7.244

Key Figures

193.472 From Jan to Sep

Screened Children (0 - 59 months) in Sep



(Under 6 months)



No Data GAM (WHZ) (6 - 59 months)

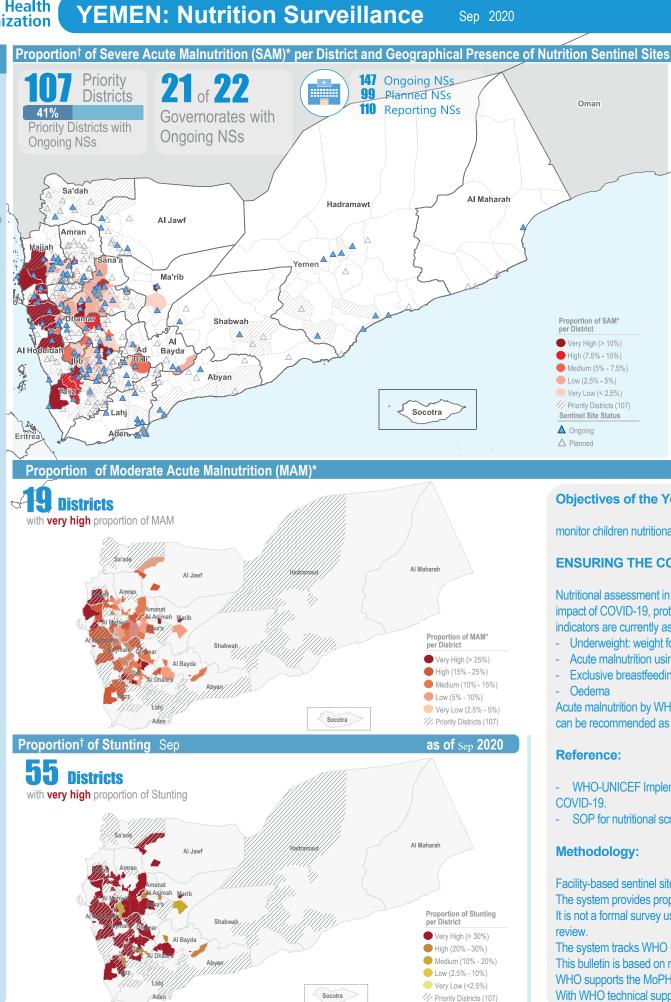


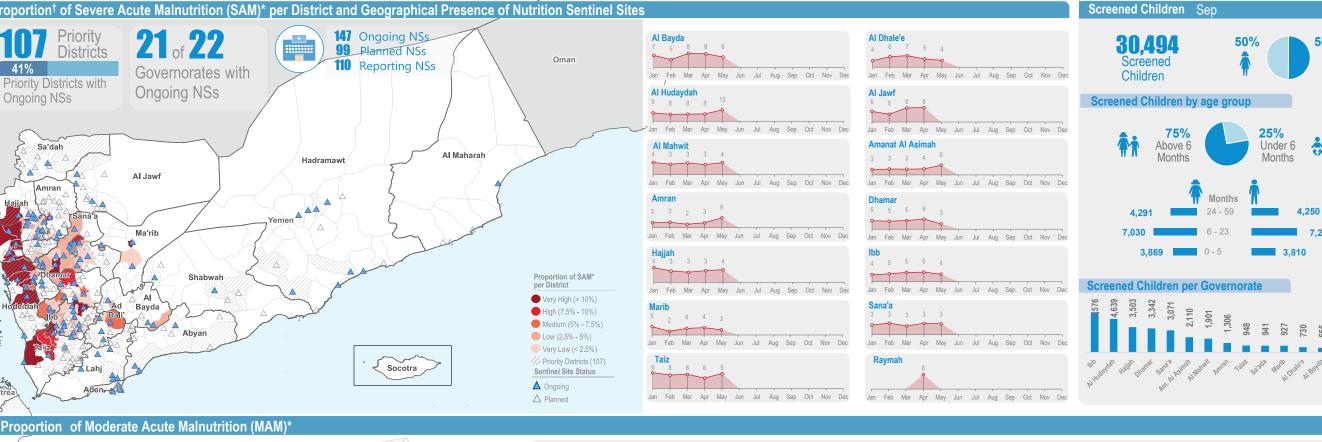
No Data Stunting (6 - 59 months)











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

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:

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

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.

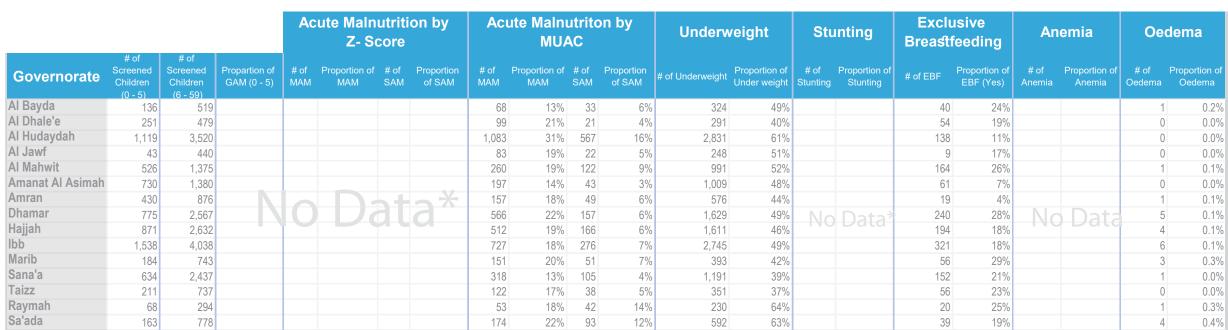
WHO supports the MoPHP and constantly works to expand coverage and improve data quality.

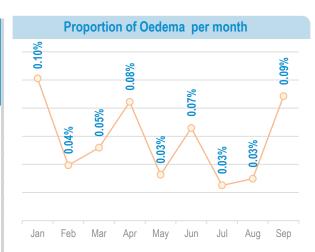
With WHO technical support to national health authorities. Funded by the World Bank.

Anemia Sep



Summary for Nutrition Indicators Sep 2020





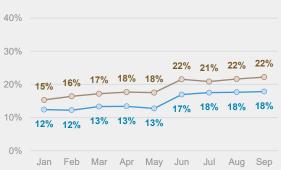


Exclusive Breastfeeding Sep



— % Girls — — % Boys affected by MAM in September

Acute Malnutrition by MUAC



Underweight by Weight/Age Z Score

29% affected by moderate underweight in September

29% 29% 29% 29% 27% 28% 30% 29% 30%

Jan Feb Mar Apr May Jun Jul Aug Sep

9 8 8 8 8

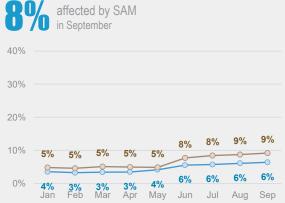
20% 27% 27% 28% 27% 28% 26% 27% 28% 28%

Moderate < -2 z-score and >= -3 z-score

—— % Girls —— % Boys

50%

Proportion of Severe Acute Malnutrition (SAM) < 115 mm



Acute Malnutrition by Weight/Height Z Score (WHZ)

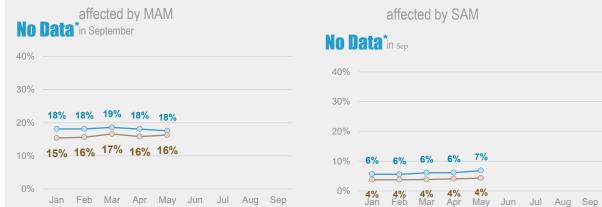
Proportion of Moderate Acute Malnutrition (MAM) < -2 z-score and >= -3 z-score —— % Girls —— % Boys

—— % Girls —— % Boys

No Data* in September

28% 28% 29% 27% 26%

28% 27% 28% 27% 27%



No Data*in Sep 10% 6% 6% 6% 6% 7%

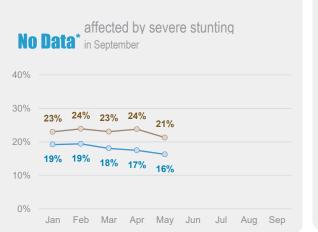
Proportion of Severe Acute Malnutrition (SAM)

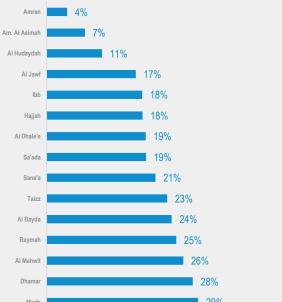
affected by SAM

Chronic Malnutrition (Stunting) by Height/Age Z Score **Severe** < -3 z-score affected by severe underweight 18% 18% 18% 17% 17% 20% 10% -14%-14%-14%-14%-13% 15% 17% 17% 18% 10% Jan Feb Mar Apr May Jun Jul Aug Sep



< -3 z-score





Creation Date: 07-11-20 Data Source: Ministry of Public Health and Population (facility based data)

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40%

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Jan Feb Mar Apr May Jun Jul Aug Sep

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