CAUSES AND CONSEQUENCES OF MALNUTRITION

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Abstract: Malnutrition is one of the major social problems in developing and under developed countries including Pakistan. Under nutrition and over nutrition both lie under the same concept malnutrition. Malnutrition is considered as the key risk factor for illness and death, contributing to more than half the deaths of children globally. PMAS Arid agriculture University Rawalpindi was the study locale; the data was collected from Sample of 40 FT students. The paper suggested that there are several causes of malnutrition including inadequate breastfeeding, natural disasters and food insecurities which lead to death and infertility.

Key Words: Malnutrition, Poverty, Food security, Breastfeeding

INTRODUCTION
Malnutrition, caused by inadequate, excess or imbalanced nutrition, is affecting large parts of world’s population. It has serious prospective implications; extending from individuals to families, communities and even to the national and international levels. Malnutrition is known to compromise an individual’s productivity, endanger the economy, and impede national development in the long run. High morbidity and mortality rates of malnourished people place immense challenges on investments in all development sectors of the society” (FAO 2004). In the developing countries an estimated 2-3% of gross domestic product (GDP) is known to be lost to malnutrition (World Bank 2006). During the past decade, Pakistan has had persistently high and certainly unaffordable rates of malnutrition (Pakistan Planning and Development Division 2011). The major objective of current article is to promote the role of nutritional status in performance and progress of individuals as well as the nations. It focuses on describing the situation of malnutrition in Pakistan, its consequences on national development, its causes and some suggestions for its control. Malnutrition is a condition caused by inadequacy, excess or imbalance of nutrients (FAO 2004; World Bank 2006) and ranges from under-nutrition to over-nutrition. It threatens the survival as well as the productivity of individuals affected by its either or both aspects (Mahan and Escott-Stump 2008). Malnutrition has remained and still is a global health problem. Estimates of the period 2010-2012 show one eighth of the world’s population to be undernourished, out of which 98% inhabit the developing countries (FAO 2015), particularly the Asian region (UNSCN 2010). Globally, 16% of all children less than five years of age were estimated to be underweight in the year 2011, the highest prevalence being in South Asia. Data of the period 2010- 2012 showed that developing countries are home to a vast majority of chronically undernourished individuals. All times access to sufficient, nutritionally adequate and safe food referred as food security. Insufficient access to food and also insufficient food production referred to food insecurity. The people who do not grow and/or purchase the needed food or gain access to the services needed are called food insecure people (Susilowati and Karyadi 2002). Such countries, being unable to cater the demands of malnutrition, become further indebted in terms of economy and remain entraped in this vicious cycle. The incidence of
nutritional deviation on the side of overweight and obesity illustrates no less grim picture. After obesity prevalence being doubled in 1980s, over weight and obese have even surpassed the number of undernourished worldwide (FAO 2015). This double burden of malnutrition explains the need of integrated approach for handling its complex nature. Malnutrition is quite prevalent in Pakistan. In this low middle income and fifth most populous country nearly a quarter of population is unable to buy the nutritional requirements (2,350 calories per day) of an adult (UNICEF 2012). Malnutrition contributes to the high under five mortality rates (137 for 1000 births) (FAO 2010) by causing about 35% of these deaths (UNICEF 2012). Being located in south Asian region, Pakistan is predisposed to high malnutrition prevalence. But the location alone is not a dependable factor. Several other factors are certainly more strongly related to current nutritional status of the population, some of which have been subsequently mentioned. Child malnutrition is most prevailing social problem in developing countries like Pakistan. Child malnutrition is considered as major reason for illness and death, contributing to more than half the deaths of children globally (Cheah, et al. 2010). Child’s physical and mental health would be at risk due to malnutrition, which results in lower level of educational attainment (Chirwa and Ngalawa 2008). Food insecurity, poor nutritional status of mothers, frequent infections, utilization of health services and care provided to children are correlated to malnourishment (Linnemayr, et al. 2008). Several studies proved a strong correlation between malnutrition and poverty that is as, with people not having enough income to buy food (Chirwa and Ngalawa 2008). The findings of this study are in line with the first perspective that there is an association between poverty and child nutritional status.

There are many different concepts of poverty and they include the following. Poverty is multidimensional. “Poverty exists where basic needs are not fulfilled, and there is little power, little choice and lack of control of resources. Poverty is more strongly related to human rights than to welfare” (Susilowati and Karyadi 2002). During the past decade, Pakistan has had “persistently high and certainly unaffordable rates of malnutrition” (Tanweer, et al. 2015).

**MATERIALS AND METHODS**

PAMS Arid Agriculture University were chosen as study locale from where a sample of 40 students was selected from where a sample of 40 students was selected ended questionnaire which is used to find out causes and consequences of malnutrition.

**RESULTS AND DISCUSSION**

Table. 1: Reasons of Malnutrition

<table>
<thead>
<tr>
<th>Frequencies</th>
<th>Yes%</th>
<th>No%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reasons</strong></td>
<td><strong>Frequencies/Yes%</strong></td>
<td><strong>Frequencies/No%</strong></td>
</tr>
<tr>
<td>Poverty</td>
<td>9 (23)</td>
<td>31 (77)</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>26 (65)</td>
<td>14 (35)</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>35 (88)</td>
<td>5 (12)</td>
</tr>
<tr>
<td>Natural Disasters</td>
<td>35 (88)</td>
<td>5 (12)</td>
</tr>
</tbody>
</table>

There are so many reasons of malnutrition but here in the above table researcher is discussing four reasons of malnutrition. To some extend poverty is reason of malnutrition; in countries like Pakistan low income level and low expenditure on food problem of malnutrition in population. The results show only 23% units of total sample agree that poverty is a key issue of malnutrition in Pakistan while 77% respondents say no to the statement that poverty is cause of malnutrition that poverty is not a major cause of malnutrition. A study in 2014 shows “high levels of malnutrition among children and poverty have significant association in Pakistan” (Arif, et al. 2014). Breastfeeding and other nutrition actions is pivotal contributor in better health throughout the lifecycle. Newborns survive, children thrive and grow, and well-nourished women have healthy pregnancies and live more productive lives. Present study shows that breastfeeding in Pakistani society is going to low level. Changing trends of overall society re a major cause of low rate of breastfeeding like lifestyle of females, career oriented women. 65% respondents agreed that lack of breastfeeding can cause malnutrition our society. Exclusive breastfeeding defined by World Health Organization (WHO) as practice of feeding only breast milk (including expressed breast milk) and “allows the baby to receive vitamins, minerals or medicines and water, breast
milk substitutes, other liquids and solid foods are excluded” (WHO 2002). The Demographic and Health Survey (DHS) 2012–13 revealed that in Pakistan the rate of early initiation of breastfeeding was 54.7%, exclusive breastfeeding under 6 months 24.1%, child ever breastfed 98%, continued breast feeding at 1 year in 83%, continued breast feeding at 2 year in 56% and bottle feeding in 51.3%” (National Institute of Population Studies 2012). “Introducing bottle was the perception that breast milk quantity was insufficient” (Yaqob and Gul 2013). Prevalence rate of exclusive breastfeeding is declining day by day. As a result lack of breastfeeding affecting infant’s health for life. The long term impact of advantages of breastfeeding across the life course has its influence on childhood cognition and educational attainment.

Food insecurity is also creating threatening situation in Pakistan regarding nutrients provision. 88% respondents said yes to the statement that food insecurity as a cause of malnutrition. Only 22% units of given sample disagreed that food insecurity as a cause of malnutrition. Food security in Pakistan has been under constant threat during the last few years, a period coinciding with a global food crisis. Natural disasters like floods, famines, intense winter creating the situation of food insecurity which ultimately resulted as malnutrition in Pakistan. 88% students agreed that natural disasters create malnutrition while only 12% of sample size said NO. Natural disasters as well as man-made conflicts can hamper the nutritional status of population, mainly with the mediation of economic crisis. Flood disaster in Pakistan in the year 2010 was estimated to have caused a damage of US $10 billion (Tanweer, et al. 2015), evidently increasing the number of food insecure households in the aftermath of floods. Recently the drought condition in Tharparkar district of Sindh has led to several deaths” (The Express Tribune 2014).

Table. 2: Consequences of Malnutrition

<table>
<thead>
<tr>
<th>Responses</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consequences</td>
<td>Frequencies/ %</td>
<td>Frequencies/ %</td>
</tr>
<tr>
<td>Child Death</td>
<td>28 (70%)</td>
<td>12 (30%)</td>
</tr>
</tbody>
</table>

The given table shows consequences of maturation. There are so many consequences of malnutrition but this study focused only on two of them child death and infertility. Infant mortality rate is prevalent in developing countries. Present study highlighted that malnutrition is causing children death. 70% respondents said YES to the statement that malnutrition caused child death. “Rice’s research highlighted the fact that even children with mild to moderate malnutrition, rather than only those with more severe forms, had an increased risk of dying (Rice, et al. 2000).

Table shows 93% respondents indicated that fertility is affected by malnutrition. Nutrition has a profound effect on many aspects of human life, including the ability to successfully create it. Fertility is negatively affected by malnutrition and possibly by low body weight and low body fat stores. Fertility is affected by malnutrition. The articles collected emphasize that malnutrition does indeed negatively fucundability, fecundity, fertility, follicle function, conception rate, time between pregnancies (Alexander, et al. 1988).

CONCLUSION

Malnutrition is a global health problem. Malnutrition shares a vicious and continuous cycle with poverty, necessitating its realization as an escapable hurdle in national progress. Poor physical and cognitive status and increased economic burden of malnourished individuals constitute the major routes by which it contributes to national impediment. Malnutrition has been linked to increased mortality, morbidity and mental impairments. Malnutrition in early years can result in stunting, blindness, dwarfism, mental retardation, and neural tube defects—all severe handicaps in any society. Impaired performance of malnourished people subsequently constraints the economic development. The high stunting, wasting and underweight trends in children shows a probability that a large proportion of future Pakistani generation will not be able to reach its full potential, in the absence of effective interventions. This implies that they may not be able to serve back the state and become as
productive as they would have been if they were nutritionally healthy.

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World Health Organization

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