

**EARLY WARNING RESPONSE AND FOOD SECURITY/
EMERGENCY NUTRITION COORDINATION UNIT
QUARTERLY BULLETIN**

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1. Hazard: Approximately, more than 20,000 hectares of land covered by forest (natural state forest) in Atsbi Wonberta Woreda, specifically in Desa has been seriously affected or damaged by pest. So far, around 16 neighboring Tabias have been affected by this hazard. The pest affects the leaf part of the Olea Africana (Olive tree) causing the leaves to dry and shade off. The case and extent of damage has been communicated to FDRMFSS and other relevant key actors. There has been no immediate response or action taken so far. The exact cause and impact of this hazard is still under investigation and close monitoring.

2. Biannual Nutrition Survey: The government, in collaboration with key actors, recognized the importance of conducting nutrition surveys on regular basis with the ultimate aim of monitoring unusual changes and early detection of malnutrition, health and food insecurity situation of a given community and initiate timely response in order to prevent malnutrition before the situation turns into a crisis. With the financial support from potential donors, two seasons were selected for this purpose, namely the harvest (October – November) and the hunger season (March – April) season; hence the survey was termed as bi annual nutrition survey. Conducting nutrition surveys bi annually has become indispensable to carry out periodic monitoring of nutrition situation in the region to establish nutrition information system or data base at national level to serve as and triangulate with other early warning indicators as well as complement the routine nutrition information collected with other sources (ie TFP, CBN and CHD) and trigger timely response accordingly.

In Tigray, based on the recurrent chronic food insecurity situation, bi annual nutrition survey was conducted in three survey Woredas namely Raya Azebo, Saesi Tsaeda Emba and Tanqua Abergele between 26 October and 27 November 2012. These three survey Woredas had been classified as hotspot priority number one for consecutive years.

The main objective of this survey is to assess the nutrition, health, food security situation and

contextual factors in the three survey Woredas and determine determinants of the existing nutrition and food security status of the rural population. This objective has the following specific objectives:

- To estimate the current prevalence of acute malnutrition in children aged 6-59 months (65-110cm length/height when age is unknown)
- To estimate the retrospective Crude (CDR) and Under five death rates (U5DR)
- To estimate morbidity among under five children
- To assess IYCF practices
- To assess the food security situation of the surveyed population at the time of the survey
- To estimate Measles, BCG vaccination and Vitamin A supplementation for children 9-59 months and 6-59 months respectively
- To assess the association between contextual factors collected during the survey and nutrition situation in the survey Woreda.
- To make recommendations based on survey findings
- To serve as nutrition information systems, determine trend analysis, for monitoring and early warning (surveillance tool) when conducted bi annually for long period of time and initiate timely responses

The survey was a cross sectional in nature where data and information is collected at particular point and time. A two-stage random cluster sampling method using ENA SMART methodology was employed. The sample sizes were calculated using ENA for SMART software (November 2011 version). As depicted in Table below, the Global Acute Malnutrition (GAM) level for Raya, Saesi and Tanqua Woredas were 6.9, 7.5 and 12.2 percent respectively (for more information please see Annex V).

Nutrition Survey Report based on Z-Score

Indicators		Raya Azebo	S.T.Emba	T.Abergele
Wasting	GAM	6.9	7.5	12.2
	SAM	0.3	0.8	1.8
Stunting	GAM	23.9	52.6	47.0
	SAM	6.0	17.6	15.3
Underweight	GAM	25.0	44.0	47.8
	SAM	3.8	9.2	12.3
Stage of Alert		“Poor”	“typical”	“Poor”

3. Meher Assessment: Meher assessment was carried out by a multi-agency team in 18 *woredas* of Tigray regional state between 27 November and 14 December 2012. The selection of the *woredas* was based on severity of crop production prospects, incidence of disease and unusual shortage of potable water. The assessment result revealed that, in most *woredas*, the onset of Azmera rain was late by one to four weeks and the distribution of rainfall was also generally poor and below normal. In few *woredas* of North Western zone, there was no Azmera Rainfall. Compared to last year, all *woredas* of North Western, Central zone (except Ahferom), low lands of Saharti Samare and Enderta Weredas receive low Azmera rain. Total failure of Azmera rains is reported in most *woredas* of the region. As a result farmers had to shift planting of long cycle and high yielding to short cycle and low yielding crops mainly due to lack of moisture. The onset of Tsedia rainfall was also late by one to three weeks in some Weredas but normal in most *woredas* of the region. There was dry spell, hailstorm and flood hazards and pests in pocket areas of the Weredas. Generally the rainfall is evaluated as poor in Azmera and good in Tsedia except eastern escarpment of the region.

Compared to reference year and last year, area planted at 31 food insecure *woredas* of the region increased by 5.52% and reduced by 0.68% respectively. Summarized data of the 31 *Woredas* revealed that production achievement of this year as compared to its plan was estimated at 73.8%. Estimated production of these *Woredas* indicated that crop production showed an increase of 168.97% and 9.32% compared to reference and last year respectively although the production prospect had a slight variation within five zones and from *Woreda* to *Woreda*. At zonal level, while central zone show similar yield production as last year (0.08% decrease). However, Sothern, South eastern, Eastern and North western show yield increment accounting 13.44%, 6.72%, 13.81% and 14.66% respectively. At *Wereda* level, this year production showed increament in most *woredas* of the region however, there had been a reduction of yield in some *Woredas*. Yield reduction estimate ranged from 2.84% to 80.15% for 7 *weredas* namely Rayazebo (80.15%), Saharti Samre (7.73%), Saesi Tsaeda Emba (13.66%), K/amlaelo (6.22%), Merebleke (2.84%), T/abergele (7.11%) and Werie Leke (5,87%) due to moisture stress and hazards compared to last year. Availability of water and pasture is normal, except three Tabias of Tahetay Maichew, six Tabias of Hintalo Wajirat, ten Tabias of Raya Azobo, Erob, and seven Tabias of Saesit Tsaeda Emba.

The supply of cereal and livestock to the market was stable, but the market price for major staple food items such as maize, sorghum and teff had increased by 21-28%, 19%-75% and 14%-28% respectively when compared to last year. Similarly, price of ox, goat and sheep cattle has increased on average by 19%-36%, 8-31%, and 18-30% respectively. The three month market trend indicated that price of livestock showed a slightly decreased in all Weredas. During harvest time,

market price of cereals and pulses (except lentil and white teff) showed a decline trend. On the other hand, decline in supply of cereals and slightly higher price increment was observed in Raya Azebo, Erob and Chila markets. Price of chicken and egg showed an increase trend as compared with last and reference year. Income from other sources such as agriculture and migratory labor wage increased by 22-24% compared to last year.

The malnutrition status during the assessment was considered to be normal. There was no human disease outbreak. The liver disease in North Western Tigray is still a problem and increased by 15% compared to last year.

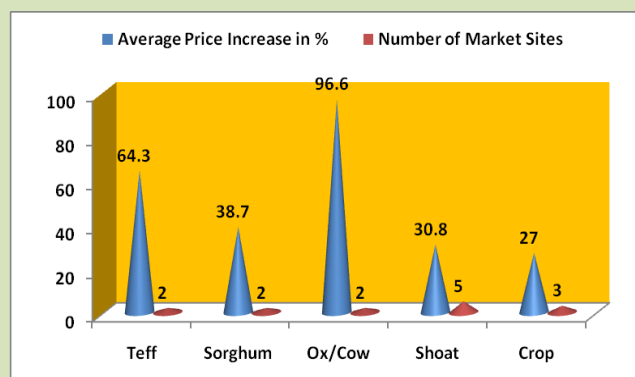
Generally, the food security prospect for the year seems to be stable except few woredas and pocket areas which are highly affected by hailstorm, shortage of moisture and un seasonal rain fall. In brief, out of the projected 4,374,582 people in 34 rural woredas of the region and 3,984,278 peoples found in 31 food insecure woredas 283,399 are needy people who require food assistance beyond 1,244,542 chronically food insecure under PSNP.

4. Market Assessment: Market price for one year (January to December 2012) from four big and well known market sites (Raya, Hawzen, Kola Tembien and Tahetay Koraro), representing South, North, Central, East and West Zones of Tigray regional state, were collected and analysed. Key parameters (crops and livestock) of each livelihood zone were selected for market price and trend analysis. The market price and trend analysis have shown that both crops and livestock price have increased ranging from 1.4 to 174.2 percent. The price increment for Teff, Sorghum, Ox and Shoats in Raya have increased by 49.1, 38.3, 19.0 and 14.8 percent respectively. The Price increment for Barley, Wheat and Sheep in Hawzen Market were 28.8, 1.4 and 33.4 respectively. The Price increment for Teff, Sorghum, Goat and Cow in Kola Tembien market are 79.5, 24.3, 61.5 and 174.2

respectively. The price increment for Teff, Maize, Sheep and Goat in Tahtay Koraro market are 58.9, 12.0, 22.3 and 22.1 respectively. The mean price increment of crop and livestock were 36.2 and 52.3 percent respectively. The average price increment of Ox/Cow and Teff scored the highest, which is 96.6 and 64.3 percent respectively, while price of crop (13.5%) and shoat (30.5%) scored lower. (Please refer to Annex V for the price increment of each commodity being assessed in four markets sites)

The price increment trend analysis for each market sites were also assessed. The result has shown that the highest price increment in Raya was Teff (49.1%), in Hawzen was Sheep (33.4%), in Tahitay Koraro was Teff (58.9%) and in Kola Tembien was Cow (174.2%).

Average price increment of crop and livestock



As shown in the Chart above, the average price increment of livestock from two markets showed 96.6%, while average price increment of Teff from two markets sites showed 64.3%. The average price increment of shoats from five market sites showed 30.8 percent while that of crop was 27%.

5. Interventions: A number of emergency and developmental projects/ programs have been implemented by the government and key stakeholders to support beneficiaries in need of food assistance. The major interventions or

programmes being implemented during the first quarter include among others;

- ❖ Productive Safety Net Program (PSNP)
- ❖ General Food Distribution (GFD)
- ❖ Therapeutics Feeding Program (TFP): either (Outpatient Therapeutic Feeding Program (OTP) or Therapeutic Feeding Unit (TFU) or Stabilization Centre (SC)
- ❖ Targeted Supplementary Feeding (TSF)
- ❖ Community Health Days (CHD) and other programmes such as CBN, Social Protection, IGA etc

5.1 Hotspot Classification: Based on the hotspot classification criteria, Out of the 34 Rural Woredas of Tigray regional states, the total number of Woredas classified and determined as hotspot priority number one, two and three are 9, 17 and 5 respectively. Three Woredas were food secured Woredas, hence classified as normal one.

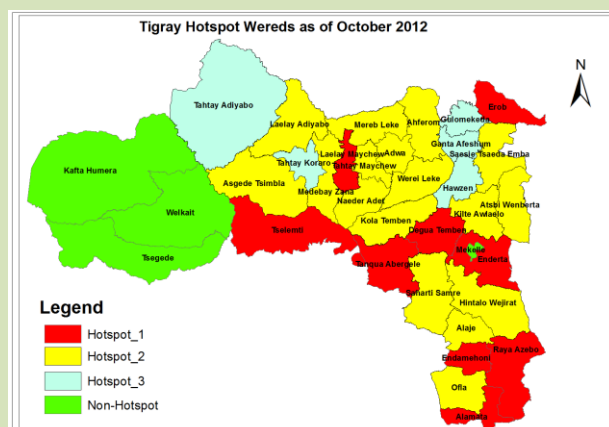


Table 2: Program or Intervention Coverage

Intervention	Hotspot P. # 1	Hotspot P. # 2	Hotspot P. # 3	Non Hotspots	Total	Coverage %
Woreda	9	17	5	3	34	100
TFU/SC	5	11	1	1	18	53
OTP	9	17	5	3	34	100
TSF	8	7	2	0	17	50
CBN	9	17	5	3	34	100
CHD	9	17	5	3	34	100
GFD	9	17	5	0	31	91.2

The coverage of the OTP, CBN and CHD programme or interventions in the region scored 100 percent. GFD coverage in the region reached 91.2 percent. All (9) Woredas classified as hotspot priority number one are receiving complete service of OTP, CBN and GFD interventions. Therapeutics Feeding Unit (TFU) and Targeted Supplementary Program (TSF) programmes in the region scored 53 and 50 percent respectively.

5.2 Productive Safety Net Program (PSNP): The total number of target beneficiaries supported through PSNP program participating in public work and direct support reached 1,044,799 and 193,878 respectively. A total of 1,099, 038 Ethiopian birr for public work (738,463) and direct support (360,575) was allocated and disbursed to the PSNP beneficiaries this quarter

5.3. Relief /Emergency Beneficiaries: A total of 152,381 beneficiaries received 2822.3 Metric Tons of food items (2285.5, 228.4, 234 and 68.6 MT of grain, pulse, CSB and oil respectively) were distributed on monthly basis to relief beneficiaries.

Table 3: Relief Beneficiaries & Amount of food distributed

Organization	Relief Assistance Beneficiaries		
	Cash	Grain	Total
WFP/ Government	-	82075	82075
REST	-	56548	56548
Mulu Wengel Church	-	13738	13738
Grand Total	-	152381	152381

5.4 December 2005 CHD Screening Result: A total of 579,187 children aged 6 -59 months were screened between 21 and 25 December 2005 E.C from 786 Kebeles (Tabias) of 34 rural Woredas and 12 towns of Tigray regional state. The screen coverage was 89.5 percent with moderate and severe wasting rate of 5.2 and 0.6 percent respectively. A total of 100 (0.02%) cases of bilateral edema were detected. During this exercise, the highest top three malnutrition rate (including both moderate and severe cases) was recorded in Alage (13.0%), Enderta (13.0%) and Aby Adi Town (11.2%). The top three oedematic cases were recorded in Kola Tembien, Mereb Leke and Asgede Tsimbla with 11, 10 and 7 cases respectively (See Annex I and II).

The CHD screening exercises for pregnant and lactating mothers were also carried out to determine their nutritional status. A total of 106, 485 Pregnant and Lactating Mothers (PLM) were screened using MUAC. The screening coverage was 62.7% that showed a slight increment but still needs special attention or room for to improvement.

The prevalence of malnutrition (both moderate and severe cases) for PLM was 18.9%. As far as the PLM malnutrition level is concerned, Erob, D/Tembien, Enderta and T/Abergele scored relatively high value than the rest Woredas with a value of 51.2, 50.2, 46.0 and 38.3 percent respectively. Screening coverage for Erob was very

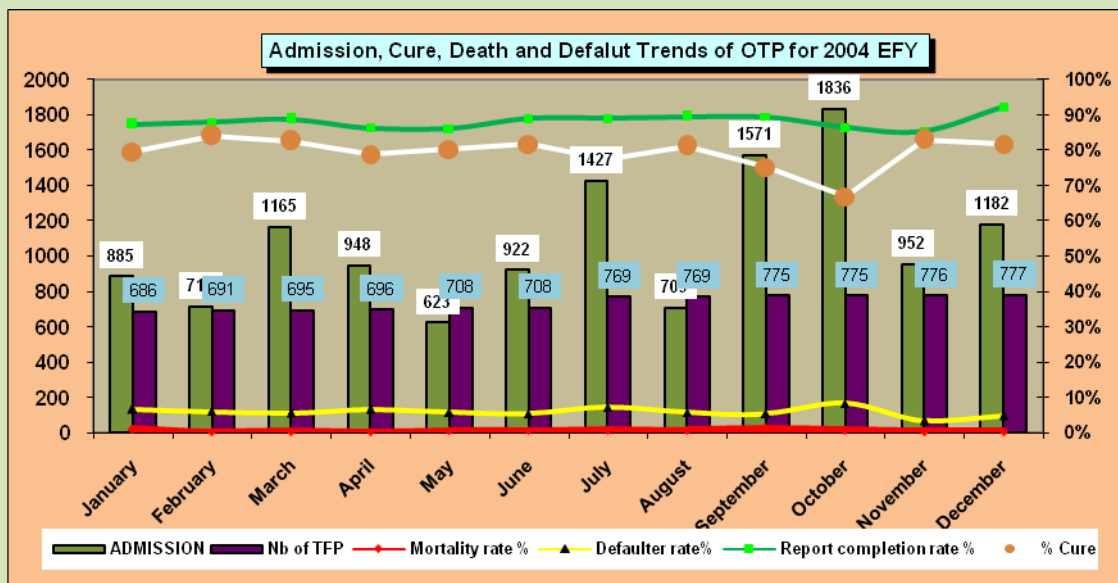
low which 28.9 percent only. As compared with June screening results, screening coverage of PLM for September has increased by 3.40 percent only. Since December 2011, four screening were conducted to determine malnutrition level of PLM, December 2012 screening result has the top coverage results. (Please refer to Table 4)

Table 4: Annual Regional CHD Screening Summary Result for PLM

Month	Total Screened	Coverage In %	MUAC <21 Cases	MUAC <21 in %
March 2012	99133	55.93	20541	20.54
June 2012	98936	53.50	19119	19.33
September 2012	100765	59.30	18796	18.70
December 2012	106485	62.70	20163	18.90
Total /Average	405319	57.86	78619	19.39

5.5 Outpatient Therapeutic Program (OTP):

October – December 2012: The monthly TFP monitoring reports collected from the six zones of Tigray regional state (Southern, South eastern, Eastern, Central, North western and Western) has indicated that a total of 3,970 children from 776 TFP sites were admitted to the program. The reporting rate for this quarter has reached 88.1 percent. On average, the cure, death and defaulter rate of this quarter was 78.0, 0.4 and 5.3 percent respectively. There were 97 (2.0%) Non respondent and 162(4.0%) medical transfer cases reported. The total number of children discharged reached 3621 (91%).



TFP admission in October compared with September increased by 17 percent following CHD screening but decreased by 48 percent in November, then increased by 24 percent in December following the CHD screening. Cure rate started at 66.8% in October and showed an increasing trend in November (83.0%) then decreased to 81.7 percent in December. The reporting rate for the month of October, November and December reached 86.5, 85.4 and 92.3 percent respectively. TFP Admission is expected to stabilize or decrease in the upcoming or third quarter following Meher harvest.

January – December 2012 Trends: The number of TFP sites in January was 686 while in December it had reached 777 with an increase rate of 13.3 percent. The reporting rate in January started at 87.3 percent and reached in December at 92.3 percent with an increase rate of 5.7%. Since January cure rate has showed unusual or up and down trend over the past 12 months, it started with 79.5 percent in January ending with 81.7 percent in December with some irregularities in between. Defaulter rate for January, February, April, July and October were above 6 percent, especially for October it reached its peak (8.4%) but for the month of March, May, June, August, September, November and December were below 6 percent, November had the lowest (3.4%) number of defaulters.

5.6 Targeted Supplementary Feeding (TSF)

Program: Based on the April 2012 hotspot classification, the total number of Woredas entitled to receive Targeted Supplementary Feeding (TSF) program for second quarter were 17, out of which 16 are categorized as hotspot priority number one and the remaining one Woreda is implementing Millennium Development Goal (MDG) project. The total numbers of children aged 6 to 59 months and pregnant & lactating mothers supported by TSF program during second quarter were 18,931 (75% male and 25 % females) and 10,249 PLM bringing to a total of 29,180 target beneficiaries. A total of 552.3 MT of food (480.1 of Corn Soybean Blend (CSB) and 72.2 MT of vegetable oil were distributed and reached the above stipulated target beneficiaries during this quarter.

The new generation TSF is building the capacity of implementing partner organization to effectively and efficiently implement its program. All the necessary training, institutional strengthening and coordination activities have been finished in eight Woredas (Tahitay Maichew, WerieLeke, Ahferom, Ganta Afeshum, Degua Tembien, Enderta, Atsbi Wenbert and Irob) to scale up the new generation TSF program. In other words, these eight Woredas will shift from the old TSF and join the three

Woreda (Raya Azebo, Gulomekeda & Hintalo Wajirat) who are already implementing the new generation TSF program. The scale up program of the eight Woredas is expected to start from January 2013.

During this quarter, an Integrated Refresher Training (IRT) were given to 17 (16 male and one female) appropriate staff of implementing partners and these trained staff in turn cascaded the same training to 933 (with an average rate of 104 trainees from each Woreda) experts namely health, agriculture and administration officials, TSF focal persons, health extension workers, supervisors, health center heads/medical directors, food distribution agents, area coordinators and chair persons working in Woreda, Zone, Tabia and Kushet of the nine identified Woredas. The IRT covered topics, among others, an overview of TSF program, nutrition, implementation modalities, duties and responsibilities of implementing partners at different levels, expected outcome and impact, lessons learnt and challenges from past experience.

Like the previous quarter, the major challenges that had encountered throughout the implementation of TSF program during this quarter was logistic issue and delay of sharing CHD results from Regional Health Bureau. The extended delay of dispatch and distribution of TSF food to target beneficiaries due to transportation problem was one of the stumbling blocks of this program. Getting potential candidate capable of transporting TSF foods from main warehouse to distribution sites (Tabias or Kebeles) was a serious and continuous problem in the region that needs a special and immediate attention of concerned authorities in the region. The TSF food was not distributed to target beneficiaries within 21 days after the completion of screening as clearly stipulated in the protocol. Delay in sharing CHD screening results from RHB has also its contribution in enrolling target beneficiaries to start the program within short period of time.

6. Capacity Building

6.1 Meeting / Workshop Training: Between the month of September and December 2012, two Multi Agency Nutrition Task Force (MANTF) and three Agricultural Task Force (ATF) monthly meetings were

conducted. One Disaster Management Technical Working Group (DRMTWG) was also carried out. The monthly meetings for MANTF and ATF/DRM and DRMTWG were hosted and facilitated by Regional Health Bureau and Bureau of Agriculture and Rural Development respectively, EWRFS.

Training: With the financial and technical support from UNICEF, Disaster Risk Reduction/Management training was conducted for three days during this quarter. A total of 31 experts from regional sector bureaus and expertise from nongovernmental organizations and the UN did participate in the event.

A total of 66 expertise from regional early warning (3) and the three survey woredas (63) namely, Raya Azebo, Tanqua Abergele and Saesi Tsaeda Emba did receive four day training on standard and emergency nutrition survey based on SMART methodology. Out of the 66, 21 were from region and woreda agriculture while 45 were from woreda health sector. The training had three and a half day theory, a half day standardization test and one full day field practice or pretest.

7. Challenges

A. Data Analysis: The recruitment process of the data analyst is still an area of concern than needs to be addressed as soon as possible. DRMFSS should speed up the recruitment process so that EW data entry and analysis can be done properly and on regular basis.

8. Upcoming Events: Some of the major activities planned for third quarter (January – March 2012) include among others;

A. Training: Training of Trainers (ToT) on Emergency Nutrition Assessment based SMART methodology will be conducted. Health and Early warning experts from 34 Woredas of Tigray will benefit from this five days training.

Training on hotspot classification is scheduled for next quarter. Early warning experts from 34 Woredas are expected to attend for this training.

B. Meeting: A monthly Multi Agency Nutrition Task Force (MANTF) and Agricultural Task Force (ATF) or

Disaster Risk Management (DRM) Task Force meetings will be carried out.

level is expected to be carried out during this quarter.

C. **Quarterly Review Meeting:** One quarterly review meeting for Woreda EW experts at regional

Annexes

Annex I: CHD Screening Summary Result for Children U5 for 4 Quarters									
Month	Number of Kebeles	Total Screened	Coverage %	Normal ≥ 12.00	Moderate 11 – 11.99	Severe < 11	Oedema Cases	Oedema %	Vit A Cov.
March 2012	788	542,457	81.17	91.11	6.71	0.54	112	0.021	
June 2012	788	547,148	81.90	93.22	6.27	0.49	105	0.019	79.69
September 2012	786	532,593	82.30	91.57	6.70	0.71	103	0.02	
December 2012	786	579,187	89.50	93.57	5.20	0.60	100	0.02	89.40

Annex II: Ranking of CHD Result in Woredas								
Month	Wasting					Oedema		
	Rank	Woreda	Moderate 11 -11.99	Severe <11.0	GAM <12	Rank	Woreda	Oedema
March 2012	1	Alage	15.4	1	16.4	1	Kola Tembien	16
	2	D/Tembien	15	1.2	16.2	2	Naeder Adiet	12
	3	Korem town	14.7	1	15.7	3	Alage	12
June 2011	1	Axum town	13.9	0.9	14.8	1	Alage	13
	2	Enderta	13.7	0.9	14.6	2	K/Tembien	13
	3	Korem town	12.6	0.8	13.1	3	Naeder Adiet	9
September 2012	1	G. Afeshum	18.1	1.0	19.1	1	Naeder Adiet	20
	2	Korem Town	14.6	2.2	16.8	2	L/Maichew	9
	3	Enderta	15.1	1.7	16.8	3	D/Tembien	8
December 2012	1	Alage	12.1	0.9	13.0	1	Kola Tembien	11
	2	Enderta	11.6	1.4	13.0	2	Mereb Leke	10
	3	Abi Adi Town	10.7	0.5	11.2	3	Asgede Tsembla	7

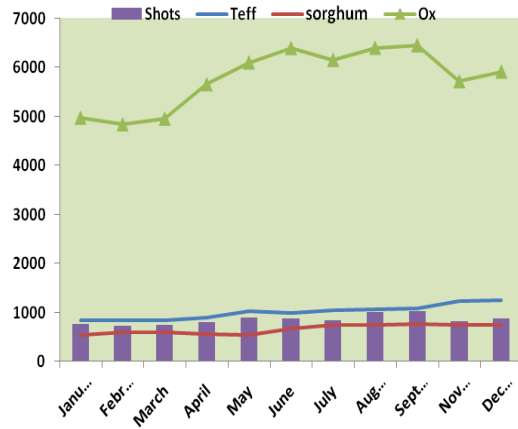
Table III: CHD Summary Result & Ranking for PLM			
Month	MUAC <21	Percentage	Rank
March 2012	Erob	50.4	1
	A/Adi town	50	2
	Korem town	41.6	3
June 2012	Maichew town	57.3	1
	Alage	48.6	2
	Erob	41	3
September 2012	Erob	49.6	1
	Adigrat Town	38.9	2
	Adwa Town	37.4	3
December 2012	Erob	51.2	1
	D/Tembien	50.5	2
	Enderta	46.0	3
	T/Abergele	38.3	4

Annex IV: OTP Admission, Cure, Death and Defaulter Trends (October 2011 to September 2012)

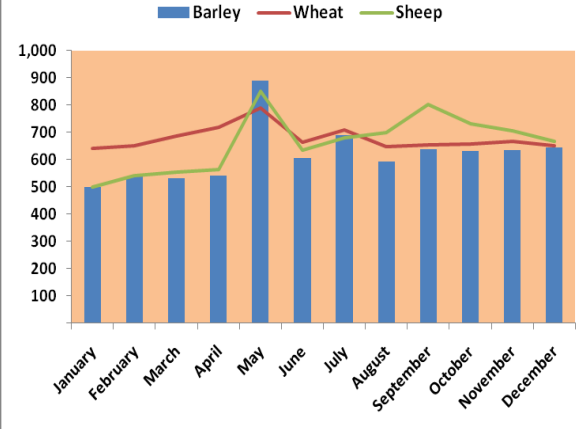
Months	Cases							Percentage						
	Quarter	Admission	Cure	Death	Defaulter	Non responder	Medical Transfer	Discharge	Cure	Death	Defaulter	Non responder	Medical transfer	Report rate
2012														
January	3 rd	885	710	10	59	25	20	893	79.5	1.1	6.6	2.8	2.2	87.3
February		713	925	2	66	26	29	1099	84.2	0.2	6.0	2.4	2.6	88.0
March		1165	796	3	53	28	25	963	82.7	0.3	5.5	2.9	2.6	88.8
April	4 th	948	598	1	50	25	25	759	78.8	0.1	6.6	3.3	3.3	86.4
May		623	832	6	60	41	35	1037	80.2	0.6	5.8	4.0	3.4	86.2
June		922	706	5	47	24	25	864	81.7	0.6	5.4	2.8	2.9	89.0
July	1 st	1427	758	7	70	34	27	978	77.5	0.7	7.2	3.5	2.8	89.1
August		709	1059	8	75	58	37	1305	81.1	0.6	5.7	4.4	2.8	89.5
September		1571	706	11	50	27	36	938	75.3	1.2	5.3	2.9	3.8	89.4
October	2 nd	1836	687	7	86	20	73	1028	79.5	1.1	6.6	2.8	2.2	87.3
November		952	1099	4	45	49	41	1324	84.2	0.2	6.0	2.4	2.6	88.0
December		1182	1037	4	61	28	48	1269	82.7	0.3	5.5	2.9	2.6	88.8
Total		12,933	9,913	68	722	385	421	12,457	79.6	0.5	5.8	3.1	3.4	88.2

Annex V: Regional Representative Market Samples and Trends for 9 months

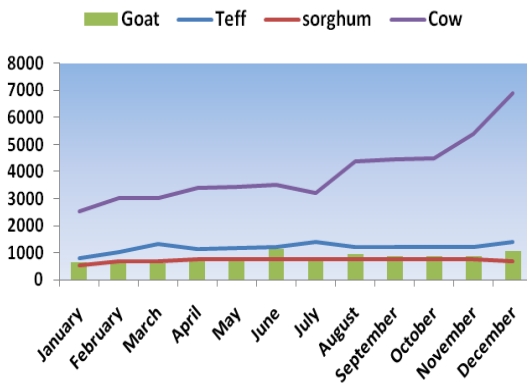
A. Raya Market



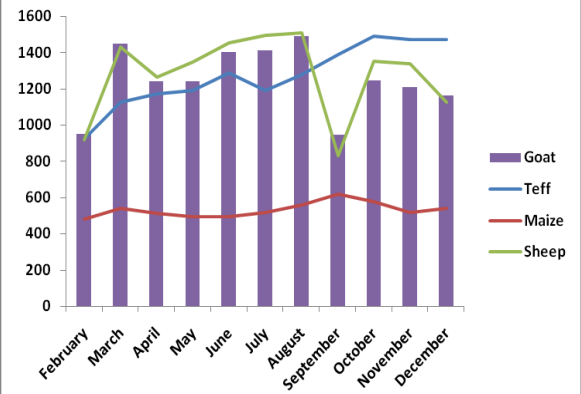
B.Hawzen Market



B. Kola Tembien Market



C.T/Koraro Market



Anne VI: Bi annual Nutrition Survey Summary Result

Core Indicators	Name of Survey Woredas		
	Raya Azebo	Saesi Tsaeda Emba	Tanqua Abergele
A. Demographic Characteristics			
Estimated Woreda Population	150,162	160,834	102,482
Number of Households	34,854	37,474	23,201
Under Five population	22,824	24,451	15,577
Average HH size	5.8	7.8	5.5
Average size of U5 children	0.78	0.78	0.77
Number of Tabias (Kebeles)	20	27	20
Number of Kushets (Villages)	79	112	72
Farming system	Mixed Farming, 90% Kiremt and 10% Belg dependent	Mixed Farming, 100% Kiremt dependent	Mixed Farming 100% Kiremt dependent
Livelihood Zone	Raya Valley Teff & Sorghum L.Z	Located in Eastern Platue & Atsbi Wonberta Highland L .Zone	Middle Tekeze L.Z. 95% lowland & 5% mid highland
B. Anthropometry Result (Z Score based on NCHS 1977)			
GAM (<-2 z-score and/or oedema)	6.9 % (5.0 - 9.3 95% C.I.)	7.5 % (5.9 - 9.5 95% C.I.)	12.2 % (9.2 - 16.0 95% C.I.)
MAM (<-2 z-score and >=3 z-score, no oedema)	6.5 % (4.8 - 9.0 95% C.I.)	6.7 % (5.2 - 8.7 95% C.I.)	10.4 % (7.7 - 13.9 95% C.I.)
SAM (<-3 z-score and/or oedema)	0.3 % (0.1 - 1.3 95% C.I.)	0.8 % (0.3 - 2.0 95% C.I.)	1.8 % (0.9 - 3.5 95% C.I.)
Prevalence of Stunting (<-2 z-score)	23.9 % (20.1 - 28.2 95% C.I.)	52.6 % (48.1 - 57.1 95% C.I.)	47.0 % (42.6 - 51.4 95% C.I.)
Prevalence of Moderate Stunting (<-2 z-score and >=3 z-score)	17.9 % (14.8 - 21.4 95% C.I.)	35.0 % (31.2 - 39.0 95% C.I.)	31.7 % (27.9 - 35.8 95% C.I.)
Prevalence of Severe Stunting (<-3 z-score)	6.0 % (4.2 - 8.6 95% C.I.)	17.6 % (14.3 - 21.4 95% C.I.)	15.3 % (12.2 - 19.0 95% C.I.)
Prevalence of Underweight (<-2 z-score)	25.0 % (20.9 - 29.5 95% C.I.)	44.0 % (39.7 - 48.3 95% C.I.)	47.8 % (41.5 - 54.1 95% C.I.)
Prevalence of moderate underweight (<-2 z-score and >=3 z-score)	21.1 % (17.7 - 25.1 95% C.I.)	34.8 % (30.9 - 38.9 95% C.I.)	35.4 % (30.7 - 40.5 95% C.I.)
Prevalence of Severe Underweight (<-3 z-score)	3.8 % (2.5 - 5.8 95% C.I.)	9.2 % (7.0 - 11.9 95% C.I.)	12.3 % (9.1 - 16.5 95% C.I.)
D. Mortality			
Crude Mortality Rate (CMR)	0.20 (0.09-0.42) (95% CI)	0.11 (0.04 – 0.28) (95%CI)	0.18 (0.08 - 0.39) (95% CI)

Under Five Mortality Rate	0.47 (0.15-1.47) (95% CI)	0.20 (0.03 – 1.44) (95% CI)	0.35 (0.08 – 1.41) (95% CI)
G. Food Security Situation			
Food Security Situation	Meher rainfall: Poor Meher Harvest: Very Poor <u>Yield:</u> Only 7% of its plan has been harvested, 81% production loss compared to last year Food Stock: Poor	Meher rainfall: Normal Meher Harvest: Poor <u>Yield:</u> 86% of its plan has been harvested, 13.7% production loss compared to last year Food Stock: Normal	Meher rainfall: Normal Meher Harvest: Normal <u>Yield:</u> 47% of its plan has been harvested, 7.7% production loss compared to last year Food Stock: Below Normal
Livestock Condition	Good	Good	Good
Water & Pasture for Livestock	Concern	Good	Good
H. Conclusion and Recommendation			
Stage of Alert	“Poor”	“Typical “	“Poor”
Recommendations as per the DPPC Nutrition interim guideline	Close monitoring & Surveillance	Acceptable	Close monitoring & Surveillance
	<ul style="list-style-type: none"> ▶ Close Monitoring & Follow up : - Early Warning, Food Security and Health ▶ Community Mobilization for prevention, active case finding & treatment of malnourished children ▶ Strengthened PSNP & GFD – Targeting allocation, dispatch and timely distribution ▶ WASH (Water supply, Sanitation and Hygiene) (e.g Water purification tablets, Bed net), water points (protection, maintenance, reconstruction, erect new ones) ▶ Health & Nutrition Education (Maternal & IYCF, Sanitation & Hygiene) ▶ Capacity building (Staff and materials) ▶ Improve the supply of agricultural Inputs & encourage use of manure and compost ▶ Strengthen Long Term Development Programmes (LTDP) in the area of food security, nutrition, Livelihoods and Health) 		