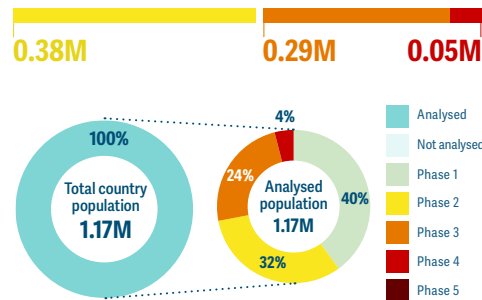


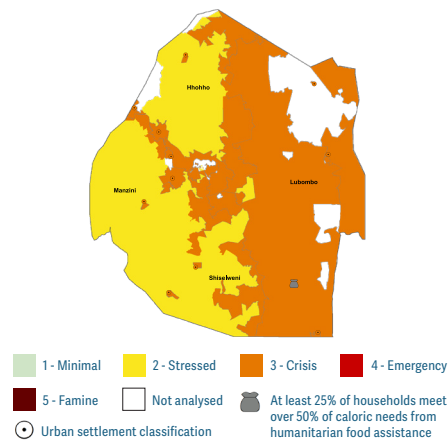
Eswatini

ACUTE FOOD INSECURITY PEAK 2022

0.34M people or **29%** of the analysed population in IPC Phase 3 or above, December 2021–March 2022



IPC acute food insecurity situation, December 2021–March 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Eswatini IPC TWG, January 2022.

Food crisis overview

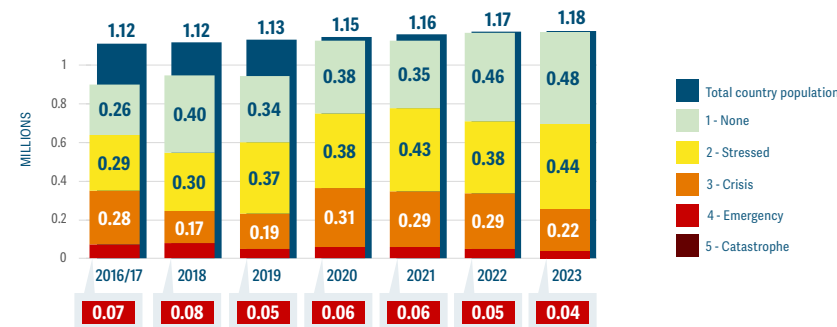
In the December 2021–March 2022 lean season, acute food insecurity was at similar levels to that of the 2020–21 lean season when COVID-19 began to impact household-level food security.

Of the 336 000 people projected to face Crisis or worse (IPC Phase 3 or above), around 79 percent were in rural and 21 percent in urban areas. Eight out of 11 livelihood zones were classified in Crisis (IPC Phase 3). In the Lubombo Plateau, the population in Emergency (IPC Phase 4) reached 10 percent (IPC, January 2022). In June–September 2022, the food security situation improved due to the impact of favourable crop production on rural households' food supplies and incomes, but seasonal deteriorations were expected from October 2022 as many households had depleted food stocks at the start of the lean period, and faced continual fuel and food price shocks.

Slight improvement projected for 2023

The situation during the 2022–23 lean season was projected to be better than the 2021–22 lean season, with 22 percent of the populations in IPC Phase 3 or above

Numbers of people by phase of acute food insecurity, 2017–2023



Source: Eswatini IPC TWG.

compared with 29 percent of the previous year (IPC, July 2021 and July 2022).

Acute food insecurity since 2016

The country has been included as a major food crisis in all seven editions of the GRFC, with at least 25 percent of its population in IPC Phase 3 or above during the peak period each year. Acute food insecurity levels reached 39 percent in 2016–17 as a result of El Niño-related drought (IPC, April 2016), and reached 32 percent in October 2020–March 2021 due to COVID-19-related income losses and the inclusion of urban as well as rural households in the analysis.

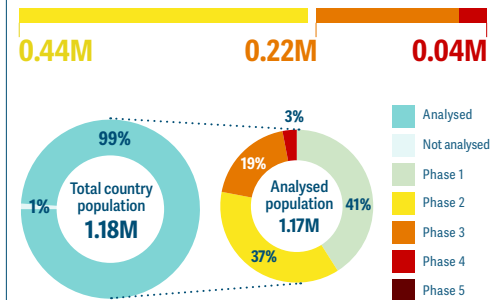
This, as well as the impact of irregular rains and dry spells, contributed to the worsening of food insecurity in 2020 relative to 2019 (IPC, July 2019 and August 2020).

Drivers of the crisis, 2022–23

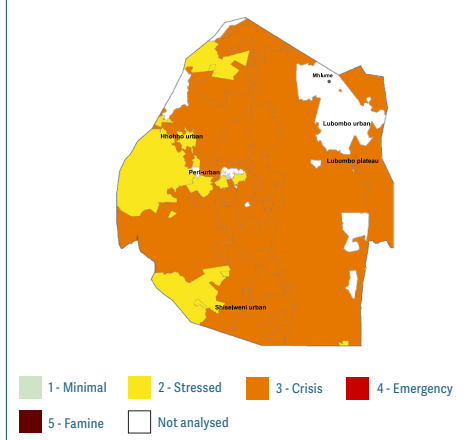
Economic shocks An anticipated fourth wave of the COVID-19 pandemic was factored into the early 2022 acute food insecurity projection. Renewed restrictions were expected to limit livelihood activities, especially in peri-urban and urban populations,

ACUTE FOOD INSECURITY PROJECTION 2023

0.26M people or **22%** of the analysed population in IPC Phase 3 or above, October 2022–March 2023



Projected IPC acute food insecurity situation, October 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Eswatini IPC TWG, July 2022.

and prevent many households from pursuing agricultural activities at the start of the rainfall season. This was expected to both reduce household income and curb seasonal food production. An anticipated slowdown in business operations in South Africa, and consequent reduction in the supply of goods, was expected to inflate prices in Eswatini, which relies on its neighbour for imports (IPC, January 2022).

By late 2021, levels of unemployment had reached 33.5 percent – up from 23.5 percent in 2020 – largely as a result of the protracted impacts of the pandemic. In peri-urban areas, 41 percent of heads of household were unemployed, with Shiselweni urban reporting the highest percentage (68.3 percent). Among rural areas, the Lubombo Plateau experienced the highest percentage of loss of employment (37 percent), as cross-border workers lost jobs on farms in South Africa (IPC, July 2022).

According to WFP, the price of maize reached a five-year high in May 2022, before stabilizing and then rising very sharply from October 2022 (WFP VAM, accessed March 2023), when they reached new record-high levels. These high prices were mainly driven by the country's high dependence on imports and elevated grain prices in South Africa, the main source of imports for the country. High global energy prices and currency weakness have inflated operational costs along the food value chain, further contributing to the rising prices. Along with a forecast deceleration in economic growth in 2023, with adverse implications for employment and incomes, the high food prices are expected to diminish households' purchasing power, stressing food insecurity conditions in 2023 (FAO, February 2023).

NUTRITION



Despite high levels of acute food insecurity, the level of child suffering from wasting is low in Eswatini. However, there is a high national prevalence of children with stunting at 26.3 percent (considered 'high' by WHO thresholds), rising to 28 percent in Shiselweni (E-VAC, 2019). The highest stunting levels are reportedly among children aged 18–23 months (35 percent) (UNICEF, 2021).

Eswatini has a high HIV prevalence, with 26 percent of the adult population infected and 59 percent of children having lost parents to HIV/AIDS-related death. Women are disproportionately affected (35 percent), and this impacts care practices, including feeding, with concomitant effects on children's nutritional status. However, the number of people newly infected with HIV decreased from 14 000 in 2010 to 4 800 in 2020, a 64 percent decline (UNAIDS, February 2022).

Drivers of undernutrition



Food insecurity and lack of access to healthy diets Inadequate food consumption in terms of quantity and variety leading to nutrient-intake deficits is a significant contributing factor to child undernutrition, with households living mainly on cereals, oils and vegetables.



Inadequate maternal and child-feeding practices Around 37 percent of children aged 6–23 months are fed a Minimum Acceptable Diet that meets both the recommended dietary diversity and frequency thresholds (UNICEF, 2020). Around 64 percent of infants under 6 months are exclusively breastfed (UNICEF, 2020). According to the latest available data, nearly 42.7 percent of children aged 6–59 months were anaemic, indicating a severe public health problem (UNICEF, 2019), and 30.7 percent of women of reproductive age (15–49 years) were anaemic (UNICEF, 2020), indicating a moderate public health problem (WHO, 2019).



Poor household environment As of 2020, around 71 percent of households at national level had access to basic drinking water services, but in rural areas, 37.6 percent were still using unimproved, limited service or surface water for drinking, and 50.6 percent had no access to handwashing facilities. Around 16 percent of rural households used unimproved sanitation or practise open defecation (UNICEF/WHO, 2020).