

MADAGASCAR

GREAT SOUTH &
GREAT SOUTH-EAST



IPC ACUTE FOOD INSECURITY ANALYSIS

July 2019 – June 2020

Published in November 2019

CURRENT July– October 2019			PROJECTED Nov 2019– March 2020			PROJECTED April –June 2020		
<p>500,000 14% of the population</p> <p>People facing severe acute food insecurity (IPC Phase 3+)</p> <p>IN NEED OF URGENT ACTION</p>	Phase 5 Catastrophe	0	<p>730,000 20% of the population</p> <p>People facing severe acute food insecurity (IPC Phase 3+)</p> <p>IN NEED OF URGENT ACTION</p>	Phase 5 Catastrophe	0	<p>415,000 12% of the population</p> <p>People facing severe acute food insecurity (IPC Phase 3+)</p> <p>IN NEED OF URGENT ACTION</p>	Phase 5 Catastrophe	0
	Phase 4 Emergency	0		Phase 4 Emergency	37,317		Phase 4 Emergency	0
	Phase 3 Crisis	500,069		Phase 3 Crisis	690,651		Phase 3 Crisis	414,706
	Phase 2 Stressed	1,313,228		Phase 2 Stressed	1,349,974		Phase 2 Stressed	1,268,870
	Phase 1 Minimal	1,748,874		Phase 1 Minimal	1,484,226		Phase 1 Minimal	1,878,596

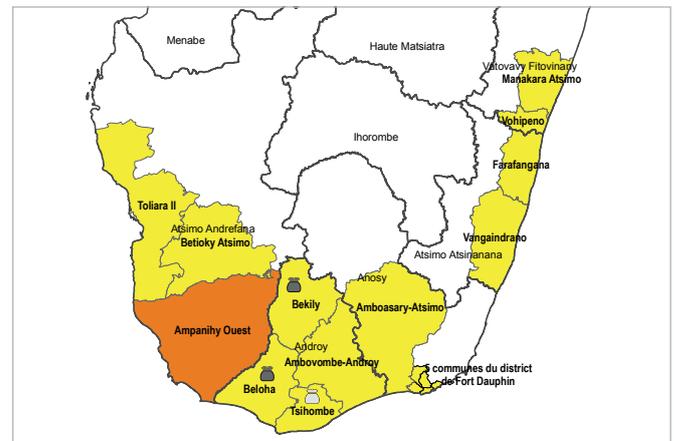
Overview

For the period from July to October 2019, compared to 2018 for the same period, **the situation has improved considerably**: only one district (Ampanihy) out of the 13 analysed is in **Crisis (IPC Phase 3)**, and the rest are in **Stress (IPC Phase 2)**. No district is in IPC Phase 4. Despite this improvement, in all the areas analysed, **more than 500,000 people are in severe acute food insecurity (IPC Phase 3 and above)**, representing **14% of the population in the areas analysed**. Ampanihy District has a higher proportion of the population in this category (25% of the population) than other districts, with nearly 99,600 people.

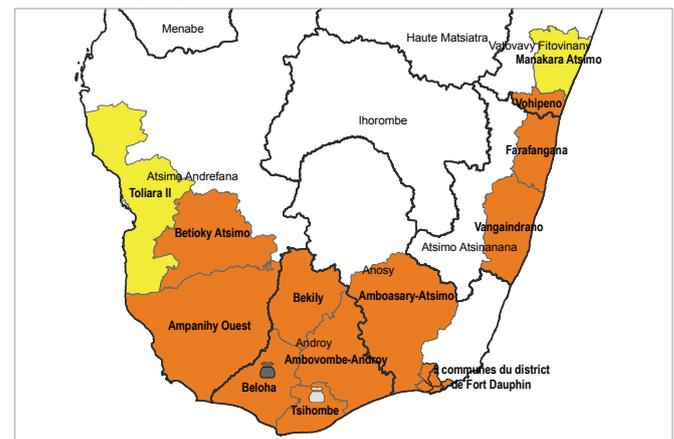
From November 2019 to March 2020, which coincides with the lean season, it is estimated that the situation will likely worsen, with all districts moving to IPC Phase 3 (Crisis) except Tuléar II and Manakara Atsimo. The West Ampanihy District will likely remain in IPC Phase 3 and will continue to record the highest population and proportion of people in IPC Phase 4 (30%), and also between April and June 2020 (20%) during the harvest period.

In all the periods analysed, the key drivers behind the food insecurity situation in these areas include limited access to food, given the high proportion of food expenditure in the household budget, as well as the precariousness of income-generating activities, hazards and shocks negatively impacting food availability, particularly the attack of crop pests (Fall Armyworms, rats, locusts). Structural poverty is also a factor limiting the household's ability to rebound in the event of shocks, especially in terms of rebuilding livelihoods.

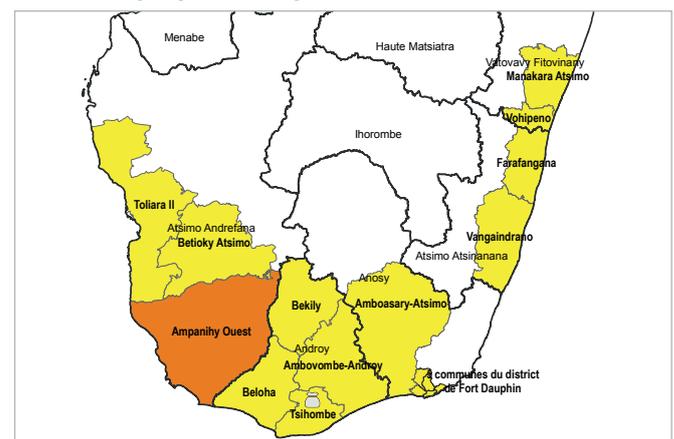
Situation current (July – October 2019)



Situation projected (November 2019 - March 2020)



Situation projected (April - June 2020)



Key for the Map

IPC Acute Food Insecurity Phase Classification

- 1 - Minimal
- 2 - Stressed
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Areas not analysed

> 25% of households meet 25-50% of caloric needs through assistance

> 25% of households meet > 50% of caloric needs through assistance

RECOMMENDATIONS FOR ACTION

Response priorities

Overall, the most vulnerable categories of households classified in IPC Phase 3 and 4 will need targeted support to protect lives and livelihoods.

Generally, actions will be more oriented towards providing food aid to people who have difficulty meeting their needs. To frame the responses, the establishment of a response plan, expanded humanitarian assistance packages of a multisectoral nature (food security, nutrition, Water Sanitation and Nutrition, health, etc.), will be considered a priority.

In addition, given the rainfall forecasts, which range from normal to above normal for the months of January to March, support in terms of agricultural inputs (adapted seeds, phytosanitary products, etc.) is necessary, especially for poor and very poor households that can engage in productive activities as part of early actions.

Situation monitoring and update

The next IPC analysis will take place in October 2020. An update of the situation can be made around April 2020 if the need arises through the monitoring of some major indicators (price, precipitation, number of admissions, etc.). Thus, the monitoring systems currently in place should be strengthened and the following actions put in place:

- Strengthen information and monitoring systems on vulnerability to food insecurity in relation to the Early Warning System (EWS) at the national level, making it possible to inform decision-makers on the programming of early actions aimed at strengthening the resilience of vulnerable households.
- Maintain nutritional surveillance and early warning systems to ensure reliable data for timely decision-making and close monitoring of pockets of malnutrition.
- Maintain care arrangements for children suffering from acute malnutrition at the level of health centres and advanced strategies, while ensuring the proper functioning of the supply system to avoid disruptions.
- Strengthen Infant and Young Child Feeding and WASH awareness actions at the community level in order to stabilize households on actions to prevent acute malnutrition and initiate resilience.

The results of this analysis show that even in the absence of major shocks, food insecurity remains a very significant challenge for the populations of southern Madagascar. The presence of structural limiting factors are at the root of the food insecurity problem in the area and explains its chronic nature. Emergency food assistance interventions, even if necessary for humanitarian reasons, are not sufficient to address the causes of the problem. A chronic food insecurity IPC analysis could be conducted to better understand the factors that determine the causes of chronic food insecurity and its magnitude and severity.

Risk factors to monitor

- Disease: The prevalence of childhood diseases (diarrhoea, Acute Respiratory Infections (ARIs) and malaria) is likely to increase due to rainfall.
- Household income: Access to food is a major limiting factor to food security in the areas, given the high proportion of the household income that is dedicated to purchase of food and the precariousness of income-generating activities.
- Precipitation: A lack of seasonal precipitation is observed. A significant dry period is likely to occur during the rainy season. This can result in water shortages, which will lead to lower agricultural yields, higher food prices, leading to food insecurity for the most vulnerable households.

On the other hand, moderate to heavy rainfall events during the rainy season will be observed in some areas, especially in the Great South East part. A series of disease outbreaks (plague, malaria), floods, damage to infrastructure (dams, reservoirs, roads, etc.) could be a threat.

- Fall Armyworms: For the Far South, pests affect maize, which can cause significant losses for farmers and threaten the livelihoods of vulnerable farmers and the food and nutritional security of the population of the area.

What is the IPC and IPC Acute Food Insecurity?

The IPC is a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. The IPC consists of four mutually reinforcing functions, each with a set of specific protocols (tools and procedures). The core IPC parameters include consensus building, convergence of evidence, accountability, transparency and comparability. The IPC analysis aims at informing emergency response as well as medium and long-term food security policy and programming.

For the IPC, Acute Food Insecurity is defined as any manifestation of food insecurity found in a specified area at a specific point in time of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. It is highly susceptible to change and can occur and manifest in a population within a short amount of time, as a result of sudden changes or shocks that negatively impact on the determinants of food insecurity.

Contact for further Information

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IPC Global Support Unit
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Classification of food insecurity and malnutrition was conducted using the IPC protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-JRC, FAO, FEWSNET, Global Food Security Cluster, Global Nutrition Cluster, IGAD, Oxfam, PROGRESAN-SICA, SADC, Save the Children, UNICEF and WFP.

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