

FSNWG¹ Food Security and Nutrition Update

Key messages

- An estimated 54.8 million people in 10 of the 13 countries covered by the FSNWG were severely food insecure (IPC² Phase 3+) and in need of urgent assistance in January 2021. Of these, about 31.9 million were from 7 of the 8 IGAD Member States (see Figure 1).
- Immediate life-saving food, livelihood, and nutrition support is needed in South Sudan where an estimated 105,000 people were in Catastrophe (IPC Phase 5)³, largely due to chronic vulnerabilities that have been exacerbated by climatic shocks (particularly floods), conflict and insecurity, and macro-economic challenges.
- The humanitarian situation in the Tigray region of Ethiopia remains grave. Even before the ongoing conflict, an estimated 600,000 people, including internally displaced persons (IDPs) and refugees, were already highly food insecure (IPC Phase 3+). It is therefore, likely that the situation will further deteriorate as conflict disrupts livelihoods and market functioning, and access challenges adversely affect the delivery of humanitarian and other essential services.
- The nutrition situation in the region remains a major source for concern. In South Sudan, for instance, about 1.4 million children under the age of five are expected to face acute malnutrition through 2021.
- Staple food prices in most markets in Ethiopia, South Sudan and Sudan will likely be elevated through 2021 due to macroeconomic challenges and high inflation rates.
- Funding shortfalls continued to drive food ration cuts – ranging between 10-40% – among refugees in Djibouti, Ethiopia, Kenya, South Sudan, Tanzania and Uganda, exposing them to an increased risk of food insecurity and malnutrition.

Figure 1: Food Insecure Population Estimates⁴

Country	Stressed (IPC Phase 2)	Crisis (IPC Phase 3)	Emergency (IPC Phase 4)	Catastrophe (IPC Phase 5)	Crisis or worse (IPC Phase 3+)
Djibouti	389,000	167,000	27,000	-	194,000
Ethiopia	17,353,112	10,279,333	2,592,136	-	12,871,469
Kenya	6,332,382	1,483,728	399,530	-	1,883,258
Somalia	3,010,000	1,705,000	400,000	-	2,105,000
South Sudan ³	3,886,000	3,935,000	1,728,000	105,000	5,768,000
Sudan	17,407,791	5,800,371	1,296,808	-	7,097,179
Uganda	4,542,829	1,630,877	371,860	-	2,002,737
IGAD Total	52,921,114	25,001,309	6,815,334	105,000	31,921,643
Burundi	3,955,432	1,206,500	128,129	-	1,334,629
CAR	1,756,781	1,520,732	407,877	-	1,928,609
DRC	30,253,077	14,741,313	4,875,469	-	19,616,782
Total	88,886,404	42,469,854	12,226,809	105,000	54,801,663

¹ The East and Central Africa Food Security and Nutrition Working Group (FSNWG) is a multi-stakeholder regional forum, chaired by IGAD and FAO, mandated to provide adequate and timely information of food security and nutrition to planners and decision makers to ensure interventions are well coordinated to save lives, safeguard livelihoods and build resilience of at-risk population in participating member countries.

² The Integrated Food Security Phase Classification (IPC) is a set of standardized tools used to classify the severity of food insecurity using a widely accepted five-phase scale, that is, Minimal (IPC Phase 1), Stressed (IPC Phase 2), Crisis (IPC Phase 3), Emergency (IPC Phase 4) and Catastrophe/Famine (IPC Phase 5).

³ Based on IPC Global Support Unit's consolidated findings from the South Sudan IPC Technical Working Group and external reviews (Famine Review and Quality Review), following a breakdown in technical consensus in the estimation of populations in Catastrophe (IPC Phase 5) in six counties.

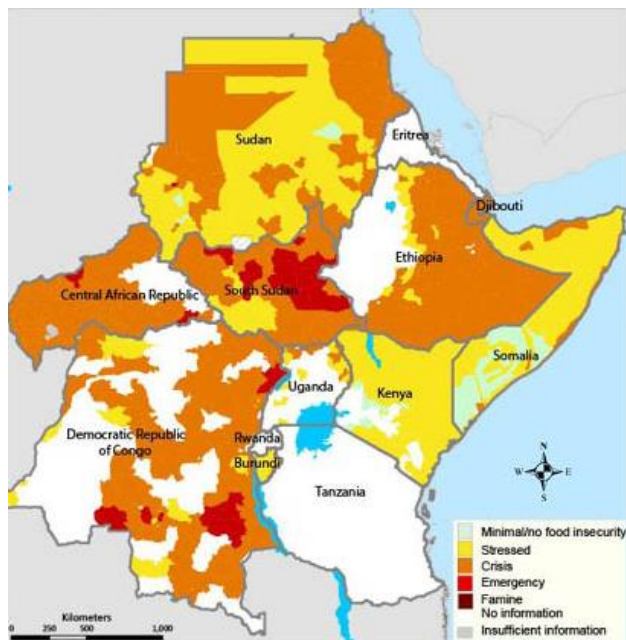
⁴ Based on recent IPC analyses. Countries which do not have recent IPC analyses have been left out.

Sector updates

Food security

The food security situation in the region remains a challenge as food crises continue to affect millions of people. According to recent IPC analyses, an estimated 54.8 million people in Burundi, CAR, DRC, Djibouti, Ethiopia, Kenya, Somalia, South Sudan, Sudan and Uganda were highly food insecure (IPC Phase 3+) and in need of urgent food assistance in January 2021. Of these, an estimated 105,000 people were in Catastrophe (IPC Phase 5). An additional 88.9 million were Stressed (IPC Phase 2) and in need of livelihood support.

Regional food security situation



Source: IPC

Areas and populations of concern

An estimated 5.8 million people in South Sudan were highly food insecure (IPC Phase 3+). Of these, around 105,000 people were in Catastrophe (IPC Phase 5) mainly in Jonglei, Northern Bahr el Ghazal and Warrap states⁵.

Of particular concern is Pibor county where, according to a recent Famine Review Committee, “Famine Likely” (IPC Phase 5) outcomes will likely

continue through July 2021 in four payams (Gumuruk, Pibor, Lekuangle, and Verteth)⁶. This was mostly attributed to localised conflict and heavy flooding in the second half of 2020 which destroyed homes, disrupted livelihoods, cut off humanitarian services and caused massive displacement. It should be noted that recovery from the effects of previous floods – June 2019-January 2020 – had been limited.

Across the country, in addition to conflict and floods, diseases and pests, the COVID-19 pandemic, and a macro-economic crisis characterised by currency depreciation and high food prices, continued to be the main food insecurity drivers. This is against a backdrop of chronic vulnerabilities following years of protracted conflict and recurrent shocks.

A further deterioration is expected as the lean season progresses and households deplete their food stocks. In view of this, an estimated 7.2 million people will likely be highly food insecure (IPC Phase 3+) between April and July 2021. Of these, an estimated 108,000 will be in Catastrophe (IPC Phase 5)⁵.

In Ethiopia, an estimated 12.9 million people, excluding the impacts of the recent conflict in Tigray, were highly food insecure (IPC Phase 3+). About 38% of this population were found in Oromia region.

This is owing to macro-economic challenges, in particular high inflation, which coupled with the socio-economic effects of the COVID-19 pandemic, have limited household purchasing power and subsequently food access. Extensive Desert Locust infestations also damaged crops and pasture, negatively impacting food availability and livelihoods. According to FSNWG’s most recent Desert Locust Impact Assessment, roughly half of cropping households and two-thirds of livestock rearing households in Ethiopia reported Desert Locust-related pasture and crop losses, with about 70% of impacted households reporting high or very high losses⁷. Ethiopia also has about 1.8 million

⁵ Based on IPC Global Support Unit’s consolidated findings from the South Sudan IPC Technical Working Group and external reviews (Famine Review and Quality Review), following a breakdown in technical consensus in the estimation of populations in Catastrophe (IPC Phase 5) in six counties.

⁶ It should be noted that this conclusion differs from that of the South Sudan IPC Technical Working Group which classified these payams in Emergency (IPC Phase 4).

⁷ [FSNWG. Desert Locust Impact Assessment. January 2021](#)

internally displaced persons (IDPs) who tend to be disproportionately food insecure due to limited coping capacity.

Concerning Tigray, the humanitarian situation remains grave. Even before the conflict, around 600,000 people, including IDPs and refugees, were already highly food insecure (IPC Phase 3+), according to the IPC. It is therefore likely that the situation will further deteriorate as conflict disrupts livelihoods and market functioning, and access challenges adversely affect the delivery of humanitarian and other essential services⁸. Of particular concern are Eritrean refugees in affected camps who can no longer receive essential aid as a result⁹.

In Djibouti, an estimated 194,000 people were highly food insecure (IPC Phase 3+). Key drivers included the COVID-19 pandemic which has exacerbated poverty levels as livelihoods are either disrupted or eroded, the Desert Locust invasion which damaged pasture and crops in agricultural areas, and floods which destroyed infrastructures and household assets.

Nutrition

The nutrition situation in the region remains a major source for concern. Ethiopia with about 6 million stunted children, Tanzania (3 million), Uganda (2 million), Kenya (1.8 million) and Burundi (1 million) were among the top countries in the region with a high burden of stunting, according to the 2020 UNICEF, World Health Organisation (WHO) and World Bank Joint Child Malnutrition Estimates (JME). Risks to improved nutrition still persist particularly given the multiple shocks affecting the region, including food insecurity, diseases, poor sanitation, economic hardships and limited social protection services.

In South Sudan, the nutrition situation remains critical as a result of conflict, food insecurity, and

floods that compromised water, sanitation and hygiene (WASH) facilities. As per the most recent estimates, the prevalence of global acute malnutrition (GAM) among under-five children stands at about 16%. This translates into around 1.8 million people in need of acute malnutrition treatment in 2021, including an estimated 313,000 under-five children suffering from severe acute malnutrition (SAM), and 1 million under-five children and 483,000 pregnant and lactating women (PLW) suffering from moderate acute malnutrition (MAM).

In Ethiopia, an estimated 1 million under-five children will require urgent SAM treatment through 2021. On the other hand, an estimated 3.5 million under-five children and PLW will require MAM treatment. Food insecurity and poor young and infant feeding practices remain the key drivers of malnutrition in the country. According to UNICEF, only 1 in every 10 children receive an adequate diverse diet in Ethiopia. Conflict and insecurity have also played a role as displaced children face a higher risk of malnutrition.

In respect to Tigray, it is feared that a large number of children remain cut off from humanitarian assistance and could therefore suffer life-threatening malnutrition. Based on 2020 achievements and an assumption that the caseload will increase by 25%, UNICEF projects that 113,777 under-five children and PLW will require treatment for acute malnutrition. Within this, 7,880 will require SAM treatment.

In Somalia, an estimated 849,900 children under the age of five are likely to suffer acute malnutrition through 2021. Within this, 143,400 will likely require lifesaving treatment for SAM. Child feeding indicators point to poor feeding practices with just about 16% of children aged 0-6 months exclusively breastfed and just about 18% of children aged 6-24 months receiving an adequate diverse diet. Other malnutrition drivers in Somalia include high

⁸ According to UNOCHA, an additional 1.3 million people are in need of humanitarian assistance.
[UNOCHA. Ethiopia - Tigray Region Humanitarian Update. 04 February 2021](#)

⁹ [UNHCR. UNHCR finds dire need in Eritrean refugee camps cut off in Tigray conflict. 19 January 2021](#)

morbidity, low immunization and Vitamin A supplementation, as well as food insecurity.

Market and trade

Regional cross border trade for most commodities has been progressively increasing, driven by trader adaptations to operating under COVID-19 restrictions, and increased import demand in Kenya and South Sudan in the last quarter of 2020.

In terms of prices, maize prices followed seasonal patterns across most markets but were above the recent five-year average in Ethiopia and South Sudan. In most markets in Ethiopia and Kenya, prices declined gradually due to the ongoing October 2020-January 2021 harvest. On the hand, prices in most markets in Tanzania increased as the lean season progressed. In Burundi, prices atypically declined owing to reduced exports to the DRC following COVID-19 restrictions. In 2021, prices will likely be elevated in Ethiopia and South Sudan as a result of macro-economic challenges, including inflation and currency depreciation. Similarly, in Kenya and Somalia, prices will also likely be slightly above average.

Sorghum prices also followed seasonal trends but remained elevated in Ethiopia, South Sudan and Sudan due to insecurity and high inflation. In 2021, prices are expected to follow seasonal trends but will likely continue to be above the recent five-year average in Ethiopia, South Sudan and Sudan due to inflation.

Local currencies in Burundi, Ethiopia, South Sudan and Sudan will likely continue to depreciate, due to adverse macro-economic conditions, therefore contributing to above-average prices for imported items.

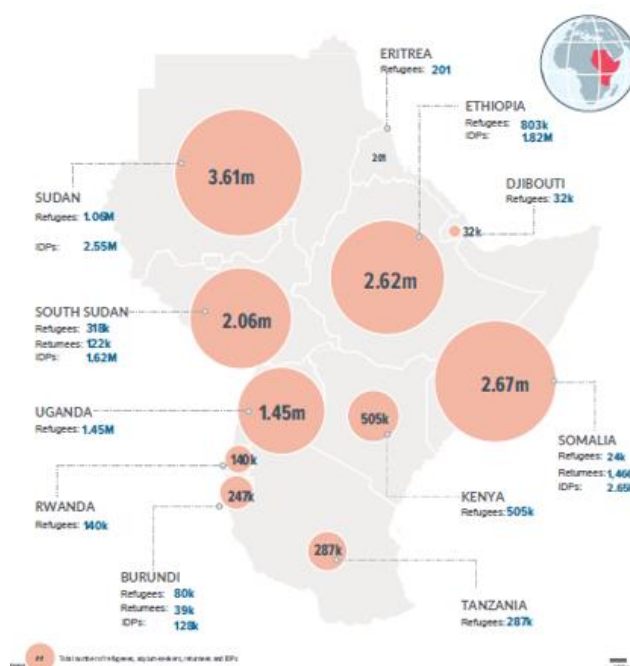
The ongoing conflict in Tigray continues to disrupt trade activities. It is therefore likely that commodity prices there will increase as supply chains are disrupted.

More information can be found [here](#).

Displacement

Around 13.4 million people remain displaced in Burundi, Djibouti, Eritrea, Ethiopia, Kenya, Rwanda, Somalia, South Sudan, Sudan, Tanzania and Uganda. This includes about 8.76 million IDPs and 4.69 million refugees and asylum seekers. South Sudan remains the largest producer of refugees at 2.11 million. Uganda, on the other hand, remains the largest host with 1.45 million refugees within the country.

Refugees, asylum seekers, returnees and IDPs in 2020



Source: UNHCR

In addition, a total of 162,525 refugees returned to their countries of origin in Burundi, Somalia and South Sudan in 2020.

The progression of conflict in Tigray continues to drive displacement. According to UNHCR, a total of 60,200 Ethiopian refugees were registered in eastern Sudan between 7 November 2020 and 25 January 2021. Towards the end of January 2021, arrivals ranged between 150-200 per day. Significant internal displacements have also been reported due to the crisis.

With respect to COVID-19, a total of 1,860 cases had been reported among displaced populations as of 19 January 2021. Of these, 1,422 cases were among camp-based refugees, 200 among urban refugees,

79 among IDPs and 168 among voluntary returnees to Burundi and South Sudan.

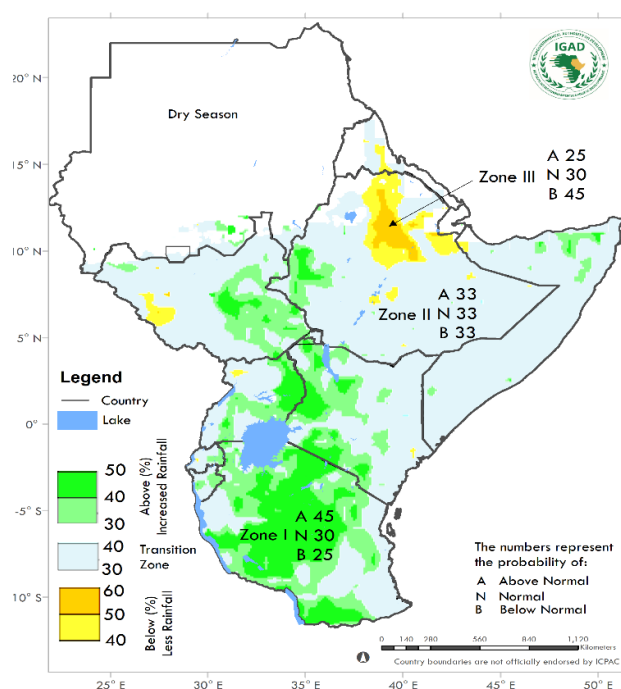
Relatedly, nutrition program adaptations to COVID-19, though necessary, have led to a decline in nutrition program admissions. This is as program data from several refugee sites indicate significant reductions in MAM, SAM and PLW admissions. For instance, a 43% and 72% reduction was recorded in Outpatient Therapeutic Feeding Programs (OTP) and Stabilisation Centres (SC) admissions respectively, in Dadaab and Kakuma refugee camps in Kenya.

Funding shortfalls continued to drive food ration cuts – ranging between 10-40% – among refugees in Djibouti, Ethiopia, Kenya, South Sudan, Tanzania and Uganda. This is likely to exacerbate food insecurity and malnutrition among the affected populations.

Climate

According to the IGAD Climate Prediction and Applications Centre (ICPAC), the Indian Ocean Dipole (IOD) and the El Niño-Southern Oscillation (ENSO), both of which are important drivers of rainfall variability in the region, are tending towards a neutral status.

MAM 2021 rainfall outlook



Source: ICPAC

As a result, La Niña is weakening as sea surface temperatures over the central tropical Pacific continue to near average. Minimal effect is therefore expected over the region going forward.

In respect to the March-May (MAM) 2021 season, a wetter than usual season is expected over most farming areas in the central and southern parts of the region, while a drier than usual season is expected over north-eastern Ethiopia. The season is expected to start early in parts of Tanzania, Uganda, western Kenya, western South Sudan, south-western Ethiopia, and southern Somalia.

More information can be found [here](#).

Humanitarian snapshot

As of 27 January 2021, USD 3,622.2 million, representing 56% of the USD 6,428 million required for the combined humanitarian response plan (HRP) and COVID-19 response in the IGAD region had been met. Somalia was the most funded country, at 82%.

Humanitarian funding by country (million USD)

Country	Required	Funded	Funded (%)
South Sudan	1,900.8	1,084.4	57%
Sudan	1,633.4	869.7	53%
Ethiopia	1,250.8	704.9	56%
Somalia	1009.9	827.2	82%
Uganda	316.4	23	7%
Kenya	286.8	108	38%
Djibouti	30	5	17%

Source: OCHA

In relation to food and nutrition funding coverage, just 18% of the funding requirement for food and nutrition responses in Kenya had been met. In Djibouti and Uganda, aside the COVID-19 emergency appeal, no other food and nutrition response appeals received funding.

FSNWG Desert Locust Impact Assessment

Findings from a Desert Locust impact assessment conducted in Ethiopia, Kenya and Somalia by the FSNWG point to significant desert locust related losses. Roughly one-third of assessed cropping households and half of assessed livestock rearing households reportedly experienced Desert Locust-related crop and pasture losses respectively. Notably, the majority of the impacted households indicated having experienced high or very high losses.

More information can be found [here](#).

ongoing ration cuts will significantly aggravate food consumption gaps among those affected.

- Continued Desert Locust surveillance and control operations in order to identify and rapidly control new swarms and hopper bands.
- Strengthened food security monitoring and early warning systems, with an increased focus on anticipatory action, given the increasing frequency and severity of food security and nutrition shocks in the region.
- Close monitoring of the situation, in view of escalating insecurity and conflict in parts of the region, as well as the uncertainty with regards to rainfall levels during the upcoming March to May season.

Recommendations

The FSNWG recommends:

- Immediate scale-up of multi-sectoral humanitarian assistance to save lives and avert total collapse of livelihoods in areas with populations categorised in Catastrophe (IPC Phase 5) and Emergency (IPC Phase 4), particularly in South Sudan. Food assistance is also required for households in Crisis (IPC Phase 3) while livelihood support is recommended for households facing Stressed (IPC Phase 2) or higher outcomes.
- Nutrition interventions should be sustained and expanded to areas with low coverage to support recovery and prevent deterioration in the nutrition situation.
- Long term investment in information systems for routine nutrition data.
- Proactive identification of ways and means to provide lifesaving and livelihoods support to populations affected by the ongoing conflict in Tigray, including advocating for humanitarian access to vulnerable populations in affected areas.
- Additional funding to support the refugee response in the region. If not addressed,

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