



Food Security  
Assessment Unit

# NUTRITION UPDATE



Food and Agriculture  
Organization of the  
United Nations

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## OVERVIEW

This issue offers a special focus on Bay and Bakool Regions coinciding with the completion of the deyr crop harvest assessment and a review of other major issues related to nutrition in both regions. It is hoped that the detailed description of the current situation at district level will provide partners with some of the information required to guide the design and targeting of interventions in the coming months. The report highlights the fact that although the harvest has been good in general, many pockets can be identified where inadequate rainfall has led to crop failure, poor pasture and inadequate water resources for domestic use. Targeted food distribution continues in seven districts, with many vulnerable households benefiting from the interventions. Levels of malnutrition remain high and organisations will soon need to question the appropriateness of continuing with emergency interventions.

In Gedo Region, insecurity continues to present challenges to organisations aiming to address the current food insecurity. Despite the challenges, both general ration and selective feeding programmes are now in place in the most critically affected districts.

The voluntary repatriation of refugees from Ethiopia to Somaliland has continued and organisations are setting projects in place to assist in the reintegration process, re-establish livelihoods and support the infrastructure required to provide basic services. The returnees, who have been reliant on free food aid and other services in camps for over a decade, now face enormous challenges in the establishment of self-reliance. Whether settling among other urban poor in towns or in special settlements outside the major towns these returnees constitute a highly vulnerable group.

Nutrition Update is compiled and produced by FSAU with much of the data provided by partners in Somalia. We acknowledge and appreciate this collaboration. With the ultimate objective of improving the nutritional status and general welfare of the population in Somalia, we would like to take the opportunity once again to invite partners to contribute comments or articles for inclusion in the Nutrition Update.

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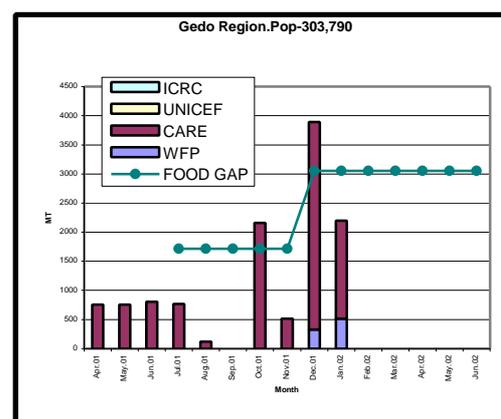
*In next month's issue: Update on neighbouring areas in Kenya and Ethiopia*

## GEDO REGION – UPDATE ON INTERVENTIONS

In Gedo Region, insecurity has once again presented enormous challenges to humanitarian organisations attempting to establish an appropriate response to the critical situation that was highlighted in December 2001. Threats to the personal security of health professionals, a carjacking and the outbreak of serious conflict have occurred during the past month.

With the population currently highly dependant on food aid, both CARE and WFP have continued to deliver cereals, pulses and oil and have undertaken post-distribution monitoring which appears to indicate good coverage and use of the food. The targeting of female household heads is also though to be enabling more efficient distribution. A summary of quantities delivered in the region is shown on the right and details at district level are also available.

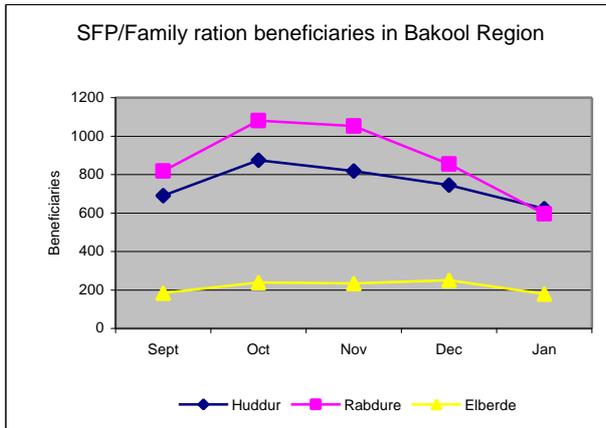
Supplementary feeding with health services and immunisation has now been established in Belet Hawa, Dolo, Garbaharey and Burdhubo districts, implemented by Gedo Health Consortium (Trocaire, Cordaid and AMREF) with support from UNICEF and other partners. Decentralised services are also being expanded in these four districts. The therapeutic feeding centre in Belet Hawa is treating the severely malnourished, with a total of 23 children under five in care on 15<sup>th</sup> February.



In Luuq and EIBon, ACF continues supplementary feeding and maintains the therapeutic feeding centre in Luuq town. During January, the TFC admitted 169 severely malnourished individuals bring the total under care to 217. With the admission of 1529 children to the supplementary feeding programme, the total in the programme stood at 4907. The Somali Red Crescent Society operates a supplementary feeding programme through the MCH centre in EIWak. A detailed analysis of selective feeding programmes in Gedo will be presented in the March Nutrition Update. Both UNICEF and ICRC are involved in interventions in the water sector and a number of organisations are planning more sustainable food security interventions in the near future.

**EMERGENCY NUTRITION INTERVENTIONS CONTINUE IN BAY AND BAKOOL REGIONS**  
*James Kingori, FSAU*

In Bakool Region, UNICEF and WFP in collaboration with IMC continue with the supplementary feeding/ family ration



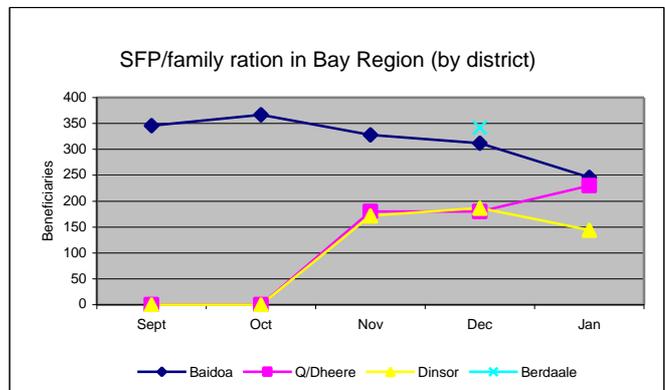
distribution through the MCH and in the outreach clinics in Rabdure, Huddur and Elberde Districts. In Huddur, the operations are carried out at the MCH, and at Abaqbeday and Abal outreach clinics, while in Rabdure, it is carried out at Rabdure MCH, as well as in Isdhowrt and Bodan outreach clinics. MSF supports therapeutic feeding in Hoddur Hospital.

In Bay Region, WFP and UNICEF operate in partnership with IMC in Dinsor while the Somali Red Crescent Society and DMO operate in Qansax Dheere and Baidoa respectively. In Berdaale, no distribution was conducted in January following the community's failure to guarantee safety for food storage facilities.

In addition to the family ration/supplementary food distribution, systematic treatment of the malnourished and immunization for mothers and children as well as health education is done. The

ration distributed consists of 50kg of maize, 10kg of pulses and 3.6kg of oil per family per month, irrespective of the family size plus 10kg of blended food (unimix) for the malnourished child per month. Food preparation demonstrations are also carried out in most of the sites.

During the five months of the programmes operation, the numbers of beneficiaries have been relatively high but with a noticeable decline from the month of November through January, except for Qansax Dheere District in Bay Region. The general decline in the number of beneficiaries has been attributed to the fact that numbers discharged after recovery outnumber those admitted, an outcome that is assumed to be associated with the comprehensive intervention over the past five months. The application of more stringent supervision during food distribution and the introduction in January of a cut-off point related to height rather than reported age has also caused some reduction in numbers. When crop harvest reports are fully analysed, the pockets of vulnerability will be identified and the design of appropriate nutrition related interventions will be discussed.



**UPDATE ON BAKOOL** *James Kingori, FSAU*

Most households in Bakool Region are agro-pastoralist and Bakool Region traditionally contributes only about 2% of the total annual cereal production in Somalia. As the end of the Deyr cropping season approaches some pockets within Bakool Region have poor harvest results. Some pastoral households' members have already started moving in search of water or pastures or both. This is not a good sign particularly at this early stage when the Jilaal (dry season) is setting in. The region has also been a transit zone for animals from Gedo and Barey (Ethiopia) areas. In view of the food insecurity that prevailed before the deyr season and the high malnutrition recorded, the population remains in relatively poor condition.

**El Berde.** Reduced pasture availability has triggered normal livestock movements to near Shabele River tributaries in Ethiopia, (particularly the cattle), and towards the better pastures in the Qarin area (zone between Huddur and El Berde Districts). Although some lactating animals remain behind with household members, there is a slight reduction in milk availability in the main villages and town. Accessibility to water for domestic use has improved in areas where ADRA has sponsored water projects<sup>1</sup>. Most of the malnourished children found in the district are reported to have health related problems with diarrhoea, kala'azar and malaria being conspicuously prevalent.

**Huddur.** Some areas in the South-Eastern part of the district<sup>2</sup> have poor prospects for harvest. The maize growing Waney area had a poor crop performance but the sorghum crop between Huddur and Ceel Garas is good. There is significant reduction in pasture availability and the animals are currently feeding on fodder from crop harvest and/or uprooted immature crop. Water is still available in the shallow wells and the *muscid*s<sup>3</sup>. A slight decline in cereal prices (sorghum 85000Ssh/50kg in the last week of January 2002 down from 120,000Ssh in November/December 2001) has already been recorded. Milk prices have not changed (2500Ssh per litre). However, despite the relatively stable food security situation, water availability, and the ongoing interventions, cases of malnutrition continue to be recorded. About 54% of 761 children

<sup>1</sup> El Berde town, Sal-kudobley, Qurac-jome, Ceel Magad and Abesale

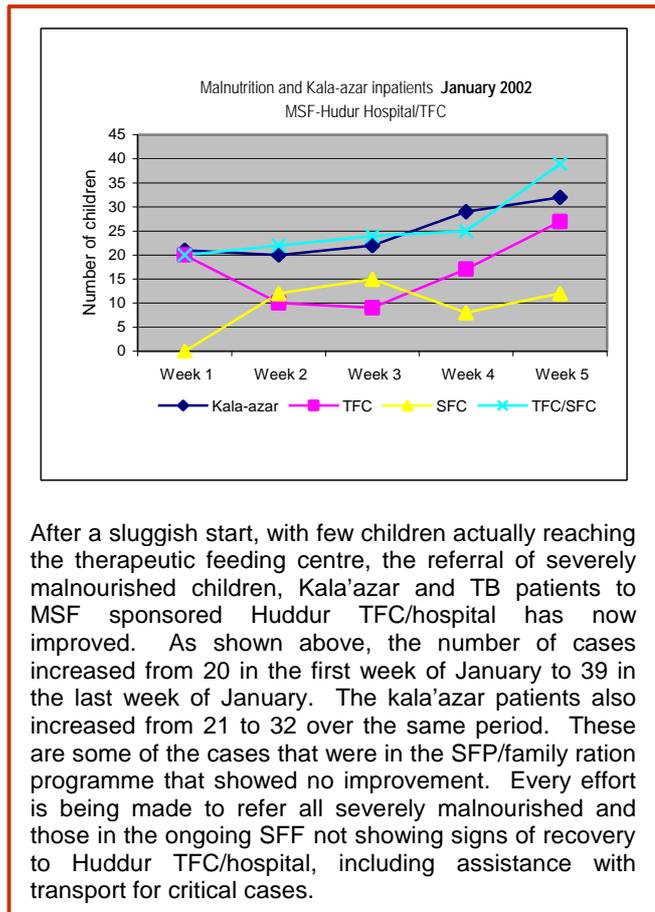
<sup>2</sup> Abal, Unkamade, Sarman, Etkiyal and Korkor villages

<sup>3</sup> Manmade underground water reservoir with a narrow neck

screened at the Huddur MCH were malnourished in December 2001. Most of the children in the targeted feeding programme reflect recovery in their growth monitoring cards.

**Rabdure (70% agropastoralist).** Except for few pockets in the districts (Bodan and Hishilow areas) much of the crop never reached maturation and has been used as fodder. The villages of Quracle, Boco and Isdhowrt received low rainfall and poor crop harvest is expected while the northern part of the district (Yed, Rabdure town and Ato area) had no rains. No pasture is available in the northern part and consequently no livestock are currently in the zone. Most parts of the district are experiencing water shortage and livestock is moving or has moved towards Garaswein (part of Qarin zone) and Wajid District for pasture and water. Diarrhoeal diseases and ARI are quite prevalent in the district.

**Tayeglow. (80% agropastoralist)** The crop performance in the sorghum and maize growing belt between Ceel Garas and Tayeglow was slightly below normal while the agro-pastoral farmers in satellite villages of Tayeglow and Biyooley<sup>4</sup>, have had little or no deyr harvest. Camels have moved to the Baidoa-Burhakaba border areas, while the cattle and shoats are within the district feeding on the sorghum plants (uprooted before maturity) plus the little pasture available. The movement of camels, which started towards the end of December 2001 triggered by the reduced quality of pastures, have resulted in reduced milk availability and slight increase in milk prices. The non-functional boreholes in Biyooley and Ceel Garas villages of Tayeglow are adding to the problem of water shortage. Chlorination is not being carried out in the district. The increased vulnerability of the population in Tayeglow is reflected in the high levels of malnutrition at the Tayeglow MCH (45% of 173 in December 2001 and 49% of 196 in January 2002) and in Biyooley MCH (54% of 131 in January 2002). Malaria and acute respiratory tract infection were reported as the most common diseases in Tayeglow and Biyooley MCH. No immunization services are taking place due to lack of cold chain in the district.



After a sluggish start, with few children actually reaching the therapeutic feeding centre, the referral of severely malnourished children, Kala'azar and TB patients to MSF sponsored Huddur TFC/hospital has now improved. As shown above, the number of cases increased from 20 in the first week of January to 39 in the last week of January. The kala'azar patients also increased from 21 to 32 over the same period. These are some of the cases that were in the SFP/family ration programme that showed no improvement. Every effort is being made to refer all severely malnourished and those in the ongoing SFF not showing signs of recovery to Huddur TFC/hospital, including assistance with transport for critical cases.

**Waajid. (90% agropastoralist).** The Dhaah high potential area<sup>5</sup> has had a good deyr harvest unlike the neighbouring Madyato area<sup>6</sup> immediately to the northeast where production has been poor. Water and fodder is available currently though under great pressure as some livestock from other areas (Rabdure, Gedo and Barey, Ethiopia) have moved into the district or are transiting through. Some livestock are getting closer to Baidoa District in Bay due to bountiful fodder availability. The Elbon area did not receive good deyr rains resulting in a poor crop performance and little pasture. In Waajid, water has not been chlorinated for the past year implying possible compromised quality. Health services are

currently available, through the World Vision Somali PHC programme, in most parts of the district and both nutrition and disease surveillance are being carried out. Some residents of Waajid travel to Rabdure to register in the SFP/family ration programme there. Some Gobato residents had recently arrived (in January) from Luuq where they had gone to look for food.

Villages	<11.0cm (Severe)	>=11.0/ <12.5cm (Moderate)	>=12.5/ <13.5cm (At risk)	>=13.5cm (Normal)	Total
Burdhunle	3 (2%)	20 (15%)	45 (33%)	67 (50%)	135 (100%)
Gobato	0	18 (22%)	32 (39%)	33 (40%)	83 (100%)
Total	3 (1.4%)	38 (17.4%)	77 (35%)	100 (46%)	218 (100%)

A rapid assessment, using MUAC, was carried out by FSAU on Feb 2<sup>nd</sup> 2002 to include all under-five children found at that time in the villages of Burdhunle and Gobato villages in Waajid district. Both villages are situated in high potential agro-pastoral areas. The results indicate that about 19% of the children were acutely malnourished (MUAC <12.5cm) and a further 35% were at risk of malnutrition. No case of oedema was identified.

<sup>4</sup> Hupti, Burgabo, Wasilo, Gaboy, Looar, Oorar, Hawaal-kari, Abag-dheere, Deresin, Hurwani

<sup>5</sup> Gubato, Gurbaste, Bilcan and Gadgasmas villages

<sup>6</sup> Burdhunle, Wandujire, Tulodolo and Garsale villages

**UPDATE ON BAY REGION**

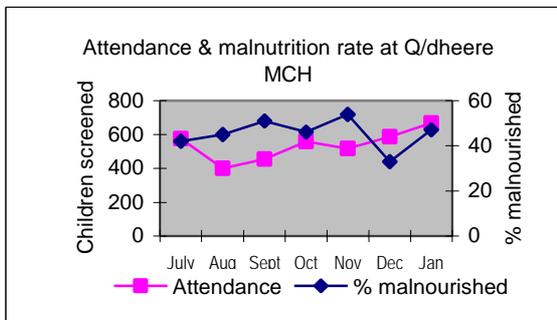
J. King'ori, FSAU

Although the food availability is improving in the district following the generally good deyr harvest, there are as usual some pockets where the prospects are not good. This has triggered some population and livestock movement within the region with Baidoa District attracting many during the earlier part of February prior to the deterioration in the security situation. The region is also hosting people and livestock from Gedo thus creating added pressure on water and pasture but improving the availability of milk.

**Berdaale District:** Within the district a number of pockets faced problems with deteriorating food availability and access in the coming months following poor crop performance (total failure) for two consecutive seasons. These areas include Gel-Gel zone in the south-west of the district and other easily identified areas<sup>7</sup>. Good crop performance was recorded in the eastern part of the district<sup>8</sup>. Milk scarcity in Berdaale has resulted in price escalation from 2000Ssh (October) to 7000Ssh (Jan/Feb) per litre. Water scarcity and increasing salinity in the shallow wells is also affecting both safety and palatability. Some of the coping strategies employed by the affected households include family splitting and begging. Many young male household members in the vulnerable areas are moving eastward toward Ufurow in Qansax Dheere.

Generally, the malnutrition rate among children screened at SRCS-Berdaale MCH is high though there was a significant decline between December 2001 (40% of 208) and January 2002 (22% of 263). This could in part be related to the decrease in the proportion of children with illnesses such as malaria and diarrhoea.

**Qansax Dheere District.** The district MCH continues to record high proportions of malnutrition among children screened (over 40% since July with the exception of December). This is highly attributed to the after *Gu* drought effect, compromised childcare, lack of health education among primary care takers in the villages as well as the continued high disease prevalence, particularly diarrhoea, malaria, ARI and worm infestation as reported by SRCS health facility. The monthly attendance has been high throughout (over 400 per month) due to the ongoing SFP at the MCH. Significant number of children screened came from Qansax Dheere town and the villages of Mayo, Beled Amin, Tirka, Sangadle, Durey and Bulo Gomar and almost all children brought to the MCH had a health problem. Hawar Barbar and Harsi villages are some of the vulnerable sites with poor crop harvest prospects. The district is hosting some livestock from Berdaale.



**Baidoa District.** The district received good deyr rains which led to good crop results. Milk availability has been stable throughout the deyr season and the prices are relatively low. The pasture/fodder

and water availability in the district has attracted livestock from different areas namely districts within Bay, Bakool, Gedo and Barey (Ethiopia). Cereal prices reduced before the deyr harvest. Only the Shabelow zone is vulnerable to possible food insecurity as the crop harvest has been poor. An improvement in nutritional status has been noted with a decline in levels of malnutrition at the MCH. Except in Baidoa DMO (SFP/family ration distribution done), where malnutrition rate are relatively high (39% of 337 in December and 36% of 330 in January 2002), the other MCH centres in Baidoa reflected low levels in January 2002 (11% of 171 in Isha, 7.5% of 265 in IMC Baidoa and 2.2% of 223 in Howlwadaag). Diarrhoea, malaria, ARI and intestinal worms continue to affect the children thus predisposing them to malnutrition. IMC Baidoa reported measles cases in Hagarka zone (Ceelcabdi, Jefaaye, Bulokadaf, Eri roog, Miidow villages) over the month of January 2002.

**Bur Hakaba District.** The eastern part of the district<sup>9</sup> received poor rains and deyr harvests do not look promising. Other parts of the district have prospects for good harvest. The pastures are currently available though under great pressure, with the influx of livestock mainly from Tayeglow District. Bur Hakaba town is currently experiencing water shortage but UNICEF has taken some emergency response measures of water trucking, hence the urban population can buy water at fair rates. Nutrition surveillance data from Bur Hakaba MCH indicate that about 24% of 147, 26.4% of 340 and 24.4% of 299 were malnourished in October, November and December 2001 respectively. In the same respective months, significant increase in disease incidences was noted, for example; suspected malaria 28, 68 and 103, diarrhoea 23, 110 and 158, and ARI 17, 92 and 75 among the under fives. In November, UNICEF team supplied 700 bed nets in a bid to combat malaria and by December over 1000 nets had been supplied. Demonstrations for preparation of locally available foods continue at the MCH twice a month.

**Dinsor:** Normal deyr crop production is expected in most parts of the district though not uniform. Tulo Hosle and Rahole areas, in particular, have relatively good prospects but there is pressure on the water resources. Possibility of pasture/fodder and water shortage is imminent with the flowing in of a few livestock from Middle Juba (originally from Gedo). In the Juba valley, pressure on pasture and water has reached high level and livestock are starting to concentrate along the riverine. Currently water is available from the catchments and *muscid*s in Dinsor and the livestock condition is normal. The area has had declining food for work projects mainly due to insecurity. According to the MCH data, high malnutrition levels continue to be reported, for example, about 40% of 800 and about 55% of 400 were malnourished in October and

<sup>7</sup> Koromaley, Bulahawa, Golool, Gulidho, Bulo lidow, Bula Amin, Isaaq Moalim and Tooswein villages. Koni, Baygadud and Borama, Moorawaraabe, Bagey and Agaay.

<sup>8</sup> Boday, Sariirto and Adabley villages

<sup>9</sup> Wafdhay, Waamo, and Amayow villages

November respectively. The high malnutrition led to the addition of family rations by WFP to the supplementary feeding programme in November. In November, 170 families received rations, with the number increasing to 187 in December and decreasing again to 144 in January 2002.

Generally the food security situation in Bay Region shows great improvement. However, the vulnerable pockets need attention and consideration, as they seem to have suffered several consecutive food insecurity and water shortage bouts.

### LUGHAYA, AWDAL REGION, SOMALILAND

B. Owadi, FSAU

The livelihoods of the populations in Lughaya have been greatly jeopardised by a series of negative influences. The global malnutrition rate soared up to unacceptably high levels of 27%<sup>10</sup> according to the November 2001 UNICEF nutrition survey report. As at February 2002, the livestock ban continues and the trade avenues between Djibouti and Somaliland are still constrained. Milk availability is still below normal and inaccessible for many. Basic food prices continue to increase and the availability of a commonly used and popular wild fruit, *kulan*, is limited. Water availability remains a problem in most parts of the coastal belt. Dirty water is shared with animals and the prevalence of water related diseases is high as reported by Lughaya MCH. The access to and coverage of health services, both curative and preventative, is also extremely limited with one centrally located health facility in a sparsely populated area. Prevalence of diseases like respiratory infections and malaria are also reported to be high. The welfare of the community was so compromised that a local name, "qaboojiye" (meaning the food cooled down the hunger) was coined for WFP relief food in November – December 2001.

Organisations operating in Somaliland have engaged in discussions regarding the most appropriate interventions for the population in this sparsely populated area. Reaching the vulnerable groups with targeted interventions is a challenge in an area where people are reluctant to seek professional health even when very ill.

- WFP provided general food rations to 6,166 households in Zeila and Lughaya November and December 2001. The distribution covered all the major villages of the districts. A total of 215 MT was distributed in Zeila and Lughaya districts. Lughaya District received a total of 91.6MT, with each of the 2,934 households that benefited receiving an average of 25kg of maize in addition to vegetable oil. About 90% of the recipients were women. In addition to distribution in the two Districts, Berbera also benefited from food distribution during the period.
- UNICEF has made high-energy biscuits (BP5) available to target all malnourished children (<5s) in the two districts. Distribution begins in the third week of February in all the settlement areas of the districts on monthly basis for an initial period of 3-4 months but with a possibility of extension should the Gu rains come late. The distribution will be done through mobile clinics that will cover all the villages in the two districts and will also provide basic health services and immunisation services.

### RETURNEES IN BURAO, SOMALILAND

B. Owadi, FSAU with contributions from UNHCR

The relative peace in Somaliland in the last five years has encouraged the return of thousands of Somalis who had sought asylum in foreign countries as refugees following the wars in the country since 1988. Since February 1997 to date, the United Nations High Commission for Refugees (UNHCR) has assisted the voluntary repatriation of an estimated 170,000 refugees back to Somaliland, mainly from Ethiopia. A further estimated 60,000 refugees still live in Eastern Ethiopia's refugee camps, of which 35,000 are expected to voluntarily repatriate with the assistance of UNHCR by the end of this year. The returnees mainly settle in and around the state's major towns of Hargeisa, Burao and Borama.

By mid December 2001, as part of the on-going repatriation programme, UNHCR had supported the voluntary repatriation of about 6,000 individuals (approx. 1,300 families) to Burao mainly from Daror refugee camp in eastern Ethiopia. This group had stayed in the camps since 1988. On their return, UNHCR provided them with a package consisting of 150kg of wheat, 5 litres of oil, and 1.4kg of sugar per person. This package was estimated to provide a caloric intake of 2,265 Kcal/person/day for the next nine months. They were also provided with a blanket, and 330 Ethiopian Birr per person (approximately US\$38) in addition to a 20-litre jerry can and a plastic sheet per family. A further estimated 600 families had also returned spontaneously to Burao from Dulcad and Ramaso villages in eastern Ethiopia without being assisted through the UNHCR organised voluntary repatriation programme, making a total of around 1,900 families.

Although the return home is welcomed, it has placed additional stress on the town's fragile war-torn infrastructure. The local authority lacks the institutional capacity and financial resources needed to address the physical, social and economic needs of its own citizens, even before the arrival of the returnees. Burao Municipality settled these returnees some 8-10 km from Burao town in an area with no existing infrastructure. With the support of UNHCR the authorities will construct 30 community latrines in the settlement area and water needs will be addressed using the findings of a water needs assessment undertaken by OXFAM. Currently, UNHCR and the Municipality supplies water on daily basis filling six tanks erected in the settlement area and limiting family usage to less than 20 litres per day. UNHCR has also erected a structure for basic medical care, which remains ill equipped to address the health needs of the people. No school exists within the area. The returnees walk at least 8km to reach the nearest market centre in Burao and prices of basic commodities are subsequently higher in the returnee village when compared to town. For instance, while milk, a basic protein source, is sold at SomShs 6000/litre in Burao market and at SomShs 7,000 in the new settlement area. UNHCR and UNDP are now in the process of formulating a comprehensive inter-agency action plan for returnee reintegration in Somaliland.

<sup>10</sup> The survey results indicated a global acute malnutrition rate (weight for height Z-score <-2 or oedema) of 27%, and severe acute malnutrition (weight for height <-3 Z-score or oedema) of 3%.

**Rapid Nutrition Assessment among returnees in Burao, Somaliland**

	<11 cm (severe)	<12.5/≥11 cm (moderate)	<13.5/≥12.5 cm (At risk)	≥13.5 cm (Normal)	TOTAL
Males	2 (2%)	7 (8%)	11 (12%)	73 (78%)	93 (49%)
Females	2 (2%)	6 (6%)	13 (13%)	76 (78%)	97 (51%)
TOTAL	4 (2%)	13 (7%)	24 (13%)	149 (78%)	190 (100%)

**MUAC screening in Burao returnee population.**

On 13<sup>th</sup> February, FSAU in collaboration with Ministry of Health and Labour (MOHL) Regional office conducted a rapid nutritional assessment using MUAC to assess the nutritional status of the returnee population, during which 190 children below five years were randomly assessed. The MUAC data was supplemented by qualitative information collected at the time of assessment.

As shown in the table, the assessment result indicates a total acute malnutrition rate of about 9% with no cases of oedema while severe malnutrition rate was 2%. The proportion of children at risk of malnutrition was 11%. Morbidity data from the health structure within the settlement area indicates respiratory infections, diarrhoea and malaria as the most common diseases amongst both adults and children in the settlement. The returnees are attributing the prevalence of these diseases to cold nights in their makeshift huts, inadequate water for household use and lack proper medication when sick. The malnutrition rate and additional data suggests that the population probably have an adequate supply of food at the moment but inadequate water and health services are likely to be contributing to the 9% rate. This population has been dependant on free food distribution for over a decade and most have no means of livelihood in their new settlement. With an uncertainty about future food availability in an environment of inadequate health and water services, nutritional status is very likely to deteriorate in the near future.

As already stated, this population has recently received a nine month food ration in addition to some good will donations by the locals. When returning, most families sold part of the ration either for purchase of non-food items or in the hope of buying again once they reach their destination. While the ration was selling at Som.Shs 100,000/50kg of wheat grain in Ethiopia, the same quantity of ration is currently selling at Som.Shs180,000 in Burao market making it impossible for the returnees to replace the quantity of food that was sold. Consequently, some families report having finished the rations while others remain with a limited quantity. In late January 2002, Islamic Relief Agency, a local NGO in the region, distributed 25Kg of rice, 1.5kg of oil and 12.5kg of sugar to all families. It is further reported that 25-35% of the returnees have left their young children and mothers behind though the implications of

this action are not clear. It is also significant to note that these people returned with virtually nothing except the repatriation package and many have little social support or access to remittance.

The returnees are expressing disappointment with the situation and those who have left their families behind are not planning to bring them back to Somaliland soon. Some reported contemplating alternative settlement areas while not ruling out the possibility of going back. Others expressed having started viable livelihood sources like small businesses in the camps in Ethiopia but not yet managing to re-establish their businesses on return. Both income and employment opportunities continue to be dampened by low economic activities that have accompanied the 'livestock ban'.

With the continued economic depression within the country, it appears these people will have difficulty in surviving in the near future. Consequently, assistance in the provision of basic needs including water, shelter, health services, access to land, income generating opportunities and educational facilities will continue to be necessary. Meanwhile, constant monitoring of the food security and nutritional status of this population is necessary.

**MENINGITIS VACCINATION UNDERTAKEN IN HARGEISA**

During the recent meningitis vaccination campaign in Hargeisa, 192,000 people between the ages of 2 and 40 were vaccinated. The number of new cases of meningitis is decreasing and surveillance will continue.

**NUTRITION SURVEY DATABASE ESTABLISHED IN ETHIOPIA**

The Emergency Nutrition Coordination Unit (ENCU) has been established in the Early Warning Department of the Disaster Prevention and Preparedness Commission in Addis Ababa, Ethiopia and it's objective is to facilitate the use of good quality nutrition and nutrition-related information to enable the rational use of food aid and other resources in emergency affected areas. The unit has established a database of nutrition surveys in Ethiopia, is involved in the development of guidelines on nutrition related issues and is also developing the capacity of the unit at regional level. For further details, contact the information manager: [amir.siraj@wfp.org](mailto:amir.siraj@wfp.org).

**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>  
 The UN Somalia website is currently being reactivated. Details will be provided in the next issue.

	Physical address: Peponi Plaza, (Block C), Peponi Road, Westlands, Nairobi. Postal address: PO Box 1230, Village Market, Nairobi Telephone: +254-2-741299, 745734, 748297. Fax: 740598 General email: <a href="mailto:fsauiinfo@fsau.or.ke">fsauiinfo@fsau.or.ke</a> Comments and information related to nutrition: <a href="mailto:Noreen.Prendiville@fsau.or.ke">Noreen.Prendiville@fsau.or.ke</a>
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