

OVERVIEW

One of the most important coping mechanisms in Somalia continues to be the social support mechanism through which relatives and friends assist one another in times of crisis through gifts, sharing and loans. Some of the most vulnerable populations in the country therefore tend to be those who cannot benefit from this support. Throughout the country, displaced households are separated from their social support but this month we highlight another group along the Juba River in Middle Juba Region that has been consistently marginalised and whose welfare has suffered because of it.

An update is also provided on the ever deteriorating situation in the Sool Plateau/Nugal Valley area in northern Somalia.

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SEASONAL FOOD INSECURITY AFFECTING MARGINALISED POPULATIONS IN MIDDLE JUBA

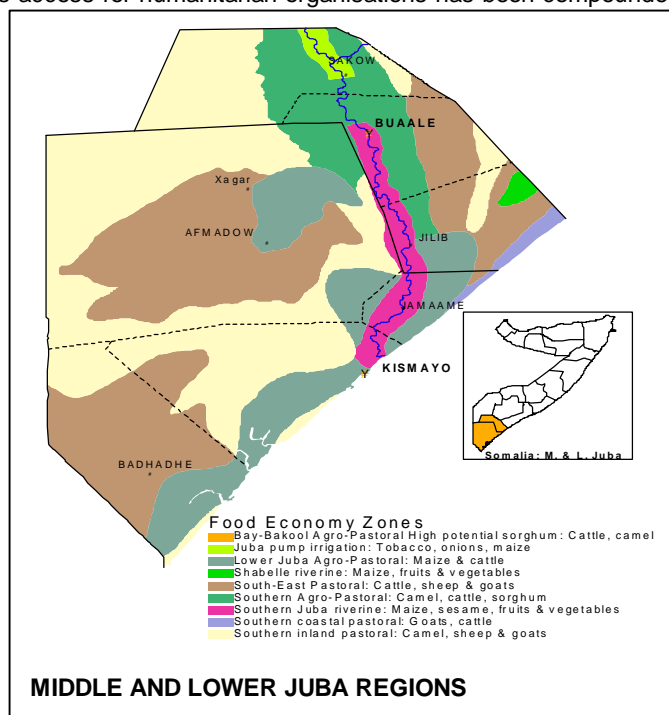
Yet again, Middle Juba has been highlighted as an area with many pockets of extreme vulnerability. As part of a detailed assessment of the area, MSF Holland has visited a number of villages on the Juba River, south of **Jilib** and has reported a high incidence of severe malnutrition, presenting as oedema. The situation in Mareere Village (population 3,800) was identified as being particularly serious with thirteen cases of oedema identified by the team and a high number of reported deaths in young children. All of these children were also reported to have had measles some weeks ago and their diet was extremely poor, consisting principally of mangoes and some maize with practically no access to milk, meat, pulses or other sources of protein. Similar reports in August last year prompted a more detailed assessment and analysis by FSAU, and highlighted the limited options available to these marginalised communities in the Juba Riverine areas.

In 2002, poor harvests limited both the possibility of farming and labour opportunities resulting in significantly reduced access to an adequate diet for many population groups. Weak social support mechanisms, marginalisation (many of these villages are inhabited by Bantu families) and the chronic insecurity that limits access for humanitarian organisations has been compounded by a serious upsurge in civil insecurity in recent months. Lives and livelihoods have been seriously affected. Health services are limited to the main towns and access can further be reduced by lack of financial resources in the affected households.

Last year, ICRC initiated a number of activities aiming to diversify the livelihoods of these populations. Included in these interventions was some support in fishing, including the marketing of the catch. A targeted food distribution also provided a mixed basket including pulses to the affected population.

Following the recent visit by MSF Holland, plans are being established to provide life-saving care to the children at risk. Efforts are being made to strengthen existing systems for health service provision, including immunisation against measles and other communicable diseases. In the short-term, broader interventions need to be considered including addressing both longer term and immediate food insecurity.

Although access for humanitarian organisations and continued civil insecurity present substantial constraints to the delivery of adequate services to this area, the chronic and serious situation impacting on nutritional outcome and overall welfare of the population needs to be considered in the near future.



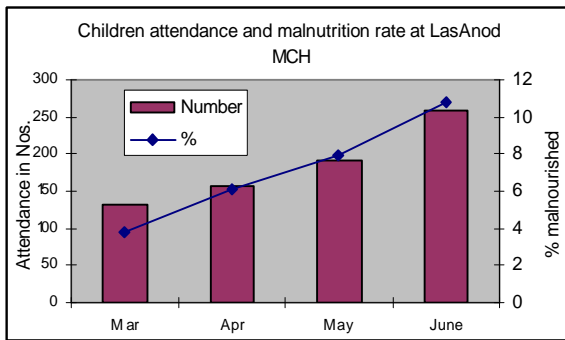
Consultations among partners have been intensified and progress will be reported in the next Nutrition Update.

The FSAU Nutrition Surveillance Project is funded by USAID/OFDA

SURVEILLANCE PROJECT PARTNERS INCLUDE MOHL SOMALILAND, MOSA PUNTLAND, FAO, UNICEF, WHO, SRCS/ICRC, SRCS/IFRC, WVI, GEDO HEALTH CONSORTIUM, IMC, MSF-S, COSV, AAH, MUSLIM AID-UK, INTERSOS, CISP, ZAMZAM FOUNDATION, COMMUNITIES OF WABERI, HAMARWEIN AND HAMAR JABJAB, IRC, ACF, COOPI, MSF-H, MSF-B.

WORSENING FOOD SECURITY AND NUTRITION SITUATION IN SOOL PLATEAU AND LOWER NUGAL VALLEY

In June 2003, the results of a collaborative nutrition survey in the Sool plateau of Sanag and Sool Regions were presented to partners in Somaliland. The results indicated a global acute malnutrition rate of 12% (<-2z-scores or oedema) and an under-five mortality rate of 1.9/10,000 children/day. Consequently FSAU intensified their nutrition surveillance activities in the region and latest reports show a further deterioration in the nutritional status of children utilising a health facility near one of the affected areas.



As shown on the table, the MOHL health facility in Las Anod and Huddun indicates an increasing proportion of malnourished children in an increasing number of clinic attendances between March and June this year. Significantly, children attending the MCH in Las Anod are reported to be mainly IDPs who had come from parts of Sool plateau and lower Nugal valley. Health workers report increased incidences of respiratory infections, diarrhoea and other communicable diseases in the region. These two child illnesses were associated with inadequate water usage at household level and harsh (dusty) weather prevailing at the moment.

A qualitative assessment conducted by the FSAU nutrition monitor in the area has also suggested that existing sub-optimal breastfeeding practices have further deteriorated due to the poor

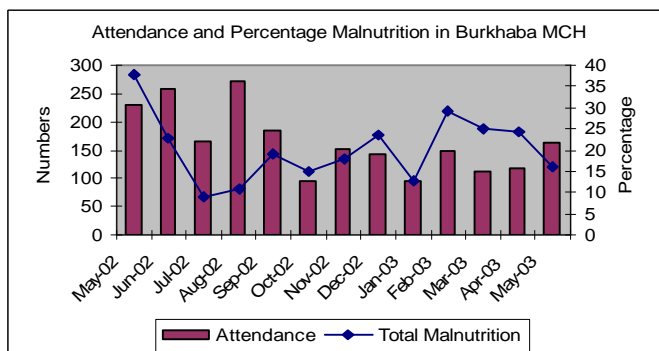
nutritional status of the mothers and the stress related to population movement. Households currently have reduced access to milk, the preferred food for young children particularly in the Sool plateau and Lower Nugal valley. Children are currently fed on 'anjero¹', white rice and sugar with minimal protein intake. Food security assessment in region estimates a food deficit of 25-35% in Sool plateau and 15-25% in lower Nugal valley. The deficit is expected to increase should the 2003 Deyr rains be inadequate. Water prices still remain exorbitant and access for the poor has reduced significantly (a 200 litre barrel of water costs about \$4.5 instead of the normal \$1.5 three month ago). The situation points to a worsening nutritional status should interventions delay.

Following the presentation of the nutrition survey results, there have been on-going discussions on possible interventions in the region. WFP and UNICEF in close collaboration with local authorities are currently working on modalities of initiating targeted general food distribution to about 3,500 vulnerable households in Sool plateau of Sanaag and Sool Regions as well as supplementary feeding for malnourished children. Other recommendations discussed for consideration include: continued close monitoring of the food and nutrition situation in the area; intensification of promotive and preventive health care interventions focusing on immunisation, and control of water related diseases. Nutrition related interventions include intensification of the standard messages on breastfeeding, complementary feeding and frequency of feeding of infants and young children during health and illness. Government and non-government partners in the water sector are being encouraged to consider the rehabilitation of run-down boreholes, berkads and dams with the aim of increasing access to water for both human and livestock. The promotion of alternative income generating activities through a credit programme to reduce over-reliance on livestock sources of livelihood is also being considered.

BURHAKABA, BAY REGION – MALNUTRITION IN A RELATIVELY FOOD SECURE POPULATION

The food security situation in Bay region has been reported as being relatively 'normal'. Following exceptionally good 2002 Gu rains throughout the region, adequate crop production was realised; agricultural employment opportunities were readily available and represented a key source of income for the poor households.

Water and pasture availability was good resulting in normal livestock body condition and so were the terms of trade for the livestock owners. The 2002 Deyr rains were also normal in the region, with a positive impact on food security. However, during 2003, Burkhaba town has been adversely affected by the persistent insecurity that has resulted in less trade and decreased investment. Income opportunities have consequently reduced in Burkhaba although the overall food security outlook remains positive.



As reflected in the graph, the proportion of malnourished children screened at Burkhaba MCH has been fluctuating around 20% over the past year. These levels of malnutrition are high and health facility personnel report that malnutrition has been closely associated with communicable diseases, especially malaria. Respiratory

tract infections, malaria, diarrhoea and intestinal parasites are among the other common diseases reported among children under five at the MCH. Qualitative data further indicates sub optimal child care including poor breastfeeding and child feeding practices. One example included the sale of nutritious foods like eggs to purchase less nutritious rice for children.

¹ Wheatflour pancake.

World Vision Somalia supports primary health care in Burkhaba District and undertakes various activities e.g. food preparation demonstration exercises, health education, distribution of mosquito nets, vaccination campaigns, water chlorination all aimed at improving the population's nutritional status.

BELETWEYNE

Supplementary feeding/family ration distribution continues in Belet Weyne with a slight decline in the total beneficiaries in the month of May 2003. No distribution was undertaken in the month of June 2003 due to limited humanitarian access to the area caused by logistical difficulties. The distribution is currently taking place in Belet Weyne. There are already indications that expected beneficiaries will be significantly higher than those seen in the previous months. An update on this will be shared in the August 2003 nutrition update. Additionally, a nutrition survey and food security assessment in Belet Weyne District is ongoing and will provide an update of the population's nutritional status and a better understanding of the factors contributing to the same.

FAO FOOD SECURITY AND NUTRITION PROJECT

FAO initiative in addressing the underlying causes of malnutrition in Bakool and Gedo regions of southern Somalia.

FAO in collaboration with various partners is implementing an integrated approach towards improvement of nutrition and food security in selected villages of Tayeglow, Rabdure and Huddur Districts of Bakool region and Bardera, Burdhubo, Luuq and Dolow districts of Gedo region. Using nutrition surveillance information the project was developed in 2002 to focus on three regions of Somalia, namely, Gedo, Bay and Bakool. They were selected as they indicated the highest malnutrition rates and the greatest vulnerability to food insecurity in the country.

Using PRA methodology the project started by facilitating a community process to establish problems that contribute to nutrition and food insecurity in the target villages as well as possible interventions. Needs identified included: chronic lack of access to food, caused by low purchasing power as well as low crop production and low technical know-how among farmers, poor child care practices caused by heavy workload for mothers, low awareness on hygiene and child feeding practices.

The Food and Agriculture Organization of the United Nations (FAO) has held a series of workshops for its potential partners to introduce and promote participatory micro-planning process for the project entitled 'Nutrition and Food Security in Somalia - a multisectoral approach to reducing malnutrition and food insecurity'.

In Tayeglow FAO is supporting the Organisation Relief and Development Action (ORDA), a local NGO based in Tayeglow. In Medaa village, 305 households with less than a hectare under cultivation were targeted to increase their land under cultivation to at least one hectare or more. To achieve this, the project allocated 800 tractor hours to the beneficiaries. In the same village a total of 400 families have been supported to access assorted seeds of cowpeas, green grams, simsim, groundnuts and sunflower, while 600 families in four other villages also benefited from the same as well as vegetable seeds. Community trainings on agronomic practices are on going. These interventions aim at diversifying crop production, processing, preservation and utilization with special focus on young children.

In order to address the poor purchasing power of the poor households as well as address issues of heavy workload for mothers the project plans to promote interventions such as beekeeping, access to donkey carts and small businesses among women e.g. handicrafts.

In Gedo, in partnership with local NGOs and the International Potato Centre (CIP), FAO has initiated an activity to promote production and consumption of orange fleshed sweet potato, as an initiative to fight vitamin A deficiency among riverine farmers. Thirty three farmers have been supported to start bulking / multiplication plots to enable more farmers to learn and access planting vines.

FAO is also planning to collaborate with agencies working in health, water and sanitation in the target areas in support of preventive health care. One of the main strategies in this project is capacity building of local NGOs in terms of knowledge and skills development in agronomy, appropriate feeding practices, food processing, food preservation, bee keeping and small business management.

TRAINING COURSES & ANNOUNCEMENTS

As part of its Short Course Series, the African Medical and Research Foundation (AMREF), International Training Programme, Nairobi, Kenya will be offering courses on i) Environmental and Occupational Health from 11th August to 5th September, 2003. ii) Disaster Management from 8th to 19th September, 2003. For more details, contact AMREF at Email: amreftraining@amrefhq.org or Website: <http://www.amref.org>.

The Regional Centre for Quality of Health Care, Makerere University, will be offering a Post Graduate Diploma in **Quality of Health Care**, in Uganda from 11 - 22 August 2003 targeting senior and middle level managers. The course aims at teaching health care providers a comprehensive approach for identifying gaps in the quality of health care provision among other issues. For more details contact the Course Coordinator at Email: mail@rcqhc.org or smagero@rcqhc.org

PUNTLAND TRAINING

Between June 19 and 21 2003, FSAU nutrition surveillance project conducted a sensitisation workshop for middle level managers on 'Collection, analysis, interpretation and use of nutrition related data' for partners in Puntland. The workshop targeted partners actively involved in Nutrition, Health and Food Security issues and was attended by twenty four participants representing five local government ministries and eight international agencies. The main discussion points at the workshop included basic understanding of nutrition, food security, health concepts and malnutrition causal analysis; the multi-sectoral nature of nutrition issues; analysis and interpretation nutrition related data and possible interventions at various causal levels. The participants underscored the need for frequent sensitisation fora targeting audiences not only from agencies but also the community to assist in the development of coherent interventions. The persistently high level of malnutrition in Puntland was partly blamed on lack of awareness of nutrition issues alongside chronic inadequacies like severe weather, frequent insecurity incidences, hard economic conditions, lack of functioning structures for addressing malnutrition etc. FSAU intends to hold workshops in South and Central Somalia in the coming months.

NUTRITION SURVEYS – 2003

Dates		Area	Organisations	Status 10 th July 2003
February 2003	Somaliland	Hargeisa Returnees	UNICEF/MOHL/FSAU	Prelim. results available
March/April 2003	Puntland	Galcayo Town	UNICEF/MOH/FSAU/MSF-H	Report available
May 2003	South	Kismayo	UNICEF/FSAU	Report available
May 2003	Somaliland	Sool Plateau	FSAU/UNICEF/MOHL/NPA/SRCS	Prelim. results available
July 2003	Puntland	Bosasso	UNICEF/MOH/FSAU	Underway
July 2003	South	Belet Weyne	UNICEF/FSAU/IMC/SRCS	Underway
Jul/Aug 2003	Bakool	Elberde/Huddur	IMC/FSAU/UNICEF	Planned
August 2003	South	Tayeglow - Bakool	FSAU/SRCS/UNICEF	Planned
August 2003	Somaliland	Haud of Togdheer	FSAU/MOHL/UNICEF	Planned
August 2003	Somaliland	Burao IDPs	FSAU/MOHL/UNICEF	Planned
August 2003	Puntland	Kandala, Iskushuban, Gardo	UNICEF/MOH/FSAU	Planned
Sept 2003	South	Dinsor	IMC/UNICEF/FSAU	Planned
Sept/Oct 2003	South	Haradheere	FSAU/CISP/UNICEF	Planned
Oct – Dec 2003	South	Micronutrients survey all zones	UNICEF	Planned
Nov/Dec 2003	Puntland	Jeriban & Galgodob	UNICEF/MOH/FSAU	Planned
2003	Somaliland	Awdal	FSAU/UNICEF/MOHL	Planned
2003	Somaliland	All regions (IDD)	UNICEF	Planned
2003	Somaliland	Sanaag	UNICEF/MOHL/FSAU	Planned

WEBSITES

This 'Nutrition Update', along with other relevant materials, is available on:

UN Somalia Website. http://www.unsomalia.net/FSAU/nutrition_updates.htm

ReliefWeb. <http://www.reliefweb.int/w/Rwb.nsf/vLCE/Somalia?OpenDocument&StartKey=Somalia&Expandview>

RECENT REPORTS

- ✉ **Monthly Food Security Report for Somalia, FSAU.**
- ✉ **Greater Horn of Africa Food Security Bulletin.** Issue No. 12. May 30, 2003. FEWS NET/LEWS/RCMRD/USGS
- ✉ **Kenya Food Security Update.** June 10, 2003. FEWS NET/MALD/WFP and UNICEF.
- ✉ **Kenya Vulnerability Update.** June 19, 2003. FEWS NET and WFP.
- ✉ **Ethiopia Network on Food Security.** Issue No. 6/03. June 18, 2003. FEWS/NET/EU-LFSU.



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