

EL NIÑO:

OVERVIEW OF IMPACTS AND HUMANITARIAN NEEDS IN AFRICA



SUMMARY

The humanitarian impact of the 2015-2016 El Niño is deeply alarming, affecting over 60 million people globally. The El Niño phenomenon is now in a neutral phase, but food insecurity caused by drought is not likely to peak before December. East and Southern Africa are the most affected regions, and humanitarian impacts will last well into 2017.

El Niño has affected food security and agricultural production, with cascading effects on livelihoods, health, water, sanitation, education and other sectors. In Eastern and Southern Africa,¹ some 50 million people are food insecure, many due to drought exacerbated by El Niño or due to a combination of drought and conflict. In Africa appeals for financial assistance total over US\$3.7 billion - with some \$1.5 billion available, the funding gap stands at over \$2.2 billion. The Southern African Development Community (SADC) plans to soon issue a regional appeal, which may increase the funding request. SADC indicates that more than 40 million people are at risk of being food insecure by the end of the year, of which an estimated 21 million are thought to require humanitarian assistance.

The El Niño-Southern Oscillation, a change in global weather conditions caused by the warming of part of the Pacific Ocean, has three states: El Niño (warming), La Niña (cooling) and Neutral. La Niña conditions often, but not always, follow El Niño conditions, and the likelihood of a La Niña developing in the final quarter of 2016 has increased to 75 per cent. On average, a La Niña event may have even greater overall humanitarian impact, as El Niño has eroded coping capacities. Areas now experiencing drought could face flooding, and areas that have seen excessive rainfall with El Niño could experience drought. This means that La Niña preparedness and early action need to be built into El Niño response and recovery efforts, and development actors should increase risk and vulnerability-reduction efforts in priority areas, including by reprioritizing existing development funding to mitigate the risks.

This year's El Niño took place in a world already dramatically affected by climate change, hitting the poorest communities hardest. Women and girls are affected disproportionately by this crisis. Lack of access to clean water means that girls must spend hours every day accessing water instead of going to school; boys spend hours every day leading cattle to water instead of going to school; and children with diarrhea struggle to recover from dehydration. The humanitarian situation due to the ongoing drought aggravates the already challenging education context in these regions. In addition to responding quickly to critical food, water, nutrition, health and livelihoods requirements, efforts must be focused on building climate resilience and the capacity to respond to future shocks.

¹ As of June 2 - Angola, Botswana, Burundi, Djibouti, DRC, Ethiopia, Kenya, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Somalia, South Africa, South Sudan, Sudan, Swaziland, Tanzania, Uganda, Zambia, Zimbabwe.

EAST AFRICA

REGIONAL OVERVIEW

El Niño has triggered drought in Ethiopia, the Somaliland and Puntland regions of northern Somalia, Sudan, Eritrea, Djibouti and eastern Chad. Water and pasture shortages damaged crop and livestock production and caused communities in East Africa to turn to unprotected water sources, increasing the risk of waterborne diseases, and poor sanitation and hygiene. Heavy rains from April brought extensive relief in parts of north east and south east Ethiopia, and some parts of Puntland and Somaliland, although rain has caused significant dispatch-and-distribution delays for the emergency response. In agricultural and pastoral areas of southern and central Somalia and semi-arid Kenya, improvements have been more modest, with drier-than-average conditions still affecting pastoral and rain-fed agricultural areas. Forecasts for the remainder of this season are moderately optimistic for Ethiopian regions, while below-average seasonal rainfall is expected for most of semi-arid Kenya and Somalia. Good recovery prospects for pastoral and agricultural livelihoods are balanced by the possibility of damaging floods.

Ethiopia

The worst drought in 50 years has tripled humanitarian needs since early 2015. A total of 10.2 million people need food assistance and this number may grow in the second half of the year (to be confirmed following the completion of *belg*/mid-year assessment). 6 million children remain at risk from hunger, disease and lack of water. Malnutrition rates are staggering, with 219 of 732 of Ethiopia's *woredas* (districts) classified² as Priority 1 - facing a dire food security and nutrition crisis. It is estimated that 20 per cent of the expected 458,000³ severely malnourished children will develop medical complications that need intensive life-saving medical treatment in hospital-based therapeutic feeding centres. At least 2.5⁴ million children under age 5 and pregnant and lactating mothers are projected to suffer from moderate acute malnutrition (MAM) during the year. Some 5.6 million farmers need immediate agricultural support, and some 3.6 million people require emergency health interventions.

Improved *belg*/spring (March – May) rains since late April eased water trucking demands in parts of drought-affected north eastern and south eastern Ethiopia. However, heavy rains caused river overflows and flash floods affecting more than 400,000 people so far. The National Disaster Risk Management Commission (NDRMC)-led Flood Task Force estimated that some 486,000 people will be affected by floods during *belg* 2016, including 189,000 expected to be displaced. Nearly 150,000 households will require shelter and non-food item support due to flooding, conflict over access to resources, the recent cross-border raid from South Sudan, and the continuing impact of the drought. With the rains filling ponds and surface water sources, the risk of water-borne disease outbreaks increased, including acute watery diarrhoea (AWD). Since December, some 2,000 AWD cases were reported in 27 *woredas*. On 9 June, the Federal Ministry of Health confirmed an AWD outbreak in the capital Addis Ababa.

The education system is heavily affected when flooding destroys schools. The loss of assets and livelihoods has compromised the capacity of parents and caregivers to send their children to school and cover the costs of clothing, school materials and food. Over 2 million primary school students (47 per cent girls) were affected by drought and in some areas by floods. There are risks of increased drop-out rates of children in the early years of schooling. To encourage school attendance, humanitarian actors are calling for more support for teachers, including in the provision of drinking water and personal hygiene, cooking and learning materials. As of early May 2016, humanitarian requirements in the education sector have doubled over the original HRD due to planned efforts to extend the 2016 school year/semester to allow completion of education of students whose learning was interrupted due to the drought, and to ensure continued school feeding for the start of the next school year. The rains also caused food dispatch and distribution delays in May, although distribution has increased again since the end of May thanks to a break in rains. The newly activated Logistics Cluster is supporting the Government to enhance logistics planning and coordination; transportation and fleet management; and information management

² March/April Hotspot reclassification - National Disaster Risk Management Commission's (NDRMC) Emergency Nutrition Coordination Unit

³ Increased needs from the 2016 HRD released in December 2015

⁴ Increased needs from the 2016 HRD released in December 2015

capacity amongst others, in order to increase the efficiency of dispatch and distribution of food and non-food items to affected populations.

Somalia

Nearly 4.7 million people, or 38 per cent of the population, are food insecure and are in need of humanitarian assistance. Of these people, 1.7 million are in drought-affected Puntland and Somaliland. Nearly 100,000 children under 5 are acutely malnourished and in urgent need of treatment. The number of children enrolled in nutrition programmes has increased in the most affected regions and water sources are overstretched. Since October 2015, humanitarian partners have scaled up critical life-saving and life-sustaining assistance in parts of Puntland and Somaliland. On 31 March, aid agencies launched a 'Call for Aid' seeking \$105 million to reach over 1 million people in Puntland and Somaliland. In some areas, 60 to 80 per cent of herds have been lost, with devastating impact on families who depend on livestock for income, food and status. The *Gu* rains have offered relief in some drought affected areas, but the crisis remains of serious concern given the cumulative impact of up to four failed rainy seasons. At the same time, heavy rains led to flooding in Belet Weyne, Hiraan region resulting in displacement of about 70,000 people and damage of crops and infrastructure. There is a significantly increased risk of waterborne and vector-borne diseases owing to unsafe water use. Acute watery diarrhoea /cholera cases have been reported in 10 districts in southern and central Somalia. As of late May, nearly 10,000 cases and 441 deaths have been reported nationally. Of these cases and deaths, 58 per cent and 64 per cent were children under 5 years of age respectively. The number of reported cases of AWD/cholera in the first half of 2016 is 140 per cent higher than those reported for the whole of 2015. Based on data from previous years, projections from WHO indicate there could be up to an additional 15,000 severe cases and 60,000 mild/moderate cases over the coming six months; with a peak of the outbreak by end of July to beginning of August. Priority interventions include the provision of access to safe water via vouchers for water supply, the rehabilitation and repair of strategic boreholes and water points and distribution of hygiene kits.

Sudan

In Sudan El Niño has reduced water availability and cultivation areas, delayed planting and resulted in poor pastures. An estimated 3.5 million people are affected in 82 localities across the country, including over 1.5 million women and over 680,000 children. The nutritional status of children remains a countrywide challenge, with acute malnutrition expected to increase by May. An estimated 280,000 children with acute malnutrition are expected to require preventive and life-saving assistance in 72 El Niño-affected localities across Sudan. Declining livestock prices are reducing purchasing power and staple food access. The Sudan Acute Integrated Phase Classification (IPC) analysis from April to July 2016 projected an early start to the lean season in April 2016, and estimated more than 4.4 million people in Sudan will be facing Crisis (IPC Phase 3), including more than 100,000 people in Emergency (IPC Phase 4). Since January 2016, about 71,000 South Sudanese refugees from conflict-affected and food-insecure areas of South Sudan have arrived in Sudan, about 75 per cent more than during the same period last year. The start of the rainy season in June/July is likely to block roads and reduce the influx of refugees from South Sudan.

In February the El Niño Mitigation and Preparedness Plan was prepared jointly by international agencies and the Government to outline the current and anticipated humanitarian impact. The plan appealed for \$82 million over three months. Recently collected nutrition data underline the worrying nutrition situation in Sudan. The Sudan Ministry of Health and UNICEF recently found 95,023 of nearly half a million children acutely malnourished, including 17,848 children with severe acute malnutrition referred for treatment, a 30 per cent increase compared to the same period last year. This increase is attributed to increased displacement due to conflict, reduced food access following below-average harvests in 2015 due to El Niño, and the ongoing expansion of screening and treatment.

SOUTHERN AFRICA

REGIONAL OVERVIEW

El Niño has resulted in a severe drought across much of southern Africa, affecting nearly 41.4 million people out of which at least 21.7 million people are in need of assistance across all SADC countries. In the seven priority countries⁵ that will be prioritized for humanitarian assistance by RIASCO, this amounts to 12.8 million people who need immediate assistance. It has been the driest growing season in 35 years, and food security is likely to start deteriorating further by July, reaching its peak between December 2016 and March 2017. Zambia and Zimbabwe experienced severe power shortages from reduced hydro-power output while maize prices have continued to increase. South Africa, traditionally a maize exporter, will have to import at least 6 million tons of maize—its staple grain—during 2016. Southern African countries face a negative economic outlook, mainly due to falling commodity prices and weakening African currencies. Food insecurity, water scarcity and other factors continue to aggravate the countries' fragile nutrition situation and is worsening maternal and child malnutrition in Angola, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Swaziland, Zimbabwe and Botswana. In Southern African countries, people with greater nutritional needs remain most at risk, including young children, pregnant and lactating mothers, the elderly and those living with tuberculosis and/or HIV on treatment. Untreated episodes of severe and moderate acute malnutrition will expose affected children to increased risk of mortality and lead to a further deterioration of the already high chronic malnutrition rates and further complicate the already dire HIV situation. The last eight months, have already seen a deterioration of the nutrition situation in a number of countries including drought-hit areas of Zimbabwe, Malawi, Madagascar and Mozambique. Women and girls are affected disproportionately by this crisis. Lack of access to clean water means that girls must spend hours every day accessing water instead of going to school; boys spend hours every day leading cattle to water instead of going to school; and children with diarrhea struggle to recover from dehydration. The humanitarian situation due to the ongoing drought aggravates the already challenging education context in these regions.

Drought emergencies have been declared in Lesotho, Malawi, Swaziland and Zimbabwe, while Mozambique declared a 90-day institutional red alert. In addition, seven of South Africa's nine provinces, which account for almost 90 per cent of the country's maize production, have been declared drought-disaster areas. In mid-March, the SADC Council of Ministers approved declaring of a regional drought disaster. The Governments of Lesotho, Malawi, Mozambique, Swaziland and Zimbabwe have drafted response plans for immediate assistance amounting to over \$1 billion, with the HCT response plans for Lesotho, Mozambique and Zimbabwe totaling \$478 million. Even with the delayed arrival of seasonal rainfall, the recharging of dams and water tables has been minimal. Water levels are still significantly below average for this time of year in most drought-affected countries, raising serious concerns about water availability in communities during the upcoming dry season. At the same time, flood events have been recorded in several countries. In Angola, Malawi, Mauritius, Mozambique and Tanzania tens of thousands have been affected, with thousands of homes damaged.

SADC has recently finalized their annual regional vulnerability assessment process, and is preparing an Appeal. The Southern Africa Regional Interagency Standing Committee (RIASCO) partners are elaborating a Regional Plan of Action which has been developed together with and is complementary to the SADC appeal. The RIASCO action plan addresses not only the immediate humanitarian needs, but also outlines what needs to be done to build the resilience of the affected population to better handle future shocks, and lay out the macro-economic measures required to better enable the countries of the region to respond to such crises now and in the future.

Angola

An estimated 1.25 million people are food insecure, as El Niño is causing another year of failed harvests. This number is the current official government figure being used in the absence of new assessment results. 580,000 people are targeted for assistance. Due to further decline in income due to falling oil prices and depreciation of the Kwana, basic food basket prices increased by 800 per cent, decreasing access to food. Imported products like veterinary medical supplies have registered price increases of as much as 530 per cent. Agricultural and livestock losses in 2015 were estimated at \$242.5 million. This year the country is also battling an outbreak of foot and mouth disease, which is adding to livestock deaths. In all livestock deaths have increased to 500,000 head of cattle

⁵ Angola, Lesotho, Madagascar, Malawi, Mozambique, Swaziland and Zimbabwe

due to the spread of water-borne disease outbreaks and the lack of vaccinations. The Ministry of Agriculture estimates a production deficit for 2016 of 900,000 tons, representing the 40 per cent of expected production. Food insecurity is expected to worsen from August, possibly exacerbated by La Niña effects that could include flooding. Exacerbating the problem even further, is the increasing cases of yellow fever (YF) that have now been reported in 18/18 provinces of Angola. A total of 3,023 yellow fever suspected cases have been recorded, including 337 deaths (case fatality rate 11.1 per cent). Despite partners' (WHO, IFRC and MSF) extensive vaccinations there is increase in local transmission particularly in provinces located in the border areas. A vaccination campaign targeting these new areas is being implemented although vaccine stock levels are low and remain a source of concern. The risk of spread to neighbouring countries remains very high.

Lesotho

Lesotho is currently experiencing an unprecedented El Niño induced drought. According to the LVAC assessment 709,394 people, close to 50 per cent (about 48 per cent) of the rural population are at risk of livelihoods and food insecurity between May 2016 and April 2017. This is likely to be compounded by a second peak of acute water shortages expected to return sometime in the third quarter of 2016. Together with an almost 90 per cent decline in agricultural production during the last agricultural season, the rise in prices has been a large driver in the increase in numbers of food insecure people. The price per kilo of maize on average has risen from 3 Maluti to 10 Maluti per kilo. In addition to this the national cattle herd has decreased with 30 per cent of households reporting that they lost between 2-3 cattle. Although acute malnutrition was found to be within acceptable ranges, chronic malnutrition is widespread among children under five years, with severe stunting high (42.7 per cent) in children aged 18 to 29 months. Following the higher use of unprotected water sources, the Ministry of Health (MoH) data shows a peak of 462 cases of bloody diarrhea reported in February (the MoH outbreak alert threshold is 71), with a trend of reduction from February to the present in line with the end of the 'diarrhea season'. Studies conducted by UNICEF showed an increasing number of ART clients lost to follow up in 28 per cent of the health facilities. In the case of Maseru district these observed losses increased fourfold. Anecdotal findings indicated reduction in household food availability was the main factor attributable to this phenomenon. 42 per cent of the respondents of a Child Protection Rapid Assessment noted an increase of GBV incidences during the period of the drought and indicated sexual violence. The same survey showed that 67 per cent of health providers don't follow the national protocol in the management of GBV cases.

Madagascar

The Grand Sud, chronically arid, where 1.8 million people reside, is the hardest hit part of the country and only received 50 per cent of normal rains since May 2015, with significant implications for agriculture. Infant mortality in the Grand Sud is already 47 per cent higher than the national average. The most vulnerable groups are the estimated 267,000 women of childbearing age, including 51,000 pregnant women, and 205,000 children under the age of 5. Access to water and sanitation is also a major concern. 665,000 people (including 333,750 women and girls) are severely food insecure, the highest figure in a decade. In April 2016 mass screening of children under age 5 showed pockets of acute malnutrition from 15 per cent to 22 per cent in drought-affected communes. An estimated 80 per cent of losses are predicted for the main harvest this month. The full effects of El Niño on food security are expected at the end of 2016 and at the beginning of 2017 - the peak of the crisis is not yet been reached. A 12-month humanitarian response plan (April 2016 to April 2017) has been jointly developed by all humanitarian actors, costed at USD 70 million, currently 37 per cent covered; and a recovery plan linked to long-term drought mitigation will be developed in order to establish good foundations and effective linkages to longer term development.

Malawi

On 12 April, the President declared a State of National Disaster, with 2.8 million people being food insecure. Second-round crop estimates showed an expected national maize deficit of over 1 million tons, which is nearly five times last year's registered deficit. The Malawi Vulnerability Assessment Committee (MVAC), carried out a food security assessment in May which shows that a minimum of 6.5 million people, or 39 percent of the country's population will not be able to meet their food requirements from July 2016 to March 2017. Central and southern regions were hardest hit by drought, while heavy rains in the northern region caused flooding. At least seven displacement camps have been established, with more than 35,000 flood-affected people currently being hosted. Admissions to health clinics caused by moderate acute malnutrition have risen fourfold since January. 230,588 people will need nutrition support; this includes Children, Pregnant and Lactating Women and Malnourished adults

on Anti Retro Viral Therapy and TB treatment. The HCT and government are jointly finalizing a joint Response Plan which will cover the needs in the following sectors: Health, Nutrition, Water and Sanitation & Hygiene, Food Security, Agriculture and Protection. The country is also experiencing a cholera outbreak that started in December 2015. A Post Disaster Needs Assessment is currently underway the results will be utilized to develop a medium term to long term recovery plan.

Mozambique

As of April, 1.5 million people are acutely food insecure and require humanitarian assistance. Few households have any cereal reserves for consumption. The Ministry of Agriculture estimate that 459,000 farmers are affected by drought. As a result, there has been a sharp reduction in the quality of diet since November 2015. Maize prices have increased by almost 100 per cent since last year. Children, particularly girls, are dropping out of school to help fetch water and food, or because families are moving to areas with better conditions. An estimated 191,000 children are expected to be severe acutely malnourished in the next 12 months, and GAM rates for children under age 5 are 15.3 per cent and 15.5 per cent in Sofala and Tete Provinces. On 12 April, the Government declared a 90-day red alert, the highest level of national emergency preparedness, covering the central and southern areas. The Government will disburse \$10.5 million as budgeted in its contingency plan. The Humanitarian Country Team (HCT) has prepared a Strategic Response Plan in order to address the increased needs reported by the government. New food security and nutrition assessment results are expected in late August.

Swaziland

The Swaziland Drought Rapid Assessment Report estimates a 64 per cent reduction in maize production compared with last year's season. Some 320,000 people (about 29 per cent of the total population) are affected by drought. An estimated 67,000 cattle have perished in the drought, threatening lives and livelihoods. The next main harvest season is not until April 2017, meaning food and nutrition indicators are likely to deteriorate over the coming months. Water scarcity is a major consequence of the drought, as boreholes and rivers run dry and rainwater is not available. A lack of water in health clinics and schools has increased the risk of waterborne diseases. The country is now in the dry season, lasting from April to October, meaning the situation is unlikely to improve without intervention. Swaziland has a very high prevalence of HIV/AIDS – 26 per cent among the adult population (15-49 years), and food insecurity negatively affects people living with HIV in a variety of ways. Following the declaration of a State of Emergency in February 2016, the Government published the National Emergency Response Mitigation and Adaptation Plan. The Government has pledged \$23.3 million for immediate and longer-term interventions. The Humanitarian Country Team is preparing a Humanitarian Response Plan (HRP) in order to address the short and medium term needs of the national drought action plan.

Zimbabwe

The combination of a poor 2015 harvest, an extremely dry early season and continuing hot and drier-than-average conditions caused extensive crop failure in Zimbabwe, with some 1.5 million people are in need of immediate food assistance through June. 2016 maize production is likely to be 30-40 percent less than 2015 production, which totaled at 742,000 MT out of an annual requirement of 1.8 million MT. The Zimbabwe Vulnerability Assessment Committee (ZimVAC)'s 2016 Comprehensive Rural Livelihoods, Food Security, and Nutrition Vulnerability Assessment has been completed; its results will inform humanitarian assistance planning figures from July onwards. Based on preliminary results, the ZimVAC has indicated that the prevalence of rural food insecurity will be higher than the 30 percent revealed by the February 2016 Rapid Assessment. The Global Acute Malnutrition (GAM) prevalence is likely to increase beyond the 5.7 percent indicated in February. Nationally, over 7,000 children with SAM have been admitted to therapeutic treatment programmes between December 2015 and May 2016. The economic situation is likely to exacerbate food insecurity, as the country faces decreased investment, cash shortages, high unemployment, limited income opportunities outside of agriculture and reduced aggregate domestic demand causing deflation. In February the Government of Zimbabwe released an appeal for \$1.5 billion in a multi-year response plan. On 4 May, the Zimbabwe Humanitarian Country Team released the Humanitarian Response Plan, with \$360 million required to support a target of 1.86 million people.

EL NIÑO – CURRENT FUNDING STATUS⁶ (IN MILLION US\$)

Government Plans

	Requirements \$M	% Funding needs met	Funding available	Funding Gap
Lesotho	37.2	27	9.9	27.3
Mozambique	238	13	31	207
Swaziland ⁷	80.5	12	10	70.5
Zimbabwe ⁸	600	33	200	400
Total	955.7		250.9	704.8

Joint Government and HCT Plans

	Requirements \$M	% Funding needs met	Funding available	Funding Gap
Ethiopia ⁹	1524	65	994	530
Madagascar ¹⁰	69.9	34	23.9	46
Malawi ¹¹	380.1	18	66.5	313.6
Sudan	82	31	25.3	56.7
Total	2056		1109.7	946.3

HCT Plans

	Requirements \$M	% Funding needs met	Funding available	Funding Gap
Lesotho	54	22	12	42
Mozambique ¹²	204.5	11	22.9	181.6
Somalia	127	29	37	105
Zimbabwe ¹³	359	26	92	267
Total	744.5		163.9	580.6

AFRICA TOTAL	3756.2		1524.5	2231.7
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⁶ Funding status derived from a combination of Financial Tracking Service (FTS) plus country and regional direct reporting. Note that some countries response plans are yet to be finalised and some of these funding requirements should be taken as provisional.

⁷ \$23m has been allocated for food and rural water assistance

⁸ \$600m for immediate response (total \$1.6 billion)

⁹ The HRD was reprioritised, with a prioritisation statement issued 10 May. Figures for funding available do not include pledges not yet delivered of \$254m, including a \$128m pledge from USAID and a \$113m pledge from ECHO.

¹⁰ Under development – Mar 2016 – Apr 2017

¹¹ Food security cluster only. Other clusters are yet to finalise costs.

¹² Finalised April 2016

¹³ Zimbabwe El Niño funding now being tagged by FTS - 22 Jun figure