

OVERVIEW

As the preliminary results of the Gu crop harvest become available, it is evident that while the overall production in Southern Somalia is above the post-war average, a number of regions have experienced disastrous harvests. Most significant among these is Hiran Region where the failed harvest represents the latest in a series of drought related crop failures. Malnutrition rates that were already high in May 2002 are now likely to increase even further. Initial efforts by humanitarian actors in the region to develop a coordinated short and medium term intervention give reason for some optimism.

In Gedo, overall indications suggest continuing difficulties for a significant proportion of the population in accessing a basic minimum diet. With access to the region extremely poor, it is difficult to provide accurate statistics on malnutrition or mortality. All evidence continues to suggest that rates for both are probably among the highest in the world.

In this issue of 'Nutrition Update';

	Page
Belet Weyne	1
Gedo	2
Kenya – Somalia border	3
Nutrition surveys	3
Puntland	4
Bay , Bakool	4
SMART and SPHERE	5
Information and announcements	6

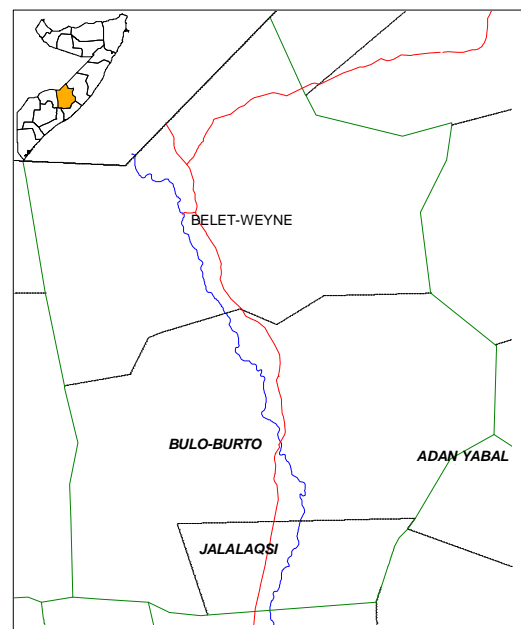
BELET WEYNE

Deepening food insecurity and malnutrition situation in Belet Weyne

Hiran Region has had three successive below normal rains starting with 2001 Gu season. Crop production has been negatively affected throughout the region. Compared to other districts in the region, Belet Weyne has consistently had the poorest rains in these previous seasons. In the 2002 Gu season, rainfall was low and lasted for less than 10 days in the district. This hampered rain-fed farming activities. Stalk borers later destroyed the few farms that had established further reducing chances of crop production. Even irrigation farming was minimal as inflation made it costly to access fuel. The few irrigation farms were mainly kept for fodder production and some cash crops, which now sell at exorbitant prices (Som Shs 4-7,000 per bundle compared to the previous Som Shs 2-3,000). **The preliminary analysis of the Gu cereal production indicates that yields in Hiran are 85-90% lower than normal.**¹

In the July issue of this update, the preliminary results of a nutrition survey conducted in May 2002 for Belet Weyne District were presented. The results indicated an unacceptably high Global Acute Malnutrition (Total wasting) rate of 21% <-2 z-score and/or oedema and a Severe Acute Malnutrition rate of 2.7% <-3 z-score and/or oedema. The findings indicated inadequate food availability and access as the major factor influencing the high malnutrition rate with inadequate childcare practices, limited access to clean water and frequent episodes of common child illnesses also having a significant effect.

Between 7th and 8th September 2002, FSAU in collaboration with MC Belet Weyne conducted a rapid nutrition assessment using Mid Upper Arm Circumference (MUAC) in Belet Weyne town (representing nearly 50% of the district population). The assessment aimed to act as a verification of the information in the nutrition survey three months earlier.² Following analysis, the results were found to be consistent with earlier findings. Qualitative information collected during the assessment and discussions with humanitarian actors in the region confirm the compromised status of Belet Weyne residents due to food insecurity. Malnourished children identified during the assessment were referred to MC health facilities. Evidence of increasing compromises in child care was seen as families engage in activities for survival livelihoods and child care responsibilities are transferred to siblings.



¹ Full report will be available at FSAU at the end of September.

² A total of 589 children were randomly assessed from the two main sections of the town (East and West). Results of the assessment also showed a high malnutrition rate of 24.7% and 5.4% using MUAC <12.5 cm and/or oedema and <11cm and/or oedema for total acute and severe acute malnutrition respectively). A further 30% of the assessed children were at risk of becoming malnourished.

In Hiran Region, the pastoral communities are also affected as there was insignificant water and pasture replenishment in the district. Cattle are more affected than the browsing animals as pasture has dried up in the grazing lands while water is also scarce. This has resulted in out migration of livestock to the Shabelle valley with some to the neighbouring Bur-Ukur zone in Ethiopia. Milk production has dried up for most animals. The little milk produced is double the usual prices (a litre is currently Som Shs 6-10,000 compared to normal rate of Som Shs 3-4000), thus inaccessible to most households. The district relies on market purchases of staples (maize, rice, pasta and sorghum) whose prices are at least 50% higher than normal prices e.g. a 50kg bag of maize now sells at Som Shs 155,000 as compared to Som Shs 100,000 in May. The cereals are mainly from Middle Shabelle and Lower Shabelle and Bay Regions. The market is also influenced by increased demand for cereals in the neighbouring Ethiopian zones, which had in the past exported cereals to Somalia, thus leading to a general rise in prices. The imported products are also expensive due to inflation. The sporadic inter-clan clashes only worsen the already compromised fragile food security situation. The riverine and agro-pastoral communities are more affected than pastoralists who own some browsing animals. Division of families is becoming common as the livestock owners move further from their vulnerable families.

Water scarcity is now a significant problem in Belet Weyne. Diarrhoeal diseases are common and the presence of intestinal parasites appears to be widespread in the district. The uptake of healthcare services is also low in the district as was revealed by survey results that showed extremely low measles immunisation coverage (22%).

Inter-agency response planned in Belet Weyne

On September 9 and 10, 2002, humanitarian organisations in Hiran met in Belet Weyne to develop an intervention strategy aimed at addressing the current food insecurity and related high malnutrition rates. Organisations included IMC, UNICEF, WFP, SRCS, SCF, Hiran Region NGO Consortium (Somali NGO), local authorities and FSAU. Short-term emergency responses as well as medium to long term interventions were discussed. Interventions aimed at improving water, health services and livestock were identified as being of high priority in the medium to long term. However, of immediate priority was the need to address the high malnutrition observed in the area. An inter-agency intervention was agreed on that will borrow from Bakol inter-agency intervention model (described in the August issue of this update). UNICEF, IMC and WFP are committed to operating an Extended and Expanded SFP approach aimed at preventing moderately malnourished children from worsening, reducing the risk of mortality from common child illnesses and raising nutrition awareness among caretakers/mothers on appropriate child feeding practices. The intervention will include supplementary food, medical care to malnourished children and family ration to households with malnourished children, in addition to immunisation for all children screened, and health/nutrition education to all caretakers/mothers of children who present for screening. In addition, IMC is negotiating with the Belet Weyne hospital to provide specialised care to severely malnourished children with support from the planned programme. SRCS is expected to be involved in provision of health services while also assisting in screening of children for the programme. The local authority committed to allocate two locations for distribution and operations of the programme. Organisations unilaterally agreed to support the programme in various ways e.g. information sharing, supervision exercises and screening of children etc. Logistics for the programme is expected to be finalised before the end of September. The programme is therefore expected to start by October 2002. It is hoped that needs and potential for interventions in the remaining parts of Hiran Region will also be reviewed in the coming weeks although access will present significant challenges.

A committee that comprises local humanitarian organisations and local authority was formed with a specific objective of mobilising resources for interventions that would complement the programme and ensure sustainable solution to the high malnutrition rates in the area. Meanwhile WFP is also continuing with their Food for Work activities mainly for the provision of basic infrastructure in the district. About 220 MT tonnes was expected in the district in the month.

GEDO

Insecurity aggravates problems of a vulnerable population.

In Gedo, insecurity continues to present serious challenges to the collection of accurate data as well as to humanitarian interventions. Prices for both imported food items and milk are high – over three times the normal price in the districts of Belet Hawa, Burdhubo and Garbaharey, resulting in drastically reduced access for many. Food security indicators and information on disruption of livelihoods suggest that food access is substantially better in Southern Gedo than Northern Gedo.

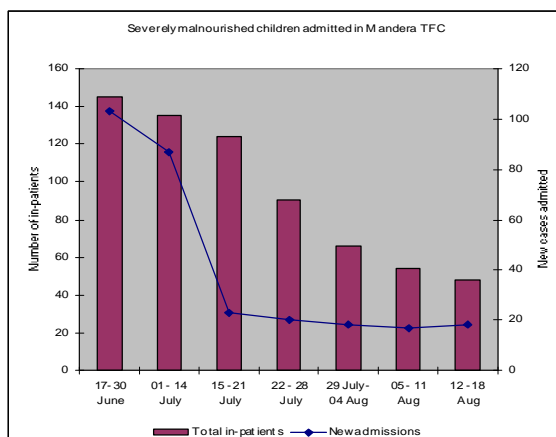
- In **Belet Hawa**, both supplementary and therapeutic feeding programmes are in operation with limited outreach activities. The population is highly dependent on relief food distribution from CARE.
- The **Elwak** MCH is functioning but inadequate access due to insecurity has limited the flow of supplies (including supplementary food) as well as presenting challenges for adequate supervision. The less food secure northern part of the district is highly dependant on the relief food provided by CARE. CARE distributes to around 7,400 families on a monthly basis.
- In **Luuq**, humanitarian operations still remains limited as a result of insecurity. Therapeutic feeding is supported in Luuq town with 115 severely malnourished inpatients in the centre at the end of August. No supplementary feeding is available. Of significance during the month is the resumption of CARE food distribution between 11th and 15th September 2002.
- In **Burdhubo** and **Garbaharey** districts, supplementary feeding has not taken place since March/ April 2002 due to lack of supplies caused by inaccessibility. WFP has completed food distribution in both Garbaharey and Burdhubo during late August / early September.

KENYA – SOMALIA BORDER AREA

Food security and nutritional status in Mandera District on the Kenya Somalia border has been affected by a number of influences on both sides of the border over the past year. In addition to cumulative below normal rains for the last three years, food insecurity was heightened by the inflow of Somali refugees between March and June 2002, which brought increased pressure on limited resources. Inter-agency nutrition surveys conducted in the district in March 2002 revealed high global acute malnutrition rates between 22% and 33% (using <-2zscore and/or oedema).

In response to the high malnutrition rates, Oxfam (with support from UNHCR and UNICEF) in partnership with EPAG (Emergency Pastoral Assistance Group) established six dry ration supplementary feeding centres within Mandera Central Division in mid July 2002. The centres included *Shafshafey, Barwaqo, Kamor, Society, BP1, and Neboi*. The feeding centres had about 560 children admitted into the programme by the second week of August 2002 up from 420 children in the first week of August. The MSF-Spain wet supplementary feeding centres that were started in June 2002 partly to support the Belet Hawa refugees that were staying in Mandera town as well as to support moderately malnourished children in the district has since been closed following the opening of the Oxfam/EPAG dry supplementary feeding centres.

MSF-Spain has been operating a therapeutic feeding centre within the Mandera District hospital aimed at caring for severely malnourished children identified in the district as well as assisting the refugees from Somalia that were previously in the District. The total number of beneficiaries at the TFC has been progressively declining since the relocation of refugees began in July 2002. The current admission was 50 children by second week of August 2002 down from a high of 140 children in the last two weeks of June 2002 (see the figure opposite). Currently, children discharged from TFC are admitted at the Oxfam/ EPAG managed supplementary feeding centres.



2002 NUTRITION SURVEYS UPDATE

Dates 2002	Area	Organisations	Status September 18, 2002
February	Puntland Galgayo	UNICEF	Report circulated.
April	South Bur khaba-Bay	World Vision	Analysis in progress
April	South Waajid-Bakool	World Vision	Analysis in progress
May	Somaliland Sahil	FSAUMOHL/UNICEF	Report circulated
May	South Berdaale-Bay	IMC/FSAU/UNICEF	Report available
May	Somaliland Sanaag	UNICEF/MOHL/FSAU	Report circulated
May	Somaliland Haud of Hargeisa	FSAUMOHL/UNICEF	Draft available
May	South Beletweyne-Hiran	UNICEF/IMC/FSAU/SRCS	Report circulated
May	Puntland Bosasso IDP Camps	UNICEF/MOSA/FSAU	Report to be circulated
August	South Rabdure-Bakool	UNICEF/IMC/FSAU	Analysis on-going
August/September	Puntland Alulla and Iskushuban	UNICEF/MOSA/FSAU	Data entry completed
September	Somaliland All regions (IDD)	UNICEF	Planned
To be rescheduled	Somaliland Sool	UNICEF/MOHL/FSAU	Awaiting security clearance
October	Somaliland Hargeisa Returnees	UNICEF/MOHL/FSAU	Planned
November	Puntland Galdogob	UNICEF/MOSA/FSAU	Awaiting security clearance
Late 2002	South All regions (Anaemia & VAD)	UNICEF	Planned

Unless otherwise indicated, nutrition surveys in Somalia use a standard 30 x 30 cluster sampling methodology and survey a minimum of 900 children. Weight and height measurements are taken and results calculated using Z scores. Therefore, **Global or Total Acute Malnutrition** refers to the proportion W/H<-2 Z scores plus oedema and **Severe Acute Malnutrition** refers to the proportion of the population W/H<-3 Z scores plus oedema. Full reports are available from FSAU.

FAO WORKSHOP IN HUDDUR

During September 17 and 18, 2002 FAO facilitated a workshop entitled 'Nutrition and Food Security – a multisectoral approach to reducing malnutrition and food insecurity' in Huddur. This is the second workshop; the first one held in Nairobi in June 2002 as part of a collaborative effort between FAO and partner organisations to develop innovative food security and nutrition related interventions in Bay and Bakool Regions.

PUNTLAND

Fragile food security and nutrition situation among the Bossasso IDPs and pastoralists in the Sool plateau

During much of the past year, Puntland has experienced heightened insecurity, with a subsequent serious impact on humanitarian operations. Insecurity is considered to have increased the vulnerability of the population, especially poor urban residents in Bossasso and the Sool plateau residents, already affected by the negative impact of continued livestock export restrictions, inflation and successive below normal rains since Gu 2001.

Sool plateau is heavily dependent on livestock as their main source of livelihood. Currently the area is experiencing abnormal livestock movement (see Food Security Report), animal productivity is low and both milk and meat are scarce. The little milk available in the area is expensive and unaffordable to most residents.

The poor and IDP residents of Bossasso town also face a precarious food security situation. Although livestock trade has improved, the inflation related to the ban continues and the population is currently experiencing the seasonal reduction in labour opportunities. Other factors affecting nutrition include high prevalence of common childhood illnesses and sub-optimal sanitary conditions that negatively affects childcare in the camps. Essential foods for children such as milk, fruits and vegetables are scarce while the imported products are too expensive for the majority of the households.

A rapid MUAC nutrition assessment conducted in the Bari Region by FSAU in May 2002 revealed a high global acute malnutrition of 17% (refer to May issue of this update). The assessment findings confirmed a population whose livelihood had already been considerably compromised. The nutrition assessment highlighted the rural poor in Bossasso as the worst affected. The results of a more recent nutrition survey in Bossasso will be available in October.

Although nutrition surveillance activities and humanitarian operations have been considerably jeopardised in many parts of the region, regular reporting of the nutrition surveillance data has continued from a number of sites with some showing an increasing trend in malnutrition rates. Examples of the facilities are Sinujiff and Eyl MCHs located in North Nugal Region of Puntland that reported an increasing trend in the proportion of malnourished children screened between March 2002 and June 2002. Sinujiff has experienced a very fragile security situation due to heavy presence of militia along the main road and Eyl is off the main road, making the area poorly accessible in the spate of the continuing insecurities. An outbreak of measles has also been reported in Qaris and Sinujiff.

BAY REGION

Insecurity interrupts services to a recovering population

Good prospects for the Gu harvest and satisfactory condition of livestock have improved food availability in Bay Region. Livestock products are readily available and prices for locally available cereals are on the decline. Unfortunately, the prolonged period of peace in the region was disrupted in July resulting in abnormal movement of both humans and livestock. Though the food availability in the region appears to have improved, relatively high proportions of malnutrition are still reported from the nutrition surveillance data in the MCH centres. For example in June 40% of the 500 children screened in Berdaale and 25% of 500 in Qansax Dheere were moderately or severely malnourished (using Z-scores). In July, 35% of the 507 children screened in Dinsor MCH were malnourished.

In a region where 10-20% of the population are considered poor, based on their small land size or herd size, it is likely that accessing the food items required for an 'adequate' diet is a serious problem. It is likely that diets for these groups are inadequate in both quality and quantity. The other common underlying causes of malnutrition are also likely to have an influence on the overall numbers of malnourished. Due to the insecurity in July and August, family rations supplies to most centres operating the Extended and Expanded Supplementary Feeding Programme in the region were interrupted. Stocks of blended food for malnourished children were adequate during the period and health facilities continued to function.

BAKOOL REGION

Looming food insecurity threatens 'recovery' in the region

The overall food security outlook for Bakool region in the coming months gives few reasons to feel optimistic. Unusual livestock movement has already started towards pasture rich sites (Qarin and Leg-gale zones). The eastern parts of Huddur, some parts of Tayeglow, Dhaah area of Waajid and Cimlow/Isdowrt areas of Rabdure have poor crop prospects, low pasture and the water shortage is increasing. Bakool Region is currently experiencing a decline in milk production. In Rabdure, Huddur and Elberde, the SFP/family ration intervention continues. Between June and July a decrease was noted in the number of malnourished children in the programme. This decrease was partly attributed to some temporary improvement in food security as well as the intervention itself. The trends will continue to be monitored in the coming months.

In early September, a supplementary feeding centre targeting malnourished children commenced in Waajid, supported by World Vision. In the past, residents of Waajid district were travelling to Rabdure for these services so it is anticipated that the provision of services in Waajid will now decrease this movement. At the end of August, a nutrition survey was undertaken in Rabdure District. Preliminary results will be presented in next month's Nutrition Update.

STANDARDISED MONITORING AND ASSESSMENT OF RELIEF AND TRANSITIONS

Extracts from preliminary report

Standardized Monitoring and Assessment of Relief and Transitions (SMART) is an inter-agency initiative to improve the monitoring, reporting and evaluation of humanitarian assistance interventions. The programme will pilot an approach to routinely collect, analyze and disseminate information on the nutrition and mortality experience of populations served by humanitarian interventions. The programme advocates the interpretation of health and nutrition data in the context of food security and vulnerability analysis and as a start, addresses the basic health and nutrition indicators that are commonly used in the acute phase of an emergency. Other indicators for humanitarian assistance will be incrementally reviewed and added as part of the collective effort.

The programme will provide implementing partners and the broader humanitarian community with a range of tools to support humanitarian programme assessment, monitoring and evaluation. A website has been established to serve as an organised workspace and knowledge repository to be used by participating organisations. This will be linked with or mirrored at NutritionNet, the website that is currently being used for technical discussion. It will also be linked with ReliefWeb, and coordinated with the United Nations Office for the Coordination of Humanitarian Affairs (UN-OCHA). The programme will develop information management tools for field reporting, web-based forum for posting survey reports, and a listserve for field practitioners to have direct, immediate access to the pool of experts drawn from various organisations.

In July 2002, USAID convened a workshop in Washington, USA attended by representatives of 45 institutions, including 20 NGO/international organizations, seven UN organizations and several other institutions (universities, donors and government). The objectives were to establish a generic, standardized methodology for assessing mortality rate and nutritional status of populations in crisis and to promote a better understanding on how policy and program decisions are made by donors and international agencies.

Agreement was reached on a number of issues:

- Timely, reliable and standardized data is essential for prioritizing humanitarian assistance for policy and programme decisions. The humanitarian community needs to act quickly when a crisis erupts to ensure that critical data is available for making appropriate policy decisions.
- Implementing partners and donors need to demonstrate that significant investments in humanitarian response to complex emergencies are effective through the use of technically sound, valid measures. Everyone, particularly the beneficiaries have a vital interest in ensuring that all data are accurate, timely, appropriately interpreted and free from bias or manipulation.
- The two measures, Crude Mortality Rate (CMR) and nutritional status of children under five, are considered the most basic, essential indicators for assessing the overall severity of population stress and for monitoring the overall effort of the humanitarian community. The current indicator, Crude Mortality Rate (CMR), should not be changed until research findings validate that Under-5 Mortality Rate is a better alternative.
- The standard nutritional status indices to be used are wasting (thinness or marasmus) and oedema (kwashiorkor). Wasting is measured using weight-for-height. Current best-practice survey methods should not be changed until new ones have been tested and validated.
- Trend analysis is recommended for determining whether a situation warrants intervention, rather than using absolute thresholds established by the international community. Nutritional status that steadily continues to deteriorate, even if below the 10 percent cut-off wasting prevalence merits attention and appropriate interventions. Appropriately collected surveillance data triangulated with frequent surveys, undertaken with a simple and easily repeatable methodology, are recommended to recalibrate surveillance data and monitor trends.
- Mortality data collection is much more difficult than collecting data on nutritional status. It is prone to error. Mortality survey data needs to be triangulated with other data such as nutritional status, surveillance (incidence, program coverage), grave counting, religious authority record, mother to child ratio, and demographic profile.
- Nutritional survey data cannot be interpreted in isolation. The food security context needs to be understood to interpret nutritional survey data.

The workshop was successful in meeting its stated objective to agree on a standardized survey methodology. It was also successful in establishing a broad base consensus on the use of mortality and nutritional status indicators, and the importance of ensuring data is timely and reliable for policy and program decision making. Most importantly, the workshop established a positive environment of mutual support with relief organizations, academia, donors and other institutions willing to work together so that technically sound standards are maintained in determining the health and nutritional status of populations in crisis. This will help save lives, and it will tell us if our consolidated efforts have had impact.

Further details available on the Tulane University website <http://www.payson.tulane.edu/hareults/>

SPHERE PROJECT. HANDBOOK REVISION

The Sphere Project is an initiative managed by four NGO networks (Steering Committee for Humanitarian Response, InterAction, VOICE and ICVA). Since the launching of the first edition of the Sphere handbook (2000), over 25,000 volumes have been sold and the handbook has been translated into 15 languages (eight spontaneously). This worldwide interest on behalf of national and international NGOs, the Red Cross/Red Crescent movement, governments, academics and UN agencies demands that the Sphere handbook be made as effective as possible. To this end, a revised edition of the handbook will be published in late 2003.

The UN's Inter-Agency Standing Committee has endorsed the book as an important tool for anyone working with populations affected by disaster and called on all IASC members (UN and NGO) to promote the use of the Humanitarian Charter and Minimum Standards in Disaster Response within their organisations, particularly in their field operations. Handbook feedback forms, the text of the first edition and additional information can be found at www.sphereproject.org. In Spring 2003, a draft of the revised text will be available on the website.

The revision's purposes are: to strengthen the link between the Humanitarian Charter and the Minimum Standards; to update the qualitative and quantitative indicators and guidance notes as needed; to address cross-cutting issues such as children, women, the elderly, disabled, HIV-AIDS, and the environment; to enhance linkages between sectors; to iron out inconsistencies, faults and important omissions from the first edition; and to eliminate repetitive text. In addition, as per an earlier commitment by the Sphere Management Committee, Minimum Standards relating to Food Security will be developed as part of this process.

Six Focal Points and the Sphere project office will undertake this work over one year. All Focal Points are committed to a broad-based consultative process with feedback and input from field-based users paramount and with an emphasis on consultation with the agencies that are regularly using the handbook in disaster response. Comments are encouraged from national and international NGOs, UN agencies, donor governments, governments where disaster response frequently takes place and academic institutions. Individuals from NGO and UN HQs as well as those from academic institutions will participate as reviewers to the revision.

To make sure that you and your agency's experience, insights and technical expertise inform the Sphere handbook revision, please either fill out a handbook feedback form (due September 30, 2002) and submit it to the project office or contact the relevant Focal Point listed below with any names, contacts, suggestions, recommendations or comments.

Water and Sanitation: Andy Bastable, Oxfam GB
(abastable@oxfam.uk.org)
Nutrition: Anna Taylor, Save the Children UK
(a.taylor@scfuk.org.uk)
Food Aid: John Solomon, CARE USA
(jsolomon@care.org)

Shelter & Site: Graham Saunders, Catholic Relief Services (graham.saunders@crsbh.ba)
Health Services: Rick Brennan, International Rescue Committee (brennan@their.org)
Food Security: Helen Young, Tufts University.
(Helen.young@tufts.edu)

TRAINING COURSES AND ANNOUNCEMENTS

As part of its Short Course Series, the Regional Centre for Quality of Health Care (RCQHC), Institute of Public Health, Makerere University, Uganda will be offering courses on **i) Foundations in Facilitative Supervision in Maternal and Neonatal Health** at Jadini Hotel, Mombasa, Kenya between 30th September and 4th October 2002 and **ii) Quality of Health Care** in Jinja, Uganda between 11th and 22nd November 2002. The courses target both senior and middle level health personnel working in governments, inter-governmental agencies, INGOs, UN and private sector participants who will be able to translate the practical skills acquired during the training to improve the quality health service provision in their programmes. Application form is available electronically. For more details, contact Ms. Sheila Magero, Programme Coordinator at Email: mail@rcqhc.org

The Feinstein International Famine Center at Tufts University, is offering a two weeks intensive course in Dubai, United Arab Emirates, from December 8 – 21, 2002, entitled **Saving Lives and Livelihoods: Managing Fundamental Interventions in Complex Emergencies**. The course focuses on Nutrition, Public Health and Community-based Animal Health Interventions in complex emergencies. For more details contact: Estrella Alves at Email: estrella.alves@tufts.edu or <http://www.famine.tufts.edu>

WEBSITES

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

ReliefWeb. <http://www.reliefweb.int/w/Rwb.nsf/vLCE/Somalia?OpenDocument&StartKey=Somalia&Expandview>
UN Somalia Website. http://www.unsomalia.org/FSAU/nutrition_updates

RECENT REPORTS

- ☞ **Monthly Food Security Report for Somalia, FSAU.**
- ☞ **Greater Horn of Africa Food Security Bulletin.** Issue No. 4. August 22, 2002. FEWS NET/LEWS/RCMRD/USGS
- ☞ **Greater Horn of Africa Food Security Update.** August 7, 2002. FEWS NET and CARE.
- ☞ **Deteriorating Food Security in the Sool Plateau.** August 21, 2002. FEWS NET.
- ☞ **Kenya Vulnerability Update.** September 12, 2002. FEWS NET and WFP.
- ☞ **Kenya Food Security Update.** September 9, 2002. FEWS NET and WFP
- ☞ **Food Utilisation Study.** The report on this study will be available before the end of September. A summary will be presented in the next Nutrition Update. For copies of the full report, please contact FSAU at the addresses below.



Physical address: Peponi Plaza, (Block C), Peponi Road, Westlands, Nairobi.
Postal address: PO Box 1230, Village Market, Nairobi
Telephone: +254-2-3741299, 3745734, 3748297. Fax: 3740598
General email: fsaainfo@fsau.or.ke
Comments and information related to nutrition: Noreen.Prendiville@fsau.or.ke