prompting the lean season to start a month earlier than usual in northern, central-eastern and south-eastern provinces (FAO and FAO-GIEWS, September 2019).

**Economic shocks**

Maize flour prices remained high in many markets because of low production levels over the last five growing seasons and limited availability in local markets, particularly in Kasai. This was exacerbated in south-eastern areas by the dire shortage of maize in the main supplying countries, including Zambia and Zimbabwe, and by weak local currency (FEWS NET December 2019).

**NUTRITION OVERVIEW**

In 2019, an estimated 3.4 million children were wasted, 1.1 million of them severely so, requiring urgent treatment for acute malnutrition (HNO, December 2019). The GAM prevalence was ‘medium’ at 6.5 percent, reaching ‘high’ levels in Nord Ubangi, Ituri, Kwilu, Tshuapa and Haut Uélé. The national prevalence of stunting was ‘very high’ at 41.8 percent and exceeded 50 percent in Kwango, Kasai Central and Sankuru (MICS, 2017–18).

Child feeding practices were extremely poor. Overall just 8 percent of 6–23 month-olds consumed the minimum acceptable diet required for their growth and development (MICS, 2017–18).

Anaemia levels were of ‘severe’ public health significance for both children under 5 and women of reproductive age (WHO, 2016). More than two thirds of households did not have access to an improved source of water within a 30-minute round trip from home (UNICEF and WHO, 2017).

Displaced people were often denied access to health care, safe drinking water and adequate sanitation. Immunization schedules for children were interrupted by violence, while attacks on health providers and centres prevented people from receiving treatment (WHO, April 2019).

The country is grappling with the outbreak of many diseases. Besides the world’s second biggest ever Ebola outbreak in North Kivu, South Kivu and Ituri provinces, it had one of the world’s most severe measles epidemics with a total of 311,471 suspected cases in 2019 (WHO, January 2020). Over 30,300 cases of cholera were reported in 23 out of 26 provinces by the end of 2019 (WHO, January 2020).

**Nutrition status of refugees**

Nutrition surveys conducted in three refugee populations in 2019 found under-5 acute malnutrition rates of 5 percent in Burundian camps, 4–6.5 percent in South Sudanese and 5–12 percent in Central African. Chronic malnutrition and anaemia are serious public health problems in all camps, ranging from 45–66 percent. Breastfeeding practices are concerning especially in South Sudanese camps (SENS, 2019).