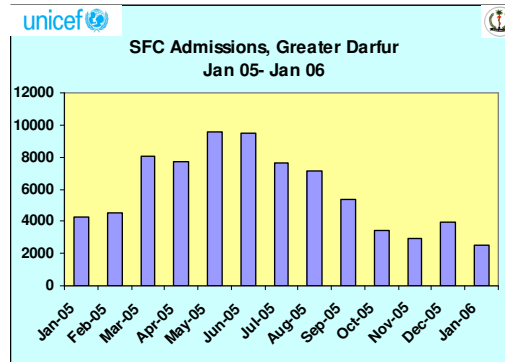


DARFUR NUTRITION UPDATE

OVERVIEW

- **The nutritional status** of the conflict affected population throughout Darfur **continues to be stable** into the New Year the year with an **overall improvement when compared to this time last year**. This has been confirmed by continuing low admissions to the Selective Feeding Programmes and localized nutrition surveys.
- 7 localised nutrition surveys have been conducted in Dec/ Jan in North and South Darfur with only one reporting rates of malnutrition above the emergency threshold of 15%, **at 18% GAM in Mellit & Hay Abassy IDP camp** in North Darfur (ACF, Jan 06)
- **An Iodised Oil campaign** was conducted in in both North & South Darfur in February targeting a total of 48,111 children and 48,682 women of child bearing age in North Darfur and 175,968 children and 112,385 women of child bearing age in South Darfur.
- A **Polio and Vitamin A campaign** was conducted across the three states of Darfur in February reaching 1.37 million children under 5 years. (>92% coverage)
- The sentinel sites surveillance system continues to monitor the nutritional status of the rural populations in North & South Darfur. In general the nutritional situation remains stable and comparable to the camp population with the **exception of one locality, Um Kedadah in North Darfur** where the nutritional status is poorer than other localities.
- **Ongoing insecurity** across the three states continues to hamper the delivery of humanitarian aid as well as preventing the ability to determine fully the needs of the affected population.

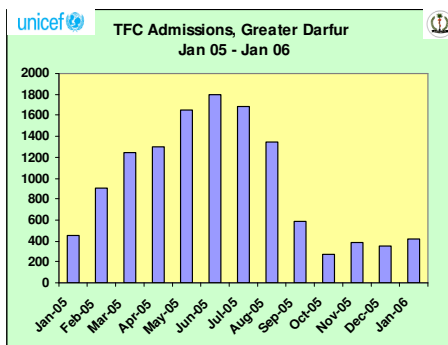
The nutritional situation remains stable across the three states with total admissions in January to TFCs in the 6-59months age group at 419 similar to the 457 admitted in January last year. For the SFP a total of 2487 children 6-59months were admitted in January significantly lower, than this time last years 4314, as is illustrated graphically.



In addition the rates of malnutrition and morbidity currently being reported across the three states from the localised nutrition surveys and nutrition surveillance system are in line with the seasonal trends with lower rates of malnutrition being reported and acute respiratory tract infections being the number one cause of illness.

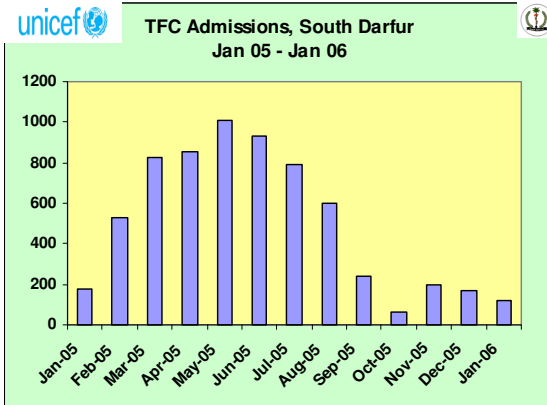
The FAO/WFP Crop and Food Supply Assessment Mission special report released in February 2006 indicates that overall 47% more land was planted under cereals in Greater Darfur in 2005 than there was the previous year. However until further analysis into the actual harvest that was yielded is done it is yet unknown the impact of this on household food security given the ongoing insecurity across the three states. Further post harvest assessments by FAO/ WFP/ MoAg are ongoing with reports expected out by the end of March. The same report states that although market prices rose sharply for most of 2005 in all three major markets in Nyala, El Fasher and Geneina mainly due to insecurity and poor harvest from the previous year, prices began to decline from September due to expectations of an improved harvest towards the five year average with the exception of El Fasher where cereal prices have remained high. The overall terms of trade for goats has improved since September 2005 in major markets as grain prices started to decline. However the report again highlights that it is **unlikely that the food security situation of the masses will significantly improve unless the insecurity is reduced to increase freedom of movement and access to re establish their normal livelihoods.**

GREATER DARFUR – NUTRITIONAL STATUS REMAINS STABLE ACROSS THE THREE STATES

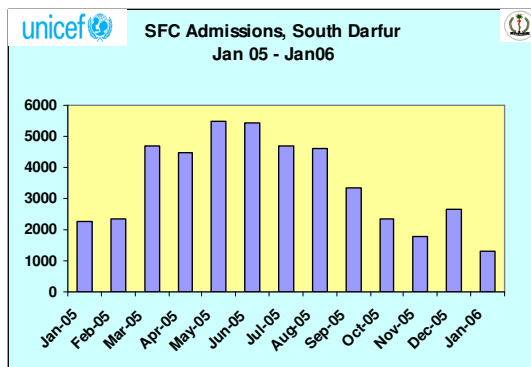


SOUTH DARFUR – NUTRITIONAL STATUS REMAINS STABLE IN BOTH CAMP AND RURAL POPULATIONS

Selective Feeding Centre Data. Rates of admissions into the TFC continue to remain stable in Jan with a total of 123 admissions in the 6-59months age group slightly lower than 179



admissions the same time last year. Performance indicators remain in line with Sphere standards with low mortality and defaulting rates. The admissions into the SFC programmes remain significantly lower than this time last year with a total of 1295 admission in the 6-59months compared to 2249 admissions in Jan 05. However there are concerns with the higher rates of defaulters in this group across the three states for all agencies involved in SFP. There are ongoing discussions at state level with the relevant actors on how to address SFP more effectively to improve the overall effectiveness of the programmes.

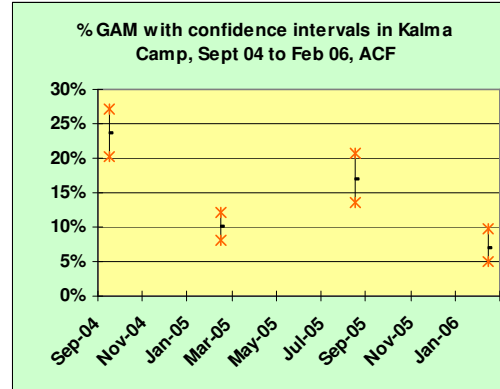


Nutritional Surveys. The table below, provides a summary of the most recent nutrition surveys conducted in South Darfur.

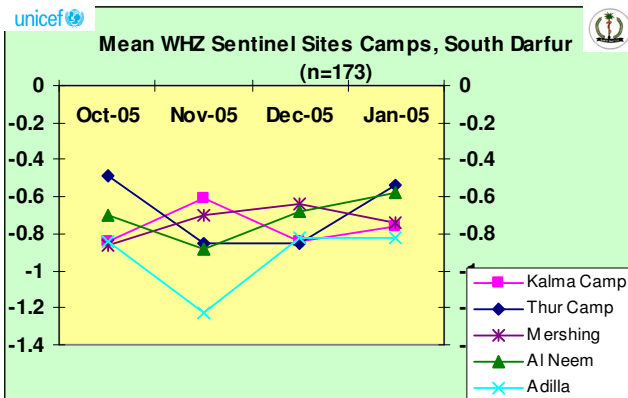
Table 1. Nutritional Survey Summary -South Darfur

Location	Agency	Date	% GAM	% SAM
Ed Daein	Tearfund	Dec 05	13.9% (11.4-16.5)	1.4% (0.5-2.2)
Kalma	ACF	Feb 06	7.0% (4.9-9.8)	0.4% (0.0-1.7)

ACF conducted a fourth nutrition survey in Kalma camp in February - the results illustrated indicate the seasonal trend over the past 18 months with higher rates of malnutrition being reported during the August/ September period - the traditional hungry gap and lower in the post harvest, dry season. This is interesting to observe in a camp situation where the community would be expected to be less affected by the effects of food security seasonality.



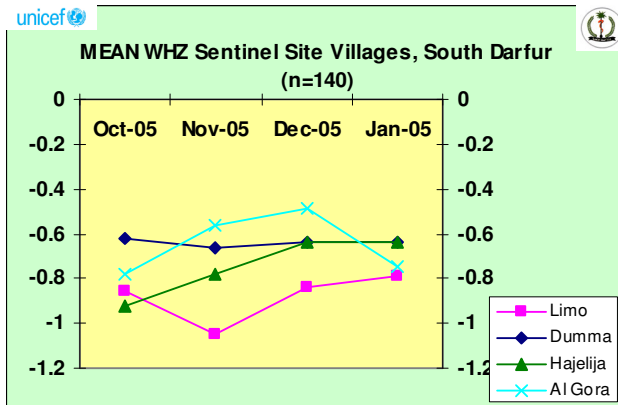
Sentinel Site System. The sentinel site programme has been operational in 19 sites in South Darfur from September. The mean weight for height in Z scores from the camps and villages population was measured and monitored over the last four months and as is illustrated below there is no significant difference between the camp and village populations to date both averaged at -0.73 WHZ for January. The main sources of food from the camp



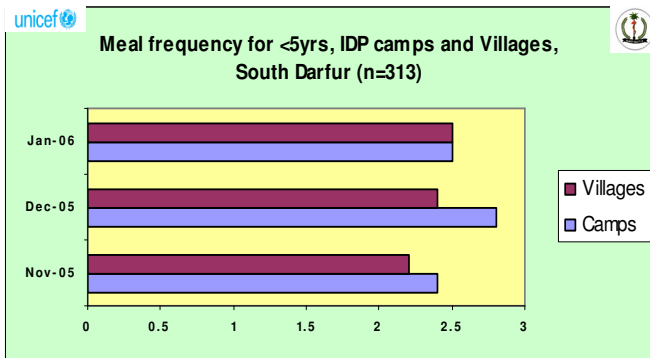
population remain unsurprisingly food aid with exchange of food aid items for food products being the second source. For the villages population the main sources of food is own production with purchased and food aid coming in 2nd and third place. Morbidity rates from the data indicates acute respiratory tract information as the main illness in both population in camps and villages in line with seasonal trends and with slightly higher rates of diarrhoea being reported across the 5 camps than

¹ Operational sentinel sites for South Darfur as follows: Nyala (Kalma Camp, Tabaldeya Village – accessed only in Sept), Kass (Thur Camp, Limo Village) Shaeria (Mershing Camp, Dumma Village), El Daein (Al Neem Camp, Hajelija Village) Adilla (Adilla Camp, Idriss Al Ghora Village)

in the villages. In terms of overall vulnerability there does not appear to any significant difference across the 5 localities in either the camp or the village populations.

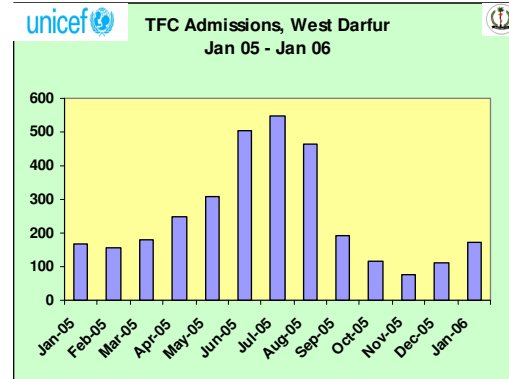


Carers were asked to determine the number of meals consumed by their children the previous day and as is illustrated the average numbers of meals is slightly, though not significantly, less in the village population in November and December with the same frequency being reported in January. Other key indicators measured such as dietary diversity looking at access to protein foods did not illustrate any significant difference across the 9 sites.

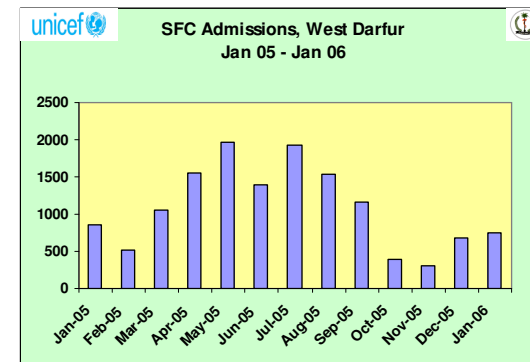


WEST DARFUR – NUTRITIONAL STATUS REMAINS STABLE HOWEVER ONGOING INSECURITY CONTINUES TO REDUCE ACCESS FOR NUTRITIONAL MONITORING.

Selective Feeding Centre Data. Admissions to TFCs remain low with a total of 171 children 6-59months admitted in January 06 similar to the 167 cases admitted in January 05. For the SFP a total of 745 children 6-59months were admitted again just short of the 849 children admitted in January 05. As for South Darfur performance indicators for the TFC remain in line with Sphere standards at <10% for morality, <15% for defaulter and >75% cured.



However performance indicators for the SFP are less positive with higher rates of defaulters and low cured rates being reported. Again as highlighted earlier this is a consistent problem across the three states and efforts to address this are being discussed at state level in the nutrition sector coordination groups.

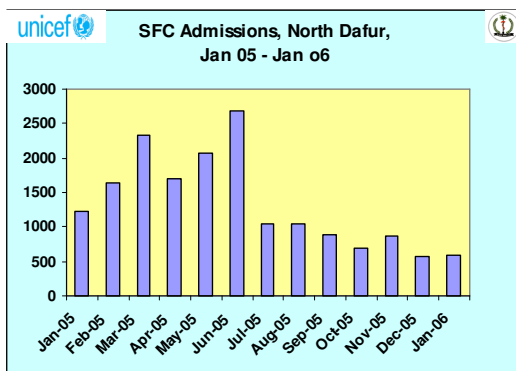
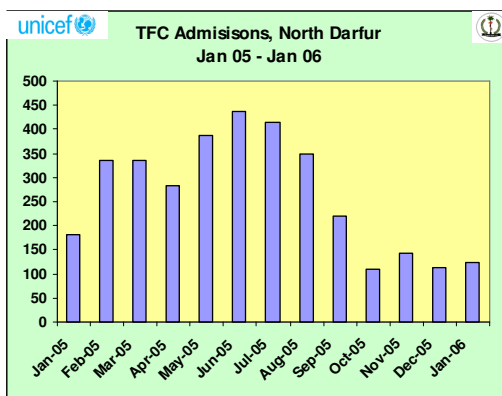


Nutritional Surveys. No nutritional surveys were conducted in the January February period. Concern Worldwide conducted a survey in Mornei in late February with results expected in March.

Sentinel Site System. The sentinel site system commenced in 4 sites in West Darfur in February, this activity was previously delayed due to insecurity and logistical constraints. Therefore future bulletins will report on the information collected. Further sites will be included from March.

NORTH DARFUR – POCKETS OF MALNUTRITION PERSIST

Selective Feeding Centre Data. Admissions to the TFCs in January remained stable with a total of 125 children 6-59months admitted, lower than the 182 admitted in January 05. Similarly to the other 2 states performance indicators remain in line with Sphere standards, with low defaulting and morality rates and high cured rates. However, again similarly to South and West Darfur, defaulting rates for the SFP remain high. Admissions into the SFP were at 585 significantly down from the 1215 admission in January 05.



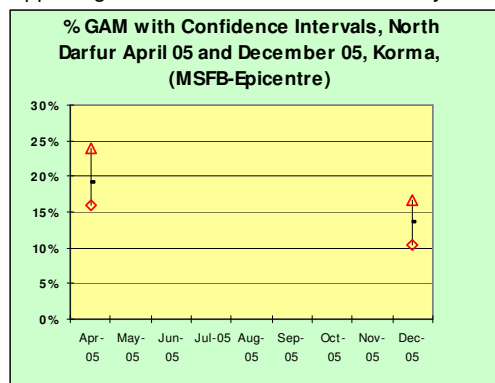
Nutritional Surveys.

Table 2. Nutritional Survey Summary -North Darfur

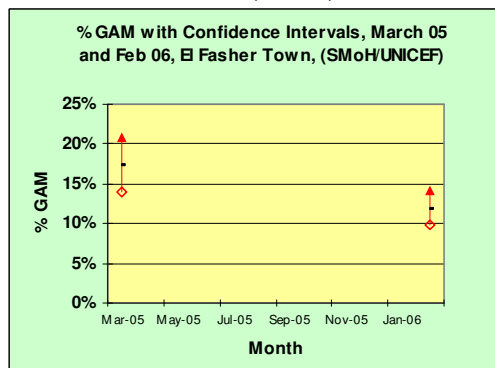
Location	Agency	Date	% GAM	% SAM
Zam Zam	MSF-E	Nov05	10% (7.7-12.3)	0.7% (0.1-1.2)
Shanguil Tobaya	MSF-E	Dec 05	11.3% (8.8-13.8)	0.7% (0.0-1.3)
Korma	MSF-B/ Epicentre	Dec 05	13.6% (10.3-16.8)	0.7% (0.1-1.2)
Mellit & Hay Abassy Camp	ACF	Jan 06	18% (14.7-21.9)	1.7% (0.7-3.4)
El Fasher Town	SMoH/ UNICEF	Feb 06	11.9% (9.9-14.1)	0.4% (0.1-1.1)

Five nutritional surveys were conducted in North Darfur in the last 3 months. Additional surveys were conducted in November and have been reported in the first issue of this bulletin. In all but one survey the nutritional status remains below the emergency cut off of 15%. In Zam Zam the previous nutrition survey conducted by MSF-Spain in May 05 reported rates of malnutrition of 23.6% GAM, thus indicating a significant reduction in the rates of malnutrition. In Shanguil Tobaya the previous survey conducted also by MSF-Spain reported rates of 19.9% GAM again indicating an overall improvement. There are no previous surveys for Mellit, the only one in the same locality being from Malha by SCUk in May 04 which reported 33.5% GAM and 5.4% SAM although as it is not in the same administrative unit so not directly comparable. The results from the

nutritional survey in Mellit & Hay Abassy IDP Camp are of concern given that 50% of the children measured in Hay Bassy IDP camp cluster were reported to be malnourished. This more precarious situation may be linked with the general living conditions in the camp for the newly arrived displaced families. Rates of mortality although not at emergency levels at 2/10,000/ day were at alert levels for children under 5 years of age. Acute respiratory tract infections were also the number one ranked illness – this is in line with other surveys. Recommendations include continuation of food distribution and ensuring registration of new arrivals for food rations and implementation of programmes to treat acute malnutrition either through support to local hospitals or establishment of separate centres, as well as improved access to clean water and sanitation and health care for IDP in Hay Abassy Camp. Recommendations also include repeating the survey in 6 months time. It is of note that at present there are no actors supporting nutrition activities in Mellit locality.



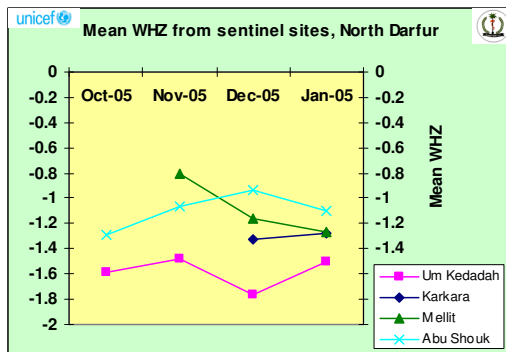
The nutritional survey conducted by MSFB/ Epi Centre in Korma, also indicate an improvement in the nutritional situation from the survey conducted in April 05 although the confidence intervals do overlap slightly as is illustrated. This is also noticeable in the reduction, although not statistically significant, of the SAM level from 1.6% (1.1-2.5) to December rates of 0.7% (0.1-1.2).



The SMoH of North Darfur with support from UNICEF conducted a nutrition survey in El Fasher town in February. The results indicate an improvement in the nutritional status of the population with rates of malnutrition reduced from

17.4% GAM (13.9-20.9) to 11.9% GAM (9.9-14.1) and from 2.6% SAM (1.1-4.0) to 0.4% SAM (0.1-1.1). Although the confidence intervals do overlap as the GAM levels have reduced by more than 5% it can be considered that the reduction is significant. Other indicators such as morbidity and mortality were all at normal levels.

Sentinel Site System - Data continue to be collected from 6 sites in North Darfur with a further 4 sites being operational from March the results continue to highlight areas of concern in Um Kedadah locality. The mean WHZ for the total sentinel sites population for North Darfur is **WHZ -1.2** again lower than for South Darfur where the mean **WHZ is -0.73** this is inline with previous analysis indicating higher levels of acute malnutrition in North Darfur. As is illustrated graphically the mean WHZ are lowest in Um Kedadah locality (n=70) when compared to the other sites. The populations in Um Kedadah are reliant on the sale of watermelon seeds and small livestock and seasonally available labour for their livelihoods and report a poorer harvest than expected due to poor rains which are a common feature of this zone.



Although there is only one camp in this sentinel site group (more to be added from March) , and therefore comparisons cannot be directly made, however meal frequency of children under 5 years do not show any significant difference between the different sites. What is of note, however, is that the availability of protein based food varies; with Abu Shouk camp and Mellit locality populations accessing protein based foods on average of 6 days a week compared to only 2.5 days for the 2 sites in Um Kedadah. SMoH and UNICEF are in discussions on opening a TFC centre in the hospital in Um Kedadah locality in preparation for the upcoming hungry season. Sources of food for the camp population in Abu Shouk continue to be primarily food aid with purchased and own production being the main sources for the village

populations with no change in either over the last three months.

IODISED OIL AND POLIO (PLUS VITAMIN A) CAMPAIGN

The prevalence of goitre in women of child bearing age (WCBA) across Darfur is unacceptably high with figures of 25% prevalence in this group reported in the 2004 Darfur Wide Emergency Food Security and Nutrition Assessment. As mentioned in the previous bulletin iodised oil campaigns were conducted in West and parts of South Darfur in December 05. These campaigns were continued in other parts of South and in North Darfur in February 06. The total figures to date (*not all localities have reported back yet*) indicate that the campaign reached **337,151 children under 5yrs of age** and **245,758 women of child bearing age**. In addition efforts are ongoing with the main actors, Federal and State Ministry of Health, UNICEF, WFP and WHO on longer term sustainable activities to reduce and prevent IDD through support to the production and the utilisation of iodised salt as well as advocacy messages for increased use at household level.

A Polio and Vitamin A campaign was conducted across the three states in Darfur by FMoH/ SMoH/ UNICEF & WHO in February 06 and reached a total of **1,332,575 children under 5 years of age**, giving a coverage of >92%.

SUDAN HOUSEHOLD SURVEY

The Sudan Household Survey which has a national coordinator from the Ministry of Health and is supported by the Central Bureau of Statistics will be conducted in Greater Darfur in March 06. This survey will target a total of 1,000 households per state and will collect information on general demographics, socio economic indicators, nutrition, health, reproductive health and food security. This survey is part of the Sudan Wide Household Survey which is ongoing across all 26 Northern and Southern states over the coming months. Preliminary findings are expected in July. Training and equipment for the nutritional component of the survey was provided by UNICEF.

CONTACT

Online: The "Darfur Nutrition Update" is now available online. Check the following link for this Issue and Issue 1.
<http://www.unicef.org/emerg/darfur/files/DarfurNutUpdateSeptDec05.pdf>

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**Sudan
Ministry of
Health**

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