IPC Integrated Food Security Phase Classification
Evidence and Standards for Better Food Security and Nutrition Decisions

MOZAMBIQUE - MAPUTO AND MATOLA

MEASURES TO CONTAIN THE PANDEMIC REDUCE THE ECONOMIC ACTIVITY OF FAMILIES DEPENDENT ON THE INFORMAL SECTOR, NEGATIVELY AFFECTING THEIR FOOD SECURITY.

The results of this Acute Food Insecurity pilot study indicate that for the current period (June - September 2020), about 55% of the population in the cities of Maputo and Matola is food secure (IPC Phase 1), 30% in Stress (IPC Phase 2) and 15% in Crisis (IPC Phase 3), i.e. about 365,000 people need humanitarian assistance to reduce food consumption deficiencies.

The current restriction measures against COVID-19 since March/April 2020 will affect the main economic activities in the cities of Maputo and Matola in different ways, but especially casual labour. Other factors negatively affecting household food security are reduced remittances and restrictions on informal imports of goods from South Africa, as well as commodity prices that are above the historical average.
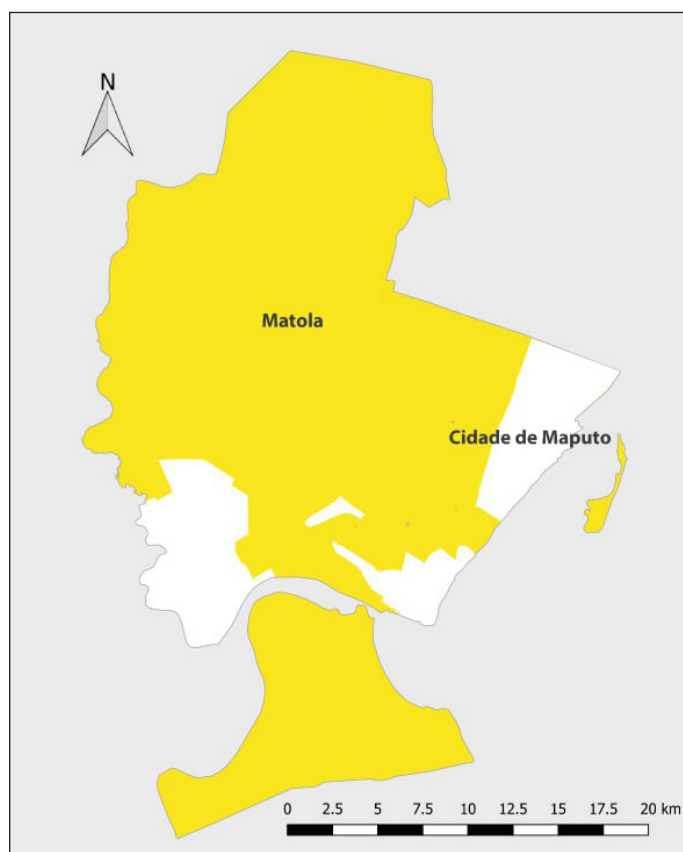
CURRENT SITUATION (JUNE - SEPTEMBER 2020)

0.4M

15% of the population analysed

People facing high acute food insecurity (IPC Phase 3)

IN NEED OF URGENT ACTION

Phase 5	000,000	Catastrophe
Phase 4	000,000	Emergency
Phase 3	365,000	Crisis
Phase 2	729,000	Stressed
Phase 1	1,336,000	Food Security

Current situation map (June - September 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

Current situation population table (June - September 2020)

Province	City	Total popuation analysed	Phase 1 #people	Phase 1 %	Phase 2 #people	Phase 2 %	Phase 3 #people	Phase 3 %	Phase 4 #people	Phase 4 %	Phase 5 #people	Phase 5 %	Área Fase	Phase 3+ #people	Phase 3+ %
Maputo e Matola	Cities of Maputo and Matola	2,429,263	1,336,095	55	728,779	30	364,389	15	000,000	00	000,000	00	2	364,389	15
	Total	2,429,263	1,336,095	55	728,779	30	364,389	15	000,000	00	000,000	00		364,389	15

OVERVIEW OF THE CURRENT SITUATION (JUNE - SEPTEMBER 2020)

Factors contributing to the current food insecurity situation:

- Continuation of current restrictive measures against COVID-19 since March/April 2020. These measures will affect the main economic activities in the cities of Maputo and Matola, as described below.

  • Casual labour is one of the main sources of income for approximately 20% of households and will be reduced due to the limitations imposed on the movement of people on public roads;

  • Informal trade is one of the main sources of income for about 15% of households that will be drastically affected, mainly those who do not have stalls or shops and use the sidewalks and market floor to sell, which will be banned from selling their products. Even those who have stalls in markets will likely be affected, as they will have difficulties in buying products for resale, as there is no informal trade with South Africa, aggravated by the significant decline in internal trade, between micro and small informal traders;

  • Domestic employment is one of the main sources of income for approximately 10% of households. Those who can live in the workplace will continue to work and a share of the rest will lose their job. Therefore, for domestic workers who are not formally accredited workers, it is believed that few will continue to receive wages when they are dismissed;

  • Formal employment is one of the main sources of income for about 45% of the households that will also be affected, although with less severity. It is believed that some of these will lose their jobs and even if they receive compensation, they will have difficulties in the months following dismissal, because they have limited savings and there are increased prices. Some of those with formal employment may have their wages reduced;

  • Producing and selling food crops is also one of the main sources of income for approximately 10% of households, which will be partially affected, since agricultural production activity will be able to continue, but through direct sale to the customer in the field. Even if income is affected, it is expected that these households will be able to consume their agricultural products, alleviating their food insecurity despite poor food diversification;

  • Civil construction is one of the main sources of income for about 8% of households that will be significantly affected, especially those who do not have formal contracts, given that there will be practically no work to hire these informal workers. However, as this group receives a reasonable income, it is believed that they will have some savings that can resort to in the following period.

- Price of the main foods consumed by the poorest has remained stable or decreased slightly since April. However, in the case of rice and corn, in May it was about 40% above the historical average.

- Remittances from South Africa decreased as more than 23,000 people left South Africa at the end of March 2020;

- A decrease in the movement of people and an increase in essential expenses, resulting from the effective COVID-19 contagion and the uncertainty of the future of the pandemic.

- Agricultural production according to the Maputo DPA grew by 0.2% compared to the previous year.

RECOMMENDATIONS FOR ACTION

- Humanitarian assistance to minimise the difficulties of access to food for the 365,000 people in Crisis (IPC Phase 3);

- Humanitarian assistance plans should consider the analyses made for the different groups of livelihoods, with special attention to those dependent on casual labour informal trade and domestic employees. Attention should also be given to labour inspectors who depend on casual work such as: selling agricultural products, construction and small businesses, as well as to formal workers who may lose their jobs or have a decrease in wages as required by law;

- Humanitarian assistance should consider the most effective ways to mitigate the difficulties of access to food, analysing both the forms of delivery that do not increase exposure to contagion, as well as the types of goods to be delivered (e.g. food, money, agricultural inputs among others);

- Interventions should also consider the survival strategies that Phase 3 households tend to implement, especially those that may worsen food insecurity and spread the virus, such as violence, migration and illegal activities;

- Priority should be given to monitoring the nutrition situation of children in health centres, including product prices, using various means, telephone, emails, etc;

- Plans should be made to apply this type of analysis in other provinces of the country, in urban and rural areas.

PROCESS AND METHODOLOGY

Usually, SETSAN and partners would collect primary and updated information at household level, but this has not been possible due to measures to prevent the spread of COVID-19. Thus, the study used historical data and current available and relevant secondary data on Acute Food Insecurity in the cities of Maputo and Matola for the period 2016 to 2020, namely:

• Food Insecurity and Nutrition studies conducted by SETSAN in 2016 and 2018 in the cities of Maputo and Matola using population proportional random sampling (PPS) including quantitative interviews of about 476 and 826 households respectively, which provided information on consumption, survival strategies, stress and livelihoods of households;

• Preliminary results of round 1 and 2 of mVAM (mobile vulnerability assessment and mapping) conducted by PMA in the city of Matola in October 2019 and February 2020, in order to obtain information on consumption and survival strategies;

• Prices of the Agricultural Markets Information System (SIMA), which provided information on both historical and current prices of basic food products in Maputo and Matola markets..

In order to identify the areas and groups to be assessed, the characteristics of Food Insecurity and Nutrition within the cities of Maputo and Matola, SAN monitoring data conducted by SETSAN in 2016 and 2018 were exhaustively analysed, where statistics showed that:

• There is no statistically significant difference between households in Maputo and Matola cities when analysed in disaggregated neighbourhood groups as a proportion of households that depend on informal income sources and subjective classification of vulnerability to acute food insecurity (excluding Polana Cimento and Coop neighborhoods);

• There is a statistically significant difference between households in Maputo and Matola cities when analysed in groups disaggregated into livelihoods of households with access to formal sources of income (formal jobs) and those with informal sources of income (earning and informal trade).

In this context, the analysis of the situation of Acute Food Insecurity in the neighbourhoods of the two cities was made on the basis of households' livelihoods to estimate the population in Acute Food Insecurity in the current period (June - September 2020).

The neighbourhoods of the two cities were considered as a single area of analysis, from which neighbourhoods such as Coop, Polana Cimento, Matola A Costa do Sol and others considered to be wealthy were excluded.

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

António Pacheco Dias Lima

Director of Food and Nutrition Security Information Services SETSAN/MADER
pachecoleo69@yahoo.com.br

IPC Global Support Unit
www.ipcinfo.org

This analysis has been conducted under the patronage of SETSAN. It has benefited from the technical and financial support of the IPC GSU.

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 Stress	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.)

IPC Analysis Partners: