

## INTRODUCTION

In mid January 2006, the FSAU presented the findings of the Deyr Season analysis for Somalia and the outlook for Southern Somalia confirms predictions made in November 2005. For the populations of Gedo, Middle and Lower Juba and parts of Bay and Bakool, who already have malnutrition rates among the worst in the region, the coming months will be dismal, with a significant portion facing extreme difficulty in accessing adequate food and water for survival. This month's *Nutrition Update* presents the nutrition information used during the analysis of the situation in each area.

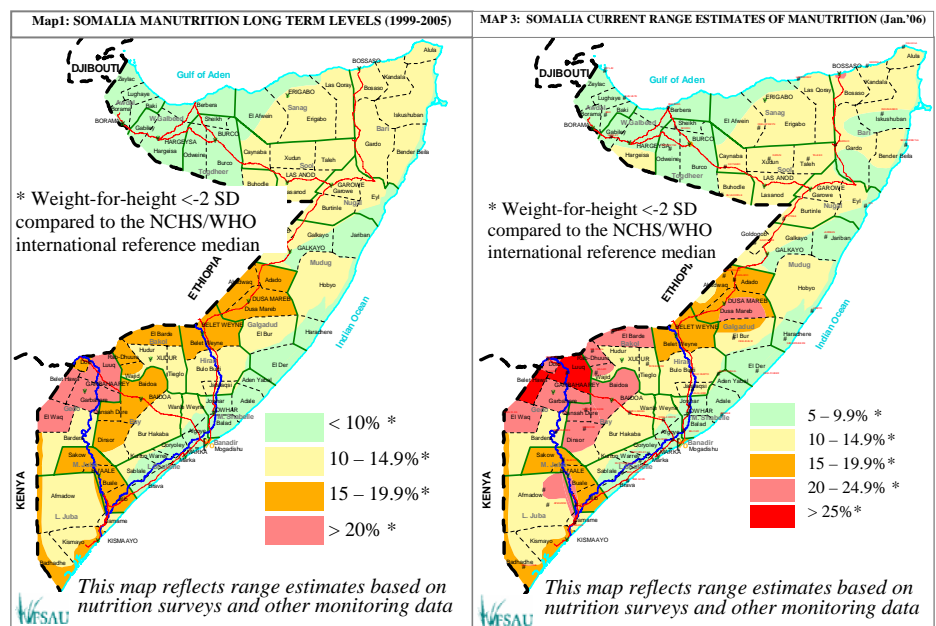
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Because the response to November's early warning is as yet inadequate, given the severity of the crisis, very little time now remains to prevent very significant human suffering and death. Early indications of increasing levels of malnutrition are evident. The humanitarian community are poised to further increase the response. Inadequate access, civil insecurity and inadequate donor funding remain the major challenges.

## OVERVIEW OF NUTRITION SITUATION IN SOMALIA

The following maps illustrate estimated levels of malnutrition in Somalia. Map 1 presents long term levels of global acute malnutrition presented as weight for height  $<-2$  Z score or oedema and shows consistent tendencies over the past five years. Map 3 presents the current range estimates of malnutrition.

The information that has allowed the development of these maps and the estimation of ranges is derived from nutrition surveys, sentinel sites surveillance, health facility data, rapid assessments and seasonal trends in dietary data. No single data set is used in isolation but rather triangulation is undertaken for an overall understanding of the nutrition situation in each area. The maps are updated as new information becomes available.



In response to the continuing deterioration in food security and livelihoods, FSAU's Nutrition Project has increased the coverage with new surveillance sites throughout Southern Somalia. While a first round of data collection has already been completed in most sites, more useful trends data will become available in the coming weeks as second and third rounds of surveillance data are processed.

It is already evident that the nutritional status of the population is deteriorating in many areas and numbers seeking treatment and care at therapeutic feeding centres are increasing. Interagency nutrition surveys are currently in progress in Rabdure and Wajid Districts and preliminary results of both will be available in early February.

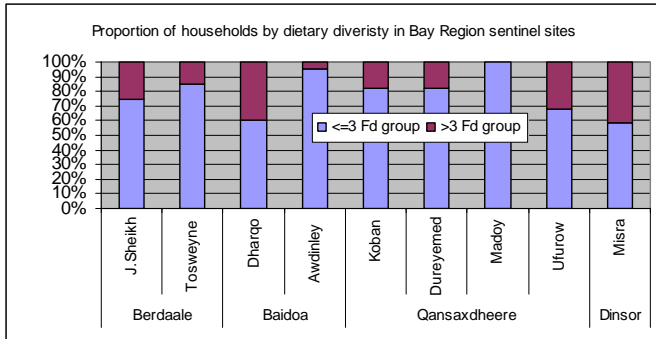
The Nutrition Surveillance Project is managed by FAO, funded by USAID/OFDA and receives support from the EC

PARTNERS INCLUDE MOHL SOMALILAND, MOH PUNTLAND, FAO, UNICEF, WHO, SRCS/ICRC, SCRS/IFRC, WVI, GHC, IMC, MSF, COSV, AAH, MUSLIM AID-UK, INTERSOS, CISP, ZAMZAM FOUNDATION, COMMUNITIES OF WABERI, HAMARWEIN AND HAMAR JABJAB, ACF, COOPI, MSF-H, MSF-B, Save the Children, CARE, UNOCHA, ADRA

## SOUTHWEST

### Bay Region

Civil insecurity has characterized most parts of Bay Region since late 2004, resulting in population loss and displacement, destruction of property, loss of productive assets, deterioration of food security and high levels of malnutrition. Currently, the population faces below normal Deyr crop harvests, severe water and pasture scarcity, poor livestock body condition and decline in livestock production and reproduction.

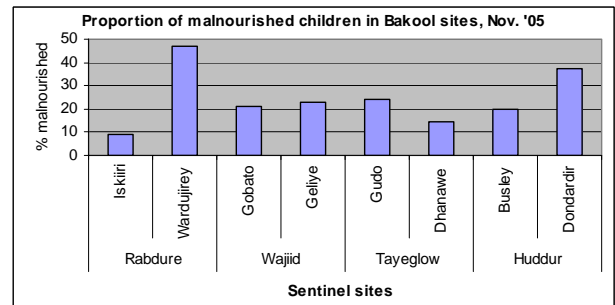


The malnutrition rate estimates for the Bay Region are over 15% in all the districts with the exception of Burhakaba District<sup>1</sup> and the lower part of Dinsor District where relatively lower malnutrition rates are recorded.

Currently most parts of Bay Region are experiencing a livelihood crisis or emergency condition (Food security and nutrition brief, Jan 2006). Early manifestation of the crisis is noted in the recent increase in malnutrition levels and communicable diseases at the MCH centres of Baidoa, Berdaale and Qansaxdheere, increased admissions in supplementary feeding programme and the high levels of malnutrition recorded in the sentinel sites surveillance. In December 2005, there was an outbreak of measles in Bay Region. Dietary diversity is generally decreasing with exception of Burhakaba and Baidoa town where milk is available. Insecurity hinders humanitarian interventions.

### Bakool Region

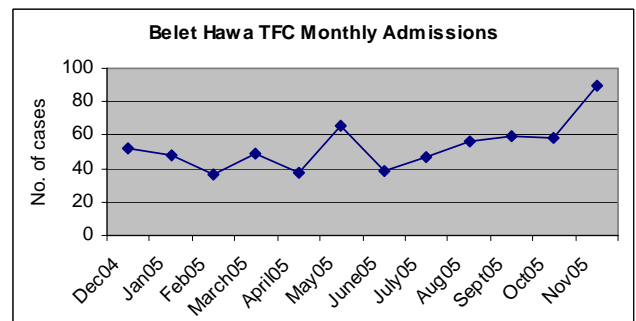
Bakool Region is faced with poor Deyr 2005/06 and Gu 2005 rains, that resulted in below normal crop harvest for the year. Severe water and pasture shortage coupled with civil insecurity has led to population and livestock movement towards Tayeglow District and Bay Region since mid 2005. Malnutrition levels of over 15% in Elberde, Rabdure and part of Wajiid signify a serious nutrition situation even before the impact of the current food insecurity. Population movement and household splitting indicate the impact of the deteriorating situation.



Insecurity in most parts of Bakool Region (mainly Elberde, Rabdure and recently Tayeglow) continues to disrupt both livelihood and humanitarian activities. Increasing trends of malnutrition are recorded in Tayeglow, Rabdure and Wajiid MCH while the sentinel sites data show high levels of malnutrition, especially in Rabdure and Huddur. High numbers of admissions continue in the supplementary feeding programmes in Bakool. Use of poor quality water, due to scarcity, is on the increase with a resultant increase in water borne diseases. Incidences of acute respiratory infections and measles have also increased between September 2005 and December 2005. Population influx from Gedo puts further pressure on resources available in Bakool. The population is relying on cereal based diets with severe scarcity milk and other animal products experienced in Northern Bakool Region.

### Gedo Region

Over the past five years of monitoring, malnutrition levels in Northern Gedo<sup>2</sup> have consistently remained among the worst in Somalia. The situation has deteriorated further with the recent food insecurity. Recently, a significant increase in admissions of Somali children have been recorded in the Belet Hawa and Mandera (Kenya) Therapeutic Feeding Centres. Severe water shortage is experienced by the communities, with exception of the riverine population and an increase of related disease has been noted in the clinics. High malnutrition levels of children and women are reported in sentinel sites and clinics. Dietary diversity is limited to two or three food groups and there is severe milk scarcity following the migration of livestock towards the Juba valley, in search of pastures



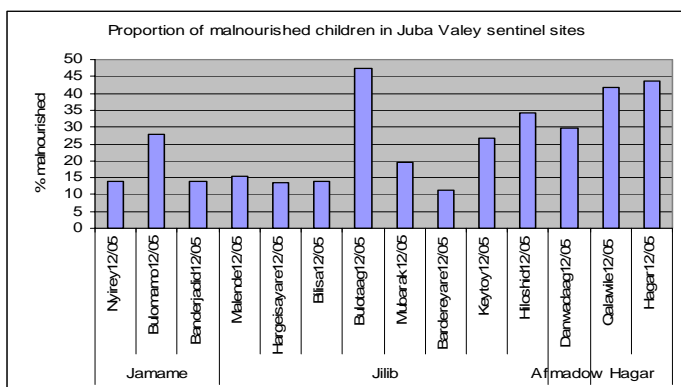
<sup>1</sup> Burhakaba District is well served by the World Vision sponsored primary health care programme and it is hosting camels which are still providing some milk to most of the households.

<sup>2</sup> Global acute malnutrition rate of 25.4% in Luuq (Oct'04), 22% in Belet Hawa (Oct'02) and 37.1% in Belet Hawa (Dec'01).

and water, while the remaining livestock's body condition has deteriorated<sup>3</sup>. Insecurity in Northern Gedo has influenced humanitarian operations and the prices of imported food commodities have been high and unaffordable to many, due to levies of militia along the main trade links between Mogadishu and Northern Gedo. Populations have moved towards the main villages seeking assistance, job opportunities and alternative livelihoods.

### Juba Valley

High levels of malnutrition have been recorded in many sites in the first round of data collection at surveillance sites in both Middle and Lower Juba. The Marere supplementary and therapeutic feeding programmes run by MSF Holland report increasing numbers of admissions. Uniquely, some of the TFC beneficiaries come from the pastoral community of Afamadow and Hagar Districts. About 60% of the TFC admissions continue to manifest oedema. Significant increasing trends of malnutrition have been recorded in the Jamame, Bualle and Jilib MCH centres.



The nutrition situation has deteriorated throughout 2005 due to the deteriorating persistent food and civil insecurity that hindered humanitarian activities; poor infrastructure and weak social support system existing in the riverine community. Increased incidences of communicable disease e.g. measles and respiratory infection have been reported.

Despite the concentration of livestock from Gedo and part of North-Eastern Kenya, there has not been any significant improvement in availability of milk and other animal products in the region. This is mainly due to the poor livestock body condition and lack of pastures and water in the host pastoral areas. The population's diet is limited to

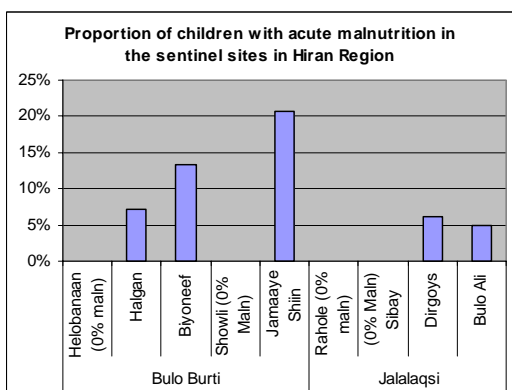
maize from past seasons or past relief food distribution<sup>4</sup>. The influx of pastoralists seeking food and water into the Juba valley riverine areas is triggering resource based conflict in some areas.

## CENTRAL / SOUTH EAST

### Hiran Region

Malnutrition levels in the region are still within the long term levels for the area (see Map 1). Sentinel sites surveillance data,<sup>5</sup> a recent survey,<sup>6</sup> and health facility information indicate that the situation remains stable. High morbidity especially reports of diarrhoea, poor sanitation, poor quality of drinking water and inadequate child care practices are among the causes of malnutrition in the region.

Findings of the recent sentinel sites data indicate that some areas are already experiencing stress in food access for example Biyoneef and Showli sites. Only 44% households consumed a diversified diet. Milk consumption was particularly good in most areas though this could decline as there is inadequate pasture and livestock are moving towards Middle Shabelle and riverine areas of Zone V in Ethiopia. Morbidity levels are high, in particular diarrhoea and ARI. Under the prevailing conditions the nutrition situation could deteriorate in the coming months and so close monitoring will continue.



Hiran region has been relatively food secure in recent years. However, the Gu 2005 and Deyr 2005/6 seasons have yielded low production in the riverine livelihood zone and almost no crop production in the rain-fed areas. Currently, food access is stressed with much of the population who traditionally grow their own food now relying on purchases to access cereals. Sale of green crops as livestock fodder has increased due to inadequate pasture and lack of rainfall for crop production. The riverine area is now classified being in a state of 'alert with high risk of acute food and livelihood

<sup>3</sup> The livestock mortality in Gedo is on the increase due to lack of pastures and water.

<sup>4</sup> WFP distributed free food before June 2005, consisting of maize, pulses and oil.

<sup>5</sup> In December 2005, FSAU commenced sentinel sites surveillance in Hiran region. Nine sites (Helobanaan, Halgan, Biyoneef, Showli, Jamaaye Shiin, Rahole, Sibay, Dirgoys and Bulo Ali) were selected from which both quantitative and qualitative data were collected. Except for Jamaaye Shiin, all other sites indicated malnutrition levels within or below the long term levels.

<sup>6</sup> Survey undertaken by SC-UK in selected villages of Beletwein District in October 2005 indicated a global acute malnutrition (weight for height <-2 Z score or oedema) of 13.3%.

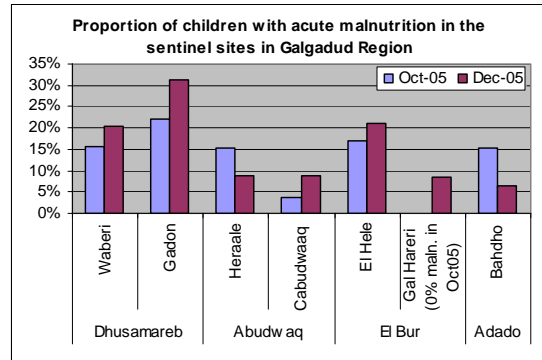
crisis' while the remainder is 'alert' or in a 'chronic food insecurity situation' according to FSAU food security phase classification (Deyr 2005/6 analysis).

### Galgadud and South Mudug Regions

Currently, parts of the Hawd and Addun pastorals remain classified as facing an acute food and livelihood crisis according to Somalia Food Security Phase Classification (FSAU Post Deyr 2005/6 analysis) mainly due to the cumulative negative impact on livelihood assets by the previous drought, continued civil insecurity and high and increasing malnutrition levels among the Addun pastoral in Dhusamareb and Ceel Bur Districts.

The levels of malnutrition remain within the long term (past five year) range estimates in both regions except among the Addun pastoralists in Dhusamareb and Ceel Bur Districts which appear worse than long term levels. These areas host a high proportion of non residents whose means of livelihood have been disrupted. These populations also report increased cases of ARI and measles. Parts of Abudwak District (Heraale area) show decreasing levels of malnutrition that are associated with lower morbidity levels and good dietary diversity.

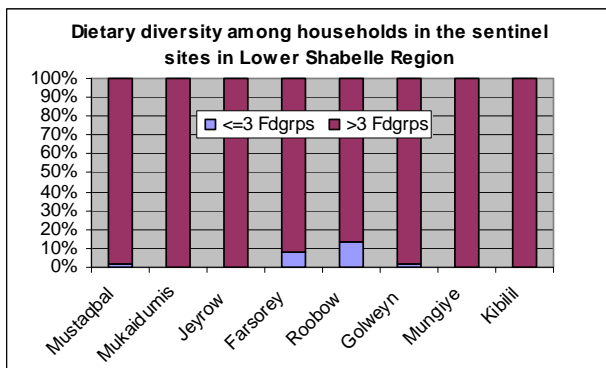
Milk availability has generally improved for most households and is expected to further improve with the increasing livestock holdings and calving of camels in January 2006. However, water availability is poor in some areas of Galgadud with water trucking having begun in Adaado and Dhusamareb. Prices of imported cereal are increasing while livestock prices may decline in the Jilaal season, influencing access to food items and other basic needs. The limited access to health care services and sporadic insecurity in the area remains a concern.



### Lower and Middle Shabelle Region

In the past, Lower and Middle Shabelle Regions have experienced good food security with the area producing most of the locally produced cereal used in Somalia. Malnutrition levels have been among the best in the country. However, both regions are now in a precarious situation following a below normal Gu 2005, a failed Deyr 2005/6 season and localized flooding. Most households are gradually depleting their past food stocks and food prices are increasing.

In order to observe the impact of the decreased level of food security, FSAU has intensified nutrition surveillance and set up sentinel sites surveillance in both regions. In December 2005, the first round of data collection was undertaken in eight<sup>7</sup> sites of Lower Shabelle while that of Middle Shabelle is underway. The proportion of malnourished children was relatively low in general with sites in Golweyn and Mungiiya reporting slightly higher levels. Malaria and measles were reported to be the most prevalent diseases. Measles cases were reported in Roobow, Farsoley, and Golweyn. Health facilities in the regions continue to report low levels of malnutrition among the under-five children screened on a monthly basis.



Overall, good dietary diversity was observed in most sites. In order of importance cereals, milk, fruits, sugar, pulses and oil were the commonly consumed food groups. Notably, there is significant proportion of households consuming micronutrient rich foods namely milk, fruits, pulses and vegetables.

Malnutrition rates are estimated to lie within the long term estimated range shown on Map 1. Close monitoring will continue.

### Benadir region

Civil insecurity continues to dominate Benadir region greatly hampering humanitarian access. The nutrition situation among the IDPs in Mogadishu remains poor<sup>8</sup>. The two ACF managed TFC's have noted a sharp increase in admissions of severely malnourished children since October 2005. Some of these beneficiaries are coming from other regions in South Central zone. With the prevailing drought conditions in Southern Somalia, the admissions are likely to increase as additional households move into Mogadishu in search of a means of livelihood.

<sup>7</sup> The sites are Mustaqbal, Mukaidumis, Jeyrow, Farsoley, Roobow, Golweyn, Mungiiya and Kibiliil.

<sup>8</sup> A nutrition survey undertaken by UNICEF and partners in September 2005 indicated GAM levels of 16%, similar to a past survey done in 2004; health facility data and sentinel sites surveillance data trend analysis

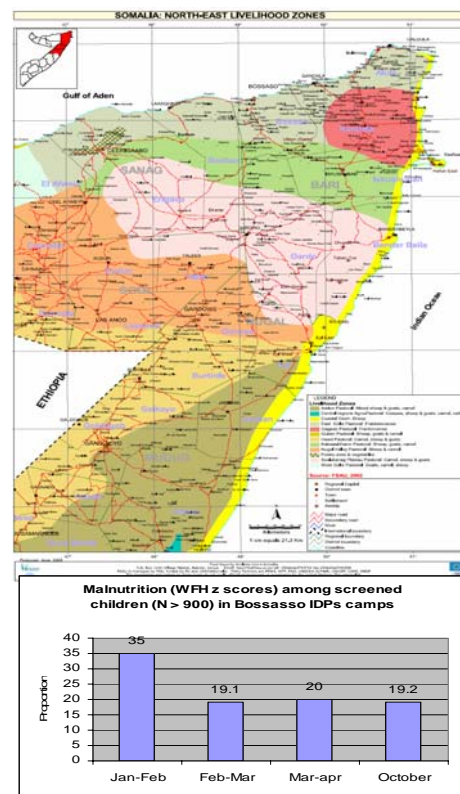
## NORTH EAST / PUNTLAND

### Bari region

The region comprises of Bossasso urban dwellers and five pastoral livelihood groups of the east Golis, Gagaab, Kakaar-dharor, Sool-Sanaag plateau and the coastal deeh.

The current nutritional situation analysis indicates acute malnutrition rates to be within the typical ranges for the area in most parts of Bari. Analysis of data from nutritional surveillance<sup>9</sup> indicates acute malnutrition levels of about 10 – 14.9% (WFH < -2z scores) except the coastal deeh (see below). Morbidity and lack of dietary diversity are the immediate causes of the high malnutrition levels. This is attributed mainly to continued lack of access to basic services (health, safe water), lack of dietary diversity and limited income earning opportunities. Efforts by stakeholders, including humanitarian agencies, to address these problems are constrained by limited road access. A strong social support network is a mitigating factor.

Within the Coastal Deeh, the situation also remains consistent with the longer term tendency i.e. 5-9.9% WFH < -2z scores. This better situation is attributed to access to fish and income from fish sales. The pastoral livelihood groups of Kakaar-dharor (in Ishkushban and Qardho) and the southern Sool plateau region of Qardho and Benderbeyla are experiencing a decreased level of malnutrition attributed to dietary diversity and improving health situation. This is linked to humanitarian support and improving household food security. Bossasso IDPs face above typical levels of acute malnutrition (refer to the chart) attributed to limited access to food and non-food items. Close monitoring continues.



### Nugal Region

Nugal region comprises of five pastoral livelihood groups from the Hawd, Addun, Coastal Deeh, Nugal Valley and parts of Sool Plateau. An analysis of nutrition surveillance data indicates 10-14.9% WFH < -2z scores to be usual range over the past five years for most parts of Nugal region. This is mainly attributed to high morbidity and limited dietary diversity and linked to inadequate access to health care services and vulnerability to external shocks e.g. drought. A strong social support network is a mitigating factor. The Coastal Deeh and Addun pastoral groups are exceptional with 5-9.9% (WFH < -2z scores) being typical.

The current nutrition situation is within typical levels, with the exception of Sool plateau and Nugal region of Eyl districts with better than typical rates (i.e. estimated at 5-9.9%). This is mainly due to access to fish, milk and to on-going humanitarian assistance. Additionally, there is decreasing debt burden. Sentinel sites surveillance data from Budunburto village indicates a declining trend of malnutrition. Close monitoring of the situation continues.

### North Mudug Region

The region comprises of the Hawd, Addun and Coastal Deeh pastoral zones. An analysis of nutrition surveillance data for the area since 1999 indicates long term trends of 5-9.9%. This is attributed to good access to food and water for the Addun and Coastal Deeh. Lack of fish markets limit access to income and aggravate poor nutrition. Malnutrition rates of 10-14.9% (WFH < -2z scores) are typical for the Hawd<sup>10</sup> pastoral groups and attributed to high morbidity and lack of dietary diversity.

The current nutrition situation is within typical levels in all the pastoral groups, apart from Goldogob district where it is better than usual (i.e. 5-9.9%).<sup>11</sup> This is attributed to access to meat, milk and milk products by all wealth groups, and access to water. Mergaga IDPs are faced with above typical rates of acute malnutrition, attributed to limited access to food and income. Admissions of severely malnourished children from the Hawd to Galcayo TFC mainly comprise of IDPs. Close monitoring of the situation continues.

<sup>9</sup> Nutrition surveys in Allula/Qandala/Bargal/Ishkushban districts: Aug 2002 & Sept. 2004; Qardho district: Sept. 2004; Sool Plateau: July 2004; June 2003; Sanaag region: May 2002; health facility and sentinel sites surveillance data trend analysis

<sup>10</sup> Galcayo nutrition surveys: April 2002, April 2003, April 2004, health facility & sentinel sites surveillance data trend analysis

<sup>11</sup> Goldogob nutrition survey Aug 05: GAM of 8.8% (WFH < -2z scores), health facility and sentinel sites surveillance data trend analysis

## NORTHWEST / SOMALILAND

### Awdal and Galbeed Region

Levels of acute malnutrition are within the longer term estimated range, with acute levels of <10% WFH < -2z scores except for the Hawd of Hargeisa where there are some indications that levels are slightly higher than long term levels.<sup>12</sup> Within the Hawd area, morbidity rates are also high with reports of an increased incidence of measles, ARI and diarrhoea. Measles immunization and vitamin A supplementation were low during six months prior to the assessment at 31% and 17% respectively.

Poor rainfall conditions are likely to have far reaching implications on both the pastoralists and agro-pastoralists, disrupting the recovery process that began well early in the year. It would weaken pastoral stock, damage the livestock trade and disrupt market activities and employment opportunities.

### Togdheer Region

Malnutrition levels are consistent with long term levels of <10% (in Burao and Odweine districts) and 10% - 14.9% (weight for height <-2 Z scores or oedema) in Caynabo and Buhodle districts except among internally displaced persons and destitute populations which are worse than those in the surrounding population.

No disease outbreaks have been reported in the region although high incidences of communicable diseases were noted among the IDPS. With the exception of IDPs and destitute households, most households are consuming a diversified diet including animal products. However, food sources at household level are diminishing with purchase being the dominant source. Terms of trade for pastoralists are not favourable thus limiting income. Strong social support networks serve as a key coping strategy in the region and the request for remittances is increasing.

### Sool and Sanaag Regions

The nutrition situation is within the usual range with malnutrition levels of 10% - 14.9% WFH < -2z scores except for the destitute populations that indicate malnutrition levels >15% and the vulnerable populations in Lasanood town which show an improvement in levels of malnutrition. Following a good Gu 2005 and Deyr 2005/6 season, highly vulnerable areas that were affected by the prolonged drought are slowly recovering. Dietary diversity has improved, including increased access to animal products. Humanitarian interventions are still ongoing in vulnerable areas. No disease outbreaks have been reported. The expanding construction industry and businesses in some urban centres like Lasanood has improved income availability at household level.

## Other related publications

- FSAU Food Security and Nutrition Monthly Brief, January 2005
- FSAU/FEWSNET Market Data Update, December 2005.
- FSAU/FEWSNET Climate Data Update, December 2005.
- FEWSNET/FSAU Somalia: Food Security Emergency, Drought is looming in Southern Somalia, November 22, 2005.
- FEWSNET Special Report: Somalia – The impact of piracy on livelihoods and food security in Somalia.

## Websites

This 'Nutrition Update' along with other FSAU reports, are available on:

- <http://www.fsasomali.org>
- <http://www.reliefweb.int>



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<sup>12</sup> Nutrition assessment conducted in nine villages of Salahley and Balaygubadle Districts in December 2005 by FSAU/Ministry of Health and Labour indicated malnutrition levels (weight for height Z score <-2 or oedema) of 11.4% among underfive children.