

Malnutrition: The Silent Pandemic; Its Implications Of Global Nutrition Agenda 2025.

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ABSTRACT: *Public health has become more challenging from 2019 like no time in recent history, yet well ahead covid-19 the world was already witnessing a much quieter pandemic called malnutrition. The number of people affected by malnutrition is astonishing. Globally, an estimated 149 million children are stunted (chronically undernourished) and 50 million are wasted acutely undernourished which is underlying cause of 45% of all child deaths. To tackle the double burden WHO's Member States have recognized global targets for improving maternal, infant and young child nutrition. The targets are vital for identifying priority areas for action and catalysing global transformation. The purpose of this article is to analyse the present scenario of Malnutrition issues which is a silent pandemic that prevails and affect almost all nations of the world and to analyse the implications of Global Nutrition Targets 2025 through collective actions. The covid'19 and the lockdown had intensified the malnutrition status across the globe. The challenge to tackle the situation has been discussed in this article and an attempt is also made to examine the global target achievement and its implications for future actions.*

Keywords: *Malnutrition. Global Target, Pandemic, Collective Action, Economy, Health care system.*

1. INTRODUCTION

Growth of World Economy and Gross democratic product have decreased markable from 2019 due to pandemic in the world. All most all the countries suffered and lost their growth in Economy. The new changes leads to loss of man power and production which ultimately affect the growth of the country. Even the developed countries like USA, Japan and EU showed remarkable decrease in per capita income; In 2017 it was 2.1 in USA which have come down to 1.7 of growth output in 2021. The Developing countries like India is not left out in the scenario; In 2017 it was 6.3 and 2021 gone down to 5.4. The least developed countries also face the same issues due to pandemic. The economic cost of malnutrition is estimated to range from 2 to 3 percent of GDP. It is noted that consumption based on per-capita is directly related with Malnutrition. When the economy of the family falls down, the purchasing power also get reduced which have corelation with Malnutrition of the entire family. It is noted that in India Malnutrition can decline the economic growth of a nation by 8% due to loss in productivity by reduced education and cognitive Damages. Due to Covid'19 India could have around additional 60,000 child deaths. The lockdown disrupted access to essential health services; restriction on movement threatens supply chain moreover

reduction in household income affects people's ability to get food. In India 14% of moderate to severe wasting had increased due to Covid. Globally 149 million children are undernourished.

Prevalence of Malnutrition: the silent pandemic

The silent Pandemic had distended its platform during covid'19. The UNICEF, WHO and World Bank Group Joint Child Malnutrition Estimates (2020) states that Africa and Asia have the greater share of all forms of Malnutrition. Asian Development Bank revised one the thickly populated counter India's forecast down to -10% shrinkage in economy in 2020. Young children are typically immune to the direct effects of Covid'19, their immature immune system and high nutrient requirements for growth and development is high in nature. Wasting in India was 20% in 2015-16 has close to half of worlds wasted children. Standing together for Nutrition formed to provide evidence on covid'19s impact of undernutrition and mortality. Public social and nutrition programs are disrupted. Economic costs of the long Lockdowns the increased the poverty rate. Charity Oxfam declares, up to 12,000 people starve to death each day due to Corona virus related restrictions. In India, Malnutrition is already a threat to life and the Unite Nations says that the pandemic is making it worse. The Socio-economic impact of Covid have worsen Anaemia, food insecurity and poverty for families of vulnerable and marginalised.

The latest available data by Global nutrition report shows that no country is on progression to reduce the incidence of anaemia among women of reproductive age, with one in three (32.8%) women aged 15 to 49 years affected, predominantly those who are pregnant. Globally, it is assessed that 14.6% of infants have a low weight at birth, with only 11 countries on course to meet the low birthweight target. Some development has been made towards achieving the exclusive breastfeeding target, with 32 countries on course and 44.0% of infants aged 0 to 5 months universally exclusively breastfed. 30 nations are on progression to meet the stunting target and 49 countries are on progression to meet the wasting target, yet 21.3% of children under 5 years of age are still affected by stunting and 6.9% by wasting. Worldwide, 53 countries are on course to prevent an increase in the prevalence of overweight among children under 5 years of age, which currently affects 5.6% of children.

According to Global Nutrition Report 2020, Globally 1 in 9 people are hunger and undernourished due to Pandemic situation. It has produced a fragile food access to the vulnerable and a weaker section of the people who are already devastated by health and nutrition needs. Many Government programs such school nutrition, Iron supply to adolescents, Prenatal care programs has faced implementation challenges. The poor and marginalised relied upon such services unable to get staple food. Millions of households in the world had fallen in to severe food insecurity. The double burden of Malnutrition even affected the developed countries.

The 6 Global Nutrition targets to be achieved by 2025 has been totally weakened due to Covid'19. Almost all countries are too slow to achieve any of the 6 targets including the High income or Developed countries. The statement of SDG "No one is left behind" changed to "everyone to left behind". The strongest Covid'19 virus had also spread the silent pandemic "Malnutrition" throughout the world.

Collective Actions to end all forms of Malnutrition:

Sufficient Nutrition with equal distribution has to be ensured and particularly for the most vulnerable and affected. Bringing solidarity in allocating economies, resource distribution and equal health service have to be ensured. Collective Involvement from National, state government, civil society organisations for aligned programs to combat malnutrition. It is

very much need to address inequities between men and women which requires strengthened governance that promote collective action. Prioritised policies with required resources at global and National level to address the nutritional inequities are essential. The political and economic instability leads to aggravation of nutrition Inequalities. Reducing the gap between advantaged and disadvantaged people have to be minimized.

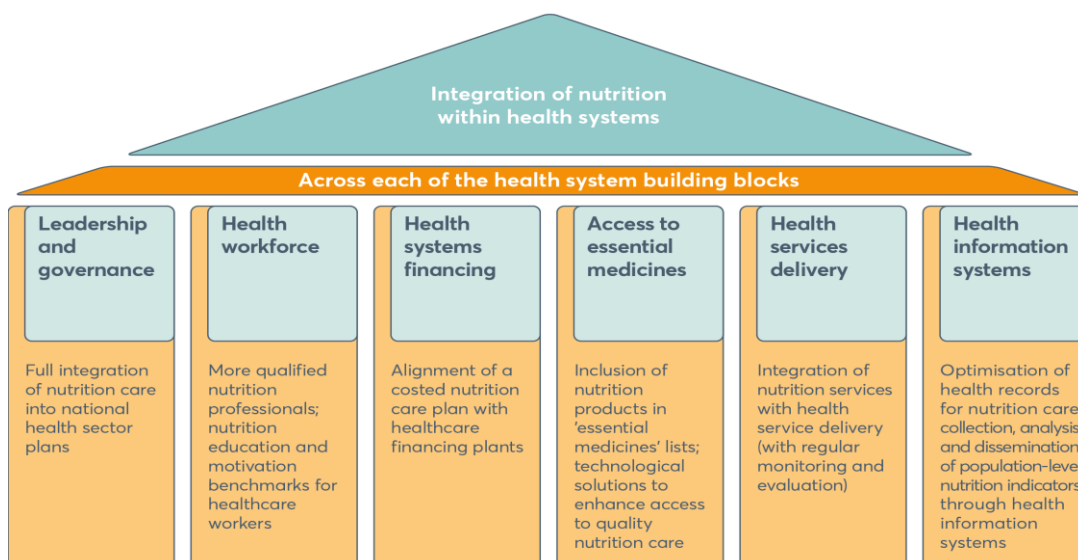
Strengthened Health care systems to deliver nutritional needs even in the crisis situations. The need of well targeted programs by integrating nutrition in to Universal health have to be emphasized. The resilient and sustainable social protection mechanism have to be placed. Policy framework have to be designed for equitable distribution and access of comprehensive care. The primary health care systems have to be responsive to varied population needs based on their age, gender, ethnicity, disability and socio-economic conditions. The WHO's health systems framework to measure how nutrition could be combined in to health system has 6 mechanisms which are Leadership and governance, Health workforce, Funding, Access to essential medicines, service delivery and Datamanagement Systems helps to consider integrated and comprehensive health systems.

Source: Adapted from WHO, 200 (Nutrition care covers all services that would comprehensively prevent and treat malnutrition in all its forms.)

Specific task force for nutritional wellbeing of women and children has to be enforced for which political commitment and action is required. The allocation of Budget on health, food and nutrition is essential to accelerate the actions needed to address issues from production to consumption. The Malnutrition Task Force could raises awareness. delivers information and practical guidance for everyone to help combat preventable undernutrition. The self-screening toolkit could be developed which can be administered by all people by themselves to identify the risk of becoming malnourished. A booklet on Eating Nutritional food could be published to bring practical tips on eating and keeping well as life changes.

Supported with evidence based monitoring and periodic evaluation of cost effective and innovative programs to meet the need of the malnourished. Bringing the community involvement and collective action for centralized governance across the globe. Creating database through periodic screening and surveys for better monitoring and evaluation of programs is essential for better implementation of programs.

2. CONCLUSION:



The Covid19 pandemic shows the correlation of the several structures that regulate nutrition consequences: the food consumption, health and socio-economic systems. The malnourished have weaker immune system and are prone to several infections which could worsen the situation of hospitalization and death. It is essential to ensure equal distribution of resources, strengthened universal health care systems, specific task force, evidenced based monitoring and evaluation. Good nutrition act as a protecting shield against Covid19. Sustainable Nutritional resilience is a key element can achieve though collective action and to combat the threat. The SDGs “No one is left behind” could be possible through promoting social solidarity among nations.

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