



A recent UN mission found that acute malnutrition in children under five is at 15% in affected areas, well in excess of the global acute malnutrition rate of 10% and is indicative of a nutritional emergency. According to the Namibian Demographic Health Survey (NDHS), 23% of children under five are stunted, 26% are underweight and over 9% are wasted. Wasting indicates acute under nutrition which is possibly due to the extended years of drought and the combined effects of poverty and the impact of HIV/AIDS.

### **Current Threat due to Seasonal floods along the Zambezi River**

*Heavy rains through the month of March have pushed a section of the Zambezi River to its highest level since 1958. Just as the mighty river turns east in its path to the Indian Ocean, and immediately before it thunders over the Victoria Falls, it passes through the low-lying plains of Namibia's Caprivi Strip. This section of the river floods often as the wet-season rains fill the river. This year, the floods have come earlier than normal, and are rising to levels not seen in nearly 50 years.*

*The Government is preparing to evacuate 40,000 to 50,000 people from its northern Caprivi region as the flood waters continue to rise. Five schools in affected communities have been closed and thousands of learners and teachers in the affected areas have been camping in high grounds. Houses and field crops are submerged in flood waters. Transport has been a problem to relocate people and assistance has already been extended with the arrival of boats procured from UNICEF reserve funds. Increased cases of diarrhoea and malaria are already being reported. So far two people have died in this year's floods. The humanitarian needs for the displaced population will add to the already heavy burdens on responding to the on-going drought response pending harvest.*

## **2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS**

UNICEF will extend assistance to over 500,000 most vulnerable children and women for a period of six months in accelerating primary preventive health efforts such as catch up measles immunisation, vitamin A distribution, provision of insecticide treated bed nets (ITN) and essential drugs. To complement the WFP Emergency Operations Appeal, UNICEF will support the establishment of nutrition surveillance systems and the therapeutic and supplementary feeding of severely malnourished children. In both health and nutrition interventions, training of key health personnel in emergency preparedness and response (EPR) and on management of severe malnutrition will be provided. These activities will be further complemented by WHO's support to the Ministry of Health and Social Services (MOHSS) in conducting a rapid assessment of the cold chain system and by UNDP's support to the Emergency Management Unit at the national level by placing UN Volunteers to strengthen its capacity.

The health and nutrition activities to be supported with funds generated from the appeal are built upon UNICEF on-going programme support to the MOHSS. The regular programmes are in strengthening polio eradication and immunisation, Integrated Management of Childhood Illnesses (IMCI) including Malaria Control and Prevention, Prevention of Mother to Child Transmission of HIV (PMTCT). However, the level of funding for such programmes has not been encouraging which constrain UNICEF's capacity to expand these critical interventions. While funding for HIV and AIDS has been forthcoming, they remain vertical and extremely limited in focus. The health delivery systems themselves are not being supported by these funds while they are at the same time expected to deliver on the HIV/AIDS interventions such as treatment of opportunistic infections, HIV treatment, care and support, PMTCT, Voluntary Counselling and Testing, support to Home Based Care, etc.

The multiple demands on the health care services imposed by the HIV/AIDS pandemic subsequently affect its capacity to manage the routine preventive and curative services such as EPI, Malaria Control, Diarrhoeal Disease Control and Acute Respiratory Infections (ARI) for the majority of the population not infected by HIV but affected by the devastating effects of the disease on society at large. As a vast country with sparse population spread out in small hamlets, the biggest challenge for service delivery continues to be the availability of transport for outreach, supervision and supply deliveries. The Caprivi region has its own particular problems with the annual floods which cover a major part of the region for 2-3 months of the year. Hence, transport support is a critical area to ensure the delivery of quality services.

The UNICEF appeal for assistance in key health interventions such as immunization, malaria control and nutrition surveillance and health system emergency response capacity development complements WFP's appeal for food assistance for the most vulnerable groups of children orphaned by AIDS, HIV/AIDS and TB patients and supplementary feeding for severely malnourished children under five. In addition water, sanitation, shelter and schools support will be provided to the displaced population due to floods.

### **Expected results**

The overarching aim of this appeal and the interventions proposed is to alleviate the current health and nutrition crisis and to prevent further escalation. Specifically to:

- Enable the identification of the most severely affected populations especially children and women and increase understanding of their needs through improved nutrition surveillance and EPI rapid assessments;
- Prevent outbreaks of measles, malaria and other infectious diseases;
- Increase availability of vaccines, essential drugs and other commodities necessary for prevention;
- Improve case management and rehabilitation of acutely malnourished children;
- Improve the nutritional well being of the most vulnerable segments of the population and prevent further deterioration of the nutritional status of children under five.
- Provide shelter , clean water, and school materials

### 3. APPEAL REQUIREMENTS AND RECEIPTS

**Table 1: (2004) APPEAL REQUIREMENTS AND FUNDING**

Sector	Target	Funded (USD)	% Funded	Under funded
<b>Health</b> 1. Expanded Programme on Immunization: Cold Chain equipment & supplies Measles & supplies Vitamin A Training & supervision 2. Malaria Control Programme: Insecticide treated nets Training & supervision Essential drugs/kits	335,000	0	0	335,000
<b>Nutrition</b> Assessments Equipment & supplies Supplementary & therapeutic feeding Growth Monitoring & Promotion Surveillance Training & supervision	225,000	0	0	225,000
<b>Transport</b> Flood boats Vehicles Fuel	170,000	0	0	170,000
<b>Programme support ,Training &amp; supervision</b> EPR Guidelines/Protocols Management & Coordination	100,000	0	0	100,000
<b>Monitoring &amp; evaluation</b>	50,000	0	0	50,000
<b>Water , sanitation and Shelter</b> Tents Jerry cans Wataclean tablets	120,000	0	0	120,000
<b>Educational materials</b> School-in- a box Recreation kits Other school supplies	120,000	0	0	120,000
<b>Grand Total</b>	<b>1,120,000</b>	<b>0</b>	<b>0</b>	<b>1,120,000</b>

#### 4. IMPACT OF UNDER-FUNDING AND CURRENT PRIORITIES

Needless to say, the consequences of under-funding will seriously affect the capacity of the regular health service system to respond to the growing needs of the general population and of the most vulnerable groups in particular. As UNICEF's regular resources to Namibia are very limited given the size of its child population and continued generally positive overall national statistics and fund raising for regular health service delivery activities have been difficult, there is no capacity to even initiate support to complement the start up efforts of the WFP which will draw on its reserve funds.

Of all the activities outlined above, the most critical is the initiation of a nutrition programme of surveillance combined with therapeutic and supplementary feeding and training in management of severe malnutrition. The strengthening of the EPI and Malaria Control programmes are also vital to sustain the positive gains made in public health in the past decade. However, of the many demands, the replacement of critical gaps in the cold chain equipment, Measles vaccines and Vitamin A are also needed. Two flood boats for the most severely affected region, Caprivi, would make a difference in reaching and rescuing the most vulnerable groups.

The recent need to respond to the Caprivi floods add the dimension of additional urgency with the need for bednets and water purification tablets for the affected populations.

<b>Project</b>	<b>Beneficiaries/coverage</b>	<b>Amount Required (US\$)</b>
1. Health - Provision of cold chain equipment for 21 clinics - Measles vaccine- 170,000 doses, - Vitamin A caps- 100,000 IU - Medical kits- 30 - ITNs – 4,000 - Training & supervision.	220,000 children less than 5 and women in fertile age	100,000
2. Nutrition - Supplementary & therapeutic feeding, - Nutrition surveillance - Training in case management	90,000 children	50,000
3. Flood boats	50,000 people	20,000
4. Water Purification tablets, tents and jerry cans	40,000 people	100,000

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