

# Lost in Translation?

## Reframing How We Talk About Malnutrition

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**Description of the initiative**

- **Background/context:** The term malnutrition doesn't resonate with patients, policy makers or even clinicians. Most people associate it with famine, neglect, or developing countries—not with themselves (Mackay et al., 2024). This is especially true in people living in larger bodies, as the public and health professionals alike struggle to understand the co-occurrence of excess adiposity and muscle wasting (Sullivan et al., 2021). Many reject the idea that they could be malnourished, even after unintentional weight loss. Public misunderstanding delays dietetic referrals and leads to avoidable deterioration (Dominguez Castro et al., 2021). Until we fix the language we use, we will continue to fail to deliver early, cost-effective nutrition support. A third of hospital inpatients and approximately 1 in 5 care home residents are malnourished. Older people, people living with and beyond cancer, and people experiencing gastroenterological conditions are at the highest risk (Sullivan & Rice, 2024). Much of this malnutrition could have been detected earlier, or prevented, in the community, where the prevalence of malnutrition in community dwelling adults in Ireland is 11% (Bardon et al., 2020). The cost of malnutrition in Ireland in 2012 was estimated at €1.4 billion annually (Rice & Normand, 2012), and across Europe have been estimated to account for 2-10% of national healthcare budgets (Khalatbari-Soltani & Pedro Marques-Vidal, 2015). Effective interventions to reduce this preventable issue are urgently required, and better communication is an obvious starting point.
- **Rationale:** Patients can only demand care for a condition they know exists. To engage with treatment, they must also believe they are susceptible, and that it is important to manage. Malnutrition awareness campaigns raise public understanding of how many people have malnutrition, but the public don't understand what we mean when we say malnutrition, or that them and their loved ones could be at risk. To effectively raise awareness, it is necessary to use language and imagery that is accurately interpreted by the audience, and which is relatable.
- **Objectives & Scope:** We will undertake a mixed-methods survey to explore the current understanding of malnutrition amongst the public and professionals, including health professionals, scientists and policy-makers. Rather than focussing on how people perceive the existing term malnutrition, we will focus on eliciting what terminology, phrases or imagery evoke an accurate understanding of what malnutrition is and encourage positive engagement with it, by promoting acceptance that it is a legitimate issue which requires treatment.

**Planned activities & deliverables**

- **Project management plan steps:** 1. Formation of public-patient involvement & engagement group (PPIEG; n=10); 2. Rapid review of existing research on public understanding of malnutrition; 2. Online mixed-methods survey across Ireland and the UK exploring public understanding and perception of malnutrition, and what terminology, phrases or imagery could be better used to evoke appropriate understanding (n=1000); 3. Dissemination of research findings via peer-reviewed journals, professional publications and webinars.
- **Deliverables:** 1. Scientific papers describing the results of our research, which will inform future development of improved strategies to communicate about malnutrition; 2. A webinar for health professionals about how to better explain malnutrition to various audiences.
- **Achievements at 12 and 24 months:** 12m: Publication of research papers on survey; 24m: Webinar for professionals on how to better communicate about the concept of malnutrition with various audiences and articles in professional publications summarising our findings.

**Resources & enablers**

- **Personnel/financial needs/disclosures:** The project lead (PI) will supervise a research assistant (RA) 1.5 days/week for 11 months. Design, Translation and Printing Costs budgeted will ensure resources developed are visually appealing and accessible in multiple languages. Additionally, if the project is awarded the MNI grant, 4 full-time MSc research students will be assigned to the project. 2 student dietitians will develop and pilot the survey (Feb-May 2026) and 2 MSc Nutrition students will conduct and analyse the results of the survey (May-Aug 2026). University funding (£6000) will be allocated to these student projects which will be used to remunerate the PPIEG (£75/half-day workshop). Admin support will be provided by IrSPEN. KCL will fund open-access research publications for maximal impact.
- **How the grant will be spent:** €40,000 will fund Personnel (PI: €14,931.85 (0.15 WTE); RA: €19,973.33 (0.3 WTE x 11 months)); Design, Printing & Translation Costs of €1,018.91; and IrSPEN advertisement, dissemination & support costs of €4,075.63.
- **What factors will make it successful?** The project leverages established multi-sector collaborations, with a team of dietitians, medical doctors and surgeons with expertise in research, clinical management of malnutrition, public-patient involvement & engagement, as well as advocacy and policy development. Formal impact planning will be undertaken at project initiation. Funding for RA time will bring expertise in mixed-methods survey development. Having 4 MSc student researchers on the project will support meaningful integration of the public voice through the public-patient involvement & engagement group, who will be appropriately remunerated for their time sharing their expertise.

**Results/outcomes & expected impact**

- **Implementation:** The research findings will be immediately implemented in the design and evaluation of the educational resources. These will then be refined and rolled out nationally for use in the community and in clinical settings in Ireland, with endorsement of relevant national bodies.
- **How this project advances patient care, contributes to optimal nutritional care & impacts clinical practice:** Improving public and professional understanding of malnutrition will facilitate earlier diagnosis and improved engagement in treatment for better outcomes. Earlier intervention in malnutrition prevents deterioration to irreversible states such as refractory cachexia and reduces development of frailty. As malnutrition referrals are typically prioritised as urgent, higher prevalence of malnutrition can result in people with other conditions having difficulty accessing dietitians. Therefore, reducing the burden of malnutrition should improve timely access to optimal nutritional care for all.
- **What makes the project innovative?** Mandatory screening in hospitals has greatly improved detection of malnutrition in inpatients, however, unrecognised malnutrition in the community is a major, preventable source of morbidity. Existing research shows that awareness of malnutrition is poor, but we don't know what would help them understand its importance and how common it is. This project will work with the public to understand what communication approaches would be correctly interpreted. This will inform future projects to develop resources which effectively convey the message that anyone can experience malnutrition, and improve understanding of what modern-day malnutrition looks like.
- **Influence on national nutrition policy:** IrSPEN will use the insights generated when developing future malnutrition resources and when communicating with stakeholders on national healthcare budgets and policy briefings, for more effective and impactful advocacy.
- **Transferability to other settings/countries:** The research underpinning the project will be conducted across both the UK and Ireland, so it will be broadly applicable across these countries. Our work will be published open access, for immediate use or adaptation for other settings and we will facilitate wide dissemination and sharing of the resources, such as the surveys used, so that they can be translated and validated or adapted for other local contexts, to ensure others can gain relevant insights in their local and national contexts.

X

**Please tick to confirm the PEN letter of endorsement is attached. Incomplete submissions will not be considered.**