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REGIONAL FOCUS

ON THE INTERGOVERNMENTAL AUTHORITY ON DEVELOPMENT (IGAD) MEMBER STATES

2025 GLOBAL REPORT ON FOOD CRISES

JOINT ANALYSIS FOR BETTER DECISIONS

FSIN Food Security Information Network
Joint analysis for better decisions

Global Network Against Food Crises
INTEGRATED ACTIONS FOR LASTING SOLUTIONS

REGIONAL FOCUS

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Contents

Key to icons

- Acutely food-insecure people
- Conflict/insecurity
- Weather extremes/drought
- Weather extremes/flooding
- Economic shocks
- Displacement – Internally displaced people (IDPs)
- Displacement – Refugees
- Displacement – Returnees
- Agriculture
- Livestock
- Nutrition
- Wasting
- Pregnant and breastfeeding women
- Health and nutrition services
- Food insecurity/lack of access to healthy diets
- Maternal and child-feeding practices

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Foreword

Nothing strips away human dignity quite like hunger. In the IGAD region, this reality manifests in the eyes of mothers who cannot feed their children and in the weathered hands of fathers who work tirelessly only to return home empty-handed.

This year, 42 million people across six of our member states face high levels of acute food insecurity. In Sudan, the spectre of famine haunts communities, with about half the population facing uncertainty about their next meal each day. Across the region, over 3 million children need lifesaving treatment for severe acute malnutrition; each one a stark reminder that we cannot afford to fail.

We are also witnessing a displacement crisis that is unprecedented in our region's history. By mid-2025, over 23 million of our brothers and sisters across the region had been forced from their homes. The war in Sudan in particular, has created one of the world's largest displacement crises with close to 12 million people displaced.

Our region finds itself caught in a convergence of crises, where conflict collides with climate disasters while economic fragility feeds political instability. This vicious cycle connects everything, and when one system fails, others inevitably follow.

Yet hope springs eternal. In December 2024, our region united to adopt the IGAD Regional Food and Nutrition Security Strategy for 2025-2034. This remarkable document serves as our roadmap out of the food security crisis. IGAD ministers also endorsed the IGAD Fertilizer and Soil Health Hub because we understand that healthy soil means fewer hungry people. Our Digital Agro-Climate Advisory Services network is revolutionizing how farmers access information to plan and plant more effectively.

IGAD is thus shifting from disaster response to hazard prediction and prevention. As our leaders affirm, "This region can feed not just itself, but all of Africa." With the African Union's goal of boosting agricultural output by 45 percent by 2035, IGAD commits to fulfilling this vision.

The path forward presents challenges. While our region still requires emergency aid, we need greater courage to address hunger's underlying causes. Our Food Systems Resilience Program builds both immediate response capacity and long-term sustainability.

This urgent moment demands unity among governments, development partners, humanitarian actors, and the private sector to weave together aid, investment, and peacebuilding into one coherent strategy addressing both immediate crises and structural vulnerabilities.

With unwavering commitment and solidarity, we will secure a future where dignity through adequate food and nutrition becomes every person's birthright across our region.

Workneh Gebeyehu (Ph.D)
Executive Secretary, IGAD

Acronyms

ACAPS	Assessment Capacities Project
ACLED	Armed Conflict Location and Event Data Project
AFI	Acute food insecurity
AMN	Acute malnutrition
ARI	Acute respiratory infection
ASAL	Arid and semi-arid lands
CARI	Consolidated Approach to Reporting Indicators of Food Security
CDC	Centers for Disease Control and Prevention
CFSAM	Crop and Food Supply Assessment Mission
COVID-19	Coronavirus disease 2019
DJF	December–January–February
DTM	Displacement Tracking Matrix
EC-JRC	European Commission – Joint Research Centre
EC-JRC ASAP	European Commission – Joint Research Centre Anomaly Hotspots of Agricultural Production
ENSO	El Niño-Southern Oscillation
FAO	Food and Agriculture Organization
FAO-DIEM	FAO Data in Emergencies Hub
FAO-GIEWS	FAO Global Information and Early Warning System on Food and Agriculture
FCS	Food Consumption Score
FEWS NET	Famine Early Warning Systems Network
FSC	Food Security Cluster
FSIN	Food Security Information Network
FSNA	Food Security and Nutrition Assessment
FSNAU	Food Security and Nutrition Analysis Unit - Somalia
FSNMS	Food Security and Nutrition Monitoring System
FSNWG	Food Security and Nutrition Working Group
GAM	Global Acute Malnutrition
GDP	Gross Domestic Product
GEOGLAM	Group on Earth Observations Global Agricultural Monitoring
GHI	Global Hunger Index
GNAFC	Global Network Against Food Crises
GNC	Global Nutrition Cluster
GRFC	Global Report on Food Crises
GRID	Global Report on Internal Displacement
HDI	Humanitarian Development Index
HNO	Humanitarian Needs Overview
HRP	Humanitarian Response Plan
ICPAC	IGAD Climate Prediction and Applications Centre
ICPALD	IGAD Centre for Pastoral Areas and Livestock Development
IDMC	Internal Displacement Monitoring Centre
IDP	Internally displaced people
IFAD	International Fund for Agricultural Development
IFE	Infant Feeding in Emergencies
IFPRI	International Food Policy Research Institute
IGAD	Intergovernmental Authority on Development (in Eastern Africa)
IOD	Indian Ocean Dipole
IOM	International Organization for Migration
IMF	International Monetary Fund
IPC	Integrated Food Security Phase Classification
IPC FRC	Integrated Food Security Phase Classification Famine Review Committee
IYCF	Infant and Young Child Feeding
JJAS	June–July–August–September
MAM	Moderate Acute Malnutrition
MJO	Madden Julian Oscillation
MSNA	Multi-Sectoral Needs Assessment
MUAC	Mid-Upper Arm Circumference
NOAA CPC	National Oceanic and Atmospheric Administration Climate Prediction Center
NVA	Nutrition Vulnerability Analysis
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
ODA	Official Development Assistance
OND	October–November–December
OPHI	Oxford Poverty and Human Development Initiative
OWD	Our World in Data
PBW	Pregnant and breastfeeding women
PDM	Post-Distribution Monitoring
PLW	Pregnant and Lactating Women
RSF	Rapid Support Forces (in Sudan)
SAF	Sudanese Armed Forces
SAM	Severe Acute Malnutrition
SDG	Sustainable Development Goal
SENS	Standardised Expanded Nutrition Survey
SMART	Standardized Monitoring and Assessment of Relief and Transitions
TWG	Technical Working Group
UDHS	Uganda Demographic and Health Survey
UN	United Nations
UNCTAD	United Nations Trade and Development
UNDP	United Nations Development Programme
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
USD	United States dollar
USGS	United States Geological Survey
WASH	Water, Sanitation and Hygiene
WB	World Bank
WFP	World Food Programme

In brief

Djibouti | Ethiopia | Kenya | Somalia | South Sudan | Sudan | Uganda

42.0M people, or 29% of the analysed population face high levels of acute food insecurity in 2025 in six countries with data meeting requirements.

In five countries with comparable data since 2016 (Kenya, Somalia, South Sudan, the Sudan and Uganda), the number of people in Crisis or worse (IPC Phase 3 or above) has tripled from 13.9 million in 2016 to 41.7 million in 2025.

The **Sudan** remains the region's largest and most severe food crisis with Famine (IPC Phase 5) in multiple areas. From December 2024 to May 2025, 24.6 million people or 51 percent of the population were projected in IPC Phase 3 or above due to the devastating impacts of conflict. *

South Sudan continues to have the region's highest share of its population in IPC Phase 3 or above, at 57 percent from April to July 2025. The number of people needing urgent assistance increased by 9 percent since the 2024 peak to 7.7 million largely due to the effects of conflict and insecurity.

In **Somalia**, 4.6 million people faced IPC Phase 3 or above from April to June 2025, a 4 percent increase since 2024, driven by displacement due to conflict and drought, with reduced humanitarian funding as contributing factor.

In **Kenya**, 2.8 million people were projected in IPC Phase 3 or above from April to June 2025 – a deterioration since 2024 based on a forecast poor March to May 2025 rainfall season. While the rains ultimately improved pasture and water availability in some areas, erratic distribution and dry spells disrupted crop production in agropastoral areas.

Famine in the Sudan, risk of Famine in South Sudan

In the **Sudan**, Famine (IPC Phase 5) – first detected in Zamzam internal displacement camp in July 2024 – was confirmed in late 2024 in IDP camps in North Darfur, and among residents and IDPs in the Western Nuba mountains. It was projected to persist through May 2025 and expand to five additional localities in North Darfur. A risk of Famine was projected for 17 areas in the Central Nuba mountains, parts of North and South Darfur, Al Jazirah and Khartoum. Available information strongly substantiates that Famine was ongoing even before the anticipated seasonal deterioration during the June to September lean period.*

In **South Sudan**, Ulang and Luakpiny/Nasir counties in Upper Nile faced a risk of Famine from April to July 2025 due to escalating conflict. Without urgent, large-scale, multi-sectoral responses, these areas may deteriorate into Famine.

In **Djibouti**, all three refugee camps were projected to shift from IPC Phase 3 to IPC Phase 4 in July to December 2025 due to economic challenges and climate shocks, amid decreasing assistance. Overall, 0.2 million people need urgent food and livelihood assistance.

Over 0.7 million people face Catastrophe (IPC Phase 5) in 2025

In the **Sudan**, 0.6 million people were projected to be in Catastrophe (IPC Phase 5) from December 2024 to May 2025 in Al Jazirah, East, North and South Darfur, Khartoum, and South and West Kordofan.

In **South Sudan**, 83 500 people were projected in this phase from April to July 2025. Of them, around 44 300 were in Pibor county in Jonglei and in Luakpiny/Nasir, Malakal and Ulang counties in Upper Nile, while 39 200 were returnees from the Sudan.

Repeated shocks on top of structural vulnerabilities erode household resilience

Conflict/insecurity The **Sudan**'s 2.5-year conflict has devastated food systems, displaced millions, and restricted humanitarian access. Intercommunal violence and resource-based conflicts also affect parts of **Ethiopia**, **Kenya**, **Somalia**, **South Sudan** and **Uganda**.

Weather extremes Erratic rainfall in early 2025 led to mixed agricultural outcomes, especially in **Somalia** and **Uganda**. The October to December 2025 season is forecast to be drier than usual, with highest risks in **Somalia** and **Kenya**, and warmer temperatures likely to impact crops, pasture and water availability in vulnerable areas.

Economic shocks While food prices stabilized in **Ethiopia** and **Djibouti**, conflict continues to drive sharp increases in the **Sudan** and **South Sudan**. In **Ethiopia**, prices remain above the five-year average due to high production and transport costs and currency depreciation.

Acute malnutrition remains at alarming levels across the region in 2025

8.7M children aged 6-59 months are acutely malnourished in six IGAD members states. Of them, 2.2 million suffer the most severe form of acute malnutrition. About 2.6 million pregnant and breastfeeding women in five countries are acutely malnourished.

Nutrition crises were identified in all seven countries with food crises in the region and among refugees in **Uganda**. **Djibouti**, **Kenya**, **Somalia**, **South Sudan**, the **Sudan** and **Uganda** all have areas classified in Critical (IPC AMN Phase 4) in 2025. Due to major cuts in assistance, an estimated 1 million children may lose access to treatment for severe acute malnutrition, with 164 000 additional child deaths projected annually in the seven countries with food crises among IGAD member states.

Displaced people in 2025 remain the most vulnerable to acute food insecurity

22.3M people were living in forced displacement by July 2025, consisting of 16.9 million IDPs and 5.4 million refugees and asylum seekers in seven countries.

The region continues to have more forcibly displaced people than any other in the Global Report on Food Crises.

The **Sudan** remains the world's largest internal displacement crisis, with 10.1 million IDPs, despite the return of 2 million people to Al Jazirah, Sennar and Khartoum. Displaced people are disproportionately affected by acute food insecurity.

In **South Sudan**, returnees from the Sudan and newly internally displaced populations – nearly 200 000 between March and June – face critical needs. Some 85 percent of returnees were in IPC Phase 3 or above, and 5 percent faced catastrophic levels of hunger (IPC Phase 5).

Ethiopia and **Somalia** also have large IDP populations, with at least 1.0 million and 3.3 million respectively. In **Somalia**, 150 000 were newly displaced between April and June alone due to conflict.

All seven countries host refugee populations, reaching 1.9 million in **Uganda** and 1.1 million in **Ethiopia**. All refugees are experiencing sharp ration cuts due to funding shortages.

*The Government of Sudan did not endorse the IPC Famine Review Committee analysis of December 2024.

Introduction

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Introduction

About the report

This regional report is the result of a collaboration between the Food Security Information Network (FSIN) and the Intergovernmental Authority on Development (IGAD), a regional economic community that forms one of the building blocks of the African Union. IGAD seeks to assist and complement the efforts of its eight member states – Djibouti, Eritrea, Ethiopia, Kenya, Somalia, South Sudan, the Sudan and Uganda – to achieve food security and environmental protection, peace and security, and economic cooperation and integration through increased cooperation.

This report provides a comprehensive assessment of acute food insecurity and malnutrition in IGAD member states as well as trends over time, key drivers and populations of highest concern based on a rigorous methodology. It also presents available data and information on forcibly displaced populations. It serves as a key reference for governments, policy makers, and development and humanitarian actors in their efforts to tackle the root causes of food crises in the region.

The purpose of the report is to:

- Provide a consensus-based analysis of food and nutrition crises in IGAD member states for humanitarian and development stakeholders and policymakers;
- Provide consensus-based analysis on acute food insecurity and acute malnutrition of forcibly displaced populations in IGAD member states;
- Present underlying and immediate drivers of and trends in acute food insecurity and malnutrition;
- Offer insights into immediate and medium-term risks to the food security and nutrition status of populations.
- Contribute to maintaining food security and nutrition as priority sectors for policymakers and donors;

The Global Report on Food Crises (GRFC)

This report is a by-product of the annual GRFC, which is produced by the Food Security Information Network (FSIN) in support of the Global Network Against Food Crises (GNAFC). The GRFC is based on partnership, collaboration and consensus among 16 partners consisting of regional intergovernmental bodies, donors, technical bodies, clusters and United Nations agencies. The result is an independent reference document presenting a consensus-driven analysis validated and endorsed by global and regional experts in food security, nutrition and forced displacement.

Peak acute food insecurity estimates

This report provides the highest (or peak) estimates of people facing high levels of acute food insecurity (IPC Phase 3 or above) in 2024 and 2025. As acute food insecurity can be seasonal or the consequence of a shock, the reported peak figure may represent only a specific moment in time within the year and can be based on a projection.

Data gaps and lack of consensus

Eritrea has qualified for inclusion in all GRFC editions as it is monitored by FAO-GIEWS, but data on acute food insecurity have not been available for any of the years. In 2023 and 2024, crops benefitted from an overall favourable performance of the Kiremti rainy season (FAO, November 2023; FAO-GIEWS, September 2024). This trend is likely to continue, with forecasted above-average rainfall between August to October 2025 for the country (ICPAC, May 2025). No consensus-based estimate is available for Ethiopia. As such, Ethiopia is included in the report but without acute food insecurity and acute malnutrition figures.

What constitutes a food crisis?

Food security exists 'when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life' (HLPE, 2020).

Acute food insecurity arises when one, some, or all dimensions of food security – food availability, access, utilisation and stability – is disrupted, whether by shocks or other factors. It can be persistent over time, largely due to structural causes, or occur at a specific point in time and of a severity that threatens lives or livelihoods, regardless of the causes, context or duration. Acute food insecurity can be temporary or persistent.

The GRFC defines **a food crisis** as a situation where acute food insecurity requires urgent action to protect and save lives and livelihoods at local or national levels and exceeds the national resources and capacities to respond.

Food crises are more likely among populations already suffering from prolonged food insecurity and malnutrition, and in areas where structural factors increase households' vulnerability to shocks. Food crises can be localized, affect an entire country/territory and/or spread across borders to become regional. They can also affect only specific population groups, such as refugees or migrant populations.

Food crises can occur regardless of a country's wealth status and level of domestic food production, underscoring their complexity. However, more affluent nations are expected to have greater capacity to respond to shocks, and mitigate their impacts on food insecurity.

What constitutes a nutrition crisis?

The GRFC 2025 defines and identifies, for the first time, countries/territories with nutrition crises.

A nutrition crisis is a situation characterized by a combination of factors, such as widespread lack of access to sufficient, safe and nutritious food, high morbidity, environmental disasters, conflict, poor healthcare infrastructure and inadequate practices, resulting in high levels of acute malnutrition in children aged 6–59 months.

Some countries/territories or population groups with food crises have limited data on acute malnutrition outcomes and are defined as being of nutrition concern where available data on contributing and contextual factors point to high nutritional vulnerability and risk of the nutrition situation deteriorating.

Data sources

After the identification of countries with a food crisis, the IGAD TWGs validate the data source for the peak and projection figures for acute food insecurity, malnutrition and displacement.

Data sources for acute food insecurity

The main data source for acute food insecurity is the Integrated Food Security Phase Classification (IPC).

For Uganda, where an IPC analysis is not available, acute food insecurity estimates are derived from IPC-compatible Famine Early Warning Systems Network (FEWS NET) analyses.

No consensus on acute food insecurity estimates was reached for Ethiopia. Eritrea was a data gap.

Data sources for acute malnutrition

Acute malnutrition burden estimates are collected from IPC acute malnutrition analyses for six countries.

For the Sudan, data on acute malnutrition was provided by the Sudan Nutrition Cluster.

No consensus on acute malnutrition estimates was reached for Ethiopia.

Data sources for displacement

Statistics on refugees and asylum seekers primarily come from UNHCR through nowcasting figures for July 2025.

Data for internally displaced persons (IDPs) and returnees were collected through the International Organization for Migration (IOM-DTM).

Funding flows analysis

Humanitarian and development assistance to IGAD member states

In 2024, the region was the largest recipient of humanitarian assistance to food sectors out of all regions with food crises, receiving USD 3.2 billion, or 29 percent of global allocations. This marked a USD 0.2 billion decrease from 2023, despite an additional 1.4 million people facing high levels of acute food insecurity (IPC Phase 3 or above) due to deteriorating conditions in the **Sudan** and **Uganda**. Compared with the record USD 4.9 billion received in 2022, 2024 allocations were USD 1.7 billion lower, a 35 percent decrease.

Development assistance to food sectors in IGAD member states reached USD 2 billion in 2023, accounting for 23 percent of global development allocations to food sectors in countries with food crises. This was USD 0.5 billion more than in 2022 and slightly above the 2016-2023 average. Over this period, agriculture consistently received the largest share of development funding (57 percent), yet in humanitarian contexts, it remained the least-funded sector, averaging just 7 percent of allocations despite its central role in the region's economy. Over 70 percent of the population in the IGAD region is employed in agriculture, which also contributes to over 60 percent of export earnings (IGAD, 2023).

A region with some of the largest food crises

IGAD member states host some of the world's most severe food crises, with the **Sudan** consistently ranking among the ten countries with the highest number of people facing high levels of acute food insecurity (IPC Phase 3 or above) or equivalent and **South Sudan** among those with the highest prevalence. Since 2016, these three countries accounted on average for 80 percent of the region's population in IPC Phase 3 or above, or equivalent, rising to 86 percent in 2024. The three countries received around 70 percent of IGAD's humanitarian assistance to food sectors and 58 percent of development allocations to food sectors allocated to the region. On average, humanitarian assistance to these countries was twice as large as development assistance, reflecting a broader regional trend of reliance on emergency funding.

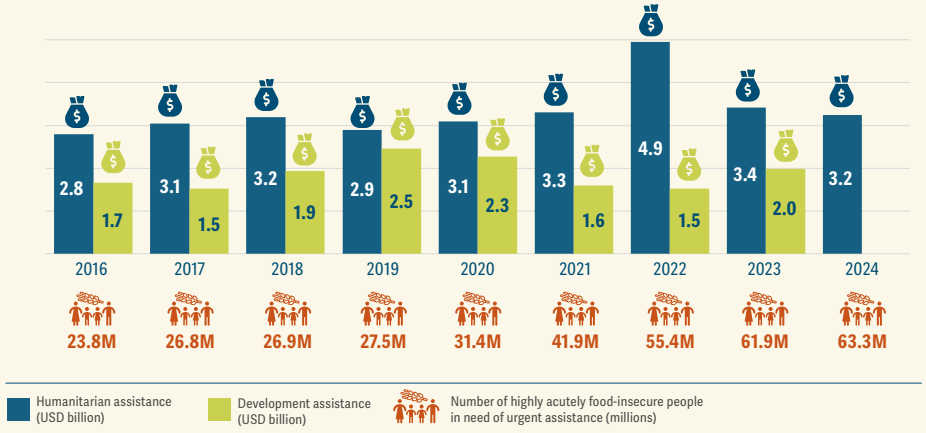
Need for great coherence amid bleak funding outlook

To effectively address the root causes of acute food insecurity and reduce future humanitarian needs, greater coherence between humanitarian and development financing is essential, especially in protracted crises and countries facing Famine (IPC Phase 5) or a risk of Famine in the region. The current imbalance, where humanitarian aid targets symptoms while development funding remains insufficient, risks perpetuating structural vulnerabilities (GNAFC, forthcoming).

This need for strategic coherence is especially pressing given the bleak funding outlook for 2025. Projected disbursements may reach only half of 2022 levels, with fragmented funding landscapes emerging due to shifting donor priorities, sectoral focus, and regional allocations. This uneven impact underscores the urgency of coordinated, long-term investment strategies (GNAFC, forthcoming).

Funding cuts also risk weakening the data systems essential for early warning and response to food crises – especially in vulnerable regions like IGAD. Reduced data and analytical capacity will hinder the capacity to track trends, detect emerging deteriorations and design targeted interventions (GNAFC, forthcoming).

FIG. 2.2 **Humanitarian and development assistance to highly acutely food-insecure populations in IGAD member states, 2016–2024 (USD billions)**



Source: GNAFC.

I | Regional overview

KIRYANDONGO, UGANDA. © WFP/BADRE BAHAJI

1 | Acute food insecurity

Conflict continues to disrupt livelihoods, displace populations and limit humanitarian access, driving severe food crises, with Famine in several areas of the Sudan* and risk of Famine in two counties in South Sudan and 17 localities and IDP camps in the Sudan. Climate shocks, including flooding and inadequate rains, are diminishing food production in some areas, while high food prices constrain food access amid falling assistance.

42.0M

people or 29% of the analysed population face high levels of acute food insecurity in 2025 in six countries with data meeting requirements.

8.7M

children aged 6-59 months are acutely malnourished in six countries with 2.2 million of them suffering the most severe form.

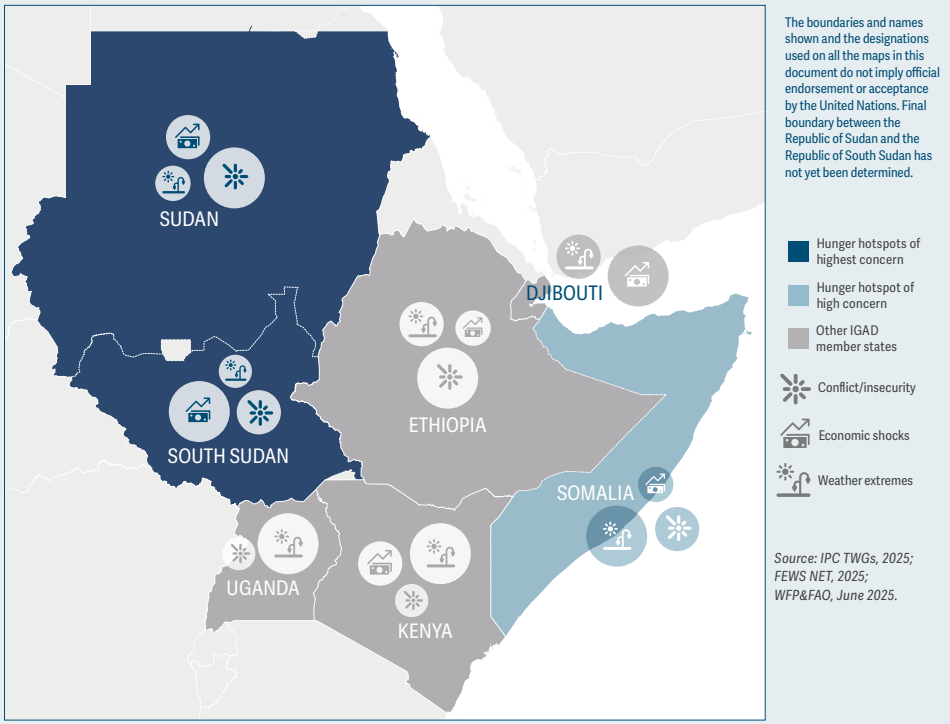
22.3M

people were forcibly displaced by July 2025 – consisting of 16.9 million IDPs and 5.4 million refugees and asylum seekers.

* The Government of Sudan did not endorse the IPC and FRC analyses.

Djibouti | Ethiopia | Kenya | Somalia | South Sudan | Sudan | Uganda

MAP 1.1 **Drivers of acute food insecurity and hunger hotspots in IGAD member states 2025**



This map shows hunger hotspots, as identified by WFP and FAO in their biannual forward-looking report, which refers to countries/territories where acute food insecurity is projected to significantly deteriorate during the outlook period.

Hotspots of 'highest concern' include those with areas in Famine (IPC Phase 5) or risk of Famine, or with populations in Catastrophe (IPC Phase 5). These also include countries where people in Emergency (IPC Phase 4) are experiencing worsening drivers and access constraints that could lead to catastrophic conditions during the outlook period.

Hunger hotspots of 'high concern' are countries or situations with a sizeable population in Emergency (IPC Phase 4) or identified as severely food insecure according to the WFP Consolidated Approach for Reporting Indicators of Food Security (CARI) methodology, and where the number of people in these conditions is expected to increase during the outlook period.

Acute food insecurity in 2025

The **Sudan** remains the region's largest and most severe food crisis with Famine (IPC Phase 5) detected in multiple areas (*see page 26*). Around 24.6 million people, representing 51 percent of the population, were projected to face high levels of acute food insecurity during the post-harvest season from December 2024 to May 2025. Of them, 8.1 million were in Emergency (IPC Phase 4) and 0.6 million in Catastrophe (IPC Phase 5). While agricultural production in 2024–25 recovered from the low levels of 2024, major production gaps and supply barriers persist, especially in conflict-affected areas, inflating production costs and resulting in exceptionally high cereal costs. The situation is likely to worsen during the lean season from May to September 2025, when reliance on disrupted markets and limited incomes increases, especially for displaced populations in North Darfur and Greater Kordofan states, as well as returnees in Khartoum, Al Jazirah, Sennar and many other states (IPC Alert, July 2025).

South Sudan has the region's highest prevalence of acute food insecurity with 57 percent of its population in IPC Phase 3 or above from April to July 2025. The number of people in need of urgent food and livelihood assistance increased by 633 000, since the 2024 peak, bringing the total to 7.7 million. This increase is attributed to conflict and insecurity displacing households, disrupting humanitarian assistance, and limiting access to farmlands and markets. Some 2.4 million people were projected to face IPC Phase 4 and 83 000 Catastrophe (IPC Phase 5). A risk of Famine was projected for two counties in Upper Nile through July 2025 under a worst-case scenario of flooding and conflict completely blocking humanitarian assistance to the most vulnerable (IPC, June 2025).

In **Somalia**, 4.6 million people or 24 percent of the population faced high levels of acute food insecurity from April to June 2025. This 4 percent increase (+163 000 people) since the 2024 peak is linked to a reduction in humanitarian funding and an anticipated increase in internal displacement, largely due to conflict and drought, which were expected to worsen the situation (IPC, March 2025). Between February and July 2025, over 305 000 people were newly displaced, exceeding earlier projections (IOM, July 2025).

In **Kenya**'s arid and semi-arid lands (ASALs), a projected increase by 891 000 people facing high levels of acute food insecurity was based on forecast poor March to May 2025 rains. Overall, 2.8 million people were projected in IPC Phase 3 or above, representing 17 percent of the analysed population (IPC, March 2025). While the season ultimately improved pasture and water availability in some areas, erratic rainfall distribution and prolonged dry spells disrupted crop development leading to 40–70 percent below-average production in agropastoral areas. The forecast below-average October to December rains are expected to further compromise agricultural production and keep staple food prices elevated (IPC, September 2025).

In **Djibouti**, 0.2 million people or 20 percent of the population need urgent food and livelihood assistance from July to December 2025. This is 55 000 people fewer than the 2024 peak, but given the relatively small size of the analysed population, this represents a 19 percent decrease. The situation for the country's refugee population was expected to deteriorate, with all three refugee camps (Ali Addeh, Holl-Holl and Markazi) projected to shift from IPC Phase 3 to IPC Phase 4 amid the expected reduction in humanitarian assistance (IPC, June 2025).

In **Uganda**, the number of people facing high levels of acute food insecurity remained on a par with 2024, at 2 million (FEWS NET, October 2024).

Famine and risk of Famine

A December 2024 Famine Review Committee analysis projected that ten areas in the **Sudan*** would be in Famine (IPC Phase 5) through May 2025 (Zamzam, Abu Shouk and Al Salam camps; IDPs and residents in Western Nuba mountains; Um Kadadah; Melit; El Fasher; At Tawisha; and Al Lait). It also identified an additional 17 areas at risk of Famine (IPC Phase 5), primarily due to conflict.

While there was insufficient evidence for the FRC to determine the classification of these or other areas in July 2025 (due to an extreme lack of humanitarian access), limited available data suggested that Famine conditions persisted, even before the start of the July to September 2025 lean season. Famine-affected areas have witnessed intensified conflict and displacement. Further deterioration is likely as food becomes less available during the peak of the lean season and the rainy season is expected to further limit already restricted humanitarian access (IPC Alert, July 2025).

In **South Sudan**, Luakpiny/Nasir and Ulang counties in Upper Nile faced a risk of Famine from April to July 2025 due to escalating conflict and economic collapse. Without urgent, large-scale, multi-sectoral responses, these areas may deteriorate into Famine (IPC, June 2025).

Severity of acute food insecurity

Five countries – **Djibouti**, **Kenya**, **Somalia**, **South Sudan** and the **Sudan** – had IPC analyses with data disaggregated by phase of acute food insecurity. For **Uganda**, the source is FEWS NET, with no phase disaggregation.

720 700 people are in Catastrophe (IPC Phase 5) in two countries – the Sudan and South Sudan.

In the **Sudan**, 637 200 people were projected to be in Catastrophe (IPC Phase 5) between December 2024 and May 2025. This includes 11 percent of the population of North Darfur. Al Jazirah, East and South Darfur, Khartoum, and South and West Kordofan states also had populations in this phase (IPC, December 2024). In **South Sudan**, 83 500 people were in this phase from April to July 2025. Of them, around 44 300 were in Jonglei and Upper Nile, and 39 200 were returnees from the Sudan (IPC, June 2025).

11.7 million people are in Emergency (IPC Phase 4) in all five countries with IPC data.

The highest numbers are in conflict-affected **Sudan** (8.1 million, or 17 percent of the population) and **South Sudan** (2.4 million, or 18 percent of the population). Between 2024 and 2025, the total number of people in Emergency (IPC Phase 4) declined slightly, by 548 000, primarily due to seasonal reductions in the **Sudan** and a 198 000-person reduction in **Somalia**.

27.6 million people are in Crisis (IPC Phase 5) in five countries.

This is a 5 percent increase since 2024 driven by a rise in **Somalia** (+361 000 people), **South Sudan** (+538 000 people) and **Kenya** (+900 000 people).

33.6 million people are in Stressed (IPC Phase 2) in five countries.

This is 2.4 million more people than in 2024 with the largest increases in **Kenya** (+1.1 million people), followed by **Somalia** (+457 000 people), the **Sudan** (+438 000 people) and **South Sudan** (427 000 people). The share of analysed population in this phase increased from 32 percent in 2024 to 34 percent in 2025 . This represents a deterioration as it occurred in parallel with a reduction in the share of analysed population in Minimal (IPC Phase 1) – from 27 percent in 2024 to 25 percent in 2025.

* The Government of Sudan did not endorse the IPC and FRC analyses.

Focus: The Sudan crisis, 2024–2025

The Sudan is experiencing one of the most severe food crises globally, with Famine (IPC Phase 5) already taking hold in several areas.

Famine (IPC Phase 5) – first detected in Zamzam IDP camp in North Darfur in July 2024 – persisted and spread to Abu Shouk and Al Salam camps, as well as the Western Nuba mountains by October to December 2024.

From December 2024 to May 2025, Famine (IPC Phase 5) was projected to persist in these areas and expand to additional localities in North Darfur, including Um Kadadah, Melit, El Fasher, At Tawisha and Al Lait. Seventeen other areas across Al Jazirah, the Central Nuba mountains, North and South Darfur (where high influxes of IDPs are likely), and Khartoum were at risk of Famine (IPC Phase 5) (FRC, December 2024).*

Populations in high-conflict areas like Al Jazirah, Greater Darfur, Khartoum, Greater Kordofan and Sennar states, as well as displaced households, remain particularly vulnerable, due to disrupted livelihoods and limited access to essential goods and services (IPC, December 2024).

Due to an extreme lack of humanitarian access, there was insufficient evidence for the FRC to determine the classification of these and other areas since May 2025. However, the limited available data suggested that Famine (IPC Phase 5) conditions persisted, even before the start of the July–September 2025 lean season (IPC Alert, July 2025).

High levels of acute malnutrition are widespread, with 52 percent of the validated SMART surveys conducted between December 2024 and May 2025 revealing global acute malnutrition (GAM) levels exceeding 15 percent among children aged 6-59 months – indicative of a Critical situation (IPC AMN Phase 4). The highest prevalence, 28.8 percent, was recorded in Yasin, East Darfur, in April 2025 (Sudan Nutrition Sector, June 2025). Localized disparities suggest that some areas could be experiencing higher levels of acute malnutrition, potentially reaching Famine (IPC Phase 5) thresholds (IPC, July 2025).

* The Government of Sudan did not endorse this analysis

How has the conflict led to such extreme levels of acute food insecurity and malnutrition?

Disruption of agricultural systems

The agriculture sector forms the backbone of the Sudan's economy, with up to 60–80 percent of the country's population engaged or reliant on it for their livelihoods (FAO, April 2024). Pastoral and agro-pastoral livestock production plays a vital role across nearly all regions and states (UNEP, November 2024).

Since the escalation of conflict, pastoralism has been severely disrupted and livestock mobility restricted, undermining access to grazing areas and water sources, and leading to significant losses of livestock (IFPRI, September 2024).

The ongoing conflict has also devastated farmlands and agricultural infrastructure, and forced many to abandon their farms, significantly disrupting local food production systems. The 2023–24 national cereal production declined by 46 percent by comparison with 2022 and was 40 percent below the recent five-year average – representing an economic loss of USD 1.3–1.7 billion and equivalent to the annual food requirement for about 18 million people (FAO, January 2025).

While agricultural production in 2024–25 recovered from the low levels of the previous years, with national cereal output estimated at 6.7 million tonnes – 7 percent above the recent five-year average – its potentially favourable impact on food security has been significantly reduced by trade disruptions and high input costs driving up food prices (FAO-GIEWS, May 2025).

At Kassala Albohuth camp, amid highly uncertain access to future supplies, displaced families dry vegetables under the sun to preserve them for long-term use.

Significant production gaps persisted in conflict-affected areas, where insecurity restricted access to farmlands, and inputs like seeds and fertilizer. This was also the case among IDP households, especially in North Darfur and Greater Kordofan states, and among returnees in Khartoum, Al Jazirah, Sennar and other states, many of whom did not have an opportunity to cultivate, and remain dependent on markets to meet their food needs amid a sharp rise in staple food prices and reduced household incomes (IPC, July 2025).

Economic collapse

The conflict has pushed the country into a deep economic downturn. In 2023, economic activity contracted by an estimated 29.4 percent and was estimated to have declined by another 13.5 percent in 2024 (World Bank, May 2025).

Exports have stalled, public revenues have declined sharply (affecting provision of essential services like health and education, and stifling investments), and the local currency has significantly depreciated, putting upward pressure on imported commodity prices. As of June 2025, the Sudanese Pound (SDG) had depreciated by 44 percent against the US dollar compared with the same period in 2024, and by 77 percent compared with March 2023 (pre-conflict) (WFP, July 2025).

Exacerbating the foreign exchange crisis is sharp demand for imported food and non-food items, due to limited domestic production of medicine, fuel and some food items. With import requirements – mainly wheat – for 2025 forecast at about 2.7 million tonnes, the limited financial and logistical capacity of the country raises concerns about the possibility of satisfying these import needs (FAO-GIEWS, May 2025).

Focus: The Sudan crisis, 2024–2025

After more than five years of significant increases, inflation remains at over 100 percent in 2025 (World Bank, July 2025), primarily driven by the high cost of housing, transportation and food. Widespread business closures, a sharp decline in stable job opportunities and economic uncertainty have also led to a rise in unemployment, from 32.1 percent in 2022 to 62 percent in 2025 (IMF, July 2025).

Largest internal displacement crisis

The Sudan remains the world's largest internal displacement crisis, with about 10.1 million IDPs as of June 2025, of whom over 7.6 million have been displaced since April 2023. The July figure is a 13 percent decrease compared with January 2025, largely driven by IDP returns to Khartoum, Sennar and Al Jazirah states (IOM, July 2025). Returnees are intensifying pressure on the already limited food supplies, and other essential goods and services in these areas.

While humanitarian access has slightly improved in some areas of Greater Darfur and Kordofan – such as in Tawila and Jabal Marrah – IDPs in Abu Shouk and Zamzam camps in El Fasher remain largely cut off and are among the populations of highest concern regarding their food security and nutrition status (IPC, July 2025).

A crisis beyond its borders

Since the start of the conflict, more than 4.2 million people have sought refuge in neighbouring countries. The majority have crossed into Egypt, Chad and South Sudan (IOM, July 2025).

In **Chad**, humanitarian operations continue to face severe constraints due to critical funding shortages, which have also led to reduced partner capacity due to staff cuts. Health facilities are overstretched with one health centre estimated to be serving 70 000 people and one doctor for 52 000 patients. Daily water is at just 5 litres per person per day – well below the 15 litres emergency threshold as per the Sphere standards (UNHCR, May 2025).

In South Sudan, around 1.2 million people had arrived from the Sudan as of end of July 2025, including over 382 000 Sudanese refugees (IOM and UNHCR). At the time of reporting, relocations from transit centres in Renk and Malakal had been suspended due to funding shortfalls and poor road conditions, resulting in overcrowding at border points. This has placed considerable strain on available services and heightened the risk of communicable disease outbreaks, especially with the onset of the June to September 2025 rainy season (UNHCR, June 2025).

Among the arrivals were also more than 0.8 million South Sudanese returnees, many of whom face critical food and nutrition gaps. Of the 783 900 returnees analysed by the IPC, 85 percent were in IPC Phase 3 or above, including 39 000 in Catastrophe (IPC Phase 5), accounting for about 47 percent of the country's population in this phase (IPC, June 2025).

Critical gaps in humanitarian response

Humanitarian access across many areas remains severely constrained due to insecurity, bureaucratic requirements and poor road conditions, making logistics tortuous, expensive and inflexible, and hindering the free flow of goods. However, humanitarian access improved somewhat since 2024 thanks to increased outreach, with WFP reporting reaching 5.1 million people in May, the highest since the conflict began, including 1.7 million in areas with Famine (IPC Phase 5) and risk of Famine. FAO distributed high quality seeds to almost 750 000 households nationally in preparation for the cropping season (IPC Alert, July 2025).

Sudanese refugees fleeing the conflict in Sudan have built makeshift shelters in neighbouring countries.

Still, many Famine-affected areas, including El Fasher and surrounding areas, remain inaccessible or difficult to reach (IPC, July 2025). Logistical access constraints were expected to intensify with the onset of the rainy season in June.

Drone strikes in Khartoum and Port Sudan in May 2025 pointed to a shift in the conflict dynamics towards remote targeting of critical infrastructure, threatening the country's main humanitarian supplies and trade corridors. Given Port Sudan's strategic significance as the humanitarian logistics hub, a continued threat of drone strikes risks an evacuation of aid personnel operating from Port Sudan, which would then disrupt humanitarian coordination, logistics, warehousing and dispatch operations (ACAPS, May 2025).

Humanitarian funding for the Sudan continues to fall well below the levels required to meet the escalating needs. As of 20 July 2025, only 23 percent of the USD 4.2 billion funding requirements for the 2025 Sudan Humanitarian Needs and Response Plan (HNRP) had been met, with food and nutrition sectors only 32 percent and 12 percent funded, respectively (OCHA).

Cuts in international humanitarian funding by major donors have significantly affected the capacity of humanitarian actors to operate effectively, with many forced to halt activities, scale back operations, or cancel programmes (ACAPS, June 2025).

Drivers of acute food insecurity across the region, 2024–2025

The impact of climate extremes on food production across IGAD member states

Consecutive seasons of near- to above-average rainfall in 2024 and early 2025 generally supported crop and livestock production across the region. In some parts, however, flooding and erratic rainfall distribution compromised food security.

In 2024, heavy rains from March to May caused severe flooding in **Ethiopia**, **Kenya**, **Somalia**, and **Uganda**, affecting 1.6 million people and destroying farmlands (OCHA, May 2024). June to September 2024 rains led to further flooding, impacting over 1.4 million people in **South Sudan**, 680 000 in the **Sudan**, and many in **Uganda** and **Ethiopia** (WFP, October and December 2024).

In **South Sudan** and the **Sudan**, the floods affected some of the most food-insecure locations and populations, disrupting aid delivery and causing crop losses in localized areas (WFP, October 2024). In most areas, however, the rains supported crop development, pasture regeneration and water replenishment.

The October to December 2024 rains in **Kenya**'s ASALs and southern **Somalia** were erratic, reducing harvests and limiting pasture and water, with southern **Somalia**'s harvests 44 percent below the 1995–2023 average (IPC, February 2025).

The March to May 2025 rainfall season was characterized by spatial and temporal variability, resulting in mixed crop and livestock production outcomes. In **Ethiopia**, below-average rains in parts of Afar and Somali regions created poor prospects for crop and livestock production.

In central and northern **Somalia**, severe drought conditions, following prolonged dry spells, were reported in several regions by July 2025, particularly Mudug, Nugaal, Bari, Awdal, Woqooyi Galbeed and Sanaag. An estimated 2.5 million people live in areas classified as moderately or severely affected by drought conditions across 26 districts. Of them, nearly 0.9 million are in severely affected areas in 16 districts. Preliminary reports point to escalating food insecurity, dwindling access to water and pasture, and major disruptions to livelihoods (OCHA, August 2025).

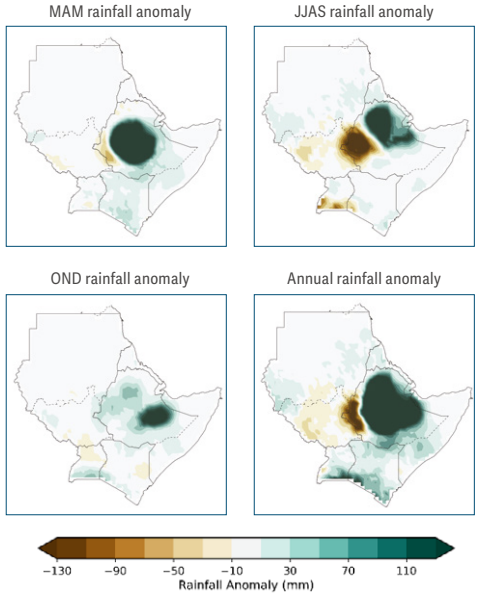
In the bimodal areas of **Uganda**, erratic rainfall in the middle of the March to June rainy season disrupted planting. However, average-to above-average rainfall later in the season benefitted crops, lifting prospects. Rainfall in the unimodal agropastoral region of Karamoja was erratic (FEWS NET, August 2025). In contrast, most parts of **Kenya** received favourable rainfall, boosting crop production prospects, and pasture and water availability for livestock.

Forecasts for the June to September 2025 season indicated a high likelihood of above-average rainfall in the northern and western parts of the region. While this presents positive prospects for crop and livestock production, the risk of flooding remains high, with particular concern for the central and northern parts of **South Sudan**, hosting hundreds of thousands of refugees and returnees, as well as for conflict-affected areas of the **Sudan**, including Greater Darfur and Greater Kordofan (FEWS NET, June 2025).

The October to December 2025 season is forecast to bring drier-than-usual conditions to parts of the region, including southern **Ethiopia**, eastern **Kenya** and much of **Somalia** (ICPAC, September 2025). Some of these areas have already experienced at least one below-average rainy season, including central and northern **Somalia** where drought conditions persist. Concurrently, warmer-than-average temperatures are forecast across most of the region. These conditions risk negatively impacting crop production, pasture regeneration, and water availability in already vulnerable areas.

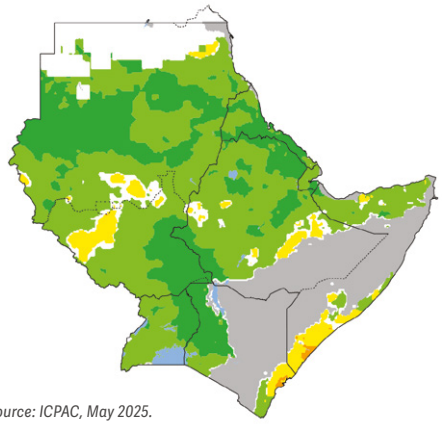
Between September 2024 and March 2025, **Ethiopia** experienced seismic activities that impacted southern Afar and northern Oromia regions, resulting in evacuations, disruption of livelihoods, and damage to infrastructure (ECHO, March 2025).

MAP 1.2 Spatial distribution of rainfall anomalies in 2024 (percentage)



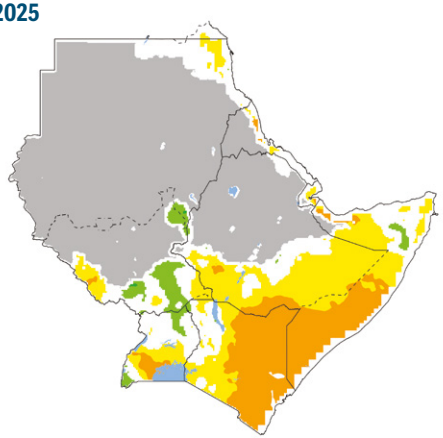
Source: ICPAC.

MAP 1.3 Rainfall forecast June–September 2025



Source: ICPAC, May 2025.

MAP 1.4 Rainfall forecast Octomber–December 2025



Source: ICPAC, August 2025.

Conflict and insecurity

For the past two years, conflict in the Sudan has been the leading driver of acute food insecurity in the region.

In the **Sudan**, despite some recovery in cereal production in late 2024 compared with the previous year, conflict continued to constrain food availability and access, with fighting disrupting supply chains and driving up input costs and consequently food prices. Hostilities also forced households to abandon their food stocks, and prevented IDPs and refugees in camps from farming (IPC, July 2025).

In **South Sudan**, national instability and intercommunal violence – particularly in Warrap, Upper Nile and parts of Jonglei, Lakes, Central and Western Equatoria states – forced people to abandon their homes and interrupted humanitarian operations in 2024 (IPC, November 2024). Since February 2025, escalating hostilities in Upper Nile have worsened acute food insecurity, with a plausible risk of Famine (IPC Phase 5) in Luakpiny/Nasir and Ulang counties from April to July 2025 (IPC, June 2025). Long-delayed elections, now scheduled for December 2026, raise concerns for violence in the lead-up to them (Centre for Preventive Action, March 2025). The regional spillover from the conflict in the **Sudan** continues to exacerbate the situation.

Parts of Amhara, Oromia and Tigray regions in **Ethiopia** remain of concern due to political tensions (FEWS NET, June 2025). In **Somalia**, insecurity linked to non-state armed actors continued to drive fatalities, loss of livelihoods and displacement. Between February and June 2025, an estimated 305 000 people were newly displaced due to conflict in the country (UNHCR, 2025).

In **Kenya**, resource-based disputes in the pastoral areas led to livestock losses and disrupted access to grazing areas (IPC, March 2024; IPC, March 2025). Conflict in central and southern **Somalia** forced 33 000 people to seek refuge in **Kenya** in early 2025 (IOM, April 2025).

In **Uganda**'s Karamoja subregion, cattle raids (though reduced following disarmament efforts since 2020) continued to threaten livestock ownership and disrupt livelihood activities (FEWS NET, October 2024; IPC, June 2024). Persistent conflict in neighbouring countries, including **Democratic Republic of the Congo** and the **Sudan**, continued to drive refugees into the country.

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Economic shocks

Poor macroeconomic conditions continued to undermine food access, particularly in South Sudan, the Sudan and Ethiopia, through high food prices.

In **South Sudan**, maize and sorghum prices remained elevated across most markets. In May 2025, the national average price for key cereals was over 500 percent above the recent five-year average and and 200 percent higher than year-earlier levels (WFP, May 2025). This was mostly driven by sharp depreciation of the South Sudanese Pound (SSP), high transportation costs and import levies, in addition to localized conflict. Between May 2024 and May 2025, the SSP depreciated by about 65.3 percent, driven by low foreign reserves linked to oil revenue losses – following pipeline damage in the **Sudan** and Red Sea shipping disruptions (FSNWG, July 2025). The conflict in the **Sudan** has also disrupted supply chains in the country, increasing reliance on more expensive imports from **Kenya** and **Uganda** due to exchange rate losses and high transport costs (IPC, November 2024). While official inflation data for **South Sudan** are not available, it is estimated to be in triple digits given the high prices for both goods and services (WFP, May 2025).

Conflict in the **Sudan** has pushed food prices to historical levels. Even before April 2023, food prices were high due to unfavourable macroeconomic conditions and high production and transportation costs. While staple cereal prices seasonally declined between September 2024 (when they were at record levels) and February 2025 when the country moved from the lean season to the harvest period, in April 2025 they were over four times higher than pre-conflict levels (FAO-GIEWS, May 2025). As of June 2025, the Sudanese Pound (SDG) had depreciated by 44 percent against the US dollar compared with the same period in 2024, and by 77 percent compared with March 2023 (pre-conflict) (WFP, July 2025). High-conflict areas like North Darfur have seen the sharpest increases in cereal prices, due to considerable deteriorations in market functionality (FAO, June 2025).

In **Ethiopia**, staple food prices stabilized through mid-2025, but remained above the recent five-year average. In March 2025, for instance, the average price of teff, a staple cereal, was 65 percent higher than the recent five-year average (WFP, May 2025). Fuel prices also increased by 53.6 percent year-on-year, further inflating production and transport costs. Annual food inflation stood at 11.7 percent in June 2025 (ESS, June 2025). Looking ahead, despite improved market supplies from the Meher and Belg harvests, continued depreciation of the Birr, along with high production and transport costs, are likely to keep prices elevated.

Acute food insecurity since 2016

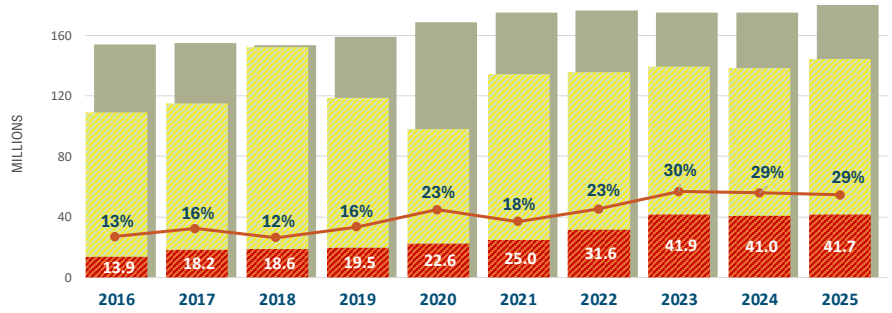
The number of people facing high levels of acute food insecurity in the five countries with comparable data available each year (Kenya, Somalia, South Sudan, the Sudan and Uganda) has tripled from approximately 13.9 million people in 2016 to 41.7 million in 2025. (See figure 1.1)

Acute food insecurity varied year to year, with periods of sharp increases and others of relative stability. From 2016 to 2017, the number of people facing high levels of acute food insecurity rose by more than 30 percent, driven by increases in **Kenya**, **Somalia**, **Uganda** and **South Sudan** due to drought conditions in **Kenya** and **Somalia**, conflict in **South Sudan**, and drought conditions combined with refugee influxes from **South Sudan** into **Uganda**.

Multiple drivers contributed to the 85 percent regional increase in high levels of acute food insecurity between 2020 and 2023, including the socio-economic impacts of COVID-19; the devastating five-season drought in eastern Horn of Africa; widespread flooding in the **Sudan** and **South Sudan**; and conflict in parts of the region, including **South Sudan** and **Somalia**.

In 2024, acute food insecurity in the region was marked by a sharp rise in high levels of acute food insecurity in the **Sudan**, with an additional 5.3 million people in IPC Phase 3 or above since 2023, while other parts of the region, including **Kenya** and **Somalia**, saw improvements due to better rainfall, which aided a slow recovery from the regional 2020-23 drought.

FIG. 1.1 **Numbers of people and share of analysed population facing high levels of acute food insecurity in five countries with protracted food crises, 2016-2025**



Source: IPC TWGs; FEWS NET.

East Africa has a history of catastrophic levels of acute food insecurity

Famine (IPC Phase 5) has been very rare in the 21st century. In the last 15 years, five Famines have been confirmed in the world – four of them in East Africa.

Famine was detected in parts of southern **Somalia** in July 2011, **South Sudan** in February 2017 (in Unity state), South Sudan again in November 2020 (in Pibor county, Jonglei state), and, from August 2024, in the **Sudan*** (initially in parts of North Darfur and later South and West Kordofan) (IPC FRC, December 2024).

These extreme food crises have been characterized by severe food shortages, widespread acute malnutrition and tens of thousands of deaths, primarily driven by conflict, and in the case of **Somalia**, erratic weather patterns, and almost insurmountable operational challenges for humanitarians delivering aid (IPC, October 2024).

Populations in Catastrophe (IPC Phase 5) have been recorded each year since 2016 in **South Sudan**. People have also faced Catastrophe (IPC Phase 5) in **Somalia** in 2022 and 2023, in **Ethiopia**'s Tigray region in 2021** and in the **Sudan** since December 2024.

A **Somalia** IPC analysis published in September 2022 projected Famine (IPC Phase 5) for agropastoral populations in Baidoa and Burhakaba districts and newly arrived displaced people in Baidoa settlements (Bay region) as well as in Mogadishu from April to June 2023. This was largely due to the impacts of drought and escalating food prices, exacerbated by concurrent conflict and insecurity, and disease outbreaks (IPC, September 2022). The Famine, however, did not materialize due to scaled-up assistance, a better-than-expected, yet still below-average, October to December 2022 rainy season and stabilization of very high food prices.

*The Government of Sudan did not endorse this analysis.
** The Government of Ethiopia did not endorse this analysis.

Structural vulnerabilities

Structural vulnerabilities underlie persistently high levels of acute food insecurity and malnutrition in the region and impact IGAD member states' ability to address and cope with the multiplicity of external shocks.

Weak institutions, environmental fragility, widespread poverty, particularly among rural populations, social inequalities and dependence on food imports all undermine the region's ability to prevent, absorb and recover from crises.

Except **Djibouti**, all IGAD member states have faced protracted food crises for close to a decade – appearing in every edition of the GRFC – signalling that acute food insecurity in the region is not just cyclical, but systemic (World Bank, December 2022).

Somalia, the **Sudan** and **South Sudan** were considered the three most fragile states in the world in 2024, reflecting a high exposure to risk and limited coping capacity (OECD, July 2024; OECD, February 2025). Besides weak institutions, fragility in the region is characterized by protracted conflict and insecurity, particularly in parts of **Ethiopia**, **Somalia**, **South Sudan** and the **Sudan**.

Conflict undermines food security by disrupting production and trade, displacing populations, destroying critical infrastructure and eroding already limited livelihoods (IGAD, February 2024).

High poverty rates and economic vulnerability are another significant driver of food insecurity in the region, with around one-third of the region's population, around 100 million people, living on less than USD 3 per day (WB, June 2025; IGAD, May 2023).

Conflict, poverty and economic fragility reinforce each other. Conflict aggravates poverty by limiting livelihood opportunities, damaging infrastructure and restricting access to basic services and social safety nets. Poverty in turn increases susceptibility

to unrest through inequalities and exclusion (OPHI and UNDP, November 2024).

Agriculture is the main livelihood in the region, directly supporting over 80 percent of the population and serving as the foundation for food supplies and export earnings (FSIN and GNAFC, May 2025). Communities relying on pastoralism and rain-fed agriculture are particularly vulnerable and exposed to climate-related shocks – especially cycles of intensifying droughts and floods (IGAD, February 2024).

Most agricultural households are not self-sufficient and rely on markets to access food during parts of the year, particularly during the lean season. However, widespread poverty constrains their purchasing power (OPHI and UNDP, November 2024).

High food prices further strain food access. **South Sudan** and **Sudan** experienced triple-digit year-on-year price increases for staples in 2024 (FAO-GIEWS, November 2024). These inflationary pressures, combined with chronic poverty, have constrained household purchasing power, leading to a cost-of-living crisis that disproportionately the poorest households (IFPRI, August 2023).

Structural economic fragility also limits governments' capacity to respond to crises effectively. The last available data indicate that in 2022, official development assistance (ODA) accounted for an average of 6 percent of Gross National Income across the region, reaching 19 percent in **Somalia** (latest data 2022; World Bank, May 2022). External debt burdens further constrain fiscal space – by 2022, the International Monetary Fund's recommended debt-to-GDP threshold for low-income countries had been exceeded in the **Sudan** (186 percent), **Eritrea** (164 percent), **Kenya** (73 percent), **Ethiopia** (56 percent) and **Uganda** (50 percent) (IGAD, July 2023).

The unprecedented reductions in ODA and humanitarian aid in 2025 risk compounding these structural weaknesses and reversing development gains. Programmes in food security, nutrition and related sectors (health, water, sanitation, agriculture and protection) are being scaled back or terminated, while access to assess needs and target operations is increasingly limited. Food and nutrition assistance has been reduced. This includes in **Djibouti**, where cuts in assistance risk widening food consumption gaps in all three of the country's refugee camps, contributing to pushing their populations into Emergency (IPC Phase 4) (IPC, June 2024).

High reliance on cereal imports exposes national food systems to global shocks and market volatility – **Djibouti** and **Somalia**, for example, have each averaged over 90 percent cereal import dependency since 2010 (latest data 2022) (FAO-GIEWS, July 2025). Nearly all countries in the region have required external food assistance for more than 30 years since 1981, with **Ethiopia**, **Somalia** and the **Sudan** needing it for over 90 percent of that period, highlighting the region's persistently limited capacity to cope with food insecurity (FAO-GIEWS, November 2024).

Women play a vital role in agrifood systems, particularly in contexts of low economic development, yet they face systemic barriers that limit their productivity, income and resilience (FAO, June 2023). Gender gaps in access to assets, resources and decision-making reduce household resilience and heighten food insecurity during shocks. In many cases, women lack control over land and credit (FAO, 2023), which restricts their ability to invest in productivity-enhancing inputs or adopt climate-smart practices (FAO, June 2024). As a result, women and female-headed households are disproportionately vulnerable to food insecurity, with gender barriers constraining their access to food and reducing their consumption (IPC, June 2024).

Gender inequality leads to women and households headed by women being disproportionately affected by acute food insecurity.

2 | Acute malnutrition

Nutrition crises were identified in all six countries with food crises and data in the region, and among refugees in Uganda. The Sudan and South Sudan had the most severe nutrition crises, with each having over a quarter of their children facing acute malnutrition.

In 2025, 8.7 million children aged 6-59 months are suffering from acute malnutrition in six IGAD member states (see fig. 1.3). Of them, 2.2 million are affected by severe acute malnutrition (SAM). About 2.6 million pregnant and breastfeeding women in five countries are also acutely malnourished.

The climate crisis, conflict and insecurity, and repeated economic shocks contribute to acute malnutrition, as they affect food security, health and care provision, which are all determinants of nutrition.

Major cuts in assistance are expected to worsen nutrition crises in 2025. An estimated 1 million children may lose access to treatment for severe acute malnutrition, with 164 000 additional child deaths projected annually in the seven IGAD member states with food crises (UNICEF, March 2025). In **Somalia** and the **Sudan**, for instance, access to treatment has been dramatically reduced (FSIN and GNAFC, September 2025).

The **Sudan** remains the region's most severe nutrition crisis, with Famine (IPC Phase 5) and risk of Famine detected and projected to persist though May 2025 in North Darfur, Greater Kordofan, Al Jazirah and Khartoum states (IPC FRC, December 2024).* Acute malnutrition was expected to worsen during the July to September 2025 lean season (IPC, July 2025). Over half of the 21 SMART surveys conducted during the 2025 post-harvest period (when malnutrition would typically be at lower levels) reported Critical levels of acute malnutrition (≥15 percent) among children aged 6–59 months, with likely pockets of even higher severity (Sudan Nutrition Sector, June 2025).

In **South Sudan**, acute malnutrition increased sharply due to conflict, collapsing health and water, sanitation and hygiene (WASH) services, Catastrophe (IPC Phase 5) levels of acute food insecurity and declining humanitarian assistance. Cholera outbreaks and rising malaria and diarrhoea cases – above seasonal patterns – are increasing child mortality rates. Northern counties of Baliet, Luakpiny/Nasir, Rubkona and Ulang were classified in Extremely Critical (IPC AMN Phase 5), with a plausible risk of Famine in Luakpiny/Nasir and Ulang. Nearly 70 percent of areas analysed were in IPC AMN Phase 4 (IPC, June 2025).

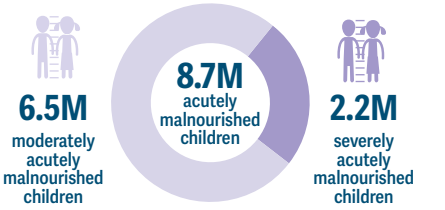
Djibouti, **Kenya**, **Somalia**, **South Sudan**, the **Sudan** and **Uganda** (Karamoja) all have areas classified in Critical (IPC AMN Phase 4) in 2025 ranging from 11 percent of the analysed areas in **Uganda** to 69 percent in **South Sudan** (IPC, June, September, November 2024; ENCU 2025).

In **Djibouti**, five areas, including key urban areas and refugee camps, were expected to fall into Critical (IPC AMN Phase 4) in August to December 2025 (IPC June 2025).

In **Kenya**'s ASALs, a projected deterioration was based on forecast poor March to May 2025 rains (IPC, March 2025). While the rains ultimately

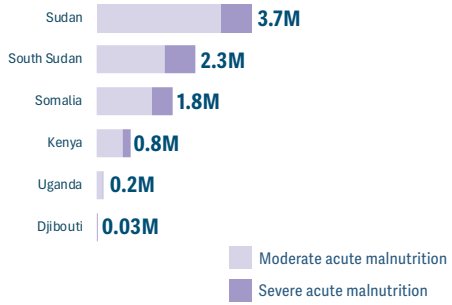
* The Government of Sudan did not endorse this IPC analysis.

FIG. 1.2 **Children aged 6–59 months with acute malnutrition in IGAD member states, 2025**
(in 6 countries)



2.6M pregnant and breastfeeding women with acute malnutrition in 2025 in six countries

FIG. 1.3 **Children aged 6–59 months with acute malnutrition by country, 2025**



Source: IPC TWGs (Kenya, Somalia, South Sudan and Uganda); Sudan Nutrition Cluster, 2024.

In Karamoja, Uganda, around 200 000 children aged 6–59 months are suffering from acute malnutrition.

improved pasture and water availability in some areas, their erratic distribution and prolonged dry spells disrupted crop development, leading to 40–70 percent below-average production in agropastoral areas. The forecast below-average October to December rains are expected to further compromise agricultural production and keep staple food prices elevated (IPC, September 2025).

In **Somalia**, a seasonal deterioration was projected for April to June 2025, with a more severe acute malnutrition situation compared with the same period in 2024, reflecting the expected increase in population displacement due to drought and conflict, and the likely impact of the major reduction in humanitarian assistance funding (IPC March 2025). Both assumptions materialized with over 240 000 people displaced in the first half of 2025 and humanitarian assistance significantly reduced (OCHA, July 2025; OCHA, June 2025).

Ongoing analyses for refugees and host populations in **Uganda** indicate a risk of a nutrition crisis in 2025, reversing earlier projections of improvement (IPC, December 2024). This is largely due to the disruption in nutrition interventions following funding cuts.

Acute malnutrition trends, 2020–2025

Ethiopia, **Kenya**, **Somalia**, **South Sudan**, the **Sudan** and **Uganda** (Karamoja) have consistently had areas with acute malnutrition prevalence above 15 percent in at least three of the last five years. For refugees in **Uganda**, it ranged from 8–10 percent in the Adjumani and Kiryandongo camps from 2021 to 2023, before improving in 2024 (IPC, November 2023).

Djibouti saw a deterioration over this period, with national GAM prevalence increasing from 10 percent in 2019 to 12.7 percent in 2022 (UNICEF, WHO and WB, 2023). However, it had multiple areas in IPC AMN Phase 4 in 2024 (IPC, June 2024).

Main contributing factors

Enabling determinants | Conflict in the **Sudan**, as well as **South Sudan**, **Somalia** and parts of **Ethiopia**, has limited access to healthcare and disrupted humanitarian access.

Heavy rains and flooding in **Ethiopia**, **Kenya**, **Somalia**, the **Sudan**, **South Sudan** and **Uganda** increased disease outbreaks, damaged health facilities and limited access to health services in 2024 (WFP, November 2024).

Funding cuts have deeply affected **Ethiopia**, **Kenya, South Sudan**, **Somalia** and **Uganda** (Karamoja), reducing health and nutrition service coverage (IPC, 2024).

Underlying and immediate determinants | Among IPC-analysed nutrition crises, **Djibouti**, **Kenya**, **Somalia**, **South Sudan** and the **Sudan** exhibited 'very high' acute malnutrition risk factors across all three pathways – food, health, and care and services. **Uganda** (Karamoja) had 'very high' risk factors in two pathways (food and health).

Across all crises, fewer than 10 percent of children aged 6–23 months met minimum acceptable diet standards, and all seven crises had diarrhoea and cholera outbreaks in 2024.

Focus: Child food poverty and climate change

Child food poverty is one of the most pressing and widespread drivers of acute malnutrition today. Defined by UNICEF (2024) as the inability of children to access and consume a diverse and nutritious diet in the first 5 years of life, child food poverty reflects both dietary deprivation and systemic failures in food, health, and care and services systems.

To achieve minimum dietary diversity for healthy growth and development, children must consume at least five of the eight essential food groups each day. Children consuming three to four food groups are considered to be in moderate child food poverty, while those consuming zero to two groups are considered to be in severe child food poverty. The consequences are severe: children facing severe dietary deprivation have a 34 percent higher likelihood of stunting and a 50 percent higher likelihood of wasting (UNICEF, 2024).

In IGAD member states, child food poverty is alarmingly widespread, affecting 37 million children under 5 years - over 80 percent of the total. Of these, 17 million children, or 37 percent of the total, are in severe child food poverty, surviving on extremely poor quality diets, largely composed of low-nutrient staple crops (UNICEF, 2024).

The crisis is deepened by recurrent shocks. Conflict and economic hardship erode household access to safe and affordable diets. Climate change acts as a powerful risk multiplier given that an estimated 70 percent of the region is classified as arid and semi-arid lands (ASALs), characterized by water scarcity, high dependence on rainfed agriculture and pastoralism, and limited resilience to climate variability. Prolonged droughts, unpredictable rainfall, floods and heatwaves diminish agricultural, fishery and pastoral productivity, disrupt markets and income sources, and weaken essential services.

Without decisive action, the long-term effects of climate change on nutrition outcomes will be devastating. Projections estimate that by 2050, climate change could result in an additional 40 million stunted children and 28 million wasted children under 5 years globally, with many of these cases expected in IGAD member states (Gates Foundation, 2024).

Strengthening nutrition-sensitive agriculture, building resilient health and WASH services, and expanding social protection systems will be essential to counter the combined effects of conflict, economic shocks and the accelerating climate crisis.

3 | Displacement

The East Africa region continues to have more forcibly displaced populations than any other region in the Global Report on Food Crises.

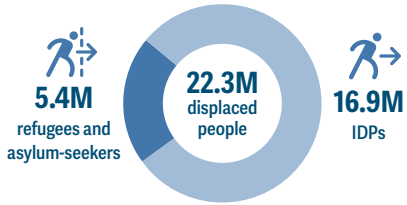
As of July 2025, an estimated 22.3 million people were living in forced displacement across six IGAD member states, including 16.9 million internally displaced persons (IDPs) and 5.4 million refugees and asylum-seekers. Conflict and insecurity, and weather extremes remain the primary drivers of displacement in the region.

The **Sudan** remains the world's largest internal displacement crisis and accounts for more than half of the region's IDPs, at 10.1 million, with 2.4 million displaced before the start of the ongoing conflict and 7.7 million since. This is a 13 percent decrease from the record high of 11.6 million in January 2025, largely driven by return movements, especially to Al Jazirah, Sennar and Khartoum states (IOM, July 2025). Though reflective of a relative improvement in security, this is intensifying pressure on the already limited food supplies, and other essential goods and services in these areas. Returnees remain highly vulnerable.

In **Somalia**, an estimated 305 000 people were newly displaced between February and June 2025, primarily due to conflict as well as drought (UNHCR, 2025).

In **Ethiopia**, at least 1.0 million IDPs remain in the northern regions of Tigray, Amhara and Afar as a result of the 2022 conflict. In 2025, new conflict-driven displacement was reported in these areas and in Oromia, Somali and Southern regions.

FIG. 1.4 **Number of forcibly displaced people in seven countries in the region, 2025**



Source: UNHCR Nowcasted estimates, July 2025; IOM, September and December 2024, February and June 2025; Government of Ethiopia administrative data.

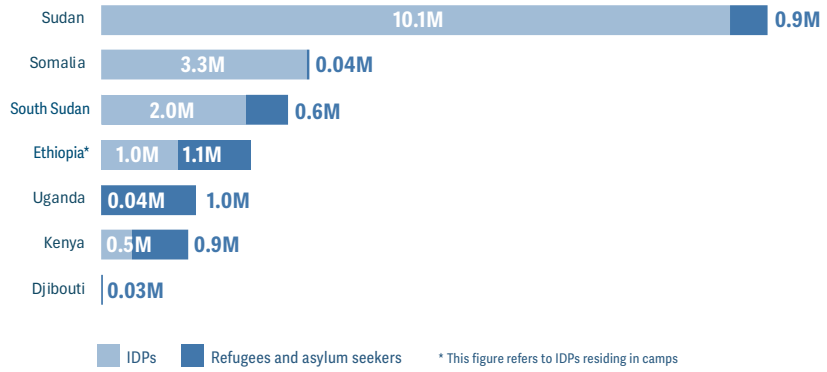
In **South Sudan**, close to 0.2 million people were newly displaced between March and June 2025 due to the recent escalation in hostilities, bringing the total number of IDPs to about 2 million by June (UNHCR, July 2025a).

Of the 5.4 million refugees and asylum-seekers in the region, the majority are hosted in **Uganda**, making it the largest refugee-hosting country on the continent. **Ethiopia**, **Kenya** and the **Sudan** each host more than 0.8 million refugees (UNHCR, July 2025a).

About 83 percent of refugees in the region originate from within the region, mainly from **South Sudan** (UNHCR, July 2025b). Between March and June 2025, an estimated 129 000 people fled **South Sudan** to the **Sudan**, **Ethiopia**, Democratic Republic of the Congo and **Uganda**, following the escalation of hostilities since February (UNHCR, July 2025a).

More than 4.2 million people are estimated to have fled the **Sudan** due to the ongoing conflict, the majority to Egypt, **South Sudan** and Chad (IOM, July 2025).

FIG. 1.5 **Number of forcibly displaced people by country, 2025**



Source: UNHCR Nowcasted estimates, July 2025; IOM, September and December 2024, February and July 2025; Government of Ethiopia administrative data.

Acute food insecurity among displaced populations

Displaced populations continue to face some of the most severe food security outcomes in the region, driven by limited access to livelihoods and land for own food production, and a heavy dependence on dwindling humanitarian assistance.

In the **Sudan**, Famine (IPC Phase 5) was projected to persist in Zamzam, Abu Shouk and Al Salam camps, as well as among IDPs in the Western Nuba mountains from December 2024 to May 2025. Risk of Famine was projected in areas expected to receive large influxes of IDPs in North and South Darfur (IPC FRC, December 2024)*.

In **South Sudan**, returnees from the **Sudan** face severe conditions, with 85 percent of them in IPC Phase 3 or above from April to July 2025, and 39 000 in Catastrophe (IPC Phase 5) (IPC, June 2025).

In parts of **Somalia**, acute food insecurity among IDPs was projected to deteriorate from IPC Phase 2 to IPC Phase 3 in April to June 2025, due to conflict and drought, with declining levels of humanitarian assistance a contributing factor (IPC, March 2025).

Djibouti's three refugee camps are projected to shift from IPC Phase 3 to to IPC Phase 4 in July to December 2025 due to unstable employment reducing households' purchasing power and climatic shocks, amid decreasing levels of assistance (IPC, June 2025). As of June 2025, all but the most vulnerable refugees in **Kenya** had rations cut by up to 40 percent, while refugees in **Ethiopia**, **Djibouti** and **South Sudan** were receiving up to 50 percent of the full ration. Refugees in **Uganda** also experienced ration cuts.

* The Government of Sudan did not endorse the IPC and FRC analyses.

II | Country profiles

WFP/ARETE/MAHAD SAID

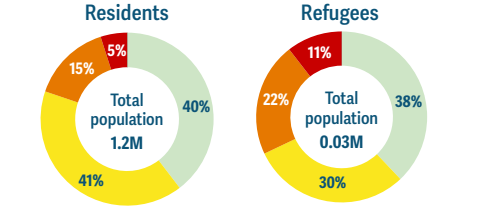
Djibouti

ACUTE FOOD INSECURITY | Despite a projected overall improvement, the situation among refugees is expected to worsen.

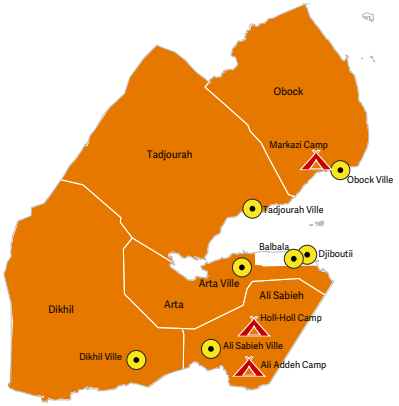
PEAK 20205 (JULY–DECEMBER)

0.2M people or **20%** of the total population are projected to face high levels of acute food insecurity. Of them, nearly 55 000 are in Emergency (IPC Phase 4).

0.5M | 0.2M | 0.05M



Though the number of people facing high levels of acute food insecurity is projected to decline slightly compared with the 2024 peak, the expected reduction in humanitarian assistance is likely to contribute to the country's three refugees camps shifting to IPC Phase 4. Rural areas are expected to be in Crisis (IPC Phase 3), with up to 40 percent of their populations facing high levels of acute food insecurity.



Source: Djibouti IPC TWG, June 2025.

ACUTE FOOD INSECURITY, 2017–2025

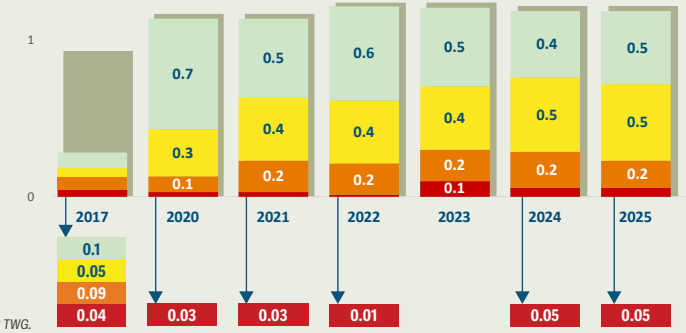
History of the food crisis. Djibouti has been selected for all editions of the GRFC, but no data were available for 2018 or 2019. In 2016, an estimated 0.2 million people faced high levels of acute food insecurity, decreasing to 0.1 million in 2017. The low numbers may be attributed to low analysis coverage (31 percent of the population) of a relatively small overall population. In 2018 and 2019, no IPC analyses were available.

The number of people in IPC Phase 3 or above peaked in 2023 with a 50 percent increase from the 2022 peak, and the number in IPC Phase 4 nearly eight times higher. Global economic shocks, increasing food prices linked to the conflict in Ukraine, and periods of localized drought in 2020–2023 contributed to the deterioration.

A small lower-middle-income country, Djibouti ranked 175 out of 193 countries and territories on the 2023 Human Development Index (UNDP, May 2025). The economy relies heavily on port services. While port activity remained strong in the second half of 2024, tensions in the Red Sea and ongoing instability in the shipping corridor are significant risks (World Bank, April 2025).

With less than 1 percent of its land arable, Djibouti depends almost entirely on imports to meet its domestic food demand, making it highly vulnerable to global price fluctuations and supply chain disruptions (WFP, March 2025).

Peak numbers of people (in millions) by phase of acute food insecurity, 2017, 2020–2025



Source: Djibouti IPC TWG.

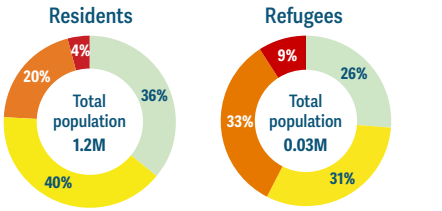
1 - None/Minimal | 2 - Stressed | 3 - Crisis | 4 - Emergency | 5 - Catastrophe/Famine | 1 - None/Minimal and Stressed

3+ - Crisis or worse | Total population | Urban settlement classification | IDPs/other settlements classification

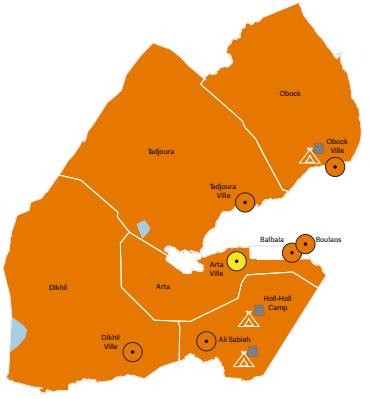
PEAK 2024 (JULY–DECEMBER)

0.3M people or **24%** of the total population faced high levels of acute food insecurity during the lean season. This includes around 53 000 people in IPC Phase 4.

0.5M | 0.2M | 0.05M



This was a similar number to the 2023 peak, although no areas were classified in IPC Phase 4. All areas were in Crisis (IPC Phase 3) except for the city of Arta (IPC Phase 2). The situation was particularly concerning in the rural parts of Ali Sabieh, Arta, Obock and Tadjourah, and in the country's three refugee camps, where 35–45 percent of the population were facing high levels of acute food insecurity (IPC, June 2024).



Source: Djibouti IPC TWG, June 2024.

Djibouti

DRIVERS 2024–2025

Economic shocks Since the second half of 2024, prices of most staple cereals have remained stable relative to the recent five-year average. However, prices of dry beans imported from Ethiopia rose sharply, reaching record highs in August 2024 before slightly easing in September. This was followed by a seasonal increase in the last quarter of 2024, averaging about 11 percent higher than the same period in 2023. The price of imported rice was at least 6 percent above 2023 levels (WFP, November 2024; WFP, January 2025).

This overall trend of price stability continued into early 2025 – despite rice and pasta prices remaining slightly above 2024 levels – and was projected to continue in the short term, supported by price controls and stable macroeconomic conditions (WFP, May 2025). However, low incomes, especially among agriculture-dependent households, are expected to constrain their purchasing power during the second half of 2025 (IPC, June 2025).

While the fixed exchange rate with the USD has supported price stability, a recent decline in foreign reserves poses a risk to the sustainability of the currency arrangement and requires close monitoring (World Bank, April 2025).

Weather extremes Between July and December 2025, localized drought conditions are expected to reduce agricultural production, especially in rural areas. As a result, households that depend on the sale of crop and livestock products will likely experience a decline in income. This decline is also expected to lead to significantly reduced availability of locally produced staple foods, both at the household level and in local markets. The regions of Dikhil, Obock and Tadjourah are of particular concern (IPC, June 2025).

DISPLACEMENT

33 500 refugees and asylum-seekers by July 2025

Source: UNHCR Nowcasted estimates, July 2025

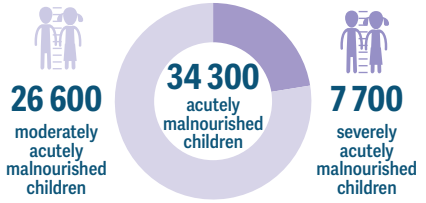
Refugees Of the 33 500 refugees and asylum seekers in Djibouti, 43 percent are from Somalia, 41 percent from Ethiopia, and 11 percent from Yemen. The majority (85 percent) live in the country's three refugee camps (Ali Addeh, Holl-Holl and Markazi), while the remaining 15 percent live in the city of Djibouti (UNHCR, June 2025).

Food security in the refugee camps remains a major concern. From May to June 2025, about 32 percent of their residents faced high levels of acute food insecurity, with all three camps classified in IPC Phase 3. The situation is expected to worsen from July to December 2025, with the camps deteriorating to an IPC Phase 4 classification, and 40–55 percent of their populations expected to face high levels of acute food insecurity. This is largely due low employment opportunities and constrained purchasing power, as well as the impact of weather extremes, amid an anticipated decline in humanitarian food assistance (IPC, June 2025).

Acute malnutrition levels among children aged 6–59 months in the camps are a major cause for concern. From August to December 2025 – coinciding with a broader seasonal decline in nutrition conditions in most areas – Holl-Holl and Markazi are expected to deteriorate from Serious (IPC AMN Phase 3) to Critical (IPC AMN Phase 4), while Ali-Addeh is projected to shift from Alert (IPC AMN Phase 2) to Serious (IPC AMN Phase 3). Reduced coverage of nutrition programmes, due to reduced funding, and limited access to healthcare are among the contributing factors (IPC AMN, June 2025).

ACUTE MALNUTRITION

JANUARY–JULY 2025



2 100 pregnant and breastfeeding women with acute malnutrition in 2025.

Source: Djibouti IPC TWG, June 2025.

Acute malnutrition is set to deteriorate, with five areas expected to be in Critical (IPC AMN Phase 4) by late 2025.

Of 15 areas analysed, nine were classified in Serious or worse (IPC AMN Phase 3 or above) between May and June 2025, down from 11 areas during the same period in 2024. The situation was more severe in rural areas, with Obock and Tadjourah classified in IPC AMN Phase 4.

From August to December 2025, the situation is expected to deteriorate, with five areas projected to be in IPC AMN Phase 4 and seven in IPC AMN Phase 3. Six areas are projected to move to a higher level of severity – Tadjourah and Ali Sabieh, and Ali-Addeh refugee camp, from IPC AMN Phase 2 to IPC AMN Phase 3, and the rural area of Dikhil, and Markazi and Holl-Holl refugee camps from IPC AMN Phase 3 to IPC AMN 4 (IPC, June 2025 (IPC AMN, June 2025).

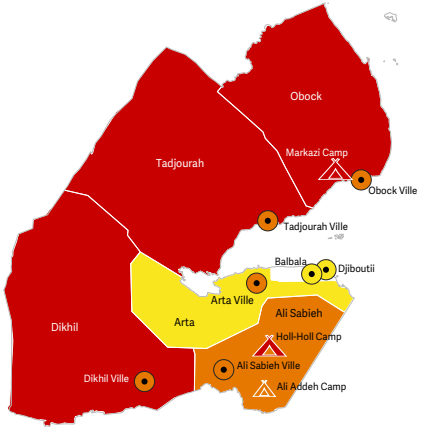
CONTRIBUTING FACTORS 2024–2025

Lack of food/ inadequate diets High and recurrent food insecurity continues to undermine food intake, with 36 percent of households estimated to have a poor or borderline food consumption score, reflecting significant food consumption gaps. Child-feeding practices are also subpar, with exclusive breastfeeding rates estimated at 12.3 percent, considered Critical (UNICEF, 2024).

Inadequate practices Poor water, sanitation and hygiene conditions exacerbate child health risks. Access to safe water ranges from 10 percent to 90 percent depending on the area, while in some areas access to latrines is as low as 11 percent. This has resulted in a high incidence of child illnesses, such as acute watery diarrhoea and malaria.

Inadequate services Limited reach of nutrition interventions (including in refugee camps), due to a reduction in funding, inadequate access to healthcare, and low coverage of measles vaccinations and vitamin A supplementation, further compound the situation (IPC AMN, June 2025).

PEAK 2025 (AUGUST–DECEMBER)



Djibouti IPC TWG, June 2025.

1 - Acceptable
2 - Alert
3 - Serious
4 - Critical
5 - Extremely Critical
Not analysed
MUAC
Urban settlement classification
IDPs/other settlements classification
At least 25% of households meet over 50% of caloric needs from humanitarian food assistance

Ethiopia

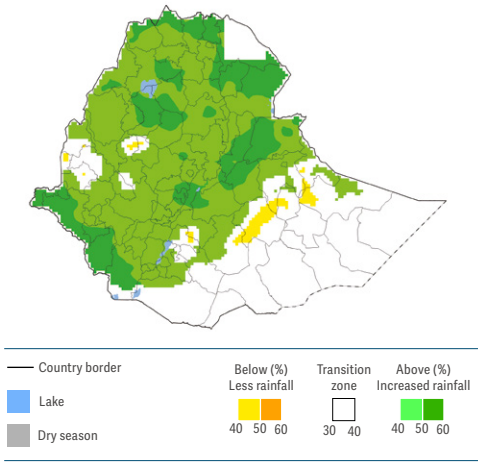
ACUTE FOOD INSECURITY | Gradual improvement has been observed, but areas affected by climate shocks and recurring insecurity, and displaced populations remain of concern.

ACUTE FOOD INSECURITY IN 2025

Despite a favourable 2024 main season harvest (June–September) and improved livestock production in pastoral areas compared with the past three years, high levels of acute food insecurity, though at lower levels than in recent years, persist in localised areas affected by below-normal rains and dry spells. (WFP, February 2025).

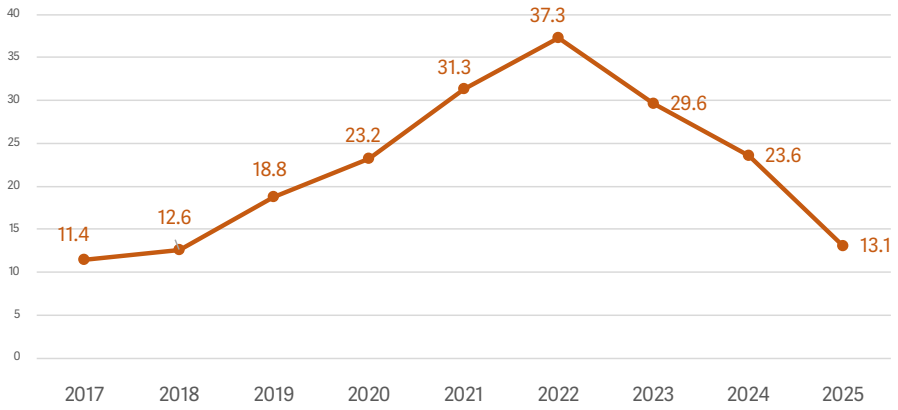
Concern remains for populations in parts of Amhara, Oromia and Tigray regions, where the impact of past and ongoing conflict and insecurity continue, for those impacted by seismic activities since late last year in southern Afar and northern Oromia, as well as for IDPs, refugees and returnees. Households in southern pastoral areas and in the pastoral parts of Afar also remain of concern, having not yet recovered from livestock losses from the 2020-23 drought, and the 2020-22 northern conflict, respectively. Drier-than-usual conditions over parts of Afar continued to negatively impact livestock body conditions (EMI, June 2025).

MAP 1.5 Rainfall forecast June–September 2025 (in percentage)



Source: ICPAC.

Average food inflation in Ethiopia 2017-2025



Source: Ethiopian Statistical Service (ESS)

ACUTE FOOD INSECURITY 2016-2025

Ethiopia has been included in all editions of the report, reflecting the protracted and multidimensional nature of its food crisis. Differences in data sources and coverage, however, limit comparability across annual peak figures.

Between 2020 and 2022, acute food insecurity significantly deteriorated across the country, largely driven by the conflict in Tigray, high food prices due to economic challenges, prolonged drought in the southern and southeastern parts, and the economic impacts of the COVID-19 pandemic.

In 2023, a four-month pause in US government-supported humanitarian food assistance due to concerns about aid diversion (FAO and WFP, November 2023), and an El Niño-induced drought in the western agricultural areas that resulted in a failed Meher harvest (FEWS NET, December 2023) contributed to high levels of acute food insecurity.

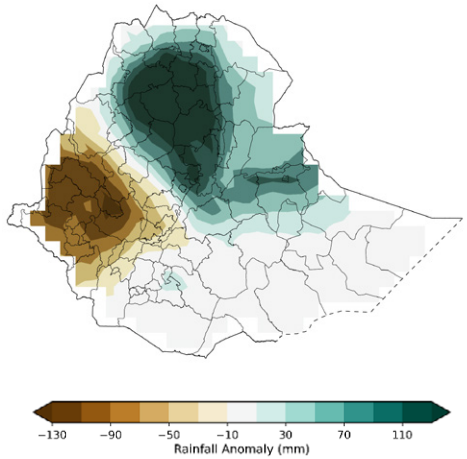
Since 2024, gradual improvements have been observed, but areas affected by recurring insecurity remain of concern, and high food prices – due to macroeconomic challenges – have continued to limit food access across the country.

ACUTE FOOD INSECURITY IN 2024

Though the year started with many households in eastern Amhara and Tigray grappling with little to no food stocks following an El Niño-induced failure of the 2023 main season harvests, the situation across the country gradually improved with generally favourable Belg and Meher seasonal rains (WFP, July 2024; WFP, October 2024).

Nonetheless, many households in Amhara and Tigray remained reliant on humanitarian food assistance as tensions largely limited food production and access. In southern and southeastern pastoral areas, displaced populations, especially in the Somali region, and households who suffered significant livestock losses from the 2020–23 drought remained vulnerable, despite improvements in overall livestock conditions (FEWS NET and WFP, June 2024).

MAP 1.6 Distribution of anomalies of the June–September 2024 rainfall season



Source: ICPAC.

Ethiopia

DRIVERS OF THE FOOD CRISIS

Conflict/insecurity Tensions in some parts of Amhara, Oromia and Tigray regions continued to disrupt livelihoods, and restrict access to farms and markets (FEWS NET, June 2025). In Amhara, insecurity disrupted humanitarian operations, leaving many without access to humanitarian assistance (WFP, April 2025).

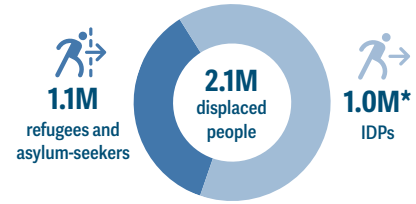
Weather extremes The 2024 Belg (February to May) and Kiremt/main (June–September) seasonal rains generally benefitted agricultural activities, but also triggered floods and landslides, resulting in loss of life, displacement, crop damage and livestock deaths (WFP, July 2024). The Deyr (October to December) seasonal rains were average to above-average in most parts, though some localised parts of Oromia and eastern Somali regions received below-average rains, which impacted pasture and water availability (EMI, January 2025; EMI, February 2025).

In Belg-receiving areas, below-average rains in parts of Afar and Somali regions created poor prospects for livestock production (EMI, June 2025). Rainfall forecast for the 2025 main rainfall season indicated above-average cumulative rains, which are expected to benefit crop and livestock production but also raise the risk of flooding (FEWS NET, June 2025).

Economic shocks Staple food prices stabilized in 2024 through early 2025 but remained above the recent five-year average. In March 2025, teff prices were 65 percent higher than the recent five-year average, while maize prices were 36 percent higher (WFP, May 2025).

Annual inflation has remained in double digits in 2025, indicating a high cost of living (Ethiopian Statistical Service, June 2025). Sharp currency depreciation against the USD continued to drive up the cost of imported commodities, including non-food items such as fuel, leading to higher production and transportation costs (ESS, August 2025).

DISPLACEMENT



* This figure refers to IDPs residing in camps.

Source: UNHCR Nowcasted estimate December 2024. Government administrative data.

IDPs In 2025, an estimated 1.0 million people are internally displaced and living in camps across the country. The Somali and Tigray regions (each with 37 percent of IDPs in the country) have the highest number of IDPs. Returning IDPs were identified across the country, the majority in Tigray, Amhara, Oromia and Afar. Conflict remained the driver of more than 80 percent of internal displacements followed by social tensions (8.6 percent) and drought (4.3 percent) (IOM, January 2025).

Refugees Ethiopia is the continent's third largest refugee-hosting country. Most of the refugees are from South Sudan (41 percent), Somalia (33 percent) and Eritrea (17 percent) (UNHCR, May 2025). In 2024, 16 000 new arrivals were recorded, mainly from the Sudan, and between March and June 2025, another 35 000 were recorded from South Sudan, following the escalation in hostilities (UNHCR, May 2025; UNHCR, June 2025).

Since 2023, funding shortages have led to a reduction in food rations for refugees, leaving them with just 60 percent of their daily caloric need. In April 2024, rations were further reduced to 47 percent, before being partially restored to 60 percent in August. New arrivals, however, continued to be prioritized for full rations (WFP, March 2025). In April 2025, WFP warned that without additional funding, cash and in-kind food assistance for up to 1 million refugees could be suspended in June (WFP, April 2025).

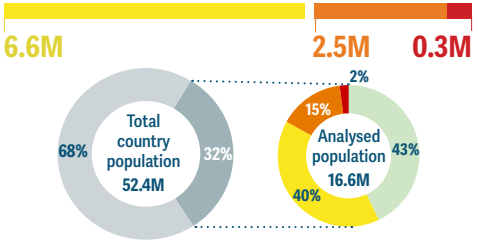
UNHCR's 2024 SENS survey found 13.8 percent of children aged 6–59 months were suffering from acute malnutrition and 48.1 percent from micronutrient-deficiency anaemia. Refugees in areas affected by weather extremes faced critical GAM levels, at 25.3 percent in Afar, 24.2 percent in Bokh/Mirqaan and 15.2 percent in Melkadida (UNHCR, May 2025).

Kenya (arid and semi-arid lands (ASALs))

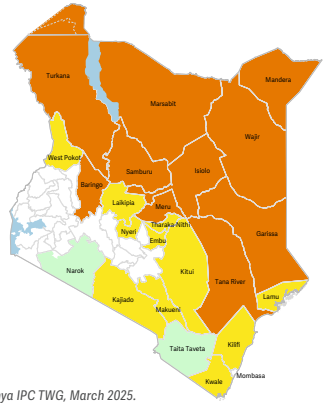
ACUTE FOOD INSECURITY | Despite improvements following the 2020–2023 drought, climatic shocks and elevated food prices sustain high levels of acute food insecurity.

APRIL–JUNE 2025

2.8M people or **17%** of the analysed population were projected to face high levels of acute food insecurity in the ASALs. Of them, about 292 000 were in Emergency (IPC Phase 4).



This represents a 46 percent increase since the 2024 peak, with Baringo, Garissa, Isiolo, Mandera, Marsabit, Meru, Samburu, Tana River, Turkana and Wajir counties expected to be in Crisis (IPC Phase 3) based on a forecast poor March to May 2025 rainy season. While the rains ultimately improved pasture and water availability in some areas, their erratic distribution and prolonged dry spells disrupted crop development, leading to 40–70 percent below-average production in agropastoral areas (IPC, September 2025).



Source: Kenya IPC TWG, March 2025.

ACUTE FOOD INSECURITY, 2019–2025

A protracted food crisis. Kenya's ASALs have been included in all nine editions of the GRFC.

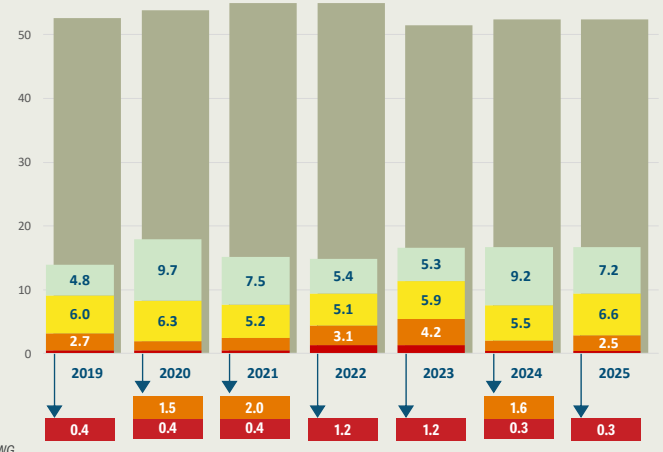
Since 2016, the number of people facing high levels of acute food insecurity (IPC Phase 3 or above) has fluctuated, with a sharp rise during the severe and widespread 2020–2023 drought emergency, reaching 4.4 million in 2022 and peaking at 5.4 million in 2023. Prior to the drought, the highly food-insecure population ranged from 1.3 million to 3.4 million, the latter recorded in 2017 during the peak of the previous regional drought.

In 2022 and 2023, the number of people in Emergency (IPC Phase 4) also rose significantly to around 1.2 million, compared with 0.4–0.5 million in earlier years. Beyond drought, other key drivers of food insecurity included flooding, localized conflict and insecurity, high food prices, and economic shocks linked to COVID-19 and the global market impacts of the war in Ukraine.

With the end of the drought in 2023, food security outcomes improved. In 2024 and 2025, the number of people in Crisis or worse (IPC Phase 3 or above) returned to pre-drought levels.

Kenya's ASAL region remains severely underdeveloped, with limited access to infrastructure and public services, and is frequently affected by climatic extremes. It also records the highest poverty rates in the country, reaching 82.7 percent in Turkana, 72.9 percent in Mandera, and 71.9 percent in Samburu in 2022 (World Bank, November 2010; KNBS, January 2024).

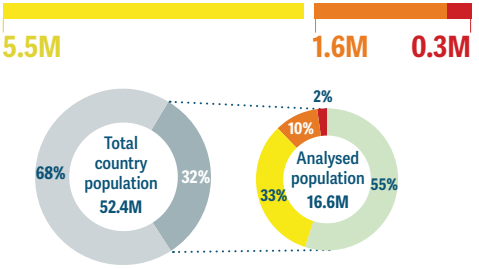
Peak numbers of people (in millions) by phase of acute food insecurity, 2019–2025



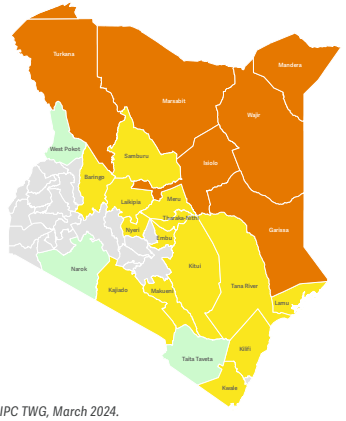
Source: Kenya IPC TWG.

PEAK 2024 (FEBRUARY–MARCH)

1.9M people or **12%** of the analysed population faced high levels of acute food insecurity in the ASALs. Of them, almost 300 000 were in IPC Phase 4.



This marked a significant improvement from the 2023 peak, when 5.4 million people were estimated to face high levels of acute food insecurity, largely due to prolonged drought. Improved rainfall boosted crop and livestock production. However, acute food insecurity persisted due to flooding, high food prices, and localized resource-based conflict.



Source: Kenya IPC TWG, March 2024.

1 - None/Minimal | 2 - Stressed | 3 - Crisis | 4 - Emergency | 5 - Catastrophe/Famine | Population analysed | Population not analysed | Total population

Kenya (ASALs)

DRIVERS 2024–2025

Weather extremes While above-average October–December 2023 rains supported improved agricultural production and reduced the 2020-2023 drought-induced food insecurity, they also triggered significant flooding. These floods caused livestock losses, damaged infrastructure, and displaced populations, driving food insecurity during February–March 2024 (IPC, March 2024). The March to May 2024 long rains were also well above average, causing flooding that affected 306 500 people (OCHA, June 2024).

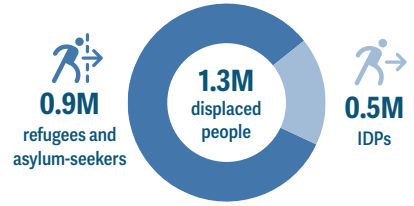
In contrast, the October–December 2024 short rains had a late onset, erratic distribution, and high spatial and temporal variability. Many ASAL areas received below-average rainfall, hindering agricultural activities, limiting pasture regeneration, and reducing water availability. Intense, short-lived downpours also caused flash floods that impacted livelihoods (IPC, March 2025).

Though the March to May 2025 rains improved pasture and water availability, supporting good livestock body conditions, their erratic distribution and prolonged dry spells disrupted crop development, leading to 40–70 percent below-average production in agropastoral areas. The forecast below-average October to December 2025 rains are expected to further compromise agricultural production and keep staple food prices elevated (IPC, September 2025).

Conflict/insecurity In 2024 and 2025, conflicts, including human-wildlife interactions and resource-based disputes, were reported across various counties, primarily affecting pastoral communities. These conflicts caused livestock losses and limited farmers' access to fields, negatively impacting agricultural production (IPC, March 2024; IPC, March 2025).

Economic shocks Elevated food prices remained a key driver of acute food insecurity. Strong demand, and high production and marketing costs linked to elevated fuel prices and expensive cross-border imports drove high prices (IPC, March 2024 and September 2025). As of May 2025, maize prices were 33 percent higher than the same period in 2024, due to reduced 2024 cereal production (FAO, June 2025).

DISPLACEMENT



Source: UNHCR Nowcasted estimate, July 2025; IOM DTM, December 2024.

Refugees As of May 2025, Kenya hosted about 858 000 refugees and asylum seekers, representing a 16 percent increase since 2024. The majority are from Somalia (57 percent) and South Sudan (23 percent), with women and children accounting for 76 percent of them. Close to 87 percent of refugees and asylum seekers reside in camps – in Dadaab in Garissa, on the border with Somalia, and Kakuma in Turkana, near the border with South Sudan, where resources and livelihoods are scarce. Around 13 percent live in urban areas (WFP, March 2025; UNHCR, June 2025).

Acute food insecurity among refugees remains a major concern, driven in part by restricted economic opportunities linked to Kenya's encampment policy and declining resettlement options, despite the adoption of the progressive Refugee Act 2021 (WFP, March 2025). Persistent funding shortfalls exacerbate the situation, with a prioritization approach planned from August 2025, under which vulnerable households are expected to receive only 20-40 percent of the full food ration (WFP, June 2025). Malnutrition levels also remain high, with the GAM prevalence among refugee children, and pregnant and breastfeeding women estimated to be 13 percent (UNHCR, May 2025).

IDPs By the end of 2024, 484 300 people remained internally displaced across Garissa, Mandera, Turkana and Wajir counties, due to a combination of factors, including conflict – especially intercommunal clashes – as well as disasters like droughts and floods, and limited access to basic services, notably in Garissa and Turkana (IOM, December 2024, January 2025, February 2025).

ACUTE MALNUTRITION

Despite a marginal overall improvement compared with the same period in 2024, trends across the different counties are mixed.

Of the analysed areas, Baringo (Tiaty), Garissa, Mandera, Marsabit (North Horr and Laisamis), Samburu, Turkana and Wajir were in a Critical situation (IPC AMN Phase 4), while Isiolo, Tana River and West Pokot were in Serious (IPC AMN Phase 3) from March to June 2025.

From March to June 2025, the situation was projected to worsen across all areas attributed to an anticipated decline in acute food insecurity due to erratic March to May 2025 rains and prolonged dry spells. Deterioration within ongoing IPC Phase 4 was expected in Baringo (Tiaty), Turkana, Marsabit (North Horr and Laisamis), Samburu and Mandera and in IPC AMN Phase 3 in Isiolo, Tana River and West Pokot. Garrissa and Wajir were projected to shift from IPC AMN Phase 3 to IPC AMN Phase 4.

CONTRIBUTING FACTORS 2024–2025

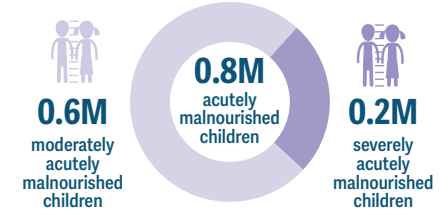
Lack of food/ inadequate diets High levels of acute food insecurity continue to drive poor food consumption. Dietary intake among children aged 6–23 months is also low. In Garissa, for instance, just over 12 percent of children met the minimum dietary diversity (MDD) and only about 6 percent achieved the minimum acceptable diet (MAD). Exclusive breastfeeding rates were Critical at an estimated 15 percent in Wajir (IPC, March 2025).

Disease burden Persistent diseases remain a critical driver of recurrent acute malnutrition in the ASALs. Cases of acute respiratory infections (ARIs) rose in most counties, exceeding the long-term average in Garissa. Diarrhoea cases were also high across most areas, while malaria remains endemic in Baringo, Kajiado and West Pokot.

Inadequate services Outreaches and mass screenings, especially in hard-to-reach areas, have significantly reduced due to funding gaps. Coverage of services like Vitamin A supplementation, immunization and integrated management of acute malnutrition remains suboptimal.

Inadequate practices Less than 50 percent of households reportedly treat their water or wash their hands at critical times. Latrine coverage is estimated to be below 50 percent (IPC, March 2025).

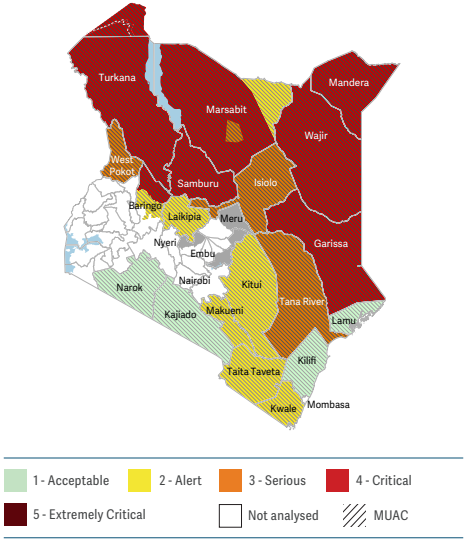
FEBRUARY 2025–JANUARY 2026



0.1M pregnant and breastfeeding women with acute malnutrition in 2025.

Source: Kenya IPC TWG, March 2025.

PEAK 2025 (MARCH–JUNE)



Source: Kenya IPC TWG, March 2025.

Somalia

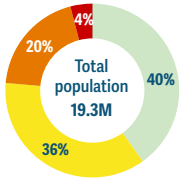
ACUTE FOOD INSECURITY | The number of people in need of urgent food and livelihood assistance has risen slightly due to weather extremes, elevated prices and conflict, compounded by reduced humanitarian assistance.

APRIL–JUNE 2025

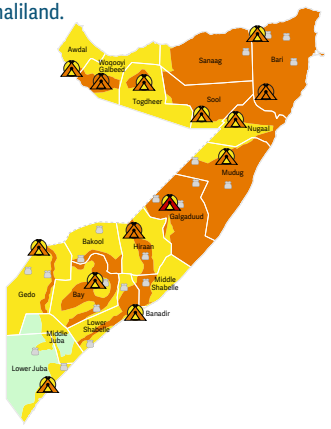
4.6M people or 24% of the total population were projected to face high levels of acute food insecurity. Of them, 0.8M are in Emergency (IPC Phase 4).

Of the total, 1.6M were IDPs.

7.0M | 3.8M | 0.8M



This marks a 4 percent increase since the 2024 peak due to an anticipated rise in internal displacement, driven by conflict and drought, amid a decline in humanitarian assistance. The situation is worst in Galgaduud, Bay, Mudug and several parts of Puntland and Somaliland.



Source: Somalia IPC TWG, February 2025.

ACUTE FOOD INSECURITY, 2016–2025

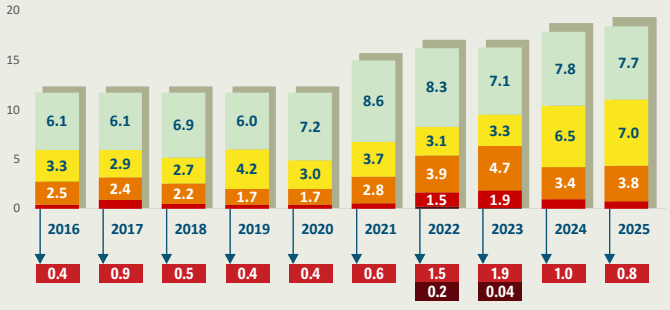
A protracted food crisis. Somalia has been included in all editions of the GRFC.

Following a spike in acute food insecurity in 2017 during the peak of a regional drought, outcomes improved and remained relatively stable until 2020. However, with the 2020–2023 drought emergency, the food crisis worsened sharply. The number of people facing high levels of acute food insecurity more than tripled from 2.1 million in 2020 to 6.6 million people in 2023. Over the same period, the population in IPC Phase 4 rose by 364 percent to 1.9 million. Populations in Catastrophe (IPC Phase 5) were also recorded during the identified peak periods in 2022 (214 000 people) and 2023 (40 300 people).

In its recent history, Somalia has experienced multiple episodes of severe food security emergencies. Several years before the launch of the GRFC, Somalia endured a Famine in 2011 that resulted in the death of nearly 260 000 people (Checchi and Robinson, May 2013). In 2017, another Famine was projected under a worst-case scenario (FSNAU, October 2016; FSNAU and FEWS NET, February 2017) but did not materialize due to increased humanitarian assistance (FSNAU and FEWS NET, March 2018). In late 2022 and early 2023, Famine was again projected among several populations, particularly in rural areas of Bay and Bakool regions, and in IDP camps in Baldoa and Mogadishu (IPC, September 2022; IPC, December 2022) but was averted due to humanitarian assistance and the positive impact of improved, yet below-average October-December rains (IPC, April 2023).

Somalia ranks 181 out of 187 countries on the ND-GAIN climate vulnerability index (University of Notre Dame, 2025) and was ranked the world's most fragile state in 2024 (FFP, February 2025). These overlapping shocks have contributed to chronically high levels of poverty, 54.4 percent nationally, with poverty incidence reaching 78.4 percent among nomadic populations (Somalia National Bureau of Statistics, February 2023).

Peak numbers of people (in millions) by phase of acute food insecurity, 2016–2025

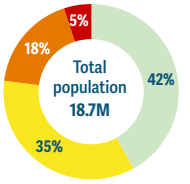


Source: Somalia IPC TWG.

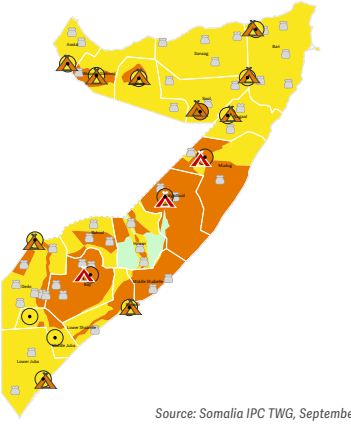
PEAK 2024 (OCTOBER–DECEMBER)

4.4M people or 23% of the total population faced high levels of acute food insecurity. Nearly 1M of them were in IPC Phase 4.

6.5M | 3.4M | 1.0M



This represented a 33 percent drop from the 2023 peak, as households were beginning to recover from the 2020–2023 drought. The worst-affected groups included vulnerable pastoral and agropastoral households, the urban poor and IDPs, with populations in Bakool, Bay, Galgaduud and Mudug estimated to face IPC Phase 4 due to loss of livelihoods and reduced humanitarian assistance.



Source: Somalia IPC TWG, September 2024.

1 - None/Minimal | 2 - Stressed | 3 - Crisis | 4 - Emergency | 5 - Catastrophe/Famine | Total population

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 | Urban settlement classification | IDPs/other settlements classification

Somalia

DRIVERS 2024–2025

Weather extremes The April to June 2024 Gu rains were average to above-average but poorly distributed leading to 45 percent below-average crop production in southern Somalia, though pasture and water availability improved in many areas (IPC, September 2024). Riverine and flash floods caused displacement and damage to infrastructure and crops, affecting at least 268 000 people (OCHA, June 2024).

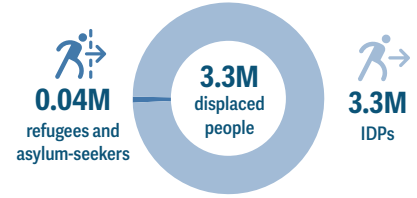
The October to December 2024 (Deyr) rains were below average particularly in central Somalia, while Middle Juba, Middle Shabelle and Hiiraan had floods. The 2024 Deyr harvest in southern Somalia was 44 percent below the 1995–2023 average (IPC et al., February 2025)

Though cumulative rainfall during the April to June 2025 Gu season was average to above-average in southern Somalia, its erratic temporal and spatial distribution raised concerns, given the largely below-average October to December 2024 rainy season. For some areas, this was a second below-average rainy season, with major impacts, particularly on pastoral livelihoods. Drought conditions persist in northern areas. Flooding also affected Jowhar, Balcad and Afgooye, while late May storms triggered flash floods in Mogadishu (FAO SWALIM, June 2025), affecting at least 84 000 people by May (OCHA, May 2025).

Conflict/insecurity Conflict and insecurity continue to displace populations, disrupt markets and limit access to assistance and livelihoods (IPC, September 2024; IPC, March 2025). In 2024, around 547 000 people were newly displaced, including 290 000 due to conflict. Between February and June 2025, an estimated 305 000 people were newly displaced by conflict (UNHCR, 2025)

Economic shocks Food prices remained elevated in some markets in 2024 due to erratic rainfall and flooding, which disrupted production and transport. By December, cereal prices were moderately higher than the five-year average in some markets. Imported food prices rose due to currency depreciation, insecurity and high transport costs (IPC, February 2025). As of April 2025, prices remained above 2024 levels, mainly due to below-average 2024 cereal production (FAO, June 2025).

DISPLACEMENT



Source: UNHCR Nowcasted estimates, July 2025; IOM, September 2024.

IDPs Conflict remains the main driver of internal displacement in Somalia, leaving many of those affected in urgent need of food, water, shelter and other critical commodities and services. Recurrent climate extremes have further compounded the situation. The majority of the IDPs (95 percent) reside in urban areas, predominantly across Banadir (32 percent), Bay (24 percent) and Gedo (7 percent) regions. Close to 96 percent of them live in IDP sites, while 4 percent are integrated within host communities (IOM, December 2024).

Compared to non-displaced populations, IDPs in Somalia face significantly higher poverty rates, compromising their economic access to food and increasing their vulnerability to acute food insecurity (FAO and IDMC, 2025). From July to September 2024, more than 30 percent of the IDP population faced IPC Phase 3 or above levels of acute food insecurity, compared with 15 percent of the non-displaced population (FAO and IDMC, 2025). Between April and June 2025, IDP populations in Hiraan, Middle Shabelle and Nugaal were projected to deteriorate from Stressed (IPC Phase 2) to Crisis (IPC Phase 3), relative to the January analysis, largely due to conflict and drought, with declining humanitarian assistance as a contributing factor (IPC, March 2025).

Refugees The majority of the refugees and asylum seekers in Somalia are from Ethiopia (65 percent) and Yemen (29 percent), with women and children accounting for 65 percent of the total. About three-quarters live in urban or peri-urban settings, primarily in northern Woqooyi Galbeed and Bari regions (UNHCR, June 2025a). Since December 2024, 140 900 refugee returnees have been recorded (UNHCR, June 2025b).

ACUTE MALNUTRITION

An additional 0.15 million children aged 6–59 months were expected to face acute malnutrition compared with the 2024 peak.

Of 44 areas analysed in January 2025, ten were projected to be in a Critical situation (IPC AMN Phase 4) and 21 in Serious (IPC AMN Phase 3), largely on the assumption of impacts of an erratic Deyr 2024 season (IPC et al., February 2025). After factoring in reduced humanitarian funding, and the likely increase in population displacement due to drought and conflict, Guban and Addun pastoral zones were expected to deteriorate from IPC AMN Phase 3 to IPC AMN Phase 4 (IPC, March 2025).

CONTRIBUTING FACTORS 2024–2025

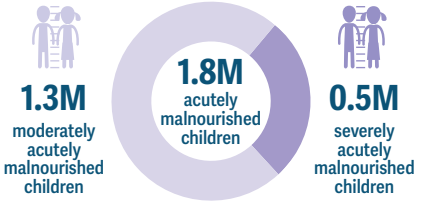
Lack of food/inadequate diets In June–July 2024, less than 10 percent of children aged 6–23 months consumed a minimum acceptable diet (MAD) (REACH, January 2025).

Disease burden In 18 out of 49 areas assessed during the 2024 post-Gu assessment, morbidity prevalence was above 20 percent, with fever, ARIs and diarrhoea the most common child illnesses reported (IPC, September 2024).

Inadequate services About 45 percent of children aged 6–59 months have never been vaccinated, mainly due to a lack of functional vaccination services and unavailability of vaccines (OCHA, January 2025). Funding constraints were expected to limit access to lifesaving nutrition interventions for approximately 300 000 children and PBWs from April to June 2025 (IPC et al., April 2025).

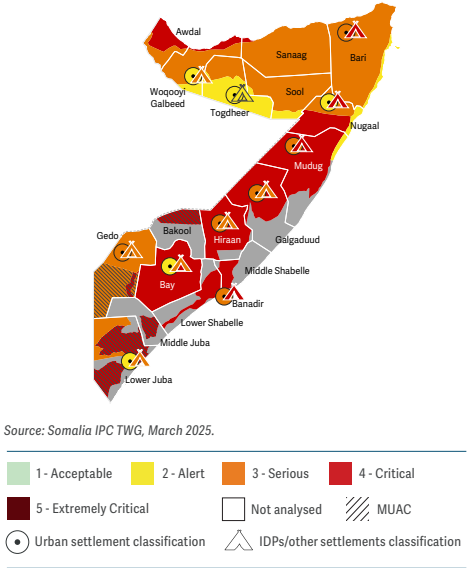
Inadequate practices Just 43 percent of households had access to improved water sources according to the 2024 post-Gu assessment. Floods during the Deyr 2023 and Gu 2024 seasons destroyed critical WASH infrastructure, increasing the risk of waterborne diseases (IPC, September 2024). An expected reduction in WASH interventions will likely exacerbate the situation (IPC, March 2025).

JANUARY–DECEMBER 2025



Source: Somalia IPC TWG, March 2025.

PEAK 2025 (APRIL–JUNE)



Source: Somalia IPC TWG, March 2025.

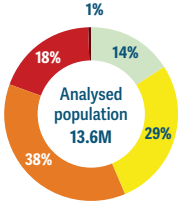
South Sudan

ACUTE FOOD INSECURITY | I Conflict is heightening extreme hunger, with the number of people in Crisis or worse (IPC Phase 3 or above) increasing between 2024 and 2025.

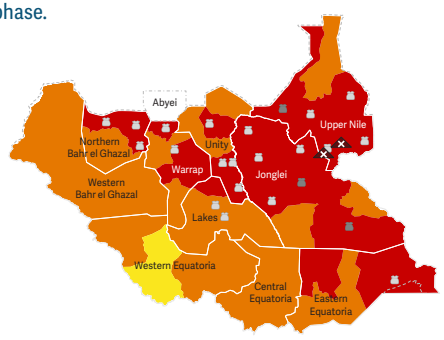
APRIL–JULY 2025

7.7M people or **57%** of the total population were projected to face high levels of acute food insecurity during the lean season. Around 2.4M of them were in Emergency (IPC Phase 4) and 83 000 in Catastrophe (IPC Phase 5). A risk of Famine was projected for Luakpiny/Nasir and Ulang counties.

3.9M | 5.2M | 2.4M | 0.08M



This represents a deterioration since the 2024 peak, primarily due to conflict displacing households, disrupting humanitarian assistance, and limiting access to farms and markets. The populations in Catastrophe (IPC Phase 5) were in Pibor county and Luakpiny/Nasir, Ulang and Malakal counties (Upper Nile) as well as returnees from the Sudan in the Greater Upper Nile region. The returnee population in IPC Phase 5 (39 000) represents nearly half of the entire population in this phase.



Source: South Sudan IPC TWG, June 2025.

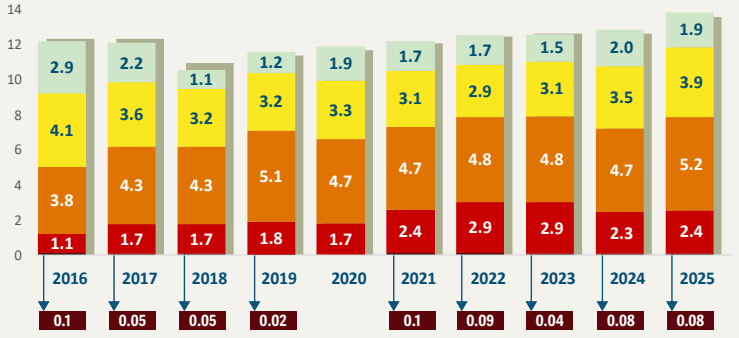
ACUTE FOOD INSECURITY, 2016–2025

A protracted food crisis. South Sudan has consistently ranked among the worst food crises in all nine editions of the GRFC. Since 2017, over half the population has faced acute food insecurity during the lean season, with pockets of people in Catastrophe (IPC Phase 5) each year. Famine was detected in South Sudan in February 2017 (in Unity state) and again in November 2020 (in Pibor county, Jonglei state). In 2018, it recorded its highest number of people in this phase – approximately 155 000 – driven by escalating conflict, mass displacement, and severely limited humanitarian access in areas such as Leer and Mayendit (IPC, February 2018). The crisis was marked by critical levels of acute malnutrition, especially among children, due to prolonged food deficits, disease outbreaks, and the collapse of health and nutrition services. These conditions were worsened by an early, extended lean season and widespread loss of livelihoods (FSIN et al., March 2018).

Since the escalation of conflict in the Sudan in 2023, the influx of around 1 million returnees and refugees has overwhelmed already strained resources, disrupted markets and intensified pressure on humanitarian services in South Sudan (IPC, June 2025). The number of people in Catastrophe (IPC Phase 5) doubled between 2023 and 2025 partially driven by the arrival of refugee returnees from the Sudan.

Poor socio-economic conditions, including limited income opportunities and access to healthcare as well as low levels of education, continue to affect human development, with South Sudan ranking the lowest globally in the 2023 Human Development Index (UNDP, May 2025). It was also ranked the world's third most fragile state in 2024 (FFP, February 2025).

Peak numbers of people (in millions) by phase of acute food insecurity, 2016–2025

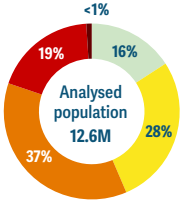


Source: South Sudan IPC TWG.

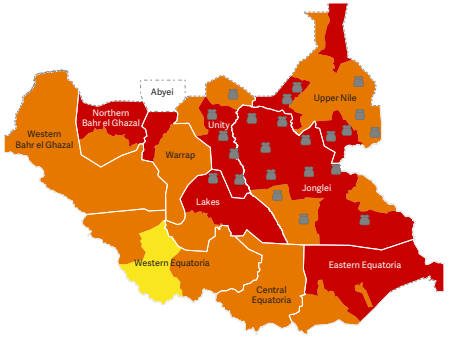
PEAK 2024 (APRIL–JULY)

7.1M people or **56%** of the total population were projected to face high levels of acute food insecurity during the lean season. This included 2.3M people in IPC Phase 4 and 79 000 in Catastrophe (IPC Phase 5).

3.5M | 4.7M | 2.3M | 0.08M



A good 2023–2024 harvest following above-average rains in most areas contributed to the slight improvement since the 2023 peak. Economic challenges, conflict and flooding, however, sustained high levels of needs on top of seasonal depletion of food stocks during the lean season. The number of people in Catastrophe (IPC Phase 5) in Jonglei and Northen Bahr el Ghazal almost doubled from 43 000 in 2023. It included 28 000 refugee returnees from the Sudan.



Source: South Sudan IPC TWG, November 2023.

1 - None/Minimal | 2 - Stressed | 3 - Crisis | 4 - Emergency | 5 - Catastrophe/Famine | Total population | At least 25% of households meet over 50% of caloric needs from humanitarian food assistance | At least 25% of households meet 25–50% of caloric needs from humanitarian food assistance

South Sudan

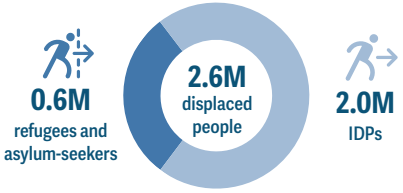
DRIVERS 2024–2025

Conflict/insecurity The impact of conflict and civil insecurity is worsening acute food insecurity in South Sudan, by forcing people to leave their homes and hindering the delivery of multi-sectoral humanitarian assistance, primarily in Luakpiny/Nasir and Ulang counties of Upper Nile, and parts of Jonglei, Lakes and Central and Western Equatoria states. Conflict and insecurity are also obstructing people's access to farmlands, grazing lands and food markets. Insecurity in border areas and potential unrest in Juba threaten essential supply chains, including the Juba-Nimule Road, which is a key trade route (IPC, June 2025). The conflict in the Sudan is having a major impact in South Sudan, with the large number of Sudanese and non-Sudanese refugees and South Sudanese refugee returnees among the most vulnerable.

Weather extremes Cereal production in 2024 was 10 percent higher than the 2023 output and 25 percent higher than the recent five-year average, following favourable rains, despite widespread flooding affecting over one million people (FAO and WFP, May 2025). Forecasts for the June to September 2025 season point to above-average rains in flood-prone areas of Jonglei (Bor South, Pibor, Nyirol, Fangak), Lakes (Awerial, Yirol East), and southeastern Upper Nile (Longochuk, Maiwut), which are likely to lead to crop and livestock losses, farm destruction and market disruptions. In these same areas, damage to fields and infrastructure was expected to negatively impact food security and nutrition, by disrupting livelihoods and trade, limiting humanitarian access, and elevating the risk of waterborne diseases, including cholera (IPC, June 2025).

Economic shocks Currency depreciation and high food prices continue to erode household purchasing power, especially during the lean season when reliance on markets peaks. Increased transport costs and taxes, disruption of supply routes from the Sudan, and a reliance on costly food imports from Uganda and Kenya continued to limit economic access to food (IPC, June 2025). In May 2025, retail prices of sorghum and maize remained high, that is, 2–4 times higher than year-earlier levels (FAO, June 2025).

DISPLACEMENT



Source: UNHCR Nowcasted estimates, July 2025; IOM, February 2025.

IDPs Since December 2013, conflict and instability have driven mass internal displacement across South Sudan. In 2024, conflict displaced 269 000 people within the country, especially in Central and Western Equatoria and Upper Nile. Seasonal floods triggered a further 423 000 IDPs, with Jonglei, Warrap and Unity states the most affected (IDMC).

Between March and July 2025, 178 000 people were internally displaced, mainly in Upper Nile, following the escalation of conflict (UNHCR, July 2025).

Returnees Between April 2023 and July 2025, around 0.8 million returnees arrived from the Sudan, the majority intending to settle in Upper Nile (UNHCR and IOM). Most face a critical food and nutrition crisis. From April–July 2025, 85 percent were in IPC Phase 3 or above, including 39 000 in Catastrophe (IPC Phase 5) (IPC, June 2025).

Refugees The majority (95 percent) of the refugees and asylum seekers are from the Sudan, with smaller numbers from Democratic Republic of the Congo, Ethiopia and Eritrea. About 63 percent live in camps, 25 percent in urban settings and 12 percent in rural areas. Since April 2023, over 350 000 Sudanese refugees have arrived in the country (UNHCR, June 2025).

Funding shortfalls in 2024 forced WFP to adopt a vulnerability targeting approach, maintain 50 percent food ration cuts, even for new arrivals from the Sudan, and to deprioritize 183 000 less vulnerable refugees (WFP, March 2025). A 2024 SENS survey showed the prevalence of acute malnutrition in Doro camp had increased from 9.5 percent in 2022 to 17.3 percent (UNHCR et al., July 2025).

ACUTE MALNUTRITION

The nutrition situation is worsening, driven by conflict, higher disease burden and reduced humanitarian assistance among other factors.

Out of the 80 counties assessed, 11 are expected to shift to a worse-off phase of acute malnutrition since November 2024 analysis – Luakpiny/Nasir and Ulang from Critical (IPC AMN Phase 4) to Extremely Critical (IPC AMN Phase 5), Gogrial East, Tonj North and Tori from Serious (IPC AMN Phase 3) to Critical (IPC AMN Phase 4), and five others from Alert (IPC AMN Phase 2) to Serious (IPC AMN Phase 3). An additional 42 counties are projected to deteriorate further, but within the same phase, including Baliet which will deteriorate within Extremely Critical (IPC AMN Phase 5). Nine will remain in their previous classifications (IPC, June 2025).

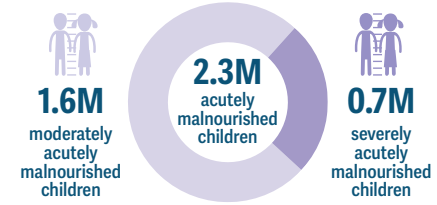
CONTRIBUTING FACTORS 2023–2024

Lack of food/inadequate diets Hunger at the household level is driving poor nutrient intake including among children. Based on the 2024 FSNMS, only 2.1 percent of children aged 6–23 months received a minimum acceptable diet (MAD) (WFP et al., April 2025).

Disease burden Malaria remains the leading cause of morbidity, accounting for 66.8 percent of illnesses. In 2024, 3.8 million malaria cases were reported (WHO and MoH South Sudan, March 2025). In October 2024, the Ministry of Health declared a cholera outbreak in Renk, Upper Nile State. By 13 December, nearly 4 000 cumulative cases had been reported across the country (OCHA, December 2024).

Inadequate services Only 44 percent of the population live within reach of health facilities, with rural populations disproportionately affected (OCHA, December 2024). Conflict and reduced humanitarian funding are limiting the scale of nutrition and WASH interventions (IPC, June 2025).

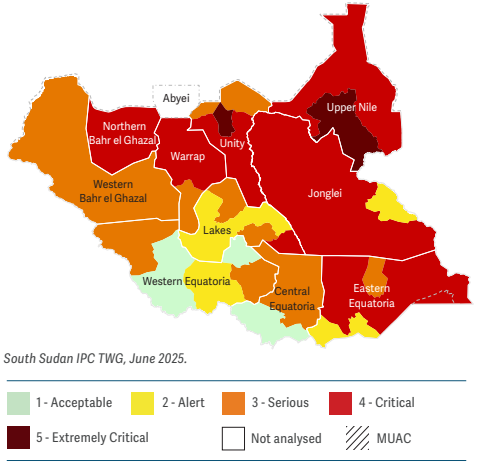
JULY 2024–JUNE 2025



1.2M pregnant and breastfeeding women with acute malnutrition in 2023–2024.

South Sudan IPC TWG, June 2025.

PEAK 2025 (APRIL–JUNE)



South Sudan IPC TWG, June 2025.

Inadequate practices Low access to safe drinking water and high rates of open defecation exacerbate the risk of diseases like acute watery diarrhoea, especially in flood-prone areas (IPC, November 2024).

Sudan

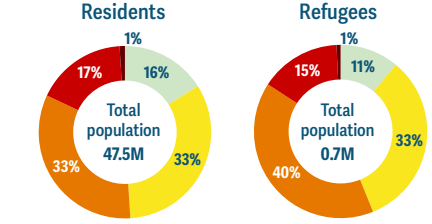
ACUTE FOOD INSECURITY | In 2024, this food crisis reached the highest levels of severity in its IPC history, driven by the devastating conflict.

DECEMBER 2024–MAY 2025

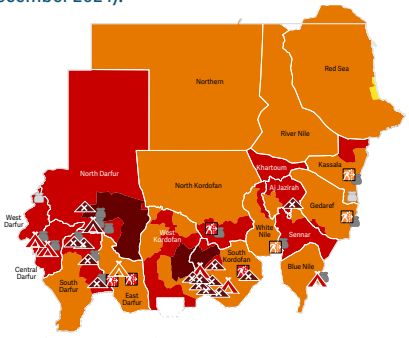
24.6M people or **51%** of the total population were projected to face high levels of acute food insecurity during the post-harvest season. Of them, 8.1M were in Emergency (IPC Phase 4) and 0.6M in Catastrophe (IPC Phase 5). Famine and a risk of Famine was projected for several areas in the country.

Of the total, 1.2M were IDPs.

15.6M | 15.9M | 8.1M | 0.6M



While agricultural production recovered compared with 2024, significant gaps remain with conflict disrupting trade and supply lines, and inflating prices. Populations in high-conflict areas and displaced households remain particularly vulnerable, due to disrupted livelihoods and limited access to essential goods and services (IPC, December 2024).



Source: Sudan IPC TWG, December 2024.

ACUTE FOOD INSECURITY, 2016–2025

A protracted food crisis. The Sudan has been included in all editions of the GRFC, ranking among the ten largest crises in all but one. The number of people in Crisis or worse (IPC Phase 3 or above) rose nearly fivefold between 2016 and 2023, from 4.4 million to 20.3 million, following several consecutive below-average rainy seasons devastating agricultural production and livestock, a severe economic crisis and the escalation of conflict in April 2023 (and modest increase in population analysed from 89 percent to 100 percent). Since 2024, the country has had populations in Catastrophe (IPC Phase 5).

Conflict has resulted in economic collapse, erosion of state capacity and destruction of critical infrastructure. Poverty rates have more than doubled from 33 percent in 2022 to 71 percent in 2024 (World Bank, April 2025).

The Sudan ranked 176th out of 193 countries/territories on the Humanitarian Development Index in 2023, placing it in the Low human development category (UNDP, May 2025). The country is categorized as Very High in the INFORM Risk Index (EC-JRC, March 2025) and was ranked the world's second most fragile state in 2024 (FFP, February 2025).

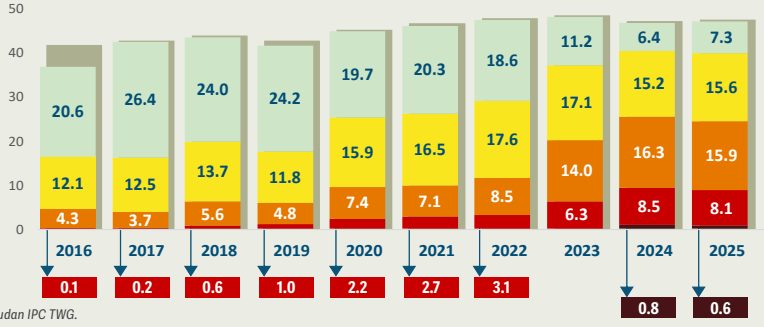
Famine and risk of Famine

Famine (IPC Phase 5) – first detected in Zamzam IDP camp, North Darfur, in July 2024 – persisted and spread to Abu Shouk and Al Salam camps, as well as the Western Nuba mountains by October to November 2024. From December 2024 to May 2025, it was projected to persist in these areas and expand to the North Darfur localities of Um Kadadah, Melit, El Fasher, At Tawisha, and Al Lait. Seventeen other areas across Al Jazirah, the Central Nuba mountains, North and South Darfur (where high influxes of IDPs are likely), and Khartoum faced risk of Famine* (IPC Phase 5) (FRC, December 2024).*

The food security and nutrition situation is expected to deteriorate significantly during the lean season (July to September 2025). Concern is highest for IDPs and people living in the Famine-affected areas of North Darfur and South Kordofan and in other areas at risk of Famine in Greater Darfur and Kordofan (IPC Alert, July 2025).

* The Government of Sudan did not endorse this analysis.

Peak numbers of people (in millions) by phase of acute food insecurity, 2016–2025



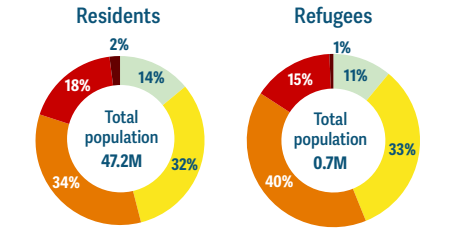
Source: Sudan IPC TWG.

PEAK 2024 (JUNE–SEPTEMBER)

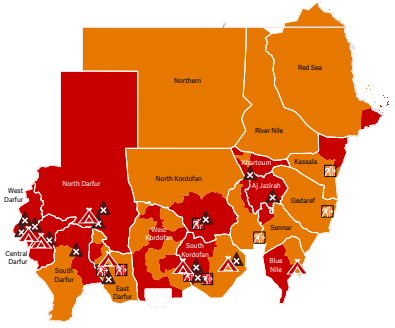
25.6M people or **54%** of the total population were projected to face high levels of acute food insecurity during the lean season. Of them, 8.5M people were in IPC Phase 4 and 0.8M in Catastrophe (IPC Phase 5).

Of the total, 1.5M were IDPs and refugees.

15.2M | 16.3M | 8.5M | 0.8M



This marked the highest level of acute food insecurity in the Sudan ever recorded by the IPC since its inception. This represents a sharp deterioration since 2023 when 20.3 million faced high levels of acute food insecurity as escalating conflict triggered mass displacement, disrupted supply chains, markets and agricultural activities, and severely constrained humanitarian access (IPC, June 2024).



Source: Sudan IPC TWG, June 2024.

1 - None/Minimal | 2 - Stressed | 3 - Crisis | 4 - Emergency | 5 - Catastrophe/Famine | Total population | IDPs/other settlements classification | At least 25% of households meet over 50% of caloric needs from humanitarian food assistance

Sudan

DRIVERS 2024–2025

Conflict/insecurity In December 2024, the Sudan ranked as the fourth deadliest conflict in the world, based on the ACLED conflict index (ACLED, December 2024). Conflict has continued to devastate livelihoods, destroy critical infrastructure, disrupt essential services and trade, and trigger mass displacement, with over 10.1 million people estimated to be internally displaced as of end of June 2025 (IOM DTM, July 2025). Constrained humanitarian access is also a major challenge – for instance, nearly no humanitarian assistance has reached Al-Fasher since March 2025, despite WFP confirming the arrival of supplies in Tawila (FEWS NET, June 2025).

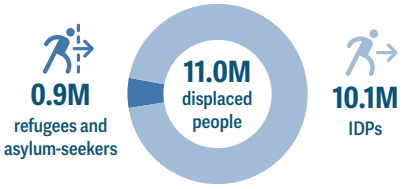
Drone strikes in the east, including Port Sudan and Khartoum, signal a significant shift towards remote targeting of infrastructure. These attacks on airports, fuel storage facilities, and power plants threaten to significantly disrupt the country's main corridors for humanitarian supplies, commercial imports, and trade flows (FEWS NET, June 2025).

Economic shocks Though cereal prices seasonally declined by February 2025 – following the 2024 main season harvests – from record levels in September 2024, they remained over four times higher than pre-conflict levels by April, partly due to trade disruptions (FAO-GIEWS, May 2025). Steepest price increases were recorded in North Darfur, where market functionality deteriorated further (FAO, June 2025).

Due to low foreign reserves, the local currency continued to depreciate against the USD. By May 2025, it had fallen by 77 percent since March 2023 – driving up the cost of imported commodities and sustaining high inflation.

Weather extremes Flooding during the June–September 2024 season damaged over 1.7 million hectares of cropland (FAO, October 2024). Forecast above-average rains during the 2025 season offer positive prospects for crop and livestock production, but also raise concerns for increased risk of flooding, especially for IDPs located in these areas (IPC, June 2025).

DISPLACEMENT



Source: UNHCR Nowcasted estimates, July 2025; IOM, July 2025.

IDPs The Sudan remains the world's largest internal displacement crisis, with 10.1 million IDPs as of June 2025 – including 7.7 million displaced since April 2023. This reflects a 13 percent decrease from 11.6 million in January 2025, largely due to return movements, especially in Al Jazirah, Sennar and Khartoum states. Most IDPs are concentrated in North, South and Central Darfur. Khartoum is the main state of origin followed by South and North Darfur (IOM DTM, July 2025).

Between December 2024 and May 2025, Famine (IPC Phase 5) was projected to persist in Zamzam, Abu Shouk and Al Salam IDP camps, as well as in the Western Nuba mountains, affecting both IDPs and residents. Risk of Famine was also expected in areas likely to experience significant IDP influxes in North and South Darfur (FRC, December 2024).*

Refugees The number of refugees hosted in the Sudan has reduced from over 1.1 million in March 2023 to about 0.9 million by July 2025 (UNHCR, July 2025). Most are from South Sudan (74 percent). Nearly half (49.9 percent) reside in White Nile state and 69 percent live in camps (UNHCR). Despite the volatile situation, the country received over 43 500 refugees between the start of the year and end of May 2025, including 41 000 South Sudanese who arrived since April, following the recent escalation of conflict (UNHCR, June 2025).

Many refugees in the Sudan are unable to meet their basic food and nutrition needs, with 51 percent of those analysed by the IPC projected to face IPC Phase 3 or above between December 2024 and May 2025 (IPC, December 2024).

* The Government of Sudan did not endorse this analysis.

ACUTE MALNUTRITION

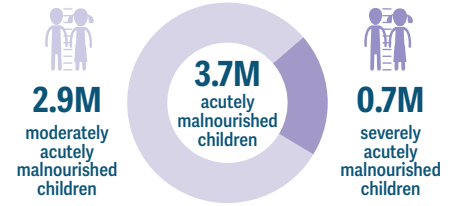
Persistent conflict is driving an alarming deterioration of an already dire nutrition situation.

Even before the conflict, the Sudan had a global acute malnutrition (GAM) rate of 13.6 percent among children aged 6–59 months – one of the highest globally (OCHA, December 2024). Nutrition surveys in 2024 pointed to a worsening situation, with 30 out of 38 SMART surveys revealing a GAM prevalence above the 15 percent Emergency threshold. Notably three surveys – Al Lait, At Tawisha and Um Kadadah – recorded GAM rates of 30 percent and above, reaching the Famine threshold (Sudan Nutrition Cluster, 2024).

In Zamzam camp, a September 2024 MUAC screening by Médecins Sans Frontieres (MSF) revealed a GAM rate of 33.8 percent among children aged 6–59 months, up from 29.4 percent in April, indicating a deteriorating situation (FRC, July 2024; FRC, December 2024). In the Western Nuba mountains, acute malnutrition levels exceeded the threshold for Extremely Critical (IPC AMN Phase 5), based on two SMART surveys conducted between mid-August and mid-September 2024 (FRC, December 2024).

Over half of the 21 SMART nutrition surveys conducted during the harvest and post-harvest seasons, reported GAM levels consistent with IPC Acute Malnutrition Phase 4 (Critical), with a high likelihood of pockets of populations facing even higher severity. This is a key indicator of a worsening crisis, that also raises serious concerns about the likely deterioration in acute malnutrition during the peak of the lean season, particularly in areas facing Famine or at risk of Famine where food shortages, and dwindling health, hygiene and sanitation services are resulting in cholera outbreaks (IPC, July 2025).

JULY 2023–JUNE 2024



1.2M pregnant and breastfeeding women with acute malnutrition in 2023–2024.

Source: Sudan Nutrition Sector, April 2024.

CONTRIBUTING FACTORS 2024–2025

Lack of food/ inadequate diets Children aged 6–59 months faced severe dietary deficiencies, with fewer than 20 percent receiving a minimum acceptable diet (MAD) in most areas (Sudan Nutrition Cluster, 2024).

Disease burden The country faces multiple disease outbreaks including measles, malaria, cholera, dengue fever and rubella. In many assessed areas, more than half of children had been ill in the preceding two weeks, particularly with diarrhoea (Sudan Nutrition Cluster, 2024).

Inadequate practices Access to safe drinking water and sanitation facilities varies, but they are accessible to less than 10 percent of the population in multiple areas. Unusually heavy rainfall in July–September 2024 compromised household water and sanitation facilities, especially for IDPs. In Zamzam camp, low quality drinking water contributed to acute watery diarrhoea outbreaks (IPC, June 2024; IPC, December 2024).

Inadequate services Nearly 80 percent of health facilities in conflict-affected areas, such as Al Jazirah, Kordofan, Darfur and Khartoum, and 45 percent elsewhere are barely operational or closed due to a lack of basic services and insecurity (UN, October 2024; IPC, December 2024). Vitamin A supplementation and measles vaccination coverage varied widely but was critically low in several assessed locations (Sudan Nutrition Cluster, 2024).

Uganda

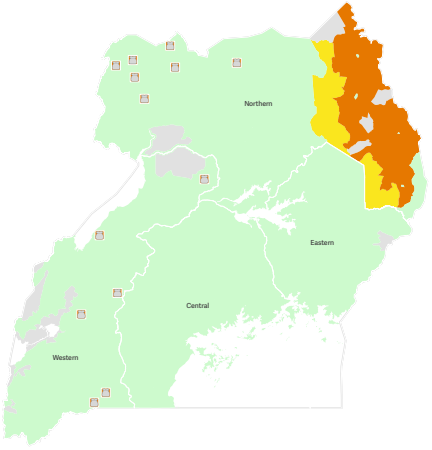
ACUTE FOOD INSECURITY | Increased food consumption gaps expected in Karamoja during the March to May 2025 lean season and in most refugee settlements.

MARCH–MAY 2025

Up to 2.0M people or 5% of the total population were projected to face high levels of acute food insecurity.

Of the total, 1.3M were refugees.

Despite a near-average 2024 maize and sorghum harvest, acute food insecurity in Karamoja was projected to deteriorate as household food stocks depleted and reliance on market purchases increased during the lean season. Among refugees, food assistance needs were expected to rise, with the exhaustion of 2024 second-season stocks by late February and continued new arrivals of people fleeing conflict in neighbouring countries. Some refugee households were projected to face Emergency (IPC Phase 4) (FEWS NET, October 2024).



Source: FEWS NET, May 2025.

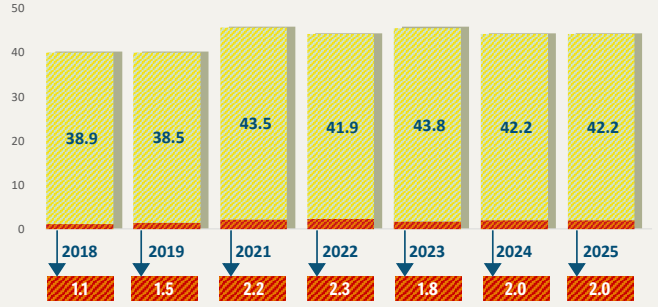
ACUTE FOOD INSECURITY, 2018–2025

A protracted food crisis. Uganda has been in all nine editions of the GRFC. Though differences in data sources and geographic coverage challenge year-to-year comparisons, the highest number of people in Crisis or worse (IPC Phase 3 or above) – 2.6 million – was recorded in 2020, largely due to the socio-economic impacts of the COVID-19 pandemic. This was despite that year's analysis focusing only on food insecurity hotspots (Karamoja, urban areas, refugee populations and their host communities) and, hence, covering just 25 percent of the population, compared with at least 87 percent in the other years.

Since then, the number of people facing high levels of acute food insecurity has remained at around 2 million, reflecting persistent vulnerabilities linked to climatic shocks affecting crop and livestock production, conflict and loss of livelihoods, particularly in Karamoja, as well as continued refugee inflows from neighbouring countries. This is except for 2023, when some improvement was noted, supported by better 2022 harvests, which eased food access.

Compounding these food security challenges are structural vulnerabilities. In 2022, the incidence of multidimensional poverty in Uganda was estimated at 42.1 percent, rising to 85 percent in Karamoja (UBOS, July 2022). The country is also ranked High in the INFORM Risk Index, indicative of exposure to humanitarian crises and disasters that could overwhelm national response capacity (EC-JRC, March 2025).

Peak numbers of people (in millions) by phase of acute food insecurity, 2018–2025



Source: FEWS NET.

1 - None/Minimal | 2 - Stressed | 3 - Crisis | 4 - Emergency | 5 - Catastrophe/Famine | Population analysed | Population not analysed | Total population

At least 25% of households meet 25–50% of caloric needs from humanitarian food assistance

PEAK 2024 (JULY–SEPTEMBER)

Up to 2.0M people or 5% of the total population were projected to face high levels of acute food insecurity.

Of the total, 1.3M were refugees.

This represented a slight increase from the 2023 peak (April to June), as IPC Phase 3 outcomes persisted in parts of Karamoja, driven by consecutive seasons of poor production and limited sources of income. The worst-affected households faced IPC Phase 4. Among refugee populations, food availability and access remained severely constrained by poor first-season harvests, heavy reliance on market purchases, and limited livelihood options, compounded by inadequate humanitarian assistance (FEWS NET, August 2024).

Source: FEWS NET, February 2024.

Drivers 2024–2025

Weather extremes In bimodal areas, heavy rains in October helped offset deficits at the start of the September to November 2024 season. Localized central and southwestern parts, however, recorded below-average rains (FEWS NET, October 2024). The March to June 2025 season was erratic with delayed onset and April dryness, causing crop wilting during flowering. Replanting was needed in central regions, and while short-cycle crops were expected to mature, long-cycle crops faced mixed prospects (FAO-GIEWS, May 2025).

In unimodal Karamoja, April to September 2024 rains were cumulatively above average, but unevenly distributed, causing localized floods and water logging in some areas, and moisture stress in others (FEWS NET, October 2024). The 2025 season started slightly late, but forecasts indicate above-average rains, which could benefit crops and rangelands, but also heighten the risk of flooding, especially in low-lying areas (FAO-GIEWS, May 2025).

Uganda

Conflict/insecurity In Karamoja, while armed attacks have declined following disarmament efforts since 2020, cattle raids persist – particularly in remote areas – threatening livestock ownership and typical livelihood activities. Livestock trade routes continue to be restricted to curb transportation of stolen animals, as well as theft during transit (FEWS NET, October 2024; IPC, June 2024).

Conflict in neighbouring countries continues to drive refugee inflows into Uganda, with rising numbers from the Sudan since April 2023 and a sharp increase in Congolese arrivals, due to escalating violence in eastern Democratic Republic of the Congo in early 2025 (FEWS NET, October 2024; UNHCR, April 2025).

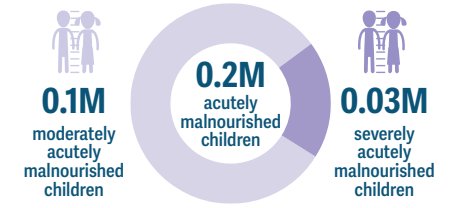
Economic shocks After declining in late 2024 – due to stocks from bimodal first season harvests and improved production in Karamoja – cereal prices began to seasonally rise in early 2025 (FAO-GIEWS, May 2025). In April, maize prices were 40 percent higher than the same time in 2024, driven by concerns over performance of the first season harvest, and sustained export demand (FAO, June 2025).

ACUTE MALNUTRITION IN KARAMOJA, HOST DISTRICTS AND AMONG REFUGEES

The situation was expected to seasonally improve during the harvest period, despite heightened vulnerability among some Karamoja populations and refugees.

Between March and October 2024, two of Karamoja's nine districts – Amudat and Kaabong – were classified in Critical (IPC AMN Phase 4), while three – Karenga, Kotido and Moroto – were classified in Serious (IPC AMN Phase 3). Between November 2024 and February 2025, the situation was projected to improve due to seasonal harvests, but most districts were projected to remain in the same phases, except Amudat, which was expected to improve from IPC AMN Phase 4 to IPC AMN Phase 3 (IPC, June 2024). In refugee settlements, Adjumani was projected to have the highest number of acutely malnourished children aged 6–59 months (5 000) between April 2024 and March 2025 (IPC, December 2024).

KARAMOJA: MARCH 2024–FEBRUARY 2025; REFUGEES AND HOST DISTRICTS: APRIL 2024–MARCH 2025



18 700 pregnant and breastfeeding women with acute malnutrition in 2024.

Source: Uganda IPC TWG, June and December 2024.

CONTRIBUTING FACTORS 2024–2025

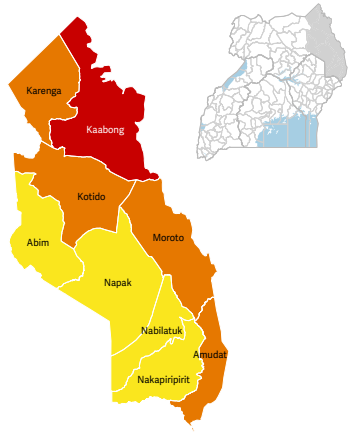
Lack of food/inadequate diets Only 5.9 percent of children aged 6–23 months received a minimum acceptable diet (MAD), deemed Extremely Critical. Karenga district had the lowest MAD, at 1.6 percent between November 2024 and February 2025 (IPC, June 2024).

Disease burden Malaria prevalence in Karamoja rose to 12.3 percent in 2024 (up from 11.2 percent in 2023), while that of diarrhoea was estimated at 10 percent. Anaemia among children and women remains a a major public health problem, with all districts recording a prevalence of 20 percent or more (IPC, June 2024). The prevalence of anaemia exceeded 50 percent, considered a severe public health problem, in Kiryandongo and Kyangwali refugee settlement, where malaria cases were most prevalent, at 22.5 percent (IPC, December 2024).

Inadequate services Funding cuts have affected the availability of care for malnourished children, with community-level coverage for screening and treatment ranging from 4 to 46 percent across Karamoja (IPC, June 2024).

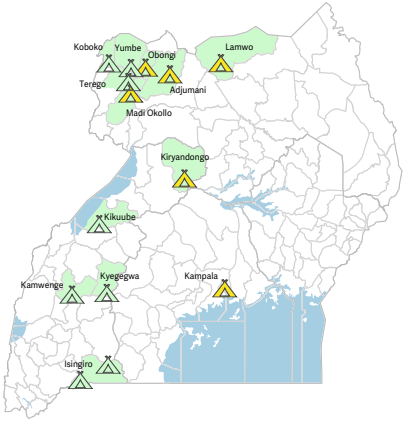
Inadequate practices Only 24 percent of households in Karamoja have access to sufficient water, and just 11.7 percent have access to improved sanitation, making them highly susceptible to diseases (IPC, June 2024).

KARAMOJA PEAK 2025 (NOVEMBER 2024–FEBRUARY 2025)



Source: Uganda IPC TWG, June 2024.

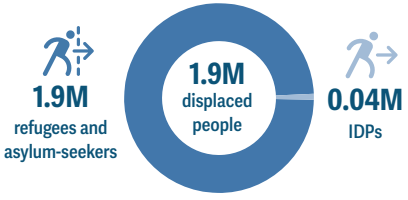
REFUGEE AND HOST DISTRICTS PEAK 2025 (OCTOBER 2024–MARCH 2025)



Source: Uganda IPC TWG, December 2024.

1 - Acceptable | 2 - Alert | 3 - Serious | 4 - Critical | 5 - Extremely Critical | Not analysed | IDPs/other settlements classification

DISPLACEMENT



Source: UNHCR Nowcasted estimates; July 2025. IOM, June 2025.

Refugees Uganda hosts the largest refugee population in Africa, with over 1.9 million refugees, mainly from South Sudan (53 percent) and Democratic Republic of the Congo (33 percent). Women and children make up 78 percent of the total population (UNHCR, July 2025). Since the start of the Sudan conflict in April 2023, 81 300 Sudanese refugees have arrived in Uganda (UNHCR, July 2025).

Limited access to livelihood options, arable land, and reduced humanitarian funding have left many refugees food insecure. In recent years, WFP has progressively reduced food rations to refugees across all 13 settlements. In early 2025, it announced that between April and May, rations would be reduced from 100 percent to 60 percent, while some less vulnerable refugees would receive just 22 percent of the full ration, as part of its prioritization strategy (WFP, February 2025).

Between October 2024 and May 2025, most refugee settlements, particularly in the north, were projected to be in IPC Phase 3. Though Kyaka II, Rwamwanja and Kyangwali in the southwest were projected to be in IPC Phase 2, significant proportions of their populations were expected to face IPC Phase 3 (FEWS NET, October 2024).

Technical notes

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Technical notes

GRFC PRODUCTION PROCESS

The GRFC process

This report is a by-product of the annual GRFC, and it is produced as a collaboration between the Food Security Information Network (FSIN) and the Intergovernmental Authority on Development (IGAD), a regional economic community seeking to assist and complement the efforts of its eight member states – Djibouti, Eritrea, Ethiopia, Kenya, Somalia, South Sudan, the Sudan and Uganda – to achieve food security and environmental protection, peace and security, and economic cooperation and integration through increased cooperation.

The GRFC is a global public good that serves as the reference document for acute food insecurity, acute malnutrition and displacement in countries/territories with food and nutrition crises.

In order to provide independent and consensus-based evidence and analysis, it follows a systematic and transparent process that consolidates data from a range of sources that all use rigorous methodologies.

1. Preliminary work

Initial GRFC technical consultations lay the groundwork for the production process.

The GRFC production process is launched in September/October each year with a three-day in-person workshop held in Rome, Italy, attended by all GRFC partners. The agenda includes sessions with the food security, displacement, and nutrition technical working groups (TWGs), as well as the senior committee, to:

- reaffirm partner organizations' engagement and responsibilities;
- confirm the purpose and scope of the report;
- agree on key definitions, including for food crises and, since 2024, nutrition crises;
- provide initial guidance on content and structure;
- agree and endorse country selection and data/analysis criteria; and
- agree on the report workplan and launch date.

2. Research, analysis and production

Through the fourth quarter of each year, the Food Security Information Network (FSIN) facilitates TWG discussions.

The food security TWG selects countries/territories with food crises as per the GRFC selection criteria on page 2, and identifies the period and figures corresponding to the peak number of people facing high levels of acute food insecurity. Acute food insecurity (AFI) figures are recorded in the GRFC master AFI data matrix. This matrix contains historical data, published in the GRFC, for AFI peaks since 2016.

The nutrition TWG identifies the nutrition crises in the countries/territories with food crises, and acute malnutrition (AMN) estimates are recorded in the GRFC master AMN matrix. This matrix contains data on outcome level and contributing factors since 2018.

The FSIN:

- compiles data on countries/territories that may be facing food crises, nutrition crises or have acute food insecurity data on displaced populations;
- drafts content and analysis;
- develops layout, maps and other infographics;
- manages the production schedule; and
- chairs TWG, and senior committee, meetings.

The food security TWG:

- selects countries/territories with food crises based on consensually established criteria;
- validates the reliability/ relevance of the data source and methodology;
- identifies and endorses peak acute food insecurity estimates;
- identifies and endorses peak acute food insecurity projections;
- endorses the main driver for each country/territory;
- defines key content for the acute food insecurity narrative and indicators to support analysis and findings; and
- discusses possible infographics to best communicate content.

The nutrition TWG:

- develops and endorses criteria to identify countries/territories with nutrition crises or nutrition concerns from the list of countries/territories with food crises;
- identifies and endorses acute malnutrition data;
- identifies and endorses key contributing factors to acute malnutrition in countries/territories identified as having nutrition crises and nutrition concerns;
- reviews and ensures consistency of nutrition content throughout the report and endorses nutrition indicators to be featured; and
- discusses possible infographics to best communicate content.

The displacement TWG:

- identifies countries/territories with acute food insecurity data on forcibly displaced persons and migrants from the countries/territories with food crises;
- identifies and endorses data on displacement, acute food insecurity and acute malnutrition related to these populations;
- defines key content and indicators; and
- discusses possible infographics to best communicate content.

The senior committee:

- endorses country/territory selection, data sources, methodologies and key content; and
- provides guidance and/or decisions where there is a lack of consensus or need for strategic orientation.

3. Review and finalization of the report

To ensure transparency, all closed and draft files are shared and accessible on SharePoint.

The TWGs:

- conduct a technical review the first draft, followed by discussion of the key issues arising and amendments required; and
- ensure technical accuracy and internal consistency of the drafts.

The senior committee:

- reviews the report in page layout to ensure consistency of the overall structure and messaging of the report; and
- adjudicates any technical issues that may have been raised by the TWGs. It may refer issues back to the TWGs for further analysis and consideration.

4. Institutional clearance

Each member of the senior committee validates their endorsement of the findings of the report as per their institutional internal processes.

5. Release and dissemination

The dissemination plan and related communications and advocacy campaign for the GRFC is coordinated by FSIN in collaboration with the Global Network Against Food Crises (GNAFC). It is built on the communications network of the GRFC partnership, which includes focal points from partner organizations.

The outreach and dissemination strategy is structured in three phases:

Pre-launch

A social media campaign and stakeholder outreach create momentum ahead of the report's release.

Launch

A media and social media campaign, along with a launch event and direct outreach to stakeholders, maximizes the report's visibility and ensures that it reaches key stakeholders. GRFC partners play a key role in amplifying the findings. Each partner integrates relevant messages into their own communications, ensuring dissemination within their networks and alignment with their mandates. This collective effort broadens the reach and impact of the report.

Post-launch

The media and social media campaign continues beyond the launch, distilling the key findings and deep diving into specific thematic areas.

The GRFC findings are actively integrated into relevant global, regional and national fora. Advocacy opportunities – including events, seminars and presentations – are identified and pursued in coordination with partners, leveraging their networks to sustain engagement and drive action.

The interactive version of the GRFC serves as the primary landing page, with partners directing traffic there during dissemination efforts. This also plays a role in the monitoring campaign, as FSIN tracks visits and downloads, and conducts qualitative analysis on how the report is used.

The GRFC is launched in Q2, followed by a Mid-year Update in Q3, which provides insights into key developments and emerging trends.

FSIN produces a range of supporting materials in coordination with GNAFC and partners, including:

- briefs in English, French and Spanish;
- an interactive version of the report;
- key findings and key messages;
- social media assets, talking points, Q&As, presentations, multimedia content; and
- support for the press release.

These efforts ensure that the GRFC serves as a timely and accessible resource for decision-makers, analysts and stakeholders responding to food and nutrition crises worldwide.

FSIN collaborates with regional partners to develop regional overviews with new data, ensuring a twice-yearly update in those regions where the situation evolves quickly.

Decision-making processes

The GRFC production and decision-making processes are designed with the objective of transparently producing an independent, neutral, technically rigorous and consensus-based document.

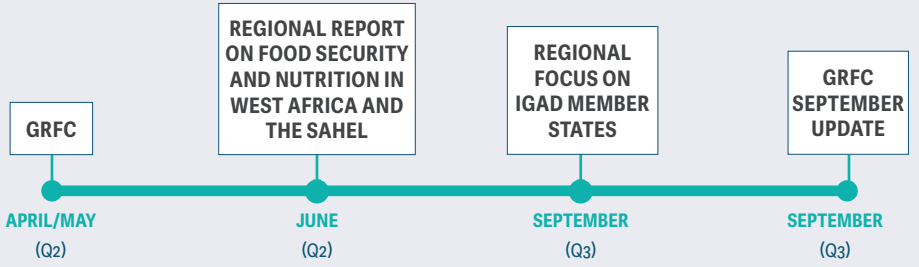
Consensus building is the primary objective.

The preferred modality of decision-making is consensus through dialogue, which is defined as 75 percent of partners in agreement with a decision. A quorum is considered to be at least 50 percent of partners. Agreement is established through a "round robin" with partners present declaring their positions and those who cannot attend providing written contributions in advance.

If consensus cannot be reached, partners may request a more formal vote.

Where there is no consensus, or the workplan necessitates an immediate decision, a vote may be triggered, including to request additional information. To be endorsed, a vote needs a 75 percent majority based on a quorum of 50 percent or more GRFC partners. Where there is a lack of consensus or majority vote, the GRFC senior committee can request that the FSIN secretariat raise issues to the FSIN steering committee for guidance, or partners can request a disclaimer.

FIG. TN.1 **FSIN publications timeline, 2025**



Definitions

The following definitions were developed by the GRFC TWGs and endorsed by the GRFC senior committee.

These definitions provide a clear framework for identifying countries/territories with food crises and with nutrition crises or concerns.

Food crisis

A food crisis is defined as 'a situation where acute food insecurity requires urgent action to protect and save lives and livelihoods at local or national levels and exceeds the national resources and capacities to respond'.

Nutrition crisis

In the GRFC 2025, FSIN and the nutrition TWG developed a definition for countries/territories with 'nutrition crises' or 'nutrition concerns'.

A nutrition crisis is 'a situation characterized by a combination of factors such as widespread lack of access to sufficient, safe and nutritious food, high morbidity, environmental disasters, conflict, poor healthcare infrastructure and inadequate practices, resulting in high levels of acute malnutrition'.

High levels of acute malnutrition are defined as:

- classification in Serious or worse (IPC AMN Phase 3 or above); or
- Global Acute Malnutrition (GAM) prevalence by weight-for-height z-score (WHZ) greater than or equal to 10 percent.

Nutrition concern

If a country/territory lacks data on acute malnutrition outcomes (GAM prevalence or IPC AMN), it can be classified as a nutrition concern.

A nutrition concern is defined as 'a situation in a country/territory with limited data on acute malnutrition outcomes where available data on contributing and contextual factors indicate high nutritional vulnerability and a risk of deterioration of the nutrition situation'.

High nutritional vulnerability is identified by the GRFC nutrition TWG considering all the following:

- Acute malnutrition risk factors: specifically, when one or more indicators across each pathway of acute malnutrition (food, health, care and services) are classified as 'high' or 'very high' according to defined thresholds;
- Contextual factors: presence of populations or areas facing Emergency or worse (IPC Phase 4 or above) levels of acute food insecurity alongside a 'high' or 'very high' INFORM Severity ranking; and
- INFORM Risk Index: 'high' and 'very high' risk scores signal severe humanitarian crisis in a country/territory.

Country selection process

The FSIN and food security TWG use the following selection criteria to identify countries/territories with a food crisis, which are then presented to the senior committee for endorsement.

The process is continuous during the year and finished on 31 December to ensure inclusiveness throughout the reporting year (in this edition 2024).

A country/territory is selected if at least one of the following criteria is met:

1. **Global Information and Early Warning System (FAO-GIEWS) list**

Countries/territories that required external assistance for food and/or faced shocks as assessed by FAO-GIEWS in 2024.

FAO-GIEWS classifies and regularly updates the list of countries requiring external assistance for food, dividing them into three categories according to the predominant driver:

- countries with an exceptional shortfall in aggregate food production and supplies;
- countries with a widespread lack of access to food; and
- countries with severe localized food insecurity.

2. **Humanitarian Needs and Response Plan (HNRP)**

Countries/territories that had an HNRP in 2024.

3. **Low-income and middle-income countries/territories that requested and received emergency assistance from FAO/UNHCR/WFP in 2024**

Countries/territories that received assistance as follows:

- from UNHCR/WFP, to at least 5 000 refugees[1];
- from FAO/WFP, in the context of a shock, to at least 0.5 percent of the country population, or 50 000 people in cases where the country population is less than 10 million; or
- in situations where over 1 million people, or 20 percent of its population, were forcibly displaced.

High-income countries – even if acute food insecurity data were available – are not included.

External assistance for logistical support, capacity building, poverty reduction or development is not considered a qualifying factor for a food-crisis response.

1 If this criterion is met, only the refugee populations in that country are included, while the host country is only selected if its resident population needed external food assistance.

Data sources and assessment methodology

The GRFC partnership evaluated the following elements for acute food insecurity data to meet the GRFC technical requirements.

Methodology

The construct of the methodology used to produce acute food insecurity estimates is evaluated to determine whether the assessment/analysis provides an estimate or a projection of acute food insecurity that considers all its dimensions. Reference is mainly made to the Integrated Food Security Phase Classification (IPC) and Cadre Harmonisé (CH) methodologies and classification and other methodologies providing a quantification of acute food insecurity levels equivalent to or an approximation of IPC/CH Phase 3 or above. For country/territory data to be included in the GRFC, all partners agree with the degree of magnitude and severity of acute food insecurity indicated by the endorsed assessment.

Timeframe

The acute food insecurity assessment/analysis must cover at least one month of the year being analysed, in this edition 2025.

Coverage

Where the acute food insecurity assessment/analysis does not cover the entire country/territory, the TWG determines whether the partial analysis is appropriate and acceptable, and ensures that such situations are clearly highlighted in the report.

Consensus and participation

The TWG evaluates the consensus-building process around the acute food insecurity estimates as well as the participation of and endorsement by national stakeholder(s). The acute food insecurity assessment/analysis should be based on a multi-stakeholder technical consensus, a convergence of evidence, data collection by a trusted actor and/or endorsed at country level by national stakeholders.

Data sources and their methodologies

The preferred source of data for estimates of acute food insecurity is the IPC/CH.

If these are unavailable, the TWGs evaluate the use of other sources of evidence as per the following (in order of priority):

- The Famine Early Warning Systems Network (FEWS NET) analyses;
- WFP Consolidated Approach for Reporting Indicators of Food Security (CARI); and
- Humanitarian Needs and Response Plan (HNRP) estimates of people in need in the food security sector.

These sources are not necessarily comparable with IPC/CH and usually do not provide disaggregation by Phase 2, 3, 4 and 5. The methodology used in the GRFC 2025 to estimate populations facing Crisis or worse (IPC/CH Phase 3 or above) is described for each source.

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 of the food crisis. It provides data for two time periods – the current situation and a projection. This information helps governments, humanitarian actors and other decision-makers quickly understand a crisis (or potential crisis) and informs appropriate 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, considering 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, 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 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 help people understand and use IPC products and protocols, including tools and procedures, to conduct the classifications.

See https://www.ipcinfo.org/ipcinfo-website/resources/ipc-manual/en/

FIG. TN.3 **IPC 3.1 acute food insecurity reference table**

		Phase 1 None/Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe/Famine
Phase name and description		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
Food security first-level outcomes	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 consumption (focus on energy intake)	**Quantity: Adequate energy intake** **Dietary energy intake:** Adequate (avg. 2 350 kcal pp/day) and stable **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
Food security second-level outcomes	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.					
	Nutritional status* 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

Cadre Harmonisé (CH)

Since 1999, the Permanent Interstate Committee for Drought Control in the Sahel (Comité permanent Inter-Etats de Lutte contre la Sécheresse au Sahel (CILSS)), along with the Economic Community of West African States (ECOWAS), Union Economique et Monétaire Ouest Africaine (UEMOA), United Nations agencies (FAO, WFP and UNICEF), non-governmental organizations (Action contre la Faim (ACF), Save the Children, Oxfam), and other international organizations, such as FEWS NET, have been engaged in the development and implementation of the CH for the analysis and identification of areas at risk and populations affected by food and nutrition insecurity in West Africa and the Sahel.

The CH is the multidimensional analytical framework led by CILSS to provide rigorous, evidence and consensus-based analyses of current and projected food and nutrition situations in, currently, 18 countries[1] in West Africa and the Sahel. It classifies the severity of food and nutrition insecurity based on the international classification scale through an approach that refers to well-defined functions and protocols. It is used to inform national and regional food-crisis prevention and management systems.

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 coastal countries of West Africa.

The Cadre Harmonisé Manual v3.0 describes the specific functions and protocols for carrying out an integrated and consensual analysis of acute food and nutrition insecurity.

See https://agrhymet.cilss.int/manuel-cadre-harmonise-version2-0/

1 Benin, Burkina Faso, Cabo Verde, Cameroon, Chad, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo.

IPC/CH five-phase classification

IPC and CH have closely collaborated to harmonize their tools and processes to ensure comparable figures of acute food insecurity.

The five-phase classification is the same, though there are a few differences in the use of certain indicators and in how humanitarian assistance is factored in the analysis:

1. None/Minimal
2. Stressed
3. Crisis
4. Emergency
5. Catastrophe/Famine

These are determined based on a convergence of available evidence, including indicators related to food consumption, livelihoods, malnutrition and mortality. Each phase has important and distinct implications for where and how best to intervene and thus 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 assistance.

Populations in Stressed (IPC/CH Phase 2) are considered acutely food insecure due to their extreme vulnerability to shocks, but rather than urgent assistance they require livelihood protection and disaster risk reduction interventions.

Classifying Famine (IPC/CH Phase 5)

Famine is an area classification based on internationally accepted criteria:

- at least 1 in 5 households face an extreme lack of food;
- at least 30 percent of children suffer from acute malnutrition; or
- at least 2 people for every 10 000, or 4 children under 5 years old for every 10 000, are dying each day due to outright starvation or the interaction of malnutrition and disease.

Given the severity and implications of this classification, special Famine protocols must be met before an area is classified in Famine (IPC/CH Phase 5). *See TN.3 IPC 3.1 acute food insecurity reference table, page 207.*

An area is classified in Famine with solid evidence if there is clear and compelling evidence of food insecurity (food deprivation and livelihood collapse), acute malnutrition and mortality to support the classification. An area is classified in Famine with reasonable evidence if minimally adequate evidence is available on two out of the three outcomes – food insecurity, malnutrition or mortality – to support the classification. Famine with solid evidence and Famine with reasonable evidence are equally severe – the only difference is the amount of reliable evidence available to support the statement.

The IPC/CH supports Famine prevention by highlighting the following:

- Emergency (IPC/CH Phase 4) is an extremely severe situation where urgent action is needed to save lives and livelihoods.
- Households can be in Catastrophe (IPC/CH Phase 5) even if areas are not classified in Famine (IPC/CH Phase 5). This is the case when less than 20 percent of the population is experiencing Catastrophe (IPC/CH Phase 5) 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 in Famine (IPC/CH Phase 5). 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 (IPC/CH Phase 5) can be made even if the areas are not currently classified in Famine, thus allowing early warning.

Risk of Famine

This is an IPC statement that highlights the potential deterioration of the situation compared with 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 chance of occurring.

FEWS NET

The Famine Early Warning Systems Network (FEWS NET) classification is IPC-compatible, meaning that it follows key IPC protocols but is not built on multi-partner technical consensus, so it does not necessarily reflect the consensus of country-level stakeholders. The analysis is not disaggregated by severity.

Funded and managed by USAID's Bureau for Humanitarian Assistance (BHA), FEWS NET provided early warning and evidence-based analysis of acute food insecurity to inform humanitarian and development response.

WFP CARI

The WFP Consolidated Approach for Reporting Indicators of Food Security (CARI) methodology is commonly used by WFP and other food security actors, including Multi-Sector Needs Assessments and are used to calculate the People in Need (PiN) for Food Security in the OCHA HNRPs in countries/territories not covered by IPC/CH analysis.

The CARI addresses the multiple dimensions of food security through five indicators:

- Food Consumption Score (FCS)
- Reduced Coping Strategies Index (rCSI)
- Economic Capacity to Meet Essential Needs (ECMEN)
- Food Expenditure Share (FES)
- Livelihood Coping Strategies (LCS)

Each surveyed household is classified into one of four food security categories:

1. Food secure
2. Marginally food secure
3. Moderately acutely food insecure
4. Severely acutely food insecure

The results are presented within the CARI food security console, which provides the prevalence of each available CARI food security indicator.

Populations that are classified as 'moderately acutely food insecure' and 'severely acutely food insecure', as per WFP's CARI methodology, are reported as an approximation for populations facing Crisis or worse (IPC/CH Phase 3 or above).

A key difference between the IPC/CH and CARI analyses is that 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 projection, the IPC/CH provides the current snapshot and a projection based on the most likely scenario for any period in the future. The indicators included in the CARI approach can be used in the IPC/CH analyses.

See CARI methodology: https://docs.wfp.org/api/documents/WFP-0000134704/download/

Acute food insecurity peak

Among data available for a given country/territory that have been endorsed for 2024 and validated by the TWG according to the criteria listed above, the analysis/assessment reporting the highest number of acutely food-insecure people is selected as the peak.

It does not necessarily reflect the latest analysis available. The **peak** can be either an analysis made for the current period in 2025 or a projection made in 2024 or 2025 and referring to a period of the year 2025.

For this regional focus on IGAD member states of the GRFC, the cut-off date for data inclusion was 15th July 2025 so the projection estimates only partially cover 2025. Where the 2025 projection does not cover the same period as the 2024 peak, this is indicated. Comparison in this case can be biased and lead to underestimations.

Analyses that straddle 2024 and 2025 are considered for both years and, if reporting the highest number of people compared with other available analyses in the two years, the same analysis is used as the peak for both 2024 and 2025. A projection update or a new analysis covering at least part of the previous projection period overrides the original projection findings since it is based on more up-to-date information, hence providing more accurate findings.

Data from non-IPC/CH (FEWS NET, CARI and HNO analyses) sources are presented in the country narratives according to their specific terminology and categorization. For communication purposes, the wording 'high levels of acute food insecurity' or 'IPC/CH Phase 3 or above, or equivalent' are used to include both IPC/CH estimates and any food security estimates that are based on non-IPC/CH data sources reflecting an approximation of IPC Phase 3 and above. Information is presented in summary tables as IPC/CH Phase 3 or above or equivalent without further breakdown to more specific IPC/CH phases.

Humanitarian Needs and Response Plan (HNRP) and other estimates of people in need in the food security sector.

OCHA HNRPs provide the People in Need (PiN) figure for the Food Security and Livelihoods cluster, based on data collected during the year, and it is endorsed by the Humanitarian Country Team in each country/territory.

Similarly, food insecurity estimates are provided by OCHA in the Humanitarian Response Plan (HRP) and Flash Appeal. When no other sources for acute food insecurity estimates are available, the GRFC food security TWG assesses the methodology behind the PiN number to determine if it is based on acute food insecurity indicators and can be used as an equivalent, comparable estimate of, or as an approximation for, Crisis or worse (IPC/CH Phase 3 or above). The data are used where there is agreement that it reflects a particular country's food security situation. If there is no consensus within the food security TWG, the decision is referred to the GRFC senior committee.

Data not meeting GRFC technical requirements and data gaps

Each year there are countries/territories that are identified as having food crises but food security information, even if available, does not meet the GRFC partnership technical requirements outlined above. As such, the GRFC aggregate figures underestimate the magnitude and severity of acute food insecurity, and additional investment in rationalizing methodologies and data collection is necessary.

There are ongoing efforts to analyse accuracy and equivalence of methodologies currently not considered in the GRFC.

Such countries are listed in the GRFC as 'data gap/data not meeting GRFC technical requirements' and reported at the end of each regional section as countries 'of concern'.

'Data gaps' are countries for which there is no publicly available analysis for the year in question.

Categories and qualifiers

The GRFC 2025 aims to classify food crises to provide a contextualized description of the overall situation in the country/territory and to inform a tailored response. Among categories already used in previous editions, including protracted food crises or the ten countries with the highest magnitude and prevalence of high levels of acute food insecurity, this year it also utilizes the INFORM Risk Index's vulnerability and lack of coping capacity dimensions, along with reliance on external assistance and income levels, to assess vulnerabilities and the capacity to address food insecurity and malnutrition.

Protracted food crises

A country/territory is defined as a protracted food crisis when it is included in all editions of the GRFC. In GRFC 2025, there are 35 countries that are considered 'protracted' food crises.

Vulnerability

The INFORM Risk Index vulnerability dimension assesses the predispositions of an exposed population to be affected by a shock, including economic, political and social characteristics of the community that can be destabilized in case of a hazardous event (JRC, 2017). All countries/territories included in the GRFC 2025 were classified as 'highly vulnerable'.

This dimension examines two categories:

1. **Socioeconomic vulnerability**
   This evaluates factors that increase a population's vulnerability to a hazardous event, such as the ability of individuals and households' ability to afford safe and resilient livelihood conditions and well-being.
2. **Vulnerable groups**
   This identifies populations within a country that have specific characteristics placing them at higher risk of needing humanitarian assistance or being excluded from financial and social services.

Coping capacity

The INFORM Risk Index lack of coping capacity dimension assesses a country's ability to manage disasters through formal, organized efforts, including government actions and existing infrastructure contributing to risk reduction (JRC, 2017). All countries/territories included in the GRFC 2025 had a value categorized as 'high' within this dimension.

This dimension is divided into two categories:

1. **Institutional capacity**
   This evaluates government priorities and institutional basis for implementing disaster risk reduction activities.
2. **Infrastructure**
   This examines communication networks, physical infrastructure and accessible health systems, which are needed during emergency response.

World Bank country classifications by income level

The GRFC utilizes income levels based on the World Bank's definitions (low, lower-middle, upper-middle and high income). These thresholds are updated annually and are based on Gross National Income (GNI) per capita, converted to US dollars using the World Bank's Atlas method. This method applies a three-year moving average with a price-adjusted conversion factor, to reduce short-term exchange rate fluctuations due to inflation (WB, July 2024). High-income countries are excluded from the GRFC analysis, even if acute food insecurity data are available, as they are considered to have capacities to cope.

ODA/GNI

The indicator of net Official Development Assistance (ODA) received as a percentage of GNI provides a measure of a recipient country's dependency on aid. A degree of dependency on external assistance often reflects a country/territory's economic and institutional capacity to address food crises. In the GRFC, this indicator is used as a proxy measure for a country's capacity to respond to shocks and assist their population.

Drivers of acute food insecurity

The drivers of food crises are often interlinked, mutually reinforcing and superimposed on structural vulnerabilities, making it difficult to pinpoint one main driver for each food crisis.

FSIN and the food security TWG identify the primary driver of acute food insecurity for each country/territory based on events during the year and information on the number of people affected by each of the shocks. For countries/territories with two or more drivers affecting different parts of the country or different population groups, the primary driver is chosen by estimating which driver affected the largest number of people. While acknowledging that other drivers underlie the acute food insecurity numbers in each country in addition to the primary driver, the GRFC aggregates the number of countries/territories by primary driver at the global level.

For countries where the analysis is purely focused on the displaced populations, the primary driver reflects the reason those populations are displaced from their country of origin.

It is also acknowledged that food insecurity is not driven solely by the occurrence of a shock, but rather by the interaction between shocks and structural vulnerabilities. Some of the main indicators of vulnerability for each country are discussed in chapter 1.

The GRFC estimates which is the most salient driver for each country/territory from the following main drivers.

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.

Conflict/insecurity is a key driver of acute food insecurity. During conflict people may be deprived of their income sources, lose assets and/or have difficulties in accessing food, as food systems and markets are disrupted, in turn pushing up food prices and sometimes leading to scarcities of food, water, fuel and other basic needs.

Conflict/insecurity can undermine household and community coping capacities, break down social support systems and lead to displacement.

As well as the direct destructive effects that conflict/insecurity can have on agricultural infrastructure, such as mills, irrigation systems, storage facilities and machinery, landmines, explosive remnants of war and improvised explosive devices often make agricultural land unusable for many years, as they require complex and expensive clearance operations to be made safe for use.

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 can be damaged or destroyed, leaving people reliant on humanitarian support.

Increasingly, however, insecurity, as well as physical and administrative barriers, prevent humanitarian access to 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).

For countries/territories with conflict/insecurity as the primary driver during the previous edition, change to another primary driver needs serious consideration as recovery from conflict/insecurity is slow, and it may remain the underlying cause of food insecurity. In cases where conflict/insecurity has reduced and/or localized, with other drivers showing a predominant effect, the change in the primary driver from the previous year is considered.

Weather extremes

This includes 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 may trigger an early lean season by making households 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 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 timing, scale and frequency of shocks. Repeated events further erode capacity to withstand future shocks.

Weather events and climate changes can lead to an intensification of conflict, such as between pastoralist herders and farmers over access to water and grazing. There is ample evidence suggesting that natural disasters – particularly droughts – can aggravate existing civil conflicts as well as strain traditional conflict resolution mechanisms.

Economic shocks

At country level, this can affect the food insecurity of households or individuals through various channels. Macroeconomic shocks may lead to increases in acute food insecurity through for instance, a contraction in GDP leading to high unemployment rates and consequent 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 currency depreciation and inflation, increasing production costs and food prices, and worsening terms of trade, which may in turn lead to increases in acute food insecurity.

High debt and limited fiscal space constrain economic growth, increase vulnerability to economic shocks and detract from development spending.

Increases in world market prices of staple grains, oil and agricultural inputs can affect food availability and access, pushing up domestic food prices for consumers and reducing their purchasing power. Economic shocks can also occur at a more localized level or hit only a particular socioeconomic category of households. For instance, pastoralists facing lack of animal feed and veterinary services may lead to deteriorating livestock body conditions and depressed livestock prices, which in turn may reduce pastoralists' purchasing power and thus constrain access to food.

Crop pests, livestock disease, and natural disasters

These could include crop pests such as locust invasion and fall armyworm; livestock diseases, such as foot and mouth disease; and natural disasters, such as earthquakes and tsunamis. As relevant, these may be indicated as primary/ secondary/ tertiary drivers.

Identification of crises and concerns

In 2025, FSIN and the nutrition TWG strengthened the integration of nutrition in the GRFC by providing a holistic analysis of acute malnutrition in countries/territories with food crises.

The interplay between acute food insecurity, acute malnutrition and their contributing factors are the main focus, with more data and analysis, and new conceptual and analytical frameworks.

Definitions of nutrition crises and nutrition concerns are provided to better anchor countries/territories with critical nutritional vulnerabilities within the analysis of countries/territories with food crises.

The nutrition decision tree

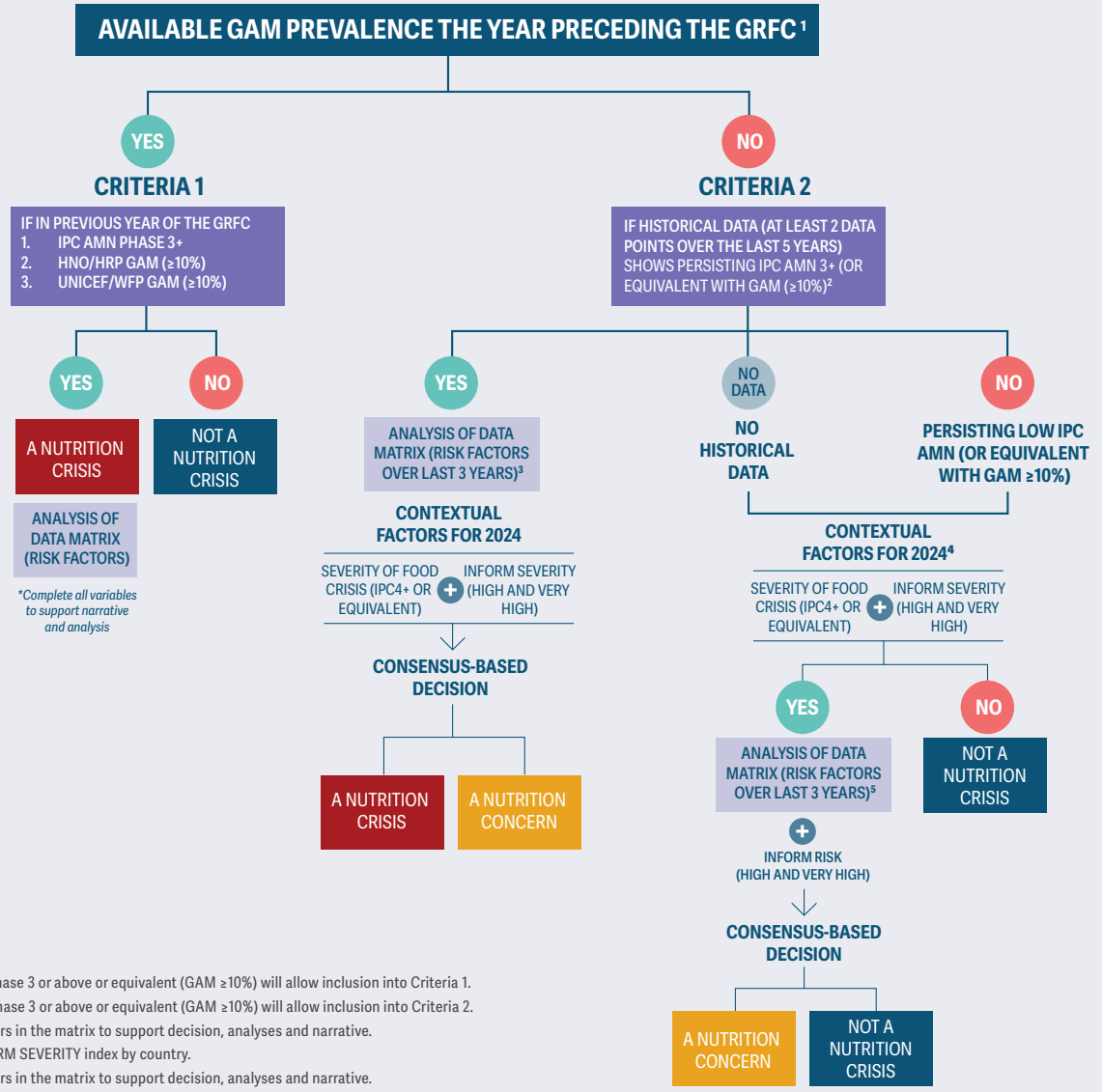
The nutrition decision tree, *see figure TN.4*, ensures a consistent, evidence-based identification/selection of countries/territories as nutrition crises based on two main criteria and the availability of malnutrition data as follows:

Criteria 1
A country/territory with areas classified in IPC AMN Phase 3 or above, or with Global Acute Malnutrition (GAM) prevalence by weight-for-height z-score (WHZ) ≥10 percent in the reporting year (in this edition 2024) is identified as experiencing a nutrition crisis.

Criteria 2
A country/territory with areas with data indicating IPC AMN Phase 3 or above classifications or GAM prevalence by WHZ ≥10 percent, with at least two data points in the past five years.

Identification of a country with a nutrition concern is determined through consensus by the GRFC nutrition TWG based on GAM, data thresholds, and contextual and risk factors.

FIG. TN.4 **The GRFC nutrition TWG decision tree: countries with a nutrition crisis or a nutrition concern**



[1] Any areas with IPC Phase 3 or above or equivalent (GAM ≥10%) will allow inclusion into Criteria 1.
[2] Any areas with IPC Phase 3 or above or equivalent (GAM ≥10%) will allow inclusion into Criteria 2.
[3] Complete all indicators in the matrix to support decision, analyses and narrative.
[4] Use the overall INFORM SEVERITY index by country.
[5] Complete all indicators in the matrix to support decision, analyses and narrative.

FIG. TN.5 **The IPC acute malnutrition scale**

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.	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%	5.0–9.9%	10.0–14.9%	15.0–29.9%	≥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.

Data sources

Outcome-level data for acute malnutrition include both prevalence and burden estimates of GAM, disaggregating the proportion of moderate acute malnutrition (MAM) and severe acute malnutrition (SAM).

Data are also disaggregated by population groups:

- children under 5 years of age (aged 6–59 months in most sources, except for Demographic and Health Surveys (DHS), which reports on all children under 5 years of age);
- pregnant and breastfeeding women (PBW); and
- forcibly displaced populations, mainly refugees and returnees but also internally displaced persons (IDPs).

GAM prevalence

The use of GAM prevalence by WHZ (including MAM and SAM) adheres to a prioritized list of data sources:

- Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys;
- Multiple Indicator Cluster Surveys (MICS);
- Demographic and Health Surveys (DHS) for national surveys; and
- Standardized Expanded Nutrition Surveys (SENS), for refugee populations.

GAM burden

Burden estimates refer to the number of children under 5 years of age and PBW who are acutely malnourished, as per the following sources in order of priority:

- IPC Acute Malnutrition analyses;
- Humanitarian Needs and Response Plans (HNRP); and
- burden estimates from UNICEF and WFP.

The nutrition TWG identifies the data that best reflects a country/territory's nutrition situation. Alternative data sources may be chosen based on analysis coverage or period(s) of analysis.

Data methodologies

IPC Acute Malnutrition Scale

The IPC Acute Malnutrition Scale classifies the severity of acute malnutrition in the analysed population based on the GAM prevalence. *See figure TN.5*. The IPC analysis process also reviews and ranks contributing factors that affect acute malnutrition as per the IPC Acute Malnutrition Analytical Framework, including indicators (also referred to as risk factors) such as dietary intake, disease, feeding and care practices, health and WASH environment, and contextual information such as access to services.

Nutrition analysis in Humanitarian Needs and Response Plans (HNRPs)

The HNRPs estimate the People in Need (PiN) figure for nutrition services, including burden estimates of acute malnutrition for children and PBW. The HNRP assesses the scale and severity of needs based on data collected throughout the year, endorsed by the Humanitarian Country Team.

Nutrition and health surveys

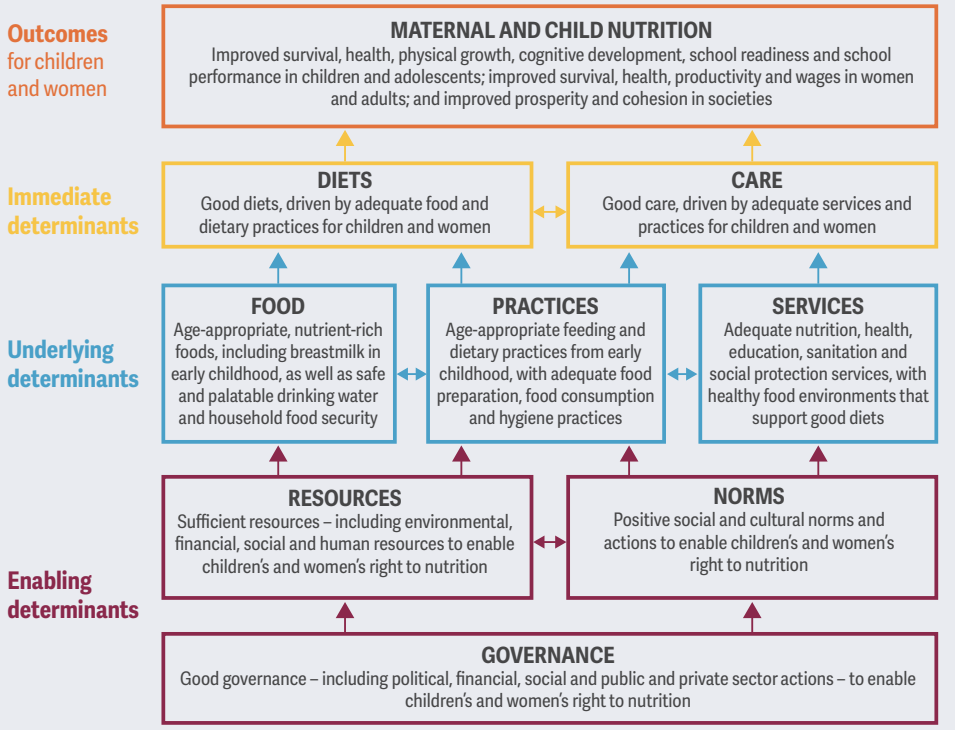
Several standardized surveys are used to assess nutrition, health, and population indicators in humanitarian and development settings:

- SMART Surveys: Developed in 2002, SMART Surveys provide rapid and technically sound assessments of acute malnutrition and mortality in crises.
- MICS & DHS: UNICEF-led and nationally representative survey initiatives that collect data on population, health, nutrition and child well-being through household interviews, including the assessment of GAM.
- SENS: A UNHCR adaptation of SMART methodology designed for refugee populations, covering malnutrition, feeding practices of infants and young children, anaemia, and key health indicators.

UNICEF's conceptual framework

The UNICEF Conceptual Framework on Maternal and Child Nutrition serves as a complementary tool to the IPC Acute Malnutrition Analytical Framework in identifying the contributing factors of acute malnutrition and their respective pathways. This framework offers clear insights into the factors influencing children's and women's nutrition, focusing on the interplay between enabling, underlying and immediate nutrition determinants. It highlights the role of diets and care as immediate determinants of maternal and child nutrition, and articulates a positive narrative about what contributes to good nutrition in children and women. It underscores the beneficial impacts of enhanced maternal and child nutrition, including better survival rates, health, development, education outcomes, economic growth and social unity. *See figure TN.6*.

FIG. TN.6 **The UNICEF conceptual framework**



Contributing factors

The GRFC nutrition TWG has grouped the contributing factors of acute malnutrition across three pathways – food, health, and care and services.

This ensures alignment with the underlying and immediate causes of the IPC Acute Malnutrition Analytical Framework and the underlying determinants of UNICEF's Conceptual Framework.

The key indicators for each pathway, referred to as risk factors in IPC AMN analyses, are as follows:

Food pathway

Indicators are minimum dietary diversity among children under 5 years of age and among women of reproductive age (15–49 years); minimum acceptable diet among children aged 6–23 months; and the prevalence of anaemia in children under 5 years and women of reproductive age (15–49 years) or pregnant and breastfeeding women.

Health pathway

Indicators are the prevalence and incidence for acute respiratory infections (ARIs), cholera, acute watery diarrhoea (AWD), malaria and fever.

Care and services pathway

Indicators are vitamin A supplementation coverage, measles vaccination (second dose), exclusive breastfeeding rates and access to improved water supplies (safely managed).

For a country to be identified as facing a nutrition crisis or nutrition concern under Criteria 2, at least one indicator per pathway (food, health, care and services) must be classified as 'high' or 'very high', based on thresholds established by the nutrition TWG partners. A detailed breakdown of each indicator and its respective thresholds can be found in Appendix 6: Indicators. *See page 198.*

Contextual and risk factors

To increase the robustness of the identification of nutrition crisis or nutrition concern under Criteria 2, the GRFC nutrition TWG incorporated additional contextual and risk factors into the analysis.

Contextual factors

- Populations in Emergency or worse (IPC Phase 4 or above): The presence of populations in areas classified as IPC Phase 4 or above was considered a key contextual factor by the nutrition TWG.
- INFORM Severity Index: A composite indicator that assesses the severity of humanitarian crises on a standardized global scale. It helps inform response planning by measuring crisis severity and was used by the nutrition TWG as an additional contextual factor.

Risk factor

- INFORM Risk Index: A comprehensive risk assessment tool that consolidates 54 indicators into three dimensions: hazards, vulnerability, and lack of coping capacity. This index provides an overall measure of risk for humanitarian crises and disasters and was used by the nutrition TWG as a risk factor in the identification process.

Malnutrition peak

The malnutrition peak is determined as the period with the most severe acute malnutrition situation based on IPC AMN analyses that provide area classifications and burden estimates for specific timeframes.

The selected peak does not necessarily coincide with the most recent IPC AMN analysis available for the reporting year.

Severity is measured by the percentage of areas classified as Serious or worse (IPC AMN Phase 3 or above) relative to the total areas analysed. Therefore, the malnutrition peak is the period with the highest percentage of areas in IPC AMN Phase 3 or above. When possible, this percentage is compared with the corresponding peak period from the previous year to assess annual changes in severity.

The burden of children aged 6–59 months and PBW suffering from acute malnutrition is drawn from the same analysis where the peak was identified.

The identified malnutrition peaks are confirmed by the nutrition TWG to ensure that they reflect the actual periods of worse severity of acute malnutrition in the country for the reporting year.

In countries where an IPC AMN analysis is available, the peak corresponds to the specific period identified following the criteria indicated above. However, in countries without IPC AMN analysis, the entire reporting year (2024) is considered the peak period by default.

The peak data may originate from an analysis conducted in 2024 or from projections made in 2023 or 2024, pertaining to any period within 2024. For a period to be considered the peak of 2024, it needs to cover at least one month of 2024. If such data are unavailable, most recent analyses from 2022 or 2023 may serve as the peak for those years, provided the nutrition TWG deems it still relevant.

For countries with an IPC AMN analysis, prevalence estimates should be compared only for the same season across two years. Year-on-year changes were assessed by comparing the proportion of areas classified in IPC AMN Phase 3 or above out of the total areas analysed in both years. A reduction in this proportion was interpreted as an overall improvement, while an increase indicated deterioration.

To allow for more granular interpretation, a more focused analysis was conducted on areas classified in IPC AMN Phases 4 and 5. This helped identify situations where, despite an overall improvement, certain areas experienced worsening conditions – and vice versa.

For countries without an IPC AMN analysis, year-on-year comparability is based on prevalence data. If prevalence data are unavailable, malnutrition burden should be used as the comparative metric.

Data gathering criteria

FSIN and the displacement TWG identify and endorse data on displacement and acute food insecurity and nutrition among forcibly displaced populations, returnees and vulnerable migrant populations in Latin America and the Caribbean in countries/territories with food crises, including key content, indicators and infographics.

To be included in the report, data must follow the GRFC criteria and requirements. The displacement TWG evaluate data available for the reporting year (in this edition 2025). If no data were available, the displacement TWG may consider using data from the prior year (in this edition 2023). Data covering the whole country/territory are generally preferred, however, for certain countries/territories, only specific areas are analysed.

Data on displacement were gathered for all 65 countries with food crises but, for internal consistency, aggregated figures at the global and regional level comprise data for the 53 countries that have acute food insecurity data meeting GRFC requirements.

Out of the 53 countries/territories with food crises and acute food insecurity data meeting the GRFC technical requirements, 52 had displacement data for forcibly displaced persons and returnees. Of those, 15 had acute food insecurity data and 19 had nutrition data on displaced populations and returnees.

Data sources and methodologies

The displacement data sources depend on the category of the displaced person.

Data on Palestine refugees and asylum-seekers are based on UNRWA. All other data on refugees and asylum-seekers are based on UNHCR nowcasting data.

Data for internally displaced persons (IDPs) are based on the following priority ranking:

- International Organization for Migration (IOM); then
- Internal Displacement Monitoring Centre (IDMC).

Exceptions can be made by consensus by the displacement TWG to use data that appear to best reflect a particular country/territory's displacement situation. When a country/territory has information from several sources, the choice of a data source is driven by the size of the analysis coverage and the reporting period.

Figures for displaced populations aim to be countrywide but depend on the assessment and can cover only specific areas where displaced persons are concentrated.

Data validity

The timeframe of data validity varies for different categories of displaced people. For refugees and asylum-seekers, the GRFC uses UNHCR nowcasting data from December 2024. For global aggregates, UNHCR data are from mid-2024. UNRWA data on Palestine refugees and asylum-seekers are from September 2024.

For IDPs, IOM data are the most recent available and vary depending upon when the analysis was conducted at country level. When IOM data are not available, the most recent data from IDMC from end-2023 are used.

Limitations and data challenges

Comparability of acute food insecurity assessments

Acute food insecurity figures are only considered comparable across two years if the population coverage of the analysis changed by less than 10 percent, and if carried out using the same methodology and covering the same geographical areas. If the change in population coverage exceeds 10 percent due to population growth, the analyses are still considered comparable, as was the case for Somalia in this edition of the IGAD report.

Data gaps – data not meeting GRFC technical requirements

In total, 2 countries among the IGAD member states selected for the GRFC 2025 did not have data or had data which did not meet the GRFC technical requirements. Available information on the acute food insecurity situation in those countries is included in the regional section. Eritrea has been selected for inclusion in every edition of the GRFC but has never had acute

food insecurity data. No consensus on acute food insecurity estimates was reached for Ethiopia.

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FSIN Food Security Information Network
Joint analysis for better decisions

Founded by FAO, IFPRI and WFP, the Food Security Information Network (FSIN) facilitates the exchange of technical expertise, knowledge and best practice among food security and nutrition practitioners. Its purpose is to promote timely, independent and consensus-based information about food crises, while also highlighting and addressing critical data gaps. As a key partner of the GNAFC, FSIN coordinates the publication of the *Global Report on Food Crises*.

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IGAD

The Intergovernmental Authority on Development (IGAD) is a regional economic community (REC) that forms one of the building blocks of the African Union and is comprised of eight Member States, namely Djibouti, Eritrea, Ethiopia, Kenya, Somalia, South Sudan, Sudan and Uganda. IGAD seeks to assist and complement the efforts of its Member States, through increased cooperation, to achieve food security and environmental protection, peace and security, and economic cooperation and integration.

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