

USAID/OFDA HAITI ONE-YEAR NUTRITION OVERVIEW – JANUARY 12, 2011

The January 12, 2010, earthquake in Haiti disrupted access to food, health services, and water and sanitation facilities, putting thousands of affected individuals at risk of malnutrition and associated mortality. USAID/OFDA immediately assumed a leading role in the nutrition sector by purchasing and airlifting nutritional commodities, supporting appropriate infant and young child feeding practices, funding early identification and treatment of acute malnutrition, and providing technical assistance and coordination in the nutrition sector in Haiti. As of January 12, 2011, USAID/OFDA had provided nearly \$7.5 million for nutrition, in addition to nearly \$56 million for health and nearly \$30 million for water, sanitation, and hygiene programs that together prevented predicted spikes in malnutrition and mortality rates despite the massive destruction in Haiti's earthquake-affected areas.



A child in a displacement camp eats the high-protein ready-to-use therapeutic food called Plumpy'nut. (Mark Phelan, USAID)

INFANT AND YOUNG CHILD FEEDING (IYCF)

In the wake of the earthquake, the separation of infants and young children from their mothers and caregivers disrupted existing breastfeeding practices and heightened the risk of malnutrition and increased infant mortality. USAID/OFDA provided IYCF assistance through baby feeding tents that supported breastfeeding mothers and provided hygienic ready-to-use food for infants who had lost, or become separated from, their mothers after the earthquake. USAID/OFDA also worked to discourage the unsolicited donation and transport of powdered infant formula, which can undermine existing healthful breastfeeding and cause increased sickness and death in young children if mixed with contaminated water, which is often prevalent in disaster-affected areas.

MALNUTRITION SCREENING AND BLANKET SUPPLEMENTAL FEEDING

Children under 5 years of age and pregnant and lactating women generally represent the groups most vulnerable to malnutrition and are at increased risk of receiving inadequate nutrition after a natural disaster. USAID/OFDA therefore prioritized the early detection and prevention of malnutrition in children under 5 years through active screening of the earthquake-affected population to allow professionals to provide treatment before cases reached advanced stages. In addition, USAID/OFDA provided technical support, personnel, and commodities for preventive blanket supplemental feeding of children under 2 years and pregnant woman to protect those groups from becoming malnourished.

TREATMENT OF ACUTE MALNUTRITION

In addition to providing emergency health services to individuals injured during the earthquake, mobile and stationary clinics funded by USAID/OFDA immediately included outpatient malnutrition treatment in spontaneous settlements to treat cases of malnutrition at an early stage and reduce mortality.