

August 20, 2021

Global Nutrition Coordination Plan Drafting Committee
U.S. Agency for International Development
1300 Pennsylvania Avenue, NW
Washington, D.C. 20523



Re: U.S. Government Global Coordination Plan 2021-2026 Draft Outline and Framework

Dear Members of the Global Nutrition Coordination Plan Drafting Committee:

The Academy of Nutrition and Dietetics (the “Academy”) appreciates the opportunity to submit comments on the Draft Outline and Framework of the U.S. Government Global Coordination Plan 2021-2026.” Representing more than 112,000 registered dietitian nutritionists (RDNs), nutrition and dietetic technicians, registered (NDTRs), and advanced-degree nutritionists, the Academy is the largest association of food and nutrition professionals in the United States and the world; our members work in a variety of clinical, research, and community settings across the continuum of care in more than 82 countries around the globe. We are united in our vision of a world where all people thrive through the transformative power of food and nutrition and are committed to our mission to accelerate improvements in global health and well-being through food and nutrition.¹

A. Overarching Comments

The Academy strongly supports this important initiative “to maximize the impact of investments across the continuum of nutrition-related policies, programs, and other efforts to accelerate achievement of global nutrition goals and increase whole-of-government responsiveness to emerging evidence, opportunities, and threats.”² We share the collective vision of the U.S. Government Global Nutrition Coordination Plan and hope to work with you to effectuate it, consistent with principles in our Strategic Plan to “[h]ave a global impact in eliminating all forms of malnutrition” and to “[c]ollaborate with key stakeholders to solve the greatest food and nutrition challenges, now and in the future.”³ We respectfully offer the comments below, with both overarching relevance and relevance specific to draft Action Areas 1 and 3.

The Academy recognizes collaboration as the key to making significant progress in addressing global nutrition issues. Efforts to capitalize at the local level on the

¹ Academy of Nutrition and Dietetics Strategic Plan. Available at <https://www.eatrightpro.org/leadership/governance/board-of-directors/strategic-plan>. Accessed August 11, 2021.

² Purpose. Global Nutrition Coordination Plan 2.0 Framework. Available at https://www.usaid.gov/sites/default/files/documents/tagged_GNCP_2.0_Framework_6.4.2021.pdf. Accessed August 19, 2021.

³ Academy of Nutrition and Dietetics Strategic Plan. Available at <https://www.eatrightpro.org/leadership/governance/board-of-directors/strategic-plan>. Accessed August 11, 2021.

Scaling Up Nutrition (SUN) Movement to achieve global initiatives demonstrate the power of collaboration to meet the local nutritional capacity building and coordinating efforts to impact malnutrition through multiple avenues. One notable example of a collaboration to accelerate delivery of targeted, effective prevention that couples well with SUN is the **Global Action Plan on Child Wasting: A Framework for Action to Accelerate Progress in Preventing and Managing Child Wasting and the Achievement of the Sustainable Development Goals**, which was developed by the FAO, UNHCR, UNICEF, WFP, and WHO.

We are committed to promoting international collaboration in the global nutrition and dietetics community and creating a global community of dietitians engaged in food and nutrition related health initiatives with diverse populations.⁴ To date, our International Affiliate of the Academy of Nutrition and Dietetics (IAAND) has identified 50 different Country Representatives to provide perspectives from their country and other professional members.⁵ Our Global Member Interest Group (GMIG) is a community of members focused on improving the nutritional status in regions with high burdens of malnutrition or with nutritional crises due to conflict or natural disasters, through the sharing of information, resources, and ideas among Academy members, students, governmental and non-profit aid organizations, and health workers within these countries.⁶

Our Academy members are well positioned within their 82 respective countries to provide local perspectives and to identify or establish connections with other nutrition leaders who have daily interactions with some of the target populations the five Global Nutrition Program Priorities are focusing on: women of childbearing age and children under five years of age. We also recommend the Drafting Committee adopt slightly broader terminology for Global Nutrition Priority Program 1 to allow for prioritizing women's nutrition after and in-between pregnancies during women's prime childbearing stage of life, clarifying that the "before" in "before and during pregnancy and lactation" can mean before a woman's subsequent pregnancies, not merely her first. This suggested clarification comports with UNICEF's approach in India⁷ and studies⁸ showing heightened importance of proper nutrition in-between and after pregnancies as well.

⁴ IAAND Bylaws, Mission, Vision, Values and Strategic Goals. Available at: <https://eatrightinternational.org/iaand-mission-vision-values-and-strategic-goals/>. Accessed August 11, 2021.

⁵ Country Representatives. Available at: <https://eatrightinternational.org/country-representatives/>. Accessed August 11, 2021.

⁶ Global: A Member Interest Group of the Academy of Nutrition and Dietetics website. Available at https://gmig.eatrightpro.org/home?_ga=2.228593628.1564005716.1629396177-1314680617.1629205830. Accessed August 20, 2021.

⁷ Women's nutrition: The diets of women in India are often too poor to meet their nutritional needs. UNICEF website. Available at <https://www.unicef.org/india/what-we-do/womens-nutrition>. Accessed August 18, 2020.

⁸ See, e.g., Stephenson J, Heslehurst N, Hall J, Schoenaker DAJM, Hutchinson J, Cade JE, Poston L, Barrett G, Crozier SR, Barker M, Kumaran K, Yajnik CS, Baird J, Mishra GD. Before the beginning: nutrition and lifestyle in the preconception period and its importance for future health. *Lancet*. 2018 May 5;391(10132):1830-1841. doi: 10.1016/S0140-6736(18)30311-8. Epub 2018 Apr 16. Erratum in: *Lancet*. 2018 May

The Academy applauds your past efforts to share your insights through publicly available webinars and would welcome the opportunity to collaborate in the development of future webinars; our current webinar series for IAAND members includes topics on implementing global food and nutrition policies, malnutrition, and cultural foods. To add additional value, we respectfully suggest broader distribution of webinar notifications enabling the Academy, our IAAND, GMIG, and other interested Academy members to view your webinars live as they occur so we can support your efforts and disseminate information to our members who are instrumental in local nutrition programming in their countries. Expanding and sharing your informative webinars may also be responsive to members' suggestions for "more exchanges with civil society, strengthening connections between domestic and global nutrition work, and greater engagement with agency and department senior leaders in the next 5-year plan."⁹

B. Promoting Leadership and Partnership

The Academy supports the Draft Outline and Framework's focus on coordination mechanisms to promote leadership and partnership and appreciates the inclusion of professional organizations as key stakeholders targeted for outreach and engagement at the country level in the current Global Coordination Plan. We welcome the opportunity to expand our collaboration in this initiative and notes that the presence of professional organization members and affiliated organizations both within the U.S. Government and at the global level.

Throughout the current COVID-19 public health emergency, the Academy has been instrumental in collecting and summarizing the science related to nutrition care as it evolved in circumstances where evidence-based nutrition practice guidelines did not previously exist. Professional societies with international memberships, specifically including national dietetics or nutrition societies and associations such as the Academy, are valuable collaborators that often have existing relationships with the nutrition professionals directly providing first-person care to the affected populations. We respectfully suggest the Drafting Committee and stakeholders consider and address how these public-private partnerships might evolve and potential criteria and proposed principles for these types of partnerships.¹⁰

The Academy and the Academy of Nutrition and Dietetics Foundation, the philanthropic arm of the Academy, continue to open new opportunities for collaboration between Academy members and communities worldwide with its global malnutrition projects. We also recognize that food insecurity is a global issue with significant effects on human health.

5;391(10132):1774. PMID: 29673873; PMCID: PMC6075697;

Caut, C, Leach, M, Steel, A. Dietary guideline adherence during preconception and pregnancy: A systematic review. *Matern Child Nutr.* 2020; 16:e12916. <https://doi.org/10.1111/mcn.12916>.

⁹ Annual Summary of Interagency Progress (October 2019-September 2020) Available at: https://www.usaid.gov/sites/default/files/documents/tagged_GNCP-Y4_AnnualSummary_0.pdf. Accessed August 17, 2021.

¹⁰ Rowe,S, et al. Principles for building public-private partnerships to benefit food safety, nutrition, and health research. *Nutr Rev.* 2013;71(10):682.

However, while great strides have been made in addressing hunger and improving health, continued progress is still necessary and depends on efforts at all levels. To make the best progress locally, communities must identify the most impactful way to use available resources. Encouraging—and where feasible, mandating—surveillance of national and regional food consumption patterns in USAID support recipients would fulfil a crucial data gap that currently limits the possibilities of establishing sustainable nutrition interventions in many countries of the world.

With support from the Academy's Foundation, global nutrition fellows are advancing malnutrition initiatives with innovative research related to hunger, food security and malnutrition. Supporting other countries to ensure that a workforce exists to identify and treat malnutrition at the population and the individual levels is an emerging area of focus for the Academy as we transition into the next century. Solutions for malnutrition include strategies to increase access to food and water through sustainable agriculture and food production as well as community-based delivery models focused on public health, including continued development with the Nutrition Care Process Terminology.

Global research project fellows also have led the development and evaluation of antenatal nutrition curriculum for Gardens for Health International in Rwanda as well as a family-based nutrition and garden intervention pilot study in rural Guatemala. In addition, the Foundation has funded a fellow to work with the Duke Center for International Development to map intervention and services targeting chronic malnutrition in community settings in Guatemala with the outcome of developing a policy report.

Other projects range from grassroots efforts to policy-level impact. One example includes the No Hungry Homes Project (previously Hunger Free Communities) that has created and tested the implementation of a prioritization tool for food security interventions in the community setting. Currently, there are two pilot sites in Sacatepéquez, Guatemala, and Mumbai, India. The Food Security Solutions (FSS) Prioritization Process can be applied globally. No matter the community or program, it is imperative to take time to prioritize and identify solutions that offer the best expected impact for the required resources. For instance, in Mumbai, India, a coalition working to create a hunger-free community used the FSS Prioritization Process to focus their efforts, helping them to prioritize and identify solutions that offer the best expected impact given the available resources.”¹¹

C. Generating, Sharing and Applying Knowledge and Evidence

The Academy strongly supports the continuing emphasis on enhancing the coordination of high-quality, evidence-based research to drive future initiatives and strongly encourage a focus on using and creating implementation science as a strategy to ensure optimal use of scarce resources in addressing global nutrition issues. High-quality research that respectfully includes indigenous populations in addition to underserved, refugee and immigrant populations is necessary to reflect and serve national needs. We suggest

¹¹ Key Insights from Early Adopters of the Food Security Solutions (FSS) Prioritization Process: MUMBAI, INDIA Global Application. Available at https://www.eatrightfoundation.org/wp-content/uploads/2020/02/The-story-of-Mumbai_FINAL.pdf. Accessed August 18, 2021.

considering whether data gathering may be enhanced by using inclusion criteria going beyond mere program participation and addressing more global impacts, such as changing food consumption patterns, not just one specific nutrient of interest.

The Multi-Sectoral Nutrition Strategy First Periodic Assessment (2018) notes that data availability needs improvement at the national level.¹² Identifying data availability and sharing as one of your action areas is critical to the ability to effectively monitor and learn which initiatives may be most successful.

It is also important to note that the World Health Organization database for availability of health professionals includes physicians, nurses, physiotherapists, laboratory personnel, and others, but notably and inexplicably fails to reference dietetics and nutrition professionals.¹³ The International Confederation of Dietetic Associations' consistent work toward a common definition of a dietetics professional provides useful language; this data gap needs to be addressed using the International Standards for Dietitians-Nutritionists (2014).¹⁴ The contributions of registered dietitian nutritionists and other dietetics and nutrition professionals globally is effectively rendered invisible and therefore unavailable for evaluations of national capacity measures (*e.g.*, Monitoring, Evaluation, Accountability and Learning (MEAL)).¹⁵ The MEAL reports only include measures of physicians and nurses for the "availability of nutrition professionals," despite the fact that **the addition of dietetics and nutrition professionals would provide a much clearer and more accurate indicator of the capacity for nutrition programming** within a country and the availability of nutrition services for non-communicable diseases.

To further enhance the ability to compare data between countries, the use of standardized language fully describing program aspects is essential. With significant international input, the Academy developed terms that reflect Population Based Nutrition Action.¹⁶ These defined terms include population theoretical frameworks, population strategies, population settings, and population sectors and are currently available in eight languages in addition to English: Danish, French, German, Swedish, Norwegian, Simplified Chinese, Traditional Chinese, and Spanish.

The Academy's enduring commitment to promoting evidence-based approaches to decision making is reflected by its being one of our core values. We are honored to play a role in helping to develop evidence analysis libraries, such as the U.S. Department of Agriculture's

¹² USAID Multi-Sectoral Nutrition Strategy First Periodic Assessment (2018). Available at: https://www.usaid.gov/sites/default/files/documents/1864/Final_MSNS_Periodic_Assessment_Report_June_28_2019.pdf. Accessed August 17, 2021.

¹³ Global Health Observatory data repository. Available at: <https://apps.who.int/gho/data/node.main.HWFGRP?lang=en>. Accessed August 17, 2021.

¹⁴ International Standards for Dietitians-Nutritionists.(2014). Available at: <https://www.internationaldietetics.org/Downloads/International-Definition-of-Dietitian.aspx>. Accessed August 18, 2021.

¹⁵ 2019 Country Dashboards, Scaling Up Nutrition Reports and Impact. Available at: <https://scalingupnutrition.org/progress-impact/monitoring-evaluation-accountability-and-learning-meal/>. Accessed Aug 17, 2021.

¹⁶ Population Based Nutrition Action. Available at: <https://www.ncpro.org/pubs/2020-encpt-en/page-060A>. Accessed August 18, 2021.

Nutrition Evidence Systematic Review, and we encourage the Drafting Committee to clarify how it envisions the Global Nutrition Coordination Plan promoting collaboration in the gathering and evaluation of evidence between non-governmental agencies, including the Academy. Implementation should be taken into consideration early in the guideline development process.¹⁷ Inclusion of multidisciplinary key and diverse stakeholders early in the development process can promote identification of implementation barriers and facilitators unique to target audiences. We respectfully suggest the Drafting Committee consult with stakeholders about the potential for adopting a collaborative approach to conducting systematic reviews on topics of mutual interest with other organizations that have infrastructure to support the systematic review process in the federal government. We also support and encourage the use of peer review by government and outside experts, consistent with the approach recommended by the National Academies of Science, Engineering and Medicine for the development of the 2020-2025 Dietary Guidelines for Americans.¹⁸

The Academy fully support your premise that data be freely available to researchers to use in secondary analysis and that this will further advance our knowledge about what aspects of intervention have been successful and what conditions or situations are associated with higher levels of success. We also suggest that identifying research questions with the highest priority to your agencies would be helpful to the research community.

D. Diversity, Equity, and Inclusion

The Academy's Strategic Plan¹⁹ encourages a shift in focus toward health equity, social determinants of health, and transparent involvement of broader constituencies, which we believe are critical to incorporate and address on a global scale as well. Although equity and inclusion are referenced as Guiding Principles in the Draft Framework, they are not referenced in the Draft Outline and we seek clarification how the Drafting Committee anticipates considering the subject matter through a health equity lens, recently described as "the examination of who experiences the benefits and burdens of policies and programs as well as the basis for differential experiences."²⁰ Ethical principles, like those used in data gathering and research, are also applicable when engaging indigenous, immigrant and refugee populations in program participation.

¹⁷ Gagliardi AR, Marshall C, Huckson S, James R, Moore V. Developing a checklist for guideline implementation planning: review and synthesis of guideline development and implementation advice. *Implement Sci.* 2015;10:19.

¹⁸ National Academies of Sciences, Engineering, and Medicine. 2017. Redesigning the process for establishing the Dietary Guidelines for Americans. Washington, DC: The National Academies Press. doi: <https://doi.org/10.17226/24883>.

¹⁹ Academy of Nutrition and Dietetics Strategic Plan. eatrightPRO.org. https://www.eatrightpro.org/-/media/eatrightpro-files/leadership/bod/strategic-plan/academy-of-nutrition-and-dietetics_strategic-plan_sep-2017.pdf?la=en&hash=D00E3FE00D1475FB416E20004DECC3C136D5D7E5.

²⁰ Eyler AA, Valko CA, Macchi M, et al. Adjusting the Equity Lens: Gaps in Addressing Health Equity in State Chronic Disease Prevention. *Health Equity.* 2019;3(1):86-91. doi:10.1089/heq.2018.0075. Published March 29, 2019. citing Pertillar T, Pobutsky A, Brandt G, et al. Assessment of funding and other capacity needs for health equity programming. *J Health Dispar Res Pract.* 2017;9(Special Issue):72-94.

The Academy is committed to increasing equitable access to nutrition and lifestyle services and improving health equity through expanded access to medical nutrition therapy globally.²¹ If the data sources for identifying availability of nutrition professionals is limited to physicians and nurses, we are *not* measuring whether true equity is increasing for global access to essential and clinically-indicated nutrition care services, such as medical nutrition therapy provided by dietitians, proven effective in preventing, managing and treating many of the most prevalent and concerning non-communicable diseases.²²

The Academy is also proud of its ongoing efforts to expand the pipeline for members of underrepresented groups who aspire to become registered dietitian nutritionists (RDNs) or nutrition and dietetic technicians, registered (NDTRs), thereby improving the likelihood that individuals seeking medical nutrition therapy will have access to qualified nutrition professionals who share their identities and cultures. Leadership is working to create a new paradigm of dietetics education that enhances the ability of dietitians to provide nutrition services in a “caring and respectful manner while being mindful of individual difference, cultural and ethnic diversity.”^{23 24}

E. Conclusion

The Academy appreciates the opportunity to submit comments on the Draft Outline and Framework for the next iteration of the Global Nutrition Coordination Plan. We would welcome opportunities to share your external webinars with our members, serve as a resource to the extent appropriate, and collaborate with you in data collection and analysis regarding the dietetics and nutrition professionals available in countries to supplement that in the WHO repository. Please contact either Jeanne Blankenship by telephone at 312-899-1730 or by email at jblankenship@eatright.org or Pepin Tuma by telephone at 202-775-8277 ext. 6001 or by email at ptuma@eatright.org with any questions or requests for additional information; we would welcome the opportunity to provide whatever input or assistance we can in this endeavor.

Sincerely,

²¹ Academy of Nutrition and Dietetics Strategic Plan. Available at <https://www.eatrightpro.org/leadership/governance/board-of-directors/strategic-plan>. Accessed August 11, 2021.

²² Global Health Observatory data repository. Available at: <https://apps.who.int/gho/data/node.main.HWFGRP?lang=en>. Accessed August 17, 2021.

²³ Lund, A, Latortue, KY, Rodriguez, J. Dietetic Training: Understanding Racial Inequity in Power and Privilege. J Acad Nutr Diet. 2021;121(8):1440.

²⁴ Code of Ethics for the Nutrition and Dietetics Profession. Effective date: June 1, 2018. Academy of Nutrition and Dietetics. Available at: <https://www.eatrightpro.org/-/media/eatrightpro-files/career/code-of-ethics/coeforthenutritionanddieteticsprofession.pdf?la=en&hash=0C9D1622C51782F12A0D6004A28CDAC0CE99A032>. Accessed September 24, 2020.



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