REPORT OF THE FEEDING PROGRAMME IN IDP CAMPS IN BENI, EAST DRC FOR THE PERIOD OF DECEMBER 2004 AND JANUARY 2005

INTRODUCTION

The Primary Healthcare Promotion Programme (PPSSP) is a consortium of 3 Tearfund local partners in East Democratic Republic of Congo (DRC) created in November 2002 following the emergency situation caused by killings and people displacements due to ethnic conflicts and political instability in the Ituri District.

This Public Health Promotion Project was undertaken in response to the findings of needs assessments conducted by the PPSSP in September 2003 after an evaluation carried out by Tearfund and PPSSP in January-February 2003 as well as the ongoing needs assessment conducted by health promoters in the field.

The overall goal of the project is to bring about an improvement in public health both physical (malarial, diarrhoeal and other communicable diseases) and mental (trauma) for the population in the sectors covered by the project on the axis Beni-Eringeti, Beni-Teturi, Beni-Kasindi, for both IDP and local communities,

The purpose of the project is to enable an improvement in hygiene and sanitation knowledge and practice for the target population (both IDP and local communities) and to minimise the impact of trauma on the health of survivors of tribal and civil war as well as women and girls victims of sexual violence.

The feeding programme is one of PPSSP activities among IDPs. It was set up following a needs assessment that showed that over 10% of children and pregnant and lactating women were malnourrished (all malnutrition degrees combined).

This situation was due to the insufficient food distribution by NGOs in terms of quantity and time span. Since PPSSP promotes prevention than cure, the feeding programme was set up to prevent malnutrition among children under five, pregnant and lactating women, as well as chronically sick people and elderly in the IDP camps.

1. Objectives

- To prevent and treat malnutrition among children under five, pregnant and lactating women, chronically sick people and elderly in 3 IDP camps in Beni
- To reinforce the capacity of mothers in cooking balanced porridge for children under five years
- To assist pregnant and lactating women to maintain a good health as their nutritional needs increase during pregnancy and lactation.

2. Beneficiaries (target groups)

Beneficiaries of this programme are children under-five years, pregnant and lactating women and elderly in Mukulya, Tuha and Kangaembi IDP camps. In total 633 people benefited from the project for the period covered by the report (December 2004 and January 2005).

Distribution of beneficiaries by category

IDP Camps	Children < 5 yrs		Pregnant women		Lactating women		Elderly		Total
	Nbre	%	Nbre	%	Nbre	%	Nbre	%	Nbre
MUKULYA	183	72.2%	27	11.5%	22	9.4%	2	0.9%	234
TUHA	201	76%	14	5.30%	35	13.3%	14	5.30%	264
KANGAEMBI	121	90%	14	10%	-	-	-	-	135
TOTAL	505	79.8%	55	8.68%	57	9%	16	2.52%	633

Comments: 79.8% of the beneficiairies is made of children under five years, pregnant women account for 8.68%, lactating women 9% and elderly account for 2.52%

In addition to the 633 vulnerable people living in the 3 IDP camps, 54 children under-five living in an orphanage called "HONUC" receive assistance from this programme. This assistance is not based on the theoretical calculation (a lump quantity of ingredients is given).



3. INPUTS

To prevent malnutrition in the IDP camps among the target groups, the following ingredients are used: soya beans flour, maize flour and sugar.

3.1 Quantity distributed per person

The programme provides enriched porridge made of the 3 elements mentionned above following the average proportions of :

- 10g of soya beans flour per person per day
- 30g of maize flour per person per day
- 20g of sugar per person per day

Porridge is cooked for 6 days per week (From Monday to Saturday). This is why children call Sunday as "*a bad day*" because they don't get porridge that day.

Children mothers contribute by cooking the porridge and washing kitchen materials. But soap and fire wood are provided by the project.



3.2 Total quantity distributed for two months

INGREDIENTS	DECEMBER 2004				JANUARY 2005				TOTAL
	MKL	TUHA	KGHB	HONUC	MKL	TUHA	KGHB	HONUC	
SOJA	50g	70Kg	30Kg	0	65Kg	70Kg	40 Kg	3Kg	328Kg
MAIS	120Kg	210Kg	110Kg	0	190Kg	215Kg	110Kg	8Kg	963Kg
SUCRE	100Kg	150Kg	75Kg	0	125Kg	140Kg	75Kg	6Kg	671Kg

4. OUTPUTS

4.1 Malnutrition rate among the target groups

IDP CAMPS	POPULATION	CASES OF MALNUTRITION	%
MUKULYA	234	20	8.54%
TUHA	264	11	4.16%
KANGAEMBI	135	3	2.22%
TOTAL	633	34	5.37%

For the last two months 24 children (70.58%) of the malnourished cases have been rehabilitated and the health status for the remaining 10 (29.41%) is improving.

Mukulya IDP camp accounts for more cases of malnutrition because it was introduced in the programme in October 2004 whereas the two other camps had been receiving support since April 2004.

Children born from mothers who attend the programme are born with a very good health status.



5. FINANCIAL REPORT

The feeding programme at PPSSP is currently supported only by the Friends of CME Trust. Period covered by this report includes December 2004 and January 2005. Income and expenditures are detailed in the table below.

No	Description	December	January	Total	Observation
01	Maize flour	91.00\$	133.90\$	224.90\$	
02	Soya beans	67.50\$	78.75\$	146.25\$	
03	Sugar	214.50\$	231.00\$	445.50\$	
04	Soap	10.50\$	0.00\$	10.50\$	See previous stock
05	Firewood	106.50\$	97.77\$	204.27\$	
06	Transport & handling	30.00\$	17.58\$	47.58\$	
	Total	520.00\$	559.00\$	1079.00\$	
	Received from KEC via CME			1157\$	
	Balance end January			78\$	

From this report we could conclude that each individual under the programme received 26 meals per month which cost was US \$ 0.85 per person per month putting aside the sporadic intervention done for orphans living at HONUC.

CONCLUSION

PPSSP aims at contributing to the improvement of the quality of life through public health promotion by reducing mortality and morbidity rates of preventable diseases and the minimisation of the impact of trauma caused by the war, ethnic conflicts and sexual violence.

It's in this respect that a feeding programme was set up in order to prevent malnutrition among most vulnerable people among IDPs (children under five years, pregnant and lactating women, elderly and chronically ill people).

At the beginning of the programme (April 2004) 2500 people were registered. This time 633 (representing 25.32% of the initial figure) are still benefiting from the programme as some of them have left to return to Ituri or simply have changed the status and lost the right to continue under the feeding programme.

Beneficiaries express their thanks to donors as they say: "This porridge has helped us much since our children and ourselves can support the whole day as we wait for the only one meal of the day in evening". Others add by saying: "If it was not this supplementary feeding programme many children would have died".

We all thank the Friends of CME Trust and any particular individual who support this programme to save lives.

Mwakamubaya Nasekwa

Programme Coordinator, PPSSP/Beni-DRC

February 2005