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## Commission on Population and Development

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Item 3 of the provisional agenda<sup>1</sup>

**General Debate 3 (a): Actions for the further implementation of the Programme of Action of the International Conference on Population and Development at the global, regional and national levels**

**3 (b): Population, food security, nutrition and sustainable development**

### **Statement submitted by Women's Health and Education Center, a non-governmental organization in special consultative status with the Economic and Social Council<sup>2</sup>**

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

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<sup>1</sup> [E/CN.9/2020/1](#).

<sup>2</sup> The present statement is issued without formal editing.



## Statement

### **Healthy mother healthy infant through nutrition – The need for strategic planning and promotion**

Malnutrition is a complex issue, but it is the main cause of death and disease in the world. Conquering suffering and enriching humanity needs strategic planning and promotion of healthy dietary habits. Maternal nutritional status not only influences fetal development and overall health but also significantly affects long-term risk for chronic childhood and adult diseases. Many pregnant and lactating women may not achieve optimum levels of important nutrients, as evidenced by the proportion of women throughout the United States population and in the world whose nutritional levels do not meet documented standards for many vitamins, minerals, and other essential nutrients. Healthcare providers should counsel all pregnant women about the importance of good dietary habits.

The need for accurate information and strategic dissemination of proper nutrition for the general population is urgent worldwide. Vitamins and nutrient supplements, particularly prescription products, must be regulated for quality and accuracy in labelling. It should also be considered as a strategy to improve maternal nutrition and help lead to healthy outcomes for their offspring.

Anaemia – the silent killer, is one of the world’s leading causes of disability and thus one of the most serious global public health problems. It affects nearly half of the pregnant women in the world, 52 per cent non-industrialized countries – compared with 23 per cent in industrialized countries. The commonest causes of anemia are poor nutrition, iron and other micronutrient deficiencies, malaria, hookworm and schistosomiasis. HIV infection and hemoglobinopathies make important additional contributions.

Reducing the burden of anaemia is essential to achieve Sustainable Development Goals (SDGs) relating to maternal and childhood mortality. The greatest burden of anaemia falls on the most “hard-to-reach” individuals. The Women’s Health and Education Center (WHEC) in collaboration with the United Nations and the World Health Organization (WHO), publishes clinical guidelines and current review of the scientific literature to advise good dietary habits and nutritional requirement for healthy mother and healthy infant. Materials are available in all six official languages of the United Nations at WHEC Global Health Line (WGHL; <http://www.WomensHealthSection.com>). WHEC is currently serving 227 countries and territories, all the Member States of the United Nations and all the Member States of the WHO.

The health of mothers is a major determinant of that of their children and future generations, and thus indirectly affects the formation of human capital. WHEC’s strategy for control of anaemia in pregnant women include:

1. Detection and appropriate management
2. Prophylaxis against parasitic diseases
3. Supplementation with iron and folic acid
4. Improved obstetric care
5. Management of women with severe anaemia

Successful delivery of these cost-effective interventions requires the integrated efforts of several health and social programs – particularly those targeted at pregnant women with young children – and strengthening health systems and food security, increased community awareness, and financial investments.

Civil society involvement requires support and public funds. Several lessons can be drawn from our collaboration with the United Nations and the WHO. First, changing agendas requires a population base. NGOs (nongovernmental and women's organizations) in most countries compose the mass base of support and are helpful in forging broader alliances for political weight. Second, constituency and alliance building requires sustained funding not only for advocacy but also for capacity building. Third, for credibility and staying power, mobilization in best delegated to be led by civil society organizations. Fourth, the primary gatekeepers – governments and donors – must give the relevant civil society organizations access to decision-making processes, and also involve them in policy-making, programme implementation, and monitoring.

WHEC believes that in this way it will be possible to sustain political-will long enough to survive changes in governments, and donor interests and make a significant contribution, to achieving SDGs by 2030. Diet evolves over time, being influenced by many social and economic factors that interact in a complex manner to shape individual dietary patterns. These factors include income, food prices, individual preferences and beliefs, cultural traditions, and geographical and environmental aspects (including climate change). Governments have a central role in creating a healthy food environment that enables people to adopt and maintain healthy dietary practices.

### **Recommendations**

1. Creating coherence in national policies and investment plans – including trade, food and agricultural policies – to promote a healthy diet and protect public health by increasing incentives for producers and retailers to grow, use and sell fresh fruit and vegetables;
2. Implementing the United Nations recommendations on the marketing of foods and non-alcoholic beverages;
3. Establishing standards to foster healthy dietary practices through ensuring the availability of healthy, nutritious, safe and affordable foods in pre-schools, schools, other public institutions and the workplace;
4. Encouraging transitional, national and local food services and catering outlets to improve the nutritional quality of their foods – ensuring the availability and affordability of healthy choices – and review portion sizes and pricing;
5. Encouraging consumer demand for healthy foods and meals;
6. Developing school policies and programs that encourage children to adopt and maintain a healthy diet;
7. Providing nutrition and dietary counselling at primary healthcare facilities;
8. Promoting appropriate infant and young child feeding practices;
9. Implementing the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly resolutions;
10. Implementing policies and practices to promote protection of working mothers.

Join the efforts!

The Women's Health and Education Center (WHEC) welcomes everyone. Our mission is to work with Member States and partners to ensure universal access to effective nutrition actions and to healthy and sustainable diets. Our aim is to achieve a world free from all malnutrition where all people achieve health and wellbeing.