



**Food Security and Nutrition
Analysis Unit Somalia**

Information for Better Livelihoods



Post Gu 2012

Presentation

August 21st, 2012

Overall Nutrition Situation/Key Highlights

Nutrition Situation Vetting Meeting

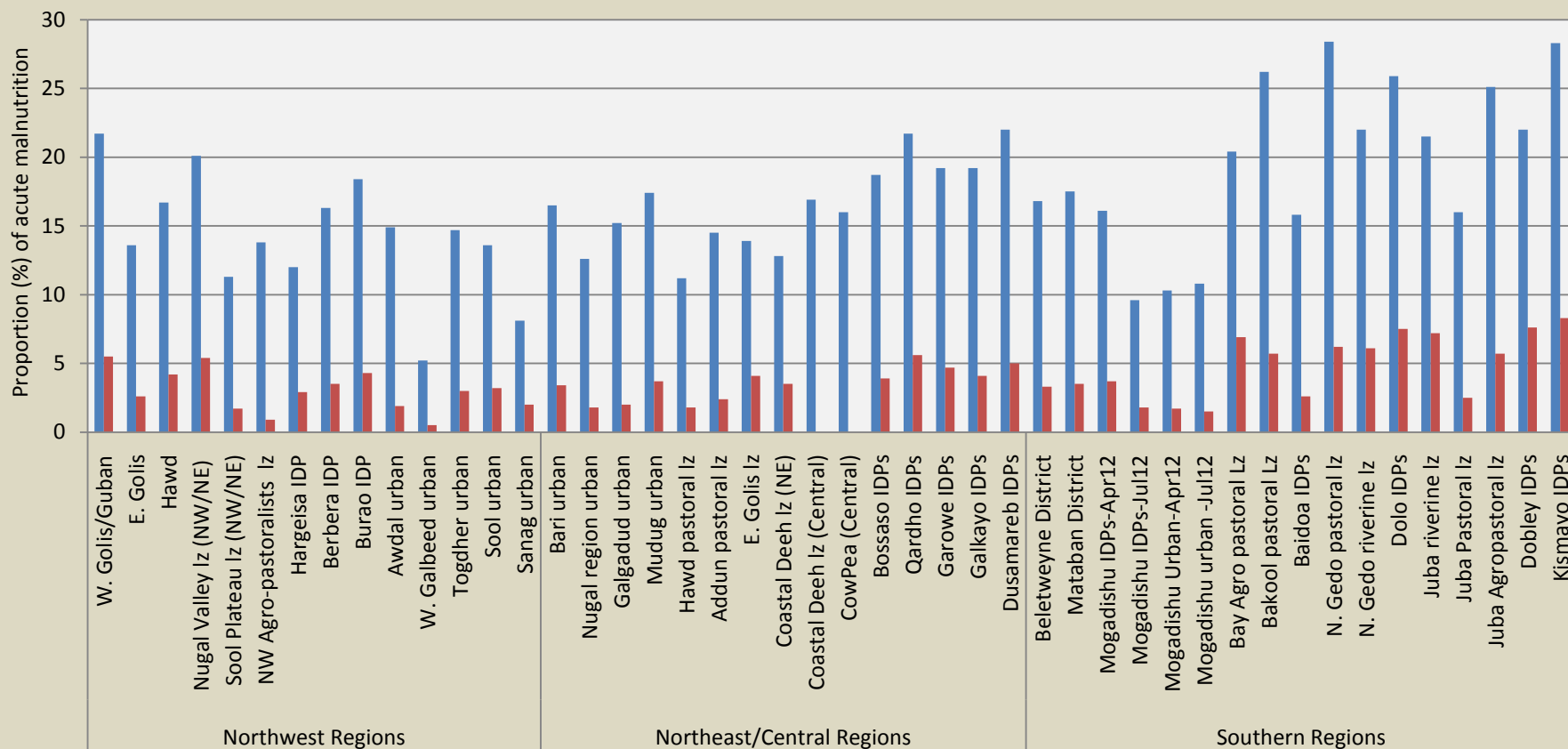


Nutrition Information Sources

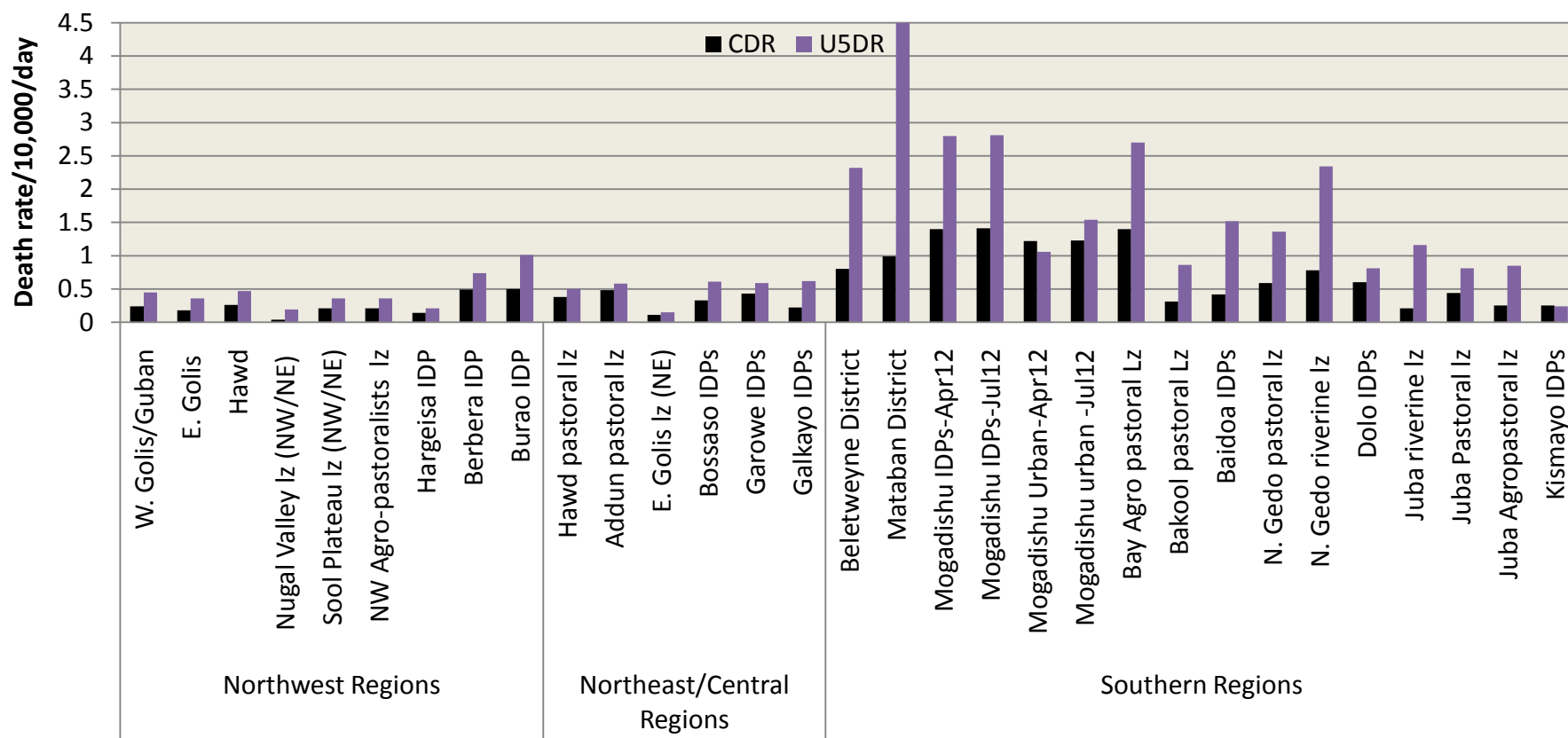
Gu (April-July) 2012

- ❑ **Nutrition Surveys (based on WHZ, WHO):** 46 detailed nutrition surveys conducted to establish the situation in the Gu 2012. (44 were large samples, while 2 were small samples).
 - 16 in the Southern populations (2 in Mogadishu Town, 2 in Mogadishu IDPs, 1 in Baidao IDPs, 1 in Kismayu IDPs, 1 in Dhobley IDPs, 3 in Juba, 1 in Bay, 1 in Bakool, 2 in North Gedo, 1 in Beletweyne and 1 in Mataban Districts)
 - 4 in Central rural LZ (Hawd, Addun, Cowpea belt, Coastal Deeh)
 - 10 in northwest and northeast rural livelihood zones
 - 8 in NW/NE/Central IDP populations (Hargeisa, Berbera, Burao, Galkayo, Bossaso, Garowe, Qardho, Dusamareb).
 - 8 urban LZ surveys in N/C (5 in NW & 3 in NE).
- ❑ **Health Center Monitoring (HIS):** Collected from 130 health facilities in accessible regions in the period January-July 2012. (48 in NW, 29 in NE, 13 in Central, 7 in Gedo, 8 in Juba, 7 in Bay, 3 in Bakool, 9 in Shabelle/Mogadishu, 6 in Hiran)
- ❑ **Related Selective Feeding Centre Data:** obtained from UNICEF, WFP and partner agencies
- ❑ **Secondary Related Data (risk factors for deterioration)**
 - **Disease outbreaks:** Suspected cholera and measles across the country
 - **Elevated cases of confirmed malaria** in Lower Juba. (Source-WHO & Somalia emergency weekly health updates, January-August 2012)
 - **Food security, displacements data.** (Source: FSNAU, OCHA and UNHCR bulletins).

Global, WHO GS, WHZ<-2z scores and/or Oedema, and Severe Acute Malnutrition, WHO GS, WHZ & <-3 and/or Oedema; *Gu* (April-July) 2012, SOMALIA

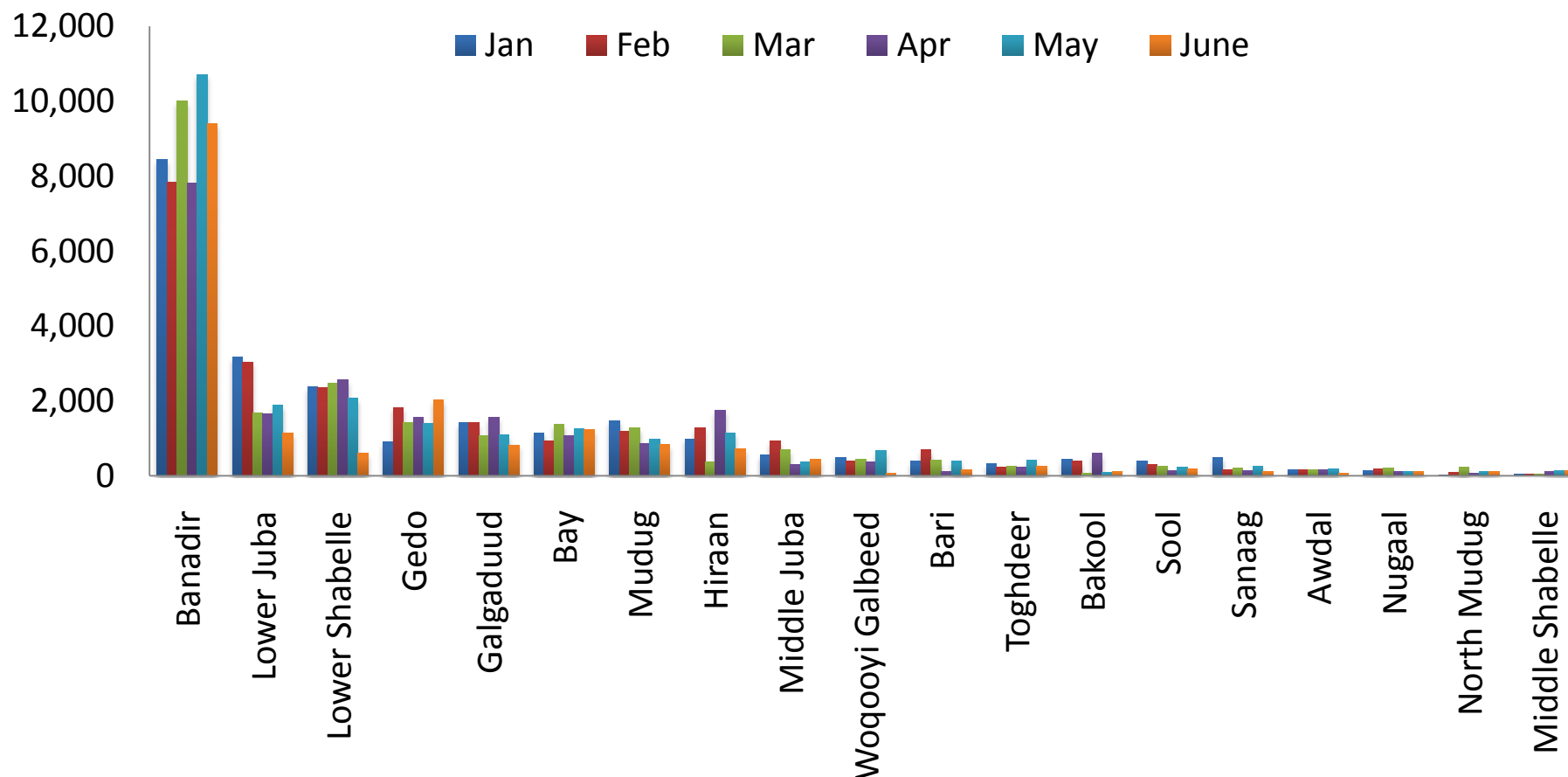


- South:** GAM between 20-29.9%, and SAM above 5% in most of the rural South, (except for J. pastoral, Beletweyne, Mataban, Mogadishu). This is consistent with Gu median rates 2008-2011.
- IDPs in the South:** GAM rates >20% except for **Mogadishu**: GAM is 9.6% (7.1-13.0) and SAM, 1.8% (1.0-3.2) from 30% in Dec'12 & 16.1% in April 2012; and **Baidoa** IDPs, GAM of 15.8% and SAM of 2.6%.
- North/Central:** GAM is above 20%, and SAM above 5% in W. Golis and Nugal Valley LZ; Qardho & Dusamareb IDPs. GAM is generally 15-19.9% in IDPs, and 10-14.9% in other population groups.



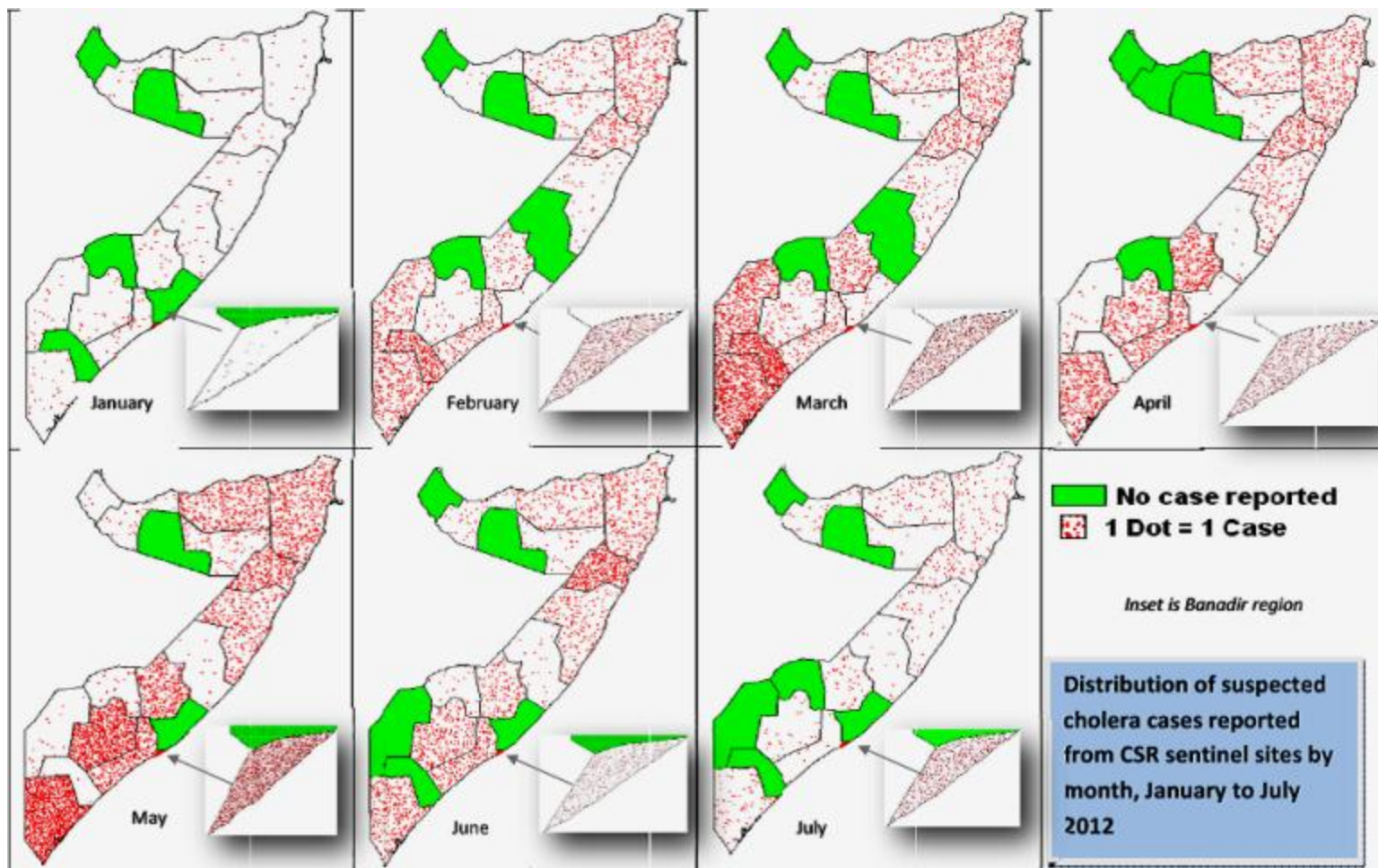
- North/Central:** CDR < 0.5, U5DR < 1 in all assessed population groups, indicating *acceptable* situation based on UNICEF 2005 classification. The CDR is consistent with the median rate for the north regions, 0.48, for 2007-2011. In Burao IDPs, CDR=0.5 indicating an *alert* situation.
- South:** CDR < 1.5 and U5DR < 4 (below emergency threshold of 2 & 4 respectively) in all assessed populations. The rates below 0.92, the median rate for South (2007-2011), except for Mataban District with U5DR of 4.5 per 10,000 per day (above emergency).

Admissions Trends (No.) at Feeding centers, by Zone Jan-June 2012 . (Source: UNICEF 2012)



High numbers (8000+ in Mogadishu) of monthly admissions into selective feeding programs across the country, mitigate

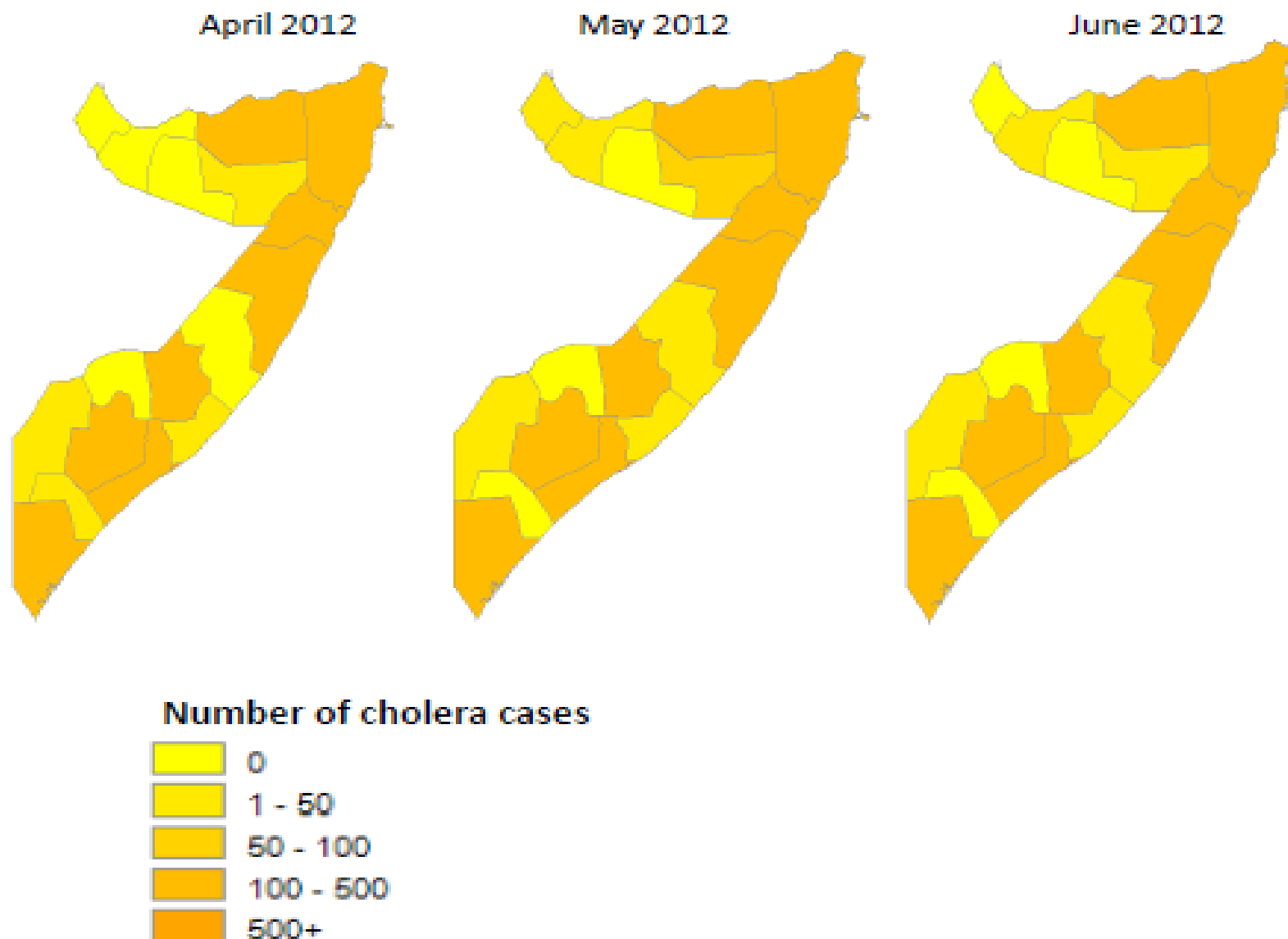
- acute malnutrition
- crude and the under five death rates



1. "Suspected measles cases continue to be reported across Somalia especially the South and Central zones where there is limited access to immunization services. Due to armed conflict affecting the southern regions, the current population movement in and out of Mogadishu city has resulted in continued transmission of the disease even in areas that had been targeted previously for immunization campaigns although registering low vaccination coverage".
2. "The number of reported suspected cholera cases continues to decrease significantly as we approach the end of the cholera transmission season (March to July)". (Source: WHO Somalia weekly health update, Aug 11-17).

For details, contact Dr. Anthony AJANGA ajangaa@nbo.emro.who.int or PieterDesloovere desloovere@nbo.emro.who.int

Monthly suspected cholera cases, (Source: WHO 2012)



Summary

South: Gedo, Juba, Bay, Bakool, Hiran, Shabelle

There are slight improvements in the south attributed both to:

- Access to humanitarian support. This includes nutrition, cash, food and non-food assistance; control and management of disease outbreaks by WHO/UNICEF and partners and other stakeholders.
- Access to cereal stocks from the Deyr'2011/12 harvest. Nevertheless the Gu 2012 harvests were generally below normal except in Shabelle regions which were above average.

Access to milk and milk products in the southern inland pastoralists of Juba, Gedo and Hiran.

In Bay and Juba, GAM rates show major change.

Bay region: GAM rate has decreased from famine level threshold of 30% in Jan 2012 to 20.4 (16.7-24.5);

Juba riverine: GAM rate has decreased from above famine level 34.5% (29.9-39.5) in Jan 2012 to 21.5 (18.8-24.5);

- GAM rates are below 30% across the south, and SAM < 10%. CDR now below 1.5/10000/day across the South.

North and central regions:

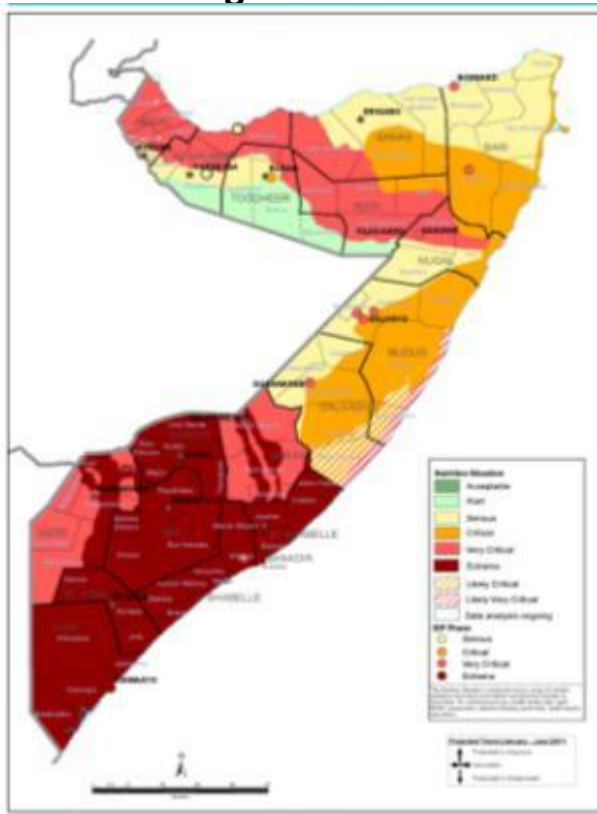
There are improvements in the Hawd and East Golis LZ of NE/Central mainly due to

- Access to milk and food following a favorable Gu'2012 season.
- Access to humanitarian support in terms of food assistance, control and management of disease outbreaks (suspected cholera, measles).

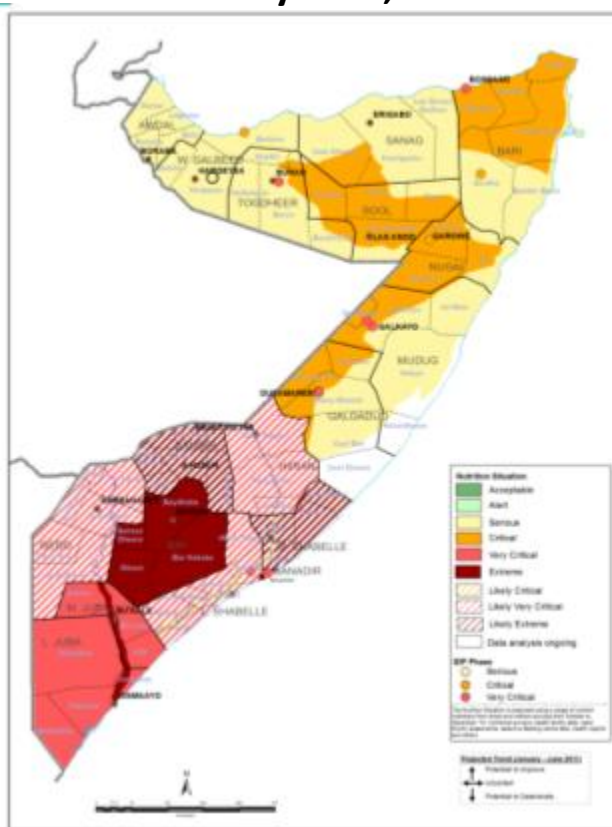
There are deteriorations in:

- West Golis/Guban from *Serious* to **Very Critical** mainly due to poor food security indicators (poor access to milk, income following outmigration of livestock); and limited access to humanitarian support in terms of family ration.
- Hawd of NW deteriorated from *Serious* to **Critical**, while Nugal Valley from *Critical* to **Very Critical** mainly due to increased morbidity and disease outbreaks in pockets of the LZ.
- IDPs remain vulnerable and are in **Critical – Very Critical** phases, except for Hargeisa IDPs in *Serious*.

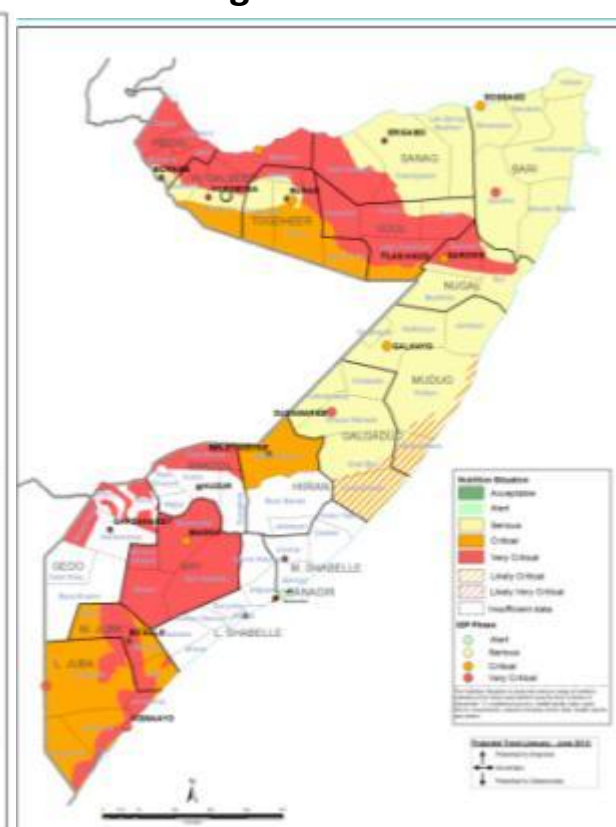
Nutrition Situation, August 2011



Nutrition Situation, January 24th, 2012



Nutrition Situation, August 2012



South: The nutrition situation shows improvements in the assessed areas, since Gu 2011, attributed to increased household access to food, cash and health support. Areas that were inaccessible during the Gu 2012 surveys are not classified but are likely *Very Critical*, except for Shabelle (likely *Critical*) based on median values for 2007-2011, and current humanitarian support.

North/Central: There are improvements in East Golis LZ of NE, and Hawd (NE/C) associated with favourable food security indicators.

IDPs: remain vulnerable, in *Critical* or *Very Critical* phase, except for Hargeisa IDPs in sustained *Serious* and Mogadishu in *Alert* phase.

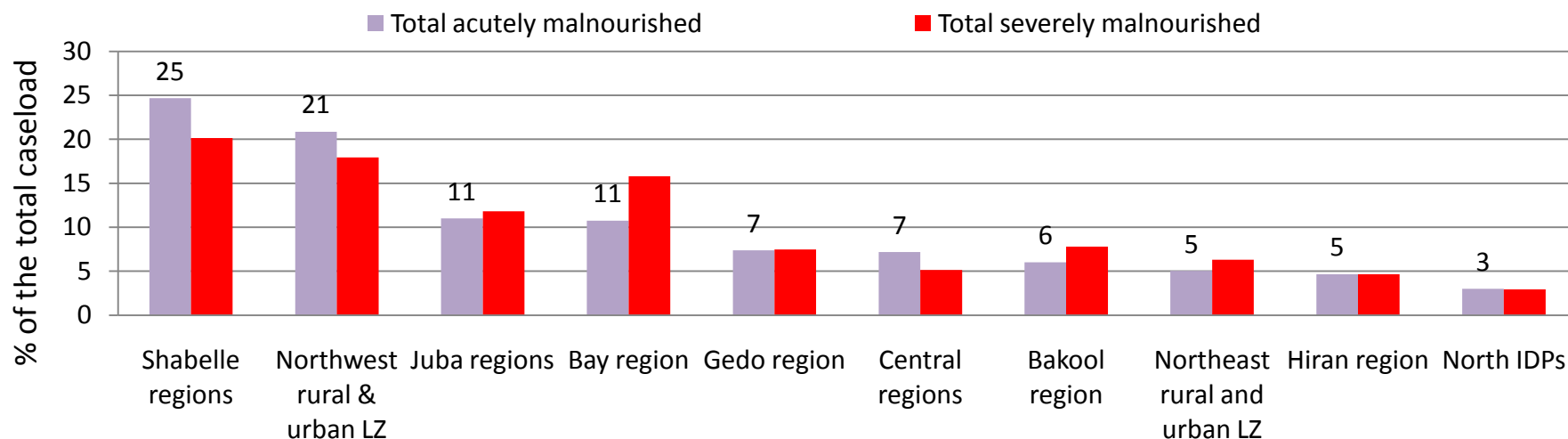
Estimates cases of acutely malnourished children based on Gu 2012 nutrition survey findings & estimates (WHZ – WHO GS).

National Level:

- ❑ **236,000** (16% of the 1.5m) children are acutely malnourished - improved from 323,000 in Jan'12 (22% of the 1.5m) and 450,000 (30%) in Aug'11.
- ❑ **54,000** (3.5% of the 1.5m) children are severely acutely malnourished - improved from 93,000 (6% of the 1.5m) in Jan'12, and 190,000 (13%) in Aug'11.

South Somalia hosts:

- 168,000 (71%) of the total acutely malnourished children, from 224,000 in January 2012 and 336,000 in August 2011.
- 39,500 (72%) of the total severely malnourished children, from 75,000 in January 2012 and 160,000 in August 2011.



MUAC, <5yr caseloads: 160,000 with MUAC <12.5cm or oedema (from 200,000, and 36,000 with MUAC<11.0cm or oedema
Pregnant/lactating women: 81,000 with MUAC<23.0cm, and 19,000 with MUAC<21.0cm

Contact details
ahono.busili@fao.org