



**Regional Focus on the
Intergovernmental Authority On
Development (IGAD) Member States**

2019

**Global Report
on Food Crises**

JOINT ANALYSIS FOR BETTER DECISIONS

ACKNOWLEDGEMENTS

This publication focuses on the IGAD region and is a by-product of the third annual *Global Report on Food Crises* (GRFC 2019), which marked another major collaborative effort between agencies in the international humanitarian and development community to share their data, analysis, knowledge and expertise regarding people facing food crises.

Coordinated by Anne-Claire Mouillez, from the Food Security Information Network (FSIN), these publications would not have been possible without the dedication and contributions of numerous agencies and individuals.

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FOREWORD

This regional report on food crises is the first for the region and highlights the plight of millions of people experiencing acute levels of food insecurity in seven countries in the Intergovernmental Authority for Development (IGAD) region.

It serves as an important milestone towards delivering IGAD's commitment to fight acute hunger and malnutrition in the region.

Despite some impressive advances in the region – in terms of peace and security, economic growth, innovation and infrastructure – armed conflict and economic crises, as well as climate-induced disasters, continued to drive hunger and food insecurity across the region in 2018.

Food insecurity presents a major barrier to the development of the region and hampers sustainable growth for its people. In addition to satisfying people's nutritional needs, food security provides the basis upon which peace and security can prevail and economic growth emerge.

The report highlights the number of people who experienced acute food insecurity requiring urgent food, nutrition and livelihoods assistance across seven IGAD countries in 2018. It also elaborates on the key drivers of food insecurity, thus pointing the way towards solutions that can rebuild lives and livelihoods.

During the Extra-Ordinary General Assembly Meeting of IGAD held in Addis Ababa Ethiopia on 21 January 2017, the IGAD member states and implementing partners expressed as a priority the urgency for IGAD to develop a system for annually tracking communities in need of humanitarian assistance in the region.

With this report, IGAD, together with partners, has embarked on a journey to deliver on a promise to avail timely, reliable and meaningful information on people's access to food for the region.

Further action is still needed in this area, and in this spirit, I welcome additional efforts to bring focus in this area.

This report is the result of collaboration among partners involved in the Food Security Information Network, particularly those active in the IGAD region. On behalf of IGAD, I would like to convey profound gratitude to all who participated in the development of this report. It was a highly consultative and iterative process. Every institution and individual that shared their time, perspectives and expertise deserves recognition.

Ambassador, Eng. Mahboub Maalim
Executive Secretary, IGAD



Food and Agriculture
Organization of the
United Nations



SICA
Sistema de la Integración
Centroamericana

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World Food
Programme



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KEY FINDINGS

More than 113 million people across 53 countries experienced acute hunger requiring urgent food, nutrition and livelihoods assistance in 2018 (*Global Report on Food Crises 2019*). Around 27 million people – or 24 percent – lived in seven of the eight countries in Eastern Africa's regional economic community known as IGAD.

Updated projections of the peak 2019 food insecure populations, by country, indicate that food insecurity levels will likely be higher this year in South Sudan and the Sudan, remain stable in Ethiopia and Uganda, and be lower in Kenya and Somalia, in comparison to peak figures from 2018.

The worst-affected countries in the IGAD region

The worst food crises in the region in 2018 in terms of numbers of acutely food-insecure people were Ethiopia (8.1 million), the Sudan (6.2 million) and South Sudan (6.1 million). In terms of prevalence some 59 percent of South Sudan's population required urgent assistance to protect livelihoods, reduce food consumption gaps and malnutrition. More than one in five Somalis were acutely food insecure (22 percent).

Aggregate number of acutely food insecure has increased each year

The number of people in need of urgent action across the seven countries has increased each year since the GRFC launched in 2017. Following the 2016-17 drought the number increased sharply from almost 24 million in 2016 to almost 27 million in 2017. Although the situation improved slightly between 2017 and 2018 in Ethiopia, Kenya, Somalia and Uganda, thanks to more favourable weather and partial recovery for pastoralists and agro-pastoralists, very high numbers of acutely food-insecure people persisted in South Sudan, while the Sudan faced a significantly deteriorating economic crisis. As a result the aggregate number for the region failed to decrease.

Primary drivers of acute hunger in IGAD member states

Climate shocks, conflict and economic turbulence were the main drivers of food insecurity in the IGAD region in 2018. Adverse climate was the primary driver in Ethiopia, Kenya, Uganda and Djibouti where in total 11.9 million people were acutely food insecure. Prolonged dry conditions, and flash floods negatively affected pastoral and agro-pastoral livelihoods by damaging crop production, pasture, browse, as well as limiting water sources for both domestic and livestock usage.

Although also affected by climate shocks, conflict/insecurity was considered the primary driver in South Sudan and Somalia where in total nearly 8.8 million people could not meet daily food needs without assistance during the peak hunger period. Persistent insecurity disrupted livelihood activities, affected market functionality and limited physical access to markets.

Meanwhile the Sudan's economic crisis, which led to escalating food prices, sharp currency depreciation and fuel shortages, pushed 6.2 million people into acute food insecurity in 2018.

Figure 1 Climate adversity was the key driver of food insecurity in the IGAD area in 2018



Population on the 'cusp' of acute food insecurity

Approximately 20 million people were found to be in *Stressed* (IPC Phase 2) conditions in the Sudan, South Sudan, Somalia and Djibouti.¹ These populations were marginally food-insecure and likely to decline into *Crisis* (IPC Phase 3) or worse if confronted with any shocks, or if humanitarian support is withdrawn.

Updated outlook for 2019

As in 2018, below-average rains, conflict and economic crises continue to drive food security outcomes across the IGAD region in 2019. Ethiopia, the Sudan and South Sudan are expected to remain among the world's most severe food crises in terms of number of people affected.

The 2019 March-May long *Gu* rains were delayed, with analyses showing that rainfall levels through mid-April were among the driest on record in some areas. Resources are expected to decline rapidly during the dry season and below-average agricultural production is expected to push up food prices, causing food insecurity levels to peak in July-September.

Local insecurity and intercommunal violence will continue to cause displacement and undermine food availability and access in Ethiopia, Kenya's Arid and Semi-Arid Lands, Somalia, the Sudan and South Sudan.

With the exception of South Sudan and the Sudan, the food insecure populations in 2019 are projected to be stable or in decline compared to peak 2018 levels, which were heavily influenced by the residual effects of the severe 2016 and 2017 droughts on household livelihoods. Unlike in 2018, where peak needs occurred very early in the year, 2019 food insecurity is projected to peak across the Horn of Africa between June and August.

The way forward

Ending conflicts, empowering women, nourishing and educating children, improving rural infrastructure and reinforcing social safety nets are essential building blocks of resilience and stability.

Information and technology can capture changes in food security – especially in fragile countries and contexts – on a near real-time basis. Collecting and analysing data on vulnerable populations is vital to ensure a targeted and integrated response for multiple partners working in development and humanitarian spheres. Though this report shows that overall quality of data has improved, there are countries for which there are data gaps.

¹ Data on population in *Stressed* (IPC Phase 2) were not available for Ethiopia, Kenya, and Uganda.

Humanitarian assistance to the IGAD region has amounted to USD 4.5-5 billion each year between 2016 and 2018, representing 18-23 percent of global humanitarian assistance. Most of it – between 42 and 46 percent – was allocated to the food security and nutrition sectors.² Though this humanitarian assistance was vital for saving lives, additional investments in resilience building activities are required to provide households with a buffer against future shocks and stop the cycle of recurring food crises. Investments in conflict prevention and sustaining peace will save lives and livelihoods, reduce structural vulnerabilities and address the root causes of hunger. The findings of this report clearly demonstrate the need for simultaneous action across the humanitarian-development-peace nexus.

² Calculations elaborated on the basis of data extracted from OCHA Financial Tracking Service [consulted on 28 April 2019].

GLOBAL NETWORK AGAINST FOOD CRISES

The Global Network Against Food Crises was launched at the 2016 World Humanitarian Summit by the European Union, FAO and WFP with the objective of tackling the root causes of food crises through shared analysis and knowledge and strengthened coordination in evidence-based responses across the humanitarian development nexus.

The Global Network acknowledges the centrality of food and agri-food systems in preventing food crises and mitigating their impact, boosting recovery and reconstruction. It also acknowledges the need to understand links and coordinate policies and actions in relation to other complex dynamics and drivers of vulnerability, such as conflict and insecurity, climate change and demography.

It is a global platform that aims to shape food security and nutrition decision-making by establishing and consolidating partnerships at national, regional and global levels; sharing data and analyses; defining innovative approaches; monitoring progress towards better food security, pursuing evidence-based advocacy and coordination for supporting food and nutrition security in contexts at risk of food crises within a longer perspective of eradicating hunger and malnutrition by 2030.

These objectives are achieved via three work streams (i) analysis and information, (ii) strategic programming and (iii) high-level policy uptake, advocacy and coordination. The work stream on analysis is delivered by the Technical Working Group under the Food Security Information Network (FSIN), which produces the annual GRFC, the main information product of the GNAFC.

1. INTRODUCTION AND METHODS

WHY THIS REPORT?

The third edition of the *Global Report on Food Crises*, published in April 2019, contributes to humanitarian and development efforts to stem the rising number of people who cannot meet their daily food needs. It does this by presenting timely, consensus-based data on the severity, magnitude and drivers of food insecurity and malnutrition for 53 countries or territories in crisis situations with detailed analysis for the 27 gravest food crises.

This report is a by-product of the GRFC, focusing on the Intergovernmental Authority for Development (IGAD) region in East Africa (see box). The region, 60-70 percent of which is arid and semi-arid lands (ASALs) that receive less than 600 mm of rainfall annually, is one of the most food-insecure and vulnerable areas in the world.¹ Prolonged and widespread drought is a recurrent feature, aggravated by climate change, advancing desertification and ecological degradation. These harsh ecological circumstances contribute to severe hardships among affected communities, including displacement, poverty, persistent hunger and conflicts within and across boundaries in the region.

The needs of vulnerable populations and the actions required to protect and build their resilience are immense and beyond the capacity of any single institution. For example, the 2010-11 drought affected more than 13 million people in the Horn of Africa (HOA) region, with millions facing acute hunger at the peak of the crisis, particularly in Ethiopia, Kenya, and Somalia. Famine was declared in parts of Somalia. Additionally, the 2016-2017 drought and conflict brought severe levels of acute food insecurity to the region, including a famine declaration in two counties of South Sudan.

Agriculture (livestock and crop production) is the economic mainstay of the region, employing over 80 percent of the population,² but productivity is undermined by climate shocks, economic instability, persistent poverty and conflicts/insecurity. As a result, the number of people unable to meet their daily food and nutrition needs is rising.

Climate research predicts an increase in the frequency, severity and extent of extreme weather events in the region. When combined with political and economic instability as well as conflict and insecurity, climatic events devastate already vulnerable livelihoods and food and nutrition security, undermining development gains and eroding resilience to future shocks. This is particularly evident in countries or areas where government systems are unable to provide adequate support to those affected.

Humanitarian assistance to the IGAD region has amounted to USD 4.5-5 billion each year between 2016 and 2018, of which the main share – between 42 and 46 percent – was allocated to the food security and nutrition sectors.³

While humanitarian aid is crucial for saving lives and alleviating human suffering when a crisis occurs, it does not tackle the root causes of food crises. This special focus report on the IGAD countries seeks to contribute to efforts by IGAD and its member states to move away from reactive responses, towards a pro-active and sustainable development approach.

1 IGAD strategy, framework, vol. 1. January 2016.

2 IGAD strategy, framework, vol. 1. January 2016.

3 Calculations elaborated on the basis of data extracted from OCHA Financial Tracking Service [consulted on 28 April 2019].

STRUCTURE OF THE REPORT

The report is structured as follows:

Chapter 1 introduces the rationale of the report, its geographical coverage and describes the methodology.

Chapter 2 provides a regional overview of 2018 food crises including acute food insecurity population estimates, analysis on key drivers and factors contributing to food crises, and trend analysis. It also provides an overview of the nutritional status of the population in crises.

Chapter 3 presents country-by-country analyses of food insecurity and malnutrition in 2018 for seven countries in the region.

Chapter 4 provides an analysis of expected trends of food insecurity in 2019 across the seven countries, including updated information and estimates, when available.

ANALYSIS OF ACUTE FOOD INSECURITY

Food insecurity refers to the lack of secure access to sufficient amounts of safe and nutritious food for normal growth and development and an active and healthy life. For people to be food secure, food must *consistently* be *available* and *accessible* in sufficient quantities and diversity and households must be able to *utilize* (store, cook, prepare and share) the food in a way that has a positive nutritional impact.

Acute food insecurity is 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. These acute states are 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 and malnutrition.⁴

Country selection and data sources

All the eight IGAD countries fit the GRFC 2019's primary selection criteria for inclusion in the main table of the report because they required external food assistance in 2018 as assessed by FAO Global Information and Early Warning System (GIEWS). This means they had an exceptional shortfall in aggregate food production and

INTERGOVERNMENTAL AUTHORITY ON DEVELOPMENT (IGAD)



The **Intergovernmental Authority on Development (IGAD)** in Eastern Africa is a Regional Economic Community (REC) of eight countries: Djibouti, Eritrea, Ethiopia, Kenya, Somalia, South Sudan, the Sudan and Uganda.

It was created in 1996 to supersede the Intergovernmental Authority on Drought and Development (IGADD), which was founded in 1986 to mitigate the effects of the recurring severe droughts and other natural disasters that resulted in widespread famine, ecological degradation and economic hardship in the region, such as during the Great African Famine of 1982–84. Djibouti, Ethiopia, Kenya, Somalia, the Sudan and Uganda were the first members. Eritrea became the seventh member after attaining independence in 1993 and in 2011 South Sudan joined IGAD as the eighth member state.

The founding leaders of IGAD were motivated by a vision where the people of the region would develop a regional identity, live in peace and enjoy a safe environment, alleviating poverty through appropriate and effective sustainable development programmes. The IGAD Secretariat as the executive body of the Authority was given the mandate to achieve this goal.

IGAD's mission is to promote regional cooperation and integration to add value to member states' efforts to achieve peace, security and prosperity.

Source: IGAD Regional Strategy - the Framework, vol. 1, January 2016.

4 IPC, 2017.

Table 1 Ongoing IGAD initiatives that address root causes of food insecurity and malnutrition in the region

Initiative	Year established	Goal
IGAD Drought Disaster Resilience and Sustainability Initiative (IDDRSI)	2011	Achieve drought-disaster resilient communities, institutions and ecosystems in arid and semi-arid lands (ASALs) throughout the IGAD region by 2027.
IGAD Food Security Nutrition and Resilience Analysis Hub (IFRAH)	2018	Monitor food security, nutrition and resilience trends in the region and provide guidance on policies and actions to mitigate negative impacts of climate extremes. It works closely with the Conflict Early Warning and Response Mechanism (CEWARN) to provide a view of the vulnerabilities across the region.
Food Security and Nutrition Working Group (FSNWG)	2002	Coordinate better food and nutrition security, through information sharing, current and projected situation analyses, and strategic response analyses in East and Central Africa.

supplies or widespread lack of access to food or severe localized food insecurity. Though available nutrition data is reported, Eritrea was excluded from the full food security analysis due to lack of updated information and data, leaving seven countries.

These seven countries were selected for further analysis in the GRFC 2019 because of the seriousness of their food security and nutrition situation according to certain criteria agreed upon by GRFC partners and stakeholders.

In countries where the Government and food security stakeholders have adopted the Integrated Food Security Phase Classification (IPC) as the standard protocol for classifying the severity and magnitude of acute food insecurity, the number of people in IPC Phase 3 or above is reported. This is since populations in *Crisis* (IPC Phase 3), *Emergency* (IPC Phase 4) and *Catastrophe* (IPC Phase 5) are found to be those in need of urgent food, nutrition and livelihood assistance. Populations in *Stressed* (IPC Phase 2) require a different set of actions – usually disaster risk reduction and livelihoods protection interventions – and are also reported, when available, in Chapter 2. See Annexes 1 and 2 for more explanation of IPC and descriptions of the phases.

The five countries with Integrated Food Security Phase Classification (IPC) analyses (Kenya, Somalia, South Sudan, the Sudan and Uganda) satisfied the criteria that they either had at least 20 percent of the population or at least 1 million people in *Crisis* or worse (IPC Phase 3 or above) or any area classified in *Emergency* (IPC Phase 4).

In the absence of IPC analyses, other reliable sources were used. For Djibouti, estimates were derived from the May 2018 *Système de Suivi et Surveillance de Sécurité Alimentaire* (SSSA) which showed that 55 percent of

the rural population was moderately or severely food insecure. For Ethiopia the source was the Humanitarian Needs Overview 2019, February 2019, which showed that 8.1 million people were food insecure and in need of urgent assistance.

When more than one food insecurity figure was available for 2018, the report presents the highest number of – or peak – food-insecure people who were in urgent need of assistance during 2018. This allows for a direct comparison with peak figures from previous years.

Sources for the 2019 forecasts of acute food insecurity

The 2019 analysis presented in Chapter 4 is mainly extracted from the GRFC 2019, with April and July 2019 updates using the same sources included in this regional edition.

The sources for the outlook and projected trends for 2019 vary. They are based on IPC projections, FEWS NET's analyses and other reliable sources. FEWS NET's food assistance outlook briefs provide information on the projected severity and magnitude (using ranges) of acute food insecurity and indicate each country's food-insecure population in need of urgent action (IPC Phase 3 or above) based on a scenario development approach.

Consensus

All partners are in agreement with the figures presented in the report including the stated magnitude and severity of food insecurity.

ANALYSIS OF MALNUTRITION

Malnutrition includes undernutrition, micronutrient deficiencies, overweight and obesity. Undernutrition refers to the outcome of insufficient intake, and/or poor absorption and/or poor biological use of nutrients consumed. It includes being too short for one's age (stunted), dangerously thin for one's height (wasted), underweight for one's age and deficient in vitamins and minerals (micronutrient deficiencies).



Acute malnutrition

Acute malnutrition occurs when an individual is suffering from inadequate nutrient intake. It is characterized by extreme weight loss, and, in its severe form, can lead to death. The immediate cause of this severe nutritional restriction may be inadequate food intake or a recent bout of illness that hinders appropriate intake and absorption of nutrients. Household food insecurity plus other factors such as inappropriate childcare practices, limited access to safe drinking water and sanitation facilities, may lead to restricted dietary intake and frequent illness. Broader basic contributing factors include social, economic, political and environmental contexts, such as inadequate health services.⁵

Acute malnutrition in children can be measured by a low weight-for-height (WFZ), which is called wasting, a low mid-upper arm circumference (MUAC), and/or the presence of bilateral oedema. Moderate acute malnutrition (MAM) using the weight for height (WFZ) indicator is identified by WFZ measurements below -2 z scores and above -3 z scores of the reference population, and severe acute malnutrition (SAM) by WFZ below -3 z scores. Global acute malnutrition (GAM) reflects the total presence of both MAM and SAM in a population. Acute malnutrition rates depict the nutrition situation in the general population at a specific time: they can show marked seasonal patterns and can change quickly over time. In 2018, the World Health Organization (WHO) and UNICEF reviewed the prevalence ranges to re-classify population levels of wasting and stunting, and the terminology used to interpret them.⁶

Table 2 WHO severity index for prevalence of wasting in children aged 6-59 months

Previous prevalence ranges	Label	New prevalence ranges	Label
-	-	< 2.5%	Very low
<5 %	Acceptable	2.5 - < 5%	Low
5 - 9%	Poor	5 - < 10%	Medium
10 - 14%	Serious	10 - < 15%	High
≥ 15%	Critical	≥ 15%	Very high

Table 3 WHO severity index for prevalence of chronic malnutrition (stunting in children aged 0-59 months)

Previous prevalence ranges	Label	New prevalence ranges	Label
-	-	< 2.5%	Very low
<20%	Acceptable	2.5 - 10%	Low
20 - <30%	Poor	10 - < 20%	Medium
30 - < 40%	Serious	20 - <30%	High
>40%	Critical	≥ 30%	Very high



Chronic malnutrition

Malnutrition measured by stunting is characterized by slowed child growth, resulting in failure of a child to reach his/her expected height/length. Stunted children under five years old are identified by a height for age z score (HAZ) below -2 of the reference population. Severe stunting is defined as HAZ below -3. A stunted child is at higher risk of illness and more likely to develop poor physical and cognitive skills throughout childhood and into adolescence, affecting labour productivity, income-earning potential and social skills, with consequences beyond the individual level, potentially undermining the economic development of communities and nations.

Micronutrient deficiencies – caused by a lack of intake, absorption or use of one or more vitamins or minerals such as vitamin A, iron and zinc⁷ – are often referred to as 'hidden hunger' because they develop gradually over time, and a large percentage of the population may be deficient without showing any clinical symptoms or signs of deficiency.⁸

5 UNICEF conceptual framework is available here: <https://www.unicef.org/nutrition/training/2.5/4.html>

6 De Onis et al. Prevalence thresholds for wasting, overweight and stunting in children under 5 years. Public Health Nutrition, Pages 1 to 5.

7 Global Nutrition report 2018.

8 https://www.unicef.org/nutrition/index_iodine.html

Sources of malnutrition data

The GRFC reviews and analyses available country data on anthropometry, dietary intake, infant and young child feeding (IYCF) practices, health and WASH indicators from nutrition surveys – conducted at national and also sub-national level. These include representative SMART (Standardized Monitoring and Assessment for Relief and Transitions) surveys, Demographic and Health Surveys (DHS), Multiple Indicators Cluster Surveys (MICS), National Vulnerability Assessments and Analyses, DHIS (for routine data) and Infant and Young Child Feeding – Knowledge Attitude and Practices Assessments (IYCF KAP).

Estimates of the number of children affected by acute malnutrition are in-country calculations officially

approved by the nutrition clusters/sectors and shared in key planning documents such as Humanitarian Needs Overviews (HNO) and Humanitarian Response Plans (HRP).

In 2018, three of the IGAD countries (Kenya, Somalia and South Sudan) conducted an IPC acute malnutrition analysis to understand the severity and main factors affecting the nutritional status of a population in areas with a high rate of acute malnutrition. In countries that conducted two IPC analysis processes in a year, the most recent analysis was included.

The country nutrition summary pages focus on the following nutrition indicators, in addition to stunting and the number of children in need of treatment for acute malnutrition:

OTHER NUTRITION INDICATORS USED IN GRFC



Minimum acceptable diet

A composite indicator that combines **minimum meal frequency** (proportion of breastfed and non-breastfed children aged 6–23 months, who receive solid, semi-solid, or soft foods at least the minimum number of recommended times a day) and **minimum dietary diversity** (proportion of children aged 6–23 months who receive foods from more than four food groups out of seven a day) to assess the percentage consuming a diet that meets the minimum acceptable level of quality and quantity for growth and development.¹



Exclusive breastfeeding

WHO recommends that infants are fed exclusively with breast milk up to six months of age. This indicator refers to the percentage of infants (up to six months old) who are exclusively breastfed.



Access to safe drinking water

This indicator assesses the percentage of households that have safe and equitable access to a sufficient quantity of water for drinking, cooking and personal and domestic hygiene. This includes public water points being sufficiently close to households to enable use of the minimum water requirement.²

1 Source WHO: Indicators for assessing infant and young child feeding practices
2 SPHERE standards handbook

Table 4 IPC acute malnutrition technical descriptions and response objectives

Phase	Technical description	Priority response objective
1 Acceptable	Less than 5% of children are acutely malnourished.	Maintain the low prevalence of acute malnutrition.
2 Alert	5-9.9% children are acutely malnourished.	Strengthen existing response capacity and resilience. Address contributing factors to acute malnutrition. Monitor conditions.
3 Serious	10-14.9% children are acutely malnourished.	Scaling up of treatment and prevention of affected populations.
4 Critical	15-29.9% children are acutely malnourished. The mortality and morbidity levels are elevated or increasing. Individual food consumption is likely to be compromised.	Significant scale up and intensification of treatment and protection activities to reach potential population affected.
5 Extremely Critical	30% of children are acutely malnourished widespread morbidity and/or very large individual food consumption gaps are likely evident.	Addressing widespread acute malnutrition and disease epidemics by all means.

LIMITATIONS OF THE REPORT

Data gaps

Due to a lack of updated food security data, Eritrea is not included in the analysis though available nutrition data is reported. For Djibouti, data is only available and validated for a small portion of the population (i.e. 16 percent). This underlines the need for IGAD and partners to encourage investments in food security monitoring systems within the region and for establishing systematized regional data sharing mechanisms.

Nutrition data availability varied from country to country and by geographic areas within countries. At times, the aggregated values reported at national level differ greatly from values reported in the food crisis-affected areas of the country. Also, conflict and insecurity continue to hinder the collection of reliable data.

Comparability challenges

The coverage of food security analyses varies across the region in terms of analysed population over the years, making the trend analyses at country level not feasible in some cases. This highlights the importance of conducting an IPC analysis at least on a yearly basis in countries that face food crises.

The number of people in IPC Phase 3 or above does not necessarily reflect the full population in need of urgent action to decrease food gaps and protect and save lives and livelihoods. This is since current population tables

identify those found in different severity phases despite the mitigating effects of any assistance received. As such, some households may be in IPC Phase 1 or 2 but only because they receive assistance and as a result may be in need of continued action. In areas where assistance is significant, decision-makers should be informed that estimates incorporate the effects of any assistance delivered and they do not reflect total number of people in need of action.

Lack of predictive analysis

For the 2019 forecasts, estimates of the future food-insecure populations as produced by FEWS NET for the Sudan and Uganda are presented as ranges rather than point estimates to reflect the higher level of uncertainty. Additionally, Djibouti cannot be included because there are no projections for 2019 food security outcomes, thus only drivers are indicated.



2. REGIONAL OVERVIEW OF FOOD CRISES IN 2018

REGIONAL BACKGROUND

The IGAD region is one of the most food-insecure regions in the world.¹ Prolonged and widespread drought is a recurrent feature of the arid and semi-arid lands that is exacerbated by climate change, advancing desertification and ecological degradation. These harsh ecological circumstances contribute to severe hardships among the affected communities including dislocation, poverty, persistent hunger and conflicts within and across boundaries in the region.

The needs of vulnerable populations and the actions required to protect and build their resilience are immense and beyond the capacity of any single institution. For example, the 2010-2011 drought brought very high levels of food insecurity at the peak of the crisis, in particular in Ethiopia and Kenya as well as a declaration of famine in parts of Somalia. In addition, in 2016-2017 drought and conflict brought severe levels of acute food insecurity in the region, including a famine declaration in two counties of South Sudan.

In addition to the recurrent natural and human-induced shocks from which vulnerable populations currently suffer, climate research predicts an increase in the frequency, severity and extent of extreme weather events in the region. In combination with political, economic and conflict-related shocks, these events threaten livelihoods and food and nutrition security, undermining development gains and eroding resilience to future shocks. This is particularly evident in countries or areas where government systems are unable to provide adequate support to those affected.

1 IGAD strategy, framework, vol. 1. January 2016.

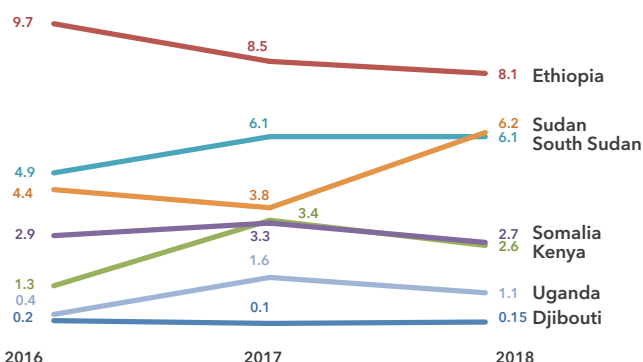
OVERVIEW

In 2018, the IGAD countries had around 27 million people in *Crisis* (IPC phase 3) or worse across seven member states.

There have been escalating numbers of people in need of food assistance (IPC Phase 3 or above) over the last three years, with a significant increase between 2016 and 2017, from 23.8 million in 2016 to 26.8 million in 2017, due to a severe drought in the region. Although the situation improved in most countries of the region between 2017 and 2018, it significantly deteriorated in the Sudan mainly due to economic crisis.

Climate, conflict and economic shocks were the main drivers of food insecurity in the IGAD region in 2018. Climate shocks were the primary driver of food insecurity in the region with around 11.9 million acutely food insecure in Ethiopia, Kenya, Uganda and Djibouti. Prolonged dry conditions, and flash floods negatively affected pastoral and agro-pastoral livelihoods by causing below-average crop production, pasture, browse, as well as limiting water sources for both

Figure 2 Peak numbers in need of urgent food, nutrition and livelihood assistance, 2016 to 2018



domestic and livestock usage. In addition, conflict and insecurity drove 8.8 million people to be food insecure in South Sudan and Somalia. Persistent insecurity disrupted livelihood activities, affected market functionality and limited physical access to markets. Economic shocks pushed 6.2 million people into acute food insecurity in the Sudan alone in 2018. The economic crisis was primarily caused by very high inflation rates, leading to a devaluation of the Sudanese pound.

In terms of magnitude, the most food-insecure countries in the region in 2018 were Ethiopia with 8.1 million food insecure people in need of urgent action, the Sudan with 6.2 million, and South Sudan with 6.1 million. South Sudan had the largest prevalence of acute food

insecurity as 59 percent of its population required urgent assistance to protect livelihoods, reduce food consumption gaps and malnutrition. Although only 16 percent of the population was surveyed, 55 percent of the assessed population in Djibouti was found to be acutely food insecure. Somalia also had a significant prevalence rate at 22 percent.

In 2018, approximately 19.8 million people were in *Stressed* (IPC Phase 2) in the Sudan, South Sudan, Somalia and Djibouti.² These populations had minimally adequate food consumption and could not afford certain essential needs without engaging in coping strategies that could weaken their food security or ability to recover. They could slip into IPC Phase 3 or above if an additional shock or stressor occurs.

Figure 3 Peak number and percentage (of population analysed) in need of urgent assistance



² Data on population in Stressed (IPC phase 2) were not available for Ethiopia, Kenya, and Uganda.

Table 5 Highest number and share of food-insecure population in 2018 across the IGAD region

Country	Total population analysed	Percentage of population analysed out of total population of reference	Population in Crisis or worse (IPC Phase 3 or above)		Population in Stressed (IPC Phase 2)	
	Number (millions)	%	Number (millions)	% of total population analysed	Number (millions)	% of total population analysed
Djibouti (rural areas)	0.2	16%	0.15	55%	0.1	40%
Ethiopia	96.5	100%	8.1	8%	N/A	N/A
Kenya	46.3	100%	2.6	6%	N/A	N/A
Somalia ¹	12.3	89%	2.7	22%	2.7	22%
South Sudan ²	10.4	93%	6.1	59%	3.2	31%
the Sudan ¹	43.9	100%	6.2	14%	13.7	31%
Uganda	40.0	100%	1.1	3%	N/A	N/A

¹ The estimates for this country contains population classified in *Emergency* (IPC Phase 4).
² The estimates for this country contains population classified in *Emergency* (IPC Phase 4) and in *Catastrophe* (IPC Phase 5).

MAIN DRIVERS OF FOOD INSECURITY IN 2018

The main drivers of food insecurity in the IGAD region include conflict, climatic and economic shocks, which often co-exist or reinforce each other.

Climate shocks

The region is extremely vulnerable to climate variability and change. The frequency of weather and climate extremes, such as floods and droughts, in the region has increased during the last 30 to 60 years.³ In 2015-2016, the region experienced one of the strongest El Niño-Southern Oscillation (ENSO)⁴ events on record. In

³ Intergovernmental Panel on Climate Change (IPCC), 2013.

⁴ El Niño-Southern Oscillation (ENSO) is an irregularly periodic variation in winds and sea surface temperatures over the tropical eastern Pacific Ocean, affecting the climate of much of the tropics and subtropics. El Niño is the warm phase of ENSO causing extreme rainfall/floods in equatorial and southern sectors of GHA and drought/dry conditions in the northern GHA. La Niña is the cold phase of ENSO causing extreme rainfall/floods in northern parts of GHA and drought/dry conditions in the equatorial and southern sectors.

some parts of the region, this resulted in droughts and floods leaving millions of people in need of urgent food support.

During the March-May 2018 rainy season, precipitation levels were well above-average across much of Kenya, as well as parts of southern Ethiopia and Somalia. Rainfall was generally average elsewhere except for localized, northern belt-receiving areas of Ethiopia, where below-average rains were observed. These rainfall conditions generally resulted in above-average harvests and restored pastoral conditions that were severely depleted during the 2016-17 droughts.

However, flooding and related population displacements across parts of the region increased needs in some flood-prone areas. For cropping, unimodal areas that rely on continued rainfall from June to September, 2018 rainfall was mixed, resulting in below average harvests in some areas, such as in parts of Ethiopia and Uganda.

GREATER HORN OF AFRICA CLIMATE RISK AND FOOD SECURITY ATLAS (2018)

The 2018 Greater Horn of Africa Climate Risk and Food Security Atlas showed an increase in recent years in the frequency of climate-related shocks associated with climate variability and change - the most common shocks being drought and floods. During years of extreme climatic shocks such as the 2011, 2015 and 2016 droughts, there was unprecedented increase in food insecurity, malnutrition and loss of livelihoods, especially in arid and semi-arid areas, due to crop losses/failure,

upsurge in crop and livestock diseases, livestock deaths and human displacements that increased vulnerability. The atlas, which is produced by ICPAC and WFP with contribution from partners and member state governments in 11 countries in the greater Horn of Africa region (Burundi, Djibouti, Eritrea, Ethiopia, Kenya, Rwanda, Somalia, South Sudan, Sudan, Tanzania and Uganda) provides a good documentation of climate and food security trends in the region.

THE 2016-2017 DROUGHT AND IMPACT ON REGIONAL FOOD SECURITY

The 2016-17 drought decimated livestock herds and severely affected cropping seasons, sharply reducing crop production and causing steep food price increases. Worst-affected areas included Somalia, northern Kenya and south-eastern Ethiopia where acute malnutrition as well as the numbers of acutely food-insecure people spiked.

As such, in July 2017 around 3.3 million people were in *Crisis* (IPC Phase 3) or worse in Somalia. Between August and October, approximately 3.4 million people were food insecure and in need of urgent action in Kenya and 8.5 million in Ethiopia until December, mainly as a consequence of the drought.⁵

The recovery from this crisis has been slow. Though well above-average rains received during the first half of 2018 caused above-average crop production and substantial improvements in rangeland resources, livestock herd sizes still remain atypically low. This in turn has reduced access to income and food for affected pastoral households and has contributed to continued food insecurity across the region.

5 FSIN. 2018. Global Report on Food Crises 2018. Rome.

Near the end of the year, the 2018 October to December short/*Deyr* rains were well below average and erratic across much of the Greater Horn of Africa, leading to atypically poor cropping conditions across many parts of the region.

In pastoral zones, above-average rainfall in the first half of 2018 partially mitigated the impact of the poor short/*Deyr* rains, but they still affected pasture and water availability in some areas.

Conflict and insecurity

The IGAD region faces more security challenges than any other African region. The presence of four United Nations and African Union peace support operations with more than 50 000 troops in the region (Darfur; Abyei; Somalia; South Sudan), hundreds of Qatari military observers on the Djibouti-Eritrea Border and thousands of western military forces on the Djibouti border, exemplifies the peace and security challenges affecting the region.

Threats to peace and security in the region include inter and intra-state conflicts and transnational security threats such as terrorism, illicit use of small arms and light weapons, piracy and cattle rustling. In conflict civilians are often pushed into acute food insecurity when they are displaced, deprived of their income sources and face high poverty levels. Food systems, markets and transport networks are disrupted, pushing up food prices and farmers are prevented from tending to their land.

In 2018, Somalia, South Sudan, the Sudan, and Ethiopia experienced varied levels of conflicts. Terrorism continued to pose a major challenge to the stabilization of Somalia. Despite efforts by the Federal government and African Union Mission in Somalia (AMISOM), there has been an increase in the frequency of attacks in the capital and its environs. This has led to displacements and subsequent food insecurity.

Following five years of conflict, the situation improved in South Sudan in 2018, but insecurity continued to disrupt livelihoods and markets. The slow implementation of the peace agreement has strained the relationship between the parties, increasing disharmony and mistrust among the citizens. IGAD has remained at the forefront to make sure that the peace agreement is fully implemented in an effort to avoid renewed hostilities between the parties.

Intercommunal conflicts and violence in southern parts of Ethiopia persisted in 2018 with increased hostilities between the Oromo and Somali ethnic groups leaving many people food insecure. The increased tension among these communities limited people's opportunities to work and displaced millions of people.

In the Sudan security forces used live ammunition, force and arbitrary detentions in an attempt to control nationwide protests over price hikes and shortages of basic commodities from mid-December. Many people were displaced in Darfur, stoking more conflicts between herders and farmers over land and natural resources.

Economic shocks

In 2018, the global FAO Food Price Index was 3.5 percent below 2017's level and 27 percent lower than its record high of 2011.⁶ Despite the global decline in food prices, countries throughout the region are experiencing high inflation rates, rising unemployment, lack of sustainable livelihoods or regular work, currency depreciation, poor functioning markets and high food prices. The Sudan was particularly affected by economic shocks in 2018, which was the primary driver of acute food insecurity for 6.2 million people.

6 FAO Food Price Index, 2019.

ECONOMIC CRISIS IN THE SUDAN

In January 2018, the Government of Sudan announced an ambitious economic reform in an effort to stabilise the suffering economy. Challenges included high inflation (especially for food), a sharp weakening of the Sudanese Pound against the US Dollar negatively impacting the prices of imported food and goods, a shortage of key commodities such as bread and fuel, and the beginning of a liquidity crisis due to a stagnation of the economy.

Despite the effort, the Sudanese economy continued to be under pressure, causing a deterioration in food insecurity as households struggled to maintain adequate access to food.

Inflation rates increased throughout the year reaching 72.9 percent in December 2018.

The economic situation has increased the gap between the official exchange rate between the Sudanese Pound and the US Dollar and the rate at the parallel market. Though an official devaluation was made by the Central Bank of Sudan in October 2018 from 17.95 SDG for 1 USD to 47.5 SDG/USD, the parallel market

exchange rate continued to rise to a higher level of 60 SDG/USD the following month. At the same time, cash withdrawal limits continued to be lowered in an attempt to avoid an economic collapse.

Due to fuel shortages, agricultural machinery became unavailable during the harvest season, resulting in a sharp increase in the demand for agricultural labour. This caused the wage rate for agricultural workers to nearly triple between May and November 2018 compared to the 2017 harvest season. Also, the cost of transporting food products within the Sudan increased, further pushing up food prices.

As a result of the economic crisis and general dissatisfaction with the political situation, protests started on 19 December 2018, demanding for the resignation of President Omar al-Bashir. After months of protests, al-Bashir stepped down on 11 April 2019, paving the way for a transitional government. As of 5 July, a power-sharing agreement between the Sudan's military leaders and the opposition alliance was reached, which will remain in place until elections can be held.

Source: WFP, IGAD and BBC

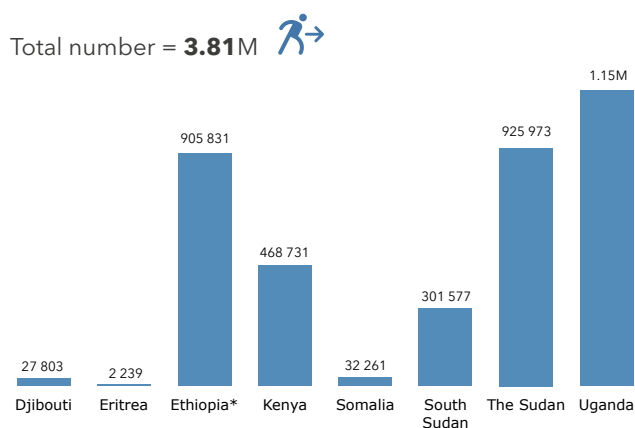
Cross-border and internal displacement

As of October 2018, the most notable countries of departure of refugees and asylum-seekers in the IGAD region were South Sudan (2.18 million), Somalia (0.55 million), the Sudan (0.34 million) and Eritrea (0.31 million). Around 3.8 million were hosted in the region, including 1.15 million in Uganda, over 0.9 million in the Sudan as well as in Ethiopia, close to 0.5 million in Kenya and over 0.3 million in South Sudan. Somalia and Djibouti also hosted around 32 000 and 28 000 refugees and asylum-seekers, respectively.⁷

Out of a total of 556 000 new refugee arrivals reported in the first six months of 2018 at the global level, 112 000 had left from South Sudan.⁸

According to UNHCR, in mid-2018 the region was also hosting significant numbers of IDPs including 2.6 million in Somalia, around 2 million in the Sudan, 1.8 million in South Sudan and 1.2 million in Ethiopia.⁹

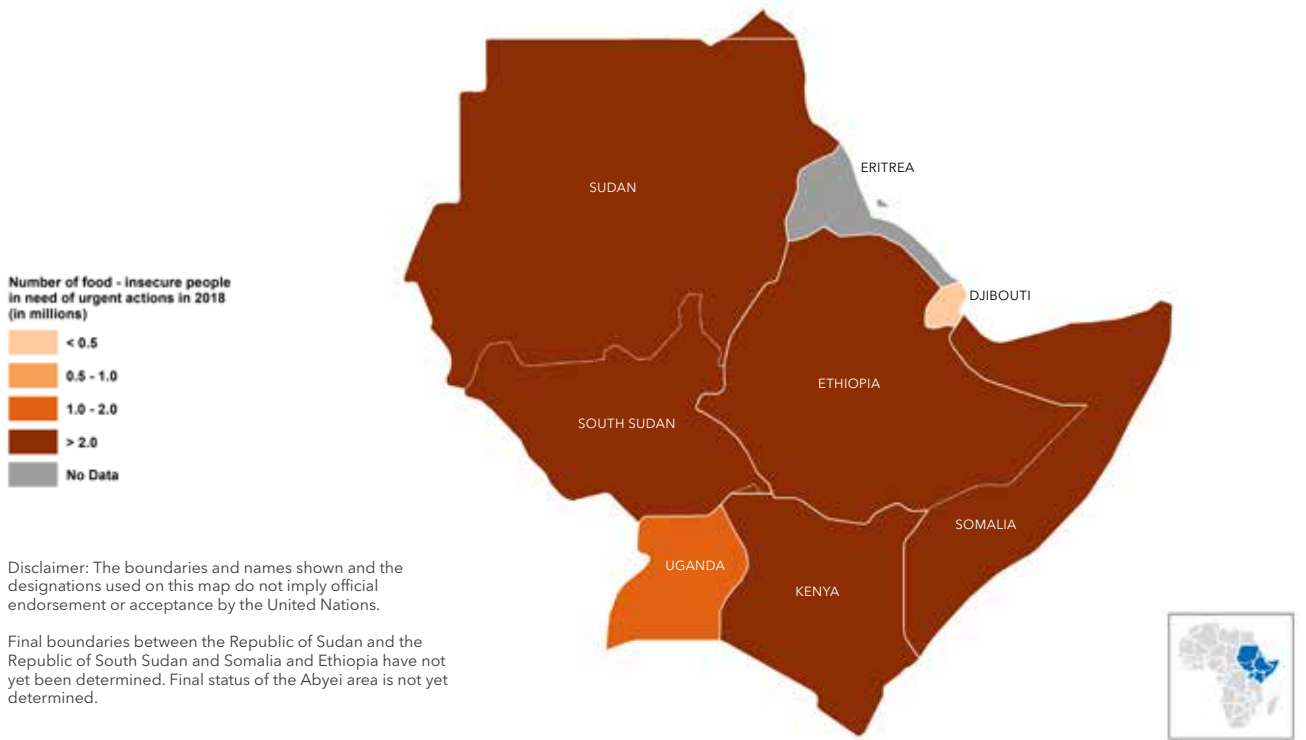
Figure 4 Refugees and asylum-seekers by country of asylum in IGAD region as of 31 October 2018



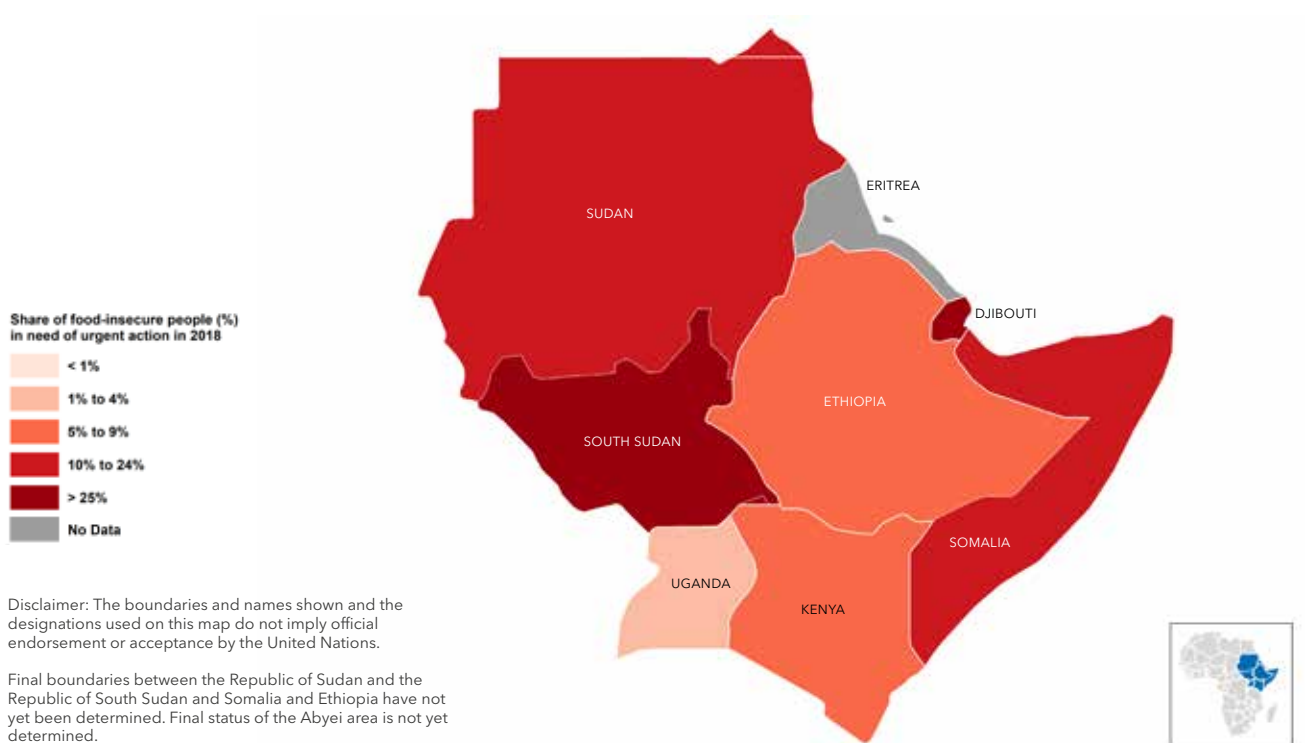
*Statistics for Ethiopia as of 31 August 2018.
Source: UNHCR

7 UNHCR, East Horn of Africa and the Great Lakes Region – Refugees and asylum-seekers by country of asylum, 31 October 2018.
8 UNHCR Global Trends Mid-Year review, January 2019.
9 UNHCR, East, Horn of Africa and the Great Lakes region – refugees, asylum-seekers and IDPs, 2018.

Map 1 Number of people in IPC Phase 3 or above in 2018 in IGAD region



Map 2 Share of people in IPC Phase 3 or above in 2018 in IGAD region



REGIONAL OVERVIEW OF NUTRITION

The IGAD region continues to face high malnutrition rates. More than 13 million children are estimated to be chronically malnourished (measured by stunting) across the eight IGAD countries. The number of children aged 6-59 months with severe acute malnutrition was estimated to be over 2.1 million with highest numbers in the Sudan and Ethiopia.

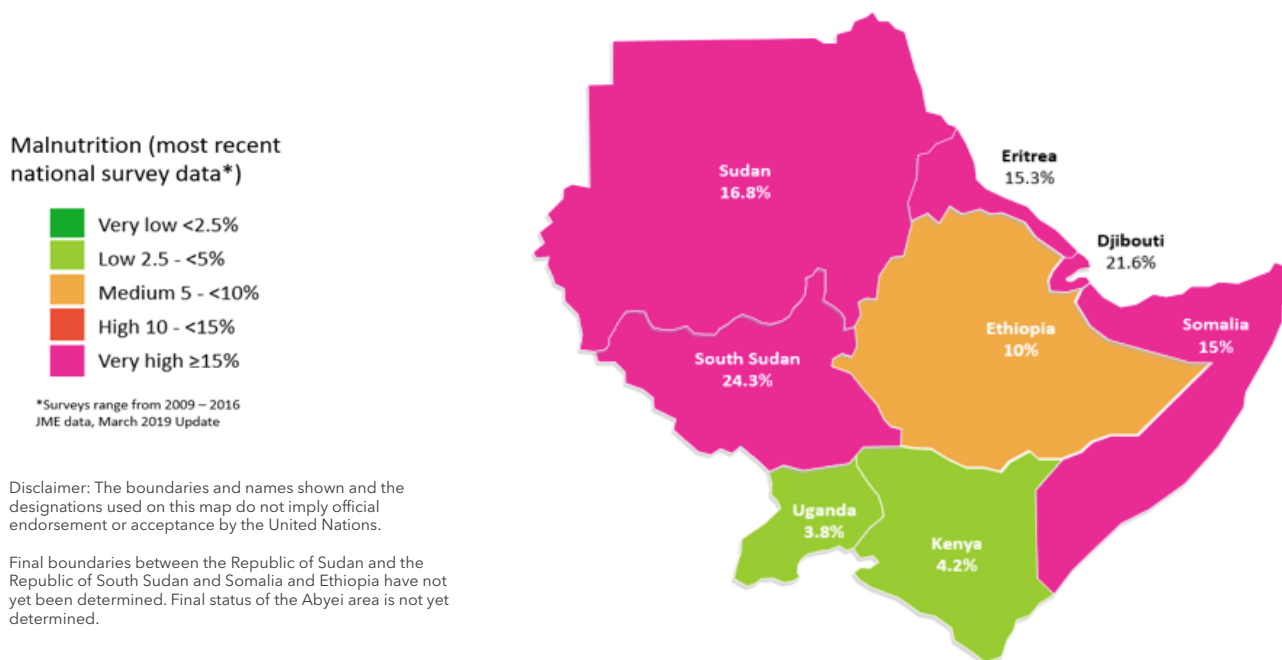
Lean season increases in life-threatening severe acute malnutrition (SAM) in children under five years persisted in parts of the Sudan, South Sudan, Ethiopia, Somalia, Kenya and Uganda. At national levels, prevalence of global acute malnutrition (GAM) was above the WHO 'very high' classification of 15 percent in Djibouti, Eritrea, Somalia, South Sudan and the Sudan. At sub-national level, there are parts of Ethiopia, Kenya Somalia and Uganda that frequently record very high (>15 percent) levels of GAM. The number of children suffering from SAM annually is particularly high in parts of Ethiopia, Somalia, the Sudan and South Sudan. Currently just one in every three children suffering from SAM is treated, and more efforts need to be made to expand availability of and accessibility to treatment services. Community based screening of children under five years for SAM also needs to be increased so that children in need of treatment are identified early and referred to treatment for the best possible outcome.

Malnutrition is the result of a complex set of interacting factors that are multisectoral, related to health, sanitation and care practices as well as consumption and access to food. Further factors influence these, including education, gender, social equity, and the local social and environmental context. The key contributing factors to the high rates of malnutrition in the IGAD countries in 2018 include food insecurity, sub-optimal infant and young child-feeding practices, lack of access to adequate safe water and diseases outbreaks.

The case for investing in nutrition-specific interventions (such as exclusive breastfeeding, optimal complementary feeding, micronutrient supplementation, care for children with MAM and SAM etc) is clear. Every USD 1 invested in preventing and treating malnutrition offers at least a USD 16 return. In some countries including Kenya it can even reach a USD 22 return.¹⁰ There is an urgent need to scale-up investments in nutrition interventions by IGAD member states.

10 An Investment Framework for Nutrition in Kenya: Reducing Stunting and Other Forms of Child Malnutrition by Dayton et al (December 2016).

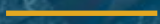
Map 3 Global Acute Malnutrition, IGAD countries



Source: Joint Malnutrition Estimates, 2019

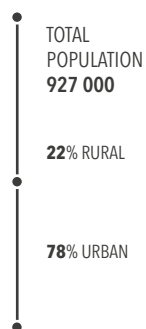


3. MAJOR REGIONAL FOOD CRISES IN 2018



ACUTE FOOD INSECURITY

2018



WFP 2018; World Bank, 2017

157 100
FOOD-INSECURE PEOPLE IN
NEED OF ASSISTANCE



112 300 MARGINALLY
FOOD-INSECURE PEOPLE



2017-18 CHANGE

▶ The number of food-insecure people in need of urgent action **remained stable** mainly as a result of lingering impact of climate events and economic shocks on rural households.

2019 FORECAST

Dry spells are likely to continue to affect household food security status.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION



Climate shocks



Economic shocks



Conflict/insecurity

- Poor rainfall combined with lingering effects of the past years' drought adversely affected pastoralists.

- Limited domestic production, decreased economic opportunities, and high food prices impeded rural households' food access.

- Conflict and insecurity in neighbouring countries triggered refugee influx, mainly in rural areas.

MALNUTRITION INDICATORS



186 000 children under five years acutely malnourished, of whom **5 200** affected by SAM.

HNO 2017



12% of infants (up to 6 months old) exclusively breastfed.

MICS 2012



23% of households lacking access to safe drinking water.

WHO/UNICEF JMP 2017



Recurrent natural disasters undermine efforts to make a living, limiting access to a micronutrient-rich diet.



33.5% of children aged 0-59 months stunted (>30% = very high).

MICS 2012

DISPLACEMENT



28 000 refugees mainly from Somalia, Ethiopia, Eritrea and Yemen in October 2018.

UNHCR



The vast majority of migration movements were composed of Ethiopians travelling to Saudi Arabia for economic reasons.

IOM 2018



Hot and dry **Djibouti** only produces 10 percent of its food requirements, making it heavily reliant on food imports and exposing it to external market downturns, currency fluctuations and price volatility. Poverty levels are especially high in rural areas.

ACUTE FOOD INSECURITY OVERVIEW

As of April 2018, moderate and severe food insecurity affected 55.5 percent of rural households in the five rural regions of Ali-Sabieh, Arta, Dikhil, Obock and Tadjourah. Of these, three percent were severely food insecure. In addition, almost 40 percent of rural households were marginally food insecure. This marks a 22 percent increase in the number of people in moderate and severe food insecurity since October 2017.¹

Moderate food insecurity prevailed in almost two in three households of Tadjourah (63 percent) and Dikhil (59 percent) regions, while it affected one in two households in Arta (51 percent) and Ali-Sabieh (39 percent) regions. The regions most affected by severe food insecurity were Ali Sabieh (six percent) and Dikhil (five percent) regions.²

While the recourse to negative coping strategies was less pronounced than in 2014, it mainly remained higher than in 2015, 2016 and 2017 as rural households still faced constrained food availability and access and over half of them (51 percent) reported employing negative coping strategies - with 17 percent resorting to emergency strategies such as selling houses or committing illegal acts, 15 percent resorting to crisis strategies such as reducing non-food expenses, and 22 percent using

stress strategies, such as buying food on credit or using savings. In the region of Dikhil, more than eight households in 10 resorted to negative coping in April 2018.³

FACTORS DRIVING ACUTE FOOD INSECURITY

Climate shocks

In inland pastoral areas of Dikhil and Tadjourah regions, below-average 2018 March-June "diraac/sougum" rains resulted in an incomplete regeneration of rangeland resources and reduced availability of animal feed. Subsequently, abundant August-October *karan/karma* rains prompted a marked improvement in vegetation conditions, with a positive impact on water and pasture availability.

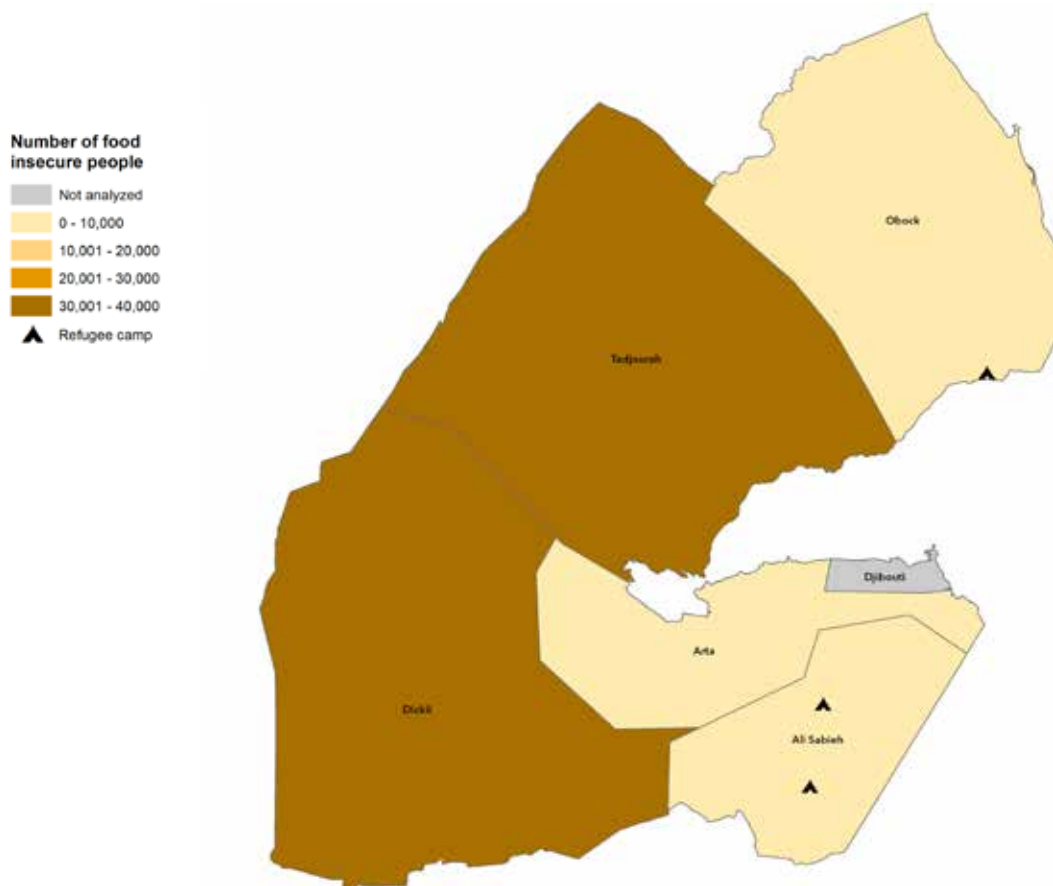
In coastal areas, after very poor October-March 2017-18 "heys/dadaa" rains, Cyclone Sagar struck the country on 19 and 20 May, bringing torrential rains. The precipitations received, about 110 mm, were the equivalent of the average rainfall for an entire year and led to high run-off and low moisture recharge, resulting in limited improvements in vegetation conditions but triggering floods that affected about 50 000 people in the capital, Djibouti City, and in the southern Balbala suburb. Subsequently, the first part of the 2018-19

1 WFP Bulletin Djibouti - Système de Suivi et Surveillance de la Sécurité Alimentaire (SSSA), May 2018.

2 Ibid.

3 Ibid.

Map 4 Prevalence of food insecurity by regions and location of refugee camps, Djibouti rural areas, April 2018



Source: WFP, May 2018

“heys/dadaa” rains was characterized by below-average precipitations, and as of late 2018 vegetation conditions were very poor in coastal areas.

Economic shocks

Rural households in inland areas faced significantly reduced financial access to food as a result of poor rains that curtailed production and sales of livestock products, as well as the governmental ban on coal and firewood sales. Urban households have also faced decreased economic opportunities in the construction industry in recent years.

In remote rural areas, markets were poorly supplied with food product varieties – mainly limited to cereals, sugar and oil – and prices were almost twice as high as in the main regional marketplace, due to high transportation costs and commercial margin. Around 89 percent of moderately and severely food-insecure households relied on markets to access food, with 25 percent of them having to resort to credit to buy it. On average, rural households spent 70 percent of their income on food, and reported at least one shock – mainly lack of rains, lack of food, soaring prices, and drought-related livestock deaths – affecting their income during the three months before the survey.⁴

4 WFP. Djibouti – Système de Suivi et Surveillance de la Sécurité Alimentaire (SSSA), May 2018.

Conflict and insecurity

Insecurity and conflicts in neighbouring countries have led to an influx of refugees, with the majority of them (80 percent) living in three camps.⁵ As of October 2018, Djibouti was hosting around 28 000 refugees,⁶ mainly from Somalia, Ethiopia, Eritrea and Yemen.⁷ There are also refugees living in urban areas outside camps in small towns, in Djibouti and in its outskirts. With the exception of those who have sufficient financial means to live in small hotels, most live in miserable conditions waiting for the chance to leave for a second country of asylum.

NUTRITION OVERVIEW

The prevalence of GAM, measured using mid-upper arm circumference (MUAC) among under fives, reached 13 percent in October 2017, up from 7.5 percent in October 2016, but below the October 2015 prevalence of 17 percent.⁸ Among them 4.5 percent were severely acutely malnourished in 2017. The regions of Obock (24.8 percent) and Dikhil (14 percent) had the highest GAM levels.

This poor nutritional situation is largely attributable to lack of dietary diversity among poor rural households, as well as inadequate child feeding practices. No child under two has a minimum acceptable diet as a result of limited physical and economic market access.⁹

The 2017 Ministry of Health-produced nutrition analysis indicated that a decline in the management of moderate malnutrition – with fewer than half of cases being treated in medical facilities and high dropout rates in poor areas – has led to an increase in the number of children slipping into SAM.¹⁰ Only 30 percent of children with SAM are cared for in health centres.¹¹ There is also a lack of up to date nutrition data (the latest national SMART survey was in 2013), insufficient surveillance and detection mechanisms and poor community nutrition support.

Pregnant women face cultural taboos in terms of what they can and cannot eat. Lactating women in poor households, where consumption of animal products is very limited, suffer from insufficient protein intake. In rural areas, poor sanitation, low access to clean drinking water and lack of access to basic healthcare linked to the nomadic lifestyle of the population undermine nutrition. Children's vulnerability to disease is increasing, with inadequate immunization coverage and the continuing influx of refugees intensifying the risk of epidemics.

In camps the nutritional situation of refugees is worrying. The prevalence of GAM was 17.6 percent in Markazi/Obock and 11.9 percent in Holl Holl, where new arrivals tend to have even higher levels. In both camps SAM levels were at least four percent.¹²

5 WFP, Government of Djibouti, URD Revue Stratégique « Faim zero à Djibouti », June 2018.

6 UNHCR East, Horn of Africa and the Great Lakes Region – Refugees and Asylum-seekers by country of asylum, 31 October 2018.

7 FAO GIEWS, Djibouti Country brief, 28 May 2018.

8 WFP, Djibouti – Système de Suivi et Surveillance de la Sécurité Alimentaire (SSSA), May 2018.

9 Ibid.

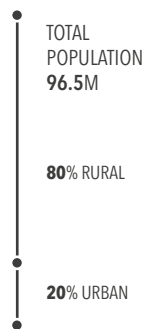
10 URD Ministry of Health Rapport Faim Zero Djibouti December 2017.

11 WFP, Djibouti – Système de Suivi et Surveillance de la Sécurité Alimentaire (SSSA), May 2018.

12 URD. REVUE STRATÉGIQUE «faim zéro» à Djibouti.

ACUTE FOOD INSECURITY

2018



World Bank, 2017

8.1M

FOOD-INSECURE PEOPLE IN NEED OF ASSISTANCE



MARGINALLY FOOD-INSECURE PEOPLE



DATA NOT AVAILABLE

2017-18 CHANGE

- ▼ The number of food-insecure people in need of urgent action **decreased** mainly as a result of a marked but still partial recovery of pastoral conditions in 2018, from the severe 2016-17 drought.

2019 FORECAST

- ▶ The number of food-insecure in need of urgent action is forecast to **remain unchanged** in 2019.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION



Climate shocks

- Erratic rainfall in some areas and floods in others led to local production shortfalls.



Conflict/insecurity

- Intercommunal conflicts undermined crop and livestock production and triggered massive displacement.



Displacement

- Currency devaluation pushed up food prices.

- Lingering effects of the 2016-2017 drought continued to affect livestock production.

- Huge internal displacement and refugee influx strained relations with hosts over land, food and labour.

MALNUTRITION INDICATORS



3.5M children under five years acutely malnourished, of whom **350 000** affected by SAM.

HDRP, 2018



7% of children aged 6-23 months received 'Minimum Acceptable Diet' for growth and development.

DHS, 2019



35% of households lacking access to safe drinking water.

DHS, 2016



Drought-related reduced quality of drinking water and conflict-induced lack of basic sanitation exacerbated already-fragile nutrition situation.



58% of infants (up to 6 months old) exclusively breastfed.

DHS, 2016



39% of children aged 0-59 months stunted (>30% = very high).

DHS, 2016

DISPLACEMENT



2.3M IDPs - i.e. **1.8M** displaced by conflict; **498 400** displaced by climate shocks.

IOM, Dec 2018



905 800 refugees and asylum-seekers mainly from South Sudan, Somalia, Eritrea and the Sudan.

UNHCR, Dec 2018



Over **200 000** people displaced by violence in south-western Ethiopia have returned to their area of origin.

UNHCR, Sept 2018



Despite improvements in southern pastoral areas in late 2017 and early 2018, **Ethiopia** still faces a major food security emergency driven by three preceding years of poor rainfall, mass displacement, currency devaluation, high food prices, localized floods and dry spells.

ACUTE FOOD INSECURITY OVERVIEW

In 2018, an estimated 8.13 million people were food insecure and in need of urgent assistance according to OCHA. In March, around 7.9 million were in need of food-related humanitarian assistance - including 3.2 million in Oromia, 1.8 million in Somali region and 977 000 people in Amhara, according to the Humanitarian and Disaster Resilience Plan (HDRP) for 2018, released in March.¹³ In October, the estimate was revised up in the Mid-Year Review to 8 million (7 953 893) - with the largest increase observed in Tigray (15 percent).¹⁴

These 2018 figures represent a decline in the population in need of food assistance in comparison to 2017, when it was estimated that 8.5 million people were in need of assistance, according to the Mid-Year Review document.¹⁵

As of June, the areas most affected by the 2016 and 2017 drought were classified in *Crisis* (IPC Phase 3), such as Dollo and large parts of the south-eastern Somali region,¹⁶ and such food security outcomes persisted in most of the south-eastern pastoral areas until December 2018.¹⁷ In August, *Crisis* (IPC Phase 3) or *Stressed* (IPC Phase 2!) food insecurity levels were reported in areas bordering Oromia and Somali region, and Oromia and

SNNPR.¹⁸ From October to December, northern pastoral Afar faced *Crisis* (IPC Phase 3), and so did south-eastern parts of Benishangul Gumuz,¹⁹ while parts of eastern Oromia, southern Tigray, eastern Amhara, and northern SNNPR were classified in *Stressed* (IPC Phase 2) or *Crisis* (IPC Phase 3).²⁰

According to FEWS NET Food Security Outlooks, areas of particular concern included northern pastoral Afar, large parts of the south-eastern Somali region, and conflict-affected areas of SNNPR, the Oromia-Somali border, and Kamashi zone in Benishangul Gumuz.²¹

FACTORS DRIVING ACUTE FOOD INSECURITY

Climate shocks

While pasture and water conditions had partly recovered by 2018,²² the 2016 and 2017 drought continued to severely affect livelihoods in many pastoral areas with large-scale livestock deaths still reported and milk production below-average in early 2018.

In May, floods, compounded by the landfall of the Sagar cyclone,²³ caused a serious humanitarian situation in the Somali region, with pastures destroyed and livestock killed.²⁴ As of August, rainfall improved pasture and water

13 Joint Government and Humanitarian Partners Humanitarian and Disaster Resilience Plan, March 2018.

14 Joint Government and Humanitarian Partners Humanitarian and Disaster Resilience Plan Mid-Year Review, October 2018.

15 Joint Government and Humanitarian Partners Humanitarian and Disaster Resilience Plan Mid-Year Review, July 2017.

16 FEWS NET Ethiopia Food Security Outlook, June 2018.

17 FEWS NET Food Security Outlook Update, December 2018.

18 FEWS NET Food Security Outlook Update, August 2018.

19 FEWS NET Food Security Outlook, October 2018, December 2018.

20 FEWS NET Food Security Outlook Update, December 2018.

21 FEWS NET Ethiopia Food Security Outlook, October 2018.

22 FEWS NET Ethiopia Food Security Alert, March 1, 2018.

23 OCHA Ethiopia Humanitarian Bulletin, 07-20 May 2018.

24 Food Security Cluster Ethiopia Agriculture Sector HDRP monthly Dashboard, May 2018.

conditions in these areas, although below-average milk production was forecast as a result of poor conception rates.²⁵ Parts of southern Somali and Oromia faced below-average pasture regeneration as the *Deyr/Hageya* rainy season (October-December) was delayed and dry spells were reported in most southern pastoral areas – except in and around Shabelle and Nogob.²⁶

Despite an increase in cereal prices, pastoralist terms-of-trade were generally stable, thanks to improved livestock body conditions and high demand for holiday festivities. In certain areas, however, households had few livestock to sell as a result of the reduced herd size from the 2016 and 2017 droughts.²⁷

The 2018 national crop production of the main agricultural season (*Meher*) was average.²⁸ In spite of favourable prospects in the key producing areas of the western highlands – western Oromia, Amhara and Benishangul Gumuz regions – erratic rainfall in central and eastern areas as well as unseasonal rains at harvest time caused local crop production shortfalls.^{29,30} In SNNPR close to 19 000 hectares of maize crops were infested with fall armyworm during the 2018 Belg season,³¹ while in East and West Hararghe planted areas were 60 percent below average as a result of conflict.³²

Conflict/insecurity

Intercommunal conflicts between Somali and Oromia, and between SNNPR and Oromia triggered massive population displacement across the country. As of December, 2.3 million people were internally displaced, of whom 1.8 million were displaced by conflict and more than 498 000 by climate shocks.³³ Almost the totality of the IDP population (93 percent) was located in Oromia and Somali regions.³⁴

In addition, as of 31 August, Ethiopia was hosting nearly 906 000 registered refugees and asylum seekers – mostly from South Sudan, Somalia, Eritrea and the Sudan.³⁵

The presence of large displaced populations increased competition with host communities over land resources, food and labour opportunities.³⁶

Economic shocks

High food prices hindered the most vulnerable households' access to food. The devaluation of the Birr against the USD in October 2017 pushed up prices of imported goods, such as wheat grain.³⁷ As of March, general year-on-year inflation was about 15 percent, while food inflation was near 20 percent. The nominal wholesale price of maize reached alarming levels, increasing by up to 56 percent between March 2017 and 2018, with the highest increases in surplus-producing areas (i.e. Dejen, Bahirdar, Nazareth). On average, maize prices were 37 percent above the five-year average in monitored markets.³⁸ At the end of 2018, rising transportation costs also contributed to price increases in anticipation of the *Meher* harvest.

NUTRITION OVERVIEW

According to the 2018 belg harvest assessment, 3.5 million children under five and around 1 million pregnant and lactating women were acutely malnourished in September, up from 3.8 million in January.^{39,40} The number of acutely malnourished children increased from 2.1 million in early 2018 to 2.4 million by September. Some 370 000 of them (up from 350 000 in January) were expected to be severely malnourished, with Oromia (139 000), Somali (99 000), SNNP (54 000) and Amhara (42 000) the worst-affected regions.

Although Ethiopia saw a steady reduction in stunting among children under five from 58 percent in 2000 to 38 percent in 2016, the level remained very high. In 2016 around 10 percent of children under five years were acutely malnourished,⁴¹ with little change over the previous decade. GAM levels were above Critical thresholds (>15 percent) in Somali and Afar states, which benefitted less from development investment and are frequently affected by drought-induced humanitarian crises.⁴²

The effect of prolonged drought, particularly in Somali region, water scarcity in pastoral areas, and the increased numbers of IDPs unable to access basic sanitation drive this poor nutrition situation. Political instability in August disrupted all basic services including health and nutrition, during a period when high rates of acute malnutrition prevail.

25 FEWS NET Ethiopia Food Security Outlook Update, August 2018.

26 FEWS NET Ethiopia Key Message Update, November 2018.

27 FEWS NET Ethiopia Food Security Outlook, October 2018.

28 FEWS NET Ethiopia Food Security Outlook Update, December 2018.

29 FAO GIEWS Country Brief.

30 FEWS NET Ethiopia Key Message Update, July 2018.

31 FEWS NET Ethiopia Food Security Outlook, June 2018.

32 FEWS NET Ethiopia Food Security Outlook Update, August 2018.

33 IOM, Dec 2018.

34 IOM Ethiopia DTM Round 13, October 2018.

35 UNHCR Ethiopia Factsheet, December 2018.

36 FEWS NET Ethiopia Food Security Outlook, October 2018.

37 WFP Ethiopia Monthly Market Watch Report, June 2018.

38 WFP Ethiopia Monthly Market Watch Report, March 2018.

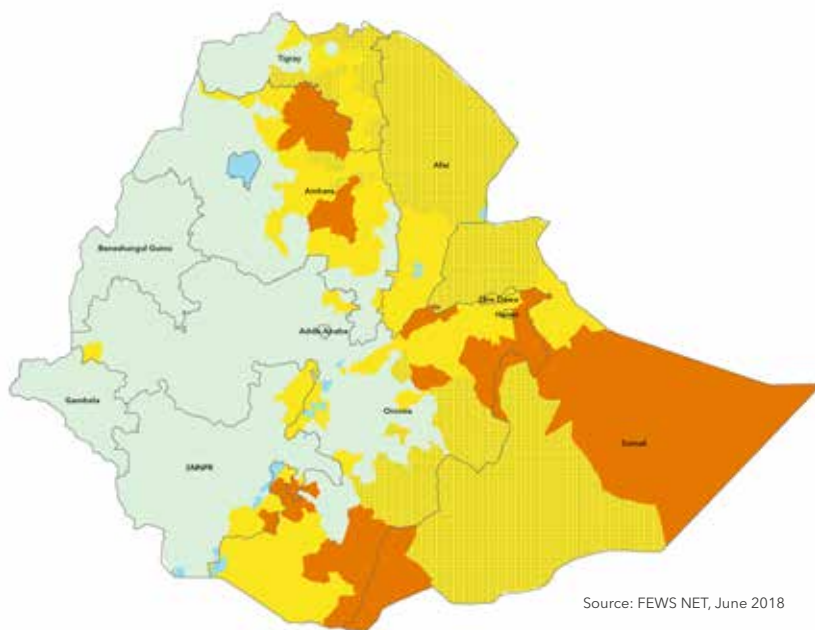
39 Humanitarian Disaster and Resilience Plan mid-year Review 2018.

40 Ethiopia Humanitarian Disaster and Resilience Plan 2018.

41 2016 Demographic Health Survey (DHS).

42 Ibid.

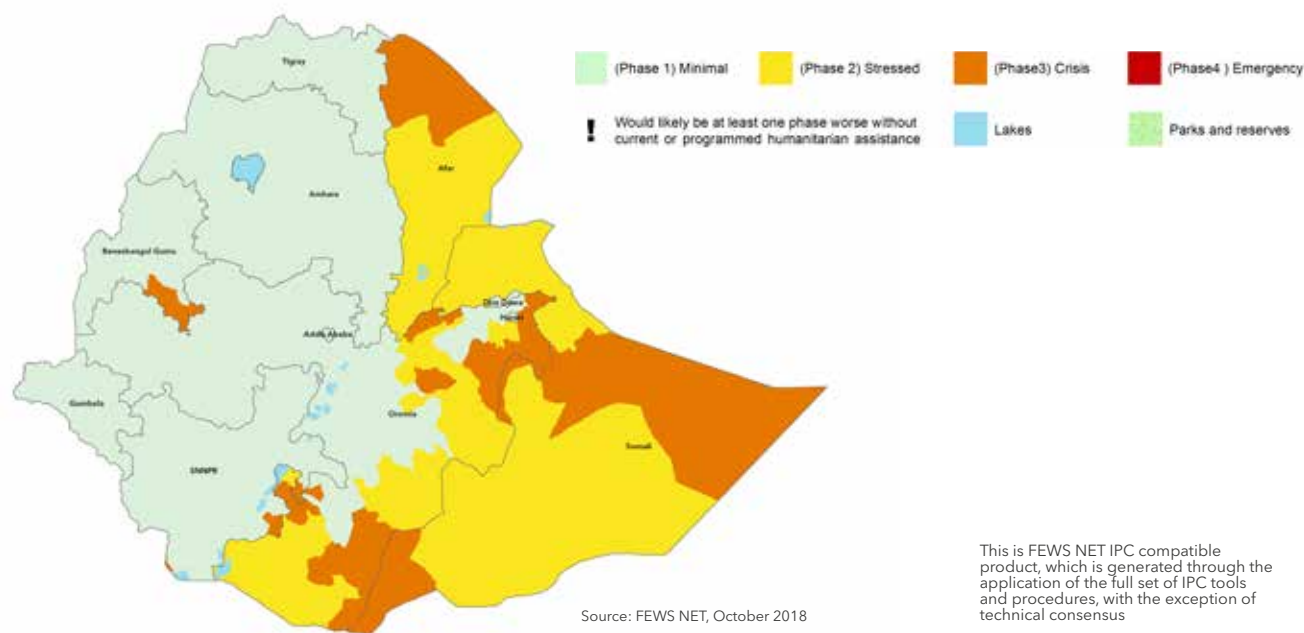
Map 5 Ethiopia IPC Acute Food Insecurity Phase Classification, June-September 2018



Source: FEWS NET, June 2018

This is FEWS NET IPC compatible product, which is generated through the application of the full set of IPC tools and procedures, with the exception of technical consensus

Map 6 Ethiopia IPC Acute Food Insecurity Phase Classification, October 2018-January 2019



Source: FEWS NET, October 2018

This is FEWS NET IPC compatible product, which is generated through the application of the full set of IPC tools and procedures, with the exception of technical consensus

The lack of health services capable of managing periodic spikes in acute malnutrition caseloads further exacerbate the risk of opportunistic disease outbreak, notably acute watery diarrhoea. Health coverage for drought-induced displaced people and pastoralist communities, in particular, fails to meet basic requirements.⁴³

These factors compound the already-fragile nutrition status of the population. Child-feeding practices are suboptimal with just seven percent of children aged 6-23 months consuming a minimum acceptable diet.⁴⁴ Micronutrient deficiencies in iron, vitamin A, folic acid, iodine and zinc remain common and anaemia prevalence among under-five children remains high at 57 percent.⁴⁵

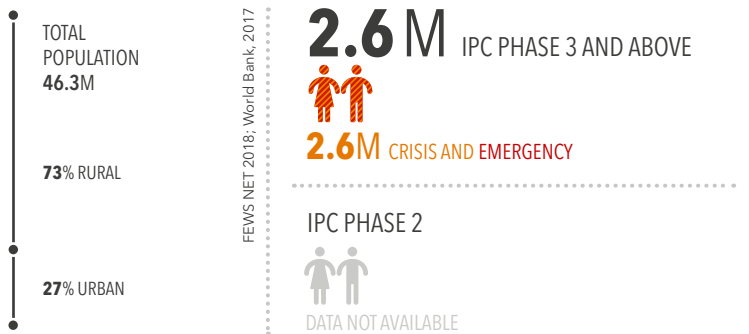
43 Ibid.

44 International Journal for Equity in Health 2017.

45 UNICEF.

ACUTE FOOD INSECURITY

2018



2017-18 CHANGE

▼ The number of food-insecure in need of urgent action **decreased** mainly as a result of favourable rainfall and above-average cereal production, despite the impact of climate hazards and communal conflicts.

2019 FORECAST

▼ The number of food-insecure in need of urgent action is forecast to **decrease** in 2019.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION



Climate shocks



Conflict/insecurity



Economic shocks

- Despite improvement in pastoral conditions, the impact of the severe 2016-17 drought still affected agropastoral livelihoods in northern and eastern ASALs.
- More than four in five refugees and asylum seekers live in camps with limited access to basic needs and 100 percent dependence on food assistance.
- Drought-prone northern areas are often affected by intercommunal conflicts and more than four in five live in poverty in Turkana, Mandera and Wajir.
- October–December short rains critical for crop and livestock production in ASALs were poor, curbing recovery.
- Widespread flooding in April/May damaged infrastructure and displaced around 300 000 people.

MALNUTRITION INDICATORS



510 600 children under five years acutely malnourished, of whom **85 100** affected by SAM.

Kenya FS Steering Group, Aug 2018



22% of children aged 6–23 months received 'Minimum Acceptable Diet' for growth and development.

DHS, 2016



35% of households lacking access to safe drinking water.

DHS, 2016



Poor child care practices, high morbidity, low literacy, poverty, and limited access to health care and basic services were key determinants of malnutrition.



41% of infants (up to 6 months old) exclusively breastfed.

DHS, 2016



26% of children aged 0–59 months stunted (20–<30% = high).

DHS, 2016

DISPLACEMENT



311 000 people were displaced by floods mainly in the Tana River, Turkana, Mandera, and Kilifi counties.

IOM, Jul 2018



471 700 refugees and asylum-seekers mainly from Somalia, South Sudan, DRC, Ethiopia, Burundi and the Sudan.

UNHCR, Dec 2018



The World Bank reclassified **Kenya's** economy as lower-middle income in 2014, but nearly half of Kenyans live below the poverty line. The most severe conditions exist in the arid and semi-arid conflict-prone north, which accounts for 80 percent of the country's land-mass.

ACUTE FOOD INSECURITY OVERVIEW

The overall number of acutely food-insecure people was estimated at 2.35 million in January 2018, 30 percent down from the estimate of 3.4 million in October 2017, but still seven percent higher than the caseload of 2.2 million estimated in January 2017.⁴⁶ Despite the significant improvements recorded in most livelihood zones, in January 2018, *Crisis* (IPC Phase 3) food insecurity levels still persisted in several pastoral and agro-pastoral areas, including parts of Turkana, Marsabit, Mandera, Wajir, Tana River, Kajado, Isiolo and Garissa counties.

In August 2018, 700 000 people in arid and semi-arid (ASAL) counties were facing acute food insecurity (IPC Phase 3 and higher) and required urgent humanitarian assistance, a significantly lower figure than the 2.55 million identified in February 2018 after the last short rains assessment.⁴⁷

FEWS NET predicted a deterioration in food security in the latter quarter of the year with the number of poor households in *Crisis* (IPC Phase 3) expected to increase in Turkana, Samburu, Wajir and Garissa counties.⁴⁸ While most households in marginal agricultural areas were able to meet their minimum food needs (IPC Phase 1), consuming two to three meals per day, most households in pastoral areas were *Stressed* (IPC Phase 2), reportedly consuming one to two meals per day.

The number of people in need of urgent humanitarian food and livelihood assistance peaked in February when 2.6 million people in the conflict-affected arid and semi-arid lands (ASAL) were facing acute food insecurity and needed immediate humanitarian assistance (IPC Phase 3 or above). By August this number had fallen to 700 000.

FACTORS DRIVING ACUTE FOOD INSECURITY

Climate shocks

In mid-2018, food security was buoyed by exceptionally abundant March-May 2018 "long rains" (one of the wettest seasons in about 70 years), markedly improving crop and livestock production. In key growing areas of the Rift Valley and Western provinces, the major long-rains harvest, accounting for about 75 percent of the national yearly cereal production, was estimated at 10-15 percent above-average despite localized crop losses due to floods.⁴⁹ By contrast, the output of beans, more vulnerable to excess moisture, was below-average. In pastoral areas, abundant pasture and water availability drove atypically good livestock body conditions, resulting in above average milk production and livestock prices.

However, at the peak of the rains in April, flooding caused widespread damage. By May, approximately 150 people had died and around 310 000 were displaced across 40 counties.⁵⁰ Cropland and irrigation infrastructure, including pumps and pipes, were

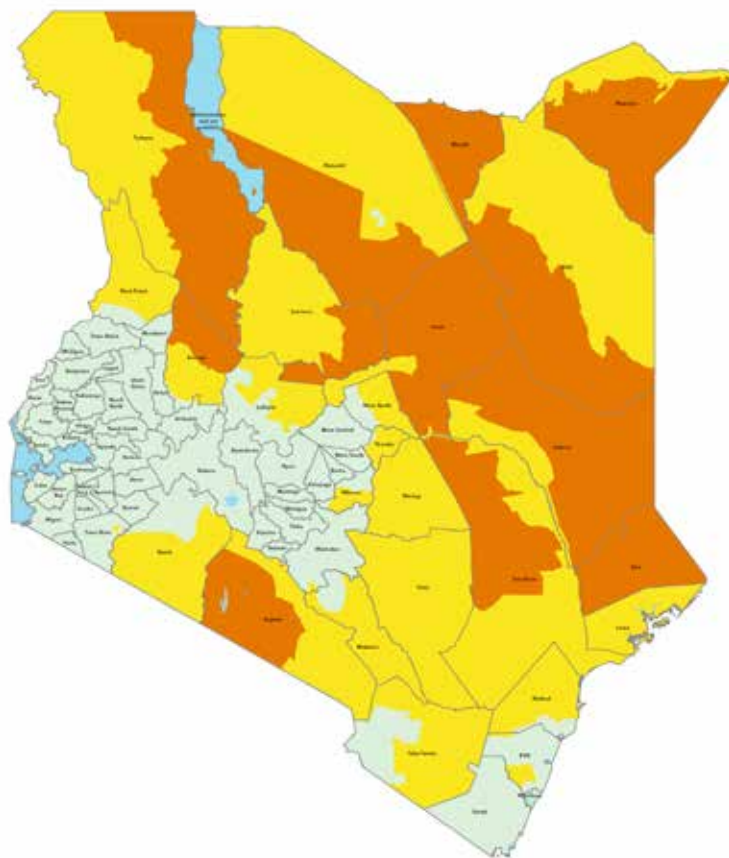
46 FAO GIEWS. Kenya Country brief 2018.

47 IPC.

48 FEWS NET. Kenya Food security outlook. December 2018.

49 FAO.

50 <https://reliefweb.int/disaster/ff-2018-000030-ken>

Map 7 Kenya IPC Acute Food Insecurity Phase Classification, February-May 2018

This is FEWS NET IPC compatible product, which is generated through the application of the full set of IPC tools and procedures, with the exception of technical consensus



Source: FEWS NET, February 2018

extensively damaged. Standing crops in Turkana, Tana River, Embu, Kitui, Makueni, Narok, Taita Taveta, and Kilifi counties were damaged. Health facilities, schools, markets and roads were destroyed, affecting access to health and education, the supply of food commodities and medical provisions.⁵¹

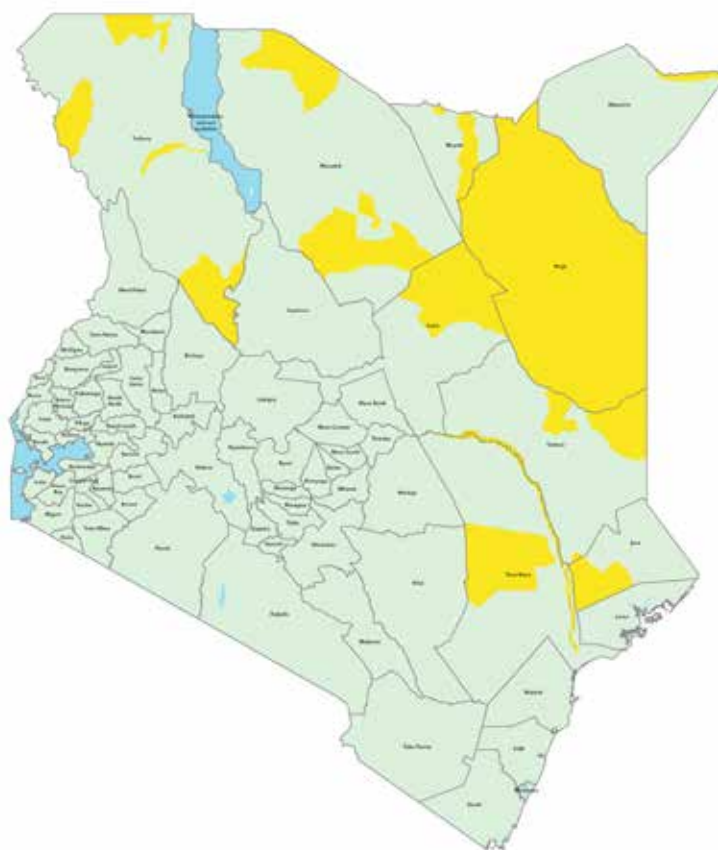
The short rains harvest, which accounts for just 25 percent of the yearly aggregate cereal production but is critical in south-eastern and coastal marginal agricultural areas, where it provides up to 60 percent of the total annual cereal output, was expected to be 70 percent below-average, as the October-December rains were characterized by an erratic distribution and poor precipitation amounts.

The short rains are also vital for replenishment of rangeland resources in northern and eastern pastoral livelihood zones, where poor rainfall distribution and long dry spells undermined water and forage resources. As a result, an increased reliance on consumption-based coping strategies was reported in pastoral north-eastern Garissa and Wajir counties and in agro-pastoral eastern and coastal Makueni, Tharaka Nithi, Kilifi and Taita Taveta counties in November.⁵²

Fall armyworm infestations in the mixed farming and agro-pastoral livelihood zones caused substantial destruction to the maize crop and subsequent reduction in maize production. Locust invasions, mainly in Marsabit and Turkana, invaded both pasture and browse.

51 Govt. Kenya, 31 Aug 2018.

52 FEWS NET. Kenya Food Security Outlook. December 2018.

Map 8 Kenya IPC Acute Food Insecurity Phase Classification, June-September 2018

This is FEWS NET IPC compatible product, which is generated through the application of the full set of IPC tools and procedures, with the exception of technical consensus



Source: FEWS NET, October 2018

Conflict/insecurity

Conflict over grazing is usually minimal in October as livestock and wild animals are driven to wet season grazing areas. However, following the poor performance of the short rains, large numbers of camels from Isiolo county migrated into Tharaka Nithi county in October, increasing the potential for conflict. Conflict incidents over forage were reported in Kitui county, while in Isiolo, border disputes and communal tensions were reported along the Isiolo-Garissa border resulting in population displacement.⁵³ Terror-related incidences were reported in Lamu, Isiolo, Mandera and Moyale in Marsabit.

Economic shocks

In November, maize prices across key urban and rural reference markets ranged from near-average to 36 percent below the five-year average. The exception was in Garissa market, where maize prices were seven percent above the five-year average.⁵⁴ The proportion of Kenyans living on less than the international poverty line⁵⁵ declined from around 47 percent in 2005-06 to 36 percent in 2015-16. In the remote, sparsely populated north-eastern parts of the country (Turkana, Mandera, and Wajir), agro-climatic shocks affect those who depend on livestock and low-productivity agricultural activities. Here poverty rates are above 80 percent.⁵⁶

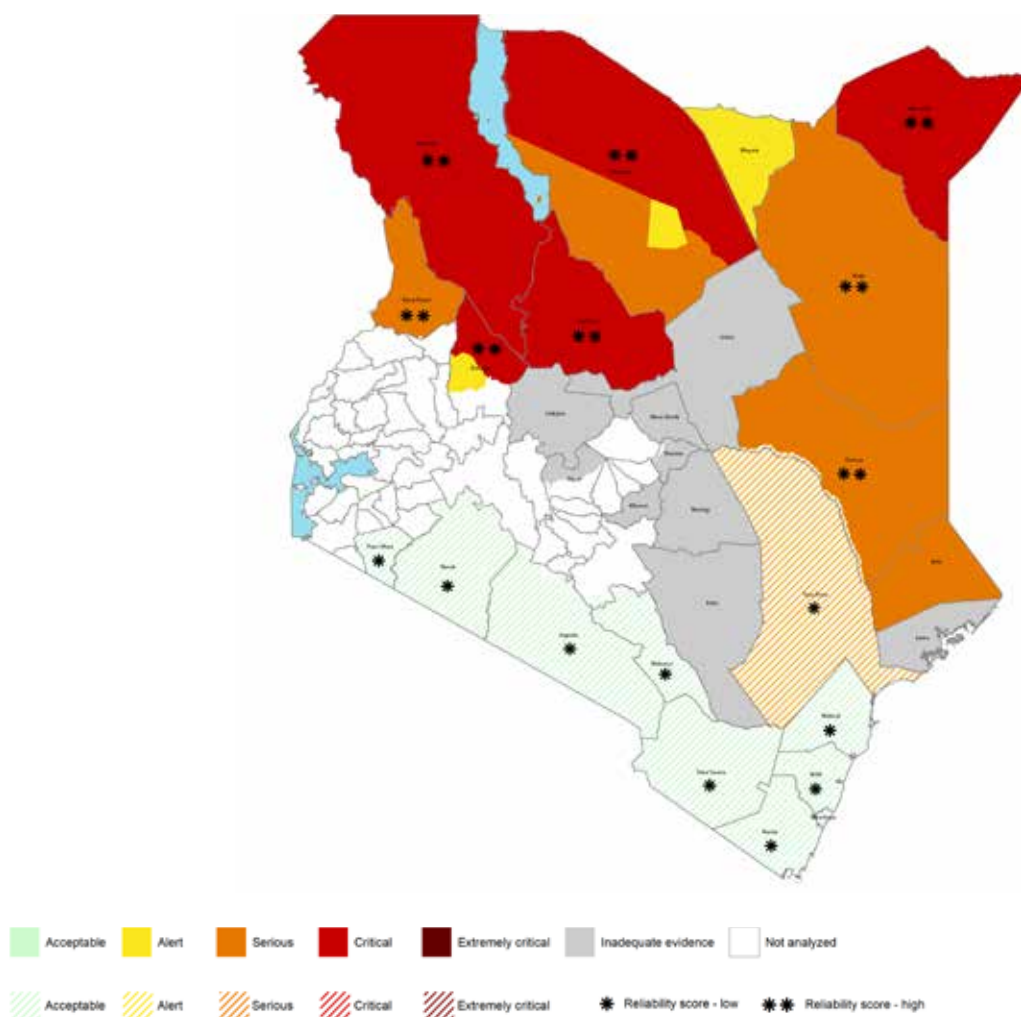
53 FEWS NET Kenya Food Security Outlook, December 2018 to May 2019.

54 Ibid.

55 USD 1.90 per day in 2011.

56 World Bank.

Map 9 Kenya IPC Acute Malnutrition situation, August 2018



Source: Kenya IPC Technical Working Group, August 2018

DISPLACEMENT

Kenya hosts over 470 000 refugees and asylum seekers, with around 257 000 from Somalia followed by 115 000 from South Sudan, 41 000 from the Democratic Republic of the Congo and 28 000 from Ethiopia.⁵⁷ About 44 percent of them reside in the Dadaab refugee camp in north-eastern Garissa county and 40 percent in Kukuma camp in north-western Turkana. Access to basic necessities including food, shelter, water and sanitation is often precarious because of the high concentration of people. Households predominantly rely on humanitarian food assistance to meet their minimum food needs. WFP and other humanitarian agencies typically deliver a full ration of 2 100 kilocalories, but some refugees are

receiving about 85 percent of the full ration because of recent budgets cuts.⁵⁸ In December 2018–January 2019 these settlements were classified as *Stressed* (IPC Phase 2!), with humanitarian assistance preventing worse outcomes.

NUTRITION OVERVIEW

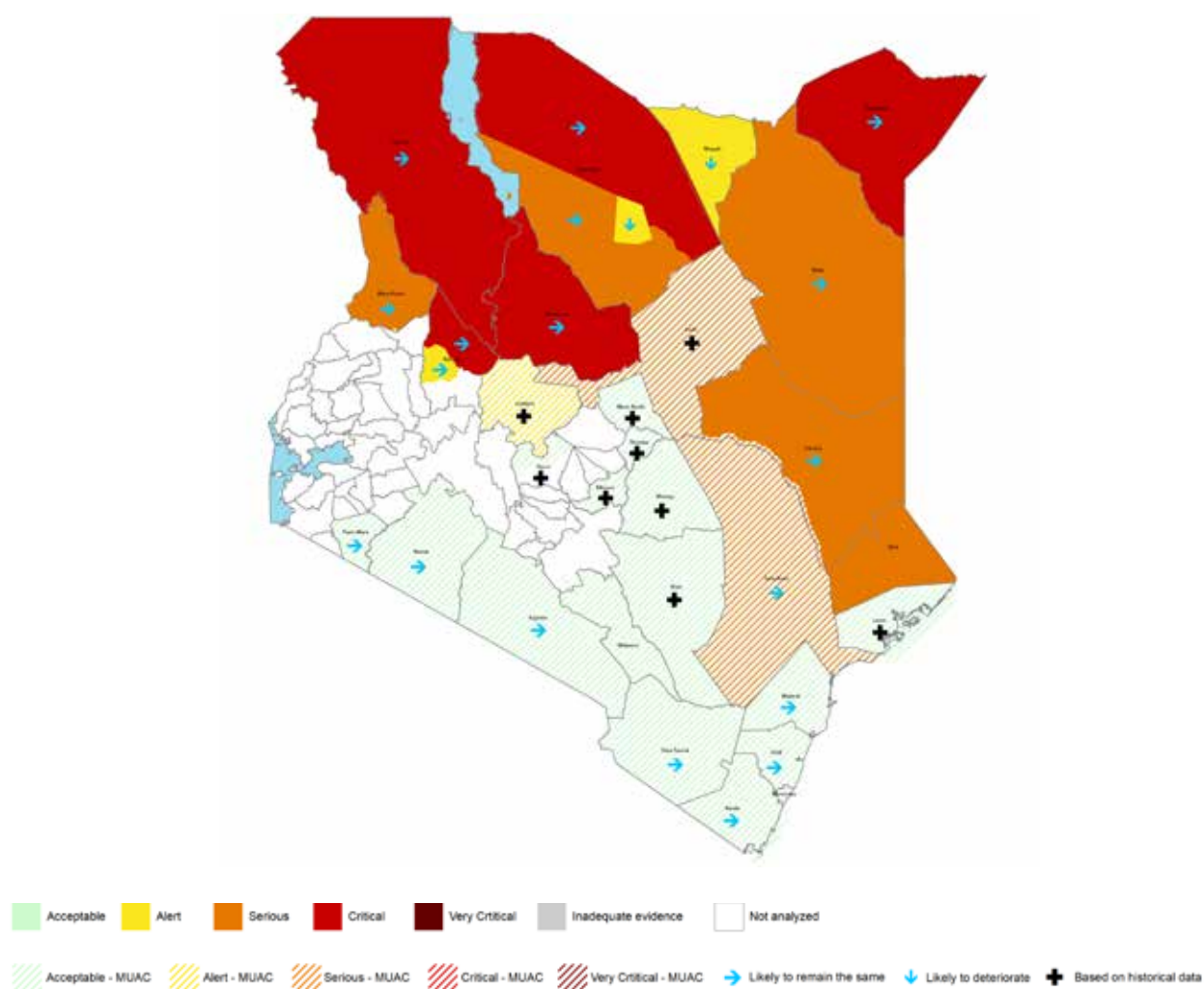
The last national nutrition survey conducted in Kenya reported that malnutrition for children aged 6–59 months had decreased since 2000, with stunting at 26 percent and wasting at 4.2 percent in 2014.⁵⁹

57 UNHCR. Kenya infographics. December 2018.

58 FEWS NET. Kenya food security outlook. December 2018.

59 National Bureau of Statistics Kenya and ICF International 2015. 2014 KDHS. Report. Rockville Maryland USA: KNBS and ICF International.

Map 10 Kenya IPC Acute Malnutrition situation, Sept - Nov 2018



Source: Kenya IPC Technical Working Group, August 2018

However, the rates of acute malnutrition were much higher in the ASALs. According to the August 2018 IPC acute malnutrition analysis, the situation in North Horr and in Turkana South, North and Central sub-counties had improved since the same time the previous year, but the levels remained above 15 percent in Turkana, Samburu, Mandera, East Pokot, and North Horr and at 10–15 percent in West Pokot, Tana River, Garissa, and Wajir.⁶⁰

Nearly 511 000 children aged 6–59 months were estimated to require treatment for acute malnutrition in the ASALs and urban areas studied with over 85 000 severely acutely malnourished. Over 31 000 pregnant and lactating women were also in need of

treatment.⁶¹ Poor child-care practices, high morbidity, low literacy, poverty, and limited access to healthcare and basic services were identified as key determinants of malnutrition.⁶² Cholera was reported in 20 counties (nearly 6 000 cases) and measles outbreaks in six counties (744 cases with 66 confirmed).⁶³

More than half (51 percent) of rural households have no access to improved sanitation compared to 13 percent of urban households.⁶⁴

60 Government of Kenya. Long rains season assessment report. Kenya Food Security Steering Group. August 2018.

61 Government of Kenya. Long rains season assessment report. Kenya Food Security Steering Group. August 2018.

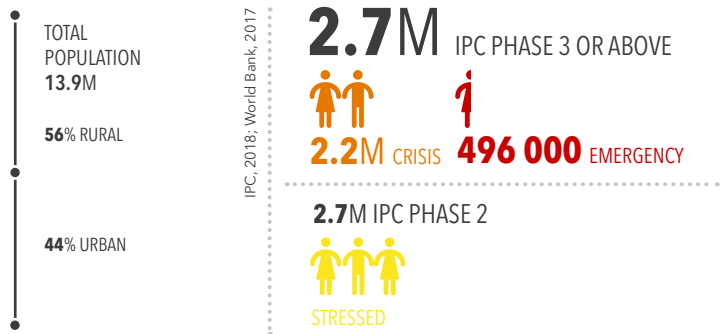
62 Ibid.

63 UNICEF.

64 Development initiatives report. Enhancing access to safe water and improved sanitation. Are we on track? December 2018.

ACUTE FOOD INSECURITY

2018



2017-18 CHANGE

▼ The number of food-insecure in need of urgent action **decreased** mainly as a result of partial recovery from the devastation caused by drought, despite floods, insecurity and localized inter-communal conflict.

2019 FORECAST

▼ The number of food-insecure in need of urgent action is forecast to **decrease** in 2019.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION

- Conflict/insecurity**
- Climate shocks**
- Displacement**

- The 2016-17 poor rains were followed in 2018 by the heaviest April-June rains in nearly two decades in southern and central regions, destructive flooding, cyclones and dry spells.
- An escalation in armed conflict, attacks by Al-Shabaab, disputes over borders, resources and revenues, and unresolved clan grievances restricted food access.
- Poor "deyr" rains resulted in deteriorating livestock body

conditions and limited animal reproduction in central and northern areas, thus curbing the 2016-17 drought recovery.

- Poor rainfall and pest infestations resulted in a well below-average Gu-Karan cereal harvest in northwestern areas and an estimated below-average Deyr national output.
- Armed clashes, flooding, militia roadblocks and violent incidents against humanitarian actors limited access to those most in need.

MALNUTRITION INDICATORS

95 400 children under five years acutely malnourished, of whom **173 600** affected by SAM.

HNO, 2019

9% of children aged 6-23 months received 'Minimum Acceptable Diet' for growth and development.

Somali IYCNA, 2011

41% of households lacking access to safe drinking water.

JMP, 2015

Poor health services and health seeking behaviours, suboptimal IYCF practices, and the difficulties in accessing safe water further aggravated the nutrition situation.

33% of infants (up to 6 months old) exclusively breastfed.

Somali IYCNA, 2016

10% of children aged 0-59 months stunted (2.5- <10% = low).

FSNAU, 2016

DISPLACEMENT

1.6M displaced because of drought since Nov 2016 and **1.1M** in protracted displacement.

OCHA, Dec 2018

33 100 refugee and asylum seekers - mainly from Ethiopia and Yemen.

UNHCR, Dec 2018

87 500 returnees mainly from Kenya and Yemen.

UNHCR, Dec 2018



Somalia has slowly emerged from a 'failed' to a 'fragile' state since 2012, but it still faces environmental shocks, high levels of poverty, violence and political instability. During 2016-17 humanitarian assistance averted *Catastrophe* food insecurity levels for many households.

ACUTE FOOD INSECURITY OVERVIEW

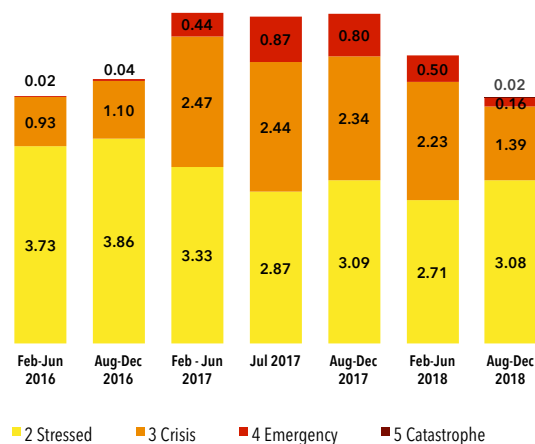
According to the IPC Acute Food Insecurity analysis conducted in January 2018, between February and June 2018 an estimated 2.7 million people were in IPC Phase 3 and above in the absence of humanitarian food assistance (HFA). Of these 2.2 million were in *Crisis* (IPC Phase 3) and 496 000 in *Emergency* (IPC Phase 4). Even though this was estimated excluding the mitigating effects of planned HFA, the 2018 peak number in IPC Phases 3 and 4 represents a slight decrease compared with the July 2017 peak figure of 3.3 million when the country was in the grip of a severe drought.

Another 2.7 million Somalis were classified in *Stressed* (IPC Phase 2) between February and June 2018, and required livelihood support to prevent future food security deterioration.

Of greatest concern were pastoralist areas in northern parts of Awdal and Woqooyi Galbeed regions, in southern parts of Sanaag region, and in eastern parts of Mudug and Galgaduud regions, where *Emergency* (IPC Phase 4) levels of food insecurity were likely through June.

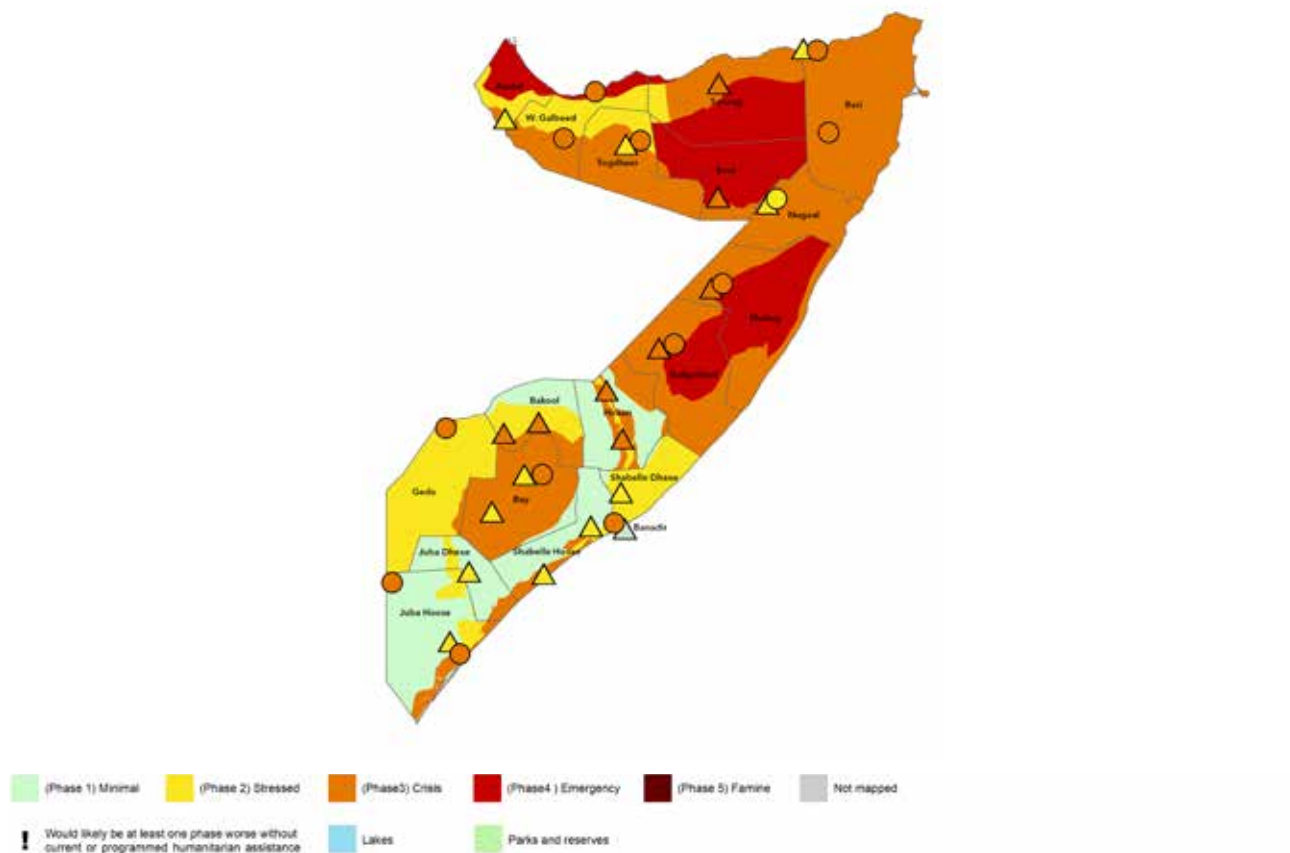
For the period August–December 2018, the number of people in IPC Phase 3 and above was expected to drop to 1.6 million in the absence of HFA. However, pressing humanitarian needs persisted among 17 000 people estimated to be facing *Catastrophe* (IPC Phase 5) levels of food insecurity.

Figure 5 Somalia, Number of people (millions) in IPC Phase 2 or above in 2016-2018



Source: Somalia IPC Technical Working Group

Map 11 IPC Somalia, IPC acute food insecurity situation, February-June 2018



Source: Somalia IPC Technical Working Group, January 2018

FACTORS DRIVING ACUTE FOOD INSECURITY

Climate shocks

Recovery from the devastation caused by drought that spanned four consecutive rainy seasons in 2016 and 2017 has been challenged by intense climatic events. The April-June *gu* season rains were the heaviest in nearly two decades in southern and some central regions, triggering riverine and flash flooding in low-lying areas. By June, flooding had affected 830 000 people and displaced 290 000.⁶⁵ In May, Cyclone Sagar brought torrential rainfall and flooding to the north-west along the coast of Puntland and flash flooding in the Bari region, resulting in livestock deaths, mass displacement and the destruction of farms, property and infrastructure, including roads, fishing boats, medical facilities, boreholes and water wells. Later, in these areas, the August-September *karan* rainy season was characterized

by an erratic distribution and in the north-western agro-pastoral Woqooyi Galbeed region, the 2018 *gu/karan* harvest was about 55 percent below average, also due to pest infestations.⁶⁶

Although floods caused crop losses, in riverine areas they induced farmers to expand plantings of off-season crops harvested in September and boosted yields in rain-fed areas. As a result the cereal output was estimated at almost 60 percent above the average of the previous five years.⁶⁷

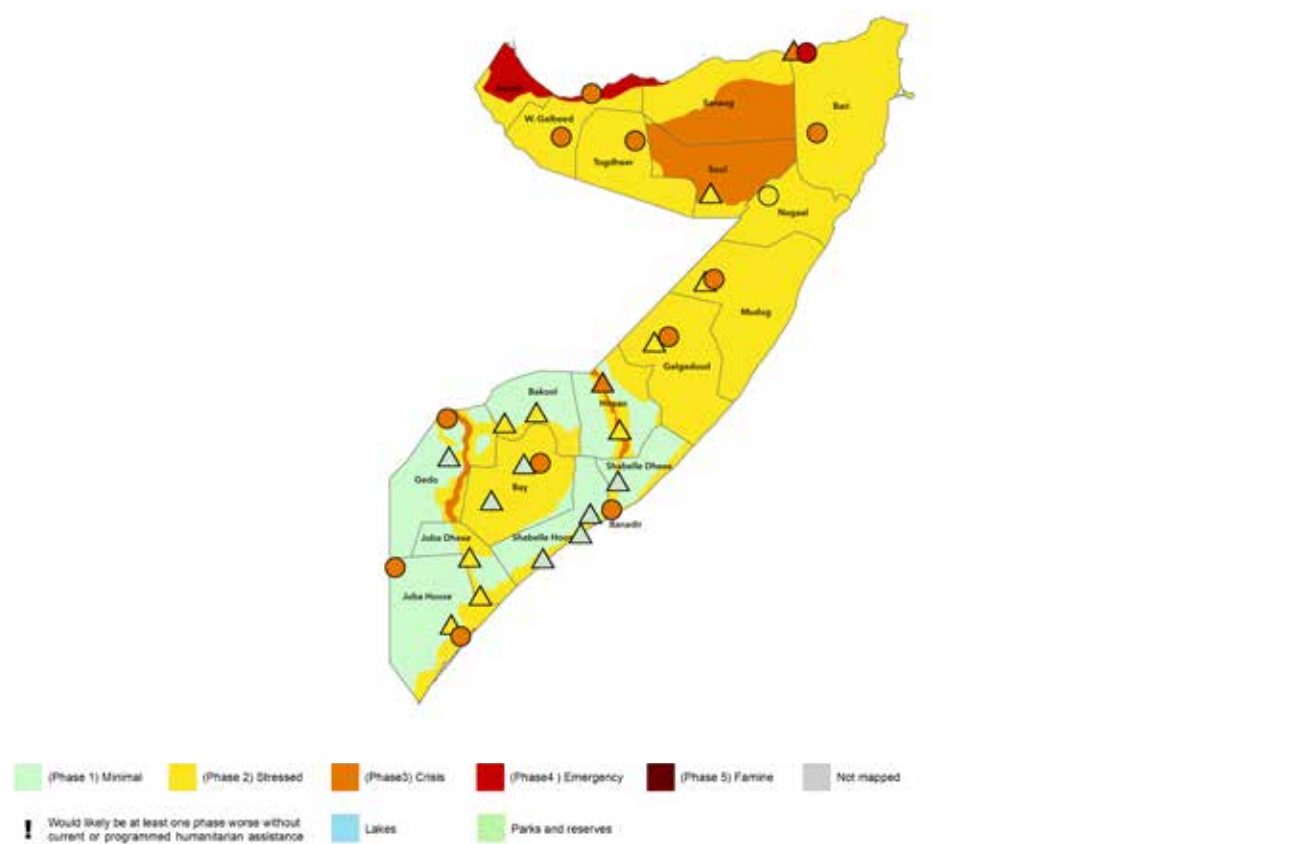
Acute food insecurity remained prevalent among pastoralist households who lost most of their animals during the 2016-2017 drought, among those affected by the April-May flooding and others who were affected by large-scale and protracted displacement due to a combination of conflict and natural hazards. However, for agro-pastoralist households food security improved substantially following the heavy *gu* rains, which regenerated rangeland resources, boosting livestock

65 OCHA. Somalia Humanitarian Snapshot. June 2018.

66 FAO GIEWS. Country Brief - Somalia November 2018.

67 Ibid.

Map 12 IPC. Somalia, IPC acute food insecurity situation, August-December 2018



Source: Somalia IPC Technical Working Group, August 2018

body conditions and allowing animal conception and reproduction. By contrast, in most central and northern regions, where the moisture surpluses accumulated during the *gu* season were less substantial, pasture and water were not sufficient, and livestock body conditions deteriorated.

Conflict/insecurity

For almost three decades, conflict has hampered humanitarian access to people in most urgent need, and restricted the ability of Somalis to support themselves economically.⁶⁸

Between July and November 2018 armed conflict escalated in several parts of Somalia. Resource- and clan-based conflicts were reported in Lower Shabelle region, northern Sool, Galgaduud, Sanaag and Bari regions. In southern Somalia military clashes between insurgents and the government of Somalia and allied African

Union Mission in Somalia (AMISOM) continued.⁶⁹ In the Middle Juba region clashes in July and August disrupted agricultural operations and caused a sharp decline in labour opportunities and wage rates.⁷⁰

An increasing number of illegal checkpoints manned by armed clan militias block road access and since the beginning of 2018, 90 violent incidents against humanitarian actors were reported, including the deaths of eight workers.⁷¹

DISPLACEMENT

During the first 11 months of 2018 there were 858 000 newly displaced people, with the total IDP caseload estimated at 2.6 million IDPs as of July 31.⁷² Meanwhile Somali refugees continued to return from countries of asylum with over 87 000 refugees having returned from countries including Kenya, Yemen, Djibouti and Libya

68 ECHO. Somalia factsheet. October 2018.

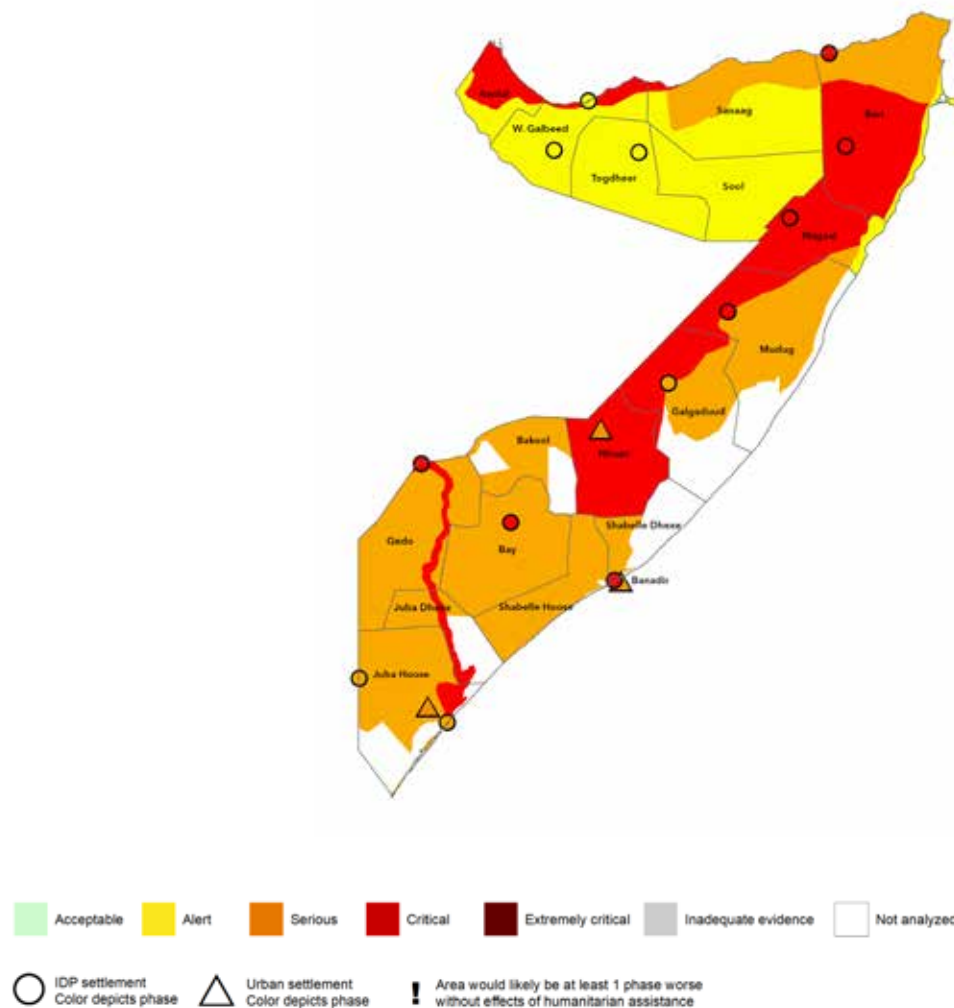
69 FSNAU. Quarterly Brief - Focus on Post-Deyr 2018 Season Early Warning.

70 FAO GIEWS. Country Brief - Somalia November 2018.

71 OCHA Humanitarian Bulletin Somalia 5 September - 4 October 2018.

72 UNHCR Somalia fact sheet 1-30 November 2018.

Map 13 Somalia IPC Acute Malnutrition situation, June - July 2018



Source: Somalia IPC Technical Working Group, June-July 2018

from 2014–2018.⁷³ Some 1.6 million Somalis have been displaced by drought since November 2016 and 1.1 million are in protracted displacement.⁷⁴

NUTRITION OVERVIEW

Results from 30 separate nutrition surveys conducted by the Food Security and Nutrition Analysis Unit (FSNAU) and partners between June and July 2018 indicate an improvement in the overall nutrition situation in Somalia compared to the same period in 2017. However, the levels of acute malnutrition among 6-59 month olds were still at high levels, with a median rate of 14 percent in the July 2018 *Gu* analysis compared with 17.4 percent the

previous year.⁷⁵ Twelve out of 33 populations surveyed in 2018 were above the Emergency threshold of 15 percent.

The median rate of SAM was 2.2 percent, rising to levels above four percent in the Mogadishu IDP settlement and the Guban pastoral livelihood population group. IDPs had some of the highest rates of malnutrition (GAM 11.9 percent), although this marked a modest improvement from the 13.9 percent registered in the 2017 *1* analysis.

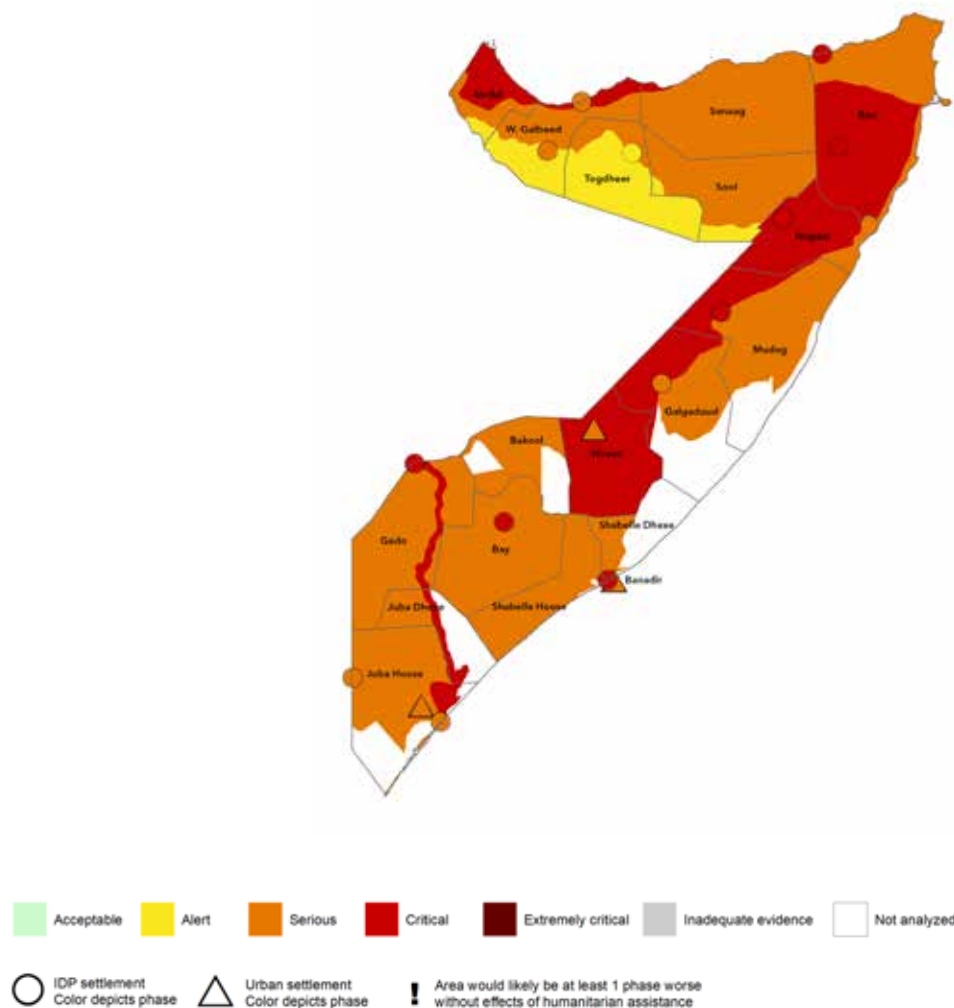
Prevailing food insecurity, the limited availability of health services, poor health-seeking behaviours and

73 UNHCR, Dec 2018.

74 OCHA, Somalia Humanitarian Bulletin, 1-31 Dec 2018.

75 FSNAU. Nutrition situation summary for Somalia. *Gu* 2018.

Map 14 Somalia IPC Acute Malnutrition situation, August-December 2018



Source: Somalia IPC Technical Working Group, June-July 2018

the difficulties in accessing safe water all undermine nutrition. High prevalence of micronutrient deficiencies, suboptimal breastfeeding and poor complementary feeding practices contributed to high levels of acute malnutrition among several populations.

Malnutrition in Somalia has proven to be a generational issue in the case of adolescent girls, as poor nutrition and subsequent poor health carries over from adolescence, through pregnancy, to the child.

The insecure environment exacerbated these problems particularly among displaced and socially marginalized groups. WASH infrastructure is not sufficient to meet the

demand of mass population influxes to urban centres.⁷⁶ Although the number of cases of cholera decreased since mid-July, the cumulative number reached 6 394 in October following the outbreak of the disease in December 2017.⁷⁷

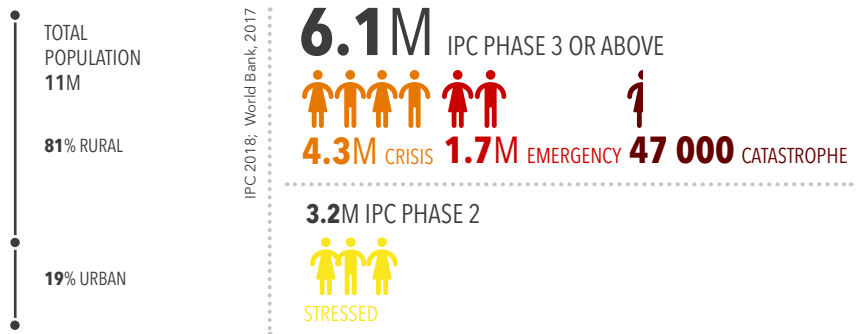
⁷⁶ HNO 2019.

⁷⁷ WHO EMRO Outbreak update - Cholera in Somalia, October 4, 2018.

SOUTH SUDAN

ACUTE FOOD INSECURITY

2018



2017-18 CHANGE

▶ The number of acutely food-insecure **remained stable** mainly due to the protracted conflict, displacement, high prices and climate hazards.

2019 FORECAST

▲ The number of food-insecure in need of urgent action is forecast to **increase** in 2019.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION

- Conflict/insecurity**
- Economic shocks**
- Climate shocks**

- Widespread violence drove large-scale displacement, disrupted livelihoods and restricted humanitarian access.
- Poor seasonal rains coupled with the negative impact of conflict on agricultural activities resulted in a record low 2018 crop production.
- Prices of key food commodities were up to three times levels of two years earlier due to tight supplies, insecurity-related trade disruptions and a weak local currency.
- Infestation levels of fall armyworm were generally low, but farmers did not have access to pesticides, and damage to maize and sorghum crops was reported.
- The agro-pastoralist county of Pibor faced increased cattle raiding, lack of trade flows and minimal humanitarian access because of road ambushes and lootings.

MALNUTRITION INDICATORS

860 000 children under five years acutely malnourished, of whom **258 000** affected by SAM.

HRP, 2019

Poor access to health and nutrition services, high morbidity, extremely poor diets and poor sanitation and hygiene contributed to a dire nutrition situation.

MICS, 2010

28% of households lacking access to safe drinking water.

MICS, 2010

45% of infants (up to 6 months old) exclusively breastfed.

31% of children aged 0–59 months stunted (>30% = very high).

MICS, 2010

DISPLACEMENT

1.87M people were internally displaced.

OCHA, Dec 2018

291 800 refugees – mainly from the Sudan, DRC and Ethiopia.

UNHCR, Dec 2018

658 100 former IDPs and South Sudanese refugees have returned to there area of origin.

IOM, Jul 2018



Following five years of conflict, security in **South Sudan** improved in 2018. However, recurrent displacement, record low cereal production, loss of livelihoods and high food prices continued to have a terrible impact on people's livelihoods and ability to access food.

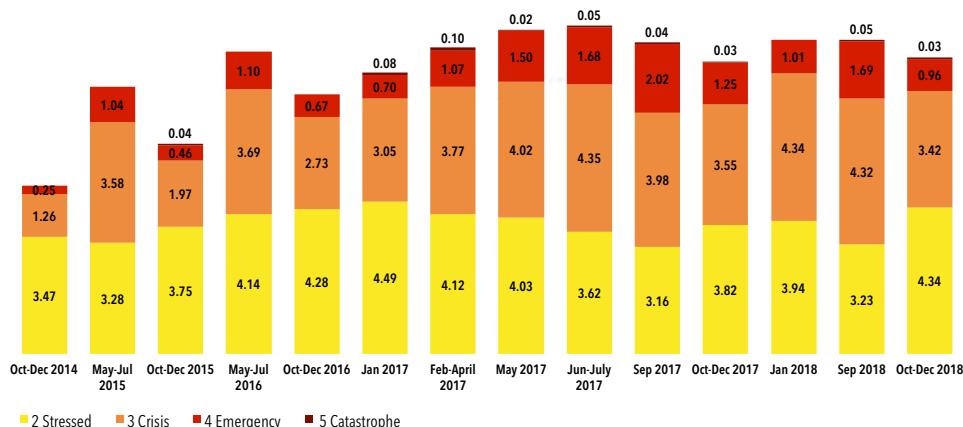
ACUTE FOOD INSECURITY OVERVIEW

As of September 2018, corresponding to the end of the lean season/green harvest period, the number of people facing *Crisis* (IPC Phase 3) or worse acute food insecurity reached 6.06 million people, accounting for nearly 60 per cent of the population. These included 1.69 million people (16 percent) in *Emergency* (IPC Phase 4) and 4.32 million people (42 percent) in *Crisis* (IPC Phase 3). An additional 3.2 million people, corresponding to a third of the population, were in *Stressed* (IPC Phase 2). These numbers reflect extremely high levels of acute food insecurity, similar to one year earlier.

Of highest concern were the 47 000 people facing *Catastrophe* (IPC Phase 5) in Leer and Mayendit (former Unity state), Yirol East and Yirol West (former Lakes state), Canal/ Pigi (former Jonglei state), Panyikang (former Upper Nile state), and Greater Baggari in Wau (former Western Bahr El Ghazal state).

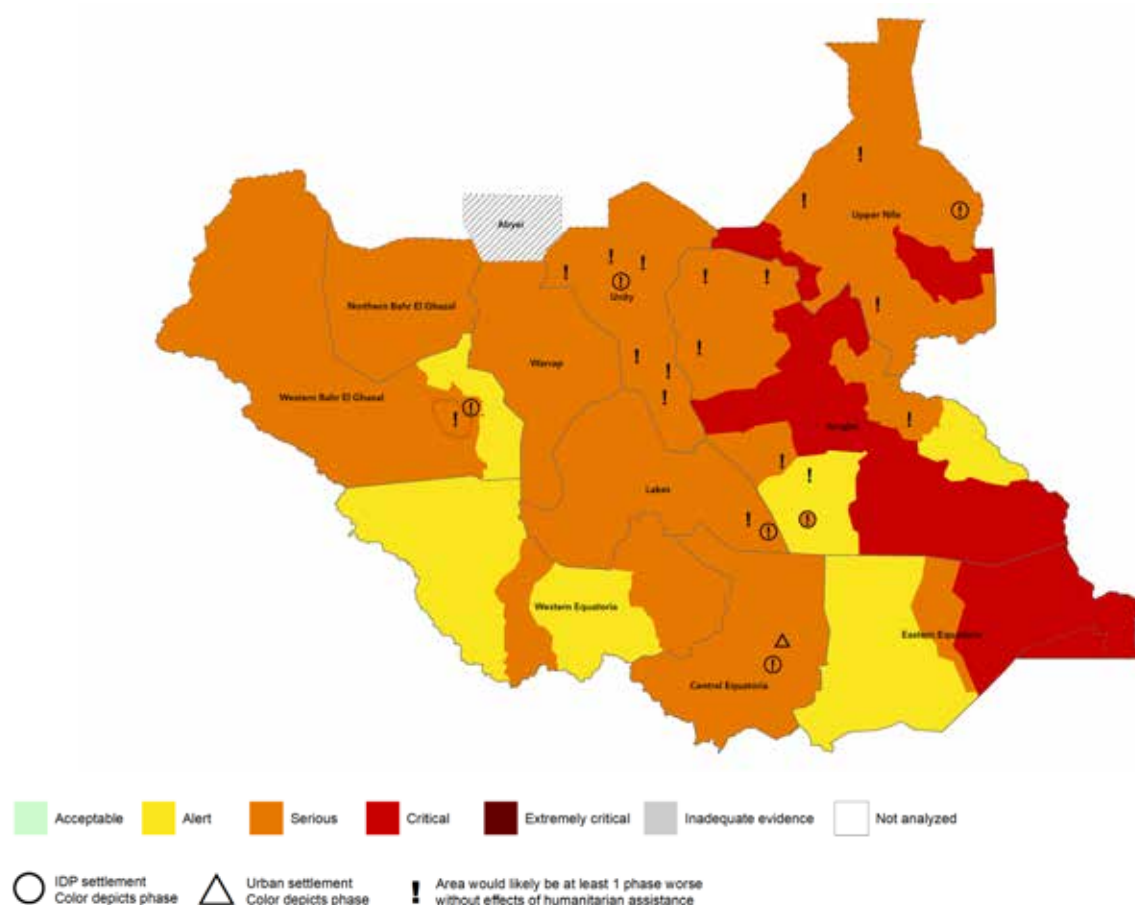
Across the country some 31 counties were classified in *Emergency* (IPC Phase 4), which is associated with large food consumption gaps, very high levels of acute malnutrition and excess mortality or extreme loss of livelihood assets, and another 39 counties in *Crisis* (IPC Phase 3). Just three counties were classified in *Stressed* (IPC Phase 2).

Figure 6 Number of people (millions) in IPC Phase 2 or above in 2014 - 2018



Source: South Sudan IPC Technical Working Group

Map 15 South Sudan, IPC Acute food insecurity, January 2018



Source: South Sudan IPC Technical Working Group, January 2018

Some improvements were expected in the post-harvest period between October and December 2018 with 4.4 million people in IPC Phase 3 or above, compared to 4.8 million a year earlier. However, extreme levels of acute food insecurity were expected to persist with *Catastrophe* outcomes (IPC Phase 5) still likely towards the end of 2018 in Leer and Mayendit (former Unity state), Pibor (former Jonglei state), Panyikang (former Upper Nile state) and Greater Baggari in Wau (former Western Bahr El Ghazal state).

FACTORS DRIVING ACUTE FOOD INSECURITY

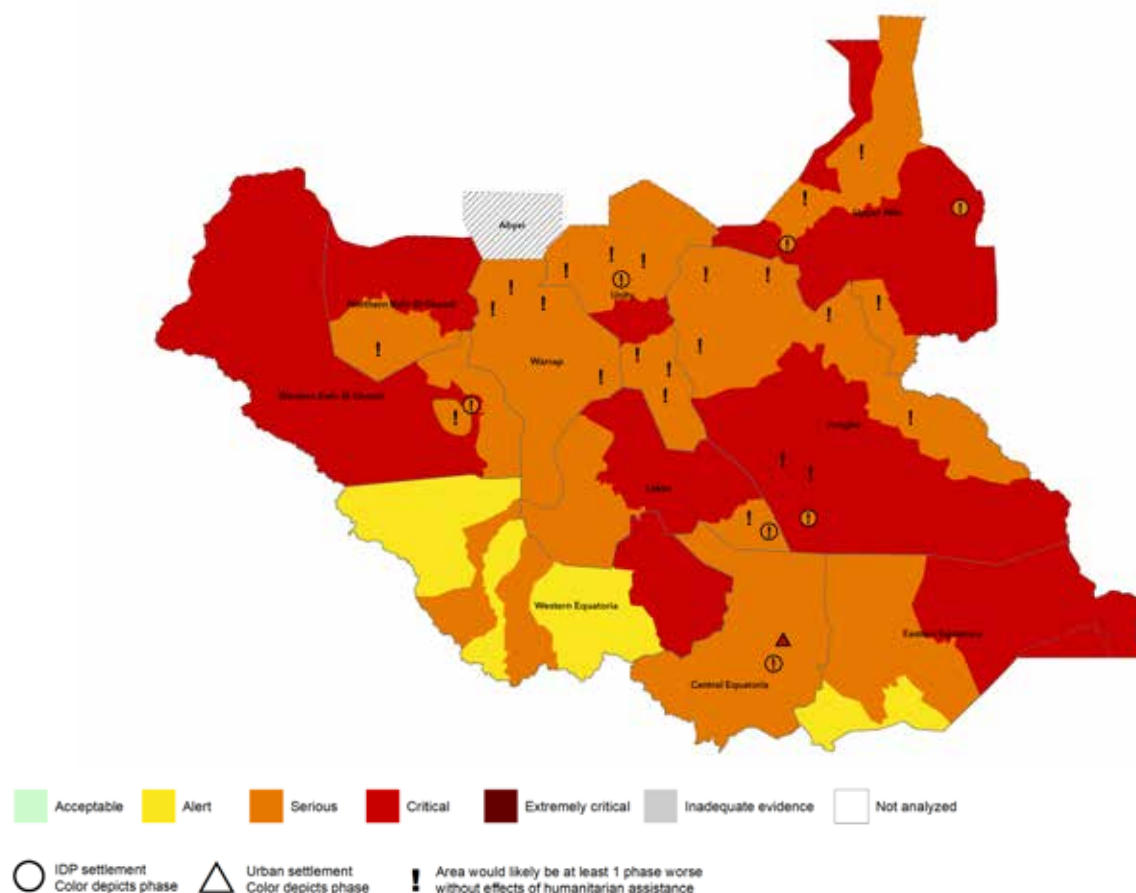
Conflict/insecurity

Hostilities, inter-communal violence and cattle-raiding continued to cause displacement and to restrict humanitarian access, mainly in the former Central Equatoria, Western Bahr-El-Ghazal, Unity, Jonglei and Upper Nile states. By the end of 2018, about 1.9 million people remained internally displaced across the country.⁷⁸

A significant number (658 148 in the first half of the year⁷⁹) were reportedly able to return home and engage in farming activities, and a slight increase in planted area was expected compared to 2017. However, widespread violence and large-scale and recurrent displacement continued to impair agricultural activities,

78 OCHA December 2018.

79 IOM July 2018.

Map 16 South Sudan, IPC Acute food insecurity, May-July 2018

Source: South Sudan IPC Technical Working Group, January 2018

constraining access to fields and inputs, and damaging and destroying households' productive assets. Inputs continued to be in short supply and increasingly expensive.

South Sudan is one of the most dangerous places in the world to be a humanitarian worker. By May, the number of aid workers killed in the country since conflict broke out in December 2013 reached 101.⁸⁰ Each month between July and September there were reportedly about 65–80 security incidents, most of them targeting humanitarian actors.⁸¹ Approximately 1.5 million people, mostly in need of lifesaving humanitarian assistance, were located in counties with severe access constraints. Lack of access also prevented humanitarian organizations from having a clear understanding of needs.⁸²

Humanitarian assistance during the first quarter of 2018 reached a smaller percentage than in previous years, as the growth of the population in need outpaced response. In April, FEWS NET warned that the absence of assistance would remove a primary food source and likely drive increased conflict over remaining scarce resources, increasing movement restrictions and preventing households from accessing food from other sources.⁸³

Economic shocks

As a consequence of the severe impact of the protracted conflict, the country has been displaying, since mid-2016, all the signs of macro-economic collapse, with output contracting, hyper-inflation and depreciation of the local currency in the parallel market. Despite some encouraging developments beginning in mid-2018 following the signing of the peace agreement, which boosted investors' confidence over greater political

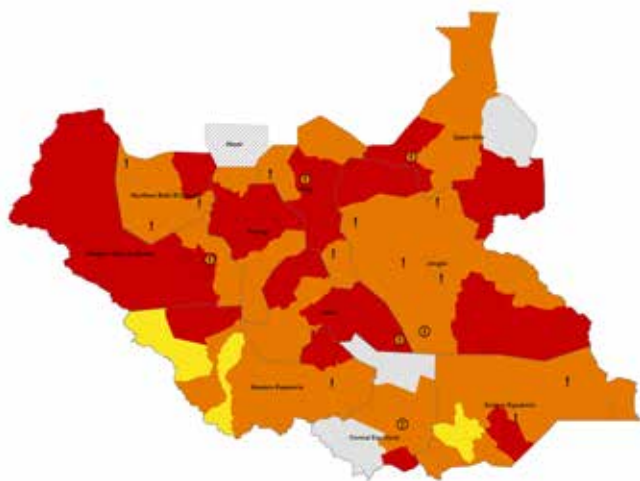
80 OCHA. South Sudan Humanitarian Bulletin Issue, 5 May 2018.

81 OCHA. South Sudan Humanitarian Access Snapshot, September 2018.

82 WFP news release.

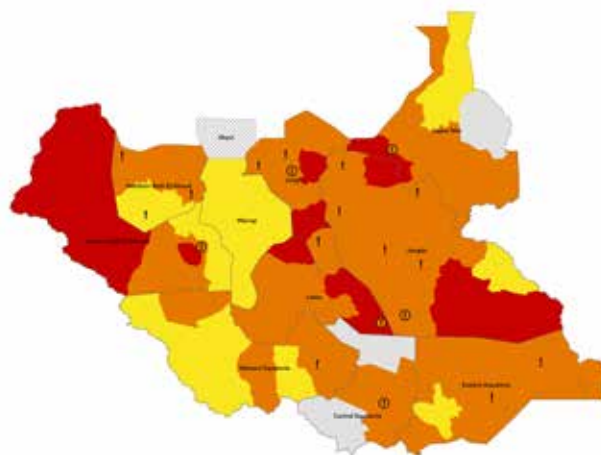
83 FEWS NET South Sudan food security outlook. April 2018.

Map 17 South Sudan, IPC Acute food insecurity, September 2018



Source: South Sudan IPC Technical Working Group, September 2018

Map 18 South Sudan, IPC Acute food insecurity, October-December 2018



Source: South Sudan IPC Technical Working Group, September 2018

stability and the resumption of oil production, the macroeconomic situation has remained dire. The country's real Gross Domestic Product (GDP) contracted by about 11 percent in 2015 and 2016, by about seven percent in 2017 and by a further 3.5 percent in 2018.

In the capital Juba, prices of key staples (maize, sorghum, wheat, cassava and groundnuts) continued their sustained upward trend in the first part of 2018, but subsequently declined by 15-50 percent in the second part of the year⁸⁴ when the local currency appreciated following the signing of the peace deal and the newly harvested 2018 crops boosted food availability. However, prices of key food commodities as of end-2018 were still up to three times their levels of two years earlier, due to widespread insecurity disrupting transport and trade activities, a tight supply situation, hyperinflation and a still significantly depreciated local currency.⁸⁵

Although infestation levels of fall armyworm were generally low, farmers could not afford to buy pesticides, and could only resort to traditional practices to control the pest, which further constrained crop production, mainly of maize and sorghum.⁸⁶

84 FAO GIEWS country brief.

85 Ibid.

86 Ibid.

Climate shocks

Prolonged dry spells and below-average rains diminished yields in the latter half of 2018 in southern bimodal rainfall areas of the Greater Equatoria region, and in several northern and central uni-modal rainfall areas.⁸⁷ According to the results of the 2018 joint FAO/WFP Crop and Food Security Assessment Mission, 2018 aggregate cereal production was estimated at about 745 000 tonnes, 2.5 percent down from 2017, about 15 percent below the average of the previous five years and the lowest recorded output since the start of the conflict in 2013.⁸⁸

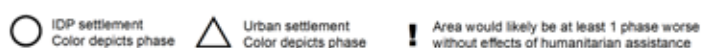
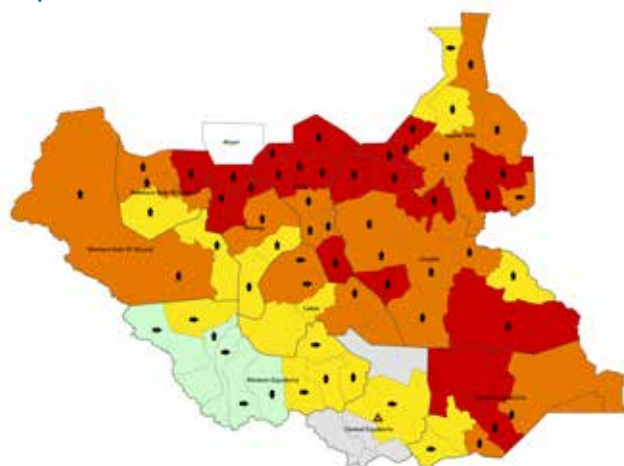
In addition, the rainy season, which frequently renders roads impassable, hindered humanitarian access to populations in need.⁸⁹

87 Ibid.

88 FAO/WFP Crop and Food Security Assessment Mission to South Sudan, March 2019.

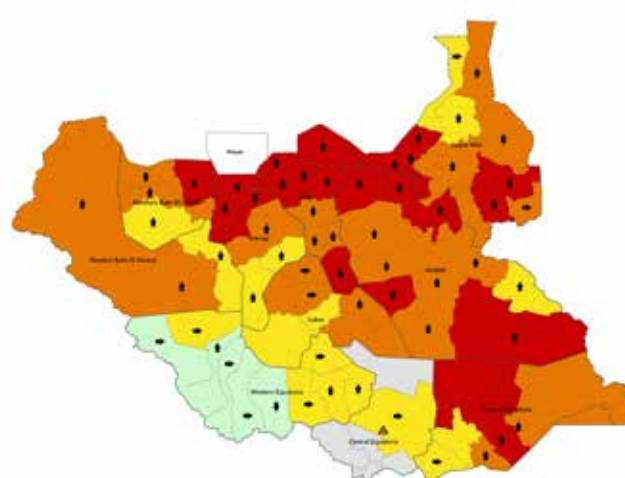
89 OCHA, South Sudan Humanitarian Access Severity Overview, September 2018.

Map 19 South Sudan IPC Acute Malnutrition situation, September 2018



Source: South Sudan IPC Technical Working Group, September 2018

Map 20 South Sudan IPC Acute Malnutrition situation, October-December 2018



Disclaimers: Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: South Sudan IPC Technical Working Group, September 2018

NUTRITION OVERVIEW

In January 2018, the nutrition situation reflected typical post-harvest seasonal improvements, with lower GAM rates.⁹⁰ However, in the lead-up to the lean season of May–July 2018, the nutrition situation deteriorated significantly as a result of high levels of food insecurity, outbreaks of diarrhoea and other illness, and limited access to services because of the heavy rains.

During this period, Leer and Mayendit in Unity and Longochuk and Renk of Upper Nile were expected to reach *Extreme Critical* levels (IPC Phase 5) according to the IPC for acute malnutrition thresholds (GAM \geq 30%). Most counties in the Greater Upper Nile, Northern Bahr el Ghazal, Warrap and parts of Eastern Equatoria were expected to reach *Critical* (IPC Phase 4) levels.

By September, acute malnutrition levels had improved and were slightly better than during the same period the previous year with no county reporting GAM rates above 30 percent. Nutrition was expected to further improve between October and December 2018 thanks to the seasonal availability of local produce, increased availability of fish and milk, and better access to markets and key services.

Levels of acute malnutrition are attributed to severe food insecurity, poor access to health and nutrition services, high illness levels, extremely poor diets and poor sanitation and hygiene.⁹¹ Only 12 percent of 6–23 month olds are given meals frequently enough and 45 percent of infants aged under six months are exclusively breastfed. Sanitation levels are extremely low with two thirds of the population defecating in the open.⁹² Insecurity continues to affect humanitarian assistance, with reports of confiscation of nutrition supplies. Malaria is the top cause of morbidity and mortality, responsible for 47 percent of deaths in 2018.⁹³

90 IPC country analysis.

91 IPC Acute Malnutrition Sept 2018.

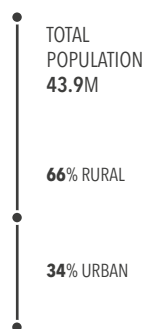
92 MICS 2010.

93 OEW, WHO, Week 49, 7 Dec 2018.

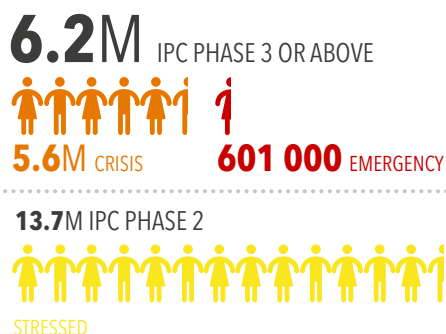
THE SUDAN

ACUTE FOOD INSECURITY

2018



IPC, 2018; World Bank, 2017



2017-18 CHANGE

▲ The number of food-insecure in need of urgent action **increased** mainly as a result of the economic deterioration.

2019 FORECAST

▲ The number of food-insecure in need of urgent action is forecast to **increase** in 2019.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION



Economic shocks



Conflict/insecurity



Climate shocks

- Food prices escalated as the currency depreciated sharply and fuel shortages pushed up production and transport costs.
- Dry spells during 2017 contributed to a reduced cereal harvest, while floods in 2018 affected 222 000 people across the country.
- Lack of income-earning opportunities made the refugee population highly vulnerable.
- In Darfur displacement fuelled persisting conflicts between herders and farmers over land and natural resources.

MALNUTRITION INDICATORS



2.4M children under five years acutely malnourished, of whom **700 000** affected by SAM.

HRP, 2018



15% of children aged 6–23 months received 'Minimum Acceptable Diet' for growth and development.

MICS, 2014



32% of households lacking access to safe drinking water.

MICS, 2014



Families cutting health spending and reducing the quantity and quality of meals ensured rates of acute malnutrition remained extremely high.



55% of infants (up to 6 months old) exclusively breastfed.

MICS, 2014



38% of children aged 0–59 months stunted (>30% = very high).

MICS, 2014

DISPLACEMENT



21 624 newly displaced people were registered between January and July 2018.

IOM, Jul 2018



1.1M refugees – mainly from South Sudan, Eritrea, Syria and Ethiopia.

UNHCR, Dec 2018



113 500 registered returnees between January and July 2018.

IOM, Jul 2018



Since late 2017, the **Sudan** has faced a spiralling parallel exchange rate, dwindling foreign currency reserves and increasing inflation rates, resulting in reduced imports of fuel and agricultural inputs. Rising poverty levels have constrained access to food and drinking water.

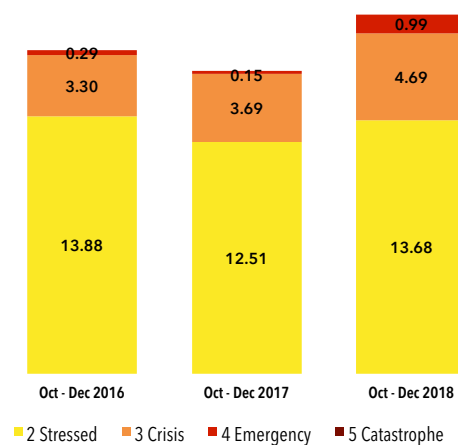
ACUTE FOOD INSECURITY OVERVIEW

According to the IPC Acute Food Insecurity analysis carried out in April 2018, between May and July, which corresponds to the beginning of the lean season, 6.2 million people were classified in *Crisis* (IPC Phase 3) and *Emergency* (IPC Phase 4). This represents an increase compared to 2017 as the prevalence of people in need of urgent assistance rose from nine to 14 percent.⁹⁴ A further 13.7 million people were classified in *Stressed* (IPC Phase 2).

The states of Darfur were of particular concern as they accounted for nearly half (43 percent) of the population in IPC Phase 3 and above. North Darfur, alone, accounted for one million people. The states of North, East, Central and West Darfur and Blue Nile were classified in *Crisis* (IPC Phase 3), and two localities (Tawila and Fashir) were classified in *Emergency* (IPC Phase 4). The states of Red Sea and Kassala were also facing particularly high prevalence of food-insecure people.⁹⁵

The food security situation seasonally improved in late 2018 as newly-harvested crops became available, but the number classified in IPC Phase 3 and above was still 5.7 million, accounting for 13 percent of the population.⁹⁶ This was almost 50 percent higher than the same period the previous year, indicating a severe deterioration of the food security situation in 2018.

Figure 7 The Sudan, Number of people (millions) in IPC Phase 2 or above in 2016-2018



Source: Sudan IPC Technical Working Group

⁹⁴ Sudan IPC Technical Working Group. March 2017; October 2017; April 2018.

⁹⁵ Sudan IPC Technical Working Group. April 2018.

⁹⁶ Sudan IPC Technical Working Group. October 2018.

FACTORS DRIVING ACUTE FOOD INSECURITY

Economic shocks

High prices constrained financial access to food in 2018, especially for the most vulnerable households with limited livelihood options, low income levels and high dependency on markets.⁹⁷

Food prices began to increase in late 2017, after international sanctions were lifted in October ending a trade embargo and de-freezing financial assets. An upsurge in demand for US dollars from importers, coupled with limited foreign currency reserves, resulted in a sharp depreciation of the local currency in the parallel market that triggered a significant rise in the general inflation rate. In early 2018, following the recommendations of the International Monetary Fund (IMF), the government removed wheat subsidies. This, in turn, increased demand for millet and sorghum as substitutes for wheat and exerted additional upward pressure on cereal prices.⁹⁸

In an effort to narrow the gap between the official and the parallel exchange rates, the Central Bank of Sudan devalued the official exchange rate twice during 2018, thus intensifying inflationary pressures. Food prices and inflation were also underpinned by fuel shortages, which pushed up production and transport costs. In November 2018, the year-on-year inflation rate reached almost 70 percent, compared to about 25 percent in November 2017, and in December prices of sorghum, millet and wheat, despite the re-introduction of wheat subsidies, were at record levels and up to three times their year-earlier levels.⁹⁹

Conflict/insecurity

By the end of the year around 1.1 million¹⁰⁰ refugees were in the Sudan, most of them escaping the effects of conflict and insecurity in South Sudan as well as Eritrea, Syria and Ethiopia.

The Sudan also received over 30 000 arrivals in 2018.¹⁰¹ The refugee population remained among the most vulnerable because of lack of income-earning opportunities, especially during the lean season.¹⁰²

The impact of conflict and population displacement in Darfur fuelled persisting conflicts between herders and farmers over land and natural resources.¹⁰³

Climate shocks

In 2017, aggregate cereal production was estimated at 5.2 million tonnes, about 10 percent above the five-year average but 40 percent lower than the bumper 2016 harvest.¹⁰⁴ The output contraction was mainly because of a decline in the area planted with sorghum and millet after farmers switched to more profitable cash crops, mainly sesame and cotton, and to drought-induced production shortfalls in northern Gedaref, North Darfur and Kassala states, where cereal production was 65-90 percent lower than in the previous year.¹⁰⁵

Heavy June-September seasonal rains triggered widespread floods and displacements, affecting over 222 000 people across 15 of the Sudan's 18 states.¹⁰⁶

In Kassala, as of April 2018, the fodder gap was estimated at around 3.5 million tonnes, which significantly affected the livestock sector and the livelihoods of pastoral communities.¹⁰⁷

97 Ibid.

98 FAO GIEWS Special Alert no. 342 The Sudan, January 26, 2018.

99 FAO GIEWS Food Price Monitoring and Analysis bulletin, December 2018.

100 UNHCR December 2018.

101 UNHCR Sudan population dashboard Refugees from South Sudan, October 31, 2018.

102 WFP Sudan Food Security Monitoring, May 2018.

103 UN Security Council Report of the Secretary-General S/2012/912, October 12, 2018.

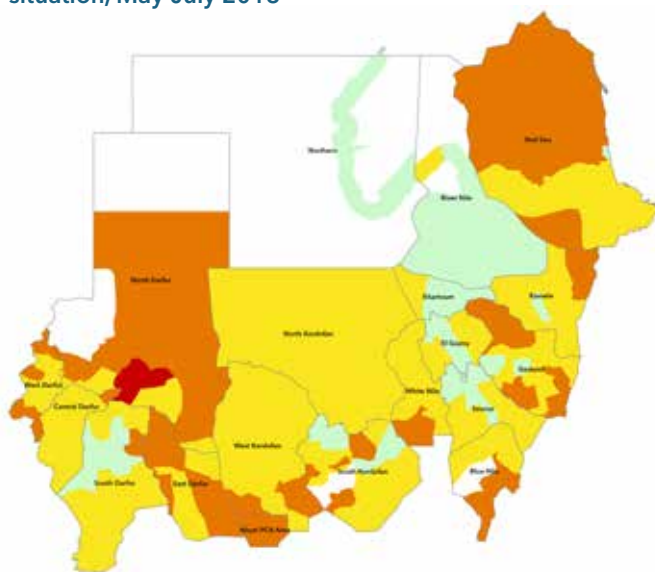
104 FAO Special Report Crop and Food Supply Assessment Mission to the Sudan, March 15, 2018.

105 FAO GIEWS Country Brief, June 14, 2018.

106 OCHA Sudan Humanitarian snapshot, December 2018.

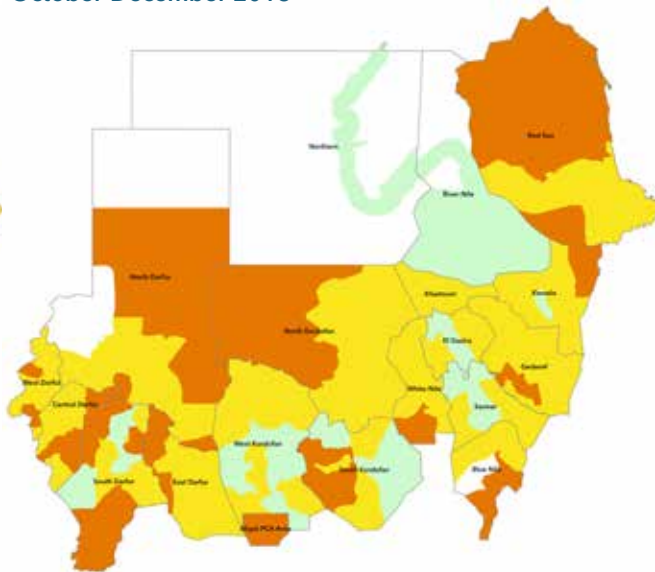
107 Sudan IPC Technical Working Group, April 2018.

Map 21 The Sudan, IPC Acute food insecurity situation, May-July 2018

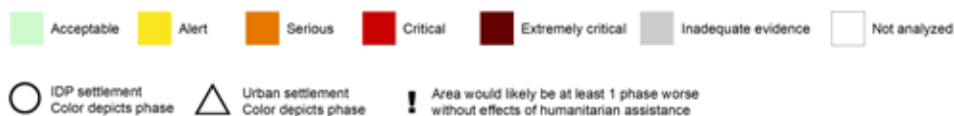


Source: Sudan IPC Technical Working Group, April 2018

Map 22 The Sudan, IPC Acute food insecurity situation, October-December 2018



Source: Sudan IPC Technical Working Group, October 2018



NUTRITION OVERVIEW

The Sudan has experienced persistently high levels of undernutrition since records began in 1987. The national prevalence rate of GAM is 16.5 percent, which represents about 2.4 million children under age five, 700 000 of whom suffer from SAM.¹⁰⁸

In 2018, 11 out of the 18 states had a GAM prevalence among under fives of above 15 percent, which is the *Emergency* threshold as per WHO standards.¹⁰⁹

Nationally almost two in five (38 percent) of children under five are stunted.¹¹⁰

The Standardized Expanded Nutrition Survey (SENS) for refugee camps in White Nile State, released at the end of June, indicated GAM rates above the *Emergency* threshold and SAM above two percent.¹¹¹

The main contributing factors to persistent high malnutrition rates in the Sudan are food insecurity, diseases, lack of access to primary healthcare and basic services such as safe water and adequate sanitation facilities, and poor infant feeding practices. The MICS survey conducted in 2014 revealed that only 33 percent of the population had access to improved sanitation, and only 43 percent of children were fully immunized. Poor infant feeding practices – demonstrated by just 15 percent of children aged 6–23 months receiving an appropriate diet – also play a key role.¹¹²

Erosion of households' purchasing power as a result of the economic crisis has compelled families to cut spending on education and health, and to reduce the quantity and quality of meals, which has likely had detrimental impacts on the nutritional status of the population. Other health challenges included a chikungunya fever outbreak declared in August 2018 in Kassala state with 20 110 cases as of December 2018.¹¹³

108 Sudan Humanitarian Response Plan 2018 <https://reliefweb.int/report/sudan/sudan-2018-humanitarian-response-plan-january-december-2018>

109 HNO 2018.

110 MICS 2014.

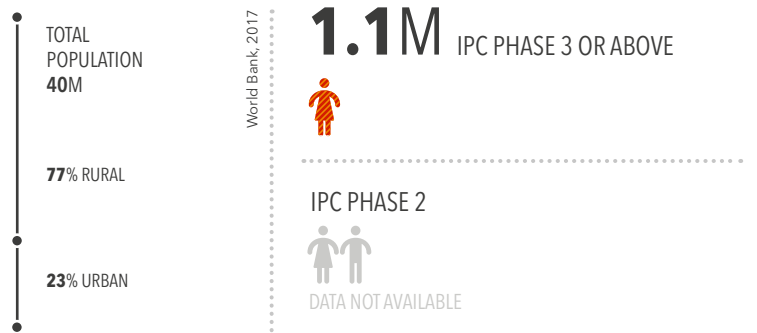
111 <https://data2.unhcr.org/en/documents/download/64981>

112 Sudan Central Bureau of Statistics, WFP, UNICEF, UNFPA and WHO. Sudan Multiple Indicators Survey 2014, April 2015.

113 OCHA. Sudan Humanitarian Snapshot, December 2018.

ACUTE FOOD INSECURITY

2018



2017-18 CHANGE

▼ The number of food-insecure in need of urgent action **decreased** mainly as a result of improved food access and availability at the national level.

2019 FORECAST

▶ The number of food-insecure in need of urgent action is forecast to **remain unchanged** in 2019.

DRIVERS OF FOOD INSECURITY AND MALNUTRITION



Climate shocks



Conflict/insecurity



Economic shocks

- The influx of refugees has strained the resources of host communities, the humanitarian system and the environment.
- Refugees and host communities lack access to cultivable land, water, and formal employment opportunities.
- Small fields, lack of resources for inputs (e.g., seeds and labour), and reliance on rainwater constrains crop performance.
- In Karamoja, extremely erratic weather conditions with floods followed by significant rainfall deficits critically constrained crop production and affected livestock conditions and productivity.

MALNUTRITION INDICATORS



High rates of malnutrition in Karamoja are driven by lack of food, poor sanitation, diseases and inappropriate child feeding practices.



15% of children aged 6–23 months received 'Minimum Acceptable Diet' for growth and development.

DHS, 2016



22% of households lacking access to safe drinking water.

DHS, 2016



66% of infants (up to 6 months old) exclusively breastfed.

DHS, 2016



29% of children aged 0–59 months stunted (20–<30% = high).

DHS, 2016

DISPLACEMENT



1.2M refugees mainly from South Sudan and DRC.

UNHCR, Dec 2018



Around 120 000 refugees from the DRC and 41 000 from South Sudan arrived in Uganda in 2018.

UNHCR, Jan 2019



Land-locked **Uganda** has high fertility and poverty rates, a high influx of refugees from neighbouring conflict-affected countries, and pockets of insecurity, especially in the north and north-eastern semi-arid Karamoja region.

ACUTE FOOD INSECURITY OVERVIEW

Between September and December 2018, an estimated 1.1 million people were in *Crisis* (IPC Phase 3),¹¹⁴ mostly among the refugee population and in Karamoja.

FEWS NET analysed that most resident Ugandan households faced *Minimal* (IPC Phase 1) levels of acute food insecurity throughout 2018 as a result of normal food availability and improved food access. However, the majority of poor households in Karamoja region faced *Stressed* (IPC Phase 2) conditions throughout 2018. Between April and June, almost all districts in the region were classified in *Stressed* (IPC Phase 2) - except Abim. The situation improved in September in some areas such as in the western parts of Kotido and Kaabong, as well as in the south-western parts of the region. However, during the last quarter in localized hotspots, such as in Kotido and Kaabong, about 10-13 percent of the population were in *Crisis* (IPC Phase 3).¹¹⁵

Refugees living in settlements received food assistance and met their minimum food needs, enabling *Stressed!* (IPC Phase 2!) outcomes. In the absence of food assistance, most refugees faced *Crisis* (IPC 3) levels of acute food insecurity, according to FEWS NET.

¹¹⁴ Internal source: FEWS NET internal unpublished figures as of 25 January 2019.

¹¹⁵ FEWS NET Key Message Update January 2018; Food Security Outlooks: April 2018, June 2018, September 2018.

FACTORS DRIVING ACUTE FOOD INSECURITY

Climate shocks

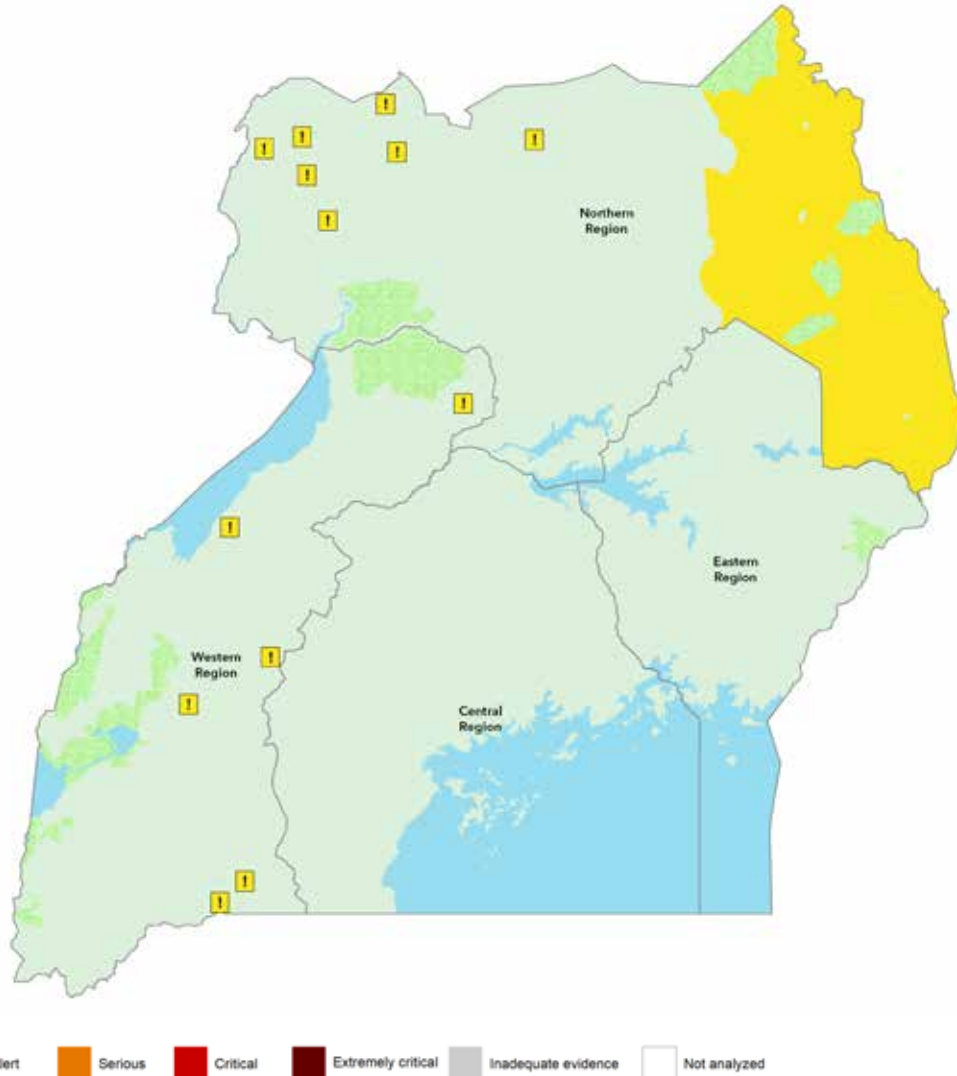
In the north-eastern Karamoja region, which has a unimodal rainfall pattern, the 2018 harvest was completed in October, more than one month later than normal. Excessive rains between April and June disrupted planting operations and caused flooding and waterlogging in lowland areas, forcing farmers to re-plant. Subsequently, erratic and below-average rainfall in July and August affected the establishment and development of re-planted crops.¹¹⁶ As a result, cereal production was estimated by FEWS NET at 60-80 percent below-average, with the lowest output registered in Kotido and Kaabong districts.

In Karamoja fields tend to be very small, farmers lack resources for inputs (e.g., seeds and labour), and crops are rainfed. Cropland expansion is directly competing and compromising pasture areas critical for livestock-based livelihoods.

Livestock productivity declined earlier than usual following the accelerated seasonal deterioration of pasture and water resources. As a result, seasonal livestock migration to traditional dry season grazing areas began one month earlier than normal, in October. This had a negative impact on milk availability and consumption for transhumant household members remaining at the homestead.

¹¹⁶ FAO GIEWS country brief.

Map 23 Uganda IPC Acute Food Insecurity Phase Classification, October 2018-January 2019



Note: This is FEWS NET IPC compatible product, which is generated through the application of the full set of IPC tools and procedures, with the exception of technical consensus.

Source: FEWS NET, October 2018

In bimodal rainfall areas covering most of the country, production of the first season harvest, gathered in June and July, was estimated at above-average levels as yields benefited from exceptionally abundant March-May seasonal rains. Torrential rains triggered floods in several areas, but crop losses were limited and mainly localized in Mount Elgon, Teso and Kigezi areas. Abundant rains also suppressed the spread of fall armyworm outbreaks.

In October, below-average rains delayed planting and affected crop establishment in several areas, while in eastern highlands torrential rains triggered flash floods and landslides. Enhanced rainfall since mid-November lifted crop prospects, but localized crop losses were expected in some eastern, central and south-western districts, where the early season dryness was most severe, and the aggregate crop output was expected at slightly below-average levels.¹¹⁷

117 FAO, Crop Prospects and Food Situation, March 2019.

Conflict/insecurity

The influx of refugees in Uganda (more than 1.2 million verified as of December 2018), mainly fleeing conflict in South Sudan and the Democratic Republic of Congo, has strained the resources of the humanitarian system and put enormous pressure on host communities and the environment.

Most refugees reside in designated refugee settlements across 11 districts mainly in the North and West Nile regions, which are among the poorest and most undeveloped areas in the country, and in Kampala. The Government allows freedom of movement and provides land to refugees settling in designated areas, the right to work and access to national services. However, both refugees and host communities are challenged by the lack of access to cultivable land and water, poor market connectivity, limited skills and few formal employment opportunities.¹¹⁸ For all refugees, humanitarian food assistance along with minimal levels of own crop production, petty trade, and some remittances remain the key sources of food and income.

Economic shocks

Low food availability and reduced food access in the northern Karamoja sub-region strained households' capacity to cope. Poor households in Kotido and Kaabong districts were the worst-off, commonly buying and/or borrowing food on credit and/or from friends and relatives, reducing food portion size, and restricting adult meals to preserve enough food for children. By November, most poor households had already depleted their stocks from the harvest and were primarily relying on markets for their food needs, with some supplementing this with wild fish, game and vegetables when available. While surplus bimodal supply from other areas of the country mitigated staple food commodity price increases through September, sorghum prices rose 68 percent above year-earlier levels in Kotido in October and 18 percent above the five-year average.¹¹⁹

118 UNHCR.

119 FEWS NET Food Security Outlook December 2018-May 2019.

NUTRITION OVERVIEW

Most regions have GAM rates below five percent, except for Karamoja (10.4 percent) and North West (10 percent) regions, according to the most recent national nutrition estimates.¹²⁰ The stunting prevalence is high, at 29 percent, with estimates ranging from 18 percent in Kampala to 41 percent in Tooro.¹²¹

Factors contributing to persistently high levels of acute malnutrition in Karamoja include food insecurity, diseases and inappropriate child caring practices (just eight percent of children between 6–23 months receive an appropriate diet for growth and development).¹²² Nevertheless, figures seem to be improving in this region, which has been the focus of sustained action from the government and international agencies. In districts with the historically highest rates of GAM, estimates from July 2018 were lower than during the same period in 2017 (10.6 percent versus 18.5 percent in Kotido and 12 percent versus 18.5 percent in Moroto).¹²³

The prevalence of acute respiratory infection among children in Karamoja is more than double that of other regions in Uganda. Children experience persistent diarrhoea because of poor sanitation (two in three households do not have a toilet). High fertility, teenage pregnancy and inadequate birth spacing have a negative impact on the nutritional status of children, adolescent girls and women.

In the West Nile region the GAM prevalence increased from 6.2 percent in 2011 to 10.4 percent in 2016.¹²⁴ This deterioration was related to the increased influx of refugees and asylum seekers from neighbouring countries. A Food Security and Nutrition Assessment conducted in the districts hosting refugees in October 2017 showed GAM reached 10.1 percent in Lamwo and 10.8 percent in Arua.¹²⁵

Since the beginning of 2018, Uganda has suffered outbreaks of cholera, Crimean-Congo haemorrhagic fever, Rift Valley fever and rubella. However, no Ebola case has been reported despite the ongoing arrival of refugees from the Democratic Republic of the Congo and regular trade activities across the border.¹²⁶

120 DHS 2016.

121 Ibid.

122 UNICEF, WFP and IBFAN Uganda. Food security and nutrition assessment for Karamoja sub-region. January 2018.

123 FEWS NET Food Security Outlook December 2018 to May 2019 and UNICEF, FAO and WFP. Food Security and Nutrition Assessment in Karamoja Sub-region. June 2017.

124 DHS 2016.

125 Government of Uganda, UNICEF, UNHCR, WFP: Food Security and Nutrition Assessment in host community 2017.

126 WHO AFRO Outbreaks and Other Emergencies, Week 52 December 2018.

4. 2019 FOOD INSECURITY AND MALNUTRITION FORECASTS

Below-average late 2018 rains curb recovery in drought-affected East Africa

In Somalia, south-eastern Ethiopia and northern and eastern Kenya, exceptionally abundant April-June 2018 rains resulted in an above-average main season crop production and prompted a substantial regeneration of rangeland resources. This triggered a marked improvement in livestock body conditions and allowed animal conception and reproduction. However, the October-December 2018 rains were generally poor, resulting in reduced second season harvests and incomplete pasture regeneration. This curbed full agricultural recovery from the severe drought-induced losses of 2017, especially in pastoral areas.

Consequently, in Somalia nearly 1.6 million people, mainly in central and northern pastoral areas, were expected to be in IPC Phase 3 or above through June 2019, driven by below-average *deyr* October-December 2018 rains in tandem with destitution and displacement from the 2016/2017 drought and protracted conflict. While this was significantly lower than the 2.7 million estimated in February-May 2018, sustained humanitarian assistance was still vital to reduce food consumption gaps and acute malnutrition to save lives and protect livelihoods.

In Kenya, the lasting impacts of an above-average main season harvest in 2018, high livestock prices and milk production were expected to limit a deterioration in food security levels between February and May 2019. However, some northern pastoral areas (parts of Wajir, Garissa, Turkana, and Samburu counties) were likely to face *Crisis* (IPC Phase 3) levels of food insecurity following severe rainfall deficits during the second cropping season. Intercommunal conflicts disrupting livelihoods and food access were registered as herders moved their livestock to new areas with better grazing conditions.

In bimodal rainfall areas covering most of Uganda, abundant carryover stocks from the above-average 2018 first season harvest and low cereal prices were expected to support *Minimal* (IPC Phase 1) food security outcomes through May 2019. By contrast, in the unimodal north-eastern Karamoja region, as a result of sharply reduced 2018 crop production following poor seasonal rains, large segments of the population were likely to face *Crisis* (IPC Phase 3) food insecurity levels in the first half of 2019.

The food security situation of refugees from South Sudan and the Democratic Republic of the Congo in Uganda was likely to deteriorate from *Stressed* (IPC Phase 2) to *Crisis* (IPC Phase 3) if adequate levels of humanitarian assistance were not provided. Risk of the Ebola virus disease spreading regionally from the Democratic Republic of the Congo is very high, given the displacement of Congolese refugees to Uganda.¹ By early-July 2019, three cases of Ebola has been confirmed in Uganda.

In Ethiopia, vulnerable pastoral households in the southern Somali region and northern areas of the Afar region, both affected by the rainfall deficits, were expected to face *Crisis* (IPC Phase 3) until May 2019. *Crisis* levels of food insecurity were also expected in areas of Oromia, SNNPR, Somali, and Benishangul Gumuz, affected by intercommunal clashes and displacement in 2018, and in parts of Eastern Oromia (East and West Hararghe), where livelihood losses from conflict-related displacement were compounded by localized crop production shortfalls following erratic June-September *kiremt* rains.

1 WHO. EVD Democratic Republic of the Congo External Situation Report No. 24, 16 January 2019

Conflicts and economic crises will continue to aggravate food insecurity

Local insecurity and intercommunal violence will continue to undermine food availability and access in Ethiopia, Kenya's Arid and Semi-Arid Lands, Somalia, South Sudan and the Sudan. In addition to causing direct loss of lives, conflict and insecurity will continue to weaken agricultural production and the functioning of markets. Violence will continue to deprive households of their livelihood assets and accentuate their use of negative coping strategies, deepening their vulnerability to shocks. Conflict and insecurity will contribute to increasing displacement, internally or towards neighbouring countries, or will ensure people remain displaced for prolonged periods of time, aggravating, in most cases, the food insecurity status of those fleeing.

In South Sudan the food security situation deteriorated in the first half of the year due to the cumulative effects of national and localized conflicts, continued mass displacement, and prolonged years of asset depletion. Only 52 percent of the 2019 national cereal needs have been met by harvests while the ongoing economic crisis will continue to inhibit households' purchasing power and push up food prices. The number of people facing *Crisis* or worse (IPC Phase 3 or above) levels of acute food insecurity was set to rise from nearly 6.2 million (54 percent of the population) in January 2019 to 6.9 million (60 percent of the population) by May to July. An estimated 21 000 people were expected to be in *Catastrophe* (IPC Phase 5) by the middle of the year.²

Despite the good 2018 cereal harvest in the Sudan, *Crisis* (IPC Phase 3) levels of food insecurity were expected to persist in the first half of the year in parts of Darfur, South Kordofan and Blue Nile states, where the economic crisis is obstructing any potential security improvements, as well as in parts of North Kordofan, Red Sea and Kassala states. Food insecurity was expected to deteriorate during the June-September lean season with the macroeconomic situation driving extremely high food and non-food prices and constraining food access for market-dependent households. Fuel shortages were likely to adversely affect agricultural production and livelihoods. Hard currency shortages will continue to hamper imports and humanitarian operations.

Of highest concern were the IDPs in the Sudan People's Liberation Movement - North (SPLM-N) controlled areas of South Kordofan and the Sudan People's Liberation Army - Abdel Wahid (SPLA-AW) controlled areas of Jebel Marra, who were expected to be in *Emergency* (IPC Phase 4) during the August-September peak of the lean season.

2 IPC South Sudan Technical Working Group, January 2019.

Updated food security forecast, July 2019

March and most of April were characterized by widespread drought conditions, with cumulative rainfall totals between March and the first half of May estimated to be less than 50 percent of average across much of the Horn of Africa and less than 80 percent of average across many areas of Uganda. Additionally, the long/*Gu* rains during this time period were either the first or second driest on record over northern Somalia and localized areas of eastern Uganda, western Kenya, and south-eastern Ethiopia.³

Above average precipitations in May reduced the moisture deficits and marginally improved vegetation conditions, but damage to crops was largely irreversible, and prospects remained highly unfavourable. As a result, the upcoming June/July harvests were expected to be delayed and up to 50 percent below average in central and southern Somalia, bimodal Uganda, and marginal long rains cropping areas of Kenya, according to FSNAU and FEWS NET.

In pastoral areas across the Horn of Africa, drought conditions during the first half of the long/*Gu* rains caused widespread pasture and water shortages, which resulted in declining livestock body conditions, limited milk production, atypical migration patterns and competition over natural resources. Heavy rains in May supported pasture regeneration and partly replenished water points, but pastoral conditions were expected to deteriorate across parts of Ethiopia, Kenya and Somalia during the dry season through September.

According to the Greater Horn of Africa Climate Outlook Forum (GHACOF) published in May 2019, between June and September 2019, drier than normal rainfall was expected over much of Ethiopia, south-western Eritrea, South Sudan, parts of western Sudan as well as some regions on the Sudan/Ethiopia border, northern and far-western Uganda, western Rwanda as well as coastal areas of Kenya and Somalia.

Elevated maize price were prevalent across the region in mid-2019. In Kenya and Uganda, maize prices surged by 35-80 percent between March and May 2019, driven by concerns about the poor agricultural season. Subsequently, prices levelled off or slightly declined from late April onwards thanks to favourable rains that improved crop prospects and sustained imports from neighbouring United Republic of Tanzania, where the *msimu* harvest, completed in June, was expected to be above average. However, maize prices in Kenya and

3 Famine Early Warning System Network (FEWS NET), Update of 21 May 2019, available at: https://reliefweb.int/sites/reliefweb.int/files/resources/EAST_AFRICA_Alert_052119.pdf

Uganda remained up to 80 percent higher than one year earlier.

In Ethiopia, maize prices increased by 7–11 percent in May compared to the same time last year, due in part to concerns over the performance of the *belg* harvest.

In Somalia, June prices were similar to last year's levels, as imports from neighbouring Ethiopia helped to bolster national availabilities and ease upward supply pressures. Food security and nutritional outcomes, already worsening since early 2019, were expected to further

deteriorate through 2019, following drought conditions during the first half of the 2019 long/*Gu* rainy season.

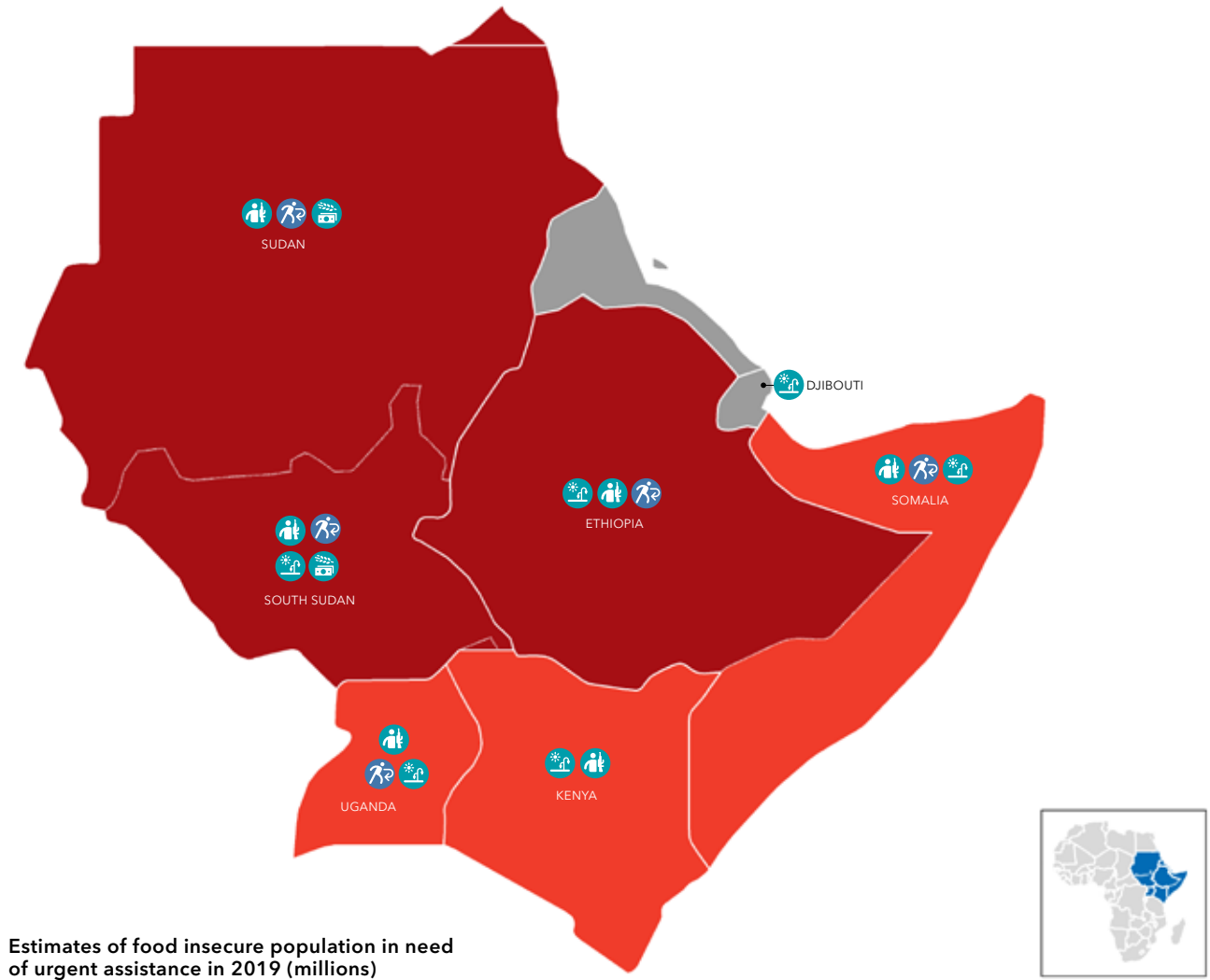
In South Sudan, high levels of food insecurity will persist, driven by typical lean seasonal trends exacerbated by the macro-economic crisis, population displacements, insecurity and movement restrictions, low purchasing power and the ongoing drought that has reduced availability of wild foods, fish and milk. No gains have been realized on the food security and nutrition fronts despite the signing of the peace agreement.

Table 6 Acute food insecurity forecast in the IGAD region (updated July 2019)

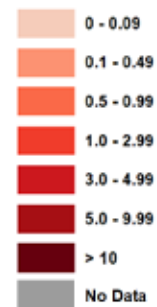
Country	Djibouti	Ethiopia	Kenya	Somalia	South Sudan	The Sudan	Uganda
Highest number of food insecure people in 2018							
Total population of reference (millions)	1	96.5	46.3	13.9	11	43.9	40
Percentage of population analysed	16%	100%	100%	89%	93%	100%	100%
Population in IPC Phase 3 or above (millions)	0.15	8.1	2.6	2.7	6.1	6.2	1.1
Share of population analysed in IPC Phase 3 or above	55%	8%	6%	22%	59%	14%	3%
Period	May 2018	Jan-Dec 2018	Jan-Mar 2018	Feb-May 2018	Sep 2018	May-Jul 2018	Sep-Dec 2018
Estimates for 2019 peak number (as of Feb 2019)							
Population in IPC Phase 3 or above (millions)	N/A	N/A	1.0-2.99	1.6	6.9	5.0-9.99	1.0-2.99
Trend in 2019 peak number compared to 2018 peak number	N/A	N/A	▼	▼	▲	▲	►
Anticipate peak period	N/A	Jun-Aug 2019	Aug-Oct 2019	Feb-Jun 2019	May-Jul 2019	Aug-Sep 2019	Apr-Jun 2019
Highest expected area classification in 2019	N/A	PHASE 3 Crisis	PHASE 3 Crisis	PHASE 4 Emergency	PHASE 4 Emergency	PHASE 4 Emergency	PHASE 3 Crisis
Source		FEWS NET	FEWS NET	IPC	IPC	FEWS NET	FEWS NET
Estimates for 2019 peak number (as of Jul 2019)							
Population in IPC Phase 3 or above (millions)	N/A	8.1	2.1	2.2	6.96	5.0-9.99	1.0-2.99
Trend in 2019 peak number compared to 2018 peak number	N/A	►	▼	▼	▲	▲	►
Anticipated peak period	N/A	Apr-Sep 2019	Jul 2019	Jul-Sep 2019	May-Jul 2019	Apr-Sep 2019	Jun-Aug 2019
Highest expected area classification in 2019	N/A	PHASE 3 Crisis	PHASE 3 Crisis	PHASE 4 Emergency	PHASE 4 Emergency	PHASE 4 Emergency	PHASE 3 Crisis
Source		HRP	IPC Update	FSNAU/FEWS NET	IPC Update	FEWS NET	FEWS NET
Main drivers	Climate shocks - dry spells	Climate shocks - prolonged dry spells; Conflict/insecurity and related displacement	Climate shocks - prolonged dry spells; Conflict/insecurity;	Conflict/insecurity; and related displacement; Climate shocks - dry spells	Conflict/insecurity, and related displacement; Climate shocks -dry spells; Economic shocks -downturn	Economic shocks - downturn; Conflict/insecurity and related displacement	Climate shocks - dry spells; Conflict/insecurity and related displacement

Notes: 1. This table reflect peak food insecure population estimates during the 2018 and 2019 year and do not reflect month-to-month variations during either year; 2. Estimates for 2019 peak number, as of Feb. 2019, reflect figures published in the 2019 *Global Report on Food Crises*. The July updates reflect peak 2019 figures, taking into account more recent information/analyses.

Map 24 Number of people in IPC Phase 3 or above (ranges) and primary drivers and risks in the IGAD region as of July 2019



Estimates of food insecure population in need of urgent assistance in 2019 (millions)



Forecast drivers of acute food insecurity in 2019

- Climate shocks
- Economic shocks
- Conflict/insecurity
- Displacement

Disclaimer: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Final boundaries between the Republic of Sudan and the Republic of South Sudan and Somalia and Ethiopia have not yet been determined. Final status of the Abyei area is not yet determined.

Source: FSIN GRFC March 2019



ACRONYMS

ASAL.....	Arid and semi-arid lands	IGAD.....	Intergovernmental Authority on Development
CARI.....	Consolidated Approach for Reporting Indicators of Food Security	IHL.....	International Humanitarian Law
CEWARN.....	Conflict Early Warning and Response Mechanism	IOM.....	International Organization for Migration
CNSA.....	Haitian National Coordination for Food Security Office	IPC.....	Integrated Food Security Phase Classification
DHS.....	Demographic Health Survey	IPCC.....	Intergovernmental Panel on Climate Change
FAO.....	Food and Agriculture Organization	IYCF.....	Infant and Young Child Feeding Practices
FCS.....	Food Consumption Score	MUAC.....	Mid-upper arm circumference
FEWS NET.....	Famine Early Warning Systems Network	MAM.....	Moderate Acute Malnutrition
FIES.....	Food Insecurity Experience Scale	MICS.....	Multiple Indicator Cluster Survey
FSIN.....	Food Security Information Network	MPI.....	Multidimensional Poverty Index
FSNAU.....	Food Security and Nutrition Analysis Unit	mVAM.....	mobile Vulnerability Analysis and Mapping
FSNWG.....	Food Security and Nutrition Working Group	NNMS.....	National Nutritional and Mortality Survey
GAM.....	Global acute malnutrition	OCHA.....	Office for the Coordination of Humanitarian Affairs
GDP.....	Gross Domestic Product	REC.....	Regional Economic Community
gFSC.....	Global Food Security Cluster	SADC.....	Southern Africa Development Community
GIEWS.....	Global Information and Early Warning System	SAM.....	Severe acute malnutrition
gNC.....	Global Nutrition Cluster	SDG.....	Sustainable Development Goals
GNAFC.....	Global Network Against Food Crises	SENS.....	The Standardized Expanded Nutrition Survey
GRFC.....	Global Report on Food Crises	SETSAN.....	The Technical Secretariat for Food Security and Nutrition
HAZ.....	Height-For-Age z score	SICA.....	Central American Integration System
HFA.....	Humanitarian Food Assistance	SMART.....	Standardized Monitoring and Assessment of Relief and Transitions
HIV/AIDS.....	Human immunodeficiency virus / acquired immunodeficiency syndrome	SNNPR.....	Southern Nations, Nationalities and Peoples' Region (Ethiopia)
HDRP.....	Humanitarian and Disaster Resilience Plan	SOFI.....	The State of Food Security and Nutrition in the World
HNO.....	Humanitarian Needs Overview	UN.....	United Nations
HoA.....	Horn of Africa	UNSC.....	United Nations Security Council
HRP.....	Humanitarian Response Plan	UNHCR.....	High Commissioner for Refugees
IYCF.....	Infant and Young Child Feeding	UNICEF.....	United Nations Children's Fund
IASC.....	Inter-Agency Standing Committee	USD.....	United States Dollar
IDDRSI.....	IGAD Drought Disaster Resilience and Sustainability Initiative	WASH.....	Water, Sanitation and Hygiene
IDP.....	Internally displaced person	WFP.....	World Food Programme
IFPRI.....	International Food Policy Research Institute	WFZ.....	Weight-for-Height in z-score
IFRAH.....	IGAD Food Security Nutrition and Resilience Analysis Hub	WHO.....	World Health Organization

Annex 1 Acute food insecurity reference table for area classification

Purpose To guide short-term strategic objectives linked to medium- and long-term objectives that address underlying causes and chronic food insecurity.

Usage Classification is based on convergence of evidence of current or projected most likely conditions, including effects of humanitarian assistance.


	Phase 1 Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Famine
Phase name and description	More than four in five HHs are able to meet essential food and non-food needs without engaging in atypical, unsustainable strategies to access food and income, including any reliance on humanitarian assistance.	Even with any humanitarian assistance at least one in five HHs in the area have the following or worse: Minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in irreversible coping strategies.	Even with any humanitarian assistance at least one in five HHs in the area have the following or worse: Food consumption gaps with high or above usual acute malnutrition; OR are marginally able to meet minimum food needs only with accelerated depletion of livelihood assets that will lead to food consumption gaps.	Even with any humanitarian assistance at least one in five HHs in the area have the following or worse: Large food consumption gaps resulting in very high acute malnutrition and excess mortality; OR extreme loss of livelihood assets that will lead to food consumption gaps in the short-term.	Even with any humanitarian assistance at least one in five HHs in the area have an extreme lack of food and other basic needs where starvation, death, and destitution are evident. (Evidence for all three criteria of food consumption, wasting and CDR is required to classify Famine.)
Priority response objectives 	Action required to build resilience and for disaster risk reduction.	Action required for disaster risk reduction and to protect livelihoods.	URGENT ACTION required to protect livelihoods, reduce food consumption gaps and reduce acute malnutrition.	URGENT ACTION required to save lives and livelihoods.	URGENT ACTION required to prevent widespread death and total collapse of livelihoods.
Area outcomes (directly measured or inferred)					
Food consumption and livelihood change	More than 80% of households in the area are able to meet basic food needs without engaging in atypical strategies to access food and income and livelihoods are sustainable.	Based on the IPC household group reference table, at least 20% of the households in the area are in Phase 2 or worse.	Based on the IPC household group reference table, at least 20% of the households in the area are in Phase 3 or worse.	Based on the IPC household group reference table, at least 20% of the households in the area are in Phase 4 or worse.	Based on the IPC household group reference table, at least 20% of the households in the area are in Phase 5.
Nutritional status*	Acute malnutrition: <5% BMI <18.5 prevalence: <10%	Acute malnutrition: 5-10% BMI <18.5 prevalence: 10-20%	Acute malnutrition: 10-15% OR > usual and increasing BMI <18.5 prevalence: 20-40% 1.5x greater than reference	Acute malnutrition: 15-30% OR > usual and increasing BMI <18.5 prevalence: >40%	Acute malnutrition: >30% BMI <18.5 prevalence: far >40%
Mortality*	CDR: <0.5/10,000/day U5DR: ≤1/10,000/day	CDR: <0.5/10,000/day U5DR: ≤1/10,000/day	CDR: <0.5-1/10,000/day U5DR: 1-2/10,000/day	CDR: 1-2/10,000/day OR > 2x reference. U5DR: 2-4/10,000/day	CDR: >2/10,000/day U5DR: >4/10,000/day

*For both nutrition and mortality area outcomes, household food consumption deficits must be an explanatory factor in order for that evidence to be used in support of a Phase classification. For example, elevated malnutrition due to disease outbreak or lack of health access – if it is determined to not be related to food consumption deficits – should not be used as evidence for an IPC classification. Similarly, excess mortality rates due to murder or conflict – if they are not related to food consumption deficits – should not be used as evidence for a Phase classification. For acute malnutrition, the IPC thresholds are based on percentage of children under 5 years that are below 2 standard deviations of weight for height or presence of oedema. BMI is an acronym for Body Mass Index. CDR is Crude Death Rate. U5DR is Under 5 Death Rate.

Annex 2 Acute food insecurity reference table for household group classification

Purpose To guide short term strategic objectives tailored to the needs of household groups with relatively similar Phase classifications, which should complement medium and long term objectives that address underlying causes and chronic food insecurity.

Usage Classification is based on convergence of evidence of current or projected most likely conditions, including effects of humanitarian assistance.

	Phase 1 None	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe
Phase name and description	HH group is able to meet essential food and non-food needs without engaging in atypical, unsustainable strategies to access food and income, including any reliance on humanitarian assistance.	Even with any humanitarian assistance: HH group has minimally adequate food consumption but is unable to afford some essential non-food expenditures without engaging in irreversible coping strategies.	Even with any humanitarian assistance: HH group has food consumption gaps with high or above usual acute malnutrition; OR HH group is marginally able to meet minimum food needs only with accelerated depletion of livelihood assets that will lead to food consumption gaps.	Even with any humanitarian assistance: HH group has large food consumption gaps resulting in very high acute malnutrition and excess mortality; OR HH group has extreme loss of livelihood assets that will lead to large food consumption gaps in the short-term.	Even with any humanitarian assistance: HH group has an extreme lack of food and/or other basic needs even with full employment of coping strategies. Starvation, death, and destitution are evident.
Priority response objectives 	Action required to build resilience and for disaster risk reduction.	Action required for disaster risk reduction and to protect livelihoods.	URGENT ACTION required to protect livelihoods, reduce food consumption gaps, and reduce acute malnutrition.	URGENT ACTION required to save lives and livelihoods.	URGENT ACTION required to prevent widespread death and total collapse of livelihoods.
Household outcomes (directly measured or inferred)					
Food consumption* (quantity and nutritional quality)	Quantity: adequate (2,100kcal pp/day); stable HDDS: no recent deterioration and > or = 4 food groups (based on 12 food groups) FCS: 'acceptable consumption'; stable. HHS: 'none' (0) CSI: = reference, stable HEA: No 'livelihood protection deficit'.	Quantity: minimally adequate (2,100kcal pp/day). HDDS: recent deterioration of HDDS (loss of 1 food group from typical, based on 12 food groups). FCS: 'acceptable' consumption; (but deteriorating). HHS: 'slight' (1). CSI: = reference, but unstable. HEA: 'small or moderate livelihood protection deficit'.	Quantity: food gap; below 2,100 kcal pp/day OR 2,100 kcal pp/day via asset stripping. HDDS: severe recent deterioration of HDDS (loss of 2 food groups from typical based on 12 food groups). FCS: 'borderline' consumption. HHS: 'moderate' (2-3). CSI: > reference and increasing. HEA: substantial 'livelihood protection deficit' OR small 'survival deficit' of <20%.	Quantity: large food gap; much below 2,100kcal pp/day. HDDS: <4 out of 12 food groups. FCS: 'poor' consumption. HHS: 'severe' (4-6). CSI: - significantly > reference. HEA: 'survival deficit' >20% but <50% with reversible coping considered.	Quantity: extreme food gap. HDDS: 1-2 out of 12 food groups. FCS: [below] 'poor' consumption. HHS: 'severe' (6). CSI: far > reference. HEA: 'survival deficit' >50% with reversible coping considered.
Livelihood change (assets and strategies)	Sustainable livelihood strategies and assets;	Livelihood: stressed strategies and assets: reduced ability to invest in livelihoods. Coping: 'insurance strategies'.	Livelihood: accelerated depletion/erosion of strategies and assets that will lead to high food consumption gaps. Coping: 'crisis strategies'.	Livelihood: extreme depletion/liquidation of strategies and assets that will lead to very high food consumption gaps. Coping: 'distress strategies'.	Livelihood: near complete collapse of strategies and assets. Coping: effectively no ability to cope.
For contributing factors, specific indicators and thresholds for inferring Phase need to be determined and analysed according to the unique causes and livelihood context of household groups. General descriptions are provided below. See IPC analytical framework for further guidance on key aspects of food availability, access, utilization, and stability.					
Contributing factors					
Food availability access, utilization and stability	Adequate to meet food consumption requirements and short-term stable. Safe water ≥15 litres pppd.	Borderline adequate to meet food consumption requirements. Safe water marginally ≥15 litres pppd.	Highly inadequate to meet food consumption requirements. Safe water 7.5 to 15 litres pppd.	Very highly inadequate to meet food consumption requirements. Safe water 4 to 7.5 litres pppd.	Extremely inadequate to meet food consumption requirements. Safe water <4 litres pppd.
Hazards and vulnerability	None or minimal effects of hazards and vulnerability on livelihoods and food consumption.	Effects of hazards and vulnerability stress livelihoods and food consumption.	Effects of hazards and vulnerability result in loss of assets and/or significant food consumption deficits.	Effects of hazards and vulnerability result in large loss of livelihood assets and/or food consumption deficits.	Effects of hazards and vulnerability result in near complete collapse of livelihood assets and/or near complete food consumption deficits.

Annex 3 Differences and complementarities between the Global Report on Food Crises and the State of Food and Nutrition Security in the World (ex-SOFI)

The Global Report on Food Crises and the State of Food and Nutrition Security in the World (ex-SOFI) represent multi-partnership efforts that aim to complement each other in providing a comprehensive picture of food security/insecurity around the world. Yet, they have well distinguished objectives and rely on different data and methodologies. The most important differences between the two global reports are presented below.

	The Global Report on Food Crises	The State of Food Security and Nutrition in the World
Main objective	Informs on the severity, magnitude and drivers of acute food insecurity and malnutrition in food crisis situations across the world.	Informs on the progress towards ending hunger, achieving food security and improving nutrition (Sustainable Development Goal 2) by monitoring long-term trends in chronic food insecurity and malnutrition regardless of drivers.
Geographical coverage	Focuses on the countries/areas affected by food crises. Coverage may vary every year.	Present estimates at national, regional and global level. Includes all countries where data are available.
Information sources	Secondary information mainly based on available Integrated Food Security Phase Classification (IPC) and Cadre Harmonisé (CH) reports.	National official statistics provided by countries in line with SDG indicators endorsed by the UN Statistical Commission for global monitoring of Targets 2.1 and 2.2 of the 2030 Agenda for Sustainable Development.
Reference periods	Short-term food insecurity estimates refer to the peak of the situation during the year	Estimates refer to the average situation over a period from 1 to 3 years, depending on the indicator and the timeliness of data reporting.
Timeliness	Provides the most recent and up-to-date information to inform decision-making and resource allocation in crises.	Structural indicators are expressed on a yearly basis or as 3-year moving averages and may be reported with a delay and/or provisionally "nowcasted" to the latest reporting period.
Indicators and methods	<p>IPC and CH acute food insecurity analyses aim to identify populations in need of urgent action, to support response planning.</p> <p>The figures are based on convergence of evidence from a wide range of sources on food security and nutrition outcome indicators as well as contributing factors (e.g. assets, markets, shocks).</p> <p>The methodology is standardized allowing for comparable results across countries and time periods.</p>	Two indicators are used to monitor progress towards SDG target 2.1. The prevalence of undernourishment (PoU) , which calculates the proportion of the population that does not have regular access to enough dietary energy for a healthy, active life using information on the apparent average consumption of food (in terms of caloric food energy) estimated from food balance sheets and on the distribution of food consumption within the population, based on household survey data on food consumption. The prevalence of food insecurity based on the Food Insecurity Experience Scale (FIES), is a timely estimate of the percentage of people facing food insecurity, based on data obtained by asking people, directly in a survey, to report on the occurrence of conditions and behaviours that are known to reflect constraints on access to food. FIES-based estimates can be disaggregated by age, gender, geographic area of residence and socio-economic status.
Figures for 2017	124 million in IPC Phase 3 or above out of 891.5 million total studied population.	821 million undernourished/770 million severely food insecure, out of 7.55 billion total population.

Annex 4 IPC acute malnutrition (AMN) reference table

Usage Classification of areas based on the prevalence of Global Acute Malnutrition (GAM) measured either by Weight for Height Z-score and/or oedema (WHZ) or Mid-Upper Arm Circumference and/or oedema (MUAC).

Purpose To guide decision-making on addressing acute malnutrition in the short and long term.

	Phase 1 Acceptable	Phase 2 Alert	Phase 3 Serious	Phase 4 Critical	Phase 5 Extremely critical
Phase name and description	Less than 5% of children are acutely malnourished by GAM by WHZ measure or Less than 6% of children are acutely malnourished by GAM by MUAC measure.	Even with any humanitarian assistance, about 5-10% of children are acutely malnourished by GAM by WHZ measure or about 6-11% of children are acutely malnourished by GAM by MUAC measure.	Even with any humanitarian assistance, about 5-10% of children are acutely malnourished by GAM by WHZ measure or about 6-11% of children are acutely malnourished by GAM by MUAC measure.	Even with any humanitarian assistance, 15-30% of children are acutely malnourished by GAM by WHZ or 11-17% are acutely malnourished by GAM by MUAC measure, showing conditions for excess mortality. ¹	Even with any humanitarian assistance, >30% of children are acutely malnourished by GAM by WHZ measure or >17% of children are acutely malnourished by GAM by MUAC measure, showing conditions for widespread death.
Priority response objective to decrease Acute Malnutrition²	Maintain the low prevalence of acute malnutrition.	Strengthen existing response capacity and resilience. Address contributing factors to malnutrition. Monitor conditions and plan response as required.	URGENTLY REDUCE ACUTE MALNUTRITION LEVELS THROUGH:		
			Scaling up of existing capacity and response as well as addressing contributing factors to malnutrition.	Significant scale up with external help, if needed, of nutrition response and addressing of contributing factors to malnutrition in close co-ordination with other sectors.	Addressing widespread acute malnutrition and death by all means. Also address all causes of malnutrition through greater scaling up of all public health programme interventions in close co-ordination with all other sectors.
GAM by WHZ <-2 standard deviation and/ or Oedema	<5%	5.0 to 9.9%	10.0 to 14.9%	15.0 to 29.9%	>30%
GAM by MUAC <-2 standard deviation and/ or Oedema	<6%	6.0 to 10.9%	6.0 to 10.9%	11.0 to 16.9%	>17%
Notes					
<p>1. The use of MUAC as an alternative for classification and the cut-offs are provisional and pending validation. The GAM by MUAC cut-offs are based on CDC analysis of survey data (unpublished) that best correlate with the WHZ thresholds. Further analyses are also currently underway to determine the need for regional thresholds and potential use of convergence of evidence for classification of severity of acute malnutrition. The application of these thresholds will be evaluated through IPC for Acute Malnutrition Lessons Learning Process in 2016/17. IPC for Acute Malnutrition done by MUAC will have a lower confidence level, which will be indicated by hash lines on the IPC maps.</p> <p>2. GAM by WHZ may come from representative surveys or sentinel sites and GAM by MUAC may come from representative surveys, sentinel sites, or screening (either exhaustive or sample screening). See Box 2 below for details on reliability score, preference ranking as well as minimum criteria to be considered when conducting IPC for Acute Malnutrition.</p> <p>3. GAM by WHZ is preferred over GAM by MUAC. If GAM by WHZ and GAM by MUAC are both available, GAM by WHZ should be used in the classification. If information is available on multiple indicators preference ranking should be used to determine the final Phase.</p> <p>¹ Refers to the increased risk of mortality with the increased levels of acute malnutrition.</p> <p>² Priority response objectives recommended by the IPC for Acute Malnutrition focus on decreasing acute malnutrition levels; specific actions should be informed through a response analysis based on the information provided by analyses of contributing factors to acute malnutrition as well as delivery related issues, such as government and agencies' capacity, funding, insecurity in the area, etc.</p>					



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