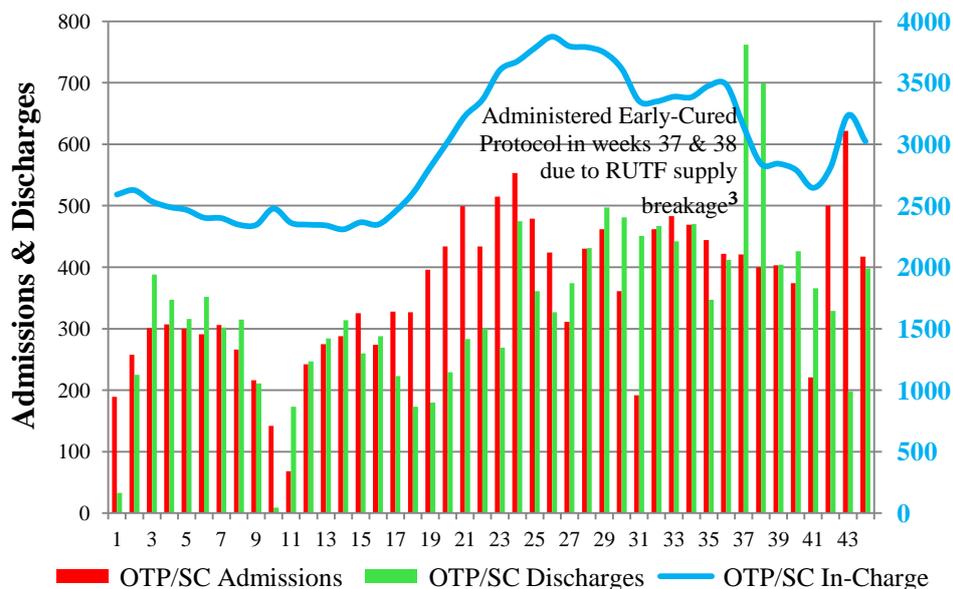


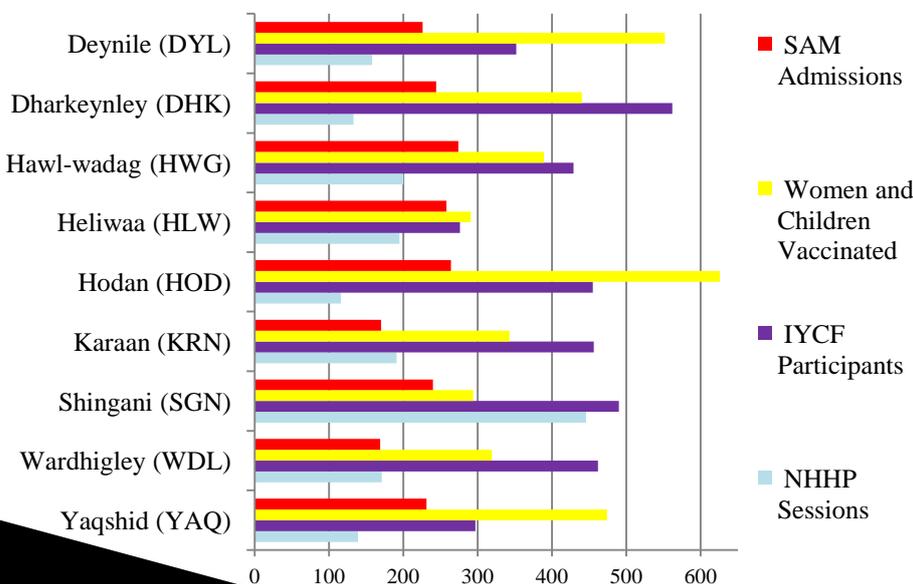
Community-Based Therapeutic Care (CTC) Mogadishu, Somalia

SAACID, in partnership with UNICEF, operates a health and nutrition network across Mogadishu City; treating severely malnourished children under 5 years of age, providing counselling and micro-nutrient supplementation to pregnant and lactating women, immunization services, TB treatment, and hygiene promotion. This bulletin provides figures and highlights from this month's activities.

SAACID Outpatient Therapeutic Programmes (OTPs) and Inpatient Care at the Stabilization Centre (SC) Caseload of Severely Acutely Malnourished (SAM) Children Weeks³ of 2014



SAACID CTC Activities By District - October 2014



OTP/SC for <5s – October 2014

OTP/SC in-charge at end of month	3,023
OTP new admissions this month	2,076
SC admissions this month	74
Percentage +/- from last month ¹	2.3%
District ² with highest admissions	HWG
OTP cured rate this month	93%
OTP default rate this month	6.6%
SC success rate this month	91%
Avg. weight gain (g/kg/day)	4.43
Average length of stay	58 days
SAM cases over the last 12 months	18,383



EPI Activities⁵ – October 2014

# of children vaccinated	3,234
# of women vaccinated (TTV)	510
Cumulative children - 12 months	25,687
Cumulative women - 12 months	4,820



Outreach – October 2014

Total screened by outreach workers	13,373
SAM Referrals by outreach workers	2,087
% of SAM referrals admitted ⁴	99%
# of home and SC visits for follow up	372

IYCF Activities – October 2014

Individual counselling sessions	989
Group counselling sessions	536
# of participants in group sessions	2,864
# of participants last 12 months	52,398



Micro-nutrient Interventions – October 2014

# of children that received Vit. A	2,099
# of women that received MMN	no supply
# of children & PLW dewormed	870
Cases of diarrhoea treated with zinc	193

NHHP Activities – October 2014

SAACID reached 13,543 men and women this month through 1,749 small group sessions conducted across all the clinics on special topics for positive nutrition, health and hygiene practices.

NHHP Topics This Month	# of Sessions
Diversified Diet	382
Feeding the Sick Child	239
Maternal Nutrition	418
Diarrhea Management	343
Exclusive Breastfeeding	367

TB Activities⁵ – October 2014

TB patients in-charge	361
Cured TB cases this month	51
Malnourished TB patients	115

Incidents – October 2014

There were no incidents this month.

The CTC Programme includes 135 outreach workers that conduct active case finding, follow up and deliver key health, hygiene, and nutrition messages on a daily basis across 9 districts of the city.

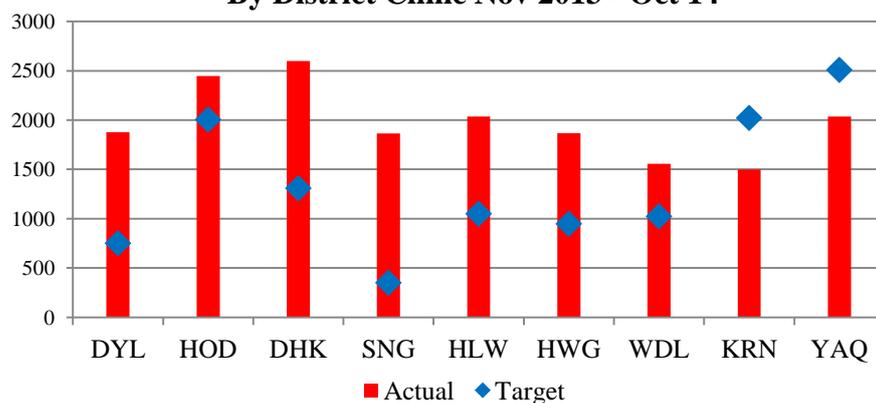
Contract Period Review: OTP Targets Versus Outputs

The end of October completes the 12-month 2013-14 Programme Cooperation Agreement (PCA) between SAACID and UNICEF. As seen in the figures on page 1, the OTP/SC caseload in-charge at the end of October is 3,023 severely acutely malnourished children under 5 years of age. An agreement is underway with UNICEF to renew the contract for an additional 6 months. This will allow the continuation of services to children in need until designated partners (by UNICEF and the Somali Ministry of Health (MoH)) can take over as part of the government's roll out of the Essential Package of Health Services (EPHS).

One of the core challenges in programme planning in Somalia is determining appropriate target figures. The standard formula for nutrition programming is to use population figures, expected coverage, and relevant SAM rates. However, in Somalia the population figures are outdated; coverage areas vary drastically depending on the variable number of actors in a given area; and surveys to determine SAM rates are generally limited. In addition, a traditionally nomadic culture, as well as a large internally displaced population (IDP), has created a fluid population accessing services. This often places great difficulty in accurately projecting the actual population of catchment areas. As a result, targets are often significantly below actual need; a disparity that leads to supply and staffing constraints.

The 12-month contract period ending 31 October 2014 illustrates this example. The contract targeted 11,959 SAM children under 5 to be treated at SAACID OTPs from November 2013 through October 2014. This target was based on the UNICEF accepted standards explained above. The actual number of admissions across the nine OTPs over the 12 months was 17,779 SAM children under 5, representing an overall 48.6% increase above the target. However, the disparity varies by district as seen in the graph below.

12-Month OTP Targets Versus Actual Admissions
By District Clinic Nov 2013 - Oct 14



The specific reasons for the individual clinic disparities depend mostly on the accuracy of the district population figures used and how relevant published SAM rates are for each district. In addition, those districts affected by larger numbers of IDPs in the given timeframe generally show greater disparity.

In practice, SAACID has found that figures derived from the actual delivery of services over a protracted period provide the best indicator for future forecasting, despite the important need to use commonly accepted standards. SAACID recommends that historical data for service delivery by district become one of the cornerstone indicators for future need.

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Terms

CTC	Community-Based Therapeutic Care
EPI	Expanded Programme of Immunization
FFW	Food-For-Work
IDP	Internally Displaced Person
In-charge	Number of active cases registered in the programme at a given time.
IYCF	Infant and Young Child Feeding
MAM	Moderate Acute Malnutrition
MCHN	Mother, Child, Health and Nutrition
MMN	Multi-micronutrients (tablets)
MUAC	Middle-Upper Arm Circumference
NHHP	Nutrition, Health & Hygiene Promotion
OTP	Outpatient Therapeutic Programme
PLW	Pregnant & Lactating Women
RUSF	Ready to Use Supplementary Food
RUTF	Ready to Use Therapeutic Food
SAM	Severe Acute Malnutrition
SC	Stabilization Centre (inpatient care for acutely malnourished children with medical complications)
SFP	Supplementary Feeding Programme
TB	Tuberculosis
WASH	Water, Sanitation and Hygiene
WCBA	Women of Child-bearing Age

References

- ¹ SAACID's CTC clinics operate on a weekly schedule, admitting and discharging children 5 days a week. Monthly figures cover either 20 or 25 operational days, depending on the number of weeks. Relative percentage +/- in admissions are then based on average daily admissions for that month compared to the previous month.
- ² See legend from graph of admissions by district on page 1 for abbreviations of district sites – *also see below*. SAACID operates the CTC Programme in 9 of Mogadishu's 16 districts.
- ³ Epidemiological weeks are used to demonstrate trends, due to the weekly schedule and the variation in operational days per month. *See Page 1 – Graph 1 below for further explanation on drop in caseload last month.*
- ⁴ % of outreach worker referrals admitted is calculated by dividing the number of successful admissions from referrals by the total number of SAM referrals respectively. The difference represents the error rate (measurements done incorrectly) and those that do not act on the referral.
- ⁵ EPI staffing is supported by the Collegiate Churches of New York. TB activities receive support from WVI, WHO and WFP. All other operations and supplies for the CTC Programme are supported by UNICEF.

Mogadishu District Clinic Abbreviations

**Those with an asterisk are the districts where SAACID-managed clinics currently operate.*

Karaan (KRN)*	Wadajir (WDJ)	Hamar-jajab (HJB)	Dharkeynley (DHK)*	Heliwaa (HLW)*
Hodan (HOD)*	Bondhere (BDH)	Shibis (SBS)	Deynile (DYL)*	Abdul-aziz (AZZ)
Yaqshid (Yaq)*	Shingani (SGN)*	Hamar-weyne (HWN)	Waberi (WAB)	Hawl-wadag (HWG)*
Wardhigley (WDL)*				

Photo Descriptions

Source: All photos by SAACID

Page 1 – Photo 1: SAM child admitted into inpatient care at the SC in October 2014 with medical complications

Page 1 – Photo 2: MUAC measurement of SAM child

Page 1 – Photo 3: EPI activities at the KRN clinic in October 2014

Page 2 – Photo on left: IYCF group counselling session at the KRN clinic in October 2014

Descriptions of Graphs

Source: All data collected from SAACID CTC programme

Page 1 – Graph 1: The figure demonstrates the combined OTP/SC (SAM) admissions over the weeks of 2014, against the weekly discharges, along with a trend line of the active caseload each week (the number of OTP/SC in-charge). As explained in references ¹ and ³ weekly trends are used due to variation in the number of operational days each month. This month this graph also shows a major drop in the caseload in-charge from 3476 at the end of August (week 35) to 2842 at the end of September (week 39). Due to an RUTF supply breakage from UNICEF, SAACID tapped into a small reserve of RUTF, and implemented early discharge of cured SAM cases with MUAC of >11.5 and at least 5 visits (compared to the regular 2 month minimum length of stay (LoS) protocol) to preserve limited RUTF for those most in need until UNICEF was able to resupply. Regular discharge protocol has resumed.

Page 1 – Graph 2: The graph compares the figures from various CTC activities by district/clinic for the current month.