Cadre Harmonisé for Identification of Risk Areas and Vulnerable Populations in Sixteen (16) States and the Federal Capital Territory (FCT) of Nigeria

Nigeria	Results of the Analysis of Current (March – May, 2018) and Projected (June – August 2018)	Prepared on: 15/03/2018

Main results for zones affected by food and nutrition insecurity in the 16 states of Adamawa, Bauchi, Benue, Borno, Gombe, Jigawa, Kaduna, Kano, Katsina, Kebbi, Niger, Plateau, Sokoto, Taraba, Yobe, Zamfara and the FCT.

Food Consumption:
In the current period, 14 out of the 16 states and FCT are in the minimal phase of food insecurity situation; 2 states (Yobe and Adamawa) are under stress, while 1 state (Borno) is in crisis.

Evolution of livelihoods:
Livelihood activities in most of the States has improved based on the results of the current analysis except in parts of Adamawa, Borno, Benue, Kaduna, plateau, Taraba, Yobe, and Zamfara States, where conflicts have been persistently reported.

Nutrition:
Even though the nutrition situation in the insurgency ravaged states (Borno, Yobe and Adamawa) showed some improvement, most of the states still have the nutrition status in the stress to crisis range.

Mortality:
Some mortality rates mainly in the stress than crisis situation for under 5 years of age were reported in Adamawa, Borno and Yobe States.

The Cadre Harmonisé (CH) is the current ECOWAS/Sahelian Regional framework for consensual analysis of acute food insecurity situations. The results of this analysis for sixteen northern states of Nigeria and the FCT were arrived at after analyzing the food and nutrition security outcome indicators and their relevant contributing factors namely, Hazards and Vulnerability, Food Availability, Access, Utilization including Water, and Stability.

Hazards and vulnerability:
Several zones in the sixteen (16) states and FCT were affected by such hazards and vulnerability as farmers-herdsmen conflicts which impact negatively on the food and nutrition security as well as livelihood of the people in these zones.

Food availability:
In the current situation, food supply and market stock level particularly in Adamawa, Borno and Yobe States increased compared to last year and five-year average, due to better harvest and ongoing assistance. However, food availability is expected to decline towards the lean season (April – August 2018 in all the 16 states and FCT due to decrease in supply and depletion in the stock level of households.
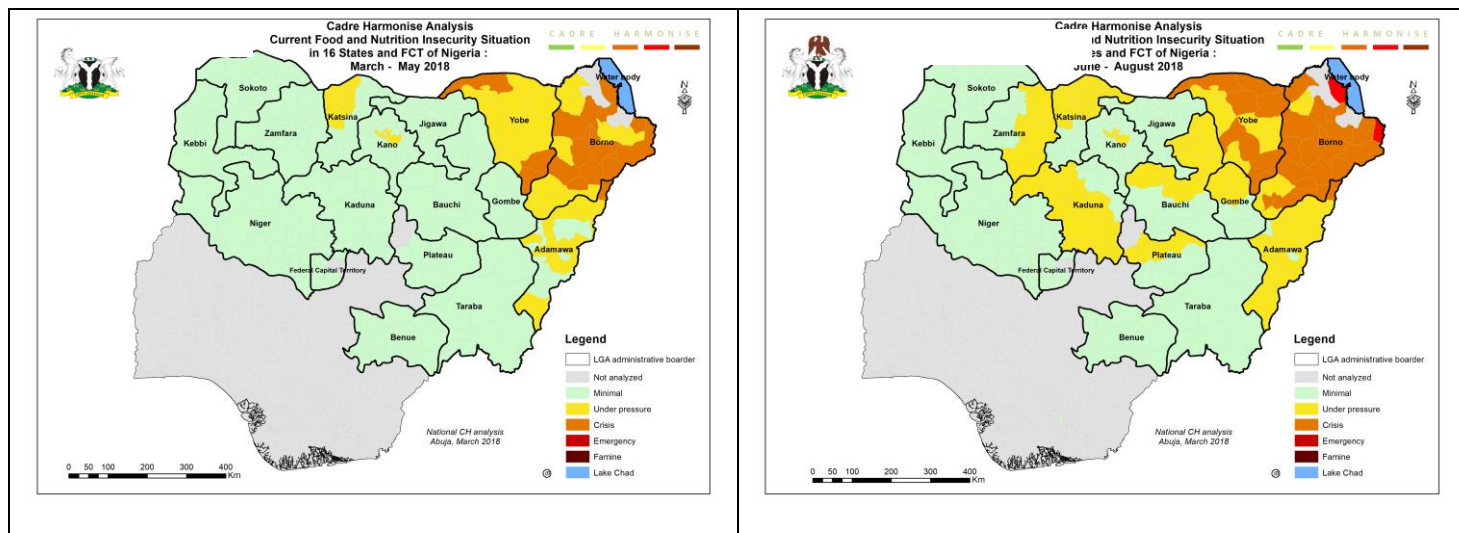
Food Access:
Most households across the States experienced an increased food access due to the ongoing harvest from dry season farming and declining food prices between December 2017 and February 2018. However, there was an increase in the prices of staple food crops such as rice, sorghum and maize across the 16 states and FCT with variations ranging from 13 to 52 percent. Prices of legumes like cowpea increased by an average of 37 percent across the States in March 2018 compared to the same period in 2017. Although household stocks are expected to last for an average of 4 months across the states, this would decrease as the lean season approaches particularly in the conflict affected states (Borno, Yobe and Adamawa).

Food Utilization including Water:
The prevalence of diseases such as malaria, cholera and diarrhea were reported in Borno and other states due to limited access to water and poor hygiene.

Stability:
In the upcoming lean season which is characterized by limited availability of food stocks and high food prices, food availability and access will deteriorate across the 16 states and FCT with severity being most pronounced in Adamawa, Borno and Yobe states.

Main results and problems

The Result of the CH analysis indicates that about 3.7 million people (3.8% of analysed population) require emergency assistance in the current period of March to May, 2018. Furthermore, during the projected period of June to August 2018, these figures are expected to increase to about 5.3 million people in the absence of resilience-driven interventions and humanitarian assistance.

How many people are in food and nutrition insecurity and where are they?

In the current period (March – May 2018), about **3.7** million people are in the combined critical food insecurity situations of crisis and emergency but none is in famine across the 16 states and FCT (Table 1).

Table 1: Estimation of population per phase of food and nutrition insecurity in the current situation – March to May 2018

2nd administrative level STATE	Total population analyzed	CURRENT SITUATION: MARCH - MAY 2018					
		Total population in Phase 1	Total population in Phase 2	Total population in Phase 3	Total population in Phase 4	Total population in Phase 5	Total population in Phase 3 to 5
ADAMAWA	4 338 783	2 799 528	1 179 532	353 903	5 820	-	359 723
BAUCHI	6 821 138	5 831 783	946 195	43 160	-	-	43 160
BENUE	6 048 287	5 032 197	807 800	208 290	-	-	208 290
BORNO	5 356 574	1 820 103	2 046 304	1 300 802	189 365	-	1 490 167
FCT	3 966 171	3 371 245	555 264	39 662	-	-	39 662
GOMBE	3 411 813	2 899 645	471 504	40 665	-	-	40 665
JIGAWA	5 782 600	4 892 886	812 468	77 246	-	-	77 246
KADUNA	8 900 952	7 607 208	1 209 073	84 670	-	-	84 670
KANO	14 029 747	11 270 398	2 409 198	350 151	-	-	350 151
KATSINA	8 867 970	7 269 148	1 392 036	206 786	-	-	206 786
KEBBI	4 615 248	4 002 374	598 760	14 114	-	-	14 114
NIGER	5 714 988	4 931 742	783 246	-	-	-	-
PLATEAU	2 514 255	2 085 326	313 905	115 024	-	-	115 024
SOKOTO	5 245 637	4 721 073	419 651	104 913	-	-	104 913
TARABA	3 264 757	2 803 883	427 709	33 165	-	-	33 165
YOBE	4 066 416	2 244 555	1 341 552	472 777	7 531	-	480 308
ZAMFARA	4 652 114	3 852 435	740 397	59 281	-	-	59 281
TOTAL	97 597 449	77 435 529	16454594	3 504 609	202 716	-	3 707 325

In the projected period (June – August 2018), about **5.3** million people will be expected to fall under the combined critical food insecurity situations of crisis and emergency with none in famine across the 16 states and FCT (Table 2).

Table 2: Estimation of population per phase of food and nutrition insecurity in the projected situation – June to August 2018

2nd administrative level (STATE)	Total population	PROJECTED SITUATION: JUNE - AUGUST 2018					
		Total population in Phase 1	Total population in Phase 2	Total population in Phase 3	Total population in Phase 4	Total population in Phase 5	Total population in Phase 3 to 5
ADAMAWA	4 338 783	2 377 837	1 445 941	507 339	7 666	-	515 005
BAUCHI	6 821 138	5 248 963	1 460 803	111 371	-	-	111 371
BENUE	6 048 287	4 438 870	1 214 976	407 268	-	-	407 268
BORNO	5 356 574	1 734 043	2 011 666	1 397 344	201141	-	1 600 367
FCT	3 966 171	3 212 599	713 911	39 662	-	-	39 662
GOMBE	3 411 813	2 760 457	585 170	66 186	-	-	66 186
JIGAWA	5 782 600	4 738 828	908 700	135 072	-	-	135 072
KADUNA	8 900 952	6 556 688	2 201 017	143247	-	-	147 795
KANO	14 029 747	10 468 290	3 177 371	384 086	-	-	384 086
KATSINA	8 867 970	6 026 095	2 481 582	360 293	-	-	360 293
KEBBI	4 615 248	3 863 916	691 065	60 267	-	-	60 267
NIGER	5 714 988	4 814 738	900 250	-	-	-	-
PLATEAU	2 514 255	1 517 886	804 412	191 957	-	-	191 957
SOKOTO	5 245 637	4 511 248	577 020	157 369	-	-	157 369
TARABA	3 264 757	2 698 754	510 666	55 337	-	-	55 337
YOBE	4 066 416	1 619 954	1 576 300	846 162	24 000	-	870 162
ZAMFARA	4 652 114	3 269 866	1 204 045	178 204	-	-	178 204
TOTAL	97 597 449	69 859 032	22 668 281	5 055 073	234 688	-	5 289 761

Methodology

The CH analytical framework is a national and regional system for food crisis prevention and management which takes into account various outcome indicators for food and nutrition security and the impact of contributing factors. The March, 2018 CH analysis was conducted at zonal (senatorial) level in 13 out of the 16 States as well as the FCT and at Local Government Area (LGA) level in Adamawa, Borno and Yobe States. The methodology adopted for the analysis is the same process used at the regional level for food and nutrition security analysis which aims at food crisis prevention and management. The result communicated from the analysis is obtained through convergence of evidence and consensus building among the participants in classifying the severity of food and nutrition insecurity and estimating the affected populations in the current and projected periods. The State-based analysis was conducted from 5th to 10th March, 2018 across three (3) centres (Yola, Gusau and Jos).

The National Consolidation Workshop was held at Abuja from 12th to 14th March, 2018 and the results of the analysis was presented to stakeholders and decision makers on 15th March, 2018.

The Cadre Harmonisé meta-analysis procedure is categorized into the following five steps:

- **Step 1 - Data inventory**: This entails compilation of relevant data sets required as evidence in conducting the CH analysis.
- **Step 2 - Data analysis:** This involves evaluation of the compiled evidence and their reliability scores.
- **Step 3 – Synthesis and Phases Classification:** Classifying the 1st, 2nd or 3rd administrative levels into the various phases of food and nutrition insecurity according to the CH reference table, depending on the interface of the indicators of outcome and contributing factors of food and nutrition security.
- **Step 4 - Estimation of Populations:** The affected populations are estimated for the current and projected periods based on the evidence available on the levels of the outcome indicators.
- **Step 5 - Validation and communication of results -** The findings of the analysis are validated and communicated to stakeholders and decision makers.

The process was jointly led and facilitated by the Federal Ministry of Agriculture and Rural Development, FAO, WFP, FEWS NET, and the Permanent Interstate Committee for Drought Control in the Sahel (CILSS).

The participants cut across various organizations such as: the Federal Ministry of Agriculture and Rural Development, Federal Ministry of Health, Federal Ministry of Budget and National Planning, National Programme for Food Security,

National Agricultural Extension and Research Liaison Services, National Bureau of Statistics, National Emergency Management Agency and similar agencies across the 16 states and FCT, UN agencies including FAO, WFP, UN OCHA and UNICEF; Development Partners/INGOs including FEWS NET, ACF, Save the Children, Oxfam and national NGOs.

Recommendations

To Decision Makers:

1. Take up the results of CH analysis for planning and formulation of appropriate policies, strategies and programmes for the food and nutrition insecure populations.
2. Immediate humanitarian intervention, including nutrition, food and livelihoods assistance, is required to reach and assist populations identified to be in the critical phases of food and nutrition insecurity (phases 3 and 4).
3. In the worst affected areas of Adamawa, Borno and Yobe States there is need to sustain the ongoing humanitarian assistance and complement it with recovery and resilience interventions to promote self-reliance and prevent further deterioration of the food and nutrition security situation during the lean season (April – August 2018). Stakeholders should strive to reach previously inaccessible populations with necessary humanitarian assistance.
4. Interventions and support for the food and nutrition insecure populations should consider the need to restore resilience through agricultural productivity enhancement, improved, safe and sustainable access to farmland and income-generating activities.
5. Federal State and Governments should take full ownership of the Cadre Harmonise process by making adequate budgetary provision.
6. To improve data availability for CH analysis, State Governments should ensure that funds are made available for the conduct of Emergency Food and Nutrition Security Assessments, especially at LGAs levels of the states.
7. In view of the informative results from the CH process, it is necessary to expand the coverage to all the states of the federation to have a global view of food and nutrition insecurity situation in the country.

To Technical Partners:

8. Technical partners should strengthen working in synergy with one another, guided by the outcome of the CH analysis to avoid duplication of efforts in humanitarian interventions.
9. Continue to support the national and state cell members through training and capacity building for improved mastery of the CH processes.
10. Advocacy to the various levels of government and policy makers for funding and uptake of the outcome of CH analysis
11. Continued support for the conduct of Emergency Food and Nutrition Security Assessment as well as participate in the state level CH analysis and national consolidation.

Contacts

Dr. Bukar Hassan,
Permanent Secretary,
Federal Ministry of Agriculture
and Rural Development,
Area 11, Garki, Abuja Nigeria
E-mail: bukar_hassanyimird@yahoo.com

Kevin Tekpat
Director,
National Programme for Food Security (NPFS),
Federal Ministry of Agriculture and Rural Development
e-mail: ktekpat@yahoo.com

Partners in the analysis

Donors

CURRENT AND PROJECTED FOOD and NUTRITION INSECURITY SITUATION
March-May 2018 and June-August 2018

KEY FIGURES	March – May 2018	June – August 2018

People in CH Phases 3 to 5

	Over **3.7 million persons** 3.8% of the analyzed population	Over **5.2 million persons** 5.4% of the analyzed population

Populations in need of urgent action to protect and save their lives and livelihoods

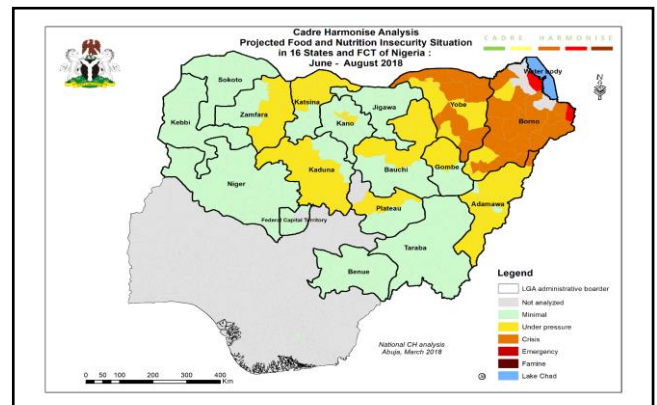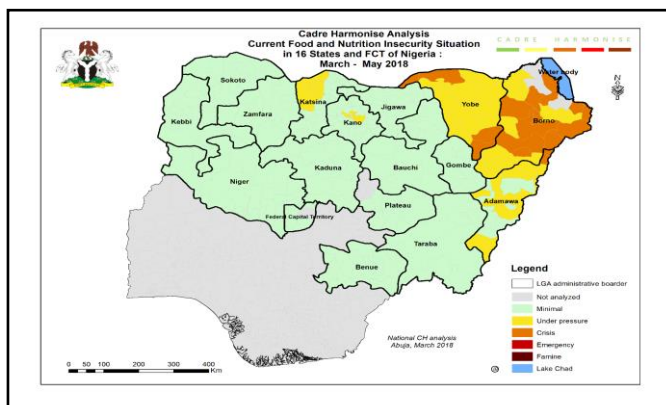| State	Number	State	Number
Adamawa	359,723	Adamawa	515,005
Bauchi	43,160	Bauchi	111,371
Benue	208,290	Benue	394,441
Borno	1,490,167	Borno	1,610,864
FCT	39,662	FCT	39,662
Gombe	40,665	Gombe	66,186
Jigawa	77,246	Jigawa	135,072
Kaduna	84,670	Kaduna	143,247
Kano	350,151	Kano	384,086
Katsina	206,786	Katsina	360,293
Kebbi	14,114	Kebbi	60,267
Plateau	115,024	Plateau	191,957
Sokoto	104,913	Sokoto	157,369
Taraba	33,165	Taraba	55,337
Yobe	480,308	Yobe	870,162
Zamfara	59,281	Zamfara	178,204

KEY HIGHLIGHTS

The result of the outcome indicators analyzed for the 16 states and Federal Capital Territory (FCT) revealed that food security conditions have improved particularly in the three most affected states of the North East (Adamawa, Borno and Yobe) mainly due to improvement of security conditions as well as livelihood systems and provision of humanitarian assistance from government and partners; there are no areas in famine (phase 5) both currently and in the projected period.

However, in all the other states, the result of the analysis indicates an increase in the population in Phase 3 due to food and nutrition insecurity arising from shocks, hazards and conflicts in the states.

Overall, food security is expected to deteriorate from June to August 2018 during the lean season in all the 16 states and FCT. During this period, the number of populations that will face food crisis (Phase 3) will increase and there will be more population moving into emergency (Phase 4) especially in the three North East states (Adamawa, Borno and Yobe).

Acute food insecurity in the North east states is mainly due to hazards and vulnerability, namely conflicts leading to increase in the number of IDPs, disruption of market supplies and livelihoods and limited access to food.

Cadre Harmonise Analysis
Current Food and Nutrition Insecurity Situation
in 16 States and FCT of Nigeria :
March - May 2018

Cadre Harmonise Analysis
Projected Food and Nutrition Insecurity Situation
in 16 States and FCT of Nigeria :
June - August 2018

OVERVIEW

This March cycle of the Cadre harmonise (CH) analysis covered 16 states of Northern Nigeria, namely: Adamawa, Bauchi, Benue, Borno, Gombe, Jigawa, Kaduna, Kano, Katsina, Kebbi, Niger, Plateau, Sokoto, Taraba, Yobe and Zamfara, and the Federal Capital Territory (FCT).

The results of this analysis indicate that for the current period (March to May 2018), there is an increase of 17.4% in the total population of people in critical need of humanitarian assistance (Phases 3 to 5) compared to the estimate for the current period of the October 2017 CH analysis. This is explained by an increase in the wave of shocks, hazards and conflicts (herders-farmers crisis) which tend to stifle livelihood activities. Some areas remain in the crisis phase and emergency for some part of Borno. In the absence of assistance in these areas, the situation will get worse during the lean season of 2018.

The significant proportion of households still resorting to emergency coping strategies, especially in the North East, is a pointer to acute food and nutrition insecurity in the area, and it underscores the need to work towards programming for restoration of livelihood and increased resilience in the area. The nutritional challenges reported in some states relate to children under 5 years of age. This situation is propelled not only by acute food and nutrition insecurity but also by sub-optimal feeding practices, poor access to potable water, sanitation and hygiene as well as health facilities.

FACTORS DRIVING ACUTE FOOD INSECURITY CONDITIONS

1. **Conflicts/communal crisis:**
    Many rural farmers that engaged in dry season farming have been displaced by conflicts caused by Non-State Armed Groups (a collection of groups either social, militia or individuals other than recommended security outfits) who are in possession of arms. These conflicts have huge economic implications given the negative impact on household income and livelihood as farmers are restricted from going to their farms.
2. **Lack or limited access to potable water:** Majority of the population in the states have poor access to potable water.
3. **Prevalence of diseases**: High incidences of diseases such as Malaria, Typhoid and other contagious diseases were reported in some states.
4. **High market prices**: High market prices of food and cash crops in the urban and rural markets made it difficult for market-dependent households to afford food commodities.
5. **Reduction in food production**: This negatively impacts the quantity of food available to low income households. This is underscored by limited access to farmland in some major agrarian localities.

RECOMENDATIONs FOR IMMEDIATE RESPONSE

-   Immediate humanitarian intervention is required to reach and assist populations identified to be in the critical phases of food and nutrition insecurity (phases 3 to 5).
-   In the worst affected areas of Adamawa, Borno and Yobe, there is need to sustain the ongoing humanitarian assistance and complement it with recovery and resilience interventions in order to promote self-reliance and prevent further deterioration of the food and nutrition security situation during the lean season. Also, stakeholders should strive to reach previously inaccessible populations with necessary humanitarian assistance.
-   Interventions for the food and nutrition insecure populations should include facilitating agricultural productivity enhancement, improved access to farmland and income-generating activities in order to promote resilience.
-   Support for the conduct of CH analysis at the stipulated cycles as well as conduct LGA-based Food and Nutrition Security Assessment.

METHODS AND PROCESSES

The CH Acute Food Insecurity Analysis was conducted in March 2018 under the lead of the Federal Ministry of Agriculture and Rural Development and FAO Nigeria, in collaboration with CH partners, CILSS, WFP, FEWSNET, etc. The analysis was conducted at zonal (senatorial) level in 13 of the 16 States and at LGA level in the 3 states of Borno, Yobe and Adamawa. The results were arrived at using the food and nutrition security outcome indicators, supported by the relevant contributing factors and through convergence of evidence and consensus building in classifying the severity of food insecurity and estimating the affected populations. The CH cells at the state and federal levels participated in the analysis cycle, with the support of regional and international partners.

RECOMMENDATIONs FOR MONITORING

-   Partners stepping up collaboration in the delivery of humanitarian assistance.
-   Support needed in the area of data collection for CH analysis.
-   Capacity and skills of the CH cell members to be enhanced on a continuous basis.