

Malnutrition Across the Spectrum and the Increased Health Risks During the COVID-19 Pandemic

FRIDAY 26TH JUNE, 2020



The **Irish Global Health Network and Esther Alliance** runs a series of **Webinars on the COVID 19 Pandemic** and this webinar was co-organized with the **Nutrition and Health Study Group of Development Studies Association of Ireland (DSAI)**. DSAI is a network and space for dialogue between development researchers, policy makers and practitioners and the Nutrition and Health Study Group provides a voice and space to explore issues relevant to these areas in development.

Access the webinar recording on this page: www.globalhealth.ie/covid-malnutrition-webinar/

INTRODUCTION

This Webinar provided the opportunity to explore the impacts of malnutrition and the challenges arising from the COVID-19 pandemic. It was delivered by experts in the field including representatives from NGO's and a host of academics, who joined **Webinar Anchor, Professor Ruairi Brugha**, to provide thought provoking and challenging insights to malnutrition within the COVID-19 pandemic.

There are disproportionately higher levels of hunger and malnutrition alongside the increasing trends of obesity and diabetes in low income countries and this is compounded by weak health systems at baseline, which is particularly concerning in fragile states. This webinar reviewed the current global pandemic, and its risks, through a nutrition and health lens; what the research gaps are; what can be done to strengthen current programmes and the ways to manage risk and prevent increased mortality through indirect consequences. Key priorities were identified for going forward and the ways that evidence-based recommendations could translate into practice in a timely manner.

KEY TAKE AWAY MESSAGES

- Nutrition should be the centre for every response regardless of COVID 19
- Importance of data collection documenting knowledge/ lessons learnt/ sharing of information/ policies and guidelines and encouragement to get involved with nutrition
- Policy makers should be considering all the trade-offs and costs benefits and indirect consequence of health impacts when implementing programmes

DR TIMOTHY ROBERTON, JOHNS HOPKINS SCHOOL OF PUBLIC HEALTH

*Dr Timothy Roberton, is a faculty member in the Department of International Health at Johns Hopkins Bloomberg School of Public Health. Tim works as part of the team that maintains the **Lives Saved Tool** and teaches courses on impact evaluation, NGO management, and statistical modelling.*



“ The greatest potential cause of childhood mortality was an increase in wasting. It increases the susceptibility to die from other infectious disease. For maternal mortality, the things that would lead to the greatest number of maternal deaths would be a reduction in emergency obstetrics services

- COVID 19 pandemic has caused a disruption to routine care and modelling studies exploring the likely consequences on maternal and child health indicates scenarios which should enable governments to target its response. However breastfeeding/ WASH/ or longer term consequences of contraception wasn't included in their modelling studies
- Across our three scenarios, the reduced coverage of four childbirth interventions (parenteral administration of uterotonics, antibiotics, and anti-convulsants, and clean birth environments) would account for approximately 60% of additional maternal deaths
- The increase in wasting prevalence would account for 18–23% of additional child deaths and reduced coverage of antibiotics for pneumonia and neonatal sepsis and of oral rehydration solution for diarrhoea would together account for around 41% of additional child deaths
- Importance of reflecting on strategies and delivering packages of interventions through community workers as opposed to just focusing on an individual intervention
- The main causes of childhood mortality (under five year) are from very treatable conditions with pneumonia, malaria, neonatal sepsis or diarrhoea and if they are unlikely to get appropriate treatments (antibiotics, zinc and rehydration solutions) for these its likely to contribute to an increased proportion of additional deaths estimated

MARIE MC GRATH, EMERGENCY NUTRITION NETWORK

Marie has been a **Technical Director with the Emergency Nutrition Network (ENN)** for 17 years. She is co-chair of the **Wasting Thematic Working Group of the Global Assistance Mechanism on Nutrition (GTAM)** and is **Co-Editor of ENNs Field Exchange**. Marie worked as **Senior Paediatric Dietician** and spend several years in the field as an **Emergency Nutritionist with Merlin** and **Research Nutritionist with UCL/Centre for Global Health and Save the Children**.



“ 47 Million children in the world are wasted and less than a quarter of those get treated and we are having to use the word pandemic to get attention on nutrition

- **ENN** is a partner with the **Global Technical Assistance Mechanism for Nutrition (GTAM)** which is endorsed by over 40 global nutrition clusters partners. They have responded to the COVID-19 challenges by providing technical policy briefs/ updates on UN websites and consensus papers and support in real time to those working in the field
- Supporting and collaborating with field workers, NGO's, UN agencies to ensure that accurate evidence-based information is provided and works to clarify misinformation. For example, work done to clarify misinformation about COVID-19 which separated breastfeeding mothers from their babies
- Challenges for nutrition and health include and not limited to suspended or disrupted health provision of wasting services; reallocation of staff and space; lack of appropriate PPE and equipment; disinfectant issues of equipment and space and reduced capacity of centres due to appropriate spacing with limited triage space
- Challenges with screening for wasting include; updating management protocol and risks associated with attending for treatments and lack of interventions; the frequency of visits and supply of ready-to-use therapeutic foods with disrupted food systems and agriculture impacting on food insecurity
- Many low-income countries have fragile health systems and or are affected by humanitarian crisis and many are affected by food security which makes them very vulnerable to the impact of COVID-19

SAJIA MEHJABEEN, NUTRITION ADVISOR FOR CONCERN WORLDWIDE

Nutrition Advisor for Concern Worldwide. She has been working on emergency, transitional and development programmes for 12 years in South Sudan, Sudan, Ethiopia, Zambia, Mozambique, Somalia, Kenya, Yemen, Bangladesh and Pakistan.



“ Investing in systems strengthening should be the priority, even in the fragile countries. The importance of data and prediction analysis is more important than ever and the opportunity for us to build the system so we can respond to future emergencies

- Challenge for many NGO's with COVID 19 is balancing the health risk with the chronic conditions that are impacting children's mortality every day, whilst also protecting staff and healthcare workers in providing essential care for malnourished children and their families
- Concern is constantly reviewing their existing preventative and interventions programmes with increasing concern that more vulnerable groups will be at risk with essential services on hold
- New innovations implemented include developing isolation spaces at health centres and extending Mother MUAC to health facilities and new technologies with mobile phones and WhatsApp, but these come with challenges of insufficient networks and many individuals /communities do not have mobile phones
- Challenge with knowledge gaps for management and treatment policy and guidelines for those severely malnourished children that have COVID-19. Concern has shared their guidance document with ENN and this was been circulated more widely
- Urban and slum dwelling present a challenge for social distancing. It's not possible or feasible for people in these conditions to self-isolate

SUZANA ALMOOSAWI

Suzana Almoosawi is a Public Health Nutritionist and a Nutritional Epidemiologist. She has extensive expertise from developing and managing dietary interventions to the design and analysis of epidemiological surveys and cohorts. Suzana was speaking on behalf of the NEdPro Global Centre for Nutrition and Health at Cambridge.



“ The main issues is the lack of data; if we don't have data on the individual and their nutritional status how are we able to determine the best solution for managing their health or creating public health interventions

- NCDs are even more important now given the current pandemic and nutrition plays an important role in the immune system in both the case of over and under nutrition
- Poor nutrition not only contributes to poor health and increase susceptibility to COVID- 19 infection, but once the person is infected it becomes more challenging to manage if malnourished or with NCD e.g. their glycaemic control if diabetes present
- Over nutrition and obesity is prevalent in many low-to-middle income countries and it can easily mask key micronutrients deficiencies as there is a risk of assumption about good health when not underweight
- Importance of identifying nutrition with appropriate tools as a primary cause of poor health and giving it the priority needed
- Challenges with assessment and identification of people's nutritional status and once identified as malnutrition, there is often poor continuation of treatments from hospitals to community settings

RESOURCES

For references related to information cited in this document and further COVID-19 resources on malnutrition dimensions of the pandemic, visit: www.globalhealth.ie/covid-malnutrition-webinar/

