Reflections on the UN Global Action Plan (GAP) on Child Wasting: How can the GAP on Child Wasting address gaps in continuity of care?


Background
Globally, at least 47 million children under five are wasted, 14 million of them severely. The more severe the wasting, the more life-threatening it becomes, especially if children are stunted, or born small. Children who suffer from wasting are at increased risk of mortality (as much as 11-12 times higher than their healthy counterparts) and wasting is estimated to be responsible for 12.6% of deaths among children under the age of five each year. Although wasting is a significant contributor to child mortality, wasting can be treated in community settings with a product known as ready-to-use therapeutic food (RUTF). This has enabled more children to be treated than ever before.

In 2019, an estimated 11 million children accessed treatment for wasting but this varies greatly by context. Addressing wasting at a global scale remains a huge challenge and coverage of treatment remains low. While coverage has increased, current global estimates indicate only around twenty three percent of severely wasted children in 2019 had access to treatment.

In 2019, the 60th edition of ENN’s established publication, Field Exchange (see box 1), documented programme experiences and research on continuity of care for the treatment of wasted children. Continuity of care (CoC) for treatment means supporting children towards recovery irrespective of the severity of their condition. Effective CoC for treatment requires aligned policies, guidance, financing, and programmes. The rich compilation of programme experiences and research in Field Exchange 60 found poor CoC for children with wasting due to a variety of factors. Three priority areas for action were identified to help address these (outlined in the following section). Follow up actions included, in December 2019, a letter to the UN Secretary General signed by 45 members of civil society calling for reform of the UN’s approach to managing wasting.

The release of Field Exchange 60 coincided with UN Agencies’ global initiative to determine how they could provide a more unified response to care for wasted children. In March 2020, five UN agencies (UNICEF, WFP, WHO, UNHCR, FAO) published the Global Action Plan (GAP) on Child Wasting: A Framework for Action (see box 2). In May 2020, the Field Exchange Team reviewed the Field Exchange 60 priority actions relative to the GAP Framework. This brief outlines our findings to help inform next steps in the development and finalisation of the GAP on Child Wasting.

About Field Exchange
The Emergency Nutrition Network (ENN) is a UK based charity dedicated to improving knowledge, stimulating learning and building evidence on nutrition to improve policy and practice worldwide, especially in humanitarian contexts and fragile and conflict affected states. ENN produces a regular publication, Field Exchange, that documents programme experiences and research to support learning and programming on nutrition worldwide, especially where malnutrition is prevalent and in fragile and conflict affected states. It is a rich source of experiences and stories of innovation and challenges faced by frontline workers worldwide. https://www.ennonline.net/fex/60/en

Advocacy from different actors was critical to the development of the GAP Framework and progress seen to date. It remains essential to support the finalization, implementation & accountability on the GAP on Child Wasting.

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The GAP Framework:

• Identifies UNICEF as the UN agency responsible for child wasting, but no details are provided on what authority and accountability UNICEF has vis-à-vis the other four sister UN agencies.
• Outlines broad agency roles that reflect how they will work better together but not how they will work differently.
• Commits to an accountability mechanism but does not provide details on the function, modality and scope.
• Implies that UNICEF is responsible for the care of medically complicated cases, raising questions about the inpatient care that WHO currently oversees in some settings.
• Notes the need for actions to strengthen national health information systems to monitor and report on wasting but does not outline mechanisms to improve data sharing across the UN agencies.
• Involved some regional workshops and rapid public consultation, but the process was not transparent nor predictable.

A dedicated body of research on wasting should be established, allowing WHO to provide up-to-date guidance on treatment and care, and advice for governments and programmers. In the meantime, interim guidance is urgently needed.

Field Exchange 60 highlights areas of innovation and action that could help to address gaps in CoC for treatment. These include emerging research on simplified approaches to identify and treat children in the community and in health facilities. It notes, however, that moderately wasted children in particular are missing out on care due to lack of attention, a lack of global targets, a poor evidence base, and lack of guidance from WHO on how to treat them.

The GAP Framework:

• Clearly identifies WHO as the lead agency to coordinate new evidence and develop guidance on prevention and treatment of wasting (by end of 2021) and on the updating of national guidelines (by end of 2023). It does not detail the exact scope of the guidelines nor the process for their development.
• References a WHO-led accelerated guidance process that can respond to new evidence and country needs.
• States that that the research agenda will be further detailed in consultation with key stakeholders at global, regional, and country levels. Specific, but limited, research questions are included in the GAP but sources aren't specified.
Field Exchange 60 described problems with scaling up services for wasting treatment, health system capacity problems and difficult supply-chain challenges for ready-to-use food (RUF). The GAP Framework: • Notes that key nutrition products should be routinely available and managed as part of national health systems with supply chain systems stream-lined to deliver them. It does not give actions or guidance on how to streamline systems. • Problems with the UN supply chain are not recognised and it is unclear which agency is responsible for supplying key nutrition products and managing supply chains.

Continuing progress together
The GAP Framework has begun to address several of the critical gaps in CoC for treatment of wasted children identified by Field Exchange 60. Now, the development of the Roadmap provides an opportunity to elaborate details, provide clarity on delivery and determine the various roles and responsibilities of the UN to deliver on the GAP on Child Wasting.

How can the advocacy community contribute to this effort?
The GAP on Child Wasting is an unprecedented, multi-agency action to prevent wasting and improve treatment. Advocacy is critical to help ensure areas for actions are prioritised and addressed in the Roadmap and to galvanise key stakeholders at international, regional and country levels to engage in and contribute to this effort. Priority advocacy and action items include the need to:

1. Establish an independent accountability mechanism for both UNICEF as lead agency and for the respective UN agencies in their operational/guidance development roles.
2. Clarify UNICEF’s authority as lead agency and how this will be implemented.
3. Secure commitment to, and establish, which agency will lead on data continuity across services.
4. Provide a detailed plan with timeline for WHO guidance development, including interim guidance and clarity on the development and delivery of a coordinated research agenda.
5. Clarify whether UNICEF is responsible for the management of complicated wasting, or if WHO still has a role to play in this.
6. Commit to a timely, independent review of RUF supply chain management performance across contexts.

Additional considerations:
- The GAP Framework does not address what each UN agency should do differently – system reform may well be needed to more efficiently deliver CoC at scale. A review of current UN mandates may be needed to enable such reform. This would benefit from documentation of the current mandate development process across all five relevant UN agencies.
- The stated GAP Framework principle to promote government leadership and ownership is welcome. It will be critical to examine how wasting management is reflected in national costed plans and inform financing arrangements. The GAP Framework does not give any authority to government over UN ways of working and operations at country level.
- The GAP on Child Wasting does not address all forms of malnutrition which we increasingly understand are interrelated; a further GAP on all forms of malnutrition will likely be needed in the future.

Finally, a clearly outlined, transparent process and timeline for the Roadmap development and finalisation of the GAP on Child Wasting is essential to ensure timely and comprehensive contribution to, and buy-in from, a range of stakeholders, including government, civil society, funders, the private sector, and programmers.

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3. Estimate based on UNICEF reported admissions of children with severe wasting and other forms of acute malnutrition into therapeutic treatment in 2019 (4.9 million children) and WFP Annual performance report, 2019 (to be published).
4. UNICEF Nutridash data demonstrates a four-fold increase in the number of children treated between 2009 and 2017 (from 1.1 to 4.4 million treated annually). Available from https://acutemalnutrition.org/.
5. Coverage will vary considerably by country and region.
6. RUF is a broader category that includes RUTF in addition to other products used in the management of wasting.