9.6 million people were severely food-insecure in Southern Africa at the start of the lean season (October 2018- April 2019), due to an increase of 1.1 million people in Malawi. Malawi, which now has an estimated 3.3 million people in Crisis or Emergency (IPC phase 3 and 4), and Zimbabwe, where nearly 2.4 million people are in Crisis or Emergency, have the highest numbers of severely food insecure people in the region. Meanwhile, three districts in Zimbabwe and two districts in Madagascar were classified in Emergency (IPC phase 4) at the outset of the lean season, as a result of extreme loss of livelihood assets. There are also pockets of people facing Emergency food insecurity (IPC phase 4) in Eswatini, Lesotho and Mozambique.

There is at least an 80 per cent chance of an El Niño phenomenon between October and December 2018, which could exacerbate the deteriorating situation. An El Niño during this time is generally associated with below-average rain in parts of Southern Africa - especially southern Madagascar and the border areas of north-east South Africa, southern Mozambique and south-east Zimbabwe - and could therefore exacerbate the impacts of the erratic rainfall received to date in 2018. Eswatini, Lesotho, Madagascar, Malawi, Mozambique and Zimbabwe have been identified as the six highest-risk countries and humanitarian partners activated the phase 2 of the Global Inter-Agency Standard Operating Procedures (SOPs) for Early Action to El Niño/La Niña episodes. In addition, there is an increased chance of an African armyworm outbreak - a pest that devastates cereals and grasses - in the 2018/19 rainy season due to El Niño. Early action is therefore critical to address immediate needs and protect livelihoods ahead of a potentially poor cropping season.
3. **Rising levels of food insecurity are increasing protection risks, particularly for women and children.** Global evidence demonstrates that food insecurity exacerbates the risk of violence, abuse, exploitation, neglect and family separation. During drought, there is an increased likelihood of child marriage and exposure to gender-based violence. The erratic rains this year are already affecting vulnerable families – including in Madagascar and Zimbabwe - who are traveling long distances in search of alternative livelihoods. This exposes women, in particular, to a heightened risk of gender-based violence. The risk of exposure to domestic violence and intimate partner violence are also expected to increase as a consequence of heightened family tensions caused by crop damages and income losses. The link between gender-based violence, sexual violence and HIV is well established, especially in countries with high HIV burdens, such as Zimbabwe. In addition, food insecurity can cause people to stop taking Antiretroviral Therapy (ART), as one of the side effects of the drugs is increased feelings of hunger.

4. **The number of cholera cases in Southern Africa doubled from the end of August, with over 21,000 cases reported by the end of October, mainly due to a new outbreak in Zimbabwe and an increase in cases in Tanzania.** In Zimbabwe, the outbreak declared on 6 September 2018, has been brought under control and the Oral Cholera Vaccination campaign has reached 92 per cent of the nearly 1.5 million people targeted in Harare and neighbouring areas. In Tanzania, nearly 700 new cases were recorded, while in Malawi, a new outbreak was reported in Salima district. In Mozambique, new outbreaks were confirmed in Cabo Delgado and Nampula provinces, with 650 and 1,650 cases respectively reported by the end of October.

5. **Other communicable diseases - including plague, measles and Hepatitis E - continue to impact countries in the region, while the risk of Ebola spreading beyond the Democratic Republic of the Congo (DRC) remains very high.** In Madagascar, 103 suspected plague cases (bubonic and pulmonary) were reported in September and October, including 38 confirmed cases and seven deaths. A measles outbreak was also confirmed in Madagascar’s capital, Antananarivo, on 3 October, with more than 1,900 suspected cases reported as of 3 November. The outbreak is attributed to low population immunity, and only 58 per cent of people have been vaccinated against measles in Madagascar. Separately, in Mauritius, more than 1,100 measles cases were recorded between March and October 2018. Meanwhile, Namibia continues to battle a Hepatitis E outbreak which has affected seven out of 14 districts across the country. Angola, Tanzania and Zambia are undertaking preparedness activities to prevent the spread of the Ebola Virus Disease outbreak from the Democratic Republic of Congo (DRC). These countries are classified as priority 2 for preparedness, as they neighbour DRC but are considerable distances from the epicentre of the outbreak.

6. **Civilians have been impacted by violence in both Comoros and Mozambique, while an estimated 350,000 Congolese nationals have been returned to DRC from Angola.** In Comoros, localized clashes on the island of Anjouan in October resulted in people temporarily losing access to water and power, and a small number of people were briefly displaced. In Mozambique, the population of Cabo Delgado have experienced attacks by armed groups resulting in lootings and burned houses. In September, 55 homes were allegedly burned during an attack, which reportedly killed and injured several people. Meanwhile, an estimated 350,000 Congolese nationals - including 80,000 children - have been returned from Angola to DRC since the Government of Angola’s “Operação Transparência” started on 25 September. Reports indicate that returnees have experienced violence on both sides of the border, including sexual violence.

7. **Governments and humanitarian partners are mobilizing targeted and time-bound assistance to save lives and livelihoods during the Southern Africa lean season.** However, comprehensive action by governments and development partners is urgently needed to address the root causes of chronic vulnerability in the region, in particular through investments in shock-responsive social protection systems. Regional humanitarian partners are supporting governments to enhance their preparedness for disasters and assisting the Southern Africa Development Community (SADC) to develop a Regional Resilience Strategy. In addition, broader macro-economic and policy measures are required to reduce chronic needs and respond to crises in the future. These include building fiscal buffers, building resilient production systems and markets, and building on existing social safety net programmes, as highlighted following the 2016-2017 El Niño-induced drought. Without urgent and comprehensive action to this end, chronic needs across the region will continue to become acute when vulnerable communities are hit with even the smallest shock.

* For further information on the food insecurity and nutrition situation, see the latest Food and Nutrition Security Working Group Update.

** For the purposes of these Key Messages, the Southern Africa region includes: Angola, Botswana, Comoros, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Tanzania, Zambia and Zimbabwe.