IPC
Integrated Food Security **P**hase **C**lassification
Evidence and Standards for Better Food Security and Nutrition Decisions

MOZAMBIQUE

OVER 2.9 MILLION PEOPLE IN RURAL AND URBAN AREAS OF MOZAMBIQUE FACE HIGH LEVELS OF ACUTE FOOD INSECURITY DURING THE LEAN SEASON

IPC ACUTE FOOD INSECURITY ANALYSIS
OCTOBER 2020 - SEPTEMBER 2021

Issued January 2021

CURRENT: OCTOBER - DECEMBER 2020		
2.7M 15% of the analysed population	Phase 5	0 Catatrophe
	Phase 4	**306,000 Emergency**
People facing high levels of acute food insecurity (IPC Phase 3 or above)	Phase 3	**2,369,000 Crisis**
	Phase 2	**8,773,000 Stressed**
REQUIRING URGENT ACTION	Phase 1	**6,696,000 Food security**

PROJ 1: JANUARY - MARCH 2021		
2.9M 16% of the analysed population	Phase 5	0 Catastrophe
	Phase 4	**265,000 Emergency**
People facing high levels of acute food insecurity (IPC Phase 3 or above)	Phase 3	**2,649,000 Crisis**
	Phase 2	**8,407,000 Stressed**
REQUIRING URGENT ACTION	Phase 1	**6,822,000 Food security**

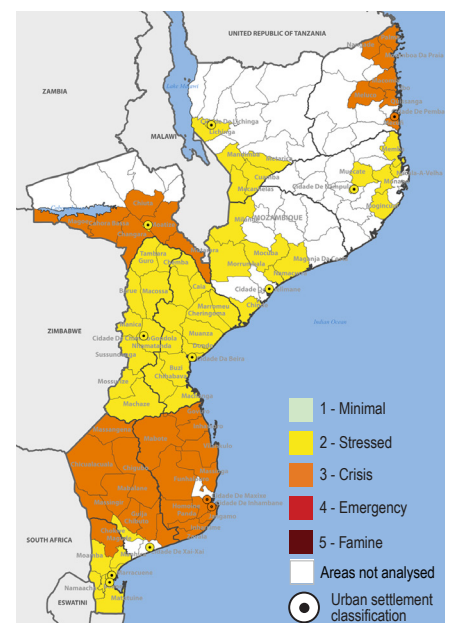| PROJ 2: APRIL – SEPTEMBER 2021		
1.7M 9% of the analysed population	Phase 5	0 Catastrophe
	Phase 4	**227,000 Emergency**
People facing high levels of acute food insecurity (IPC Phase 3 or above)	Phase 3	**1,424,000 Crisis**
	Phase 2	**8,254,000 Stressed**
REQUIRING URGENT ACTION	Phase 1	**8,238,000 Food security**

Overview

2.7 million people faced high levels of acute food insecurity (IPC Phase 3 or above) in rural (approx. 1.9 million) and urban (0.8 million) areas across the country between October and December 2020. The number of people facing high acute food insecurity (IPC Phase 3 or above) is estimated to increase to 2.9 million people in rural (approx. 2.1 million) and urban areas across the country (0.8 million) between January and March 2020.
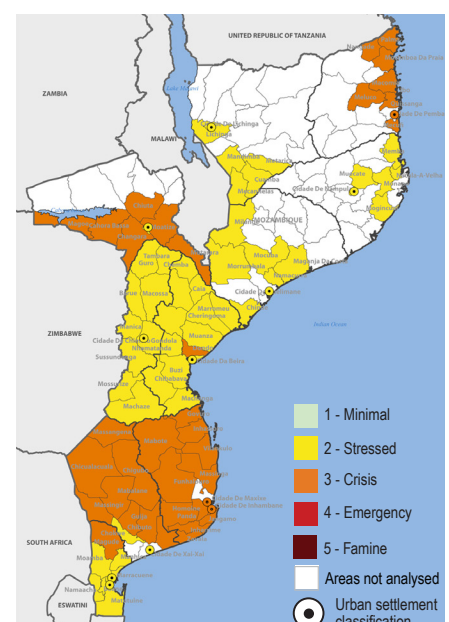
From October to December 2020, the south-eastern districts of Cabo Delgado province, southern Tete province and most of the districts of Gaza and Inhambane provinces were classified in Crisis (IPC Phase 3), while the rest of the districts were classified in Stressed (IPC Phase 2). At the peak of the January to March 2021 lean season, all previous districts are likely to remain in Crisis (IPC Phase 3) and Dondo district in Sofala province is also expected to move to IPC Phase 3. The situation is expected to improve between April and September 2021, with 1.7 million people likely to face high levels of acute food insecurity (IPC Phase 3 or above). This projected improvement is due to rural households having access to food from their own production (current harvest), food prices being stable with a tendency to reduce and the impacts of COVID-19 being minimal in rural areas.

Urban and rural areas have a very similar prevalence of people in the IPC Phase 3 or above (14.6% and 14.7% respectively). The main factors leading to the increase of people in the situation of high acute food insecurity (IPC Phase 3 or above) from January to March 2021 are armed conflict, drought and the impact of the pandemic on economic activity.

Key Drivers

Conflict
The intensification of armed conflict in the north and centre of the country, especially in the provinces of Cabo Delgado, Sofala and Manica, has led to the displacement of people and caused the loss of livelihoods. Farmers lost access to their agricultural land for cultivation and harvest at the right time, with a similar effect on livestock and other sectors. Overall, access to conflict areas has remained limited during the current period and will likely remain the same during the projection periods.
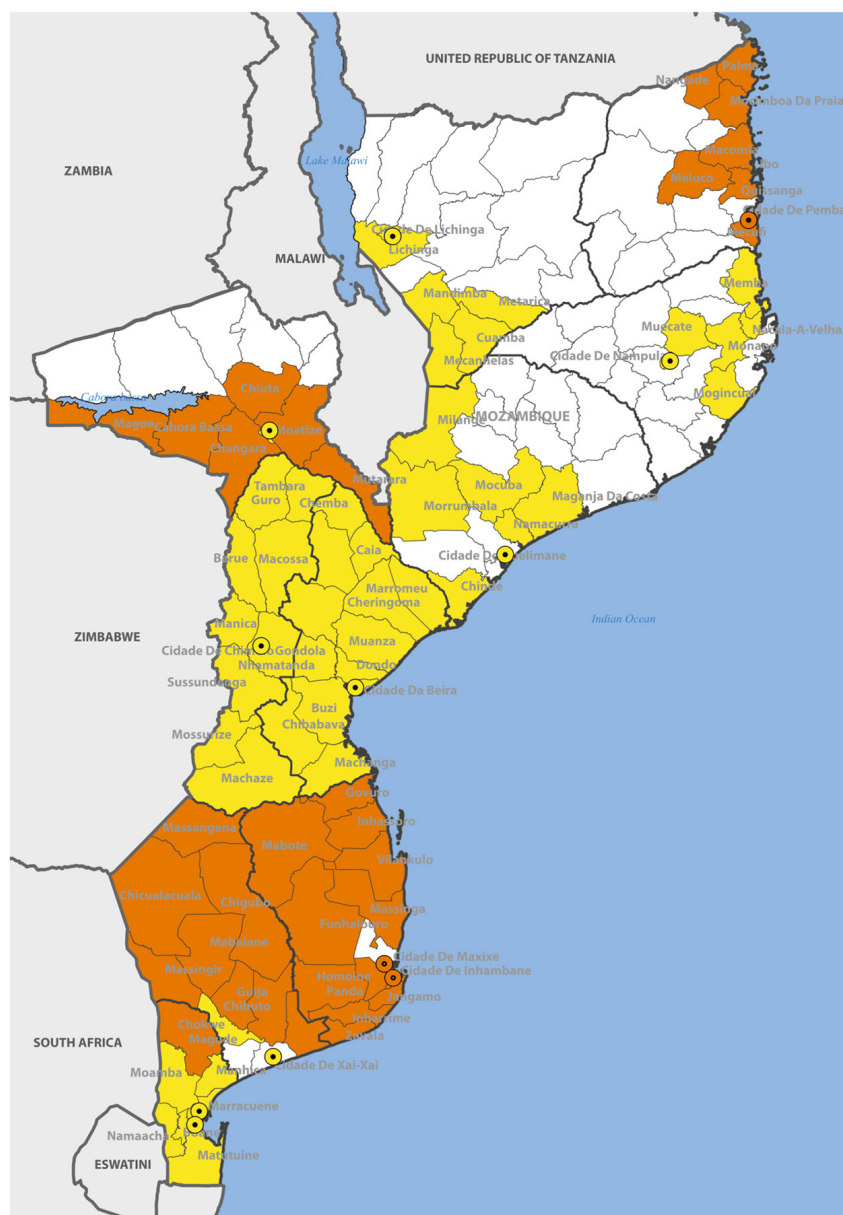
Drought
The drought, for the third consecutive year, was mainly in the south of the country, southern Tete province and parts of Manica and Sofala provinces, which led to the depletion of food reserves, insufficient water for human consumption and livestock watering, rising food prices, and excessive consumption of wild food.

COVID-19
The consequences of the restrictions imposed by COVID-19 have resulted in a significant decline in daily wage opportunities and income of small traders, the decline in remittances affecting approximately 0.8 million people in the country's 12 major cities.

October - December 2020

1 - Minimal	
2 - Stressed	
3 - Crisis	
4 - Emergency	
5 - Famine	
Areas not analysed	
Urban settlement classification	

January - March 2021

1 - Minimal	
2 - Stressed	
3 - Crisis	
4 - Emergency	
5 - Famine	
Areas not analysed	
Urban settlement classification	

CURRENT MAP AND POPULATION TABLE (OCTOBER - DECEMBER 2020)

Key for the Map
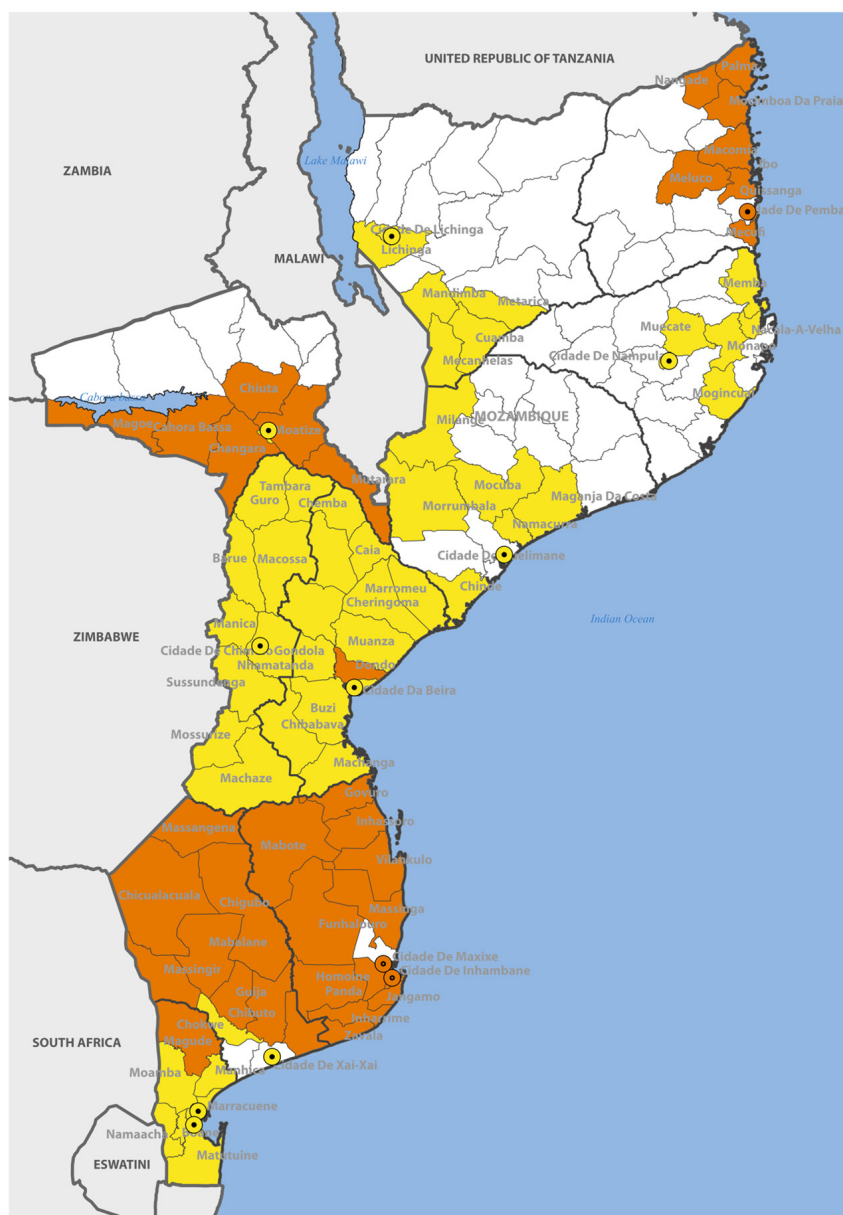**IPC Acute Food Insecurity Phase Classification**
(mapped Phase represents highest severity affecting at least 20% of the population)

- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Areas not analysed
- Urban settlement classification

Evidence Level
** Medium

Province	Total Population Analysed	Phase 1		Phase 2		Phase 3		Phase 4		Phase 5		Phase 3+	
		#people	%	#people	%	#people	%	#people	%	#people	%	#people	%
Cabo Delgado	2 268 535	629 285	28	1 059 978	47	438 727	19	140 545	6	0	0	579 272	25
Gaza	951 550	234 371	25	442 956	47	240 840	25	33 383	4	0	0	274 223	29
Inhambane	1 317 824	446 236	34	592 925	45	190 028	14	88 635	7	0	0	278 663	21
Manica	1 851 931	666 343	36	1 018 562	55	167 026	9	0	0	0	0	167 026	9
Maputo	1 908 078	757 002	40	879 648	46	271 429	14	0	0	0	0	271 429	14
Maputo City	1 080 277	248 464	23	648 166	60	183 647	17	0	0	0	0	183 647	17
Nampula	1 836 670	826 502	45	880 324	48	129 844	7	0	0	0	0	129 844	7
Niassa	1 109 536	455 925	41	499 291	45	110 954	10	43 367	4	0	0	154 320	14
Sofala	2 196 845	833 586	38	1 095 430	50	267 829	12	0	0	0	0	267 829	12
Tete	1 338 798	535 519	40	566 253	42	237 026	18	0	0	0	0	237 026	18
Zambezia	2 283 025	1 062 345	47	1 089 036	48	131 643	6	0	0	0	0	131 643	6
Total	**18 143 069**	**6 695 577**	**37**	**8 772 570**	**48**	**2 368 993**	**13**	**305 929**	**2**	**0**	**0**	**2 674 922**	**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.

FIRST PROJECTION MAP AND POPULATION TABLE (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)

- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Areas not analysed

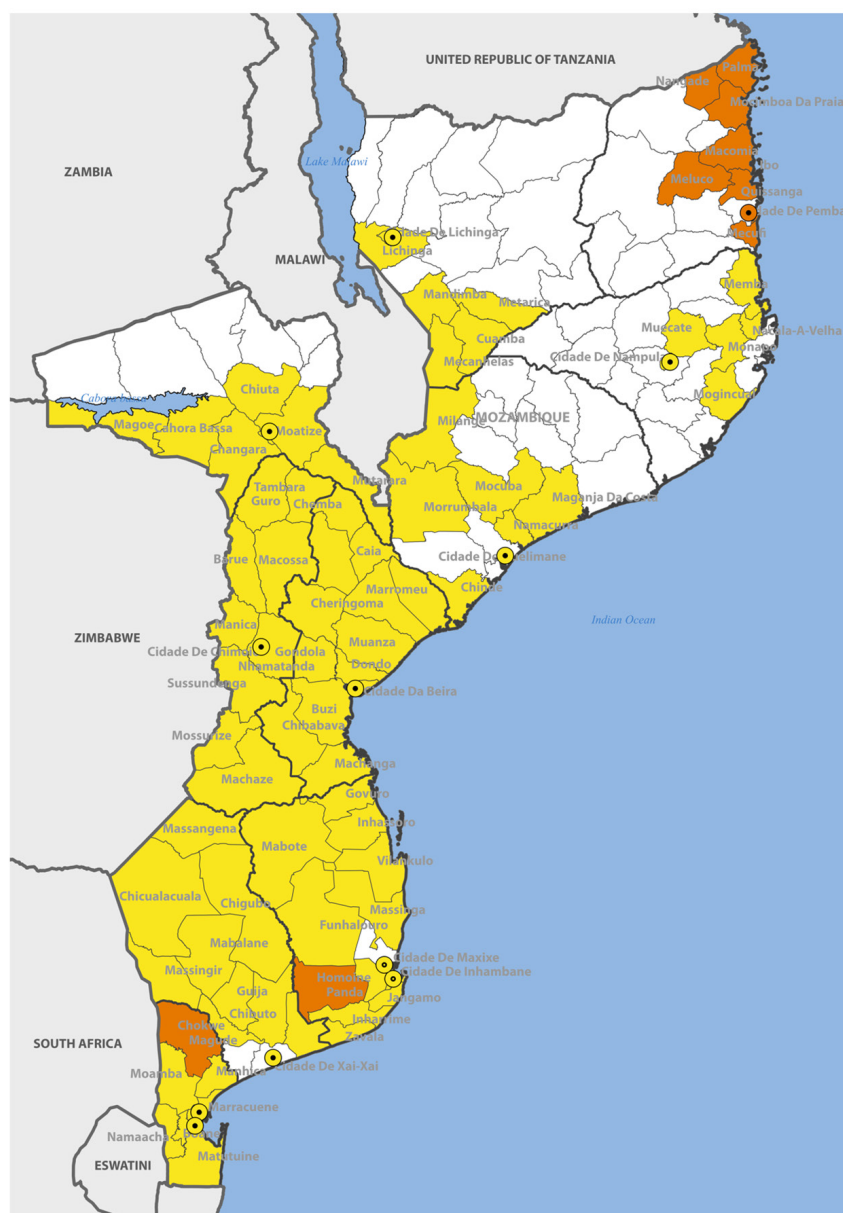⊙ Urban settlement classification

Evidence Level
** Medium

Province	Total Population Analysed	Phase 1		Phase 2		Phase 3		Phase 4		Phase 5		Phase 3+	
		#people	%	#people	%	#people	%	#people	%	#people	%	#people	%
Cabo Delgado	2 268 535	602 167	27	1 000 788	44	525 035	23	140 545	6	0	0	665 580	29
Gaza	951 550	234 371	25	442 956	47	240 840	25	33 383	4	0	0	274 223	29
Inhambane	1 317 824	446 236	34	592 925	45	231 268	18	47 394	4	0	0	278 663	22
Manica	1 851 931	666 343	36	1 018 562	55	167 026	9	0	0	0	0	167 026	9
Maputo	1 908 078	718 228	38	885 877	46	303 972	16	0	0	0	0	303 972	16
Maputo City	1 080 277	248 464	23	648 166	60	183 647	17	0	0	0	0	183 647	17
Nampula	1 836 670	826 502	45	880 324	48	129 844	7	0	0	0	0	129 844	7
Niassa	1 109 536	455 925	41	499 291	45	110 954	10	43 367	4	0	0	154 320	14
Sofala	2 196 845	819 632	37	1 085 761	49	291 452	13	0	0	0	0	291 452	13
Tete	1 338 798	741 811	55	359 961	27	237 026	18	0	0	0	0	237 026	18
Zambezia	2 283 025	1 062 345	47	992 377	43	228 303	10	0	0	0	0	228 303	10
Total	18 143 069	6 822 023	38	8 406 989	46	2 649 367	15	264 689	1	0	0	2 914 056	16

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.

SECOND PROJECTION MAP AND POPULATION TABLE (APRIL - SEPTEMBER 2021)

Key for the Map
IPC Acute Food Insecurity Phase Classification
(mapped Phase represents highest severity affecting at least 20% of the population)

- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Areas not analysed
- Urban settlement classification

Evidence Level
** Medium

Province	Total Population Analysed	Phase 1		Phase 2		Phase 3		Phase 4		Phase 5		Phase 3+	
		#people	%	#people	%	#people	%	#people	%	#people	%	#people	%
Cabo Delgado	2 268 535	592 140	26	907 414	40	542 127	24	226 854	10	0	0	768 981	34
Gaza	951 550	355 150	37	489 328	51	107 072	11	0	0	0	0	107 072	11
Inhambane	1 317 824	528 275	40	702 060	53	87 489	7	0	0	0	0	87 489	7
Manica	1 851 931	889 632	48	873 336	47	88 963	5	0	0	0	0	88 963	5
Maputo	1 908 078	838 360	44	944 046	49	125 672	7	0	0	0	0	125 672	7
Maputo City	1 080 277	432 111	40	540 139	50	108 028	10	0	0	0	0	108 028	10
Nampula	1 836 670	1 203 261	66	556 780	30	76 629	4	0	0	0	0	76 629	4
Niassa	1 109 536	716 124	65	337 935	30	55 477	5	0	0	0	0	55 477	5
Sofala	2 196 845	937 049	43	1 149 954	52	109 842	5	0	0	0	0	109 842	5
Tete	1 338 798	587 092	44	684 766	51	66 940	5	0	0	0	0	66 940	5
Zambezia	2 283 025	1 159 005	51	1 067 865	47	56 156	2	0	0	0	0	56 156	2
Total	18 143 069	8 238 200	45	8 253 620	45	1 424 395	8	226 854	1	0	0	1 651 249	9

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

- Provide immediate humanitarian assistance in areas where people facing Crisis or Emergency (IPC Phase 3 or 4) have been identified, to reduce food deficits, ensure better water and sanitation conditions, housing and COVID-19 mitigation measures, to strengthen household livelihoods;

- Identify and distribute areas of agricultural production and inputs;

- Introduce permanent monitoring of the situation of acute food insecurity and malnutrition in the most vulnerable provinces and districts;

- Promote preventive actions against the deterioration of the nutritional situation and increased risk of morbidity due to acute malnutrition in the most critical areas, such as those affected by the conflict and classified in IPC Phase 3 or 4;

- Carry out an Acute Food Insecurity assessment in person, to assess the results presented, and include the nutrition module.

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.

Contact for further Information

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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.

Acute Food Insecurity Phase name and description

Phase 1 None/Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe/ Famine
Households are able to meet essential food and non-food needs without engaging in atypical and unsustainable strategies to access food and income.	Households have minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in stress-coping strategies.	Households either: • have food consumption gaps that are reflected by high or above-usual acute malnutrition; **or** • are marginally able to meet minimum food needs but only by depleting essential livelihood assets or through crisis-coping strategies.	Households either: • have large food consumption gaps that are reflected in very high acute malnutrition and excess mortality; **or** • are able to mitigate large food consumption gaps but only by employing emergency livelihood strategies and asset liquidation	Households have an extreme lack of food and/or other basic needs even after full employment of coping strategies. Starvation, death, destitution and extremely critical acute malnutrition levels are evident. For famine classification, area needs to have extreme critical levels of acute malnutrition and mortality.)

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