling inflation and adding to the pressure on families as hunger surges throughout the world. (FAO food price index) • NEW: Global labour income in 2020 is estimated to have declined by 8.3 per cent, equivalent to 255 million full-time jobs, and USD 3.7 trillion, or 4.4% of global gross domestic product (GDP) lost. The largest loss was experienced by workers in the Americas (10.3%), while the smallest loss was registered in Asia and the Pacific (6.6 per cent). (ILO Monitor seventh edition: COVID-19 and the world of work). • 1.6 billion people working in the informal economy (half of global labour force) still risk losing their livelihoods and have less access to healthy, nutritious food. NEW: in early January, 93% of the world's workers lived in countries with some form of workplace closure measure in place. Women and young people are the most hard-hit, as they are overrepresented in the informal sector, and in service industry jobs that cannot easily move online. NEW: In 2020, employment losses for women stood at 5%, versus 3.9% for men. (ILO Monitor). 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) Yet, only 3.5% of COVID-19 decision-making bodies and task forces across 87 countries have achieved gender parity. (BMJ Global Health) It is estimated that the coronavirus pandemic could wipe out 25 years of increasing gender equality, due to an increase in the unfair care burden and increased unemployment. (UN Women brief). Progress has been made on gender equality in humanitarian response. (OCHA) • COVID-19 disproportionately affects low-income workers' finances in developing countries: In Latin America, 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 Brief: COVID-19: safeguarding food systems and promoting healthy diets)

¹² 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”.

	<ul style="list-style-type: none"> • Disruptions to food supply chains as a result of COVID-19 affected both the production and distribution of food, exacerbated in some cases by currency depreciations, particularly in South Asia, sub-Saharan Africa, and Latin America. (World Bank Commodity Markets Outlook). Of 2,400 people in 10 African countries, 94% reported that prices of food and other essentials in their local markets had increased, while 82% said they had lost income or revenue. Only 7% said they had enough savings to cope with a prolonged crisis. (ICRC survey) • 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) • NEW: the global economy stands to lose as much as USD 9.2 trillion if governments fail to ensure developing economy access to COVID-19 vaccines, as much as half of which would fall on advanced economies. (International Chamber of Commerce study)
<p>The OECD forecasts a global GDP fall of 4.5% in 2020 likely to push more, especially women, into extreme poverty.</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) • A study of 107,000 children aged five and under has found that rising global temperatures are equal or greater contributor to child malnutrition compared to poverty, inadequate sanitation, and poor education. (Climate impacts associated with reduced diet diversity in children across nineteen countries)

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.</p> <p><i>(SUN country practices are highlighted in orange)</i></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. • In 2000, hunger in Cameroon and Nepal was categorised as "alarming", but today they are among the nations with moderate scores. (2020 Global Hunger Index) • 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, is working together to improve coordination. • 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. • 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 has mobilised philanthropists, raised awareness, found local resources, provided food baskets and personal protective equipment, and hand washing stations, while helping people contact and register with government support programmes. • The SUN Civil Society Asia Coordination Group has launched a campaign "Nutrition Can't Wait". • In Central America, the role of nutrition and SUN in recovery efforts is in the spotlight, with a historic dialogue, the first one in 30 years, took place to discuss the future of the region (incl. Secretary-General António Guterres, together with President Cerezo, all Presidents of Central American countries and Lead Group member Alicia Bárcena).
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	<ul style="list-style-type: none"> At the 14 December Nutrition for Growth Year of Action kick-off event, global leaders committed more than USD 3 billion to address hunger and nutrition crisis, including strong commitments from Pakistan, Guatemala, Nigeria, Senegal and Bangladesh.
Nutrition must be essential pillar of post-COVID recovery & emergency preparedness—to build immunity and resilience of people & communities.	<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

The SUN is taking a Movement-wide approach to COVID-19, bringing together the entire Global Support System ¹³ to jointly advocate to safeguard nutrition during and following this crisis, and providing support to SUN countries during the emergency, recovery and beyond.	<p>We focus on facilitating coordinated action by SUN Movement stakeholders, at all levels, and providing information and support, 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 engage with SUN country stakeholders, on an ongoing basis, to understand the current situation and how it affects nutrition. Looking ahead, the focus will be on building 'forward' better, with the realisation that the impacts of COVID-19 will be felt for years to come, in line with the SUN strategy for its third phase (2021-2025).</p> <p>Some examples:</p> <ul style="list-style-type: none"> ✓ Secretariat workstreams up and running, with monthly meetings, also across the Global Support System, to focus not just on COVID-19 but road ahead, at large ✓ SUN Lead Group COVID-19 engagement mapping (<i>draft finalised</i>) ✓ The 2020 SUN Movement Joint-Assessment incorporated a range of questions also related to COVID-19 (<i>50 SUN countries did the 2020 exercise</i>). ✓ SUN COVID-19 knowledge hub (<i>saw some 25,000 visits in 2020</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). (downloaded 2,614 times in 2020)</i>) ✓ SUN key asks for each stakeholder group (<i>finalised in English, French and Spanish</i>) ✓ SUN and COVID-19 factsheets (<i>February editions in English, French and Spanish to be launched next week</i>) ✓ SUN country situation papers and SMS-wide follow-up spreadsheet. In addition, regional reports and an overview have been created ✓ Joint advocacy and communication strategy & action plan and donor mapping for donor-specific asks (<i>ongoing</i>) ✓ Integrating SUN approach into new Global Nutrition Cluster guidance, and a Review of opportunities and challenges for strengthening humanitarian and development nexus for nutrition, lessons learned from Myanmar, Niger, Afghanistan and South Sudan and interviews with SUN Focal Points of Afghanistan/Yemen and Niger. ✓ 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. A SUN-FAO elearning Academy partnership is in place, which offers free online courses, in EN/FR/SP, on key topics, with a webinar to be held on Wednesday 24 February looking at nutrition-sensitive agriculture and food systems. ✓ A nutrition leadership training for francophone SUN focal points has kicked off, with support from Nutrition International and MQSUN+. An Asia-Pacific roundtable for N4G featuring Bangladesh, Pakistan, Timor-Leste, Sri Lanka, Kyrgyzstan, Viet Nam, Philippines, Indonesia was held Wednesday 17 February. A roundtable for East and Southern Africa will be held Thursday 25 February. The Youth Leaders for Nutrition (#YL4N) have been active, and Mike Khunga will take part in the Japan launch of the Save the Children report "Nutrition Critical" Wednesday 24 February. ✓ SUN Pooled Fund grantee scopes have been revised to support countries' COVID-19 response. SUN government focal points have been encouraged to converge with CSAs to seize the opportunity and include important actions. In parallel, timeframes have been revised to mitigate the impact of COVID. (<i>A Pooled Fund website has been launched</i>) ✓ On 27 January, a first-ever SUN progress portal and first part of 2020 progress report was launched. ✓ During the 34th African Union Summit, nutrition was accepted as the AU theme for 2022. ✓ The SUN Coordinator has played a key role during the CFS 47th session, held 8-11 February, and took part in a UN Food Systems Dialogue on financing food systems & nutrition transformation held 12 February. The UN Food Systems Summit launched the Independent Dialogues Step-by-Step Guide and Promotion Toolkit this week.
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WHAT MUST BE DONE: Key asks for each stakeholder group¹⁴

SUN governments: Governments are responsible for regulating, coordinating, implementing and monitoring national health, social protection,	<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;
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¹³ The Global Support System, to this end, includes the SUN Networks, the Executive Committee, the Lead Group and the SUN Coordinator.

¹⁴ These asks are the final key asks developed by the joint COVID-19 advocacy and communication task team, to be updated in 2021.

<p>and food systems, and for the national COVID-19 responses and recovery.</p> <p>They are leading multi-sectoral, multi-stakeholder coordination for nutrition, which should continue throughout the COVID-19 response and recovery.</p>	<ul style="list-style-type: none"> • 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. Globally 62.2% of countries not put in place social protection measure related to food security and nutrition. Central Asia, Asia-Pacific and Arab states have significantly less coverage than Latin America and Caribbean and the African regions (ILO Social Protection Monitor on COVID-19); • 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) • 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. Donors (especially high-profile politicians and philanthropists) also 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). 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). • The Global Humanitarian Response Plan (GHRP) for COVID-19, together with existing humanitarian appeals, became the largest-ever financial ask: \$39 billion. As of November 2020, donors have generously given \$17 billion to inter-agency plans (OCHA) • 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. 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 programmes across health, food systems and social protection. They are critical advocacy, communication and community actors.</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; • 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;

	<ul style="list-style-type: none"> • Ensure coordination of CSO contributions to COVID-19 response and recovery, within civil society and with government and other stakeholders; Document country experiences and encourage sharing across borders.
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.	<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 about COVID-19 and nutrition¹⁵

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Globally	<p>World Bank: Responding to a stark rise in food insecurity across the poorest countries</p> <p>UNICEF: UNICEF Executive Director Henrietta Fore's Remarks at the UNICEF Executive Board</p> <p>The Lancet: COVID-19 and the collapse of global trade: building an effective public health response</p> <p>WTO: New WTO boss warns against vaccine nationalism</p> <p>IFAD: World leaders call for greater international cooperation to tackle hunger and poverty at IFAD global meeting</p> <p>UNSG: Secretary-General Calls Vaccine Equity Biggest Moral Test for Global Community, as Security Council Considers Equitable Availability of Doses</p> <p>Op-ed: The Root Causes Of Malnutrition Can Be Summed Up In Four Words: Orphan, Invisible, Unmeasured And Voiceless—Shawn K. Baker</p> <p>Pope: Pulses can help fight malnutrition and hunger</p> <p>Covid-19 and food security: Can emerging economies mitigate rising prices?</p> <p>Private sector: Bayer launches initiative to help underserved communities combat malnutrition</p> <p>COVID-19 vaccine: Covax: How will Covid vaccines be shared with poorer countries?</p> <p>Future of food: Could AI ease food security fears?</p> <p>Future of food: UWA research finds neglected and underutilised crops could end hunger</p> <p>Future of food: Plant-based diets will be essential to the planet's future, report says</p>

¹⁵ Where highlights are in orange this refers to news stories and updates where the SUN Movement, and actors and champions therein, has been specifically mentioned.