

**Refugee Nutrition Information System (RNIS), No. 34 – Report of the
Nutrition Situation of Refugees and Displaced Populations**

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Refugee Nutrition Information System (RNIS), No. 34 – Report of the Nutrition Situation of Refugees and Displaced Populations

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NOTES

The 34th issue of the RNIS provides updates on selected emergency contexts around the globe. The focus is predominantly Sub-Saharan Africa and this reflects the greater amount of nutritional information from emergency contexts that is currently available for the region. Some previously covered countries such as Rwanda, the Republic of Congo and the Indonesian region, including East Timor, have not been covered in this issue. This is because the RNIS has, for some time, been unable to source any new information on the nutrition or food security situation of emergency affected populations in these contexts.

Detailed information on the surveys used in each RNIS issue is to be found in an annex at the back of the publication. The data comes from a variety of UN and NGO sources and the RNIS is very grateful for the information it receives and would like to encourage agencies to send data, where available, as regularly as possible to accscn@who.int.

The RNIS would also like to reiterate that it is mandated to provide information on the nutrition situation of refugees and displaced populations only. The RNIS cannot report the complexities of natural disasters such as the Horn of Africa drought. However, very extensive information is available on this and other natural and human made emergencies and can be accessed from the internet at <http://www.reliefweb.int>.

Various country specific information is also available, and the RNIS would like to draw people's attention to reports by the UNDP Emergencies Unit for Ethiopia at <http://www.telecom.net.et/~undp-eue/>. There is also the Food Security Analysis Unit for Somalia which produces regular 'Nutrition Updates', containing very de-tailed area specific data and analysis. To receive these reports please contact Noreen Prendiville at noreen.prendiville@fsau.or.ke.

HIGHLIGHTS

Eritrea and Ethiopia: The ending of hostilities between the two countries has seen the continuation of returns to previously war affected regions by both displaced and refugees. The returns are still restricted by mines and other unexploded ordinance as well as the effects of a shattered infrastructure. The drought affected remain very food insecure as many are still struggling to recover from the drought of last year. Poor rains and the withdrawal of agencies from affected areas have also adversely affected populations in light of the continuing need for food assistance.

Somalia: The situation in Somalia remains precarious. The failure of *Gu* rains, particularly in southern areas, has effected much rain fed agriculture, resulting in poor crop forecasts. Opposition to the Transitional National Government (TNG) has increased the political instability, particularly in and around Mogadishu. The continued importation of Somali bank notes has increased inflation and led to a general reduction of purchasing power which will affect the poorer wealth groups including the displaced. The effects of the Gulf State's ban on the importation of livestock continues to effect the northern regions.

Sudan: The situation in Sudan has deteriorated significantly during the first half of 2001 as a result of drought and continued insecurity, particularly in the south of the country in areas such as western Bahr-el-Ghazal. Major offensives by the SPLA and the GoS have resulted in the displacement of many thousands of people. This has left many reliant on a variety of very marginal coping mechanisms. The prevalence of malnutrition appears to be on the increase and there is urgent need for humanitarian assistance to vulnerable groups.

Sierra Leone and the West Africa Region: Increased security in Sierra Leone, as a result of govern-ment and rebel adherence to the Abuja cease-fire agreement, has resulted in better access to emergency affected populations. Continued instability along the border with Guinea and in Liberia continues to re-sult in the return of Sierra Leonean refugees. There is renewed fighting in northern Liberia which has displaced many people into Guinea and Sierra Leone and within Liberia itself. Many of the returnees and new arrivals in Sierra Leone are arriving in very poor condition, having travelled through insecure areas without access to food. As a result pockets of great need continue to exist.

Great Lakes region: The continuing peace process in DRC has opened up many previously inaccessible areas of the country and revealed areas of extreme need. However, insecurity still exists, particularly in eastern regions and the needs of the affected populations remain very high. The situation in Burundi continues to be precarious as fighting escalates in areas between government troops and rebel groups re-turning from DRC. This has resulted in many people crossing the border as refugees into Tanzania.

Angola: Conflict has continued in many parts of Angola resulting in a steady displacement of population. This continues to affect access to vulnerable populations and although the situation appears stable in some areas there are pockets of acute need in places such as Camacupa and Kuito in Bie province. This is a result of both insecurity and the poor state of much of the infrastructure, particularly airstrips used for landing humanitarian supplies.

Afghanistan: The humanitarian situation in Afghanistan has deteriorated further as a result of ongoing drought and fighting. The poor economy and almost total failure of food crops in many areas has forced many

to abandon their land and become reliant on unsustainable crisis coping mechanisms. The number of internally displaced is expected to reach one million by the end of the year. There is urgent need of a considerable humanitarian response.

Table 1
Risk Factors Affecting Nutrition in Selected Situation

Situations in the table below are classed into five categories (row 1) relating to prevalence and or risk of malnutrition (I – very high risk/prevalence, II – high risk/prevalence, III – moderate risk/prevalence, IV – not at elevated risk/prevalence, V – unknown risk/prevalence, for further explanation see inside of the back page). The prevalence/risk is indirectly affected by both the underlying causes of malnutrition, relating to food, health and care (rows 2 – 4, and also Figure 1 at back of report) and the constraints limiting humanitarian response (rows 5 – 8). These categories are summations of the causes of malnutrition and the humanitarian response, but should not be used in isolation to prescribe the necessary response.

Factor	Eritrean Refugees in Ethiopia	IDPs in Mazar-i-Sharif, Afghanistan	IDPs in Kuito, Angola	IDPs in Kinshasa, DRC	IDPs in Luuq, Somalia	IDPs in western Bahr-el-Ghazal, Sudan	IDPs in Kailahun district, Sierra Leone	
1. Nutritional risk category	III	II	I	III	II	I	II	
2. Public Health Environment (water, shelter, overcrowding, access to health services)	X	X	X	?X	X	X	X	
3. Social & Care Environment (Social organisations and networks, Women's role, status and rights)	?X	X	?X	?O	X	X	X	
4. Food Security	O	X	X	O	X	X	X	
5. Accesibility to population	✓	O	X	✓	X	X	X	
6. General resources								
– food (gen stocks)	X	?X	X	O	?O	X	X	
– non-food	?X	?X	X	O	?O	X	?O	
	✓	O	?X	✓	X	X	?O	

7. Personnel*								
8. Information	✓	○	○	○	○	○	✓	X

✓ Adequate ○ Mixed X Problem

?✓ Don't know, but probably adequate ?X Don't know, but probably inadequate

* This refers to both adequate presence and training of NGOs and local staff where security allows

SUB-SAHARAN AFRICA

GREATER HORN OF AFRICA



Eritrea

Since April 2001, Eritrea and Ethiopia established a Temporary Security Zone (TSZ) manned by UN peacekeepers and observers. The TSZ effectively separates the two sides whilst final stage talks are taking place (IRIN 06/07/01). The final status of the TSZ remains unresolved and although the UN Mission in Ethiopia and Eritrea (UNMEE) remains optimistic concerning the situation, tensions do still exist (UN DPI 20/06/01) and full normalisation of relations between the countries has not yet taken place.

Response to the humanitarian appeal for 2001 has been slow. As of June 14th only 25,000 MT of food aid had been pledged out of a requested 223,000 MT. A quick response would facilitate the resettlement of IDPs in their home areas and help them restart their normal lives (FEWS 14/06/01).

War-affected displaced

The RNIS has not received any recent nutritional surveys of displaced in Eritrea. However, the cessation of hostilities and a better pattern of precipitation has led to some improvement in the overall situation. This has prompted an increase in the return of IDPs to their places of origin. Previously the RNIS reported that 208,163 IDPs were in 24 organised camps in the three zones of Debub, Gash-Barka and Northern Red Sea (RNIS 32 and 33). Current UN figures indicate that about 120-150,000 IDPs have returned to their places of origin. An estimated 50-60,000 remain in camps because of land mines or lack of local infrastructure in their home areas. (IRIN 06/07/01; IRIN-HOA 18/06/01).

The continued presence of mines and unexploded ordinance continues to be one of the chief obstacles for returnees and the future food security of the area. Two of the most affected areas, Gash-Barka and Debub, have traditionally been regarded as the breadbasket of Eritrea with the two contributing up to 75% of national cereal production (IRIN 06/07/01). Every effort is being made to demine affected areas by UNMEE.

An assessment by the UN and the government of Eritrea in Gash-Barka zone revealed considerable damage to infrastructure including houses, schools, churches, mosques, health stations, government offices and fuel stations (FEWS 07/05/01). Of particular and immediate concern is the rehabilitation and expansion of water sources and the government of Eritrea and UNHCR are working with NGOs to implement quick impact projects (UNHCR 06/06/01). Until infrastructure is rebuilt, returnees are likely to continue to need both food and non-food assistance (FEWS 07/05/01).

Drought affected populations

RNIS 32 and 33, reported that an estimated 738,450 people were directly affected by the drought in 2000 (RNIS 32 and 33). The short rain season (*azmera*) that normally starts in April and May has all but failed (FEWS 14/06/01). The *azmera* is particularly important for the emergence and establishment of long-cycle crops such as maize, millet and sorghum and its failure will have a serious impact on the overall production of crops for 2001 (FEWS 07/05/01; 14/06/01).

The most affected areas remain Anseba, North and South Red Sea and Maakel zones. Reports from the Anseba zone indicate that drought conditions are worsening in all sub-zones. The main summer rain season will begin at the end of July and current predictions indicate that there is only a 35% chance of normal rainfall, leaving continued cause for concern over the future food security of the area. (FEWS 14/06/01).

Returnees

The war with Ethiopia sent many Eritreans across the border into neighbouring countries such as Sudan and Yemen. The US committee for Refugees estimates that some 335,000 Eritreans were refugees at the end of 2000 (USCR 19/06/01). An agreement between Eritrea, UNHCR and Sudan was signed in March 2001 to facilitate the voluntary repatriation of refugees from Sudanese camps. Returnees will be constrained by the food security constraints generally seen in the country. Demining activities have already cleared areas in the Gash-Barka zone, which has been identified as an area of return for refugees and surveys within the Eritrean refugee population in Sudan have indicated that 71% wish to return. Provisional planning figures estimate that 62,000 refugees will return from Sudan to Eritrea during the course of 2001 (FEWS 07/05/01).

The repatriation began in May 2001 and by June 26th a total of 16,588 had returned from the Sudanese camps of Hawata, Mafaza and Gulsa. Efforts increased to move the refugees before the upcoming rainy season in late July, with 27,000 having signed up for return to date (UNHCR 26/06/01). The arrival of the refugees will directly impact on the national food outlook

Overall

The humanitarian situation in Eritrea has improved largely as a result of the continued peace with Ethiopia that has allowed the return of many of the displaced and refugees. Although there are no new nutritional survey reports, it is likely that food security has improved as a result of the cessation of hostilities and slightly improved rain-fall. The presence of landmines and other forms of unexploded ordinance is still limiting access to land in some areas, restricting farming and pastoralist activities in affected areas. The destruction of basic infrastructure, such as water resources and medical facilities, also hinders the return of displaced and refugees to their home areas (Category IV).

Recommendations and Priorities

- Increase the level of food aid by supporting the humanitarian appeal of 2001.
- Continue the de-mining of the conflict zones.
- Continue the rebuilding of basic infrastructure in affected areas.

Ethiopia

The number of people estimated to be in need of assistance as a result of drought has decreased from 6.2 million in January 2001 (RNIS 32 and 33) to 2.5 million estimated to be vulnerable in April 2001. Most highland farmers dependent on the Belg harvest are optimistic that it will be near normal (the harvest is expected in July). However, the rains in the pastoral areas of the east and southeast, most notably the Somali region, have been light and erratic, starting late and ending early. Areas of particular concern are parts of Gode zone, Southern Liben, Afder zones and eastern Warder zone (ENFS 15/06/01). RNIS has received no new nutritional survey reports of drought affected populations.

Refugees

In early 2001, there were an estimated 206,879 refugees in Ethiopia, mostly from Somalia, Sudan and Eritrea. 22,000 Somali refugees were repatriated from the camps of Teferiber and Darwonaji by the end of June 2001. The closure of a third camp, Daror, is expected by December 2001. This will bring the total number of Somali refugees in Ethiopia to 60,000 in the remaining camps (IRIN, 2/07/01). RNIS has received no new information on the nutritional status of Somali and Sudanese refugees.

UNHCR, ARRA and WFP conducted a nutrition survey of Eritrean refugees in the Walanhibi site in Tigray in March 2001. The total number of refugees in the site is 3781. The survey measured all children between six months and five years and showed a prevalence of acute malnutrition of 21.8% (W/H <-2 Z-scores and / or oedema), including 2.2% severe (W/H <-3 Z-scores and / or oedema). The prevalence of severe malnutrition has increased from 0.3% since the last survey in September 2000. The overall prevalence of malnutrition remains high at around 20%. This can be attributed to poor availability and irregular distribution of food, coupled with poor health care. Whilst the recommended food ration is composed of 500 g wheat, 50 g pulses, 30 g oil and 5 g salt/person/day, food aid often arrives late, distributions are irregular and refugees have few other food sources. It is likely that infectious disease is also a cause of the high prevalence of, in particular severe, malnutrition. Mortality was estimated from local reports of deaths, which gave a CMR of 0.33/10,000/day and an under 5 mortality rate of 1.3/10,000/day (UNHCR/ARRA/WFP 03/01).

The prevalence of malnutrition in the 6 – 29 month olds is twice as high as that in 30 – 59 month olds (33.3% and 14.5% respectively), which points to a problem of poor support for caring practices of young children. The general food ration does not include any appropriate special foods for young children. RNIS notes with concern, however, the distribution of 5.5 kgs of milk powder per household in January 2001. This is against official UN and NGO policy.

War displaced population in Tigray and Afar

The Algiers Peace Accord signed in December 2000 continues to hold and the creation of a Temporary Security Zone (TSZ), separating the disputed border area has served to keep the opposing Eritrean and Ethiopian forces apart until final border agreements have been reached (UNICEF 09/04/01). The TSZ is currently manned by UN peacekeepers and observers under the auspices of the UN Mission in Ethiopia and Eritrea (UNMEE). The UNMEE mandate has been extended until September 2001 (UNMEE 15/06/01).

The RNIS reported 395,000 displaced in Tigray and Afar regions (RNIS 32 and 33). The improvement in the security situation has allowed the majority of these displaced to return to their areas of origin. The RNIS has received no new nutritional information on these returnees. The greatest problems facing the returnees are the large amount of mines and unexploded ordnance and the destruction of basic infrastructure (UNDP-EUE 28/06/01). To date over 70% of health post construction is completed in Tigray and is expected to be fully completed in August 2001 (UNDP-EUE 28/06/01). General food distributions are ongoing in the Tigray and Afar areas but they are likely to be affected by the current global shortfall in food aid (UNDP-EUE 28/06/01).

Somali Region, Eastern Ethiopia

Drought displaced

The humanitarian community is currently providing aid to over one million drought affected people in Somali region who remain acutely food insecure. The Ethiopia Network on Food Security (ENFS) estimates that there are between 70,000 and 120,000 drought displaced in camps in Somali Region (ENFS 15/06/01).

RNIS 32 and 33 reported on a series of surveys by MSF-B in Denan in Gode zone, where the prevalence of acute malnutrition was the same in April 2001 as it was in May 2000, above 40%. These were extremely alarming findings, but unfortunately RNIS has not received further details of the nutritional situation in Denan.

UNICEF and MCDO conducted a nutrition survey at the end of April 2001 in the IDP camps of Fafan in Jijiga zone in the Somali region. This comprises a total of 7 camps, with an estimated 1664 dwellings. The number of displaced was estimated at 8986. The origins of the displaced included Degahabur (52%), Fik (25%), Korahai (12%), and Gode (9%).

The survey showed prevalence of acute malnutrition 21.2% (W/H <-2 Z-scores and/or oedema), including 3.3% severe malnutrition (W/H <-3 Z-scores and/or oedema). Mortality data was collected but not considered reliable. This indicates an increase in the prevalence of malnutrition since January, when an MCDO survey indicated 15.5% malnutrition, with 4% severe. The methods of the survey in January are however not available to the RNIS. MCDO conducted a similar survey in early April 2001, which found 31% acute malnutrition (W/Ht <-2 Z-scores), with 17.3% severe acute malnutrition (W/Ht <-3 Z-scores). It is difficult to comment on the difference between the MCDO and the UNICEF/MCDO survey results, but it is unlikely that such a change could have occurred within a matter of weeks.

The increase in the prevalence of malnutrition can be explained in part by expected seasonal changes in malnutrition in Somali region. In late December 2000 and early 2001, agencies working in other parts of Somali region reported a decrease in the prevalence of malnutrition associated with the short rains. The long rains in Somali region started in March/April, and the period of the survey and therefore represent a food insecure time of the year. The report provides no other information on causes of malnutrition. However, it does contain a recommendation for regular general ration distributions and this leads RNIS to believe that there was no regular distribution at the time of the survey (UNICEF 30/04/01). Given this expected increase of food insecurity, and associated increase in malnutrition, feeding programmes should probably not have been closed in March 2001. Feeding programmes tend to be set up in conjunction with health programmes and following the closure of the feeding programmes, no health care was provided to the displaced. Many of those remaining in camps are the destitute. (UN-EUE 29/06/01).

During 2001, there has been a decrease in the number of humanitarian organisations working in Somali region and this has adversely affected the amount of humanitarian assistance provided. In late June WFP reported that there was a considerable shortfall for their Horn of Africa relief operations. As a result, the August and September food distributions in Ethiopia are currently threatened (WFP 29/06/01). MSF have also pointed out that current food aid rations are far from nutritionally balanced, often comprised of cereals alone and missing pulses and oil (ENFS 15/05/01).

Overall

The nutritional situation of displaced and refugees remain precarious. Whilst it is not uncommon to see high prevalence of acute malnutrition in Ethiopia at this time of the year, poor rains, and reduced levels of assistance mean that the situations is likely to deteriorate. The deterioration is particularly likely because people have not fully recovered from the drought in 2000. The situation for the war displaced has improved, but there are still problems of access to land and destruction of basic infrastructure (category III). Eritrean refugees are considered at moderate risk (category III). The drought displaced in Somali region also remain at moderate risk (category III). Levels of malnutrition in some areas are high mostly as a result of late food deliveries and inadequate health care. As a result, the need for timely and adequate external assistance to all these groups remains a priority.

Recommendations

- Support the UN appeal for both war and drought affected persons in Ethiopia

From the UNICEF/MCDO nutrition survey in Fafan IDP camps (UNICEF 30/04/01)

- Ensure the distribution of a timely and nutritionally adequate general food ration

- Investigate the causes of malnutrition
- Establish a health care referral system for all sick patients

From UNHCR, ARRA, WFP assessment:

- Improve the regularity of food distribution to refugees
- Include a fortified complimentary food in the general ration that can be used for children in the 6–29 month age group
- Improve health services

Kenya

Since the last issue of RNIS, the estimated number of drought affected people in need of assistance decreased from 4.4 million to about 3 million (OCHA). The long rains started in March, which considerably improved the food security outlook. Rains have benefited in particular the agricultural areas in the central and western areas of the country. However the outlook in some of the pastoral areas in the north and north–east is less optimistic with the almost total failure of the rains in May.

Earlier predictions of a break in the food pipeline in June were narrowly averted when the government of Kenya contributed an estimated 26,000 MT of cereals. However, funding shortfalls forced WFP to cut rations for supplementary feeding programmes in early June (WFP 08/06/01). There is also concern over the supply of oil and pulses for the general ration (FEWS 14/06/01).

Refugees

There remain an estimated 203,500 refugees from Sudan, Somalia, Ethiopia, Eritrea, Uganda, Burundi, Rwanda and the Democratic Republic of the Congo, in camps around Dadaab in the remote north–east of the country and in Kakuma camps in the north west (UNHCR 2001; USRC 2001). These camps are located in some of the districts worst affected by the recent drought (Garrissa and Turkana Districts respectively).

RNIS has received no new nutritional surveys from the Dadaab camps. However, an MSF press release stated that there had been an alarming increase in the number of children in the feeding programmes, from 72 under fives in January 2001 to 196 by mid June. Over the past six months, the refugees in Dadaab, north–eastern Kenya, have experienced a 35% drop in the amount of food distributed. This has meant that on average refugees are receiving a ration of 1,399 Kcals, instead of the recommended 2,100 Kcals. MSF attributes the increase in malnutrition to the observed cuts in refugee rations (MSF 26/06/01). The increase in malnutrition gives cause for concern, given that in February 2001 the prevalence of malnutrition was 16.1%, including 4.5% severe mal–nutrition (RNIS 32 and 33). At the time however, the coverage of feeding programmes was only 30% of the camp population, so the increase in the number of children in the feeding programmes could partly be a result of improved coverage.

IRC/UNHCR and ICH conducted a survey in Kakuma refugee camp in April 2001. At the time of the survey, the number of refugees was estimated at 72,459. The majority of the refugees are Sudanese, but there are also Somali, Ethiopian, Eritrean, Ugandan, Burundian, Rwandan and Congolese refugees (IRC/HCR/ICH 12/04/01). Whilst the survey assessed anthropometric and micronutrient status, the results of the micronutrient survey are not yet ready available and so only the anthropometric results are reported.

The results indicate an estimated prevalence of acute malnutrition of 17.2% (W/H <–2 Z–scores and / or oedema) including 1.4% severe (W/H <–3 Z–scores and / or oedema). These results are similar to those reported in RNIS 32 and 33, from a UNHCR survey in June 2000. The survey in June 2000 did not randomly sample the whole camp population, so the results of the two surveys are not strictly comparable. It does appear, however, that the prevalence of malnutrition in Kakuma camp, has remained stable at 17–18% (<–2 Z scores) since early 1999 (note that according to% of the median the prevalence of malnutrition is 8.5% <80% WFH). Coverage of the feeding programme is 32%. It is difficult to interpret the prevalence of malnutrition without further information on the health environment to estimate the health risks associated with malnutrition. From the survey report, the energy content of the ration appears good (2,200 Kcal), but no information on the equity of the distribution system is provided. The ration is inadequate in riboflavin.

Overall

The nutrition situation for refugees in Dadaab appears to be deteriorating (category II). Food rations for refugees in Dadaab have been inadequate, and they are located in one of the worst drought affected districts. The nutritional situation for refugees in Kakuma camps is stable, at moderately high prevalence of malnutrition (category III).

Recommendations

- Support the 2001 UN Inter–Agency Appeal.

Dadaab camps

- Increase the general ration distributed in the camps.
- Investigate whether the increase in children in feeding programmes is a result of improved coverage or an increased prevalence of malnutrition.

Kakuma camp (IRC/HCR/ICH 12/04/01).

- Ensure the continuation in adequate general food ration.
- Investigate the equity of the general ration distribution system.
- Assess the health environment to be able to better interpret malnutrition rates.

Somalia

Opposition to the Transitional National Government (TNG), established in August 2000, has resulted in conflict within the country, particularly in and around Mogadishu, which is currently divided amongst five small armies. The potential for conflict was illustrated on the 12th of May as fighting broke out when one of the opposition leaders from the Somali Reconciliation and Reconstitution Council (SRRC) tried to enter the port area controlled by factions loyal to the TNG (IRIN 12/05/01). The biggest fear is that the opposition to the TNG could lead to an escalation of conflict within the whole country. Heavy fighting between militia loyal to Aideed and Ato (of the SRRC) and those loyal to the TNG continued in Mogadishu until mid July (IRIN 18/07/01).

Insecurity and threats to humanitarian workers increased, and has meant that humanitarian access is now considered to be at its worst since the departure of UNOSOM in 1995 (UNICEF 05/01).

The *Gu* rains began as expected in April and were slightly less than average. Many farmers responded by planting their long cycle crops such as sorghum and maize only to find that crucially the rains failed in May and June (FSAU 10/07/01). The areas most affected by the failure of the *Gu* are rain fed cereal producing areas of Bay, Bakool, Gedo and Hiran. The lack of rain has resulted in the loss of much of the Sorghum crop and WFP have issued a warning of a potentially serious food insecurity situation. The Food Security Analysis Unit (FSAU) predicted that the total sorghum harvest could be sixty percent lower than average post war figures (FSAU 10/07/01). Rainfall was slightly better in some other areas of the country particularly in Middle and Lower Shabelle and Middle Juba. In June, WFP put out an appeal for 20,000 MT of relief food to allow the agency to preposition supplies for the next 12 months (WFP 01/06/01).

Those most affected by the rain failure are likely to be the IDPs, because they are often separated from their kin, as well as poorer agro pastoral households and the urban poor. The FSAU estimates that there are about 340,000 people in the four most affected regions who will be most obviously vulnerable (FSAU 10/07/01). In addition to continued political instability and poor rains, inflation caused by the illicit importation of Somali banknotes is threatening food security by reducing the purchasing power of vulnerable groups (IRIN, 21/05/01).

UNICEF Somalia has released the results of their End of Decade Multiple indicator cluster survey for 2000. Combined data for Somaliland, Puntland in the north as well as South and Central Somalia, give a prevalence of acute malnutrition of 17% (W/Ht < -2 Z-scores). This is extremely high for a national survey, and will include some areas with much higher levels. Disaggregated data give the highest prevalence for South and

Central Somalia (about 20%), followed by Puntland (12–13%) and the lowest prevalence was found in Somaliland (<10%). Whilst the method and time of year is not given (in FSAU nutrition update for July 2001), the prevalence of malnutrition appears closely associated with political instability.

Gedo

Continued political instability and poor *Gu* rains, contribute to a poor food security situation in Gedo. The FSAU reports sharp increases in local cereal prices and drops in the prices of livestock. Substantial out-migration from northern areas has been reported. FSAU also reports that southern areas of the region are experiencing in-migration from Somali livestock traders returning from Kenya where livestock prices have dropped (FSAU 08/06/01; 10/07/01).

Luuq

ACF report an increase in the numbers of children in the Feeding Centre (SFC) in Luuq, from 100/month in March 2001, to 305 per month in April and 500 per month in May. Similar trends have been seen in their Therapeutic Feeding Centre (FSAU, June 2001). AMREF reported a sharp increase in the proportion of malnourished children attending the MCH clinic in May (FSAU, July 2001).

An increase in the prevalence of malnutrition would be expected just before the *Gu* harvest. AMREF however attributes the sharp rise in the proportion of malnourished children to the arrival of displaced from Elbon (Gedo) and Wajid (Bakool) into Luuq town. FSAU reported the arrival of 1200 new IDPs in June. ACF is planning to open another feeding centre in Elbon. The combined effects of inflation and poor rains have increased food prices, thus increasing food insecurity. The rise in the cost of fuel has hit communities dependent on irrigated farming along the Juba River. The effects of bad rains in 1999 are still felt and farmers were unable to plant as much as they would have liked, despite relatively good harvest rains in 2000 (FSAU 06/01).

Beled-Hawo (Bulla Hawa)

Figures from MCH clinics indicate that whilst the number of children attending the Bulla Hawa centre has dropped, the proportion of those presenting with acute malnutrition seems to have increased from earlier in the year (FSAU 06/01). High proportions of malnourished children continue to be reported, despite ongoing supplementary feeding programmes and targeted food distributions by CARE (FSAU, July 2001).

Bulla Hawa suffered from inter-clan fighting in March, which resulted in considerable displacement of population to neighbouring Kenya (FSAU 06/01). Initial estimates of 7–10,000 people displaced into Kenya, were revised downwards to 5–7000 in June. With the support of UNHCR, 300 families were registered to move to refugee camps inside Kenya. The majority returned spontaneously to Bulla Hawa in June (IRIN, 20/06/01). The new District Commissioner for Bulla Hawa, however reported that the returnees were facing food problems on their return.

El Wak

A rapid screening of children in El Wak Somalia was done following a survey in El Wak Kenya, which showed 28.1% malnutrition (W/Ht < -2 Z-scores) in May 2001. Because of lack of access for international staff, members of the local NGO Soma Action were trained in doing a MUAC assessment. 6.4% of children were found to be severely malnourished (<11 cm) and 38% of children were moderately malnourished. RNIS can-not comment on the reliability of the findings, because the methods do not appear to follow standard procedure. At the time of the assessment, the District had not yet received the *Gu* rains, and livestock was reported to have moved out of the District.

Bay and Bakool

Bay and Bakool Regions remain food insecure regions, particularly following the recent failure of the *Gu* rains. This has resulted in the failure of most rain fed crops and a deterioration in water and pasture sources. The projected *Gu* harvest in Bay region has been estimated at 15% of the post war average (FSAU 10/07/01). Many people from Bay have also begun to migrate to areas in the Shabelle and Juba valleys in search of employment.

The RNIS has not received new nutritional survey information for the region but MCH data indicates increasing rates of malnutrition from the monthly screening, which is expected in the period just prior to the

harvest.

Juba valley

The FSAU reports that the region has experienced good *Gu* rains in 2001 and that the overall crop condition is good. This has improved pasture, water and livestock conditions and greatly improved the food security outlook (FSAU 08/06/01; 10/07/01).

In March/April of 2001 UNICEF conducted a nutrition survey in Jamame district, Lower Juba. The survey was carried out in response to fears that the district was suffering from failed harvests in 2000. The survey showed a prevalence of malnutrition of 14.3% (W/Ht <-2 z-scores and/or oedema) including 2% severe acute malnutrition (W/Ht <-3 z-scores and/or oedema). The survey also noted high rates of morbidity, particularly diarrhoea and respiratory tract infections, and the overall rates of observed malnutrition were considered high for an agriculturally productive area (FSAU 05/01), however the survey was conducted at the end of the dry Jilaal period. Given the good *Gu* rains, the next harvest prospects are good and it is hoped that the nutrition situation will improve.

Lower and Middle Shabelle

The RNIS has received no new nutrition information from Shabelle, however the FSAU reports that the *Gu* rainfall in the two areas has been good. This has improved water sources and pasture and livestock conditions and milk yields are reportedly good. The cereal crops are generally good and the price of food products has not risen. The food security of the poorer, more vulnerable households is described as good as employment and petty trade opportunities seem high and there are wild fruits and vegetables to collect (FSAU 08/06/01; 10/07/01).

Mogadishu

RNIS has received no new nutritional information from Mogadishu. The situation appears alarming however, due to continued fighting and the withdrawal of aid workers. The importation of Somali shillings continues to cause inflation of Somali currency and has had the effect of increasing food prices. Food prices are also likely to rise in reaction to the reduced *Gu* grain harvest, and it is likely that this will negatively impact the many displaced in Mogadishu.

Northern Regions

Somaliland

The most important political event in the northern regions has been the referendum for independence in Somaliland on the 31st of May 2001. The referendum sought to assert the independent status of Somaliland and to introduce sweeping political changes by removing the present clan-based system of governance (IRIN 10/07/01). The administration has since announced that 97% of people voted resoundingly for change. The historic event has met with very little world recognition but internally the TNG denounced the referendum as illegal and stated that the splitting up of Somalia into small fiefdoms was 'unacceptable' (UNICEF 05/01). This may have implications for future insecurity in the area.

UNHCR closed the second of 8 camps in Somali Region in Ethiopia, resulting in an estimated return of about 22,000 refugees to Somaliland in June 2001. The same month, UNICEF/MoH Somaliland and FSAU carried out a nutritional survey in returnee camps in and around Hargeisa town. Preliminary results indicated that the prevalence of malnutrition is significantly higher in returnees than in the resident population. Observations from some of the survey teams indicate the nutritional situation in some settlements to be very poor but the full results will be published later (FSAU 07/01).

Rains were late in many areas of the north, adding to existing vulnerabilities from the livestock ban (see RNIS 32 and 33 and FSAU flash report March 2001). The last RNIS reported that Burao town was particularly vulnerable to the livestock ban because it has one of the largest livestock markets. MCH statistics show an increasing trend in the proportion of malnourished children over the course of 2001. The FSAU points toward the high catchment area of the clinic and high rates of attendance and suggest that observed trends are quite significant (FSAU 06/01). Despite a slight relaxing of the ban from the UAE there does not appear to be much change regarding the economic impacts (FSAU 06/01).

Puntland

Reports from SRCS in Garowe, report that the proportion of malnourished children coming to Dangorayo MCH increased from January to June 2001 (FSAU, 07/01). The welfare of IDPs and the urban poor is thought to be negatively affected by the local currency devaluation and the livestock ban (FSAU, 06/01). The *Gu* rains have also been poor in terms of both distribution and volume meaning that there could be water and pasture problems in coming months. The partial lifting of the livestock ban in the UAE has marginally increased employment opportunities for some groups although this is extremely limited at present.

Overall

The combined effects of political instability, inflation, the livestock ban and failure of the *Gu* rains in many parts of the country, will affect the food security of many people particularly in southern Somalia and within this, particularly the displaced. The recent fighting in Mogadishu and the evacuation of aid workers places the displaced in Mogadishu at highest risk (category II). Displaced in Gedo are also considered at moderate risk; their food security situation is precarious and likely to deteriorate, but targeted food distributions and feeding programmes continue for these groups (category III). Returnees from Ethiopia to Somaliland, particularly those who live in settlements around Hargeisa town, also appear at risk (category III).

Recommendations

- Support nutritional surveillance done by UNICEF, FSAU etc.
- Support WFP's request for the pre-placement of contingency food stocks.
- Support peace and reconciliation moves between the SRRC and the TNG.
- Continue to monitor the importation of illegal currency and its effect on inflation.

Sudan

The humanitarian situation in Sudan has deteriorated markedly over the course of 2001 as a result of an escalation in insecurity in much of southern Sudan, particularly in western Bahr-el-Ghazal and drought in Dafur and the Red Sea Hills area. The effects of the drought and increased insecurity have exacerbated the current hungry season and resulted in a dramatic increase in the need for food assistance. Current estimates indicate that, as of June 2001, over 3 million people are affected by drought or conflict or both in north and south Sudan (FEWS 15/06/01) and where these needs are not met, falls in nutritional status can be expected. IDPs in areas of Western Bahr el Ghazal, Upper Nile, Eastern Equatoria, Darfur and Kordofan are particularly vulnerable.

A one-day peace summit in early June between John Garang, the SPLM leader, and Omar Hassan al-Bashir, the Sudanese president failed to reach a cease-fire agreement (UN-EUE 06/06/01). One of the main sticking points in the talks were the rich oil reserves found in the Western Upper Nile region. Oil has become an increasingly important source of revenue for the Government of Sudan (GoS) and much of the recent fighting has been over control of oil reserves. Conflict between the GoS and rebel movements in the south has continued and even escalated over the course of 2001.

More recently the SPLA has given a cautious welcome to the latest Libyan-Egyptian Sudan peace initiative aimed at ending Sudan's 18-year civil war. The Sudanese Government has also announced that it had accepted the peace initiative. The initiative calls on both sides – the government and the opposition – to set up a committee leading to a national reconciliation conference. (BBC 05/07/01).

Continued Insecurity

May and June have seen large-scale offensives by both the GoS, in the Nuba mountain area of the country, and from the SPLA in Western Bahr el Ghazal. The offensives have resulted in tens of thousands of people being displaced into neighbouring areas. Insecurity throughout the south has been further heightened by the continued use of aerial bombing by the GoS. Despite an announcement by the GoS that they would cease all air attacks by May 25th, the attacks have continued (IRIN 28/05/01) and bombs were reported to have narrowly missed a WFP plane conducting food drops in Bahr el Ghazal on June 8th (IRIN 08/06/01). The bombing tends to be fairly indiscriminate and coupled with the upsurge in fighting has led to a marked deterioration in the general security situation. This is significant because it is affecting humanitarian access to

populations who rely on humanitarian assistance to meet at least some of their food needs. For example, in May 2001, the International Committee of the Red Cross suspended its humanitarian flights to Sudan for two weeks, after a Danish pilot was killed flying over southern Sudan (BBC 21/05/01).

Continued drought

The increased insecurity and displacement comes at a time when in large parts of Sudan people are still suffering and struggling to cope with the effects of two years of poor rains. The drought is particularly severe in Darfur and north Kordofan where water shortages are now critical and up to 600,000 people were estimated to be in urgent need of food aid (WFP 29/03/01).

Increasingly people are having to fall back on coping strategies which are potentially damaging to peoples health and livelihoods in the longer-term. For example, reducing food intake and the consumption of crucial seed stock. Lower harvests combined with depleted stocks have led to a sharp rise in cereal prices; with a threefold average increase in March and April 2001 compared to the same period in 2000 (FAO/GIEWS 14/05/01). This average figure masks more extreme price rises in worst affected regions. This has a significant impact on the purchasing power of vulnerable groups and increases dependence on wild foods and relief aid. Whilst food deficit is often experienced in many areas at this time of year, the drought has been extreme and its effects compounded by the ongoing conflict. In the south the conflict continues to restrict the use of many coping mechanisms, particularly those that require mobility, leaving many extremely food insecure and at great risk of acute malnutrition (FEWS 11/05/01; SCF-UK 01/06/01).

Humanitarian Response

The delivery of essential food assistance has been further constrained by an initial low donor response to the general appeal for Sudan. As a result food distributions were 50–60% of the planned ration at a time when people's food needs were increasing (FEWS 15/03/01). In response to the increasing needs for food aid, WFP took the decision to divert 23,200 tonnes of food destined for Ethiopia to Sudan, which significantly boosted the pipeline in April (IRIN 10/04/01). The United State's government has also recently pledged 40,000 MT of food aid to both the GoS and rebel-controlled areas of the country. This offers a significant boost to the food pipeline (FEWS 15/06/01). Other responses have included the distribution of seeds, agricultural and fishing equipment by FAO and INGOs.

South Sudan, non-GoS controlled areas (OLS Southern Sector)

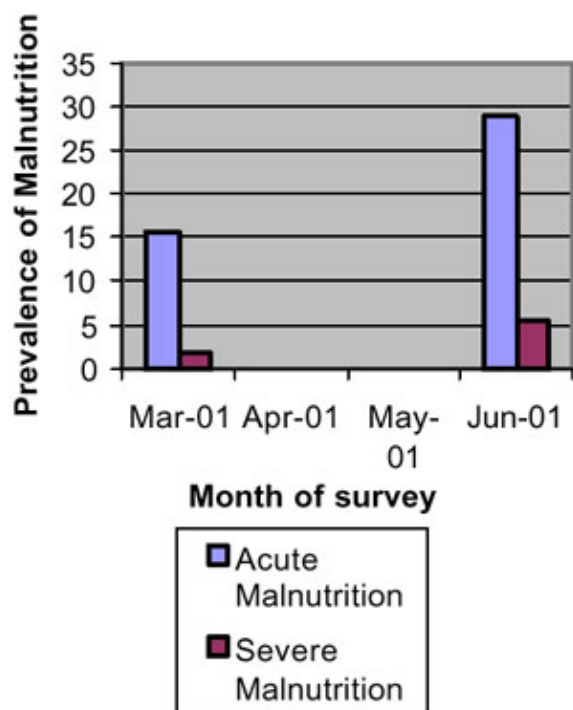
The WFP/Technical Support Unit (TSU) estimates that there are 300–400,000 IDPs in southern Sudan as of May 2001. This includes people returning to South Sudan, particularly from the north (FEWS 16/05/01)

Bahr El Ghazal (BEG)

Rainfall has been erratic since April and delayed the main planting season. Critically this is likely to extend the hunger season for one to two months in the Aweil counties and parts of Gogrial and Twic counties. This is likely to have a very negative impact on food security in these areas but the single greatest determinant of food security remains the insecurity generated by the war (FEWS 16/06/01). May and June have seen a strong offensive in Western Bahr el Ghazal by the SPLA, around the government held towns of Wau, Aweil and the infamous railway track. IRIN reports that 30,000 people have been displaced and are fleeing north to Ed Daein in South Darfur and to the surrounding counties. Current reports of their condition remain sketchy but it is thought to be extremely poor (FEWS 16/06/01).

Aweil East

Poor rains and insecurity continue to affect the area, and have severely disrupted the planting season. WFP/TSU estimated that there were a total of 28,500 IDPs and returnees in the area in May while most were fleeing the fighting around the railway line or from within Aweil West (WFP/TSU 05/01). Tearfund has conducted two nutrition surveys in Malualkon, Aweil East. The first, in March 2001, reported 15.5% acute malnutrition (W/Ht < -2 Z-Scores and/or oedema) and 1.8% severe acute malnutrition (W/Ht < -3 Z-Scores and/or oedema) (see RNIS 32 and 33). A follow-up survey in June indicated that the nutrition situation had substantially deteriorated with a prevalence of acute malnutrition of 28.9% (W/Ht < -2 Z-scores) including 5.5% severe wasting (W/Ht < -3 Z-scores) (see graph below) (Tearfund 07/06/01).



Tear Fund surveys in Aweil East during 2001

The results are particularly alarming because the survey was conducted in the hunger gap and the population faces further food shortages ahead. It indicates that household food stores are already severely depleted if not empty and that reliance on relief and wild foods has risen dramatically (Tearfund 07/06/01). The possibility of increased insecurity remains high and this will further disrupt existing coping mechanisms, cause population displacements and further nutritional decline and increased risk of dying. To put the figures into perspective, during the height of the 1998 famine according to Tearfund surveys the rate of acute malnutrition reached 36.2%.

MSF-F also carried out a nutrition status and health survey in the same area in April. The RNIS does not have access to the report, but WFP report that the rate of acute malnutrition was 17.1% including 1.7% of severe (using Z-scores) (WFP 28/06/01). The lack of information on methodology from the MSF-F survey makes comparison with the Tearfund survey very difficult. Both agencies report falls in the number of children attending their selective feeding programmes as mothers take their children to the fields during the cultivation season. However, numbers are expected to rise again with the end of the cultivation period (WFP 28/06/01).

Aweil West

Recent insecurity has particularly affected both East and West Aweil Counties, and Concern Worldwide had to pull out of the area but will go in when conditions permit. As a result, no new survey information exists but given the insecurity and the conditions seen in Aweil East, it is likely that the nutritional situation of the populations has already been compromised. In May WFP/TSU estimated that there were 22,940 IDPs and returnees in the area (WFP/TSU 05/01).

Gogrial County

WFP/TSU reported 19,000 IDPs in the area mostly centred around Akon (WFP/TSU 05/01). Agencies on the ground have noted deteriorating nutritional conditions with increased admissions to selective feeding programmes. MSF-B conducted a 30x30 cluster survey in Ajiep, Kuajok Payam, in May and found an estimated prevalence of acute malnutrition of 15.5% (W/Ht <-2 Z-scores and/or oedema) including 2.2% severe malnutrition (W/Ht <-3 Z-scores and/or oedema). MSF-B reports that the results are double those of a similar survey done in July 2000 and are an indication of a rapidly deteriorating situation. Mortality rates were not estimated but the coverage rate of measles vaccination was very poor and the potential for an epidemic was considered high (MSF-B 14/05/01). MSF-B opened a Therapeutic Feeding Centre (TFC) in Ajiep in May and are expecting the number of admittances to increase from an initial 45 cases in the first 3 weeks. The relative high prevalence of malnutrition at the beginning of the hungry season is a result of insecurity and drought and the risk of further deterioration is high (FEWS 15/06/01).

Twic County

A TSU assessment in March 2001 estimated that there were a total of 7,400 IDPs and returnees in Twic County (WFP/TSU 05/01). The late rains threaten to extend the hunger gap for one to two months, which will exacerbate the current nutritional risk. The most recent nutritional survey information is from a Goal nutrition survey in February of three payams, Wunrok, Turalei and Aweng in Twic County. It estimated 26% acute malnutrition (W/Ht <-2 Z-scores and/or oedema) including 2.4% severe wasting (W/Ht <-3 Z-scores). The results are alarming and particularly so given that they were at the beginning of the hunger gap. The survey indicated that there was little food available on the ground and that general food security was poor. The survey included pastoralists and agro-pastoralists, and noted that less than half the people interviewed owned cattle, with one third having access to milk, which is a major food source. Little stored food was evident and people reported a high dependence on wild food sources (Goal 12/02/01). A recent WFP report indicates that the numbers in the Goal SFC are rising rapidly and calls for close monitoring of the situation (WFP 28/06/01).

Goal operate four feeding programmes in the area, and eight clinics. Two of their clinics were without food because of logistical difficulties. They noted with alarm that selective feeding programmes were not the answer to the current widespread food insecurity, which requires a regular and reliable general food distribution to all those who need it.

In the absence of a general ration, a selective feeding programme is likely to encourage the worst affected to abandon their homes and congregate around feeding centers in the hope of some assistance. The impact of this 'magnet effect' around feeding centers has in the past had a catastrophic effect on the health environment and the displaced people's access to food, and resulted in massive mortality, as witnessed in Kuajok Payam in 1998. Apart from this problem, take-home supplementary feeding is of limited benefit as the distances are too long between the centers and peoples homes in the three payams for mothers to walk on a weekly basis for a few kilograms of Unimix.

Equatoria

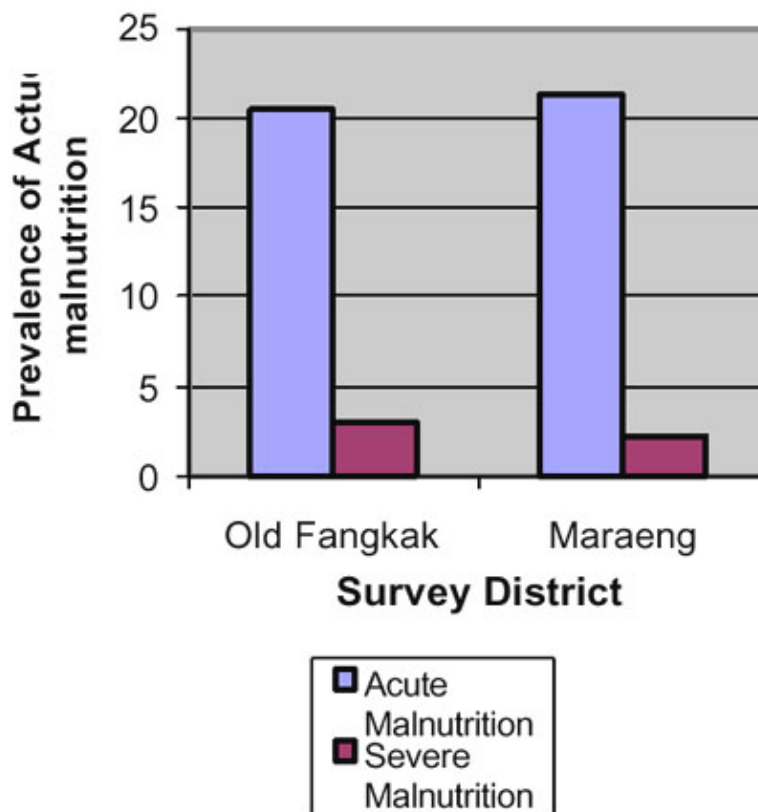
The food security situation in the surplus producing counties of the Western Equatorial region remains relatively good. The rainfall and crop development has been described as good. The RNIS does not have any recent nutritional information but the general situation in the West is not deemed to be critical. Rains have generally been good in the Eastern parts of the region and this will mean that the majority of the IDPs in Kapoeta, estimated at around 15,000, will most likely be able to supplement their food aid with wild food sources. The rains are also likely to have a positive impact on livestock and milk production (FEWS 15/06/01; WFP/TSU 05/01). However, the situation remains precarious in some areas and FEWS reports that WFP suspended food distributions to Kapoeta in May as a result of increased insecurity and looting of food. It is feared that this may lead to further depletion of livestock holdings (FEWS 11/05/01).

Upper Nile / Jongolei

FEWS reports that the rains have been good in some parts of Leech, Latjor and Phou states. However the food security situation looks extremely grim as a result of continued conflict in the Western Upper Nile region around rich oil fields. The extent of the fighting has displaced tens of thousands of people and made many areas inaccessible, leading to a resultant food deficit, as people are simply unable to access potentially fertile land. WFP/TSU reports that there are an estimated 50,000 IDPs in Leech state with a further 68,000 in Latjor and 29,000 in Phou (WFP/TSU 05/01).

Phou State

ACF-US have recently conducted two nutrition surveys in Old Fangak and Maraeng districts of Phou State. The surveys found an estimated prevalence of 20.4% acute malnutrition in Old Fangak and 21.3% in Maraeng (W/Ht <-2 Z-scores and/or oedema) including 3% and 2.3% severe malnutrition (W/Ht <-3 Z-scores and/or oedema) respectively, which are serious cause for concern as they occur prior to the main hungry season. (See Graph below)



ACF-US Nutritional Surveys in Phou State, Western Upper Nile, April 2001

The food security situation will almost certainly deteriorate with the coming of the hunger season and the survey noted that traditional trade opportunities were almost non-existent due to the insecurity. The survey also highlighted the extremely poor access to medical care and reported high rates of morbidity. The main cause of death was diarrhoea and malaria. The lack of health care means treatment is generally unavailable. Vaccination coverage was extremely poor, with a total of only 4% of children being vaccinated for measles from card and mother/carer report (ACF-US 04/01). This makes the population extremely vulnerable to epidemics that could further compromise nutritional status and increase mortality.

Bieh State, Jongolei

In the last RNIS high rates of acute malnutrition were reported from MSF-B nutrition surveys in Akobo, Bieh State. The high rates of malnutrition were due to large numbers of IDPs and the poor food security situation. The RNIS has no new nutrition survey information for Akobo but a recent FEWS visit to the area observed that the MSF-B supplementary feeding centre was admitting exceptionally large numbers of beneficiaries. The number of new admissions rose by 28% in May with a reported 3,200 beneficiaries at the end of June (WFP 28/06/01). MSF-B estimates that 40% of the beneficiaries are IDPs. The agency also reports that the incidence of diarrhoea and malaria was very high in those attending centres (FEWS 15/06/01).

South Sudan, GoS controlled areas (OLS Northern Sector)

The GoS controlled areas of Southern Sudan remain affected by the increased insecurity and the prevailing drought conditions. SPLA offensives led to the capture of certain GoS held towns in Western Bahr el Ghazal, in early June. The fighting displaced tens of thousands of people from the towns of Raga and Daym Zubayr who are making their way northwards to southern Darfur (IRIN 02/07/01).

Unity State

The situation in Unity state remains extremely precarious with continued fighting. The fighting is largely around the oil rich areas of the state and has resulted in the displacement of many thousands of people. The RNIS has not received any new nutritional information from the area. The last survey was conducted by ACF-F in July 2000 and indicated very high rates of acute malnutrition. Given the prevailing security and drought conditions, it is very likely that the nutritional risk in the area is extremely high.

Northern Sudan. Transitional Zone

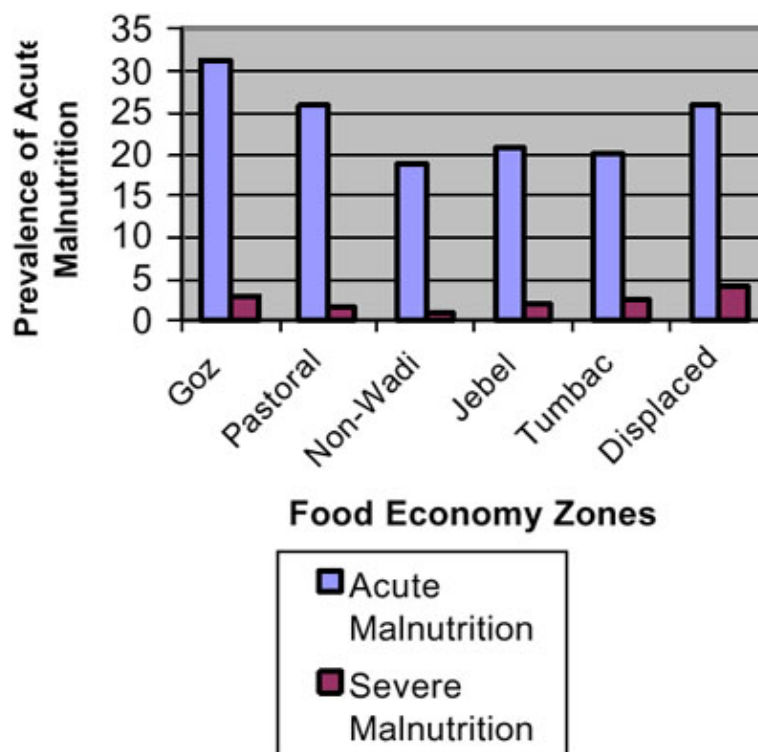
Drought and war have had serious impacts on the populations of government held areas of Sudan and FEWS estimate that there are currently 1,820,000 affected people (FEWS 15/06/01).

South Kordofan

The RNIS has not received any new information from South Kordofan but current estimates indicate about 100,000 people are currently suffering from drought or war displacement. The GoS has escalated attacks in the Nuba mountains area and this has resulted in the closure of all the airstrips that had been previously used to bring food and medical relief to the area. Soldiers are also reported to have destroyed houses and food stores (IRIN-HOA 04/06/01). The area is also suffering from a very severe drought that has resulted in the loss of most crops and seen the rapid deterioration of water sources and livestock condition. Coupled with the insecurity, the food security outlook is extremely grim and the risk of nutritional deterioration extremely high.

Darfur

Darfur is suffering from a drought that some are claiming is the worst in 60 years, with over 400,000 people critically short of water (SCF-UK 15/05/01). SCF-UK conducted a series of nutritional surveys in five food economy zones in North Darfur (see graph below), one of which included the displaced living on the outskirts or El Fasher. The overall prevalence of acute malnutrition was 23.4% (W/Ht <-2 Z-scores and/or oedema) and included 2.1% of severe malnutrition (W/Ht <-3 Z-scores and/or oedema) (SCF-UK 15/05/01).



SCF-UK Nutrition surveys in N Darfur, March-April 2001

The very high levels of acute malnutrition six months before the peak of the hungry season are extremely grave. The displaced population were considered particularly vulnerable as they have fewer resources and coping strategies to fall back on. The high level of severe malnutrition among the displaced may also indicate a poorer public health environment. Displaced people were 1.7 times more likely to report sickness and 1.5 times more likely to report diarrhoea than others surveyed.

The surveys also highlighted low rates of measles vaccination (36.6%) which combined with the high rates of acute malnutrition greatly increases the risk of measles epidemics with devastating effects on risk of dying and nutritional status (SCF-UK 15/05/01).

The main cause of acute malnutrition was food insecurity; lack of availability and limited access to food sources and the general breakdown in the usual mechanisms to cope with food scarcity. Three out of the previous four harvests have been very poor or failed altogether, leaving people with almost no stored food. As a result the survey indicated that 87.7% of people are dependent on purchased food. In times of food crisis wild foods usually account for a large proportion of food consumed but the drought has resulted in the failure

of koreb, one of the most commonly eaten wild food source. The price of staple cereals has risen beyond the reach of most people and the prices of livestock are declining making the terms of trade for people trading livestock to buy cereals extremely poor. In the pastoral food economy zone of North East Darfur (Malha) the rise in acute malnutrition has closely followed the rise in millet prices.

Employment usually offers another alternative way to generate cash for food purchase but the survey also records considerable slumps in labour wage rates. The author convincingly demonstrates that many of the traditional coping mechanisms have been exhausted not just for the poorer sections of society but that everybody has been affected. A frequency distribution graph of all the children showed that the nutritional status of the previously better-nourished children has slipped as much or more than those presenting with a poorer nutritional status. The population is extremely nutritionally vulnerable and in desperate need of food assistance and associated interventions to prevent loss of life (SCF-UK 15/05/01).

Khartoum

The Greater Khartoum area contains almost two million IDPs but only a few hundred thousand reside in designated camps. The RNIS has not received any recent nutritional information on the IDPs in the area but the OLS Southern sector have noted that there have been considerable returns to Southern Sudan from the North. This would appear surprising given the poor conditions in the south and it is considered indicative of a deteriorating situation for displaced in the north (FEWS 16/06/01).

Refugees

The war between Ethiopia and Eritrea sent many Eritreans across the border into Sudan. An agreement between Eritrea, UNHCR and Sudan was signed in March 2001 to facilitate the voluntary repatriation of refugees from Sudanese camps. The RNIS does not have any information on the nutrition situation of the refugees but it is assumed to be non critical. The Gash-Barka zone in Eritrea has been identified as an area of resettlement and surveys within the refugee population have indicated that 71% wish to return. Provisional planning figures estimate that 62,000 refugees will return from Sudan to Eritrea during the course of 2001 (FEWS 07/05/01).

Repatriation efforts began in May 2001 and it is reported that by June 26th a total of 16,588 had being repatriated by convoys from the camps of Hawata, Mafaza and Gulsa. Efforts have increased to move the refugees before the upcoming rainy season in Eritrea, which starts in late July. At the end of June, 27,000 had signed up for return (UNHCR 26/06/01).

Overall

The situation in Sudan has deteriorated significantly during the first half of 2001. The re-occurrence of drought in many areas of the country has left many people food insecure and reliant on a variety of marginal coping mechanisms. The escalation of insecurity, particularly in the southern areas, has led to massive displacement of population and further eroded people's ability to cope with the deteriorating situation. The RNIS has reports of high rates of acute malnutrition from various areas and there is a great need for a substantial humanitarian relief effort to avert further deterioration of the nutrition situation and associated mortality (category I).

Recommendations

From the Greater Horn of Africa Food Security Update of June 15th (FEWS 15/06/01)

- Increase pledges to the humanitarian appeal
- Improve the speed of response to avert the short term humanitarian crisis

From the Tearfund survey in Malualkon, Aweil East County (Tearfund 07/06/01)

- Continue supplementary feeding and improve coverage through the use of extension workers.
- Increase the current general food ration from a 50% ration to 75%, during this phase of the hunger gap.

- Improve targeting of the general ration at the most vulnerable, particularly those attending feeding centres.

From the MSF–B survey in Kuajok Payam (MSF–B 14/05/01)

- A full general food distribution should be given during the cultivation period when accessibility and availability to food is at its lowest.
- A blanket supplementary ration should be distributed to all children under 3
- Implement a measles vaccination campaign

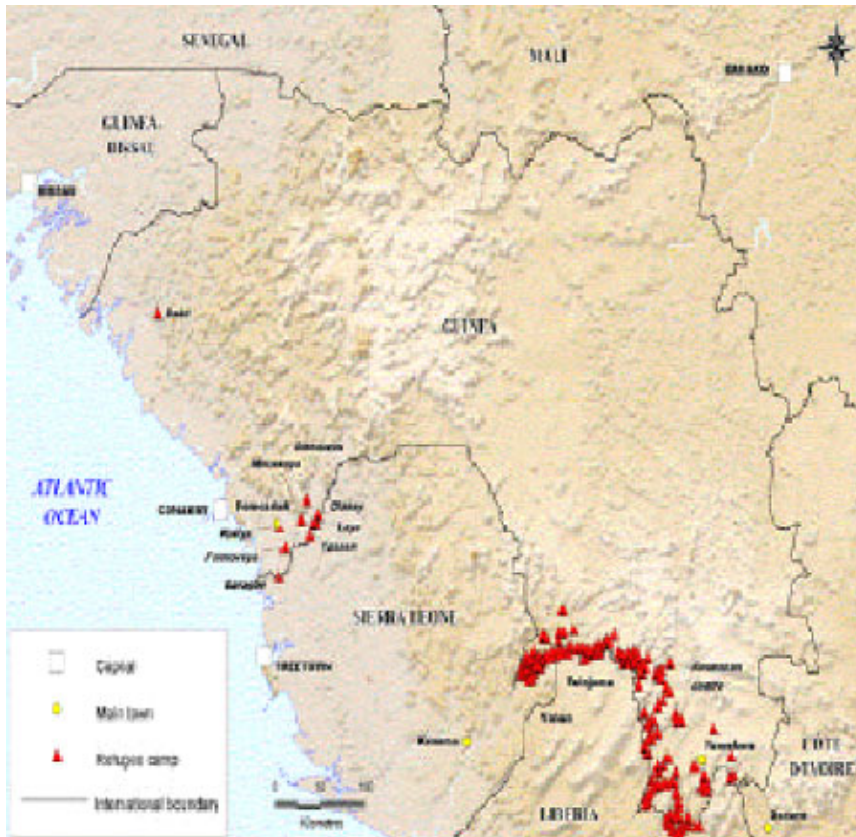
From the ACF–US surveys in Phou State (ACF–US05/01)

- WFP to continue their food distribution.
- Start an SF programme to cover the hunger gap.
- Introduce nutrition and disease surveillance.
- Undertake emergency measles immunization campaign and start routine immunizations in PHC structures.

From the SCF–UK survey in Darfur (SCF–UK 15/05/01)

- An advocacy campaign to raise international awareness to the seriousness of the situation in North Darfur.
- Introduce a blanket supplementary food distribution to all children under five, pregnant and lactating women.
- Establish intensive supplementary feeding programme for severely malnourished.
- Carry out immediate measles vaccination programmes.

WEST AFRICA



The situation in West Africa remains highly changeable. Insecurity has continued along the borders that Guinea shares with Sierra Leone and Liberia and the security situation has deteriorated considerably within Liberia. However, the reporting period has seen a stabilisation of the situation within Sierra Leone. This continues to result in an steady influx of both returning Sierra Leonean refugees and new refugees from both Guinea and Liberia. Furthermore, WFP has issued warnings that it is likely to suffer pipe line cuts in September for its West African programmes, unless further funding is forthcoming (IRIN–WA 28/06/01).

Cote d'Ivoire

Instability in neighbouring Guinea and fighting in the Lofa region of Liberia has resulted in a new influx of refugees into the country. According to UNHCR there are 120,000, mostly Liberian refugees, remaining from an influx in 1999 (IRIN–WA 29/05/01). A recent OCHA update reported that a steady flow of 50 Liberian refugees a day has been entering Côte d'Ivoire since early May when fighting broke out in Lofa county, northern Liberia. From May 3rd to July 19th a total of 4,076 new Liberian refugees have been registered (IRIN–WA 20/07/01).

The refugees are being accommodated in the Zone d'Accueil des Refugies (ZAR), which is an area designated by the Ivorian government to shelter refugees. The ZAR is made up of two prefectures, Danane, located only 30 Km from Liberia, and Guiglo, 150 Km to the south of Danane and the refugees are not permitted to move out–side of this area. Guiglo contains the only refugee camp in Côte d'Ivoire, called Nicla, which currently has a population of 8,000 people (OCHA 28/06/01). The rest of the refugee population lives in parts of Guiglo and Danane and ten small towns in between. Reports of the new refugee influx have indicated that most appear to be girls and women between five and sixty years of age (OCHA 28/06/01). The high proportion of women and children make the new refugees particularly vulnerable as a result of poor work opportunities, and the population is likely to be dependent on humanitarian assistance for the immediate future.

WFP has begun distributions to 500 newly arrived refugees who have already arrived in Nicla camp in Guiglo. The 500 are the initial caseload out of 1,068 who have registered to go to the camp. It is reported that they will receive a full ration of corn, vegetables, vegetable oil and salt (IRIN–WA 24/07/01). The RNIS has no nutrition information on either the long term or new refugees in the country

Overall

Many of the long term refugees in Côte d'Ivoire receive assistance and are able to seek employment and are therefore not considered at high risk (category IV). However, the new refugees are likely to be at slightly elevated risk as a result of their recent displacement and the high percentage of women and children in the population and their situation will need careful monitoring (category III).

Recommendations

- Ensure timely and sufficient food and non food distributions to the new arrivals.
- Help to ensure the integration of new arrivals into the established refugee and non refugee communities.

Guinea

The reporting period has seen a continuation of violence in the Mano River Union area, on the border with Sierra Leone and Liberia. The area has long been a home to refugees from the ongoing conflicts in Sierra Leone and Liberia, with particular concentrations around the N'zerekore area and around Gueckedou in Guinea Forestiere, concentrated in a strip of land jutting out into Sierra Leone called the Parrot's Beak. There are also concentrations in the Forecariah area in the west of the country bordering the RUF controlled Kambia district of northern Sierra Leone. UNHCR estimates that there are about 420,000 refugees in the country and it is reported that about 150,000 people have been displaced from the sensitive border areas (UN 2001).

The Guinean response has played a big part in the development of the humanitarian situation in the country. The Guinean army has mobilised along the border areas and has been actively encouraging refugees to move, claiming that many are rebel sympathisers. This mirrors a general hostility in Guinea towards the refugees who have been blamed by the government for the border insecurity. This hostility has translated to open harassment within Guinea, including arbitrary arrests and detentions and the withdrawal of support from host communities (HRW 07/01). In the face of continued insecurity this has left many refugees with few choices. They can either remain where they are in insecure areas where they are likely to suffer further attacks or they can repatriate to their country of origin or they can relocate to the new and supposedly safer, inland camps set up by UNHCR.

Some refugees have chosen to stay in the border areas in the hope that they can escape further attacks. Many of these have been living in the areas for many years and have strong cultural ties with local communities and the land, often sharing the same ethnicity and language as the locals. The borders are also considered to offer opportunities for escape into other areas should it become necessary (HRW 07/01). The improved security in Sierra Leone has increased the possibilities of repatriation for some although many come from areas that are still insecure within Sierra Leone and insecurity in Liberia makes the prospect of return unlikely. The remaining choice for many is relocation within Guinea to the camps set up away from the insecure border areas. However, many fear the often open hostility shown to them within Guinea and are loath to move to new and unfamiliar areas which are invariably away from towns and in regions with unsympathetic host communities (HRW 07/01).

The RNIS has not received any nutritional surveys from either displaced or refugee populations but reports indicate that there has been a slight deterioration of the nutrition situation. Reasons cited for the deterioration are the breakdowns in the traditional mechanisms of food security such as farming and employment. The insecurity has also led to extreme difficulties in moving around the country and this has restricted the flow of merchandise and led to important rises in the price of food and other essential items. The reporting period has also seen the start of the rainy season which lasts from June to October. This is the annual hunger season before the harvest in October. The rainy season is usually associated with increases in morbidity from malaria, respiratory infections and diarrhoea, and this can negatively impact on nutritional status (ACH 24/07/01).

The South East Forest Region

In June IRIN reported that UNHCR had finished the relocation of 57,000 refugees from the Parrot's Beak area to six new camps in Albadariah and Dabola prefectures, 200 Km north of the border areas. UNHCR have also announced that they will cease the provision of aid to refugees remaining in the insecure border zones. This is likely to be a problem to an estimated 20,000 refugees who have opted to remain close to the border areas. These refugees can be considered to be extremely vulnerable, as a result of the decreased availability of and

access to food (HRW 07/01; IRIN 01/06/01).

WHO report figures from June 24th for four of the six camps in the Albadariah and Dabola areas which have received refugees; Kountaya with 25,956 refugees, Boreah with 13,163, Sem–bakounya with 7,366 and Telikoro with 11,322 (WHO 24/06/01). In general the situation in the new camps is not critical but epidemiological surveillance indicates that morbidity and mortality rates are high with a CMR of 0.84/10,000/day and an under five mortality rate of 2.69/10,000/ day calculated from routine surveillance over the week of the 18th to the 24th of June (WHO 24/06/01). The CMR remains below emergency thresholds but is nonetheless elevated and the under five rate is worryingly high. ACH reports increases in the number of children attending Supplementary feeding centres but stresses that the numbers still remain relatively low. The relatively high mortality and observed increases in children in supplementary feeding centers suggests that the situation is more precarious than it was. However, the rates are not unexpected given the increased morbidity and the hunger season, and they remain below critical levels.

WFP also reports that government forces arrested refugees in Telikoro camps at the end of June and this sparked off rioting that prompted the evacuation of aid workers from the camp and the suspension of distribution activities. This illustrates the potential for further insecurity in the camps and there are concerns that this may affect humanitarian access to the refugees in the future (WFP 06/07/01).

Repatriation

Hostility to refugees within Guinea and the increased insecurity has led to a steady repatriation of Sierra Leonean refugees. The better security situation currently experienced in Sierra Leone is facilitating the repatriations but many areas of the country remain insecure and many refugees are going into already crowded displacement camps in government held areas. It is extremely difficult to estimate the number of people repatriating because many travel overland across the border and are not registered upon arrival. However, Human Rights Watch report that since the repatriation programme began last September, over 35,000 Sierra Leonean refugees have repatriated by boat from Conakry to Free–town or with UNHCR assistance (HRW 07/01). As the cease–fire continues the repatriation is expected to increase. The RNIS has no information on the nutritional status of the returnees.

Overall

The humanitarian situation remains precarious for refugees and IDPs in Guinea. The continued hostility within the country towards the refugees remains a major concern and is affecting the refugees sense of security within the country. The most important development has been the relocation of most of the refugees from the south eastern region to camps in the interior. The general condition of the refugees in the camps appears to have deteriorated slightly and there is cause for concern although their condition is not considered to be critical (category III). There is further concern for refugees who have opted to remain in the insecure border areas as they no longer receive any form of humanitarian assistance and they must be considered to be at elevated risk of malnutrition (category II).

Recommendations

- Ensure that refugees remaining near the border areas have access to material assistance if they require it
- Conduct sensitisation activities amongst host populations to prevent further harassment of the refugees
- Continue nutritional surveillance within the camps

Liberia

The humanitarian situation in Liberia has deteriorated further during the reporting period as a result of continued fighting between government troops and rebels in Lofa county in the north of country. Fighting continues amidst claims and counter claims that Liberia and Guinea are trying to destabilise each others countries through the support of rebel factions. The fighting has resulted in a huge displacement of population from the Lofa region.

The UN estimates that at the end of May there were 40,000 people in IDP camps, the numbers having risen from 15,000 in April (IRIN 14/06/01; UN 2001). The main thrust of displacement has been south to Bong, Cape Mount and Gbarpolu counties, where they are spread between about five of six different camps. Conditions in the camps are extremely poor as many of the displaced were forced from their villages some time ago and have been living in the forest. For many the journey from Lofa has been extremely arduous and there are wide spread reports of harassment by Liberian military along the way. ACF recently reported that many have been unable to access their land and harvest crops as a result of the fighting, leaving them critically short of food stocks (ACF 25/07/01). Furthermore, access to these populations has been severely impeded by the insecurity and by government imposed bans on the movement of humanitarian agencies. This has restricted the supply of humanitarian assistance to the affected populations and there are now reports of great needs for food and medical aid. MSF report that families have used up their food stocks and are suffering high rates of respiratory infection, malaria and some cases of bloody diarrhoea (MSF 03/07/01).

WFP has been conducting food distributions to IDPs in the camps but has also suffered from the restricted access. On June 30th WFP completed a round of distribution to IDPs in Gbalatuah and Bellefanai towns in Bong county. The distribution was only possible after the government lifted a travel ban, and was the first distribution in a month and a half (WFP 06/07/01). The restricted access is particularly concerning given the poor acute needs of many of the IDPs. On July 4th distributions also started to IDPs in the TV tower and CARI camps in Bong county, and to Jenemana and Bopolu in Cape Mount and Gbarpolu counties. The distributions will bring some relief to the displaced but concern remains for those still in Lofa county, many of whom are currently in hiding. The total population of Lofa is estimated to be about 60,000 people and if and when the remainder of these people reach Bong County their nutrition and health situation is expected to be very poor. It has also been noted that many villages in Bong county have started to prepare to evacuate in the eventuality that fighting spreads from Lofa. This highlights the prospect of considerable further displacements (UN 2001). The RNIS has received no nutritional surveys on the displaced population and it is believed that this is largely a result of the lack of access and insecurity in the areas concerned.

The plight of the displaced is heightened by the extreme poverty of the country as a whole. It is estimated that two thirds of the Liberian population are living below the international poverty line of less than one dollar a day. The unemployment level is estimated to be 85% and access to basic amenities such as water, health and education services varies between 11 and 26% (UN 2001). This means that many of the displaced will be chronically impoverished with little or no means of accessing food other than from humanitarian assistance. It is also important to note that it is currently the rainy season which will last until September or October. This is traditionally the hunger season when food availability is at its low–est and morbidities such as malaria and diarrhoea increase. It is expected that the needs of the displaced population will remain extremely high and that they will be at elevated risk of malnutrition.

Refugees

The last RNIS reported an estimated 80,000 Sierra Leonean refugees in the country but continued insecurity has led to an increased number leaving for Guinea and returning to Sierra Leone. It is very difficult to estimate how many have returned, but UNHCR reports that in April 2001 there were 69,762 refugees in Liberia. This means that at least 10,000 have returned to Sierra Leone and the figures have probably increased since then (UNHCR 18/07/01). The RNIS has no recent information on the nutritional situation of refugees within Liberia.

Overall

The insecurity in the north of the country has led to considerable displacement of population within Guinea. Although no nutritional information is available, reports indicate that the IDPs are in extremely poor condition having travelled for some time without much in the way of food or medical care to reach camps. Those that have reached camps are suffering from exhaustion, lack of food and high rates of morbidity. The poor condition of the displaced coupled with the rains and the hunger season make this population very vulnerable (category II). Furthermore, an unknown number are still inaccessible to humanitarian workers and their condition is currently unknown (category V) but can be considered to be poor.

Recommendations

- Advocate for improved access to displaced populations.
- Support efforts to provide emergency food and non food relief to IDPs.
- Conduct nutrition surveys to assess the nutritional status of the displaced populations.

Sierra Leone

The reporting period has seen significant developments in both the political and humanitarian contexts in Sierra Leone. At the regional level, fighting in Liberia and the border areas of Guinea continues to send both refugees and returnees into the country in large numbers. The most significant internal development has been the review of the Abuja Cease-fire Agreement of November 2000 between the Government of Sierra Leone and the rebel Revolutionary United Front (RUF). The review took place on May 2nd 2001 and included the Government of Sierra Leone, the Economic Committee of West African States (ECOWAS), the UN and the RUF. The meeting resulted in a firm commitment by both the RUF and the government controlled Civil Defence Force (CDF) to recommence the Disarmament Demobilisation and Reintegration (DDR) programme (UNSC 25/06/01).

Since the meeting on May 2nd there has been a general adherence to the cease-fire and the DDR activities. The first stage of the disarmament began on May 18th in the north of the country in the Kambia and Port Loko areas. By May 31st a total of 3,502 ex combatants had disarmed (UNSC 25/06/01). The DDR programme has continued as scheduled through June and July with RUF and CDF members handing in weapons in the Lunsar and Bonthe areas and to a limited degree in Kono. Ex-combatants are being placed in reintegration camps where they will stay for six to twelve months before being reintegrated into new areas. Reintegration camps exist at Port Loko, Bo, Moyamba, Kenema and Daru and new camps are being built at Makeni, Lunsar, Kamakwie, Masingbi, Koidu, Pujehun and Bonthe (UNSC 25/06/01).

The cease-fire agreement has also allowed the redeployment of the Sierra Leonean Army (SLA), UNMASIL and civil police force members, into previously rebel held areas. On May 29th the SLA deployed into Mange and Kambia in the northern region, following the official withdrawal of the RUF. The deployment will allow the areas to be secured from further insecurity and create an environment where civil authority can be re-established (OCHA 29/05/01). This process is receiving a great deal of support from the international community. In particular the mandate of the UN mission to Sierra Leone (UNMASIL) has been extended with the number of troops increased to 17,500. Part of this mandate is the facilitation of the delivery of humanitarian assistance (UNSC 25/06/01).

The increased security in the country will hopefully ensure that people have improved access to land for food production and increased opportunities for economic activities. This should help to improve general food security. In areas where acute needs remain, the better security situation is leading to increased humanitarian access, ensuring the delivery of essential food and non food items to populations in need. Whilst the overall picture is encouraging, insecurity does still exist and WFP recently reported that fighting has been confirmed between the RUF and the CDF in Koindu, Kailahun district in the East of the country near the border with Guinea (UNSC 25/06/01; WFP 20/07/01). Human Rights Watch have also reported serious cease-fire violations in the eastern district of Kono and the northern district of Koinadugu (HRW 24/07/01). This suggests that the cease-fire is potentially quite fragile and is particularly concerning as it is likely to prevent returns to the area and will hinder humanitarian access.

Displaced Population and Returnees

The displaced population in Sierra Leone remains hard to estimate but the figure is thought to be around 400,000 people in various camps across the country (IRIN 28/06/01). The majority of the registered IDPs are in the Tonkilili and the Port Loko districts as well as in major urban centres such as Freetown, Kenema, Daru and Bo township. However, many are unregistered and reside with host families in all areas (NRC 2001). The total number of displaced is increasing as a result of the return of refugees from Liberia and Guinea and the ex-combatants from the DDR programmes.

These returns have increased pressures on the camp infrastructures. As a result there has been an effort to promote return, where possible, of people to either their original areas or to new areas where they can begin to rebuild their lives. In June IRIN reported that in phase I of the resettlement programme 40,498 people were resettled in safe areas (IRIN-WA 01/06/01). Considerable constraints to return exist as many areas have been very badly damaged by the conflict and suffer from a lack of working infrastructure. Concern has been expressed that without sufficient commitment to the rebuilding of many of these areas, many potential returnees are likely to remain in camps.

Northern Province

The improved security situation has particularly affected the northern province which has traditionally been extremely insecure. The reporting period has seen the withdrawal of RUF troops from the area and the deployment of SLA troops. This has led to estimates that up to 30,000 people currently displaced could return to the area (NRC 2001). However, a recent multi-sectoral assessment indicated that the region has sustained massive destruction of infrastructure. In some areas as many as 80% of villages have been destroyed. A recent MSF-H health assessment indicated that although the health situation is not alarming, there is a general lack of medicines and many medical centres have been destroyed (OCHA 16/06/01). In general the outlook for the displaced and returnees is relatively good as increased access to land and markets will improve both the access and availability of food. There will also be improved access to vulnerable populations by humanitarian organisations.

Western Province

Security in the western province continues to remain stable although there is concern over the large number of IDPs in and around the Freetown area. It is hoped that the general countryside security will continue to improve and allow the displaced to move out of the camps to their areas of origin. The RNIS does not have any new nutrition information for the displaced populations in the west.

Southern and Eastern Provinces

Generally the security situation in the south and east is much improved and disarmament of RUF and CDF has taken place in Kono and Kailahun districts although some fighters are still supposed to be present. It is hoped that the general opening up of areas will facilitate the return of the displaced to their places of origin.

Daru, Kailahun district

The proximity of the area to the continued insecurity in the Parrot's Beak area of Guinea and the border with Liberia has resulted in the steady arrival of both refugees and returnees. UNHCR report that the total number of returnees to Daru as of July 18th is 25,000 people (IRIN-WA 23/07/01). Reports have indicated that the humanitarian situation is deteriorating in the town because many of the new arrivals are in very poor condition as a result of being trapped for long periods between Guinea and RUF controlled areas with insufficient access to food and medical care. Many cite the termination of assistance and the closure of camps as one of the main reasons for returning (UNHCR 20/07/01).

A recent ACF food security assessment on IDPs, returnees and refugees reported that they have adopted various coping mechanisms including farming, palm fruit harvesting, casual labour and petty trade. Coping mechanisms have been helped by the improved security situation and increased links with other areas of the country. However, there is concern that resources in the area are not sufficient to cope with a continued influx of people (OCHA 11/06/01). It is important to note that the area is entering the hunger season until the next harvest in September. This will considerably increase the vulnerability of the affected population and if numbers continue to increase, a deterioration in the condition of the displaced can be expected. The RNIS does not have any new nutritional information from the southern and eastern provinces but the most recent reports (see RNIS 32 and 33) indicate that the prevalence of acute malnutrition is not high. The improved security access to vulnerable populations is likely to mean that the nutrition situation remains uncritical.

Overall

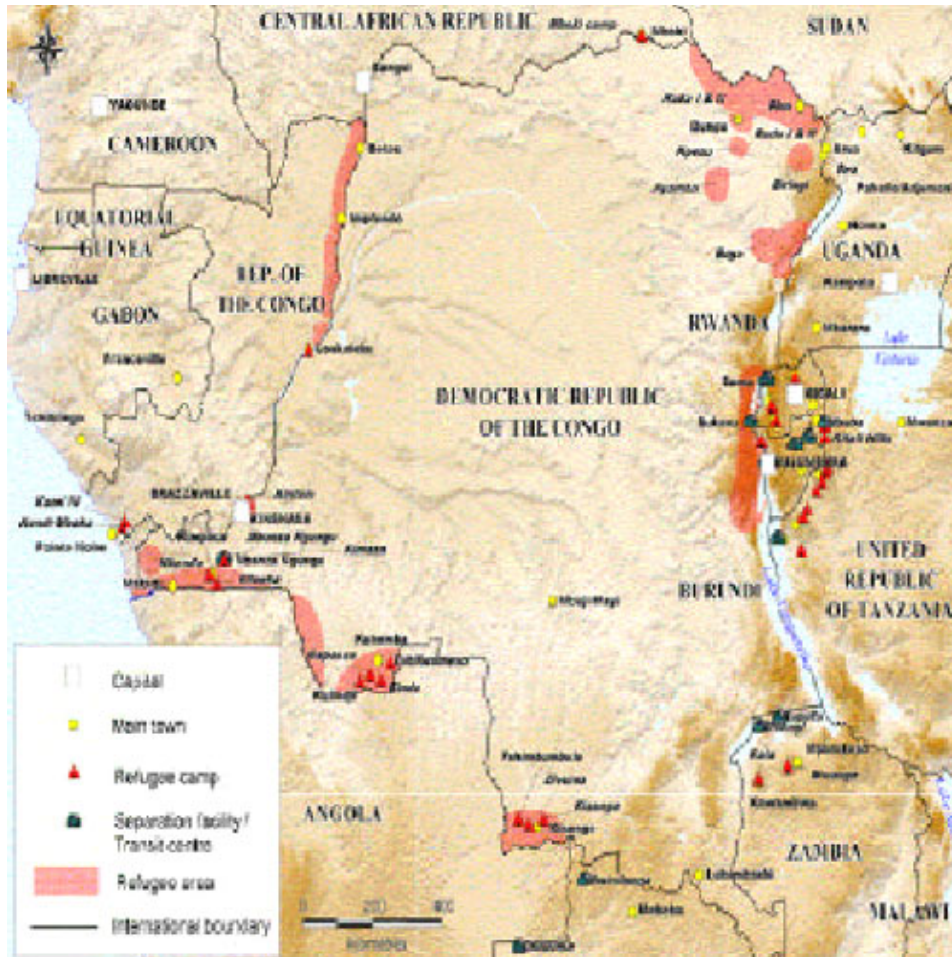
The humanitarian outlook for Sierra Leone has improved dramatically as a result of the adherence of both government and rebels forces to the cease-fire agreement. This has resulted in a general opening up of previously inaccessible areas to humanitarian agencies and it is expected that this will reveal new humanitarian needs. The improved situation will also create an environment where displaced, returnee, refugee and non displaced populations will be better able to address their own needs through increased access to land and improved employment and trade opportunities. Whilst this should increase food security in the short term, the future food security situation is contingent with the continuation of the cease-fire. The majority of the displaced, returnees and refugees will be Category III but pockets of more acute needs also exist particularly in some of the Eastern areas such as Kailahun.

Recommendations

- Continue to support the peace efforts through funding of the Inter-agency appeal
- Support efforts to rebuild essential infrastructure to facilitate the return process

- Continue to monitor the health situation particularly in camps
- Provide agricultural inputs to returnees to ensure sufficient resources for the next harvest period.

GREAT LAKES REGION



Burundi

OCHA reports that out of a population of 6,654,766 there are 379,779 people recorded as displaced and there are a possible further 200,000 IDPs beyond the reach of humanitarian assistance. The continuing conflict, high levels of infectious disease such as malaria, and drought conditions, have all contributed to food insecurity and nutritional status decline. The displaced have been particularly vulnerable, having reduced coping mechanisms, but much of the population has been affected.

The Arusha peace accords of August 2000 were an important step towards ending the long-standing internal conflict within Burundi and were designed to bring opposing groups to the negotiating table. However, the failure to include two rebel groups, the Forces pour la Defense de la Democratie (FDD) and the Forces Nationales de Liberation (IRIN 31/05/01) has resulted in their failure to recognise the process.

As a result of the ongoing peace process in neighbouring DRC, the Congolese president, Joseph Kabila, has begun to decommission foreign rebel groups allied to his Kinshasa regime. The pressure to leave DRC has forced the return of up to 4,000 well-equipped FDD rebels to Burundi, resulting in an increase in security incidents with the Burundian military (AFP 14/05/01). The increased insecurity has particularly affected some of the previously central areas of the country. The escalation in conflict levels was seen most forcibly in February this year when rebels launched an offensive on the capital Bujumbura. This resulted in huge temporary displacement of population into Bujumbura rural, as people fled the crossfire.

The most recent development in the peace process has been the announcement that the Burundian President, Pierre Buyoya, will lead the first eighteen months of the country's transitional government. Although a step forward for the peace process, the rebel FDD and FNL factions have indicated that they will continue their fight (IRIN-CEA 13/07/01) and it is certain that insecurity will continue to play an important part in the development of the humanitarian context.

The Effects of the insecurity

The uncertain political climate and continued insecurity has detrimentally affected humanitarian access to many of the communities who are most in need of assistance. The problem of access was highlighted by an attack on a WFP food convoy in April in which aid workers were injured. May saw the kidnapping of six aid workers by rebels from the FDD in Southern Makamba province and an attack on the MSF-F residence in Ngozi. In June a member of the agency Children's Aid Direct was killed in an ambush in Bubanza and in response all agencies in the area suspended their programmes (OCHA 29/06/01). This succession of security incidents has highlighted the danger of working in many areas and has led to both NGOs and the UN imposing restrictions on the movements of their staff. This has important implications for the continued access to certain areas and vulnerable populations. It is estimated that humanitarian access is only intermittently possible in 70% of the country (USAID 03/07/01).

The increased insecurity also threatens to spill over into neighbouring countries. Tanzania has increasingly claimed that the Burundian refugee camps within Tanzania are training and recruiting grounds for rebels that threaten to further destabilise the area. Tanzania has become increasingly impatient with its high Burundian refugee caseload and the president has stated that he is considering sending them home (IRIN 31/05/01). The sudden arrival of 500,000 Burundian refugees from Tanzania would have severe negative implications for the humanitarian situation in the country. The humanitarian response has also been constrained by the under funding of both the 2000 and 2001 Consolidated Inter-Agency Appeal. Up until the end of May 2001 OCHA report that only 15.1% of requirements had been covered (OCHA 31/06/01).

Food Security outlook

Burundi has suffered from several below average harvests that have contributed to the food insecurity of much of the population, particularly the 380,000 IDPs and drought affected persons currently in the country. Encouragingly, FAO/GIEWS report that the output of the 2001 A season harvest appears to be satisfactory as result of improved precipitation, an increase in the overall area of land planted and calmer security in some areas. However, the northern and eastern provinces of Karuzi, Kayanza, Muramvya, Musinga, Mwaro and Ngozi were particularly badly hit by the drought conditions and resultant crop failure. In preparation for the 2001 B harvest FAO have distributed seeds to populations affected by the drought and WFP has been distributing an associated food protection ration. This ration is to ensure that the distributed seeds went to the next harvest and were not consumed (OCHA 31/05/01). In further response to the assessed food needs WFP, with CARE, has been conducting food distributions to affected populations.

As well as poor food security, the observed nutritional status decline reported by RNIS 32 and 33 has been associated with poor access to medical care and high rates of infectious disease, particularly malaria. The WHO has reported a drop in the high rates of malaria infection seen earlier in the year, probably a result of the onset of the dry season. However, high rates of infection are still observed in the provinces of Gitega and Karusi (OCHA 29/06/01). Despite the precarious situation in much of the country, OCHA reported a decline in the admissions to selective feeding centres from 98,141 in March to 68,002 in June, however the exact reasons for this drop are unexplained (OCHA 29/06/01).

Bujumbura Rural

The UN continues to report insecurity in the province with regular confrontations between the Burundian army and the FDD. The FDD are also reported to be using the province as a base to move closer to the capital. It is very difficult to track numbers of displaced because much of the displacement is temporary, with people returning to their homes when fighting stops. However, the last RNIS reported a total of 30,889 IDPs in an area with a total population of 456,891 (IRIN-CEA 02/07/01). IRIN reports that at the end of May there were 6,498 people in sixteen supplementary feeding centres in the province, however the RNIS does not have any recent nutrition survey information. The better 2001 A harvest and the good prospects for the B harvest will help to improve food availability. In June WFP reported the suspension of targeted distributions in the province as a result of insecurity. The ability of the population to implement coping mechanisms and maintain their food security will remain highly dependent on the security situation. (WFP 29/06/01).

Karusi and Ngozi

WFP has been continuing food distributions to the drought affected population and reported distributing to 251,770 people in the first half of June (WFP 29/06/01). The RNIS has not received any new nutrition surveys for Karusi during the reporting period. The improved precipitation has led to a better 2001 A harvest and reasonable projections for the upcoming 2001 B harvest and the future food prospects appear to be reasonable. However, it is important to note that there are still high rates of malaria reported in the provinces and this will continue to adversely affect nutritional status (OCHA 31/05/01; 29/06/01).

Bubanza

The province of Bubanza continues to suffer acute insecurity. This resulted in large amounts of displacement within the province with many people living in IDP and regroupment camps. During the course of 2000 many of the regroupment camps were dismantled and people have returned to the traditionally farmed high ground areas. In March 2001 Children's Aid Direct conducted a nutrition survey on some of the returnee population as a way of assessing their current condition. The survey showed an estimated prevalence of 8.6% acute malnutrition (W/Ht <-2 Z-scores and/or oedema) including 2.2% severe malnutrition (W/Ht <-3 Z-scores and/or oedema). Although not alarmingly high, the rate of severe malnutrition shows a substantial increase from the last survey in February 2000, which showed 0.78% severe malnutrition (W/Ht <-3 Z-scores and/or oedema). The overall rate of acute malnutrition remains the same. The authors point out that the 2000 survey was conducted in the regroupment camps and that some of the increase may be a result of differences in the assessed population and their environment. However, the amount of severe malnutrition is of concern and the survey attributes the increase to drought induced food insecurity and a high disease burden, in particular malaria. The survey also shows an elevated under five mortality rate of 5/10,000/day, which is above emergency thresholds and suggests that the nutritional status decline is contributing to mortality (CAD 23/03/01).

Overall

The situation in Burundi still remains extremely precarious in terms of security and this is likely to continue affecting the food security of the displaced (category III). However there are indications that the drought conditions of the last few years are improving, and the first harvest of this year was reported to be satisfactory and the prospects for the next harvest are encouraging. The coming of the dry season has seen a reduction in the amount of malaria in the country and this will significantly affect the health environment of much of the population. In general there does appear to be an improvement in the overall nutrition situation in the country although security remains a significant problem for displaced and non displaced alike and is likely to be the limiting factor in future nutritional risk.

Recommendations

- Negotiate humanitarian access to affected populations in currently inaccessible area

From the CAD Bubanza survey (CAD 23/03/01)

- Conduct food security assessments to determine the needs of the affected population
- Actively trace cases of malnutrition in the community with outreach workers
- Implement food security programmes to improve access and availability of food.

Democratic Republic of Congo (DRC)

The reporting period has seen the continuation of the peace process in DRC and with it the promise of better security and increased access to populations made vulnerable by the years of conflict within the country.

Insecurity continues in certain areas, mostly as a result of pressure on various rebel groups to leave, and is threatening to spill over into the neighbouring countries of; Rwanda, Burundi and Tanzania. One of the major obstacles to the peace process is that certain rebels groups have never been involved in peace negotiations and have vowed to carry on fighting. A meeting took place on July 4th between Joseph Kabila, the DRC president, and his Ugandan counterpart Yoweri Museveni to discuss issues of importance to the two

countries. This is a positive development given the strained diplomatic relations over the last few years as a result of the hostile presence of Ugandan troops within DRC (IRIN–CEA 04/07/91). There is also an important upcoming summit of the Organisation of African Unity (OAU) in Lusaka, Zambia, which will bring key players from many African countries together to further discuss the ongoing peace process (AFP 05/07/01).

Disengagement and withdrawal of foreign troops from the DRC has continued. In June IRIN reported the redeployment of a 7000 Ugandan and 600 Namibian troops. Foreign troops from Angola, Zimbabwe, Namibia, Uganda and Uganda do still remain, but still have time to disengage on schedule as agreed in the Lusaka agreement (IRIN–CEA 11/06/01; 15/06/01).

Another integral element of the continuing peace process has been the deployment of UN peace–keepers (MONUC) and the reporting period has seen a strengthening of MONUC troops in a number of places. The troops are mandated to over–see the withdrawal of foreign militarised forces in the country and have brought the hope of relative stability to previously chronically insecure areas. In recognition of MONUC’s role in the implementation of the peace process, a meeting of the UN Security Council in June has further extended MONUC’s mandate until June 2002. The renewed mandate will include a civilian police force component and will see them coordinating the disarmament, demobilisation, rehabilitation and reintegration (DDRR) operations in the country (IRIN–CEA 18/06/01).

Numbers and distributions of IDPs

The conflict within DRC has led to huge population displacement. The deployment of MONUC peace–keepers has improved access to many areas. The number of displaced appears to have risen since December 2000 but it is likely that much of this is not due to fresh displacement but to increased accessibility to IDPs who were previously inaccessible.

Table showing distribution of IDPs by province (June 2000, December 2000, April 2001) (OCHA 04/01).

Area	June 2000	December 2000	April 2001
<i>Equateur</i>	250,000	300,000	170,524
Orientale	215,000	160,000	220,000
North Kivu	287,000	640,000	620,000
South Kivu	220,000	350,000	373,158
Katanga	250,000	305,000	354,000
Mariema	110,000	137,000	132,000
Easter Kasai	30,000	30,000	114,000
Western Kasai	140,000	80,000	29,000
<i>Total</i>	1,502,000	2,002,500	2,012,682

Humanitarian Situation

The humanitarian situation in DRC remains critical. The years of insecurity have resulted in the collapse of infrastructure and the economy, and systematically eroded people’s ability to cope with the situation. As a result mortality and morbidity have increased and nutritional status declined. The humanitarian response continues to be hampered by insecurity and by the physical inaccessibility of many areas. To address problems of access WFP has recently established a Special Operation (SO) passenger service for humanitarian staff (WFP 29/06/01).

Kinshasa

Kinshasa has experienced rampant inflation rates estimated at 890% in the year 2000 (SCF–UK 18/04/01). Food prices have increased due to the restriction of supplies from the traditional food producing eastern areas of the country as a result of insecurity. The salaries of civil servants are not adjusted on a regular basis. In addition, many communes in Kinshasa have experienced a sharp increase in epidemic diseases, which reflects poor access to water and primary health care services.

SC–UK conducted a survey in April 2001, in Masina and Kimbanseke; two of the poorer communes in East Kinshasa. These are peripheral communes that are rural in character. The survey found a prevalence of acute malnutrition of 11% (W/Ht <–2 Z–scores and/or oedema), including 2% of severe malnutrition (W/Ht <–3 Z–scores and/or oedema). There was an estimated 1.2% of oedema–tous malnutrition in the sample. The survey also assessed the mortality rate of children under five, which was 0.77/10,000/day. The main cause of mortality was fever, or suspected malaria. The mortality rate was estimated over a one year period, which is unusual for an assessment of mortality in emergencies. The report estimated that only 8.8% of the malnourished children in the survey were attending a feeding centre for treatment indicating that the feeding centre coverage was extremely poor. A graph of deaths by month for the year 2000, shows mortality to be highest during the rainy season in December and February and is unlikely to be related to food insecurity. The survey was conducted at the end of the rainy season, when the prices of staple foods are at their highest and the prevalence of acute malnutrition is expected to be high. However, the prevalence of severe acute malnutrition is higher than would be expected (SCF–UK 18/04/01).

Previous surveys by CEPLANUT and ACF–F indicated a seasonal trend to malnutrition rates in the city. A survey showed similar prevalence of malnutrition, in the same communes in February 2001, an overall prevalence of 12.4% malnutrition, including 2.4% severe. Their survey in September 1999, when availability of food is usually good, showed a prevalence of 6.7% acute malnutrition (SCF–UK 18/04/01).

The SC–UK April 2001 survey indicates large differences between the four communes surveys. Whilst the prevalence of malnutrition in Kimban–seke Air de Sante was relatively low at 5% acute malnutrition, it was high especially in Lobiko at 18.3% acute malnutrition and in Tshimungu 11.3% acute malnutrition. Lobiko has poor road access, poor soil for cultivation, and poor infrastructure in terms of provision of water, latrines, health care and schools. Tshimungu is very densely populated, so limiting the availability of plots for household food production. Latrines tend to flood in the rainy season (SCF–UK 18/04/01).

Orientale

OCHA figures from April 2001 indicate that there are 220,000 displaced and 80,085 refugees from Sudan and Uganda (OCHA 04/01). Figures for the number of IDPs have risen from the 160,000 reported in the last RNIS report. It is likely that much of this increase is a result of previously displaced people becoming accessible as a result of improved security.

Ituri district

The situation in the district remains extremely serious and WFP reports that some 140,000 IDPs face serious food shortages following the systematic destruction of crops by rebel groups. Humanitarian access to the area has been constrained as a result of continued insecurity. A stark example of the insecurity and the risk to humanitarian aid came with the deaths of six Red Cross workers in April. As a direct result all agencies pulled out of the Bunia area. OCHA reported in early July that little by little the humanitarian community are choosing to resume their programmes (OCHA 04/07/01).

Kisangani

The peace accord between Rwandan and Ugandan forces in the area has seen the entry of MONUC troops to the town and the establishment of better security conditions. Initially rebel groups obstructed the entry of peacekeepers, but the troops were eventually permitted to enter and have managed to restore some order. Administrative control of the town of Kisangani has now been handed over to the RCD rebel group. However, MONUC is insisting on the withdrawal of militarised factions from the town (IRIN–CEA 18/06/01). No new nutritional information has been received

North and South Kivu

The Kivus remain extremely insecure and areas of intense humanitarian need. Their position on the border with Burundi and Rwanda make them important bases for rebel groups from the two countries. One of the chief concerns is that the rebel groups have never entered into any peace negotiations or signed any cease–fire. The number of displaced are currently estimated to be in the region of 993,500 people, a significant proportion of the total population of the area (OCHA 04/01). The insecurity continues to restrict humanitarian access to the most needy areas and a recent OCHA report estimated that only 10% of north and south Kivu were accessible to humanitarian actors (OCHA 15/06/01).

The area of Beni in north Kivu is of particular concern at present with NGOs warning of a “catastrophic situation”. The area has been the place of much conflict over its rich natural resources and access is currently extremely poor (IRIN–CEA 15/06/01). WFP is also reporting massive displacement in Walungu territory with 378,158 IDPs identified. The insecurity has reduced access to the affected populations with airlifts currently supplying only 21,000 IDPs out of 100,000 in the area of Shabunda (WFP 15/06/01). RNIS considers that the IDPs remain at high nutritional risk.

Maniema Province

Maniema lies in the east of DRC on the western borders of north and south Kivu. OCHA figures from April 2001 report the presence of 132,000 IDPs in the province, which indicates a drop in numbers since December 2000. This is likely to be a result of an improvement in the general security situation in the province that has allowed people to return to their lands (OCHA 04/01).

Merlin conducted a survey in May 2001 in Kalima town, which included both displaced and resident populations. The number of displaced decreased from 30,000 in August 2000 to 14,000 in May 2001. The survey found a prevalence of 4.6% acute malnutrition (W/Ht <–2 Z–scores and/or oedema) including 0.9% severe (W/Ht <–3 Z–scores and/or oedema). CMR was calculated retrospectively over the previous three months as 1.2/10,000/day and the under five mortality was 3.6/10,000/day.

The prevalence of malnutrition has decreased from 14.1% acute malnutrition (W/Ht <–2 Z–scores and/or oedema), with 8.1% severe acute malnutrition (W/Ht <–3 Z–scores and/or oedema) in January 2001. Much of the severe malnutrition in January 2001 was oedematous, and it is likely that the high under five mortality over the last three months was partly due to the deaths of severely malnourished children.

According to Merlin, the reasons for the improvement are the improved security conditions in the area, which have resulted in the return of many IDPs to the surrounding villages. The survey was carried out after a reasonable harvest at a time of relative plenty. As a result, general food availability has improved and market prices have fallen. The fall in market prices seems particularly important because 60% of households relied on purchased food. The high mortality rates suggest that the health situation remains extremely precarious and despite improvements the situation will need careful monitoring (Merlin 05/01).

Katanga

As a result of an improvement in the security situation in Katanga, thousands of people are emerging from hiding in desperate need of humanitarian assistance. The numbers of IDPs have risen to 354,000 from the 305,000 reported in the last RNIS (OCHA 04/01). WFP have reported that there are 330,000 IDPs in the government held areas of which 128,000 are currently receiving WFP rations. In general the security situation appears to be stable although incidents do occur, including the harassment of food transporters on the Bukamu–Kinkondja river axis (IRIN–CEA 18/06/01).

The RNIS has not seen any recent nutrition survey reports from the area but OCHA report on an MSF survey in Manono and Kanteba which indicated raised rates of acute malnutrition but relatively low rates of severe. RNIS considers the IDP population in Katanga at high nutritional risk.

Equateur

The security in Equateur has been very poor for some time and OCHA estimates that there are 170,524 displaced in the province. An inter–agency assessment mission in May highlighted high levels of vulnerability and recommended the provision of food aid, agricultural implements and the rehabilitation of the local infrastructure (WFP 29/06/01). The past months have seen the withdrawal of armed forces from some areas of Equateur. This has increased access to previously inaccessible areas such as the front line between Bmandaka and Ikela, which contains an estimated 60,000 IDPs. The local population is also in great need of assistance as the heavy military presence experienced in the area has had a very negative impact on the food security (WFP 15/06/01). The RNIS does not have any nutritional survey information but populations in Equateur can be considered at heightened risk of poor nutritional status.

Refugees

The total refugee population as of April 2001, according to OCHA figures, is estimated to be 329,812 people (OCHA 04/01). There have not been any recent nutritional assessments done on refugees in DRC but surveys done in Bas Congo in October 2000 indicated low levels of acute malnutrition. Issues of insecurity

and humanitarian access are likely to affect the refugees in the same way as the displaced.

Angolan Refugees

Continued insecurity in Angola has meant the continued influx of refugees into Bas-Congo, Kinshasa, Bandundu and Katanga Provinces. The number of Angolans, as of April 2001, was estimated to be 178,280. In June, WFP assisted 32,555 Angolan refugees, providing them with an incomplete food basket due to shortfalls of pulses and salt. The delivery of pulses has been affected by striking rail workers and further strikes are likely to obstruct the July distributions (WFP13/07/01). WFP has also reported the arrival of 4,000 Angolan refugees gathered along the border of Bas-Congo province and Angola. The Congolese authorities have agreed to give them asylum so long as they move further away from the border. UNHCR will provide them with food assistance for six months.

Burundian Refugees

There are an estimated 20,000 Burundian refugees, mostly in South Kivu with some in Kasai Orientale. Many remain inaccessible to assistance and there is no available nutritional information (OCHA 04/01).

Central African Republic (CAR) Refugees

There are currently supposed to be about 30–45,000 refugees from CAR who have fled the attempted coup against president Ange-Felix Patasse, on May 28th. The refugees are currently in north western Equateur province in the Zongo and Libenge areas (IRIN-CEA 16/07/01). The RNIS has no information on their current situation and it is uncertain whether they will stay or return after a short time.

Congolese Refugees

Repatriation to RoC continues but 3,005 Congolese refugees remain in Kimaza camp in Bas-Congo for the time being. The camp is supposed to close at the end of 2001.

Rwandan Refugees

There are an estimated 42,472 Rwandan refugees, indicating a decline in numbers reported by the last RNIS. This is a result of voluntary repatriation over the last months. Many are Hutus and unlikely to return whilst there is still a Tutsi government in Kigali.

Ugandan Refugees

There are an estimated 13,000 Ugandan refugees in Orientale province and many remain inaccessible due to insecurity so very little is known of their condition.

Overall

The reporting period has seen significant movement in the implementation of the Lusaka peace accords, including the continued withdrawal of foreign troops and the disassociation of the Kin-shasa regime with rebel elements in the East. UN peacekeepers (MONUC) have continued to be deployed and their mandate strengthened. This has brought improvements to the security situation in many areas, significantly improving the humanitarian access to populations in need. However, insecurity still remains in many areas, particularly the eastern provinces of the country. The combined effects of the long term conflict, poor economy and the lack of working infrastructure, continues to create huge vulnerabilities amongst displaced and non displaced alike (category II and III). The war displaced in Kinshasa are currently category III. IDPs in the east of the country remain at extremely high risk (category I) although there have been improvements in some areas such as Kalima town in Maniema (category II). As areas continue to become accessible it is likely that more and greater needs will become apparent. The situation of refugees remains varied but they are also at elevated risk from insecurity and lack of access (category II).

Recommendations

Support funding of the Inter-Agency Appeal.

- Continue to support deployment of MONUC.

- Put in place a system for rapid provision of assistance as access is gained to previously displaced populations.

From the Merlin Survey in Kalima, Maniema province (Merlin 05/01)

- Nutritional surveillance and monitoring should be continued in all clinics in Kalima town.
- Agricultural inputs should be supplied to families with access to land.
- There is a need for EPI and a mass measles campaign.

From the SCF–UK survey in Kinshasa (SCF–UK 18/04/01)

- Improve feeding centre coverage by improving nutrition screening and referral.
- Improve water supply and primary health care services.

United Republic of Tanzania

The reporting period has seen a continued influx of mainly Burundian refugees, into the Kigoma region of Tanzania. The new arrivals cite heavy fighting between Burundian government forces and rebels as the main reason for crossing the border (UNHCR 06/01). The latest statistics for the refugee caseload from UNHCR are from June and indicate that there are 538,573 mainly in the Kigoma and Ngara regions (UNHCR 14/07/01). UNHCR also estimate that 4,545 new refugees arrived in the Kigoma region from April to June, the vast majority of them from Burundi (UNHCR 06/01).

The peace process in DRC has resulted in the Kinshasa regime withdrawing support to Burundian rebel groups previously active in eastern DRC. As a result many of these groups are returning to Burundi and increasingly clashing with government troops. It is expected that the number of Burundian refugees will continue to increase as the insecurity continues. This would appear to dash hopes of large scale voluntary repatriation to Burundi. However, there was an important meeting between the governments of Tanzania and Burundi and UNHCR in May, which resulted in the signing of an agreement to establish a commission for the repatriation of hundreds of thousands of Burundian refugees. The meeting acknowledged that returns were unlikely with the prevailing security situation but stressed that it was essential to have a clear framework for the planning and supervision of returns when conditions allowed (Xinhua 08/05/01).

Food assistance has continued to refugees with WFP reporting regular two weekly distributions to an average of 523,855 beneficiaries (WFP 15/06/01; 13/07/01). The size of the general ration has remained reduced but attempts have been made to improve it and there is no longer a break in the pipeline for fortified Corn Soya Blend (CSB) and the general ration is now calculated to be 85% of the full ration. WFP also reports that 5,723 vulnerable individuals continue to receive a full ration (WFP 13/07/01).

The RNIS has not received any new nutrition reports over the reporting period but WFP report that a nutritional screening took place in the Lugufu camps at the end of April. The screening uses a different methodology from the previous weight for height surveys and therefore a comparison is difficult. However, the recorded prevalence of acute malnutrition was not considered to indicate a critical situation. Furthermore, UNHCR health surveillance data from the Lugufu camps in June, reports an estimated crude mortality rate of 0.1/10,000/day and an under five mortality rate of 0.73/10,000/day (UNHCR 06/01). Both of these rates are well below emergency thresholds and indicate a stable health situation. In general the food supply situation in the country is good with the Famine Early Warning System (FEWS) reporting in their July report that overall food production in the country could be the best in five years and following the harvest season in July, the price of staple foods has decreased (FEWS 09/07/01).

Overall

Increases in the number of new refugees entering the country continues with the majority of the new caseload coming across the border with Burundi. The increased numbers continue to put pressure on scarce resources for the refugee population. However, there has been no break in food pipelines and although there have been no new nutrition surveys reports indicate that the health and nutrition situation is relatively stable for the camp populations (category IV). The general food security outlook for the country is good and will positively impact

on the food outlook of the refugees.

Recommendations

- Support funding of the Inter–Agency appeal to Tanzania
- Conduct full livelihood and household economy surveys to assess the impact of ration cuts

Uganda

The reporting period has seen the continuation of insecurity in many areas of the country, but the continued withdrawal of Ugandan troops from DRC has improved the general security situation in areas of the west and southern provinces. However, there is still fighting across the border in DRC and therefore the security situation is still potentially volatile. The general security situation in the north of the country remains extremely poor. The Lord's Resistance Army (LRA) is still active in the north west, and this continues to result in ambushes and raids. OCHA also reports an increase in confrontations between the LRA and government troops (OCHA 06/01). The north eastern regions of the country have also suffered insecurity as a result of attacks and raids from Karimojong warriors.

OCHA estimates that at the end of May there were 999,175 people affected by conflict or drought in Uganda. This includes 227,437 refugees from Sudan, DRC, Burundi and Rwanda and 568,657 IDPs. The figure also includes 196,475 drought affected people (OCHA 06/01). The number of IDPs has decreased slightly from March, mostly as a result of improved security in the south western areas of the country. At the end of June, WFP report that they were assisting a total of 700,372 beneficiaries under their current PRRO. This included 520,241 IDPs and 148,415 Sudanese refugees in Arua, Adjumani, Gulu, Bundibugyo, Kitgum, Masindi and Moyo Districts. WFP indicate that they expect to experience food pipeline problems in July as a result of a lack of pulses (WFP 29/06/01).

The precarious security status of many areas in Uganda continues to create problems of access to populations in need of humanitarian support. OCHA reports that in May a humanitarian convoy made up of both INGO and UN vehicles was ambushed whilst returning from delivering aid to IDPs in Atanga camp in the Kitgum area. The ambush resulted in death and injury.. This and similar attacks have led to the suspension of programmes. (OCHA 30/06/01). The raids and ambushes also caused considerable displacement of population, particularly in Katakwi district where there are reports that many people have been unable to cultivate crops this season as a result. IDPs in camps in Kitgum and Gulu limit their farming activities for fear of attack. Both OCHA and FEWS report good overall levels of precipitation over the country which has led to good harvests and supplies of staple foods (FEWS 15/06/01; OCHA06/01). Water and pasture in the pastoral areas of the north east have also benefited from good levels of rainfall. The most vulnerable are likely to remain the displaced, particularly in the insecure northern areas of the country.

IDPs in Northern Uganda

Drought conditions improved over the course of this year, but LRA and Karimojong raiding continues. The result has been large scale displacement of population and severe deterioration of the food security of the affected areas (FEWS 15/06/01)

Kitgum

There are currently estimated to be 82,645 IDPs in Kitgum and 26,702 Sudanese refugees (OCHA 06/01). Attacks and raids by the LRA have been noted throughout the reporting period. The ICRC conducted a survey in IDP camps in the Kitgum / Pader area during March 2001 to gather baseline data on the socio –economic situation of the IDPs. The survey defined three main wealth groups within the IDP population; a rich group which earns incomes from salaries and petty trade, a middle wealth group which obtains money from the sale of own produce and a poor group which engages in casual labour and the sale of natural resources. Access to land is essential for the production of food for all of the groups. When compared to the resident local populations, a greater proportion of the IDPs use the land for the production of subsistence crops. The resident population grow cash crops as well as subsistence crops and this is most probably an indication of their better access to markets. This very probably gives the resident population alternative access to cash and is an indication of their relatively better food security. The survey also showed that the IDPs were far more likely to share their production with relatives than the local population, which puts a greater stress on the

available food reserves of the IDPs. Finally within the IDP wealth classes, the poorer groups were far more reliant on food aid (IHDP 03–04/01)

Gulu

Gulu continues to suffer insecurity but no acute food problems have been noted. This is largely a result of good rainfall and harvest prospects which have seen most IDPs able to access food to supplement the WFP rations they receive.

ACF–US conducted 2 surveys, one in the western and one in the eastern IDP camps of Gulu, between February and March 2001. The division of the camps was made on the request of WFP because IDPs in the western camps have poorer access to land for cultivation (ACF–US 07/03/01).

In the eastern camps the survey found a prevalence of 6.7% acute malnutrition (W/Ht <–2 Z–scores), including 1% severe acute malnutrition (W/Ht <–3 Z–scores and/or oedema). The survey also estimated an under five mortality rate of 1.78/10,000/day, over the preceding three months. Measles vaccination coverage was estimated from card and mother/ carer reports as 73.1% (ACF–US 07/03/01)

In the western camps the survey found a prevalence of 7.7% acute malnutrition (W/Ht <–2 Z–scores and/or oedema), including 1.8% severe acute malnutrition (W/Ht <–3 Z–scores and/or oedema). The under five mortality was estimated to be 2.27/10,000/day and the measles vaccination coverage was 76.6% (ACF–US 07/03/01). The main cause of mortality was fever (malaria), which is similar to previous survey findings and is the main cause of child mortality nationally.

The prevalence of acute malnutrition was low in both the eastern and western camps with no significant difference between the two areas. The relatively low prevalence of acute malnutrition was attributed to a period of relative security at the time of the survey which allowed people to access land. The surveys were also done just after the harvest, when the prevalence of malnutrition is expected to be low. The prevalence of malnutrition is highest in the youngest age groups and the report attributed this to a lack of support for infant feeding practices and high rates of morbidity. The RNIS notes that the general ration provides no foods appropriate for young children.

In June OCHA reported an increase in confrontations between the LRA and government troops (OCHA 06/01). WFP has reported that food stocks for some IDPs are becoming low as a result of lack of access to farms.

IDPs in Western Uganda

The situation in western Uganda remained calm during the reporting period. The number of displaced in Bundibugyo has decreased from 97,457 to 81,172 in May. This can probably be explained by better security. It is noted that people have reverted to normal trading activities and are prepared to walk long distances to sell and buy goods. There is also better access to gardens and coupled with the good harvest prospects, it is expected that IDPs will be able to supplement the relief food rations that they receive. One of the main needs is for seeds and other agricultural inputs. (OCHA 06/01).

Karamoja

The food security of the area in general has improved in the districts of Kotido and Moroto. This is mostly as a result of good rains, which have improved crucial access to water and pasture. This has seen an improvement in livestock conditions which should ensure good access to milk and other animal protein. The rain has also resulted in good harvest prospects in the area and there is no immediate concern for the food security situation (FEWS 15/06/01).

Refugees

Uganda is presently host to 227,437 IDPs from Sudan, Rwanda, Burundi and Congo. This represents a slight increase from the 225,042 reported in the last RNIS mostly as a result of LRA activity in Sudan which has caused the influx of Sudanese refugees into the districts of Moyo, Adjumani and Arua. The RNIS has no recent reports on the nutrition status of refugees in Uganda but OCHA reported on a survey conducted by Africa Humanitarian Action in refugee settlements in Adjumani. The RNIS has not seen the survey report but OCHA reports that the results did not indicate a high rate of acute malnutrition (OCHA 30/05/01). WFP also report on a survey by DED in Rhino camps that indicated that levels of malnutrition have dropped since

November 2000 (WFP 25/06/01).

Overall

The reporting period has seen good rainfall and a good harvest. Insecurity continues in the northern districts of Kitgum and Gulu and offers a significant impediment to food security, putting the displaced at moderate risk of malnutrition (category III). The security in the south west has improved, and has allowed people to access land for farming. IDPs are not considered to be at elevated nutritional risk (category IV). The nutritional status of refugees is currently unknown (category V).

Recommendations

- Monitor IDPs ability to access to land and find alternative sources of food.
- Maintain good nutritional status of IDPs by providing an adequate general ration.
- Conduct a nutritional survey on the refugee populations.

SOUTHERN AFRICA

Angola

The reporting period has seen the continuation of violence between the UNITA rebels and the government of Angola. The government still retains control over provincial and municipal centres with rebels occupying areas around the provincial centres and much of the rural hinterland. Much of the fighting is fuelled by often illicit revenue from oil and diamonds and as a result is particularly centred on districts such as Bie, Huambo, Huila, Malanje, Moxico and Luanda Sol, districts that are rich in these natural resources.

It is worth noting that whilst the government claims it controls 90% of Angolan territory, the areas and populations that are actually accessible to humanitarian agencies remain extremely limited (MSF 02/07/01). At the end of May, OCHA estimated that almost a quarter of the population, an estimated 3.1 million people, have been displaced as a result of the fighting since the renewal of hostilities in 1998. Of this number, 1.2 million IDPs have been confirmed by humanitarian organisations with an estimated 237,000 having been displaced since the beginning of 2001 (OCHA 20/06/01). Considerable numbers of people remain in inaccessible areas in conditions that are largely unknown. Recent estimates by OCHA have reported that as many as 500,000 people remain inaccessible but in need of urgent assistance (USAID 09/07/01).

In areas accessible to humanitarian agencies, IDPs have tended to collect in urban areas that are generally under government control, such as Malange, Kuito and Humabo. This is largely because many of the rural areas are heavily insecure and farming practices are frequently interrupted by security incidents. During the last several months, new influxes of displaced populations have reported for a number of urban locations including Kuito, Malange and Lobito. The urban areas offer some hope of security as well as access to the possibility of humanitarian assistance. However, the obvious lack of access to land in these urban locations limits their opportunities for food production resulting in affected populations becoming heavily reliant on food assistance. The heavy insecurity and the almost total dereliction of the road infrastructure have meant that access to many areas, for the humanitarian community, continues to be almost totally dependent on air transport from Luanda. The reporting period saw a considerable set back to the supply of humanitarian relief, with two separate attacks on WFP aircraft during the first two weeks of June (WFP 22/06/01). The attacks resulted in all passenger and cargo flights being stopped nationwide for a week. This represented a very significant set back for the humanitarian effort, since 60% of all deliveries of humanitarian aid are transported by air. WFP have also expressed concern at the poor state of airstrips in some areas of the country, particularly Kuito in Bie province, where humanitarian needs are currently described as extremely high (WFP 22/06/01).

An FAO/WFP Crop and Food Supply Assessment Mission conducted in June has estimated that cereal production for the 2000/2001 agricultural year is fifteen percent higher in comparison to last year. The report indicates that the increase is largely a result of good progress in the allocation of land to IDPs in secure areas, increased access to populations as well as timely distributions of relatively larger quantities of seeds and

tools. In addition, weather conditions were generally favourable last year, particularly in the main cereal growing areas in the central and southern provinces such as Huambo and Huila. Prices of maize are currently stable or declining in some markets with the arrival of the new crop. By contrast, yields of maize, beans and groundnuts that were planted in the northern provinces were severely affected by the prolonged dry spell in December/ January. As a result of disruption in trade activities, there are therefore large differences in cereal prices in the markets in the central and northern provinces. The report estimated that 218,000 IDPs were active in farming during the 2000/01 season (FAO/WFP 19/06/01) – this figure representing only a small proportion (approximately 8%) of the total displaced population. Therefore, as a result of continuing influx of displaced due to ongoing insecurity in rural areas, lack of access to land in urban areas and an inability to plant on allocated land areas, a large majority of the displaced population will continue to rely on food assistance. The report also observed that food security in much of the population is closely linked to good access to land and to other resources such as grazing and forest products as well as the ability to access markets for trade (FAO/WFP 19/06/01).

Acute malnutrition rates in rural Angolan populations characteristically show a seasonal pattern with highest levels of malnutrition occurring during the lean season from January to April. Levels of malnutrition are expected to show a decrease from June onwards when the main harvests are expected and are normally at their lowest in September. Obviously, displacement and consequent lack of access to harvests as well as exposure to poor health environments in over-crowded displaced camps, will significantly distort these seasonal patterns of malnutrition.

Malange

The RNIS has not received any new nutritional surveys during the reporting period but the last surveys received indicated relatively satisfactory rates of acute malnutrition although the crude and under five mortality rates were above emergency thresholds (See RNIS 32 and 33). In general the security situation in areas accessible to humanitarian workers has been fairly stable. However, many of the outlying areas remain insecure and have hampered attempts to resettle about 50,000 IDPs to the Lau, Quissol and Cambondua areas. The resettlement has also been constrained by a lack of fuel that has negatively affected de-mining activities (UNICEF 30/06/01). In addition, water and sanitation systems are not in place, agricultural lands have not been demarcated and there are no health and educational facilities – factors that are likely to delay resettlement schemes (IRIN-SA, 20/07/01). In general the nutrition situation is thought to be stable but WFP reports that the situation is worrying in Cangandala municipality where Concern World-wide has noted that admissions to their SFC from the 17th to the 23rd of June have risen by 87% compared to the previous month (WFP 06/07/01). The increase in admissions is most likely as a result of new IDPs, the majority of which are arriving from Kwanza Sul Province (IRIN SA 20/07/01).

Bie Province

The situation has continued to deteriorate in the province with insecurity continuing to cause significant displacement into the towns of Kuito and Camacupa (80km from Kuito). OCHA estimates that a further 15–20,000 IDPs from Kuemba municipality may arrive in Camacupa and Kuito over the following months (IRIN-SA 20/07/01).

Camacupa

In July IRIN reported that about 200,000 people are living in camps around Camacupa and the humanitarian agencies are bracing themselves for the arrival of up to 20,000 more in the following months (IRIN-SA 27/07/01). In March MSF-B conducted nutritional screening, using MUAC, on children in the camps in Camacupa and showed a prevalence of 28% acute malnutrition with 11% severe malnutrition. A retrospective mortality survey from the same period indicated a crude mortality of 3/10,000/day and an under five mortality of 5.4/10,000/day (MSF 31/05/01) The RNIS does not have access to the methodology used for the mortality figures but it is assumed to be from routine surveillance. The results of other screenings amongst the displaced populations indicated very alarming rates of both acute and severe malnutrition. The high prevalence of reported malnutrition is likely to be a result of the fact that displaced populations travelled long distances with little food. The high mortality rates may be linked to underlying respiratory infections associated with extreme cold at night (OCHA 13/06/01).

On the 13th of July WFP delivered food to 14,211 people in camps in Camacupa covering only half of the food requirements for the increasing number of people arriving into the town. These newly displaced are reported to have poor nutritional status (WFP, 20/07/01). Consequently, in addition to the newly established Therapeutic Feeding Centre, humanitarian agencies have established a plan to substantially scale up

assistance to the population, including; conduct nutritional surveys to verify the nutritional situation, preposition emergency food stocks and distribute Vitamin B to address the potential pellagra outbreak (IRIN-SA 20/07/01).

Kuito

The upsurge in insecurity over the course of 2001 has seen the arrival of 52,161 new IDPs in Kuito, with 8000 arriving in the month of May alone. Current estimates of total numbers of IDPs in Kuito are for 160,000 people in fifteen camps. Reports indicate a deteriorating situation with new arrivals carrying very little in the way of basic survival items and are in need of immediate assistance (OCHA 13/07/01). Mortality rates at the Therapeutic Feeding Centres (TFC) that have been set up in the town have already reached alarming levels. The TFC at the Kuito hospital recorded a mortality rate of 24% during the first two weeks of June although this fell to 14% in the following week (OCHA 13/07/01).

MSF-B conducted a nutrition survey in the camps in Kuito in July. The RNIS does not have access to the full survey report but the survey estimates 13% acute malnutrition (W/Ht < -2 Z-Scores and/ or oedema) including 2.3% severe acute malnutrition (W/Ht < -3 Z-Scores and/or oedema) (MSF 13/07/01). This indicates the poor nutritional status of the IDPs. It is also concerning to note that agencies have been reporting high numbers of cases of pellagra (niacin deficiency), with a total of 783 cases reported since April (UNICEF 30/06/01). An outbreak of pellagra in the population suggests strongly that the access and availability of food has been very poor for at least the last six months. It is extremely worrying that the number of pellagra cases continues to increase in Kuito, since the first reported cases were reported in August 1999 (see RNIS 29).

The future food security for Camacupa and Kuito remains critical because the number of IDPs continues to rise in the face of a potentially decreased humanitarian capacity. Kuito is heavily dependent on the transport of supplies by air and given that the runway is in extremely poor condition – which has significantly reduced both the number and size of the planes able to land – the potential for meeting the humanitarian needs, including food deliveries, remains precarious (OCHA 13/06/01).

Benguela Province

The security situation in Benguela Province continues to be precarious with reports of continued population displacement. ACH conducted nutritional surveys amongst displaced and non-displaced populations in Ganda town, in May 2001. The surveys indicated a prevalence of 9.5% and 10.1% acute malnutrition (W/Ht < -2 Z-Scores and/or oedema) in the displaced camps and the non-displaced population respectively. Further-more, the figures for acute malnutrition included 1.1% of severe acute malnutrition (W/Ht < -3 Z-Scores and/or oedema) in both surveys. The report also indicates a crude mortality rate of 1.28/10,000/day and 1.41/10,000/day with an under five mortality rate of 3.11/10,000/day and 2,1/10,000/day respectively. The respective measles vaccination coverage was 46.6% for the displaced and 57.2% for the non-displaced, and was calculated from both health card and mother/carer report (ACH 05/01).

The prevalence of malnutrition is not highly elevated but does suggest that the nutrition situation remains precarious. Furthermore, the results confirm that the nutritional situation has deteriorated since the last survey in November 2000 where the prevalence of acute malnutrition (W/ Ht) was reported to be 5.8% acute and 0.6% severe malnutrition (ACH 05/01). The RNIS does not have access to the November report but the methodology is assumed to be the same. The reported mortality rates (see above) are higher than emergency thresholds, particularly the crude mortality (CMR), suggesting that an usually large proportion of the reported mortality is from people over five years of age.

Potential reasons for the deterioration in the nutritional situation include; the relative isolation of Ganda town and trading opportunities limited as a result of poor road infrastructure. Insecurity of the surrounding areas is a serious problem that has prevented people from accessing land or other resources (ACH 05/01). In relation to the problem of land access, the Government has been requested by humanitarian agencies to increase security guarantees, access and protection to IDPs and to achieve a more timely distribution of arable land to the displaced population (WFP, 20/07/01) Losses of some maize harvests had been reported as a result of flooding in some parts of the Province (FAO, 19/06/01).

Cuando Kubango Province

Cuito Cuanavale

The reporting period has seen a continuation of insecurity and the displacement of people, particularly from the Mavinga areas. Reports indicate that there are approximately 6,000 IDPs in the reception camps of Cambambi and Mulumbei. ACH undertook a nutrition survey of children from 6 to 59 months amongst IDPs and resident Barrios in Cuito Cuanavale Municipality in June 2001. The prevalence of acute malnutrition was estimated to be 6.0% (W/Ht -2 Z-scores and/or oedema) including 1.9% severe (W/Ht -3 Z-scores and/or oedema). The prevalence of acute malnutrition has remained very similar to the last survey in May 2000 (see RNIS 31) indicating that the nutritional situation is stable. The survey also reported a CMR of 1.6/10,000/day and an under five mortality of 4.1/10,000/day. These mortality rates are both higher than emergency cut offs, suggesting a public health problem in the area. The measles vaccination coverage for IDPs present in the area for less than a year was low at 41.6%. Based on the findings of the report, the general food ration, which provides 1,500 kcal/ person/day, is below the recommended minimum requirement. Therefore, an inadequate food ration, high mortality rates and ongoing population displacement justifies continued nutritional interventions (ACH 13/06/01) as well as ongoing nutritional surveillance of the population.

Uige Province

The security situation in Uige has remained precarious with a major UNITA assault on the city on June 26th. The assault was thwarted by the Angolan army but it resulted in the evacuation of humanitarian personnel from the city. The current situation is more secure and staff have started to return to the city. OCHA estimate that there are currently 42,000 people relying on food distributions to survive (OCHA 01/07/01). MSF–Spain conducted a survey in the city in March and found an estimated prevalence of acute malnutrition of 5.2% (W/Ht -2 Z-scores and/or oedema) including 0.8% severe malnutrition (W/Ht -3 Z-scores and/or oedema). The RNIS has not seen the final report but the figures are comparable with a survey conducted in October 2000 (see RNIS 32 and 33) and indicate that the situation is stable (MSF–Sp 17/07/01; WFP 22/06/01).

Refugees

Ongoing civil war in Angola continues to force people to seek more secure areas across the border in neighbouring countries. Current estimates indicate that there are 430,781 Angolan refugees with 199,086 in Zambia, 179,550 in DRC, 18,515 in RoC and 28,889 in Namibia (USAID 09/07/01). The RNIS does not have any new nutrition information on Angolan refugees.

Overall

The overall humanitarian situation in Angola remains precarious with continued insecurity leading to ongoing population displacement. The continued insecurity has heightened the vulnerability of affected populations, particularly the displaced, and has limited humanitarian access. Based on the limited number of nutrition surveys that have recently been conducted, the nutrition outlook appears mixed; many areas do not show increases in prevalence of malnutrition (as expected during this time of the year) while a few isolated ‘pockets’ of populations are at increased risk showing concomitant increases in prevalence of acute malnutrition. One important factor is related to the volatile nature of the situation. Populations are unpredictably forced to move from rural areas and humanitarian agencies face difficulties in accessing these populations in a timely manner. With further insecurity incidents, it is expected that more isolated pockets of population will require assistance. A second determining factor appears to be the challenge for humanitarian agencies to maintain a regular and sufficient supply of humanitarian assistance to these populations. In areas where access is not reported to be a problem, such as Huambo and Lobito, the IDPs can be considered to be Category III, whilst in Camacupa and Kuito, where the continued supply of assistance is posing considerable problems, the IDPs are considered to be Category I. Further–more, the internally displaced populations, who have no access to land for agriculture and are entirely reliant on the ration, are considered to be in Category II given the fragility of the food pipeline. However, it is also evident that a large number of people are in areas inaccessible to humanitarian relief and their condition is currently unknown (Category V).

Recommendations

From a Needs Assessment mission in Bie Province in June (OCHA 13/07/01)

- Increase the delivery of food through the hiring of additional aircraft and repairing existing runaways
- Preposition emergency food stocks in strategic locations
- Ensure a full food basket and distribute vitamin B to curb the pellagra outbreak

- Ensure the timely delivery of seeds and tools and access to agricultural land for the forthcoming planting season.

From the ACH Ganda Survey in Buengela Province (ACH 05/01)

- Continue the food distribution and reinforce selective feeding activities
- Intensify the outreach activity
- Conduct a nutritional causal analysis

From the ACH Nutritional Survey in Cuito Cuanavale in Cuando Kubango Province

- Strengthen the food ration to 2100 Kcal/ person/day
- Ensure the allocation of land to IDPs in time for the next farming cycle
- Initiate health education programmes and training in the health structures

Zambia

As a result of a good general security situation, Zambia has continued to attract considerable numbers of refugees. The majority are mostly from neighbouring Angola and DRC and latest estimates put the total number residing within the country at 258,661, distributed amongst about five camps (UNHCR 18/07/01). The high numbers have put considerable strain on the governments response capacity and this has led to some problems in supplying sufficient humanitarian assistance: This has been particularly problematic as Zambia has suffered from some internal food security problems as a result of flood damage in the spring (IRIN-SA 20/07/01).

The supply problems were emphasised a few months ago when the refugees at Kala camp in northern Zambia's Luapula Province rioted in response to the lack of availability of food aid. However, the United States has recently pledged 400,000 US dollars to the Zambian refugee population (Xinhua 19/07/01).

Fighting in Angola resulted in an influx of about 1000 refugees per month until April 2001, however this has decreased a little since April. There has also been a continuous trickle of refugees from DRC into northern Zambia, particularly as a result of fighting in DRC's Katanga province. There are currently estimated to be 50,000 Congolese refugees in the country but the continuing peace process has raised the hope that repatriation may be possible in the not too distant future (UNHCR 18/07/01).

The RNIS has not received any new nutritional information on refugees in Zambia but the last surveys (see RNIS 32 and 33) did not indicate alarming levels of acute malnutrition. The situation is not considered critical.

Overall

The numbers of refugees is increasing as a result of continuing violence in neighbouring countries. However, the situation for refugees is not considered to be critical (category IV) although there is some concern over possible pipeline cuts.

Recommendations

- Advocate for the provision of funds to UNHCR programmes to ensure the continued provision of food aid

ASIA – SELECTED SITUATIONS

Afghanistan Region

The humanitarian situation in Afghanistan continues to deteriorate as the country suffers from the combined affects of more than twenty years of conflict and a third consecutive year of extreme drought conditions. The conflict has destroyed infrastructure and decimated the economy while the drought has caused wide scale failure of much of the staple food production in the country. The chronic nature of the twin insults has systematically eroded people's capacity to cope with the deteriorating situation. A recent FAO/WFP Crop and Food Supply Assessment Mission has estimated that even with the current planned food aid, the country can expect a cereal deficit in excess of one million tonnes, and warns of an extremely serious situation (FAO/WFP 08/06/01).

As previously reported (RNIS 32 and 33), within the Taliban controlled parts of the country the most affected areas seem to be the northern and western rain fed agricultural regions such as Herat, Badghis, Balkh and Takhar, where much of the displacement has taken place. Displacement continues to take place both within the country and to neighbouring countries such as Pakistan, Iran and Tajikistan. Current estimates of internally displaced put the number at over 700,000 people (IRIN-CA 22/06/01) with the majority making their way to urban areas having exhausted all possibilities in the rural areas. It has been estimated that with the current rate of displacement the number of internally displaced will top one million during the course of 2001 (IRIN 11/06/01).

Humanitarian Access

The onset of the summer has also seen renewed fighting between Taliban government forces and the Northern Alliance, with up to 60,000 people displaced as a result from the Hazarajat region alone (UN OCHA 24/05/01). The heightened insecurity has resulted in a decrease in access to some areas, particularly the north where the UN has been forced to curtail trips outside of main towns (WFP 18/05/01). Humanitarian access has been further affected by a marked deterioration in relations between the Taliban authorities and the international community. There are reports of increasing harassment of staff from international organisations and violations of the Memorandum of Understanding that exists between the UN and the Taliban. Some of the harassment includes the arrest of essential medical staff, the cancelling of UN flights and the cutting of electricity to the UN office in Jalalabad (IRIN 06/06/01). As relations have deteriorated there have been fears of a forced withdrawal of international staff from the country.

Food Security

The FAO/WFP Crop and Food Supply Assessment mission observed in June this year that rain fed crops (wheat and barley) had almost totally failed as a result of another year of severe drought. The mission estimated that the rain fed wheat production was 40% less than even last years low output (FAO/WFP 08/06/01). The mission also reports that Afghanistan's extensive system of irrigation is also suffering from the decreased precipitation and that years of war have rendered up to 30% of all irrigation systems useless. In a country where as much as 85% of the population depend on agriculture for their livelihoods, the continued failure of crops has destroyed crucial own production of food and left many without their normal purchasing power, effectively blocking access to food through markets. The severity of the situation has left many without the means to cope and the mission reported mounting evidence of pre famine indicators such as reduced food intakes, collapse of purchasing power, decimation of livestock herds, depletion of personal assets, rapidly increasing food prices and the ever swelling number of destitute and displaced (FAO/ WFP 08/06/01). Concern has also been expressed for the future food production prospects with a reported decrease in the area of land planted for the next harvest. This is a result of continued insecurity, the chronic drought and the lack of seeds or other agricultural inputs. This has severe livelihood implications for huge amounts of people, many of whom have failed to cope and have abandoned their land to move to the cities.

The poor state of the Afghan economy has been another key factor in the deterioration of the humanitarian situation with almost no manufacturing and export sectors to speak of. In July 2000 the Taliban banned the production for opium of poppies. This otherwise positive action was taken without an offer of any alternative economic replacement crop. This has had very serious economic implications for many involved in the farming, production and trading of the crop. A great many people are dependent on opium production as a major component of their economic income and it has been estimated that the resultant loss of income from the ban has had adverse livelihood implications for upwards of 2.8 million people (FAO/WFP 08/06/01). The ban is a very significant step forward in the war against opium production. However, it has come at a time when the majority of people are at their most economically vulnerable and have no viable alternative economic means exist. FAO have pointed out that it is essential that replacement crops are made available to ensure that people do not return to opium production (FAO/WFP 08/06/01).

Particularly vulnerable groups

The Taliban have implemented strict edicts that govern the role of women in Afghan society. Unable to work or to study, women are totally dependent on the support of male relatives and particular concern has been raised over the fate of women headed households. These women have weak or non-existent links to the labour market and typically rely on charity to feed themselves and their families. However, increasingly there are fewer resources left to share and there is genuine concern for how many will be able to cope (FAO/WFP 08/06/01). A minority group that has generated considerable concern is the Kuchi, traditional nomads who follow traditional livestock migration routes in search of grazing. The drought and insecurity have disrupted the migration routes, destroyed pasture and decimated livestock herds, leaving the Kuchi not just without livelihoods but bringing to an end a traditional way of life, with the majority being forced to settle in makeshift camps along major highways (FAO/WFP 08/06/01).

Humanitarian Response

With the continuing deterioration of the situation there has been a greatly increased international awareness of the emerging crisis and increased donor commitment with greatly increased pledges. The current WFP EMOP is scheduled to finish in March 2002 but the increased demands mean that it will be exhausted in October 2001 and already a new EMOP is being drafted (WFP 25/05/01). WFP has established a considerable food pipeline and general distributions are being affected in many areas particularly where there are high concentrations of displaced people around Mazar-e-Sharif in the north, and Herat in the west. An initial strategy was to try and prevent the huge rural to urban migration and response was designed not to encourage the establishment of large camps. However, with the continued deterioration of the situation, particularly in the north of the country, more structured camps with capacities for over 5,000 families are being established in Mazar-e-Sharif in Balkh province. One of the primary reasons for this is that the host families with whom many displaced had been staying are simply no longer able to cope (IRIN-CA 22/06/01).

Central Region

There has been a significant reduction in the area planted with wheat, particularly in the east central provinces of Bamyan and Ghor. This is a result of insecurity and the poor irrigation systems (FAO/WFP 08/06/01).

Kabul City

The RNIS has no new nutrition information on Kabul. The last figures for numbers of displaced reported by WFP are from December 2000 and suggest numbers from 100–500,000 people (RNIS 32 and 33). No surveys have been conducted since October 2000, which showed relatively low levels of acute malnutrition (RNIS 32 and 33). ACF have indicated that they have seen the usual seasonal rise in malnutrition with the onset of diarrhoea during the summer months but the increase has not been greater than previous years (ACF 09/07/01).

There was a serious breakdown in relations between the Taliban authorities and WFP earlier in the year when the Taliban refused to allow WFP to employ women to conduct a survey of beneficiaries enrolled in bakery projects throughout the city. For a time it looked as though WFP would close the programmes affecting 282,000 vulnerable people, however a compromise was eventually reached. The incident sharply outlined the deterioration in relations between the international community and the authorities and raised fears of further reductions in humanitarian space (IRIN 30/05/01).

Eastern Region

The RNIS has received no new nutrition information from the eastern region but the last survey conducted in December showed uncritical levels of acute malnutrition and low mortality rates (RNIS 32 and 33). The FAO/WFP crop assessment mission indicate that the east has seen an increase in the irrigated crop area planted and that there has been an increase in wheat production, however the region continues to see influxes of IDPs and general countryside drought conditions are likely to mean that the area remains vulnerable to continued food insecurity (FAO/WFP 08/06/01).

Southern Region

Rain fed wheat did not fair as badly in the south as in other areas but the area is considered to be a very minor producer. There is concern over the fate of farmers in the southern region who have established considerable debts as a result of the ongoing drought. As a result the UN is expecting further internal

displacement as people are forced off their land. The RNIS reported 42,000 displaced in Kandahar in the last RNIS 32 and 33 and recent IRIN reports indicate that this number has increased considerably with as many as 23,000 families or 161,000 individuals currently displaced from traditional areas. The vast majority of these are Kuchi nomads (IRIN 14/06/01).

North Eastern Region

The RNIS has not received any recent surveys on the populations of the northeast but UN and NGO reports indicate that the situation remains extremely precarious. The province of Badakhshan remains a front line between Taliban and opposition forces and fighting has forced many people to flee into neighbouring countries and further west into provinces such as Baghlan and Kunduz (IRIN 20/06/01). RNIS 32 and 33 reported a nutritional survey in Khodja Baodine, Takhar province which indicated relatively low prevalences of acute malnutrition but elevated mortality. Numbers in the camp have been increasing steadily with 300 families arriving in the week before the end of June this year (UN OCHA 27/06/01).

Northern Region

The northern region is arguably the area most affected by both drought and conflict related insecurity. WFP estimate that there are close to 33,000 families or 198,000 people displaced in the northern region (WFP 04/05/01) with many converging on large cities such as Mazar-e-Sharif in Balkh province in search of casual labour and charity.

Balkh Province

An estimated 14,000 families have entered Balkh province over the past six months all in search of some form of work, water and food. Balkh has always been regarded as an economic hub within Afghanistan but the pressure on resources from the influx of so many displaced is creating huge pressures for the communities already there (IRIN 21/06/01). The RNIS has no new nutrition information for the province, however a MEDAIR assessment of the Chemtal district to the south west of the province has highlighted the extremely poor situation. Access to health facilities in the region was found to be very poor with no doctors or health posts recorded. Access to food is very greatly reduced with the almost total failure of crops and with most of the livestock having been sold off or slaughtered already. Access and availability to water was highlighted as the biggest challenge to the area and coupled with the other factors the nutritional situation is likely to deteriorate (MEDAIR 07/06/01).

Faryab Province

The RNIS reported a very poor nutritional situation in Faryab province (RNIS 32 and 33) with confirmed cases of vitamin C deficiency (scurvy) and alarming crude and under five mortality rates. A recent survey in Kohistan district of Faryab province by SCF-US in April of this year indicated that although acute malnutrition was not yet a problem of public health significance with a prevalence of 7% acute malnutrition (W/Ht < -2 Z-Scores and/or oedema), including 1.1% severe acute malnutrition (W/Ht < -3 Z-Scores and/or oedema), the crude mortality rate of 2.6/10,000/day and an under five mortality of 5.9/10,000/day, were both significantly above emergency thresholds. The major cause of death for the under 5 children was measles (24%) followed by bloody diarrhoea (22%), and respiratory diseases (13.5%). The outbreaks of measles were especially worrying given the absence of health care in the district, and subsequently no routine EPI nor vitamin A distribution. The poor prospects for the next harvest, the lack of available coping mechanisms and the relatively high morbidity and reported mortality all suggest that acute malnutrition could increase substantially in the near future (SCF-US 10/04/01).

The survey reported that attempts to cope with the poor situation were almost exhausted and people were resorting to crisis strategies such as selling land, begging, taking very high interest loans or becoming displaced. The survey also reported very poor access to drinking water for almost all villages in the highlands (SCF-US 10/04/01).

The survey reported a reduction in the number of reported cases of scurvy with the peak having been in mid-December to mid-February. UN OCHA report that up to 5% of the population in affected areas had symptoms of scurvy. The presence of scurvy indicates just how poor the quality of the diet has been with people relying on tea and bread during the winter months when normally they would be eating a variety of foods including dried raisins, mulberries and tomatoes, all containing vitamin C (UN OCHA 24/04/01). The onset of summer months has seen a fall in the incidence of scurvy, with the population able to access some wild foods (SCF-US 10/04/01).

Western Afghanistan

Herat City

Herat continues to receive some of the highest numbers of displaced with between three to four hundred families arriving daily in April (IRIN 16/04/01). There are currently six camps around the city with the largest holding an estimated 120,000 people. Food distributions are ongoing with the sixth round of distributions taking place in the first week of July. However, as more and more people arrive the capacity to cope is severely strained. The need for adequate water and sanitation grows and in April there was an estimated shortfall of 2000 latrines in Maslakh camp raising fears about the greatly increased risk of epidemics (IRIN 16/04/01). In an attempt to cope with the increasing numbers a Registration Liaison Unit (RLU) has been established by international organizations to monitor and control numbers through the establishment of check posts outside of the city (WFP 22/06/01). The RNIS does not have any recent nutritional surveys from Herat but acknowledges the considerable aid effort currently being undertaken to provide the displaced with food. The sheer number of people, the poor sanitation and limited access to clean water, are extreme causes for concern and could lead to epidemic outbreaks.

Afghan refugees in Pakistan

Pakistan has been host to a sizeable Afghan refugee population for some years and as the crisis in Afghanistan continues to escalate, refugees continue to cross the border into the northwest frontier province of Pakistan, particularly around the city of Peshawar. Camps, such as Shamsha-too, Akora Khattak and Jalojai have been receiving refugees in large numbers since the beginning of the year. One of the most difficult problems facing the refugees in Pakistan is the increasingly hard line of the government. The Pakistani government has attempted to close its borders to further influxes of refugees and has sought to deport unregistered refugees in an attempt to gain some control over the huge numbers of recently arrived Afghans requiring assistance. There are estimated to be nearly 200,000 recently arrived refugees in the area (IRIN-CA 14/05/01).

The status of refugees in the camp of Jalojai has been the cause of much argument between UNHCR and the government of Pakistan who have refused to allow the registration and the systematic delivery of relief aid to more than 80,000 IDPs currently in the camp. The reason for this would appear to be the government's determination and insistence to the international community that it is unable to provide for the refugees and that they ought to be returned and provided for within Afghanistan. This has resulted in a stalemate for much of the early part of this year. The government eventually allowed the WFP to access the camp in May to begin much needed food distributions which have continued up to the present day (IRIN-CA 24/05/01). Food distributions have been ongoing in the other camps of Sham-shatoo and Akora Khattak.

Plans for the refugees in Jalojai have developed and the government has granted permission for an official registration of the refugees to take place with a view to repatriating those that are able and moving those that are not to other camps. The screening was officially scheduled for the 21st of June but has been postponed (WFP 06/07/01).

The refugees in Jalojai are considered extremely vulnerable as a result of difficulties in access to the population. The latest nutrition survey results as reported in RNIS 32 and 33 were of concern. The RNIS does not have recent information but since the survey, general food distributions have occurred and access to the refugees has improved. However, a UNHCR report on the health of new refugees in Jalojai highlights high morbidity with respiratory infection and diarrhoea being leading causes of sickness. A heat wave has caused a number of related mortalities, however the mortality rates for both the general and under five population are within emergency thresh-olds (CMR 0.12/10,000/day and under five mortality 0.56/10,000/day) (UNHCR 15/05/01).

Afghan refugees in the Islamic Republic of Iran

Iran has been home to a huge body of long-term Afghan refugees and the last few months have seen upwards of 200,000 new refugees crossing the border into Iran. The majority of the refugees are fleeing the drought and the continued fighting. The government of Iran has expressed its concern at the numbers and the need for assistance to deal with the increased burden of refugees. An extensive registration of both documented and undocumented refugees was undertaken and the total has been given as 2.5 million, both new and old. The government has announced that all non-registered refugees will be considered illegal immigrants and will be refused the right to stay in the country (WFP 29/06/01). There is no nutritional information on the refugees in Iran but it is likely that nutritional status will decline as numbers increase

without the resources to deal with them.

Afghan refugees in Tajikistan

Tajikistan has not received large influxes of Afghan refugees in the past although it is believed to be an important route for the transportation of drugs from Afghanistan via central Asia (IRIN 15/06/01). Despite the Taliban ban on opium production, considerable stock piles exist and the drug trade does still continue. The Tajik government has recently ordered all Afghan refugees out of the capital Dushanbe to outlying areas where they will be given temporary residency. Figures for the number of refugees are contested with the government claiming that 16,000 reside within the city and the Committee of Afghan Refugees claiming that there are only 4,000 with many of them being long term residents (IRIN-CA 24/05/01).

On the Afghan border there are two camps of about 12,000 Afghan refugees on two islands in the Pyandj river. Island #9 is the first camp with 9,000 people and island #13 with 1026 people. Aid to the refugees was stopped in March as a result of claims that food was going to fighters but it was resumed at the end of May after a UNHCR investigation (IRIN-CA 31/05/01).

The health and food needs of the refugees are being met and an AAH MUAC screening of all children under five years of age revealed extremely low levels of acute malnutrition in February. A more recent screening in April has revealed a slightly increased rate but still within acceptable levels. However AAH point out the deterioration in nutritional status has been rapid and there is a need to watch the situation closely (AAH 10/04/01).

At Afghan refugee camp post 13, a nutritional assessment/ screening exercise of all children under 5 years of age found that 7.8% of children between 6 months and less than 60 months were acutely malnourished (<125mm) in April 2001, as compared to 0.62% in February 2001. Although the overall rates are not alarming the rapid deterioration was cause for concern (AAH 10/04/01).

Overall

The first half of 2001 has seen the situation deteriorating within Afghanistan. The ongoing drought and fighting as well as the extremely poor economic situation in Afghanistan, has meant that many are simply unable to cope with the increasingly harsh situation. As a result internal displacement has continued and it is estimated that the number of internally displaced will reach one million this year. The RNIS does not have much new nutrition information but numerous situation reports, including the FAO/WFP crop assessment, all point towards a dramatic deterioration in the humanitarian situation with many people resorting to non sustainable, crisis coping mechanisms. For many the final option has been the abandonment of their land and the move to urban areas in the hope of obtaining some form of work and assistance. The humanitarian community has launched a considerable response to the crisis but is suffering from a reduction of humanitarian space as a result of poor relations with the Taliban authorities. Future prospects for the many displaced are extremely bleak and look set to deteriorate further. Further displacement is to be expected and a very considerable humanitarian effort is required to alleviate the crisis. Of additional concern is the general unwillingness of neighbouring countries to continue to accept and host increasing numbers of Afghan refugees within their countries, who therefore are at high/ moderate nutritional risk.

The relatively low rates of acute malnutrition in the Kohistan (Faryab Province) presents a very unusual situation of acute food insecurity, where coping mechanisms are near exhaustion, combined with outbreaks of very serious diseases like measles, which at the time of the survey were not reflected in the prevalence of acute malnutrition. This raises several questions. There is no explanation as to why nutritional status does not reflect these events; either a fall in nutritional status of the population was imminent or there was a hidden means by which nutritional status of young children was being maintained. For example, high quality or preferential care for younger children and or undiscovered food or income sources. An interesting question for the RNIS is whether adult nutritional status is similarly unaffected by the prevailing poor situation or whether it is compromised at the expense of preserving child health.

Recommendations and priorities

From the RNIS

- Address the immediate emergency needs of displaced populations focusing on the provision of food, medical relief and water and sanitation.

- Conduct nutritional anthropometric surveys on adults to help determine the degree to which children are being preferentially fed at the expense of adults

From the FAO/WFP Crop and Food Supply Assessment (FAO/WFP 08/06/01)

- Rehabilitate the water supply and irrigation systems that are in a state of large-scale disrepair.
- Supply farmers with much needed agricultural seeds.

From the SCF-US Survey Kohistan District, Faryab Province, Northern Afghanistan (SCF-US10/ 04/01)

- Assess, monitor and respond to the short-fall in food needs (food gaps).
- Assess the impact of the drought on coping strategies, in order to inform programming decisions.
- Provide complimentary food items (oil, pulses and blended food) to the general ration of wheat, to help prevent further out-breaks of micronutrient deficiencies.
- Implement emergency measles immunization up to the age of 12 years, combined with vitamin A distribution.
- Address health needs.
- Establish a standardised methodology for collecting and analysing data to allow for meaningful spatial and temporal comparison of data.

LISTINGS OF SOURCES FOR JULY 2001 RNIS REPORT 34

ACF	25/07/01	Liberia: des milliers de Libériens sont toujours présents dans le Lofa, sans aide ni aucune protection
ACF-F	09/07/01	Personal Communication
ACF-UK	10/04/01	Rapid Nutritional Assessment, 10 th of April, Afghan refugees camp #13
ACF-US	07/03/01	Nutritional Survey in Gulu District, Uganda
ACF-US	04/01	Anthropometric Surveys, Old Fangkak and Maraeng Districts, Phou State
ACH	05/01	Relatorio dos Inqueritos Nutricionas, Vila De Ganda, Provincia de Benguela
ACH	13/06/01	Nutrition survey in Cuito Cuanavale
ACH	24/07/01	Personal Communication from HQ
AFP	14/05/01	Burundi headed for widespread civil war, warns think-tank ICG
AFP	01/06/01	Taliban raid ICRC hospital, Arrest staff in Afghanistan
AFP	05/07/01	Africa's most complex conflict high on the menu for OAU summiteers
AFP	13/07/01	Twenty killed in Somali capital
AI-Nejah	25/05/01	Report on a visit to Danot and Korilile towns, Danot Woreda, Warder zone, Somali region
BBC	21/05/01	ICRC suspend flights in Southern Sudan
BBC	05/07/01	http://www.bbc.co.uk/hi/english/world/africa/newsid_1422000/1422857.stm

CAD	23/03/01	Enquete nutritionelle anthropometrique dans la province de Bubanza
ENFS	15/06/01	Ethiopia Network on Food Security Number 6/01
FAO / GIEWS	14/05/01	Crop and Food Supply Situation in Sudan
FAO/WFP	08/06/01	FAO/WFP Crop and Food Supply Assessment Mission To Afghanistan
FAO/WFP	19/06/01	Crop and Food Supply Assessment Mission to Angola
FEWS	15/03/01	South Sudan Food Security Update March 15 th
FEWS	12/04/01	Kenya Food Security Update April 12
FEWS	07/05/01	Eritrea Food Security Update: May 7 th
FEWS	11/05/01	Southern Sudan Food Security Update, May 11 th
FEWS	16/05/01	Southern Sudan Update, May 16 th
FEWS	14/06/01	Kenya Food Security Update: June 14 th
FEWS	14/06/01	Eritrea Food Security Update: June 14 th
FEWS	15/06/01	A monthly FEWS newsletter on Food Security and vulnerability in Uganda
FEWS	15/06/01	Greater Horn of Africa Food Security Update
FEWS	16/06/01	Southern Sudan Update
FEWS	09/07/01	Tanzania Food Security Report: July 9, 2001
FSAU	09/05/01	Monthly Food Security Report for Somalia
FSAU	09/05/01	Monthly Food Security Report for Somalia
FSAU	05/01	Monthly Nutrition Update
FSAU	06/01	Monthly Nutrition Update
FSAU	07/01	Monthly Nutrition Update
FSAU	10/07/01	Monthly Food Security Report for Somalia
Goal	12/02/01	Nutrition Survey, Twic county, South Sudan
HRW	07/01	Guinea: Refugees still at risk
HRW	24/07/01	Sierra Leone: Most Serious attacks in months
IHDP	03–04/01	Integrated Health Development Programme–Kitgum District. Weather Forecast and Food Security Bulletin # 20
IRC/HCR/	12/04/01	Nutritional Anthropometric & Micronutrient survey, Kakuma refugee camp, North
ICH		West Kenya
IRIN	16/04/01	Afghanistan: Record Influx of internal refugees into Herat
IRIN	30/05/01	Afghanistan: Breakdown in talks threatens humanitarian programmes
IRIN	06/06/01	Afghanistan chief warns of danger signals
IRIN	11/06/01	Afghanistan: IRIN Interview with Under–Secretary–General Kenzo Oshima
IRIN	12/05/01	Fighting at port challenges interim government
IRIN	28/05/01	Sudan: IRIN news brief
IRIN	31/05/01	Burundi: Situation “Complex and intractable”, UN report says

IRIN	08/06/01	Sudan: Close call for WFP in Bahr al Ghazal bombing
IRIN	14/06/01	Afghanistan: Southern communities reeling from drought
IRIN	15/06/01	DRC: Children at great risk in a war-torn society
IRIN	15/06/01	Tajikistan: Border villages victims of Afghan raiders
IRIN	20/06/01	Afghanistan: IRIN focus on war-affected displaced in the north
IRIN	21/06/01	Afghanistan: Influx of displaced in Balkh drains local resources
IRIN	02/07/01	Sudan: IDPs in need of shelter as rains set in
IRIN	06/07/01	Eritrea: Interview with Simon Nhongo, UN Humanitarian Coordinator
IRIN	10/07/01	Somalia: A question of recognition
IRIN-CA	24/05/01	Weekly Round-Up covering period 18 th – 24 th of May
IRIN-CA	31/05/01	Weekly Round-Up covering period 25 th – 31 st May
IRIN-CA	22/06/01	Afghanistan: Aid Community Sets up Camps in North
IRIN-CEA	15/06/01	IRIN-CEA Weekly Round Up
IRIN-CEA	18/06/01	IRIN-CEA Update for the Great Lakes
IRIN-CEA	02/07/01	New hope for the malnourished
IRIN-CEA	04/07/01	IRIN-CEA Update for the Great Lakes
IRIN-CEA	13/07/01	IRIN-CEA Weekly Round Up
IRIN-CEA	16/07/01	IRIN Update 1222 for the Great Lakes
IRIN-HOA	10/04/01	IRIN-HOA Update
IRIN-HOA	25/05/01	Horn of Africa Weekly Round-up 38
IRIN-HOA	04/06/01	IRIN-HOA Update
IRIN-HOA	18/06/01	IRIN-HOA Update June 18
IRIN-SA	20/07/01	IRIN-SA Weekly Round Up 28
IRIN-SA	27/07/01	ANGOLA: IRIN Focus report on Camacupa's IDP camps
IRIN-WA	29/05/01	IRIN-WA Update 984
IRIN-WA	01/06/01	IRIN-WA Weekly Round-Up 74
IRIN-WA	14/06/01	IRIN-WA Update 996
IRIN-WA	28/06/01	WFP calls for help to meet shortfall in food aid
IRIN-WA	20/07/01	IRIN-WA Weekly Round Up 81
IRIN-WA	23/07/01	IRIN-WA Update 1023
IRIN-WA	24/07/01	IRIN Update 1024 on West Africa
MEDAIR	07/06/01	Survey summary from Mazar – North Afghanistan
Merlin	05/01	Nutritional survey, Kalima town, Maniema province, DRC
MSF	26/06/01	Severe malnutrition rates increase by 172% as food rations decrease in Kenyan refugee camps
MSF	02/07/01	Angola: Warring parties' neglect adds to humanitarian emergencies

MSF	03/07/01	Humanitarian aid insufficient for displaced in northern Lofa
MSF	13/07/01	Personal communication from HQ
MSF-B	14/05/01	Nutritional Survey in Kuajok Payam, Bahr el Ghazal, South Sudan
MSF-B	31/05/01	Personal communication from HQ
MSF-S	17/06/01	Personal communication from HQ
NRC	2001	Global IDP Data Base country profiles (www.db.idproject.org)
OCHA	04/01	DRC Affected Populations by Province. Refugees and IDPs (April 2001)
OCHA	29/05/01	Sierra Leone Humanitarian Situation Report May 9 th to 29 th
OCHA	30/05/01	Uganda Humanitarian Update, Volume III, Issue V
OCHA	31/05/01	Burundi: Humanitarian Situation Overview Jan-May 2001
OCHA	06/01	Uganda Humanitarian Update Volume III, Issue VI
OCHA	15/06/01	Flash OCHA-RDC Situation humanitaire au 13 juin 2001
OCHA	16/06/01	Sierra Leone Humanitarian Situation Report 30 th May to 16 th June
OCHA	20/06/01	Humanitarian Situation in Angola Monthly Analysis: May 2001
OCHA	28/06/01	Côte d'Ivoire: IRIN Focus on Sierra Leonean and Liberian refugees
OCHA	29/06/01	OCHA Burundi: Update on the Humanitarian Situation
OCHA	01/07/01	Humanitarian Situation in Angola: June 25 th to July 1 st
OCHA	03/07/01	Kenya Humanitarian Update Issue 6, 1-30 June 2001
OCHA	04/07/01	Flash OCHA-RDC situation humanitaire au juillet 04 2001
OCHA	11/07/01	Sierra Leone Humanitarian Situation Report 17 th June to 10 th July
OCHA	13/07/01	Special Humanitarian Report on Bie Province
Oxfam	11/04/01	Humanitarian organisations involved in delivering emergency relief in Kenya
SCF-UK	18/04/01	Nutritional survey in Masina and Kimbanseke communes East Kinshasa
SCF-UK	15/05/01	How bad does it have to get? Nutritional Status in Darfur in Spring 2001
SCF-UK	01/06/01	Sudan Emergency Update
SCF-UK	05/06/01	Nutrition Survey in Goncha Siso Enese Woreda, East Gojam zone, Amhara
SCF-US	10/04/01	Nutrition Survey in Kohistan District, Faryab Province, North Afghanistan
Tearfund	07/06/01	Nutritional Survey Report, Maluakon, Aweil East County, South Sudan
UN	2001	West Africa: UN joint emergency response to the IDP crisis in Liberia
UN	2001	West Africa: UN joint emergency response to the IDP crisis in Liberia
UN	2001	Consolidated Interagency appeal for West Africa
UN DPI	20/06/01	Ethiopia/Eritrea: Annan reports progress, but says 'serious difficulties' remain
UNDPI	12/07/01	Cash Crunch hampers humanitarian relief
UN-EUE	20/04/01	Ethiopia Humanitarian Update 20 th April 2001

UN-EUE	29/05/01	Post-drought Somali Region struggles with past emergency legacy
UN-EUE	06/06/01	Horn of Africa Review May 2001
UN-EUE	28/06/01	Ethiopian Humanitarian Update 28 th June 2001
UNHCR/ARRA/WFP	03/01	Report of Joint UNHCR/ARRA/WFP Mission to Assess the Health and Nutritional Situation of Eritrean Refugees at Walanhibi Site, Tigray
UNHCR	2001	UNHCR 2001 Global Appeal
UNHCR	15/05/01	Report on New Arrivals, Jalozei Refugee Camp, Peshwar Jan-May 2001
UNHCR	06/01	UNHCR Tanzania Situation Report
UNHCR	06/06/01	UNHCR Eritrea Update # 4
UNHCR	26/06/01	UNHCR Eritrea Update # 5
UNHCR	14/07/01	Statistics Update for Tanzania
UNHCR	18/07/01	UNHCR Africa Fact Sheet July 2001
UNHCR	20/07/01	UNHCR Briefing Notes: FYR Macedonia, West Africa, HIV/AIDS
UNICEF	09/04/01	Ethiopia Donor Update
UNICEF	05/01	UNICEF Somali review for May
UNICEF	18/05/01	Kenya Donor Update
UNICEF	08/06/01	Sierra Leone Donor Update
UNICEF	30/06/01	UNICEF Angola Situation Report June 2001
UNMEE	15/06/01	Press briefing by UNMEE spokesman, Asmara, Eritrea
UN OCHA	24/05/01	UN OCHA: Assistance to Afghanistan Weekly Update No. 413
UN OCHA	27/06/01	Afghanistan Weekly Update No. 418
UNSC	25/06/01	Tenth report of the Secretary-General on the United Nations Mission in Sierra Leone
USAID	20/06/01	USAID Kenya – Drought information bulletin # 1
USAID	22/06/01	USAID Ethiopia-Complex Emergency/drought and health bulletin #1
USAID	03/07/01	USAID Burundi: Complex Emergency Bulletin # 1
USAID	09/07/01	USAID Angola: Complex Emergency Situation Report # 2
USCR	19/06/01	USCR Country Report Eritrea
USCR	2001	USCR Country Report Kenya
WFP	29/03/01	Sudan Food Crisis: On the Brink
WFP	04/05/01	WFP Emergency Report No 18
WFP	11/05/01	WFP Emergency Report No 19
WFP	18/05/01	WFP Emergency Report No 20
WFP	25/05/01	WFP Emergency Report No 21
WFP	01/06/01	Poor rains signal hunger ahead for tens of thousands in Southern Somalia
WFP	01/06/01	WFP Emergency Report No 22
WFP	08/06/01	WFP Emergency Report No 23

WFP	15/06/01	WFP faces serious funding shortfalls in DRC
WFP	15/06/01	WFP Emergency Report No 24
WFP	22/06/01	WFP Emergency Report No 25
WFP	28/06/01	Nutrition Sitrep WFP Sudan
WFP	29/06/01	WFP Emergency Report No 26
WFP	06/7/01	WFP Emergency Report No 27
WFP	20/07/01	WFP Emergency Report No 29
WFP/TSU	05/01	IDP Estimates, May 2001
WHO	24/06/01	Situation Sanitaire et Humanitaire a Kissidougou No. 13/2001
WHO/ UNICEF	28/06/01	WHO/UNICEF Joint Mission, Democratic Republic of the Congo
Xinhua	08/05/01	Tripartite body established for repatriation of refugees in Tanzania
Xinhua	19/07/01	US donates money to refugees in Zambia

Abbreviations used in the text

AAH–UK	Action Against Hunger UK
ACF–F	Action Contre la Faim France
ACF–USA	Action Against Hunger USA
ACH–S	Action Against Hunger Spain
AI	Amnesty International
BEG	Bahr El Ghazal
BMI	Body Mass Index
CAD	Children’s Aid Direct
CMR	Crude Mortality Rate
DRC	Democratic Republic of Congo
FAO	Food & Agricultural Organization of the United Nations
FEWS	Famine Early Warning System
FSAU	Food Security Assessment for Somalia
ICRC	International Committee of Red Cross
IDP	Internally Displaced Person
IRIN	Integrated Regional Information Network (of DHA)
IRIN–WA	Integrated Regional Information Network for West Africa (of DHA)
IRIN–SA	Integrated Regional Information Network for Southern Africa (of DHA)
MSF–B	Medecins Sans Frontieres – Belgium
MSF–CH	Medecins Sans Frontieres – Switzerland
MSF–F	Medecins Sans Frontieres – France
MSF–H	Medecins Sans Frontieres – Holland
MSF–S	Medecins Sans Frontieres – Spain

MOH	Ministry of Health
MUAC	Mid-upper arm circumference
NGO	Non-governmental Organisation
OA	Oxfords Analytica
OCHA	Office for the Co-ordination of Humanitarian Assistance
OLS	Operation Lifeline Sudan
RI	Refugees International
RoC	Republic of Congo (Congo-Brazzaville)
SCF-UK	Save the Children Fund – US
SCF-US	Save the Children Fund – US
UNDPI	United Nations Department of Public Information
UNHCHR	United Nations High Commissioner for Human Rights
UNHCR	United Nations High Commission on Refugees
UNICEF	United Nations International Children’s Emergency Fund
USAID	US Agency for International Development
WFP	World Food Programme
WHO	World Health Organization
WHM	World Harvest Mission

TABLES AND FIGURES

Table 2: Information Available on Total Refugee/Returnees/Displaced Populations requiring assistance (as of July 2000).

Please note that these are best estimates at the time of going to press

Situation	Population Numbers						Total	Change from Jul-01	Nutr Stat*	Co
	Condition									
	I: V. High Risk	II: High Risk	III: Mod Risk	IV: Not Critical	V: Unknown					
Sub-Saharan Africa										
1. Angola		2,500,000	900,000				3,400,000	-400,000	imp.	Situati extrem precar many access to be a
2. Great Lakes Region								0		
Burundi	100,000	100,779	179,000				379,779	779	sta	IDPs a returne

E Dem Rep of Congo	990,000	932,000	260,000	152,000			2,334,000	0	det.
Tanzania		5,723	532,850				538,573	11,573	det.
3. Eritrea		58,163					58,163	-150,000	imp.
4. Ethiopia			60,000	10,780			70,780	531,465	imp.
5. Kenya			213,610				213,610	10,110	sta
6. Liberia/Sierra Leone Region									
Liberia		75,000	55,000	20,000			150,000	30,000	det.
Sierra Leone	125,000	400,000	450,000		600,000		1,575,000	-25,000	imp.
Guinea-Conakry/Cote d'Ivoire	60,000	230,000	400,000				690,000	30,000	imp.
7. Somalia	40,000	80,000	237,000				357,000	0	sta

									high risk at high high risk
8. S. Sudan	412,386	1,632,000	833,223	99,320		2,976,929	9,817	det.	IDPs in Kordofan Equatoria Bahr a high/v. Others
9. Uganda		340,000	440,000	219,175		999,175	89,175	stat.	IDPs h moder Refs. n
10. Zambia			251,254	15,000		266,254	41,254	stat.	Refs. a due to proble not crit
Total	1,727,383	6,353,665	4,811,937	516,275	600,000	14,009,263	-883,757		
Asia / Europe (Selected Situations)									
11. Afghanistan Region	450,000	1,000,000	1,650,000	500,000		3,600,000	650,000	det.	Extens and co induce displac within and to neighb areas

I: High Prev – Those reported with high prevalences of malnutrition (where available >20% wasting) and/or micronutrient deficiency diseases and sharply elevated mortality (×3 normal)

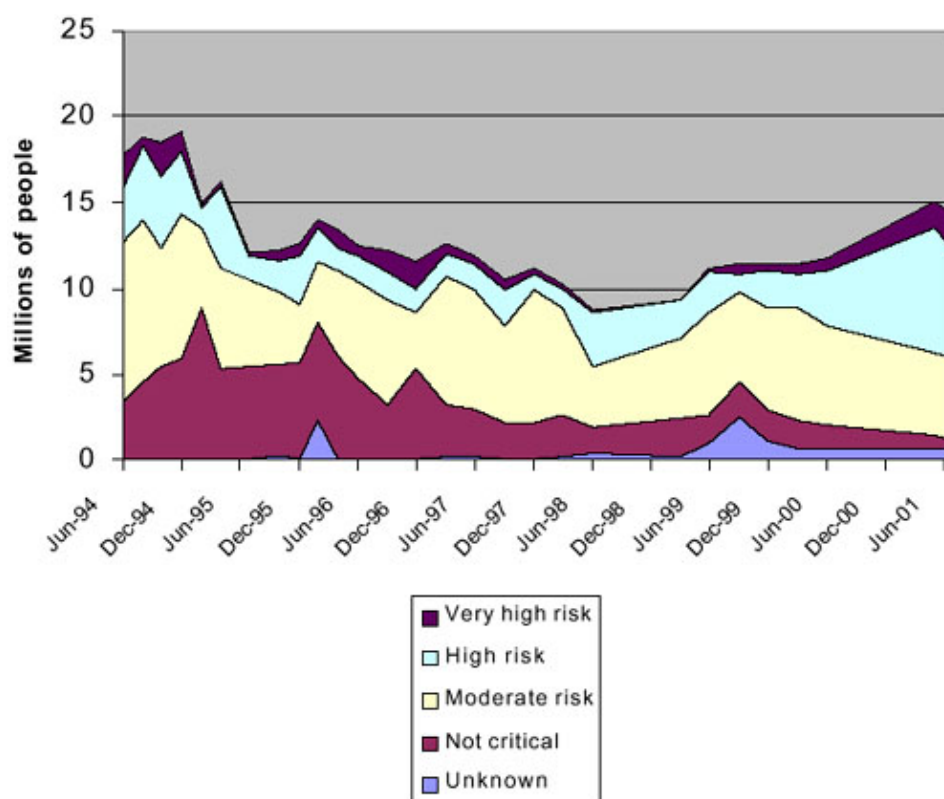
II: High Risk – Population at high risk, limited data available, population likely to contain pockets of malnutrition (e.g. wasting).

IIb: Mod Risk – Population at moderate risk, may be data available, pockets of malnutrition may exist.

IIc: Not Critical – Probably not at heightened nutritional risk.

III: Unknown – No information on nutritional status available.

** Indicates status of nutritional situation. Imp = improving; det = deteriorating; stat = static (i.e. no change).*



The number of refugees, returnees and IDPs in Sub-Saharan Africa and their nutritional risk over time

RESULTS OF SURVEYS QUOTED IN JULY 2001 RNIS # 34

Survey Area	Survey conducted by	Date	% Wasted**	% Severely Wasted**	Oedema	Crude Mortality (/10,000/day)	Under 5 Mortality (/10,000/day)	Mea immun covere (%)
The Greater Horn of Africa								
ETHIOPIA								
Borana Zone	GOAL	03/01	4.6	0	0	0.8	1.6	
Fafan IDP camps	UNICEF	30/04/01	21.2	3.3	–	–	N/a	
Goncha Siso Enese Woreda	SCF-UK	05/06/01	8.5	0.4	0	1.31	0.59	3
KENYA								
Kakuma camp	IRC/HCR/ICH	12/04/01	17.2	1.4	0.2	–	–	9
SUDAN								
Twic county	GOAL	12/02/00	26	2.4	0	0.5	0.85	
North Darfur	SCF-UK	04/01	23.4	2.1*		Question	Question	3
Old Fangak District	AAH-US	04/01	20.4	3.0	0.1	–	–	
Maraeng District	AAH-US	04/01	21.3	2.3	0	–	–	0

Kuajok Payam	MSF-B	05/01	15.5	2.2		-	-	17.7
Aweil East	TEARFUND	06/01	28.9	5.5	-	-	-	-
West African Region								
SIERRA LEONE								
Kenema district rural	Goal	02/01	5.2	1.0	0.6		0.97	49.3
The Great Lakes Region								
BURUNDI								
Bubanza	CAD	03/01	8.6	2.2	0.7	0.8	5	81
DRC								
Masina and Kim-banseke	SCF-UK	04/01	11	2	1.2	-	0.77	-
Kalima, Maniema	Merlin	05/01	4.6	0.9	0.2	1.2	3.6	22
UGANDA								
Gulu district Eastern Camps	ACF-US	03/01	6.7	1	0	-	1.78	73.1
Gulu district Western Camps	ACF-US	03/01	7.7	1.8	0.1	-	2.27	76.6

* Oedema is included in this figure

** wt/ht unless specified; cut-off = n.s. means not specified but usually -2z scores wt/ht for wasting and -3z scores for severe wasting.

MUAC unless specified cut-off for wasting is <125 mm and <110 mm for severe wasting.

NOTE: see box on back cover for guidance in interpretation of indicators.

RESULTS OF SURVEYS QUOTED IN JULY 2001 RNIS # 34

Survey Area	Survey conducted by	Date	% Wasted**	% Severely Wasted**	Oedema	Crude Mortality (/10,000/day)	Under 5 Mortality (/10,000/day)	Measles immunisation coverage (%)
Southern African Region								
ANGOLA								
Ganda (displaced)	ACH	05/01	9.5	1.1	0.5	1.28	3.11	46.6
	ACH	05/01	10.1	1.1	0.3	1.41	2.1	57.2

Ganda (resident)								
Cuito Cuanavale	ACH	13/06/01	6	1.9	–	1.6	4.1	41.6
Afghan Area								
Faryab Province	SCF-US	10/04/01	7.0	1.1	–	2.6	5.9	–
Tajikistan								
Island #13	AAH-UK	10/04/01	2.73	0.45	–	–	–	–
Niawama IDP camp	Goal	02/01	3.9	1.5	1.4	–	0.91	81.6

* Oedema is included in this figure

** wt/ht unless specified; cut-off = n.s. means not specified but usually –2z scores wt/ht for wasting and –3z scores for severe wasting.

MUAC unless specified cut-off for wasting is <125 mm and <110 mm for severe wasting.

NOTE: see box on back cover for guidance in interpretation of indicators.

NUTRITIONAL ASSESSMENTS

Notes on nutritional assessments in the text

The Greater Horn Region

Ethiopia

Borana Zone The survey was conducted by Goal in March 2001. A standard two stage cluster survey was used to measure 954 children between 6 and 59 months in 30 clusters. The prevalence of acute malnutrition (defined as <–2 Z scores weight for height and/ or oedema) was estimated at 4.6% (95% C.I. 3.3–6.3%) and no severe acute malnutrition (defined as <–3 z scores weight for height and/or oedema) was observed. CMR was estimated retrospectively over the previous three months at 0.8/10,000/day and the under five mortality was 1.6/10,000/day. The measles vaccination coverage was not estimated.

Fafan IDP camp The survey was conducted by UNICEF in April 2001. A systematic random sampling methodology was used to measure 429 children between 65 and 110 cm. The prevalence of acute malnutrition (defined as <–2 Z scores weight for height and/or oedema) was estimated at 21.2% (95% C.I. 17.4–25.5%) and severe acute malnutrition (defined as <–3 z scores weight for height and/or oedema) was estimated at 3.3% (95% C.I. 1.8–5.6%). The under five mortality rate was estimated at 22.8/10,000/day but considerable care must be taken of the result and the author advises that considerable over reporting took place.

Goncha Siso Enese Woreda The survey was conducted by SCF-UK in June 2001. A standard two stage cluster survey was used to measure 905 children in 30 clusters. The prevalence of acute malnutrition (defined as <–2 Z scores weight for height and/or oedema) was estimated at 8.5% (95% C.I. 6.3 –11.4%) and severe acute malnutrition (defined as < –3 z scores weight for height and/or oedema) was estimated at 0.4% (95% C.I. 0.2–1.1%). CMR was estimated retrospectively over the previous three months at 0.59/10,000/ day and the under five mortality was 1.31/10,000/day. The measles vaccination coverage estimated from card was 4.2% and from carer report as 26.5%.

Kenya

Kakuma camp The survey was conducted by IRC/ UNHCR/ICH in April 2001. A two stage cluster survey methodology was used to measure 870 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 Z scores weight for height and/or oedema) was estimated at 17.2% (95% C.I. 14.3–20.2%) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was estimated at 1.4% (95% C.I. 0.5–2.2%). Measles vaccination coverage estimated from health card was 43.9% and 49.7% from mother / carer report.

Sudan

Twic county The survey was conducted by GOAL in February 2001. The survey employed a two stage cluster methodology to measure 960 children between the ages of 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 26% (95% C. I. 25.1–26%) including an estimated 2.4% (95% C.I. 2.4–2.4%) severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema). No oedema was discovered. CMR was estimated at 0.5/10,000/day and the under five mortality was 0.85/10,000/day with both being calculated retrospectively over 12 months. There was no data on mortality or vaccination coverage supplied.

North Darfur A meta analysis of 5 surveys conducted by SCF–UK between February and March 2001. The surveys all employed a two stage cluster methodology to measuring between 740 and 769 children between the ages of 6–59 months. The overall prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 23.4% (95% C.I. 21.8–25.0%) including severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) of 2.1% (95% C.I. 1.6 –2.6).. Measles vaccination coverage was 36.6% estimated by card. Mortality data was collected but the results considered to be too biased to report.

Old Fangak District, Upper Nile The survey was conducted by AAH–US in April 2001. The survey employed a two stage cluster methodology to measure 900 children between the ages of 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 20.4% (95% C.I. 16.8–24.6%) including severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) of 3.0% (95% C.I. 1.7 –5.2%). One child was discovered with oedema. Measles vaccination coverage was estimated as 4% with 1.2% verified by card and 2.8% from carer report.

Maraeng District, Upper Nile The survey was conducted by AAH–US in April 2001. The survey employed a two stage cluster methodology to measure 469 children between the ages of 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 21.3% (95% C.I. 16.3–27.4%) including severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) of 2.3% (95% C.I. 0.9–5.5%). No oe–dema was observed. Measles vaccination coverage was estimated as 0.9% from carer report alone.

Kuajok Payam The survey was conducted by MSF–B in May 2001. The survey employed a two stage cluster methodology to measure 452 children between the ages of 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/ or oedema) was estimated at 15.5% (95% C.I. 10.8 –20.2%) including severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) of 2.2% (95% C.I 0.3 –4.1%). Measles vaccination coverage was estimated as 17.7% with 3.1% from card and 14.6 from carer report.

Maluakon, Aweil East The survey was conducted by TEARFUND in June 2001. The survey employed a two stage cluster methodology to measure 895 children between the ages of 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 28.9% (95% C.I. 24.9–32–9%) including severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) of 5.5% (95% C.I 3.4–7.6%). Vaccination coverage and mortality were not reported.

West Africa Region

Sierra Leone

Kenema district rural The survey was conducted by Goal in February 2001. The survey employed a two stage cluster methodology to measure 917 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 5.2% (95% C.I 3.9 –6.9%) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 1% (95% C.I 0.5–1.9%). This included 0.6% bilateral oedema. Measles vaccination coverage was estimated from vaccination cards at 49.3%. Under five mortality was estimated as 0.97/10,000/day and was retrospective

over the past year.

Niawama IDP camp The survey was conducted by Goal in February 2001. A systematic random sampling methodology was used to measure 207 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 Z scores weight for height and/ or oedema) was estimated at 3.9% (95% C.I. 1.7–7.5%) and severe acute (defined as <-3 z scores weight for height and/or oedema) was estimated at 1.5% (95% C. I. 0.3–4.2%). The under five mortality rate was estimated at 0.91/10,000/day. Measles vaccination coverage estimated from health card was 54.4% and 27.2% from mother / carer report.

The Great Lakes region

Burundi

Bubanza The survey was conducted by Children's Aid Direct in March 2001. The survey employed a two stage cluster methodology to measure 909 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 8.6% (95% C. I. 7.5–9.7) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 2.2% (95% C.I 1.1–3.3). This included 0.7% bilateral oe–dema. Measles vaccination coverage was estimated from vaccination cards and an interview with the child's mother/carer and showed a rate of 81%. The CMR was estimated to be 0.8/10,000/day and the under five mortality was 5/10,000/day both being retrospective over the month preceding the survey.

Democratic Republic of the Congo

Masima and Kimbaseke The survey was conducted by SCF–UK in April 2001. The survey employed a two stage cluster methodology to measure 931 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 11% (95% C.I. 8.3–14.3) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 2% (95% C.I 1–3.9). This included 0.6% bilateral oedema. Measles vaccination coverage was estimated from vaccination cards and an interview with the child's mother/ carer and showed a rate of 60% with only 1% from vaccination cards. The CMR was not calculated. The under five mortality was calculated as 0.77/10,000/day retrospective over the past twelve months.

Kalima town, Maniema The survey was conducted by Merlin in May 2001. The survey employed a two stage cluster methodology to measure 912 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/ or oedema) was estimated at 4.6% (95% C.I 3.1–6%) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 0.9% (95% C.I 0.3–1.7%). This included 0.2% bilateral oedema. Measles vaccination coverage was estimated from vaccination cards at 22%. The CMR was estimated at 1.2/10,000/day and the under five mortality as 3.6/10,000/day both being retrospective over the past three months.

Uganda

Eastern Camps in Gulu The survey was conducted by ACF–US in March 2001. The survey employed a two stage cluster methodology to measure 900 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 6.7% (95% C. I 4.6–9.5%) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 1% (95% C.I 0.3–2.6%). Measles vaccination coverage was estimated from vaccination cards at 20.3% and from mother / carer report at 52.8%. The under five mortality rate was estimated as 1.78/10,000/day and was retrospective over the past three months.

Western Camps in Gulu The survey was conducted by ACF–US in March 2001. The survey employed a two stage cluster methodology to measure 900 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 7.7% (95% C. I 5.4–10.7%) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 1.8% (95% C.I 0.8–3.6%). Measles vaccination coverage was estimated from vaccination cards at 31.2% and from mother / carer report at 45.4%. The under five mortality rate was estimated as 2.27/10,000/day and was retrospective over the past three months.

Southern Africa

Angola

Ganda (displaced) The survey was conducted by ACH in May 2001 in camps in Ganda city. The survey employed an exhaustive sampling methodology to measure 1,116 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was 9.5% and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) 1.1%. This included 0.5% bilateral oedema. Measles vaccination coverage was estimated from vaccination cards and an interview with the child's mother/carer and showed a rate of 46.6%. The CMR was estimated to be 01.28/10,000/day and the under five mortality was 3.11/10,000/day both being retrospective over three months.

Ganda (residents) The survey was conducted by ACH in the open resident population of Ganda that contains both displaced and non displaced, in March 2001. The survey employed a two stage cluster methodology to measure 899 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 10.1% (95% C.I. 7.5 –13.4) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 1.1% (95% C.I. 0.6–2.1). This included 0.3% bilateral oedema. Measles vaccination coverage was estimated from vaccination cards and an interview with the child's mother/carer and showed a rate of 57.2%. The CMR was estimated to be 1.4/10,000/day and the under five mortality was 2.1/10,000/day both being retrospective over three months.

Cuito Carnavale The survey was conducted by ACH in June 2001. The survey employed a two stage cluster methodology to measure 873 children between 6–59 months. The prevalence of acute malnutrition (defined as <-2 z scores weight for height and/or oedema) was estimated at 6.0% (95% C.I. 4–8.8) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was 1.9% (95% C.I. 0.9–3.8). Measles vaccination coverage was estimated from vaccination cards and an interview with the child's mother/ carer and showed a rate of 60.7%. The CMR was estimated to be 1.6/10,000/day and the under five mortality was 4.1/10,000/day both being retrospective over a three month period.

Afghanistan area

Afghanistan

Kohistan District, Faryab The survey was conducted by SCF–US in April 2001. A standard two stage cluster survey was used to measure 708 children in 30 clusters between 6 and 59 months. The prevalence of acute malnutrition (defined as <-2 Z scores weight for height and/or oedema) was estimated at 7.0% (95% C.I. 5.0–9.0%) and severe acute malnutrition (defined as <-3 z scores weight for height and/or oedema) was estimated at 1.1% (95% C.I. 0.2–1.5%). CMR was estimated at 2.6/10,000/day and the under five mortality was 5.9/10,000/day. Immunisation coverage was not measured.

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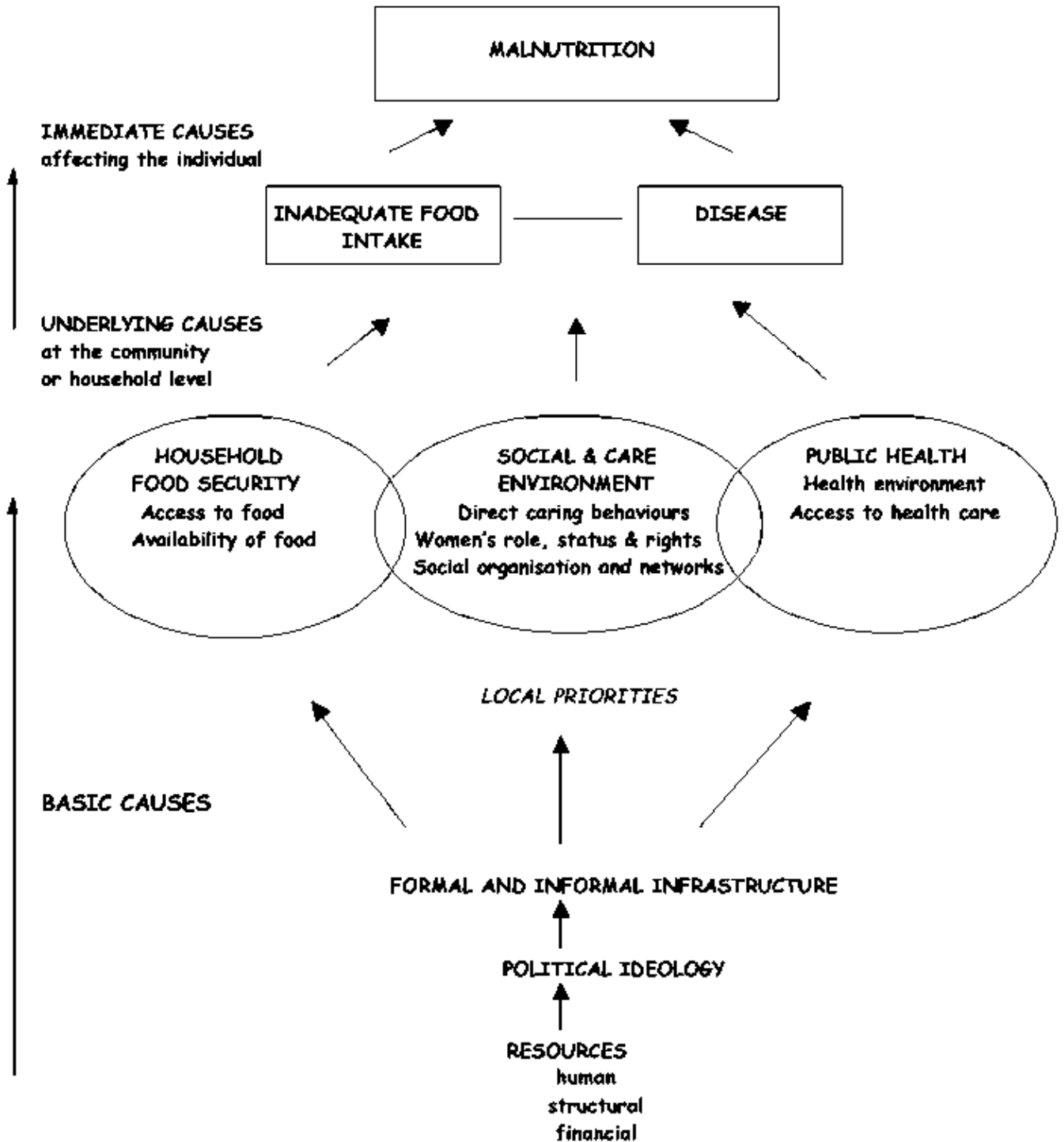
Map of Africa

Seasonality in Sub-Saharan Africa*

Angola	Coastal area desert, SW semi-arid, rest of country: rains Sept–April
Burundi	Three crop seasons: Sept–Jan, Feb–Jun., and Jul–Aug.
CAR	Rains March–Nov
Djibouti	Arid Climate
Ethiopia	Two rainy seasons February to May and June to October
Kenya	N–E is semi-arid to arid, Central and SW rains: March–May and Nov–Dec.
Liberia	Rains March–Nov
Mozambique	Coast is semi-arid, rest wet–dry. Harvest May
Rwanda	Rains Feb–May with Aug. harvest and Sept–Nov with Jan harvest
Sierra Leone	Rains March–Oct.
Somalia	Two seasons: April to August (harvest) and October to January/February (harvest)
Sudan	Rains April–Oct.

North	Rains begin May/June
South	Rains begin March/April
Togo	Two rainy seasons in S, one in N. Harvest August
Uganda	Rains Mar–Oct.
Zaire	Tropical climate. Harvest in N: November; in S January

* SOURCES: FAO, "Food Supply Situation and Crop Prospects in Sub-Saharan Africa", Special Report; No 4/5.



The SPHERE Project Conceptual Model of the causes of malnutrition in emergencies (draft, adapted from UNICEF)

Note: the Sphere project is an initiative to improve the quality of humanitarian assistance and to enhance accountability of the humanitarian system, through the production of globally applicable minimum standards. The humanitarian Charter is at the core of the Sphere project – it re-affirms what is already known from international humanitarian law and human rights treaties. The charter makes explicit links to the defined levels of service delivery set out in the five core sectors: water supply and sanitation; nutrition; food aid; shelter and site planning; and health services. Together, the Charter and Minimum Standards offer an operational framework for accountability in humanitarian response – a common set of criteria for programme monitoring; a benchmark from which to make some judgement about the effectiveness of work; and, probably most importantly, a benchmark for use in advocacy to enhance levels of services. To obtain more information on the Sphere project at <http://www.sphereproject.org> or email: sphere@ifrc.org

The UN ACC/SCN¹, which is the focal point for harmonizing policies in nutrition in the UN system, issues these reports on the nutrition of refugees and displaced people with the intention of raising awareness and facilitating action to improve the situation. This system was started on the recommendation of the SCN's working group on Nutrition of Refugees and Displaced People, by the SCN in February 1993. After a break of some months this is a combined thirty-second and thirty third publication of a regular series of reports. Based on suggestions made by the working group and the results of a survey of RNIS readers, the Reports on the Nutrition Situation of Refugees and Displaced People will be published every three months, with updates on rapidly changing situations on an 'as needed' basis between full reports.

Information is obtained from a wide range of collaborating agencies, both UN and NGO (see list of sources). The overall picture gives context and information which separate reports cannot provide by themselves. The information available is mainly about nutrition, health, and survival in refugee and displaced populations. It is organised by "situation" because problems often cross national boundaries. We aim to cover internally displaced populations as well as refugees. The system is aimed at the most nutritionally vulnerable people in the world – those forced to migrate – and the problems of those displaced may be similar whether or not they cross national boundaries. Definitions used are given in the box on the next page. The sections entitled "Priorities and recommendations" are intended to highlight the most pressing humanitarian needs. The recommendations are often put forward by agencies or individuals directly involved in assessments or humanitarian response programmes in the specific areas.

The tables and figures at the end of the report provide a quick overview. Table 1 gives an estimate of the total refugee/displaced/returnee population, broken down by 'risk' category. Situations are classed into five categories relating to risk and/or prevalence of malnutrition. The prevalence/risk is indirectly affected by both the underlying causes of malnutrition, relating to food, health and care, and the constraints limiting humanitarian response. These categories are summations of the causes of malnutrition and the humanitarian response:

- Populations in *category I* – the population is currently in a critical situation; they either have a *very high risk* of malnutrition or surveys have reported a very high prevalence of malnutrition and/or elevated mortality rates.
- Populations in *category II* are currently at *high risk* of becoming malnourished or have a high prevalence of malnutrition.
- Populations in *category III* are at *moderate risk* of malnutrition or have a moderately high prevalence of malnutrition; there maybe pockets of high malnutrition in a given area.
- Populations in *category IV* are not at elevated nutritional risk.
- The risk of malnutrition among populations in *category V* is not known.

These risk categories should not be used in isolation to prescribe the necessary response.

In table 2, refugee and displaced populations are classified by country of origin and country of asylum. Internally displaced populations are identified along the diagonal line, which may also include some returnees. Figure I shows the trends over time in total numbers and risk categories for sub-Saharan Africa. Annex I summarises the survey results used in this report.

INDICATORS

WASTING is defined as less than -2 SDs, or sometimes 80%, wt/ht by NCHS standards, usually in children of 6–59 months. For guidance in interpretation, prevalences of around 5–10% are usual in African populations in non-drought periods. A 20% prevalence of wasting is undoubtedly high, although this may depend on the context.

SEVERE WASTING can be defined as below -3 SDs (or about 70%). Any significant prevalence of severe wasting is unusual and indicates heightened risk. (When “wasting” and “severe wasting” are reported in the text, wasting includes severe – e.g. total percent less than -2 SDs, *not* percent between -2 SDs and -3 SDs.)

STUNTING is defined as less than -2 SDs height-for-age by NCHS standards, usually in children aged 6–59 months.

SEVERE STUNTING is defined as less than -3 SDs height-for-age by NCHS standards, usually in children aged 6–59 months. (When “stunting” and “severe stunting” are reported in the text, stunting includes severe – e.g. total percent less than -2 SDs, *not* percent between -2 SDs and -3 SDs.)

BMI (wt/ht²) is a measure of chronic undernutrition in adults. We have taken BMI <18.5 as an indication of mild chronic undernutrition, and BMI <16 as an indication of severe chronic undernutrition in adults aged less than 60 years (WHO, 1995). The BMI of different populations should not be compared without standardising for body shape. (See July 2000 RNIS supplement on measuring adult nutritional status).

MUAC (cm) is a measure of energy deficiency in both adults and children. In children, equivalent cut-offs to -2 SDs and -3 SDs of wt/ht for arm circumference are about 12.0 to 12.5 cms, and 11.0 to 11.5 cms. In adults, MUAC <22 cm in women and <23 cm in men may be indicative of a poor nutritional status. BMI and MUAC are sometimes used in conjunction to classify adult nutritional status (James et al, 1994). Acute adult undernutrition may be diagnosed using MUAC. A MUAC <18.5 may be indicative of acute undernutrition and MUAC <16 of severe acute malnutrition. (See July 2000 RNIS supplement on measuring adult nutritional status).

OEDEMA is the key clinical sign of kwashiorkor, a severe form of protein-energy malnutrition, carrying a very high mortality risk in young children. It should be diagnosed as *pitting* oedema, usually on the upper surface of the foot. Where oedema is noted in the text, it means kwashiorkor. Any prevalence detected is cause for concern.

ACUTE MALNUTRITION is the prevalence of wasting and/or oedema.

CHRONIC MALNUTRITION is the prevalence of stunting.

A CRUDE MORTALITY RATE in a normal population in a developed or developing country is around 10/1,000/year which is equivalent to 0.27/10,000/day (or 8/10,000/month). Mortality rates are given here as “times normal”, i.e. as multiple of 0.27/10,000/day. [CDC has proposed that above 1/10,000/day is a very serious situation and above 2/10,000/day is an emergency out of control.] Under-five mortality rates (U5MR) are increasingly reported. The average U5MR for Sub-Saharan Africa is 175/1,000 live births, equivalent to 1.4/10,000 children/day and for South Asia the U5MR is 0.7/10,000/day (in 1995, see UNICEF, 1997, p.98).

FOOD DISTRIBUTED is usually estimated as dietary energy made available, as an average figure in kcals/person/ day. This divides the total food energy distributed by population irrespective of age/gender (kcals being derived from known composition of foods); note that this population estimate is often very uncertain. The adequacy of this average figure can be roughly assessed by comparison with the calculated average requirement for the population (although this ignores maldistribution), itself determined by four parameters: demographic composition, activity level to be supported, body weights of the population, and environmental temperature; an allowance for regaining body weight lost by prior malnutrition is sometimes included (see Schofield and Mason 1994 for more on this subject). For a healthy population with a demographic composition typical of Africa, under normal nutritional conditions, and environmental temperature of 20°C, the average requirement is estimated as 1,950–2,210 kcals/ person/day for light activity (1.55 BMR). Raised mortality is observed to be associated with kcal availability of less than 1,500 kcals/person/day (ACC/SCN, 1994, p81).

INDICATORS AND CUT-OFFS INDICATING SERIOUS PROBLEMS are levels of wasting above 20%, crude mortality rates in excess of 1/10,000/day (about four times normal – especially if still rising), and/or significant levels of micronutrient deficiency disease. Food rations significantly less than the average requirements as described above for a population wholly dependent on food aid would also indicate an emergency.

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