



2022 GLOBAL REPORT ON FOOD CRISES

JOINT ANALYSIS FOR BETTER DECISIONS

Acknowledgements

This sixth annual *Global Report on Food Crises (GRFC 2022)* is the result of a multi-partner, consensus-based process involving many individuals in the international humanitarian and development communities. The publication was carried out under the direction of the Food Security Information Network (FSIN). Without the full commitment and expertise of 17 agencies, the GRFC 2022 would not have been possible.

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Key to icons

	Acutely food-insecure people		Urban
	Conflict/insecurity		Rural
	Weather extremes/drought		Food security and access to healthy diets
	Weather extremes/flooding		Health services and household environment
	Economic shocks		Care and feeding practices
	Internally displaced people (IDPs)		Wasting
	Refugees		Pregnant and lactating women
	Returnees		

Map disclaimer

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

Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties.

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.

A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).

Acronyms

3RP	Regional Refugee and Resilience Plan	FSC	Food Security Cluster	NGCA	Non-Government-Controlled Area (Ukraine)
ACAPS	Assessment Capacities Project	FSIN	Food Security Information Network	NNS	National Nutrition Survey
ACLED	Armed Conflict Location and Event Data Project	FSNAU	Food Security and Nutrition Assessment Unit	NRC	Norwegian Refugee Council
ALG	Liptako–Gourma Authority (Autorité de Développement Intégré de la Région du Liptako Gourma)	FSNMS	Food Security and Nutrition Monitoring System	OAS	Organization of American States
AMN	Acute malnutrition	FSNWG	Food Security and Nutrition Working Group	OCHA	United Nations Office for the Coordination of Humanitarian Affairs
AML	African migratory locusts	GAM	Global Acute Malnutrition	OECD	Organization for Economic Co-operation and Development
ARI	Acute respiratory infection	GDP	Gross Domestic Product	OHCHR	Office of the United Nations High Commissioner for Human Rights
ASAL	Arid and semi-arid lands	gFSC	Global Food Security Cluster	PCBS	Palestinian Central Bureau of Statistics
ASAP	Anomaly Hotspots of Agricultural Production	GHACOF	Greater Horn of Africa Climate Outlook Forums	PDM	Post-Distribution Monitoring
AWD	Acute watery diarrhoea	GHO	Global Humanitarian Overview	PLW	Pregnant and lactating women
BAY	Borno, Adamawa and Yobe states	GNAFC	Global Network Against Food Crises	R-ARCSS	Revitalized Agreement on the Resolution of the Conflict in the Republic of South Sudan
CADC	Central America Dry Corridor	GNC	Global Nutrition Cluster	REVA	Refugee influx Emergency Vulnerability Assessment
CARI	Consolidated Approach to Reporting Indicators of Food Security	GRFC	Global Report on Food Crises	RMRP	Refugee and Migrant Response Plan
CDC	Centre for Disease Control	HDI	Humanitarian Development Index	RPCA	Food Crisis Prevention Network (Réseau de Prévention des Crises Alimentaires)
CEPAL	The United Nations Economic Commission for Latin America and the Caribbean	HIV/AIDS	Human Immunodeficiency Virus Infection and Acquired Immune Deficiency Syndrome	RRM	Rapid Response Mechanism (Yemen)
CH	Cadre Harmonisé	HNAP	Humanitarian Needs Assessment Programme	SADC	Southern African Development Community
CILSS	Permanent Interstate Committee for Drought Control	HNO	Humanitarian Needs Overview	SAM	Severe Acute Malnutrition
CONASUR	Conseil National de Secours d'Urgence et de Réhabilitation, (National Emergency Response and Rehabilitation Council), Burkina Faso	HRP	Humanitarian Response Plan	SBA	Sana'a-based Authority (Yemen)
COVID-19	Corona virus disease 2019	ICRC	International Committee of the Red Cross	SDG	Sustainable Development Goal
CPI	Consumer Price Index	IDMC	Internal Displacement Monitoring Centre	SEFSEC	Socio-Economic & Food Security Survey (Palestine)
DEVCO	International Cooperation and Development of the European Commission	IDP	Internally Displaced People	SENS	Standardised Expanded Nutrition Survey
DGPC	Direction Générale de la Protection Civile (Haiti)	IFAD	International Fund for Agricultural Development	SFSA	Seasonal Food Security Assessment
DHS	Demographic and Health Survey	IFPRI	International Food Policy Research Institute	SICA	Sistema de la Integración Centroamericana
DRC	Danish Refugee Council	IFRC	International Federation of the Red Cross	SISAAP	Système d'Information sur la Sécurité Alimentaire et d'Alerte Précoce
DRPIA	Direction Régionale de la Protection Industrielle et Animalière	IGAD	Intergovernmental Authority on Development (in Eastern Africa)	SMART	Standardized Monitoring and Assessment of Relief and Transitions
DTM	Displacement Tracking Matrix	ILO	International Labour Organization	SMEB	Survival Minimum Expenditure Basket
ECHO	European Civil Protection and Humanitarian Aid Operations of the European Commission	IMF	International Monetary Fund	SNNPR	Ethiopian Southern Nations, Nationalities, and Peoples' Region
EC-JRC	European Commission – Joint Research Centre	INGD	National Institute for Disaster Management (Mozambique)	SOFI	The State of Food Security and Nutrition in the World
ECLAC	United Nations Economic Commission for Latin America and the Caribbean	IOM	International Organization for Migration	TWG	Technical Working Group
ECOWAS	Economic Community of West African States (Communauté économique des États de l'Afrique de l'Ouest (CEDEAO))	IPC	Integrated Food Security Phase Classification	UBOS	Uganda Bureau of Statistics
EFSA	Emergency Food Security Assessment	IPC FRC	Integrated Food Security Phase Classification Acute Malnutrition	UEMOA	Union économique et monétaire ouest-africaine
ENCOVI	Encuesta Nacional de Condiciones de Vida	IPC FRC	Integrated Food Security Phase Classification Famine Review Committee	UN	United Nations
EIU	Economist Intelligence Unit	ISCG	Inter Sector Coordination Group (Bangladesh)	UNAMA	United Nations Assistance Mission in Afghanistan
ENA	Essential Needs Assessment	IYCF	Infant and Young Child Feeding	UNHCR	United Nations High Commissioner for Refugees
E-VAC	Emergency Vulnerability Assessment Committee	JME	Joint Malnutrition Estimates	UNICEF	United Nations Children's Fund
FAO	Food and Agriculture Organization	JMP	Joint Monitoring Programme	UNRWA	UN Relief and Works Agency for Palestine Refugees in the Near East
FAO-GIEWS	FAO Global Information and Early Warning System on Food and Agriculture	JRP	Joint Response Plan	USAID	United States Agency for International Development
FCS	Food Consumption Score	LGA	Local government area	USD	United States Dollar
FCT	Federal Capital Territory	MAD	Minimum Acceptable Diet	VAC	Vulnerability Assessment Committee
FEWS NET	Famine Early Warning Systems Network	MAM	Moderate Acute Malnutrition	VASyR	Vulnerability Assessment of Syrian Refugees in Lebanon
		MCNA	Multi-Cluster Needs Assessment	WASH	Water, Sanitation and Hygiene
		MDD	Minimum Dietary Diversity	WB	World Bank
		MFB	Minimum Food Basket	WFP	World Food Programme
		MICS	Multiple Indicator Cluster Survey	WHO	World Health Organization
		MoH	Ministry of Health	WoAA	Whole of Afghanistan Assessment
		MPI	Multi-dimensional poverty index	ZimVAC	Zimbabwe Vulnerability Assessment Committee
		MUAC	Mid-Upper Arm Circumference		

Foreword

The sixth edition of the *Global Report on Food Crises* should jolt the world into action.

We are facing hunger on an unprecedented scale, food prices have never been higher, and millions of lives and livelihoods are hanging in the balance.

The war in Ukraine is supercharging a three-dimensional crisis – food, energy and finance – with devastating impacts on the world's most vulnerable people, countries and economies.

All this comes at a time when developing countries are already struggling with cascading challenges not of their making – the COVID-19 pandemic, the climate crisis, and inadequate resources amidst persistent and growing inequalities.

But this report also shows that we have the data and know-how to change course.

The 2030 Agenda for Sustainable Development and the Paris Climate Agreement are our blueprints to tackle the root causes of hunger and malnutrition – from conflict to climate shocks, to inequality and poverty.

The UN Food Systems Summit and the creation of the Food Systems Coordination Hub in Rome are the first steps towards preventing the projected major increases in global hunger, and delivering on the Sustainable Development Goals to end hunger, achieve food security, and promote sustainable agriculture.

Together, we can build a safer, more resilient and inclusive world – and banish the scourge of famine and starvation once and for all. But we must act now.

António Guterres

Secretary-General of the United Nations



The Global Report on Food Crises 2022 | in brief

Globally, levels of hunger remain alarmingly high. In 2021, they surpassed all previous records as reported by the *Global Report on Food Crises (GRFC)*, with close to 193 million people acutely food insecure and in need of urgent assistance across 53 countries/territories, according to the findings of the GRFC 2022. This represents an increase of nearly 40 million people compared to the previous high reached in 2020 (reported in the GRFC 2021).

This increase must be interpreted with care, given that it can be attributed to both a worsening acute food insecurity situation and a substantial (22 percent) expansion in the population analysed between 2020 and 2021. However, even when considering the share of the analysed population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent, the proportion of the population in these phases has increased since 2020.

When considering the results of the six editions of the GRFC, the number of people has risen by 80 percent since 2016, when around 108 million people across 48 countries were acutely food insecure and in need of urgent assistance (Crisis or worse (IPC/CH Phase 3 or above) or equivalent).

When comparing the 39 countries/territories that were consistently in food crisis in all six editions of the GRFC, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent almost doubled between 2016 and 2021 – up from 94 million to almost 180 million.

This increase across the six years of the GRFC – both in terms of absolute numbers and the percentage of the analysed population in these three highest acute food insecurity phases – reflects increased availability of acute food insecurity data, broader geographical coverage, revised population figures, and deteriorating food security contexts in a number of countries.

The outlook for global acute food insecurity in 2022 is expected to deteriorate further relative to 2021. In particular, the unfolding

war in Ukraine is likely to exacerbate the already severe 2022 acute food insecurity forecasts included in this report, given that the repercussions of the war on global food, energy and fertilizer prices and supplies have not yet been factored into most country-level projection analyses.

The GRFC focuses on food crises where the local capacities to respond are insufficient, prompting a request for the urgent mobilization of the international community, as well as in countries/territories where there is ample evidence that the magnitude and severity of the food crisis exceed the local resources and capacities needed to respond effectively.

It provides estimates for populations in countries/territories where data are available, based on the Integrated Food Security Phase Classification (IPC) and Cadre Harmonisé (CH) or comparable sources. Populations in Crisis or worse (IPC/CH Phase 3 or above) or equivalent are in need of urgent food and livelihood assistance.

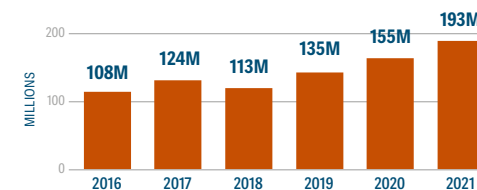
A closer look at 2021

In 2021, almost 40 million people were facing Emergency or worse (IPC/CH Phase 4 or above) conditions, across 36 countries.¹ Of critical concern were over half a million of people (570 000) facing Catastrophe (IPC/CH Phase 5) – starvation and death – in four countries: Ethiopia, South Sudan, southern Madagascar and Yemen. The number of people facing these dire conditions is four times that observed in 2020 and seven times higher than in 2016. During the first half of 2021, localized areas in South Sudan continued to face Famine Likely (IPC Phase 5).

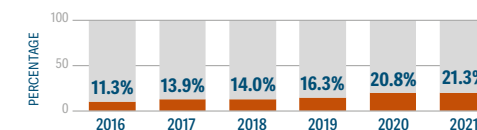
An additional 236 million people were in Stressed (IPC/CH Phase 2) across 41 countries/territories in 2021 and required livelihood support and assistance for disaster risk reduction to prevent them from slipping into worse levels of acute food security.

¹ Although IPC/CH analyses were available in 41 countries, 5 countries had no population facing Emergency or worse (IPC/CH Phase 4 or above).

The population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent nearly doubled between 2016 and 2021



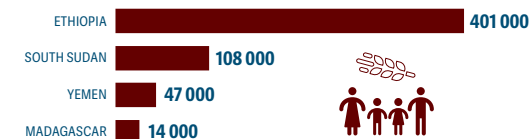
The percentage of the analysed population in these phases also nearly doubled between 2016 and 2021



For several countries, FEWS NET produced estimates that were lower than those provided by the IPC/CH Technical Working Groups.

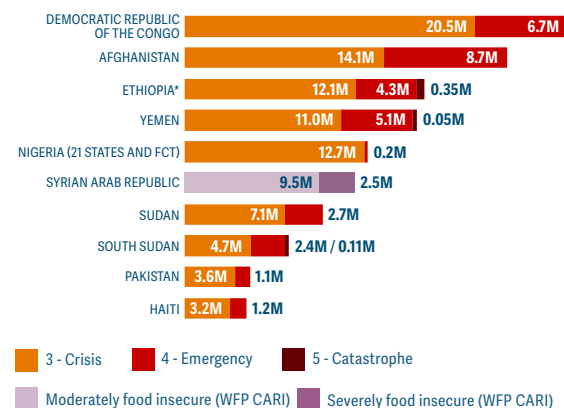
Source: FSIN & GNACF, 2017-2021; FSIN, using IPC, CH, FEWS NET, WFP, HNO and SEFSec data.

570 000 people faced Catastrophe (IPC Phase 5) in four countries in 2021 – the highest number in GRFC history



Source: FSIN, using IPC data.

Ten countries/territories with the highest number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021



* These consolidated estimates combine two IPC analyses – the October 2020 analysis of Belg and Meher-dependent areas (covering January–June 2021) and the May 2021 update of conflict-affected areas of Tigray, Afar and Amhara (covering May–June 2021). The Government of Ethiopia has not endorsed the May 2021 analysis.

Source: FSIN, using IPC, CH and WFP data; GRFC 2022.

In 2021, almost 70 percent of the total number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent were found in ten food crisis countries/territories: the Democratic Republic of the Congo, Afghanistan, Ethiopia, Yemen, northern Nigeria, the Syrian Arab Republic, the Sudan, South Sudan, Pakistan, and Haiti. In seven of these, conflict/insecurity was the primary driver of acute food insecurity.

Drivers of acute food insecurity in 2021

While the food crises profiled in the GRFC continue to be driven by multiple, integrated drivers that are often mutually reinforcing, conflict/insecurity remains the main driver. In 2021, around 139 million people were facing Crisis or worse (IPC/CH Phase 3 or above) or equivalent across 24 countries/territories where conflict/insecurity was considered the primary driver.

This is a marked increase from 2020, when 99 million people in 23 conflict-affected countries/territories were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent. It was the key driver in three of the four countries with populations in Catastrophe (IPC Phase 5) – Ethiopia, South Sudan and Yemen.

Economic shocks formed the main driver in 21 countries in 2021, where 30.2 million people were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent. Global food prices rose to new heights in 2021 as a result of a combination of factors, notably an uneven global economic recovery from the COVID-19 pandemic and widespread supply chain disruptions.

Domestic food price inflation in many low-income countries rose significantly, particularly those with weak currencies and a high reliance on food imports, in those where border closures, conflict or insecurity disrupted trade flows and where weather extremes severely curtailed food production/availability. These macroeconomic factors had a major impact on the purchasing power of the poorest households, many of which were still experiencing job and income losses due to pandemic-related restrictions.

Weather extremes were the main drivers of acute food insecurity in eight African countries, with 23.5 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent, including in southern Madagascar, where nearly 14 000 people were in Catastrophe (IPC Phase 5) in April–September 2021 due to the effects of drought.

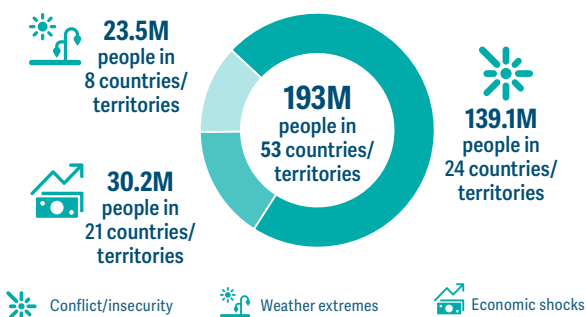
The impact of weather-related disasters on acute food insecurity has intensified since 2020, when it was considered the primary driver for 15.7 million people across 15 countries. Weather shocks – in the form of drought, rainfall deficits, flooding and cyclones – have been particularly detrimental in key crises in East, Central and Southern Africa, and Eurasia.

Malnutrition in food-crisis countries

Malnutrition remained at critical levels in countries affected by food crises, driven by a complex interplay of factors, including low quality food due to acute food insecurity and poor child-feeding practices, a high prevalence of childhood illnesses, and poor access to sanitation, drinking water and health care.

While data is limited, according to analyses carried out in 2021, almost 26 million children under 5 years old were suffering from wasting and in need of urgent treatment in 23 of the 35 major food crises. Within this, over 5 million children were at an increased risk of death due to severe wasting. In the ten food-crisis countries with the highest number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent, 17.5 million children were wasted.

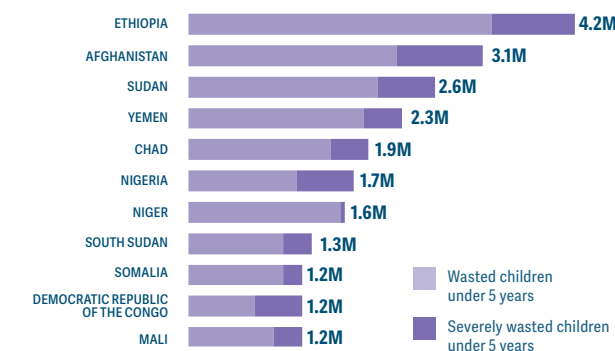
Numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent by key driver in 2021



Note: Many food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

Source: FSIN, GRFC 2022.

Countries/territories with more than 1 million wasted children under 5 years in 2021



The data for child wasting in 2021 is derived from IPC AMN for Yemen (February 2021); Chad (April 2021); Nigeria (December 2021); Somalia (December 2021) and Mali (March 2022); from HNOs for Afghanistan (January 2022), the Sudan (December 2021), Democratic Republic of the Congo (February 2022) and South Sudan (February 2022); and from the Global Nutrition Cluster for Ethiopia (September 2021) and the Niger (mid-2021).

Source: Global Nutrition Cluster; HNO 2022; IPC AMN 2020–2022.

Displacement in 2021

People uprooted from their homes are among the most vulnerable to acute food insecurity and malnutrition. In 2021, out of 51 million internally displaced people (IDP) globally, nearly 45 million were in 24 food-crisis countries/territories. The six countries/territories with the highest numbers of IDPs – the Syrian Arab Republic, Afghanistan, the Democratic Republic of the Congo, Yemen, Ethiopia and the Sudan – were among the ten largest food crises in 2021 by numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent.

Out of around 21 million refugees and 4 million asylum seekers globally in 2021, over 60 percent (around 15.3 million people) were hosted in 52 food-crisis countries/territories, where a mix of conflict/insecurity, COVID-19, poverty, food insecurity and weather extremes compounded their humanitarian plight (UNHCR, November 2021).

A grim outlook for 2022

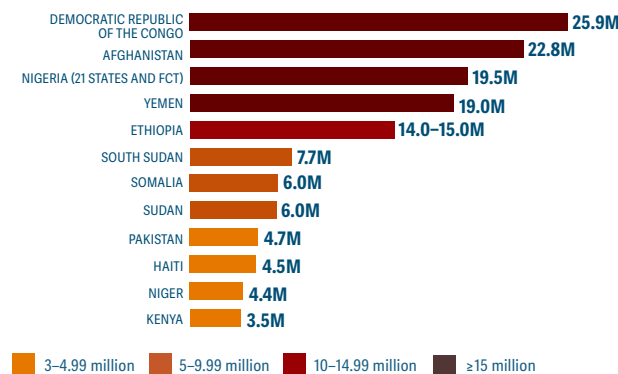
The situation is expected to worsen in 2022. In 41 out of the 53 countries/territories included in this report, as well as Cabo Verde, between 179 million and 181 million people are already forecast to be in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2022.² No forecast was available at the time of publication for 12 of the 53 countries/territories with an estimate reported in 2021.

For most of the world's major food crises, acute food insecurity is expected to persist at similar levels to 2021 or increase. Major deteriorations are anticipated in northern Nigeria, Yemen, Burkina Faso and the Niger due to conflict, as well as in Kenya, South Sudan and Somalia, largely due to the impact of consecutive seasons of below-average rains. Though significant uncertainty exists, an estimated 2.5–4.99 million people in Ukraine will likely need humanitarian assistance in the near term (FEWS NET, April 2022).

During 2022, around 329 000 people will likely face Catastrophe (IPC Phase 5) in three countries. It is expected that for the fifth consecutive year, Yemen will have populations in Catastrophe (IPC Phase 5), with 161 000 people projected to be in this phase in

² FEWS NET provided a range estimate for four countries (Ethiopia, Nicaragua, Uganda, and Zimbabwe) in 2022. Although data for Cabo Verde was not available in 2021, forecast data became available in 2022.

Countries/territories with over 3 million people forecast to be in Crisis or worse (IPC/CH Phase 3 or above) or equivalent, in 2022



Source: IPC/CH for all countries/territories except Ethiopia (FEWS NET).

the second half of 2022 under the most likely scenario. In a less likely, worst-case scenario, there is a Risk of Famine in at least two districts. Another 87 000 people are projected to face Catastrophe (IPC Phase 5) in South Sudan due to the cumulative effects of conflict/insecurity, weather extremes and macro-economic challenges. In Somalia, prolonged drought could push 81 000 people into Catastrophe (IPC Phase 5). Although not the most likely scenario, a Risk of Famine could emerge in Somalia by mid-2022, if the April–June Gu season rains fail, if conflict intensifies, if drought increases displacement and if food prices continue to rise. An additional factor influencing a Risk of Famine is if humanitarian assistance is not scaled up and does not reach the country's most vulnerable populations.

Our collective challenge

The alarmingly high incidence of acute food insecurity and malnutrition starkly exposes the fragility of global and local food systems that are under mounting strain from the increased frequency and severity of weather extremes, the COVID-19 pandemic, increasing conflict and insecurity and rising global food prices. The interconnectedness of drivers is further laid bare by the unfolding war in Ukraine, which not only compromises the food security of those directly affected by the war, but compounds existing challenges faced by millions of acutely food-insecure people worldwide.

Some countries facing food crises are particularly vulnerable to the risks to food markets created by the war in the Black Sea area, notably due to their high dependency on imports of food, fuel and agricultural inputs and/or vulnerability to global food price shocks.

While the international community has stepped up to calls for urgent famine mitigation action, global humanitarian and development funding for food crises is failing to match growing needs. While funding for humanitarian food assistance has been falling since 2017, the current shortfall is particularly stark due to the COVID-19-induced economic slowdown and prioritization of the public health response to the pandemic.

The way forward

The international community must anticipate and act to mitigate the severe consequences of those already experiencing the highest levels of acute food insecurity, as well as of those in food stress. The situation calls more than ever for at-scale action to protect lives and livelihoods and support sustainable food systems and production where it is needed most.

In contexts where food availability is limited by reduced imports and food access curtailed by higher prices and reduced humanitarian food assistance, providing support to farmers to raise their productivity and improve their access to markets, and to rural communities to diversify their livelihoods and enhance their resilience to shocks is crucial.

The international community must mobilize the investments and political will needed to collectively address the causes and consequences of escalating food crises across humanitarian, development and peace perspectives. The urgency to do this will likely continue to grow in the coming months and years, driven by the direct and indirect effects of the war in Ukraine.

The GRFC is a powerful guide for decision-makers in the international community. Though this report demonstrates that overall quality of data has improved, further work is needed to improve coverage, quality and timeliness of data collection and analysis. High quality and timely food security and nutrition data and information are vital in ensuring a situation analysis that identifies not only outcomes, but hunger's main drivers, for a targeted and integrated response.

The Global Network Against Food Crises

Founded by the European Union, FAO and WFP at the 2016 World Humanitarian Summit, the Global Network Against Food Crises is an alliance of humanitarian and development actors working together to prevent, prepare for, and respond to food crises and support the Sustainable Development Goal to End Hunger (SDG 2).

It seeks to reduce vulnerabilities associated with acute hunger; achieve food security and improved nutrition; and promote sustainable agriculture and food systems, using a '3x3 approach.' This involves working at the global, regional and national levels to support partnerships within existing structures and to improve advocacy, decision-making, policy and programming along the following three dimensions:

Dimension 1 | Understanding food crises

The work within this dimension aims to build greater consensus and promote evidence-based food security and nutrition analyses and reporting in order to strengthen the collection, quality and coverage of the food security and nutrition data and analysis, and inform decision-making and action. This will be achieved through the contribution to the *Global Report on Food Crises*, a unique 'global public good' under the coordination and leadership of the Food Security Information Network (FSIN), as well as the coordination, synthesis, and publication of technical analyses, including forward-looking analyses of food crises.

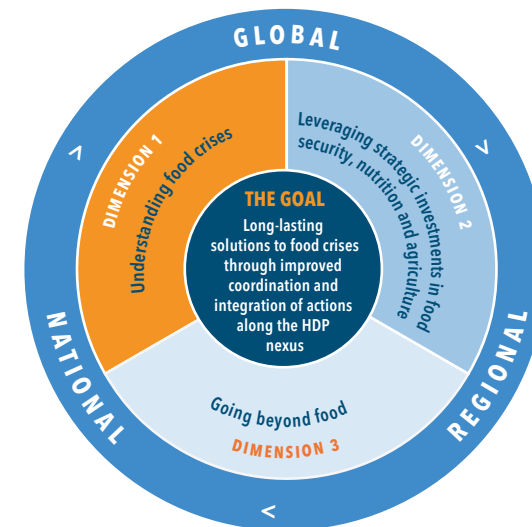
Dimension 2 | Leveraging strategic investments in food security, nutrition and agriculture

The work within this dimension aims to advocate for 'fit for purpose' financing that draws on the full range of resource flows (public and private, international and domestic) to better prepare for, prevent and respond to food crises. It seeks to improve coherence between humanitarian, development and peace actions (the HDP 'nexus') to build resilience to shocks and promote longer-term self-reliance. Activities include a strong focus on supporting capacity strengthening of country-level actors and institutions, as well as strengthening coordination at the regional level to ensure that investments are focused on the right place, at the right time.

Dimension 3 | Going beyond food

The work within this dimension aims to foster political uptake and coordination across clusters/sectors to address the underlying multi-dimensional drivers of food crises including environmental, political, economic, societal and security risk factors. It seeks to improve understanding and promote linkages between the different dimensions of fragility through knowledge sharing, advocacy and integrated policy responses.

The 3 x 3 approach to addressing food crises





CHAPTER 1

A GLOBAL OVERVIEW OF FOOD CRISES

Introduction

The 2022 Global Report on Food Crises (GRFC 2022) highlights the alarming deterioration of acute food insecurity in 2021 in numerous food-crisis countries/territories. Nearly 193 million people were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 53 countries/territories where comparable data were available in 2021 – as a result of intensified conflict, significant economic shocks and some of the most severe weather extremes in recent years, or a combination of these drivers.

The global figure identified in the 2022 edition is the highest in the report's six-year existence, exceeding the previous five-year high reported in the GRFC 2021 by nearly 25 percent. This increase, however, must be interpreted with care, given that it can be attributed to both the drivers of acute food insecurity as well as a substantial (22 percent) expansion in the population analysed.

In 2021, conflict escalated or persisted in many major crises, displacing people from their homes and livelihoods, destroying critical infrastructure and markets, and disrupting trade. At the same time, economies worldwide strove to recover from the damaging consequences of the COVID-19 pandemic, which left many people struggling to regain employment and re-establish businesses, against the backdrop of ongoing macro-economic challenges in many food-crisis countries/territories. These economic challenges, as well as pandemic-related supply chain disruptions, resulted in rising commodity prices worldwide, adversely affecting access to food for vulnerable households. The year 2021 also brought the worst weather extremes in decades to some areas, exposing agricultural and pastoralist households to crop and livestock losses and causing additional population displacements.

Most countries/territories that are affected by food crises have also experienced years of recurrent shocks, which have progressively eroded households' resilience to withstand and recover from stressors.

To inform policies and programming that effectively respond to these multi-dimensional crises, policy-makers require clear, timely and reliable data and analyses. However, information is often conflicting and derived from various sources and based on different methodologies that lack a consensus-based equivalent in terms of standard IPC/CH phases. The GRFC responds to these constraints by providing information based on a rigorous methodology and a highly consultative process.

The scope of the GRFC 2022

As an initiative of the Global Network Against Food Crises that is facilitated by the Food Security Information Network (FSIN) and its 17 global and regional partners, the GRFC 2022 offers an overview of the world's food crises in 2021, utilising data from the Integrated Food Security Phase Classification (IPC), the Cadre Harmonisé (CH), or comparable sources to provide acute food insecurity estimates.¹

The report focuses on countries/territories where there is ample evidence that the magnitude and/or severity of the food crisis exceeds the local resources and capacities needed to respond effectively, leading to a request for the urgent mobilization of the international community (*see page 13 and 14 and technical notes*).

The populations that require urgent action to meet their food needs are those populations in Crisis (IPC/CH Phase 3), Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5). In Crisis (IPC/CH Phase 3), households are already facing food consumption gaps which are reflected in high or above normal acute malnutrition, or are only able to minimally meet their food needs by depleting essential livelihood assets or engaging in crisis-level coping. People in Emergency (IPC/CH Phase 4) face high levels of acute malnutrition and excess mortality due to lack of food, or resort to emergency coping strategies to mitigate large

¹ See next page for more information on comparable sources. Certain organizations employ other acute food insecurity estimates that use different methods, which are used for operational needs (*see Technical Notes, page 233*).

The foundation of the GRFC: an evidence-based public good



A strong and expanding partnership



A highly consultative process



A compilation of multiple consensus-based food security and nutrition analyses



A technical document of reference on food crises

food consumption gaps. For populations in Catastrophe (IPC/CH Phase 5), households have exhausted all coping strategies and face destitution, very high malnutrition, starvation and death (*see figure 1.1*).

The GRFC Senior Committee endorses the consensus-based criteria used to identify countries/territories for consideration in the report (*see next page*), provides guidance on data gaps, addresses technical challenges and validates the final publication.

The GRFC Technical Working Groups work to agree on methods and approach; identify available data sources and analyses; coordinate with regional and country-level food security and nutrition specialists to assess information and close data gaps; review and validate the consistency and quality of data; and agree on peak estimates and key drivers of acute food insecurity and malnutrition.

The result is a reference document that is founded on independent, consensus-based evaluations and employs reliable information and analyses that have been validated and endorsed by experts. It also aims to highlight areas where information or data is lacking or insufficient.

In line with the approach of previous years, each country/territory included in the GRFC reflects the highest estimate of people in Crisis or worse (IPC/CH Phase 3 or above) – also known as the peak estimate – for the year 2021, based on all analyses available during the year. When an IPC/CH analysis is not available, acute food insecurity estimates are obtained from IPC-compatible FEWS NET analyses, WFP analyses based on CARI methodology, or Humanitarian Needs Overviews (see *Technical Notes*).

Acute food insecurity 2022 forecasts

The majority of the acute food insecurity forecasts covering 2022 are projections from IPC/CH, which identify the highest number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent based on available data, and the most likely scenarios during a projected period. The forecasts also factor in the potential effects of humanitarian assistance that is planned, already funded or likely to be funded and delivered in the analysed area. In countries where an IPC/CH projection is unavailable, an IPC-compatible estimated range of the number of people in Crisis or worse (IPC Phase 3 or above) is provided by FEWS NET, based on a most-likely scenario, in the absence of humanitarian food assistance.

A report based on consensus

All partners are in agreement with the general severity and magnitude of acute food insecurity indicated for the countries/territories included in the GRFC 2022, with the exception of the Central African Republic, the Democratic Republic of the Congo, Ethiopia, Haiti, Nigeria, the Sudan, Yemen and Zimbabwe. For all these countries, excluding Zimbabwe, FEWS NET produced estimates that were lower than those provided by the IPC Technical Working Groups and the CH, while for Zimbabwe, FEWS NET produced estimates that were higher than the IPC estimate (see *Technical Notes*). These differences contribute to FEWS NET obtaining a different trend in estimated global needs between 2020 and 2021.

FIGURE 1.1

IPC/CH acute food insecurity phase description and response objectives

Phase	Phase description and priority response objectives
Phase 1 None/Minimal	Households are able to meet essential food and non-food needs without engaging in atypical and unsustainable strategies to access food and income. Action required to build resilience and for disaster risk reduction.
Phase 2 Stressed	Households have minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in stress-coping strategies. Action required for disaster risk reduction and to protect livelihoods.
Phase 3 Crisis	Households either: <ul style="list-style-type: none"> • Have food consumption gaps that are reflected by high or above-usual acute malnutrition; or • Are marginally able to meet minimum food needs but only by depleting essential livelihood assets or through crisis-coping strategies. URGENT ACTION required to protect livelihoods and reduce food consumption gaps.
Phase 4 Emergency	Households either: <ul style="list-style-type: none"> • Have large food consumption gaps which are reflected in very high acute malnutrition and excess mortality; or • Are able to mitigate large food consumption gaps but only by employing emergency livelihood strategies and asset liquidation. URGENT ACTION required to save lives and livelihoods.
Phase 5 Catastrophe/ Famine	Households have an extreme lack of food and/or other basic needs even after full employment of coping strategies. Starvation, death, destitution and extremely critical acute malnutrition levels are evident. (For Famine classification, area needs to have extreme critical levels of acute malnutrition and mortality). ² URGENT ACTION required to revert/prevent widespread death and total collapse of livelihoods.

² A Famine classification requires evidence on food security, nutrition and mortality at or above IPC Phase 5 thresholds. If there is insufficient data for Famine classification but the available information indicates that Famine is likely occurring or will occur, then the famine classification is called 'Famine Likely'. It is important to note that Famine and Famine Likely are equally severe.

A call for attention to data gaps

Data gaps remain a challenge and prevent GRFC partners from reporting on the full range of countries of concern. Given these data gaps, the global number of people facing high levels of acute food insecurity in food crisis contexts is likely higher than the estimates included in the GRFC 2022. Twenty-four of the 77 countries/territories initially identified as potential food crises that required further investigation for inclusion in the GRFC 2022 were omitted because data gaps or insufficient evidence prevented partners from providing acute food insecurity estimates.

The absence of consensual and comparable acute food insecurity analyses for certain countries also remains a concern, as data gaps (where data is unavailable) and insufficient evidence (which entails a lack of consensual and comparable analyses) indicate a potential imbalance in the attention that different crises receive. Of the

24 countries with data gaps/insufficient evidence in 2021, Lebanon and Myanmar are particularly notable. Myanmar was covered as a food crisis in previous editions of the report, while Lebanon had a multi-agency emergency appeal/plan published that indicated concerns for acute food security levels in 2021. Despite the absence of consensual and comparable acute food security estimates in 2021, the qualitative evidence available for these two countries suggested that there are likely significant acute food insecurity challenges in these countries. Consequently, the GRFC 2022 gathered relevant evidence to present in the regional overviews.

The special focus on these two countries does not diminish the importance of other areas where data gaps persist or insufficient evidence is available. It is critical that donors and agencies prioritize assessments and analyses in countries/territories where acute food insecurity information is lacking.

Selecting countries and identifying major food crises for inclusion in the GRFC 2022

A rigorous selection process has been employed over the six years of the GRFC's existence. The selection process for the GRFC 2022 identified 77 qualifying countries/territories for potential inclusion. Following a review of the evidence, the GRFC Technical Working Group validated acute food insecurity estimates for 53 countries/territories, of which 35 were identified as major food crises. In all six years, 39 countries consistently qualified as food crises, of which 19 were identified as major food crises (*see Technical Notes*).

1 | PRE-SELECTION OF QUALIFYING COUNTRIES/TERRITORIES

48 countries/territories that requested external assistance for food and/or faced shocks as assessed by FAO-GIEWS:

- ▶ in 2021 or
- ▶ at least once in the past 3 years or
- ▶ at least 3 years in the past 10 years

29 low or middle-income countries/territories that did not meet FAO-GIEWS criteria, but requested external assistance as a result of:

- ▶ hosting refugee populations who were assisted by UNHCR and WFP
- ▶ having over 1 million or at least 20% of its population forcibly displaced
- ▶ having populations affected by conflict and insecurity, weather extremes and/or economic shocks

Countries were excluded if they were high-income countries, if they did not ask for FAO or WFP assistance, or if the shocks had little impact on food security.

77 countries/territories identified

2 | SELECTION AND GROUPING OF COUNTRIES/TERRITORIES

24 of the 77 countries/territories identified had data gaps or insufficient evidence to produce estimates of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent.

The remaining **53** food-crisis countries/territories are grouped into 5 regions:

- ▶ **Central and Southern Africa** incorporating selected SADC countries and the Central African Republic
- ▶ **East Africa** including IGAD countries and Burundi
- ▶ **West Africa and the Sahel** consisting of countries covered by the Cadre Harmonisé (CH) methodology and Libya
- ▶ **Eurasia** focusing on Ukraine (Donetsk and Luhansk oblasts), the Middle East and South Asia
- ▶ **Central America and Haiti**

53 countries/territories included
(*see table 1.1 on pp 30–33*)

3 | IDENTIFICATION OF MAJOR FOOD CRISES

35 of the selected countries/territories were identified as major food crises in 2021 based on meeting one or more of the following criteria:

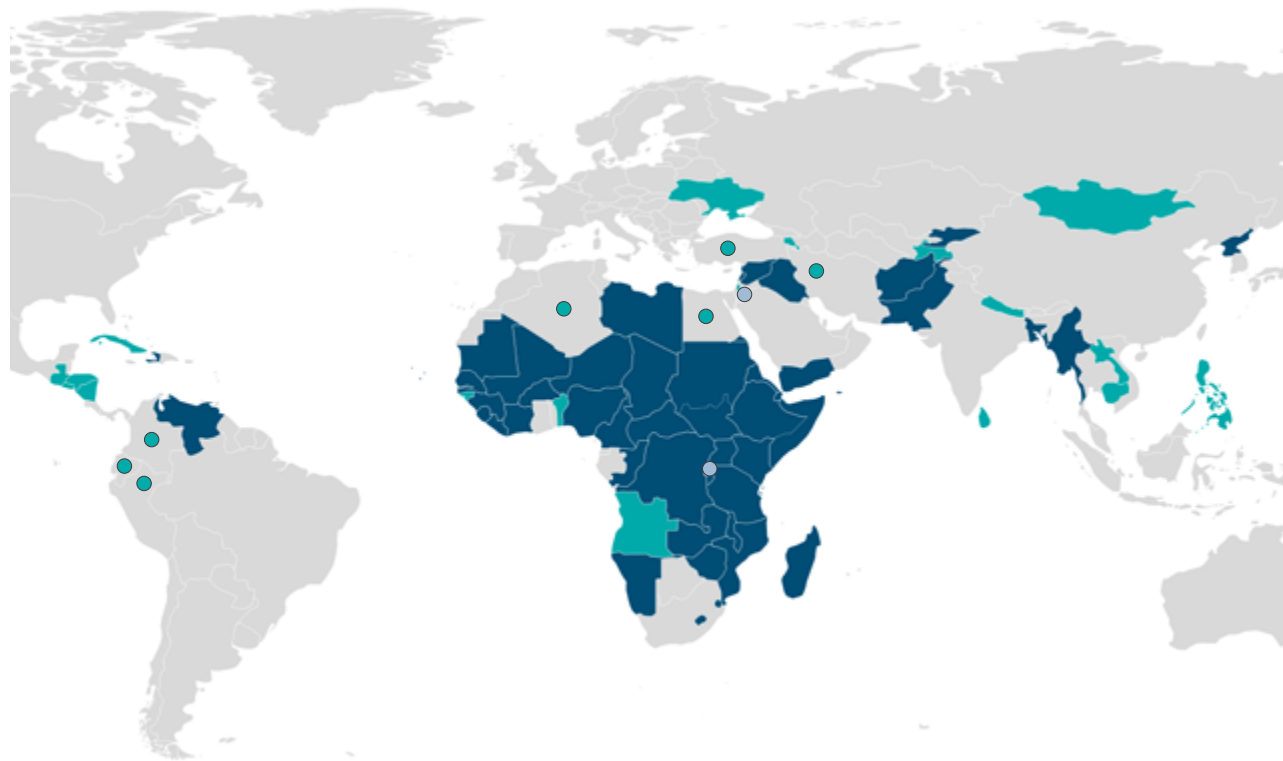
- ▶ at least 20% of the country population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
- ▶ at least 1 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
- ▶ any area in Emergency (IPC/CH Phase 4) or above
- ▶ included in the IASC humanitarian system-wide emergency response-level 3

35 major food crises analysed
(*see chapter 3, page 69*)

Geographical coverage

MAP 1.1

Countries/territories that met the criteria for further analysis in the GRFC 2022



○ Indicates migrants/refugee populations (colour coding applied as described in text to the right of the map).

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

Source: FSIN, GRFC 2022.

- **Countries that requested external assistance for food and/or faced shocks as assessed by FAO-GIEWS in 2021, at least once in the past three years or for at least three years in the past ten years:** Afghanistan, Bangladesh, Burkina Faso, Burundi, Cabo Verde, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic People's Republic of Korea, Democratic Republic of the Congo, Djibouti, Eritrea, Eswatini, Ethiopia, Gambia, Guinea, Haiti, Iraq, Kenya, Kyrgyzstan, Lebanon, Lesotho, Liberia, Libya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Namibia, Niger, Nigeria, Pakistan, Senegal, Sierra Leone, Somalia, South Sudan, Sudan, Syrian Arab Republic, Uganda, United Republic of Tanzania, Venezuela (Bolivarian Republic of), Yemen, Zambia, Zimbabwe.
- **Low or middle-income countries/territories that did not meet GIEWS criteria but experienced a shock or shocks to food security in 2021, for which they requested external assistance from FAO and/or WFP:** Algeria (Sahrawi refugees), Angola, Armenia, Benin, Cambodia, Colombia (Venezuelan migrants), Cuba, Ecuador (Venezuelan migrants), Egypt (Syrian refugees), El Salvador, Fiji, Guatemala, Guinea-Bissau, Honduras, Iran (Islamic Republic of) (Afghan refugees), Lao People's Democratic Republic, Lebanon (Syrian refugees), Mongolia, Nepal, Nicaragua, Palestine,* Papua New Guinea, Peru (Venezuelan migrants), Philippines, Sri Lanka, Tajikistan, Turkey (Syrian refugees), Ukraine.
- **Low or middle-income countries that did not meet GIEWS criteria but had populations in need of humanitarian assistance as a result of hosting refugee populations who were assisted under the WFP/ UNHCR MoU:** Jordan (Syrian refugees), Rwanda (refugees).
- **Of these aforementioned countries, the following 24 countries/ populations had data gaps or lacked sufficient evidence to produce estimates of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021:** Algeria (Sahrawi refugees), Armenia, Cabo Verde, Cambodia, Colombia (Venezuelan migrants), Congo, Cuba, Democratic People's Republic of Korea, Ecuador (Venezuelan migrants), Eritrea, Fiji, Iran (Afghan refugees), Kyrgyzstan, Lao, Lebanon (national),** Mongolia, Myanmar, Nepal, Papua New Guinea, Peru (Venezuelan migrants), Philippines, Sri Lanka, Tajikistan, Turkey (Syrian refugees), Venezuela (Bolivarian Republic of).

* The occupied Palestinian territories are referred to as Palestine in the GRFC 2022

** Lebanon and Syrian refugees in Lebanon both met GRFC criteria for 2021 (through GIEWS and receiving external assistance in response to a food security shock in 2021), however they are counted as one country.

Global overview 2021

Acute food insecurity overview, 2021

 **193M people**

in 53 countries/territories were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021

This figure includes estimates for 20 million people in 12 countries where data was provided by non-IPC/CH sources in 2021 that do not provide a breakdown of figures by IPC/CH phases of acute food insecurity. Therefore the sum of the populations detailed below in IPC/CH Phases 2–5 will not add up to 193 million people.



21% of the analysed population in 53 countries/territories were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021.

FSIN, using IPC, CH, FEWS NET, WFP, SEFSec and HNO data.



570 000 people in 4 countries were in Catastrophe (IPC Phase 5) in 2021



39.2M people in 36 countries were in Emergency (IPC/CH Phase 4) in 2021



133.1M people in 41 countries were in Crisis (IPC/CH Phase 3) in 2021



236.2M people in 41 countries were in Stressed (IPC/CH Phase 2) in 2021

No country with CH data had populations in Catastrophe (CH Phase 5) in 2021. Two figures included in this total were not from the 2021 peak period. The highest number of people in Catastrophe (IPC Phase 5) in Ethiopia was during July–September, while the highest number of people in Crisis or worse (IPC Phase 3 or above) was during May–June 2021. Similarly, the highest number of people in Catastrophe (IPC Phase 5) in Madagascar was during April–September, while the 2021 peak was during November–December due to a wider coverage.

Out of 41 countries/territories that had IPC/CH analyses, 36 had populations in Emergency (IPC/CH Phase 4).

Source: FSIN, using IPC, CH, FEWS NET, WFP, HNO and SEFSec data.

In 2021, around 193 million people were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 53 countries/territories – an increase of nearly 40 million people since 2020 and the highest number in the report's six-year existence.

The dramatic increase is primarily driven by prolonged or intensifying conflict, pre-existing and COVID-19-related economic shocks, weather extremes or a combination of these factors. It is also partly attributable to increased population coverage in countries such as the Democratic Republic of the Congo, as well as the use of revised population figures, such as in Afghanistan.

Major increases were reported in eight countries, accounting for 35 million additional people in Crisis or worse (IPC/CH Phase 3 or above): Afghanistan, with around 10 million additional people in these phases; Ethiopia (8 million); the Democratic Republic of the Congo (5 million); Nigeria (4 million); Pakistan and Yemen (3 million each) and Angola and Somalia (1 million each).

Between 2020 and 2021, the percentage of the analysed population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent also increased marginally from 20.8 to 21.3 percent. This increase occurred despite the fact that the analysed population rose by 22 percent between 2020 and 2021.

Famine Likely (IPC Phase 5) in localized areas of South Sudan

During the first half of 2021 in South Sudan, the western payams of Pibor county (Gumuruk, Pibor, Lekuangle and Verteth) continued to face Famine Likely (IPC Phase 5), according to the IPC Famine Review Committee (FRC) (IPC and External Reviews, December 2020).³

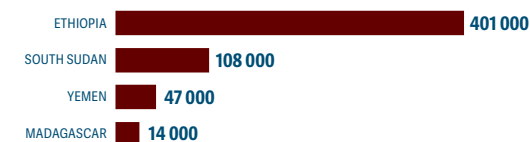
Populations in Catastrophe (IPC Phase 5) in four countries

Over 570 000 people in localized areas of four countries were in Catastrophe (IPC Phase 5) in 2021 and required urgent action

³ Famine (IPC Phase 5) and Famine Likely (IPC Phase 5) are equally severe; the only difference is the amount of reliable evidence available to support the statement.

FIGURE 1.2

Number of people in Catastrophe (IPC Phase 5) in 2021



Source: FSIN, using IPC data.

to prevent widespread starvation, death and total collapse of livelihoods. The highest numbers were in Ethiopia (401 000 people in the Tigray region in July–September 2021) followed by South Sudan (108 000 in April–July 2021); Yemen (47 000 in January–June 2021) and Madagascar (14 000 in the Grand Sud in April–September 2021).

'Risk of Famine' in three countries

In 2021, worsening humanitarian crises have also contributed to a growing number of countries where a **Risk of Famine** was projected. According to the IPC, Risk of Famine is a statement that reflects the potential worsening of the situation compared to the most likely scenario expected in the projection period. It is a statement that indicates a worst-case scenario that has a realistic chance of occurring, although it is not considered to be the most likely scenario, nor is it an IPC classification.

In **South Sudan**, during the first half of 2021, the IPC FRC issued a Risk of Famine statement for Kizongora and Maruwa payams (IPC and External Reviews, December 2020).⁴ In **Ethiopia's** Tigray region, the IPC classified key areas in Emergency (IPC Phase 4) in the most likely scenario. The IPC FRC developed four alternative

⁴ Following a breakdown in technical consensus among South Sudan IPC TWG members, which led to the activation of an external Quality Review and Famine Review, a report issued by the TWG reflected different findings from the external reviews regarding the estimation of populations in IPC Phase 5 (Catastrophe) in five counties, namely Akobo, Aweil South, Tonj East, Tonj North and Tonj South. It did not classify any payam of Pibor in Famine Likely, nor did it refer to a Risk of Famine.

Acute food insecurity overview, 2021 *continued*

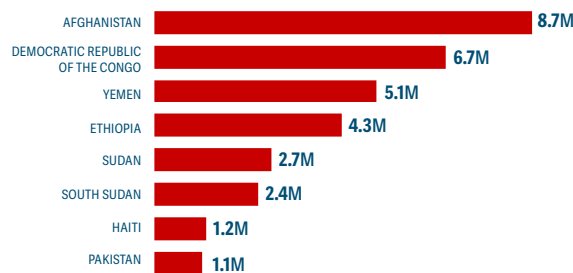
scenarios with a medium-to-high Risk of Famine in three of the four scenarios in the second half of 2021. Multiple scenarios indicated a Risk of Famine in October–December and a worst-case scenario reported this risk in July–September (IPC, July 2021).⁵ In June, in **Madagascar's** Grand Sud region, an escalating crisis driven by the effects of severe drought and COVID-19 measures led the country IPC Technical Working Group to warn that the district of Ambovombe-Androy would face a Risk of Famine from October 2021 in the worst-case scenario. Although the subsequent provision of humanitarian assistance averted a catastrophic situation and mitigated the Risk of Famine, affected areas remained in Emergency (IPC Phase 4), indicating a severe humanitarian crisis (IPC, July and December 2021).

Populations in Emergency (IPC/CH Phase 4)

Around 39 million people were in Emergency (IPC/CH Phase 4) in 36 countries/territories in 2021. Afghanistan, the Democratic Republic of the Congo, Yemen, Ethiopia, the Sudan and South Sudan, had more than 2 million people each in Emergency (IPC/CH Phase 4), while Haiti and Pakistan had around one million people each. These countries accounted for 82 percent of the total global number in this phase.

FIGURE 1.3

Eight countries/territories had over one million people in Emergency (IPC/CH Phase 4) in 2021



Source: FSIN using IPC data.

⁵ The Government of Ethiopia did not endorse the findings of this IPC analysis.

Within this, the Democratic Republic of the Congo, Yemen, Ethiopia and Afghanistan accounted for nearly 63 percent of the global number of people in Emergency (IPC/CH Phase 4).

In Afghanistan, the Central African Republic, Haiti, South Sudan and Yemen, over 10 percent of the population analysed was in Emergency (IPC Phase 4), reaching 21 percent in Afghanistan and 20 percent in South Sudan. Although there are no estimates for the populations in this phase in the Syrian Arab Republic, 2.5 million people, or 12 percent of the population analysed, were severely food insecure according to WFP, using CARI methodology.

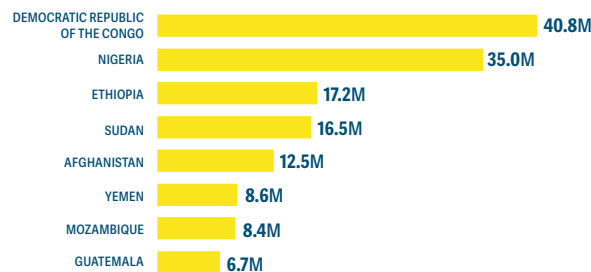
Populations in Stressed (IPC/CH Phase 2)

An additional 236 million people were in Stressed (IPC/CH Phase 2) in 41 countries with IPC/CH analyses in 2021, requiring action for disaster risk reduction and protecting livelihoods.

Five countries account for over half (52 percent) of the number of people in this phase, in order of magnitude: the Democratic Republic of the Congo, Nigeria, Ethiopia, the Sudan and Afghanistan. In another set of countries – Burundi, the Democratic Republic of the Congo, Guatemala, Madagascar and Mozambique – at least 40 percent of the analysed population were in Stressed (IPC Phase 2), peaking at 46 percent in Mozambique.

FIGURE 1.4

Eight countries/territories with the largest populations in Stressed (IPC/CH Phase 2) in 2021



Source: FSIN using IPC and CH data.

Acute food insecurity trends, 2016–2021

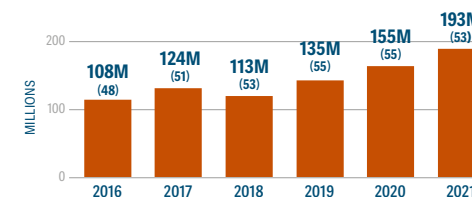
In 2021, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent reached the highest level in the six editions of the GRFC (see figure 1.5).

At 193 million in 2021, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent was 24 percent higher than in 2020, although the number of food-crisis countries/territories decreased from 55 to 53 due to limited data availability in 2021.⁶

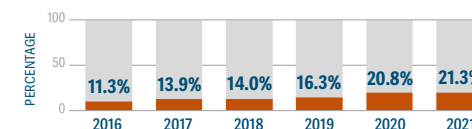
This year-on-year increase indicates worsening acute food insecurity, especially in major food-crisis countries such as Afghanistan, Ethiopia and Yemen. However, it also reflects an increase in the geographical coverage of analyses in countries/territories *continued over...*

FIGURE 1.5

The population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent nearly doubled between 2016 and 2021



The percentage of the analysed population in these phases also nearly doubled between 2016 and 2021



Numbers in brackets refer to numbers of food-crisis countries/territories. For several countries, FEWS NET produced estimates that were lower than those provided by the IPC/CH Technical Working Groups.

Source: FSIN & GNACF, 2017–2021; FSIN, using IPC, CH, FEWS NET, WFP, HNO and SEFSec data.

⁶ For more information on the differences between the countries/territories covered in 2020 and 2021, see Technical Notes.

Acute food insecurity trends, 2016–2021 *continued*

continued from previous page...

territories such as the Democratic Republic of the Congo and Nigeria, and updated population figures for certain countries, notably Afghanistan (*see Technical Notes*).

When comparing the 51 countries/territories where comparable data was available for both 2020 and 2021, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent rose from 154.7 million in 2020 to 192.5 million in 2021, representing a 24 percent increase.

Between 2016 and 2021, the population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent increased by around 80 percent. The main increases at country level were recorded in the Democratic Republic of the Congo, Afghanistan, Ethiopia, the Sudan, the Syrian Arab Republic and Nigeria, with these six countries accounting for around two-thirds of the increase over the six years (58 million people).

Until 2020, the number of food-crisis countries/territories covered in the GRFC had increased steadily each year, largely due to additional IPC/CH analyses being conducted. However, scattered data availability and data gaps in 27 countries covered at least once in the GRFC (including in the Bolivarian Republic of Venezuela and in Myanmar) limit the comparability of acute food insecurity estimates over the various editions of the report.

The percentage of analysed populations in Crisis or worse (IPC/CH Phase 3 or above) or equivalent for all countries covered in each edition has risen each year.

Looking at how the percentage of the global analysed population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent has changed year-on-year since 2016 gives another perspective of the worsening situation. While the growing numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent year-on-year may be explained in part by increased geographic analysis coverage and changes in base population estimates, the steady rise in the share of people in these phases also indicates a deterioration in food security.

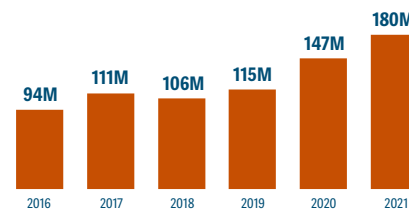
Since 2016, the share of people facing Crisis or worse (IPC/CH Phase 3 or above) or equivalent in all countries has almost doubled, from 11.3 percent to 21.3 percent. The share has increased each year – even between 2017 and 2018, when the number of people in these phases dipped slightly. The biggest share increase was between 2019 and 2020.

When only comparing the 39⁷ countries that have been included in all editions of the GRFC since 2016, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent increased by 92 percent between 2016 and 2021.

In the six years since the GRFC was first published, 39 countries/territories have been consistently included in all editions. In these countries/territories, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent increased by 18 percent between 2016 and 2017, before decreasing slightly between 2017 and 2018 by 4.5 percent. Since 2018, the numbers have risen significantly each year, with the biggest increases between 2019 and 2020 (28 percent increase) and between 2020 and 2021 (22 percent increase) (*see figure 1.6*).

FIGURE 1.6

The population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in the 39 countries included in each GRFC edition



Source: FSIN, using IPC, CH, FEWS NET, WFP, HNO and SEFSec data.

⁷ Afghanistan, Bangladesh, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Ethiopia, Gambia, Guatemala, Guinea, Guinea Bissau, Haiti, Honduras, Iraq, Kenya, Lesotho, Liberia, Libya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Nicaragua, Niger, Nigeria, Senegal, Sierra Leone, Somalia, South Sudan, Sudan, Syrian Arab Republic, Uganda, Yemen, Zambia, Zimbabwe.

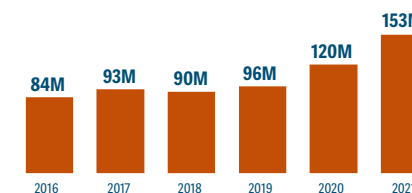
Among these 39 countries, 19⁸ have consistently been reported as countries with major food crises throughout the six editions.

These 19 countries encompassed most of the increase in the population in Crisis or worse (IPC/CH Phase 3 or above) over the six years – accounting for close to 69 million people, or 80 percent of the increase reported in the 39 countries (*see figure 1.7*).

Between 2016 and 2021, these 19 countries with major food crises represented 71–80 percent of the total population reported in Crisis or worse (IPC/CH Phase 3 or above) in each edition of the GRFC.

FIGURE 1.7

The population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 19 major food crises included in each GRFC edition



Source: FSIN, using IPC, CH, FEWS NET, WFP, HNO and SEFSec data.

⁸ Afghanistan, Cameroon, the Central African Republic, Chad, the Democratic Republic of the Congo, Eswatini, Ethiopia, Haiti, Madagascar, Malawi, Mozambique, the Niger, Nigeria, Somalia, South Sudan, the Sudan, the Syrian Arab Republic, Yemen and Zimbabwe.

Acute food insecurity trends, 2016–2021 *continued*

In 2021, the population in Catastrophe (IPC/CH Phase 5) was more than four times higher than the estimates for 2020.

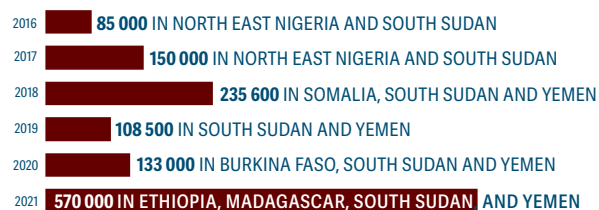
The GRFC 2022 marks the first time that the number of people in Catastrophe (IPC/CH Phase 5) surpassed that of the GRFC report's six-year high of 2018, when populations in South Sudan, Somalia and Yemen were in this phase due to a confluence of armed conflict, economic decline and weather extremes. The 2021 figure of 570 000 people represents a 142 percent increase since 2018 – underlining a significant deterioration in four major food crises.

Between 2016 and 2019, populations were identified in Catastrophe (IPC/CH Phase 5) in northeastern Nigeria, South Sudan, Yemen, and Somalia. Populations were reported in Catastrophe (IPC Phase 5) in South Sudan every year since 2016, ranging between 30 000 people in 2016 to 155 000 in 2018, and in Yemen every year since 2018.

In June–August 2020, 11 400 people faced Catastrophe (CH Phase 5) in Burkina Faso for the first time in the GRFC's existence, due to widespread conflict, displacement, and lack of access to humanitarian assistance. In 2021, for the first time in the GRFC's history, populations were in Catastrophe (IPC Phase 5) in Ethiopia following the outbreak of conflict in Tigray,⁹ and in Madagascar's Grand Sud, as a result of the effects of a severe drought (see figure 1.8).

FIGURE 1.8

Populations in Catastrophe (IPC/CH Phase 5)



Several of the estimates in IPC/CH Phase 5 do not correspond to the annual peak period identified in the six editions of the GRFC. See Technical Notes for more information.

Source: FSIN, using IPC and CH data.

⁹ The Government of Ethiopia did not endorse the findings of the May 2021 IPC analysis.

FIGURE 1.9

Populations in Emergency (IPC/CH Phase 4)



Source: FSIN, using IPC and CH data.

The number of people in Emergency (IPC/CH Phase 4) reached the highest point in the six years of the GRFC's existence in 2021, with over 82 percent of them in eight countries: Afghanistan, the Democratic Republic of the Congo, Yemen, Ethiopia, the Sudan, South Sudan, Haiti and Pakistan.

Relative to 2020, the most significant increases in 2021 were in Afghanistan, where the population in this phase roughly doubled to over 8.7 million by the end of 2021, in part due to the use of base population estimates that were higher than in previous years (see Technical Notes).

Between late 2020 and the 2021 peak, Ethiopia experienced a 205 percent increase to around 4.3 million people in Emergency (IPC Phase 4).

In the Democratic Republic of the Congo, the population in Emergency (IPC Phase 4) was the second largest globally, increasing by over 1 million from 2020 to 6.7 million people in 2021, in part due to increased IPC geographical coverage.

Yemen had the third largest population in Emergency (IPC Phase 4) in 2021, with the number of people in this phase rising by 39 percent from 3.6 million in 2020 to 5.06 million in 2021.

The number of people in Emergency (IPC Phase 4) in Somalia increased by 60 percent to over 640 000.

When comparing the number of people in Emergency (IPC/CH Phase 4) across the history of the GRFC, the 2021 figure represents a dramatic deterioration since the first edition (see figure 1.9).

Between 2016 and 2021, the population in Emergency (IPC/CH Phase 4) increased by 170 percent – a drastic rise that reflects the growing severity of major crises, notably in Afghanistan, the Democratic Republic of the Congo, Ethiopia, South Sudan and the Sudan, as well as an increase in coverage, and worsening food security outcomes in a larger group of countries. For example, CH data for Cameroon became available for the GRFC 2018, and IPC data for Ethiopia became available for the GRFC 2021. Both had populations in Emergency (IPC Phase 4).

In 2021, out of the 193 million people in the three highest phases of acute food insecurity, nearly 70 percent were in Crisis (IPC/CH Phase 3). In five countries – the Democratic Republic of the Congo, Nigeria (21 states and FCT), Afghanistan, Ethiopia and Yemen – more than 10 million people were in this phase.

Between 2016 and 2021, the number of people in Crisis (IPC/CH Phase 3) increased by 183 percent. Between 2018 and 2021, the number of countries with over three million people in Crisis (IPC/CH Phase 3) increased from six to ten. During the same period, in the ten countries with the largest populations in Crisis (IPC/CH Phase 3), the number of people in this phase rose from 51.6 million to 92.2 million.

FIGURE 1.10

Populations in Crisis (IPC/CH Phase 3)



Source: FSIN, using IPC and CH data.

FIGURE 1.11

Populations in Stressed (IPC/CH Phase 2), 2016–2021



Source: FSIN, using IPC and CH data.

For the 41 countries/territories in 2021 where IPC/CH data was available, the number of people in Stressed (IPC/CH Phase 2) reached 236 million.¹⁰ This represents an increase of 13 percent since 2020, when there were 208 million people in this phase in 43 countries.

In the six-year history of the GRFC, there has been an annual rise in the numbers of people in Stressed (IPC/CH Phase 2). Between 2016 and 2021, the population in this phase has increased by 170 percent, up from 87.4 million across 27 countries/territories.

This trend reflects a growing number of countries with IPC/CH analyses available, as well as increased geographical coverage in analyses. For example, between 2016 and 2021, the population analysed in countries/territories where Stressed (IPC/CH Phase 2) data was available increased from 377.9 million to 803.1 million. It also indicates worsening food security outcomes in numerous countries, such as the Democratic Republic of the Congo, where nearly 48 million people were classified in Stressed (IPC Phase 2) in 2021.

Populations in Stressed (IPC/CH Phase 2) require action from the development sector for disaster risk reduction and livelihood protection.

¹⁰ This figure does not include marginally food-insecure populations in seven countries where the analyses were based on the WFP CARI methodology, pending the availability of updated comparability studies between IPC/CH food security classifications and those of WFP's CARI methodology.

Financial assistance to food crises reached a five-year low in 2020

To complement the information provided in the *Global Report on Food Crises*, the Global Network Against Food Crises started the production of an analysis of financing flows to food sectors – food security, agriculture and nutrition – in countries with food-crisis situations.

In line with the scope of the GRFC, the Financing Flows and Food Crises report aims to inform decision-makers at all levels to improve the understanding on how the international community, as well as national governments, are addressing food crises, and the availability of evidence for financial allocations and indication to policy and programming efforts. In addition to a trend analysis of the volume of external financing allocated to food sectors globally, regionally and nationally, it analyses data on humanitarian assistance to food sectors alongside data on acute food insecurity at the country level.¹¹

Countries characterised by food crises receive 84 percent of all humanitarian assistance worldwide (all sectors considered) – while absorbing 33 percent of global development assistance.

In 2020, the humanitarian assistance allocated to food sectors in 55 food-crisis countries/territories was the lowest recorded in the five-year existence of the GRFC, even though the number of acutely food-insecure people was the highest on record.¹²

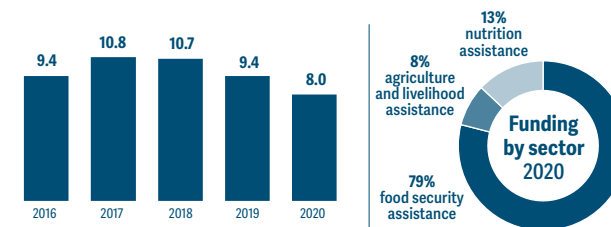
Humanitarian assistance to food sectors in food-crisis countries/territories has been decreasing since 2017. In 2020, it stood at USD 8.1 billion, 25 percent lower than in 2017 (see figure 1.12). The two biggest decreases in disbursements were reported in Yemen (a 50 percent decrease of USD 1 billion since 2019) and the Syrian Arab Republic (a 16 percent decrease of USD 147 million).

¹¹ Food sector humanitarian assistance includes disbursements aimed at improving or safeguarding food security by providing cash or in-kind food assistance or increased food production as well as assistance aimed at improving and safeguarding nutrition and health. Food sector development assistance includes disbursements aimed at building long-term household food security and livelihood support through funds directed at agriculture, basic nutrition, development food assistance, fishing, forestry, rural development, and school feeding etc.

¹² The analysis did not cover 2021 due to lack of available humanitarian and development data for the year at the time of the analysis.

FIGURE 1.12

Humanitarian assistance to food sectors in food-crisis countries/territories (USD billions)



Source: Global Network Against Food Crises.

The report showed that on average from 2016–2020, food sectors in food-crisis countries/territories received 34 percent of global humanitarian assistance spending. Humanitarian assistance for food security was consistently the most funded food sector, while humanitarian assistance for agriculture and livelihoods was the least funded, and decreased by more than 50 percent since 2016.

Although it remained well below humanitarian allocations, development assistance to food sectors in 50 food-crisis countries/territories (excluding refugee crises) consistently increased between 2016 and 2019, reaching USD 6.2 billion in 2019.

The *Financing Flows and Food Crises* report aims to complement the GRFC by examining how the international community and national governments are addressing food crises financially (GNAFC, December 2021).

The ten crises with the highest number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021

In ten food crises, around 134 million people were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021 – nearly 70 percent of the global population in these three phases.

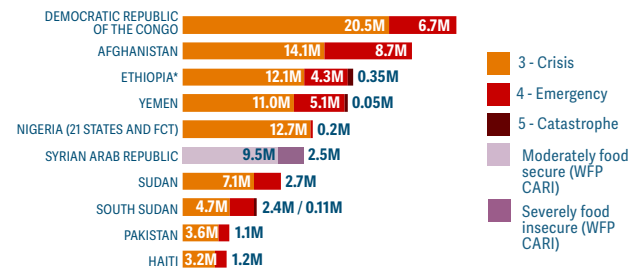
The Democratic Republic of the Congo, Afghanistan and Ethiopia had the largest populations in Crisis or worse (IPC Phase 3 or above). These three conflict-affected countries, plus Yemen, accounted for 43 percent of the global population in Crisis or worse (IPC Phase 3 or above), or some 83 million people. The ten largest food crises had around 33 million people in Emergency or worse (IPC/CH Phase 4 or above), representing 83 percent of the global number in Emergency and Catastrophe (IPC/CH Phases 4 and 5).

The majority of the global population in Catastrophe (IPC Phase 5) in 2021 were in three of these food crisis contexts – 401 000 people in Ethiopia; 108 000 in South Sudan; and 47 000 in Yemen. South Sudan faced 'Famine Likely' (IPC Phase 5) in localized areas, and both Ethiopia and South Sudan had areas at Risk of Famine in 2021.

In four countries – Afghanistan, South Sudan, the Syrian Arab Republic and Yemen – more than half of the analysed populations were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent.

FIGURE 1.13

Ten countries/territories with the highest number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2021

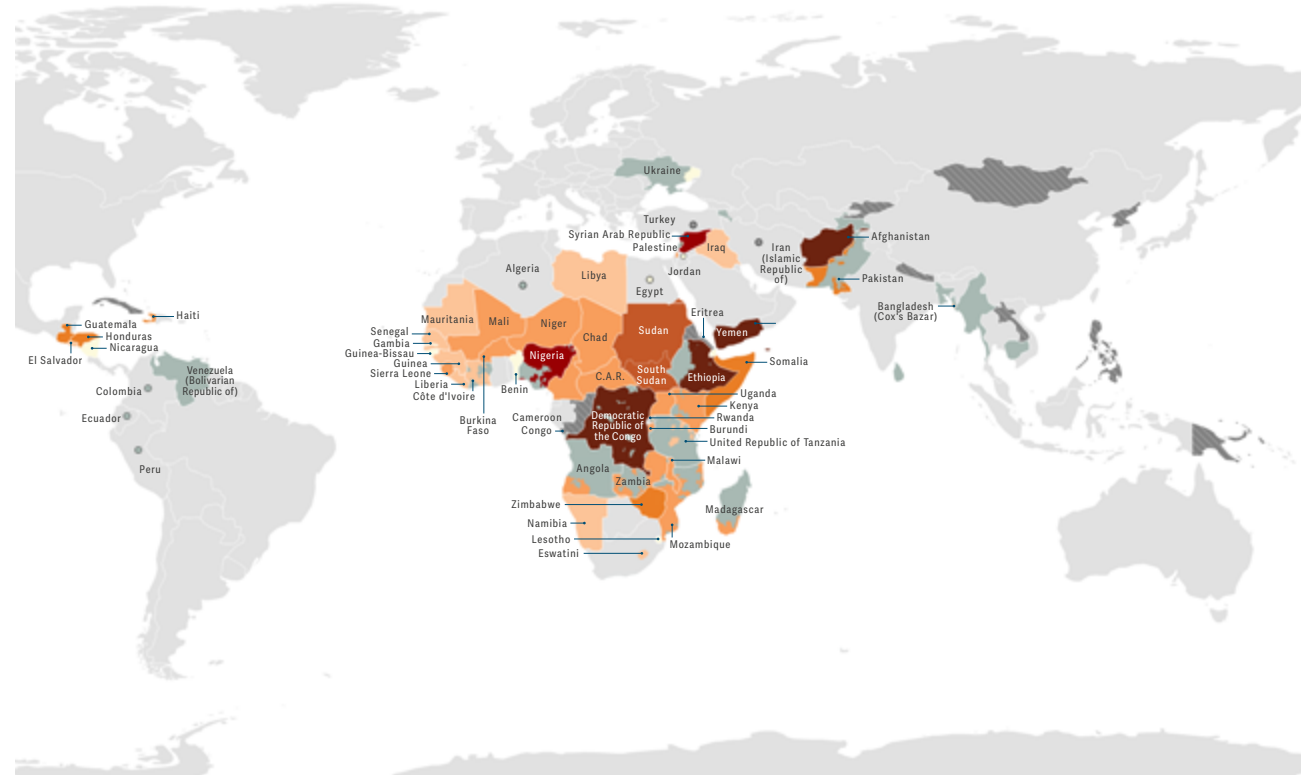


* These consolidated estimates combine two IPC analyses – the October 2020 analysis of Belg and Meher-dependent areas (covering January–June 2021) and the May 2021 update of conflict-affected areas of Tigray, Afar and Amhara (covering May–June 2021). The Government of Ethiopia has not endorsed the May 2021 analysis.

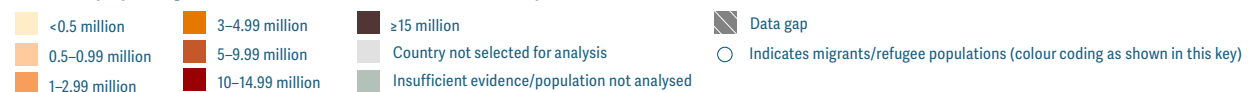
Source: FSIN, using IPC, CH and WFP data; GRFC 2022.

MAP 1.2

Numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 53 countries/territories in 2021



Numbers of people (ranges) in Crisis or worse (IPC/CH Phase 3 or above) or equivalent



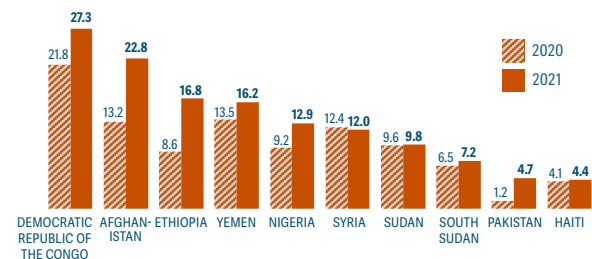
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

In the Democratic Republic of the Congo, the IPC analysis covered 170 areas (including 35 urban areas) in 2020 compared to 179 areas in 2021 (including 48 urban areas). In terms of population coverage, in 2020 the IPC covered 65 percent of the total country population while in 2021 it covered 91 percent.

Source: FSIN, GRFC 2022.

Trends in the countries with the largest populations in Crisis or worse (IPC/CH Phase 3 or above) or equivalent, 2016-2021

FIGURE 1.14
Numbers of people in IPC/CH Phase 3 or above (or equivalent) in the ten largest food crises, 2020-2021



In Pakistan, only Khyber Pakhtunkhwa was analysed in 2020 while in 2021 two additional provinces were analysed (Sindh and Balochistan). In Afghanistan, the October 2021 IPC report used Flowminder population estimates and therefore expanded the number of people analysed relative to previous IPC analyses. In Nigeria, in 2020, 15 states and FCT were covered while 21 states and FCT were analysed in 2021.

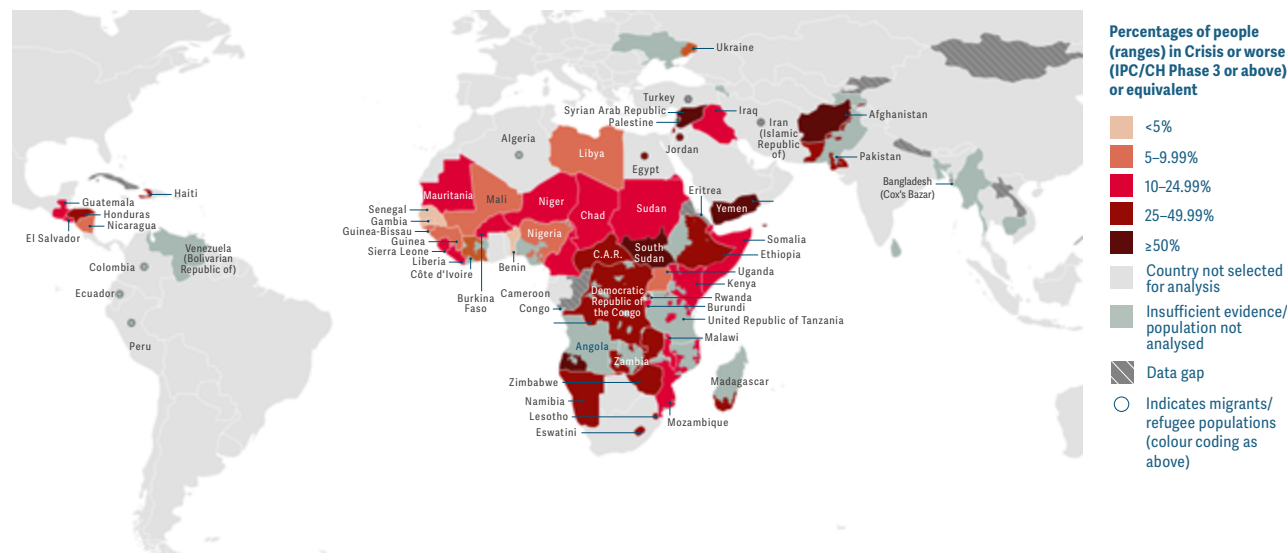
Source: FSIN, using IPC, CH and WFP data; GRFC 2022.

Between 2020 and 2021, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in the world's ten largest food crises increased by some 30 million. This is partly due to worsening acute food insecurity as well as expanded analysis coverage in some countries and updated population figures for Afghanistan.

Nine of these ten food crises were the same as in 2020 – the Democratic Republic of the Congo, Afghanistan, Ethiopia, Yemen, Nigeria, the Syrian Arab Republic, the Sudan, South Sudan, and Haiti. Zimbabwe, which was among the ten largest food crises in 2020, was replaced by Pakistan in 2021.

Since 2016, the number of people in the ten largest food crises increased by 61 million. Seven of these food crises – Afghanistan, the Democratic Republic of the Congo, Ethiopia, Nigeria, South Sudan, the Syrian Arab Republic, and Yemen – have been among the ten largest food crises every year since 2016, due to a combination of conflict and insecurity, economic shocks and weather extremes. The Sudan has also been among the ten largest crises each year, with the exception of 2017.

MAP 1.3
Share of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 53 countries in 2021



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. 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: FSIN, GRFC 2022.

Yemen held the largest number of people in Crisis or worse (IPC Phase 3 or above) each year from 2016-2019, but since then the Democratic Republic of the Congo has had the highest numbers of people in these phases, partly due to expanded geographical coverage. In 2019, the IPC analysis covered 69 percent of the national population of the Democratic Republic of the Congo, while in 2021 the IPC analysis covered 91 percent of the national population.

Venezuela (Bolivarian Republic of) was the fourth biggest crisis in 2019 – the only year for which data has been available.

Since 2019, Haiti has been the world's tenth biggest food crisis each year. In the early years of the GRFC, Malawi had the sixth highest

number of people in Crisis or worse (IPC Phase 3 or above) in 2016, the eighth largest in 2017 and ninth largest in 2018.

Just a few countries – the Democratic People's Republic of Korea (2016), Zimbabwe (2017 and 2020), South Africa (2017), Somalia (2018), and Pakistan (2021) – have featured only once. In 2021, Pakistan became the ninth largest food crisis globally, largely due to the expansion of geographical coverage to include three provinces.

The total population analysed in the ten largest food crises increased from 398 million (excluding Pakistan) in 2016 to 492 million in 2021.

Drivers of food crises in 2021 – a global overview

The GRFC 2022 aims to identify the most prominent driver of acute food insecurity for each country/territory. In 2021, conflict/insecurity, weather extremes and economic shocks, including COVID-19-related economic effects, again constituted the three primary drivers – but these drivers are often interlinked and mutually reinforcing, rendering it difficult to specify a singular trigger of each food crisis (see figure 1.15).

✱ Conflict/insecurity

In 2021, conflict/insecurity was a primary driver of acute food insecurity in 24 countries/territories covered in the GRFC. These countries accounted for around 139 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent, an increase of 40 million people since 2020.

It was the key driver in three of the four countries with populations in Catastrophe (IPC Phase 5) – Ethiopia, South Sudan and Yemen – and in seven of the ten largest food crises. Around 75 percent of the population in Emergency or worse (IPC/CH Phase 4 or above) in 2021 were in 13 countries (with IPC/CH analyses) in which conflict/insecurity was the main driver. Between 2018 and 2021, the number of people facing Crisis or worse (IPC/CH Phase 3 or above) or equivalent in countries/territories where conflict/insecurity was the principal driver increased by a staggering 88 percent – from around 74 million to 139 million.

All countries/territories with major food crises mainly driven by conflict were also affected by either weather extremes, economic shocks or both. These two drivers often fuel tensions and conflicts by increasing competition around limited natural resources and income opportunities.

In 2021, in **Central and Southern Africa**, intensifying conflict in the northwestern prefectures of the Central African Republic, eastern parts of the Democratic Republic of the Congo and northeastern Mozambique (Cabo Delgado) disrupted livelihoods and agriculture, displaced populations and restricted humanitarian access.

In **East Africa**, fighting in Ethiopia's Tigray, Amhara and Afar regions displaced populations, disrupted livelihoods, cut off

market access and constrained food production and humanitarian assistance, while in South Sudan, violence limited access to food and hindered humanitarian operations in the Greater Pibor Administrative Area, Jonglei, Warrap and Eastern Equatoria. In Somalia and the Sudan, although conflict/insecurity was not considered the primary driver, violence forced people from their homes, particularly in the Sudanese states of Darfur, Kordofan and Blue Nile. In Uganda and Rwanda, refugees fleeing conflict from Burundi, the Democratic Republic of the Congo, Somalia and South Sudan comprised most of the acutely food insecure population.

In **West Africa and the Sahel**, conflict severely disrupted livelihoods, markets and trade, triggered large-scale internal and cross-border displacement and constrained humanitarian access, notably across the Lake Chad Basin¹³ and the Central Sahel area, particularly the Liptako-Gourma border areas of Burkina Faso, Mali and the Niger. Insecurity was also prevalent in Cameroon (Northwest and Southwest regions), Chad (Tibesti), north-central, northwestern and southern states of Nigeria, southern Burkina Faso, and southern Mali.

In **Eurasia**, conflict/insecurity was a primary driver of food crises in Afghanistan, Iraq, Palestine, the Syrian Arab Republic, Ukraine and Yemen, for Syrian refugees in Egypt, Jordan and Lebanon, and for Rohingya refugees and host populations in Cox's Bazar, Bangladesh. In Ukraine, prior to the outbreak of war in February 2022, conflict was already the primary driver in Donetsk and Luhansk oblasts. Although conflict in Iraq officially ended in 2017, almost 1.2 million people remained internally displaced in 2021.

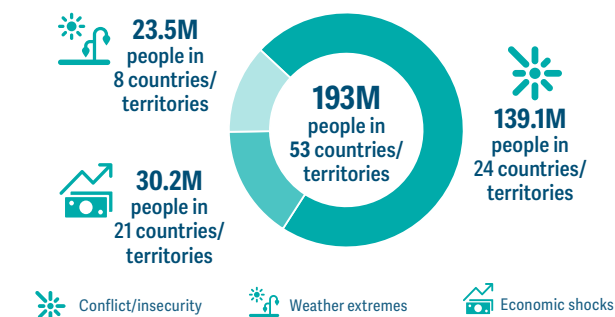
🏠 Economic shocks, including COVID-19

In 2021, 21 countries/territories had economic shocks as a primary driver of acute food insecurity. In these 21 countries/territories, around 30.2 million people were in Crisis or worse (IPC/CH Phase 3 or above) or equivalent. This figure includes two of the world's largest food crises in terms of absolute numbers – Pakistan and Haiti.

¹³ Adamawa, Borno and Yobe states in northeast Nigeria, Lac region in Chad, Far-North region in Cameroon, and Diffa region in the Niger.

FIGURE 1.15

Numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent by key driver in 2021



Note: Many food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

Source: FSIN, GRFC 2022.




The number of countries affected by economic shocks more than doubled between 2019 and 2020 from eight to 17 due to the adverse impacts of the COVID-19 pandemic on livelihoods, incomes and food prices – contributing to around 40.5 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 2020. In 2021, despite a decrease in the number of people in Crisis or worse (IPC/CH Phase 3 or above) primarily affected by economic shocks from 2020, they were considered either a primary, secondary or tertiary driver in 48 out of the 53 countries/territories covered in the report. This reflects in part a sharp rise in global food prices in 2021 as a result of a combination of factors, notably an uneven global economic recovery from the COVID-19 pandemic and widespread supply chain disruptions.

In **Central and Southern Africa**, food access was still severely constrained by widespread informal job losses due to COVID-19 restrictions, particularly for households reliant on remittances from South Africa. Currency depreciation (Angola, Zambia and Zimbabwe), trade disruptions due to insecurity (the Central African Republic), or high imported grain prices (Lesotho and Namibia) contributed to rising food prices across the region.

Drivers of food crises – a global overview *continued*

FIGURE 1.16

Number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent by primary driver, 2018–2021

	2018	2019	2020	2021
 Conflict/ insecurity	73.9M 21 countries	77.1M 22 countries	99.1M 23 countries	139.1M 24 countries
 Weather extremes	28.8M 26 countries	33.8M 25 countries	15.7M 15 countries	23.5M 8 countries
 Economic shocks	10.2M 6 countries	24.0M 8 countries	40.5M 17 countries	30.2M 21 countries

Note: Economic shocks include the indirect impact of COVID-19 in 2020 and 2021.

Source: FSIN, GRFC 2019–2022.

Across **East Africa**, although economic shocks were not the primary driver of major food crises, they were still considered a major driver in Ethiopia, the Sudan and South Sudan, as these countries continued to grapple with macroeconomic crises characterized by currency depreciation, high food prices and lack of work opportunities. Countries struggled to recover from the socioeconomic effects of COVID-19 restrictions, which dampened casual labour opportunities and contributed to food price volatility by disrupting trade and cross-border movement of goods and people.

In most Sahelian and coastal countries of **West Africa**, high food prices were driven by insecurity-related disruptions to agricultural activities and markets, higher transport costs linked to COVID-19 containment measures, and rising international commodity prices. Food price increases were especially notable in Benin, the Gambia, Guinea, Liberia, Sierra Leone and Nigeria.

In Honduras, Guatemala, Nicaragua and El Salvador in **Latin America**, access to food was limited by rising staple food prices and atypically low labour demand, resulting from the ongoing economic impacts of COVID-19 containment measures. In

food import-dependent Haiti, currency depreciation pushed up domestic food prices, exacerbating an ongoing decline in household purchasing power.

In **Eurasia**, economic shocks were considered the primary driver of acute food insecurity in Pakistan's Balochistan, Khyber Pakhtunkhwa and Sindh provinces, where high food and fuel prices weakened purchasing power. However, they were major contributors in Yemen, Afghanistan and the Syrian Arab Republic, where economic conditions continued to worsen in 2021, with extremely high unemployment levels and increasing food prices.

Weather extremes

In 2021, weather extremes were the main drivers of acute food insecurity in eight African countries, including Madagascar, where nearly 14 000 people were in Catastrophe (IPC Phase 5) in April–September 2021 due to the effects of severe drought. The eight countries accounted for 23.5 million people in Crisis or worse (IPC/CH Phase 3 or above).

Weather extremes were the primary, secondary or tertiary driver of acute food insecurity in 39 of the 53 countries/territories in the report. Increasingly frequent and severe weather shocks have contributed to worsening acute food insecurity, with 2021 bringing particularly detrimental weather events to key crises in East, Central and Southern Africa, and Eurasia.

Although the number of countries with weather extremes as the primary driver declined from 15 to eight between 2020 and 2021, the number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in these countries increased by 50 percent during the same period.

In **Southern and Central Africa**, Madagascar's Grand Sud and southwestern Angola experienced the worst drought conditions of the last 40 years, with crop production 50–80 percent below the five-year average. Localized dry spells also occurred in the Democratic Republic of the Congo, southern Malawi, northern Mozambique, Namibia and the United Republic of Tanzania. While favourable rainfall improved cereal and livestock production in

many areas, including Zimbabwe, tropical storms, torrential rains and floods damaged crops in Mozambique, Zimbabwe, Eswatini and Malawi.

In **East Africa**, parts of Ethiopia, eastern Kenya, southern Somalia and Uganda faced moderate to severe drought conditions, which constrained food production, increased prices, and diminished income from agricultural labour and crop and livestock production. Somalia faced one of the worst Deyr harvests on record. Below-average cereal production in Ethiopia, South Sudan and the Sudan was caused by flooding as well as localized and prolonged dry spells. In Burundi, below-average rainfall and floods affected crop production between late 2020 and early 2021.

Although weather extremes were not a primary driver of food crises in **West Africa and the Sahel**, rainfall deficits in 2021 affected food production and livelihoods across the Niger, northern Mauritania, central and southeastern Nigeria, southwestern Cameroon, southern Chad, southwestern Guinea, northeastern Sierra Leone and northeastern Mali. Crop production for the 2021/2022 agricultural season in Sahel countries was 11 percent lower than the previous year.

In **Latin America and the Caribbean**, the damages wrought by hurricanes Eta and Iota at the end of 2020 constrained food availability in 2021 in Guatemala, Honduras and Nicaragua. In Haiti, harvests were below-average due to irregular rainfall. Tropical Storm Grace, which struck Haiti's Sud-Est department in mid-August, destroyed crops and production infrastructure.

In **Eurasia**, weather shocks had a major impact in at least five countries. Afghanistan's second drought in four years affected 80 percent of the country and reduced harvests. Drought and reduced availability of irrigation water resulted in heavy crop losses in the Syrian Arab Republic. In Pakistan, drought conditions in Balochistan and Sindh and inadequate monsoon rainfall in Khyber Pakhtunkhwa reduced crop and livestock production and contributed to rising national food prices. In refugee camps in Cox's Bazar, Bangladesh, soil erosion and landslides, flooding, wind and storms destroyed shelters during the monsoon season.

Forcibly displaced populations in food-crisis countries/territories in 2021

Internal displacement

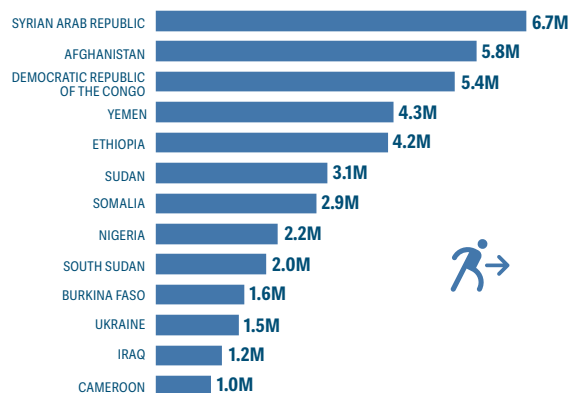
In 2021, out of 51 million internally displaced people globally, nearly 45 million were in 24 food-crisis countries/territories, with the highest numbers in the Syrian Arab Republic.

Around 66 percent of the world's total number of IDPs were in eight of the ten largest food crises by numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent – the Syrian Arab Republic, Afghanistan, the Democratic Republic of the Congo, Yemen, Ethiopia, Nigeria, the Sudan and South Sudan.

The majority of IDPs in food-crisis settings have been driven from their homes by conflict with some living in a protracted state of displacement for years, even after conflict subsided. In many food-crisis countries, households have been forcibly displaced several times. In most food crises with very high numbers of people forcibly displaced by conflict/insecurity, the IDP population increased between 2020 and 2021. The biggest increases were in Afghanistan, the Democratic Republic of the Congo, Ethiopia, Mozambique, Myanmar, South Sudan and the Sahel region.

FIGURE 1.17

Food-crisis countries/territories hosting the highest numbers of IDPs in 2021 (more than 1 million)



Source: IOM DTM, Government of Burkina Faso, HNO 2022 (Somalia), UNHCR, HNAP. All from end 2021.

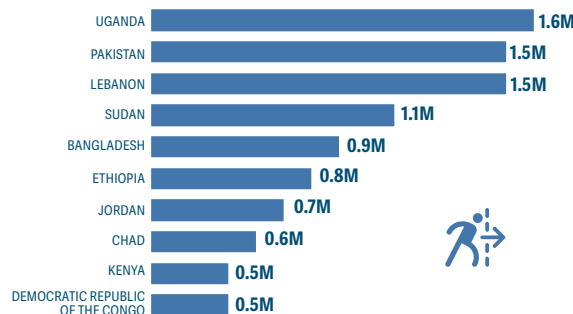
Refugees and asylum seekers

In 2021, out of around 21 million refugees and 4 million asylum seekers globally, over 60 percent (around 15.3 million people) were hosted in 52 food-crisis countries/territories, where a damaging mix of conflict/insecurity, COVID-19, poverty, food insecurity and weather extremes compounded their humanitarian plight (UNHCR, November 2021).

Some 5 million were in nine of the ten largest food crises in terms of numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent. In the first half of 2021, most new refugees came from the Central African Republic, South Sudan, the Syrian Arab Republic, Afghanistan and Nigeria, while only 126 700 refugees were able to return home (UNHCR, November 2021). Millions of refugees originated from food crises, with the largest numbers from the Syrian Arab Republic (6.8 million), Afghanistan (2.6 million), South Sudan (2.3 million) and Myanmar (1.1 million). Although acute food insecurity may motivate people to move, it is not the only driver pushing people in these countries to flee.

FIGURE 1.18

Ten food-crisis countries/territories hosting the highest numbers of refugees/asylum seekers



This graph includes Bangladesh, Jordan, Lebanon and Uganda, which qualified as food crises because of their refugee populations. It does not include the 5.7 million Palestine refugees in Gaza and the West Bank, Jordan, Lebanon and the Syrian Arab Republic (UNRWA, 2021).

Source: UNHCR. All estimates are from end 2021.

Forcibly displaced people face additional food security and nutrition challenges

Most displaced farmers have lost their capacity to produce food and become vulnerable to shocks such as increasing food prices. Livestock herders often resort to destocking in the short-term, undermining their resilience in the long-term.

Lack of access to basic services including health care systems, clean water and improved sanitation and/or high population density in camps are risk factors for malnutrition and illness.

Restrictive policies and discrimination in hosting countries limit freedom of movement, access to land for agriculture, employment opportunities and access to financial services. Some countries grant partial legal access to employment, but most refugees are unable to access wage employment and income is negligible.

Severe underfunding has resulted in cuts to humanitarian assistance for many displaced populations.

Significant protection risks exist for displaced populations. They are often forced to engage in harmful coping strategies to meet their basic needs such as increasing debt and child labour. Limited natural resources leads to tension between host and refugee communities.

The world's second biggest migrant crisis in 2021

Although Venezuela (Bolivarian Republic of) and Venezuelan migrant populations in Colombia, Ecuador and Peru met the criteria for inclusion in the GRFC 2022, comparable food security evidence was not available in 2021. Nevertheless, in 2021 the number of Venezuelans displaced abroad by the country's deepening political and socioeconomic crisis almost equalled the number of Syrians displaced abroad to become the world's second biggest migrant crisis. Of the 6.5 million Venezuelans displaced abroad, around half were in Colombia (1.8 million), Peru (1.3 million) and Ecuador (0.5 million) (R4V, 2022), where they face significant barriers to integration.

Nutrition challenges within food crises

Almost 26 million children under 5 years old were suffering from wasting and in need of urgent treatment in 23¹⁴ of the 35 major food crises, according to analyses carried out in 2021, based on available analyses from the Global Nutrition Cluster (GNC), HNO, and IPC.¹⁵ Of these children, over 5 million were at an increased risk of death due to severe wasting.

Based on data available from 2021, 11 countries had over one million children under 5 years who were wasted in 2021 (see figure 1.19). Within this, the highest numbers of wasted children were in Ethiopia (4.2 million, of which 1 million were severely wasted), Afghanistan (3.1 million), the Sudan (2.6 million), and Yemen (2.25 million).

Out of the 11 countries with more than 1 million wasted children, seven (Ethiopia, Afghanistan, the Sudan, Yemen, Nigeria, South Sudan and the Democratic Republic of the Congo) were among the ten largest food crises. Although there were fewer than 1 million wasted children reported in the other three largest food crises, the Syrian Arab Republic had 250 000 wasted children under 5 years old, while Pakistan had 640 000 and Haiti had 200 000.

According to available IPC acute malnutrition (AMN) analyses covering 2021, several countries had areas where child wasting was above the 'Critical' 15 percent threshold. These include areas in southwestern Angola, northern Burkina Faso, Chad, the Democratic Republic of the Congo, Kenya's ASALs, Amboasary Atsimo district in Madagascar's Grand Sud, Mali, northern Nigeria, Pakistan's Sindh province, Somalia, South Sudan, Uganda's Karamoja region, and Yemen. In April–July 2021, Renk county in northeastern South Sudan was projected to be in Extremely Critical (IPC AMN Phase 5), with at least 30 percent of children wasted.

¹⁴ Only data from 2019 onwards was utilised for the GRFC 2022, and only 23 out of 35 countries had data from this period.

¹⁵ This figure is not comparable with figures reported in the GRFC 2021, which utilised the JME 2021 as the primary data source. According to the JME, in 2021, 15.6 million children under 5 years were wasted in 2021 and 76.0 million children were stunted in countries affected by food crises, as defined by the GRFC. In 2020, 15.8 million children under 5 years were wasted and 75.2 million children were stunted.

The determinants of malnutrition in emergencies

In emergency settings, particularly for displaced families residing in camps, disruptions to food, health, water and sanitation, and social protection systems render it more difficult for nutritionally vulnerable women and children to access healthy diets and health services, and to practise protective behaviours, such as breastfeeding, to prevent wasting and other nutritional challenges.

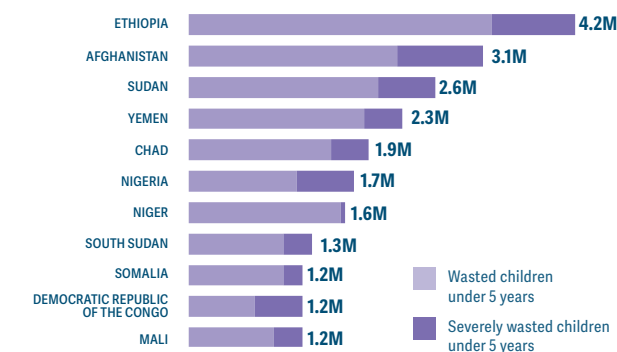
Conflict, low household purchasing power and weather extremes negatively affect access to adequate food and nutritionally diverse diets, essential services, and a safe and healthy environment, further exacerbating poor nutrition outcomes. Food supply chains and food environments – critical components of food systems – are also often disrupted in emergencies, reducing household access to adequate nutritious foods and further contributing to challenges of nutrition vulnerability.

The intensification of conflicts in 2021, particularly in the Sahel, Ethiopia and Afghanistan, has contributed to very high levels of wasting through increased displacement and disruptions to livelihoods, which adversely affected access to nutritional diets and health services. Weather-related shocks, such as drought in regions of Angola, Ethiopia, Kenya, Madagascar and Somalia, contributed further to child wasting by wiping out harvests and contributing to rising food prices and falling incomes, which hampered people's access to healthy diets, while also limiting access to safe drinking water and sanitation.

The COVID-19 pandemic had a major impact on nutritional outcomes, as reduced incomes forced vulnerable families to rely on nutrient-poor staples. Movement restrictions and a reduction in the supply and availability of medicines due to logistical constraints disrupted access to services including the early detection and treatment of wasting, as well as support for breastfeeding and other recommended feeding and care practices for young children. An assessment of progress towards the wasting target was not possible for nearly half of countries. Without representative data on wasting from countries during the pandemic, only modelled predictions were available.

FIGURE 1.19

Countries/territories with more than 1 million wasted children under 5 years in 2021



The data for child wasting in 2021 is derived from IPC AMN for Yemen (February 2021); Chad (April 2021); Nigeria (December 2021); Somalia (December 2021) and Mali (March 2022); from HNOs for Afghanistan (January 2022), the Sudan (December 2021), Democratic Republic of the Congo (February 2022) and South Sudan (February 2022); and from the Global Nutrition Cluster for Ethiopia (September 2021) and the Niger (mid-2021).

Source: Global Nutrition Cluster; HNO 2022; IPC AMN 2020–2022.

Forecast for 2022

 **179.0–181.1M people**


forecast to be in Crisis or worse (IPC/CH Phase 3 or above) in 41 countries/territories in 2022, in addition to Cabo Verde (see notes below)

This aggregate figure includes four estimates from FEWS NET, which does not provide a breakdown of figures by IPC/CH phases of acute food insecurity, therefore the sum of the populations detailed below in IPC/CH Phases 2–5 will not add up to the aggregate range estimate provided for populations in IPC/CH Phase 3 or above.

 **329 000 people in Somalia, South Sudan and Yemen** were forecast to be in Catastrophe (IPC Phase 5) in 2022

 **35.5M people in 33 countries** were forecast to be in Emergency (IPC Phase 4) in 2022

 **125.0M people in 38 countries** were forecast to be in Crisis (IPC Phase 3) in 2022

 **233.4M people in 38 countries** were forecast to be in Stressed (IPC Phase 2) in 2022

For more information on the methodology to select the forecasts presented in this report, see 'Acute food insecurity in the GRFC, data sources and methods' in the Technical Notes, page 230. Data was available in 2022 for Cabo Verde, but not in 2021.

No forecast was available at the time of publication for 12 out of the 53 countries/territories with an estimate for 2021. The aggregate forecast number includes FEWS NET range estimates for Ethiopia, Nicaragua, Uganda and Zimbabwe.

Source: FSIN, using IPC/CH and FEWS NET data.

In 2022, between 179 and 181.1 million people in 41 out of the 53 countries/territories were projected to be in Crisis or worse (IPC/CH Phase 3 or above), in addition to Cabo Verde. During 2022, around 329 000 people will likely face Catastrophe (IPC Phase 5) in Somalia (81 000 people), South Sudan (87 000 people) and Yemen (161 000 people). No forecast was available at the time of publication for 12 of the 53 countries/territories with a 2021 estimate.

In 2022, the impact of protracted conflict and related displacement in affected countries will maintain exceptionally high levels of acute food insecurity. In these countries and elsewhere, macroeconomic shocks – characterized by escalating food and fuel costs, lack of work and declining incomes – often in tandem with intense and frequent weather shocks, will intensify and prolong acute food insecurity conditions. When comparing 2021 figures for the 41 countries that also had 2022 projections available as of April, there were already an additional 5 million people in Crisis or worse (IPC/CH Phase 3 or above).

In addition, the impact of the ongoing war in Ukraine is expected to have severe consequences for food security outcomes, following the displacement of millions of Ukrainians and widespread destruction of infrastructure and livelihoods. Severe repercussions are also expected at the regional and global level, as many food-crisis countries depend on imports for staple food supplies and fertilisers, notably from Ukraine and the Russian Federation. Most of the forecasts in this report do not account for the potential impact of the war.

Major deterioration anticipated in some food-crisis countries

For most of the world's major food crises, notably in Afghanistan and the Democratic Republic of the Congo, acute food insecurity levels in the first months of 2022 were expected to persist at similar levels to 2021 or increase. Some countries face further severe deterioration, primarily due to conflict, particularly in West Africa and the Sahel, and drought in the Horn of Africa. Moreover, the global recovery from the COVID-19 pandemic will likely be slowed, as the war in Ukraine is expected to trigger a global economic slowdown in 2022–2023 (IMF, April 2022).

In Nigeria (21 states and the FCT), by June–August 2022, the population in Crisis or worse (CH Phase 3 or above) was expected to reach 19.5 million – a 50 percent increase compared to the 2021 peak. Importantly, the population in Emergency (CH Phase 4) was expected to reach close to 1.2 million people (CH, March 2022).

By June–December 2022, 19 million people were expected to face Crisis or worse (IPC Phase 3 or above) in Yemen, up from 16.1 million during the same period in 2021. For the fifth consecutive year, populations were forecast to be in Catastrophe (IPC Phase 5), with 161 000 people projected to face this phase in the second half of 2022, reaching their highest levels recorded by IPC in the country. Years of conflict are projected to fuel increased displacement and disruption to markets and livelihood activities, coupled with the impacts of severe economic conditions and weather extremes (IPC, March 2022).

During June–December 2022, in Hajjah governorate, a Risk of Famine was projected under the worst-case scenario in the districts of Abs and Hayran. Due to insufficient evidence during data collection, further assessment was recommended in Midi and Haradh districts to ascertain the Risk of Famine. Although the analysis for Al Hali and Al Hawak districts in Al Hudaydah governorate did not identify a Risk of Famine within the projection period, it determined that, should a worst-case scenario apply for a protracted period beyond the projection period, these districts would likely shift into Famine (IPC, March 2022).

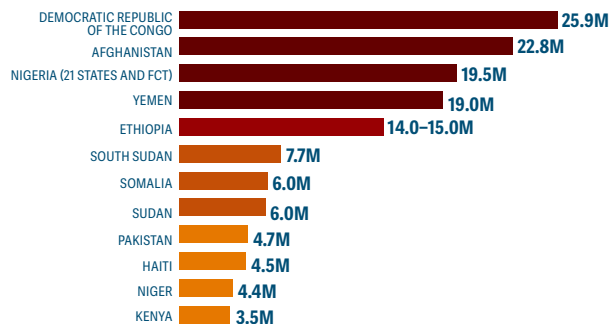
In the Niger, by June–August 2022, 4.4 million people (1.8 million more than the 2021 peak) were expected to face Crisis or worse (CH Phase 3 or above), with almost a tripling of the population in Emergency (CH Phase 4) to 426 000 people (CH, March 2022).

Major deteriorations were also expected in Kenya, Somalia and South Sudan, largely due to consecutive seasons of below-average rains. In South Sudan, the population in Crisis or worse (IPC Phase 3 or above) is projected to increase to over 7.7 million, including 87 000 people in Catastrophe (IPC Phase 5) in April–July 2022 due to the combined effects of conflict/insecurity, dry spells, floods and economic decline. In Kenya, from March–June 2022, the

Forecast for 2022 *continued*

FIGURE 1.20

Countries/territories with more than 3 million people forecast to be in Crisis or worse (IPC/CH Phase 3 or above) in 2022



Source: IPC/CH for all countries/territories except Ethiopia (FEWS NET).

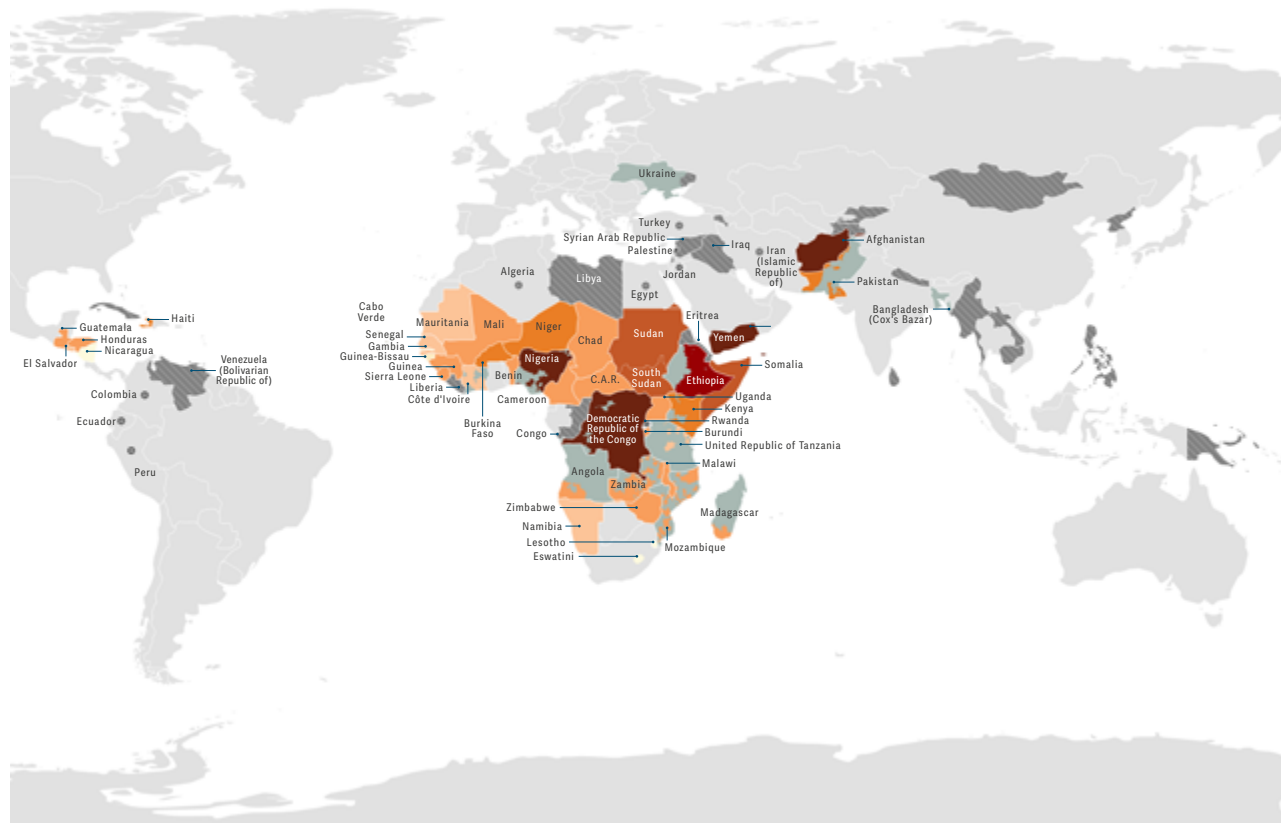
population in Crisis or worse (IPC Phase 3 or above) was expected to increase to 3.5 million, an increase of 1.1 million people since the 2021 peak. This includes 758 000 people in Emergency (IPC Phase 4) (IPC, October 2021).

In Somalia, over 6 million people were expected to be in Crisis or worse (IPC Phase 3 or above) through June 2022, a 74 percent increase compared to the 2021 peak. In the most likely scenario, 81 000 people across the most-affected areas will face Catastrophe (IPC Phase 5) during April–June 2022, accounting for 5–10 percent of the population in most of these areas. In a less likely scenario, a Risk of Famine could occur in three livelihood zones and IDP settlements in Mogadishu, Baidoa and Dhusamareb through June 2022 if the April–June Gu season rains fail, if conflict intensifies, if drought increases displacement and if food prices continue to rise. A further risk is if humanitarian assistance is not scaled up and does not reach the country's most vulnerable populations (IPC, April 2022).

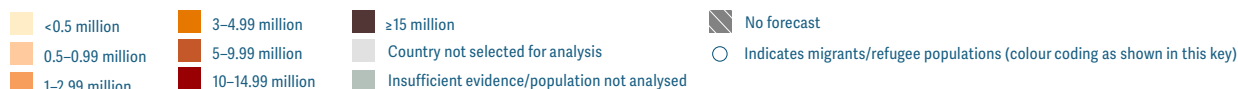
Other countries expected to face large increases in the number of people facing Crisis or worse (IPC/CH Phase 3 or above) through mid-2022 relative to the 2021 peak period include Benin, with an additional 944 000 people, as well as Burkina Faso (an additional

MAP 1.4

Numbers of people forecast to be in Crisis or worse (IPC/CH Phase 3 or above) in 42 countries/territories in 2022



Numbers of people (ranges) in Crisis or worse (IPC/CH Phase 3 or above) or equivalent



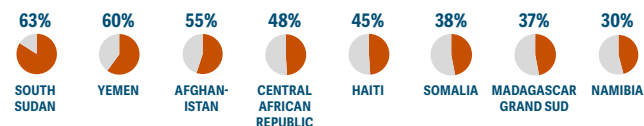
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: FSIN, GRFC 2022.

Forecast, 2022 continued

FIGURE 1.21

Countries with at least 30 percent of their population analysed in Crisis or worse (IPC Phase 3 or above) in 2022



In southwest Angola, 58 percent of the population analysed was in Crisis or worse (IPC Phase 3 or above) in early 2022. Only 9 percent of the total country population was analysed.
Source: FSIN, using IPC data, GRFC 2022.

586 000 people), South Sudan (555 000 more people), Guinea (536 000 more people), and Mali (534 000 more people). Mauritania, Senegal, Chad, Cameroon and the Gambia were also expected to face increased acute food insecurity, with an increase of at least 250 000 people facing Crisis or worse (CH Phase 3 or above), representing an increase of 50 percent.

Modest improvements in a few food-crisis contexts

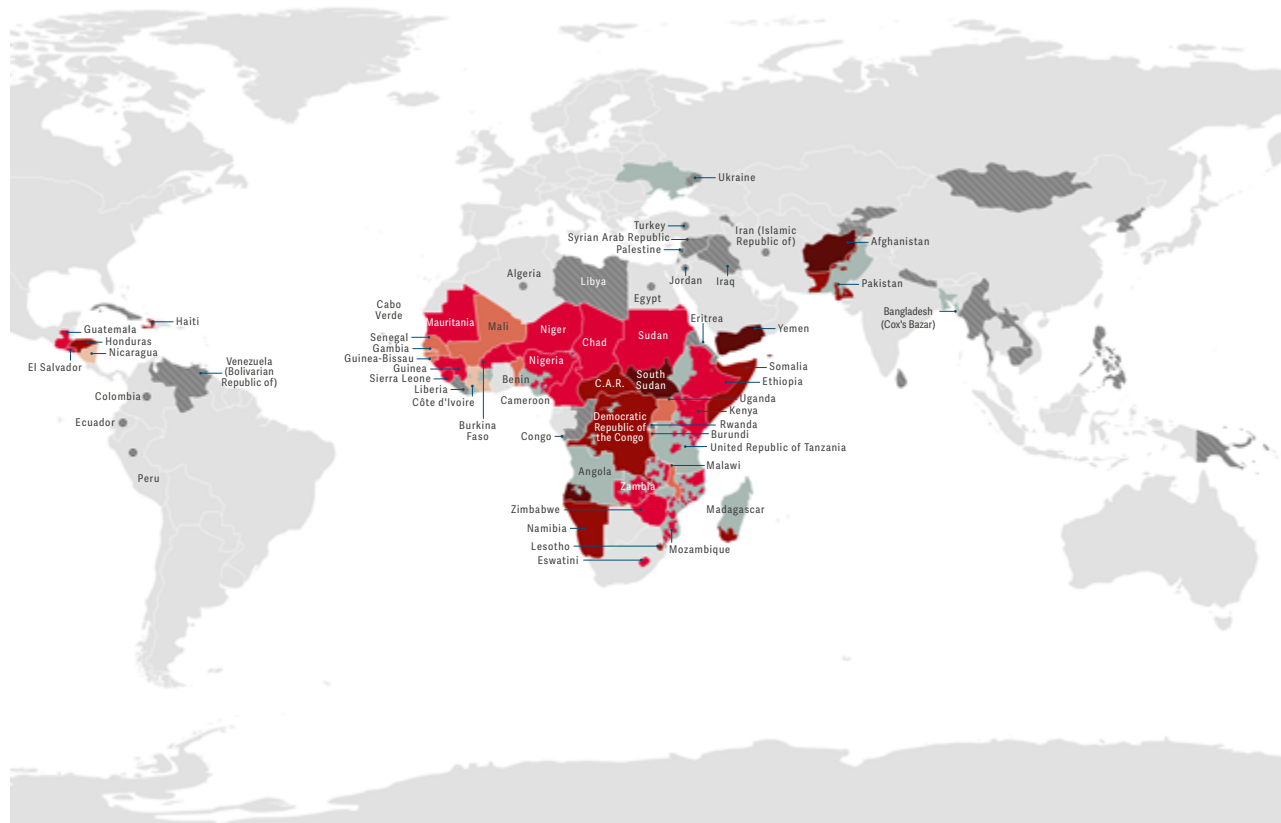
A few countries/territories were expected to see a modest improvement in food security in 2022, as their economies start to recover from the COVID-19 pandemic or good harvests bolster household food supplies in the early part of the year. However, these projections were largely conducted prior to the war in Ukraine and do not account for the potential impacts on food security in these countries.

In the Sudan, 3.8 million fewer people were expected to face Crisis or worse (IPC Phase 3 or above) during the main harvest season compared with the 2021 peak – but this projection was made prior to the October 2021 coup and the situation has likely worsened due to tight cereal supplies, above-average food prices, conflict and displacement.

Significant decreases in the number of people in Crisis or worse (IPC/CH Phase 3 or above) between 2021 and 2022 were projected in the Democratic Republic of the Congo (1.4 million fewer), Guatemala (1.2 million fewer people), Malawi (989 000 fewer), Honduras (650 000 fewer), Burundi (554 000 fewer), Côte d'Ivoire (283 000 fewer) and Lesotho (245 000 fewer).

MAP 1.5

Share of people forecast to be in Crisis or worse (IPC/CH Phase 3 or above) in 42 countries/territories in 2022



Percentages of people (ranges) in Crisis or worse (IPC/CH Phase 3 or above) or equivalent



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. 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: FSIN, GRFC 2022.

The war in Ukraine: a major concern for already record-high levels of acute food insecurity

The escalating war in Ukraine in early 2022 triggered alarm among the international community, both as a result of its effects on the Ukrainian population and its implications for food security at the global and regional levels. Some food-crisis countries are of particular concern due to their high dependency on both food and fertiliser imports from Ukraine and the Russian Federation, and their vulnerability to global food price shocks.

For the vast majority of the acute food insecurity forecasts presented in this report, the trade and price risks associated with the war in Ukraine may necessitate revisions of the assumptions that were made prior to the escalation of war. This highlights the need to maintain vigilant monitoring systems in major food-crisis contexts (WFP, March 2022).

The impact on global food supplies and prices

Before the escalation, global wheat production was expected to increase for the fourth consecutive year (FAO-GIEWS, March 2022). However, the war has created major uncertainties regarding the production and export capacities of agricultural products from Ukraine due to widespread infrastructure damage and destruction, and from the Russian Federation due to the economic impact of the war. In 2021, the two countries accounted for major shares of global exports of wheat (33 percent), barley (27 percent), maize (17 percent), sunflower seeds (24 percent) and sunflower oil (73 percent) (IFPRI, February 2022). The Russian Federation also stood as the world's top exporter of nitrogen fertilisers, the second leading supplier of potassium fertilisers and the third largest exporter of phosphorous fertilisers (FAO, March 2022).

An estimated 16 million tonnes of maize and 13.5 million tonnes of wheat were expected to be exportable in the two countries as of the end of February 2022, amounting to 43 percent of Ukraine's and 23 percent of the Russian Federation's expected 2021/22 exports (WFP, March 2022a).

Although early production prospects for winter crops to be harvested in 2022 were favourable in Ukraine, the war is preventing many farmers from tending to their fields and harvesting and

marketing their crops. Disruptions to essential public services are also expected to negatively affect agricultural activities. Current reports indicate that 20–30 percent of areas sown to winter crops will remain unharvested during the 2022/23 season, with yields also likely to be adversely affected. Some 95 percent of Ukrainian grain exports transit through Odessa, as well as through Mariupol and Kherson, both of which have been severely damaged. Additionally, all Black Sea harbours are blocked and infrastructure damage in Ukraine has hampered logistics and export capacity (FAO, March 2022).

Many food-crisis countries, including several Middle Eastern, northern and sub-Saharan African, as well as South Asian countries, are reliant on wheat imports from the Russian Federation and Ukraine. In 2020, 38 countries/territories affected by food crises received 34 percent of the total Ukrainian exports of wheat and maize products. Food-crisis countries also accounted for 73 percent of Russian exports of wheat. Among these, 27 countries/territories were affected by major food crises, and received around 13.4 million tonnes of the total exports of Russian and Ukrainian wheat and maize products that year. The largest of these importers included Yemen, the Sudan, Nigeria and Ethiopia, which are consistently among the world's ten largest food-crisis countries. In East Africa alone, where wheat and wheat products account for one-third of average cereal consumption, 90 percent of all wheat imports come from the two countries (WFP, March 2022c).

In 2021, 36 out of the 53 food-crisis countries/territories depended on Ukrainian and Russian exports for more than 10 percent of their total wheat imports, including 21 countries with major food crises. In terms of food supply, wheat and its products represented on average 408 kcals per capita per day in 2019 across food-crisis countries. Its contribution was above this level in 15 countries, including in four affected by major food crises – Afghanistan (1 397 kcal/capita/day), the Syrian Arab Republic (1 092), Yemen (925), Pakistan (874), and the Sudan (535) – and relatively dependent on imports.¹⁷ The Sudan and Yemen, for instance, depended for on

wheat imports from Ukraine and the Russian Federation to meet 35–45 percent their consumption needs in 2021 (FAO, March 2022).

In the event of an extended disruption to food imports from Ukraine and the Russian Federation, price increases are expected in food-crisis countries/territories. In March 2022, the FAO Cereal Price Index averaged 170.1 points, up 24.9 points (17.1 percent) from February, marking its highest level on record since 1990. This month's increase reflected a surge in world prices of wheat and coarse grains, largely driven by conflict-related export disruptions from Ukraine and, to a lesser extent, the Russian Federation. The expected loss of exports from the Black Sea region exacerbated the already tight global availability of wheat.

The impact of escalating energy and fertiliser prices

Disruptions to natural gas and fertiliser markets will have a negative impact on production at the global level, especially at the beginning of a new planting season for many parts of the world. Limited availability or shortages of fertilisers are likely to reduce crop yields and result in poor local harvests, particularly in developing countries (IFPRI, February 2022).

Food-crisis countries as geographically diverse as Honduras, Cameroon, Guatemala, Sierra Leone, Nigeria, Mozambique and Kenya depend on the Russian Federation and Ukraine for 10–50 percent of their fertiliser imports. Reduced access to fertilisers will likely significantly reduce crop production, especially in arid areas, such as the Sahel, where poor soil quality necessitates the use of chemical fertilisers to facilitate food production (WFP, March 2022b).

The impact on humanitarian operations

The repercussions of price hikes will also be felt among humanitarian partners responding to food crises. For example, rising wheat prices and a lack of pulses from Ukraine are projected to increase food procurement costs for WFP by approximately USD 23 million per month (WFP, March 2022).

¹⁷ Not weighted average. Global Network calculations based on FAOSTAT data available for 52 food crisis countries in 2019.

TABLE 1.1 (PAGE 1 OF 4)

Table of acute food insecurity estimates, 2020–2022

Highest numbers of acutely food-insecure people in 2020 and 2021, and forecast numbers for 2022

Countries		2020 Highest number of acutely food-insecure people						2021 Highest number of acutely food-insecure people						2022 Highest number of acutely food-insecure people (forecast)					
Refugees/migrant populations are indicated in blue	USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Afghanistan †	Jan–Apr	IPC	Nov 2020–Mar 2021	32.9 95%	Entire country	10.6 34%	13.2* 42%	IPC	Nov 2021–Mar 2022	41.7 100%	Entire country	12.5 30%	22.8* 55%	IPC	Nov 2021–Mar 2022	41.7 100%	Entire country	12.5 30%	22.8* 55%
Angola	Jan–Mar	IPC	Oct 2019–Feb 2020	31.8 3%	23 communes in 8 municipalities	0.2 21%	0.6* 62%	IPC	Oct 2021–Mar 2022	32.1 9%	17 rural municipalities in 3 south-western provinces	0.7 25%	1.6* 58%	IPC	Oct 2021–Mar 2022	32.1 9%	17 rural municipalities in 3 south-western provinces	0.7 25%	1.6* 58%
Bangladesh (Cox's Bazar) ††	Jan–Dec (refugees) Varies (hosts)	REVA (ENA)	Nov–Dec 2020	164.7 3%	Rohingya refugees and host populations in Ukhiya and Teknaf Upazilas of Cox's Bazar District	N/A	1.2 87%	JRP (ENA)	Oct–Nov 2021	164.7 1%	Rohingya refugees and host populations in Cox's Bazar	N/A	1.3 84%	No forecast					
Benin	Jun–Aug	Not selected						CH	Jun–Aug 2021	12.5 72%	Entire country except Cotonou	1.4 16%	0.3 3%	CH	Mar–May 2022	12.9 100%	Entire country	2.8 21%	1.2 9%
Burkina Faso	Jun–Aug	CH	Jun–Aug 2020	21.4 100%	Entire country	5.2 24%	3.3** 15%	CH	Jun–Aug 2021	22.0 98%	Entire country	4.8 22%	2.9* 13%	CH	Jun–Aug 2022	21.9 97%	Entire country	5.3 25%	3.5* 16%
Burundi	Apr–May	IPC	May 2020	11.9 92%	Entire country	3.9 36%	1.4* 13%	IPC	Apr–May 2021	12.5 94%	Entire country	5.0 43%	1.6* 14%	IPC	Jan–Mar 2022	12.5 96%	Entire country	3.9 33%	1.1 9%
Cabo Verde		CH	Jun–Aug 2020	0.6 86%	17 out of 22 municipalities	0.07 14%	0.01 2%	Data gap						CH	Jun–Aug 2022	0.5 100%	Entire country	0.1 29%	0.05* 10%
Cameroon	Mar–May	CH	Oct–Dec 2020	25.9 100%	Entire country	6.2 24%	2.7* 10%	CH	Mar–May 2021	25.9 100%	Entire country	5.8 23%	2.6* 10%	CH	Mar–May 2022	26.6 100%	Entire country	6.1 23%	2.9* 11%
Central African Republic***	May–Aug	IPC	May–Aug 2020	4.8 95%	Excluding Bambouti, Djéma, Yalinga, Ouadda, Ouanda-djallé, Mingala, Mbrès and Berbérati	1.6 35%	2.4* 51%	IPC	Apr–Aug 2021	4.9 100%	Entire country except Bambouti, Djéma, Ouadda and Yalinga	1.6 33%	2.3* 47%	IPC	Apr–Aug 2022	5.7 87%	Entire country except Bambouti, Djéma, Ouadda and Yalinga	1.5 31%	2.4* 48%
Chad	Jun–Aug	CH	Jun–Aug 2020	16.2 90%	Entire country, except N'Djamena	3.1 21%	1.0* 7%	CH	Jun–Aug 2021	16.7 92%	Entire country, except N'Djamena	3.3 22%	1.8* 12%	CH	Jun–Aug 2022	16.8 94%	Entire country, except N'Djamena	4.0 25%	2.1 13%
Côte d'Ivoire	Mar–May	CH	Mar–May 2020	26.5 23%	12 regions	0.9 15%	0.2 4%	CH	Oct–Dec 2021	27.7 58%	9 districts (23 regions)	2.8 18%	0.9 6%	CH	Jun–Aug 2022	27.7 58%	9 districts (23 regions)	3.1 19%	0.7 4%
Democratic Republic of the Congo***	Varies by area/region	IPC	Jul–Dec 2020	103.2 65%	85 territories and 18 urban areas	29.0 44%	21.8* 33%	IPC	Feb–Jul 2021	105.0 91%	133 territories and 37 urban areas	40.8 42%	27.3* 28%	IPC	Jan–Jun 2022	115.2 91%	131 territories, 24 communes of Kinshasa, 24 urban areas	47.8 45%	25.9* 25%
Djibouti	Jun–Sep	IPC	Oct–Dec 2020	1.1 100%	Entire country	0.3 26%	0.2* 14%	IPC	Jan–Aug 2021	1.1 100%	Entire country	0.4 35%	0.2* 17%	No forecast					

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).

*** FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate.

† The increase in Afghanistan can also be attributed to changes in the base population used in the October 2021 IPC analysis, which, at the request of the humanitarian community in Afghanistan, used Flowminder population estimates used for the annual HRP.

†† The 2020 and 2021 estimates are based on the ENA methodology, for which the GRFC TWG has identified comparability challenges with IPC/CH estimates (see Technical Notes).

TABLE 1.1 (PAGE 2 OF 4)

Table of acute food insecurity estimates, 2020–2022

Highest numbers of acutely food-insecure people in 2020 and 2021, and forecast numbers for 2022

Countries		2020 Highest number of acutely food-insecure people						2021 Highest number of acutely food-insecure people						2022 Highest number of acutely food-insecure people (forecast)					
Refugees/migrant populations are indicated in blue	USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Egypt (Syrian refugees)	Jan–Dec	WFP	Jun 2020	0.3 50%	WFP-assisted refugees from Syrian Arab Republic, Sudan, South Sudan, Eritrea, Ethiopia, Somalia, Yemen and Iraq	N/A N/A	0.05 38%	WFP	Mar 2021	0.1 63%	Syrian refugee population	N/A N/A	0.04 27%	No forecast					
El Salvador	Jun–Aug	IPC	Nov 2020–Feb 2021	6.8 99%	Entire country	2.2 33%	0.7* 10%	IPC	Mar–May 2021	6.8 99%	Entire country	2.4 36%	1.0* 15%	IPC	Mar–May 2022	6.3 100%	Entire country	3.3 52%	0.9* 14%
Eswatini	Jan–Mar	IPC	Oct–Dec 2020	1.1 98%	Entire country	0.4 34%	0.4* 32%	IPC	Jan–Mar 2021	1.2 97%	Entire country	0.4 38%	0.3* 30%	IPC	Dec 2021–Mar 2022	1.2 100%	Entire country	0.4 32%	0.3* 29%
Ethiopia***	Feb–Jun	IPC	Oct–Dec 2020	115.0 46%	Belg and Meher areas	15.8 30%	8.6* 16%	IPC	May–Jun 2021	115.0 49%	Belg and Meher dependent areas	17.2 31%	16.8** 30%	FEWS NET	Jul–Sep 2022	106.7 100%	Entire country		14.0–15.0 13–14%
Gambia	Jun–Aug	CH	Jun–Aug 2020	2.5 100%	Entire country	0.6 23%	0.1 6%	CH	Jun–Aug 2021	2.5 97%	Entire country	0.5 20%	0.1 5%	CH	Jun–Aug 2022	2.5 100%	Entire country	0.6 25%	0.2* 8%
Guatemala	Jun–Aug	IPC	Nov 2020–Mar 2021	16.9 100%	Entire country (22 departments and Guatemala (metropolitana))	6.7 40%	3.7* 23%	IPC	Nov 2020–Mar 2021	16.9 100%	Entire country (22 departments and Guatemala (metropolitana))	6.7 40%	3.7* 23%	IPC	Sep 2021–Jan 2022	17.1 100%	Entire country	8.0 47%	2.5* 14%
Guinea	Jun–Aug	CH	Oct–Dec 2020	13.3 83%	Excluding Conakry	2.1 19%	0.6 6%	CH	Jun–Aug 2021	13.3 83%	Excluding Conakry	2.2 20%	0.7 6%	CH	Jun–Aug 2022	13.3 84%	Excluding Conakry	3.8 34%	1.2* 11%
Guinea-Bissau	Jun–Aug	CH	Oct–Dec 2020	2.0 62%	Excluding Bissau	0.5 36%	0.2* 12%	CH	Jun–Aug 2021	2.1 64%	Excluding Bissau	0.3 22%	0.1 8%	CH	Mar–May 2022	2.1 63%	Excluding Bissau	0.3 26%	0.1 10%
Haiti***	Mar–Jun	IPC	Mar–Jun 2020	11.3 93%	Rural and urban areas (excluding Villes de Gonaïves)	2.8 27%	4.1* 40%	IPC	Mar–Jun 2021	10.9 87%	Rural and urban areas (excluding Villes de Gonaïves)	2.8 29%	4.4* 46%	IPC	Mar–Jun 2022	10.9 91%	Rural and urban areas	2.7 27%	4.5* 45%
Honduras	Jun–Aug	IPC	Dec 2020–Mar 2021	9.3 100%	Entire country	3.5 37%	2.9* 31%	IPC	Jul–Sep 2021	9.3 100%	Entire country	3.5 38%	3.3* 35%	IPC	Jun–Aug 2022	9.6 100%	Entire country	3.7 39%	2.6* 28%
Iraq	No typical lean season	HNO	Jan–Dec 2020	39.1 15%	Conflict-affected populations (IDPs and returnees)	N/A N/A	0.7 12%	HNO	Jul–Aug 2021	41.2 15%	IDPs and returnees	N/A N/A	0.6 10%	No forecast					
Jordan (Syrian refugees)	Jan–Dec	WFP	Oct–Dec 2020	0.7 83%	Syrian refugees in host communities	N/A N/A	0.2 25%	WFP	Sep 2021	0.7 100%	Syrian refugees in host communities and camps	N/A N/A	0.1 22%	No forecast					
Kenya	Mar–Apr	IPC	Oct–Dec 2020	53.8 33%	Arid and Semi-Arid Lands (rural) and 12 urban areas	6.3 35%	1.9* 10%	IPC	Nov 2021–Jan 2022	55.0 28%	Arid and Semi-Arid Lands (rural)	5.2 35%	2.4* 16%	IPC	Mar–Jun 2022	55.0 28%	Arid and Semi-Arid Lands (rural)	5.2 35%	3.5* 23%

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).

*** FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate.

Note: The IPC estimates for Ethiopia in May–June 2021 presented in this table reflect the merger of the October 2020 and May 2021 IPC analysis results. The Government of Ethiopia has not endorsed the May 2021 IPC analysis.

TABLE 1.1 (PAGE 3 OF 4)

Table of acute food insecurity estimates, 2020–2022

Highest numbers of acutely food-insecure people in 2020 and 2021, and forecast numbers for 2022

Countries		2020 Highest number of acutely food-insecure people						2021 Highest number of acutely food-insecure people						2022 Highest number of acutely food-insecure people (forecast)					
Refugees/migrant populations are indicated in blue	USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Lebanon (Syrian refugees)	Jan–Dec	VASyR	Aug 2020	0.9 100%	Syrian refugee population	N/A N/A	0.4 49%	VASyR	2021	1.5 100%	Syrian refugee population	N/A N/A	0.7 49%	No forecast					
Lesotho	Jan–Mar	IPC	Oct 2020–Mar 2021	2.0 73%	Rural population	0.5 33%	0.6* 40%	IPC	Oct 2020–Mar 2021	2.0 73%	Rural population	0.5 33%	0.6* 40%	IPC	Jan–Mar 2022	2.1 70%	Rural population	0.5 36%	0.3* 23%
Liberia	Oct–Dec	CH	Oct–Dec 2020	5.2 88%	Entire country	1.1 24%	0.5* 10%	CH	Jun–Aug 2021	5.2 91%	Entire country	1.5 32%	0.9* 20%	No forecast					
Libya	No typical lean season	HNO	Jan–Dec 2020	7.4 100%	Entire country	N/A N/A	0.7 9%	HNO	Jun–Aug 2021	8.2 100%	Entire country	N/A N/A	0.5 6%	No forecast					
Madagascar	Jan–Mar	IPC	Oct–Dec 2020	25.7 15%	Grand Sud and Est	1.7 42%	1.1* 27%	IPC	Nov–Dec 2021	27.9 16%	Grand Sud and Est	1.8 41%	1.6* 37%	IPC	Jan–Apr 2022	27.9 16%	Grand Sud and Est	1.9 43%	1.6* 37%
Malawi	Jan–Mar	IPC	Nov–Dec 2020	19.7 90%	Entire country (rural and urban)	6.2 35%	2.5 14%	IPC	Jan–Mar 2021	19.7 90%	Entire country (rural and urban)	6.3 35%	2.6* 15%	IPC	Jan–Mar 2022	18.8 100%	Entire country (rural and urban)	5.0 27%	1.7 9%
Mali	Jun–Aug	CH	Jun–Aug 2020	20.9 98%	Entire country	3.7 18%	1.3* 7%	CH	Jun–Aug 2021	21.1 100%	Entire country	4.1 19%	1.3* 6%	CH	Jun–Aug 2022	21.7 100%	Entire country	4.4 20%	1.8 8%
Mauritania	Jun–Aug	CH	Jun–Aug 2020	4.2 100%	Entire country	0.8 19%	0.6* 15%	CH	Jun–Aug 2021	4.3 100%	Entire country	0.9 21%	0.5* 11%	CH	Jun–Aug 2022	4.4 100%	Entire country	1.4 33%	0.9* 20%
Mozambique	Jan–Mar	IPC	Oct–Dec 2020	30.1 60%	Part of the country (rural and urban areas)	8.8 48%	2.7* 15%	IPC	Jan–Mar 2021	30.1 60%	Part of the country (Rural and urban areas)	8.4 46%	2.9* 16%	IPC	Nov 2021–Mar 2022	30.8 47%	Part of the country (Rural and urban areas)	6.1 42%	1.9* 13%
Namibia	Jan–Mar	IPC	Oct 2020–Mar 2021	2.5 89%	Excluding Erongo region	0.7 29%	0.4* 20%	IPC	Dec 2021–Mar 2022	2.6 100%	Entire country	0.8 33%	0.8* 30%	IPC	Dec 2021–Mar 2022	2.6 100%	Entire country	0.8 33%	0.8* 30%
Nicaragua	Jul–Aug	FEWS NET	Sep–Oct 2020	6.2 100%	Entire country	N/A N/A	0.4 6%	FEWS NET	Jul–Aug 2021	6.2 100%	Entire country	N/A N/A	0.4 6%	FEWS NET	Jul–Sep 2022	6.7 100%	Entire country	N/A N/A	0.1–0.25 1–4%
Niger	Jun–Aug	CH	Jun–Aug 2020	23.0 96%	Entire country	5.0 23%	2.0* 9%	CH	Oct–Dec 2021	24.9 100%	Entire country	5.8 23%	2.6* 10%	CH	Jun–Aug 2022	24.9 100%	Entire country	7.3 29%	4.4* 18%
Nigeria***	Jun–Aug	CH	Oct–Dec 2020	212.1 49%	15 states and Federal Capital Territory	23.9 23%	9.2* 9%	CH	Oct–Dec 2021	219.5 73%	21 states and Federal Capital Territory	35.0 22%	12.9* 8%	CH	Jun–Aug 2022	219.5 72%	21 states and Federal Capital Territory	40.8 26%	19.5* 12%
Pakistan	Jun–Aug	IPC	Jun–Aug 2020	220.9 2%	Khyber Pakhtunkhwa	1.5 29%	1.2* 25%	IPC	Oct 2021–Mar/Apr 2022	215.3 9%	Balochistan, Khyber Pakhtunkhwa and Sindh	6.4 35%	4.7* 25%	IPC	Apr/May–Jun 2022	215.3 9%	Balochistan, Khyber Pakhtunkhwa and Sindh	6.5 35%	4.7* 26%
Palestine †	No typical lean season	HNO (SEFSec)	Jan–Dec 2020	5.2 100%	Entire territory	0.9 18%	2.0 38%	SEFSec	Dec 2020–Jan 2021	5.1 100%	Entire territory	N/A	1.8 31%	No forecast					
Rwanda (refugees)	Jan–Dec	Insufficient evidence						WFP	Jan–Dec 2021	0.1 100%	Refugee population	N/A N/A	0.04 32%	No forecast					

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).

*** FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate. † The 2020 and 2021 estimates are based on the SEFSec methodology, for which the GRFC TWG has identified comparability challenges with IPC/CH estimates (see Technical Notes). Please note that 31% refers to the percentage of food-insecure households as opposed to individuals, as per the unit of analysis in the SEFSec analysis (SEFSec, December 2020).

TABLE 1.1 (PAGE 4 OF 4)

Table of acute food insecurity estimates, 2020–2022

Highest numbers of acutely food-insecure people in 2020 and 2021, and forecast numbers for 2022

Countries		2020 Highest number of acutely food-insecure people						2021 Highest number of acutely food-insecure people						2022 Highest number of acutely food-insecure people (forecast)					
Refugees/migrant populations are indicated in blue	USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Senegal	Jun–Aug	CH	Jun–Aug 2020	16.7 100%	Entire country	3.5 21%	0.8* 5%	CH	Jun–Aug 2021	17.1 100%	Entire country	3.1 18%	0.5* 3%	CH	Jun–Aug 2022	17.3 100%	Entire country	3.9 22%	0.9* 5%
Sierra Leone	Jun–Aug	CH	Jun–Aug 2020	8.3 100%	Entire country	4.0 49%	1.3* 16%	CH	Jun–Aug 2021	8.5 96%	Entire country	2.8 35%	1.8* 22%	CH	Jun–Aug 2022	8.6 100%	Entire country	3.6 42%	1.6 19%
Somalia	Feb–Apr	IPC	Oct–Dec 2020	12.3 100%	Entire country (rural and urban areas and IDP settlements)	3.0 24%	2.1* 17%	IPC	Oct–Dec 2021	15.7 100%	Entire country (rural and urban areas and IDP settlements)	3.7 24%	3.5* 22%	IPC	Apr–Jun 2022	15.7 100%	Entire country (rural and urban areas and IDP settlements)	3.9 25%	6.0** 38%
South Sudan	May–Jul	IPC	May–Jul 2020	11.7 100%	Entire country	3.3 28%	6.5* 55%	IPC	Apr–Jul 2021	12.1 100%	Entire country	3.1 26%	7.2** 60%	IPC	Apr–Jul 2022	12.3 100%	Entire country	2.9 23%	7.7** 63%
Sudan***	Aug–Sep	IPC	Jun–Sep 2020	45.3 100%	Entire country	15.9 35%	9.6* 21%	IPC	Jun–Sep 2021	46.8 100%	Entire country excluding Abyei and Al Tina	16.5 35%	9.8* 21%	IPC	Oct 2021–Feb 2022	46.8 100%	Entire country excluding Abyei and Al Tina	15.0 32%	6.0* 13%
Syrian Arab Republic	No typical lean season	HNO	Oct–Dec 2020	20.8 100%	Entire country	N/A N/A	12.4 60%	HNO	Oct–Nov 2021	21.7 100%	Entire country	N/A N/A	12.0 55%	No forecast					
Uganda	May–Jul	IPC	Jun–Aug 2020	45.7 25%	Karamoja, urban areas, refugee settlements and host community districts	4.3 38%	2.6* 23%	FEWS NET	May–Jul 2021	45.7 100%	Entire country	N/A N/A	2.2 5%	FEWS NET	Apr–Jun 2022	45.7 100%	Entire country	N/A N/A	1.5–2.0 3–5%
Ukraine	Dec–Mar	HNO	Jan–Dec 2020	41.7 16%	Donetsk and Luhansk oblasts and IDP population	N/A N/A	0.6 9%	HNO	Oct–Nov 2021	41.3 15%	Donetsk and Luhansk oblasts and IDP population	N/A N/A	0.4 6%	No forecast					
United Republic of Tanzania	Mar–Apr	IPC	Nov 2019–Apr 2020	58.0 8%	16 districts	1.7 34%	1.0* 20%	IPC	Nov 2021–Apr 2022	57.6 6%	14 councils	0.8 23%	0.4* 13%	IPC	May–Sep 2022	57.6 6%	14 councils	0.9 26%	0.6* 17%
Yemen***	Jul–Sep	IPC	Oct–Dec 2020	30.0 100%	Entire country	10.0 33%	13.5** 45%	IPC	Jan–Jun 2021	30.0 100%	Entire country	8.6 29%	16.1** 54%	IPC	Jun–Dec 2022	31.9 100%	Entire country	7.2 23%	19.0** 60%
Zambia	Jan–Mar	IPC	Oct 2019–Mar 2020	17.9 53%	86 districts (rural)	3.1 33%	2.3* 24%	IPC	Feb–Mar 2021	18.0 38%	64 districts (rural)	2.5 36%	1.7* 25%	IPC	Oct 2021–Mar 2022	18.4 66%	61 districts (rural)	5.2 43%	1.6 13%
Zimbabwe****	Jan–Mar	IPC	Feb–Jun 2020	14.6 66%	Rural population	2.8 29%	4.3* 45%	IPC	Jan–Mar 2021	15.6 62%	Rural population	3.1 32%	3.4* 35%	FEWS NET	Jan–Mar 2022	15.3 100%	Entire country	N/A N/A	2.5–3.0 16–20%

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).

*** FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate. **** FEWS NET's analyses suggest that the population requiring emergency food assistance was higher than the IPC estimate.



CHAPTER 2

REGIONAL OVERVIEWS OF FOOD CRISES IN 2022

Central and Southern Africa

Angola | Central African Republic | Democratic Republic of the Congo | Eswatini | Lesotho | Madagascar | Malawi | Mozambique | Namibia | United Republic of Tanzania | Zambia | Zimbabwe

Acute food insecurity overview 2021

45.56M people

in 12 countries in Central and Southern Africa were in Crisis or worse (IPC Phase 3 or above) in 2021

24% of the GRFC global number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent were in 12 countries in Central and Southern Africa in 2021.

14 000 people in Madagascar were in Catastrophe (IPC Phase 5) in 2021

This analysis was conducted in April for the April–September 2021 period and does not coincide with the 2021 peak period (lean season) in November–December.

9.89M people in 12 countries were in Emergency (IPC Phase 4) in 2021

35.67M people in 12 countries were in Crisis (IPC Phase 3) in 2021

67.7M people in 12 countries were in Stressed (IPC Phase 2) in 2021

Source: FSIN, using IPC data.

43.27M people in 11 SADC member states were in Crisis or worse (IPC Phase 3 or above)¹ in 2021



¹ All the countries in this regional overview are SADC member states with the exception of the Central African Republic.

The majority of people in Crisis or worse (IPC Phase 3 or above) in Central and Southern Africa in 2021 were in the Democratic Republic of the Congo (27.3 million) followed by Zimbabwe (3.4 million), Mozambique (2.9 million), Malawi (2.6 million) and the Central African Republic (2.3 million).

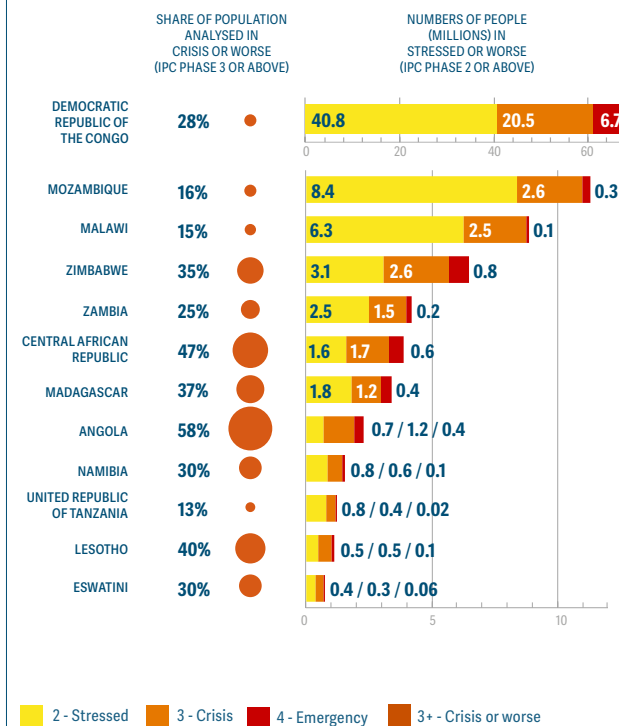
In Madagascar (Grand Sud), an April 2021 analysis estimated that nearly 14 000 people were in Catastrophe (IPC Phase 5) during April–September 2021 (IPC, May 2021). In June 2021, a Risk of Famine was issued by the IPC from October 2021 in the district of Ambovombe-Androy in the worst-case scenario. Although the provision of humanitarian assistance mitigated this and prevented a catastrophic situation, Ambovombe-Androy was still classified in Emergency (IPC Phase 4) (IPC, July and December 2021).

Of the 10 million people in Emergency (IPC Phase 4) in Central and Southern Africa in 2021, 68 percent were in the Democratic Republic of the Congo.

While the percentage of the analysed population in Crisis or worse (IPC Phase 3 or above) was above 25 percent in nine of the 12 countries, it was particularly high in the Central African Republic and Lesotho, and in localized areas of Angola (58 percent in three southwestern provinces), Madagascar (49 percent in Grand Sud) and Mozambique (47 percent in Cabo Delgado).

Urban acute food insecurity was pronounced in Malawi's four cities, which were classified in Crisis (IPC Phase 3) in January–March 2021, as well as in the Central African Republic's capital Bangui where 38 percent of the population was in Crisis or worse (IPC Phase 3 or above) in April–August 2021 (IPC, January and May 2021). Some 4.6 million people in urban areas of the Democratic Republic of the Congo from February–July 2021, and 800 000 in urban Mozambique from January–March 2021 were in Crisis or worse (IPC Phase 3 or above) (IPC, January and March 2021).

FIGURE 2.1
Numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above)



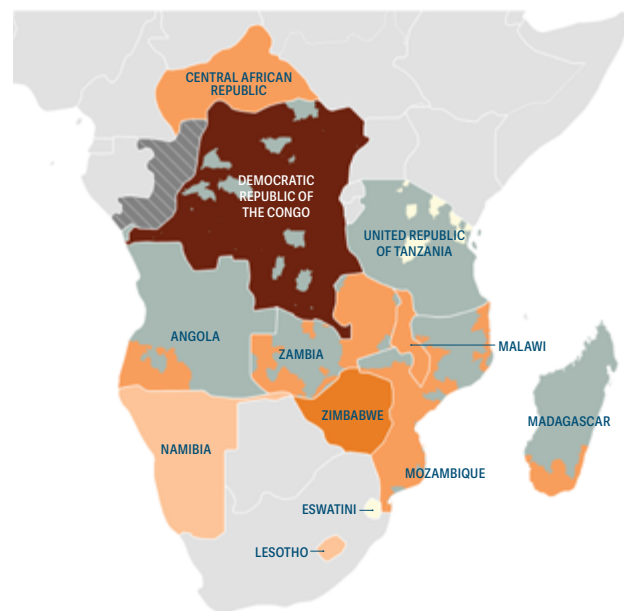
The Madagascar analysis only covered the Grand Sud region and analysed 16 percent of the total country population; the United Republic of Tanzania analysed 6 percent; Angola, 9 percent; Mozambique, 60 percent; Zambia, 38 percent and Zimbabwe, 62 percent. All other analyses covered between 70–100% of the country population.

Source: FSIN, using IPC data.

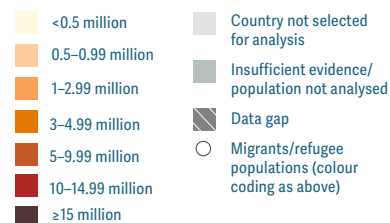
Acute food insecurity overview 2021

MAP 2.1

Acute food insecurity estimates in Central and Southern Africa, in 2021



Numbers of people in Crisis or worse (IPC Phase 3 or above) (ranges)



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

Source: GRFC 2022.

Acute food insecurity trends

The number of people in Crisis or worse (IPC Phase 3 or above) across 12 countries increased from 40.2 million in 2020 to 45.6 million in 2021, representing the highest number for the region in the GRFC's six-year history.

This increase can be attributed in part to expanded geographical coverage of analyses for the Democratic Republic of the Congo and Angola. It is also due to worsening weather and economic-related food crises, particularly in Angola, Lesotho, Madagascar, Namibia and Mozambique, while conflict also affected the latter country.

In 2021, several countries in the region had their highest numbers of people in Crisis or worse (IPC Phase 3 or above) in the GRFC's six-year history. In the Democratic Republic of the Congo, the number reached its highest level, though the prevalence decreased slightly compared to 2020 levels due to increased geographical coverage. In November–December 2021, 1.6 million people in 14 districts of southern and eastern Madagascar were in these phases, a year-on-year increase of 60 percent, due to the devastating drought. For seven comparable southern districts, this was the highest number since the first edition of the GRFC. Lesotho had its highest magnitude of acute food insecurity in the history of this report, reflecting the impacts of COVID-19 and consecutive below-average harvests. During January–March 2021, Mozambique had its highest number since the 2016 drought, due to conflict, drought and economic shocks (IPC, February 2017).

Some countries experienced an improvement since 2020 due to favourable weather conditions, which resulted in increased agricultural output. In Zimbabwe, the number of people in Crisis or worse (IPC Phase 3 or above) decreased from over 4.3 million in February–June 2020 to 3.4 million in January–March 2021.

Analyses in the capitals of the Central African Republic and the Democratic Republic of the Congo found levels of urban acute food insecurity were still high in 2021, as COVID-19 continued to restrict informal sector work, but lower than in 2020, when the economic impacts of restrictions were at their worst.

Six-year trends, 2016–2021

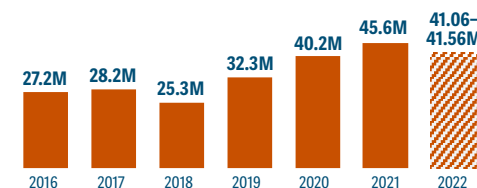
Looking at the six-year trends for the region, the number of people in Crisis or worse (IPC Phase 3 or above) has almost doubled since 2016, with increases each year. The large increase of 7 million additional people between 2018 and 2019 can partly be explained by the inclusion of Angola, Namibia and the United Republic of Tanzania, which accounted for an additional 2 million people in 2019, but mainly by the worsening situation in the Democratic Republic of the Congo, Zimbabwe and Zambia (FSIN, April 2020).

Between 2019 and 2020, the number of people in Crisis or worse (IPC Phase 3 or above) in the region rose by almost 8 million, partly due to increases in the population analysed in Mozambique and the Democratic Republic of the Congo, but also attributable to the latter country's persistent conflict, large-scale displacement, and the effects of flooding and COVID-19 containment measures.

Angola, the Central African Republic, Eswatini, Madagascar, Lesotho and Zimbabwe also experienced substantial increases in the numbers of people in Crisis or worse (IPC Phase 3 or above) between 2019 and 2020. For the Central African Republic, this increase was largely attributed to conflict, while the remaining countries faced a combination of economic shocks, notably the effect of containment measure on livelihoods, and weather shocks (FSIN, May 2021).

FIGURE 2.2

Numbers of people in Crisis or worse (IPC Phase 3 or above), in Central and Southern Africa, 2016–2022



The 2022 forecast includes a FEWS NET projection figure for Zimbabwe, which is provided as a range estimate.

Source: GRFC 2017–2022.

Drivers of food crises across the region in 2021

Conflict in the Central African Republic, the Democratic Republic of the Congo and Mozambique, the adverse economic effects of COVID-19 restrictions, and devastating weather shocks, including drought and floods, were the main drivers of acute food insecurity in southern and central Africa in 2021.

* Conflict/insecurity

In Ituri, Tanganyika and Kasai provinces of the Democratic Republic of the Congo and Cabo Delgado in Mozambique, conflict continued to displace populations, reduce household access to food, disrupt livelihood activities and constrain agricultural activities.

In the Central African Republic, violence following the presidential and legislative elections in December 2020 disrupted market activities, hindered access to fields during harvest and, until March 2021, halted transport along the main supply route between Bangui and Garoua-Boulai in Cameroon, leading to food shortages and price increases (IPC October 2021).

Countrywide civil unrest in Eswatini resulted in disruptions to food supply systems as shops were looted, roads blocked and borders closed (SADC, August 2021).

* Economic shocks, including COVID-19

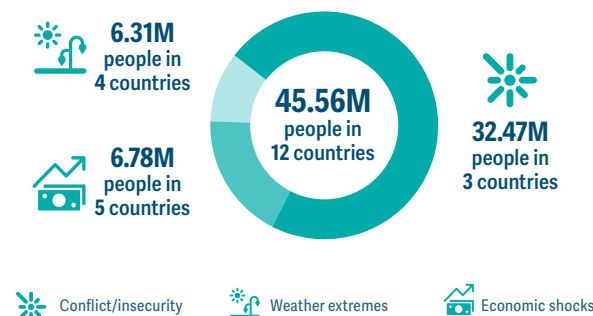
Average to above-average crop production in some countries, such as Malawi and Zimbabwe, kept staple food prices below their 2020 levels for most of the year, supporting food access among market-dependent households.

However, food access from markets was still severely constrained by widespread job losses, especially in the informal labour market, due to COVID-19 restrictions. In countries that rely heavily on casual labour opportunities and remittance income from South Africa, such as Eswatini and Lesotho, containment measures aimed at curbing the spread of new waves of COVID-19 severely curtailed incomes (SADC, August 2021). Agricultural labour opportunities were scarce in areas affected by drought.

Many countries experienced higher food prices than in 2020 due to factors such as poor cereal harvests (Angola and Madagascar),

FIGURE 2.3

Numbers of people in Crisis or worse (IPC Phase 3 or above) by key driver in 2021



Many food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

Source: GRFC 2022.

currency depreciation (Angola and Zambia), trade disruptions due to insecurity (Central African Republic), or high prices of grain in South Africa (Lesotho and Namibia). In Zimbabwe, food prices declined through to September, thanks to new supplies from the large cereal harvest and a more stable exchange rate, before increasing towards the end of the year (FAO-GIEWS, January 2022).

* Weather extremes

Favourable rainfall led to improved cereal and livestock production over much of the region, including in some areas that had been affected by recurrent episodes of drought in previous years, including Zimbabwe.

The high rainfall volume received in some areas was partially due to five cyclones that made landfall between December 2020 and the first few months of 2021. Torrential rains and floods affected over 500 000 people and damaged over 219 000 hectares of farmland, including in Mozambique, Madagascar, Zimbabwe, Eswatini and Malawi. In Mozambique, tropical cyclone Eloise in January 2021 caused widespread damage in areas that were still recovering from

cyclone Idai (2019) and left over 260 000 people in urgent need of humanitarian assistance (SADC, August 2021).

Some countries experienced localized dry spells, including Angola, the Democratic Republic of the Congo, Namibia, Madagascar and Mozambique.

In Madagascar, from November 2020–January 2021 (the main planting season) the Grand Sud region recorded less than 50 percent of normal rainfall, resulting in the worst drought conditions since 1981 for almost 69 percent of the region (ACAPS, May 2021). Crop production for 2021 in southern Madagascar was estimated to be 10–30 percent below that of 2020 and 50–70 percent below the five-year average as a result of the prolonged drought as well as limited access to seeds (FEWS NET, June 2021). The impact of the drought in the Grand Sud worsened in October 2021, with the situation particularly grave in Amboasary (OCHA, December 2021).

The southwestern provinces of Angola also experienced the worst drought of the last 40 years (WFP, December 2021). Cumulative seasonal rainfall amounts in key producing provinces of Namibe, Cunene, Huila and Cuanza Sul were 60–80 percent below the long-term average, reducing crop and livestock production and contributing to an increase in food prices (FAO-GIEWS, November 2021).

Key nutrition challenges in 2021

Recent national child nutrition data is unavailable across several countries in Central and Southern Africa. Although acute malnutrition data is difficult to find at the national level, more recent information is available at sub-regional levels.

According to data from 2021, southwest Angola (provinces of Cunene, Huila and Namibe) and Madagascar (Grand Sud) had the highest levels of wasting in the region, considered 'high' by WHO thresholds (10- < 15 percent). The Central African Republic and the Democratic Republic of the Congo had 'medium' levels of wasting (5- < 10 percent), while the remaining countries in the region where data was available from 2019 onwards had 'low' or 'very low' (< 2.5 percent or 2.5- < 5 percent).

Five IPC acute malnutrition analyses carried out in 2021 found that over 2 million children were wasted – nearly 800 000 of them severely wasted – in southern Angola, the Central African Republic, the Democratic Republic of the Congo, southern Madagascar and Cabo Delgado province in Mozambique. The highest numbers of wasted children were in the Democratic Republic of the Congo (1.2 million with over 500 000 severely wasted) and southern Madagascar (over 500 000 with 111 000 severely wasted). All of these countries had areas classified as Critical (IPC AMN Phase 4), and high levels of acute food insecurity were identified as contributing factors.

Poor hygiene conditions, low access to safe drinking water and health services leading to a high prevalence of diseases as well as inadequate child-feeding practices due to lack of knowledge also contributed to high levels of child wasting.

Child stunting is a challenge across Central and Southern Africa. In nine of the 12 countries, stunting levels were classified as 'very high' (at least 30 percent). In Eswatini, Namibia and Zimbabwe they were considered 'high' (20- < 30 percent) (Global Nutrition Report, 2021).

Existing nutritional surveillance and monitoring systems do not allow timely identification and follow up on malnutrition cases.

Displacement in 2021

IDPs

Large IDP populations in conflict-affected countries such as the Democratic Republic of the Congo, Mozambique and the Central African Republic persisted in 2021.

In the **Democratic Republic of the Congo**, an estimated 1.5 million people were newly displaced in 2021 mainly due to violence in the east of the country with some of them having to move several times (HNO, January 2022).

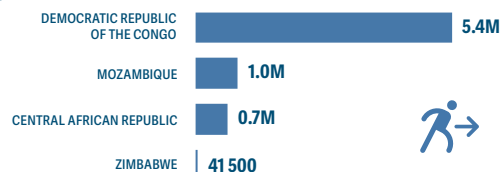
Ongoing conflict and insecurity were the main drivers of displacement in northern **Mozambique** (IOM DTM Mozambique, September 2021a), while in central Mozambique, notable drivers included the lasting damages incurred by the 2019 tropical cyclones and flooding that occurred during 2019-2020 (IOM DTM Mozambique, November 2021a).

In the **Central African Republic**, conflict/insecurity is the overwhelming driver of displacement – including tensions linked to the 2020 elections (IOM DTM, September 2021).

The 7.1 million IDPs, largely spread across three countries, are among the most acutely food insecure in the region having lost their land, livelihoods and community networks, often becoming reliant on host communities that already have meagre resources. Extreme poverty and geographical inaccessibility, as well as poor infrastructure and equipment, hamper their access to basic services, including markets, safe drinking water, sanitation and health care.

FIGURE 2.4

7.1M IDPs in four countries in Central and Southern Africa in 2021



Source: IOM and UNHCR, end 2021.

Refugees/asylum seekers

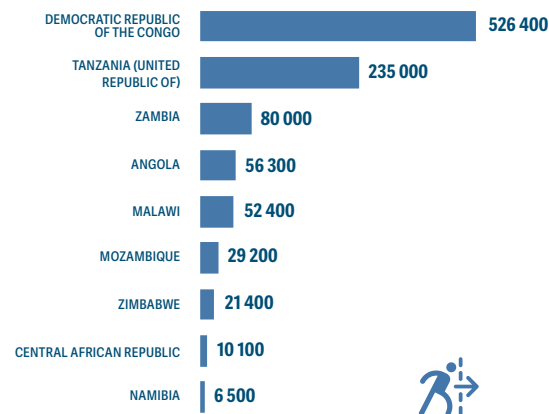
The majority of the refugees/asylum seekers hosted in the region have fled conflict in the Central African Republic, the Democratic Republic of the Congo, Rwanda and Burundi.

For refugees hosted in the **Democratic Republic of the Congo**, conflict and lack of access to livelihoods are key drivers of acute food insecurity, while in **Angola**, lack of documentation among refugees/asylum seekers limits their ability to access assistance, services, land, and employment opportunities.

In **Zambia**, the need to acquire passes to leave settlements, and the expense of work permits often prevent refugees from establishing viable livelihoods. In **Malawi**, legal restrictions on rights to access land and engage in employment opportunities make refugees reliant on humanitarian food assistance, which has been significantly reduced and inconsistent over the past five years due to funding shortfalls.

FIGURE 2.5

1.0M refugees/asylum seekers in nine countries in Central and Southern Africa in 2021



Source: UNHCR, end 2021.

Regional forecast, 2022

41.06–41.56M people

in 12 countries in Central and Southern Africa were forecast to be in Crisis or worse (IPC Phase 3 or above) in 2022

The aggregate forecast number includes a FEWS NET estimate for Zimbabwe of 2.5–3.0 million. FEWS NET does not provide a breakdown by phase classification.

7.18M people in 9 countries were forecast to be in Emergency (IPC Phase 4) in 2022

31.38M people in 11 countries were forecast to be in Crisis (IPC Phase 3) in 2022

70.96M people in 11 countries were forecast to be in Stressed (IPC Phase 2) in 2022

Source: FSIN, using IPC and FEWS NET data.

The number of people in Crisis or worse (IPC Phase 3 or above) was projected to decline by around 5 million during the early 2022 lean season (compared to the 2021 aggregate figure), reflecting the positive impacts of good cereal harvests in most countries of the region in 2021.

A decrease in the number of people in Crisis or worse (IPC Phase 3 or above) in early 2022 was forecast in the Democratic Republic of the Congo – which remains by far the largest food crisis in the region – as well as in Lesotho, Malawi, Mozambique and Zimbabwe. Acute food insecurity was expected to persist at similar levels in Angola, the Central African Republic, Eswatini, Madagascar, Namibia and Zambia. The United Republic of Tanzania was the only country in which the numbers were forecast to slightly increase.

While households in southern Madagascar continue to face high levels of acute food insecurity, largely due to consecutive years of drought, a slight decrease in the number of people in Emergency

(IPC Phase 4) was expected in early 2022 compared to late 2021 due to the provision of humanitarian assistance. No populations were expected to be in Catastrophe (IPC Phase 5) (IPC, December 2021).

Concerns for the longer-term outlook in 2022

These analyses were carried out in 2021 and do not account for the full impact of rising global food prices, the war in Ukraine and worse-than-predicted weather extremes.

Since the beginning of the rainfall season, southern Madagascar, areas in southwestern Angola and northwestern Namibia have experienced severe drought, causing crop losses (Climate Prediction Centre, April 2022). From early February to mid-March, parts of central and southern Mozambique, Zimbabwe, and parts of Zambia and Malawi were affected by extreme dryness, with some areas experiencing their driest February in the past 40 years. Serious impacts on rainfed maize production can be expected in 2022 (WFP, March 2022).

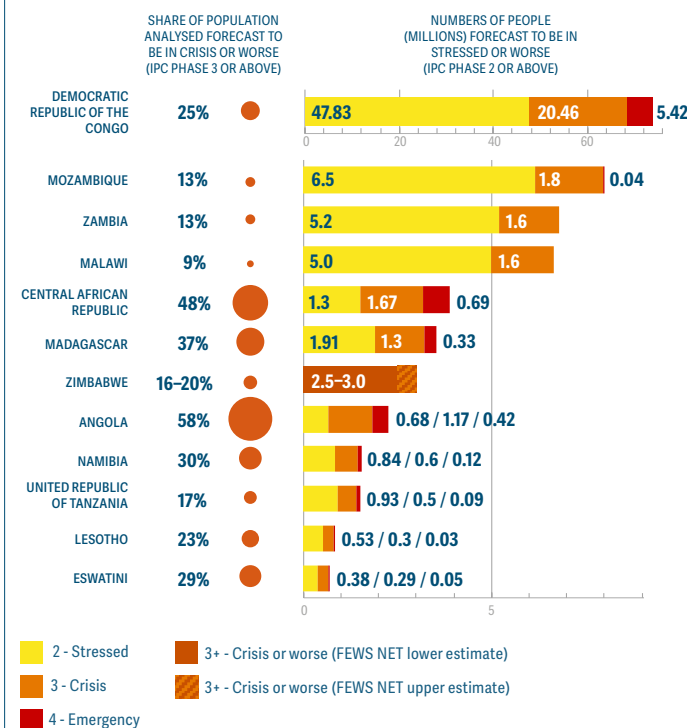
While moderate to heavy rainfall in January supported cereal production in Eswatini, Lesotho and South Africa, and could help offset declines at the sub-regional level (FAO, March 2022), tropical cyclone Ana in late January brought winds and heavy rains that caused displacement and destroyed/inundated hundreds of thousands of hectares of crops across central and northern Madagascar and Mozambique, southern and northern Zimbabwe, and southern Malawi. It affected nearly 440 000 households in Madagascar, Malawi and Mozambique alone and in all affected countries crop damage is likely to negatively impact the 2022 harvest (FEWS NET, February 2022).

Between mid-February and mid-March, tropical storm Dumako, and tropical cyclones Emnati and Gombe brought much-needed rainfall to dry areas in Madagascar and northern Mozambique, but also caused extensive flooding and damage (WFP, March 2022).

continued over...

FIGURE 2.6

Forecasts for numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above)



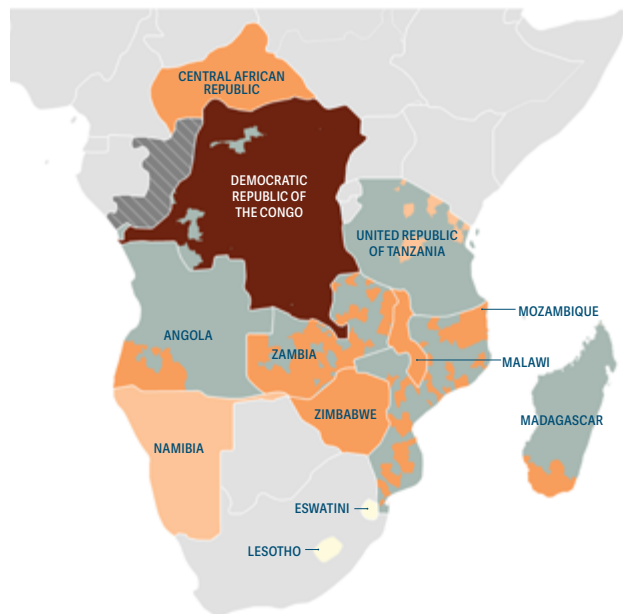
The Madagascar analysis only covered the Grand Sud region and analysed 16 percent of the total country population; the United Republic of Tanzania analysed 6 percent; Angola, 9 percent; Mozambique, 47 percent and Zambia, 66 percent. All other analyses covered between 70–100% of the country population.

Source: FSIN, using IPC and FEWS NET data.

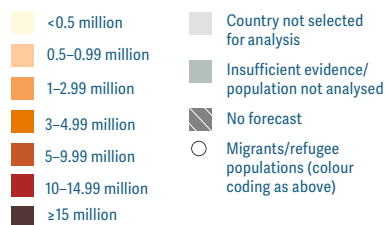
Regional forecast, 2022 *continued*

MAP 2.2

Acute food insecurity estimates in Central and Southern Africa, in 2022



Numbers of people in Crisis or worse (IPC Phase 3 or above) (ranges)



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

Source: FSIN, GRFC 2022.

continued from previous page...

Conflict and related displacement will continue to have a major impact on livelihoods, agricultural production, food prices and incomes in the Central African Republic, the Democratic Republic of the Congo, and Cabo Delgado in Mozambique. Additionally, the effects of preceding COVID-19 lockdowns are likely to constrain economic recovery and keep income from informal work at below-average levels across the region. In early 2022, ample maize supplies kept prices mostly firm, though in Zimbabwe, food prices were 69 percent higher year-on-year in February. In import-dependent Eswatini and Namibia, wheat and bread prices increased in January, driven by global trends (FAO, February 2022).

Potential impact of the Ukraine war

The war in Ukraine deals another blow to the region's food availability at a time when governments have limited fiscal space to cushion the effects of rising food prices due to economic challenges stemming from COVID-19 restrictions. As a net importer of commodities such as wheat, vegetable oil and petroleum products, prices in the region are already reflecting the impact of this war (WFP, March 2022).

Against the backdrop of already high global food prices, high crude oil prices are increasing food production and transportation costs, which will further push up global and regional food prices. This will ultimately affect local prices and may constrain food access for vulnerable households dependent on markets to meet their food needs (WFP, March 2022).

The region relies heavily on imports for its fertiliser supply (though not heavily from the Russian Federation), therefore elevated global fertiliser prices may negatively affect regional food production and result in higher food import needs at a time when global food prices are rising (WFP, March 2022).



Conflict-related displacement will still have a major impact on food security in the Central African Republic, the Democratic Republic of the Congo, and Cabo Delgado in Mozambique in 2022.

East Africa

Burundi | Djibouti | Ethiopia | Kenya | Rwanda (refugees) | Somalia | South Sudan | Sudan | Uganda

Acute food insecurity overview 2021

43.59M people

in 9 countries in East Africa¹ were in Crisis or worse (IPC Phase 3 or above) or equivalent in 2021

This figure includes FEWS NET's estimate of 2.2 million people in Crisis or worse (IPC Phase 3 or above) in Uganda and WFP's estimate of 0.04 million acutely food-insecure refugees in Rwanda. These numbers are not included in the disaggregated numbers for IPC Phases 2-5 below.

23% of the GRFC global number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent were in 9 countries in East Africa in 2021.

509 000 people in Ethiopia and South Sudan were in Catastrophe (IPC Phase 5) in 2021

This number includes the highest number of people in Catastrophe (IPC Phase 5) in Ethiopia in 2021, which was during July-September (401 000). However, the highest number of people in Crisis or worse (IPC Phase 3 or above) in the country was in May-June.

10.58M people in 7 countries were in Emergency (IPC Phase 4) in 2021

30.31M people in 7 countries were in Crisis (IPC Phase 3) in 2021

51.25M people in 7 countries were in Stressed (IPC Phase 2) in 2021

Source: IPC, FEWS NET and WFP.

In 2021, nearly 43.6 million people were in Crisis or worse (IPC Phase 3 or above) or equivalent in nine countries in East Africa during the peak period identified for each country.

This figure includes 509 000 people in Catastrophe (IPC Phase 5) in Ethiopia and South Sudan (IPC, December 2020 and June 2021). East Africa's population in Catastrophe (IPC Phase 5) accounted for nearly 90 percent of the global population in this phase in 2021.

In Ethiopia's Tigray region, the number of people expected to be in Catastrophe (IPC Phase 5) rose from nearly 353 000 in May-June 2021 to over 401 000 in July-September 2021 (IPC, June 2021).² Although the IPC Technical Working Group classified the worst-affected areas in Emergency (IPC Phase 4) in the most likely scenario, the IPC Famine Review Committee developed four alternative scenarios. In three of the four scenarios, there was a medium-to-high Risk of Famine in the second half of 2021 (IPC, July 2021).

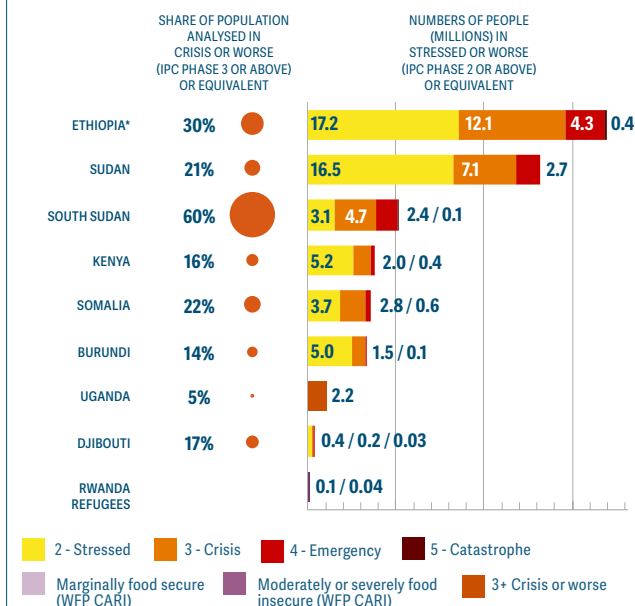
In South Sudan, where 108 000 people were in Catastrophe (IPC Phase 5) from April-July 2021, the IPC Famine Review Committee expected the western payams of Pibor county (Gumuruk, Pibor, Lekuangole and Verteth) to face 'Famine Likely' (IPC Phase 5) during the first half of 2021. In a less likely scenario, the FRC also issued a Risk of Famine statement for Kizongora and Maruwa payams during the same period (IPC, December 2020).

Around 10.6 million people were in Emergency (IPC Phase 4) in East Africa in 2021, 89 percent of whom were in three major food crises, namely Ethiopia, the Sudan and South Sudan. These three countries accounted for 77 percent of the regional population in Crisis (IPC Phase 3), while Ethiopia, Kenya, the Sudan and Burundi accounted for 86 percent of the regional population in Stressed (IPC Phase 2).

² The Government of Ethiopia did not endorse the findings of the May 2021 analysis.

FIG 2.7

Numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above) or equivalent



*Data presented here reflects the highest number of people in Crisis or worse in 2021. During this period, nearly 353 000 people were in Catastrophe (IPC Phase 5), which was not the highest number in this phase during the course of 2021 (see text for explanation).

Source: FSIN, using IPC data; WFP CARI (Rwanda refugees); FEWS NET (Uganda).

41.94M people in 7 IGAD member states were in Crisis or worse (IPC Phase 3 or above) in 2021

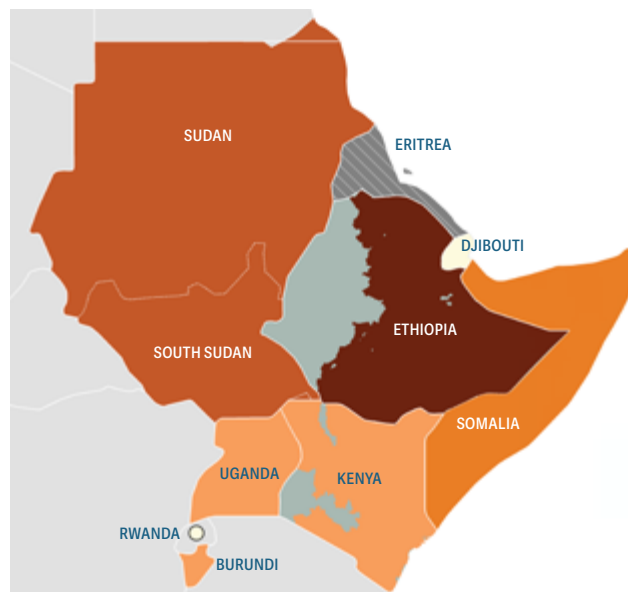


¹ The East Africa region includes seven of the eight IGAD member states, Burundi, and the refugee population in Rwanda.

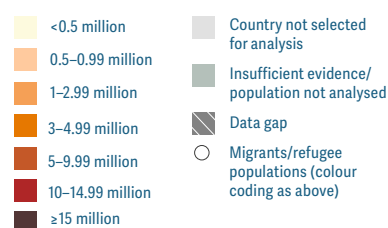
Acute food insecurity overview 2021

MAP 2.3

Acute food insecurity estimates in East Africa, in 2021



Numbers of people in Crisis or worse (IPC Phase 3 or above) or equivalent (ranges)



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

Source: FSIN, GRFC 2022.

Acute food insecurity trends

An additional 10.7 million people faced Crisis or worse (IPC Phase 3 or above) or equivalent in East Africa in 2021 compared to 2020 – when the number had already reached the highest point in the GRFC’s five-year existence.

This sharp increase, which constitutes the largest increase year-on-year in the six editions of the GRFC, reflects worsening food security outcomes in almost all food-crisis countries in the region. In Ethiopia, Somalia, South Sudan and the Sudan, 2021 brought the highest numbers of people in Crisis or worse (IPC Phase 3 or above) in the history of the GRFC, as recorded by the IPC. Burundi and Kenya also saw year-on-year increases.

The biggest deterioration in 2021 was in Ethiopia, which became the region’s largest food crisis, with an additional 8 million people in Crisis or worse (IPC Phase 3 or above). This was largely due to the effects of the conflict in Tigray, severe drought and an increase in the areas analysed relative to analyses conducted before October 2020.³ The number of people in Emergency (IPC Phase 4) increased from around 1.4 million in late 2020 to 4.3 million by May–June 2021. The number of people in Catastrophe (IPC Phase 5) rose from zero in October–December 2020 to 353 000 in May–June and 401 000 in July–September 2021. No IPC data were available beyond this date, while a Risk of Famine was confirmed by the IPC FRC, with a medium to high risk of Famine in three out of four scenarios.

In Kenya’s ASALs, the number of people in Crisis or worse (IPC Phase 3 or above) increased by 26 percent to 2.37 million between the last three months of 2020 and November 2021–January 2022 largely due to three poor rainy seasons. In Somalia, 22 percent of the analysed population was in Crisis or worse (IPC Phase 3 or above) by October–December 2021, up from 17 percent in late 2020, largely attributable to the effects of drought, poor and erratic rainfall, flooding, conflict and elevated food prices. On top of conflict, insecurity and macroeconomic crises magnified by the effects of the COVID-19 pandemic, South Sudan and the Sudan

³ The expanded analysis increased the population covered from 36 percent of the country’s population to 49 percent.

faced severe flooding and dry spells in 2021. In South Sudan, the number of people in Crisis or worse (IPC Phase 3 or above) rose from 6.5 million in May–July 2020 to 7.2 million by April–July 2021 (IPC, December 2020). In the Sudan, acute food insecurity persisted at similar high levels in 2021 as 2020.

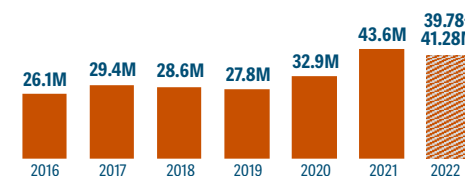
Six year trends, 2016–2021

Since the first edition of the GRFC, which covered 2016–2017, the East Africa region has experienced consistently high levels of acute food insecurity, driven by widespread conflict/insecurity and related displacement, weather-related shocks and economic crises. Before 2020, the highest numbers had been in 2017 when the Horn of Africa experienced a devastating drought. Each year, there have been populations in Catastrophe (IPC Phase 5) in South Sudan. In 2018, there were populations in this phase in Somalia and in 2021, over 400 000 were in this phase in Ethiopia.

Acute food insecurity also increased significantly between 2019 and 2020 due to COVID-19 containment measures aggravating macroeconomic crises, as well as the impact of protracted conflict, severe and widespread flooding, and desert locusts. Several of the 2020 IPC analyses revealed a concerning rise in the number of acutely food-insecure urban populations, a trend that was already emerging pre-COVID-19 due to large-scale rural-urban migration, unemployment and under-employment, a high reliance on informal work, poor living conditions and food inflation.

FIG 2.8

Numbers of people in Crisis or worse (IPC Phase 3 or above) or equivalent in East Africa, 2016–2022



The 2022 forecast includes a FEWS NET projection figure for Ethiopia and Uganda, which is provided as a range estimate.

Source: GRFC 2017–2022.

Drivers of food crises across the region in 2021

In 2021, conflict/insecurity was considered the primary driver of acute food insecurity in Ethiopia and South Sudan, and for refugee populations hosted in Rwanda and Uganda. Extreme weather conditions primarily drove acute food insecurity in Somalia, the Sudan, Kenya and Burundi. Economic shocks aggravated acute food insecurity across the region, and was identified as the main driver in Djibouti.

* Conflict/insecurity

Conflict/insecurity was the principal driver of acute food insecurity in Ethiopia, where fighting spilled over from Tigray into neighbouring Amhara and Afar regions, destroying livelihoods and displacing families from their homes (OCHA, September 2021), and in South Sudan, where localized violence disrupted livelihoods and markets in the Greater Pibor Administrative Area, Jonglei, Warrap and Eastern Equatoria (WFP, July 2021).

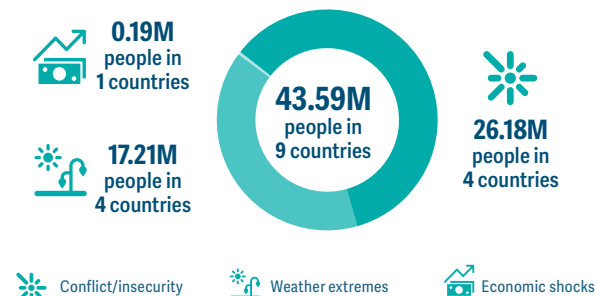
Intercommunal clashes and militia attacks also contributed to high levels of acute food insecurity in Somalia, notably in the central and southern regions, while in the Sudan, clashes and unrest adversely affected food security conditions in North Darfur, South Darfur, West Darfur, North Kordofan, South Kordofan, and Blue Nile states (ACAPS, December 2021; IOM, August 2021). Refugees in Rwanda were also displaced from their home countries by conflict and insecurity, largely from the Democratic Republic of the Congo and Burundi (UNHCR, January 2022).

* Weather extremes

Many parts of central and southern East Africa faced moderate to severe drought, in particular parts of Ethiopia, the arid and semi-arid (ASAL) regions of Kenya, Somalia and localized parts of Uganda. The failure of the Deyr rains in Somalia constituted the third consecutive below-average rainfall season since late 2020 and contributed to one of the worst Deyr harvests on record, as well as notably high cereal prices and excess livestock losses (FEWS NET & FSNAU, December 2021). Maize and sorghum prices in southern markets increased by 30–60 percent over the five-year average, nearing price levels last experienced during the 2016/2017 and 2010/2011 droughts (FEWS NET, October 2021).

FIG 2.9

Numbers of people in Crisis or worse (IPC Phase 3 or above) by key driver in 2021



Many food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country.

Source: FSIN.

Drought conditions in the ASAL areas of Kenya curbed food stocks in agropastoral areas amid high demand for maize, fuelling above-average prices for staple foods (IPC, September 2021). Drought also led to reductions in agricultural production across most Belg-producing areas of Ethiopia (FEWS NET, April 2021).

In other areas, above-average rainfall led to flooding in parts of the Sudan, Ethiopia and South Sudan. In Burundi, below-average rainfall and floods affected crop production between late 2020 and early 2021 (IPC, June 2021).

* Economic shocks, including COVID-19

COVID-19 containment measures aggravated macroeconomic crises, notably in Ethiopia, the Sudan and South Sudan. Food prices were exceptionally high in South Sudan and in the Sudan, reinforced by insufficient supplies and macroeconomic difficulties, including currency weakness, which drove price increases for imported staples. Prices were also higher year-on-year in Ethiopia, mainly due to macroeconomic challenges (FAO, September 2021).



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Flooding in South Sudan, as well as in the Sudan and Ethiopia, was identified as one of the drivers of acute food insecurity in 2021.

Displacement

 **17.1M** forcibly displaced people

Source: UNHCR and IOM, December 2021.

12.4M IDPs⁴
4.7M refugees and asylum seekers

There were over 18 million forcibly displaced people across nine East African countries in 2021 largely as a result of violence, conflict, political instability and rapid and slow-onset environmental events and disasters (UNHCR, 2021; IOM, 2021).

This represents a 29 percent increase in the region's displaced population relative to December 2020, when there were reportedly 9.5 million IDPs in five countries (as opposed to six in 2021) and 4.4 million refugees and asylum seekers in nine countries (FSIN & GNAFC, 2021). This increase can be largely attributed to conflict and weather extremes driving displacement in Ethiopia (see below), Somalia, South Sudan and the Sudan in 2021. Data from UNHCR and IOM showed a concerning food security and nutrition situation among refugees and IDPs in Ethiopia, Kenya, South Sudan, the Sudan and Uganda. With displacement often lasting for many years, it is a major development challenge as well as humanitarian crisis.

The region's major displacement crisis of 2021

Since the onset of the conflict in Tigray in November 2020, millions of Ethiopians have fled their homes. Between December 2020 and 2021, the number of IDPs nearly doubled to over 4.2 million, while around 1.5 million IDPs returned to their places of origin (IOM DTM, December 2021). By the end of 2021, over 821 000 Ethiopians were refugees in the Sudan, South Sudan, Somalia, Kenya and Djibouti, with the majority having fled their country in late 2020 (UNHCR, December 2021b). The desperate situation contributed to the massive increase in the number of people facing Crisis or worse (IPC Phase 3 or above) in Ethiopia in 2021.

⁴ This figure does not include an estimated 1.5 million IDP returnees in Ethiopia (IOM DTM, December 2021).

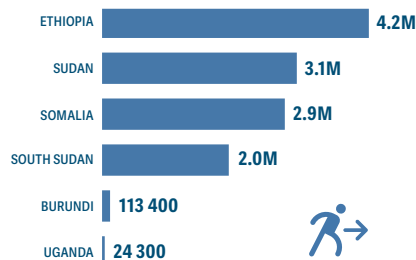
IDPs

In 2021, out of nearly 49 million IDPs in countries/territories affected by food crises, nearly 12.4 million were in six food crisis countries of East Africa. Over the past year, the numbers of IDPs have increased significantly in South Sudan and the Sudan – and nearly doubled in Ethiopia.

The damage caused by conflict and COVID-19 – collapsing economies, unemployment, rising food and fuel prices and reliance on humanitarian assistance – disproportionately affects IDPs. Many IDPs and refugees in the region have sought to meet their food needs by engaging in crop and livestock raising. However, in 2021, weather extremes, notably drought conditions in countries like Somalia, and shortages of inputs and land for livestock and crops adversely impacted IDPs' crop and livestock production, increasing dependence on markets to meet food needs (FSNAU-FEWS NET, September 2021; IOM DTM Ethiopia, December 2021).

In some IDP localities, rule of law is weak, social protection coverage and access to health services limited, and humanitarian access is problematic. IDPs often lack civil documentation, such as national ID cards and birth certificates, making it difficult for them to obtain work. In Somalia, food or cash to buy food was the most critical need, indicated by 61 percent of IDPs, followed by healthcare (59 percent) (REACH, 2021, cited in HNO 2022).

FIG 2.10
12.4M IDPs in six countries of East Africa



Source: IOM DTM, December 2021 and HNO 2022.

Refugees and asylum seekers

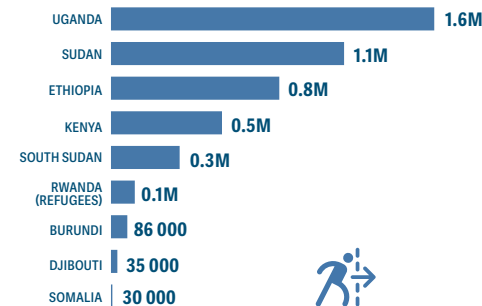
In 2021, nearly 4.7 million refugees and asylum seekers were hosted in nine food-crisis countries of East Africa, with the highest numbers in Uganda, the Sudan and Ethiopia.

Refugees living in camps in all nine countries were largely dependent on humanitarian food assistance, as were IDP communities. In early 2021, funding shortfalls forced WFP to slash its monthly assistance for refugees by 40 percent in Kenya, while all other countries in the region were affected by cuts to food assistance (UNHCR, March 2021).

Refugees in designated camps in Kenya and the Sudan are not legally allowed to work and face movement restrictions, resulting in lack of access to land and employment (UNHCR, 2021 and September 2021). COVID-19 severely hampered their ability to earn an income as many businesses in and around settlements closed. Access to health facilities was inhibited by fear of contracting COVID-19 and the unavailability of medical staff in camps.

Many areas or camps have limited access to basic services, including food, shelter, safe water and improved sanitation, heightening the risk of frequent outbreaks of infectious disease, which weakened health systems cannot treat, prevent or control.

FIG 2.11
4.7 million refugees/asylum seekers hosted in nine countries



Sources: UNHCR, December 2021.

Nutrition challenges in East Africa

East Africa is facing a devastating child wasting crisis. According to various 2021 analyses, 10.2 million children under 5 years were wasted in seven countries, with the highest numbers in Ethiopia (3.7 million), the Sudan (3.4 million), South Sudan (1.4 million) and Somalia (1.28 million), followed by Kenya, Uganda and Burundi (IPC AMN; FSNAU and FEWS NET; Global Nutrition Cluster).

In Ethiopia, 1 million children were estimated to be in urgent need of treatment for severe wasting, most in drought-affected Oromia, Somali, SNNP and Sidama, while Tigray saw a fourfold increase in the number of children admitted for treatment (UNICEF, July 2021).

According to the latest available national data from 2020 and 2021, the prevalence of child wasting was above 15 percent, which is considered 'very high' by WHO thresholds, in parts of Somalia, South Sudan and the Sudan. In Ethiopia's Tigray region, UNICEF estimated that 17.9 percent of children were wasted, 2.3 percent of them severely so, following Mid-Upper Arm Circumference (MUAC) screenings of more than 435 000 children (UNICEF, July 2021).

An estimated 14.1 million stunted children under 5 years across the eight IGAD countries – almost one in every three children – will likely not reach their full growth and developmental potential because of the irreversible physical and cognitive damage caused by persistent nutritional deprivations at an early age. In five countries of the region – Burundi, Djibouti, Ethiopia, South Sudan and the Sudan – the prevalence of child stunting exceeded the 'very high' 30 percent threshold, with the highest levels in Burundi at 54 percent (Global Nutrition Report, 2021).

Drivers of nutrition challenges in the region

Health services and household environment

Conflict, in tandem with economic crises in Ethiopia, Somalia, South Sudan and the Sudan, has further weakened essential public services that were already limited prior to conflict, including water, sanitation, health and nutrition services. Lack of access to safe water and poor sanitation has compounding effects on public health and leads to diseases that predispose children to malnutrition.

The malnutrition crisis in northern Ethiopia is taking place amid extensive, systematic damage to the food, health, nutrition, water and sanitation systems and services that families depend on for their survival. In addition, there is a lack of supplies of the therapeutic foods needed to treat severe acute malnutrition while health facilities had no electricity, antibiotic supplies had run out and children had not been vaccinated for months (UNICEF, July 2021).

Flooding in South Sudan and drought in parts of Ethiopia, Kenya, Somalia and Uganda increased the consumption of unsafe water and poor hygiene and sanitation practices, which in turn led to higher disease outbreaks, especially upper respiratory tract infections and diarrhoea. Child immunization rates are low in many areas, such as Kenya's arid and semi-arid lands (ASALs). The risk of disease outbreaks is particularly high in overcrowded, unsanitary sites hosting displaced families.

COVID-19-related movement restrictions and a reduction in the supply and availability of medicines due to logistical constraints also disrupted access to services including the early detection and treatment of wasting, support for breastfeeding and other recommended feeding and care practices for young children. Nutrition clinics and services faced commodity stock-outs, and child vaccination campaigns were interrupted.

Food security and access to healthy diets

Since the onset of COVID-19, the affordability of a healthy diet and dietary diversity, which was already alarmingly low across the region, has declined, along with consumption of milk and eggs, largely due to weakening of purchasing power as household incomes dropped and food prices increased (UNICEF, February 2021). For example, in Ethiopia, Somalia and South Sudan, just 12–14 percent of children aged 6–23 months received the minimum dietary diversity (DHS, 2020). Before the COVID-19 pandemic, 85 percent of people in East Africa could not afford a healthy diet, which is a risk factor for malnutrition and a key nutrition challenge (SOFI, July 2021).

Care and feeding practices

In some areas – such as parts of Kenya's ASALs – malnutrition area classifications are worse than acute food insecurity classifications, suggesting that non-food security related factors play a role as well as poor diet quality, such as lack of a variety/diversity of foods within and across food groups and insufficient intake of nutrients or food groups compared with requirements.

When women spend most of their waking hours working – mainly in the informal sector – to provide essential needs for their families, they may compromise caring and feeding practices of themselves and their children, which may contribute to deterioration of their own nutritional status and that of their children (Sudan HNO 2022, December 2021). Exclusive breastfeeding rates for infants under 6 months are particularly low in Somalia (15.6 percent) (MoH, 2022).

Regional forecast, 2022

The combined impacts of weather extremes – including regional drought – conflict-related displacement, and rising food prices will drive high levels of acute food insecurity in the region in 2022. Significant deteriorations are expected in Somalia and South Sudan, with both countries expected to have populations in Catastrophe (IPC Phase 5) in 2022.

39.79–41.29M people in 7 countries¹ in East Africa were forecast to be in Crisis or worse (IPC Phase 3 or above) in 2022

The aggregate forecast number includes FEWS NET range estimates for Ethiopia and Uganda. FEWS NET does not provide a breakdown by phase classification, therefore estimates for Ethiopia and Uganda are not included in the headline figures for IPC Phases 2–5 listed above.

168 100 people were forecast to be in Catastrophe (IPC Phase 5) in **Somalia and South Sudan** in 2022

6.71M people in 4 countries were forecast to be in Emergency (IPC Phase 4) in 2022

17.40M people in 5 countries were forecast to be in Crisis (IPC Phase 3) in 2022

30.99M people in 5 countries were forecast to be in Stressed (IPC Phase 2) in 2022

Source: FSIN, using IPC and FEWS NET data.

¹ Forecasts were not available for Djibouti and Rwanda (refugees) at the time of publication.

Rising populations in Crisis or worse (IPC Phase 3 or above) were expected in Kenya, Somalia and South Sudan. In Ethiopia, despite a projected decline in the number of people in Crisis or worse (IPC Phase 3 or above) or equivalent, the food security situation was expected to remain severe due to the continued impacts of conflict, macroeconomic difficulties and drought.

The damaging effects of drought in Kenya, Somalia and Uganda could continue to drive high numbers of people in Crisis or worse (IPC Phase 3 or above) at least through mid-2022. This situation could be aggravated by prospects of a below-average March–May rainy season, resulting in an additional consecutive poor season.

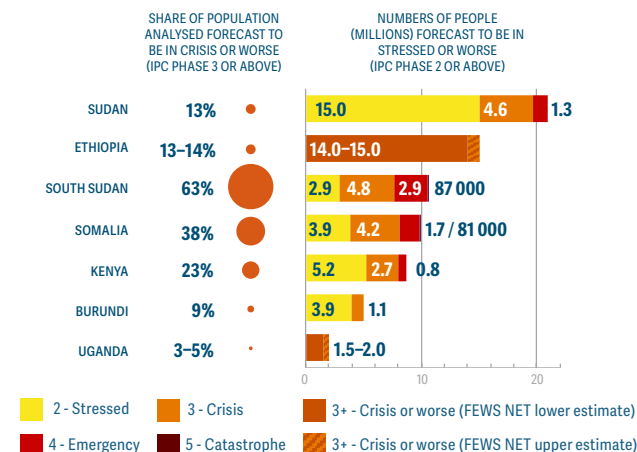
In South Sudan, the population in Crisis or worse (IPC Phase 3 or above) was projected to rise by eight percent compared to the 2021 peak to 7.74 million people by April–July 2022, or 63 percent of the analysed population, due to insecurity and displacement, flooding, consecutive poor harvests and exceptionally high food prices. Around 2.9 million people were projected to face Emergency (IPC Phase 4) in April–July 2022, up from around 2.4 million during the same period in 2021. Around 87 000 people were forecast to be in Catastrophe (IPC Phase 5) in Jonglei state (Fangak, Canal/Pigi and Ayod counties), Greater Pibor Administrative Area (Pibor county), Lakes state (Cueibet and Rumbek North counties), and in Unity State (Leer and Mayendit counties) (IPC, April 2022).

In Somalia, the cumulative impacts of multiple consecutive seasons of below-average rains, conflict/insecurity and increasing food prices were expected to lead to a significant deterioration in food security outcomes. Compared to the 2021 peak period (October–December), the population in Crisis or worse (IPC Phase 3 or above) was forecast to increase by 74 percent by April–June 2022 to 6.04 million people (IPC, April 2022).

Within this, an estimated 81 100 people were projected to face Catastrophe (IPC Phase 5) in Bakool, Bay, Galgaduud, Hiraan, Mudug and Nugaal regions in April–June 2022 (IPC, April 2022). The IPC projection assumed that the April–June Gu season would perform poorly, exacerbating previous consecutive seasons of below-average rains. Although area level Famine was

FIG 2.12

Forecasts for numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above)



Source: FSIN, using IPC and FEWS NET data.

not projected to occur during this period, if conditions are even worse than expected, there is a Risk of Famine occurring in three livelihood zones⁵ and in IDP settlements in Mogadishu, Baidoa and Dhusamareb. This Risk of Famine was based on the assumption of a worse performance of the April–June Gu season than the most-likely scenario, further exacerbating already severe drought conditions that would likely lead to failed local harvests, driving substantial food price increases. Persistent regional drought conditions and rising global food prices and/or an increase in conflict-related displacements or limited humanitarian access to areas most in need of assistance could contribute to the Risk of Famine (IPC, April 2022; see country brief for more information).

continued over...

⁵ Hawd Pastoral livelihood zone of Central and Hiran, Addun Pastoral livelihood zone of Northeast and Central and Bay Bakool Low Potential Agro Pastoral livelihood zone.

Regional forecast, 2022 *continued*

continued from previous page...

The number of people in Crisis or worse (IPC Phase 3 or above) is expected to remain high in Ethiopia at 14–15 million people in July–September 2022 due to the effects of conflict, macroeconomic challenges and drought. FEWS NET based this projection on the assumption that there would be below-average rainfall in southeastern Ethiopia. The country is projected to remain one of the world's most severe food crises in 2022.

In Kenya, during the first half of 2022, acute food insecurity levels are forecast to rise, driven by the impacts of three consecutive below-average rainy seasons and high food prices. Although the IPC forecast assumed that the country would receive average or above-average rainfall, the rainfall situation has changed, following a delayed start to the March–May long rains season (FEWS NET, March 2022).

In the Sudan, acute food insecurity was expected to seasonally decline during the post-harvest period between October 2021 and February 2022. However, this estimate was conducted in March 2021 under the assumption of a good performance of the 2021 cropping season. The current severity and prevalence of acute food insecurity are likely to be higher due to the below-average cereal production obtained in 2021, additionally, the economic repercussions of the October 2021 coup and continued macroeconomic instability will continue to adversely affect food security outcomes (see country brief).

Drought in the Horn of Africa

Beyond June, food security outcomes in 2022 across drought-affected areas of the Horn of Africa, particularly in Ethiopia, Kenya and Somalia, will depend on the performance of the March–May Gu/long rains season. As of April 2022, the start of the season has been poor, and forecasts indicate that continued below-average rains are likely. Should an unprecedented fourth consecutive below-average rainy season materialize with an absence of scaled-up humanitarian response, food security outcomes would likely deteriorate further later in the year.

Potential implications of the war in Ukraine for East Africa

Given the importance of Ukraine and the Russian Federation in providing global wheat supplies, ongoing war in Ukraine and the economic impact on the Russian Federation may lead to worsening regional food security outcomes compared to current IPC projections through mid-2022.

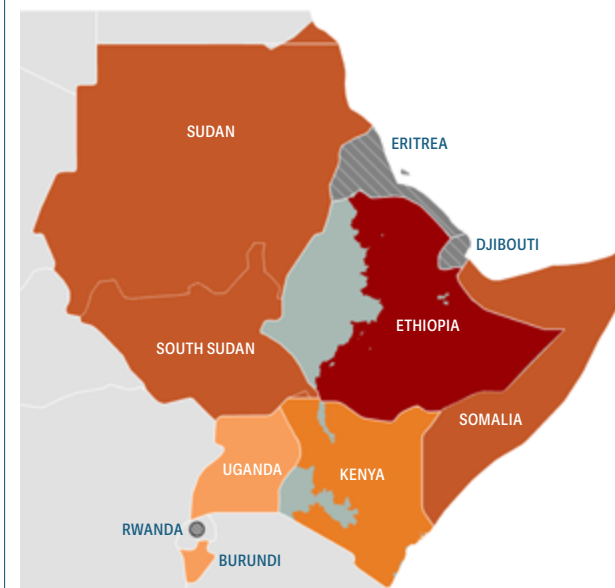
The East Africa region is highly dependent on wheat and wheat products, which comprise one-third of the average national cereal consumption. Some 84 percent of its wheat and wheat products are imported. In February 2022, global wheat prices rose to levels comparable to those experienced during the 2008 global financial crisis, as the war and related supply chain disruptions exacerbated already high global prices.

The East Africa region obtains 90 percent of its wheat imports from the Russian Federation (72 percent) and Ukraine (18 percent), therefore countries in the region remain heavily exposed to fluctuations in supply levels from these countries. For example, the Sudan obtains 93 percent of national wheat imports on average from the Russian Federation and Ukraine. It could face difficulties finding alternative wheat sources and/or significant domestic wheat price increases.

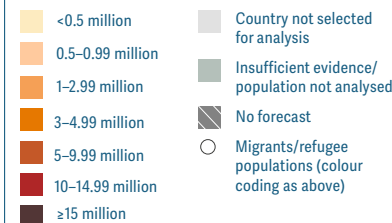
Given the Russian Federation is a major energy exporter and the largest fertiliser exporter in the world, economic impacts are also expected to cause significant disruptions to global energy and fertiliser markets. These factors could adversely affect agricultural production or elevate production costs, contributing to further domestic food price increases (WFP, March 2022).

MAP 24

Acute food insecurity estimates in East Africa, in 2022



Numbers of people in Crisis or worse (IPC Phase 3 or above) or equivalent (ranges)



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

Source: FSIN, GRFC 2022.

West Africa and the Sahel

Benin | Burkina Faso | Cameroon | Chad | Côte d'Ivoire | Gambia | Guinea | Guinea-Bissau | Liberia | Libya | Mali | Mauritania | Niger | Nigeria (21 states and FCT) | Senegal | Sierra Leone

Acute food insecurity overview 2021


 **30.4M people**

in 16 countries in West Africa and the Sahel were in Crisis or worse (CH Phase 3 or above) or equivalent in 2021

16% of the GRFC global number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent were in 16 countries in West Africa and the Sahel in 2021.

 **1.5M people in 10¹ countries** were in Emergency (CH Phase 4) in 2021

 **28.4M people in 15 countries** were in Crisis (CH Phase 3) in 2021

 **74.3M people in 15 countries²** were in Stressed (CH Phase 2) in 2021

Source: FSIN, using CH data.

Number of people in Crisis or worse (CH Phase 3 or above) by regional organisation

25M people in 12 ECOWAS member states.

8.6M people in 7 UEMOA member states.

4.6M people in Liptako-Gourma Authority subnational areas.

5M people in Lake Chad Basin subnational area.³

See Technical Notes for member states of the above organisations/areas.

1 No populations were in Emergency (CH Phase 4) during the 2021 peak period in Benin, Côte d'Ivoire, Gambia, Guinea, and Guinea-Bissau.

2 Libya is not included in the Phases 2–4 breakdown given that the estimate is based on WFP CARI.

3 This number does not correspond to the 2021 peak period identified for the Niger and Nigeria at the national level.

Out of the 30.4 million people in Crisis or worse (CH Phase 3 or above) in 16 countries of West Africa and the Sahel in 2021, 12.9 million were in Nigeria (21 states and FCT).

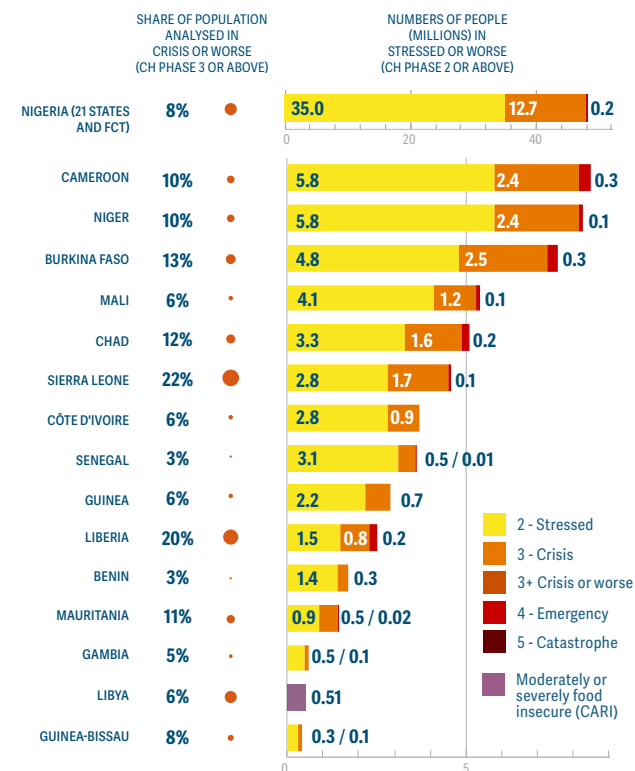
Around 1.5 million people were in Emergency (CH Phase 4) in ten countries with some of the highest numbers in areas of northern Burkina Faso (344 000) during the June–August 2021 lean season and Cameroon (261 000) in March–May 2021. However, no populations were in Catastrophe (CH Phase 5) during 2021 in this region. In Burkina Faso, a significant share of vulnerable households – including IDPs – reported consuming only one meal per day and some reported having gone entire days without eating (CH, March 2021; FEWS NET, October 2021).

In 2021, the number of people facing Crisis or worse (CH Phase 3 or above) reached a six-year high in Nigeria, the Niger, Chad, Sierra Leone, Benin, Guinea, Liberia, and Côte d'Ivoire. During the 2021 peak period for Nigeria in October–December, when analysis coverage was expanded to 21 states and the FCT, around 229 000 people were in Emergency (CH Phase 4). However, during the June–August 2021 lean season in 16 states and the FCT in Nigeria, the number of people in Emergency (CH Phase 4) reached nearly 798 500. Another 28.4 million people in 15 countries were in Crisis (CH Phase 3) during their respective peak periods in 2021. The largest numbers were in Nigeria (12.7 million people), accounting for 45 percent of the total population in this phase in West Africa and the Sahel. Other significant populations in Crisis (CH Phase 3) were in Burkina Faso (2.5 million), Cameroon (2.4 million) and the Niger (2.4 million).

Of the 74.3 million people in Stressed (CH Phase 2) in West Africa and the Sahel in 2021, Nigeria accounted for nearly half (47 percent) of the population, while large numbers of people in this phase were also in Cameroon (5.9 million), the Niger (5.8 million), and Burkina Faso (4.8 million).

FIG 2.13

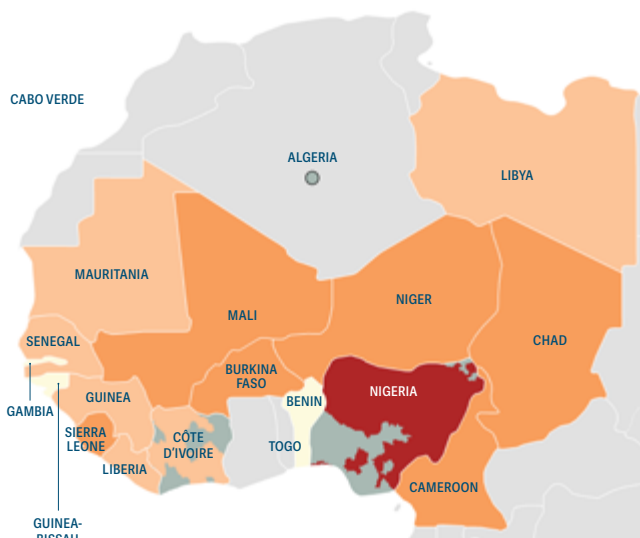
Numbers of people in Stressed or worse (CH Phase 2 or above) and share of population analysed in Crisis or worse (CH Phase 3 or above)



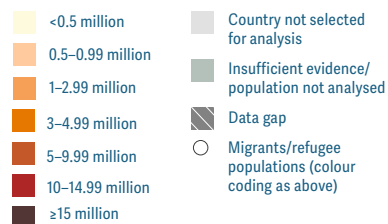
Source: CH; WFP CARI.

Acute food insecurity overview 2021

Acute food insecurity estimates in West Africa and the Sahel, in 2021



Numbers of people in Crisis or worse (CH Phase 3 or above) or equivalent (ranges)



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

Source: FSIN, GRFC 2022.

Acute food insecurity trends

In 2021, the number of people facing Crisis or worse (CH Phase 3 or above) in West Africa and the Sahel reached the highest for the region in the GRFC's six-year existence, with an additional 5.6 million people in these phases compared with 2020.

The largest increases were reported in northern Nigeria, with an additional 3.7 million people by October–December 2021 compared with the same period in 2020. This considerable increase can mainly be attributed to persistent conflict in the northeast and growing insecurity in the northwestern and north-central states, as well as to increased analysis coverage. When considering the same 15 states and FCT covered by CH analyses, the number of people increased by 30 percent between the 2020 peak in October–December and the June–August 2021 lean season.

In the Niger, the number of people in Crisis or worse (CH Phase 3 or above) increased by 566 000 people between June–August 2020 and October–December 2021. This deterioration can largely be attributed to a 40 percent decline in cereal production compared to the five-year average, which was caused by unfavourable weather conditions and worsening insecurity.

In Mali, the population facing Crisis or worse (CH Phase 3 or above) remained near the high levels of June–August 2020 at around 1.3 million people. In Cameroon, at 2.6 million in March–May 2021, the population in Crisis or worse (CH Phase 3 or above) was almost as high as during the last three months of 2020 when 2.7 million people were in these phases, the largest number recorded by the CH in Cameroon.

Significant increases in the population in Crisis or worse (CH Phase 3 or above) were also reported in Chad (by 760 000 people), and in coastal countries including Liberia (by 490 000 people) and Sierra Leone (by 458 000 people) largely due to price rises. In Côte d'Ivoire, the rise in the number of people in Crisis or worse (CH Phase 3 or above) from around 229 550 during the 2020 peak to over 944 000 in October–December 2021 can be accounted for in part by an increase in the population analysed.

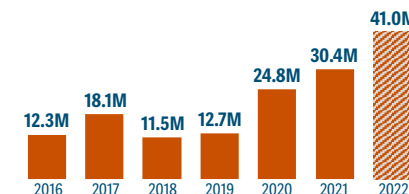
Six-year trends, 2016–2021

The population facing Crisis or worse (CH Phase 3 or above) in the region doubled between 2019 and 2020 – from around 12.7 million people to 24.8 million – due to intensified conflict and insecurity, the socioeconomic shocks resulting from COVID-19 restrictions, widespread floods and prolonged drought in some countries.

Looking at the evolution of acute food insecurity in the region since 2016, the number of people in Crisis or worse (CH Phase 3 or above) increased 11-fold between 2016 and 2021 in the triangle border region of Mali, the Niger and Burkina Faso (Liptako-Gourma), which has experienced increasing conflict and violence, notably in Sahel and Est regions in Burkina Faso, Mopti and Gao regions in Mali, and Tillabéri and Tahoua regions in the Niger. In 2021, 4.6 million people were in Crisis or worse (CH Phase 3 or above) in these regions compared to 0.4 million in 2016. The biggest deteriorations were between 2016 and 2017, and 2019 and 2020.

In the Lake Chad Basin area, where the protracted Boko Haram conflict in northeastern Nigeria has spilled over into border areas of Cameroon, Chad and the Niger, the number of people in Crisis or worse (CH Phase 3 or worse) reached the highest point in 2017 (7 million). In 2021, it reached 5 million, but it is projected to increase to 5.4 million by June–August 2022.

FIG 2.14 Numbers of people in Crisis or worse (CH Phase 3 or above) in West Africa and the Sahel, 2016–2022



The aggregate figures for 2020 and 2021 include Libya.

Source: GRFC 2017–2022.

Drivers of food crises across the region in 2021

✱ Conflict/insecurity

Conflict and insecurity remained the main driver of acute food insecurity in the region in 2021, particularly for Burkina Faso, Cameroon, Chad, Libya, Mali, the Niger and Nigeria. This trend stems in particular from the persistence of the two regional crises in the Lake Chad Basin and Liptako-Gourma areas, which triggered large-scale internal and cross-border population displacement and severe disruption to livelihoods in 2021, particularly regarding agriculture, pastoralism, markets and trade. Humanitarian access remained highly constrained in these areas during the year. Insecurity also remained a concern in 2021 in Cameroon (northwestern and southwestern regions), Chad (Tibesti) and north-central and northwestern states of Nigeria, and extended to previously unaffected areas in southern Nigeria, southern Burkina Faso, southern Mali and along the border with Benin and Côte d'Ivoire (RPCA, June 2021; RPCA December 2021; FEWS NET, June 2021).

🏠 Economic shocks, including COVID-19

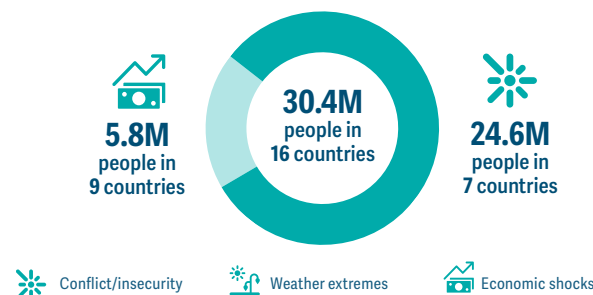
Inflation continued to be a major driver of acute food insecurity in the region in 2021, notably in the Gambia, Guinea, Liberia, Sierra Leone and Nigeria (RPCA, April 2021; RPCA, June 2021). Food price increases were partly attributed to higher transportation costs in the context of COVID-19 containment restrictions, and from rising prices in international commodity markets (RPCA, December 2021). COVID-19 containment measures continued to curb income-generating activities, while the economic slowdown reduced remittances in 2021, further constraining household purchasing power, especially for the rural poor, IDPs and refugees (FAO-GIEWS, December 2021).

☀️ Weather extremes

During the 2020-2021 agricultural season, cereal production across the region had mixed outcomes due to localized dry spells and flooding, which particularly affected areas of Mali, the Niger, Nigeria and Senegal (RPCA, April 2021; FAO-GIEWS, March 2021). During the 2021-2022 agricultural season, prolonged dry spells and erratic rainfall adversely affected crop yields as well

FIG 2.15

Numbers of people in Crisis or worse (CH Phase 3 or above) by key driver in 2021



Note: Many food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

Weather extremes affected (almost) all countries of the region in 2021, but were not considered a primary driver of food crisis in any.

Source: FSIN, GRFC 2022.

as fodder availability across the Sahel, in Mauritania, the Niger, areas in northern Senegal, Mali and Chad (RPCA, December 2021; FAO-GIEWS, March 2021; WFP, October 2021). Localized floods also caused disruption to livelihoods and damage to standing crops in the Gambia, southern Benin, south and northeastern Chad, parts of the Niger and northeastern Nigeria (FAO-GIEWS, September 2021).

The 2021/2022 regional cereal production is 2.7 percent higher than the 5-year average, though with significant decreases across the Sahel countries (-11 percent) (FAO-GIEWS, March 2022). Compared to the 2020/2021 cereal output, it represents a 2 percent decrease at the regional level. The most significant decreases year-on-year were reported in the Niger (-39 percent), Mali (-15 percent) and Burkina Faso (-10 percent). Cabo Verde reported a fifth consecutive year with no significant agricultural production (RPCA, March 2022).



Multiple crises have compounded acute food insecurity in West Africa and the Sahel, where countries are vulnerable to the adverse effects of climate change and cross-border security threats, and inter-community conflicts are intensifying.

Displacement

 **7.6M** forcibly displaced people

6.0M IDPs
1.6M refugees and asylum seekers

Source: UNHCR, IOM and Government of Burkina Faso, December 2021; HNO Niger, 2022.

Around 7.6 million people in West Africa and the Sahel were forcibly displaced as of December 2021, of whom 98 percent were located across six countries affected by conflict and insecurity – Nigeria, Burkina Faso, Cameroon, Chad, the Niger and Mali.

The majority of the internally displaced people (63 percent) in the region are in Burkina Faso and northern Nigeria. IDPs in areas inaccessible to humanitarian aid in northeastern Nigeria are generally the most vulnerable, with extremely high rates of acute malnutrition and mortality (CH, December 2021). In some localities of Burkina Faso (Sahel), 60 percent of IDP and host community households reported eating only one meal per day, and some of them had to go entire days without eating (FEWS NET, October 2021). Large internally displaced populations were also registered in Cameroon, Chad, Mali, the Niger and Libya.

The region also hosted over 1.6 million refugees and asylum-seekers – nearly 80 percent of them in Chad, Cameroon and Nigeria. Most originated from the Central African Republic (30 percent),

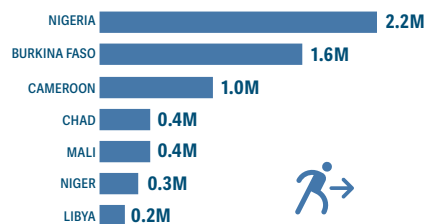
the Sudan (25 percent), Nigeria (21 percent) and Mali (10 percent) (UNHCR, December 2021) – all of them characterized by protracted crises and affected by conflict and insecurity.

IDPs

In 2021, out of nearly 45 million internally displaced people in countries/territories affected by food crises, nearly 6 million IDPs were in seven countries of West Africa and the Sahel. Over the past year, the number of IDPs has increased in Burkina Faso and northern Nigeria by more than 40 and 20 percent, respectively.

FIG 2.16

Nearly 6.0M IDPs in seven countries



Figures are only provided for IDPs and do not include IDP returnees, of which there are around 2.0 million in Nigeria.

Source: UNHCR, IOM and Government of Burkina Faso, December 2021; HNO Niger, 2022.

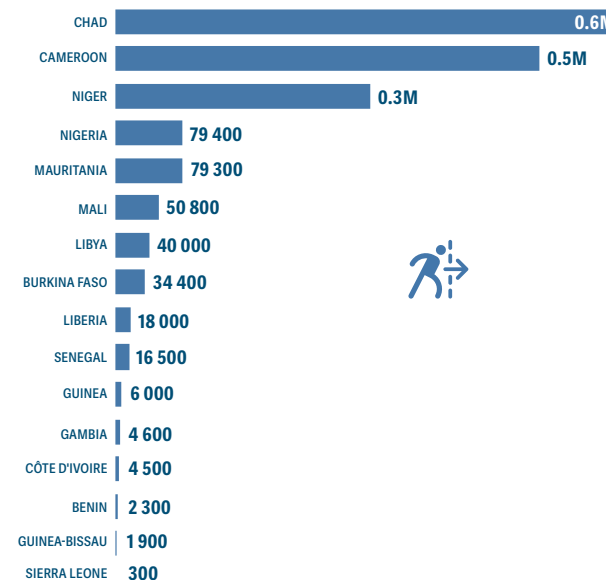
Refugees and asylum seekers

In 2021, out of around 21 million refugees and 4 million asylum seekers globally, over 1.6 million were hosted in 16 countries of West Africa and the Sahel where a food crisis has been identified by the GRFC, with the highest numbers in Chad, Cameroon and the Niger.

Limited access to arable land and livelihood opportunities constrains refugees' ability to be self-sufficient. Refugees in Chad, Cameroon, the Niger, Mauritania, Nigeria, Mali, and Burkina Faso remain reliant on humanitarian food assistance to meet their food needs. Refugees in Chad and Cameroon have faced critical cuts to food assistance, which has exacerbated the impacts of acute food insecurity drivers and contributed to worsening food security and nutrition outcomes (UNHCR, 2021).

FIG 2.17

Over 1.6 million refugees/asylum seekers hosted in 16 countries



Sources: UNHCR, December 2021.

The region's major displacement crisis of 2021

The Liptako-Gourma area, the Central Sahel and Lake Chad Basin crises are at the origin of most population displacements in West Africa and the Sahel. As of December 2021, around 3 million IDPs and 270 000 refugees and asylum seekers were registered across the region, originating from the conflict-affected areas of the Lake Chad Basin – in northeastern Nigeria, the Niger's Diffa region, Cameroon's Far-North region and Chad's Lac region. In addition, 2.1 million IDPs and around 113 000 refugees were displaced across Central Sahel countries because of conflict and insecurity in the Liptako-Gourma cross-border areas.

The crisis in the Lake Chad Basin is the result of a complex combination of factors, including an armed conflict involving non-state armed groups, extreme levels of poverty, persistent lack of development, and weather extremes, which have led to significant population displacements. A July 2021 IOM DTM study found that the depletion of water in the Lake Chad Basin – which affects livestock, crop and fish production – has increased environmental displacement and contributed to acute food insecurity and nutritional challenges (IOM, July 2021).

Key nutrition challenges

In West Africa and the Sahel, over 7 million children under 5 years old in six countries were wasted. The highest numbers were in Chad (1.9 million), Nigeria (1.74 million) the Niger (1.6 million), Mali (1.2 million) and Burkina Faso (0.6 million). Within this, over 0.4 million children in Chad were severely wasted, as well as over 0.3 million children in Mali and 0.6 million children in Nigeria (IPC AMN 2021, GNC Mid-year Review).

According to the most recently available national-level data from 2020–early 2022, child wasting levels during periods of 2021 were above the 10 percent ‘high’ threshold in Chad, Libya and Mauritania and close to the threshold in the Niger, Mali and Guinea (Global Nutrition Report 2021).

Child stunting was above the very high (≥ 30 percent) WHO threshold in Benin, Chad, Guinea, Libya, the Niger and Nigeria and very close to it in Cameroon, Guinea-Bissau, Liberia, Mali and Sierra Leone (Global Nutrition Report 2021). However, these estimates are often outdated, and hide extremely high localized levels of wasting and stunting.

The 2022 nutritional situation is a grave concern in the region, particularly in the Sahelian countries such as Burkina Faso, Mali, Mauritania, the Niger and Chad where an estimated six million children under 5 are likely to suffer from acute malnutrition in 2022. Nutritional analyses conducted across the Sahel and in Nigeria point to a Serious or worse (IPC AMN Phase 3 or above) situation in several locations in Chad, Burkina Faso, Mali and Nigeria (WFP, March 2022).

Existing nutritional surveillance and monitoring systems do not allow timely identification and follow up on malnutrition cases.

Drivers of nutrition challenges in the region

Food security and access to healthy diets

High levels of acute food insecurity were a major contributing factor to the deteriorating nutritional status of children and women in Burkina Faso, Cameroon, Chad, Mali, the Niger and Nigeria, where conflicts and insecurity have triggered mass population displacements, disrupting access to food sources, livelihoods and essential services, decreasing production, pushing up food prices and often hindering the distribution of humanitarian food assistance (IPC AMN, various, 2021). In areas hosting IDPs, such as Far-North, Littoral and West regions of Cameroon, the nutrition situation was concerning due to increased demand on limited food stocks (CILSS-CH, March 2021).

Health services and household environment

The multiple conflicts across the region – in addition to the economic crises and the impacts of COVID-19 – are preventing a rising number of households and communities from accessing basic social services, healthcare, sanitation, safe drinking water and hygiene, particularly those hosting IDPs. Millions of people in the Central Sahel have no access to medical care with health centres shut while most of the ones still open are not fully functional (OCHA, April 2021). A high prevalence of childhood diseases (particularly malaria, diarrhoea and acute respiratory infections) and a resurgence of measles outbreaks in Côte d’Ivoire, Mali and Nigeria are also driving the high prevalence of child malnutrition (CDC, March 2022).

Care and feeding practices

Besides lack of access to healthy diets, cultural taboos relating to food choices also underlie poor food consumption patterns, inadequate child-feeding practices and generally low breastfeeding rates. The percentage of children aged 6–23 months who are fed the minimum acceptable diet (MAD) is as low as 9 percent in Chad, 10.5 percent in Mali, and 18 percent in Nigeria (IPC AMN, April 2021, SMART 2021, UNICEF, 2022). In four out of eight regions in the Niger, fewer than a quarter of children receive the MAD, reaching just 3.6 percent in Dosso (SMART, 2021).

The lack of adequate childcare for orphaned, abandoned and separated children is a major contributor to acute malnutrition (Nigeria HNO 2022, February 2022).


Anaemia among women of reproductive age is a public health concern in the region, with the prevalence above 40 percent, except in Libya (30 percent) and in Côte d’Ivoire, where no data were available. The situation is particularly poor in Benin, Mali and Nigeria where more than 55 percent of women are anaemic (Global Nutrition Report 2021).

Regional forecast, 2022


West Africa and the Sahel is facing unprecedented levels of acute food insecurity in 2022 according to the CH, driven by persistent insecurity and related population displacements, the impact of weather extremes, disrupted food systems, limited food production, barriers to regional trade and the socioeconomic fallout from the pandemic.

 **40.97M people**

in 15 countries¹ in West Africa and the Sahel were forecast to be in Crisis or worse (CH Phase 3 or above) in 2022

 **2.93M people in 13 countries** were forecast to be in Emergency (CH Phase 4) in 2022

 **38.04M people in 15 countries** were forecast to be in Crisis (CH Phase 3) in 2022

 **87.69M people in 15 countries** were forecast to be in Stressed (CH Phase 2) in 2022

Although food security data was not available in 2021 for Cabo Verde, 2022 forecast figures are available.

Source: FSIN, using CH data.

In 2022, the number of people in Crisis or worse (CH Phase 3 or above) is projected to reach its highest point in the six-year history of the GRFC, surpassing the previous high levels recorded by the CH in 2020 and in 2021 largely as a result of protracted conflict and insecurity, dry spells and erratic rainfall and burgeoning food prices (CH, March 2022).

Recent socioeconomic shocks, extreme weather events and the impacts of COVID-19, the atypical increase of prices of basic food commodities and the consequences of the conflict in Ukraine are all exacerbating the food and nutrition situation. These converging and compounding shocks could cripple gains and lead to further cascading humanitarian needs (FAO, April 2022).

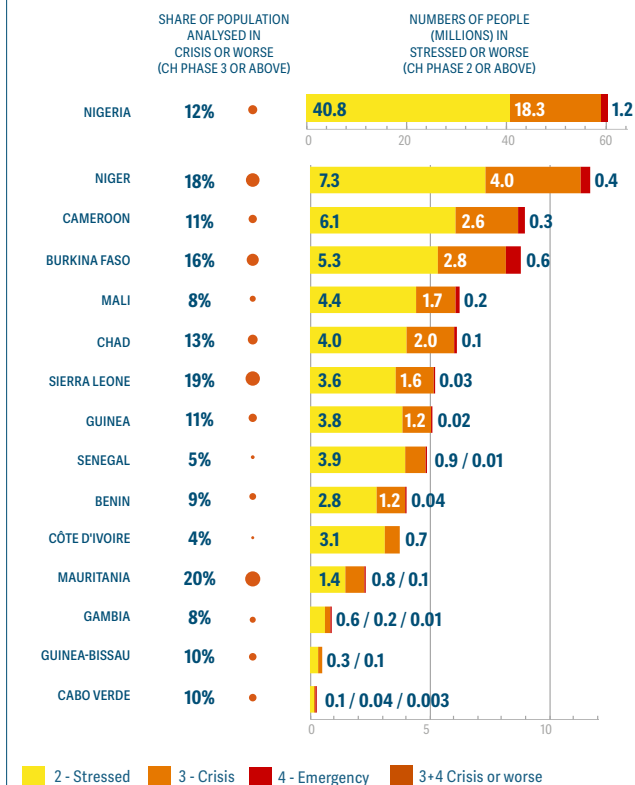
Acute food insecurity in the region is stretching beyond the Liptako-Gourma and Lake Chad region to hit coastal countries like Benin and Sierra Leone (FAO, April 2022).

Based on the highest projection estimates from March–May and June–August 2022 for 15 countries with available data, the number of people in these phases will rise by 41 percent relative to the 2021 peak figure. This significant increase is projected as a result of limited food availability, resulting from production shortfalls, while strong demand will support high food prices. Prices are also projected to remain high due to market disruptions in conflict-affected countries, high transportation costs, rising international price of some commodities, and currency depreciation and high inflation rates in non-franc economies (FAO-GIEWS, February 2022). High and increasing food prices were reported in all countries of the region as of March 2022 (RPCA, March 2022).

continued over...

FIG 2.18

Forecast for numbers of people in Stressed or worse (CH Phase 2 or above) and share of population analysed in Crisis or worse (CH Phase 3 or above) in 2022



Source: CH.

¹ Forecasts were not available for Libya and Liberia at the time of publication.

Regional forecast, 2022 *continued*

continued from previous page...

Major deteriorations forecast in some countries

The most significant increases in the number of people in Crisis or worse (CH Phase 3 or above) are expected in Nigeria (6.5 million additional people), due to the impacts of persistent conflict, which is expected to continue displacing significant populations from their homes and livelihoods.

In the Niger, an additional 1.8 million people are expected to face Crisis or worse (CH phase 3 or above) during the 2022 lean season, as conflict, trade disruptions, low cereal stocks from 2021 and high food prices contribute to worsening acute food insecurity.

In Benin, the number of people in Crisis or worse (CH Phase 3 or above) is projected to increase by 333 percent relative to the 2021 peak to over 1.2 million people. This dramatic increase is expected due to deteriorating food security conditions. Increased geographical coverage in 2022 also accounts for rising numbers.

Additional increases in the number of people in Crisis or worse (CH Phase 3 or above) are projected in Burkina Faso (586 000 people), Guinea (536 000), Mali (534 000), Mauritania (395 000), Senegal (393 000), Chad (320 000), Cameroon (240 000) as well as the Gambia (93 000).

During the lean season, in June–August 2022, Emergency (CH Phase 4) levels of acute food insecurity are projected across five areas of Burkina Faso, and for the first time in the history of CH, in two areas of the Niger. In northeast Nigeria, Gubio, Mobbar and Abadam LGAs are forecast to be in Emergency (CH Phase 4).

Potential implications of the war in Ukraine for West Africa and the Sahel in 2022

The war in Ukraine is violently disrupting the global trade of food, fertilisers and oil products, with the already high prices of agricultural products reaching record highs not seen in West Africa and the Sahel since 2011.

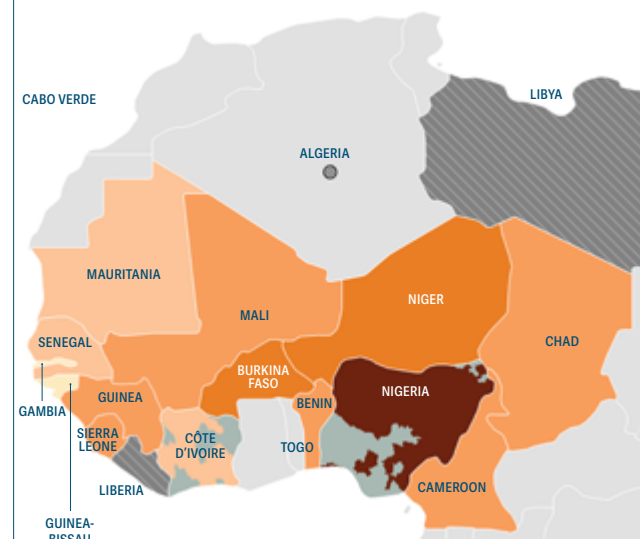
Unlike East Africa and Eurasia, countries in West Africa and the Sahel are less dependent on Ukraine or the Russian Federation for key imports of food, fuel or fertiliser. However, these countries remain vulnerable to potential rises in global commodity prices (IFPRI, April 2022).

Against the backdrop of already elevated regional food prices, in March, staple food prices experienced a 40 percent increase relative to the five-year average in Burkina Faso, Liberia, Mali, Mauritania, the Niger, Nigeria, and Sierra Leone due to the combination of ongoing food production trends in the region, as well as global disruptions in the trade of food, fertiliser and oil products (WFP, April 2022).

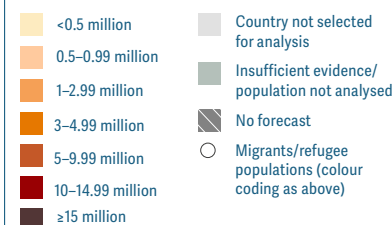
Rising fuel and fertiliser prices resulting from the war in Ukraine and the economic impact on the Russian Federation are likely to result in increased transportation and production costs for local farmers, placing additional upward pressure on food prices (WFP, April 2022). This could lead to further increases in the number of people facing Crisis or worse (CH Phase 3 or above), beyond the increases already projected through the 2022 lean season.

MAP 2.6

Acute food insecurity forecasts in West Africa and the Sahel, in 2022



Numbers of people in Crisis or worse (CH Phase 3 or above) (ranges)



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

Source: FSIN, GRFC 2022.

Latin America and the Caribbean

El Salvador | Guatemala | Haiti | Honduras | Nicaragua

Acute food insecurity overview 2021

 **12.76M people**

in 5 countries in Latin America and the Caribbean were in Crisis or worse (IPC Phase 3 or above) in 2021

This number includes the FEWS NET estimate of 400 000 people in Crisis or worse (IPC Phase 3 or above) in Nicaragua, which is not included in the disaggregated numbers for IPC Phases 2–4 below.

Source: FSIN.

7% of the GRFC global number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent were in 5 countries in Latin America and the Caribbean in 2021.

 **2.32M people in 4 countries were in Emergency (IPC Phase 4) in 2021**

 **10.04M people in 4 countries were in Crisis (IPC Phase 3) in 2021**

 **15.42M people in 4 countries were in Stressed (IPC Phase 2) in 2021**

Source: FSIN, using IPC data.

8.41M people in four SICA member states were in Crisis or worse (IPC Phase 3 or above)¹ in 2021



¹ All the countries in this regional overview are SICA member states with the exception of Haiti.

Haiti remained the biggest food crisis in Latin America and the Caribbean, accounting for a third of all people in Crisis or worse (IPC Phase 3 or above) across the five countries.

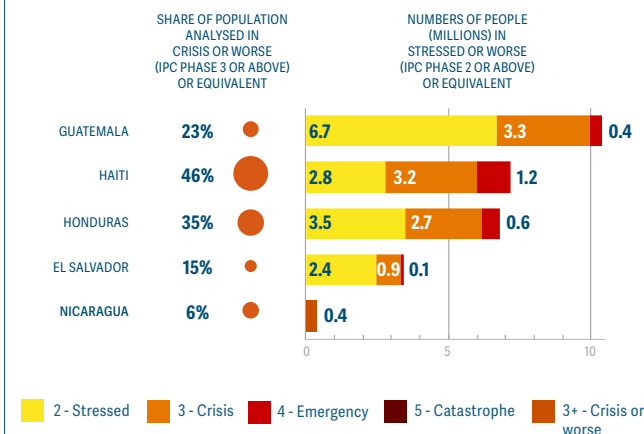
Around 4.4 million people in Haiti were in Crisis or worse (IPC Phase 3 or above) in March–June 2021 – or 46 percent of its analysed population. Out of the 2.32 million people in Emergency (IPC Phase 4) across four countries, half were in Haiti where 12 percent of the population analysed were in this phase from March–June 2021. From September 2021, although there was a slight decrease in the number of people in Crisis (IPC Phase 3) in Haiti with improved food availability due to harvests, the number in Emergency (IPC Phase 4) increased following the earthquake and tropical storm Grace (IPC, September 2020 and September 2021).

Guatemala was the second largest food crisis in Latin America and the Caribbean in terms of the number of people in Crisis or worse (IPC Phase 3 or above), with 3.73 million people in these phases through March 2021.

Guatemala was followed closely by Honduras with 3.29 million people in Crisis or worse (IPC Phase 3 or above). The entirety of Honduras was classified in Crisis (IPC Phase 3) in July–September 2021. In El Salvador, over 985 000 people were in Crisis or worse (IPC Phase 3 or above) in March–May 2021 due to knock-on effects of the pandemic and insecurity. In Nicaragua, FEWS NET estimated that around 400 000 people were likely to be in Crisis or worse (IPC Phase 3 or above) in July–September 2021.

FIG 2.19

Numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above) or equivalent



Source: FSIN, using IPC data and FEWS NET data.

Acute food insecurity overview 2021

Acute food insecurity trends

Acute food insecurity in the region increased from 11.8 million people in Crisis or worse (IPC Phase 3 or above) or equivalent in 2020 to nearly 12.8 million people in 2021 as rising staple food prices, atypically low labour demand driven by the lingering economic effects of COVID-19, weather extremes and insecurity continued to drive high levels of humanitarian food assistance needs.

In 2021, all five countries in the region reached a six-year high in their population in Crisis or worse (IPC Phase 3 or above). There had already been a steep rise in the numbers of people in Crisis or worse (IPC Phase 3 or above) between 2019 and 2020 as hurricanes Eta and Iota which hit Honduras, Guatemala and Nicaragua in November 2020 greatly exacerbated the effects of years of consecutive weather extremes, and the heavy socioeconomic impacts of the COVID-19 pandemic worsened ongoing economic crises.

In Haiti, the number of people facing Crisis or worse (IPC Phase 3 or above) reached the highest recorded number by IPC for the country in March–June 2021, reflecting the overall worsening of acute food insecurity in the country since 2020, driven by economic crisis, high food prices, constrained incomes, violence, insecurity and below-average crop production. Since the first edition of the GRFC covering 2016, Haiti has experienced a continuous increase in the number of people in Crisis or worse (IPC Phase 3 or above) due to a combination of drought, floods, hurricanes, economic shocks and insecurity.

In Guatemala and Honduras, acute food insecurity has been worsening since 2019 due to the severe 2020 hurricane season, the socioeconomic impacts of the COVID-19 pandemic, rainfall deficits, drought and several years of localized crop losses. In 2021, both countries experienced the highest numbers of people in Crisis or worse (IPC phase 3 or above) recorded by the IPC in each country. In both countries, the damage wrought by hurricanes Eta and Iota led to income losses for farming households, and reduced food access. Subsistence households also lost staple grain supplies,

notably beans and maize, which reduced food reserves, with some experiencing a total loss of food reserves (IPC, February and June 2021).

Six-year trends, 2016–2022²

In the six editions of the GRFC, El Salvador has only qualified as a major food crisis at the national level on two other occasions.³ In 2019, 0.3 million people were in Crisis or worse (IPC Phase 3 or above), representing 21 percent of the 1.4 million people analysed, largely due to the impact of drought and heavy rains on crop production. In 2021, the expanded analysis found that 0.99 million were in Crisis or worse (IPC Phase 3 or above), representing 15 percent of the population, due to knock-on effects of the pandemic and insecurity

Economic shocks, including COVID-19, and the impact of hurricanes Eta and Iota have had a similarly negative impact on food security in Nicaragua, where approximately 400 000 people were in Crisis or worse (IPC Phase 3 or above) in September–October 2020 and in July–September 2021, according to FEWS NET.

The total number of people in Crisis or worse (IPC Phase 3 or above) or equivalent is not comparable with that of 2019, which included estimates for three countries not covered in 2020 and 2021 – Venezuela (Bolivarian Republic of) and Venezuelan migrants in Colombia and Ecuador.

Despite comparability challenges in terms of methodology used and population/geographical coverage of acute food insecurity estimates used over the years, the population facing Crisis or worse (IPC Phase 3 or above) in the four countries covered in the GRFC between 2016 and 2021 (Guatemala, Haiti, Honduras and Nicaragua) increased continuously, rising from around 3.2 million to 11.8 million. The major increase reported in 2019 – when the numbers more than doubled from 3.6 million to 7.8 million – was due in part to increased coverage of IPC analyses in Guatemala, Honduras and Haiti. It was also attributed to weather extremes and economic shocks, as well as the political and socioeconomic crisis in Haiti.

² No trend graph is included for this region since comparable analyses were only available since late 2020 for El Salvador, since late 2019 for Haiti and Honduras, and since late 2018 for Guatemala.

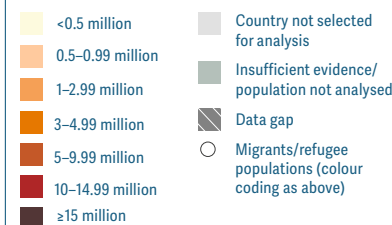
³ El Salvador was a major food crisis in 2018 and 2019 as part of the Dry Corridor sub-national areas.

MAP 27

Acute food insecurity estimates in Latin America and the Caribbean, in 2021



Numbers of people in Crisis or worse (IPC Phase 3 or above) (ranges)



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

Source: FSIN, GRFC 2022.

Drivers of food crises across the region in 2021

Economic shocks were considered the primary driver in all five countries in the region in 2021.

Economic shocks, including COVID-19

The economic impacts of COVID-19 containment measures continued to be felt in 2021, as the pandemic precipitated the region's worst recession of the last century and exacerbated existing structural problems. Vulnerable groups were particularly affected by the crisis, and, as a result, poverty and inequality rose to their highest levels in decades (OECD/CAF/European Union, 2021).

Labour markets struggled to recover from pandemic-incurred losses, with an estimated 30 percent of jobs lost in 2020 not being recovered in 2021 (CEPAL, 2021). Many of the jobs lost were part of the informal sector, which employ over half of the population in countries like Honduras, Nicaragua and El Salvador (OECD/CAF/European Union, 2021). Workers' ability to fully re-enter the market was stymied, and the number of hours worked remained below pre-pandemic levels (World Bank, 2021). The slow recovery of employment also accentuated gender inequality, as fewer women returned to the labour market and had greater difficulties in finding employment (ILO, 2022). This below-average demand for labour translated into reduced incomes for vulnerable households in urban and rural areas.

Rising fuel costs in El Salvador, Honduras, Guatemala and Nicaragua translated into higher transportation and fertiliser costs. The price of several staple foods, especially beans, also rose throughout 2021 due to below-average regional production and high transportation costs (FEWS NET, May 2021).

Against the backdrop of reduced incomes, limited purchasing power led many households to either turn to loans and credit, the sale of productive assets or the spending of savings to buy food, while others resorted to atypical migration strategies or had food consumption gaps (FEWS NET, March 2021).

Weather extremes

In Central America, hurricanes Eta and Iota in late 2020 destroyed crops and food reserves, making households in affected areas more market dependent in 2021. Many households that relied on informal agricultural labour were unable to work during the height of the agricultural season due to damage to plantations. As a result of these losses and the subsequent depletion of market food stocks, food prices increased, mainly affecting households that were reliant on markets to meet their food needs (IPC, February 2021).

Harvests in Haiti were below average due to low and spatially and temporally irregular levels of rainfall at the end of 2020 and throughout 2021, which contributed to reduced food production throughout the country. The Sud, Sud-Est, Grand'Anse and Nippes departments experienced additional issues with food availability in autumn after a 7.2 magnitude earthquake and Tropical Depression Grace struck in August 2021. The earthquake damaged crops in affected areas as well as production infrastructure in the Sud, Grand'Anse and Nippes departments while the Ministry of Agriculture, Natural Resources and Rural Development estimated that crop losses were greatest in the Sud-Est department after Tropical Depression Grace, particularly for pigeon pea, maize and bean crops (FEWS NET, October 2021).

Conflict/insecurity

High levels of violence and insecurity in Central America impacted economic and agricultural activities and constituted a push factor in people's decisions to migrate (GHO, December 2021).

The security situation in Haiti deteriorated in 2021 amid increased gang activity and worsening political instability. Conflicts between gangs led to high levels of violence against civilians, increased kidnappings for ransom and the seizure of key economic assets, particularly petrol stations and fuel ports (ACLEDA, 2022). These actions in combination with rising energy costs on the international market led to fuel shortages and, in turn, higher food prices (FEWS NET, October 2021). Insecurity was further compounded by the assassination of President Moïse in July 2021.



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In Haiti, a magnitude 7.2 earthquake followed by tropical storm Grace in August 2021, displaced thousands of people and amplified the losses of crops and livestock caused by previous tropical storms.

Key nutrition challenges

In the Latin America and Caribbean region, the lack of updated nutrition data does not allow for a comprehensive assessment of the current nutrition situation. Stunting levels have been traditionally high in the region, especially for Guatemala. Overweight is also increasing among children.

According to the latest available data from 2019–2021, the prevalence of wasting was within the ‘very low’ range (<2.5 percent) for all countries included in this region with the exception of Haiti, where it was considered of ‘medium’ severity according to WHO thresholds.

In Haiti in the first three months of 2021, the number of admissions of severely wasted children in health facilities in the country rose by 26 percent compared with the same period in 2020 (UNICEF, May 2021). UNICEF estimated that nearly 18 000 additional children were likely to be affected by wasting in earthquake-affected areas (UNICEF, December 2021).

In four countries of Latin America and the Caribbean, stunting among children under 5 years is a cause for concern, however nutritional data is outdated and does not provide a comprehensive understanding of how the situation has evolved in recent years.

Drivers of nutrition challenges in the region

Food security and access to healthy diets

Acute food insecurity continues to contribute to acute malnutrition in the region, especially for high risk countries such as Haiti. In 2021, nearly 12.8 million⁴ people in five countries of the region were in Crisis or worse (IPC Phase 3 or above) during the peak periods identified, with all five countries recording the highest numbers reported by the GRFC.

Care and feeding practices

Anaemia is a public health concern in the region. In El Salvador, 21 percent of children under 5 suffer from anaemia. For Haiti, in 2019, 48 percent of women in the reproductive age were anaemic – with no progress having been made since 2015, when anaemia affected 47 percent of women of reproductive age. In 2019, 10.6 percent of women of reproductive age were anaemic, as well as 18 percent of the women of reproductive age in Honduras (Global Nutrition Report, 2021).

Health services and household environment

Unsafe water consumption, limited access to health and nutrition services to prevent and treat undernutrition and unsanitary conditions all contribute to nutritional challenges. In Guatemala and Honduras, health services were directly impacted by Eta and Iota, with 237 health centres affected in Guatemala and 27 health facilities in Honduras still disabled in 2021 (HNO, July 2021).

During the COVID-19 pandemic, disruption of health services and parental fear led to a sharp decline in child immunization rates. According to UNICEF, 9.7 percent of children in Haiti have not received any vaccinations and 58 percent are not fully vaccinated. This decline resulted in rising numbers of diphtheria cases and a higher risk of a measles outbreak (UNICEF, May 2021).

In rural areas of Haiti, 40 percent of the population do not have access to an improved water source and 36 percent practice open defecation (UNICEF, May 2021).

Access to safe drinking water is limited in rural areas of Honduras with only 18.7 percent of people having access to safely managed drinking water services and 71 percent with access to basic services (JMP, 2020). As per a Rapid Gender Analysis, only 35 percent of women mentioned they had regular access to safe water and 58 percent lacked access to hygiene services (HNO, July 2021).

Due to the very low numbers of refugees/asylum seekers and IDP populations in Latin America and the Caribbean, no regional displacement discussion is provided.

⁴ This figure includes 400 000 people in Crisis or worse (IPC Phase 3 or above) in Nicaragua.

Regional forecast, 2022

10.66–10.8M people in 5 countries in Latin America and the Caribbean were forecast to be in Crisis or worse (IPC Phase 3 or above) in 2022

The aggregate forecast number includes a FEWS NET estimate for Nicaragua of 0.1–0.25 million. FEWS NET does not provide a breakdown by phase classification.
Source: FSIN, using IPC and FEWS NET data.

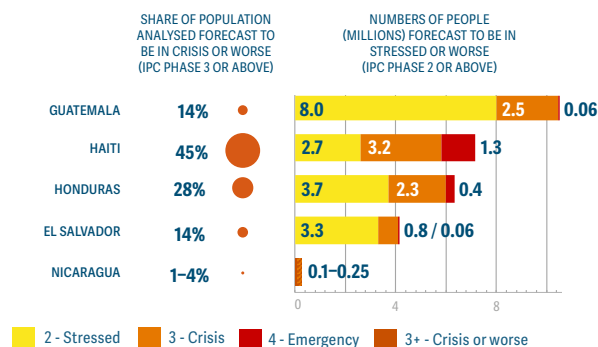
1.79M people in 4 countries were forecast to be in Emergency (IPC Phase 4) in 2022

8.77M people in 4 countries were forecast to be in Crisis (IPC Phase 3) in 2022

17.65M people in 4 countries were forecast to be in Stressed (IPC Phase 2) in 2022

Source: FSIN, using IPC and FEWS NET data.

FIG 2.20
Forecasts for numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above)



Source: FSIN, using IPC and FEWS NET data.

In the four countries of Central America, partial economic recovery from both the economic impact of COVID-19 and the damage caused by tropical storms Eta and Iota, and a positive outlook for the primera crop season, were expected to contribute to a decrease in the number of people in Crisis or worse (IPC Phase 3 or above). However, this will likely be tempered by high prices for agricultural inputs capping production and lowering demand for agricultural labour (FEWS NET, March 2022).

In Guatemala, the population in Crisis or worse (IPC Phase 3 or above) was expected to decrease from 3.7 million in the first quarter of 2021 to 2.5 million in September 2021–January 2022 (IPC, June 2021). In Honduras, in the June–August 2022 lean season, the population in Crisis or worse (IPC Phase 3 or above) was expected to be roughly 700 000 fewer than the 2021 peak in July–September (IPC, January 2022). In El Salvador, the decrease was due in part to a 430 000 decrease in the population estimates used between the two rounds of analysis between March–May 2021 and 2022.

Haiti will face a slight increase in the numbers of people in Crisis or worse (IPC Phase 3 or above) as high staple food and transportation prices, reduced income and continued disruptions to livelihood activities curtail poor households' access to food. The situation will be worst in gang violence-affected neighbourhoods in Port-au-Prince, areas suffering residual impacts of the 2021 earthquake, and in dry regions most vulnerable to weather and price shocks (FEWS NET, March 2022).

Impact of the Ukraine war

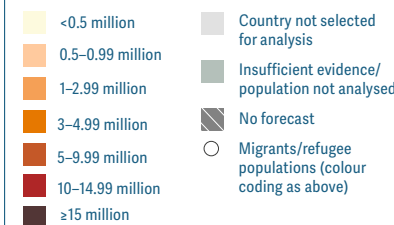
Higher international food and fuel prices resulting from the war in Ukraine will increase food prices in the net food importing countries of Central America and Haiti, compounding already above-average food prices linked to 2021 agricultural losses, and reducing household purchasing power. This is particularly serious for the poorest households in the Honduran and Guatemalan Dry Corridor – who suffered significant agricultural losses in 2021 – as well as poor households affected by hurricanes Eta and Iota – who have yet to recover their livelihoods and are heavily reliant on the market for food needs (FEWS NET, March 2022).

MAP 2.8

Acute food insecurity estimates in Latin America, in 2022



Numbers of people in Crisis or worse (IPC Phase 3 or above) (ranges)



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

Source: FSIN, GRFC 2022.

Eurasia

Europe | Ukraine | Middle East | Iraq | Palestine | Syrian Arab Republic | Syrian refugees in Egypt, Jordan and Lebanon | Yemen | South Asia | Afghanistan | Bangladesh (Cox's Bazar) | Pakistan (Balochistan, Khyber Pakhtunkhwa and Sindh)

Acute food insecurity overview 2021

 **60.54M people** in 11 countries in Eurasia were in Crisis or worse (IPC Phase 3 or above) or equivalent¹ in 2021

¹ Disaggregated data for IPC Phases 2–5 were not available for non-IPC countries due to comparability concerns.

30% of the GRFC global number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent were in 11 countries in Eurasia in 2021.

 **47 000 people** in Yemen were in Catastrophe (IPC Phase 5) in 2021

 **14.9M people** in 3 countries were in Emergency (IPC Phase 4) in 2021

 **28.68M people** in 3 countries were in Crisis (IPC Phase 3) in 2021

 **27.54M people** in 3 countries were in Stressed (IPC Phase 2) in 2021

Number of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent by sub-region

31.43M people in 7 countries of the Middle East;

28.73M people in 3 countries of South Asia and

0.38M acutely food-insecure people in urgent need of food assistance in 1 country in Europe (Ukraine).

Source: FSIN, using IPC, WFP, and SEFSec data.

Three of the world's largest conflict-driven food crises are in Eurasia, where over 60 million people were in Crisis or worse (IPC Phase 3 or above) or equivalent in 11 countries in 2021.

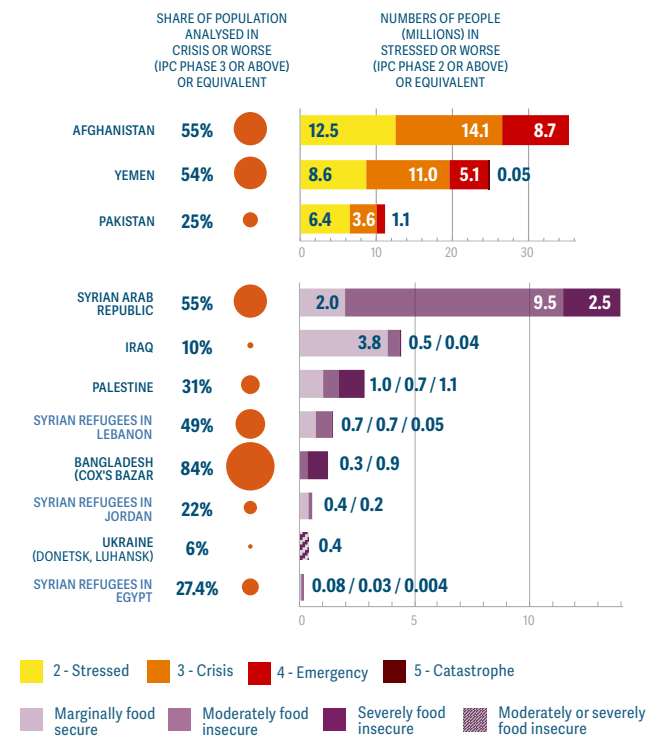
In South Asia, 28.73M people were in Crisis or worse (IPC Phase 3 or above) or equivalent with around 80 percent of them in Afghanistan, 16 percent in three provinces of Pakistan (Balochistan, Khyber Pakhtunkhwa and Sindh) and 4 percent in Bangladesh (Cox's Bazar). The prevalence of acute food insecurity was particularly elevated in Cox's Bazar, where 84 percent of the analysed Rohingya refugees and host community members were moderately or severely food insecure in October–November 2021 based on WFP ENA methodology. In Afghanistan, more than half the population was in Crisis or worse (IPC Phase 3 or above) and more than 20 percent in Emergency (IPC Phase 4).

Of the 31.4 million people in Crisis or worse (IPC phase 3 or above) or equivalent in the Middle East, more than half were in Yemen where 47 000 people in three governorates – Al Jawf, Amran and Hajjah – were expected to be in Catastrophe (IPC Phase 5) in January–June 2021 (IPC, December 2020) – and around 38 percent in the Syrian Arab Republic. The remainder were in Palestine, Iraq or were Syrian refugee populations in Egypt, Jordan and Lebanon. The prevalence of acute food insecurity was particularly high in Yemen (54 percent), the Syrian Arab Republic (55 percent) and among Syrian refugees in Lebanon (49 percent).

In Europe in 2021, 0.38 million people were moderately or severely food insecure in Donetsk and Luhansk oblasts of Ukraine in October–November 2021, representing 6 percent of the population analysed. This analysis included the IDP population (HNO, February 2022).

FIG 2.21

Numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above) or equivalent



Source: FSIN, using IPC data; WFP CARI (Iraq, Syrian Arab Republic, Ukraine, Syrian refugees); REVA 5 (Bangladesh), PCBS & Food Security Sector Socioeconomic and Food Security Survey 2020 (Palestine). Data from Palestine from December 2020–January 2021.

Acute food insecurity overview 2021

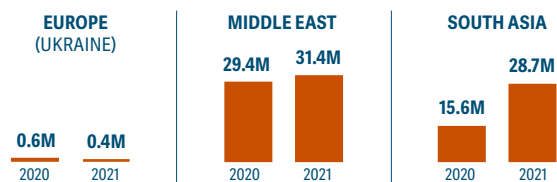
Acute food insecurity trends

The number of people in Crisis or worse (IPC Phase 3 or above) or equivalent in 11 countries/territories in Eurasia increased from 45.4 million in 2020 to 60.5 million in 2021.

In the five countries analysed in all six editions (Afghanistan, Bangladesh, Iraq, the Syrian Arab Republic and Yemen), the population in Crisis or worse (IPC Phase 3 or above) or equivalent increased from 30.9 million in 2016 to 41 million in 2020 and to 52.8 million in 2021 – despite some comparability issues (see chapter 3).

In three countries in South Asia, the number of people in these phases increased from 15.6 million to 28.7 million between 2020 and 2021, driven largely by the worsening situation in Afghanistan and the use of revised population figures, where the number of people in Crisis or worse (IPC Phase 3 or above) reached 22.8 million in November 2021–March 2022.² The rise is also attributable to the inclusion of three provinces – Balochistan, Khyber Pakhtunkwa and Sindh – for Pakistan in 2021, versus one (Khyber Pakhtunkwa) in 2020. Pakistan became the ninth largest food crisis globally in 2021, with around 4.7 million people in Crisis or worse (IPC Phase 3

FIG 2.22
Numbers of people in Crisis or worse (IPC Phase 3 or above) or equivalent, 2020–2021



In the Middle East, no data was available for Syrian refugees in Turkey in 2021, reducing the number of countries/territories included from eight to seven. In South Asia the 2021 analyses included two additional provinces in Pakistan (Balochistan and Sindh).

Source: GRFC 2021–2022.

² The increase in Afghanistan can also be attributed to changes in the base population used in the October 2021 IPC analysis, which, at the request of the humanitarian community in Afghanistan, used Flowminder population estimates used for the annual HRP.

or above) from October 2021–March/April 2022. In Cox’s Bazar, Bangladesh, the number of moderately or severely food-insecure Rohingya refugees and host community members increased slightly from 1.2 million to almost 1.3 million people based on WFP ENA methodology (WFP, March 2022).

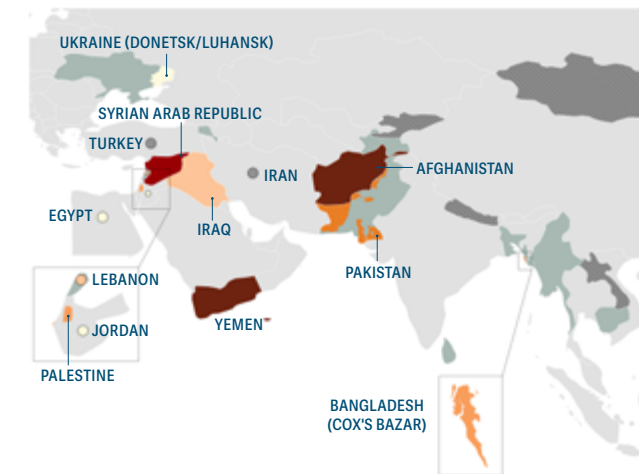
In the Middle East, the number of people in Crisis or worse (IPC Phase 3 or above) or equivalent increased from 29.2 million in seven countries in 2020 to 31.4 million in 2021. In Yemen, the number of people in these phases rose from 13.5 million in October–December 2020 to 16.2 million in January–June 2021 as a result of protracted conflict and economic collapse. After a decade of conflict in the Syrian Arab Republic, the number of acutely food-insecure people was persistently high at 12 million, having increased from 6.5 million in 2018 and 6.6 million in 2019 to 12.4 million by November 2020, as protracted conflict increased displacement, unemployment soared and food prices sky-rocketed.

In Palestine, around 1.8 million people were moderately or severely food insecure based on the SEFSec methodology in December 2020–January 2021, slightly lower than in 2020, when 2 million people were acutely food insecure due to the effects of COVID-19 restrictions, following years of conflict and economic hardship (PCBS, January 2021). In Lebanon, 0.74 million Syrian refugees (49 percent of the population) were moderately to severely food insecure according to WFP CARI methodology, as the country navigated an unprecedented economic, political and public health crisis. The share of the population in these phases were consistent with results in 2020 (VASyR, 2021). In Jordan and Egypt, acute food insecurity among Syrian refugee populations persisted at similar levels to 2020 as COVID-19 continued to disrupt income sources.

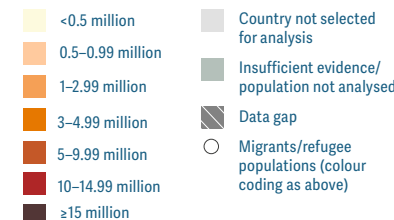
In Europe, the number of severely and moderately food-insecure people, based on WFP CARI methodology, in Luhansk and Donetsk oblasts and among IDP populations in Ukraine decreased from 0.6 million in 2020 to 0.4 million in 2021. Despite persistent conflict, heightened violations of the peace agreement, and restricted humanitarian access in non-Government Controlled Areas, there was a slight improvement in the Government Controlled Areas

MAP 2.9

Acute food insecurity estimates in Eurasia, in 2021



Numbers of people in Crisis or worse (IPC Phase 3 or above) (ranges)



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

Source: FSIN, GRFC 2022.

due to unrestricted humanitarian access and a slight economic recovery. Acute food insecurity in the two oblasts was already defined by eight years of conflict, high food prices, limited or lack of markets and access to basic services, and loss/lack of livelihood opportunities (HNO, February 2022).

Drivers of food crises across the region in 2021

In ten out of 11 countries in Eurasia, conflict was considered the primary driver. While economic shocks were only considered the primary driver in Pakistan, they contributed to acute food insecurity throughout the region, as did drought in Afghanistan, Pakistan and the Syrian Arab Republic, and flooding in Yemen and Cox's Bazar.

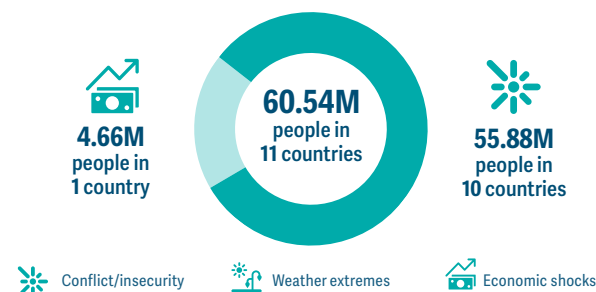
✳ Conflict/insecurity

For all seven food crises in the Middle East, two out of three food crises in South Asia, and one food crisis in Europe (Ukraine), conflict/insecurity was the primary driver of acute food insecurity in 2021.

The impact of protracted conflict – such as disruptions to food production, markets and livelihoods, widespread displacement and economic crisis – is considered the main driver of acute food insecurity in Afghanistan, Palestine, the Syrian Arab Republic (and for the analysed Syrian refugees across the Middle East and North Africa) and in Yemen. In Ukraine, it was already the primary driver

FIG 2.23

Numbers of people in Crisis or worse (IPC Phase 3 or above) by key driver in 2021



Many food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

Weather extremes affected (almost) all countries of the region in 2021, but were considered a primary driver of food crisis in none of them.

Source: FSIN, GRFC 2022.

in the country's eastern Donetsk and Lubansk oblasts, where 383 000 people were acutely food insecure (HNO 2022) in 2021. It is also considered the primary driver for the Rohingya refugees who escaped Myanmar (the most recent influx in 2017) and vulnerable host communities in Cox's Bazar district of Bangladesh.

While Iraq continues to steadily recover from years of conflict, almost 1.2 million Iraqis still live in protracted situations of internal displacement because of conflict (UNHCR January 2022).

🏠 Economic shocks, including COVID-19

Economic shocks, including the effects of COVID-19 restrictions, were considered the primary driver for one country (Pakistan) in South Asia. However, high food prices and widespread loss of income-generating opportunities due to the economic impacts of COVID-19 in 2020 and 2021 contributed to the high levels of acute food insecurity across all countries/territories.

In Pakistan, reduced incomes from pandemic restrictions affected between 65–81 percent of surveyed households in Balochistan, Khyber Pakhtunkwa, and Sindh provinces (IPC, December 2021).

Since the political transition in August 2021, Afghanistan's war-torn economy was plunged into an even deeper crisis as USD 9.5 billion of national assets were frozen and vital international development assistance was cut. Unemployment levels rose, civil servants were unpaid, and food prices rose dramatically, even in the post-harvest season.

In Yemen, intensifying violence added further strain to fragile economic conditions. The value of the Yemeni riyal continued to depreciate to new historic lows in 2021, driving large increases in food prices and pushing more people into extreme poverty. Socioeconomic conditions were further affected by declining remittances, trade disruptions, severe fuel supply shortages, and declining humanitarian operations (WB, October 2021).

In the Syrian Arab Republic, the economic consequences of conflict, along with the economic collapse in Lebanon and the

impact of COVID-19 restrictions aggravated an already severe economic crisis in 2021. Depleted foreign exchange reserves constrained the capacity for Government-held areas to produce and import food and fuel, while the unemployment rate reached 60 percent (GNAFC, July 2021; FAO, December 2021). Relative currency stabilization from August 2021 failed to stop food price increases. In October 2021, the national average price of the standard-reference food basket was the highest ever recorded – 128 percent higher year-on-year (WFP, October 2021).

🌧 Weather extremes

Despite not being considered a primary driver of acute food insecurity across Eurasia, climate shocks had a major impact on food security in at least five countries.

Afghanistan faced a devastating drought with 80 percent of the country and the livelihoods of 7.3 million people affected by the end of the year (WFP, October 2021). The 2021 cereal harvest was reportedly 24 percent below 2020 levels and 14 percent below the five-year average (FAO-GIEWS, December 2021).

In Pakistan, moderate to severe drought conditions in Balochistan and Sindh and inadequate monsoon and pre-monsoon rainfall in Khyber Pakhtunkhwa reduced crop and livestock production and contributed to rising national food prices. In the Syrian Arab Republic, drought during the 2020/21 agricultural season reduced crop and livestock production.

In Yemen, recurrent seasonal flooding continued to displace people from their homes, and resulted in losses of property, crops and crucial productive assets. In Cox's Bazar, flash floods, waterlogging and landslides across the Rohingya refugee camps and surrounding Bangladeshi communities during a particularly wet monsoon season from July displaced over 25 000 people (ISCG, September 2021).

Displacement



27.6M forcibly displaced people

19.6M IDPs

8.0M refugees and asylum seekers

Source: UNHCR, HNAP and IOM, December 2021.

Three of the world's biggest IDP crises are in the region – the Syrian Arab Republic, Afghanistan and Yemen. Nearly 16.8 million people have been driven from their homes in these three countries, largely by conflict. In Iraq, 4.9 million IDPs have returned to their homes since 2017, but by November 2021, nearly 1.2 million IDPs remained in protracted displacement, including almost 180 000 in 26 camps (REACH, June 2021).

In Afghanistan, the intensified conflict in the first half of the year, drought, political uncertainty and the economic upheaval since 15 August 2021 increased population movements. By the end of 2021, nearly 700 000 people had been newly displaced from their homes (UNHCR, December 2021). Recent IDP assessments indicated higher levels of acute food insecurity among recently displaced households than any other population category, with 60 percent struggling to obtain food in the month prior to data collection (REACH, December 2021). Nearly all IDPs reported experiencing loss of employment, reduced income, and price rises (IOM DTM, June 2021 and October 2021).

The regional Syrian refugee crisis

A decade into the Syrian conflict, over 5.6 million Syrian refugees remained spread across the Middle East and North Africa in 2021, the majority in Turkey, followed by Lebanon, Jordan, Iraq and Egypt (UNHCR, December 2021; Government of Turkey, February 2022). COVID-19 containment measures exacerbated their already high levels of unemployment and acute food insecurity and strained overstretched public institutions and social safety nets, further increasing refugee dependence on humanitarian aid (3RP, 2022). Beyond the COVID-19 pandemic, Syrian refugee populations – and the communities hosting them – also faced

Over 157 000 Yemenis fled their homes due to conflict in 2021, particularly in Marib, Taizz, Al-Hudaydah and Al-Bayda governorates. This trend is expected to continue in 2022 (UNHCR, February 2022). Over 67 percent of IDPs live in districts classified in Emergency (IPC Phase 4) (UNHCR, February 2021; IPC, December 2020).

In the Syrian Arab Republic, displacements decreased significantly, with around 347 000 new IDPs from January to August 2021 – mainly in Aleppo, Idleb and Dar'a governorates – compared to 1.6 million for the same period in 2020 (HNO 2022, February 2022). Some 95 percent of households displaced within the past three years live in extreme poverty (HNAP, September 2021). Three-quarters of IDP households in camps reported an inability to sufficiently meet their basic needs, citing lack of income as the primary reason followed by unaffordability of food and essential goods. In 2021, 88 percent of households residing in sites/camps took on debt to cover living costs (HNO 2022, February 2022).

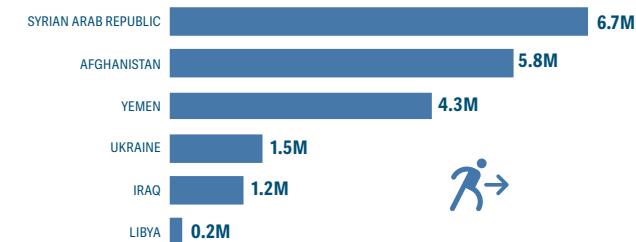
Pakistan (Afghan refugees), Bangladesh (Rohingya refugees), Lebanon (Syrian refugees) and Jordan (Syrian refugees) are among the ten countries hosting the largest refugee populations in the world. Lebanon has the highest per capita refugee population in the world.

major domestic socioeconomic pressures. As Lebanon navigated an unprecedented economic, political and public health crisis in 2021, refugees and host communities experienced drastic currency depreciation, high inflation, burgeoning food prices and loss of employment opportunities, against the backdrop of fuel and electricity shortages (3RP, 2022). Based on the WFP CARI methodology, approximately half of Syrian refugees in Lebanon (741 000 people) were moderately or severely food insecure in 2021 (VASyR, 2021).

According to UNHCR, 840 000 Syrians are registered as refugees in Lebanon. However, an additional 660 000 Syrian refugees are not registered and were considered in the 2021 VASyR analysis, bringing the total number of Syrian refugees to 1.5 million (UNHCR, December 2021 and VASyR 2021/WFP).

FIG 2.24

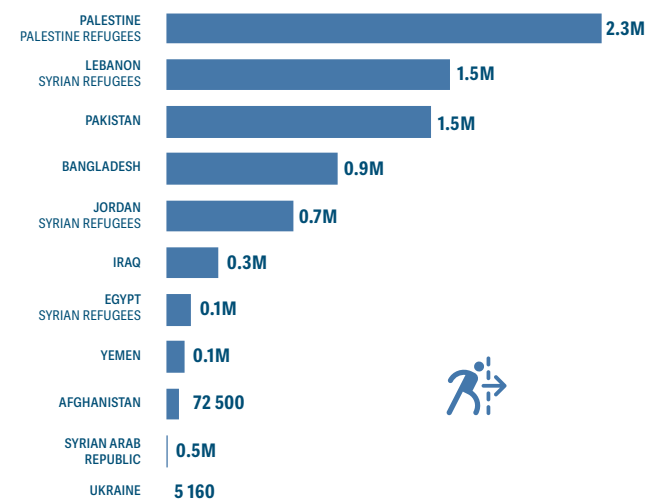
19.6M IDPs in six countries in 2021



Source: UNHCR, OCHA, HNAP and IOM, December 2021.

FIG 2.25

8.0 million refugees/asylum seekers hosted in 14 countries in 2021



This chart does not include the 4 million refugees hosted in Turkey (UNHCR, December 2021) since acute food insecurity data for refugees was limited in 2021 – therefore Syrian refugees based in Turkey are not covered in the GRFC 2022.

The refugee figure for Lebanon includes 840 000 Syrian refugees officially registered with UNHCR, as well as another 660 000 unregistered Syrian refugees. For more information see footnote for the regional Syrian refugee crisis in the corresponding box.

Sources: UNRWA and UNHCR, end 2021.

Key nutrition challenges

More than 6.3 million children under 5 years were wasted in just five countries, with the highest numbers in Afghanistan (3.1 million) and Yemen (2.25 million), followed by Pakistan (636 000 million in Sindh province alone) and the Syrian Arab Republic (245 000) (HNO Afghanistan 2021, December 2020; IPC AMN Pakistan, October 2021; IPC AMN Yemen, February 2021; HNO Syrian Arab Republic 2022, February 2022).

In Afghanistan, the nutritional status of children under 5 years old has been deteriorating between 2015–2020 in many provinces of the country. The findings of the most recent SMART surveys in 2020 show that 27 out of 34 provinces were above the 'very high' (≥ 15 percent) threshold for child wasting. Around 1 million children were severely wasted (HNO, December 2020).

In Yemen, out of the 2.25 million wasted children under the age of 5 years, 538 000 are severely wasted, and about 1.3 million pregnant and lactating women are projected to suffer from wasting over the course of 2022 (IPC, March 2022).

In Afghanistan, Bangladesh (Cox's Bazar), Pakistan and Yemen, the prevalence of stunting among children under 5 years is well above the WHO 'very high' threshold (≥ 30 percent), reaching 46.4 percent in Yemen.

Existing nutritional surveillance and monitoring systems do not allow timely identification and follow up on malnutrition cases.

Drivers of nutrition challenges in the region

Food security and access to healthy diets

Inadequate quality and quantity of food linked to high levels of household acute food insecurity are contributing factors to child malnutrition across all four countries, leading to high numbers of wasted children.

Health services and household environment

In Afghanistan, the Syrian Arab Republic and Yemen, the ability of people (especially women and children) to access healthcare has been crippled by active conflict, the COVID-19 pandemic and by the collapse of public health systems including unavailability of medicines or treatment and non-functional health facilities. The disruption of vaccination campaigns due to conflict and COVID-19 containment measures have heightened people's vulnerability to disease. In Afghanistan, the pausing of development funding to the health system following the August political transition was expected to further limit coverage of health and nutrition interventions (Afghanistan HNO 2022).

Lack of access to safe water, poor hygiene practices and sanitation coverage, high rates of diarrhoea, acute respiratory infection (ARI) and fever as well as low prevalence of health-seeking behaviour also underlie the malnutrition crises in Afghanistan, Sindh province of Pakistan and Yemen. Drought conditions in Afghanistan, Sindh province of Pakistan and the Syrian Arab Republic also likely adversely impacted on access to safe drinking water and sanitation (IPC AMN, October 2021), while the majority of households in camps and host communities in Cox's Bazar had trouble accessing sanitation and drinking water during the 2021 monsoon floods (WFP & IOM, February 2022).

Limited birth spacing and/or early marriage/pregnancy, as well as non-optimal hygiene practices adversely impact nutritional outcomes in Cox's Bazar. COVID-19 lockdowns in Bangladesh severely restricted humanitarian access to camps and led to health, nutrition and WASH programmes being disrupted or halted (UNHCR & WFP, July 2021).

Care and feeding practices

Family separation, loss of caregivers and psychological trauma as a result of conflict-induced displacement also impacted negatively on child care and feeding practices.

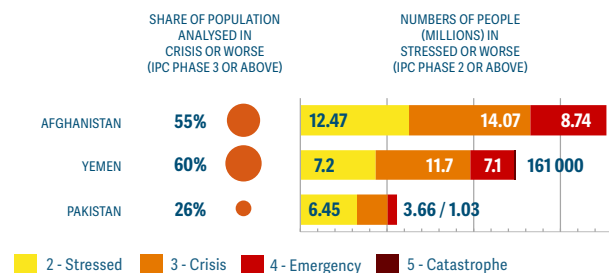
According to the latest available data, anaemia levels among women of reproductive age are a 'severe' public health problem in Afghanistan (42.6 percent) and Yemen (61.5 percent) and a 'moderate' public health issue in the Syrian Arab Republic (32.8 percent) (2021 Global Nutrition Report). In Cox's Bazar, more than half (55 percent) of children aged 6–23 months across all camps are anaemic, well above the 40 percent threshold for a severe public health problem (UNHCR & WFP, July 2021).

Regional forecast, 2022

46.51M people

in 3 countries in **Afghanistan, Pakistan and Yemen** were forecast to be in Crisis or worse (IPC Phase 3 or above) in 2022

FIG 2.26
Forecast for numbers of people in Stressed or worse (IPC Phase 2 or above) and share of population analysed in Crisis or worse (IPC Phase 3 or above) in 2022



Only three out of 11 food crisis countries/territories in Eurasia have forecast data available for 2022.

Source: FSIN, using IPC data.

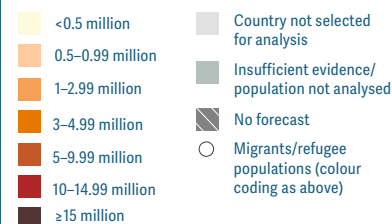
During June–December 2022 in Yemen in Hajjah governorate, a **Risk of Famine** is projected under the worst-case scenario in the districts of Abs and Hayran. Due to insufficient evidence during data collection, further assessment was recommended in Midi and Haradh districts to assess the Risk of Famine.

Additionally, although Al Hali and Al Hawak districts in Al Hudaydah governorate are not forecast to be at Risk of Famine within the projection period, the analysis determined that should a worst-case scenario apply for a protracted period beyond the projection period, these districts will likely shift into Famine (IPC, March 2022).

Acute food insecurity estimates in Eurasia, in 2022



Numbers of people in Crisis or worse (IPC Phase 3 or above) (ranges)



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

Source: FSIN, GRFC 2022.

Out of 11 countries/territories in Eurasia with data in 2021, only three – Afghanistan, Pakistan and Yemen – had 2022 estimates at the time of publication. Although 2022 data was unavailable for Ukraine, there is a high degree of concern about acute food insecurity levels. The war in Ukraine is expected to have severe repercussions for other food-crisis countries in Eurasia.

In 2022, **Yemen's** food crisis is set to deteriorate. In March 2022, the IPC published an analysis indicating that the number of people in Crisis or worse (IPC Phase 3 or above) reached 17.4 million people in January–May 2022, an increase of 1.2 million since the same period in 2021, in part due to larger population figures used for this analysis. This figure is projected to increase to 19 million in June–December 2022, with 161 000 people in Catastrophe (IPC Phase 5). Conflict – with likely escalation of fighting in hotspots increasing displacement – and the economic crisis are expected to remain the main drivers. With households engaging in unsustainable coping mechanisms to cover basic food needs, many are precariously exposed, and sudden shocks would increase acute food insecurity and acute malnutrition to extreme levels (IPC, March 2022).

In **Afghanistan**, extremely high levels of unemployment and income losses and significantly above-average prices will constrain food access for an increasing number of households in rural and urban areas. Wheat production in 2022 is likely to be below average at the national level, with the greatest concern for deficits in northern rainfed areas due to below-average snowpack and forecast below-average precipitation during the spring season (March–May 2022) (FEWS NET, February 2022). Erratic distribution and below-average rainfall amounts at the start of the season in the Syrian Arab Republic have also diminished production prospects of the 2022 wheat crop (FAO, March 2022).

In **Pakistan**, the number of people in Crisis or worse (IPC Phase 3 or above) is expected to decrease slightly in Sindh and increase slightly in Balochistan and Khyber Patunkhwa, as high food and fuel prices curtail the purchasing power of low-income households. Drought may also affect wheat crop production in rain-fed areas of Balochistan and Sindh.

The war in Ukraine

Heavy fighting is destroying livelihoods and displacing millions of people across Ukraine, restricting humanitarian access, disrupting food supply chains and likely imposing severe constraints on agricultural production in one of the world's most important producers and exporters of food commodities.

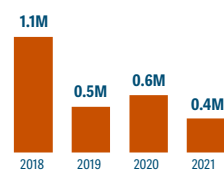
Prior to the massive escalation of war in Ukraine in February 2022, the number of people facing acute food insecurity – largely in the eastern oblasts of Donetsk and Luhansk that have experienced eight years of conflict – had been decreasing (see figure 2.27).

However, the war is expected to drastically increase needs due to the negative impacts of widespread fighting and violence, while deepening the needs of those who were already displaced or required assistance. Though significant uncertainty exists, an estimated 2.5–4.99 million people in Ukraine (around 5–10 percent of the population) will likely need humanitarian assistance in the near term (FEWS NET, April 2022).

As of 16 March 2022, 6.48 million Ukrainians were estimated to be internally displaced. Another 12 million were estimated to be stranded in areas affected by conflict or unable to leave. Humanitarian corridors with satisfactory security guarantees for the safe evacuation of civilians had still not been secured by both parties four weeks after the crisis began (Protection Cluster, March 2022). Combined, the number of IDPs and those who have fled to other countries amount to around 9.8 million people – more than 23 percent of the country's population (OCHA, March 2022).

FIG 2.27

Numbers of acutely food-insecure people in Ukraine, 2018–2021



Source: HNO 2019–2022.

Population displacement, damage to agricultural infrastructure, lack of affordable agricultural inputs, and disruption to markets and food supply chains are likely to impact food production and agriculture-based livelihoods in the short and longer term. FAO's preliminary assessment indicates that 20–30 percent of the areas under winter cereals, spring maize and sunflower seed will not be planted or remain unharvested during the 2022/23 season. Any loss of export markets could depress farmer incomes, thereby negatively affecting future planting decisions (FAO, March 2022).

Ukraine had already been experiencing elevated levels of food price inflation as the conflict in the eastern Donbas took its toll on economic activities. The latest readings of annual food price inflation in February 2022 stood at 14.3 percent. By directly constraining agricultural production, limiting economic activity, and raising prices, the conflict will further undercut the purchasing power of local populations, with consequent increases in acute food insecurity and acute malnutrition (FAO, March 2022).

In the third week of March, the deteriorating humanitarian crisis in Mariupol was the biggest concern, as humanitarian convoys with life-saving relief supplies for civilians were stalled outside the city. People lacked access to the most basic supplies, including safe water, food and essential medicines (OCHA, March 2022).

In localities in eastern Ukraine, damaged water infrastructure remains unrepaired as constant shelling and growing insecurity make it virtually impossible to carry out vital repair works, forcing people with limited or no access to water to resort to catching rainwater or melted snow. Some settlements are completely cut off from access to safe water (OCHA, March 2022).

As millions of people are on the move and forced to shelter in crowded spaces with limited sanitation and access to health services, the risk of infectious disease outbreaks, including COVID-19, tuberculosis and diarrhoeal diseases, continues to rise. The country's health system is vulnerable to infrastructural damages and severe interruptions in critical services. WHO reported that nearly half of the 89 attacks on health systems worldwide in 2022 have occurred in Ukraine (OCHA, March 2022).

Regional acute food insecurity impact of the war in Ukraine

The humanitarian repercussions of the war in Ukraine will be felt well beyond its borders, particularly in neighbouring countries, where 3.3 million displaced people were seeking refuge by the third week of March 2022 (OCHA, March 2022). The number of refugees will likely continue to increase should the fighting continue.

The war will incur potentially significant consequences on certain food crises in the Middle East and South Asia, where many countries are highly reliant on staple food imports, often originating from the Russian Federation and Ukraine, particularly wheat. Shipments from Ukraine were brought to a halt and Russian grain deals paused amid uncertainty around economic impacts. Export disruptions could incur potentially serious food supply constraints for Egypt, Bangladesh, Pakistan, Turkey and Yemen, which are among the world's top ten importers of wheat from both Ukraine and the Russian Federation, and for Lebanon, which is the ninth biggest importer of wheat from Ukraine (WFP, March 2022).

Disrupted logistics in the Black Sea and high insurance and fuel costs all contribute to increasing global food prices. All net importing countries, regardless of their food sourcing, are likely to face high food import bills. Weakening economic activity and a depreciated rouble are expected to reduce important remittance flows to Central Asia (FAO, March 2022).

Food price hikes and shortages will raise the cost of WFP food procurement by around USD 23 million per month, with Afghanistan, the Syrian Arab Republic and Yemen highly affected because of their dependency on wheat (WFP, March 2022).

Country of concern: Myanmar

Although the GRFC partners did not have sufficient food security data in 2021 to include Myanmar in the analyses of the GRFC 2022, the food security implications of the ongoing crisis are significant based on available evidence. In 2021, the outbreak of conflict fuelled widespread population displacements and severe economic instability, leading to significant food security challenges.

Conflict at the core of the crisis

For several editions of the GRFC, Myanmar has been identified as a country of concern that merited further examination. However food security data comparable to IPC/CH has been limited to date. In August–September 2021 according to WFP's rCARI methodology, 20 percent of the surveyed population in nine regions³ had borderline or poor food consumption⁴ (WFP, 2021). Around one-third of households spent over 70 percent of their expenditures to meet their food needs, while 55 percent of households utilised crisis or emergency livelihood coping strategies (FAO & WFP, May 2021).

Farmers reported facing challenges in crop production, particularly paddy producers, due to difficulties accessing agricultural inputs, especially fertilisers. In October 2021, the price of fertilisers was 3.6 times higher than in 2019, contributing to a substantial decrease in the area planted in 2021 and adversely affecting livelihoods (FAO & WFP, October 2021).

This increasingly concerning food crisis is the product of conflict and related displacements, civil unrest, and economic instability. In 2021, Myanmar faced an unprecedented political, economic and humanitarian crisis, following the military takeover of the government in February and a third wave of severe COVID-19 cases (HNO, December 2021).

The military takeover prompted considerable civil backlash that resulted in the spread of armed conflict to new areas, as escalating violence contributed to over 558 000 people being internally displaced by the violence between February 2021 and March 2022 (UNHCR, March 2022). Conflict and the resulting civil unrest disrupted livelihoods, access to basic services, and essential food and non-food items. Armed clashes have also severely strained the delivery of humanitarian assistance to vulnerable populations (WFP & FAO, July 2021).

Conflict compounded ongoing economic challenges

Violence, along with the impact of COVID-19 containment measures, fuelled economic instability, including a currency crisis, rising inflation rates and a collapsing banking system, resulting in an 18 percent GDP contraction in 2021 and job losses (HNO, December 2021; IMF, October 2021). Pandemic-related border closures led to declining agricultural export earnings, while contributing to burgeoning costs for agricultural inputs. As a result of these factors, prices for key food items in certain areas have increased considerably, while lower wholesale prices for certain crops and rising costs for imported agricultural inputs have further cut farming incomes (HNO, December 2021).

In July and August, monsoon floods affected over 120 000 people in Mon, Kayin and eastern Shan states as well as in Tanintharyi region, which led to crop losses and aggravated acute food insecurity (MRCS, August 2021).

The combination of these factors is expected to lead to a worsening acute food insecurity situation in 2022, in part due to the disruption of essential land-preparation activities for the monsoon cropping season of rice and maize (FAO & WFP, July 2021). The resulting limitations on domestic food supplies could cause further price hikes for critical food items.



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Women and children are among the populations most vulnerable to acute food insecurity in Myanmar, as a combination of conflict, civil unrest, and economic instability have led to rising food prices and unemployment.

³ Ayeyardwady, Chin, Kachin, Kayah, Kayin, Mon, Rakhine, Shan North/East, and Yangon.

⁴ Caution should be observed when interpreting the results of rCARI. See Technical Notes for the disclaimer and further guidance.

Country of concern: Lebanon

Now in its third year of a major economic crisis, Lebanon is experiencing an unprecedented array of challenges with indications of severe consequences for the food security situation. In 2021, the Lebanese population continued to face a dramatic deterioration of the country's economic and financial systems, which drove soaring inflation and currency depreciation. The situation was aggravated by the effects of the COVID-19 pandemic, the 2020 Port of Beirut explosion, and high dependence on food and fuel imports.

Beginning in October 2019, Lebanon's economy was plunged into a financial crisis that culminated in the country's first sovereign default in March 2020 (World Bank, Spring 2021). The COVID-19 pandemic and related containment measures, political deadlock and widespread protests, and a major explosion at the Port of Beirut in August 2020 aggravated an already challenging economic recession and accelerated the collapse of the economy, while placing significant pressure on healthcare and social safety nets (OCHA, September 2021).

A historic economic collapse

The multi-faceted economic, financial, political, and health crisis precipitated one of the top ten most severe economic collapses globally since the 1850s. Since 2019, Lebanon's GDP fell from around USD52 billion in 2019 to USD21.8 billion in 2021 – representing a 58.1 percent contraction, or the largest contraction amongst 193 countries. Inflation soared to 145 percent on average in 2021, placing Lebanon third globally in terms of the highest inflation rates after Venezuela (Bolivarian Republic of) and the Sudan (World Bank, January 2022). Alongside rapid currency depreciation, supply-chain bottlenecks and fuel shortages, food inflation increased precipitously, standing at an annual 397 percent increase by February 2022 (Lebanon Central Administration for Statistics, March 2022). Already by March 2022, the food Survival Minimum Expenditure Basket (SMEB) had increased 1 062 percent since October 2019 (WFP, April 2022).

Rising inflation and currency depreciation led food imports coming through the Port of Beirut, the country's main port of entry for food imports, to decline by 12 percent in 2021 compared

to 2020, and 27 percent compared to 2019 (WFP, February 2022). This occurred in spite of Lebanon's high dependence on food imports, with domestic cereal production covering less than 20 percent of national consumption needs on average.

An increasingly worrying food security context

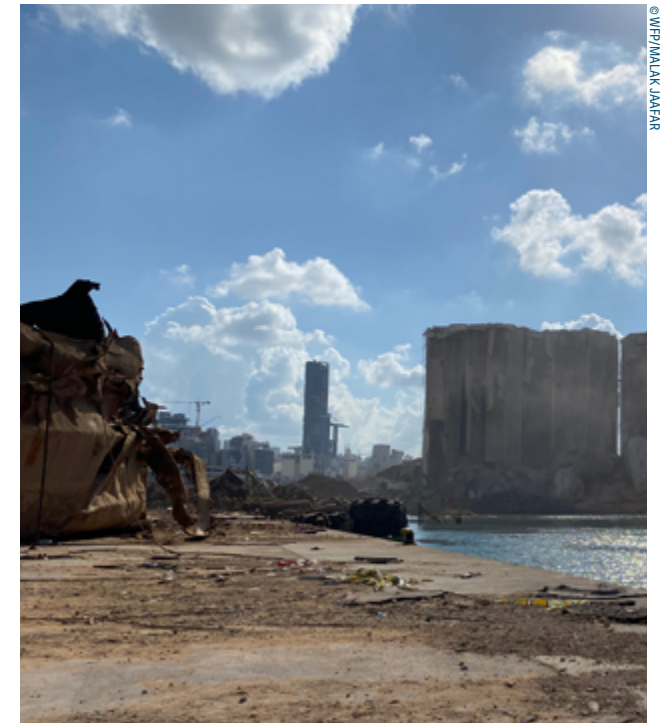
At the same time, despite favourable weather conditions for agricultural production during the last two years, the effects of the economic crisis reduced farmers' capacity to purchase agricultural inputs and fuel. Consequently, national 2021 cereal production was estimated to be 15 percent lower than the five-year average and in line with the 2020 harvest, which was also low due to the country's economic hardships (FAO-GIEWS, January 2022).

As a result of these factors, WFP estimated that nearly 46 percent of the Lebanese population was acutely food insecure in the second half of 2021, up from 32 percent in the first half of the year, based on WFP's rCARI methodology.⁵ By the end of 2021, inadequate food consumption also affected 33 percent of the population – more than ten percentage points above the values recorded in early 2021 (WFP, April 2022). As of December 2021, according to the rCARI methodology, the number of Lebanese families reporting challenges with food access continued to grow, with 88 percent of Lebanese families relying on less expensive food, 62 percent restricting consumption by adults, and 59 percent limiting portion size. In addition, 76 percent of surveyed Lebanese households in November-December 2021 were found to be employing crisis or emergency coping strategies, up from 67 percent at the beginning of the year (WFP, April 2022).

In addition to the Lebanese population, another 741 000 Syrian refugees were moderately to severely food insecure in 2021 as per WFP CARI methodology, adding additional pressure to the food security environment (VASyR, 2021).

In the absence of meaningful economic, financial and political reform, Lebanon's multi-dimensional crisis is expected to continue in 2022, concerns for food security outcomes within different

⁵ Caution should be observed when interpreting the results of rCARI. See Technical Notes for the disclaimer and further guidance.



Since 2019, Lebanon has suffered a devastating financial crisis, aggravated by the Port of Beirut chemical explosion in 2020, which destroyed large parts of the Lebanese capital.

population groups. Adding to these challenges is the ongoing crisis in Ukraine, from which Lebanon imported 81 percent of its wheat in 2020. The risk that higher import costs and increasing international energy prices may translate into further price increases for essential food items and fuel is concrete and materialising, with the cost of the weekly SMEB increasing by 22 percent alone since the start of the conflict until the beginning of April 2022. This in turn will further hinder purchasing power and capacity to secure essential needs for Lebanon's poorest households (WFP, April 2022).



CHAPTER 3

MAJOR FOOD CRISES IN 2022

Afghanistan

Acute food insecurity overview 2021

22.81M people

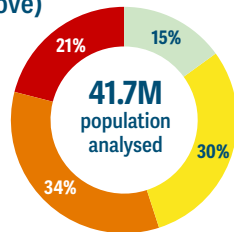
were in Crisis or worse (IPC Phase 3 or above) in November 2021–March 2022

14.07M people in Crisis (IPC Phase 3)

8.74M people in Emergency (IPC Phase 4)

55% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



12.47M people were in Stressed (IPC Phase 2) in the same period

The analysis covers **100%** of the population of **41.7 million** people.¹

Source: IPC, October 2021.

National population



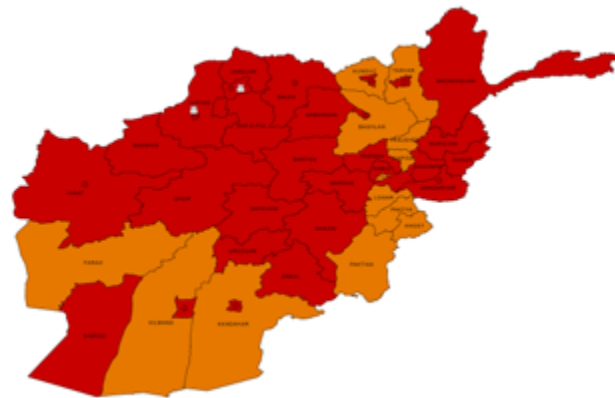
Source: WB 2020.

¹ At the request of the humanitarian community in Afghanistan, the October 2021 IPC report used Flowminder population estimates, which are used for the annual HRP. Previous IPC reports (as well as the GRFC) employed National Statistics and Information Agency of Afghanistan (NSIA) population estimates. This change ensures complete alignment with future HRPs.

MAP 3.1

IPC acute food insecurity situation, November 2021–March 2022

Of the 34 rural areas analysed, 22 were classified in Emergency (IPC Phase 4) and 12 in Crisis (IPC Phase 3). Of the 11 urban areas analysed, ten were classified in Emergency (IPC Phase 4) with Kabul the only urban area classified in Crisis (IPC Phase 3).



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed
- Urban settlement classification
- At least 25% of households meet 25–50% of caloric needs from humanitarian food assistance

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

Source: Afghanistan IPC Technical Working Group, October 2021.

Acute food insecurity trends

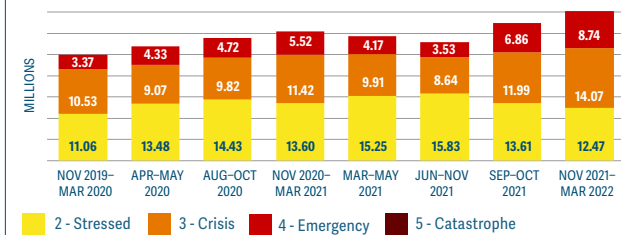
Numbers have risen since 2020. The number of people in Crisis or worse (IPC Phase 3 or above) increased from 16.9 million in the November 2020–March 2021 lean season to 22.8 million a year later, reflecting worsening food insecurity as well as the use of higher population estimates for the October 2021 analysis.

The number of people in Emergency (IPC Phase 4) increased by 58 percent to 8.7 million (IPC, November 2020 and October 2021). The 55 percent share of the population in Crisis or worse (IPC Phase 3 or above) in November 2021–March 2022 is the highest estimated by an IPC analysis in the country. The next highest was during the November 2018–February 2019 lean season (47 percent) largely due to the consequences of drought and conflict (IPC, November 2019).

Urban acute food insecurity also worsened due to growing unemployment, falling incomes and rising food prices. From November 2021–March 2022, around 5 million people in 11 cities, including 3 million in Kabul, were expected to face Crisis or worse (IPC Phase 3 or above) (IPC, November 2020 and October 2021).

FIG 3.1

Numbers of people in IPC Phase 2 or above, 2019–2022



Bars refer to selected analyses that are comparable (see Technical Notes). The base population used in 2019 was 36.66 million according to Flowminder estimates and rose to 41.7 million by the October 2021 IPC. Datasets from all analysis rounds between 2019 and 2022 are provided (see Appendix 1, table A1, page 243).

Source: Afghanistan IPC Technical Working Group.

Drivers of the food crisis in Afghanistan in 2021

Following years of protracted conflict, the August 2021 political transition to the Taliban prompted a halt to development assistance and freezing of national economic assets. Coupled with severe drought and the economic impact of COVID-19, these factors propelled steep increases in staple food prices, losses of income for many households, and cash shortages.

✳️ Conflict/insecurity

Intensified conflict prior and up until the Taliban takeover created record displacement in 2021, disrupting livelihood systems. Most were displaced to provincial urban centres, regional capitals and Kabul, which exacerbated the already oversaturated labour market and placed further pressure on limited facilities (HRP 2022, IPC, October 2021). Civilian casualties in the first half of 2021 reached record levels, including a sharp increase in deaths and injuries since May, when international military forces began their withdrawal and the Taliban offensive intensified (UNAMA, July 2021).

Following the takeover in August, although violence declined, attacks continued to occur, particularly those associated with the Islamic State – Khorasan province (ISK). The number of attacks associated with ISK increased from 60 in 2020 to over 300 by November 2021 (HNO, January 2022).

✳️ Weather extremes

In June, a devastating national drought was declared for the 2020–2021 season, and by the end of 2021, 80 percent of the country faced either severe or serious drought, with over 50 percent of water points drying up in some provinces (HNO, January 2022).

In rural areas, the severe impact of the second drought in four years affected the livelihoods of 7.3 million people reliant on agriculture and livestock (WFP, October 2021). Lower snowfall and snow-melt, which is vital for irrigation, reduced the area under cultivation and lowered casual agricultural labour opportunities in drought-affected areas (SFSA 2021, IPC, October 2021).

The 2021 cereal harvest was reportedly 24 percent below 2020 levels and 14 percent below the five-year average (FAO-GIEWS, December 2021). Almost 42 percent of livestock owners reported declining numbers of animals since 2020 largely due to lack of water and pasture (IPC, October 2021).

The Whole of Afghanistan 2021 Assessment² found that drought-affected households more frequently reported loss of income (81 percent compared to 67 percent of non-drought affected), lack of access to food, and wider use of emergency coping strategies (REACH, November 2021).

🏠 Economic shocks, including COVID-19

Following Afghanistan's political transition in August 2021 and the consequent freezing of USD 9.5 billion in national assets, the banking system suffered severe disruptions, and the national currency lost 12.5 percent of its value (IPC, October 2021). GDP contracted by an estimated 40 percent (HNO, January 2022).

Both the formal and informal economic sectors suffered dramatically due to disruptions to market, financial and trade mechanisms, loans, and a sudden drop in international development assistance, which had accounted for 75 percent of public expenditures (HNO, January 2022). These disruptions had enormous impacts on employment, particularly for women. Over 500 000 Afghan security force members lost their jobs and civil servants were unpaid (IPC, October 2021).

Although August–September corresponds to the post-harvest season when many food prices usually decrease, there was a dramatic price increase for wheat flour, cooking oil, and other key food commodities, amid reduced domestic harvest, high international commodity prices and concerns about ability to finance imports (IPC, October 2021). The average food basket cost increased 16 percent between June and September 2021 (REACH, November 2021).



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Having lost their jobs, these former teachers are selling their belongings on the street to buy food for their families. Economic collapse has left many jobless, including school principals, military, and government workers. Humanitarian needs continued to rise as the bitter winter set in.

² The assessment between August 4 and October 3 2021 was conducted by REACH in coordination with OCHA and the Afghanistan ICCT and covered 9 880 households and 7 100 key informants.

Displacement 2021

IDPs

Nearly 1 million people were newly displaced in the last quarter of 2021 with the largest numbers arriving in Nangarhar province and Kabul district (IOM DTM, December 2021).³

 **5.8M** IDPs

Source: IOM DTM Afghanistan, December 2021.

The intensified conflict in the first half of the year, drought, political uncertainty and the economic upheaval experienced since 15 August 2021 drove high volumes of population movements. During 2021, around 1.3 million people were internally displaced, with nearly a million people displaced between August and end of December 2021 (IOM DTM, December 2021). About 46 percent of conflict-induced displaced populations did not receive humanitarian assistance (HNO, January 2022).


Most newly displaced people moved to provincial or urban areas, further straining saturated labour markets and essential services (HNO, January 2022). Two in three IDPs were displaced within their home province. As of June 2021, 325 094 were in informal settlements. Herat hosts 18 percent of all IDPs, 63 percent of whom were displaced by conflict and 37 percent by natural disaster, with the majority residing in urban areas (IOM DTM, June 2021b).

Assessments show that 60 percent of recently displaced IDP households struggled to obtain food in the month prior to data collection (REACH, December 2021).

³ Assessments were carried out with 10 129 communities in 368 districts across 34 provinces in Afghanistan. 988 817 IDPs were identified as having arrived in the assessed communities between August and December 2021 (IOM DTM, December 2021).

Returnees

Refugees returning to Afghanistan and internally displaced people returning to their homes remain highly vulnerable to the drivers of food insecurity.

 **1.2M** undocumented returnees in 2021 from Pakistan and Iran

 **1 317** documented returns in 2021

 **170 000** IDPs returned to their homes in 2021

Source: IOM, November 2021.

The level of undocumented returnees in 2021 surpassed the record number of 2020 and was more than double that of 2019 (IOM, November 2021). The WoA Assessment found that 40 percent of recent returnees were forced to leave by the host country, representing the most frequent primary push factor, followed by unemployment and poverty, indicating their extreme socioeconomic vulnerability (REACH, December 2021.) They return to crowded informal settlements without basic services where they are exposed to health and protection risks. Lack of civil documentation is also a barrier to them accessing basic services (HNO, January 2022).

According to the WoA Assessment, 78 percent of cross-border returnees did not have access to nutrition services in the previous three months largely due to non-availability of this facility. More than half (57 percent) reportedly struggled to obtain or afford food (REACH, December 2021).

Additional drivers of acute food insecurity and malnutrition for displaced people

Nearly all IDPs (97 percent) reported experiencing loss of employment. Of these, 95 percent experienced reduced income, 96 percent saw price rises and for 77 percent, drought had constrained food production, according to October 2021 assessments with 3 701 communities across 29 provinces (IOM DTM, June 2021 and October 2021).

Lack of civil documentation is particularly challenging for IDPs and **returnees** who are unable to access the limited government services that do exist without being able to prove their identities. Lack of documentation also presents challenges to accessing health care and the attainment of credit from banking institutions (HNO, January 2022).

Displacement causes rupture of community networks and safety nets, creating barriers to seeking support. IDPs' livelihood assets have been either looted, sold at very meagre prices or, in the case of livestock, lost. In the absence of agriculture and livestock-based livelihoods and with no urban labour skills, they are left with limited livelihood options in their new environment. Their arrival increases the pressure on the local job market, reduces wages and adds strain on infrastructure, ultimately risking to fuel tensions and conflict with the local population (HNO, January 2022).

In urban areas, they are cut off from their regular nutrition and health service provision. They are exposed to insecure rental agreements and tend to spend more than twice the amount on rent than host communities, further sapping their ability to cater for other needs. Newly displaced populations are disproportionately affected by WASH needs, with 79 percent of households reporting insufficient water access. They are more likely to rely on unimproved latrines and to have no hand washing station, further enhancing health risks (REACH, December 2021).

Displacement 2021 *(continued)*

Refugees and asylum seekers

The majority of Pakistani refugees in Afghanistan face challenges with acute food insecurity, according to the 2021 Whole of Afghanistan (WoA) Assessment.

 **72 500** refugees/asylum seekers

Source: UNHCR, December 2021.

Most refugees were displaced from Pakistan to Afghanistan in 2014 and settled in Khost and Paktika provinces in the southeastern region. Lack of progress in passing proposed legislation on asylum has left refugees and asylum seekers in Afghanistan without the necessary legal framework to enable them to obtain necessary documentation to move freely throughout the country, work in the formal sector, pursue higher education, or enter into contracts, leaving them dependent on humanitarian assistance and remittances to meet basic needs (HNO, January 2022).

The 2021 WoA Assessment indicated that 76 percent of refugee households had poor or borderline food consumption. More than half need WASH assistance. The collapse of health and nutrition facilities in Khost and Paktika has resulted in insufficient access to nutrition services. Some 84 percent of households did not access nutrition services in the previous three months, with 47 percent indicating that the main barrier was a lack of facilities. Nearly all refugees (99.8 percent) reported not receiving humanitarian aid in the previous 30 days, compelling them to borrow money to buy food (REACH, December 2021).

Key nutrition challenges



3.1M children under 5 years were **wasted**
895 000 of them were **severely wasted**



720 000 pregnant and lactating women were **acutely malnourished**

Source: HNO, December 2020.

The nutritional status of children under 5 years old has been concerning in recent years in most provinces of the country.

The findings of the most recent SMART surveys (2015-2020) show that 27 out of 34 provinces are currently above the 'very high' (≥ 15 percent) threshold for child wasting. From 2015-2019, the prevalence of wasting among children under 5 years of age remained stable at 15.3 percent, of whom 6.2 percent were severely wasted (HNO, December 2020).

The pausing of development funding to the health system following the August political transition is likely to impact negatively on coverage of health and nutrition interventions (HNO, January 2022).

Key drivers

Health services and household environment

Access to healthcare, and particularly treatment of nutrition challenges, has been crippled by active conflict, the COVID-19 pandemic and subsequently by cracks in the public health system coverage, especially in rural areas. According to the 2021 WOA, the most commonly reported barriers in 2021 were not being able to afford treatment (25 percent), unavailability of medicines or treatment (23 percent) and non-functional health facilities (19 percent) (REACH, December 2021).

A functionality assessment for static health facilities across the country conducted by WHO in September 2021 found only 17 percent of health facilities were fully functional. This had improved to 41 percent by mid-November 2021. Women with more complex health needs, such as pregnant women, have reportedly been facing major challenges accessing health services including fear and insecurity, mobility restrictions, long distances, lack of safe transportation and the lack of trained female staff (HNO, January 2022).

Afghanistan is prone to malaria and has the world's third highest burden with over 76 percent of the population living in at-risk areas. In 2021, four cases of wild polio virus and 43 vaccine-derived cases of poliovirus type 2 were reported in the country. Further restrictions on door-to-door vaccination campaigns are expected to exacerbate this issue in 2022. Acute watery diarrhoea (AWD), measles and dengue fever outbreaks were partly fuelled by people's inability to access safe water (HNO, January 2022).

Food security and access to healthy diets

Household resilience capacities have been reduced by the ongoing conflict, economic crisis and recurring climate-related disasters, which make them susceptible to acute malnutrition (HNO, January 2022).

Given the presence of significant populations in Emergency (IPC Phase 4), many households likely faced large food consumption gaps that are reflected in very high acute malnutrition and excess mortality (IPC, October 2021).


Caring and feeding practices


Poor feeding practices for infants and young children are strongly linked with acute malnutrition. Afghanistan has made some progress towards achieving global nutrition targets for exclusive breastfeeding – with the percentage of exclusively breastfed infants under 6 months rising from 43 percent in 2015 to 57.5 percent in 2018. However, no progress has been made in reducing the prevalence of anaemia among women of reproductive age, which increased from 38.7 percent in 2014 to 42.6 percent in 2018 (Global Nutrition Report, 2021).

Acute food insecurity forecast, 2022

 **22.81M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in November 2021–March 2022

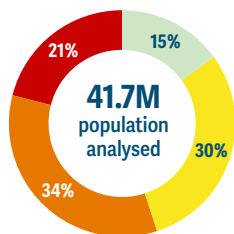
 **14.07M people**
in Crisis
(IPC Phase 3)

 **8.74M people**
in Emergency
(IPC Phase 4)


 The analysis for late 2021 is valid for early 2022. Very high numbers of people in Crisis or worse (IPC Phase 3) will persist.

55% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **12.5M people** were forecast to be in Stressed (IPC Phase 2)

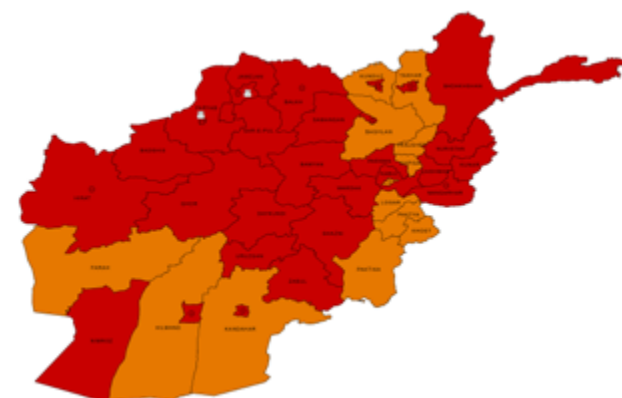
 The analysis covers **100%** of the population of **41.7 million** people.



Source: IPC, October 2021.

MAP 3.2

IPC acute food insecurity situation, November 2021–March 2022

Of the 34 rural areas analysed, 22 were classified in Emergency and 12 in Crisis (IPC Phase 3). Of the 11 urban areas analysed, ten were classified in Emergency (IPC Phase 4) with Kabul the only urban area classified in Crisis (IPC Phase 3).



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed
-  Urban settlement classification
-  At least 25% of households meet 25–50% of caloric needs from humanitarian food assistance

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

Source: Afghanistan IPC Technical Working Group, October 2021.

Conflict-related displacement, drought and economic instability will continue to fuel widespread Emergency (IPC Phase 4) outcomes in Afghanistan in 2022.

Conflict/insecurity

In 2022, conflict and violence are expected to subside relative to previous years (IPC, October 2021). Although some conflict by armed groups could occur, these episodes are not expected to significantly affect food security. Increasing numbers of conflict-displaced populations returning to their place of origin are likely to face a dearth of basic services, loss of livelihood opportunities and lack of family support networks (HNO, January 2022).

Weather extremes

The continuing La Niña climatic episode, bringing below-average winter precipitation for the second consecutive year (FAO, November 2021), is likely to constrain agricultural production, resulting in a 20–30 percent decline in wheat crop production relative to the five-year average (IPC, October 2021). Due to poor pasture conditions and high fodder prices, over three million livestock were estimated to be at critical risk during the winter, resulting in an increase in distress livestock sales (FAO-GIEWS, December 2021).

Economic shocks, including COVID-19

The IPC analyses assumed that sanctions on the de facto government will continue to adversely impact the economy and constrain cash availability, challenging markets, trade, and the payment of salaries. The resumption of foreign aid flows is uncertain, while trade sanctions will continue to hinder food imports. Annual average per capita income is expected to drop precipitously from USD 508 in 2020 to USD 350 in 2022. Male unemployment may almost double from 15.2 percent in 2019 to 29 percent in 2022 (UNDP, December 2021).

Given severe constraints on markets, food imports, salaries and food production, the average food basket cost is likely to increase even further in 2022 (HNO, January 2022).

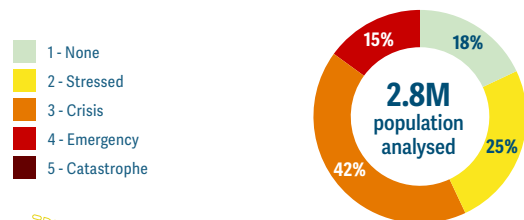
Angola

Acute food insecurity overview 2021

1.59M people were in Crisis or worse (IPC Phase 3 or above) in October 2021–March 2022

1.17M people in Crisis (IPC Phase 3) **0.42M people** in Emergency (IPC Phase 4)

58% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



0.68M people were in Stressed (IPC Phase 2)

The analysis covered 17 rural municipalities in three southwestern provinces, home to **9%** of the country's total population of **32.1 million** people. It only covered rural areas.

Source: IPC, September 2021.

National population



Source: WB 2020.

MAP 3.3

IPC acute food insecurity situation, October 2021–March 2022

Eight areas were classified in Emergency (IPC Phase 4) and the remaining nine in Crisis (IPC Phase 3). In four municipalities – Cahama, Gambos, Camucuio and Virei – at least 75 percent of the population was in Crisis or worse (IPC Phase 3 or above).



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

Source: Angola IPC Technical Working Group, September 2021.

Acute food insecurity trends

Numbers have risen since 2020. In 2021, the worst drought in 40 years and a locust infestation reduced post-harvest food supplies to 1–3 months in some of the municipalities in three agriculture-dependent southern provinces (IPC, September 2021).

The number of people in Crisis or worse (IPC Phase 3 or above) increased from 1.3 million (49 percent of the analysed population) during the June–September 2021 post-harvest season to 1.6 million people by October 2021–March 2022 (IPC, September 2021).

Between July–September 2021 and October 2021–March 2022, there was a notable deterioration in area phase classification, with the number of areas classified in Emergency (IPC Phase 4) rising from six to eight (IPC, September 2021).

Drivers of the food crisis in Angola in 2021

Two successive years of drought-reduced harvests, which limited households' food supplies and curtailed income-earning opportunities, in tandem with rising food prices resulted in very high levels of acute food insecurity in the three southwestern provinces.

Weather extremes

An analysis of rainfall and vegetation data since 1981 indicates that during the 2020–2021 rainy season, the southwestern provinces of Angola experienced the worst drought of the last 40 years (WFP, December 2021). Cumulative seasonal rainfall amounts in key producing provinces of Namibe, Cunene, Huila and Cuanza Sul were 60–80 percent below the average (FAO-GIEWS, November 2021).

The recurrent effects of drought have reduced both agricultural and livestock production and contributed to an increase in food prices. Many households reported loss of animals due to

lack of pasture and drinking water as well as disease and theft. For instance, in the municipality of Virei, around 75 percent of livestock breeders declared loss of cattle and 78 percent loss of goats (IPC, September 2021).

Due to the low cereal outturn in 2021, cereal import requirements were estimated at about 12 percent higher than the five-year average in April 2021–March 2022 (FAO-GIEWS, November 2021).

Economic shocks, including COVID-19

Income-generating opportunities for farming households in 2021 declined following two successive years of reduced harvests and five consecutive years of economic recession.

These factors in turn reduced access to agricultural inputs (FAO-GIEWS, November 2021). Even before the start of the lean season in October 2021, households had exhausted their food reserves and were more dependent on markets for food (IPC, September 2021).

According to data by the Instituto Nacional de Estatística (INE), prices of food increased by 36 percent between September 2020 and September 2021. Besides being driven by the low domestic cereal production, the price increases were also the result of a weak national currency, resulting in high food prices that have curbed household food access. The exchange rate was relatively stable in 2021, but the currency had lost significant value compared to the preceding two years (FAO-GIEWS, November 2021). In 2021, the annual consumer price inflation rate reached 24.4 percent (IMF, 2022).

Crop pests and diseases

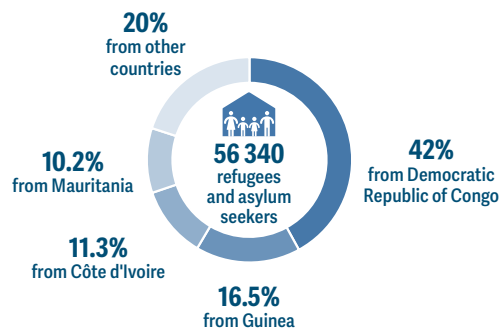
Since April 2021, swarms of African Migratory Locusts were observed moving between Cuando Cubango to Cunene province (FAO, August 2021).

Locusts caused damage to crops in Cuanhama, Namacunde, Omandja and Curoca (Cunene), Virei and Mocamedes (Namibe) and Humpata (Huila) (IPC, September 2021).

Displacement 2021

FIG 3.2

Over 56 000 refugees and asylum seekers are spread throughout Angola, including in Luanda province



Source: UNHCR, December 2021.

COVID-19-related movement restrictions exacerbated pre-existing barriers to income earning for refugees in Angola. Humanitarian food assistance remains critical to ensuring their food security in the Lovua settlement in the North.

While Angolan Law allows refugees to engage in gainful activities and access education and health assistance, in practice, access to work opportunities, land, services and assistance is limited due to discontinued registration of new refugee arrivals since October 2017 and lack of issuance of documentation (UNHCR, April 2021).

In March 2021, among surveyed refugees in Lovua, 17 percent had poor food consumption and 31 percent borderline food consumption (WFP, June 2021).

Many of the unregistered Congolese refugees and asylum-seekers in urban areas (mainly Luanda) have lived in Angola for

decades. Most are not willing or able to return home, although they face discrimination and challenges in accessing education, civil registration, healthcare, banking services and livelihoods opportunities.

Many refugees are forced to employ negative coping mechanisms, including the sharing of food rations, shelter and other assistance, increasing protection risks and sometimes creating tensions (UNHCR, April 2021).

Poverty, lack of livelihoods, limited dietary diversity, poor sanitation and hygiene conditions, lack of community awareness, and high burden of communicable diseases underlie malnutrition. Non-existence of systematic therapeutic and supplementary feeding programmes in Lovua settlement challenges the prevention and treatment of acute malnutrition among children and women of reproductive age (UNHCR, April 2021).

Key nutrition challenges



114 000 children under 5 years were **wasted** in April 2021–February 2022
37 000 of them were **severely wasted**

Source: IPC AMN, September 2021.

The three drought-affected southern provinces of Cunene, Huila and Namibe are facing a child wasting crisis.

In six out of ten analysed districts, the prevalence of child wasting exceeded the 15 percent ‘very high’ WHO threshold for wasting, reaching nearly 23 percent in Humpata, 20 percent in Mocamedes and 17 percent in Bibala (IPC AMN, September 2021).

Factors contributing to the high levels of wasting in drought-affected southern Angola include inadequate and poor dietary intake and the high prevalence of infectious diseases, linked to lack of access to safe drinking water and improved sanitation, low vaccination coverage and low health-seeking behaviour.

Key drivers

Food security and access to healthy diets

Inadequate and poor dietary intake is mainly due to high levels of drought-driven acute food insecurity in addition to poor care and feeding practices. Out of the 17 municipalities covered by the IPC acute food insecurity analysis, nine were covered by an IPC acute malnutrition analysis. Those municipalities facing high levels of child wasting also have high levels of acute food insecurity. For instance, in Humpata where 23 percent of children are wasted, 65 percent of the population are in Crisis or worse (IPC Phase 3 or above). In Bibala, where 17 percent of children are wasted, 70 percent of the population are in Crisis or worse (IPC Phase 3 or above) (IPC AMN, September 2021).

Caring and feeding practices

In all municipalities, the percentage of children who are exclusively breastfed up to 6 months is low. At the national level, it is just 37.4 percent, though data is outdated (DHS, 2015).

Children aged 6–23 months generally do not receive a Minimum Acceptable Diet (MAD) of at least three meals a day and at least four food groups in their diet. The municipalities of Jamba and Moçâmedes fared the best with just 10 percent receiving a daily MAD (IPC AMN, September 2021).

Health services and household environment

Over 60 percent of the analysed population still drinks water from unsafe sources, reaching 70–90 percent in Bibala, Chibia, Cuvelai, Humpata, Jamba and Quilengues. More than 70 percent of households do not have a latrine and of the few that do, fewer than 5 percent are improved in Bibala, Camucuio, Chibia Cuvelai, Humpata and Quilengues and only 10–30 percent are improved in Cuanhama, Jamba, Moçâmedes and Namacunde (IPC AMN, September 2021).

An estimated 1.2 million people are facing water scarcity as a direct consequence of the drought. A WASH study found that many water points in the most drought-affected communes are not working (UNICEF, December 2021).

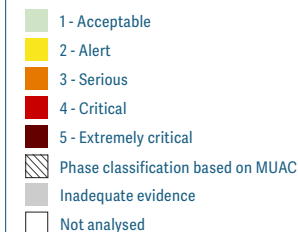
Around half of children had at least one sign/symptom of infectious disease (diarrhoea, fever or cough) with the percentage even higher in the municipalities of Chibia, Jamba, Quilengues and Bibala. Low health-seeking behaviour when children are sick was identified as the main contributing factor in seven municipalities (IPC AMN, September 2021).

Other diseases affecting children included malaria, measles, vaccine-derived polio, yellow fever and cholera (UNICEF, December 2021). More than half of children are not vaccinated against measles with the lowest rates in Namacunde, Jamba, Bibala and Chibia (IPC, June 2021).

MAP 3.4

IPC acute malnutrition situation, October 2021–February 2022

During the lean season, characterized by food shortages and a higher prevalence of diseases, four municipalities in Huila and Namibe provinces were expected to be in Critical (IPC AMN Phase 4) and four municipalities in Cunene, Huila and Namibe provinces in Serious (IPC AMN Phase 3).




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

Source: Angola IPC AMN Technical Working Group, September 2021.


Acute food insecurity forecast, 2022

 **1.59M people**

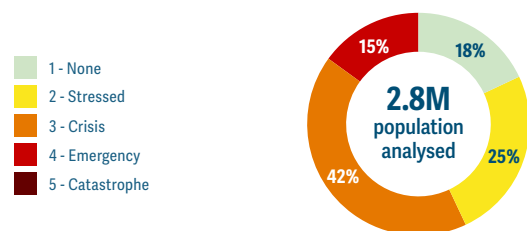
were forecast to be in Crisis or worse (IPC Phase 3 or above) in October 2021–March 2022

 **1.17M people**
in Crisis
(IPC Phase 3)

 **0.42M people**
in Emergency
(IPC Phase 4)

 The situation was forecast to remain critical in early 2022 (the analysis period is the same as late 2021 corresponding to the lean season). However, below-average rainfall was projected, so the situation may worsen.

58% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **0.68M people** were forecast to be in Stressed (IPC Phase 2)

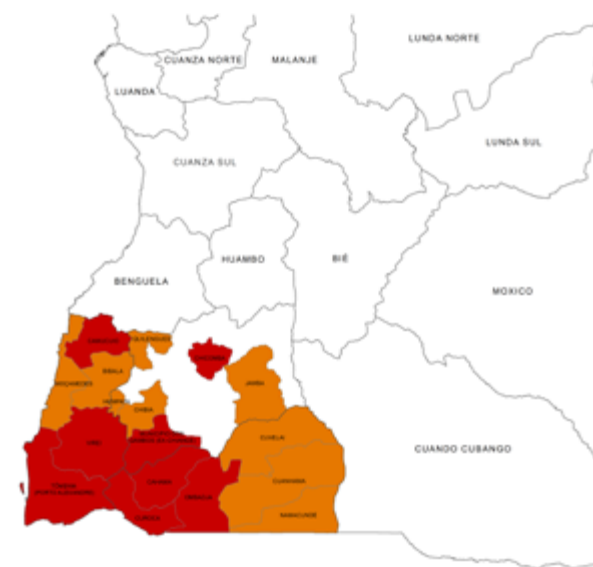
 The analysis covered 17 rural municipalities in three southwestern provinces, home to **9%** of the country's total population of **32.1 million** people. It only covered rural areas.

Source: IPC, September 2021.

MAP 3.5

IPC acute food insecurity situation, October 2021–March 2022

Of the 17 areas analysed, eight were classified in Emergency (IPC Phase 4). The remaining nine were in Crisis (IPC Phase 3).



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

Source: Angola IPC Technical Working Group, September 2021.

The outlook for Angola indicates a high chance of unfavourable rainfall, raising the likelihood of a third successive reduced cereal harvest in 2022.

Weather extremes

Weather forecasts for the 2021/22 cropping season indicated an increased probability of below-average rainfall amounts in the main cereal-producing provinces in central areas of the country. The unfavourable weather outlook also stretches to drought-affected southern provinces. Reflecting the effects of the previous droughts and sparse rainfall amounts in October and November 2021, soil moisture reserves were at low levels during the planting period, which is likely to have hindered crop emergence and could adversely affect final yields (FAO-GIEWS, November 2021).

As there are also indications of low seed availability, the area sown with cereal crops in 2022 is expected to be reduced, further constraining production prospects (FAO-GIEWS, November 2021).

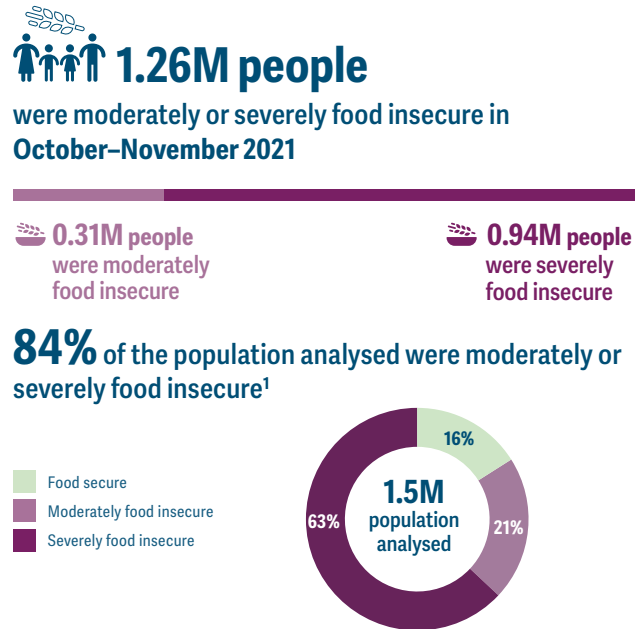
Economic shocks, including COVID-19

The successive reduced harvests and five consecutive years of economic recession have also severely curbed farming households' income-generating opportunities and consequently reduced their economic capacity to access agricultural inputs (FAO-GIEWS, November 2021).

Despite an expected decrease relative to 2021, the annual inflation rate is projected to remain close to 15 percent in 2022, thereby limiting household purchasing power (IMF, 2022).

Bangladesh (Cox's Bazar)

Acute food insecurity overview 2021



The analysis covered **1.5 million** Rohingya refugees and host community members, of whom 0.9 million were Rohingya refugees in Ukhiya and Teknaf camps, excluding Bhasan Char area, and 0.59 million were host community members.

Sources: *Refugee population*: UNHCR November 2021; *Host population*: 2011 Bangladesh Bureau of Statistics, projected to 2019, for Teknaf and Ukhiya Upazilas host community, excluding St Martin union.

¹ Based on WFP ENA methodology (see Technical Notes for more information).

MAP 3.6
Cox's Bazar and refugee settlements, 2021



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

Source: WFP, 2021.

Acute food insecurity trends

Numbers remained relatively stable compared to 2020. Over 1.26 million Rohingya refugees and host community members were moderately or severely food insecure based on WFP ENA methodology in Cox's Bazar district of Bangladesh in October–November 2021, representing 84 percent of the population analysed. Within this, the majority (63 percent) were found to be severely food insecure.

Of the total population found to be moderately or severely food insecure, around 84 percent were Rohingya refugees living in 34 camps in hilly and rugged areas of Ukhiya and Teknaf upazilas. The remaining 16 percent were members of the Bangladeshi host community.

This represents a generally stable trend since 2020, when 1.2 million people were acutely food insecure and in need of humanitarian food and livelihood assistance in Cox's Bazar. As in 2020, food insecurity and vulnerability levels remained alarmingly high among Rohingya households, with 95 percent of households requiring humanitarian food and livelihood assistance to meet their basic food needs. Although the proportion of Rohingya households with poor or borderline food consumption declined between 2020 and 2021 from 50 percent to 45 percent, the proportion is still higher than pre-pandemic levels in 2019 (42 percent) (REVA 5, March 2022).

Similarly, food insecurity/vulnerability levels among the host community rose modestly from 51 percent of the population in 2020 to 52 percent in 2021 (WFP, March 2022). The proportion of host community households facing poor or borderline food consumption rose from 33 percent in 2020 to 38 percent in 2021, which underlines difficulties faced by host communities in recovering from job and livelihood losses incurred during the COVID-19 pandemic (REVA 5, March 2022).

Drivers of the food crisis in Bangladesh (Cox's Bazar) in 2021

Against the backdrop of the Rohingya displacement crisis, which led hundreds of thousands of refugees to flee to Cox's Bazar in Bangladesh, the COVID-19 pandemic brought new economic hardships to refugee camps in Cox's Bazar, limiting population movements, putting upward pressure on food prices and constraining on-site assistance provided by aid organizations.

This situation was compounded by a massive fire in March 2021 and a particularly wet monsoon season that brought flooding and landslides.

*** Conflict/insecurity**

The 2017 crisis in Myanmar, which drove around 750 000 Rohingya to flee to Cox's Bazar in Bangladesh, remains the unresolved cause of this food crisis. Incidents of tension and violence within and surrounding the camps between refugees and host communities continued in 2021, exacerbated by fears of COVID-19, the impacts of lockdowns, the extremely congested living conditions in the camps and limited opportunities for education, self-reliance and skills development (ACAPS, May 2021).

In both Rohingya and host communities, 13 percent of households reported safety concerns in 2021 that affected freedom of movement for at least one household member or their access to food, livelihoods or services. In the camps, the most frequently reported security concerns were thefts and robberies (44 percent), movement limitations (35 percent), harassment (27 percent) and killings (21 percent). In the host community, households reporting concerns about killings or murders significantly decreased from 30 percent in 2020 to 5 percent in 2021. The most frequently reported safety concerns were thefts and robberies (74 percent), followed by harassment, discrimination and sexual violence/abuse (WFP, March 2022).

🏠 Economic shocks, including COVID-19

On 5 April 2021, the Government of Bangladesh instituted a second national lockdown. On 19 May, five camps were placed under complete lockdown and the remaining 34 were under heavy containment measures. These measures, coupled with the inability to address the secondary economic impacts of the 2020 lockdown, resulted in the loss of income-earning opportunities for many host community and refugee households exacerbating pre-existing vulnerabilities (ACAPS, May 2021).

Employment opportunities for refugees are particularly constrained, given that refugees are not allowed to work formally, with half not engaged in any sort of income-generating activity in 2021, excluding the sale of humanitarian assistance (WFP, March 2022). Limited self-reliance opportunities have in turn reportedly increased credit-seeking tendencies among refugees (UNHCR & WFP, July 2021, FAO & WFP, December 2021). In 2021, 79 percent of refugee households were in debt, the highest since 2019 (WFP, March 2022).

The lack of income sources and livelihood opportunities compels nearly all (95 percent) of Rohingya households to be entirely dependent on humanitarian assistance. Despite the current level of humanitarian assistance, 51 percent cannot afford the minimum expenditure basket (MEB). In 2021, Rohingya households spent around 71 percent of their monthly budget on food, only slightly below the severe economic vulnerability threshold of 75 percent (WFP, March 2022).

The impact of COVID-19 restrictions on the income-earning opportunities of host community households was also significant as they do not all receive blanket food assistance and rely on markets to purchase food (ACAPS, May 2021). The unemployment rate remained at similar levels for the host community between 2020 and 2021 (18 percent), implying it had yet to recover from the COVID-19 economic shock. Around 77 percent of host community households were in debt, the highest level since 2019, and on average they spent around 65 percent of their monthly budget on food (WFP, March 2022).

Despite a good harvest, in August–November 2021 rice prices remained higher than the previous year, as did imported essential commodities such as red lentils, soybean oil and sugar. The November 2021 food basket cost was 2 percent higher than that of November 2020, which was 16 percent higher than the pre-COVID-19 March 2020 food basket value (FAO & WFP, December 2021).

***🌧 Weather extremes**

In March 2021, a massive fire, brought on in part by dry conditions, reduced nearly 10 000 refugee shelters to ashes and displaced at least 45 000 people, was followed by a particularly wet monsoon season from July (UNHCR, September 2021). Between 27 July and 1 September 2021, flash floods, waterlogging and landslides across the Rohingya refugee camps and surrounding Bangladeshi communities affected nearly 88 000 refugees and displaced over 25 000 (ISCG, September 2021).

By mid-August, the floods had affected the livelihoods of 53 percent of refugee households and 84 percent of host community households (WFP & IOM, February 2022).

Key nutrition challenges



11.4% of Rohingya refugee children living in Kutupalong, Mega and Nayapara camps in Cox's Bazar were wasted in 2020

Source: UNHCR & WFP, July 2021.

Although the nutritional status of children under 5 years has improved since 2017, malnutrition levels remain high.

Wasting levels fell significantly from 18.2 percent in 2017 to 11.4 percent in 2020 in Cox's Bazar, but this prevalence is still classified as 'high' according to WHO classification. In Kutupalong refugee camp – the world's largest refugee camp – the prevalence of child wasting fell from 24.3 percent in October–November 2017 (shortly after the major influx of refugees from Myanmar) to 11.9 percent in November–December 2020 (UNHCR & WFP, July 2021).

In Mega camp, the prevalence fell from 19.3 percent to 11.3 percent between 2017 and 2020. However, in Nayapara camp in Teknaf, 14.8 percent of children were wasted in November–December 2020, close to the 'very high' WHO public health threshold (>15 percent). At 34.1 percent, the stunting prevalence is 'very high.' However, across all three camps, it has decreased since 2017 when it exceeded 43 percent (UNHCR & WFP, July 2021).

More than half (55 percent) of children aged 6–23 months across all camps are anaemic, well above the 40 percent threshold for a severe public health problem (UNHCR & WFP, July 2021).

According to a UNHCR and WFP nutrition causal analysis, children below 2 years of age were identified as the most vulnerable to anaemia and wasting. With stunting, however, children older than 2 years were found to be most vulnerable (UNHCR & WFP, July 2021).

Key drivers

The key determinants of malnutrition in the camps are poor maternal and childcare practices, diseases, low birth-spacing, early pregnancy, non-optimal hygiene practices and inadequate dietary diversity.

Health services and household environment

According to a UNHCR and WFP nutrition causal analysis, the two major risk factors identified for undernutrition are low birth spacing and/or early marriage/pregnancy, which relates to maternal health, and non-optimal hygiene practices, which relates to water, sanitation and hygiene (UNHCR & WFP, July 2021).

The complete COVID-19 lockdown from April 2020 led to significant changes in the humanitarian access to camps and continued provision of services, such as health and nutrition, and WASH. All programmes considered non-essential were temporarily halted and a significant number of programmatic changes were introduced as a result (UNHCR & WFP, July 2021).

The diversion of healthcare resources to the COVID-19 response and the global border closures in 2020 resulted in a shortage of medical personnel and resources within the Rohingya refugee camps in Bangladesh, negatively impacting the delivery of regular health services such as routine immunization, sexual and reproductive health, and the treatment of non-communicable diseases (ACAPS, May 2021). A fire in March 2021 in the refugee camps in Ukhiya Upazila also led to extensive destruction of property and facilities, including hospitals and primary health care facilities (UNHCR & WFP, July 2021).

Although WASH indicators improved between 2019 and 2020, sanitation coverage, quantity water collected at household level and access to handwashing devices remained below standard. Half of Rohingya households faced difficulties in accessing drinking water and 59 percent in accessing sanitation facilities. Although 100 percent of water was protected/treated and refugees were satisfied with its quality, they were not satisfied with the quantity, and faced long distances, queuing time and functionality problems.

Sanitation concerns referred to the inadequate number of latrines, waiting time, cleanliness, lighting, as well as poor drainage. Lack of space in the camps limits the increase of WASH facilities and other services like solid waste management sites. The use of WASH facilities is highly gendered, and women and girls expressed concerns about the distance to latrines and grave fears of sexual abuse when using them (UNHCR & WFP, July 2021).

During the monsoon season, cases of malnutrition tend to increase, associated with higher morbidity among children, especially in terms of respiratory infections and incidence of diarrhoea. A remote assessment conducted by IOM and WFP in mid-August 2021 found that as a result of monsoon floods in 2021, 69 percent of households in camps and 76 percent in host communities faced difficulties accessing sanitation, and 63 percent of households in camps and 59 percent in host communities faced difficulties accessing drinking water. Because of the floods, accessing nutrition assistance was challenging for 29 percent of refugee households and for 68 percent of host community households enrolled in nutrition programmes (WFP & IOM, February 2022).

Food security and access to healthy diets

COVID-19 lockdown measures had a negative impact on diet quantity and quality. Around 70 percent of the calorific intake comes from carbohydrates, with only 4 percent from plant proteins, only 5–8 percent from animal and fish proteins, and 14 percent from fat (UNHCR & WFP, July 2021).

The proportion of Rohingya households with inadequate food consumption (poor and borderline) improved in 2021 reaching 45 percent, compared to 50 percent in the previous year – yet remains higher than pre-COVID-19 levels in 2019 (42 percent). In the host community, the proportion of inadequate food consumption increased in 2021 reaching 38 percent of households surveyed, driven by the increase in the proportion of households with borderline food consumption – showing continued challenges for the host population in meeting their food consumption needs after COVID-19 (REVA 5, March 2022).

Forecast and drivers, 2022

No 2022 forecast is available for the Rohingya refugee or host community in Cox's Bazar, Bangladesh. With little prospect of returning home to Myanmar in 2022, Rohingya refugees face rising social tensions and are highly exposed to the risk of fires, floods and landslides. Increasing food and fuel prices and falling incomes – at least partly attributable to the Ukraine crisis, will further dent household purchasing power.

Insecurity

The current political, economic and social crises in Myanmar following the February 2022 coup prevent many Rohingya refugees from returning to Rakhine state.

Meanwhile, in the overcrowded camps of Cox's Bazar, insecurity within the camps persists, as do tensions over labour competition between Rohingyas and Bangladeshi communities. In order to escape deteriorating conditions in the camps, some refugees are choosing to make the perilous journey on human trafficking boats departing for Malaysia, while others sign up to be relocated to the remote island of Bhasan Char (LSE, March 2022).

Economic shocks, including COVID-19

As Bangladesh continues to grapple with the economic recovery from two years of COVID-19, the war in Ukraine and the accompanying economic impacts have had reverberating repercussions across markets from the end of February 2022. Bangladesh imports 10.7 percent of its total imported food commodities from the Russian Federation and 4.5 percent from Ukraine. It is one of the world's biggest wheat importers, buying in around 6 million tonnes annually, chiefly from India, Canada, the Russian Federation and Ukraine (WFP, April 2022).

In Cox's Bazar, the cost of a typical food basket in February 2022 was 5–6 percent higher than January 2021 and 31 percent higher than pre-COVID-19 levels in February 2020. During February 2022, host communities were able to buy only 9 kgs of rice with a typical day's wage in Ukhia Upazila, which is 3.9 kg lower than in February 2020. Besides global price increases, other factors contributing to these food price hikes include the upcoming month of Ramadan,

hoarding and price gauging, and higher transportation costs. Prices may increase further during the lean period of March–May (WFP, April 2022).

On 3 November 2021, the Energy and Mineral Resources Division increased the prices of diesel and kerosene by 23 percent. This hike was expected to adversely affect all sectors such as agriculture, road and sea transport and power generation, setting off a chain reaction in the economy and slowing down the recovery from the pandemic (FAO & WFP, December 2021).

The war in Ukraine may also adversely impact exports from Bangladesh to the Russian Federation. Bangladesh is a major exporter – primarily of Ready Made Garments (RMG), to the Russian Federation, and the economic impact of the war has already created challenges for Bangladeshi exporters. Recessionary trends in Europe and the US could dampen demand for RMG exports, increasing unemployment rates. The Ukrainian refugee inflow in Europe will likely create a labour surplus in the European labour market, which in turn might impact the demand for Bangladeshi migrant labourers in Europe and subsequently the volume of remittances to Bangladesh from Europe (WFP, April 2022).

Weather extremes

In a dense mesh of bamboo and tarpaulin shelters, fires continue to be a significant hazard, adding to the extreme vulnerability of refugees (WFP January 2022). On 8 March 2022, a fire in Camp 5 was the sixth and biggest of 2022. It damaged or destroyed 400 shelters, and 2 500 people lost their homes (Norwegian Refugee Council, March 2022).

Bhasan Char, a 13 000-acre island that emerged in the Bay of Bengal in 2006, has been developed to relocate at least 100 000 Rohingyas from Cox's Bazar amid serious concerns about the government's capacity to ensure the island's safety from natural disasters, among other challenges (including lack of access to education, health care, and livelihood opportunities) (LSE, March 2022).



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Rohingya refugees living in the world's largest refugee camp experience extremely congested living conditions and limited opportunities for education, self-reliance and skills development.

Burkina Faso

Acute food insecurity overview 2021

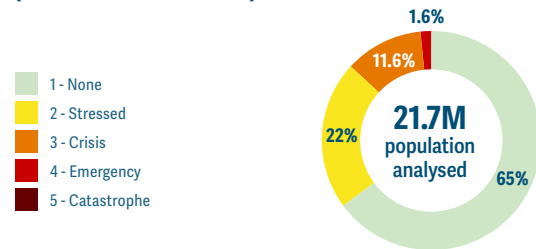
2.9M people

were in Crisis or worse (CH Phase 3 or above) in June–August 2021

2.52M people in Crisis CH Phase 3

0.34M people in Emergency CH Phase 4

13% of the population analysed was in Crisis or worse (CH Phase 3 or above)



4.78M people were in Stressed (CH Phase 2)

The analysis covers **98%** of the total population of **22 million** people.

Source: CH, March 2021; Government of Burkina Faso.

National population, 2020

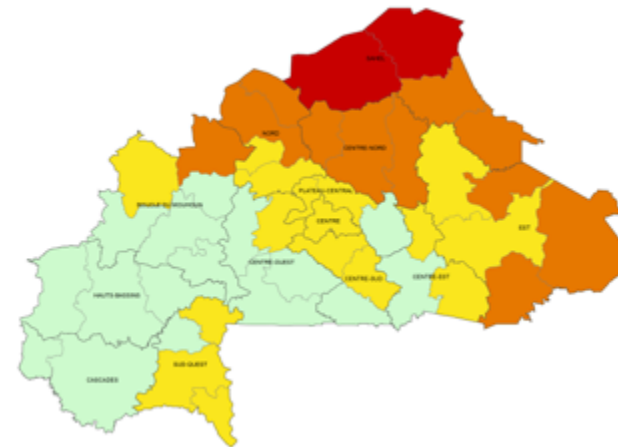


Source: WB 2020.

MAP 3.7

CH acute food insecurity situation, June–August 2021

The worst-affected areas were in the north – Sahel, Nord, Centre-Nord, Est, Centre and parts of the Boucle du Mouhoun administrative regions. Two areas were classified in Emergency (CH Phase 4) in Sahel, and 11 areas in Crisis (CH Phase 3).



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

Source: CH, March 2021.

Acute food insecurity trends

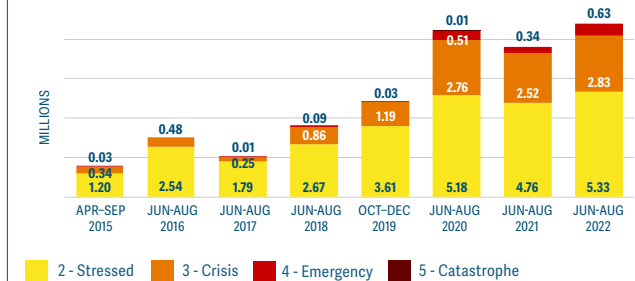
Numbers have fallen slightly since 2020. Burkina Faso's food crisis escalated from 2018 due to increasing armed conflicts and intercommunal violence in the northern and eastern regions.

By mid-2020, the number of IDPs reached over a million and the number of people in Crisis or worse (CH Phase 3 or above) reached 3.28 million, including 11 400 people in Catastrophe (CH Phase 5) during the June–August 2020 lean season. This was over three times the number recorded during the 2018 June–August lean season and the October–December peak period for 2019 (CH, July 2020).

The number of people in Crisis or worse (CH Phase 3 or above) has fallen since June–August 2020, in part due to the scaling-up of humanitarian assistance efforts (FAO-WFP, 2021) in affected areas. However, the overall number of people facing Crisis or worse (CH Phase 3 or above) remained high during the lean season in 2021 when compared to the 2016 to 2018 levels, mainly due to the deteriorating security situation (CH, November 2021).

FIG 3.3

Numbers of people in CH Phase 2 or above, 2015–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2014 and 2022 are provided (see Appendix 1, table A2, page 244).

Source: CH.

Drivers of the food crisis in Burkina Faso in 2021

Ongoing conflict and insecurity in border areas, in conjunction with rising food prices, the socioeconomic effects of COVID-19 and localized dryness continued to drive high numbers of acutely food-insecure people in 2021.

* Conflict/insecurity

Unidentified armed groups continued to operate across most of the country – particularly in border areas – carrying out attacks that destroyed livelihoods, constrained alternative income-generating opportunities and displaced households. The frequency and intensity of attacks, as well as violence against civilians, increased sharply from the previous year. The biggest spikes occurred from May to July and again in October (ACLEDA, December 2021).

The violence pushed the number of IDPs to new highs of around 1.4 million as of August 2021 (UNHCR, 2021), constrained access to and the provision of humanitarian assistance (ACAPS, December 2021) and disrupted agricultural production (FAO, November 2021). Agricultural activities were especially limited in border areas in the Nord, Sahel and Est regions due to conflict and insecurity (FEWS NET, August 2021).

Conflict over natural resources also escalated, leading to a deepening of tensions between pastoralists and smallholder farmers (ACLEDA, June 2021). In areas with large IDP populations, there was competition – and conflict at times – between IDPs and the host population over natural resources for livestock and crop production, especially land and water (FAO, 2021).

* Weather extremes

Erratic and below-average seasonal rains hampered the establishment and development of the 2021 cereal crops. An early cessation of the rainy season in September during critical crop development stages negatively affected yields, particularly in the main producing southern, central and western areas. Torrential rains triggered floods and caused localized crop losses in August and September in central and western parts (FAO-GIEWS, December 2021). Overall cereal production decreased by nine percent from the previous year (CH, November 2021).



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Violence in Burkina Faso increased the number of IDPs to new highs of around 1.4 million as of August 2021 and disrupted agricultural production.

These same agro-climatic conditions affected the fodder and pasture for livestock production in the northern regions, which were expected to have an early start to the pastoral lean season in February 2022 (FAO-GIEWS, October 2021).

* Economic shocks, including COVID-19

Economic disruptions linked to the COVID-19 pandemic and soaring food prices contributed to the ongoing food crisis. Restrictions on movement within the country to limit the spread of COVID-19 reduced people's ability to access markets as well as agricultural inputs (FAO-WFP, 2021). Containment measures also contributed to increased unemployment rates and decreased household incomes, particularly in the six regions already affected by growing insecurity (FAO, November 2021). Border closures reduced trade opportunities and were particularly

costly for transhumant livestock producers. Prices of coarse grains, especially sorghum and maize, increased throughout 2021 despite the downward pressure stemming from the main season harvests (FAO-GIEWS, December 2021). In July, national prices for staple cereals were notably above the previous year's: 39 percent higher for maize, 12 percent for millet, and 19 percent for sorghum (FEWS NET, August 2021). Household purchasing power was therefore significantly reduced.

* Crop pests and diseases

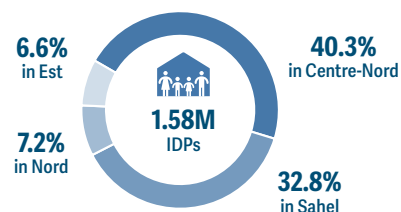
Production losses from crop pests were recorded. An armyworm outbreak is estimated to have infested 43 400 hectares mostly in the southern and eastern regions (FAO, November 2021), while grain-eating birds caused above average crop losses in the Sahel region (FEWS NET, October 2021).

Displacement in Burkina Faso in 2021

IDPs

FIG 3.4

The number of IDPs continued to increase in 2021 with 51 percent more in December 2021 than December 2020



Source: Government of Burkina Faso (CONASUR), December 2021.

There were nearly 507 600 new IDPs in 2021 (UNHCR and Government of Burkina Faso, December 2021). More than half of surveyed IDPs had been displaced for more than one year (WFP, December 2021). IDPs are hosted among local communities or in temporary reception sites and the majority (62 percent) of them are children (UNICEF, December 2021).

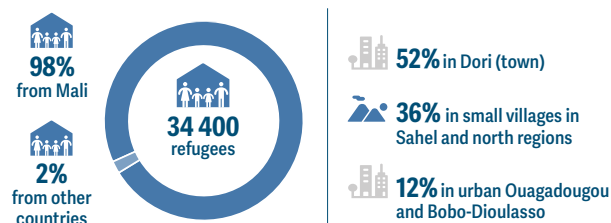
Almost all surveyed households (95 percent) reported food as a priority need (CONASUR, December 2021). Among surveyed IDP households who received humanitarian food or cash assistance, only 20–35 percent had acceptable food consumption. Only 7–9 percent of women of reproductive age had minimal dietary diversity, and only 2.5–4 percent of children had access to minimally acceptable diets (WFP, December 2021).

Despite receiving humanitarian assistance, 94 percent of the IDP population had to reduce the quantity of their daily food consumption, 35 percent had to consume less preferred food, and 22 percent had to borrow or beg for food. In some localities of Oudalan (Sahel), 60 percent of IDP and hosting community households had only one meal per day, and some of them had to go entire days without eating, according to CONASUR (FEWS NET, October 2021).

Refugees

FIG 3.5

The refugee population increased by 34 percent from December 2020 to December 2021



Source: UNHCR, January 2022.

The number of refugees hosted in Burkina Faso steadily increased in 2021, as conflict intensified in neighbouring Mali (UNHCR, January 2022).

By 31 January 2022, 25 185 mainly Malian refugees were hosted in the country, including over 11 000 new arrivals in 2021. There was also a small number of refugees from the Central African Republic and Chad (UNHCR, January 2022).

By early 2022, approximately 52 percent of the refugees in the country lived in the town of Dori, after fleeing the former Goudoubo Camp due to insecurity. The population of Dori tripled with the arrivals, increasing pressure on already stressed resources and facilities of the local population (UNHCR, January 2022).

Additional drivers of acute food insecurity and malnutrition for displaced people

Most displaced populations abandoned their livelihoods including agricultural assets and food stocks, which were often stolen by attackers after their departure. In the far north of Burkina Faso, most displaced households were unable to cultivate due to displacement and the deteriorating security situation (FEWS NET, December 2021).

Many households were displaced along with their livestock (FAO, June 2021), and continued to be negatively affected by cattle rustling and livestock destocking (FEWS NET, October 2021). As of December 2021, livestock assets were mostly depleted among IDPs (FEWS NET, December 2021).

As of October 2021, around 76 percent of IDPs depended on market purchases to access food, according to CONASUR (FEWS NET, December 2021). While food supplies were lower than average at the national level, demand for food in markets was above normal because of the increasing number of IDPs. This increased demand contributed to an increase in prices. Staple

prices were above their previous year levels and their five-year average in a number of monitored markets, including Titao, Yalgo, Sebba, Ouahigouya, Seytenga, Kongoussi and Gayéri (FEWS NET, January 2022).

In a context of prolonged dry spells, pasture availability and quality was further limited by the IDP influx and increased presence of livestock (FEWS NET, October 2021). Because of low water levels and increased pressure on already limited resources, planted areas for cropping were also reduced, which was expected to reduce opportunities for agricultural work and food availability for IDPs in the next harvest season (FEWS NET, January 2022).

Continuous displacements and persisting insecurity led to limited operability of health and sanitary facilities and decreased access to basic services. Vaccination coverage in the context of a resurgence of measles outbreaks was concerningly low (UNICEF, December 2021b).

Key nutrition challenges



631 730 children under 5 years were **wasted** in 2021
151 210 of them were **severely wasted**



128 670 pregnant and lactating women were **acutely malnourished**

Source: IPC AMN, January 2021.

Over half of all 45 provinces in Burkina Faso were classified in Serious (IPC AMN Phase 3) or Critical (IPC AMN Phase 4), according to the January 2021 IPC acute malnutrition analysis.

Wasting prevalence ranged from 6 percent (Central province) to 12.1 percent (Plateau Central) during the 2021 lean season (SMART, 2021), but the nutrition outcomes are expected to worsen in 2022. The worst-affected populations were in the Sahel, Nord, Centre-Nord, Est, Centre, Plateau-Central and parts of the Boucle du Mouhoun and Centre-Ouest administrative regions. Most of the provinces in these regions were classified in Serious (IPC AMN Phase 3) and all four provinces of the Sahel region were classified in Critical (IPC AMN Phase 4) (IPC AMN, January 2021).

Nationally, nearly 22 percent of children under the age of 5 years are stunted. In Centre-Nord the prevalence exceeds the 'very high' (≥ 30 percent) threshold (SMART 2021). At 77 percent, the prevalence of anaemia in children under 5 remained at critically high levels in 2019 (WB, January 2022).

Key drivers

Caring and feeding practices

Poor infant and child feeding practices are significant drivers of stunting and wasting in Burkina Faso. Only about 70 percent of infants are exclusively breastfed for the first 6 months of life, with large regional variations, ranging from 57 percent in Haut Bassins to 88 percent in the Sud-Ouest region (SMART, 2021). Inadequate complementary feeding is also highly prevalent in Burkina Faso, as only 23.9 percent of children aged 6–23 months have a minimum

acceptable diet and 31.6 percent minimum dietary diversity (SMART, 2021), which is mostly due to inadequate quantities of food intake. Poor maternal nutrition contributes to an intergenerational cycle of malnutrition: 53 percent of women of reproductive age suffer from anaemia, which indicates a severe public health problem, according to WHO thresholds (WB, January 2022).

Health services and household environment

Over 2.5 million people in Burkina Faso were estimated to be in need of WASH assistance in 2021 (OCHA, 2021). The low levels of access to drinking water and sanitation facilities contributed to poor hygiene conditions that led to high prevalence of childhood illnesses, such as fever and diarrhoea. The ongoing security crisis in the northern and eastern border regions has led to the continued closure of health facilities in areas that already have limited access to humanitarian assistance (IPC AMN, January 2021).

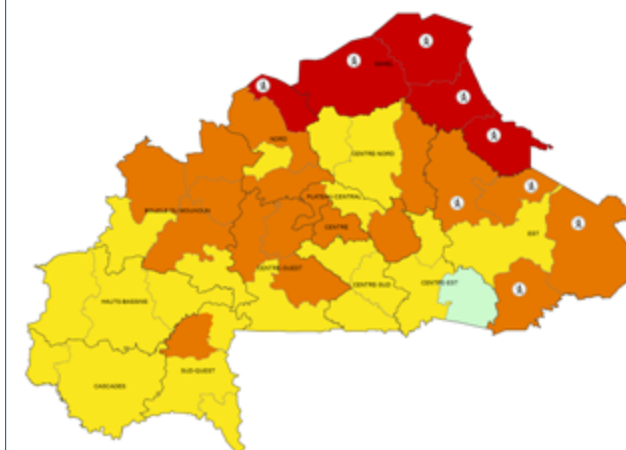
Food security and access to healthy diets

High levels of both acute food insecurity and malnutrition were reported in the Sahel, Nord, Centre-Nord, Est, Centre and parts of the Boucle du Mouhoun administrative regions, which are the areas most affected by attacks from unidentified armed groups, population displacement, limited access to humanitarian assistance and climate variability. The prevalence of wasting extends further south into provinces of the Sud-Ouest, Centre and Plateau-Central regions, while in contrast, these areas are less affected by acute food insecurity. These southern areas are classified as Serious (IPC AMN Phase 3) for wasting while in Stressed (IPC AFI Phase 2) for acute food security (IPC AMN, January 2021).

MAP 3.8

IPC acute malnutrition situation, May–July 2021

Of Burkina Faso's 45 provinces, 20 were classified in Serious (IPC AMN Phase 3) and four in Critical (IPC AMN Phase 4).



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


Source: Burkina Faso IPC AMN Technical Working Group, January 2021.


Acute food insecurity forecast, 2022

 **3.45M people**

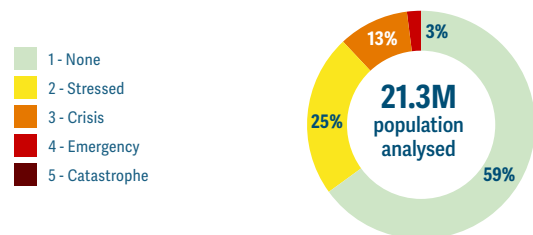
were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022

 **2.83M people**
in Crisis
(CH Phase 3)

 **0.63M people**
in Emergency
(CH Phase 4)

 The situation is expected to worsen, with unprecedented numbers of people in Crisis or worse (CH Phase 3 or above) – a 21 percent increase above the 2021 peak levels.

16% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)



 **5.33M people** were forecast to be in Stressed (CH Phase 2)

 The analysis covered the entire country's land area and **97%** of the total population of **21.9 million** people.

Source: CH, March 2022.

Given limited time between the release of the latest CH results and the publication of the GRFC, no projection map is provided for Burkina Faso.

Persistent conflict and insecurity, as well as production shortfalls and high food prices, are projected to increase the numbers of people in Crisis or worse (CH Phase 3 or above) during the 2022 lean season.

Conflict/insecurity

The conflict is not expected to improve in 2022, as hostilities will continue to adversely impact the civilian population in the northern and eastern regions and lead to additional displacements. Access to agricultural inputs, markets and humanitarian aid in these areas will remain constrained and negatively affect food availability and access. Food stocks are expected to be depleted between January and February 2022, reflecting widespread production shortfalls. Consequently, IDP and poor households in host communities will likely be highly dependent on markets and assistance beginning in March 2022, placing additional financial pressure on household incomes to meet food needs (FEWS NET, December 2021). This situation will perpetuate Emergency (CH Phase 4) conditions, particularly for vulnerable populations living in the provinces of Loroum (Nord) and Oudalan, Seno, Soum and Yagha (Sahel) in the lean season (CH, March 2022).

Economic shocks, including COVID-19

The prices of staple foods are projected to remain high throughout Burkina Faso in 2022 due to a series of factors, including competition amongst traders for scarce market resources, declines in production, IDP dependence on the market, and the early depletion of household stocks (FEWS NET, December 2021). High prices combined with reduced incomes due to the economic effects of COVID-19 and limited economic opportunities will continue to erode household purchasing power (CH, March 2022).

Weather extremes

Erratic and below-average rainfall in 2021 coupled with limited access to agricultural inputs and insecurity in the northern and eastern regions are expected to adversely impact livestock production and crop yields in 2022 (Global Humanitarian Overview 2022, December 2021).



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Kadi regularly takes her twin boys to the local health centre near their home in the Centre-Nord region for their check-up.

The 2021–2022 cereal production is 10 percent below the year-earlier levels. As supply decreased while demand remains high, food prices increased higher than 40 percent compared to their five-year average (RPCA, March 2022).

Burundi

Acute food insecurity overview 2021

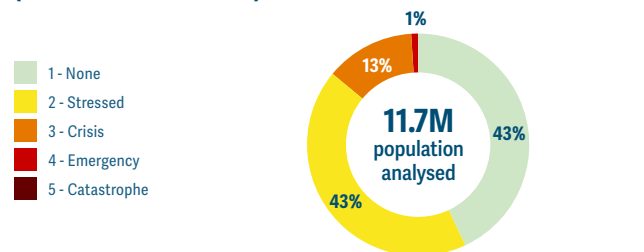
 **1.61M people**


were in Crisis or worse (IPC Phase 3 or above) in April–May 2021

 **1.51M people** in Crisis (IPC Phase 3)

 **0.1M people** in Emergency (IPC Phase 4)

14% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



 **5.0M people** were in Stressed (IPC Phase 2)

The analysis covers **94%** of the population of **12.5 million** people.

Source: IPC, June 2021.

National population

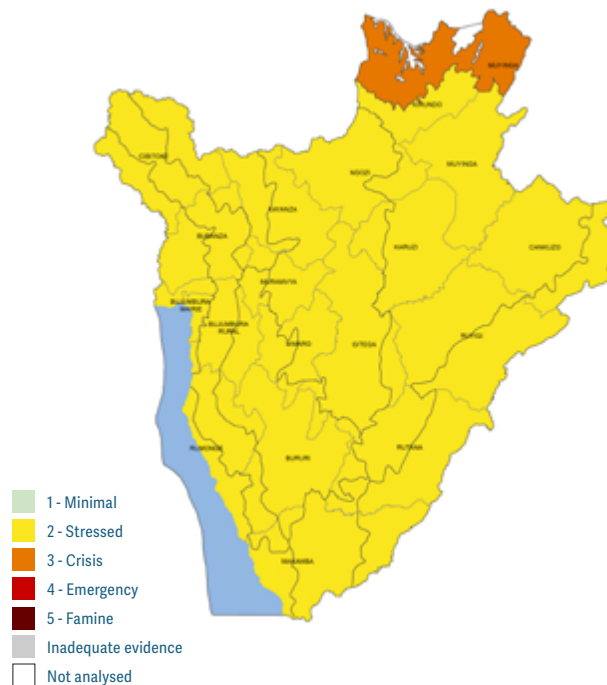


Source: WB 2020.

MAP 3.9

IPC acute food insecurity situation, April–May 2021


All eight areas were classified in Stressed (IPC Phase 2) except for the Northern Lowlands, which was in Crisis (IPC Phase 3). The populations in Emergency were in the Northern Lowlands and Imbo. The highest numbers of people in Crisis (IPC Phase 3) were in the Humid Plateaus (0.5 million).



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

Source: Burundi IPC Technical Working Group, June 2021.

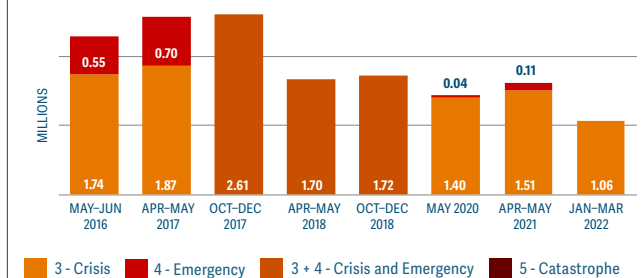
Acute food insecurity trends

 **Numbers have remained relatively stable since 2020.** Between May 2020 and April–May 2021, the number of people in Crisis or worse (IPC Phase 3 or above) increased slightly from 1.4 million to 1.61 million with those in Emergency (IPC Phase 4) more than doubling from around 42 000 to 107 000.

The Northern Lowlands, Eastern Lowlands and part of the Imbo plain were the most food insecure due to rainfall deficits, floods and disrupted cross-border trade due to COVID-19 restrictions. From June–September 2021, the population in Crisis or worse (IPC Phase 3 or above) decreased to around 1.1 million, but was expected to increase to 1.4 million during the October–December 2021 lean season (IPC, June and December 2021). The share of people in Crisis or worse (IPC Phase 3 or above) has been decreasing since 2017. In April–May 2017, 2.6 million people (26 percent of the population) were in Crisis or worse (IPC Phase 3 or above), including over 700 000 in Emergency (IPC Phase 4) largely due to political tensions, poor rainfall, high food prices and crop diseases.

FIG 3.6

Numbers of people in IPC Phase 3 or above, 2016–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2014 and 2022 are provided (see Appendix 1, table A3, page 245).

Source: Burundi IPC Technical Working Group.

Drivers of the food crisis in Burundi in 2021

Recurrent climatic hazards, displacement, insecurity and the COVID-19 pandemic in a context of low resilience were at the root of acute food insecurity.

Weather extremes

In northern Kirundo and Muyinga provinces, below-average rainfall in November 2020 resulted in significantly reduced local harvests of the “2021A” season beans, maize and sorghum crops (FAO-GIEWS, August 2021), affecting over 36 000 agricultural households in the Northern Lowlands (IPC, June 2021). While national production from the ‘2021A’ season harvest, gathered in January 2021, was estimated to be 5–10 percent above average, driven by ample harvests of maize, tubers and bananas, the output of beans was estimated at 10 percent below average due to inadequate rainfall (FAO-GIEWS, August 2021).

In April and May 2021, flooding and landslides along Lake Tanganyika and the Rusizi River in the Imbo Plains livelihood zone, destroyed crops and displaced around 45 000 people in Bujumbura Rural and Rumonge provinces (FEWS NET, May 2021). For the Imbo Plain zone, it was the heaviest flooding in three decades. The rising waters also destroyed infrastructure in the city of Bujumbura, disrupting urban trade and labour opportunities (IPC, June 2021).

The above-average seasonal precipitation had a positive impact on the ‘2021B’ harvest, gathered in July and August, which was estimated at 10–15 percent above average (FAO-GIEWS, August 2021), with the resulting bean availability improving access to high-protein food from July to September (FEWS NET, June 2021).

Economic shocks, including COVID-19

The persisting negative impacts of the COVID 19 pandemic continued to affect food security in 2021, especially in border areas of the Eastern and Northern Lowlands, where the income of poor households who depend on cross border petty trade and labour opportunities was severely affected by border closures (FAO-GIEWS, August 2021).

Despite the reopening of borders with the Democratic Republic of the Congo on 1 June 2021, exceptionally high COVID-19 screening fees (the equivalent to eight days of labour wages) continued to hamper free movement of goods and people and restrict access to typical cross-border opportunities. The Tanzanian and Rwandan borders remained closed (FEWS NET, June 2020).

Given the national economic slowdown since the start of the COVID-19 pandemic, non-agricultural labour income decreased, with thousands of jobs lost in masonry, carpentry, public transport and freight transport along the borders. Low purchasing power continued to hinder food access, especially for the large percentage of rural households relying on income from agricultural labour (IPC, June 2021). The Northern and Eastern Lowlands livelihood zones have been identified as having the lowest rate of pay for agricultural labour (FEWS NET, June 2020).

In November and December, cereal (rice and maize) prices were 12 percent above average, and cassava prices 35 percent above average, driven by a decrease in imports from the United Republic of Tanzania due to COVID-19 movement restrictions (FEWS NET, December 2020).

Insecurity

Burundi has recorded a steady improvement in terms of security, marked by a significant reduction in reported incidents of violence against civilians in the first five months of 2021 compared to 2020. While the Cibitoke, Bubanza and Kibira Natural Reserve provinces along the border areas with Rwanda and the Democratic Republic of the Congo reported a doubling of violent incidents in 2021 compared to 2020, no substantial impacts on agriculture, income and food access were observed (FEWS NET, June 2021).



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A child plays in the floodwaters in Gatumba, near Bujumbura, where thousands of people were displaced by floods in April and May 2021.

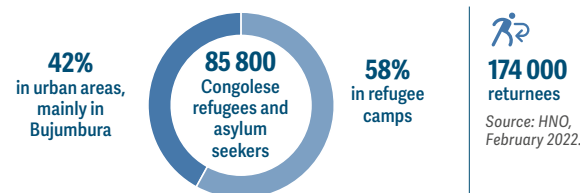
Displacement 2021

Refugees and refugee returnees

The refugee returnees are among the most vulnerable segments of the population and the areas they are returning to in substantial numbers, such as Makamba, Kirundo and Ruyigi, are among the poorest and chronically food-insecure provinces of Burundi (UNHCR, December 2021).

FIG 3.7

Refugees hosted in Burundi



Source: UNHCR, January 2022.

The vast majority (99 percent) of refugees and asylum seekers in Burundi are from the Democratic Republic of the Congo and fled violence in the provinces of North and South Kivu.

Nearly 264 000 Burundians remain in exile, mainly hosted by the United Republic of Tanzania, Uganda, Rwanda and the Democratic Republic of the Congo (UNHCR, January 2022). There has been a notable increase in Burundian refugees returning home since the July 2020 national elections. The voluntary returns should continue on a regular basis in 2022 with approximately 70 000 returns expected, mainly from the United Republic of Tanzania and Rwanda, close to the 60 000 repatriated in 2021 (HNO, February 2022).

Refugee returns are exerting additional pressure on already extremely vulnerable and fragile Burundian communities (UNHCR, December 2021).

IDPs

The majority (95%) of IDPs live in host communities and have been displaced by floods, torrential rains, high winds, landslides and water shortages.

 **113 400** IDPs

Source: IOM DTM, December 2021.

The majority (83 percent) of IDPs were displaced by the effects of weather extremes, including drought, floods, torrential rain and strong winds (IOM DTM, November 2021). The number of displacements increased sharply following severe flooding in 2020 and 2021. All 32 294 people displaced between January and October 2021 were displaced by weather extremes (HNO, February 2022).

While the majority of displacements are of short duration, 34 percent had already experienced a situation of displacement at least once in the past (IOM, March 2021). Some IDPs have remained displaced since 2020 and their chances of return are low. Protracted and cyclical displacement contribute to weakening already vulnerable host communities, putting additional pressure on limited access to basic infrastructure and services (HNO, February 2022).

In June 2021, 74 percent of households displaced by floods indicated that access to drinking water (74 percent) was an urgent need. Around 70 percent of displaced households reported that they did not have a varied diet within and across food groups (IOM DTM Burundi, November 2021).

Drivers of acute food insecurity and malnutrition for displaced populations

IDPs face difficulties in accessing reliable income sources with most working as day labourers (75 percent), or in agriculture (19 percent). The repeated destruction of their means of survival impacts the resilience capacities of displaced communities and increases their vulnerabilities (HNO, February 2022).

Displacement has reduced their access to health care. In 2021, 90 percent of displaced households surveyed said they were unable to pay for health care. Around 70 percent of IDPs had to walk between 30 minutes and an hour to access health services, and 8 percent for more than an hour. Some 42 percent of displaced households did not have access to functional latrines. Precarious hygiene and sanitation conditions in host communities are conducive to the development of waterborne diseases (HNO, February 2022).

Although Burundi integrates **refugees** into its public services system, Congolese refugees face many obstacles to local integration such as lack of freedom of movement and inadequate access to paid employment (exacerbated by COVID-19 restrictions), public education and health systems. These conditions reduce refugees' self-reliance (UNHCR, April 2021).

Refugees in Burundi are hosted in a context of underlying conditions of poverty. In rural areas where the Congolese refugee camps are located, poverty levels of host communities are often higher than those of refugees. This could potentially raise tensions, especially if the socioeconomic situation of the host population further deteriorates (UNHCR, April 2021).

The presence of Congolese refugees amid the repatriation of Burundians continues to place significant pressure on already scarce resources (UNHCR, April 2021 & UNHCR, October 2021).

Key nutrition challenges



139 800 children under 5 years were **wasted** in 2021

16 070 of them were **severely wasted**



26 140 pregnant and lactating women were **wasted**

Source: IPC AMN, June 2021.

Child wasting increased from 4.5 percent in 2018 to 5.1 percent in 2019 and 6.1 percent in 2020, above the 'medium' threshold of 5 percent set by the WHO. One district had a prevalence above the 'high' threshold of 10 percent and in 31 out of 47 districts, the prevalence ranged from 5–9.9 percent (SMART 2020).

The prevalence of acute malnutrition tends to peak during the September–December period in a typical year and decreases during the harvest period (January–August) according to the trend analysis of nutritional data (IPC AMN, June 2021).

While stunting levels remain among the highest in Africa, the 2020 National Nutrition Survey showed an improvement with the prevalence of stunting in under 5s declining from 57 percent in 2016 to 54.2 percent in 2019 and to 52.2 percent in 2020 (JME, 2021; IPC AMN, June 2021).

Key drivers

The drivers of Burundi's nutritional challenges include **inadequate food intake for children from 6 to 23 months, poor access to minimum dietary requirements, high prevalence of diseases, and poor access to drinking water and improved sanitation facilities.**

Caring and feeding practices

Burundi has made progress on infant feeding indicators, with 72 percent of children under 6 months exclusively breastfed (Global Nutrition Report, 2021). Challenges arise once mothers start the introduction of complementary foods from 6 months of age onwards. More than 92 percent of children aged 6–23 months do not benefit from a minimum dietary diversity. More than 93 percent of children aged 6–23 months do not receive a minimum acceptable diet (IPC AMN, June 2021).

Health services and household environment

Other major drivers of children's nutritional status include the high prevalence of childhood diseases, notably diarrhoea, malaria and respiratory infections (IPC AMN, June 2021).

Limited access to drinking water and improved sanitation facilities also inhibit many households from having adequate quantities of safe drinking water and from meeting other basic sanitation needs (IPC AMN, June 2021).

Food security and access to healthy diets

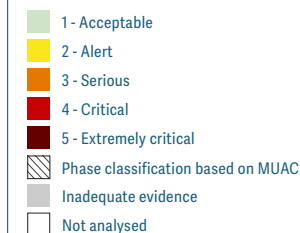
Acute food insecurity linked to recurrent climatic hazards, the economic impact of the COVID-19 pandemic and chronic poverty limited access to nutritious foods.

However, according to the IPC AMN analysis, acute food insecurity was a minor contributing factor for most districts (IPC AMN, June 2021).

MAP 3.10

IPC acute malnutrition situation, January–August 2021

Twenty districts were classified in Alert (IPC AMN Phase 2) and 12 were in Acceptable (IPC AMN Phase 1)



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

Source: Burundi IPC AMN Technical Working Group, June 2021.

Acute food insecurity forecast, 2022

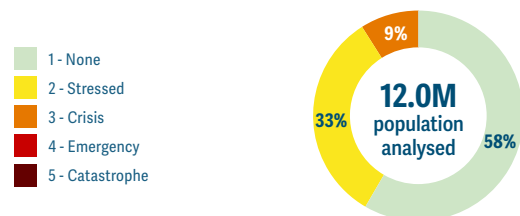
 **1.06M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in January–March 2022

 **1.06M people**
in Crisis (IPC Phase 3)


 The situation during the January–March harvest season is expected to improve seasonally by comparison with April–May 2021, though acute food insecurity figures will remain high.

9% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



No populations were expected to be in Emergency (IPC Phase 4) during this period.

 **3.94M people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers **96%** of the population of **12.5 million** people.

Source: IPC, December 2021.

MAP 3.11

IPC acute food insecurity situation, January–March 2022

All areas of the country are forecast to be in Stressed (IPC Phase 2).



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

Source: Burundi IPC Technical Working Group, December 2021.

Food availability was expected to improve with the '2022A' harvest, but some households, particularly in the Eastern and Northern Lowlands and Imbo Plains, are projected to face acute food insecurity challenges stemming from low incomes, high food prices and below-average harvests.

Economic shocks, including COVID-19

COVID-19 restrictions, including border closures, will continue to disrupt economic activities and reduce income sources in early 2022 – especially in the border areas in the Eastern and Northern Lowlands livelihood zones (IPC, December 2021). Staple food prices are expected to be higher than average as a result (FEWS NET, December 2021).

Weather extremes

The September–December 2021 rainy season was delayed and erratically distributed. Frequent and prolonged dry spells created a conducive environment for the resurgence of fall armyworm for the first time in two years. The '2022A' season harvest, normally gathered in January 2022, has been estimated at below-average levels and was delayed by about one month, extending the October–December 2021 lean period (IPC, December 2021).

Conflict/insecurity

Sporadic violence is expected to continue, albeit at reduced levels through May 2022. However, insecurity in parts of eastern Democratic Republic of the Congo bordering Burundi could pose a risk of cross-border attacks by armed groups (FEWS NET, December 2021).

Crop pests

The fall armyworm resurgence is particularly severe in Imbo Plain livelihood zone, where 25 percent of maize plants were reportedly infected in December, likely leading to a 5–10 percent decrease in maize production in the region in 2022 (FEWS NET, December 2021).


Cameroon

Acute food insecurity overview 2021

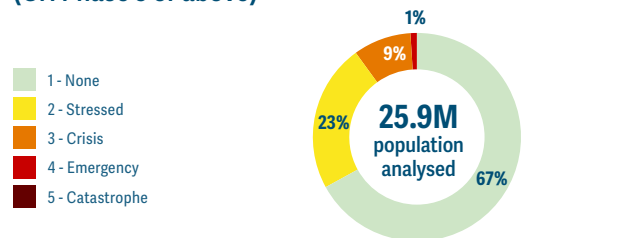
 **2.63M people**


were in Crisis or worse (CH Phase 3 or above) in March–May 2021

 **2.36M people**
in Crisis
(CH Phase 3)

 **0.26M people**
in Emergency
(CH Phase 4)

10% of the population analysed was in Crisis or worse (CH Phase 3 or above)



 **5.85M people** were in Stressed (CH Phase 2)

The analysis covers **100%** of the country's total population of **25.9 million** people.

Source: INS Cameroun, 2021.

National population

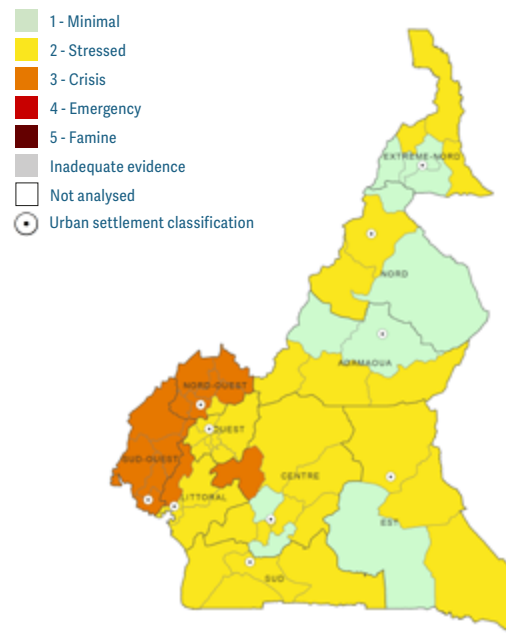
 **42% Rural** **58% Urban** 

Source: WB 2020.

MAP 3.12

CH acute food insecurity situation, March–May 2021


Between March–May 2021, out of the 58 divisions or departments at the national level, 32 were classified in Stressed (CH Phase 2) and 15 were in Crisis (CH Phase 3). Most of the southern regions – which face the lean season during this period – and the Far North were classified in Stressed (CH Phase 2), while almost all divisions of Northwest and Southwest regions were in Crisis (CH Phase 3).



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

Source: CH, March 2021.

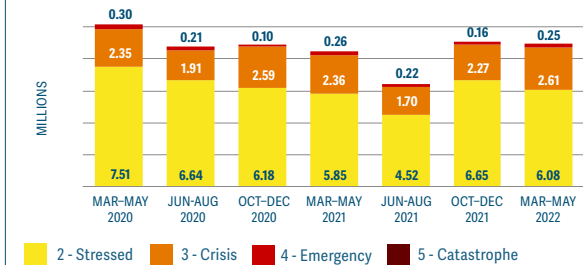
Acute food insecurity trends

 **Numbers remain at similar levels since 2020.** In March–May 2021, the number of people in Crisis or worse (CH Phase 3 or above) was almost as high as in October–December 2020 – **2.7 million people, the largest number recorded by the CH in Cameroon.** The number of people in Emergency (CH Phase 4) was almost three times higher in early 2021 than in the last quarter of 2020 (CH, March 2021).

After decreasing to 1.9 million by June–August 2021, the number of people in Crisis or worse (CH Phase 3 or above) increased to 2.4 million people in October–December 2021 (CH, March 2021). Acute food insecurity levels are primarily driven by conflict and insecurity in the Far-North region – stemming from Boko Haram incursions in the Lake Chad Basin – and in the Northwest and Southwest regions, where a secessionist insurgency escalated in late 2017. In addition, if considering the seven regions consistently analysed by CH since June–August 2018, the effects of the COVID-19 pandemic also appear to have triggered a significant increase in acute food insecurity levels from 2020 onwards.

FIG 3.8

Numbers of people in CH Phase 2 or above, 2020–2022



While the 2020–2022 CH analyses provide data for the entire country, the CH analyses of 2018–2019 only cover four to seven regions. Datasets from all analysis rounds between 2018 and 2022 are provided (see Appendix 1, table A4, page 246).

Source: CH.

Drivers of the food crisis in Cameroon in 2021

Conflict remained the main driver of acute food insecurity in the Far-North, Northwest and Southwest regions, but economic shocks due to the COVID-19 related restrictions and localized weather extremes that diminished crop production also played a role in constraining household food access in 2021.

Conflict/insecurity

Conflict in the Far-North region, due to the Boko Haram insurgency, and in the Northwest and Southwest regions, where insecurity continued unabated, drove declines in agricultural production in 2020, leading households to have lower than normal levels of food stocks, which started to be exhausted by February 2021 in the Northwest and Southwest regions. In 2021, conflict continued to drive food insecurity, adversely affecting agricultural production (CH, March 2021).

In 2021, conflict continued to constrain access to fields and agricultural inputs throughout the year (FAO-GIEWS, December 2021). Food production remained below average for the fifth consecutive year in 2021 in the Southwest and Northwest regions, resulting in high food prices (FAO, March, 2021). Conflict also limited humanitarian access (FEWS NET, October 2021).

In the Far-North, insurgent attacks constrained livelihoods, particularly those dependent on subsistence agriculture in Mayo Sava, Mayo Tsanaga and Logone & Chari departments. Crop production was therefore below average in the region in 2021 (FAO-GIEWS, December 2021).

Attacks also disrupted market supplies, affecting up to 64 percent of markets at the beginning of the lean season and leading to high food prices (FEWS NET, June 2021; FEWS NET, August 2021). Intercommunal conflicts in Logone & Chari department also triggered population displacements in August and December (OCHA, December 2021; CH, October 2021).

Economic shocks, including COVID-19

COVID-19 containment measures led to frequent disruptions in trade and supply chains, resulting in upward pressure on food prices. For instance, low import levels resulted in particularly elevated prices of imported rice, which in the first quarter of 2021 were over 30 percent higher than in 2018–2019 (FAO-GIEWS, December 2021; FEWS NET, October 2021).

In March 2021, a peak of COVID-19 cases prompted the government to tighten restrictions, thereby reducing income-earning opportunities for poor households relying mainly on income from informal employment, particularly in urban areas (IOM, February 2021; WHO, February 2022).

Border closures with neighbouring countries due to COVID-19 measures negatively affected transhumance and trade, notably with the Central African Republic and Nigeria, and increased food prices in border areas. Livestock herd arrivals from Chad and the Sudan had decreased by 70 percent, negatively affecting trade to urban centres such as Douala and Yaoundé and to neighbouring countries, such as Equatorial Guinea and the Central African Republic (FEWS NET, February 2021).

In the Far North Region, where the sorghum and maize harvest begins at the end of September, prices have increased significantly between July and August 2021, as seasonal trends were amplified by strong export demand (FAO-GIEWS, September 2021).

Weather extremes

In early 2021, floods affected crop production in Diamaré and Mayo Danay departments of the Far-North region (CH, March 2021). During the lean season, floods also limited access to fields and displaced populations in the departments of Mayo Sava and Mayo Tsanaga (FEWS NET, August 2021).

In May-June, localized dry weather delayed sowing activities, which led to a reduction in areas planted in the Far-North region (FAO-GIEWS, December 2021). Below average rainfall was also reported throughout the rainy season from June to October in pockets of the southwestern regions, as well as in late-September in bordering areas with Nigeria, negatively affecting yields (WFP, September 2021).

Due to a combination of weather extremes and conflict, pastoralist conditions also deteriorated in 2021, leading to livestock concentration in atypical areas in the central regions, resulting in the deterioration of pastures, reduced water resources during the dry season, poor livestock body conditions, and lower incomes for pastoralists (FEWS NET, February 2021).

Crop pests and diseases

Pests destroyed crops in several departments of Far North including Mayo Sava and Logone & Chari in 2021 (CH, October 2021; OCHA, January 2021; FEWS NET, February 2021).

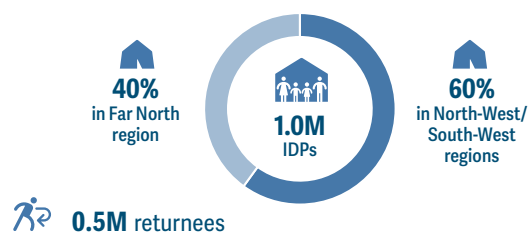
Displacement 2021

By the end of 2021, almost 2.0 million people were displaced within Cameroon, either as IDPs, refugees or returnees.

IDPs

FIG 3.9

The number of IDPs in Cameroon decreased slightly throughout 2021



Source: IOM, December 2021; UNHCR, January 2022.

Overall, the number of IDPs in the country decreased by 9 percent throughout 2021, while the number of returnees increased by 11 percent (UNHCR, December 2021).

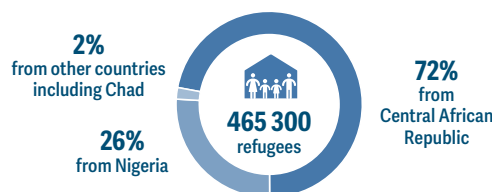
A multi-sectoral needs assessment conducted in July 2021 in the Far North highlighted IDPs' lack of access to food. Almost three in four IDP households reported not having food stocks to meet their needs during the lean season, while among those reporting some food stocks, 22 percent had less than a month's worth. Around two-thirds of households had to reduce their daily food intake quantity as a coping strategy to continue accessing food; over one third had to limit adults' food consumption to foster children's; and 30 percent had to lend food or depend on others to access it (IOM & OCHA, July 2021).

One in two health or community centres diagnosed malnutrition among displaced children under the age of 5. However, this number could be higher, as 35 percent of sites did not have access to malnutrition screenings (IOM & OCHA, July 2021).

Refugees and asylum seekers

FIG 3.10

The refugee and asylum seeker population in Cameroon increased by 7 percent in 2021



Source: UNHCR, January 2022.

As of December 2021, Cameroon hosted nearly 465 400 refugees, who largely fled political instability in the Central African Republic and the Boko Haram insurgency in Nigeria. There were 32 000 new arrivals recorded in 2021, due to increased violence in Nigeria and the Central African Republic (FEWS NET, February 2021). However, the number of Central African arrivals may be higher as refugees are scattered in border villages and have not been able to approach UNHCR due to distance or lack of knowledge (OCHA, August 2021).

Open since July 2013, Minawao camp hosted over 120 960 Nigerian refugees by the end of 2021. Population movements remain dynamic, with continuing internal displacement and return, new arrivals of Nigerian refugees, and spontaneous movements of refugees towards Nigeria (UNHCR, December 2021). For Nigerian refugees receiving assistance (cash, food, voucher), as of September 2021, 9 percent of the in-camp refugee households had poor food consumption and 30 percent had borderline food consumption (WFP & UNHCR, 2021).

In 2021, the prevalence of wasting across refugee populations ranged from 4–13 percent, with two camps having more than 10 percent. Stunting ranged between 33–48 percent and severe stunting was between 18–35 percent, qualifying as 'very high' – attributed in part to poor infant and young child feeding practices, with exclusive breastfeeding ranging between 46–81 percent (SENS, 2021).

Additional drivers of acute food insecurity and malnutrition for displaced people

Population influxes added pressure on already stressed food supplies and income opportunities, notably due to COVID-19 socioeconomic shocks (IOM, July 2021).

IDP populations in all assessed districts experienced obstacles to accessing food, most frequently reporting high food prices, lack of access to markets, unavailable products and no available or functioning markets in the vicinity (IOM & OCHA, July 2021). Three out of four IDP sites reported significant price increases of basic and primary products – including food, medication, and hygiene kits – because of COVID-19 related restrictions, and 58 percent reported shortages of first necessity products (IOM, July 2021).

Around 80 percent of IDPs in the region reported depending on their own activities (e.g. crop production, fishing) to access food and incomes. However, 40–60 percent reported lack of cash, economic opportunities and means of production to improve their livelihoods (IOM & OCHA, July 2021).

In Minawao camp, only 43 percent of Nigerian refugees had access to land for agricultural activities. Consequently, refugees faced difficulties meeting their food needs from household production. Market access was also constrained by the security risks imposed by conflicts and clashes (WFP & UNHCR, 2021).

Due to serious funding challenges, refugees from the Central African Republic received limited food assistance in recent years. Some 30 percent of refugees in need received only 50 percent of a food ration (UNHCR and WFP, 2021).

Key nutrition challenges



105 000 children under 5 years were **wasted** in 2021



20 000 pregnant and lactating women were **acutely malnourished**

Source: HNO, March 2021.

The most recent national survey in Cameroon took place in 2018, when around 4.3 percent of children were reportedly affected by wasting, of which 1.6 percent were severely wasted (DHS 2018).

Based on more recent sub-national nutrition assessments, wasting levels in Cameroon are below WHO emergency thresholds, or low (below 5 percent) while stunting prevalence is very high (above 30 percent).

The most recent nutrition assessments in some regions of Cameroon from 2021 indicate a wasting prevalence of 5.9 percent in the Extreme North region, 4.8 percent in North, and 3.8 percent in Adamaoua (UNHCR, April 2021). No representative nutrition data was available in the conflict-affected North West and South West regions. However, screening data from 2021 indicate proxy-GAM below 10 percent in the two regions (HNO, March 2021).

Stunting levels remain very high in Adamaoua (34.6 percent), East (32.8 percent), Extreme North (36.4 percent) and North (40.2 percent) regions (UNHCR, April 2021).

In areas hosting IDPs such as Far-North, Littoral and West regions, the nutrition situation was precarious due to increased demand on limited food stocks (CH, March 2021). In the Northwest and Southwest regions, decreased production, high food prices, and displacements because of conflict contributed to persisting malnutrition (FEWS NET, June 2021).

Key drivers

Caring and feeding practices

Poor feeding practices were also reported in the country. The exclusive breastfeeding rate was 64.9 percent, while only 12.1 percent of children under two years received a minimum acceptable diet, and one third of children had poor diet diversity (WFP, April 2021). This lack of dietary diversity has likely contributed to the approximately 40 percent (44.3 percent in the North-West and 41.9 percent in the South-West) of children aged 6–59 months being diagnosed with anaemia due to iron deficiency (HNO, March 2021).

Health services and household environment

In the Far North, the North-West and the South-West regions, conflict and insecurity have limited access to essential health services for 1.4 million people, including 707 000 women and 277 children under five. In addition, over 250 health facilities are not functional as a result of physical destruction from conflict or abandonment by healthcare personnel, largely in the regions of the North-West and the South-West (HNO, March 2021).

Across these regions, 43.6 percent of children have shown signs of malaria and 41.3 percent of diarrhoea. In the Far North, limited access to potable water remains a key concern, with availability below the minimum emergency water standard (15 litres/person/day) (WFP, April 2021).



© WFP/OLORYNDANKA

After fleeing her home in Logone and Chari division in Cameroon's Far North region in 2015, Fadimatou Abba, 46, now runs a small shop to help provide for her nine children.


Acute food insecurity forecast, 2022

 **2.87M people**

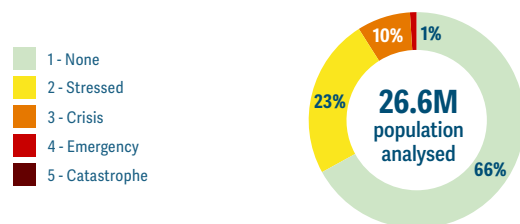
were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022

 **2.61M people**
in Crisis
(CH Phase 3)


 **0.25M people**
in Emergency
(CH Phase 4)

 In 2022, the number of people in Crisis or worse (CH Phase 3 or above) is expected to increase to its highest levels according to the CH – a 9 percent increase compared to 2021.

11% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)



 **6.08M people** were forecast to be in Stressed (CH Phase 2)

 The analysis covers **100%** of the country's total population of **26.6million** people.

Source: CH, March 2022.

Given limited time between the release of the latest CH results and the publication of the GRFC, no projection map is provided for Cameroon.

An early exhaustion of food stocks, high food prices and an intensification of conflict in Anglophone areas will drive high numbers of acutely food-insecure people in 2022.

Conflict/insecurity

Due to continued violence and insecurity, below-average crop production in 2021 was expected in conflict-affected areas, which will likely lead to an early exhaustion of food stocks. This situation in turn is projected to continue inflating food prices in 2022, notably in the departments of Logone & Chari, Mayo Sava, Mayo Tsanaga (Far North), and those of Momo, Lebialem, Meme, and Menchum (Northwest and Southwest regions).

In early 2022, insecurity persisted in Northwest, Southwest and Far-North regions and continued to hamper access of vulnerable people to basic services, trigger large population displacements and constrain food availability (CH, March 2022). The incidence of intercommunal conflicts is also expected to increase because of low water availability in the Far North region, particularly from mid-April when migrating pastoralists typically return to these areas (CH, October 2021; FEWS NET, December 2021).

Economic shocks, including COVID-19

In late-November 2021, food prices started increasing in the Far North, two months earlier than in previous years, due to increased demand from neighbouring countries. This trend is likely to continue through August 2022 and the beginning of the harvest (CH, October 2021), further hampering access to food for vulnerable households, who already face income reductions.

Given low vaccination coverage and over-crowding in urban centres, an increase in COVID-19 cases is likely. This would therefore likely trigger more stringent government restrictions to contain the COVID-19 pandemic in 2022 (FEWS NET, December 2021), inducing a risk of reduced access to incomes and food.



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More than 290 000 Central Africans have fled the fighting to the North, East and Adamawa regions of Cameroon, forced to abandon their homes, land and livelihoods.

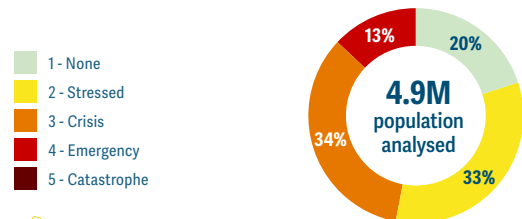
Central African Republic

Acute food insecurity overview 2021

2.29M people were in Crisis or worse (IPC Phase 3 or above) in April–August 2021

1.66M people in Crisis (IPC Phase 3)
0.63M people in Emergency (IPC Phase 4)

47% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



1.59M people were in Stressed (IPC Phase 2)

FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate. See Technical Notes.

The analysis covers **100%** of the population of **4.88 million** people, excluding the sub-prefectures of Bambouti, Djéma, Ouadda and Yalinga.

Source: IPC, May 2021.

National population

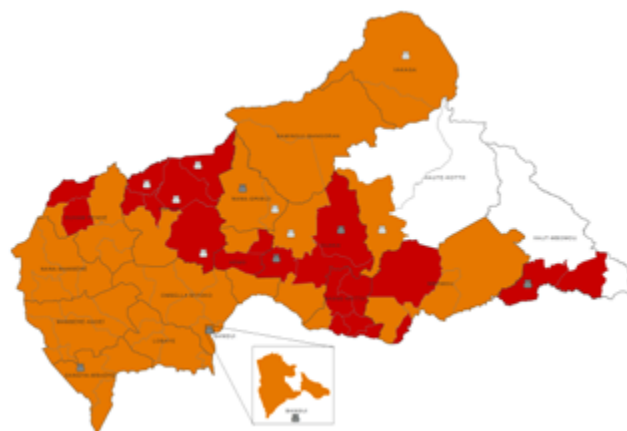


Source: WB 2020.

MAP 3.13

IPC acute food insecurity situation, April–August 2021

Some 22 areas were classified in Emergency (IPC Phase 4) and the remainder in Crisis (IPC Phase 3). In Bamingui-Bangoran, Haut-Mbomou, Mbomou and Vakaga, at least 60 percent of the population was in Crisis or worse (IPC Phase 3 or above). Bangui, Mambéré-Kadeï, Ouaka, Ouham and Ouham Pendé had the highest numbers of people in these phases.



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

Source: Central African Republic IPC Technical Working Group, May 2021.

Acute food insecurity trends

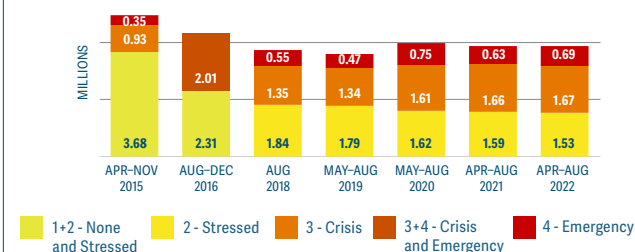
Numbers have remained relatively stable since 2020. Over the last five years, the number of people facing Crisis or worse (IPC Phase 3 or above) in the Central African Republic has remained persistently high, largely due to prolonged conflict.

The April–August 2021 analysis showed some of the highest numbers of people in Crisis or worse (IPC Phase 3 or above) out of the last ten analyses, with the exception of the May–August 2020 lean season, when COVID-19 restrictions constrained food supplies, pushed up prices and suppressed incomes of vulnerable households. The number of people in Emergency (IPC Phase 4) reached nearly 0.8 million in May–August 2020 (IPC, May 2020 and May 2021).

The number of people in Crisis or worse (IPC Phase 3 or above) in the capital Bangui decreased from around 438 000 (50 percent of the population analysed) in May–August 2020 to 327 000 (38 percent) in April–August 2021. While the economic impacts of COVID-19 were still present in 2021, they were particularly severe in 2020, curbing employment and incomes and contributing to higher transportation and food costs (IPC, May 2020).

FIG 3.11

Numbers of people in IPC Phase 2 or above, 2015–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2015 and 2022 are provided (see Appendix 1, table A5 on page 247).

Source: Central African Republic IPC Technical Working Group.

Drivers of the food crisis in the Central African Republic in 2021

Violence around the December 2020 elections and further conflict-related displacement, supply chain disruptions and low harvests, in tandem with COVID-19-related income losses and high food prices, drove this major food crisis.

✱ Conflict/insecurity

Against the backdrop of recurrent violence over the last 40 years (WB, July 2021), armed conflict since 2013 has destabilized the whole country and led to mass displacement. Despite the February 2019 peace agreement between the government and non-state armed groups, a surge in violence that began in mid-December 2020 following the presidential and legislative elections, fuelled a humanitarian crisis in 2021 that was unequalled since 2015. In 2021, security particularly deteriorated in the northwestern prefectures of Ouham, Ouham-Pendé and Nana-Mambéré compared with 2020 (HNO, October 2021).

The violence disrupted market activities and, until March 2021, halted transport along the country's main supply route between Bangui and Garoua-Boulai in Cameroon, leading to food shortages and food price increases. The influx of IDPs to towns with low supplies also contributed to price hikes due to increased demand (HNO, October 2021).

The deteriorating security hindered access to fields during harvest, led people to abandon their crops as they sought refuge elsewhere, and made it more difficult to source agricultural inputs. Insecurity also led some farmers to cultivate on smaller parcels of land than usual, and in some cases, to abandon crops already planted (HNO, October 2021; IPC, October 2021).

Between 80–95 percent of households that derive income from farming reported difficulties in practising agriculture, with conflict cited as a major obstacle. In some sub-prefectures of Ouham and Ouham-Pendé, up to 30 percent of farmers were unable to cultivate (IPC, October 2021).

In Ouham-Pendé and Nana-Mambéré, the use of explosive devices intensified, with serious repercussions for humanitarian access to populations in difficulty (IPC, October 2021). Security incidents

affecting humanitarian workers continued to increase, with 364 incidents recorded from January to October compared to 339 during the same period in 2020. Three humanitarian workers were killed and 24 injured (GHO, 2022).

🏠 Economic shocks, including COVID-19

Increasing insecurity and containment measures, including border closures related to the second wave of COVID-19, continued to affect household livelihoods, causing job losses, high prices and erosion of purchasing power (ACAPS, May 2021).

While market prices varied widely across the country, the increase in the prices of local and imported goods since the electoral crisis of December 2020 were exceptional in their breadth and duration (FAO, May 2021) due to a variety of factors, including a slowdown in trade flows caused by measures to contain the second wave of COVID-19 in sub-Saharan countries and the disruption of the Bouar-Garoua Boulai corridor by armed groups, causing an unprecedented disruption of supplies of goods and humanitarian aid (IPC, May 2021).

The average price of maize increased by 103 percent between January and May 2021 due to limited market availability and remained high between May and August 2021 (HNO, October 2021, FAO-GIEWS, December 2021). Prices of most locally produced products, such as maize, rice, sorghum, palm oil and peanuts increased further between March and August 2021 in line with seasonal trends, while prices of imported commodities, such as rice, white beans, wheat and fish, remained above the five year average levels in the June–August 2021 period (FAO-GIEWS, October 2021).

🦠 Crop pests and diseases

Seasonal attacks from pests such as fall armyworms and locusts on some of the most consumed crops (such as maize and rice) and plant diseases (such as cassava brown-streak disease and cassava mosaic disease) negatively affected yields (HNO, October 2021; IPC, October 2021).



Since 2013, armed conflict has destabilized the whole country and led to mass displacement. Despite the February 2019 peace agreement, a surge in violence since December 2020 has fuelled a humanitarian crisis unequalled since 2015.

Displacement 2021

By September 2021, the forcibly displaced population in the Central African Republic reached 2.5 million, including IDPs, refugees and returnees.

IDPs

 **0.7M** IDPs nationally

Source: Commission Mouvement de Population (CMP), December 2021.

 **0.4M** IDPs in nine prefectures and the capital Bangui

Source: IOM DTM, September 2021.

For several years, armed violence, inter-community conflicts and fighting between farmers and herders in the Central African Republic have compelled people to abandon their homes and livelihoods. Conflict/insecurity and flooding propelled further internal displacement and refugee outflows to neighbouring countries (IOM DTM, September 2021).

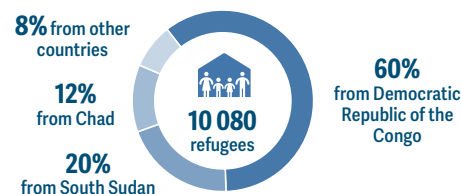
The number of IDPs at the national level decreased from 742 000 people in February 2021 – a level not seen since 2014 – to 652 000 in January 2022 (CMP, January 2022).

IOM identified around 393 850 IDPs by September 2021 in nine prefectures of Bamingui-Bangoran, Haute-Kotto, Haut-Mbomou, Nana-Gribizi, Nana-Mambere, Ombella-Mpoko, Ouaka, Mbomou, Ouham-Pende and the capital Bangui. More than one in three IDPs (36 percent) had been displaced for more than three years, while around 94 500 were displaced between January and September 2021. Conflict/insecurity is the overwhelming driver of displacement – including tensions linked to the 2020 elections, which was reportedly responsible for 11 percent of all internal displacements. Floods drove 4 percent of the total number of IDPs from their homes, mainly in the city of Bangui and Ombella Mpoko (IOM DTM, September 2021).

Refugees and asylum seekers

FIG 3.12

The Central African Republic hosts 10 080 refugees



Source: UNHCR, January 2022.

Most (57 percent) refugees are hosted in camps, while 19 percent are in rural areas and 24 percent in urban areas. Refugees rely on humanitarian assistance to meet their food and non-food needs (HNO, December 2021). Among Nigerian refugees living in camps, almost one third have poor food consumption while another 41 percent have borderline food consumption. Refugee household access to food is constrained due to limited income and resources, with 70 percent of households unable to meet their essential needs with their own economic resources (SENS, 2021).

Returnees

 **1.1M** returnee IDPs  **0.3M** returnee refugees

Source: HNO, October 2021.

Despite continued instability, between January and September 2021, around 350 000 IDPs and Central African refugees in Cameroon, Chad and the Democratic Republic of the Congo returned to their home districts. IDP returnees in approximately 65 percent of locations assessed and refugee returnees in 31 percent of locations reported that improved security in their home district was the main reason for their return (IOM DTM, September 2021). More than 0.7 million Central African refugees live in neighbouring countries, mainly in Cameroon, the Democratic Republic of the Congo and Chad (HNO, December 2021).

Additional drivers of acute food insecurity and malnutrition among IDPs and returnees

Constraints to food production constitute a key challenge to IDP food security since the majority of the IDP population (95 percent) rely on self-production as the main source of food. Although IDPs in 73 percent of sites reported having access to arable land, numerous obstacles were cited that constrained their ability to produce food including lack of seeds (91 percent), lack of financial means to purchase seeds (70 percent) and shortage of labour to work crops (58 percent) (IOM DTM, September 2021).

More than half (54 percent) of IDPs also bought food from markets. IDPs in 89 percent of localities reported that the remoteness of markets often made it challenging to access food, with 23 percent having to walk for more than an hour to reach the market (IOM DTM, September 2021).

The poor living conditions of displaced populations increase the incidence of diseases in children under 5 years such as malaria, diarrhoea and acute respiratory infections. Lack of drinking water and high population concentration contribute to an increasingly precarious and unhealthy environment, particularly for IDPs in camps and returnees (HNO, October 2021).

Those who fled in panic when they heard gunshots during the election violence found 'refuge' in dire conditions in remote, hard-to-reach areas of the Central African Republic close to rivers, without basic shelter and facing acute food shortages. They were dependent on catching fish and on what local villagers with already extremely limited resources could spare. For many, the river was the sole water source for drinking, washing, and cooking. Malaria, respiratory tract infections, and diarrhoea were commonplace. Vast distances and extremely poor road conditions posed major challenges for humanitarian responders (UN, January 2021).

Key nutrition challenges



214 000 children under 5 years were **wasted** in 2022
67 000 of them were **severely wasted**



98 000 pregnant and lactating women
were **acutely malnourished**

Source: IPC AMN, October 2021.

High levels of acute food insecurity have contributed to the number of children and pregnant and lactating women that were wasted in 2021.

Of particular concern is the deterioration in Basse-Kotto and Haut-Mbomou prefectures in the southeast, where six sub-prefectures (Mobaye, Zangba, Satema, Mingala, Djema and Zémio) are expected to be in Critical (IPC AMN Phase 4) during the lean season (March to August 2022), which is also the peak of the malaria season. In Kaga-Bandoro, Yalinga et Ouadda, which were not analysed due to lack of sufficient data, the nutritional situation is expected to be severe, driven by access constraints and lack of work opportunities and basic health services (IPC AMN, October 2021).

Stunting levels remain 'very high', according to WHO thresholds, with approximately 40 percent of children below 5 years stunted, up from 37.7 percent in 2018 (SMART, 2018 and 2019).

Key drivers



Food security and access to healthy diets

Acute food insecurity appears to be a major contributing factor to child wasting in all the sub-prefectures classified in Serious (IPC AMN Phase 3). More than 40 percent of the population in all of these sub-prefectures have faced Crisis or worse (IPC Phase 3 or above) acute food insecurity, which reflects serious limitations on access to food (quantity and quality) (IPC AMN, October 2021).

Caring and feeding practices

Although almost half of children are breastfed exclusively until 6 months of age (SMART, 2019), minimum dietary diversity is very low in all the areas analysed (varies from 1.6–32 percent) and only 2 percent of children aged 6–23 months have a minimum acceptable diet (IPC AMN, October 2021).

Health services and household environment

Conflict and insecurity in tandem with the persistent effects of COVID-19, including the restrictive measures put in place for its control, have had a major negative impact on basic social services, accentuating the already inadequate functioning of many decentralized health structures and further reducing the coverage of nutritional interventions. Insecurity made it difficult for households to access nutritional assistance and prevention activities in most sub-prefectures analysed (IPC AMN, October 2021).

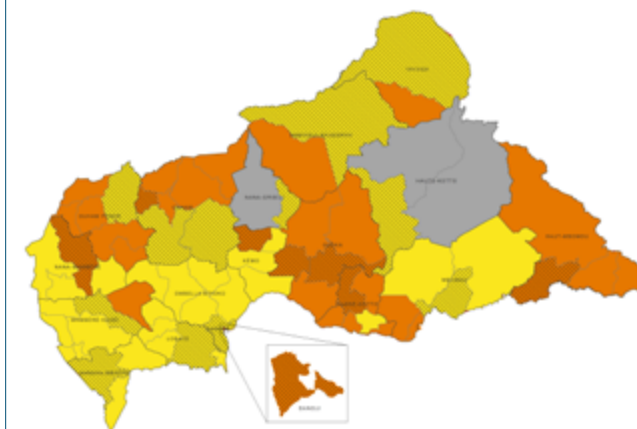
In Kabo, Mingala and Mbrès sub-prefectures, mobile clinics had to be suspended due to insecurity and health facilities were occupied by armed groups, while people relied on humanitarian aid to survive (HNO, October 2021).

Inadequate access to safe drinking water and improved sanitation contribute to the high prevalence of childhood diseases – notably malaria, diarrhoea, acute respiratory infections and measles outbreaks. Water facilities are no longer functional due to vandalism or lack of maintenance, containers for collecting and storing water have been lost during people's flight, wells have been contaminated and insecurity has limited access to water points that are still functioning. In 2021, people in Ouham-Pendé suffered the highest number of violent shocks in the country and the number of people without access to water trebled (HNO, October 2021).

MAP 3.14

IPC acute malnutrition situation, September 2021–February 2022

According to the analysis of 68 out of 71 sub-prefectures and Bangui, 31 were classified in Serious (IPC AMN Phase 3) – including Bangui – and the remaining 37 in Alert (IPC AMN Phase 2).



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

Source: Central African Republic IPC Technical Working Group, October 2021.


Acute food insecurity forecast, 2022

 **2.36M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in April–August 2022

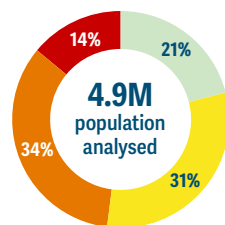
 **1.67M people**
in Crisis
(IPC Phase 3)

 **0.69M people**
in Emergency
(IPC Phase 4)


 The number of people experiencing Crisis or worse (IPC Phase 3 or above) is expected to remain largely unchanged in 2022.

48% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **1.53M people** were forecast to be in Stressed (IPC Phase 2)

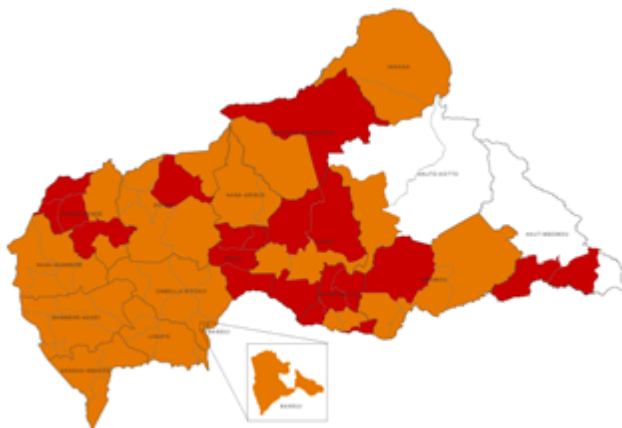
 The analysis covers **87%** of the population of **5.7 million** people. Four sub-prefectures – Bambouti, Djema, Ouadda, and Yalinga – were not classified due to lack of data.

Source: IPC, October 2021.

MAP 3.15

IPC acute food insecurity situation, April–August 2022

During the April–August 2022 lean season, 20 out of 68 areas are expected to be classified in Emergency (IPC Phase 4) and the rest in Crisis (IPC Phase 3). In Haut-Mbombou, Kémo and Ouham Pendé, 20–24 percent of the analysed populations are forecast to be in Emergency (IPC Phase 4).



- 1 - Minimal
 - 2 - Stressed
 - 3 - Crisis
 - 4 - Emergency
 - 5 - Famine
 - Inadequate evidence
 - Not analysed
-  At least 25% of households meet 25–50% of caloric needs from humanitarian food assistance
 -  At least 25% of households meet over 50% of caloric needs from humanitarian food assistance

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

Source: Central African Republic IPC Technical Working Group, October 2021.

Recurring violence and displacement will continue to drive economic deterioration, income losses, and high food prices, against the backdrop of weakened household resilience after many years of conflict and high levels of acute food insecurity.

Conflict/insecurity

In the absence of a political solution, violence against civilians, civilian infrastructure and humanitarian actors is likely to continue at a similar level. As a result of continued violence, humanitarian actors anticipate several crises in different parts of the country. Increased tension and insecurity are likely around the 2022 elections. The period from December to April, when the roads become passable, also corresponds to the period of more intense and widespread armed conflict, when additional displacement can be expected (HNO, October 2021; IPC, October 2021).

Continued insecurity is expected to trigger new displacements. The scale of displacement and returns will continue to disrupt household access to food and incomes and heighten tensions around access to housing, land and property (HNO, October 2021).

Economic shocks, including COVID-19

In addition to the seasonal rise in prices due to the lean season, food prices are expected to rise above their usual levels in 2022 due to increases in customs taxes amid declining trade flows (IPC, October 2021).

Chad

Acute food insecurity overview 2021

1.78M people were in Crisis or worse (CH Phase 3 or above) in June–August 2021

1.61M people in Crisis CH Phase 3

0.17M people in Emergency CH Phase 4

11.6% of the population analysed was in Crisis or worse (CH Phase 3 or above)



3.33M people were in Stressed (CH Phase 2)

The analysis covers **92%** of the total population of **16.7 million** people (the entire country excluding the capital city, Ndjamena).

Source: Ministère de l'Agriculture, 2021.

National population

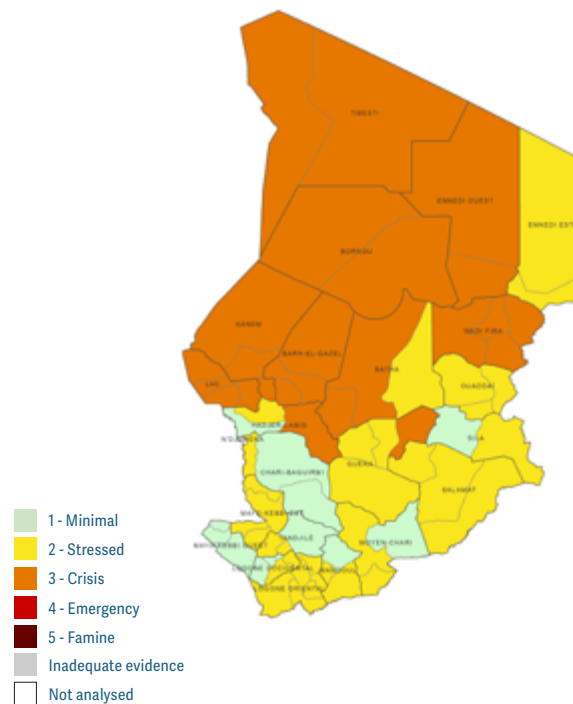


Source: WB 2020.

MAP 3.16

CH acute food insecurity situation, June–August 2021

Out of 69 departments analysed, 24 were classified in Crisis (CH Phase 3), mostly in Sahelian and northern areas – including Lac, Kanem, Bahr El Ghazal, Wadi Fira, Tibesti, Borkou and large parts of Batha and Ennedi Ouest regions.



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

Source: CH, March 2021.

Acute food insecurity trends

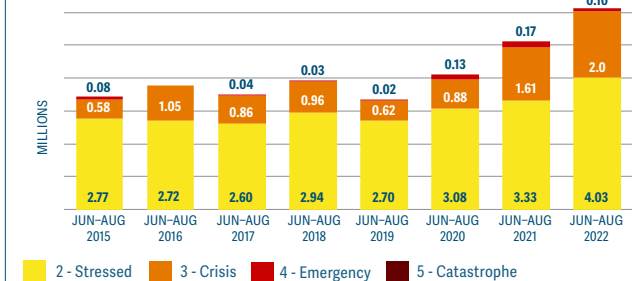
Numbers have risen since 2020. In June–August 2021 the number of people facing Crisis or worse (CH Phase 3 or above) reached its highest level recorded for Chad by the CH – 75 percent higher than the same period in 2020.

During the post-harvest season in October–December 2021, acute food insecurity was expected to decrease, but to a much lower extent than in previous years, with around one million people remaining in Crisis or worse (CH Phase 3 or above) – or 60 percent more than in October–December 2020.

In June–August 2021, the number of people in Emergency (CH Phase 4) reached 165 000, the highest number estimated for Chad by the CH, surpassing the previous high of 135 000 people in June–August 2020. Conflict and insecurity are driving this deterioration, particularly in the west, northwest and neighbouring countries, while weather extremes have affected food production, particularly in 2021. Economic shocks, notably the impact of the COVID-19 pandemic, escalated from early 2020 onwards.

FIG 3.13

Numbers of people in CH Phase 2 or above, 2015–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2014 and 2022 are provided (see Appendix 1, table A6, page 248).

Source: CH.

Drivers of the food crisis in Chad in 2021

Conflict and insecurity remained the main driver of food insecurity, while weather extremes and economic shocks also compromised stable access to food in 2021.

* Conflict/insecurity

The insurgency in the Lac region continued to disrupt livelihoods, markets and trade. As a result, and in combination with poor rainfall in 2021, localized production shortfalls were reported in the area and food prices remained significantly high throughout the year (CH, March 2021; FAO-GIEWS, June 2021; FEWS NET October 2021).

Insecurity in the Tibesti region and along the border areas with Libya also reduced trade flows in 2021 (FAO-GIEWS, June 2021). Following the death of the president, Idriss Deby Itno, in April, national curfew and border restrictions were reintroduced for national security reasons, further limiting livelihoods while COVID-19 restrictions were being lifted or eased (FEWS NET, April 2021).

Intercommunal conflicts also affected the southern region of Mandoul and bordering areas in late 2021 and led to population displacements from neighbouring Cameroon (FEWS NET, December 2021).

* Weather extremes

Rainfall was erratic across time and space in the first part of the 2021 rainy season and was generally below average across most of the country (SISAAP, August 2021). Long dry spells in central Chad affected flowering and crop maturation over September–October, while in the northern and southern areas, an early cessation of rain adversely affected the production of biomass and pastures. In southern Chad, some areas affected by long dry spells, below-average rainfall over the entire rainy season, and floods in September were of particular concern for potentially adverse effects on food security (WFP, October 2021). In the Lac region, dry spells pushed farmers to abandon their fields – leading to a 30 percent decrease in the planted area on a yearly basis, or 9 percent below the average cultivated surfaces (FEWS NET, October

2021). Overall, weather conditions had a negative impact on crop yields and fodder availability during the 2021–22 campaign. As a result, cereal production was estimated to decline 6.3 percent below the five-year average (RPCA, November 2021). Sahelian areas lost around 20 percent of production compared to the five-year average, mainly in Bahr-El-Ghazal, Kanem and Lac regions (FEWS NET, December 2021).

In Wadi Fira, Chari Baguirmi, Bahr El Ghazal and Kanem, grazing conditions were below-average. Erratic rains also affected grazing conditions in Ouaddai, leading to an early pastoralist migration and an over-concentration of livestock in some southern areas (FEWS NET October 2021).

* Economic shocks, including COVID-19

Although COVID-19 restrictions were lifted or eased from March 2021, the country continued to be affected by the oil crisis of the previous years – with oil revenues remaining low at around 9 percent of GDP in 2021, limiting fiscal space (World Bank, October 2021) – a situation that was exacerbated by COVID-19 related global economic disruptions. In addition, trade flows continued with neighbouring countries, but at below average pace due to the health and security crises.

On average in 2021, income opportunities remained limited in both urban and rural areas (FEWS NET, October 2021). Around 55 percent of households reported a decrease in incomes compared to the previous year (FAO, July 2021).

During the lean season, market availability was limited for certain products due to localized production shortfalls in 2020, high transaction and transportation costs and high demand from neighbouring countries (WFP, July 2021). As of June 2021, prices of staple cereals were above their 2020 levels (FAO-GIEWS, June 2021). In spite of an improvement of market supplies, the demand for cereal was atypically high in markets of both Sahelian and Sudanian areas in the post-harvest period, due to below-average production in 2021 (FEWS NET, November 2021). Prices of staple cereals decreased seasonally in September but remained 20 to 30 percent above their 2020 levels (FAO-GIEWS, December 2021).



Hadje Fondi Adam, 59, has lived in displacement with her nine children for seven years, since they fled a Boko Haram attack in their home village.

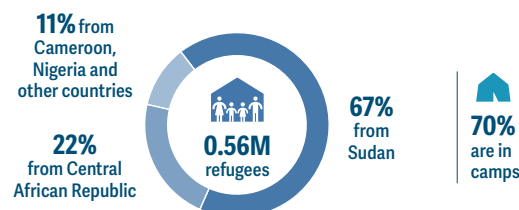
Conversely, prices of cash crops and livestock were low (CH, March 2021); therefore, as of August, terms of trade were particularly detrimental to pastoralists in Mongo (Guéra), Oumhadjer (Batha), and Bol (Lac) (SISAAP, August 2021).

Displacement 2021

Refugees

FIG 3.14

Chad hosts the largest number of refugees and asylum seekers in West Africa and the Sahel



Source: UNHCR, December 2021.

The majority of refugees and asylum seekers in Chad reside in camps in the North, East and South, with the most recent arrivals from the Central African Republic hosted in villages in the West. Most have been displaced for over three years.

Around 72 percent of refugees in Chad had poor or borderline food consumption, and nearly one in two refugee households resorted to acquiring debt to access food. Woman-headed households, households with large numbers of members, refugees from the Sudan and those dependent on daily labour were the most vulnerable and most likely to resort to emergency coping strategies such as begging (UNHCR & WFP, October 2021).

In half the surveyed camps, child wasting levels were above 15 percent, and above 10 percent in all but one of the surveyed camps, a considerable deterioration compared to previous years (UNHCR & WFP, October 2021).

Camp-based refugees are largely dependent on humanitarian assistance, despite a 50 percent reduction in food aid over the past five years. Approximately 80 percent of the camp-based refugee population received food assistance in 2021, with 92 percent unable to meet their food needs (UNHCR & WFP, October 2021). To cope, most households have adopted negative strategies (60 percent in the Sudanese refugee camps, 66 percent in the Nigerian refugee camps and 71 percent in the CAR refugee camps) (SENS, 2021).

IDPs

Most IDPs have been displaced by waves of conflict in 2015, 2020 and 2021 and are located mainly in the Lac region. Most originated from the departments of Fouli (38 percent), Kaya (38 percent) and Mamdi (24 percent). In a July 2021 study, 91 percent of IDP respondents reported decreased availability of food and 87 percent reported a decrease in their resource production compared to before being displaced. More than 94 percent of respondents reported that within the two weeks prior to the assessment family members had missed a meal. In 85 percent of locations hosting displaced populations, food was mentioned as the top priority need (IOM DTM Chad, September 2021).

Additional drivers of acute food insecurity and malnutrition among displaced people in Chad

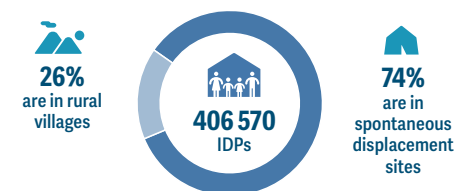
Livelihood opportunities for both IDPs and refugees are generally limited, given broader macroeconomic difficulties and the effects of COVID-19 measures, which resulted in job losses in the informal sector and high food prices. More than half (54 percent) of respondents reported they had less money to buy quality food, while 40 percent had lost their job or were struggling to keep it (IOM, July 2021).

A July 2021 survey¹ found that the depletion of water in the Lake Chad Basin – which affects livestock, crop and fish production – has increased environmental displacement and contributed to food insecurity and nutritional challenges. Eighty percent of communities in the Lake Chad Basin rely on agriculture as their main livelihood. Communities have traditionally diversified their livelihoods to meet their food needs but adaptation is becoming increasingly difficult. For example, farmers have reduced financial capacity or land to engage in these diversified resolutions. In addition, conflict and multiple displacements further strain financial capacity to continue to respond to these changing circumstances. The majority of the assessed population

¹ The survey was based on a sample of 892 respondents, which consisted of IDPs, returnees, migrants, refugees, host members, and transhumance populations in the Lac province.

FIG 3.15

The majority of IDPs in Chad live in government sites in the Lac region



Source: IOM/DTM, December, 2021.

(80 percent) reported a loss of livelihood compared to 24 percent having diversified their livelihood (IOM, July 2021).

Many refugees engage in seasonal agriculture, though land is limited, of poor quality (particularly in the East) and is borrowed or rented from the host community, thereby limiting long-term farming prospects. The refugee population reported an 18 percent decrease in crop production since the beginning of the pandemic (UNHCR & WFP, October 2021).

Compared to the pre-COVID-19 period, 54 percent reported reduced work opportunities and 68 percent reported an increase in debts, which compounded food insecurity, given the simultaneous decline in humanitarian food assistance (UNHCR & WFP, October 2021).

In addition to food insecurity, sub-optimal infant and young child feeding practices and frequent childhood diseases adversely affect nutritional outcomes. In some camps, as few as 6 percent of infants were exclusively breastfed, reaching 54 percent in another (UNHCR SENS, July 2021).

Key nutrition challenges



1.9M children under 5 years were **wasted** in October 2020–September 2021

401 090 of them were **severely wasted**



346 580 pregnant and lactating women were **wasted**

Source: IPC AMN, April 2021.

From the end of 2020 to June–September 2021, the nutrition situation across Chad deteriorated considerably, with 28 departments classified in Serious (IPC AMN Phase 3) and Critical (IPC AMN Phase 4) (IPC AMN, April 2021).

By October–December 2021, the number of wasted children and women were projected to decline, aligning with the harvest period (IPC, December 2021).

Wasting figures observed in June–September 2021 were in line with those of August–September 2019, when roughly the same number of children under 5 years were wasted (IPC, March 2020 and April 2021). Both analysis periods coincided with the lean season, during which time acute food insecurity historically reaches its peak.

Key drivers

Caring and feeding practices

Inadequate dietary intake was identified as a primary driver of nutritional challenges during 2021, with over 88 percent of children between 6–23 months at the national level not meeting minimum dietary diversity levels. Similarly, over 91 percent of children did not have access to minimum acceptable diets. Other concerning indicators include high anaemia deficiencies, which affect 30–80 percent of children (IPC AMN, April 2021).

Fewer than one percent of children are exclusively breastfed for 6 months, falling well below the global target of 50 percent (Global Nutrition Report, 2021).



Food security and access to healthy diets

When comparing nutritional outcomes with the results of recent acute food insecurity analyses, IPC indicated that high levels of acute food insecurity were a contributing factor to the nutritional status of children and women in nine out of 38 departments. The difficult nutritional situation in several provinces classified in Serious (IPC AMN Phase 3) and Critical (IPC AMN Phase 4) was attributed in part to a high frequency of conflict and insecurity-related incidents (IPC AMN, April 2021). Intercommunal conflicts and insecurity in Lac region triggered population displacements in 2021, disrupting access to food sources, livelihoods and essential services. Insecurity also stymied the distribution of humanitarian assistance, which worsened nutritional outcomes for vulnerable populations (HNO, March 2022).

When comparing the CH acute food insecurity map for June–August 2021 and the IPC acute malnutrition map covering July–September 2021, the severity of needs broadly matches, with higher classifications for both acute food insecurity and acute malnutrition concentrated in the regions of Tibesti, Borkou, Kanem, Lac, Barh El Gazal, Batha, and Ennedi Ouest in particular. However, while these areas were in Crisis (IPC Phase 3) in terms of acute food insecurity needs, Tibesti, Borkou, Kanem, Barh El Gazal, and Ennedi Est and Ouest were classified as Critical (IPC AMN Phase 4). In several regions where acute malnutrition was classified as Serious (IPC AMN Phase 3) or above, acute food insecurity needs were classified as Stressed (IPC Phase 2) or Minimal (IPC Phase 1), notably in Ennedi Est, Guera, Hajer Lamis, Mayo Kebbi Est, Mayo Kebbi Ouest, Ouaddai, Salamat and Sila (IPC AMN, April 2021).

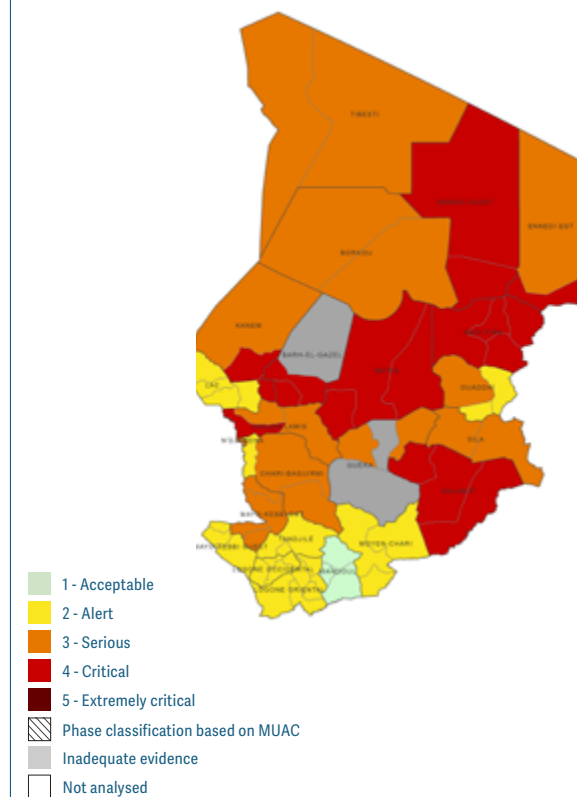
Health services and household environment

Access to health services is limited in Chad, which poses an obstacle to households seeking treatment for wasting and other nutrition challenges. In 26 out of 35 analysed departments, a high prevalence of childhood illnesses, notably diarrhoea, malaria and measles, was reported and observed as a contributor to poor nutritional outcomes (IPC, April 2021). COVID-19 restrictions further reduced access to essential services, particularly healthcare (HNO, March 2022).

MAP 3.17

IPC acute malnutrition situation, October–December 2021

Out of 38 departments analysed, 16 were classified in Critical (IPC AMN Phase 4) and 11 in Serious (IPC AMN Phase 3).



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

Source: Chad IPC AMN Technical Working Group, December 2020.

Acute food insecurity forecast, 2022

2.1M people

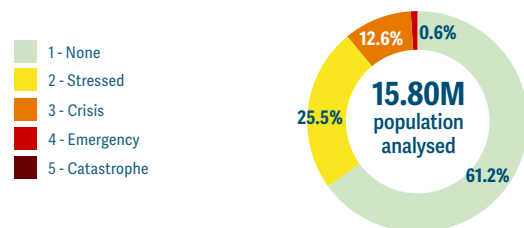
were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022

2.0M people
in Crisis
(CH Phase 3)

0.10M people
in Emergency
(CH Phase 4)

The number of people in Crisis or worse (CH Phase 3 or above) is expected to increase by around 18 percent by June–August 2022 compared to the high levels of 2021.

13% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)



4.03M people were forecast to be in Stressed (CH Phase 2)

The analysis covers **94%** of the total population of **16.8 million** people (the entire country excluding the capital city, Ndjamena).

Source: CH, March 2022; Ministère de l'Agriculture, 2021.

Given limited time between the release of the latest CH results and the publication of the GRFC, no projection map is provided for Chad.

Conflict/insecurity

The insurgency in Lac and violence in Tibesti are expected to continue disrupting trade in 2022, contributing to below-average imports. Insecurity-related displacement in Lac, Tibesti and other areas is likely to result in an excess of labour supply, negatively impacting wages and purchasing power of vulnerable households in affected areas. Remittances are expected to remain at below average levels in 2022 as a result of insecurity and instability in neighbouring Libya and the Sudan. The early cessation of rains is expected to prompt earlier-than-normal pastoralist migration, increasing the risk of intercommunal violence (FEWS NET, October 2021). Insecurity is expected to add further upward pressure on food prices, particularly in Lac region (CH, March 2022).

Weather extremes

The 2021–22 agro-pastoral season was marked by pockets of drought and an early cessation of rainfall in the Sahelian strip, which adversely affected crop yields and caused significant fodder deficits. The 2021 floods, which destroyed 80 000 hectares of crops and killed over 6 000 livestock, will also have a prolonged impact on household food security into 2022 (OCHA, December 2021). Reduced crop production, alongside below-average food import levels, is likely to contribute to a 291 000 tonne deficit in food in 2021/2022 – implying a 10 percent decrease in per capita availability compared to the national objectives (CH November, 2021). As a result, 2021/2022 cereal production was 9 percent below both 2020/2021 and the 5-year average (CH, March 2022).

Economic shocks, including COVID-19

The economic slowdown resulting from the health and security crisis along the border with the Sudan and Libya, combined with low food stocks and incomes, will likely continue to constrain poor households' access to food (FEWS NET, December). In areas with structural food deficits, such as Bahr El Ghazal and Kanem, poor and very poor households will be particularly affected by reduced incomes and limited access to food in markets (FEWS NET, October 2021), with prices remaining high in 2022 compared to their year-earlier levels, and increasing (CH, March 2022).

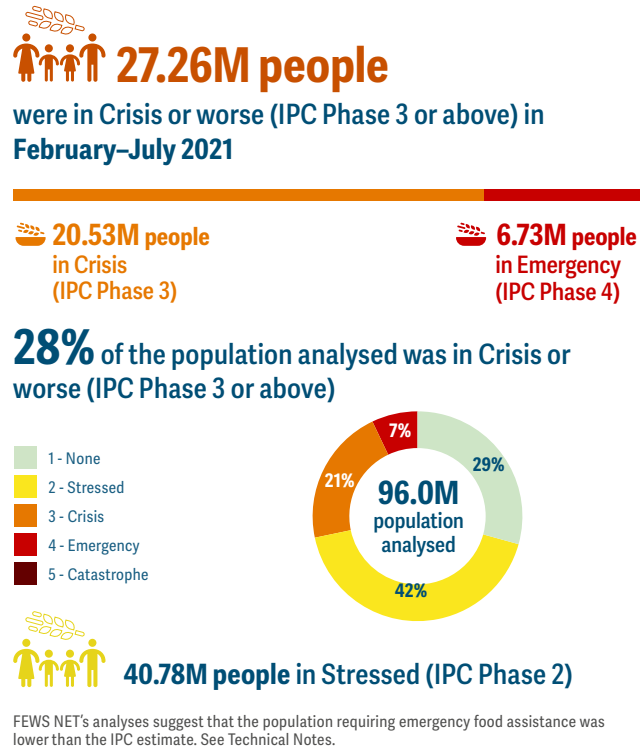


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Chad is one of the world's most vulnerable countries due to the adverse effects of climate change, affected by desertification, land degradation and extreme weather; in addition conflict/insecurity drives internal and external population movements.

Democratic Republic of the Congo

Acute food insecurity overview 2021



The analysis covers **91%** of the population of **105 million** people and included the 26 provinces of the countries, including 133 territories in rural areas, 13 urban areas and the 24 communes of Kinshasa.

Source: IPC, March 2021.

National population

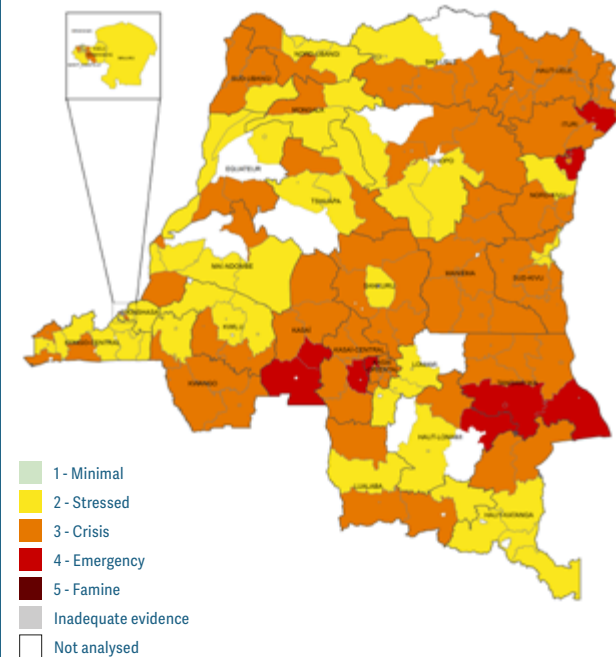


Source: WB 2020.

MAP 3.18

IPC acute food insecurity situation, February–July 2021

In February–July 2021, out of 170 areas, nine were classified in Emergency (IPC Phase 4) in Haut-Lomami, Ituri, Kasai, Kasai Central and Kasai Oriental, North Kivu, and Tanganyika provinces, and 92 in Crisis (IPC Phase 3). In Ituri, Kasai and Central Kasai, around half the population were experiencing Crisis or worse (IPC Phase 3 or above).



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

Source: Democratic Republic of the Congo IPC Technical Working Group, March 2021.

Acute food insecurity trends

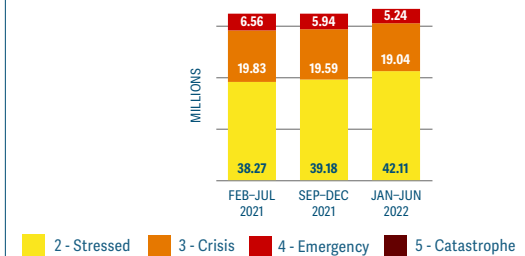
Numbers have increased significantly since 2020. At 27.3 million, the number of people in Crisis or worse (IPC Phase 3 or above) was the highest in the world in 2021 and the highest in the history of the GRFC – partly due to expanded geographic coverage. But the prevalence fell from 33 percent in July–December 2020 to 28 percent in February–July 2021.

When comparing the same territories between 2020 and 2021, the number of people in Crisis or worse (IPC Phase 3 or above) stood at 15.7 million in February–July 2021 and subsequently fell to 14.7 million in September–December 2021, largely due to improved security in certain areas and the easing of pandemic-related restrictions.

During the first wave of COVID-19 in 2020, job losses in the urban informal sector exacerbated poverty and economic decline. In July–December 2020, 760 000 people in Kinshasa faced Crisis or worse (IPC Phase 3 or above). By February–July 2021, the number had fallen to around 525 000 (IPC, September 2020 and March 2021).

FIG 3.16

Numbers of people in IPC Phase 2 or above, 2021–2022



To ensure comparability across periods, the same 163 areas were considered – out of 170 areas in the February–July 2021 analysis, and out of 179 areas in the September–December 2021 and January–June 2022 analyses.

Source: Democratic Republic of the Congo IPC Technical Working Group.

Drivers of the food crisis in Democratic Republic of the Congo in 2021

Protracted conflict continued to displace households, disrupt livelihoods and humanitarian response efforts, particularly in North Kivu, South Kivu and Ituri provinces. Conflict, crop diseases and pests also undermined food production and high food prices hampered household access to food.

✳️ Conflict/insecurity

Conflict and displacement have been ongoing in large swathes of eastern Democratic Republic of the Congo for around 25 years. The provinces of North Kivu, South Kivu and Ituri have experienced the most violent and protracted conflict, while in recent years Tanganyika in the south east and the central Maniema and Kasai provinces have also been affected by conflict (WFP, December 2021).

In May 2021, a state of siege was declared in Ituri and North Kivu, displacing additional populations and worsening living conditions of those scarred by years of conflict (FEWS NET, June 2021). Security incidents included armed violence against civilians, attacks targeting humanitarian personnel and their convoys, kidnappings, theft and looting of crops (IPC, March 2021). By late 2021, the situation remained volatile and continued to disrupt people's access to agricultural fields and basic services, while constraining the delivery of aid (ACAPS, November 2021).

In some zones, such as Grand Kasai, despite an improvement in security, acute food insecurity levels remained very high due to a reduced capacity to recover from previous shocks, while external rehabilitation and livelihood support was limited (IPC, March 2021).

The ongoing conflict and new population displacements, particularly in North Kivu, South Kivu and Ituri, coupled with restrictive measures to limit the spread of COVID-19, disrupted agricultural operations, including harvesting of the 2021 secondary season maize and land preparation of the 2021 main season maize crops (FAO-GIEWS, July 2021). Consequently, main season cereals harvests (January–March) were below normal across the entire eastern area, leading households to deplete their stocks earlier than usual (FEWS NET, June 2021).

🏠 Economic shocks, including COVID-19

The large number of households reliant on informal livelihoods and cross-border trade continued to be adversely affected by border closures and the fall in economic activity due to COVID-19 restrictions. Households reliant on the sale of cash crops (coffee, cocoa and tobacco) also suffered a severe loss of purchasing power due to low export levels. Many tourism and hospitality sector workers had still not recovered their jobs (IPC, March 2021).

Widespread and pervasive poverty increased due to the impacts of COVID-19. Already in 2018, an estimated 73 percent of the population lived on less than the international poverty level of USD 1.90 a day (WB, April 2021). In rural areas, where almost 70 percent of the population lives and largely relies on agriculture, fishing and livestock-rearing, access to basic services is extremely challenging due to poor infrastructure, which also hinders market access and functionality and trading of agricultural products. Poor infrastructure also complicated humanitarian access to populations in need of assistance (IPC, March 2021).

Prices of maize meal and imported staple food commodities (rice and refined vegetable oils) were relatively steady due to a stable exchange rate (FEWS NET, June 2021). However, according to the International Monetary Fund (IMF), average annual inflation, which reached 11.4 percent in 2020, was expected to remain high at about 9 percent in 2021 (FAO-GIEWS, December 2021).

🌪️ Weather extremes

Weather conditions were generally favourable for cropping in 2021 except for localized floods in Kinshasa, Maniema, Tanganyika, North Kivu and South Kivu that affected more than 291 000 people during the first eight months of the year, destroying homes, displacing families and causing damage to standing crops (FAO-GIEWS, July 2021; OCHA August 2021).

🦠 Crop pests and diseases

Numerous crop pests and diseases that negatively impacted crop production in 2021 included cassava mosaic, whitefly, rice blast, groundnut rosette, fall armyworm and locusts. Animal



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Having lost her job as a teacher when there was no money to pay her, mother-of-four Furaaha struggles to feed her family with only her husband's irregular salary.

diseases included avian flu as well as swine and goat fever. In August 2021, the Ministry of Agriculture declared an outbreak of Peste des Petits Ruminants (PPR) in Maniema and Kasai Central, estimating that it led to the loss of thousands of animals in an area where households often keep goats to sell so they can buy food (IPC, November 2021).

Displacement 2021

The 5.9 million IDPs and refugees in the Democratic Republic of the Congo are highly exposed to high levels of acute food insecurity and malnutrition.

IDPs

 **5.4M** IDPs

Source: IDMC, December 2021.

The majority of the country's IDPs have been displaced by conflict, followed by natural disasters, and are located in Ituri (47 percent), South Kivu (46 percent) and Tanganyika (7 percent) (IOM DTM DRC, November 2021).

In 2021 alone, an estimated 1.5 million people were displaced mainly due to violence in the east of the country with some of them having to move several times (HNO, January 2022). In some areas, improved security contributed to movements of returning populations, particularly in the Kasai region and the South-Kivu and Tanganyika provinces (FEWS NET, February 2021).

Three out of every four IDPs live with host families, with many of the latter already struggling to meet their basic food and non-food needs before taking in IDPs (WFP, 2021). In North Kivu, more than 40 percent of households living in conflict-affected Beni, Lubéro, Masisi or Nyiragongo declared having hosted displaced people in 2021. In Kalehe, in South Kivu, 60 percent of households took in displaced people from Goma following the eruption of the Nyiragongo volcano or the displacement of populations fleeing armed groups (IPC, November 2021).

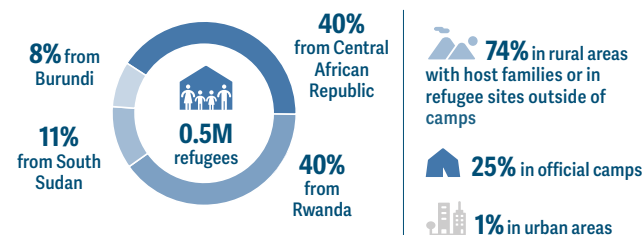
In 132 health zones hosting internally displaced people, 44 show a worrying prevalence of wasting, and 95 have a high prevalence of people in Crisis or worse (IPC Phase 3 or above) (IPC, November 2021).

Population displacements linked to armed conflicts in the east of the country will continue in 2022, particularly in the provinces of Ituri and North Kivu (HNO, January 2022).

Refugees

FIG 3.17

The Democratic Republic of the Congo hosts 0.5 million refugees, the fourth largest number in Africa



Source: UNHCR and WFP, December 2021.

Geographically, about 58 percent of the refugees live in the east of the country (Haut-Uélé and Ituri provinces for refugees from South Sudan, North Kivu and South Kivu provinces for Burundian and Rwandan refugees) while Central African refugees reside in the north (Sud-Ubangi, Nord-Ubangi and Bas-Uélé). In 2021, the country received 73 645 Central African refugees following election-related insecurity. Some refugees make cyclical movements between the host communities in the Democratic Republic of the Congo, and their country of origin – depending on the security situation in either country (HNO, January 2022).

Available data highlighted widespread prevalence of inadequate access to food in 2021, with 85 percent of refugees reporting either poor or borderline food consumption. In January 2021, 92 percent of refugees in South Kivu had unacceptable food consumption (WFP/UNHCR, September 2021). In March 2021, 95 percent of refugees in Ituri and Haut-Uélé had unacceptable food consumption (WFP/UNHCR, November 2021). Those in North/South Ubangi fared slightly better – 66 percent had unacceptable food consumption as of September 2021 (WFP/UNHCR, forthcoming). The prevalence of wasting amongst refugee children ranges from 4–12 percent, with the highest in Mole and Bayabu (11 and 12 percent). Stunting levels are very high (35–61 percent) and anaemia is very high among under-5s (47–66 percent) (SENS, 2019).

Drivers of acute food insecurity and malnutrition for displaced populations

IDPs rely on host communities that already have meagre resources. Extreme poverty and geographical inaccessibility, as well as poor infrastructure and equipment, and lack of personnel hamper their access to basic services, such as safe drinking water, sanitation and health care. Family and community networks, which often serve as self-protection mechanisms, have been weakened (HNO, January 2022).

Following increased conflict-induced displacement in Tanganyika in September, food scarcity and lack of shelter heightened the state of insecurity and friction in the villages of Moni. A lack of resources and livelihoods, health care, marginalisation and stigmatisation of social groups, as well as protection issues were reported (IOM DTM DRC, December 2021). In December 2021, displaced households living among host communities in Kalehe, South Kivu, reported forced work, implementation of taxes not recognised by the state and looting of cattle (IOM DTM DRC, January 2022). In Tanganyika, malaria, typhoid fever and diarrhoea were reported, mostly among displaced children (IOM DTM DRC, December 2021). In South Kivu, hospital access was two hours away by foot (IOM DTM DRC, January 2022).

Refugees face socioeconomic tensions, lack of protection, rights violations and risk of exploitation. They tend to reside in areas under-served by basic social services where conflict reduces humanitarian access. COVID-19 worsened their fragile living conditions, limiting international protection and resources to respond to vital needs. Although refugees are allowed to work, there are few formal opportunities. Due to humanitarian access challenges, only 68 percent of refugees are registered. Low rates of schooling, poor access to healthcare, diseases, poor living conditions and acute food insecurity all underlie high levels of wasting (HNO, January 2022).

Key nutrition challenges



1.2M children under 5 years were **wasted** in 2021
534 000 of them were **severely wasted**



550 000 pregnant and lactating women were **acutely malnourished**

Source: HNO, February 2022.

Some 1.2 million children under 5 years and over 0.5 million women are expected to be wasted in 2022 (HNO, February 2022).

The prevalence of stunting exceeded the 'very high' WHO threshold (≥ 30 percent) with an estimated 41.8 percent of children under 5 years – almost 5.7 million children – stunted. The levels are even higher in conflict-affected northeastern provinces of North Kivu (49.6 percent) and Ituri (47.1 percent). Stunting levels are 'very high' in ten out of 11 refugee sites (SENS, 2019).

Key drivers

Low quality of food due to poor child feeding practices and acute food insecurity, as well as a high prevalence of childhood illnesses, poor sanitation, very poor access to drinking water and conflict-related displacement are chief factors driving wasting.

Food security and access to healthy diets

Acute food insecurity appears to be a major contributing factor to child wasting as a result of lower availability of food in quantity and quality for children under 5 years (IPC AMN, November 2021).

Comparisons between the IPC acute malnutrition and acute food insecurity analyses are limited due to the relatively small number of health zones covered by the acute malnutrition analysis. However, acute food insecurity appears to be a contributing factor to the nutritional situation in 46 out of the 60 health zones covered by both the acute food insecurity and acute malnutrition analysis. In the 12 zones where the classification of acute food insecurity is more severe than that of malnutrition, there are dietary practices

adopted by households that help to slightly reduce the effects of food insecurity and protect children against acute malnutrition. These include an acceptable level of IYCF practices – exclusive breastfeeding, the continuation of breastfeeding and the timely introduction of diverse foods, as well as consumption of wild foods and reducing adult consumption so that children can eat (IPC AMN, November 2021).

Caring and feeding practices

More than 60 percent of children do not receive a minimally acceptable diet. Exclusive breastfeeding, continued breastfeeding and introduction of adequate complementary food are more likely to be inadequate in Kwango, Mai-Ndombe, Kwilu, Sankuru, Kasai, Kasai-Oriental and Central provinces (IPC AMN, November 2021).

Health services and household environment

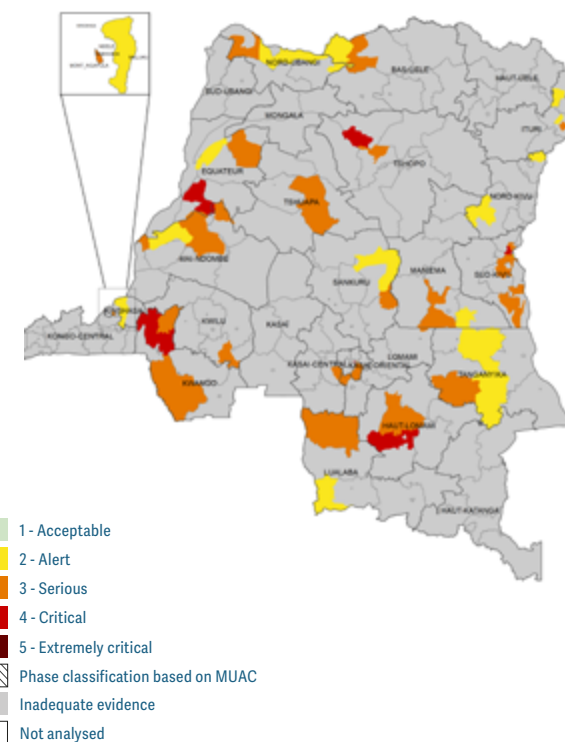
Poor sanitation conditions, low access to drinking water and poor health services underlie a high prevalence of diseases. Around 40 percent of households lack access to improved water points and over 60 percent lack improved sanitation (IPC AMN, November 2021).

The high incidence of diarrhoea is a key driver of malnutrition, particularly in Equateur, Kasai Central and North Kivu, where only 24 percent of those affected receive adequate treatment, 21.5 percent of households have access to a handwashing facility with soap and water, 33 percent to improved sanitation facilities and 5 percent to an improved drinking water source (HNO, February 2022). In the second quarter of 2021, new cases of measles were reported in Equateur, Maniema and Sankuru. From October 7, 2021, an epidemic was declared in Kinshasa (IPC AMN, November 2021). By November 2021, 49 000 measles cases had been reported nationally (HNO, February 2022). In early October, the Congolese authorities again declared the Ebola virus disease (EVD) epidemic in Beni, North Kivu. Vaccination coverage against measles and vitamin A supplementation was particularly low in certain health zones (IPC AMN, November 2021).

MAP 3.19

IPC acute malnutrition situation, September 2021–March 2022

During the peak malnutrition period between September 2021 and March 2022, eight health zones were projected to be in Critical (IPC AMN Phase 4) and 42 in Serious (IPC AMN Phase 3). Between April and August 2022, a significant deterioration is expected, with 16 health zones likely in Critical (IPC AMN Phase 4).



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

Source: Democratic Republic of the Congo IPC AMN Technical Working Group, November 2021.


Acute food insecurity forecast, 2022

 **25.88M people**

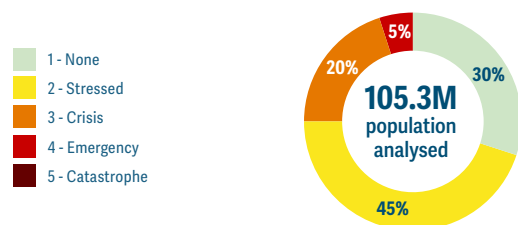
were forecast to be in Crisis or worse (IPC Phase 3 or above) in January–June 2022

 **20.46M people**
in Crisis
(IPC Phase 3)


 **5.42M people**
in Emergency
(IPC Phase 4)

 The number of people facing high levels of acute food insecurity is expected to remain the highest in the world in 2022 – though it is forecast to be lower than the 2021 peak.

25% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **47.83M people** were forecast to be in Stressed (IPC Phase 2)

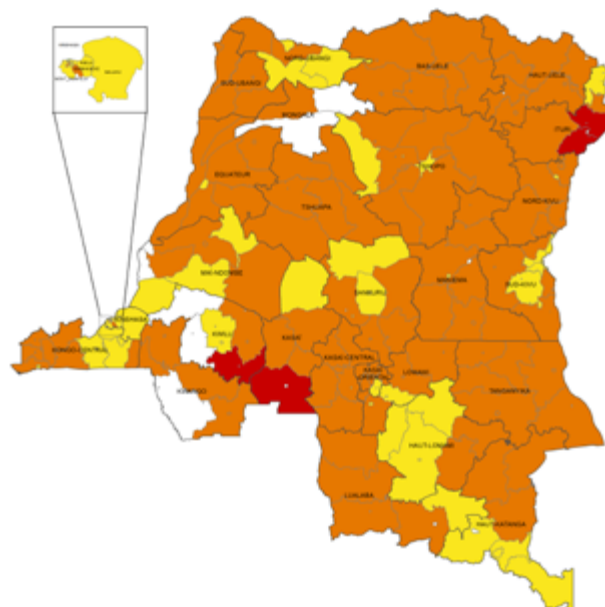
 The analysis covers **91%** of the population, or around **115.2 million** people in rural and urban areas. The analysis covered the entire country except Kasongo-lunda, Masi-manimba, Bagata, Bolobo, Yumbi, Bongandanga, Bumba, Likasi and Kolwezi.

Source: IPC, November 2021.

MAP 3.20

IPC acute food insecurity situation, January–June 2022

Four territories are forecast to be in Emergency (IPC Phase 4) – Djugu, Irumu, Kamonia and Gungu – while most of the remaining areas are expected to be in Crisis (IPC Phase 3).



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

Source: Democratic Republic of the Congo IPC Technical Working Group, November 2021.

In the post harvest period households will be able to increase their stocks and food prices should stabilise, but conflict and related displacement will continue to have a major impact on livelihoods, agricultural production and incomes.

Conflict/insecurity

The provinces of North Kivu, South Kivu, Ituri and Maniema will continue to be affected by conflict, hampering the free movement of people and goods and damaging livelihoods. Displacement will persist in these provinces, putting pressure on the livelihoods of host families. Despite normal rainfall, conflict and insecurity will result in low agricultural production, leading to a significant dependence on markets to meet household food needs (IPC, November 2021).

Economic shocks, including COVID-19

The effects of COVID-19 on household finances could persist with loss of employment for some households, but with the lifting of restrictions, there will be better access to informal jobs.

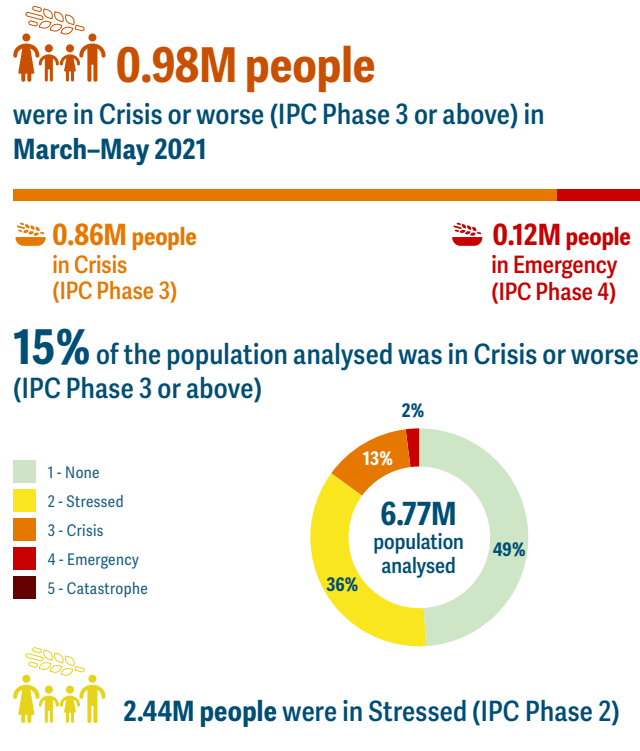
While the average cost of a maize-based food basket for a five-member household may drop slightly, conflict could lead to an increase in prices in areas affected by the presence of armed groups. The poor condition of agricultural feeder roads may limit access to various markets, mainly in landlocked areas of the country and especially during the rainy season when roads can become unpassable (IPC, November 2021).

Weather extremes

Some areas, such as the territories of Mobayi-Mbongo and Uvira, could face flooding with a detrimental effect on livelihoods. In the central part of the country, mainly in the provinces of Kasai, Kasai Oriental, Kasai Central and Sankuru, access to fertile land will continue to be problematic due to soil degradation. The pollution of the Kasai River will continue to have a negative impact on agricultural production (IPC, November 2021).

El Salvador

Acute food insecurity overview 2021



The analysis covers **99%** of the country's total population of **6.8 million** people over the entire country.

Source: IPC, December 2020.

National population



Source: WB 2021.

MAP 3.21

IPC acute food insecurity situation, March–May 2021

The worst affected departments were Ahuachapán, San Miguel and La Unión, which were classified in Crisis (IPC Phase 3), while the rest of the country was Stressed (IPC Phase 2).



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

Source: El Salvador IPC Technical Working Group, December 2020.

Acute food insecurity trends

Numbers have risen since 2020. For the IPC analyses that are comparable in terms of coverage (2020–2022), acute food insecurity fluctuated with the seasonality of harvests.

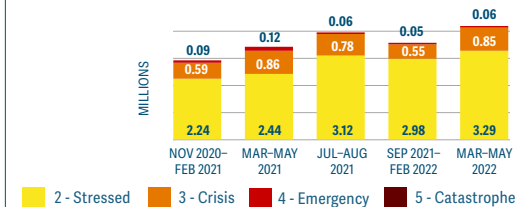
From November 2020–February 2021 to March–May 2021, the number of people in Crisis or worse (IPC Phase 3 or above) rose from 684 000 to 985 000, with 121 000 people in Emergency (IPC Phase 4), due to effects of the pandemic and insecurity.

The lean season in El Salvador typically lasts from April through August when the primera harvest begins. During this time, food prices are often higher and there are fewer agricultural job opportunities. The populations hit hardest by these changes are those whose livelihoods depend on crop and livestock activities or those working in the informal sector. The 2021 lean season was particularly harsh as the lingering effects of COVID-19 exacerbated challenges concerning food access and availability.

The number of people in Crisis or worse (IPC Phase 3 or above) in June–August 2021 was initially projected to exceed the number reached during March–May, but an improvement in economic activities, and rising flows of international remittances prevented more people from becoming food insecure (IPC, September 2021).

FIG 3.18

Numbers of people in IPC Phase 2 or above, 2020–2022



Bars refer to comparable analysis periods only (see Technical Notes).

Source: El Salvador IPC Technical Working Group, September 2021.

Drivers of the food crisis in El Salvador in 2021

Acute food insecurity in 2021 was primarily driven by the sustained economic fallout from COVID-19, but insecurity also hindered food access.

Economic shocks, including COVID-19

Although El Salvador's economy began to recover in 2021 from the negative effects of the COVID-19 pandemic, two economic trends exacerbated acute food insecurity.

Firstly, a sharp rise in fertiliser and fuel prices contributed to increased agricultural production costs (FEWS NET, April 2021), which, in turn, was partially responsible for the rising cost of staple foods. The price of white maize, for example, was 18 percent higher than the previous year (FAO-GIEWS, October 2021). These high prices coincided with the lean season when poor rural households typically experience lower food availability.

Secondly, the national unemployment rate remained high in 2021 relative to pre-pandemic levels (IMF, October 2021) while demand for labour in the informal and agriculture sectors was limited, particularly following the end of the harvest period for coffee and sugar cane (IPC, December 2020). Household earnings were therefore depressed, especially for vulnerable populations who are reliant on the informal sector for their livelihoods. The combination of increased prices for food and fuel on household expenditures in conjunction with limited employment opportunities decreased household purchasing power.

Conflict/insecurity

Despite a decrease in the national homicide rate over the past year, insecurity remains an issue given the prevalence of gang-related violence (OAS, October 2021). It often affects the daily lives of civilians, particularly women and girls as El Salvador has the highest rate of violence against women in the Latin America and Caribbean region (OCHA, August 2021).

The high occurrence of insecurity in the country, especially in urban areas, constrains labour flows and, in turn, economic opportunities (IPC, December 2020). For instance, insecurity made it difficult for day labourers to reach farms, as they feared being extorted and assaulted while travelling. It also hindered the provision of humanitarian assistance. The most notable instance occurred in November when the country experienced a spike in gang-attributed criminal violence, making it difficult for humanitarian workers to reach vulnerable populations (WFP, November 2021).



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Hurricanes Eta and Iota in late 2020 reduced crop yields and income-earning opportunities for poor households in 2021.

Displacement 2021

El Salvador is a principal source country for emigration, and migration from the country has steadily increased over the past five years (IOM, October 2021).

According to survey data gathered in spring 2021, poverty, low incomes and a lack of employment opportunities continue to worsen household food security outcomes and motivate people to migrate internationally. In four departments of El Salvador, 29 percent of respondents reported struggling to subsist on their incomes, while another 15 percent were reportedly unable to meet their basic needs (WFP, November 2021).

Violence, natural disasters, and environmental change were other lesser factors that motivated emigration, mostly to the United States and Mexico. The survey results also indicated that the primary motivation differed between departments. For instance, 11 percent of respondents in San Salvador reported violence as a reason for desiring to migrate while 13 percent of respondents in Cabañas referenced family reunification as the main motivation (WFP, November 2021). Emigration from El Salvador takes place by regular and irregular means. In 2021, the number of migrants from El Salvador who sought asylum or refugee status in other countries increased from roughly 195 000 in 2020 to 203 000 (UNHCR, 2021).

Return migration continues to be a notable characteristic of migration trends in the region. In 2021, nearly 8 500 migrants returned to El Salvador, which is a 22 percent decrease from the previous year (IOM, 2022).

El Salvador is a transit country for migrants from outside the region along with Guatemala and Honduras. Migrants from Haiti, Cuba, South America, Africa, and Asia seek to reach the United States by travelling through Central America (MPI, 2021).

Key nutrition challenges

Data on nutritional status in the country are scarce and outdated, which hinders targeted programmatic decision making. Nutritional surveillance and monitoring systems are also inadequate, which prevents timely identification and follow up on malnutrition cases.

According to the Global Nutrition Report, El Salvador has been unable to reduce the prevalence of anaemia among women of reproductive age, which increased slightly from 9.9 percent in 2015 to 10.6 percent in 2019 (Global Nutrition Report, 2021).

Key drivers

Food security and access to healthy diets

As indicated in the acute food insecurity overview, the number of people in Crisis or worse (IPC Phase 3 or above) reached over 985 000 people during March–May 2021, indicating significant challenges with access to food (IPC, December 2020).

Before the COVID-19 pandemic, 20 percent of individuals in Central America could not afford a healthy diet. The lack of economic access to safe, healthy diets is a risk factor for malnutrition and a key nutrition challenge (SOFI, 2021).

Care and feeding practices

Although no recent assessments from 2019 onwards are available, given the array of food security challenges faced by the country, it is likely that a large proportion of children does not get adequate quality, quantity and frequency of food (Global Nutrition Report, 2021).

Health services and household environment

In the aftermath of the COVID-19 pandemic and natural disasters, the country has seen increased micronutrient deficiencies that can be attributed to various causes, notably increasing food insecurity with limited access to nutritious and affordable food, unsafe water consumption, limited access to health and nutrition services to prevent and treat undernutrition, unsanitary conditions, economic recession and poverty. Low purchasing power aggravated by COVID-19 has driven families to buy low-cost foods of poor nutritional quality (HNO, July 2021).


Acute food insecurity forecast, 2022

 **0.9M people**

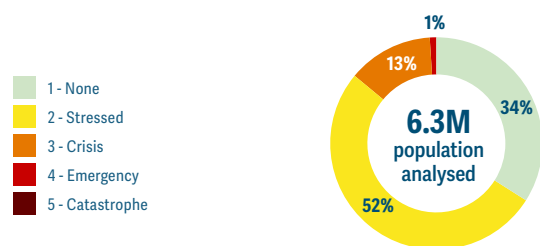
were forecast to be in Crisis or worse (IPC Phase 3 or above) in March–May 2022

 **0.84M people**
in Crisis
(IPC Phase 3)

 **0.06M people**
in Emergency
(IPC Phase 4)

 Food security levels in 2022 are expected to stabilise in comparison to the 2021 figures, with the population in Emergency (IPC Phase 4) projected to decline by roughly half.

14% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **3.29M people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers **100%** of the country's total population of **6.3 million** people.

Source: IPC, September 2021.

MAP 3.22

IPC acute food insecurity situation, March–May 2022

The departments of Ahuachapán in the west and Morazán in the east are projected to face Crisis (IPC Phase 3) conditions while the remaining departments are expected to be Stressed (IPC Phase 2).



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

Source: El Salvador IPC Technical Working Group, September 2021.

The number of people facing Crisis or worse (IPC Phase 3 or above) is projected to be nearly 907 000 during the March to May 2022 lean season, with nearly 61 000 people in Emergency (IPC Phase 4), due to low household purchasing power.

Economic shocks, including COVID-19

Spill-over effects from the COVID-19 pandemic will continue to erode household purchasing power in 2022, particularly for rural and very poor urban households. Although the economy is slowly recovering from the effects of COVID-19 containment measures, growth in 2021 was insufficient to compensate for the formal and informal jobs lost during the pandemic. Consequently, in 2022, many households, particularly those that rely on the informal sector for their livelihoods, are expected to face continued unemployment or underemployment amidst a lack of job opportunities (ECLAC, 2021).

The overall decreased demand for labour combined with the seasonal reduction for unskilled labour will generate a decrease in income during the lean season. The departments of Ahuachapán and Morazán are expected to be the most affected by this and will be in Crisis (IPC Phase 3) (IPC, September 2021).


Inflation, driven by the increased cost of fuel, gas and utilities, is another concern as it is expected to negatively influence the cost of staple foods through May 2022. Households will therefore not only have to allocate a larger portion of their budget to non-food necessities but also to staple foods. A higher flow of remittances in 2022 is expected to help balance out these rising prices for some households, especially for middle and better-off households (FEWS-NET, October 2021).

Eswatini

Acute food insecurity overview 2021

 **0.35M people**

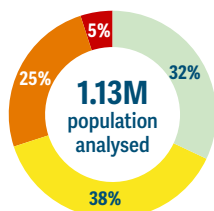
in Crisis or worse (IPC Phase 3 or above) in January–March 2021


 **0.29M people** in Crisis (IPC Phase 3)

 **0.06M people** in Emergency (IPC Phase 4)

30% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **0.43M people** were in Stressed (IPC Phase 2)

The analysis covers **98%** of the country's total population of **1.2 million** people.

Source: IPC, February 2021.

National population, 2020



Source: WB 2020.

MAP 3.23

IPC acute food insecurity situation, January–March 2021

During the January–March 2021 lean season, all four regions as well as Hhohho urban and Manzini urban were classified in Crisis (IPC Phase 3). Some 40 percent of the population was in Crisis or worse (IPC Phase 3 or above) in Lubombo and Shiselweni.



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed


 Urban settlement classification

 At least 25% of households meet 25–50% of caloric needs from humanitarian food assistance

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

Source: Eswatini IPC Technical Working Group, February 2021.

Acute food insecurity trends

 **Numbers remain at similar levels since 2020.** The number of people facing Crisis or worse (IPC Phase 3 or above) did not change significantly between the 2020 peak in October–December (366 000 people) and January–March 2021 (347 000 people).¹

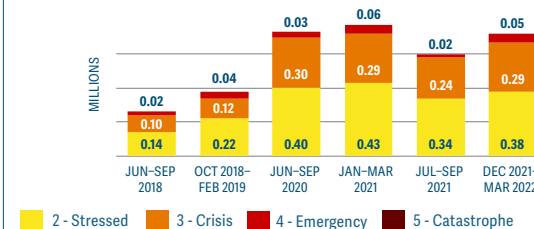
In urban Hhohho and Manzini, the number of people in Crisis (IPC Phase 3) rose from 31 000 in October–December 2020 to 44 000 in January–March 2021, while 4 000 people were in Emergency (IPC Phase 4) in Hhohho urban (IPC, February 2021).

Eswatini's acute food insecurity situation had already deteriorated sharply in 2020 relative to 2019 due to the impact of irregular rains, dry spells, and COVID-19-related income losses (IPC, July 2019 and August 2020).

From July–September 2021, the number of people in Crisis or worse (IPC Phase 3 or above) decreased to 262 000 as households replenished their stocks following the harvest, and then was forecast to increase to 316 000 from October 2021 as households faced the start of the lean period (IPC, September 2021).

FIG 3.19

Numbers of people in IPC Phase 2 or above, 2018–2022



Bars refer to comparable analysis periods only (see Technical Notes).

Source: Eswatini IPC Technical Working Group.

¹ The 2021 analysis did not include urban populations in Lubombo and Shiselweni regions.

Drivers of the food crisis in Eswatini in 2021

Erratic rainfall patterns and COVID-19-related income losses remained the key drivers of acute food insecurity in 2021 – with humanitarian cash and food support having helped to prevent a worsening food crisis.

Economic shocks, including COVID-19

From late 2020, the second wave of the COVID-19 pandemic, which was more severe than the first, constrained full economic recovery in 2021. The country was under lockdown early in the year, entailing travel restrictions, a ban on most gatherings and restrictions on business operating times, which affected both demand and supply. GDP was projected to grow by 1.5 percent in 2021, as opposed to 2.6 percent in 2019, which reflects the economic repercussions of COVID-19 related containment measures (WB, January 2022).

Throughout the country – especially in the most populated industrial area in Manzini – loss of income and employment due to COVID-19 containment measures had a major impact on food access, especially for informal sector workers. In Hhohho, data from the Ministry of Labour indicated that more than 23 000 people lost their employment as a result of the COVID-19-induced lockdown (IPC, February 2021).

Prices of maize meal in January 2021 – when most smallholders were already reliant on market purchases for food – were about 12 percent higher on a yearly basis, largely owing to increasing wholesale prices in South Africa during the second half of 2020 (FAO-GIEWS, April 2021). Electricity and oil prices also increased in January 2021 (WB, March 2021). Farmgate prices for maize and other food commodities however remained significantly higher than the previous year and above average throughout 2021, thereby benefitting incomes for agricultural households but rendering food purchases more costly for market-reliant households (IPC, September 2021).

Weather extremes

Prolonged dry spells and erratic rains between October and December 2020 delayed planting and affected crop production for smallholder farmers, who make up over 70 percent of the country's total population. They also lowered livelihood opportunities for those dependent on agricultural labour (IPC, February 2021, WFP, July 2021).

In Lubombo and eastern parts of Shiselweni, drought is a chronic phenomenon. In Lubombo, by January 2021, 94 percent of households had already depleted their food stocks and were dependent on market purchases – a situation that generally repeats itself yearly given that Lubombo is a deficit-producing region (IPC, February 2021).

Above-normal rains in February 2021 caused by cyclone Eloise resulted in flooding in Manzini and Hhohho regions, washing away crop fields during the early stages of the cropping season – though the crops later regrew (IPC, September 2021). The increased rainfall in the second half of the cropping season also promoted a recovery in crop conditions following poor early season rains, and maize production in 2021 is estimated at a level above the five-year average (FAO-GIEWS, April 2021).

Insecurity

Social unrest and pro-democracy protests escalated on 28 June 2021 and continued for a month, and then resurfaced again in mid-October. During the social unrest, the delivery of food aid and goods was hindered by looting of NGOs' assets, internet blackouts, and fuel shortages (ACAPS, November 2021). The peak of the unrest occurred in October when 19 riots were registered, before subsiding in November and December (ACLEDA, January 2022).

Key nutrition challenges



1.5% of children under 5 years were **wasted**
0.4% were **severely wasted**

Source: E-VAC, 2019.

The level of wasting is low in Eswatini, in contrast with high levels of food insecurity. However, there is a high prevalence of stunting and anaemia.

Stunting increased from 2018 (21 percent) to 2019 (26.3 percent) and is considered 'high' by WHO thresholds (E-VAC, 2019). Pockets of elevated stunting prevalence exist in Lowveld areas of Hhohho, Lubombo and Shiselweni, with 28 percent of children under 5 years estimated to be stunted in Shiselweni (E-VAC, 2019). The highest stunting rates are reportedly among children aged 18–23 months (35 percent) (UNICEF, 2021).

Caring and feeding practices

In 2019, 51 percent of children aged 6–23 months received minimal acceptable diets (E-VAC 2019). An estimated 59 percent of children received minimum dietary diversity (E-VAC, 2019), resulting in a high prevalence of micronutrient deficiencies.


Health services and household environment

Eswatini has the highest rate of HIV prevalence in the world, with 26 percent of the adult population infected. Women are disproportionately affected, with 35 percent living with HIV compared to 19 percent of men. More than 50 percent of children under 17 are orphaned, with about 59 percent having lost parents to HIV- and AIDS-related deaths (WFP, 2022).


Acute food insecurity forecast, 2022

 **0.34M people**

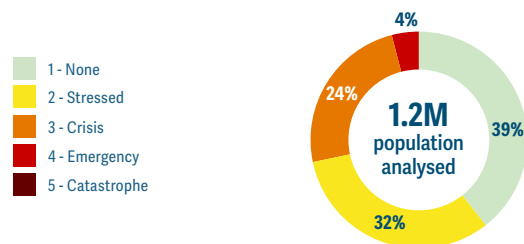
were forecast to be in Crisis or worse (IPC Phase 3 or above) in December 2021–March 2022

 **0.29M people**
in Crisis
(IPC Phase 3)


 **0.05M people**
in Emergency
(IPC Phase 4)

 The population in Crisis or worse (IPC Phase 3 or above) is expected to persist at similar levels between the 2021 and 2022 lean seasons.

29% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **0.38M people** were forecast to be in Stressed (IPC Phase 2)

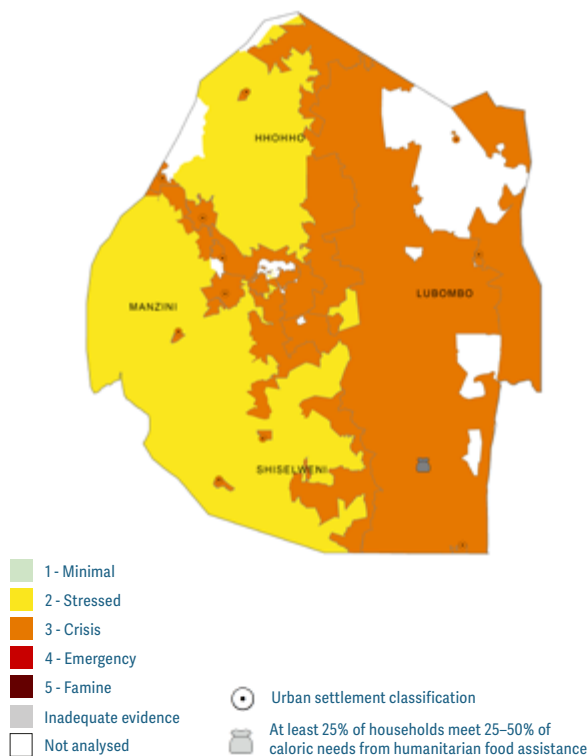
 The analysis covers **100%** of the country's total population of **1.2 million** people.

Source: IPC, January 2022.

MAP 3.24

IPC acute food insecurity situation, December 2021–March 2022

Out of 11 areas analysed, eight, including Hhohho, Lubombo, Manzini and Shiselweni urban, are expected to be in Crisis (IPC Phase 3), and the remaining three – Highveld cattle and maize, Moist middleveld and Timber highlands – in Stressed (IPC Phase 2).



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

Source: Eswatini IPC Technical Working Group, January 2022.

The fourth wave of the COVID-19 pandemic, which continues to strain economic activities, limit livelihood activities and contribute to an increase in commodity prices, is curtailing food access, especially for peri-urban and urban populations.

Economic shocks, including COVID-19

By late 2021, levels of unemployment had reached 33.5 percent, up from 23.5 percent in 2020 largely as a result of the protracted impacts of COVID-19.

The fourth wave of COVID-19 prevented some households from being able to resume agricultural activities at the start of the rainfall season, negatively impacting food production and incomes.

Since Eswatini is a net importer, a slowdown in business operations in South Africa due to COVID-19 reduced the supply of goods. Lower supplies, in tandem with lower crop production and increased fuel prices, are pushing up market prices of basic foods (IPC, January 2022).

Insecurity

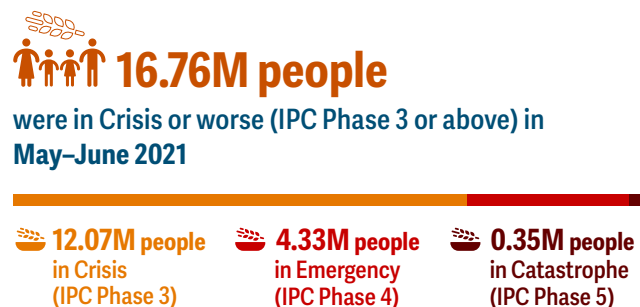
Country-level protests may result in the destruction of businesses and loss of capital for both small and large business entrepreneurs. The supply chain disruption of farm inputs, due to South African social unrest combined with COVID-19 regulations, significantly delayed ploughing and planting, affecting production and food prices (IPC, January 2022).

Weather extremes

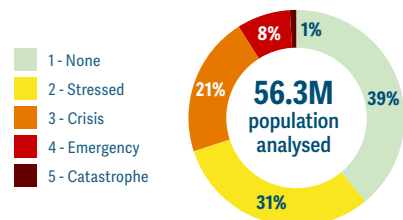
Despite a somewhat slow start to the 2021/22 rainy season, increased precipitation from mid-November 2021 created favourable cropping conditions, with remote sensing data in early January 2022 depicting generally satisfactory vegetation conditions.

Ethiopia

Acute food insecurity overview 2021



30% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



The highest number of people in Crisis or worse (IPC Phase 3 or above) was in May–June 2021, while the highest in Catastrophe (IPC Phase 5) was in July–September 2021 although the population analysed in the latter period was smaller than the former.

Source: FSIN, using IPC data.

FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate. See Technical Notes.



The analysis covers **49%** of the country's total population of **115 million** people.

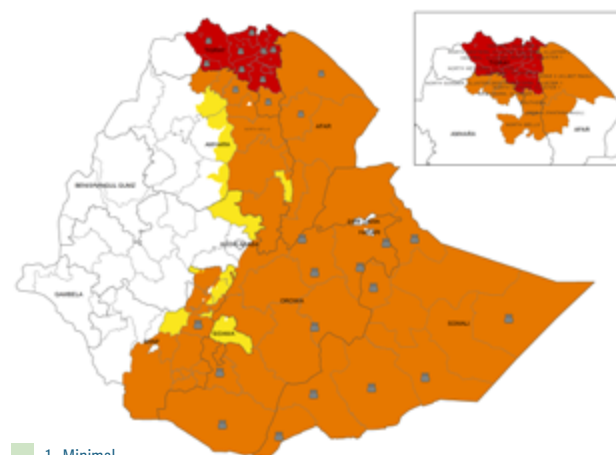
These consolidated estimates combine two IPC analyses – the October 2020 analysis of Belg and Meher-dependent areas (covering January–June 2021) and the May 2021 update of conflict-affected areas of Tigray, Afar and Amhara (covering May–June 2021). The Government of Ethiopia has not endorsed the May analysis.

Source: IPC, December 2020 and June 2021.

MAP 3.25

IPC acute food insecurity situation, May–June 2021

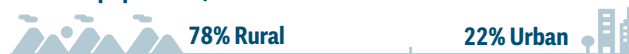
In Tigray, seven out of eight areas were classified in Emergency (IPC Phase 4). In five of these areas, 5–10 percent of the population was in Catastrophe (IPC Phase 5).



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

Source: Ethiopia IPC Technical Working Group, December 2020 and June 2021.

National population, 2020



Source: WB 2020.

Acute food insecurity trends

Numbers have risen since 2020. At 16.8 million in May–June 2021, the population in Crisis or worse (IPC Phase 3 or above) in Belg and Meher-dependent areas was the highest recorded by the IPC in Ethiopia. It was almost double the 2020 peak in October–December (8.6 million) due to conflict, macroeconomic challenges and increased geographical coverage.¹

The number of people in Catastrophe (IPC Phase 5) in Tigray (353 000) was the highest estimated anywhere since the 2011 famine in Somalia (IPC, June 2021). Between October–December 2020 and May–June 2021, the share of the population analysed in Crisis or worse (IPC Phase 3 or above) increased from 16 percent to 30 percent. The former analysis was conducted before the conflict in Tigray (IPC, December 2020 and June 2021).

By July–September 2021 in the Meher-dependent areas, notably areas of Tigray, Amhara, Oromia and SNNPR, around 7.4 million people were estimated to be in Crisis or worse (IPC Phase 3 or above), an increase of 500 000 people since May–June 2021. Of them, over 401 000 people were in Catastrophe (IPC Phase 5) and around 2.4 million people were in Emergency (IPC Phase 4). The deterioration in the populations facing Catastrophe (IPC Phase 5) was estimated despite an expected increase in humanitarian assistance (IPC, October 2020 and June 2021).

The volatile nature of this crisis rendered it difficult to establish a 'most-likely scenario' for the second half of 2021. However, the IPC Famine Review Committee projected a medium to high Risk of Famine in three out of four scenarios covering the second half of 2021 (FRC, July 2021).²

¹ The expanded analysis increased the population covered from 36 percent of the country's population to 49 percent.

² Risk of Famine is an IPC statement that highlights the potential deterioration of the situation compared to the most-likely scenario expected during the projection period. Although it is not an IPC classification, it indicates a worst-case scenario that has a reasonable probability of occurring.

Drivers of the food crisis in Ethiopia in 2021

The sharp escalation of violence resulted in mass population displacements, widespread crop and livelihood losses, and limited access to emergency assistance in 2021, while COVID-19 restrictions, inadequate and erratic rains, desert locusts, and currency devaluation also contributed to the escalation of this major food crisis.

Conflict/insecurity

Tigray, Afar, Amhara, Benishangul-Gumuz and Oromia incurred high levels of violence, displacement, and destruction of livelihoods in 2021 (FEWS NET, June 2021, IPC, June 2021). In Tigray and neighbouring Amhara and Afar regions, conflict had a dramatic impact on food security, mainly through large-scale displacements, and movement limitations that impaired livelihood activities, market functioning and access to basic services and humanitarian assistance. Households faced losses of income from agricultural, casual and salaried labour, with salaries not paid to most public and private sector workers (FAO-GIEWS, June 2021).

In Southern Tigray, insecurity reduced the areas planted for the secondary 2021 season Belg crops. This, coupled with delayed and erratic rainfall, led to a near failure of the harvest in July, while sowing operations of the major 2021 Meher crops in May–June were also affected by insecurity and lack of inputs, resulting in a substantial reduction of the planted area. Although average to above-average June–September Kiremt rains had a positive impact on yields, crop production was estimated at 60 percent below the already poor 2020 main harvest, resulting in the third consecutive season with reduced production since the start of hostilities in November 2020 (FAO-GIEWS, November 2021).

The livestock sector was also severely affected by the conflict and, as of June 2021, about 15 percent of the Tigray region's heads of livestock was estimated to have been looted or slaughtered. The destruction of 158 of the region's 198 veterinary clinics had adverse implications for animal health, and disease outbreaks were reported. The expansion of the conflict to Afar resulted in livestock looting and slaughtering, a major concern for a predominantly pastoral area (FAO-GIEWS, November 2021).

Since mid-2021, humanitarian access to Tigray has been heavily constrained by armed clashes in boundary areas with Eritrea, Amhara and Afar regions (OCHA, March 2022). The region-wide shutdown of banking and communication services and lack of fuel due to conflict impeded the delivery of food assistance within Tigray, forcing humanitarian partners to halt or significantly reduce operations (OCHA, March 2022; WFP, January 2022).

Although the 2021 Meher harvest in Tigray was 50 percent below average levels, it still provided relief to rural households, as well as IDPs, most of whom are hosted by communities. The harvest assisted households during the period when the IPC Famine Review Committee anticipated a medium to high Risk of Famine in three out of four scenarios in the second half of 2021 (FAO, 2022).

Weather extremes

From late 2020 into 2021, a prolonged drought after three consecutive failed rainy seasons affected 6.8 million people in Oromia, SNNP, Southwest and Somali (OCHA, January 2022). Following a below-average October–December 2020 Deyr season, significant early-season deficits during the March–May 2021 Belg/Gu rainfall season reduced agricultural production across most Belg-producing areas (FEWS NET, April 2021).

Although abundant rains between mid-April and mid-May offset moisture deficits and improved vegetation conditions, the early cessation of seasonal rains in late May did not allow the maturation of late planted and replanted crops, and the Belg harvest's output was estimated at below-average levels (FAO-GIEWS, June 2021).

The drought has compromised fragile livelihoods heavily reliant on livestock and caused a worsening food security and nutrition while eroding coping strategies for the most vulnerable. In southern pastoral areas of SNNPR, Oromia and Somali regions, rangeland conditions were affected by the below-average March–May Gu rains, leading to a decline of livestock productivity and conceptions. The abundant mid-April to mid-May rains improved rangeland, but the positive impact of this on livestock body conditions and milk production was offset by the early cessation

of seasonal rains in late May. Households in Somali, Oromia, Southwest, and SNNP regions had not yet recuperated from the severe 2017 drought (OCHA, January 2022).

Heavy rains triggered floods in several zones of Somali region, which displaced about 56 000 people and resulted in the death of about 7 700 animals (FAO-GIEWS, June 2021).

Economic shocks, including COVID-19

Poor macroeconomic conditions were driven mainly by declines in exports, low foreign reserves due to high government spending, a large debt burden, and military spending. The conflict in Tigray also disrupted the country's industrial output. Inflation rose to very high levels in 2021, with food inflation estimated at 42 percent in September – the highest rate recorded during the last nine years – resulting in severe food access constraints for vulnerable households across the country (FAO-GIEWS, November 2021).

From early 2021, prices of maize increased. By October 2021, they were up to 90 percent above their year-earlier levels, due to local currency depreciation, the poor performance of the secondary season Belg harvest and conflict-related trade disruptions in some areas (FAO-GIEWS, December 2021). Prices of maize declined by 5–10 percent between October and the end of 2021 as the recently harvested 2021 main Meher crops increased market supplies, but were still twice their year-earlier levels (FAO-GIEWS, March 2022).

Crop pests and diseases

During September and October 2021, small swarms of desert locusts were reported in eastern Amhara region, Tigray and Afar, but were managed and contained, with the upsurge ending in early 2022 (FAO, March 2022).

The destruction of 158 of Tigray's veterinary clinics affected animal health services. Only 3 million of the 12 million livestock in the region were vaccinated in 2021 (FAO, June 2021; FAO, 2022a).

Displacement 2021

IDPs

↗ **4.2M** IDPs ↘ **1.5M** IDP returnees

Source: IOM DTM Ethiopia, September 2021.

In 2021, over 906 000 people in Ethiopia were newly displaced (IOM DTM, December 2021). While 85 percent of IDPs reported conflict as the main driver of displacement, 7 percent reported drought and 6 percent seasonal floods (IOM DTM, September 2021).

Roughly 828 400 households were internally displaced by September 2021, spread across over 2 270 displacement sites (IOM DTM, September 2021). The Northwestern zone hosts the highest numbers of IDPs (0.8 million), followed by the Central zone (0.5 million) and Mekelle zone of Tigray region (0.3 million) (IOM DTM, September 2021).

Of the 695 sites assessed as part of the Northern Ethiopia Crisis, the most common source of obtaining food was reported to be host community donations, reported by 59 percent of locations, followed by food assistance/relief (32 percent). Of the 1 577 sites assessed across the rest of the country, IDPs in 81 percent of sites reported having access to food, with 42 percent having access to food access off-site and 39 percent on-site. Where IDPs reported having access to food, in 64 percent of sites, the main source was food assistance, suggesting high levels of vulnerability to acute food insecurity in the absence of humanitarian aid (IOM DTM, September 2021).

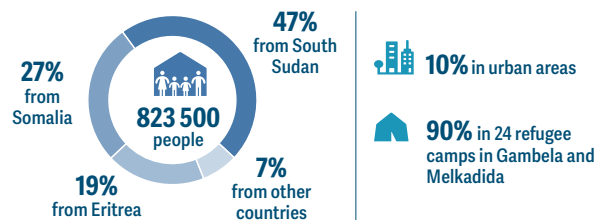
Humanitarian assistance

Due to funding shortfalls, WFP has been forced to implement ration cuts for refugees in Ethiopia since 2015. The current food basket for refugees meets only 60 percent of the minimum recommended 2 100 kilocalories per person/day. Even before COVID-19, 70 percent of refugees in Ethiopia reported using negative coping strategies, such as skipping meals (WFP, June 2021, UNHCR, December 2021).

Refugees

FIG 3.20

Ethiopia hosts the second largest population of refugees and asylum seekers in Africa



Source: UNHCR, December 2021.

A large number of refugees hosted in Ethiopia are mainly in Gambela (43 percent) bordering South Sudan, and Somali (27 percent) bordering Somalia.

High food insecurity levels among refugees in Ethiopia's camps remain a key concern, with around 45 percent of surveyed households having poor food consumption scores and 27 percent with borderline food consumption score (SENS, 2021).

The high prevalence of both wasting and stunting among refugees in Ethiopia indicate serious acute and chronic food insecurity challenges, stemming in part from factors such as limited income-generating opportunities, conflict and insecurity and poor diets, notably limited access to iron. In 2021, assessments¹ in 18 camps found a medium to very high prevalence of wasting based on WHO thresholds in 16 out of 24 camps, while only two camps had a low level of wasting. Stunting levels are also high, with 14 out of 18 camps having medium to very high levels. Only 33 percent of the surveyed camps met the UNHCR standard for 'nutritionally stable' i.e., in which fewer than 10 percent of children aged 6–59 months are wasted (UNCHR, 2021). Anaemia levels among children aged 6–59 months were a severe public health problem (>40 percent) in 12 out of 18 camps (UNHCR, December 2021).

¹ UNHCR standardized Expanded Nutrition survey <https://sens.unhcr.org/>

Additional drivers of acute food insecurity and malnutrition among displaced people

Conflict in Tigray affected the food supply systems and market access for **refugees**, as well as **IDPs** and host communities. Insecurity arising from competition between host communities and refugees over scarce resources hindered market access for the refugee population. Macroeconomic challenges, including the economic repercussions of COVID-19, constrained refugees' livelihood opportunities (UNHCR, December 2021).

Acute food insecurity and inadequate child feeding practices underlie the high prevalence of child wasting (UNICEF). While breastfeeding indicators are improving, with 80 percent of infants under 6 months exclusively breastfed, complementary feeding with timely introduction of solids and semi-solid food is low at 43 percent. Seven camps met the UNHCR standard of more than 60 percent of children receiving solid and semi-solid foods from 6 months (UNHCR, December 2021).

Refugee populations have limited access to an adequate quantity of water in camps. In Gambella only 7–52 percent of refugees reported post emergency standard water quantities, while 6–22 percent reported emergency standard and 27–82 percent indicated below emergency standard. Only 40 percent of the refugee population in Ethiopia have access to acceptable sanitation facilities (UNHCR, December 2021).

For IDPs and returnees, a shortage of grazing land for livestock, agricultural farmland and inputs, such as seeds and tools, constrained household food production capabilities and increasing dependence on markets to meet household food needs. Food production was hampered by high levels of crop disease, as well as damage by desert locusts or livestock and wildlife. A lack of non-agricultural livelihood activities were further barriers to food access. COVID-19 was reported to have impacted the cost of living, particularly the price of food and hygiene items (IOM DTM Ethiopia, December 2021).

Key nutrition challenges



4.2M children under 5 years were **wasted** in 2021

1.0M of them were **severely wasted**



2.9M pregnant and lactating women were **acutely malnourished**

Source: GNC, February 2022.

The most recent national wasting prevalence (7.2 percent, DHS, 2019) does not reflect the deterioration of the nutrition situation in Northern Ethiopia after the conflict and drought-affected regions in the south and southeast Ethiopia.

In its mid-year situation report, UNICEF estimated that over 100 000 children in Tigray would suffer from life-threatening severe wasting from July 2021 to July 2022 – a tenfold increase compared to the average annual caseload. Screening data from 435 000 children aged 6–59 months conducted in mid-2021 reported a proxy estimated prevalence of 17.8 percent (2.3 percent severe wasting). The screening also showed that almost half (47 percent) of all pregnant and lactating women were wasted (UNICEF, July 2021).

According to *The Lancet*, the magnitude of the deterioration of the nutrition situation was likely underestimated because the assessment was limited by the armed conflict (*The Lancet*, February 2022). In the drought-affected regions (Somali, SNNP, and Oromia), admission trends for SAM and MAM were consistently higher compared to previous years. Around 75 percent of the SAM admissions by December 2021 were coming from drought-affected regions (UNICEF, December 2021). With the factors that aggravate malnutrition continuing in 2022, in particular conflict and drought, there remains a risk that the nutrition situation for women and children may further deteriorate in 2022.

Key drivers

Food security and access to healthy diets

The acute food insecurity situation in Tigray and neighbouring zones within Afar and Amhara regions was dire. More than half of households had inadequate food consumption reaching 81 percent in North-Western Cluster 1, 65 percent in Central Tigray Cluster 1 and 60 percent in Eastern Tigray. North Gonder Cluster 1 and Waghambra, both in Amhara region, also registered very high levels of inadequate food consumption (76 percent and 71 percent respectively). Around one third of households in North Western, Central Cluster 1 and Eastern Cluster 1 were eating only one meal per day (IPC, June 2021). Food security conditions were also severe in drought affected areas, which displaced around 400 000 people in late 2020 (IPC, December 2020).

Health services and household environment

Populations in Ethiopia have very low access to sanitation services, with only 7 percent of households using basic services nationally. Access to basic drinking water services is also low, especially in rural areas where only 31 percent of the rural population use them (UNICEF, 2019).

Afar and Somali regions and parts of Oromia face suboptimal access to health services with poor immunization coverage, resulting in annual outbreaks of epidemic-prone diseases, especially of measles and cholera. A total of 1 571 suspected and eight confirmed cholera cases, including 11 deaths as well as six confirmed circulating vaccine-derived poliovirus type 2 were reported in Oromia, SNNP and Tigray between January and June 2021 (UNICEF, July 2021).

In Tigray, there has been extensive damage to essential systems and services on which children and pregnant and lactating women depend for their survival. Mobile health and nutrition teams have been attacked and harassed, health facilities looted or damaged and essential vaccination capacity ground to a halt. Many health workers were not able to work. Destruction of water infrastructure caused an extreme scarcity of safe drinking water, increasing the risk of disease outbreaks (UNICEF, June 2021).

As March 2021, of 172 health facilities evaluated in Tigray, only 38 percent were fully or partially functioning. Four out of the five general hospitals and four of the 12 primary hospitals were functional. Power was insufficient or not available for more than two thirds of the facilities. As of June 2021, only 15.5 percent of Outpatient Therapeutic Programmes were providing services for the treatment of Severe Acute Malnutrition. Essential medicines including those to treat malaria and diarrhoea were estimated to be running out. (IPC Famine Review Committee, July 2021).

Caring and feeding practices

Diets in Ethiopia are largely based on staple grains and oil, and are especially poor for children under 5 years, with fewer than 1 in ten young children having acceptable diets of adequate diversity and frequency. Rates of exclusive breastfeeding between 0–6 months of age have increased in recent years to above the WHO target of 50 percent, but there is substantial regional variation (WFP & Government of Ethiopia, July 2021).

In Tigray, thousands of children were separated from their parents and caregivers heightening their risk of inadequate care (UNICEF, November 2021).

Acute food insecurity forecast, 2022

 **14.0–15.0M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in July–September 2022

The food security situation is expected to remain severe due to the continued impacts of conflict, macroeconomic difficulties and drought.¹

13–14% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



The analysis covers **100%** of the country's total population of **106.7 million** people.

Source: FEWS NET, 2022.

No FEWS NET projection map for Ethiopia was available at the time of publication.

Ethiopia is projected to face one of the world's most severe food crises in 2022, resulting from the combined effects of escalating violence, prolonged drought and macroeconomic instability.

Conflict/insecurity

The conflict in northern Ethiopia is expected to intensify in 2022, fuelling high levels of displacement and constraining access to livelihood activities, with severe consequences for food and income sources. These factors are projected to contribute to widespread Emergency (IPC Phase 4) outcomes. In Tigray, Extremely Critical levels of acute malnutrition and high levels of hunger-related mortality are likely (FEWS NET, December 2021).

Weather extremes

Widespread below-average rainfall in pastoral areas of southern and southeastern Ethiopia in October–December 2021 exacerbated moderate to extreme drought conditions. FEWS NET anticipated that waning La Niña conditions could lead to a fourth consecutive below-average rainfall season in March–May 2022. High livestock deaths were projected for the January–March dry season. As of January 2022, over 260 000 livestock had already died in the worst drought-affected areas (OCHA, February 2022). Widespread Crisis and Emergency (IPC Phase 3 and 4) conditions are expected in drought-affected areas (FEWS NET, December 2021; FAO-GIEWS, March 2022).

Economic shocks, including COVID-19

Macroeconomic challenges, including significant food inflation, are expected to continue as the ongoing conflict destabilizes the country's balance of payment and debt sustainability (FAO & WFP, February 2022). High food prices, already in many cases double levels observed one year ago, will continue to limit food access for vulnerable households heavily dependent on market purchases (FEWS NET, January 2022). The removal of fuel subsidies is also expected to contribute to increased food prices (United Nations Ethiopia Economy Update, March 2022).



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Afar, Amhara and Tigray are expected to be worst affected by food insecurity because of the severe effects of conflict on livelihoods and humanitarian access. Southern and southeastern pastoral areas that have already experienced three consecutive below-average seasons are facing a high likelihood of another poor rainy season in March–May 2022.

¹ No indicative arrow has been provided given that the 2021 IPC peak figure is not directly comparable with the 2022 forecast figure provided by FEWS NET.


Guatemala

Acute food insecurity overview 2021

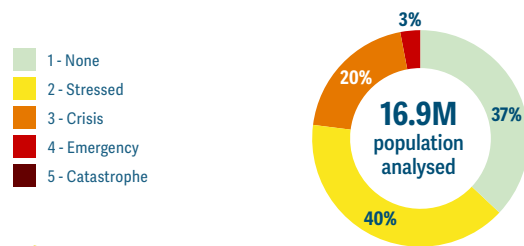
 **3.73M people**


were in Crisis or worse (IPC Phase 3 or above) in November 2020–March 2021

 **3.30M people** in Crisis (IPC Phase 3)

 **0.43M people** in Emergency (IPC Phase 4)

23% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



 **6.67M people** were in Stressed (IPC Phase 2)

The analysis covers **100%** of the country's total population of **16.9 million** people.

Source: IPC, January 2021.

National population

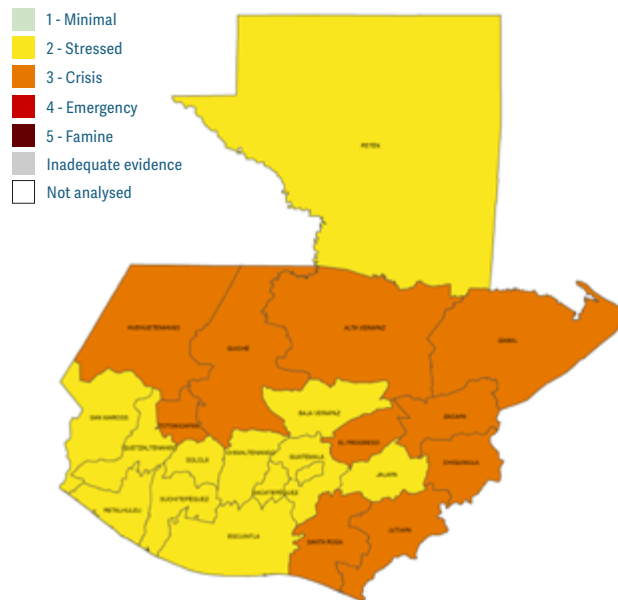
 **48% Rural**  **52% Urban**

Source: WB 2020.

MAP 3.26

IPC acute food insecurity situation, November 2020–March 2021


Of the 22 departments in Guatemala, ten were in Crisis (IPC Phase 3) and the remaining 12, including Guatemala metropolitana, were in Stressed (IPC Phase 2).



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

Source: Guatemala IPC Technical Working Group, January 2021.

Acute food insecurity trends

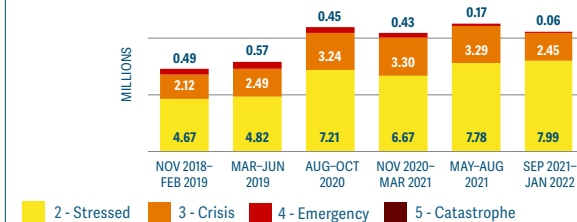
 **Numbers have remained stable.** Weather extremes and economic shocks led to a steady rise in the number of people facing Crisis or worse (IPC Phase 3 or above) over the past four years.

In early 2021, the effects of these shocks culminated in the highest numbers recorded by the IPC in the country, with 3.7 million people in Crisis or worse (IPC Phase 3 or above) – a figure that declined to 3.5 million in the May–August 2021 lean season, which was still higher than previous IPC analyses.

In late 2018, drought affected rural populations in the departments of Alta Verapaz, Baja Verapaz, Quiché, Santa Rosa, Jalapa and Chiquimula, and led to 2.6 million people facing Crisis or worse (IPC Phase 3 or above). Acute food insecurity continued to rise in 2019 following the impact of additional weather shocks, such as low levels of rainfall, contributing to around 3 million people facing Crisis or worse (IPC Phase 3 or above) during the 2019 lean season. In 2020, the onset of COVID-19 pandemic and related loss of livelihoods coincided with a series of destructive tropical storms and hurricanes, culminating in the high acute food insecurity figures reported for early 2021 (IPC, January 2021).

FIG 3.21

Numbers of people in IPC Phase 2 or above, 2018–2022



Bars refer to comparable analysis periods only (see Technical Notes).

Source: Guatemala IPC Technical Working Group.

Drivers of the food crisis in Guatemala in 2021

Hurricanes Eta and Iota in late 2020 intensified acute food insecurity for populations already suffering from COVID-19-related livelihood losses and several years of bad harvests in the Dry Corridor.

Economic shocks, including COVID-19

Despite the increase in remittances and resumption of economic activities in a variety of sectors at the end of 2020, poor and very poor households, especially those in the Dry Corridor, faced rising food and transportation costs in conjunction with irregular or reduced job opportunities. Prices of staple foods were 10 to 20 percent above the five-year average at the start of 2021 because of increased fuel and, in turn, transportation costs (FEWS NET, March 2021).

The damaged infrastructure and below-average production in the areas affected by the hurricanes disrupted trade flows, which also contributed to higher food prices. The combination of high food prices and limited access to income-generating activities due to COVID-19 restrictions and the hurricanes decreased household purchasing power in early 2021, resulting in significant food access issues for poor and very poor households at the start of the 2021 lean season (IPC, January 2021; FEWS NET, December 2020).

Weather extremes

The devastating effects of hurricanes Eta and Iota in November 2020 had significant consequences for food insecurity in the first months of 2021. The Category 4 hurricanes passed through Guatemala during the peak of the agricultural labour season and postrera harvest (IPC, January 2021).

The consequent damages to roads, bridges, productive infrastructure, houses and roughly 137 000 hectares of agricultural land affected food reserves and livelihoods over the short and medium term, particularly for poor and very poor households (FEWS NET, December 2020). For instance, damage to production infrastructure adversely affected the agro-food chain, thereby constraining access to – and availability of – food (IPC, January 2021). In late 2020 and early 2021, day labourers were unable to engage in agricultural work during the height of the harvesting season, leading to losses in income either due to workers' inability to reach harvesting locations or a reduction in products to harvest (IPC, January 2021).

Small cash crop producers also saw their incomes reduced as their harvests were smaller than expected or due to difficulties transporting their product to markets. Yields from crops that households grew for self-consumption were diminished or destroyed, which increased market dependence (IPC, January 2021). Households were then forced to engage in negative coping strategies in 2021 to bridge their food gaps, such as taking on debt, the sale of small animals and productive assets, as well as use of savings (FEWS NET, January 2021). Households were also unable to save and prepare for the 2021 lean season, which lasts from March–August in Guatemala (IPC, January 2021).

However, from September 2021, IPC projected a suitable weather outlook to facilitate the establishment and development of the postrera crops, which would help stabilise food prices. The primera and postrera basic grain harvests were projected to be within normal ranges, thereby enhancing food availability for households (IPC, June 2021).

Key nutrition challenges

Updated data on nutritional status and feeding practices are lacking for Guatemala, with the latest DHS having been conducted in 2015. Consequently, reliable data on wasting and stunting outcomes was highly limited at the time of publication.

Guatemala is making progress in reducing anaemia levels among women of reproductive age, which affects 7.4 percent of the relevant population, and has also steadily lowered the incidence of low birth weight, with 11 percent of infants having low birth weight (Global Nutrition Report, 2021).

Key drivers

Food security and access to healthy diets

The migration crisis in the region, drought in the Dry Corridor, storms and the COVID-19 pandemic have resulted in the loss of jobs and income in Guatemala. This has led to a decline in access to food, forcing families to cut back on health and nutrition expenses. More than 80 percent of households report relying on less expensive foods, while 50 percent limit portion size (HNO, July 2021).

Care and feeding practices

Lack of access to health and nutrition services has limited support for families to implement appropriate infant and young child feeding practices, especially breastfeeding and complementary feeding. However, data was only available from 2015 (Global Nutrition Report, 2021).

Health services and household environment

Damage to water infrastructure following hurricanes Eta and Iota was estimated to have affected 75 percent of the water supply systems. Low WASH service coverage and deficient hygiene practices have had a detrimental effect on pregnant women's health and nutrition, as well as stunting among children (HNO, July 2021).


Acute food insecurity forecast, 2022

 **2.5M people**

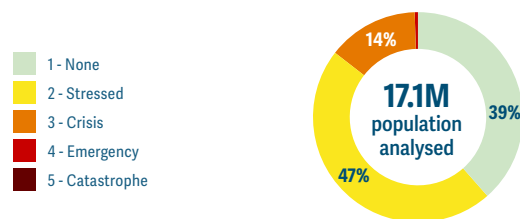
were forecast to be in Crisis or worse (IPC Phase 3 or above) in September 2021–January 2022

 **2.45M people**
in Crisis
(IPC Phase 3)

 **0.06M people**
in Emergency
(IPC Phase 4)


 The number of people in Crisis or worse (IPC Phase 3 or above) is expected to decrease in early 2022, particularly the population in Emergency (IPC Phase 4).

14% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



Note: 0.02% of the population analysed were expected to be in Emergency (IPC Phase 4).

 **7.99M people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers **100%** of the country's total population of **17.1 million** people.

Source: IPC, June 2021.

MAP 3.27

IPC acute food insecurity situation, September 2021–January 2022

The departments of Huehuetenango, Totonicapán, Quiché, Alta Verapaz and Chiquimula will continue to experience Crisis (IPC Phase 3) while the remaining departments will be in Stressed (IPC Phase 2).



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

Source: Guatemala IPC Technical Working Group, June 2021.

The number of people in Crisis or worse (IPC Phase 3 or above) is expected to decrease as economic activities continue to recover. However, sustained increases in the price of food and fuel throughout 2021 will contribute to acute food insecurity figures at the start of 2022, while weather extremes are expected to play a secondary role.

Economic shocks, including COVID-19

Acute food insecurity outcomes in early 2022 will be driven in large part by high prices for fuel, transport and food, which were expected to continue to erode poor household purchasing power (IPC, June 2021; FEWS NET, November 2021). In 2022, the price of gas and diesel is projected to increase 28 and 27 percent, respectively, compared to their five-year averages. The domestic price of corn and beans will also likely remain above the five-year average in 2022 – 35 and 31 percent, respectively – driven mainly by the high cost of fuel and fertilisers (FEWS NET, January 2022).

Weather extremes

Households in the Dry Corridor and areas affected by hurricanes Eta and Iota are projected to face Crisis (IPC Phase 3), as they have been unable to fully recover after several years of erratic weather patterns, including droughts and excessive rainfall (IPC, January 2022). During the period March–May 2022, over 60 percent of agricultural households in the Ch'orti' micro-region are expected to have exhausted their basic grains stocks due to localised production shortfalls, thereby increasing household dependence on markets for food needs (IPC, January 2022).

Haiti

Acute food insecurity overview 2021

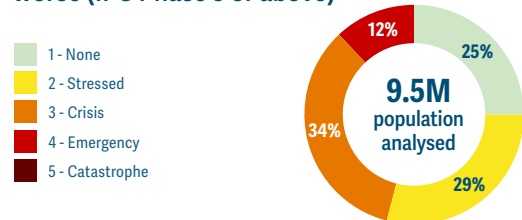
 **4.36M people**

were in Crisis or worse (IPC Phase 3 or above) in March–June 2021


 **3.2M people** in Crisis (IPC Phase 3)

 **1.16M people** in Emergency (IPC Phase 4)

46% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate. See Technical Notes.

 **2.8M people** were in Stressed (IPC Phase 2)

The analysis covers **87%** of the population of **10.9 million** people.

Source: Haiti IPC Technical Working Group, September 2020.

National population

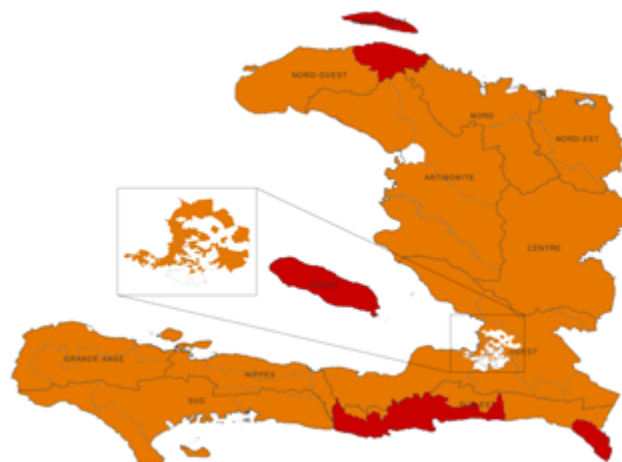


Source: WB 2020.

MAP 3.28

IPC acute food insecurity situation, March–June 2021

Of the 28 areas analysed, three were classified in Emergency (IPC Phase 4) in Nord-Ouest, Ouest and Sud-Est departments. The rest were classified in Crisis (IPC Phase 3).



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

Source: Haiti IPC Technical Working Group, September 2020.

Acute food insecurity trends

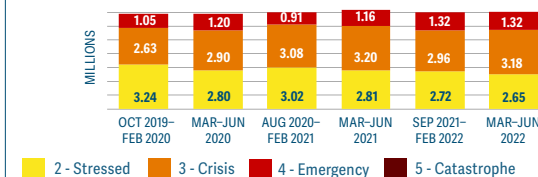
 **Numbers have risen since 2020. In 2021, Haiti's food crisis continued to escalate driven by economic crisis, high food prices, constrained incomes, violence, insecurity and below-average crop production.**

During the March–June 2021 lean season, the number of people facing Crisis or worse (IPC Phase 3 or above) was the highest in the GRFC's existence. From September 2021, there was a slight decrease in the numbers in Crisis (IPC Phase 3) with the harvest, but an increase in Emergency (IPC Phase 4), following the earthquake and tropical storm Grace (IPC, September 2020 and September 2021).

When comparing rural areas only, the population facing Crisis or worse (IPC Phase 3 or above) increased by 42 percent between 2017 and 2021 due to economic decline, inflation, political instability, poor production, natural disasters and weather extremes. Since October 2019, urban analyses have also been available. Between March–June 2020 and the same period in 2021, the number of people in Crisis or worse (IPC Phase 3 or above) in seven metropolitan areas increased from around 600 000 to over 1 million, including nearly 200 000 in Emergency (IPC Phase 4) (IPC, October 2017, October 2019, September 2020, September 2021).

FIG 3.22

Numbers of people in IPC Phase 2 or above, 2019–2022



Bars refer to comparable analysis periods only (see Technical Notes). This graph does not take into account the Ville de Jérémie and Ville des Cayes covered in the September 2021 IPC analysis for better comparability with previous analyses.

Source: Haiti IPC Technical Working Group.

Drivers of the food crisis in Haiti in 2021

Household access to food was constrained by economic decline, in part linked to COVID-19, violence and insecurity, as well as crop losses due to below-normal rainfall. The effects of these factors were further compounded by the impact of a 7.2 magnitude earthquake that affected over 800 000 people.

Economic shocks, including COVID-19

Haiti has been experiencing a significant economic slowdown since mid-2018. The numerous episodes of "peyi lock" (country shutdown) have deterred tourists, led to the closure of many hotel establishments and slowed investments, especially in the private sector (IPC, September 2021). From early 2021, COVID-19 impacts contributed to the sporadic closure of businesses, schools and markets, reducing access to employment and revenues for poor urban households (FEWS NET, March 2021).

Household purchasing power was further weakened by the steady depreciation of the national currency, which lost 46 percent of its value between October 2020 and October 2021, leading to significantly above-average imported food prices (FEWS NET, October 2021, FAO-GIEWS, November 2021). This is particularly pertinent for Haiti, where imports account for more than half of the food and 83 percent of the rice consumed (WFP, 2021). As of February 2021, food prices were 40 percent above the five-year average (FEWS NET, February 2021) and remained high at monitored markets throughout the year (FEWS NET, October 2021).

Over half of households in an FAO survey carried out between June and August 2021 reported income losses compared to the same period in 2020. A third of households reported reduced planted areas in 2021 compared to the previous year, notably due to lack of access to agricultural inputs and irrigation (FAO, December 2021).

Weather extremes

Below-average rainfall between April and May 2021 delayed the launch of spring season activities in some arid farming areas and resulted in low agricultural production (IPC September 2021,

FEWS NET, June 2021). Below-average and irregular rains from July to September hampered normal crop development (FEWS NET, October 2021, FAO-GIEWS, November 2021).

Three departments – Sud, Nippes and Grand'Anse – suffered a devastating magnitude 7.2 earthquake on August 14, 2021 and only two days later the Sud-Est department was hit by tropical storm Grace, which amplified the losses of crops and livestock caused by previous tropical storms (IPC, September 2021). These back-to-back shocks displaced thousands of people, destroyed critical infrastructure, such as irrigation systems, water, sanitation and health facilities, and disrupted markets, trade routes and livelihood activities. Some early-planted autumn crops in mountainous areas were destroyed by landslides and some maize and pea crops damaged. Many farmers lost agricultural tools and seeds in the earthquake (FEWS NET, September 2021).

Tropical storm Elsa hit Haiti's southern peninsula on July 3, 2021. Although the impacts were lower than expected, considerable damage was recorded in the Southeast (IPC, September 2021).

As a result, and in combination with a series of adverse weather events, crop production in 2021 is expected at a below-average level, and below the low production levels of 2020 (FAO-GIEWS, November 2021).

Conflict/insecurity

Since 2018, gang conflicts have repeatedly paralysed the supply of gas stations, causing a fuel scarcity, which has handicapped economic activities and contributed to the increased food prices (IPC, September 2021). Security worsened in 2021 with an increase in kidnappings for ransom, assassinations, and social and political protests in the capital Port-au-Prince (FEWS NET, October 2021). Insecurity, particularly at the southern entrance to Port-au-Prince, disrupted imports and worsened fuel scarcity and increased costs for transporting goods (FEWS NET August 2021). Persistent shortages prompted strikes, resulting in economic paralysis, mainly in cities (FEWS NET, October 2021).



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Poor economic and security conditions compounded by climate shocks, natural disasters and COVID-19 worsened acute food insecurity in Haiti.

The assassination of the president on 7 July plunged the country into a more profound political crisis, leaving a power vacuum and leading to an upsurge in gang violence, which displaced hundreds of families and complicated the delivery of humanitarian assistance, with aid regularly looted (IPC, September 2021, WFP, September 2021).

Displacement 2021

Escalating violence and insecurity, as well as the August 2021 earthquake, led to the internal displacement of at least 38 780 people by the end of 2021 (IOM DTM, December 2021).

Haiti continued to face an escalation in violence and insecurity, with at least 19 000 people internally displaced in the capital Port-au-Prince in the summer of 2021 alone (OCHA, August 2021). As of March 2022, 5,500 individuals remain in displacement sites within the metropolitan area, while ongoing violence continues to cause new displacement (IOM DTM, December 2021).

By mid-September 2021, Haiti's Civil Protection Agency (DGPC) and IOM identified at least 38 780 displaced people in 89 displacement sites in the three most earthquake-affected departments, with the majority – 56 percent – located in 44 sites across the Sud Department. As of April 2022, close to 24 000 are estimated to remain in displacement sites (IOM DTM, December 2021 and April 2022). Access and security constraints, including the looting of relief supplies, posed significant logistics and transportation challenges, disrupting distributions to those most in need. The displaced people had limited or no access to safe water and sanitation, increasing the risk of acute respiratory infections, diarrheal diseases, malaria and cholera (OCHA, September 2021).

The increased repatriation of Haitian migrants from across the Latin America and Caribbean region since mid-September 2021 also compounded humanitarian needs. IOM registered nearly 7 500 repatriated migrants in 2022 as of 12 March and a total of 27 100 since the beginning of 2021 (IOM, March 2022). These figures are a lower bound, since not all migrants repatriated through the land border with the Dominican Republic are notified (IOM DTM, December 2021). Among these repatriated migrants, 2 000 children were in need of access to basic services (UNICEF, December 2021).

Key nutrition challenges



217 000 children under 5 years were **wasted** in 2021
86 000 of them were **severely wasted**

Source: HNO, March 2021.

Wasting among children under 5 years increased by 61 percent between 2020 and 2021.

Prior to the August 2021 earthquake, about 217 000 Haitian children were expected to suffer from wasting – mainly in the metropolitan area of Port Au Prince – compared with 134 000 in 2020. In the first three months of 2021, the number of admissions of severely wasted children in health facilities rose by 26 percent compared with the same period in 2020 (UNICEF, May 2021). UNICEF estimates that 17 891 additional children were likely to be affected by wasting in earthquake-affected areas (UNICEF, December 2021).

More than one in five children (22 percent) under 5 years are stunted, rising to 30 percent of children aged 18–35 months. The department of Centre has the highest prevalence at 30 percent, and Nippes the lowest prevalence at 17 percent (IHE and ICF 2017; USAID, May 2021).

Key drivers

Health services and household environment

The COVID-19 pandemic, weather extremes, the 2021 earthquake and an increase in violence contributed to reduced access to health care and water, hygiene and sanitation services and an increase in cases of diarrheal diseases. During the COVID-19 pandemic, disruption of health services and parental fear led to a sharp decline in child immunization rates. According to UNICEF, 9.7 percent of children in Haiti have not received any vaccination and 58 percent are not fully vaccinated. This decline resulted in rising numbers of diphtheria cases and a higher risk of a measles outbreak (UNICEF, May 2021).

Nationally, 26 percent of the population does not have access to an improved water source, 56 percent do not treat their water,

20 percent do not have access to improved sanitation facilities, and 25 percent practice open defecation. These issues are even more problematic in rural areas where 40 percent of the population does not have access to an improved water source and 36 percent practices open defecation (UNICEF, May 2021).

In the areas affected by the earthquake, water and sanitation infrastructure suffered extensive damage. According to UNICEF, 72 percent of people in the three most-affected departments reported that health facilities near their homes were damaged by the earthquake (UNICEF, September 2021).

Care and feeding practices

Complementary child feeding practices are inadequate. The latest available data is from the DHS 2016–17, which found that only 11 percent of children aged 6–23 months had access to the minimum acceptable diet (DHS 2016–2017). Nearly half (49 percent) of women of reproductive age were anaemic, while 66.3 percent of children also suffered from anaemia (DHS 2016–2017).

Although 40 percent of children under 6 months are exclusively breastfed, this decreases to 15 percent among children aged 4–5 months. A little more than half of children younger than 6 months of age have started receiving complementary foods, putting them at risk of consuming contaminated foods that can carry infection (IHE and ICF 2017).

Food security and access to healthy diets

Below-average crop production due to weather extremes and the earthquake and lack of economic access to food due to low household purchasing power deprived children of adequate diets in terms of quantity and diversity.

Acute food insecurity forecast, 2022

 **4.50M people**

in Crisis or worse (IPC Phase 3 or above) in March–June 2022

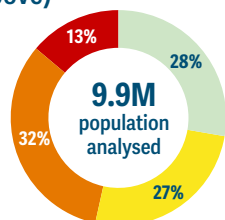
 **3.18M people** in Crisis (IPC Phase 3)

 **1.32M people** in Emergency (IPC Phase 4)


 The number of people in Crisis or worse (IPC Phase 3 or above) is forecast to remain stable in 2022.

45% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **2.65M people** in Stressed (IPC Phase 2) in the same period

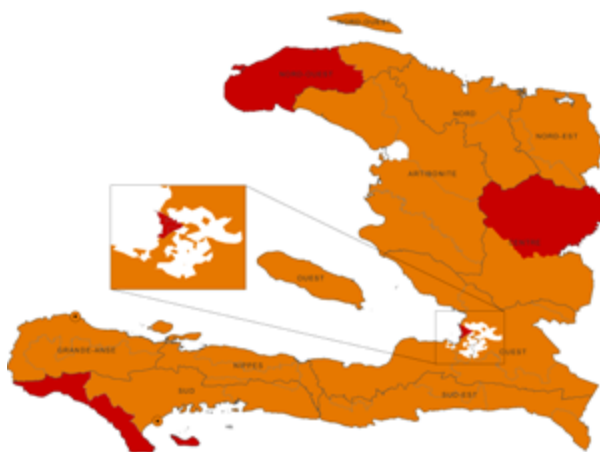
 The analysis covers **77%** of the population of **12.9 million** people.

Source: IPC, September 2021.

MAP 3.29

IPC acute food insecurity situation, March–June 2022

Of the 32 areas analysed, seven are forecast to have more than 50 percent of their population in Crisis or worse (IPC Phase 3 or above): one in Artibonite, one in Centre, one in Cité Soleil, two in Grand'Anse, one in Nord Ouest, and one in Ouest.



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed

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

Source: Haiti IPC Technical Working Group, September 2021.

Social and political unrest during an election year coupled with lack of work, low incomes, rising food prices and the poor 2021 harvest will aggravate Haiti's worsening food crisis in 2022.

Economic shocks, including COVID-19

Prices of staple foods, especially imported products, will continue to rise and remain above the five-year average, due to depreciation of the gourde against the dollar and the Dominican peso (FEWS NET, November 2021). Two-digit high inflation is forecast in 2022 and will further diminish household purchasing power (IME, January 2022).

Income from Haitian migrants to the Dominican Republic will remain lower than normal due to restricted trade and migration flows between the neighbouring countries (FEWS NET, November 2021).

Conflict/insecurity

Persistent gang-related insecurity and possible social and political unrest linked to the long wait for elections – due the second half of 2022 – could increase transportation costs and consumer prices (IPC, September 2021).

Weather extremes

The poor performance of the spring 2021 agricultural season in several areas followed by below-average second season maize and paddy crops due to inadequate rainfall amounts between August and September 2021 will lead to a severe February–May 2022 lean period (IPC, September 2021 and FAO-GIEWS, November 2021). By the end of December 2021, 43 percent of croplands in the Nord Centre had been adversely affected by dry conditions between October and December 2021 (JRC-ASAP, January 2022).

Income from the sale of agricultural products will be constrained by below-average harvests. Agricultural work opportunities at the start of the spring 2022 growing season may be below average in areas affected by the earthquake and tropical depression Grace, after farmers had to sell off their assets, reducing their investment capacity (FEWS NET, November 2021).

Honduras

Acute food insecurity overview 2021

 **3.3M people**

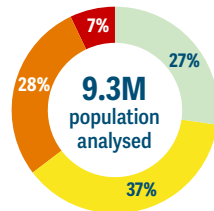
were in Crisis or worse (IPC Phase 3 or above) in July–September 2021


 **2.68M people** in Crisis (IPC Phase 3)

 **0.62M people** in Emergency (IPC Phase 4)

35% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **3.5M people** were in Stressed (IPC Phase 2)

The analysis covers **100%** of the country's total population of **9.3 million** people.

Source: IPC, February 2021.

National population



Source: WB 2020.

MAP 3.30

IPC acute food insecurity situation, July–September 2021

Cortés and Francisco Morazán had the highest number of people in Crisis or worse (IPC Phase 3 or above) and accounted for 45 percent of the national population in Emergency (IPC Phase 4). In Comayagua, Francisco Morazán, Gracias A Dios and Valle, at least 40 percent of the population was in Crisis or worse (IPC Phase 3 or above).¹



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed

¹ Access to Gracias a Dios was limited.

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

Source: Honduras IPC Technical Working Group, February 2021.

Acute food insecurity trends

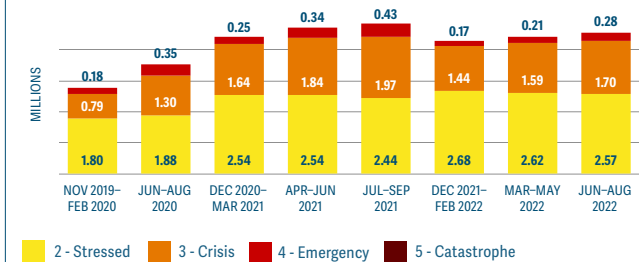
 **Numbers have risen since 2020.** The number of people in Crisis or worse (IPC Phase 3 or above) in Honduras increased from 2.9 million during the December 2020–March 2021 period to 3.3 million in the July–September 2021 lean season, as rainfall deficits compounded the agricultural impacts of the 2020 hurricanes and lack of employment and rising food prices diminished households' purchasing power.

In 13 comparable departments, the number of people in Crisis or worse (IPC Phase 3 or above) increased from 1.6 million in June–August 2020 to 2.4 million in July–September 2021. Roughly 1 million people were in these phases in November 2019–February 2020 (before the COVID-19 pandemic) in the same 13 departments. Prior to 2019, only partial analyses were carried out for Honduras.

Throughout most of 2021 more than 30 percent of the population was in Crisis or worse (IPC Phase 3 or above), peaking at 35 percent in July–September (IPC, February 2021).

FIG 3.23

Numbers of people in IPC Phase 2 or above, 2019–2022



Bars refer to comparable analysis periods only (see Technical Notes), this graph only covers 13 departments: Choluteca, Comayagua, Copan, El Paraiso, Francisco Morazan, Intibuca, La Paz, Lempira, Ocotepeque, Olancho, Santa Barbara, Valle and Yoro.

Source: Honduras IPC Technical Working Group.

Drivers of the food crisis in Honduras in 2021

Weather extremes – including category 4 hurricanes Eta and Iota in November 2020 and rainfall deficits in 2021 – compounded by economic shocks arising from COVID-19 movement restrictions, lack of employment and rising food prices drove high levels of acute food insecurity in Honduras.

Economic shocks, including COVID-19

In addition to the hurricanes of 2020, movement restrictions to mitigate the spread of COVID-19 aggravated an already fragile economic situation (HRP, November 2021).

Work opportunities in the informal sector – particularly tourism, construction and transport – and income from petty trade had still not recovered during the 2021 lean season when households were market dependent for food (IPC, February 2021).

At the same time, rising food and fuel prices due to lower production and/or higher transportation costs constrained households' ability to purchase food, notably beans, meat and dairy. After sustained increases from April–August, prices of white maize stabilised from September 2021, but were still about 13 percent higher year-on-year (FAO-GIEWS, October 2021). Similarly, prices of red beans were more than 10 percent above their year-earlier levels in November 2021 (FAO-GIEWS, December 2021).

The pandemic deepened socioeconomic and gender inequality. The rise in unemployment disproportionately affected women working in the informal sector, which accounts for 76 percent of non-agricultural employment. Thousands of women dropped out of the labour market, leaving them without access to income-generating activities, and facing higher levels of poverty (HRP, November 2021).

Weather extremes

Households affected by damage to croplands, livestock and fisheries due to devastating back-to-back hurricanes Eta and Iota in late 2020 began the year 2021 facing high levels of acute food insecurity. Throughout 2021, agricultural recovery was still lagging behind in areas most affected by these events (IPC, January 2022).

Many households were also affected by rainfall deficits in May, which delayed planting and reduced crop yields, particularly in southern Honduras, during the main primera harvest season (FAO, July 2021; FAO&WFP, July 2021). A dry spell in late July and early August further exacerbated already dry conditions in central Honduras (FEWS NET, August 2021).

As a result of the weather events of 2021, particularly the rainfall deficits in May, some subsistence farmers in southern areas reported up to 50 percent losses for the primera harvest in September 2021, leaving households with low or no food reserves. Losses for maize reached as high as 65 percent and beans 75 percent (IPC, January 2022; JRC-ASAP, May–June, 2021).

Years of low international coffee prices continued to diminish the ability of producers to invest in 2021. The sector was also affected by major road damage from the hurricanes, higher transportation costs and road access limitations associated with COVID-19 biosecurity measures, an increased incidence of coffee rust and below-average and irregular rainfall since June. Coffee production in 2021 was expected to be 12 percent below the previous year with a negative impact on the incomes and purchasing power of small-scale producers and day labourer households (FEWS NET, November 2021).

Key nutrition challenges

Assessing progress on nutrition indicators is a challenge in Honduras as there is no recent data available.

As of 2012, wasting affected 1.3 percent of children under 5 years of age, while 22.6 percent of children under 5 were stunted, which is considered a 'medium' prevalence. These stunting levels were higher than the average for the Latin America and Caribbean region (11.3 percent) (Global Nutrition Report, 2021).

No progress has been made towards achieving targets for anaemia among women of reproductive age (which rose from 16.9 percent in 2015 to 18 percent in 2019) (Global Nutrition Report, 2021).

Key drivers

Care and feeding practices

Stunting is linked to inadequate feeding for infants and young children during the first two years of life. The latest available data showed that 30.7 percent of infants aged 0 to 5 months were exclusively breastfed in 2020. Just over half (54.6 percent) of children aged 6–23 months consumed a diet that met the minimum requirements for growth and development (UNICEF, July 2020).

Health services and household environment


Around 250 000 people affected by the Eta and Iota storms had limited or no access to health services due to damage to the health infrastructure. As of July 2021, more than 27 health facilities were still disabled from the storms (HNO, July 2021). Access to safe drinking water is limited in rural areas, with only 18.7 percent of people having access to safely managed drinking water services and 71 percent having access to basic services (JMP, 2020). Only 35 percent of surveyed women mentioned they had regular access to safe water and 58 percent lacked access to hygiene services (HNO, July 2021).

Acute food insecurity forecast, 2022

 **2.64M people**

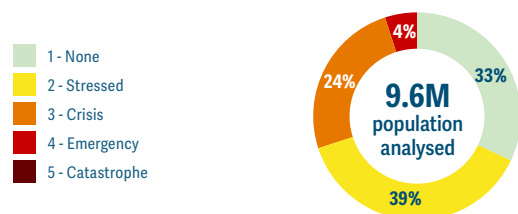
were forecast to be in Crisis or worse (IPC Phase 3 or above) in June–August 2022

 **2.29M people**
in Crisis
(IPC Phase 3)

 **0.35M people**
in Emergency
(IPC Phase 4)

Compared to the 2021 lean season, the number of people in Crisis or worse (IPC Phase 3 or above) is expected to decline in June–August 2022, as the population recovers from the effects of Hurricanes Eta and Iota.

28% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **3.72M people** were forecast to be in Stressed (IPC Phase 2)

The analysis covers **100%** of the country's total population of **9.6 million** people.

Source: IPC, January 2022.

MAP 3.31

IPC acute food insecurity situation, June–August 2022

All 18 departments are projected to be in Crisis (IPC Phase 3) during the 2022 lean season, excluding Islas de la Bahía, expected to be in Stressed (IPC Phase 2). The highest share of the population in Crisis or worse (IPC Phase 3 or above) is expected to be in Gracias a Dios (45 percent), La Paz and Lempira (37 percent, respectively).



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

Source: Honduras IPC Technical Working Group, January 2022.

The number of people in Crisis or worse (IPC Phase 3 or above) is expected to decline by roughly 700 000 people between the 2021 and 2022 lean season. However, localized low crop production due to poor rains in 2021 coupled with low employment, and rising food and fuel prices, are expected to result in a difficult lean season for Honduras in 2022.

Weather extremes

The poor 2021 primera harvest is expected to leave households with low food reserves, prompting an early start to the 2022 lean season, especially for subsistence farmers who lost the majority of their 2021 harvest (IPC, January 2022). Rainfall deficits incurred during the postrera planting in September and October 2021 are also expected to adversely impact production outcomes in early 2022, particularly in Olancho, El Paraíso, Yoro, Cortes, Comayagua, Santa Barbara and Intibucá (JRC-ASAP, October and November 2021).

Economic shocks, including COVID-19


Although GDP and remittances are forecast to improve in 2022, job losses stemming from previous COVID-19 restrictions have not been fully recovered, and will continue adversely impacting food security and nutrition (World Bank, November 2021; IPC, January 2022). Projections for rising food and fuel prices are expected to be aggravated by international supply chain disruptions (IPC, January 2022).

Expectations of a difficult 2022 lean season will likely lead households to resort to Crisis and Emergency coping strategies, further undermining their productive assets (IPC, January 2022). A reduced demand for agricultural labour is expected to persist in coffee-producing areas, negatively affecting dependent households, who will continue to accumulate debt. This situation is also expected to slow the recovery of livelihoods from previous shocks and reduce purchasing power during the 2022 lean season (FEWS NET August 2021).


Humanitarian assistance in 2021 helped to reduce the number of people in Crisis or worse (IPC Phase 3 or above) between the 2021 peak period and the 2022 forecast (IPC, January 2022).

Kenya

Acute food insecurity overview 2021

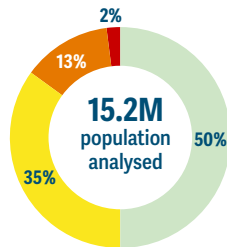
 **2.37M people** were in Crisis or worse (IPC Phase 3 or above) in November 2021–January 2022

 **2.0M people** in Crisis (IPC Phase 3)

 **0.37M people** in Emergency (IPC Phase 4)

16% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **5.24M people** were in Stressed (IPC Phase 2)

The analysis covers the 23 counties located in Kenya's arid and semi-arid lands (ASALs) that account for 80% of the country's land mass and **28%** of Kenya's population of **55 million** people.

Source: Kenya IPC Technical Working Group, September 2021.

National population

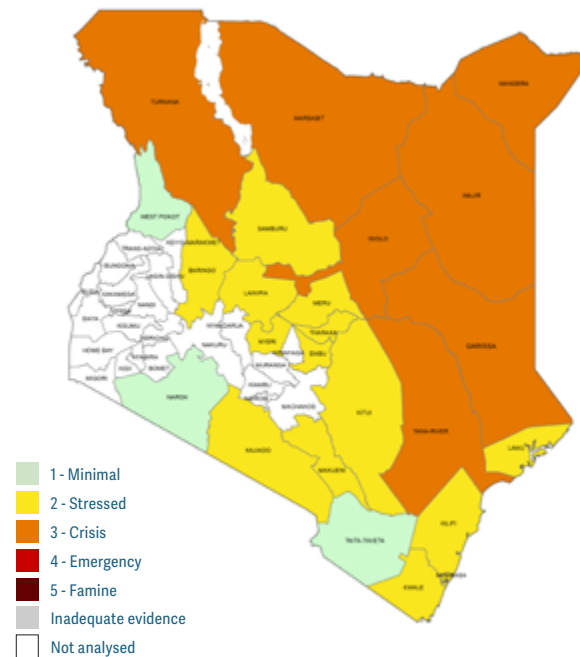


Source: WB 2020.

MAP 3.32

IPC acute food insecurity situation, November 2021–January 2022

Pastoral counties experienced consecutive seasons of failed rains, with Garissa, Isiolo, Marsabit, Tana River and Wajir the most affected. These counties along with Kwale, Lamu county, Mandera and Turkana were classified in Crisis (IPC Phase 3). Eleven counties were classified in Stressed (IPC Phase 2).



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

Source: Kenya IPC Technical Working Group, July 2021.

Acute food insecurity trends

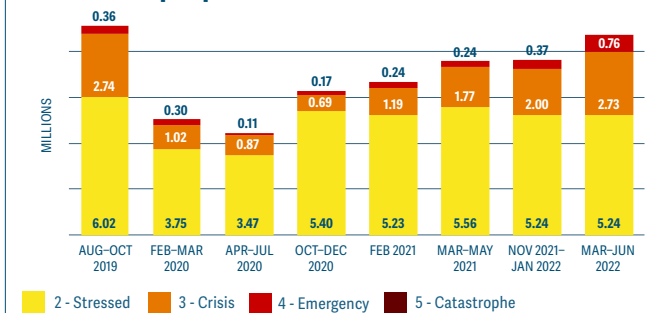
 **Numbers have risen since 2020.** At 2.37 million, the number of people facing high levels of acute food insecurity (IPC Phase 3 or above) from November 2021–January 2022 was nearly three times higher than during the last three months of 2020 in the ASALs (IPC, November 2020 and September 2021).

The worsening situation is attributed primarily to the dismal performance of the last three rainy seasons (October–December 2020 short rains, March–May 2021 long rains, and October–December 2021 short rains). However, the acute food insecurity situation was not quite as bad as August–October 2019, when the ASALs were affected by very late and erratic long rains.

The numbers reported here do not cover urban areas. From October–December 2020, over 1 million people were in Crisis or worse (IPC Phase 3 or above) across informal urban settlements in Nairobi, Mombasa and Kisumu, largely due to the impact of COVID-19 on informal sector incomes (GRC 2021, May 2021).

FIG 3.24

Numbers of people in IPC Phase 2 or above, 2019–2022



Bars refer to selected analyses that are comparable (see Technical Notes), however the October–December 2020 and February 2021 analyses only cover the ASAL areas. Datasets from all analysis rounds between 2019 and 2022 are provided (see Appendix 1, table A7, page 249).

Source: Kenya IPC Technical Working Group.

Drivers of the food crisis in Kenya in 2021

Three consecutive poor rainy seasons since October 2020 in Kenya's ASALs – exacerbated by the ongoing consequences of COVID-19 containment measures – have strained households' coping capacities, worsening acute food insecurity.

Weather extremes

Three consecutive poor rainy seasons since October 2020 have severely affected pasture and water availability in most northern pastoral areas and central and southern agro-pastoral areas. During October–December 2021, the cumulative short rains were less than 30–60 percent of the 40-year average in northern and eastern Kenya (FEWS NET, November 2021).

As a result of these events, in December 2021, drought conditions were reported in most counties. Out of 23 ASAL counties, nine¹ were classified in Alarm drought phase and 11 were in Alert (NDMA, January 2022).

Pasture and water shortages, coupled with longer trekking distances from grazing fields to watering points, resulted in a deterioration of livestock body conditions and productivity, and reduced milk production, which in December was estimated to be 40–80 percent below the average (FEWS NET, December 2021). Herders were often unable to provide adequate feed and water to their animals and were forced to cull offspring to save milk-producing females (FAO-GIEWS, November 2021). More than 1.4 million livestock heads died due to starvation and drought-induced diseases (NDMA, December 2021).

Prices of livestock in December 2021 were 20–40 percent lower than in 2020, mainly due to worsening animal body conditions (FSNWG, February 2022).

Meanwhile, due to the intensifying drought, staple food prices in the ASAL regions were mostly above average (IPC, October 2021). In these areas, maize prices were 5–35 percent above their year-earlier levels, mainly due to consecutive poor local harvests, coupled with sustained demand for animal feed due to pasture shortages. The

¹ Garissa, Kilifi, Lamu, Wajir, Isiolo, Kwale, Mandera, Marsabit and Turkana.

terms of trade for pastoralists therefore deteriorated over the last year and, in December, they were between 35–50 percent lower than December 2020 (FSNWG, February 2022).

The cereal output of the short-rains harvest was estimated to be about 50 percent below average, leading to a third consecutive season with below-average cereal production. A near failure of the harvest was reported in coastal marginal agriculture areas, where maize production was estimated at less than 10 percent of the average. Here, due to severe dryness, the planted area was well below average and most crops failed to germinate or wilted.

Rains at the end of November and beginning of December 2021 allowed some late planting of cereals and pulses, which germinated but did not reach maturity as the rains subsided in late December (FAO-GIEWS, March 2022).

Economic shocks, including COVID-19

Lower availability of casual labour opportunities can be attributed to several factors, including social distancing measures restricting certain communal agricultural activities. Other factors include lower supplies of agricultural inputs and the below-average October–December 2021 short rains, which decreased crop production activities and income from land preparation, planting and weeding (IPC, September 2021).

COVID-19 restrictions contributed to food price volatility by disrupting staple food and livestock supplies, as well as cross-border movement of goods and people between Kenya, Somalia and Ethiopia in Mandera and Marsabit counties. In mid-September, the United Republic of Tanzania began requiring proof of a negative COVID-19 test from all travellers, including truck drivers, which caused delays in food import supply chains (FEWS NET, September 2021).

Households were expected to attempt to intensify non-livestock income sources, such as casual labour, charcoal and firewood sales and petty trade, which would likely be limited due to high competition (IPC, September 2021).



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Persistent malnutrition, high vulnerability to droughts and the effects of climate shocks are some of the challenges experienced by communities in Wajir, northeastern Kenya. In 2021, they experienced three seasons of failed rains.

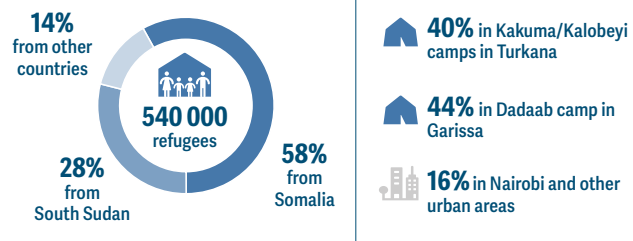
Conflict/insecurity

Water sources for both people and livestock have dried up, forcing families to walk longer distances and causing tensions among communities, which has led to an increase in inter-communal conflict (OCHA, December 2021).

Displacement 2021

FIG 3.25

Kenya is the fifth largest refugee-hosting country in Africa



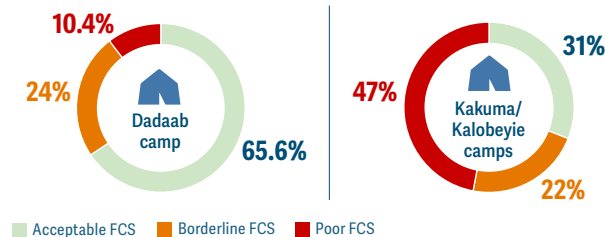
Source: UNHCR, December 2021.

Food insecurity and nutrition vulnerability challenges are a consistent concern for the refugee population, who are dependent on humanitarian assistance for their survival.

The refugees mainly reside in camps in two of the country's poorest and most food-insecure counties, Garissa and Turkana (UNHCR, 2021). Significant challenges with food security remain for refugees residing in camps, with around 47 percent of surveyed households in the Dadaab camps and 10 percent in Kakuma/Kalobeyi camps having reported poor food consumption scores (FCS) (UNHCR, 2021).

FIG 3.26

Low food consumption scores among refugees in Kenya's camps



UNHCR Standardized Expended Nutrition Survey (SENS), 2021.

According to a socioeconomic survey of urban refugees in Kenya, 60 percent of urban refugee households had low food consumption scores and use consumption-based strategies to cope with the lack of food. Food insecurity is more common among households with fewer employed members. In the city of Nakuru, where most refugees are from South Sudan, some 82 percent of refugees are food insecure driven by low levels of employment – only 6 percent of women and 21 percent of men are employed (UNHCR & World Bank, November 2021).

A high prevalence of malnutrition also remains a key concern among refugee populations, with UNHCR nutrition surveys in 2021 indicating a “high” level of wasting in two camps (Kakuma

and Ifo in Dadaab) while “medium” levels were reported in the remaining three locations (Kalobeyi settlement, Dagahaley and Hagadera camps). The prevalence of stunting was reportedly “high” in Kalobeyi settlement and Dagahaley camp in Dadaab, while “medium” level in the other three camps (UNHCR, 2021).

Dietary challenges for refugee children were exemplified by the prevalence of anaemia among children aged 6–59 months, which was found to be “high” (above 40 percent) in all camps. While anaemia among non-pregnant women aged 15–49 years was reportedly “high” (above 40 percent) in Kakuma and Ifo camps, anaemia levels amongst this population stood within the “medium” threshold in the remaining three camps (UNHCR, 2021).

Additional drivers of acute food insecurity and malnutrition among refugees

Low levels of employment and humanitarian funding shortfalls drove high levels of acute food insecurity, while poor living conditions in camps contributed to malnutrition.

Refugees have particularly low levels of employment compared to the surrounding host communities and wider Kenya. According to World Bank monitoring, 80 percent of adult refugees were unemployed in April 2021 compared to 29 percent nationally (WB, April 2021). Fewer than 10 percent were receiving remittance income and one in five refugee households were taking out loans (WB, February 2021).

Refugees living in designated camps are not legally allowed to work and face movement restrictions, making them dependent on humanitarian assistance for their basic needs.

The small minority of refugees allowed to live in urban areas – mainly to access education or specialized medical attention – face challenges obtaining a work permit that they require in order to gain legal employment and meet minimum food and non-food needs (UNHCR, 2021).

Funding shortfalls during 2021 resulted in a significant reduction of humanitarian food assistance provided to refugees, resulting in food ration cuts of around 40-48 percent for a daily recommended 2 100 calorie diet per person and the removal of fortified foods from the available food basket. This has contributed to high levels of wasting, stunting and anaemia, while obliging refugees to utilise negative coping strategies such as skipping of meals, reducing portions, relying on less preferred or less expensive foods, child marriage and survival sex (UNHCR, 2021).

The living conditions in Kakuma camp are dire and constantly deteriorating, characterised by extreme poverty, poor housing and infrastructure, and lack of water, sanitation, medicines, and electricity supplies. COVID-19 has worsened an already challenging humanitarian situation. Armed robberies, thefts, rapes and killings are often reported. Women and girls – who form almost 80 percent of the total refugee population – are exposed to the threat of various forms of sexual violence (UNHCR, 2021).

Key nutrition challenges



653 000 children under 5 years were **wasted** in July–November 2021 in Kenya's ASAL region
142 800 of them were **severely wasted**



96 500 pregnant and lactating women were **acutely malnourished**

Source: IPC, September 2021.

The levels of wasting among women and children in Kenya's ASALs are particularly high. The number of wasted children aged 6–59 months rose from around 531 000 in 2020 to 653 000 from August–November 2021 (IPC AMN, November 2020 and September 2021).

In mid-July 2021, Garissa, Wajir, Mandera, Samburu, Turkana, as well as North Horr and Laisamis sub-counties in Marsabit and Tiaty in Baringo were classified as Critical (IPC AMN Phase 4) and Tana River and West Pokot were classified as Serious (IPC AMN Phase 3). The wasting prevalence surpassed the emergency threshold (15 percent) in at least eight counties, well above the 2014 national average of around 4 percent (IPC AMN, September 2021).

Key drivers

Health services and household environment

The below-average rainfall increased water scarcity. While boreholes are the main water source for many households and can last throughout the year, many are reliant on shallow wells, which are estimated to last six months and water pans, which only last four months. Water shortages, consumption of unsafe water and poor hygiene and sanitation practices increased the number of cases of upper respiratory tract infections, diarrhoea and other diseases. Nearly half of the population was still employing open defecation (47 percent), increasing the risk of water-borne illnesses (IPC AMN, September 2021).

The pandemic impacted the health sector, leading to a reduction in health-seeking, under-utilization of static health facilities, and reduced health and nutrition programmes due to re-allocation of resources towards efforts to curb the virus. Nutrition clinics and services faced commodity stock-outs. The proportion of children who are fully immunized is below the national threshold (88 percent) (IPC AMN, September 2021).

Caring and feeding practices

Insufficient care practices and harmful social norms also have a major impact on children's diets in the ASALs. Only 22 percent of children received the minimum acceptable diet nationally in Kenya, according to the latest available data (DHS, 2014).

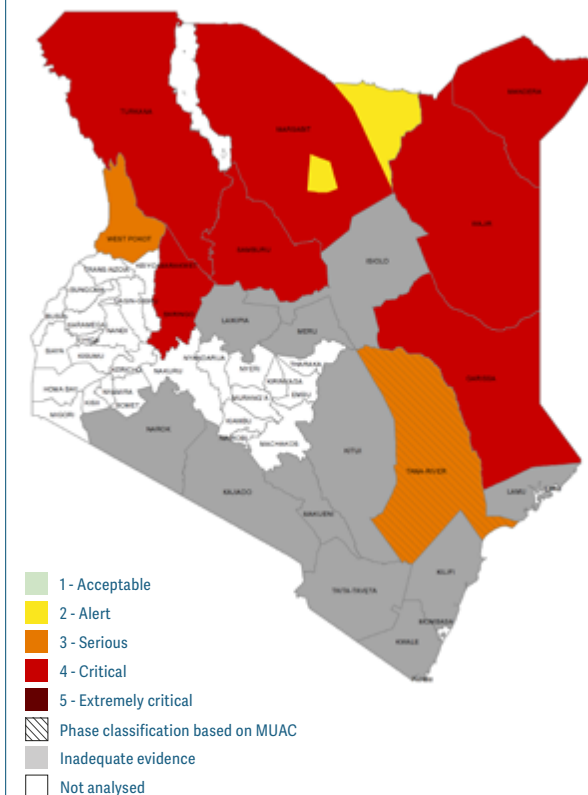
Food security and access to healthy diets

Poor diets for children are directly linked with food insecurity, although a household being food secure does not ensure that children have adequate diets. For instance, in 2021 reduced milk availability for children was a major contributing factor to acute malnutrition. However, the latest IPC analyses in 2021 showed a contrast between food insecurity and acute malnutrition levels. Factors beyond household food security such as individual access to healthy diets, insecurity, care practices, access to health services, were contributing to the high acute malnutrition burden in the ASAL counties (IPC AMN, September 2022).

MAP 3.33

IPC acute malnutrition situation, August–November 2021

The malnutrition situation was Critical (IPC AMN Phase 4) in seven counties: Garissa, Wajir, Mandera, Samburu, Turkana, the North Horr and Laisamis sub-counties in Marsabit County and Tiaty in Baringo County.



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

Source: Kenya IPC AMN Technical Working Group, September 2021.


Acute food insecurity forecast, 2022

 **3.49M people**

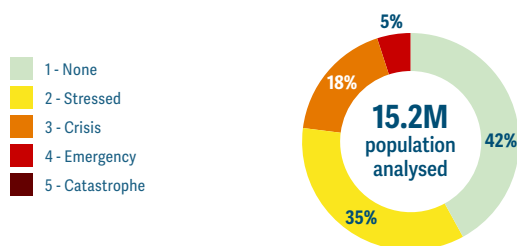
were forecast to be in Crisis or worse (IPC Phase 3 or above) in March–June 2022

 **2.73M people**
in Crisis
(IPC Phase 3)

 **0.76M people**
in Emergency
(IPC Phase 4)

 The acute food insecurity situation is expected to deteriorate further in 2022 due to the negative effects of three consecutive below-average rainy seasons on rural livelihoods.

23% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **5.24M people** were forecast to be in Stressed (IPC Phase 2)

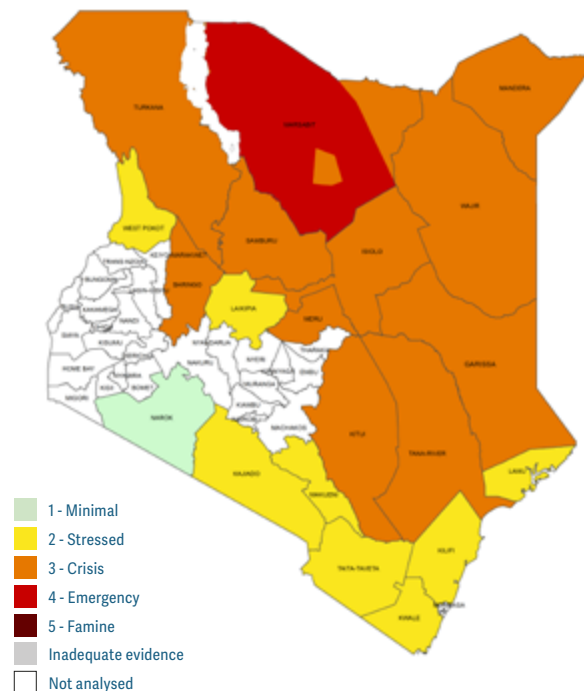
 The analysis covers 23 counties of Kenya's arid and semi-arid lands that account for 80% of the country's land mass and **28%** of the population of **55.0 million** people.

Source: IPC, March 2022.

MAP 3.34

IPC acute food insecurity situation, March–June 2022

Out of 23 ASAL counties, 10 were forecast to be in Crisis (IPC Phase 3) and Marsabit was forecast to be in Emergency (IPC Phase 4). Garissa, Mandera, Marsabit, Turkana and Wajir counties have the highest numbers of people in Emergency (IPC Phase 4).



Minor updates were added to the IPC map for the projected period prior to the launch of the GRFC 2022 and could not be incorporated into the above map. Specifically, Narok, Tharaka and Embu were classified in Stressed (IPC Phase 2). See IPC, March 2022.

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

Source: Kenya IPC Technical Working Group, March 2022.

There is high concern that acute food insecurity will increase in severity and scale during the first half of 2022 due to the effects of three consecutive below-average rainy seasons.

Weather extremes

Rangelands entered the dry season, which began in January at below-average levels, and pasture resources, already at historically low levels, were being depleted at faster-than-normal rates. Rainfall assumptions for Kenya's March to June 2022 IPC projection was based on IGAD's GHACOF forecast, which suggested an increased probability of average to above-average rains. Despite the impacts of three consecutive below-average rainfall seasons, the IPC projects that the rains will facilitate moderate but short-lived improvements in the pastoral areas (IPC, March 2022).

However, the IPC acknowledged the results of other models, which predicted an increased probability of below-average rains that could have severe consequences for food security (IPC, March 2022; FAO-GIEWS, March 2022).

Economic shocks, including COVID-19

Household purchasing power will likely further deteriorate during the January–March 2022 dry season as agricultural labour opportunities remain seasonally low, the value of livestock declines atypically, and staple food prices increase as stocks from the below-average 2021 short rains harvest are depleted at faster than normal rates. In the absence of a scale-up of humanitarian food and livelihoods assistance in pastoral areas, households will likely lose or sell off significant proportions of their livestock – a vital source of food and income – which will lead to higher levels of acute food insecurity and acute malnutrition (FEWS NET, December 2021).

Conflict/insecurity

Atypical livestock migration – with herders congregating in areas with scarce rangeland resources as well as crossing the border to neighbouring countries – is expected to intensify until the beginning of the March–May 2022 long rains, potentially driving further resource-based conflicts between herders and farmers (IPC, October 2021).

Lesotho

Acute food insecurity overview 2021

0.58M people

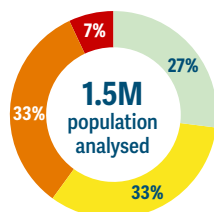
were in Crisis or worse (IPC Phase 3 or above) in October 2020–March 2021

0.48M people in Crisis (IPC Phase 3)

0.1M people in Emergency (IPC Phase 4)

40% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



0.53M people were in Stressed (IPC Phase 2)

The analysis covers all rural areas, comprising **73%** of the country's total population of **2.0 million** people.

Source: IPC, August 2020.

National population



Source: WB 2020.

MAP 3.35

IPC acute food insecurity situation, October 2020–March 2021

During the January–March 2021 lean season, all ten analysed areas were classified in Crisis (IPC Phase 3). In three of them – Mafeteng, Maseru and Mohale's Hoek – 10 percent of the population was in Emergency (IPC Phase 4).



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed
- Urban settlement classification

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

Source: Lesotho IPC Technical Working Group, August 2020.

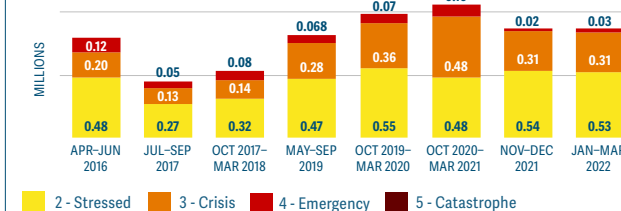
Acute food insecurity trends

▶ Numbers have remained stable since the 2020 peak. The same analysis was used for the 2020 and 2021 peak, however compared to the 2019/2020 lean season, the number of people in Crisis or worse (IPC Phase 3 or above) during the January–March 2021 lean season was 34 percent higher, reflecting the adverse impacts of the COVID-19 pandemic and consecutive below-average agricultural seasons (IPC, August 2020). It represented the highest number in the six-year history of the GRFC.

The number of people in Emergency (IPC Phase 4) reached 100 000 in January–March 2021, the highest since November 2016–March 2017 when the country suffered severe rainfall deficits and high food prices (IPC, August 2020 and May 2016). The situation improved in the post-harvest period in 2021 with about 179 000 people (12 percent of the analysed population) in Crisis (IPC Phase 3) from July–September 2021, when all ten analysed rural districts were classified in Stressed (IPC Phase 2). With the onset of the lean season from October 2021, the number was expected to rise to around 328 000 people (22 percent of the analysed population) with seven districts in Crisis (IPC Phase 3) during November–December 2021 (IPC, January 2022).

FIG 3.27

Numbers of people in IPC Phase 2 or above, 2016–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2016 and 2022 are provided (see Appendix 1, table A8, page 250).

Source: Lesotho IPC Technical Working Group.

Drivers of the food crisis in Lesotho in 2021

Just when households in Lesotho were hitting the peak of the lean season in the first quarter of 2021, they faced escalating food prices and dwindling incomes as South Africa imposed further COVID-19-related movement restrictions, leading to rising acute food insecurity.

Economic shocks, including COVID-19

In early 2021, extended containment measures aimed at curbing the spread of the second wave of COVID-19 in neighbouring South Africa curtailed casual labour opportunities. In Quthing, Mofale's Hoek and Mafeteng, more than 50 percent of households typically depend on informal labour opportunities in South Africa (IPC, August 2020).

Despite South Africa easing travel restrictions and reopening its economy in September, which enabled casual labourers from Lesotho to access opportunities and recover their incomes, the level of remittances to Lesotho remained below average in 2021 (FEWS NET, October 2021). Remittance income typically provides a source of income for an estimated 17 percent of households in the country (IPC, August 2020).

Prices of the main staple foods, particularly bread and cereals, remained higher year-on-year throughout 2021, underpinned by elevated price levels in South Africa, the country's main supplier of grains. High prices were also the result of a slowdown in cross-border trade, amid COVID-19 related movement restrictions (FAO-GIEWS, May 2021).

By November, the prices of maize flour, wheat flour and beans were higher than in early 2021, primarily due to price transmission from South Africa. Prices of maize flour were nearly 10 percent higher on a year-on-year basis (FEWS NET, November 2021).

Towards the end of 2021, planting started to progress at normal levels despite some early season rainfall deficits, increasing opportunities for agricultural labour (FEWS NET, November 2021).

Weather extremes

Two consecutive years (2019 and 2020) of below-average agricultural production, caused by irregular rainfall, also limited the ability of many households to meet basic food requirements. Rural households that are heavily reliant on crop production had exhausted their food stocks by the end of September 2020, ushering in an early lean season, which lasted until March 2021 (IPC, August 2020).

Heavy rains destroyed some crops in January 2021, causing waterlogging at the critical growth stage for most crops in some parts of the country. This resulted in reduced casual farm labour opportunities for poor households. However, good seasonal rainfall performance increased crop production in 2021, resulting in households having more food from their own production compared to the last three years (IPC, July 2021).

Livestock body conditions improved compared with the previous year, as the timely onset of rains improved rangelands. This was expected to benefit households that rely on sales of wool and mohair for food and income, especially in the districts of Mokhotlong, Qachas Nek, Thaba Tseka and Quthing (IPC, July 2021).

Key nutrition challenges

Lesotho is 'on course' for the target for wasting, with 3.6 percent of children under 5 years affected, which is lower than the average for the Africa region (6.0 percent) (Global Nutrition Report 2021, Lesotho Vulnerability Assessment 2019).

Food security and access to healthy diets

The high prevalence of people facing Crisis or worse (IPC Phase 3 or above) levels of acute food insecurity (40 percent of the analysed population) (IPC, August 2020) indicates issues with household access to food, which could have implications on malnutrition.

Caring and feeding practices

While 59 percent of children under 6 months were exclusively breastfed, just 14.5 percent continued to be breastfed at 2 years. Some 91.5 percent of 6–23 month-old children received timely introduction of solid, semi-solid or soft foods, but only 16.7 percent received the minimum dietary diversity and 10.4 percent a minimum acceptable diet (Global Nutrition Report 2021).

Health services and household environment

Sanitation is inadequate with only 47.6 percent of the population having safely managed facilities (improved sanitation including safe disposal of excreta) (Global Nutrition Report 2021).


There has been no progress in achieving the targets for reducing anaemia among women of reproductive age (27.5 percent in 2018 to 27.9 percent in 2019) and low birth weight (14.6 percent in 2015) (Global Nutrition Report 2021).

Acute food insecurity forecast, 2022

 **0.34M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in January–March 2022

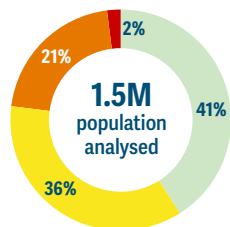
 **0.31M people**
in Crisis
(IPC Phase 3)


 **0.03M people**
in Emergency
(IPC Phase 4)

▼ The acute food insecurity situation in early 2022 is expected to improve considerably, with around 270 000 fewer people in Crisis or worse (IPC Phase 3 or above) relative to early 2021. A small number of people is still forecast to be in Emergency (IPC Phase 4) though fewer than last year.

23% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **0.53 people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers all rural areas, home to **70%** of the country's total population of **2.1 million** people.

Source: IPC, January 2022

MAP 3.36

IPC acute food insecurity situation, January–March 2022

Out of the ten areas analysed, seven are forecast to be in Crisis (IPC Phase 3) and three in Stressed (IPC Phase 2). The highest numbers of people in Crisis (IPC Phase 3) are in Berea (55 000) and Maseru (70 000).



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed
- Urban settlement classification

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

Source: Lesotho IPC Technical Working Group, January 2022.

Above-average rainfall bodes well for cereal production, but price shocks, reduced household income and heavy rains are expected to drive high levels of acute food insecurity, with close to a quarter of the analysed population in Crisis or worse (IPC Phase 3 or above).

Economic shocks, including COVID-19

The lean season lasts through to early April 2022 and households are expected to be increasingly reliant on markets for food during this period (FEWS NET October 2021).

Although overall production expectations are favourable, higher prices for fertilisers as well as other agricultural inputs could limit their use and curb crop yields. In addition, these higher prices are expected to exert upward pressure on production costs, which could in turn drive grain price increases in 2022 (FEWS NET, November 2021).

Income from non-agricultural activities was expected to increase compared to 2021, but to remain slightly below normal due to limited job opportunities inside the country and South Africa as a result of COVID-19 economic impacts, which are also expected to reduce remittances (IPC, January 2022).

Incomes for livestock farmers were expected to be above average thanks to better rangeland and improved livestock conditions. Crop production is expected to boost the economy to a moderate growth of 2.6 percent (IPC, January 2022).

Weather extremes


After a delayed start of about 20–30 days, Lesotho's 2021/2022 rainy season advanced well with average or above-average rainfall at the end of 2021. Heavy rains destroyed some crops in January 2022, causing waterlogging in some parts of the country. Favourable rainfall was expected during the outlook period with an average 2022 harvest anticipated (IPC, January 2022 and FEWS NET, January 2022).


Madagascar

Acute food insecurity overview 2021

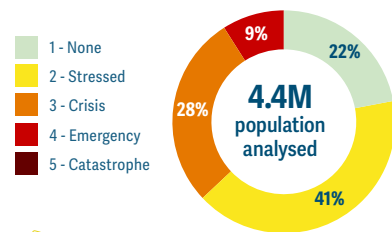
 **1.64M people**

were in Crisis or worse (IPC Phase 3 or above) in November–December 2021

 **1.24M people** in Crisis (IPC Phase 3)

 **0.4M people** in Emergency (IPC Phase 4)

37% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



Although no populations were in Catastrophe (IPC Phase 5) during November–December 2021, there were nearly 14 000 people in this phase in April–September 2021 (IPC, July and December 2021).

 **1.82M people** were in Stressed (IPC Phase 2)

The analysis covers the Grand Sud and Grand Sud Est, representing **16%** of the country's total population of **27.9 million** people.

Source: IPC, December 2021.

National population, 2020

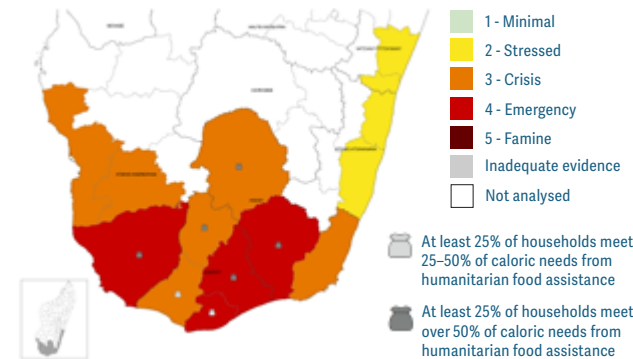


Source: WB 2020.

MAP 3.37

IPC acute food insecurity situation, November–December 2021

Of the 14 districts analysed, four were classified in Emergency (IPC Phase 4). Most of the people in Emergency (IPC Phase 4) were in Amboasary Atsimo, Ambovombe Androy, Ampanihy and Tsihombe.

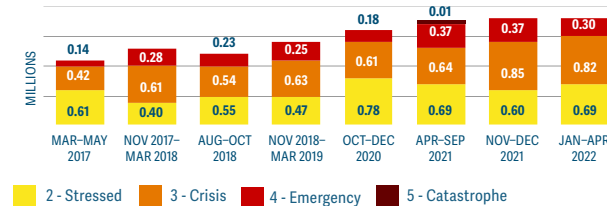


The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Source: Madagascar IPC Technical Working Group, December 2021.

FIG 3.28

Numbers of people in IPC Phase 2 or above, 2017–2022



This graph covers 7 districts for which data was available during all analysis periods listed. Datasets from all analysis rounds between 2017 and 2022 are provided (see Appendix 1, table A9, page 251).

Source: IPC.

Acute food insecurity trends

 **Numbers have risen since 2020.** In 2021, Madagascar's food crisis deteriorated significantly as a result of the devastating drought in the Grand Sud.

The number of people in Crisis or worse (IPC Phase 3 or above) rose from over 1 million (27 percent of the population analysed) in 13 districts in October–December 2020 to 1.6 million (37 percent) in 14 districts in November–December 2021. The population in Emergency (IPC Phase 4) nearly doubled to 405 000 during the same period (IPC, December 2020 and December 2021).

In the same seven southern districts analysed since 2017, the number of people in Crisis or worse (IPC Phase 3 or above) was the highest in November–December 2021 at 1.2 million. Before this, the highest numbers had been in November 2017–March 2018 and November 2018–March 2019, both at 0.9 million (IPC, October 2017 and October 2018). Since October 2020, the number of people in Emergency or worse (IPC Phase 4 or above) has been gradually increasing, while in April–September 2021, populations were recorded in Catastrophe (IPC Phase 5) for the first time in the country, with 14 000 people in this phase in one district (IPC, July and December 2021).

An April 2021 analysis projected that nearly 28 000 people would be in Catastrophe (IPC Phase 5) and nearly 0.5 million in Emergency (IPC Phase 4) by October 2021. The IPC also projected a **Risk of Famine** from October 2021 in the worst-case scenario (IPC, July 2021). However, the updated analysis for November–December 2021 showed that increased humanitarian assistance played a key role in avoiding a potential Risk of Famine, reducing the number of people in Catastrophe (IPC Phase 5) to zero, and reducing the number of people in Emergency (IPC Phase 4) by almost 30 percent (IPC, December 2021, WFP and FAO, 2022). Despite this, the area remained classified in Emergency (IPC Phase 4) (IPC, December 2021).

Drivers of the food crisis in Madagascar in 2021

Three consecutive years of devastating drought had an intense cumulative effect on harvests and livelihoods in the Grand Sud, which, in tandem with COVID-19-related income losses, high food prices and chronic high rates of poverty, led to a dire food crisis towards the end of 2021.

Weather extremes

From November 2020 to January 2021 – the main planting season – the Grand Sud recorded less than 50 percent of normal rainfall, resulting in almost 69 percent of the region being impacted by the worst drought conditions recorded since 1981 (ACAPS, May 2021). The drought was accompanied by destructive sandstorms, known as “tiomena” or “red wind” (IPC, December 2021).

FEWS NET estimated 2021 crop production in the Grand Sud to be 10–30 percent below that of 2020 and 50–70 percent below the five-year average (FEWS NET, June 2021). About 70–80 percent of households surveyed in October 2021 stated that drought or lack of rain was the main shock of the previous year (Evaluation des Productions Agricoles et de la Sécurité Alimentaire, October 2021; IPC, December 2021).

Very poor harvests led to below-normal food stocks for many households. More than 80 percent of households surveyed in Ambovombe and Amboasary in October 2021 reported household food stocks lasting for less than one month (IPC, December 2021). Poor harvests not only resulted in poor food availability at the household level but also curbed incomes from crop sales, particularly in the districts of Amboasary, Ambovombe, Beloha and Tsihombe, prompting an early and particularly acute lean period in 2021 (IPC, December 2021).

The impact of the drought in the Grand Sud deepened in October 2021, with 36 percent of the region’s territory in severe drought and 1 percent in extreme drought. The situation was particularly grave in Amboasary, where more than 44 percent of the territory was in severe drought and 3 percent in extreme drought (OCHA, December 2021).

Economic shocks, including COVID-19

In addition to low agricultural production, restrictions related to COVID-19 continued to reduce incomes and disrupt the supply of food and agricultural inputs, driving up food prices, and further weakening chronically precarious purchasing power. This situation was particularly critical for households who were highly market dependent. In Androy region, 80 percent of households were market reliant. In Atsimo Andrefana, the prevalence was over 70 percent and in Anosy, over 60 percent (IPC, December 2021)

In November–December 2021, price levels were above those of the same period in 2020 for all foodstuffs monitored in the main markets of the Grand Sud. Local rice was 12 percent higher, imported rice 10 percent, maize 37 percent and imported oil 48 percent higher.

According to the EPASA and SMART surveys, the share of food expenditure in total expenditure was extremely high (more than 75 percent of total expenditure) for more than half of households surveyed. About 70 percent of households had monthly incomes below 50 000 Ariary (USD 13) (IPC December, 2021).

Land preparation for the 2021/22 season began in October 2021, but several factors reduced agricultural labour opportunities. Among them, some households were choosing to prepare their land themselves rather than hire labour following the poor 2020/21 harvest in the southern regions and due to the economic impact of COVID-19. Limited water availability in some rivers and dams also cut demand for land preparation and irrigation work, while seed and cassava-cutting shortages contributed to below-average cropping areas (FEWS NET, October 2021).

Although forecasts indicated average rainfall in December 2021, the delayed start of the rainy season considerably reduced agricultural employment opportunities for poor households, including land preparation or sowing (IPC December, 2021). While formal and informal labour demand progressively increased in urban areas since the removal of COVID-19 restrictions, unemployment levels remained above normal as many small businesses



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Year upon year of drought has left families in southern Madagascar helpless and without any means to feed themselves. An almost total disappearance of food sources has pushed people to desperate survival measures, such as eating locusts, raw red cactus fruits or wild leaves.

were still recovering. Demand for services (laundry, security, transport, restaurants) from middle and better-off households remained low, driving below-average income levels for very poor urban households and migrants from the south and southeast (FEWS NET, October 2021).

Key nutrition challenges



501 500 children under 5 years were **wasted** in 2021
111 000 of them were **severely wasted**

Source: Madagascar IPC Technical Working Group, July 2021.

The number of wasted children under 5 years old in ten districts of Madagascar's Grand Sud increased more than fourfold from 135 500 in late 2020 to around 501 500 in May 2021. The number of children in need of urgent treatment for severe wasting more than quadrupled from 27 000 to 111 000 (IPC AMN, December 2020 and July 2021).

The nutritional situation is very worrying because the classification was made during the post-harvest period normally conducive to food security and a drop in cases of acute malnutrition (IPC AMN, July 2021). By November 2021, the number of wasted children was revised down but still remained extremely high at 309 000, of whom 60 000 needed treatment for severe wasting (IPC AMN, December 2021). The nutritional situation is expected to worsen during the January–April 2022 lean season before a seasonal improvement is expected from May–August 2022 (IPC AMN, December 2021).

All but two (Atsimo Atsinanana (20 percent) and Sofia (29 percent)) of Madagascar's 22 regions have a 'very high' prevalence of stunting (INSTAT and UNICEF, 2019).

Key drivers



Food security and access to healthy diets

Inadequate food consumption among children aged 6–23 months, stemming from high levels of acute food insecurity linked to southern Madagascar's worst drought in 40 years – was the main contributing factor to worsening malnutrition for all ten districts covered in the IPC AMN analysis. In seven districts, fewer than 2 percent of children received a minimum acceptable diet. In the remainder (Bekily, Ambovombe Androy and Taolagnaro), the percentage was just 3–9 percent (IPC AMN, December 2021).

Between April–June 2021 and November 2021 there was a significant improvement in the prevalence of wasting, with all districts classified in Alert (AMN Phase 2), while for acute food insecurity all districts were classified in Crisis or worse (IPC Phase 3 or above). The improvement was mainly attributable to prevention actions, particularly the effects of humanitarian food assistance, which prioritised communes with Serious (IPC AMN Phase 3) and Critical (IPC AMN Phase 4) levels of acute malnutrition, as well as all those at risk of malnutrition, such as households with malnourished children and pregnant and lactating women (IPC AMN, December 2021).

Caring and feeding practices

In the districts of Amboasary, Beloha, Betioky, Ambovombe and Ampanihy West, care and feeding practices were identified as major contributors to nutrition challenges. For instance, exclusive breastfeeding rates for infants up to six months of age were as low as 17.3 percent in Betioky and 18.6 percent in Ambovombe (IPC AMN, December 2021).

Health services and household environment

Poor access to drinking water and sanitation was a major problem in the ten districts analysed. In Tsihombe, only 3 percent of households had access to safely managed water (SMART, November 2021). Shortages in water led to an increase in water borne diseases in some areas (OCHA, December 2021). There was very limited sanitation infrastructure in the districts analysed (IPC AMN, December 2021).

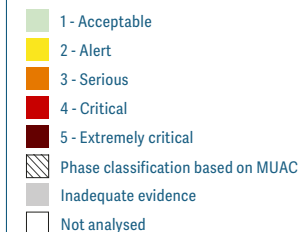
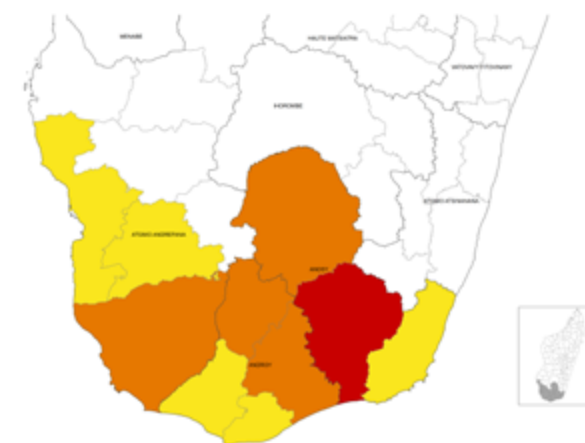
The high prevalence of diarrhoea, acute respiratory infections and malaria among children remained a significant public health concern (IPC, December 2021). People living in remote areas without roads or communication infrastructure struggled to reach health and nutrition services (ACAPS, October 2021).

Lack of access to health services (low anti-measles vaccination rates and vitamin A coverage) contributed to the deterioration of wasting in Betroka and Ampanihy West. In Amboasary Atsimo and Taolagnaro, where health services are fairly efficient, this was not a contributing factor (IPC, December 2021).

MAP 3.38

IPC acute malnutrition situation, January–April 2021

One district (Amboasary Atsimo) was classified in Critical (IPC AMN Phase 4), six (Ambovombe, Ampanihy, Beloha Betioky, Bekily, Betroka and Tsihombe) in Serious (IPC AMN Phase 3) and five districts in Alert (IPC AMN Phase 2).



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

Source: Madagascar IPC AMN Technical Working Group, December 2020.


Acute food insecurity forecast, 2022

 **1.64M people**

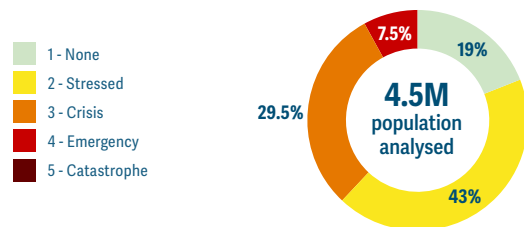
were forecast to be in Crisis or worse (IPC Phase 3 or above) in January–April 2022

 **1.31M people**
in Crisis
(IPC Phase 3)

 **0.33M people**
in Emergency
(IPC Phase 4)

 A slight decrease in the population in Emergency (IPC Phase 4) is expected due to provision of humanitarian assistance, while those in Crisis (IPC Phase 3) will likely increase compared to November–December 2021. The population in Crisis or worse (IPC Phase 3 or above) is also expected to decrease with the May harvest, until August.

37% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **1.91M people** were forecast to be in Stressed (IPC Phase 2)

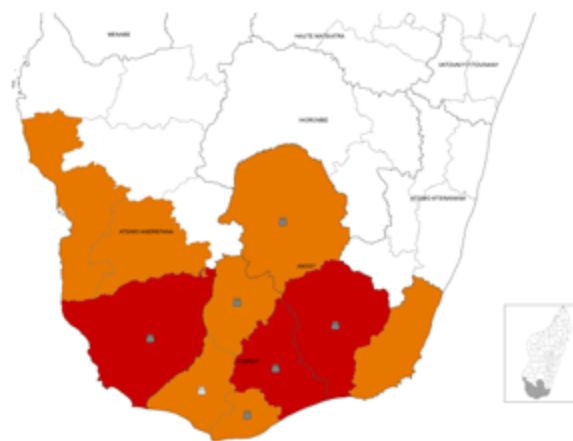
 The analysis covers the Grand Sud and Grand Sud Est – **16%** of the country's total population of **27.9 million** people.

Source: IPC, December 2021.

MAP 3.39

IPC acute food insecurity situation, January–April 2022

The districts of Amboasary Atsimo, Ambovombe Androy and Ampanihy Ouest were classified in Emergency (IPC Phase 4) with 55–65 percent of their populations in Crisis or worse (IPC Phase 3 or above). Seven districts were projected to be in Crisis (IPC Phase 3).



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

Source: Madagascar IPC Technical Working Group, December 2021.

In early 2022, households were expected to face high food prices during the lean season, as well as high costs of seeds and other agricultural inputs. The damage wrought by tropical cyclone Ana also wrought considerable damage to livelihoods and crops in early 2022.

Weather extremes

Severe drought conditions persisted in December 2021, impairing agricultural activities and prospects for the 2022 harvest by delaying the preparation and planting at the beginning of the agricultural season (FEWS NET, December 2021). However, IPC projected that there was a limited risk of drought during January–April 2022 and forecast normal to above-average rainfall (IPC, December 2021). In January 2022, the arrival of tropical storm Ana brought flooding, landslides, loss of life and infrastructure damage, displacing 71 000 people across seven regions (OCHA, February 2022). An estimated 347 500 hectares were inundated, of which nearly 169 000 hectares were cropland, with the regions of Alaotra Mangoro, Analamanga, Itasy and Sofia being the most affected (FAO, March 2022).

The deterioration of roads during the rainy season could also impact the supply of markets and drive food price increases and delays in the distribution of aid (IPC, December 2021).


Economic shocks, including COVID-19

A seasonal increase in the prices of staple foods is expected during the lean period (IPC, December 2021).

While a slight increase in daily agricultural work opportunities is expected to ease food insecurity for poor and very poor households, middle and better-off households will be forced to incur expenses for the purchase of inputs and for agricultural wage labour (IPC, December 2021). Poor households in southern Madagascar continue to face difficulty accessing seeds and other necessary inputs due to high import costs. As a result, food production across the south is expected to remain in line with levels that are well below the long-term average (FEWS NET, December 2021).

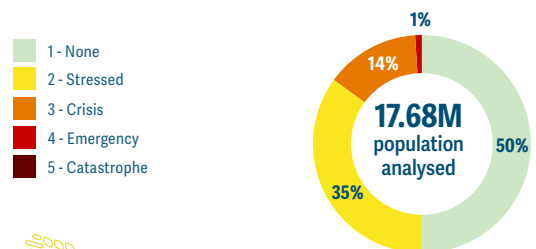
Malawi

Acute food insecurity overview 2021

 **2.64M people** were in Crisis or worse (IPC Phase 3 or above) in January–March 2021

 **2.51M people** in Crisis (IPC Phase 3)  **0.13M people** in Emergency (IPC Phase 4)

15% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



 **6.27M people** were in Stressed (IPC Phase 2)

The analysis covers **90%** of the country's total population of **19.7 million** people.

Source: IPC, January 2021.

National population

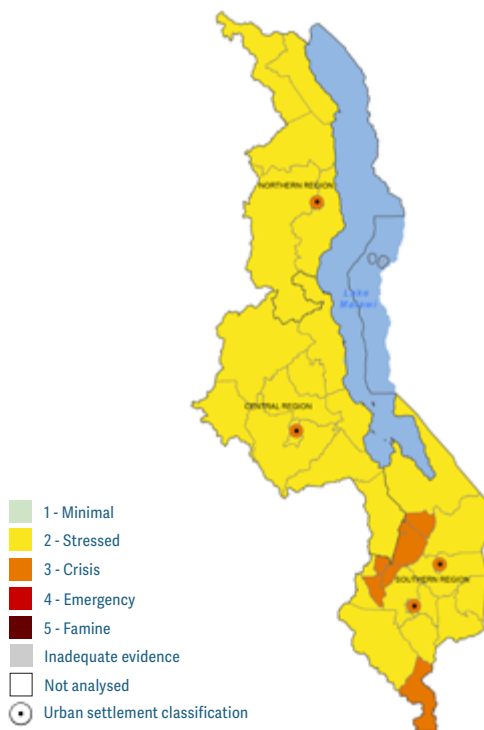


Source: WB 2020.

MAP 3.40

IPC acute food insecurity situation, January–March 2021

Malawi's four main cities – Lilongwe, Blantyre, Mzuzu and Zomba – were all classified in Crisis (IPC Phase 3). All rural areas were in Stressed (IPC Phase 2) except for Balaka, Neno and Nsanje in the southern region, which were in Crisis (IPC Phase 3).




- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed
- Urban settlement classification

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

Source: Malawi IPC Technical Working Group, January 2021.

Acute food insecurity trends

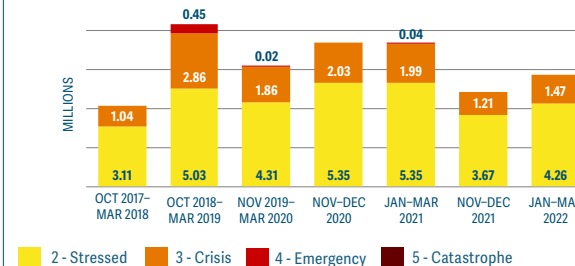
 **Numbers have remained relatively stable since 2020.** The total population in Crisis or worse (IPC Phase 3 or above) decreased from 2.6 million during the January–March 2021 lean season to 1.1 million from July–September 2021, before increasing to 1.4 million from November–December 2021.

In January–March 2021, over 610 400 people were in Crisis or worse (IPC Phase 3 or above) in the four cities of Blantyre, Lilongwe, Mzuzu and Zomba, up from 517 300 in November–December 2020 (IPC, January 2021).

From 2018 onwards, the country on average registered approximately 1.5 million people (about 7 percent of the total rural population) in Crisis or worse (IPC Phase 3 or above), as well as 4–5 million people in Stressed (IPC Phase 2) (about 30 percent of the rural population). Food insecurity in Malawi is more pronounced in the southern region, which is prone to climatic shocks every year that often drive high numbers of people to be in Crisis or worse (IPC Phase 3 or above).

FIG 3.29

Numbers of people in IPC Phase 2 or above, 2017–2022



Bars refer to comparable analysis periods covering rural areas only (see Technical Notes). Datasets from all analysis rounds between 2017 and 2022 are provided (see Appendix 1, table A10, page 252).

Source: Malawi IPC Technical Working Group.

Drivers of the food crisis in Malawi in 2021

Weather extremes represented the primary driver of acute food insecurity, as localized dry spells and early cessation of rainfall in the southern districts resulted in low household stocks in early 2021. Flooding, storms and heavy rains damaged food crops. Widespread job losses, especially in the informal labour market, and a shortfall in remittances, particularly from South Africa due to global COVID-19 restrictions, contributed to acute food insecurity.

Weather extremes

Localized dry spells and early cessation of rainfall in the southern districts (Nsanje and Chikwawa, as well as parts of Phalombe, Balaka, Mwanza, Neno, Zomba and Chiradzulu) in the 2020/21 agricultural season resulted in reduced harvests and consequently low household stocks in 2021, forcing households to rely on the market for their food supply earlier than normal (IPC, September 2020 and August 2021).

Parts of Rumphu and Karonga districts in northern Malawi experienced flooding and waterlogging between January and February 2021, which damaged food crops (IPC, August 2021).

Economic shocks, including COVID-19

In January 2021, the prevalence of the population in Crisis or worse (IPC Phase 3 or above) was highest in urban areas, where COVID-19 restrictions constrained labour opportunities and wages for poorer households. However, in February, many low-income households benefited from a three-month cash-based assistance programme. A decline from March onwards in the number of COVID-19 cases enabled a gradual resumption of economic activity (FEWS NET, March 2021).

Relatively stable food prices helped to minimise the negative effect of income reductions. In 2021, the food inflation rate averaged 11 percent compared to 13 percent in 2020. Prices of the main food staple, maize, were also lower year-on-year, helping to improve food access amid the adverse impacts of COVID-19 restrictions on household income (FAO-GIEWS, February 2022).

The declining market for Malawi's main foreign exchange earner, tobacco, contributed to severe currency shortages (IPC, December 2021). The weakening national currency, which lost about 7 percent of its value against the United States dollar during 2021, as well as the effects of rising global food and petrol prices, exerted some upward pressure on food prices towards the end of the year, particularly for imported commodities such as wheat. This was reflected in a moderate uptick in the food inflation rate in the last quarter of 2021 (Malawi NSO, February 2022).



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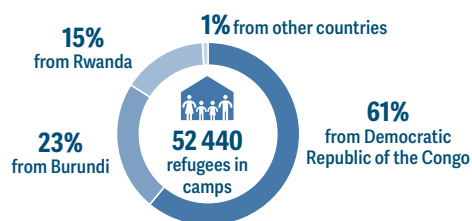
The COVID-19 pandemic had a major effect on income sources in Malawi with thousands of job losses in South Africa, tourism and other informal sectors.

Displacement 2021

Refugees

FIG 3.30

The refugees and asylum seekers in Malawi reside in camps, mainly in Dzaleka camp



Source: UNHCR, December 2021.

More than 52 000 refugees and asylum seekers in Malawi are hosted in the very congested Dzaleka refugee camp, which was initially designed for 10 000–12 000 people.

The country continues to receive new arrivals from Rwanda and Burundi. By the end of 2022, the total refugee and asylum seekers population is expected to reach around 60 800 (UNHCR, 2022).

Due to the effects of COVID-19 movement restrictions and a 25 percent funding reduction, refugee food security outcomes in 2021 worsened compared to 2020. The proportion of refugee households classified as having poor food consumption increased from 5 percent in November 2020 to 11 percent in November 2021. Dietary diversity also deteriorated, with the proportion of households with poor dietary diversity increasing from 19 percent in 2020 to 32 percent in 2021 (WFP, November 2021).

Additional drivers of acute food insecurity and malnutrition among refugees in Malawi

Limited livelihood opportunities drive acute food insecurity in Dzaleka camp.

Limited rights (freedom of movement, ability to engage in employment or establish businesses and access to land) are barriers to developing livelihood opportunities and income. The camp is heavily congested with no space for subsistence farming. **Refugees** and **asylum seekers** are not officially allowed to stay outside the camp, which constrains their capacity to seek employment opportunities far from it (UNHCR, December 2021).

Due to legal restrictions on refugee rights to access land and engage in employment opportunities, refugees are heavily reliant on humanitarian food assistance to meet basic food needs. Food assistance has been significantly reduced and inconsistent over the past five years because of funding shortfalls. As of September 2021, refugees received a cash transfer to meet 75 percent of their basic food needs on average (WFP, November 2021).

The government recognizes the need to foster inclusion and access to opportunities to address the displacement situation, and as such has expanded some access to land, which could facilitate livelihood opportunities for refugees, and improve their capacity to meet basic food and dietary needs.

There are no systematic supplementary feeding programmes for refugee children under 5 years old. At 37 percent, the prevalence of stunting among refugee children is well above the 30 percent 'very high' threshold.

The current water system can accommodate only 20 200 persons, which is about 38 percent of the population of the camp.¹ WASH conditions in the camp are therefore in a critical state and further contribute to malnutrition challenges (UNHCR, December 2021).

¹ Research indicates that 20 litres per capita per day is the minimum quantity of safe water required to realise minimum essential levels for health and hygiene (WHO).

Key nutrition challenges



2.6% of children under 5 years were **wasted** in 2020.

Source: MICS, 2019–2020.

Child wasting was estimated at 2.6 percent and severe wasting at 0.7 percent. The south region recorded the highest prevalence of wasting at 3.1 percent (MICS, 2019–2020).

The national stunting prevalence remains 'very high' by WHO thresholds at 35.5 percent in 2020, down from 41 percent in 2019 (MICS, 2019–2020).

Key drivers



Food security and access to healthy diets

Wasting in Malawi fluctuates by season, rising during the lean season as well as during years with poor agricultural performance.



Caring and feeding practices

Almost two-thirds (64.1 percent) of infants are exclusively breastfed, reflecting no progress or even decline in recent years (Global Nutrition Report, 2021). Child-feeding practices remain worrisome in Malawi, with only 8.7 percent of children accessing a minimum acceptable diet. Just over one third (36.8 percent) receive minimum meal frequency and only 17 percent receive the minimum dietary diversity (MICS, 2019–2020).



Health services and household environment

Access to water and sanitation is relatively high, with over 87.9 percent of the population using water from improved sources. However, almost one-third (32.3 percent) of the population spend more than one hour collecting water every day. At least eight out of ten households use improved sanitation, and around half (52.8 percent) have soap available at hand-washing facilities (MICS, 2019–2020).

Acute food insecurity forecast, 2022

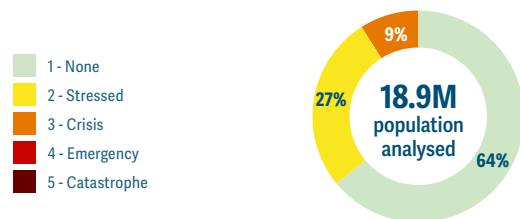
 **1.65M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in January–March 2022


 **1.65M people**
in Crisis
(IPC Phase 3)

 The number of people in Crisis or worse (IPC Phase 3 or above) is expected to decrease substantially relative to 2021 but concerns remain in southern districts.

9% of the population analysed was forecast to be in Crisis (IPC Phase 3)



No populations were expected to be in Emergency (IPC Phase 4) during this period.

 **5.0M people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers **100%** of the country's total population of **18.9 million** people.

Source: IPC, August 2021.

MAP 3.41

IPC acute food insecurity situation, January–March 2022

Nsanje and Chikwawa were the only districts projected to be in Crisis (IPC Phase 3). All the four urban zones analysed (Blantyre, Lilongwe, Mzuzu and Zomba) were projected to be in Stressed (IPC Phase 2).



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

Source: Malawi IPC Technical Working Group, August 2021.

Poor rains at the start of the 2021/22 agricultural season and the impact of tropical storm Ana are expected to result in a below-average 2022 harvest. Food prices are expected to increase during the lean season.

Weather extremes

By the end of January 2022, torrential rainfall from tropical storm Ana had affected southern and parts of central Malawi leading to widespread flooding. A state of disaster was declared in 15 districts, with Chikwawa the worst affected (ECHO Flash; OCHA, January 2022). The flooding critically compromised the food security of affected populations, destroying nearly all food reserves and a significant share of their agricultural fields and livelihood assets. Over 71 700 hectares were severely affected, while over 36 800 livestock were killed or injured (OCHA, February 2022).

Coupled with well below-average rainfall at the start of the 2021/22 cropping season, such weather extremes are anticipated to result in an average to below-average cereal harvest in 2022 (FEWS NET, December 2021).

Beyond the January–March 2022 period, there are indications food security could begin to deteriorate in mid and late-2022 – outside of the current projection period – as the projected reduced harvest affects poor households' food and income sources (FEWS NET, December 2021).

Economic shocks, including COVID-19

During the January–March 2022 lean season, prices are expected to slightly increase, following seasonal trends, as households deplete their stocks. Additionally, agricultural incomes will be adversely affected by low prices for cash crops in Kasungu and Lilongwe (IPC, December 2021), further weighing on households' ability to access food markets.

The effects of preceding COVID-19 lockdowns and slow rebound in the global economy are likely to cap Malawi's economic recovery and keep incomes from petty trading and self-employment activities at below-average levels (IPC, December 2021).


Mali

Acute food insecurity overview 2021

 **1.31M people**

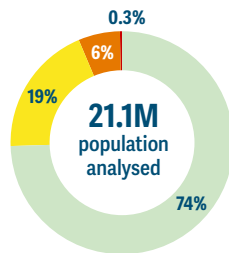
were in Crisis or worse (CH Phase 3 or above) in June–August 2021

 **1.25M people** in Crisis (CH Phase 3)

 **0.06M people** in Emergency (CH Phase 4)

6% of the population analysed was in Crisis or worse (CH Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **4.1M people** were in Stressed (CH Phase 2) in the same period

The analysis covers **100%** of the population of **21.1 million** people.

Source: CH, March 2021; Ministère de l'Agriculture, 2021.

National population

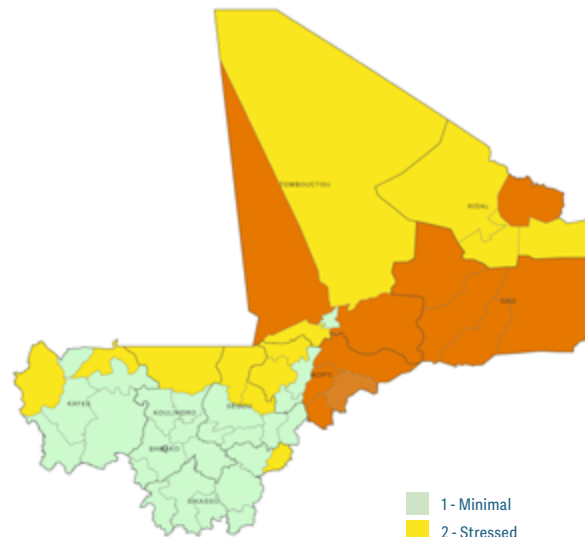


Source: WB 2020.

MAP 3.42

CH acute food insecurity situation, June–August 2021

Nine areas were classified in Crisis (CH Phase 3) in June–August 2021 in Gao, Kidal, Mopti and Timbuktu regions. Some areas were inaccessible in eastern Mopti.



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

Source: CH, March 2021.

Acute food insecurity trends

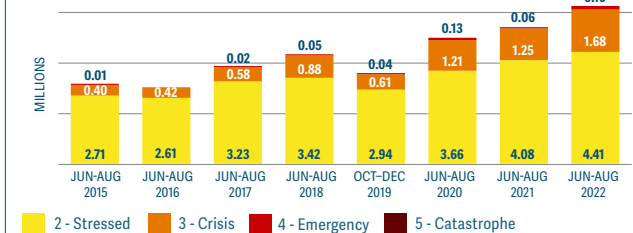
 **Numbers have been relatively stable compared to 2020.** In 2021, acute food insecurity remained near the high levels of June–August 2020, reaching 1.3 million people in Crisis or worse (CH Phase 3 or above) in June–August 2021.

While the number of people in Crisis (CH Phase 3) increased, the number of people in Emergency (CH Phase 4) decreased. However, acute food insecurity remained well below the levels of 2014, when 1.9 million people were in these phases, including 375 000 in Emergency (CH Phase 4) (CH, March 2014).

The number of people in Crisis or worse (CH Phase 3 or above) has far exceeded 1 million in both June–August 2020 and June–August 2021. This trend is mainly driven by deteriorating security conditions across the Central Sahel, particularly in Liptako-Gourma region, increased displacement, weather extremes and the socioeconomic shocks related to COVID-19. During the post-harvest period in October–December 2021, acute food insecurity did not significantly improve compared to the lean season (June–August 2021) with almost 1.2 million people in Crisis or worse (CH Phase 3 or above) (CH, November 2021).

FIG 3.31

Numbers of people in CH Phase 2 or above, 2015–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2014 and 2022 are provided (see Appendix 1, table A11, page 253).

Source: CH.

Drivers of the food crisis in Mali in 2021

Conflict in central and northern regions as well as erratic rainfall and floods led to below-average crop production in 2021. Households also faced rising food prices and declining incomes as a result of COVID-19 restrictions.

✳️ Conflict/insecurity

Persistent or worsening insecurity in central and northern regions resulted in increased displacement and localized shortfalls in crop production, which impacted vulnerable households' access to food during the June–August 2021 lean season (CH, April 2021). Most notably, in the key rice-producing regions of Mopti and Segou, conflict and insecurity led to a significant reduction in the area planted, resulting in below-average rice production in 2021 and significantly higher rice prices year-on-year (FAO-GIEWS, December 2021a).

Insecurity hampered herd movements in northern and central regions where livestock theft was reportedly significant. Conflict also reduced humanitarian access and contributed to limited access to basic services for vulnerable populations (CH, April 2021). Over 1 100 security incidents were reported by humanitarian actors between January and September, with around half occurring in the central regions. During 2021, insecurity expanded to previously unaffected areas such as southern Sikasso region (OCHA, September 2021; UNICEF, August 2021).

Limited access to and availability of natural resources also contributed to intercommunal conflicts, which in turn negatively affected livelihoods and reduced households' resilience to food insecurity through loss of assets (CH, November 2021).

✳️ Weather extremes

Following above-average agricultural production in 2020/2021, erratic rainfall and floods, combined with conflict and insecurity, led to reduced plantings and crop yields in the 2021/22 cropping season (CH, April 2021). From May–September 2021 – corresponding to the rainy season – severe rainfall deficits affected central and

northern regions (WFP, September 2021). In September, rainfall was below average and marked by prolonged dry spells in southwestern Mopti and northeastern Segou, affecting crop flowering and maturation stages and increasing the incidence of pest infestations (FEWS NET, October 2021).

Floods in July also affected around 19 000 people, mostly in Menaka, Bamako, Gao, Segou and Koulikouro. As a result, crop production is forecast below the 2020/2021 levels at the national level, though still around the five-year average (FAO-GIEWS, December 2021a). Erratic rainfall also resulted in significant fodder deficits in northern and western Sahel areas (CH, November 2021) against the backdrop of high livestock feed prices.

🏠 Economic shocks, including COVID-19

In 2021, livelihoods continued to be negatively affected by a decrease in incomes from cotton – boycotted by producers in 2020 – and a general decline in revenue-generating opportunities in the context of COVID-19, in particular in urban centres and areas dependent on migrant remittances, such as Koulikourou and Sikasso regions (CH, April 2021; FEWS NET, August 2021).

At the end of the lean season in August 2021, prices of all cereals were on the rise compared to the same period the previous year (OMA & WFP, August 2021; FAO-GIEWS, September 2021) and remained high throughout the year (CH, November 2021).

The socioeconomic effects of COVID-19 restrictions were also detrimental for rural micro enterprises (RMEs) and small rural enterprises (SREs), which faced greater obstacles to finance, reduced activity, higher expenses and lower revenues (FAO & IFAD, December 2020). As of July–August 2021, around 43 percent of surveyed households – mostly relying on agriculture for their livelihoods – reported up to a 50 percent decrease in incomes owing to COVID-19 related restrictions (FAO, August 2021). Pastoralists were particularly affected by declining terms of trade and high fodder costs, within a broader context of poor pasture availability (CH, April 2021).



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Conflict, rainfall deficits and flooding led to a significant reduction in the area planted, resulting in below-average rice production in 2021 and significantly higher rice prices year-on-year.

Displacement 2021

IDPs

350 100 IDPs by end 2021

659 000 IDP returnees between September and December 2021

Source: IOM DTM, December 2021.

The number of IDPs in Mali increased more than tenfold between the end of 2017 and 2021.

By September, the population reached nearly 402 000, the highest recorded for the country and an increase of 100 000 during 2021. By December 2021, the number of IDPs had decreased to 350 000 (IOM DTM, September 2021 and December 2021; GNO, 2022).

Despite this observed trend of return between September and December 2021, violence continued to drive displacement in the regions of Mopti, Ségou, Tombouctou, Menaka and Gao (IOM, December 2021). Natural disasters were the push factor for 10 percent of families abandoning their homes in the first half of 2021 (IOM DTM, July 2021).

The mass movement of people has led to the creation of numerous spontaneous IDP sites that have also affected host communities (INSTAT, December 2021). In the 176 places of displacement assessed during December 2021, 66 percent of IDPs lived with host families and 34 percent in spontaneous sites and in collective centres (IOM DTM, December 2021).

From October–December 2021, 90 900 IDPs were estimated to be in Crisis or worse (CH Phase 3 or above) phases of acute food insecurity, representing 24 percent of all IDPs, including 10 400 in Emergency (CH Phase 4). From June–August 2022, the acute food insecurity situation for IDPs was expected to worsen with 140 400 projected to be in Crisis or worse (CH Phase 3 or above), representing 35 percent of all IDPs, including 16 300 in Emergency (CH Phase 4) (CH, November 2021).

The child nutritional situation in IDP sites deteriorated with 15.9 percent of under 5s wasted in 2021 compared with 10.4 percent in 2020. Around 3 percent of IDP children were severely wasted (INSTAT, December 2021). Between June and August 2022, the peak period for acute malnutrition, a progressive deterioration in the nutritional situation is expected, with four IDP sites likely in a Serious (IPC AMN Phase 3) condition and one in a Critical condition (IPC AMN Phase 4) (IPC, June 2021).

Additional drivers of acute food insecurity and malnutrition for displaced populations

Most of Mali's IDPs live in crowded host families and communities or in temporary informal sites, lacking access to basic services. As of August 2021, floods resulted in the destruction of shelter and infrastructure, loss of livelihoods, including the destruction of agricultural lands, and loss of animals, particularly in the regions of Menaka, Mopti and Ségou (IOM, December 2021).

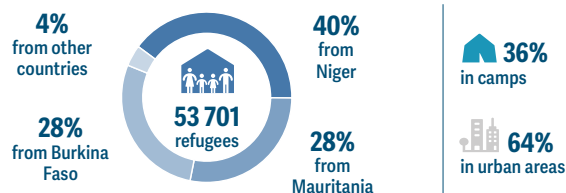
Many families have had to abandon their fields and have seen their livestock stolen. The presence of armed conflict has increasingly limited people's ability to move freely, and in some cases has led to full-fledged besiegement, preventing vulnerable families from accessing aid, their fields, grazing areas for their livestock, and markets surrounding their villages (NRC, December 2021).

Communities in conflict zones and those hosting displaced populations are particularly vulnerable to nutritional challenges and unable to access healthcare services. Over 96 percent of IDPs live in regions where household access to at least basic drinking water is lower than the national average of 78 percent (HNO, February 2022).

Refugees

FIG 3.32

Most of the refugees and asylum seekers hosted in Mali fled violence in the Niger and Burkina Faso



Source: UNHCR, January 2022.

Refugees in Mali largely reside in Menaka, Kayes and Gao, while a small percentage of refugee households live in Mopti, Bamako, Tombouctou and Sikasso regions. The majority of refugees fled violence and insecurity in neighbouring countries.

Although acute food security data covering refugee populations was unavailable for 2021, refugees were identified as particularly vulnerable to the drivers of acute food insecurity, notably to conflict and insecurity within Mali, as well as the effects of weather shocks and the socioeconomic effects of COVID-19. These factors impose further limitations on already fragile refugee livelihoods (HNO, February 2022).

Humanitarian assistance

A December DTM assessment revealed lack of assistance in recent months in 36 percent of places of displacement. In the Bankass circles, 38 percent of IDPs mentioned a total absence of assistance followed by Niono (19 percent) and Ansongo (9 percent) (IOM DTM, December 2021). Levels of humanitarian funding have decreased steadily from half of required funding for food security responses in 2017, to only a quarter in 2021 (NRC, December 2021).

Key nutrition challenges



1.2M children under 5 years were **wasted** in June 2021–August 2022

300 000 of them were **severely wasted**



35 000 pregnant and lactating women were **acutely malnourished**

Source: IPC AMN, March 2022.

Violent conflict, displacement and frequent intense periods of drought and flooding have contributed to a sharp deterioration in health and nutrition in Mali in the last year.

An IPC Acute Malnutrition analysis covering 51 administrative subdivisions and six communes of Bamako Capital District, including the IDP sites in four regions (Gao, Mopti, Ségou and Tombouctou), revealed that over 1.2 million children under the age of 5 years will likely be wasted from June 2021–August 2022. This includes over 300 000 severely wasted children in need of urgent and adequate treatment. Over 35 000 pregnant and lactating women will also likely be wasted (IPC AMN, June 2021).

An expected seasonal deterioration in the acute malnutrition situation between October 2021–May 2022 and June–August 2022 could be more severe than anticipated if effective measures to treat nutrition challenges and address contributing factors are not taken (IPC, AMN, March 2022).

The national prevalence of child wasting reached the ‘very high’ WHO threshold of 10 percent, an alarming increase from 2020’s figure of 7.2 percent. The percentage of severely wasted children increased from 1.3 percent in 2020 to 1.8 percent, equating to 65 000 children (SMART 2021).

Nearly 22 percent of children under 5 years are stunted – a prevalence that is considered ‘high’ by WHO cut-offs (SMART 2021).

Key drivers

Caring and feeding practices

Just 23 percent of children aged 6–23 months received the minimum dietary diversity, and 10.5 percent the minimum acceptable diet, which is close to the ‘extremely critical/catastrophic’ threshold suggested by the Infant Feeding in Emergencies core group. Only around half (48 percent) of infants aged 0–6 months are exclusively breastfed, a prevalence that is considered serious/severe by UNICEF thresholds (SMART 2021).

Food security and access to healthy diets

The increases in child wasting since 2017 can be attributed to the cumulative effect of years of conflict, political instability and an ailing economy on the dimensions of nutrition and food security, as well as an increase in the coverage of this analysis to include IDP settlements, where there is a high prevalence of wasting. Inadequate quality and quantity of food intake prevents children from getting the minimum adequate food needed for physical growth (IPC AMN, March 2022).

Health services and household environment

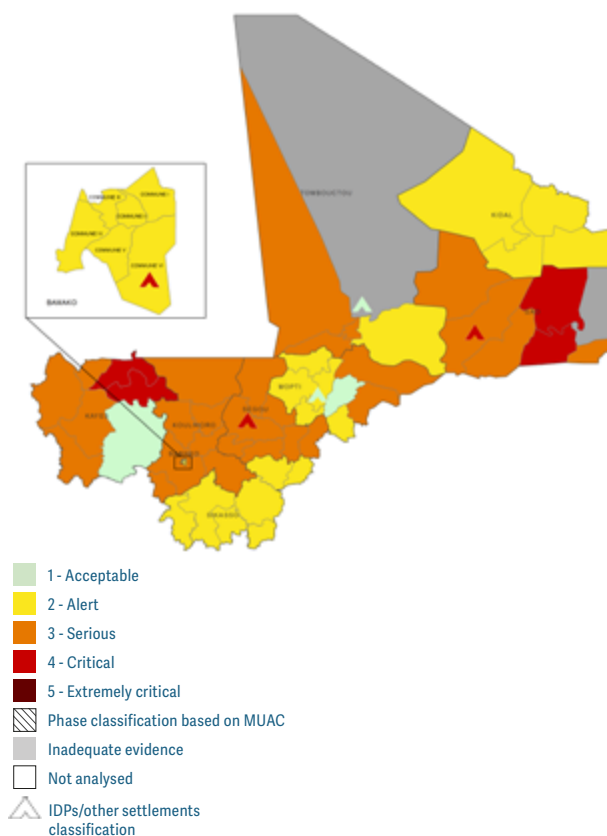
Over half of Mali’s malnutrition cases are associated with diarrhoeal disease (HNO 2020) predominantly due to poor sanitary conditions. Anaemia levels remain very high, with 63 percent of children and 82 percent of women of reproductive age anaemic (DHS, 2018).

High levels of malaria and acute respiratory infections, as well as a resurgence of measles outbreaks, are also behind the high prevalence of child malnutrition. Other factors include low coverage of Integrated Management of Acute Malnutrition (IMAM) programmes, poor hygiene conditions (inaccessibility of adequate sanitation facilities), and low coverage of access to drinking water, which are often linked to the negative impacts of inter-community conflicts and the volatile security situation in some regions (IPC AMN, March 2022).

MAP 3.43

IPC acute malnutrition situation, June–September 2021

From June–September 2021, 27 administrative subdivisions were classified in Serious (IPC AMN Phase 3) and four administrative subdivisions were in Critical (IPC AMN Phase 4).



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

Source: Mali IPC AMN Technical Working Group, March 2022.

Acute food insecurity forecast, 2022

 **1.8M people**

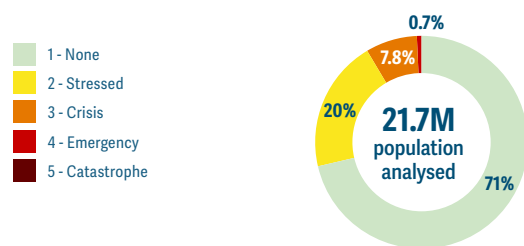
were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022


 **1.68M people**
in Crisis
(CH Phase 3)


 **0.16M people**
in Emergency
(CH Phase 4)

 Acute food insecurity is expected to worsen in 2022, with the population in Crisis or worse (CH Phase 3 or above) expected to increase by 40 percent compared to June–August 2021.

8% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)



 **4.4M people** were forecast to be in Stressed (CH Phase 2)

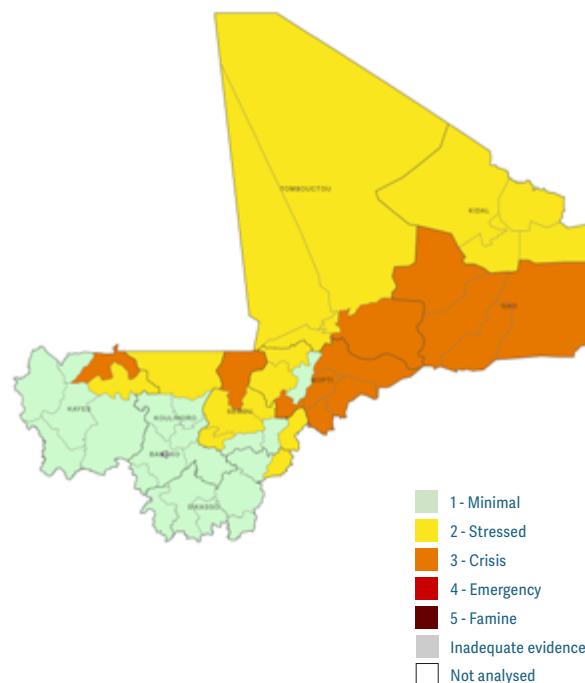
 The analysis covers **100%** of the population of **21.1 million** people.

Source: CH, November 2021.

MAP 3.44

CH acute food insecurity situation, June–August 2022

In June–August 2022, 12 areas are projected to be in Crisis (CH Phase 3) in Gao, Kayes, Mopti, Segou, Timbuktu, as well as all bordering areas with northern Burkina Faso and southwestern Niger.¹



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

Source: CH, March 2022.

¹ Compared to June–August 2021, the largest increases in the population facing Crisis or worse (CH Phase 3 or above) were projected in Kayes (88 percent), Mopti (44 percent), Segou (166 percent) and Sikasso (110 percent).

Conflict-related displacement, drought and economic instability will continue to strain essential public services, safety nets and households' coping mechanisms.

Conflict/insecurity

Insecurity will continue to constrain farmers' ability to plant their fields, curbing crop production, particularly in the central and northern areas (CH, November 2021). As of December 2021, insecurity prevented around 254 000 people in Ségou and Mopti from accessing up to 50 percent of their agricultural lands, significantly reducing production prospects for 2022 and increasing the likelihood of an early onset of the lean season for affected populations (FEWS NET, December 2021). Conflict is likely to disrupt transhumance routes, limiting already scarce access to pasture and water for pastoralists (CH, November 2021).

Weather extremes

In Liptako Gourma and Plateau Dogon areas, and in lake areas in Tombouctou, Mopti and Kayes, cropping activities will likely be constrained by poor water availability (FEWS NET, December 2021). In Taoundenit, pastoralist conditions will become particularly poor from February 2022 due to the exhaustion of grazing pastures, leading to early transhumance movements amid high fodder prices (DRPIA Taoundenit, October 2021). By February 2022, the prices of locally produced coarse grains reached near-record levels – around 60 percent higher than the same period in 2021, notably for sorghum and millet (FAO, March 2022).

Economic shocks, including COVID-19

The economic situation will remain fragile in 2022, given a fluid COVID-19 situation and a volatile political situation (FEWS NET, December 2021). In early 2022, the Economic Community of West African States (ECOWAS) imposed stringent sanctions on Mali as the transitional military government announced that presidential elections would not be organised in February 2022 as previously agreed. Sanctions include the closure of all borders and a trade embargo, while financial aid was cut off and the country's assets frozen (Action Against Hunger et. al., January 2022).

Mozambique

Acute food insecurity overview 2021

 **2.91M people**

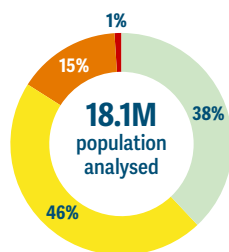
were in Crisis or worse (IPC Phase 3 or above) in January–March 2021

 **2.65M people** in Crisis (IPC Phase 3)

 **0.26M people** in Emergency (IPC Phase 4)

16% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **8.41M people** were in Stressed (IPC Phase 2)

The analysis covered 33 areas in 11 provinces and 12 cities, comprising **60%** of the country's total population of **30.1 million**.

Source: IPC, January 2021.

National population

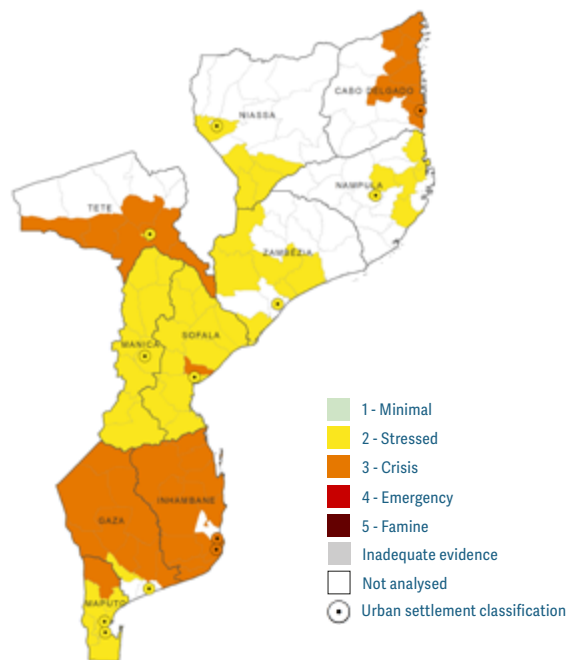


Source: WB 2020.

MAP 3.45

IPC acute food insecurity situation, January–March 2021

Fifteen areas across eastern Cabo Delgado, southern Tete and most districts of Gaza and Inhambane as well as the Dondo district in Sofala and the Magude district in Maputo were in Crisis (IPC Phase 3). All other analysed areas were in Stressed (IPC Phase 2).



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

Source: Mozambique IPC Technical Working Group, January 2021.

Acute food insecurity trends

▲ Numbers have risen since 2020. During the 2021 lean season, in January–March, around 2.9 million people – or 16 percent of the population analysed – were in Crisis or worse (IPC Phase 3 or above). Compared to the 2020 peak, around 240 000 additional people faced Crisis or worse (IPC Phase 3 or above). This is the highest number recorded for the country since it was significantly impacted by the 2016 drought, linked to the El-Niño phenomenon (IPC, February 2017).

During the April–September 2021 post-harvest period, the percentage of the population estimated to be in Crisis or worse (IPC Phase 3 or above) decreased to around 9 percent, including a 14 percent decrease in the population facing Emergency (IPC Phase 4). Despite not being comparable in terms of areas and population analysed, during the November 2021–March 2022 lean season, the percentage of the population in Crisis or worse (IPC Phase 3 or above) in urban and rural areas of Mozambique was projected to rise to 13 percent. During this period, Cabo Delgado was expected to remain the most affected by acute food insecurity, with 932 000 people in Crisis or worse (IPC Phase 3 or above), representing 35 percent of the local population, despite the provision of humanitarian assistance.

In Cabo Delgado, acute food insecurity continued to deteriorate throughout the year due to the effects of conflict and insecurity, with the population in Crisis or worse (IPC Phase 3 or above) increasing from 580 000 people in October–December 2020 to 769 000 in April–September 2021, including a 60 percent increase in the population in Emergency (IPC Phase 4). From the October 2020–March 2021 period to the April–September 2021 period, the share of the population in Crisis or worse (IPC Phase 3 or above) increased from 25 percent to 34 percent. By September 2021, Cabo Delgado contained the entire population in Emergency (IPC Phase 4) identified at the national level (IPC, January 2021).

Drivers of the food crisis in Mozambique in 2021

In 2021, intensifying conflict and displacement in northern Mozambique disrupted crop production and food supplies, pushing up prices, while dry spells, drought, heavy rains and floods affected agricultural production throughout the country. COVID-19 related restrictions continued to impact economic activities.

✳️ Conflict/insecurity

In early 2021, the intensification of conflict in the northern areas and insecurity in the central areas of the country, especially in areas of Cabo Delgado, Sofala and Manica, triggered population displacements and caused the loss of livelihoods, including limited access to lands during the critical times for the harvest (IPC January 2021). As such, while the 2021 cereal outputs in central and southern provinces were estimated at around the five-year average, outputs in the northern provinces, particularly in Cabo Delgado, were expected to be lower than the five-year average. Nationally, the cereal output was estimated at near-average levels, despite the negative effects of weather hazards and the conflict on plantings and crop yields (FAO-GIEWS, June 2021).

In April, after an attack in Palma, around 31 000 people were estimated to be in hard-to-reach areas and 126 000 people were in only partially accessible areas (OCHA, April 2021). The conflict in Cabo Delgado also thwarted trade flows, thereby constraining food supplies – as of November 2021, maize grain prices in the Montepuez market were 20 percent above the previous year due to low supply (FEWS NET, December 2021).

✳️ Weather extremes

The 2020/2021 agricultural season was marked by the impact of drought in the far south and northeast areas, floods, as well as tropical storm Chalane, cyclone Eloise, and tropical depressions in the central and southern provinces (FEWS NET, February 2021). On 23 January 2021, tropical cyclone Eloise made landfall in Sofala province, affecting 396 000 people across Sofala, Manica and other neighbouring provinces. Damage to agricultural assets and crops (i.e. 465 000 hectares) were widespread ahead of the harvest and

adversely affected 675 000 people (INGD, February 2021). Affected areas were still recovering from the impact of cyclone Idai from 2019 and Chalane in December 2020 (FEWS NET, February 2021). In addition, around 105 000 hectares of crops were impacted by dry spells and erratic rains across Maputo, Gaza, Inhambane, Manica, Tete, Nampula and Cabo Delgado provinces (FEWS NET, June 2021) – the latter two registering localized production shortfalls as a result.

Overall during the 2020/2021 season, around 72 percent of surveyed agricultural households reported facing difficulties in producing crops, mostly due to dry spells and drought, outbreaks of pests and diseases, heavy rains and floods, difficulties in accessing seeds, and challenges linked to the COVID-19-related restriction measures (FAO, March 2021).

🏠 Economic shocks, including COVID-19

As a result of COVID-19 related restrictions, work opportunities and incomes significantly decreased for daily workers of small businesses, while a decline in remittances was also reported, negatively affecting purchasing power and access to food for urban and peri-urban households in particular (IPC, January 2021).

Some measures to control the COVID-19 pandemic were reintroduced in the January-May 2021 period, but were scaled back in June (FAO-GIEWS, June 2021). However, the adverse impact on household access to food persisted. More than one-third of households lost at least one income source in the cities of Maputo, Matola, Tete and Beira due to the socioeconomic effects of COVID-19 restrictions (IPC, January 2021). In particular, economic migration to South Africa became increasingly difficult, following increased border controls and many people being deported back to their country of origin (FEWS NET, August 2021).

At the same time, the reduction in informal cross-border trade led to an increase in the prices of imported products from South Africa (FEWS NET, February 2021). As of April, the annual food inflation rate was estimated at 11 percent, partly driven by the depreciation of the national currency throughout 2020 and early 2021 (FAO-GIEWS, June 2021).



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The ongoing violence in northern Mozambique has resulted in widespread displacement, loss of lives, destruction of infrastructure and disruption of humanitarian assistance to the most vulnerable people in central and northern districts of Cabo Delgado province.

Displacement 2021

IDPs

↗ **0.95M** IDPs

Source: IOM DTM Mozambique, December 2021.

Ongoing conflict and insecurity were the main displacement drivers in northern Mozambique while in central Mozambique, notable drivers included the lasting damages incurred by the 2019 tropical cyclones and flooding that occurred during 2019–2020. As of September 2021, nearly 109 300 IDPs were identified in the central provinces of Manica and Sofala (IOM DTM, September 2021a), most of whom were displaced by Tropical Cyclone Idai in March 2019 (IOM, April 2021).

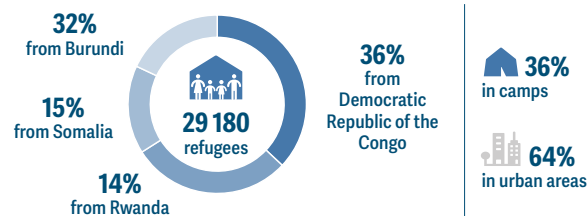
In Cabo Delgado, nearly 199 000 camp-based IDPs¹ were identified in October 2021 (IOM DTM, November 2021; IOM DTM, September 2021). From April–September 2021, around 128 000 IDPs in Cabo Delgado were projected to face Crisis or worse (IPC Phase 3 or above), with all groups classified in Crisis (IPC Phase 3), excluding the Balama IDP group in Stressed (IPC Phase 2). During October 2021–February 2022, the number of IDPs facing Crisis or worse (IPC Phase 3 or above) was projected to increase to approximately 197 000. In the absence of emergency food assistance, 44 000 IDPs in Metuge district were projected to face Emergency (IPC Phase 4) (IPC, June 2021).

¹ Reported figures do not include displaced individuals living in host community settings, estimated at around 642 400 in Cabo Delgado. For more information, see: <https://dtm.iom.int/reports/northern-mozambique-crisis-%E2%80%93-population-count-update-7-13-17-december-2021>

Refugees and asylum seekers

FIG 3.33

Mozambique hosts over 25 000 refugees and asylum seekers, with many facing protracted displacement



Source: UNHCR, January 2022.

By the end of 2021, Mozambique hosted over 29 000 refugees and asylum seekers (UNHCR, 2022). More than half (53 percent) lived in the Maputo area and other provinces across the country, about 36 percent lived in Maratane settlement, while 11 percent lived in Nampula city.

Maratane settlement in Nampula province is the only official reception centre in the country and was established in 2001. The settlement hosted around 9 500 refugees and asylum seekers predominately from the Democratic Republic of Congo (63 percent) and Burundi (32 percent), with most living in the settlement for up to ten years. In October 2021, 6 percent of households in the settlement had poor food consumption and 38 percent borderline food consumption (WFP, October 2021).

Humanitarian assistance

Refugees are heavily reliant on humanitarian food assistance, which was reduced due to funding shortfalls, with the majority of the population receiving only 35 percent of a ration and the most vulnerable receiving 70 percent (UNHCR/WFP, October 2021).

Additional drivers of acute food insecurity and malnutrition for displaced people

The majority of displaced people lost their livelihoods, including in conflict-affected areas of Cabo Delgado where most IDPs lost access to lands at a critical time for harvesting (IPC, June 2021).

In Cabo Delgado, IDPs are reportedly mainly living in relocation sites, transit centres and host community extensions, with 36 percent of them living in emergency shelters. IDPs had access to farming lands in around a third of the sites, while in 45 percent of them, no households reported working on the land (IOM, September 2021).

Fuel shortages affected around half of the sites, and in 22 percent, households reported skipping meals or reducing portion sizes as a coping strategy to access it. Around 88 percent of sites reported receiving food distributions in the month prior to the assessment (IOM, September 2021).

In Balama site, around 92 percent of IDP families did not have access to land, 97 percent lacked food and 91 percent struggled to access income-generating activities (IOM, October 2021).

In central Mozambique, a high proportion of the IDP population lived in emergency shelters (61 percent in Manica; 35 percent in Sofala) (IOM, September 2021).

Among refugees, agriculture is the main livelihood option for 44 percent of the population, followed by casual labour (19 percent). Limited agricultural inputs, limited land access, lack of employment opportunities, and lack of capital are among the key livelihood challenges flagged among the refugee community. Around 58 percent of households claimed lack of agricultural inputs and limited land access. High food prices also adversely impacted access to food (UNHCR/WFP, October 2021).

Key nutrition challenges



74 700 children under 5 years were **wasted** in February 2021–January 2022

27 400 of them were **severely wasted**



22 100 pregnant and lactating women were **acutely malnourished**

Source: Mozambique IPC AMN, June 2021.

In 16 areas analysed in the province of Cabo Delgado, the acute malnutrition situation was expected to deteriorate throughout 2021. Nearly 75 000 children under the age of 5 were wasted, 27 000 of them severely so. In Mecúfi, the prevalence of child wasting exceeded the 'very high' (>15 percent) threshold at 18.4 percent (IPC AMN, June 2021).

One in every two children under five in Cabo Delgado is stunted, with stunting prevalence ranging from 31 percent (in Ibo district) to 58 percent (in Palma) (UNICEF, April 2021).

Key drivers

+ Health services and household environment

Conflict in Cabo Delgado led to the destruction of sanitary infrastructures and disruption of health systems and services. The number of functioning health centres reduced by around 50 percent (IPC AMN, June 2021).

Poor access to potable water sources and improved sanitary systems, high morbidity rates, lack of access to nutrition treatment, and high illiteracy among women also contributed to acute malnutrition among children. The rainy season also tends to have a negative impact on water and sanitary conditions, increasing the likelihood of diarrhoea and other infectious diseases such as malaria (IPC AMN, June 2021). As of 23 February 2021, 2 551 cases of cholera were recorded in northern Mozambique, with 14 deaths. Cholera and diarrhoea outbreaks were also reported in Nampula, where IDPs were hosted (FEWS NET, February 2021).

🍽️ Caring and feeding practices

Almost all children aged 6–23 months did not have a minimum of three meals per day, nor did they consume five food groups in their daily meals (IPC AMN, June 2021).

The percentage of children aged 6–23 months having access to Minimum Dietary Diversity in eight districts of Cabo Delgado ranged from 32.1 percent in Metuge indicating Serious (IPC AMN Phase 3) levels to 3.2 percent in Ancuabe, indicating Extremely Critical (IPC AMN Phase 5) levels. Access to Minimum Acceptable Diets was estimated at its lowest levels in Metuge (3.8 percent), indicating Extremely Critical (IPC AMN Phase 5) levels (SMART 2021).

During the lean season, as demand for labour increases to prepare crop fields for planting, childcare provided by parents becomes more limited (IPC AMN, June 2021).

🏠 Food security and access to healthy diets

High levels of acute food insecurity in the region also contribute to the low quality and quantity of food consumed by children. During the October 2021–January 2022 period, deterioration in nutrition conditions are likely due to the exhaustion of food stocks during the lean season and increased acute food insecurity (IPC AMN, June 2021). Most of Cabo Delgado was classified in Crisis (IPC Phase 3) levels of acute food insecurity in 2021, and was projected to remain in this phase until at least September 2022 – except in some southern districts.

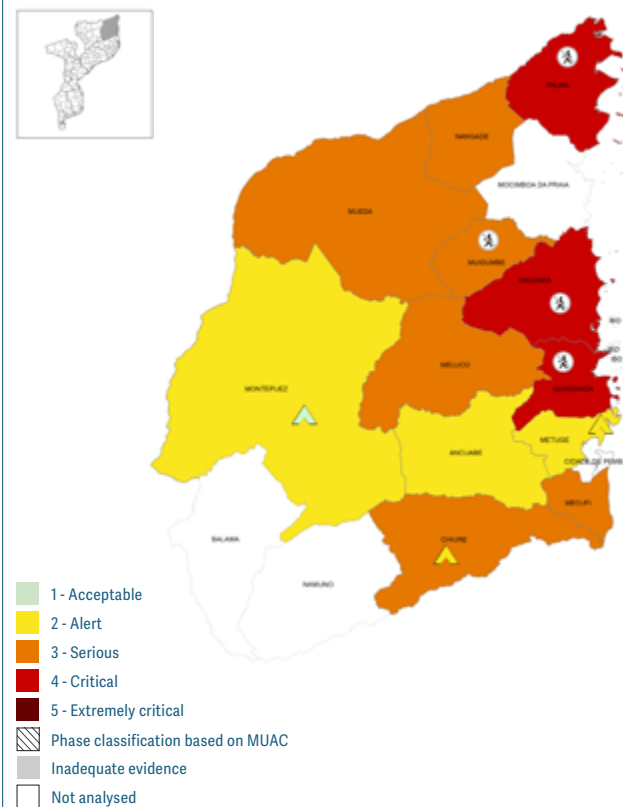
At the same time, nutrition deteriorated throughout 2021 with acute malnutrition on Alert (IPC AMN Phase 2) levels across most of the region in February–March 2021, reaching Serious (IPC AMN Phase 3) by January 2022 (IPC AMN, June 2021).

In particular, three districts – Palma, Macomia and Quissanga – were projected in Critical levels (IPC AMN Phase 4) of acute malnutrition from October 2021–January 2022. These three districts were also expected to have 80–85 percent of their population facing Crisis or worse (IPC Phase 3 or above) acute food insecurity levels in November 2021–March 2022 (IPC AMN, December 2021).

MAP 3.46

IPC acute malnutrition situation, October 2021–January 2022

During the peak of the October 2021–January 2022 lean season, three districts – Palma, Macomia and Quissanga, all with limited or no humanitarian access – were projected to face Critical (IPC AMN Phase 4), while six districts were in Serious (IPC AMN Phase 3).



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

Source: Mozambique IPC AMN Technical Working Group, June 2021.

Acute food insecurity forecast, 2022

 **1.86M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in November 2021–March 2022

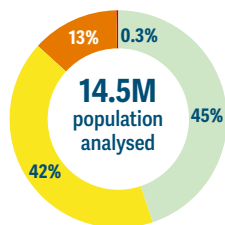
 **1.82M people**
in Crisis
(IPC Phase 3)

 **0.039M people**
in Emergency
(IPC Phase 4)


 The situation is expected to slightly improve in most of the country, except in conflict-affected Cabo Delgado. During the April–September 2022 post-harvest period, the number of people in Crisis or worse (IPC Phase 3 or above) is projected to decline to 1.4 million.

13% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



 **6.15M people** were forecast to be in Stressed (IPC Phase 2)

 The population coverage and geographical coverage of the analysis differs to that of January 2021. The December 2021 analysis covered 64 districts, of which ten were provincial capital cities, four were urban districts of Maputo, and 50 were rural districts, comprising **47%** of the total country population, or **14.5 million** people.

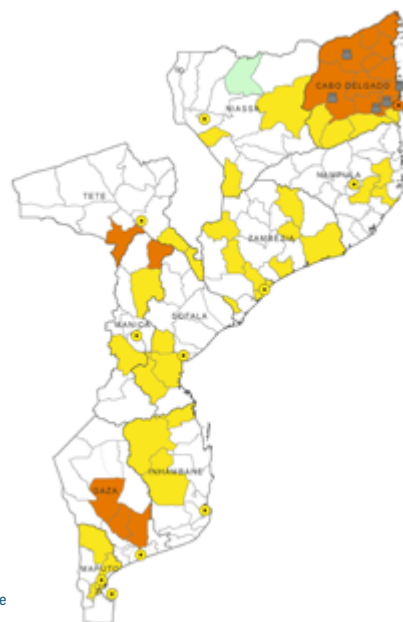
Source: IPC, December 2021.


MAP 3.47

IPC acute food insecurity situation, November 2021–March 2022

Cabo Delgado, Manica, Tete and Gaza have districts in Crisis (IPC Phase 3). Around 50 percent of the population in Crisis or worse (IPC Phase 3 or above) is in Cabo Delgado.

Among urban areas, 55 percent of Pemba's population is in Crisis (IPC Phase 3) due to conflict. All other urban areas are in Stressed (IPC Phase 2).



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed
- Urban settlement classification
-  At least 25% of households meet over 50% of caloric needs from humanitarian food assistance

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

Source: Mozambique IPC Technical Working Group, December 2021.

Conflict in Cabo Delgado, erratic and below-average rainfall in some areas as well as floods in others, and COVID-19-related economic shocks are driving this food crisis.

Conflict/insecurity

In Cabo Delgado, food availability and access will be limited by poor engagement in the 2021/2022 agricultural season resulting from conflict and restricted humanitarian access. Displaced populations seeking refuge in more secure areas will put increased pressure on work opportunities and limited food stocks (FEWS NET, December 2021). Insecurity is expected to be concentrated along the main commercial and communication axes and in remote rural areas. No large-scale returns of IDPs are expected before September 2022 (IPC, December 2021). Increased violence in late 2021 triggered new displacements from areas bordering the United Republic of Tanzania and Niassa province (FEWS NET, December 2021).

Weather extremes

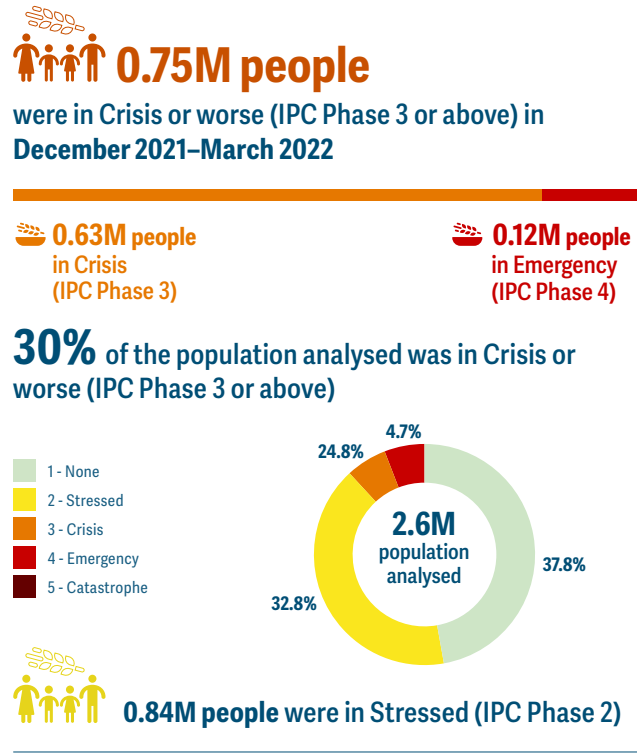
Below-average rainfall across most areas from October 2021–January 2022, coupled with high temperatures and low soil moisture values, caused poor vegetation conditions in cropped areas. Crop production in 2022 is expected to suffer, with plantings delayed. In Inhambane, northern Gaza and central Mozambique, the start of the rainy season was delayed by 20–30 days (FEWS NET, December 2021). The risk of floods remains likely in 2022, particularly in the coastal and riverine areas of Maputo, Sofala and Zambézia (IPC, December 2021). Tropical storm Ana made landfall on 24 January and caused significant damage and loss of lives in Zambezia, Nampula and Tete provinces, and to a lesser extent Sofala, Niassa and Cabo Delgado provinces. Over 126 000 people were affected (OCHA, January 2022), and over 42 400 hectares of cropland inundated (FAO, February 2022). The arrival of tropical storm Dumako and cyclone Combe in February and March exacerbated the situation.

Economic shocks, including COVID-19

Economic activity and household incomes are not expected to improve significantly until at least September 2022 (IPC, December 2021).

Namibia

Acute food insecurity overview 2021



The analysis covers **100%** of the country's total population of **2.6 million** people.

Source: IPC, December 2021.

National population, 2020

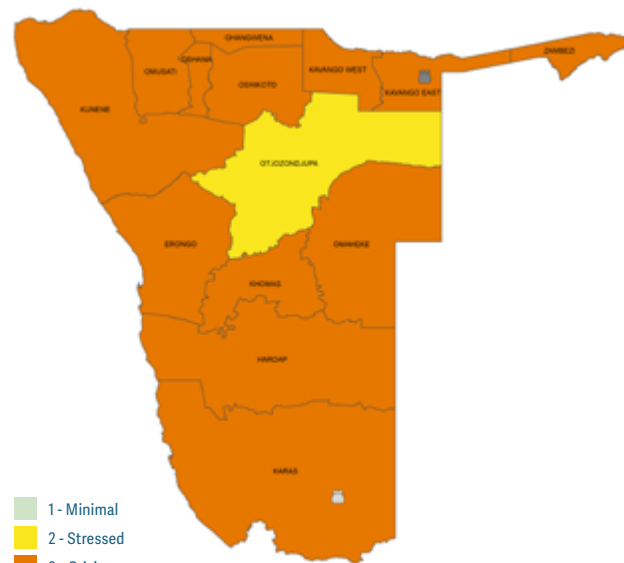


Source: WB 2020.

MAP 3.48

IPC acute food insecurity situation, December 2021–March 2022

All regions were classified in Crisis (IPC Phase 3), excluding Otjozondjupa, which was in Stressed (IPC Phase 2). In the regions of Kavango East and Ohangwena, 50 percent of the population was in Crisis or worse (IPC Phase 3 or above) (IPC, December 2021).



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

Source: Namibia IPC Technical Working Group, December 2021.

Acute food insecurity trends

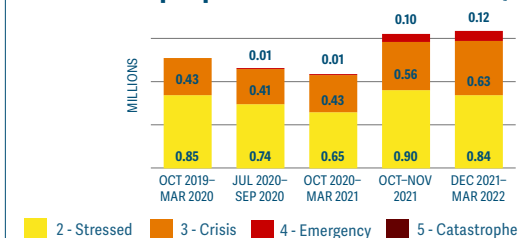
Numbers have risen since 2020. In 2021, Namibia qualified as a major food crisis in the GRFC for the first time, as the number of people in Crisis or worse (IPC Phase 3 or above) rose from 441 000 (20 percent of the population analysed) during the October 2020–March 2021 lean season to around 750 000 (30 percent of the population analysed) by the following lean season during December 2021–March 2022 (IPC, September 2020 and December 2021).

Relatively few (14 300) people were in Emergency (IPC Phase 4) from October 2020–March 2021, all in Kunene and Omaheke regions. However, by December 2021, ten out of the 14 regions had populations in Emergency (IPC Phase 4), totalling nearly 119 000 people, or 5 percent of the population. The numbers of people in Emergency (IPC Phase 4) were highest in Khomas, but the highest shares of the population in this phase were in Kavango East and Ohangwena (50 percent) (IPC, December 2021).

The number of people in Crisis or worse (IPC Phase 3 or above) in late 2021 exceeded the period October 2019–March 2020, when 430 000 people were in Crisis due to drought (IPC, January 2020).

FIG 3.34

Numbers of people in IPC Phase 2 or above, 2019–2022



Bars refer to comparable analysis periods only (see Technical Notes). In October 2020–March 2021, the province of Erongo was not analysed.

Source: Namibia IPC Technical Working Group.

Drivers of the food crisis in Namibia in 2021

Food insecurity in 2021 was driven by a slow recovery from the 2019 nationwide drought, rainfall deficits and drought in 2021, food price increases and the impact of COVID-19 restrictive measures on supply chains and livelihoods.

Economic shocks, including COVID-19

Prices of maize meal generally increased in the first quarter of 2021, reflecting seasonally tight supplies ahead of the cereal harvest and costlier imports due to increased prices in South Africa, the country's main grain supplier (FAO-GIEWS, April 2021). Namibia depends on food imports to meet 60 percent of the national food requirements, while 80 percent of the population depends on markets to meet their food needs, rendering households vulnerable to food price fluctuations (WFP, December 2021). Maize prices were then comparatively stable and dipped at the end of the year amid the ample supply conditions, but prices of wheat and bread continued to rise in December largely triggered by high international prices (FAO, February 2022).

Rising food prices were also the result of COVID-19 restrictive measures, which disrupted food and non-food supply chains (OCHA, December 2021).

The annual inflation rate for December 2021 stood at 4.5 percent, up from 2.4 percent in December 2020 mainly driven by increases in transport and food and non-alcoholic beverages (Namibia Statistics Agency, December 2021). Pandemic containment measures contributed to high unemployment and loss of income for most businesses, including in the tourism sector (IPC, December 2021).

Weather extremes

In 2021, most regions had yet to fully recover from the economic impacts of the 2019 nationwide drought, during which over 60 000 livestock died, with northwestern and southern provinces the most affected. Livestock herders were still re-stocking from losses in 2019. Some regions, such as Kunene, have experienced drought conditions for the past seven years (IPC, December 2021).

In the northwestern Kunene region and in the key producing northern Omusati region, below-average cumulative rainfall amounts also posed challenges to food production in early 2021. Crop lands exhibited stressed vegetation conditions and localized cereal production shortfalls occurred (FAO-GIEWS, April 2021).

However, cumulative rainfall amounts in most parts of the main cereal-producing north and northeastern regions in 2021 were favourable. The sown area to cereal crops was estimated near the five-year average, also supported by ample availabilities of seeds, machinery and labour (FAO-GIEWS, April 2021). Namibia recorded a total cereal harvest of 157 000 tonnes in 2021, 29 percent above the five-year average (SADC, October 2021).

In 2021, pasture conditions and water availability for livestock were generally satisfactory across most areas, except in the northwestern due to poor rains, which resulted in poor biomass conditions and difficult livelihood conditions for pastoralists (FAO-GIEWS, April 2021; JRC-ASAP, April 2021).

Wildfires in some areas and flash floods in others also destroyed crops and infrastructure (IPC, December 2021). By November, over 2.5 million hectares were destroyed by wildfires, including over 600 farms and large areas of communal land and protected areas. This contributed to the loss of considerable grazing areas and hundreds of heads of livestock (Farmers weekly, November 2021).

Crop pests

Infestations of African Migratory Locust (AML), Red Locust and Brown Locust remained a threat to crop and pasture production in 2021. Reports indicated that the number of AML swarms increased between January and April (FAO-GIEWS, April 2021) with more than 5 000 farming households heavily impacted (UN, May 2021). In April, a Brown Locust invasion reportedly destroyed crops and threatened pastures in Zambezi, Oshana, Omusati, Ohangwena, Oshikoto, and Kavango East and West (JRC-ASAP, April 2021).

Key nutrition challenges

There is insufficient up-to-date data to assess most recent nutrition challenges in Namibia.

According to the latest available data from 2013, over 18 percent of children under 5 years of age were stunted (JME, 2020). Around 25 percent of women aged 15–49 years are affected by anaemia (WHO, 2019).

Besides food insecurity, poor sanitation and limited access to safe supplies of drinking water are key drivers of child wasting in Namibia. Only 34 percent of the country's population has access to improved sanitation facilities, dropping to 14 percent in the country's rural areas. The practice of open defecation, which occurs in 77 percent of rural areas, increases the spread of diseases and majorly impacts general health. According to the most recent Namibian Population and Housing Census report, only 60 percent of rural households have access to clean water (Borgen Project, April 2020).

On 2 March 2022, the government declared an end to the four-year long Hepatitis E Virus (HEV) outbreak, which affected 13 of the 14 political regions mainly in informal settlements and areas with poor hygiene and sanitation. A cumulative total of 8 092 cases were reported nationally as of 30 January 2022 (WHO, March 2022).

There is insufficient data to assess the progress that Namibia has made towards achieving the exclusive breastfeeding target. The latest prevalence data shows that 48 percent of infants under 6 months are exclusively breastfed (UNICEF, 2020).

Around 12 percent of adults aged 15–49 years old are HIV positive in Namibia, contributing to the approximate figure of 210 000 children and adults living with HIV (UNAIDS, 2020).

The Niger

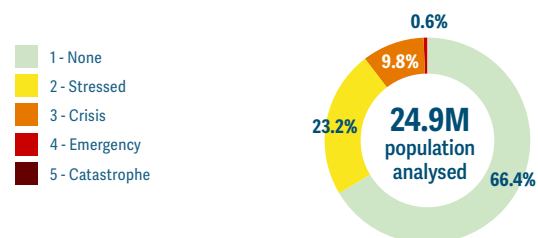
Acute food insecurity overview 2021

2.56M people were in Crisis or worse (CH Phase 3 or above) in October–December 2021

2.42M people in Crisis CH Phase 3

0.14M people in Emergency CH Phase 4

10% of the population analysed was in Crisis or worse (CH Phase 3 or above)



5.79M people were in Stressed (CH Phase 2)

The analysis covers **100%** of the total population of **24.9 million** people.

Source: CH, November 2021.

National population

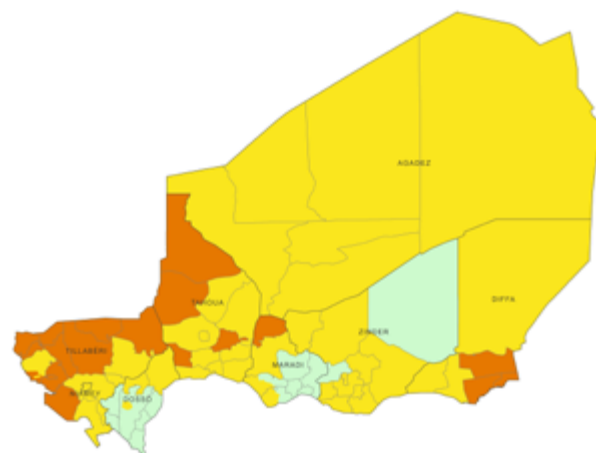


Source: WB 2020.

MAP 3.50

CH acute food insecurity situation, October–December 2021

Twenty departments were classified in Crisis (CH Phase 3). The highest numbers of people in Crisis or worse (CH Phase 3 or above) were in Tillabéri (0.9 million) and Tahoua (0.6 million). The prevalence was highest in Tillabéri (23 percent) and Diffa (20 percent).



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

Source: CH, November 2021.

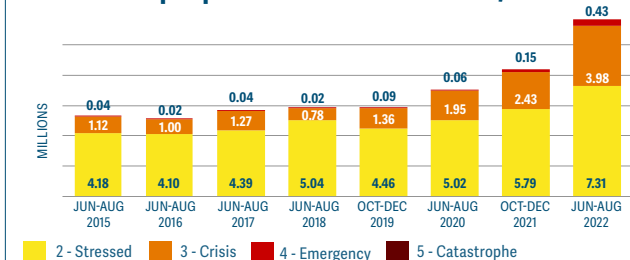
Acute food insecurity trends

Numbers have risen since 2020. At 2.56 million, the number of people in Crisis or worse (CH Phase 3 or above) from October–December 2021 was nearly 30 percent higher than the 2020 peak (2 million in June–August) and almost 80 percent higher than the 2019 peak in October–December (1.4 million). The growing numbers of people facing high levels of acute food insecurity are the result of escalating conflict-related violence, internal displacement, high food prices and worse-than-usual climatic conditions in 2021, in addition to cyclical floods and droughts and the socioeconomic impacts of COVID-19 (FAO-GIEWS, November 2021).

The October–December 2021 figures are the highest estimated by the CH in the Niger, even surpassing those of June–August 2014, when 2.2 million people were in Crisis or worse (CH Phase 3 or above) due to drought, flooding, violence, an influx of refugees, a cholera outbreak and high food prices during the lean season (OCHA, September 2014). It is also worth noting that in 2021, the number of Nigeriens in Crisis or worse (CH Phase 3 or above) were highest during the post-harvest season rather than during the traditional June–August lean season (CH, November 2021).

FIG 3.35

Numbers of people in CH Phase 2 or above, 2015–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2014 and 2022 are provided (see Appendix 1, table A12, page 254).

Source: CH.

Drivers of the food crisis in the Niger in 2021

Intensifying conflict-related violence, climate-related disasters, below-average crop production and socioeconomic decline drove a worsening food crisis in the Niger.

* Conflict/insecurity

In 2021, the security situation continued to be critical, particularly in the Liptako Gourma areas (the border areas between Burkina Faso, the Niger and Mali, affecting vast parts of the Tillabéri and Tahoua regions), parts of the Maradi region and the Lake Chad Basin (Diffa region), disrupting livelihoods and cross border trade (CH, December 2021). Since early 2021, the severity of inter-communal disputes and violent incidents increased compared to the previous year in the eastern Diffa and Zinder, central and south Maradi, and western Tahoua and Tillabéri regions (FAO-GIEWS, November 2021).

Protracted violence prevented many farmers, including IDPs, from accessing their fields and carrying out the agricultural activities that represent their primary source of livelihood (GHO 2022, December 2021). Insecurity also constrained the availability of inputs and labour, compelling many farmers to reduce the area of land under production and/or abandon their crops, which contributed to a reduced 2021 harvest (FAO-GIEWS, February 2022). Continued violence throughout 2021 continued to limit access to pastoral resources and curb households' migration of livestock to seasonal grazing areas. It also disrupted the delivery of humanitarian food assistance, particularly in the Tillabéri and Tahoua regions (FAO-GIEWS, February 2022).

* Weather extremes

The uneven temporal distribution of seasonal rains hampered the establishment and development of millet and sorghum crops across the main producing areas in the west and centre. The early cessation of rains in September negatively affected crops at critical flowering and grain-filling stages, resulting in a sharp decline of yields. Income from the sale of agricultural products and agricultural labour decreased as a result of the reduced harvest, weakening households' purchasing power (FEWS NET, October 2021).

In addition to the late onset of rains, the pastoral season suffered from long periods of drought in July and September 2021, which had a significant impact on the development of animal fodder, particularly in Tahoua, Zinder, Diffa and Maradi. Intense bushfires consumed more than 300 000 hectares of pasture, including more than 200 000 in the Tahoua region, resulting in the destruction of fodder crops (FEWS NET, October 2021).

* Economic shocks, including COVID-19

In 2021, COVID-19-related cross-border restrictions and export bans led to a slowdown in the flow of products from supply countries, including Benin, Burkina Faso and Nigeria, resulting in rising food prices in the Niger. In December 2021, prices of locally produced cereals were significantly higher than their year-earlier levels and the five-year average. Average prices of local sorghum and millet, the main staples, were about 25 percent higher than a year before, largely reflecting the effects of the reduced cereal output in 2021, increased transportation costs and the disruption of markets due to worsening security conditions (FAO-GIEWS, February 2022).

According to an FAO study carried out in June–August 2021, 66 percent of surveyed herders reported reduced herd size compared to the previous 12 months, mainly due to difficult access to veterinary services and inputs, leading many pastoralists to resort to distress livestock sales to access food (FAO, October 2021).

Reduced working hours, job losses, the restricted movement of goods and people, and the shutdown of activities in several sectors – all associated with COVID-19 – adversely affected household incomes in 2021. Already in 2020, these factors pushed an additional 400 000 people into extreme poverty, in a country where 41.7 percent of the population was already living on less than USD 1.90 per day (WB, July 2021).

* Crop pests and diseases

Crop production was also adversely affected by pest attacks, including stem borers, fall armyworm, true bugs and seed-eating birds, particularly in the Zinder, Maradi and Dosso regions (FEWS NET, October 2021).

Key nutrition challenges



1.6M children under 5 years were **wasted**
46 000 of them were **severely wasted**



650 000 pregnant and lactating women were **acutely malnourished**

Source: GNC Mid-Year Review, 2021.

The Niger faces multiple malnutrition burdens, including wasting, stunting, and micronutrient deficiencies across all ages.

The 2021 SMART survey reported a 'very high' national wasting prevalence in 2021 of 12.5 percent, barely changed from the previous year (12.7 percent). In Diffa, Maradi, Zinder and Tahoua the prevalence exceeded 12.5 percent. The national stunting prevalence is well above the 'very high' threshold of 30 percent at 43.5 percent, reaching 57.8 percent in Zinder (SMART, 2021).

The very high prevalence of stunting and wasting in infants and children under 5 years can in part be explained by critically low rates of exclusive breastfeeding up to 6 months at 28 percent, dropping to 14.8 percent in Dosso and Zinder. Only 19.5 percent of children aged 6–23 months receive the minimum acceptable diet (MAD). In four out of eight regions fewer than a quarter of children receive the MAD reaching just 3.6 percent in Dosso. Around half (46.8 percent) of women have an acceptable diet with the lowest prevalence in Dosso at 25 percent (SMART, 2021).

Access to health and nutrition services remains a significant challenge for many. In the region of Agadez over 31 percent of households do not have access to healthcare (HNO, February 2022).

Around half (47 percent) of the Niger's population has access to basic water services, and only 17 percent safely managed sanitation services. Child illness – mainly acute respiratory infections, malaria and diarrhoea – are common. Anaemia levels are a 'severe' public health concern with 72 percent of children anaemic, rising to 83 percent in Zinder. Around 59 percent of women of reproductive age are anaemic (SMART, 2021).

Displacement 2021

IDPs

Between August 2020 and 2021, there was a 55 percent increase in the number of IDPs in the Niger (UNHCR, August 2021).

 **265 000** IDPs

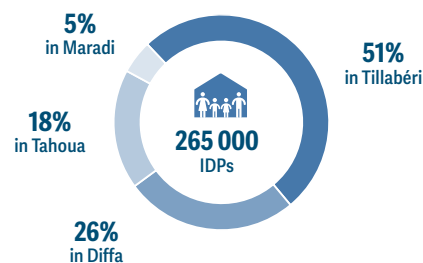
Source: HNO, February, 2022.

There has been a decline in the number of IDPs in the Diffa region due to the government of the Niger's organised return of IDPs to their places of origin in Baroua in the eastern part of the region (FEWS NET, September 2021). However, growing insecurity and insurgency prompted increased displacement in western Niger in recent months, with the number of IDPs in Tahoua and Tillabéri growing by nearly 60 percent between August 2020 and August 2021 (USAID, September 2021).

Due to the growing insecurity in the region of Maradi, the number of IDPs has also increased sharply and reached nearly 30 800 (IOM DTM, December 2021). In November 2021, incursions of Burkina Faso's armed groups into Nigerien territory caused additional internal displacements. Displaced communities have been stuck in inaccessible areas near the border (UNHCR, November 2021).

FIG 3.36


The majority of IDPs reside in regions with the highest prevalence of acute food insecurity, Tillabéri and Diffa



Source: HNO, February, 2022.

Refugees and asylum seekers

The number of refugees hosted in the Niger increased by 13 percent between the end of 2020 and 2021.

 **280 600** refugees and asylum seekers
67% are from Nigeria, **22%** from Mali, **4%** from Burkina Faso

Source: UNHCR, January, 2022.

Refugees mainly live in Ayorou, Abala, Ouallam and in several villages in the region of Tahoua, after the closure of the refugee hosting area (Intikane) as well as in the capital city of Niamey (UNHCR, August 2021).

Conflict in Burkina Faso has displaced over 11 420 Burkinabés into the Niger. As of November 2021, there were almost 235 211 forcibly displaced persons residing in the Diffa region, including 129 835 refugees. Most live in spontaneous settlements/sites or in host communities (UNHCR, November 2021).

During the lean season, between June and August 2021, WFP emergency food and nutrition assistance was provided to more than 637 000 refugees and IDPs in the regions of Diffa, Maradi, Tillabéri, Tahoua and Zinder. However, due to funding constraints, ration reductions remained in place, with WFP only able to cover 80 percent of the food ration for all crisis-affected beneficiaries (WFP, August 2021). In Tillabéri food was the need most often cited as a priority by the three population groups surveyed in 2021. The department of Abala (including non-displaced population) had the highest average scores on the hunger scale of the entire Tillabéri region, especially for refugees and IDPs (OCHA, September 2021).

The prevalence of wasting among refugee children ranges from 5–11 percent, with the highest prevalence in Abala and Ayerou refugee camps (11 percent). The prevalence of stunting was also high, at 33–48 percent. Anaemia affects 71–80 percent of refugee infants and young children under 5 years, and 35–72 percent of non-pregnant women (SMART, 2021).

Additional drivers of acute food insecurity and malnutrition for displaced people

The expansion and intensification of armed conflict and insecurity in the Sahel continues to provoke unprecedented levels of forced displacement and constrains movement, further disrupting access to livelihoods, transhumance, farming and trade. It continues to hamper humanitarian access to communities. In the Tahoua and Tillabéri regions in particular, the livelihoods of displaced people have been gravely affected by insecurity, including disruption of agricultural activities (UNHCR, August 2021, IOM, August 2021).

As a result of conflict and insecurity, WASH conditions are very poor in **refugee** and **displaced population** sites, especially in Ayorou in Tillabéri region (OCHA, September 2021). Displaced children face high levels of severe wasting requiring urgent treatment. Humanitarian agencies experience major challenges reaching displaced households with the critical multi-sectoral assistance and protection they need (UNICEF, 2021).


According to participatory assessments among forcibly displaced population groups in the Niger, priority needs include security and physical protection, education, livelihood activities, protection against gender-based violence (including survival sex) and other harmful practices, improvement in the quality of health care, protection against exploitation and abuse of children and access to WASH. For the Nigerian refugees, other pressing needs revolve around food, core relief items and freedom of movement linked to lack of documentation (UNHCR, 2022).

Acute food insecurity forecast, 2022

 **4.40M people**

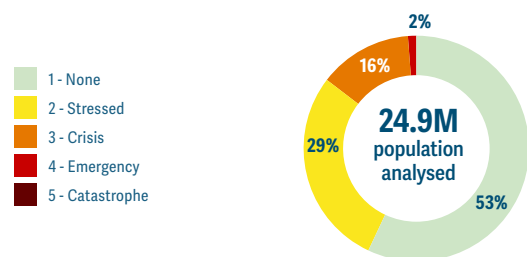
were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022

 **3.98M people**
in Crisis
(CH Phase 3)


 **0.43M people**
in Emergency
(CH Phase 4)

 The number of people in Crisis or worse (CH Phase 3 or above) is expected to reach unprecedentedly high levels during the 2022 lean season.

18% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)



 **7.31M people** were forecast to be in Stressed (CH Phase 2)

 The analysis covers **100%** of the total population of **24.9 million** people.

Source: CH, March 2022.

Given limited time between the release of the latest CH results and the publication of the GRFC, no projection map is provided for the Niger.

Increasing conflict and displacement, disrupted trade flows, low cereal stocks from the 2021 harvest and high food prices will drive a deteriorating food crisis during the 2022 lean season.

Conflict/insecurity

During the dry season from January–May 2022, violence and inter-communal conflicts are expected to increase until at least May 2022, causing further internal displacement. The country might not be able to meet its import requirements as trade flows are likely to be constrained by political instability and rising insecurity (FEWS NET, December 2021; FAO-GIEWS, February 2022). Cross-border transhumance of livestock will be less frequent in March–May due to insecurity and border closures. The high concentration of animals in secure areas will lead to early depletion of fodder, loss of condition (FEWS NET, October 2021) and early onset of the pastoral lean season (FAO-GIEWS, February 2022).

Weather extremes

Cereal production in 2021/2022 was nearly 40 percent below its year-earlier levels and the five-year average following the poor 2021 rainy season in combination with crop pest infestations and deterioration in security (FAO-GIEWS, February 2022; CH, March 2022). Early depletion of food stocks, high consumer prices and unfavourable terms of trade are projected to expose the most vulnerable households to unprecedented levels of acute food insecurity as per CH analyses (CH, March 2022).

Economic shocks, including COVID-19

Increasing demand from the state, traders and institutions, including NGOs, for the replenishment of stocks and humanitarian interventions, and from households due to the early depletion of their cereal stocks, are expected to push up prices by 5–10 percent a month until May 2022 (FEWS NET, December 2021). Economic growth is likely to be compromised by political instability in the subregion, amid the sanctions imposed on neighbouring Mali and Burkina Faso (FAO-GIEWS, February 2022). Residual impacts of COVID-19 restrictions also contributed to rising food prices and reduced incomes (CH, March 2022).



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The Niger is affected by desertification, land degradation and extreme weather. Multiple crises hit the country in 2020 and 2021, with COVID-19, droughts, unprecedented floods, rising criminality, aggravated cross-border security threats and inter-community conflicts.

Nigeria (21 states and Federal Capital Territory)

Acute food insecurity overview 2021

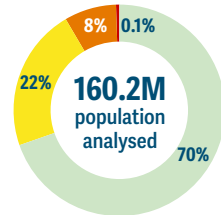
12.94M people were in Crisis or worse (CH Phase 3 or above) in October–December 2021

12.71M people in Crisis CH Phase 3

0.23M people in Emergency CH Phase 4

8% of the population was in Crisis or worse (CH Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the CH estimate (see *Technical Notes*).

35.0M people were in Stressed (CH Phase 2)

The analysis covers 21 states and the Federal Capital Territory (FCT) – **73%** of the total population of **219.5 million** people.¹

Source: CH, November 2021.

National population

48% Rural | **52% Urban**

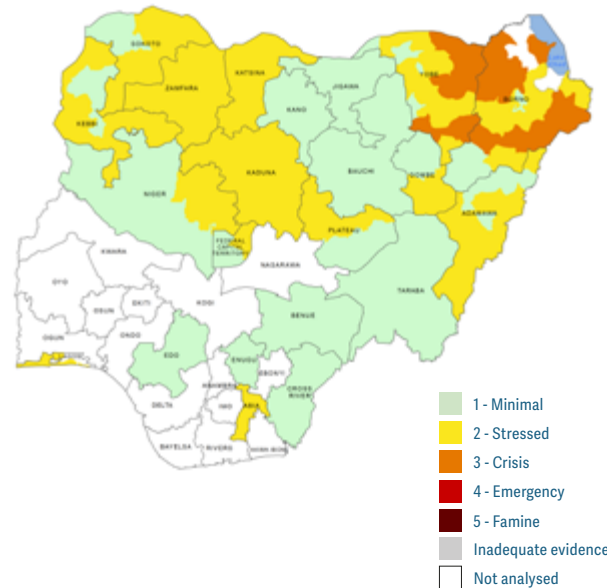
Source: WB 2020.

¹ This represents an increase in coverage relative to previous analyses, when about 50 percent of the Nigerian population was analysed. Three Local Government Areas (LGAs) in Borno state – i.e. Abadam, Guzamala and Marte – were not analysed during October–December 2021 due to insufficient data resulting from lack of access. The overall results of this analysis include those of 26 totally and partially inaccessible LGAs in Borno (21), Adamawa (three) and Yobe (two). Within this, eight LGAs, including seven in Borno (Bama, Dikwa, Gwoza, Kukawa, Nganzai, Konduga and Monguno) and one in Adamawa (Madagali), were analysed as either totally or partially inaccessible.

MAP 3.51

CH acute food insecurity situation, October–December 2021

Although no areas were classified in Emergency (CH Phase 4), 13 LGAs in Borno and Yobe states were in Crisis (CH Phase 3), with some areas having up to 60 percent of their population in Crisis or worse (CH Phase 3 or above).



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

Source: CH, November 2021.

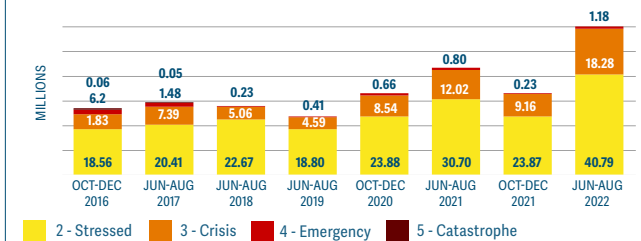
Acute food insecurity trends

Numbers have risen since 2020. When considering the same 16 states and FCT covered by CH analyses, the number of people in Crisis or worse (CH Phase 3 or above) has increased each year since 2019. In these areas, 12.8 million people were in Crisis or worse (CH Phase 3 or above) in June–August 2021, a 30 percent increase since the 2020 peak in October–December, with several areas classified in Emergency (CH Phase 4) in Borno and in Adamawa. Around 881 000 people in Crisis or worse (CH Phase 3 or above) were in inaccessible areas in three northeastern states (CH, March 2021).

In 2021, Nigeria faced sharply deteriorating insecurity compared to previous years, due to the persistent insurgency in the North East and spreading violence and insecurity in the North West and Middle Belt, on top of poor macroeconomic conditions and weather extremes. These factors, and increased geographical coverage, resulted in 12.94 million people in Crisis or worse (CH Phase 3 or above) in October–December 2021 (CH, November 2021).

FIG 3.37

Numbers of people in CH Phase 2 or above, 2016–2022 (16 states and FCT)



Bars refer to comparable analysis periods in 16 states and FCT except for those of October–December 2016 and June–August 2017, which do not cover the FCT. In October–December 2020 the state of Zamfara was not analysed. June–August 2021 also covers IDP populations. Datasets from all analysis rounds between 2015 and 2022 are provided (see *Appendix 1, table A13, page 255*).

Source: CH.

Drivers of the food crisis in Nigeria (21 states and FCT) in 2021

In 2021, the food security situation worsened, reflecting the impact of persistent conflict in the northeastern states, violence and population displacement in the northwestern and north-central states, against the backdrop of poor macroeconomic conditions, while weather extremes compounded food insecurity in localized areas.

✱ Conflict/insecurity

In the northeastern states, attacks by Non-State Armed Groups (NSAGs) continued to negatively affect households' livelihoods and food security. In the northwestern and north-central (Middle Belt) states, incidents of banditry, kidnapping and intercommunal conflict led to further population displacements and inhibited stable access to food for vulnerable populations (CH, December 2021).

High levels of conflict were reported in the North East (Borno, Adamawa and Yobe states), particularly during the lean season – June–August 2021 – further limiting agricultural activities, production, and access to incomes for farming households, and disrupting markets and trade flows during periods when households were most dependent on markets to access food (FEWS NET, June 2021). Insecurity hindered the distribution of humanitarian assistance to vulnerable populations in these areas (CH, March 2021).

In the North West and North Central states, bandits attacked several communities and routes in some LGAs and towns of Niger, Kaduna and Plateau states, disrupting livelihoods of the local population (FEWS NET, December 2021). The resulting high levels of displacement due to conflict, which incurred severe livelihood disruptions, significantly affected the harvest prospects for many households. Conflict also increased in southern states since late 2020, disrupting pastoralist and farming activities (FEWS NET, June 2021). Despite near-average crop production levels nationally (FAO-GIEWS, December 2021a), localized production shortfalls were reported in Abia, Lagos, Katsina, Benue, Kaduna, Niger and Taraba, mostly due to insecurity (CH, December 2021).

🏠 Economic shocks, including COVID-19

In 2021, Nigeria continued to face adverse economic conditions associated with COVID-19 and broader macroeconomic challenges, notably a weakening currency, foreign exchange shortages, and high inflation rates. Although COVID-19-related containment measures were mostly lifted or eased in 2021, some remained and continued to restrict households' access to farmlands, agricultural inputs and incomes (CH, March 2021). Prices of manufactured and imported products remained high as the Naira continued to depreciate (FEWS NET, December 2021). Inflation reached 16.9 percent in 2021 (IMF, 2022).

As a result of these factors, prices for staple foods were atypically high in 2021, which, coupled with the effects of livelihood disruptions from conflict and insecurity, resulted in lower-than-normal purchasing power for vulnerable households. In urban areas, at least 50 percent of households experienced either a reduction in their income or completely lost it as a result of the socioeconomic effects of COVID-19 (WFP, April 2021). Remittances were also reduced as a result of growing unemployment and a depreciated currency (FEWS NET, June 2021).

Due to the effects of COVID-19 containment measures, protracted conflict in northern parts and difficult macroeconomic conditions, food availability in markets and household food stocks were estimated to be below average during the lean season, especially in Borno, Adamawa, Yobe, Katsina, Sokoto and Zamfara (CH, March 2021). In August, prices of selected staple foods increased by 236 percent in Maiduguri (Borno) and 70 percent in Damaturu (Yobe) compared to the same period in 2020 (WFP, August 2021).

✱ Weather extremes

The 2021 rainy season had a normal end in October 2021 and rainfall seasonal totals overall were average to above-average across most areas. However, rainfall distribution was erratic in spatial and temporal terms throughout the season, with flooding and dry spells negatively affecting agricultural production and livelihoods



Newly arrived women and mothers in an IDP camp in Bama, Borno state in northeastern Nigeria where conflict is affecting the lives and livelihoods of millions of people.

particularly in northern Nigeria, including around the Lake Chad Basin, as well as central and southeastern areas (FEWS NET, October 2021, WFP, October 2021). This disrupted pastoralist movements, with cattle-rustling reported in northern and central states (FEWS NET, June 2021).

Flooding in some states, notably Bauchi, Benue, Cross-River, Edo, Jigawa, Kebbi, Niger, Yobe and FCT, destroyed thousands of hectares of cereal crops, affecting food production and resulting in below-normal household food stocks (CH, December 2021).

Displacement 2021

IDPs

The situation in northeastern Nigeria remains highly volatile – especially in Borno, Yobe and Adamawa states – leading to continuous displacement. The majority of the large IDP population reside in Borno state (75 percent).

2.2M IDPs in northeastern Nigeria – 60% in host communities and 40% in camp-like settings

2.0M IDP returnees

Source: IOM/DTM, December, 2021.

An additional 527 500 people were internally displaced in 2021. Conflict is the main driver of displacement for 93 percent of **IDPs and returnees** in northeastern Nigeria. More than half (56 percent) of them were displaced in 2015, 2016 and 2017. Around 4 percent were displaced by conflict and violence in 2021. While 46 percent of IDPs reported that they had been displaced once, a sizeable number of people have experienced multiple displacements, with 41 percent having been displaced twice, 10 percent three times and 3 percent four times or more. Multiple displacements were more frequent in the states of Adamawa, Yobe, Taraba and Gombe (IOM DTM, December 2021).

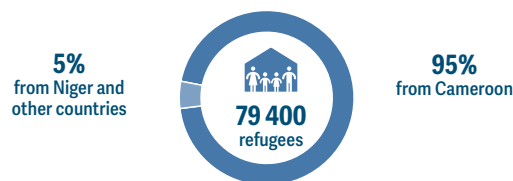
IDPs in areas inaccessible to humanitarian aid are generally the most vulnerable in Borno, Adamawa and Yobe states, with extremely high rates of acute malnutrition and mortality. Nearly 154 000 IDPs in Borno state were estimated to be in Crisis or worse (IPC Phase 3 or above) in October–December 2021 (CH, December 2021).

In 77 percent of assessed locations, food was the primary unmet need for IDPs. For IDPs in 23 percent of camp-like settings and 24 percent of host communities, food support was not available. In Taraba state, 70 percent of IDPs had no food support. In 68 percent of assessed locations, food distribution was reported as irregular and in 14 percent, it was only distributed once a month (IOM DTM, December 2021).

Refugees

FIG 3.38

The majority of refugees in Nigeria are fleeing conflict in the Northwest and Southwest regions of Cameroon



Source: UNHCR, January 2022.

The intensification of conflict in the English-speaking North West and South West regions of Cameroon in 2017 caused many to cross the border into Nigeria. The **refugee** influx decreased significantly in 2021, with just under 4 000 refugees arriving in January–July 2021. Around 45 000 live with host communities and nearly 30 000 in four refugee settlements (UNHCR, February 2022).

Food is the most urgent need, both for refugees in settlements and host communities. As a consequence of limited food and livelihood support, some refugees travel between Cameroon and Nigeria as they try to access food and economic opportunities. Water supply in settlements meets only 40 percent of needs and sanitation facilities are also insufficient. Many healthcare facilities lack medicines (UNHCR, September 2021).

Additional drivers of acute food insecurity and malnutrition for displaced people in Nigeria

While 16 percent of **IDPs** are reliant on food aid, more than half (53 percent) buy their food in markets. Livelihood opportunities are informal, low paid and insecure. In camp-like settings, IDPs tend to rely on petty trade (31 percent), daily wage labour (31 percent) or farming (26 percent). Around 44 percent have access to land for cultivation. Those living in host communities are more likely to rely on farming (62 percent), followed by daily wage labour and petty trade. Returnees overwhelmingly return to farming (98 percent) (IOM DTM, December 2021).¹

Access to potable water for IDPs and returnees in certain areas remains a significant constraint, contributing to nutritional challenges associated with poor WASH conditions. While most surveyed IDP sites (95 percent in camp-like settings and 89 percent in host communities) had access to water, 30 percent of assessed locations in host communities in the state of Taraba did not have access to potable water (IOM DTM, December 2021).

In 64 percent of locations hosting returnees, returnees had no access to health services, severely constraining their health and nutritional outcomes. Lack of access to medical services was reported to be the highest in the state of Adamawa at 66 percent, followed by Borno at 64 percent and Yobe at 54 percent. This has incurred severe repercussions for nutritional outcomes, particularly against the backdrop of precarious living conditions such as limited access to water, high prevalence of disease, and high levels of acute food insecurity.

Refugees in settlements face overstretched basic services and difficulty accessing markets (HNO, February 2022). Increased competition for assistance was expected to constrain food access and elevate malnutrition rates among refugees between February and September 2021 (FEWS NET, February 2021).

¹ Sectoral needs of IDPs were assessed on a site level across all locations in 709 camp-like settlements and 2 071 host communities.

Key nutrition challenges



1.74M children under 5 years were **wasted** in September–December 2021

614 000 of them were **severely wasted**



151 000 pregnant and lactating women were **acutely malnourished**

Source: Nigeria IPC Technical Working Group, December 2021.

From September–December 2021, many areas in northeastern Nigeria faced high levels of child wasting, with over 60 percent categorised as Serious (IPC AMN Phase 3) or Critical (IPC AMN Phase 4), a significant deterioration since the same period in 2020.

Seven Local Government Areas (LGAs) were in Critical (IPC AMN Phase 4) compared to eight the previous year, and 29 were in Serious (IPC AMN Phase 3) compared to 19 in 2020 (IPC AMN, December 2021).

Wasting levels were reportedly the highest in Yobe state (14.1 percent), with very high levels reported in Damaturu (14.5 percent) and Fune (14.7 percent) LGAs (both in Yobe). Stunting levels were particularly high in Yobe at 43 percent (IPC AMN, December 2021). According to the latest available data, in 2020, nationally 31.5 percent of children under 5 years were stunted, a 'very high' prevalence by WHO thresholds (JME, 2020).

Key drivers

Health services and household environment

Against the backdrop of the COVID-19 pandemic, poor health and WASH infrastructure aggravated already high levels of diseases among children, notably diarrhoea, cholera, malaria, measles and yellow fever. At the same time, access to health services remains limited, while COVID-19 worsened already limited nutrition and health outreach services (IPC AMN, December 2021).

The protracted humanitarian crisis in the northeastern regions has destroyed infrastructure and contributed to the collapse of basic social services. The lack of basic services across inaccessible areas, especially in Borno state, may result in a significant deterioration in nutrition status in 2022, forcing many to move to accessible areas in search of assistance. This may overwhelm existing aid assistance and services in receiving camps, causing widespread acute malnutrition. The limited coverage of Targeted Supplementary Feeding Programme services may result in many moderately malnourished children slipping into severe acute malnutrition, and overwhelm the current capacity of nutrition services (HNO, February 2022).

Food security and access to healthy diets

Many households face moderate to large food consumption gaps, while very poor food consumption patterns were reported within the analysed population, both in terms of diversity and frequency of meals. Limited access to safe and nutritious food, particularly due to high food prices, has also led to poor child-feeding practices (IPC AMN, December 2021).

The incidence of high levels of acute food insecurity and acute malnutrition largely overlap, with the highest concentration of both in the far north and northeastern LGAs, particularly in Borno, Adamawa and Yobe states. Further south, the incidence of both acute food insecurity and acute malnutrition declined compared to the previous year (IPC AMN, December 2021).

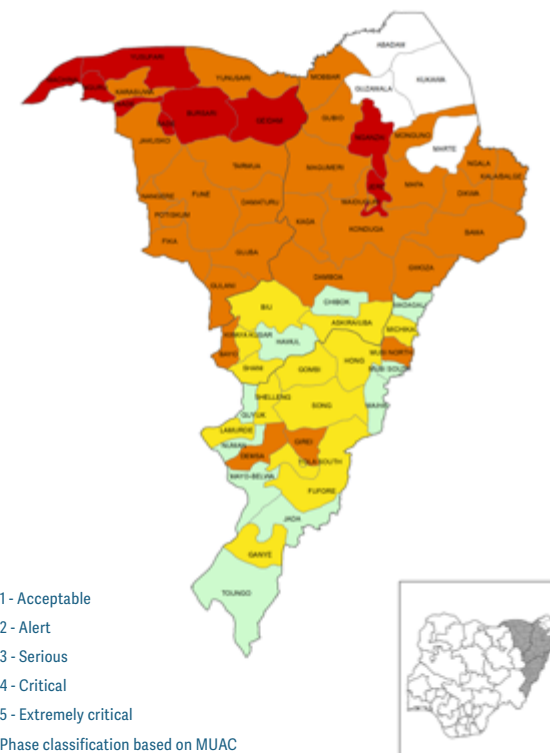
Caring and feeding practices

Limited access to farmland in garrison settlements and poor farming techniques are major causes of poor food consumption patterns, especially across host communities. The lack of adequate childcare for orphaned, abandoned and separated children is a major contributor to acute malnutrition (HNO, February 2022). Exclusive breastfeeding rates have not improved significantly over the past decade, with only 17 percent of babies being exclusively breastfed during their first 6 months of life. Just 18 percent of children aged 6–23 months are fed the minimum acceptable diet (UNICEF, 2022).

MAP 3.52

IPC acute malnutrition situation, September–December 2021

During September–December 2021, 8 LGAs were classified as Critical (IPC AMN Phase 4), 29 Serious (IPC AMN Phase 3), 14 Alert (IPC AMN Phase 2) and 10 Acceptable (IPC AMN Phase 1).



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

Source: Nigeria IPC AMN Technical Working Group, December 2021.

Acute food insecurity forecast, 2022

19.45M people

were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022

18.28M people
in Crisis
(CH Phase 3)

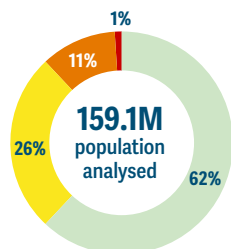
1.18M people
in Emergency
(CH Phase 4)

In the projected period (June–August 2022), the population in Crisis or worse (CH Phase 3 or above) is expected to increase by 50 percent compared to the 2021 peak.

Source: CH, March 2022.

12% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



40.79M people were forecast to be in Stressed (CH Phase 2)

The analysis covers 21 states and the Federal Capital Territory (FCT) – 72% of the total population of 219.5 million people.¹

Source: CH, March 2022.

¹ 16 LGAs, comprising 14 in Borno (Abadam, Askir/Uba, Bama, Damboa, Dikwa, Gubio, Gwoza, Kukawa, Nganzai, Konduga, Magumeri, Mafa, Marte, Monguno), one in Adamawa (Madagali) and one in Yobe (Gujba) were analysed as totally or partially inaccessible. However, some vulnerable populations in other inaccessible areas of Borno were not analysed due to inadequate sample size, which did not meet the minimum threshold required for special protocols.

Conflict is expected to continue exacerbating acute food insecurity in 2022 by disrupting livelihoods and markets and displacing large populations, despite a reported decline in attacks in late 2021. In the northeast, the LGAs of Gubio, Mobbar and Abadam are projected to be in Emergency (CH Phase 4) from June–August 2022.

Conflict/insecurity

In 2022, insecurity incidents, banditry and intercommunal violence are persisting in the northwestern and north-central areas, causing large population displacements and disrupting livelihood activities, notably by limiting household access to agricultural lands and inputs (CH, March 2022).

Although crop production is forecast at slightly above average levels nationally, localized shortfalls in the northeast, north central and northwest regions due to increased insecurity are expected (FAO-GIEWS, December 2021). Access to incomes in the northeast will likely be limited by the effects of the decade-long insurgency (FEWS NET, December 2021).

Economic shocks, including COVID-19

Although the currency exchange rate remained stable against increasing international oil prices, inflation will likely maintain prices of staple foods at high levels through May 2022, resulting in lower-than-normal household purchasing power (CH, November 2021; FEWS NET, December 2021).

High food prices, reflecting strong domestic demand, higher transport costs and market disruptions stemming from conflict and insecurity (FAO-GIEWS, February 2022) are likely to further limit purchasing power for vulnerable households when prices seasonally increase during the lean season, particularly in inaccessible areas (CH, March 2022).

Weather extremes

Vulnerable households are expected to deplete their food stocks and become more market reliant in early 2022 after torrential rains and dry spells in 2021 affected crop production in some areas of the country (FAO-GIEWS, December 2021).



Maimuna Bello, widow and mother of ten children, looks at food items in Yankaba Market in Kano. Many people in Nigeria are struggling to support their families due to high food prices.

Given limited time between the release of the latest CH results and the publication of the GRFC, no projection map is provided for Nigeria.

Pakistan

Acute food insecurity overview 2021

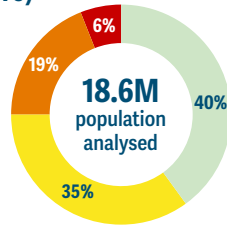
4.66M people were in Crisis or worse (IPC Phase 3 or above) in October 2021–March/April 2022¹

3.57M people in Crisis (IPC Phase 3)

1.09M people in Emergency (IPC Phase 4)

25% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



6.42M people were in Stressed (IPC Phase 2)

The analysis covers the rural populations of nine districts in Balochistan, seven newly merged districts in Khyber Pakhtunkwa and nine districts in Sindh, accounting for **9%** of the country's total population of **215.3 million** people.

Source: IPC, December 2021.

National population



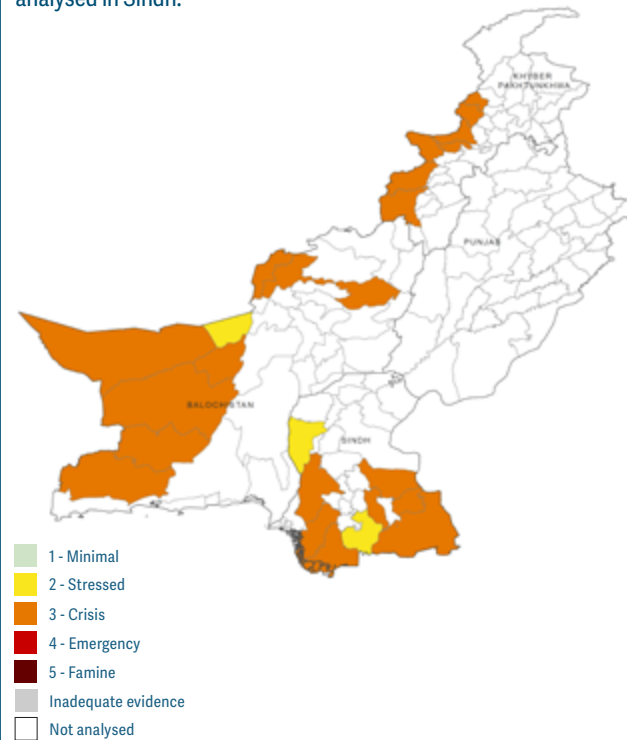
Source: WB 2020.

¹ Analyses covering Balochistan and Sindh provinces during October 2021 – March 2022 were merged with an analysis of Khyber Pakhtunkwa province during October 2021 – April 2022.

MAP 3.53

IPC acute food insecurity situation, October 2021–March/April 2022

Out of the 25 districts analysed in the three provinces, 22 were classified in Crisis (IPC Phase 3): eight out of nine analysed in Balochistan, all seven in Khyber Pakhtunkwa, and seven out of nine analysed in Sindh.



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

Source: Pakistan IPC Technical Working Group, December 2021.

Acute food insecurity trends

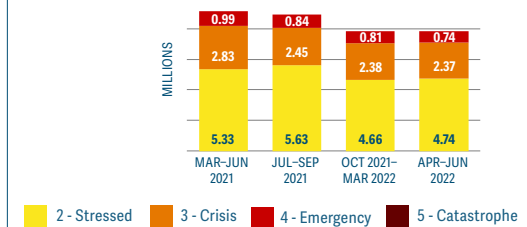
In **Balochistan**, when comparing the same nine districts analysed in 2019 and 2021, the number of people in Crisis or worse (IPC Phase 3 or above) decreased from 1.4 million (50 percent of the analysed population) to 0.9 million (25 percent) in October 2021–March 2022 (IPC, July 2019 and December 2021).

In **Sindh**, 2.3 million people were in Crisis or worse (IPC Phase 3 or above) in late 2021, an improvement since March–June 2021 (3.1 million). The percentage of the analysed population in Crisis or worse (IPC Phase 3 or above) in the six districts dropped from 53 percent in January–July 2019 to 23 percent in October 2021–March 2022, despite notable differences in areas/populations analysed (IPC, July 2019, April 2021 and December 2021).

In **Khyber Pakhtunkwa**, the situation has worsened since 2020. When comparing the same seven districts, the number of people in Crisis or worse (IPC Phase 3 or above) increased from 1.1 million in November 2019–May 2020 and June–August 2020 to 1.5 million during the October 2021–April 2022 lean season (IPC, May 2020 and December 2021).

FIG 3.39

Numbers of people in IPC Phase 2 or above, 2021–2022



The analyses released in July 2019 are not included due to smaller population coverage and lack of comparability; analyses covering Khyber Pakhtunkwa (conducted in January 2020 and October 2021) are not included as the periods covered differ from those of Sindh and Balochistan.

Source: Pakistan IPC Technical Working Group.

Drivers of the food crisis in Pakistan in 2021

Multiple shocks including high food and fuel prices, drought, livestock diseases and widespread loss of income-generating opportunities due to the impacts of COVID-19 drove high levels of acute food insecurity across Pakistan's Balochistan, Khyber Pakhtunkwa and Sindh provinces. Khyber Pakhtunkwa was yet to recover from the impacts of a decade of conflict.

Economic shocks, including COVID-19

In a household assessment conducted in July/August 2021, 81 percent of surveyed households in Khyber Pakhtunkwa and 65–70 percent in Balochistan and Sindh reported reduced income due to COVID-19-related lockdown/restrictions. The majority of households in all three provinces acquired new debts to meet basic needs during the three months preceding the assessment: 71 percent in Khyber Pakhtunkwa, 67 percent in Balochistan and 56 percent in Sindh (IPC, December 2021).

In all three provinces, inadequate cereal production at the household level heightened market dependency for food. At the same time, low incomes combined with high food and fuel prices weakened purchasing power (IPC, December 2021).

Conflict/insecurity

Following a decade of conflict and insecurity, 1.5 million Pakistani IDPs in Khyber Pakhtunkwa province bordering Afghanistan have returned to their homes in Pakistan. However, conditions in areas of return remained dire in 2021, with damaged infrastructure, including homes and water supply, limited health and education services, and few job opportunities (ECHO, September 2021).

Weather extremes

In 2021, moderate to severe drought conditions reduced crop and livestock production in Balochistan and Sindh. Balochistan experienced moderate to severe drought conditions from April to September 2021, while severe drought conditions were prevailing in eight out of nine districts of Sindh in June 2021, according to the

Pakistan Meteorological Department. In July/August 2021, around 56 percent of households in Balochistan and 30 percent in Sindh reported their household livelihood/income had been severely affected by drought (IPC, December 2021). By October 2021, drought conditions improved in Sindh due to persistent rains in previous months (IPC, December 2021).

In Khyber Pakhtunkwa, most of the analysed districts are dependent on rain-fed agriculture. However, inadequate monsoon and pre-monsoon rainfall in 2021 led to a decline in crop and livestock production. Lack of rainfall was cited as a primary contributor to lower production levels, with around one-third of farming households reporting reduced production for the main crop relative to the five-year average. Similarly, during the six months prior to the household assessment, between 27–47 percent of surveyed livestock holders experienced livestock deaths, largely due to limited availability of drinking water and fodder shortages (IPC, December 2021).

Due to weather-related shocks and other challenges to agricultural productivity, national food prices increased by 9 percent for rural consumers and 11 percent for urban between September 2020 and 2021. COVID-19 pandemic restrictions along with a major locust attack in 2020 exacerbated the situation (WB, November 2021).

In the three major markets surrounding the analysed districts in both Sindh and Khyber Pakhtunkwa, on average, the price of wheat flour rose by 20 percent between January and September 2021, and cooking oil/vegetable ghee by 29 percent (IPC, December 2021).

The overwhelming majority of livestock holders (87 percent in Balochistan and 60 percent in Sindh) reported livestock production difficulties in the three months preceding the July/August assessment because of reduced access to pasture/water, difficulty purchasing feed due to high prices or limited access to markets, difficulty accessing veterinary services and inputs, and livestock diseases. Most livestock holders experienced livestock deaths, while distress selling became commonplace in order to meet food and other needs, or due to limited availability of fodder (IPC, December 2021).



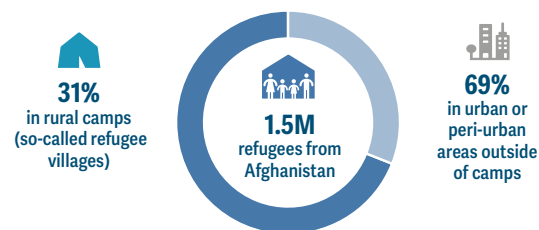
Nineteen-year-old Neelan and her husband live in Sindh with their seven-month-old daughter. They have been struggling to keep food on the table due to reduced income during the COVID-19 pandemic.

© WFP/RETESNA BASHIR

Displacement 2021

FIG 3.40

Between January 2021 and 2022, 106 000 Afghan refugees arrived in Pakistan



Source: UNHCR, August 2021 and January 2022.

Pakistan hosts a significant refugee population, having hosted Afghans for over 40 years.

Currently, it hosts at least 1.5 million registered Afghans, though additional unregistered populations likely reside in the country. Over the decades, significant movements of Afghans have occurred in both directions, but in the last three years, refugee returns have decreased significantly due to the political, security and economic situation in Afghanistan and the impact of COVID-19.

Several studies in 2022 aim to address major data gaps on Afghans in Pakistan. The finalization of the Documentation Renewal and Information Verification Exercise (DRIVE) will provide updated information on their socioeconomic circumstances, skillsets, level of education and sources of income (UNCHR, January 2022).

Additional drivers of acute food insecurity and malnutrition among refugees in Pakistan

The vast majority (81 percent) of the Afghan **refugees** are hosted in Balochistan and Khyber Pakhtunkhwa - provinces that have the highest multi-dimensional poverty levels in the country. According to the Pakistan Poverty Alleviation Fund, more than half of the refugees are in the category of extremely poor/ultra-poor (UNCHR, January 2022).

Pakistan allows refugees freedom of movement, as well as access to public services, and from 2019, the Government enabled refugees to open bank accounts. But their long-standing presence in Pakistan – as well as the severe socioeconomic impact of COVID-19 – has strained available resources, infrastructure and service delivery systems (UNCHR, January 2022).

Limited services for children with disabilities, mental health, and psychosocial support, most recently in relation to the impact of the COVID-19 pandemic, have been highlighted by the communities, with over 50 percent of children with disabilities having no access to schooling (UNCHR, January 2022).

Medical needs are high, particularly related to maternal, newborn and child health, as well as reproductive health, and access to adequate quality and equitable health care remains a major concern for the community (UNCHR, January 2022).

Despite the high degree of acceptance, Afghan refugees and Afghans of other status in Pakistan have several multi-faceted protection needs. These include the need for access to registration and documentation to enjoy basic rights, to facilitate access to services, and to mitigate the risk of arrest and detention (UNCHR, January 2022).

Around 54 percent of registered Afghan refugees in Pakistan are children and 22 percent are women. Violence against children and gender-based violence are largely under-reported, and access to justice for refugee girls and women is often impeded by the lack of family/community support. Intimate partner violence, child, early and forced marriage and denial of resources, services, and opportunities are prevalent (UNCHR, January 2022).

Gender inequalities result in lower levels of education, fewer work opportunities and lower levels of participation in decision-making processes and community-based planning. Children without documentation, including those whose births have not been registered, are also particularly vulnerable to trafficking and being detained and prosecuted as adults (UNCHR, January 2022).

Key nutrition challenges



636 000 children under 5 years were **wasted** in April 2021–February 2022 in Sindh province

126 000 of them were **severely wasted**



38 000 pregnant and lactating women were **acutely malnourished**

Source: Pakistan IPC AMN Technical Working Group, October 2021.

The high levels of child wasting (17.7 percent (SMART, 2021)) in nine analysed districts of Sindh province are a major public health problem that needs urgent attention and response.

Out of nine districts covered by the IPC AMN analysis, from April–November 2021, the situation was particularly severe in eight districts that were classified in Critical (IPC AMN Phase 4). Wasting in these eight provinces ranged from 15.2 to 26.4 percent. Only Larkana district was classified in Serious (IPC AMN Phase 3), though at 12.3 percent, the prevalence of wasting was close to Critical (IPC AMN Phase 4). In Tando Allah Yar and Tando Muhammed Khan districts, at least 5 percent of children under 5 years were severely wasted (IPC AMN, October 2021).

Umerkot district had the highest number of wasted children at 105 750, followed by Qambar Shahdadkot (95 420) and Shikarpur (70 471). Between April–November 2021 and December 2021–February 2022, the prevalence of wasting was expected to deteriorate in five out of nine districts–Matiari, Sujawal, Thatta, Umerkot and Shikarpur (IPC AMN, October 2021).

Key drivers



Food security and access to healthy diets

Inadequate quality and quantity of food linked to high levels of household food insecurity are contributors to child malnutrition. Deteriorating food consumption both in quality and quantity during the winter lean season, due to high food prices and limited livelihood activities was expected to make the situation even worse from December 2021–February 2022 (IPC AMN, October 2021).



Caring and feeding practices

Low exclusive breastfeeding (48.4 percent), high prevalence of early childbearing, high prevalence of low birth weight, and high prevalence of malnutrition among pregnant and lactating women are of concern in several districts. Anaemia (53.7 percent) and vitamin A deficiency among children of 6–59 months are at an alarming level (IPC AMN, October 2021).



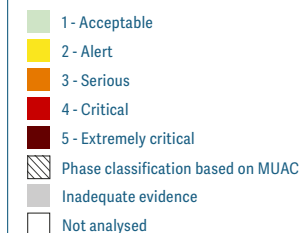
Health services and household environment

Poor hygiene practices and sanitation coverage, high rates of diarrhoea, acute respiratory infection (ARI) and fever as well as low prevalence of health-seeking behaviour underlie Sindh's malnutrition crisis. The drought conditions (severe and moderate) prevailing in June 2021 in four out of nine districts (Thatta, Umerkot, Sujawal and Larkana) were likely to have had adverse impacts on access to safe drinking water and sanitation. The prevalence of diseases such as malaria are expected to increase during the winter season (IPC AMN, October 2021).

MAP 3.54

IPC acute malnutrition situation, December 2021–February 2022

Of the nine districts analysed in Sindh, eight are classified in Critical (IPC AMN Phase 4) and one in Serious (IPC AMN Phase 3), though close to the Critical (IPC Phase 4) threshold during the December 2021–February 2022 winter/lean season.



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

Source: Pakistan IPC AMN Technical Working Group, October 2021.

Acute food insecurity forecast, 2022

 **4.69M people**

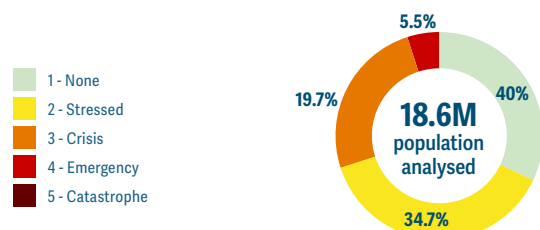
were forecast to be in Crisis or worse (IPC Phase 3 or above) in April/May–June 2022

 **3.66M people**
in Crisis
(IPC Phase 3)


 **1.03M people**
in Emergency
(IPC Phase 4)

 The number of people in Crisis or worse (IPC Phase 3 or above) is expected to increase slightly in Balochistan and Khyber Pakhtunkwa and decrease slightly in Sindh.

26% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **6.45M people** were forecast to be in Stressed (IPC Phase 2)

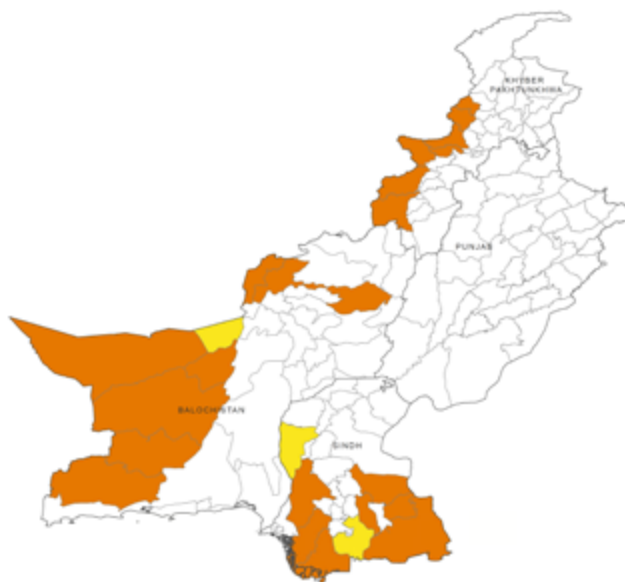
 The analysis covered Balochistan, Khyber Pakhtunkwa and Sindh provinces, home to **9%** of the country's total population of **215.3 million** people.

Source: IPC, December 2021

MAP 3.55

IPC acute food insecurity situation, April/May–June 2022

Across Balochistan, Khyber Pakhtunkwa and Sindh, 22 districts are projected to be in Crisis (IPC Phase 3) and three in Stressed (IPC Phase 2).



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

Source: Pakistan IPC Technical Working Group, December 2021.

High food and fuel prices will curtail the purchasing power of low-income households, while drought may affect wheat production in rain-fed areas of Balochistan and Sindh.

Economic shocks, including COVID-19

In early 2022, food access was expected to be constrained by high food, fuel and electricity costs, further eroding purchasing power, particularly among low-income groups, such as small-scale farmers, wage labourers and households relying on petty trades. A slight increase in labour opportunities during the harvest and planting period from April/May was expected to be short-lived (IPC, December 2021).

Weather extremes

Production of wheat, the country's main staple, will depend on rainfall performance until April/May 2022. The prevailing La Niña weather patterns tend to be associated with below-average rainfall in important wheat-producing areas of central and northern parts of Pakistan (FAO, December 2021). Farming households are expected to have some food stocks following the harvest of Rabi (winter) crops in April/May, although these are not expected to last long due to subsistence-level farming and the expected deficiency of winter rainfall (IPC, December 2021).

Conflict/insecurity

Although the security situation is stable in most districts of Balochistan, instability in a few districts, such as Kech, Panjgur and Killa Abdullah, might have adverse implications for food security. Khyber Pakhtunkwa is stable in most districts, but given its geographic situation and history, insecurity cannot be ruled out, which may result in a curfew-like situation and restriction of movement (IPC, December 2021). Any new influx of refugees fleeing instability in Afghanistan may directly affect the existing resources of local communities in districts bordering Afghanistan (UNHCR, February 2022).

Livestock diseases


Diseases such as Foot and Mouth will likely affect the health, production and sale of livestock (IPC, December 2021).

Palestine

Acute food insecurity overview 2021

 **1.78M people**¹

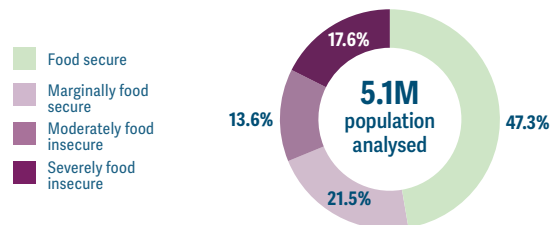
were moderately or severely food insecure in December 2020–January 2021

 **0.68M people** were moderately food insecure

 **1.1M people** were severely food insecure

Source: PCBS and Food Security Sector, Socioeconomic and Food Security Survey, 2020.

31.2% of households (64.4% in Gaza, 8.9% in the West Bank) were moderately or severely food insecure



The sample unit of SEFSec surveys is the household rather than individual level.

The analysis covered **100%** of Palestine's population of **5.1 million** (2.0 million in the Gaza Strip and 3.1 million in the West Bank).

West Bank population



Gaza Strip population



Source: PCBS and Food Security Sector, Socioeconomic and Food Security Survey, 2020.

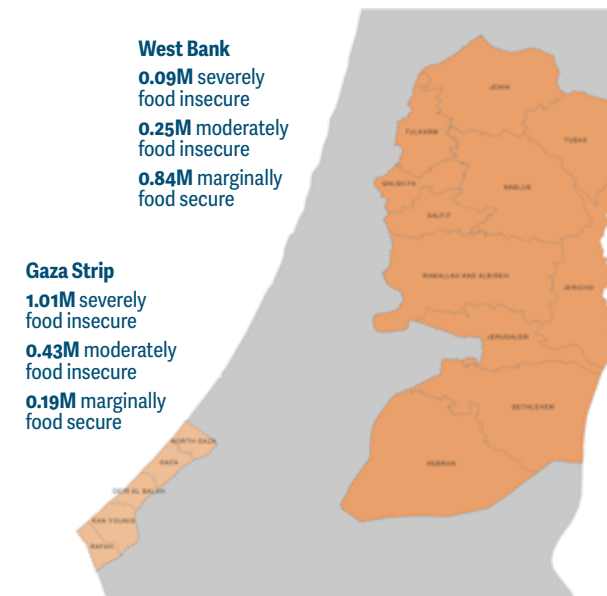
¹ Figures are based on the SEFSec methodology. Although the GRFC Food Security TWG validated the use of this analysis, it noted certain methodological limitations. See Technical Notes.

² The rural population in the Gaza Strip is grouped with the urban population for the analysis since only a marginal share of the population resides in rural areas which are virtually non-existent.

MAP 3.56

Acute food insecurity situation, December 2020–January 2021

Of the 1.8 million moderately or severely food insecure Palestinians, 1.4 million were in the Gaza Strip and 335 000 were in the West Bank. Over 90 percent of the 1.1 million severely food-insecure people were in the Gaza Strip.



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

Source: PCBS and Food Security Sector, Socioeconomic and Food Security Survey, 2020.

Acute food insecurity trends

Numbers have decreased slightly since 2020. The food security situation in Palestine has slightly improved since 2020, when 2 million people were food insecure due to the effects of COVID-19 containment measures, against the backdrop of years of conflict and economic hardship. However, figures remain high compared to 2018 and 2019, when around 1.7 million Palestinians (32.5 percent of the population) were food insecure. Between 2018 and January 2021 in Gaza, the percentage of households that were moderately to severely food insecure increased from 60 percent to more than 64 percent. While the percentage of moderately food-insecure Gazan households remained almost the same, the percentage of severely food-insecure households increased from around 36 percent to 41 percent.

The greatest deterioration was in the Centre and South sub-regions of the Gaza Strip. In the Centre, the percentage of severely food insecure households increased from 33 percent in 2018 to 44 percent in early 2021, while in the South, it increased from 35 percent to 42 percent.

In the West Bank, the prevalence of food insecurity increased marginally from 8.1 percent in 2018 to 8.9 percent in early 2021. Food insecurity levels were higher in the southern sub-region (13.3 percent), where the tourism sector contracted dramatically due to COVID-19 travel restrictions and the unemployment rate increased (Palestinian Central Bureau of Statistics and Food Security Sector, December 2020).

The Socioeconomic and Food Security Survey from which the acute food insecurity estimates are drawn was conducted prior to the May 2021 escalation of hostilities in Gaza – which marked the most severe conflict escalation since 2014. The hostilities aggravated pre-existing vulnerabilities and increased already high poverty, food insecurity and unemployment rates (HNO, December 2021).

Drivers of the food crisis in Palestine in 2021

The COVID-19 pandemic compounded many of the existing vulnerabilities underlying food insecurity— particularly in Gaza – due to factors such as the Israeli blockade, an unemployment rate more than double that of the West Bank and a deepening financial and fiscal crisis within the Palestinian economy.

✳ Conflict/insecurity

In early 2021, although conflict-related violence was relatively low by comparison with previous years, acute food insecurity was still directly tied to the lingering effects of previous bouts of violence, restricted movement of people, restricted access to resources and basic social services, together with recurrent expropriation of land, settler violence and periodic armed hostilities (WFP, March 2021).

In the West Bank, the agriculture sector continued to suffer as a result of the demolition and destruction of productive assets and limited access to land and water resources. In the Gaza Strip, prolonged restrictions on trade and access to markets for imported inputs and exports, combined with repeated violent confrontations and persistent energy shortages, continue to limit agricultural production (FAO, March 2021).

Rising tensions in East Jerusalem from the beginning of Ramadan in mid-April 2021 were characterized by clashes and violent incidents (HNO, December 2021). After the May 2021 escalation of hostilities, half of Gaza respondents in the Multisectoral Needs Assessment reported that their livelihoods and assets were adversely affected, with 36 percent reporting that their typical monthly income decreased considerably (REACH, July 2021). The immediate humanitarian response was limited, causing households to exhaust their own resources and strategies to cope (ACAPS, September 2021).

Key steps to ending the long-standing intra-Palestinian divide between Fatah and Hamas failed to materialize in 2021, and parliamentary and presidential elections, agreed between the Palestinian political factions for May 2021, were indefinitely postponed (UNRWA, January 2022).

🏠 Economic shocks, including COVID-19

Even before the COVID-19 pandemic, the outlook for the Palestinian economy was poor with low growth levels, persistent fiscal deficits, high unemployment rates, and rising levels of poverty. COVID-19-related restrictions adversely impacted employment levels, particularly in tourism, restaurants, construction, and for Palestinians who work in Israel (WB, February 2021). In the first quarter of 2021, the unemployment rate in the Gaza Strip reached 48 percent compared to 17 percent in the West Bank (PCBS, January 2021).

Following a decline in the number of confirmed COVID-19 infection rates, lockdowns were eased in the first quarter of 2021 and the Palestinian economy started showing signs of recovery (WB, June 2021). Although the Palestinian economy was estimated to have grown by 5.4 percent in the first half of 2021, this improvement was completely driven by the West Bank economy, while Gaza's economy remained almost stagnant, largely due to the conflict in May (HNO, December 2021).

Despite the gradual economic recovery, in July 2021, 62 percent of surveyed households reported that their monthly income had decreased since the beginning of the pandemic as a result of COVID-19 containment measures (53 percent of households in the Gaza Strip and 68 percent in the West Bank). The majority (68 percent) reported an increase in debt as a result of COVID-19 restrictions (REACH, August 2021)

In addition, the intra-Palestinian divisions and the cessation of clearance revenues (import taxes collected by Israel on behalf of the Palestinian Authority) have resulted in the loss of 80 percent of income to the Palestinian Authority, reducing its capacity to pay public sector salaries, deliver services and maintain its social safety nets (WFP, July 2021).

While the COVID-19 pandemic has had a devastating effect on the socioeconomic situation of the entire population in Gaza and the West Bank, it has had the greatest impact on vulnerable refugee families. In 2021, 38.5 percent of Palestine refugee households in the



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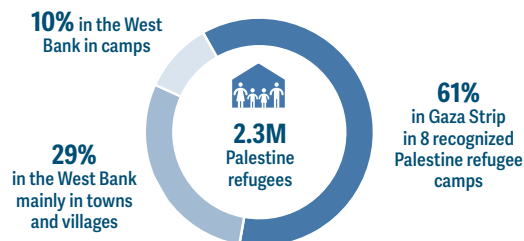
High unemployment rates, falling incomes due to COVID-19 restrictions and rising poverty levels have squeezed household purchasing power in the West Bank and the Gaza Strip.

West Bank reported family members losing their jobs permanently or temporarily as a result of the economic impact of COVID-19. The highest percentages were reported in East Jerusalem (50 percent), Areas A and B (43 percent) and Area C (34 percent). According to the same survey, nearly 76 percent of refugee households in the West Bank reported that their monthly income had decreased as a result of COVID-19 (REACH, August 2021).

Displacement 2021

FIG3.41

Around 72 percent of the population of the Gaza Strip and 27 percent of the West Bank are Palestine refugees



Source: UNRWA December 2021.

The number of Palestine refugees relying on UNRWA for food assistance increased from fewer than 80 000 in 2000 to more than 1 million by 2021 (UNRWA, December 2021).

In January 2021, around 48 percent of households headed by a refugee were food insecure compared with 17 percent of households headed by a non-refugee. Overall, 28 percent of refugee households were severely food insecure, versus around 9 percent of non-refugee households. Around 27 percent of refugees living in camps were severely food insecure, up from 22 percent in 2018.

These figures mask a considerable divergence in refugees' food security status between Gaza and the West Bank.

In Gaza, some 42 percent of refugee households were severely food insecure in January 2021, up from 34 percent in 2018. About 25 percent were moderately food insecure.

In the West Bank, just over 2 percent of refugee households were severely food insecure in January 2021 and round 11.5 percent were moderately food insecure. Over 16 percent of refugees in camps in the West Bank were food insecure, a clear deterioration since 2018 when the prevalence was around 8 percent (PCBS & FSS, January 2021).

Key nutrition challenges



1.3% of children under 5 years were **wasted**
0.6% of them were **severely wasted**

Source: MICS, 2019–2020.

Although wasting levels among children under 5 years are considered 'very low' by WHO thresholds, there has been an increase in stunting prevalence in children under 5 years old from 7.4 percent in 2014 to 8.7 percent in 2021 (MICS, 2019–2020).

Key drivers



Food security and access to healthy diets

Prior to the outbreak of COVID-19, 32 percent (1.6 million people) could not afford nutritious food. The socioeconomic repercussions of the pandemic have exacerbated already high levels of food insecurity.



Health services and household environment

Conflict, restricted access to trade and services, the COVID-19 pandemic and chronic electricity deficits all contribute to the poor availability of essential services, particularly health, water and sanitation.

In Gaza, over-extraction from the coastal aquifer, seawater intrusion and pollution have created a water crisis. Lack of access to clean water supplies affects over 90 percent of households, impacting health and general hygiene and causing more than a quarter of all childhood diseases (UNRWA 2022, December 2021). During the escalation of hostilities in Gaza in May 2021, 290 WASH facilities were damaged or destroyed, including wells, water pumping stations, and distribution networks, leaving some 1.3 million people in the Gaza Strip without access to adequate safe drinking water, sanitation facilities, and hygiene items (UNICEF, August 2021).

In the West Bank, 600 000 Palestinians are not connected to piped water services or are poorly supplied. Around 90 000 households across Gaza and the West Bank suffer from an acute lack of solid

waste collection services or are located in the vicinity of informal and unregulated dumping sites (HRP, December 2021).

COVID-19 restrictions and resources diverted to dealing with the pandemic have further undermined the delivery of essential healthcare services, including in maternal and child health and nutrition (HRP, December 2021). Health services were also overstretched and disrupted during and following the May 2021 escalation in Gaza, leaving an estimated 1.5 million people with limited access to primary healthcare, among them 700 000 children (UNICEF, 2022). The worst-damaged buildings were in Gaza governorate and North Gaza, where there is a high concentration of hospitals, clinics and doctors' offices (ACAPS, September 2021).

Pregnant women and new mothers in Gaza are reportedly at increased risk of being unable to access healthcare. A 2020 study by WFP and UNICEF reported that many pregnant and lactating women are particularly vulnerable due to a double burden of undernutrition and obesity, with 28 percent of lactating women in Gaza reportedly having depleted iron levels (WFP/UNICEF, August 2020).



Caring and feeding practices

In 2021, 43.3 percent of infants aged 0–5 months were exclusively breastfed, but 38.6 percent of neonates consumed other types of liquid other than breastmilk in the first three days of life. The national minimum dietary diversity (MDD) figure for children aged 6–23 months is 44.7 percent and 31.4 percent have a minimum acceptable diet (MAD) (MICS, 2021).

There is also a discernible difference between opposite ends of the economic spectrum regarding Minimum Diet Diversity (MDD). Among the more economically stable, 54 percent of children aged 6–23 months receive the MDD compared with 28 percent of those at the lower end of the scale. The figures for Minimum Acceptable Diet are similar: 37 percent compared with 17 percent (MICS, 2021).

Acute food insecurity forecast, 2022

The ongoing blockade of Gaza, potential escalations of hostilities, internal Palestinian divisions, and the possible tightening of restrictions, will continue to create major food access challenges throughout 2022.

✦ Conflict/insecurity

While the ceasefire has largely held, tensions in Gaza remain high, with a potential scenario for further conflict in 2022. Additional violence will likely contribute to forced displacement, denied access to livelihoods, inadequate access to essential services such as water and health care, and entrenched levels of food insecurity (HNO, December 2021).

While tensions in the West Bank, including East Jerusalem, have declined since May 2021, settlement expansion and settler violence, as well as demolitions and planned forced evictions, are expected to continue in 2022. Constraints continue to be imposed on the delivery of materials needed for humanitarian projects (HNO, December 2021).

🏠 Economic shocks, including COVID-19

Although the Israeli authorities have eased some of the restrictions imposed in May 2021, the blockade on Gaza remains in place, impeding the movement of people and goods in and out of Gaza and the implementation of infrastructure projects, and delaying economic recovery (HRP, December 2021).

Some form of COVID-19- related restrictive measures may remain in place in 2022, impeding the ability of impoverished Palestinian families to meet their basic food needs, particularly in the Gaza Strip.

Standards of living, economic growth and employment prospects continue to be undermined by limitations on Palestinian access to land. Access to agricultural land in areas behind the Barrier, or in the vicinity of settlements, continues to be limited (HRP, December 2021).



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Since 2007, Israel has maintained a fluctuating fishing zone for Palestinians as part of its maritime “buffer zone” policy, which has severely impacted the livelihoods of the fishing community in the Gaza Strip. Having closed the zone during the 11-day escalation in May 2021, Israel extended it to 15 nautical miles in September 2021.

Sierra Leone

Acute food insecurity overview 2021

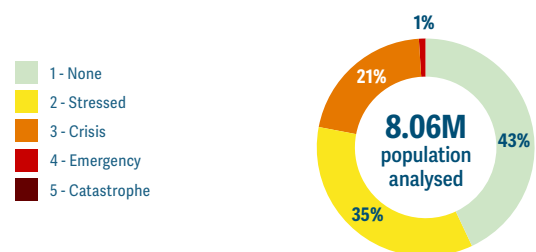
 **1.76M people**

were in Crisis or worse (CH Phase 3 or above) in June–August 2021

 **1.67M people** in Crisis CH Phase 3

 **0.09M people** in Emergency CH Phase 4

22% of the population was in Crisis or worse (CH Phase 3 or above)



 **2.83M people** were in Stressed (CH Phase 2)

The analysis covers **96%** of the total population of **8.4 million** people.

Source: CH, March 2021.

National population

 **57% Rural**

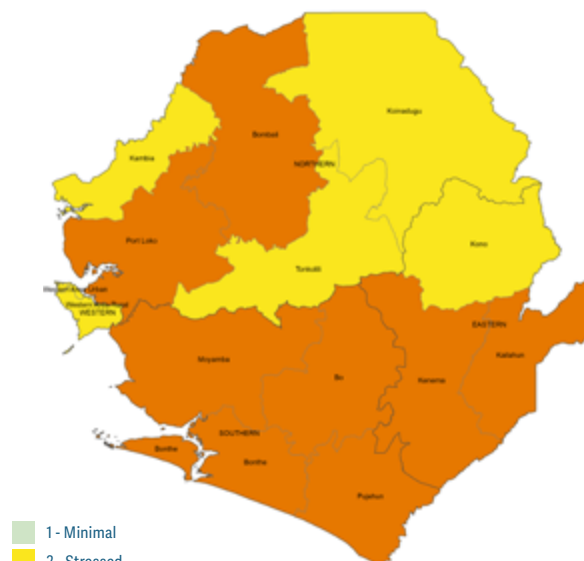
43% Urban 

Source: WB 2020.

MAP 3.57

CH acute food insecurity situation, June–August 2021

Eight districts – Kailahun, Kenema, Moyamba, Bonthe, Bombali, Bo, Pujehun and Port Loko – were in Crisis (CH Phase 3) and the remaining six were in Stressed (CH Phase 2).



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

Source: CH, March 2021.

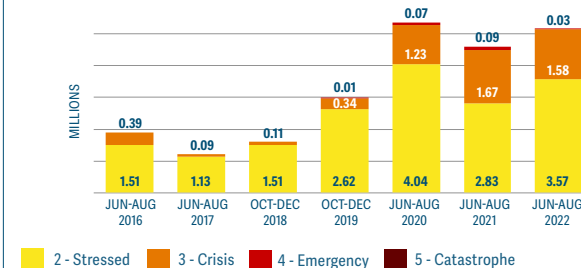
Acute food insecurity trends

 **Numbers have risen since 2020.** Sierra Leone's escalating food insecurity challenges continued to worsen in 2021 as the COVID-19 pandemic fuelled the country's ongoing economic crisis.

At 1.8 million, the number of people in Crisis or worse (CH Phase 3 or above) was 35 percent higher in the June–August 2021 lean season than it was in June–August 2020, despite a slight decrease in the population analysed from 8.3 million (100 percent of the population) to 8.1 million (96 percent of the population). The prevalence of people in Crisis or worse (IPC Phase 3 or above) increased from 16 percent – already the highest in the region – to 22 percent. The numbers of people in Crisis or worse (CH Phase 3 or above) had already increased fourfold between October–December 2019 and June–August 2020 (from 348 000 to 1.3 million), largely due to price spikes and job losses associated with COVID-19. Poor seed germination and waterlogging of fields resulted in below-average cereal harvests in 2018 and 2019, which reduced food availability and contributed to high food prices in 2020 (CH, March 2020).

FIG 3.42

Numbers of people in CH Phase 2 or above, 2016–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2016 and 2022 are provided (see Appendix 1, table A14, page 256).

Source: CH.

Drivers of the food crisis in Sierra Leone in 2021

The COVID-19 pandemic and its secondary socioeconomic consequences – including increased unemployment in the informal sector and a drop in remittances – severely compounded Sierra Leone's ongoing economic crisis, contributing to a considerable increase in the number of people in Crisis or worse (CH Phase 3 or above).

Economic shocks, including COVID-19

In 2021, the ongoing effects of COVID-19 restrictions on the movement of goods from surplus-producing areas to areas with high demand, a large trade deficit and a subsequent weakening of the local currency drove up the prices of imported products as well as local commodities.

The general inflation rate averaged 10.4 percent in January–September 2021 driven by high global fuel and food prices (key imports in Sierra Leone), supply-chain disruptions and higher freight charges. The Leone depreciated rapidly in the first three quarters of 2021 – in part reflecting higher demand for foreign currency for the import of COVID-19-related medical supplies (EIU, 2021).

Despite the lifting of COVID-19-related restrictions and the slow resumption of economic activities in 2021, especially those linked to extractive industries, the country's economic crisis continued to impact vulnerable households. Direct reports from households confirmed that they saw a decrease in income, particularly from self-employed individuals (mainly small trading activities) and those employed in the private sector (FAO&WFP, March 2021).

Since May 2020, annual food inflation remained above 15 percent – well above its pre-COVID-19 level of 9.9 percent – thereby reducing access to staple foods (FAO&WFP, July 2021) and exacerbating the vulnerability of low-income households who were already spending a high proportion of their meagre income on food (WFP August 2021). In June 2021, food inflation was 17.1 percent (WB October 2021). By July 2021, the price of imported rice was 21 percent higher than the previous July, while the price of local rice was 15 percent higher. The increase in the price of local rice can also be attributed to lower-than-normal yields in 2020 (WFP,

August 2021) when national rice production was 13 percent below the five-year average. This decrease was mainly driven by COVID-19-related restrictions, which limited market access and mobility, thereby hindering farming activities in the early stages of the season. At the same time, inflation and increasing costs reduced the affordability of production inputs for vulnerable farmers (FAO-GIEWS, April 2021).

The price of palm oil, which is consumed by most households regardless of their economic status, was 19 percent higher in July 2021 than July 2020. This increase was likely due to rising fuel prices that impacted processing and transportation costs (WFP, August 2021).

Weather extremes

Erratic and below-average rainfall had an adverse impact on 2020 production of rice, the staple food, curbing food availability in the first semester of 2021, with households depleting their stocks before the June–August lean season (CH, March 2021).

By June 2021, planting of the main season rice crop was underway following a timely onset of seasonal rains that were average to above average, and likely to have a positive impact on yields (FAO, June 2021) as well as on income-earning opportunities for households reliant on crop production and/or agricultural labour.

Key nutrition challenges



5.2% children under 5 years were **wasted**
1.0% of them were **severely wasted**

Source: SMART, 2021.

The most recent national nutrition survey (SMART, 2021) showed a slight improvement since the previous decade, with wasting and stunting levels decreasing.

Child wasting levels were classified as 'medium' by WHO thresholds at 5.2 percent, compared to 9 percent in 2010. Regional disparities exist with the prevalence of wasting highest in the Western Area Urban district at 9.6 percent. Stunting levels remain 'high' at 26.2 percent of children nationally, with four out of 17 districts reporting levels above the 30 percent 'very high' threshold. Stunting prevalence reached 32.9 percent in the eastern district of Kenema (SMART, 2021).

Infant and child-feeding practices are generally inadequate with 52.7 percent of infants up to 6 months being exclusively breastfed – considered 'alert' – though the country is on course to meet the exclusive breastfeeding target (SMART, 2021; Global Nutrition Report, 2020). Just 4.7 percent of children aged 6–23 months receive the minimum acceptable diet, which is considered 'extremely critical'. The situation is worst in the southern district of Bonthe (zero percent). Around 25 percent have acceptable dietary diversity (SMART, 2021).

Micronutrient deficiencies account for anaemia in approximately 68 percent of children aged 6–59 months. These figures are lowest in the Western Area province, at 55 percent, and are alarmingly high in the North West at 75.5 percent. Prevalence of anaemia in women of reproductive age (15–49 years) is 47 percent nationally, reaching 52 percent in North West (DHS, 2019).

Access to basic sanitation and safe potable water is concerning, with only 10.6 percent of Sierra Leone's population having access to basic water services and just 14.5 percent have safely managed sanitation services (JMP, 2020).


Acute food insecurity forecast, 2022

 **1.61M people**

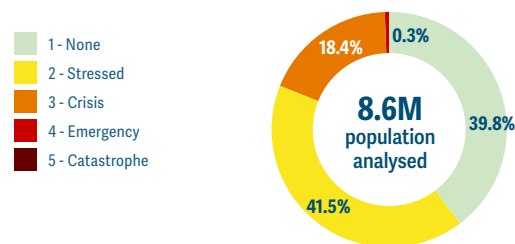
were forecast to be in Crisis or worse (CH Phase 3 or above) in June–August 2022

 **1.58M people**
in Crisis
(CH Phase 3)

 **0.03M people**
in Emergency
(CH Phase 4)

 The number of people in Crisis or worse (CH Phase 3 or above) is expected to slightly decrease during the 2022 lean season, though numbers will remain close to the 2021 peak period.

19% of the population analysed was forecast to be in Crisis or worse (CH Phase 3 or above)



 **3.57M people** were forecast to be in Stressed (CH Phase 2)

 The analysis covers **100%** of the total population of **8.6 million** people.

Source: CH, March 2021.

No projection map for Sierra Leone was available at the time of publication.

As the consequences of the COVID-19 related measures continue to adversely affect the livelihoods of vulnerable populations, which have already been severely weakened by inflation, the number of people facing Crisis or worse (CH Phase 3 or above) is expected to remain high during the 2022 lean season (CH, March 2022).

Economic shocks, including COVID-19

Inflation is expected to rise to 12.4 percent in 2022, as global oil prices rise further, domestic demand increases and the leone continues to depreciate rapidly (EIU, 2021). Despite the expected above-average 2021/2022 crop production, this will contribute to high price levels of food, constraining food access for vulnerable households during the June–August 2022 lean period (FAO, December 2021).

The limited economic activity and loss of revenue from commodity exports will lead to drastic declines in Government revenue and public expenditure between 2021 and 2022, which is also likely to impact vulnerable populations' food security status (FAO & WFP, July 2021).

The economy is expected to rebound over the medium term, with economic growth forecast to average 3.6 percent for 2021–2023, with projected upticks in both domestic and external demand in the scenario of a receding pandemic. Trade, tourism, transport and communication are expected to improve significantly over the medium term as long as new COVID-19 strains do not deter economic recovery. Ramped-up domestic food production through 2023 as agriculture rebounds is expected to help dampen domestic inflationary pressures (WB, November 2021).



An increase in fuel prices has affected food prices, while inflation has decreased the purchasing power of individuals.

Somalia

Acute food insecurity overview 2021

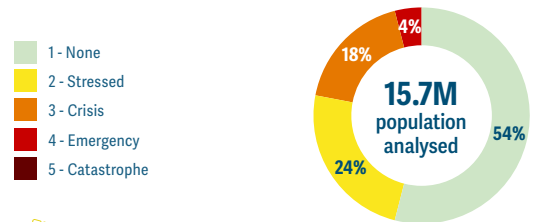
3.47M people

were in Crisis or worse (IPC Phase 3 or above) in October–December 2021

2.83M people in Crisis (IPC Phase 3)

0.64M people in Emergency (IPC Phase 4)

22% of the population analysed was in Crisis or worse (IPC Phase 3 or above)



3.71M people were in Stressed (IPC Phase 2)

The analysis covers **100%** of the country's total population of **15.7 million** people in 18 regions.

Between 2020 and 2021, the total population number utilised in IPC analyses increased by around 3 million people, rising from 12.3 million to 15.7 million.
Source: IPC, November 2021.

National population

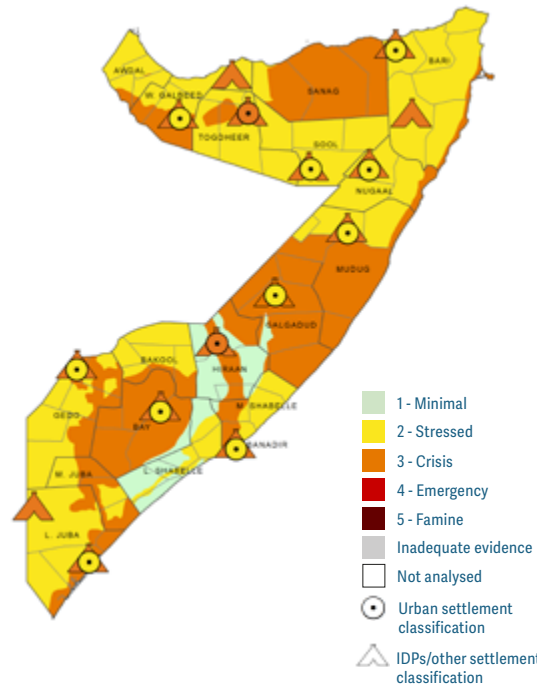
54% Rural **46% Urban**

Source: WB 2020.

MAP 3.58

IPC acute food insecurity situation, October–December 2021

Several areas were in Crisis (IPC Phase 3): the agropastoral areas of Bay and Bakool; the southern riverine areas; the agropastoral, urban, and IDP populations in Togdheer; and pastoral areas in central and northern Somalia.



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

Source: Somalia IPC Technical Working Group, November 2021.

Acute food insecurity trends

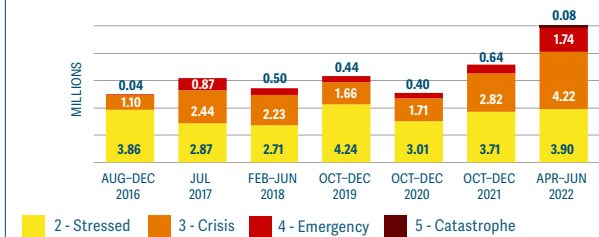
Numbers have risen since 2020. From October–December 2021, 3.5 million people were in Crisis or worse (IPC Phase 3 or above) largely due to drought, poor and erratic rainfall distribution, flooding, conflict and high food prices. The share of the analysed population in these phases increased from 17 percent in late 2020 to 22 percent in late 2021.

Although the number of people in Crisis or worse (IPC Phase 3 or above) from October–December 2021 was even higher than in July 2017 (3.3 million) when the country was affected by a destructive drought, the rise is partly explained by the increase in the population analysed in 2021. The share of the population in these phases was 4 percent lower in 2021 than in 2017. The share of the population in Emergency (IPC Phase 4) in late 2021 did not reach the levels of mid-2017 (7 percent) (FSNAU and FEWS NET, September 2017; IPC, November 2021).

Since 2017, sustained humanitarian assistance and government support have contributed to preventing the worsening of food security and nutrition outcomes in northern and central areas (IPC November 2021).

FIG 3.43

Numbers of people in IPC Phase 2 or above, 2016–2022



Bars refer to selected analyses that are comparable (see Technical Notes). Datasets from all analysis rounds between 2016 and 2022 are provided (see Appendix 1, table A15, page 257).

Source: Somalia IPC Technical Working Group.

Drivers of the food crisis in Somalia in 2021

Three consecutive poor rainfall seasons, localized flooding and continued conflict contributed to livelihood losses, high food prices and low purchasing power for Somali households in 2021.

Weather extremes

The delayed start and early end to the April–June 2021 Gu rainy season coupled with erratically distributed rainfall (FAO-GIEWS, July 2021) contributed to the Gu cereal output being estimated at 60 percent below the 1995–2020 average (FSNAU and FEWS NET, 2021). This was the third consecutive below-average harvest, after the poor 2020 Deyr season triggered widespread drought in late 2020 and the erratic Gu season in mid-2020 (FAO-GIEWS, July 2021).

Flooding during the 2021 Gu season affected 400 000 people in 14 districts between late April and early June (FAO, July 2021b), displacing 101 000 people (OCHA, June 2021b). The floods caused localized but substantial crop damage in the riverine areas of Hiiraan, Shabelle and Juba regions as well as livestock deaths (FAO, July 2021b). In Jowhar, 40 000 hectares of farmland were damaged (OCHA May, 2021c and OCHA, June, 2021d).

The October–December 2021 Deyr rainy season started late and ended early with cumulative rainfall estimated at 40–60 percent below average (FSNAU and FEWS NET, 2021b). In several rainfed agricultural areas, rainfall deficits led to a below-average planted area, widespread germination failure and crop wilting. Along the Juba and Shabelle rivers, crop production was reduced due to low water levels (FAO-GIEWS, March 2022). Deyr cereal production was estimated at 58 percent below the 1995–2020 average – the third lowest Deyr harvest since 1995 and fourth consecutive season of reduced output (FSNAU and FEWS NET, 2021b).

Staple food prices in December 2021 were more than twice the already high levels of 2020, and close to the record levels reached during the 2016–2017 drought and the 2008 global food price crisis (FAO-GIEWS, March 2022).

In pastoral areas, severe water and pasture shortages led to animal emaciation, livestock deaths, limited births, distress sales of livestock, resource-based conflicts over water and pasture, and

significantly below-average milk production. In the worst drought-affected areas – Gedo, Bakool, Middle and Lower Juba, Galgaduud, Mudug and Hiiraan regions – the scale of livestock deaths was comparable to 2016/2017 (FSNAU and FEWS NET, 2021b).

Conflict/insecurity

Conflict driven by inter-clan rivalry and attacks by Al-Shabaab and militia groups continued and was a key driver of acute food insecurity, especially in central and southern Somalia, disrupting livelihoods and hampering economic progress and development (ACAPS, December 2021; OCHA, March 2021e). Conflict displaced around 413 000 people between January and August 2021, a 130 percent increase compared to the same period in 2020 (UNHCR, September 2021; ACAPS, November 2021). Conflict-related displacement lowered crop production, especially in Hiraan, Middle and Lower Shabelle regions and restricted livestock migration options (Hiraan, Galgaduud and Sool) (IPC, November 2021).

The unstable political situation and complex conflict dynamics constrained humanitarian operations, making travel in certain areas dangerous. Checkpoints slow down the transportation of aid cargo in Galmudug, Hirshabelle, Jubaland, Puntland and South West states (ACAPS, December 2021).

Economic shocks, including COVID-19

From October, households faced a significant decline in income from agricultural labour as well as crop and livestock production due to the poor Deyr rains. This, coupled with a sharp increase in water and staple food prices, resulted in steep declines in household purchasing power, especially in southern and central rural livelihood zones.

In October 2021, the price of a 200-litre water drum was 45–172 percent above the five-year average in monitored markets in Nugaal, Middle Juba and Mudug regions (FEWS NET, November 2021). Increased demand due to low maize and sorghum supply, high shipping and fuel costs, global supply factors, and localized currency inflation in the northeast increased imported food costs, including rice and wheat flour (FEWS NET, November 2021).



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In some areas, winter crops have been wiped out by the drought. Severe water and pasture shortages have led to animal emaciation, livestock deaths, limited births, distress sales of livestock, resource-based conflicts and significantly below-average milk production.

Displacement 2021

IDPs

The majority of IDPs are hosted in 3 400 sites across the country, mostly informal settlements on private land in urban areas.

 **2.9M** IDPs

HNO data utilised as IOM DTM data only covers the first quarter of 2021.
Source: HNO, October 2021.

Most of the estimated 2.9 million IDPs across Somalia are poor with limited livelihood assets, few income-earning opportunities, low access to communal support and high reliance on external humanitarian assistance.

As a result, around one third of IDPs in rural and urban settlements faced moderate to large food consumption gaps through 2021 (HNO, October 2021; FSNAU-FEWS NET, September 2021). Inter-clan conflict and disputes over resources due to repeated climatic shocks were reported as key contributors to internal displacement (HNO, October 2021), with 19 percent of IDPs reporting conflict as the primary cause, 18 percent natural disasters and 31 percent both (IOM DTM Somalia, January 2021). Electoral

Refugees

Most of the refugee population in Somalia (58 percent) resides in Somaliland, while 32 percent are in Puntland and 10 percent in South Central. During 2021, a total of 3 523 newly arrived refugees were registered. In addition, around 2 370 Somali refugees returned home in 2021, including those who returned spontaneously from neighbouring countries (UNHCR, December 2021).

violence caused 413 000 new and secondary displacements between March and April 2021 (HNO, October 2021).

Consecutive below-average harvest seasons due to extreme drought conditions have led poor rural households to relocate to towns to access income opportunities and humanitarian support. According to the HNO, over 90 000 new and secondary displacements were caused by droughts from January–August 2021, while 59 000 people were displaced by flooding (HNO, October 2021).

It is currently estimated that out of 2.9 million IDPs, 75 percent (2.2 million people) require urgent multi-sectoral humanitarian assistance (HNO, October 2021). Food or cash to buy food was the most critical need indicated by 61 percent of IDPs, 59 percent reported healthcare as urgent and 58 percent stated the need for shelter (REACH, 2021, cited in HNO, October 2021).

The overall nutrition situation among IDPs in the 2021 Gu season is Serious (IPC AMN Phase 3) (11.2 percent). Seven out of ten assessed IDP groups were either in Serious or Critical (IPC AMN Phase 4), underscoring the underlying vulnerability of IDP populations to wasting (IPC AMN, November 2021).

Additional drivers of acute food insecurity and malnutrition for IDPs in Somalia

While many IDP households have lost their means to produce their own food, for those engaged in agro-pastoralism, drought conditions in 2021 severely impacted crop and livestock production. Reduced agricultural income eroded and disrupted livelihood activities and households were unable to pay off debt and cover the cost of purchasing more water and livestock feed. Conflict has also affected humanitarian food assistance provision in rural areas. Other barriers to food security included rising food prices and cost of living, declining availability of milk for both consumption and sale, and a likely reduction in agricultural employment opportunities during the Deyr (rainfall) season, which was drier than expected (FSNAU-FEWS NET, September 2021).

In IDP sites, high barriers to food, nutrition, health, water, protection, sanitation and hygiene services were reported. Lack of formal documentation makes IDP households vulnerable to eviction. An estimated 80 percent of IDP households do not have formal tenancy agreements, heightening the risk of secondary displacement (HNO, October 2021).

Refugees and asylum-seekers in Somalia live in urban areas with no access to humanitarian food assistance. Many cannot afford housing and live in traditional shelters, leaving them susceptible to robbery, sexual assault and harassment, while others have settled at the periphery of towns due to rental challenges, facing poor living conditions, lack of water, sanitation and limited access to healthcare services and nutrition interventions. The COVID-19 pandemic has worsened an already challenging humanitarian situation. Inadequate food intake relating to low quantity and quality of family meals is adversely impacting nutritional outcomes among refugee children and women (HNO, October 2021).

FIG 3.44

Refugees and asylum seekers in Somalia – the majority from Ethiopia – live in urban areas



Source: UNHCR, December 2021.

Key nutrition challenges



1.2M children under 5 years were **wasted** in August 2021–July 2022

213 440 of them were **severely wasted**

Source: IPC AMN, November 2021.

Wasting remains widespread in Somalia at varying levels of severity, although the prevalence has improved over the past 14 years. The prevalence fell from 17 percent in 2017 to 11 percent in 2021, the lowest since 2007. However, this trend still translates to most of the country classified in Serious (IPC AMN Phase 3) (IPC AMN, November 2021).

According to surveys conducted in August 2021, child wasting mainly affects rural areas, which had a medium wasting prevalence of 11.5 percent. Critical prevalence of wasting (over 15 percent) was recorded in two out of 15 rural populations (Shabelle Riverine and North Gedo Pastoral). A Serious (IPC AMN Phase 3) prevalence of wasting has persisted in Shabelle Riverine livelihood as well as among IDPs in Mogadishu since the 2019 Deyr season due to high morbidity and reduced food access (IPC AMN, November 2021).

In urban areas, 9.5 percent of children are wasted, classified in Alert (IPC AMN Phase 2), a slight improvement since the 2020 Gu season (10.5 percent) (IPC AMN, November 2021).

More than 25 percent of children were affected by stunting (Global Nutrition Report, 2021).

Key drivers

Caring and feeding practices

Child feeding indicators are particularly poor, with only 15.6 percent of infants under 6 months exclusively breastfed, while just 17.6 percent of children aged 6–23 months receive a diverse diet (MoH, 2020). According to the 2019/20 micronutrient survey, around 40 percent of non-pregnant women and 47 percent of pregnant women are anaemic and similarly around 43 percent of children below 5 years are anaemic (HNO, October 2021).

Health services and household environment

Somalia's health system remains fragmented, under-resourced and ill-equipped. Disease outbreaks are largely due to low vaccination coverage, a shortage of functional public health facilities and low capacity of surveillance and response (HNO, October 2021).

Somalia is experiencing acute watery diarrhea/cholera outbreaks in multiple locations. Oral cholera vaccinations have not been carried out in affected and at-risk areas since the COVID-19 pandemic started in 2020. Between January and August 2021, 595 cases of suspected measles were confirmed, mainly in Banadir region and among unvaccinated children (HNO, October 2021). Out of a total of 40 surveyed population groups, 18 recorded high morbidity prevalence (≥ 20 percent). The highest morbidity was reported in Bay Agropastoral (41 percent), Baidoa IDPs (34.5 percent), Mogadishu IDPs (30 percent), Beletwein Urban (34 percent) and Juba Cattle Pastoral (29 percent) (IPC AMN, November 2021).

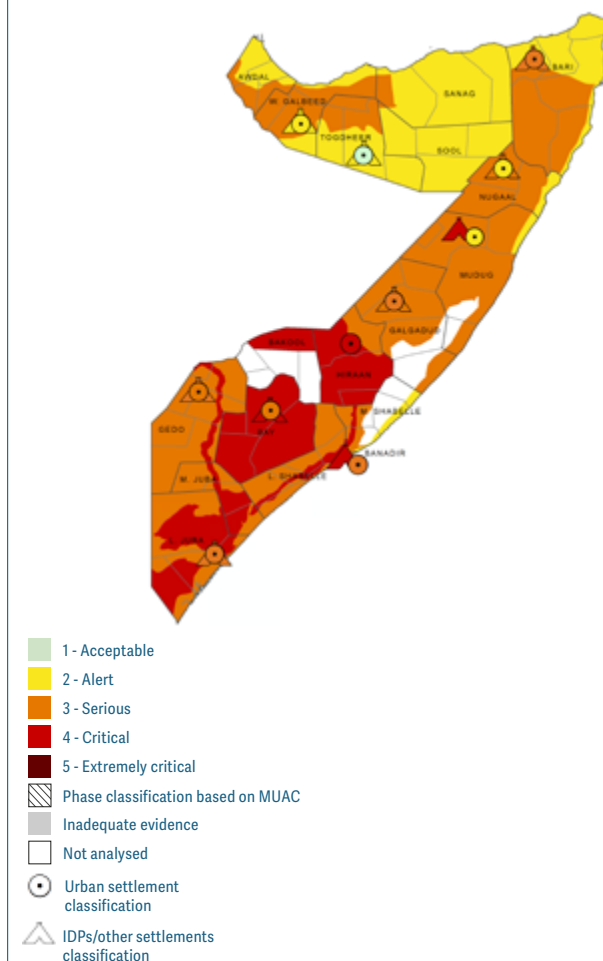
Lack of access to safe water has compounding effects on public health and leads to diseases that predispose children to malnutrition. The Joint Multi-Cluster Needs Assessment (JMCNA) 2021 indicates that 13 percent of non-IDP families and 22 percent of IDP households lack adequate drinking water, and that 20 percent of non-IDP households and 35 percent of IDP households lack adequate water for personal hygiene. The JMCNA 2021 noted that 31 percent of households do not have access to basic sanitation facilities. COVID-19 continues to limit access to nutrition services, while some households have avoided health services for fear of catching the virus. The Nutrition Cluster data shows that the number of admissions of wasted children was 11 percent lower in 2021 than in 2020 (HNO, October 2021).

Food security and access to healthy diets

The stability in the levels of child wasting in rural areas is partly due to increased access to milk and sustained humanitarian assistance. However, reduced food access has had a negative impact on wasting in other areas. For example, in urban Hargeisa, wasting levels increased from 3.4 percent during the 2020 Gu season to 9.6 percent in 2021 (IPC AMN, November 2021).

MAP 3.59

IPC acute malnutrition situation, September–November 2021





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


Source: Somalia IPC AMN Technical Working Group, November 2021.

Acute food insecurity forecast, 2022

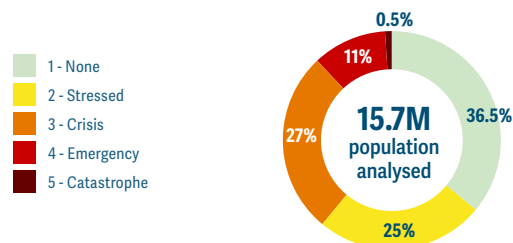
 **6.04M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in April–June 2022

 **4.22M people** in Crisis (IPC Phase 3)  **1.74M people** in Emergency (IPC Phase 4)  **81 100 people** in Catastrophe (IPC Phase 5)

 The population in Crisis or worse (IPC Phase 3 or above) is projected to rise by 74 percent compared to peak 2021 estimates and by 128 percent compared to the same period in 2021.

38% of the analysed population were forecast to be in Crisis or worse (IPC Phase 3 or above)



 **3.90M people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers **100%** of the country's total population of **15.7 million** people including rural and urban populations, as well as IDP settlements

Between 2020 and 2021, the total population number utilised in IPC analyses increased by around 3 million people, rising from 12.3 million to 15.7 million.
Source: IPC, April 2022.

The April 2022 IPC analysis was issued shortly before the publication of the GRFC 2022. Consequently, the drivers discussion on this page is not fully updated to reflect its findings.

Risk of Famine

Between April and June 2022, area level Famine is not projected to occur in the most likely scenario. However, there is a Risk of Famine occurring in three livelihood zones of Somalia¹ and IDP settlements in Mogadishu, Baidoa and Dhusamareb if certain factors evolve worse than expected (IPC, April 2022).

If the April–June Gu season performs more poorly than forecast, drought conditions will worsen considerably, which in turn could lead to failed local harvests and drive substantial food price increases, while also contributing to rising livestock mortality levels (IPC, April 2022).

Food price hikes could be further exacerbated not only by continued regional drought, which would curb regional food stocks, and rising global food prices, but also by the repercussions on global food and fuel prices of the war in Ukraine (IPC, April 2022).

Drought conditions and/or increased conflict could also contribute to increased displacement, worsening food security outcomes for IDP populations, and disrupting market access and livelihoods. Drought conditions could contribute to a significant deterioration in the nutrition and mortality situation in affected areas, pushing GAM prevalence and excess mortality to Famine thresholds (IPC, April 2022).

A Risk of Famine could also occur in the event that humanitarian assistance is unable to keep up with rising emergency food needs and cannot reach the most-affected populations (IPC, April 2022).

¹ Hawd Pastoral livelihood zone of Central and Hiran, Addun Pastoral livelihood zone of Northeast and Central and Bay Bakool Low Potential Agro Pastoral livelihood zone.

Food insecurity will increase sharply in 2022 due to the combined effects of multiple consecutive seasons of below-average rains, continued conflict and insecurity, and rising food prices.

Weather extremes

Consecutive seasons of below-average rains have contributed to a harsher-than-usual Jilal dry season in January–March 2022. In agropastoral areas of southern and northwestern Somalia, Deyr harvests were around 57 percent below the five-year average, resulting in low household food stocks and prolonged dependency on market purchases. For pastoral households, water and pasture shortages severely curbed incomes, due to poor herd conditions and an atypically high number of livestock deaths (FSNAU-FEWS NET, February 2022). Beyond March, food insecurity will be heavily dependent on the performance of the March–May 2022 rains. If below-average rains materialize as projected in the most likely scenario, an unprecedented sequence of consecutive poor rainy seasons will have dire consequences for food availability and access (FAO-GIEWS, March 2022).

Conflict/insecurity

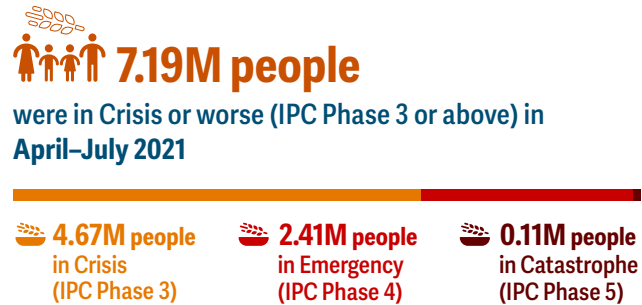
Conflict, insecurity and related population displacements are expected to continue in Somalia, linked to a delay in the presidential elections, increased attacks by al-Shabaab, and disputes over limited grazing lands and water resources caused by the drought (WFP & FAO, January 2022; FSNWG, February 2022). Due to disruptions to their livelihoods, displaced populations are often highly food insecure (FSNAU-FEWS NET, February 2022).

Economic shocks, including COVID-19

Food prices are rising, limiting food access. Across parts of the country, cereal prices have exceeded levels observed during the 2016/17 drought (FAO-GIEWS, March 2022a). For pastoral households, livestock-to-cereal terms of trade are also declining as livestock prices remain stable while food prices increase (FSNWG, February 2022a). The urban poor also face difficulties accessing food due to an economic slowdown and rising food prices (FSNAU-FEWS NET, February 2022).

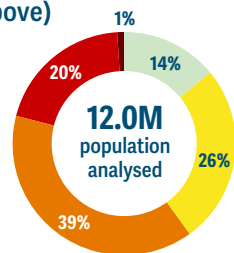
South Sudan

Acute food insecurity overview 2021



60% of the analysed population was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



The analysis covers 100% of the country's total population of 12.1 million people.

Source: IPC, December 2020.

National population



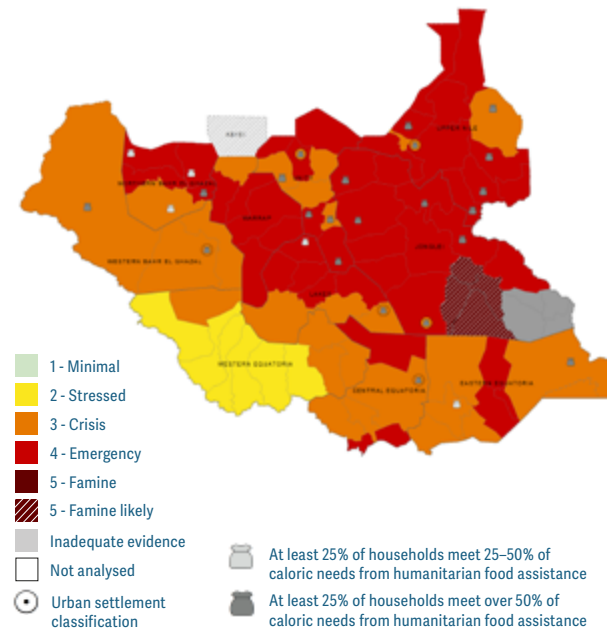
Source: WB 2020.

Following a breakdown in consensus among South Sudan IPC TWG members, which led to the activation of an external Quality Review and Famine Review, an IPC report was published at country level on 11 December 2020, which reflects different findings from those above regarding the estimation of populations in Catastrophe (IPC Phase 5) in Akobo, Aweil South, Tonj East, Tonj North and Tonj South counties and no Famine Likely classification in some payams of Pibor.

MAP 3.60

IPC acute food insecurity situation, April–July 2021

Western payams of Pibor county¹ were classified in Famine Likely (IPC Phase 5) while Kizongora and Maruwa payams in the eastern part of Pibor were in Emergency (IPC Phase 4) and at 'Risk of Famine'. The majority of counties (45) were in Emergency (IPC Phase 4).



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. 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, December 2020.

¹ Gumuruk, Pibor, Lekuangle, and Verteth.

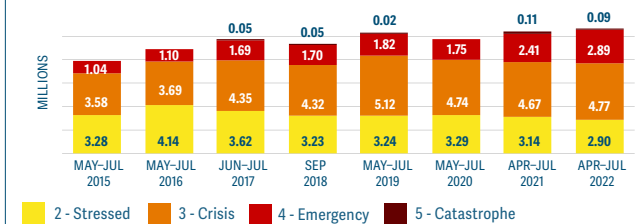
Acute food insecurity trends

Numbers have risen since 2020. The number of people in Crisis or worse (IPC Phase 3 or above) increased from 6.5 million in May–July 2020 to 7.2 million by April–July 2021 with 108 000 projected to be in Catastrophe (IPC Phase 5) in Pibor, Jonglei, Northern Bahl el Ghazal, and Warrap counties (IPC, February 2020 and December 2020). This 2021 estimate is the highest number for South Sudan in the GRFC's existence,² driven by the protracted conflict, economic crisis, high food prices, socioeconomic impacts of COVID-19 and unprecedented flooding.

The number of people in Catastrophe (IPC Phase 5) was higher in 2021 than in May–July 2017, when two counties in Greater Unity were classified in Famine (IPC Phase 5) and 90 000 people were facing Catastrophe (IPC Phase 5) (IPC, January 2017). In May–July 2019, 7 million people were in Crisis or worse (IPC Phase 3 or above), including 21 000 people in Catastrophe (IPC Phase 5). The subsequent decrease to 6.5 million by May–July 2020 was largely due to humanitarian interventions (IPC, February 2020).

FIG 3.45

Numbers of people in IPC Phase 2 or above, 2015–2022



In April–July 2021 the analysis in Jonglei and Pibor administrative area does not include the population from four payams (Maruwa, Boma, Kizongora and Miwono) due to lack of data. Datasets from all analysis rounds between 2016 and 2022 are provided (see Appendix 1, table A16, page 258).

Source: South Sudan IPC Technical Working Group, External Quality Review and Famine Review, December 2020.

² The first edition of the GRFC covered the year 2016 and was published in 2017.

Drivers of the food crisis in South Sudan in 2021

* Conflict/insecurity

In 2021, armed violence did not escalate to 2020 levels but the fragile security situation continued to displace civilians, mainly women and children, and disrupt livelihoods (WFP, October 2021; OCHA, June 2021). However, since the September 2018 peace agreement (R-ARCSS), South Sudan has experienced widespread and high levels of violence and cattle raids. The worst-affected areas are the states of Warrap, Lakes and Jonglei, including the Greater Pibor Administrative Area in the central belt of the country, as well as the Greater Equatoria region to the south and Unity and Upper Nile states in the north (ACLED, August 2021). Conflict has also continued to disrupt the delivery of critical humanitarian assistance to highly food-insecure people (WFP, October 2021).

* Weather extremes

From May 2021, a third consecutive year of extensive flooding in eight out of ten states led to displacement, destruction of livelihoods, farmland and crops, livestock deaths and contamination of water sources. Although rainfall was not abnormally high, flooding was exacerbated by standing water from the major floods in the previous two years. More than 835 000 people were reportedly affected by the flooding, with Jonglei hardest hit (305 000 people affected), followed by Unity (220 000 people) and Upper Nile (141 000 people). Flooding also complicated the delivery of aid to affected communities, as roads became impassable and communities were cut off by floodwaters (REACH, January 2022; OCHA December 2021).

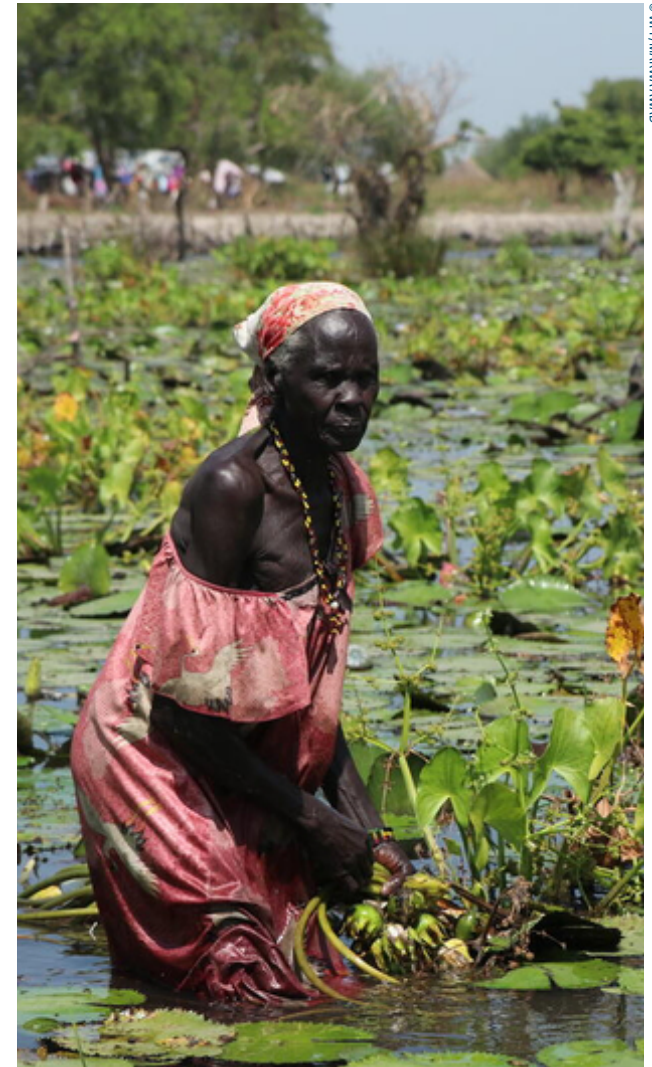
According to the preliminary findings of the 2021 FAO/WFP Crop and Food Security Assessment Mission, the 2021 aggregate cereal production is estimated to be slightly below the output of the previous year and well below the pre-conflict level. The output contraction is mainly due to the floods and, in most areas not affected by the inundations, to below-average and erratic rains, which constrained yields (FAO-GIEWS, March 2022).

* Economic shocks, including COVID-19

In 2021, food prices continued to be affected by a volatile macro economic situation, limited domestic supplies, the effects of protracted conflict, high transport costs stemming from high fuel prices and informal taxation (FAO-GIEWS, March 2021). Lack of income continued to erode the purchasing power of vulnerable households who rely on markets to purchase food and other basic needs (WFP, October 2021).

From April 2021, the South Sudanese pound significantly appreciated against the US dollar in the parallel market, slowly approaching the official rate in the fourth week of April, following the government approval of USD 3 million to the foreign exchange bureau to revive the declining economy. However, food prices in local currency remained high, as traders were selling from their stock already purchased at the previous rate (WFP, May 2021).

During the course of 2021, food prices were further heightened by COVID-19-related disruptions to the domestic markets and trade (FAO-GIEWS, February 2022).



© WFP/MARIA AWAD

A third consecutive year of severe flooding in 2021 destroyed livelihoods, farmland, crops and livestock, and contaminated water sources. Conflict-affected Jonglei was the worst-hit state.

Displacement 2021

IDPs

 **2.02M** IDPs

Source: IOM DTM, December 2021.

Assessments conducted between July and September 2021 indicated that the IDP population was spread across 3 335 locations within 508 payams (in 78 counties) in all ten states (IOM DTM South Sudan, September 2021). The largest IDP populations were concentrated in the counties of Juba, Tonj North and Rubkona, while significant populations were also in Tonj East, Tonj South, Rumbek North, Gogrial West, Awerial, Ayod, Yei and Bor South (HNO, 2022).

Conflict was the primary driver of displacement, displacing 47 percent of IDPs, followed by weather extremes (26 percent), and communal clashes (21 percent). Some 27 percent of IDPs were displaced between January and September 2021 and 16 percent in 2020 (IOM DTM South Sudan, September 2021).

Although food security data for IDP populations was unavailable in 2021, a study conducted in late 2020 found that 39.5 percent of IDPs in Bentiu camp had poor food consumption, while 40.2 percent had borderline food consumption (IOM DTM, November 2020).

Humanitarian assistance

Refugees living in camps rely on general food distribution as their main source of food. An assessment conducted in July–September 2021 indicated that 36 percent of surveyed IDPs were residing in locations where the main source of food was food assistance (IOM DTM, September 2021). However, assistance to displaced populations has been constrained due to funding cuts. For refugees, the food ration was reduced to 70 percent of the daily recommended 2 100 kilocalories from November 2015 and then further cut to 50 percent in April 2021 (UNHCR & WFP, 2021).

Additional drivers of acute food insecurity and malnutrition among refugee populations

Although **refugees** have access to allocated land, it is insufficient to meet needs. Livelihood opportunities have been further limited by pandemic restrictions (UNHCR & WFP 2021). For **IDPs**, 35 percent indicated that they rely on cultivation, livestock raising and fishing as the primary means to meet food needs, but challenges persist in rebuilding lost livelihoods (IOM DTM, September 2021). In the Bentiu IDP camp, flooding prevented IDPs from carrying out their usual livelihood activities, notably charcoal production and firewood collection (HNO, February 2022).

According to surveyed IDPs in 2021, conflict/insecurity inhibited access to food markets (IOM DTM, September 2021). Insecurity also stemmed from tensions between host communities and displaced populations, due to pressure on scarce food stocks and natural resources (HNO, 2022). Inter-communal conflict initiated by cattle raiders around Gorom resulted in refugees fearing to engage in crop production and firewood collection. Growing insecurity in 2021 targeting humanitarian workers hindered the delivery of assistance to both IDPs and refugees (HNO, February 2022; UNHCR & WFP 2021).

Many malnutrition screenings were suspended or reduced in frequency during the COVID-19 pandemic, leading to a lag in the identification of malnutrition cases for children and pregnant and lactating women. Some refuse screening of their children out of fear of contracting the virus (UNHCR & WFP 2021).

IDPs and refugees both face challenges in terms of access to health services and household WASH facilities, which contribute to poor nutritional outcomes. Of surveyed IDPs in 2021, 40 percent lived in locations where the water was not fit for human consumption (IOM DTM, September 2021).

Latrine coverage is low in refugee camps due to lack of construction materials and damage incurred during the rainy season. Malaria, diarrhoea and intestinal worms are among the leading causes of morbidity in refugees. Routine malaria control interventions are hindered by limited resources. The minimum dietary diversity (MDD) of refugee households with young children fell from 34 percent in November 2020 to 22 percent in June 2021 (UNHCR & WFP, 2021).

Refugees

 **335 317** refugees. **92%** are from the Sudan and **7%** from the Democratic Republic of the Congo and Ethiopia. **90%** are in Upper Nile and Unity.

Source: UNHCR, February 2022.

Between December 2020 and 2021, the number of refugees increased by 6 percent due to an influx of Ethiopian refugees fleeing the conflict in Tigray. This trend is expected to persist or increase further in 2022 (UNHCR, 2021).

The share of refugee households with an acceptable food consumption score decreased from 63 percent in October 2020

to 31 percent in June 2021 likely due to food ration cuts (WFP, July 2021). Some 65 percent of households in Pamir camp (Unity) and 69 percent in Makpandu (Central Equatoria) had a poor food consumption score (UNHCR, November 2021).

The nutrition situation varies across camps, with the prevalence of wasting in children aged 6–59 months ranging from 10.3–14.5 percent (high) in camps in Maban, but below 5 percent (low) in three camps in Central Equatoria and Unity (UNHCR, November 2021). The prevalence of stunting ranges from 10.3 percent (medium) to 30.9 percent (high), while anaemia in children under 5 years is a serious concern, ranging from 36.9 percent (medium) – 69.5 percent (high) (UNHCR, November 2021).

Key nutrition challenges



1.3M children under 5 years were **wasted** in 2021
302 080 of them were severely **wasted**



675 550 pregnant and lactating women
were **acutely malnourished**

Source: HNO, February 2022.

Expected caseload for acutely malnourished children was at its highest in 2021 since the start of the conflict in December 2013, according to the IPC (IPC AMN, December 2020). National GAM prevalence increased from 11.6 percent in 2018 to 12.6 percent in 2019 (FSNMS, 2020).

According to the IPC AMN analysis, 53 counties (68 percent of the total) were classified in Serious or Critical (IPC AMN Phase 3 or above) from November 2020–March 2021 (IPC AMN, December 2020). Out of this, 29 counties were projected to be in Critical (IPC AMN Phase 4), 70 percent of them in Greater Upper Nile followed by Greater Bahr el Ghazal (18 percent). The nutrition situation was expected to deteriorate further during the lean season of April–August 2021 when 72 percent of counties were projected to be in Serious or worse (IPC AMN Phase 3 or above) with Renk county projected to be in Extremely Critical (IPC AMN Phase 5).

South Sudan has made some progress towards reducing the prevalence of stunting, but 31.3 percent of children under 5 years of age are still affected (Global Nutrition Report, 2021). This prevalence is considered 'very high' by WHO thresholds.

Key drivers



Food security and access to healthy diets

Elevated levels of acute food insecurity and its key drivers – conflict, the acute economic crisis, erratic rains and flooding – in most counties contribute to acute malnutrition (IPC AMN, December 2020).



Health services and household environment

The cumulative effects of years of prolonged conflict in tandem with flooding and the economic crisis have further weakened essential public services including water, sanitation, health and nutrition services.

According to the Food Security and Nutrition Monitoring System (FSNMS) conducted in July 2019, access to sanitation in the country remains low at 19 percent. Poor access to WASH services combined with high levels of food insecurity has a detrimental impact on the health of the most vulnerable, as seen through the high prevalence of malnutrition and water-borne diseases, with 74 percent of households reporting members affected by a water or vector-borne disease. Counties reporting high levels of wasting have been identified as having high WASH needs (FSNMS, July 2019).

COVID-19 related disruptions, as well as changes in SAM and MAM admission criteria for children further reduced access to services alongside other factors such as heightened inter-communal conflict and insecurity, the worsening economic crisis and flooding (IPC AMN, December 2020).



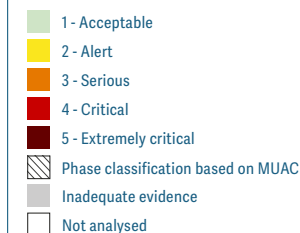
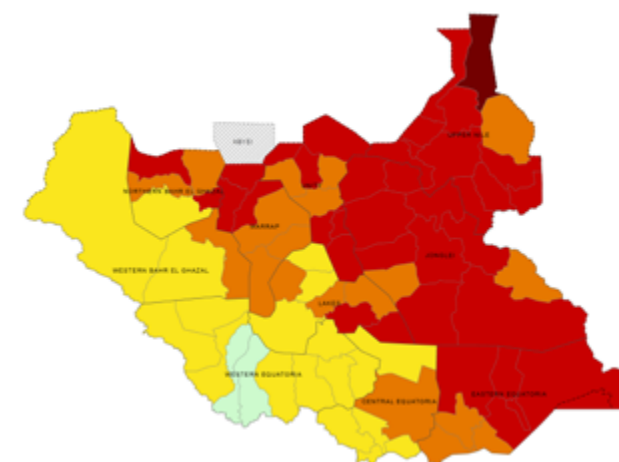
Caring and feeding practices

Based on the recent data, only 13 percent of children aged 6–23 months received the minimum dietary diversity, 23 percent of them received the minimum meal frequency, whereas only 7 percent of them received the minimum acceptable diet (IPC AMN, December 2020).

MAP 3.61

IPC acute malnutrition situation, April–July 2021

A total of 57 counties were expected to be in Serious or worse (IPC AMN Phase 3 or above), with 19 classified in Serious (IPC AMN Phase 3) and 38 classified in Critical (IPC AMN Phase 4). Renk County were projected to be in Extremely Critical (IPC AMN Phase 5).



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


Source: South Sudan IPC AMN Technical Working Group, December 2020.

Acute food insecurity forecast, 2022

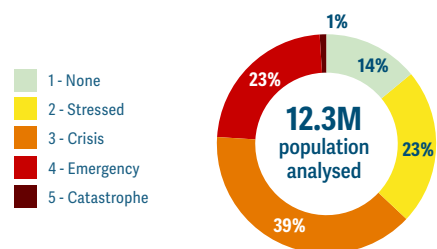
 **7.74M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in April–July 2022



 The population in Crisis or worse (IPC Phase 3 or above) in South Sudan during the 2022 lean season is projected to increase relative to the peak 2021 levels, as conflict/insecurity, severe flooding and drought, and macroeconomic challenges continue to adversely impact livelihoods and food security outcomes.

63% of the analysed population was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **2.90M people** were forecast to be in Stressed (IPC Phase 2)

 The analysis covers **100%** of the country's total population of **12.3 million** people.

Source: IPC, April 2022.

The April 2022 IPC analysis was issued shortly before the publication of the GRFC 2022. Consequently, the drivers discussion on this page is not fully updated to reflect its findings.

The following key assumptions were made by the IPC for the April–July 2022 projection: The combined effects of conflict and insecurity, population displacements, weather and economic shocks, as well as persistent annual cereal deficits and years of asset depletion and livelihood losses are projected to result in elevated numbers of people in Crisis or worse (IPC Phase 3 or above), including 87 000 people in Catastrophe (IPC Phase 5). Given rising needs against the backdrop of humanitarian access constraints and limited funding, acute food insecurity is projected to increase in April–July 2022, particularly during the lean season (IPC, April 2022).

Acute food insecurity is expected to increase in 2022 due to the cumulative effects of persistent conflict/insecurity, severe flooding and drought, and macroeconomic challenges – all of which occur on top of years of similarly severe shocks.

Conflict/insecurity

Conflict is expected to continue in 2022 (WFP & FAO, January 2022). During the first two months of 2022, conflict had already displaced populations in Central, Eastern and Western Equatoria, Unity, Upper Nile, Lakes and Warrap States (OCHA, February 2022). In addition to disrupting livelihoods and markets in affected areas, conflict is also expected to continue to limit humanitarian access (WFP & FAO, January 2022).

Weather extremes

A third consecutive year of severe flooding in 2021, affecting 835 000 people, caused significant population displacements, killed livestock, and resulted in the loss of 37 624 tonnes of grain in the flood-affected areas (HNO, February 2022). For affected households, a prolonged dependency on markets during the first half of 2022 due to crop losses will result in an early and intense lean season (WFP & FAO, January 2022).

Currently, available rainfall forecasts for the 2022 rainy season generally converge on an increased probability of above-average rains again in 2022. Should these forecasts materialize, additional flooding across the country would likely cause further agricultural losses to crops and livestock, displace populations, as well as limit humanitarian access to affected populations (FEWS NET, February 2022; HNO, February 2022).

Economic shocks, including COVID-19

Though the macroeconomic situation slightly stabilized in 2021, high food prices are expected to persist or escalate particularly in localized areas affected by flooding and conflict, and in urban areas where markets are the main source of food (WFP & FAO, January 2022).

Though rising global crude oil prices may temporarily benefit South Sudan's economy, cereal prices may be affected by the war in Ukraine, as a large percentage of wheat on its markets originates from Ukraine and the Russian Federation, though re-exported by Uganda, Kenya and the United Republic of Tanzania (WFP, March 2022). With no grain reserve to buffer grain price shocks, the scale of the potential upswing in South Sudan grain prices will depend on the magnitude of possible trade disruptions and the time it will take for the Sudan or Middle East grain traders to find alternative sources of wheat.

Sudan

Acute food insecurity overview 2021

 **9.77M people**

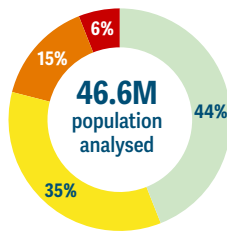
were in Crisis or worse (IPC Phase 3 or above) in June–September 2021

 **7.07M people** in Crisis (IPC Phase 3)

 **2.7M people** in Emergency (IPC Phase 4)

21% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

- 1 - None
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Catastrophe



FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate (see Technical Notes).

 **16.53M people** were in Stressed (IPC Phase 2)

The analysis covered **100%** of the country's population of **46.8 million** people, except populations in Abyei and Al Tina.

Source: Sudan IPC, May 2021.

National population

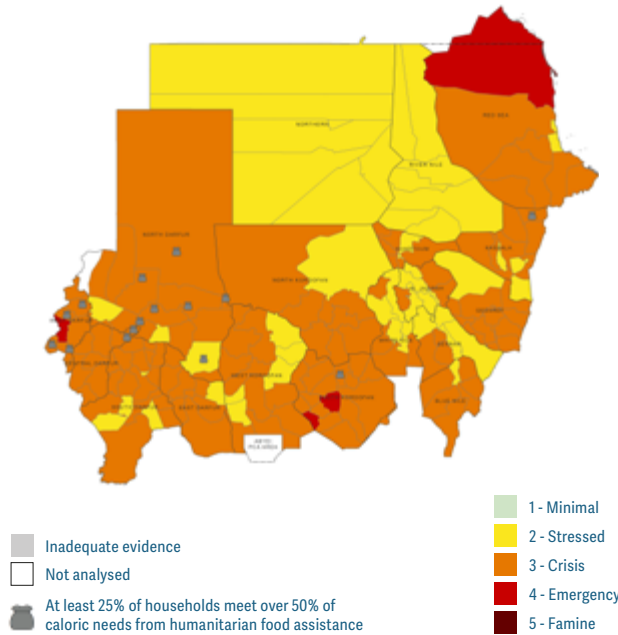


Source: WB 2020.

MAP 3.62

IPC acute food insecurity situation, June–September 2021


Five areas were classified in Emergency (IPC Phase 4) in Red Sea, South Kordofan and West Darfur states. The majority of localities were classified in Crisis (IPC Phase 3) with the exception of those in Northern and River Nile states, all in Stressed (IPC Phase 2), and most localities in Al Jazirah, Sennar and White Nile, among others.



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. 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: Sudan IPC Technical Working Group, May 2021.

Acute food insecurity trends

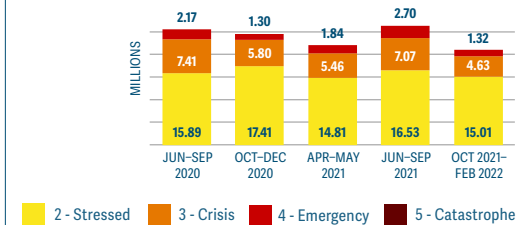
 **Numbers have remained relatively stable since 2020.** Acute food insecurity between June and September 2021 was similar to levels reported at the same time in 2020, with around 21 percent of the population in Crisis or worse (IPC Phase 3 or above), due to flooding, high food prices, conflict and related displacement.

Compared to 2020, an additional 500 000 people were reported to be in Emergency (IPC Phase 4) in June–September 2021, which can be attributed to a rise in conflict-related displacements and an increase in the analysed population (IPC, May 2021).

A comparison of areas analysed in both 2020 and 2019 already showed an increase of 3.2 million people in Crisis or worse (IPC Phase 3 or above) between June–August 2019 and June–September 2020 (IPC, July 2020). Moreover, the rising prevalence of the national population in Crisis or worse (IPC Phase 3 or above) from 9 percent in October–December 2017 to 13–14 percent in May–July 2018 and June–August 2019 and 21 percent in June–September 2020 and 2021 is testament to the increasing severity of this food crisis (IPC, October 2017, April 2018, September 2019, July 2020 and May 2021).

FIG 3.46

Numbers of people in IPC Phase 2 or above, 2020–2022



Bars refer to comparable analysis periods only (see Technical Notes).

Source: Sudan IPC Technical Working Group.

Drivers of the food crisis in the Sudan in 2021

The main drivers of the food crisis are the impact on livelihoods of the 2020 and 2021 floods and erratic rainfall, macroeconomic challenges resulting in rampant inflation, and escalating inter-communal violence in western Greater Darfur and in eastern South Kordofan, North Kordofan, and Blue Nile states.

Weather extremes

The 2021 rainy season was characterized by both erratic temporal distribution and cumulative rainfall amounts lower than in the previous year, and in some states below the long term-average. Following an early onset of the rains in most of the country during May, erratic rains and 2-3 week dry spells in July adversely affected several areas during the critical vegetative and flowering growth stages. In late July, river overflows and flash floods caused by heavy downpours affected standing crops and damaged irrigation systems and agricultural infrastructure in Gedaref, White Nile, South Darfur, West Darfur, North Kordofan, River Nile, South Kordofan and Al Jezirah states. Erratic rainfall in August also constrained the germination of replanted crops, and despite improved rains in September and October, rains were too late to facilitate the maturation of replanted crops.

These weather extremes, coupled with soaring costs and inadequate availability of inputs, resulted in a sharply reduced cereal production. The 2021 national cereal production is estimated at about 5 million tonnes, 35 percent below the 2020 output and 30 percent below the five-year average. (FAO-GIEWS, March 2022)

Economic shocks, including COVID-19

In 2021, the Sudan continued to face increasing macroeconomic difficulties due to low reserves of foreign currency, rapid depreciation of the Sudanese pound (SDG), and high inflation.

The elimination of large fuel and wheat flour subsidies in 2020 and the liberalization of fuel prices further increased production and transportation costs. In June 2021, diesel prices were around 936 percent higher and gasoline prices 1139 percent higher than in September 2020 before fuel subsidies were partially lifted (FEWS NET, June 2021).

The prices of locally produced sorghum and millet rose steadily in 2021 due to high production and transportation costs, coupled with social unrest and weather extremes. In December 2021, prices of sorghum in key-producing areas were 50 percent higher than their elevated year-earlier levels, while millet prices were 70 percent higher. Similarly, the prices of imported wheat grain increased over threefold in 2021, driven by lower year-on-year imports between January and September 2021 and the sharp depreciation of the national currency (FAO-GIEWS, March 2022).

Increased livestock prices at the start of the 2021/22 agricultural season provided short-term benefits to households with livestock to sell, particularly medium and better-off households. Wage labour opportunities and rates also improved in 2021 as border tensions and COVID-19 restrictions led to below-average labour migration from Ethiopia. Despite this, household purchasing power was well below average, with poor households in pastoral and urban areas that rely more on market food purchases facing increasing difficulty earning sufficient income to purchase food (FEWS NET, June 2021). In North Kordofan, South Kordofan, Kassala and Khartoum, more than 80 percent of households reportedly spent more than 75 percent of their expenditure on food, reaching 90 percent in Red Sea (IPC, May 2021).

Conflict/insecurity

Despite the 2020 peace deal, in 2021 there was increased unrest in West Darfur, North Darfur and South Darfur and local clashes in eastern South Kordofan, North Kordofan and Blue Nile. In Darfur, more people were displaced during the first ten months of 2021 than during the same period in 2020 (IOM, August 2021). The clashes across Darfur led to significant livelihood asset losses, including livestock and household food stocks, and caused widespread disruption to the cultivation of the 2021/2022 main summer crops, thereby limiting agricultural labour opportunities. Markets and trade flows were also affected (FEWS NET, October 2021). The expansion of cultivated areas at the expense of rangelands and transhumance routes led to conflicts between farmers and pastoralists, particularly in the greater Kordofan region, leading to crop destruction and livestock loss (IPC, May 2021).



In 2021, intercommunal conflict intensified in Darfur states, which host the largest share of the Sudan's 3.1 million IDPs, many of them children.

From mid-September to the end of October, protesters blocked roads around Port Sudan, which led to delays in the transportation of relief commodities and shortages of food, fuel and medicine across the country (USAID, December 2021). Political unrest significantly increased following the October 25 military coup. Although the prime minister was reinstated a month later, mass protests and civil disobedience campaigns continued, with lockdowns in Khartoum and other towns still in force, interrupting access to livelihoods, banks, cash transfers and markets (FEWS NET, November 2021).

Displacement 2021

IDPs

People displaced by conflict are concentrated in Darfur's states, which host 85 percent of the total displaced, many of whom are long-term IDPs. South Darfur hosts the largest numbers.

 **3.1M** IDPs

Source: IDMC, December 2021.

 **0.94M** IDP returnees

There are over 3 million IDPs in the Sudan.

Approximately 56 percent of IDPs were first displaced between 2003 and 2011 during the Darfur crisis and a further 35 percent between 2011 and 2017. The number of IDPs increased in 2021 due to increased localized violence and factional fighting in Darfur, South Kordofan, White and Blue Nile states (IOM DTM Sudan, June 2021, HNO 2022, December 2021).

Armed conflict is the main driver of displacement (58 percent of locations assessed) followed by communal clashes based on local tensions, including over land or livestock (31 percent of locations), lack of livelihoods or service provision (8 percent), and natural disasters (3 percent) (IOM DTM Sudan, June 2021).

Additional drivers of acute food insecurity and malnutrition among refugee populations

In some IDP localities, people have been displaced several times and rule of law is weak, access to social and protection services limited, armed attacks frequent and humanitarian access is limited. Almost 20 percent of IDP households have one or more members who do not possess critical civil documentation, such as national ID cards and birth certificates. The Sudan COVID-19 needs and services assessment in IDP camps showed that 42 percent of IDPs faced challenges accessing health services mainly due to lack of qualified health staff and absence of medicines (HNO, December 2021).

Interviews held in mid-2021 with refugees across 12 states indicated that 43–96 percent of surveyed refugee households do not have access to valid work permits and at least one form of civil documentation for household members, hindering access to essential services and employment. Refugees in West Kordofan, North Darfur and South Darfur were the most disadvantaged, with the majority (75–96 percent) lacking documentation (UNHCR, September 2021). Most refugees in the Sudan do not have access to land for farming, making them highly reliant on humanitarian food assistance as well as markets for food (UNHCR, September 2021).

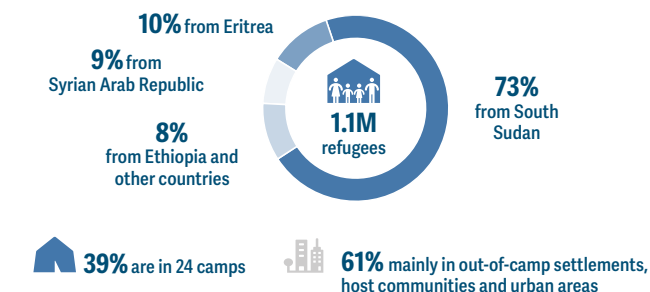
Based on the Basic Needs and Vulnerability Assessment (BNAVA) commissioned by UNHCR in 2021, 21 percent of the refugee population are unemployed. Unemployment levels among refugees are particularly high in the states of Gedaref (65 percent), White Nile (45 percent), and North Darfur (39 percent) (UNHCR, September 2021).

At least 50 percent of surveyed refugees in 13 states reported they had no access to a latrine, and at least 50 percent in ten states reported having to walk over five hours to reach the nearest water source (UNHCR, September 2021).

Refugees

FIG 3.47

Sudan is the second largest refugee-hosting country in Africa



Source: UNHCR, January 2022.

In 2021, assessments conducted in Sudanese refugee communities indicated a critical nutrition and food security situation. In North Darfur, 90–95 percent of households spent at least 50 percent of household income on food. In Kassala and West Kordofan, over 70 percent of households spent almost all or all of their available income on food (UNHCR, September 2021).

In 84 percent of surveyed refugee camps, child wasting reached the 'high/very high' WHO threshold, while in 24 percent of camps, stunting rates exceeded 30 percent (very high). In 48 percent of camps, anaemia levels were also reportedly above 40 percent, indicating a severe public health problem (SENS, 2019).

Key nutrition challenges



2.6M children under 5 years were **wasted** in 2021
600 000 of them were **severely wasted**



900 000 pregnant and lactating women
were **acutely malnourished**

Source: HNO, December 2021.

According to the latest available data, more than 16 percent of children under 5 years of age are wasted in the Sudan (S3M II, 2019).

The Sudan continues to record a high number of acutely malnourished women and children. Only 59 percent of the population is able to reach health facilities in one hour – while 80 percent reported challenges in accessing health services – thereby increasing the risk of morbidity and mortality associated with lack or poor health services. The overall number of women and children in need of nutrition support has risen by 8.8 per cent from 3.6 million in 2021 to 3.9 million in 2022 (HNO, December 2021).

Key drivers

Health services and household environment

The Sudan's protracted humanitarian crisis – civil unrest, border conflicts, mass displacement, the continuing economic crisis, the annual cycles of floods and disease outbreaks – has reduced the already weak capacity to provide basic health services, particularly nutritional services.

Poor sanitation, weak water infrastructure, and compromised access to chlorinated drinking water are putting over 3.1 million people at risk of water-related diseases such as acute watery diarrhoea (AWD), cholera, diarrhoea, dysentery, hepatitis E, typhoid, acute respiratory infections and polio, which contribute to nutritional challenges (HNO, December 2021).

About 27 percent of the population (around 11 million people) do not have access to basic domestic water. Half of the population reported that it takes more than 50 minutes to fetch water, and half of health facilities do not have basic water services. Around 70 percent of the population (around 33.5 million people) do not have access to basic sanitation. Out of them, 33 percent defecate in the open. Only 14 percent of households have access to a handwashing facility with soap and water (HNO, December 2021).

The COVID-19 pandemic affected the capacity of the health system to provide essential health services, especially outreach and immunization services. Measles vaccination coverage declined by the end of 2020 to 67 percent, with 29 localities reporting coverage of less than 50 percent (mainly in South Darfur and

South Kordofan). By the end of August 2021, four states reported measles outbreaks: East Darfur, South Darfur, River Nile and White Nile. Some 800 000 children had not completed the PENTA 3 vaccine doses, a 4 percent annual drop since 2019 with the biggest decreases in West Kordofan, Central Darfur and East Darfur. By mid-October 2021, about 1.6 million malaria cases had been reported. In addition, 1 156 cases of hepatitis E were reported across the country, mainly in the east (HNO, December 2021).

The availability of qualified health personnel and healthcare workers is a challenge hindering the capacity and efforts to scale up the response, especially in White Nile, West Kordofan, East Darfur, Northern and Central Darfur.

Caring and feeding practices

Sub-optimal feeding practices and cultural norms also contribute to child malnutrition. While exclusive breastfeeding prevalence among children under 6 months in the Sudan is over 62 percent, age-appropriate dietary diversity is low at 25.4 percent. The prevalence of anaemia in children aged 6–59 months is also a huge concern at 48 percent, a 'severe' level as per the WHO classification (HNO, December 2021).

Food security and access to healthy diets

Conflict and flood-related displacement exacerbated the main drivers of malnutrition by limiting access to food. Economic shocks including COVID-19 continued to contribute to loss of livelihoods, reducing household purchasing power, and increasing malnutrition risks as households had to further limit the diversity of their diets (HNO, December 2021).

Acute food insecurity forecast, 2022

 **5.96M people**

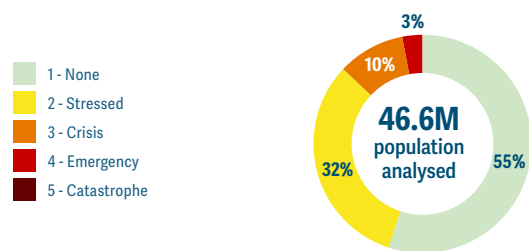
were forecast to be in Crisis or worse (IPC Phase 3 or above) in October 2021–February 2022

 **4.63M people**
in Crisis
(IPC Phase 3)

 **1.32M people**
in Emergency
(IPC Phase 4)

During the main harvest season, income from own production, livestock products and agricultural labour, as well as in-kind support will improve food access compared to the lean period of June–September 2021.

13% of the population analysed was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **15.01M people** were forecast to be in Stressed (IPC Phase 2)

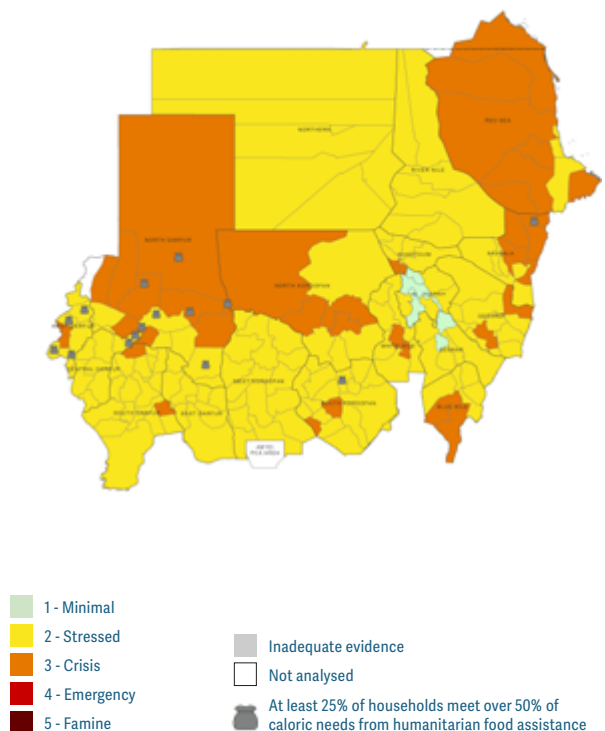
The analysis covered **100%** of the country's population of **46.8 million** people (excluding populations in Abyei and Al Tina).

Source: IPC, May 2021

MAP 3.63

IPC acute food insecurity situation, October 2021–February 2022

Most localities were classified in Stressed (IPC Phase 2). The worst-affected states were North Darfur, North Kordofan and Red Sea where at least half of localities were classified in Crisis (IPC Phase 3).



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. 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: Sudan IPC Technical Working Group, May 2021.

Improvements in household food access during the main harvest season will be limited and short-lived, and food security outcomes are expected to be worse than typical, driven by tight cereal supplies, above-average food prices, reduced household purchasing power, conflict and displacement.

Economic shocks, including COVID-19

The suspension of economic support from the international community in response to the military coup in October 2021 has led to the loss of over USD 2 billion in economic support and suspension of the implementation of economic reforms. Such reforms were needed to reduce economic instability, notably high inflation, strengthen coverage of social protection measures, support household purchasing power and alleviate economic pressure on food prices (IMF, 2022). Although the Sudanese pound has remained relatively stable, limited market supplies and high food prices will constrain household access to food, particularly in urban and peri-urban areas and market-dependent pastoral areas (FAO-GIEWS, March 2021).

Tight supplies following below-average cereal production in 2021, the continued depreciation of the local currency, and soaring prices of agricultural inputs have all inflated food prices. The area planted with winter season wheat was reportedly 28 percent lower year on year and 10 percent below the five-year average, largely due to shortages of improved seeds and fertilisers, and rising electricity rates, affecting pump irrigation (FAO-GIEWS, March 2022).

Conflict/insecurity


The 2021/22 main season harvest in parts of Darfur and Kordofan states was disrupted by intercommunal clashes between October and December 2021. Violence was expected to further increase in early 2022 as more nomadic groups travel to southern grazing areas (IPC, May 2021). Already between October 2021 and 1 February 2022, over 99 000 people were displaced due to inter-communal conflict in Central, North and West Darfur (IOM, February 2022). Mass nationwide protests in 2022 continued to interrupt people's access to banks and markets and reduce income-earning opportunities for poor urban households (FEWS NET, February 2022).

Syrian Arab Republic

Acute food insecurity overview 2021

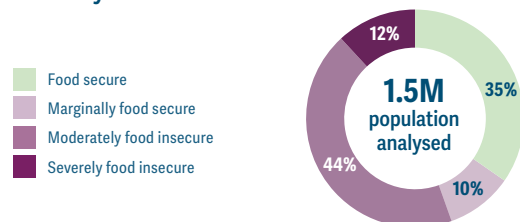
 **12M people**

were moderately or severely food insecure¹ in October–November 2021

 **9.5M people** were moderately food insecure

 **2.5M people** were severely food insecure²

55% of the population analysed were moderately or severely food insecure




The analysis covered **100%** of the Syrian Arab Republic's population of **21.7 million** people from January 2021 through February 2022.

Source: HNO, February 2022.

¹ As per the WFP CARI methodology.

² The number of severely food-insecure people includes an estimated 1.83 million people living in IDP camps.

Acute food insecurity trends

 **Numbers decreased relative to 2020.** After a decade of conflict, the number of acutely food-insecure people remained among the highest in the world due to the economic consequences of conflict, along with the economic collapse in Lebanon and the impact of COVID-19 restrictions. In addition, drought during the 2020/21 agricultural season reduced crop and livestock production.

The number of acutely food-insecure people had increased from 6.5 million in 2018 and 6.6 million in 2019 to 12.4 million (60 percent of the population) by November 2020 as intensifying and protracted conflict increased displacement, unemployment levels soared and food prices significantly increased (HNO 2019–2021).

In November 2021, the number of acutely food-insecure people remained persistently high at 12 million, representing 56 percent of the population. Among them, 1.8 million people were residing in camps, and were fully dependent on external assistance.

In 2021, the number of people in need of urgent food assistance was highest in Aleppo (2.6 million), Idlib (2.0 million) and Rural Damascus (1.4 million). The prevalence of acute food insecurity was highest in Idlib (69 percent), Hama (66 percent) and Aleppo (63 percent).

In five governorates – Aleppo, Al Hasakeh, Idlib, Quneitra and Rural Damascas – the prevalence of food insecurity (excluding in-camp populations) reached the highest point for the last six years of available analyses (WFP, November 2021).

Drivers of the food crisis in 2021

Devastated by ten years of protracted conflict, the economy suffered further setbacks from spill-over effects from the economic crisis in Lebanon and COVID-19. Currency depreciation, soaring food prices, reduced fiscal spending and widespread job loss further eroded people's ability to meet basic needs, while drought intensified.

Conflict/insecurity

The March 2020 Idlib ceasefire agreement led to a reduction in hostilities and by mid-2021, in many governorates, the security situation was the calmest it had been since the onset of the crisis, with improvements compared to the previous year in Aleppo, Al-Ghab, Rural Damascus, Deir-ez-Zor, Hama, Homs, Latakia, Sweida and Tartous (OCHA, August 2021). However, in the second half of 2021, hostilities re-intensified in northern and southern areas, triggering new displacements and destruction (GHO 2022, December 2021). Communities across the northwest and in the Ras Al Ain and Tell Abiad areas witnessed the largest escalation of hostilities since the March 2020 ceasefire (OCHA, July 2021).

The general security situation remained volatile in December 2021 with intensified hostilities reported in northwestern areas, especially in southern Idlib and northern Aleppo. In the northeast, frequent clashes were reported in Al-Hasakeh and Ar-Raqqa governorates. The violence continued to impact humanitarian operations and aid workers (WFP, December 2021) and impeded the free movement of people and goods, including production inputs and agricultural products. Fear of landmines prevented farmers from accessing their land in some areas (FAO, December 2021).

Economic shocks, including COVID-19

A decade of conflict, the financial crisis in neighbouring Lebanon, the declining value of the Syrian pound and the long-term effect of COVID-19 have all contributed to the country's economic downturn.

continued over...

Drivers of the food crisis in the Syrian Arab Republic in 2021 *continued*

continued from previous page...

With an estimated USD 42 billion of Syrian deposits locked in the ailing Lebanese financial system, Syrian businesses have been unable to access their funds to purchase imported inputs or invest in maintaining production (FAO, December 2021). Depleted foreign exchange reserves constrained the capacity of Government-held areas to produce and import primary goods, including food and fuel (GNAFC, July 2021).

In 2021, unemployment rates were as high as 60 percent (up from about 50 percent in 2019). High inflation rates – driven by currency devaluation, supply chain bottlenecks, higher costs for agricultural inputs, fuel shortages and lack of hard currency to ensure sufficient imports – eroded household purchasing power (FAO, December 2021).

Food prices in May 2021 were 197 percent higher year-on-year (WFP, July 2021). A family with a median income had to spend 84 percent of their total income just to cover the food component of the Survival Minimum Expenditure Basket (REACH, July 2021). The relative stabilization of the Syrian pound from August 2021 failed to stop additional increases in food prices. In October 2021, the national average price of the standard-reference food basket was the highest ever recorded – 128 percent higher than the same month in 2020 (WFP, October 2021).

High feed prices and lack of access to pasture resulted in livestock destocking. Prices of live animals decreased compared to 2020, as farmers sold part of their herds to gain liquidity to purchase feed and other inputs for the remaining animals. (FAO-GIEWS, December 2021).

Weather extremes

Insufficient and poorly distributed rainfall in the 2020/21 agricultural season, together with several heatwaves, the high cost of inputs, limited availability of irrigation water and high cost of fuel for pumping, resulted in a contraction of the harvestable cereal area (FAO, December 2021). In north and northeastern areas, insufficient rainfall and historically low water levels in the



In mid-2021, food prices were nearly 200 percent higher than in mid-2020 while a decade of conflict, Lebanon's financial crisis and COVID-19 had a catastrophic effect on household incomes.

Euphrates River reduced access to water for drinking and domestic use for over 5 million people (GHO 2022, December 2021).

Wheat production in 2021 was estimated at around 1.05 million tonnes, down from 2.8 million in 2020, and only one quarter of the pre-crisis 2002-2011 average. Barley production was about 10 percent of the bumper harvests of 2019 and 2020 (FAO, December 2021), affecting the availability of animal feed. High rates of livestock death were reported in 14 percent of assessed communities in May (REACH, July 2021).

Displacement 2021

IDPs

A decade of hostilities in the Syrian Arab Republic has been characterized by massive and protracted displacement.

 **6.7M** IDPs

Source: HNAP, December 2021.

70% in host communities
30% in sites mainly in Aleppo and Idlib governorates

Source: HNO, February 2022.

New displacements decreased significantly from 2020 with 346 995 IDPs registered from January to August 2021 – mainly in Aleppo, Idlib and Dar'a governorates – compared to 1.63 million for the same period in 2020 (HNO, February 2022).

Of the 17 810 IDP households participating in the Household Needs Assessment Programme (HNAP) survey in September 2021, 78 percent had been displaced for at least five years and 35 percent at least four times. Conflict is the main driver of displacement for 54 percent of households, followed by lack of livelihood opportunities (15 percent), and the deterioration of the economic situation (13 percent). The priority need for most was food (61 percent) followed by income (47 percent).¹ Households in camps were more likely to report food and income as priority needs compared to households out of camps (HNAP, September 2021).

Around 67 520 spontaneous IDP returns were registered between January and August 2021, less than a third of those reported for the same period in 2020 (HNAP, August 2021). It appears the increasingly dire economic situation, combined with often minimal basic services available in areas of return, affected households' decisions to move back home; some IDPs moved towards camps and sites where there is more likely to be humanitarian assistance (HNO, February 2022).

¹ Respondent households were asked to select three priority needs in ranked order. The aggregated priority need reflects the combined proportion of a need whether reported as first, second or third.

Displacement 2021 *continued*

Additional drivers of acute food insecurity and malnutrition for IDPs

Displaced households often experience a magnification of the drivers of acute food insecurity and malnutrition, as well as additional challenges. Displacement itself can constitute a major economic shock with 36 percent of households displaced within the past three years living critically below the REACH survival minimum expenditure basket and 95 percent living in extreme poverty (HNAP, September 2021).

Three quarters of IDP households in camps reported an inability to sufficiently meet their household's basic needs, citing lack of income as the primary reason (97 percent), followed by unaffordability of food and essential goods (86 percent). IDP households headed by females were nine times more likely to report having had no income in the previous month compared to male-headed households. In 2021, 88 percent of households residing in sites/camps took on debt to cover living costs (HNO, February 2022).

IDPs in camps faced critical problems related to winter. In January 2022, at least 16 000 households lost their shelters and belongings in storms, snow and floods (CAFOD, January 2022). At sites built on private lands, there is a constant risk of eviction. Fifty-two percent of IDPs in northeastern Syrian Arab Republic and 45 percent of IDPs in northwestern Syrian Arab Republic are

living in sites that need camp management systems. The security situation at Al Hol Camp in eastern Al-Hasakeh governorate, hosting about 60 000 people, remained a major concern, with high levels of violence, criminality and social tensions (HNO, February 2022).

Over 80 percent of IDP households rely on expensive tanker trucks for water provision. Water, sewerage and sanitation systems are frequently inadequate in sites/camps, which, in tandem with high population density, puts populations at risk of epidemic-prone diseases. IDP households complain of overcrowding and long waiting time for health services, not receiving the needed and required care, and unaffordability of treatment (HNO, February 2022).

Over 70 percent of the IDP population in residential areas report being unable to meet the basic needs of all household members, with 73 percent reporting a deterioration in their ability driven by limited income and high prices. IDPs outside of sites/camps have the lowest level of government-issued civil documentation (44 percent) – particularly in the northeast – which may affect long-term prospects of return and repossession of land and property (HNO, February 2022).

as Iraqis and Afghans in the last two decades. Since the start of the Syrian conflict in 2011, protection for refugees has seriously deteriorated, with over half of the Palestine refugees in the country displaced by violence at least once, including 120 000 who sought safety in neighbouring countries, mainly Lebanon and Jordan (UNHCR, December 2021; UNWRA, March 2021). Lack of documentation, residency problems, detention and lack of solutions are key challenges for refugees (UNHCR, December 2021). Moreover, insufficient humanitarian funding for Palestine refugees in particular led to a 50 percent reduction in the planned cash amounts distributed to refugees (UNWRA, March 2021).

Syrian refugees abroad

A decade into the Syrian conflict, over 5.6 million Syrian refugees remained spread across the Middle East and North Africa, the majority in Turkey, followed by Lebanon, Jordan, Iraq and Egypt (UNHCR, Government of Turkey, February 2022).

In 2021, they continued to face the impacts of COVID-19 restrictions, which exacerbated high levels of unemployment and food insecurity. The pandemic overstretched the capacity of public institutions and strained social safety nets, increasing refugee dependence on humanitarian assistance (3RP, 2022).

Syrian refugee populations – and the communities hosting them – also faced major domestic socioeconomic pressures. As Lebanon navigated an unprecedented economic, political and public health crisis in 2021, refugees experienced burgeoning food prices and loss of employment, against the backdrop of fuel and electricity shortages. In June–July 2021, 46 percent of Syrian refugee households contacted through phone surveys reported difficulties accessing food and other basic needs, a 6 percent increase relative to 2020 (3RP, 2022). Based on the WFP CARI methodology, approximately half (49 percent) of Syrian refugee households were moderately to severely food insecure, of whom 3 percent were severely food insecure in 2021. Although these results are roughly consistent with those of 2020, the percentage of households with poor dietary diversity¹ nearly tripled between 2019 and 2021 from 8 percent to 22 percent (VASyR, 2021).

Syrian refugees in Turkey also experienced a deteriorating macroeconomic environment. In September 2021, the annual inflation rate hit 19.6 percent – the highest in the previous 30 months. Within this, food inflation reached 29 percent (WFP, September 2021). Although food security data for Syrian refugees in Turkey was limited,² data available from WFP indicated that 7.6 percent of surveyed refugees were moderately to severely food insecure, while 84.3 percent were marginally food insecure, based on WFP CARI (WFP, 2021).

¹ Poor dietary diversity entails consuming fewer than 4.5 food groups per day on average

² Food security surveys could only be conducted on Syrian refugees living in temporary accommodation centres, which amounted to 1 percent of the total Syrian refugee population, or 50 000 people.

Refugees

 **453 360** refugees

97% from Palestine
3% mainly from Iraq, some from Afghanistan

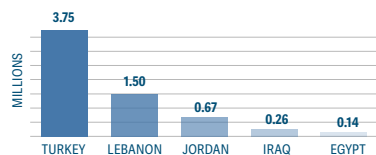
Source: UNRWA, March 2021; UNHCR, December 2021.

The Syrian Arab Republic hosts over 453 000 refugees and asylum seekers displaced by conflict, of whom the majority were Palestinians who fled from their homes in 1948 and 1967, as well

Syrian refugees abroad *continued*

FIG 3.48

Numbers of Syrian refugees in neighbouring countries



According to UNHCR, 840 000 Syrians are registered as refugees in Lebanon. However, an additional 660 000 Syrian refugees are not registered and were considered in the 2021 VASyR analysis, bringing the total number of Syrian refugees to 1.5 million.

Source: UNHCR, December 2021 and VASyR 2021/WFP.

In Jordan, of the surveyed Syrian refugees living in host communities and camps, 22 percent, or over 148 000 people, were moderately to severely food insecure as per the WFP CARI methodology in September 2021, compared with around 150 000 in October–December 2020 (WFP, December 2020 and September 2021). Average income for working household members fell by 31 percent between March and June 2021 due to the loss of informal labour opportunities stemming from the COVID-19 pandemic, increasing reliance on debt to cover essential food and non-food items (WFP, June 2021).

Although the food security situation of Syrian refugees in Egypt improved relative to 2020, in March 2021, approximately 27 percent of the analysed population was moderately to severely food insecure, according to WFP CARI. This represented a decline from around 50 000 people in 2020 to 36 000 – though this is partly explained by differences in the population analysed, which declined between 2020 and 2021. Nearly 47 percent of refugee respondents reportedly did not have enough food to cover household needs during the week prior to the survey, with 87 percent of them indicating that they did not have money to buy food. This situation stems primarily from the fact that the pandemic continued to disrupt income sources for 78 percent of refugees in 2021 (WFP, May 2021).

Key nutrition challenges



245 000 children under 5 years were **wasted** in 2021
51 000 of them were **severely wasted**

Source: HNO 2022.

More than 265 000 pregnant and lactating women are estimated to be acutely malnourished as of the end of 2021 (HNO, February 2022).

Although child wasting levels remain low, the number of children affected increased from 173 000 in 2021 to 245 000 in 2022. Stunting prevalence remains high with more than 553 000 children under 5 years affected.

One in three pregnant women are anaemic, with the prevalence even higher in the northwestern region, reaching 54 percent (HNO, February 2022).

Key drivers

🏠 Health services and household environment

Precarious living conditions, inadequate access to health and nutrition services, and WASH services, particularly for IDPs in overcrowded sites and camps are the leading drivers of acute nutritional challenges. More than a decade of crisis has destroyed the country's critical civilian infrastructure and public services, including water supply, electricity, and healthcare. More than half of all public hospitals are only partially functional or not at all, and over a third of the population does not have access to piped water. In almost half of all sub-districts, the number of healthcare workers (doctors, nurses and midwives) is less than 11 per 10 000 people, which is significantly below emergency standards of at least 22 per 10 000 people (GHO 2022, December 2021).

Over the past decade, more than 50 percent of healthcare workers are estimated to have left the country, with shortfalls particularly acute in Aleppo, Al-Hasakeh, Ar-Raqqa, Dar'a, Deir ez-Zor, Idleb and Rural Damascus (HNO, March 2021). As a result of critically low water levels in the Euphrates River, important dams in

northeastern Aleppo and Ar-Raqqa governorates shrank to historic lows, limiting access to clean drinking water and leading to widespread power blackouts. Dysfunctional WASH and health services are disproportionately concentrated in Aleppo, Idleb and rural Damascus (HNO, March 2021). These districts experienced disease outbreaks including acute diarrhoea due to poor WASH and limited health services, further increasing the risk of acute malnutrition among vulnerable groups.

Access to malnutrition monitoring and screening fell by as much as 50 percent before and during COVID-19 lockdowns. Despite the easing of restrictions during the course of 2021, access to nutrition services was still challenged by increases in costs of transport and medicine (HNO, March 2021).



🛒 Food security and access to healthy diets

Households are facing limited livelihood activities and reduced income and have exhausted coping strategies to afford the high prices of sufficient and nutritious foods, especially during the winter lean season (HNO, March 2021).



👶 Caring and feeding practices

Family separation, loss of caregivers and psychological trauma negatively impact child caring and feeding practices (HNO, March 2021). In northwestern Syrian Arab Republic, only 53 percent of infants under six months are exclusively breastfed and only 11 percent are given the minimum acceptable diet (HNO, February 2022). These sub-optimal feeding practices combined with ever declining access to health services and poor WASH coverage increase the risk of infectious diseases among infants and children and worsen their nutritional status.

Acute food insecurity drivers, 2022

No acute food insecurity forecast is available for the Syrian Arab Republic for 2022. Continued economic deterioration, manifesting in high fuel and food prices and acute lack of livelihood opportunities, as well as a reduced 2021 cereal harvest and fluctuations in localized conflict intensity, will exacerbate this food crisis.

Conflict/insecurity

In January 2022, political violence in Idleb and Ar Raqqa increased by comparison with December 2021 (ACLED, January 2022). The situation in the northeast remains very fragile with potential for significant insecurity to emerge, as evidenced by the mid-January clashes in Al-Hasakeh city (OHCHR, January 2022). Humanitarian access constraints are extreme, especially in those areas under opposition control in the northwest. Occasional localized outbreaks of violence, as in the southern province of Dar'a, also disrupt humanitarian operations (GNAFC, January 2022).

Economic shocks, including COVID-19

In a context where 90 percent of the population is estimated to live below the poverty line, the socioeconomic deterioration is expected to trigger further increases in extreme poverty, and to aggravate acute food insecurity and acute malnutrition levels (GHO 2022, December 2021). Food prices are expected to further increase (GNAFC, January 2022).

Weather extremes

Another consecutive below-average rainfall forecast for the 2021/22 rainy season, potentially exacerbated by the ongoing La Niña event, will compound the situation in the agricultural sector. Animal destocking due to high feed prices and lack of access to pasture will likely continue (GNAFC, January 2022). Seeds for 2022 are likely to be poor quality with low germination rates, and difficult to source due to the reduced 2021 harvest (FAO-GIEWS, December 2021).

In January, heavy snowfall, flooding and strong winds hit displacement sites in northwestern governorates of Aleppo and Idleb, destroying tents and causing main roads to close, preventing the delivery of humanitarian assistance (OCHA, January 2022).



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In February 2022, the humanitarian community tracked some 19 300 IDP movements across the Syrian Arab Republic, around 16 percent more than in January 2022. Most continued to be in northwestern governorates with most in Aleppo and Idleb (OCHA, February 2022).

Uganda

Acute food insecurity overview 2021

 **2.2M people**

were in Crisis or worse (IPC Phase 3 or above) in June–September 2021

5% of the analysed population was in Crisis or worse (IPC Phase 3 or above)

The FEWS NET analysis covers **100%** of the country's total population of **45.7 million** people.

Source: FEWS NET.

National population

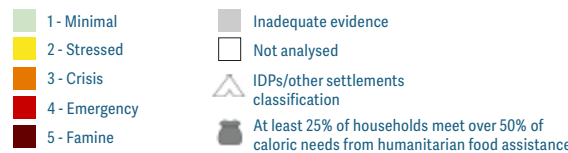
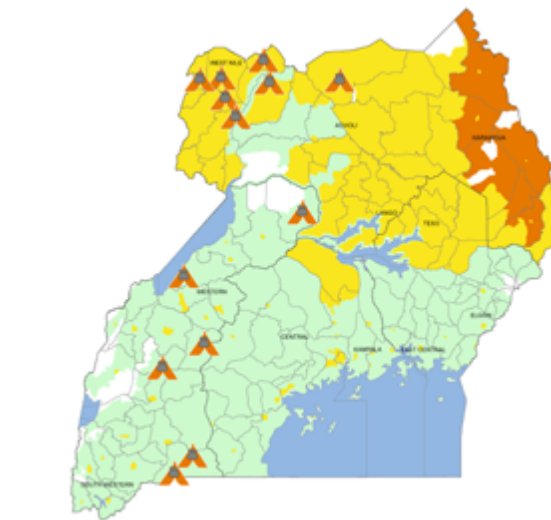


Source: WB 2020.

MAP 3.64

Acute food insecurity situation, June–September 2021

Several areas in the Karamoja region were classified in Crisis (IPC Phase 3), with some of the worst-affected households in Emergency (IPC Phase 4), particularly in Kaabong, Kotido, Moroto and Nabilatuk districts.



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

Source: FEWS NET.

Acute food insecurity trends

Numbers are not fully comparable to the 2020 peak estimate from IPC, given differences in the geographic coverage. However, at 2.2 million, the number of people facing Crisis or worse (IPC Phase 3 or above) from June–September 2021 is one of the highest estimated in Uganda by FEWS NET over the past six years.

Since 2016, food insecurity in Uganda has progressively increased. The high number of refugees residing in the country, who have fled conflict in South Sudan and the Democratic Republic of the Congo, account for a significant portion of national acute food insecurity figures since 2016 (IPC, January 2017 and October 2020; FEWS NET, 2018, 2019 and 2021; UNHCR, January 2022a and January 2022b).

Weather extremes have also contributed to acute food insecurity, such as in 2017, when La Niña phenomenon led to below-average crop production and poor livestock body conditions (FSIN, April 2018).

Food insecurity rose again in 2019 as 400 000 additional people in April–July were highly food insecure compared to 2018 levels. This was due to a particularly severe February–July 2019 lean season in Karamoja, an exceptionally dry first half of the March–June rainy season (one of the worst recorded since 1982) in bimodal rainfall areas, and continued arrival of refugees from neighbouring countries (FSIN, May 2020).

Drivers of the food crisis in Uganda in 2021

Conflict and insecurity in neighbouring countries, compounded by delayed and erratic seasonal rains and the socioeconomic impacts of COVID-19, drove high levels of acute food insecurity.

* Conflict/insecurity

Refugees make up most of the acutely food-insecure population in Uganda. In 2021, persistent conflict and violence drove over 127 000 (ECHO, 2021) additional refugees and asylum seekers to seek refuge in Uganda, mainly from the Democratic Republic of the Congo and South Sudan, increasing the refugee population in the country to 1.58 million by the end of 2021 (see displacement section).

Cattle raids and armed confrontations between security forces and raiders within Karamoja and from Turkana in Kenya also aggravated poor food security outcomes in Karamoja, especially in Kaabong, Kotido, Moroto and Napak districts, despite voluntary disarmament efforts (FEWS NET, June 2021). The raids constrained access to livestock products, including milk, and incomes from live animals and livestock products sales (IPC, July 2021).

* Weather extremes

In bimodal rainfall areas over most of Uganda, the 2021 March–May rainfall season was characterised by a delayed onset and an erratic spatial and temporal distribution, with severe early season dryness reported, especially in northern Acholi and Lango sub-regions, northeastern Teso sub-region and northwestern West Nile sub-region. Rainfall in June was over 50 percent below average, while waterlogging delayed planting and destroyed crops in certain areas (FEWS NET, June 2021). Although August rains were atypically early and provided moderate to locally heavy rainfall levels in certain bimodal areas, dryness and rainfall deficits persisted in greater northern Uganda, delaying land preparation and pasture regeneration for the second season (FEWS NET, August 2021).

In the northern refugee settlements, farming households also harvested below-normal yields – providing less than the typical 1.5 months of food stocks (FEWS NET, June 2021). The output of the first season harvest, concluded in August, is estimated at below-average levels (FAO-GIEWS, August 2021). In the districts of

the livestock corridor and localized central and eastern areas of the country, pasture and water availability were also below average, resulting in fair livestock body conditions and poor livestock production. In the unimodal agro-pastoral Karamoja region, the April–September rainfall season was characterised by cumulative below-average rainfall from the start of the season, a delayed start and flood/water logging events coupled with moderate to extreme severe meteorological drought, which resulted in significantly below-average crop production (FEWS NET, October 2021). Most poor households had depleted their stocks from the 2020 harvest and were forced to depend on markets despite inadequate income, partly due to limited agricultural labour opportunities. Poor October–December rains in bimodal rainfall areas of northern, central and eastern regions significantly curbed expected output for the aggregate 2021 crop production (FAO-GIEWS, March 2021).

* Economic shocks, including COVID-19

The impacts of the reintroduction of some restrictions in June 2021 to curb the spread of COVID-19, including closure of open air and livestock markets, was a setback to the gradual economic recovery observed in the country since late 2020 (FEWS NET, June 2021).

Though commercial transport of goods was allowed, the majority of small and informal traders were unable to access closed source and/or destination markets, resulting in disruption of trade and supply chains, closure and/or downsizing of businesses, and a consequent sharp increase in formal and informal unemployment. The closure of livestock markets limited competitive prices for livestock and livestock products, thereby disrupting related incomes for affected households (FEWS NET, June 2021).

In urban areas, where vulnerable households rely on informal employment, food security deteriorated as incomes declined, leading the worst-affected to face Crisis (IPC Phase 3) (FAO-GIEWS, August 2021). Maize prices increased by 10–20 percent between August and October, and were about 50 percent higher year-on-year, mainly due to reduced domestic supplies following the below-average first season harvest, coupled with sustained exports to Kenya and South Sudan (FAO-GIEWS, December 2021).



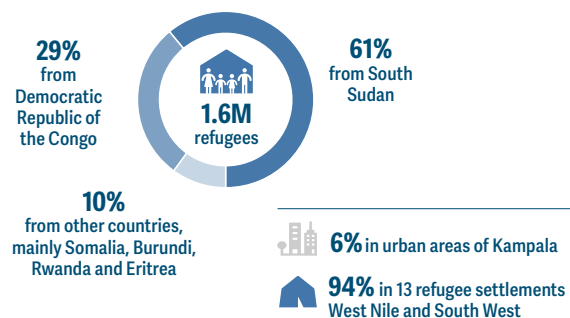
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The majority of Uganda's acutely food-insecure population are refugees who have fled conflict in the neighbouring Democratic Republic of the Congo and South Sudan.

Displacement 2021

FIG 3.49

Uganda hosts the third largest refugee population in the world, and the largest in Africa



Source: UNHCR, December 2021.

Between December 2020 and April–June 2021, the number of refugees with poor or borderline food consumption rose from around 33 percent to 44 percent largely due to the socioeconomic impacts of COVID-19 restrictions (UNHCR, December 2020 and September 2021). Similarly, 64 percent of surveyed refugee households ran out of food in February–March 2021, versus 9 percent of host communities. These conditions reportedly forced many refugee households to reduce the amount and frequency of meals eaten per day (UNHCR, June 2021).

Based on the most recent available nutrition data (December 2020), the prevalence of anaemia among refugee children aged 6–59 months (55 percent) and women of reproductive age (42 percent) was at the highest level recorded by UNHCR in the country, as was the level of stunting among children aged 6–59 months in the South West settlements (42 percent). The prevalence of child wasting fell from 9 percent in 2017 to around 5 percent in December 2020, with the biggest improvement in the West Nile region (Ministry of Health et al., December 2020).

Additional drivers of acute food insecurity and malnutrition among refugee populations

Although refugees are eligible to receive a plot of land for housing and self-production, they still face challenges to produce their own food and meet basic needs due to the limited size of the plots and a lack of agronomic skills and inputs. These factors have contributed to poor dietary diversity and high levels of food insecurity, while driving high levels of anaemia, stunting and wasting.

They are also legally allowed to benefit from the rights and services afforded by nationals, including access to schools and hospitals anywhere in the country, access to employment, and the right to move in-country. COVID-19 lockdowns disrupted refugee livelihoods, with the refugee employment rate falling from 56 percent before the pandemic to 43 percent in October–November 2020, down to 32 percent in February–March 2021.

In contrast, despite an initial drop in host community employment levels in 2020, employment rates recovered quickly to their pre-pandemic levels during the same period. Similarly, refugee ownership of family businesses fell from 37 percent pre-lockdown in March 2020 to 23 percent in February–March 2021 (World Bank and UNHCR, May 2021).

COVID-19 restrictions also contributed to rising food prices, particularly in urban areas. In February–March 2021, nearly 40 percent of refugee households reported an increase in the price of major food items consumed, representing the most cited shock experienced. During the same period, 55 percent of refugees in Kampala were unable to afford staple foods. Around 28 percent of refugees in the West Nile region and 26 percent in the South West were unable to afford food (World Bank and UNHCR, May 2021).

Reduced community engagement activities during the COVID-19 pandemic contributed to increased suboptimal childcare practices. Around 62 percent of children below 6 months were exclusively breastfed, down from 91 percent in 2014. Only 22 percent of children aged 6–23 months consumed the minimum dietary diversity and only 24 percent iron-rich foods – a decrease across all locations compared to previous years.

The consumption of Vitamin C-rich foods, which is crucial to the absorption of non-haem iron, was low since households mostly consume grains, tubers and legumes. Vitamin A supplementation coverage decreased from 89.5 percent in 2015 to 70 percent in December 2020.

Contributing factors to the increasing anaemia levels in settlements include poor dietary diversity, low intake of iron-rich foods and an increasing incidence rate of malaria (Ministry of Health et al., December 2020).

In December 2020, around 43 percent of households did nothing to their drinking water to ensure its safety, and 30 percent were not satisfied with their water sources largely due to long queues, irregular supply and bad quality. Overall 3.7 percent practised open defecation, rising to 14.4 percent in Kiryandongo and 11.9 percent in Palabek (Ministry of Health et al., December 2020).

Humanitarian assistance

Around 93 percent of refugees in settlements receive food assistance. Rations were cut from 100 percent of kilocalorie requirements before April 2020 to 60 percent in 2021 (UNHCR, November 2021).

Key nutrition challenges



56 560 children under 5 years were **wasted** in Karamoja in 2021

10 260 of them were **severely wasted**



10 200 pregnant and lactating women were **acutely malnourished**

Source: IPC AMN, July 2021.

The availability of recent nutrition data at the national level is highly limited, however an IPC analysis covering the period February 2021–January 2022 was conducted for the Karamoja region.

During the February–July 2021 lean season, one district had Critical levels of acute malnutrition (IPC AMN Phase 4), four districts Serious (IPC AMN Phase 3), and four districts Alert (IPC AMN Phase 2). About 56 600 children in these nine districts were wasted, of whom approximately 10 260 were severely wasted. Around 10 200 pregnant or lactating women were also wasted (IPC AMN, July 2021).

Key drivers

Caring and feeding practices

The heavy burden of work borne by mothers and the stress caused by the COVID-19 pandemic have been leading causes of inadequate childcare and breastfeeding practices, exposing children to recurrent infections and increased malnutrition incidences. Across Karamoja, around 74 percent of infants under 6 months are exclusively breastfed, decreasing to 54 percent in Kotido, 62 percent in Nabilatuk and 65 percent in Moroto. Fewer than 10 percent of children meet Minimum Acceptable Diet (MAD) requirements, falling to just 1.5 percent in Moroto and 2.5 percent in Napak. Diets consist mainly of starchy grains, with few children consuming nutritious foods (IPC AMN, July 2021).

Only about 25 percent of women consume foods considered adequate in terms of dietary diversity, falling to 13 percent in Moroto and 17 percent in Napak (IPC, July 2021). High levels of anaemia (both among children as well as among women) are a major public health concern in all districts with 59 percent of children under 5 years anaemic, rising to 74 percent in Amudat district and 72 percent in Kotido. Iron deficiency anaemia resulting from poor quality of food and malarial anaemia are likely contributing factors to acute malnutrition in this region (IPC AMN, July 2021).

Health services and household environment

Low water availability at household level, poor access to improved sanitation facilities and poor hygiene practices expose children to diarrhoea and skin infections, resulting in malnutrition (IPC, July 2021). In Karamoja, even though about 83 percent of households have access to safe water sources (FSNA, 2021), the per capita water use is below the recommended WHO standard of 20 litres per person per day. Only about 30 percent of households meet this minimum water use standard, mainly due to long distances and high queuing time. Access to improved sanitation facilities, particularly toilets, is still very low across the region. Open defecation stands at 60 percent, reaching 70–84 percent in Amudat, Kotido, Napak and Nabilatuk (IPC AMN, July 2021).

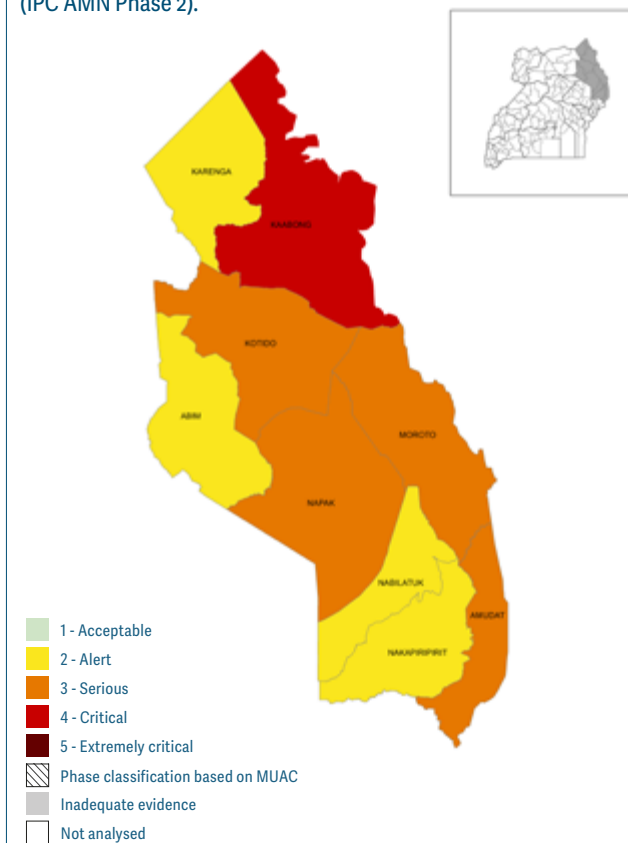
Food security and access to healthy diets

Based on the IPC AFI and AMN analyses in Karamoja, the results indicate a similar classification in Karenga, Nakapiripirit, Moroto, Kotido and Napak. Among the remaining districts, Kaabong and Amudat had high levels of acute malnutrition but low levels of acute food insecurity, with child wasting mainly attributed to very poor quality of food, poor sanitation/latrines coverage, limited use of safe water per capita and inadequate care practices, including poor feeding practices, exposing children to recurrent infections. Nabilatuk and Abim had high levels of acute food insecurity and low levels of acute malnutrition, implying there are child-feeding practices adopted by households that help to slightly reduce the effects of food insecurity and protect children against wasting (IPC AMN, July 2021).

MAP 3.65

IPC acute malnutrition situation in Karamoja, February–July 2021

Of the nine districts in the Karamoja region, Kaabong was classified in Critical (IPC AMN Phase 4), while four districts were in Serious (IPC AMN Phase 3). The remaining were in Alert (IPC AMN Phase 2).



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

Source: Uganda IPC AMN Technical Working Group, July 2021.


Acute food insecurity forecast, 2022

 **1.5–2.0M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in February–May 2022

⏴ During the forecast period, the food security situation is expected to marginally improve, particularly in urban areas following the gradual lifting of COVID-19-related restrictions and in the bimodal rainfall areas due to availability of second season food stocks, albeit below average.

3–5% of the analysed population was forecast to be in Crisis or worse (IPC Phase 3 or above)

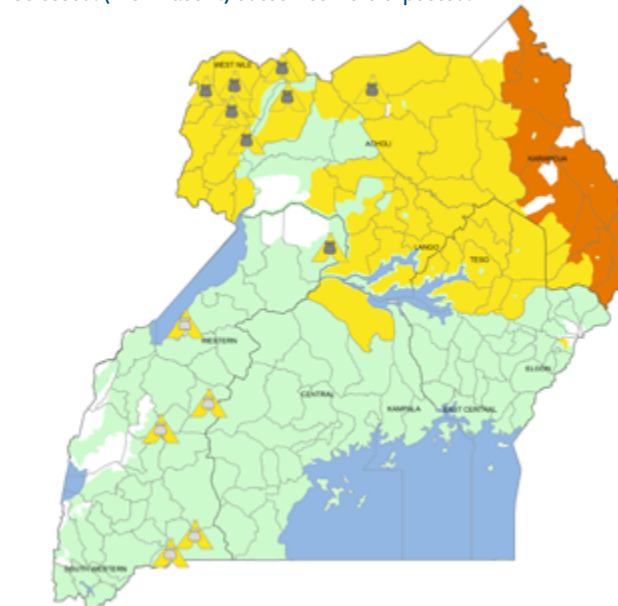
 This FEWS NET analysis covers **100%** of the country's total population of **45.7 million** people.

Source: FEWS NET.

MAP 3.66

Acute food insecurity situation, February–May 2022

In Karamoja, Stressed (IPC Phase 2) and Crisis (IPC Phase 3) outcomes were expected to remain widespread during the lean season through at least July. In refugee settlements, area-level Stressed! (IPC Phase 2!) outcomes were expected.



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

Source: FEWS NET.

The conflict and insecurity in neighbouring countries, poor performance of the 2021 rains, and the long-running effects of COVID-19-related restrictions will limit food access and households' purchasing power in Uganda in 2022.

Conflict/insecurity

In January–May 2022, an increasing number of refugees are projected to be in Crisis (IPC Phase 3) due to below-average harvests, particularly in the northern refugee settlements, and even with humanitarian food assistance (FEWS NET, December 2021). Livestock raids and related insecurity are expected to continue limiting households' access to livestock products, particularly milk, and incomes from sales of live animals and products (FEWS NET, December 2021).

Weather extremes

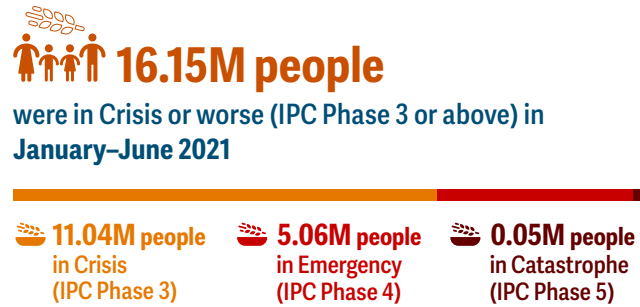
In the bimodal rainfall areas, below-average harvests and food stocks are expected following inadequate October–December 2021 seasonal rains. Below-average income from crop sales, high cereal prices due to tight supplies, and limited income-earning opportunities during the February–March 2022 dry season are expected to limit households' access to food. Particularly concerning is unimodal Karamoja, where below-average harvests and faster-than-usual deterioration of pasture and water availability, due to delayed and erratic April–September 2021 seasonal rains, coupled with a likely prolonged lean season, are expected to drive Crisis (IPC Phase 3) area-level outcomes, with some of the worst-affected households in Emergency (IPC Phase 4) (FEWS NET, December 2021).

Economic shocks, including COVID-19

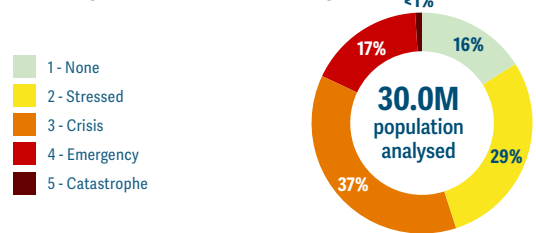
Poor households, especially in urban areas, are expected to continue having low purchasing power and constrained food access, having not fully recovered from the economic impacts of two COVID-19-related nationwide lockdowns. While maize prices declined by 15–30 percent in January as newly harvested crops increased market supplies, they remained 25–45 percent above their year-earlier levels, mainly due to below-average cereal production in 2021 (FAO-GIEWS, March 2022).

Yemen

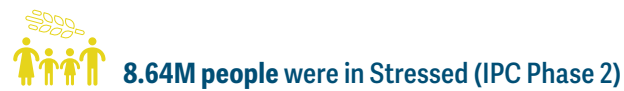
Acute food insecurity overview 2021



54% of the analysed population was in Crisis or worse (IPC Phase 3 or above)



FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate (see Technical Notes).



The analysis covers **100%** of the country's total population of **30 million** people.

Source: IPC, December 2020.

National population

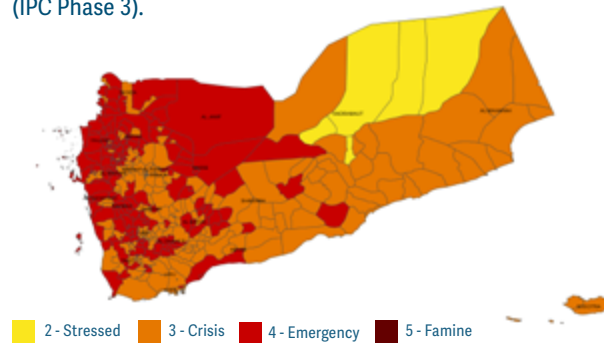


Source: WB 2020.

MAP 3.67

IPC acute food insecurity situation, January–June 2021

Some 154 districts were classified in Emergency (IPC Phase 4). In Abyan, Al Dhale'e, Al Hudaydah, Al Jawf, Al Mahwit, Amran, Dhamar, Hajjah, Ma'rib, Raymah and Sa'ada governorates, more than 53 percent of the local population faced Crisis or worse (IPC Phase 3).



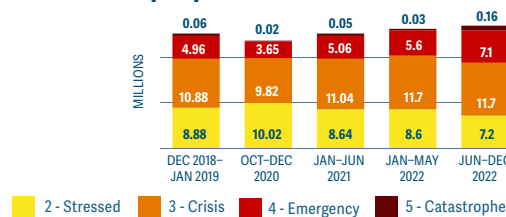
Nearly 260 districts out of 333 received significant humanitarian food assistance for at least 25% of households meeting 25–50% of their caloric needs.

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

Source: Yemen IPC Technical Working Group, December 2020.

FIG 3.50

Numbers of people in IPC Phase 2 or above, 2018–2022



Bars refer to comparable analysis periods only (see Technical Notes).

Source: Yemen IPC Technical Working Group.

Acute food insecurity trends

Numbers have risen since 2020. The food crisis in Yemen continued to worsen in 2021 with the number of people in Crisis or worse (IPC Phase 3 or above) rising by 19 percent from 13.5 million in October–December 2020 to 16.2 million during January–June 2021. This dire situation is the product of protracted conflict and a major economic crisis, which continued to disrupt livelihoods, reduce incomes and drive up food prices. In the three governorates (Al Jawf, Amran, and Hajjah) with populations in Catastrophe (IPC Phase 5) in October–December 2020, the number of people in this highest phase was expected to almost triple to 47 000 in January–June 2021 (IPC, December 2020).

The January–June 2021 estimate also exceeds figures from December 2018–January 2019, when 15.9 million people (53 percent of the population) were in Crisis or worse (IPC Phase 3 or above) (IPC, December 2018). The number of districts classified in Emergency (IPC Phase 4) increased from 49 in December 2018–January 2019 to 154 in the first six months of 2021 (IPC, December 2020).

Humanitarian assistance

A significant share of the population depends on humanitarian assistance as the primary source of staple foods in Yemen, with 13 million people receiving varying levels of food assistance in 2021. Yemen began 2021 with pockets of populations facing Catastrophe (IPC Phase 5) (IPC, December 2020). Although food assistance was significantly reduced during the first half of 2021, a notable increase in assistance in the second half of the year supported over three-quarters of the caseload with their monthly needs (IPC, March 2022).

Drivers of the food crisis in Yemen in 2021

As the escalating conflict entered its seventh year, economic conditions continued to worsen. High fuel and food prices constrained purchasing power, while COVID-19 reduced income-generating opportunities. Recurrent flooding related to inadequate drainage systems also disrupted livelihoods.

✳ Conflict/insecurity

Since 2015, protracted armed conflict has been at the root of Yemen's food crisis, leading to widespread displacement, port blockades and restrictions, a fuel crisis, humanitarian access constraints, disruption of public services, and a major economic crisis. In areas with populations in Catastrophe (IPC Phase 5) in the first six months of 2021 – Al Jawf, Hajjah and Amran – conflict, as well as related displacements and subsequent limitations on humanitarian access, were the main drivers of acute food insecurity (IPC, December 2020).

Before the conflict, poverty affected almost half of Yemen's total population. By 2021, it affected an estimated 71–78 percent (WB, November 2021). High levels of conflict throughout 2021 around the northern governorate and city of Ma'rib, where the majority of the country's oil and gas reserves are located, decreased crude oil export earnings and contributed to currency depreciation, which in turn supported rising food prices and lower household purchasing power (ACAPS, July 2021; GEOGLAM, November 2021).

By October 2021, 48 districts were crossed by active front lines, an increase from 45 in 2020 and 35 at the end of 2019 (GHO 2022, December 2021). From September 2021, the continued shifts in frontlines led to increased displacement, with many households displaced multiple times. In November, the situation in Ma'rib – one of Yemen's most conflict-affected governorates – took an even more devastating turn, further weakening the economy and exacerbating the needs of displaced, migrant and conflict-affected populations (IOM, December 2021).

🏠 Economic shocks, including COVID-19

By 2021, the conflict had incurred significant damage on the Yemeni economy, while the effects of the COVID-19 pandemic led

to a further deterioration in the country's economic situation. Although COVID-19 restrictions were rolled back in 2021, the population was yet to recover from the economic consequences of the pandemic (FAO, December 2021).

In November 2021, the Yemeni Riyal (YER) reached a record low, having lost 50 percent of its value since August. Food and fuel prices simultaneously increased, mainly in southern areas controlled by the Internationally Recognized Government (IRG) (ACAPS, August 2021, FEWS NET, January 2022). In July 2021, the average price of the Minimum Food Basket (MFB) in IRG-controlled areas was 52 percent higher than the previous year. By November 2021, it was 91 percent higher than in January 2021. Across areas controlled by Sana'a-Based Authorities (SBA), the average price of the MFB in July 2021 was 23 percent higher than the previous year (FEWS NET, August and December 2021).

Households reliant on government salaries (especially in IRG-controlled areas) continued to experience delayed payments (FEWS NET, August 2021).

Agricultural inputs remained costly and in short supply, while high fuel prices also continued to constrain agriculture in 2021, particularly for irrigated crops, leading farmers to shift to rain-fed agriculture (FAO, December 2021).

🌧 Weather extremes

Recurrent seasonal flooding continued to cause deaths, injuries and displace people from their homes, and resulted in losses of property, crops and crucial productive assets. In 2021, more than 34 000 families, most of them IDPs who fled conflict areas, lost their shelters, incomes and livelihoods, mainly in southern communities (OCHA, January 2022).

🦟 Crop pests and diseases

Desert locusts posed a threat to agriculture-based livelihoods and food security (GHO 2022, December 2021) as heavy rains and floods in July and August provided ideal ecological conditions for the locusts to multiply (FAO, December 2021).



© MFP/ SALEH HAYMAN

The most acutely food-insecure families, including IDPs, found sanctuary in camps in Abyan governorate after fleeing their homes due to the conflict in different cities of Yemen.

Displacement 2021

IDPs

With nearly 4.3 million IDPs – accounting for 13 percent of the country population – Yemen remained the fourth largest displacement crisis in the world in 2021.

 **4.3M** IDPs

Source: OCHA et al, April 2022.

During 2021 alone, over 286 700 Yemenis were forced to flee their homes due to conflict, particularly in Ma'rib, Taizz, Al-Hudaydah and Al-Bayda governorates (RRM, December 2021).

With ongoing hostilities, and in the absence of a negotiated political settlement, the trend of new and protracted displacement is expected to continue in 2022. While opportunities for safe and dignified returns of IDPs may emerge in stable areas, the current socioeconomic and security situation and the lack of public services raise concern about the conditions IDPs may face upon returning to their homes – as well as their ability to meet their basic food needs (UNHCR, February 2022).

Displaced families are four times more at risk of being in Crisis or worse (IPC Phase 3 or above) than other Yemenis. Over 67 percent of IDPs live in districts classified in Emergency (IPC Phase 4) (UNHCR February 2021, IPC December 2020).

Additional drivers of acute food insecurity and malnutrition for IDPs in Yemen

The damage the conflict has caused – a collapsing economy, widespread unemployment, disease outbreaks and reliance on humanitarian assistance – disproportionately affects IDPs. The COVID-19 pandemic has had a devastating impact on the lives of people across Yemen, but IDMC findings suggest that many consequences were particularly severe for IDPs (IDMC, June 2021).

As the prices of basic goods and cooking gas continued to rise due to the devaluation of the Yemeni Riyal in the south and the fuel shortages in the north, an increasing number of displaced families were resorting to harmful coping mechanisms – such as begging for food and assistance – to make ends meet (UNHCR, February 2022).

The majority of displaced individuals live in severely overcrowded sites, with up to 40 people sharing a single tent or using their remaining financial resources to rent temporary living spaces (IOM, December 2021). Frequently displaced to camps with few if any sanitation and hygiene services, limited access to healthcare and disproportionately high levels of food insecurity, IDPs face a myriad of health risks (IDMC, June 2021).

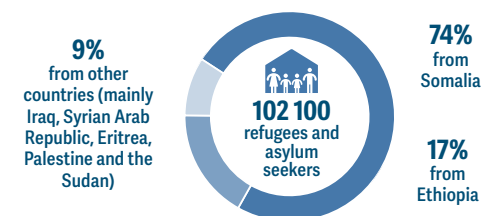
IDP sites have been impacted by armed violence in Ma'rib, at an unprecedented rate. Reduced livelihood opportunities and limited access to basic services impact female-headed households even more than male-headed households. IOM's protection team received reports of exploitation of children being used as labourers to support the family needs, and more women being forced to beg in the streets, also increasing the rate of gender-based violence (IOM, May 2021).

Starting in late July and continuing into early August, torrential rains and widespread flooding hit Yemen for the second time in 2021 with displaced families, especially those living in IDP sites, particularly impacted (OCHA, August 2021).

Refugees and asylum seekers

FIG 3.51

Refugee flows are largely from Somalia and Ethiopia and asylum trends are expected to increase in 2022



Source: UNHCR, December 2021.

Refugees and asylum-seekers pay the toll of a deteriorating socioeconomic situation, continue to rely on humanitarian assistance, and place additional pressure on already overstretched public services. COVID-19 protocols continue to challenge the resumption of assisted returns to Somalia.

The deterioration in the security situation in Ethiopia has negatively affected opportunities for voluntary and safe repatriation, with recent data indicating an increase in the number of asylum-seekers arriving in Yemen, including from Tigray. While arrivals to the country from the East and Horn of Africa mainly represent migratory movements, asylum trends are expected to slightly increase in 2022 (UNHCR, February 2022).

Key nutrition challenges



2.25M children under 5 years were **wasted** in 2021
395 200 of them were **severely wasted**



1.16M pregnant and lactating women were **acutely malnourished**

Source: IPC, February 2021.

High levels of acute food insecurity, mass displacement, exhaustion of coping capacities and the collapse of basic health, nutrition and WASH services have had a devastating toll on the nutritional status of children under 5 years and women.

In Hodeidah, at least 30 percent of children under 5 years were wasted. Hodeidah Lowland, Taiz Highland, Hajjah Lowland, Sana'a City and East Ibb accounted for nearly half of the severely wasted children (IPC, February 2021).

Some 46.4 percent of children under 5 years of age are stunted. Some 61.5 percent of women aged 15–49 years are affected by anaemia, indicating a severe public health problem (Global Nutrition Report 2021).

Key drivers



Food security and access to healthy diets

In Yemen, high levels of acute food insecurity coincide with high levels of acute malnutrition. All 22 northern zones classified in a Serious or worse (IPC AMN Phase 3 or above) phase of acute malnutrition from January–March 2021 were also classified in Crisis or worse (IPC Phase 3 or above) state of acute food insecurity (IPC, February 2021).



Health services and household environment

Ongoing armed conflict, destruction of health facilities and limited access to safe drinking water and improved sanitation facilities contribute to high levels of disease outbreaks. Since 2020, the fragile healthcare system has faced the collateral impact of COVID-19, which has drained meagre resources and resulted in fewer people seeking medical care (UNICEF, February 2021).

Disease outbreaks, such as cholera, malaria and Acute Respiratory Infections (ARIs), put further pressure on a health system that is greatly constrained in terms of skilled personnel, functionality, supplies, logistics and poor health-seeking behaviour (IPC, February 2021).

The current cholera epidemic in Yemen has been ongoing since October 2016. Between 1 January and 30 November 2021, nearly 27 000 acute watery diarrhoea/cholera suspected cases were reported, a significant decline compared with the same period of 2020 (nearly 222 000 suspected cases) (UNICEF, February 2022).

Approximately 20.1 million people reportedly required assistance to access health services in early 2021, more than half of them children. Immunisation programmes for over ten types of lifesaving vaccines, including those for polio, measles and COVID-19, faced major disruptions (UNICEF, February 2022).

Poor water, sanitation and hygiene (WASH) services are a major concern in all zones (IPC, February 2021). More than 15.4 million people urgently need assistance to access WASH services (UNICEF, February 2022).



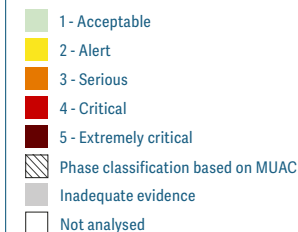
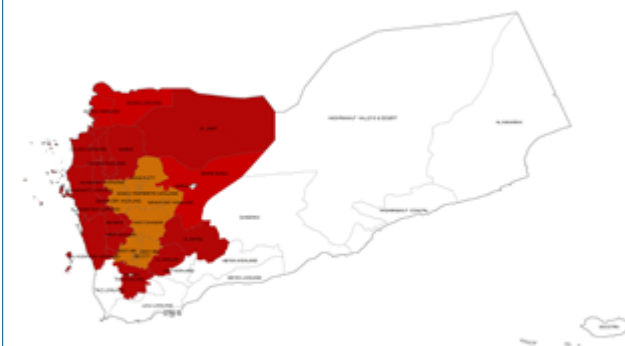
Caring and feeding practices

Almost one third of families have gaps in their diets, and rarely consume foods like pulses, vegetables, fruit, dairy products or meat (WFP, January 2022). About 40 percent of children aged 6–23 months in the north and 50 percent in the south were meeting minimum dietary diversity requirements. Exclusive breastfeeding prevalence was worse in the south (25 percent, indicating a 'Critical' public health concern) than the north (35 percent, indicating a 'Serious' public health concern) (IPC, February 2021).

MAP 3.68

IPC acute malnutrition situation, January–March 2021

From January–March 2021, out of 22 zones analysed in the north, 15 were classified in Critical (IPC AMN Phase 4) and seven in Serious (IPC AMN Phase 3).



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


Source: Yemen IPC AMN Technical Working Group, February 2021.

Acute food insecurity forecast, 2022

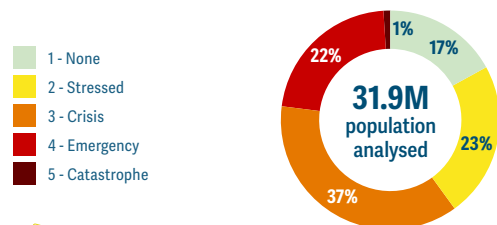
 **19.01M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in June–December 2022


 **11.71M people** in Crisis (IPC Phase 3)  **7.14M people** in Emergency (IPC Phase 4)  **0.16M people** in Catastrophe (IPC Phase 5)

 In June–December 2022, a Risk of Famine is projected under the worst-case scenario in Abs and Heyran districts (Hajjah governorate). Due to insufficient evidence during data collection, further assessment was recommended in Midi and Haradh districts to ascertain the Risk of Famine. Al Hali and Al Hawak districts (Al Hudaydah governorate) are not forecast to be at Risk of Famine within the projection period, but the analysis determined that, should a worst-case scenario apply for a protracted period beyond the projection period, these districts will likely shift into Famine.

60% of the analysed population was forecast to be in Crisis or worse (IPC Phase 3 or above)



 **7.22M people** were forecast to be in Stressed (IPC Phase 2)

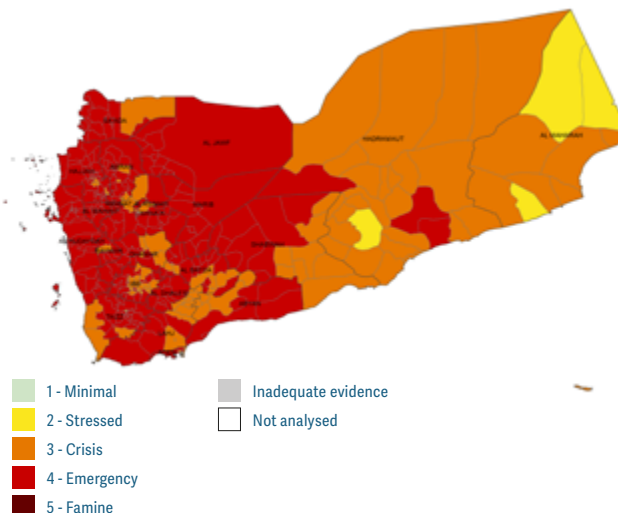
 The analysis covers **100%** of the country's total population of **31.9 million** people, excluding Midi and Haradh districts.

Source: IPC, March 2022.

MAP 3.69

Acute food insecurity situation, June–December 2022

Widespread Emergency (IPC Phase 4) conditions were expected in the western half of the country, while in the eastern areas, mostly Crisis (IPC Phase 3) conditions were expected.



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
Source: IPC, March 2022.

In 2022, Yemen's food crisis is expected to deteriorate further in the absence of improvements in conflict, economic growth and available humanitarian funding.

Conflict/insecurity

Conflict is likely to continue at current high levels in most areas, similar to past years, with typical volatility in conflict intensity. Port restrictions contributed to continued increases in food prices and severe fuel shortages, while fuelling the number of internally displaced people (IPC, March 2022). Levels of civil unrest are likely to increase in southern areas that are already affected by high

prices and inadequate provision of public services, including electricity and water. Temporary access constraints are expected during protests (FEWS NET, December 2021; IPC, March 2022).

Economic shocks, including COVID-19

Due to the impacts of protracted conflict and foreign reserve shortages, macroeconomic conditions are likely to continue deteriorating, leading the national currency to depreciate further (IPC, March 2022). Payment of pensions and civil servant salaries will likely remain intermittent or absent in many areas because of persistent government revenue shortages, with SBA areas worst affected. Real income will remain significantly below pre-conflict levels. Driven by currency depreciation, increased costs of imports, and increasing fuel prices, prices of essential food and non-food items are expected to increase, with southern areas worst affected (FEWS NET, December 2021).

The IPC projection did not take account of the impact of the war in Ukraine, which is expected to further increase fuel and food prices, given that Yemen imports 95 percent of its wheat, and more than 30 percent of it comes from the Russian Federation and Ukraine (WFP, February 2022; Save the Children, March 2022).

Weather extremes

The confluence of droughts, floods and cyclones expected in 2022, combined with crop pests and livestock diseases, are expected to impact livelihoods and constrain incomes and food availability, particularly for fishing-based livelihoods (IPC, March 2022).

Humanitarian assistance

In March 2022, additional contributions were confirmed that will likely provide varying levels of support to 13 million people until May. These contributions were provided after the completion of the IPC analysis and were not factored into the IPC results. However, current funding levels for June–December indicate that without further resources, 8 million beneficiaries will not receive assistance from June onwards (IPC, March 2022).

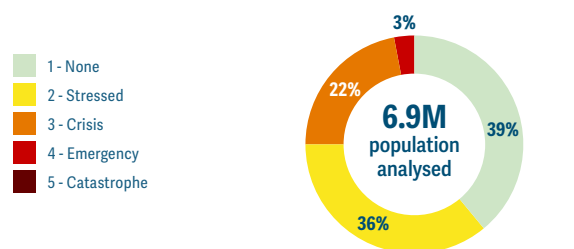
Zambia

Acute food insecurity overview 2021

 **1.72M people**
were in Crisis or worse (IPC Phase 3 or above) in February–March 2021

 **1.49M people** in Crisis (IPC Phase 3)  **0.24M people** in Emergency (IPC Phase 4)

25% of the analysed population was in Crisis or worse (IPC Phase 3 or above)



 **2.51M people** were in Stressed (IPC Phase 2)

The analysis covers 64 rural districts, **38%** of the country's total population of **18 million** people.

Source: IPC, February 2021.

National population

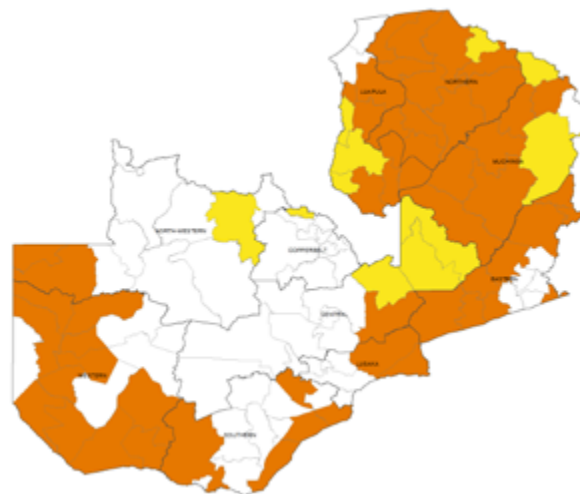


Source: WB 2020.

MAP 3.70

IPC acute food insecurity situation, February–March 2021

Out of the 64 districts analysed, 53 were classified in Crisis (IPC Phase 3) and 11 in Stressed (IPC Phase 2) during the peak of the lean period in February–March 2021.



- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Inadequate evidence
- Not analysed

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

Source: Zambia IPC Technical Working Group, February 2021.

Acute food insecurity trends

Numbers have decreased since 2020. The number of people in Crisis or worse (IPC Phase 3 or above) decreased from 2.3 million in October 2019–March 2020 to 1.7 million in February–March 2021, though this change is largely attributable to fewer districts being analysed in 2021 (IPC, August 2019 and March 2021).¹

When comparing the prevalence of the population in Crisis or worse (IPC Phase 3 or above), the food crisis has persisted at similar levels: 24 percent of the rural population analysed were in Crisis or worse (IPC Phase 3 or above) in October 2019–March 2020. From February–March 2021, the prevalence was one percentage point higher at 25 percent, reflecting severe constraints on access to food due to reduced incomes following the pandemic-associated economic downturn in 2020.

¹ The October 2019–March 2020 analysis covered 86 districts, or 53 percent of the population, while the February–March 2021 analysis covered 64 districts or 38 percent of the population (IPC, August 2019 and March 2021).

Drivers of the food crisis in Zambia in 2021

COVID-19 restrictions continued to limit income-generating opportunities – while high maize prices further curtailed household food access.

Economic shocks, including COVID-19

Movement restrictions to stem the increasing number of COVID-19 cases from January 2021 continued to restrict labour opportunities and wages for poorer households, especially in areas close to main urban centres. The effects of limited income-generating opportunities were particularly severe during the peak of the lean season (February–March), when rural households are more reliant on market purchases and daily wage labour to meet their consumption needs (IPC March 2021).

Maize prices remained high in 2021, attributable to rising production and marketing costs (WFP, August 2021), linked in part to the continued depreciation of the local currency against major currencies. National average maize prices in 2021 were above the five-year average and generally above 2020 levels throughout the year. The annual inflation rate increased from 14 percent in March 2020 to 22.8 percent in March 2021 (Chronic Poverty Advisory Network, April 2021).

Households running micro and small enterprises before the partial lockdown reported that they were unable to resume operations after measures eased for a variety of reasons, notably due to having spent their resources during the partial lockdown, rising costs of doing business, and a decline in the volume of customers stemming from fears of contracting the virus. Those who managed to resume operations reported a decline in revenue compared to the pre-lockdown period (Chronic Poverty Advisory Network, April 2021).

Although informal cross-border inflows, especially into Malawi, Mozambique, the Democratic Republic of the Congo and the United Republic of Tanzania were expected to be at normal levels, despite COVID-19-related border restrictions (IPC, March 2021), those involved in cross-border trade reported difficulties in conducting business due to the restrictions, exacerbated by local currency depreciation (Chronic Poverty Advisory Network, April 2021).

Weather extremes

The 2021 maize harvest crop was estimated at 3.5 million tonnes, slightly higher than the previous year's good outturn and more than 20 percent above the previous five-year average, mostly reflecting well-distributed rainfall throughout the season (FAO-GIEWS, March 2021). However, the late onset of the rainy season at the end of 2021 affected timely planting and casual labour opportunities that support household income in the lean period at the end of the year (SADC-FEWS NET, November, 2021).

Crop pests

Attacks by crop pests during 2021 affected household production and food stocks in some districts. The Central, Southern and Western provinces experienced an outbreak of African Migratory Locusts, leading to reductions in cereal production in some districts. Central, Copperbelt, Eastern, Lusaka and Southern provinces also experienced fall army worm attacks (IPC, August 2021).



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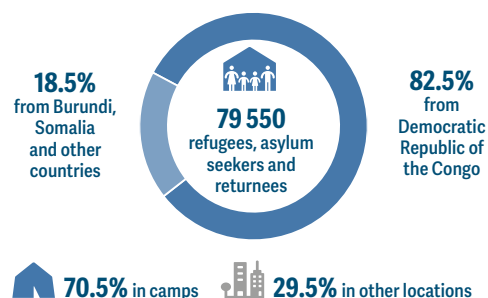
The effects of limited income-generating opportunities were particularly severe during the peak of the lean season (February–March), when rural households are more reliant on market purchases and daily wage labour to meet their consumption needs.

Displacement 2021

Refugees and asylum seekers

FIG 3.52

The majority of refugees hosted in Zambia reside in three settlements



Source: UNHCR, January 2022.

Zambia hosts close to 79 500 refugees and asylum seekers in three settlements – Mantapala, Meheba and Mayukwayukwa – and an additional 25 000 former refugees. The refugees arrived between 2001 and 2020 (UNHCR, December 2021).

The SENS 2021 analysis found that at least 40 percent of households in the three settlements had poor food consumption (reaching 46 percent in Meheba) and at least 36 percent had borderline food consumption. Nearly 80 percent of surveyed households in Mayukwayukwa had not consumed any iron-rich foods in the seven days before the survey (SENS 2021).

Key nutrition challenges

Recent data was unavailable at the time of publication for the GRFC 2022. However, multidimensional poverty and systemic challenges to food, water, sanitation, hygiene, health, social and economic systems have all contributed to malnutrition in Zambia.

Although the prevalence of wasting among children under 5 years is 'low', the prevalence of stunting remained high at nearly 35 percent, having fallen from 40 percent in 2013 (DHS, 2018). However, this progress masks regional disparities, with stunting levels as high as 43 percent in Nchelenge and Samfya. The levels were lowest in Ndola (15 percent), Mongu (18 percent) and Zambezi (19 percent) (USAID, May 2021).

Dietary diversity and micronutrient deficiencies are key nutrition challenges in Zambia. Some 58 percent of women of reproductive age and 31 percent of children under 5 were anaemic, while only 23 percent of children aged 6–23 months received the minimum dietary diversity. Moreover, only 13 percent of children aged 6–23 months received the minimum acceptable diet, while nearly 70 percent of children less than 6 months of age were exclusively breastfed (DHS, 2018).

In 2020, only 38 percent of households had access to basic drinking water, with the highest percentage in Chinsali district (80 percent) and the lowest percentage in Kalabo (8 percent). Approximately 20.4 percent of households had access to a basic sanitation facility (USAID 2020). Zambia also has a high HIV prevalence, at 11 percent, affecting 14.2 percent of women and 7.5 percent of men (Zambia Statistics Agency et al. 2019).

Additional drivers of acute food insecurity and malnutrition among refugees in Zambia

Zambia refugee legislation aims to promote self-employment and self-reliance. However, the need to acquire movement permissions/passes to leave the settlements, and the expense of accessing work permits are major challenges that often prevent refugees from establishing viable livelihoods (UNHCR, December 2021).

The main source of livelihoods in settlements is agriculture, like any other rural area in Zambia. Many refugees in Zambia have been allocated land to enable them to benefit from agricultural projects and to contribute to the local economy. It helps facilitate their local integration. However, agricultural production is hampered by lack of access to mechanised equipment, productive assets, and reliable markets (UNHCR, December 2021).

Given the limited rights and livelihood opportunities available to refugees, reliance on basic assistance is high. While refugees in all three settlements receive some food/cash support,

it is irregular and fluctuates based on funding availability (UNHCR, December 2021).

In addition, the reduction in informal work opportunities due to COVID-19 further limited opportunities to produce or earn an income to meet their own needs. Climatic shocks, including frequent prolonged dry spells and high temperatures, resulted in increased food prices for basic food commodities, impacting food security further (UNHCR, December 2021).

Poor IYCF practices are key drivers of malnutrition among refugee children in Zambia. Exclusive breastfeeding rates were just 20 percent in Mantapala, 38.5 percent in Mayukwayukwa and 50 percent in Meheba. Treatment of acute malnutrition and IYCF programmes remain very limited in refugee settlements. A high level of infectious diseases contribute to malnutrition in the settlements (SENS 2021).

Acute food insecurity forecast, 2022

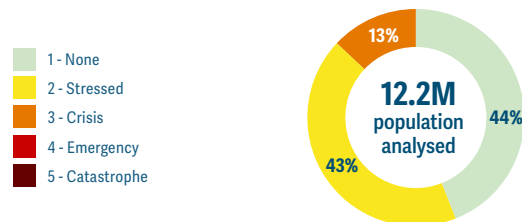
 **1.58M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in October 2021–March 2022


 **1.58M people**
in Crisis
(IPC Phase 3)

 The number of people in Crisis or worse (IPC Phase 3 or above) was relatively stable than the same period in 2021, as a substantial cereal harvest improved households' food access.

13% of the analysed population was forecast to be in Crisis or worse (IPC Phase 3 or above)



Note: No populations were expected to be in Emergency (IPC Phase 4) during this period.

 **5.18M people** were forecast to be in Stressed (IPC Phase 2)

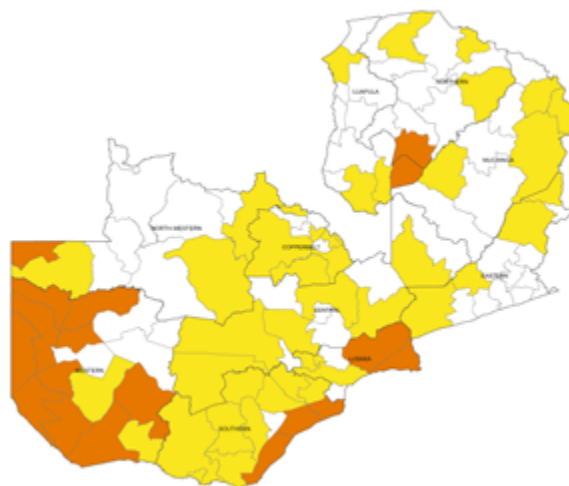
 The analysis covers 61 rural districts, **66%** of the country's total population of **18.4 million** people.

Source: IPC, August 2021.

MAP 3.71

IPC acute food insecurity situation, October 2021–March 2022

Of the 61 areas analysed, 18 were forecast to be in Crisis (IPC Phase 3) – ten of them in the Western province, three in the Southern, three in Luapula (Northern and North-Western provinces) and two in Lusaka. The remaining 43 were projected to be in Stressed (IPC Phase 2) during the lean season.



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

Source: Zambia IPC Technical Working Group, August 2021.

Crop prospects for 2022 are good due to abundant rainfall, and an economic recovery is forecast, but COVID-19 restrictions are still expected to dampen informal work opportunities and suppress wage rates, while maize prices remain at high levels.

Economic shocks, including COVID-19

A gradual recovery is expected in 2022, with GDP growth forecast to average 2.8 percent over 2021–2023. Higher copper prices, the commissioning of a new hydropower station, and expectations of another near-normal rainfall season are expected to support growth in agriculture and electricity production. However, the impact of COVID-19 will continue to dampen economic activity, especially in tourism and retail, and wholesale trade (WB, September 2021).

Labour opportunities and wage rates for poorer households in urban areas will likely be significantly lower compared to normal years due to the impact of COVID-19 restrictions. Rural households in contrast will likely have increased casual labour opportunities due to the above-normal forecast for the 2021/2022 rainfall season, but wage rates will likely be below normal (IPC, August 2021).

Weather extremes

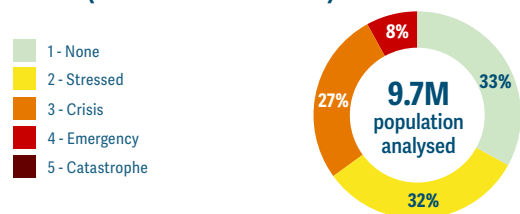
According to the Zambia Meteorological Department of the Ministry of Transport and Communications, the 2021/2022 rainfall season was forecast to be normal to above normal in North-western, Western, Southern, Copperbelt, Lusaka, Eastern and Luapula provinces from November 2021 to January 2022. Although rainfall has been around near-average levels in Western and most Central provinces, an erratic temporal distribution of rainfall in the east during the last quarter of 2021 is likely to have delayed plantings and hindered crop emergence, raising early concerns for yield prospects (FAO-GIEWS, January 2022).

Zimbabwe

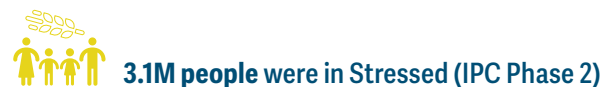
Acute food insecurity overview 2021



35% of the analysed population was in Crisis or worse (IPC Phase 3 or above)



FEWS NET's analyses suggest that the population requiring emergency food assistance was lower than the IPC estimate (see Technical Notes).



The analysis covers 60 rural districts, **62%** of the country's total population of **15.6 million** people.

Source: IPC, November 2020.

National population, 2020

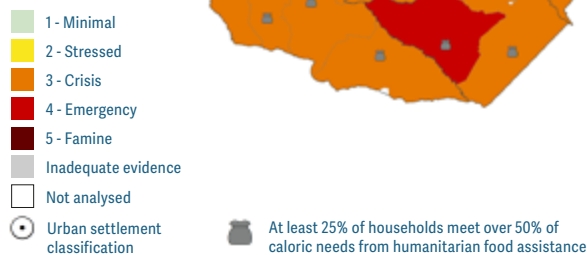
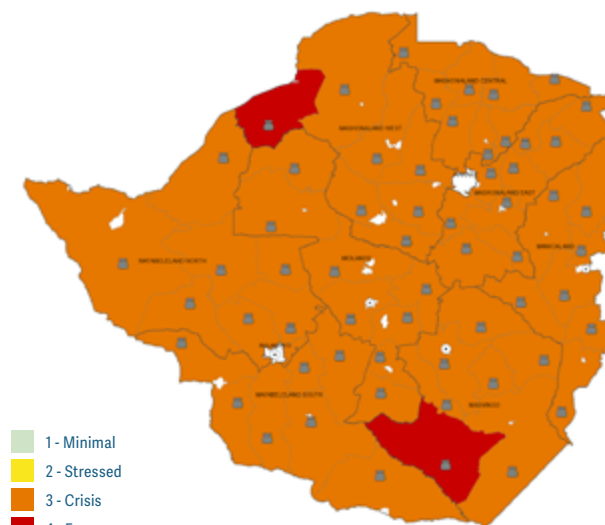


Source: WB 2020.

MAP 3.72

IPC acute food insecurity situation, January–March 2021

All rural areas were classified in Crisis (IPC Phase 3) except for Kariba and Mwenezi, which were both in Emergency (IPC Phase 4). In Buhera, Mazowe, Hwange and Mberengwa, at least half the analysed population was in Crisis or worse (IPC Phase 3 or above).



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

Source: Zimbabwe IPC Technical Working Group, November 2020.

Acute food insecurity trends

Numbers have decreased since 2020. At 3.4 million, the number of people facing Crisis or worse (IPC Phase 3 or above) during the 2021 lean season (January–March) was 21 percent lower than February–June 2020 when there were over 4.3 million people (45 percent of the rural population) in these phases.

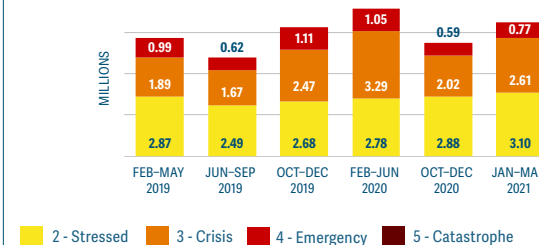
The number of people in Emergency (IPC Phase 4) fell between the 2020 and 2021 lean season from over 1 million to 769 000.

The 2020 peak estimates were the highest ever reported in the GRFC for Zimbabwe, even higher than the 4.1 million people in Crisis or worse (IPC Phase 3 or above) reported during the 2016–2017 El Niño drought that triggered a significant drop in crop production across all southern African countries.

However, it should be noted that the 2021 estimate accounts for substantial planned humanitarian food assistance. In the absence of humanitarian assistance, more people would have likely faced higher levels of acute food insecurity (IPC, November 2020).

FIG 3.53

Numbers of people in IPC Phase 2 or above, 2019–2021



Source: Zimbabwe IPC Technical Working Group.

Drivers of the food crisis in Zimbabwe in 2021

Poor harvests in 2019 and 2020 due to weather extremes, reduced income due to COVID-19 and rampant inflation continued to drive high levels of acute food insecurity in early 2021.

Economic shocks, including COVID-19

Following exceptionally high levels of consumer prices in 2020, the official annual food inflation rate peaked in January 2021 at 369 percent. This high rate reflected the effects of a weak currency, rapid growth in money supply and poor harvests in 2020 and 2019 and contributed to rising food prices, which in turn strained household budgets and limited access to food. Although rates remained at exceptionally high levels, food inflation declined through to September, owing to the effects of new supplies from the large domestic 2021 cereal harvest and a more stable exchange rate during this period. In the last quarter of 2021, inflation rates picked up moderately, underpinned by currency weakness, particularly in the parallel market, and this supported a steeper rise in prices of goods bought with Zimbabwean dollars, while prices in US dollar terms were reportedly more stable. The increase in the pump price for diesel and petrol in October was also a contributing factor (FAO-GIEWS, May 2021).

Income-earning opportunities remained limited due to persistent macroeconomic challenges and movement restrictions imposed by the government in response to COVID-19. The closure of land borders for non-essential movement of goods and services mostly affected the informal sector, including small-scale industries, cross-border traders, petty trading and remittances. Restrictions on informal transportation services not franchised to the government affected income-earning activities in both rural and urban areas, mainly through critical transport shortages and above-normal fares (FEWS NET, June 2021).

With a significant proportion of households experiencing reduced or no income since the onset of the pandemic and low coverage for social assistance programmes, some 6.1 million people in Zimbabwe were estimated to be living below the international poverty line in 2021 (WB, November 2021).

Weather extremes

Two consecutive years of abnormal dryness resulted in sharply reduced crop production in both 2019 and 2020, and consequently low household food stocks (IPC, October 2020). This had a major impact on food availability during the January–March 2021 lean season.

Cereal production in 2021 was estimated at a significantly above-average level, thanks to well-distributed rainfall since October 2020, an expansion in the sown area and excellent yields (FAO-GIEWS, May 2021). However, some deficit-producing areas of Masvingo, Matabeleland North and South, Midlands and Manicaland provinces had poorer-than-normal production (FEWS NET, December 2021).

In January 2021, tropical storms Chalane and Eloise further affected victims of the 2019 tropical cyclone Idai. Heavy rainfall associated with the storms substantially damaged vital infrastructure, restricting access to markets and increasing the cost of transport, goods and services, particularly in eastern and southern areas (FEWS NET, February 2021). Pasture conditions across most parts of the country were generally favourable, but poor in semi-arid areas due to overgrazing, increasing invasive species, bush encroachment, and poor grass regrowth (FEWS NET, June 2021).

Crop pests

In some parts of Manicaland, Matabeleland North, Midlands and Masvingo provinces, low populations of solitary adults and hoppers of African migratory locusts (AML), armoured crickets and fall armyworm affected some crops in maize, sorghum and sugarcane fields (FAO TBD).



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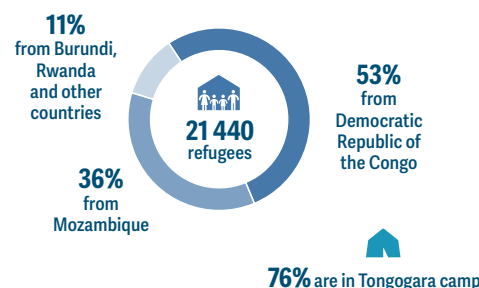
Poor harvests in 2020 and 2019 and contributed to rising food prices, which in turn strained household budgets and limited access to food.

Displacement in Zimbabwe in 2021

Refugees

FIG 3.54

The majority of the refugees hosted in Zimbabwe live in the Tongogara refugee camp



Source: UNHCR, September 2021.

Nearly all (95 percent) refugee households rely on WFP assistance as their main source of food (WFP, July 2021). While consumption of Vitamin A and protein-rich foods remained high among assisted refugee households at 87 percent and 98 percent respectively, relatively few (19 percent) consumed heme iron-rich foods.

Among refugee households, the prevalence of wasting ranged from 5–6 percent, while the prevalence of stunting reached 33 percent in Meheba and 53 percent in Mantapala (53 percent). Anaemia levels were high among under-5-year-olds (41–74 percent), and ranged between 43–49 percent among women. Dietary diversity is low among women aged 15–49 years with only 1.5 percent consuming at least five out of ten food groups. On average, women consumed 2.8 food groups in May 2021, indicating exposure to severe nutritional inadequacies (SENS, 2021; WFP, July 2021).

IDPs

41 540 IDPs

Source: IOM DTM Zimbabwe, December 2021.

As of May 2021, there were more than 41 500 IDPs in Manicaland and Masvingo provinces of Zimbabwe, displaced from their homes by repeated climatic shocks – tropical cyclone Idai in 2019, tropical storm Chalane in 2020, tropical storm Eloise in 2021, and above-normal rainfall during 2020–2021.

An IOM DTM assessment found food shortages were common. The majority of households in Buhera in Manicaland province were eating at most two meals a day (IOM DTM Zimbabwe, June 2021).

Many displaced families engage in seasonal farming, small-scale trading, irrigation farming, and small livestock rearing as their livelihood, but persistent cyclones and heavy rains have degraded both farming and grazing land in most affected areas. In most villages in Manicaland province IDPs had not been able to return to farming. In Buhera district, arable land in 87 of 124 assessed villages was damaged. Around 27 percent of respondents reported that their grazing land had been affected by the cyclones, affecting the wellbeing of their livestock (IOM DTM Zimbabwe, June 2021).

Additional factors driving acute food insecurity and malnutrition for refugees

Livelihood sources for refugees are limited, irregular and unstable. More than a quarter of households rely on casual labour (26 percent), and more than a fifth on gifts (21 percent) or selling/exchanging WFP food assistance (20.5 percent) as the main source of income. As a result, nearly all (95.5 percent) of refugees households rely on WFP food assistance as their main source of food (WFP, July 2021).

Key nutrition challenges



2.9% of children under 5 years were **wasted** in 2021
0.3% were **severely wasted**

Source: MICS, 2019.

While wasting levels were 'very low' by WHO thresholds, around **23.5 percent of children under 5 years were stunted in 2019, down from 32 percent in 2010 (MICS, 2019, Global Nutrition Report 2021).**

Climate-related shocks, the impact of COVID-19 restrictions on fragile livelihoods and high food prices all eroded access to food and the nutritional status of children.

The pandemic adversely affected access to health and nutrition services as well as education and protection, particularly for vulnerable groups (ECHO, February 2022).

Child-feeding practices were also an important contributor to child malnutrition. Cereal-based diets dominate, which increase the risk of micronutrient deficiencies, demonstrated by the active pellagra outbreaks in Zimbabwe in 2020. Only 17 percent of children receive the minimum dietary diversity and 11 percent receive the minimum acceptable diet (MICS, 2019). However, the country has made progress in improving access to the recommended minimum meal frequency. The percentage of children who met this indicator rose from 36 percent in 2015 to 68 percent in 2019 (Global Nutrition Report, 2020).

In 2021, 56 percent of children aged 6–59 months received the recommended dose of Vitamin A in the past 12 months (ZimVAC, August 2021)

In rural Zimbabwe, only 32 percent of households have basic sanitation and 25 percent still practise open defecation. Some 23 percent of rural households use unimproved drinking water sources (WHO/UNICEF, 2021).


Acute food insecurity forecast, 2022

 **2.5–3.0M people**

were forecast to be in Crisis or worse (IPC Phase 3 or above) in February–May 2022

The 2021 IPC analysis and the 2022 FEWS NET forecast are not comparable, therefore a 2021–2022 trend analysis will not be provided.

16–20% of the population analysed was in Crisis or worse (IPC Phase 3 or above)

 The analysis covers the country's total population of **15.3 million** people.

Source: FEWS NET, 2021.

Economic shocks (both related to COVID-19 and macroeconomic challenges) and weather extremes will continue to be the key drivers of acute food insecurity in 2022. Both drivers are expected to continue resulting in high food prices and reduced incomes.

Economic shocks, including COVID-19

In 2022, continued macroeconomic turbulence is expected to adversely impact livelihoods and access to food. Currency shortages, currency exchange fluctuations and inflationary pressures persisted in early 2022, resulting in rising prices for basic food and non-food items (FEWS NET, February 2022). This contributed to a monthly inflation rate of 66.1 percent in February, according to ZIMSTAT. Between January and February, the minimum cost of food needs and total household needs rose by 8.2 percent, representing the highest monthly increases since November 2020 (ZIMSTAT, February 2022).

During the projection period, COVID-19 restrictions will continue, but lockdowns and restrictions with high economic costs will likely be avoided to facilitate economic and livelihood activities. Land borders are expected to be reopened, enabling improvements in cross-border trade, remittances, and other activities, though vaccination and testing requirements may constrain poor households' ability to travel (FEWS NET, February 2022).

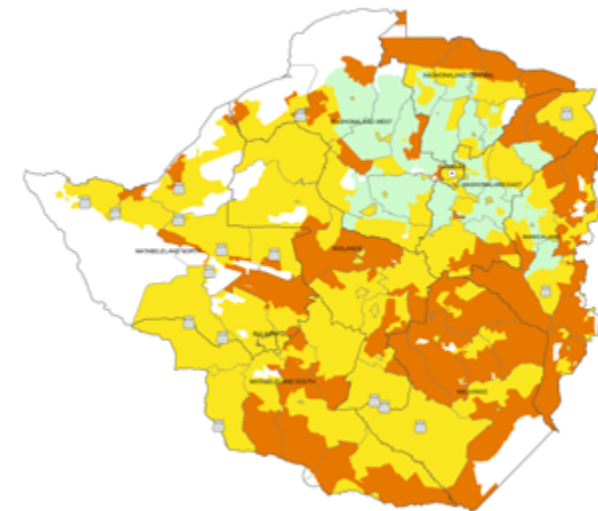
Weather extremes

The 2021/22 rainfall season started poorly and was characterised by erratic rainfall. Consequently, below-average harvests are expected in April or May, which will likely translate into short-lived improvements to food security. The majority of typical surplus-producing areas are therefore projected to be in Stressed (IPC Phase 2), while parts of Manicaland, Masvingo, Midlands and the Matebeleland provinces are expected to face Crisis (IPC Phase 3) by July, indicating an early start to the next lean season (FEWS NET, February 2022).

MAP 3.73

IPC acute food insecurity situation, February–May 2022

Crisis (IPC Phase 3) outcomes are likely to persist in typical deficit-producing areas, with Stressed! (IPC Phase 2!) outcomes likely where humanitarian assistance is significant. Urban areas are likely to be in Stressed (IPC Phase 2).



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

Source: FEWS NET, 2022.



TECHNICAL NOTES

Technical notes

Consultation, partnership and consensus: the foundation of the GRFC as a public good

1 | PRELIMINARY WORK

Technical consultation

Senior Committee

(17 partner organisations)

- Reaffirm the partner organisations' engagement and responsibilities
- Confirm scope of the report
- Provide initial guidance
- Endorse country selection criteria
- Agree on date of release

Selection of countries

FSIN and Technical Working Groups
(Food Security and Nutrition)

- Pre-select qualifying countries using the criteria endorsed by the Senior Committee

2 | RESEARCH AND PRODUCTION

Data gathering

FSIN and Technical Working Groups

- Identify and share relevant data sources and analyses
- Engage with regional and country-level food security and nutrition specialists to address gaps

Review of data/analysis

FSIN and Technical Working Groups

- Agree on methods and approach
- Validate the quality and reliability of data
- Identify peak acute food insecurity estimates
- Identify malnutrition data
- Identify key drivers of acute food insecurity

Drafting

FSIN and some members of
Technical Working Groups

- Initial drafting based on data validated by the Technical Working Groups
- Attempt to address data gaps through secondary literature reviews
- Produce relevant illustrations, maps, graphics and other visuals

FSIN and Technical Working Groups

- Review and comment on drafts
- Discuss until consensus is reached on draft report

3 | CLEARANCE

Technical consultation

Senior Committee

- Review and comment on the report
- Provide guidance on addressing gaps or lack of consensus
- Troubleshoot on technical challenges
- Discuss until consensus is reached

Finalise production

FSIN and Technical Working Groups

- Implement Senior Committee recommendations
- Refine draft
- Quality control check

FSIN

- Final proof-read

Institutional clearance

Senior Committee

- Each partner organisation validates the report

4 | RELEASE AND DISSEMINATION

Public release of global report

FSIN and the Global Network Against
Food Crises

- Publish full report and related materials online and in print – GRFC becomes a public good
- Virtual launch and dissemination events
- Translate and release abridged versions
- Communications and visibility campaign

Produce regional versions

FSIN, regional organisations and the
Global Network Against Food Crises

- Provide regional-level information and produce regional-level publications upon request

Consensus

All partners are in agreement with the approximate degree of magnitude and severity of acute food insecurity indicated for the countries included in this report except where a disclaimer is present. The differences stem from the varying interpretations of the data related to the factors which contribute to or indicate acute food insecurity.



Historical inclusion of countries/territories in the GRFC, 2017–2022

Over the six years of the GRFC's existence, 39 countries/territories have systematically appeared as food crises each year following the rigorous selection process. Of these, 19 have qualified as a major food crisis each year. *See tables.*

Fifteen countries have regularly been selected for inclusion but subsequently excluded because of recurrent data gaps. The Democratic People's Republic of Korea and the Bolivarian Republic of Venezuela have had estimates available only once during the five-year period and qualified as major food crises. The other countries regularly excluded are: the Plurinational State of Bolivia, Cuba, the Republic of the Congo, the Dominican Republic, Eritrea, the Kyrgyz Republic, the Lao People's Democratic Republic, Nepal, Papua New Guinea, Philippines, Tajikistan, Timor-Leste and Vanuatu.

Over the six years, several regional crises have featured, allowing for coverage of countries that would otherwise not have qualified for inclusion as a major food crises. The Lake Chad Basin region (Cameroon, Chad, the Niger and northeastern Nigeria) was included in 2017, 2018 and 2019 editions. The Central Sahel region (Burkina Faso, Mali and the Niger) was in the GRFC 2020. The Central American Dry Corridor region (El Salvador, Guatemala, Honduras) was in the 2018–2020 editions. As many of these food crises have grown in severity and magnitude, the countries have qualified for inclusion in their own right.

Since the GRFC 2019, populations of Syrian refugees, notably in Lebanon, and Venezuelan migrants in Colombia and Ecuador qualified for inclusion in the GRFC, although data was not always available. However, these populations were analysed within the broader context of their country of origin and were not reported individually.

Frequency of inclusion of food crises in the GRFC, 2017–2022

6 years	39 countries Afghanistan, Bangladesh, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Ethiopia, Gambia, Guatemala, Guinea, Guinea Bissau, Haiti, Honduras, Iraq, Kenya, Lesotho, Liberia, Libya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Nicaragua, Niger, Nigeria, Senegal, Sierra Leone, Somalia, South Sudan, Sudan, Syrian Arab Republic, Uganda, Yemen, Zambia, Zimbabwe
5 years	9 countries Angola, Côte d'Ivoire, Djibouti, El Salvador, Namibia, Pakistan, Palestine*, United Republic of Tanzania, Ukraine
4 years	3 countries Cabo Verde, Lebanon (refugees), Myanmar
3 years	2 countries Jordan (refugees), Turkey (refugees)
2 years	6 countries Colombia (migrants), Ecuador (migrants), Egypt (refugees), Nepal, Rwanda (refugees), South Africa
Once	6 countries Congo, Democratic People's Republic of Korea, Peru (migrants), Sri Lanka, Togo, Venezuela (Bolivarian Republic of)

The occupied Palestinian territories are referred to as Palestine in the GRFC 2022.

Frequency of inclusion of major food crises in the GRFC, 2017–2022

6 years	19 countries Afghanistan, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Ethiopia, Haiti, Madagascar, Malawi, Mozambique, Niger, Nigeria, Somalia, South Sudan, Sudan, Syrian Arab Republic, Yemen, Zimbabwe
5 years	8 countries Bangladesh, Burundi, Guatemala, Lesotho, Kenya, Pakistan, Palestine, Uganda
4 years	4 countries Burkina Faso, Honduras, Iraq, Zambia
3 years	4 countries Angola, El Salvador, Mali, Namibia
2 years	5 countries Djibouti, Sierra Leone, South Africa, United Republic of Tanzania, Ukraine
Once	2 countries Democratic People's Republic of Korea, Venezuela (Bolivarian Republic of)
Never	16 countries Cabo Verde, Congo, Côte d'Ivoire, Gambia, Guinea, Guinea-Bissau, Liberia, Libya, Mauritania, Myanmar, Nepal, Nicaragua, Rwanda, Senegal, Sri Lanka, Togo

Number of food crises and major food crises, GRFC 2017–2022

	2016	2017	2018	2019	2020	2021
Number of food crises	48	51	53	55	55	53
Number of major food crises	23	29	32	35	34	35

Map disclaimer

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

Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties.

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.

A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).

Notes to accompany Chapter 1

Comparing the 2021 and 2020 global numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent

In 2021, there were 53 countries/territories included in the GRFC versus 55 in 2020. The differences in coverage are due to the following reasons: Togo was not selected for analysis in 2021, given that it did not request emergency assistance to cope with shocks on its food security that year, however Benin did and was therefore selected for analysis. Although acute food insecurity estimates were acquired covering the refugee population in Rwanda, there was no data available in 2021 for Cabo Verde, Congo and Turkey (Syrian refugees).

Explaining the details of populations in Catastrophe (IPC Phase 5) in South Sudan and Somalia, 2016-2021

For **South Sudan**, the highest number of people in Catastrophe (IPC Phase 5) in 2017 (100 000) was during the period February–April, which does not correspond to the 2017 peak of acute food insecurity (IPC Phase 3 or above) (June–July). Similarly, the highest number of people in IPC Phase 5 in 2018 was higher in May–July (155 000) than during the peak period in February–April 2018 (50 000 people in IPC Phase 5). The highest number of people in IPC Phase 5 in 2019 was reached in February–April with 45 000 people, while the peak of acute food insecurity was in May–July 2019. Finally, the highest number of people in IPC Phase 5 in 2020 was reached in December (105 000) while the peak was in May–July 2020.

In **Somalia**, 17 000 people were reported in Phase 5 in August–December 2018, while the peak of acute food insecurity was in February–June 2018.

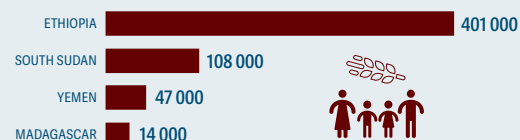
Explaining the total population analysed in the 10 largest food crises between 2016 and 2021

Between 2016 and 2021, the total population analysed in the 10 largest food crises increased from 398 million (excluding Pakistan) in 2016 to 492 million in 2021 in Afghanistan, the Democratic Republic of the Congo, Ethiopia, Haiti, Nigeria, Pakistan, South Sudan, the Sudan, Syrian Arab Republic, and Yemen.

Since 2016, the number of people in the ten largest food crises of 2021 increased by 61 million. While the countries affected by the ten largest food crises were mainly the same in 2016 and 2021 (e.g. Yemen, Ethiopia, Afghanistan, Nigeria, Syrian Arab Republic, Democratic Republic of the Congo, South Sudan and the Sudan), two countries were part of the list in 2016 and not in 2021 (i.e. Malawi and the Democratic People's Republic of Korea), while Pakistan and Haiti were part of the list in 2021. The Sudan has also been among the 10 largest crises each year, with the exception of 2017.

FIG X

Number of people in Catastrophe (IPC Phase 5) in 2021



Source: FSIN, using IPC data.

Comparability issues of acute food insecurity estimates in major food crises, 2020–2022

This section aims to highlight where the population coverage increased or decreased by more than one million people between 2020 and 2021, and between 2021 and 2022 (Afghanistan, Angola, Bangladesh, Democratic Republic of the Congo, Ethiopia, Kenya, Malawi, Mozambique, Niger, Nigeria, Pakistan, Somalia, Sudan, Uganda, Yemen, Zambia and Zimbabwe).

Afghanistan

At the request of the humanitarian community, the October 2021 IPC report used Flowminder population estimates, which are used for the annual HRP. Previous IPC reports (as well as the GRFC) employed National Statistics and Information Agency of Afghanistan (NSIA) population estimates. This change ensures complete alignment with future HRPs.

The total country population reported in 2020 is therefore 32.9 million people, compared to 41.7 million in 2021. If considering flowminder population data for both the 2020 and 2021 peak estimates, the increase in the population in Crisis or worse (IPC Phase 3 or above) between the two periods is around 5.9 million people, including 3.2 million in Emergency (IPC Phase 4).

Angola

Between 2020 and 2021 peak estimates, the geographical coverage of the IPC analysis increased from 23 communes in eight municipalities to 17 whole municipalities – all located in southwestern drought-affected provinces (Cunene, Huila and Namibe). Therefore, the population analysed increased from 0.9 million to 2.7 million. While it is not possible to precisely determine if the population in Crisis or worse (IPC Phase 3 or above) increased between the two years due to different population/geographical coverage, the prevalence among the population analysed remained mostly at similar levels – decreased from 62 to 58 percent – despite the larger population coverage.

Bangladesh

The peak estimates of 2020 and 2021 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, although the refugee population analysed remained similar (at around 0.9 million), the host population data used by WFP analysis decreased from around 2.6 million in 2020 to 0.6 million in 2021.

Democratic Republic of the Congo

In February–July 2021, around 27.3 million people were experiencing high levels of acute food insecurity (IPC Phase 3 or above), making the country the host of the highest number of people in urgent need of humanitarian assistance in the world. Although the magnitude is unprecedented, partly due to new and urban areas analysed, the prevalence of people in IPC Phase 3 or above slightly decreased compared to the previous analysis – from 33 percent in July–December 2020 to 28 percent in February–July 2021. The total magnitude thus mainly increased due to the increase in the population analysed (67 million in July 2020 versus 96 million in February 2021).

Ethiopia

The Belg and Meher-dependent areas analysed in the analysis covering October–December 2020, which contained the highest number of people in Crisis or worse (IPC Phase 3 or above) in 2020, and the areas analysed in the merged May–June 2021 analysis (peak 2021) period are comparable – i.e. 53 million people analysed in 2020 compared to 56 million in 2021. However, the latest analysis available for Ethiopia, covering July–September 2021, only examined populations in selected Meher-dependent areas of Amhara, Tigray, Oromia and SNNP regions – accounting for 19.7 million people.

For 2022, the forecast estimates are based on FEWS NET's IPC-compatible analysis, which analysed the entire country – or 106.7 million people compared to 56.3 million in 2021. Therefore, comparability of the 2020 and 2021 peak estimated with the latter is limited.

Kenya

While Arid and Semi-Arid Land (ASAL) areas and 12 urban districts were analysed in the 2020 peak estimate (accounting for 17.9 million people, 33 percent of the total country population), only ASAL areas were analysed in 2021 and in 2022, representing 15.2 million people or 28 percent of the country population.

Malawi

The peak estimates of 2020, 2021 and forecast for 2022 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the country population data used by the IPC analysis decreased from 19.7 million in December 2020 to 18.8 million in November 2021.

Mozambique

The 2020 and 2021 peak figures have similar coverage as both estimates were extracted from the same IPC analysis (from January 2021 covering October–December 2020 as well as January–March 2021). However, the coverage of the 2022 forecast differs from that of the peak estimates provided for 2020 and 2021, as it relies on the December 2021 IPC analysis. The January 2021 analysis covered 33 areas (21 rural and 12 urban areas (including Maputo city)) across 11 provinces, accounting for 60 percent of the total country population, or 18.1 million people. The December 2021 analysis covered 64 districts, of which 10 were provincial capital cities, four were urban districts of Maputo, and 50 were rural districts, comprising 47 percent of the total country population, or 14.5 million people.

Niger

The peak estimates of 2020, 2021 and forecast for 2022 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the country population data used by the CH analysis increased from 23.0 million in March 2020 to 24.9 million in November 2021.

Comparability issues of acute food insecurity estimates in major food crises, 2020–2022 *continued*

Nigeria

Although the CH analysis in the country regularly covered 16 states and the Federal Capital Territory (FCT), in October–December 2020 – corresponding to the peak figure that year – the state of Zamfara was not analysed. In addition, in October–December 2021 and June–August 2022, the analyses expanded to cover five new states (Abia, Crossriver, Edo, Enugu and Lagos).

Therefore, the population coverage significantly increased between the 2020 and 2021 peak figures – from 47 percent of the total country population or 103.2 million people to 73 percent representing 159.3 million people. If considering the same 15 states and FCT, the population in Crisis or worse (CH Phase 3 or above) increased from 9.2 million people in October–December 2020 – including 0.7 million in Emergency (CH Phase 4) – to 12.0 million in June–August 2021 with 0.8 million in Emergency (CH Phase 4), and then decreased to 8.6 million in October–December 2021.

However, if strictly applying the rules to determine peak estimates as per GRFC methodology, the peak estimates in absolute terms was reached in October–December 2021 with 12.9 million people across 21 states and FCT, compared to 12.8 million in June–August 2021 in 16 states and FCT.

The population/geographical coverage remained mostly similar (21 states and FCT) between the 2021 peak estimate and the 2022 forecast.

Pakistan

For Pakistan, while the 2020 peak estimates covered 13 districts of the province of Khyber Pakhtunkhwa only, the 2021 peak estimates covered nine rural districts of Balochistan, seven rural districts of Khyber Pakhtunkhwa and nine rural districts of Sindh. The population analysed therefore increased significantly between the 2020 and 2021 peak – from 5 million to 18.6 million people, which is mainly why the population in Crisis or worse (IPC Phase 3 or above) also increased significantly (1.2 to 4.7 million people).

However, it must be noted that the prevalence of people in IPC Phase 3 or above remained stable – at 25 percent – between 2020 and 2021.

For the 2022 forecast analysis, the coverage remained the same as for the 2021 peak, while the prevalence of Crisis or worse (IPC Phase 3 or above) is expected to increase to 26 percent.

Somalia

The peak estimates of 2020, 2021 and forecast for 2022 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the country population data used by the IPC analysis increased from 12.3 million in September 2020 to 15.7 million in September 2021 and April 2022.

Sudan

The peak estimates of 2020, 2021 and forecast for 2022 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the country population data used by the IPC analysis increased from 45.3 million in June 2020 to 46.8 million in March 2021.

Uganda

While the 2020 peak estimates covered only selected areas through the IPC (Karamoja, urban areas, refugee settlements and host community districts), the 2021 peak estimates and the 2022 were provided by FEWS NET's IPC-compatible analysis and covered the entire country inhabited by 45.7 million people. There is therefore, limited comparability between the 2020 peak estimates and 2021/2022.

Yemen

The peak estimates of 2020, 2021 and forecast for 2022 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the country population data used by the IPC analysis increased from 30.0 million in December 2020 to 31.9 million in March 2022.

Zambia

The comparison over the years of analysis is particularly limited as the population and geographical coverage decreased from 86 rural districts covering 53 percent of the country population in 2020 to 64 rural districts (38 percent) in 2021. In the 2022 forecast, while the geographical coverage decreased to 61 rural districts, the country population coverage increased to 66 percent.

Zimbabwe

While the 2020 and 2021 peak estimates covered only the rural population through IPC, the numbers are comparable (population coverage varied between 62 and 66 percent of the total country population). However, the 2022 forecast was provided by FEWS NET's IPC-compatible analysis and covered the entire country inhabited by 15.6 million people – comparability with 2020 and 2021 peak estimates is therefore limited.

Explanations of key terminology

Food insecurity

Food insecurity refers to the lack of secure access to sufficient amounts of safe and nutritious food for normal human growth and development and an active and healthy life. For people to be food secure, food must be both consistently 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

Acute food insecurity is any manifestation of food insecurity at a specific point in time that is of a severity that threatens lives, livelihoods or both, regardless of the causes, context or duration.

These acute states are highly susceptible to change and can 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 (IPC, 2019). Transitory food insecurity is a short-term or temporary inability to meet food consumption requirements related to sporadic crises, indicating a capacity to recover.

Food crisis

A food crisis occurs when rates of acute food insecurity and malnutrition rise sharply at local or national levels, raising the need for emergency food assistance.

This definition distinguishes a food crisis from chronic food insecurity, although food crises are far more likely among populations already suffering from prolonged food insecurity and malnutrition. A food crisis is usually set off by a shock or combination of shocks that affect one or more of the pillars of food security: food availability, food access, food utilization or food stability.

Chronic food insecurity

Chronic food insecurity refers to food insecurity that persists over time, largely due to structural causes. The definition includes seasonal food insecurity that occurs during periods with non-exceptional conditions.

Chronic food insecurity has relevance in providing strategic guidance to actions that focus on the medium- and long-term improvement of the quality and quantity of food consumption for an active and healthy life (FAO et al., 2021). FAO defines this as 'undernourishment' and it is the basis for the SDG indicator 2.1.1 published in the SOFI report.

According to the SOFI report, between 720 and 811 million people in the world faced hunger in 2020 – as many as 161 million more than in 2019. The number of people affected by severe food insecurity which is another measure that approximates hunger, shows a similar upward trend. Close to 12 percent of the global population was severely food insecure in 2020, representing 928 million people – 148 million more than in 2019. Nearly 2.37 billion people did not have access to adequate food in 2020 – an increase of 320 million people in just one year (FAO et al, July 2021).

Moderate food insecurity refers to the level of severity of food insecurity, based on the Food Insecurity Experience Scale (FIES), in which people face uncertainties about their ability to obtain food and have been forced to reduce, at times during the year, the quality and/or quantity of food they consume due to lack of money or other resources. It thus refers to a lack of consistent access to food, which diminishes dietary quality, disrupts normal eating patterns, and can have negative consequences for nutrition, health and well-being. Severe food insecurity refers to the level of severity of food insecurity in which people have likely run out of food, experienced hunger and, at the most extreme, gone for days without eating, putting their health and well-being at grave risk, based on the FIES (FAO et al., 2021).

Differing estimates of acutely food-insecure populations

Some organizations produce different estimates based on their own geographical coverage, methods and mandate, which they use for their own operational needs.

In 2021, the World Food Programme (WFP) produced acute food insecurity estimates that were higher than those released in the GRFC 2022 as they refer to different countries and methodologies that are not fully comparable with those provided in the GRFC.

In November 2021, WFP estimated that up to 283 million people could become acutely food insecure, or at risk, across 80 countries where it operates (WFP, November 2021).

Malnutrition

Malnutrition is an umbrella term that covers undernutrition and overweight, obesity and diet-related noncommunicable diseases (NCDs) such as heart disease, stroke, diabetes, and cancer. See <https://www.who.int/news-room/fact-sheets/detail/malnutrition>.

Undernutrition is a consequence of inadequate nutrient intake and/or absorption, and/or illness or disease. Acute malnutrition (wasting, thinness, and/or bilateral pitting oedema), stunting, underweight (a composite of stunting and wasting) and micronutrient deficiencies (e.g. deficiencies in vitamin A, iron) are all forms of undernutrition.

While overweight, obesity and NCDs are not a focus of this report, they often coexist with undernutrition within the same country, community, and even individual. Stunted children, for example, face a greater risk of becoming overweight as adults (UNICEF).

Malnutrition has immediate and long-reaching consequences, including stunting children's growth, increasing susceptibility to disease and infections, and contributing to 45 percent of deaths among children under 5 (WHO). The determinants of malnutrition also include inadequate access to healthcare, poor water and sanitation services, and inappropriate child feeding and care practices, as described in the UNICEF framework.

Explanations of key terminology *continued*

Wasting

A child who is too thin for his or her height as a result of rapid weight loss or the failure to gain weight is a sign of wasting which, although treatable, can lead to illness, disability or death. Moderate wasting is identified by weight-for-height z scores (WHZ) between -2 and -3 of the reference population, and severe wasting by WHZ below -3. Global acute malnutrition reflects both moderate and severe wasting in a population. Wasting can also be defined by Mid-Upper Arm Circumference (MUAC) measurements ≤ 12.5 cm, with severe wasting defined with a measurement of ≤ 11.5 cm. Wasting is used in this report to describe all forms of acute malnutrition including those diagnosed with oedema. Affected children require urgent feeding, treatment and care to survive. Wasting prevalence depicts the nutrition situation in the general population at a specific time: it can show marked seasonal patterns and can change quickly over time. The immediate cause of wasting is a severe nutritional restriction as a result of inadequate food intake or recent illness, such as diarrhoea, that hinders appropriate intake and absorption of nutrients.

Stunting

Stunting is associated with physical and cognitive damage which can affect learning and school performance, and lead to lost potential and lower earnings later in life. It can also affect the next generation. Efforts to prevent stunting are most effective in the 1 000 days between conception and a child's second birthday. Stunted children under 5 years are identified by a height-for-age z score (HAZ) below -2 of the reference population. Severe stunting is defined as HAZ below -3.

Classifying Famine

Famine is classified in the IPC according to an internationally accepted standard based on the following three criteria:

- At least 1 in 5 households face an extreme lack of food.
- At least 30% of children suffer from wasting.
- Two people for every 10 000 dying each day due to outright starvation or to the interaction of malnutrition and disease.

Given the severity and implications of this classification, all regular IPC protocols and special Famine protocols must be met before an area is classified in Famine (IPC Phase 5). See IPC version 3.1.

Areas can be classified as Famine Likely if minimally adequate evidence available indicates that a Famine may be occurring or will likely occur. This classification can trigger prompt action by decision-makers to address the situation while calling for urgent efforts to collect more evidence. Famine and Famine Likely are equally severe, the only difference is the amount of reliable evidence available to support the statement.

The IPC supports famine prevention by highlighting the following:

- IPC Phase 4 Emergency is an extremely severe situation where urgent action is needed to save lives and livelihoods.
- Households can be in Catastrophe (IPC Phase 5) even if areas are not classified in Famine (IPC Phase 5). This is the case when less than 20 percent of the population is experiencing famine conditions and/or when malnutrition and/or mortality levels have not (or not yet) reached famine thresholds. These households experience the same severity of conditions even if the area is not yet classified as Famine. This can occur due to the time lag between food insecurity, malnutrition and mortality, or in the case of a localized situation.
- Projections of Famine can be made even if the current situation is not yet classified as Famine, thus allowing early warning.

Risk of Famine is an IPC statement that highlights the potential deterioration of the situation compared to the most-likely scenario expected during the projection period. Although it is not an IPC classification, it indicates a worst-case scenario that has a reasonable probability of occurring.

Drivers of food crises

The drivers of food crises are often interlinked and mutually reinforcing, making it difficult to pinpoint the specific trigger or driver of each food crisis. The GRFC 2022 takes a practical approach by estimating which are the most salient for each country/territory out of the broad categories explained below.

Conflict/insecurity

This includes interstate and intra-state conflicts, internal violence, banditry and criminality, civil unrest or political crises often leading to population displacements and/or disruption of livelihoods and food systems.

It is a key driver of acute food insecurity because in conflict situations civilians are frequently deprived of their income sources. Food systems and markets are disrupted, pushing up food prices and sometimes leading to scarcities of water and fuel, or of food itself.

Landmines, explosive remnants of war and improvised explosive devices often destroy agricultural land, mills, storage facilities, machinery etc.

Conflict prevents businesses from operating and weakens the national economy, reducing employment opportunities, increasing poverty levels and diverting government spending towards the war effort.

Health systems are usually damaged or destroyed, leaving people reliant on humanitarian support – yet increasingly, insecurity and roadblocks prevent humanitarian convoys from reaching the most vulnerable, or aid agencies face lengthy delays, restrictions on personnel or the type or quantity of aid supplies, or insufficient security guarantees. Parties to conflict can deny people access to food as a weapon of war, especially in areas under blockade/embargo. Food insecurity itself can become a trigger for violence and instability, particularly in contexts marked by pervasive inequalities and fragile institutions. Sudden spikes in food prices tend to exacerbate the risk of political unrest and conflict (FAO et al., 2017).

Explanations of key terminology *continued*

For countries with conflict/insecurity being the primary driver during the past year, change to another primary driver needs serious consideration as recovery from conflict/insecurity takes a long time and may still remain as the underlying cause of food insecurity. In cases where conflict/insecurity has reduced and/or localized, with other drivers gaining more magnitude, the change in the primary driver from the previous year is possible.

For countries where the analysis is purely focused on the displaced populations, the primary driver should reflect the reason why those populations are displaced from their country of origin.

Weather extremes

These include droughts, floods, dry spells, storms, cyclones, hurricanes, typhoons and the untimely start of rainy seasons.

Weather extremes drive food insecurity by directly affecting crops and/or livestock, cutting off roads and preventing markets from being stocked. Poor harvests push up food prices and diminish agricultural employment opportunities and pastoralists' terms-of-trade, lowering purchasing power and access to food, and triggering an early lean season when households are more market-reliant because of reduced food stocks.

Adverse weather events are particularly grave for smallholder farmers and pastoralists who rely on agriculture and livestock-rearing to access food and often lack the resilience capacities to withstand and recover from the impacts of such shocks. People's vulnerability to weather shock events rests on their capacity to adapt and bounce back after their livelihood has been affected, as well as the scale and frequency of shocks. Repeated events further erode capacity to withstand future shocks.

Weather events and changes in climate can lead to an intensification of conflict, for instance, between pastoralist herders and farmers over access to water and grazing. There is ample evidence suggesting that natural disasters – particularly droughts – contribute to aggravating existing civil conflicts.

Economic shocks, including the effects of COVID-19

Economic shocks can affect the food insecurity of households or individuals through various channels. Macroeconomic shocks, characterized by, for instance, a contraction in GDP leading to high unemployment rates and loss of income for those affected households, or a significant contraction in exports and/or a critical decrease in investments and other capital inflows, bringing a significant currency depreciation and high inflation, increasing production costs and food prices and worsening terms of trade, which may lead to increases in acute food insecurity.

Increases in world market prices of staple grains, oil or agricultural inputs can affect food availability, push up domestic food prices for consumers and reduce their purchasing power. Economic shocks can also result at a more localized level, or hit only a particular socioeconomic category of households. For instance, pastoralists' facing lack of animal feed, veterinary services, subsequent deteriorating livestock body conditions and depressed livestock prices are likely to be affected by a reduction in purchasing power, and face a constrained access to food as a result.

Countries with weak governance and institutions, or facing armed conflict, civil unrest or instability, are particularly vulnerable to the impact of economic decline. High debt and limited fiscal space constrain economic growth, increase vulnerability to economic shocks and detract from development spending.

COVID-19 had an impact on the global economy and consequences at national level in terms of acute food insecurity in countries affected by crises. The pandemic has triggered the deepest global recession since the second world war. COVID-19 and the related containment measures affected worldwide trade, and brought a collapse in oil demand and low global oil prices, detrimental for revenues of countries depending on it (WB, June 2020).

The socioeconomic impacts of the pandemic, particularly in terms of income losses at the household level, are exacerbating and intensifying already fragile food security conditions. Across all food crisis countries, the pandemic is considered as a key factor that has worsened acute food insecurity and increased the need for

humanitarian assistance (FAO, December 2020). Furthermore, the uneven global economic recovery from the effects of the pandemic during 2021 has been a factor behind a surge in world market prices for food, which – despite a gradual recovery of jobs and incomes – has become a source of further acute food insecurity in several food crisis contexts.

Disease outbreaks

Disease outbreaks (occurrence of disease cases in excess of normal expectancy) are usually caused by an infection, transmitted through person-to-person contact, animal-to-person contact, or from the environment or other media. Water, sanitation, food and air quality are vital elements in the transmission of communicable diseases and in the spread of diseases prone to cause epidemics.

Displaced populations – particularly in overcrowded camps – are more susceptible to disease outbreaks which strained health systems cannot prevent or control (WHO). Epidemics and pandemics can also affect the ability of people to carry on their activities and livelihoods and, in the worst cases when widespread, may also affect markets and supply chains.

Crop pests and animal diseases

Transboundary plant pests and diseases can easily spread to several countries and reach epidemic proportions. Outbreaks and upsurges can cause huge losses to crops and pastures, threatening the livelihoods of vulnerable farmers and the food and nutrition security of millions at a time. Crop pests such as fall armyworms and desert locusts can damage crops and may lead to severe production shortfalls.

Desert locusts are the most destructive locust species. Locust swarms can be dense and highly mobile and can fly as much as 150 km a day, given favourable winds. They migrate across continents and are a potential threat to the livelihoods of one-tenth of the world's population. This pest is a serious menace to agricultural production in Africa, the Near East and Southwest Asia.

A locust can eat its own weight (about 2 grams) in plants every day. That means one million locusts can eat about one tonne of food each

Explanations of key terminology *continued*

day, and the largest swarms can consume over 100 000 tonnes each day, or enough to feed tens of thousands of people for one year (FAO).

All animal diseases have the potential to adversely affect human populations by reducing the quantity and quality of food, other livestock products (hides, skins, fibres) and animal power (traction, transport) that can be obtained from a given quantity of resources and by reducing people's assets. Of these, transboundary animal diseases tend to have the most serious consequences.

Transboundary Animal Diseases (TADs) may be defined as those epidemic diseases which are highly contagious or transmissible and have the potential for very rapid spread, irrespective of national borders, causing serious socioeconomic and possibly public health consequences.

These diseases, which cause a high morbidity and mortality in susceptible animal populations, constitute a constant threat to the livelihood of livestock farmers. Peste des petits ruminants (PPR), foot-and-mouth disease (FMD) or Rift Valley fever (RVF) often affect livestock and pastoralists' livelihoods in food-crisis contexts.

Forced displacement

Forced displacement is the movement of people who have been obliged to leave their homes, particularly to avoid the effects of armed conflict, generalized violence, violations of human rights or natural or human-made disasters. Displacement is often a side-effect of conflict, food insecurity and weather shocks.

Displaced people are often more vulnerable to food insecurity and malnutrition, having had to abandon their livelihoods and assets, undertake arduous journeys and settle in areas or camps with limited access to basic services or former social networks. Their rights are often restricted due to host country legal frameworks, resulting in a lack of access to land, employment and freedom of movement. They are often dependent on humanitarian assistance to meet their food needs.

Displaced populations often face severely compromised access to safe water and improved sanitation and are at increased risk of frequent outbreaks of infectious disease, which weakened health systems cannot treat, prevent or control. In crises, children are often not able to access other preventive services such as micronutrient supplementation and immunization, further increasing the risk of malnutrition. Displacement can also result in the break-down of familial and community networks that provide the necessary support and guidance needed for looking after young children.

Refugees

A refugee is someone who has been forced to flee his or her country because of persecution, war or violence. Refugees are recognized under various international agreements. Some are recognized as a group or on a 'prima facie' basis while others undergo an individual investigation before being given refugee status. The 1951 Convention and 1967 Protocol Relating to the Status of Refugees provide the full legal definition of a refugee.

Asylum-seekers

An asylum-seeker is a person seeking sanctuary in a country other than their own and waiting for a decision about their status. The legal processes related to asylum are complex and variable, which is a challenge when it comes to counting, measuring and understanding the asylum-seeking population. When an asylum application is successful, the person is awarded refugee status.

Internally displaced people (IDPs)

IDPs are those forced to flee their homes as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights, or natural or human-made disasters, and who have not crossed an international border.

Stateless people

A stateless person is someone who does not have a nationality of any country. Some people are born stateless, but others become stateless due to a variety of reasons, including sovereign, legal, technical or administrative decisions or oversights. The Universal Declaration of Human Rights underlines that 'Everyone has the right to a nationality' (UNGA, 1948, article 15).

Acute food insecurity classifications

Integrated Food Security Phase Classification (IPC)

The IPC results from a partnership of various organizations at the global, regional and country levels and is widely accepted by the international community as a global reference for the classification of acute food insecurity. There are around 30 countries currently implementing the IPC.

It provides the 'big picture' evidence base of food crises by assessing the following: how severe, how many, when, where, why, who, as well as the key characteristics. It provides data for two time periods – the current situation and future projection. This information helps governments, humanitarian actors and other decision-makers quickly understand a crisis (or potential crisis) and take action.

The IPC makes the best use of the evidence available through a transparent, traceable and rigorous process. Evidence requirements to complete classification have been developed, taking into consideration the range of circumstances in which evidence quality and quantity may be limited while ensuring adherence to minimum standards. To ensure the application of the IPC in settings where access for collecting evidence is limited or non-existent, specialized parameters have been developed. The IPC provides a structured process for making the best assessment of the situation based on what is known and shows the limitations of its classifications as part of the process.

IPC analysis teams consolidate and analyse complex evidence from different methods and sources (e.g., food prices, seasonal calendars, rainfall, food-security assessments, etc.), but the IPC allows them to describe their conclusions using the same, consistent language and standards and in a simple and accessible form. This harmonized approach is particularly useful in comparing situations across countries and regions, and over time.

The IPC technical manual version 3.1 provides information to appreciate and critically utilize IPC products as well as the protocols, including tools and procedures, to conduct the classification itself. See <https://www.ipcinfo.org/ipcinfo-website/resources/ipc-manual/en/>

Cadre Harmonisé (CH)

The Cadre Harmonisé is the multi-dimensional analytical framework used by CILSS for the analysis and identification of areas and groups at risk of acute food insecurity in the Sahel, West Africa and Cameroon. It aims to inform national and regional food crisis prevention and management systems. It takes into account various indicators of food and nutrition security outcomes and contributing factors.

The CH relies on existing food security and nutrition information systems that have been in place in most Sahelian countries since 1985, and more recently in other coastal countries of West Africa. There are 18 countries currently implementing the CH: Burkina Faso, Benin, Cameroon, Cabo Verde, Chad, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, the Niger, Nigeria, Senegal, Sierra Leone and Togo.

The CH version 2.0 clarifies the specific functions and protocols for carrying out an integrated and consensual analysis of acute food and nutrition insecurity. See: <http://www.cilss.int/index.php/2019/10/04/cadre-harmonise-manuel-version-2-0/>

IPC/CH five-phase classification

As a result of technical developments of the CH tools and processes and harmonization efforts carried out over the last decade, the IPC and the CH acute food insecurity approaches are very close to each other and give comparable figures of acute food insecurity. The five-phase classification is the same though there are a few differences pertaining to the use of certain indicators, classification of famine and estimation of humanitarian assistance.

Classification into five phases (1) None/Minimal, (2) Stressed, (3) Crisis, (4) Emergency, (5) Catastrophe/Famine is based on a convergence of available evidence, including indicators related to food consumption, livelihoods, malnutrition and mortality. Each of these phases has important and distinct implications for where and how best to intervene, and therefore influences priority response objectives. Populations in Crisis (IPC/CH Phase 3), Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5) are deemed to be those in need of urgent food, livelihood and nutrition assistance. Populations in Stressed (IPC/CH Phase 2) require a different set of actions — ideally disaster risk reduction and livelihood protection interventions. Classifying Famine (IPC/CH Phase 5), the fifth phase of food insecurity, requires analytical conclusions that meet three specific criteria. See page 234.

FEWS NET

Funded and managed by USAID's Bureau for Humanitarian Assistance (BHA), the Famine Early Warning Systems Network (FEWS NET) provides early warning and evidence-based analysis of acute food insecurity to inform humanitarian and development response. FEWS NET is monitoring 29 countries where it analyses the dynamics of food, nutrition and livelihood security so policymakers can design programmes that address the root causes of persistent or recurrent acute food insecurity, malnutrition and vulnerability.

FEWS NET classification is IPC compatible, which means it follows key IPC protocols but is not built on multi-partner technical consensus, so it does not necessarily reflect the consensus of national food security partners. See <https://fews.net/fews-data/333>

IPC 3.1 acute food insecurity reference table

Phase name and description	Phase 1 None/Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe/Famine	
	Households are able to meet essential food and non-food needs without engaging in atypical and unsustainable strategies to access food and income.	Households have minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in stress-coping strategies.	Households either have food consumption gaps that are reflected by high or above-usual acute malnutrition; or are marginally able to meet minimum food needs but only by depleting essential livelihood assets or through crisis-coping strategies.	Households either have large food consumption gaps which are reflected in very high acute malnutrition and excess mortality; or are able to mitigate large food consumption gaps but only by employing emergency livelihood strategies and asset liquidation.	Households have an extreme lack of food and/or other basic needs even after full employment of coping strategies. Starvation, death, destitution and extremely critical acute malnutrition levels are evident. (For Famine Classification, area needs to have extreme critical levels of acute malnutrition and mortality.)	
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 and reduce food consumption gaps	Save lives and livelihoods	Revert/prevent widespread death and total collapse of livelihoods	
First-level outcomes refer to characteristics of food consumption and livelihood change. Thresholds that correspond as closely as possible to the Phase descriptions are included for each indicator. Although cut-offs are based on applied research and presented as global reference, correlation between indicators is often somewhat limited and findings need to be contextualized. The area is classified in the most severe Phase that affects at least 20% of the population.						
Food security first-level outcomes	Food consumption (focus on energy intake) Quantity: Adequate energy intake Dietary energy intake: Adequate (avg. 2 350 kcal pp/day) Household Dietary Diversity Score: 5–12 food groups and stable Food Consumption Score: Acceptable and stable Household Hunger Scale: 0 (none) Reduced Coping Strategies Index: 0–3 Household Economy Analysis: No livelihood protection deficit Food Insecurity Experience Scale: (FIES 30 days recall): <-0.58	Quantity: Minimally Adequate Dietary energy intake: Minimally adequate (avg. 2 100 kcal pp/day) Household Dietary Diversity Score: 5-FG but deterioration ≥1 FG from typical Food Consumption Score: Acceptable but deterioration from typical Household Hunger Scale: 1 (slight) Reduced Coping Strategies Index: 4–18 Household Economy Analysis: Small or moderate livelihood protection deficit <80% FIES: Between -0.58 and 0.36	Quantity: Moderately Inadequate – Moderate deficits Dietary energy intake: Food gap (below avg. 2 100 kcal pp/day) Household Dietary Diversity Score: 3–4 FG Food Consumption Score: Borderline Household Hunger Scale: 2–3 (moderate) Reduced Coping Strategies Index: ≥19 (non-defining characteristics (NDC) to differentiate P3, 4 and 5) Household Economy Analysis: Livelihood protection deficit ≥80%; or survival deficit <20% FIES: > 0.36 (NDC to differentiate between Phases 3, 4 and 5)	Quantity: Very Inadequate – Large deficits Dietary energy intake: Large food gap; well below 2 100 kcal pp/day Household Dietary Diversity Score: 0–2 FG (NDC to differentiate P4 and 5) Food Consumption Score: Poor (NDC to differentiate P4 and 5) Household Hunger Scale: 4 (severe) Reduced Coping Strategies Index: ≥19 (NDC to differentiate P3, 4 and 5) Household Economy Analysis: Survival deficit ≥20% but <50% FIES: > 0.36 (NDC to differentiate between Phases 3, 4 and 5)	Quantity: Extremely Inadequate – Very large deficits Dietary energy intake: Extreme food gap Household Dietary Diversity Score: 0–2 FG Food Consumption Score: Poor (NDC to differentiate P4 and 5) Household Hunger Scale: 5–6 (severe) Reduced Coping Strategies Index: ≥19 (NDC to differentiate P3, 4 and 5) Household Economy Analysis: Survival deficit ≥50% FIES: > 0.36 (NDC to differentiate between Phases 3, 4 and 5)	
	Livelihood change (assets and strategies) Livelihood change: Sustainable livelihood strategies and assets Livelihood coping strategies: No stress, crisis or emergency coping observed	Livelihood change: Stressed strategies and/or assets; reduced ability to invest in livelihoods Livelihood coping strategies: Stress strategies are the most severe strategies used by the household in the past 30 days	Livelihood change: Accelerated depletion/erosion of strategies and/or assets Livelihood coping strategies: Crisis strategies are the most severe strategies used by the household in the past 30 days	Livelihood change: Extreme depletion/liquidation of strategies and assets Livelihood coping strategies: Emergency strategies are the most severe strategies used by the household in the past 30 days	Livelihood change: Near complete collapse of strategies and assets Livelihood coping strategies: Near exhaustion of coping capacity	
Second-level outcomes refer to area-level estimations of nutritional status and mortality that are especially useful for identification of more severe phases when food gaps are expected to impact malnutrition and mortality. For both nutrition and mortality area outcomes, household food consumption deficits should be an explanatory factor in order for that evidence to be used in support of the classification.						
Food security second-level outcomes	Global Acute Malnutrition based on Weight-for-Height Z-score	Acceptable <5%	Alert 5–9.9%	Serious 10–14.9% or > than usual	Critical 15–29.9% or > much greater than average	Extremely Critical ≥30%
	Global Acute Malnutrition based on Mid-Upper Arm Circumference	<5%	5–9.9%	10–14.9%	≥15%	
	Body Mass Index <18.5	<5%	5–9.9%	10–19.9%, 1.5 x greater than baseline	20–39.9%	≥40%
	Mortality*	Crude Death Rate <0.5/10,000/day Under-five Death Rate <1/10,000/day	Crude Death Rate <0.5/10,000/day Under-five Death Rate <1/10,000/day	Crude Death Rate 0.5–0.99/10,000/day Under-five Death Rate 1–2/10,000/day	Crude Death Rate 1–1.99/10,000/day or <2x reference Under-five Death Rate 2–3.99/10,000/day	Crude Death Rate ≥2/10,000/day Under-five Death Rate ≥4/10,000/day
Food security contributing factors	For contributing factors, specific indicators and thresholds for different phases need to be determined and analysed according to the livelihood context; nevertheless, general descriptions for contributing factors are provided below.					
	Food availability, access, utilization, and stability Adequate to meet short-term food consumption requirements Safe water ≥15 litres pp/day	Borderline adequate to meet food consumption requirements Safe water marginally ≥15 litres pp/day	Inadequate to meet food consumption requirements Safe water >7.5 to 15 litres pp/day	Very inadequate to meet food consumption requirements Safe water >3 to <7.5 litres pp/day	Extremely inadequate to meet food consumption requirements Safe water ≤3 litres pp/day	
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 extreme food consumption deficits	Effects of hazards and vulnerability result in near complete collapse of livelihood assets and/or near complete food consumption deficits		

The IPC Acute food insecurity reference table was updated on October 1st, 2021 to reflect the inclusion of the FIES among the food security first-level outcomes. For more information on the FIES, see Boero, V., Cafiero, C., Gheri, F., Kepple, A.W., Rosero Moncayo J. & Viviani, S. 2021. Access to food in 2020. Results of twenty national surveys using the Food Insecurity Experience Scale (FIES). FAO. <https://doi.org/10.4060/cb5623en>

Acute food insecurity classifications *continued*

WFP

Prior to any intervention, WFP undertakes an analysis of the food security situation with partners to perform effective targeting, determine the most appropriate type and scale of intervention and ensure the most efficient use of humanitarian resources.

The Consolidated Approach for Reporting Indicators of Food Security (CARI) is a WFP method used to analyse and report the level of food insecurity within a population. It addresses the multiple dimensions of food security. It uses up to five indicators – Food Consumption Score, food energy shortfall, poverty status, food expenditure share and livelihood coping strategies – that are consistent with internationally accepted food security concepts to assess a household’s current food security status and its coping capacity. Each surveyed household is classified into one of four food security categories – food secure, marginally food secure, moderately food insecure and severely food insecure. The results are presented within the CARI food security console, which provides the prevalence of each available CARI food security indicator. The aggregate results provide the population’s overall food security outcome or Food Security Index (FSI).

The five indicators included within the CARI approach can be used within IPC/CH analysis, but there are many differences between the two methods. The fundamental difference is that the CARI analyses primary data from a single household survey, while the IPC/CH uses a ‘convergence-of-evidence’ approach, incorporating and analysing a variety of secondary information. While the CARI assesses the situation at a fixed point in time with no forecasting, the IPC/CH provides the current snapshot and a projection based on the most likely scenario for any time period in the future.

Disclaimer on WFP rCARI methodology

The WFP remote-CARI (rCARI) methodology is implemented through remote surveys (phone or web-based) and rests on a reduced questionnaire adjusted for remote data collection compared to the traditional WFP CARI methodology. Comparability studies between the results of rCARI analyses and the results of traditional CARI methodology are ongoing, therefore there is uncertainty

at this stage regarding the degree of over- and under-estimation biases. (Preliminary studies comparing the use of CARI and rCARI for Syrian refugees in Lebanon suggested around 9–10 percent under-estimation of acute food insecurity). Caution in reading the corresponding numbers should be observed.

Example of a completed CARI console

DOMAIN		INDICATOR	FOOD SECURE (1)	MARGINALLY FOOD SECURE (2)	MODERATELY FOOD INSECURE (3)	SEVERELY FOOD INSECURE (4)
CURRENT STATUS	Food consumption	Food consumption group	Acceptable 51%		Borderline 36%	Poor 13%
COPING CAPACITY	Economic vulnerability	Food expenditure share	Share <50% 8%	50%-65% 9%	65%-75% 11%	Share >75% 72%
	Asset depletion	Livelihood coping strategy categories	66%	Stress 19%	Crisis 3%	Emergency 11%
FOOD SECURITY INDEX			6.9%	43.7%	42.7%	6.8%

An **Essential Needs Assessment (ENA)** uses both qualitative and quantitative analysis to understand whether and how people facing a crisis or shock, including in refugee settings, are meeting their essential needs. The assessment estimates the number of people unable to meet their essential needs and profiles these households by describing their main characteristics. Indicators include measures of households’ economic capacity to meet essential needs, multidimensional deprivation of essential needs, coping strategies employed, and how households prioritize needs. In the GRFC, ENA-driven food insecurity statistics are considered as ‘insufficient evidence’ due to lack of comparability with IPC/CH Phases.

In the GRFC 2022, an exception was made to include the ENA estimate produced for Cox’s Bazar, despite concerns of the GRFC Technical Working Group (TWG) regarding comparability. This exception was made due to the fact that several previous editions of the GRFC included ENA-based estimates from the JRP, therefore facilitating comparability of acute food insecurity levels across years. Additionally, in the absence of the ENA estimate, there would have been a data gap for this major crisis.

In preparation for the next GRFC process, the GRFC TWG will assess in more detail the comparability of ENA estimates to conventional estimates included in the GRFC. *For more information see <https://www.wfp.org/publications/essential-needs-guidelines-july-2018>*

Humanitarian Needs Overview and other estimates

HNO provides the People in Need (PiN) figure for the Food Security and Livelihoods cluster, based on data collected during the year. When no other sources for acute food insecurity estimates are available, the GRFC Food Security TWG assesses the methodology of the PiN to ensure it is based on acute food insecurity indicators and equivalent to Crisis or worse (IPC/CH Phase 3 or above) for use in the GRFC.

In previous editions of the GRFC, the HNO utilised acute food insecurity estimates for Palestine based on the results of the PCBS and Food Security Sector Socioeconomic and Food Security Survey (SEFSec). Although the GRFC TWG validated the use of this estimate for previous editions, as well as the GRFC 2022, it noted certain methodological limitations that may limit the comparability of SEFSec estimates relative to conventional GRFC sources. In particular, the SEFSec methodology does not utilise standard food consumption thresholds, but rather country-specific thresholds, which may complicate comparability with other methodologies. Additionally, the SEFSec methodology combines resilience, poverty and food security indicators together in one index, which mixes proxy indicators for chronic and acute food insecurity measurements. In contrast, the GRFC aims to focus solely on acute food insecurity as opposed to elements of chronic food insecurity, which are covered extensively in the annual SOFI reports.

Acute food insecurity in the GRFC, data sources and methods

Acute food insecurity peak estimates

The peak estimate is based on the highest number of acutely food-insecure people in the year in question. It does not reflect the latest analysis available but purely the observed peak.¹

Estimates derived from non-IPC/CH sources which are not accepted as fully compatible with IPC/CH phases by the TWG are recorded as insufficient data in the GRFC.

IPC/CH projections are estimated by outlining the main assumptions driving the evolution of food security in the projected period. The focus is on the 'most likely scenario' which helps to devise the potential changes on population distribution across IPC/CH phases. Also, IPC projections take into account the potential effects of already funded or likely to be funded and delivered humanitarian assistance in the area of analysis. CH projections forecast the number of people in CH Phase 3 or above in a scenario in which no food assistance is provided.

FEWS NET food assistance outlook briefs provide information on the projected severity and magnitude of acute food insecurity (using ranges) and indicate each country's food-insecure population in need of urgent humanitarian food assistance (IPC Phase 3 or above). FEWS NET projections are based on a scenario development approach where a set of assumptions regarding the evolution of food security drivers and their impacts on food security outcomes in the absence of humanitarian food assistance.

Data sources for the 2021 peak estimates and 2022 forecast estimates

	Number of countries in 2021	Number of countries in 2022
IPC	26	23
CH	15	15
FEWS NET	2	4
WFP CARI	4	
HNO	3	
OTHER (JRP, VASyR, SEFSec)	3	

While Cabo Verde was a data gap in 2021, acute food insecurity estimates for the country became available in 2022.

Forecast sections aim to identify the expected peak of AFI in the currently ongoing year (2022), notably through IPC/CH and IPC-compatible projections indicating the expected peak magnitude of population facing Crisis or worse (IPC/CH Phase 3 or above) in food crisis countries.

Data comparability rules and graphs

In Chapter 3 (Major Food Crises), all comparable analyses are included in the acute food insecurity graphs. Acute food insecurity estimates are considered comparable when the following criteria are met: the same areas are analysed, the difference in the population analysed is lower than 10 percentage points and the same sources and methodology are used.

Differences in areas analysed are mentioned in a note below the graph or in the annex, which displays all selected analysis periods per country. In the case of certain countries, historical analyses did not cover the same geographical areas, therefore only estimates related to areas analysed in all rounds of analysis are displayed in the graph to ensure comparability. For this reason, the figures in these graphs do not always correspond to the numbers in the IPC/CH briefs because they have been specifically altered to analyse the same geographical areas across analysis periods.

After confirming data comparability between two analyses, the GRFC has determined the following rules for defining whether a trend is stable, improving or worsening:

- If the change in the number of acutely food-insecure people remains lower than 250 000 people or 50 percent, whether increasing or decreasing, the trend is considered to be stable.
- If there is a decline in the number of acutely food-insecure population by 250 000 people or 50 percent, the trend is considered to be improving.
- If there is an increase in the number of acutely food-insecure population by 250 000 people or 50 percent, the trend is considered to be worsening.

¹ AFI estimates are rounded in this document.

Explanatory notes on disclaimers

Central African Republic

FEWS NET's analysis of available evidence suggests the population requiring humanitarian food assistance in 2021 and the magnitude of acute food insecurity is lower than in the IPC Technical Working Group analysis. FEWS NET and the IPC TWG took into account different considerations of food security and nutrition outcome indicator data, as well as different considerations of seasonality and access to key sources of food and income. This resulted in a lower estimate of the total number of people in Crisis or worse (IPC Phase 3 or above) as well as lower IPC area classifications in FEWS NET's analysis.

Democratic Republic of the Congo

FEWS NET's analysis of available evidence suggests the population requiring humanitarian food assistance and the severity of IPC area classifications in 2021 is lower than in the IPC TWG analysis. FEWS NET's analysis covers mostly eastern Democratic Republic of the Congo, whereas the IPC Technical Working Group covers most of the country, which accounts for some differences. When comparing similar areas, FEWS NET's estimates remain lower due in part to differences in contextualizing evidence and outcome indicators, including those related to livelihood change.

Ethiopia

FEWS NET's analysis of available evidence suggests the population requiring humanitarian food assistance in 2021 is lower than the IPC Technical Working Group estimate. FEWS NET and the IPC Technical Working Group took into account different considerations of food security outcomes indicators, particularly those related to livelihood coping, in the context of local livelihoods patterns and corroborating information. However, in conflict-affected parts of northern Ethiopia, FEWS NET's analysis of contributing factors and likely impacts on food consumption and nutrition suggest more severe acute food insecurity than assessed by the IPC TWG.

Haiti

FEWS NET's analysis of available evidence suggests the population requiring humanitarian food assistance in 2021 is lower than the IPC Technical Working Group estimate. FEWS NET and the IPC Technical Working Group took into account different considerations of food security outcome indicator data following its convergence of evidence among the various indicators, as well as with existing nutrition data. This resulted in a lower estimate of the total number of people in Crisis or worse (IPC Phase 3 or above) as well as lower IPC area classifications in FEWS NET's analysis.

Nigeria

FEWS NET's analysis of available evidence led to overall lower numbers of populations in Crisis (IPC Phase 3) or worse than estimated in the Cadre Harmonisé analysis. FEWS NET also analyzed food security in several areas of northeastern Nigeria either not covered by CH analysis or that the CH analyzed as part of larger areas. Among these areas, FEWS NET assessed that several were likely in Emergency (IPC Phase 4), resulting in differences between FEWS NET and the CH TWG's maps. Different area-level units of analysis also led FEWS NET and the CH, in part, to differ in their use of food security outcome indicator and livelihood information in their approaches to estimating the size of the acutely food insecure population.

Sudan

FEWS NET's analysis of available evidence suggests the population requiring humanitarian food assistance in 2021 is lower than the IPC Technical Working Group estimate. FEWS NET and the IPC TWG arrived at differing estimates as logistical challenges associated with COVID-19 created difficulties for reconciling subnational results during the remotely held national-level analysis. Among the technical issues most difficult to resolve were those surrounding the impacts of COVID-19 restrictions on local livelihoods and the inclusion of populations who face chronically poor food consumption and limited livelihoods options.

Yemen

FEWS NET's analysis of available evidence suggests the magnitude and severity of acute food insecurity in 2021 was lower than in the IPC analysis. FEWS NET and the IPC Technical Working Group took into account different considerations of food security outcome indicator information, while the analyses also took into account different levels of humanitarian food assistance. FEWS NET and the IPC TWG's analyses were also conducted at different times, which contributed, in part, to different considerations of the likelihood and expected levels of assistance provision.

Zimbabwe

FEWS NET's analysis of the available evidence suggests the population requiring humanitarian food assistance in 2021 is higher than the ZimVAC's IPC estimate. FEWS NET's analysis covers both rural and urban populations, while the ZimVAC's analysis only covers rural populations. At the same time, FEWS NET's analysis suggests the area-level severity of acute food insecurity is lower than in the ZimVAC analysis, largely due to different considerations of food security and nutrition outcome indicator data.

IPC acute malnutrition reference table

Phase name and description	Phase 1 Acceptable	Phase 2 Alert	Phase 3 Serious	Phase 4 Critical	Phase 5 Extremely Critical
	Less than 5% of children are acutely malnourished.	5-9.9% of children are acutely malnourished.	10-14.9% of children are acutely malnourished.	15-29.9% of children are acutely malnourished. The mortality and morbidity levels are elevated or increasing. Individual food consumption is likely to be compromised.	30% or more children are acutely malnourished. Widespread morbidity and/or very large individual food consumption gaps are likely evident.
	The situation is progressively deteriorating, with increasing levels of acute malnutrition. Morbidity levels and/or individual food consumption gaps are likely to increase with increasing levels of acute malnutrition.				
Priority response objective to decrease acute malnutrition and to prevent related mortality. ²	Maintain the low prevalence of acute malnutrition.	Strengthen existing response capacity and resilience. Address contributing factors to acute malnutrition. Monitor conditions and plan response as required.	Urgently reduce acute malnutrition levels through →		
			Scaling up of treatment and prevention of affected populations.	Significant scale-up and intensification of treatment and protection activities to reach additional population affected.	Addressing widespread acute malnutrition and disease epidemics by all means.
Global Acute Malnutrition (GAM) based on weight for height Z-score (WHZ)	<5%	5.0 to 9.9%	10.0 to 14.9%	15.0 to 29.9%	≥30%
Global Acute Malnutrition (GAM) based on mid-upper arm circumference (MUAC)	<5%				
	5-9.9%				
	10-14.9%				
	≥15%				
*GAM based on MUAC must only be used in the absence of GAM based on WHZ; the final IPC Acute Malnutrition phase with GAM based on MUAC should be supported by an analysis of the relationship between WHZ and MUAC in the area of analysis and also by using convergence of evidence with contributing factors. In exceptional conditions where GAM based on MUAC is significantly higher than GAM based on WHZ (i.e. two or more phases), both GAM based on WHZ, and GAM based on MUAC should be considered, and the final phase should be determined with convergence of evidence.					

The IPC Acute Malnutrition Scale classifies the severity of acute malnutrition in the population of reference. The IPC analysis process reviews all contributing factors affecting acute malnutrition in the area of analysis, such as dietary intake, disease, feeding and care practices, health and WASH environment and contextual information such as access to services and mortality are all included in the analysis.

Nutrition and health, data sources and key indicators

Wasting

Moderate wasting using the weight for height indicator is identified by weight for height z scores (WHZ) between -2 and -3 of the reference population, and severe wasting by WHZ below -3. Wasting reflects both moderate and severe wasting in a population. Wasting can also be defined by Mid-Upper Arm Circumference (MUAC) measurements ≤12.5 cm, with severe wasting defined with a measurement of ≤11.5 cm.

Severity index for prevalence of wasting in children aged 6–59 months

Prevalence ranges	Label
< 2.5%	Very low
2.5–< 5%	Low
5–< 10%	Medium
10–< 15%	High
≥ 15%	Very high

Source: De Onis et al. *Public Health Nutrition*, 2018. Available at: <https://www.who.int/nutrition/team/prevalence-thresholds-wasting-overweight-stunting-children-paper.pdf>

Stunting

Stunted children under 5 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.

Severity index for prevalence of stunting in children aged 6–59 months

Prevalence ranges	Label
< 2.5%	Very low
2.5–10%	Low
10–< 20%	Medium
20–<30%	High
≥ 30%	Very high

Source: De Onis et al. *Public Health Nutrition*, 2018. Available at: <https://www.who.int/nutrition/team/prevalence-thresholds-wasting-overweight-stunting-children-paper.pdf>

Minimum dietary diversity

This indicator refers to the percentage of children aged 6–23 months who receive foods from five or more out of eight food groups a day. The eight food groups are: i. breastmilk; ii. grains, roots and tubers; iii. legumes and nuts; iv. dairy products (infant formula, milk, yogurt, cheese); v. flesh foods (meat, fish, poultry and liver/organ meats); vi. eggs; vii. vitamin-A rich fruits and vegetables; viii. other fruits and vegetables. In some surveys, minimum dietary diversity is calculated based on seven food groups, excluding breastmilk. In these cases, the indicator refers to the percentage of children aged 6–23 months who receive foods from four or more out of seven food groups a day.

Minimum meal frequency

The indicator refers to the proportion of children aged 6–23 months who receive solid, semi-solid or soft foods at least the minimum number of recommended times a day depending on their age and whether they are breastfed.

Minimum acceptable diet

This composite indicator combines meal frequency and dietary diversity to assess the proportion of children aged 6–23 months consuming a diet that meets the minimum requirements for growth and development.

Prevalence ranges	Label
< 70%	Phase 1 - Acceptable/minimal
40–70%	Phase 2 - Alert/stress
20–39.9%	Phase 3 - Serious/severe
10–19.9%	Phase 4 - Critical/extreme
< 10%	Phase 5 - Extremely critical/catastrophic

Source: Preliminary thresholds suggested by IFE Core Group.

Nutrition and health, data sources and key indicators *continued*

Percentage of households not consuming micronutrient-rich food (analysed in refugee populations)

This refers to the proportion of households with no member consuming any vegetables, fruits, meat, eggs, fish/seafood, and milk/milk products over a reference period of 24 hours. The food group of vegetables, fruits, meat, eggs, fish/seafood, and milk/milk products are the same as the 12 food groups defined by FAO (2011).

Exclusive breastfeeding

Exclusive breastfeeding in the first six months followed by the timely introduction of safe and nutritionally adequate complementary foods with continued breastfeeding until 2 years of age or beyond ensures children receive all the nutrients they need. This indicator refers to the percentage of infants 0–5 months of age who were fed only breast milk during the previous day.

Prevalence ranges	Label
> 70%	Phase 1 - Acceptable/minimal
50–70%	Phase 2 - Alert/stress
30–49.9%	Phase 3 - Serious/severe
11–29.9%	Phase 4 - Critical/extreme
< 10%	Phase 5 - Extremely critical/catastrophic

Source: adapted from UNICEF Breastfeeding Score Card.

Prevalence of anaemia

This indicator refers to the proportion of children aged 6–59 months and of reproductive age women (15–49 years) who are anaemic. Anaemia is a condition in which the number of red blood cells or their oxygen-carrying capacity is insufficient to meet physiological needs, which varies by age, sex, altitude, smoking and pregnancy status. Iron deficiency is thought to be the most common cause of anaemia globally, although other conditions, such as folate, vitamin B12 and vitamin A deficiencies, chronic inflammation, parasitic infections and inherited disorders can all cause anaemia. In its severe form, it is associated with fatigue, weakness, dizziness and drowsiness. Pregnant women and children are particularly vulnerable (WHO).

Prevalence ranges	Label
< 5.0%	No public health problem
5.0–19.9%	Mild public health problem
20.0–39.9%	Moderate public health problem
≥ 40.0%	Severe public health problem

Source: WHO, 2008.

COVID-19 disruption to nutrition/health services

UNICEF Quarterly Tracking on the Situation of Children in COVID-19 draws on periodic country office reporting against an evolving questionnaire, first initiated 12 March 2020. Country office responses rely on varying sources and in some cases the best estimates combine multiple sources, though figures may not accurately represent the full national response to the COVID-19 pandemic. Countries are requested to report based on representative administrative data, representative survey data, or other sources or estimation and note and provide explanation if estimates are particularly weak.

Access to basic drinking water services

Improved drinking water sources are those which, by nature of their design and construction, have the potential to deliver safe water. The WHO and UNICEF Joint Monitoring Program for Water Supply Sanitation and Hygiene (JMP) subdivides the population using improved sources into three groups (safely managed, basic and limited) according to the level of service provided. In order to meet the criteria for a safely managed drinking water service, people must use an improved source meeting three criteria: accessible on premises; available when needed; free from contamination. If the improved source does not meet any one of these criteria but a round trip to collect water takes 30 minutes or less, then it is classified as a basic drinking water service. If water collection from an improved source exceeds 30 minutes, it is categorized as a limited service (WHO and UNICEF).

Limitations and data challenges, 2022

The number of people in Crisis or worse (IPC/CH 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 because some households may only be classified in IPC/CH Phase 1 or 2 because they receive assistance, and are in fact in need of continued action. In many countries, the number in Crisis or worse (IPC/CH Phase 3 or above) refers to populations in need of action further to that already taken.

Absence of estimates for populations in Stressed (IPC/CH Phase 2) due to the use of non-IPC/CH data sources for 12 countries

Bangladesh (Cox's Bazar), Egypt (Syrian refugees), Iraq, Jordan (Syrian refugees), Lebanon (Syrian refugees), Libya, Nicaragua, Palestine, Rwanda (refugees), the Syrian Arab Republic, Uganda and Ukraine (Donetsk and Luhansk oblasts).

Lack of/low data availability for refugee food security

Refugee food security is measured in various ways across refugee populations and data are not systematically collected, disaggregated, consolidated or shared.

WFP CARI or ENA assessments are available for some refugee populations (Cox's Bazar, Egypt, Jordan, Lebanon and Rwanda) but are not accepted as equivalent to IPC/CH phases by the GRFC 2022 technical working group.

Limited availability and frequency of IPC acute malnutrition analyses

Only 16 countries conducted an IPC acute malnutrition analysis covering a portion of 2021: Angola, Burkina Faso, Burundi, Central African Republic, Chad, Democratic Republic of the Congo, Kenya, Madagascar, Mali, Mozambique, Nigeria, Pakistan, Somalia, South Sudan, Uganda, Yemen.

Limited availability of updated information and frequency of national nutrition surveys

Seven out of the 35 major food-crisis countries in chapter 3 do not have national updated/recent malnutrition prevalence and IYCF data at the sub-national or national level beyond 2019.

Limited forecast analysis (acute food insecurity and malnutrition)

For several countries with no IPC/CH or compatible products where alternative estimates are used, forecast analyses are not available. In some cases where IPC/CH is used, data collection and analysis updates are not as frequent as might be needed to provide estimates for the forecast section of this report. IPC-compatible analyses offer range values for forecasts rather than precise estimates. Not all countries with a 2021 IPC acute malnutrition analysis had a projection beyond publication of the GRFC 2022.

Data comparability challenges

Following the declaration of the pandemic in March 2020, household data collection using in-person interaction was suspended, obliging analysts to collect food security and nutrition data remotely. COVID-19 affected the ability to monitor the pandemic's impact on food security and nutrition and disrupted the delivery of nutrition services.

In response, IPC and CH rapidly adopted virtual multi-stakeholder training and online analysis, and a complete virtual IPC/CH process was designed and implemented at country level to produce IPC/CH analyses that are fully compliant with established protocols.

Countries are also exploring how to adapt face-to-face nutrition surveys and assessments, programme monitoring, and situation analysis processes in order to generate data for reporting and response planning.

For some countries, the coverage of food security analyses within and between years varies in terms of population (e.g. rural only vs. rural and urban) and/or areas analysed (e.g. part of the country vs. whole country). This affects the comparability of the number of acutely food-insecure people between time periods. In a few countries, data sources changed over years, this hampers comparability with previous years and highlights the importance for food-crisis countries to conduct an IPC/CH analysis at least once a year.

Detailed, comparative analysis on refugee food security at country, regional or global level is not possible with current systems and processes and particularly not in a comparable way to IPC/CH protocols.



APPENDIX 1

TRENDS GRAPHS FOR NUMBERS OF PEOPLE IN
CRISIS OR WORSE (IPC/CH PHASE 3 OR ABOVE)

Numbers of people in Afghanistan in IPC Phase 2 or above, 2019–2022

FIGURE A1

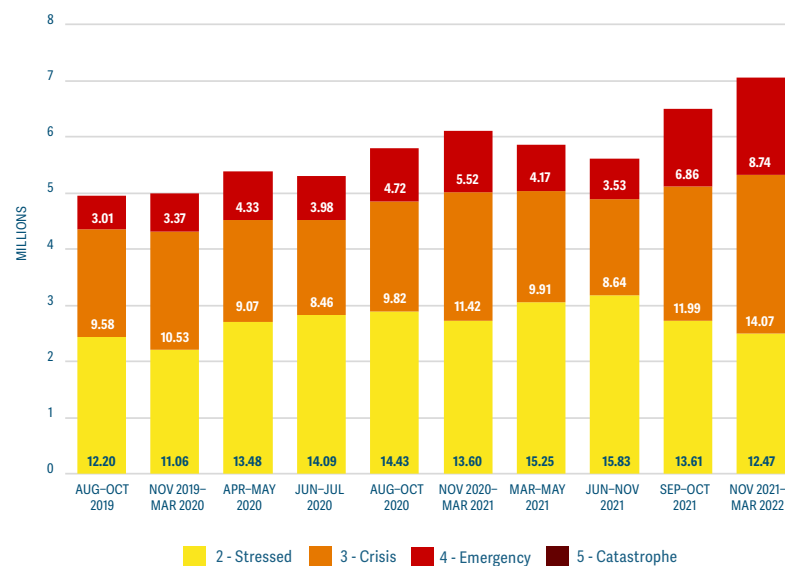


TABLE A1

	AUG-OCT 2019	NOV 2019-MAR 2020	APR-MAY 2020	JUN-JUL 2020	AUG-OCT 2020	NOV 2020-MAR 2021	APR-MAY 2021	JUN-AUG 2021	SEP-OCT 2021	NOV 2021-MAR 2022
STRESSED (PHASE 2)	12.20	11.06	13.48	14.09	14.43	13.60	15.25	15.83	13.61	12.47
CRISIS (PHASE 3)	9.58	10.53	9.07	8.46	9.82	11.42	9.91	8.64	11.99	14.07
EMERGENCY (PHASE 4)	3.01	3.37	4.33	3.98	4.72	5.52	4.17	3.53	6.86	8.74
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Data is displayed from 2019 onwards due to the fact that flowminder population estimates were available from 2019 onwards. The base population used in 2019 was 36.66 million according to Flowminder estimates and rose to 41.7 million by the October 2021 IPC.

Source: Afghanistan IPC Technical Working Group.

Numbers of people in Burkina Faso in CH Phase 2 or above, 2014–2022

FIGURE A2

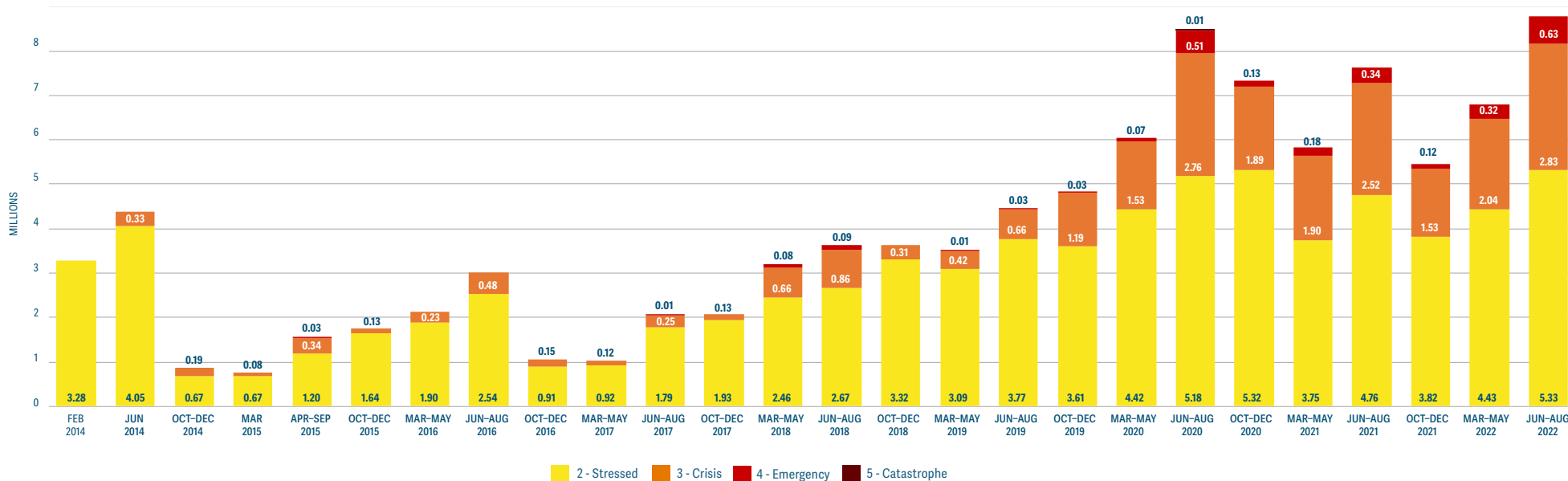


TABLE A2

	FEB 2014	JUN 2014	OCT-DEC 2014	MAR 2015	APR-SEP 2015	OCT-DEC 2015	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022
STRESSED (PHASE 2)	3.28	4.05	0.67	0.67	1.20	1.64	1.90	2.54	0.91	0.92	1.79	1.93	2.46	2.67	3.32	3.09	3.77	3.61	4.42	5.18	5.32	3.75	4.76	3.82	4.43	5.33
CRISIS (PHASE 3)		0.33	0.19	0.08	0.34	0.13	0.23	0.48	0.15	0.12	0.25	0.13	0.66	0.86	0.31	0.42	0.66	1.19	1.53	2.76	1.89	1.90	2.52	1.53	2.04	2.83
EMERGENCY (PHASE 4)					0.03						0.01		0.08	0.09		0.01	0.03	0.03	0.07	0.51	0.13	0.18	0.34	0.12	0.32	0.63
CATASTROPHE (PHASE 5)																				0.01						

Source: CH.

Numbers of people in Burundi in IPC Phase 3 or above, 2014–2022

FIGURE A3

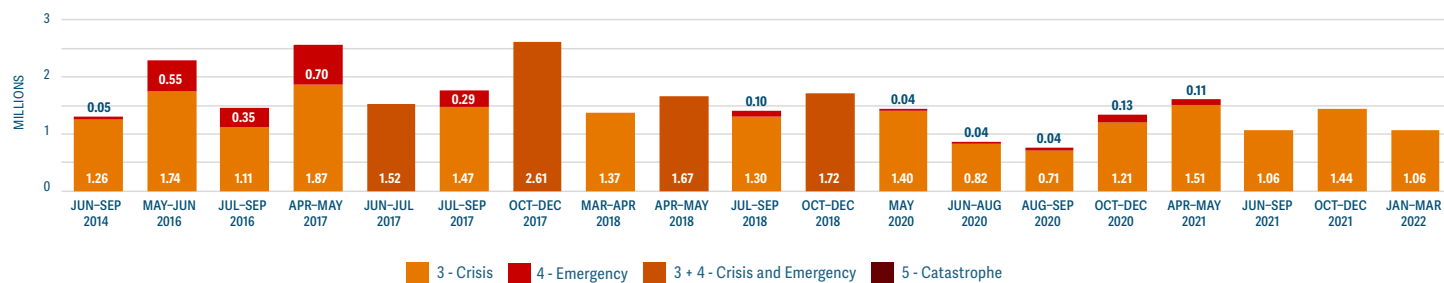


TABLE A3

	JUN-SEP 2014	MAY-JUN 2016	JUL-SEP 2016	APR-MAY 2017	JUN-JUL 2017	JUL-SEP 2017	OCT-DEC 2017	MAR-APR 2018	APR-MAY 2018	JUL-SEP 2018	OCT-DEC 2018	MAY-20	JUN-AUG 2020	AUG-SEP 2020	OCT-DEC 2020	APR-MAY 2021	JUN-SEP 2021	OCT-DEC 2021	JAN-MAR 2022
CRISIS (PHASE 3)	1.26	1.74	1.11	1.87		1.47		1.37		1.30		1.40	0.82	0.71	1.21	1.51	1.06	1.44	1.06
EMERGENCY (PHASE 4)	0.05	0.55	0.35	0.70		0.29				0.10		0.04	0.04	0.04	0.13	0.11			
CRISIS & EMERGENCY (PHASE 3 + 4)					1.52		2.61		1.67		1.72								

From 2020 onwards, data for disaggregated IPC phases was consistently available.

Source: Burundi IPC Technical Working Group.

Numbers of people in Cameroon in CH Phase 2 or above, 2018–2022

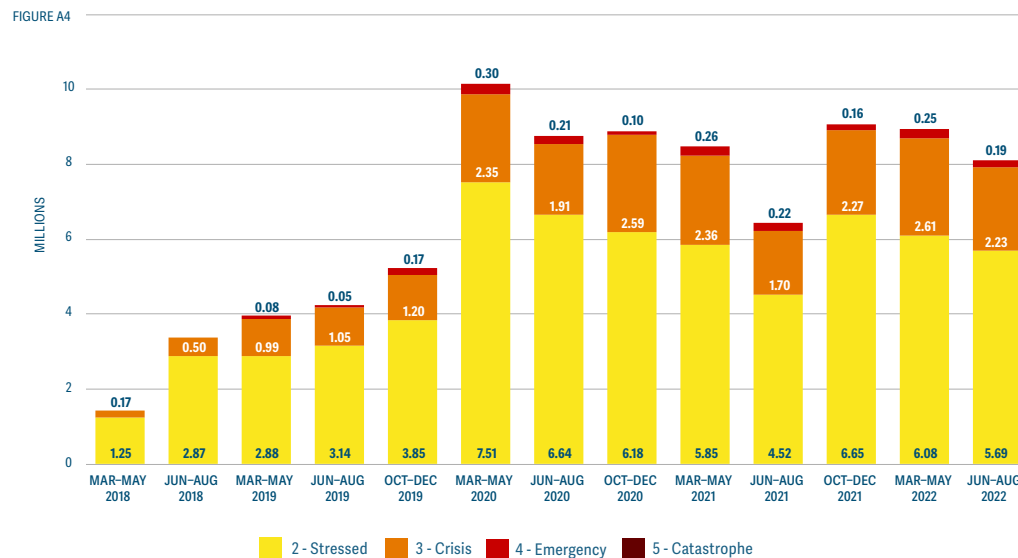


TABLE A4

	MAR-MAY 2018	JUN-AUG 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022
STRESSED (PHASE 2)	1.25	2.87	2.88	3.14	3.85	7.51	6.64	6.18	5.85	4.52	6.65	6.08	5.69
CRISIS (PHASE 3)	0.17	0.50	0.99	1.05	1.20	2.35	1.91	2.59	2.36	1.70	2.27	2.61	2.23
EMERGENCY (PHASE 4)			0.08	0.05	0.17	0.30	0.21	0.10	0.26	0.22	0.16	0.25	0.19
CATASTROPHE (PHASE 5)													

While the 2020-2022 CH analyses provide data for the entire country, the CH analyses of 2018-2019 only covered from four to seven regions so these are not presented here for better comparability.

Source: CH.

Numbers of people in the Central African Republic in IPC Phase 2 or above, 2015–2022

FIGURE A5

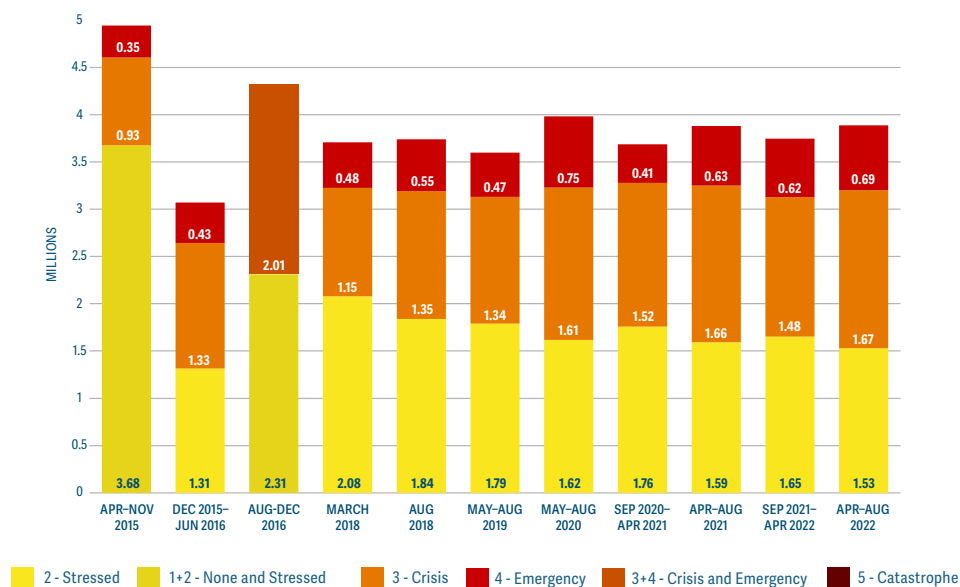


TABLE A5

	APR-NOV 2015	DEC 2015-JUN 2016	AUG-DEC 2016	MARCH 2018	AUG 2018	MAY-AUG 2019	MAY-AUG 2020	SEP 2020-APR 2021	APR-AUG 2021	SEP 2021-APR 2022	APR-AUG 2022
STRESSED (PHASE 2)		1.31		2.08	1.84	1.79	1.62	1.76	1.59	1.65	1.53
NONE AND STRESSED (PHASES 1 & 2)	3.68		2.31								
CRISIS (PHASE 3)	0.93	1.33		1.15	1.35	1.34	1.61	1.52	1.66	1.48	1.67
EMERGENCY (PHASE 4)	0.35	0.43		0.48	0.55	0.47	0.75	0.41	0.63	0.62	0.69
CRISIS AND EMERGENCY (PHASES 3 & 4)			2.01								
CATASTROPHE (PHASE 5)											

Source: Central African Republic IPC Technical Working Group.

Numbers of people in Chad in CH Phase 2 or above, 2014–2022

FIGURE A6

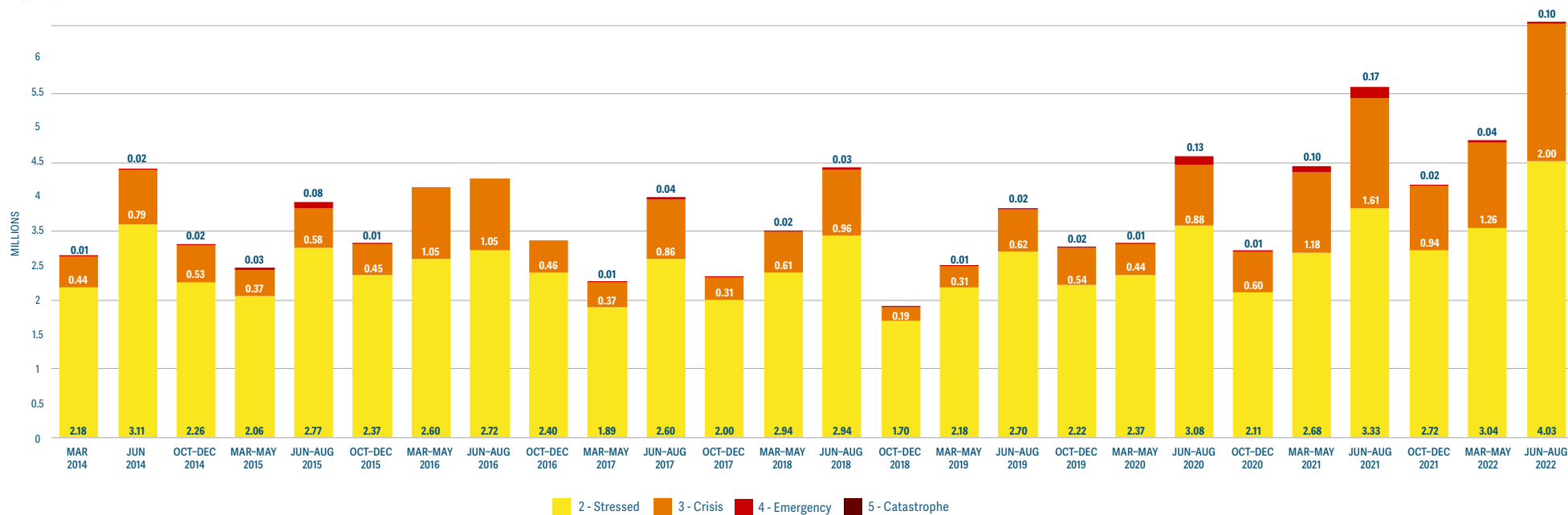


TABLE A6

	MAR 2014	JUN 2014	OCT-DEC 2014	MAR-MAY 2015	JUN-AUG 2015	OCT-DEC 2015	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022
STRESSED (PHASE 2)	2.18	3.11	2.26	2.06	2.77	2.37	2.60	2.72	2.40	1.89	2.60	2.00	2.39	2.94	1.70	2.18	2.70	2.22	2.37	3.08	2.11	2.68	3.33	2.72	3.04	4.03
CRISIS (PHASE 3)	0.44	0.79	0.53	0.37	0.58	0.45	1.05	1.05	0.46	0.37	0.86	0.31	0.61	0.96	0.19	0.31	0.62	0.54	0.44	0.88	0.60	1.18	1.61	0.94	1.26	2.00
EMERGENCY (PHASE 4)	0.01	0.02	0.02	0.03	0.08	0.01				0.01	0.04	0.00	0.02	0.03		0.01	0.02	0.02	0.01	0.13	0.01	0.10	0.17	0.02	0.04	0.10
CATASTROPHE (PHASE 5)																										

Source: CH.

Numbers of people in Kenya in IPC Phase 2 or above, 2019–2022

FIGURE A7

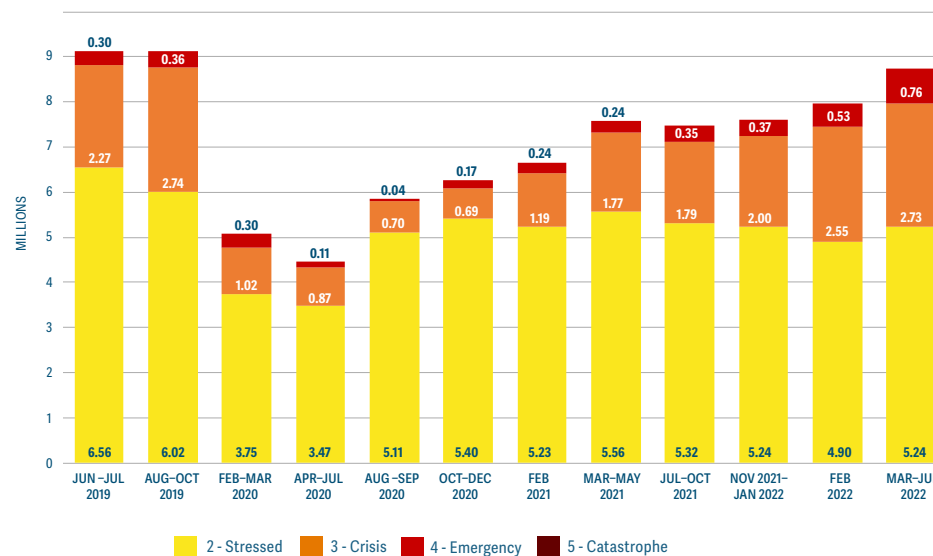


TABLE A7

	JUN-JUL 2019	AUG-OCT 2019	FEB-MAR 2020	APR-JUL 2020	AUG-SEP 2020	OCT-DEC 2020	FEB 2021	MAR-MAY 2021	JUL-OCT 2021	NOV 2021-JAN 2022	FEB 2022	MAR-JUN 2022
STRESSED (PHASE 2)	6.56	6.02	3.75	3.47	5.11	5.40	5.23	5.56	5.32	5.24	4.90	5.24
CRISIS (PHASE 3)	2.27	2.74	1.02	0.87	0.70	0.69	1.19	1.77	1.79	2.00	2.55	2.73
EMERGENCY (PHASE 4)	0.30	0.36	0.30	0.11	0.04	0.17	0.24	0.24	0.35	0.37	0.53	0.76
CATASTROPHE (PHASE 5)												

Source: Kenya IPC Technical Working Group.

Numbers of people in Lesotho in IPC Phase 2 or above, 2016–2022

FIGURE A8

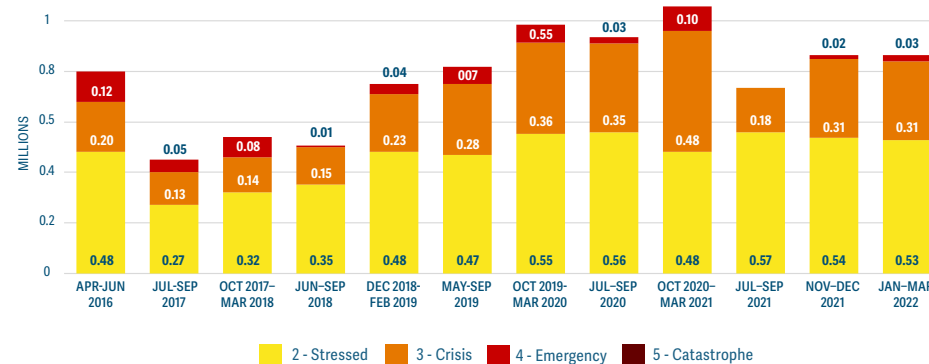


TABLE A8

	APR-JUN 2016	JUL-SEP 2017	OCT 2017-MAR 2018	JUN-SEP 2018	DEC 2018-FEB 2019	MAY-SEP 2019	OCT 2019-MAR 2020	JUL-SEP 2020	OCT 2020-MAR 2021	JUL-SEP 2021	NOV-DEC 2021	JAN-MAR 2022
STRESSED (PHASE 2)	0.48	0.27	0.32	0.35	0.48	0.47	0.55	0.56	0.48	0.57	0.54	0.53
CRISIS (PHASE 3)	0.20	0.13	0.14	0.15	0.23	0.28	0.36	0.35	0.48	0.18	0.31	0.31
EMERGENCY (PHASE 4)	0.12	0.05	0.08	0.01	0.04	0.07	0.07	0.03	0.10		0.02	0.03
CATASTROPHE (PHASE 5)												

Source: Lesotho IPC Technical Working Group.

Numbers of people in Madagascar in IPC Phase 2 or above, 2017–2022

FIGURE A9

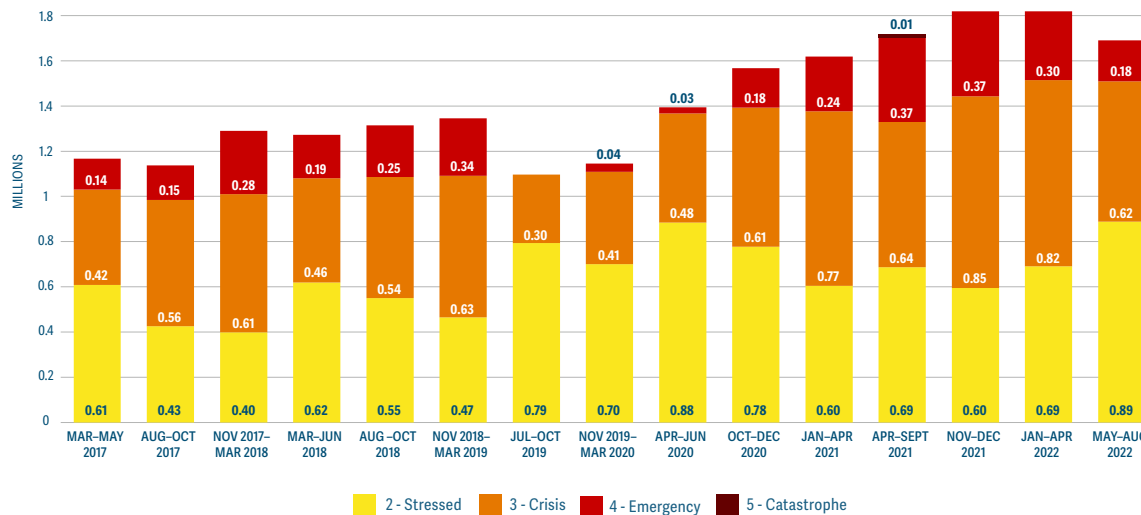


TABLE A9

	MAR-MAY 2017	AUG-OCT 2017	NOV 2017-MAR 2018	MAR-JUN 2018	AUG-OCT 2018	NOV 2018-MAR 2019	JUL-OCT 2019	NOV 2019-MAR 2020	APR-JUN 2020	OCT-DEC 2020	JAN-APR 2021	APR-SEPT 2021	NOV-DEC 2021	JAN-APR 2022	MAY-AUG 2022
STRESSED (PHASE 2)	0.61	0.43	0.40	0.62	0.55	0.47	0.79	0.70	0.88	0.78	0.60	0.69	0.60	0.69	0.89
CRISIS (PHASE 3)	0.42	0.56	0.61	0.46	0.54	0.63	0.30	0.41	0.48	0.61	0.77	0.64	0.85	0.82	0.62
EMERGENCY (PHASE 4)	0.14	0.15	0.28	0.19	0.23	0.25		0.04	0.03	0.18	0.24	0.37	0.37	0.30	0.18
CATASTROPHE (PHASE 5)													0.01		

Toliara II has been removed as no data were available for October–December 2020 and January–April 2021; Betroka has been removed because data were not available prior to November 2020; Taolagnaro has been removed as the entire district was analysed in the October–December 2020 and January–April 2021 analysis, but only five communes were analysed in the previous rounds; Faragangana, Vangaindrano, Manakara and Vohipepo have been removed as they were not analysed in the April–July 2020 update.

Source: Madagascar IPC Technical Working Group.

Numbers of people in Malawi in IPC Phase 2 or above, 2017–2022

FIGURE A10

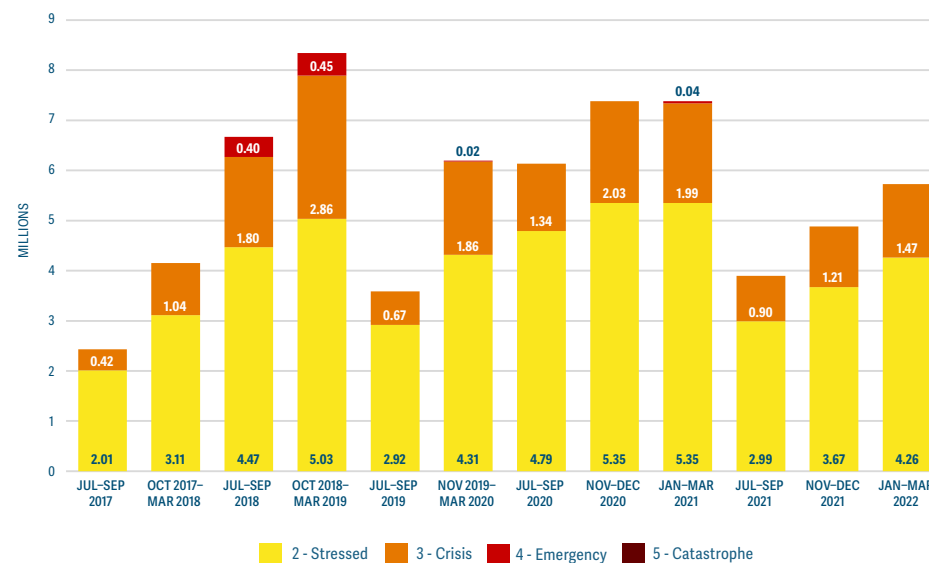


TABLE A10

	JUL-SEP 2017	OCT 2017-MAR 2018	JUL-SEP 2018	OCT 2018-MAR 2019	JUL-SEP 2019	NOV 2019-MAR 2020	JUL-SEP 2020	NOV-DEC 2020	JAN-MAR 2021	JUL-SEP 2021	NOV-DEC 2021	JAN-MAR 2022
STRESSED (PHASE 2)	2.01	3.11	4.47	5.03	2.92	4.31	4.79	5.35	5.35	2.99	3.67	4.26
CRISIS (PHASE 3)	0.42	1.04	1.80	2.86	0.67	1.86	1.34	2.03	1.99	0.90	1.21	1.47
EMERGENCY (PHASE 4)			0.40	0.45		0.02			0.04			
CATASTROPHE (PHASE 5)												

The estimates for Blantyre city, Likoma, Lilongwe city, Mzuzu city, Zomba city (available for July–September 2020, November–December 2020, January–March 2021, July–September 2021, November–December 2021 and January–March 2022) were not included to focus on rural areas only.

Source: Malawi IPC Technical Working Group.

Numbers of people in Mali in CH Phase 2 or above, 2014–2022

FIGURE A11

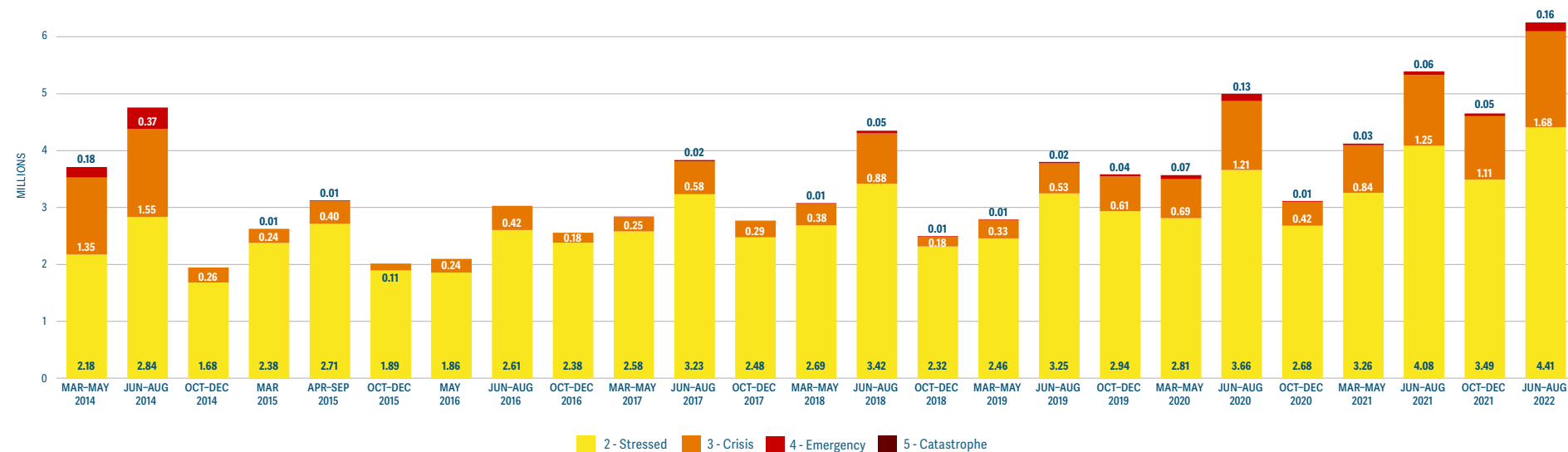


TABLE A11

	MAR-MAY 2014	JUN-AUG 2014	OCT-DEC 2014	MAR 2015	JUN-AUG 2015	OCT-DEC 2015	MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	JUN-AUG 2022
STRESSED (PHASE 2)	2.18	2.84	1.68	2.38	2.71	1.89	1.86	2.61	2.38	2.58	3.23	2.48	2.69	3.42	2.32	2.46	3.25	2.94	2.81	3.66	2.68	3.26	4.08	3.49	4.41
CRISIS (PHASE 3)	1.35	1.55	0.26	0.24	0.40	0.11	0.24	0.42	0.18	0.25	0.58	0.29	0.38	0.88	0.18	0.33	0.53	0.61	0.69	1.21	0.42	0.84	1.25	1.11	1.68
EMERGENCY (PHASE 4)	0.18	0.37		0.01	0.01	0.00				0.00	0.02		0.01	0.05	0.01	0.01	0.02	0.04	0.07	0.13	0.01	0.03	0.06	0.05	0.16
CATASTROPHE (PHASE 5)																									

Source: CH.

Numbers of people in the Niger in CH Phase 2 or above, 2014–2022

FIGURE A12

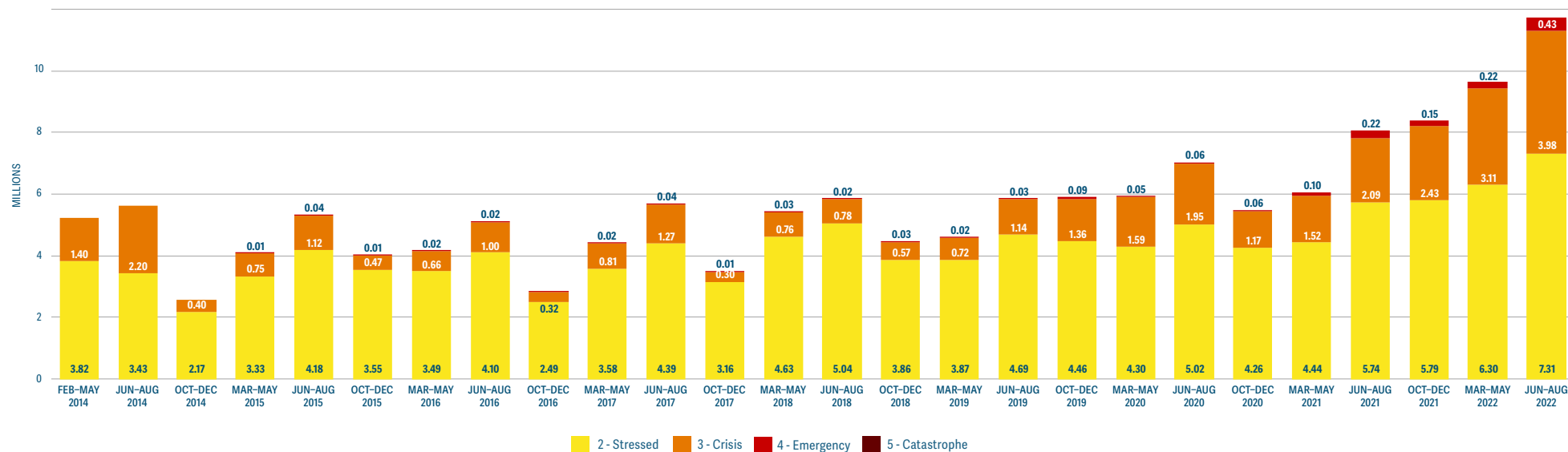


TABLE A12

	FEB-MAY 2014	JUN-AUG 2014	OCT-DEC 2014	MAR-MAY 2015	JUN-AUG 2015	OCT-DEC 2015	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022
STRESSED (PHASE 2)	3.82	3.43	2.17	3.33	4.18	3.55	3.49	4.10	2.49	3.58	4.39	3.16	4.63	5.04	3.86	3.87	4.69	4.46	4.30	5.02	4.26	4.44	5.74	5.79	6.30	7.31
CRISIS (PHASE 3)	1.40	2.20	0.40	0.75	1.12	0.47	0.66	1.00	0.32	0.81	1.27	0.30	0.76	0.78	0.57	0.72	1.14	1.36	1.59	1.95	1.17	1.52	2.09	2.43	3.11	3.98
EMERGENCY (PHASE 4)				0.01	0.04	0.01	0.02	0.02	0.00	0.02	0.04	0.01	0.03	0.02	0.03	0.02	0.03	0.09	0.05	0.06	0.06	0.10	0.22	0.15	0.22	0.43
CATASTROPHE (PHASE 5)																										

Source: CH.

Numbers of people in Nigeria in CH Phase 2 or above, 2015–2022

FIGURE A13

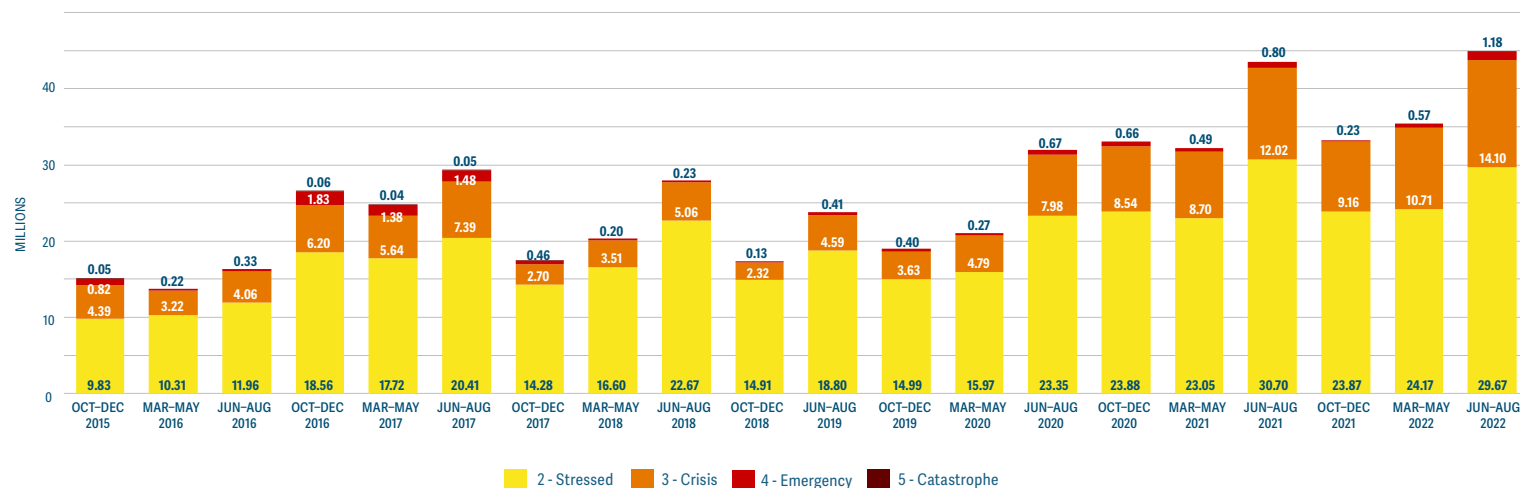


TABLE A13

	OCT-DEC 2015	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022
STRESSED (PHASE 2)	9.83	10.31	11.96	18.56	17.72	20.41	14.28	16.60	22.67	14.91	18.80	14.99	15.97	23.35	23.88	23.05	30.70	23.87	24.17	29.67
CRISIS (PHASE 3)	4.39	3.22	4.06	6.20	5.64	7.39	2.70	3.51	5.06	2.32	4.59	3.63	4.79	7.98	8.54	8.70	12.02	9.16	10.71	14.10
EMERGENCY (PHASE 4)	0.82	0.22	0.33	1.83	1.38	1.48	0.46	0.20	0.23	0.13	0.41	0.40	0.27	0.67	0.66	0.49	0.80	0.23	0.57	1.18
CATASTROPHE (PHASE 5)	0.05			0.06	0.04	0.05														

The analyses carried out between October-December 2016 and June-August 2017 do not cover the Federal Capital Territory; In October-December 2020, the state of Zamfara was not analysed; in March-May 2021, the states of Kebbi and Taraba were not analysed; the analysis of October-December 2019, March-May 2021 and June-August 2021 also covers IDP populations; in October-December 2021 and June-August 2022, the analyses also covered 5 states (Abia, Crossriver, Edo, Enugu and Lagos) not covered in this graph for better comparability with previous rounds.

Source: CH.

Numbers of people in Sierra Leone in CH Phase 2 or above, 2016–2022

FIGURE A14

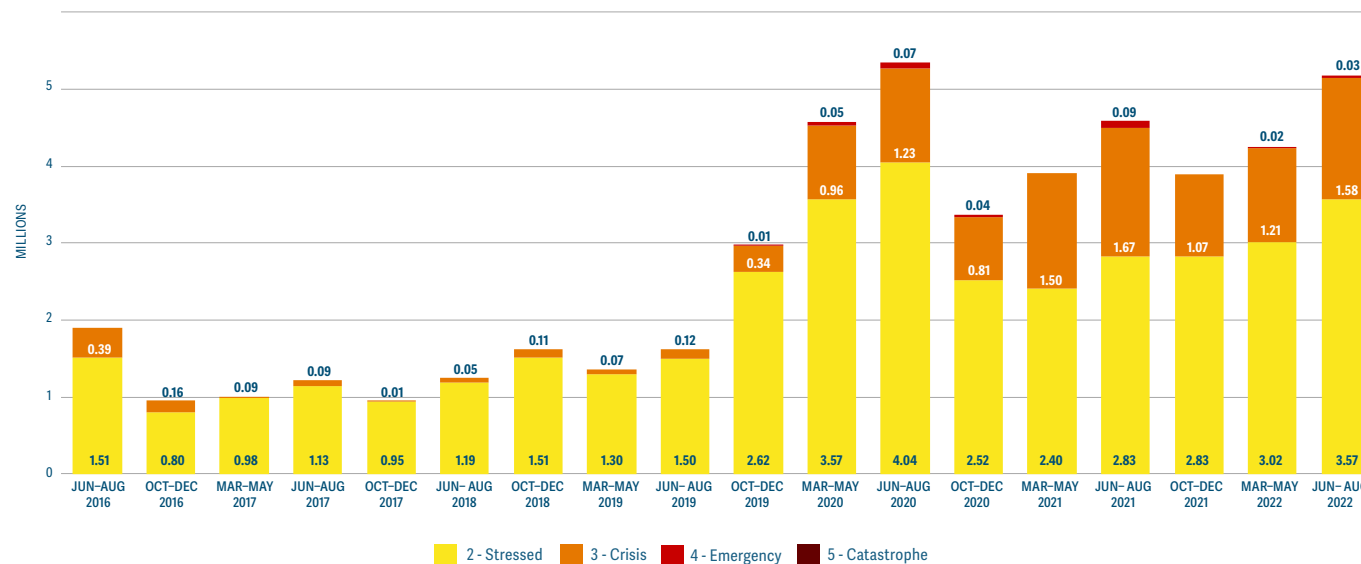


TABLE A14

	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022
STRESSED (PHASE 2)	1.51	0.80	0.98	1.13	0.95	1.19	1.51	1.30	1.50	2.62	3.57	4.04	2.52	2.40	2.83	2.83	3.02	3.57
CRISIS (PHASE 3)	0.39	0.16	0.03	0.09	0.01	0.05	0.11	0.07	0.12	0.34	0.96	1.23	0.81	1.50	1.67	1.07	1.21	1.58
EMERGENCY (PHASE 4)										0.01	0.05	0.07	0.04		0.09		0.02	0.03
CATASTROPHE (PHASE 5)																		

Source: CH.

Numbers of people in Somalia in IPC Phase 2 or above, 2016–2022

FIGURE A15

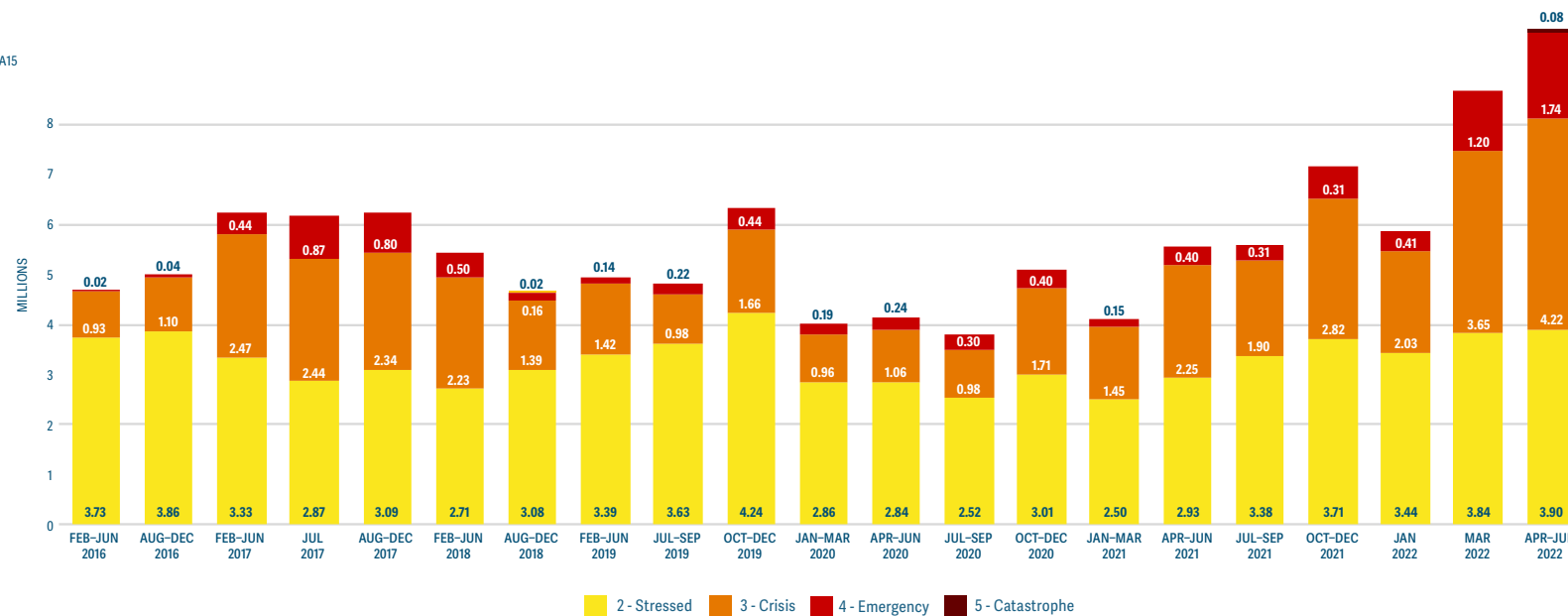


TABLE A15

	FEB-JUN 2016	AUG-DEC 2016	FEB-JUN 2017	JUL 2017	AUG-DEC 2017	FEB-JUN 2018	AUG-DEC 2018	FEB-JUN 2019	JUL-SEP 2019	OCT-DEC 2019	JAN-MAR 2020	APR-JUN 2020	JUL-SEP 2020	OCT-DEC 2020	JAN-MAR 2021	APR-JUN 2021	JUL-SEP 2021	OCT-DEC 2021	JAN 2022	MAR 2022	APR-JUN 2022
STRESSED (PHASE 2)	3.73	3.86	3.33	2.87	3.09	2.71	3.08	3.39	3.63	4.24	2.86	2.84	2.52	3.01	2.50	2.93	3.38	3.71	3.44	3.84	3.90
CRISIS (PHASE 3)	0.93	1.10	2.47	2.44	2.34	2.23	1.39	1.42	0.98	1.66	0.96	1.06	0.98	1.71	1.45	2.25	1.90	2.82	2.03	3.65	4.22
EMERGENCY (PHASE 4)	0.02	0.04	0.44	0.87	0.80	0.50	0.16	0.14	0.22	0.44	0.19	0.24	0.30	0.40	0.15	0.40	0.31	0.64	0.41	1.20	1.74
CATASTROPHE (PHASE 5)							0.02														0.08

Source: Somalia IPC Technical Working Group.

Numbers of people in South Sudan in IPC Phase 2 or above, 2014–2022

FIGURE A16

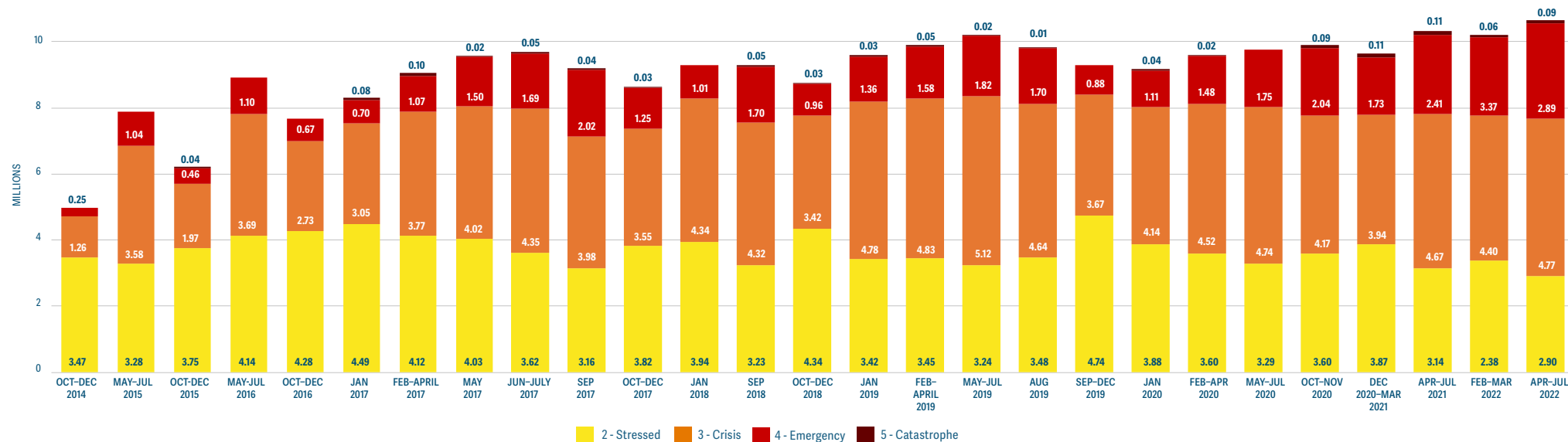


TABLE A16

	OCT-DEC 2014	MAY-JUL 2015	OCT-DEC 2015	MAY-JUL 2016	OCT-DEC 2016	JAN 2017	FEB-APRIL 2017	MAY 2017	JUN-JULY 2017	SEP 2017	OCT-DEC 2017	JAN 2018	SEP 2018	OCT-DEC 2018	JAN 2019	FEB-APRIL 2019	MAY-JUL 2019	AUG 2019	SEP-DEC 2019	JAN 2020	FEB-APR 2020	MAY-JUL 2020	OCT-NOV 2020	DEC 2020-MAR 2021	APR-JUL 2021	FEB-MAR 2022	APR-JUL 2022
STRESSED (PHASE 2)	3.47	3.28	3.75	4.14	4.28	4.49	4.12	4.03	3.62	3.16	3.82	3.94	3.23	4.34	3.42	3.45	3.24	3.48	4.74	3.88	3.60	3.29	3.60	3.87	3.14	3.37	2.90
CRISIS (PHASE 3)	1.26	3.58	1.97	3.69	2.73	3.05	3.77	4.02	4.35	3.98	3.55	4.34	4.32	3.42	4.78	4.83	5.12	4.64	3.67	4.14	4.52	4.74	4.17	3.94	4.67	4.40	4.77
EMERGENCY (PHASE 4)	0.25	1.04	0.46	1.10	0.67	0.70	1.07	1.50	1.69	2.02	1.25	1.01	1.70	0.96	1.36	1.58	1.82	1.70	0.88	1.11	1.48	1.75	2.04	1.73	2.41	2.38	2.89
CATASTROPHE (PHASE 5)			0.04			0.08	0.10	0.02	0.05	0.04	0.03		0.05	0.03	0.03	0.05	0.02	0.01		0.04	0.02		0.09	0.11	0.11	0.06	0.09

In the periods Oct–Nov 2020, Dec 2020–Mar 2021 and Apr–Jul 2021, the population analysed in Jonglei and Pibor administrative area does not include the population from four payams (Marow, Boma, Kiziongora and Miwono) that were not classified due to lack of data.

Source: South Sudan IPC Technical Working Group.



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Chapter 2

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