

Progress Towards the Global Nutrition Targets



Achievements of the 2021 Tokyo Nutrition for
Growth and Year of Action Commitments



Table of contents

EXECUTIVE SUMMARY	1
INTRODUCTION	3
SMARTNESS MATTERS, AS DOES THE ABILITY TO ENGAGE	4
Engagement	4
SMARTness	6
PROGRESS ASSESSED AND ACHIEVED	7
Ability to assess	7
Progress achieved	7
MEASURABLE INDICATORS AND ASSESSMENT	11
BARRIERS TO ACHIEVING PROGRESS	13
OPPORTUNITIES FOR ACCELERATING PROGRESS	15
EQUITY CONSIDERATIONS	17
CONCLUSION	20
ANNEX: PROGRESS ASSESSMENT METHODOLOGY	21

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Acronyms and abbreviations

EU4SUN	European Union for Scaling Up Nutrition in Latin America and Africa
FCAS	fragile or conflict-affected setting
GNR	Global Nutrition Report
HIC	high-income country
IEG	Independent Expert Group
LIC	low-income country
LMIC	lower-middle-income country
N4G	Nutrition for Growth
NAF	Nutrition Accountability Framework
SMART	Specific, Measurable, Achievable, Relevant and Time-bound
SUN	Scaling Up Nutrition
UMIC	upper-middle-income country

Executive summary

In April 2024, the Global Nutrition Report (GNR) invited nutrition commitment makers—for the first time—to report progress on commitment goals aimed at achieving the global nutrition targets, as registered in the Nutrition Accountability Framework (NAF) for the Nutrition for Growth (N4G) Tokyo 2021 Summit. Managed by the GNR, the NAF is the platform for registering and monitoring Specific, Measurable, Achievable, Relevant and Time-bound (SMART) nutrition commitments.

This report summarises progress on commitments towards a world free from malnutrition in all forms. It represents a key accountability milestone, empowering the global nutrition community to celebrate success, assess where support is needed and identify next steps. Reflecting progress as assessed through a self-administered questionnaire (see Annex for the methodology), findings are organised by the six themes that emerged:

1. **SMARTness matters.** Progress was more likely reported on SMART goals and those verified through the GNR process. Certain commitment maker types may be better positioned to engage, e.g. those from high-income countries (HICs) versus other country income classifications or those from fragile or conflict-affected settings (FCASs). Impact goals—requiring more effort to show results—were less reported on.
2. **Positive progress was achieved.** Most goals reported on could be assessed, and of those assessed, a majority had positive progress. Goals from commitment makers in HICs were more likely to be assessable. Likewise, positive progress was more often found amongst goals from donors and civil society organisations.
3. **Measurable indicators are key for tracking.** Many goals reported on had their primary indicator assessed, but most goals from low-income countries (LICs) had not. Systemic challenges around access to and availability of data and resources to generate rigorous data hamper efforts. These challenges include limited baseline data, resource constraints and infrequent data collection.
4. **Barriers to progress were experienced.** Especially for governments and commitment makers in LICs, political instability, conflicts and epidemics were impediments, changing priorities, increasing costs and affecting the ability to establish funding.
5. **Opportunities facilitated progress.** Financial and political support and new partnerships were reported as crucial progress accelerators for governments and commitment makers in LICs and upper-middle-income countries (UMICs). These opportunities lead to meaningful progress, with impact-focused commitments especially benefitting. Engagement and targeted support can greatly boost progress.
6. **Equity considerations are important.** Embedding equity considerations into nutrition commitments was essential for achieving inclusive and sustainable progress. Whilst over half of the reported goals addressed dimensions of equity, stronger integration is still needed across all commitment maker and goal types.

Engaging stakeholders in developing SMART, verifiable commitments has been critical for accurate tracking of progress. Designated as the official accountability mechanism for the N4G Paris 2025 Summit, the NAF was integrated into France's Commitment Guide, which highlights the need for SMART commitments that can be tracked.¹ Investments in data systems, tools and capacity are needed to support commitment makers, particularly governments, to identify appropriate indicators and to gather, analyse and share data to ensure accountability.

¹ Directorate-General for Global Affairs. Nutrition for Growth (N4G) Paris 2025: N4G Paris Commitment Guide. Paris, France: Ministry for Europe and Foreign Affairs, 2024. Guide in English: https://nutritionforgrowth.org/wp-content/uploads/2024/12/EN-N4G-PARIS-Web_Guide_engagements.pdf. Guide in French: https://nutritionforgrowth.org/wp-content/uploads/2024/12/FR-N4G-PARIS-Web_Guide_engagements.pdf.

Introduction

The Global Nutrition Report (GNR) was established in 2014, following the first Nutrition for Growth (N4G) Summit in London in 2013, as an accountability mechanism to track the progress of the global nutrition targets and the commitments made towards achieving those targets. Since then, the GNR has worked to drive stronger commitments, action and accountability through independent, trusted and actionable evidence.

The Nutrition Accountability Framework (NAF) launched by the GNR is a comprehensive platform for registering and monitoring Specific, Measurable, Achievable, Relevant and Time-bound (SMART) nutrition commitments. It was developed to respond to the call for greater transparency and clarity and to enhance collective accountability towards the global nutrition targets. Under the auspices of the N4G Tokyo 2021 Summit and the Nutrition Year of Action, a total of 202 commitment makers^{2,3} from 84 countries registered a total of 922 commitment goals in the NAF.

In April 2024, the GNR invited nutrition commitment makers to—for the first time— report progress on those commitments. This report provides both granularity and a big-picture view of the progress being made towards a world free from malnutrition in all forms. It represents a key milestone for accountability, empowering the global nutrition community to celebrate success, assess where support is needed for monitoring progress and identify where greater data-driven action can be taken. The findings presented use data from a self-reported questionnaire. See Annex for more details on methodology.

Engagement in the reporting process was high. Of 202 commitment makers, 86% (174) were successfully reached (i.e. they opened at least one of the six mass emails sent). Of 922 goals from the 202 commitment makers, more than half (476, 52%) had progress reports submitted. Positive progress was achieved in over 63% (222) of the 352 reported goals that could be assessed (Figure 1).

The subsequent sections of this report are organised according to six themes that emerged in the analysis: 1) engagement and the value of SMARTness, 2) the progress assessed and achieved, 3) the role of measurable indicators, 4) barriers to progress, 5) opportunities to accelerate progress and 6) the consideration of equity in commitment making and tracking.



² This report provides numbers slightly smaller than the numbers of commitment makers, countries, commitments and goals from 2021 (e.g. down from 205 commitment makers and 926 goals) as in at least one case, duplicate accounts were merged, and 4 goals were withdrawn.

³ The GNR is disambiguating "commitment makers" (those who make commitments) from "stakeholders" (potential or actual commitment makers and other interested parties advocating for, developing or monitoring policies, plans, actions or commitments). Relatedly, 'global nutrition community' includes a range of stakeholders, including those making decisions that impact their own or others' nutrition.

SMARTness matters, as does the ability to engage

Using SMART principles and strong verification processes improves accountability by supporting more effective tracking.⁴ Commitment makers who engaged in developing SMART, verifiable commitments were more likely to report. Half of all N4G Tokyo 2021 goals had progress reports submitted. There were geographic disparities, with commitment makers from countries with fragile or conflict-affected settings (FCASs) being less responsive. There were also fewer reports on goals requiring more effort to show results (e.g. impact goals).⁵

Engagement

Building a solid base for monitoring, most of the 202 commitment makers (174, 86%) were successfully reached with requests to report progress (i.e. they opened one of the emails sent, whether the invitation to report or any of the five reminders). Of 922 goals, more than half (476, 52%) had progress reports submitted by 111 commitment makers.

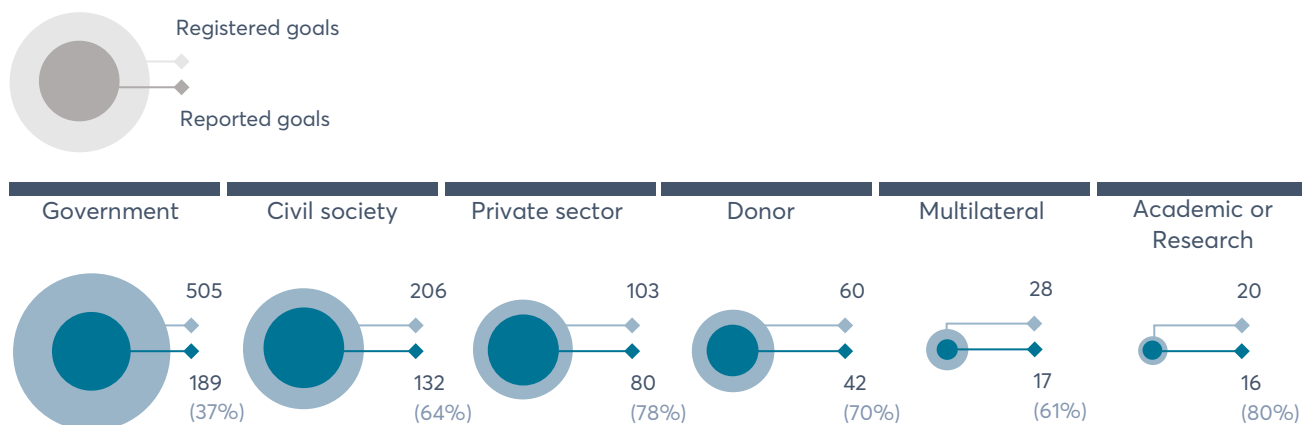
Some commitment maker types stood out for their engagement (Figure 2).⁶ Academic, private sector, donor and civil society organisations led the way in reporting, whilst governments faced constraints in doing so, perhaps due to high turnover or weak internal accountability. Whilst only 32 goals were registered by academic or research institutions or donor organisations beyond donor governments, most of those were reported on (16 of 20, 80%; and 10 of 12, 83%, respectively). The private sector also reported on most (80, 78%) of its 103 goals. Donors as a whole, civil society organisations and multilateral organisations were also quite engaged, reporting on about two-thirds of their goals (42 of 60, 70%; 132 of 206, 64%; and 17 of 28, 61%, respectively). On the other hand, governments had the lowest response level (189 of 505, 37%), impacting the overall assessment, as they had the highest number of goals.

⁴ Zanello G, Micha R. The SMARTness of nutrition commitments. Global Nutrition Report; PATH. 2025; last updated April 10. <https://globalnutritionreport.org/resources/naf/smartness-of-nutrition-commitments/smart-commitments/>. Accessed 24 April 2025.

⁵ In the Nutrition Action Classification System, the three standardised categories are: Enabling (actions to establish a positive environment for nutrition), Policy (actions to develop or implement strategies, policies, interventions or programmes to improve nutrition) and Impact (actions that aim to directly improve nutrition outcomes in a population). Citation: Micha R, Karageorgu D, Wu J. The Nutrition Action Classification System. Global Nutrition Report; PATH. 2024; last updated September 4. <https://globalnutritionreport.org/resources/naf/about/classification-system/>. Accessed 24 April 2025.

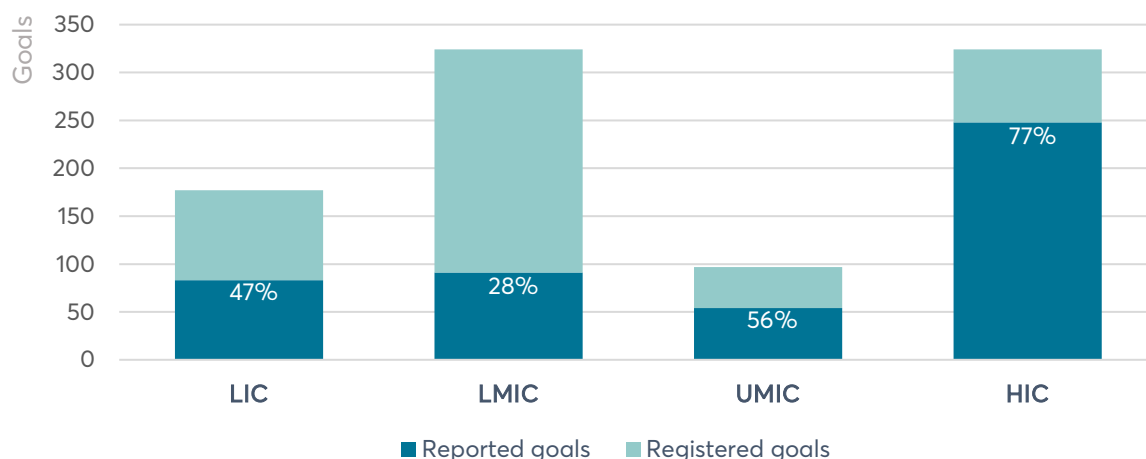
⁶ The commitment maker types are institutions, organisations or entities, which are: **Government** (functioning in a non-donor capacity), such as ministry, municipality or any other national/regional/local body; **Donor**, including **donor governments**, providing funding for actions outside its borders, and **donor organisations**, philanthropic or other non-government actors providing funding (for this analysis, development finance institutions were included in this type); **Private sector food or non-food business**; **Civil society**, including **non-governmental organisations**; **Multilateral** (a UN agency other than a development finance institution); and **Academic or research**.

FIGURE 2
Commitment goals by commitment maker type (n=922)



It is likely that certain types of commitment makers may simply be better positioned to engage (Figure 3). Commitment makers from 17 high-income countries (HICs) and 16 upper-middle-income countries (UMICs) were more likely to report on goals than not (248 of 324 HIC goals, 77%; and 54 of 97 UMIC goals, 56%), whereas those from the 32 lower-middle-income countries (LMICs) and 19 low-income countries (LICs) were less likely to report on goals (91 of 324 LMIC goals, 28%; and 83 of 177 LIC goals, 47%).⁷

FIGURE 3
Commitment goals by country income status (n=922)



Acronyms: HIC, high-income country; LIC, low-income country; LMIC, lower-middle-income country; UMIC, upper-middle-income country.

⁷ The GNR uses 'income' and 'country' when referring to World Bank classifications, which use economy and country interchangeably, i.e. high-income countries (HICs), upper-middle-income countries (UMICs), lower-middle income countries (LMIC) and low-income countries (LIC). For this report, we use the thresholds for World Bank Fiscal Year 2024, when this assessment was conducted. Citation: The World Bank's Data Help Desk. World Bank Country and Lending Groups. The World Bank Group. 2025. <https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups>. Accessed 24 April 2025.

Notably, goals from countries with FCASs had a lower proportion of response (72 of 163, 44%) than the response for goals (404 of 759, 53%) from stable contexts.

As seen in Figure 4, a higher percentage of goals that were focused on enabling (249 of 408, 61%) or policy actions (148 of 270, 55%) were reported on, perhaps reflecting more straightforward indicators, such as the number of policies passed or units served. Conversely, reporting on impact goals was lower (79 of 244 goals, 32%), likely due to the need for in-depth surveys to track impact changes over time. An example of an impact goal is one aimed at reducing the prevalence of anaemia.

SMARTness

Goals designed with SMART principles and previously verified through GNR processes saw the best reporting results, perhaps because their commitment makers were more confident about their ability to respond and were actively engaged with the process from the start (Figure 5). Nearly two-thirds of the 565 fully verified goals (n=373, 66%) and the 571 high SMARTness goals (n=357, 63%) had reports submitted, whereas fewer unverified or low SMARTness goals were reported on.

FIGURE 4
Commitment goals by action category (n=922)

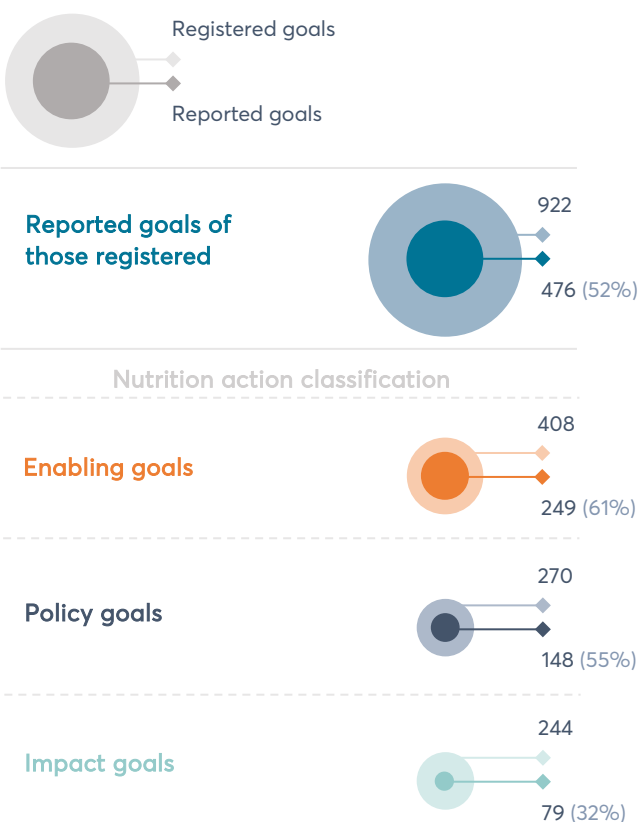
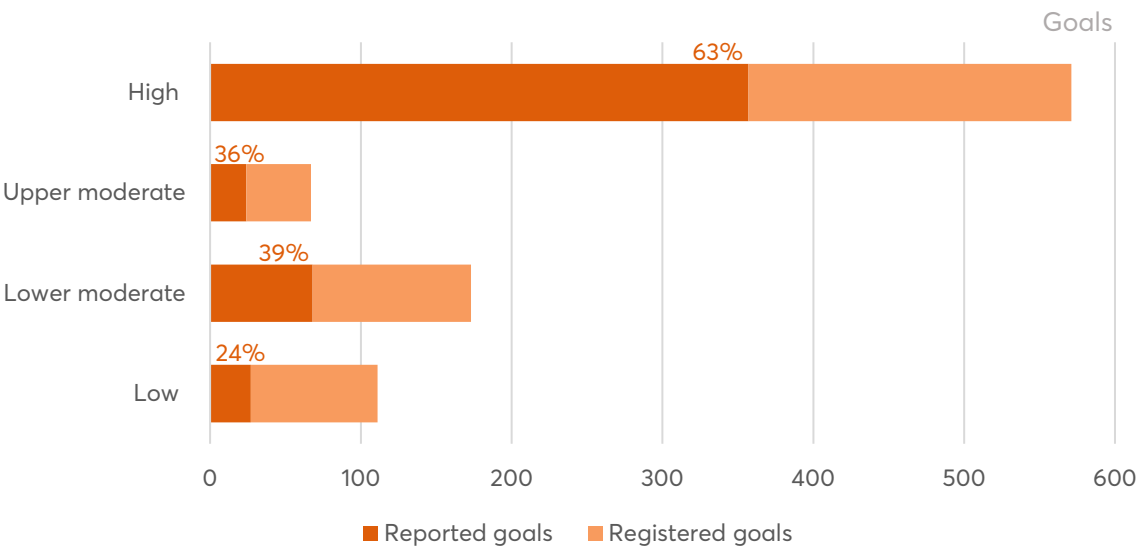


FIGURE 5
Commitment goals by level of SMARTness (n=922)



Progress assessed and achieved

Most goals that could be assessed showed positive progress, a testament to the importance of developing clear goals and ensuring the formulation and implementation of effective monitoring systems. Donors and civil society organisations had the highest proportion of positive outcomes. Underlying gaps in capacity, resources and ability to design commitment goals persist for other commitment makers.

There were disparities in the ability to assess progress. Governments had the lowest levels of assessable progress amongst all reported goals. Progress was not assessable when data was missing and/or when commitment makers were not able to provide accurate information. These disparities in reporting and/or assessing progress across commitment maker types and country income levels reveal underlying gaps in capacity, resources and commitment goal design.

Ability to assess

Of the 476 goals reported on, 74% (352) could be assessed, whilst 26% (124) could not. Overall, the inability to assess goals was most common amongst governments, for whom a higher proportion (74 of 189, 39%) of goals reported were not assessable. The portion of reported goals that could be assessed correlated with income status, with 86% (213 of 248), 74% (40 of 54), 64% (58 of 91) and 49% (41 of 83) of goals from HICs, UMICs, LMICs and LICs, respectively, being assessable. Fragility also impacted the ability to assess. Goals from commitment makers in countries with FCAs—whether due to conflict or institutional or social fragility—were less likely to be assessable (58% versus 77% for stable contexts). Across commitment makers, the inability to assess progress was linked to inadequate data or misalignment with the assessment methodology.

Progress achieved

In terms of progress achieved by those reporting (Figure 6), of the 352 goals which could be assessed, nearly two-thirds (222, 63%) had reached their targets (103, 29%) or were on course (119, 34%).

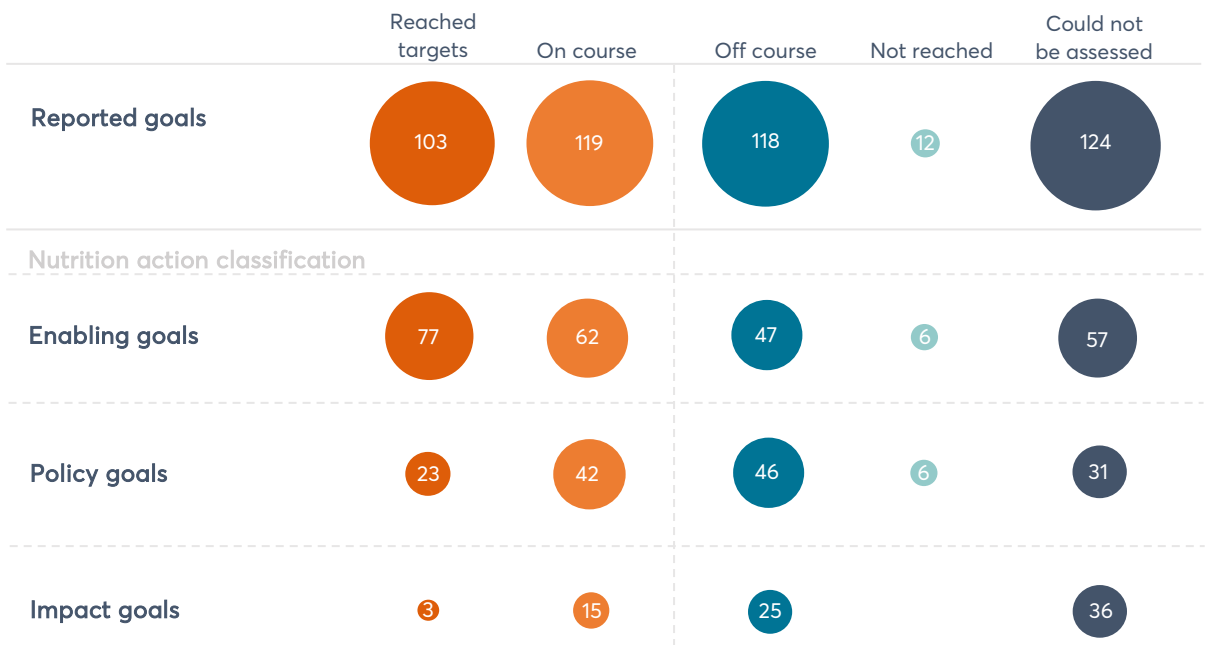
FIGURE 6

Progress status of reported commitment goals (n=476)



Amongst Nutrition Action Classification System categories, enabling goals performed particularly well, with 72% (139 of 192) of those assessed achieving positive outcomes, followed by policy goals at 56% (65 of 117). However, impact goals faced challenges, with only 42% (18 of 43) assessed as reached, on course or showing progress, possibly due to the added difficulty of documenting change over time and lack of data on key indicators (Figure 7).

FIGURE 7
Assessed progress of reported commitment goals by action category (n=476)



Examples of enabling goals reporting positive progress (having reached targets or on course) include workforce policies to improve diets and nutrition, the implementation of plans and coordination structures at national and subnational levels, the development of regulatory guidance on marketing of unhealthy foods and breast milk substitutes and food based dietary guidelines to support healthier choices. Garnering investments and securing resources for scaling up nutrition-related climate-resilient agriculture programmes and social protection are other examples. Further examples include pre-service and in-service training for volunteers and healthcare providers and supporting countries to strengthen monitoring and evaluation. This also includes improving data systems in health and agriculture and generating rigorous evidence for policy action.

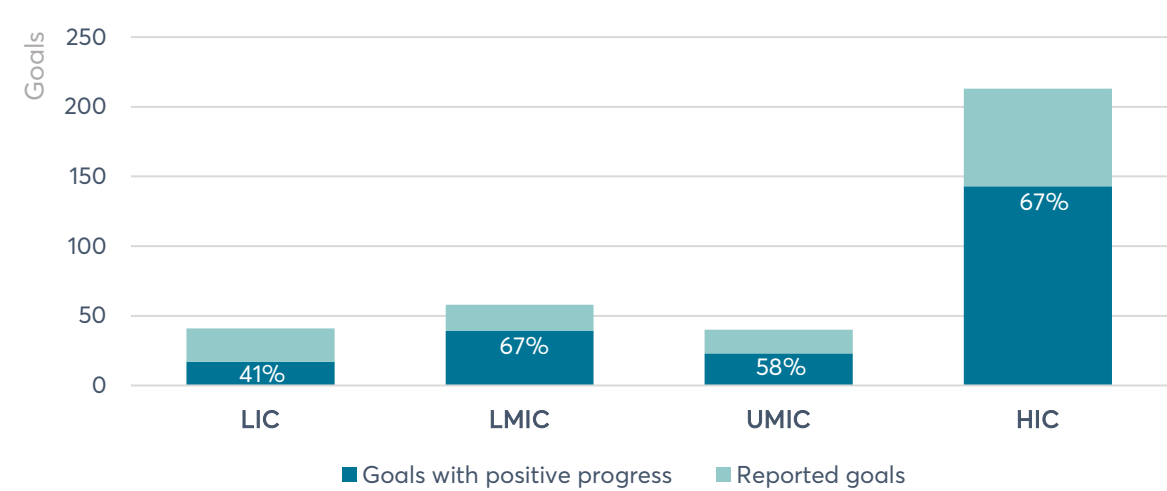
Policy goals that reported progress included those reaching 6 million people with targeted support to improve nutrition by 2025 and providing 100,000 employees with nutrition education. Efforts also led to the distribution of nutritious products to 400 million people per year, ensuring access to diverse, nutritious and safe food for 57,000 families with children under 5 years of age and delivering cash and voucher assistance to 14 million children and their families.

Additional progress included an increase in the number of vulnerable populations (e.g. pregnant and lactating women, girls and children under 5 years of age) receiving malnutrition prevention and treatment services and a rise in the proportion of fortified

staples. Advocacy efforts also advanced efforts to address anaemia, reinforcing the importance of nutrition policies and programmes in achieving global goals.

Assessable goals (Figure 8) from HICs (143 of 213, 67%), UMICs (23 of 40, 58%) and LMICs (39 of 58, 67%) were more likely to have positive outcomes when assessed than those from LICs (17 of 41, 41%), where many goals that could be assessed were categorised as off course (21, 51%) or not achieved (3, 7%). Fragility impacted the ability to achieve positive progress, with goals from countries with FCASs less likely to have positive outcomes when assessed (48% versus 65% for stable contexts).

FIGURE 8
Commitment goals with positive progress by country income status (n=352)*



*Note: Goals with no response and 'Progress not able to be assessed' were removed from denominator.
Acronyms: HIC, high-income country; LIC, low-income country; LMIC, lower-middle-income country; UMIC, upper-middle-income country.

Assessed progress outcomes differed by the type of commitment maker (Figure 9). Goals from donors (29 of 35, 83%) had the highest proportion of positive outcomes, predominantly focused on enabling goals from HICs (e.g. financial disbursements, leadership and governance objectives).

Civil society organisations performed well, with 77% (78 of 101) of their assessed goals reaching or being on track to meet targets. Multilaterals also more often had positive assessments, with 65% (11 of 17) of their assessed goals reaching or being on track. This included work to address food and nutrition issues in Asia, Africa and Latin America. Examples included targeting 50,000 people with a collection of healthy recipes, supporting community-based management of acute malnutrition to reach 120,000 children and providing supplementary feeding to over 50,000 pregnant women. Additional efforts aimed to improve access to diverse, nutritious and safe food for 57,000 households with young children, women, youth and people with disabilities.

FIGURE 9

Assessed progress of reported commitment goals by commitment maker type (n=476)

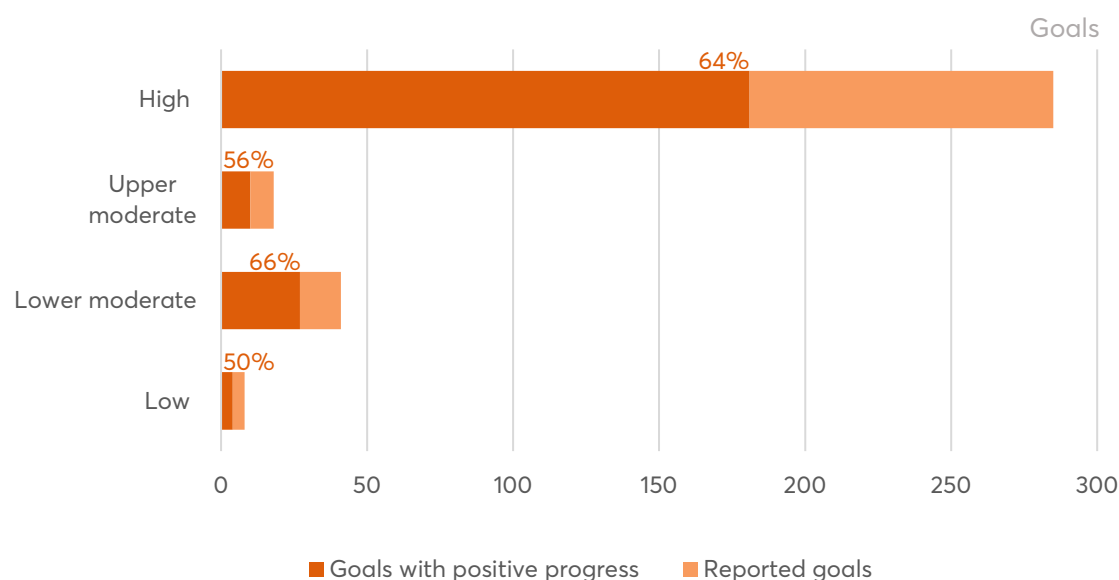


Academic or research institutions (7 of 11, 64%) were more likely to have their goals assessed as not reached or off course. Goals from the private sector and governments were more balanced between positive and negative assessments, having 53% of their assessed goals reached or being on track (39 of 73 for the private sector and 61 of 115 for government). Examples of these commitment goals included those aiming to reduce overweight or anaemia via nutrition care services within LICs, improving food environments at large corporations or improving consumer knowledge via workplace or retail programmes.

Finally, the design and verification of commitments had a strong alignment with positive progress outcomes (Figure 10). Goals with high SMARTness scores (181 of 285, 64%) or full verification (191 of 296, 65%) were more likely to have positive progress outcomes. These findings again highlight the critical role of well-designed and thoroughly verified commitments in driving progress towards achieving global nutrition goals.

FIGURE 10

Commitment goals with positive progress by level of SMARTness (n=352)



Measurable indicators and assessment

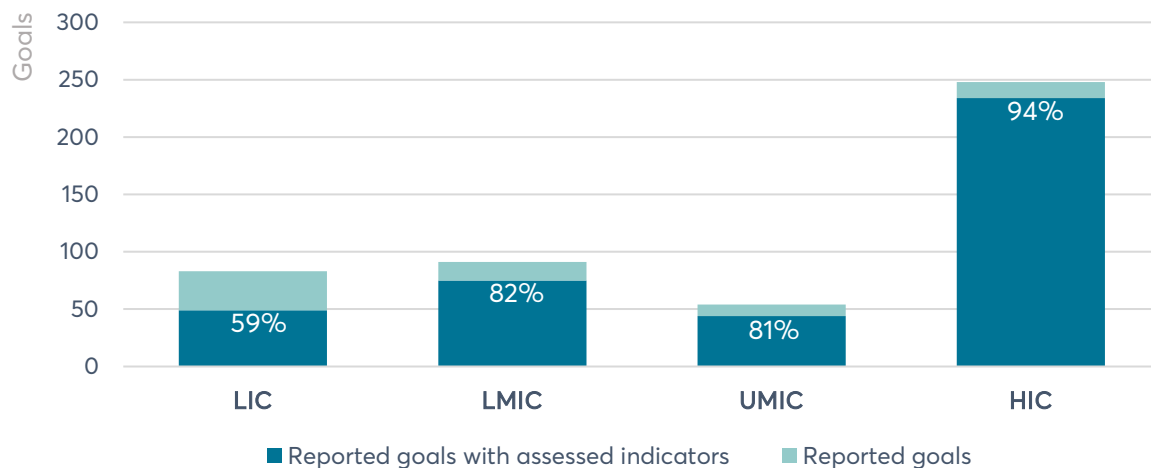
Commitment makers from UMICs, LMICs and LICs have made significant efforts to align indicators with commitment goals. However, systemic challenges such as limited baseline data, resource constraints and infrequent data collection remain substantial barriers. Investments in data tools, capacity-building and resource mobilisation may help commitment makers, such as governments, to effectively identify appropriate indicators and strengthen their ability to gather, analyse and share data for tracking commitments. Addressing this will ensure more accurate and consistent progress reporting in future.

Regular data collection on key indicators and adequate resource mobilisation play critical roles in accurately tracking nutrition commitments. Amongst the 476 goals reported, most (402, 84%) had goals aligned to an indicator for assessment. However, results varied by the country income status (Figure 11).

Commitment makers from HICs showed strong performance, with most of their reported goals having assessed a primary indicator (234 of 248, 94%). Likewise, 81% of goals from UMICs (44 of 54) and 82% of goals from LMICs (75 of 91) did so. On the other hand, only 59% of goals from LICs (49 of 83) had a primary indicator measured and/or assessed. Amongst the LMIC and LIC goals that could not assess indicators, about half cited resource constraints as a major barrier (9 of 16, 56%, and 17 of 34, 50%, respectively). Commitment makers highlighted systemic issues, such as lack of resources, the absence of baseline data, reliance on infrequent national surveys, misalignment between indicators and goals and challenges in establishing attribution.

FIGURE 11

Reported commitment goals with indicator assessments by country income status (n=476)



Acronyms: HIC, high-income country; LIC, low-income country; LMIC, lower-middle-income country; UMIC, upper-middle-income country.

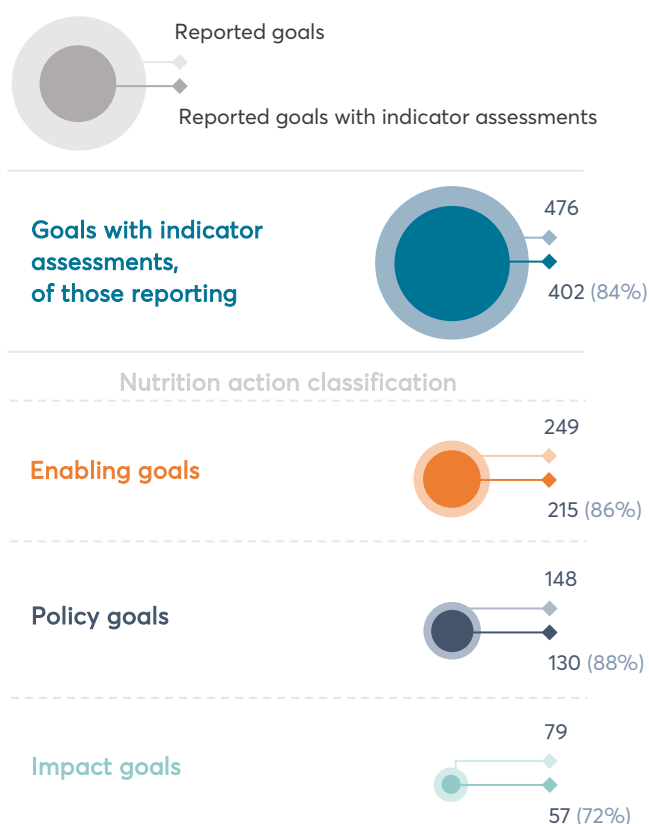
Verified commitments were more likely to have had an indicator assessment. Of fully verified goals, 86% (321 of 373) had their key indicator assessed, compared to partially verified (12 of 17, 71%) and unverified goals (69 of 86, 80%).

Governments accounted for the largest share of reported goals (189 of 476, 40%). A portion of them (50 of 189, 26%) faced significant challenges in indicator assessment. Challenges included a lack of resources (25, 50%), the data not having been collected yet (21, 42%), changed priorities (5, 10%) or data/assessment tools not being available at the time of assessment (5, 10%). Many of the unreported goals focused on reducing the prevalence of malnutrition amongst national populations, requiring large, expensive surveys to document change. Less than three-quarters (139 of 189, 74%) of their goals included indicator assessments, less than for other commitment makers, whose indicator assessments ranged from 75% to 100%.

Figure 12 reflects indicator assessment by type of goal. Impact goals lagged the enabling and policy goals, with

FIGURE 12

Reported commitment goals with indicator assessments by action category (n=476)



72% (57) of impact goals assessing their indicators, compared to 86% (215) of enabling and 88% (130) of policy goals having assessed their indicator. Impact goal indicator assessments were specifically impeded by a lack of assessment tools, or data not being collected in a timely fashion (14, 64%) and/or by a lack of resources (7, 32%). This highlights the need for targeted support to strengthen data systems and technical capacity, particularly in resource-constrained settings.

Examples of goals that were unable to collect necessary data included those that relied on impact indicators of stunting, anaemia, vitamin A supplementation, exclusive breastfeeding rates and proportion of households consuming iodised salt. Goals related to capacity-building included efforts to establish community health services, baby-friendly facilities and community units as well as advocating for increased investment allocation for social services to be nutrition sensitive. In the context of policy, advocacy and engagement, these included goals aimed at setting up platforms to host multi-stakeholder meetings, develop advocacy reports to influence actions at the regional level and strengthen the presence of national nutrition focal points. Additionally, goals focused on advocacy seeking to advance regulatory guidance, including improved food labelling standards to support informed consumer choices and strengthen accountability in food systems, were also affected.

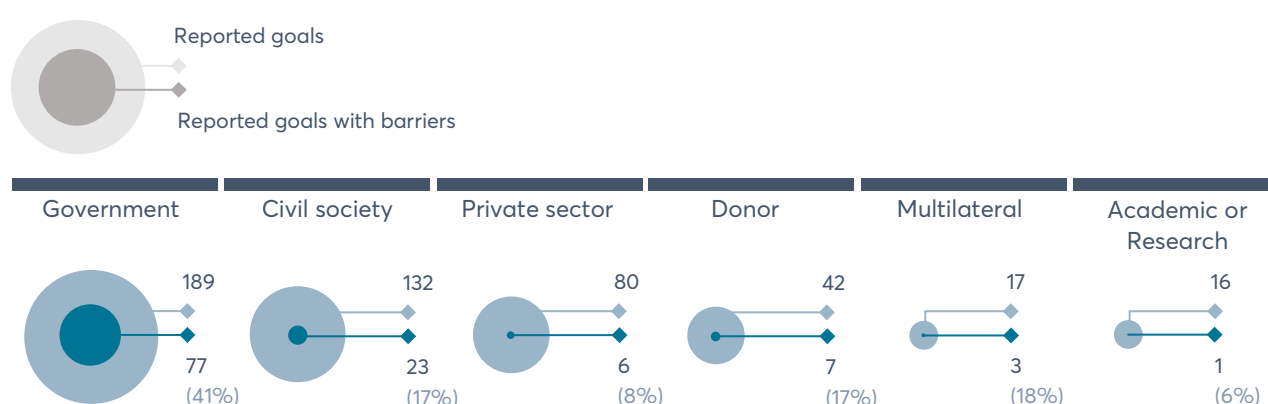
Barriers to achieving progress

Political instability, conflicts and epidemics were major impediments, especially for governments and commitment makers in LIC settings. These made it harder to accomplish aims, given changing priorities and increasing costs, making it difficult to secure resources. There is a need for flexible funding and advocacy to increase stability and prevent and suitably manage crises to support well-being and progress.

One in four goals reported on (117 of 476, 25%) indicated being severely (19, 4%) or highly (98, 21%) impacted by such barriers; more than half (247 of 476, 52%) reported experiencing some form of barrier. Governments were most affected, with 41% (77) of their goals reporting severe or high impacts, compared to much lower proportions (6% to 18%) amongst other commitment maker types, which reported little impact (Figure 13).

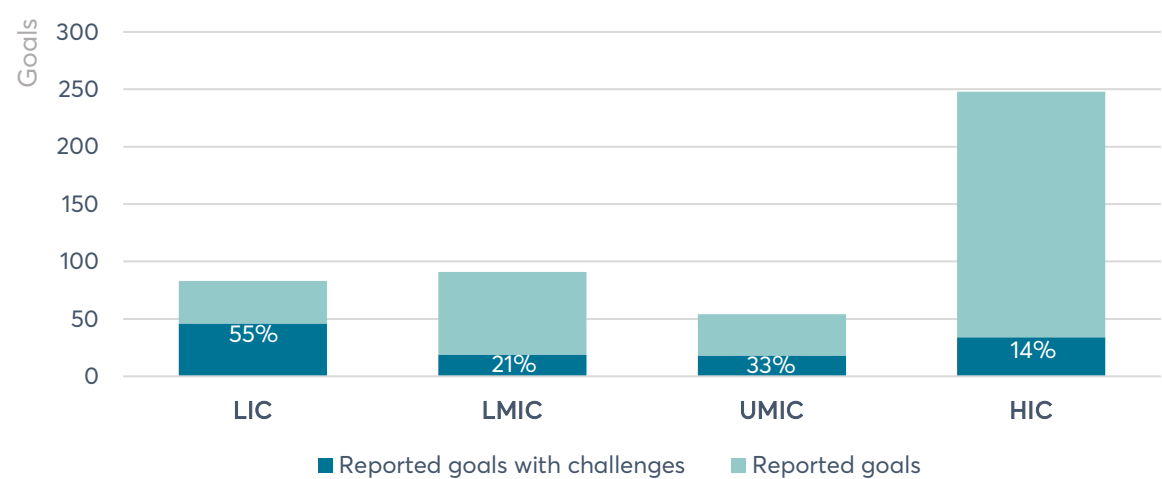
FIGURE 13

Reported commitment goals with severely or highly impactful barriers to achieving progress, by commitment maker type (n=476)



Likewise, commitment makers in LICs reported facing severe goal disruptions, with 55% (46 of 83) reporting severe or high impacts on their goals (Figure 14). Countries with FCASs related to conflict reported an even more extreme occurrence of severe or high impacts (40 of 51, 78%).

FIGURE 14
Reported commitment goals with severely or highly impactful barriers to achieving progress by country income status (n=476)

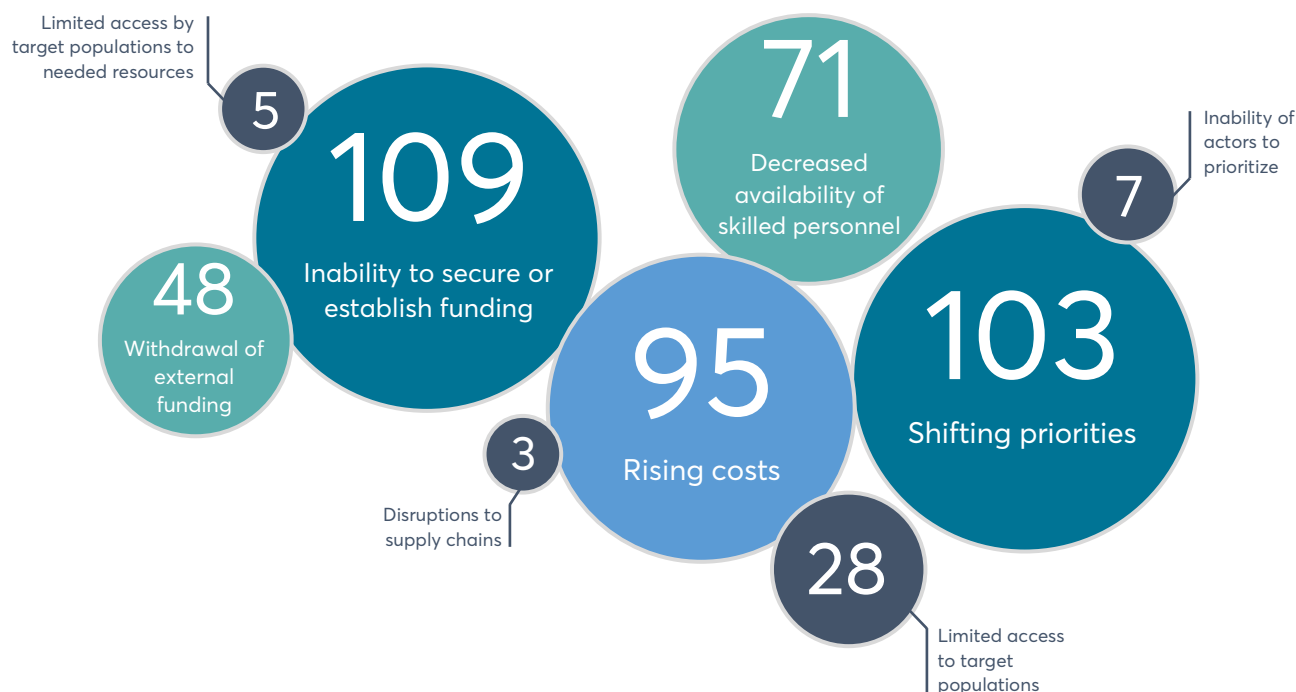


Acronyms: HIC, high-income country; LIC, low-income country; LMIC, lower-middle-income country; UMIC, upper-middle-income country.

The barriers that emerged due to political instability, conflicts or epidemics impeded progress (Figure 15) through an inability to secure or establish funding (109 of 247, 44%), shifting priorities (103, 42%) and rising costs (95, 38%). For governments and civil society organisations, funding challenges were particularly acute, with half (50% and 55%, respectively) reporting an inability to secure resources. Businesses cited increased costs (10, 36%) or a change in priorities (11, 39%) as primary impacts, which is expected, as the need to watch the bottom line will drive decision-making in the face of such challenges. Likewise, multilateral agencies also noted both changes in priorities (5, 63%) and rising costs (4, 50%), unsurprising as the mandate of these institutions requires them to quickly pivot to serve populations in crisis with costly commodities.

FIGURE 15

Types of barriers to progress amongst commitment goals reporting barriers (n=247)



The ripple effects of these challenges extend beyond funding, affecting the implementation of commitments in practical ways. Impacts included disruptions to supply chains, limited access to target populations and the withdrawal of external funding. In some cases, commitment makers reported a lack of skilled personnel, needing to evacuate staff and difficulties in conducting face-to-face activities.

To address these barriers, flexible and responsive support systems are essential. Greater investment in capacity-building, advocacy and resource mobilisation can help mitigate the effects of instability on commitments. By supporting commitment makers, it is possible to ensure that commitments remain resilient and the populations' well-being is safeguarded, even in the face of political and economic upheavals.

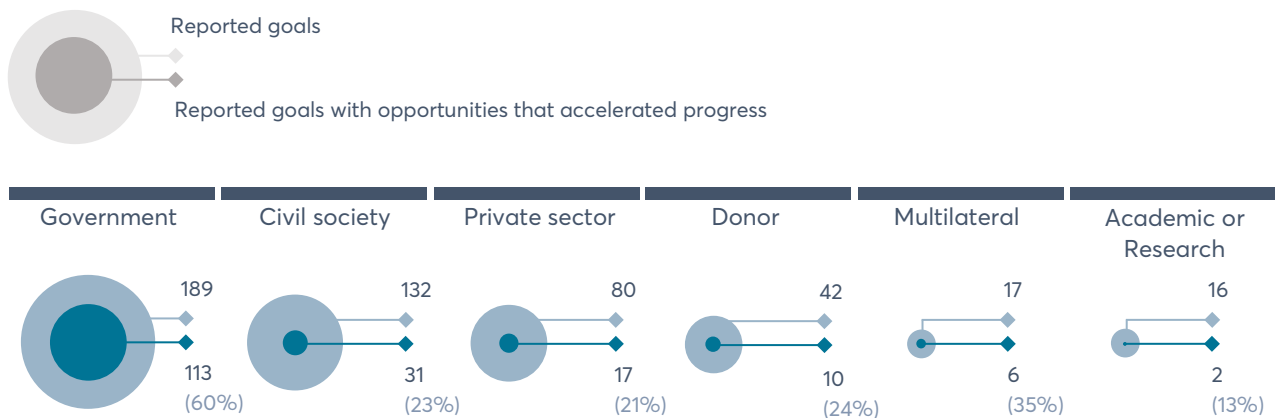
Opportunities for accelerating progress

Additional financial and political support and new partnerships were reported as opportunities for accelerating progress by governments and commitment makers in LICs and UMICs. These have driven meaningful advancements, particularly for impact-focused goals. Sustained engagement and targeted support remain essential to further boost progress and achieve nutrition targets.

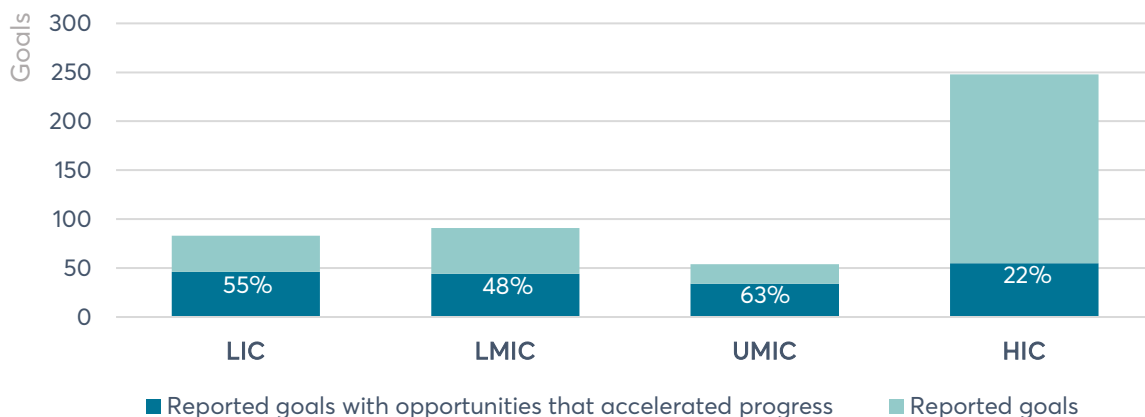
Goals from governments (113 of 189, 60%), UMICs (34 of 54, 63%) and LICs (46 of 83, 55%) were particularly likely to report having opportunities that accelerated progress (Figures 16 and 17). Impact-focused goals benefitted the most, with 62% (49 of 79) reporting such opportunities. This reinforces the value of tailored and targeted support, particularly in contexts where resources and capacity constraints are acute.

FIGURE 16

Reported commitment goals with opportunities that accelerated progress by commitment maker type (n=476)

**FIGURE 17**

Reported commitment goals with opportunities that accelerated progress by country income status (n=476)



Acronyms: HIC, high-income country; LIC, low-income country; LMIC, lower-middle-income country; UMIC, upper-middle-income country.

Opportunities to accelerate progress were identified for more than a third of the commitment goals (179 of 476, 38%), showcasing how targeted support can boost outcomes. Across all reported goals (Figure 18), types of opportunities that accelerated progress included additional financial support (110 of 179 mentions, 61%), additional political support (96, 54%) and new partnerships (86, 48%). This highlights the importance of strategic investments and collaboration in overcoming barriers and fostering meaningful progress.

FIGURE 18

Types of opportunities accelerating progress amongst commitment goals reporting accelerators (n=179)



Several examples illustrate how these opportunities contributed to progress. The Covid-19 pandemic and the subsequent need for catch-up efforts created conditions for renewed focus and investment. Existing partnerships were leveraged effectively, whilst shifts in awareness and consumer interest provided momentum for nutrition-related goals. Emerging evidence and tools, such as the updated Nutrition Policy Marker, new indicators and improved guidelines, also played a role in enhancing progress. These findings highlight the potential of combining financial resources, political commitment and collaborative partnerships to drive meaningful progress, especially for governments, LICs and goals focused on achieving impact. By continuing to build on these opportunities and scale successful strategies, commitment makers can accelerate progress towards achieving global nutrition commitments.

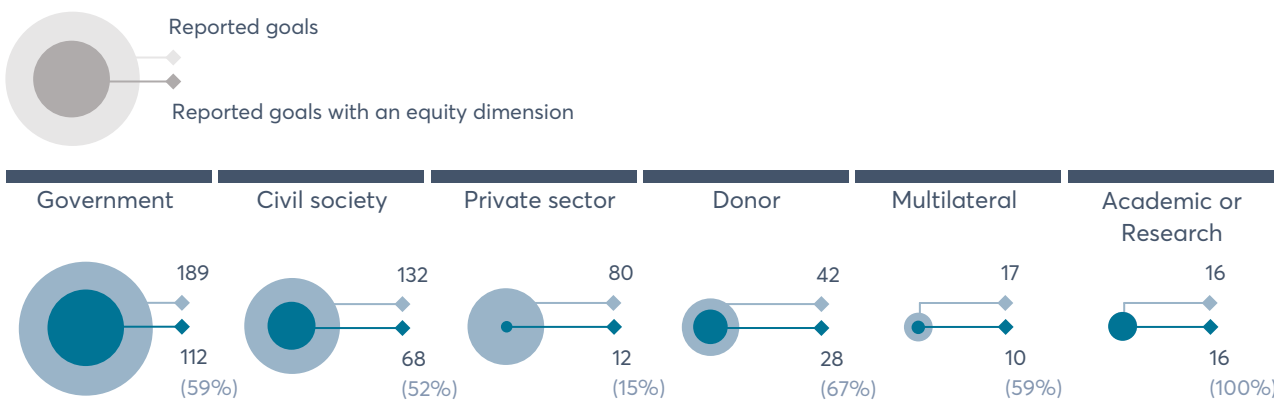
Equity considerations

Embedding equity considerations into nutrition commitments is essential for achieving inclusive and sustainable progress. Whilst over half of the reported goals considered equity, stronger integration is needed across goals and commitment maker types. Prioritising equity across commitment types will help ensure that nutrition efforts reach vulnerable populations.

Equity considerations featured in the majority of the reported goals. Understanding of 'equity' may differ by context. Here, we use *dimensions of equity* to mean characteristics of groups of people, whether defined socially, economically, demographically or geographically, that are associated with avoidable or remediable differences in nutrition outcomes or access to nutrition-related services in any sector. More than half of the reported goals (246 of 476, 52%) explicitly included a dimension of equity, a recognition of the importance of reaching *everyone* to achieve global nutrition targets.

However, this focus varied by commitment maker type. Interestingly, those from HICs were slightly less likely to mention such a focus. Figure 19 illustrates that goals from academic or research, donor, government, multilateral and civil society institutions often reported consideration of equity, with between 52% and 100% of their reported goals having such a focus. In contrast, private-sector entities were less likely to do so, with only 15% (12) of their goals considering equity. Their goals largely focused on the food supply chain and company initiatives, goals which may be less suited to equity considerations, as they typically do not include a direct connection to consumers and may not see a need for such consideration.

FIGURE 19
Reported commitment goals with equity dimensions by commitment maker type (n=476)

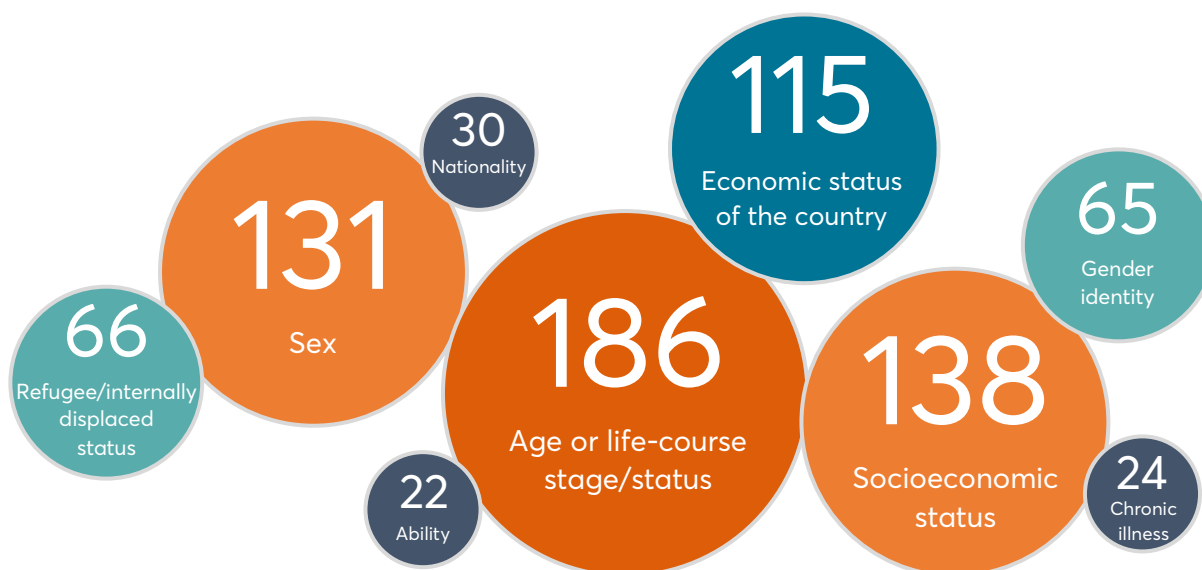


Examples of goals that had equity dimensions include activities aimed at reducing stunting, wasting and anaemia in women of childbearing age; promoting exclusive breastfeeding goals; improving infant and young child feeding; and providing vitamin A supplementation. Some interventions also specifically targeted pregnant and lactating women, girls and children under 5 years of age, with efforts focused on supplementary and complementary feeding to improve nutrition outcomes amongst vulnerable populations. Policy actions also played a role in advancing equity, with commitments to establish National Nutrition platforms and national steering bodies on nutrition. Capacity-building actions were aimed at increasing access to technical advisory and training services in both agricultural and non-agricultural sectors, increasing women’s access to income generation and promoting equality in household financial decision-making. Social-protection interventions and nutrition-specific interventions were designed to prioritise vulnerable groups, alongside transformative youth mobilisation policies and grassroots activities to promote healthy eating.

A range of equity dimensions were considered in the goals and reported on (Figure 20).

FIGURE 20

Type of equity dimension reported by commitment goals reporting equity dimensions (n=246)

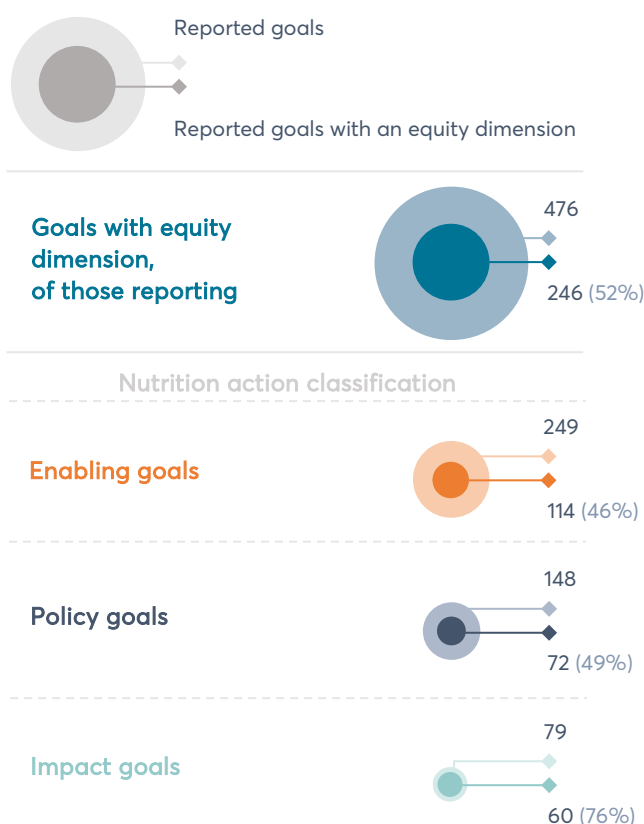


Amongst the dimensions considered, age or life-course stage/status (186 of 246, 76%) was the most frequently reported, followed by socioeconomic status (138, 56%), sex (131, 53%) and the income status of the country (115, 47%). Other dimensions, such as refugee or internally displaced status (66, 27%), gender identity (65, 26%) and nationality (30, 12%), were less frequently addressed. Dimensions such as chronic illness (24, 10%) and ability (22, 9%) were also reported, though less commonly.

Impact-focused goals were much more likely to report an equity dimension compared to enabling and policy goals (Figure 21). Three-quarters (60, 76%) of impact goals included equity considerations, compared to 46% (114) of enabling goals and 49% (72) of policy goals. Impact goals are well-suited for considering equity, as the target populations are often defined along such dimensions (e.g. age, sex). For example, many of the impact goals specifically target children under 5 years of age or women of reproductive age. Enabling and policy goals represent a greater variety in outcomes (e.g. annual disbursement, number of countries, number of trials and passage

FIGURE 21

Reported commitment goals with an equity dimension by action category (n=476)



of law). These outcomes are often universal in nature and not intended to benefit a specific group.

These findings underscore the importance of embedding equity dimensions whilst formulating the commitment. Reviewing dimensions of equity during commitment formulation encourages consideration of how the goal will meet the needs of the most marginalised groups. This can strengthen implementation plans and lead to increased impact across *all* people. Additionally, the ability to review how many goals consider each dimension of equity is not only important to track outcomes along dimensions of equity, but also to highlight if there may be underinvestment in certain groups relative to nutrition needs. Whilst significant progress has been made, particularly amongst certain commitment maker types and impact-focused goals, expanding equity considerations across all commitment maker types and all types of goals will be critical for achieving nutrition outcomes.

Conclusion

This first assessment of the 2021 Tokyo N4G Summit commitments highlighted that developing SMART, verifiable commitments plays a critical role in accurately tracking progress. Commitment makers shared updates on progress made, barriers that prevented actions from reaching fruition as well as opportunities that accelerated progress in many instances.

A substantial portion of reported goals were severely or highly impacted by barriers such as political instability, conflicts or epidemics, causing an inability to establish funding, shifting priorities, rising costs and a decreased availability of skilled personnel. However, commitment makers also reported additional financial and political support, as well as new partnerships, being instrumental in accelerating progress. These were particularly important for governments. Considerations of equity exist in many of the goals reported, though the focus was narrow. This highlights the need for greater attention towards different forms of equity to enable reaching *all* in the process of achieving the global nutrition targets.

Governments had difficulty reporting progress, and a clear finding that emerged was the need for investments to support data generation for monitoring and evaluation, particularly in those contexts where such data is not routinely collected. To support this effort, investments in data systems, tools, capacity-building and resource mobilisation will support commitment makers to effectively identify appropriate indicators and strengthen their ability to gather, analyse and share data for tracking. This also highlights the need for active engagement and collaboration with experts in identifying measurable indicators that could potentially be assessed using existing data and resources. Addressing these areas will lead to more accurate assessment and reporting, supporting the achievement of the aims set out by the 2025 Paris N4G Summit.

The findings of the progress assessment highlight the importance of clear and achievable targets for maintaining strong accountability and the value of frameworks like the NAF. Building on these successes and addressing challenges in resource-limited settings, commitment makers can strengthen global nutrition efforts and progress for all.

Annex: Progress assessment methodology

To facilitate progress reporting and community engagement, the GNR team sent emails to commitment makers and its wider email list starting on 22 April 2024 to invite them to report progress, then to notify them of the release of new tools to support the process. All email communications were tracked using HubSpot. To encourage responses, reminders about the deadlines or extensions to the deadlines were included in the GNR's promotion of resources such as a webinar co-hosted with the Scaling Up Nutrition (SUN) Movement Secretariat (featuring a keynote speech from the Special Envoy for N4G France), an instructional video (available in multiple languages) and the assessment methodology. Key organisations were contacted through networks such as the SUN Movement Secretariat, the EU4SUN project, the 2021 N4G Outreach Group, the GNR's Stakeholder Group, the GNR's Independent Expert Group and country offices of the host organisation PATH. For commitment makers managing many goals (more than 10), partially completed reports or those who appeared unresponsive, alternative contacts were engaged. Bounced emails were investigated, and new contacts were identified.

Ultimately, the GNR successfully contacted 86% (174) of the 202 commitment-making organisations meant to report. To increase responses, the GNR extended the deadline from an initial 4 weeks (ending May 2024) to 12 weeks (ending August 2024) for those still working on their reports. Upon completion, the GNR provided commitment makers with social media posts to celebrate and encourage their peers to do so.

Tools, including surveys and PDF versions of the survey and instruction guide, were provided in three languages, along with the multilingual instructional video. The GNR team also responded to queries from commitment makers and resolved issues as needed. For goals requiring clarification (e.g. inconsistent data formats such as percentages versus numbers), the GNR sent summaries of the original submissions and requested additional details to enable accurate progress calculations. These clarifications were managed using Microsoft Excel files, and the final edited data was incorporated into the progress evaluation.

This nine-month process began with a two-week period (4 to 19 April 2024) to update contact information and ended with another two-week period (16 to 31 December 2024) to address questions about the results to be published. The team then assessed progress by comparing reported achievements to baseline and target values established during the commitment-making process. The assessment period ended on 14 February 2025.

For goals with numerical outcomes, progress was evaluated against the expected linear trajectory between start and end dates. Each goal was then assigned one of the following statuses: **Reached by End Date**, **Reached After End Date**, **On Course**, **Off Course** or **Not Reached**. A goal was classified as:

- **Reached by End Date** if the reported value was equal to, greater than or within 1% (or 0.1% for percentages) of the target value by the end date.
- **Reached After End Date** if the reported value met the same criteria but only after the goal's end date.
- **On Course** if the reported progress was below the target value but within 1% (or 0.1%) of the expected progress for the reporting period.

- **Off Course** if progress was below both the expected value and the 1% (or 0.1%) threshold.
- **Not Reached** if the target had not been met by the end date.

For goals with non-numerical outcomes, classifications relied on qualitative, and therefore more subjective, assessments of progress. These goals were assigned one of the following statuses: **Reached by End Date**, **Reached After End Date**, **In Progress**, **No Progress** or **Not Reached**. Such a goal was classified as:

- **Reached by End Date** if the progress report clearly stated (or it could be directly inferred) that the target had been fully met by the end date.
- **Reached After End Date** if the progress report clearly indicated (or it could be directly inferred) that the target was fully met after the end date.
- **In Progress** if the reported progress clearly showed that significant efforts had been made towards achieving the goal.
- **No Progress** if no new efforts were made since the last reporting period or since baseline.
- **Not Reached** if the end date had passed and the target was not reported as reached.

Additionally, goals could receive one of three alternative statuses: **Withdrew**, **No Response** or **Progress Not Able to Be Assessed**.

- A goal was classified as **Withdrew** if the commitment maker formally withdrew the goal or indicated they no longer intended to report progress.
- A goal was classified as **No Response** if the commitment maker failed to report progress during the reporting window.
- A goal was classified as **Progress Not Able to Be Assessed** if, despite active participation, the commitment maker did not provide baseline data at registration or during reporting, did not measure the indicator since registration or failed to provide updated or sufficient information about the indicator's status.

More information about the methodology: Global Nutrition Report. Nutrition Accountability Framework (NAF) Commitment Progress Assessment Methodology. PATH. 2025. <https://globalnutritionreport.org/resources/naf/naf-commitment-tracking/naf-commitment-progress-reporting-assessment-methodology/>. Accessed 24 April 2025.

The vision of the Global Nutrition Report (GNR) is a world free from malnutrition in all its forms.

The GNR is the world's leading independent assessment of the state of global nutrition. We provide the best available data, in-depth analysis and expert opinion rooted in evidence to help drive action on nutrition where it is urgently needed.

A multi-stakeholder initiative comprising members from across government, donor organisations, civil society, multilateral organisations, the business sector and academia, the GNR is led by experts in the field of nutrition. The GNR was established in 2014 following the first Nutrition for Growth summit, as an accountability mechanism to track progress against global nutrition targets and the commitments made to reach them.

The GNR created the Nutrition Accountability Framework (NAF), the world's first independent and comprehensive platform for registering SMART nutrition commitments and monitoring nutrition action. Through a comprehensive report, the NAF, interactive Country Nutrition Profiles and the NAF Commitment Tracker, the GNR sheds light on the burden of malnutrition and highlights progress and working solutions to tackle malnutrition around the world.

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