



# Melkadida

## Public Health and Nutrition Profile

August **2011**

### Refugee population<sup>a</sup>

**39,601** at end of period

Figure 1 Population breakdown by age-group

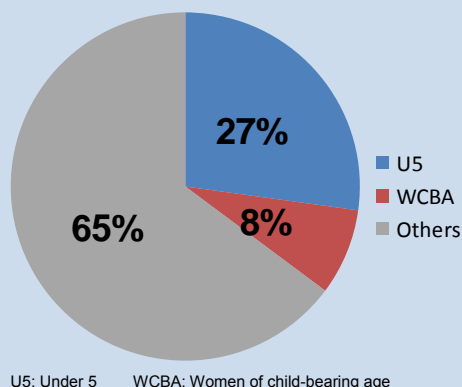


Photo: Melkadida refugee camp © UNHCR / Aug 2011

### Key dates:

Camp opened: **February 2010**

Last nutrition survey: **April 2011**



### Indicators at a glance:

1. Crude Mortality Rate <sup>d</sup>	<b>0.9</b>	⚠️
2. Under 5 Mortality Rate <sup>d</sup>	<b>3.6</b>	❌
3. Infant Mortality Rate <sup>d</sup>	<b>76</b>	❌
4. Severe Acute Malnutrition (SAM) rate <sup>e</sup>	<b>12%</b>	❌
5. Global Acute Malnutrition (GAM) rate <sup>e</sup>	<b>33%</b>	❌
6. Measles coverage <sup>e</sup>	<b>73%</b>	❌
7. Skilled attendance at delivery <sup>e</sup>	<b>100%</b>	?
8. Water (litres / refugee / day) <sup>f</sup>	<b>14</b>	✅

Table 1: Top causes of mortality<sup>b</sup>

1. Acute malnutrition	43%
2. LRTI	16%
3. Watery diarrhoea	10%

LRTI: Lower respiratory tract infection

Table 2: Top causes of morbidity<sup>c</sup>

1. URTI	19%
2. Intestinal worms	13%
3. LRTI	9%
4. Eye disease	8%
5. Acute malnutrition	3%

URT: Upper respiratory tract infection

#### Sources of data

- <sup>a</sup> Source: UNHCR registration database
- <sup>b</sup> Source: UNHCR/ARRA HIS; MSF SAM Programme
- <sup>c</sup> Source: UNHCR/ARRA HIS
- <sup>d</sup> Source: UNHCR/ARRA HIS; MSF OTP Programme
- <sup>e</sup> Source: UNHCR/ENN Nutrition Survey (April 2011)
- <sup>f</sup> Source: UNHCR WASH Monitoring Reports

#### Reporting period

- All indicators are for the month of July 2011, with the exception of GAM and SAM rates.
- GAM and SAM rates are based on the latest nutritional survey which was conducted in April 2011. The next nutrition survey will take place in September 2011.

### Summary:

- The public health, nutrition and WASH situation in Melkadida is very serious.
- Under 5 mortality and acute malnutrition rates are above acceptable emergency thresholds.
- The majority of deaths are reported to be associated with acute malnutrition, lower respiratory tract infection and watery diarrhea.
- Nutrition performance indicators in MAM and SAM programmes are poor.
- There remain gaps in reproductive health services. Women do not have adequate access to emergency obstetric care (EmOC).
- Sanitation and hygiene indicators are below acceptable standards.

### Public Health Priorities:

- Complete integrated measles, polio and nutritional surveillance campaign scheduled for 18-22 August.
- Urgently review reasons for poor performance in SAM programmes. Decentralize OTP services to reduce defaulter rates.
- Improve screening and management of acute malnutrition in children over 5.
- Urgently complete construction of a second health post.
- Strengthen EmOC and other reproductive health services for pregnant women.
- Establish a coordinated community-health programme including sanitation and hygiene promotion activities.

**Legend:** ✅ Standard reached ⚠️ Standard borderline ❌ Standard not reached ? Data unreliable ⓘ Indicator cannot be calculated n/a Data not available - Data not applicable

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Public Health							
Health Impact	No	Indicator	Emergency Standard	Outbreak Alert and Response	Indicator	Emergency Standard	
Crude Mortality Rate (/10,000/day)		0.9	< 1	⚠️	Number of outbreaks reported	1	
Under-five Mortality Rate (/10,000/day)		3.6	< 2	❌	% of outbreaks investigated < 48 hours	100%	100% ✓
Infant Mortality Rate (IMR) (/1000 livebirths)		76	< 60	❌			
Neonatal Mortality Rate (NNMR) (/1000 livebirths)		0.0	< 40	?	EPI and Vitamin A		
Global Acute Malnutrition Rate (%)		33%	< 10%	❌	Measles vaccination coverage	73%	> 95% ❌
Severe Acute Malnutrition Rate (%)		12%	< 2%	❌			
Access and Utilisation				Supervision			
No. of health facilities	1	1 : 25,268	1 : <10,000	❌	Do regular camp coordination meetings take place?	No	Yes ❌
No. of consultations per trained clinician per day		36	< 50	✓	Were any drug shortages reported during the period?	Yes	No ❌
Health Utilization Rate (new visits/person/year)		2.1	1 - 4	✓			

Nutrition	Moderate Acute Malnutrition (MAM)		Severe Acute Malnutrition (SAM)					
			Outpatient therapeutic program (OTP)	Emergency Standard	Stabilisation Centre (SC)*	Emergency Standard	CMAM* (SC and OTP combined)	Emergency Standard
Number of new admissions	456		511		118		n/a	
Average length of stay	7 weeks	< 8 weeks ❌	69 days	< 30 days ❌	9 days	< 10 days ✓	n/a	< 30 days i
Average weight gain (g/kg/day)	-		3.9	> 5 ❌	19.2		n/a	> 5 i
Discharge rate	66%	> 75% ❌	59%	> 75% ❌	0%		41%	> 75% ❌
Death rate	1%	< 3% ✓	1%	< 10% ✓	24%		12%	< 10% ❌
Default rate	16%	< 15% ❌	37%	< 15% ❌	4%		47%	< 15% ❌
Referral rate	16%		0%		69%		1%	
Non-cured rate	0%		3%		-		2%	

\* there is currently no SC in Kobe camp. SC and Overall CMAM indicators represent data for Kobe and Melkadida combined.

Reproductive Health and HIV							
Maternal and Newborn Health	No	Indicator	Emergency Standard	Sexual and Gender-based Violence	No	Indicator	Emergency Standard
No. of basic EmOC facilities	0	0	1 : <500,000 ❌	Incidence of reported rape (/10,000/year)	0	0.0	?
No. of comprehensive EmOC facilities	0	0	1 : <500,000 ❌	% rape survivors who received PEP < 72h		-	100%
Number of maternal deaths		0		% rape survivors who received ECP < 120h		-	100%
Number of maternal deaths investigated <48 hrs		-	100% i	% rape survivors who received STI < 2 wks		-	100%
Crude Birth Rate (CBR) (/1000/month)		1.7					
Coverage complete antenatal care (> 4 visits)		87%	> 90% ⚠️	HIV/AIDS			
% deliveries performed by caesarean section		0%	5 - 15% ❌	Condom distribution rate		n/a	> 0.5 i
% deliveries attended by skilled personnel		100%	≥ 50% ?	% of blood units screened for HIV		n/a	100% i
% low birth weight deliveries		11%	< 15% ✓				

PEP: Post-exposure prophylaxis; ECP: Emergency Contraceptive Pill; STI: Sexually Transmitted Infection

Community Health Activities	Indicator	Emergency Standard	Water, Sanitation and Hygiene	Indicator	Emergency Standard
No. of health education and hygiene sessions conducted	n/a		Avg quantity of potable water / person / day (litres)	14	> 10 ✓
No. of sanitation campaigns conducted	n/a		No. of persons per usable water tap	228	< 250 ❌
No. pregnant women who received clean delivery kit	-		No. of persons per drop-hole in communal latrine	221	≤ 50 ❌
No. of complicated medical cases identified	-		% of population living within 200m from water point	100%	100% ✓
% of complicated medical cases referred	-	≥ 90% i	% of families with latrines	21%	> 50% ❌

**Legend:**
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