

# The difference between famine and food insecurity essays example

[Law](#), [Security](#)



## **Istitution**

### Introduction

The purpose of this treatise is to analyze the difference between famine and food insecurity. It is apparent that they both pertain to one of the principal necessities of life: food. In order to define food insecurity it is necessary to initially define food security. Scholars and researches have defined food security as access by all individuals during all periods of time to a sufficient quantity of food for an active healthy life. In contrast food insecurity signifies inaccessibility to an adequate amount of food.

A famine is usually defined as a severe shortage of food that in many instances is conducive to starvation and possibly death.

## **Famine**

As a perception famine is termed diversely by writers from numerous subject areas, with each replicating their own experience and/ or theoretical interests (Saad, 2013: 37). Famine as ‘ natural disaster’ was defined by Mayer (1975: 572) as ‘ a severe shortage of food accompanied by a significant increase in local or regional death rate. There are certain flaws in this definition; it does not present measureable guides for the causes or penalties of famine, in terms of poverty levels or number of demises (Saad, 2013: 37). Mayer does not include the harshness or the importance of fundamental origins such as the natural political and socio-economic aspects. In analysis he does not dissertate upon to what degree famine is generated by peripheral elements such as exorbitant food prices joined with limited purchasing power at national and household levels, political volatility

or struggle, both external and internal ( Saad, 2013: 37).

Sen (1981: 40) defines famine as ' a particular virulent manifestation of starvation causing widespread death.' He concurs that individuals begin to starve instantaneously subsequently following the downfall of all their interchange prerogatives to food. Kumar (1990: 73) replicates Sen's definition and defined famine as ' virulent manifestations of intense starvation causing substantial loss of life. According to these scholars famine is an occurrence and a collapse of ' natural' capabilities and functions which are conducive to death (Howe and Devereux, 2007).

The researchers have suggested that the manner in which families react to a dearth of food diverge contingent on their source of revenue managing tactic. It has been asserted by some scholars that a relatively large number of bucolic famines follow two or three harvest failures. Some families survive for months or even years by making numerous sacrifices, such as consuming less food and using borrowed grain. In some cases they feel compelled to discontinue their children's' education, sell their small animals and even travel to find job opportunities. Some individuals are willing to take risk of borrowing money or taking a grain loan from merchants or money lenders (pledging their farm land) and unfortunately when they are incapable of fulfilling their obligation they begin to move from their homes and land in search of anything that is edible (Watts, 1983; Frankenberger, 1985).

The period following a famine is conducive to numerous calamities: changes in the nutrition status of individuals, loss of body weight, and increases in the incidence of fatal diseases including mental disorientation; excess deaths in

a region or in a country as a whole; increases in interregional migration by famine victims, leading to the uprooting and separation of families, and breakdown of social bonds (out-migration, destitution): transfer of assets; and increase in crime (Alangir, 1980: 5-6).

In describing famines there are numerous diversities and exceptions. In some shocking instances famines have occurred in circumstances where there was no dearth of food. During the Wollo famine of 1973, there was a modest increase in national agricultural output recorded by the National Bank of Ethiopia' (Sen , 1981: 92). In the Antanarivo famine between 1985 and 1987 in Madagascar, overall food accessibility did not appear to be a major problem, since production per capita was somewhat better than both the preceding and following years (Garenne, 2007: 178-80). In some cases numerous deaths were caused by disease, not starvation. Preventable infectious diseases such as measles, diarrhea, typhoid and diphtheria have been reported from famine related disasters, for example in the Great Irish famine of 1845-50, and in Ethiopia and Somalia (Devereux, 1993; 2001: 119). There were some famines that were not conducive to numerous deaths. The victims of famines in Tanzania and Sudan discussed the ' famine that kills' ( Illiffe, 1979; De Waal, 1989), as distinct from the famines that cause hunger and destitution but do not result in death.

Some scholars contend that there is a link between socioeconomic status and a rate of mortalities during famine. In contrast De Waal(1989) did not establish any association , in Sudanese refugee camps in1985 between individual affluence and the probability of death. He discovered that the more affluent individuals who could afford to purchase a substantial amount

of food but were moved to refugee camps by drought suffered the same probability as the indigent of contracting a communicable disease through augmented exposure and dying This scholar also noted that proof from the Great Irish famine proposes that social worker and priests died from disease not malnourishment.

The Integrated Food Security Phase Classification Reference Table maintains that a fame occurs when the first three of the following situations occur ( FAO, 2012):

- 20 percent of population has fewer than 2, 100 kilocalories of food a day
- 30 percent of children are acutely malnourished
- Two deaths per 10, 000 people, or four deaths per 10, 000 children per day
- Pandemic illness
- Access to less than four liters of water per day
- Large-scale displacement
- Civil strife
- Complete loss of assets and source of income

This definition is probably the most detailed since it depicts the famines that have occurred on a more global scale. Most scholars agree that a famine occurs over a period of time; initially there is a decline in food security.

It has been advocated that the vast majority of definitions of famine present significant perceptions of famine-impacted inhabitants and offer the theoretical foundation for the development of an influential definition, but their inaccuracy and contradictory hypothetical standpoints restrict their effectiveness for practical purposes (Devereux, 2007). Sen (1981: 40) is concedes that most definitions of famine simply offer a ' pithy description' of

what occurs during famines, rather than ' helping us to do the diagnosis-the traditional function of a definition. It is essential that the scholars develop an approved definition which will support leaders and contributors in their attempts to precisely analysis a famine.

## **Food Insecurity**

Food insecurity is the lack of access to enough food; it can be chronic, and/or transitory and cyclical (World Bank, 1985: 1). Chronic food insecurity is an endlessly insufficient diet caused by the incapability to acquire food. It has a direct impact on households that do not have the capacity either to purchase a sufficient amount of food or to harvest their own. Poverty is considered the primary cause of chronic food insecurity (World Bank 1985: 1).

Transitory food insecurity is defined as a temporary decline in a households' access to enough food (World Bank, 1985: 1). It is generally a provisional deterioration in food ingestion below adequate levels. The scholars contend that this problem is a consequence of : instability in world food prices ( which to some degree effect domestic prices), volatility in food production and a dearth of food reserves and/or an incapability to import food due to fragile foreign exchange or a reduction in household income. Saad (2013) maintains that there can other aspects such as civil and political turbulence and wars. When transitory food insecurity reaches a crisis level a famine occurs.

The research suggests transitory food insecurity can be segmented into temporary food insecurity and cyclical insecurity. It has been maintained by some scholars that temporary food insecurity occurs for a restricted time period as result of unanticipated and erratic conditions. Cyclical or more

commonly termed seasonal food insecurity is a regular reappearance of insufficient access to food during the paucity season (Saad, 2013).

As many as 85.5 percent of U. S. households were food secure throughout the entire year in 2012 (Coleman-Jensen et al., 2012). The statistics indicate that as many as 14.5 percent (17.6 million households) were food insecure at some period of time during the year. This indicates that they were unable to obtain a sufficient amount of food for one or more household members because they lacked adequate funds and other resources. Most of the food-insecure families evaded acute decreases in food intake in many instances by depending on just a few basic foods and reducing diversity in their diet according to the researchers. It was revealed that 5.7 percent (7.0 million households) had exceedingly low food security- which suggests that they were food insecure to the degree that eating patterns of one or more family members were disordered and their food intake reduced at least some time during the year because they did not have enough money to purchase food (Coleman-Jensen et al., 2012).

Among U. S. households with children under age 18, 80.0 percent were food secure in 2012 (Coleman-Jensen et al., 2012). These researchers found that both children and adults were food insecure in 10.0 percent of households with children (3.9 million households), and in about 1.2 percent (463,000 households), one or more child was subject to reduced food intake and disordered eating patterns at some period during the year. In some households with very low food security among children, only older children may have experienced the more austere effects of food insecurity while younger children were sheltered from those

effects (Coleman-Jensen et al., 2013).

The investigators maintained that the prevalence of food insecurity was basically unchanged from 2011 to 2012. The change from 2011 was within the range that could have stemmed from sampling variation. They also concurred that over the previous decade, food insecurity had increased from 10.5 percent in 2000 to nearly 12 percent in 2004, but declined to 11 percent in 2005-07, then increased from about 3 percent in 2000 to nearly 12 percent in 2004, declined to 11 percent in 2005-07, then increased to its current level in 2008 (14.6 percent) and remained fundamentally unchanged at that level in 2009 and 2010.

The findings of the research studies indicate that the prevalence of food security diverged among households with different demographic and economic characteristics. It was found that 40.9 percent of households with incomes below the official poverty line were food insecure, compared with 6.8 percent of those with incomes above 18.5 percent of the poverty line (Coleman-Jensen et al., 2013).

It was also maintained that low food security was more prevalent among the following groups than the national average (Coleman-Jensen et al., 2013):

- Households with children headed by a single woman (12.7 percent)
- Women living alone (7.5 percent) and men living alone (7.3 percent)
- Black, non-Hispanic households (10.4 percent) and Hispanic households (7.4 percent)
- Households with incomes below 18.5 percent of the poverty line (14.5 percent)
- Households located in principal cities of metropolitan areas (6.7 percent).



## **It is very significant that policymakers are cognizant of food security status of its population.**

### The Differences between Famine and FoodSecurity

In this treatise it has been indicated that food insecurity is primarily the inability to buy or produce food. Famine seems to signify a catastrophe of starvation linked with severe food shortages, acute hunger and a disproportionate number of deaths. After reading and analyzing the definition of famine presented by other scholars Saad (2013: 41) suggested: Famine is a political and socio-economic process triggered by a multiplicity of complex factors which cause a rapid deterioration in the nutritional status of individuals leading to hunger, social breakdown and destitution of the most vulnerable, marginal and least powerful groups in a community, to a point where they can no longer, as a group, maintain a sustainable livelihood.

Ultimately, the political decision for public action is the most important factor in preventing vulnerability to famine in the first place, and in alleviating the suffering of famine victims when it happens.

A famine appears to be a more intense and more prolonged than food insecurity. Robert Klineberg (1977) maintains that famine is an occurrence that unsettles the administration of a community to such a degree that it cannot survive without some form of outside assistance. Many researchers have asserted that a famine does not occur unpredictably; therefore it can be prevented. If a food shortage progresses to a scale of a famine, it must be the flaws of society in general and the government in particular; thus famine is a man-made disaster ( Ayalew, 1988). Since famine is more intense than

food insecurity some policymakers and researchers have examined methods to ameliorate responses to famine in terms of time and costs. Howe and Devereux (2007: 31-45) made a very significant contribution to the literature of famine and to the prevention of future famines. They proposed an 'instrumental definition' based on two complimentary scales. The 'intensity scale' monitors the severity of famine conditions by combining outcome indicators (anthropometry and mortality rates) and food security descriptors (food prices and the adoption of coping strategies). The agreed thresholds for key indicators will identify when conditions have deteriorated from 'food security to 'food insecurity,' to 'food crisis' and ultimately to 'famine.'

'Intensity refers to 'the severity of a crisis at a point in time, which varies from place to place over its duration,' while 'magnitude' refers to the aggregate impact of the crisis on affected populations' (Howe and Devereaux, 2007: 36-43). These scholars indicate that the proposed scales are diagnostic instruments designed to analyze the condition in a precise location with prolonged food insecurity conditions and inordinate susceptibility to famine.

It has been indicated earlier in this study that food insecurity is primarily lack of access to food. The scholars asserted that poverty is the main cause of food insecurity. Famines are caused by numerous problems. The historical famines which include Maharashtra were caused by harvest shortfalls that were result of economic backwardness (O'Grada, 2011). However, the totalitarianism of Stalin, Mao and similar leaders were held responsible for the famines in China Soviet Union and other countries in the twentieth century (Ellman, 2000).

The researchers main that an analysis of the famine in China before and after 1949 reveals the lack of economic progress that was conducive to harvest short-falls. Thaxton ( 2008: 26) presented an account of an earlier famine that in Henan caused principally by natural issues. He contended that in the spring of 1920, a severe drought developed in the lower part of the North China Plain, settling over northern Henan, western Shandong, and southern Hebei provinces. The drought protracted into the spring of 1921, This lead to the death of several million farmers in what was described as the North China Famine of 1921. He asserts that not all earlier famines were caused by overpopulation but the lack of proper by human agencies cannot be ignored. In many instances they are caused by war; the high mortality rate was linked with the ineffectiveness of human agencies as in Ireland in 1840s and India in the 1870s.

Famines seem to cause a higher mortality rate than food insecurity. It has been asserted that the immediate cause of most famine deaths was infectious diseases rather than literal starvation (O Grada, 2011).

Nevertheless they were in April-May 1943, in the western Netherlands in 1944-45 (O Grada 2011). He specifies that during those famines the main causes of death moved from typhus, typhoid fever, relapsing fever, dysentery and malaria to hunger edema, muscular and alimentary dystrophy and pneumonia. This change was the result of ameliorated public health and more effective medical knowledge and technology. It has been discovered that at the beginning of the Leningrad blockade in 1941, the Germans feared that their soldiers would be tainted by epidemics if the city was occupied (Jones, 2008: 41). The

literature concedes that the spring thaw in 1942 presented a severe epidemiological risk to Leningraders, but the public health regime was equal to the threat. By mid-March ' over 100, 000 wobbling residents, primarily women were doing numerous hours of street cleaning daily and the number continued to increase (Jones, 2008: 244). However, the problems were managed differently in Bengal in 1943-44 , or in Ethiopia in the 1970s and 1980s according to the researchers. Most of the researchers contend that even in the impoverished countries today, medical expertise and support can accomplish more during famines than in the past.

During the Chinese famine of 1959-61, the famine specialists assert that famine deaths were of the usual type and infectious diseases such as cholera and typhus were endemic. These specialists also indicate that most recollections of the cause of death in 1959-61 suggest death by starvation in lieu of disease.

The markets are another cause of famines. Earlier in this treatise Sen (1981) placed less emphasis on food availability per capita than on the impact of the market malfunction on what he called exchange entitlements or the purchasing power of those who purchased rather than produced food. He presented several situations where famine eventuated despite no abnormal reduction in food output. Sen (1981) indicated that these famines included winners and losers; the winners were those with access to land and credit. His theory seemed to adhere to the populist persuasion throughout history those speculators, hoarders and profiteers were responsible for transforming food shortages into famines. Some scholars disagreed with Sen; they asserted that some markets moved food from where it was low-priced to where it

was expensive. In contrast others maintain that markets did not intensify famine. There is no definitive conclusion pertaining to this issue. There are other scholars who contend that in nineteenth century Ireland and India, the problem was that the markets operated too slowly; in both instances the dearth of food motivated some merchants to import more and export less food.

A famine is apparently more complex than food insecurity; there are numerous causes and variables associated with this issue. The literature seems to imply that climate change may also increase vulnerability to drought and famine. In many instances the government responds too slowly and a devastating famine occurs.

In reading the history it is obvious that wars have provoked famine.

However, it is believed by some scholars that famine is a serious threat only in areas endangered by war or self-imposed political states. This claim finds validation in an annual list of countries requiring external food assistance compiled by the FAO, which provides the primary reasons why aid is essential (O Grada, 2011). The FAO divides countries at risk into three categories: those facing exceptional shortfalls in aggregate production/supplies; those suffering 'widespread lack of access,' and those faced by 'severe localized food insecurity' (O Grada, 2011). It also includes reasons associated with human institutions in lieu of adverse weather or poor crops. O Grada (2011) indicates that in many cases the reasons for food insecurity leading to famines were civil conflict, poor governance, or the liability placed by HIV/AIDS. He asserts that one of the flaws of the table is absence of a time frame for the 'main reasons given, nevertheless the

broader fact still holds.

Food insecurity is not a major political like a famine but it does lead to problems. It has a less devastating impact and it usually affects a smaller number of individuals. However, at the national level, food insecurity may be related to decreased productivity and social interaction, and an increase in economic inequality (Hamelin et al., 1999). At the individual level, food insecurity has been associated with symptoms of depression and anxiety, multimorbidity, lower levels of self-reported health status, a greater risk of lower nutrient diets, and a likelihood of reporting social isolation, long standing health problems and activity limitations (Rose and Olivera, 1997). Other studies have suggested that food insecure individuals are more likely to develop heart disease, diabetes or high blood pressure. As a result of these studies it was decided that an analysis of food security was needed in Australia. This study will measure the severity of food insecurity; uncover the characteristics of individuals which explain probabilities of being food secure, moderately food insecure or severely food insecure; and to provide both statistical and criterion-related validation for the measure used ( Temple, 2008).

Various scales and tables are used to determine whether the household is food insecure due to financial restrictions (Temple, 2008). From the questions, scores are checked to categorize the households as (1) hungry (2) at risk for hunger, (3) not hungry. Some scales were used to assess household food insecurity, women's food insecurity and hunger and food insecurity among children (Temple, 2008).

The scholars seem to assert that food insecurity progresses from uncertainty

and anxiety about food at the household level to the condition of hunger among children when they do not have enough to eat. Other forms of measurement were used to assess food secure, food insecure without hunger, food insecure with hunger and food insecure with severe hunger. Data for this study are from the 2004/05 ABS National Health Survey (NHS). The 2004/05 NHS was conducted by the Australian Bureau of Statistics between August 2004 and July 2005, on a stratified multi-stage area sample of dwellings (Temple, 2011). Within each household, a random sub sample of individuals were drawn consisting of one adult (18 years and over) and one child (aged 17 years and under). The investigator of this study indicated that trained ABS interviewers conducted personal interviews with the respondents, recording information using a computer assisted interview instrument. Individuals living in non-private dwellings such as hotels, hospitals, nursing and convalescent homes were excluded.

The findings of this study indicated that approximately 5.1% of Australians had experienced food insecurity during the previous 12 months. Of this figure, approximately 40% are considered to be 'severely insecure,' that is they ran out of money and couldn't afford to purchase any food, and as a result went without food. This group of individuals according to the investigator is considered to be 'moderately food insecure, which signifies that they ran out of money for food, but did not go without a meal. This group of individuals was considered to have financial difficulty acquiring food.

Food insecurity is assessed on an individual group basis; in contrast famine pertains a large population such as an entire country. In most instances food

is more available if one has enough money to purchase it a food insecure situation. In most famines the food is not accessible; various catastrophic conditions contribute to this problem. Individuals have more control of their lives during a food insecurity case. In most famines the people cannot survive without outside assistance. It was indicated earlier that the mortality rate among famine victims is much higher.

## References

Alamgir M (1980) *Famine in South Asia: Political Economy of Mass Starvation*. Cambridge : Oelgeschlager, Gunn and Hain.

Ayalew M (1988) *Famine early warning system*. Paper presented for the National Disaster Prevention and Preparedness Conference. Addis Ababa, Ethiopia: Mimeo

Coleman- , Jensen A Nord A and Singh A (2013) *Household Food Security in the United States in 2012* ERR 155. U. S. Department of Agriculture.

De Waal A (1989) *Famines that Kill; Darfur, Sudan 1981-1985*. Oxford: Clarendon Press,

Ellman M (2000) *The 1947 Soviet Famine and the Entitlement Approach to Famines*. *Cambridge Journal of Economics* 24: 603-30.

FAO (2012) *Integrated Food Security Phase Classification. Technical Manual Version 2. 0* Food and Agriculture Organization of the United Nations: Rome.

Framkberger TA (1985) *A food consumption perspective to farming systems research*. Report prepared by USDA Office of International Cooperation and Development Nutrition Economics ; group. Washington, DC: Department of Agricultutr.



Garenne M (2007) A typical urban famine: Antananatovo Madagascar 1981-1986. In Devereux S (ed) *The new Famine; Why Famines Persist in an Era of Globalization*. New York; Routledge.

Hamlin A ; Habichr J; and Beaudry (1999) Food Insecurity: Consequences for the Household and Broader Social Implications. *The Journal of Nutrition* 186: 9-14.

Howe P and Devereux S(2007) Famine scales, towards an instrumental definition of famine In Devereux S (ed) *Why Famines Persist in an Era of Globalization*, New York: Routledge.

Illiffe J (1979) *A Modern History of Tanganika*, Cambridge: Cambridge University Press

Jones M (2008) *Leningrad: Stage of Siege*. London: John Murray.

Klinterberg R (1977) *Management of Disaster Victims and Rehabilitation*. Addis Ababa Ethiopia Relief and Rehabilitation CoGmision.

Mayer J (1975) Management of famine relief. *Science* 188 (4188): 571-7.

O Grada C (2011) *Famines Past, Famine's Future*. *Development and Change* 42 (1) 49-69.

Rose D and Oliveria D (1997) Nutrient Intakes of Individuals from Food Insufficient Households in the United States. *American Journal of Public Health* 87: 1956-1961.

Saad MB (2013) *The Global Hunger Crisis; Tackling Food Insecurity in Developing Countries*. New York: Pluto Press.

Sen A (1981) *Poverty and Famine: an Essay on Entitlement and Deprivation*. Oxford: Clarendon Press.

Temple J (2008) *Severe and Moderate Forms of Food Insecurity in Australia:*

Are they Distinguishable? Australian Journal 43(4): 649-668.

Thaxton R (2008) Catastrophe and Contention in Rural China: Mao's Great Leap Forward and the Origins of righteous Resistance in Da To Village, Cambridge: Cambridge.

Watts M (1983) Silent Violence: Famine and Peasantry in Northern Nigeria. Berkeley: University of California PRESS,

World Bank (1985) Ensuring food security in the developing world: issues and options. Reutlinger S Jack VH and Pellekaan H (eds) Washington DC; World Bank.