

8/10/2022

Ms. Shalanda D. Young
Director, Office of Management and Budget
1650 Pennsylvania Avenue NW
Washington, D.C. 20503

Dear Director Young:

Every [11 seconds](#), a child dies because they are malnourished. Those who survive severe malnutrition in early childhood are much more likely to suffer from permanent physical and mental stunting that impairs their [health](#), [educational attainment](#), and [earning potential](#). Fortunately, this death and disability is preventable. A suite of high-impact, cost-effective, and well-tested [interventions](#) are ready to scale today and have the potential to save millions of lives. As you consider global health budgets for Fiscal Year (FY) 2024, **we respectfully request that you provide \$300 million for the Nutrition sub-account within the Global Health Programs account at United States Agency for International Development (USAID).**

Unfortunately, recent events are drastically increasing the burden of malnutrition, including in development settings. The global food system has faced a confluence of challenges that are threatening to intensify the existing food crisis into what World Food Program Executive Director David Beasley has [warned](#) could be “hell on earth.” Already, climate disasters like the ever-worsening [drought in the Horn of Africa](#), disruptions from the COVID-19 pandemic, and conflict in places like Afghanistan, Ethiopia, and Yemen have caused rates of malnutrition around the world to skyrocket. The additional strain of food, fuel, and fertilizer export disruptions caused by the war in Ukraine and ensuing record-high [food prices](#) have put [49 million people](#) at risk of falling into famine. These combined shocks have hit the most vulnerable territories the hardest, with crisis levels of hunger [increasing in these countries by 31 percent](#) from 2019 to 2021.

Young children are at the greatest risk during these periods of acute food insecurity. Even a short period of severe malnutrition during the [1000-day period](#) from pregnancy to a child’s second birthday - when the majority of brain development occurs - can affect these children for the rest of their lives. Because of the extraordinary circumstances the world is facing today, in the hardest-hit countries [one additional child is becoming severely malnourished every minute](#). This is on top of the [46 million children](#) who already face starvation. These children suffering from wasting, the most deadly form of malnutrition, are up to [12 times more likely to die](#) than their well-nourished peers.

The Nutrition sub-account supports critical health systems interventions that have the most potential to directly address these threats to children’s survival and wellbeing. This includes [prenatal vitamins for pregnant women](#), support for [breastfeeding moms](#), [vitamin A supplementation](#), and [treatment \(RUTF\) for wasted children](#). [Models](#) show that even if only a percentage of those in need received these interventions, we could save millions of children’s lives over the next five years. These nutrition interventions are also some of the “best buys” in global development, with leading economists consistently ranking nutrition interventions [among the most cost-effective ways to save and improve lives around the world](#).

The United States Government has played a significant role in championing global nutrition and child survival, [preventing and treating millions of cases of severe malnutrition](#) through high-quality, evidence-based nutrition programs. By expanding these programs, the United States would continue to build its legacy as a global health champion and lead the next frontier of the child survival revolution. Malnutrition is the greatest threat to child survival worldwide, contributing to more child deaths than [AIDS](#), [malaria](#), [COVID-19](#) and [tuberculosis](#) combined, yet nutrition is drastically underfunded compared to the vital investments we have made toward ending these other threats to global health and wellbeing.

The nutrition account received under 2 percent of [US global health funding in FY2022](#) while AIDS, malaria, and tuberculosis collectively netted about 76 percent.

We applaud the emergency investments of the U.S. government to address severe malnutrition in the face of the current hunger crisis, but increased long-term investments through our global health and development programs are necessary to deliver sustainable progress on nutrition and child survival. For the sake of saving lives, building resilience, [growing economies](#), [empowering women](#), and helping children thrive, we must increase investments in global nutrition until they are more commensurate with the scale of the challenge. A \$300 million investment in the global health nutrition sub-account would allow the U.S. government to more effectively meet the current need for nutrition programs and safeguard the futures of vulnerable women, children, and communities around the world.

Thank you for your serious consideration of this request to increase the Nutrition funding in the Global Health Programs account. We welcome the opportunity to meet with OMB to further discuss this request at your earliest convenience.

Sincerely,

1,000 Days, an Initiative of FHI Solutions

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