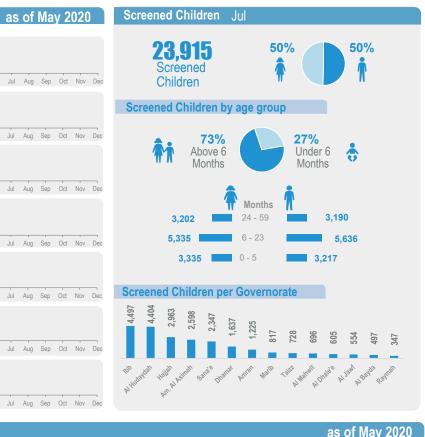
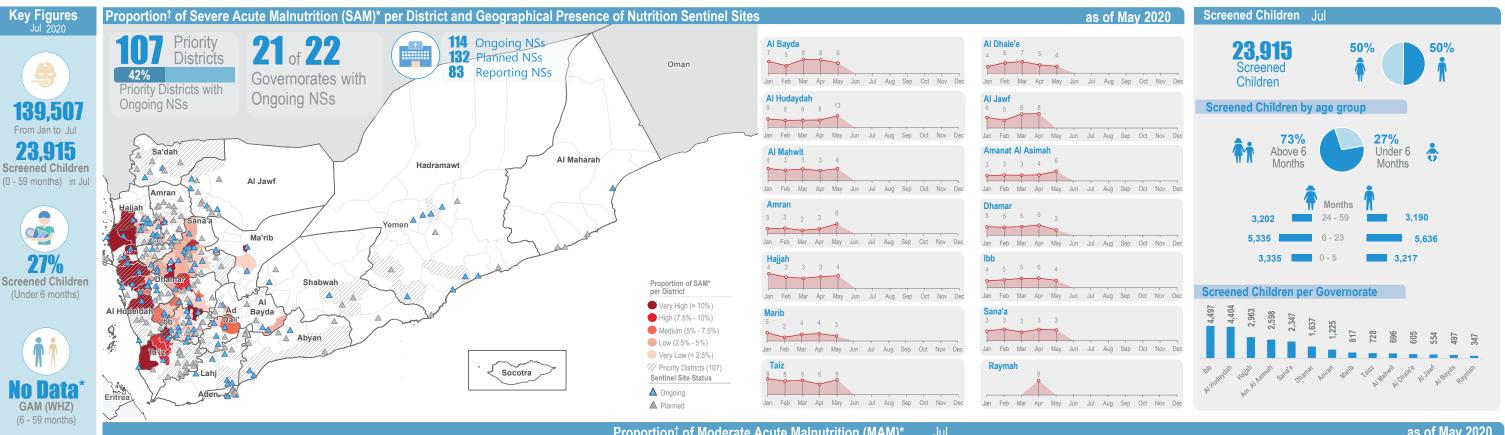
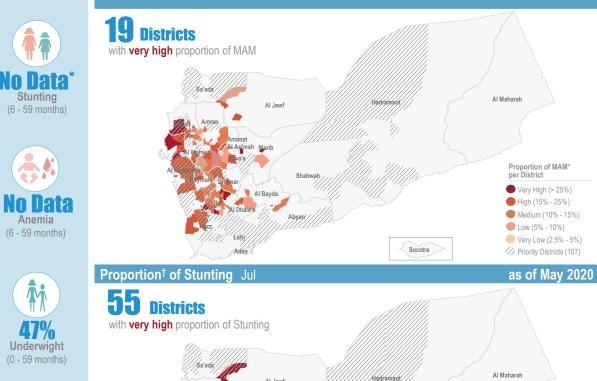
#### World Health **YEMEN:** Nutrition Surveillance Jul 2020 Organization











# Proportion<sup>†</sup> of Moderate Acute Malnutrition (MAM)<sup>\*</sup>

#### **Objectives of the Yemen Nutrition Surveillance System**

monitor children nutritional status early detection of malnutrition and case referral share information and trigger alert verification.

#### **ENSURING THE CONTINUITY AND SAFETY OF NSS SERVICES:**

Nutritional assessment in NSS is normally performed through the measurement of child's weigh, height/length, age, hemoglobin level, breastfeeding status, oedema. To mitigate the impact of COVID-19, protocol adaptations are in place to ensure safe screening services and minimize the risk of cross infections while performing a correct assessment. The following indicators are currently assessed:

- Underweight: weight for age
- Acute malnutrition using MUAC
- Exclusive breastfeeding
- Oedema

Acute malnutrition by WHZ and stunting are temporarily excluded. Although the use of the height board is safe after sanitization, the preferential use of MUAC for children 6 to 59 months can be recommended as an interim measure.

## **Reference:**

WHO-UNICEF Implementation Guidance for the Prevention, Early Detection and Treatment of Wasting in Children 0-59 Months Through National Health Systems in the Context of COVID-19.

- SOP for nutritional screening in Nutrition Surveillance Sites established in health facilities (Hospitals and PHC), in line with COVID19 preventive measures, Yemen

### **Methodology:**

Proportion of Stunting per District

Very High (> 30%)

High (20% - 30%)

Medium (10% - 20%)

Low (2.5% - 10%)

Very Low (<2.5%)</p>

Priority Districts (107)

Socotra

Facility-based sentinel site surveillance system, established in district hospitals across the country The system provides proportion of children under five found suffering from any forms of malnutrition, out of the total children screened It is not a formal survey using sampling methods to produce representative results. The results only reflect the status of children who have attended the health facility in the month under review

The system tracks WHO Global core nutrition indicators: Stunting, Wasting, Exclusive breastfeeding, Anemia. This bulletin is based on reports received by the health facility surveillance MoPHP teams. WHO supports the MoPHP and constantly works to expand coverage and improve data quality.

With WHO technical support to national health authorities. Funded by the World Bank.

Creation Date: 24-Aug-20 \* Z-Score measure, † in percent \*\*During last reported month Data Source: Ministry of Public Health and Population (facility based data)

Anemia

Î

6

19%

Exclusive

Breastfeeding

(0 - 6 months)

Disclaimer: The boundaries and names shown and the designations used on this map do not imply the expression of any opinion w hatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. The responsibility for its interpretation and use lies with the user. In no event shall the World Health Organization be liab le for damages arising from its use. \* No Data = no measurements taken according to adapted protocols implemented during COVID 19

**Data Source** Ministry of Public Health and Population (facility based data)



# Summary for Nutrition Indicators Jul 2020

				Ac	Acute Malnutrition by Z- Score				Acute Malnutriton by MUAC			Underweight		Stunting		Exclusive Breastfeeding		Anemia		Oede	
Governorate	# of Screened Children	# of Screened Children	Propartion of GAM (0 - 5)	# of MAM	Proportion c MAM	of #of SAM	Proportion of SAM	# of MAM	Proportion of MAM	# of SAM	Proportion of SAM	# of Underweight	Proportion of Under weight	# of Stunting	Proportion of Stunting	# of EBF	Proportion of EBF (Yes)	# of Anemia	Proportion of Anemia	# of Oedema	
Al Bayda	(0 - 5) 205	<u>(6 - 59)</u> 292						33	11%	19	7%	207	42%			58	27%			(	0
Al Dhale'e	229							81	22%		4%	241	40%			16					0
Al Hudaydah	984	3,420						962	28%		14%	2,556	58%			156					2
Al Jawf	48	506						60	12%		3%	233	42%			8					0
Al Mahwit	237	459						79	17%		9%	287	41%			37				(	0
Amanat Al Asimah		1,646						252	15%		3%	1,091	42%			102					0
Amran	444	781						126	16%		4%	464	38%			52					1
Dhamar	333	1,304				ЯT	A	256	20%		6%	845	52%	No	Data*	84		No	Data*		1
Hajjah	823	2,140						409	19%		6%	1,308	44%		Dutu	255		110	Dutu	(	0
lbb	1,341	3,156						606	19%	189	6%	2,129	47%			316	21%			1	2
Marib	172	645						100	16%	35	5%	303	37%			33	18%			(	0
Sana'a	556	1,791						196	11%		4%	971	41%			156				(	0
Taizz	152							119	21%	37	6%	354	49%			34	19%			(	0
Raymah	76	271						59	22%	17	6%	215	62%			29	38%			(	0
Acute Malnutritio	n by <b>MU</b>	AC									Acute	e Malnutrition	by Weigh	t/Heigh	nt Z Score	(WHZ)					
Proportion of Moderate Acute Malnutrition (MAM)					Proportion of Severe Acute Malnutrition (SAM) < 115 mm						<b>Prop</b> < -2 z-	Proportion of Moderate Acute Malnutrition (MAM) = -2 z-score and >= -3 z-score				) Proportion of Severe Acute Malnutrition (SA < -3 z-score					
< 125 mm and >= 1					< 115 mi							0.01	0/ D			-	0 2 30010				
% Girls	o– % Boys										-0-	% Girls ————————————————————————————————————	% Boys								
<b>19%</b> affected by MAM in July					<b>7%</b> affected by SAM in July					No	affected by MAM <b>No Data</b> *in July					affected by SAM					
40%					40% —						40%										
30%					30%						30%	30%					40%				
20% <b>15% 16</b> %	<b>6 17%</b>	18% 18%	22% 21%	6	20% —						20%	18% 18%	19% 18%	18%		3	0%				
0			17% 18%	6						09/	2070			8		2	0%				
10% <b>12% 12</b> %	% 13%	13% 13%	17% 107		10%	5% <u></u>	5% 5%	5%	5%	8%	10%	15% 16%	17% 16%	, 16%		1	0% <b>6%</b>	6% 6	% 6%	<b>7%</b>	
0% Jan Fel	b Mar	Apr May	Jun Ju		0%	<b>4% 3</b> Jan F	8 3% eb Mar	3% Apr N	<b>4% 6%</b> May Jun	<b>6%</b> Jul	0%	Jan Feb	Mar Apr	May			0% <b>4%</b> Jan	<b>4% 4</b> Feb M			
																		Feb IV	тат Арт	iviay	
Underweight by Weight/Age Z Score Moderate <-2 z-score and >= -3 z-score					Severe < -3 z-score							Chronic Malnutrition (Stunting) by Height/Age Moderate < -2 z-score and >= -3 z-score					Severe < -3 z-score				
		-0 2-30016				-3 2-800	ne							2 30010							
% Girls											-0- 1	% Girls ———						cc ( ) )			
<b>28%</b> affected by moderate underweight in July				<b>19%</b> affected by severe underweight in July					No	affected by moderate stunting <b>No Data*</b> in July					affected by severe stunting <b>No Data*</b> in July						
50%				40%					40%	40%					40%						
40%												28% 28%	29%								
30% <b>29% 29%</b>	29% 29	27%	28% 30%		30%	)/	(		20%	20%	30%	0	27% 28% 27%			309		24% 23%	% 24%	21%	
20% <b>27% 27%</b>	28% 27	% 28%	26% 27%		20%	/• 18% 	6 18% f	17% 17%		-0	20%		2.70	<b>2</b> 1 /0		209	<u> </u>		~ % 17% ,	~~ ~~	
10%					10% — <b>14</b> 9	% 14%	6 14%	14% 13%	15%	17%	10%					109	%	107	/* 1/% ,	16%	
0% Jan Feb	Mar A	or May	lun lul		0%		n Mar				0%	Jan Feb				- 09		Feb Ma			

Jan Feb Mar Apr May Jun Jul

Email: nut.mophp.ye@gmail.com - Dr.Abdulfattah M. Al-Mahdi General Director Preventive & Curative Nutrition - MoPHP

Jan Feb Mar Apr May Jun Jul

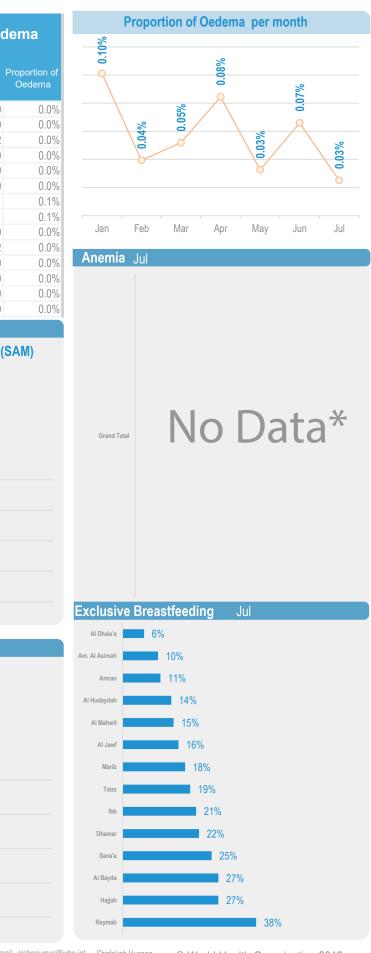
Email: nosiba78@yahoo.com - Dr.Nosiba M. Alsharafy Director of Nutrition Emergency - MoPHP

Email: Madrianopoli@who.int - Marina Adrianopoli Technical Officer for Nutrition-WHO

Jan Feb Mar Apr May

Email: haelm@who.int - Moatsim Hael Data-Manager - WHO

Jan Feb Mar Apr May



Email: alahnoumys@who.int - Shafekah Hussen © World Health Organization 2019