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Double Duty Actions to Tackle All Forms of Malnutrition (P10-053-19)

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Objectives: Background: Most countries are now experiencing a double burden of malnutrition (DBM), characterized by the coexistence of nutritional deficiencies (underweight, wasting, stunting, micronutrient deficiencies) and overweight/obesity and diet-related noncommunicable diseases (obesity/DR-NCDs). Actions to address the two sides of the DBM are typically managed by separate communities, policies, programs, governance structures, and funding streams. Double duty actions, defined as actions that simultaneously address nutritional deficiencies and obesity/DR-NCDs, have been proposed as a win-win solution to tackling malnutrition in all its forms. The objective of the work was to explore opportunities—and make recommendations—for double duty actions to be delivered by programs and policies in key sectors such as health, social protection, education, and agriculture.

Methods: We reviewed evidence on the known shared drivers of undernutrition and obesity/DR-NCDs; searched the literature to

identify examples of undernutrition-focused programs (in the four sectors selected) that have inadvertently caused harm by increasing risks of obesity/DR-NCDs; and looked for additional information on measures that programs may have adopted to correct these problems following recognition of harm.

Results: Undernutrition and obesity/DR-NCDs are intrinsically linked through four shared drivers: early life nutrition; dietary quality; food environments; and socioeconomic factors. Failure to adopt double duty actions in the past has caused harm. Examples from Latin America and Egypt show that some social cash/food transfer programs aimed at reducing poverty and undernutrition have led to deteriorations in diet quality (e.g., excess intakes of energy- fat- and sugar-dense and micronutrient-poor foods) and rises in obesity/DR-NCD risks. Realizing the harm, some of these programs pilot-tested successful corrective measures, thereby providing useful examples of early double duty actions.

Conclusions: Leveraging the shared drivers of undernutrition and obesity/DR-NCDs through programs and policies delivered by the health, social protection, education, or agriculture sectors is possible and offers considerable opportunities for double duty actions and impacts on all forms of malnutrition.

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