

When the SUN casts a shadow

The human rights risks of
multi-stakeholder partnerships:
the case of Scaling up Nutrition (SUN)



Authors

**Laura Michéle (FIAN International),
Stefano Prato (SID),
Patti Rundall (Baby Milk Action/IBFAN),
Flavio Valente (FIAN International)**

Country Researchers

**Barbara Nalubanga (Uganda),
Maarten Immink and Magali Cano (Guatemala),
JP Dadhich and Arun Gupta (India)**

Reviewers

**Rehema Bavuma, Anne Bellows,
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Ana María Suárez Franco,
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Design

Jon Rundall

Cover Illustration

Bill Bragg

Print

CITY-DRUCK Heidelberg

Published by

**FIAN International, IBFAN and Society
for International Development (SID) with
the support of Open Society Foundation,
Bread for the World, and Misereor.
The views and opinions expressed in
the publication are the sole responsibility
of the authors and do not necessarily
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December 2019

Available at

**www.fian.org
www.ibfan.org
www.sidint.net**

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Acronyms/Abbreviations

BMGF Bill & Melinda Gates Foundation	NARO National Agricultural Research Office
BPNI Breastfeeding Promotion Network of India	NCD Non-communicable disease
CAC Codex Alimentarius Commission	NGO Non-governmental organization
CEDAW Convention on the Elimination of All Forms of Discrimination against Women	OPM Office of the Prime Minister
CESCR Committee on Economic, Social and Cultural Rights	OWC Operation Wealth Creation
CFS Committee on World Food Security	POLSAN Guatemala National Policy on Food and Nutrition Security
CMAM Community-based Management of Acute Malnutrition	PPP Public-Private Partnership
COI Conflict of Interest	REACH Renewed Efforts Against Child Hunger
CRC Convention on the Rights of the Child / Committee on the Rights of the Child	RtAFN Right to Adequate Food and Nutrition
CSA Civil Society Alliance	RUTF Ready to Use Therapeutic Foods
ECOSOC UN Economic and Social Council	SAM Severe Acute Malnutrition
ETO Extraterritorial obligations	SESAN Guatemala Secretariat for Food Security and Nutrition
FAO Food and Agriculture Organization	SBN SUN Business Network
FENSA Framework for Engagement with Non-State Actors	SID Society for International Development
GAIN Global Alliance for Improved Nutrition	SINASAN Guatemala National System for Food and Nutrition Security
GAVI Global Alliance for Vaccines and Immunization	SUN Scaling Up Nutrition
GC General Comment	SUN CSN SUN Civil Society Network
GR General Recommendation	TNC Transnational Corporation
GRI Global Redesign Initiative	UNAP Uganda National Action Plan 2011-2016
GSO Global Social Observatory	UN United Nations
HLTF High-Level Task Force on the Global Food Security Crisis	UNDP United Nations Development Programme
IBFAN International Baby Food Action Network	UNDROP UN Declaration on the Rights of Peasants and Other People Working in Rural Areas
ICN2 Second International Conference on Nutrition	UFNP Uganda Food and Nutrition Policy
ICESCR International Covenant on Economic, Social and Cultural Rights	UNGA United Nations General Assembly
IFAD International Fund for Agricultural Development	UNICEF United Nations Children's Fund
IFPMA International Federation of Pharmaceutical Manufacturers Association	UNSCN/SCN United Nations Standing Committee on Nutrition
IFPRI International Food Policy Research Institute	USAID United States Agency for International Development
IMF International Monetary Fund	WB World Bank
MNPs Micronutrient Powders	WEF World Economic Forum
MSNTC Multi-Sectoral Nutrition Technical Committee	WFP World Food Programme
MSP Multi-stakeholder Partnership/Platform	WHA World Health Assembly
	WHO World Health Organization

Executive Summary

The past two decades exposed an increased interest and participation of the private sector, and in particular large transnational corporations, in global policy debates on sustainable development and its many domains. Such stronger corporate engagement has generated, and continues to generate, polarizing perspectives, from the enthusiasm of those that view this as an opportunity for greater policy effectiveness and resource mobilization, to those concerned about corporate capture of the public policy space. Interestingly, this phenomenon has also been accompanied by changes in taxonomy, with the emergence of the term ‘stakeholder’ and increased use of ‘multi-stakeholder’ dialogues, programmes, platforms and partnerships.

Despite scant evidence of their effectiveness, States and United Nations (UN) agencies have been increasingly accepting and actively promoting multi-stakeholder models that provide a conduit for the private sector - including large food and agribusiness - to participate as ‘key stakeholders’ in policy making fora related to food and nutrition.

This study explores how this shift influences public policy spaces; the framing of agendas; the capacity and political will of governmental and intergovernmental institutions (such as the UN) to regulate in the public interest; and people’s ability to claim their human rights, with special but not exclusive reference to the right to adequate food and nutrition (RtAFN). The Scaling-up Nutrition (SUN) initiative was chosen as a prominent example of a multi-stakeholder initiative in the food and nutrition area.

Based on research in two SUN countries (Guatemala and Uganda) and three SUN states (Uttar Pradesh, Maharashtra, and Jharkhand – India), the following five key findings emerged:

- SUN promotes nutrition approaches that favour short-term medicalized and technical solutions, mostly focused on chronic undernutrition, rather than addressing the structural causes of malnutrition in all its forms in a sustainable manner. The risks associated with overweight-obesity and related non-communicable diseases are overlooked and might

possibly be increased by such approaches;

- SUN’s so-called ‘nutrition-sensitive’ interventions predominantly promote high-input intensive agriculture, biofortification and genetically-modified crops that primarily benefit the agro-industrial food system and contribute to reducing biodiversity;
- SUN interventions appeared to have limited impact on reducing malnutrition while generating negative consequences on the realization of the RtAFN;
- SUN enhanced private sector influence on policy, while redefining the legal conflict of interest concept to suit the multi-stakeholder model; and
- SUN falsely generated the benign illusion of a broad and inclusive ‘movement’ while failing to include meaningful participation of the most affected communities.

While SUN is not the only force pushing for this technocratic, silver bullet approach to nutrition it has certainly influenced policy trends in this direction. SUN country experiences show no strategy in place for fundamentally re-shaping food systems towards better nutritional, environmental, and social outcomes in line with the RtAFN.

The interventions promoted by SUN not only fall short in addressing the structural causes of malnutrition, but they also create additional dependencies and reduce confidence in local foods, thereby undermining the RtAFN. Finally, and importantly, in the countries reviewed, the initiative has contributed to the (further) institutionalization of private sector influence on public food and nutrition policy making and implementation.

The study also examined SUN’s international structure and way of working from a governance perspective. Contrary to the initiative’s claims of a country-led movement, decision making structures fail to give a strong voice to countries and even less to the communities affected by malnutrition. There are no mechanisms in place to balance powers within SUN, hold anyone accountable when things go wrong, or deal with claims of people affected by SUN-promoted interventions. Moreover, the initiative contributes to an erosion of accountability of governments to people by replacing democratic processes with multi-stakeholder structures.

Building on the study's results, the last section outlines some policy recommendations for national governments, donors, UN agencies and civil society calling for

a shift in direction and alignment of nutrition policy with the right to adequate food and nutrition and a people-centred approach.

Introduction

Background

The past two decades have seen an increased interest and participation of the private sector, particularly large transnational corporations, in global policy debates on sustainable development. Such engagement has generated, and continues to generate, polarizing perspectives: some view this as an opportunity for greater policy effectiveness and resource mobilization; others are concerned about corporate capture of the public policy space.

Despite scant evidence of their effectiveness,¹ States and United Nations agencies have been increasingly promoting 'multi-stakeholder' models that provide a conduit for the private sector - including the food and agro-industry - to participate as 'key stakeholders' in policy making fora related to food and nutrition. The most critical commentators would claim that the corporate sector has successfully managed to shift the dominant narrative on the role of industry in malnutrition: from being considered 'part of the problem' to being regarded by many as an essential 'part of the solution'.²

The Global Redesign Initiative (GRI) of the World Economic Forum (WEF) advocates for the multi-stakeholder model, with corporations governing alongside States, the United Nations (UN) and select non-governmental organizations (NGOs), as the new model for global governance.³

In the nutrition context, a prominent example of a multi-stakeholder initiative along the lines of the GRI model is the Scaling up Nutrition (SUN) initiative. Launched in 2010 at a high-level meeting of the International Monetary Fund (IMF) and the World Bank (WB), SUN brings together governments, UN agencies, donors, business and civil society in a "collective action to improve nutrition". To date, 61 countries have subscribed to SUN and the initiative has gained substantial political and financial backing.⁴

Objectives of the study

While many agree that SUN has raised the profile of nutrition at global level, it has also provided industries with unprecedented access to the public policy domain while failing to adequately address the issue of conflicts of interest.⁵ Large corporations are embedded in SUN's leadership structure and member countries are strongly encouraged to invite them on to national multi-stakeholder platforms.

Over the years, SUN has carried out several evaluations of its progress, most notably its Independent Comprehensive Evaluation (ICE) in 2015⁶ and a mid-term assessment in 2018.⁷ However, to date no truly independent⁸ assessment has been conducted of SUN's wider impact on the political agenda on nutrition, both at national and global level, and its possible effects on public health and on the realization of human rights.⁹

The present research study intends to contribute to filling this gap. It assesses, from a human rights perspective, the implications and possible risks generated by SUN with respect to the advancement of the nutrition agenda and the re-architecture of the governance of nutrition, with a focus on the national level. It thereby draws on country research in Uganda, Guatemala and India. More specifically, the research attempts to:

- Assess the theory (principles, objectives and strategy) and practise (activities, initiatives and claimed results) of SUN and its key members from the perspective of the right to adequate food and nutrition (RtAFN) and related human rights (e.g., the right to health); and
- Assess the potential implications of SUN, as well as the multi-stakeholder model more broadly, on the evolution of policies, programmes and governance related to nutrition at country and international level.

Structure

Chapter One describes the conceptual and analytical framework for the study. Chapter Two provides a general introduction to SUN that looks into the initiative's membership, structure and ways of working. Chapter Three presents a snapshot of the evolution of global nutrition governance, and the motivations and driving forces that resulted in the creation of SUN. Chapter Four presents the findings from the country research. The Final Chapters (Conclusions and Recommendations) discuss the overall findings of the study and provide recommendations to different actors involved in SUN.

Methodology

Research methods consisted of an extensive literature review, key informant interviews, focus group discussions, and questionnaires. Information concerning SUN's historic evolution, its structure and way of working, as well as its vision and approach to nutrition was gathered through the review and analysis of SUN's website and publications; studies and articles written on SUN, including the Independent Comprehensive Evaluation of SUN; documents related to the establishment of SUN; and other relevant literature. The historic section moreover benefited from personal recollections of some of the authors and reviewers, who have participated in the United Nations Standing Committee on Nutrition (UNSCN or SCN) and have been observing SUN since its initial phases.¹⁰

Country-specific data was collected in Uganda, Guatemala and India¹¹ between November 2017 and June 2018. Given resource limitations, the comprehensiveness of data collected in the three countries varies.

To complement the information from the country case studies, questionnaires were sent to 150 individuals working in (other) SUN countries. The questions asked about the impact of SUN and its Conflict of Interest (COI) policy on governance at country and global level. This approach was abandoned when it became apparent that, for the most part, people were lifting information straight from the SUN website. A shorter, more pointed

questionnaire was used as a follow-up with government personnel, UN staff and others who were interviewed during the World Health Assemblies WHA70 and 71. In some instances it was clear that those directly involved in SUN were reluctant to give frank answers in writing.

For **Uganda**, besides documentary analysis of key documents, data collection included in-depth interviews with key actors, questionnaires targeting health workers, and focus group discussions with mothers/caregivers of malnourished children. In total 36 interviews were held with representatives from the government (eight main sectors and Office of the Prime Minister), including the SUN focal point, donors, UN agencies, civil society, and private sector. A convenience sample was used based on involvement in the SUN initiative. Interviews were held both in Kampala and at district level, where local government officials as well as health workers were interviewed. The districts of Kasese (engaged with SUN) and Mpigi (which, at the time of the research, was not yet engaged with SUN) were chosen for comparison purposes, while some complementary data was collected in Moroto and Nakapiripirit district. Questionnaires with open-ended questions were completed by 36 health workers from four health facilities (two private and two public) in Kasese and Mpigi in addition to the National Referral Nutrition Rehabilitation Unit ("Mwanamugimu Nutrition Unit"). Moreover, one focus group discussion was held with 12 mothers/caregivers of malnourished children in the Mwanamugimu Nutrition Unit. All interviews and focus group discussions were conducted by Barbara Nalubanga¹². Finally, the analysis was done by triangulation of data by source and method, in order to validate each other and provide a more robust answer than could have been produced using a single-data source.

For **Guatemala**, besides documentary analysis of key documents, data collection included semi-structured interviews and guided group discussions with community members. A total of 15 interviews were conducted with key informants at the national level. Interviewees were chosen based on their participation in the national SUN Multi-Stakeholder Platform, and included representatives from the government, civil society, business,

donors, and UN agencies. In addition, two guided group discussions were held with a total of 62 members of two communities (mostly women) located in the municipalities of Jalapa and Jocotán, two technical staff from the municipalities of Camotán and Jocotán, and representatives of three civil society organizations that support communities in the selected municipalities. These were complemented by two interviews with technical staff from the respective municipalities. Information from the community level focused on local implementation of SUN interventions, if any. The communities selected had all been targeted by the SUN 1000 Days Window programme, because of a high prevalence of chronic malnutrition as well as their localization within the so-called Dry Corridor. Interviews and focus group discussions were conducted by Maarten Immink¹³ and Magali Cano¹⁴.

For **India**, a documentary analysis of key documents was carried out. This included published reports, journal articles, public online content from relevant websites, including government agencies, SUN, the Global Alliance for Improved Nutrition (GAIN) and the United Nations Children's Fund (UNICEF). In addition, information was received from the State Governments of Jharkhand, Maharashtra and Uttar Pradesh following an application made using the *Right to Information Act* (2005). Data collection in India was carried out by Dr JP Dadhich¹⁵ and Dr Arun Gupta¹⁶.

Analysis of the data collected in the three countries was done jointly by the local researchers and the authors.

Limitations and challenges

The outcomes of the study need to be contextualized within the following four limitations and challenges.

First, the limited sample both in terms of country case studies and communities within these countries does not allow for generalizations about SUN's impact at country and community level.

Secondly, the difficulty of establishing the causality between the influence of SUN and the policy trends

observed at country level. The question of attribution – what governments do because of SUN and what they would be doing also without SUN – is difficult to ascertain given the multiple factors that have an impact on public decision making. It is further complicated by the opacity surrounding the channels of influence of SUN and its members, many of which are informal, and the fact that interviewees may not be able to speak entirely freely.

An additional layer of complexity in the attribution of impacts relates to the fact that SUN is made up of a myriad of actors for whom SUN is but one vehicle to advance their agenda. They may promote the same agenda through other channels of influence independently of SUN. It is hence difficult to establish what members do in the framework of SUN, and in how far SUN provides them with additional leverage for pursuing their agendas.¹⁷

Thirdly, the research was more focused on nutrition than initially intended. While the framework for the research was purposely chosen to be broad in scope to capture SUN's impacts on the RtAFN *beyond nutrition*, the country data collection primarily focused on policies and interventions within the nutrition domain. In the course of preparing and conducting the country research it became clear that a systematic review of all areas relevant to nutrition and the realization of the RtAFN would not be feasible given the resources available.¹⁸ The country researchers, nevertheless, tried to gather information on impacts beyond the mere nutrition sphere (e.g., agriculture).

Lastly, the high profile of SUN and strong dependency on funding from donors linked to SUN presented a significant barrier in some countries to having an open conversation about concerns related to the initiative. In an effort to counter this constraint, interviewees were assured that information provided by them would be treated with confidentiality, and their anonymity preserved. References to interviewees are therefore general without indication of names, titles, and, where relevant, institutional affiliation.

Chapter 1: Conceptual and Analytical Framework

The analytical framework used in the study for analysing SUN has two components. The first is a four-pillar framework based on the normative content of the right to adequate food and nutrition and States obligations under international law in relation to this human right. This is used to assess the *impact of policies and interventions* promoted and/or inspired by SUN. The second is a framework for assessing SUN as an *institution* from a governance perspective. The overarching framework for both is the holistic conceptualization of the right to adequate food and nutrition.

The holistic conceptualization of the right to adequate food and nutrition

The holistic conceptualization of the right to adequate food and nutrition¹⁹ derives from both established international law and emerging developments in this

field that respond to gaps in the international protection of this right (see Box 1.1). In contrast to more narrow interpretations focused on access to food, it embraces the various stages of food systems (from production to consumption) and sheds light on the power relations underpinning violations of the right. At the same time, it emphasizes the interdependence and interrelations with other human rights.

Four dimensions of the holistic conceptualization may be highlighted: (a) the emphasis on the nutritional dimension of the right to food (made explicit by the term right to food *and nutrition*); (b) the recognition of women's rights as core to the realization to the RtAFN; (c) the framing of the right within the food sovereignty concept (rather than food security); and (d) the recognition of the extraterritorial reach of State obligations.

Box 1.1

The human right to adequate food and nutrition in international law

The recognition of the human right to adequate food and nutrition, as other human rights, arises first and foremost from people's struggles against exploitation, discrimination, hunger and malnutrition. It is from these social struggles that international, regional, and domestic human rights law has emerged, and continues to emerge.

The RtAFN has been officially recognized and legally enshrined by the international community of States in a number of international standards²⁰, including the *Universal Declaration of Human Rights* (1948),²¹ the *International Covenant on Economic, Social and Cultural Rights* (ICESCR, 1966)²², the *International Covenant on Civil and Political Rights*²³, the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW, 1979)²⁴, the *Convention on the Rights of the Child* (CRC, 1989)²⁵, and the *Convention on the Rights of Persons with Disabilities* (2006).²⁶

In addition, several soft law instruments develop the *corpus juris* of the right to food under international law and guide States in the discharge of their obligations in relation to this right. These include the *FAO Guidelines to Support the Progressive Realization of the Right to Adequate Food in the Context of National Food Security* (FAO, 2004)²⁷, the *Declaration on the Rights of Indigenous Peoples* (2007)²⁸, the *Guidelines on the responsible governance of tenure of land, fisheries and forests in the context of national food security* (CFS, 2012)²⁹, the

Guiding Principles on Extreme Poverty and Human Rights (2012)³⁰, and the *UN Declaration on the Rights of Peasants and Other People Working in Rural Areas* (UNDROP, 2018)³¹. UN human rights treaty bodies' pronouncements, such as *General Recommendation No. 34 on the rights of rural women*,³² and thematic reports and principles developed by UN special rapporteurs present further soft law sources that clarify the content and obligations related to the RtAFN.³³

At the regional level, the RtAFN has been enshrined in the *African Charter on Human and Peoples Rights* (1981), the *Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa* ("Maputo Protocol") (2003), the *African Charter on the Rights and Welfare of the Child* (1990), and the *Additional Protocol to the American Convention on Human Rights in the Area of Economic, Social and Cultural Right* ("Protocol of San Salvador") (1988). Several countries have recognized the RtAFN in their constitutions and national law.³⁴ Furthermore, diverse judicial bodies around the world have recognized and further developed the understanding and legal obligations entailed under the RtAFN in their jurisprudence.³⁵

According to the UN Committee on Economic, Social and Cultural Rights (CESCR), which is charged with the authoritative interpretation and monitoring of the implementation of rights enshrined in the ICESCR, the RtAFN "is realized when every man, woman and child, alone or in community with others, have physical and economic access at all times to adequate food or means for its procurement".³⁶ In its *General Comment No. 12: The Right to Adequate Food (Art. 11)*³⁷ the Committee describes the normative content of the RtAFN in terms of the dimensions of *adequacy* (quantity and quality, food safety, cultural adequacy, and sustainability), *accessibility* (physical and economic) and *availability* (of food and/or natural resources to feed oneself). It elaborates on State obligations to respect, protect and fulfil the right to food (Box 1.2) and human rights principles of participation, accountability, non-discrimination, transparency, priority of marginalized and disadvantaged groups³⁸, and indivisibility of rights for the full realization of the RtAFN. Furthermore, the General Comment elaborates on the social and cultural dimensions of the right.

The official definition and normative content put forward in General Comment No. 12 has served as basis for subsequent elaborations of the normative content of the RtAFN and corresponding State obligations.³⁹ These continuously clarify and enrich the understanding of

the right, taking into account overlooked and emerging causes of malnutrition in its various forms, and unveiling the power dynamics and political economies that underpin violations of the right.

Food and nutrition: inseparable dimensions of one complex right

The holistic understanding of the RtAFN overcomes one of the fundamental shortcomings of earlier interpretations of the right: the apparent separation of the right to food from its nutritional dimension.

Nutrition can be defined as the act or process of nourishing or being nourished. Not all types of food lead to nutritional well-being, and people need more than just a mixture of energy and nutrients to reach this state.⁴⁰ The nutritional dimension of the right to food transcends the entire food system, and is closely intertwined with other dimensions of the right to food, such as cultural adequacy and sustainability.⁴¹ Food must be produced in ecologically and socially sustainable processes that support nutritionally rich, diverse and culturally-accepted diets.⁴²

The nutritional dimension of the RtAFN clearly illustrates the *indivisibility of human rights* in that it exposes the interrelations between the right to food, the right to health, the right to water, the right to education, the rights of peasants and their legitimate access to natural resources,⁴³ the rights of workers, and the broader public good represented by a biodiverse and healthy environment.

Public policies and other measures to promote and improve nutrition must be embedded in broader strategies that advance the right to food in all its dimensions. They must take into account the various forms of malnutrition – undernutrition, overweight and obesity, and micronutrient deficiencies – and address the underlying social, economic, and cultural causes of these in an integrated manner throughout the lifecycle.⁴⁴ This requires policies and other measures aimed at reshaping food systems so that these deliver better nutrition, health, social equity, and environmental outcomes.⁴⁵ These must go hand in hand with measures in other policy fields that aim to ensure access to public services, in particular basic health care, water and sanitation; decent work conditions and pay; effective social protection (including maternity protection); and, safe and healthy

environments.⁴⁶ All of these must take into account and be accompanied by measures that specifically seek to eliminate existing social inequalities and discrimination, and advance the rights of population groups most affected by hunger and malnutrition, such as women⁴⁷, children⁴⁸, indigenous peoples⁴⁹, peasants⁵⁰, and agricultural workers^{51, 52}

Beyond empowerment: women’s rights at the core of the RtAFN

The evolving holistic interpretation places women’s rights at the heart of the RtAFN.⁵³ It recognizes violence against women, including sexual violence, as one of the main structural causes of hunger and malnutrition.⁵⁴ Such violence not only undermines women’s rights to self-determination and control over their own bodies and lives, it also drives gender-based discrimination throughout the life cycle, including unequal pay, lack of equitable access to productive resources, and limited fruition of public services. The gendered division of labour and depreciation of “women’s work” (reproductive, care, housework) play a central role in the maintenance of unequal power relations and the continued oppression of women. All these factors lead to serious consequences for the nutrition of women. At the same time, gender-based violence is also a key driver of the intergenerational reproduction of poverty and malnutrition, resulting in poor nutritional status of children at birth and throughout their lives.⁵⁵ Strategies to advance the RtAFN, including its nutritional dimension, must therefore place a central focus on the realization of women’s rights and the elimination of gender-based discrimination.

Food sovereignty: a broader framework for the RtAFN

More recent developments in international law and interpretations of the right to food place the right to food within the broader framework of food sovereignty.⁵⁶ Food sovereignty has been defined by peoples’ movements and civil society as: “the right of peoples to healthy and culturally appropriate food produced through ecologically sound and sustainable methods, and their right to define their own food and agriculture

systems”.⁵⁷ The food sovereignty concept holds that each sovereign nation has the right to set policies to ensure the food security and nutrition of its people, including the right to the preservation of its traditional productive practices and diets. In addition, this process must take place on an environmentally, economically and socially sustainable basis. The incorporation of the concept of food sovereignty into the RtAFN sheds light on the deepest causes of malnutrition related to self-determination and power relations concerning the access to and control over natural resources, and the way food is produced, exchanged and consumed (food cultures).⁵⁸

The extraterritorial dimension of State obligations under the RtAFN

The recognition that State actions and policies impact the rights of people beyond national borders and hence that their human rights obligations have an *extraterritorial dimension* is a key component of international

human rights law, and holds particular relevance for the right to food and nutrition.⁵⁹ International trade and investment rules, transboundary eco- and climate-destruction, as well as natural resource grabbing driven by transnational corporations and economic elites, are examples of policy fields with a strong impact on the RtAFN in other countries.⁶⁰ They affect countries’ ecosystems and biodiversity, contribute to shaping food systems and people’s diets and have important implications for small-scale food producers’ livelihoods.

Besides the need to ensure that domestic and international policies and actions do not undermine the RtAFN in another country, States must cooperate with each other towards the realization of the RtAFN.⁶¹ This comprises both the creation of an international environment conducive to the realization of this right, as well as the alignment of international cooperation, including development assistance, with human rights principles and priorities.⁶²

Box 1.2

State obligations with respect to the RtAFN

The RtAFN, like any other human right, imposes three types of obligations on States: obligations to *respect*, *protect* and *fulfil*.⁶³ The latter involves both obligations to *facilitate* and to *provide*. The obligation to respect the right to adequate food and nutrition requires States to refrain from measures that interfere with existing enjoyment of the right (e.g., taking away land people depend on to produce food). The obligation to protect requires the State to take regulatory and other measures to ensure that non-state actors, such as companies or individuals, do not undermine people’s RtAFN. It includes regulation, monitoring, investigation, sanction, and remedy measures. The obligation to fulfil (facilitate) means that the State must proactively adopt legislative, administrative and other types of measures to enable people to exercise their RtAFN (e.g., public policies that protect and support breastfeeding). Finally, when an individual or group is unable to enjoy the RtAFN by the means at their disposal, States have the obligation to fulfil the right directly (e.g., through social protection programmes), and to establish strategies for them to regain, where possible, their ability to feed themselves.⁶⁴

The obligations of States are not limited to their territory. The *Maastricht Principles on the Extraterritorial Obligations of States in the Area of Economic, Social and Cultural Rights* summarize the human rights obligations of States towards persons living in other countries.⁶⁵

Extraterritorial obligations (ETOs) require States to ensure their policies and actions do not undermine the enjoyment of the RtAFN in other countries (e.g., through human rights impact assessments and monitoring). Moreover, States must regulate the conduct of private actors, including companies, over which they have control to prevent negative impacts of their activities on the RtAFN in other countries. ETOs also include obligations of international cooperation to fulfil the RtAFN.

Four-pillar framework for assessing nutrition policies and interventions promoted by SUN

Based on the holistic conceptualization of the RtAFN, a four-pillar framework has been developed that outlines public policies and actions that are critical for improving nutrition in the context of States' obligations under the RtAFN and related human rights. It is against this framework that the potential and actual impacts of public policies and interventions promoted and/or inspired by SUN and its members have been assessed. The assessment took into consideration:

- Nutrition policies and interventions advocated for by SUN and its members;
- Nutrition interventions carried out by influential SUN members⁶⁶; and
- Government policies and programmes carried out with the support of and/or following recommendations of SUN and its members.

The four pillars are inspired, permeated and complemented by cross-cutting human rights principles, such as indivisibility of rights; non-discrimination and prioritization of the rights of marginalized and disadvantaged groups; participation; transparency and accountability; and, the utmost focus on human dignity.

Pillar One: Sustainable and healthy food systems

- › Public policies, legislations, programmes and spending contribute to protecting and promoting diversified, agro-ecological, local food systems centred on the pivotal role of small-scale food producers;
- › Imports and foreign direct investment in the production and distribution of unhealthy food products are regulated with the view to protect people's health, small-scale food producers, local markets and traditional diets;
- › Adequate food safety regulations are in place, differentiating between different modes and scale of production and commercialization;
- › Public regulations ensure the protection and enhancement of biodiversity and provide incentives for food production, transformation and commercialization processes that are rooted in truly ecological practices;
- › State policies promote those territorial markets that ensure availability of diversified and fresh food produced, where possible, by local small-scale producers; and,
- › Measures are in place to foster collective management of food systems (see Pillar Four).

Pillar Two: Underlying conditions determining access to nutritious and healthy diets

- › Price, welfare schemes and other regulations are in place to guarantee people's access to diverse and nutritious food (including breastmilk substitutes for infants who cannot be breastfed);
- › Policies and other measures effectively protect and promote people's, and particularly women's access to and control over natural resources (land, seeds, water, forests) guaranteeing the conditions for them to grow or collect their own food and, where relevant, sell excess to local markets for additional income;
- › Policies and regulations foster decent employment opportunities and ensure the rights of all workers (including living wages and safe, secure and healthy working conditions), while promoting de facto equality of opportunities between individuals of all genders and countering inequalities and discrimination;
- › Social protection schemes (including temporary emergency measures) guarantee a decent standard of living for all, including the ability to access a diversified, nutritious, safe and culturally adequate diet. Such measures respect the autonomy and are sensitive to the (cultural, personal) preferences of individuals and communities, and seek to restore or build, where possible, their capacities to sustain themselves;
- › Medical interventions are accompanied by safeguards that ensure the appropriateness of treatment and all necessary care that is required for sustained rehabilitation and the prevention of recurrence; and,
- › Policy and other public measures are in place to protect and promote women's right to make informed decisions about infant and young child feeding, while also protecting, promoting and supporting breastfeeding (early and exclusive until completed 6 months and continued with adequate and safe complementary feeding up to two years and beyond).

Pillar Three: Enabling environment for self-determined, healthy and sustainable food choices, consumption, and nutritional well-being

- › The marketing of unhealthy food and beverages (esp. to children and parents), as well as of breastmilk substitutes, foods and other products marketed for infants, young children, pregnant and nursing women is firmly and adequately regulated;
- › Selective fiscal policies ensure that healthy, locally produced food is more affordable, while less healthy processed food is rendered relatively more expensive (e.g. subsidies at production and/or consumption level, taxes of unhealthy food products, price ceilings);
- › Objective and sound consumer information (strict controls on labelling and claims, controls on the funding and commercialization of education, etc.) and adequate measures to protect and encourage the exercise of positive local food cultures (incl. breastfeeding and complementary feeding with family foods) are implemented;
- › Measures to ensure healthy environments (incl. access to sufficient and affordable water and sanitation) are in place;
- › Working women, including within the informal sector, benefit of adequate maternity protection schemes along with measures to ensure access to basic adequate health care services, including skilled counselling, free from commercial influence, for pregnant, lactating mothers, father and close family;
- › Policies and programmes are in place to promote gender-equitable division of responsibilities related to food and nutritional care for the children and family, among members of nuclear and extended family, reducing the overburden on women;
- › Policies and other measures strengthen women's autonomy and self-determination over their lives and bodies, tackling unequal power relations and structural violence against women; harmful

socio-cultural gender norms and stereotypes in relation to food consumption; sexual division of labour; and, invisibility and non-valorisation of women's work;

- › Policies and strategies take into account the barriers people may face in taking conscious informed decisions in relation to feeding their offspring and their own food consumption, based on past/present discrimination (incl. on basis of gender) and other factors; and,
- › Measures create an enabling environment for parents, families and communities to provide babies and young children, with emphasis on the first 1000 days of life, with adequate, healthy and nutritious diets, adequate care, and a healthy environment, so that their children can, through adequate stimulation, care and love, fully realize the RtAFN, including their related capabilities.

Pillar Four: People-centred nutrition governance

- › Groups most affected by malnutrition directly and effectively participate in the determination of public priorities, strategies, policies, legislations, and programmes that directly and indirectly impact nutrition (from local to global level), including the protection and support of optimal infant and young child feeding;⁶⁷
- › Policy frameworks clearly distinguish and ensure appropriate roles for different nutrition actors, with robust safeguards to ensure transparency and prevent corporate influence and resulting conflicts of interest in health and nutrition policy setting and implementation; and,
- › Governments establish, with the support of academia and civil society organizations, independent monitoring mechanisms of corporate activities, with appropriate accountability procedures for transgressions.

Framework for assessing SUN from a governance perspective

The framework for analysing SUN from a governance perspective has been developed on the basis of the extensive institutional experiences of the authors of the

study, supplemented by two recent expert publications on multi-stakeholder partnerships and governance:⁶⁸ the report on *Multi stakeholder partnerships to finance and improve food security and nutrition in the framework of the 2030 Agenda*⁶⁹ by the High-Level Panel of Experts (HLPE) of the Committee on World Food Security (CFS) and Harris Gleckman's book *Multistakeholder Governance and Democracy: A Global Challenge*⁷⁰.

While the authors do not agree with everything said in the HLPE report,⁷¹ the framework for analysing MSPs from a right to adequate food perspective was considered useful for the purpose of the study. The HLPE report explores the potential benefits, limitations, and risks of multi-stakeholder partnerships (MSPs) in the context of the implementation of the Sustainable Development Goals (SDGs). It proposes a set of criteria for assessing the *process-* and *results-*based qualities of MSPs from a right to food perspective.⁷² The various process-related qualities are strongly interrelated and together determine the democratic value of a MSP.

Gleckman assesses multi-stakeholder groups from a governance perspective, discussing the potential consequences of the shift from multilateral to multi-stakeholder governance for democracy, and possible alternatives. Among others, he outlines and critically examines the beliefs shared by participants and advocates of such groups and the different institutional and decision-making structures that underpin them.

With reference to these two publications, and in particular the qualities criteria proposed by the HLPE report, a set of guiding questions has been developed to assess SUN from a governance perspective. Particular emphasis was thereby placed on questions of inclusiveness (a central claim of SUN and cornerstone of the human rights framework), representation, and accountability.

Main function and underpinning beliefs

- › What is SUN's main function?⁷³
- › What are the underpinning beliefs held and promoted by the members of SUN?⁷⁴ How does SUN describe itself?

Composition and governance structure

- › Who initiated SUN?
- › Who participates in SUN? What are the criteria for becoming a member?
- › Who leads SUN? How and by whom are SUN's leading members (Lead Group, Network steering groups, etc.) chosen? Which are the criteria for selection?
- › Is a distinction made between the nature, roles and responsibilities of different members? Are these clearly defined?
- › Do members speak for themselves, or do they represent a broader category of actors?
- › How is inclusiveness and representation of groups most affected by malnutrition ensured?

Financing structure

- › How is SUN funded?
- › What is the share of public vs. private funding?
- › Which are the mechanisms to channel resources? What is the decision-making process for the allocation of resources?

Process-related qualities⁷⁵

Inclusiveness (participation and decision making)

- › Are all the relevant categories of actors included?
- › Which decision making structures are in place? Who can participate in discussions; how is the final decision taken?
- › How is diversity balance ensured? Do the rules and mechanisms in place enable meaningful participation of all and especially of groups most affected? How are they represented in decision making and implementation processes?
- › Are there any mechanisms to identify and respond to power asymmetries between participants?
- › Is there a system for dispute resolution?

Accountability

- › What are the effective obligations SUN members hold towards each other (internal)? What are the obligations they hold towards communities affected by malnutrition (external)?
- › Is there an effective system for determining who is accountable when things go wrong?
- › Is there a system for preventing corporations from using the humanitarian message as a cover for harmful marketing?

Transparency

- › Is there clear information on processes, decisions, funding, actions, and outcomes of SUN?
- › Is such accessible for people outside SUN, especially those who are affected by the initiative's actions (i.e., supposed beneficiaries)?

Reflexivity

- › To what extent is SUN able to learn and adapt?⁷⁶
- › Are there procedures in place to be followed to decide whether or not to shut down the initiative (e.g., should it become clear that it does not fulfil its purpose, or is no longer needed)?⁷⁷

Results-related qualities

(covered by four-pillar framework described above).⁷⁸

Effectiveness

- › To what extent does SUN deliver on its stated objectives?

Impact⁷⁹

- › Does SUN make a difference with regard to advancing the RtAFN?
- › What is SUN's 'added value'? Do the benefits outweigh the risks?

Chapter 2: The Scaling Up Nutrition 'Movement'

This Chapter provides a general introduction to the SUN initiative. It looks at the underpinning beliefs, principles, approach, and vision of the initiative, as well as its composition, governance and financing structure. It examines how decisions within the initiative are taken and disputes among members solved. Finally, it takes a look at its approach to monitoring and evaluation and the accountability mechanisms that exist towards the communities the initiative claims to serve.

Vision, objectives, and approach

SUN is a multi-stakeholder initiative that was launched in 2010 during the World Bank and IMF Spring Meetings.⁸⁰

Its members include governments, donors, UN agencies, civil society and private sector.

SUN’s stated vision is “a world free from malnutrition in all its forms” by 2030, in which “every child, adolescent, mother and family can realise their right to food and nutrition, reach their full potential and shape sustainable and prosperous societies”.⁸¹ This is to be achieved through collective action in which all ‘stakeholders’ come together in a multi-sectoral approach.

A central element in SUN’s discourse is its self-description as a “movement”. SUN’s stated objectives and description of itself has changed over time. In 2010,

Graphic 2.1
SUN’s Vision
and Theory
of Change⁸²



its goal was to “reduce hunger and under-nutrition”, while today, it is to “end malnutrition in all its forms”. Moreover, SUN and even its business community are increasingly using human rights terminology. SUN makes explicit reference to the “right to food and nutrition”. It also now describes itself as being “government-led”.

SUN’s approach is organized around four strategic objectives identified in the SUN Movement Strategy and Roadmap (2016-2020)⁸³:

1. Expand and sustain an enabling political environment;
2. Prioritize and institutionalize effective actions that contribute to good nutrition;
3. Implement effective actions aligned with Common Results; and,
4. Effectively use, and significantly increase, financial resources for nutrition.

The promotion of collaboration between all actors and the establishment of multi-stakeholder platforms at country level forms the basis of SUN’s strategy. According to SUN’s Theory of Change, this collaboration will lead to behaviour change in the respective actors, the ‘scale-up’ and alignment of actions and resources on nutrition, and ultimately the improvement of nutrition status (see Graphic 2.1). As put by SUN’s ICE: SUN’s leadership and support structures are “all focused on supporting multi-sectoral and multi-stakeholder nutrition platforms at country level, led by government focal points, with country-level support networks that replicate the global ones”.⁸⁴

Composition and governance structure

Leadership

SUN’s policy and strategic direction is determined by its Lead Group which has the “overall responsibility for the Movement’s progress towards achieving its strategic objectives and preserving its unique character”.⁸⁵ The Lead Group is composed of high-profile ‘leaders’ in business, the UN, governments, donors and civil society⁸⁶, who are appointed in their personal capacity by the UN Secretary General.⁸⁷ Besides their oversight

and leadership function, Lead Group members are expected to act as ‘champions’ for the SUN initiative in their spheres of influence.⁸⁸ The current Lead Group is chaired by UNICEF. The World Food Programme (WFP) and the International Food Policy Research Institute (IFPRI) are also members of the Lead Group.

Despite SUN’s claim to be government-led, only four of the 27 recently appointed members of the Lead Group represent SUN country governments.⁸⁹ Several members represent donors and private foundations. Business sector members currently include Royal DSM⁹⁰, a Dutch-based international chemical company producing micronutrient ingredients for the food and dietary supplements industry, and Java Foods⁹¹, a Zambian company manufacturing instant fortified cereals and noodles.

This is the first time that private sector is invited to the table to be part of the solution for countries as they scale up (...) Market-based solutions must be part of the overall approach to fight undernutrition.⁹²

From civil society, the CEO of Save the Children participates in the Lead Group.

Besides the Lead Group, a central figure in SUN’s “Stewardship Arrangement” is the SUN Coordinator, equally appointed by the UN Secretary General. Currently the position is held by Gerda Verburg from Netherlands, former Chair of the UN Committee on World Food Security (CFS) and Chair of the Agenda Council for Food and Nutrition of the World Economic Forum (WEF). The SUN Coordinator heads the implementation of SUN’s strategy. She leads the SUN Secretariat, participates in the Lead Group and in the Executive Committee (*ex officio*), and coordinates the initiative’s networks (government focal points, support networks). She acts as representative and high-level advocate for SUN on nutrition and has the role to “promote and preserve the Movement’s core values, principles, and character”.⁹³ The Coordinator is also responsible for correcting the direction of the initiative should the strategy not be achieving its expected impact.⁹⁴

SUN's Stewardship Arrangement also includes an Executive Committee,⁹⁵ the members of which are appointed by the Chair of the Lead Group and act on behalf of the Lead Group to oversee the development and implementation of SUN's strategy.

SUN's activities are moreover enabled and facilitated by a global secretariat based in Geneva and hosted by the United Nations Office for Project Services. The SUN Secretariat provides support to the Lead Group, SUN countries, and SUN Networks. Key functions include liaising with countries, tracking progress, sharing experiences, and organization of workshops.

Country membership

Today, SUN has 61 member countries, most of whom have joined by sending a letter of commitment from a high-level government official to the Coordinator of SUN.⁹⁶ There is no requirement for democratic governmental processes before joining SUN (see Box 4.1). SUN country governments nominate a focal point to convene a national multi-stakeholder platform that

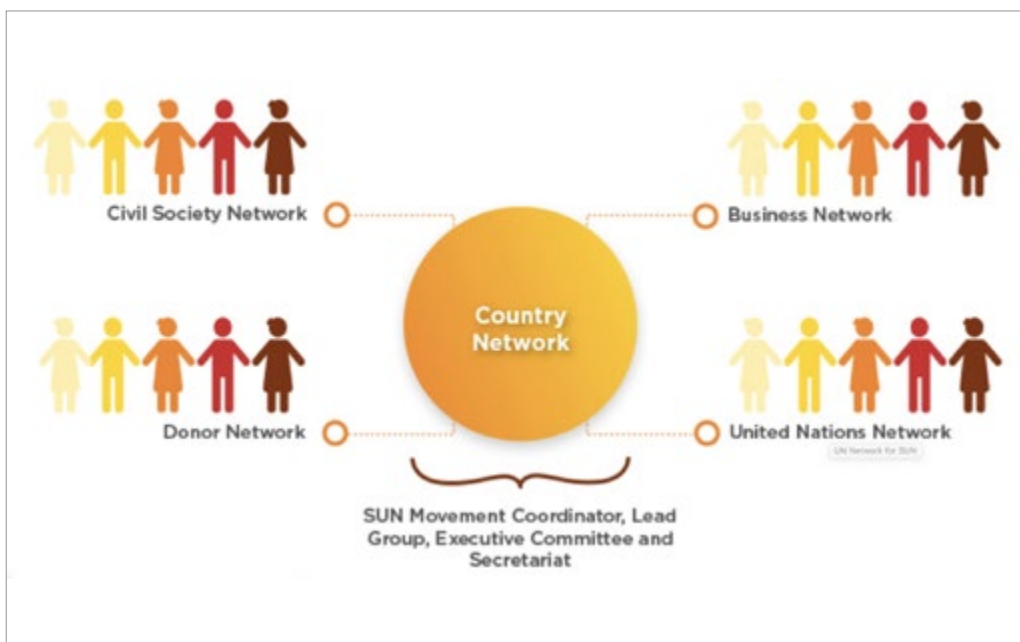
brings together actors "from all sectors that are relevant to nutrition".⁹⁷

SUN countries raise their own domestic and external resources for their nutrition agenda, while being expected to follow SUN's ten Principles of Engagement (see Box 2.1). These aim to ensure a common purpose and "mutual accountability" within a multi-stakeholder and multi-sectoral space. Member countries also commit to "ensuring that programmes in all sectors of government are sensitive to nutrition" and to "increasing coverage of proven interventions that improve nutrition during the 1,000 day period between a mother's pregnancy and her child's second birthday".^{98 99}

SUN Networks

The different actors engaging in SUN are organized in Networks that are coordinated at the global level by a Network Facilitator who organizes its support in synergy with the SUN Secretariat and with guidance from SUN's Stewardship Arrangement. There are four Networks: SUN Civil Society Network (SUN CSN), SUN Business Network (SBN), SUN Donor Network, and the UN Network for SUN.

Graphic 2.2
SUN Networks¹⁰⁰



The **SUN Civil Society Network** supports the establishment and functioning of SUN Civil Society Alliances (CSAs) at country level. It thereby seeks to promote coordination among CSOs and alignment with national action plans. Support is provided with regard to access to funding, capacity building, and cross-learning.¹⁰¹ CSO members contribute to SUN through implementation, advocacy, and monitoring in relation to nutrition actions. SUN CSO members are also encouraged to engage with businesses, to bring them 'round the table', and encourage them to engage positively in the nutrition agenda.¹⁰² Currently, there are alliances in 39 SUN countries, representing over 3,000 organizations, both national and international.¹⁰³

The SUN CSN is composed of the national CSAs, international NGOs, as well as some national CSOs.¹⁰⁴ Membership is open to all civil society organizations who commit to pursuing SUN's objectives and respecting its Principles of Engagement.¹⁰⁵ Decision making within the Network is exclusive to the Network's Steering Group with guidance from national CSAs.¹⁰⁶ The Steering Group composition is to reflect the Network's membership, and guidelines exist regarding regional representation and type of organisation, amongst other criteria.¹⁰⁷ Steering Group members (including Chair and Co-Chair), are selected in their personal capacities. It is expected that their organizations will, as part of their engagement in SUN, cover the costs related to their Steering Group role.¹⁰⁸

In practice, most members of the Steering Group at the time of writing are linked to international NGOs.¹⁰⁹ The Steering Group is currently chaired by Care Peru and co-chaired by Save the Children UK.¹¹⁰ The Network's secretariat is hosted by Save the Children in the UK.

The **SUN Business Network** – co-convened by GAIN and the World Food Programme (WFP) and supported by a global secretariat based in the UK – aims to engage and support businesses to act, invest and innovate in responsible and sustainable actions and operations to improve nutrition. To date, more than 400 businesses – transnational and national – have joined the SBN (Global and Country Networks).¹¹¹ 29 SUN countries have business representatives participating in

multi-stakeholder platforms. "SBN's business members will be reaching a total of 1.3 billion beneficiaries between 2013 and 2020, equivalent to 166 million each year until 2020."¹¹²

Membership is open to all companies who commit to comply with SUN's Principles of Engagement as well as the SUN Business Network's Principles of Engagement (see below)¹¹³. Moreover applicants must show an interest in the fight against malnutrition and dedicate resources to the implementation of the SBN Principles.¹¹⁴ When joining the Network, they also agree to disclose any breach of the Principles.

The **Donor Network** brings together bilateral donors, foundations and development banks, in support of SUN countries.¹¹⁵ The Network is currently facilitated by Switzerland (SDC), the US (USAID), and Ireland (Irish Aid). At country level, there are donor conveners who "catalyse collective donor support for scaling up nutrition at the country level" and "prioritise and harmonise investments to address identified gaps".¹¹⁶

The **UN Network for SUN**, established in 2013, comprises the Food and Agriculture Organization (FAO), the International Fund for Agricultural Development (IFAD), UNICEF, WFP and the World Health Organization (WHO). It is responsible for translating and achieving UN nutrition commitments in SUN countries, creating synergies and enhancing complementarity among UN agencies, governments and SUN networks, in order to enable the UN to work more effectively to deliver "nutrition actions at scale, and to achieve value for money and results".¹¹⁷ The network also supports national efforts along the key pillars established by the UN Decade of Action on Nutrition (2016-2025).

Financing Structure

The SUN Secretariat is funded by the Bill & Melinda Gates Foundation (BMGF), Canada, the European Union, France, Germany, Ireland, the Netherlands, Norway, the United Kingdom and the United States.¹¹⁸

Each SUN Network raises its own resources independently. The SUN Civil Society Network has received

support from the Multi-Partner Trust Fund (MPTF), the BMGF, the Children’s Investment Fund Foundation (CIFF), the UK, Ireland and Germany. Moreover, there are contributions by CSN members through staff time, organizational resources and strategic leadership.¹¹⁹

Since 2017 there is a SUN Movement Pooled Fund. The Pooled Fund, which replaces the former Multi-Partner Trust Fund¹²⁰, is intended to provide a “last resort, catalytic source of grant funding to support SUN Civil Society Alliance activities at the national and subnational level”.¹²¹ The 2018-2020 fund is supported by Canada, Germany, Ireland, Norway and Switzerland and currently focuses on: “Strengthened participation by in-country non-state stakeholders (civil society, private sector actors, academics, and journalists, among others) and parliamentarians in national multi-stakeholder platforms to implement scale up nutrition plans”.¹²²

Little information is available on the management of the Pooled Fund. In the case of the MPTF, priorities were set by the Lead Group, while fund allocation decisions were made by a management committee chaired by the SUN

Coordinator and composed of fund contributors and participating UN agencies.¹²³ The MPTF was channelled through SUN member UN agencies, while “implementing partners” appear to have been largely international NGO members of SUN.¹²⁴

Rules of engagement, decision making, and conflict resolution

SUN is guided by a set of ten Principles of Engagement (PoE) that all members are expected to adhere to (Box 2.1).

The SUN Movement Principles of Engagement seek to reflect the common purpose, agreed behaviours and mutual accountability that form the basis of the Movement. They provide the foundation for positive collaboration and underline the requirement that those who engage in the Movement avoid behaving and acting in ways that could disempower – or even harm – those the Movement seeks to serve.¹²⁵

Box 2.1

SUN’s Principles of Engagement¹²⁶

- 1. Be Transparent about Intentions and Impact:** All stakeholders will engage in transparent behaviour, and commit to establishing rigorous evaluations of the impacts of collective action and the contributions of individual stakeholders.
- 2. Be Inclusive:** The SUN Movement is open to all stakeholders that demonstrate their commitment to its goals. Exclusion should be avoided if at all possible.
- 3. Be Rights-Based:** Act in accordance with a commitment to uphold the equity and rights of all women, men and children.
- 4. Be Willing to Negotiate:** Stakeholders will seek to resolve divergences in approach or divergent or competing interests whenever they arise.
- 5. Be Predictable and Mutually Accountable:** All stakeholders are collectively accountable for their joint commitments; they should follow up on these commitments in a predictable way and be mutually accountable for the commitments being delivered as intended.

6. **Be Cost-Effective:** Stakeholders should be guided by available evidence about policies and actions that have the greatest and most sustainable impact for the least cost.
7. **Be Continuously Communicative:** All stakeholders are committed to the regular sharing of their intentions, actions, experiences and concerns.
8. **Act with Integrity and in an Ethical Manner:** Stakeholders should recognize that both personal and institutional conflicts of interest must be managed with the highest degree of integrity.
9. **Be Mutually Respectful:** Stakeholders make different contributions to the collective effort. Building the trust needed for collaboration requires respect for these differences.
10. **Do No Harm:** All stakeholders are committed to ensuring that all mothers and children everywhere are empowered to realise their right to proper nutrition. Whatever action is being undertaken, the wellbeing of mothers and children at risk of under-nutrition should be the primary consideration.

In addition, there are specific Principles for companies that join SUN. The SBN Principles, in part drawn from the UN Global Compact, include “support and respect [for] the protection of internationally proclaimed human rights”, and “compl[iance] with UN guidance on health and nutrition and the International Code of Marketing of Breastmilk Substitutes and World Health Assembly resolutions related to Maternal, Infant and Young Child Nutrition”.¹²⁷ Applicants of the Global SBN moreover must not engage in the production of armaments, tobacco or pornography.¹²⁸ Companies must sign a form to “guarantee” that their company endorses the Principles and will disclose any breach.¹²⁹ Besides companies’ own assessments, the SBN has an online “Whistle blower mechanism” through which documented breaches of the SBN Principles can be reported.¹³⁰ No information could be found on the SUN websites as to cases in which this mechanism has been used (if at all) and whether companies have been excluded from membership based on breaches.

While the Stewardship Structure is explained on the SUN website, the actual process for decision making

within the Lead Group remains unclear, as does the way in which government focal points and SUN Networks are engaged in this.

SUN has no specific mechanism in place to identify and respond to power asymmetries within and between ‘stakeholder’ groups.¹³¹ As for the Lead Group it appears that the balancing of views is ‘taken care of’ by having selected representatives from the various constituencies of SUN around the table.

While the Lead Group “aim[s] to preserve the Movement’s unique country driven character” there is no indication in the ToR or elsewhere of the mechanism through which this is to be put into practice, i.e., how SUN countries are to be involved in decision making beyond the few government representatives listed as members of the Lead Group.¹³² Both the SUN Coordinator and the SUN CSN Steering Group are to take decisions *with guidance from* SUN governments and CSAs (respectively). But also here, it remains unclear how this guidance is to be sought or submitted, and the weight it ultimately has in the decisions taken.

While SUN's main premise is inclusiveness and collaboration, there are no clear procedures in place for dealing with disagreements and conflicts between and within 'stakeholder' groups participating in SUN. Nor does SUN have complaint procedures in place for people outside of the initiative who may be adversely affected by its activities. Instead SUN builds on each 'stakeholder's' willingness to be inclusive, negotiate, and seek consensus through dialogue, and to *act ethically* in line with SUN's PoE and Ethical Framework. In the words of the latter:

*Simply put, acting ethically is thus not about following a strict set of rules, but by doing the "right" thing. By behaving in an ethical manner across all engagements in the Movement, the Movement's integrity will support the achievement of its collective mission and goals.*¹³³

Members of SUN Country Networks and Multi-Stakeholder Platforms are equally to be guided by SUN's Principles of Engagement. Beyond the Principles there is little guidance on the roles and responsibilities of different members in these platforms (except that they are to be convened by government focal points); representation of specific groups within networks (e.g., people's organizations); decision making procedures; and how to address power imbalances within constituencies and between networks. The SUN CSN has prepared a Working Note on Good Governance that attempts to provide some guidance to national CSAs on governance questions.¹³⁴ The Working Note provides ideas on general principles of good governance, as well as examples of how different SUN CSAs have put these into practice. However, important issues such as how to ensure representation and meaningful participation of people affected by malnutrition, and power balancing between CSOs are only marginally addressed.

Monitoring, evaluation, and accountability

SUN's approach to monitoring and evaluation consists first and foremost of a process of internal self-reflection (Joint-Assessment exercise). SUN members at country level gather on an annual basis to jointly assess progress and challenges, and "identify where support is needed

the most for realising joint goals" and "country priorities for the coming year".¹³⁵ This exercise then informs SUN's Lead Group and Executive Committee in decisions concerning the support provided to countries for scaling up. Moreover, SUN members participate in the annual SUN Movement Global Gathering in which they reflect on the year's achievement and plan for the coming year. The Global Gathering is considered SUN's "flagship moment, uniting the nutrition community in its collective ambition to inspire, engage and invest in ending malnutrition, in all its forms".¹³⁶

Based on the Joint-Assessment exercise and information from the Global Nutrition Report¹³⁷, the SUN Secretariat prepares an Annual Progress Report that "looks at the current state of the global nutrition landscape and examines progress and results in relation to the four strategic objectives of the SUN Movement".¹³⁸ The Secretariat moreover maintains an Information System which contains quantitative and qualitative data in relation to progress made, country needs and requests based on the Joint Assessments, and information gathered by the Secretariat.

Within the SUN initiative there are different lines of accountability. SUN Lead Group members report to and are accountable to the UN Secretary General. The Group as such has no legal status or binding obligations.¹³⁹ Members act in their personal capacity and have no legal responsibility for the initiative.¹⁴⁰ The SUN Coordinator equally reports to the UN Secretary General and is accountable to the SUN Lead Group. At the same time, the ToR stipulate that she/he "has primary responsibility to SUN government focal points".¹⁴¹ It is not clear what this means in practice. SUN government focal points are accountable to their governments and to National Multi-Stakeholder Platforms.¹⁴²

The SUN CSN Steering Group members are accountable to SUN CSN members.¹⁴³ According to the Networks' ToR "ultimately the network and its secretariat are accountable to the women and children suffering from malnutrition". It is not clear though how this accountability would be exercised in practice given that the network is not an elected body, nor are there any

mechanisms in place for affected groups to hold the SUN CSN accountable for actions. In practice, CSN members are accountable to their organization's boards and funders or – in the case of membership-based organizations – their members.¹⁴⁴

In addition to the individual lines of accountability of different actors within SUN, a core feature of SUN is the principle of mutual accountability (See Box 2.1, Principle 5). As stated in SUN's Strategic Objective One:

A shared space (multi-stakeholder platforms) at national and local levels paves the way for collective action, where nutrition change agents take joint responsibility for scaling up impact [emphasis added].¹⁴⁵

The Global Nutrition Report is cited as "valuable evidence-based, independent mechanism" through which actions and progress on commitments by SUN members is measured.¹⁴⁶

The recent Mid-Term Review of SUN acknowledged:

"At present there is a deficit in mutual accountability among the various actors. In practice, SUN members who are significantly dependent on international assistance are more rigorously assessed than are the funding providers".¹⁴⁷



In SUN's submission to the online consultation for the HLPE Report on MSPs, the SUN Secretariat refers to SUN as a "movement of [country] multi-stakeholder platforms".¹⁴⁸ Beyond describing SUN's basic global governance structure, all questions concerning the composition, representation, decision making, etc. are responded by referring to country-level multi-stakeholder platforms. The response provided by the Secretariat is that there are wide variations between

countries, so no clear-cut answer can be provided. This shows reluctance by SUN to openly reflect on its global governance structure, as well as distance and disassociation from the functioning of the national multi-stakeholder platforms that it so heavily promotes.

When assessing SUN from a governance and human rights perspective it is critical to look at both the overall (global) structure and way of working, and the changes introduced by the initiative at country level. The latter will be done in Chapter 4 that presents the findings from the country case studies.

The above description and analysis of SUN's global structure and working modalities exposes a number of serious governance concerns. These particularly relate to representation and accountability of the initiative. SUN's self-description as country and government driven initiative is not reflected in its Lead Group composition and decision making structures, which privilege multi-lateral institutions, international donors, and large scale business and NGOs able to dedicate resources to the initiative and their participation in it. There are no mechanisms in place to balance power differentials, ensure meaningful participation of groups most affected, or solve disputes that may arise between participants. The combination of significant power asymmetries and consensus orientation inevitable narrows down the responsiveness of the initiative to any alternative views and claims by those most affected. Accountability procedures are extremely weak and internal, leaving those affected by the initiative's actions with little recourse to influence or hold the initiative/its members accountable for negative impacts.

The following Chapter (Chapter 3) will take a closer look at the motivations and actors surrounding the creation of SUN, as well as the broader political context at the time. This is crucial for understanding better where the initiative comes from and what the driving forces and beliefs behind it are.

**Chapter 3: The Evolution of Nutrition
Governance and the Emergence
of 'Multi-stakeholderism'**

The assessment of SUN needs to be located in the context of the evolution of global nutrition governance, with special attention to the trend towards increased participation of the private sector. The study therefore tried to trace the emergence of the multi-stakeholder model of governance and the active attempts for it to 'complement', if not to entirely replace, state centred multilateralism. The analysis focuses on the period from the late 90s/early 2000s until today, and specifically on developments within the UN Standing Committee on Nutrition (SCN) and the Committee on World Food Security (CFS), and their relations with the establishment and development of SUN.

The World Food Summit and the UNSCN reform

The 1996 World Food Summit elicited a promising response by the SCN, in terms of bringing closer the food and nutrition agendas in Rome and Geneva. At that time, SCN's recently appointed Chair, Sir Richard Jolly, institutionally linked to the United Nations Development Programme (UNDP) and a known nutrition champion within the UN, came in with the mandate to increase the visibility of nutrition in the new millennium. Before his arrival, the SCN had functioned as the coordinating body of UN activities in nutrition, supported by a group of eight distinguished scholars, the Advisory Group in Nutrition.¹⁴⁹

In 1997, the SCN launched a high level commission to elaborate a report on the nutrition challenges of the twenty-first century.¹⁵⁰ Human rights gained more prominence on the SCN's agenda with its 1999 annual session dedicated to the relevance of the human rights paradigm for the promotion of nutrition, in the context of the elaboration of the UN CESCR General Comment on the Right to Food.¹⁵¹ Jolly also promoted, with the support of key UN agencies, a major reform in the functioning of the SCN, attributing a much more prominent role to civil society and academia.¹⁵² The SCN annual sessions from 2000 on became effervescent technical and policy fora, with adequate space to debate the different approaches to food and nutrition in all their dimensions, from the methodological to the philosophical ones, providing guidance to governments and UN agencies¹⁵³. Several scientific publications emerged from this vibrant process.¹⁵⁴

The first ever joint session of the UN Economic and Social Council (ECOSOC) and the SCN was held in New York in June 2005 on "The Critical Role of Nutrition for Reaching the Millennium Development Goals (MDGs)", ahead of the Millennium+5 UN General Assembly (UNGA). At the meeting, it was agreed that income poverty reduction and increased food production alone will not solve the nutrition problems of the poor in developing countries. Further, it was reaffirmed that achieving the MDGs means implementing rights, including the right to adequate food.¹⁵⁵

The 1995-2005 period had, however, also grappled with some very challenging governance issues. One such polemical issue was related to the participation of representatives of private sector-related organizations in the SCN process and governance.¹⁵⁶ Some SCN participants argued that private sector organizations and/or their surrogates, such as the Nestlé Foundation or groups representing private sector interests and agendas, should not be present in SCN's institutional mechanisms. They reasoned that this could create unacceptable risks of undue influence. On the opposite side, some developed countries, represented by their development agencies and backed by UN organizations (especially the WB, WFP and, as of 2001, also UNICEF), held a view that private sector organizations should participate as members of the NGO constituency.¹⁵⁷ There were also a few participants who proposed that private sector actors should become a constituency of their own, in addition to the three existing constituencies (UN, bilateral donors, NGOs)¹⁵⁸, while others had no clear position on the issue.¹⁵⁹

The NGO group opposed, in repeated consultations, the participation of private sector-related organizations in the NGO constituency. In 2004, the SCN Steering Committee instituted a working group to discuss and elaborate a policy proposal for engagement with the private sector. At the 2006 annual session, all three constituencies agreed to accept the *Draft Private Sector Engagement Policy* as an interim document, pending future discussions.¹⁶⁰ This policy, with minor revisions in June 2006, is directly linked to the future downfall of SCN.

The growth of private sector participation in food and nutrition governance

Historically, the incursions of the private sector in food and nutrition governance date back to the early 70's and grew hand in hand with the budgetary cuts imposed on the UN by its main donors, notably the United States and the United Kingdom, in the context of the strengthening of the neoliberal globalization process. The lack of funding placed many UN organizations in an increasingly vulnerable position and, in the absence of public interest safeguards, made the offers of private funding for their activities hard to resist. Yet, most venture philanthropists, such as BMGF, demand seats on the boards, set performance goals and plan exit strategies in case expectations are not met.¹⁶¹ Research by Richter and others¹⁶² gives details on how the UN became progressively captive of transnational corporations (TNCs) and dependent on venture philanthropy under the former UN Secretaries-General Boutros Boutros-Ghali and Kofi Annan, and WHO Director Gro Harlem Brundtland. In July 1999, the year that culminated with the historical demonstrations against the World Trade Organization in Seattle, Kofi Annan and the President of the International Chamber of Commerce, announced the establishment of the Global Compact, prior to its official launch at a high-level UN event in July 2000.

Many civil society organizations manifested their discontent with the opening up of the UN to formal partnerships with private companies, particularly as well-known abusers of human rights were allowed to become partners of the Global Compact. After careful analysis, Richter concludes that the Global Compact has been used by corporations both as a blue washing instrument and to gain greater political influence on decision makers and in policy processes.¹⁶³

One concrete step in applying this neoliberal model to health and nutrition was the launch of the Global Alliance for Vaccines and Immunization (GAVI) at the WEF in 2000.¹⁶⁴ A public-private partnership between the BMGF, UNICEF, WHO, the WB, the International Federation of Pharmaceutical Manufacturers

Association (IFPMA), and some national governments, the initiative clearly increased private sector influence in vaccine governance.¹⁶⁵

Two years later, in 2002, the Global Alliance for Improved Nutrition (GAIN) was launched by UNICEF, the BMGF (a major funder), Procter & Gamble, and the President of Zambia at the UNGA Special Session on Children. The main aim of this "alliance of public and private sector partners" was to lobby governments and the UN to "leverage cost-effective food fortification initiatives" to achieve child wellbeing.¹⁶⁶

These initial events were followed by a total turn-around of the stakeholder discourse. Originally, the term had been created to argue that corporations should take into account not only their fiduciary duty to 'shareholders', but also the effect of their operations on a broader array of actors, the 'stakeholders.' In 2000, Kofi Annan defined stakeholders as: "those individuals and groups that have an interest, or take an interest, in the behaviour of a company (...) and who therefore establish what the social responsibility of a company entails".¹⁶⁷ However, two years later, in the run-up to the 2002 World Summit on Sustainable Development, a Novartis-funded publication redefined the term as: "those who have an interest in a particular decision, either as individuals or as representatives of a group. This includes people who influence a decision, or can influence it, as well as those affected by it."¹⁶⁸

How to raise the political profile of nutrition?

While these developments were taking place, criticism grew stronger with regards to the apparent inability of SCN constituencies to reach consensus and have a common and clear message to governments, funders and the public on what must be done to overcome hunger and malnutrition. Some proposed that the NGO constituency should become more pragmatic and present clear pathways for implementation, while others argued that food and nutrition demanded trans-disciplinary approaches and that simplifying the issue would lead to more failed initiatives. In reality, the debate had

deeper political roots: it was between adopting a comprehensive trans-disciplinary approach or a selective ‘either/or’ policy, with the latter aimed at de-linking nutrition from the structural determinants of poverty and malnutrition and emphasizing the urgency of medical and product-based interventions. At the same time, the presentation of four country case studies, at the 2005 SCN annual session in Brazil, demonstrated the viability of adopting food and nutrition strategies organically imbedded in the overall country development policy framework.¹⁶⁹

The language of ‘scaling up’ interventions had been coming up regularly in SCN debates since the mid-2000s, initially with the Ending Child Hunger Initiative (ECHUI, then renamed REACH - Renewed Efforts Against Child Hunger), which was jointly supported by the heads of FAO, UNICEF, WHO and WFP. It then appeared throughout a set of interventions to address undernutrition consolidated and budgeted by the World Bank and its allies, originally under the name of GAP (Global Action Plan).¹⁷⁰ The GAP initiative was the precursor of what was proposed as “evidence-based approach” in *The Lancet Nutrition series*¹⁷¹ and would later be known as Scaling Up Nutrition - SUN. The GAP was proposed to SCN, but the initiative did not manage to obtain the consensus of SCN constituencies. In particular, the NGO sector expressed strong criticism on the following grounds:

- Prioritization of the first 1000 days, from conception to two years of age, without embedding these in broader socioeconomic and public health interventions tackling key socioeconomic determinants;
- The bulk of the budget for implementation of the proposed action plan was allotted to product-based supplementation, targeting children with acute malnutrition; and
- Exclusive focus on undernutrition and lack of adequate attention to other nutritional disorders.

The prioritization of the 1000 days had originally been described in SCN’s 2020 Commission Report,¹⁷² in which it was clearly contextualized within a person’s life cycle and with consideration of the social, economic, political

and cultural determinants of malnutrition. This perspective, however, had been surgically removed from the GAP (and, later, SUN).

A political shift of gears in the UNSCN

As earlier mentioned, one of the contentious issues in the SCN debates was the participation of the private sector in the SCN. The interim *Draft Private Sector Engagement Policy* was never implemented. Instead, in 2006, Ann Veneman – at that time Executive Director of UNICEF (2005-2010) – took on the chairpersonship of the SCN and brought major structural changes to its work. It is worth noting that, prior to being selected by US President George W. Bush to lead UNICEF, Veneman was one of the negotiators of the North American Free Trade Agreement (NAFTA).¹⁷³ She also worked for Calgene, the first company to register a genetically modified seed, and was secretary of the US Department of Agriculture (USDA). In 2011, Veneman became a member of Nestlé’s Board of Directors.¹⁷⁴

Veneman was a strong advocate of private sector involvement in nutrition and in the SCN, particularly in the context of product-based interventions, such as Ready to Use Therapeutic Foods (RUTFs).¹⁷⁵ Such interventions faced criticisms within the SCN, in particular from the Breastfeeding and Human Rights and Ethics groups, especially when promoted as treatment for moderate malnutrition. The Veneman period also marked the increased involvement of the BMGF in nutrition. In 2007, the BMGF took the step of deciding to fund *The Lancet series* on Maternal and Child Nutrition, with the objective of setting the nutrition agenda for the future. The process towards elaborating the series further strengthened the schism in the SCN community. The content was seen by many nutritionists as partial, and the exclusion of the socio-economic determinants-based public health interventions framework, was heavily criticized.¹⁷⁶

The Lancet series suggested that the international nutrition governance system (mainly the SCN) was broken, lacking leadership, resources, and a clear and consistent message. Based on this conclusion, Veneman, with the support of the BMGF, carried out an external evaluation

of the SCN. The results of this evaluation, led by Tufts University and carried out without prior discussion with the full Steering Committee, were briefly presented at the plenary of the 2008 SCN annual session in Hanoi, Vietnam, under the protest of different SCN constituencies.¹⁷⁷

Following the outcomes of the evaluation, support to the SCN, which had already been discontinued by the WB and WFP, was also ended by UNICEF. Faced with the impossibility of reaching consensus on the GAP and the participation of the private sector, the US, the intergovernmental organizations under the US sphere of influence (e.g. UNICEF, WFP, WB and IMF), and the private sector foundations (BMGF and UN Foundation) had all decided to discontinue their support to the SCN, leading to its deactivation.¹⁷⁸

The last SCN annual session took place in March 2008, in the midst of the food price volatility crisis of 2007-08. Contradictorily, less than a month later, the UN Secretary General established a High-Level Task Force on the Global Food Security Crisis (HLTF)¹⁷⁹ to tackle the grave situation.¹⁸⁰ Food riots erupted in more than 30 countries, with serious political implications, including the unleashing of the so-called Arab Spring. One month later the G8 launched a PPP initiative called Global Partnership for Agriculture and Food Security,¹⁸¹ with a strong participation of the corporate sector.

The food crisis eventually reconfirmed the need for inter-governmental food and nutrition security policy spaces. The CFS, for instance, was reformed (2008/09) and its mandate strengthened.¹⁸² The FAO's reform highlighted the need to strengthen the links between agriculture, food and nutrition.¹⁸³ The SCN, however, was silenced and left dormant, its lively annual sessions and working groups clamped down.

The rise of SUN and its search for an institutional home

The initial World Bank proposal for scaling up nutrition under the name of GAP was reworked into a new proposal: the Scaling up Nutrition Initiative with its SUN Road Map.¹⁸⁴ Described in its early days as "a sound, principled, people-private-public partnership[s] that

empower[s] societies for optimal nutrition",¹⁸⁵ SUN's main premise, as with GAP, was that technical (apolitical) interventions of global consensus should be focused on in order to galvanize donor funding for nutrition. This stood in direct contrast to the holistic 2008 SCN plenary recommendations on accelerating the reduction of maternal and child undernutrition, which contemplated the need for both emergency action and long-term structural interventions,¹⁸⁶ but were disregarded when the SCN's work was curtailed. Notably, SUN was supported by the same international organizations and funds that had withdrawn their support to the SCN (such as the WB, UNICEF and WFP); and it came to occupy the vacuum left by the SCN. The downscaling of the SCN had also brought civil society and social movements to redirect attention to the spaces where food security policies were being actively discussed and decided, such as the HLTF and the CFS. However, these spaces tended to view nutrition as a technical issue and placed it, once again, at a second level of relevance.

Already in 2011, SUN had become more institutionalized, with a coordinator, a small secretariat and multiple constituencies (civil society, donors, UN agencies and the private sector), that were supposed to collaborate in the support of country-led, multi-sectoral strategies to combat undernutrition.¹⁸⁷ In 2012, a Lead Group was instituted at the annual SUN Movement Global Gathering. The following quotes from David Nabarro, Coordinator of SUN at the time, expose SUN's attempt to take the lead in reshaping the global nutrition agenda by silencing opposing voices:

The big challenge is how to converge and energize actions for nutrition without precipitating discord. We cannot have discord, there is too much at stake. We need to ensure that the technical support comes together at all levels, and everybody in this room knows how hard that is to do. We need to provide a clear, tangible, open and credible intuitional framework within which action is taken forward. If the donors are going to come up with significant additional resources, they need to believe that we have something that is credible and is not going to fall apart within a few weeks or months.¹⁸⁸

And by seeking a formal institutional home that could legitimize its existence:

After the end of September 2010, it was clear that we needed to do something, but there was discussion about whether or not having a transition team that was not anchored in some kind of global institution was legitimate. Then, it was clear we needed to link together the UNSCN secretariat and a number of other stakeholders in order to make sure that we had a way of moving forward. But we put a very tight time limit on it. At the end of June 2011, we have to find an institutional home for the SUN work.¹⁸⁹

But SUN did not find this home in the SCN and has continued to navigate the orbit of the UN Secretary General until today, after the formal establishment, in 2012, of the secretariat of SUN under the Secretary General's auspices.¹⁹⁰ Along the same line, the present coordinator of the SUN initiative, Gerda Verburg, enjoys the rank of UN Assistant Secretary General.

The private sector sneaks in through the CFS and WHO reform

Following its 2009 Reform, the CFS had incorporated the formal participation of the private sector through a Private Sector Mechanism.¹⁹¹ The World Health Organization (WHO) Reform, which started in 2010, established a new framework for engagement with external actors that lumped together, as Non-State Actors (NSA), the private sector, non-governmental organizations, academia and philanthropic foundations.¹⁹² This represented the acceptance of the active participation of the private sector in WHO public policy discussion and deliberation, in equal standing with civil society organizations. GAIN and BMGF were among the first to be accepted in 2016 into "official relations status" with WHO under this new framework. During the accreditation process, GAIN's role as a front organization for the interests of its private sector constituency – consisting of close to 150 Transnational Corporations – was pointed out. Two weeks before the decision was to be taken, GAIN simply transferred its business platform to SUN's Business Network, which it co-facilitates.

Despite the discomfort of several WHO Member States, GAIN's hastily revised application was accepted.

Reclaiming the nutrition agenda: ICN2 and new calls on CFS and SCN

During the Second International Conference on Nutrition (ICN2), held in Rome in November 2014, an internal UN memo was leaked. In anticipation of the launch of the "UN Nutrition SUN Network Secretariat" to be hosted by WFP, the heads of the concerned UN agencies requested the formal closure of the SCN, without any formal consultation with the ECOSOC. This appeared to be the last attempt of SUN to find an institutional home. The closure of the SCN could be halted, avoiding the total hegemony of SUN within the UN process related to nutrition. While the SUN UN Nutrition Network established its secretariat within the WFP, it had to recognize the role of the SCN.

The fears that many felt over the possible consequences of SUN's takeover of the nutrition agenda were clearly formulated already in 2010 by a nutrition professor:

I assume the vast majority of the 7\$ billion that (it) budgets for therapy, including moderate malnutrition, will go for Plumpy'Nut type products. The SUN document is thus moving nutrition into the realms of vaccination and oral rehydration, wherein most of the money can be spent on products instead of salaries, which nearly all donors are uncomfortable with. I suspect this is a major reason for the new donor attention it is inspiring. Maybe robots could be manufactured locally to deliver it, further reducing that pesky need for capacity building.¹⁹³

Civil society, in its declaration to the ICN2, proposed the CFS as the overarching intergovernmental policy space to harmonize and coordinate food and nutrition policies.¹⁹⁴ They suggested that WHO and FAO governing bodies coordinate the normative, regulatory and standards setting initiatives for food and nutrition. As CFS gained importance in international nutrition governance, there was an immediate attempt to increase SUN's visibility and role in the CFS.¹⁹⁵ The first draft of a

document outlining the future role of the CFS in nutrition, prepared by the CFS secretariat in early 2015, was clearly influenced by this and focused to a large extent on how the CFS could strengthen SUN.¹⁹⁶ In her farewell speech at the 2015 CFS Plenary Session, Gerda Verburg, at that time chair of CFS as well as Chair of the Global Agenda Council for Food and Nutrition Security of the WEF¹⁹⁷, openly acknowledged and thanked the BMGF for funding her personal assistant and supporting the work of the CFS on nutrition.

In January 2015, the UNSCN secretariat was transferred from WHO to FAO headquarters. The survival of SCN should have helped achieve balance in the international and national food and nutrition agenda. Prior to 2008, the SCN coordinator had enjoyed equal standing with the directors of the nutrition divisions of the major UN agencies.¹⁹⁸ Now, however, SCN had to report to FAO's Nutrition Division (later renamed Nutrition and Food Systems Division). A year later, in March 2016,

UN Secretary General Ban Ki-moon announced the nomination of Gerda Verburg as the new coordinator of the SUN Movement.¹⁹⁹



In conclusion, the recent evolution of global nutrition governance confirms the unfolding dynamics, well-articulated within WEF's Global Redesign Initiative,²⁰⁰ of progressively transferring governance of "conflicted policy areas" from multilateral intergovernmental spaces to multi-stakeholder ones, which are strongly influenced, if not led by private sector agendas and interests.²⁰¹ Many would argue that this places market interests over human rights and exposes marked deficits of public participation and democratic accountability, given the active exclusion of dissenting voices and the bypassing of existing intergovernmental food and nutrition policy spaces, such as the CFS, the World Health Assembly and the FAO Conference.

**Chapter 4: SUN's Influence on Nutrition
Policy at Country Level: The Cases of
Uganda, Guatemala and India**

This Chapter presents the key findings that emerged from the assessment of SUN's influence on nutrition policies, strategies and governance in selected SUN countries and states, namely, Uganda, Guatemala and India (Uttar Pradesh, Maharashtra and Jharkhand)²⁰². The findings are based on observed changes in the countries/states since they joined SUN and the perceived influence of SUN and its members in these. They must be read in light of the limitations and challenges laid out in the Introduction.

SUN has without doubt raised the profile of nutrition, not only at global but also at national level in situations where it had been low on the government agenda. Among the countries reviewed, this has certainly been the case for Uganda. It may also be said that it has in such cases opened up spaces for discussing nutrition

that may not have been there before and which may remain the only spaces for civil society to engage in nutrition policy discussions. This is a positive contribution. At the same time, human rights scrutiny requires a deeper look into the type of actions and agendas promoted under the umbrella of tackling malnutrition and the (potential) impacts these have in terms of advancing the right to food and related rights. It also requires a critical assessment of the spaces for participation that have been created, including who participates and under what conditions. This is what this Chapter intends to do.

The Chapter will first provide some general information about SUN in the countries reviewed, including the alignment and commitment to SUN. It will then present the five key findings that emerged from the research.

SUN in Uganda

"On 17 March 2011, the Republic of Uganda joined the SUN Movement with a letter of commitment from the Chairperson of the National Planning Authority, Kisamba – Mugerwa. At the time, Uganda was improving its Action Plan for Nutrition by incorporating lessons learned during the conference organized by IFPRI on the use of agriculture to improve nutrition and health."²⁰³

Nutrition interventions in the country are coordinated by the Office of the Prime Minister. Eight government sectors/ministries are involved: Public Service; Agriculture, Animal Industries & Fisheries; Health; Education & Sports; Trade and Cooperatives; Gender, Labour & Social Development; Local Government; and Finance, Planning & Economic Development. Membership of the SUN Multi-Stakeholder Platform involves the above mentioned government sectors, academia, UN agencies, the private sector, and civil society.

Uganda affiliated itself to SUN in 2011. The National Planning Authority spearheaded the development of the Uganda Nutrition Action Plan 2011-2016 (UNAP)²⁰⁴

in alignment with SUN's framework and strategy. The coordination of the different sectors in the implementation of the UNAP was placed under the Office of the

Prime Minister (OPM). More recently, the OPM initiated the process to review and update the Uganda Food and Nutrition Policy (2003) into a new policy, the Uganda Food and Nutrition Security Policy (draft FNS Policy, 2017)²⁰⁵. The draft FNS Policy is aligned to several international commitments, including the ICN2 outcomes (Rome Declaration) and the SUN framework. There is also a process underway to develop the second Uganda Nutrition Action Plan 2018-2025 (UNAP 2).

According to government officials, SUN's framework was adopted because it was considered comprehensive and had all the requisite planning, implementation, monitoring and evaluation, as well as accountability tools in place.²⁰⁶ SUN members, such as UNICEF, Nutrition International (formerly Micronutrient Initiative), and USAID, have been actively involved in the development and funding of nutrition related policy documents.²⁰⁷

The alignment of Uganda's nutrition policy and action plan to SUN is not surprising in a context where the entire national nutrition budget – apart from government salaries – comes from donors who promote SUN.²⁰⁸ The strong influence of international donors created by this financial dependency has become institutionalized with the establishment of the Development Partner Nutrition Coordination Committee under UNAP, which provides policy guidance on the "alignment of nutrition programmes to the global and regional nutrition agenda".²⁰⁹

There have been expectations by the Ugandan Government that funding would come in through SUN for a policy area (nutrition) that has been chronically underfunded. However, such funding has not materialized. Most interventions to tackle malnutrition promoted by SUN (see Key Finding 1) are implemented through SUN members' own structures without channelling funds through the Government. In essence the Government plays a facilitator role for nutrition actions in the country, as illustrated by the overarching goal of the draft FNS Policy: "strengthen an enabling environment for all actors to develop and implement programs that eliminate malnutrition in Uganda".²¹⁰

This overarching goal resembles SUN's strategic objective number one: "expand and sustain an enabling political environment".²¹¹

Whereas there is strong buy-in on the part of the OPM, scepticism has been voiced by sectoral ministries (e.g., agriculture and health) about the ability of SUN's approach to make an impact on nutrition in the country.²¹² Concerns relate in particular to the technical nature and lack of sustainability of the interventions promoted. These are considered to be expensive and mostly implemented outside established structures, thereby introducing dependency on donor priorities and funding.²¹³

SUN in Guatemala

“On 7 December 2010, the Republic of Guatemala joined the SUN Movement with a letter of commitment from the Vice Minister of Health. At the time, Guatemala’s National System for Food Security and Nutrition was recognized as a model for multi-sector, multi-stakeholder food and nutrition security governance in the Latin American region and political commitment to nutrition was coming from the highest possible level. In 2012, as part of his “National Agenda for Change” President Otto Perez Molina vowed to tackle malnutrition through his National Zero Hunger Pact. Under this Pact, the President had committed to reducing chronic malnutrition in children under five years of age by 10 percent before the end of his Presidential tenure.”²¹⁴

The SUN Multi-Stakeholder Platform includes members from the government²¹⁵, civil society²¹⁶, the private sector²¹⁷, donors²¹⁸, and the UN²¹⁹.

When Guatemala joined SUN in 2010, the country already had a comprehensive normative, policy and institutional structure in place to address malnutrition. Interventions to address chronic malnutrition date back to 2005²²⁰ with the adoption of the National Policy on Food and Nutrition Security (PSAN)²²¹, based on Article Two of the Guatemalan Constitution²²², and the legal establishment of a national food and nutrition security system (SINASAN law)^{223, 224}. In 2011, the project *País en el marco de SUN* (Country in the framework of SUN) was elaborated.²²⁵ In this context, in 2012, the *Pacto Hambre Cero* (Zero Hunger Pact) was signed and the *Ventana de los Mil Dias* (1000 Days Window) declared a national interest by Governmental Accord 235-2012.

While the 1000 Days Window strategy has been adopted in the context of the country’s affiliation to SUN, measures contained under the strategy had already been defined and implemented prior to the country’s membership in SUN.²²⁶ This was echoed by communities who reported that social programmes

had not changed in recent years.²²⁷ Therefore, while Guatemala explicitly adopted SUN’s strategy (under the 1000 Days Window), this did not lead to the introduction of new interventions. It did however reinforce the focus on the interventions contained under the 1000 Days Window to the detriment of interventions that address the structural causes of malnutrition and those targeted to other age groups (see Key Finding 1).²²⁸

While Guatemala’s President Jimmy Morales was a member of SUN’s international Lead Group until September 2019, this high-level commitment was not shared by all government institutions. According to an interviewee, the Secretariat for Food Security and Nutrition (SESAN), the national coordinating body for food security and nutrition, under its current leadership shows little interest in the SUN strategy.²²⁹ The last few years the strategy *per se* has brought in no additional resources that SESAN can control. Moreover, the SUN platform is considered a parallel and therefore duplicative structure of the SINASAN (see Key Finding 4).

SUN in India

Presently, India as a country is not part of the SUN initiative. However, at the time of research, three Indian states had joined SUN: Maharashtra, Uttar Pradesh and Jharkhand. Maharashtra joined SUN on July 24, 2013 with a commitment letter by Vandana Krishna, Director General of the Rajmata Jijau Mother-Child Health and Nutrition Mission (RJMCHN Mission).²³⁰ Uttar Pradesh joined SUN on May 12, 2016 with a commitment letter by Chief Secretary Alok Ranjan.²³¹ Jharkhand joined SUN on 7 September 2016 with a commitment letter by the Director General of the Jharkhand State Nutrition Mission, Ms. Mridula Sinha.²³² On January 15, 2019, a fourth Indian State, Madhya Pradesh, joined.

SUN regularly engages with government agencies, civil society and other nutrition actors, either directly or through partners such as the Emergency Nutrition Network (ENN).

In India, the affiliation of Uttar Pradesh, Maharashtra and Jharkhand to SUN in 2013 and 2016 does not appear to have had much influence on the policy making and priorities on nutrition in these states (see Key Finding 1).

Box 4.1

Waking up in a SUN Country

The case of **India** illustrates the lack of transparency and corresponding democratic decision making when countries join SUN. Based on information provided by the three state nutrition missions in response to Right to Information queries, there are no files in the government records pertaining to the important decision of each of these states to join the SUN initiative, nor was any memorandum of understanding between the respective states and the SUN secretariat signed. From the available information it appears that no political clearance for this international collaboration was granted.

As seems to be the general practice with countries joining SUN,²³³ in the three Indian states there was no attempt to debate the question of joining SUN in any democratic way, in state government, Parliament, state assemblies or other fora. The decisions were taken based on a commitment letter between a State official and a SUN representative.

Key Finding 1 : SUN promotes nutrition approaches favouring short-term medicalized and technical solutions, mostly focused on micronutrient deficiencies, rather than addressing the structural causes of malnutrition in all its forms

The premise of SUN is that if a set of 'evidence-based' direct nutrition interventions can be agreed upon, donors will be willing to fund them, and they can be "scaled-up".²³⁴ The BMGF-funded 2008 *Lancet Series* on Maternal and Child Undernutrition, re-evaluated in 2013, forms the basis for the interventions promoted by SUN.²³⁵ It proposed 10 nutrition-specific interventions to eliminate 45% of deaths (3.1 million lives) and 20% of stunting among poor children younger than 5 years.²³⁶

The "First 1000 Days" (from a woman's pregnancy to her child's second birthday) is seen by SUN as a window of opportunity for optimal nutrition and presents the core of the initiative's approach to nutrition. The assumption is that by targeting pregnant women and children during this critical time, the intergenerational cycle of malnutrition can be interrupted and "every child, adolescent, mother and family can realise their right to food and nutrition, reach their full potential and shape sustainable and prosperous societies."²³⁷

While SUN in recent years has recognized the importance of other forms of malnutrition, i.e., overweight and obesity, the focus of its strategy and practice remains on undernutrition, and more specifically on stunting.²³⁸ Measures promoted by SUN and its members to reduce stunting entail so-called *nutrition-specific* (direct) and *nutrition-sensitive* (sectoral) interventions. There is a clear emphasis on nutrition-specific interventions that address some of the immediate causative factors of malnutrition.²³⁹ These include medicalized interventions for the fast treatment of severe undernutrition and micronutrient deficiencies, such as RUTF, micronutrient supplements, and fortification of food (i.e., adding of micronutrients to food).

Hence, while SUN's stated vision and the collective belief that drives the initiative, and around which it galvanizes support, is broadly framed and far reaching (realization of the right to food and nutrition), the actual scope of its promoted interventions and the impacts they can possibly achieve is indeed much narrower (largely product-based interventions that address immediate causes within a limited population group).

The following section describes the policy trends and current practice observed in the case countries, and in how far these resemble / appear to be influenced by SUN's approach to nutrition.

COI in The Lancet Series on Maternal and Child Undernutrition

IBFAN published several critiques that two lead authors of the 2013 series were members of Nestlé’s “Creating Shared Value Advisory Committee”; that the majority of proposed interventions involved fortified products and supplements of some kind; and that the private sector was called on to generate “evidence about the positive and negative effects of private sector and market-led approaches to nutrition.”^{240 241} The authors responded with clarifications that they did not “consider [membership of the Nestlé Committee]... a conflict per se, but rather a much needed contribution of independent scientists to assist a corporation to fulfil its stated commitment to address local and global issues in nutrition, water, rural development, and environmental protection”.²⁴²

In **Uganda**, a policy trend can be observed in recent years towards an increased emphasis on micronutrient deficiencies and the promotion of medicalized and technical approaches to nutrition. Whereas the Uganda Food and Nutrition Policy of 2003 recalled State obligations on the RtAFN and was centred on the prevention of malnutrition and promotion of good nutrition, using locally available resources, the Uganda Nutrition Action Plan 2011-2016²⁴³ and the draft Food and Nutrition Security Policy (2017)²⁴⁴ place a much stronger emphasis on the management of malnutrition through product-based, medical interventions, especially the scale-up of RUTF.²⁴⁵

The recent policy emphasis on RUTF was also observed during interviews with health workers at the National Nutrition Rehabilitation Unit, *Mwanamugimu*. While

health workers identified poor or inadequate feeding and caring practices as the main causes of malnutrition among children, the funding and most interventions in the Unit²⁴⁶ were found to be based on the provision of RUTF and F100 formula, with some training of mothers on how to enrich foods.²⁴⁷ The imported RUTF was provided to the Unit by UNICEF, chair of SUN’s international lead group.²⁴⁸ At the same time, informants noted a shift in donor priorities (UNICEF, USAID) that had led to reduced funding for basic breastfeeding training for health workers. Without support for re-lactation, skin-to-skin, kangaroo care, etc., mothers with children below six months, who cannot receive RUTF, are left without help, many believing that they do “not have enough milk”.²⁴⁹

Ready-to-use therapeutic foods and global trade²⁵⁰

According to WHO, undernutrition such as wasting, stunting and micronutrient deficiencies, increases the risk of morbidity and early deaths for mothers, infants and young children, as well as impaired physical and mental development in the young child. WHO also estimates that around 45% of deaths among children under 5 years of age are linked to this form of malnutrition.

A large range of nutrition-related products have been developed to prevent and treat undernutrition (i.e. RUTFs, therapeutic-formulas, micronutrient powders and supplements). While WHO and UNICEF still emphasize the importance of breastfeeding, bio-diverse and culturally appropriate foods, there has been an increased emphasis on product-based approaches as the first option since the emergence of SUN.

In 2014, UNICEF, the world's largest purchaser of RUTF, proposed that the FAO/WHO Codex Alimentarius Commission, the UN body that sets global standards for food safety, composition and labelling, should develop a global standard for RUTF to help national governments "regulate the market and the production facilities in their countries". UNICEF's proposal was rejected by developing countries²⁵¹ who highlighted the risk that a standard would fuel commercial interest; increase the pressure on countries to accept these products; and divert development funding to curative, temporary 'quick fix' solutions rather than sustainable preventive approaches (breastfeeding, community support for home-prepared nutritious foods). The European Union also questioned whether it was appropriate for Codex to discuss a product that was being presented as a medicine.²⁵² As a consequence, UNICEF called for a 'guideline' (which carries similar risks) and Codex has continued on that basis.²⁵³

The difficulty of achieving essential safeguards (reductions in free sugars, prohibitions on additives, flavourings, and promotions, etc.) has demonstrated that Codex is not the appropriate forum to discuss products for malnourished children.²⁵⁴ Typically, over 40% of participants represent the food and agriculture industries, so Codex texts – based on consensus rather than evidence – are inevitably a compromise between marketing needs and the protection of public health. Codex has, for example, substantially weakened organic standards and 'green lit' many GM foods, food additives, pesticide residues, synthetic hormones and other intrinsically unhealthy food components.²⁵⁵ Nutriset, the French manufacturer of the world's biggest RUTF brand, Plumpy'Nut (a peanut paste containing approx. 25% sugar) has been a major player in the discussions and, until 2019, sat on the French Delegation during Codex meetings on the topic.²⁵⁶

In 2018, there was an unsuccessful attempt to include RUTF on WHO's List of Essential Medicines for Children (EMLc).²⁵⁷

The 1000 Days Window strategy, launched in 2013, is at the heart of the **Guatemalan** nutrition strategy. According to interviewees, it is the only component under the Zero Hunger Pact that has been implemented and promoted in practice.²⁵⁸ The 1000 Days Window strategy contains ten interventions, with a strong emphasis on medicalized and product-based approaches:²⁵⁹

1. Promotion of and support for breastfeeding
2. Improvement of complementary feeding from six months of age
3. Improvement of hygiene practices including handwashing
4. Vitamin A supplements
5. Zinc supplements for treatment of diarrhoea
6. Provision of micronutrient powders (“chispitas”)
7. Deworming and vaccination of children
8. Iron and folic acid supplements for prevention and/or treatment of anaemia in pregnant women
9. Iodized salt
10. Fortification of food²⁶⁰

Even the second intervention, improvement of complementary feeding, consists in essence in the provision of nutritionally-enriched food products to poor pregnant

and lactating women and children below the age of two, accompanied by nutrition counselling.²⁶¹

Several interviewees criticized the strategy for being primarily reactive and failing to be accompanied by measures aimed at prevention that address the structural causes of malnutrition, and go beyond the first 1000 days.²⁶² While the 1000 days were considered important, parallel measures addressing the structural causes were considered crucial by interviewees in a context where 60% of the population live in poverty, public services fail to reach communities, there is lack of employment and access to land (with 4000 cases of unsolved agrarian conflicts), and the dominant development model tends to result in wealth concentration (see Box 4.4).²⁶³ The current strategy, it was noted, reduced nutrition to the ‘purely nutritional’ and to the rescue of severely malnourished children (emergency and welfare-oriented approach) instead of putting in place a comprehensive strategy for advancing the right to food and preventing this situation from continuing on a long-term basis. According to interviewees, the political goal of a 10% reduction in chronic undernutrition in four years has resulted in medicalized and food-based interventions that are not well founded but are thought to be more likely to bring immediate results.²⁶⁴

Box 4.4

Structural causes of malnutrition in Guatemala and the failure of public policies to address them

Guatemala – a country rich in natural resources – holds the highest prevalence in chronic malnutrition among children below the age of five in Latin America and the sixth highest in the world. Nearly every second child under five²⁶⁵ and 38% of first graders (between six and nine years)²⁶⁶ are affected by chronic malnutrition. Indigenous children are disproportionately affected by malnutrition, which bears testimony to persisting historic and structural discrimination in the country. This situation has changed little in past years²⁶⁷ and is largely a result of the imposition of an economic development model based on agricultural exports which has placed small-scale food producers as providers of cheap labour for sustaining large farms. Land distribution is highly unequal with nearly two-thirds of arable land occupied by only 2% of farms for cash crops.²⁶⁸ Meanwhile small-scale food producers (making up 82% of farms) produce 92%

of food consumed in the country²⁶⁹ on only one-sixth of the arable land.²⁷⁰ In this context, it should be noted that violence and criminalization against human rights defenders, in particular against indigenous and peasant leaders defending land, territory and natural resources, as well as the collective rights of indigenous peoples, have reached alarming rates over the past years.²⁷¹ Other key causes of malnutrition include widespread poverty²⁷² and extreme levels of inequality²⁷³; violations of women's rights; lack of employment and low wages; lack of access to clean water and sanitation²⁷⁴; and inaccessibility and poor quality / malpractice of public health services²⁷⁵. As a result, 37% of all households were classified as either moderately or severely food insecure in 2017, and only 22.7% as food secure.²⁷⁶

The failure of government policies to address the structural causes of hunger and malnutrition, including the lack of access to resources and historic discrimination, is illustrated by the paradigmatic cases of five Chortí indigenous children of the municipality of Camotán in Eastern Guatemala: in 2011, their mothers filed lawsuits against the State claiming that the RtAFN of their children was being violated as they suffered from malnutrition. In 2013, the competent regional court declared that the State of Guatemala had not only violated the RtAFN, but also the right to life, health, education, housing, and work of the children and their families. The judicial sentences, later confirmed by the Constitutional Court, ordered that various State agencies take a wide range of measures to remedy the damages and realize the rights of both the children and their families. These measures included providing food assistance, micronutrients and other supplements, but also ensuring employment opportunities and access to land for their parents to be able to grow food to ensure complementary, adequate nutrition for their families. The cases of Camotán, paradigmatic of the situation of thousands of children in Guatemala, have received international and regional attention as a milestone in the justiciability of the RtAFN. However, several years later, the families' living conditions have not improved significantly – and one of the beneficiary girls even died, at the age of 8, in August 2017. The State's behaviour in relation to these cases reflects the general limited approach to tackling malnutrition: the measure most consistently implemented by authorities, despite gaps, was food assistance. Nonetheless, without access to land, water for irrigation, and technical support, several families were not able to grow food and feed themselves adequately and children continued to suffer from malnutrition. Without access to land, their right to adequate housing and sanitation could also not be realized, which contributed to poor hygiene conditions and, ultimately, to the death of the 8-year-old girl.²⁷⁷

More specifically it was noted that each of the ten interventions under the 1000 Days Window strategy have been implemented in an isolated fashion and not as a package, which reduced their impacts.²⁷⁸ Moreover, the coverage of the programme has in recent years become more and more geographically limited²⁷⁹ and

by focusing on the 0-2 age group²⁸⁰ more population limited.²⁸¹ Interventions carried out under the strategy have also been mainly in the area of health and lacked integration or at least coordination with other measures to strengthen food and nutrition security (e.g., social protection programmes).

Community members noted that the only public service available was the health centre, which did little more than encourage parents to give vaccinations to their children (prenatal services were not offered).²⁸² The health services for children consisted in measuring their weight for height and distributing vitamin A and iron supplements.²⁸³ Community members moreover reported that medicines were often unavailable at health centres, and they had to buy them themselves from the pharmacies, particularly vitamins and antibiotics (no one mentioned the names). Some reported receiving 'chispitas' (micronutrient powders) at times in the health centre. No reference was made to interventions that supported breastfeeding and complementary feedings (two top interventions of the 1000 Days Window strategy).²⁸⁴

In the case of **India**, on the basis of information published or received through Right to Information requests, no changes were found in the nutrition approach of the three Indian states based on their affiliation to SUN. Government nutrition programmes have

been in place beforehand in all three States and partially very successful.²⁸⁵ Most of the funds for the nutrition programmes come from the Indian government, and very little is coming from external donors.²⁸⁶ So far none of the states have received any substantial support from the SUN initiative in terms of policy making and programme implementation. Activities related to SUN seem to consist primarily of participation in online discussions and meetings in different parts of the world and the preparation of write-ups for the SUN website.²⁸⁷

While SUN as such does not seem to have impacted much on the states' nutrition programmes, it appears that the initiative's key international members have been influential in shaping interventions. The State Governments of Maharashtra and Jharkhand receive technical support for their Community-based Management of Acute Malnutrition (CMAM) programme from UNICEF. Both of them have used RUTF in their programme,²⁸⁸ despite the Government of India's position not to use RUTF for the management of Severe Acute Malnutrition (SAM).²⁸⁹

Box 4.5

No attention to overweight and obesity, and related NCDs

In **Uganda**, non-communicable diseases (NCDs) resulting from overweight and obesity feature only marginally in the current government policy and action plan on malnutrition, despite it becoming a major public health concern in the country.²⁹⁰ The draft FNS Policy contains a bullet point on this with no further information, indicating the scant importance attributed by the Government to this form of malnutrition and the lack of a holistic approach to nutrition.²⁹¹ Equally UNAP contains no single point on measures (including regulatory) to reduce the consumption of unhealthy, ultra-processed foods and only marginally touches on the promotion of non- or minimally processed foods.²⁹² According to the focus group discussions, ultra-processed foods are being promoted by vendors through moving trucks with loud speakers and were widely available in most shops in the capital city.²⁹³ Such foods were mainly used as snacks for young children.

Despite notable increases in chronic diseases caused by overweight and obesity in **Guatemala**,²⁹⁴ interventions have largely focused on undernutrition and micronutrient deficiencies (1000 Days Window) with little attention on measures to tackle overweight and obesity. Communities

mentioned that the consumption of junk food is increasing at alarming rates and that nothing is done about it. The school feeding programme, which the Ministry of Education is including as an advancement under SUN, leaves much to be desired in terms of a healthy diet. For example, in one school it was observed that instant soup was being provided to children for lunch.²⁹⁵ Commercial distribution channels of ready-made foods and drinks extend into the smallest communities. Advertisements are no longer needed – the people have become used to consuming these products, which are often bought for their social status.²⁹⁶

Recently, soft drinks and ready-made food (instant soups) have been added to the Basic Food Basket²⁹⁷ which is based on consumption patterns and expenditure and, in theory, is meant to be used to adjust the minimum wage level (though this does not happen in practice).²⁹⁸ This shows the ineffectiveness and contradictions of public health policies that fail to base minimum wages on what is actually needed for a nutritious diet.

The private sector foundations/networks that participate in the SUN Guatemala Multi-Stakeholder Platform include among their members and (funding) partners companies with a clear divergent interest when it comes to the regulation of unhealthy foods. This includes in particular the Guatemalan sugar industry (e.g., Azúcar de Guatemala and FUNDAZUCAR)²⁹⁹ and companies promoting ultra-processed food products and snacks (e.g., Nestlé, PepsiCo, Domino's)³⁰⁰.

Key Finding 2 : SUN's nutrition-sensitive interventions promote high-input intensive agriculture, including biofortified crops, that primarily benefits the agro-industrial food system

In the area of agriculture, SUN members have been primarily advancing technical approaches. This includes in particular the promotion of biofortified – including genetically-modified – crops with enhanced nutritional qualities.

Nutrition-sensitive interventions in the context of SUN are sectoral interventions that impact on nutrition.³⁰¹

Box 4.6

Biofortification³⁰²

Biofortification is a method of crop breeding whereby specific nutrients³⁰³ are increased or become more bio-available through a range of means such as conventional selective breeding, genetic engineering or other technologies.

IFPRI, an agricultural research centre of CGIAR, a partnership of 3000 governments, academic institutions, private corporations, and NGOs, claims that biofortification is “one of the most promising new tools in the fight to end malnutrition and save lives” and that it addresses “the root causes of micronutrient malnutrition, targets the poorest people, uses built-in delivery mechanisms, is scientifically feasible and cost-effective, and complements other on-going methods of dealing with micronutrient deficiencies”.³⁰⁴

Since 2014,³⁰⁵ IFPRI, initially supported by the United States, Zimbabwe, and Uganda (both SUN members) and South Africa, has been promoting a definition of biofortification at the Codex Alimentarius Nutrition Committee (CCNFSDU). Member States and observers have been sharply divided in their responses to IFPRI's proposal. The EU, IBFAN and others opposed it, arguing that:³⁰⁶

- in Germany the term 'bio' refers to organically produced foods and products so the term Biofortification would not be permitted by law in the EU;
- the term 'Biofortified' is a misleading nutrient claim for which there is no criteria and which furthermore can cover genetic modification;
- IPRI's claims that Biofortification radically reduces malnutrition are not substantiated by credible evidence;
- over-emphasis of the single nutrient approach runs counter to national nutrition policies and UN recommendations for food-based, bio-diverse approaches; and,
- Biofortification is a costly technology favoured and controlled by global agricultural industries.

At the Codex Labelling Committee (CCFL) in Canada in May 2019³⁰⁷ many member states, including the EU, India, Russia, Chile, Mexico, New Zealand, Panama, Nigeria and even the US, proposed to stop the work. This was confirmed at the nutrition meeting in November 2019, when no country except Zimbabwe spoke in its favour.³⁰⁸

A guidance booklet for SUN business members from 2011, the *Private Sector Engagement Toolkit*³⁰⁹ has illustrated the type of agricultural interventions promoted by SUN. The three public-private partnerships presented as examples for nutrition-sensitive interventions in agriculture are geared towards the promotion of commercial, including hybrid and genetically modified,³¹⁰ seeds and fertilizer, and the integration of small-scale food producers into production chains.³¹¹ None have a direct impact on the nutritional status of those who grow the crops or the local population more broadly. However, it is assumed that the interventions would increase incomes and create jobs, and that this would, in turn, lead to improved nutrition.³¹² Nutrition plays a direct role only in the PepsiCo-Peru project. Here, small-scale farmers grow nutritionally-enhanced potatoes which are then converted by PepsiCo's Frito Lay into the "best snacks on earth".³¹³

Little attention is placed by SUN on approaches that promote agroecology to improve nutrition. Nor on strategies that more broadly strengthen the rights and sovereignty of small-scale food producers, in particular of women, *inter alia* by protecting and enhancing their access to land and natural resources, access to basic public services, and the promotion of local and regional food markets³¹⁴. Where programmes target small-scale food producers this is, as exemplified by the private sector engagement kit, primarily as recipients of biofortified seeds or to foster their integration into (global) markets / production chains. This has also been observed in the country case studies as discussed below.

While SUN's strategy recognizes the important impact of food systems on nutrition, it does not analyse how food systems impact on nutrition, nor does it acknowledge the antagonism that exists between different types of food systems. Most food systems interventions promoted by SUN are based on and enhance the agro-industrial food system and its key players.³¹⁵ This stands in direct contrast with the international human rights framework, which requires priority to be placed on marginalized and disadvantaged groups, who are most affected by hunger and malnutrition (see Chapter 1).

In **Uganda**, technical approaches to address dietary deficiencies in particular biofortification have gained prominence in recent years, both in policy and practice. One of the specific objectives of the Uganda Food and Nutrition Policy (2003) was to diversify the production of food commodities to meet the nutritional needs of households. This was to be achieved amongst others through the popularization of under-exploited food crops and animal resources and the provision of user-friendly micro-financial services for small-scale food producers.³¹⁶

While UNAP 2011-2016 includes an intervention on the promotion of production and consumption of indigenous foods to enhance dietary diversification, it places a strong emphasis on the parallel promotion of "nutrient-enhanced foods" (biofortified foods, fortified foods, RUTF and complementary foods) as a key strategy for enhancing diverse diets.³¹⁷ The production of bio-fortified staple food crops is considered a "cost-effective community-based initiative" which has been identified as "priority investment area" for the country.³¹⁸ The draft Food and Nutrition Security Policy focusses on increasing production and consumption of "diverse high nutrient value foods", without further elaborating what this means and how this is to be done. The underlying conditions for communities to produce and acquire diverse and naturally nutritious foods, such as access to land/natural resources, protection of biodiversity, decent employment, and women's rights are not mentioned, nor captured by the proposed indicators for monitoring improvements.³¹⁹

According to key district informants, in practice hardly any deliberate support was provided to local foods, nor were positive local food cultures promoted and protected.³²⁰

*These [local food cultures] are being killed as the local foods are not promoted and supported. Persistent cultures are attacked. They are slowly dying out leading to malnutrition. There are some attempts to revitalise them through the annual food fair but not at national level.*³²¹

The production and consumption of biofortified foods on the other hand was heavily promoted as nutrition intervention (dissemination of the seedlings and education campaigns).

While the production of nutritious foods, including indigenous foods, is highlighted by the National Agricultural Policy (2013), the Operation Wealth Creation (OWC) under the same policy aims at transforming agriculture from subsistence to commercial,³²² with an emphasis on crops with high market value that can be traded globally. This has partly resulted in shifts in land usage towards large-scale commercial farming, detrimental to small-scale food producers and nutrition objectives.³²³

A key component of the National Agricultural Policy is the generation and dissemination of “appropriate, safe, and cost-effective agricultural technologies and research services”.³²⁴ SUN members play a key role in this. For instance, biofortified seeds (iron-rich beans and vitamin-A-enhanced sweet potatoes) are disseminated to farmers by USAID, the SUN donor convenor for Uganda,³²⁵ implementing partners, spearheaded by Harvest Plus^{326, 327} The National Agricultural Research Office (NARO) cooperates with the International Food Policy Research Institute (IFPRI)³²⁸ and has been channelling funds from the BMGF and USAID, including for research on the genetically-modified ‘super banana’.³²⁹ World Vision, a key corporate-funded NGO member of SUN,³³⁰ which until recently coordinated the Ugandan SUN CSA, has been at the forefront of promoting biofortified sweet potatoes and beans in the communities where it operates.³³¹

Notably, the promotion and dissemination of biofortified crops takes place without any regulatory framework in place to control marketing, safety and quality.³³² SUN members such as Harvest Plus and FANTA³³³ have, according to key informants, also lobbied for the inclusion of biofortification in the draft FNS Policy and the draft National Seed Policy.³³⁴ The OPM itself has lobbied for interventions such as biofortification as a “deliberate move to address SUN interventions”.³³⁵

In **Guatemala**, key government informants mentioned that in addition to the 1000 Days Strategy there are “nutrition-sensitive interventions” (agriculture, education, sanitation) but that little of this has been seen in rural areas.³³⁶ One example of such intervention is the dissemination of biofortified seeds (maize, beans) to small-scale food producers by the WFP, Co-Convenor of the Guatemalan SUN UN Agencies Network and of the International SUN Business Network.³³⁷ The WFP also procures maize from small-scale food producers for the “specialized nutritious food” (Super Cereal Plus or *Mi Comidita*)³³⁸ that it distributes to children below the age of two in support of the 1000 Days Window programme. At the same time, government programmes that support small-scale food producers with an emphasis on structural changes and promotion of agroecology, such as the “Programa de Agricultura Familiar para el Fortalecimiento de la Economía Campesina” (a programme that provides agricultural extension services to peasant families) have in recent years been scaled down.³³⁹ Programmes with an alternative focus, such as agroecology, tend to be introduced but then their funding discontinued, leaving them to exist only marginally.³⁴⁰

Key Finding 3 : SUN inspired interventions showed to have limited impact on reducing malnutrition while adversely affecting local food cultures and creating dependencies

Key informants in **Guatemala** highlighted that the 1000 Days Window strategy has had limited impact on the prevalence of chronic malnutrition, which remains unchanged over the years.³⁴¹ The discussions with communities affected by malnutrition clearly showed that from their perspective, malnutrition will not be tackled unless structural issues are made a priority in nutrition policies and programmes. They complained about the limited reach and assistentialist nature of government programmes. For example, it was highlighted that there is little point in raising awareness on the importance of personal hygiene such as hand-washing when families have no water in their homes, nor food.³⁴² Community members noted that breastfeeding was already a widespread custom in the community, independent of any social programme. They reported, however, that no food was available in the household to ensure adequate complementary feeding from six months of age onwards when children become malnourished.³⁴³ According to a doctor working with malnourished children, the

complementary food given to children over six months consists of coffee, bread and instant soup.³⁴⁴

The views expressed by communities were shared by most institutional informants.³⁴⁵ According to them, complementary policy changes and fiscal and social investment policies and programmes are needed, as well as reductions in illicit use of public funds. As pointed out by one key informant, the SUN strategy and its “short-term interventions” lack an integral view of all the components of food and nutrition security, and consequently at best contribute only marginally to the realization of the human right to adequate food and nutrition.³⁴⁶

It has been noted by CSO informants that while actions and resources for nutrition have remained the same, the country’s affiliation to SUN has fostered *assistentialism* (a charity approach).³⁴⁷ 1000 Days Window interventions are not complemented by actions that empower community members and increase their capacity to plan and implement autonomous actions based on self-determination. Rather they foster a dependency relationship between the community and these intervention programmes.

Box 4.7

Evidence-based? Lack of critical reflection and community involvement in assessing outcomes of interventions promoted

The fact that the 1000 Days Window strategy has had limited impact on the prevalence of chronic malnutrition in **Guatemala** provokes, according to key informants, little discussion among SUN organizations and institutions as to why this is the case and what needs to be done differently to achieve positive results.³⁴⁸ According to an NGO official, the political goal of 10% reduction in chronic malnutrition has resulted in interventions that bring only short-term immediate results.³⁴⁹ It was also considered to have led to biased reporting of results on the ground.³⁵⁰

It was repeatedly noted by informants in Guatemala that monitoring done under the SUN umbrella is not part of an independent evaluation.³⁵¹ Rather it is a self-evaluation done by the respective entities that compose the Multi-Stakeholder Platform.³⁵² This is particularly

problematic in light of the disconnect between achievements as reported under SUN and those perceived by affected communities, and the lack of participation within the national SUN civil society alliance by those groups most affected. It was also noted that parts of the universal SUN evaluation framework that is applied have little relevance in the case of Guatemala. For example, indicators deal with whether a policy and institutional framework for nutrition has been established. Such a framework already existed in Guatemala before it became a SUN country.³⁵³

Another critical observation by informants was that there is no follow-up to the recommendations for action that are generated through the evaluations.³⁵⁴ This calls into question the usefulness of these now annual self-evaluations (with dwindling participation by SUN members over the years), and the interest that the Government has in the SUN initiative.

The fragmentation of nutrition interventions and lack of transparency around them moreover inhibit the ability of communities to hold the government accountable with regard to the human rights compliance of these interventions (see Key Finding 5).³⁵⁵ It was also raised by some interviewees that reports on programme implementation were being invented as no one actually collected data in the field.³⁵⁶ Reported outcomes of different programmes are not shared with communities, which often do not know much about the programme(s) they participate in and what claims about their impacts have been made.³⁵⁷

The focus of the draft Ugandan FNS Policy on scaling-up technical approaches, such as micro-nutrient powders and (bio)fortification, rather than the diversification of diets, is surprising considering the poor evidence of efficacy of such products in reducing micronutrient deficiencies in **Uganda**.³⁵⁸ The draft policy contains a placeholder which assumes that micronutrient deficiencies have decreased in recent years, whereas the opposite has been the case.³⁵⁹ This creates the impression that interventions proposed in the policy have been decided without prior analysis of the nutrition situation and evaluation of the outcomes of past interventions.

In **Uganda**, interviews at district level and information gathered at the National Nutrition Rehabilitation Unit pointed to the human rights risks implied by a nutrition approach heavily reliant on medicalized, product-based single nutrient approaches, in the absence of safeguards to ensure appropriateness of medical interventions and avoid impact on indigenous food cultures and confidence in local foods.³⁶⁰

The provision of RUTF, which had become the core of interventions at the National Nutrition Unit (see

Key Finding 1), resulted in high dependence on processed products in the management of malnutrition and a reduction in confidence in home-prepared food. Respondents at the Unit stated that clients preferred the RUTF to local foods and tended to return to health facilities in search of more RUTF supplies, rather than utilize the local foods for further management.³⁶¹ According to key district level informants, some parents only fed their children RUTF but not any local foods until recovery^{362, 363} In the words of a district respondent:

*The use of therapeutic feeds provided has both advantages and disadvantages, the advantage is that it is nutrient dense, disadvantage is that the caretakers tend to rely so much on the supplies and ignore the locally available food which is more sustainable. There is a general belief that foods when well packaged can improve the nutrition status of malnourished children.*³⁶⁴

There is also an evident risk of spill-over and inappropriate use. A district political leader reported that in some districts in the drought affected Karamoja sub-region, families purposely let their children become malnourished to receive and sell RUTF for additional income. Such income was mainly used to purchase alcohol.³⁶⁵

The sale of the products to individuals who did not necessarily require them, also increased the risk of over-nutrition, which is currently on the rise among women of reproductive age as reported in the annual Food Security and Nutrition Assessment in the sub-region. According to one key informant, “some women purchase the RUTF so that they may gain more weight and look much healthier”.³⁶⁶

At the time when interviews were conducted there had been a stock-out both of RUTF (for outpatients) and F75

and F100 (for inpatients) at the National Nutrition Unit. During this time mothers of children in outpatient care were asked to bring food, so that they could be shown how to prepare them to treat their children. This was, however, usually not successful due to lack of financial resources. This illustrates – just as the case of handwashing raised by communities in Guatemala – the limited impact of interventions aimed at awareness creation and “mind-set change” without accompanying measures that address the structural causes (see Box 4.8).

The stock-out – which was caused by the Unit’s failure to send monthly reports regularly – also illustrates the dependency and limited sustainability of product-based approaches funded by donors.³⁶⁷

While UNAP presents the promotion of positive indigenous food cultures and that of nutritionally-enhanced foods (e.g., RUTF, biofortified, and fortified foods) as complementary interventions for enhancing dietary diversity, interviews at district level pointed to a negative relationship between nutritionally-enhanced foods and the protection of local food cultures. Quoting from these informants, “The positive local food cultures are not protected since the importation and promotion of improved foods”³⁶⁸, and “The use of therapeutic foods has greatly affected the local food cultures”³⁶⁹.

Box 4.8

Blaming the individual: nutrition a question of mind-set change

The draft Ugandan FNS Policy focusses on “empowering communities with resources, knowledge and skills to support mind-set change towards food and nutrition security”.³⁷⁰ The policy assumes that malnutrition results from communities’ attitudes and the value they attach to good nutrition and that “awareness creation and a mind-set change” is the solution.³⁷¹ The structural causes and violations of human rights that hinder people in adequately feeding themselves and their families are downplayed or entirely ignored, as illustrated by the following quote:

“Government will ensure that while in as much as households may not afford nutrient mix desired for proper health, the awareness is first created. With knowledge of what the best

*nutrient-intake is for good health, a demand will be created at household level and especially among women to seek these nutrients from time to time.*³⁷²

Key Finding 4 : SUN enhanced private sector policy influence in disregard of conflicts of interest

Multi-stakeholder engagement is at the core of the SUN initiative and considerable efforts are geared towards fostering “multi-stakeholder collaboration at all levels” in SUN countries.³⁷³

In **Uganda**, membership in SUN has led the country to introduce significant institutional changes to comply with SUN’s multi-stakeholder requirement.³⁷⁴ Coordination of nutrition interventions has been placed under the Office of the Prime Minister (OPM) (previously it was under the ministries of health and agriculture) and policy discussions have opened up to the private sector and other non-state actors. Private sector participation in nutrition policy has been institutionalised at national, district and sub-district levels through the establishment of Nutrition Coordination Committees (Multi-Sectoral Nutrition Technical Committee (MSNTC), District Nutrition Coordination Committees, etc.) under UNAP.³⁷⁵ The MSNTC (at central level) “fosters multi-stakeholder collaboration and partnership and joint planning and monitoring of the implementation of multi-sectoral nutrition programmes”.³⁷⁶ Similarly, at district and sub-district levels, the respective Nutrition Coordination Committees provide technical guidance and monitor and evaluate nutrition activities. They also have the responsibilities to reach out to nutrition ‘stakeholders’ beyond those directly sitting on the committees and “build consensus on how best to address nutrition problems”.³⁷⁷ Hence, the private sector, as well as donors and civil society organizations are directly engaged in the determination of the nutrition agenda and the development, implementation, and monitoring of multi-sectoral nutrition interventions. The principle

that guides multi-stakeholder collaboration is, in line with SUN’s framework, one of consensus building among the various actors.

Direct participation of the national private sector in the Nutrition Coordination Committees has been reportedly low, due to the fact that no single association could present the views of the entire private sector. However, transnational corporations have been indirectly involved in the development of policies and plans through public-private hybrids such as GAIN and IFPRI/Harvest Plus.³⁷⁸

The draft FNS Policy places a strong emphasis on private sector participation and the promotion of multi-stakeholder platforms (where it specifically refers to SUN³⁷⁹).³⁸⁰ The overarching goal of the draft policy is “to strengthen an enabling environment for all actors to develop and implement programs that eliminate malnutrition in Uganda”.³⁸¹ The role of the government, rather than being the primary actor responsible for eliminating malnutrition in the country, is hence reduced to one of a facilitator.

The draft Policy also foresees a strong role for the private sector when it comes to funding nutrition interventions, and the country has even recently adopted a law on this.³⁸² However, no safeguards have been put in place to protect public institutions and officials from being unduly influenced by such funding.³⁸³ This is despite it being widely known in conflict of interest theory that such funding creates conflicts of interest that can undermine democratic and scientific decision-making and affect the integrity and trust placed in public officials.³⁸⁴ Public-private partnerships in the form of corporate funding may result in weakening of public-interest actors’ resolve and capacity to defend the public

interests they are mandated to protect and promote. The concessions made to the funder can reach from small favours in return to what some have described as mandate drift or shift.

In 2013, the SUN Multi-Stakeholder Platform was established in **Guatemala**. In contrast to Uganda, where SUN influenced the institutional structure towards the establishment of multi-stakeholder platforms with direct influence on public policy making, SUN in Guatemala represents a *parallel* platform for nutrition actors. According to key informants, the platform holds marginal relevance (it is one of several platforms in which the same organizations participate) and is perceived as a duplication of the existing institutional structure for nutrition.³⁸⁵ It was questioned why a new multi-actor platform was created when there already existed functioning multi-actor platforms³⁸⁶, a comprehensive political and institutional framework to address FNS issues at national and local levels, and channels for consultation among non-state actors.³⁸⁷

As noted by a key government informant:

*The coordinating structure of the SUN Movement is parallel to the coordinating structure for the National System of Food and Nutrition Security, established by law in decree 32-2005. For example, the institutions and organizations that participate in the SUN Strategy are the same as those that are represented in the CONASAN [National FNS Council]. The coordination of the SUN Movement should be directly supported by the coordinating structure established for the System.*³⁸⁸

With regard to the existing institutional structure, informants pointed to the disconnect between the national and local level with regard to nutrition planning, implementation and monitoring. Decision making is highly centralized, while at the district/municipality level resources and capacities for implementation are lacking. It was repeatedly noted that while local institutional

structures are in place, these require strengthening, especially with regard to planning, implementation, and resource administration.³⁸⁹ The question arises again, why SUN in Guatemala does not work to strengthen existing institutional structures, rather than contributing to duplication and fragmentation of efforts by creating an additional platform for nutrition.³⁹⁰

While well-coordinated implementation of nutrition interventions is a key strategic objective of the SUN initiative,³⁹¹ interviewees reported that multi-actor coordination under the SUN platform is very weak.³⁹² Especially at local level there appears to be no coordination among platform members when implementing actions. Each applies its own targeting criteria and employs its own data sources to establish priorities.³⁹³ It has also been raised that international organizations purposefully select intervention areas where no other organization is active, on the grounds of avoiding duplication of efforts, but at the same time this approach loses out on potential synergies between complementary actions implemented in the same population.³⁹⁴

Guatemala does not have a policy in place to prevent or manage conflicts of interest in the public sector.³⁹⁵ Interviewees also mentioned a widespread lack of clarity concerning the role of the private sector.³⁹⁶ With no safeguards in place, nor a clear definition of different roles, the private sector was invited by the government to participate in policy discussions through the SUN platform. This is despite their interests in some instances being fundamentally at odds with public health nutrition objectives (see Box 4.5).

From the available information, it appears that no institutional changes have taken place in the three **Indian** states due to their affiliation to SUN. None of the states have established SUN business networks. However, SUN has on several occasions reached out to their contacts in these states encouraging them to establish multi-stakeholder platforms and engage with the private sector. In his welcome letter, Tom Arnold, the coordinator of the SUN initiative at the time, suggested that the state

government of **Uttar Pradesh** should establish a multi-stakeholder platform. He wrote:

*Many SUN Countries have formed a national Multi-stakeholder Platform, comprised of key actors they feel are best positioned to take the actions needed in their national contexts. You have outlined Uttar Pradesh's efforts to accelerate engagement and dialogue with different stakeholders for nutrition. This existing momentum for collaboration is encouraging and I suggest you consider how best to convene these partners in a platform to strengthen alignment and support behind national priorities.*³⁹⁷

In her welcome letter to Ms. Mridula Sinha, the Director General of the **Jharkhand** State Nutrition Mission, Gerda Verburg, the current coordinator of the SUN initiative, suggested the inclusion of business representatives as structural partners of the mission. She wrote:

We understand that the Jharkhand State Nutrition Mission has been envisioned as an autonomous body to improve nutrition governance and to bring together technical agencies, civil society organisations, the media, and the academia, to strengthen the partnerships for nutrition. This existing momentum for collaboration is encouraging and I suggest you consider

*how best to convene these stakeholders along with development partners and local business representatives as structural partners of the State Nutrition Mission to strengthen alignment and support behind the State's nutrition priorities.*³⁹⁸

In a video interview, Ms. Mridula Sinha, mentioned that taking a cue from the SUN movement, the state mission has developed a number of partnerships with almost everyone who is doing something on nutrition in the country.³⁹⁹

SUN Coordinator Gerda Verburg visited India in May 2017. She met with national and state government officials in **Uttar Pradesh** and **Maharashtra**, as well as with media, UN agencies, and civil society representatives. According to one media report, she “pushed for dialogue among the various stakeholders government, private sector and civil society.”⁴⁰⁰

It is interesting to note in this context, that the opening of public policy space to business through SUN – and the conflicts of interests arising from this approach – constitute the main concern and reason for resistance against the country's joining of SUN among civil society organizations in India.⁴⁰¹ Several Indian companies participate in SUN (see Box 4.9). The CEO and Managing Director of Britannia Industries, Vinita Bali, was a member of the SUN Lead Group (2012-2015).

Box 4.9

Commitments by Indian companies

Several Indian food, supplement, snack and seed companies are part of the SUN Business Network and have made commitments regarding nutrition. Some examples include:⁴⁰²

- **Britannia**, a snacks, processed foods and ultra-processed foods company. Products include biscuits, breads, cheese, milk, yoghurt, and cakes. Over 50% of the company's portfolio is enriched with micronutrients. Britannia, Naandi, and the Global Alliance for

Improved Nutrition (GAIN) came together for a public-private partnership for delivering nutrition through fortification in Andhra Pradesh state of India in 2007 using biscuits as a vehicle.⁴⁰³

- **Hexagon Nutrition Pvt. Ltd.**, a company manufacturing nutritional supplements and other products like micronutrient premixes, sprinkles for home fortification, and RUTF. The company has committed to produce and distribute at least 100 million sachets of micronutrient powders (MNPs) across the regions of Africa, South America, and Asia; identify at least 1 new emerging fortification project around the world to support; reduce malnutrition for at least 2 countries through new RUTF initiatives; reach at least 1 million people through fortified staple foods and reach 0.5 million beneficiaries (at risk women and children) through nutritional fortification.
- **Gujarat Cooperative Milk Marketing Federation Ltd (Amul)**, a dairy, processed foods and ultra-processed foods manufacturer which includes milk products, butter, cheese, yoghurt, ghee, ice-cream, and chocolate. Amul also manufactures RUTF branded as BAL-AMUL for Valid Nutrition, with financial support from DFID, which is mainly exported.⁴⁰⁴
- **Nirmal Seeds**, a seeds company that has committed to deliver biofortified crop varieties for at least one million farmers.

The pressure and confusion created by SUN in relation to the indiscriminate involvement of the private sector in policy discussions has also been highlighted with regard to other regions. In the context of the complementary interviews conducted for the study, an independent public health nutritionist, who has previously worked with the UN in SUN countries in the Asia-Pacific Region, noted that SUN plays a major role in encouraging countries in the region to set up multi-stakeholder platforms to address malnutrition.⁴⁰⁵ According to the interviewee, SUN countries have expressed deep concern about this and have raised the question whether, as a SUN country, a business network has to be established. SUN members have rather aggressively advocated for the private sector to be consulted and to agree on public policies, emphasizing the importance of dialogue with all 'stakeholders'. One example comes from a meeting among development partners on how to support the government in strengthening the national implementation of the International Code of Marketing of Breastmilk

Substitutes. UNICEF called for the meeting together with WFP. At the meeting, WFP suggested involving the private sector in the process arguing that "we can't stop industry from selling their products, anyway" or from "wanting to make profit", so it would be best to work with them.⁴⁰⁶

As illustrated by the country case studies and complementary interviews many SUN countries, while being pushed to collaborate with the private sector, do not have effective mechanisms in place to safeguard their policy and other decision-making spaces against conflicts of interest and other forms of undue influence. This presents a huge risk for the human rights-orientation of public policies.⁴⁰⁷ While SUN has developed its own conflict of interest tool, this tool has not helped to resolve the situation but rather made matters worse by blurring the conflict of interest concept altogether (see Box 4.10).

SUN's Conflict of Interest Reference Note and Toolkit

Following criticism by civil society organizations of the strong role played by companies in SUN and the lack of conflict of interest (COI) safeguards, the SUN Lead Group requested a document that would help governments in SUN countries address conflicts of interest. In 2013/14 the Global Social Observatory (GSO), a Geneva-based organization, whose director also brokers business influence in public fora and works with corporate funding,⁴⁰⁸ received a grant of nearly one million US dollars from the BMGF “to develop a transparent process to address perceived conflicts of interest and handle credible claims of conflict of interest within the Scaling Up Nutrition Movement in order to achieve delivering better nutritional outcomes”.⁴⁰⁹

The main outcome of this process, a *Reference Note and Toolkit for Preventing and Managing Conflicts of Interest* (2015),⁴¹⁰ is highly problematic on a number of fronts.⁴¹¹ The guidance fundamentally redefines the legal concept of conflicts of interest in a way that fits and legitimizes SUN's multi-stakeholder governance structure and its Principles of Engagement (PoE). The purpose of conflict of interest safeguards should be the protection of independence, integrity and trustworthiness of public actors and institutions, so that these are able to define and implement policies and actions in accordance with their public mandate and obligations⁴¹². However, the purpose presented in SUN's definition is the protection of the “objectives of the joint endeavour”, i.e., whatever has been agreed upon by all members of the initiative, including business.⁴¹³ The maintenance of the ‘inclusiveness’ promoted by SUN is placed above the preservation of public interest-based policy making, as illustrated by the following quotes:

“Since its inception, the Movement has aimed to be inclusive, as there is more to be gained by engaging all stakeholders that are working to improve nutrition. [...] Exclusion should be avoided if at all possible. [...] Stakeholders will seek to resolve divergences in approach or divergent or competing interests whenever they arise; such dialogue and negotiation is the first step toward collaboration while also helping to identify and manage possible conflicts of interest. They are expected to be open and transparent during all aspects of negotiation and to strive for collective solutions.”⁴¹⁴

The Reference Note moreover suggests that conflicts of interest are ‘external’ and caused by disagreements and differences in opinions *between* actors that can be resolved (e.g., through transparency and negotiation). It thereby confuses COI – which should relate to a conflict *within* an individual or institution – with diverging opinions and interests among different actors. In creating confusion about the concept of conflicts of interest and about the means to address them adequately and efficiently, and downplaying the risks COI pose to the integrity, independence and trustworthiness of the public actors and institutions participating in the SUN initiative, SUN's guidance on COI is likely to cause more harm than good in SUN countries.

The initiative organized learning sessions and is widely disseminating its COI Reference Note and Tool Kit, advising SUN member countries on how to use it. Calls to publicly withdraw

the Reference Note and discontinue the 'learning' process have been voiced early on but were disregarded⁴¹⁵. By 2020, all member countries are expected to "adopt an approach to prevent and manage conflicts of interest as they emerge" and "have conflict of interest policies in place".⁴¹⁶

SUN's re-defined COI concept has, despite strong criticism from COI experts,⁴¹⁷ also influenced WHO processes. This includes the development of the organization's *Framework for Engagement with Non-State Actors (FENSA)* and its guidance on *Safeguarding against possible conflicts of interest in nutrition programmes: Approach for the prevention and management of conflicts of interest in the policy development and implementation of nutrition programmes at country level*.⁴¹⁸

Key Finding 5 : SUN generated the benign illusion of a broad and inclusive movement while in practice being detached from those affected by hunger and malnutrition

While the "strengthening of multi-stakeholder collaboration at all levels" is at the heart of the SUN initiative, a closer look at its strategy indicates that SUN 'stakeholders' are not necessarily the communities most affected.⁴¹⁹ While by 2020, all SUN countries "will have multi-stakeholder partnerships for coordination at national levels", they should merely "strive to involve representatives from vulnerable communities in their decision-making processes" [emphasis added].⁴²⁰ Throughout the strategy communities are primarily perceived as passive recipients,⁴²¹ while it is assumed that the national SUN CSA caters for a diverse civil society voice that reflects the interests of communities and promotes their participation and rights.⁴²² In both Uganda and Guatemala, nutrition actions implemented by national-level entities who make up SUN seem to be driven by the strategies and pre-defined agendas of a select group of international NGOs and their funders.⁴²³ These organizations are accountable not to local communities but to international headquarters. CSOs that participate in SUN moreover tend to be service delivery oriented rather than advocacy organizations.⁴²⁴ This top-down internationally-led approach is clearly counter

to people's rights to participation and to define their own food system, a crucial element in the realization of the RtAFN.⁴²⁵

In **Guatemala**, right to food and food sovereignty organizations, and those taking a critical approach on the issue, are not part of the national SUN CSA.⁴²⁶ The absence of local CSOs and communities affected by malnutrition implies that their knowledge and experience are not taken into account when elaborating and evaluating nutrition actions (see Key Finding 3). The discussions with communities also indicated that there is a gap in local coverage and in information.⁴²⁷ Communities not only felt under-served by nutrition and health programmes, but also did not know much about the nutrition programmes and actions being implemented by the various actors, unless they are direct beneficiaries of such a programme.⁴²⁸ The aforementioned lack of transparency inhibits genuine public participation in and scrutiny of SUN / measures applied as part of the country's affiliation to SUN.

The existing institutional structure for food security and nutrition includes the National Forum for Dialogue and Social Participation (INCOPAS) which serves as a channel of communication and space for participation of different sectors of society in national policy discussions on food and nutrition security.⁴²⁹ INCOPAS' mission and

vision is to ensure implementation of food and nutrition security policies and the realization of the right to food through the promotion of active and effective civil society participation.⁴³⁰ Presently INCOPAS is facing important challenges concerning its independence.⁴³¹ Several interviewees coincided in the view that the strengthening of INCOPAS and of existing local governance structures would be key for enhancing civil society participation and local accountability in Guatemala.⁴³² It is unclear how a parallel structure – the SUN civil society network⁴³³ – which is little representative of national civil society and affected communities, will contribute to this.

In **Uganda**, most international and national CSOs working in the area of nutrition are supported by donors who promote the SUN approach.⁴³⁴ The perception of SUN being a top-down initiative was echoed by key informants. Conceived at global level, the initiative was handed down to the country through NGOs and agencies supportive of SUN, and then from there to communities.⁴³⁵ The active participation of groups affected by hunger and malnutrition in the inception and design of interventions tended to be minimal, if any. For instance, micro-nutrient powders (MNP) were being distributed in one sub-region, but the community was suspicious of the product as it was introduced without involvement of supposed beneficiaries. One of the key informants reported:

*In this village, some people received MNP. They say when they gave the children in the evening, and by morning all children had diarrhoea, some were about to die. They then discouraged others to get the product to feed their children. The villagers are now waiting for the people who distributed the powders to take them back. They are furious to even ask them about the powder.*⁴³⁶

The district official confirmed this was happening in the communities and indicated that MNP were a new intervention and there was no evidence on their effectiveness.⁴³⁷ The district was at the time still waiting for the results from an impact study conducted by WFP and Centers for Disease Control and Prevention (CDC) on MNP in the sub region. The results from the study were disseminated in May 2018 and showed that MNP were not effective in controlling or reducing micro-nutrient malnutrition especially anaemia among children.⁴³⁸ This led the Ministry of Health to decide not to distribute MNPs.

The draft FNS Policy foresees the involvement of communities primarily at the level of implementation.⁴³⁹ While community empowerment is mentioned several times, this refers primarily to promoting a mind-set change at community level, rather than the grounding of interventions in communities' analysis of the problem and its solutions (see Box 4.8). The understanding of communities primarily as passive recipients of food and nutrition security interventions is reflected in the policy's section on human dignity:

*All Uganda citizens shall be accorded equal treatment and opportunity to enjoy their constitutional rights and have access to food and nutrition security programmes and interventions without discrimination and exclusion [emphasis added].*⁴⁴⁰

Civil society participation in Uganda's Nutrition Coordination Committees has reportedly been low.⁴⁴¹ It was mentioned that there is a lack of adequate resources to invest in strengthening the CSO component.⁴⁴²

Women as mothers

The SUN strategy recognizes inequity as key driver of malnutrition in all countries and aims at “equitable improvement in the nutrition status of all people”. It moreover speaks of “empowering women as agents of change” to achieve sustainable nutrition improvements.⁴⁴³ The causes of inequality and discrimination however are not mentioned nor how these will be overcome. There is little emphasis on the need of marginalized and discriminated groups’ participation in strategies to help overcome existing inequalities, rather the focus is on experts supporting countries on how to integrate a gender / equity perspective into programmes.

The nutrition strategies in both Uganda and Guatemala have a strong focus on women as mothers and emphasize their role in family nutrition without any critical reflection.⁴⁴⁴ While this certainly cannot be solely ascribed to SUN given the patriarchal context in both countries, the very essence of SUN’s approach is centred on women as mothers,⁴⁴⁵ rather than as individuals with rights on their own. In this sense, the initiative can be said to foster the instrumentalization of women and reinforce rather than confront established gender roles.

Conclusions

SUN has in recent years increasingly adopted and assimilated human rights language. Its current strategy envisions “a world free from malnutrition in all its forms” in which “every child, adolescent, mother and family can realise their right to food and nutrition”.⁴⁴⁶ Even SUN business members, facilitated by the SUN business network, have a role to play in “ensur[ing] all people realise their right to good food and nutrition”.⁴⁴⁷

So how does this rhetoric match the practice observed in SUN countries? What is the added value of the initiative in terms of reducing malnutrition and advancing the realization of the human right to adequate food and nutrition? What are the risks?

The **country case studies** have shown that country experiences and the influence that SUN holds on national nutrition policy and governance vary. Uganda, a country that was once described as the food basket of Africa, is now highly dependent on donor funding for nutrition. The Government has chosen to base its nutrition policy on SUN’s framework and has introduced significant changes to the institutional framework for nutrition in an effort to comply with SUN’s multi-stakeholder requirement. Guatemala in turn already had a comprehensive legal, policy and institutional framework for nutrition in place, so joining SUN did not result in the adoption of a new strategy, but rather led to the promotion of an existing set of interventions under the umbrella of the 1000 Days Window. Instead of strengthening existing structures, SUN created its own parallel structures. In the Indian states that have joined SUN, the initiative’s influence primarily consisted of attempts to promote partnerships with the private sector.

Both the Ugandan and Guatemalan case studies show promotion of short-term nutrition interventions with a strong emphasis on medicalized, product-based interventions aimed at treatment rather than the prevention of malnutrition. (Pillar II - underlying conditions) These interventions have so far failed to bring meaningful changes to the nutrition situation of those affected by malnutrition, at the same time there is evidence of negative consequences on the right to food and nutrition and related rights. The emphasis is on

undernutrition and micronutrient deficiencies, while overweight and obesity and related non-communicable diseases – which are on the rise in both countries – receive hardly any attention. (Pillar III - enabling environment) Within food systems interventions a bias was observed towards technological solutions, in particular biofortified seeds and processed fortified foods, which entail human rights risks for small-scale food producers and consumers. Neither of the countries has a strategy in place for fundamentally re-shaping food systems to support agro-biodiverse production, advance the realization of the rights of small-scale food producers, and promote diversified, healthy and sustainable diets based on minimally or unprocessed food. (Pillar I - healthy food systems)

SUN is clearly not the only force advocating for these types of interventions and one cannot solely ascribe the observed policy trends to SUN. However, there is a strong correlation between the interventions the initiative promotes and those being prioritized in the countries that have been reviewed. A key characteristic of the interventions promoted by SUN is the narrow focus on the first 1000 days (detached from social and economic determinants and other stages of the life cycle) as well as the emphasis on technical solutions to overcome malnutrition. By joining SUN, countries align their nutrition priorities and strategies to those of the initiative, and risk foregoing and/or undermining alternative strategies. Even where SUN does not introduce ‘new interventions’, as in the case of Guatemala, the initiative contributes to an increased emphasis on certain interventions to the detriment of others, possibly avoiding measures aimed at addressing the underlying structural causes of malnutrition.

Importantly, the initiative has contributed to the (further) institutionalization of private sector influence on public food and nutrition policy in the countries reviewed. This is particularly alarming considering the paucity of conflict of interest safeguards to regulate engagement with the private sector and the misleading guidance on this by the SUN Secretariat. (Pillar IV - people-centered governance)

Whereas SUN presents itself as a movement, it is in fact highly detached from the realities of the people affected by hunger and malnutrition, and does not make a visible effort to enhance their effective participation in public policy deliberations, which would ensure that their perspectives and analysis of the situation are taken into account. Far from promoting equitable inclusion, SUN contributes to further exclusion by promoting top-down, internationally-driven measures for local communities. (Pillar IV - people-centered governance).

A closer look at SUN's **internal structures and ways of working** raises important governance and human rights concerns. While the initiative claims to be a country-led movement, the review of SUN's leadership, decision making structures, and accountability mechanisms paints a different picture. While it is difficult to fully assess the internal dynamics and their nuances from the outside, it is clear that those organizations able to contribute both financial and human resources to the initiative are also the ones with a greater say in decision making and priority setting. Key funders (and contributors) such as the Bill & Melinda Gates Foundation are represented on SUN's Lead Group, as well as on the board determining the allocation of the initiative's pooled fund. This applies not only to donors but also to other members of SUN. For example, Save the Children hosts the CSN secretariat, is the co-chair of the CSN Steering Group, a member of the Lead Group, and one of the main implementing partners of the initiative's pooled resources. The organization thereby holds significant influence over the initiative's priorities and direction. Similarly, the UN agencies that have been at the forefront of pushing for SUN (and contributed to the downscaling of the SCN) continue to hold a strong grip on SUN: UNICEF is the Chair of SUN's Lead Group (which also appoints the Executive Committee), while WFP is a member of the Lead Group, Co-Convener of the SBN, and part of the Global SBN Secretariat.

This stands in sharp contrast to the low representation of SUN government representatives within SUN's Lead Structure, and the low representation of national civil society organizations – especially grassroots and people's organizations – in SUN's Civil Society Network Steering Group. While both the Lead Group/

Coordinator as well as the CSN Steering Group are supposedly guided in their decisions by SUN governments and local CSAs (respectively), it is unclear how such guidance takes place in practice.

Another point of major concern relates to the question of accountability. SUN's concept of mutual accountability is highly problematic. On the one hand, it remains unclear how in practice members are to hold each other accountable. On the other hand, it is an exclusive concept (only within SUN, not towards the constituencies the initiative supposedly serves or those who might be affected by its actions) which diverts the line of accountability away from that between people and their elected governments. The difficulty to attribute impact to the SUN initiative's influence contributes also to diffusion of accountability of governments. Who is to blame when interventions inspired by SUN do not show fruits or even have negative impacts? SUN country governments can wash their hands by saying they have followed SUN's approach and done something for nutrition, while SUN's structure and ways of working make the attribution of responsibility for limited, foregone or negative impacts on the RtAFN extremely difficult.

Last but not least, the emphasis placed by the initiative on consensus and members' willingness to negotiate and the omission of clear dispute and conflict resolution procedures is highly concerning from a governance and human rights perspective. This is especially in light of the huge power imbalances within and among SUN's 'stakeholder' constituencies and the omission of mechanisms to correct these. These power differences are not even recognized, rather it is assumed that NGOs naturally represent the views of civil society and those affected, and that by placing representatives of international NGOs (acting in personal capacities) on the Lead Group power becomes balanced. The covering up of differences in opinion and approaches on how to deal with malnutrition and the promotion of only interventions on which consensus (within SUN) is possible presents a huge risk for human rights. It inevitably leads to turning a blind eye to the structural causes of malnutrition – including those to do with the corporate food regime and its strategic priority to change food cultures in lower and middle-income countries – which naturally

are a field of contestation and diverging views given the different interests of the actors involved.

Concluding, it can be said that significant discrepancies exist between SUN's stated nature, vision and goals, and its actual ways of working, the interventions promoted, and their outcomes. While SUN presents a broad vision of a world free from malnutrition in all its forms in which every child, adolescent, mother and family can realize their right to food and nutrition, the operationalization of this goal has been very limited in

practice with interventions primarily focused on addressing immediate causes of undernutrition within a limited population group. Similarly, the concept of an inclusive, country-driven movement is highly illusionary in light of the initiative's actual structures and practices.

The principle of inclusiveness has, contrary to the human rights framework, been used to push for inclusion of corporate actors, rather than to guarantee the inclusion of rights holders and in particular those most affected by hunger and malnutrition.

Recommendations

To SUN country governments

- Freeze engagement with SUN;
- Carry out a human rights impact assessment of current nutrition interventions in terms of their contribution to advancing the RtAFN and related rights. Nutrition priorities should be examined within a broader poverty reduction and social and economic policy space to identify policy priorities that address the underlying structural causes. The assessment should involve the meaningful participation of communities most affected by hunger and malnutrition, and start with the realities people face daily rather than being based on supposedly 'scientific' evidence;
- Revisit the current nutrition strategy based on the results of the human rights impact assessment;
- Establish clear and enforceable guidelines on nutrition interventions. Adopt a precautionary approach with regard to technical interventions, such as biofortification, which present potential serious risks to our planet's biodiversity, peasants' rights, the RtAFN, and the right to health, in addition to concerns related to their sustainability and effectiveness in addressing micronutrient deficiencies, especially in light of viable alternatives;
- Protect the public policy space from undue influence of private sector and organizations promoting private sector interests. Develop effective conflict of interest and other safeguards aimed at this objective and mechanisms to enforce them. These safeguards should be based on accepted legal COI concepts and developed with the support of independent experts and public interest advocates. They should not be based on the misleading guidance developed by the SUN initiative;
- Develop, implement and monitor human rights-based public policies that are in line with States' public mandate and human rights obligations; and
- Support the development of Guidelines on Food Systems and Nutrition in the context of the Committee on World Food Security and ensure that they are in line with the RtAFN.

To donor countries supporting SUN (including EU and its member countries)

- Support national level efforts to: (a) implement participatory assessments of the impact of current nutrition interventions, (b) develop and implement new action plans that also address structural causes of malnutrition, and (c) monitor the impacts and implementation processes of nutrition actions and their compliance with human rights;
- In line with extraterritorial human rights obligations, ensure that all programmes and projects aimed at improving nutrition which are supported by international development cooperation contribute to the realization of human rights and do not harm human rights. This requires among others ex-ante human rights impact assessments and continuous monitoring of impacts, and a freezing of support to SUN;
- Following from the previous recommendation, redirect funding from technical short-term interventions towards more long-term strategies that address the structural barriers people face in nourishing themselves and their families in a dignified way. This includes a fundamental shift towards public policies and public investments that enable the transition to food systems based on agroecological principles and include support for community-driven initiatives;
- Ensure human rights compliance with extraterritorial obligations and revisit key national and international policies and actions to assess their impacts on nutrition in the Global South, including in the areas of agriculture, trade, foreign investment, climate change, and regulation of transnational companies;
- Strengthen the legitimate intergovernmental bodies that are mandated to advance the governance of nutrition, such as the FAO Conference, the World Health Assembly (WHA) and the CFS;
- Support the development of Guidelines on Food Systems and Nutrition in the context of the Committee on World Food Security and ensure that they are in line with the RtAFN;

- Support national governments in protecting public policy space from undue influence of private sector organisations and to develop stringent guidelines for regulating engagement with the private sector in nutrition and related policy fields; and
- Discontinue support for multi-stakeholder approaches in nutrition and other policy fields that place all actors at the same level and fail to recognize differences between actors based on their interests, roles, power, and legitimacy.

To UN agencies and their member countries

- UN agencies have a direct international obligation to observe and promote human rights internationally based on the UN Charter (Art. 55 & 56). Moreover, member states and in particular those holding influential positions have extraterritorial obligations to ensure that the international organizations in which they participate act in compliance with human rights. In this sense, UN agencies and member states have a duty to ensure that initiatives they support in the context of international cooperation on nutrition and policies affecting nutrition, contribute to the protection and realization of human rights. This includes their participation in and support to SUN;
- Support national level efforts to: (a) implement participatory assessments of the impact of current nutrition interventions, (b) develop and implement new action plans that also address structural causes of malnutrition, and (c) monitor the impacts and implementation processes of nutrition actions and their compliance with human rights;
- UN agencies should take an active role in advancing human rights-based international standards on nutrition and supporting member countries in

developing human rights-based strategies for nutrition. They should abstain from promoting narrow approaches that present risks for the realization of the RtAFN and other human rights, including those approaches advanced by the SUN initiative; and

- Apply a vigilant arms-length approach to the engagement with the private sector. Support and highlight the need for countries to protect their public policy spaces from undue influence of the private sector. Abstain from recommending multi-stakeholder approaches in nutrition and other policy fields that place all actors at the same level and fail to recognize differences between actors based on their interests, roles, power, and legitimacy.

To civil society organizations

- Counter the split among civil society organizations working on nutrition that has emerged with the creation of SUN. Engage in constructive and frank dialogue within the SUN CSN and with organisations outside of SUN to address the findings documented in this review. Define a pro-active approach to support nutrition actions that are human rights based;
- Gather the views of local CSOs and communities with regard to the barriers they face and critically assess whether interventions promoted through SUN or based on SUN's approach, actually contribute to reducing these. Actively participate in participatory assessments of nutrition interventions and their impacts on the protection and realization of the RtAFN and other human rights. Constructively participate in the reformulation of nutrition actions based on the findings of such assessments.

Endnotes

1 HLPE 2018. *Multistakeholder Partnerships to Finance and Improve Food Security and Nutrition in the Framework of the 2030 Agenda*. FAO, Rome. fao.org

2 For a critique of the multistakeholder model, see for example: Nora McKeon. 2017. "Are Equity and Sustainability a Likely Outcome When Foxes and Chickens Share the Same Coop? Critiquing the Concept of Multistakeholder Governance of Food Security". *Globalizations*, 14:3, 379-398.

3 For more information on the GRI, see Harris Gleckman. 2012. *Readers' Guide: Global Redesign Initiative*. University of Massachusetts, Boston. archive.wphna.org

4 As of 30 September 2019. SUN website.

5 See for example: Flavio Luiz Schieck Valente "The Corporate Capture of Food and Nutrition Governance: A Threat to Human Rights and Peoples' Sovereignty" and Patti Rundall "The 'Business of Malnutrition': The Perfect Public Relations Cover for Big Food". *Right to Food and Nutrition Watch* (2015); Claudio Shuftan and Ted Greiner "The Scaling Up Nutrition (SUN) Initiative". *Right to Food and Nutrition Watch* (2013), 22-23 righttofoodandnutrition.org; IBFAN. 2012. *The Scaling Up Nutrition (SUN) initiative: IBFAN's concern about the role of businesses*. babymilkaction.org.

6 Mokoro Limited. 2015. *Independent Comprehensive Evaluation of the Scaling Up Nutrition Movement*. scalingupnutrition.org

7 At the time of writing the present study, SUN carried out a mid-term assessment of its current strategic plan, which looks into the effectiveness of its Theory of Change (TOC). See MQSUN+. 2018. *Midterm Review of SUN: Final Report*. 22 December 2018. scalingupnutrition.org

8 SUN's ICE was funded by the BMGF, the main funder and Lead Group member of SUN, and was carried out in partnership with Valid International, the sister organisation of Valid Nutrition, a "social business that develops and manufactures Ready to Use Foods in developing countries" and member of SUN's Business Network. Hence, it can hardly be considered an independent assessment of SUN.

9 SUN's ICE provides some useful insights into the functioning and progress of SUN against its own objectives and Theory of Change at the time of the evaluation. It does not however examine the broader policy and governance implications of SUN, nor does it use a human rights lens for its analysis. Further, the evaluation is based on consultations with SUN members, so it is rather an internal reflection.

10 Flavio Luiz Schieck Valente, Patti Rundall and Lida Lhotska have participated in the UNSCN's activities over the past 20 years.

11 These countries have been selected to provide a cross-regional perspective on the activities of SUN. Selection was based on the intersection of (a) regional balance; (b) early joining of SUN to increase possibility to see impacts (Uganda and Guatemala); and (c) presence of research partners in the country.

12 Senior nutrition specialist attached to IBFAN Uganda and independent researcher with a focus on operational research on policy and programming.

13 Independent researcher with many years of experience working in Guatemala on food and nutrition security and the human right to food.

14 Coordinator Campaña Guatemala sin Hambre

15 National Coordinator Breastfeeding Promotion Network of India (BPNII) / IBFAN South Asia.

16 Convener Nutrition Advocacy in Public Interest (NAPI) and Central Coordinator BPNII / IBFAN South Asia.

17 This has also been highlighted by SUN's ICE which notes: "SUN is a broadly defined partnership; participants in the movement are deemed to share common objectives with regard to nutrition, and there are no defined boundaries between what they do in their capacity as supporters of SUN and other actions that may also have a bearing on SUN's objectives. This makes it unusually difficult for evaluators to say whether, and to what extent, SUN has contributed to results that are observed." *Supra* note 6, p.16.

18 Such would have, for example, required a multi-disciplinary research team, rather than a single researcher, able to conduct truly holistic data collection.

19 See Valente, Suárez Franco, Córdova Montes "Closing protection gaps through a more comprehensive conceptual framework for the human right to adequate

food and nutrition" in: Bellows et al. (eds), 2016. *Gender, Nutrition and the Human Right to Adequate Food. Toward an Inclusive Framework*. Routledge, NY.

20 For a detailed list of legal standards on the right to food, see ohchr.org

21 Article 25.

22 Article 11.

23 Articles 1.2 and 6.

24 Articles 12.2 on adequate nutrition during pregnancy and lactation and article 14.2 (g)(h) on the rights of rural women.

25 Article 24 (c)(e) and Art. 27.

26 Article 14, 25 and 28,

27 Available at: fao.org

28 Arts 24 and 26

29 Available at: fao.org

30 Para 75-76.

31 Particularly art. 15. Other related rights that respond to diverse dimensions of the RTFN are referred to in articles 16-23.

32 GR No. 34 deals extensively with the RtFN.

See for example: Para 5 on infrastructure and services for food production; para 11 on the impact of macroeconomic policies including with regards to agriculture, land and water; para 12 on loss of biodiversity; para 17(a) on the recognition of women's contribution to food production; par. 22 on elimination of discriminatory stereotypes and practices preventing women from the enjoyment of natural resources; para 39 (a) on counselling on nutrition and (d) on measures in case of malnutrition; para 45 on agricultural extension and advisory services; and para 56 on women's rights to land and natural resources.

33 Of particular relevance are the report by the former Special Rapporteur on the right to food, Olivier De Schutter on the links between health and malnutrition (A/HRC/19/59, 26 December, 2011), the interim report of the current Special Rapporteur, Hilal Elver, on the right to food and nutrition (A/71/282, 3 August, 2016), and the report by the former Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Anand Grover, on unhealthy foods, non-communicable diseases and the right to health (A/HRC/26/31, 1 April 2014). unscon.org. Reports issued by Special Rapporteurs on the right to food can be accessed at: ohchr.org

34 Examples are Kenya, South Africa, Uganda, Guatemala, and Ecuador.

35 An interesting case in this regard is the court sentence by the Guatemalan Supreme Court, see Box 4.4

36 CESCR General Comment No. 12 on the right to food (art. 11), para 6. Available at: refworld.org

37 *Ibid.*

38 A principle connected to human dignity and non-discrimination. The priority of groups in situation of vulnerability is reflected in diverse General Comments of the CESCR, i.e., GC No. 14, para 43(a), GC No. 15 para 37(b), GC No. 18 para 31(a), and in the Right to Food Guidelines, Guideline 13.

39 See for example the latest definition of the Special Rapporteur on the Right to Food. ohchr.org

40 CESCR GC No. 12, para 6-11.

41 See report by Olivier De Schutter (*supra* note 33) in which the former Special Rapporteur explores the food-health nexus and the implications of food systems policies for the nutritional dimension of the right to food.

42 CESCR General Comment No. 12, paras 7-11. De Schutter (*supra* note 33), para 4, 5, 12.

43 Peasants' rights to seeds – as basis for bio- and dietary diversity – is one crucial aspect of this. See UNDROP, art. 19. undocs.org

44 See for example De Schutter 2011 para 17, 25, 49 and CEDAW GR No. 24 on Women and Health para 7.

45 Both the current and the previous Special Rapporteurs on the Right to Food have highlighted the importance of food systems transformation and elaborated on the policies and measures such would require. See De Schutter 2011, para 37-47; Elver 2016, para 92, 99(h). *Supra* note 33.

46 Elver 2016 (*supra* note 33), para 2, 18, 19, 20, 96; Convention on the Rights of the Child art. 24.2 (c) (e)

47 See CEDAW GR No. 24 and 34.

48 See CRC GC No. 15 on the right to health, GC No. 16 on the impact of the business sector, and No. 11 on the rights of indigenous children.

49 See CRC GC No. 11 which recognizes the cultural significance of traditional land and environment

and the intrinsic linkages with indigenous children's right to life, as well as CESCR GC No. 14 para 27 on the symbiotic relationship between indigenous peoples and their environment.

50 See UNDROP and CEDAW GR No. 34.

51 See report by Hilal Elver, on the RTF of agricultural workers (A/73/164, 2018). documents-dds-ny.un.org.

52 See CESCR GC No. 12, para 26. See also Guiding Principles on Extreme Poverty and Human Rights, paras 75 and 76.

53 See Bellows et al, *supra* note 19. See also CEDAW GR No. 34, especially paras 63-66.

54 See ARROW: 'Linking Poverty, Food Sovereignty and Security, and Sexual and Reproductive Health and Rights' in ARROW for Change, vol. 20 no.1 2014. arrow.org.my

55 See report by Olivier De Schutter (2012) on Women's Right and the Rights to Food, pp. 2-6. ohchr.org and report by Hilal Elver (2015) on integrating a gender perspective into the RtF. ap.ohchr.org. See also CEDAW GR No. 24, paras 7, 12 and GR No. 34, para 63.

56 See UNDROP, article 15. ap.ohchr.org See also: UN Guiding Principles on Extreme Poverty and Human Rights, and CEDAW GR No. 34.

57 Definition adopted by La Via Campesina and other movements/organizations at the Food Sovereignty Forum in Nyéléni (Mali) in 2007. nyeleni.org

58 For more details on the concept of food sovereignty and what it entails for the right to food, please see FIAN International. 2015. *Rights to sovereignty over natural resources, development and food sovereignty*. fian.org and Priscilla Claeys. 2015. *Human Rights and the Food Sovereignty Movement: Reclaiming Control*

59 See Maastricht Principles on the extraterritorial obligations of States in the area of economic, social and cultural rights (September 2011). etoconsortium.org; See also CESCR GC No. 12, para 36-39 on States international obligations in context of RtAFN and GC 24 on State obligations in the context of business activities, paras 25-37; CRC GC No. 16 on State obligations regarding the impact of the business sector on children's right; De Schutter (*supra* note 33), paras 32-35.

60 See ETO Consortium 2017, *For Human Rights Obligations beyond borders: How to hold States accountable for extraterritorial violations*. etoconsortium.org

61 UN Charter 1945, art. 55c and 56; CESCR GC No. 12, para 36.

62 See Maastricht Principles 29 and 32. *Supra* Note 59.

63 See CESCR GC No. 12.

64 Human Rights Council. *Guiding Principles on Extreme Poverty and human rights*, A/HRC/21/39, 2012, para 76.

65 Available at: etoconsortium.org

66 These are members who play a prominent role in the initiative's leadership structure. See Chapter 2.

67 This includes the participatory formulation and implementation of a national food sovereignty strategy towards the consolidation of collectively-managed food systems (see also Pillar 1).

68 The HLPE report was chosen as primary point of reference because it proposes a useful framework for analyzing MSPs from a right to food perspective (Chapter 3.3). Gleckman equally puts forward a comprehensive framework for assessing MSPs democratic characteristics (Chapter 5), while at the same time closely examining the beliefs and discourse that drive MSPs (Chapter 4), both of which was considered to complement well the qualities criteria put forward by the HLPE. Of course there is a much wider array of literature in the field of multi-stakeholder governance that has inspired the study and framework for analysis, examples include: Bexell, M. and Mörth, U. 2010. *Democracy and Public-Private Partnerships in Global Governance*, Palgrave MacMillan; Bull, B. and McNeill, D. 2007. *Development issues in global governance. Public-private partnerships and market multilateralism*. Routledge; McKeon, N. 2015. *Food Security Governance. Empowering communities, regulating corporations*. Routledge; Andonova, C. 2017. *Governance entrepreneurs. International organizations and the rise of global public-private partnerships*. Cambridge

69 2018. The guiding questions elaborated for this study are based in particular on Chapter 2 and 3 of the HLPE Report. fao.org

70 2018, Routledge. The guiding questions for this study are based in particular on Chapter 4 and 5.

71 A central point of disagreement is that the report despite raising important concerns about MSPs does not challenge these in general as modality for implementing the SDGs. As a consequence, the focus of the report lies on improving MSPs without seriously discussing alternative models.

72 See section 3.3 (pp. 73-84). The HLPE report identified eight qualities to assess performance of MSPs to finance and improve food and nutrition security: results related: effectiveness, impact, and capacity to mobilize resources; process related: inclusiveness, accountability, transparency, reflexivity and efficiency.

73 The HLPE identifies five main functions of MSPs: Knowledge co-generation and capacity building; advocacy; standard-setting; action; fundraising and resource mobilization. See pp. 52-64. Gleckman distinguishes between policy-oriented, product and process-oriented (standard-setting), and project oriented multi-stakeholder groups. See pp. 16-25.

74 Gleckman describes nine main beliefs that are widely shared among participants of multi-stakeholder projects and their implications for governance. These include: the existence of an “unsolved global problem”, the ability to identify all relevant stakeholders, equitable decision making, management of conflicts of interest, and enhanced efficiency and effectiveness. See Chapter 4.

75 See HLPE pp. 79-83 for more details on the different process-related indicators and interrelations between them.

76 A crucial condition for the ability to learn and adapt is the existence of regular monitoring and evaluation. See HLPE p. 82.

77 Gleckman makes the point that the initial structure set for a multi-stakeholder group can effectively limit the group’s room for maneuver. A later change of the institutional format in response to lessons learned becomes difficult. See pp. 83-84.

78 See HLPE pp. 75-79 for more details on results-related qualities.

79 The question of impact attribution is highly complex, given the difficulty to separate the specific contribution of a MSP from the effects of other exogenous factors. The lack of information on the results achieved by MSPs is another key challenge for assessing impacts. See HLPE, pp. 76-77. The report recommends to assess the impacts of a MSP not only with its counterfactual situation (i.e., the situation without the interventions) but also with regards to “alternative non multi-stakeholder processes with similar objectives and outcomes”. Such should consider both the “value for money” and the “additionality” (synergy effect) of a MSP. (p. 77).

80 A detailed history of the SUN movement will be provided in Chapter 3.

81 SUN. *SUN Movement Strategy and Road Map (2016-2020)*, p. 6. [scalingupnutrition.org](https://www.scalingupnutrition.org)

82 Graphic extracted from SUN Strategy and Road Map (2016-2020), p. 6. *Ibid.*

83 *Supra* note 81, p. 19.

84 *Supra* note 6, para 2.13.

85 SUN. *SUN Movement Lead Group: Terms of Reference*. July 2015. [ux3x320eshgixppib11rqg0.wpengine.netdna-cdn.com](https://www.ux3x320eshgixppib11rqg0.wpengine.netdna-cdn.com)

86 A list of current lead group members can be found at: SUN. “SUN Movement Lead Group Members”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

87 The precise criteria for appointment are unclear, except for that they should “include leaders in government, of business, of civil society and the United Nations’ system”. It is equally unclear what the process for proposing members is: “Members of the Movement will be invited to provide suggestions for membership in a process to be decided”. *Supra* note 85.

88 *Supra* note 85

89 The United Nations Secretary General appointed the new Lead Group on 23 September 2019. *Supra* note 86. The previous Lead Group included even only two government representatives.

90 For more information, see: DSM. “Food Specialties”. [dsm.com](https://www.dsm.com)

91 For more information, see: Java Foods. “Our products”. [java-foods.com](https://www.java-foods.com)

92 SUN. *Private Sector Engagement Toolkit*. 2011. [scalingupnutrition.org](https://www.scalingupnutrition.org)

93 SUN. *The SUN Movement Coordinator – Terms of Reference*. [ux3x320eshgixppib11rqg0.wpengine.netdna-cdn.com](https://www.ux3x320eshgixppib11rqg0.wpengine.netdna-cdn.com).

94 “As indicated by the Movement’s monitoring mechanisms and on the advice of the Executive Committee or Lead Group”. *Ibid.*

95 For a list of members of SUN’s Executive Committee, see: SUN. “SUN Movement Executive Committee”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

96 See country descriptions on SUN website.

97 SUN. “Frequently asked questions”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

98 Interventions promoted by SUN will be described in more detail in Chapter 4.

99 SUN. “How do countries join?”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

100 Graphic derived from SUN. “SUN support structure”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

101 *Supra* note 81, p. 32. For more information, see SUN Civil Society Network website. [suncivilsociety.com](https://www.suncivilsociety.com)

102 How can we strengthen the enabling environment for business to take action in improving nutrition? SUN GAIN Side Event. 23 May 2018. [youtube.com](https://www.youtube.com)

103 See SUN. “SUN Civil Society Network”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

104 See SUN Civil Society Network. *Membership and Contacts list*. 2017. [suncivilsociety.com](https://www.suncivilsociety.com)

105 For details on the criteria, see *SUN CSN Membership Application Form*. 2017. [suncivilsociety.com](https://www.suncivilsociety.com)

106 “By becoming a member, the organisation understands it does not have decision-making power, which remains bound to the Steering group of the network, with guidance from SUN Civil Society Alliances in SUN countries.” *Ibid.*

107 “The composition of the SG is and should remain representative of the Network membership. In order to achieve this, there is a basic quota system with transparent representation criteria: (a) geographical balance [...]; (b) gender balance; (c) sectoral balance [...]; (d) typology of CSO: this is defined based on a mapping of the various constituencies represented on the Network (i.e. grassroots organisations, national CSOs, farmers groups, women’s groups, INGOs, etc.” Civil Society Network. *Terms of Reference*. P. 7. [docs.scalingupnutrition.org](https://www.docs.scalingupnutrition.org)

108 This includes minimum of 15 work days and travel to key events and meetings to represent the SUN CSN as well as the SUN global gathering and annual meeting of the SUN CSN. *Ibid.*, pp. 8-13.

109 See *Supra* note 104 for a list of current Steering Group members.

110 *Supra* note 104. Note that the SUN website states that Concern Worldwide is the current Chair.

111 SUN Website, “SUN Business Network (Progress at Glance)”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

112 SUN Business Network website. [sunbusinessnetwork.org](https://www.sunbusinessnetwork.org)

113 See SBN Membership Application Form (for global network) <https://2fe0ur3bix01clgx344dz-bo3-wpengine.netdna-ssl.com>

114 For a list of SUN business members’ commitments, see *SUN Business Network Company Commitments*. [sunbusinessnetwork.org](https://www.sunbusinessnetwork.org) (currently not available on website)

115 For more information, see: SUN. “SUN Donor Network”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

116 *Ibid.* For a list of country level donor conveners, see: SUN. “SUN Donor Conveners”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

117 SUN. “UN Network for SUN”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

118 SUN. “SUN Movement Secretariat” (as of December 2019). [scalingupnutrition.org](https://www.scalingupnutrition.org)

119 SUN Civil Society Network. “Membership”. (as of December 2019). [suncivilsociety.com](https://www.suncivilsociety.com)

120 The Multi Partner Trust Fund was supported by DFID, SDC and Irish Aid.

121 SUN. “SUN Movement Pooled Fund 2018-2020”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

122 *Ibid.*

123 SUN. “Multi-Partner Trust Fund”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

124 See for example: SUN. *2016 Annual Report of the SUN Movement Multi-Partner Trust Fund*. [scalingupnutrition.org](https://www.scalingupnutrition.org) and *2015 Annual Report of the SUN Movement Multi-Partner Trust Fund*. [scalingupnutrition.org](https://www.scalingupnutrition.org)

125 SUN. “Preventing and managing conflict of interest”. [scalingupnutrition.org](https://www.scalingupnutrition.org)

126 Derived from SUN CSN membership form. *Supra* Note 105.

127 See SUN. *SBN Global Members Princi-*

ples of Engagement. <https://2fe0ur3bix01clgx344dz-bo3-wpengine.netdna-ssl.com> and *SBN Country Network Principles of Engagement*. <https://2fe0ur3bix01clgx344dz-bo3-wpengine.netdna-ssl.com>

128 *Ibid.*

129 *Ibid.*

130 The SBN whistle blower mechanism is relatively difficult to find, located at the bottom of the “Global Members” page on the SBN website: [sunbusinessnetwork.org](https://www.sunbusinessnetwork.org)

131 The CSN Steering Group selection criteria / quota system can be considered an attempt to do such balancing. It however does not go beyond formal representation to ensure *de facto* participation on equal footing. It moreover does not seem to be implemented in practice (based on current composition / leadership). *Supra* note 107.

132 *Supra* note 85.

133 SUN. *SUN Movement Ethical Framework*. November 2016, p. 1. [scalingupnutrition.org](https://www.scalingupnutrition.org)

134 Working Note: *Enabling Good Governance in Civil Society Alliances*. [scalingupnutrition.org](https://www.scalingupnutrition.org)

135 *Supra* note 81, p. 30.

136 *Ibid.*

137 The Global Nutrition Report (GNR) is a multi-stakeholder initiative itself. The report’s “Stakeholder Group” is co-chaired by two prominent members of SUN, DFID (donor) and 1000 Days (NGO). In fact the, vast majority of its members are also SUN members, including the SUN Coordinator herself, Mars, Save the Children, Cargill, the World Food Programme, UNICEF, and the Somalian National Coordinator for SUN. [globalnutritionreport.org](https://www.globalnutritionreport.org) The 2018 report was also largely funded by the same donors that fund SUN. See *Global Nutrition Report 2018: Shining a light to spur action on nutrition*. P. 8. [globalnutritionreport.org](https://www.globalnutritionreport.org)

138 *Supra* note 81, p. 30.

139 *Supra* note 85.

140 *Ibid.*

141 *Supra* note 93.

142 *Supra* note 81, p. 31.

143 *Supra* note 107.

144 See also *supra* note 81.

145 *Supra* note 81, p. 19.

146 *Ibid.* On the independence of the GNR, see *supra* note 137 on the governance and funding of the report.

147 *Supra* note 7.

148 HLPE *e-consultation on the VO Draft of the Report: Multistakeholder Partnerships to Finance and Improve Food Security and Nutrition in the Framework of the 2030 Agenda* (16 January to 19 February 2018), Contribution no. 64, p. 234-243. [fao.org](https://www.fao.org)

149 Beaton, G. “The AGN and its evolving role in the SCN”. *SCN News* 18 (1999). [unscn.org](https://www.unscn.org)

150 James, P. et al. 2000. *Ending Malnutrition by 2020: an Agenda for Change in the Millennium*. Final Report to the ACC/SCN by the Commission on the Nutrition Challenges of the 21st Century. New York/ Geneva. [unscn.org](https://www.unscn.org)

151 UNSCN. *SCN News* 18 (1999). [unscn.org](https://www.unscn.org)

152 The reform entailed revision of the role of the so-called Advisory Group on Nutrition (AGN) and the establishment of a tripartite governance mechanism representing UN organizations, governmental donor agencies and NGOs. See *SCN News* 20 (2000). [unscn.org](https://www.unscn.org)

153 The annual sessions gathered close to 400 academics, officials and NGO activists. These debates received the concrete scientific, philosophical, political and empirical inputs of different publications: *SCN News*, *Global Nutrition Report*, working groups’ reports on specific topics and the output of ad-hoc task forces.

154 *Ibid.*

155 UNSCN. “Tackling the Double Burden of Malnutrition: a Global Agenda”. *SCN News* 32 (2006). Geneva

156 Lie provides interesting insights into the different actors and power dynamics within the SCN at the time, and the role they played in the establishment of SUN. See Lie, A.L. “Power in Global Nutrition Governance: A Critical Analysis of the Establishment of the Scaling Up Nutrition (SUN) Partnership”. *Global Governance* 25 (2019), 277-303.

157 Especially during the 31st Session that took place in New York in March, 2004. See UN SCN. *Report of the SCN at its Thirty-first Session*. [unscn.org](https://www.unscn.org).

158 The participants following the 1999 reform were distributed in three groups (known as constituencies),

which met separately, discussed and prepared their own input into the debates, and had representatives in the UNSCN Steering Committee.

- 159 Personal recollection of Flavio Luiz Schieck Valente, who was the elected civil society representative in the UNSCN Steering Committee from 2002 until end of 2006.
- 160 Draft Private Sector Engagement Policy (March 2006). unscn.org
- 161 Piore, A. (2002). "Charities that hate to just 'give'". *Newsweek*, 4 February (5): 37, quoted in Richter, J. (2004). *Public-private partnerships and international health policy making: How can public interests be safeguarded?* Helsinki, Ministry for Foreign Affairs of Finland, Development Policy Information Unit. webcitation.org
- 162 Richter 2003. *We the peoples' or 'we the corporations'? Critical reflections on UN-business partnerships.* Geneva, IBFAN/GIFA. ibfan.org Richter 2004 (*ibid.*). Bruno, K. and J. Karliner (2000). *Tangled up in blue: Corporate partnerships in the United Nations.* San Francisco: Transnational Resource & Action Centre (TRAC). corpwatch.org
- 163 Richter 2004. *Building on quicksand: The Global Compact, democratic governance and Nestlé.* Geneva & Zurich, CETIM, IBFAN/GIFA, Berne Declaration (2nd edition). ibfan.org See also: Global Policy Forum Europe (Ed.) 2007. *Whose partnership for whose development? Corporate accountability in the UN System beyond the Global Compact.* Speaking Notes. globalpolicy.org
- 164 Birn, A.E. & Richter J. 2018. "U.S. Philanthrocapitalism and the Global Health Agenda: The Rockefeller and Gates Foundations, Past and Present." In *Health Care under the Knife: Moving Beyond Capitalism for Our Health.*, edited by Howard Waitzkin and the Working Group for Health Beyond Capitalism, Monthly Review Press (electronic advance chapter) peah.it
- 165 *Ibid.*
- 166 BMGF. *Food Fortification Promises Improved Health And Productivity In Developing Nations.* Press release. 2002. gatesfoundation.org
- 167 Richter, J. 2017. Comment on Draft Concept Note towards WHO's 13th General Programme of Work gifa.org
- 168 *Ibid.*
- 169 Longhurst, R. *Global Leadership for Nutrition: The UN's Standing Committee on Nutrition (SCN) and its Contributions.* IDS DISCUSSIONPAPER No. 390. July, 2010. p. 61.
- 170 World Bank. 2006. *Repositioning Nutrition as Central to Development. A Strategy for Large Scale Action.* Washington. unhcr.org
- 171 *The Lancet* Maternal and Child Undernutrition Series. January 2008. thelancet.com
- 172 *Supra* note 150.
- 173 The first of a series of bilateral free trade agreements which negatively impacted the capacity of national governments to promote and protect the food and nutritional security of those inhabiting their territories. See for example: "Tortilla Wars — Cargill and the (not so free) market". *The Mex Files*, April 15, 2007. mexfiles.net
- 174 WPHNA. 2011. *Ann Veneman. USDA.*
- UNICEF. *SCN. Nestlé Public-private partnerships personified.* wphna.org
- 175 Ms Veneman strongly defended the use of Plumpy'Nut in nutrition programs in SCN 34th session. See: UNSCN SCN News 35 (2007). Geneva. unscn.org
- 176 UNSCN. *SCN News 36* (2008). Geneva. unscn.org. For more information, see: Schuftan, C. and Radha H. "Two Contemporary Challenges: Corporate Control over Food and Nutrition and the Absence of a Focus on the Social Determinants of Nutrition." *Right to Food and Nutrition Watch* (2012): 24-30. rtfn-watch.org
- 177 At the time, only a half-page document was submitted to members of the SCN, informing about the implementation of an internal reform of the committee. The document stressed the necessity to "bring private sector representatives into all levels of the structure of new SCN." Electronically circulated document.
- 178 Personal communication by Prof. Ted Greiner, who at the time was a member of the SCN Steering Committee.
- 179 UN. "High Level Task Force on Global Food and Nutrition Security (HLTF)". un-foodsecurity.org. For a critical view, see: FIAN International 2008. *Time for a Human Right to Food Framework of Action.* Heidelberg. fian.org
- 180 For more information on the food crisis, see:

- Right to Food and Nutrition Watch* (2008) "The World Food Crisis and the Right to Food". rtfn-watch.org.
- 181 G8 Experts Group on Global Food Security 2009. *G8 Efforts towards Global Food Security.* L'Aquila, Italy. g8utoronto.ca.
- 182 CFS 2009. *Reform of the Committee on World Food Security: Final Version.* Rome: CFS. fao.org.
- 183 The FAO reform process ran from 2005 to 2012. For more details, see: FAO 2013. *Final Management Report on Immediate Plan of Action Implementation and the FAO Reform Process.* Rome. fao.org
- 184 IBRD / World Bank 2006. *Repositioning Nutrition as Central to Development: A Strategy for Large-Scale Action.* Washington. siteresources.worldbank.org
- 185 SUN. *Economic Potential of Nutrition and Growth: New Focus at World Economic Forum.* Press Release, 26 January 2012.
- 186 35th SCN Session Recommendations, in UNSCN. "Accelerating the reduction of maternal and child undernutrition". *SCN NEWS* 36 (2008), p 51-57.
- 187 Scaling up Nutrition. *Information Note: January 2012.* scalingupnutrition.org
- 188 David Nabarro in: *UNSCN Nutrition partners kick-off Meeting report.* December 2010. FAO, Rome. unscn.org
- 189 *Ibid.*
- 190 scalingupnutrition.org.
- 191 For more information on the CFS, see: Committee on World Food Security. "About". fao.org.
- 192 *Framework of engagement with non-State actors*, adopted at the 69th WHA, May 2016. who.int. CSOs expressed serious concerns regarding FENSA at the time. See: *Civil Society Statement on the WHO's Proposed Framework of Engagement with Non-State Actors*, May 2016 healthscienceandlaw.ca
- 193 Personal communication by Ted Greiner, professor of nutrition in South Korea at the time.
- 194 *Public Interest Civil Society Organizations' and Social Movements' Forum Declaration to the Second International Conference on Nutrition (ICN2)*, Rome, 21 November 2014. fao.org
- 195 In 2014, Bill & Melinda Gates Foundation provided a grant of USD 745,473 to the Secretariat of the CFS to support the discussion of Food and Nutrition Governance. BMGF. "Grant: Food and Agriculture Organisation of the United Nations". gatesfoundation.org.
- 196 *CFS and its role advancing Nutrition* (CFS, BurAG2015/02/02/03), presented in February 2015 to the CFS Bureau. ipcinfo.org.
- 197 UN. "Gerda Verburg: Coordinator of the Scaling Up Nutrition Movement". un.org.
- 198 Formerly, the SCN secretariat was coordinated by a senior Technical Secretary, allotted with a D1 position, i.e., post equivalent to that of the heads of nutrition divisions of all UN agencies, programs and funds. The former secretary, despite being a WHO employee, reported exclusively to the Chair of SCN. The new secretary has a P5 position and reports to the FAO Nutrition Division Head, substantially reducing her autonomy and inter agency standing.
- 199 SUN. "Secretary-General appoints Gerda Verburg from the Netherlands Coordinator of the SUN Movement". scalingupnutrition.org.
- 200 *Supra* note 3, pp. 193-205.
- 201 For more details on the shift from multilateralism towards market-driven governance, see for example Bull, B. and McNeill, D. 2007. *Development issues in global governance. Public-private partnerships and market multilateralism.* London: Routledge.
- 202 On January 15, 2019 a fourth Indian state, Madhya Pradesh, joined SUN. This state is, however, not included in the analysis given that the country research had already been concluded at the time.
- 203 SUN. "Uganda". scalingupnutrition.org.
- 204 Government of Uganda. 2011. *Uganda Nutrition Action Plan.* scalingupnutrition.org
- 205 Government of Uganda. *Uganda Food and Nutrition Security Policy / Uganda Multisectoral Nutrition Policy.* Final Draft 4, April 2017. Referred to as "draft Food and Nutrition Security (FNS) Policy" in the study.
- 206 Government official. Kampala, January 2018.
- 207 For example, UNAP has been developed with assistance of USAID through the FANTA project, while UNAP II is being developed with support of Nutrition International. fantaproject.org.
- 208 Government official. Kampala, January 2018.

- See also para 94-97 of the draft FNS Policy which show the strong reliance on donor and private sector funding for the implementation of the policy.
- 209 Office of the Prime Minister. July 2017.
- Multi-Sectoral Nutrition Coordination Committee Orientation: Guide for Facilitators.* fantaproject.org
- 210 *Supra* note 205, p. 2.
- 211 The strategic objective has two components: "Strong in-country leadership translates commitment into action and inspires collective political and social momentum" and "A shared space (multi-stakeholder platforms) at national and local levels paves the way for collective action, where nutrition change agents take joint responsibility for scaling up impact". *Supra* note 81, p. 19.
- 212 Government official. Kampala, December 2017.
- 213 *Ibid.*
- 214 SUN. "Guatemala". scalingupnutrition.org.
- 215 Secretaría de Seguridad Alimentaria y Nutricional (SESAN), Ministerio de Salud Pública y Asistencia Social (MSPAS), Ministerio de Finanzas Públicas (MINFIN), Ministerio de Agricultura, Ganadería y Alimentación (MAGA), Ministerio de Educación, Ministerio de Desarrollo Social.
- 216 The secretary of INCOPAS (Instancia de Consulta y Participación Social / Forum for Dialogue and Social Participation), Save the Children International, Plan International, Action against Hunger, and World Vision.
- 217 Alianza por la Nutrición, CentraRSE, and Fundación Castillo Córdoba. These organizations have been listed as having participated in the annual evaluation meetings, however, there might be other less active ones.
- 218 Spanish Agency for International Development Cooperation (AECID), Institute of Nutrition of Central America and Panama (INCAP), and USAID.
- 219 UN Food and Agriculture Organization (FAO), World Food Programme (WFP), and Pan-American Health Organization (PAHO).
- 220 Even far before this, one could consider the "Longitudinal Study of the East" (1969 to 1977) of the Institute of Nutrition of Central America and Panama (INCAP) as the first intervention to prevent and eradicate chronic undernutrition in Guatemala.
- 221 SESAN. *Política Nacional de Seguridad Alimentaria y Nutricional.* sesan.gob.gt
- 222 Article two enshrines the obligation of the State to guarantee the life, security and integral development of the Guatemalan population. *Constitución Política de la República de Guatemala.* 1993. oas.org
- 223 *Decreto Número 32-2005.* extwprlegs1.fao.org
- 224 Comisión Nacional para la Reducción de la Desnutrición Crónica. 2016. *Estrategia Nacional para la Prevención de la Desnutrición Crónica 2016-2020.* sesan.gob.gt
- 225 *Ibid.*
- 226 Interview with Ministry of Public Health and Social Assistance which noted that 1000 Days window interventions under their responsibility have been implemented already prior to the country's affiliation to SUN (Guatemala City, 9 May, 2018). They were already part of routine health services (Standards of Care) and included in the Chronic Malnutrition Reduction Strategy (ENRDC) and the Basic Health Services Package (CSBS).
- 227 Community discussion. La Paz, 7 May 2018.
- 228 Civil Society and UN representatives. Guatemala City, 9 and 11 May, 2018.
- 229 Government official. Guatemala City, 9 May, 2018.
- 230 Response to Right to Information query by Breastfeeding Promotion Network of India (BPNI) on 1 November, 2017.
- 231 SUN. "Welcome to Uttar Pradesh, the newest member of the SUN Movement". scalingupnutrition.org
- 232 SUN. "Join us in welcoming the Indian State of Jharkhand!" scalingupnutrition.org
- 233 Comparison of SUN website descriptions on how countries join SUN.
- 234 SUN. 2011. *Scaling up Nutrition: A Framework for Action.* scalingupnutrition.org
- 235 *The Lancet* Child Survival series in 2003 concluded that breastfeeding topped the list of interventions to prevent under-5 deaths. The 2013 Maternal and Child Nutrition Series (thelancet.com), although recognising breastfeeding's importance, placed much more emphasis on micronutrient-based foods and supplements. 8 of the

10 recommended intervention packages involved products of some kind. The SUN Movement Strategy and Road Map (2016-2020) also mentions the ICN2 Framework for Action as source of reference for SUN interventions. *Supra* note 81, p.19 (footnote 3).

236 These are: Adolescent health and preconception nutrition; maternal dietary supplementation; micro-nutrient supplementation or fortification; breastfeeding and complementary feeding; dietary supplementation for children; dietary diversification; feeding behaviours and stimulation; treatment of severe acute malnutrition; disease prevention and management; nutrition interventions in emergencies.

237 *Supra* note 81, p. 6.

238 *Ibid.* p. 10. Committee on World Food Security (CFS) Civil Society Mechanism (CSM) meeting with SUN Coordinator Gerda Verburg, Rome, 18 October 2016.

239 This is illustrated, for example, by SUN's progress report (2017) which highlights that on average spending for nutrition-sensitive programmes in SUN countries has increased by 4% per cent while that for nutrition-specific interventions has increased by 29% per cent. SUN. *Annual Progress Report 2017*. docs.scalingupnutrition.org. When speaking about 'evidence' informed interventions, such as those promoted by the SUN initiative, it is important to note that the 'evidence' referred to is biased in nutrition towards nutrition-specific interventions. See for example: Lawrence M. et al. 2016. "Evidence Synthesis and Translation for Nutrition Interventions to Combat Micronutrient Deficiencies with Particular Focus on Food Fortification". In *Nutrients* 8(9):555. ncbi.nlm.nih.gov. A recent World Bank report does not even consider nutrition-sensitive interventions in their analysis. For example, when calculating the investment needed for stunting, it is mainly about supplements. The report notes that "Evidence of the impact of nutrition-sensitive interventions on stunting—such as improving food security and dietary diversity as well as women's education and empowerment—is more limited. Therefore [the focus is] primarily on the nutrition-specific interventions". See World Bank. 2017. *An Investment Framework for Nutrition: Reaching the Global Targets for Stunting, Anemia, Breastfeeding, and Wasting*, page 47. openknowledge.worldbank.org

240 Gupta, Jonsson, and Rundall. "Is it enough to declare Conflicts of Interest?" *The Lancet* 382 (2013): 1550.

241 BMA. *Update* 46 (March 2014): 25.

242 Black et al. *The Lancet* 382 (2013). thelancet.com

243 Still applied due to delays in adopting the draft FNS Policy. *Supra* note 204.

244 *Supra* note 205.

245 Strategy 2.4 of the draft FNS Policy, for example, is dedicated to "increase supply and access to essential nutrition supplies for management of malnutrition" and includes actions to "ensure adequate supply of therapeutic feeds in all health facilities; integrate nutrition supplies in the national essential medical supply chain system; and to scale up local production of therapeutic feeds". UNAP includes among its expected outputs a policy promoting therapeutic foods and the inclusion of therapeutic foods on the essential drugs list.

246 For children above six months, which applies to most children presented at the Unit.

247 Health workers at Mwanamugimu Nutrition Unit. Kampala, December 2017.

248 UNICEF supplies imported RUTF to the nutrition unit. RUTF for HIV patients is procured from the local manufacturer with support of USAID.

249 Focus group discussion with mothers/caregivers at Mwanamugimu Nutrition Unit. Kampala, December 2017.

250 Schuftan and Jonsson. "Ready-to-Use Therapeutic Foods: A Warning". *Right to Food and Nutrition Watch* (2011): 50. Arana Cedeño. "Protecting Children's Right to Food and Nutrition in Emergencies: Local Solutions Come First". *Right to Food and Nutrition Watch* (2017): 91.

251 Report of the 36th Session of CCNFSDU, Bali, Indonesia REP15/NFSDU. Paras 166-183.

252 *Ibid.*

253 Report of the 37th Session of CCNFSDU, Berlin, REP16/NFSDU. Para 81.

254 IBFAN. Briefing on RUTF, 2017. *IBFAN briefing on Proposed draft guideline for Ready To Use Therapeutic Food (RUTF) to be discussed in the 39th session of Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU)*. <https://tinyurl.com/y6v3wae>

255 Suppan. 2011. *The GMO labeling fight at the Codex Alimentarius Commission: How big a victory for consumers?* iatp.org

256 Participants list, Report of the 39th Session of CCNFSDU, Berlin, 4-8 Dec 2017. REP18/NFSDU.

257 WHO. *Nutrition-related health products and the World Health Organization Model List of Essential Medicines – practical considerations and feasibility*. Meeting report. Geneva, 20-21 September 2018. who.int.

258 Representative of International NGO. Guatemala City, 16 May, 2018. This at least in part is attributed to the government setting an ambitious goal of a reduction of 10% in four years in the prevalence of growth retardation.

259 Gobierno de Guatemala. 2012. *Plan del Pacto Hambre Cero*. P. 20. web.maga.gob.gt. Under the current strategy for addressing chronic malnutrition, 1000 Days Window interventions are together with other interventions comprised under the "Primary Level of Care" pillar. See: Comisión Nacional para la Reducción de la Desnutrición Crónica. 2016. *Estrategia para la Prevención de la Desnutrición Crónica*, p. 34. sesan.gob.gt

260 This includes the fortification of sugar with vitamin A.

261 See: SESAN. *MONIMIL PUESTOS DE SALUD: Reporte de Existencia de Insumos para entregar Acciones de la Ventana de los Mil Días y Atención del Hambre Estacional*. March, 2016. <https://bit.ly/2G6r0fy>. In practice, the provision of such food has been largely suspended due to financial and legal challenges in its procurement. CSO representative. Follow-up email conversation with CSO representative by Laura Michèle. 20 August, 2018.

262 Representative of UN Agency, Guatemala City, 9 May 2018. This concern was also reflected in the CESC recommendations to Guatemala in 2014: "The Committee is concerned about reports of the limited impact of the Zero Hunger Plan (...) The Committee urges the State party to intensify its efforts to combat and prevent malnutrition among children, in particular those living in rural and remote areas. It also recommends that the State party ensure that sufficient financial and human resources are available and that the necessary measures are adopted to guarantee the effective implementation and sustainability of the Zero Hunger Plan, strengthening the components that address the structural causes of malnutrition." [emphasis added] UN.Doc E/C.12/GTM/CO/3, 9 December 2014, para 21.

263 Representative UN Agency, Guatemala City, 9 May, 2018. Figures provided by interviewee.

264 Representative International NGO. Guatemala City, 16 May, 2018.

265 MSPAS, INE, Segeplán. 2017. VI Encuesta Nacional de Salud Materno Infantil 2014-2015. ine.gob.gt

266 SESAN, MINEDUC, INE. 2015. *Cuarto Censo Nacional de Talla en Escolares de Primer Grado de Primaria del*

Sector Público de la República de Guatemala.

web.maga.gob.gt

267 *Supra* note 266.

268 FAO. 2018. *Small Family Farms Country Fact-sheet: Guatemala*. fao.org

269 Colectivo Social por el Derecho a la Alimentación. 2017. *Informe Alternativo del Derecho a la Alimentación en Guatemala: Monitoreo de las Directrices Voluntarias del Derecho a la Alimentación 2016-2017*. P. 156.

270 *Ibid.*

271 PBI Guatemala. 2018. *Situation of human rights defenders*. pbi-guatemala.org

272 60% of people live in poverty, 23% in extreme poverty. Interview with UN agency.

273 With a GINI coefficient of 49, Guatemala has one of the highest inequality rates in Latin America. indexmundi.com

274 CONASAN. 2015. *Plan Estratégico de Seguridad Alimentaria y Nutricional 2016-2020*.

275 Community group discussions in La Paz and Matasano, 7 and 8 May, 2018.

276 FAO/OPS/OMS/UE. *Panorama de Seguridad Alimentaria y Nutricional 2017*. Guatemala.

277 A new report monitoring the implementation of the judicial sentences of Camotán will be available on FIAN International's website soon. fian.org

278 An evaluation of the impact of the Zero Hunger Pact carried out by IFPRI in 2016 showed that none of the 1000 Days Window interventions, except for deworming, on their own had impacts on the nutritional status of children below five years. Impact increased when

measures were combined (> 5), however, most households were receiving only between two and four interventions. The most common interventions households benefited from were supplements (folic acid and iron) and counselling concerning breastfeeding. See: *Supra* note 259 (*Estrategia para la Prevención de la Desnutrición Crónica*), p. 21.

279 The 2016-2020 strategy on chronic malnutrition foresees further "focalization" which translates into even lower geographic coverage. According to the Guatemalan Human Rights Ombudsperson, the previously 166 municipalities have been reduced to 82 (in 7 out of 23 departments).

280 Focus of the 2016-2020 strategy is on children below two years and women who are pregnant and/or with children below two years. Prior to the country's joining of SUN and the emphasis on the 1000 Days Window, the target groups had been children below five years, pregnant and breastfeeding women, and women of reproductive age. See: *Supra* note 260, pp. 28-29. See also (concerning the earlier target groups): Unidad Nacional de la Esperanza: Plan de Gobierno. Guatemala, 2008.

281 In one of the communities it was also reported that criteria for selection of beneficiaries was the weight/height as measured by health centres which ran the risk of missing children with the poorest values who do not access health centres. Political party affiliation was mentioned as another criteria.

282 Community group discussions in La Paz and Matasano, 7 and 8 May, 2018.

283 Interview with a doctor who has been attending cases of undernutrition for over 20 years in Jocotán and Camotán, May 8, 2018.

284 The only comment made by community members was that breastfeeding had been a custom in the community independent of any programme.

285 Maharashtra has been lauded globally as a "success story" for its rapid and significant decline in undernutrition amongst children between 2006 and 2012, when childhood stunting fell from 39 to 24%. It is evident that the state of Maharashtra has been effectively tackling the problem of child malnutrition since the year 2005 with the establishment of the RJMCHN Mission. The mission did a commendable job through coordinated action on nutrition of children with a reach right up to the households. Haddad, L, Nisbett, N, Barnett I, Valli, E (2014). *Maharashtra's Child Stunting Declines: What is Driving Them? Findings of a Multidisciplinary Analysis*. Brighton: IDS. opendocs.ids.ac.uk

286 Information received through right to information requests.

287 According to an analysis of Results for Development (RAD) and Amaltas (2016), the SUN secretariat provided technical guidance on budget analysis and financial tracking for nutrition to the RJMCHN Mission. rad.org. In a video interview, Ms. Mridula Sinha, the Director of the Jharkhand State Nutrition Mission and SUN focal point for the state stated that the mission is fascinated with the SUN movement. She mentioned that the association with SUN is helping the state mission gain new knowledge, while providing a sense of solidarity as part of a big movement. She said that the state mission would like to disseminate information via blogs and other means as SUN does. See ENN. "Interview with Mridula Sinha, Director of Jharkhand Nutrition Mission". 30 January, 2017. enonline.net

288 See: *Tabassum Barnagarwala*. "Maharashtra govt stops distribution of RUTF". *The Indian Express*, 31 October, 2017. indianexpress.com Rema Nagarajan. "Centre tells Jharkhand to stop using commercial packaged food to treat malnutrition". *The Times of India*, October 17, 2013. timesofindia.indiatimes.com

289 While state governments may decide about using them with approval from the National Technical Board on Nutrition, available information indicates that such approval had not been granted. For the Government of India's position on RUTF, see: Letter sent by the Ministry of Women and Child Development, Government of India, on the "Use of RUTF in the management of children with SAM" to all the state governments on 28 August, 2017. <https://wcd.nic.in/sites/default/files/RUTF.PDF>.

290 Overweight and obesity are on the rise, especially among women (affecting one in three). WHO. 2016. *Diabetes Country Profiles: Uganda*. who.int

291 Point iv of Strategy 2.5 ("Integrate Nutrition in Disease Control and management – refer to lancet series for actions on this") states: "Create a point on NCDs; Prevention and management of nutrition-related non-communi-

cable diseases (NCDs)". *Supra* note 205. This is despite the fact that the rise of overweight and obesity is recognized in both the draft and the previous policy as a major upcoming problem. Already the 2003 Policy recognized that: "Uganda is also experiencing a marked upsurge of chronic non-communicable diseases (UDHS, 2000/2001). Some of these are caused by over-consumption of energy-rich foods, smoking, drugs and increasingly sedentary lifestyles. They include hypertension, obesity, cardiovascular diseases, diabetes and gout. Whatever their cause, they lead to high death rates, various disabilities and high medical care costs. This phenomenon of nutrition transition is becoming common in Uganda and needs to be addressed." Government of Uganda. 2003. *The Uganda Food and Nutrition Policy*, para 3.7 (Nutrition), p. 15. [extranet.who.int](#)

292 Strategy 2.1, intervention 3 seeks to "increase consumption of both raw and processed nutritious foods". The promotion of processed nutritious food refers to enriched and fortified food. See "Expected Outputs" on page 34.

293 Focus group discussion at Mwanamugimu Nutrition Unit. Kampala, December 2017.

294 Nearly one in two adults are overweight, while 16% per cent are obese, with prevalence higher among women. WHO. 2016. *Diabetes Country Profiles: Guatemala*. [who.int](#)

295 The Ministry of Education when asked about this was not aware. The Colectivo Social por el Derecho a la Alimentación some years back proposed the regulation of unhealthy food in schools within INCOPAS but did not receive support for this proposal at the time.

296 Interview with a doctor who has been attending cases of undernutrition for over 20 years in Jocotán and Camotán. Jocotán, 8 May, 2018.

297 Local NGO representative, Camotán, 7 May, 2018.

298 NGO representative. Follow-up email conversation by Laura Michéle.

299 Azúcar de Guatemala (or, Asociación de Azucareros de Guatemala – ASAZGUA) is the association of the Guatemalan sugar agroindustry. In 1990 it created FUNDAZUCAR as its "social arm" to implement educational, health and development projects. See: Azúcar de Guatemala. "Evolución de la Agroindustria Azucarera de Guatemala". [azucar.com.gt](#) FUNDAZUCAR, a member of the Alianza por la Nutrición, which participates in the Guatemalan SUN Multi-Stakeholder Platform, is very active in promoting its corporate social responsibility activities and has been collaborating with the Ministry of Education in 2012-2015 in the development of methodologies. Azúcar de Guatemala is also a corporate donor of FUNDESA, which coordinates the Alianza por la Nutrición.

300 Both Nestlé and PepsiCo are partners of CentraRSE. See: CentraRSE. "Socios". [centrase.org](#) Domino's is a corporate donor of FUNDESA. See: FUNDESA. "Empresas Donantes". [fundesa.org.gt](#)

301 SUN strategy documents provide little guidance as to what these should look like, so practically any intervention in a sector that affects nutrition (e.g., agriculture, water, education) can be considered a nutrition-sensitive intervention under SUN.

302 The use of biofortification as strategy for addressing micronutrient deficiencies is highly contested. For an overview, see: Welthungerhilfe and Terre des Hommes. 2014. *Food fortification: A "techno-fix" or a sustainable solution to fight hidden hunger?* [welthungerhilfe.de](#). According to WHO "further research is needed before specific recommendations can be made". WHO. "Biofortification of staple crops". [who.int](#).

303 Nutrient is defined by Codex Guidelines on Nutrition Labelling (CAC/GL 2-1985) to mean: any substance normally consumed as a constituent of food: a) which provides energy; or b) which is needed for growth and development and maintenance of life; c) or a deficit of which will cause characteristic biochemical or physiological changes to occur.

304 IFPRI. 2002. *Biofortification: Harnessing Agricultural Technologies to Improve the Health of the Poor*. [ebrary.ifpri.org](#)

305 Report of the 36th Session of the Codex Committee on Nutrition and Foods for Special Dietary Uses.

306 CCNFSDU Report of the 40th Session, Berlin, Nov 2018 (REP19/NFSDU) and delegate position papers. Because the Chair refuses to allow recording of meetings in Germany, the report writing is always fraught with difficulty.

307 45th Session of CCFL, May 2019, Ottawa Canada.

308 Report of the 41st Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) November 2019. [fao.org](#)

309 SUN. 2011. *Private Sector Engagement Toolkit*. [scalingupnutrition.org](#).

310 For example, the Water Efficient Maize for Africa (WEMA) project, led by the African Agricultural Technology Foundation, has developed both conventional maize hybrids and GM varieties. See: Winnie Nanteza. "WEMA achieves major milestone in African agriculture". *Cornell Alliance for Science*, 29 May, 2018. [allianceforscience.cornell.edu](#).

311 *Supra* note 309, slides 41-43. The African Agricultural Technology Foundation is described in the toolkit as a "not-for-profit organisation that facilitates and promotes public/private partnerships for the access and delivery of appropriate proprietary agricultural technologies". It is funded by the Bill & Melinda Gates Foundation and includes Monsanto among its partners. The Business Alliance against Chronic Hunger (BAACH) is a World Economic Forum Public-Private Partnership initiative which includes Monsanto, Unilever and Coca Cola and equally receives funding from the BMGF. The BAACH project in Kenya promotes the distribution of vouchers for commercial seeds and fertilizer to small scale farmers. See: Monsanto. "Community Focus". [monsantoafrica.com](#).

312 This market logic is commonly put forward by public-private partnerships in nutrition. See for example: FIAN International. 2014. *G8 New Alliance for Food Security and Nutrition in Africa: A Critical Analysis from a Human Rights Perspective*. [fian.org](#)

313 *Supra* note 309, slide 42.

314 For more information, see: CFS Civil Society Mechanism: *Connecting Smallholders to Markets: An Analytical Guide*. [csm4cfs.org](#)

315 This is not surprising given the key role played by the agro-food industry in SUN. For an overview of business members and their commitments under SUN see: SUN. SUN Business Network Company Commitments. (Web link currently not working) See also Box 4.9.

316 Government of Uganda. 2003. *The Uganda Food and Nutrition Policy*, p. 8. [extranet.who.int](#)

317 Strategy 2.3 ("Promote the consumption of nutrient-enhanced foods"). *Supra* note 204, pp. 18, 35.

318 *Supra* note 204, p. 21.

319 *Supra* note 205, para 74.

320 District official. Kasese, December 2017.

321 *Ibid*.

322 "The mission of the policy is to: "Transform subsistence farming to sustainable commercial agriculture." Ministry of Agriculture, Animal Industry and Fisheries. 2013. *National Agricultural Policy*. Para 19. [agriculture.go.ug](#)

323 Government official. Kampala, January 2018.

324 Objective 2, para 23 (iii).

325 SUN. "SUN Donor Conveners".

[scalingupnutrition.org](#)

326 Harvest Plus is a subsidiary of IFPRI, which plays a lead role in SUN, with its Director General being a member of SUN's Lead Group. As noted on the SUN country profile, Uganda was at the time of joining SUN "improving its Action Plan for Nutrition by incorporating lessons learned during the conference organized by IFPRI on the use of agriculture to improve nutrition and health". See: SUN. "Uganda". [scalingupnutrition.org](#). For more information on Harvest Plus work in Uganda, see: Harvest Plus. "Uganda". [harvestplus.org](#)

327 Uganda has been selected pilot country for the breeding and dissemination of biofortified orange-fleshed sweet potato. USAID expects up to 237,000 households to plant and eat the potato by 2018. USAID. "Orange-fleshed sweet potatoes: improving lives in Uganda". [2012-2017.usaid.gov](#)

328 See *supra* note 326.

329 For more information, see BMGF. "Building Better Bananas". [gatesnotes.com](#).

330 See: World Vision International. "Other valued partners". [wvi.org](#).

331 District official. Mpigi, December 2017.

332 The draft FNS Policy highlights biofortification but does not provide guidance as to its operationalisation. The National Agricultural Policy states that the government shall "[d]evelop and implement a policy and regulatory framework for biotechnology in agriculture". Para 23 xii.

Recently a task force was established to develop a strategy on biofortification.

333 The Food and Nutrition Technical Assistance Project (FANTA) is the USAID implementing partner for nutrition in Uganda. It is funded by USAID and managed by FHI 360. Partners of FANTA include Helen Keller International, Nutrition International (formerly micronutrient initiative), and IFPRI. For more information on the project in Uganda, see: FANTA. "Uganda". [fantaproject.org](#)

334 NGO representative. Kampala, January 2018.

335 District official. Kasese District,

December 2017.

336 Representative UN Agency, Guatemala,

17 May, 2018

337 "WFP supports smallholder farmers' agriculture by expanding the production of nutritious foods using bio-fortified seeds of staple grains. The consumption of biofortified maize and beans improved food security and nutrition among households in the Dry Corridor, where WFP provided biofortified maize and beans." See WFP. 2018. *WFP Guatemala Country Brief*. [docs.wfp.org](#)

338 Super Cereal Plus is a fortified blended food product that contains maize (58%), de-hulled soya beans (20%), dried skimmed Milk Powder (8%), Sugar (10%), vegetable oil and vitamins and minerals premix. See: [itemscatalogue.redcross.int](#)

339 While in 2015 6,780 new learning centers serving 176,339 families were established, this went down to only 152 centers a year later, with only 14% of the families receiving continued support. *Supra* note 269, pp. 82, 159, 168.

340 CSO representative. Follow-up email conversation by Laura Michéle. 20 August, 2018. The general comment that programmes need to transcend governments and be state commitments preventing their discontinuity with a change in government was made by several interviewees (Representative UN Agency, 16 May, 2018; Representative Bilateral Agency, 18 May, 2018)

341 Representatives UN Agencies, Representative Regional Institution, Representative Local NGO. Guatemala City, 9, 11, 16 May 2018.

342 According to an NGO official (Matasano, 8 May, 2018), the health centres were offering talks about hygiene of children. These practices, however, require access to safe water, which often does not exist in communities. Instead of trying to find solutions to this, they criticize community members for not following hygiene practices.

343 Community group discussion, Matasano, 8 May, 2018.

344 Doctor working at hospital in Jocotán,

8 May, 2018.

345 Representative UN Agency, Guatemala City, 9 May, 2018

346 Government Representative, Guatemala City, 9 May, 2018

347 Local NGO Representative, Guatemala City, 11 May, 2018

348 Regional Institution Representative, Guatemala City, 11 May, 2018

349 International NGO representative. Guatemala City, 16 May, 2018

350 *Ibid*.

351 Representative Regional Institution. Guatemala City, 11 May, 2018; Representative UN Agency. Guatemala City, 16 May 2018; Representative International NGO. Guatemala City, 15 May, 2018; Representative Association of NGOs, Guatemala City, 18 May, 2018.

352 *Ibid*.

353 Private Sector Organisation Representative. Guatemala City, 18 May, 2018.

354 Representative International NGO. Guatemala City, 15 May 2018; Representative Regional Institution. Guatemala City, 11 May, 2018.

355 The lack of coordination was mentioned by various interviewees, while discussions with community members showed the limited information these had about the 1000 Days Window programme and SUN. See Key Finding 5 for further details.

356 Representative International NGO. Guatemala City, 16 May, 2018

357 Community group discussions. La Paz and Matasano, 7 and 8 May, 2018.

358 Anaemia increased from 49% to 53% in children under five years and from 23% to 32% in women aged 15-49 between 2011 and 2016. Uganda Demographic and

- Health Survey 2011 and 2016. dhsprogram.com; dhsprogram.com
- 359 *Ibid.*
- 360 District official. Kasese, December 2017.
- Health workers at Mwanamugimu Nutrition Unit. Kampala, January 2017.
- 361 Health workers. Kampala, December 2017
- 362 The IMAM guidelines in Uganda recommend that RUTF should be used/fed to children alongside locally available foods.
- 363 District official. Mpigi District, December 2017.
- 364 *Ibid.*
- 365 District official. Moroto District, March 2018.
- 366 *Ibid.*
- 367 UNICEF imports and directly supplies RUTF to the nutrition unit. For treatment of HIV patients, RUTF is procured with support from USAID from the local manufacturer. While RUTF, F75 and F100 have been included on the list of essential medicines, the Government has reportedly not allocated any funds for their purchase.
- 368 NGO Representative. Kampala, January 2018.
- 369 District official. Mpigi District, December 2017.
- 370 Para 44.
- 371 For example: "Core to the implementation of this policy will be awareness creation and a mindset change that views nutrition as an investment and not a costs". Para 64.
- 372 Para 84.
- 373 According to SUN's Strategy and Roadmap 2016-2020, by 2020 the initiative will have supported SUN countries to "have multi-stakeholder partnerships for coordination at national levels" and "have all key stakeholders, including communities, making measurable contributions to scaling up nutrition". *Supra* note 81, p. 8.
- 374 Government official. Kampala, January 2018.
- 375 See *supra* note 209.
- 376 *Supra* note 209, p. 23.
- 377 *Supra* note 209, p. 26.
- 378 For instance, GAIN in the draft Food and Nutrition Strategy and Investment Plan (2004) and IFPRI in the draft seed policy (2017).
- 379 The policy explicitly mentions SUN in the introduction (as point of reference for the policy) as well as under Objective 1 ("To Strengthen the policy, legal and regulatory environment for scaling up food and nutrition security interventions") Action iii: "Promote multi-stakeholder engagement platforms and partnerships for effective delivery of nutrition interventions and joint accountability in the context of SUN Movement." *Supra* note 206, para 31.
- 380 The importance of multi-stakeholder partnerships is highlighted throughout the policy, e.g., "This policy will prioritise multi-stakeholder partnerships to enable achievement of desired results." *Supra* note 205, para 38.
- 381 *Supra* note 205, p. 2.
- 382 See section 6.1.3 "Funding as part of the Public Private Partnerships: With passage by Parliament of the national public-private partnerships for health policy, Government will attract funding from the private sector to implement a series of interventions under UNAP with joint utilization of both government and private sector financing." *Supra* note 205.
- 383 A robust conflict of interest policy would have forbidden such dependency on donor and private sector funds to arise in the first place.
- 384 The OECD Guidelines focus on the integrity of public officials, their duty to serve the public interest and engender an organisational culture. [oecd.org](https://www.oecd.org)
- 385 Government Official. Guatemala City, 9 May, 2018. UN Agency. Guatemala City, 9 May, 2018. International NGO. Guatemala City, 15 May, 2018. Private Sector Representative. Guatemala City, 18 May, 2018.
- 386 This is in particular the National Forum for Dialogue and Social Participation, INCOPAS. See Key Finding 5 for further discussion of INCOPAS.
- 387 Government Official. Guatemala City, 9 May, 2018.
- 388 Government Official. Guatemala City, 9 May, 2018
- 389 Representative Regional Institution. Guatemala City, 11 May 2018; Government Official. Guatemala City, 9 May, 2018.
- 390 The issue of SUN functioning in duplication or competition with other efforts to address malnutrition also came up in the recent SUN Mid-Term Review. See p. 73 on Vietnam.
- 391 Strategic objective 3 ("Implement effective actions aligned with Common Results"). *Supra* note 81, p. 19.
- 392 Representative UN Agency. Guatemala City, 11 May, 2018; Government Official. Guatemala City, 9 May, 2018.
- 393 For example, WFP relies on its own VAM information system that takes data from school height surveys and maternal-infant surveys to identify high priority communities. The Education Ministry relies on the weight-for-height indicator generated periodically by Save the Children.
- 394 Government Official. Guatemala City, 9 May, 2018.
- 395 CSO representative. Follow-up email conversation by Laura Michéle. 20 August, 2018.
- 396 Representatives of two UN Agencies. Guatemala City, 9 and 16 May, 2018.
- 397 Letter by Tom Arnold to Alok Ranjan, Chief Secretary, Government of Uttar Pradesh, 24 May, 2016. docs.scalingupnutrition.org.
- 398 Letter by Gerda Verburg to Mridula Sinha, Director General, Jharkhand State Nutrition Mission, 15 September, 2016. scalingupnutrition.org
- 399 Video interview given to Charulatha Banerjee, regional knowledge management specialist of the Emergency Nutrition Network (ENN), 30 January, 2017. enonline.net
- 400 Manik Gupta. "India's result in nutrition will improve soon: UN expert". *Press Trust of India*, 25 May, 2017. pnews.com.
- 401 See for example: TWN. "Activists: Don't join SUN, a nutrition drive". *Times of India*, 24 May, 2017. timesofindia.indiatimes.com; Sharma, N. "RSS arm demands clear policy on child malnutrition problem". *Livemint*, August 27, 2017. timesofindia.indiatimes.com.
- 402 SUN. 2017. *SUN Business Network Company Commitments*. sunbusinessnet.wpengine.com
- 403 World Bank Institute and GAIN. 2008. *Britannia, Naandi and GAIN: A Public-Private Partnership for Delivering Nutrition through Fortification in India*. documents.worldbank.org
- 404 DFID. *Business Case and Intervention Summary. Stimulating the global market for Ready-to-Use Therapeutic Foods (Amul - Valid Nutrition)*.
- 405 Email response to questionnaire circulated by Patti Rundall. May 2018.
- 406 Example provided by independent public health nutritionist in follow-up conversation with Patti Rundall. June 2018.
- 407 For a recent compilation of case studies concerning collaboration with food and beverage industry in public health policy and COI, see: UK Health Forum. 2018. *Public health and the food and drinks industry: The governance and ethics of interaction. Lessons from research, policy and practice*. London: UKHF. idrc.ca
- 408 GSO's Executive Director Katherine Hagen was also Chief Executive Officer and Principal Consultant for Hagen Resources International, the parent organization of GSO, as well as the Council for Multilateral Business Diplomacy (CMBD). At the time of writing this report neither the GSO nor the CMBD website can be any longer accessed.
- 409 BMGF. "The Global Social Observatory". gatesfoundation.org
- 410 Global Social Observatory (2015). *Engaging in the SUN Movement: Preventing and Managing Conflicts of Interests. Reference Note and Toolkit*. scalingupnutrition.org
- 411 See: Richter, J. 2015. "Conflicts of interest and global health and nutrition governance - The illusion of robust principles." *BMJ* (Rapid Response), 12 February 2015. bmj.com
- 412 See definition of the Institute of Medicine on institutional conflicts of interest (Chapter 8) in Lo, B. and M. Field (editors). 2009. "Institute of Medicine (US) Committee on Conflict of Interest in Medical Research, Education and Practice". *Conflict of interest in medical research, education and practice*. Washington DC: National Academics Press.
- 413 *Supra* note 410, p. 14.
- 414 *Supra* note 410, p. 11.
- 415 E.g., Richter (2015), *supra* note 411.
- 416 *Supra* note 81, p. 24.
- 417 WHO. 2017. "Safeguarding against possible COI in nutrition programmes: Approach for the prevention and management of COI in the policy development and implementation of nutrition programmes at country level. Feedback on the WHO Consultation". who.int
- 418 *Ibid.*
- 419 See also Chapter 2 on how the meaning of the term stakeholder has changed over time
- 420 *Supra* note 81, p. 8.
- 421 See for example: "By establishing a set of common results, agreed by key sectors and stakeholders, supportive partners are bound together to deliver for those who suffer most", "Civil society alliances are engaged to ensure that disaggregated information is made accessible to and used by communities (...)." "There will be no sustainable improvements in nutrition until women are empowered as leaders in their families and communities." *Supra* note 81, pp. 19, 22.
- 422 See for example: "The Civil Society Network (CSN) contributes to ensuring that policy, plans and pledges are implemented in the interest of people and reach the populations most vulnerable to malnutrition. National civil society alliances unite diverse organisations, contribute to implementing nutrition priorities, coordinate advocacy and action on nutrition at all levels, ensure government policies and plans reflect the realities of those who suffer most, ensure rights are realised and strengthen citizen action and inclusion in decision making processes." *Supra* note 81, p. 32.
- 423 For example, the case of USAID-funded CSOs was mentioned by interviewees both in Uganda and Guatemala.
- 424 See membership of the CSA Guatemala (*supra* note 216) as well as of the international CSN (*supra* note 104). This is relevant also in the sense that the "watchdog function" of civil society within SUN is often highlighted by SUN members and the secretariat in response to concerns about the participation of business in the initiative. The argument made is that private sector participants are "checked on" by the critical CSOs within the initiative and therefore is no longer problematic.
- 425 See Chapter 1 and especially Pillar Four of Analytical Framework.
- 426 CSO representative (Guatemala). Guatemala City, 18 May, 2018. At the time of interviews, the Guatemalan CSA had following members: Save the Children International, Plan International, Action against Hunger, World Vision, and the Secretary of INCOPAS.
- 427 Community group discussions. La Paz and Matasano, 7 and 8 May, 2018.
- 428 Community members did not know about SUN or its strategy. Two women reported having heard about the 1000 Days Window at a health centre but that they did not understand what it was about.
- 429 INCOPAS is integrated by 10 social sectors, which includes civil society but also the private sector. For more information, see: INCOPAS. "Nosotros". incopas.org
- 430 *Ibid.*
- 431 INCOPAS has no financial independence and is located under the same roof as SESAN. Hence it is under the direct control of SESAN. Representative UN Agency. Guatemala City, 11 May, 2018. INCOPAS contributions are only taken into account when SESAN requests this, which implies that "real" participation in the decision-making is not guaranteed. Several grassroots organisations have in recent years left the space as they felt their contributions were not taken into account. CSO representative. Follow-up email conversation with Laura Michéle. 20 August, 2018.
- 432 In the case of INCOPAS this would entail in particular ensuring its complete institutional and financial independence from SESAN.
- 433 Rather than SUN CSO members participating in INCOPAS, the INCOPAS secretary participates in the SUN CSA.
- 434 This includes World Bank, UNICEF, WFP, DFID and USAID.
- 435 Government official. Kampala, January 2018.
- 436 Government official. Kampala, January 2018
- 437 Village Health Team official. Nakapiripirit District, January 2018.
- 438 Impact Evaluation Infant and Young Child Feeding & Vitamin and Mineral Powder Program, Uganda, Dissemination Meeting, Kampala, 2 May 2018 (Power Point Presentation).
- 439 "This policy focuses on empowering communities with resources, knowledge and skills to support

mindset change towards food and nutrition security, and full involvement in the implementation of interventions [emphasis added].” *Supra* note 205, para 44.

440 *Supra* note 205, para 43.

441 Government official. Kampala, January 2018.

442 Government official. Kampala, January 2018.

443 *Supra* note 81, p. 25.

444 See for example a video published by SESAN on “Intervenciones de la Ventana de los Mil Días” (1000 Days Window Interventions), [youtube.com](https://www.youtube.com). Examples from the draft Ugandan FNS Policy include: “The policy focus will be on mindset change at the household level on the type of foods that generate nutrients, which women can prepare for their households while involving men in the advocacy and behavior change campaigns”, “This policy will focus on supporting a cultural progression that exposes men to the details of nutrition and attach that importance to their pursuit of income – so that they appreciate that health for each member of the household is wealth”. *Supra* note 205, paras 73 and 85.

445 SUN’s vision most clearly expresses this in stating that “collective action ensures every child, adolescent, mother and family can realise their right to food and nutrition, reach their full potential and shape sustainable and prosperous societies” [emphasis added].

Supra note 81, p. 6.

446 *Supra* note 81, p. 6.

447 *Supra* note 81, p. 32.

Referencing this report

Title

**When the SUN casts a shadow.
The human rights risks of multi-stakeholder
partnerships: the case of Scaling up Nutrition (SUN)**

Authors

**Laura Michéle, Stefano Prato,
Patti Rundall, Flavio Valente**

This study explores how the shift to multi-stakeholder models influences public policy spaces; the framing of agendas; the capacity and political will of governmental and intergovernmental institutions (such as the UN) to regulate in the public interest; and people's ability to claim their human rights, with special but not exclusive reference to the right to adequate food and nutrition (RtAFN).



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