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Food and Nutrition in Emergencies and Crises

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Emergencies adversely affect all facets of human life, including health, education, the economy, society, politics, and the environment. They disrupt commercial activities such as farming, food supply chains, and logistics, and can even destroy food crops. Additionally, food may become contaminated and unsafe to eat. These adverse conditions caused by emergencies increase the risks of malnutrition, disease, and mortality (1).

Considering the food and nutrition needs during crises is critical for ensuring survival, preventing malnutrition, and supporting recovery among affected populations. Crises, whether they are natural disasters. conflicts, or economic collapses, often disrupt food systems, leading to shortages, poor dietary intake, and increased vulnerability. In times of crisis, the primary concern is to ensure access to sufficient, safe, and nutritious food. Food security can be affected due to supply chain disruptions, loss of livelihood, and destruction of agricultural infrastructure (2, 3).

Severe food shortages are a common feature of emergencies. These shortages often result in serious issues like protein-energy malnutrition and deficiencies in essential micronutrients, which greatly increase disease rates and death tolls. Disease and malnutrition interact in a significant feedback cycle that impacts food and nutrition security. Such conditions also delay or completely prevent economic and social recovery, while placing additional, heavy burdens on already limited resources (4, 5).

Neglecting to address the nutritional requirements of populations during emergencies undermines their capacity to recover and combat infectious diseases. It also hampers growth and development, especially in children and women, leading to higher rates of childhood malnutrition, diminished reproductive health, and unfavorable pregnancy outcomes (6). Malnutrition increases significantly in crises, especially among vulnerable groups such as children under five, pregnant and lactating women, and the elderly (2). Malnutrition in all its forms comes with substantial social and economic costs, including direct healthcare costs and lost productivity (7).

Ensuring sufficient community nutrition during disasters and emergencies is essential to avoid malnutrition, prevent disease outbreaks, and protect long-term health. Successful nutrition interventions during emergencies demand a holistic strategy that meets urgent nutritional requirements while also focusing on the community's long-term recovery and resilience (8). Food aid, cash transfers, and targeted nutrition interventions are commonly used strategies (3, 4).

Key principles in crisis nutrition programming are as follows: (1) Minimizing disruptions to local food systems; (2) prioritizing vulnerable populations; (3) broader integrating nutrition with interventions; (4) using culturally appropriate foods (9, 10).

Footnotes

Authors' Contribution: Z. M. is the only author of the article and the study was solely carried out by the author.

Conflict of Interests Statement: The author declares no conflict of interests.

Data Availability: The dataset presented in the study is available on request from the corresponding author

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