



QUATERLY REPORT #4

Program Title: *Enhancing resilience of most vulnerable households, facing recurring food crisis by addressing the consequences of malnutrition in return areas*

Start/End Dates: *June 1st, 2014 – March 31, 2015*

Total Number of Individuals Affected in the Target Area 235,000

Total Number of Beneficiaries Targeted (Individuals) 49,958

Total Number of Returnees Beneficiaries Targeted (Individuals) as subset of above 4,996

Reporting period: *June 1st, 2014 – September 30th, 2014*

Photo: Groundnut seeds distribution, Kado, July 2014



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Acronyms

- FAO:** Food and Agriculture Organization
- GAM:** Global Acute Malnutrition
- KAP:** Knowledge and Practices Survey
- MAM:** Moderate Acute Malnutrition
- PU-AMI :** Première Urgence – Aide Médicale Internationale
- SAM:** Severe Acute Malnutrition
- TFC:** Therapeutic Feeding Center
- WFP:** World Food Program

1. Program Summary

Sector Name:	<i>Nutrition</i>			
Objective:	<i>Contribute to reduce the morbidity and mortality due to malnutrition of children under 5 and pregnant and lactating women</i>			
Dollar Amount Requested:	489,808 USD			
Number of People Targeted:	18,958 people			
Number of Returnees Targeted:	1,896 Chadian people (based on the estimate of 10% of the population of the area being returnees)			
Achievement – Sep. 30, 2014	9,973 people (53% of the target) – 997 returnees			
Geographic Area(s):	Chad – Ouaddai Region – Assounga Department – Adre Prefecture – Hadjer-Hadid, Borota, Adre and Molou Sub-Prefectures – Barde, Kado, Guergne and Molou Cantons			
Keyword(s):	N/A			
Sub-sector Name:	<i>Management of Moderate Acute Malnutrition</i>			
Indicator 1 :	Number of sites managing MAM (20)			
Achievement – Sep. 30, 2014	20 (100% of the target)			
Indicator 2 :	10,149 people admitted to MAM services, by sex and age			
		Female	Male	Total
	Children (0-23 months)	1,555	1,554	3,109
	Children (24-59 months)	3,156	3,155	6,311
	Pregnant/Lactating Women	729	0	729
	TOTAL	5,440	4,709	10,149
Achievement – Sep. 30, 2014	2,731 people (27% of the target), including :			
		Female	Male	Total
	Children (0-23 months)	1,098	859	1,957
	Children (24-59 months)	228	226	454
	Pregnant/Lactating Women	320	0	320
	TOTAL	1,646	1,085	2,731
Indicator 3 :	Number of health care providers and volunteers trained in the prevention and management of MAM, by sex and age (190 people, 100 men and 90 women, age 15-49 years)			
Achievement – Sep. 30, 2014	144 people trained (120 men and 24 women) - (76% of the target)			
Indicator 4 :	Number of supplies distributed by type (target 10,149 supplies, including 9,420 kits for children and 729 kits for women)			
Achievement – Sep. 30, 2014	2,731 supplies distributed (2,411 kits for children and 320 kits for women) – (27% of the target)			
Indicator 5 :	Number of person trained by sex, in the use and proper disposal of medical equipment and consumables (30 people : 20 men and 10 women)			
Achievement – Sep. 30, 2014	Not applicable at this stage of the project.			

Indicator 6 :	Number and percentage of health facilities, supported by USAID/OFDA, out of stock of selected medicines and tracer products for more than one week (target : 0)			
Achievement – Sep. 30, 2014	No health facilities out of stock for more than one week. (Target reached for the covered period)			
Sub-sector Name:	<i>Management of Severe Acute Malnutrition</i>			
Indicator 1:	Number of health care providers and volunteers trained in prevention and management of SAM, disaggregated by sex and age (190 people, 100 men and 90 women, age 15-49 years)			
Achievement – Sep. 30, 2014	144 people trained (120 men and 24 women) - (76% of the target)			
Indicator 2:	Number of sites established/rehabilitated for inpatient care (1)			
Achievement – Sep. 30, 2014	1 site - (100% of the target)			
Indicator 3:	313 people treated for SAM in rehabilitated TFC :			
		Female	Male	Total
	0-23 months	51	51	102
	24-59 months	106	105	211
	Total	157	156	313
Achievement – Sep. 30, 2014	98 people (31% of the target)			
		Female	Male	Total
	0-23 months	28	43	71
	24-59 months	11	16	27
	Total	39	59	98
Indicator 4:	Rates of coverage (60%), default (<15%), death (<10%), cure (75%)			
Achievement – Sep. 30, 2014	Coverage: not applicable at this stage of the project. Default : 3,2% Death: 9,2% Cure: 87,2%			
Indicator 5:	Number of supplies distributed by type (320 supplies, including 313 kits for children suffering from SAM with complications, 6 boxes of F100 milk, and 1 box of F75 milk)			
Achievement – Sep. 30, 2014	105 supplies distributed, including 98 kits for children suffering from SAM with complications, 6 boxes of F100 milk and 1 box of F75 milk - (33% of the target)			
Indicator 6:	Number of person trained by sex, in the use and proper disposal of medical equipment and consumables (4 people : 3 men and 1 woman)			
Achievement – Sep. 30, 2014	5 people (4 men and 1 woman) – (100% of the target)			
Indicator 7:	Number and percentage of health facilities, supported by USAID/OFDA, out of stock of selected medicines and tracer products for more than one week (target : 0)			
Achievement – Sep. 30, 2014	No health facility out of stock for more than one week. (Target reached for the covered period)			
Sub-sector Name:	<i>Infant and Young Child Feeding and Behavior Change</i>			
Indicator 1 :	Percentage of infants 0-<6 months of age who are exclusively breastfed (60%)			
Achievement – Sep. 30, 2014	Not applicable at this stage of the project.			

Indicator 2 :	Percentage of children 6-<24 months of age who receive foods daily from 4 or more food groups (to achieve minimum dietary diversity) (60%)
Achievement – Sep. 30, 2014	Not applicable at this stage of the project.
Indicator 3 :	Number of people receiving behavior change interventions, by sex and age. Target : 8,500 people: <ul style="list-style-type: none"> - Men : 1330 aged 15-49 years, 500 aged 50-60 years - Women : 5870 aged 15-49 years, 800 aged 50-60 years)
Achievement – Sep. 30, 2014	7,144 people (84% of the target) <ul style="list-style-type: none"> - 1,520 men and 5,624 women

Sector Name:	<i>Agriculture and food security</i>
Objective:	<i>To help beneficiaries recover from past crises through a reinforcement of household agricultural resources</i>
Dollar Amount Requested:	360,192 USD
Number of People Targeted:	31,000 persons (5,167 households)
Number of Returnees Targeted:	3,100 (517 households)
Achievement – Sep. 30, 2014	23,970 persons (77% of the target) - 2,400 returnees
Geographic Area(s):	Chad – Ouaddai Region – Assounga Department – Adre Prefecture – Hadjer-Hadid and Borota Sub-Prefectures – Barde and Kado Cantons
Keyword(s):	Livestock, Livelihoods, Climate
Sub-sector Name:	<i>Improving agricultural production / food security</i>
Indicator 1:	Projected increase in number of months of food self-sufficiency due to distributed seed systems/agricultural input for beneficiary households (+ 3 months)
Achievement – Sep. 30, 2014	Not applicable at this stage of the project. Will be assessed after the post-harvest survey (December 2014 – January 2015)
Indicator 2:	Number of people benefiting from seed systems/agricultural input activities, segregated by sex (21,000 persons, 50% women, 50% men)
Achievement – Sep. 30, 2014	20,946 persons – (100% of the target) - 2,095 returnees
Sub-sector Name:	<i>Veterinary medicines and vaccines</i>
Indicator 1:	Number of veterinary interventions (60,000 treatments and/or vaccinations).
Achievement – Sep. 30, 2014	92,467 veterinary interventions (154% of the target)
Indicator 2:	Number of animals treated or vaccinated (30,000 heads)
Achievement – Sep. 30, 2014	41,664 heads vaccinated or treated (139% of the target)
Sub-sector Name:	<i>Livestock</i>
Indicator 1 :	Number of animals benefiting from or affected by livestock activities (30,000 animals)

Achievement – Sep. 30, 2014	41,664 animals (139% of the target)
Indicator 2:	Number of people benefiting from livestock activities, disaggregated by sex (10,000 beneficiaries, 50% men, 50% women)
Achievement – Sep. 30, 2014	3,024 people - (30% of the target)
Indicator 3:	Number of veterinary interventions (e.g., treatments, vaccinations, etc.) – 60,000 veterinary interventions
Achievement – Sep. 30, 2014	92,467 veterinary interventions (154% of the target)
Indicator 4 :	Number of animals treated or vaccinated (30,000 heads)
Achievement – Sep. 30, 2014	41,664 heads (139% of the target)

2. Context Evolution

The security situation has remained stable during the timeframe covered by this report, thanks to the presence of the Sudanese-Chadian joint military forces in the region. However, an increase in the number of security incidents (carjacking, cattle rustling), some of them targeting humanitarian partners, has been reported. Security procedures have been reinforced for PU-AMI teams: travelling by motorbike between the activity sites is now prohibited, which affects the operational flexibility of the organization.

2.1. Agriculture

The agro-pastoral season has been characterized by a late start and a rather poor distribution of rainfall over time¹. This situation may increase the vulnerability of households still suffering from the effects of 2013's agricultural deficit. Food stocks are low, households have limited coping capacities, and food products market prices are soaring.

PU-AMI is therefore concerned about the food security of the population during the lean period (May to September). At the beginning of July, only 25% of the investigated households declared having food stocks sufficient to cover more than one month of normal food consumption, a situation comparable to July 2013 (27%)².

2.2. Livestock

Belated rainfalls finally allowed for the filling of surface points, facilitating livestock watering. Pastures have quickly regenerated after the arrival of rainfalls, with a pretty decent vegetation cover and biomass showing up in several areas, with variations depending on the distribution of rain in space and time.

2.3. Nutrition

During the rainy season, an upsurge in waterborne diseases (gastrointestinal infections, parasites, viruses, etc) has been reported.

The sanitary district (Adré) has reported a decrease in attendance to the health centers, caused on one hand by the limited availability of individuals during the agricultural season, and on the other hand by the difficult travel conditions of the rainy season (high level of water in wadis, damaged roads).

¹ PU-AMI Vulnerability Monitoring Bulletin n°6 (June-July 2014) – Cf. Annex 1

² PU-AMI Post-harvest survey, December 2013

3. Program achievement

3.1. Sector 1: Nutrition

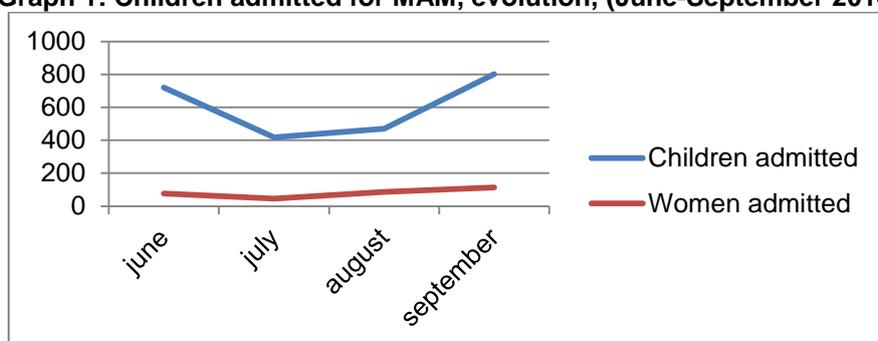
Sub Sector 1: Management of Moderate Acute Malnutrition

Four PU-AMI teams of 6 people each (1 supervisor, 1 nurse, and 4 nutritional assistants) carry out MAM management activities in 11 health centers, 1 health post and 8 advanced health points of Adré sanitary district. In the last 4 months, 2,411 children under 5 years and 320 pregnant and lactating women benefited from nutritional care complying with the standards of the Chadian national protocol for the management of malnutrition³.

Table 1 : Patients admitted for MAM, by health center (June-September 2014)

	Abouglégné	Adré	Allacha	Arkoum	Borota	Djoroko	Goungour	H.-Hadid	Hilouta	Kawa	Mahamata	Total
Women	17	19	32	73	36	21	26	52	21	12	11	320
Children	194	394	216	303	191	180	190	346	217	69	111	2,411

Graph 1: Children admitted for MAM, evolution, (June-September 2014)



To some extent, the weekly care system allows families to bring the children to the health centers during the cultural season. This explains that the admission figures stay high in September.

Amongst the 11 health centers listed above, 9 work with additional health posts or advanced health points.

Admission figures for children of age 6-23 months are higher than for children of age 24-59 months. Indeed, the 2013 Assoungha SMART Survey, conducted by a consultant under the supervision of UNICEF,⁴ showed a GAM rate amongst children aged 6-29 months (24,4%) twice as high as the GAM rate amongst children aged 30-59 months (12,6%).

Every MAM patient admitted for care in one of the 20 health facilities supported by PU-AMI benefits from a personalized medical monitoring (systematical care, treatment for related conditions) and from a dietary treatment (PREMIX or Plumpy Sup). Since July 2014, all children admitted for MAM are treated with PREMIX rations, following a shortage in the WFP Plumpy Sup supply chain.

This situation should be resorbed in October 2014, with the expected arrival of new Plumpy Sup stocks. Beside this temporary substitution of care products, none of the health facilities supported by PU-AMI have experienced shortages since the beginning of the project.

PU-AMI teams are collaborating on a daily basis with the health staff of the ministry of health, and with a network of 144 community health workers (CHW).

All community health workers have been trained in the areas of prevention and screening of malnutrition. In order to strengthen the capacities of the health staff, additional training sessions, covering the revised national treatment protocol and the management of therapeutic feeding supplies, will be conducted in November 2014 and in February 2015.

³ National Chadian Protocol for the Management of Malnutrition – Cf. Annex 2.

⁴ Assoungha SMART Survey, 2013, UNICEF – Cf. Annex 3.

Sub-sector 2: Management of Severe Acute Malnutrition

Support to Adré sanitary district in managing the Therapeutic Feeding Center

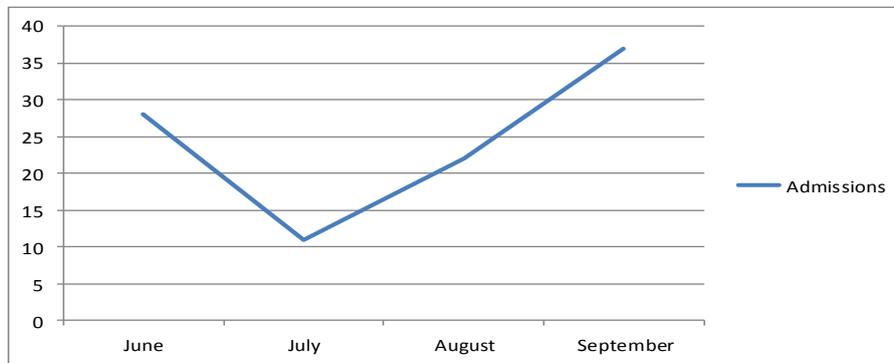
PU-AMI has been supporting Adré's TFC since March 2013. A team of 13 staff (1 doctor, 1 nutritional supervisor, 4 nurses, 4 nutritional assistants, 3 hygienists) ensures a 24/7 medical care for patients affected with SAM with complications. Patients are referred to the TFC from all the sanitary zones of the district. The rehabilitation works that done in the TFC, and the hiring of 3 hygienists, ensure the optimal hygiene conditions suitable for the proper treatment of the children.

PU-AMI aims to strengthen capacities of the staff through continuous training, covering diagnosis analysis and treatment of the complications of malnutrition.

Support to TFC also covers monthly supplies of medicines, medical supplies, and therapeutic milk.

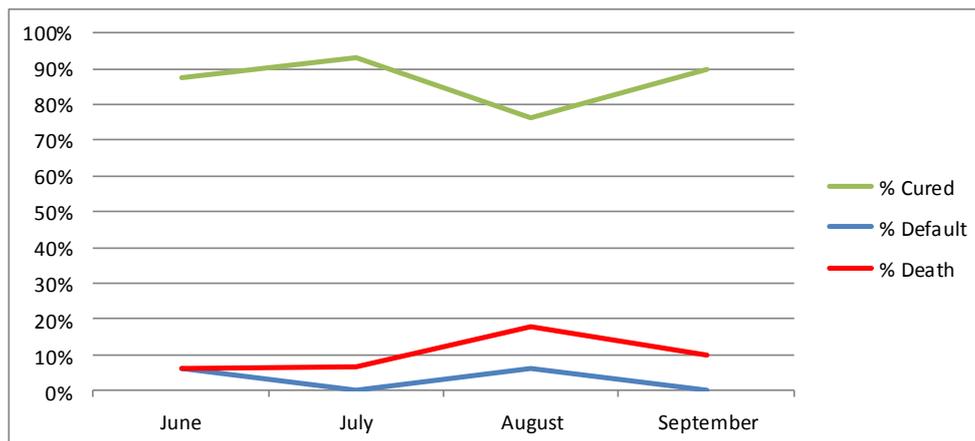
From June to September 2014, 98 children have been admitted to the TFC, for an average of 24 children per month.

Graph 2: Children admitted to Adré TFC (June-September 2014)



Cure, Death and Default rates are respectively of 87.2%, 9.2% and 3.2%. These figures are in accordance with SPHERE standards.

Graph 3 : Performance rates for Adré TFC (June-September 2014)



Adré TFC has experienced an increase of its death rate in August 2014. Due to the progressive improvement of its services, the TFC is becoming a major referring structure in the district: other health facilities tend to refer more of their most critical cases to Adré. Indeed, 39% of the death cases recorded at Adré TFC in 2014 were patients referred from other TFCs, located in the refugee camps, to Adré. In total, 9 patients died out of 97 discharges, giving a rate below the SPHERE standard.

Improvement of the referral system to and from the TFC inside the district

The malnutrition care system in Adre's sanitary district is negatively affected by a low patient referral ratio. Patients medically referred from the mobile care sites to the TFC are facing great difficulties in the access to their treatment, due to the long travel distances between medical sites, and to the lack of appropriate means of transportation.

Since May 2013, in order to improve this situation, PU-AMI uses two of its vehicles for the referral of external patients to the TFC. In the reported period (June-September), amongst the 98 patients admitted to the TFC, 28 patients (30%) were transported to and back from the TFC by PU-AMI vehicles⁵.

Rehabilitation of Adré TFC

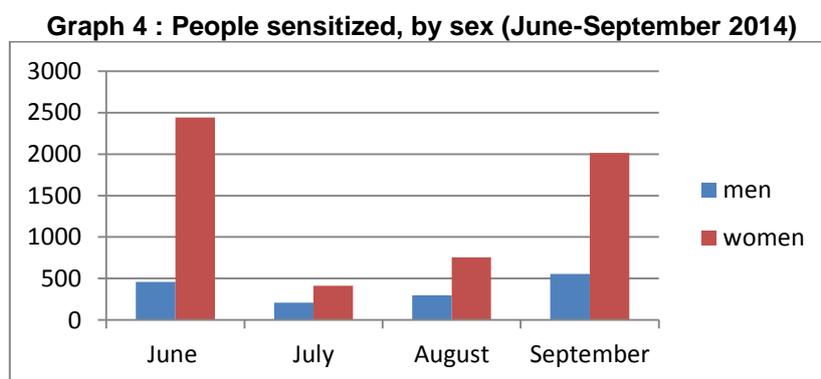
PU-AMI has been continuously carrying rehabilitation works in Adré's TFC since 2013.

Rehabilitation of the sanitation units, and construction of a rest room for nurses, were planned for this project. These works have been conducted in June and July, according to the standards defined in the project proposal⁶.

Sub Sector 3: Infant and young child feeding behavior change

Community based sensitization is a key aspect of PU-AMI's nutritional program, with a team of 3 community mobilizers and 6 field assistants working on a daily basis with a network of 144 community health workers based in the villages.

This team conducts default case search activities, active screening of the population for malnutrition, and mass sensitization. Mass sensitization themes cover the basic knowledge of malnutrition, young enfant feeding, maternal health, and food hygiene practices.



PU-AMI aims at improving the general knowledge and practices of the population regarding feeding practices, breastfeeding, and food diversification.

A KAP study was conducted in September 2014. The results of the survey will be available in the last week of October. The conclusions should allow for proper setting of baseline indicators for young child feeding knowledge and practices in the intervention zone. The sensitization strategy will then be reviewed in order to ensure a better context adaptation. A second KAP survey will be conducted by the end of the project in order to appreciate the impact of PU-AMI sensitization amongst Adré's population.

Other planned activities

The activities *Building Community Support* and *Creation of infant and nutrition support groups*, initially planned for the first two months of the project, could not be conducted in time. This is mainly due to the difficulties of mobilizing households around community awareness activities during the agricultural campaign. The planning of these activities has been re-evaluated and they will be conducted in November 2014.

⁵ Adré TFC Patient referral data (June-September 2014) – Cf. Annex 7.

⁶ Adré's TFC Rehabilitation works pictures – Cf. Annex 4.

3.2. Sector 2: Agriculture and food security

Sub-sector 1: Improving agricultural production / food security

Beneficiaries' identification and sensitization

The identification of beneficiaries was conducted in May 2014 (the lists were established at once for two distributions, respectively funded by OFDA and FAO). 238 villages were visited, allowing meetings between the teams and local authorities. In each village, a list of vulnerable households is set by the representatives of the community (village heads, village elders). PU-AMI has conducted inquiries in order to check the information provided by the authorities of the villages, and the consistency of this information with the vulnerability criteria defined in the project proposal.

A total of 4,056 households were investigated by PU-AMI teams, for a confirmed list of 3,494 household beneficiaries.

Groundnut seeds distribution

Local leaders were associated to the distribution process which took place in July. They were present for the distributions, in order to facilitate the identification of beneficiaries. Traditional authorities were systematically contacted on the distribution sites, to ensure smooth operations. Each direct beneficiary accounts for a household of 6.

Table 2 : Distribution sites and beneficiaries (July 2014)

Site	Villages	Bags (stock)	Bags (distributed)	Balance	Benef. (identified)	Benef. (served)	Balance
Ambéyoung	26	244.5	244.5	0	489	489	0
Goungour	34	424	424	0	848	848	0
Nounougaye	15	143.5	143.5	0	287	287	0
Borota	47	244.5	244.5	0	489	489	0
Tembeli Farida	23	163.5	162	1.5	327	324	3
Foukougngang	23	102.5	102.5	0	205	205	0
Nakoulouta	14	71.5	71.5	0	143	143	0
Goz Bagar	23	148	145	3	290	290	0
Goundiang	9	60.5	60.5	0	121	121	0
Allacha	9	51.5	51.5	0	105	105	0
Hilé Déyé	6	43.5	43.5	0	87	87	0
Goz Loban	9	52.5	52.5	0	105	105	0
Total	238	1750	1745.5	4.5	3494	3491	3

3 beneficiaries did not show up on the day of the distribution.

Capacity building, technical support and training

A network of contact groups was established under the project *Support to people in return areas of the department Assoungba* (funded by EuropAid). In June 2014, 50 groups (359 people) were formed and 9 demonstration plots have been established to facilitate the demonstrative training. The techniques displayed included fertilization with manure and groundnut shells, and networking between producers and chain operators.

Post-distribution monitoring

A post-distribution monitoring survey was conducted from August to September 2014 over a sample of 608 beneficiaries, spread out on 30 villages.

Results show that at the end of August, 89% of the beneficiaries had sown the distributed groundnut seeds. Most of the non-sown seeds were used for consumption. The beneficiaries' satisfaction ratios are high, with 99% of the beneficiaries satisfied with the quality of groundnut seeds, and 96% satisfied with the organization of the distributions⁷.

The survey also reveals that the quantity of groundnut distributed (15kg) will allow beneficiaries to sow an area of 0,28 ha, for an expected outcome of 196 kg of groundnut.

⁷ Post-distribution survey (distributions: July 2014) – Cf. Annex 5.

Other planned activities

Trainings and sensitization through the contact groups, covering conservation and storage production systems for agriculture productions, and promoting on good nutritional practice, are planned for October and November 2014.

Sub-sector 2: Veterinary medicines and vaccines

During the beginning of the rainy season, cattle are more vulnerable to diseases and parasites. Choosing this time to treat and vaccinate cattle ensure a large support to the campaign from the population.

Cattle vaccination campaign

The vaccination campaign (July-August 2014) has mobilized 30 livestock auxiliaries, 3 supervisors of the livestock delegation, and 9 vaccinators. The operations were monitored by a team of 3 PU-AMI agents. An agreement was signed between PU-AMI and the delegation of livestock specifying the duties of each partner in the proper supervision of the campaign. This protocol covers the period from July 15 to August 9, 2014.

An awareness-raising campaign was organized in the villages, via traditional and administrative authorities, in order to spread the word and mobilize large numbers of farmers.

Table 2 : Vaccinated and treated heads (July-August 2014)

	Cattle	Sheep	Goat	Horse	Donkey	Camel	Total
Vaccinated heads	12126	21435	4665	412	333	59	39,030
Treated heads	431	1093	559	319	190	42	2,634

504 breeders were present during the vaccination campaign, for an estimated total number of 3,024 beneficiaries (504 households of 6 persons). This only covers 30% of the project target (10,000 people). This difference may be caused by the fact that people bringing livestock to the vaccination campaign may represent several households. A cattle census will be conducted in January 2015 and should allow a clearer vision of the number of people having vaccinated their livestock during the campaign.

Vaccination campaign monitoring

The post-vaccination campaign⁸ survey conducted from August to September 2014, shows a high involvement of the target population in the vaccination campaign. Of a sample of 415 households investigated, 325 (78%) declared they have taken part in this vaccination campaign.

98% of the beneficiaries of the vaccination campaign declared they were satisfied with the campaign, with 97% of the beneficiaries declaring an improvement of their cattle general health after the campaign.

Sub-sector 3: Livestock

Training sessions for 20 new veterinary auxiliaries

The training sessions were conducted in June 2014 by two instructors from the delegation of livestock. The training sessions covered the areas of diagnosis, small surgery, vaccines and treatments, and sensitization techniques.

The 20 new veterinary auxiliaries were able to join and participate in the vaccination campaign that took place immediately after the training, in July 2014.

Distribution of small veterinary kits to veterinary auxiliaries upon completion of training

Each veterinary auxiliary received a veterinary kit, needed for the practical training and for the vaccination campaign. The kits included basic vaccines, medicines, surgery tools and protection gear.

⁸ Post-vaccination campaign survey – Cf. Annex 6.