



No. 2.1 Understanding the Causes of Malnutrition in Emergencies

What is malnutrition?

Malnutrition is a major, global, public health problem that occurs in both developing and industrialised countries. It is not restricted to emergency situations, but can be prevalent in developing country contexts.

Malnutrition is a global term for being not well nourished. This includes over- and under-nourishment, and insufficient nutrition for particular micronutrients, e.g., vitamins and minerals deficiencies.

Acute (short-term) malnutrition—also called **wasting**—is a severe loss in body weight or failure to gain weight as a result of recent inadequate dietary intake or acute infections, and is measured as weight for height. In emergency situations, practitioners use wasting prevalence to understand and classify the gravity of the crisis.

Chronic (long-term) malnutrition—also called **stunting**—is measured as height for age.

Underweight is a combination of stunting and wasting, and measured as weight for age.



Fig. 1: Assessing nutrition status in Goma, DRC
(Credit: Tineke D'haese/Oxfam Solidarité)

What causes malnutrition?

The immediate causes of malnutrition are disease and/or inadequate food intake, which in turn result from inadequate provision of food, health or care at household or community level.¹ Figure 2 provides a conceptual framework showing the causes of malnutrition.

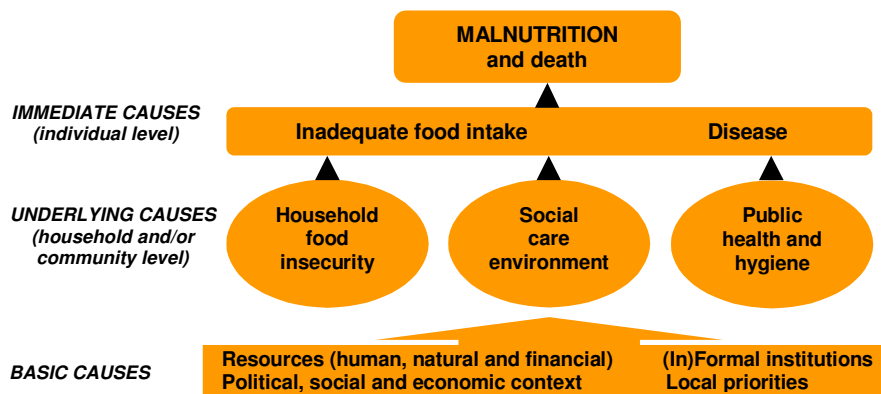


Fig. 2: Causes of malnutrition (SOURCE: UNICEF 1992)

Immediate causes of malnutrition

Inadequate food intake and/or disease are the immediate causes of malnutrition. The most common disease suffered by children in both stable and emergency situations is infectious disease (diarrhoea, acute respiratory infections, malaria and measles). These conditions can affect food intake through loss of appetite, nutrient mal-absorption or loss,

altered metabolism or increased nutrient needs. Poor food intake and malnutrition affects susceptibility to, and the severity and duration of, disease.

Underlying causes of malnutrition

Numerous complex factors at the community and household level can influence the food intake and the presence of disease. These underlying causes of malnutrition can be categorized as: **household food security, social care environment** and **public health**.

Household food security incorporates food 'access' and 'availability', largely determined by livelihoods. Emergencies usually imply livelihoods erosion and failure of food security. E.g., **natural disasters** affect food access by destroying crops, food, fuel and water stocks, and disrupting market access. **Displacement or forced migration** causes loss of traditional food and income sources, and of social networks that would normally support household caring mechanisms.

Caring practices can determine malnutrition even when adequate food is accessible. Caring practices include **feeding, hygiene, psychological and health behaviours**. They include direct practices and wider social determinants such as social networks. These may be severely altered during an emergency (e.g., women may become more vulnerable when forced to leave their families in search of food, or infant formula may become freely available during an emergency, disrupting breastfeeding).

Public health is a key determinant of nutritional wellbeing. Access to good quality health services, safe water, adequate sanitation and good housing are preconditions for adequate nutrition. Disaster-affected populations are often exposed to public health risks.

Basic causes of malnutrition

Various, complex and multi-level factors influence food security, caring practices and public health. These basic determinants of malnutrition relate to the **quantity and quality of resources available, who controls them and who uses them**. Political, legal and cultural factors may either promote or hinder access to and control over resources. Conflict may grossly disrupt informal and formal structures, reducing the potential resources available to a population. It may also lead to marginalisation of particular groups and to an increase in their nutritional vulnerability. Basic causes of malnutrition are **usually beyond the control or influence of humanitarian actors**, but they influence the nutrition of communities, and possibly the preconditions for recovery from emergencies.

Box 1: Mainstreaming nutrition in EFSL: why it matters

Poor nutrition can seriously compromise people's ability to regain overall livelihood security after an emergency. Equally, achieving improvements in livelihoods security alone will not automatically translate into good nutritional and health status. Emphasizing nutrition mainstreaming within the context of a broad-based emergency food security and livelihoods approach has **at least three advantages**:

1. It places **emphasis on local capacity** to protect nutritional wellbeing, addressing malnutrition at the individual level
2. It acts as an entry point for different sectors to **address malnutrition's multiple causes**, in a complementary, long-term manner
3. It can provide a coherent focus to ensure sustainability when combinations of short- and long-term interventions are required

A linked approach can not only save lives in the short term, but also strengthen livelihoods, decreasing vulnerability to future crises.

How do nutrition interventions link to other humanitarian programmes?

There are potential links between nutrition interventions and those for **public health engineering (PHE)** and **public health promotion (PHP)**. For example:

- PHE—ensuring safe water supplies and sanitation and waste systems, or establishing water management committees; and,
- PHP—promoting sound hygiene and infant care practices, or preventing malaria.

Where can I find further reading and more detailed information?

Oxfam publications – Oxfam position on school feeding (under development) – Oxfam Anthropomorphic Guidelines	Food and Nutrition Technical Assistance II Project (Emergency nutrition technical assistance): www.fantaproject.org
Emergency nutrition training materials, policy guidance, research: Emergency Nutrition Network www.enonline.net	UNICEF nutrition portal (technical, policy and advocacy publications): www.unicef.org/nutrition

Who can I contact for more information and guidance?

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References

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