

116TH CONGRESS
1ST SESSION

S. RES.

Recognizing the importance of sustained United States leadership to accelerating global progress against maternal and child malnutrition and supporting the commitment of the United States Agency for International Development to global nutrition through the Multi-Sectoral Nutrition Strategy.

IN THE SENATE OF THE UNITED STATES

Ms. COLLINS (for herself, Mr. COONS, Mr. BOOZMAN, Mr. SCHUMER, Mr. YOUNG, Mrs. MURRAY, Mr. CRAPO, Mr. CASEY, Ms. MURKOWSKI, Mr. REED, Mr. CRAMER, Ms. WARREN, Mr. MORAN, Ms. CANTWELL, Mr. RUBIO, Mr. BROWN, Mr. GARDNER, Mr. MARKEY, Mr. SULLIVAN, Mr. DURBIN, Mr. BLUMENTHAL, Mr. CARDIN, Ms. SMITH, Mr. WYDEN, Mr. KING, Mr. JONES, Mr. MERKLEY, and Ms. KLOBUCHAR) submitted the following resolution; which was referred to the Committee on

RESOLUTION

Recognizing the importance of sustained United States leadership to accelerating global progress against maternal and child malnutrition and supporting the commitment of the United States Agency for International Development to global nutrition through the Multi-Sectoral Nutrition Strategy.

Whereas, of all children under 5 years of age worldwide—

- (1) 149,000,000, or 21.9 percent, are stunted or chronically undernourished;

(2) an estimated 7.3 percent, or nearly 49,000,000, experience life-threatening acute malnutrition (also known as “wasting”); and

(3) more than 40,000,000 are overweight;

Whereas, in countries highly affected by undernutrition, stunting affects 1 in every 3 children;

Whereas malnutrition directly or indirectly causes 45 percent of all deaths of children under 5 years of age, a total of 2,600,000 deaths annually;

Whereas children who experience malnutrition—

(1) may experience impaired brain development, lower IQ, and weakened immune systems; and

(2) are at a greater risk of contracting serious diseases;

Whereas undernourished adolescent girls have impaired cognitive ability and productivity, and the future children of those girls are at increased risk for low birth weight and death;

Whereas iron deficiency anemia, associated with undernutrition, contributes to 1 in 5 maternal deaths, or 20 percent of maternal mortality;

Whereas poor maternal nutrition contributes to poor fetal development and low birth weight, and an estimated 60 to 80 percent of neonatal deaths occur in low-birth-weight babies;

Whereas a large body of scientific evidence supports the benefits of improved breastfeeding practices on the short-term and long-term health and development of children and their mothers;

Whereas a growing body of evidence indicates that reducing maternal and child malnutrition, especially in the critical

1,000-day period between the beginning of pregnancy and the second birthday of the child, is imperative to—

- (1) ending preventable child and maternal deaths;
 - (2) improving cognitive and physical development;
- and
- (3) strengthening the immune systems of children to bolster resistance to disease;

Whereas leading economists and Nobel Laureates have identified improving child nutrition as the most cost-effective way to improve global health outcomes and enhance development;

Whereas the approach of the Multi-Sectoral Nutrition Strategy of the United States Agency for International Development addresses the direct and underlying causes of malnutrition;

Whereas the focus of the Multi-Sectoral Nutrition Strategy on linking humanitarian assistance with development programming helps build resilience to shocks in vulnerable communities;

Whereas malnutrition is a universal issue that no country can afford to overlook;

Whereas countries with populations that experience high burdens of malnutrition, including stunting, wasting, anemia, and micronutrient deficiency, will struggle to achieve sustainable and equitable economic growth;

Whereas the United States plays a leading role supporting the goals of Scaling Up Nutrition, a global movement of 60 countries to prioritize nutrition through effective policy and dedicated national resources, particularly during the 1,000-day window of opportunity between the begin-

ning of pregnancy and the second birthday of the child;
and

Whereas, although the world has reduced undernutrition since 1990, global progress has been too slow—

(1) to ensure that each child can attain a full and prosperous future regardless of where that child was born; and

(2) for the global community to reach the global nutrition targets set for 2025: Now, therefore, be it

1 *Resolved*, That the Senate—

2 (1) recognizes that—

3 (A) food security and good nutrition in
4 early childhood saves lives and lays the founda-
5 tion for healthy physical and cognitive growth
6 and development;

7 (B) the potential benefits of good nutrition
8 in early childhood are life-long and influence
9 the entire future of the child, with entire com-
10 munities and nations ultimately prospering;

11 (C) the right nutrition—

12 (i) helps children learn;

13 (ii) helps protect children from illness;

14 (iii) increases the productivity and
15 earning potential of children later in life;

16 and

1 (iv) supports the well-being and health
2 of the future offspring of those children
3 who receive that nutrition;

4 (D) women who are well-nourished and do
5 not suffer from anemia are less likely to die in
6 childbirth or give birth to children who are mal-
7 nourished, breaking the intergenerational cycle
8 of malnutrition;

9 (E) good nutrition is an economic issue
10 that is central to reducing poverty and putting
11 countries on a path to economic development;

12 (F) adults who were well-nourished as chil-
13 dren earn up to 46 percent more than adults
14 who were malnourished as children;

15 (G) countries with a very high burden of
16 early childhood malnutrition have lower eco-
17 nomic growth rates due to lost income and pro-
18 ductivity; and

19 (H) the cost of childhood malnutrition to
20 countries is substantial, with—

21 (i) estimated losses in Gross Domestic
22 Product of 3 to 16 percent; and

23 (ii) potential impacts to the global
24 economy as high as \$3,500,000,000,000
25 per year;

1 (2) applauds the leadership of the United
2 States in helping developing countries meet the nu-
3 tritional needs of women and children;

4 (3) supports continued efforts by the United
5 States to help developing countries meet the nutri-
6 tional needs of women and children;

7 (4) commends the United States Agency for
8 International Development (referred to in this reso-
9 lution as “USAID”) for recognizing that nutrition
10 interventions are among the highest-impact evidence-
11 based interventions that—

12 (A) are lifesaving; and

13 (B) support the goal of ending preventable
14 child and maternal deaths;

15 (5) recognizes the Multi-Sectoral Nutrition
16 Strategy, the U.S. Government Global Nutrition Co-
17 ordination Plan, and the Global Food Security
18 Strategy as platforms through which to reach, by
19 2025, the global nutrition targets agreed to at the
20 World Health Assembly in 2012;

21 (6) recognizes the vision and goals of the Scal-
22 ing Up Nutrition movement, a global partnership
23 supporting country-led efforts to improve maternal
24 and child nutrition through the involvement of—

25 (A) governments;

1 (B) civil society;

2 (C) the United Nations;

3 (D) donors;

4 (E) businesses; and

5 (F) researchers;

6 (7) recognizes that progress against global mal-
7 nutrition must be accelerated using innovative,
8 scaled up approaches to improve the systems that
9 affect the health and nutritional status of women
10 and children; and

11 (8) calls for transformative efforts across sec-
12 tors at USAID to accelerate progress to end mater-
13 nal and child malnutrition, including through—

14 (A) country development cooperation strat-
15 egies that align with national nutrition plans;
16 and

17 (B) improved and clear methods to track
18 nutrition funding and outcomes across all global
19 nutrition programs of the United States Gov-
20 ernment, especially those relating to—

21 (i) global health;

22 (ii) food security;

23 (iii) agriculture;

24 (iv) basic education;

25 (v) food assistance; and

- 1 (vi) water, sanitation, and hygiene
- 2 (also known as “WASH”).