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Tigray Emergency Food Security Assessment

Tigray Crisis response

August 2022

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**Tigray Emergency Food
Security Assessment**
Tigray Crisis response

Executive summary

HIGHLIGHTS

Food insecurity in Tigray increased by six percentage points between November 2021 and June 2022. 89 percent of the surveyed households are classified as food insecure and 47 percent are severely food insecure.

Over 75 percent of the households reported that they do not have access to markets and 85 percent reported that they do not use markets due to lack of cash to purchase food.

The use of extreme coping strategies declined between November 2021 and June 2022, from 24 percent to 20 percent. Furthermore, the use of crisis livelihood coping strategies (LCS) reduced from 48 percent in November 2021 to 38 percent in June 2022. However, the use of negative coping strategies increased, such as limiting portion sizes, relying on less preferred or less expensive foods, and/or reducing the number of meals eaten in the households, indicating increased stress by the households in meeting their food needs.

Only 8 percent of the households reported wage labor as their primary income source. There was a sharp increase in selling livestock, reported by 1 percent of households in November 2021 to 10 percent in June 2022. Unsustainable activities such as community support and borrowing money also increased, reported by 13 percent and 9 percent of households, respectively.

A proxy analysis of the nutritional status showed that the prevalence of GAM and SAM among children aged six–50 months was 29 percent and 6 percent, respectively. Out of the surveyed children, 65 percent had not received nutritional support for over a year.

FOOD SECURITY SITUATION

The food security situation in Tigray continues to be of concern, with 89 percent of the households food insecure. This represents a 6-percentage point increase from the last assessment conducted in November 2021.

Out of the total population, 42 percent are moderately food insecure and 47 percent are severely food insecure, with Central (98 percent), North-Western (95 percent), and South-Eastern Zones (90 percent) of Tigray experiencing the highest levels of food insecurity.

Households hosting IDPs and returnees reported the largest incidence of food insecurity, with 97 percent of hosting households and 96 percent of returnee households food insecure. This could be driven by the high dependency on social networks to maintain a minimum level of food consumption.

FOOD ACQUISITION AND AVAILABILITY

Overall purchase was mentioned as the main source of food by 53 percent of the households. There was a significant increase in the number of households receiving community support and borrowing money as a primary source of food and income. This was especially high in urban areas where the share increased to 41 percent for Mekelle and 33 percent for the Northwestern urban Wcluster. Humanitarian assistance was predominantly reported in the Eastern cluster (21 percent of households).

The percentage of households with no food stocks decreased from 50 percent in November

2021 to 36 percent in June 2022. However, despite a general improvement in food availability, 60 percent of the households only had stocks that would last up to one month.

Over 75 percent of the households reported that they do not have access to markets and 85 percent reported that they do not use markets due to lack of cash to purchase food.

Prices of the staple cereals in Tigray are between 70 and 300 percent higher compared to the WFP reference market in Dassie. Similarly, vegetable oil prices in Tigray are between 58 and 99 percent higher compared to the same items in Dassie. This sharp increase is attributed to the below-average Meher harvest season compounded by the disruption of the normal trade routes.



COPING STRATEGIES

The use of extreme coping strategies declined from 24 percent in November 2021 to 20 percent in June 2022. Households are more likely to employ coping strategies such as limiting portion sizes, relying on less preferred or less expensive foods, and/or reducing the number of meals eaten in the households, indicating increased stress by the households in meeting their food needs.

The use of crisis livelihood coping strategies (LCS), such as reducing expenditure on livestock and agricultural inputs and selling productive assets, decreased from 48 percent in November 2021 to 38 percent in June 2022. However, the use of stress-level livelihood coping strategies, such as selling charcoal/firewood/grass and livestock, increased from 16 percent in November 2021 to 25 percent in August 2022.

LIVELIHOOD PROFILES

The percentage of households reporting crop production and the sale of crops as their main income generating activity reduced by 21 percentage points, from 55 percent in November 2021 to 34 percent in June 2022.

There was a sharp increase in selling livestock, reported by 1 percent of households in November 2021 to 10 percent in June 2022. Unsustainable activities such as community support and borrowing money also increased, reported by 13 percent and 9 percent of households, respectively.

There was a sharp increase in the number of households borrowing/taking loans as their main income source, reported by 8 percent of the households.

Only 8 percent of the total households reported stable wage labor as their primary income source.

NUTRITIONAL STATUS

A proxy analysis of the nutritional status showed that the prevalence of GAM and SAM among children aged six–59 months was 29 percent and 6 percent, respectively. Out of the surveyed children, 65 percent had not received nutritional support for over a year.

55 percent of pregnant and lactating women (PLW) were acutely malnourished, with less than half of them (43 percent) enrolled for treatment through Targeted Supplementary Feeding (TFS). This could be as a result of non-functioning health facilities as the result of the conflict.

Around 70 percent of children aged 0-23 months were breastfed within the first hour after birth, and 9 out of 10 children below six months were being exclusively breastfed at the time of the survey. Additionally, 92 percent of children aged 12 to 23 months were still receiving breastmilk.

METHODOLOGY

The Emergency Food Security Assessment (EFSA) was initiated to fill information gaps and provide data on the food security situation in the conflict-affected regions of Tigray.

Rural and urban woredas were clustered separately to include 12 rural and 5 urban clusters, with a total of 30 rural woredas and 10 urban woredas being assessed during the data collection.

Due to operational challenges, the assessment was only conducted in accessible areas of the region. Western Zone and the northern kebeles bordering Eritrea were excluded from the sampling frame. Across the remaining accessible areas, a total of 3,033 households were interviewed between 21 May and 5 June 2022. Findings at the cluster level are generalizable at a 90 percent confidence and 7 percent margin of error.



Background and Context

The current ongoing conflict in Tigray that began in November 2020 continues to have a negative impact on the households and communities. The conflict has resulted in a humanitarian crisis characterized by worryingly high levels of food insecurity, gender-based violence, widespread displacement, limited access to services, and the destruction of the local economy¹. Since the conflict began, the region has remained cut off from supply routes to and from other parts of the country.

An emergency food security assessment conducted by WFP in November 2021 ² indicated worsening food insecurity, with 4.7 million people (83 percent of the population) found to be food insecure (excluding the Western zone). Out of this, 2 million people (37 percent) were severely food insecure. Thirteen percent of children under five were found to be malnourished, as well as every second pregnant and breastfeeding woman, leading to poor pregnancy outcomes, low-birth weight, stunting, and maternal death.

Livelihoods and access to social services: The rainfall pattern in this region is predominantly unimodal (June to early September) and the Meher season rains are the most important for crops, livestock, and other livelihoods. Meher contributes a large amount of the annual rain for food crop production, and a limited amount of crop production is from the Belg season. As a result of the war, economic and social services have been disrupted, driving food insecurity, malnutrition, health, and psychosocial problems, and water shortages all over the region. Furthermore, access to cash has been severely impacted due to the complete closure of bank services and severely reduced economic activities in almost all sectors (agriculture, service, and manufacturing).

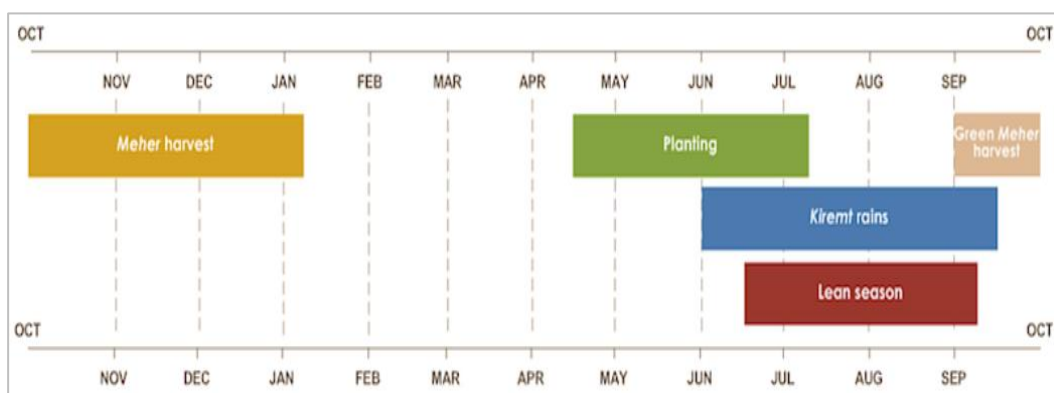


Figure 1. Seasonal Calendar of the Tigray region, adapted from FEWS NET

¹ [Emergency livelihood support for conflict-affected communities in Ethiopia’s Tigray region - Ethiopia | ReliefWeb](#)

² <https://www.wfp.org/publications/tigray-emergency-food-security-assessment>

Food access and production: Before the conflict, the food system fed and supported the livelihoods of the vast majority of Tigray's population. Even though households in Tigray were repeatedly exposed to multiple shocks, such as drought, desert locust infestations and the COVID-19 pandemic, most of them were able to cope, as demonstrated by the results of various food security assessments. The conflict began at the peak of the main agricultural season (Meher) harvest period when many households had not yet harvested. It is estimated that over 90 percent of the crop harvest was lost (looted, burned, and/or destroyed), while 15 percent of the region's 17 million livestock were reported looted or slaughtered. With the majority of Tigrayans depending on subsistence agriculture (80 percent as their main source of food and livelihood), the loss of their harvest and production inputs has severely impacted their food security and nutrition.³ The 2021 Meher production was below average production.

Market functionality and Supply: The supply of commodities remains below demand as transport services are limited due to scarcity of fuel and insecurity. The disruption of market supply linkages has resulted in high prices of food and non-food items. As the flow of humanitarian and commercial supplies into Tigray remains severely restricted and insufficient, the prices of food and non-food items continue to increase and remain unpredictable. Food crop cultivation remains below normal as the conflict remains volatile. With low availability of cash, lack of banking, electricity, high transportation costs, and communication services, the market functioning is anticipated to remain limited. Transport services are limited due to scarcity of fuel and insecurity.

Food security situation: pre-conflict analysis: After Tigray region suffered through numerous famines in 1958, 1973, and 1983-85, substantial improvements have been made in the direction of food security in the region by the Government³. Specific focus was placed on supporting communities with sustainable smallholder agriculture to meet their daily food needs and engagement in commercial sesame production for export purposes. Prior to the conflict, sesame production and artisanal mining accounted for the primary means of income for up to a third of the total Tigrayan population and around 40 percent of the rural population⁴. Tigray was also a labour exporting region and benefited from Ethiopia's Productive Safety Net Programme (PSNP), which was launched countrywide in 2005 with the aim of reducing food insecurity vulnerability by providing economic opportunities and building resilience to the crisis through cash transfers, public works, and nutritional feeding programmes⁵.

³ [Oxford University Press, The Political Economy of Hunger: Volume 2: Famine Prevention: Chapter 4, Ethiopian Famines 1973-1985, A case study, 1991.](#)

⁴ [World Peace Foundation, Starving Tigray, April 6 2021](#)

⁵ [European Union, Productive Safety Net Programme in Ethiopia](#)

Objectives of the EFSA

The EFSA was initiated to update the previous assessment conducted in November 2021 and to monitor the food and nutrition security situation of the affected population, with specific objectives as follows:

- To identify, analyse and monitor risks and vulnerability trends in food availability, access, and utilization stability of the affected population.
- To provide early warning projections on the population affected by the conflict related to food insecurity and malnutrition to inform response planning.

Survey approach and Methodology

The survey employed a cross-sectional study design with quantitative and qualitative data collection methods, with contextual information collected through field observations, key informant interviews (KII), and focus group discussions (FGDs), whereas the quantitative information was collected through face-to-face household interviews.

Scope of the survey

The target population was the rural and urban households in clusters of woredas residing in the five accessible zones of the Tigray region, plus Mekelle as one stratum. The five zones were: Southern, Southeastern, Central, Eastern, Northwestern, and Mekelle (exclusively urban). The western zone was not included.

Sampling Design

Stratified multi-stage cluster sampling was applied. Woredas were selected as the first level of clustering in the zone based on their homogeneity of livelihoods characteristics, geographic adjacency, food security status and the impact of conflict, among others.

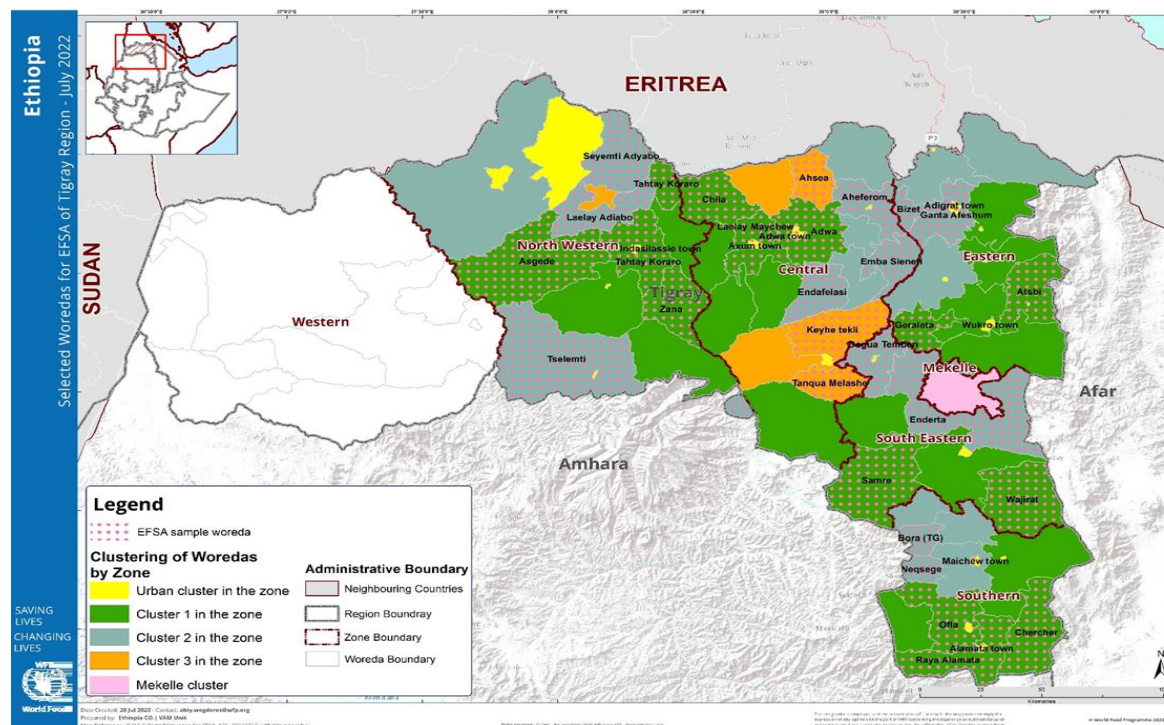
Rural and urban woredas were clustered separately to include 12 rural and five urban clusters. A total of 40 woredas were selected for the assessment (30 rural and 10 urban). In each woreda selected, kebeles were selected using simple random sampling techniques. A total of 174 households were assessed in each cluster.

All the households in the selected kebeles were listed down and systematic random selection was applied to select the households to be interviewed. Data was collected electronically using tablets. Interviews were administered face to face by trained enumerators.

By the end of the survey, 3,033 interviews had been conducted. Findings are representative at the cluster level with 90 percent confidence and a 7 percent margin of error.

Map 1 shows the zones and woredas sampled for the assessment.

Map 1: Assessment coverage



Limitations

Comparability: Where possible, findings were triangulated, contextualized, and compared with available reference points from pre-or early conflict periods. However, survey methodologies varied greatly between different datasets and may introduce selection biases related to variations in target survey populations and/or selection methodologies. Food security indicators from October 2020 were drawn from the Food Security Monitoring Survey using CATI methodology, while nutrition reference points were drawn from historical academic and/or SMART surveys. Comparisons with the November EFSA were taken as indicative due to different methodologies and sampling designs.

Subset indicators: Findings related to a subset of the overall population may have a wider margin of error and should therefore be considered indicative only.

On Secondary limitations: Of importance to note is the lower-than-expected proportion of households who identified as currently displaced or returning households captured through the random methodology, despite accommodating the phenomenon of fragmented displacement and mixed households during questionnaire design. Field teams observed that respondents were often reluctant to discuss displacement, and strongly identified as ‘part of the local community’. This limited the ability to analyse food security conditions according to household displacement status comprehensively. Refining the way this question is asked shall be addressed in the next assessment.

Survey Findings

Household characteristics

Household Composition

The average household size was 4.93, slightly higher than the national average of 4.4 as per the 2007 population census. 47 percent of the family members in the surveyed population were adults between 18–65 years of age, 12 percent were under five, 19 percent were between five to 11 years of age, 18 percent were between one to 17 years of age and 5 percent were aged 65 years and above.

Household Head Profile

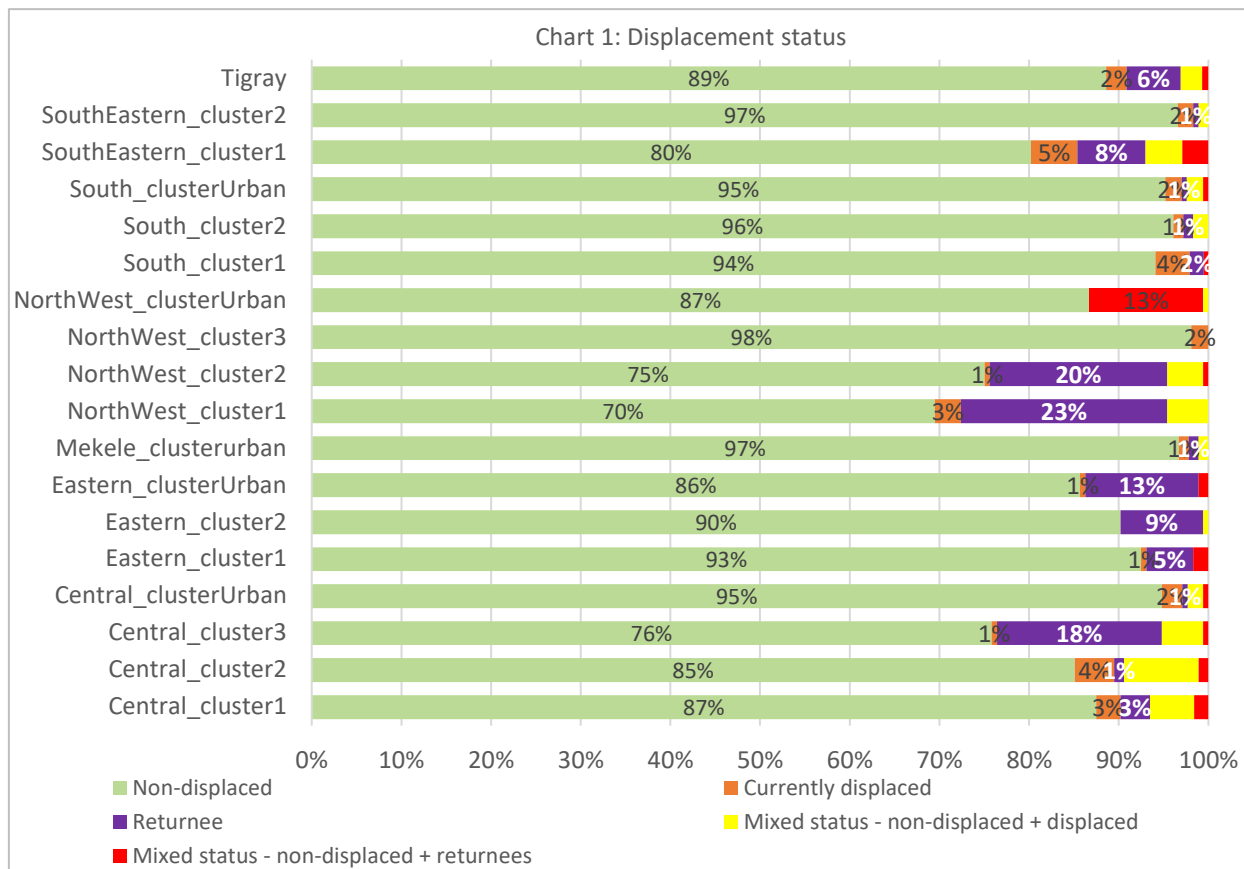
59 percent of the interviewed households were male-headed, while 41 percent were female-headed. The average age of the head of the household was 49 years of age.

Dependency Ratio

The findings showed that 100 working-aged persons supported nearly 114 persons in addition to themselves. The highest level of dependency ratio was reported from the southeastern cluster, where 100 working-aged persons were supporting 142 persons in addition to themselves. 21 percent and 23 percent of the households reported that they live with a household member living with disabilities or chronic illness, respectively.

Displacement Status

Nearly 5 percent of interviewed households reported that they were displaced (currently displaced from a different zone in the Tigray region or being in a household of mixed status), while 6 percent were returnees (Chart 1). The highest displacement was reported in Central and Northwestern zones at 8 percent and 7 percent, respectively, while similarly for returnees this was the highest in Northwestern (12 percent) and Central zones (6 percent). By cluster, Central cluster 2 and Northwest Urban (13 percent each), Southeast cluster 2 (10 percent), and central cluster 1 and Northwest 1 cluster (8 percent each), registered a higher proportion of the displaced population. For returnees, Northwest cluster 1, registered the highest proportion of displaced persons at 23 percent, followed by Northwest cluster 2 (20%), Central cluster 3 (18 percent) and Southeast cluster 1 (10 percent). Nearly 70 percent of the interviewed households were residing in rural areas, while approximately 30 percent were in urban areas.



Household food security outcomes

Household food consumption patterns

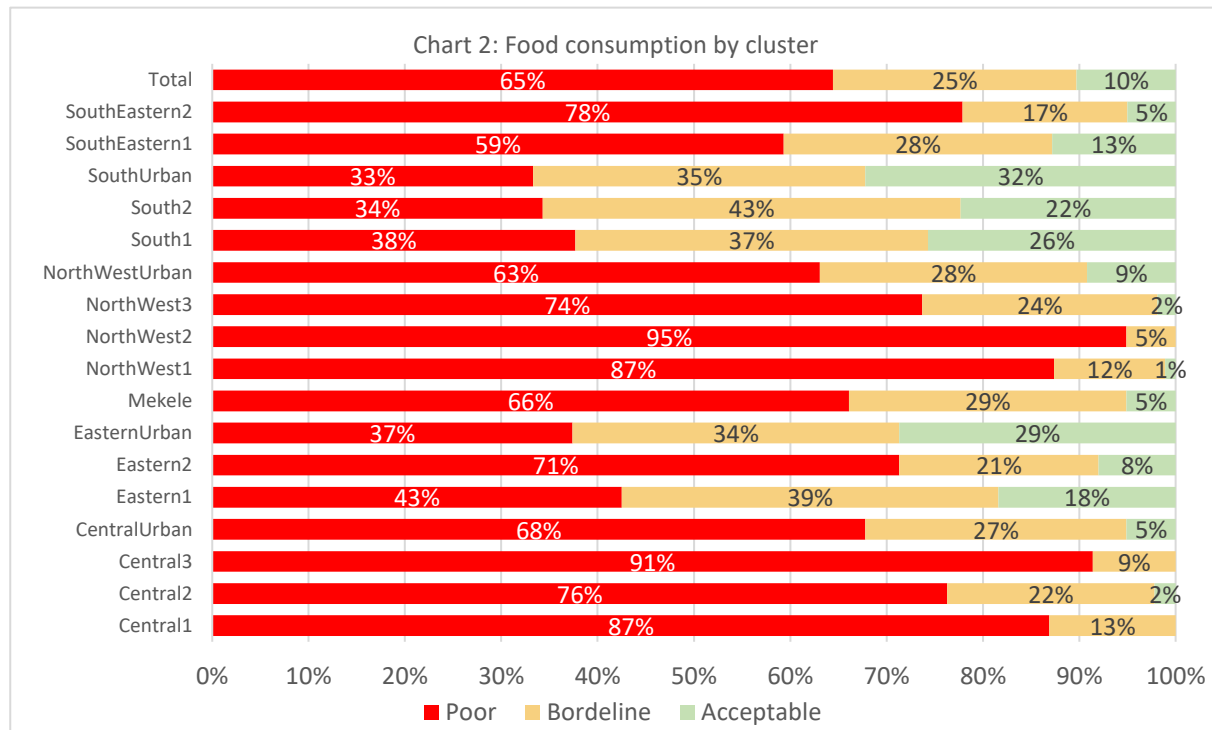
Research has shown that dietary diversity and frequency are good proxy measures of food consumption and food security at the household level. Dietary diversity—the number of different foods or food groups consumed over a given reference period can act as an alternative indicator of food security under a variety of circumstances.

Food consumption data was collected and analysed using the standard WFP methodology: the variety and frequency of different foods and food groups consumed over a seven-day recall period were recorded to calculate a weighted food consumption score. Weights were based on the nutritional density of the foods. Standard cut-points or thresholds were established to enable an analysis of trends and to provide a benchmark for success. Households are then classified as having either ‘poor’, ‘borderline’, or ‘acceptable’ consumption based on the analysis of the data.

The survey results showed that 65 percent of the households had poor consumption, 25 percent had borderline consumption and 10 percent had acceptable consumption (Chart 2). Both borderline and poor consumption are considered inadequate consumption in terms of diet quantity.

The percentage of households with acceptable consumption declined by 8 percentage points between November 2021 and June 2022, from 18 percent to 10 percent. The percentage of households with borderline consumption remained the same, while the percentage of households with poor consumption increased from 57 percent in November 2021 to 65 percent in June 2022.

There were large differences across woredas in terms of food consumption. North-western zone 2 had the highest prevalence of poor consumption (95 percent), while clusters in the Southern part of Tigray record the lowest prevalence (South Urban 33 percent, South 2 34 percent, South 1 38 percent).



There was no significant difference in food consumption regarding the gender of the household head. 65 percent of both female-headed and male-headed households had poor food consumption, 26 percent of female-headed households and 24 percent of male-headed households had borderline consumption and 10 percent of female-headed households and 11 percent of male-headed households had acceptable consumption.

When disaggregated by income source (Table 1), households that reported begging as their main source of income had the highest prevalence of poor consumption (95 percent), followed by households that had no income source (78 percent). 67 percent of households engaged in crop production had poor consumption and 26 percent had borderline consumption. Salaried

workers had a lower poor consumption prevalence at 25 percent, even if anecdotal information and reports from the region indicate salary payments have been intermittent.

Table 1: Food Consumption groups

First main income source	Poor (%)	Borderline (%)	Acceptable (%)	n
food crop production	67	26	8	970
Cash crop	64	20	16	25
Sale of livestock & livestock products	60	27	13	259
Agricultural wage	67	18	15	33
non-agricultural wage	66	23	11	47
sale of firewood/charcoal	65	19	16	37
petty trade	44	37	19	201
Pension	64	36	0	11
Salary	25	47	28	32
Handicrafts	48	40	12	25
community support/gift	65	24	11	410
Begging	95	2	2	44
food Assistance	70	20	11	102
Borrowing	70	21	9	266
Remittance	57	32	11	44
No income source	78	13	9	279
Other	63	29	9	248



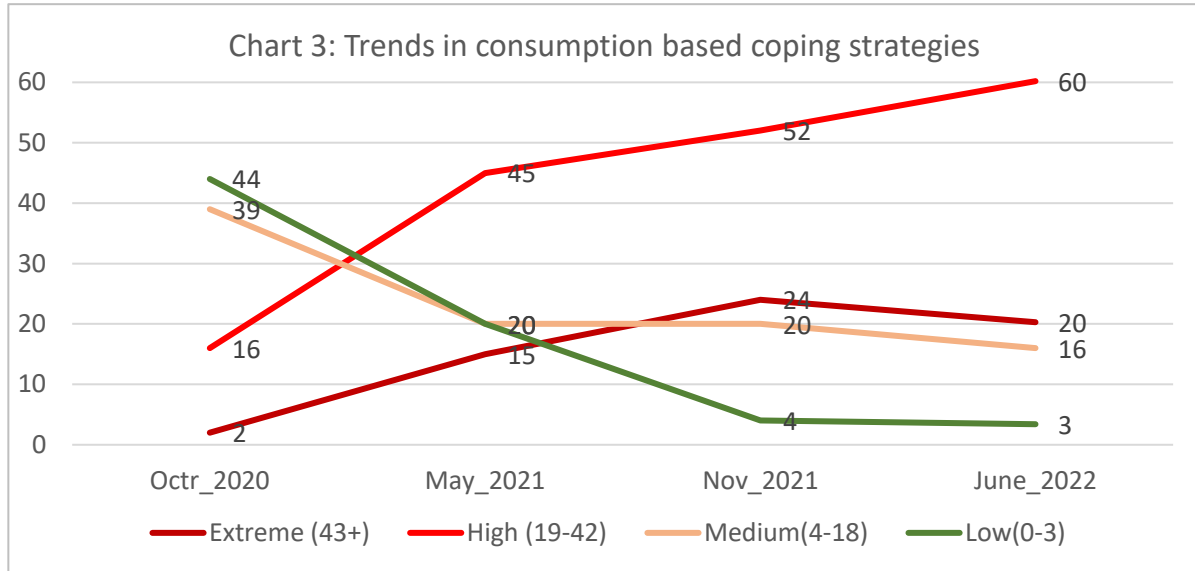
Reduced Consumption based Coping Strategies

The reduced coping strategy (rCSI) index looks at the frequency and severity of five standard food consumption-related strategies⁶ and acts as a proxy indicator for food access. Overall, 20 percent of households registered extreme consumption coping strategies, 60 percent registered high coping strategies, and 16 percent and 3 percent registered medium and low consumption coping strategies, respectively. Only 2 percent of the households did not employ consumption coping strategies.

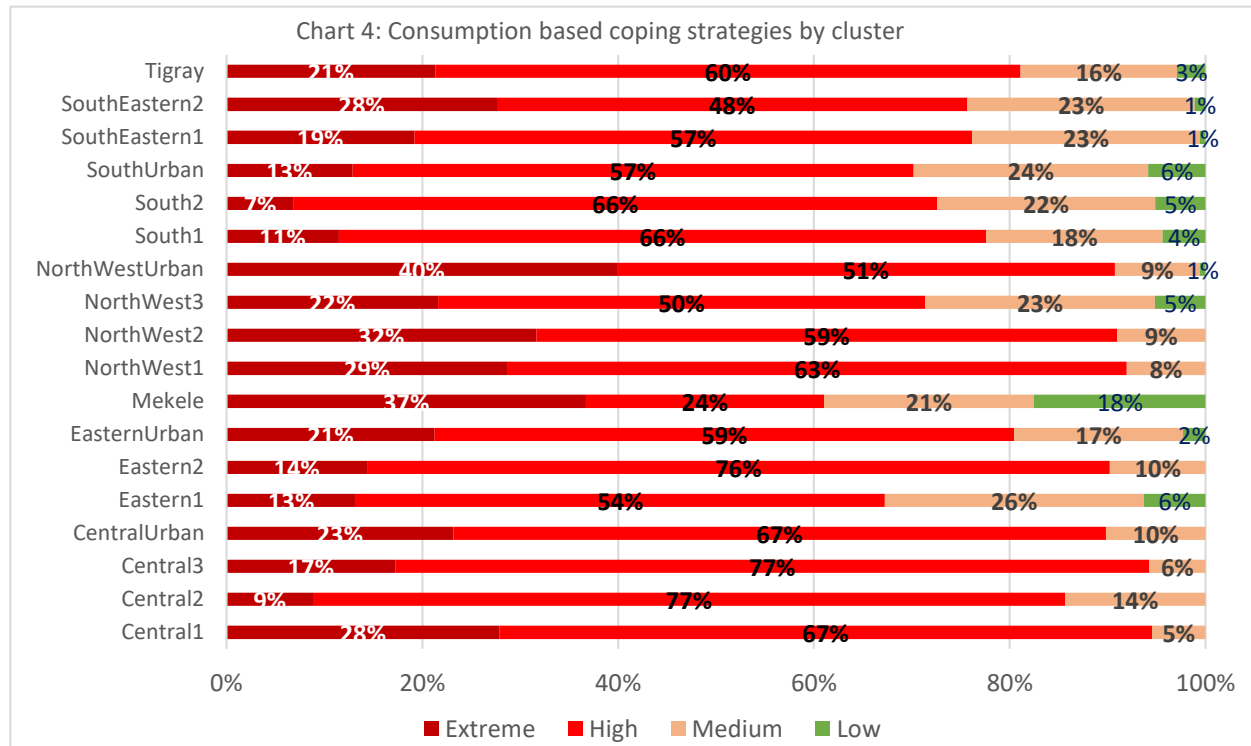
Compared to November 2021, the percentage of households with high coping strategies increased, from 52 percent to 60 percent. However, the proportion of households employing extreme coping strategies declined slightly from 24 percent to 20 percent. Chart 3 shows consumption coping behaviours since the onset of the conflict. Both extreme and high coping increased sharply a month before the conflict in October 2020, following a downward trend, except for a four-percentage point decline in extreme coping strategies in June 2022. The

⁶ Description of five consumption-based coping strategies Coping Strategies: 1) Rely on less preferred and less expensive food; 2) Borrow food or rely on help from relative(s) or friend(s); 3) Limit portion size at meals 4) Restrict consumption by adults for small children to eat and 5) Reduce number of meals eaten in a day

longer a conflict occurs, the more difficult it is for households to continue using consumption-based coping strategies, such as limiting adult food intake and relying on help.

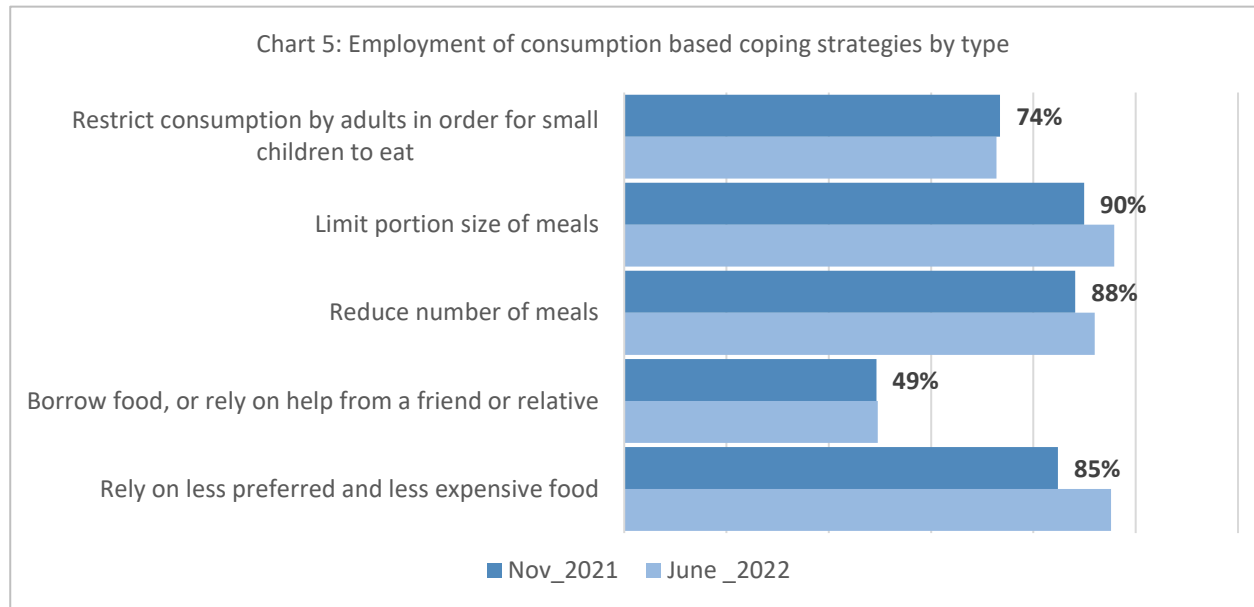


On average, the rCSI was 31.48, with results ranging from 26 in South cluster urban to 38.91 in North-western cluster urban (Chart 4). When comparing clusters of woredas, the urban areas of the Northern western urban cluster and Mekelle cluster had the highest percentage of extreme coping strategies, with 40 and 37 percent of households, respectively. The mean rCSI for all clusters is in the high use of consumption coping strategies category.





Households used individual coping strategies, such as limiting portion sizes, reliance on less preferred or less expensive foods, and reducing the number of meals eaten in the households, indicating increased stress by the households in meeting their food needs (Chart 5).



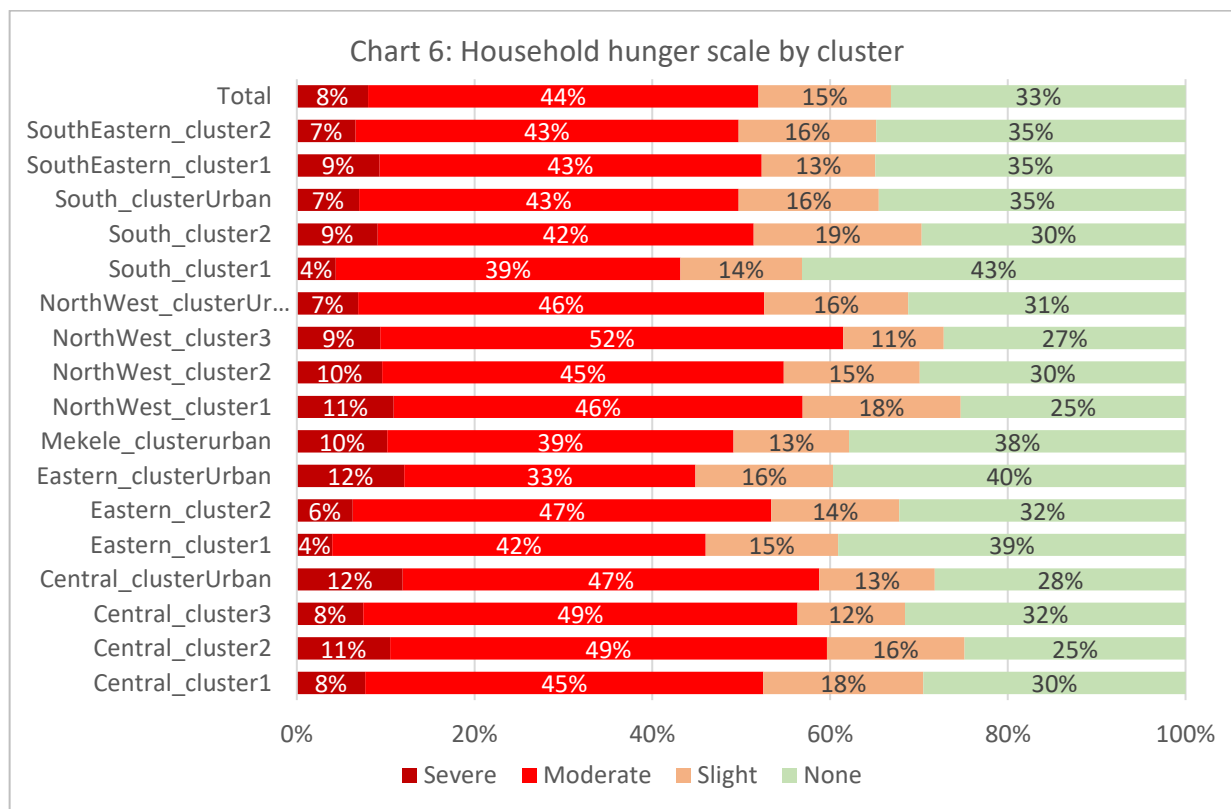
Household Hunger Scale (HHS)

HHS measures household food deprivation based on a 30-day recall⁷. Households are asked three questions to assess food deprivation. On average, 8 percent of households had a severe hunger score, 44 percent had moderate, 16 percent had slight, and 35 percent had no hunger.

The percentage of households with severe hunger declined from 14 percent in November 2021 to 8 percent in June 2022, while the percentage with moderate hunger increased slightly by 3 percentage points, from 40 percent in November 2021 to 43 percent in June 2022.

As shown in chart 6, Eastern cluster urban and Central cluster urban had the highest rate of severe hunger at 12 percent each. However, Eastern cluster urban had one of the highest percentages with no hunger at 40 percent. Northwest cluster 3 had the highest moderate hunger percentage at 52 percent, while south cluster 1 fared better with 43 percent no hunger.

⁷ For more on HHS please refer to , HHS Indicator Guide, 2011, FANTA, Washington DC

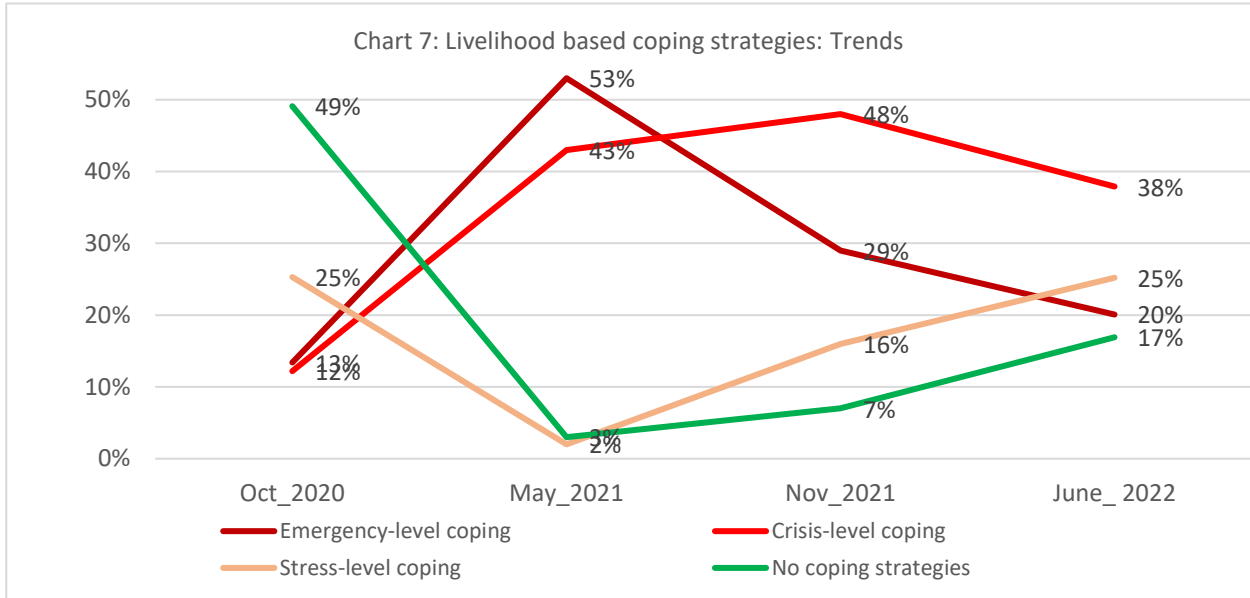


Livelihood Coping strategy (LCS)

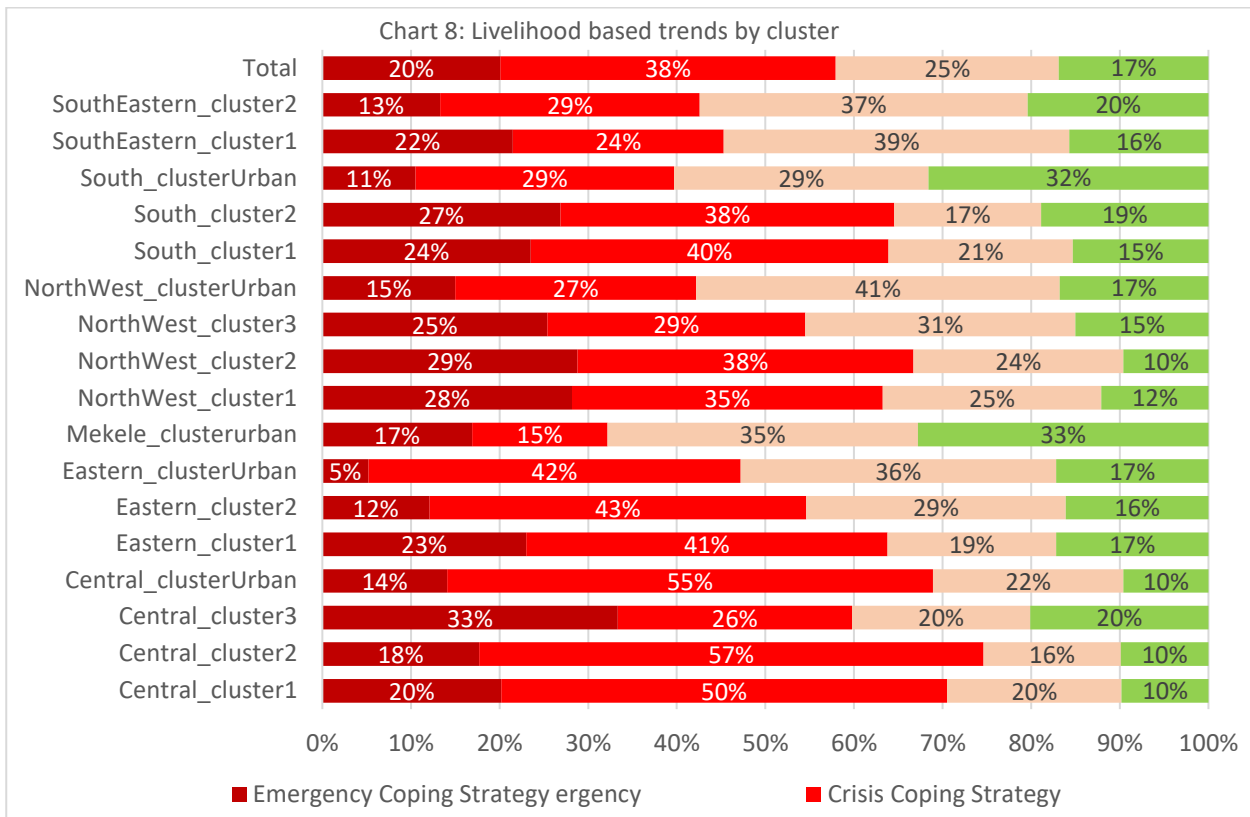
The LCS measures if a household experienced asset depletion and livelihood stress due to a lack of food or money to buy food. Using a recall period of 30 days, households are asked ten questions on whether they used strategies to cope with food shortages. The strategies are classified by severity into stress, crisis, and emergency coping strategies⁸, the latter being the most severe.

The survey revealed that on average, 25 percent of households used stress coping strategies, 38 percent used crisis strategies and 20 percent used emergency strategies, while 17 percent of households did not use any LCS. Compared to November 2021, the percentage of households who used emergency and crisis coping strategies had declined (Chart 7).

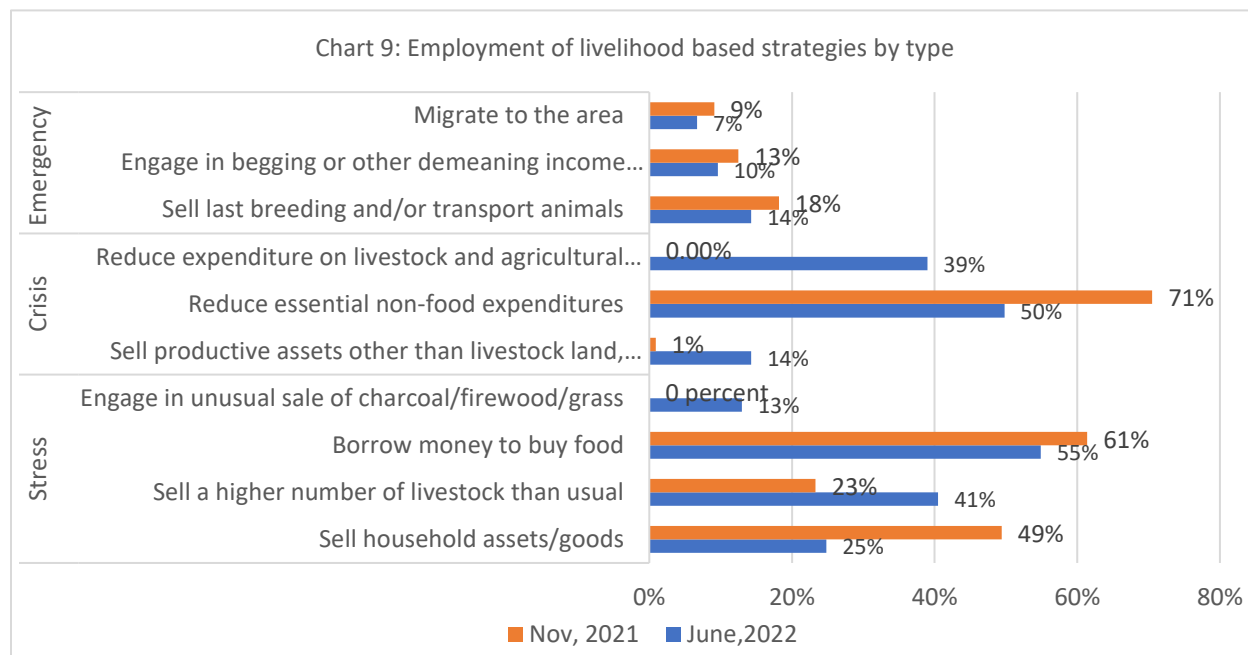
⁸ Stress LCS (Sold household assets/goods, sold more animals than usual, borrowed money, engaged in the unusual sale of charcoal/firewood/grass); Crisis (sold productive assets other than livestock land, farming tools, reduce essential non-food expenditures, reduce expenditure on livestock and agricultural inputs); stress (sold last breeding and/or transport animals, engaged in begging or other demeaning income-generating activities, entire households had to migrate to other)



As chart 8 indicates, households in Mekelle cluster urban employed the least amount of emergency and crisis coping strategies.



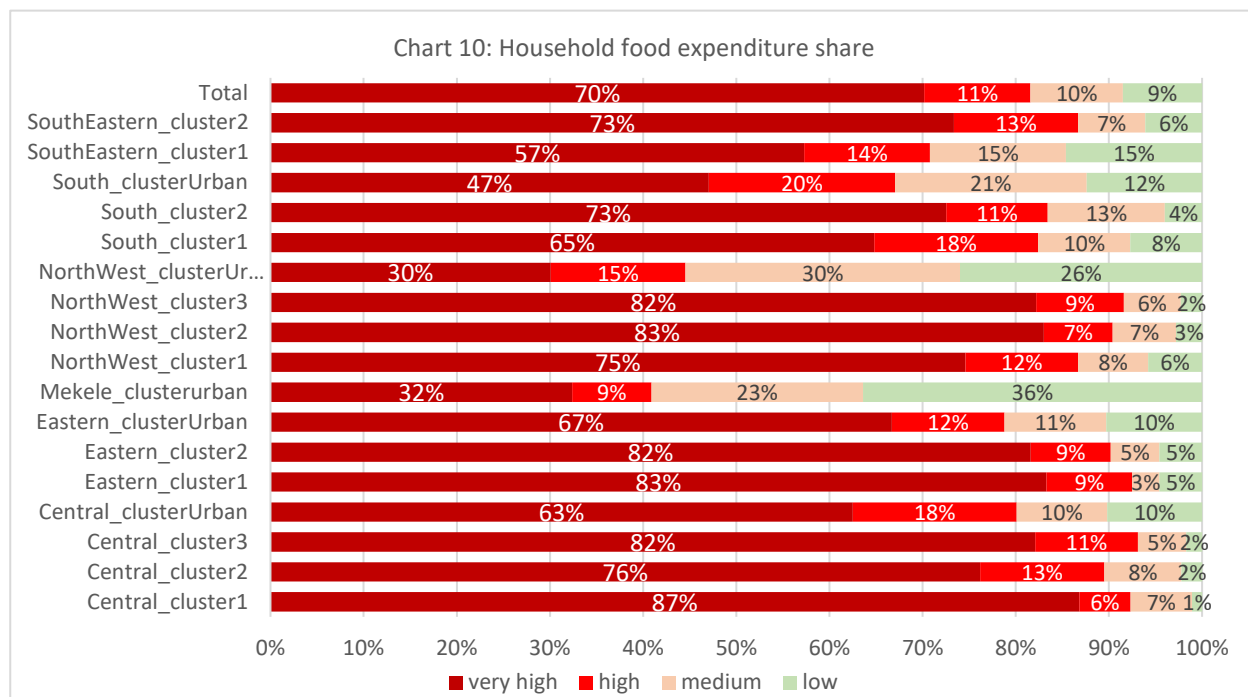
The use of individual crisis coping strategies increased between November 2021 and June 2022, including reducing expenditure on livestock and agricultural inputs and selling productive assets. In addition, the number of households engaging in stress coping mechanisms such as selling charcoal/firewood/grass and livestock increased (Chart 9).



Expenditure patterns

The share of food expenditure from total expenditure is an indicator of household food security and economic vulnerability. Poor households tend to spend most of their income on food. Household expenditure in the survey considers purchases in cash and credit, own production and assistance. Households who spend 75 percent or more of their expenditure on food are highly vulnerable, households who spend 65 to <75 percent are moderately food insecure, households who spend 50 to <65 percent are marginally food secure, and households who spend less than 50 percent of their expenditure on food are considered food secure.

70 percent of households in the survey spent 75 percent or more of their expenditure on food, while 11 percent spent between 65 to 75 percent on food, indicating high vulnerability. There were significant differences across clusters, with North-Western urban cluster having the lowest proportion of households in the high vulnerability group with 30 percent of households spending 75 percent or more on food, while in Central Zone Cluster one 87 percent of households reported having spent 75 percent or more on food.



Maternal, Infant, and young child nutrition

Nutrition Status among children 6 to 59 months and pregnant and lactating women

The EFSA also sought to complement household food security information with nutritional status information for the most nutritionally vulnerable populations including children 6–59 months and pregnant and lactating women (PLW). In addition, the nutrition module also included assessing dietary practices for children 0–59 months. The assessment of the nutrition situation was conducted across 37 woredas and three Mekelle Sub Cities which were sampled into 17 clusters.

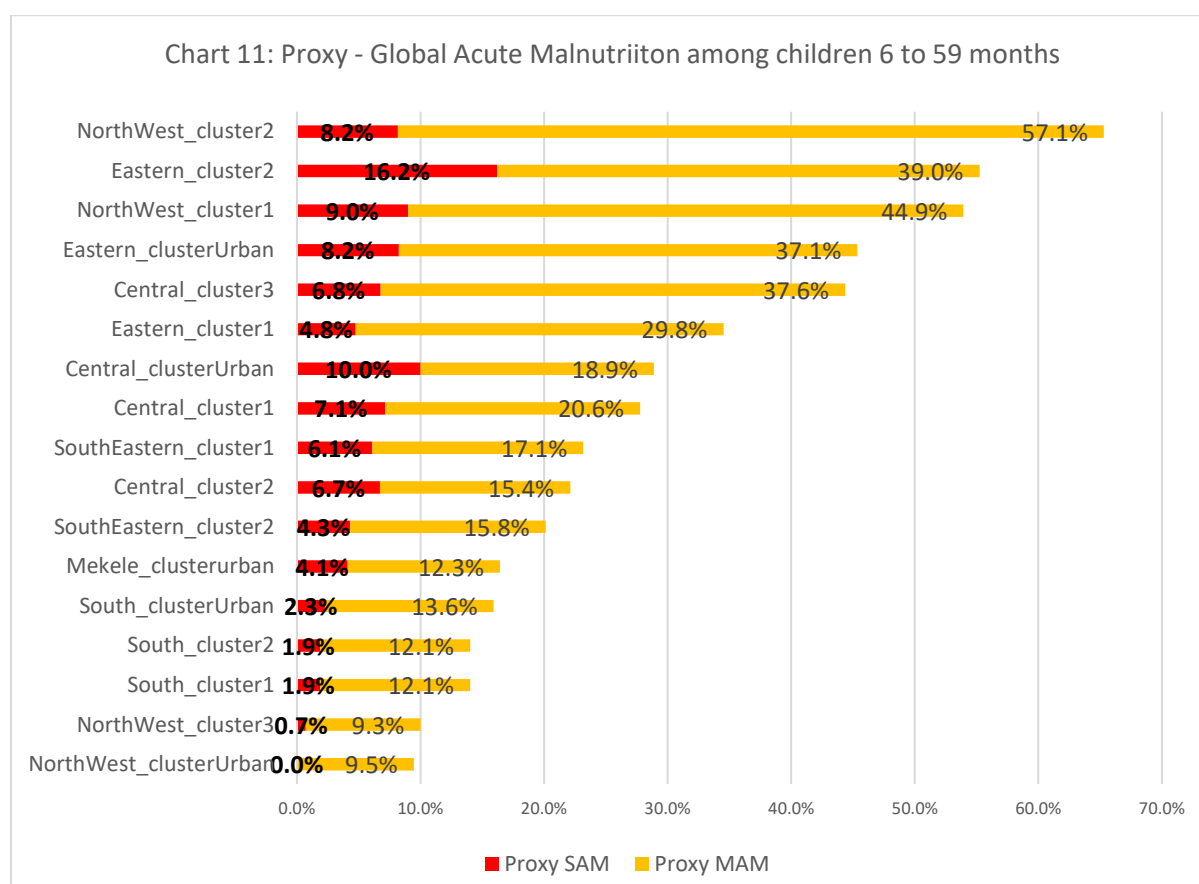
Wasting among Children 6 to 59 months (based on MUAC and oedema)

Table 2 below shows an overall proxy-GAM of 29.4 percent, proxy-MAM of 23.6 percent, and proxy-SAM of 5.8 percent. These findings show high wasting, which is greater than the 15 percent GAM threshold for an emergency.

GAM (MUAC<125 mm/oedema)	MAM (≥115 and <125 mm)	SAM (<115 mm)
29.4 percent [21.4 – 39.5 percent 95 percent CI]	23.6 percent [17.1-32.1 percent 95 percent CI]	5.8 percent [4.0-8.3 percent 95 percent CI]
n = 510	n = 410	n = 100

Wasting among 6-59 months children by cluster

There were, however, wide variations across the 17 clusters that were assessed, ranging from a proxy-GAM of 9.5 percent to as high as 65.3 percent. Of the 17 clusters, 13 of them had proxy-GAM higher than 15 percent. These findings show generally high levels of acute malnutrition across the region, which is linked to various compounding factors including the food security situation where the survey revealed that over 80 percent of the population was food insecure in 16 of the 17 clusters. The lack of food assistance and the inconsistency of the rounds have also exacerbated the nutrition situation, with over 65 percent of the population reporting that they received the last relief support over a year ago. These reasons coupled with the fact that the treatment programme in TSF and OTP has been affected by a myriad of challenges including erratic supply, limited access, and late detection and treatment explain the very high levels of wasting reported (Chart 11).



Although no systematic nutrition survey has been conducted in Tigray since the conflict started, the findings from this assessment are consistent with some routine or screening campaign data conducted by nutrition partners in the region. Find and treat campaigns and screening activities conducted by nutrition partners since the beginning of the year consistently reported proxy-GAM of over 15 percent for most parts of the region. Wasting is a predictor of mortality among children six–59 months, with an estimated 12 times higher risk of mortality among acutely malnourished children compared to their well-nourished

counterparts. This calls for urgent action to strengthen wasting treatment interventions in Tigray to prevent excess mortality due to malnutrition.

Wasting among pregnant and lactating Women

The EFSA also assessed the nutritional status among PLW. The findings show that at least one in every two PLW (55 percent) were acutely malnourished. There were some notable differences between women who were pregnant and those that were lactating, with as high as 59.6 percent of pregnant mothers being wasted against 53.6 percent for lactating women (Table 3). Of all the PLW that were screened during this assessment, nearly half of them (43 percent) were already undergoing treatment through Targeted Supplementary Feeding (TSF).

Table 3: Proxy - Wasting among pregnant and lactating women (PLW) (MUAC < 23cm)	
percent Wasted PLW	percent of wasted PLW Currently enrolled in TSF*
55	24

*Targeted Supplementary Feeding Programme

Infant and Young Child Feeding Practices

One of the main factors contributing to child undernutrition is the feeding practices for infants and young children. According to UNICEF's Conceptual Framework, these factors constitute the immediate determinants of child nutrition⁹. Specifically, the assessment focused on two main areas which include breastfeeding and complementary feeding practices for infants and young children.

Breastfeeding

Breastmilk is the single most important source of nutrients for children 0–23 months of age. This is particularly so for younger children. The key recommendations for breastfeeding include early initiation of breastfeeding in the first hour of birth, exclusive breastfeeding from birth to six months, and continued breastfeeding with complementary feeding from six months to two years or beyond. These practices are associated with better nutrition and health outcomes for children, as well as longer-term developmental potential in adulthood.¹⁰

The assessment found that out of the surveyed children aged 0–23 months, around 70 percent of them were put to the breast within the first hour after birth. The assessment also found that 9 of every 10 children below six months were receiving exclusively breastmilk at the time of the survey. Additionally, 92 percent of children aged between 12–23 months were still receiving breastmilk at the time of the survey. These findings indicate that breastfeeding practices are generally good, with better early initiation from this assessment (70 percent) compared to the 63 percent for Tigray from the Demographic Health Survey (DHS) of 2016¹¹. Similarly, this assessment found better exclusive breastfeeding practices (92 percent)

⁹ UNICEF Conceptual Framework on Maternal and Child Nutrition. Available on the link ([here](#))

¹⁰ WFO Factsheet on Infant and Young Child Feeding. Available on the link ([here](#))

¹¹ Ethiopia Demographic Health Survey of 2016. Available on the link ([here](#))

compared to the National average of 59 percent from the Mini-DHS of 2019¹². Infants and children who are breastfed as per the optimal recommended breastfeeding practices, such as early initiation and exclusive breastfeeding have better health and nutrition outcomes and a higher chance of survival compared to those not meeting these recommended breastfeeding practices^{13,14}.

Complementary Feeding

Complementary feeding relates to the practice of providing the infant with other foods in addition to breast milk from the age of six months because breastmilk alone will no longer be sufficient to meet the increasing nutritional needs. For the complementary foods to meet the nutrient requirements, they should comprise a variety of food groups, given at the right amount and frequency for the age of the child. Inadequacy in any of these factors means the nutrient needs are not met, ultimately resulting in malnutrition. Because food security is one of the key factors (in addition to care practices) to achieving adequate complementary feeding, the EFSA also assessed complementary feeding practices for children six–23 months.

The assessment found that only 2.7 percent of children aged six–23 months that were still breastfeeding met the recommended minimum dietary diversity (MDD) of consuming at least five of eight food groups. Of those children in this age group who had stopped breastfeeding, only 1.6 percent of them were receiving the recommended MDD. On the other hand, about 26 percent of children aged six–23 months met the recommended minimum meal frequency (MMF) of consuming other foods in addition to breastmilk. The minimum acceptable diet (MAD) (which is a function of MDD and MMF), was therefore found to be very low, with only 1.3 percent of the children six–23 months receiving the recommended MAD. These findings present a very bleak picture for young children, with potentially fatal consequences through acute malnutrition if this is not addressed.

The poor dietary diversity also reflects on the households' level of access to diversified foods for their families and children. The evidence from the focus group discussions (FGDs) indicates that households have very little food to eat for both adults and children. This corroborates with the food security analysis from this assessment which indicates that over 90 percent of households in the region are food insecure. In addition, there is also limited relief assistance with many households not receiving food in the past three months. The current food basket for the relief assistance also does not meet the standard ration, thereby worsening the situation even for those who receive assistance.

¹² Ethiopia Mini-Demographic Health Survey of 2019. Available on the link ([here](#))

¹³ Exclusively breastfed children have better health outcomes, than mixed-fed children. Link ([here](#))

¹⁴ Early initiation of breastfeeding increases the chances of survival among newborn infants ([here](#))

Maternal health and nutrition services

The EFSA also considered other key health factors that may contribute to nutrition outcomes for both the PLW and their infants and young children. Interventions such as antenatal care (ANC) services for pregnant women are known to contribute to the optimal development of children in the first 1,000 days of life. As such, the assessment considered the utilization of ANC services such as attending ANC clinic and consuming Iron and Folic acid (IFA) supplements. Table 4 shows that about one in two (54.3 percent) pregnant women included in the survey were attending ANC at the time of the survey. Similarly, about four in ten pregnant women were consuming IFA supplements.

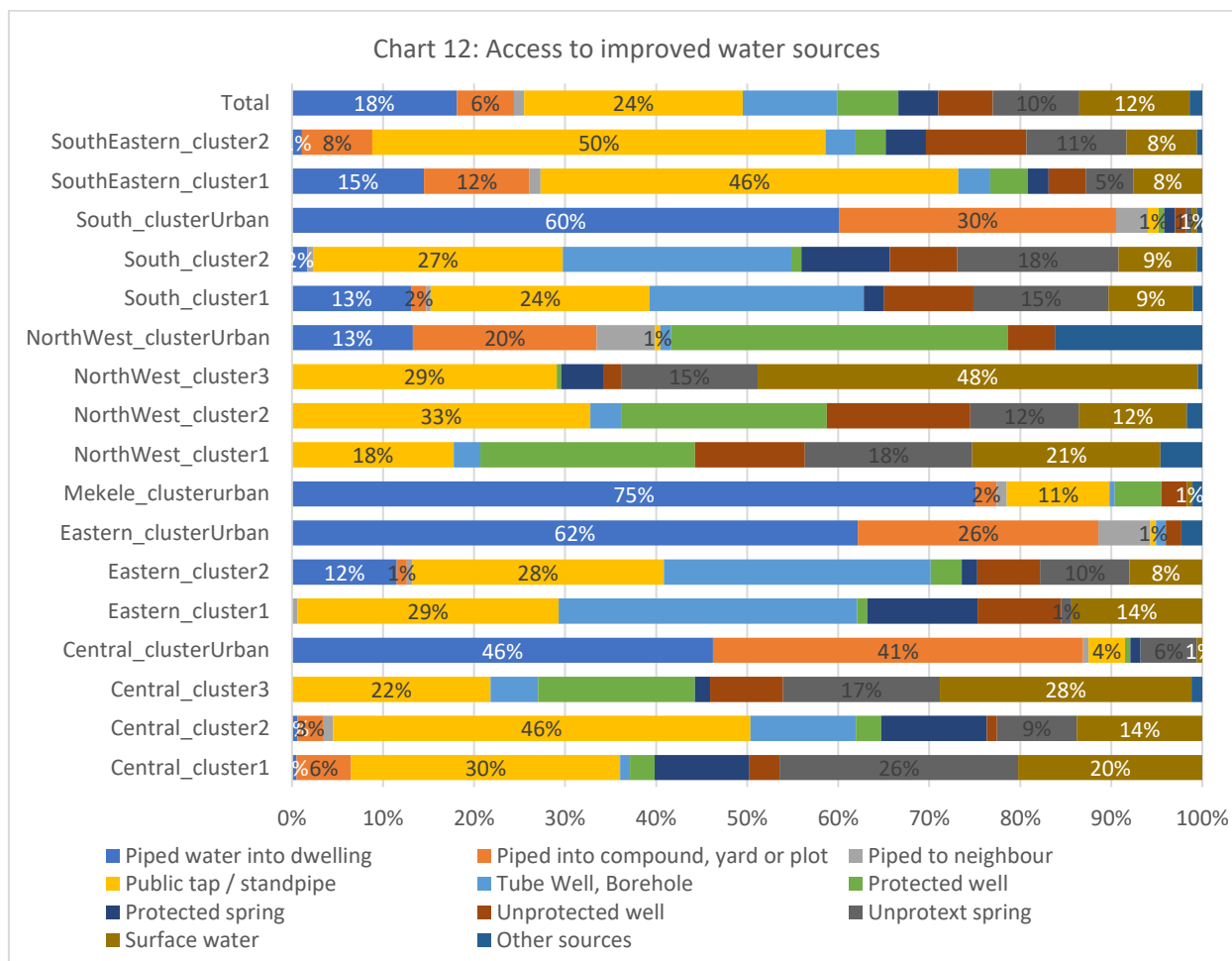
Table 4: The utilization of nutrition and health services among pregnant women	
percent Attending Antenatal Care Clinic	percent Consuming Iron and Folic Acid supplements
54.3	37.7

Household water, sanitation, and Hygiene status

Access to improved water sources

Nearly a third of the households (24 percent) reported sourcing water from improved water sources, such as public tap/standpipe. Piped water was mentioned by 18 percent of the households. On the other hand, the use of surface water and unprotected springs was mentioned by 12 percent and 13 percent, respectively (Chart 12).





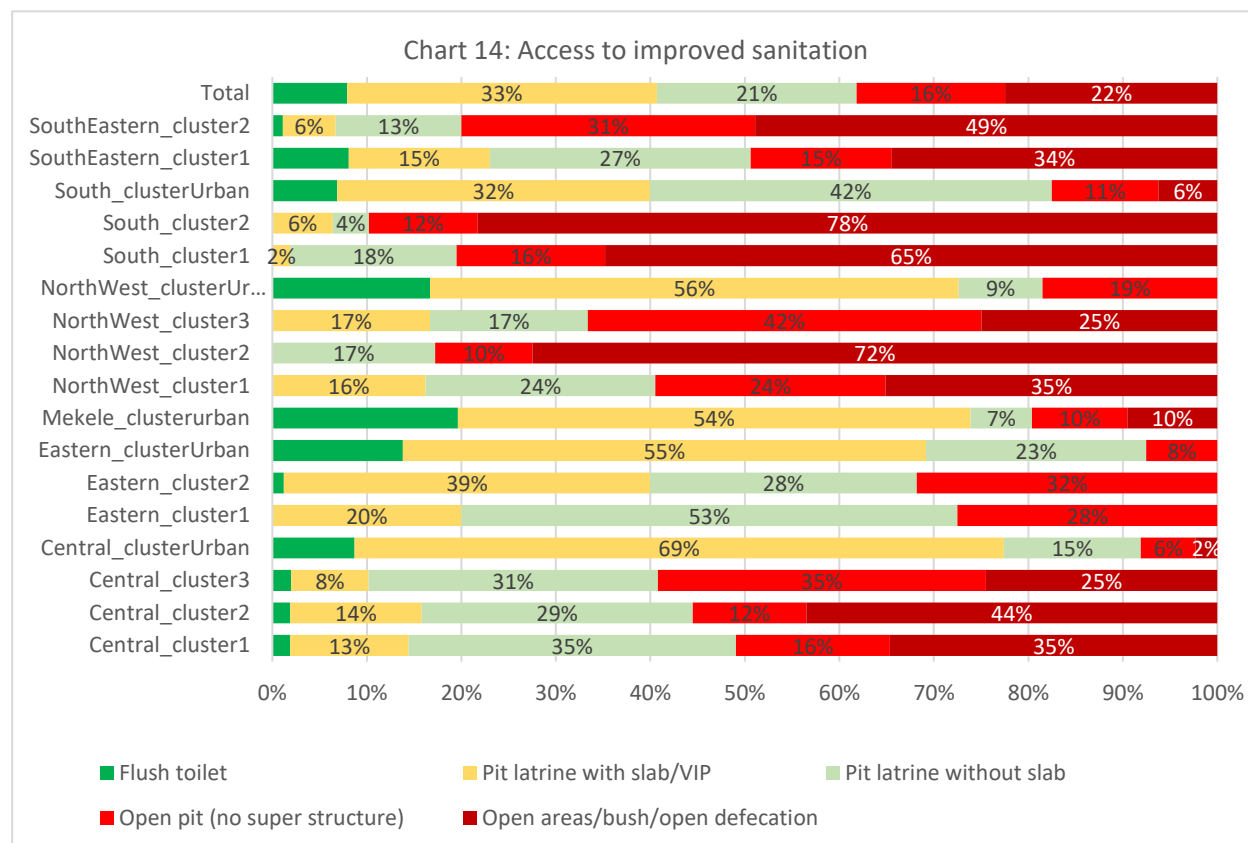
Adult women and girls mostly collected water, reported by 63 percent and 23 percent of households, respectively. Most of the households (23 percent) spent approximately 16 to 30 minutes fetching water (round trip), followed by 30-60 minutes (21 percent) and 5-15 minutes (17 percent). . On the other hand, 12 percent and 6 percent spent more than 20 and less than five minutes respectively, 21 percent indicated that they had water within their premises.

Sanitation

55 percent of the surveyed population had access to a toilet, with the urban clusters reporting access of over 95 percent. For the rural clusters, Northwest clusters (1, 2, and 3) showed the lowest access at 11 percent, 16 percent and 21 percent, respectively, followed by the Eastern cluster 1 (23 percent) and central cluster 3 (28 percent).

Use of good sanitation (improved pit latrine and flush/pour toilet) was low (41 percent), with households in the urban areas more likely to have good sanitation than their rural counterparts.

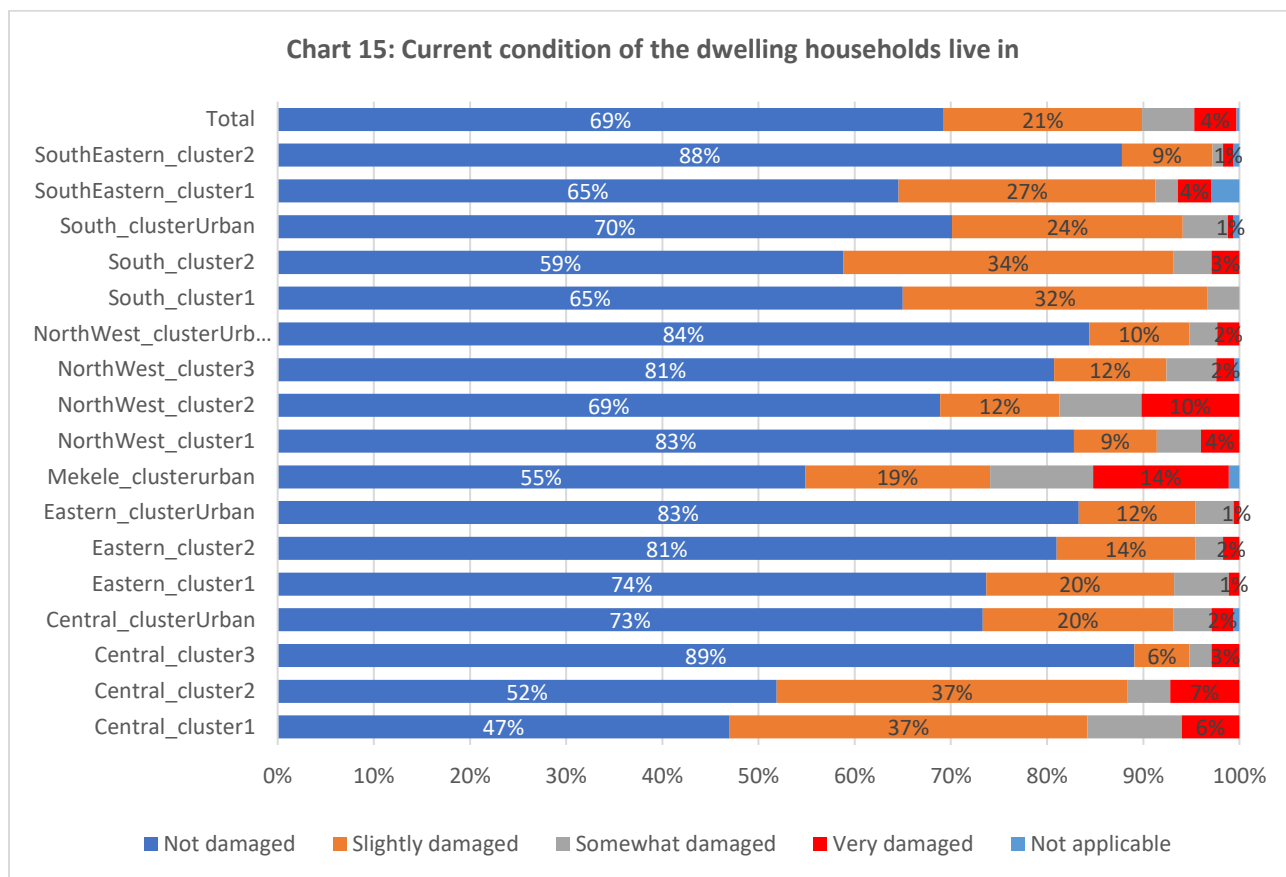
As shown in Chart 14, South cluster 1, Northwest cluster 1, and South cluster 1, had the highest levels of poor sanitation (using open areas and/or bush /open areas for defaecation), as reported by 78 percent, 72 percent, and 65 percent of the households, respectively.



Quality of housing

24 percent of the sampled households lived in poor-quality housing (thatched roofs and dirt/mud floors and walls). Households in the rural areas were more likely to live in poor-quality housing when compared with their urban counterparts. On the other hand, central cluster 2, Northwest cluster 2, and South cluster 1 had the highest proportion of households likely to have poor housing, as mentioned by 49 percent, 46 percent, and 40 percent, respectively.

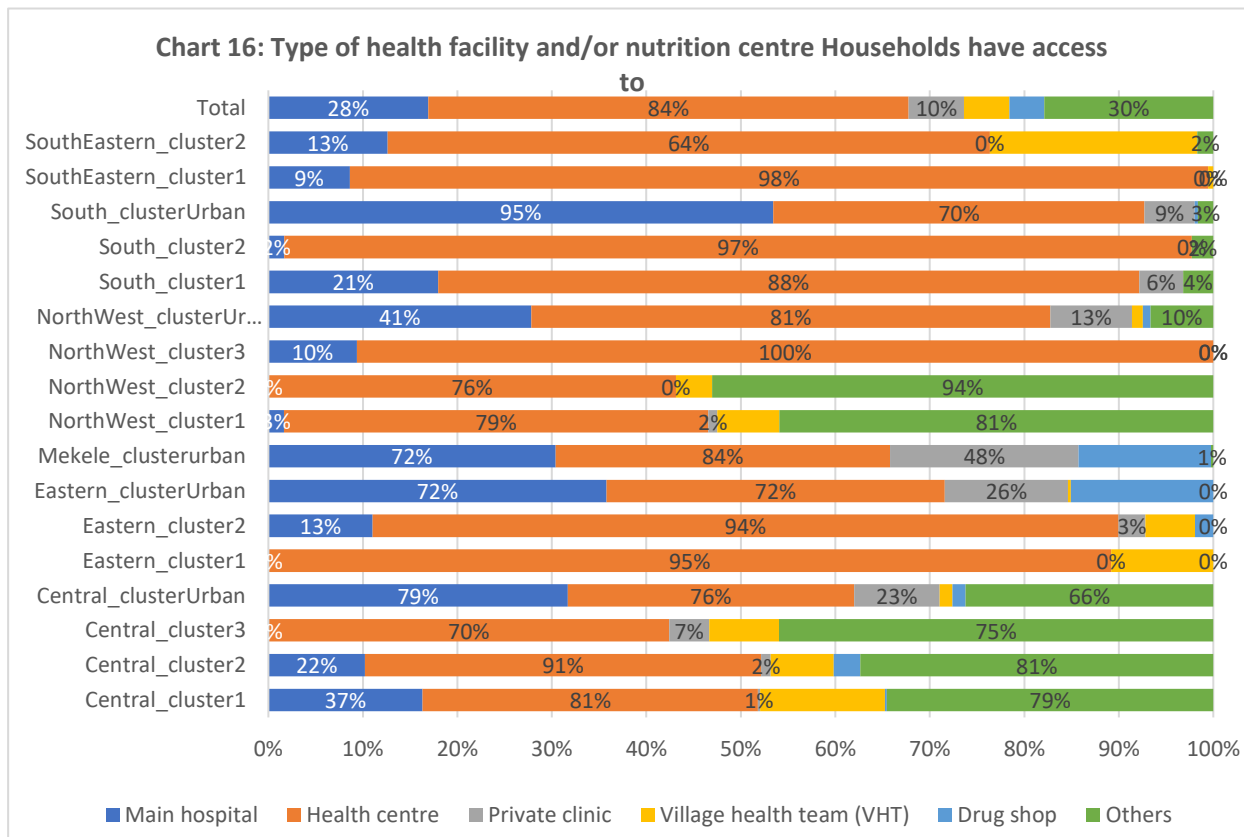
21 percent of the households indicated that they live in slightly damaged houses. Damage was most prevalent in the central clusters 1 and 2, as mentioned by 37 percent of the households each, followed by South cluster 2 and 1 at 34 percent and 32 percent, respectively. In Mekelle cluster (urban), almost a quarter of the households (14 percent) reported living in very damaged houses (Chart 15).



Access to health services

Overall, 87 percent of households had access to health services, with most of the clusters recording over 95 percent access. Northwest cluster 3 and 2, however, registered the lowest access at 55 percent each, as well as Northwest cluster 1 (66 percent).

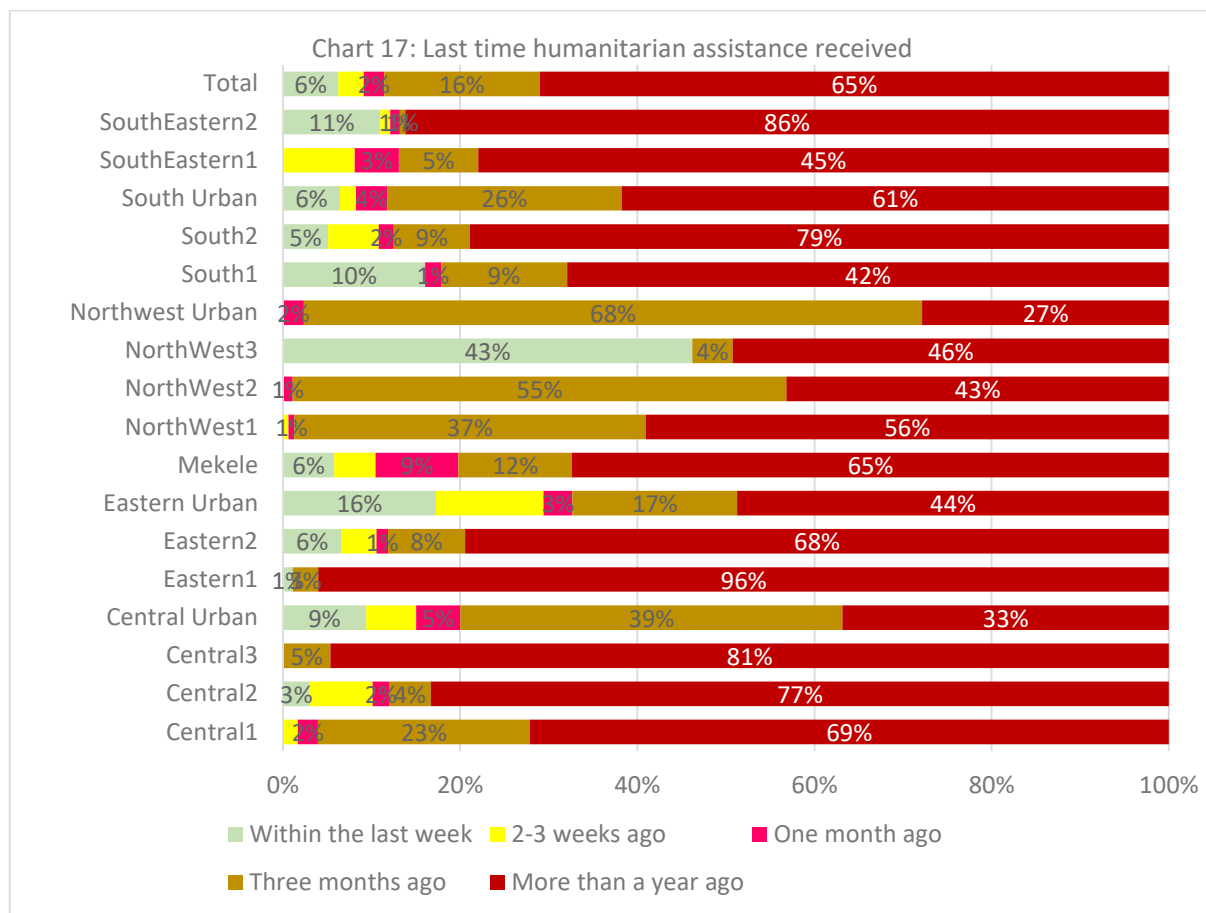
84 percent of households visited health centres. Rural clusters were more likely to visit health centres, while urban clusters were more likely to visit main hospitals. Most of the households (25 percent) took between 30 minutes to one hour to travel to the health centre (round trip), while 73 percent took over five minutes. Only two percent mentioned taking less than two minutes (Chart 16).



Humanitarian assistance coverage

Nearly 81 percent of the households in the region reported receipt of humanitarian assistance (at least once) since November 2020. A higher proportion of households in the central and Northwest clusters reported receipt of humanitarian assistance.

Out of those who received assistance since November 2020, 65 percent reported that they received humanitarian assistance more than one year ago and 16 percent three months ago. Only 8 percent reported receipt of assistance in the last one to three weeks from the date of the interview (Chart 17).

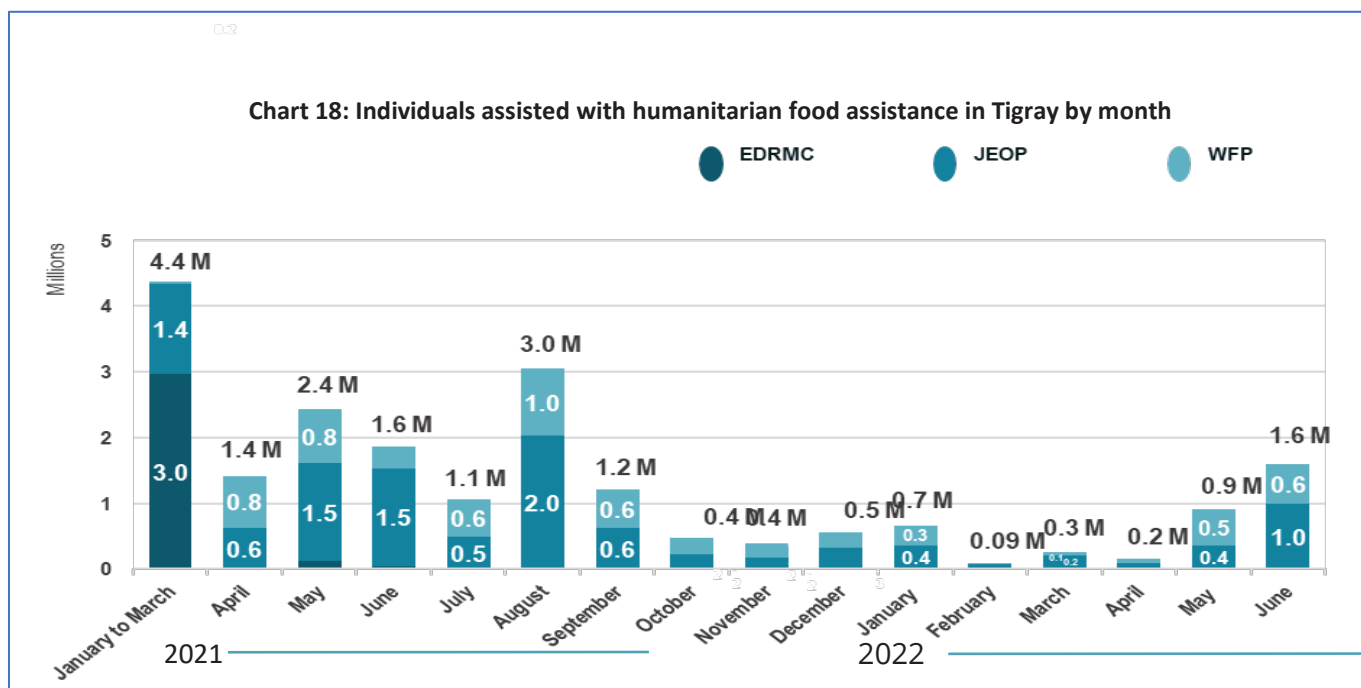


Out of those who reported receipt of humanitarian assistance since November 2020, almost all reported food-only modalities of assistance.

Although humanitarian partners have increased supplies to Tigray following the declaration of the humanitarian truce on the 24 March 2022, and road convoys have resumed with 6,105 trucks having arrived in Mekelle as of 26 July 2022, this is yet to translate into increased humanitarian assistance, as other challenges remain, such as limited access to fuel.

On food deliveries, about 163,137 mt of food has been delivered in the region since 1 April 2022, through the Semera-Mekelle corridor. In addition, 15,933 mt of non-food items have also been delivered to Tigray. The increased deliveries of food have resulted in partners distributing food to targeted areas – updates as of 6 July 2022 show that 4.66 million people have been assisted by partners in targeted woredas:

- JEOP partners have assisted **2.59** million people, which is 65 percent of the planned 3.96 million people. JEOP is assisting people in 5 zones (Central, Eastern, Mekelle, Southeastern, and Southern)
- WFP has distributed food to 2.07 million people, representing 97 percent of the targeted 2.14 million people, in the southern and Northwestern zones.



Food Insecurity Contributing factors

Agriculture production

Most households in Tigray engage in crop production as their main income generating activity. Before the conflict, household economy baselines showed that poorer households were likely to cultivate very small amounts of land and could only meet 40 to 45 percent or 4 to 5.5 months of their annual food needs from their production.

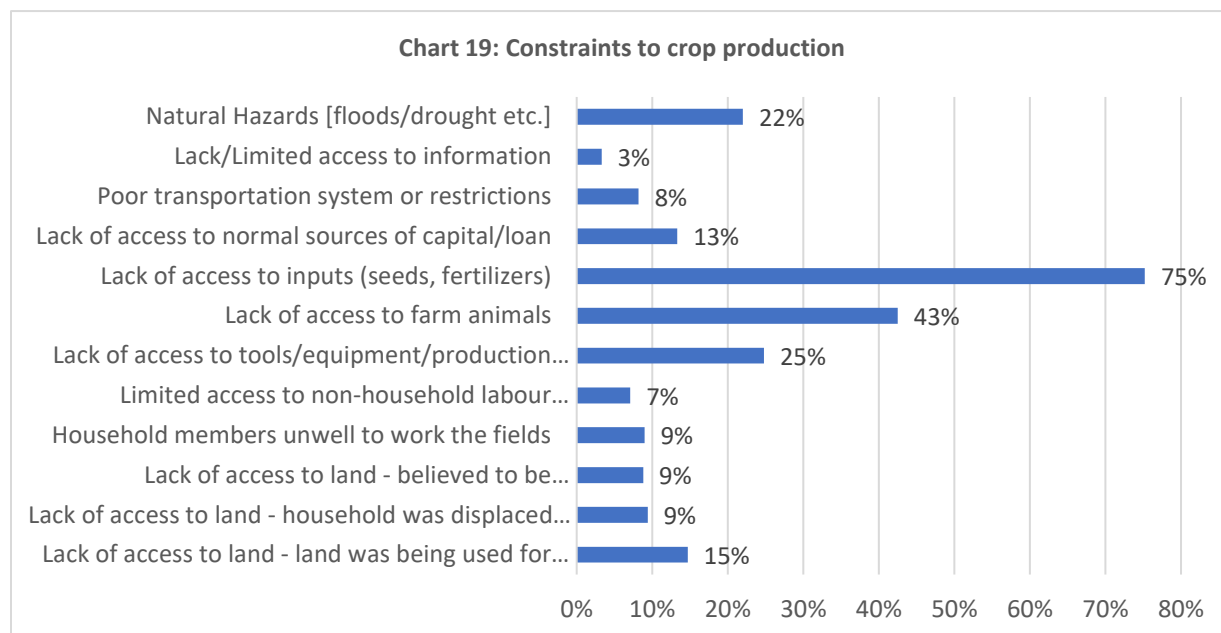
In 2021, Tigray’s farmers produced 900,000 tonnes of staple foods, accounting for 40 percent of normal production, equivalent to seven to eight months of annual cereal needs for the region.¹⁵

The Meher season rains are the most important for crops, livestock and other livelihoods in Tigray, contributing to a large amount of the annual rain food crop production. There is also a limited amount of crop production from the Belg season.

At the time of data collection, most farmers in Tigray were in the process of preparing their land for the Meher cropping season. The majority indicated that they could cultivate an average of less than 2 Timad and between 2 to 4 Timad, as reported by 55 percent and 39 percent, respectively. Land being used for other purposes (15 percent), households displaced

¹⁵ <https://www.fao.org/newsroom/detail/tigray-time-is-running-out-to-avert-worrying-levels-of-food-insecurity/en>

and could not return in time (9 percent), and land believed to have been contaminated by unexploded remnants of war (9 percent), were key reasons given for the lack of access to land. The main crops cultivated during the 2021 planting season were teff (15 percent), wheat (22 percent), sorghum (19 percent), barley (14 percent), and millet by 13 percent of the households (Chart 19).



Lack of access to farming inputs (seeds, fertilizer) was reported as the main constraint that prevented households to cultivate (reported by 75 percent of households), followed by lack of access to farm/draught animals (43 percent) and lack of access to tools/equipment/ (25 percent). Natural hazards (drought/floods) were mentioned by 22 percent of the households.

Access to fertilizer and agricultural inputs

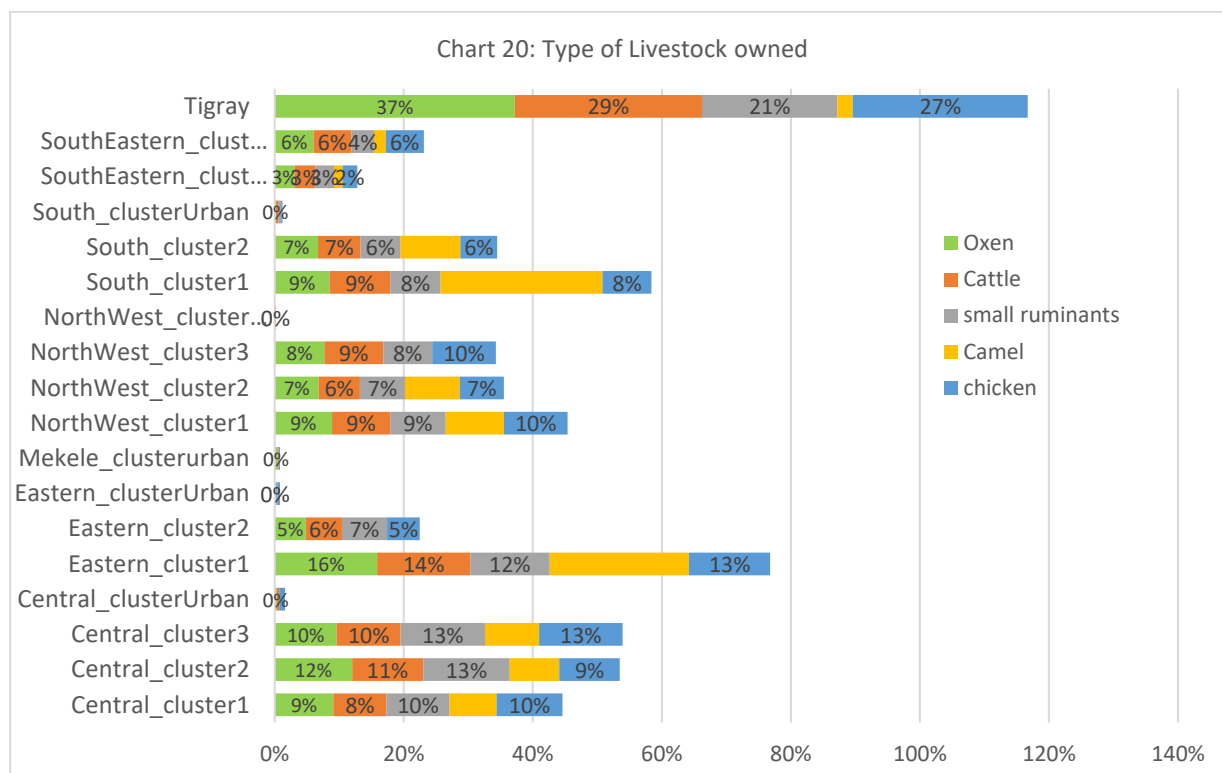
The multi-agency seasonal assessment conducted in Nov 2021 showed that 540,013 mt of fertilizers were supplied and 497,270 mt utilized¹⁶ by farming households. The same report showed that 757.20 mt of seeds were supplied and 707 mt utilized. However, the extension services were disrupted and the deliveries to the farmers were late, hence the limited application of inputs. Furthermore, the supply of the inputs was below the required amount.

The analysis showed low access to fertilizers and/or use of improved seeds by the households, with 46 percent indicating having almost no access to these inputs during the conflict. A similar trend was noted for household ownership of tools and working animals, with 66 percent indicating having less than before.

¹⁶ Multiagency Seasonal Assessment Regional report: November 2021; GoE

Livestock production

On average, 48 percent of the households in Tigray reported that they have livestock, with the majority being rural residents. Four clusters (Central cluster 3, Northwest 3, Northwest1, South2) had the highest proportion of households with livestock (75 percent). Oxen were the most type of livestock owned (37 percent), followed by cattle (29 percent), chicken (27 percent) and small ruminants (sheep and goats) (21 percent). Urban residents had hardly any livestock (Chart 20).

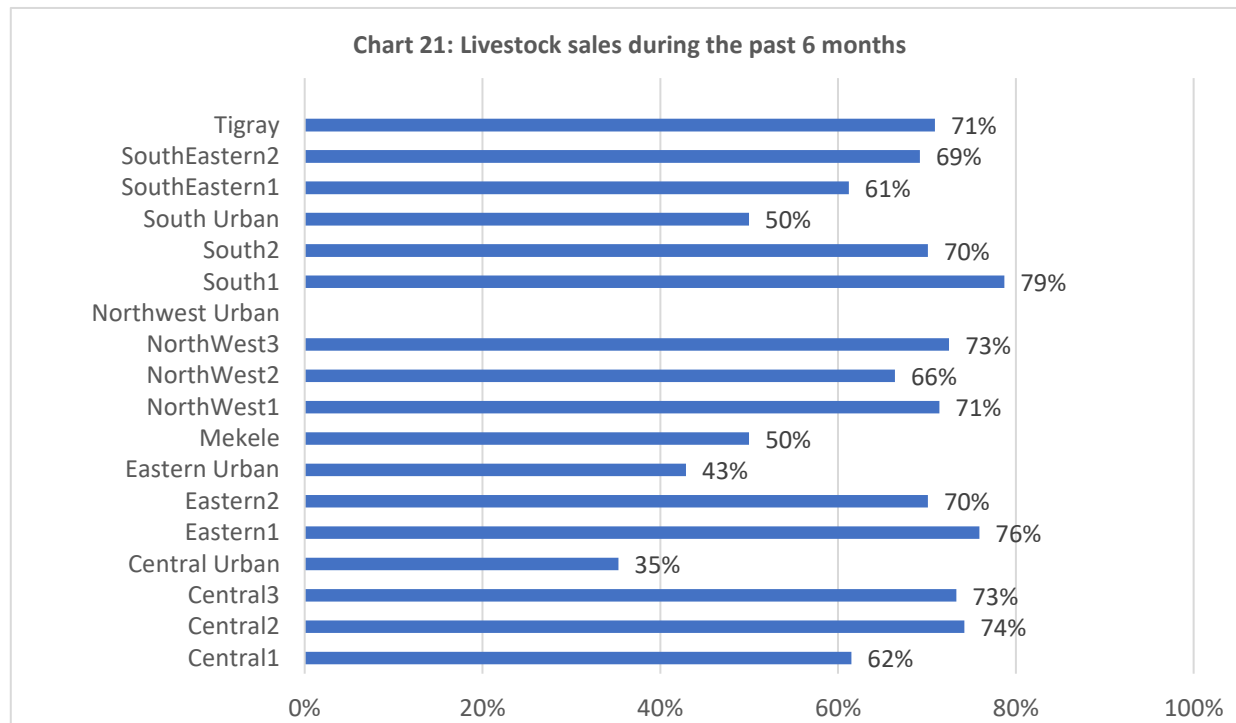


Livestock sales in the past six months increased when compared with the pre-conflict period, with nearly three quarters of households (71 percent) selling some livestock. The majority of households indicated that they sold livestock to cover food expenditure (92 percent), health



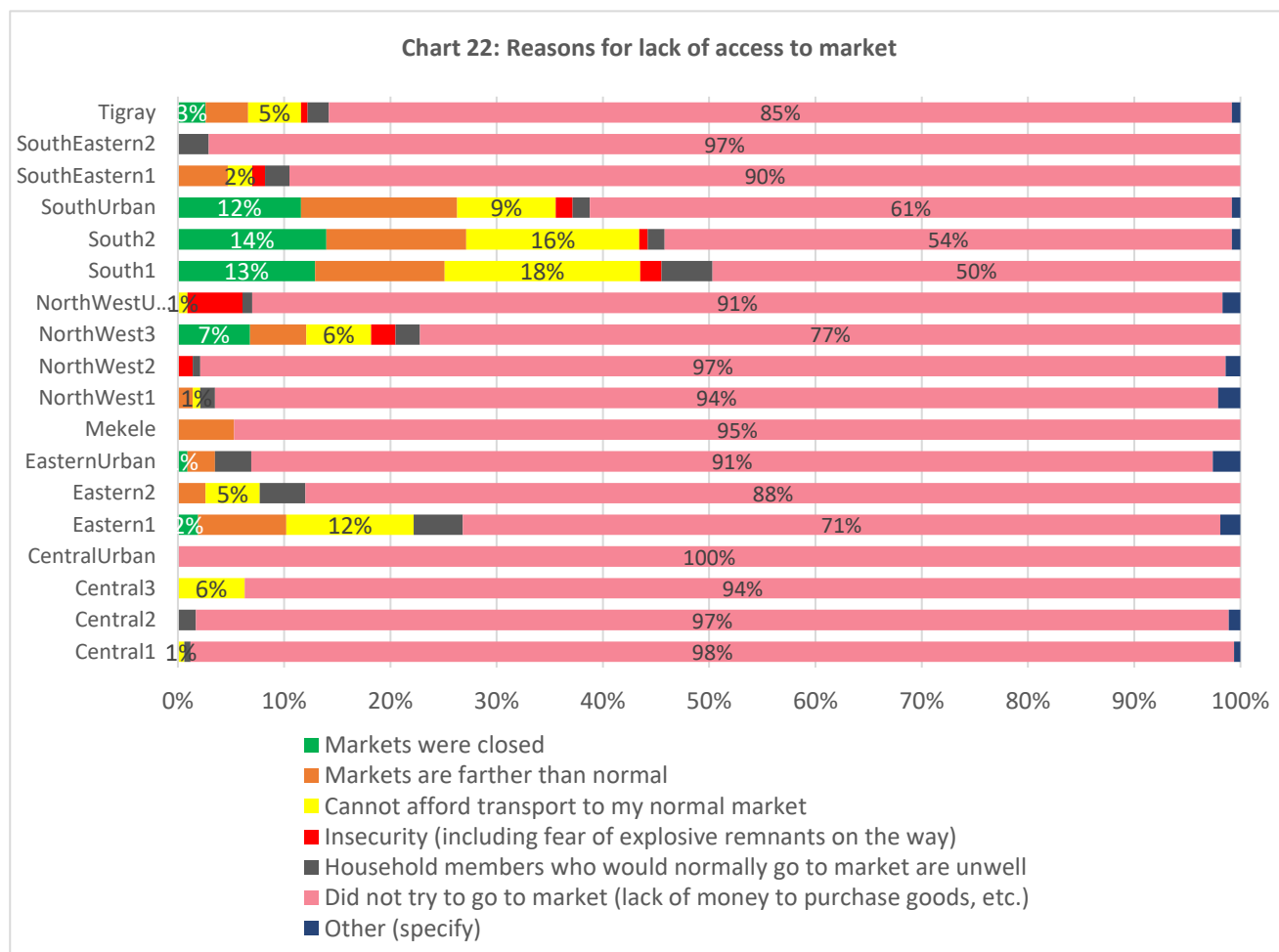
expenditure (3 percent), agriculture inputs (2 percent) and for debt repayment (2 percent), respectively (Chart 21).

Market supply and Price Trends



75 percent of households in Tigray reported that they did not have access to markets in the month prior to data collection. This was highest in central clusters, with the highest proportion of households with no access in central cluster 2 (97 percent), followed by Central urban cluster (90 percent), central 1 (88 percent) and central 2 (82 percent). South-eastern clusters 1 and 2 had a slightly lower proportion of households indicating that they lacked market access, at 58 percent and 50 percent, respectively. The main reason for not accessing markets was due to lack of money to purchase goods, as reported by 85 percent of the households (Chart 22).





Food Prices

Food prices have sharply increased since the start of the conflict. High food prices are attributed to the below average 2021 Meher production in the region, disruption of normal trade routes that used to connect Tigray to surplus producing areas of Ethiopia, and non-functioning of transportation services due to the high cost of fuel.

Prices of cereals and pulses in Tigray have been exceptionally high compared to prices in the reference market of Dessie. Particularly the prices of teff, maize, sorghum, wheat (grain and flour) rice, and fava beans have skyrocketed in Tigray markets. Cereal and pulse prices in Adigrat, Tigray are higher by 70 to 309 percent compared to prices in Dessie in June 2022. Similarly, prices in Adwa are higher by 68 to 294 percent, in Shire by 33 to 267 percent, and in Mekelle Wukro by 78 to 223 percent¹⁷.

¹⁷ WFP Market Watch, June 2022

Vegetable oil prices in Tigray are 58 to 99 percent higher compared to prices in Dessie. Prices of fava beans (a staple pulse) are 151 to 306 percent higher than prices in Dessie.

Onion and potato are relatively cheaper in Tigray markets as compared to the reference market. On the other hand, the wage for daily laborers is 30 to 59 percent lower than the corresponding values in Dessie, which could be attributed to the excessive supply of labour compared to the limited demand in the market. In all assessed markets of Amhara, Afar, and Tigray, goats and sheep are being sold at cheaper prices when compared to Dessie market. However, the markets in Tigray provide goats and sheep at significantly low prices, which implies excessive supply in the market that outstripped the constrained demand.

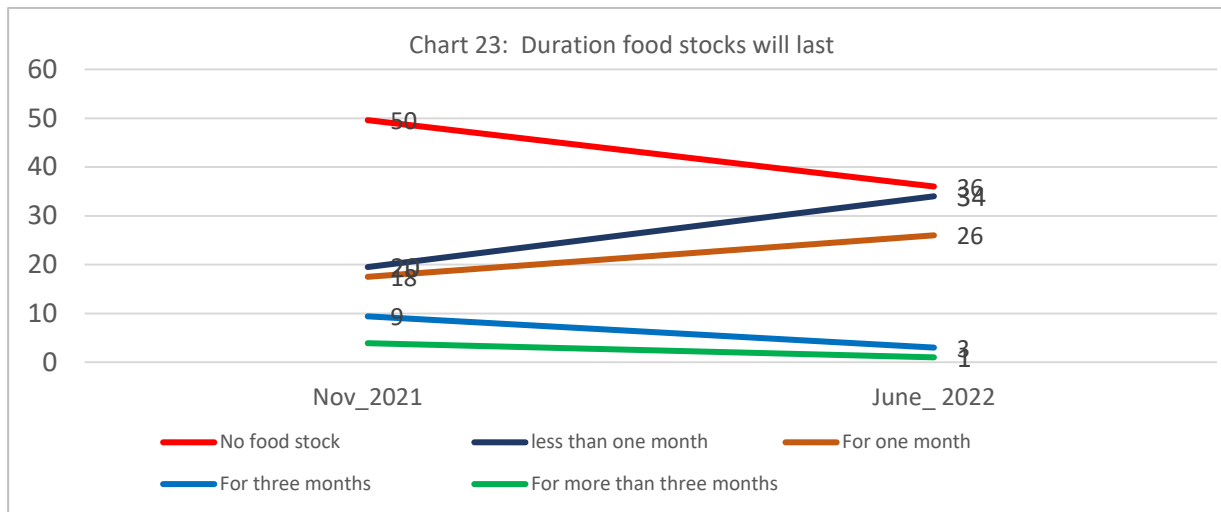
Table 5: Prices of key food commodities in conflict-affected markets in Afar, Amhara, and Tigray as compared to Dessie market, June 2022¹⁸

Commodity	Unit	Reference market	Prices in Tigray and percentage difference to Dessie (the reference market)							
		Dessie	Adigrat		Adwa		Shire		Mekelle	
		Birr	Birr/Unit	% of difference	Birr/Unit	% of difference	Birr/Unit	% of difference	Birr/Unit	% of difference
Teff Mixed	kg	45	81	81%	76	70%	71	60%	85	91%
Wheat white	kg	39	71	82%	66	68%	52	33%	81	106%
Maize white	kg	28	70	151%	62	124%	51	82%	68	144%
Sorghum white	kg	25	60	142%	65	158%	49	94%	73	193%
Wheat Flour	kg	61	104	71%	105	72%	115	89%	126	106%
Rice	kg	46	162	251%	182	294%	170	267%	166	260%
Fava beans	kg	43	176	306%	128	195%	113	159%	102	134%
Edible Oil	kg	216	342	58%	389	80%	431	99%	435	102%
Goat (Local)	Head	7,260	2,270	-69%	2,260	-69%	2,267	-69%	2,883	-60%
Sheep (Local)	head	4,730	2,130	-55%	2,180	-54%	1,967	-58%	2,845	-40%
Unskilled labour wage	daily	250	176	-30%	102	-59%	150	-40%	154	-38%

¹⁸ Prices higher by 20 percent or more compared to that of Dessie are marked in red icons (Table 5), between -20 to 20 percent relative to prices in Dessie are marked in yellow, and below -20 percent of Dessie prices are marked in green icons.

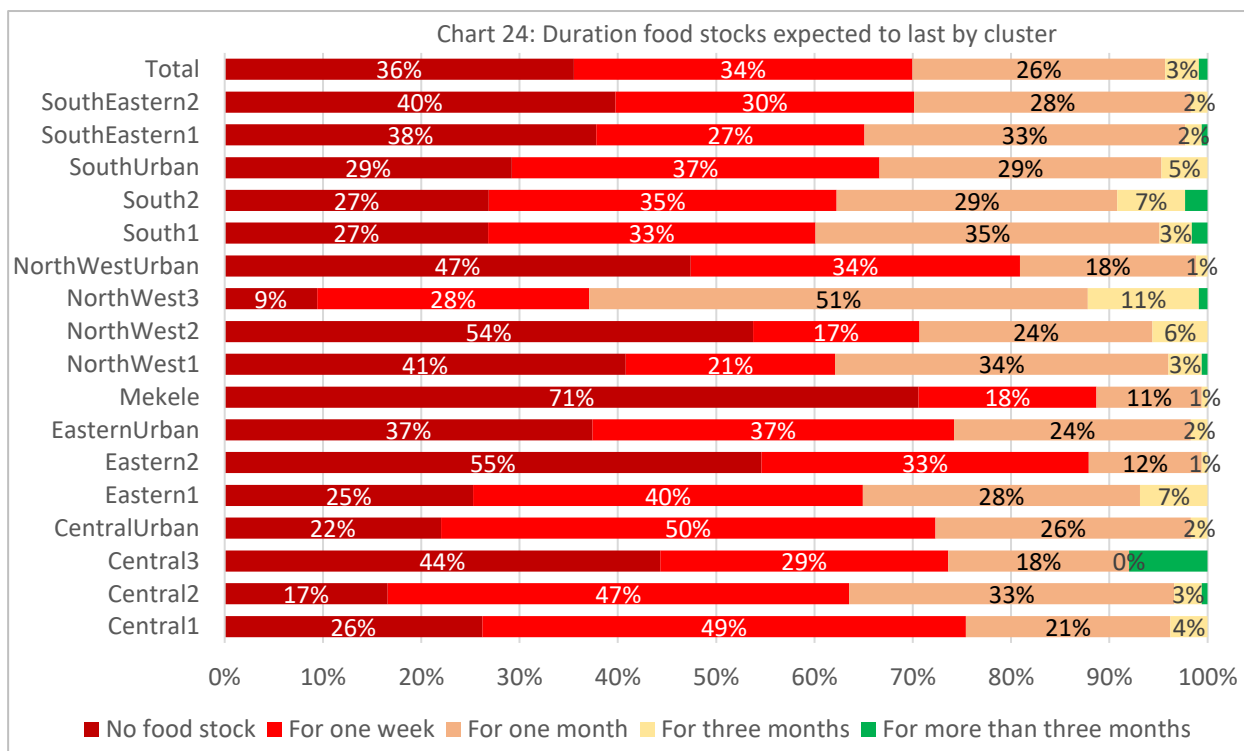
Availability of food stocks

Although the Meher 2021 production estimates had predicted the harvest to last households on average of seven to eight months, this does not seem to be the situation on the ground, with the trend analysis indicating an increase of households with stocks lasting for less than a month and up to one month when compared with the Meher season production in November 2021. However, there was a slight decrease in the proportion of households reporting no food



stocks from 50 percent in November 2021 to 36 percent in June 2022 (Chart 23).

When disaggregated by cluster, Mekelle (urban) had the highest proportion of households reporting no food stocks, with close to three quarters reporting no stocks available at the time

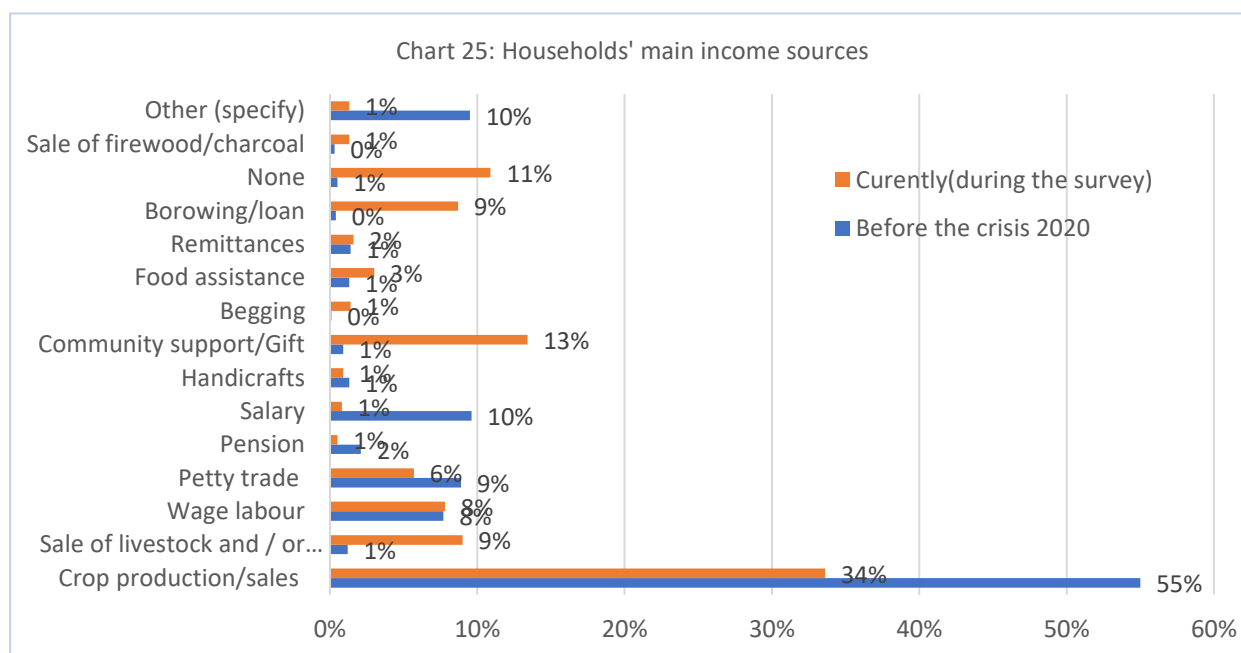


of data collection (71 percent), followed by Eastern2 (55 percent) and Northwest2 (54 percent) clusters (Chart 24).

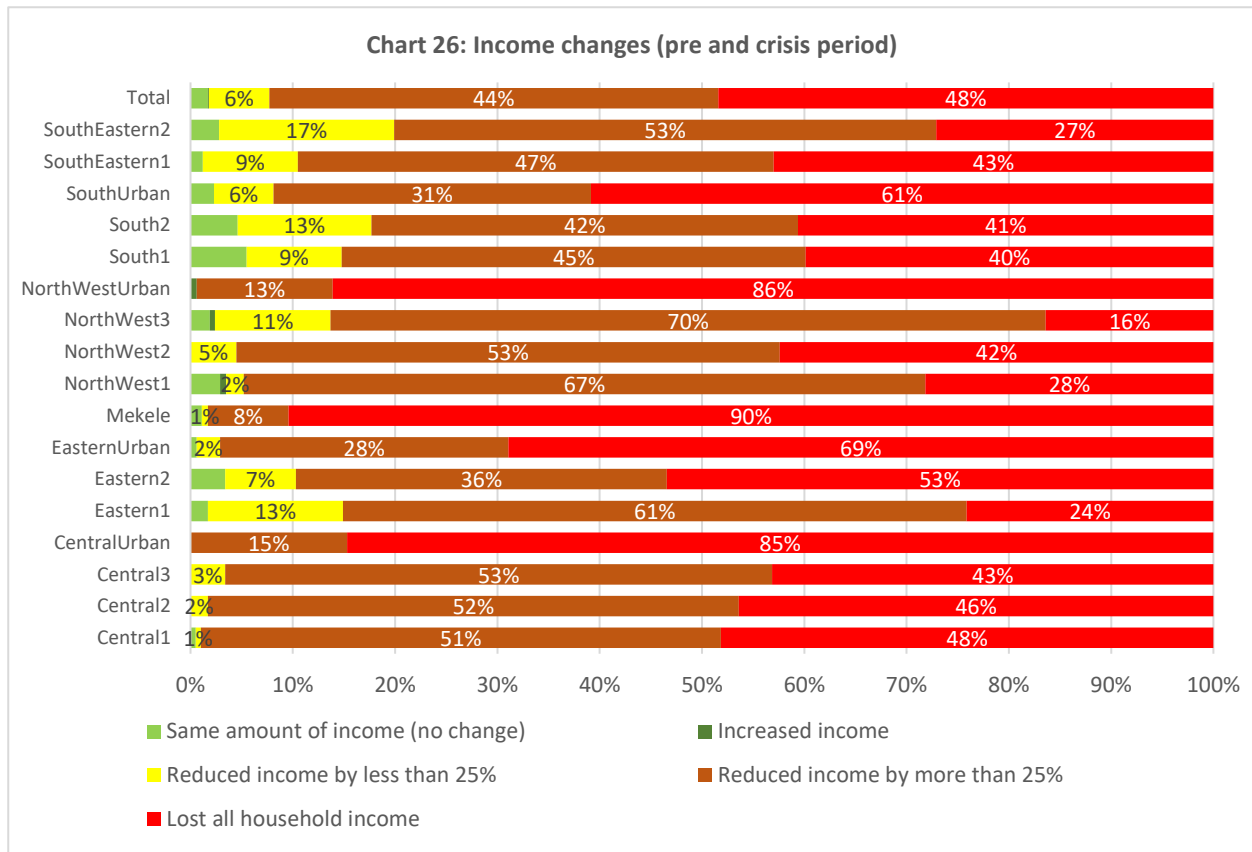
Income sources

Main income sources were investigated to understand households' livelihood strategies in providing for their food and income needs. Crop production/sales were mentioned as the main source of income. However, this livelihood source decreased from 55 percent during the Meher season in November 2021 to 34 percent in June 2022. The sale of livestock and/or livestock products registered a sharp increase in June 2022, with 10 percent of the households mentioning it as their main source, compared to 1 percent in November 2021. At the same time, households mentioning community support/gifts increased from 1 percent in November 2021 to 13 percent in June 2022. Furthermore, there was a sharp increase in households that reported borrowing/loan as the main income source, by 8 percentage points. The findings showed a dramatic decrease in the proportion of households mentioning salary as a main source of income, from 9 percent in November 2021 to 1 percent in June 2022.

As shown in chart 25, nearly half of the households (48 percent) reported loss of all household income, 44 percent reported a reduction by more than 25 percent, 6 percent reported a reduction by less than 25 percent, while 2 percent reported no change in income compared to before the conflict. Higher losses of income were noted under crop production/sales and salary income sources.



Total loss of income was particularly higher in the urban areas, especially in Mekelle (90 percent), Northwest urban (86 percent) and Central urban clusters (85 percent) (Chart 26).

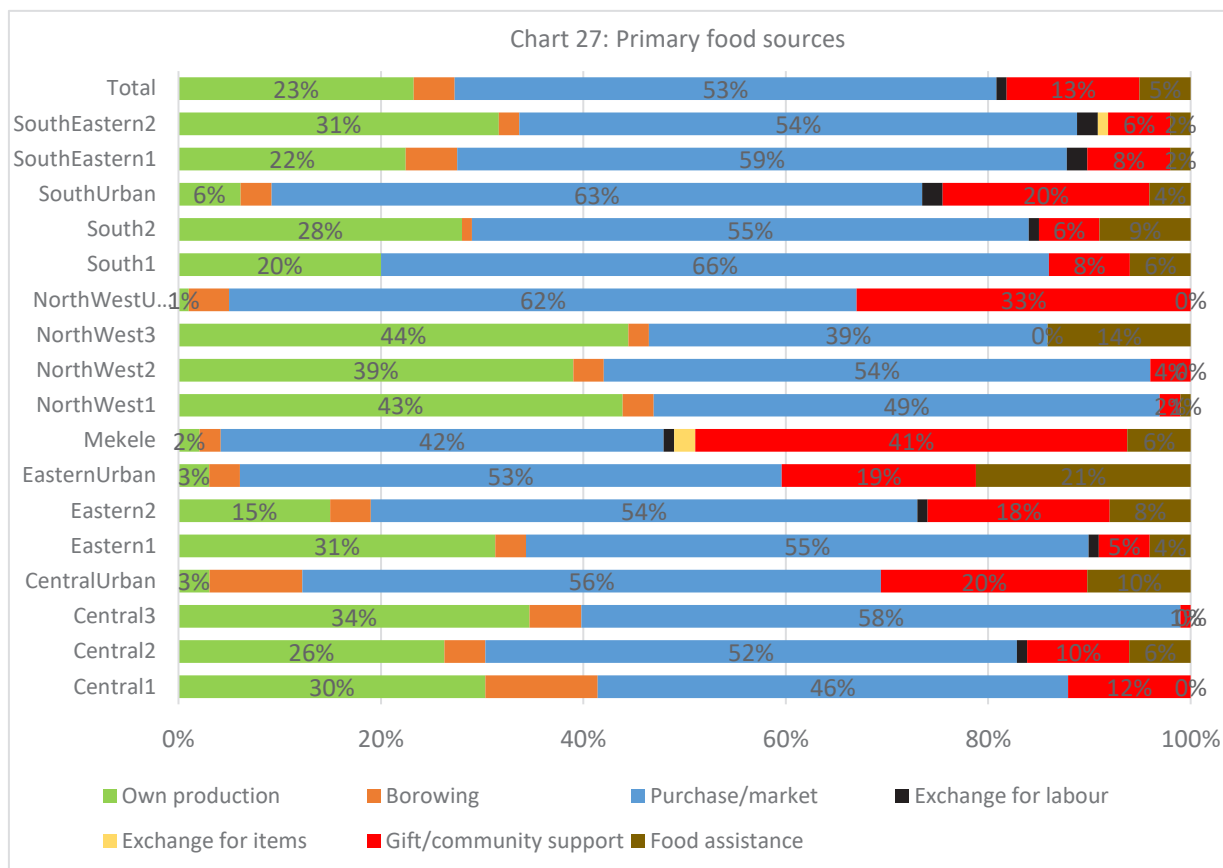


Primary sources of food

53 percent of households relied on food purchases as their main source of food. Own production was also mentioned as a significant source of food, mentioned by 23 percent of the households, followed by gifts (13 percent), food assistance (5 percent), and borrowing (4 percent).

Food purchases as a primary source of food was mostly mentioned in the South cluster1 (66 percent), South-eastern cluster1 (59 percent), and central cluster 3 (58 percent), while own production was more dominant in the Northwest (cluster, 44 percent, cluster 1, 43 percent and cluster2, 39 percent).

Gifts and community support was mentioned as a significant source of food in Mekelle (41 percent) and Northwest urban (33 percent), while humanitarian assistance was more dominant in the Eastern urban, and Northwest cluster3, mentioned by 21 percent and 14 percent, respectively.



Food insecurity prevalence

The various food security indicators discussed above were combined systematically into the CARI (Consolidated Approach to Report food insecurity) index to provide the number and percentage of the population that is food insecure¹⁹.

Table 6: Description of the overall WFP food security classifications

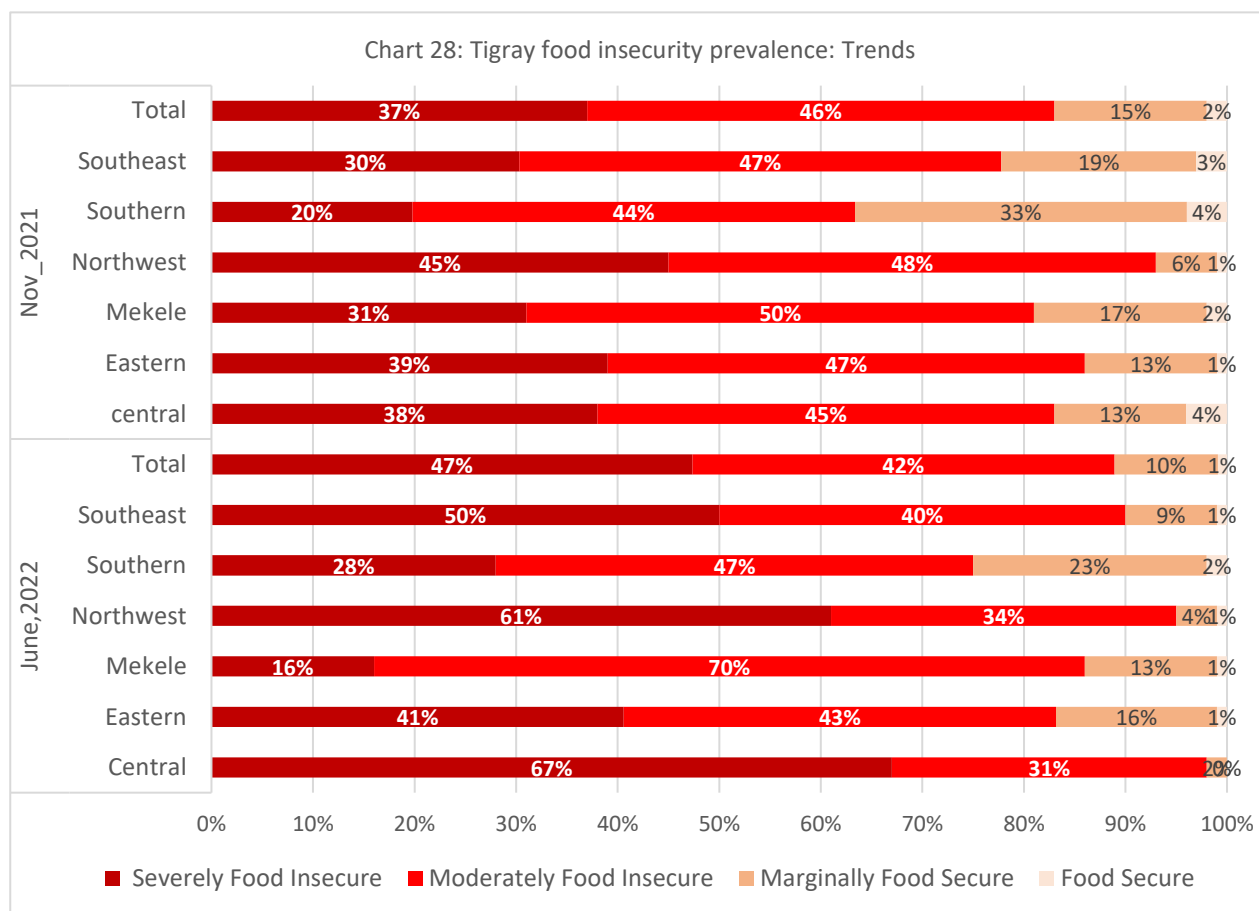
	Food Secure	Marginally Food Secure	Moderately Food Insecure	Severely Food Insecure
CARI	Able to meet food needs without engaging in reduced and livelihood coping strategies for food security	Has minimally inadequate food consumption, relies on reduced coping and applies stress coping strategies to secure food needs	Has food consumption gaps and unable to meet required food needs without applying crisis coping strategies	Has extreme food consumption gaps, OR has extreme loss of livelihood assets will lead to food consumption gaps, or worse

The survey results (indicated in table 7) indicated a very high prevalence of food insecurity in Tigray, with 47 percent of households classified as severely food insecure and 42 percent as moderately food insecure, meaning that 89 percent of total population food insecure.

¹⁹ CARI analyses primary data from a single Household survey and classifies individual households according to their level of food security. The approach culminates in a food security console which supports the reporting and combining of food security indicators in a systematic and transparent way, using information collected in a typical food security assessment. Central to the approach is an explicit classification of households into four descriptive groups: Food Secure, Marginally Food Secure, Moderately Food Insecure, and Severely Food Insecure.

Households categorised as moderately and severely food insecure are faced with extreme food shortages and are employing severe coping strategies, an indication of high levels of stress exposed to these households due to food shortages. Furthermore, the severely food insecure are employing destructive coping strategies such as selling their last breeding animals, engaging in begging and other demeaning income generating activities that may have severe and longer-term negative consequences in the long run.

Compared with November 2021 results²⁰, in June 2022, the percentage of the food insecure households increased by 6 percentage points from 83 percent to 89 percent, with Central, Northwest, Southeast, and Eastern zones having the highest prevalence of food insecurity (Chart 28).



The food insecurity varied across the clusters, with nine clusters registering over 90 percent food insecurity prevalence. Three clusters (central cluster 1, Central cluster 2, and Northwest cluster 2) registered 100 percent food insecurity prevalence. In addition, Northwest cluster 1 and central cluster 3 showed a higher proportion of returnees. Furthermore, Northwest cluster

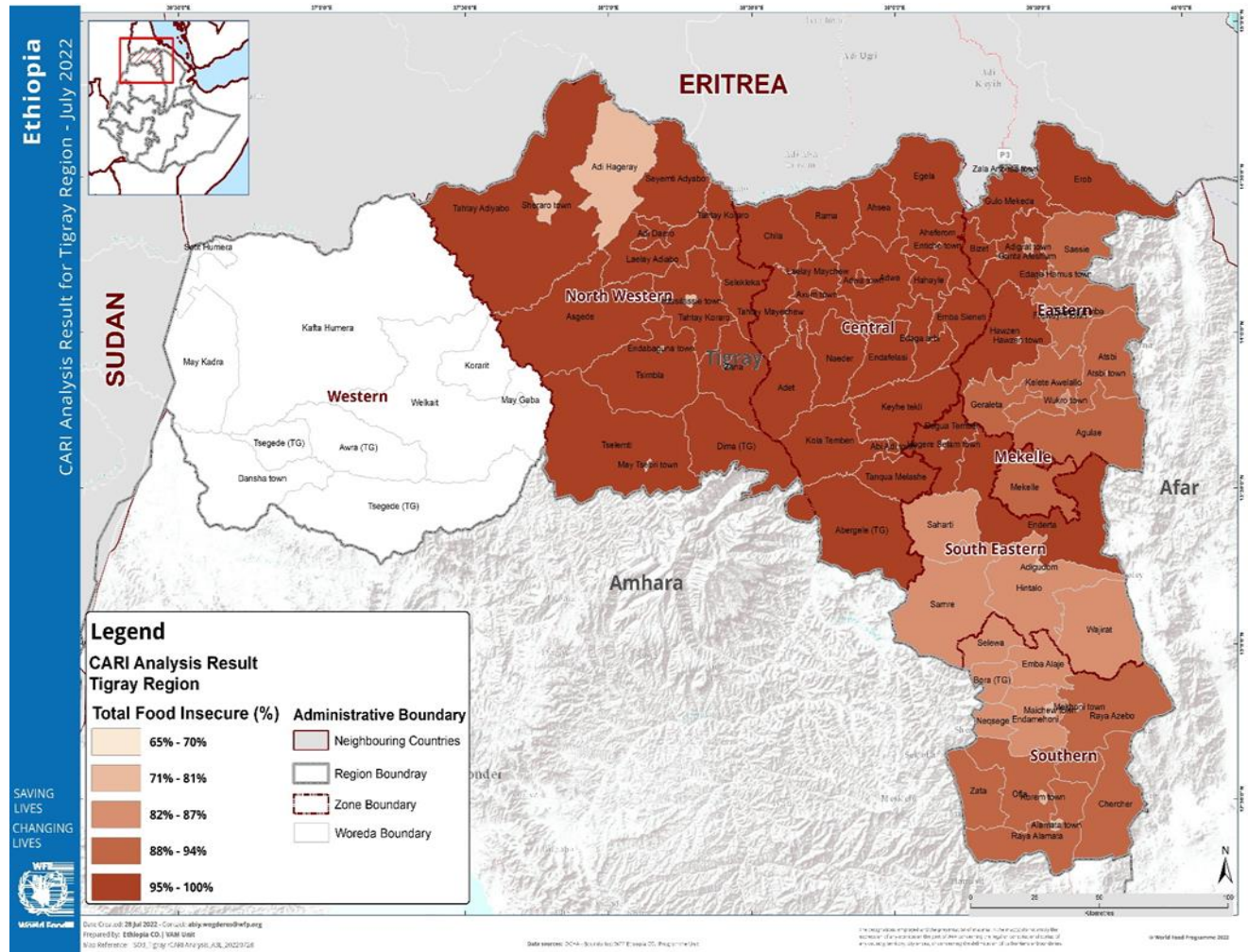
²⁰ This should be treated as indicative, as the November survey did not have expenditure module and was not fully CARI but remote CARI (r-CARI) approach was applied.

2 had the highest proportion of GAM rates. While Eastern cluster 2, showed the highest levels of SAM among children under the ages of five.

Table 7: Summary of food insecurity prevalence by cluster

Cluster	Total Food Insecure	Severely Food Insecure	Moderately Food Insecure	Marginally Food Secure	Food Secure
Central cluster1	100 percent	74 percent	26 percent	1 percent	0 percent
Central cluster2	97 percent	66 percent	32 percent	2 percent	1 percent
Central cluster3	100 percent	69 percent	31 percent	0 percent	0 percent
Central cluster urban	93 percent	53 percent	40 percent	7 percent	1 percent
Eastern cluster1	85 percent	39 percent	47 percent	14 percent	1 percent
Eastern cluster2	90 percent	56 percent	35 percent	10 percent	0 percent
Eastern cluster urban	70 percent	25 percent	44 percent	27 percent	3 percent
Mekelle cluster urban	87 percent	16 percent	70 percent	13 percent	1 percent
Northwest cluster1	99 percent	68 percent	31 percent	1 percent	0 percent
North west cluster2	100 percent	78 percent	22 percent	0 percent	0 percent
North west cluster 3	97 percent	64 percent	33 percent	3 percent	0 percent
North west cluster urban	81 percent	30 percent	51 percent	14 percent	1 percent
South cluster1	79 percent	28 percent	51 percent	20 percent	1 percent
South cluster 2	77 percent	37 percent	40 percent	22 percent	1 percent
South cluster urban	65 percent	17 percent	48 percent	30 percent	5 percent
Southeastern cluster1	83 percent	42 percent	41 percent	16 percent	1 percent
Southeastern cluster2	94 percent	55 percent	39 percent	5 percent	1 percent
Total Tigray (except Western Tigray)	89 percent	47 percent	42 percent	10 percent	1 percent

Map 2: Estimated categories of household food insecurity by Zone, summarised via CARI methodology



Who are the most vulnerable to food insecurity?

The impact of the conflict in Tigray has hampered households' capacity to meet their food and non-food needs. This, in turn, has led to extremely high rates of food insecurity, with close to one in two households being severely food insecure. Some households were found to be more vulnerable to severe food insecurity²¹, including displaced and returnee households, with close to three-quarters of the households in the severe food insecure category (p value=0.000: Asymptotic Significance (2-sided) (Table 7).

²¹ Household characteristics have been tested against the CARI category "Severe food insecure", including households who consume poor diets, implement emergency coping strategies and reported no source of income or no assistance. Results are significant at p<0.005.

Table 8: Prevalence of food insecurity by displacement status

Displacement status	Food Secure	Marginally Food Secure	Moderately Food Insecure	Severely Food Insecure
Currently displaced (from a different Zone in the Tigray region)	2 percent	10 percent	26 percent	62 percent
Mixed status - non-displaced + displaced (a mix of members of a household who were not displaced and displaced)	0 percent	2 percent	27 percent	70 percent
Mixed status - non-displaced + returnees (a mix of members of a household who were not displaced and returnees)	0 percent	7 percent	34 percent	60 percent
Part of the community (non-displaced)	1 percent	11 percent	44 percent	45 percent
Returnee (after recent displacement)	0 percent	4 percent	23 percent	73 percent

However, there were no significant differences in the food insecurity prevalence by household gender, presence of chronic illness and/or disability, the last time humanitarian assistance was received, duration when stocks available will last, or main income source. This is an indication that most of the households, regardless of social-economic vulnerabilities, are equally affected. In case of the need to introduce a prioritization plan due to funding constraints, further household vulnerability profiling may be considered after discussing with all humanitarian actors in Tigray for context inputs and additional criteria.

Conclusions

Twenty-one months of war have driven people across Tigray deeper into hunger. The EFSA assessment shows that levels of food security in Tigray have plummeted since the start of the conflict and are set to worsen as food stocks have dwindled in the lean season. One of the effects of the prolonged conflict is a significant deterioration of household food security outcomes. In a region that is typically food secure (especially following the Meher harvest period), 89 percent of residents were found to be food insecure in June 2022, and the overwhelming majority were found to be facing food consumption gaps requiring immediate and urgent assistance.

The drivers of food insecurity have compounded over time and remain severe; with households yet to recover from the significant loss of livelihoods coupled with heavy IDP burden, especially in the Northwestern and Central clusters. As data was collected at the onset of the lean season (planting season), most households have depleted their food stocks, given that the 2021 Meher production was reported to be below average.

Although road convoys have been resumed and 6,105 trucks have arrived in Mekelle as of 26 July 2021, this is yet to translate into increased humanitarian assistance, as other challenges remain, such as limited access to fuel.

Food prices in Tigray region have significantly increased since the start of the conflict, attributed to the below-average 2021 Meher production in the region and the disruption of normal trade routes that used to connect Tigray to surplus producing areas within and outside the region. This is further compounded by the non-functioning of transportation services due to the high cost of fuel.

The evolving food security situation has had a greater impact on certain groups, such as displaced households, households hosting IDPs, and returnee households.

Strong social networks and high levels of community sharing of food, cash and other resources have remained pivotal in maintaining minimal food consumption for a large share of the population, especially in the urban setting. This is of concern, as it could be an indication that households are not able to sell assets, crops and services due to cash shortages and regional economic slowdown. In addition, the use of livelihood coping strategies is likely to affect the sustainability of the households' livelihoods and may translate into the further deterioration of reduced access to food and essential needs in long term.

Recommendations

Most households in Tigray cultivate crops once a year, which will be ready for harvest in November. Thus, **the current consumption gaps will most likely persist until November**, unless the delivery of humanitarian assistance improves.

There is a need for close monitoring of specific behaviours and risk factors for vulnerable population groups, with the overall aim of supporting and informing humanitarian actors working to halt the deterioration of region-wide food insecurity. A non-exhaustive list of critical issues and risk factors to monitor is given below:

- Close monitoring of the evolution of the 2022 Meher farming season.
- Access to functional markets for buyers, traders and sellers, including terms of trade and incentives for sellers and purchasing power for buyers.
- Adapted supply chain dynamics and informal market functionality.
- Humanitarian assistance coverage over the coming months.

There is urgent need to scale up support to agricultural production, market integration activities and the provision of regular and predictable assistance in Tigray, to reduce the food gaps.



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