

## From the Director's desk

Dear CE-DAT Friends,

Welcome to our 10<sup>th</sup> issue of the CE-DAT newsletter.

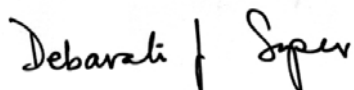
Last month, some of our team members attended the third annual MICROCON workshop that was held in Berlin, Germany. The MICROCON research programme takes an innovative micro-level, multidisciplinary approach to studying the conflict cycle. This workshop was organized to synthesize the preliminary research findings from the micro-level analysis of violent conflict. There were discussions of research to date and the policy application of MICROCON's work. We presented our preliminary findings for Darfur (Sudan), Democratic Republic of Congo and Thailand at the workshop.

The ongoing intense fighting in Mogadishu, Somalia between government forces and the Shabaab radical islamists has resulted in a large increase in Somalis leaving to Kenya or becoming internally displaced in Mogadishu. The food-security situation in Somalia remains precarious, with over 3.2 million people in need of emergency humanitarian aid and livelihood support. The Shabaab has recently closed down 3 United Nations offices in Somalia. The humanitarian organizations should continue to intervene and support the conflict-affected populations as this could avoid severe humanitarian crisis. In this context, there is a new CRED publication, 'Consequences of on-going civil war in Somalia: providing an evidence base for a sustained public health response' in PLOS Medicine forthcoming on August 11, 2009.

There was a suspension of several NGOs in Ethiopia who were accused of being involved in reporting human rights abuses in rural areas. They were blamed of supplying inaccurate information to the United States State Department. Despite the complexity of the current situation, the international community need to remain mobilized to meet the emergency food aid needs for around 6 million people in the country and to protect the vulnerable groups.

Our best wishes for a nice summer to all.

Thanks for your continued support!



Debby Sapir, Director

## Darfur Research

Estimating excess mortality has been and will remain a very complex exercise for many researchers. Recent conflicts such as those in the DRC, Darfur and Iraq have facilitated substantive debate on the accuracy of death tolls due to civil conflict. Given the variety of data sources, methodologies and time span covered, a common estimated death toll is difficult to establish amongst actors.

Back in 2005, CRED published a [report](#) in which the estimated excess deaths in Darfur and Eastern Chad was approximately 120,000 over 17 months from September 2003 to January 2005; out of which 35,000 were due to violence. We have now been working on providing an updated review of the mortality surveys conducted in Darfur in order to: 1) estimate excess deaths from September 2003 until December 2008, 2) discuss more thoroughly the causes of death and patterns of mortality across time and space and 3) assess the effect of displacement on mortality in Darfur.

This research relies on two major data sources: data on mortality, morbidity, nutrition and vaccination coverage collected through 107 surveys from the CE-DAT Database, as well as statistics from the Darfur Humanitarian profile series published by OCHA. The latter compiles data on key humanitarian issues including displacement on a monthly or quarterly basis.

### CE-DAT Surveys by year and available indicators, Darfur

Year	No. of surveys	No. of surveys including the following indicators			
		CMR	% violence related	% diarrhea related	U5MR
2003	5	0	0	0	5
2004	22	20	18	14	21
2005	41	41	33	33	38
2006	13	13	11	11	13
2007	15	15	6	6	15
2008	11	11	9	8	11
<b>Total</b>	<b>107</b>	<b>100</b>	<b>77</b>	<b>72</b>	<b>103</b>

We have performed regression for crude mortality rates, under 5 mortality rates, violence related and diarrhea related mortality rates. These are explained by the percentage of IDPs, the State and the period in which the survey was conducted.

CE-DAT is a global database on the human impact of conflicts and other complex humanitarian emergencies and serves as a unique source of health indicators for monitoring conflict-affected populations and for the production of trend analyses, impact briefings and policy recommendations

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### Centre for Research on the Epidemiology of Disasters

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## Darfur Research (Continued)

Looking at CMR over time, we can identify two distinct periods: 2004 during which CMR show a consistent decrease and the period from 2005 to 2008 when it stabilizes. The average CMR for the first period is 2.12 [1.58; 2.67], with 2.91 [1.85; 3.96] and 1.73 [1.19; 2.27] for the first and the second half of the year respectively. From 2005 to 2008, CMR shows an average range from 0.57 to 0.88 with no significant change over time. During 2004, mortality rates were 7 times higher than expected during peace time.

Overall, we estimate the excess mortality in Darfur to be approximately 300,000 (180,000-460,000) deaths from September 2003 to December 2008. The main cause of death is not violence but rather disease such as diarrhea, which accounted for 80% of the excess deaths. We have further identified significant differences between IDPs and residents. Displacement was correlated with higher diarrhea related mortality but with lower violence-related mortality. This finding suggests that IDP settings or camps are protected from attacks while the displaced are living in very vulnerable conditions and overcrowded settings where the risk of disease transmission is higher.

## APHES Course

From the 6th to the 17th of July, CRED hosted its annual summer course on Assessing Public Health in Complex Emergency Situations (APHES). Topics covered during the two weeks included: Rapid Health Assessments, Nutrition Surveys, Mortality Surveys, Sampling Techniques, Use of Qualitative Data, Surveillance, Data Management, Epi Info, and case studies (Darfur, Hurricane Katrina, Tamil Nadu, Palestine).

Students came from a range of humanitarian, public health and academic organizations, including Care International, Oxfam, International Medical Corps, MEDAIR, Médecins Sans Frontières, International Rescue Committee, UNICEF, Citizen's Disaster Response Centre, and the Universities of Delhi, Indonesia, Northumbria, and Stanford.

For more information, please visit the [APHES website](#)

## Technical Advisory Group (TAG) meeting

The annual CE-DAT TAG meeting will take place in Brussels on August 25th and 26th, 2009. The aim of the meeting is to strengthen and improve the quality and reliability of health survey data and its usability for the humanitarian community.

During the meeting, the following topics will be presented and discussed:

- Recent accomplishments of CE-DAT: Data entry, new website and upgraded query and visualization tools;
- Improving the transparency and quality of survey data: the CE-DAT completeness and quality checklist
- Analyzing CE-DAT data: tools and methods
- Applications for policy and programs
- User needs: requirements and gaps.

Participants of the meeting will include staff from Non Governmental Organizations, United Nation agencies, Academia and donor institutions.

If you are interested in attending the TAG meeting, or if you would like to receive more information on CE-DAT, please email [contact@cedat.org](mailto:contact@cedat.org)

## SMART meeting, London

Two members of the CE-DAT team attended the SMART meeting in London, UK on July 9th and 10th, 2009. The meeting, hosted by ACF-Canada and the Global Nutrition Cluster, had the following objectives:

- review the outcomes of the Rome SMART meeting ('08) and outline the processes that have occurred to date.
- share version 2 of the Nutrition, Mortality, and Food Security/Context modules, as well as the revised related software - Emergency Nutrition Assessment (ENA of Nutri Survey).
- present and share the consolidated and standardized set of accompanying SMART training materials.
- introduce the SMART website, explain its possibilities and discuss future directions

For more information, please visit the [SMART website](#).

## CE-DAT and CRED News

In collaboration with the University of Delhi, CRED has recently carried out a nutritional survey focused on children under 5 in flood-affected populations of Uttar Pradesh, India.

CRED will shortly undertake field research in Zimbabwe to study the interaction between HIV and Cholera.

The EM-DAT International Disaster Database will be holding its Technical Advisory Group (TAG) meeting this fall. For more information, please email [contact@emdat.be](mailto:contact@emdat.be).

EM-DAT's 2008 Annual Disaster Statistical Review is available [here](#).

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