

Addressing the Causes and Aetiology of Inanition in Vulnerable Populations

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DESCRIPTION

Inanition, defined as extreme weakness or exhaustion due to lack of nourishment, is a critical issue affecting vulnerable populations worldwide. The aetiology of inanition in vulnerable populations is complex and multifactorial, influenced by a combination of individual, societal, and structural factors. Vulnerable populations encompass a diverse group of individuals who face heightened risks of adverse health outcomes due to various socio-economic, environmental, and health-related factors. This includes but is not limited to, children, elderly individuals and individuals experiencing homelessness, refugees, and those living in poverty.

Causes of inanition

Several interconnected factors contribute to the development of inanition in vulnerable populations, each exacerbating the other and creating a vicious cycle of malnutrition and poor health outcomes.

Poverty and food insecurity: One of the primary drivers of inanition is poverty and lack of access to an adequate food supply. Vulnerable populations, such as low-income families and individuals experiencing homelessness, often struggle to afford nutritious food. Food insecurity, characterized by uncertain or inadequate access to food, further compounds the problem, leading to chronic malnutrition and inanition.

Lack of access to healthcare: Limited access to healthcare services, including preventative care and treatment for underlying health conditions, contributes to the development and exacerbation of inanition. Vulnerable populations may face barriers such as financial constraints, lack of transportation, and geographical isolation, preventing them from seeking timely medical attention and nutritional support.

Environmental factors: Environmental factors, including natural disasters, climate change, and environmental degradation, can disrupt food production and distribution systems, exacerbating food insecurity and malnutrition in vulnerable populations. Extreme weather events, such as

droughts and floods, can destroy crops, disrupt supply chains, and lead to food shortages, further perpetuating inanition.

Underlying health conditions: Chronic medical conditions, such as HIV/AIDS, tuberculosis, and malnutrition-related disorders, increase the risk of inanition by compromising immune function, impairing nutrient absorption, and exacerbating metabolic demands. Individuals with underlying health conditions may require specialized nutritional support to prevent or manage inanition effectively.

Psychosocial factors: Psychosocial factors, including mental illness, substance abuse, trauma, and stress, play a significant role in the development of inanition. Mental health disorders, such as depression and anxiety, can affect appetite, eating habits, and motivation to seek out nutritious food, leading to malnutrition and inanition. Substance abuse further compounds the problem by disrupting nutritional intake and absorption.

Cultural and dietary practices: Cultural and dietary practices influence nutritional intake and dietary patterns, contributing to variations in the prevalence of inanition among different population groups. Traditional diets may lack essential nutrients or be insufficient in quantity, particularly in communities where access to nutritious foods is limited. Cultural beliefs and taboos surrounding food may also impact dietary choices and contribute to malnutrition and inanition.

Structural inequities: Structural inequities, including systemic racism, discrimination, and social injustice, perpetuate disparities in access to resources, opportunities, and social determinants of health. These structural factors contribute to the disproportionate burden of inanition borne by marginalized communities, exacerbating health inequities and perpetuating cycles of poverty and malnutrition.

CONCLUSION

Inanition is a complex and multifaceted issue affecting vulnerable populations worldwide, driven by a combination of socio-economic, environmental, and health-related factors. Addressing the root causes and aetiology of inanition requires a

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comprehensive approach that addresses systemic inequalities, promotes food security, and ensures equitable access to healthcare and social support services. By addressing the underlying determinants of inanition and promoting comprehensive approaches

approaches to nutrition and well-being, we can work towards reducing the prevalence of inanition and improving the health outcomes of vulnerable populations globally.