

SDG 3: GOOD HEALTH AND WELL-BEING & SDG 2 AND ZERO HUNGER

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1. Introduction

The United Nations' 2030 Agenda for Sustainable Development established 17 interconnected Sustainable Development Goals (SDGs) to guide international efforts to eradicate poverty, safeguard the planet, and ensure prosperity for all (UN, 2015). Among these, SDG 3 – Good Health and Well-Being and SDG 2 – Zero Hunger are pivotal to realising human and social advancement. These goals are inherently linked: adequate nutrition serves as a fundamental determinant of physical and mental health, while resilient health systems underpin food security and sustainable livelihoods. Collectively, they constitute the foundation of sustainable development by addressing the biological, social, and environmental factors that influence well-being.

The integration of policies aimed at health and nutrition is vital for reducing global inequalities. Recent data indicate that approximately 735 million individuals continue to face hunger globally, whereas malnutrition accounts for nearly half of all deaths among children under five (FAO, 2024; WHO, 2023). Progress toward one goal consequently reinforces progress toward the other.

This report critically analyses the influence of SDG 3 and SDG 2 on health and well-being at the global, national, and local levels. It reviews existing policies and initiatives, assesses their effectiveness, and offers evidence-based recommendations for enhancement. By linking theoretical frameworks with practical applications, the discussion underscores how coordinated strategies can improve both health outcomes and food security, thereby fostering sustainable development for all citizens.

SDG 3 – Good Health and Well-Being

Sustainable Development Goal 3 (SDG 3) aims to “ensure healthy lives and promote well-being for all at all ages” (United Nations, 2015). It encompasses a wide range of targets, including reducing maternal and infant mortality, fighting communicable and non-communicable diseases, achieving universal health coverage, and strengthening health systems. SDG 3 supports the entire 2030 Agenda because good health is both an outcome and a driver of progress across other goals. A healthy population boosts productivity, education, and sustainable economic growth. Conversely, poor health limits individual potential and worsens poverty and inequality. The integration of SDG 3 with others, such as SDG 2 (Zero Hunger), demonstrates the interconnectedness of nutrition, disease prevention, and overall well-being, emphasising that sustainable development cannot be realised without equitable access to healthcare and proper nutrition.

B. Global Context

At the global level, progress towards SDG 3 has been mixed. The World Health Organisation's Global Action Plan for Healthy Lives and Well-being for All (2019) seeks to accelerate progress by coordinating the efforts of multiple international agencies. This plan

emphasises universal health coverage (UHC) and equitable access to essential health services, which remain central challenges in many low- and middle-income countries. The Universal Health Coverage Partnership supports more than 120 countries in strengthening health systems, yet disparities persist. The COVID-19 pandemic exposed weaknesses in public health preparedness and widened inequalities in access to care.

Non-communicable diseases (NCDs) such as heart disease, diabetes, and cancer now account for over 70% of global deaths (WHO, 2023), requiring long-term strategies that promote healthy diets and lifestyles. The intersection between SDG 3 and SDG 2 is clear: malnutrition—both undernutrition and obesity—intensifies vulnerability to illness and reduces life expectancy. Global frameworks, therefore, increasingly highlight the need to address health and nutrition together as part of a holistic approach to sustainable development.

C. National Context – United Kingdom (≈250 words)

The United Kingdom has committed significantly to achieving SDG 3 through its national health and wellbeing policies. The NHS Long Term Plan (2019) sets out priorities for improving population health, including disease prevention, mental health support, and obesity reduction. It recognises that prevention and early intervention are vital for easing pressure on acute healthcare services. The Office for Health Improvement and Disparities (OHID) continue to target major determinants of poor health, such as smoking, alcohol consumption, and unhealthy diets.

The Dahlgren and Whitehead (1991) Model of Social Determinants of Health offers a helpful framework for analysing how social, economic, and environmental factors influence health outcomes in the UK. Inequalities persist across income groups and regions; for instance, life expectancy in deprived parts of England remains significantly lower than in wealthier areas (ONS, 2023). The government's Healthy Weight Strategy and the Soft Drinks Industry Levy aim to enhance nutrition and curb obesity-related illnesses, directly supporting SDG 2 objectives. However, limited budgets and fragmented services have hindered full implementation in some areas. While policies acknowledge the importance of addressing social determinants, critics contend that current strategies still depend heavily on modifying individual behaviour rather than tackling structural issues such as housing, employment, and food security.

D. Local Example – Birmingham City Council (≈150 words)

The Birmingham Health and Wellbeing Strategy 2022–2032 demonstrates the city's dedication to the SDGs by focusing on creating healthy environments, promoting equity, and encouraging sustainable living. Its goal is to develop “a healthy city for all” through collaboration across sectors such as public health, education, and community groups. Initiatives like Be Active Birmingham and Healthy Brum support physical activity, mental health, and access to nutritious food.

Local data reveal ongoing health inequalities, with higher incidences of childhood obesity and chronic illnesses in underprivileged wards (Birmingham City Council, 2023). The council aims to incorporate sustainability into all decisions by applying the Well-being of Future Generations principles. Although progress is noticeable, achieving long-term success will require continued investment and stronger connections between health, housing, and local food systems.

E. Critical Evaluation and Recommendations (≈150 words)

While the UK and local authorities have implemented robust frameworks to advance SDG 3, significant challenges remain. Health inequalities continue to widen, exacerbated by austerity measures and the lingering effects of the COVID-19 pandemic. Many policies are well designed but inconsistently applied, particularly in deprived communities. Preventative strategies are often underfunded, limiting their impact on chronic disease prevention.

To enhance progress, a more integrated approach is needed that combines health promotion with nutritional policies aligned to SDG 2. Strengthening partnerships between the NHS, local governments, and community organisations could promote food security and healthier lifestyles simultaneously. Expanding community-based prevention programmes and addressing structural determinants—such as poverty, education, and housing—would deliver more equitable and sustainable health outcomes across the UK.

Section 2: SDG 2 – Zero Hunger

Sustainable Development Goal 2 (SDG 2) seeks to “end hunger, achieve food security and improved nutrition, and promote sustainable agriculture” (United Nations, 2015). It focuses on ensuring that everyone, everywhere, has reliable access to safe, nutritious, and sufficient food all year round. SDG 2 addresses multiple interconnected issues — food availability, access, utilisation, and stability — all of which directly affect human health and wellbeing. Undernutrition, nutrient deficiencies, and obesity are global challenges that undermine physical and cognitive development, increase vulnerability to disease, and reduce productivity. Nutrition and health are closely linked: poor diets contribute to non-communicable diseases such as diabetes and cardiovascular conditions, while ill-health reduces people’s ability to secure and prepare food. Consequently, progress towards SDG 2 reinforces SDG 3, as eliminating hunger and malnutrition is fundamental to achieving good health and sustainable development for all populations.

B. Global Context

Globally, the Food and Agriculture Organization (FAO) and the World Food Programme (WFP) play essential roles in implementing SDG 2. The Global Food Security Strategy (2023–2030) and the State of Food Security and Nutrition in the World (FAO, 2024) reports show that hunger has been rising again since 2019, driven by conflict, climate change, and

economic instability. About 735 million people worldwide faced chronic hunger in 2023, with malnutrition contributing to nearly half of child deaths under five (FAO, 2024; WHO, 2023). Climate change disrupts agricultural production through droughts, floods, and soil degradation, while conflicts, such as in Ukraine and Sudan, have heightened food price volatility. The COVID-19 pandemic further exposed vulnerabilities in global food systems and supply chains. Malnutrition remains a critical health issue, especially stunting and micronutrient deficiencies, which hinder child development and increase vulnerability to disease — a direct link to SDG 3. Global initiatives are increasingly focusing on nutrition-sensitive agriculture, sustainable food systems, and social protection measures to ensure that food security improvements also promote health outcomes. However, ongoing inequalities in resource distribution and trade continue to be significant barriers to achieving SDG 2 by 2030.

C. National Context – United Kingdom (≈250 words)

Food insecurity in the UK has become a rising public health concern, driven by the cost-of-living crisis, increasing food prices, and welfare reforms. The UK Food Strategy (DEFRA, 2022) offers a national framework aimed at enhancing access to affordable, sustainable, and nutritious food. It emphasises local production, sustainable farming, and minimising environmental impact. Complementary policies, including the School Food Standards and the Healthy Start Scheme, seek to boost nutritional intake among children and low-income families. These efforts support SDG 3 by addressing dietary health inequalities and preventing diet-related diseases.

The Social Determinants of Health model (Dahlgren & Whitehead, 1991) shows that food insecurity is influenced by income, education, employment, and living conditions. Despite strong food safety regulations, socio-economic disparities lead many households to depend on emergency food support. The Food Foundation (2024) noted that in 2023, one in five UK households faced food insecurity. Government responses have mainly been reactive, focusing on crisis support rather than systemic food system reforms. A comprehensive, “Health in All Policies” approach could better integrate nutrition, agriculture, and public health initiatives to build long-term resilience and equity.

D. Local Example – Birmingham Food Justice Network (≈150 words)

At the local level, initiatives like the Birmingham Food Justice Network (BFJN) showcase collaborative efforts to tackle food poverty and enhance community wellbeing. Supported by Birmingham City Council and local charities such as FareShare and Trussell Trust, the network organises food redistribution, community pantries, and education programmes centred on healthy eating. The initiative is part of the city’s broader Health and Wellbeing Strategy (2022–2032), which recognises food security as a key factor in health.

BFJN advocates for a sustainable food system by connecting surplus food with community needs, while also helping to achieve environmental aims through waste reduction. However, although foodbanks and redistribution schemes offer vital short-term relief, they cannot resolve the underlying causes of food insecurity, such as low income and increasing living

costs. To foster long-term resilience, more focus is required on local food production, employment opportunities, and affordable healthy food options.

E. Critical Evaluation and Recommendations (≈150 words)

UK efforts toward SDG 2 demonstrate strong community involvement but lack a unified, long-term national strategy that fully links food security with public health. While reliance on charitable food aid highlights community resilience, it also exposes gaps in social protection policies and wage adequacy. The rising cost of living has made nutritious diets unaffordable for many, hindering progress on both SDG 2 and SDG 3.

To improve policy outcomes, government and local authorities should focus on overhauling the food system, emphasising prevention rather than crisis management. Suggested measures include expanding local food collaborations, investing in community gardens and urban farming, encouraging sustainable procurement in schools and hospitals, and enhancing welfare support to ensure food is affordable. A comprehensive “whole-systems approach” — integrating agriculture, health, education, and environmental policies — could help achieve lasting progress in ending hunger and boosting national wellbeing.

Conclusion

The analysis of Sustainable Development Goals 3 and 2 underscores the fundamental interconnection between health, nutrition, and sustainable development. Attaining good health and well-being relies not only on effective healthcare systems but also on access to safe, sufficient, and nutritious sustenance. Conversely, food security and sustainable agriculture are bolstered when populations are healthy, educated, and socially stable. Progress in one domain invariably enhances outcomes in the other, thus rendering integrated policymaking indispensable for long-term sustainability.

On a global scale, the World Health Organization and the Food and Agriculture Organization emphasise that addressing malnutrition, non-communicable diseases, and health inequities necessitates coordinated cross-sectoral initiatives. At the national level, the United Kingdom has achieved significant progress through initiatives such as the NHS Long Term Plan and the UK Food Strategy. Nonetheless, socioeconomic disparities and the cost-of-living crisis continue to threaten equitable access to health and nutrition. Locally, cities such as Birmingham exemplify the efficacy of community-led approaches that integrate food, health, and sustainability objectives.

Ultimately, the realisation of SDG 3 and SDG 2 requires a comprehensive systems approach that aligns global frameworks with national policies and local implementations. By embedding principles of nutrition, preventive health, and social equity into all facets of development planning, policymakers can advance towards a future wherein every citizen benefits from good health and food security — the foundational elements of a genuinely sustainable and inclusive society.

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