
MALNUTRITION IN REMOTE VANUATU: CYCLONE RESPONSE SURVEY

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VANUATU 2ND HEALTH RESEARCH SYMPOSIUM

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INTRODUCTION



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- Initial triage highlighted dehydration superimposed on chronic malnutrition
- Continued to support recovery efforts while also defining the extent of nutritional vulnerability

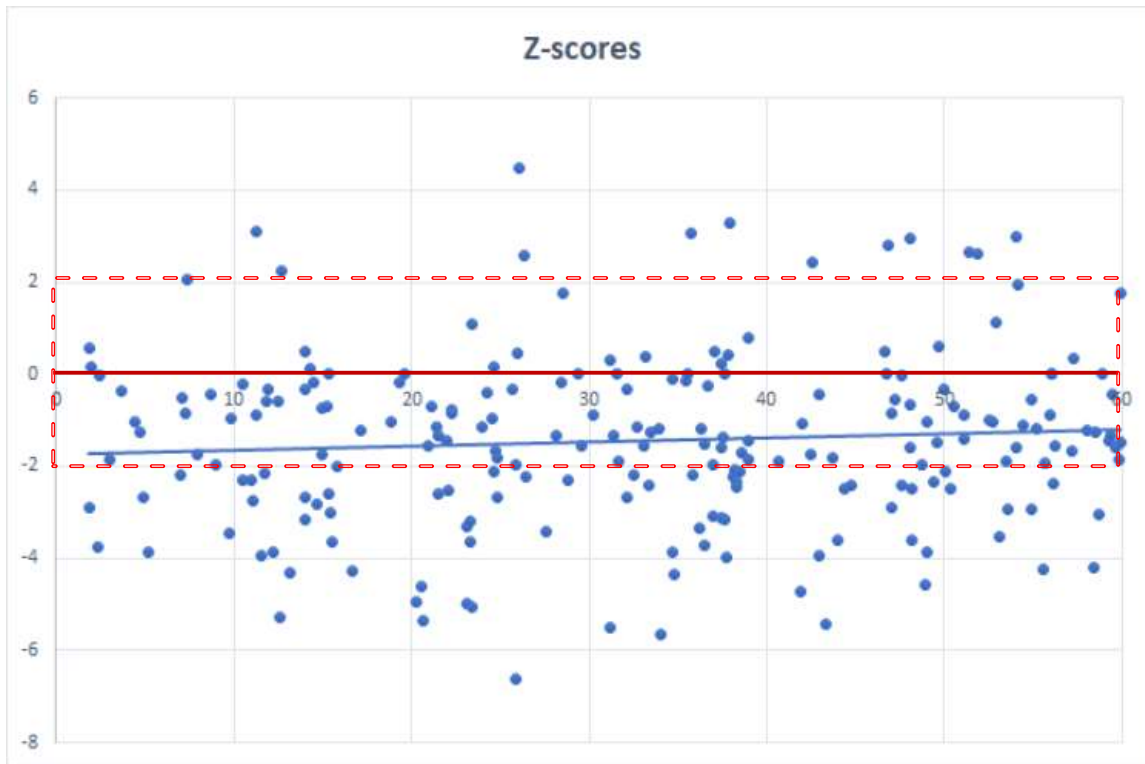


METHODS



- Invited all children under to come for review
- Difficulties with mid upper arm circumference and length/height measurements with high volume
- Focus on weight for age
- Low weight for age can indicate acute and chronic malnutrition

RESULTS

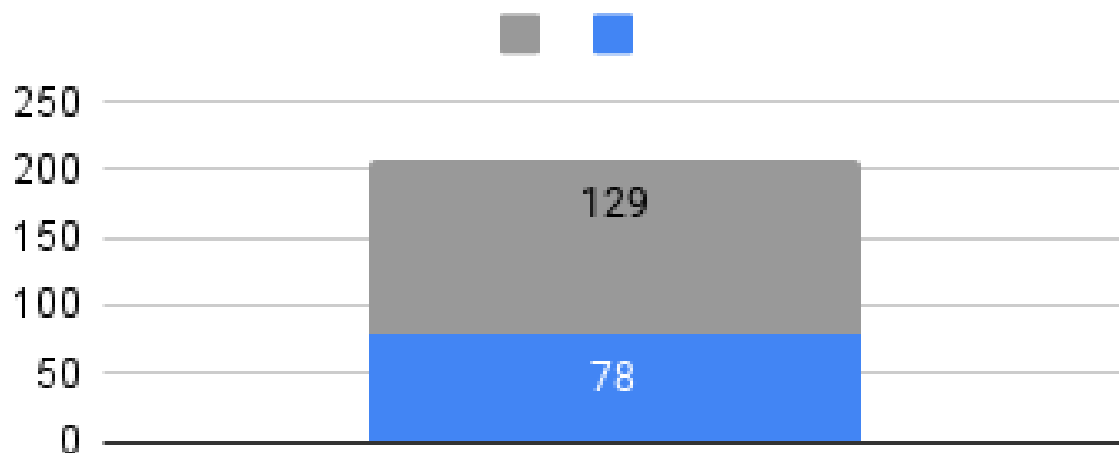


- 210 children 1-59 months were evaluated, even age distribution
- Compared against international growth standards (Z-score 2 to -2)
- Weighted Z-score is $-1.45 (\pm 0.25)$
- 43% of the children assessed children were underweight or severely underweight

RESULTS

- The 210 children assessed represents about 38% of the children between 1-59 months in North Ambrym.
- 78 underweight+ children were identified.
- Another 129 were likely not captured.

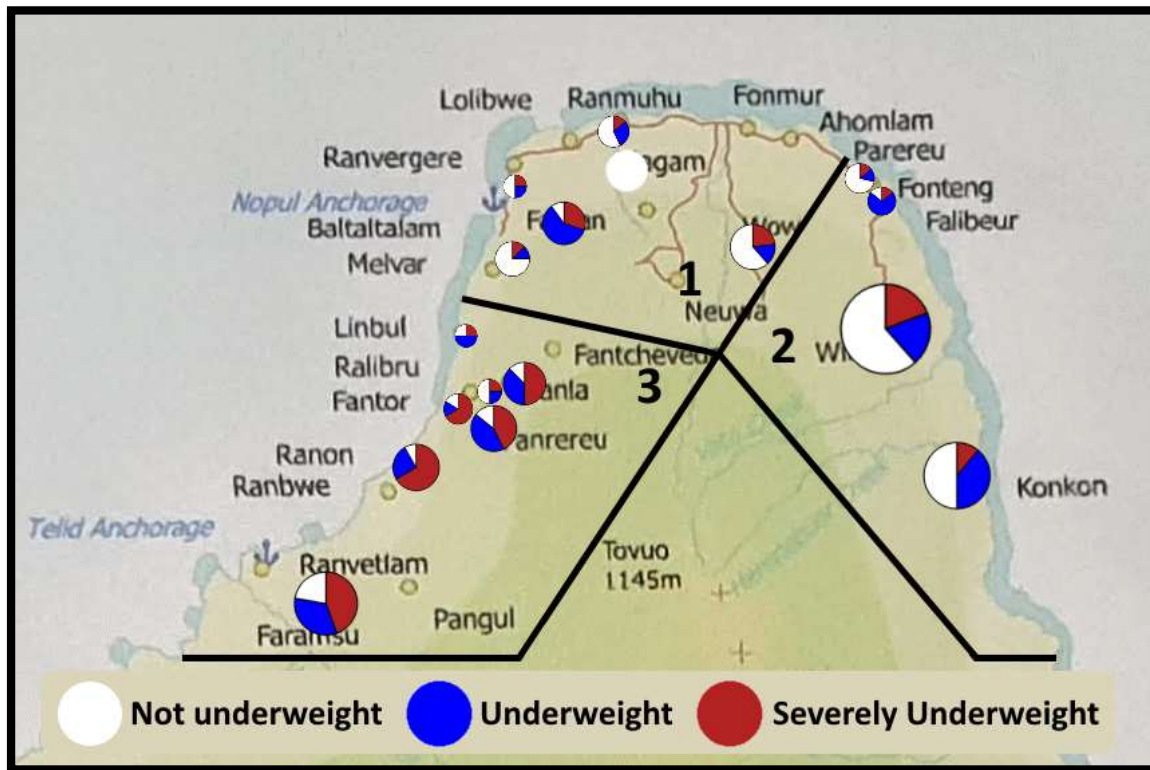
Total underweight



Total population of North Ambrym



RESULTS



- 1. Nebul – 29% total underweight
- 2. Wilit – 22% total underweight
- 3. Ranon – 53% total underweight

DISCUSSION

- Possible causes of malnutrition in rural Vanuatu
 - Access to healthcare (prematurity/CP, deworming, chronic infections & disease)
 - Agricultural obstacles (windward facing, soil, seeds, machinery)
 - Access to protein sources (animal husbandry, fishing, awareness)
 - Societal factors (inequalities, access, family dynamics, food & water practices)



DISCUSSION

■ Impacts of Malnutrition

- Stunting
- Decreased school performance
- Decreased economic stability
- Higher rates of NCDs
- Shortened life expectancy
- Increase demand on medical system
- Less able to contribute to community
- Requires greater resources



IMPLICATIONS / RECOMMENDATIONS

- Preventing, identifying and treating malnutrition provides massive individual and societal benefits.
- Identifying vulnerable pockets guides resource allocation.
- Collecting anthropometric data from all sources allows improves identification of high risk communities.
- Consider processes to efficiently target high-benefit communities
- Implement efficient data collection and analysis



IMPLICATIONS / RECOMMENDATIONS

- Examples of efficient data collection and analysis
 - Require anthropometric data submission (NGOs, HCWs)
 - Utilize all data sources and collection opportunities
 - Automate data analysis
 - Send feedback to local healthcare workers who can assess underlying causes
 - Give access to resources that reverse malnutrition when identified



CONCLUSIONS

- Identifying and addressing malnutrition matters
- Utilizing all available data sources can strengthen existing approaches



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