MALAWI

IPC ACUTE FOOD INSECURITY AUGUST 2020 ANALYSIS UPDATE

IPC ACUTE FOOD INSECURITY ANALYSIS NOVEMBER 2020 – MARCH 2021

Issued January 2021

CURRENT NOVEMBER - DECEMBER 2020 Phase 5 People in Catastrophe 2.55M Phase 4 **People in Emergency** 14% of the population analysed Phase 3 2,550,000 **People in Crisis** People facing high acute food insecurity Phase 2 6,183,000 (IPC Phase 3 or above) **People in Stressed** 8,945,000 Phase 1 IN NEED OF URGENT People in food **ACTION** security

PROJECTED JANUARY 2021 - MARCH 2021									
	Phase 5 0 People in Catastroph								
2.64M 15% of the population	Phase 4	133,000 People in Emergency							
analysed People facing high	Phase 3	2,509,000 People in Crisis							
acute food insecurity (IPC Phase 3 or above)	Phase 2	6,266,000 People in Stressed							
IN NEED OF URGENT ACTION	Phase 1	8,769,000 People in food security							

Overview

In the IPC Acute Food Insecurity analysis conducted for the period of November to December 2020, about 2.55 million people (14% of the analysed population) faced high levels of acute food insecurity (IPC Phase 3) and required urgent humanitarian action to reduce food gaps, protect and restore livelihoods and prevent acute malnutrition. This follows a new urban assessment carried out in the four cities of the country and an update of the rural assessment carried out in August 2020.

In the projection update, which aimed to reevaluate the assumptions that were used to classify areas for the projection period covering the period from January 2021 to March 2021, around 2.64 million people (15% of the analysed population) are projected to be facing high levels of acute food insecurity (IPC Phase 3 or 4). 6.27 million people are projected to be in Stressed (IPC Phase 2), while 8.77 million people are projected to not be facing any acute food insecurity (IPC Phase 1). All the analyzed cities (Lilongwe, Blantyre, Mzuzu and Zomba) and three rural districts of Nsanje, Neno and Balaka are projected to be in Crisis (IPC Phase 3). The remaining areas will likely be in Stressed (IPC Phase 2). Populations classified in Crisis (IPC Phase 3) include poor urban and rural households in the deficit-producing southern region, some parts of the northern, and central districts. These areas experienced floods and later, earlier than normal, tailing off rainfall, leading to localized production shortfalls, which exacerbated slow livelihood recovery from previous seasons and impacts of COVID-19 on remittances. The population in urban areas are more affected due to reduced income sources.

Key Drivers



Flooding

In northern Malawi, parts of Rumphi and Karonga districts experienced flooding and waterlogging that damaged crops.



Dry spells

In southern Malawi, Nsanje and Chikwawa districts, as well as parts of Phalombe, Balaka, Mwanza, Neno, Zomba, and Chiradzulu districts, had localized dry spells and experienced early cessation of rainfall, which resulted in localized below-average production.



COVID-19

Though there was no lockdown, the country has registered job losses due to COVID-19, especially affecting the informal labor market. Remittances into the country were significantly reduced.

November - December 2020





Key for the Map

IPC Acute Food Insecurity Phase Classification



Evidence Level

All analysis areas met Medium (**) Evidence Level requirements except for Blantyre, Kasungu, Lilongwe, Mchinji and Mwanza, which met High (***) Evidence Level requirements.



CURRENT SITUATION OVERVIEW (NOVEMBER - DECEMBER 2020)

The current period, November to December 2020, coincides with the start of Malawi's lean period, when food from people's own production is almost depleted and market dependency increases. The current analysis includes the projection analysis for rural areas that was conducted in August 2020 for the period October-March, along with a current analysis for four urban areas based on new outcome data.

About 2.55 million people (14% of the analysed population) faced Crisis acute food insecurity conditions (IPC Phase 3) and needed humanitarian support. Out of the total of 2.55 million facing high levels of acute food insecurity, approximately 2.03 million were in the rural areas and 518,000 were in the four urban cities. This population includes households from areas which experienced localized low levels of crop production, above-average food prices and significant loss of income due to the impact of COVID-19. The pandemic is expected to largely affect the urban poor households who faced Crisis (IPC Phase 3) conditions in this period.

The analysis showed that 18% of urban households were experiencing high levels of acute food insecurity (IPC Phase 3) in comparison to 14% in rural areas. Generally, market dependence and income loss as a result of the impact of COVID-19 has exacerbated vulnerability in urban areas of the country. The urban analysis showed that in the current period, Blantyre City, Mzuzu City and Zomba City all have 20% of their populations in Crisis (IPC Phase 3) in comparison with 15% in Lilongwe City. This is as a result of Lilongwe, the capital city of the country, showing slightly more progress in economic activity, considering improvements in the national COVID-19 situation and easing of restrictions.

Prior to the current period, food prices remained stable between August and September, before beginning to slightly increase in October. Maize prices are trending at levels slightly above five-year average prices, affecting the urban population more, as they mostly rely on purchases throughout the consumption period. With reduced income from self-employment activities and loss of jobs or small businesses due to the impact of COVID-19 in these urban areas, above-average maize prices have reduced financial access to food by these households.

National cereal stocks are currently still high following high production levels that saw maize production at 28% above the five-year average and 11.5% higher than last year. Cereal stocks are primarily being held by vendors and are being sold in both rural and urban markets as a result of delays in making maize purchases by national grain marketing and storage institutions delayed during the marketing season.

ASSUMPTIONS FOR THE PROJECTION UPDATE

- Most of the assumptions that were made in the previous projection still hold in the projection update. Despite the improvement in the country's COVID-19 situation, the general situation is yet to return to normal.
- The percentage of affected population has slightly increased for both rural and urban, mainly due to depletion of own stocks and higher prices on the market because of seasonal changes.
- Maize price projections for November are generally lower than the projected prices released in August 2020.
- Despite the decreasing number of COVID-19 cases and easing up of restrictions, the number of people, especially in urban areas, losing income as a result of the impact of COVID-19 is still high, since those people who were laid off remain unemployed.
- As we approach the lean season, more people in rural areas exhaust their food stocks and depend on markets, which have high commodity prices.
- Food commodity prices are expected to continue trending at levels lower than those of the corresponding previous year's while at the same time trending at levels higher than the five-year average.



PROJECTED SITUATION OVERVIEW (JANUARY - MARCH 2021)

The projection update shows that about 2.64 million people (15% of the analysed population) are likely facing high levels of acute food insecurity (IPC Phase 3 or above) between January and March 2021, and will need humanitarian assistance during this period, which is the peak of the lean season in Malawi. Out of the total 2.64 million people facing high acute food insecurity, over 2 million are in the rural areas and 610,000 are in the four urban cities. This indicates an increase from the previous projection that was carried out where a total of 2.62 million were projected to face high acute food insecurity, with approximately 2.03 million in the rural areas and 586,000 in the four urban cities. This population includes households from areas which experienced localized low levels of crop production, above-average food prices and significant income loss due to the impact of COVID-19. COVID-19 largely affected urban poor households who will continue facing Crisis (IPC Phase 3) conditions in the projected period.

The projection update shows an increase in the population projected to face high levels of acute food insecurity (IPC Phase 3 or above). These increases were seen in Mzuzu City and Zomba City. Mzuzu City's previous projection showed that 20% of the population (61,253 people) would be in Crisis (IPC Phase 3); this has increased to 25% (76,566 people) in the projection update. Zomba City's population likely facing high levels of acute food insecurity (IPC Phase 3 or above) increased from 20% to 25% in the projection update. Lilongwe City shows an increase in population likely facing Crisis (IPC Phase 3 from the current situation (15%), which is projected to reach 20% (273,145 people), a 5% increase from the current period, however, this is similar to the projection made in the previous analysis.

The projected affected population has slightly increased in urban areas while remaining the same in rural areas, as was projected in the previous analysis. The assumptions that were made during the previous analysis all held, aside from worsening coping indicators found in the cities of Mzuzu and Zomba. The projected impact of COVID-19 was also found to be less severe than envisaged, which was of having a potential country lockdown and a significant number of cases.

Cereal stocks at the household level will generally be average to above average throughout the country, due to above-average national cereal production. However, shortfalls will be experienced, especially in southern Malawi and some parts of central and northern Malawi. These households will likely experience some food gaps, especially at the peak of the lean season in January and February 2021.

Between January and March 2021, which represents the lean period, prices are expected to increase due to the increase in the number of households depleting their stocks and relying on purchases. Food prices, especially maize grain prices, remained stable between July and September, before beginning to increase in October. These prices were trending at levels below their corresponding previous year's. However, maize grain prices have been trending at levels slightly above the five-year average across the country. Maize prices are expected to continue trending above the five-year average by 10-25% throughout the projection period. This will likely affect the urban population more, as they mostly rely on purchases throughout the consumption period.

The COVID-19 situation has significantly improved as the number of new COVID-19 confirmed cases have been declining since September, with reported cases being generally under 10 cases per day, which is significantly lower than over 100 confirmed cases on average per day during the peak of the outbreak in July. This has prompted the government to re-open airports for international flights, re-open schools, and relax other restrictions, such as those on government office work, sporting events and other gatherings. This has resulted in a modest increase in trade and full resumption of business operations by the hospitality industry, although patronage is significantly lower than before the COVID-19 pandemic. The relaxation of restrictions has resulted in a general increase in economic activity, increasing income-earning opportunities for poor urban households dependent on labor, traded goods and petty trade, and small businesses and self-employment, compared to the peak of the COVID-19 situation in July. However, income-earning is still below pre-COVID levels due to reduced demand for goods and services. Some people who were laid off during this period still face reduced income levels as most of them remain unemployed. The food insecurity situation for these households will likely continue to deteriorate especially in urban areas

Although no major movement restrictions are currently in place, there is a possibility of a second wave in COVID-19 cases, which would impact labor opportunities in urban areas. For urban households without access to own production, above-average food prices, especially maize prices, will significantly impact food access. Across the four urban areas analysed, around 20% of households are projected to be in Crisis (IPC Phase 3), while 30% are expected to be in Stressed (IPC Phase 2).

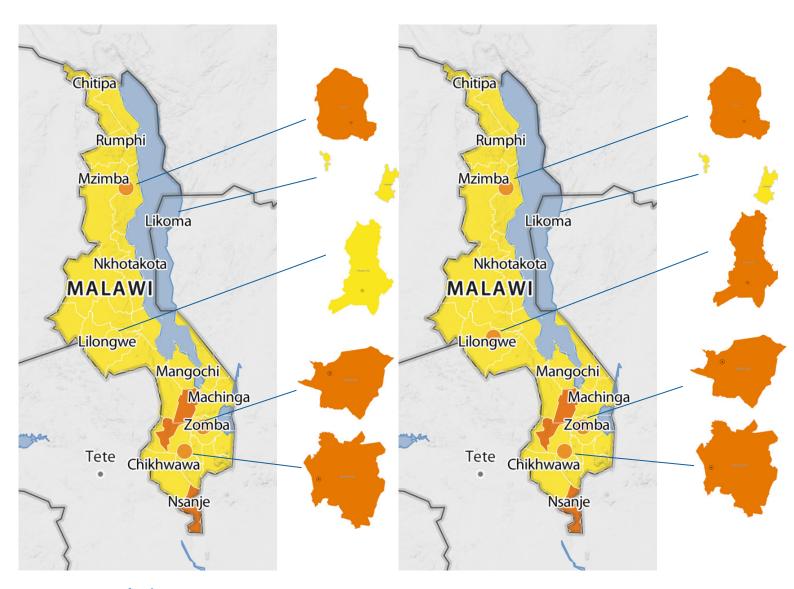
Key Assumptions for the projected period

- Labor Opportunities: Labor opportunities and wages for poorer households in urban areas will likely be significantly lower than average, due to the impact of COVID-19.
- Food Availability: Maize grain supplies are expected to remain normal to above normal across markets, in both surplus and deficit-producing areas.
- Informal Cross Border Trade: Informal cross border inflows, especially from Zambia and Mozambique, are expected to be at normal levels despite COVID-19 related border restrictions.
- Food Prices: Maize prices are expected to trend at levels 10%-20% above five-year average prices throughout the projection period.
- Seasonal Forecast: The Climate Prediction Centre (CPC) and the International Research Institute for Climate and Society (IRI) forecasts an above-average 2020/2021 rainfall season, which might result in flooding in southern areas of the country.
- Labor Migration: Labor migration to neighboring districts of Malawi as well as to Zambia and Mozambique is expected to be normal during the projection period, due to lack of internal movement restrictions in Malawi and given that informal border crossing points used by Malawians seeking work in Zambia and Mozambique are porous.
- COVID-19 Impact: Agricultural labor opportunities and rates will likely be below normal at the national level due to the impact of the COVID-19 pandemic.
- Remittances: Many Malawians receive remittances from relatives working in other countries, particularly in South Africa. Remittances are expected to slightly reduce as there has been a rise in Malawians returning home due to the harsh COVID-19 situation

CURRENT AND PROJECTED SITUATION MAPS

Current Situation: November - December 2020

Projected Situation: January - March 2021



Key for the Map

IPC Acute Food Insecurity Phase Classification

(mapped Phase represents highest severity affecting at least 20% of the population)



Evidence Level

All analysis areas met Medium (**) Evidence Level requirements except for Blantyre, Kasungu, Lilongwe, Mchinji and Mwanza, which met High (***) Evidence Level requirements.



CURRENT AND PROJECTED SITUATION POPULATION TABLES

Population table for the current period: November - December 2020

District	Total	Phase 1		Phase 2		Phase 3		Phase 4		Phase 5		Area	Phase 3+	
	population analysed	#people	%	#people	%	#people	%	#people	%	#people	%	Phase	#people	%
Balaka	389,024	155,610	40	155,610	40	77,805	20	0	0	0	0	3	77,805	20
Blantyre	451,220	203,049	45	180,488	40	67,683	15	0	0	0	0	2	67,683	15
Blantyre City	1,072,684	536,342	50	321,805	30	214,537	20	0	0	0	0	3	214,537	20
Chikhwawa	551,538	275,769	50	193,038	35	82,731	15	0	0	0	0	2	82,731	15
Chiradzulu	353,914	159,261	45	141,566	40	53,087	15	0	0	0	0	2	53,087	15
Chitipa	217,184	162,888	75	32,578	15	21,718	10	0	0	0	0	2	21,718	10
Dedza	799,584	439,771	55	239,875	30	119,938	15	0	0	0	0	2	119,938	15
Dowa	740,891	370,446	50	259,312	35	111,134	15	0	0	0	0	2	111,134	15
Karonga	303,419	197,222	65	60,684	20	45,513	15	0	0	0	0	2	45,513	15
Kasungu	726,235	399,429	55	217,871	30	108,935	15	0	0	0	0	2	108,935	15
Likoma	14,502	11,602	80	2,175	15	725	5	0	0	0	0	2	725	5
Lilongwe	1,637,583	818,792	50	655,033	40	163,758	10	0	0	0	0	2	163,758	10
Lilongwe City	1,365,724	819,434	60	341,431	25	204,859	15	0	0	0	0	2	204,859	15
Machinga	710,231	319,604	45	284,092	40	106,535	15	0	0	0	0	2	106,535	15
Mangochi	1,080,158	324,047	30	594,087	55	162,024	15	0	0	0	0	2	162,024	15
Mchinji	574,294	315,862	55	201,003	35	57,429	10	0	0	0	0	2	57,429	10
Mulanje	669,325	401,595	60	200,798	30	66,933	10	0	0	0	0	2	66,933	10
Mwanza	112,910	50,810	45	45,164	40	16,937	15	0	0	0	0	2	16,937	15
Mzimba	914,088	502,748	55	274,226	30	137,113	15	0	0	0	0	2	137,113	15
Mzuzu City	306,265	153,133	50	91,880	30	61,253	20	0	0	0	0	3	61,253	20
Neno	136,008	68,004	50	40,802	30	27,202	20	0	0	0	0	3	27,202	20
Nkhata bay	270,407	189,285	70	54,081	20	27,041	10	0	0	0	0	2	27,041	10
Nkhotakota	364,727	182,364	50	145,891	40	36,473	10	0	0	0	0	2	36,473	10
Nsanje	272,324	149,778	55	68,081	25	54,465	20	0	0	0	0	3	54,465	20
Ntcheu	638,367	351,102	55	223,428	35	63,837	10	0	0	0	0	2	63,837	10
Ntchisi	307,712	153,856	50	107,699	35	46,157	15	0	0	0	0	2	46,157	15
Phalombe	423,208	148,123	35	211,604	50	63,481	15	0	0	0	0	2	63,481	15
Rumphi	206,803	103,402	50	72,381	35	31,020	15	0	0	0	0	2	31,020	15
Salima	435,162	261,097	60	108,791	25	65,274	15	0	0	0	0	2	65,274	15
Thyolo	701,013	385,557	55	210,304	30	105,152	15	0	0	0	0	2	105,152	15
Zomba	746,724	261,353	35	373,362	50	112,009	15	0	0	0	0	2	112,009	15
Zomba City	184,724	73,890	40	73,890	40	36,945	20	0	0	0	0	3	36,945	20
Grand Total	17,677,952	8,945,225	51	6,183,030	35	2,549,703	14	0	0	0	0		2,549,703	14

Note: A population in Phase 3+ does not necessarily reflect the full population in need of urgent action. This is because some households may be in Phase 2 or even 1 but only because of receipt of assistance, and thus, they may be in need of continued action.

Population table for the projection period: January March 2021

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Ntchisi	307,712	153,856	50	107,699	35	46,157	15	0	0	0	0	2	46,157	15
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Rumphi	206,803	103,402	50	72,381	35	31,020	15	0	0	0	0	2	31,020	15
Salima	435,162	261,097	60	108,791	25	65,274	15	0	0	0	0	2	65,274	15
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Zomba City	184,724	64,653	35	73,890	40	36,945	20	9,236	5	0	0	3	46,181	25
Grand Total	17,677,952	8,768,789	50	6,266,629	35	2,509,092	14	133,448	1	0	0		2,642,538	15

Note: A population in Phase 3+ does not necessarily reflect the full population in need of urgent action. This is because some households may be in Phase 2 or even 1 but only because of receipt of assistance, and thus, they may be in need of continued action.



RECOMMENDATIONS FOR ACTION

Response Priorities

- Humanitarian response should commence in January as recommended by MVAC to save lives, reduce food consumption gaps and protect livelihoods for populations in Crisis (IPC Phase 3) or worse.
- Reduce food consumption gaps by improving access to food, through appropriate modalities for households in urban areas.
- Ensure continued price monitoring for staples and other commodities.
- Mount campaigns to promote dietary diversification among communities to improve poor consumption patterns elicited by MVAC assessments
- Promote resilience/climate-smart agricultural production.
- Promote or protect producers' post-harvest income with regulated purchases/prices from ADMARC where appropriate/feasible.



PROCESS AND METHODOLOGY

This analysis covers the period November 2020 to March 2021, in both rural areas (update of the projected analysis conducted August 2020) and four urban areas (Lilongwe city, Blantyre city, Zomba city, Mzuzu city). The MVAC Technical Working Group (TWG) conducted an Annual Assessment and Analysis from May to June 2020. This year, due to the COVID-19 pandemic, there was a huge challenge in getting the entire TWG to participate in the surveys because of restrictions by agencies. However, the government provided the necessary conditions to enable a small team to go to the field and conduct data collection with strict observation of Ministry of Health COVID-19 guidelines. The main surveys undertaken were: Baseline Survey for Likoma Island, HEA data collection, Rural Household food security survey and Urban food security survey. Other complementing surveys were done by FAO and WFP.

An update assessment and analysis was also conducted from October to November 2020, where HEA data collection was conducted for the rural assessment. This new evidence was used for the projection update analysis. A full new urban food security survey was undertaken for the urban assessment and used in the new urban IPC analysis.

The TWG then carried out an analysis of the data collected from the surveys to prepare the indicators for the IPC analysis. Overall data analysis was done using the IPC protocols based on the Technical Manual Version 3.0. The IPC Acute Food Insecurity analysis workshop was a hybrid including both virtual and face-to-face analysis.

Analysts were split into four regions: North, Central, East and South, with each district being independently analyzed but compared with the neighboring districts in the same region.

Upon completion of entries into the ISS, the technical consensus process involved each region presenting their outcomes and reviewed by the facilitators, the vetting of the outcome and the plenary discussion, before the team concluded the analysis.

The draft report was developed by the MVAC secretariat and forwarded to the Government for approval. However, to have buy-in, a validation process is conducted with the districts to discuss the outcome of the analysis before the Humanitarian Response Committee begins to deliberate the development of the Lean Season Integrated Response Programme.

Sources

Data sources: Household Food Security Survey, Agricultural Crop Production Estimates (APES), Market Survey, Price Projections (FEWSNET), Price data Ministry of Agriculture (Agricultural Market Information System-AMIS), mVAM data from WFP. National Statistics Office (population), District Food Security reports.

Limitations of the analysis

This year's process faced several challenges. Firstly, the funding for activities was minimal and lots of delays in confirming availability of funds. Secondly, the COVID-19 pandemic posed a challenge in undertaking full scale assessment in the field due to the restrictions as well as suspension of meetings/workshops. As a result, several agencies save for government participants could not participate in person at the analysis, posing a challenge for proper discussions during consensus building, coupled with Internet connectivity challenges for those who were joining virtually. The analysis met Medium (**) Evidence Level requirements.

The MVAC carried out the annual update in November to ascertain the food and nutrition security situation and the assumptions that were factored in the analysis. There was also an opportunity to review the impact of COVID-19 on food security at the household level, market functionality, transport and trade across districts/regions, the impact on household-level food requirements, price of staples, availability of labor opportunities, etc.

What is the IPC and IPC Acute Food Insecurity?

The IPC is a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. The IPC consists of four mutually reinforcing functions, each with a set of specific protocols (tools and procedures). The core IPC parameters include consensus building, convergence of evidence, accountability, transparency and comparability. The IPC analysis aims at informing emergency response as well as medium and long-term food security policy and programming.

For the IPC, Acute Food Insecurity is defined as any manifestation of food insecurity found in a specified area at a specific point in time of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. It is highly susceptible to change and can occur and manifest in a population within a short amount of time, as a result of sudden changes or shocks that negatively impact on the determinants of food insecurity.

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This analysis has been conducted under the patronage of the MVAC (e.g. Ministry of Agriculture). It has benefited from the technical and financial support of FAO / IPC GSU for the analysis and USAID for data collection.

Classification of food insecurity and malnutrition was conducted using the IPC protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-JRC , FAO, FEWSNET, Global Food Security Cluster, Global Nutrition Cluster, IGAD, Oxfam, PROGRESAN-SICA, SADC, Save the Children, UNICEF and WFP.

IPC Analysis Partners:







