Tsunami and the Challenge for Nutrition Security

Some natural catastrophes exceed our ability to imagine what can happen to mankind in certain areas of the world. So did the tsunami which occurred on December 26, 2004. People in the area lost their lives, their loved family members, their belongings including homes, fields and tools for their everyday work. In industrialized countries people were appalled and gave money in yet unknown amounts.

The tsunami destroyed towns and villages, industry and beaches, large inhabited and agricultural areas; beyond the immediate damage by the flood, the salt from the seawater will probably make the fields and gardens unfertile for years if the further devastating heavy rains in Sri Lanka do not wash out the salt earlier than expected. Humanitarian aid immediately had to address the nutrition security aspects in the wide sense of provision of food, enabling people to care for the disabled, children and elderly, and providing access to clean drinking water, sanitation and health services.

The great multinational and bilateral organizations of the industrialized countries are well prepared for the emergency relief operation in the affected areas: provision of drinking water, food aid, medical care are the common priorities. Hopefully, they will operate with all their professionalism and dedication to the victims of the great flood.

We have learned in recent years that emergency relief needs to promote developmental aspects as soon as possible besides pure charity. Until the sudden catastrophe, the survivors had been able to make a living. Most of

them have their qualifications and just need assistance to strengthen their self-help capacity. In some areas, only military equipment enables humanitarian aid to be delivered. And this aid appears as the most attractive military activity in the 21st century.

On the other hand, it is the United Nations who have the global political mandate to support refugees and displaced people in the medium and long run. It is to be hoped that the crisis management is shared by all forces involved rather than being driven by competition about future spheres of influence in the affected countries.

What has all this to do with nutrition? This great catastrophe requires all available scientific knowledge and practical experience to limit the subsequent nutrition security crisis. Food aid is an immediate solution. But food aid will become a threat if it suppresses the reemerging local food production and trade. In a couple of months, the transition from emergency relief to stimulation of self-help and food autonomy will become a major challenge. Can a division into ‘winners’ and ‘losers’ of the catastrophe be avoided?

Quite a number of agencies depend on emergency relief operations. However, their organization’s own interests must stay behind the priorities of the survivors and their public and societal organizations. The second phase of the post-catastrophe period will be a political and economic challenge. If the humanitarian and developmental efforts can contribute to achieve the Millennium Development Goals set by the national governments in the United Nations Millennium Summit in 2000, this would

be a most appropriate side effect. Sustainable freedom from hunger was one essential goal for the countries in South and South East Asia even before the great catastrophe. May the relief operations be able to focus on this goal again quickly, beyond the immediate assistance for survival.

Being nutritionists, we can help to steer and monitor food aid in order to provide adequate rations and to avoid nutrient deficiencies which easily occur when large populations need to be fed with little chance to provide them with fresh fruits and vegetables. And we can advise to plan for the future nutrition security in the flood-affected areas and countries where such advice is requested. The concept of nutrition security comprises three major areas:

first, sustainable food security and food safety, second, care for the dependent children, diseased and elderly, and third, access to clean drinking water, sanitation, hygienically prepared food, and primary health care.

After the dead have been buried and the survivors can plan for their future, the overall aim of the aid must definitely be the self-reliance and food sovereignty of the populations and their governments.

With all respect to the dimensions of human suffering caused by the tsunami, we must not forget about the millions suffering from hunger worldwide (852 million in 2004).

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