



## NSSA Newsbits

### CALL FOR ACTION TO ADDRESS MALNUTRITION IN ALL ITS FORMS

Good nutrition is an essential part of an individual's defence against disease. Malnutrition, in the forms of both over- and undernutrition, is closely related to an increased risk of illness and death, which has a considerable economic and societal impact. The coronavirus pandemic has emphasised the importance of food security and nutritional wellbeing for all South Africans and has exposed the vulnerability and weaknesses of our food systems. In view of this, we call on government to address malnutrition in all its forms.

The nutrition challenges facing South Africa are complex and underpinned by historical and current inequalities. Undernutrition co-exists with the rising incidence of overweight and obesity (frequently in the same household) and resultant non-communicable diseases (NCDs) such as type 2 diabetes mellitus and hypertension. The availability and affordability of highly processed foods are considered important drivers of poor nutrition.<sup>1</sup> On the other hand, dietary patterns characterised by higher intakes of unprocessed foods are linked to more positive health outcomes.<sup>2</sup>

In South Africa more than a quarter of the female adult population is overweight and more than a third obese, with the highest prevalence (42%) among urban women.<sup>3-6</sup> Moreover, it is estimated that 269 000 NCD related deaths occur in the country annually.<sup>7</sup> Obesity and NCDs are regarded as major risk factors for COVID-19 hospital admissions and complications.<sup>8</sup> While the prevalence of overweight among children is increasing (13% of children under the age of five years) and of concern, child undernutrition persists, with stunting rates of children under 5 years of age (an indicator for chronic undernutrition and lack of food) showing no reduction (27% stunted children < 5 years in 2016), mostly affecting poor and rural communities.<sup>6,9,10</sup> In this context it is concerning that South Africa has a lower ratio of nutrition

professionals per 100 000 people (5.4 professionals) than other African countries (8.4 professionals).<sup>11,12</sup>

The United Nations recognises the threat of the COVID-19 pandemic to food security and nutrition of millions of people and warns of a looming global food emergency unless immediate coordinated action is taken.<sup>13</sup> Nationally, efforts to contain the spread of COVID-19 have resulted in worsening of food shortages, nutrition deficits, and an interruption of social and other nutrition support services on which the most marginalised groups of our country rely.<sup>14</sup> The lockdown also poses challenges with regard to the accessibility and affordability of healthy food which has increased the chances of food secure households becoming food insecure.

While hunger has been reduced and food access in South Africa has improved over the past 15 years, 1.7 million households still experienced hunger in 2017, and the pace of addressing inadequate food access has been too slow to achieve the goal of zero hunger by 2030.<sup>15</sup> Early indications now suggest a rapid rise in hunger prevalence since the lockdown was imposed, with up to 24% of residents not having money to buy food.<sup>16</sup> In addition, in this context, food prices have increased by as much as 30% over the past two months, further adding to the financial strain on households.<sup>17</sup> It is anticipated that maternal and child mortality is likely to increase directly and indirectly as a result of the COVID-19 outbreak.<sup>18</sup>

Tackling malnutrition in all its forms requires political commitment and actions across multiple sectors that goes beyond the COVID-19 pandemic. We are therefore calling on government to:

- Prioritise nutrition on policy agendas related to health and social security, including a regulatory framework to support access to healthy and affordable foods.
- Provide strategic direction and ensure coordinated and aligned programming to address food and nutrition se-

curity, in collaboration with other sectors including civil society organisations.

- Coordinate an adequate and targeted food and social relief approach, prioritising the most vulnerable and needy for short term mitigation.
- Focus on delivery of preventive nutrition services as part of the transformation and strengthening of the health system, integrating nutrition into universal health coverage as an indispensable prerequisite for longer term mitigation.
- Prioritise the challenges faced by specific populations, including the elderly, women (especially women of childbearing age), children and those with pre-existing medical conditions (most notably HIV/AIDS, TB and NCDs).
- Implement well-funded coordinated strategies to actively address the main drivers of malnutrition; paying attention to food, nutrition and health, backed up by responsive social protection mechanisms.
- Improve access to quality nutrition care through investment in human resources to increase the number of qualified nutrition professionals as well as education opportunities for other cadres of workers that provide nutrition services in primary care settings.
- Promote nutrition education of the public through targeted nutrition messaging and communication campaigns.

### Contact details:

#### Nutrition Society South Africa President:

Prof. Corinna Walsh

nssa@mweb.co.za

www.nutritionssociety.co.za

#### Association for Dietetics in South Africa President:

Dr Christine Taljaard-Krugell  
adsapresident01@gmail.com  
www.adsa.org.za

#### Dietetics-Nutrition is a Profession President:

Mr Tshilidzi Nageli  
diporg.sa@gmail.com  
nagelit@khadela.co.za

### References:

1. Popkin BM, Adair LS, Ng SW. Now and then: The global nutrition transition: The pandemic of obesity in developing countries. *Nutr Rev.* 2012 Jan;70(1):3-21.
2. Wrottesley SV, Pisa PT, Norris SA. The influence of maternal dietary patterns on body mass index and gestational weight gain in urban black South African women. *Nutrients.* 2017 Jul;9(7):e732.
3. Cois A, Day C. Obesity trends and risk factors in the South African adult population. *BMC Obes.* 2015;2(1):1-10.
4. Shisana O, Labadarios D, Rehle T, et al. The South African National Health and Nutrition Examination Survey, 2012 (SANHANES-1). Cape Town; 2014.
5. World Health Organization. Global status report on noncommunicable diseases 2014. Vol. 53. Geneva: World Health Organization; 2014.
6. South African National Department of Health. South Africa Demographic Health Survey 2016. Pretoria: Department of Health, South Africa; Statistics South Africa; South African Medical Research Council; 2019.
7. Statistics South Africa. Mid-year population estimates 2018. 2019.
8. Kassir R. Risk of COVID-19 for patients with obesity. *Obes Rev.* 2020;21:313034.
9. Said-Mohamed R, Micklesfield LK, Pettifor JM, Norris SA. Has the prevalence of stunting in South African children changed in 40 years? A systematic review. *BMC Public Health.* 2015;15(1):1-10.
10. Shung-King M, Lake L, Sanders D, Hendricks M. Child and adolescent health Leave no one behind. 2019.
11. World Health Organization. Nutrition Landscape Information System [Internet]. Available from: <https://apps.who.int/nutrition/landscape/report.aspx?iso=ZAF&rid=1620&goButton=Go>.
12. World Health Organization. Global nutrition policy review 2016-2017 - country progress in creating enabling policy environments. Geneva; 2018.
13. United Nations. Policy Brief: The Impact of COVID-19 on Food Security and Nutrition, June 2020. United Nations; 2020.
14. Vermeulen H, Muller C, Schonfeldt HC. Food aid parcels in South Africa could do with a better nutritional balance [Internet]. *The Conversation.* 2020. Available from: <https://theconversation.com/food-aid-parcels-in-south-africa-could-do-with-a-better-nutritional-balance-136417>.
15. Statistics South Africa. Towards measuring the extent of food security in South Africa. Pretoria: Statistics South Africa; 2019.
16. Engaging communities regarding their knowledge, beliefs, practices and attitudes in response to the COVID-19 outbreak in South Africa. 2020.
17. Abrahams M, Smith J. Covid-19: Families living on low incomes may be spending 30% more on food than they did two months ago. Pietermaritzburg; 2020.
18. Robertson T, Carter ED, Chou VB, et al. Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: a modelling study. *Lancet Glob Heal.* 2020 May;e30229.

## Obituary

Professor H.H. (Esté) Vorster was Director of the Centre of Excellence for Nutrition in the Faculty of Health Sciences of the North-West University (NWU), Potchefstroom, South Africa. She obtained a DSc. in Physiology from NWU (previously Potchefstroom University for Christian Higher Education) in 1989 with a thesis titled, "The effects of dietary fibre on lipid and haemostatic risk factors of noncommunicable diseases".

Professor Vorster started nutrition research at NWU in the 1980s. She conceptualised nutrition as a multidisciplinary domain, from molecules to society, and pioneered research and infrastructure development to address malnutrition

problems in Africa on basic (molecular and genetic), clinical, and epidemiological levels. She was internationally recognised for her work on the role of dietary fibre in health, the relationship between diet and blood coagulation, and her contribution to understanding the nutrition transition and its determinants and consequences in Africa.

A dedicated capacity builder and initiator of research, Professor Vorster supervised many PhD and MSc students and published widely, including more than 300 research papers in peer-reviewed scientific journals, books, chapters in books, editorials and research reports.



She received many awards recognising her value-driven contribution as a thought leader and transdisciplinary thinker. These included a B1-rating from the National Research Foundation, the Nutrition Society of South Africa's (NSSA) award for 'Outstanding Contributions to Nutrition Research', the prestigious Havenga Medalje vir Geneeskunde for scientific outputs in Medical Sciences, and the African Nutrition Society Nevin Scrimshaw award for 'Vision and leadership in nutrition training and service to international nutrition'. She was a Fellow of the International Union of Nutritional Sciences (IUNS), elected for rendering outstanding service to the cause of nutrition.

She also served as consultant and scientific advisor to the South African National Department of Health, as well as to international agencies, such as the WHO, FAO, CODEX Alimentarius and UNICEF. She made an important contribution as a member of the WHO/FAO Working Group on Carbohydrates and Energy Requirements. She initiated the Food-Based Dietary Guideline (FBDG) process that resulted in the acceptance of these guidelines as the official standard of the South African Department of Health.

As with so many other things that Esté became involved in, she became totally involved and became the face of nutrition and to a lesser extent dietetics in South Africa, especially during the exciting times following the release of Nelson Mandela. Between 1992 and 2006, she had a long tenure on the Council of the Nutrition Society of South Africa (NSSA), holding positions as President and Chair and served for a prolonged period as a member of the National Committee for the International Union of Nutritional Sciences (IUNS). One of her strengths was her ability to pull people together, thus she involved the Nutrition Society with food scientists in South

Africa and with relevant government departments. During her involvement in the NSSA Council, she was also president of the South African branch of the International Life Sciences Institute, as she believed strongly that as nutritional scientists one could achieve little without working with and involving the food industry. One of Esté's goals while on the Council of the Nutrition Society was to draw South African nutritionists into the broader African community of nutritionists. Perhaps one of her most stellar performances was as chair of the local organising committee (LOC) for the 2005 International Nutrition Congress held in South Africa, during which funding was made available to support nutritionists from other African countries to attend.

Esté Vorster can be considered the doyenne of nutrition in South Africa! In addition to the long period of service to nutrition and nutrition science, Esté played a critical role in the successful bid (in Vienna in 2001) to host the first IUNS congress on the African continent. This was followed by the exemplary hosting of the congress in Durban in 2005, with her at the helm. Contrary to expectations, the congress made a substantial profit – the most of all IUNS congresses before 2005, which was not a mean feat by any means. The LOC met often at her home, where they were treated as family members, getting to know her family as well. She established a Section 21 company, Nutrition Safari 2005 (later the name changed to a Not for Profit Company [NPC]) with the board representing the four main organisations in the SA National Committee for IUNS, i.e. NSSA, ADSA, SASPEN, and the MRC. Esté was its first chairperson and under her guidance, a bursary trust for undergraduate nutrition and dietetics students was established. See SAJCN at <http://www.sajcn.co.za/index.php/SAJCN/article/view/452>; the Nutrition Safari 2005 NPC is still active. Despite her friendly demeanour, Esté did not tolerate fools; she had what one can describe as a 'stoute' (naughty/mischievous) glint or twinkle in her eyes! She was challenging and critical but always fair – her legacy lives on in the students she taught and supervised and the colleagues that she influenced over many years.

Esté Vorster will be remembered as joyful, energetic and kind. Sadly, she will also be remembered for her bravery in her battle with cancer. She was admired for her exceptional social skills and always had time to exchange a friendly word in English, Afrikaans or isiZulu with everyone who crossed her path. She dealt with all people with respect, gentleness and tact. Her love for her children and grandchildren was admirable. We honour our South African nutrition champion, Esté Vorster.

John Pettifor  
Ali Dhansay  
Marius Smuts