



2023 GLOBAL REPORT ON FOOD CRISES

JOINT ANALYSIS FOR BETTER DECISIONS

Required citation

**FSIN and Global Network Against Food Crises. 2023.
GRFC 2023. Rome.**

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Acknowledgements

The collaborative process that produced the seventh annual Global Report on Food Crises 2023 started in December 2022 and was made possible through the commitment of individuals and partner organizations. The drafting and review process of the GRFC is facilitated by the Secretariat of the Food Security Information Network and relies on the contribution of data, technical expertise, feedback and participation of individuals from the 16 GRFC partner organizations.

Special thanks to the FSIN team who once again worked tirelessly to produce the document, listen to reviewers and enrich the product based on their feedback; the Senior Committee who provided guidance; the Technical Working Groups who brought their knowledge and expertise to deepen the analysis; and the communications colleagues who ensure that the findings and messages of the GRFC are known. Thanks are also extended to all the individuals based in regions and countries who brought their expertise to the product. The names listed below are by no means exhaustive for a product of this nature:

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This report would not have been possible without the generous support of the European Union.

This report was made possible in part through support provided by the U.S. Agency for International Development's Bureau for Humanitarian Assistance. The opinions expressed herein are those of the authors and do not necessarily reflect the views of the U.S. Agency for International Development.



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Key to icons

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

Map disclaimer

The boundaries and names shown and the designations used on all the maps in this document do not imply official endorsement or acceptance by the United Nations. Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined. A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).

Acronyms

3RP	Regional Refugee and Resilience Plan	FSC	Food Security Cluster	NGCA	Non-Government-Controlled Area (Ukraine)
ACAPS	Assessment Capacities Project	FSIN	Food Security Information Network	NNS	National Nutrition Survey
ACLED	Armed Conflict Location and Event Data Project	FSNAU	Food Security and Nutrition Assessment Unit	NRC	Norwegian Refugee Council
ALG	Liptako–Gourma Authority (Autorité de Développement Intégré de la Région du Liptako Gourma)	FSNMS	Food Security and Nutrition Monitoring System	OAS	Organization of American States
AMN	Acute malnutrition	FSNWG	Food Security and Nutrition Working Group	OCHA	United Nations Office for the Coordination of Humanitarian Affairs
AML	African migratory locusts	GAM	Global Acute Malnutrition	OECD	Organisation for Economic Co-operation and Development
ARI	Acute respiratory infection	GDP	Gross Domestic Product	OHCHR	Office of the United Nations High Commissioner for Human Rights
ASAL	Arid and semi-arid lands	gFSC	Global Food Security Cluster	PCBS	Palestinian Central Bureau of Statistics
ASAP	Anomaly Hotspots of Agricultural Production	GHO	Global Humanitarian Overview	PDM	Post-Distribution Monitoring
AWD	Acute watery diarrhoea	GNAFC	Global Network Against Food Crises	PLW	Pregnant and lactating women
BAY	Borno, Adamawa and Yobe states (Nigeria)	GNC	Global Nutrition Cluster	R-ARCSS	Revitalized Agreement on the Resolution of the Conflict in the Republic of South Sudan
CADC	Central America Dry Corridor	GRFC	Global Report on Food Crises	REVA	Refugee influx Emergency Vulnerability Assessment
CARI	Consolidated Approach to Reporting Indicators of Food Security	HDI	Humanitarian Development Index	RMRP	Refugee and Migrant Response Plan
CDC	Centers for Disease Control and Prevention	HIV/AIDS	Human immunodeficiency virus infection and acquired immune deficiency syndrome	RPCA	Food Crisis Prevention Network (Réseau de Prévention des Crises Alimentaires)
CEPAL	United Nations Economic Commission for Latin America and the Caribbean	HNAP	Humanitarian Needs Assessment Programme	RRM	Rapid Response Mechanism (Yemen)
CH	Cadre Harmonisé	HNO	Humanitarian Needs Overview	SADC	Southern African Development Community
CILSS	Permanent Interstate Committee for Drought Control	HRP	Humanitarian Response Plan	SAM	Severe Acute Malnutrition
CONASUR	Conseil National de Secours d'Urgence et de Réhabilitation, (National Emergency Response and Rehabilitation Council), Burkina Faso	ICRC	International Committee of the Red Cross	SBA	Sana'a-based Authority (Yemen)
COVID-19	Coronavirus disease 2019	IDMC	Internal Displacement Monitoring Centre	SDG	Sustainable Development Goal
CPI	Consumer Price Index	IDP	Internally displaced people	SEFSEC	Socio-Economic & Food Security Survey (Palestine)
DEVCO	International Cooperation and Development of the European Commission	IFAD	International Fund for Agricultural Development	SENS	Standardised Expanded Nutrition Survey
DGPC	Direction Générale de la Protection Civile (Haiti)	IFPRI	International Food Policy Research Institute	SFSA	Seasonal Food Security Assessment
DHS	Demographic and Health Survey	IGAD	Intergovernmental Authority on Development (in Eastern Africa)	SICA	Sistema de la Integración Centroamericana
DRC	Danish Refugee Council	ILO	International Labour Organization	SISAAP	Système d'Information sur la Sécurité Alimentaire et d'Alerte Précoce
DRPIA	Direction Régionale de la Protection Industrielle et Animale	IMF	International Monetary Fund	SMART	Standardized Monitoring and Assessment of Relief and Transitions
DTM	Displacement Tracking Matrix	INGD	National Institute for Disaster Management (Mozambique)	SMEB	Survival Minimum Expenditure Basket
ECHO	European Civil Protection and Humanitarian Aid Operations of the European Commission	IOM	International Organization for Migration	SNNPR	Ethiopian Southern Nations, Nationalities, and Peoples' Region
EC-JRC	European Commission – Joint Research Centre	IPC	Integrated Food Security Phase Classification	SOFI	The State of Food Security and Nutrition in the World
ECLAC	United Nations Economic Commission for Latin America and the Caribbean	IPC FRC	Integrated Food Security Phase Classification Famine Review Committee	TWG	Technical Working Group
ECOWAS	Economic Community of West African States (Communauté économique des États de l'Afrique de l'Ouest (CEDEAO))	ISCG	Inter Sector Coordination Group (Bangladesh)	UBOS	Uganda Bureau of Statistics
EFSA	Emergency Food Security Assessment	IYCF	Infant and Young Child Feeding	UEMOA	Union économique et monétaire ouest-africaine
ENCOVI	Encuesta Nacional de Condiciones de Vida	JME	Joint Malnutrition Estimates	UN	United Nations
EIU	Economist Intelligence Unit	JMP	Joint Monitoring Programme	UNAMA	United Nations Assistance Mission in Afghanistan
ENA	Essential Needs Assessment	JRP	Joint Response Plan	UNHCR	United Nations High Commissioner for Refugees
E-VAC	Emergency Vulnerability Assessment Committee	LGA	Local government area	UNICEF	United Nations Children's Fund
FAO	Food and Agriculture Organization	MAD	Minimum Acceptable Diet	UNRWA	UN Relief and Works Agency for Palestine Refugees in the Near East
FAO-GIEWS	FAO Global Information and Early Warning System on Food and Agriculture	MAM	Moderate Acute Malnutrition	USAID	United States Agency for International Development
FCS	Food Consumption Score	MCNA	Multi-Cluster Needs Assessment	USD	United States dollar
FCT	Federal Capital Territory	MDD	Minimum Dietary Diversity	VAC	Vulnerability Assessment Committee
FEWS NET	Famine Early Warning Systems Network	MENA	Middle East and North Africa	VASyR	Vulnerability Assessment of Syrian Refugees in Lebanon
		MFB	Minimum Food Basket	WASH	Water, Sanitation and Hygiene
		MICS	Multiple Indicator Cluster Survey	WB	World Bank
		MoH	Ministry of Health	WFP	World Food Programme
		MPI	Multidimensional poverty index	WHO	World Health Organization
		MUAC	Mid-Upper Arm Circumference	WoAA	Whole of Afghanistan Assessment
		NFSS	Nutrition and Food Security Surveillance	ZimVAC	Zimbabwe Vulnerability Assessment Committee

Foreword

More than a quarter of a billion people are now facing acute levels of hunger, and some are on the brink of starvation. That's unconscionable.

This seventh edition of the *Global Report on Food Crises* is a stinging indictment of humanity's failure to make progress towards Sustainable Development Goal 2 to end hunger, and achieve food security and improved nutrition for all.

In fact, we are moving in the wrong direction. Conflicts and mass displacement continue to drive global hunger. Rising poverty, deepening inequalities, rampant underdevelopment, the climate crisis and natural disasters also contribute to food insecurity.

As always, it is the most vulnerable who bear the brunt of this failure, facing soaring food prices that were aggravated by the COVID-19 pandemic and, despite some declines, are still above 2019 levels due to the war in Ukraine.

All this, while humanitarian funding to fight hunger and malnutrition pales in comparison to what is needed.

This crisis demands fundamental, systemic change. This report makes clear that progress is possible. We have the data and know-how to build a more resilient, inclusive, sustainable world where hunger has no home — including through stronger food systems, and massive investments in food security and improved nutrition for all people, no matter where they live.

With collective action and a commitment to change, we can ensure that every person, everywhere, has access to the most basic of human needs: food and nutrition.

António Guterres

Secretary-General of the United Nations



The Global Report on Food Crises 2023 | In brief

The Global Report on Food Crises 2023 estimates that over a quarter of a billion people were acutely food-insecure and required urgent food assistance in 58 food-crisis countries/territories in 2022. This is the highest number in the seven-year history of the GRFC.

 **258M** people – **22.7%** of the analysed population – in **58 countries/territories** faced high levels of acute food insecurity in 2022

 **253M** people were in Stressed (IPC/CH Phase 2) in **41 countries/territories** with IPC/CH analyses

Source: IPC TWGs, 2022.

What is the GRFC?

The GRFC 2023 is a collaborative effort among 16 partners to achieve an independent and consensus-based assessment of acute food insecurity that informs humanitarian and development action. Published by the Food Security Information Network (FSIN) in support of the Global Network against Food Crises (GNAFC), the GRFC is the reference document on global, regional and country-level acute food insecurity in 2022.

The analysis is based mainly on data obtained through the Integrated Food Security Phase Classification (IPC) or the Cadre Harmonisé (CH), which estimate the populations in need of food, nutrition and/or livelihood assistance. When data from these sources are not available, the GRFC utilizes the Famine Early Warning Systems Network (FEWS NET), the World Food Programme's (WFP) Consolidated Approach for Reporting Indicators (CARI) and country-specific Humanitarian Needs Overviews (HNO).

The findings of the GRFC 2023 suggest that achieving the goal of ending hunger by 2030 is ever more challenging as the population facing high levels of acute food insecurity has increased for the fourth consecutive year.

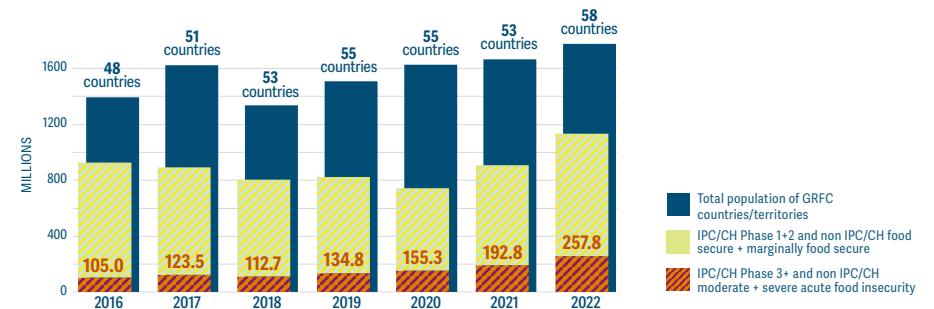
Nearly 258 million people in 58 countries/territories were in Crisis or worse acute food insecurity (IPC/CH Phase 3 or above, or equivalent) in 2022 – up from 193 million in 53 countries/territories in 2021. As the graph (top right) shows, while there has been an increase in the population analysed, this is the highest on record since the GRFC started reporting these data in 2017. This marks the fourth consecutive year of rising numbers of people in IPC/CH Phase 3 or above or equivalent due to persistently high numbers in some countries, worsening situations in others, as well as increased analysis.

More than 40 percent of the population in IPC/CH Phase 3 or above or equivalent in the GRFC 2023 resided in just five countries/territories – the Democratic Republic of the Congo, Ethiopia, Afghanistan, Nigeria (21 states and the Federal Capital Territory (FCT)) and Yemen.

People in seven countries faced extreme lack of food even after full employment of coping strategies at some point during 2022. More than half of the 376 400 people in Catastrophe (IPC/CH Phase 5) were in Somalia (214 100), but these extreme conditions also affected populations in South Sudan (87 000), Yemen (31 000), Afghanistan (20 300), Haiti for the first time in GRFC history (19 200), Nigeria (3 000) and Burkina Faso (1 800).

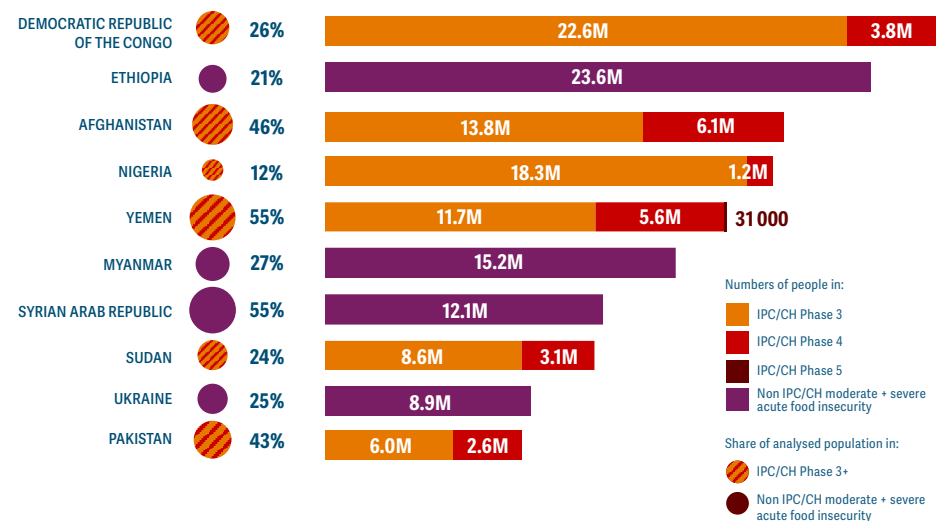
Around 35 million people were in Emergency (IPC/CH Phase 4) in 39 countries. No disaggregated data by IPC phase were available for Ethiopia or Zimbabwe in 2022. Households in this extremely severe situation face large food gaps, which are either reflected in high acute

Number of people in GRFC countries/territories facing acute food insecurity, 2016–2022



Source: FSIN, using data from 2016–2022.

Countries/territories with the highest numbers of people in IPC/CH Phase 3 or above or equivalent in 2022 and the share of analysed population in these phases



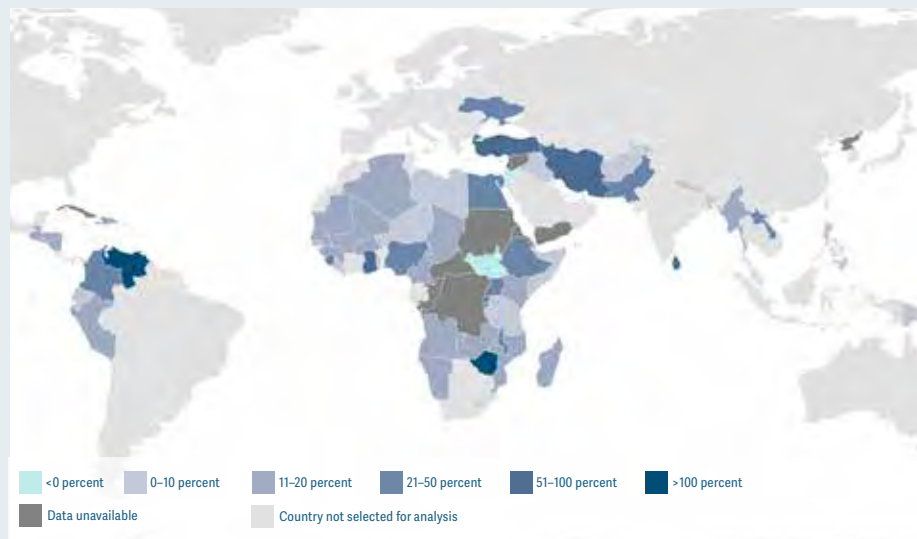
Source: IPC TWG 2022, CH 2022, HNO 2022 and 2023, REACH 2023.

The impact of the war in Ukraine on food crises around the world

The war in Ukraine has had an outsized impact on global food systems due to the major contributions Ukraine and the Russian Federation make to the production and trade of fuel, fertilizers and essential food commodities like wheat, maize and sunflower oil. The timing of the war also contributed to this impact as higher international commodity prices in the first half of 2022 compounded the macroeconomic challenges that countries continued to face after the COVID-19 pandemic. This was particularly true for GRFC countries/territories as they were more likely to be exposed to commodity market volatility given many of their positions as low-income net food-importing countries.

Although global food prices had fallen by the end of 2022, they remained well above pre-pandemic levels. Domestic food prices, by contrast, experienced an increase but have yet to decline. In fact, food prices increased in all GRFC countries/territories in 2022, with food inflation being over 10 percent in 38 out of the 58 countries/territories with food crises by the end of the year. Their governments' abilities to mitigate risks and insulate citizens from food price inflation through policy measures, such as stimulus payments and subsidies, was limited given their over-extended public budgets after the COVID-19 pandemic. Nearly all of the countries whose currencies lost value at an abnormally fast rate in 2022 were GRFC countries/territories.

Percentage increase (December 2021–22) in the price of staple foods in GRFC-qualifying countries



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined. Source: WFP Dataviz, 2023.

malnutrition rates and excess mortality or mitigated by use of emergency coping strategies. Around half of the total population identified in IPC/CH Phase 4 was found in four countries – Afghanistan, Yemen, the Democratic Republic of the Congo and the Sudan.

Recurrent shocks are driving up acute food insecurity

The food crises outlined in the GRFC are the result of interconnected, mutually reinforcing drivers – conflict and insecurity, economic shocks and weather extremes. In 2022, these key drivers were associated with lingering socioeconomic impacts of COVID-19, the knock-on effects of the war in Ukraine and repeated droughts and other weather extremes.

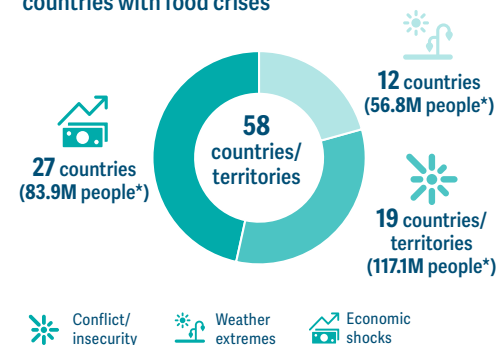
Conflict/insecurity was the most significant driver in 19 countries/territories where 117.1 million people were in IPC/CH Phase 3 or above or equivalent. This is fewer than in 2021 when conflict was considered the main driver across 24 countries/territories with 139 million people in these phases of acute food insecurity.

The lower estimate is because economic shocks surpassed conflict as the main driver of acute food insecurity in three countries still affected by protracted crises – Afghanistan, South Sudan and the Syrian Arab Republic. Six of the seven countries/territories with populations facing Catastrophe (IPC Phase 5) – Afghanistan, Burkina Faso, Nigeria, Somalia, South Sudan and Yemen – have protracted conflicts, while the very severe levels of acute food insecurity in Haiti are attributable to escalating gang violence in the capital.

Economic shocks (including the socioeconomic impacts of COVID-19 and the repercussions of the war in Ukraine) became the main driver in 27 countries with 83.9 million people in IPC/CH Phase 3 or above or equivalent – up from 30.2 million people in 21 countries in 2021. The economic resilience of poor countries has dramatically decreased, and they now face extended recovery periods and less ability to cope with future shocks.

Weather extremes were the primary driver of acute food insecurity in 12 countries where 56.8 million people were in IPC/CH Phase 3 or

Primary drivers of acute food insecurity in countries with food crises



Food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

* Number of people in IPC/CH Phase 3 or above or equivalent.

Source: FSIN, GRFC 2023.

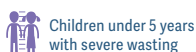
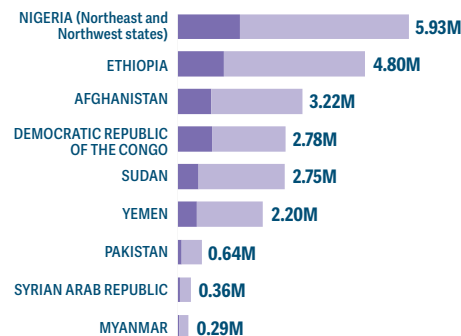
above or equivalent, more than double the number of people (23.5 million) in eight countries in 2021. These extremes included sustained drought in the Horn of Africa, devastating flooding in Pakistan, and tropical storms, cyclones and drought in Southern Africa.

High levels of child wasting in food-crisis countries curbs development and wellbeing

Malnutrition is multidimensional, and child nutritional status is determined by multiple factors. The GRFC demonstrates that areas with high levels of acute food insecurity tend to have high levels of child wasting, which, when combined, stymie the development and wellbeing of populations in the short, medium and long term. In 30 of the 42 major food crises analysed in the GRFC 2023 where data on malnutrition were available, over 35 million children under 5 years of age suffered from wasting, with 9.2 million of them severely wasted (the most lethal form of undernutrition and a major contributor to child mortality). Out of the total estimated children with wasting in those countries, about 65 percent lived in nine out of the ten countries with the highest number of people in IPC/CH Phase 3 or above or equivalent.

The global food crisis has worsened the undernutrition

Numbers of children with wasting in countries with largest numbers of people in IPC/CH Phase 3 or above or equivalent in 2022



Children under 5 years with severe wasting



Children under 5 years with moderate wasting

Estimates for Nigeria cover only the Northeast and the Northwest states while estimates for Democratic Republic of the Congo cover 150 health zones and 189 territories. Data were not available for Ukraine.

Source: GRFC Displacement TWG, 2023.

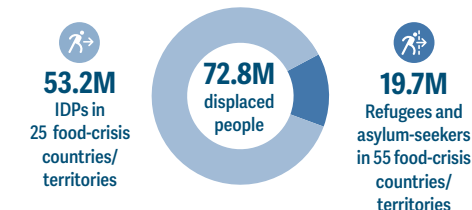
situation of adolescent girls and women whose livelihoods, income and access to nutritious food have been disproportionately affected by conflict, climate change, poverty and other economic shocks, including that of the COVID-19 pandemic from early 2020 (UNICEF, March 2023).

Number of forcibly displaced people in food-crisis countries is the highest in GRFC history

Displacement is both a driver and a consequence of food insecurity. People forced to flee their homes lose access to their livelihoods (including safe access to food, water and other necessities) while also facing major barriers to income, humanitarian aid, healthcare, and other essential services, exacerbating their vulnerability to food insecurity and undernutrition.

By mid-2022, the number of displaced people globally, including refugees, asylum seekers, Internally Displaced People (IDPs) and other people in need of international

Number of forcibly displaced people in food-crisis countries/territories, 2022



Source: GRFC Displacement TWG, 2023.

protection, had reached 103 million, around 14 million more people than at the end of 2021 (UNHCR; IOM, December 2022).

In 2022, displacement was caused by (i) major conflicts, including the ongoing war in Ukraine and persisting conflicts in the Central Sahel, the Lake Chad Basin and the Middle East; (ii) severe economic crises pushing people to migrate, such as from the Bolivarian Republic of Venezuela and (iii) climate change and weather extremes including the atypical La Niña phenomenon that began in September 2020 and persisted to late 2022, exacerbating drought conditions in the Horn of Africa and causing unusually heavy rainfall and flooding in Asia, East Africa and West Africa.

By the end of 2022, nearly 53.2 million people were internally displaced in 25 countries/territories identified as food crises in the GRFC 2023. The countries with the highest numbers of IDPs in 2022 nearly mirrored the list of the 10 food crises with the largest numbers of people in IPC/CH Phase 3 or above or equivalent.

In 2022, about 19.7 million refugees and asylum seekers were hosted in 55 out of the 58 food-crisis countries/territories identified in this GRFC edition, marking a significant increase from 15.3 million people in the 52 food-crisis countries/territories in 2021.



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In Afghanistan, very high levels of acute food insecurity and child wasting persisted, underpinned by the lingering impacts of decades of conflict on livelihoods, high food prices and widespread drought.

ACUTE FOOD INSECURITY PROJECTION 2023

152.0–153.4M people – **18%** of the analysed population – in **38** countries/territories projected to face high levels of acute food insecurity in 2023

251.0M people were projected to be in Stressed (IPC Phase 2) in **34** countries/territories with available IPC/CH analyses

Source: IPC TWGs, 2022 and 2023, Cadre Harmonisé.

According to projections available for 38 of the 58 countries/territories as of March 2023, up to 153.4 million people are projected to be in IPC/CH Phase 3 or above or equivalent in 2023. However, the acute food insecurity situation in these food-crisis countries/territories is likely to be further affected by a number of shocks that occurred in early 2023 and were not factored into the current available estimates. These include tropical cyclone Freddy in Madagascar, Malawi and Mozambique, the earthquakes in the Syrian Arab Republic and Türkiye, and the escalating conflict in the Sudan.

Around 310 000 people are projected to be in IPC/CH Phase 5 across six countries/territories – Burkina Faso, Haiti, Mali, Nigeria (26 states and the FCT), Somalia and South Sudan with almost three quarters of them in Somalia. No projection data are available for Yemen. In Nigeria (26 states and the FCT), Somalia and Kenya,

a total of 8 million additional people are projected to face high levels of acute food insecurity in 2023 compared with 2022. In Nigeria, this is primarily due to conflict as well as an increase in analysis coverage, while in Kenya and Somalia it is largely due to the prolonged drought in the Horn of Africa.

Economic shocks are projected to be the main driver of acute food insecurity in most of these countries/territories as national economic resilience has been severely undermined by a slow recovery from the COVID-19 pandemic, further exacerbated by the war in Ukraine. Persisting high food prices coupled with unsustainable debt levels in a number of food-crisis countries amid high interest rates and currency depreciation are expected to further erode households' food access and constrain the fiscal capacity of governments to deliver assistance. As of March 2023, food prices were at exceptionally high levels in Ethiopia, Ghana, Malawi, Myanmar, Namibia, Pakistan, Somalia, South Sudan and Zimbabwe.

Conflict/insecurity is expected to be the main driver in many countries/territories, including the Democratic Republic of the Congo, Nigeria, Yemen, Myanmar and Ukraine.

Forecast to return in June 2023, the El Niño phenomenon is likely to result in dry weather conditions in key cropping areas of Central America, Southern Africa and Far East Asia, while excessive rainfall and possible flooding is foreseen in Near East Asia and East Africa.

In **Central and Southern Africa**, conflict/insecurity are expected to remain the primary driver of acute food insecurity in the Central African Republic, the Democratic Republic of Congo and Mozambique, while economic shocks, compounded by the knock-on effects of the war in Ukraine, are likely to further erode the purchasing power and resilience of households. Weather extremes including the February 2023 tropical cyclone Freddy in Madagascar, Malawi and Mozambique will undermine food security throughout 2023.

In **East Africa**, weather extremes including the severe, three-year drought across the Horn of Africa, economic challenges, and conflict and insecurity affecting livelihoods, markets and humanitarian access continue to drive dire levels of acute food insecurity across many

countries in 2023. Significant efforts in the scale-up of multi-sectoral humanitarian assistance, supported by slightly more favourable than foreseen rains are contributing to a moderate improvement in some areas, although livelihood recovery will take time. In the Sudan, the onset of clashes between the Sudanese Armed Forces and Rapid Support Forces in mid-April triggered a suspension of humanitarian assistance and will likely lead to a deterioration of livelihoods, internal displacement and acute food insecurity.

In **West Africa and the Sahel (including Cameroon)**, the levels of acute food insecurity during the June–August 2023 lean season are projected to be the highest on record, driven by worsening conflict and insecurity, particularly in the Central Sahel and Lake Chad Basin areas, and increased economic shocks, including rampant inflation and currency depreciation, notably in Nigeria, Ghana, Sierra Leone and Liberia. At the country level, the number of people in CH Phase 3 or above is projected to increase in Nigeria (also due to expanding analysis coverage), Burkina Faso, Senegal, Liberia and Gambia – and decline in nine others. Burkina Faso and Mali have populations projected to be in IPC Phase 5.

In **Asia**, economic malaise including high food, fertilizer and fuel prices along with transport and supply chain disruptions, and limited resources to respond to increasing social and economic demands, will continue to drive acute food insecurity in Afghanistan, Bangladesh (Cox's Bazar), Myanmar and Pakistan. Weather extremes, conflict in Myanmar and the repercussions of decades of conflict in Afghanistan will remain important drivers.

In **Latin America and the Caribbean**, the number of people in IPC Phase 3 or above or equivalent in 2023 is projected to decline at the regional level, largely due to increased food availability from the 2022 harvests in some countries, but this could be short-lived due to high food prices and low household purchasing power. In Haiti, the population facing high levels of acute food insecurity was projected to increase slightly due to urban insecurity and gang violence, high inflation as well as the lingering impacts of previous natural disasters.

In the **Middle East and North Africa**, acute food insecurity is expected to worsen for Lebanese residents and Syrian refugees in Lebanon driven by further



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In Somalia, Famine has not materialized so far and is not expected in the first half of 2023 due to many factors including slightly better-than-expected early 2023 agricultural production and scaled-up multisectoral assistance.

deterioration of the economic situation and rampant inflation. Even before the devastating February 2023 earthquakes, the 2023 food security outlook for the Syrian Arab Republic was precarious. Earthquake-affected areas were home to almost 3 million IDPs, and the destruction and losses of physical capital (especially in agriculture) are estimated at USD 5.2 billion. In Yemen, significantly above-average prices of food and essential non-food commodities are expected to drive large food consumption gaps. Even though active fighting has abated in the Syrian Arab Republic and Yemen, the impacts of conflict and mass displacement are expected to persist throughout 2023.

The way forward

The magnitude of people facing IPC/CH Phase 3 or above is daunting, but it is that very scale that drives urgency. Earlier intervention can reduce food gaps and protect assets and livelihoods at a lower cost than late humanitarian response. Yet too often the international

community waits for a Famine (IPC/CH Phase 5) classification before mobilizing additional funding.

By this stage, livelihoods have collapsed, lives and futures have been lost, and social networks disrupted with deleterious impacts on the lives of an unborn generation.

Populations in IPC/CH Phase 3 are already unable to meet their minimum food needs or are compelled to protect food consumption by engaging in coping strategies that will harm their future ability to access food and sustain their livelihoods. In IPC/CH Phase 4, households face large food gaps, which are either reflected in high acute malnutrition levels and excess mortality or mitigated by using emergency coping strategies that severely corrode their wellbeing and livelihoods.

Urgent action is needed for households in IPC/CH Phase 3 and 4 to ensure immediate wellbeing, to support their ability to sustain themselves, and to protect families from making choices that are likely to lead to worse outcomes.



CHAPTER 1

A GLOBAL OVERVIEW OF FOOD CRISES

What is the Global Report on Food Crises?

The Global Report on Food Crises 2023 (GRFC 2023) provides an overview of the world's worst food-crisis countries for which external humanitarian assistance was necessary in 2022.

It refers more specifically to a subset of these countries that had available data on which GRFC partners agreed. Its purpose is to be a useful and evidence-based reference document for food security and nutrition analysts, policymakers, decision-makers and advocates.

To inform policies and programming that respond to these multidimensional crises, policymakers require clear, timely and reliable data and analyses. However, information is often conflicting and derived from various sources and based on different methodologies that lack a consensus-based standard. The GRFC responds to these constraints by providing information based on a rigorous methodology and a highly consultative process.

It provides detailed information about regions, countries and populations experiencing high levels of acute food insecurity in 2022, and projections for 2023. It examines the main drivers of these food crises, and provides analysis of seven years of GRFC data and the latest available information on displacement and nutrition.

This global report (GRFC 2023) is part of an annual suite of products, which includes the GRFC 2023 IGAD regional

report and the GRFC 2023 Mid-Year Update. In 2023, we anticipate producing a GRFC 2023 regional report for West Africa and the Sahel.

The GRFC as a global public good: partnership, consultation and consensus

The production of the GRFC is coordinated by the Food Security Information Network in support of the Global Network Against Food Crises. It is the product of a collaboration among 16 partners consisting of regional intergovernmental bodies, donors, technical bodies, clusters and UN agencies. The result is an independent reference document that aims for consensus-driven analysis and that has been validated and endorsed by global and regional experts in the fields of food security, nutrition and displacement.

All 16 partners participate in the following:

- **Technical Working Groups** (displacement, food security, nutrition) consisting of technical experts from each of the partner agencies who contribute data and analysis, participate in the review of content, and make recommendations to the Senior Committee for endorsement.
- **Senior Committee** consisting of senior representatives from each partner agency who make the final decision on content and coordinate institutional clearance.

What is a food crisis?



A food crisis occurs when levels of acute food insecurity and malnutrition rise sharply at local or national levels, raising the need for emergency food assistance. The GRFC processes aim to distinguish a food crisis from chronic food insecurity based on the interaction of shocks experienced in 2022, and that affect one or more of the pillars of food security: food availability, food access, food utilization and food stability. Food crises are more likely among populations already suffering from prolonged food insecurity and malnutrition, and in areas where structural factors increase their vulnerability to shocks.

HOW TO READ THE REPORT



The GRFC provides several levels of analysis in each chapter. In this 2023 edition, there are three 'Spotlights' to provide a more in-depth analysis and draw the reader's attention to three major issues: the impact of the war in Ukraine on global food crises; the importance of timely humanitarian action in food-crisis contexts; and countries of concern with data gaps.

Chapter 1 | A global overview of food crises

This section presents a thematic analysis of the global food crises of 2022 and projections for 2023, based on the peak estimates for both years. It provides aggregate figures on acute food insecurity, identifies the key drivers and factors contributing to food crises, and presents a focused analysis of the most severe acute food insecurity situations since the GRFC began publication in 2017. In a table, it provides 2021, 2022 and 2023 peak estimates for all GRFC selected food crises. A global brief on displacement and nutrition is also included.

Chapter 2 | Regional overviews of food crises

This section presents a consolidated food security analysis for six regions – Central and Southern Africa; East Africa; West Africa and the Sahel, and Cameroon; Asia; Latin America and the Caribbean; and the Middle East and North Africa – for 2022 and projections for 2023 where available. It also presents nutrition and displacement analyses. Europe is not included since Ukraine is the only country selected and it is included as a major food crisis in chapter 3 while the global impact of the war in Ukraine is included as a spotlight within chapter 1.

Chapter 3 | Major food crises in 2022

This chapter features individual analyses of the 42 countries/territories identified as 'major food crises'. All of them have at least 1 million people or 20 percent of their country population or migrant/refugee population in IPC/CH Phase 3 or above or equivalent. These country briefs present the 2022 peak estimate of populations in IPC/CH Phase 3 or above or equivalent, and the highest available projection for 2023. They include maps, a brief narrative on year-on-year changes and seven-year trends where possible, key drivers, as well as information on forcibly displaced populations and nutrition.

Technical Notes

This section provides the technical details regarding the information described in the GRFC including key terminology, data sources and methodologies, GRFC processes and protocols, as well as comparability challenges and limitations. It also contains references for the categorization of undernutrition and acute food insecurity indicators.

Appendices

All key terms and terminology used in the GRFC are listed in the Glossary for easy reference.

As the GRFC refers to peak estimates of acute food insecurity, appendix 2 provides all available IPC/CH results for specific countries/territories dating back to 2016 where available thus providing additional information to the chapter 3 country briefs, which helps the reader consider the seasonal aspect of acute food insecurity.

The foundation of the GRFC: an evidence-based public good



A strong partnership



A highly consultative process



A compilation of multiple consensus-based food security and nutrition analyses



A technical document of reference on food crises

Country selection and coverage

The GRFC follows a specific process to identify countries and populations within a country for inclusion in the report, to identify which faced food crises and which are major food crises.

The **consideration** of countries/territories for potential inclusion in the GRFC 2023 identified those that experienced a shock in 2022 and for which there was evidence that the magnitude and/or severity of the food crisis exceeded local resources and capacities to respond. Reference is made to countries that requested assistance, as monitored by FAO-GIEWS, or hosted refugee populations. As in past years, the GRFC 2023 did not list high-income countries, even if they had populations facing high levels of acute food insecurity, nor did it include countries that did not request humanitarian assistance for populations facing high levels of acute food insecurity.

A rigorous selection process has been employed over the seven years of the GRFC's existence. The selection process for the GRFC 2023 considered 73 qualifying countries/territories for potential inclusion. Following a review of the evidence, the GRFC Technical Working Group validated acute food insecurity estimates for 58 countries/territories, of which 42 were identified as major food crises. In all seven years, 38 countries consistently qualified as food crises, of which 19 were identified as major food crises. See *Technical Notes*.

The **selection** of countries/territories for inclusion in the GRFC 2023 was based on the availability of data and their methodology meeting the GRFC partners' specific requirements for acute food insecurity estimates, further described in the *Technical Notes*. **Major food crises** were then identified based on the magnitude and severity of acute food insecurity. See *table, right*.

1 PRE-SELECTION OF QUALIFYING COUNTRIES/TERRITORIES

48 countries/territories that requested external assistance for food and/or faced shocks as assessed by FAO-GIEWS:

- in 2022 or
- at least once in the past 3 years or
- for at least 3 years in the past 10 years

25 low- or middle-income countries/territories were not selected for analysis by FAO-GIEWS, but requested external assistance as a result of:

- hosting refugee populations who were assisted by UNHCR and WFP
- having over 1 million or at least 20 percent of its population forcibly displaced
- having populations affected by conflict and insecurity, weather extremes and/or economic shocks

Countries were excluded if they were high-income countries, if they did not ask for FAO or WFP assistance, or if the shocks had little impact on food security.

73 countries/territories identified

2 SELECTION AND GROUPING OF COUNTRIES/TERRITORIES

15 of the 73 countries/territories identified had data gaps or did not meet GRFC partners' requirements to produce estimates of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent.

The remaining **58** food-crisis countries/territories are grouped into 7 regions:

- Central and Southern Africa
- East Africa
- West Africa and the Sahel, and Cameroon
- Asia
- Europe (Ukraine)
- Latin America and the Caribbean
- Middle East and North Africa

58 countries/territories identified

3 IDENTIFICATION OF MAJOR FOOD CRISES

42 of the selected countries/territories were identified as major food crises in 2022 based on meeting one or more of the following criteria:

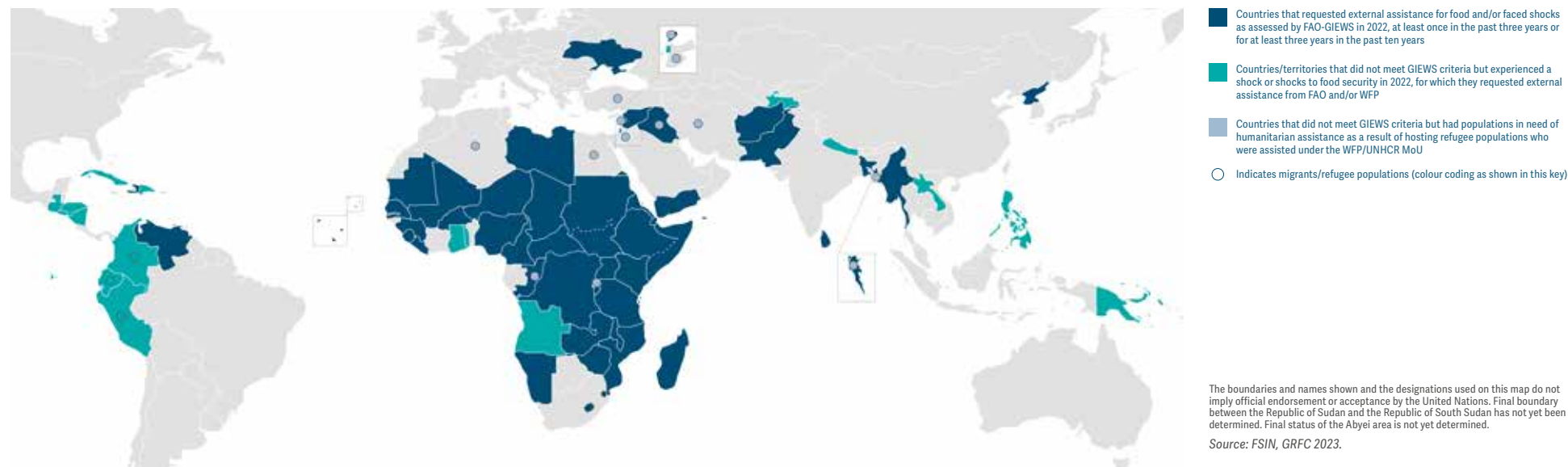
- at least 20 percent of the country population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
- at least 1 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
- any area in Emergency (IPC/CH Phase 4) or above
- included in the IASC humanitarian system-wide emergency response level 3

42 countries/territories identified

Geographical coverage

MAP 1.1

Countries/territories that were considered for inclusion in the GRFC 2023



■ Countries that requested external assistance for food and/or faced shocks as assessed by FAO-GIEWS in 2022, at least once in the past three years or for at least three years in the past ten years

Afghanistan, Bangladesh, Burkina Faso, Burundi, Cabo Verde, Cameroon, Central African Republic, Chad, Congo, Democratic People's Republic of Korea, Democratic Republic of the Congo, Djibouti, Eritrea, Eswatini, Ethiopia, Gambia, Guinea, Haiti, Iraq, Kenya, Lebanon (residents and Syrian refugees), Lesotho, Liberia, Libya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Namibia, Niger, Nigeria, Pakistan, Senegal, Sierra Leone, Somalia, South Sudan, Sri Lanka, Sudan, Syrian Arab Republic, Uganda, Ukraine, United Republic of Tanzania, Venezuela (Bolivarian Republic of), Yemen, Zambia, Zimbabwe.

■ Countries/territories that did not meet GIEWS criteria but experienced a shock or shocks to food security in 2022, for which they requested external assistance from FAO and/or WFP

Angola, Colombia (residents, refugees and migrants), Cuba, Dominican Republic, Ecuador (residents, refugees and migrants), El Salvador, Ghana, Guatemala, Honduras, Lao People's Democratic Republic, Nepal, Nicaragua, Palestine, Papua New Guinea, Peru (residents, refugees and migrants), Philippines, Tajikistan, Togo, Tonga.

■ Countries that did not meet GIEWS criteria but had populations in need of humanitarian assistance as a result of hosting refugee populations who were assisted under the WFP/UNHCR Memorandum of Understanding

Algeria (Sahrawi refugees), Egypt (Syrian refugees), Iran (Afghan refugees), Jordan (Syrian refugees), Rwanda (refugees), Türkiye (Syrian refugees).

Acute food insecurity data sources

Since food security data are derived from varied sources based on different methodologies, the GRFC relies primarily on data from Integrated Food Security Phase Classification (IPC) and Cadre Harmonisé (CH) analyses.

These are government-endorsed, multistakeholder, consensus-based processes that result in a classification of the magnitude and severity of acute food insecurity based on a convergence of evidence and are comparable across countries, i.e. phase classification in one country is equivalent to phase classification in another.

They categorize populations into five phases of severity, from Phase 1 (no or minimal acute food insecurity) to Phase 5 (Catastrophe/Famine). See table, right. Through a consensus-based process, country IPC/CH multistakeholder Technical Working Groups generate an estimate of populations in each phase, based on a convergence of available evidence. The GRFC primarily presents populations in Crisis or worse (IPC/CH Phase 3 or above), who face high levels of acute food insecurity and need external humanitarian assistance to reduce food consumption gaps, and to protect and save livelihoods and lives.

Non-IPC/CH sources

When an IPC/CH analysis is not available, the Technical Working Groups evaluate the use of other sources of evidence. These include: FEWS NET analyses which are IPC-compatible; WFP Consolidated Approach for Reporting Indicators (CARI), which uses household-level analysis to report moderate and severe levels of acute food insecurity, but without comparable disaggregation into Phases 3, 4 and 5 (populations that face 'moderate acute food insecurity' and 'severe acute food insecurity' as per WFP's CARI methodology are reported as an approximation to populations facing IPC/CH Phase 3 or above); and food insecurity data contained in Humanitarian Needs Overviews (HNOs), which are based on different methodologies and on government-endorsed multistakeholder processes. Not all these methodologies underlying the HNOs 'Population in Need' (PIN) estimates

IPC/CH acute food insecurity phase description and response objectives

Phase	Phase description and priority response objectives
Phase 1 None/Minimal	Households are able to meet essential food and non-food needs without engaging in atypical and unsustainable strategies to access food and income. Action required to build resilience and for disaster risk reduction.
Phase 2 Stressed	Households have minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in stress-coping strategies. Action required for disaster risk reduction and to protect livelihoods.
Phase 3 Crisis	Households either: <ul style="list-style-type: none"> • 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. URGENT ACTION required to protect livelihoods and reduce food consumption gaps.
Phase 4 Emergency	Households either: <ul style="list-style-type: none"> • 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. URGENT ACTION required to save lives and livelihoods.
Phase 5 Catastrophe/ Famine	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.)* URGENT ACTION required to revert/prevent widespread death and total collapse of livelihoods.

* A Famine classification requires evidence on food security, nutrition and mortality at or above IPC Phase 5 thresholds. If there are insufficient data for Famine classification but the available information indicates that Famine is likely occurring or will occur, then the Famine classification is called 'Famine Likely'. It is important to note that Famine and Famine Likely are equally severe.

are endorsed as acute food insecurity estimates by the GRFC partnership: for example, in the case of Myanmar and Palestine, estimates of acute food insecurity were based on data that did not meet GRFC partnership requirements. However, the partnership gave more weight to the HNO multistakeholder endorsement of PIN estimates for those two countries/territories, which resulted in their inclusion in the report. The GRFC does not include information based on other methodologies

that have not been endorsed by the GRFC partnership. These include Household Economy Assessments, the Food Insecurity Experience Scale, rCARI (remote data collection) and single indicators, such as the Food Consumption Score, that only report on one dimension of food insecurity. Desk research complements this acute food insecurity data with other information sources to provide a more comprehensive analysis of each country's food, nutrition and/or displacement crisis. The global and

regional overviews, presented in chapters 1 and 2, collate the country/territory-level data and, in doing so, illustrate the regional and global interconnectedness of the drivers and consequences of food crises.

Peak estimates

The GRFC 2023 reports the highest estimate of people in Crisis or worse (IPC/CH Phase 3 or above) for each country/territory included in the GRFC – also known as the peak estimate – out of all potential analyses available during the year.

As acute food insecurity can be seasonal or the consequence of a shock, the peak figure does not necessarily reflect the situation throughout the year in that country and can be based on a projection. In some cases, the analysis spans two calendar years, therefore the peak estimate may straddle both 2021 and 2022, or 2022 and 2023.

Data gaps

Some countries were considered for inclusion but not analysed for the GRFC 2023 because they faced data gaps, as in the case of the Democratic People's Republic of Korea and Eritrea. Data gaps can also be driven by lack of processes to systematically collect information and lack of funding to conduct assessments, as well as lack of access due to insecurity.

Projections for 2023

IPC, CH and FEWS NET methodologies 'project' the acute food insecurity situation based on the most likely expected scenario by developing assumptions on the evolution of food security drivers and their impacts on food security outcomes. As of March 2023, projections were available for 38 of the GRFC 2023 countries/territories. Six countries had analyses for which the 2022 peak came at the end of the year and extended into 2023. All data presented in the GRFC 2023 are the latest available as of 17 March 2023.

Spotlight | The impact of the war in Ukraine on global food crises

While the war in Ukraine has had devastating impacts on the country and its people, it has also created ripple effects around the world.

When the war began in February 2022 – after eight years of conflict in the eastern parts of the country – the global economy was still recovering from the effects of the COVID-19 pandemic, and many low- and middle-income countries had limited capacity to cope with an additional shock due to growing debt, high inflation, rising commodity prices, slower growth and tightened financial conditions. These macroeconomic challenges intensified with the start of the war and jeopardized the food and nutrition security of millions beyond Ukraine's borders.

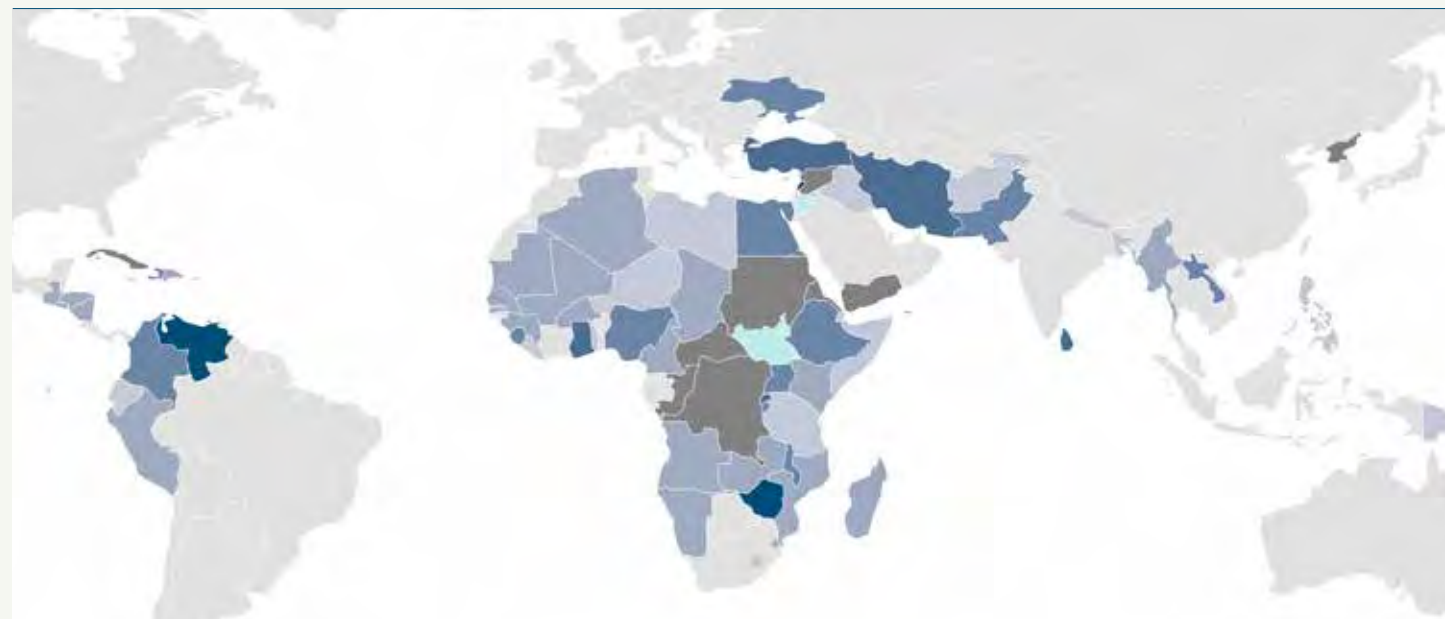
Already high prices rose further with the onset of the war

The Russian Federation and Ukraine were major suppliers of agricultural commodities, exporting around a quarter of the world's wheat and barley and more than two-thirds of its sunflower oil in 2021 (FAOSTAT, February 2023). The war, subsequent closure of Ukrainian Black Sea ports and increase in protectionist trade policies led to a sharp contraction in the global supply of staple goods, causing food prices to rise beyond their pre-war high. In March 2022, the global food price index reached its highest level since FAO records began, with the largest spikes seen in the cereal and vegetable oil indices (FAO, February 2023).

The war also caused already-elevated fertilizer and freight costs to surge, indirectly placing additional upward pressure on food prices by increasing the cost of production and transport. In 2021, the Russian Federation was the top exporter of nitrogen fertilizers, the second leading exporter of potassic fertilizers and the third leading exporter of phosphorous fertilizers (FAO, December 2022). Although sanctions did not target food or fertilizers, full or partial bans on imports of Russian energy commodities and increased transport and insurance costs contributed to higher fertilizer prices, especially nitrogen-based ones, for which natural gas is a key production input. In response, the Russian Federation imposed a series of export restrictions on

MAP 1.2

Percentage increase (December 2021–22) in the price of staple foods in GRFC-qualifying countries/territories



<0 percent 0–10 percent 11–20 percent 21–50 percent 51–100 percent >100 percent Data unavailable Country not selected for analysis

Algeria, Egypt, Iran, Jordan, Rwanda and Türkiye were selected for inclusion in the GRFC only because they were hosting refugee populations in need of humanitarian assistance.

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: WFP Dataviz, 2023.

food and fertilizers,¹ including exports of nitrogen and complex-nitrogen fertilizers, which further complicated the situation (USDA, June 2022).

Freight costs also rose dramatically with the lack of access to Black Sea ports, destruction of infrastructure,

¹ See the full list of Russian export restrictions here: <https://www.foodsecurityportal.org/tools/COVID-19-food-trade-policy-tracker>.

trade restrictions, increased insurance costs and higher fuel prices. Countries compensated by importing critical components and commodities from different markets, which often increased transit times and costs. Between February and May 2022, the price of transporting dry bulk goods, such as grains, increased by nearly 60 percent and was expected to lead to a nearly 4 percent increase in global food prices (UNCTAD, June 2022).

To address potential supply disruptions shortly after the war began, countries introduced export restrictions on food and fertilizers in the form of bans, quotas, licensing requirements and taxes, which were meant to protect domestic supply and contain price increases. However, these measures came at the expense of global markets, fuelling disruptions and further unsettling prices. At this trend's peak in May 2022, nearly 17 percent of global food

and feed exports (expressed in calories) were affected by restrictions implemented across 23 countries (IFPRI, January 2023).

International commodity prices have declined but remain well above pre-pandemic levels

Prices for food, fertilizers, energy and freight began to recede mid-2022 due to a variety of factors, but they remain well above pre-pandemic levels. The reduction in commodity exports from the Russian Federation² and Ukraine was partially offset by exports from countries such as Argentina, Australia, Brazil, the United Kingdom and the United States of America (UNCTAD, June 2022), and from the European Union. The expiry of some countries' protectionist policies helped to ease upward pressure on commodity prices (IFPRI, January 2023).

An additional factor in the fall in global prices and stabilization of commodity markets was the signing of the Black Sea Grain Initiative by the Russian Federation, Türkiye and Ukraine in July 2022. The agreement allowed for the renewal of agricultural commodity exports from selected Black Sea ports in Ukraine, and the concomitant memorandum of understanding facilitated food and fertilizer exports from the Russian Federation (UN, July 2022). The initiative was extended for 120 days in November 2022 and then again in March 2023 for an unspecified amount of time (UN, March 2023).

Knock-on impacts have contributed to a cost-of-living crisis

The current global inflationary surge started with global supply chain bottlenecks linked to the socioeconomic effects of the COVID-19 pandemic and was then exacerbated by the war in Ukraine. Global inflation has been pushed higher since 2021 due in large part to the increase in food prices, reaching a four-decade high of 8.8 percent in 2022 (IMF, October 2022). The International Monetary Fund (IMF) estimated that, from 2021 to mid-2022, food price inflation alone eroded global living

standards at the same rate that headline inflation did over the five years that preceded the COVID-19 pandemic (IMF, September 2022).

While every country was negatively impacted by food price inflation and cost-of-living increases (WB, August 2022; WB, February 2023), the magnitude of these impacts was not homogeneous and greatly depended on countries' exposure and coping capacity. Low- and middle-income countries were more vulnerable (CGIAR, March 2023; IMF, September 2022) and, as a result, millions of people in food-crisis countries/territories were driven back into poverty (UNDP, July 2022). High food prices adversely affect low-income populations, as they spend a larger share of their incomes on food. These households also tended to rely more heavily on cereals and other cheaper, energy-dense foods, which left them more open to the market volatility witnessed during 2021 and 2022 (CGIAR, March 2023).

Increasing magnitude and severity of food crises

The war in Ukraine intensified the magnitude and severity of food crises by exacerbating food access issues at both the macro and household levels. At the start of 2022, many GRFC countries/territories' economies were under fiscal pressure and vulnerable to additional shocks, and were dragged further into a cycle of high prices, inflation, increasing debt burdens and currency depreciation with the onset of the war.³ The ability of governments to mitigate risks and insulate citizens from food price inflation and cost-of-living increases through policy measures, such as stimulus payments and subsidies, was limited given their overextended public budgets after the COVID-19 pandemic.

In 2022, 78 percent of the 42 countries/territories identified as major food crises in the GRFC 2023 were net food importers. Many, especially those in Africa and the Middle East, sourced staple foods from the Russian

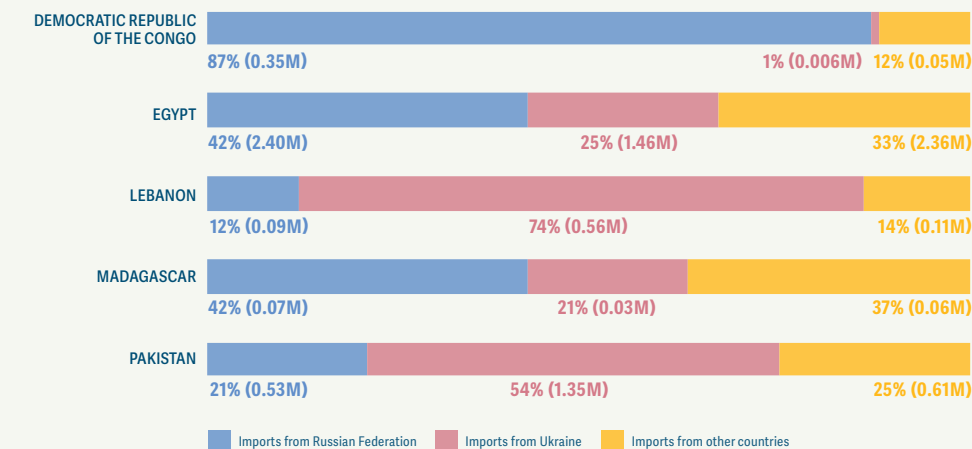
² The Central Bank of Russia stopped publishing detailed trade data with the start of the war in Ukraine, making it difficult to gauge the country's trade position. The data available suggests that the volume of Russian commodity exports decreased during the first half of 2022 and then increased during the second half.

³ Many of the countries with food crises had additional underlying drivers that contributed to acute food insecurity and malnutrition, such as conflict and climate shocks.

FIGURE 1.1



Shares of wheat import volumes from the Russian Federation and Ukraine in 2021, tonnes

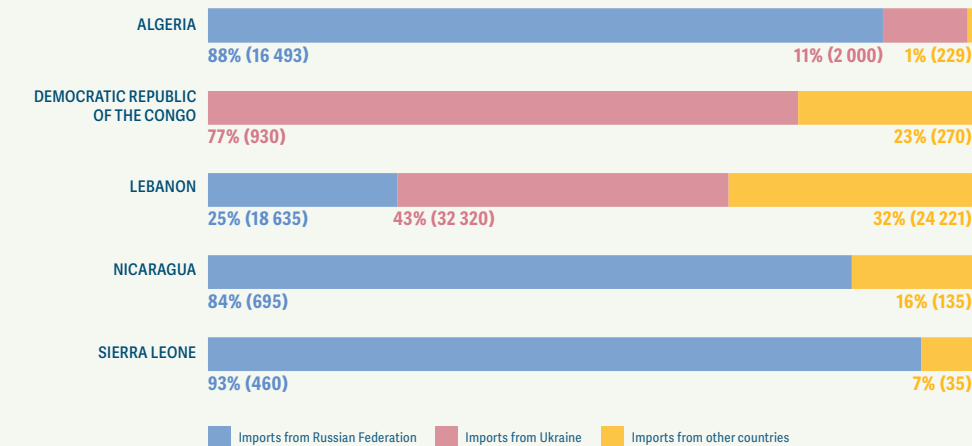


Source: FAOSTAT.

FIGURE 1.2



Shares of sunflower oil import volumes from the Russian Federation and Ukraine in 2021, tonnes



Source: FAOSTAT.

Federation and Ukraine in 2021, which further increased their exposure to the price fluctuations in global markets. See figures 1.1 and 1.2.⁴

GRFC country/territory import dependence extended to fertilizers from the Russian Federation and Belarus too, with more than 60 percent of them being fully reliant on imports of nitrogenous, phosphate and potash fertilizers – over half of which were countries with major food crises (IFPRI, February 2023). Unlike with food imports, fertilizer dependence was spread across Latin America, Africa, the Middle East and Asia.

Elevated international commodity prices in 2022 meant that GRFC countries/territories were spending more to import less food and fertilizers, which is particularly detrimental to the net food importers (FAO, November 2022). These widening trade deficits then weakened local currencies. The US dollar appreciation compounded currency devaluations as most commodities on the global market are priced in US dollars. As a result, food and fertilizer imports became even more expensive in these domestic markets, fuelling overall price inflation and restarting the high price cycle (UNCTAD, June 2022).

By the end of 2022, food prices had increased in all GRFC countries/territories, with food inflation being over 10 percent in 47 out of the 73 countries/territories (WFP, February 2023). See map 1.2. The rate of change varied throughout the year as prices for certain foods adjusted with crop seasonality, currency fluctuations and/or policy actions. Moreover, nearly all of the countries whose currencies lost value at an abnormally fast rate relative to the US dollar in 2022 were GRFC countries/territories (WFP, February 2023). See map 1.3.

As GRFC countries/territories sunk deeper into the high price cycle, the ability of governments to cope with the compounding effect of the war in Ukraine was limited by import reliance and high debt obligations after the COVID-19 pandemic. Before the onset of the war, high volumes of debt qualified over 70 countries to participate in the G20 Debt Service Suspension Initiative, and 36 of the eventual 48 participants experienced food crises

in 2022 (WB, February 2023). By the end of 2022, over a quarter of GRFC countries/territories had public debt over 60 percent of Gross Domestic Product (GDP) (IMF, October 2022).

Governments took some measures (mostly temporary ones) to lessen the burden of high prices on vulnerable households. Several GRFC countries/territories were part of the group that imposed export restrictions to improve domestic availability and prices of certain goods. For instance, Lebanon is imposing an export ban on milled grain products, bread, sugar, fruits and vegetables through the end of 2023.

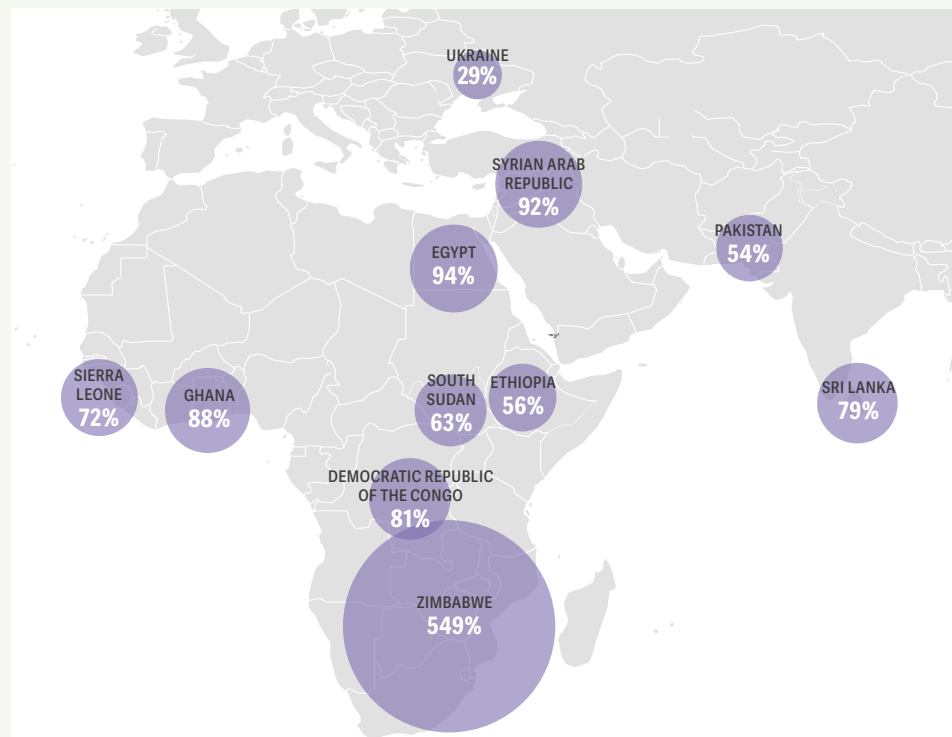
Another group of GRFC countries/territories enacted domestic policies to support vulnerable households. A June 2022 survey by the IMF found that low- and middle-income countries were more likely to implement subsidies, customs duties and/or price freezes rather than cash transfers or voucher programmes (IMF, September 2022). For instance, Ethiopia, Kenya, Nigeria and the United Republic of Tanzania provided production support through fertilizer subsidies while the Government of Honduras distributed seeds and fertilizers to households in extreme poverty in vulnerable regions.

Despite the implementation of policies to insulate citizens, vulnerable households in GRFC countries/territories bore the brunt of the impacts. Many had previously taken on debt, sold assets and/or depleted food stocks to cope with the livelihood losses and inflation from the COVID-19 pandemic and had to continue these practices into 2022 (WB, September 2022). To cope with the further reduction in purchasing power, populations with low incomes in both developed and developing countries may be forced to make trade-offs, such as reducing portions and skipping meals, that negatively affect current and future food and nutrition security (FAO, December 2022).

A 2022 analysis found that food inflation was associated with higher risks for wasting and severe wasting: across all children aged under 5 years, a 5 percent increase in the real price of food was associated with a 9 percent higher risk of wasting and a 14 percent higher risk of severe wasting (IFPRI, December 2022).

MAP 1.3

Food-crisis countries with the largest local currency depreciation relative to the US dollar, December 2022–February 2023



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
Source: WFP, February 2023.

⁴ Total domestic supply of wheat and wheat products, as well as sunflower seed oil, are from 2020. This is the latest data available and indicative of the total supply in 2021 in these countries.

Spotlight | Timely action saves lives and money

Following the devastating famine in Somalia in 2011, the international community sought to ensure that there would be no repeat of the failures that led to it. Yet more than a decade on, too often the international community waits for a Famine (IPC/CH Phase 5) classification before mobilizing additional funding.

Decision-makers should not wait for Famine declarations before scaling up assistance

An area classification of Famine (IPC/CH Phase 5) is reached when one in five households face an extreme lack of food, about one in three children suffer from acute malnutrition, and two adults or four children in every 10 000 die each day due to starvation or due to the interaction of malnutrition and disease.

But areas classified in IPC Phase 3 or 4, particularly if for a sustained period, already have higher-than-average levels of excess mortality and morbidity. In 2011, Somalia experienced a devastating famine that killed over a quarter of a million people – half of them children under the age of 5 (FSNAU, May 2013). Some 43 percent of these deaths – primarily children – occurred before IPC Phase 5 criteria were met and many occurred outside the areas classified in IPC Phase 5 (Maxwell *et al.*, 2018).

In Somalia in 2022, an estimated 43 000 excess deaths occurred – half among children under 5 years old – even after a relatively big scale-up in humanitarian response, due to the impacts of the prolonged severe drought in the Horn of Africa as well as global price rises, ongoing insecurity and the aftermath of the COVID-19 pandemic (UNICEF & WHO, March 2023).

The high levels of acute food insecurity already faced by the 143.7 million people in Crisis (IPC/CH Phase 3) and 35 million people in Emergency (IPC/CH Phase 4) in 2022, combined with the high burden of acute malnutrition in most of the food-crisis countries, already contributed to loss of livelihoods and even death. Equally important is the future impact in terms of people's physical and mental development, and that of their offspring, and the human and social capital of communities, even nations.

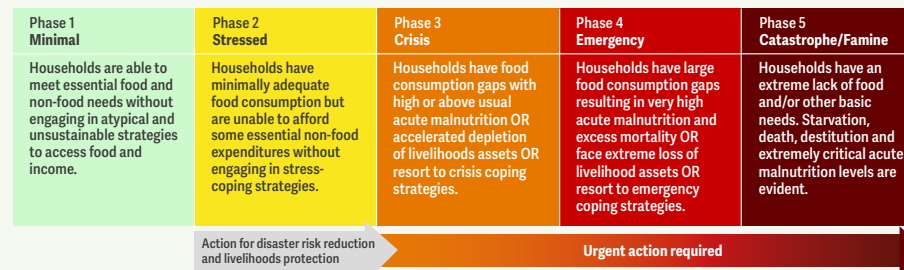
Urgent food and livelihood assistance is required for populations in IPC/CH Phase 3 and 4

In IPC/CH Phase 3, households are already unable to meet their minimum food needs and either suffer from those food deficits outright or are forced to make the choice to protect food consumption by engaging in coping strategies that will harm their future ability to access food and sustain their livelihoods. For example, they may sell significant productive assets, forgo essential healthcare, or withdraw children from school so that they can eat. As households start to resort to coping mechanisms, the most nutritionally vulnerable – children, and pregnant and breastfeeding women – will start to bear the consequences of food consumption gaps, resulting in high or above-average acute malnutrition levels. It is at this point that action is needed to ensure immediate wellbeing, support households' ability to sustain themselves and protect families from the dilemma of making choices that are likely to lead to worse outcomes in the future.

Over time, sustained pressure from drivers such as conflict, economic shocks and weather extremes, as well as lack of social support or opportunity to recover from shocks, exhausts people's abilities to cope. This, in turn, drives further deterioration in household food security and increases reliance on external assistance to manage growing consumption gaps. Under such circumstances, and without successful recovery and development initiatives, there will be a perpetual need for urgent humanitarian action and a growing risk of deteriorating into Emergency (IPC/CH Phase 4).

In IPC/CH Phase 4, households face large food gaps, which are either reflected in high acute malnutrition levels and excess mortality or mitigated by using emergency coping strategies that severely corrode their wellbeing and livelihoods. For instance, households may turn to eating seeds intended to be used for the next planting season, selling their last breeding animal, or selling their land or house to access food. Assistance is urgently needed in these cases to save households from mortgaging their futures and livelihoods to avoid hunger.

Urgent action is needed for populations experiencing IPC/CH Phase 3 or above



Source: IPC.

Early investment and action not only saves lives – it saves money

A 2020 study in Ethiopia found that routine support provided under the Ethiopia Productive Safety Net Programme and humanitarian assistance saved an estimated USD 859 million in one year in reduced aid costs as well as avoided income and livestock losses at the household level. Increased cash/resilience investments would have increased savings to USD 871 million (Cabot Venton *C.*, 2020). A 2012 modelling study in Wajir county in Kenya estimated the total cost of late humanitarian response to be USD 257 million in a high-magnitude drought affecting 367 000 people (Cabot Venton *et al.*, June 2012).

Following the identification of Risk of Famine in Somalia in 2017, USD 1.1 billion of emergency funding was mobilized and in 2022 the projection of Famine in some areas and among some population groups raised USD 980 million. Despite the evidence about the cost-effectiveness of anticipatory investment, in 2016, 2018, 2019, 2020 and 2021, only around half of that amount was allocated, despite 0.4–0.6 million people remaining in IPC Phase 4 each year (GNFC, 2022).


Timely action mitigates intergenerational impacts

A Famine classification or projection attracts political attention and resources, but it also signifies political and humanitarian failure. By this stage, lives and futures have already been lost, livelihoods have collapsed, and social networks disrupted with deleterious impacts on the lives of an unborn generation. The Dutch famine birth cohort study that followed children born during the 1944–45 famine found that children who were born or *in utero* during the famine experienced lifelong challenges including higher mortality and morbidity, and mental health conditions, and that these effects were passed on to the next generations (BMJ, accessed 10 April 2023).

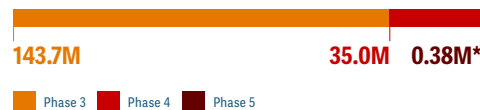
The failure to accelerate progress on addressing the drivers of acute food insecurity and undernutrition is perpetuating a system of reliance on humanitarian aid that was not designed or resourced to respond to cyclical and predictable shocks at such scale (Save the Children International and Oxfam International, May 2022). Indeed, the magnitude of people facing IPC/CH Phase 3 or above is daunting, but it is that very scale that drives urgency. Earlier intervention can reduce food gaps and protect assets and livelihoods at a lower cost than late humanitarian response.


Acute food insecurity overview, 2022–23

ACUTE FOOD INSECURITY PEAK 2022

 **258.0M** people – **22.7%** of the analysed population – in **58 countries/territories** faced high levels of acute food insecurity in 2022

 **179.0M** of them were in **41 countries/territories** with IPC/CH analyses



 **54.2M** of them were in **seven countries/territories** with HNO analyses**

 **19.0M** of them were in **seven countries** with WFP CARI analyses**

 **5.5M** of them were in **three countries** with FEWS NET analyses**

*This includes people facing IPC/CH Phase 5 outside of the peak period of acute food insecurity in Afghanistan, Burkina Faso and Nigeria.

**No data disaggregated by phase are available for these countries/territories.

Source: IPC TWGs, 2022; HNO; WFP CARI; FEWS NET.

 **253.0M** people were in Stressed (IPC Phase 2) in **41 countries/territories** with IPC/CH analyses

Source: IPC TWGs, 2022.

In 2022, 258 million people faced high levels of acute food insecurity in 58 countries/territories with available data, up from 193 million in 53 countries in 2021. This marks the fourth consecutive year of rising numbers of people in Crisis or worse (IPC/CH Phase 3 or above or equivalent) due to persistently high numbers in some countries/territories, worsening situations in others, as well as increased analysis.

Between 2021 and 2022, there was a 25 percent increase in the total population analysed and a 34 percent increase in the number of people facing high levels of acute food insecurity, indicating a year-on-year rise in the magnitude of acute food insecurity in the food crises identified in this GRFC. The prevalence of the population in IPC/CH Phase 3 or above or equivalent increased from 21.3 percent of the overall analysed population to 22.7 percent between the two years.

When comparing the same 48 countries/territories analysed in 2021 and 2022, the population facing IPC/CH Phase 3 or above or equivalent increased from 191.4 million people to 228.6 million and the share of people in these phases from 21.8 percent to 22.5 percent in 2022. There were differences in analysis coverage at country level resulting in a 15.5 percent increase in the analysed population between the two years in these countries. See *Technical Notes*.

Out of the 58 food-crisis countries included in the GRFC, 42 were identified as major food crises because they had more than 1 million people or 20 percent of the population in IPC Phase 3 or above or equivalent. In the majority of these, levels of acute food insecurity increased and were the highest in the history of the report while in some numbers were stable or declined.

Seven food-crisis countries/territories were included in the report as major food crises for the first time – Colombia (refugees and migrants), Dominican Republic, Guinea, Mauritania, Myanmar, Sri Lanka and Lebanon – either because data became newly available or levels of acute food insecurity increased to the extent that they met the inclusion thresholds.

FIGURE 1.3

 **Numbers of people facing Catastrophe in (IPC/CH Phase 5) in 7 countries in 2022**



*This is not the same analysis as the one showing the acute food insecurity peak in 2022.

No new information by IPC phase was available for Ethiopia in 2022.

Source: IPC TWGs, 2022; and CH.

Populations in Catastrophe (IPC/CH Phase 5) in 2022

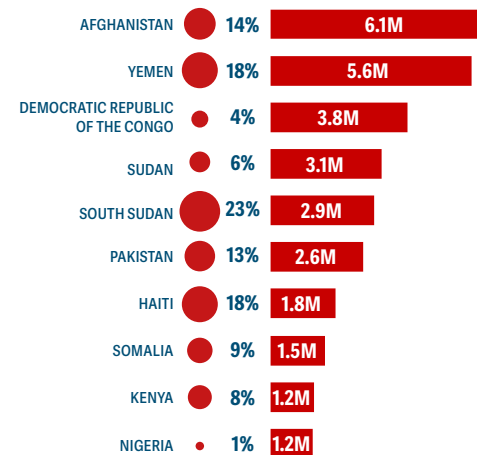
Seven countries/territories had populations in Catastrophe (IPC/CH Phase 5) at some point during 2022. Of the 376 000 people in this phase, 57 percent of them were in Somalia and 23 percent in South Sudan. In Yemen, Afghanistan, Haiti, Nigeria and Burkina Faso, populations in this phase have also been identified in the course of 2022. See *figure 1.3*.

Famine (IPC/CH Phase 5) is used to classify an area in which there is evidence that levels of acute food security, acute malnutrition and mortality are widespread and critical – at or above IPC/CH Phase 5 thresholds.

In localized parts of Somalia and Yemen, a Risk of Famine was identified in 2022 according to worst-case scenarios, although it did not materialize in either country. In Somalia, scaled-up humanitarian assistance and better-than-forecast (though still below average) October–December rains gave the country some

FIGURE 1.4

 **Countries/territories with over 1 million people in IPC/CH Phase 4 in 2022**



 Numbers of people in Phase 4  Share of analysed population in Phase 4

Source: IPC TWGs, 2022; and CH.

respite from the prolonged drought and benefited crops and livestock. In Yemen, the return to almost normal functioning of Al Hodeidah port, the truce in hostilities, seasonality and humanitarian assistance prevented a worst-case scenario.

Populations in Emergency (IPC/CH Phase 4) in 2022

The population in Emergency (IPC/CH Phase 4) reached 35.0 million people in 39 countries or 4 percent of the analysed population with IPC/CH data.

Around half of the total population identified in IPC/CH Phase 4 were in four countries, each with more than

3 million people in this phase – Afghanistan, Yemen, the Democratic Republic of the Congo and the Sudan.

In South Sudan, Yemen, Haiti, Afghanistan and the Central African Republic, at least 10 percent of the analysed population was in IPC Phase 4, reaching over 20 percent in South Sudan.

Between 2021 and 2022, the population in IPC/CH Phase 4 increased by more than half a million in six countries: Pakistan (+1.5 million), Nigeria (+0.9 million), Somalia (+0.9 million), Kenya (+0.8 million), Haiti (+0.7 million) and Yemen (+0.6 million). In relative terms, the population in IPC/CH Phase 4 more than doubled in Kenya, Mali, Mauritania, Pakistan, the Niger, Nigeria and Somalia.

When an area is classified in IPC/CH Phase 4, it means at least 20 percent of its population is experiencing IPC/CH Phase 4 or above acute food insecurity. In 2022, 15¹ of the 41 countries/territories with IPC/CH analyses had areas classified in IPC/CH Phase 4. Kenya, the Niger, Somalia and Pakistan all had new areas classified in IPC Phase 4 that were classified in lower phases in 2021.

For some major food crises identified in 2022, data cannot be disaggregated by IPC phase: Bangladesh (Cox's Bazar), Colombia (refugees and migrants), Ethiopia, Myanmar, Palestine, Sri Lanka, the Syrian Arab Republic, Uganda, Ukraine and Zimbabwe.

Year-on-year changes in the population facing IPC/CH Phase 3 or above or equivalent

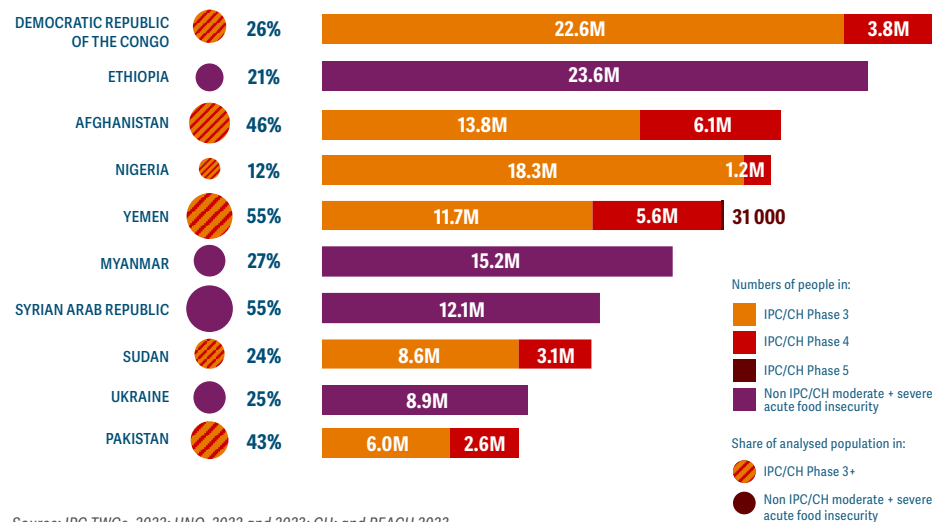
Eight countries experienced at least 1 million additional people in IPC/CH Phase 3 or above, between 2021 and 2022: Nigeria (+6.5 million), Pakistan (+3.9 million), Somalia (+2.1 million), Kenya (+2 million), the Sudan (+1.9 million), the Niger (+1.8 million), Yemen (+1.2 million) and Malawi (+1.2 million).

Besides capturing the impact of major shocks on the acute food insecurity status of vulnerable households, this can also be attributed to an increase in the analysed population in Pakistan, Somalia, the Sudan, Yemen and

1 Afghanistan, Angola, Burkina Faso, Central African Republic, Democratic Republic of the Congo, Haiti, Kenya, Madagascar, Niger, Nigeria, Pakistan, Somalia, South Sudan, Sudan and Yemen.

FIGURE 1.5

Countries/territories with the highest numbers of people in IPC/CH Phase 3 or above or equivalent in 2022 and the share of analysed population in these phases



Source: IPC TWGs, 2022; HNO, 2022 and 2023; CH; and REACH 2023.

Malawi and was also linked to population growth in Somalia and Yemen. See *Technical Notes*.

In Ethiopia and Ukraine, deteriorations in acute food security were observed between 2021 and 2022, but were not quantifiable due to changes in methodology. See *Technical Notes*.

Countries with the highest number of people in IPC/CH Phase 3 or above or equivalent in 2022

In ten countries/territories, 163 million people were in IPC/CH Phase 3 or above or equivalent. These countries accounted for 63 percent of the total number of people in these phases. Five of these countries – the Democratic Republic of the Congo, Ethiopia, Afghanistan, Nigeria (21 states and the FCT) and Yemen – accounted for more than 41 percent of the total population in IPC/CH Phase 3 or above or equivalent. See *figure 1.5*. Six of them have consistently populated this list since 2016 – Afghanistan, the Democratic Republic of the Congo, Ethiopia, Nigeria,

the Syrian Arab Republic and Yemen – and the Sudan since 2018, and Pakistan since 2021.

In 2022, the countries with the largest numbers of people in IPC/CH Phase 3 or above included, for the first time, Myanmar (due to newly available data) and Ukraine.

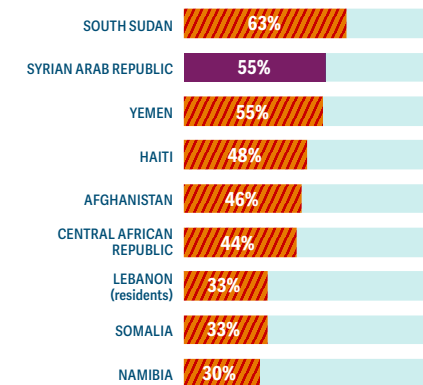
Countries with the highest share of people in IPC/CH Phase 3 or above or equivalent in 2022

In terms of share of the analysed population, in three countries – South Sudan, the Syrian Arab Republic and Yemen – more than 50 percent of the analysed population faced IPC Phase 3 or above or equivalent. See *figure 1.6*.

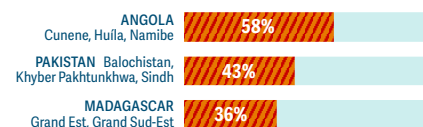
An additional three countries (Afghanistan, the Central African Republic and Haiti) had more than 40 percent of their population in IPC Phase 3 or above. In addition, selected areas in Angola and Pakistan, and refugee populations in Algeria, Bangladesh, Colombia, Congo, Ecuador, Jordan and Lebanon, had more than 40 percent

FIGURE 1.6

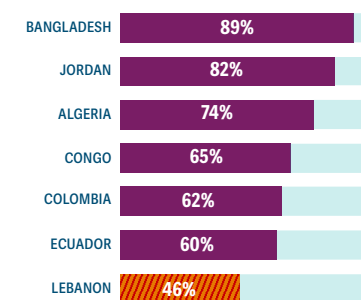
Countries with: ≥30% of the analysed population in IPC Phase 3 or above or equivalent, 2022



>35% of the analysed population in localized areas in IPC Phase 3 or above, 2022



>45% of the analysed refugee/migrant population in IPC Phase 3 or above or equivalent, 2022



Source: IPC TWGs, 2022; HNO, 2023; WFP 2022 and 2023.

of the analysed population facing high levels of acute food insecurity.

Drivers of food crises in 2022–23

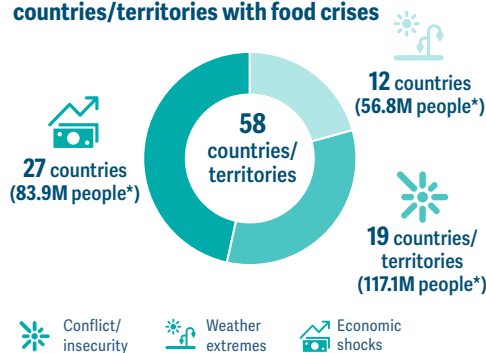
The food crises profiled in the GRFC are caused by multiple drivers that tend to be mutually reinforcing in most contexts. In 2022, they become even more entangled, in particular for major food crises, and were increasingly driven not only by the occurrence of a shock, but the succession of shocks – particularly the global shocks of the socioeconomic impacts of COVID-19 and the war in Ukraine, with knock-on effects at the national and regional levels.

In terms of numbers of people facing high levels of acute food insecurity, conflict was still the main driver in 2022. But economic shocks became the main driver in a higher number of countries/territories. See figure 1.8.

The GRFC 2023 aims to identify the most prominent driver of acute food insecurity for each country/territory. Although the relative weight of each driver is difficult to estimate at country level – and even more so at global level – the increase in acute food insecurity observed in

FIGURE 1.7

Key drivers of acute food insecurity in countries/territories with food crises



Food crises are the result of multiple drivers. The GRFC has based this infographic on the predominant driver in each country/territory.

* Number of people in IPC/CH Phase 3 or above or equivalent.

Source: FSIN, GRFC 2023.

recent years may be attributed in part to the increased significance of secondary drivers – global economic shocks and climatic phenomena.

Conflict/insecurity remained the most significant driver for around 117 million people facing high levels of acute food insecurity in 19 countries/territories. This was 22 million fewer people than in 2021 (139 million people across 24 countries/territories) – largely because economic shocks were considered a more prominent driver in Afghanistan, South Sudan and the Syrian Arab Republic. However, the long-term impacts of protracted conflict – as well as pockets of persisting insecurity – in these countries continued to limit livelihood opportunities and agricultural production, particularly for millions of internally displaced people (IDPs). Fifteen countries/territories remained primarily affected by conflict/insecurity between the two years mainly in West Africa and the Sahel, and the Middle East. Haiti became more prominently affected by insecurity and gang violence in 2022 compared with 2021. Data became available for Algeria (refugees), Congo (refugees) and Myanmar in 2022 – in all these situations conflict was identified as the primary driver.

The impact of conflict/insecurity by region

Central and Southern Africa Agricultural activities were hampered by insecurity and population displacements in the Central African Republic and in eastern areas of the Democratic Republic of the Congo (FAO-GIEWS, December 2022). In Mozambique, repeated attacks by non-state armed groups in Cabo Delgado led to a rise in IDPs, who face the highest levels of acute food insecurity, while violent incidents hindered the delivery of essential humanitarian assistance (FAO-GIEWS, January 2023).

East Africa Localized conflict continues to affect households particularly across Ethiopia, Somalia, South Sudan and the Sudan (WFP, December 2022). In Tigray and Amhara regions of Ethiopia, security improved after the ceasefire agreement in November 2022, but remained volatile, and plantings of 2023 crops are likely to be reduced (FAO-GIEWS, March 2023).

West Africa and the Sahel, and Cameroon Continued insecurity in the Lake Chad Basin and the Liptako-Gourma region as well as the increase in

FIGURE 1.8

Numbers of people in IPC/CH Phase 3 or above or equivalent by primary driver, 2018–22

	2018	2019	2020	2021	2022
Conflict/insecurity	73.9M 21 countries	77.1M 22 countries	99.1M 23 countries	139.1M 24 countries	117.1M 19 countries
Economic shocks	10.2M 6 countries	24.0M 8 countries	40.5M 17 countries	30.2M 21 countries	83.9M 27 countries
Weather extremes	28.8M 26 countries	33.8M 25 countries	15.7M 15 countries	23.5M 8 countries	56.8M 12 countries

Economic shocks include the indirect impact of COVID-19 in 2020 and 2021 and the effects of the war in Ukraine in 2022.

Source: FSIN, GRFC 2019–2023.

violent incidents in northern parts of coastal countries disrupted agricultural livelihoods, pastoral movements, labour migration flows and the delivery of humanitarian assistance, reducing the availability of and access to food. In Burkina Faso, for instance, conflict in conjunction with lack of basic social infrastructure is driving permanent population displacement and disrupting agropastoral activities (CH, March 2023).

Asia In Bangladesh, about 1 million Rohingya refugees from Myanmar, who reside mostly in Cox’s Bazar and the island of Bhasan Char, remain highly dependent on humanitarian assistance (FAO-GIEWS, March 2023). In Afghanistan, although conflict incidents and related population displacement reduced considerably since August 2021, decades of conflict have significantly reduced households’ resilience particularly for the millions still displaced internally (IPC, May 2022).

Europe In Ukraine, most of the people in need are located in war zones where disruptions to income-earning activity, interruptions to supply chains, and damage to essential infrastructure, including water and heating, have occurred (FEWS NET, September 2022).

Middle East and North Africa In the Syrian Arab Republic, while large-scale hostilities have subsided following the March 2020 Idleb ceasefire agreement, localized hostilities and lasting impact from previous

clashes continued throughout 2022 (OCHA, December 2022). In Libya, although there was no relapse into large-scale armed conflict in 2022, localized clashes between armed groups, particularly in the western region, continued (OCHA, December 2023). In Yemen, despite the six-month truce and lull in hostilities, the impact of eight years of conflict – loss of life, disruption of livelihoods and crippling of the economy – has contributed to unprecedented levels of acute food insecurity (IPC, October 2022).

Economic shocks (including COVID-19 socioeconomic impacts and the ripple effects of the Ukraine war) became the main driver for 83.9 million people in 27 countries – almost tripling the 2021 figure of 30.2 million people and an increase from 21 countries. This is the result of successive years of global shocks marked by the impacts of the COVID-19 pandemic on economies and livelihoods starting in 2020, followed by the start of the war in Ukraine in 2022, which triggered significant food and fertilizer price shocks on international markets, affecting prices at the country level. The economic resilience of poor countries has thus dramatically decreased and they face extended recovery periods and have diminished the ability to cope with future shocks.

Economic shocks became the primary driver in 2022 in four countries in which conflict had been identified as

the primary driver in 2021 – Afghanistan, Lebanon, South Sudan and the Syrian Arab Republic. For the Sudan, weather extremes were the primary driver in 2021, but economic shocks became more prominent in 2022. In seven countries in the GRFC 2023 that did not have sufficient evidence last year (Cabo Verde, Colombia (refugees and migrants), Dominican Republic, Ecuador (refugees and migrants), Ghana, Sri Lanka and Togo), economic shocks were the main driver. In 15 countries, they remained the primary driver in both years.

The impact of economic shocks by region

Central and Southern Africa Across the region, high food prices and transport costs, due to the lingering impact of COVID-19 related-restrictions and the ripple effects of war in Ukraine, coupled with very limited employment opportunities, have substantially reduced households' purchasing power while elevated international prices of fertilizers, pesticides and herbicides are having negative effects on yields and/or areas planted.

In Malawi and Zambia, national average prices of maize grain reached new all-time highs in January 2023, underpinned by tight domestic supplies, currency weakness and high prices of energy that have inflated production and distribution costs. In Zimbabwe, by December 2022, the annual food inflation rate was estimated at 285 percent, with deep-rooted currency weakness amplifying the transmission of elevated global prices to the domestic market (FAO-GIEWS, March 2023).

East Africa Countries across the region – especially Ethiopia, Somalia, South Sudan and the Sudan, affected by conflict and weather extremes – continue to face macroeconomic challenges aggravated by multiple factors including weakening currencies against the dollar, high inflation, and the repercussions of the war in Ukraine, negatively impacting households' purchasing power and food security (WFP, December 2022).

West Africa and the Sahel, and Cameroon In several countries of the Gulf of Guinea, prices of coarse grains stood well above their year-earlier levels in December 2022 and January 2023. In Sahelian countries, tight market availabilities due to low carryover stocks and reduced trade flows, coupled with market disruptions due to local conflicts, supported an increase in cereal prices

(FAO-GIEWS, March 2023) in every country in the region in 2022. By late 2022, food price inflation ranged from 15–50 percent in 11 countries (Trading Economics).

Asia Afghanistan's economic crisis is widespread, with more than half of households experiencing an economic shock in the second half of 2022. The drivers of humanitarian needs shifted from COVID-19 and conflict in 2021, to drought, climate change and economic shocks in 2022 (OCHA, January 2023).

In 2022, vulnerable populations in Sri Lanka were affected by the country's protracted economic crisis. In Pakistan and Bangladesh, prices of staple foods were at high levels, underpinned respectively by high agricultural and transportation costs and by considerable slowdown in imports in 2022 (FAO-GIEWS, March 2023).

Latin America and the Caribbean In Central America, annual food inflation was above 11 percent in El Salvador, Guatemala, Honduras and Nicaragua (WFP, March 2023). In Haiti, a succession of crises and increasing violence have paralysed the economy, and sustained currency depreciation provided additional upward pressure on prices of imported items. In South America, the severe and prolonged macroeconomic crisis in the Bolivarian Republic of Venezuela has created a refugee and migrant crisis of 7.1 million people, with the largest groups in Colombia, Peru and Ecuador (R4V, January 2023).

Middle East and North Africa In the Syrian Arab Republic, a crippled economy is the main driver of acute food insecurity. High domestic inflation fuelled by currency depreciation and high import costs has severely eroded purchasing power (OCHA, December 2022). Lebanon is facing an economic and financial crisis that has undermined the food security of already vulnerable Lebanese and Syrian refugees (IPC, December 2022). Yemen's economy remains frail; according to the World Bank, economic and social prospects remain highly unstable and hinge on a resolution to the conflict.



Weather extremes were the primary driver of acute food insecurity in 12 countries where 56.8 million people were in IPC/CH Phase 3 or above or equivalent, a doubling in the number of people from 23.5 million in eight countries in 2021. These extremes included sustained and exceptionally severe drought in the Horn of Africa, devastating flooding in



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In Afghanistan, exceptionally severe economic collapse has left people unable to buy food for their families and they have resorted to selling their personal effects on the streets.

Pakistan, tropical storms and cyclones and drought in Southern Africa. Even though the conflict in Tigray remained active until the ceasefire in November 2022, weather extremes were deemed to be the main driver in Ethiopia where the drought affected more people than conflict that year. Weather extremes also became the primary driver in Iraq, Pakistan, Uganda and Zambia. In seven countries, weather extremes were the primary driver in both years.

The impact of weather extremes by region

Central and Southern Africa Several areas have been affected by rainfall deficits and high temperatures, including northern parts of Madagascar, Mozambique and Namibia, and southern areas of Angola and Zimbabwe, curtailing yield prospects. Furthermore, the impact of tropical storms and cyclone Freddy in February 2023, which had caused flooding in Madagascar and Mozambique, is expected to result in crop damages (FAO-GIEWS, March 2023).

In the analysed areas of the United Republic of Tanzania, acute food insecurity is driven primarily by a prolonged dry spell and erratic rainfall that has contributed to failure in crop and livestock production and has negatively affected pasture and water availability (IPC, December 2022).

East Africa The Horn of Africa has faced drought since late 2020, resulting in widespread livestock deaths in pastoral areas of southern Ethiopia, central and northern Somalia, and northern and eastern Kenya. In Somalia, the early 2023 harvests are the sixth consecutive season, and in southeastern Kenya the fifth, with reduced cereal production. South Sudan experienced a fourth consecutive year of unusually widespread flooding.

West Africa and the Sahel, and Cameroon Widespread floods led to crop losses (FAO-GIEWS, March 2023) particularly affecting the Inner Niger Delta in Mali, Senegal, the Lower Niger River Basin in Nigeria, and the Lake Chad Basin – Chad, the Niger and Nigeria. The

region experienced poor rainfall distribution with long dry spells and heavy rains in September and October 2022, particularly in Sierra Leone, Guinea, Senegal, Nigeria and the Lake Chad Basin (RPCA, November 2022).

Asia In Pakistan, severe flooding in June and August 2022 affected the livelihoods of approximately 33 million people, especially in southern areas (FAO-GIEWS, December 2022). In Afghanistan, the number of atypical sudden-onset disasters, such as floods and earthquakes, was higher in 2022 than preceding years and 25 out of 34 provinces in reported either severe or catastrophic drought conditions (WoAA, 2023).

Latin America and the Caribbean In Haiti, below-average rainfall resulted in low agricultural harvests, which exacerbated income losses for farmers. In some localized areas of northeastern Guatemala and eastern Nicaragua, torrential rains in October and November 2022 triggered floods and affected standing crops. The Dominican Republic was severely impacted by hurricane Fiona in September 2022. Continued torrential rains and tropical storm Julia in October 2022 impacted agricultural livelihoods in Honduras.

Middle East Most of the Syrian Arab Republic experienced widespread drought-like conditions including in the main rainfed cereal-producing areas (Aleppo, Raqqa and Al-Hasakeh governorates). Yemen faced moderate to severe drought conditions with unprecedented temperature rises during the first half of the year followed by heavy rainfalls in August 2022, which affected all cropped regions.

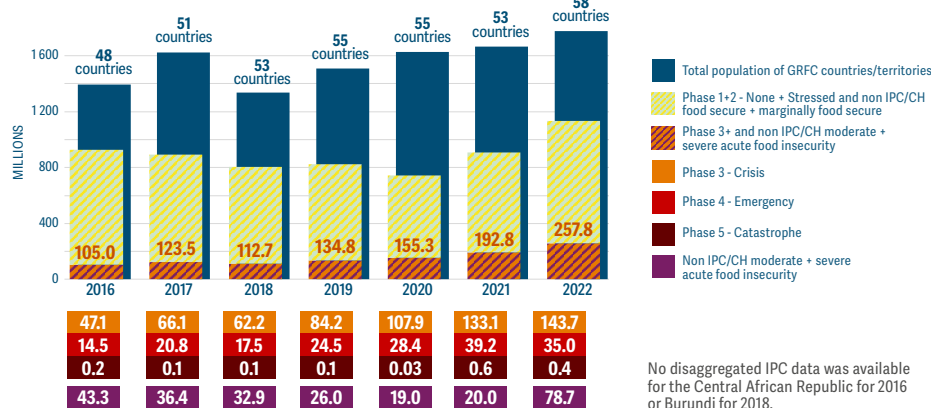


Natural disaster: earthquake in the Middle East in February 2023

Initial assessments on the impact of the devastating earthquakes in southern **Türkiye** indicate USD 6.4 billion in damage and losses to agriculture, including crops, livestock, fisheries and aquaculture, as well as rural infrastructure. The earthquake severely impacted 11 key agricultural provinces affecting 15.73 million people and over 20 percent of the country's food production (FAO, March 2023). In the **Syrian Arab Republic**, earthquake-affected

FIGURE 1.9

Numbers of people in GRFC countries/territories facing acute food insecurity, 2016–2022



Source: FSIN, using data from 2016–2022.

Acute food insecurity 2016–2022

Between 2016 and 2022, the number of people in IPC/CH Phase 3 or above or equivalent increased by 145 percent from 105 million in 48 countries/territories to 258 million in 58 countries/territories. This is partly attributable to a 22.5 percent increase in population analysed from 925 million in 2016 to 1.13 billion in 2022, but largely reflects an actual increase in numbers of people facing high levels of acute food insecurity in more countries with food crises.

areas were home to almost 3 million IDPs. The governorate of Aleppo suffered the greatest damages (44 percent of total), followed by Idlib. GDP contraction is expected to widen by 2.3 percentage points in 2023 to 5.5 percent, primarily driven by the destruction and losses of physical capital (especially in agriculture) estimated at USD 5.2 billion. Inflation is expected to increase substantially, primarily driven by the reduction in goods available, an increase in transport costs and a rise in demand for reconstruction material (WB, March 2023).

The percentage of the analysed population in IPC/CH Phase 3 or above or equivalent has increased each year, doubling between 2016 and 2022 from 11.3 percent to 22.7 percent. When comparing the same 38 countries/territories analysed in all editions, the number of people in IPC Phase 3 or above more than doubled (+117 percent) between 2016 and 2022. The analysis coverage in these 38 countries/territories increased by 31 percent over the same time period. Nineteen countries have been consistently identified as major food crises since 2016. See chapter 3.

Populations in IPC/CH Phase 5, 2016–2022

Households in Catastrophe (IPC/CH Phase 5) experience an extreme lack of food and/or other basic needs even after full employment of emergency coping strategies, with starvation, death and extremely critical acute malnutrition levels present. Many deaths occur before Phase 5 is reached, suggesting that even with urgent action the humanitarian response is already too late.

In 2022, the number of countries in which the IPC/CH identified the presence of populations in Catastrophe (IPC/CH Phase 5) reached the highest in the history of the GRFC. There were 376 000 people in this phase

across seven countries, namely Somalia, South Sudan, Yemen, Afghanistan, Haiti, Nigeria and Burkina Faso.

This number is lower than in 2021 when a total of 570 000 people were in Catastrophe (IPC/CH Phase 5) over the course of the year in four countries (Ethiopia, Madagascar, South Sudan and Yemen) but no new information by IPC phase for Ethiopia was available in 2022. South Sudan has had populations in IPC Phase 5 every year since 2016 (although outside the peak period of acute food insecurity in 2020) and Yemen since 2018. Somalia has had populations in IPC Phase 5 in 2018 and 2022; northeast Nigeria in 2016, 2017 and 2022 (although outside the peak); and Burkina Faso in 2020 and 2022. See figure 1.10.

FIGURE 1.10

Numbers of people in Catastrophe (IPC/CH Phase 5), 2016–2022

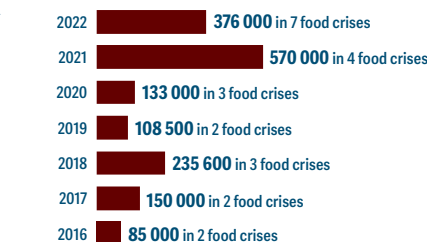


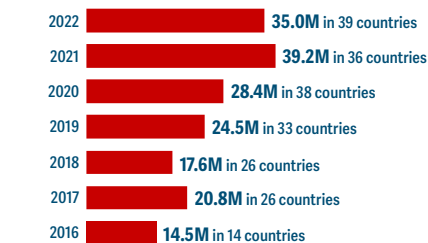
Figure 1.10 reports the highest number of people in IPC/CH Phase 5 for each country within the year of reference, not only those identified by the peak analyses, and therefore, might not be in line with figure 1.9. Source: FSIN, using IPC and CH data.

Populations in IPC/CH Phase 4, 2016–2022

Emergency (IPC/CH Phase 4) is an extremely severe situation where urgent action is needed to save lives and livelihoods. In IPC/CH Phase 4, households face large food gaps which are either reflected in high acute malnutrition rates and excess mortality or mitigated by use of emergency coping strategies, which may go as far as selling their last breeding animal, or selling their land or house. In 2022, the number of people in this phase reached 35 million across 39 countries/territories. The observed increase from 2016 when 14.5 million

FIGURE 1.11

Numbers of people in IPC/CH Phase 4, 2016–2022



No disaggregated phase data were available for Ethiopia or Zimbabwe in 2022, where in 2021, a total of 5.1 million people were in this phase.

Source: IPC TWGs, 2022 and 2023; and CH.

people in 14 countries were in IPC/CH Phase 4 also reflects an increase in population analysed from 446 million to 797 million people. Considering the same countries with IPC/CH Phase 4 data that were analysed consistently across all editions of the GRFC, the share of people in this phase increased from 3 percent in 2016 to 4.4 percent in 2022.

Six conflict/insecurity-affected countries have had more than 1 million people in Emergency (IPC/CH Phase 4) each year since at least 2019 – Afghanistan, Yemen, the Democratic Republic of the Congo, the Sudan and South Sudan. The crisis in Haiti has been driven by insecurity since 2021.

Populations in IPC/CH Phase 3, 2016–2022

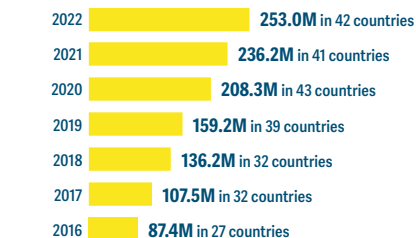
Populations in Crisis (IPC/CH Phase 3) either face food consumption gaps or make the choice to protect food consumption by engaging in coping strategies that will harm their ability to access food and sustain their livelihoods in the future. The number of people in this phase reached 143.7 million across 41 countries in 2022. This marks a threefold increase since 2016 and a steady increase each year despite changes in analysed population. The prevalence of the population in IPC/CH Phase 3 in countries where data were available increased from 11 percent in 2016 to almost 18 percent in 2022.

Populations in IPC/CH Phase 2, 2016–2022

Populations in Stressed (IPC/CH Phase 2) have minimally adequate diets but resort to coping strategies to afford non-food needs. They are vulnerable to shocks and require support to reduce risks related to disasters and to protect their livelihoods. There has been a steady increase in the population in IPC/CH Phase 2 over the seven years of the GRFC. Since 2016, it more than trebled from 83.3 million to 253.0 million in 2022. A similar increase is observed when considering the same countries with a consistent breakdown by IPC/CH Phase 2 since 2016. The percentage of the analysed population in IPC/CH Phase 2 has increased from 21 percent in 2016 to 32 percent in 2022.

FIGURE 1.12

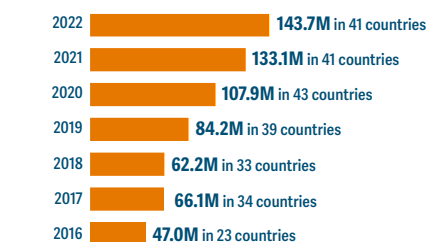
Numbers of people in IPC/CH Phase 2, 2016–2022



Source: IPC TWGs, 2022 and 2023; and CH.

FIGURE 1.13

Numbers of people in IPC/CH Phase 3, 2016–2022



Source: IPC TWGs, 2022 and 2023; and CH.

Projections for 2023

According to 2023 projections available for 38 of the 58 countries/territories as of 17 March 2023, up to 153 million people or 18 percent of the analysed population are projected to be in IPC/CH Phase 3 or above or equivalent.

Of them, 24 million people are projected to be in IPC/CH Phase 4 across 34 countries and 310 000 in Catastrophe (IPC/CH Phase 5) across six countries – Burkina Faso, Haiti, Mali, Nigeria (26 states and the FCT), Somalia and South Sudan – with almost three-quarters of them in Somalia. No projection data are available for Ethiopia or Yemen.

In Somalia, a risk of Famine was still foreseen among agropastoral populations in Burhakaba district and IDP settlements in Baidoa (Bay) and Mogadishu (Banadir) in April–June 2023 (IPC, February 2023).

In Nigeria (26 states and the FCT), Somalia and Kenya, a total of 8 million additional people are projected to face high levels of acute food insecurity in 2023 compared with 2022. In Nigeria, this is primarily due to conflict as well as an increase in geographical coverage, while in Kenya and Somalia it is largely due to the ongoing drought in the Horn of Africa. The population in IPC Phase 4 is projected to increase by nearly 1 million people in Nigeria, by 336 000 in Somalia and 165 000 in the Central African Republic.

Meanwhile, the situation is projected to improve for the Democratic Republic of the Congo, Guatemala, the Niger and the Sudan, with a total of almost 9 million fewer people in IPC/CH Phase 3 or above than in 2022. However, the onset of clashes between the Sudanese Armed Forces and the paramilitary forces in mid-April is likely to worsen acute food security conditions as markets and livelihoods have been severely and suddenly disrupted, humanitarian operations halted, and the risk of further internal displacement heightened.

Economic shocks are projected to be the main driver of acute food insecurity in 22 of 38 countries/territories where 60.9–61.6 million people are projected to face high levels of acute food insecurity. Almost the same number of people facing high levels of acute food insecurity are expected as a result primarily of conflict in ten countries,

ACUTE FOOD INSECURITY PROJECTION 2023

152.0–153.4M people – **18%** of the analysed population – in **38 countries/territories** projected to face high levels of acute food insecurity in 2023

146.4M of them in **34 countries** with available IPC/CH analyses



5.6–7.0M of them in **four countries** with FEWS NET analyses

There are no populations projected in IPC Phase 4 in Lesotho, Malawi and Zambia. Burundi, Nicaragua, Uganda and Zimbabwe projections do not provide information by IPC phase.

For Burkina Faso, Mali, Nigeria, Somalia and South Sudan, a total of 292 000 people in IPC/CH Phase 5 is estimated as the peak of food insecurity projections. In Haiti, 19 000 people were estimated to be in IPC Phase 5 between September 2022 and February 2023.

Source: IPC TWGs, 2022; FEWS NET.

251.0M people were projected to be in Stressed (IPC Phase 2) in **34 countries** with available IPC/CH analyses


Source: IPC TWGs, 2022 and 2023; and CH.

while weather extremes are projected to be the main driver in six countries, where 18 million people are projected to face high levels of acute food insecurity.

Any IPC/CH analyses released after the 17 March cut-off for inclusion date (including the CH March 2023 analyses) will be included in the GRFC 2023 Mid-Year Update. The CH 2023 projections refer to those released in November 2022.

NUTRITION GLOBAL OVERVIEW

A global nutrition crisis that mirrors the food crisis

 In 30 of the 42 major food crises in the GRFC 2023, where data from the Global Nutrition Cluster (GNC), HNO and IPC were available, nearly 35 million children under 5 years of age were suffering from wasting, of whom 9.2 million were severely wasted and in need of urgent treatment. Severe wasting is the most lethal form of undernutrition and a major contributor to child mortality, with nearly half of all deaths of children under 5 years old at the global level attributable to malnutrition (UNICEF, March 2023). About 65 percent of the wasted children lived in nine of the ten countries/territories with the highest number of people in IPC/CH Phase 3 or above or equivalent.

According to 2022 IPC acute malnutrition (AMN) analyses conducted in 17 countries/territories, a number of countries had a dire nutrition situation, including Kenya, Somalia and Yemen, which had areas where the prevalence of wasted children was estimated as Extremely Critical (IPC AMN Phase 5) (>30 percent). Sixteen countries had areas where the prevalence was estimated as Critical (IPC AMN Phase 4) (15–30 percent). These included areas in Afghanistan, southern Angola, northern Burkina Faso, the Central African Republic, Chad, the Democratic Republic of the Congo, Kenya, Mali, Mozambique, the Niger, northern Nigeria, southeastern Pakistan, Somalia, northeastern South Sudan, Uganda and Yemen.

IPC AMN Phase 5 wasting levels (30 percent or higher) were expected in the Baidoa and Buur Hakaba districts of Somalia's central Bay region between October and December 2022, and in Kenya's northern arid and semi-arid lands, particularly in Turkana North and Turkana South as well as Laisamis in Marsabit county, between August and October 2022.

The determinants of malnutrition

Malnutrition is multidimensional, and child nutritional status is determined by multiple factors according to the UNICEF Conceptual Framework on the Determinants of

Maternal and Child Nutrition (UNICEF, November 2021). The associations between undernutrition and acute food insecurity are not linear but, as the GRFC illustrates, areas with high levels of acute food insecurity often tend to have high levels of wasting, which, when combined create a heavy burden to the development and wellbeing of populations in the short, medium and long term.

The shocks, stressors and chronic vulnerabilities that drive acute food insecurity also drive undernutrition: the economic downturn associated with the COVID-19 pandemic that was further exacerbated by the global effects of the war in Ukraine, worsening conflict and insecurity, and climate shocks and related displacement, as well as endemic poverty, poor governance and limited access to basic social services.

These factors have steadily weakened households' ability to access nutritious food, especially for children, undermined recommended feeding practices for young children and adequate diets for pregnant and breastfeeding women. Further, these factors have reduced access to health and WASH services, which are essential to prevent disease and infections.

The geographical expansion and worsening of conflict in certain areas, such as the Central Sahel, the Lake Chad Basin, Ethiopia and Yemen, have greatly impacted households' access to basic services, including health and nutrition services, and led to internal and cross-border population displacement, further compounding levels of wasting. Poor sanitation and limited access to safe drinking water in overcrowded refugee and IDP camps continued to hinder safe preparation of food, raising the risk of disease outbreaks and compounding malnutrition.

Political instability and economic crises, particularly in Afghanistan, Myanmar, the Sahel, Somalia, the Syrian Arab Republic and the Bolivarian Republic of Venezuela, have triggered massive migration flows and displacement, with populations fleeing widespread poverty, violence, and protracted shortages of food, medicine and other essential commodities.

Suffering from high socioeconomic vulnerabilities, those forced to flee, including IDPs, refugees and migrants, face greater risk of maternal and child malnutrition due to limited access to nutritious foods.

Extreme weather events, including consecutive and recurrent drought events in the Horn of Africa, as well as in southern areas of Angola and Madagascar, coupled with sharp increases in food prices, have pushed levels of wasting to Critical (IPC AMN Phase 4) and Extremely Critical (IPC AMN Phase 5) levels in several areas of these countries.

Severe floods that affected South Sudan, the Sudan, northern Nigeria, Pakistan, and some regions in the Sahel, impacted access to food, health services and WASH, and contributed to disease outbreaks, thus exacerbating the already dire malnutrition situation in these countries.

A matter of concern

The global food crisis has worsened the malnutrition situation of adolescent girls and women whose livelihoods, income and access to nutritious food are disproportionately affected (UNICEF, March 2023).


A recent IFPRI study was able to quantify that food inflation, which was particularly high in 2022, has a correlation with undernutrition: a 5 percent increase in real prices of food raises the risk of developing wasting by 9 percent and of severe wasting by 14 percent (IFPRI, 2022). Food inflation also affected the treatment of wasting with specialized nutritious food (SNF) due to sharp price increases in 2022, particularly that of ready-to-use formulations. Based on price monitoring by WFP, prices of those specialized formulations in January 2023 were about 30 percent above their year-earlier levels (WFP-DOTS, January 2022).

Between 2019 and 2021, food insecurity had already affected girls and women disproportionately across the world, as they were hardest hit by the impact of the COVID-19 pandemic on livelihoods, income and access to nutritious food.

For instance, in Eastern and Southern African countries, four in five pregnant and breastfeeding women were food insecure following the pandemic, and more than two-thirds reduced their consumption of foods from at least one food group during this time (UNICEF, March 2023). This is concerning because not only is the current generation of mothers adversely affected, but poor nutrition outcomes are passed on to the next

FIGURE 1.14

Numbers of children under 5 years old with wasting in the 10 countries with largest numbers of people in IPC/CH Phase 3 or above or equivalent in 2022



Country	SAM (millions)	MAM (millions)	GAM (millions)
Afghanistan	0.87	2.35	3.22
Democratic Republic of the Congo	0.89	1.89	2.78
Ethiopia	1.21	3.59	4.80
Myanmar	0.05	0.24	0.29
Nigeria	1.62	4.31	5.93
Pakistan	0.13	0.51	0.64
Sudan	0.56	2.20	2.75
Syrian Arab Republic	0.07	0.29	0.36
Ukraine	N/A	N/A	N/A
Yemen	0.50	1.70	2.20

There are methodological differences in estimating the burden of acute malnutrition across countries, depending on the context as well as differences in analysis coverage. Estimates for Nigeria cover only the Northeast and the Northwest states while estimates for the Democratic Republic of the Congo cover 150 health zones and 189 territories. Data were not available for Ukraine as there have been no recent nutrition assessments there.

Source: IPC, HNO, HRP 2022.

generations, increasing the risk of stillbirth, newborn death, pre-term delivery and impaired foetal development, with lifelong consequences for children's nutrition, growth, learning and future earning capacity.

In the Latin America and Caribbean region, about 217 000 children were suffering from wasting, of whom 86 000 were severely wasted in Haiti. Overall, the national prevalence of wasting was estimated in 2021 as of 'medium' severity, according to WHO thresholds, but by 2022 it was 'very high' in urban areas that were severely affected by gang violence, where approximately 20 percent of children under 5 years old were suffering from wasting. Of them 5 percent were severely wasted (UNICEF, August 2022).

Twelve out of the 42 major food crises identified in this GRFC edition have no recent nutrition data. Six of these countries were in Central and Southern Africa (Eswatini, Malawi, Namibia, the United Republic of Tanzania, Zambia and Zimbabwe), three in Latin America and the Caribbean (Dominican Republic, Guatemala and Honduras), two in Asia (Bangladesh and Sri Lanka), and one in Europe (Ukraine).

Furthermore, restricted humanitarian access such as in northern Burkina Faso, the Tigray region in Ethiopia and northern governorates of Yemen, prevented regular nutrition surveys from being carried out. Overall, lack of financial investment dedicated to nutrition information systems limits capacities to carry out assessments and deliver adequate assistance.

DISPLACEMENT

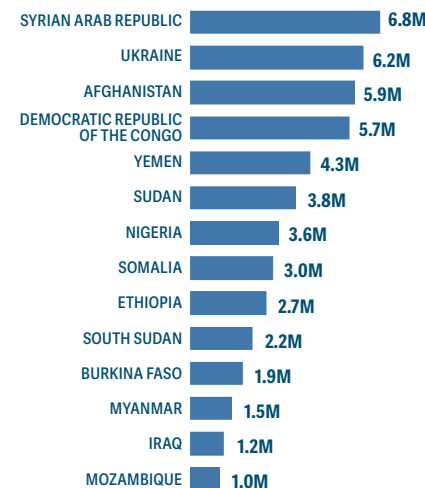
A concerning increase in displaced populations in food-crisis countries/territories in 2022

Deteriorating conflicts, worsening economic conditions and increasing frequency and severity of weather shocks associated with climate change continued to cause internal and cross-border displacement in 2022. By mid-2022, the number of forcibly displaced people, including refugees, asylum-seekers, IDPs and other people in need of international protection, had reached 103 million globally, above the 89.3 million estimated at the end of 2021 (UNHCR, October 2022).

Forced displacement persisted through the end of the year as a result of the ongoing war in Ukraine and unabated conflict and insecurity in major hotspots, including the Central Sahel, the Lake Chad Basin and the Middle East, while deepening economic crises were a contributory factor forcing people to flee, particularly from the Bolivarian Republic of Venezuela and the Syrian Arab Republic. In addition, a prolonged La Niña that began in September 2020 and continued into late 2022 compounded drought conditions in the Horn of Africa, while increased precipitation in Asia and West Africa caused unprecedented floods, contributing to further displacement (IDMC, 2022).

FIGURE 1.15

Food-crisis countries with the highest numbers of IDPs, 2022



Source: Government of Burkina Faso; HNO 2022 (Myanmar, Sudan, Yemen, Democratic Republic of the Congo and Ukraine); IDMC, IOM DTM, OCHA; Somalia National Bureau of Statistics; and UNHCR.

Displacement is both a driver and a consequence of food insecurity, as people who are forced to flee their home lose access to their livelihoods and are left without safe access to food, water and other basic necessities, often adopting harmful coping capacities to ensure survival. Displaced populations face significant challenges to access income, humanitarian aid, healthcare and other essential services, exacerbating their vulnerability to food insecurity and malnutrition. At the same time, the displacement of large rural populations has contributed to shortfalls in agricultural production in some contexts while the concentration of high numbers of people puts a strain on markets in host communities, driving up food prices.

Internal displacement By the end of 2022, nearly 53.2 million people were internally displaced in 25 countries/territories identified as food crises in the GRFC 2023, of which 23 were major

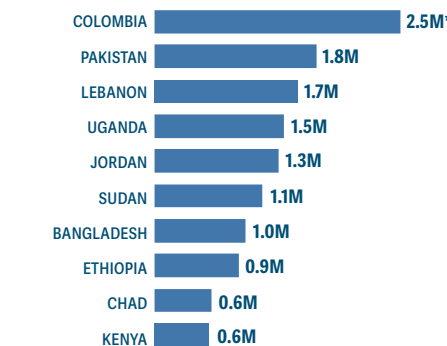
food crises. In 22 countries with food crises in both 2021 and 2022, the number of IDPs increased significantly from 44.8 to 51.1 million. Around 1.5 million IDPs were in Myanmar, which is included as a major food crisis in the GRFC for the first time, and about 90 000 were in Malawi and Pakistan, where no IDPs were identified in 2021. The countries with the highest numbers of IDPs in 2022 nearly mirrored the list of the ten major food crises with the highest numbers of people in IPC Phase 3 or above or equivalent, reflecting the prominence of conflict/insecurity as the main driver of acute food insecurity.

Nearly 80 percent of the world's total number of IDPs lived in nine out of the ten largest food crises by numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent: the Syrian Arab Republic, Ukraine, Afghanistan, the Democratic Republic of the Congo, Yemen, the Sudan, Nigeria, Ethiopia and Myanmar.

In several major food crises, the IDP population increased between 2021 and 2022, with the larger increase registered in Ukraine, to 6.2 million people in 2022 up from 1.5 million in 2021, followed by the Sudan, the Democratic Republic of the Congo, Burkina Faso and South Sudan. On a positive note, the number of IDPs in

FIGURE 1.16

Food-crisis countries hosting the highest numbers of refugees and asylum-seekers, 2022



* Refugees and migrants with intention to settle. Source: UNHCR, December 2022; 3RP, February 2023.

Ethiopia decreased significantly to 2.73 million in 2022 from 4.24 million in 2021.

Weather extremes also caused large population displacements in countries identified as major food crises.

In Pakistan, unprecedented floods between June and October temporarily displaced over 8 million people. Although most of the affected populations were able to return to their homes after the flooding receded, 89 000 were still displaced as of December 2022. The widespread loss of livelihoods compounded an already dire food security situation at the national level (HNO 2023).

Widespread flooding triggered large displacements in West and Central African countries, particularly in Nigeria, Chad and the Democratic Republic of the Congo, and to a lesser extent in Cameroon, Mauritania, the Central African Republic and the Niger.

Populations were also displaced by tropical cyclones in Mozambique.

Migrants, refugees and asylum-seekers In 2022, some 19.7 million refugees, asylum-seekers and migrants were hosted in 55 of the 58 food-crisis countries/territories identified in this report. This is a marked increase from 15.3 million in 2021.

This alarming increase was underpinned by the persistence of conflicts and growing insecurity as well as economic crises and political instability across all regions that led to a severe erosion of the protection situation, livelihoods and the disruption of markets, making it harder for people to produce food or generate income to be able afford it.

More than seven in ten refugees under UNHCR's mandate and other people in need of international protection globally come from five countries included for analysis in the GRFC – the Syrian Arab Republic, Bolivarian Republic of Venezuela, Ukraine, Afghanistan and South Sudan (UNHCR, 2023). In these countries, the political and socioeconomic crises that had forced millions of people to flee persisted, making conditions uncondusive for return.

In the GRFC 2023 food-crisis countries, about 3.32 million Syrian refugees and asylum-seekers were in Lebanon,

Jordan and Iraq. Over 3.2 million Venezuelan refugees and migrants sought refuge in Colombia and Ecuador, accounting for over half of those worldwide. About 3 million Palestine refugees resided in Gaza, the West Bank, the Syrian Arab Republic, Lebanon and Jordan.

Refugee populations in some 42 countries are acutely food insecure and in need of humanitarian food assistance but are not assessed in ways that meet GRFC requirements. Refugees in Cameroon, Chad, Congo, Ethiopia, Kenya, Pakistan, South Sudan, the Sudan and Uganda among others are facing high levels of acute food insecurity and malnutrition requiring robust and sustained multi-sectoral humanitarian response.

An increase in the availability of estimates of acute food insecurity of refugees and asylum-seekers, particularly with new analyses meeting GRFC criteria for Colombia, Ecuador and Lebanon, revealed a concerning situation among these populations.

The refugee population with the highest prevalence of acute food insecurity documented in 2022 was among the Rohingya refugees in Bangladesh's Cox's Bazar, estimated at nearly 90 percent of the analysed population, and among Syrian refugees in Jordan, estimated at 82 percent. In Congo and Algeria, the prevalence ranged between 65 and 75 percent, while in Ecuador, Colombia and Lebanon it was estimated between 32 and 62 percent. This reflects high levels of socioeconomic vulnerability, and limited jobs and livelihood opportunities in hosting communities.

In figure 1.16, the number for Lebanon includes 826 000 Syrian refugees officially registered with UNHCR, as well as another 873 000 unregistered Syrian refugees and about 210 000 Palestinian refugees. The number for Jordan includes 743 000 Syrian refugees officially registered with UNHCR, as well as another 557 000 unregistered Syrian refugees.

Figure 1.16 does not include the 2.84 million Palestine refugees in Palestine, or the Syrian Arab Republic (UNRWA, January 2023). Neither does it include the 3.93 million Syrian refugees hosted in Türkiye since the country was not included as a food crisis in the GRFC 2023 as acute food insecurity data for refugees did not meet GRFC requirements.

Forcibly displaced people continue to face additional food security and nutrition challenges

Most displaced rural households have lost their livelihoods, and have limited legal access to work and income. They face increasingly reduced access to food due to inflation and market price rises in many contexts.

Lack of access to basic services including healthcare systems, clean water and improved sanitation, and/or overcrowding in camps are still risk factors for malnutrition and illness, particularly affecting children and women.

Restrictive policies in refugee-hosting countries limit freedom of movement, access to land for agriculture, employment opportunities and access to financial services. Although some countries have made significant progress in expanding legal access to certain types of jobs, the majority of refugees are unable to access meaningful employment and sustainable incomes.

Severe underfunding has resulted in cuts to humanitarian assistance for many displaced populations, notably leading to a reduction of food aid.

Significant protection risks exist for displaced populations. They are often exposed to human rights violations while being on the move and are forced to engage in harmful coping strategies to meet their basic needs, including increasing debt, child labour, onward migration, engagement in armed groups and sale of sex.

A strain on limited natural resources due to the increased population flows often raises tensions between host communities and refugees.

Financing flows and food crises

Levels of acute food insecurity are outpacing the funding available to provide humanitarian assistance, according to the 2022 Financing Flows and Food Crises report published by the GNAFC.

Between 2020 and 2021, humanitarian funding for food, agriculture and livelihoods assistance, and nutrition treatment in 53 food-crisis countries/territories increased by 20 percent, reaching a record USD 9.8 billion, the highest in the history of the GRFC. But the increase in humanitarian assistance in 2021 did not keep pace with the number of people facing high levels of acute food insecurity.

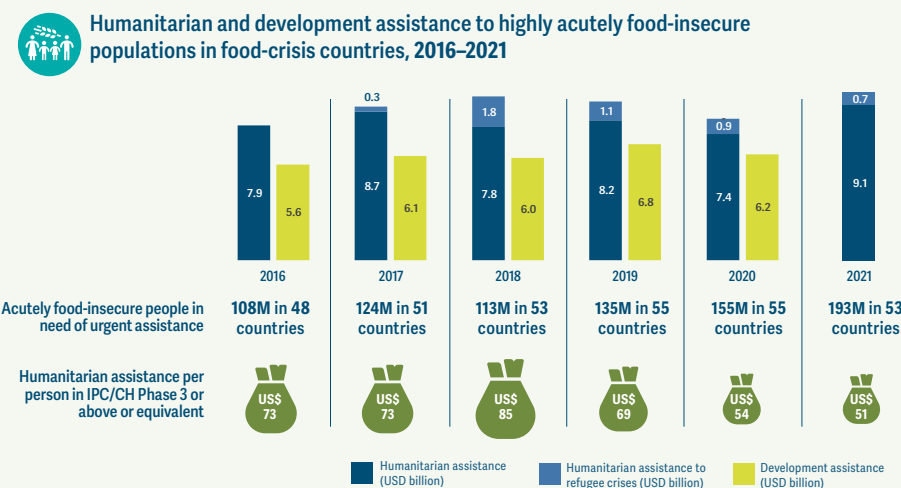
The annual funding per person in Crisis or worse (IPC/CH Phase 3 or above) decreased by 40 percent from USD 85 per person in 2018 to USD 51 in 2021. Humanitarian food, agriculture and livelihoods assistance for refugee crises also decreased.

In 2021, the ten largest recipients of humanitarian funding for food, agriculture and livelihoods assistance and nutrition were Yemen (USD 1.5 billion), the

Syrian Arab Republic (USD 1.3 billion), Afghanistan (USD 0.9 billion), Ethiopia (USD 0.9 billion), South Sudan (USD 0.7 billion), Somalia (USD 0.6 billion), the Democratic Republic of the Congo (USD 0.5 billion), the Sudan (USD 0.4 billion), Nigeria (USD 0.3 billion) and Palestine (USD 0.2 billion). Overall, these ten countries/territories received 75 percent of the total humanitarian assistance allocated to countries with food crises.

Between 2019 and 2020, development assistance to food sectors in food-crisis countries/territories decreased by almost 10 percent from USD 6.8 million to USD 6.2 billion (latest data available at the time of the analysis). In 2020, the ten largest recipients of development assistance to food sectors were Ethiopia, Kenya, the Niger, Uganda, Nigeria, Afghanistan, Burkina Faso, the Democratic Republic of the Congo, Mali and Malawi. Overall, these ten countries/territories received 55 percent of the total development assistance allocated to countries with food crises (GNAFC, January 2023).

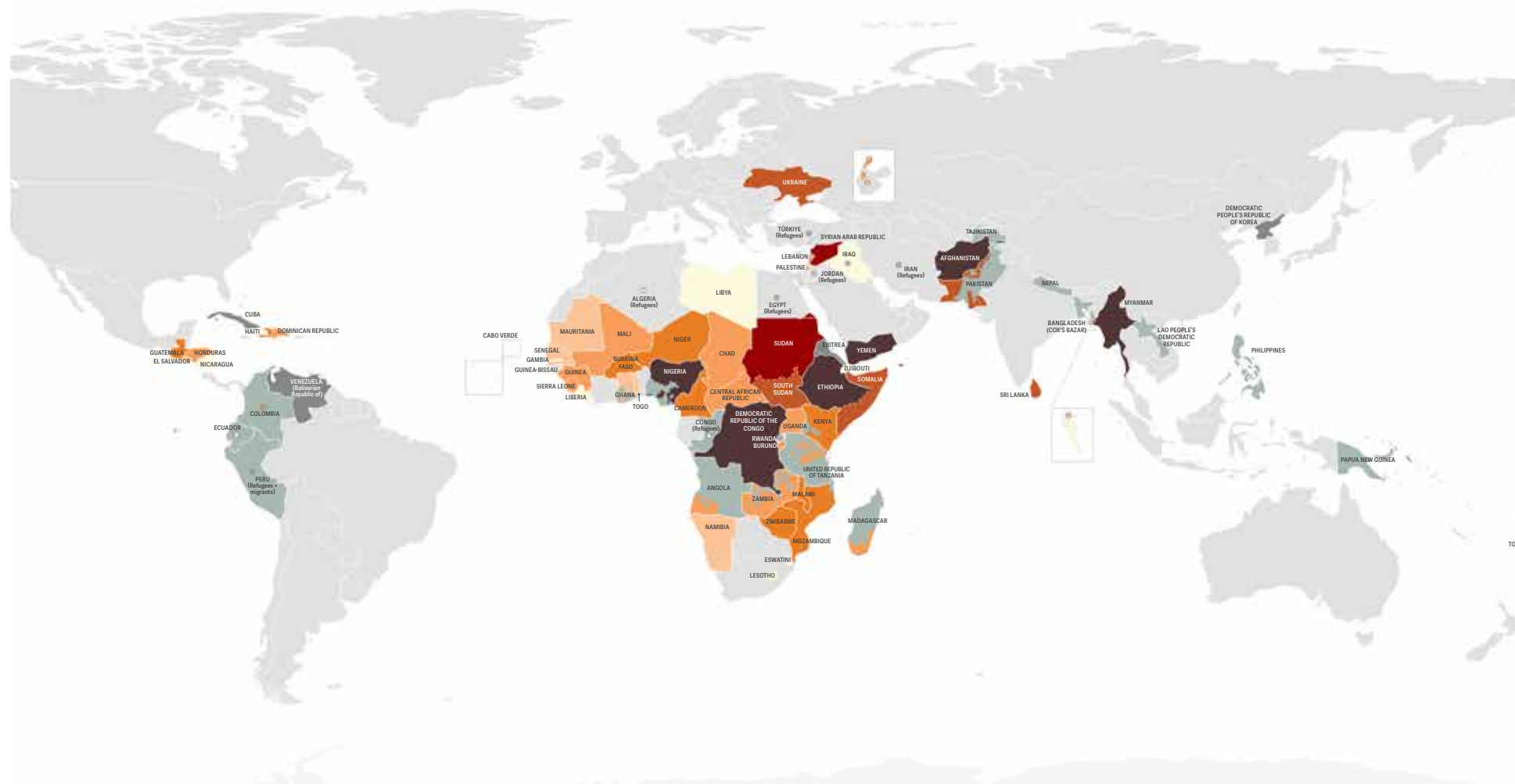
FIGURE 1.17



Source: GNAFC based on OCHA FTS and OECD CRS.

MAP 1.4

Numbers of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 58 countries/territories in 2022

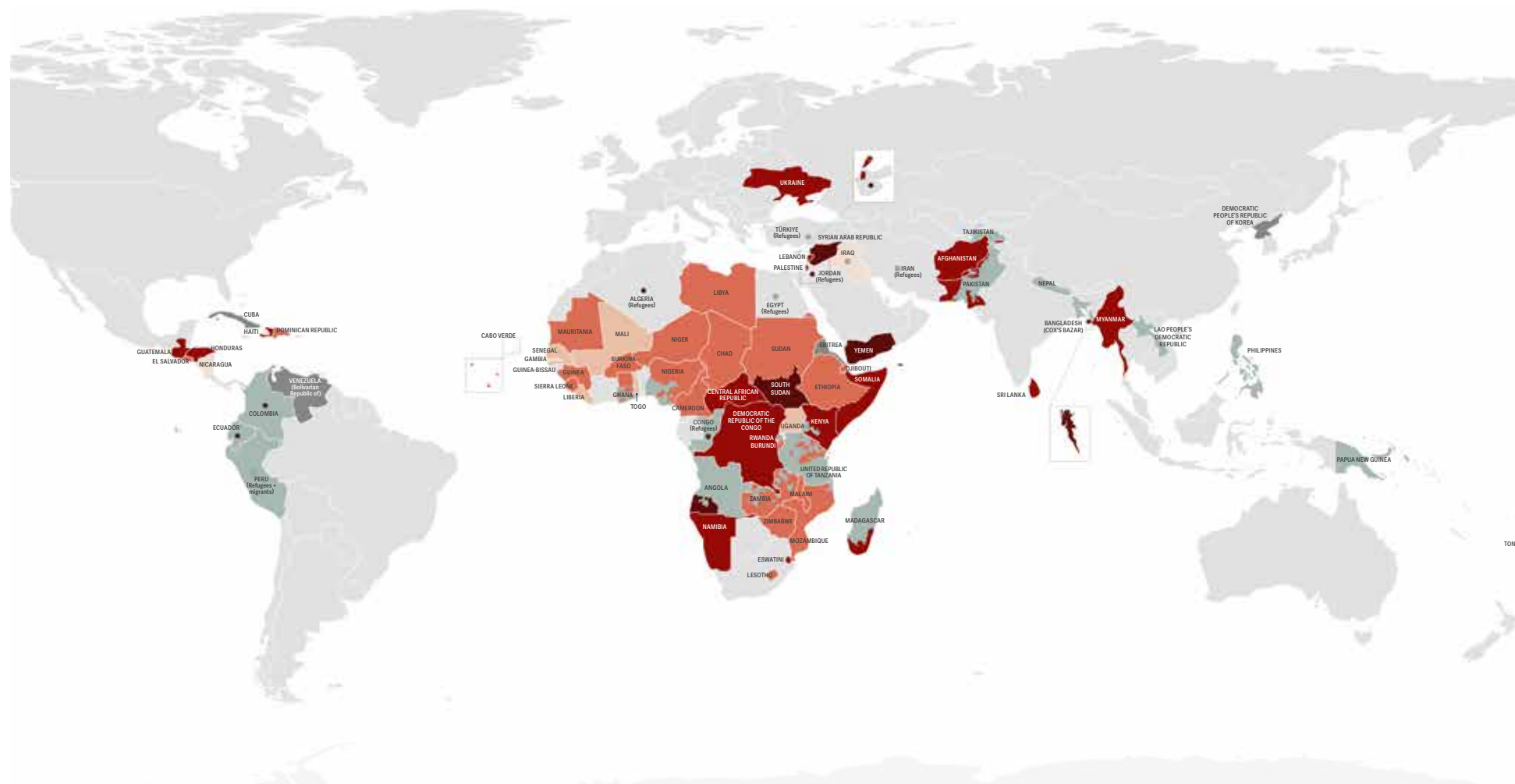


The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: FSIN, GRFC 2022.

MAP 1.5

Share of people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 58 countries/territories in 2022



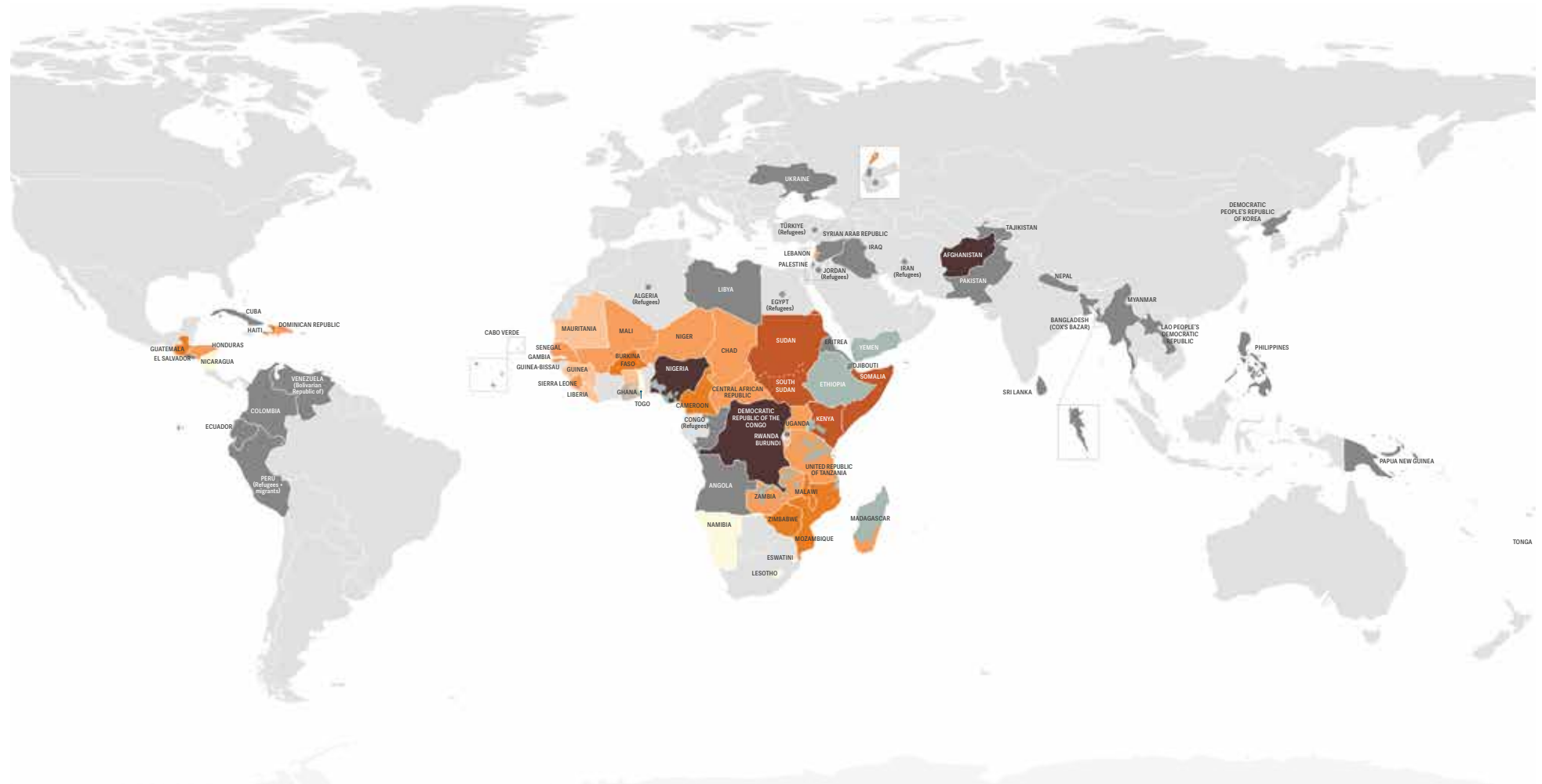
■ <5 percent
 ■ 5-9.99 percent
 ■ 10-24.99 percent
 ■ 25-49.99 percent
 ■ ≥50 percent
 ■ Data not meeting GRFC requirements/population not analysed
 ■ Data gap
 ■ Country not selected for analysis
 ○ Indicates migrants/refugee populations (colour coding as this key)

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: FSIN, GRFC 2022.

MAP 1.6

Numbers of people projected to be in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 38 countries/territories in 2023



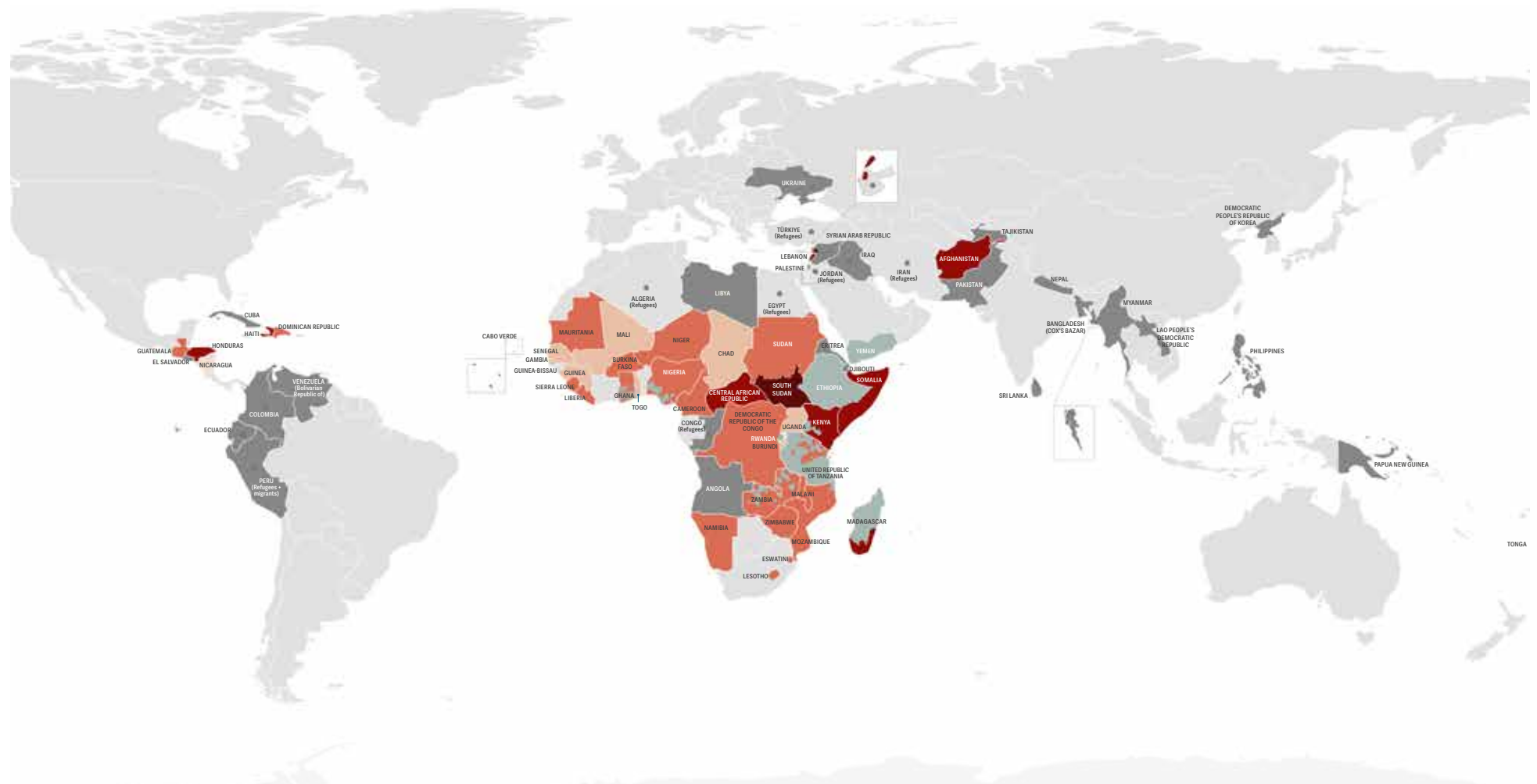
■ <0.5 million
 ■ 0.5-0.99 million
 ■ 1-2.99 million
 ■ 3-4.99 million
 ■ 5-9.99 million
 ■ 10-14.99 million
 ■ ≥15 million
 ■ Data not meeting GRFC requirements/population not analysed
 ■ Data gap
 ■ Country not selected for analysis
 ○ Indicates migrants/refugee populations (colour coding as this key)

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: FSIN, GRFC 2022.

MAP 1.7

Share of people projected to be in Crisis or worse (IPC/CH Phase 3 or above) or equivalent in 38 countries/territories in 2023



<5 percent **5-9.99 percent** **10-24.99 percent** **25-49.99 percent** **>=50 percent** **Data not meeting GRFC requirements/population not analysed** **Data gap** **Country not selected for analysis** **○ Indicates migrants/refugee populations (colour coding as this key)**

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: FSIN, GRFC 2022.

TABLE 1.1 (PAGE 1 OF 5)

Table of acute food insecurity estimates, 2021–23

Highest numbers of acutely food-insecure people in 2021, 2022 and projected highest numbers for 2023.

Countries/territories	USUAL PERIOD OF PEAK NEED	2021 HIGHEST NUMBERS of acutely food-insecure people						2022 HIGHEST NUMBERS of acutely food-insecure people						2023 HIGHEST NUMBERS of acutely food-insecure people (projected)					
		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Refugees/migrant populations are indicated in blue																			
Afghanistan	Jan–Apr	IPC	Nov 2021–Mar 2022	41.7 100%	Entire country	12.5 30%	22.8* 55%	IPC	Nov 2022–Mar 2023	43.1 100%	Entire country	14.3 33%	19.9* 46%	IPC	Nov 2022–Mar 2023	43.1 100%	Entire country	14.3 33%	19.9* 46%
Algeria (Sahrawi refugees)	Jan–Dec	Data not meeting GRFC requirements						WFP	Oct 2022	0.2 76%	WFP-assisted Sahrawi refugees	N/A	0.1 74%	No projection					
Angola	Jan–Mar	IPC	Oct 2021–Mar 2022	32.1 9%	17 rural municipalities in 3 south-western provinces	0.7 25%	1.6* 58%	IPC	Oct 2021–Mar 2022	32.1 9%	17 rural municipalities in 3 southwestern provinces	0.7 25%	1.6* 58%	No projection					
Bangladesh (Cox's Bazar)†	Jan–Dec (refugees) Varies (hosts)	JRP (REVA)	Oct–Nov 2021	164.7 1%	Rohingya refugees and host populations in Ukhiya and Teknaf upazilas of Cox's Bazar District	N/A	1.3 84%	JRP (REVA)	Jan–Dec 2022	164.7 1%	Rohingya refugees and host populations in Cox's Bazar	N/A	1.3 89%	No projection					
Burkina Faso	Jun–Aug	CH	Jun–Aug 2021	22.0 98%	Entire country	4.8 22%	2.9* 13%	CH	Jun–Aug 2022	21.9 97%	Entire country	5.3 25%	3.5* 16%	CH	Jun–Aug 2023	22.2 100%	Entire country	5.6 25%	3.5** 16%
Burundi	Apr–May	IPC	Apr–May 2021	12.5 94%	Entire country	5.0 43%	1.6* 14%	IPC	Oct–Dec 2022	12.0 100%	Entire country	3.7 30%	1.4* 12%	FEWS NET	Apr–May 2023	12.8 100%	Entire country	N/A	0.5–0.75 4–6%
Cabo Verde	Jun–Aug	Data gap						CH	Jun–Aug 2022	0.5 100%	Entire country	0.1 29%	0.05* 10%	No projection					
Cameroon	Mar–May	CH	Mar–May 2021	25.9 100%	Entire country	5.8 23%	2.6* 10%	CH	Oct–Dec 2022	27.2 100%	Entire country	6.8 25%	3.6* 13%	CH	Jun–Aug 2023	27.2 100%	Entire country	6.1 22%	3.2* 12%
Central African Republic	May–Aug	IPC	Apr–Aug 2021	4.9 100%	Entire country	1.6 33%	2.3* 47%	IPC	Sep 2022–Mar 2023	6.1 100%	Entire country	2.0 33%	2.7* 44%	IPC	Apr–Aug 2023	6.1 100%	Entire country	1.9 31%	3.0* 49%
Chad	Jun–Aug	CH	Jun–Aug 2021	16.7 92%	Entire country, except N'Djamena	3.3 22%	1.8* 12%	CH	Jun–Aug 2022	16.8 94%	Entire country, excluding N'Djamena	4.0 25%	2.1* 13%	CH	Jun–Aug 2023	16.2 100%	Entire country	3.8 24%	1.5* 9%
Colombia (refugees and migrants)	Jan–Dec	Data not meeting GRFC requirements						WFP	Jun–Aug 2022	4.56 100%	Refugees and migrants	N/A	2.88 62%	No projection					
Congo (refugees)	Jan–Dec	Data not meeting GRFC requirements						WFP	Aug–Sep 2022	0.06 100%	Refugees and asylum-seekers	N/A	0.04 65%	No projection					
Democratic Republic of the Congo	Varies by area/region	IPC	Feb–Jul 2021	105.0 91%	133 territories and 37 urban areas	40.8 42%	27.3* 28%	IPC	Jul–Dec 2022	109.6 94%	26 provinces comprising 138 rural areas and 47 urban areas (including 24 in Kinshasa)	44.9 44%	26.4* 26%	IPC	Jan–Jun 2023	109.6 94%	26 provinces comprising 138 rural areas and 47 urban areas (including 24 in Kinshasa)	47.2 46%	24.5* 24%
Djibouti	Jun–Sep	IPC	Jan–Aug 2021	1.1 100%	Entire country	0.4 35%	0.2* 17%	IPC	Jul 2022–Dec 2022	1.2 100%	Entire country	0.4 35%	0.2* 16%	No projection					

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5). † The 2021 and 2022 estimates are based on the ENA methodology, for which the GRFC TWG has identified comparability challenges with IPC/CH estimates (see Technical Notes).

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Table of acute food insecurity estimates, 2021–23

Highest numbers of acutely food-insecure people in 2021, 2022 and projected highest numbers for 2023.

Countries/territories	2021 HIGHEST NUMBERS of acutely food-insecure people							2022 HIGHEST NUMBERS of acutely food-insecure people					2023 HIGHEST NUMBERS of acutely food-insecure people (projected)						
	USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
Refugees/migrant populations are indicated in blue						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Dominican Republic	Jan–Feb	Not included in GRFC 2022						IPC	Oct 2022–Feb 2023	10.6 100%	Entire country	3.4 32%	1.6* 15%	IPC	Oct 2022–Feb 2023	10.6 100%	Entire country	3.4 32%	1.6* 15%
Ecuador (refugees and migrants)	Jan–Dec	Data not meeting GRFC requirements						WFP	Jul–Aug 2022	0.5 100%	Refugees and migrants	N/A	0.3 60%	No projection					
Egypt (Syrian refugees)	Jan–Dec	WFP	Mar 2021	0.1 63%	WFP-assisted refugees from Syrian Arab Republic, Sudan, South Sudan, Eritrea, Ethiopia, Somalia, Yemen and Iraq	N/A	0.04 27%	Data not meeting GRFC requirements						No projection					
El Salvador	Jun–Aug	IPC	Mar–May 2021	6.8 99%	Entire country	2.4 36%	1.0* 15%	IPC	Mar–May 2022	6.3 100%	Entire country	3.3 52%	0.9* 14%	No projection					
Eswatini	Jan–Mar	IPC	Jan–Mar 2021	1.2 97%	Entire country	0.4 38%	0.3* 30%	IPC	Dec 2021–Mar 2022	1.2 100%	Entire country	0.4 32%	0.3* 29%	IPC	Oct 2022–Mar 2023	1.2 99%	Entire country	0.4 37%	0.3* 22%
Ethiopia	Feb–Jun	IPC	May–Jun 2021	115.0 49%	Belg and Meher-dependent area	17.2 31%	16.8** 30%	HRP	Jun–Jul 2022	115.0 100%	Entire country	N/A	23.6 21%	No projection					
Gambia	Jun–Aug	CH	Jun–Aug 2021	2.5 97%	Entire country	0.5 20%	0.1 5%	CH	Oct–Dec 2022	2.4 100%	Entire country	0.6 24%	0.2* 8%	CH	Jun–Aug 2023	2.4 100%	Entire country	0.8 32%	0.3* 13%
Ghana	Varies by area/region	Not included in GRFC 2022						CH	Oct–Dec 2022	30.8 44%	120 districts	2.6 19%	0.8* 6%	CH	Jun–Aug 2023	30.8 44%	120 districts	2.7 20%	0.7* 5%
Guatemala	Jun–Aug	IPC	Nov 2020–Mar 2021	16.9 100%	Entire country	6.7 40%	3.7* 23%	IPC	Jun–Sep 2022	17.4 100%	Entire country	7.1 41%	4.6* 26%	IPC	Oct 2022–Feb 2023	17.6 100%	Entire country	7.6 43%	3.2* 19%
Guinea	Jun–Aug	CH	Jun–Aug 2021	13.3 83%	Entire country, excluding Conakry	2.2 20%	0.7 6%	CH	Jun–Aug 2022	13.3 84%	Entire country, excluding Conakry	3.8 34%	1.2* 11%	CH	Jun–Aug 2023	13.5 85%	Entire country, excluding Conakry	3.4 30%	0.9* 8%
Haiti	Mar–Jun	IPC	Mar–Jun 2021	10.9 87%	Rural and urban areas, excluding Villes de Gonaïves	2.8 29%	4.4* 46%	IPC	Sep 2022–Feb 2023	10.9 91%	All rural areas and nine urban areas	2.8 28%	4.7** 48%	IPC	Mar–Jun 2023	10.9 91%	All rural areas and nine urban areas	2.7 27%	4.9* 49%
Honduras	Jun–Aug	IPC	Jul–Sep 2021	9.3 100%	Entire country	3.5 38%	3.3* 35%	IPC	Jun–Aug 2022	9.6 100%	Entire country	3.7 39%	2.6* 28%	IPC	Jun–Aug 2023	9.7 100%	Entire country	3.4 35%	2.4* 25%

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5). Note: The IPC estimates for Ethiopia in May–June 2021 presented in this table reflect the merger of the October 2020 and May 2021 IPC analysis results. The Government of Ethiopia has not endorsed the May 2021 IPC analysis.

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Table of acute food insecurity estimates, 2021–23

Highest numbers of acutely food-insecure people in 2021, 2022 and projected highest numbers for 2023.

Countries/territories	USUAL PERIOD OF PEAK NEED	2021 HIGHEST NUMBERS of acutely food-insecure people						2022 HIGHEST NUMBERS of acutely food-insecure people						2023 HIGHEST NUMBERS of acutely food-insecure people (projected)					
		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Refugees/migrant populations are indicated in blue																			
Iraq	No typical lean season	HNO	Jul–Aug 2021	41.2 15%	IDPs and returnees	N/A	0.6 10%	HNO	Jun–Aug 2022	41.2 15%	IDPs and returnees	N/A	0.2 3%	No projection					
Jordan (Syrian refugees)	Jan–Dec	WFP	Sep 2021	0.7 100%	Syrian refugees in host communities and camps	N/A	0.1 22%	WFP	Jul–Sep 2022	0.7 100%	Syrian refugees in host communities and camps	N/A	0.5 82%	No projection					
Kenya	Mar–Apr	IPC	Nov 2021–Jan 2022	55.0 28%	Arid and Semi-Arid Lands (rural)	5.2 35%	2.4* 16%	IPC	Oct–Dec 2022	55.0 27%	Arid and Semi-Arid Lands (rural)	5.1 34%	4.4* 29%	IPC	Mar–Jun 2023	51.5 32%	Arid and Semi-Arid Lands (rural)	5.9 36%	5.4* 32%
Lebanon (resident population)	No typical lean season	Data not meeting GRFC requirements						IPC	Sep–Dec 2022	4.3 90%	Entire country	1.8 46%	1.3* 33%	IPC	Jan–Apr 2023	4.3 90%	Entire country	1.6 42%	1.5* 38%
Lebanon (Syrian refugees)	Jan–Dec	VASyR	Jun–Jul 2021	1.5 100%	Syrian refugee population	N/A	0.7 49%	IPC	Sep–Dec 2022	1.5 100%	Syrian refugees	0.6 42%	0.7* 46%	IPC	Jan–Apr 2023	1.5 100%	Syrian refugees	0.5 35%	0.8* 53%
Lesotho	Jan–Mar	IPC	Oct 2020–Mar 2021	2.0 73%	Rural population	0.5 33%	0.6* 40%	IPC	Jan–Mar 2022	2.1 70%	Rural population	0.5 36%	0.3* 23%	IPC	Oct 2022–Mar 2023	2.1 71%	Rural population	0.5 34%	0.3 22%
Liberia	Oct–Dec	CH	Jun–Aug 2021	5.2 91%	Entire country	1.5 32%	0.9* 20%	CH	Oct–Dec 2022	4.8 100%	Entire country	1.0 21%	0.4* 8%	CH	Jun–Aug 2023	4.8 100%	Entire country	1.4 29%	0.5* 11%
Libya	No typical lean season	HNO	Jun–Aug 2021	8.2 100%	Entire country	N/A	0.5 6%	HNO	Jun–Aug 2022	8.2 19%	IDPs, returnees, refugees and migrants	N/A	0.3 19%	No projection					
Madagascar	Jan–Mar	IPC	Nov–Dec 2021	27.9 16%	Grand Sud and Est	1.8 41%	1.6* 37%	IPC	Nov 2022–Mar 2023	29.0 21%	Grand Sud and Est	2.5 40%	2.2* 36%	IPC	Nov 2022–Mar 2023	29.0 21%	Grand Sud and Est	2.5 40%	2.2* 36%
Malawi	Jan–Mar	IPC	Jan–Mar 2021	19.7 90%	Entire country (rural and urban)	6.3 35%	2.6* 15%	IPC	Oct 2022–Mar 2023	19.3 100%	Entire country	6.7 35%	3.8 20%	IPC	Oct 2022–Mar 2023	19.3 100%	Entire country	6.7 35%	3.8 20%
Mali	Jun–Aug	CH	Jun–Aug 2021	21.1 100%	Entire country	4.1 19%	1.3* 6%	CH	Jun–Aug 2022	21.7 100%	Entire country	4.4 20%	1.8* 8%	CH	Jun–Aug 2023	22.3 100%	Entire country	4.0 18%	1.2** 6%
Mauritania	Jun–Aug	CH	Jun–Aug 2021	4.3 100%	Entire country	0.9 21%	0.5* 11%	CH	Jun–Aug 2022	4.4 100%	Entire country	1.4 33%	0.9* 20%	CH	Jun–Aug 2023	4.4 100%	Entire country	1.1 25%	0.7* 16%
Mozambique	Jan–Mar	IPC	Jan–Mar 2021	30.1 60%	Part of the country (rural and urban areas)	8.4 46%	2.9* 16%	IPC	Nov 2022–Mar 2023	32.0 100%	Entire country	13.0 40%	3.1* 10%	IPC	Nov 2022–Mar 2023	32.0 100%	Entire country	13.0 40%	3.1* 10%
Myanmar	Sep–Oct	Data not meeting GRFC requirements						HNO	Jan–Dec 2022	56.0 100%	Entire country	N/A	15.2 27%	No projection					

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).

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Table of acute food insecurity estimates, 2021–23

Highest numbers of acutely food-insecure people in 2021, 2022 and projected highest numbers for 2023.

Countries/territories	2021 HIGHEST NUMBERS of acutely food-insecure people							2022 HIGHEST NUMBERS of acutely food-insecure people					2023 HIGHEST NUMBERS of acutely food-insecure people (projected)						
	USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Refugees/migrant populations are indicated in blue																			
Namibia	Jan–Mar	IPC	Dec 2021–Mar 2022	2.6 100%	Entire country	0.8 33%	0.8* 30%	IPC	Dec 2021–Mar 2022	2.6 100%	Entire country	0.8 33%	0.8* 30%	IPC	Jan–Mar 2023	2.6 100%	Entire country	0.9 35%	0.4* 15%
Nicaragua	Jul–Aug	FEWS NET	Jul–Aug 2021	6.2 100%	Entire country	N/A	0.4 6%	FEWS NET	Jun–Aug 2022	6.3 100%	Entire country	N/A	0.2 3%	FEWS NET	Jun–Aug 2023	6.3 100%	Entire country	N/A	0.1–0.25 2–4%
Niger	Jun–Aug	CH	Oct–Dec 2021	24.9 100%	Entire country	5.8 23%	2.6* 10%	CH	Jun–Aug 2022	24.9 100%	Entire country	7.3 29%	4.4* 18%	CH	Jun–Aug 2023	25.9 100%	Entire country	7.0 27%	2.9* 11%
Nigeria	Jun–Aug	CH	Oct–Dec 2021	219.5 73%	21 states and Federal Capital Territory	35.0 22%	12.9* 8%	CH	Jun–Aug 2022	219.5 72%	21 states and Federal Capital Territory	40.8 26%	19.5* 12%	CH	Jun–Aug 2023	224.4 86%	26 states and Federal Capital Territory	58.7 30%	25.3** 13%
Pakistan	Jun–Aug	IPC	Oct 2021–Mar/Apr 2022	215.3 9%	Balochistan, Khyber Pakhtunkhwa and Sindh	6.4 35%	4.7* 25%	IPC	Sep–Dec 2022	215.3 9%	Balochistan, Khyber Pakhtunkhwa and Sindh	6.2 32%	8.6* 43%	No projection					
Palestine	No typical lean season	SEFSec	Dec 2020–Jan 2021	5.1 100%	Entire territory	N/A	1.8 35%	HNO	May–Jul 2022	5.5 100%	Entire territory	N/A	1.5 28%	No projection					
Rwanda (refugees)	Jan–Dec	WFP	Jan–Dec 2021	0.1 100%	Refugee population	N/A	0.04 32%	Data not meeting GRFC requirements					No projection						
Senegal	Jun–Aug	CH	Jun–Aug 2021	17.1 100%	Entire country	3.1 18%	0.5* 3%	CH	Jun–Aug 2022	17.3 100%	Entire country	3.9 22%	0.9* 5%	CH	Jun–Aug 2023	18.3 100%	Entire country	5.9 32%	1.4* 8%
Sierra Leone	Jun–Aug	CH	Jun–Aug 2021	8.5 96%	Entire country	2.8 35%	1.8* 22%	CH	Jun–Aug 2022	8.6 100%	Entire country	3.6 42%	1.6* 19%	CH	Jun–Aug 2023	7.5 100%	Entire country	2.5 34%	1.1* 15%
Somalia	Feb–Apr	IPC	Oct–Dec 2021	15.7 100%	Entire country	3.7 24%	3.5* 22%	IPC	Oct–Dec 2022	17.0 100%	Entire country	3.1 18%	5.6** 33%	IPC	Apr–Jun 2023	17.0 100%	Entire country	3.4 20%	6.5** 38%
South Sudan	May–Jul	IPC	Apr–Jul 2021	12.1 100%	Entire country	3.1 26%	7.2** 60%	IPC	Apr–Jul 2022	12.4 100%	Entire country	2.9 23%	7.7** 63%	IPC	Apr–Jul 2023	12.4 100%	Entire country	3.1 25%	7.8** 63%
Sri Lanka		Data not meeting GRFC requirements						CFSAM	May–Jun 2022	22.2 100%	Entire country	N/A	6.3* 28%	No projection					
Sudan	Oct–Jan	IPC	Jun–Sep 2021	46.8 100%	Entire country excluding Abyei and Al Tina	16.5 35%	9.8* 21%	IPC	Jun–Sep 2022	47.9 100%	Entire country	17.6 37%	11.7* 24%	IPC	Oct 2022–Feb 2023	47.9 100%	Entire country	17.7 37%	7.7* 16%
Syrian Arab Republic	No typical lean season	HNO	Oct–Nov 2021	21.7 100%	Entire country	N/A	12.0 55%	HNO		22.1 100%	Entire country	N/A	12.1 55%	No projection					
Togo	Jun–Aug	Not included in GRFC 2022						CH	Oct–Dec 2022	8.3 73%	Entire country, excluding 3 prefectures	1.4 23%	0.6* 9%	CH	Jun–Aug 2023	8.3 73%	Entire country, excluding 3 prefectures	1.3 22%	0.5* 8%
Uganda	May–Jul	FEWS NET	May–Jul 2021	45.7 100%	Entire country	N/A	2.2 5%	FEWS NET	Jun–Aug 2022	44.2 100%	Entire country	N/A	2.3 5%	FEWS NET	Mar–May 2023	45.6 100%	Entire country	N/A	2.0–2.5 4–5%

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).

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Table of acute food insecurity estimates, 2021–23

Highest numbers of acutely food-insecure people in 2021, 2022 and projected highest numbers for 2023.

Countries/territories		2021 HIGHEST NUMBERS of acutely food-insecure people						2022 HIGHEST NUMBERS of acutely food-insecure people						2023 HIGHEST NUMBERS of acutely food-insecure people (projected)						
		USUAL PERIOD OF PEAK NEED	SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)		SOURCE	TIME PERIOD COVERED BY THE ANALYSIS	TOTAL POPULATION OF COUNTRY OR REGISTERED REFUGEES (MILLIONS) POPULATION ANALYSED (PERCENTAGE)	AREA/POPULATION ANALYSED	POPULATION IN IPC/CH PHASES (OR EQUIVALENT)	
						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)						PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)					PHASE 2 (MILLIONS) (PERCENTAGE)	PHASE 3 OR ABOVE (MILLIONS) (PERCENTAGE)
Refugees/migrant populations are indicated in blue																				
Ukraine	Dec–Mar	HNO	Oct–Nov 2021	41.3 15%	Donetsk and Luhansk oblasts and IDP population	N/A	0.4 6%	REACH		35.6 100%	Entire country	N/A	8.9 25%	No projection						
United Republic of Tanzania	Mar–Apr	IPC	Nov 2021–Apr 2022	57.6 6%	14 councils	0.8 23%	0.4* 13%	IPC	Oct 2022–Feb 2023	61.7 17%	28 councils and Zanzibar	3.3 31%	1.1* 10%	IPC	Oct 2022–Feb 2023	61.7 17%	28 councils and Zanzibar	3.3 31%	1.1* 10%	
Yemen	Jul–Sep	IPC	Jan–Jun 2021	30.0 100%	Entire country	8.6 29%	16.1** 54%	IPC	Jan–May 2022	31.9 100%	Entire country	8.6 27%	17.4** 55%	No projection						
Zambia	Jan–Mar	IPC	Feb–Mar 2021	18.0 38%	64 districts (rural)	2.5 36%	1.7* 25%	IPC	Oct 2022–Mar 2023	18.9 71%	91 districts	6.6 49%	2.0 14%	IPC	Oct 2022–Mar 2023	18.9 71%	91 districts	6.6 49%	2.0 14%	
Zimbabwe	Jan–Mar	IPC	Jan–Mar 2021	15.6 62%	Rural population	3.1 32%	3.4* 35%	FEWS NET	Oct–Dec 2022	15.3 100%	Entire country	N/A	3.0 20%	FEWS NET	Jan–Mar 2023	15.4 100%	Entire country	N/A	3.0–3.5 19–23%	

* The estimates for this country include populations classified in Emergency (IPC/CH Phase 4). ** The estimates for this country include populations classified in Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5).



CHAPTER 2

REGIONAL OVERVIEWS OF FOOD CRISES IN 2022

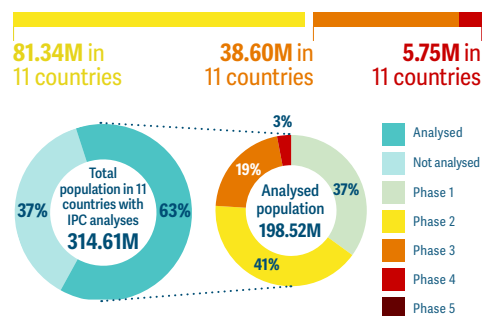
Central and Southern Africa

Angola | Central African Republic | Congo (refugees) | Democratic Republic of the Congo | Eswatini | Lesotho | Madagascar | Malawi | Mozambique | Namibia | United Republic of Tanzania | Zambia | Zimbabwe

Conflict in three countries, widespread weather extremes and soaring food prices drove high levels of acute food insecurity

47.4M people or **22%** of the analysed population in IPC Phase 3 or above or equivalent, in 2022 in 13 countries

44.35M of them are in 11 countries with IPC analyses



Source: IPC TWGs, 2022.

In Zimbabwe, **3.0M** people faced high levels of acute food insecurity (FEWS NET, 2022).

In Congo, **38 700** refugees were moderately or severely food insecure (WFP CARI, 2022).

13 countries in this region were selected for inclusion, all with data available

Eleven of these countries included in the GRFC 2023 are classified as major food crises: Angola, Central African Republic, Democratic Republic of the Congo, Eswatini, Madagascar, Malawi, Mozambique, Namibia, United Republic of Tanzania, Zambia and Zimbabwe

The number of people facing Crisis or worse (IPC Phase 3 or above) or equivalent remained at very high levels in 2022, at an estimated 47.4 million or 22 percent of the analysed population in 13 countries, up from the 45.6 million people estimated in 2021 in 12 of these countries.

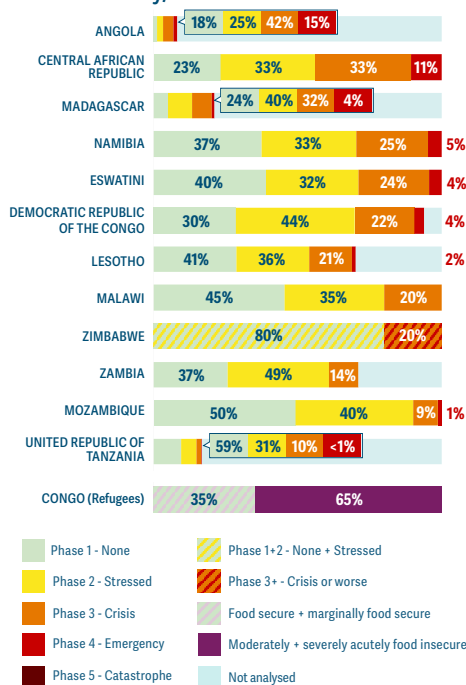
Despite increased analysis coverage, the number of people facing high levels of acute food insecurity decreased in the Democratic Republic of the Congo, Eswatini, Lesotho and Zimbabwe (although in the latter the data sources changed between the years), while there were increases in the Central African Republic, Madagascar, Malawi, Mozambique, the United Republic of Tanzania and Zambia. In Angola and Namibia, the peaks straddled 2021 and 2022, not allowing for year-on-year comparison, while the Congo was not included last year.

Regarding analysis coverage, the population analysed more than tripled in the United Republic of Tanzania, almost doubled in Zambia and Mozambique, and increased by 25–60 percent in Malawi, the Central African Republic, Madagascar and Zimbabwe (also due to a change in methodology). It increased by less than 10 percent in the Democratic Republic of the Congo, Eswatini, Lesotho and Malawi.

Eleven of the 13 countries in the region were classified as major food crises – nine of them because they had over 1 million people in IPC Phase 3 or above and two of them, Eswatini and Namibia, because they had over 20 percent of the national population in IPC Phase 3 or above.

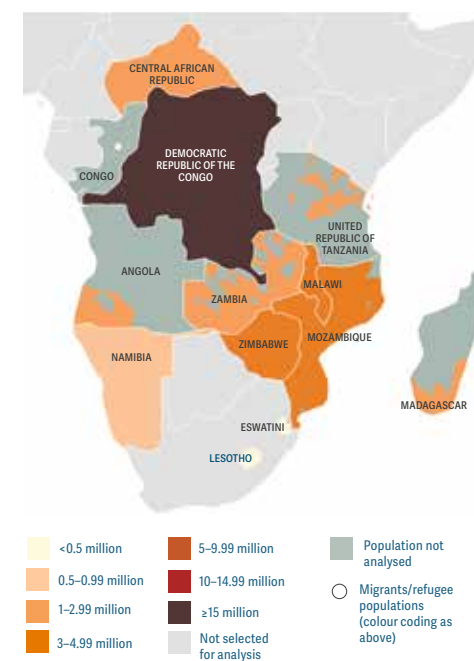
The Democratic Republic of the Congo had the highest numbers of people in IPC Phase 3 or above, at about 26.43 million, accounting for over 55 percent of the region's total number of people in these phases, followed by Malawi (3.82 million), Mozambique (3.15 million),

Share of analysed population by phase of acute food insecurity, 2022



Source: IPC TWGs 2021 and 2022; FEWS NET (Zimbabwe); WFP (Congo).

Numbers of people in IPC Phase 3 or above, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: IPC TWGs 2021 and 2022; FEWS NET (Zimbabwe); WFP (Congo).

highest share of its national population in IPC Phase 3 or above (44 percent), followed by Namibia (30 percent). Severity was also high in localized areas of Angola (58 percent) and Madagascar (36 percent). See chart above right.

Zimbabwe (3 million), the Central African Republic (2.65 million), Madagascar (2.22 million), Zambia (1.95 million), Angola (1.58 million) and the United Republic of Tanzania (1.1 million).

In terms of severity, the Central African Republic had the

Drivers of the crisis, 2022

Conflict/insecurity was the main driver of acute food insecurity in four countries with 32.27 million people facing high levels of acute food insecurity: the Central African Republic, the Democratic Republic of the Congo and Mozambique, and for refugee populations in the Congo. Although compounded with the effect of other drivers, protracted conflict and insecurity disrupted agricultural activities and markets, damaged rural livelihoods and infrastructure, and disrupted services, causing large population displacements in western and northwestern parts of the Central African Republic, eastern provinces of the Democratic Republic of the Congo and the northeastern province of Cabo Delgado in Mozambique. Poor security conditions in the most severely affected areas hampered the delivery of humanitarian assistance throughout the year.

Weather extremes were the main driver of acute food insecurity in five countries – Angola, Madagascar, Malawi, the United Republic of Tanzania and Zambia – with 10.70 million people estimated to be in IPC Phase 3 or above in 2022. Severe drought events in southern parts of Angola and Madagascar, and in northern Namibia, resulted in

Annual food price inflation rates, December 2022

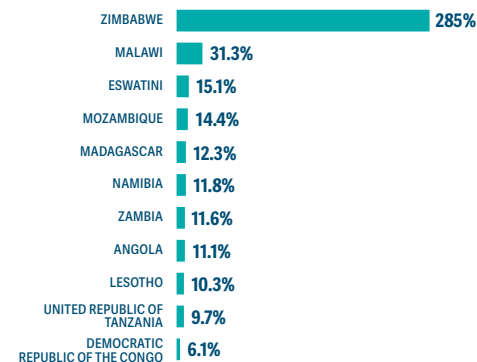
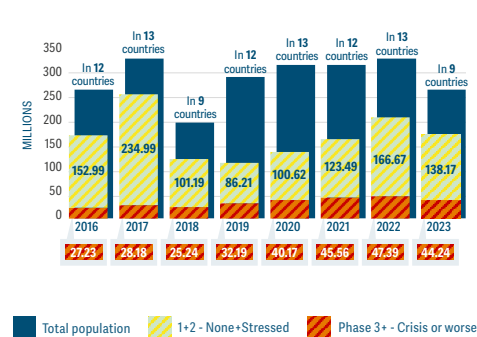


Figure for Namibia as of November 2022.
Source: WFP Economic Explorer, accessed 14 March 2023.

Numbers of people by phase of acute food insecurity, 2016–2023



Source: IPC TWG, FEWS NET and WFP.

localized poor crop and livestock production and a further deterioration of rural livelihoods for households severely affected by consecutive poor seasons. Tropical storms and hurricanes in the first two months of 2022 had a devastating impact on rural populations in the Grand Sud-Est of Madagascar. Erratic rainfall in Malawi, the United Republic of Tanzania, Zambia and Zimbabwe led to significant shortfalls in staple crop production in 2022 (FAO-GIEWS, December 2022).

Tropical storms and cyclones were also a significant contributory factor to acute food insecurity in Mozambique, particularly cyclone Gombe in March 2022, which affected about 775 000 people, causing internal displacements in central provinces, and cyclone Freddy in February 2023.

Economic shocks were the main driver of acute food insecurity in four countries: Eswatini, Lesotho, Namibia and Zimbabwe.

In these countries, the severe deterioration in household purchasing power amid increasing macroeconomic difficulties, compounded by the effects of the war in Ukraine, was the main driver of high levels of acute food insecurity for about 4.42 million people.

Economic challenges included high levels of public debt, fiscal constraints and slow economic growth. A rise in interest rates in several countries to tackle headline and

food inflation resulted in increased borrowing costs for governments, with potentially negative implications for public and private spending, further undermining income-earning opportunities.

As of December 2022, annual food inflation in Zimbabwe was estimated at 285 percent, while in the other three countries it ranged between 10 and 15 percent.

Reliance on food imports to satisfy domestic requirements as well as currency depreciations, notably in Zimbabwe and Malawi, amplified inflationary pressure on food prices.

Acute food insecurity since 2016

The estimated number of people facing high levels of acute food insecurity in Central and Southern Africa increased by 67 percent between 2016 and 2021 from about 27.23 million to 45.6 million, reflecting multiple interconnected shocks, including disastrous weather events, protracted conflicts and worsening insecurity in three countries, and sharp increases in food prices.

The increase during this period was largely due to the expansion of the acute food insecurity analyses in the Democratic Republic of the Congo, which since 2018 has accounted for at least half of the number of people facing high levels of acute food insecurity in the region and has consistently been among the crises with the highest numbers of people in IPC/CH Phase 3 or above or equivalent globally. Between 2016 and 2021, the estimated number of people facing high levels of acute food insecurity in the country increased sharply from 5.90 million to 27.26 million, and then declined slightly to 26.43 million people in 2022. During this period, analysis coverage increased from an average of 65 percent of the population between 2018 and 2022 to over 90 percent in 2021 and 2022.

Other countries that experienced significant increases in magnitude during the 2016–2022 period were Angola, the Central African Republic and Namibia. Most countries saw increases in the number of analysed people, particularly in Madagascar and Namibia.

Nine countries have been consistently included for all seven editions of the GRFC: the Central African Republic, the Congo, Eswatini, Lesotho, Madagascar, Malawi,

Mozambique, Zambia and Zimbabwe. Another three countries – Angola, Namibia and the United Republic of Tanzania – have been included in the GRFC six times. The Congo has been included for a second time in 2023.

NUTRITION

Number of children under 5 years old with wasting, in four* major food crises, 2022



* Democratic Republic of the Congo followed by the Central African Republic, Angola and Mozambique.
Source: IPC and SMART.

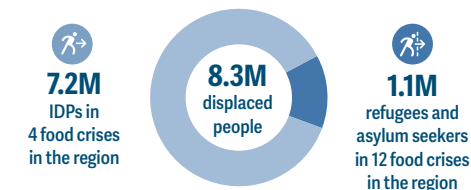
Data on the number of children suffering from wasting were only available in 5 out of the 13 food crises in the region. Of the 3.75 million reported children with wasting in five countries, 75 percent of them were in the Democratic Republic of the Congo followed by Madagascar, the Central African Republic, Angola and Mozambique. All countries, except Madagascar, had Critical (IPC AMN Phase 4) levels of acute malnutrition in some areas.

DISPLACEMENT

More than 8.3 million people were forcibly displaced in the region, largely as a result of conflict in the Democratic Republic of the Congo and Mozambique, and political violence in the Central African Republic, resulting in internal displacement and regional refugee movements.

Of the 7.2 million IDPs in four food crises in the region, 5.7 million or 70 percent were in the Democratic Republic of the Congo, where the displacement situation in 2023 is expected to worsen both in terms of numbers of displaced people and deterioration of their food security (UNHCR, February 2023). Around 1.03 million IDPs in Mozambique were displaced by conflict in Cabo Delgado and by tropical cyclones Idai in March 2019 and Gombe in

Number of forcibly displaced people, 2022



Source: UNHCR; IOM, December 2022.

2022 (OCHA, March 2022). There were around 0.5 million IDPs in the Central African Republic, largely due to the increase in military operations in central, eastern and northeastern parts of the country. In Malawi, following tropical storm Ana in January 2022, an estimated 945 700 people were displaced to 217 camps. From April 2022, most camps were decommissioned except some in Chikwawa and Nsanje where about 1 200 households stayed until July 2022 (IFRC, December 2022).

Over 1.1 million refugees were hosted in twelve countries in the region – 46 percent in the Democratic Republic of the Congo (from the Central African Republic and Rwanda), 22 percent in the United Republic of Tanzania (mainly from Burundi and the Democratic Republic of the Congo) and 9 percent in Malawi (mainly from the Democratic Republic of the Congo) (UNHCR, March 2023). The difficulties faced by forcibly displaced populations across the region are aggravated by food ration reductions and cuts to other essential services in camps and settlements due to funding shortages.

Projection for 2023

In Central and Southern Africa, up to 44.24 million people or 21 percent of the analysed population in 11 countries are projected to face high levels of acute food insecurity in 2023. This represents a decrease of around 1.5–2 million people estimated for the same ten countries in 2022.

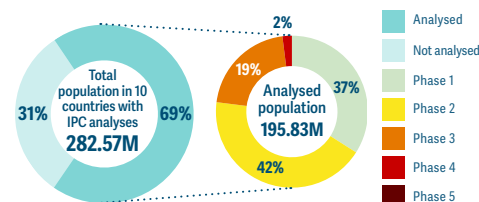
In the Central African Republic, the population in IPC Phase 3 or above was projected to rise by 0.34 million people to 2.99 million, mostly driven by persisting insecurity and armed violence disrupting agricultural production, livelihoods and food markets through

Projection for 2023: a small improvement in four countries

44.24M people or **21%** of the analysed population were projected to be in IPC Phase 3 or above in 2023 in 11 countries

40.73M of them were projected in 10 countries with IPC analyses

82.93M in 10 countries **36.40M** in 10 countries **4.33M** in 10 countries



Source: IPC TWGs, 2022.

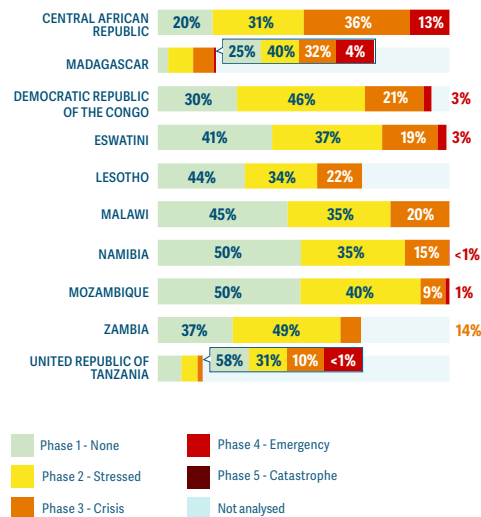
In Zimbabwe, 3.0–3.5M people were projected to be in IPC Phase 3 or above (FEWS NET, 2022).

No projections were available for Angola or refugees in Congo.

August 2023 (IPC, February 2022). In Zimbabwe, the number of people in IPC Phase 3 or above is projected at 3.0–3.5 million people, either similar to or 0.5 million above the 2022 peak, reflecting the persisting effects of economic and weather shocks on household food access and availability (FEWS NET, February 2023).

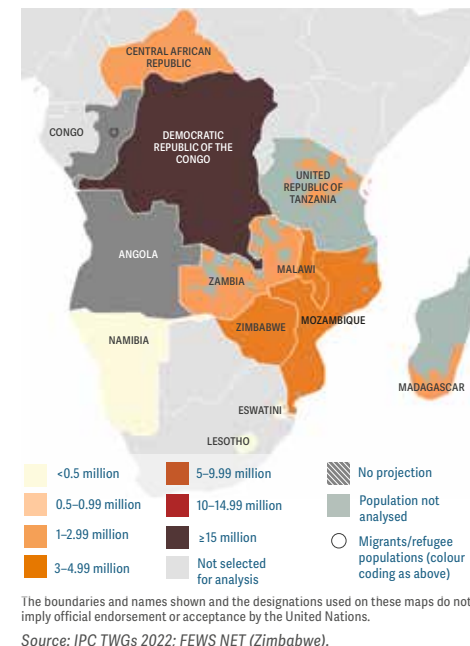
Of the four countries with projected improvements in food security, the largest projected decrease in the number of people in IPC Phase 3 or above is in the Democratic Republic of the Congo – down by more than 2 million people to 24.52 million in January–June 2023. Improved supply from the harvest and a positive macroeconomic forecast that is expected to help stabilize the local currency and market prices should improve food access and availability (IPC, October 2022).

Share of analysed population by phase of acute food insecurity, 2023



Source: IPC TWGs 2022 and 2023.

Numbers of people in IPC Phase 3 or above, 2023



Levels of acute food insecurity are also expected to decline significantly in Namibia, with the projected number of people in IPC Phase 3 or above decreasing by 48 percent to 390 000 in January–March 2023 (IPC, February 2023), and to a lesser extent in Lesotho and Eswatini, mostly reflecting the arrival of harvests, boosting household food availability.

Madagascar, Malawi, Mozambique, the United Republic of Tanzania and Zambia had peaks that straddle 2022 and 2023, and therefore the figure is the same as the 2022 peak. Despite improvements in some countries, levels of acute food insecurity are alarmingly high. Conflicts and insecurity are expected to remain the primary drivers in the Central African Republic and the Democratic Republic of the Congo. Across the region,

prices of staple foods are likely to remain at high levels, despite the good 2022 harvests, supported by persisting market disruptions, and high international prices of food, fuel and agricultural inputs, eroding household purchasing power.

The impact of weather extremes, including the February 2023 tropical cyclone Freddy in Mozambique, Madagascar and Malawi, will worsen acute food insecurity through 2023. In Madagascar, the damage and subsequent flooding from the cyclone affected all aspects of food security: it halted income activities for households reliant on casual labour, and destroyed food stocks and livestock, leading to a lack of assets to rely on in the future, and the reduced prospect of a normal harvest (FAO, February 2022).

East Africa

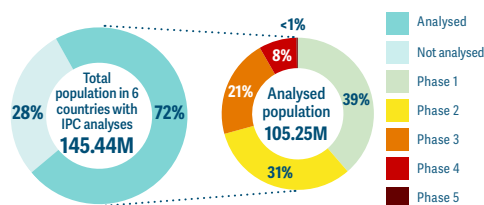
Burundi | Djibouti | Ethiopia | Kenya | Somalia | South Sudan | Sudan | Uganda

The number of people facing high levels of acute food insecurity reached the highest level since GRFC records began

56.85M people or **22%** of the analysed population in IPC Phase 3 or above or equivalent, in 2022 in eight countries

30.94M of them are in six countries with IPC analyses

32.73M in 6 countries | 21.84M in 6 countries | 8.79M in 6 countries | 0.30M in 2 countries



Source: IPC TWGs, 2022.

In Ethiopia, about **23.61M** people faced high levels of acute food insecurity (HRP, 2022)

In Uganda, **2.3M** people faced high levels of acute food insecurity (FEWS NET, 2023)

10 countries in this region were selected for inclusion

Two countries had data not meeting GRFC requirements: Eritrea and Rwanda (refugees). Seven of the eight remaining countries included in the GRFC 2023 are major food crises: Burundi, Ethiopia, Kenya, Somalia, South Sudan, the Sudan and Uganda. One country, Djibouti, is included in the GRFC 2023 but not as a major food crisis.

Populations in Catastrophe (IPC Phase 5)

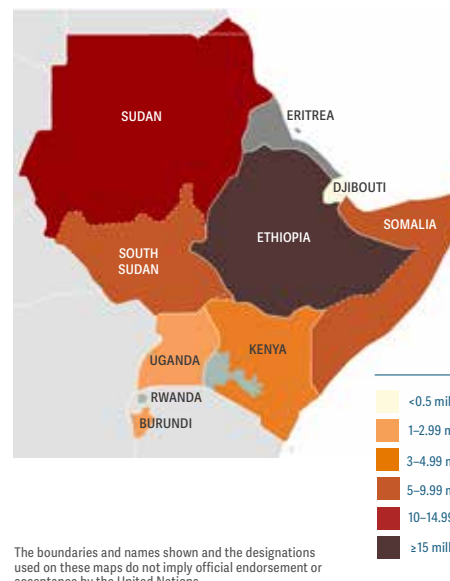
Extremely severe levels of acute food insecurity plagued parts of the region.

In October–December 2022, 214 000 people faced IPC Phase 5 in eight regions (Bakool, Banadir, Bay, Galgaduud, Gedo, Middle Juba, Mudug and Nugaal) in central and southern parts of **Somalia**. A Somalia IPC analysis published in September 2022 projected Famine (IPC Phase 5) for agropastoral populations in Baidoa and Burhakaba districts and displaced people in Baidoa town (Bay region) as well as in Mogadishu between October and December. However, the December 2022 Somalia IPC analysis found that Famine did not materialize due to scaled-up assistance, a better-than-expected but still below-average October–December rainy season, and stabilization of very high food prices.

In April–July 2022, around 87 000 people faced IPC Phase 5 in Jonglei, Lakes and Unity states, and the Greater Pibor Administrative Area in **South Sudan** – 19 percent lower than during the April–July 2021 lean season. In 2022, no new information by IPC phase was available for **Ethiopia**.

The compounding effects of multiple shocks, including drought, macroeconomic challenges and conflict, drove rising levels of acute food insecurity across East Africa, with nearly 56.85 million people in eight countries facing Crisis or worse (IPC Phase 3 or above) or equivalent in 2022. While this marks the highest number in seven years of GRFC reporting, the 30 percent increase in the number of people facing high levels of acute food insecurity is in line with the increase in analysed population (+29 percent year-on-year).

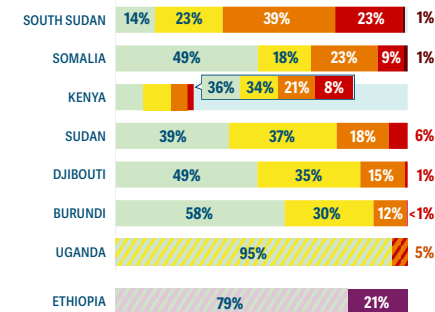
Number of people in IPC Phase 3 or above, or equivalent, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: IPC TWGs, HRP (Ethiopia), FEWS NET (Uganda).

Share of analysed population by phase of acute food insecurity, 2022 peak

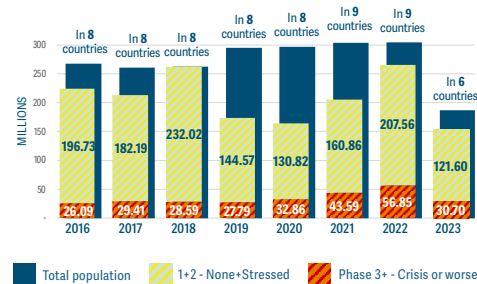


The overall number included 301 100 people in Catastrophe (IPC Phase 5) in Somalia and South Sudan and nearly 8.8 million people in Emergency (IPC Phase 4). Ethiopia, Kenya, Somalia, South Sudan and the Sudan all had the highest populations facing high levels of acute food insecurity in the seven-year history of the GRFC. The biggest year-on-year deteriorations were in **Kenya**, with an 84 percent increase in the number of people facing IPC Phase 3 or above between the 2021 and 2022 peaks, **Somalia** (61 percent increase) and the **Sudan** (20 percent

increase). Year-on-year changes cannot be evaluated for Ethiopia due to different data sources.

The countries with the largest populations facing high levels of acute food insecurity were **Ethiopia** (23.6 million), followed by the **Sudan** (11.7 million), **South Sudan** (7.7 million), **Somalia** (5.59 million), **Kenya** (4.4 million) and **Uganda** (2.3 million) – all of them considered major food crises. Ethiopia and the Sudan are in the top ten largest GRFC 2023 food crises in terms of

Numbers of people by phase of acute food insecurity, 2016–23



Source: IPC TWG, FEWS NET and WFP.

magnitude.

Each country analysis covered 100 percent of the population except for Kenya, which covered the Arid and Semi-Arid Lands (ASALs), or 27 percent of the country's population. The prevalence of the population in IPC Phase 3 or above or equivalent was highest in South Sudan (63 percent), followed by Somalia (33 percent), the Sudan (24 percent) and Ethiopia (21 percent). In Kenya, 29 percent of the analysed population in the ASALs was in IPC Phase 3 or above.

Drivers of the crisis 2022–23

Weather extremes were considered the primary driver of acute food insecurity in **Burundi, Ethiopia, Kenya, Somalia and Uganda**, where a total of 37.26 million people faced high levels of acute food insecurity. The Horn of Africa has faced an unprecedented three-year drought, with southern Ethiopia, the ASALs of Kenya, and most of Somalia being worst affected. Both Burundi and Uganda were affected by rainfall deficits that constrained crop yields. Meanwhile, record-breaking flooding was observed in South Sudan (FSNWG, October 2022).

Economic shocks Very high food prices limited food access across almost all countries in the region, linked to the combined effects of high international food, fuel and fertilizer prices (partially

driven by the spillover effects of the war in Ukraine), a tightening of regional cereal supplies due to the drought, and currency depreciation in multiple countries (WFP, July 2022). Economic shocks were considered the primary driver in **Djibouti, South Sudan and the Sudan**, where a total of 19.59 million people faced high levels of acute food insecurity.

Conflict/insecurity Both political and resource-based conflict and insecurity continued to disrupt livelihoods, markets and humanitarian access in Ethiopia, Somalia, South Sudan and the Sudan while regional conflict contributed to the ongoing refugee situation in Uganda (WFP & FAO, October 2022).

Acute food insecurity since 2016

After stable numbers of people facing high levels of acute food insecurity between 2016 and 2019, the population in IPC Phase 3 or above in East Africa rapidly increased from 2020, with more than 10 million additional people each year. This is attributed to multiple factors, including the socioeconomic impacts of COVID-19, increasing conflict (such as in northern Ethiopia), drought, atypical flooding, and macroeconomic challenges, exacerbated by the war in Ukraine as well as an increase in the population analysed, by 30–47 million people each year.

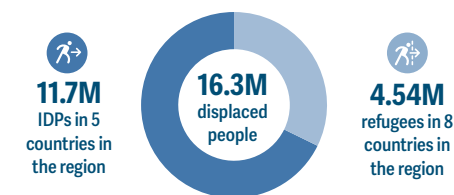
The population facing Catastrophe (IPC Phase 5) has also increased in recent years. The population in this phase in 2022 (301 050) was lower than the record 2021 levels (509 000); however no new information was available on the 401 000 people who faced IPC Phase 5 in the Tigray region of Ethiopia in July–September 2021¹ (outside the 2021 peak of acute food insecurity), but major concerns remain. The regional IPC Phase 5 figures during these past two years represent significant increases compared with other years covered by the GRFC, including in 2018 when 172 000 people were in Catastrophe (IPC Phase 5) in Somalia and South Sudan, and in 2017 when two counties in Greater Unity, South Sudan were classified in Famine and 100 000 people faced IPC Phase 5 (GRFC, May 2022).

¹ These estimates combine two IPC analyses: that of Belg and Meher-dependent areas (January–June 2021), and conflict-affected areas of Tigray, Afar and Amhara (May–June 2021). The Government of Ethiopia did not endorse the latter.

When evaluating year-on-year regional trends be aware that some countries, such as Djibouti, were not included every year, while others, such as Ethiopia and Uganda, saw major changes in the geographic coverage of analyses and of data sources, and Kenya saw major increases in the analysed population in the ASALs.

DISPLACEMENT

Number of forcibly displaced people in eight food-crisis countries, 2022



Source: UNHCR; IOM, December 2023.

There were about 16.27 million forcibly displaced people in eight food-crisis countries in the region, of whom 11.7 million were internally displaced: 3.78 million in the Sudan, 2.97 million in Somalia, 2.73 million in Ethiopia, 2.23 million in South Sudan and about 20 000 in Uganda.

Of the 4.54 million refugees hosted in eight countries in the region, the majority were in Uganda (1.5 million) and the Sudan (1.13 million) followed by Ethiopia, Kenya, South Sudan and Somalia. More than half of the refugees in the region (2.29 million) were from South Sudan (mainly living in Uganda and the Sudan) followed by Ethiopia and Kenya (UNHCR, February 2023).

NUTRITION

Acute malnutrition worsened significantly since 2021 in the region, particularly in the Horn of Africa, with very high levels of wasting. In Ethiopia, screening data in most of the woredas in the Somali and Oromia regions reported proxy GAM levels above 15 percent (GNC, 2022). The nutrition situation was also concerning in drought- and conflict-affected northern areas (Tigray, Afar and Amhara) (UNICEF, 2022).

In Somalia, the median wasting prevalence was 15.9 percent, and exceeded 25 percent in several areas. And in Kenya, nutrition surveys conducted in June–July 2022 in ASAL counties reported wasting prevalence above 15 percent. The nutrition situation in South Sudan and the Sudan continues to be dire (OCHA, June 2022). In South Sudan, 2022 surveys showed persisting high levels of wasting above 15 percent in conflict-affected areas.

All food-crisis countries in the region, except Djibouti, had nutrition data available in 2022. In Ethiopia, the Sudan, Somalia, South Sudan, Kenya, Burundi and Uganda, 11.72 million children under 5 years old were estimated to be wasted. Of these, around 2.79 million were severely wasted.

Across the region, the highest numbers of wasted children under 5 years old were in Ethiopia (4.8 million, of whom 1.21 million were severely wasted), the Sudan (2.8 million with 0.56 million severely wasted), Somalia (1.48 million with 0.36 million severely wasted), South Sudan (1.4 million with 0.35 million severely wasted) followed by Kenya, Burundi and Uganda.

Number of children under 5 years old with wasting, in seven major food crises, 2022



Source: IPC, HNO/HRP 2022.

Drought in the Horn of Africa

In 2022, the Horn of Africa was experiencing its worst drought in more than four decades, with catastrophic consequences (OCHA, September 2022).

The severe nature of the drought drove a large-scale, multisectoral humanitarian emergency, with a sharp increase in acute food insecurity, malnutrition and mortality rates. The worst-affected countries were Ethiopia, Kenya and Somalia.

The worsening of the drought in 2022 was driven by the poor performance of the region's two main rainy seasons. The March–May 2022 rainy season was well below average, with much of the region seeing the lowest rainfall amounts recorded in the past 70 years. In addition, the poor rains were extremely widespread, affecting over 80 percent of the eastern Horn of Africa (FSNWG, July 2022). This was followed by the October–December rainy season that also performed poorly, though rainfall deficits during this season were not as severe as those observed during March–May.

Pastoral livelihoods – the key livelihood activity across many of the worst-affected areas – were devastated by the drought. For example, estimates from the beginning of January 2023 indicated that 10.8 million livestock had died across the region due to a lack of pasture and water (FSNWG, January 2023). Milk availability, which is key for the nutrition status of young children, was also severely limited as most animals ceased producing milk.

For cropping households, the drought drove consecutive seasons of below-average production. The 2022 Gu harvests in southern Somalia were estimated to be 50 percent below the 1995–2021 average (IPC, September 2022), while in Kenya, total crop failures were observed across much of the southeastern marginal agricultural cluster (Government of Kenya, September 2022).

Food access for households who already were facing below-average crop and livestock production was further curtailed by extremely high food prices. For example, in parts of southern Somalia, staple food prices doubled or tripled compared with the long-term average and exceeded levels observed during the 2011 and 2017 drought emergencies.

Due to a lack of food, water and other basic resources, 1.69 million people were internally displaced in 2022, including 1.2 million in Somalia and 512 000 in Ethiopia (UNHCR, December 2022).

As of December 2022, between 21.7 million and 22.6 million people faced high levels of acute food insecurity, primarily due to the drought in Ethiopia, Kenya and Somalia, including 2.7 million people in Emergency (IPC Phase 4) in Kenya and Somalia, and 214 050 people in Catastrophe (IPC Phase 5) in Somalia. At that time, subnational acute food security classifications showed a dire situation. In Kenya, four counties (Turkana, Marsabit, Isiolo and Mandera) were classified in IPC Phase 4 (IPC, September 2022).

In Somalia, the projected Famine was averted due to scaled-up humanitarian assistance and a poor but better-than-forecast October–December rainy season. However, widespread IPC Phase 3 and IPC Phase 4 classifications continued with consequent outcomes on food security, morbidity and mortality (IPC, December 2022). Similarly in Ethiopia, FEWS NET analyses showed widespread IPC Phase 4 and IPC Phase 3 outcomes, indicating that while the situation remains alarming, worse outcomes would have been likely in the absence of ongoing assistance (FEWS NET, November 2022).

Alarming rates of malnutrition

The IPC acute malnutrition analysis in Kenya found that Laisamis in Marsabit county, Turkana South and Turkana North were experiencing an Extremely Critical situation (IPC AMN Phase 5) and widespread areas faced a Critical situation (IPC AMN Phase 4) in July 2022 (IPC, September 2022). Similarly, in Somalia, the IPC acute malnutrition analysis showed many areas in a Critical situation between July and September 2022.

Rising mortality rates were also observed. For example, in Somalia, the post-Gu assessment found that four population groups were experiencing death rates for children under the age of 5 years exceeding 2 out of 10 000 per day (FSNAU, September 2022). The nutrition situation among displaced populations was also a major



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Somalia is in the grip of an acute food insecurity crisis amid what will soon become the longest drought in its history. This had driven 1.2 million internal displacements by the end of 2022.

source for concern. Data from UNHCR indicate that there has been a significant increase in admissions of SAM and MAM cases into nutrition treatment programmes at IDP and refugee sites in the region, particularly in Ethiopia and Kenya, and critical levels of wasting (>15 percent) were reported among the children of newly arrived refugees in Kenya and Ethiopia (FSNWG, January 2023). Furthermore, displaced populations have been identified as one of the populations facing the most dire food security, nutritional and mortality outcomes in Somalia, with the IPC analysis released in September projecting Famine among IDP populations in Baidoa town (Bay region) and Risk of Famine among IDPs in Mogadishu, Garowe, Galkacyo and Dollow (IPC, September 2022). Though this projected Famine was prevented, IDPs still continue to face some of the most severe outcomes in Somalia (IPC, December 2022).

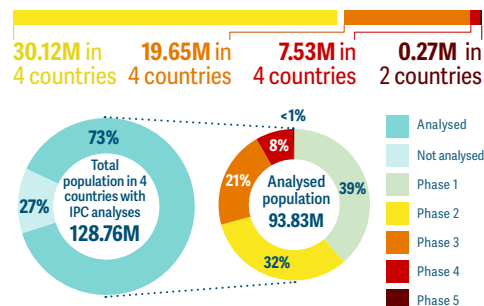
Drought recovery will be prolonged in 2023

Earlier forecasts for the March–May 2023 rainfall season had pointed to depressed rainfall, coupled with high temperatures, risking a sixth consecutive season of drought in affected areas. However, improved rainfall from mid-March 2023 brought some reprieve to pastoral and agropastoral communities, especially in southern Ethiopia, facilitating land preparation in agropastoral areas, although poor vegetation conditions persisted in numerous ASAL areas in Kenya. Heavy rains caused river overflows and flash floods, destroying homes, farmlands and shelters for displaced populations in some areas, and increasing the risk of waterborne diseases, such as cholera. Given the magnitude of livelihood losses and population displacements in the region, the impacts of the drought will likely continue regardless of seasonal performance (FSNWG, March 2023).

Out of the six countries with projections for 2023, Kenya and Somalia are again facing sharp deteriorations in acute food insecurity

30.7M people or **20%** of the analysed population were projected in IPC Phase 3 or above, in 2023 in six countries

27.45M of them were projected in four countries with IPC analyses



Source: IPC TWGs, 2022 and 2023.

In Burundi, 0.5–0.75M people faced high levels of acute food insecurity (FEWS NET, 2023)

In Uganda, 2.0–2.5M people faced high levels of acute food insecurity (FEWS NET, 2023)

Weather extremes including the severe, three-year drought across the Horn of Africa, economic challenges, and conflict and insecurity affecting livelihoods, markets and humanitarian access continue to drive dire levels of acute food insecurity across many countries in East Africa in 2023.

Populations with the most severe levels of acute food insecurity (IPC Phases 4 and 5) will remain extremely elevated during 2023, with 7.5 million people projected in IPC Phase 4 in Kenya, Somalia, South Sudan and the Sudan, and 265 700 people projected in IPC Phase 5 in Somalia and South Sudan.

Populations in IPC Phase 3 or above in **South Sudan** are expected to increase marginally from 7.74 million in 2022 to 7.76 million in 2023, with 2.9 million people in IPC Phase 4 and 43 000 in Catastrophe (IPC Phase 5). The

Populations in Catastrophe (IPC Phase 5)

Significant efforts in the scale-up of multisectoral humanitarian assistance, supported by slightly more favourable than previously foreseen rains, contributed to a moderate improvement in food security and nutrition outcomes. However, the situation remained critical in the first six months of 2023. From April–June, around 222 700 people are projected to be in IPC Phase 5 in the most severely drought- and conflict-affected areas. In southern Somalia, agropastoral populations in Burhakaba district (Bay region) and IDPs in settlements in Baidoa (Bay) and Mogadishu (Banadir) face a Risk of Famine if the Gu season rainfall turns out to be much poorer than forecast, leading to crop failure, and humanitarian assistance does not reach the most vulnerable populations (IPC, February 2023).

In South Sudan, in April–July 2023, around 43 000 people are expected to face IPC Phase 5 in Akobo, Canal/Pigi and Fangak counties (Jonglei state), and Leer and Mayendit counties (Unity state) (IPC, November 2022).

crisis continues to be driven by currency depreciation, high global food prices, climatic shocks including floods and dry spells, and persistent conflict and insecurity (IPC, November 2022).

In **Somalia**, 6.5 million people are projected to face IPC Phase 3 or above, including 222 700 people in IPC Phase 5 and 1.86 million people in IPC Phase 4 – an overall 16 percent increase compared with peak 2022 figures due to the continued impacts of five below-average rainy seasons and a forecast sixth poor season during the 2023 Gu, high food prices and conflict (IPC, February 2023).

In **Kenya**, the population facing IPC Phase 3 or above is projected to increase by 25 percent in 2023, or to 5.4 million people, the highest in the history of the GRFC due primarily to the continued impacts of the

Projected number of people in IPC Phase 3 or above, 2023



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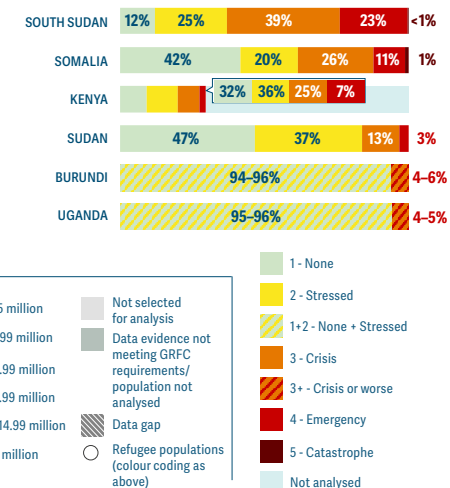
Source: IPC TWGs, 2022 and 2023.

unprecedented drought, along with high food prices (IPC, February 2023).

In the **Sudan**, the number of people facing high levels of acute food insecurity was projected to decline by 34 percent to 7.7 million between October 2022 and February 2023. However, this is largely attributable to seasonality of food insecurity, while high food prices and intercommunal conflicts will persist (IPC, June 2022). Of high concern, violent clashes between the Sudanese Armed Forces and the paramilitary forces in mid-April are likely to trigger a severe deterioration of livelihoods, internal displacement and acute food insecurity. No updated acute food insecurity estimates were available at the time of publication.

In **Burundi**, 2022 and 2023 data are not directly comparable due to changing data sources. Between

Share of analysed population by phase of acute food insecurity, 2023



Source: IPC TWGs, 2022 and 2023; FEWS NET (Burundi and Uganda).

500 000 and 750 000 people will face high acute food insecurity driven by below-average rainfall negatively affecting Season A production, and economic challenges driving rising food prices, thus limiting economic access for many households according to FEWS NET.

In **Uganda**, weather shocks, high food prices and conflict in certain areas are expected to drive acute food insecurity, with up to 2.5 million people projected to face high levels of acute food insecurity in 2023, up from 2.3 million in 2022 according to FEWS NET.

No projections are available for **Djibouti** or **Ethiopia**.

West Africa and the Sahel, and Cameroon

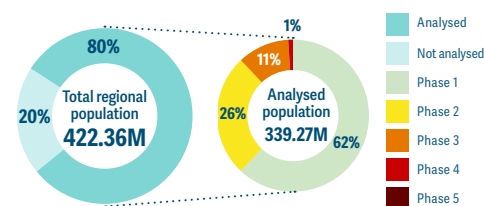
Burkina Faso | Cabo Verde | Cameroon | Chad | Gambia | Ghana | Guinea | Liberia | Mali | Mauritania | Niger | Nigeria (21 states and FCT) | Senegal | Sierra Leone | Togo

Conflicts and economic shocks drove up acute food insecurity to record highs in 2022 despite above-average agricultural campaign for the region

41.45M people or **12%** of the analysed population in CH Phase 3 or above, in 2022 in 15 countries

87.12M in 15 countries **38.50M** in 15 countries **2.95M** in 15 countries

In Burkina Faso and Nigeria, no populations were in **Catastrophe (CH Phase 5)** during the June–August 2022 peak period, but **1 800 people** in Burkina Faso and **3 000 people** in Nigeria were in this phase in October–December 2022.



All countries had 94–100 percent of their populations analysed except Ghana (44%), Nigeria (21 states and the FCT) (72%), Togo (73%) and Guinea (84%).

Source: Cadre Harmonisé, March and November 2022.

15 countries in this region were selected for inclusion, all with data available

Nine of these countries included in the GRFC 2023 are major food crises: Burkina Faso, Cameroon, Chad, Guinea, Mali, Mauritania, Niger, Nigeria and Sierra Leone. Benin, Côte d'Ivoire and Guinea-Bissau were included in 2021 but not in 2022, while Cabo Verde, Ghana and Togo were included in 2022 but not in 2021.

The number of people facing high levels of acute food insecurity reached a new record for CH reporting in 2022, at about 41.45 million in 15 countries. This is nearly 40 percent more people than in 2021, even though 3 million fewer people were analysed. At 2.95 million, the number of people in Emergency (CH Phase 4) was nearly double that of 2021.

The highest number of people in CH Phase 3 or above were in Nigeria (21 states and the Federal Capital Territory (FCT)), with about 19.45 million, followed by the Niger, Cameroon, Burkina Faso, Chad, Mali, Sierra Leone, Guinea and Mauritania.

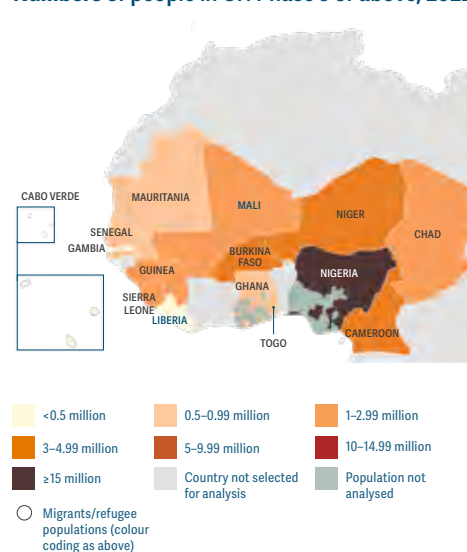
Of the 12 countries covered in both the GRFC 2022 and 2023 editions, six – the Gambia, Guinea, Mauritania, the Niger, Nigeria (21 states and the FCT) and Senegal – recorded at least 50 percent year-on-year increases in the number of people in CH Phase 3 or above, while four – Burkina Faso, Cameroon, Chad and Mali – recorded increases of 18–40 percent. In Liberia and Sierra Leone, levels of acute food insecurity declined in 2022 but remained at high levels, mostly driven by high food prices, amid sharp currency depreciation and high inflation.

When comparing the same 12 countries with 2021 and 2022 data, the number of people estimated to be in Stressed (CH Phase 2) was nearly 17 percent higher year-on-year, while the number of people estimated to be in Minimal (CH Phase 1) was about 10 percent lower.

Drivers of the crisis, 2022–23

Conflict/insecurity was the main driver of acute food insecurity in six countries: Burkina Faso, Cameroon, Chad, Mali, the Niger and Nigeria (21 states and the FCT). Although compounded by other drivers, about 34.85 million people faced high levels of acute food insecurity in these countries/

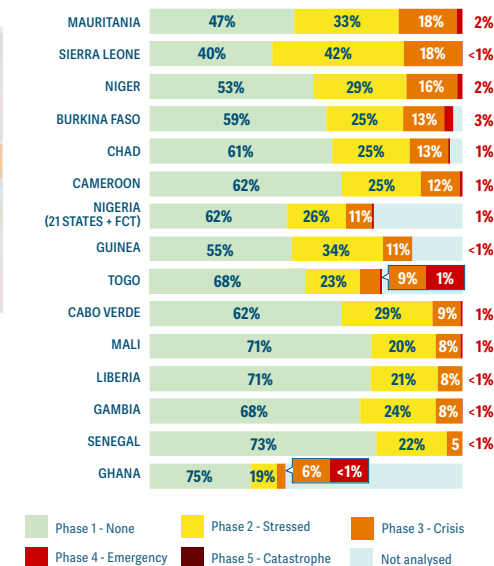
Numbers of people in CH Phase 3 or above, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, March 2022.

Share of analysed population by phase of acute food insecurity, 2022 peak



Source: Cadre Harmonisé, March 2022.

territories, mainly due to the persistence of regional security crises in border areas, including the Lake Chad Basin and the Central Sahel, as well as conflict in northwest and southwest regions of Cameroon that triggered large-scale internal and cross-border population displacements, and severely disrupted agricultural livelihoods, pastoral transhumance, markets and trade. Poor security in the most severely affected areas constrained humanitarian access throughout the year,

curtailing the delivery of assistance. Concerns arise due to the increase in violent events in northern border areas of Togo and Ghana, reflecting a spread of the insecurity crisis in the Central Sahel.

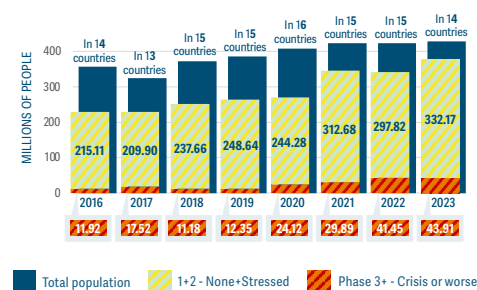
Economic shocks were the primary driver of acute food insecurity in nine countries – Cabo Verde, the Gambia, Ghana, Guinea, Liberia, Mauritania, Senegal, Sierra Leone and Togo, where about 6.6 million people were estimated to face high levels of

acute food insecurity – but they were also major drivers in conflict-affected countries/territories. Unsustainable debt levels and slow growth, partly attributable to the lingering effects of COVID-19, further compounded by the war in Ukraine, impacted domestic economies and limited the fiscal space to implement social protection measures. Steep currency depreciation and rampant inflation, notably in Ghana and Sierra Leone, had a negative impact on household purchasing power. Reliance on food imports, particularly in Cabo Verde and Mauritania, was an underlying inflationary factor (WFP Economic Explorer, FAO-FPMA tool, accessed 14 March 2023).

Food prices generally increased through 2022, reaching record highs in several countries. The increases were linked to high global food, fuel and fertilizer prices and reduced cross-border trade flows, which resulted from restrictions on exports of cereals and cereal products introduced to protect the domestic supply in Mali, Burkina Faso, Chad and Côte d'Ivoire.

Weather extremes At the regional level, 2022–23 agricultural production was above that of the previous year and the five-year average, and 20 percent above the previous year in the Sahelian countries (CH, November 2022). Erratic and

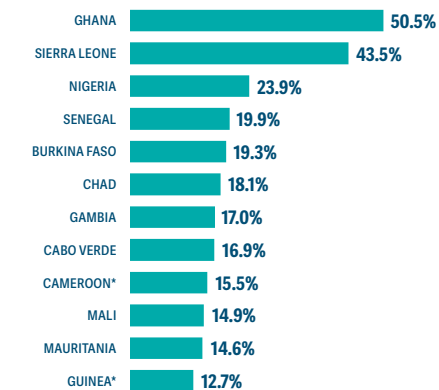
Numbers of people by phase of acute food insecurity, 2016–2023



Twelve countries in the region have been included in all editions of the GRFC: Burkina Faso, Cameroon, Chad, Gambia, Guinea, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal and Sierra Leone. Libya was included as part of the region in previous editions but from GRFC 2023 it is in the Middle East and Northern Africa region.

Source: FSIN.

Food-crisis countries/territories where food price inflation was over 10 percent, December 2022



* Figure for Cameroon as of September 2022 and for Guinea as of July 2022.

Source: WFP Economic Explorer, accessed 10 March 2023.

below-average rains in 2021 resulted in shortfalls of crop production in Sahelian countries, particularly in the Niger, Chad and Mauritania, significantly reducing food availability in 2022. Flooding in 2022 disrupted markets and livelihoods, and caused crop localized losses, constraining local food availability and access. As of December 2022, flooding had affected about 7.05 million people in 14 countries, particularly in Nigeria (21 states and the FCT) and Chad (OCHA, January 2023).

Acute food insecurity since 2016

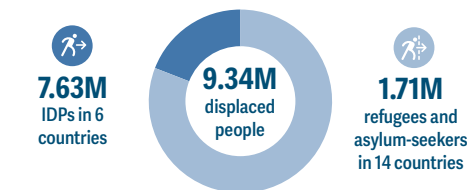
The estimated number of people facing high levels of acute food insecurity in the region has increased since 2016 and more than tripled between 2019 and 2022, from about 12.35 million to 41.45 million, with nearly all of them in the 12 countries/territories that have experienced food crises since 2016. Some of this is due to the expansion of the geographical coverage of the CH analyses since 2021, particularly in Nigeria, as well as multiple and interconnected conflict-related, economic and weather-related shocks. The analysed population at the regional level increased by around 50 percent between 2016 and 2022.

Some countries/territories in the region move in and out of food crisis as they face varying shocks. For instance, in 2023, Ghana was included in the report for the first time, Togo for the second and Cabo Verde for the fourth. Although not included in 2023, Benin has been included once, Côte d'Ivoire five times and Guinea-Bissau six times.

The other 12 countries have faced food crises for each edition of the GRFC since 2017. In these 12 countries, between 2016 and 2022, the number of people in CH Phase 3 nearly quadrupled, from 11 million to 40 million. Four countries have been included as major food crises in all seven years of the GRFC: Cameroon, Chad, the Niger and Nigeria (in 2017, 2018 and 2019 as part of the Lake Chad Basin regional crisis).

DISPLACEMENT

Number of IDPs and refugees, end 2022



Source: UNHCR, IOM, December 2022.

The region is facing a growing displacement crisis with 7.23 million IDPs in six countries, over 1 million more than in 2021, due to conflict and insecurity in the Central Sahel and the Lake Chad Basin. The biggest increases were in northern Nigeria, which had 3.17 million IDPs by the end of 2022; Burkina Faso, which had 1.89 million; and Cameroon, with about 985 000. Together these three countries had about 84 percent of the region's IDPs. Chad, Mali and the Niger had smaller populations of IDPs.

Out of the 1.71 million refugees and asylum-seekers, Chad hosted the highest number, reaching nearly 600 000, mainly from the Sudan. This was followed by: Cameroon (473 900), with refugees mainly from the Central African Republic; the Niger (302 000), with refugees mainly from Nigeria; Mauritania (106 000), with refugees mainly from Mali; and Nigeria (92 000), with refugees mainly from Cameroon.

NUTRITION

Number of children under 5 years old with wasting, in nine major food crises, 2022



Source: IPC, HNO, 2022.

When comparing the SMART 2021 and 2022 results, wasting among children under 5 years increased at the national level in Burkina Faso, Chad, Mali and Mauritania. The wasting prevalence was above the 'very high' WHO threshold of 15 percent in Gao in Mali (16.1 percent), in Ennedi Est in Chad (15.7 percent), and in six out of the 12 regions in Mauritania.

The alarming situation across the region – with 12.70 children under 5 years suffering from wasting in nine countries/territories – stemmed from a combination of higher levels of acute food insecurity, high prevalence of diseases associated with poor access to safe water and sanitation services, as well as inadequate food intake. These factors were compounded by unprecedented floods during the 2022 rainy season, particularly in Chad, the Niger and Nigeria. In addition, about 1.18 million pregnant or lactating women were suffering from acute malnutrition, most of whom are in Burkina Faso (800 000) and northern Nigeria (512 000). Furthermore, there were about 415 000 wasted children under 5 years in Guinea, about 204 000 in Cameroon, 176 000 in Sierra Leone and about 138 000 in Mauritania.

Nigeria had the highest number of wasted children at 5.93 million in northeastern and northwestern states. This was followed by the Niger (1.88 million), Chad (1.77 million), Mali (1.48 million) and Burkina Faso (700 000).

Food, nutrition and displacement crisis in the Central Sahel

The Central Sahel region has experienced worsening acute food insecurity and malnutrition over the last three years, underpinned by a complex interplay between conflict and weather shocks amid high socioeconomic vulnerability, which have severely constrained household food availability and access.

The Central Sahel includes Mali, Burkina Faso and western Niger (Tillabéri and Tahoua regions). The 2021–22 Human Development Report ranked these countries among the least developed of 191 countries worldwide: Burkina Faso ranking 184th, Mali 186th and the Niger 189th (UNDP, September 2022).

Since 2019, worsening conflict has disrupted rural livelihoods, markets and trade, and triggered large internal and cross-border population displacements. Access to any remaining basic social services has been interrupted and humanitarian access restricted (CH, November 2022).

The poor security conditions have hampered transhumant movements of pastoralists, thus concentrating livestock in smaller areas and resulting in the depletion of pasture and water points, the deterioration of livestock body condition and an increase in clashes between farmers and pastoral communities over land use. This has caused economic and food losses. In April 2022, insecurity stranded more than 1.3 million livestock in several border areas in West Africa, including the Tahoua region in the Niger and the tri-border Liptako-Gourma area of Mali, Burkina Faso and the Niger (OECD, December 2022).

During the 2022 peak, a record 7.34 million people were estimated to face Crisis or worse (CH Phase 3 or above) levels of acute food insecurity in the Central Sahel region, including 1.03 million people in Emergency (CH Phase 4). This marks a year-on-year increase of 1.7 million people and is about three times higher than in 2019. This regional estimate covers about 3.45 million people in Burkina Faso, 1.84 million in Mali and 2.05 million in western Niger.

In the June–August 2023 lean season, the magnitude of the food crisis in the Central Sahel is expected to slightly decrease, with 6.35 million people projected to face high

levels of acute food insecurity, reflecting a decline in the projections for Mali and western Niger. This is largely due to an improvement in food availability: in 2022, staple crop production in the Sahel was 20 percent above that of 2021.

However, and of extremely high concern, 19 860 people in the Sahel region of Burkina Faso and 1 670 in the region of Ménaka in Mali, are projected to be in Catastrophe (CH Phase 5) in conflict-affected areas experiencing lack of supply in markets and constrained access to livelihood activities, as well as limited humanitarian access (CH, November 2022).

Forced displacement reached new heights

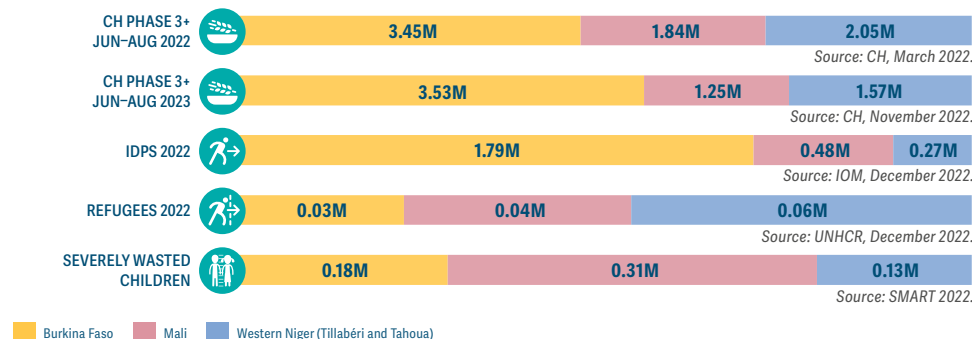
The increase in violent events between 2021 and 2022 resulted in new highs of forced displacement in 2022. By the end of the year, a total of about 2.6 million people were displaced, including 2.5 million IDPs and about 130 000 refugees, across Burkina Faso, Mali and western Niger.

In addition, 100 000 people from Mali were forced to seek refuge in Mauritania, most of them in the Mbera refugee camp in eastern Hodh Ech Chargui region (UNHCR, December 2022). A recent spillover of insecurity into northern parts of Benin, Côte d'Ivoire, Ghana and Togo has caused further cross-border displacements, with several thousand new arrivals of refugees recorded.

The large-scale displacement has had a significant negative impact on food availability and markets as the disruption to livelihoods continued to curtail local crop production and increase reliance of displaced households on markets for food in 2022, adding demand pressure to prices already affected by inflation. This was particularly the case in Burkina Faso and Mali, where prices of staple cereals reached abnormally high levels through 2022, up to 150 percent higher on a yearly basis at the end of the June–August lean season (FAO-GIEWS, September 2022).

Displacement has concentrated demand on limited natural resources in the Central Sahel, including agricultural land, pasture and water, for both displaced

Acute food insecurity, displacement and child wasting in the Central Sahel



and host communities, increasingly jeopardizing social cohesion and fuelling communal conflicts (OCHA, December 2022). High levels of forced displacement are expected to continue into 2023, with an emerging trend of Burkinabe seeking asylum in North Africa and Europe (UNHCR, November 2022).

An alarming nutrition situation

Malnutrition of children and women is driven by lack of access to and availability of social services, as well as violence, displacement, poverty and record-high food prices (PREGEC, November 2022). Around 4.36 million children under the age of 5 were expected to suffer from wasting in 2022, of whom 0.6 million were severely wasted (OCHA, December 2022).

Due to insecurity and violence, 222 health centres across the Central Sahel closed in 2022, depriving communities of access to healthcare. Closure of nutritional care centres disrupted ongoing nutritional programmes.

IDPs faced high levels of malnutrition, with wasting prevalence among children under 5 years above the 15 percent ('very high') WHO threshold in some areas of northern Burkina Faso (Rapid SMART, 2022).



The nutritional status of women and children in the Central Sahel has worsened over the last three years.

Food, nutrition and displacement crisis in the Lake Chad Basin

The security crisis in the Lake Chad Basin, covering the Extrême Nord region of Cameroon, western Chad, northeastern Nigeria and eastern Niger, has continued for over a decade, originating in the Boko Haram insurgency and underscored by climate change, poverty and underdevelopment.

The 2021–22 Human Development Report ranked three of these countries among the least developed of 191 countries worldwide: Nigeria ranking 163rd, the Niger 189th and Chad 190th, while Cameroon was classified with a medium level of human development, ranking 151st (UNDP, September 2022).

The insurgency is one of the world’s most protracted conflicts, marked by abductions, suicide attacks, forced religious conversion, forced and opportunistic recruitment, gender-based violence, human rights violations and difficult humanitarian access. This insecurity and associated internal and cross-border displacement have driven major food crises in this area of West Africa and the Sahel.

In the Lake Chad Basin, the number of people estimated to be in Crisis or worse (CH Phase 3 or above) reached about 5.3 million, including about 700 000 people in Emergency (CH Phase 4), in 2022 (CH March 2022). This is well above the estimated 2.9 million people in 2021 (CH, March 2021).

In addition to worsening security conditions and conflicts, the sharp deterioration of acute food insecurity in 2022 was underpinned by crop production shortfalls in the region in 2021 and heavy flooding from August to December 2022, which affected almost 2 million people in the Lake Chad Basin and displaced 600 000. High food prices coupled with a lack of livelihood opportunities severely constrained household purchasing power.

Approximately 80 percent of the people facing high levels of acute food insecurity were in three states of northeastern Nigeria: Adamawa, Borno and Yobe. During the 2022 peak, between July and August, 4.14 million people were estimated to face high levels of acute food insecurity, including about 590 000 people in Emergency (CH Phase 4). Of high concern, about 504 000 people in

CH Phase 3 or above were in areas with no humanitarian access. During the October–December 2022 period, about 3 000 people faced Catastrophe (CH Phase 5) in the Bama LGA in the Borno state (CH, March 2022).

In 2023, during the June–August lean season period the magnitude of the food crisis in the Lake Chad Basin is expected to increase in the affected areas of Cameroon, Chad and Nigeria, while it is expected to ease in the Diffa region in the Niger, partly driven by an improvement in security conditions. Together, 5.6 million people are projected to be in CH Phase 3 or above, including about 725 000 people in CH Phase 4 and 3 967 people in CH Phase 5, specifically in the inaccessible Bama local government area in Nigeria’s Borno state (CH, November 2022).

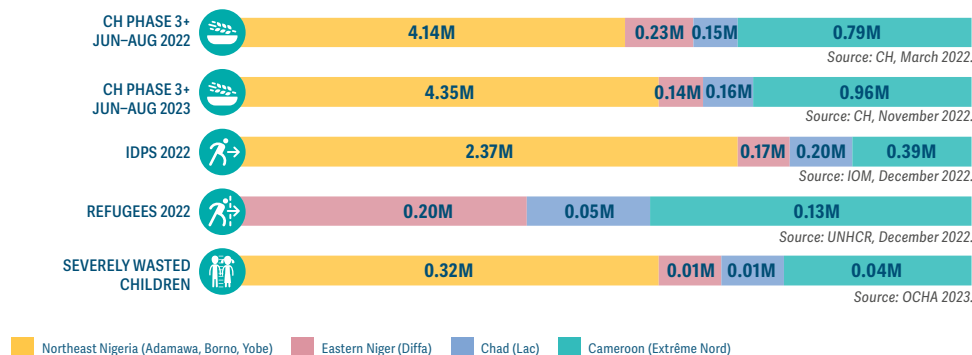
A displacement crisis

The protracted insurgency in the region has driven human rights violations and mass displacement. By the end of 2022, about 3.13 million people were internally displaced, with 2.37 million in Nigeria alone, and an additional 375 000 people were refugees, of whom over 200 000 were in the Niger, over 125 000 in Cameroon and about 50 000 in Chad (IOM, December 2022; UNHCR, December 2022).

An alarming nutrition situation

In the Lake Chad Basin, thousands of children are out of school and cut off from essential services. About 380 000 children under the age of 5 are severely wasted across the areas affected by this conflict in the four countries (OCHA, January 2023). Most of them are in northeastern Nigeria, where more than 1.3 million children were estimated to be suffering wasting and 152 000 pregnant and lactating mothers were acutely malnourished in 2022 (IPC June, 2022). Of particular concern is the fact that the delivery of humanitarian assistance has been hampered in inaccessible areas, particularly in Borno state.

Acute food insecurity, displacement and child wasting in the Lake Chad Basin

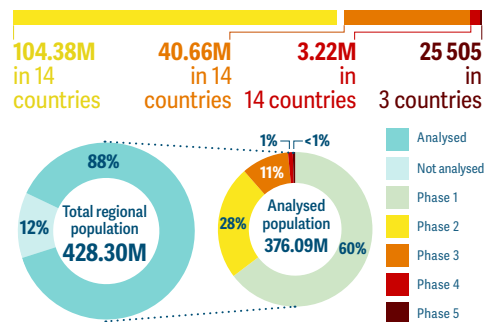


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Out of 2.3 million internally displaced people in northeastern Nigeria, 75 percent of them were in Borno state, where people continued to abandon their homes in 2022 because of the insurgency.

The severity of acute food insecurity is projected to rise in some conflict-affected countries in 2023

43.91M people or **11.7%** of the analysed population were estimated to be in CH Phase 3 or above, in 2023 in 14 countries*



* No projections available for Cabo Verde.
Source: Cadre Harmonisé, November 2022.

Populations in Catastrophe (CH Phase 5)

The severity of the food crisis in the region is expected to worsen, as about 25 500 people were projected to face the highest level of acute food insecurity, Catastrophe (CH Phase 5), during the upcoming 2023 lean season.

The populations expected to face Catastrophe (CH Phase 5) are in areas of Burkina Faso, Mali and Nigeria (26 states and FCT) severely affected by armed conflicts and with limited humanitarian access. In Burkina Faso, about 19 860 people are in four provinces, Oudalan, Séno, Soum, Yagha of the northern Sahel region. In Nigeria (26 states and FCT), about 3 960 people are in the Bama local government area (LGA) of the northeastern Borno state. In Mali, about 1 670 are in the region of Ménaka.

In June–August 2023, the number of people facing CH Phase 3 or above is projected to reach 43.91 million in 14 countries/territories (excluding Cabo Verde), the highest level since the start of the Cadre Harmonisé in 2013. These higher numbers are due to protracted conflicts and worsening insecurity, coupled with high inflation, high food prices and macroeconomic challenges, as well as increased analysis coverage, particularly in Nigeria (26 states and the FCT).

According to the November 2022 CH analyses, an estimated 2.46 million additional people are projected in CH Phase 3 or above in June–August 2023 compared with the 2022 peak which also reflects an 11 percent increase in the population analysed. About 3.22 million people are projected in Emergency (CH Phase 4) in 14 countries/territories of the region and about 25 500 people in Catastrophe (CH Phase 5) in three of them.

The increase in numbers of people in CH Phase 3 or above is projected in five of the 14 countries – Nigeria (26 states and the FCT), Burkina Faso, Senegal, Liberia and Gambia. The biggest increase is in Nigeria (26 states and the FCT), with almost 6 million more people in CH Phase 3 or above, although this might reflect that the analysis included five additional states with 34 million more people analysed. When considering the same 21 states and FCT covered in 2022 and June–August 2023, the increase in the population in CH Phase 3 or above is 3.8 million.

On the positive side, in nine countries – Cameroon, Chad, Ghana, Guinea, Mali, Mauritania, the Niger, Sierra Leone and Togo – the number of people projected to be in CH Phase 3 or above in 2023 is projected to decline, mostly driven by improved crop production in 2022 and an associated easing of price increases, which are expected to improve food availability and access.

The largest decline in the number of people in CH Phase 3 or above is projected in the Niger, with a 38 percent decrease, and in Mali (32 percent decrease). In both countries the coverage is comparable to 2022. However, in Mali, 1 671 people are projected to be in Catastrophe (CH Phase 5), driven by extremely poor security conditions in the Ménaka region.

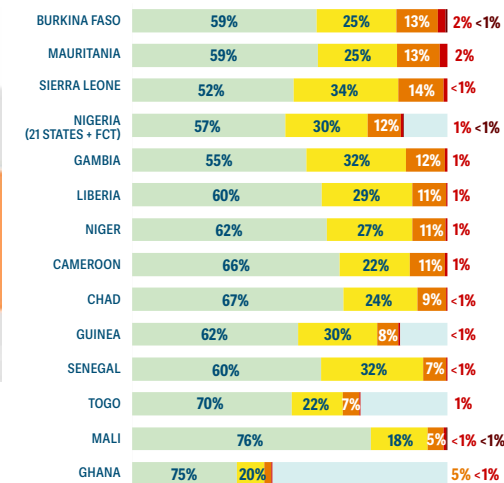
Projected numbers of people projected to be in CH Phase 3 or above, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, November 2022.

Share of analysed population by phase of acute food insecurity, June–August 2023



Source: Cadre Harmonisé, November 2022.

Conflict and insecurity are expected to remain the primary driver of acute food insecurity in the countries affected by the Central Sahel and the Lake Chad Basin security crises while economic shocks, compounded by the unfolding effects of the war in Ukraine, are likely to further erode the purchasing power and resilience of households elsewhere in the region.

Prices of staple foods are likely to remain well above their year-earlier levels, in spite of the good 2022 crop harvests, supported by persisting market disruptions, reduced cross-border trade, further currency depreciation and high international prices of commodities, including food, fuel and agricultural inputs.

The production of staple cereals is officially estimated at 76.4 million tonnes, 7 percent above the reduced level in 2021 (CILSS, November 2022).

Asia

Afghanistan | Bangladesh (Cox's Bazar) | Myanmar | Pakistan (Balochistan, Khyber Pakhtunkhwa and Sindh) | Sri Lanka

Widespread economic shocks, conflict and devastating weather extremes drove high levels of acute food insecurity in five countries in the region in 2022

51.3M people or **36%** of the analysed population faced high levels of acute food insecurity in 2022 in five countries

28.52M of them were in the two countries with IPC analyses, Afghanistan and Pakistan



In Afghanistan, no populations were in Catastrophe (IPC Phase 5) during November 2022–March 2023 peak period, but there were over 20 000 people in this phase in March–May 2022 (IPC, May 2022).

Source: HNO 2023 (Afghanistan); Pakistan IPC TWG, 2022.

22.75M people faced high levels of acute food insecurity in Bangladesh (Cox's Bazar), Myanmar and Sri Lanka

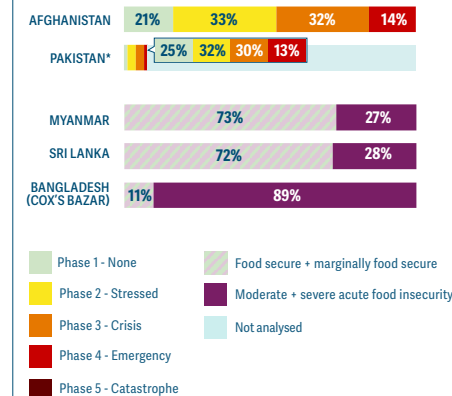
Source: JRP, 2023 (Bangladesh) based on ENA; HNO 2023 (Myanmar) based on rCARI; FAO/WFP, 2022 (Sri Lanka) based on WFP CARI.

Numbers of people in IPC Phase 3 or above or equivalent, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: IPC TWGs, 2022; HNO 2023 (Afghanistan and Myanmar); JRP, 2023 (Bangladesh); WFP CARI, 2022 (Sri Lanka).

Share of analysed population by phase of acute food insecurity, 2022



* Balochistan, Khyber Pakhtunkhwa and Sindh provinces.

Source: IPC TWGs, 2022 (Afghanistan and Pakistan); JRP, 2023 (Bangladesh) based on ENA; HNO 2023 (Myanmar) based on rCARI; FAO/WFP, 2022 (Sri Lanka) based on WFP CARI.

10 countries in this region were selected for inclusion.

Five countries had data gaps/evidence not meeting the GRFC requirements: Democratic People's Republic of Korea, Lao People's Democratic Republic, Nepal, Philippines and Tajikistan.

The five remaining countries included in the GRFC 2023 are major food crises (listed above).

In 2022, around 51 million people faced high levels of acute food insecurity in five major food-crisis countries in Asia. The increase in those countries from almost 29 million in 2021 was largely due to the inclusion of Myanmar and Sri Lanka and their categorization as major food crises for the first time in the GRFC, together accounting for over 21 million people facing high levels of acute food insecurity in 2022.

Afghanistan was Asia's largest food crisis, accounting for 39 percent of the region's population in the highest phases of acute food insecurity, followed by Myanmar, Pakistan, Sri Lanka and Cox's Bazar in Bangladesh.

In terms of severity, all five major food-crisis countries had more than quarter of their analysed populations in Crisis or worse (IPC Phase 3 or above) or equivalent. The highest share was in Afghanistan, where almost half (46 percent) of the total population faced high levels of acute food insecurity followed by Sri Lanka (28 percent) and Myanmar (27 percent).

The analysis for Pakistan only covered 9 percent of the country's population, of whom 43 percent were in IPC Phase 3 or above. The analysis for Bangladesh covered the Rohingya refugees and host community in Cox's Bazar, representing 1 percent of the country's

population, and found that 89 percent of them faced moderate or severe acute food insecurity.

Regional comparison with the previous year is limited to the three countries where data were also available in 2021 – Afghanistan, the three provinces of Pakistan and Bangladesh (Cox's Bazar). In Afghanistan, there was a decrease of 2.9 million people facing high levels of acute food insecurity to 19.9 million people, largely thanks to scaled-up efforts of humanitarian partners during the March–May lean season (HNO, 2023). In Pakistan, in the last quarter of 2022, the number of people in IPC Phase 3 or above reached 8.6 million in Balochistan,

Khyber Pakhtunkhwa and Sindh, nearly double that of the 2021 peak, largely due to the impact of floods on food production, prices and livelihoods and partially explained also by an increase of 1.2 million in the analysed population (IPC, December 2022). The number of Rohingya refugees estimated to face high levels of acute food insecurity in Cox’s Bazar, Bangladesh, has remained similar each year (1.28 million in 2022) since more than 700 000 sought refuge there in 2017 (JRP, March 2023).

Drivers of the crisis, 2022–23

Economic shocks were the primary driver in Afghanistan – shifting from conflict for the first time in the history of the GRFC – and in Sri Lanka. In these countries, 26.18 million people faced high levels of acute food insecurity.

Afghanistan’s conflict-driven economic crisis has deepened since the Taliban took control in August 2021, prompting the freezing of foreign financial reserves, which limited the country’s capacity to import food and other basic supplies and contributed to sharply rising food, fuel and fertilizer costs, while household incomes fell due to lack of income-generating opportunities and limitations on women’s employment.

In Sri Lanka, two years of economic turmoil were aggravated by the impacts of the war in Ukraine. Strong national currency depreciation coupled with dwindling foreign currency reserves curtailed the country’s capacity to import fuel, food and agricultural inputs, causing acute shortages, lower agricultural production and spikes in the prices of essential products (FAO/WFP, September 2022).

Annual food price inflation rates, December 2022

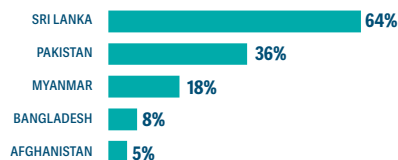


Figure for Myanmar as of July 2022. Source: WFP Economic Explorer, accessed 14 March 2023.

Economic shocks were a major driver of acute food insecurity in Myanmar and Pakistan too due to loss of jobs, currency devaluation and rampant inflation, aggravated by the war in Ukraine and conflict in Myanmar.

Conflict/insecurity was the primary driver of acute food insecurity in Bangladesh and Myanmar, where a total of 16.5 million people in both countries faced high levels of acute food insecurity. Worsening and widespread insecurity, mass displacement and movement restrictions on people throughout 2022 affected their ability to make a living or produce or access food (HNO 2023, January 2023).

While the overall security environment in Afghanistan improved in 2022, with the end of major hostilities and the consolidation of control by the de facto authorities (DFA), pockets of armed clashes and violence persisted, affecting livelihoods and access to basic services, and undermining the coping capacities of a population scarred by decades of conflict (HNO 2023, January 2023).

Weather extremes were the primary driver of acute food insecurity in Pakistan where 8.6 million were in IPC Phase 3 or above. Abnormal monsoon rainfall – nearly three times higher than the 30-year average – caused flash floods and landslides that affected more than 33 million people (IFRC, October 2022) causing widespread devastation in the agricultural and livestock sectors. Before the floods, heatwaves in March and April 2022 had affected ‘Rabi’ wheat crop yields (FAO-GIEWS, October 2022) and lowered livestock production (IPC, December 2022).

Weather extremes were the secondary but still significant driver of acute food insecurity in Afghanistan where 25 out of 34 provinces reported either severe or catastrophic drought conditions, contributing to the 2022 cereal output being about 12 percent below the five-year average (FAO, December 2022). Unseasonal flooding between July and September in 21 provinces disrupted agricultural livelihoods and damaged crops before harvest (HNO 2023, January 2023).

In Myanmar, torrential monsoon rains and flash flooding during the wet season further exposed crisis-affected and displaced people to loss of their livelihood sources (HNO 2023, January 2023).



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From June–October 2022, devastating flooding during the monsoon in Pakistan affected more than 33 million people and caused widespread destruction in the agricultural and livestock sectors.

Acute food insecurity projections, 2023

Projections for 2023 are largely unavailable for countries in the region but economic malaise including high food, fertilizer and fuel prices – along with transport and supply chain disruptions, devalued currencies and limited resources to respond to increasing social and economic demands – will continue to drive regional food insecurity.

There could be rising risks of civil unrest and riots over food and other resources (WFP, January 2023). Weather extremes, conflict in Myanmar and the repercussions of decades of conflict in Afghanistan will remain important drivers.

In Afghanistan, high levels of acute food insecurity are projected to remain at similar levels in early 2023. The analysis covered the period from November 2022–March 2023 with an estimated 19.9 million people in IPC Phase 3 or above, or 46 percent of the population, due to the simultaneous effects of winter and the lean season, sustained high food prices, reduced income

and unemployment, and continued economic decline (HNO 2023, January 2023).

No acute food insecurity projection data are available for Myanmar, but conflict dynamics are expected to remain at the same level or worse in 2023, especially in the northwest and southeast as well as across various parts of Rakhine, with continued new and protracted displacement extremely likely (HNO 2023, January 2023).

In Sri Lanka, there are concerns that small-scale and commercial farmers may significantly reduce the area planted with paddy during the 2022/23 ‘Maha’ season if the elevated costs of agricultural inputs prevail or increase further (FAO/WFP, September 2022).

In Pakistan, due to higher domestic energy prices, flood disruptions, high agricultural input costs and the weaker rupee, inflation is projected to rise to 23 percent in the year to the end of June 2023. A damage, loss and needs assessment estimated total flood damages to exceed USD 14.9 billion (WB, October 2022).

Acute food insecurity since 2016

A lack of data limits a more thorough regional analysis over time, as the number of countries selected for analysis and with acute food insecurity data available varied significantly year-on-year in the seven editions of the GRFC.

Only two countries in Asia have been consistently included as food crises in each edition of the GRFC – Afghanistan and Bangladesh – where the number of people in IPC Phase 3 or above or equivalent increased from 8.6 million to 21.1 million between 2020 and 2021, driven largely by Afghanistan’s worsening situation and changes in its base population estimates.

Afghanistan has always been classified as one of the ten worst food crises, with conflict/insecurity and drought as the main drivers. However, given the year-to-year difference in the number of people analysed, it is difficult to compare acute food insecurity levels across years, although in terms of severity, they have clearly deteriorated, with the proportion of people in IPC Phase 3 or above increasing from around 37 percent in 2019 to around 46 percent in 2022. In terms of area classification, the situation has deteriorated from no area classified in Emergency (IPC Phase 4) in 2016 to 17 in 2022.

Pakistan has been defined as a ‘major’ food crisis since 2017 when almost 3 million people representing 50 percent of the population in drought-affected districts of Balochistan and Sindh were in Crisis or worse (IPC Phase 3 or above). Low numbers of acutely food-insecure people in the past few years can be partly attributed to low geographical coverage. It became the ninth largest food crisis globally in 2021.

Sri Lanka has been selected for inclusion in the GRFC each year except 2019. However, acute food insecurity estimates were available only in 2017 and 2022.

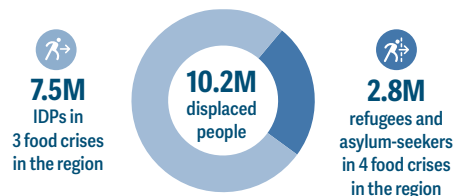
For the Rohingya refugee and host community populations in Cox’s Bazar, Bangladesh, changing analytical approaches and coverage challenge year-on-year comparisons, though numbers have remained at almost the same levels since 2018.

Many countries in the region that have been selected for inclusion in the report have had consistent data

gaps including Kyrgyzstan, the Lao People’s Democratic Republic, Nepal (data only for GRFC 2017 and 2018), the Democratic People’s Republic of Korea (data only available in GRFC 2017) and Tajikistan.

DISPLACEMENT

Number of forcibly displaced people, in four food-crisis countries, 2022



Source: UNHCR; IOM, December, 2022.

IDPs Of the 7.5 million IDPs in three food crises in the region, about 5.9 million were in Afghanistan, where the push factors shifted in 2022 from conflict to unemployment and poverty, followed by drought/rainfall deficits, and floods (WoAA, September 2022).

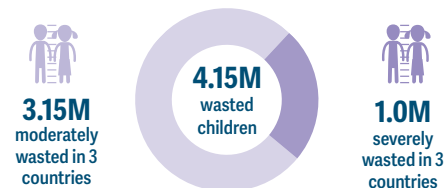
By the end of 2022, there were 1.5 million IDPs in Myanmar, of whom nearly 1.2 million were newly displaced by armed conflict and unrest since 1 February 2021. By the end of December, the number of IDPs in the northwest was five times that of early January (HNO 2023, January 2023).

In Sindh province of Pakistan, in December 2022 over 90 000 people were still living with host communities, or in tent cities and relief camps, months after flooding between June and August reportedly displaced around 8 million (OCHA, January 2023).

Refugees Nearly 2.8 million registered refugees are hosted in three countries in the region. There are around 1.78 million registered Afghans in Pakistan – one of the largest displaced populations in the world – with the number of arrivals increasing since the change of the regime in August 2021 (IOM, January 2023). Nearly 952 400 Rohingya refugees who escaped violence in Myanmar live in huge, overcrowded camps in Cox’s Bazar in Bangladesh. Approximately 52 300 refugees live in

NUTRITION

Number of children under 5 years old with wasting in three major food crises, 2022



Source: IPC (Afghanistan and Pakistan); HNO 2023 (Myanmar).

Out of the five food-crisis countries in the region, three had recent data on acute malnutrition: Afghanistan, Myanmar and Pakistan.

Most of the children under 5 years old suffering wasting in the region were in Afghanistan, where the number was estimated at 3.22 million, of whom about 875 000 were severely wasted. In addition, there were over 800 000 pregnant and lactating women suffering acute malnutrition and in need of urgent treatment (IPC, January 2023).

In Myanmar, about 290 000 children under 5 years old were wasted, including nearly 50 000 severely wasted (HNO 2023, December 2022).

In eight out of nine analysed districts of Sindh province in Pakistan, between April 2021 and February 2022 wasting levels were Critical (IPC AMN Phase 4) with 636 000 children under 5 years old estimated to be suffering from wasting, of whom 126 000 were severely wasted. In addition, nearly 38 000 pregnant and lactating women were acutely malnourished and in urgent need of treatment (IPC, October 2021). Following the unprecedented floods between June and October 2022, the acute malnutrition situation is expected to have worsened exponentially as around 4 million children were still living near contaminated and stagnant flood

waters in early January 2023, raising the risk of infectious diseases (UNICEF, January 2023).

In Cox’s Bazar, Bangladesh, data from 2021 SENS surveys already reported high wasting levels (10–15 percent) among Rohingya refugee children aged under 5 years living in the camps (UNICEF, March 2023). Ration cuts from March 2023 will likely reduce nutrient intake and put vulnerable people – especially young children and pregnant and lactating women – at increased risk of malnutrition and anaemia (MSF, March 2023).

High levels of child wasting (13.2 percent) recorded in Sri Lanka in 2021 were likely to have worsened in 2022 as the country’s severe economic crisis likely limited access to healthy and nutritious diets and poor nutrient intake (Medical Research Institute, January 2022). As of April 2022, the monthly cost of a nutritious diet (per household) increased by 156 percent (OCHA, October 2022), while nutrition supplements targeting wasted children and pregnant and lactating women were temporarily discontinued. While school meals were also discontinued or reduced in size, with improvement in the economic situation and bilateral and multilateral aid, much of the supplemental feeding and school feeding was back on track in 2023.

Latin America and the Caribbean

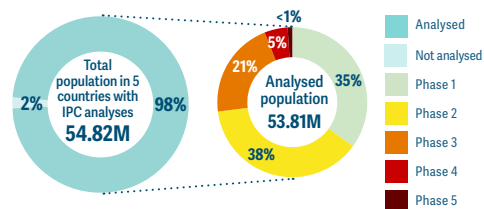
Colombia (refugees and migrants) | Dominican Republic | Ecuador (refugees and migrants) | El Salvador | Guatemala | Haiti | Honduras | Nicaragua

Acute food insecurity severely deteriorated in Haiti, while data became newly available for two additional food crises

17.8M people or **27%** of the analysed population facing high levels of acute food insecurity in 2022 in eight countries

14.43M of them are in five countries with IPC analyses

20.33M in 5 countries | 11.49M in 5 countries | 2.92M in 5 countries | 19 000 in 1 country



Source: IPC TWGs, 2022.

0.3M refugees and migrants in Ecuador, and **2.9M** in Colombia, faced moderate or severe acute food insecurity (WFP CARI, 2022).

In Nicaragua, **0.2M** people faced high levels of acute food insecurity (FEWS NET, 2023).

11 countries in this region were selected for inclusion

Four countries had data gaps/data not meeting GRFC requirements: Cuba, Ecuador (residents), Peru (residents, refugees and migrants) and Venezuela (Bolivarian Republic of). Five of the remaining countries are major food crises: Colombia (refugees and migrants), Dominican Republic, Guatemala, Haiti and Honduras. At the time of publication, the Government of El Salvador had not approved the IPC data and report prepared in August 2022.

Populations in Catastrophe (IPC Phase 5)

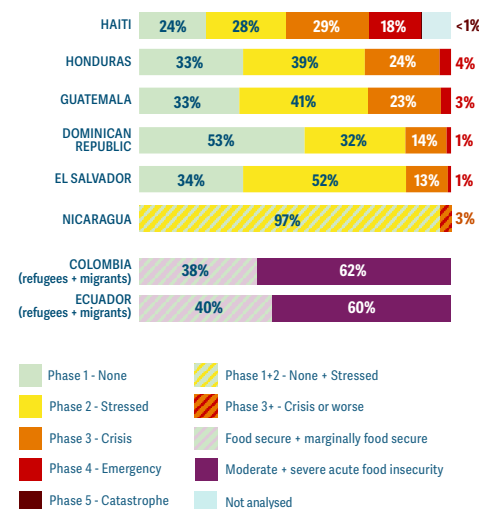
The severity of the food crisis in Haiti worsened in 2022, with about 19 000 people estimated to face Catastrophe (IPC Phase 5) between September 2022 and February 2023 in the Cité Soleil commune of the capital Port-au-Prince where acute food insecurity conditions have been deteriorating for three consecutive years. Gang violence and high levels of poverty severely constrained food access and availability due to lower market supplies, abnormally high prices, and physical constraints to access markets and engage in income-generating activities.

The number of people facing Crisis or worse (IPC Phase 3 or above) or equivalent reached 17.8 million or 27 percent of the analysed population in eight countries of the Latin America and the Caribbean region in 2022.

Haiti had the highest severity of acute food insecurity, with 48 percent of its analysed population in IPC Phase 3 or above – up from 46 percent in 2021. The number of people in Emergency (IPC Phase 4) in Haiti increased from an estimated 1.16 million during the 2021 peak in March–June (IPC, September 2020) to 1.81 million in September–February 2023, representing 18 percent of the analysed population (IPC, October 2022).

In Honduras and Guatemala, 26–28 percent of the resident population were in IPC Phase 3 or above. Regarding Venezuelan migrant and refugee populations, 60 percent in Ecuador and 62 percent in Colombia faced moderate or severe acute food insecurity as per WFP CARI methodology (WFP, 2023).

Share of analysed population by phase of acute food insecurity, 2022

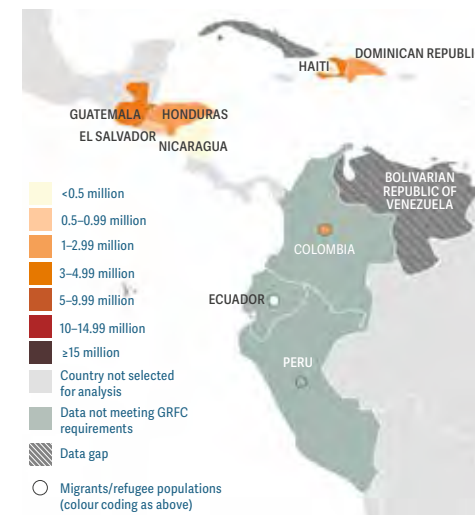


Source: IPC TWGs, 2022; FEWS NET (Nicaragua); WFP CARI (Colombia and Ecuador).

Haiti had the highest number of people facing high levels of acute food insecurity, at 4.72 million, 26 percent of the region's total number. Next were Guatemala (4.6 million), Honduras (2.64 million) and Dominican Republic (1.55 million).

Of concern, the Bolivarian Republic of Venezuela, the epicentre of the migrant crisis in the region, did not have any publicly available and nationally endorsed food insecurity data available in 2022.

Numbers of people in IPC Phase 3 or above or equivalent, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: IPC TWGs, 2022; FEWS NET (Nicaragua); WFP CARI (Colombia and Ecuador).

Three major food crises in the region – Colombia (refugees and migrants), Guatemala and Dominican Republic – are upper-middle-income countries, suggesting that they have greater capacity to cope compared with low- and middle-income major food-crisis countries or those facing an influx of refugees/migrants. However, in 2022 they faced high levels of acute food insecurity resulting from the increasing pressure from successive global economic shocks and the burden of protracted regional displacement combined with

national-level shocks such as weather extremes.

In the five countries also included in the GRFC 2022 – El Salvador, Guatemala, Haiti, Honduras and Nicaragua – the number of people facing high levels of acute food insecurity increased slightly from 12.76 million in 2021 to 13.08 million in 2022. At the country level, there was a year-on-year significant increase in the number of people facing high levels of acute food insecurity in Guatemala and in Haiti, while there were declines in Nicaragua, Honduras and El Salvador.

While not classified as major food crises, El Salvador had about 900 000 people or 14 percent of the analysed population projected to face IPC Phase 3 or above and Nicaragua had 200 000 people or 3 percent of the analysed population in these phases. In Ecuador, about 300 000 refugees and migrants faced moderate or severe acute food insecurity.

Drivers of the crisis, 2022–23

Economic shocks were the primary driver of acute food insecurity in all GRFC countries except for Haiti. In Colombia, Dominican Republic, El Salvador, Guatemala, Honduras and Nicaragua, reduced income opportunities eroded households’ purchasing power amid increasing macroeconomic challenges, exacerbated by the ripple effects of the war in Ukraine. Low-income households that rely on the informal sector continued to be

negatively impacted by the persisting economic impacts of the COVID-19 pandemic and severe weather hazards, mostly in Guatemala and Honduras.

As of December 2022, annual food inflation was particularly high in Haiti, estimated at 47.7 percent, and in Colombia at 27.8 percent, while in the other four countries it ranged between 10 and 16 percent, limiting economic access to food. A high reliance on imports of food, fertilizers and fuel combined with currency depreciation, mainly in Haiti and Colombia, added further upward pressure on food prices.

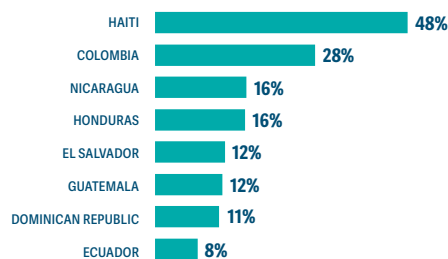
Conflict/insecurity was the main driver of acute food insecurity in Haiti. Increasing political instability, economic hardship and social tensions have led to heightened unrest and conflict. In 2022, gang violence reached extremely high levels especially in urban areas, disrupting markets and the movement of people and goods, thus severely hindering economic activity. This resulted in poor market supplies and shortages of essential commodities, including fuel, which contributed to sharp increases in food prices.

Weather extremes were not identified as the main driver of acute food insecurity in any country of the region but nonetheless did contribute in 2022.

In Haiti, below-average precipitation in some key cereal-producing departments, combined with high costs of agricultural inputs and shortages of fuel, led to a reduction in production of the main season crops and resulted in reduced availability of seeds for the 2022 minor fall and winter seasons.

In Honduras, the slow recovery of the agricultural sector from the impact of hurricanes Eta and Iota in 2020 and unfavourable weather conditions in some areas during the 2021 cropping season continued to affect rural livelihoods and limit food availability in 2022. During September 2022, floods and landslides caused by the rainy season affected more than 84 000 people (ECHO, October 2022). Dominican Republic was hit hard by Hurricane Fiona in September 2022. In Guatemala, Honduras and Nicaragua, heavy rains, strong winds and the passage of hurricane Julia in October 2022 resulted in flooding, landslides and localized damage in areas producing staple grain crops.

Annual food price inflation rates, December 2022



Source: WFP Economic Explorer, accessed 14 March 2023.

Acute food insecurity since 2016

In the five countries consistently included in the GRFC between 2017 and 2022 – El Salvador, Guatemala, Haiti, Honduras and Nicaragua – the estimated number of people facing high levels of acute food insecurity registered nearly a fourfold increase, in part due to almost a doubling in the analysis coverage. See figure, right.

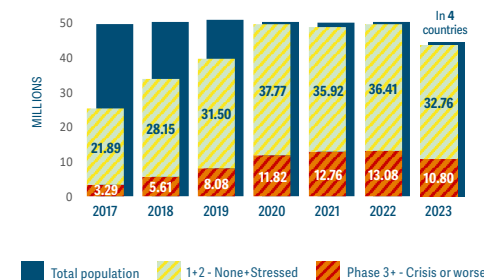
Between 2017 and 2019, the number of people in IPC Phase 3 or above increased by around 150 percent from 3.20 million to 8.08 million, with the analysed population increasing by nearly 60 percent. Between 2020 and 2022, when analyses covered at least 87 percent of the total population in these five countries, the number of people in IPC Phase 3 or above increased from 11.82 million to 13.08 million, mainly led by the increases in Guatemala and Haiti.

Between 2019 and 2021, Latin America experienced the largest increase in the prevalence of moderate and severe acute food insecurity compared with other regions of the world (ECLAC, FAO, WFP, December 2022).

A significant cause of the regional increase in the number of people in IPC Phase 3 or above, particularly since 2018, is the escalation of the humanitarian crisis in Haiti and inclusion of estimates for refugees and migrants from Venezuela (Bolivarian Republic of).

Since 2016, Guatemala, Haiti, Honduras and Nicaragua were consistently included as food crises and El Salvador was included in all editions but 2017. Estimates for national populations have been included only once for the Bolivarian Republic of Venezuela in 2019 and Dominican Republic in 2022.


Numbers of people by phase of acute food insecurity in five countries with data, 2017–2023




Countries with data each year since 2017: El Salvador, Guatemala, Haiti, Honduras and Nicaragua.

Source: IPC TWG, FEWS NET and WFP.

DISPLACEMENT

 IDPs In Haiti, widespread and increasing gang violence, together with a disastrous earthquake in August 2021, has triggered internal displacements. As of late 2022, there were about 155 000 IDPs, including 87 000 people newly displaced in the Metropolitan Area of Port-au-Prince, which faces high levels of acute food insecurity.

NUTRITION IN THE LAC REGION

 The lack of updated nutrition data continues to impede a comprehensive assessment of the situation in Latin America amid growing concerns about increasing cases of wasted children – mostly among refugees and migrants – albeit not at the levels seen in other food-crisis contexts. Migrant populations face elevated levels of acute food insecurity, challenges caring for young children, and limited access to health services, which are all contributing factors to child wasting.

In Haiti, the prevalence of wasting in 2021 was of ‘medium’ severity, according to WHO thresholds, but by 2022 it was ‘very high’ in urban areas that were severely affected by gang violence, where approximately 20 percent of children under 5 years were suffering from wasting. Of them 5 percent were severely wasted (UNICEF, August 2022). Increasing levels of acute food insecurity in 2022 and the cholera outbreak were expected to have further exacerbated the already fragile nutrition situation in many parts of the country (UNICEF, December 2022).

Focus on the regional migrant crisis



Venezuelans continued to leave the Bolivarian Republic of Venezuela, with cross-border displacement aggravated by onward movements from host countries, often through perilous journeys (UNHCR, March 2023).

Since 2015, nearly 7.2 million migrants, refugees and asylum-seekers have left the Bolivarian Republic of Venezuela (R4V, January 2023) driven by a challenging political, socioeconomic and human rights situation. By the end of 2022, an estimated 6.03 million refugees and migrants were hosted in Latin America and the Caribbean (Regional Refugee and Migrant Response Plan (RMRP) 2023–2024, November 2022).

In host countries across the region, the increasing cost of living, post COVID-19 impacts, the economic impacts of the war in Ukraine, lack of documentation, the irregular status of refugees and migrants, and high unemployment severely curtailed livelihoods and increased food insecurity in 2022. According to the regional response plan covering 17 countries, over 73 percent of migrants and refugees are in need of external assistance (RMRP 2023–2024, November 2022).

In Colombia, Ecuador and Peru, which together host about 75 percent of the refugees and migrants from the Bolivarian Republic of Venezuela in the region, severe economic shocks have affected the capacity of

the governments to provide food assistance to both acutely food-insecure nationals and migrants, prompting countries to request external assistance in 2022. This is why these three countries were considered for inclusion for the first time in the GRFC.

In Colombia, there were about 2.5 million refugees and migrants with intention to settle and an additional 2.3 million pendular and in-transit migrants, as of December 2022 (R4V, January 2023), as well as nearly 1 million Colombian returnees from the Bolivarian Republic of Venezuela. Many are exposed to violence and are at high risk of forced recruitment and human trafficking (RMNA, October 2022). In Ecuador, about half a million Venezuelans (R4V, January 2023) have an irregular status, which affects their access to services and formal employment while in transit (RMRP 2023–2024, November 2022).

In Peru, about 80 percent of the 1.5 million refugees and migrants (R4V, January 2023) relied primarily on the informal sector for income generation. The salaries of migrants were estimated to be 20 percent lower than

Numbers of Venezuelan migrants, refugees and asylum-seekers with intention to settle



Source: Regional Inter-agency Coordination Platform, January 2023.

those offered to Peruvians. Those engaged in creating their own economic activities struggled to access credit and expand their businesses (RMNA, October 2022).

The worsening food insecurity situation coupled with limited access to WASH and healthcare poses a nutrition challenge to refugees and migrants, on top of the increasing cost of living and high poverty levels. Even though wasting levels among the refugee and migrant children under 5 is below 5 percent across Latin America and the Caribbean, it reached 13.4 percent in Brazil. In Colombia, about 22.8 percent of pendular migrant children under 5 were stunted and 37.3 percent were anaemic. In addition, nearly a quarter of pregnant refugees and migrants in Colombia were undernourished and/or anaemic (RMNA, October 2022).

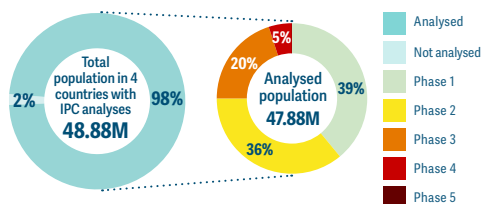
At the regional level the number of people facing high levels of acute food insecurity was projected to decline

Up to **12.3M** people or **23%** of the analysed population were projected to be in IPC Phase 3 or above in 2023 in five countries*

12.1M of them are in four countries with IPC analyses



In Haiti, no populations were in Catastrophe (IPC Phase 5) during March–June 2023, but 19 206 people were in this phase in September 2022–February 2023.



Source: IPC TWGs, 2022 and 2023.

In Nicaragua, 0.1–0.25M people were projected to face high levels of acute food insecurity (FEWS NET, January 2023).

* No projections available for El Salvador or refugees and migrants in Colombia and Ecuador.

The number of people in IPC Phase 3 or above in Latin America and the Caribbean was projected to decline overall, with a marginal increase in Haiti and a decrease in Guatemala and Honduras in 2023.

Up to 12.35 million people or around 22.8 percent of the analysed populations in five countries are projected to face high levels of acute food insecurity in 2023 – over 1.37 million people fewer than the same five countries in 2022. Around 2.43 million people are projected to be in Emergency (IPC Phase 4) in four of them.

At country level there was no major change in coverage of the analysed populations between 2022 and 2023.

In Haiti, the percentage of the analysed population in IPC Phase 3 or above was projected to increase from 48 percent in 2022 to 49 percent in March–June 2023 or 4.9 million people, including 1.8 million in Emergency (IPC Phase 4), reflecting persisting insecurity and gang violence, coupled with high food prices and poor economic activity (IPC, March 2023). Despite the increase in the magnitude of the food crisis, populations in Port-au-Prince are no longer projected to be in Catastrophe (IPC Phase 5) (IPC, March 2023).

In Dominican Republic, the acute food insecurity projection period straddled 2022 and 2023 and thus was the same for both years (IPC, January 2023).

In Guatemala, the total population was analysed in both 2022 and 2023, but a projection analysis extending to the typical lean season was not available. The magnitude and severity of acute food insecurity was projected to decline from 4.6 million people or 26 percent of the population during the lean season between June and September 2022 to 3.24 million people or 19 percent of the total population between October 2022 and February 2023 (IPC, June 2022).

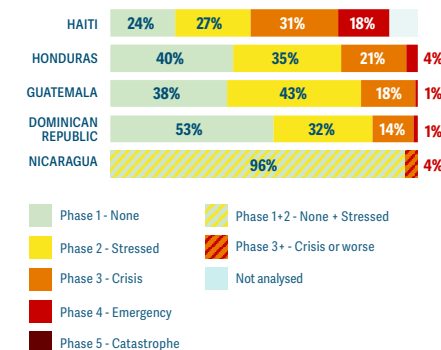
The improvement reflects better household access

to food due to increased income opportunities for agricultural labourers, who rely on daily wages, during the harvest of cash crops, such as sugarcane, cardamom and coffee (IPC, June 2022). However, the improvement was expected to be short-lived, as households face persistently high debts, low levels of food stocks and extended market reliance during a time of above-average prices (FEWS NET, October 2022).

In Honduras, the analysis covered the entire country in both 2022 and 2023 and the number of people in IPC Phase 3 or above was projected to decline to 2.42 million or 25 percent of the population between June and August 2023, compared with 2.64 million people or 28 percent of the population between June and August 2022. Reduced household purchasing power amid increasing prices of food and lower income-generating opportunities are factors expected to underpin the high levels of acute food insecurity (IPC, January 2023).

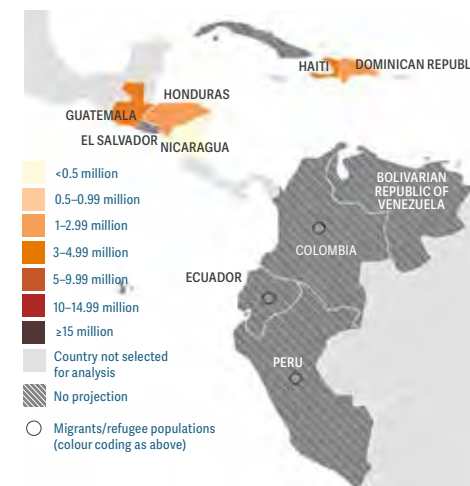
In Nicaragua, the number of people facing high levels of acute food insecurity between June and August 2023 was projected to be between 100 000 and 250 000, reflecting persistent economic difficulties and the lingering effects of weather shocks (FEWS NET, January 2023).

Share of analysed population by phase of acute food insecurity, 2023



Source: IPC TWGs, 2022–2023; FEWS NET (Nicaragua).

Numbers of people in IPC Phase 3 or above or equivalent, 2023




The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: IPC TWGs, 2022 and 2023; FEWS NET, 2023 (Nicaragua).

Middle East and North Africa

Algeria (Sahrawi refugees) | Iraq (IDPs and returnees) | Jordan (Syrian refugees) | Lebanon (Lebanese residents and Syrian refugees) | Libya | Palestine | Syrian Arab Republic | Yemen

Continued conflict in Yemen and the Syrian Arab Republic and deepening economic crises across the region drove high levels of acute food insecurity in 2022

 **34.1M** people facing high levels of acute food insecurity in 2022 in 8 countries/territories

19.35M of them are in two countries* with IPC analyses



* Lebanese residents and Syrian refugees.
Source: IPC TWGs (Lebanon and Yemen), 2022.

14.74M of them are in six countries/territories without IPC analyses

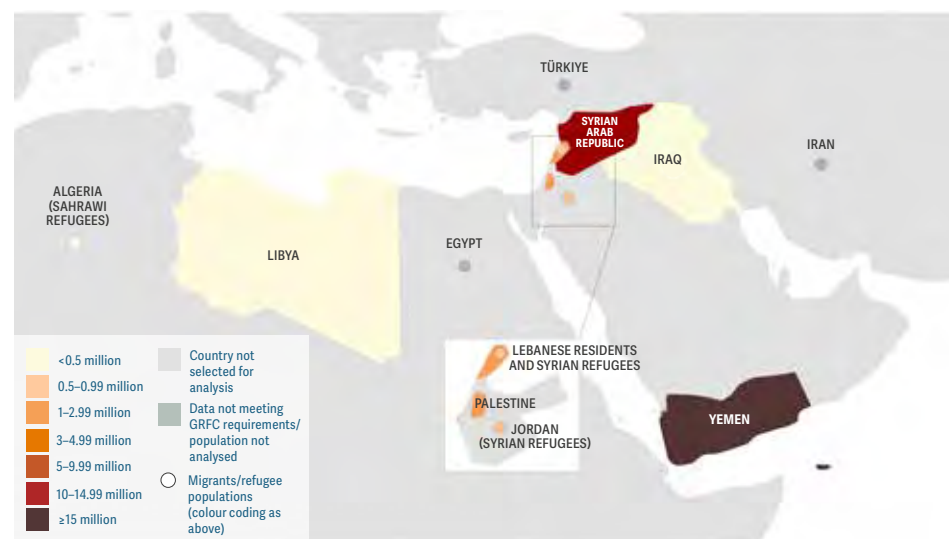
Source: HNO 2023 (Libya, Palestine and Syrian Arab Republic); HTO 2023 (Iraq); WFP CARI (Algeria and Jordan).

11 countries in this region were selected. Three countries had data gaps/data not meeting GRFC requirements: Egypt, Iran and Türkiye. Four of the eight remaining countries/territories included in the GRFC 2023 are major food crises: Lebanon (host and refugee populations), Palestine, Syrian Arab Republic and Yemen.

About 34.1 million people faced high levels of acute food insecurity in eight countries/territories in the Middle East and North Africa (MENA) region in 2022, up from 31.9 million in 2021. When considering only the countries/territories with data available in both years, there were an additional 1 million people experiencing high levels of acute food insecurity.

Yemen and the Syrian Arab Republic hosted around 86 percent of the region's population facing high levels of acute food insecurity and continued to be among the world's largest protracted food crises in 2022. In these

Numbers of people in IPC Phase 3 or above or equivalent, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: IPC TWGs, 2022; HNO 2023 (Libya, Palestine and Syrian Arab Republic); HTO 2023 (Iraq); WFP (Algeria and Jordan).

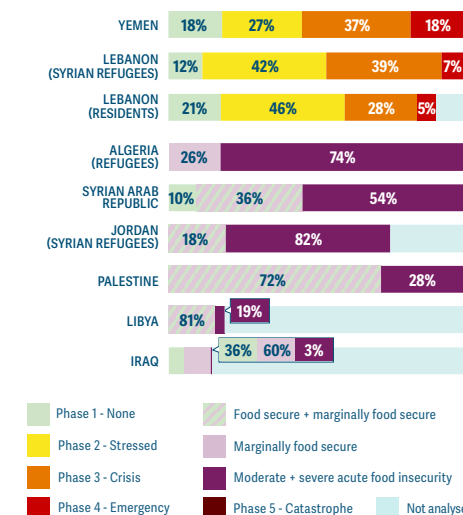
two countries, the number of people facing high levels of acute food insecurity increased from 28.15 million in 2021 to 29.43 million in 2022.

This increase was attributable to an additional 1 million people in Crisis or worse (IPC Phase 3 or above) in Yemen between the first five months of 2021 and the same period in 2022, bringing the total to over 17 million people or 55 percent of the population, the highest share since 2017 (60 percent) (GRFC 2018). Around 31 000 people were in Catastrophe (IPC Phase 5) in Hajjah governorate (IPC, March 2022). In the Syrian Arab Republic, the

number of acutely food-insecure people in need of urgent assistance remained persistently high at around 12 million, representing 55 percent of the population, due to macroeconomic instability, the continuing hostilities and the compounding effects of adverse weather.

The two other major food crises in the region, each with at least 1 million people facing high levels of acute food insecurity, were Lebanese residents and Syrian refugees in **Lebanon and Palestine**. After these, the highest numbers were among Syrian refugees in Jordan, forcibly displaced populations in Libya and Iraq, and

Share of analysed population by phase of acute food insecurity, 2022



Source: IPC TWGs, 2022; HNO 2023 (Libya, Palestine and Syrian Arab Republic); HTO 2023 (Iraq); WFP (Algeria and Jordan).

Sahrawi refugees in Algeria. The region saw changes in the analysis coverage between 2021 and 2022, with only the Syrian Arab Republic and Yemen using the same methodology and coverage. In Lebanon, only refugees were covered in 2021 while the resident population was analysed for the first time in 2022. In Libya and Iraq, where the economies are benefiting from increasing oil prices, the analyses only focused on the displaced populations for whom the host governments sought external assistance.

Out of 11 countries/territories selected for inclusion in

the region, data were either unavailable or did not meet GRFC requirements for Syrian refugees in Egypt and Türkiye, and Afghan refugees in Iran.

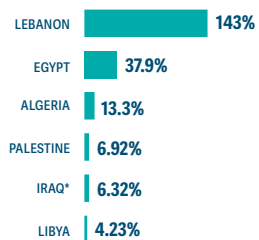
Acute food insecurity projection 2023

A projection for 2023 was only available for Lebanese residents and Syrian refugees in **Lebanon**, where food insecurity is expected to worsen.

The IPC acute food insecurity analysis conducted in September 2022 projected that, between January and April 2023, about 2.26 million people (1.46 million Lebanese residents and 0.8 million Syrian refugees), corresponding to 42 percent of the analysed population, would be in IPC Phase 3 or above, driven by further deterioration of the economic situation and rampant inflation. The number of people in Emergency (IPC Phase 4) was expected to increase from 306 000 to 354 000 (IPC, December 2022).

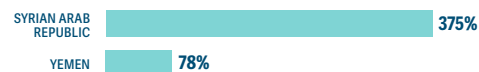
Even before the earthquakes struck on 6 February 2023,

Annual food price inflation rates, December 2022



*Figure for Iraq as of November 2022.
Source: WFP Economic Explorer, accessed 14 March 2023.

Increase in cost of food basket, December 2022



Food price inflation data were unavailable for Syrian Arab Republic and Yemen. In this chart WFP food basket data compares the three months to December 2022 with the five-year average for this time period.
Source: WFP Global Market Monitor, accessed 9 March 2023.

the food security outlook for the **Syrian Arab Republic** was precarious with an additional 2.9 million people estimated to be at risk of acute food insecurity (HNO, December 2022).

Prices of imported foods and fuels are expected to continue to be volatile through 2023, which will weigh heavily on households' purchasing power (HNO, December 2022). In the northeast, the low level of the Euphrates River is restricting the power supply for water pumps, exacerbating water shortages. Some 500 000 people in Al-Hasakeh and surrounding areas face critical drinking water shortages (ECHO, March 2023).

In **Yemen**, despite the slight scale-up in food assistance in recent months, millions of households are likely facing food consumption gaps due to significantly above-average prices of food and essential non-food commodities alongside sharing of assistance benefits. Poor households are expected to be affected by further food and fuel price increases, and rural households in highland areas to experience seasonally declining access to income during the local agricultural off-season in February and March. Overall, Crisis (IPC Phase 3) outcomes are expected to remain widespread and Emergency (IPC Phase 4) outcomes were expected to persist in Marib and emerge in Hajjah in February/March due to gradually re-escalating conflict and large populations of displaced households who are highly dependent on assistance (FEWS NET, January 2023).

Drivers of the crisis, 2022–23

Conflict/insecurity remained the primary driver of acute food insecurity in Yemen and Palestine, and for forcibly displaced populations in Jordan, Libya and Algeria, accounting for almost 20 million people in IPC Phase 3 or above or equivalent.

Nine years of conflict in Yemen have led to the collapse of economic activities, erosion of livelihood opportunities and incomes, and extremely high levels of forced displacement, depriving people of the resources to cope with or to withstand additional shocks. Despite some easing in the security situation after parties agreed on a truce from April–October 2022, violence continued to constrain humanitarian access in the most

Regional impact of the war in Ukraine



The economic effects of the war in Ukraine significantly impacted food security in the MENA region. Egypt, Lebanon, Libya, the Syrian Arab Republic and Yemen were reliant on imports of wheat and wheat flour, the main staple cereal in the region, and other foodstuffs including sunflower oil, and were among the global top importers of these commodities from the Russian Federation and Ukraine in 2020 and 2021. This exposed them to the disruptions of trade flows from that region in early 2022 (UNCTAD, April 2022; FAO, June 2022).

Factors such as high international grain and transport prices, logistical bottlenecks, more expensive alternative import sources, and reduced production or export bans implemented by some major exporting

countries, increased import bills. This negatively affected the balance of trade in MENA countries/territories, dwindling their foreign exchange reserves and driving further currency depreciation. In Palestine, Libya and Yemen, over 85 percent of staple grains are imported (FAOSTAT, 2023). The high regional dependency on food imports due to low agricultural production was exacerbated by persistent conflict in many countries and dryness in 2022, increasing their vulnerability to global market fluctuations.

Although oil-producing Iraq benefited from rising oil revenues due to increased global prices, which substantially contributed to the expansion of the government's fiscal space, the socioeconomic situation remained fragile (WFP, 2022).

affected areas.

In Palestine, recurrent hostilities – higher than in 2021 – continued to restrict agricultural activities and access to resources, reducing national food production and increasing reliance on food imports. The cumulative effects of a 15-year economic blockade in the Gaza Strip and expansion of settlements and settler activities in the West Bank contributed to extremely high unemployment rates and high debt levels, mainly to access food (MSNA, September 2022).

For the first time in the history of the report, conflict was considered the secondary rather than primary driver of acute food insecurity in the Syrian Arab Republic where security improved across most areas. However, intensifying violence in October–December 2022 in the northwest and northeast, especially Idlib and Aleppo governorates, continued to destroy livelihoods, cause displacement and hinder humanitarian assistance (HNO, December 2022).



Economic shocks were the primary driver in the Syrian Arab Republic and Lebanon, where over 14 million people faced high levels of acute food insecurity. Many countries/territories in the MENA region continued to battle economic collapse driven by political instability, and declining exports because of a sluggish global economy. Lebanon has faced a multifaceted political and economic crisis since 2019, while 11 years of conflict in the Syrian Arab Republic has led to the collapse of many economic activities. Currency depreciation, notably in these two countries, has resulted in rampant headline inflation. As a result, soaring food and fuel prices, amid falling incomes, rising unemployment and high levels of debt, severely constrained households' ability to meet basic needs.



Weather extremes were not considered a primary driver of acute food insecurity in the region in 2022, but they were a contributor in all countries/territories. Persistent dryness in the main rainfed producing areas of the Syrian Arab Republic and Iraq reduced domestic cereal production in 2022, pushing up regional cereal import requirements in 2022/23.

In Yemen, where agriculture is a crucial source of rural income, moderate to severe drought conditions with unprecedented temperature rises during the first half of the year followed by heavy rainfalls in August 2022 that triggered floods, had a widespread negative impact on cropped areas (IPC, October 2022).

Acute food insecurity since 2016

The Syrian Arab Republic and Yemen have consistently been among the seven crises with the highest number of people in Crisis or worse (IPC Phase 3 or above) or equivalent in all seven editions of the GRFC, while Palestine has been included as a major food crisis in all editions except the GRFC 2017.

Yemen has faced a constant increase in the numbers of people in IPC Phase 3 or above since 2020 and has had populations in Catastrophe (IPC Phase 5) every year since 2018, with the highest figure being reported in December 2018–January 2019 (64 000 people). The population in IPC Phase 3 or above has exceeded half of the country's population in all years but 2020 (45 percent).

In the Syrian Arab Republic, the number of highly acutely food-insecure people in need of urgent assistance increased from 6.5 million in 2018 to 12.4 million (60 percent of the population) by November 2020. This was due to a change in assessment methodology, as well as protracted conflict leading to further displacement and macroeconomic challenges including high unemployment and increasing food prices.

Iraq and Libya (two significant oil producing countries) have been identified as food crises each year. By 2022, acute food insecurity primarily affected displaced populations.

NUTRITION

In conflict-afflicted Yemen and the Syrian Arab Republic, acute malnutrition among children under 5 years worsened due to high levels of acute food insecurity, severely restricted access to health facilities, low immunization coverage, lack of drinking water, high levels of infectious diseases, inadequate child-feeding practices and instability of humanitarian assistance.

Number of children under 5 years old with wasting, in four* major food crises, 2022



* Lebanon (host and refugee population), Palestine, Syrian Arab Republic and Yemen.

Source: IPC and SMART 2021 and 2022.

Most of the region's wasted children were in Yemen where the number was estimated at 2.2 million in 2022, including 0.54 million severely wasted. In addition, about 1.3 million pregnant and lactating women were experiencing acute malnutrition in 2022 (IPC, November 2022). In the Syrian Arab Republic in 2022, about 363 600 children were suffering from wasting, including 75 700 severely wasted children, representing a significant deterioration compared with estimated levels in 2021, while about 544 800 pregnant and lactating women suffered from moderate acute malnutrition in 2022, including about 460 100 suffering from anaemia (HNO 2023, December 2022).

Although the acute food insecurity crises in Lebanon and Palestine have not yet resulted in high numbers of wasted children, micronutrient deficiencies and suboptimal feeding practices were widespread. Both countries/territories have overstretched health systems and insufficient access to safe and sufficient water for drinking and domestic use with a potentially harmful impact on child nutrition. Following a cholera outbreak in the Syrian Arab Republic, Lebanon reported its first case in October 2022 (OCHA, January 2023).

In northwestern areas of the Syrian Arab Republic, the February 2023 earthquakes were expected to further jeopardize the health, nutrition and wellbeing of an estimated 2.5 million children and their families (UNICEF, February 2023).



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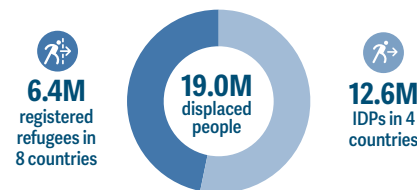
Levels of child wasting in Yemen are continuing to increase amid high levels of acute food insecurity, infectious diseases and inadequate child-feeding practices.

DISPLACEMENT

The MENA region is a complex map of internal and cross-border conflict-driven displacement. By the end of 2022, 19 million people had been forcibly displaced in eight food-crisis countries/territories across the region.

Of them, 12.6 million were internally displaced in four countries – the Syrian Arab Republic (6.8 million), Yemen (4.5 million), Iraq (1.2 million) and Libya (0.13 million) – while 6.4 million in the eight food crises of the region were living as refugees/asylum-seekers. This includes 2.4 million Syrian refugees in Lebanon, Jordan, Iraq and Libya, and over 3 million Palestine refugees in the Gaza strip, the West Bank, the Syrian Arab Republic, Lebanon and Jordan. In Lebanon, by the end of 2022, about 0.81 million were registered with UNHCR. However, the Government of Lebanon estimates that the country hosts 1.5 million Syrians who have fled the conflict in

Number of forcibly displaced people, 2022

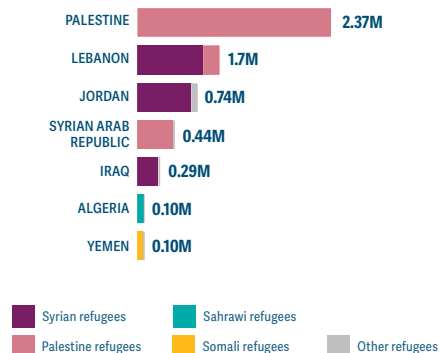


Source: UNHCR and IOM, December 2022.

the Syrian Arab Republic, along with 211 000 Palestine refugees (3RP, January 2023).

In Libya, IOM's DTM programme identified around 694 400 migrants from over 42 nationalities during November–December 2022 (IOM, December 2022).

Seven food-crisis countries/territories in MENA hosted 5.74M registered refugees by end 2022



Source: UNHCR and UNWRA, December 2022.

Algeria has hosted Sahrawi refugees for over 45 years, and UNHCR estimates that around 90 000 live in five isolated camps near Tindouf where they face limited livelihood opportunities and harsh environmental conditions (UNHCR, 2022). Due to the critical shortage of funding, minimum humanitarian standards cannot be met in most sectors, and most refugees are believed to live below the poverty line (UNHCR, 2023). Nearly 100 000 refugees residing in Yemen, mainly from Somalia, endure overcrowded spaces without access to water or sanitation, particularly in urban areas (HNO 2023, December 2022).

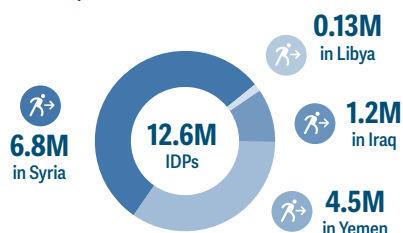
For IDPs and refugees, the consequences of protracted displacement are aggravated by worsening socioeconomic conditions in host countries, pushing these already vulnerable populations further into poverty and despair. The lingering socioeconomic impacts of COVID-19, loss of livelihoods, high unemployment, inflation and increased social tensions in some countries, are all adding to a grim outlook across the region.

Legal barriers to formal employment in many countries have severely affected refugees' capacity to become self-reliant. Informal sector work has plummeted, and refugees must compete with host communities for the limited number of jobs on offer (3RP, January 2023).



Rescuers search for victims and survivors amid the rubble following the major earthquake in Jindires, Aleppo.

Number of IDPs in three countries with food crises, 2022



Source: IOM, December 2022; HNO 2023 (Yemen), December 2022..

The limited capacity or lack of access to social safety nets in some countries has resulted in more families falling below the poverty line and having to resort to harmful coping strategies including meal reduction, and child labour and marriage (3RP, January 2023).

The war in Ukraine is drawing attention away from other crises that are also affected by it, including the MENA region that is witnessing a concurrent crisis, leading to a reduction in assistance and increasing needs among refugees and their vulnerable host communities (3RP, January 2023). For instance, between January and March 2023, the level of food and basic need assistance is expected to be reduced by up to 20 percent due to overstretched aid budgets (IPC, December 2022).

The earthquakes – another displacement emergency

The earthquakes that devastated southeast Türkiye and the northwest of the Syrian Arab Republic on 6 February 2023, killing over 50 000 people, displaced an estimated 2.7 million people in Türkiye (IOM, March 2023) with over 1.9 million living in temporary accommodation shelters in early March (UN, March 2023).

The earthquakes impacted 11 provinces in the East,

Southeast and Mediterranean (ESEM) region of Türkiye, where 1.8 million Syrian refugees were living. Of the 7.1 million people living in hard-hit areas, 11 percent are Syrian refugees (IOM, March 2023).

In the northwest of the Syrian Arab Republic, prior to the earthquake, 64 percent of the population of 4.5 million people were already internally displaced and living in extremely harsh conditions in shelters that were ill-equipped for winter. Around 1.9 million of them were living in camps (OCHA, March 2023).

The earthquakes resulted in additional displacement due to destroyed, damaged or unsafe shelter. While it is difficult to accurately measure displacement at present, according to the UN, more than 500 000 people are believed to have been forced from their homes by the earthquakes in Greater Idlib and Northern Aleppo (UN, March 2023).

A REACH Rapid Needs Assessment of key informants across Greater Idlib and Northern Aleppo between 9 February and 11 February 2023 estimated that 85 percent of communities were either directly impacted by the earthquake or witnessed new IDP arrivals (REACH, February 2023).

Mercy Corps reported that acute food insecurity is deteriorating in the northwest of the Syrian Arab Republic, with people reporting they cannot afford food due to limited cash availability and increasing food prices. The lack of access to clean water from damaged water networks, storage tanks and latrines is forcing people to resort to poor hygiene practices or drinking unclean water, aggravating the pre-existing cholera outbreak with more than 50 000 cases reported in northwestern areas as of 1 March (Mercy Corps, March 2023).

Spotlight | Countries of concern with data gaps

Since data gaps prevent GRFC partners from reporting on the full range of countries of concern, the number of people facing high levels of acute food insecurity and acute malnutrition in food crises is likely higher than the estimates included in the GRFC 2023.

Out of the 73 countries/territories initially identified as potential food crises for the GRFC 2023, 17 were not included either because:

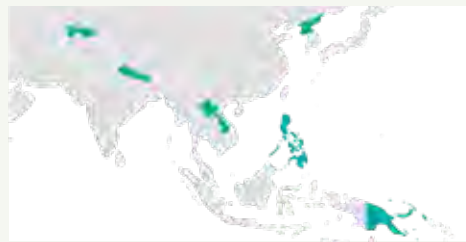
- ✘ data were not available (five countries) or
- ! the evidence did not meet the GRFC requirements (11 countries).

However, this marks a significant improvement since the GRFC 2022 when 24 countries/territories were omitted because of data gaps. These included Lebanon, Myanmar and Sri Lanka, which are included as major food crises in the GRFC 2023.

The 17 countries profiled in this Spotlight have been identified by the international community as having populations of concern through UN coordinated appeals or response plans in 2022, hence, likely to have populations facing high levels of acute food insecurity.

Nutrition data is also missing for these countries.

Seven countries had data gaps in Asia



✘ Democratic People's Republic of Korea

Information on acute food insecurity in the Democratic People's Republic of Korea is challenging to obtain. Data from 2021 already suggested a fragile food and nutrition situation (ECHO, March 2023), and there are indications that the situation is worsening. Low water supply due to historically low snow cover, and rainfall deficits in southern agricultural areas in April and May may have affected spring production, although forecasts for July–September 2022 suggested average growing conditions (WFP, June 2022). Throughout 2022 border closures and prolonged quarantine measures on imports as a result of COVID-19 resulted in critical shortages of basic goods, including medicine. Trade with the People's Republic of China decreased by up to 90 percent in 2021 compared with 2019 (ACAPS, June 2022). In March 2023, the country requested food assistance from WFP but it has not been provided due to disagreement on monitoring access (UNSC, March 2023).

! Lao People's Democratic Republic

Unfavourable weather conditions and expensive agricultural inputs resulted in a 4 percent below-average paddy production in 2022. Household food insecurity has worsened, particularly in rural areas where food consumption was worse than in urban areas. The cost of food has increased, a result of high production and transport costs: annual food inflation reached 47.1 percent by January 2023 and an estimated one in four

households had decreased incomes year-on-year, making it difficult to face the increasing cost of living. One in five households consume inadequate diets according to the food consumption score (FCS). Food insecurity is expected to deteriorate during the lean season from May to October 2023, or even earlier depending on the evolution of the macroeconomic situation and severity of coping strategies adopted (CFSAM, March 2023).

! Nepal

Household food consumption had been improving since 2020, but this trend changed in October 2022, when almost 18 percent of households had poor or borderline food consumption score (FCS). The worsening food insecurity is due to rising food prices and limited household incomes. Around a third of households have reduced incomes, and, by October a quarter of Nepalis relied on purchasing less expensive foods (WFP, October 2022). By the end of 2022, annual inflation measured by the Consumer Price Index was 7.4 percent. Fuel inflation was higher at 47.1 percent, with diesel and petrol by 47.1 and 30.9 percent higher, respectively (WFP, December 2022).

! Papua New Guinea

Between May and July 2022, violence escalated in parts of the Highlands region and, in December 2022, the IOM-DTM identified a total of 31 481 IDPs (IOM, December 2022). Violence is linked to national elections that also stoked long-standing tensions around land and clan tensions. Due to the insecurity, needs assessments could not be conducted (UNCT, August 2022).

The country is challenged with a triple burden of malnutrition (undernutrition, overweight and obesity and micronutrient deficiencies) and a vulnerable agriculture sector on which over 80 percent of the rural population depends (UNCT, August 2022). In 2022, drought conditions in four provinces affected water levels, crop production and thus food consumption. Combined with the earthquake that occurred in October 2022, these factors led to food scarcity and water borne diseases,

such as diarrhoea and typhoid (UNCT, October 2022). As of February 2023, the provinces of Bougainville and New Ireland remained in critical drought conditions, while the provinces of East New Britain and Enga were in drought alert levels (UNCT, February 2023).

! The Republic of the Philippines

The Republic of the Philippines is prone to natural disasters, especially typhoons. Super Typhoon Rai made nine landfalls in December 2021. In the six worst-hit regions, the typhoon affected around 9.9 million people of whom about 2.4 million needed assistance across all sectors. To complement the government's response, external assistance targeted 840 000 people primarily in the most-affected central-southern areas (OCHA, February 2022).

Food insecurity correlates strongly with poverty, both of which are worst in the Bangsamoro Administrative Region in Muslim Mindanao (BARMM). Headline inflation hit 7.7 percent in October and over half of Philippine households were concerned about increased food prices. Sixty percent of surveyed households reported coping by adopting food consumption-based strategies, mostly buying less expensive food. Around 74 percent of households reported resorting to livelihoods-based coping strategies, including borrowing money for food or purchasing food on credit (WFP, October 2022).

! Tajikistan

Tajikistan's economy was significantly impacted by the COVID-19 pandemic and recovery has been hampered by the war in Ukraine (World Bank). The international sanctions imposed on the Russian Federation – to which Tajikistan's economy is closely tied – have resulted in reduced trade and remittances, which account for around 30 percent of Tajikistan's GDP (World Bank). By the end of 2022, there were around 8 450 Afghan refugees in the country (UNHCR) and clashes along the border with Kyrgyzstan were reported (IFRC, October 2022).

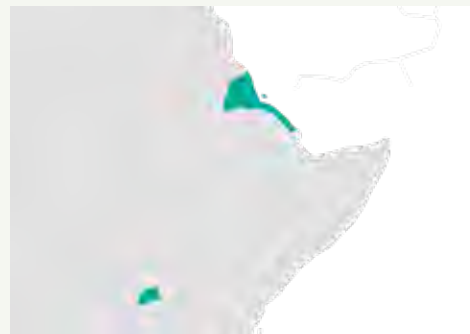
In August 2021, high acute food insecurity affected

19 percent of Tajik households as per the WFP CARI indicator. Over a quarter of households reported coping by reducing expenditures on health and/or education and about 60 percent reported allocating over half of their income to food purchases. In 2023, it was projected that the situation would worsen to 36 percent of the population facing high acute food insecurity due to the loss of remittances and food price increases as per CARI methodology (WFP, April 2022). An IPC analysis was conducted in January 2023, and its results will be reported on in the GRFC 2023 Mid-Year Update.

! Tonga

The Kingdom of Tonga is extremely vulnerable due to the adverse effects of climate change and natural disasters. On January 15, 2022, the eruption of the underwater Hunga Tonga-Hunga Ha'apai volcano and subsequent tsunami caused damages to the economy estimated at USD 182 million, more than 36 percent of national GDP (World Bank, March 2023), and food crop losses amounted to USD 17 million (FAO, February 2022). These damages exacerbated acute food insecurity on the island, as roughly 88 percent of Tonga's population lives in rural areas and is dependent on agriculture and fisheries (IFAD, 2022).

Two countries had data gaps in East Africa



✕ Eritrea

There is little information on food security conditions in Eritrea due to limited availability and access to official data as well as constraints to humanitarian actors to conduct assessments (OCHA, accessed 11 April 2022). In early 2022, there were initial concerns about a third consecutive poor rainy season, but the July–September rainfall amounts were adequate and led to an increase in Eritrea's wheat harvest (FAO, December 2022).

! Rwanda (refugees)

Rwanda has long hosted refugees. As of December 2022, around 127 000 people were registered with UNHCR in Rwanda, mainly from the Democratic Republic of the Congo (60 percent) and Burundi (40 percent) (UNHCR, December 2022). Due to the conflict and unrest in eastern Democratic Republic of the Congo, Congolese asylum seekers continue to flee to Rwanda. According to the 2022 Post Distribution Monitoring preliminary report, about 19 percent of refugees living in camps reported adopting negative coping mechanisms, driven by food insecurity. The country has been hard hit by inflation, with food prices surging by 54 percent between June 2021 and June 2022. This had a detrimental effect on refugee populations as it increased the gap between the assistance provided and what families needed to meet basic needs (UNHCR, February 2023).

Five countries had data gaps in Latin America and the Caribbean



✕ Bolivarian Republic of Venezuela

In the Bolivarian Republic of Venezuela, humanitarian partners plan to provide around 2 million people with food security and livelihood assistance in 2022–2023 (OCHA, August 2022). There is a lack of data on the country's food insecurity situation, but the most recent evidence suggests that total food availability has improved due to increased local production and imports (FAS, September 2022). Food access, however, remains a major barrier to food security due to elevated food prices and constrained household purchasing power (WFP/FAO, September 2022). At 234 percent, inflation remained extremely high in 2022, albeit lower than in 2021 when it reached 686 percent (Reuters, January 2023).

According to the Center for Research and Analysis of the Venezuelan Teachers' Federation (Cendas-FVM), in July 2022, the monthly cost of the basic food basket (60 food products for a typical family of 4.5 members) was USD 459.84, which represented a year-on-year increase of 102.7 percent. According to data from the Venezuelan Observatory of Finance (OVF), in July 2022, the average monthly income was USD 118.40, covering only 25.7 percent of the cost of the basic food basket (FAS, September 2022). This difficult economic climate means that outflows of refugees and migrants are expected to continue in 2023. According to the Regional Refugee and Migrant Response Plan 2023–2024, the number of Venezuelan refugees and migrants in need of food

assistance is estimated at 3.62 million in 2023, slightly up from the 3.57 million in 2022 (FAO-GIEWS, March 2023).

✕ Colombia

With the aim of understanding the magnitude and severity of acute food insecurity and to orient evidence-based policies to revert food-crisis conditions, the government of Colombia, which is hosting around 2.5 million Venezuelan migrants with intention to settle, supported an IPC analysis for the first time in 2022 following several years of socioeconomic deterioration. While this represents significant progress towards reducing data gaps, at the time of publication the findings of the analysis carried out among Colombian residents and migrants from the Bolivarian Republic of Venezuela were still under review. The GRFC 2023 includes data from a WFP Emergency Food Security Assessment among Venezuelan migrants but does not include data for Colombian residents.

However, there are clear indications that acute food insecurity estimates indicate a poor situation among Colombian residents in 2022 following three years of macroeconomic challenges largely linked to the COVID-19 pandemic as well as structural issues, exacerbated by the ripple economic effects of the war in Ukraine, armed conflict, internal displacement and weather extremes. WFP food security assessments conducted in November 2022 highlighted that the most acutely food-insecure populations include Colombian victims of the armed conflict, ethnic groups (particularly afro-descendant and indigenous populations) and women-headed households.

Although the unemployment rate decreased for the second year in a row, it remained high at over 10 percent in 2022 (DANE, January 2023). Over 50 percent of Venezuelan migrant households and 35 percent of Colombian households reported a year-on-year decline in income in 2022 (WFP, November 2022). Household purchasing power diminished as inflation rose steadily throughout 2022, primarily driven by food inflation, which reached 27.8 percent by the end of the year (DANE, January 2023). Sharp currency depreciation exacerbated high domestic food prices as about 85 percent of the country's cereal consumption needs are usually covered by imports (FAO GIEWS, December 2022). In additional

high international fertilizer prices (over 30 percent of imports of fertilizers were sourced from the Russian Federation in recent years) led to higher prices of agricultural inputs in 2022 (CEPAL, FAO and WFP, 2022) adding pressure on food prices.

Insecurity increased with the expanded presence of non-state armed groups, disrupting rural livelihoods, limiting access to humanitarian actors, curbing agricultural production and hampering the delivery of food assistance in most affected areas. Between 2021 and 2022, the number of IDPs increased by 12 percent to reach 5.2 million and the number of people affected by forced confinements increased by 56 percent (OCHA, March 2023).

Weather extremes – mainly flooding and landslides associated with La Niña – affected about 0.62 million people by December 2022 mainly in the departments of Antioquia, La Guajira, Bolívar and Chocó, which further constrained food access and availability for populations with already high poverty levels (OCHA, March 2023).

✕ Cuba

The intersection of economic and financial challenges has resulted in food availability and access challenges in Cuba. The lingering effects of the COVID-19 pandemic, the embargo and the 2021 monetary reform have led to an increase in food prices that has reduced vulnerable households' purchasing power and limited access to food (WFP, July 2022). In November 2022, the official annual rate of food inflation was estimated to be 63 percent. In 2022, the country's ability to import critical food and fuel commodities continued to be constrained by high international prices, which reduced domestic supply and curtailed the availability of agricultural inputs (FAO-GIEWS, January 2023). In September 2022, the category 4 hurricane Ian damaged housing, water infrastructure and facilities that store or distribute food, as well as thousands of hectares of crops, particularly in the Pinar del Rio province (IFRC, December 2022).

✕ Ecuador

Inflationary pressures continued to build in 2022, driven by higher food and transport prices and non-tradeable services (IMF, December 2022). Annual food inflation stood at nearly 8 percent in December 2022 (WFP, April 2023), as elevated international commodity prices exerted strong upward pressure on domestic markets (FAO GIEWS, March 2023). These increases created food access issues in Ecuador and led to a rise in social unrest and acute food insecurity among nationals and migrants (WFP, March 2023).

! Peru (refugees and migrants)

As of early 2023 more than 1.5 million asylum-seekers, refugees and migrants had found refuge in Peru, mainly in Lima and Callao (UNHCR, December 2022). High levels of acute food insecurity, based on WFP rCARI methodology, are driven by low access to reliable income sources. Some do not have a valid regular stay permit, which limits their rights and access to essential services, and impedes socioeconomic integration and access to livelihood opportunities (RMRP, December 2022). Almost 80 percent of Venezuelan migrants and refugees are forced to be informally employed, due to absence of legal documentation. This inability to find regular work is further heightened by negative social and xenophobic perceptions as well as reduction of employment opportunities (Danish Refugee Council, August 2022).

In June 2022, the inflation rate in Peru reached 8.81 percent, the highest level in 26 years, and did not fall below 8.28 percent during any month of 2022 (Trading Economics, accessed 12 April 2022). The increased prices of essential foods have left refugees and migrants particularly vulnerable to food insecurity.

Three countries had data gaps in Middle East and North Africa



! Egypt (Syrian refugees)

As of December 2022, there were an estimated 289 000 refugees in Egypt, including 146 000 Syrian refugees (UNHCR, December 2022). Refugees and asylum seekers in Egypt often reside in overcrowded neighbourhoods, where the host community struggles with substandard living conditions and high unemployment rates. Some 84 percent of refugees live below the national poverty line and face extreme challenges accessing basic services, such as healthcare. The continued influx of refugees and migrants coincides with Egypt's worst economic recession in decades with dramatic price increases for food and utilities worsening living conditions for the most vulnerable population (ECHO, July 2022).

All Syrian refugees in Egypt were estimated to be in need of assistance in 2022. Around 82 percent of them reported relying on less preferred and less expensive foods, 63 percent reported reducing the number and portions of meals per day, while 44 percent reported reducing adults' food consumption to allow for children to eat (3RP, May 2022).

! The Islamic Republic of Iran (Afghan refugees)

The Islamic Republic of Iran hosted around 750 000 registered refugees at the beginning of 2023 (UNHCR, December 2022). The Afghanistan Refugee Response Plan targets 2.2 million Afghans (refugees and asylum-seekers) as well as the host community (UNHCR, March 2023). Food prices in country increased

by over 50 percent between May 2021 and May 2022, complicating access to food. Global inflationary pressures have played a significant role in this respect – in a typical year, the Russian Federation and Ukraine accounted for approximately 60 percent of the country's supply of staples such as wheat, sunflower oil and maize. The annual inflation reached 53.4 percent in February 2023 (Trading Economics, April 2023).

! Türkiye

Türkiye hosts the world's largest refugee population for the ninth consecutive year with close to 4 million refugees and asylum-seekers of whom around 3.6 million are from the Syrian Arab Republic, around 144 000 from Afghanistan and 142 000 from Iraq (UNHCR, December 2022). An estimated 70 percent are children and women.

Syrian refugees registered in the country have access to national services and can apply for working permits but, due to difficulties in obtaining formal employment, many work in informal sectors. According to the latest Inter-Agency Protection Sector Needs Assessment, 90 percent of refugees cannot fully cover their monthly expenses or basic needs, while 94 percent have reduced food consumption and borrowed money to cope with food consumption gaps (UNHCR, September 2022).

The latest figures from the Turkish Statistical Institute indicate an annual food inflation rate of 71 percent in January 2023, down from the record levels of 90–100 percent between April and November 2022 (FAO-GIEWS, March 2023). Economic deterioration is expected to continue in 2023 with rising inflation and depreciation of the Turkish lira. In February 2023, earthquakes in the east of the country put further strain households that lost their homes again.

The poverty rate in Türkiye is projected to remain above pre-2019 levels due to the persistently high inflation which predominantly affects the poor. There are also concerns about an increase in tensions between refugees and host communities linked to economic challenges and elections in 2023 (3RP, February 2023).



CHAPTER 3

MAJOR FOOD CRISES IN 2022

Introduction

Of the 58 countries/territories included in the GRFC 2023, 42 are defined as 'major' food crises as the situation is of high concern either in terms of magnitude, prevalence or severity. See *Technical Notes*.

This chapter provides a deeper focus on each of these countries/territories, highlighting the levels of acute food insecurity, including year-on-year changes and seven-year trends where data allow, the geographical distribution of populations facing high levels of acute food insecurity, and the main drivers and characteristics of each crisis.

Inclusion criteria

In GRFC 2023, countries/territories were selected for analysis in chapter 3 based on meeting one or more of the following criteria in 2022:

- at least 20% of the country population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
- at least 1 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
- any area in Emergency (IPC/CH Phase 4) or above
- included in the IASC humanitarian system-wide emergency response-level 3

Countries/territories identified as major food crises in the GRFC, 2017–2023

7 years	19 countries/territories	Afghanistan, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Ethiopia, Haiti, Madagascar, Malawi, Mozambique, Niger, Nigeria, Somalia, South Sudan, Sudan, Syrian Arab Republic, Yemen, Zimbabwe
6 years	7 countries/territories	Bangladesh, Burundi, Guatemala, Kenya, Pakistan, Palestine, Uganda
5 years	3 countries	Burkina Faso, Honduras, Lesotho
4 years	5 countries	Angola, Iraq, Mali, Namibia, Zambia
3 years	5 countries	Djibouti, El Salvador, Sierra Leone, Ukraine, United Republic of Tanzania
2 years	1 countries	South Africa
Once	1 countries	Colombia (refugees and migrants), Democratic People's Republic of Korea, Guinea, Lebanon, Mauritania, Myanmar, Sri Lanka, Venezuela (Bolivarian Republic of)

Differences since 2021

The number of countries/territories in this section has increased from 35 to 42 since the GRFC 2022.

Ukraine became part of the list of IASC level 3 emergencies in 2022.

Colombia (refugees and migrants), **Dominican Republic** and **Lebanon** (resident population) were added to the list as data were available for the first time in GRFC history.

Myanmar and **Sri Lanka** had data available in other editions of GRFC but are only defined as major food crises for the first time in the GRFC 2023.

Guinea and **Mauritania** are included as major food crises for the first time since the levels of acute food insecurity were higher than those reported in 2021, and they were above the inclusion thresholds.

The **United Republic of Tanzania** became a major food crisis again in 2022, after not reaching the one million threshold in the GRFC 2022.

Conversely, **Lesotho** and **El Salvador** are not included as major food crises as acute food insecurity did not meet any of the inclusion criteria.

Major food crises by income level and Human Development Index (HDI) ranking

Low income	HDI ranking	Lower-middle income	HDI ranking
Afghanistan	180	Angola	148
Burkina Faso	184	Bangladesh	129
Burundi	187	Cameroon	151
Central African Republic	188	Eswatini	144
Chad	190	Haiti	163
Democratic Republic of the Congo	179	Honduras	137
Ethiopia	175	Kenya	152
Guinea	182	Lebanon	112
Madagascar	173	Mauritania	158
Malawi	169	Myanmar	149
Mali	186	Nigeria	163
Mozambique	185	Pakistan	161
Niger	189	Palestine	106
Sierra Leone	181	Sri Lanka	73
Somalia	-	Ukraine	77
South Sudan	191	United Republic of Tanzania	160
Sudan	172	Zimbabwe	146
Syrian Arab Republic	150		
Uganda	166	Upper-middle income	HDI ranking
Yemen	183	Colombia	88
Zambia	154	Dominican Republic	80
		Guatemala	135
		Namibia	139

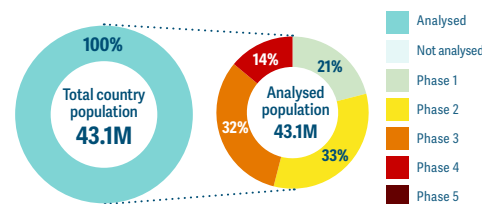
Afghanistan

ACUTE FOOD INSECURITY PEAK 2022/23

19.90M people or **46%** of the analysed population in IPC Phase 3 or above, November 2022–March 2023



Although no populations were in Catastrophe (IPC Phase 5) during November 2022–March 2023, there were over 20 000 people in this phase in March–May 2022 (IPC, May 2022).



IPC acute food insecurity situation, November 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: HNO 2023, January 2023.

Food crisis overview

Between November 2022 and March 2023, 19.9 million people were estimated to be in Crisis or worse (IPC Phase 3 or above), representing 46 percent of the country's population. This included about 6 million people facing Emergency (IPC Phase 4).

This is an improvement compared with the 22.81 million people (55 percent of the population) estimated to face high levels of acute food insecurity during the same period one year earlier, though the numbers of people in these phases remain among the highest reported in the world.

Out of the country's 34 provinces, 12 were classified in IPC Phase 4, while the rest were in IPC Phase 3. Approximately 3.9 million people living in urban centres (47 percent of the assessed urban population) were in IPC Phase 3 or above (HNO 2023, January 2023).

The current estimate, which represents the peak for

both 2022 and 2023, reflects a persisting and alarming acute food insecurity situation, underpinned by the lingering impact of decades of conflict on livelihoods, reduced food availability during the winter and the lean season, and sustained high food prices, amid persisting macroeconomic challenges, including reduced income-generating opportunities and high unemployment.

Acute food insecurity since 2016

Afghanistan has been included in all the GRFC editions and always classified as one of the ten worst food crises, with conflict/insecurity and drought as the main drivers.

In terms of magnitude, it is difficult to compare food insecurity levels due to changes in base population estimates and population analysed; in terms of severity, the situation is clearly deteriorating, with the prevalence of people in IPC Phase 3 or above increasing from around 26 percent in 2017 to around 42 percent in 2020 and 46 percent in 2023. In terms of area classification, the situation has constantly deteriorated from no

area classified in Emergency (IPC Phase 4) in 2017 to 17 in 2022, of which 13 were rural and four urban. The provinces of Daykundi, Badakhshan and Nuristan have been classified in IPC Phase 4 in every year since 2018, and Badghis in every year since 2017 except for 2019.

Areas that until 2017 were classified in IPC Phase 2, such as the provinces of Balkh and Jawzjan, were in IPC Phase 4 in 2022.

Drivers of the crisis, 2022–23

Economic shocks Following the Taliban's takeover in August 2021, Afghanistan's economy went into free-fall during the remainder of 2021 and 2022, with the freezing of foreign financial reserves, subsequent currency, trade and banking crises, and the suspension of direct development aid. All these elements had accounted for about 75 percent of public expenditure prior to the takeover. The lack of in-country capital reserves thwarted the country's capacity to import food and other basic supplies (HNO 2023, January 2023).

According to data collected between 30 July and 4 September 2022, more than half of households reported having experienced an economic shock in the previous six months, rising to 81 percent in the southern region. Nearly 90 percent of households reported having limited access to food, which pushed about 75 percent of them to resort to taking on debt to meet their food requirements (WoAA, September 2022).

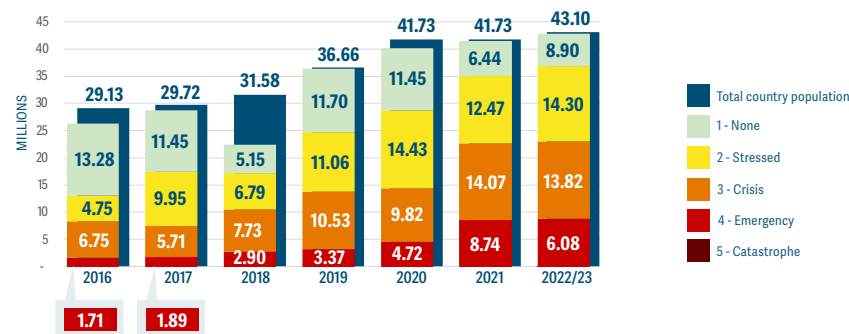
In July 2022, the average price of a litre of diesel across all 34 provincial capitals was more than 100 percent higher than the previous year (WFP, July 2022), while fertilizer prices remained elevated.

The cost of WFP's food basket peaked in June 2022 when it was more than 40 percent higher than the previous June before decreasing (WFP, November 2022).

Nevertheless, in January 2023, it remained 6 percent higher year-on-year (WFP, January 2023).

At the same time, monthly household income across

Numbers of people by phase of acute food insecurity, 2016–2023




2019–2022 population estimates are based on Flowminder. Previous IPC reports (as well as the GRFC) employed National Statistics and Information Agency of Afghanistan (NSIA) population estimates.

See Appendix 1, figure 1 for datasets from all analysis rounds between 2019 and 2023.

Source: Afghanistan IPC TWG; HNO 2023, January 2023.

all population groups declined by 17 percent between 2021 and 2022 (HNO 2023, January 2023). Pre-existing gender disparities, the economic crisis, and new restrictions on women's employment and movement critically affected women's ability to earn an income (CARE, August 2022). Restrictions on women's employment mean that women were over three times more impacted than men by loss of employment, with female employment in the fourth quarter of 2022 estimated to be 25 percent lower than in the second quarter of 2021 (ILO, March 2023).

According to the NSIA, annual headline inflation averaged 13.7 percent in 2022 and declined to 5.2 percent by the end of the year. The local currency stabilized from March 2022, after a sharp devaluation triggered by the Taliban takeover, reflecting a stabilization of economic activity as well as an increase in remittances inflows, which are expected to support household food access in 2023.

 **Weather extremes** As of December 2022, Afghanistan was experiencing the first triple-dip impact of La Niña since 1998–2001. The proportion of households feeling the impact of drought was six times greater than in 2020 (WFP, February 2023). Analysis conducted using the Joint Intersectoral Analysis Framework (JIAF) shows that 25 out of 34 provinces reported either severe or catastrophic drought conditions, with over 73 percent of rural households and 24 percent of urban households affected (HNO 2023, January 2023).

Unseasonal flooding between July and September in 21 provinces in the southern and southeastern regions disrupted agricultural livelihoods and damaged crops before harvest (HNO 2023, January 2023).


While precipitation was somewhat favourable at the start of the winter wet season in October and November, it was minimal in December, resulting in cumulative precipitation deficits in early winter (October to December) (FEWS NET, December 2022).


The cereal output in Afghanistan was estimated at about 4 percent below the previous year's already drought-affected harvest and 12 percent below the five-year average (FAO, December 2022). In addition to the reduced wheat yields from the 2022 harvests, anticipated shortfalls in 2023 are likely to further impact food security

conditions in 2023. As of late February, the snow water equivalent was below normal over higher elevations in the northeast and central parts of the country (GEOGLAM, March 2023). Extreme cold damaged farmlands in Badakhshan province and resulted in livestock losses (WFP, January 2023).

 **Conflict/insecurity** The overall security environment improved in 2022 with the end of major hostilities and the consolidation of control by Afghanistan's de facto authorities (DFA). According to the 2022 WoAA, the reported experience of conflict in the six months prior to data collection reduced sharply from 60 percent in 2021 to 5 percent in 2022 (WoAA, September 2022).


However, pockets of armed clashes and violence persisted, especially in Panjshir, Samangan and Sar-e-Pul provinces, affecting livelihoods and access to basic services, and undermining the coping capacities of an already vulnerable population (HNO 2023, January 2023).

 **Natural disasters** Afghanistan is prone to earthquakes and three major ones in 2022 caused loss of life and damage to property in Badghis province in January, Paktika and Khost in June, and Kunar in September (HNO 2023, January 2023).

 **Livestock diseases and crop pests** More than 70 percent of Afghanistan's largely rural population keep livestock for livelihood diversification. In the absence of adequate vaccination campaigns, lumpy skin disease affected many cattle-owning households in 2022 leading to lower meat production and reduced milk yields (FAO, February 2023).

As the outbreaks continue in 2023 and in the absence of scaled-up vaccination campaigns, livestock body conditions and production are also expected at below-average levels in 2023 (HNO 2023, January 2023). In addition, localized locust outbreaks are projected in March 2023 due to the impact of La Niña in the region and observations of egg-laying in June–August 2022 (HNO 2023, January 2023).

DISPLACEMENT

 **IDPs** In Afghanistan, an estimated 5.89 million people were internally displaced by the first half of 2022. About 1.4 million were displaced in 2021 and an additional 0.4 million in the first four months of 2022 (IOM, July 2022). The new displacements were driven by conflict and poor security conditions in 2021 and economic shocks coupled with weather hazards in 2022, including dry spells and floods.

Approximately 690 000 people are expected to be displaced in 2023 – about 80 000 from conflict, 233 000 from natural disasters including drought, and the remaining 378 000 by a combination of economic stress, natural disaster, conflict and protection challenges (HNO 2023, January 2023).

Over one-third of IDPs are hosted by a family, just under one-third own their home and another third rent. Around 5 percent live in informal settlements (IOM DTM, April 2022).

Displaced households, particularly in urban areas, struggle to pay rent and find it hard to access services and earn livelihoods, particularly women. Land and housing without the threat of eviction and disputes with host communities are difficult to find. Consequently, many live in makeshift shelters in informal settlements (HNO 2023, January 2023).

According to IOM's Emergency Community-based Needs Assessment, 2.85 million IDP households are in debt and 69 percent of IDP households cannot afford to meet basic food needs. Around 16 percent eat one meal or less per day, rising to 37 percent in Faryab province (IOM DTM, April 2022).

Women – who represent 54 percent of the conflict-induced displaced population according to DTM – are unable to move freely, in a context where they may have lost support systems and economic opportunities. On average, 81 percent of women-headed IDP households indicated not being able to work and cover daily expenses compared with 72 percent of male-headed households (WoAA, September 2022).



Returnees Improved security is encouraging IDPs displaced by conflict to return – but they often find communities devastated by conflict and chronic vulnerability. Loss of remittances, loss of livelihood opportunities in places of origin, gender discrimination and loss of family support networks all add to their vulnerability (HNO 2023, January 2023).

During the first quarter of 2022, deportations from the Islamic Republic of Iran increased month-on-month. In 2023, an estimated 1.1 million Afghan refugees are expected to return, just under 1 million from the Islamic Republic of Iran and the rest from Pakistan. Cross-border returnees are frequently forced to share limited resources with host populations in urban areas or have lost access to their land through usurpation or occupation. According to UNHCR monitoring, 54 percent lack shelter, 32 percent job opportunities and 26 percent land. A lack of documentation for 19 percent of them means they are not able to access services and assistance (HNO 2023, January 2023).

The WoAA found that an increasing share of recent returnee households reported barriers to water access (59 percent in 2022) predominantly due to water point functionality issues and lack of containers to carry water. Returnees face increasing difficulties to access health services, with 24 percent reporting they did not have access to an active health facility in the three months prior to data collection, and with women having the least access (WoAA, September 2022).



Refugees Approximately 52 400 refugees live in Afghanistan, the vast majority of them displaced from Pakistan in 2014 and residing in Khost and Paktika provinces in the southeastern region.

According to the WoAA 2022, 74 percent of refugees experienced an economic shock in the six months before the survey, and 82 percent cited not having enough money to obtain food in the previous 30 days. Some 81 percent of refugee households scored poor or borderline levels of food consumption. Nearly all (89 percent) of refugee respondents indicated having debt mainly to purchase food and healthcare (WoAA, September 2022).

Refugees live in poor quality or damaged shelters that leak when it rains and fail to protect them from the cold.

Unstable or non-existent rental agreements make them highly vulnerable to eviction. Around 15 percent have no latrines and 77 percent use unimproved latrines, raising the risk of disease outbreaks. Some 69 percent reported that they did not know how to access humanitarian assistance (WoAA, September 2022).

NUTRITION



Over 4 million children and women were projected to need urgent treatment for acute malnutrition through April 2023. An estimated 3.22 million children under 5 years were suffering from wasting, of whom about 875 000 were severely wasted. In addition, there were over 800 000 pregnant and lactating women (PLW) suffering acute malnutrition and in need of urgent treatment (IPC, January 2023).

During September–October 2022, two provinces (Badakhshan and Paktika) were classified in Critical (IPC AMN Phase 4) and 23 in Serious (IPC AMN Phase 3), according to a nationally representative SMART survey conducted from March–September 2022. During the November 2022–April 2023 winter season, the situation was expected to deteriorate. Some 24 provinces were likely to move to a worse situation – nine from IPC AMN Phase 2 to IPC AMN Phase 3 and 15 from IPC AMN Phase 3 to IPC AMN Phase 4. In other words, half of the country’s provinces were expected to face Critical levels of acute malnutrition (IPC AMN Phase 4).

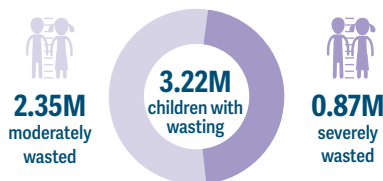
The prevalence of acute malnutrition among PLW ranged from 3.8 percent to 50 percent, which reflects an alarming nutrition situation. In 19 out of 34 provinces, more than 20 percent of PLW were acutely malnourished.

All assessed provinces reported a high (eight provinces) or a very high (24 provinces) prevalence of stunting among children under 5 years of age, as per WHO’s thresholds (IPC, January 2023).

Drivers of undernutrition

High levels of acute food insecurity combined with high prevalence of communicable diseases, and underpinned by factors such as low socioeconomic status, harmful social and cultural norms, years of conflict, displacement, weather extremes and natural disasters, in a context

Number of children under 5 years old with wasting, September 2022–April 2023



Source: Afghanistan IPC TWG, January 2023.

marked by low access to WASH services, are driving an alarming malnutrition crisis in Afghanistan.

Food insecurity and lack of access to healthy diets The high levels of acute food insecurity in Afghanistan contribute to the poor quality of foods consumed by children and women. The projected deterioration in acute malnutrition during the lean season is partly linked to lower availability of nutritious foods.

Inadequate maternal and child-feeding practices Only 16 percent of children aged 6–23 months old are fed with a Minimum Acceptable Diet that meets both the recommended dietary diversity and frequency thresholds (17 percent in urban and 13 percent in rural areas (WoAA, September 2022)).

Limited access to health and nutrition services The late 2021 suspension of direct international development assistance, which previously accounted for 75 percent of public expenditure, further weakened the already fragile public health system. Most health facilities have poor infrastructure and there are fewer qualified healthcare workers due to emigration, restrictions on women’s movement and employment, and reduced funds to pay salaries and keep facilities open (HNO, January 2023). Access to health services is also very limited due to long distances to travel and other additional costs for patients, such as transport, medicines and treatment in a context of severely squeezed purchasing power (HNO, January 2023). The December 2021 de facto authorities’ decree that women must travel accompanied by a male has limited access to what health services remain after

aid cuts. As women cannot be treated by male health workers, the limitation on female employment is a further obstacle to them receiving treatment. Following the June 2022 earthquake, the lack of female health workers prevented women from receiving urgent medical attention (UN Women, June 2022).

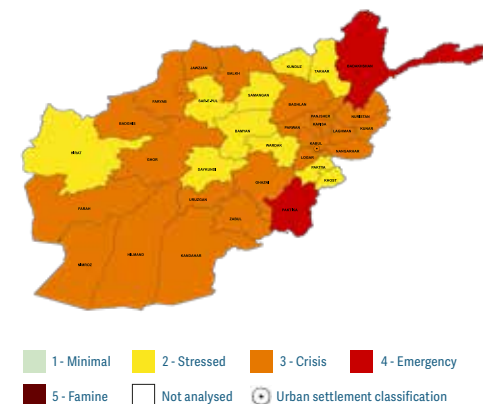
The projected winter season deterioration in child nutrition was partly linked to challenges accessing health and nutrition services (IPC, January 2023).

High prevalence of infectious diseases Infectious disease outbreaks, including measles, acute watery diarrhoea (AWD) and malaria/fever are overwhelming the increasingly strained health system and contributing to malnutrition. A seasonal degradation in common diseases that affect child nutrition, such as diarrhoea and acute respiratory infection, were expected to contribute to the higher burden of acute malnutrition during the winter (IPC, January 2023).

Poor household environment As a result of the ongoing drought and water crisis, 79 percent of households do not have enough safe water, reaching over 90 percent in ten provinces. Around 26 percent of rural households use inadequate water sources with the prevalence varying widely by province, reaching 84 percent in Nuristan (WoAA, September 2022). Lack of supplies, including chlorine, fuel, spare parts and equipment, and repair capacity following the cessation of direct international development funding has significantly hampered operational capacity in major urban areas (HNO, January 2023).

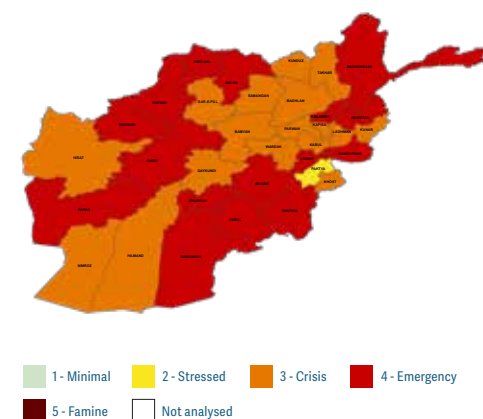
About half (46 percent) of households reported using unimproved sanitation facilities, but the prevalence was far higher in 19 provinces (WoAA, September 2022). With drought conditions expected to continue into 2023, a stretched water system could negatively impact the health of an already vulnerable population.

IPC acute malnutrition situation, September–October 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Afghanistan IPC TWG, January 2023.

Projected IPC acute malnutrition situation, November 2022–April 2023

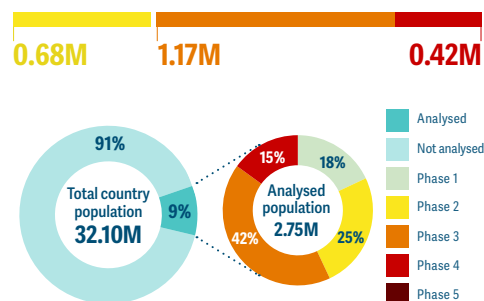


The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Afghanistan IPC TWG, January 2023.

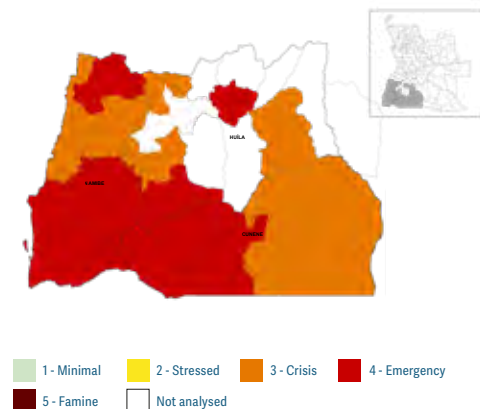
Angola (Cunene, Huíla and Namibe)

ACUTE FOOD INSECURITY PEAK 2022

1.58M people or **58%** of the analysed population in IPC Phase 3 or above, October 2021–March 2022



IPC acute food insecurity situation, October 2021–March 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Angola IPC TWG, September 2021.

Food crisis overview

The available IPC analysis for Angola focuses on the three agriculture-dependent southwestern provinces. In the first quarter of 2022, almost 1.6 million people faced Crisis or worse (IPC Phase 3 or above) in this area, as the worst drought in 40 years drastically reduced agricultural production (IPC, September 2021). This included over 400 000 people in Emergency (IPC Phase 4), which corresponds to 15 percent of the analysed population. The analysis only covered the drought-affected areas, 9 percent of the country's population of 32 million. Some 58 percent of them were in IPC Phase 3 or above.

All analysed municipalities experienced high levels of acute food insecurity with Cahama, Curoca and Ombadja (Cunene), Gambos (Huíla), Bibala, Camuciuo, Tômbwa and Virei (Namibe) municipalities having 65–80 percent of their populations in IPC Phase 3 or above.

Food insecurity conditions in southwestern areas were not expected to improve during the November 2022–March 2023 lean season as compared with the previous lean season, following localized shortfalls in 2022 agricultural production and persistent high food prices (FAO-GIEWS, September 2022).

Acute food insecurity since 2016

Angola has been included in all editions of the GRFC and categorized as a major food crisis for the last four years due to recurrent, severe drought. In Angola, IPC analyses focuses on the drought-prone southwestern provinces. In 2019 and 2021, the analysis focused on new municipalities and covered between 3 and 9 percent of the total country population. Among the comparable areas, the municipalities of Cahama, Gambos (ex-Chiange) and almost all of Ombadja have consistently been classified in IPC Phase 4.

Drivers of the crisis, 2022–23

Weather extremes Cumulative seasonal rainfall amounts in key agricultural provinces of Namibe, Cunene, Huíla and Cuanza Sul were 60–80 percent below the five-year average during the 2020–21 rainy season, leading to reduced crop and livestock production in 2021 (FAO-GIEWS, November 2021). Many households reported loss of animals due to lack of pasture and drinking water, as well as disease and theft (IPC, September 2021).

In early 2022, erratic rainfall and high temperatures in the southern areas of Angola affected the 2022 crop yields (FAO-GIEWS, September 2022). National cereal import requirements were estimated at about 12 percent higher than the five-year average in April 2021–March 2022 due to the low harvest (FAO-GIEWS, November 2021).

Between October 2022 and mid-January 2023, central, northern and southern areas received rainfall that was 5–15 percent below the five-year average. In southwestern areas, however, rainfall totals were above that of the same period in 2021–22, but production was expected to be curtailed by the lingering impact of past droughts (FEWS NET, January 2023), including low water tables and decreased household capacity to invest in agriculture.

Economic shocks At national level, inflation remained high due to food prices, but the rate slowed significantly in 2022.

According to the Instituto Nacional de Estatística (INE), headline annual inflation stood at 21 percent in July 2022, the lowest level since mid-2020, as the oil-exporting country benefitted from high global prices, which supported an appreciation of the national currency, helping to curb import inflationary pressure.

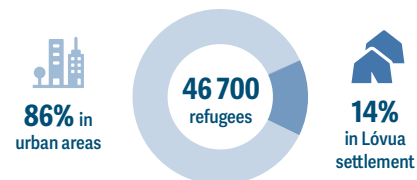
The Angolan Government's Strategic Food Reserve Plan, launched in September 2021, also contributed to alleviating price pressure (FAO-GIEWS, September 2022). By the end of the year, inflation reached the lowest value of the previous five years: 14 percent against 27 percent at the end of 2021 (FEWS NET, January 2023).

In the 2022/23 marketing year (April/March), cereal imports, which cover about 40 percent of the domestic cereal consumption requirement, were forecast at an above-average level (FAO-GIEWS, September 2022).

Crop pests Damages to crops caused by locusts in late 2021/early 2022 were reported in some areas of Cunene, Namibe and Huíla provinces (IPC, September 2021).

DISPLACEMENT

Refugees and asylum-seekers, end 2022



Source: UNHCR, December 2022.

Refugees Angola hosts 46 746 refugees and asylum-seekers from the Democratic Republic of the Congo, Guinea, Côte d'Ivoire, Liberia, Rwanda, Sierra Leone and other countries. Most live in urban locations. Many have lived in Angola for decades and are not willing or able to return home, although they face discrimination and challenges in accessing education, civil registration, healthcare, banking services and livelihood opportunities.

In 2017, around 35 000 Congolese refugees fled conflict in the Kasai region to Lunda Norte province, where Lóvuá settlement was established. Since mid-2019, more than 14 000 refugees have spontaneously returned home, while 3 732 refugees and their dependants voluntarily repatriated. The current population is 9 276 (6 443 in settlement) (UNHCR, January 2023).

Even though WFP provides food assistance to 6 439 refugees in Lovua settlement (WFP, January 2023),

in March 2021, among surveyed refugees, 17 percent had poor food consumption and 31 percent borderline food consumption (WFP, June 2021).

IDPs As of January 2023, 4 600 people were internally displaced in Ombadja and Cahama municipalities in drought-affected Cunene province, including 1 902 returnees (900 children) in Kalueque camp (UNICEF, January 2023).

NUTRITION

Number of children under 5 years old with wasting, April 2021–February 2022



Source: Angola IPC TWG, September 2021.

The three drought-affected southern provinces are still facing a child wasting crisis. In six out of ten analysed districts, the prevalence of child wasting exceeded the 15 percent 'very high' WHO thresholds, reaching nearly 23 percent in Humpata, 20 percent in Moçâmedes and 17 percent in Bibala (IPC AMN, September 2021). Angola has made little progress in reducing stunting levels, with 37.6 percent of children under 5 years of age affected (Global Nutrition Report, 2023).

Drivers of undernutrition

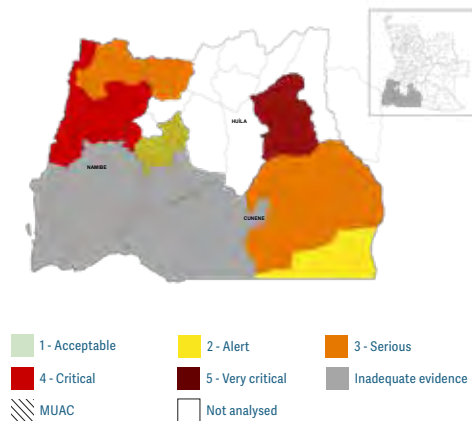
Food insecurity and lack of access to healthy diets Inadequate and poor dietary intake is mainly due to poor availability and access to food due to drought. Out of the 17 municipalities covered by the IPC acute food insecurity analysis, nine were also covered by an IPC acute malnutrition analysis. Those municipalities facing high levels of wasting in children also had high levels of acute food insecurity. For instance, in Humpata, where 23 percent of children suffered from wasting, 65 percent of the population were in Crisis or worse (IPC Phase 3 or above); and in Bibala, where 17 percent of children suffered from wasting, 70 percent of the population were IPC Phase 3 or above (IPC AMN, September 2021).

Inadequate maternal and child-feeding practices Inadequate food intake by children, both qualitatively (dietary diversity) and quantitatively (frequency of meals), was a major contributor to child wasting in Angola. Only 12 percent of children aged 6–23 months received a Minimum Acceptable Diet. In all municipalities, the percentage of children under 6 months who received nothing but breastmilk was low, at 37 percent (UNICEF, 2020). Regarding anaemia, data from 2019 indicated a 'severe' public health problem with a prevalence of 62.4 percent among children aged 6–59 months (WHO, 2019) and 44.5 percent among women of reproductive age (UNICEF, 2020).

Poor household environment According to the 2020 SMART survey, only 57 percent of people in Angola have access to drinking water (UNICEF, 2020). An estimated 1.2 million people are facing water scarcity as a direct consequence of the drought. In addition, analyses at the end of 2021 indicated that a significant number of water points in the most drought-affected communes were not working adequately (UNICEF, December 2021).

High prevalence of infectious diseases Around half of the children in the drought-affected provinces had at least one sign/symptom of infectious disease (diarrhoea, fever or cough). Low health-seeking behaviour when children were sick was identified as the main contributing factor to acute malnutrition in seven municipalities (IPC, September 2021). More than half of children were not vaccinated against measles (IPC, June 2021).

IPC acute malnutrition situation, October 2021–February 2022



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Source: Angola IPC TWG, September 2021.

Bangladesh (Cox's Bazar)

ACUTE FOOD INSECURITY PEAK 2022


 **1.28M** people were estimated to be in need of food assistance in 2022

Source: JRP, 2023.



Source: JRP, 2023.


Food crisis overview

 In Cox's Bazar, around 95 percent of the Rohingya refugee population and 70 percent of the Bangladeshi resident community in Ukhiya and Teknaf upazilas – a total of 1.28 million people – were estimated to be vulnerable and in need of food assistance in 2022 (JRP 2023, March 2023). Of them, 902 800 were Rohingya refugees living in 33 congested government-designated camps in Ukhiya and Teknaf as well as on the island of Bhasan Char, and 376 500 were members of the Bangladeshi host community.

Acute food insecurity since 2016


Bangladesh (Cox's Bazar) has been included in all editions of the GRFC and as a major food crisis since the GRFC 2018 following the mass arrival of Rohingya refugees from Myanmar. Since then, the number of people in need of food assistance has remained quite similar. The number in 2022 was slightly above that of October–November 2021 when 84 percent of the analysed population, or 1.26 million people, needed humanitarian food and livelihood assistance, up from 1.2 million in 2020 (REVA 5, March 2022).

Drivers of the crisis, 2022–23

 **Conflict/insecurity** The main driver of the crisis remains the 2017 violence in Rakhine state in Myanmar, which drove around 750 000 Rohingya to flee to Cox's Bazar. The protracted conflict in Myanmar is preventing any prospect of a safe and dignified return in the foreseeable future.

Limited livelihood opportunities and disrupted social cohesion have reportedly led to a spike in criminal activity and concerns over safety (ACAPS, December 2022).

The growing multifaceted needs of Rohingya refugees have compounded existing socioeconomic challenges for host communities, exacerbating pressures on public services, infrastructure and the environment. This raises the potential for tensions between the two communities (JRP 2023, March 2023).


 **Economic shocks** The war in Ukraine has negatively affected the food, energy and fiscal situation in Bangladesh. High levels of inflation, a depreciating local currency, and price hikes for basic goods and commodities have increased existing vulnerabilities among Rohingya refugees and resident communities (JRP 2023, March 2023).

By May 2022, the annual inflation rate in Bangladesh (7.4 percent) reached the highest point since May 2014 and continued increasing up to a peak of 9.9 percent in August 2022, underpinned by soaring prices of food, especially international price increases, high transportation costs, and a slowdown in imports from Ukraine, the Russian Federation and India. In Cox's Bazar district, the cost of a typical food basket in June 2022 was 15 percent higher than in June 2021 and 33 percent higher than in June 2020 (WFP, June 2022). In January 2023, the food basket was 15.8 percent higher year-on-year (WFP, February 2023).

While the Government of Bangladesh has kept its national borders open, refugees lack formal legal status, face extreme restrictions on movement, and


are not permitted to legally work, leaving them in a protracted crisis and entirely dependent on humanitarian assistance. The food voucher value of USD 12.00 per person per month provided by WFP was already depreciated in 2022 because of increasing food prices, forcing families to take loans to pay for food, with many reducing the amount that they eat. From 1 March 2023, funding shortfalls forced WFP to cut its voucher value to USD 10.00 per person per month (WFP, February 2023), further decreasing household purchasing power.

Most Rohingya households engage in high-risk coping strategies to meet their basic needs, such as selling or rationing aid or taking on additional debt (ACAPS, December 2022).

 **Weather extremes** During the May–September monsoon season, humanitarian conditions deteriorated significantly. Shelters were damaged and people displaced as Cox's Bazar is extremely prone to flooding and landslides because of its rugged and hilly terrain (ACAPS, December 2022).


The overcrowded camps pose a fire risk. In March 2023, a massive fire affected 16 000 people with over 5 000 people displaced and nearly 3 000 shelters damaged or destroyed. The fire destroyed many refugees' documentation, essential for identification and to access assistance and services (OCHA, March 2023).


NUTRITION


 The 2021 SENS survey reported 'high' wasting levels (10–15 percent) among refugee children under 5 years old and 'medium' levels (9.1 percent) among resident Bangladeshi children. Stunting levels were 'very high' (>30 percent) among Rohingya children and 'high' among Bangladeshis (23.7 percent) (UNICEF, March 2023). Ration cuts from March 2023 were expected to reduce calorific intake and put young children and pregnant and lactating women at increased risk of malnutrition and anaemia (MSF, March 2023).


Drivers of undernutrition

 **Food insecurity and lack of access to healthy diets** Around 45 percent of Rohingya and 38 percent of host community households had inadequate diets in 2021. Food was the priority need for 82 percent of Rohingya and 59 percent of host community households, especially fresh, green produce (WFP REVA-5, March 2022).

 **Inadequate maternal and child-feeding practices** Only half of children aged 6–23 months receive a Minimum Acceptable Diet and 62.3 percent of infants under 6 months old are exclusively breastfed. Anaemia levels are a severe public health problem (>40 percent) across all camps for women, and children aged under 5, reaching over 60 percent for children aged 6–23 months (UNICEF, March 2023).


 **Poor household environment** While 93 percent of sanitation facilities were reported as functional, challenges remain, especially in hygiene and solid WASH management, as only 45 percent of the waste is properly processed and latrines often overflow (MSF, March 2023). In 2021, around 67 percent of Rohingya households did not treat their water compared with 96 percent of host community households (WFP, March 2022).

 **High prevalence of infectious diseases** Reduced calorific and nutritional intake due to ration cuts raise the risk of weakening children's immune systems, and increasing outbreaks of infectious diseases, such as measles and cholera (MSF, March 2023).

 **Limited access to health and nutrition services** Health services in the camps are under enormous pressure as they struggle to keep pace with the medical impacts of dire living conditions, including frequent outbreaks of scabies, dengue fever and cholera (MSF, March 2023).

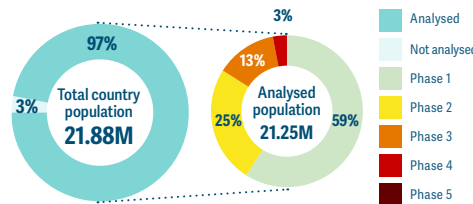
Burkina Faso

ACUTE FOOD INSECURITY PEAK 2022

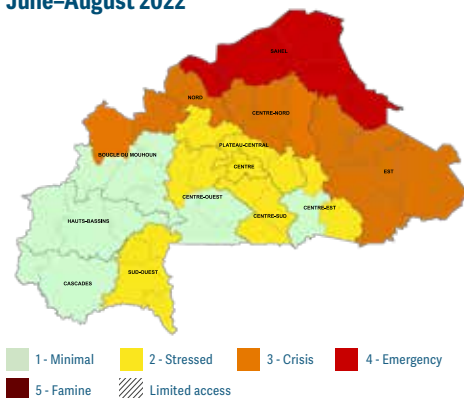
 **3.45M** people or **16%** of the analysed population in CH Phase 3 or above, June–August 2022



Although no populations were in Catastrophe (IPC Phase 5) during June–August 2022, there were 1 817 people in this phase in October–December 2022 (CH, November 2022).




CH acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, March 2022.

Food crisis overview

 During June–August 2022, the number of people in Crisis or worse (CH Phase 3 or above) reached the highest in nine years of CH analyses due to the multi-faceted impacts of intensifying armed conflicts.


Around 3.45 million people faced CH Phase 3 or above, representing 16 percent of the country's population, well above the 2.87 million people during the same period in 2021 (CH, March 2022).

More than 71 percent of them were in the Sahel, Est, Centre-Nord and Nord regions. Eleven provinces were classified in Crisis in these four regions while all four provinces in the Sahel, including IDP populations in Seno and one in the Nord (Loroum), were in Emergency (CH Phase 4) (CH, March 2022).

A similar projection for 2023


During the June–August 2023 lean season, the situation is projected to persist at similar levels to the 2022 lean season with 3.53 million people in Crisis or worse (CH Phase 3 or above), over 572 000 of them children under 5 years old. The number of people in Emergency (CH Phase 4) is expected to be marginally lower, and nearly 20 000 people are expected to move to Catastrophe (CH Phase 5) in the Sahel region. All four provinces in the Sahel and one in the Nord (Loroum) were again projected to be in Emergency (CH Phase 4). Twelve provinces across the Est, Centre-Nord, Nord, Boucle du Mouhoun and Centre-Est regions were expected to be in Crisis (CH Phase 3) (CH, November 2022).

Drivers of the crisis, 2022–23

 **Conflict/insecurity** Worsening armed conflicts in 2022, mostly in northern and eastern areas, hampered agricultural activities and caused large population displacements, limiting the area planted with cereal crops in the areas affected by insecurity (FAO-GIEWS, October 2022), and hindering

people's access to their usual sources of food and income.

Despite generally conducive weather conditions, poor security led to localized production shortfalls compared with typical production in northern and eastern areas. In the Sahel, Est, Nord, Boucle du Mouhoun and Centre-Nord regions, several localities were cut off from the rest of the country and markets brought to a standstill by a total or partial blockade by armed groups. Populations in some areas only received supplies through national army convoys. Added to this was the sociopolitical instability marked by the occurrence of two coups d'état in 2022 (CH, November 2022).

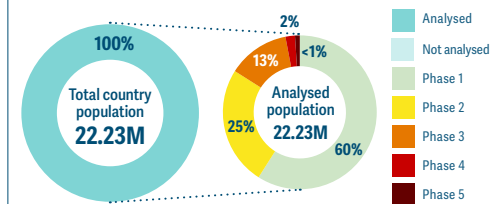
 **Economic shocks** Food prices increased due to increased energy and transportation costs, strong demand on exports from neighbouring countries and tight market availability due to deteriorating security in conflict areas (FAO-GIEWS, October 2022). In northern and eastern areas, the high concentration of IDPs increased local demand for food, weighing on prices. Furthermore, the annual depreciation of the national currency against the US dollar in November 2022 increased the cost of imported foodstuffs. In order to contain upward price movements and secure national availabilities, an export ban on millet, maize, sorghum flours and cereal grains, implemented since 2021, remained in place (FAO, December 2022).

As of September 2022, sorghum prices were 80 percent higher than the previous year and millet 100 percent higher (FAO-GIEWS, October 2022). Prices declined in November across the country, reflecting the commercialization of recently harvested crops, but sorghum prices remained 35 percent higher year-on-year and millet 75 percent higher (FAO, December 2022).

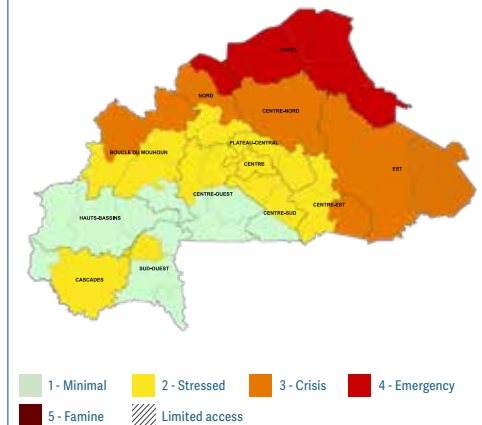
In the relatively calmer southern and western areas, income usually generated from labour in off-season production activities and preparation of crop fields could drop between February and May 2023 compared with normal due to the high cost of fertilizers and fall in income from cotton sales, which will limit the demand for

ACUTE FOOD INSECURITY PROJECTION 2023

 **3.53M** people or **16%** of the analysed population in CH Phase 3 or above, June–August 2023



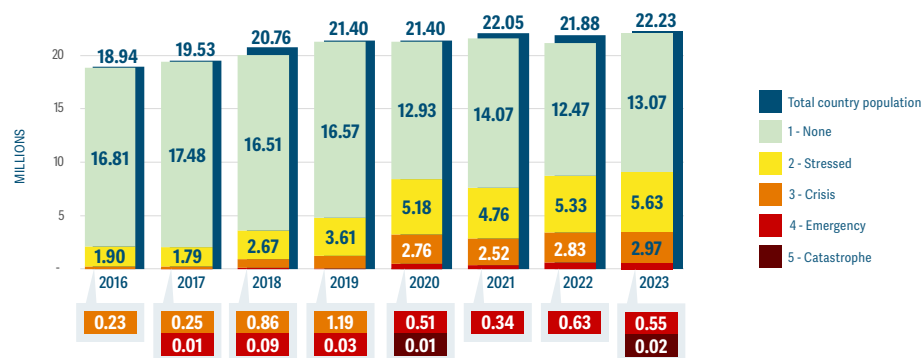
Projected CH acute food insecurity situation, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, November 2022.

Numbers of people by phase of acute food insecurity, 2016–2023



See Appendix 1, figure 2 for datasets from all analysis rounds between 2016 and 2023.
Source: Cadre Harmonisé.

labour. Prices will remain above their seasonal averages in early 2023 despite new harvests due to below-average market supplies of cereals, and rising household demand and institutional purchases (FEWS NET, December 2022).

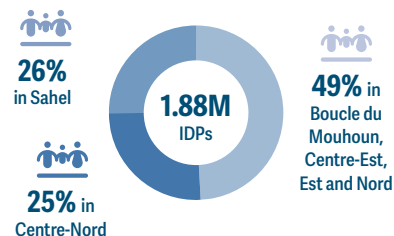
Acute food insecurity since 2016

Burkina Faso has been selected as a food crisis for all seven editions of the GRFC and has been defined as a 'major' food crisis for the last four as the population in CH Phase 3 or above reached the threshold of at least 1 million. This was driven by a significant increase in conflict that led to the declaration of a state of emergency in December 2018 in 14 provinces in northern and eastern regions.

By 2019, it had become one of the world's fastest growing food crises with over 1.2 million people in Crisis or worse (CH Phase 3 or above) by October–December of that year. While this increase may have been influenced by a larger proportion of the population analysed, by June–August 2020, this had risen to 3.28 million people, including 11 400 in Catastrophe (CH Phase 5), over three times the number recorded during the June–August 2018 lean period (CH, July 2020). The acute food insecurity numbers reported in 2022 and 2023 are the highest on record as per the CH.

DISPLACEMENT

IDPs hosted among local communities or in temporary reception sites, 2022



Source: Government of Burkina Faso, December 2022.

IDPs Since 2018, intensifying conflict across Burkina Faso has created a rapidly escalating internal displacement crisis with the number of IDPs increasing 40-fold in four years, from 47 000 to nearly 1.9 million people as of 31 December 2022. This represents more than 10 percent of the country's population and includes over 940 000 children (ECHO, February 2023).

Displaced people increasingly moved towards urban centres, contributing to the acceleration of urbanization (UNHCR, May 2022). About 17 000 IDPs in the Arbinda region in the northern Soum province were cut off from the rest of the country due to violence by armed groups (OCHA, December 2022). Confined to increasingly tighter spaces and unable to flee, these people were facing a major food crisis on their own (ICRC, May 2022).

Loss of assets, limited movement to access livelihoods, closure or slowed functioning of livestock markets and a decline in remittances from migrants due to the destruction of communication networks, have resulted in consumption gaps for poor host households and IDPs. Around 30 percent of poor host households and 50 percent of poor IDPs were estimated to have no source of income and relied on remittances or humanitarian aid. IDPs and poor host households try to generate income through the sale of water, firewood, fodder and gold mining (FEWS NET, December 2022).

These constraints have exposed these households to Emergency (IPC Phase 4) levels of acute food insecurity, particularly in Soum province and inaccessible areas north of Oudalan (FEWS NET, December 2022). The CH analysis covering 0.82 million IDPs found that 43 percent of them were in CH Phase 3 or above and 40 percent were in CH Phase 2 in June–August 2022 (CH, March 2022). In the June–August 2023 projection, four IDP settlements (Gourma, Komondjari, Seno and Soum) are expected to face CH Phase 4 while two other IDP settlements are projected in CH Phase 3. IDPs accounted for 487 000 people in CH Phase 3 and above, including 194 000 people in CH Phase 4 and 7 400 people in CH Phase 5 (CH, November 2022).

In 2022, the country experienced more measles outbreaks compared with 2021, mainly among displaced households (UNICEF, February 2023).

Refugees At the same time, the resurgence of violence in Mali's central strip has forced thousands of people to flee the country and settle in the northern region of Burkina Faso.

By 31 January 2023, 35 175 refugees and asylum seekers – a 40 percent increase in one year – have sought international protection mainly in the Sahel region, 99 percent of them from Mali (UNHCR, February 2023). Most of them live in the town of Dori (15 700 individuals or 45 percent) and in Hors Camp (10 672 individuals or 31 percent) (UNHCR, February 2023).

NUTRITION

Number of children under 5 years old with wasting, August 2021–July 2022



0.16M pregnant and lactating women acutely malnourished, 2023

Source: IPC, January 2022.

Through 2022, almost 700 000 children aged under 5 years were estimated to suffer from wasting. This represents an increase of 10 percent since October 2020–July 2021, including an 18 percent increase in the number of children with severe wasting. The number of wasted pregnant and lactating women increased even more sharply – by 25 percent (IPC, January 2022).

Out of the 45 provinces analysed, from August 2021 to July 2022, the five provinces in the Sahel (Seno, Soum, Oudalan, Yagha and Loroum) were categorized in Critical (IPC AMN Phase 4). The remaining 40 were classified in Serious (IPC AMN Phase 3) and Alert (IPC AMN Phase 2) (IPC, January 2022).

A later IPC analysis covered only 31 of the country's 45 provinces and six communes due to limited or no humanitarian access and insecurity, including in the Sahel. It estimated that nearly 393 500 children under the age of 5 will likely suffer from wasting from August 2022 to July 2023. Of these, nearly a quarter are expected to experience SAM (95 600). A further 80 000 pregnant and lactating women are expected to be acutely malnourished (IPC, January 2023).

While it is difficult to compare 2022 figures with the 2021 IPC AMN analysis due to the difference in geographical coverage, results depict a worse nutritional

situation. Of the 31 provinces analysed, four were classified in a Serious nutritional situation (IPC AMN Phase 3), and the rest in Alert (IPC AMN Phase 2) or Acceptable (IPC Phase 1). Of the six communes analysed, two were classified in Critical (IPC AMN Phase 4), and four in Serious (IPC AMN Phase 3). The situation was again expected to deteriorate in May–July 2023 (IPC, January 2023).

A national SMART survey conducted between September and October 2022, covering all regions except the Sahel and Est, found that the wasting prevalence exceeded the 'high' threshold of 10 percent in Ziro and Sanguié provinces in the Centre-Ouest region, Ouhritenga in the Plateau-Central, and Passoré in the Nord. The age groups with the highest prevalence of wasting were those aged 6–11 months (9.6 percent) and 12–23 months (8.5 percent). The prevalence of severe wasting reached 1.3 percent in Mouhoun province and 1.7 percent in Ziro (SMART 2022). There are concerns that the acute malnutrition situation in the regions that could not be surveyed is severe.

The Kourwéogo province in the Plateau-Central region has the highest stunting prevalence (37.7 percent), which is considered 'very high'. Out of the 31 surveyed provinces, 20 have 'high' stunting levels (>20 percent) (SMART 2022).

Drivers of undernutrition

Inadequate maternal and child-feeding practices Breastfeeding rates range from 69.6 percent in the Cascades region to 85.8 percent in the Centre-Est. At the provincial level, the highest rate was recorded in Passoré (93.9 percent) and the lowest in Nahouri (50.9 percent) (SMART 2022).

However, beyond weaning, child-feeding practices are concerning. The highest proportion of children aged 6–23 months having a minimum acceptable diet was in the Cascades (25.9 percent) and the lowest in the Centre (18.2 percent). At the provincial level, Nayala had the highest proportion (32.8 percent) and the lowest was recorded in Kouritenga (16.6 percent) and Mouhoun (17.0 percent) (SMART 2022).

More than half (52.5 percent) of women of reproductive age suffer from anaemia, which indicates a severe public

health problem, according to WHO thresholds. Anaemia levels are even higher among children under 5 years with nearly 77 percent affected (WHO, 2019).

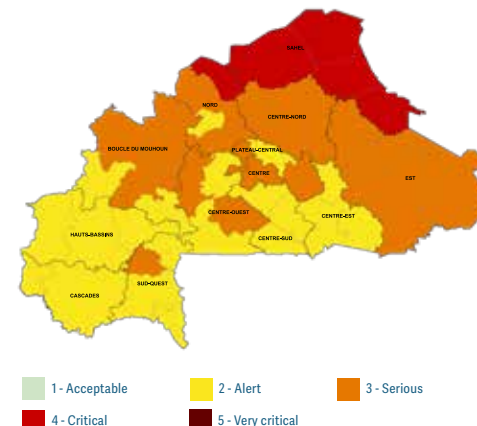
Poor household environment Low levels of access to drinking water and sanitation facilities, and poor hand-washing practices contribute to poor hygiene conditions and high prevalence of childhood illnesses, such as fever and diarrhoea (IPC AMN, January 2023).

Limited access to health and nutrition services The closure/dysfunction of more than 500 health structures in provinces with limited humanitarian access has reduced the population's access to basic care. The security situation is also leading to massive population displacement to accessible areas, putting pressure on healthcare provision (IPC AMN, January 2023).

Food insecurity and lack of access to healthy diets The IPC AMN analysis published in January 2022 reported high levels of both acute food insecurity and malnutrition in the Sahel, Nord, Centre-Nord, Est, Centre and parts of the Boucle du Mouhoun administrative regions. However, the high prevalence of wasting extends into provinces of the Sud-Ouest, Centre and Plateau-Central regions, although these seem less affected by acute food insecurity.

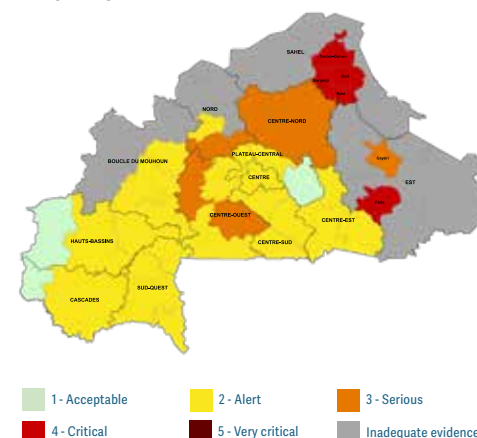
These southern areas were largely classified in Stressed (IPC AMN Phase 2) for wasting, while in Acceptable (IPC Phase 1) for acute food security, implying that other factors contribute to acute malnutrition besides lack of adequate food (IPC, January 2022).

IPC acute malnutrition situation, May–July 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Burkina Faso IPC TWG, January 2022.

Projected IPC acute malnutrition situation, May–July 2023

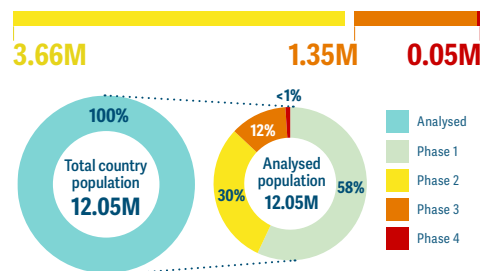


The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Burkina Faso IPC TWG, January 2022.

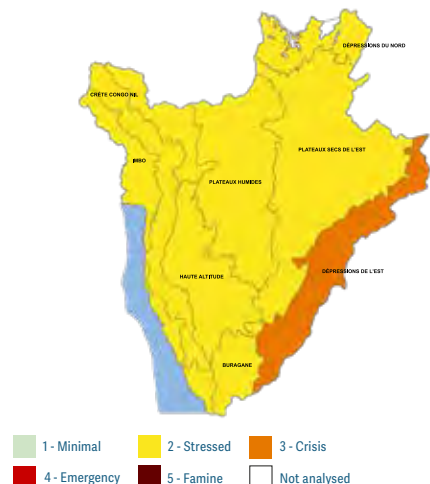
Burundi

ACUTE FOOD INSECURITY PEAK 2022

1.40M people or **12%** of the analysed population in IPC Phase 3 or above, **October–December 2022**



IPC acute food insecurity situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Burundi IPC TWG, September 2022.

Food crisis overview

There was a 13 percent decrease in the number of people in Crisis or worse (IPC Phase 3 or above) between the 2021 peak of 1.61 million in April–May to 1.4 million in the October–December 2022 lean season (IPC, June 2021; IPC, September 2022).

The totality of people in Emergency (IPC Phase 4) levels of acute food insecurity were in the Imbo Plains. Seven of Burundi's eight livelihood zones were classified in Stressed (IPC Phase 2). Twenty percent of the population in the Dépressions de l'Est was in Crisis (IPC Phase 3).

Drivers of the crisis, 2022–23

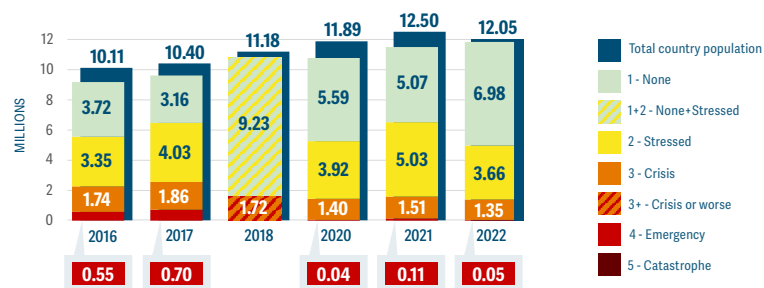
Weather extremes Agricultural labour opportunities during the September–November 2022 short rains planting season were hampered by La Niña-induced rain deficits, further curtailing household purchasing power at a time of higher market dependency (IPC, September 2022). The delayed onset of the season postponed planting of the 2023A season crops that account for about 35 percent of aggregate crop output (FAO-GIEWS, November 2022). While better-off households were able to replant maize

and beans in November, many poor smallholders planted root crops instead, reducing their dietary diversity and incomes from crop sales (FEWS NET, November 2022).

Economic shocks High transport costs linked to increased global fuel prices pushed up food prices from March 2022. By November – when household food stocks from the 2022B season were depleted – average maize prices were 37 percent higher year-on-year despite increased market availability from the above-average June/July harvest. Bean prices were 52 percent higher on a yearly basis (IPC, September 2022; WFP, December 2022; FAO-GIEWS, November 2022). Yields of the 2023A season crops are expected to be reduced due to low application of fertilizers, the prices of which have been increasing since 2021 and were further exacerbated by the effects of the war in Ukraine on global supply (FAO-GIEWS, November 2022). Costs related to COVID-19 testing necessary to cross borders continued to impede cross-border petty trade for poor and very poor households (FEWS NET, November 2022).

Livestock diseases Income for livestock farmers was reduced due to the ban on the movement, sale and slaughter of cattle, goats and sheep following the April 2022 outbreak of Rift Valley

Numbers of people by phase of acute food insecurity, 2016–2018 and 2020–2022



The 2019 analysis is not included as it was based on FEWS NET.

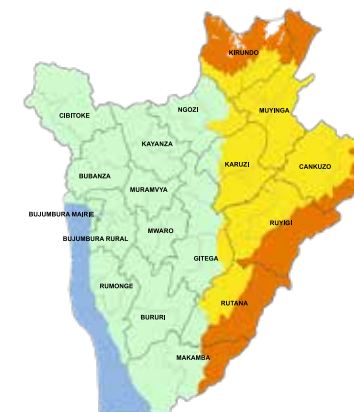
See Appendix 1, figure 3 for datasets from all analysis rounds between 2016 and 2023.

Source: FSIN.

ACUTE FOOD INSECURITY PROJECTION 2023

0.5–0.75M people or **4–6%** of the analysed population in IPC Phase 3 or above equivalent, **February–May 2023**

Acute food insecurity situation, February–May 2023



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

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: FEWS NET, March 2023.

fever. Households coped by selling food crops, resulting in an early depletion of stocks. A vaccination campaign from July resulted in a substantial decline in cases and resumption of slaughtering activities by September, but livestock markets were still not fully open in November and labour opportunities and incomes from livestock remained below average (FAO-GIEWS, November 2022).

Acute food insecurity since 2016

Burundi has consistently been classified as a major food crisis in the GRFC except in 2019 (GRFC 2020) when no IPC analyses were publicly available and FEWS NET estimated that 0.2 million people or 2 percent of the population were in IPC Phase 3 or above (FSIN).

The share of people in IPC Phase 3 or above during the peak period each year has been decreasing since April–May 2017 when 2.6 million people (26 percent of the population) were in these phases, including over 700 000 people in IPC Phase 4 largely due to political tensions, poor rainfall, high food prices and crop diseases (IPC, April 2017).

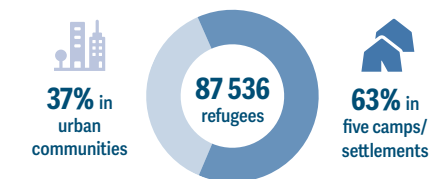
From 2017 to 2022, the IPC classifications show that the Dépressions du Nord, Dépressions de l'Est and Imbo have been the most food-insecure livelihood zones, following recurrent weather extremes (water deficits and floods) coupled with major shocks, including the economic impacts of the COVID-19 pandemic and war in Ukraine (IPC, September 2022).

DISPLACEMENT

Refugees As of January 2023, Burundi hosted around 87 500 refugees and asylum seekers, almost all of them from the Democratic Republic of the Congo. Around one-third live in the capital city Bujumbura and two-thirds in five refugee settlements in the eastern part of the country, in Muyinga, Cankuzo and Ruyigi provinces. Kavumu settlement is the largest with 17 683 people.

All these refugees are hosted in already food-insecure areas and rely on assistance for basic food and nutrition (WFP, 2022). Some refugees sell part of their food rations to buy locally produced alcohol and try to work as agricultural labourers.

Refugees living in host communities or displacement sites



99% of refugees are from the Democratic Republic of the Congo, 1% from Rwanda.

Source: UNHCR, January 2023.

Returnees The political turmoil and violence after the 2015 elections triggered more than 400 000 cross-border movements between 2015 and 2017. Improvements in security and in the political and socioeconomic conditions from 2017 prompted over 200 000 Burundian refugees to return from the United Republic of Tanzania, Rwanda, the Democratic Republic of the Congo and Uganda, including 65 000 in 2021 and 16 621 in 2022. Despite efforts to help this group to repatriate, access to housing, land, employment and health services remains a major challenge. Over 70 percent of returnees are not satisfied with their level of food security and around 69 percent report eating only once a day. Around 54 percent of returnees in 2022 spent their repatriation cash allowance on buying land, but 69 percent of them were unable to cultivate it due to lack of seeds and farming tools. Around 60 percent found agricultural labouring work in the host community's fields, and 70 percent reported living on less than USD 0.5 per day on average (UNHCR, January 2023).

IDPs Between 2018 and 2022, weather extremes displaced 121 900 people, mainly in Bujumbura Rural, Ngozi and Bujumbura Mairie provinces. In 2022, the number of Burundians displaced by such events was the lowest in five years at 12 900, down from 35 700 in 2021 and 44 200 in 2020. As of October 2022, 75 300 people remained internally displaced (IOM, January 2023).

NUTRITION

Number of children under 5 years old with wasting, March 2022–February 2023



45 000 pregnant and lactating women acutely malnourished, 2023

Source: IPC, September 2022.

The doubling in the number of children identified as suffering from wasting from around 140 000 in 2021 to 283 000 in March 2022–February 2023 was most likely in part attributable to the increased IPC coverage, from 32 to 48 areas analysed. Of them, 25 were estimated to be in Alert (IPC AMN Phase 2) in March–May 2022 and 23 are projected to stay in this phase between October 2022 and February 2023 (IPC, September 2022).

According to the SMART 2022 survey, wasting prevalence at the national level was 'medium' by WHO thresholds (7.1 percent), but reached 'high' levels in Rutana district (10.9 percent) (SMART 2022).

In Burundi, more than half (55.8 percent) of children under 5 years are stunted, which is among the highest levels in Africa (SMART 2022).

Drivers of undernutrition

Inadequate maternal and child-feeding practices Although 85 percent of children under 6 months are exclusively breastfed (SMART 2022), poor weaning practices continue to be a risk. Inadequate individual food intake (quality/diversity and quantity/frequency) is observed in most districts analysed, particularly among children under 2 years of age. Around 96 percent of children aged 6–23 months do not receive a

IPC acute malnutrition situation, March–May 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Burundi IPC TWG, September 2022.

minimum acceptable diet (SMART 2022). Anaemia levels were considered a severe public health problem among children aged 6–59 months (58 percent) and a moderate public health problem among women of reproductive age (38.5 percent) (WHO, 2021).

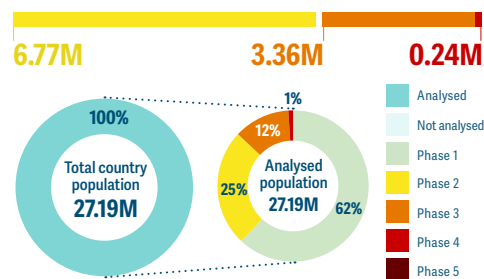
High prevalence of infectious diseases Malaria and acute respiratory infections are major contributors to child wasting, especially during the rainy season. However, coverage of measles vaccination and vitamin A supplementation are satisfactory (above 80 percent) (IPC AMN, September 2022).

Food insecurity and lack of access to healthy diets Both the IPC acute food insecurity analysis conducted in April 2022 and the IPC acute malnutrition analysis conducted in June 2022 showed an improving situation in June–September 2022 (IPC AMN, September 2022).

Cameroon

ACUTE FOOD INSECURITY PEAK 2022

3.60M people or **13%** of the analysed population in CH Phase 3 or above, **October–December 2022**



CH acute food insecurity situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Cadre Harmonisé, November 2022.

Food crisis overview

The number of people facing Crisis (CH Phase 3) increased sharply from 2.36 million during the 2021 peak in March–May to 3.36 million in October–December 2022.

The number of people in Emergency (CH Phase 4) remained almost the same (CH, November 2022) at 240 000 people.

The increase in populations in CH Phase 3 can be attributed to the further reduction in household purchasing power due to the combined impacts of conflict, insecurity and displacements in the Nord-Ouest, Sud-Ouest and Extrême-Nord regions, and high staple food prices.

In addition, elevated international fertilizer prices resulted in lower use and, coupled with extreme weather events such as floods, had a negative impact on yields. The increase might also be due to a rise in the total country population from 25.9 million people in March–May 2021 to 27.2 million in October–December 2022.

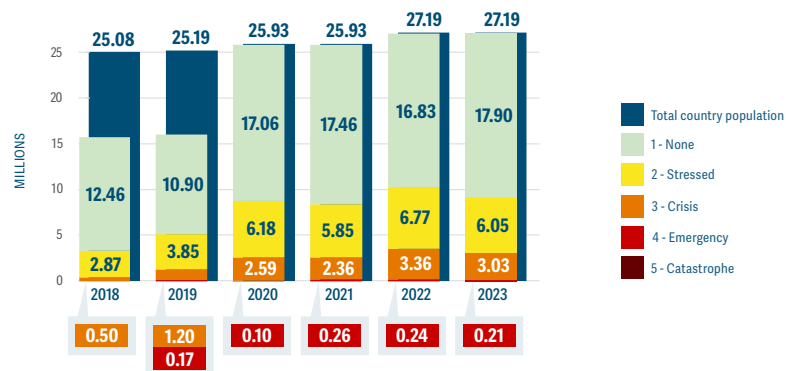
Slight improvement projected for 2023

The number of people facing CH Phase 3 or above is expected to decline slightly during the projection period (June–August 2023), but the overall number will likely remain high as the combination of conflict, high staple food prices and below-average harvests will continue to limit food access, particularly in conflict-affected areas. Out of 58 zones analysed, 15 are likely to be in Crisis (CH Phase 3) (CH, November 2022).

Acute food insecurity since 2016

Cameroon has been included as a food crisis since the first edition of the GRFC in 2017. During the first three editions it was included within the Lake Chad Basin regional crisis as its Extrême-Nord region has suffered spill-over effects of the Boko Haram insurgency in northeast Nigeria. From 2019, it has been included as a major crisis independently from the regional crisis with a full population coverage since 2020. Between 2020 and 2021, when the analysis coverage was the same, the population facing Emergency (CH Phase 4) more than

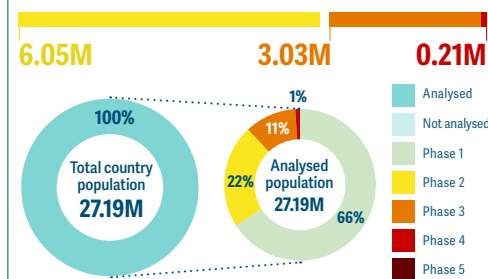
Numbers of people by phase of acute food insecurity, 2018–2023



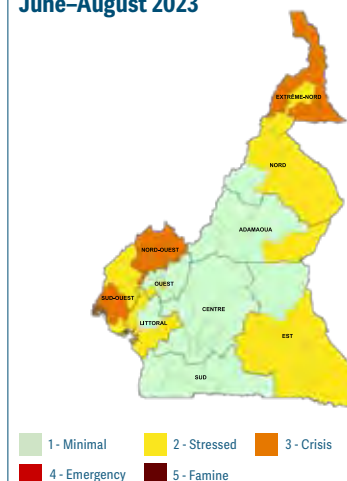
See Appendix 1, figure 4 for datasets from all analysis rounds between 2018 and 2023.
Source: Cadre Harmonisé.

ACUTE FOOD INSECURITY PROJECTION 2023

3.23M people or **12%** of the analysed population in CH Phase 3 or above, **June–August 2023**



Projected CH acute food insecurity situation, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Cadre Harmonisé, November 2022.

doubled. Since 2020, no significant trend was observed in the number of people in Stressed (CH Phase 2).

Drivers of the crisis, 2022–23

Conflict/insecurity Inter and intra-state conflicts in the anglophone regions, Lake Chad Basin and the Central African Republic continued to drive acute food insecurity in Cameroon (WFP, November 2022). The conflict between non-state armed groups and state security forces in the Nord-Ouest and Sud-Ouest regions constrained food availability and access, causing poor households to engage in negative coping strategies such as selling off assets, accumulating debt, reducing meal frequencies and portions, and relying on humanitarian food assistance (FEWS NET, August 2022). In the Extrême-Nord region, the ongoing insurgency affecting the Lake Chad Basin area, as well as intercommunal conflict, limited agricultural production, disrupted livelihoods and restricted market access (ACAPS, October 2022).

While the absolute number of violent clashes and fatalities in Cameroon declined in 2022, the number of civilian casualties rose (ACLED, January 2023), which led to continued displacements (FEWS NET, August 2022) and restricted access to humanitarian assistance (ACAPS, December 2022). Refugees from the Central African Republic, who are mainly hosted in the Est and Adamaoua regions, depend on humanitarian aid for their basic needs, and the increased demand for food generated by their presence triggers food price increases, as well as competition for natural resources and employment opportunities (ACAPS, February 2022; FEWS NET, October 2022).

Economic shocks Inflation doubled to 4.6 percent in 2022, linked to supply chain disruptions from the COVID-19 pandemic and the war in Ukraine putting additional upward pressure on domestic prices of food and fertilizer (IMF, August 2022). The rising cost of staple foods further decreased already-low household purchasing power, especially for the urban poor and those in conflict-affected areas (FEWS NET, October 2022).

Nearly three out of every four crop producers said that they had experienced production difficulties due to lack

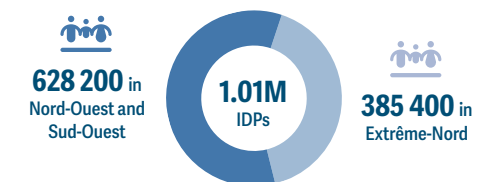
of access to fertilizers. This was attributable to the rise in the cost of production inputs due to the war in Ukraine, as Cameroon is a net importer of fertilizer, mainly from the Russian Federation (FAO, December 2022).

Weather extremes Heavy rains and floods in the Extrême-Nord region, particularly in the Logone-et-Chari, Mayo-Danay and Mayo-Tsanaga divisions between August and October 2022, destroyed or damaged critical infrastructure and crops across thousands of hectares, and resulted in the loss of thousands of livestock (WFP, November 2022).

The extreme weather also made it difficult for humanitarian assistance to reach affected populations in conflict-affected areas, exacerbating acute food insecurity outcomes due to the decrease in food availability (FEWS NET, November 2022).

DISPLACEMENT

Numbers of IDPs, end 2022



There were an estimated 0.56 million IDP returnees during 2022. Source: IOM, December 2022; OCHA, February 2023.

IDPs The number of IDPs in Cameroon has increased year-on-year since 2015 and by a further 8 percent between 2021 and 2022. About 628 200 live in the Sud-Ouest and Nord-Ouest regions and other 385 400 in the Extrême-Nord region (OCHA, February 2023; IOM December 2022).

Internal displacement in the Extrême-Nord is mainly driven by non-state armed groups (responsible for 70 percent of displacements between March and August 2022) as well as intercommunal conflict and to a lesser extent floods, drought or heavy rains (3 percent) (IOM DTM, October 2022).

About 45 percent of IDPs live with host families (non-rent paying), 29 percent in spontaneous shelters, 13 percent with host families in exchange for domestic or agricultural work, and 13 percent in personal or collective housing (IOM DTM, August 2022).

The number of IDP returnees increased sharply from around 135 000 in 2021 to about 560 000 in 2022, linked to the deterioration of living conditions in displacement, and the lack of assistance, access to cultivable land or improved security in return locality. However, conditions are not conducive to return (UNHCR, January 2023; HNO 2022).

According to an October survey in the Extrême-Nord, food was the priority need for both displaced and host communities (46 percent). Most IDPs derived an income from agriculture and sale of food or cash crops, and sourced their food from agriculture or local markets, but 17 percent had to borrow money to purchase food.

Food stocks were low in all areas in October 2022, with IDP and host households having depleted more than 80 percent of their stocks. The department of Mayo-Danay had no stocks, due to flooding and elephant invasions. In Mayo-Danay, Mayo-Sava and Mayo-Tsanaga, over half of IDP children under 5 years old were wasted (IOM DTM, August 2022).

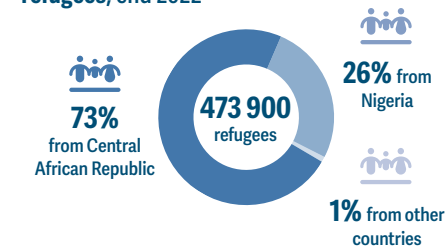
Refugees hosted in Cameroon fled political instability in the Central African Republic and Nigeria. Almost 9 000 refugees arrived in 2022.

Around 15 percent live in seven refugee camps along the eastern border with the Central African Republic and Chad, while 16 percent are in Minawao settlement in the Extrême-Nord region near the northeastern border of Nigeria.

Over 15 000 refugees and asylum-seekers live in urban Yaoundé without receiving food assistance (UNHCR, December 2022).

In the heavily populated Minawao camp, over half of refugees had poor food consumption and resorted to negative livelihood coping strategies to meet essential needs in the 30 days preceding the survey, including selling last female animals, begging and withdrawing children from school. Up to 70 percent of refugee households in the settlement were unable to meet

Number and country of origin of refugees, end 2022



Cameroon also hosted 9 265 asylum-seekers. Source: UNHCR, December 2022.

their essential food needs on their own, compared with about 61 percent of refugee households in the host community. All refugee households – regardless of their location – spent about 64 percent of their monthly household expenditures on food on average, though the actual average per capita food expenditure of refugee households in the host community was double that of households in the settlement. About 72 percent of settlement households had poor or borderline food consumption compared with 48 percent in the host community (WFP & UNHCR, September 2022).

Child wasting prevalence was ‘acceptable’ as per WHO standards, among refugees from Nigeria, but ‘high’ (12.5–15 percent) in seven Central African Republic refugee camps, with severe wasting well above 2 percent (SMART-SENS 2021). Wasting among women ranged from 28 to 37 percent (MUAC <23cm). Refugees in Minawao received a food ration of 1 407 kilocalories (67 percent of the recommended minimum standards) whereas refugees from the Central African Republic in the east received 1 050 kilocalories, or 50 percent of the recommended minimum standard (UNHCR, December 2022).

Stunting prevalence ranged from 38–50 percent (‘very high’), with a large share of refugees severely stunted. The UNHCR breastfeeding target of 75 percent was only met in Minawao camp, while in other locations the rate was as low as 46 percent (SMART-SENS 2021).

NUTRITION

Number of children under 5 years old with wasting, 2022



Source: UNICEF CMR, 2022.

The number of children under 5 years old expected to suffer from wasting in the four northern regions of Cameroon (Extrême-Nord, Nord, Adamaoua and Est), and the Sud-Ouest and Nord-Ouest, is expected to increase from 204 500 in 2022 to 291 000 in 2023. The number of severely wasted children is projected to rise from around 64 400 to 111 800. The deterioration in 2022 partly reflects seasonality patterns as the survey in 2022 was conducted during the lean season whereas the one in 2021 was conducted during the harvest period. Another factor driving the deterioration is the significant increase of acute food insecurity in 2022.

According to the December 2022 SMART survey, the prevalence of wasting was 8 percent in the Extrême-Nord, but lower in Adamaoua (6.6 percent), Est (3.9 percent) and Nord (6 percent) (SMART, December 2022). The nutrition situation in the Sud-Ouest and Nord-Ouest regions was unclear due to the absence of a comprehensive nutrition anthropometric survey using SMART methodology.

According to the same survey, the prevalence of stunting among children under 5 years old is 'very high' (>30 percent) by WHO thresholds in all four northern regions (SMART, December 2022).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Inadequate food consumption in terms of quantity and variety leading to nutrient intake deficits is a significant contributing factor to the poor nutrition situation.

Inadequate maternal and child-feeding practices Nearly one-third (32.4 percent) of households have a poorly diversified diet, more so in the Extrême-Nord (39.1 percent) and Nord-Ouest (36.7 percent) regions (HNO, 2022). In Nord-Ouest, only 42.5 percent of infants under 6 months old were exclusively breastfed. In Sud-Ouest, it was slightly higher at 58.3 percent.

The proportion of children aged 6–23 months who met the Minimum Dietary Diversity was reported to be low at 31.8 percent in Nord-Ouest and 20.7 percent in Sud-Ouest (HNO, April 2022).

Micronutrient deficiencies account for anaemia in approximately 59 percent of children aged 6–59 months and 41 percent of women of reproductive age, indicating a severe public health problem for both groups.

High prevalence of infectious diseases The weak disease surveillance system increases the risk of epidemics due to late detection and limited response capacity (HNO, April 2022). Heavy rains and floods enable the spread of cholera, and from August 2022 there were cholera and mpox outbreaks in the Extrême-Nord, Sud-Ouest, Nord-Ouest and Littoral regions. By December, 14 885 confirmed cholera cases and 298 deaths were recorded, according to the Ministry of Health (DG ECHO, December 2022). Across Extrême-Nord, 20–30 percent of children aged 6–59 months suffered fever, diarrhoea or cough.

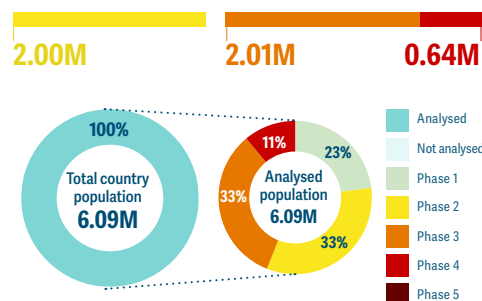
Limited access to health and nutrition services Conflict in Extrême-Nord, Sud-Ouest and Nord-Ouest has had a major impact on access to essential healthcare. In Sud-Ouest, an estimated 35 percent of health facilities are non-functional or only partially functional (HNO, April 2022).

Poor household environment In Extrême-Nord, 16 percent of the surveyed host community reported accessing safe drinking water as their main priority need while 61 percent reported issues with water quality. In more than half (55 percent) of villages, the population practises open defecation, and in 71 percent of villages, pit latrines without a slab are most common and are reported to be unhygienic and insufficient. In 31 percent of villages, almost all households lacked handwashing facilities at home (HNO, April 2022).

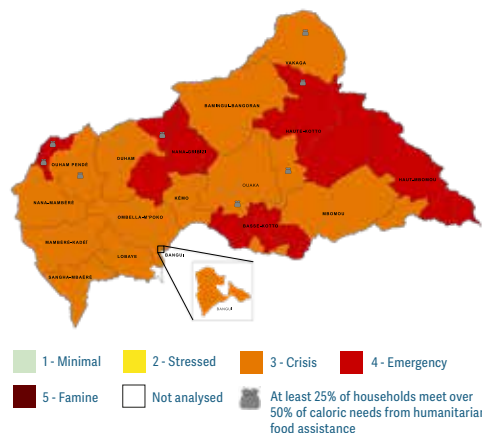
Central African Republic

ACUTE FOOD INSECURITY PEAK 2022

2.65M people or **44%** of the analysed population in IPC Phase 3 or above, **September 2022–March 2023**



IPC acute food insecurity situation, September 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Central African Republic IPC TWG, November 2022.

Food crisis overview

During September 2022–March 2023, around 44 percent of the total population of the Central African Republic was in Crisis or worse (IPC Phase 3 or above) – a slightly lower prevalence than that of the 2021 peak in April–August (47 percent).

The absolute number of people in Crisis or worse (IPC Phase 3 or above) increased by nearly 16 percent. Part of the increase was due to the change in the base population used for the analyses – from 4.9 million people for previous analyses to 6.1 million people.

As insecurity and armed violence continued to have far-reaching consequences on food availability and access, some 19 areas were classified in Emergency (IPC Phase 4) – down from 22 during the 2021 peak period – and the remaining 52 in Crisis (IPC Phase 3). The situation was worst in the Nana-Mambéré prefecture where 64 percent of the population was in Crisis or worse (IPC Phase 3 or above).

A worsening outlook for 2023

In the projected period of April–August 2023, which coincides with the lean season, the situation is expected to worsen with almost 3 million people (49 percent of the population) likely to be in Crisis or worse (IPC Phase 3 or above), including 807 000 in Emergency (IPC Phase 4).

In Haut-Mbomou, Mbomou, Nana-Gribizi, Nana-Mambéré and Ouham Pendé, 60–65 percent of the population will likely be in IPC Phase 3 or above. During this period, 33 sub-prefectures are likely to be in Emergency (IPC Phase 4) and 38 in Crisis (IPC Phase 3). The capital Bangui will remain in a situation of Crisis (IPC Phase 3) with around 203 000 people in IPC Phase 3 or above, down from 327 000 in April–August 2021.

The most-affected populations countrywide are those displaced by violence as well as poor households in urban and peri-urban areas whose access to food is limited by low purchasing power caused by rising food prices and deteriorating livelihoods (IPC, November 2022).

Drivers of the crisis, 2022–23

Conflict/Insecurity Even though military clashes decreased in intensity between January and September 2022, persisting insecurity and armed violence (including conflicts associated with transhumance) continued to hinder farmers' access to crop-growing areas and agricultural inputs, reflected in the drop in agricultural production (FAO-GIEWS, September 2022).

The activities of armed forces – especially in the northern areas – impeded market access, contributed to rising food and non-food prices, damaged livelihoods and commercial activities, and continued to drive displacement (HNO 2023, November 2022). The reported destruction of livelihoods and productive assets and burning of commercial trucks by armed groups in some areas hampered the access and delivery of humanitarian aid as did the presumed presence of explosive devices in the west and northwest (IPC, September 2022).

From April to August 2023, tensions/violence between transhumance herders and farmers, and between armed groups and transhumance herders, are expected to continue at the same pace (IPC, September 2022).

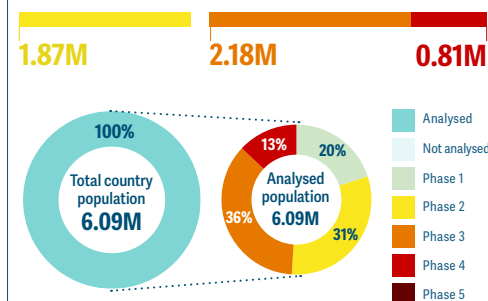
Economic shocks Over the first seven months of 2022, food prices continued to rise as a result of the rising cost of petroleum products and transport of goods, largely related to the war in Ukraine. During the third quarter of 2022, prices of most locally produced and imported food commodities stabilized or decreased – though they were still higher year-on-year by November (WFP, December 2022).

Cameroon's export ban on wheat flour, rice and other food products also contributed to the upward pressure on food prices (FAO-GIEWS, September 2022).

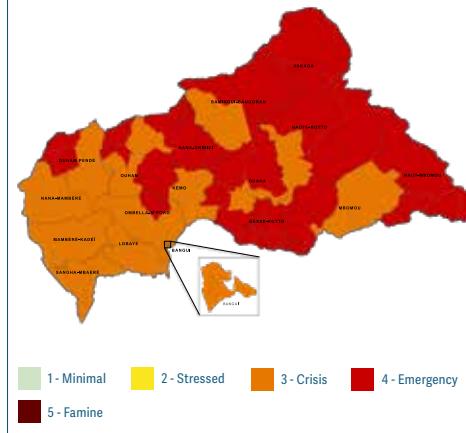
Elevated international prices of fuel and fertilizers reportedly led to a lower use of agricultural inputs in 2022, with a negative impact on yields (FAO-GIEWS, September 2022). Low access to seeds and tools limited household production capacity (IPC, September 2022).

ACUTE FOOD INSECURITY PROJECTION 2023

2.99M people or **49%** of the analysed population in IPC Phase 3 or above, **April–August 2023**

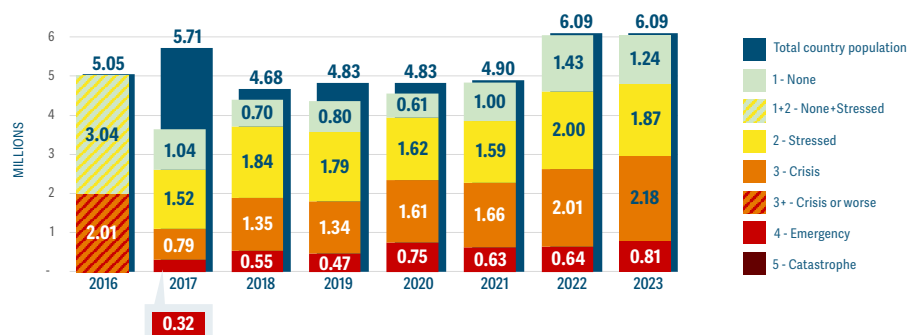


Projected IPC acute food insecurity situation, April–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Central African Republic IPC TWG, November 2022.

Numbers of people by phase of acute food insecurity, 2016–2023



See Appendix 1, figure 5 for datasets from all analysis rounds between 2016 and 2023.
Source: Central African Republic IPC TWG.

From April to August 2023, prices of most agricultural products (corn, local rice, palm oil and cassava) will remain as high or higher than in September 2022–March 2023 due to low market availability, the rise in transport costs, insecurity and the state of roads limiting the supply of markets in difficult-to-access areas. The ongoing war in Ukraine could add further inflationary pressure (IPC, September 2022).

Weather extremes From April to August 2023, forecast intense rains are expected to negatively affect second-cycle crops, particularly in the north, east, northwest, Bangui and its surroundings. This would deplete food reserves prematurely, leaving households dependent on the market (IPC, September 2022).

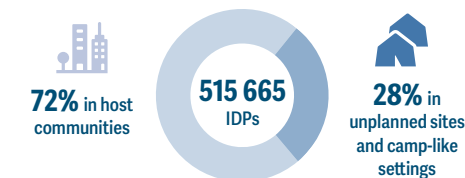
Acute food insecurity since 2016

The Central African Republic has consistently been included as a major food crisis since the first edition of the GRFC and among the report’s ten countries with the highest prevalence of its total population in Crisis or worse (IPC Phase 3 or above) each year.

With the exception of the GRFC 2018 referring to 2017, at least 40 percent of its population has been in Crisis or worse (IPC Phase 3 or above) during the peak period each year, peaking at 51 percent in May–August 2020 when the economic impacts of COVID-19 restrictions were particularly severe. These disrupted food supply chains, curbed income-generating opportunities, and pushed up transportation costs and food prices, reducing the purchasing power of already poor households (FSIN, May 2022).

DISPLACEMENT

IDPs living in host communities or displacement sites



Source: Government of the Central African Republic, December 2022.

IDPs By the end of 2022, more than half a million people were internally displaced in the Central African Republic (UNHCR, February 2023). About a quarter of them were displaced for the first time between January and August 2022 largely due to the increase in military operations in the central, eastern and northeastern parts of the country, and heightened conflicts linked to transhumant movements. In addition, flooding from July led to the temporary displacement of populations, particularly in the urban area of Bangui and in Ombella-M’Poko (IOM DTM, October 2022).

Nearly 100 000 moved for the first time in 2022, including 65 800 displaced between June and August 2022.

The majority were living with host families (72 percent) and around 28 percent in dedicated sites (OCHA, February 2023). The highest numbers were in Ouaka (57 275) followed by Ombella-M’Poko (56 248) and Haute-Kotto (56 126). Around 32 percent of IDPs have been displaced for at least four years (IOM DTM, October 2022).

The main drivers of displacement are armed conflict (53 percent), political crises (25 percent), flooding (9 percent) and intercommunal conflict (8 percent) (IOM, October 2022).

The dominant displacement pattern has been from around major cities to safer cities or villages, or by crossing into border areas of neighbouring countries – Cameroon, the Democratic Republic of the Congo and Chad – at times moving back and forth in a pendular manner.

While the scope and magnitude of internal displacements are expected to reduce slightly in 2023, the already limited service infrastructure in villages and cities considered safe will remain under strain (HNO, November 2022).

Living conditions at IDP sites and with host families are harsh. Host families must share living space and already scarce resources. Both suffer high morbidity levels as latrines are reported to be in poor condition or unusable in almost all the localities hosting IDPs.

The precarious living conditions in the host localities and the improved security situation in some parts of the country are driving IDPs to return to their places of origin. This return is often spontaneous and unassisted, leaving the returnees to rebuild their lives with little or nothing, as their initial displacement often resulted in the loss of their homes and assets. It increases pressure on the already very limited social infrastructure within communities (HNO, November 2022).

The most cited main sources of food in IDP host areas is own agricultural production (96 percent), with at least half having access to land for cultivation in 77 percent of locations. However, IDPs are faced with a lack of seeds, farming tools and financial means, which can affect agricultural production and therefore food access for IDPs (IOM, December 2022).

Other sources of food are hunting, gathering, fishing (62 percent) and market purchases (60 percent). Food assistance (from the government, international organizations and NGOs) constitutes the main source of food for most of the population in 11 percent of localities. This proportion reaches 40 percent in Ouaka and 23 percent in Nana-Gribizi.

Refugees The Central African Republic is a source of refugees rather than a destination country, as prolonged conflict and intercommunal violence have caused refugee outflows to neighbouring countries. Still, it hosts 11 260 refugees, mainly from the Democratic Republic of the Congo (56.7 percent) and South Sudan (23.8 percent). The rest are from Chad, Rwanda and the Sudan. They mainly live in Bangui, Obo, Ndele and Bambari (UNHCR, January 2023).

NUTRITION

Number of children under 5 years old with wasting, October 2022–August 2023



140 600 pregnant and lactating women acutely malnourished, 2023

Source: IPC, January 2023.

The acute malnutrition situation deteriorated for both children under 5 years and pregnant and lactating women (PLW) between 2021 and 2022. The number of children suffering from wasting increased from 214 000 in September 2021–August 2022 to 298 000 in October 2022–August 2023, according to an IPC AMN analysis. The number of severely wasted children increased from 67 000 to 86 000, and the number of PLW acutely malnourished from 98 000 to 140 600 (IPC, October 2021; IPC, January 2023).

However, according to the results of the 2022 SMART survey, the acute malnutrition situation at the national level has slightly improved overall since the 2019 SMART survey, with child wasting prevalence decreasing from 9.1 percent to 6.6 percent, still considered a ‘medium’ prevalence. The nutritional situation of PLW remains very worrying with 9.9 percent acutely malnourished at the national level (IPC, January 2023).

In October 2022–February 2023, one sub-prefecture in Ouham province was classified in Critical (IPC AMN Phase 4) and 15 sub-prefectures and the Nana-Mambéré prefecture were in Serious (IPC AMN Phase 3). During March–August 2023, the situation was projected to deteriorate significantly with ten sub-prefectures moving from IPC AMN Phase 3 to IPC AMN Phase 4 (IPC, January 2023).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets In the Central African Republic, there is greater severity of acute food insecurity than acute malnutrition. The majority of the 17 sub-prefectures classified in Emergency (IPC Phase 4) acute food insecurity have been classified in Serious (IPC AMN Phase 3) acute malnutrition.

This difference in severity is explained by the seasonality of acute food insecurity and malnutrition as well as the timing of the analysis (the food security analysis corresponded to the lean period). The IPC AMN analysis indicates that, while acute food insecurity contributes substantially to acute malnutrition, other factors mitigate the nutritional situation including good prevalence of exclusive breastfeeding of around 80 percent, high coverage of measles vaccinations (above 80 percent) and vitamin A supplementation (IPC, January 2023).

However, deteriorating food security was expected to have a marked negative impact on the nutritional situation in the projection period.

Inadequate maternal and child-feeding practices Poor child-feeding practices beyond weaning lead to insufficient quality and quantity of food intake at the household level. Fewer than 10 percent of children benefited from a Minimum Acceptable Diet in most of the sub-prefectures analysed. This is considered an Extremely Critical level (IPC, January 2023).

Anaemia prevalence for women of reproductive age was estimated nationally at 46.8 percent, a severe public health problem. Among children under 5 years it was as high as 73.6 percent, also indicating a severe public health problem (WHO, 2019).

Poor household environment Inadequate access to safe drinking water and poor hygiene conditions (inadequate sanitation) contribute to the high prevalence of childhood diseases – notably diarrhoea, acute respiratory infections and measles outbreaks. At the national level, 30 percent of the population uses an unimproved water source or surface water (HNO, January 2023).

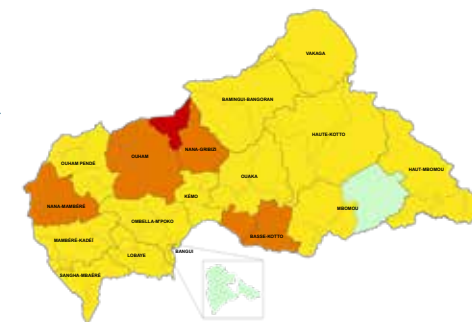
Access to sanitation remains a concern as more than 22 percent of households resort to open defecation.

This proportion reaches or exceeds 40 percent in the sub-prefectures of Bakala, Kabo, Kaga Bandoro, Kouango, Mala, Markounda and Nana-Bogouila. Floods could worsen access to water and sanitation (IPC, January 2023).

High prevalence of infectious diseases The southeast is highly vulnerable to disease outbreaks given the trade and community ties with areas in the Democratic Republic of the Congo where the Ebola virus disease (EVD) is recurrent. In 2023, floods will likely continue to create an environment conducive to these epidemics, particularly in Ouango, Rafai and Bangassou. The risk of epidemics linked to preventable diseases is also high in the northwest – where many health centres are no longer supplied with vaccines and are deserted by health workers (HNO, January 2023).

Limited access to health and nutrition services Conflict and insecurity continue to have a major negative impact on basic services, which were already inadequate and further reducing the coverage of nutritional interventions. Insecurity and lack of infrastructure makes it difficult for households to access nutritional assistance and prevention activities. Due to structural deficits, the health system is unlikely to be able to respond to epidemics, including EVD and waterborne and infectious diseases (HNO, January 2023).

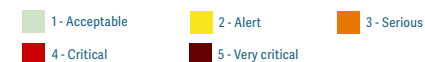
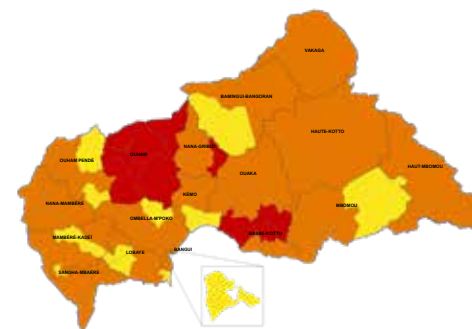
IPC acute malnutrition situation, October 2022–February 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Central African Republic IPC TWG, January 2023.

Projected IPC acute malnutrition situation, March–August 2023



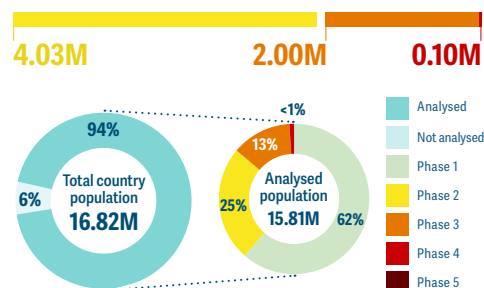
The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Central African Republic IPC TWG, January 2023.

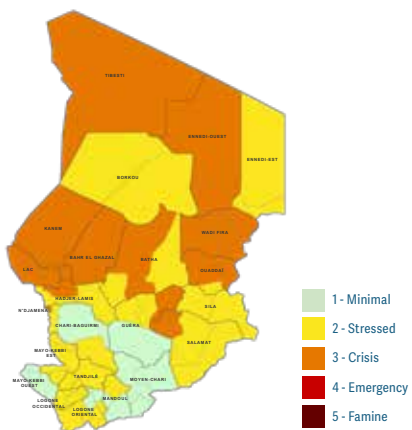
Chad

ACUTE FOOD INSECURITY PEAK 2022

2.10M people or **13%** of the analysed population in CH Phase 3 or above, June–August 2022



CH acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Cadre Harmonisé, March 2022.

Food crisis overview

In June–August 2022, the number of people facing Crisis or worse (CH Phase 3 or above) reached the highest level recorded for Chad by the CH – around 18 percent higher than the same period in 2021, which had represented the previous highest number. This reflected the ongoing conflict and violence that continued to disrupt trade and cause displacement, below-average market supplies and high food prices that further eroded households' purchasing power. Twenty-four of Chad's 69 departments were projected to be in Crisis (CH Phase 3) (CH, March 2022).

Marked improvement projected for 2023

The situation is projected to improve markedly during the 2023 lean season with the share of the analysed population in CH Phase 3 or above decreasing from 13 percent to 9 percent, corresponding to almost 600 000 fewer people.

Most of the people in need of urgent food assistance are projected to be in Crisis (CH Phase 3) and relatively few in Emergency (CH Phase 4). Nine departments – Bahr el Ghazal Ouest, Chari, Foul, Nord Kanem, Kanem, Kaya, Mamdi, Mangalmé and Wayi – are projected to be in Crisis (CH Phase 3) (CH, November 2022).

Drivers of the crisis, 2022–23

Conflict/insecurity Persisting armed conflicts and intensified farmer–pastoralist clashes, mostly in the Lac and Tibesti regions, hindered agricultural activities and restricted farmers' access to fields, limiting the area planted with cereal crops and contributing to localized production shortfalls (FAO-GIEWS, September 2022).

Conflict and insecurity, particularly in the Lac region, caused displacement and restricted humanitarian access. In areas of military operation where Boko Haram is active, fishing and grazing are prohibited, and some markets closed to prevent armed groups from getting

supplies (ACAPS, December 2022). By mid-December, a drop in the flow of processed products (pasta, wheat flour) and imports (rice), due to security disruptions at the border with Libya, contributed to high cereal prices (FEWS NET, December 2022).

On the upside, by the end of 2022, the abundant rains and satisfactory grazing slowed the movement of pastoralists towards the southern transhumance zones compared with the trends of the past three years, easing competition between transhumant herders and agriculturalists in these areas (FEWS NET, December 2022).

Weather extremes Erratic distribution of rains, including localized dry spells in southern areas in May and June, and torrential rains from July, adversely affected crop development. By November 2022, unprecedented flooding had directly affected 1.06 million people in N'Djamena and 18 provinces, destroyed more than 465 000 hectares of cropland and washed away more than 19 000 head of cattle. By early November, 129 500 people were displaced in N'Djamena alone (WFP, November 2022).

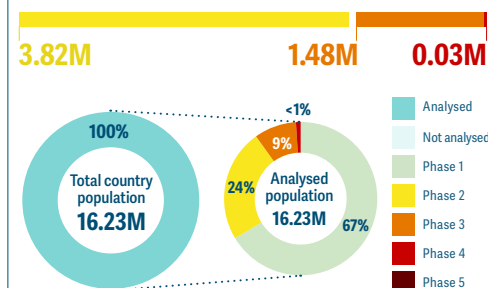
On the positive side, the rains were conducive for cereal production that was slightly above the five-year average (+1.7 percent) and 9.9 percent above 2021 (PREGEC, November 2022).

Abundance of pastures improved the body condition of animals and a rise in livestock prices improved the terms of trade for pastoral and agropastoral households, despite food price increases (FEWS NET, December 2022).

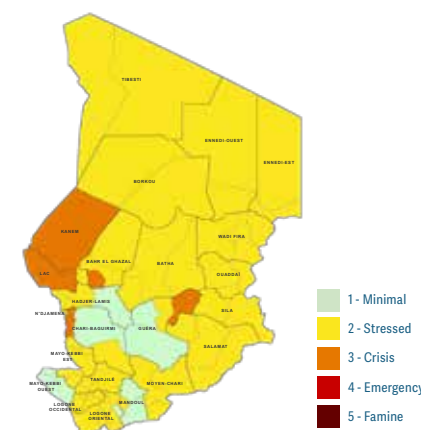
Economic shocks Maize, sorghum and millet prices continued to increase during the first six months of 2022 due to the reduced cereal output in 2021 and lower trade flows, underpinned by conflict-related disruptions and increasing imported food and fuel costs associated with the war in Ukraine. In July, they levelled off or decreased in most markets as the government introduced subsidies to support vulnerable households and contain further price increases, but were still significantly above levels a year earlier (FAO-GIEWS,

ACUTE FOOD INSECURITY PROJECTION 2023

1.51M people or **9%** of the analysed population in CH Phase 3 or above, June–August 2023

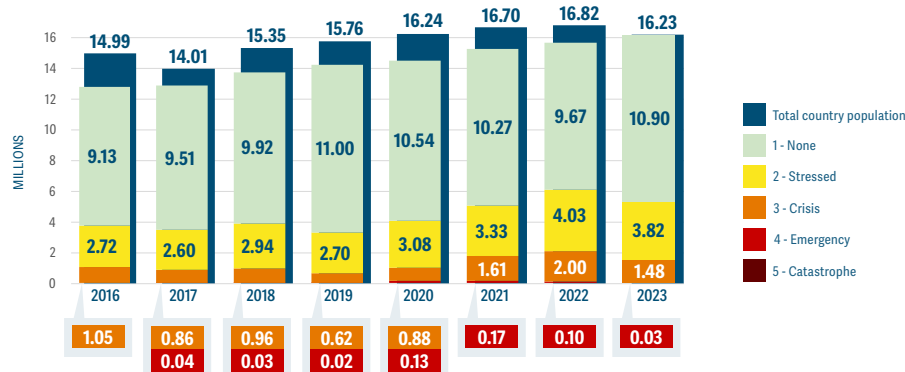


Projected CH acute food insecurity situation, June–August 2023



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Source: Cadre Harmonisé, November 2022.

Numbers of people by phase of acute food insecurity, 2016–2023



See Appendix 1, figure 6 for datasets from all analysis rounds between 2016 and 2023. Source: Cadre Harmonisé.

September 2022). Prices of coarse grains followed mixed trends in August and September, and increased in October and November, reflecting major disruptions to markets and livelihoods following the widespread floods and poor security conditions in the Lac and Tibesti regions. In November 2022, prices of maize were up to 35 percent higher, millet 50 percent higher and sorghum 60 percent higher year-on-year (FAO, December 2022).

In the Lac region, oversupply of labour (due to influxes of displaced people) and lack of demand (due to late retreat of floodwaters) led to below-normal daily wages in most agricultural and agropastoral areas (FEWS NET, December 2022).

Acute food insecurity since 2016

Chad has been included as a major food crisis in all seven editions of the GRFC. During the first three editions, it was included within the Lake Chad Basin regional crisis. The number of people in Crisis or worse (CH Phase 3 or above) during the lean season has more than doubled since 2019 due to conflict and insecurity, as well as weather extremes affecting food production, and economic shocks, notably the impact of the COVID-19 pandemic. During the same period, the population in Emergency (CH Phase 4) increased fivefold and those in Stressed (CH Phase 2) from 2.7 million to more than 4 million.

Its continual inclusion in the report is also testimony to its structural fragility. The country ranks 190 out of 191 in the Human Development Index (UNDP, 2022). Chad also ranks in the bottom ten countries in the Fragile State Index and last out of 182 countries in the 2022 ND-GAIN Index on climate change vulnerability.

DISPLACEMENT

IDPs mainly live in displacement sites, 2022



Source: IOM, December 2022.

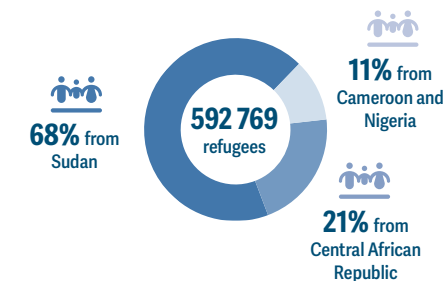
IDPs Most IDPs have been displaced by waves of conflict starting in 2014, with the number quadrupling since 2018 to reach over 381 000 by the end of 2022. Most are in the Lac region, where food insecurity and the lack of shelter are particularly dire.

Armed attacks were the main driver of displacement (86 percent), although about 13 percent of IDPs had abandoned their homes after hearing threats of attacks, after an attack on a neighbouring village or because of fear of insecurity. The majority of IDPs have been forced to flee multiple times (UNHCR, December 2022; Refugees International, September 2022). The majority (66 percent) of IDPs remained in the same sub-prefectures.

In 2022, many fled attacks or were displaced by rising water levels in Lake Chad, in the southwestern Lac region. By December 2022, DTM reported that IDPs had lost their livelihoods and that they had received food assistance from the humanitarian community as well as the local community (IOM, December 2022).

In 2023, it is projected that an estimated 70 000 children from IDP households will suffer from wasting and that around 16 000 pregnant and lactating women among the displaced and refugee population will suffer from acute malnutrition (IPC, February 2023).

Refugees are mainly from the Sudan, 2022



Source: UNHCR, December 2022.

Refugees By the end of 2022, Chad hosted 592 769 refugees and asylum seekers (UNHCR, December 2022) – more than any other country in West and Central Africa – and 6 percent more than at the end of 2021.

More than half (53 percent) were children (UNHCR, February 2023). They had mainly fled political instability, social unrest and insecurity in neighbouring the Sudan, the Central African Republic and Cameroon. They were mainly (84 percent) living in camps with more than half of them hosted in two regions – Ouaddaï (27 percent) and Wadi Fira (24 percent) (UNHCR, February 2023).

Across all 19 camps surveyed, at least half of households had an unacceptable Food Consumption Score (FCS). In 13 camps, at least 30 percent had poor food consumption, reaching more than 65 percent in Oure Cassoni and Touloum (SMART-SENS, 2021).

In 2023, an estimated 60 000 refugee children are projected to be wasted (IPC, February 2023). In 2021, the prevalence of wasting was 'high' or 'very high' in 18 out of 19 assessed refugee camps, with Touloum having the highest level (30.9 percent). The stunting prevalence was 'very high' in all but one camp, reaching 52.1 percent in Dar Es Salaam camp – where some 23.7 percent of children were severely stunted (SMART-SENS, 2021).

Anaemia among children under 5 years was a 'high' public health concern in 13 camps and 'medium' in six. The UNHCR exclusive breastfeeding rate target (>75 percent) was not met in any of the camps (SMART-SENS, 2021).

NUTRITION

Number of children under 5 years old with wasting, 2022



276 300 pregnant and lactating women acutely malnourished, 2022

Source: SMART 2022.

The number of children with wasting under 5 years is expected to increase from 1.75 million in 2022 to 1.78 million in 2023 (SMART 2022). Of these, 414 140 are expected to be severely wasted.

From June to September 2022, the peak period for malnutrition, 19 areas were expected to be in a Serious (IPC AMN Phase 3) situation and 15 in a Critical (IPC AMN Phase 4) situation (IPC, December 2021).

According to the 2022 SMART survey, 8.6 percent of children were wasted at national level, a decrease that shifts Chad down from a 'high' level of wasting in 2021 (10.9 percent) to a 'medium' level by WHO thresholds. The slight decrease could be explained in part by the difference in the timing of the two surveys, with that of 2022 conducted at the end of the harvest in November, and that of 2021 conducted during the lean season in September.

In 2022, the prevalence was higher among boys (9.8 percent) than girls (7.4 percent) and there were strong regional disparities with Wadi Fira, Borkou and Ennedi-Est regions recording a prevalence above the 'very high' threshold of 15 percent, and 11 provinces above the 'high' threshold of 10 percent (SMART 2022). Children aged 6–23 months were more likely to be affected by wasting than those aged 24–59 months (13.3 percent and 6.0 percent respectively).

Nationally, the percentage of severely wasted children was 1.5 percent, down from 2.0 percent in 2021. In Bahr el Ghazal, Wadi Fira, Salamat and Sila, the prevalence remained above the 'very high' threshold of 2 percent (SMART 2022).

The low national prevalence of underweight women (2.1 percent) hides region-level disparities as it ranges from 0.2 percent in Logone Occidental and Mayo-Kebbi Est to 6.4 percent in Batha (SMART 2022).

The national prevalence of stunting among children under 5 years was 'high' at 28.0 percent, 2.4 percentage points lower than that of 2021. This decrease masks regional variations, reaching 'very high' (over 30 percent) in Hadjer-Lamis, Lac, Kanem, Tandjilé, Sila and Batha. Just over 10 percent were severely stunted (SMART 2022).

Drivers of undernutrition

High prevalence of infectious diseases As in 2021, around 19 percent of children aged 0–59 months had diarrhoea in the two weeks preceding the survey. Eight provinces exceeded the national average, namely Lac, Mayo-Kebbi Ouest, Bahr el Ghazal, Mayo-Kebbi Est, Logone Oriental, Kanem, Sila and Chari Baguirmi. Three of these – Bahr el Ghazal, Kanem and Sila – combined high levels of diarrhoea with a wasting prevalence above the 10 percent threshold (SMART 2022).

Nationally, 38.2 percent of children under 5 years old had a fever in the fortnight before the survey. In Bahr el Ghazal and Logone Oriental, more than half of children were affected, while the proportion was above the national average in a further seven provinces. Four of these nine provinces – Bahr el Ghazal, Hadjer-Lamis, Kanem and N'Djamena – had a wasting prevalence above the 10 percent threshold (SMART 2022).

Around 43 percent of boys and girls had acute respiratory infections in the two weeks before the 2022 survey nationally, compared with 29.4 percent in 2021. This increase could be explained by the survey being conducted at the beginning of the cold season. In Hadjer-Lamis, Logone Occidental, Logone Oriental, Ouaddaï and Lac Wadi, more than half of children suffered acute respiratory infections (SMART 2022).

Inadequate maternal and child-feeding practices Exclusive breastfeeding rates for children aged under 6 months are considered 'Extremely Critical' at 7.3 percent and have decreased even further below the already 'Critical' levels of 11.4 percent in 2021. These low levels mask a huge variety across provinces (0 percent in Mandoul to 53.1 percent in Ennedi-Ouest).

Since 2021, there has been a significant improvement in the share of 6–23-month-old children who received the Minimum Acceptable Diet – up from 'Critical' levels (11.5 percent) to 'Serious' (33.8 percent). This improvement might also be linked to the timing of the survey, which took place at the end of the harvest when food is available, accessible and varied, rather than during the lean season when it is scarce and expensive (SMART 2022).

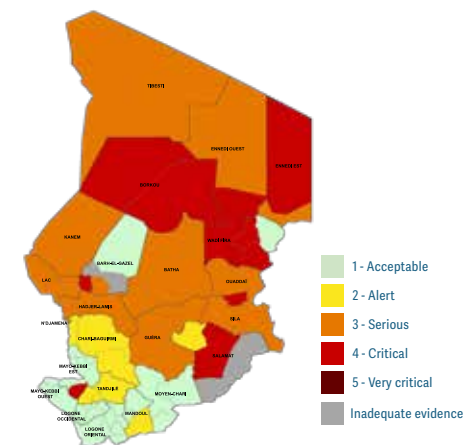
Poor household environment The share of households with an improved water source was very low at 6 percent (UNICEF, 2020).

Limited access to health and nutrition services Access to healthcare and nutrition interventions is limited in Chad. However, vitamin A supplementation coverage has improved (71 percent).

Anaemia data from 2019 indicate a 'severe' public health problem with 66.3 percent of children aged 6–59 months and 45.4 percent of women of reproductive age suffering from anaemia (WHO, 2019).

Food insecurity and lack of access to healthy diets Based on the latest IPC analysis, food insecurity appears to be a minor contributing factor to accessing a healthy diet in the majority of regions, with the aforementioned drivers more significant (IPC, December 2021).

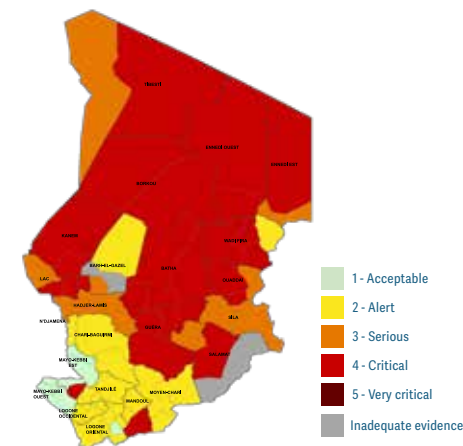
IPC acute malnutrition situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Chad IPC TWG, February 2023.

Projected IPC acute malnutrition situation, June–September 2023




The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Chad IPC TWG, February 2023.

Colombia (refugees and migrants)

ACUTE FOOD INSECURITY PEAK 2022

 **2.88M** people or **62%** of the total analysed population were estimated to be facing moderate or severe acute food insecurity in June–August 2022

Source: WFP, November 2022.

Food crisis overview

The acute food insecurity situation of refugees and migrants in Colombia was of concern due to increasing economic shocks that have added to the negative impacts of conflict and weather extremes.

The country hosts the world's largest number of refugees and migrants from the Bolivarian Republic of Venezuela worldwide. By August 2022, the Venezuelan migrant population was estimated at about 4.8 million, which includes 2.5 million migrants and refugees with intention to settle and about 2.3 million pendular and in transit migrants (R4V Colombia, 2022).

This population was included in the GRFC 2023 for the first time since 2019 and 2020, when it was part of the regional crisis of migrants from the Bolivarian Republic of Venezuela.

According to a WFP food security assessment, about 2.88 million Venezuelan refugees and migrants, or 62 percent of the total refugees and migrant population, were estimated to be suffering from moderate or severe acute food insecurity in June–August 2022, as per WFP CARI methodology. This represents a deterioration compared with the previous analysis conducted by WFP in 2019, when 55 percent of the total population of 1.6 million refugees and migrants with intention to settle faced moderate and severe acute food insecurity, as per WFP CARI methodology (WFO, November 2022).


The situation was worst among pendular and in transit migrants, with 73 percent of people in both these groups facing moderate or severe acute food insecurity compared with about 52 percent of people with the intention to settle.

In terms of severity, about 48 percent of the total refugee and migrant population faced moderate acute food insecurity and about 14 percent faced severe acute food insecurity. Disaggregated by population group, about 19 percent of pendular migrants and 37 percent of in transit migrants faced severe acute food insecurity compared with 7 percent of those with intention to settle.

Overall, about half of refugee and migrant households did not consume an adequate diet, consumed fewer than three meals per day and had low dietary diversity. Among refugees and migrants, acute food insecurity is highest among certain socioeconomic groups, particularly indigenous households and afro-descendent groups.

For indications of the acute food insecurity of the national population, see *Spotlight: Countries of concern with data gaps*.

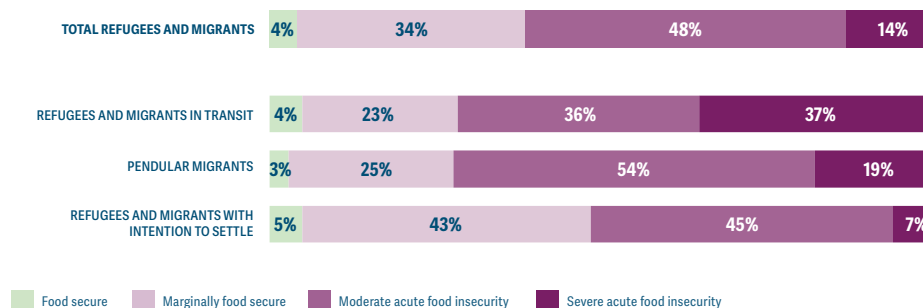
Drivers of the crisis, 2022–23

 **Economic shocks** Refugees and migrants from the Bolivarian Republic of Venezuela have fled a country suffering from years of economic hardship and political strife and had very fragile livelihoods in the host country, which increased their socioeconomic vulnerability amid severe integration difficulties.

Colombia has experienced successive years of economic shocks including the COVID-19 pandemic and the economic impacts of the war in Ukraine. Macroeconomic challenges in Colombia in 2022, notably high inflation, eroded the purchasing power of poor refugee and migrant households, severely constraining their food access.

By the end of 2022, annual food inflation was 27.8 percent (DANE, January 2023), reflecting Colombia's reliance on imports of food and agricultural inputs, sharp currency

Numbers of people by phase of acute food insecurity, June–August 2022




Source: WFP, November 2022.


depreciation and increasing international prices of commodities, largely due to the effects of the war in Ukraine on global markets (WFP, November 2022).

By the end of 2022, large efforts had been made to regularize and integrate refugees and migrants in Colombia, with many granted a Temporary Protection Status (TPS), increasing their access to social protection programmes (R4V, November 2022). Nevertheless, many refugees and migrants still face access barriers to official and informal safety nets, which increase their vulnerability (WFP, November 2022).

In 2022, over 50 percent of refugee and migrant households reported a year-on-year decline in income (WFP, November 2022), which is of concern as about 63 percent of the migrant population was estimated to be monetarily poor in 2021, with 24 percent being extremely poor (DANE, June 2022).

 **Conflict/insecurity** Levels of acute food insecurity among refugees and migrants tend to be most severe in Colombia's border departments of Arauca, La Guajira, Cesar, Norte de Santander and Nariño, where poverty rates and unemployment are higher and where armed conflict can

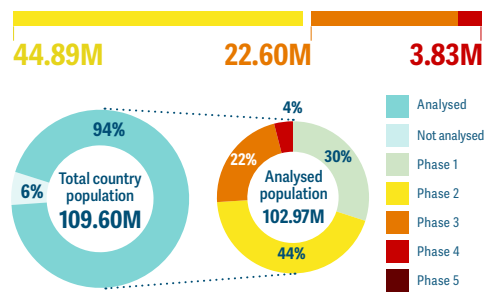
restrict movements and exacerbate vulnerabilities (WFP, November 2022).

 **Weather extremes** As of October 2022, about 460 000 people – nearly 60 percent of them in the departments of Antioquia, La Guajira, Bolívar, Chocó and Cesar – were affected by flooding and landslides associated with La Niña, as well as by the landfall of hurricane Julia in early October (OCHA, 2022), which further constrained food access and availability in areas already affected by high poverty levels.

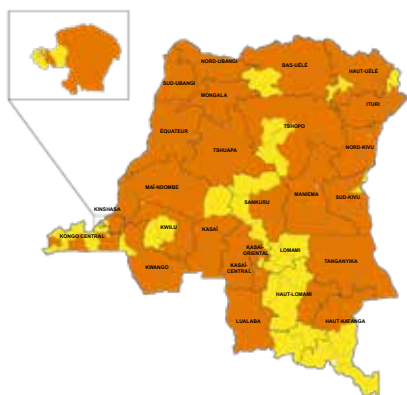
Democratic Republic of the Congo

ACUTE FOOD INSECURITY PEAK 2022

26.43M people or **26%** of the analysed population in IPC Phase 3 or above, July–December 2022



IPC acute food insecurity situation, July–December 2022



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

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Democratic Republic of the Congo IPC TWG, October 2022.

Food crisis overview

The number of people in Crisis or worse (IPC Phase 3 or above) remained very high in the last six months of 2022 at 26.43 million (representing 26 percent of the analysed population). This figure marks a decline by 800 000 people compared with the 2021 peak of 27.26 million in February–July.

More marked was the decrease in the number of people in Emergency (IPC Phase 4), down by around 2.9 million between 2021 and 2022. While these decreases must be considered in the context of an almost 7 million increase in the population analysed, the percentage of people in IPC Phase 4 has also fallen from 7 percent to 4 percent, largely due to improving security in certain areas, the reopening of the border with Angola and rehabilitation of key roads favouring resumption of trade, as well as the easing of COVID-19 measures (IPC, December 2022).

The highest numbers of acutely food-insecure people in need of urgent assistance were in the provinces of Nord-Kivu, Kinshasa, Kasai-Central, Sud-Kivu and Tanganyika – each with more than 1.5 million people in IPC Phase 3 or above. In some territories and cities in Ituri, the Kasai provinces, Nord-Kivu and Sud-Kivu, Kwilu, Lomami, Maniema, Mongala, Tanganyika, Nord-Ubangi and Sud-Ubangi, 40–50 percent of the population was in IPC Phase 3 or above.

The most-affected populations were IDPs, returnees, households hosting displaced or returned families, and those living in conflict zones or zones affected by natural disasters, as well as the poorest populations in urban and peri-urban areas who have low purchasing power and high dependence on markets for food supplies. More than 6 million people – 21 percent of the population – living in urban areas were in IPC Phase 3 or above.

The territories of Beni and Masisi in Nord-Kivu had 15 percent of their populations in Emergency (IPC Phase 4), although this did not reach the threshold to classify the whole area in IPC Phase 4 (IPC, October 2022).

Improvement projected for 2023

In the first six months of 2023, the number of people in IPC Phase 3 or above was expected to decrease to 24.5 million and the number of areas classified in IPC Phase 3 to reduce from 124 to 107. Almost 1 million fewer people were expected to be in Emergency (IPC Phase 4) with the arrival of the harvests facilitating food availability and reducing pressure on food prices. A positive macroeconomic projection at the national level was expected to help stabilize the local currency and market prices, thereby improving households' food access (IPC, October 2022).

Drivers of the crisis, 2022–23

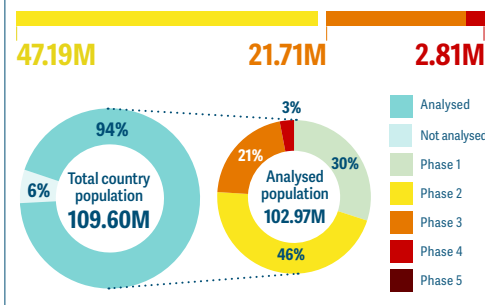
Conflict/Insecurity Despite efforts to prevent and stabilize conflicts, areas of insecurity persist, particularly in the provinces of Ituri, Kasai, Nord-Kivu and Sud-Kivu, and Tanganyika, where more than 100 armed groups operate (IPC, December 2022). In 2022, Ituri and Nord-Kivu experienced a peak in violence and fatalities not seen since 2019, causing deaths, displacement, destruction of crops and loss of livelihoods (FEWS NET, August 2022). Conflict and mass displacement disrupted households' participation in agricultural activities, contributing to lower season B harvests compared with the previous three-year average for the eastern zone, a trend already observed in previous seasons (IPC, December 2022).

Economic shocks Conflict and rising global energy and food prices due to the ongoing war in Ukraine put upward pressure on transport costs and food prices. These, twinned with poor access to employment opportunities, were the main contributory factors to food insecurity in urban areas, where most households depend on markets.

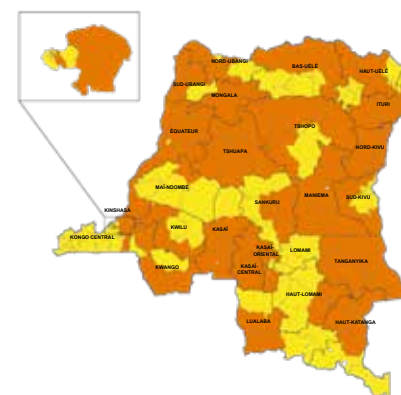
According to the June Bulletin of the Joint Market Monitoring Initiative, the cost of the Minimum Food Basket (MFB) increased nationally from January to June 2022, with a peak in April followed by a slight decrease in prices from May and the start of the season B harvests

ACUTE FOOD INSECURITY PROJECTION 2023

24.52M people or **24%** of the analysed population in IPC Phase 3 or above, January–June 2023



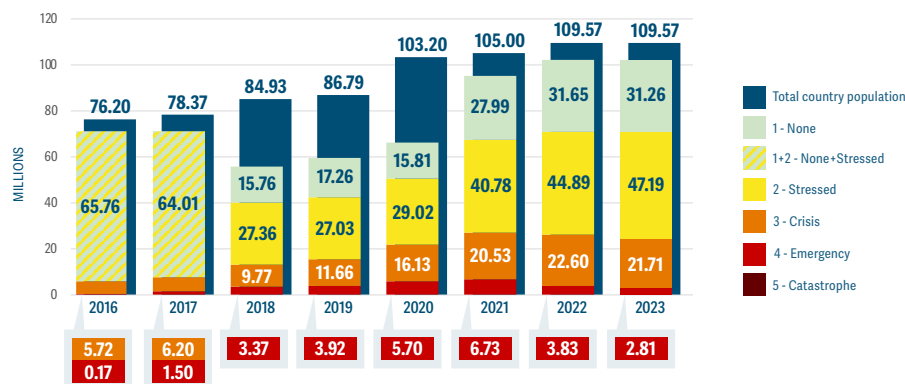
Projected IPC acute food insecurity situation, January–July 2023



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

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Democratic Republic of the Congo IPC TWG, October 2022.

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Democratic Republic of the Congo IPC TWG.

(IPC, December 2022). By December 2022, staple food prices were 56 percent above the recent five-year average and 32 percent above the same period of the previous year (FEWS NET, December 2022).

Crop pests and livestock diseases Agricultural activities were affected by crop diseases such as cassava mosaic and fall army worm, which ravaged maize crops. Nearly 47 percent of households surveyed as part of the 2022 Emergency Food Security Assessment declared having experienced epizootic disease-related livestock losses during the preceding six months (IPC, December 2022).

Weather extremes From October 2022, excessive precipitation triggered floods in several localities, particularly in the central-northern provinces of Maniema, Tshopo and Équateur, which damaged standing crops and hampered access to lands, exacerbating food insecurity in an area already burdened by displacements (FEWS NET, December 2022). Around 5 000 households were affected by floods and landslides across five municipalities in Kinshasa in December 2022 (OCHA, December 2022).

Acute food insecurity since 2016

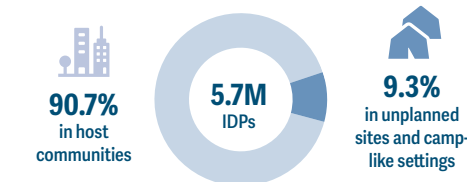
For all seven editions of the GRFC, the Democratic Republic of the Congo has been among the countries with the highest number of people in Crisis or worse (IPC Phase 3 or above). As well as being a large and populous country, this has resulted from a combination of factors including one of the world's longest-running armed conflicts, widespread increases in food prices and transport costs, weather extremes, crop diseases, pest attacks, and the impact of COVID-19 and other epidemics including Ebola, underpinned by widespread poverty. Over 60 million people, or 64 percent of the population, are living on less than USD 2.15 a day (WB, March 2023).

The coverage of IPC analyses has increased between 2018 and 2022, from 101 areas to a national coverage of 185 including 138 rural and 47 urban areas, of which 24 are municipalities in Kinshasa. Since 2018, the population covered by the analyses has increased from 56.2 million to nearly 103 million people in 2022.

After a 2020 peak when 33 percent of the analysed population was in IPC Phase 3 or above, the proportion of people in these phases decreased to 26 percent in July–December 2022 and is projected to decrease further to 24 percent in January–June 2023.

DISPLACEMENT

IDPs living in host communities or displacement sites



Source: HNO, January 2023.

IDPs The Democratic Republic of the Congo has the largest internally displaced population in Africa (UNHCR, February 2023). As of 31 December 2022, over 5.7 million people remained displaced due to one of the world's longest-running armed conflicts. Most IDPs (90.7 percent) live in host families, while only 9.3 percent live in camps (HNO, January 2023).

While conflicts, armed attacks and clashes remain the main drivers of displacement (83.5 percent), other drivers include intercommunal and land conflicts (11.9 percent), and natural disasters, including floods and landslides (4.1 percent) (UNHCR, December 2022).

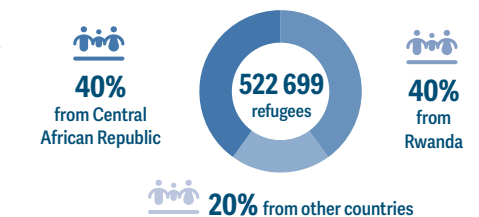
Acute food insecurity is of high concern for millions of IDPs due to disrupted livelihoods. Most live in the eastern provinces of Nord-Kivu, Sud-Kivu, Tanganyika, Ituri, Maniema and the Kasai provinces, where levels of acute food insecurity are very high (UNHCR, December 2022).

For those living in camps and settlements, their situation is aggravated by food ration reductions and other cuts to essential services due to funding shortages, forcing many IDPs to resort to negative coping strategies, increasing their vulnerability to exploitation and abuse.

Communities hosting IDPs must share their already scarce resources with more people, compelling both displaced and host households to adopt harmful coping strategies such as selling their means of production, borrowing money to buy food, or consuming seeds and unripe crops. Such strategies affect their current and future food security status (HNO, January 2023).

The persisting conflict, further aggravated by the lingering impacts of COVID-19, Ebola and measles outbreaks, acute food insecurity, and natural disasters, are expected to worsen the displacement situation in the Democratic Republic of the Congo in 2023 (UNHCR, February 2023), both in terms of numbers of displaced people and the deterioration of food security and their living conditions.

Refugees mainly from Central African Republic and Rwanda



Other countries: Sudan (11%), Burundi (8%), Angola, Chad, Côte d'Ivoire, Eritrea, Liberia, Congo, Sierra Leone, Somalia, Syria and Uganda.

Source: UNHCR, February 2023.

Refugees The country hosts over 520 000 refugees and asylum seekers. Most of them fled from violence in neighbouring countries, mainly the Central African Republic and Rwanda. They reside in 20 of the country's 26 provinces, mainly in the north and east: Nord-Kivu, Sud-Kivu, Nord-Ubangi, Sud-Ubangi, Haut-Uélé and Ituri. These provinces are among the most underserved and insecure in the country with low access to healthcare and high levels of acute food insecurity, acute malnutrition, epidemics and natural disasters (HNO, January 2023).

Most refugees (74 percent) live with host families while 25 percent live in camps, most of which are difficult to access. One percent live in urban areas (HNO, December 2021).

The wave of violence following the presidential elections in the Central African Republic brought 92 000 new refugees to the Democratic Republic of the Congo, mainly living in poor and underserved areas of the country. According to an October 2021 WFP survey,

only 9 percent of households lived in permanent housing. Only 33 percent of households had acceptable food consumption. While almost all refugee heads of household were employed before arriving in the country, 71 percent were unemployed in displacement (UNHCR & WFP, May 2022).

NUTRITION

Number of children under 5 years old with wasting, July 2022–June 2023



2.20M pregnant and lactating women acutely malnourished, July 2022–June 2023

Source: Democratic Republic of the Congo IPC TWG, October 2022.

According to the IPC AMN analysis covering 150 out of 189 health zones, 2.78 million children under 5 years were expected to suffer from wasting from July 2022 to June 2023. Of them, some 0.89 million were expected to be severely wasted.

Nearly half of the analysed areas covered in the IPC AMN analysis were classified in Serious or worse (IPC AMN Phase 3 or above) – 120 in Serious (IPC AMN Phase 3) and 46 in Critical (IPC AMN Phase 4) from July to December 2022. Between January and June 2023, a significant deterioration in the nutritional situation is expected, with 253 analysed areas projected to be in Serious or worse (IPC AMN Phase 3 or above) – including 50 in Critical (IPC AMN Phase 4) – unless urgent action is taken to address the local factors that aggravate acute malnutrition (IPC, October 2022).

Drivers of undernutrition

Inadequate maternal and child-feeding practices The majority of children in analysed areas classified in Serious or worse (IPC AMN Phase 3 or above) do not have access to an adequate quality of diet, with only 5–15 percent of children aged 6–23 months receiving a Minimum Dietary Diversity (MDD).

Low rates of exclusive breastfeeding for infants under 6 months, continued breastfeeding and early introduction of adequate complementary foods are more marked in health zones in Kwango, Maï-Ndombe, Kwilu, Sankuru, and Kasai-Oriental and Kasai-Central provinces (IPC, October 2022).

Limited access to health and nutrition services The volatile security situation impacted the delivery of basic social services, nutrition services and humanitarian aid. Poor access and availability of health services persist, with only 0.28 doctors and 1.19 nurses and midwives per 10 000 people (IPC, October 2022).

Remoteness of communities, vaccine hesitancy, and low measles vaccination coverage and vitamin A supplementation are barriers in Haut-Lomami, Tanganyika, Sud-Kivu, Tshuapa, Kwango, Kasai-Oriental and Maï-Ndombe (IPC, October 2022).

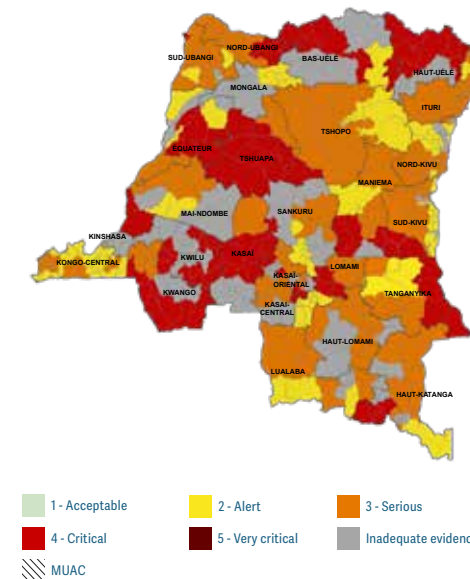
High prevalence of infectious diseases Diseases such as measles and malaria are prevalent, further increasing malnutrition risks among children. In July 2022, the country experienced its 14th outbreak of Ebola virus disease in 46 years, leading to movement restrictions that affected markets. Over the past four years, six outbreaks occurred in two provinces (Nord-Kivu and Équateur) and in April 2022, another case was confirmed in Mbandaka, Equateur province, raising fears of another outbreak. Sankuru province faced a cholera outbreak that started in mid-August while the cholera caseload in Tanganyika province in October 2022 was three times higher than the same period in 2021 (IPC, October 2022).

Around 40 percent of households do not have access to improved water points and more than 60 percent lack access to adequate sanitation facilities. Flooding in central and northern provinces affected the already weak health, water and sanitation infrastructure, contributing

to degrading the nutritional status of the most vulnerable groups (IPC, October 2022).

Food insecurity and lack of access to healthy diets Overall, high levels of acute malnutrition are consistently reported in areas where acute food insecurity was also high, suggesting that acute food insecurity contributes substantially to malnutrition, although it is not the only driver. Out of the 78 territories covered in both analyses, nearly half had a nutritional classification that was more severe than the IPC acute food insecurity classification: among these 38 territories, 31 had a Critical (IPC AMN Phase 4) malnutrition situation (IPC, October 2022).

IPC acute malnutrition situation, July–December 2022



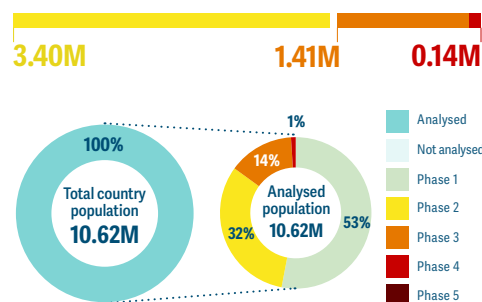
The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Democratic Republic of the Congo IPC TWG, October 2022.

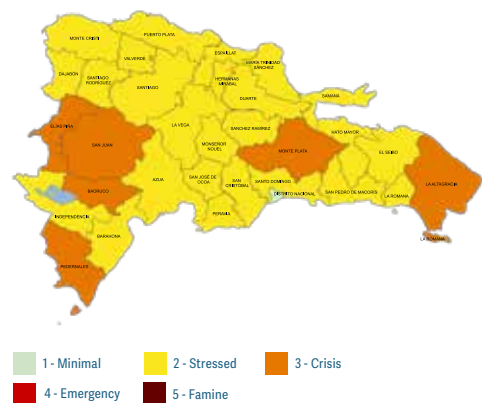
Dominican Republic

ACUTE FOOD INSECURITY PEAK 2022/23

1.55M people or **15%** of the analysed population in IPC Phase 3 or above, **October 2022–February 2023**



IPC acute food insecurity situation, October 2022–February 2023



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Source: Dominican Republic IPC TWG, January 2023.

Food crisis overview

The first IPC analysis for Dominican Republic – which is an upper middle income country – was carried out in 2022, triggered by the upsurge of prices in 2021 and 2022 that negatively impacted real incomes and purchasing power of vulnerable households, constraining their access to food (IMF, September 2022).

From October 2022 to February 2023, corresponding to the lean season, an estimated 1.4 million people were in Crisis (IPC Phase 3), and 142 000 in Emergency (IPC Phase 4). Most of the provinces were classified in Stressed (IPC Phase 2), but the Baoruco, Elías Piña, La Altagracia, Monte Plata, Pedernales and San Juan provinces were classified in Crisis (IPC Phase 3).

Between March and June 2023, the number in IPC Phase 3 or above is projected to decline by over 300 000, with the expectation of seasonal employment at the start of the production season (IPC, January 2023).

Drivers of the crisis, 2022–23

Economic shocks Acute food insecurity in Dominican Republic is primarily driven by households' reduced access to food. COVID-19 containment measures and the economic downturn limited income opportunities, especially for those in the informal economy (EUROSociAL, September 2021). The impact of these dynamics was compounded by the war in Ukraine and the subsequent rise in fertilizer, food and fuel prices, which reduced vulnerable households' purchasing power (IPC, January 2023).

The higher prices for agricultural inputs, as well as imports, were reflected in above-average prices for most food commodities, with the annual food inflation rate at 9.8 percent in November 2022. For example, retail maize prices were 30 percent higher than the previous year, and black beans prices 6 percent higher in December 2022 (FAO-GIEWS, January 2023). Rice prices were only slightly up from a year earlier, reflecting no major shock to

agricultural production in recent years (FAO, September 2022). In an effort to contain the impact of these commodity price shocks, the government implemented or continued subsidy programmes for fertilizers and fuel (IMF, July 2022). Fertilizer prices were fixed in September 2021 under a subsidy programme of USD 92 million, while the prices of gasoline and diesel were fixed in March 2022 (FAO-GIEWS, January 2023).

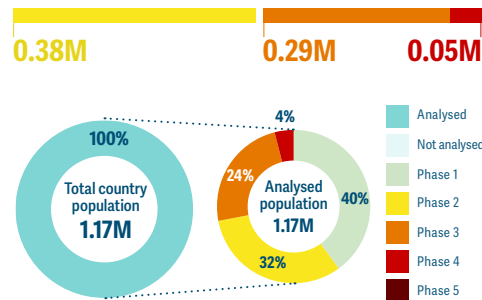
Weather extremes In September 2022, the eastern part of the country was hit by the Category 1 hurricane Fiona. Strong winds and heavy rainfall caused extensive damage to infrastructure and houses in the eastern part of the country, especially in La Altagracia, La Romana, El Seibo, Samána, Hato Mayor, María Trinidad Sánchez, Duarte and Monte Plata provinces (OCHA, September 2022). An estimated 43 000 people were displaced (UNICEF, September 2022). This negatively impacted livelihood opportunities in the affected areas, and the government disbursed direct subsidies to help mitigate these impacts (FAO-GIEWS, January 2023).

The peak projection period for acute food insecurity for 2023 is early in the year and is the same as the 2022 peak. No displacement or nutrition data were available for 2022.

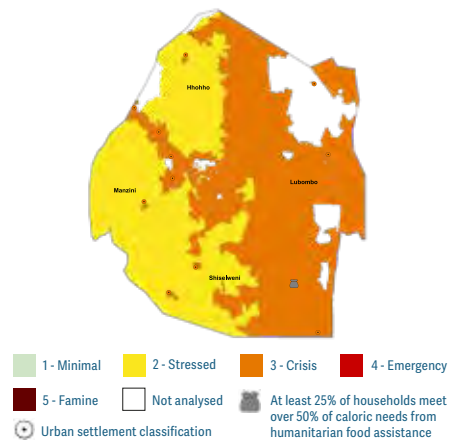
Eswatini

ACUTE FOOD INSECURITY PEAK 2022

0.34M people or **29%** of the analysed population in IPC Phase 3 or above, December 2021–March 2022



IPC acute food insecurity situation, December 2021–March 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Eswatini IPC TWG, January 2022.

Food crisis overview

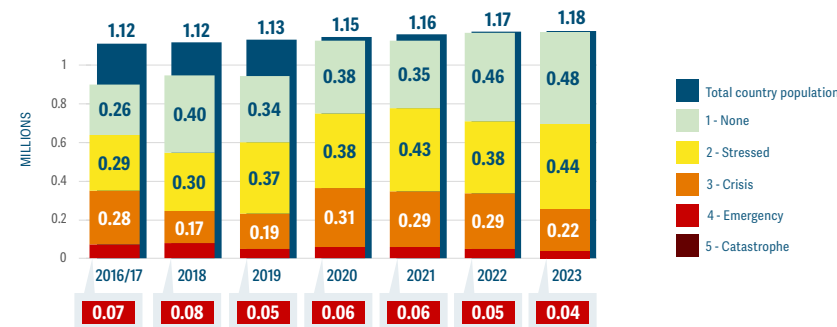
In the December 2021–March 2022 lean season, acute food insecurity was at similar levels to that of the 2020–21 lean season when COVID-19 began to impact household-level food security.

Of the 336 000 people projected to face Crisis or worse (IPC Phase 3 or above), around 79 percent were in rural and 21 percent in urban areas. Eight out of 11 livelihood zones were classified in Crisis (IPC Phase 3). In the Lubombo Plateau, the population in Emergency (IPC Phase 4) reached 10 percent (IPC, January 2022). In June–September 2022, the food security situation improved due to the impact of favourable crop production on rural households' food supplies and incomes, but seasonal deteriorations were expected from October 2022 as many households had depleted food stocks at the start of the lean period, and faced continual fuel and food price shocks.

Slight improvement projected for 2023

The situation during the 2022–23 lean season was projected to be better than the 2021–22 lean season, with 22 percent of the populations in IPC Phase 3 or above

Numbers of people by phase of acute food insecurity, 2017–2023



Source: Eswatini IPC TWG.

compared with 29 percent of the previous year (IPC, July 2021 and July 2022).

Acute food insecurity since 2016

The country has been included as a major food crisis in all seven editions of the GRFC, with at least 25 percent of its population in IPC Phase 3 or above during the peak period each year. Acute food insecurity levels reached 39 percent in 2016–17 as a result of El Niño-related drought (IPC, April 2016), and reached 32 percent in October 2020–March 2021 due to COVID-19-related income losses and the inclusion of urban as well as rural households in the analysis.

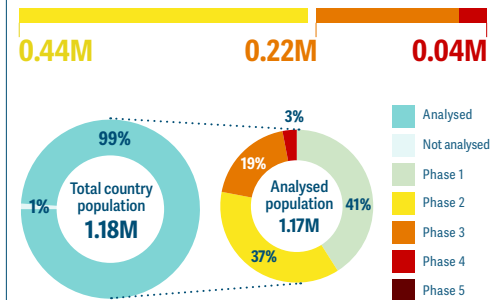
This, as well as the impact of irregular rains and dry spells, contributed to the worsening of food insecurity in 2020 relative to 2019 (IPC, July 2019 and August 2020).

Drivers of the crisis, 2022–23

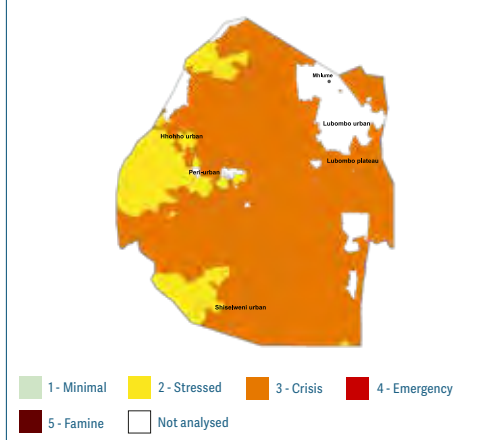
Economic shocks An anticipated fourth wave of the COVID-19 pandemic was factored into the early 2022 acute food insecurity projection. Renewed restrictions were expected to limit livelihood activities, especially in peri-urban and urban populations,

ACUTE FOOD INSECURITY PROJECTION 2023

0.26M people or **22%** of the analysed population in IPC Phase 3 or above, October 2022–March 2023



Projected IPC acute food insecurity situation, October 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Eswatini IPC TWG, July 2022.

and prevent many households from pursuing agricultural activities at the start of the rainfall season. This was expected to both reduce household income and curb seasonal food production. An anticipated slowdown in business operations in South Africa, and consequent reduction in the supply of goods, was expected to inflate prices in Eswatini, which relies on its neighbour for imports (IPC, January 2022).

By late 2021, levels of unemployment had reached 33.5 percent – up from 23.5 percent in 2020 – largely as a result of the protracted impacts of the pandemic. In peri-urban areas, 41 percent of heads of household were unemployed, with Shiselweni urban reporting the highest percentage (68.3 percent). Among rural areas, the Lubombo Plateau experienced the highest percentage of loss of employment (37 percent), as cross-border workers lost jobs on farms in South Africa (IPC, July 2022).

According to WFP, the price of maize reached a five-year high in May 2022, before stabilizing and then rising very sharply from October 2022 (WFP VAM, accessed March 2023), when they reached new record-high levels. These high prices were mainly driven by the country's high dependence on imports and elevated grain prices in South Africa, the main source of imports for the country. High global energy prices and currency weakness have inflated operational costs along the food value chain, further contributing to the rising prices. Along with a forecast deceleration in economic growth in 2023, with adverse implications for employment and incomes, the high food prices are expected to diminish households' purchasing power, stressing food insecurity conditions in 2023 (FAO, February 2023).

NUTRITION



Despite high levels of acute food insecurity, the level of child suffering from wasting is low in Eswatini. However, there is a high national prevalence of children with stunting at 26.3 percent (considered 'high' by WHO thresholds), rising to 28 percent in Shiselweni (E-VAC, 2019). The highest stunting levels are reportedly among children aged 18–23 months (35 percent) (UNICEF, 2021).

Eswatini has a high HIV prevalence, with 26 percent of the adult population infected and 59 percent of children having lost parents to HIV/AIDS-related death. Women are disproportionately affected (35 percent), and this impacts care practices, including feeding, with concomitant effects on children's nutritional status. However, the number of people newly infected with HIV decreased from 14 000 in 2010 to 4 800 in 2020, a 64 percent decline (UNAIDS, February 2022).

Drivers of undernutrition



Food insecurity and lack of access to healthy diets Inadequate food consumption in terms of quantity and variety leading to nutrient-intake deficits is a significant contributing factor to child undernutrition, with households living mainly on cereals, oils and vegetables.



Inadequate maternal and child-feeding practices Around 37 percent of children aged 6–23 months are fed a Minimum Acceptable Diet that meets both the recommended dietary diversity and frequency thresholds (UNICEF, 2020). Around 64 percent of infants under 6 months are exclusively breastfed (UNICEF, 2020). According to the latest available data, nearly 42.7 percent of children aged 6–59 months were anaemic, indicating a severe public health problem (UNICEF, 2019), and 30.7 percent of women of reproductive age (15–49 years) were anaemic (UNICEF, 2020), indicating a moderate public health problem (WHO, 2019).



Poor household environment As of 2020, around 71 percent of households at national level had access to basic drinking water services, but in rural areas, 37.6 percent were still using unimproved, limited service or surface water for drinking, and 50.6 percent had no access to handwashing facilities. Around 16 percent of rural households used unimproved sanitation or practise open defecation (UNICEF/WHO, 2020).

Ethiopia

ACUTE FOOD INSECURITY PEAK 2022

 **23.61M** people or **21%** of the analysed population were facing high levels of acute food insecurity in 2022

Source: HRP, November 2022.

Food crisis overview



At 23.61 million, the number of people facing high levels of acute food insecurity in Ethiopia reached an unprecedented level in 2022.

This includes an estimated 10.73 million people who did not have the means to cover minimum food needs, according to the Households Economic Analysis (HEA); 5.4 million people in Tigray estimated by the WFP Emergency Food Security Assessment; 2.76 million IDPs; 1.66 million returnees; and 3.07 million public work clients from the Productive Safety Net Programme (HRP, November 2022).

In 2023, acute food insecurity is expected to peak during the July–September lean season due to the effects of five consecutive below-average rainfall seasons, protracted conflict and macroeconomic shocks, which mainly affect food and fuel prices.

Acute food insecurity since 2016

Ethiopia has consistently been among the world's ten largest food crises over the seven years of the GRFC.

Between 2020 and 2021, the population facing high levels of acute food insecurity more than doubled at country level (from 8.6 million to 16.7 million).

Drivers of the crisis, 2022–23



Weather extremes The failure of the 2022 March–May Gu rains followed by poor October–December Deyr rains exacerbated drought conditions that began in late 2020, resulting in severe crop and livestock losses in Somali, Oromia, Sidama and SNNP regions (FAO, December 2022). Almost 7 million animals, belonging to about 600 000 households and valued at over USD1.5 billion, have died since the beginning of the drought in 2020. An estimated 60 000 pastoralist households have lost all their livestock, resulting in pronounced human suffering (FAO, 2023). Minimal livestock reproduction led to limited milk production, impacting food security and nutrition, particularly for children (FEWS NET, October 2022). Livestock prices also increased as the prolonged drought reduced the availability of marketable live animals (FAO-GIEWS, August 2022).

While some drought-affected areas received good rains between October and December 2022, the amount of water was insufficient for the regeneration of pasture and the replenishment of water resources. Earlier forecasts for the March–May 2023 rainfall season had pointed to depressed rainfall, coupled with high temperatures, risking a sixth consecutive season of drought. However, improved rainfall in drought-affected areas from mid-March 2023 provided temporary solace through replenished surface water sources and rejuvenated pasture – though not enough for the restoration of livelihoods, which will take time. Heavy rains in some areas caused floods leading to destruction of shelter/houses and public infrastructures, livestock death, and further displacements (FSNWG, March 2023; OCHA, April 2023).



Conflict/insecurity The conflict in Tigray and adjacent areas of Amhara and Afar regions has led to high levels of acute food insecurity, widespread displacement, limited access to services and the destruction of the local economy. Shortages of inputs in conflict-affected areas constrained planting for the

main June–September 2022 Meher season (FAO-GIEWS, August 2022).

The humanitarian truce announced in March 2022 improved humanitarian access into the region from early April, but conflict erupted again in late August, contributing to delays in delivery of humanitarian assistance (FAO-GIEWS, August 2022). Intense conflict in October coincided with the Meher harvest, causing disruptions to harvest activities and further hampering market functionality (FEWS NET, December 2022).

Since the November 2022 peace agreement, conflict episodes have become more sporadic, allowing for increased humanitarian access and the re-establishment of basic services. However, the security situation remained volatile, and in February and March 2023, plantings of secondary Belg crops, for harvesting in June and July, are also likely to have been constrained (FAO-GIEWS, March 2023). Recovery of severely eroded livelihoods and the economy in Tigray, Afar and Amhara is not likely to occur quickly due to the long-term nature of the conflict, the heavy damage to infrastructure, markets and livelihoods, and exhaustion of coping mechanisms (FEWS NET, December 2022).



Economic shocks Ethiopia continued to face severe macroeconomic challenges, including a large debt burden, high government spending, rising import bills, insufficient foreign currency reserves and continuous national currency depreciation, which contributed to increased costs of living and to the erosion of household purchasing power (WFP, October 2022).

Inflation soared to very high levels in 2022, with food inflation estimated at 43.9 percent in May – the highest recorded in the past nine years. Prices of locally produced maize have increased near-continuously throughout 2022 and were about 20 percent higher than their year-earlier levels in October. Prices of imported wheat and vegetable oils were at near-record to record levels, due to high international prices exacerbated by the war in Ukraine (FAO, December 2022).

DISPLACEMENT

2.73M IDPs, end 2022

Source: IOM, December 2022.



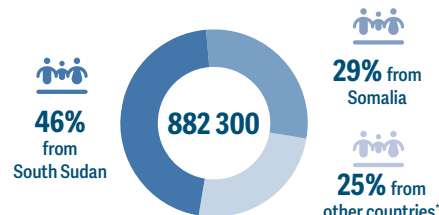
IDPs Ethiopia continued to be among the food-crisis countries/territories with the highest number of IDPs throughout 2022 and into 2023 (IDMC April 2022, IOM, December 2022).

Based on the most recent data collected by IOM between August and September 2022, 2.73 million IDPs were identified across 11 regions of the country because of conflict and drought, while 1.88 million had returned across nine regions to their place of origin seeking durable solutions, but still needing urgent humanitarian support. The figures excluded those displaced in and from Tigray as operational constraints in the region prevented data collection in 2022. As of September 2022, drought was the primary cause of displacement for 516 300 IDPs mostly concentrated in the Somali, Oromia and Afar regions (IOM, December 2022).

Overall, the highest levels of displacement (excluding Tigray) were in the Somali, Amhara and Oromia regions. Continued drought conditions and high levels of conflict, including recurrent conflict in the western part of Oromia, and some parts of the Benishangul-Gumuz, Somali and SNNP regions caused further displacement (FEWS NET, December 2022; UNHCR, January 2023). From January 2023, conflict-induced population displacements reached a new high in Amhara, at nearly 383 000. Many IDPs in camps have received limited water, food and basic health and nutrition assistance despite their urgent needs (OCHA, February 2023).

In conflict-affected northern areas, the humanitarian needs of IDPs are likely to increase along with the risk of protracted displacement, unless the peace agreement leads to improved humanitarian access, complete cessation of conflict, and an opportunity for communities to recover and build resilience (UNHCR, January 2023).

Refugees and asylum-seekers, end 2022



* Including Eritrea, Sudan, Kenya, Yemen, Syrian Arab Republic and Democratic Republic of the Congo.
Source: UNHCR, December 2022.

Refugees Ethiopia hosts the third-largest population of refugees and asylum-seekers in Africa, at over 882 000 people, predominantly from South Sudan, Somalia and Eritrea. The majority (88 percent) live in camps (mainly Gambella bordering South Sudan, and Melkadida near Somalia), with only 3 percent living in settlements and 9 percent residing in the capital Addis Ababa. Around 82 percent are women and children. In 2022, over 22 000 new arrivals were registered, mainly from Somalia and South Sudan (UNHCR, December 2022).

Acute food insecurity in Ethiopia's refugee camps is concerning, with 49 percent of surveyed households recording poor food consumption scores and 25 percent facing borderline food consumption. Around 65 percent of households use negative coping strategies, including reducing or skipping meals, consuming less-preferred foods and borrowing food for survival (SENS, 2022).

During 2022, key nutrition indicators further deteriorated in refugee camps in Gambella and Melkadida, due to the combined effects of food ration cuts, increased food prices, disease outbreaks, drought impacts and a critical nutrition situation among new arrivals from South Sudan and Somalia (UNHCR, December 2022).

In 2022, UNHCR assessments found a 'high' to 'very high' prevalence of wasting in 15 out of 20 refugee settlements. Four camps out of 20 had a 'medium' level of wasting, while only one settlement had a 'low' level. Overall, there was an increase in the prevalence of wasting

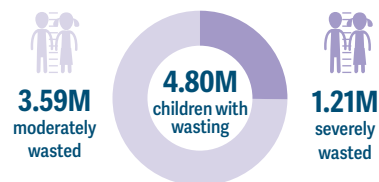
from 12.2 percent in 2021 to 15.5 percent in 2022. The prevalence of severe wasting rose from 1.8 percent to 2.9 percent (UNHCR, December 2022).

Stunting levels are also 'high', with 11 out of 20 refugee settlements having 'high' to 'very high' levels. Anaemia is a severe public health problem (>40 percent) for children aged 6–59 months in 11 out of 20 settlements and for women aged 15–49 years in six out of 20 settlements (UNHCR, December 2022).

In February 2023, more than 83 000 people (mostly women, children and elderly people) reportedly arrived in a dire state in the Somali region, having fled from Lasanood in neighbouring Somaliland. They were in urgent need of food, nutrition, water, health response, shelter and protection (OCHA, February 2023).

NUTRITION

Number of children under 5 years old with wasting, 2022



Source: Ethiopia Nutrition Cluster, 2022.

The number of wasted children increased by 14 percent from 4.2 million in 2021 to 4.8 million in 2022. The number of severely wasted children also increased: from 1.1 million to 1.2 million (GNC, February 2022).

Various assessments in 2022 reported high levels of malnutrition. The Find and Treat campaign implemented in most of the woredas in Somali and Oromia reported proxy wasting levels above 15 percent (GNC, 2022). The nutrition situation was extremely concerning in drought- and conflict-affected northern areas (Tigray, Afar and Amhara), reflected in the highest wasting admissions for the past three years (UNICEF, 2022). In the Oromia, Somali, Amhara, Tigray and SNNP regions, more cases of wasted children are expected in 2023 (FSNWG, October

2022 update). It is estimated that 7.4 million people will need nutrition assistance in 2023 (OCHA, February 2023).

Stunting rates for children under 5 years old are 'very high' according to the WHO classification, with 37 percent prevalence, equating to 5.8 million children (UNICEF, July 2022).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Inadequate food consumption in terms of quantity and variety leading to nutrient intake deficits is a significant factor in the poor nutrition situation.

Inadequate maternal and child-feeding practices Inadequate infant and child-feeding practices led to high consumption of monotonous starchy diets and poor consumption of iron-rich animal-sourced foods such as milk, meat and eggs. Only 11 percent of children aged 6–23 months eat a Minimum Acceptable Diet (MAD) which meets both the recommended dietary diversity and frequency thresholds in Ethiopia.

About 59 percent of children aged under 6 months are exclusively breastfed (UNICEF, October 2021). More than half (52.1 percent) of children aged 6–59 months are anaemic, indicating a severe public health problem (WHO, 2019). Around 24 percent of women of reproductive age (15–49 years) are anaemic (UNICEF, October 2021), indicating a moderate public health problem (WHO, 2019).

In Tigray, while breastfeeding practices are generally optimal, inadequate complementary feeding is widespread (WFP, Emergency Food Security Assessment, August 2022). Only 1.3 percent of children aged 6–23 months are receiving the MAD.

High prevalence of infectious diseases Ongoing disease outbreaks in certain regions have contributed to the increase in malnutrition. A cholera outbreak that started in August 2022 in Oromia has spread to Somali (OCHA, Cholera outbreak update January 2023).

The persistent lack of clean water supply adds to the risk of contracting the disease. In addition, there is a measles outbreak in Oromia, SNNP, Afar, Amhara and Somali,

while malaria is worsening the already grave situation (UNICEF, 2022).

Limited access to health and nutrition services

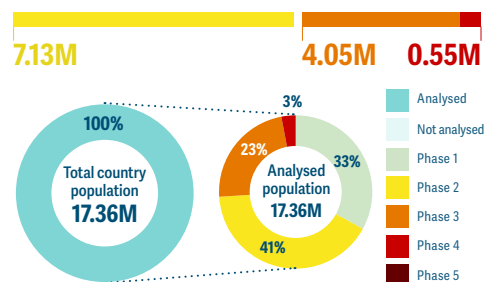
Damage and destruction of health facilities prevented access to essential health and nutrition services, including routine immunization (UNICEF, January 2023), especially in Afar, Amhara and Tigray which were cut off from humanitarian activities for much of 2022. Even though humanitarian access improved since the peace treaty, several areas remain inaccessible, and essential systems and services remain poor.

Poor household environment Lack of sanitation facilities and poor handwashing practices aggravate morbidity levels and ultimately increase the risk of malnutrition. In 2020, a WASH survey found that just 49.6 percent of households have access to safe drinking water (UNICEF, 2020). In Tigray, scarcity of safe drinking water contributed to an increased risk of disease outbreaks (WFP, August 2022).

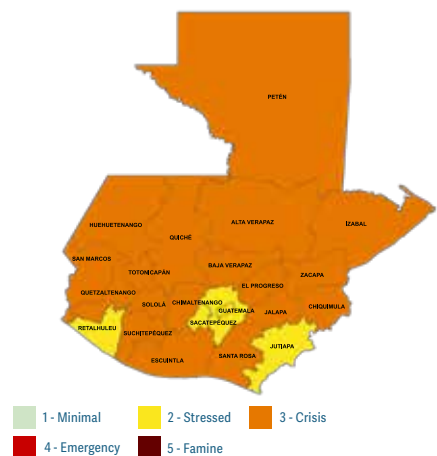
Guatemala

ACUTE FOOD INSECURITY PEAK 2022

4.60M people or **26%** of the analysed population in IPC Phase 3 or above, June–September 2022



IPC acute food insecurity situation, June–September 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Guatemala IPC TWG, June 2022.

Food crisis overview

Worsening socioeconomic conditions compounded by the previous years' extreme weather events and rising global food, fuel and fertilizer prices pushed the number of people facing Crisis or worse (IPC Phase 3 or above) to 4.6 million in June–September 2022. This is the highest in the history of GRFC reporting. Although no department was classified in Emergency (IPC Phase 4), all but one had populations in this phase as vulnerable households have been unable to recover from overlapping economic and weather shocks since 2018.

Compared with the previous peak in November 2020–March 2021 (3.73 million people in IPC Phase 3 or above) (IPC, January 2021), the number of people in Emergency (IPC Phase 4) increased by nearly 30 percent, signalling that the crisis became more severe.

The worst-affected departments with at least one-third of their populations in IPC Phase 3 or above were in the centre and north – Alta Verapaz, Huehuetenango, Izabal, Quiché, Petén and Totonicapán (IPC, June 2022).

Improvement projected for 2023

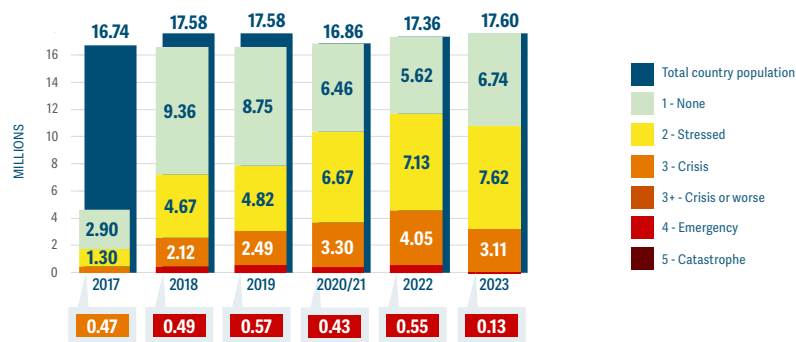
Seasonal improvements in acute food insecurity are expected in October 2022–February 2023 with the harvest of cash crops, such as sugar cane, cardamom and coffee, which will generate income opportunities for daily agricultural labourers (IPC, June 2022). However, these improvements are likely to be limited due to high household debt, low levels of food stocks and extended market reliance during a time of above-average prices (FEWS NET, October 2022).

Households in the north that were affected by tropical storms Julia and Lisa are expected to be more market-reliant from the resulting crop losses (FEWS NET, October 2022). A new IPC analysis is expected in the first half of 2023.

Acute food insecurity since 2016

Guatemala – an upper middle income country – has been included in the GRFC since its inception, and considered a major food crisis since 2019. From 2018, the number of people in IPC Phase 3 steadily increased and had nearly

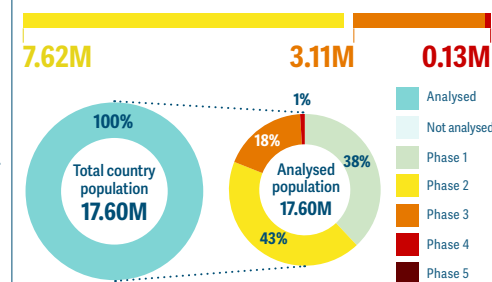
Numbers of people by phase of acute food insecurity, 2017–2023



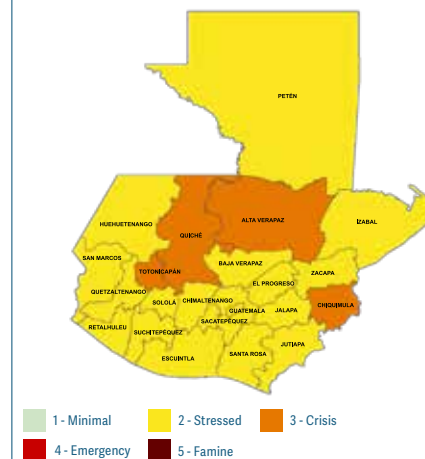
Source: Guatemala IPC TWG.

ACUTE FOOD INSECURITY PROJECTION 2023

3.24M people or **19%** of the analysed population in IPC Phase 3 or above, October 2022–February 2023



Projected IPC acute food insecurity situation, October 2022–February 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Guatemala IPC TWG, June 2022.

doubled by 2022. Before 2020, acute food insecurity was localized in departments that were affected by climate-induced droughts – especially those in the eastern Dry Corridor, but the economic impacts of the COVID-19 pandemic, hurricanes Eta and Iota, and in 2022, the war in Ukraine, led to Crisis or worse (IPC Phase 3 or above) conditions in nearly all of the country.

Between 2018 and 2022, the share of the population in IPC Phase 2 rose from 28 percent to 41 percent, indicating an increasing level of vulnerability to shock. The departments of Alta Verapaz and Chiquimula have been classified in Phase 3 for each year in the period.

Drivers of the crisis, 2022–23



Economic shocks Vulnerable households continued to suffer from the negative economic impacts of the 2018–19 droughts, COVID-19 containment measures, and hurricanes Eta and Iota in 2020 (FAO/WFP, September 2022) due to chronic infrastructure and social challenges (IMF, June 2022).

These multiple shocks have continued to constrain food access in 2022, especially for people in the Dry Corridor, by reducing crop production, food reserves and income opportunities, as well as access to markets, services and workplaces. Acute food insecurity outcomes worsened throughout the 2022 peak period due to high prices for staple foods.

High import prices put upward pressure on the domestic prices of fertilizer, food and fuel. Fertilizer prices rose 128 percent in March 2022 after the start of the war in Ukraine, as Guatemala is reliant on imports, which constrained domestic market availabilities and access (FAO-GIEWS, October 2022; FAO/WFP, September 2022).

Similarly, the price of fuel remained above the five-year average despite a subsidy provided by the government, which led to increased transportation costs (FEWS NET, October 2022).

The higher agricultural input costs contributed to rising food prices for consumers, with the annual food inflation rate estimated at 13.3 percent in August 2022 (FAO-GIEWS, October 2022). The price of white maize in September 2022 was more than 40 percent higher year-on-year and at near-record levels, following sustained increases since November 2021, while the price of black beans was 25 percent higher year-on-year in September 2022 (FAO-GIEWS, October 2022).



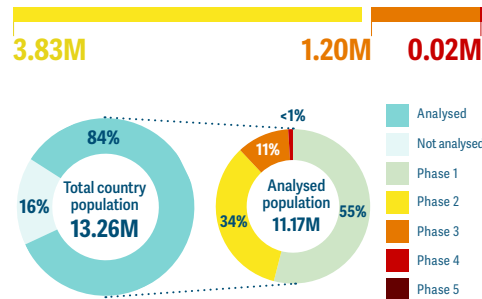
Weather extremes Erratic rainfall distribution caused periods of heavy rain and winds that resulted in flooding, landslides and localized damage in areas of staple grain crops, particularly in the northern part of the country (FEWS NET, October 2022).

Tropical storm Julia, in October 2022, brought a large amount of rainfall, provoking significant flooding in the localities of Petén, Izabal and Alta Verapaz (IFRC, 2022).

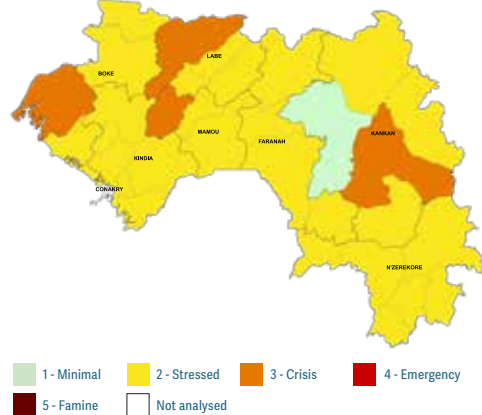
Guinea

ACUTE FOOD INSECURITY PEAK 2022

1.22M people or **11%** of the analysed population in CH Phase 3 or above, June–August 2022



CH acute food insecurity situation, June–August 2022



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Source: Cadre Harmonisé, March 2022.

Food crisis overview

The number of people in Crisis or worse (CH Phase 3 or above) almost doubled between the June–August 2021 and 2022 analyses, from 0.68 million to over 1.2 million, largely due to the international food, fuel and fertilizer price shocks linked to the war in Ukraine (CH, March 2022).

The year 2022 was the first time in the history of the GRFC that any populations in Guinea had faced Emergency (CH Phase 4) outcomes, with 20 830 people in this phase. More than a third of the analysed population were in Stressed (CH Phase 2), requiring support to build their resilience to shock (CH, March 2022).

Slight improvement projected for 2023

The situation is expected to improve slightly in the June–August 2023 period, when projections estimate almost 300 000 fewer people to be in Crisis (CH Phase 3) and a sharp decrease in the number of people in Emergency (CH Phase 4), to about 2 500. However, 3.4 million people (30 percent of the analysed population) will remain in

Stressed (CH Phase 2), indicating their vulnerability to higher levels of acute food insecurity should they experience a shock (CH, November 2022).

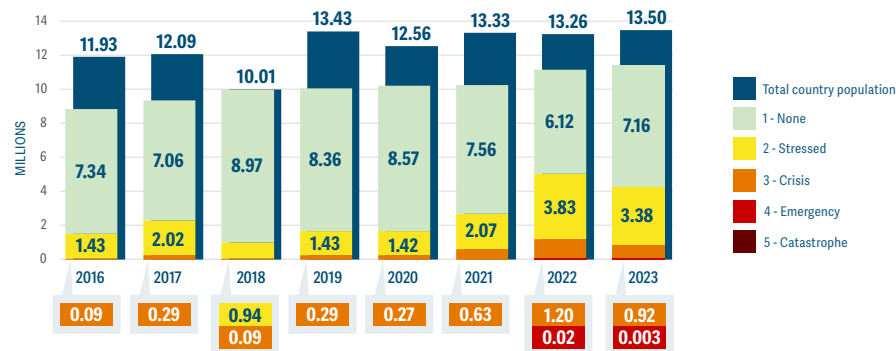
Acute food insecurity since 2016

The population in CH Phase 3 or above has steadily increased in each of the seven editions of the GRFC, but it was first defined as a ‘major’ food crisis in 2022, when the number of people in CH Phase 3 or above exceeded 1 million. The number of people in CH Phase 3 or above has more than quadrupled since June–August 2019 (from 287 000 people to 1.2 million).

The vulnerability is due to underlying socioeconomic and political challenges, including an economy dependent largely on mining and agriculture, but with low productivity due to poor farming techniques and significant post-harvest losses. Poor road infrastructure hinders access to and development of markets.

Guinea ranks 182 out of 190 countries in the 2022 Human Development Index (UNDP, September 2022).

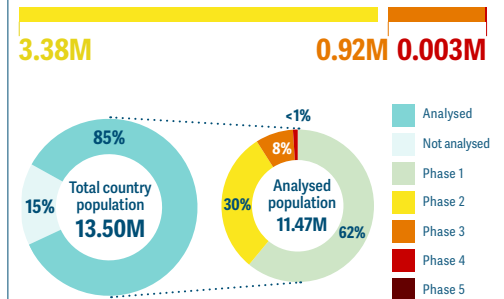
Numbers of people by phase of acute food insecurity, 2016–2023



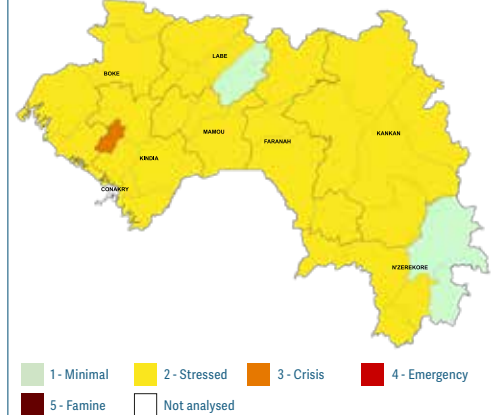
Source: Cadre Harmonisé.

ACUTE FOOD INSECURITY PROJECTION 2023

0.92M people or **8%** of the analysed population in CH Phase 3 or above, June–August 2023



Projected CH acute food insecurity situation, June–August 2023



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Source: Cadre Harmonisé, November 2022.

Drivers of the crisis, 2022–23



Economic shocks Food and fertilizer price increases linked to the war in Ukraine threatened the fragile post-pandemic recovery of the non-mining sector. As a result of the spike in international prices, domestic fertilizer prices increased by more than 300 percent (IMF, November 2022).

Average inflation was expected to remain at 12 percent in 2022, broadly the same level as in 2021, due mostly to rising food and petrol prices. A decline in central bank net credit to the Guinean Government and the appreciation of the Guinean Franc in the first half of 2022 prevented a further increase in inflation in 2022 (IMF, November 2022).

The 2022–23 agricultural campaign was stable, with a slight increase in cereal production of 3 percent compared with 2021–22 and 2 percent compared with the previous five-year average (PREGEC), but Guinea will still require food imports. Strong mining production enabled overall growth to reach an expected 4.7 percent in 2022 (IMF, November 2022).



Weather extremes From late August 2022, heavy rains fell across Guinea, causing flooding in several prefectures of Kankan province, with over 48 000 people affected and 24 000 people needing humanitarian assistance as a result (IFRC, September 2022). Nearly 2 500 hectares of agricultural land was flooded, and 873 livestock died or were missing. Severe floods also hit the capital, Conakry, on 17 September, affecting 2 576 people (Floodlist, September 2022).

NUTRITION

Number of children under 5 years old with wasting, 2023



Source: UNICEF, 2023.



The high number of children with wasting in Guinea is largely attributable to increasing acute food insecurity and the factors that underpin it, as well as poor dietary practices (UNICEF, 2022).

The number of children with wasting was projected to increase from around 413 300 in 2022 to 425 700 in 2023, with the number of children with severe wasting increasing from 251 350 to 258 890 (UNICEF, 2023).

According to the SMART 2022 results, 6.7 percent of children under 5 years suffered from wasting (a 'medium' prevalence by WHO cut-off), which marks an improvement since SMART 2015 (8.1 percent). The prevalence was 'high' at 10.8 percent among children aged 6–23 months. The 'severe' wasting prevalence among children under 5 years was 1.3 percent. Around 7.5 percent of pregnant and lactating women were underweight (SMART 2022).

At 25.5 percent, the prevalence of stunting among children under 5 was 'high' by WHO thresholds (SMART 2022).

Drivers of undernutrition



Inadequate maternal and child-feeding practices Of children aged 6–59 months, 73.8 percent were anaemic, and 48 percent of women of reproductive age were anaemic, indicating a severe public health concern (UNICEF, 2019 and 2022). Only 4 percent of children aged 6–23 months received the Minimum Acceptable Diet, while 43.7 percent of infants under 6 months were exclusively breastfed (SMART 2022).



Poor household environment About 64 percent of households had access to basic drinking water, falling to 51 percent among the rural population, increasing the risk of disease outbreaks and vulnerability to malnutrition.



Limited access to health and nutrition services Coverage of nutrition interventions, specifically of curative, preventive and promotional interventions, remains low (UNICEF, 2022b). Most health services have a very low rate of use (16.4 percent), translating into high levels of maternal, infant and child mortality (SMART 2022).

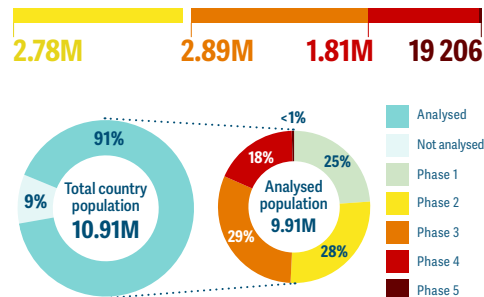


Food insecurity and lack of access to healthy diets Increasing food insecurity in 2022 linked to high food prices and low agricultural output contributed to acute malnutrition by limiting the dietary intake (low dietary diversity and meal frequencies) of both children and women.

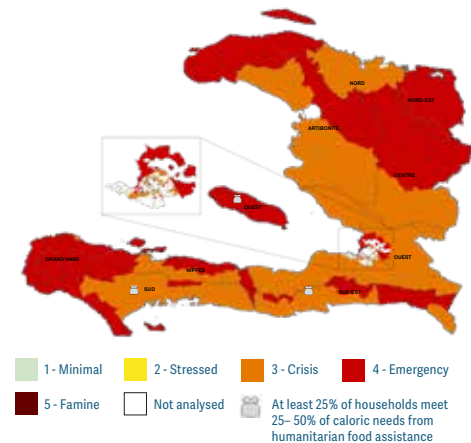
Haiti

ACUTE FOOD INSECURITY PEAK 2022

4.72M people or **48%** of the analysed population in IPC Phase 3 or above, **September 2022–February 2023**



IPC acute food insecurity situation, September 2022–February 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Haiti IPC TWG, October 2022.

Food crisis overview

In the last quarter of 2022, the number of people facing Crisis or worse (IPC Phase 3 or above) was the highest reported in the past seven years for Haiti, due to widespread insecurity and gang violence in major cities, a macroeconomic crisis characterized by seven years of double-digit inflation, the impacts of previous natural disasters, including the 2021 earthquake, and low agricultural production.

Nearly half of the analysed population was in IPC Phase 3 or above in September 2022–February 2023. Of the 32 areas analysed, 15 were classified in Emergency (IPC Phase 4) – mainly in the Grand Sud affected by the 2021 earthquake, as well as the High Plateau and its extensions in the Nord, Artibonite, Nord-Ouest, Gonâve and the three municipalities in the Metropolitan Area of Port-au-Prince most affected by the activities of armed gangs. The number of people in Emergency (IPC Phase 4) increased by 56 percent, from 1.16 million during the 2021 peak (March–June) to 1.81 million (IPC, September 2020; IPC, October 2022).

Populations in Catastrophe

For the first time in the history of the IPC, Haiti had populations in Catastrophe (IPC Phase 5), with over 19 000 people in this phase in September 2022–February 2023 in the Cité Soleil commune of the capital, Port-au-Prince where gang violence severely thwarted supply chains and restricted people to their homes.

A similar projection for 2023

The situation was expected to remain similar in March–June 2023. The population in IPC Phase 3 or above was projected to increase by 165 000 people, mostly in IPC Phase 3. The population in IPC Phase 4 was projected to remain about the same and no populations were projected to be in Catastrophe (IPC Phase 5) in the Cité de Soleil commune (IPC, March 2023).

Drivers of the crisis, 2022–23

Conflict/insecurity In 2022, gang violence reached extremely high levels in Port-au-Prince, limiting the movement of goods and people. In the Cité Soleil district, insecurity prevented households from accessing their usual means of subsistence, or accessing markets. Markets were poorly supplied due to road controls, translating into very high prices (IPC, October 2022).

Gangs hindered access to the main highways that connect the capital with northern and southern areas, while a minor road to the southern peninsula was blocked from June 2021. Between mid-September and early November 2022, gangs blocked access to the Varreux port terminal in Port-au-Prince, the main entry point for fuel and other imported commodities, causing widespread shortages and underpinning sharp increases in retail prices (FAO-GIEWS, December 2022).

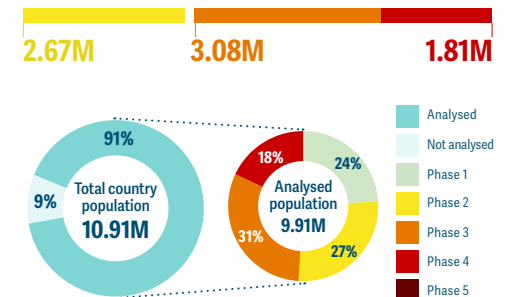
From mid-September 2022, the Haitian Government’s announcement of fuel price increases intensified violent protests, paralysing several cities, particularly the capital (FEWS NET, September 2022; FAO-GIEWS, December 2022). By December, insecurity had moderately decreased compared with the previous month, following Government efforts and a truce between rival gangs to facilitate humanitarian efforts, particularly in the fight against cholera. However, kidnapping cases were still being recorded, and humanitarian access remained limited (FEWS NET, December 2022).

Economic shocks A succession of crises, including the COVID-19 pandemic, the 2021 earthquake and tropical storm Grace, in tandem with political instability and increasing violence, have paralysed the economy and forced many small businesses to shut (IPC, October 2022).

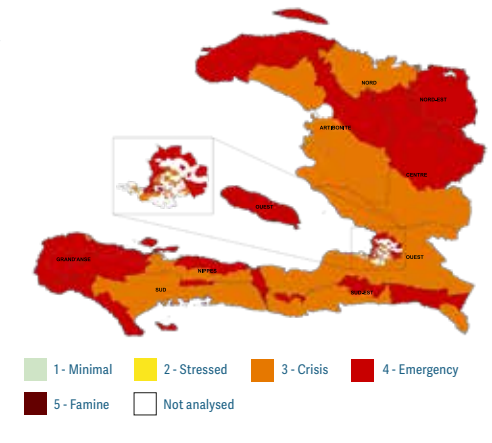
Year-on-year inflation reached a 20-year high of over 30 percent in July 2022 for food and non-food products, further diminishing the already weak purchasing power of households. More specifically, in the three months to

ACUTE FOOD INSECURITY PROJECTION

4.89M people or **49%** of the analysed population in IPC Phase 3 or above, **March 2023–June 2023**



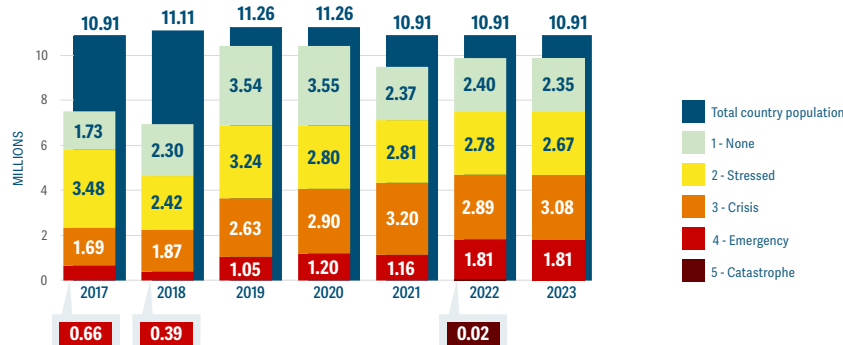
IPC acute food insecurity situation, March 2023–June 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Haiti IPC TWG, March 2023.

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Haiti IPC TWG.

October 2022, the cost of a food basket was 134 percent higher than the five-year average for that period, pushing the basic food basket out of reach for many Haitians (WFP VAM, November 2022).

In Cité Soleil, where 19 000 people faced IPC Phase 5, high food prices had a grave impact on households' access to food, and food represented more than 75 percent of poor households' expenses by mid-2022 (IPC, October 2022).

The sustained weakening of the Haitian currency provided additional upward pressure on prices of imported items, which is concerning in a country that is heavily dependent on food imports. As of 17 December 2022 the central bank's reference exchange rate reached a record of 143.78 gourdes for one dollar, 42 percent higher year-on-year. Imported products were 60 percent costlier year-on-year and 120 percent above the five-year average (FEWS NET, December 2022).



Weather extremes Below-average precipitation in some key cereal-producing departments, in addition to the high costs of agricultural inputs and widespread shortages of fuel, contributed to a reduction in cereal harvest during the 2022 main season. This resulted in reduced availability of seeds for the 2022 minor fall and winter seasons, causing a below-average cereal production in 2022 (FAO-GIEWS, August and December 2022).

Acute food insecurity since 2016

Haiti has been defined as a major food crisis in all seven editions of the GRFC. Its food crisis has been escalating since 2018, driven by years of recurrent natural disasters and weather extremes, COVID-19-related income losses, increasing food prices, violence, insecurity and below-average crop production. Since October 2019, urban analyses have been available. Between March–June 2020 and the same period in 2021, the number of people in IPC Phase 3 or above in seven metropolitan areas increased from around 841 000 to over 1 million (IPC, October 2019, September 2020 and September 2021).

DISPLACEMENT

Peak number of IDPs, 2022

155 200

Source: IOM, January 2023.



In 2022, nearly 88 000 people were newly displaced by gang violence in the Metropolitan Area of Port-au-Prince (ZMPP). Violence in the capital also prompted over 9 000 people to flee to Sud and Grand'Anse departments. Around 17 000 people remain displaced due to the August 2021 earthquake.

However, the number of people in spontaneous sites in the ZMPP quadrupled, from 5 104 in April to 21 684 in August, as gang violence worsened (IOM, October 2022).

In October–November 2022, more than 75 percent of assessed neighbourhoods in the ZMPP reported that over two-thirds of residents lacked income to cover basic needs. Neighbourhoods experiencing IDP arrivals were more likely to report high or extreme priority food and livelihood needs than those where no IDP arrivals had taken place (IOM DTM, February 2023).

NUTRITION

Number of children under 5 years old with wasting, 2021



Source: HNO, March 2021.



The gang violence and insecurity of 2022 affected children's and women's access to basic health, nutrition, and WASH services, worsening an already concerning nutrition situation. This was compounded by the cholera outbreak, with the emergence of a double burden of malnutrition–cholera in many parts of the country (UNICEF, December 2022). In Cité du Soleil, where insecurity paralysed livelihoods and limited movement, monitoring indicated an alarming nutrition status among children (UNICEF, August 2022).

Nationally, in 2021, 6 percent of children under 5 years were suffering from wasting, which is considered a 'medium' prevalence by WHO cut-offs, with children aged 6–23 months more affected (7.9 percent) than those aged 24–59 months (4.7 percent). The levels of wasting were highest in six areas: the Metropolitan Area, the Ouest department, Sud-Est, Nort-Est (5.4 percent) and Grand'Anse (5 percent). Highly concerning was the prevalence of severe wasting, which reached 2.1 percent nationally and 2.5 percent for the Metropolitan Area (HNO, 2021). The stunting prevalence is considered 'high'

by WHO thresholds, at nearly 23 percent (SMART, 2020), and has remained stagnant for the last decade.

Drivers of undernutrition



Poor household environment Many of the poorest Haitian families have no safe drinking water, soap for handwashing or basic sanitation, thus increasing cholera risk. In 2020, 62 percent of urban residents had access to basic water services versus 84 percent of rural residents (UN, November 2022; UNDP, October 2022).



High prevalence of infectious diseases After three years without a case, on 2 October 2022, the Ministère de la Santé Publique et de la Population (MSPP) reported two confirmed cases of cholera in the communes of Cité Soleil and Port-au-Prince. By 3 January 2023 more than 20 000 suspected cholera cases were reported nationally, 20 percent of them among children under 5 years. Port-au-Prince Metropolitan Area reported 63 percent of all suspected cases. While cases steadily declined from 8 November, transmission continued to occur throughout the country in early 2023 (CDC, January 2023).



Limited access to health and nutrition services While the outbreak of cholera in October 2022 required urgent life-saving assistance, the heightened insecurity and fuel shortages limited access to the affected areas, hindering an adequate provision of medical supplies. Between September and October 2022, critical health and nutrition supplies were lost when several warehouses of major humanitarian organizations were looted in the departments of Artibonite and Sud (FAO-GIEWS, December 2022).

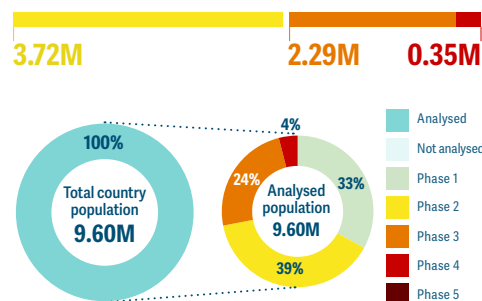


Inadequate maternal and child-feeding practices Only 40 percent of children under 6 months are exclusively breastfed, which is considered a serious concern (SMART, 2021). Only 10 percent of children aged 6–23 months received the Minimum Acceptable Diet (HNO, 2021). Some 60 percent of children under 5 years and nearly 48 percent of women of reproductive age were suffering from anaemia, making it a severe public health concern (WHO, 2019).

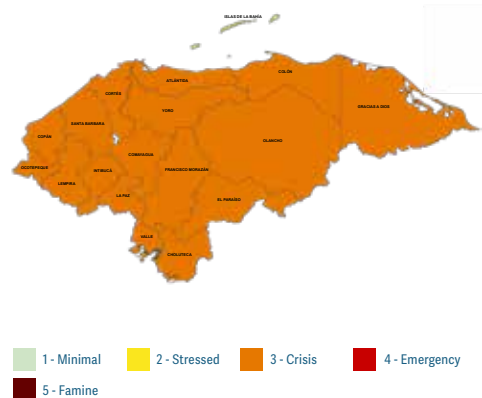
Honduras

ACUTE FOOD INSECURITY PEAK 2022

 **2.64M** people or **28%** of the analysed population in IPC Phase 3 or above, **June–August 2022**



IPC acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Honduras IPC TWG, January 2022.

Food crisis overview

 About 2.64 million people were in Crisis or worse (IPC Phase 3 or above) during the June–August 2022 lean season, corresponding to 28 percent of the country population. This included 353 000 in Emergency (IPC Phase 4) (IPC, January 2022).

This situation represents an improvement compared with 3.3 million people in IPC Phase 3 or above in July–September 2021 (IPC, February 2021), but does not take into account any economic ripple effects of the war in Ukraine.


The large number of people still facing high levels of acute food insecurity were mostly associated with high food prices, together with persistent economic difficulties and lingering effects of weather shocks in 2020 and 2021. From June–August 2022, out of the country's 18 departments, 17 were classified in Crisis (IPC Phase 3), except for Islas de la Bahía, which was classified in Stressed (IPC Phase 2) (IPC, January 2022).

The share of the population in IPC Phase 3 or above was highest in the departments of El Paraíso, Gracias a Dios, Intibucá, La Paz, Lempira, Santa Bárbara and Yoro, at more than one-third. In terms of magnitude, six out of 18 departments – Cortés, El Paraíso, Francisco Morazán, Olancho, Santa Bárbara and Yoro – accounted for about 60 percent of the people in IPC Phase 3 or above at the national level.

Further improvement projected for 2023

Between June and August 2023, the number of people projected to be in Crisis or worse (IPC Phase 3 or above) was projected at 2.42 million people or 25 percent of the total population. Reduced household purchasing power amid increasing prices of food and lower income-generating opportunities are factors expected to underpin the high levels of acute food insecurity during the 2023 lean season period.

Drivers of the crisis, 2022–23

 **Economic shocks** The economic slowdown in 2022 reflects subdued investment in post-hurricane reconstruction, low private consumption underpinned by high inflation, and a contraction in the agricultural sector due to the persisting negative effects of weather shocks.

An increase in remittances, mostly from the United States of America (IMF, 2022), prevented further erosion of household purchasing power, enhancing access to food and partly supporting the improvement in food security.

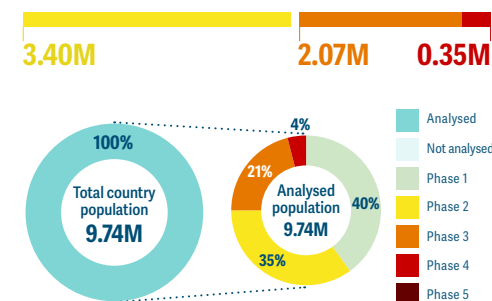
During the June–August lean season period, annual food inflation reached 15–17 percent as prices of staple foods increased amid seasonally low availability. Increased cost of production, transport and imports contributed to the rise, particularly as Honduras relies significantly on food imports, the prices of which were exacerbated by the economic effects of the war in Ukraine on international markets. As of August 2022, the year-on-year price increases for red beans were about 45 percent, over 60 percent for maize and 25 percent for rice (FPMA tool, FAO-GIEWS, February 2023).

In 2023, economic growth is expected to remain subdued, underpinned by the weakening of the global economy which will result in lower exports and remittances. High inflation is expected to continue eroding household purchasing power. In the first two months of 2023, annual food inflation remained high at 17 percent. In January and February 2023, prices of staple red beans and maize resumed an increasing trend, following short-lived declines associated with the harvests in the last quarter of 2022, putting additional pressure on household budgets (FAO-GIEWS, March 2023).

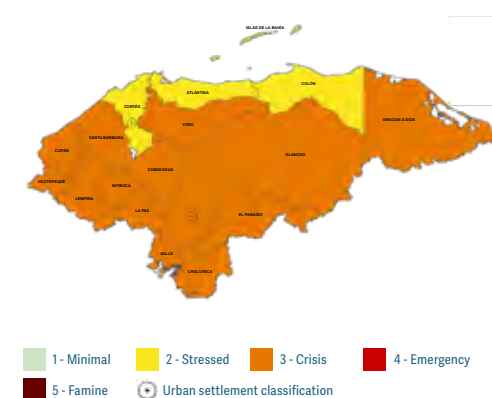
 **Weather extremes** Weather extremes have usually been a driver of acute food insecurity as the country is prone to hurricanes and drought. A slow recovery of the agricultural sector from the impacts of the 2020 hurricanes Eta and Iota and

ACUTE FOOD INSECURITY PROJECTION 2023

 **2.42M** people or **25%** of the analysed population in IPC Phase 3 or above, **June–August 2023**

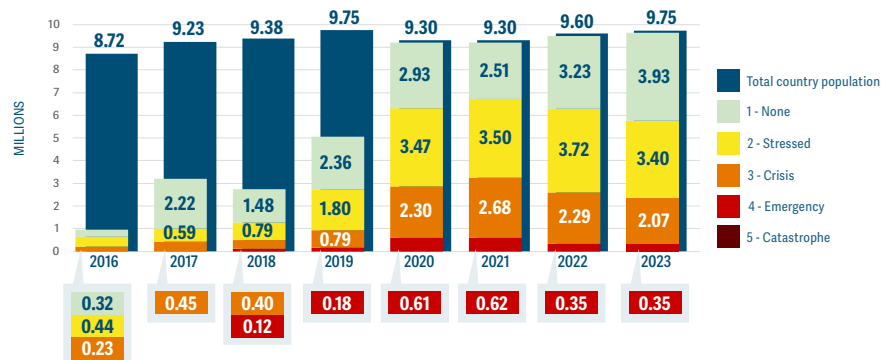


Projected IPC acute food insecurity situation, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Honduras IPC TWG, March 2023.

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Honduras IPC TWG.

unfavourable weather conditions during the 2021 cropping season affected rural livelihoods and limited food availability in 2022 (IPC, 2022).

While production in the livestock, agroforestry and fishery sectors experienced modest growth in 2021, crop production contracted, particularly that of maize and red beans (Banco Central de Honduras, December 2022).

The reduced outputs of these staple crops also led to the decline of rural household incomes and food stocks, driving acute food insecurity during the 2022 lean season (IPC, January 2022).

In 2022, heavy rains in September and October associated with La Niña and the landfall of hurricane Julia in early October caused localized damage to standing crops and agricultural infrastructure, particularly affecting southern and western areas (GEOGLAM, October 2022). About 188 000 people were estimated to be affected by the heavy rains due to damage to livelihoods, including crop and livestock losses (FAO, 2023).

If the climate phenomenon El Niño materializes during the second half of 2023, it could have a major impact on agricultural livelihoods and food security in many regions of the country, especially affecting households in IPC Phase 3 or above.

Acute food insecurity since 2016

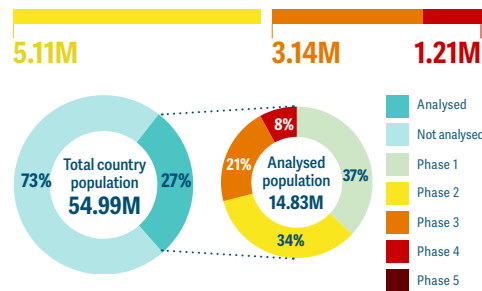
Honduras has been included in the GRFC for seven consecutive years and has been defined as a major food crisis since 2018. Between 2016 and 2019, the IPC analyses focused on central, southern and eastern areas, the latter of which are in the Dry Corridor of Central America. During this period, acute food insecurity was mostly driven by weather extremes, particularly drought events and erratic rainfall, which led to shortfalls in crop production, curbing food availability and access. Low prices of coffee, a key cash crop and high food prices were other contributory factors to acute food insecurity.

Since late 2020, the geographical coverage of IPC analyses expanded to the whole country, revealing levels of acute food insecurity that reached a record high of 3.3 million people during the 2021 peak. The high levels of food insecurity were underpinned by the economic downturn associated with the COVID-19 pandemic and an active hurricane season in 2020. The combined impact of both shocks continued to severely affect food security in 2022.

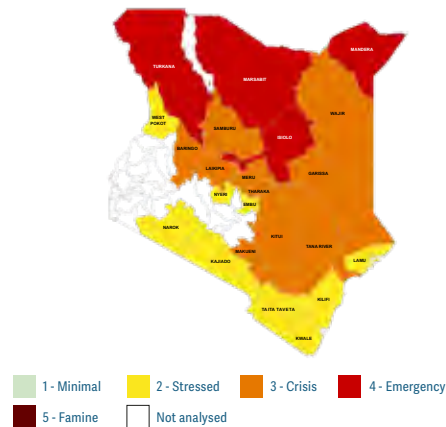
Kenya

ACUTE FOOD INSECURITY PEAK 2022

4.35M people or **29%** of the analysed population in IPC Phase 3 or above, **October–December 2022**



IPC acute food insecurity situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Kenya IPC TWG, September 2022.

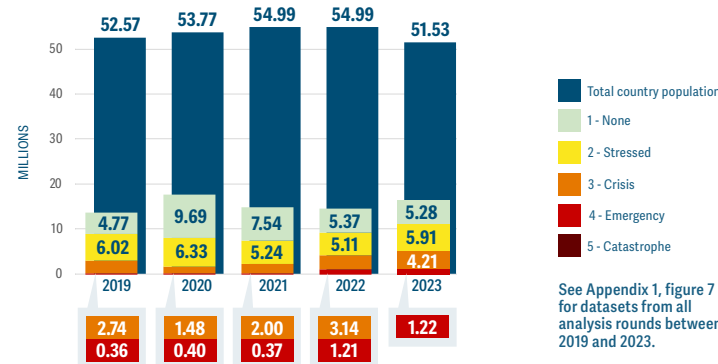
Food crisis overview

The number of people facing Crisis or worse (IPC Phase 3 or above) from October–December 2022 was almost 90 percent higher than in the last quarter of 2021 in the arid and semi-arid lands (ASALs), which account for 80 percent of Kenya’s land mass and 27 percent of its population. At 4.4 million, this was the highest in the history of IPC analyses (IPC, September 2022).

The number of people in Emergency (IPC Phase 4) has increased nearly fourfold since 2021, from 368 000 to 1.2 million. The worst-affected counties were Isiolo, Mandera, Marsabit and Turkana, all of which were classified in IPC Phase 4.

The worsening situation is attributed primarily to the cumulative effect of five consecutive poor rainy seasons (both long and short rains), as well as food price volatility following high national demand, low local availability, high fuel costs and supply disruptions linked to the war in Ukraine (IPC, September 2022).

Numbers of people by phase of acute food insecurity, 2019–2023



See Appendix 1, figure 7 for datasets from all analysis rounds between 2019 and 2023.

Source: Kenya IPC TWG.

Further deterioration projected for 2023

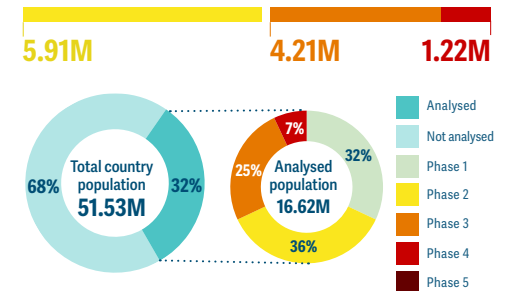
The food security situation is expected to deteriorate further during at least the first half of 2023, especially in northern and northeastern areas as the March–May long rains will likely be below average. Counties of Turkana, Mandera, Marsabit, Wajir and Garissa – predominantly pastoral areas – are likely to deteriorate from IPC Phase 3 to IPC Phase 4 (IPC, February 2023). Above-average food prices are likely to persist through 2023 driven by reduced local production and high import costs that will further erode household resilience and capacity to meet food needs (FEWS NET, November 2022), as well as affecting terms of trade.

Acute food insecurity since 2016

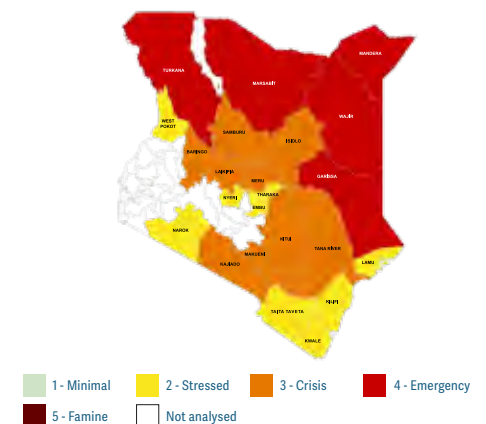
Kenya (the ASALs) has been categorized as a food crisis in all seven editions of the GRFC and as a major food crisis since 2017. The number of people facing IPC Phase 3 or above has fluctuated but increased significantly from 2021 both in terms of magnitude and severity, with the counties of Isiolo, Mandera, Marsabit and Turkana consistently classified in IPC Phase 4.

ACUTE FOOD INSECURITY PROJECTION 2023

5.43M people or **32%** of the analysed population in IPC Phase 3 or above, **March–June 2023**



Projected IPC acute food insecurity situation, March–June 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Kenya IPC TWG, February 2023.

Since 2020, despite a lower number of people analysed in the ASALs, the number of people in IPC Phase 3 or above more than doubled, and the number in IPC Phase 4 more than tripled, reaching 1.2 million in 2022 from 0.4 million in 2020.

The country is prone to extreme climate events and related conflict over scarce resources and recently other shocks have led to a deterioration in food security. COVID-19 restrictions between 2020 and 2021 disrupted food supplies and cross-border movements of goods and people, contributing to food price volatility (GRFC 2022). Prospects of a post-pandemic recovery dimmed in 2022 due to the drought and the effects of the war in Ukraine.

Drivers of the crisis, 2022–23

Weather extremes Five consecutive poor rainy seasons since October 2020 have severely affected pasture and water availability in the ASALs and have placed livelihoods under extreme pressure. As of December 2022, drought conditions were reported in 22 ASAL counties, with nine counties classified in drought phase Alarm and 13 in Alert (National Drought Management Authority, January 2023).

Many water points dried up or diminished in quality (USGS USAID/FEWS NET, Dec 2022). Nearly 5 million people did not have access to enough water for drinking, cooking and cleaning (HNO, 2022).

Declining pasture and water availability led to a deterioration in livestock body conditions, which in turn impacted livestock price and productivity. Milk production was estimated at 30–80 percent below the average of the previous five years in May (FAO-GIEWS, July 2022) with an impact on children's diets in the arid areas (IPC, September 2022). In 2022, due to pasture shortage and water insecurity, 2.5 million livestock died, causing economic losses of more than USD 1.5 billion (GoK, November 2022).

Maize production in key producing areas in the west of the country is estimated at 10–15 percent below the long-term average following the delayed onset of seasonal rains and dry spells during critical growth stages (FAO, December 2022). In marginal southeastern

and coastal agricultural areas, more substantial cereal production shortfalls were recorded, with maize production officially estimated to be 50 and 80 percent, respectively, below average (FAO, March 2023).

Economic shocks Global price shocks following the war in Ukraine translated into domestic price increases, eroding household purchasing power. Kenya is largely dependent on imports to meet domestic demand for commodities such as edible oils, petroleum goods and fertilizers (IPC, September 2022).

The increased import bills while the country faces a heavy debt load and diminishing investment are depleting foreign exchange reserves and causing rapid currency depreciation, contributing to higher costs of living. Annual inflation peaked at 9.6 percent in October 2022 driven by food inflation (15.8 percent) and high transport costs (11.6 percent) (KNBS, October 2022).

In the ASALs, local cereal prices continued to soar through the end of 2022 and remained well above the national average. Food prices are pushing up the overall cost of living for households in these areas, with food inflation continuing to be in double digits throughout the last quarter of 2022 (WFP, February 2023).

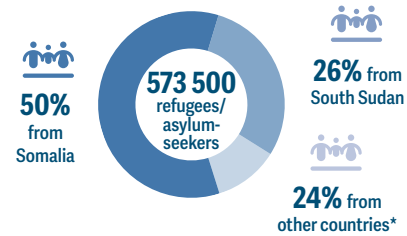
Conflict/insecurity Resource-based conflict was recorded in most of the ASAL counties, instigated by competition for scarce pasture and water caused by the drought, coupled with longstanding rivalries between communities (IPC, September 2022).

DISPLACEMENT

Refugees Kenya hosts over 573 500 refugees and asylum-seekers, mainly from Somalia and South Sudan. In 2022, over 50 000 refugees arrived, mostly from Somalia, many malnourished (UNHCR, December 2022).

Around 83 percent of refugee populations reside in camps in two of the country's poorest and most food-insecure counties – Garissa bordering Somalia (Dadaab camp), and Turkana bordering South Sudan (Kakuma camp), while the rest (17 percent) live in Nairobi.

Refugees have fled conflict and drought in neighbouring countries, 2022



* including Democratic Republic of the Congo, Ethiopia, Burundi.
Source: UNHCR, December 2022.

The food security situation of the refugee population deteriorated in 2022 due to inflation and high levels of household debt, as well as the impacts of halved food rations linked to insufficient funding. In Kakuma camp, as of August 2022, the price of wheat flour and rice was 40–50 percent above the three-year average, while that of maize was 70 percent above. In Dadaab, the price of wheat flour was 59 percent above average, while maize and beans prices were 13–17 percent above. The year-on-year price of vegetable oil more than doubled in both camps (UNHCR-WFP JAM, 2022).

In 2021, child wasting levels were just under the 'high' prevalence at 9.6 percent in Kakuma and 8.5 percent in Dadaab. In both camps, there was a 60 percent increase in severe wasting admissions compared with 2020. Anaemia levels were a severe public health problem for children aged under 5 years and women of reproductive age in all camps (SENS 2021).

Disease outbreaks (measles, acute watery diarrhoea and cholera) were other aggressive aggravating factors that are likely to have affected the nutritional situation in refugee camps in 2022 (UNHCR, 2022). Staffing levels in health institutions in the camps were insufficient, compromising the quality of service provision (UNHCR-WFP JAM, 2022).

NUTRITION

Number of children under 5 years old with wasting, July–October 2022



115 700 pregnant and lactating women acutely malnourished, 2022

Source: Kenya IPC TWG, September 2022.

Between July and October 2022, the nutrition situation in many counties in Kenya's drought-stricken ASALs was Extremely Critical (IPC AMN Phase 5) and Critical (IPC AMN Phase 4).

During this period, around 884 500 children aged 6–59 months needed treatment for wasting, of whom 222 700 were severely wasted. About 75 percent of the wasted children were in the ASALs and 25 percent in non-ASAL and urban areas (IPC, September 2022). The number of children suffering from wasting was projected to increase to over 970 200, of whom 240 600 were severely wasted, in February–May 2023, with the majority (70 percent) in the ASALs. The number of acutely malnourished pregnant and lactating women was projected to increase from around 116 000 in 2022 to 142 000 in 2023 (IPC, February 2023).

Based on the July 2022 IPC AMN analysis in the ASAL areas, wasting levels were Extremely Critical (IPC AMN Phase 5) in Turkana North and Turkana South as well as Laisamis in Marsabit county (>30 percent). Turkana West, Turkana Central, Samburu, Mandera, Wajir and Garissa counties, as well as Tiaty subcounty in Baringo and North Horr in Marsabit were in Critical (IPC AMN Phase 4) (IPC September 2022). The situation was even worse than during the 2011 Horn of Africa crisis in Turkana South.

The situation was projected to worsen from November 2022. In March–May 2023, Mandera and Wajir counties, North Horr, and Turkana North subcounties were projected to be in IPC AMN Phase 5 (IPC, February 2023).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Poor food consumption was identified as a major contributing factor to child wasting due to very low milk production reported in pastoral drought-affected areas where milk is a major contributor to children's diets. Food insecurity led to poor dietary intake in both children and women, expressed by low dietary diversity and meal frequencies. During March–May 2023, suboptimal rainfall was expected to further aggravate food insecurity due to continued low milk production and the poor body condition of animals while limited crop production in the agropastoral areas will reduce food availability (IPC, February 2023).

However, there was a lack of convergence between the acute food insecurity and acute malnutrition classifications: those counties in extremely critical acute malnutrition situations (IPC AMN Phase 5) (Laisamis in Marsabit county, Turkana South, and Turkana North) were classified in Crisis (IPC Phase 3) for acute food insecurity. The counties and subcounties in Critical (IPC AMN Phase 4) were classified in Crisis (IPC Phase 3) for acute food insecurity. This highlights the importance of non-dietary factors contributing to the very high acute malnutrition levels.

Inadequate maternal and child-feeding practices From October–December 2022, childcaring and feeding practices were expected to worsen with the deteriorating food insecurity situation and as families exhausted their coping strategies. Already, exclusive breastfeeding rates for children aged 0–5 months were estimated at 61 percent in 2020 (UNICEF, 2021), which is considered an 'Alert' level. Nearly 29 percent of children (a moderate public health problem) and 43 percent of pregnant/lactating women were anaemic, indicating a severe public health problem (WHO, January 2023).

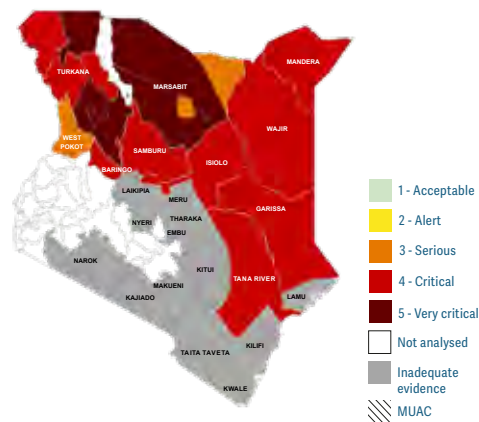
Limited access to health and nutrition services

Humanitarian assistance, including nutrition and health interventions, were hampered by intercommunal conflicts that led to the destruction of infrastructures in parts of Turkana and Marsabit (IPC, September 2022). Around 20–30 percent of the population in ASALs have minimal to no access to essential health services, with outpatient attendance in health facilities having reduced by 42 percent due to population movement, poorly supplied health facilities, insecurity and inadequate outreach (UNICEF, October 2022).

High prevalence of infectious diseases Malaria and upper respiratory tract infections across all counties remained a major contributor to wasting. Also, diarrhoea prevalence was high in Garissa and Laisamis while measles outbreaks were reported in Turkana West, Garissa and Mandera. Low vaccination coverage, low vitamin A supplementation and poor health-seeking behaviour were reported in Garissa while remaining suboptimal in Moyale, Isiolo and North Horr (IPC, February 2023).

Poor household environment Poor access to safe water was a cross-cutting contributing factor to acute malnutrition coupled with poor sanitation. The continued drought in the projection period will worsen water availability, compromising hygiene and sanitation practices, and leading to higher vulnerability to disease. Disease outbreaks of measles and cholera are expected to increase, worsening acute malnutrition (IPC, February 2023).

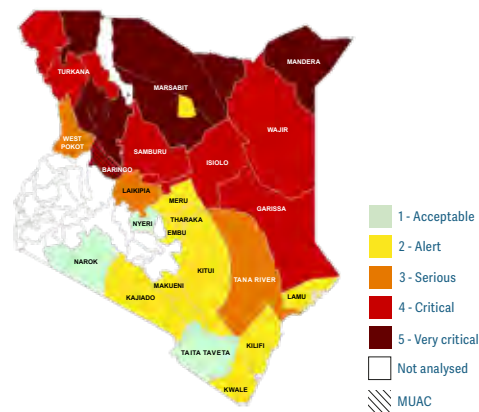
IPC acute malnutrition situation, August–October 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Kenya IPC TWG, September 2022.

Projected IPC acute malnutrition situation, March–May 2023



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Source: Kenya IPC TWG, February 2023.

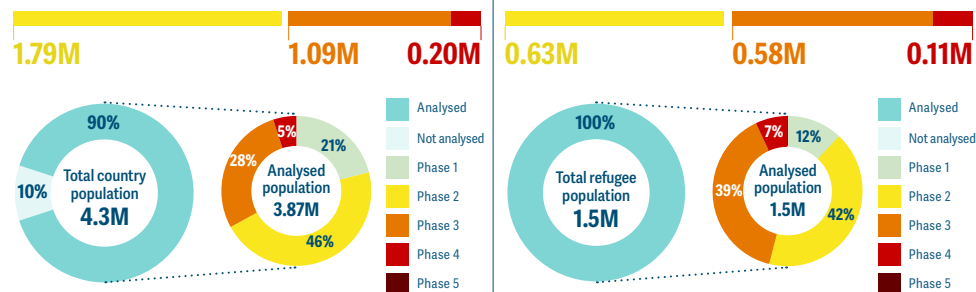
Lebanon

ACUTE FOOD INSECURITY PEAK 2022

1.98M Lebanese residents and Syrian refugees or **37%** of the total analysed populations in IPC Phase 3 or above, September–December 2022

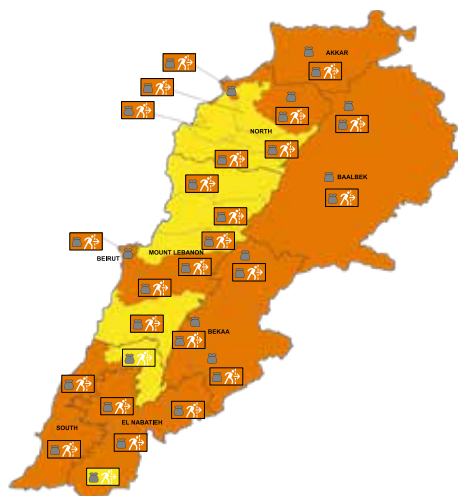
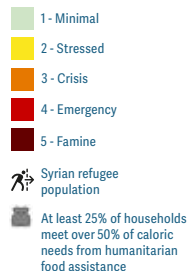
1.29M or 33% of the analysed population are Lebanese residents

0.70M or 46% of the analysed population are Syrian refugees



The IPC considers refugees who are registered with UNHCR (815 000) and non-registered (685 000). Source: Lebanon IPC TWG, December 2022.

IPC acute food insecurity situation, September–December 2022



The IPC considers refugees who are registered with UNHCR (815 000) and non-registered (685 000). The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Lebanon IPC TWG, December 2022.

Food crisis overview

In September–December 2022, about 1.98 million Lebanese residents and Syrian refugees, corresponding to 37 percent of the analysed population, faced Crisis or worse (IPC Phase 3 or above), including over 300 000 people in Emergency (IPC Phase 4), driven by the impacts of economic and financial crisis (IPC, December 2022).

The analysis projected that the acute food insecurity situation would worsen for both population groups in January–April 2023, with about 2.26 million people, corresponding to 42 percent of the analysed population in IPC Phase 3 or above, driven by further deterioration of the economic situation including depreciation of the Lebanese pound (LBP), and protracted inflation.

The number of people in Emergency (IPC Phase 4) was expected to increase from 306 000 to 354 000 people, reaching 7 percent of the population analysed (IPC, December 2022).

Lebanese residents

In September–December 2022, 1.29 million Lebanese residents faced IPC Phase 3 or above, representing 33 percent of the analysed resident population. The majority (17) of the 26 districts were classified in Crisis (IPC Phase 3) and nine in Stressed (IPC Phase 2).

The highest prevalence of acute food insecurity among Lebanese residents was observed in four districts in the north – Akkar, Baalbek, El Hermel, and El Minieh-Dennie – where 50 percent or more of the population analysed was facing IPC Phase 3 or above, of whom 10 percent were in Emergency (IPC Phase 4) (IPC, December 2022).

In January–April 2023, as a result of the deteriorating economic situation, it was projected that the number of Lebanese residents in IPC Phase 3 or above would increase to 1.46 million, corresponding to 38 percent of the total country population. The number of districts classified in Crisis was projected to increase from 17 to 19. During this period, 60–65 percent of the Lebanese

resident population in Akkar, Baalbek and El Hermel districts was projected to be in IPC Phase 3 or above, with 15 percent in IPC Phase 4. During both the 2022 peak and the 2023 projection periods, Akkar had the highest number of residents in IPC Phase 3 or above followed by Baabda, Baalbek and Tripoli (IPC, December 2022).

Syrian refugees

In September–December 2022, 0.7 million Syrian refugees faced IPC Phase 3 or above, representing 46 percent of the 1.5 million refugees hosted in Lebanon. Nearly all (24) of the 26 districts in which refugees reside were classified in IPC Phase 3, and just two in IPC Phase 2.

The highest prevalence of acute food insecurity among refugees was observed in seven districts – Akkar, Baalbek, El Hermel, El Koura, Marjaayoun, Tripoli and West Bekaa – with the refugee population in IPC Phase 3 ranging from 55–60 percent and those in IPC Phase 4 from 5–15 percent (IPC, December 2022).

In January–April 2023, as a result of the deteriorating economic situation, it was projected that the number of Syrian refugees in IPC Phase 3 or above would increase to 0.8 million, more than half of the refugee population in the country. During this period, one in five Syrian refugees in Akkar were projected to be in IPC Phase 4. Around 65 percent of the population in El Hermel and Marjaayoun districts, and 60 percent in Baalbek, Beirut, El Koura, El Minieh-Dennie, Tripoli and West Bekaa were projected to face IPC Phase 3 or above. During both periods, Zahle district had the highest number of Syrian refugees in IPC Phase 3 or above, followed by Baalbek and Akkar (IPC, December 2022).

Drivers of the crisis, 2022–23

Economic shocks Since October 2019, Lebanon has been confronted with a severe economic and financial crisis, facing its largest economic recession since the end of the civil war in 1990 as well as the economic impacts of the COVID-19 pandemic. This has been exacerbated by political

stalemate and lack of governance (IPC, December 2022).

High and rising inflation driven by the plummeting exchange rate on the parallel market, the exponential growth of the amount of currency in circulation, the lifting of subsidies on food and non-food products, coupled with elevated international prices (particularly of food and fuel) severely undermined the ability of Lebanese residents and Syrian refugee families to cover their basic needs (WFP, September 2022).

The Lebanese pound lost almost 50 percent of its value on the parallel market between October 2021 and October 2022 and more than 94 percent since the start of the crisis in October 2019, with grave consequences given the country's high reliance on imports for most of its food and non-food needs. The damage to Lebanon's main grain silos incurred during the Beirut port blast in August 2020, coupled with strikes by public sector workers, also strained the country's food import capacity (WFP, September 2022).

In September 2022, Lebanon's food import volume was 17 percent lower year-on-year and 44 percent below that of October 2019 (WFP, October 2022).

The cost of the food component of the Survival Minimum Expenditure Basket (SMEB)¹ increased 19-fold between October 2019 and September 2022 (WFP, October 2022). The unemployment rate jumped from 11 percent in 2018–19 to 30 percent in 2022 (CAS-ILO, May 2022).

The Food Price Index was expected to rise by around 50 percent in the first quarter of 2023, and the SMEB by 20 percent between September 2022 and April 2023. Cash assistance to Lebanese residents was expected to remain at 2022 levels, but purchasing power likely will erode through increasing inflation. Cash assistance to Syrian refugees was expected to reduce by up to 20 percent between January and March 2023 due to lack of funding (IPC, December 2022).

As of August 2022, the average monthly income among Lebanese resident households covered only 29 percent of the SMEB (WFP, September, 2022).

Syrian refugees face significant barriers in accessing the labour market due to lack of legal residency and often reside in sub-optimal conditions, making them highly reliant on assistance (VASyR, 2022). Over 90 percent of Syrian refugee households incurred debts to cover their basic needs. The cost of rent, which represents a significant share of Syrian refugees' household budgets, rose by 170 percent between July 2021 and July 2022. Only 33 percent of the working-age population was employed, and nearly 30 percent of households had no working members (VASyR, November 2022).

Conflict/insecurity Protracted conflict for over a decade in the neighbouring Syrian Arab Republic continues to affect Lebanon in terms of trade and hosting 1.5 million Syrian refugees, increasing demand on already strained institutions; Lebanon has the highest ratio of displaced people to total population in the world (LCRP, June 2022).

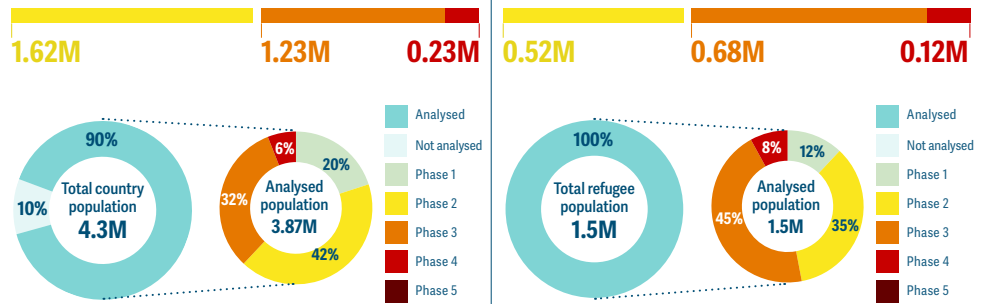
Lebanon has been without a functioning government since 2020. Political volatility has increased tension between groups, resulting in local clashes. Economic and state decay are destabilizing the country's delicate political balance (IOM, December 2022).

ACUTE FOOD INSECURITY PROJECTION 2023

2.26M Lebanese residents and Syrian refugees or **42%** of the total analysed populations in IPC Phase 3 or above, January–April 2023

1.46M or **38%** of the analysed population are Lebanese residents

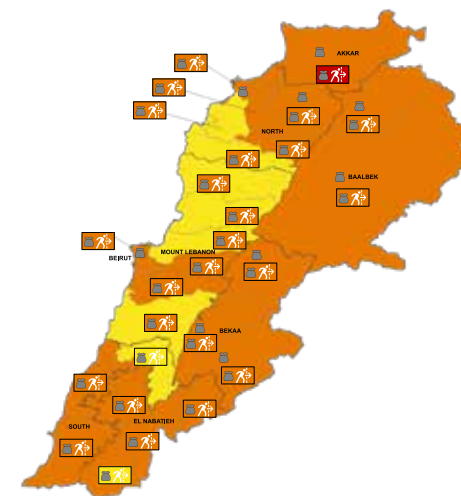
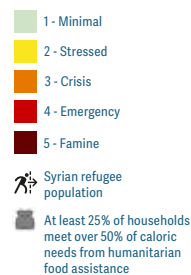
0.80M or **53%** of the analysed population are Syrian refugees



The IPC considers refugees that are registered with UNHCR (815 000) and non-registered (685 000).

Source: Lebanon IPC TWG, December 2022.

Projected IPC acute food insecurity situation, January–April 2023



The IPC considers refugees that are registered with UNHCR (815 000) and non-registered (685 000).

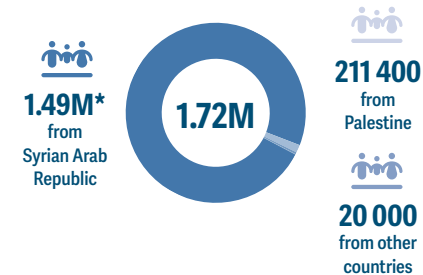
The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Lebanon IPC TWG, December 2022.

¹ The value of the SMEB is the absolute minimum amount required to cover life-saving needs

DISPLACEMENT

Refugees, asylum-seekers, and stateless persons, end 2022



* 815 000 registered with UNHCR. Source: 3RP, February 2023.

Refugees Lebanon continues to host the highest number of displaced people per capita and per square kilometre in the world.

The Government of Lebanon estimates that the country hosts 1.5 million Syrians, along with 211 400 Palestine refugees, of whom 31 400 were displaced from the Syrian Arab Republic. These populations live across all governorates in Lebanon (3RP, February 2023).

Acute food insecurity of refugees is worsening, with the Syrian refugee population in Akkar governorate expected to be in Emergency (IPC Phase 4) in 2023 even with anticipated humanitarian assistance.

Palestine refugees' ability to cover their most basic food and health needs is deteriorating, and the socioeconomic crisis is further limiting their access to livelihoods, pushing this already vulnerable population further into poverty and despair (3RP, February 2023).

Regular food price monitoring surveys conducted by the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) revealed that between October 2019–July 2022, the average cost of a food basket in the Palestine refugee camps in Lebanon rose by around 560 percent. The cost of a loaf of bread increased by 966 percent between October 2019–October 2022 (3RP, February 2023).

Palestine refugees, including those displaced from the Syrian Arab Republic, are increasingly adopting negative coping mechanisms to survive. An UNRWA crisis monitoring survey conducted in March 2022 found that 68 percent had reduced the number of meals they consumed in the face of high food costs. In some areas, children were going to school hungry and without lunch (3RP, February 2023).

NUTRITION

Number of children under 5 years old with wasting, 2022



7 500 pregnant and lactating women acutely malnourished, 2022

Source: Global Nutrition Cluster.

Micronutrient deficiencies and sub-optimal feeding practices were widespread (IPC, December 2022). Despite this, the most recently available SMART survey, conducted in 2021, reported that the overall prevalence of wasting in children under 5 years of age was 'low' for Syrian refugee children (2.5 percent) and 'very low' for Lebanese resident children (1.8 percent).

The acute malnutrition prevalence among pregnant and lactating women reached 7.6 percent among Syrian refugees living in informal settlements and 5 percent among Lebanese women.

The prevalence of stunting among Lebanese children aged 6–59 months was 'low' at 7 percent nationally, but of 'medium' concern (11.7 percent) among displaced Syrians residing out of settlements and of 'high' concern (25 percent) among those in informal settlements. The latter marks an increase from 17 percent in 2013 (IPC, December 2022).

Drivers of undernutrition

Inadequate maternal and child-feeding practices Nationally, only 32.4 percent of Lebanese children under 6 months were exclusively breastfed, and only 6 percent of children aged 6–23 months received a Minimum Acceptable Diet (MAD), which is reflective of both inadequate diet diversity and meal frequency.

Syrian refugee infants were more likely to be exclusively breastfed for the first 6 months of life (65.2 percent), but beyond then MAD was also low (6.3 percent for 6–23 month-olds) (SMART, 2021).

Some 41.9 percent of Lebanese women of reproductive age and 41.3 percent of children aged 6–59 months were suffering from anaemia, indicating a severe public health problem.

For Syrian refugees in informal settlements, anaemia was a moderate public health problem (31.4 percent among women and 32.8 percent among children), most of which can be attributed to micronutrient deficiencies (Lebanon Nutrition Sector, 2022).

Limited access to health and nutrition services

The health system has been under significant pressure, including a significant migration of human resources. Up to 20 percent of nurses and 40 percent of doctors are estimated to have left the country. Hospitals face shortages of staff, while medicines are scarce and immunization rates of children have dropped (OCHA 2022). According to mVAM 2022 data, nearly 50 percent of the Lebanese resident population faced challenges to access health services. High costs, lack of health insurance and shortages of medicines were the main access barriers to health services (WFP, July 2022).

Poor household environment Access to safe and sufficient water for drinking and domestic use was problematic. The public water network was severely affected by budget cuts and electricity shortages, with a resultant impact on public health, hygiene and sanitation.

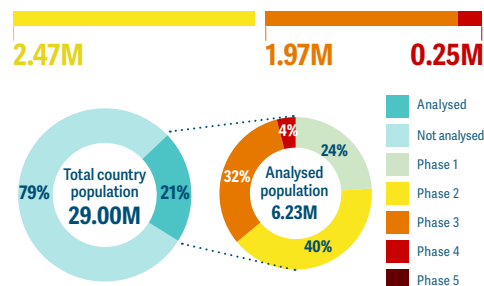
Untreated wastewater dumping increased, and, in October 2022, the country registered its first cholera case since 1993. By the end of November, nearly 4 700 suspected and confirmed cholera cases and 20 deaths were reported across Lebanon.

The WASH sector estimated that the cost for a household to receive sufficient water to meet basic needs was 75 percent of the average wage in July 2022 (WASH Sector, 2022).

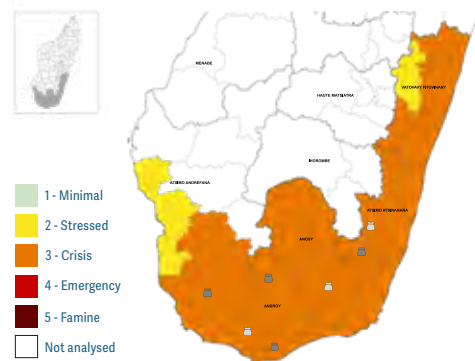
Madagascar (Grand Sud and Grand Sud-Est)

ACUTE FOOD INSECURITY PEAK 2022/2023

2.23M people or **36%** of the analysed population in IPC Phase 3 or above, November 2022–March 2023



IPC acute food insecurity situation, November 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Madagascar IPC TWG, January 2023.

Food crisis overview

During the November 2022–March 2023 lean season, 36 percent of the analysed population in Madagascar's Grand Sud and Grand Sud-Est were in Crisis or worse (IPC Phase 3 or above), almost the same share as the 2021 peak in November–December when the Grand Sud was gripped by devastating drought.

Compared with the analysis for the November–December 2021 peak, the analysed population increased from 16 percent to 21 percent, and the total country population increased by over 1 million.

The situation in the Grand Sud alone eased from 1.47 million people in IPC Phase 3 or above in 2021 to 1.35 million in 2022. The number of people in Emergency (IPC Phase 4) decreased from 405 000 to 157 000. No populations faced Catastrophe (IPC Phase 5) in 2022, compared with 14 000 in April–September 2021 (IPC, July 2021).

This improvement is due to favourable weather for crop production, sustained humanitarian food assistance and agricultural input distributions (IPC, January 2023). Still,

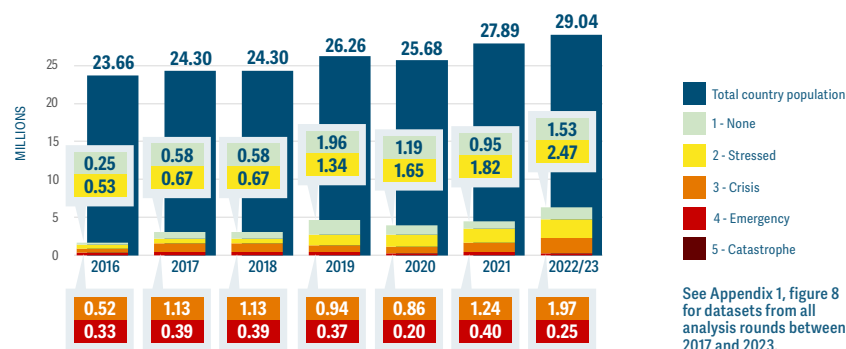
of the 21 districts analysed in November 2022–March 2023, 19 were classified in Crisis (IPC Phase 3) due to the slow recovery from five consecutive below-average harvests in both regions, and the impact of cyclones in the Grand Sud-Est. In four districts of the Grand Sud and Befotaka in the Grand Sud-Est, 50–65 percent of the population was in IPC Phase 3 or above. In terms of severity, the most-affected districts were Ikongo and Bekily, with 15 percent of their populations in IPC Phase 4 (IPC, January 2023).

The IPC projections were made before tropical storm Cheneso hit in mid-January 2023, bringing flooding that affected 55 000 people (DG ECHO, January 2023).

Slight improvement projected for 2023

The number of people in IPC Phase 3 or above is projected to decrease from March 2023 to 1.54 million, or 25 percent of the analysed population in the post-harvest period until July 2023. In August–October 2023, 1.01 million people (30 percent of the analysed population) in the Grand Sud are projected to face high levels of acute food insecurity (IPC, January 2023).

Numbers of people by phase of acute food insecurity, 2016–2023



See Appendix 1, figure 8 for datasets from all analysis rounds between 2017 and 2023.

Source: Madagascar IPC TWG.

Acute food insecurity since 2016

Madagascar has been included as a 'major' food crisis in all seven editions of the GRFC. The analyses have always focused on the Grand Sud and Grand Sud-Est, which are most affected by drought and tropical cyclones, limiting coverage to 7–21 percent of the country population.

Drivers of the crisis, 2022–23

Weather extremes In January 2022, tropical storm Ana affected 1.1 million people in seven provinces in the Grand Sud-Est. It flooded 168 670 hectares of cropland during the peak growing season for rice, maize, potatoes and sorghum and displaced 72 000 people (FAO, January 2022).

Cyclones Emnati and Batsirai in February 2022 brought heavy rains and wind that flooded or damaged more than 88 000 hectares of subsistence agricultural land, almost half of it in the Vatovavy region. The rains brought little long-term relief to farmers, and after the cyclones passed, the drought resumed (FAO-GIEWS, July 2022).

A year later, in February 2023, cyclone Freddy affected almost 300 000 people (DG ECHO Daily Map, 15 March 2023).

Annual food production losses are estimated at USD 61 million for the 2021/22 season, with rice and cassava accounting for 90 percent of these losses (FAO, June 2022). In the Sud-Est, the negative impact on cash crops curtailed employment opportunities and household income for the rest of the year, especially in Nosy Varika and Vohipeno (FEWS NET, August 2022).

Following at least five consecutive years of low harvests (2016–2021), drought conditions in the Grand Sud kept cereal production at average to below five-year average levels in 2022 (FAO-GIEWS, July 2022).

Nationally, the maize harvest was an estimated 8.4 percent below the five-year average (FAO-GIEWS, December 2022).

Economic shocks In response to rising global prices of fertilizer and energy, the Madagascar Government raised fuel prices by an average of 34 percent (WB, 2022), which contributed to higher agricultural production costs. This may diminish areas planted, yields, agricultural labour opportunities and incomes. Food prices rose in 2022, largely owing to higher import costs following the increases in global food and energy prices (FAO-GIEWS, December 2022).

NUTRITION IN THE GRAND SUD AND GRAND SUD-EST

Number of children under 5 years old with wasting, May 2022–April 2023



There were 355 000 children with wasting in the Grand Sud, of whom 39 000 were severely wasted, and 139 000 in Grand Sud-Est, of whom 53 000 were severely wasted.

Source: IPC TWG, October 2022.

Nearly 479 000 children under 5 years were expected to suffer from wasting – with 92 000 of them severely wasted – in the analysed areas of the Grand Sud and Grand Sud-Est from May 2022–April 2023.

The majority of them were in the Grand Sud (355 000), where the prevalence was ‘medium’ at 7.7 percent. In the Grand Sud-Est, a SMART survey carried out in July 2022 estimated a ‘medium’ prevalence of 8.7 percent suffering from wasting, but a high prevalence of severe wasting at 2.5 percent, which translated into 139 000 severely wasted children (IPC, October 2022).

Out of the 53 000 severely wasted children in Grand Sud, the highest prevalence was found in Bekily and Ampanihy districts. Of the 39 000 severely wasted children in Grand Sud-Est, Nosy Varika and Befotaka districts had the highest prevalence (IPC, October 2022).

In ten districts of the Grand Sud, the number of wasted children has decreased since 2021, when in May it reached 501 500, with 111 000 severely wasted, due to the consequences of severe drought (GRFC, April 2022). A seasonal deterioration in child wasting levels in the Grand Sud and Grand Sud-Est was expected from the onset of the lean season in October 2022, peaking in January–April 2023 when 14 districts were projected to be in IPC AMN Phase 3 and the remaining seven in IPC AMN Phase 2. The lean season projection is based on assumed rising cases of water-related diseases, rising food prices, and the 2022/23 October–April cyclone season cutting off food, medical and nutritional inputs, and complicating access to income sources and healthcare (IPC, October 2022).

Stunting is a major public health concern in Madagascar. It is the fifth worst-affected country in the world, with 39.8 percent of all children under 5 (around 2 million children) suffering from stunting nationally, principally in rural areas. In the central region of Vakinankaratra, the prevalence reached 51.9 percent (INSTAT, August 2022).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Acute food insecurity was identified as a major contributory factor to child wasting in the majority of analysed districts, with the exception of Betroka, Taolagnaro, Vangaindrano and Ifanadiana (IPC AMN, October 2022).

Inadequate maternal and child-feeding practices The prevalence of 6–23 month-old children consuming a Minimum Acceptable Diet is considered Serious/Severe (IFE Core Group, 2021) at 20 percent (INSTAT, August 2022), and was also considered a major contributor to acute malnutrition in all 21 districts analysed (IPC AMN, October 2022).

Nationally, only 54.4 percent of infants under 6 months are exclusively breastfed (INSTAT, August 2022). Low rates of exclusive breastfeeding are identified as major contributors to wasting in children in all areas analysed in the IPC AMN except the Fitovinany and Atsimo Andrefana regions, and Tsihombe and Manakara districts (IPC AMN, October 2022).

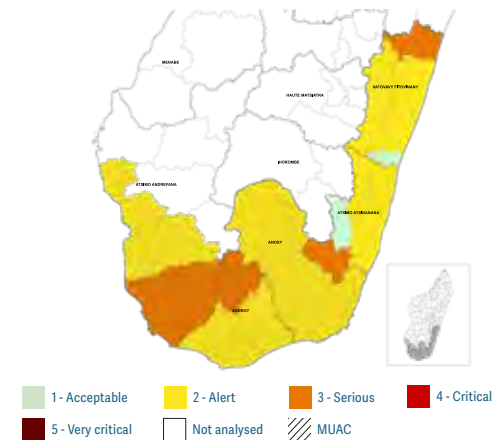
Nationally, nearly half (45.9 percent) of children aged 6–59 months were suffering from anaemia, which, due to its long-term implications, is classified by WHO as a severe public health concern. Around 26 percent of women of reproductive age were anaemic, indicating a moderate public health problem – but it was slightly higher for pregnant (34.1 percent) and breastfeeding women (30.3 percent) (INSTAT, August 2022).

High prevalence of infectious diseases Morbidity, usually related to malaria, diarrhoea and acute respiratory infections, is considered a major contributor to undernutrition, although it is less a factor in the IPC AMN-analysed regions of Androy and Anosy in the Grand Sud. Poor health services are considered a major determinant except in the Fitovinany region, and in the Mananjary and Ifanadiana districts in the Vatovavy region in the Grand Sud-Est (IPC, October 2022).

Poor household environment Only 21 percent of the national population are able to access drinking water from an improved source (INSTAT, August 2022).

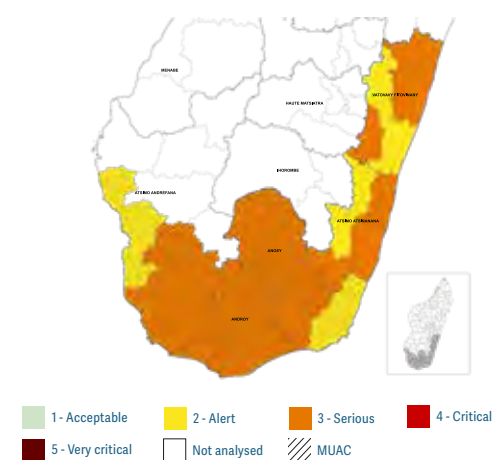
Access to improved water and sanitation sources is a major problem in the districts of the Vatovavy region and the interior districts of the Sud-Est (Befotaka, Midongy, Vondrozo) (IPC, October 2022).

IPC acute malnutrition situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Madagascar IPC TWG, October 2022.

Projected IPC acute malnutrition situation, January–April 2023

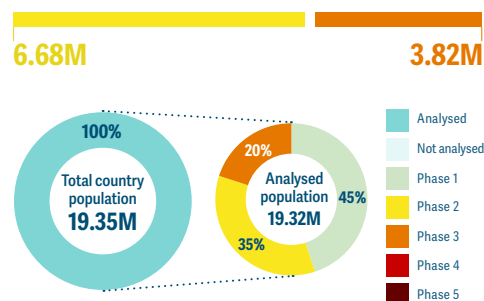


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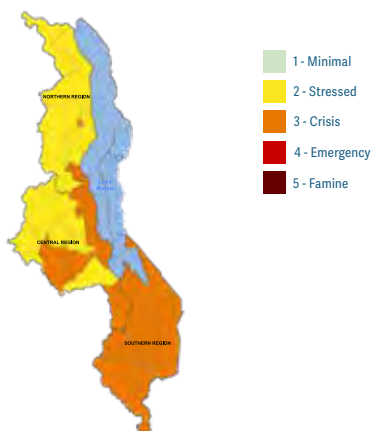
Malawi

ACUTE FOOD INSECURITY PEAK 2022/2023

3.82M people or **20%** of the analysed population in IPC Phase 3 or above, October 2022–March 2023



IPC acute food insecurity situation, October 2022–March 2023



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Source: Malawi IPC TWG, August 2022.

Food crisis overview

The number of people in Crisis or worse (IPC Phase 3 or worse) during the October 2022–March 2023 lean period was 172 percent higher than the same period the previous year (1.4 million people in November–December 2021). This extreme deterioration in national food security reflects the adverse impacts of the war in Ukraine pushing up food and fertilizer prices, and consecutive below-average agricultural seasons as well as a catastrophic flood event, similar to that of cyclone Idai in 2019 (IPC, August 2022).

The total number of people in need of urgent food assistance during the 2022–2023 lean season was also 45 percent higher than the 2021 peak in January–March (2.64 million people), although increased analysis coverage from 90 percent to almost 100 percent also partly explains this rise. Although the extent of food insecurity is higher, its severity seems to have decreased as, unlike in January–March 2021, when 1 percent of the population was in Emergency (IPC Phase 4), no populations were in this phase during the 2022 peak (IPC, August 2022).

During the 2022–2023 lean season, 20 percent of the total population was in Crisis (IPC Phase 3), up from 15 percent of the analysed population in early 2021 and 13 percent in early 2020. In the southernmost districts of Chikwawa and Nsanje, 35 percent of the population was in IPC Phase 3. Twenty-one out of 32 areas were classified in IPC Phase 3, including all districts in Southern Malawi, four in the Central region – Lilongwe, Nkhhotakota, Ntcheu and Salima – and Mzuzu in the Northern region (IPC, August 2022).

Acute food insecurity in Malawi’s four cities worsened due to high inflation and high transportation costs. Blantyre, Lilongwe, Mzuzu and Zomba were all classified in IPC Phase 3 with 0.63 million inhabitants in this phase, representing 27 percent of the urban population (IPC, August 2022).

Acute food insecurity since 2016

Malawi has been defined as a major food crisis in all editions of the GRFC since 2017, having surpassed the 1 million people in IPC Phase 3 or above threshold, largely due to the impact of weather extremes on harvests, high food prices and low household purchasing power. The share of the analysed population in IPC Phase 3 or above or equivalent decreased between 2018 (when it was 22 percent) to around 14–15 percent in 2020 and 2021, before increasing again to 20 percent by 2022. Its continual inclusion in the report reflects underlying structural problems that have left Malawi vulnerable to extreme weather events, particularly in the Southern region, where most rural livelihoods (90 percent) depend on rainfed subsistence farming and income from casual agricultural labour (WFP, 2022).

Over the past five years, the Southern region has had the highest number of highly food-insecure populations, particularly the districts of Balaka, Chikwawa and Nsanje, which have been consistently classified in IPC Phase 3. The situation has deteriorated in the Central districts of Lilongwe, Nkhhotakota, Ntcheu and Salima due to weather-related shocks (IPC, August 2022).

Drivers of the crisis, 2022–23

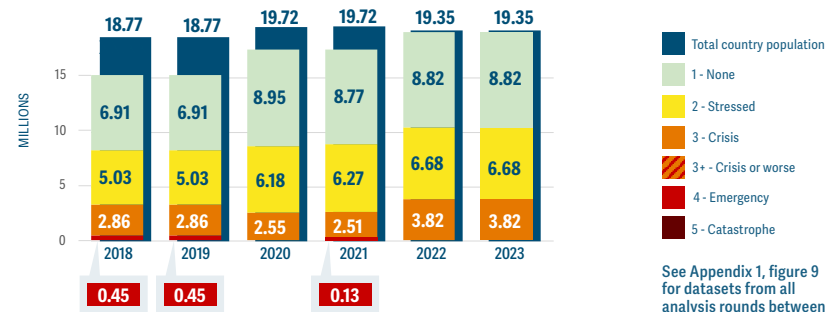
Weather extremes Torrential rains and flooding from tropical storm Ana in January 2022 caused extensive damage in parts of Southern Malawi. The five districts of Chikwawa, Nsanje, Salima, Phalombe and Mulanje were hit hardest, and around 222 302 people were directly impacted in Central and Southern regions. Around 91 700 hectares of agricultural land were flooded and 38 500 livestock injured or killed (FAO, February 2022).

Maize production in 2022 was higher than the five-year average and only slightly lower than the bumper crop year of 2021 (FAO-GIEWS, July 2022).

Economic shocks High prices for basic food and non-food commodities and low levels of household income compromised households’ food access (WFP, May 2022).

Malawi is dependent on oil and fertilizer imports, and the spike in global food and fuel prices in March, underpinned by the war in Ukraine, pushed up domestic fuel and food prices in the first half of 2022. Additionally, the 25 percent devaluation of the national currency in

Numbers of people by phase of acute food insecurity, 2017–2023



Source: Malawi IPC TWG.

See Appendix 1, figure 9 for datasets from all analysis rounds between 2017 and 2023.

May 2022 and high international prices caused further inflationary pressure (FAO-GIEWS, July 2022).

In May 2022, the national average price of the staple food, maize, was an estimated 60 percent higher than year-earlier prices. It was highest in Southern districts, notably in Nsanje, where prices were 10 percent higher than in Northern and Central areas (FAO-GIEWS, July 2022).

By November 2022, maize prices ranged from 142–224 percent higher than the November five-year average (FEWS NET, December 2022).

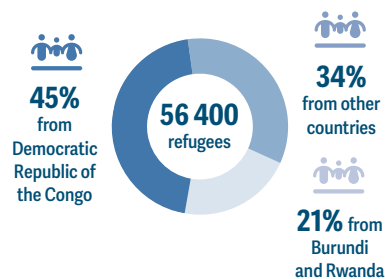
In Southern Malawi, many poor households were subsisting on limited income from sales of non-timber forest products, such as firewood and thatch grass, and remittances from family members in Mozambique, while consuming only one or two meals per day. In some cases, households resorted to eating maize husks (FEWS NET, October 2022).

At the end of 2022, labour demand and wage rates were below normal, as middle and better-off households had fewer resources to hire labour, especially in Central and Southern Malawi (FEWS NET, December 2022).

By January 2023, maize grain prices were at another record high due to currency weakness, high global commodity prices and lower domestic supplies (FAO, February 2023)

DISPLACEMENT

Refugees and asylum-seekers, end 2022



Source: UNHCR, 2022.

Refugees As of 30 November 2022, 56 400 refugees and asylum-seekers – 48 percent of whom are children – were registered in Dzaleka camp, which was originally built for 10 000–12 000 people (WFP, October 2022). While many have been in the country for decades, refugees from Burundi and the Democratic Republic of the Congo continue to arrive at an average rate of 400 individuals per month (UNHCR, 2022).

Refugee assistance was underfunded in 2022. Around 48 000 refugees received monthly e-payments from WFP (WFP, October 2022). In October 2022, protests erupted at the camp due to a delay in assistance (Voa News, October 2022). According to a March 2022 survey, just over 44 percent of refugee households had a borderline food consumption score (FCS), and 30 percent had poor consumption (SENS, March 2022). While wasting levels were 'low' in Dzaleka, stunting levels were 'high' at 27.3 percent, with 5.2 percent severely stunted.

Exclusive breastfeeding of infants under 6 months was on target at 76.5 percent, but anaemia in children under 5 years was a medium public health concern at 24.3 percent (SENS, March 2022).

The water system is only sufficient for 20 200 people – about 38 percent of the population of the camp. WASH conditions are poor and enable disease outbreaks, including a cholera outbreak (OCHA, February 2023), and contribute to malnutrition challenges.



IDPs Following tropical storm Ana in January 2022, an estimated 945 700 people were displaced to 217 camps in Chikwawa, Mangochi, Mulanje, Neno, Nsanje, Phalombe and Zomba districts.

From April 2022, most camps were decommissioned except some in Chikwawa and Nsanje where about 1 200 households stayed until July 2022 (IFRC, December 2022).

Due to the magnitude of the impact, most returnees were still struggling to recover from this shock in early 2023, although some managed to relocate to higher areas (IFRC, December 2022).

NUTRITION



The most recent national-level data found a wasting prevalence of 2.6 percent among children under 5 years, which is considered a 'low' prevalence, while 0.7 percent were severely wasted. Stunting prevalence among under 5 year-olds remains 'very high', at 35.5 percent (MICS, 2019).

Drivers of undernutrition



Inadequate maternal and child-feeding practices Child-feeding practices remain worrisome in Malawi, with only 8.7 percent of children accessing a Minimum Acceptable Diet (MICS, 2019–2020).

Around 64 percent of children under 6 months had exclusive breastfeeding, which is considered an Alert level. Anaemia among children aged 6–23 months is a severe public health concern, at 55.1 percent prevalence (WHO, 2019). Anaemia levels among pregnant and lactating women were 31.4 percent, considered a moderate public health problem (UNICEF, 2021).



Poor household environment Tropical storm Ana in Southern Malawi in January 2022 and cyclone Gombe caused floods leading to the displacement of a population with low pre-existing immunity who then lacked access to safe water, sanitation and hygiene. According to the latest national-level data, 70.5 percent of the population had access to basic drinking water in 2020 (UNICEF, 2020). At least eight out of ten households use improved sanitation, and only around half (52.8 percent) had soap available at handwashing facilities (MICS, 2019–2020).

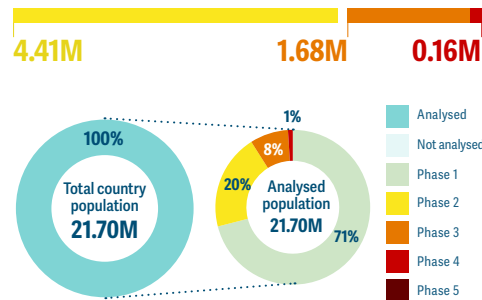


High prevalence of infectious diseases A cholera outbreak started in March 2022, affecting 27 out of 29 districts. It represents the largest outbreak reported in Malawi in the past ten years (WHO, November 2022; OCHA, February 2023).

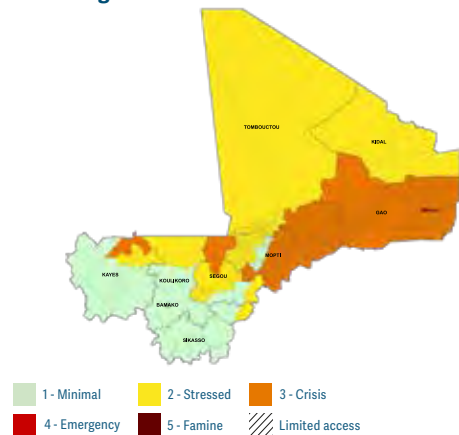
Mali

ACUTE FOOD INSECURITY PEAK 2022

1.84M people or **8%** of the analysed population in CH Phase 3 or above, June–August 2022



CH acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Cadre Harmonisé, March 2022.

Food crisis overview

The number of people in Crisis or worse (CH Phase 3 or above) during the June–August 2022 lean season in Mali reached 1.84 million, the highest number in the history of the GRFC, over 0.5 million more people than during the same period in 2021. The number in Emergency (CH Phase 4) was between two and three times higher.

The sharp increase mainly reflects worsening security conditions in central and northern parts of the country, high food prices and reduced cereal production in 2021 due to weather shocks (CH, March 2022).

Improvement projected for 2023, but with worsening crisis in Ménaka region

During the June–August 2023 lean season, the number of people in CH Phase 3 or above is projected to decrease significantly – by 32 percent – thanks to a projected year-on-year increase in cereal production on account

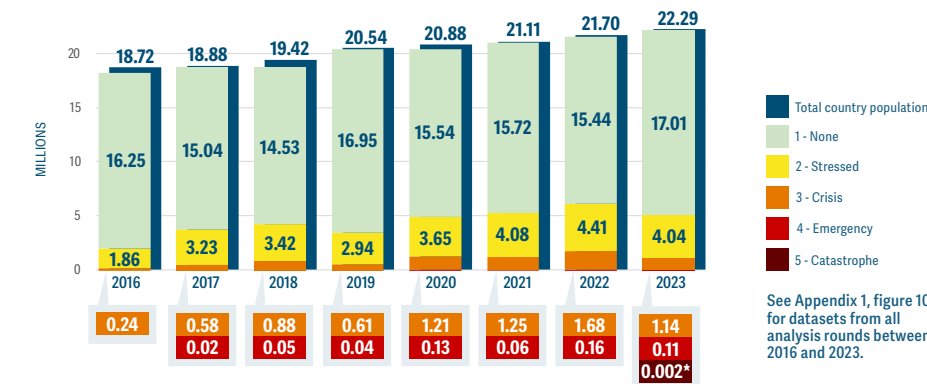
of conducive rains. However, 1 671 people are projected to face Catastrophe (CH Phase 5) in areas cut off from humanitarian assistance in the conflict-affected region of Ménaka to the east of the Gao region.

The areas projected to be in CH Phase 4 (Ménaka) and CH Phase 3 (Douentza, Gourma Rharous, Gao and Ansongo) are all experiencing insecurity, intercommunal conflict, displacement, disruption of socioeconomic activities and livelihood degradation (CH, November 2022).

Acute food insecurity since 2016

Mali has been included as a food crisis in all seven editions of the GRFC but only as a ‘major’ food crisis since 2019 when it was selected only as part of the Central Sahel regional crisis. For each of the last three years, it has had more than 1 million people in CH Phase 3 or above during the peak period. The year-by-year high levels of acute food insecurity were mainly

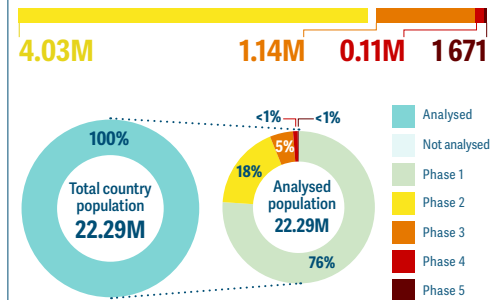
Numbers of people by phase of acute food insecurity, 2016–2023



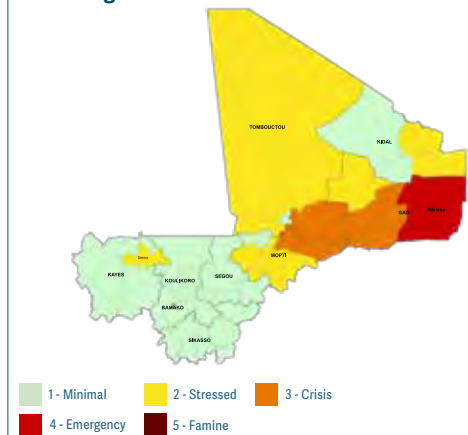
* 1 671 people projected to be in CH Phase 5 from June–August 2023.
Source: Cadre Harmonisé.

ACUTE FOOD INSECURITY PROJECTION 2023

1.25M people or **6%** of the analysed population in CH Phase 3 or above, June–August 2023



Projected CH acute food insecurity situation, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Cadre Harmonisé, November 2022.

driven by the worsening of security conditions across the Central Sahel, particularly in the Liptako-Gourma region, increased displacement, recurrent weather extremes and the socioeconomic shocks related first to COVID-19 and latterly to the effects of the war in Ukraine.

Drivers of the crisis, 2022–23

Conflict/insecurity Worsening conflicts in 2022, mostly in the Liptako-Gourma authority area (Gao, Kidal, Ménaka and Mopti, Tombouctou and Taoudénit regions) hampered agricultural and pastoral activities, caused population displacements and restricted farmers' access to fields, limiting the area planted with cereal crops (FAO-GIEWS, October 2022). It disrupted income-earning activities, the supply of markets, the delivery of humanitarian food assistance and the ability of households to meet their food and non-food needs (FEWS NET, December 2022).

In Ménaka and Gao, transhumant herders experienced cattle theft and access constraints to certain grazing areas due to insecurity, negatively affecting animal production and purchasing power of pastoral households (FEWS NET, December 2022).

In the north, insecurity often temporarily suspended humanitarian activities, delaying assistance for populations in need (ACAPS, December 2022).

The abnormal high price levels of coarse grains mainly reflected a below-average market supply situation, underpinned by conflict-related market disruptions and reduced cereal outputs in 2021 (FAO, December 2022).

Economic shocks Prices of coarse grains increased steadily until October 2022 when they were more than double their year-earlier levels, with sharp increases registered in markets in conflict-affected central areas and in areas bordering Senegal and Burkina Faso (FAO, December 2022).

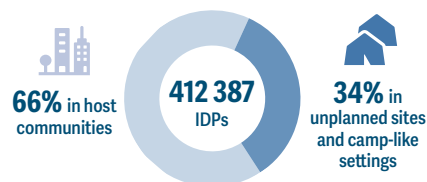
Disrupted trade flows and increasing prices of energy and food associated with the war in Ukraine also contributed to price rises as Mali relies heavily on imports to meet its consumption needs (FAO-GIEWS, October 2022). It also imports 90 percent of the fertilizer it uses and has experienced supply difficulties since the beginning of the year (FAO, November 2022).

By late 2022, markets were well supplied with cereals thanks to the ongoing harvests, which stabilized prices, though they remained higher than the five-year average and were expected to remain above average in the 2022–23 consumption year. Security incidents in central and northern areas still disrupted trade flows, preventing normal functioning of food and livestock markets (CH, November 2022).

Weather extremes Abundant rains through September mitigated some earlier rainfall deficits in parts of southern, central and western regions and supported crop development across most of the country, but also resulted in localized flooding that caused crop losses, disruption of agricultural livelihoods and destruction of productive assets (FAO-GIEWS, October 2022). By early November, heavy rains and flooding had affected over 79 000 people, mostly in Tombouctou, Mopti, Koulikoro and Ségou regions (OCHA, November 2022). Aggregate cereal production in 2022 was expected to be 17 percent above that of 2021 and 5 percent above the recent five-year average. While production of coarse grains – maize, millet and sorghum – were 7 percent above average levels, rice production was slightly below (-1.2 percent) (PREGEC, November 2022).

DISPLACEMENT

IDPs mainly live in displacement sites, 2022



Source: IOM, December 2022.

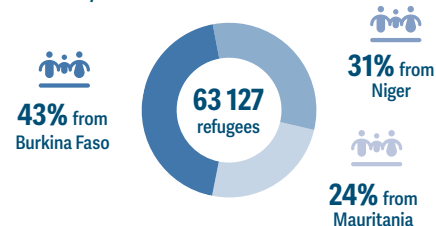
IDPs In 2022, the number of IDPs in Mali reached a peak of 440 436 in September 2022 before decreasing to 412 387 by December 2022. This is an increase of more than 62 000 people on December 2021 (IOM, December 2022).

Two out of three displaced people reported armed conflict as the main reason for displacement, while for one in three, displacement was linked to inter-community tensions. In 2022, drought conditions, intense rainfall, flooding and rivers bursting their banks during the rainy season forced 23 957 people to abandon their homes, but most of them returned by the end of the year (IOM, December 2022).

Levels of acute food insecurity are very high among IDPs in Mali. From June–August 2022, around 140 400 were projected to be in Crisis or worse (CH Phase 3 or above), representing 36 percent of the IDP population. Around 16 300 of them were in Emergency (CH Phase 4) (CH, November 2021).

In an analysis covering June–August 2022 across 13 communes in the regions of Ségou, Mopti and Gao, 98 percent of the displaced households surveyed were engaged in an income-generating activity – mainly agriculture (64 percent), livestock (21 percent), trade (7 percent) and fishing (1 percent). Among the farming households, 54 percent produced crops for own consumption, and 46 percent for consumption and sale (IOM DTM, August 2022). Crop production was a necessity for many because there were no markets nearby (68 percent), or markets were poorly supplied (19 percent), or insecurity made travelling to the market too dangerous (5 percent) (IOM DTM, August 2022).

Refugees from three neighbouring countries, 2022



Source: UNHCR, December 2022.

At the national level, the prevalence of wasting among internally displaced children under 5 years was 'very high' according to the WHO severity classification, up from 10 percent in 2021 to 15 percent in 2022. Of them, 2.4 percent were severely wasted, up from 1.8 percent in 2021. In IDP sites in the Mopti region, the wasting prevalence reached 23.1 percent, well beyond the Emergency 15 percent threshold.

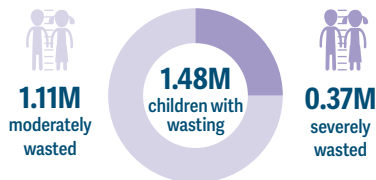
There has also been a deterioration in stunting levels since 2021. At the national level, 26.8 percent of IDP children were stunted, which is considered 'high', up from 22.7 percent in 2021. In the Ségou region, well over half of IDP children (57.4 percent) were stunted, including nearly 30 percent with the severe form (SMART 2022).

Refugees By the end of 2022, the country was hosting 63 127 refugees, an increase of almost 10 000 people since 2021, largely due to those fleeing conflict in Burkina Faso. Around half (54 percent) of refugees in Mali are children (UNHCR, January 2023). Refugees in Mali largely reside in Kayes (24 percent), Ménaka (23 percent), Gao (21 percent) and Mopti (17 percent), while a small percentage live in Bamako, Tombouctou and Sikasso regions (UNHCR, January 2023).

Although specific acute food security data covering refugee populations was unavailable, refugees are generally more likely than non-displaced households to be acutely food insecure due to the highly fragile nature of their livelihoods (HNO, February 2022).

NUTRITION

Number of children under 5 years old with wasting, November 2022–May 2023



11 900 pregnant and lactating women acutely malnourished, November 2022–May 2023

Source: IPC, November 2022.

The number of wasted children under 5 years is expected to increase from 1.2 million in 2022 (IPC, March 2022) to almost 1.5 million in 2023 (IPC, November 2022). Of these, around 367 000 children are expected to be severely wasted, an increase of 16 percent since 2021–22 (IPC, March 2022 and IPC, November 2022).

From June–October 2022, five areas in Ménaka and Ségou regions and IDPs in Bamako and Mopti were classified in Critical (IPC AMN Phase 4), while 28 areas were in Serious (IPC AMN Phase 3). These included all areas in the regions of Kayes, Mopti, Gao, Tombouctou and Taoudénit, two areas in Ménaka and three in Ségou. Between November 2022 and May 2023, the areas classified in IPC AMN Phase 4 were likely to improve to IPC AMN Phase 3, except for Tidermène, which could remain in IPC AMN Phase 4.

In 2022, the national wasting prevalence was ‘high’ (10.8 percent), up from 10 percent in 2021, and higher among boys (12.3 percent) than girls (9.4 percent). The prevalence was ‘very high’ (16.1 percent) in the region of Gao, and above the national average in Kayes (14.2 percent), Ménaka (14 percent), Tombouctou (14 percent), Mopti (11.5 percent) and Taoudénit (11.3 percent) (SMART 2022).

At the national level, 2.1 percent of children were suffering from severe wasting, and again the prevalence was higher for boys (2.6 percent) than girls (1.6 percent). The Ménaka region was the most affected (3.6 percent) followed by Gao (3.3 percent) (SMART 2022).

Almost 10 percent of pregnant or lactating women were suffering from acute malnutrition (MUAC < 23cm), with the highest prevalence in Ménaka (20.7 percent), Gao (16.2 percent), Ségou (11.8 percent) and Kayes (11.6 percent) (SMART 2022).

Child stunting was also considered ‘high’ at 21.9 percent at the national level and again higher among boys (25.1 percent) than girls (18.8 percent).

The highest stunting levels were in Gao, Kayes, Kidal, Koulikoro, Mopti, Sikasso and Ségou, with 21–27 percent of under-5s stunted. Between 2021 and 2022, the stunting prevalence worsened significantly in Kayes and Ségou, but improved slightly in Ménaka and Gao (SMART 2022).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Acute food insecurity – and all the factors that underpin it – is a major contributor to acute malnutrition, especially in the conflict-affected regions of Gao, Tombouctou, and in Andéramboukane (Ménaka), Bandiagara, Djenné, Douentza and Koro (Mopti) (IPC, March 2022).

Inadequate maternal and child-feeding practices Inadequate quality and quantity of diet are major contributors to child wasting in Mali with child-feeding practices deteriorating markedly between 2021 and 2022.

Just 19 percent of children aged 6–23 months received the recommended number of meals a day compared with 37 percent in 2021; 21 percent received the Minimum Dietary Diversity, down from 23 percent in 2021, and 32 percent were introduced to solid, semi-solid or soft food at the right time, compared with 38 percent in 2021.

Overall, just 4.2 percent of children received a Minimum Acceptable Diet (MAD) compared with 10.5 percent in 2021. This 2022 MAD prevalence is considered ‘Extremely Critical’ (SMART 2022).

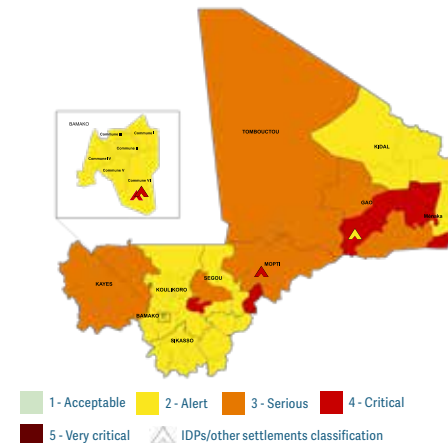
Anaemia data from 2019 indicate a ‘severe’ public health problem, with 79 percent of children aged 6–59 months and 59 percent of women of reproductive age anaemic (WHO, 2019). There has been a slight increase in exclusive breastfeeding rates from 48 percent in 2021 to 50 percent in 2022, but regional variations are stark, ranging from just 5 percent in Bamako to 86 percent in Tombouctou. The comparison between SMART 2021 and 2022 shows a regression in early initiation of breastfeeding (from 83.5 percent in 2021 to 75 percent in 2022) (SMART 2022).

High prevalence of infectious diseases Childhood diseases, such as diarrhoea, acute respiratory infections and malaria, are also behind the high prevalence of child wasting (IPC, March 2022). The Kidal region had the highest prevalence of diarrhoea (30.5 percent) and of fever (29.8 percent). Fever prevalence was also elevated in Ménaka and Sikasso regions. By mid-December 2022, there had been 1 256 suspected cases of measles in Mali (WHO, December 2022).

Poor household environment Poor hygiene conditions and low coverage of access to drinking water are also major contributing factors to disease and undernutrition in some regions. The proportion of households using an improved water source varies from region to region, with the highest proportion in Bamako (98.2 percent) and the lowest proportion in Kidal (23.2 percent) (SMART 2022).

Limited access to health and nutrition services Coverage of the Integrated Management of Childhood Illnesses programme was low in all areas in IPC AMN Phase 3 or above, except in Taoudénit (IPC, March 2022).

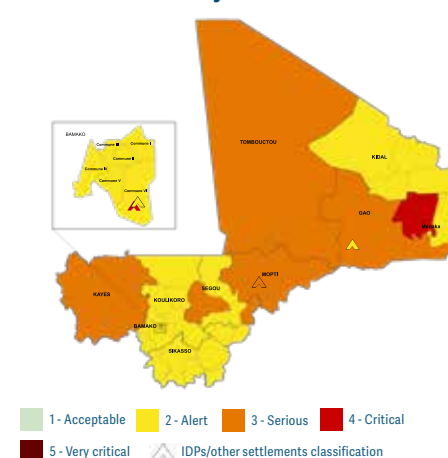
IPC acute malnutrition situation, June–October 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Mali IPC TWG, March 2022.

Projected IPC acute malnutrition situation, November 2022–May 2023



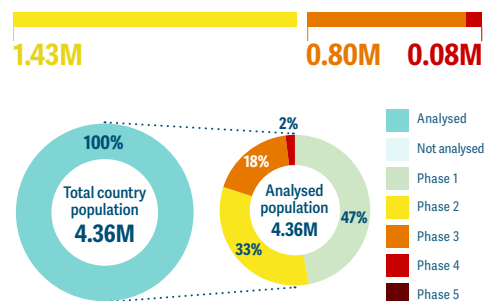
The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Mali IPC TWG, November 2022.

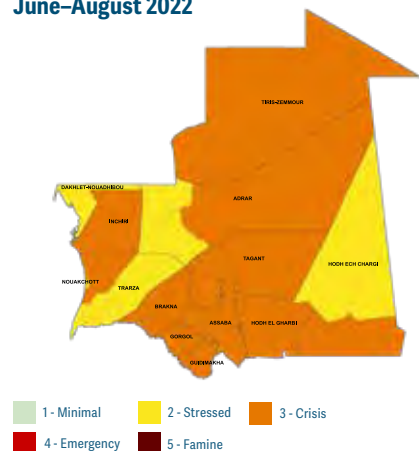
Mauritania

ACUTE FOOD INSECURITY PEAK 2022

0.88M people or **20%** of the analysed population in CH Phase 3 or above, June–August 2022



CH acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, March 2022.

Food crisis overview

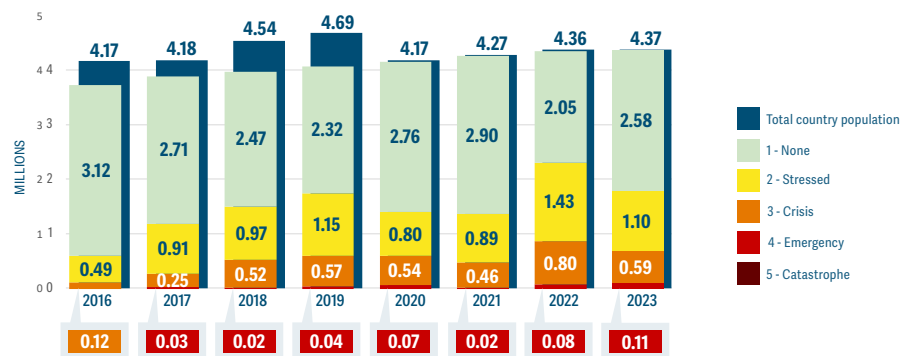
The number of people in Crisis or worse (CH Phase 3 or above) almost doubled between the 2021 and 2022 lean periods to reach 880 000 in June–August 2022, the highest number on CH record.

The sharp increase reflects below-average market supplies and high food prices, stemming from the drought-reduced cereal output in 2021, the impacts of COVID-19, reduced trade with Senegal and Mali, and the high price of imported food as a result of the war in Ukraine (FEWS NET, November 2022; FAO-GIEWS, September 2022).

Slight improvement projected for 2023

A small improvement is projected by June–August 2023, reflecting better 2022 harvests that should help rebuild stocks at market and household level, and satisfactory conditions for crop and livestock production by the end of 2022. Still, around 0.7 million people, 16 percent of the population, will remain in CH Phase 3 or above, and the number of people in Emergency is projected to increase

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Cadre Harmonisé.

by almost 27 percent, largely driven by the long-term effects of economic shocks on food and commodity prices (CH, November 2022).

Acute food insecurity since 2016

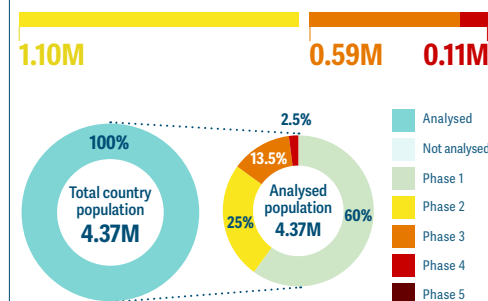
Mauritania has been included as a food crisis in all seven editions of the GRFC due to the impact of weather extremes on food production and income, but has been defined as a 'major' food crisis in this edition, with 20 percent of its population in CH Phase 3 or above in 2022 (CH, November 2022).

Drivers of the crisis, 2022–23

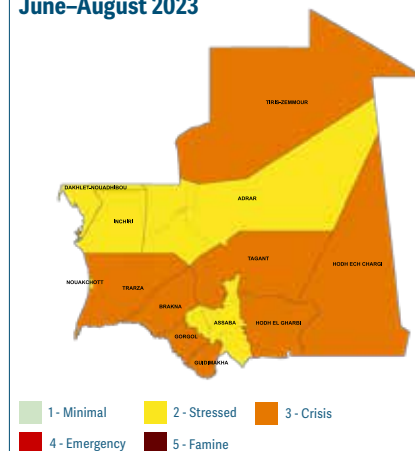
Economic shocks Mauritania's high dependency on wheat imports left it exposed to the effects of the war in Ukraine on international trade and commodity prices in 2022. Between November 2021 and August 2022, it imported only about a third of its annual requirements of wheat, mostly reflecting the interruption of shipments from ports in the Black Sea region, leading to a deficit, especially in southern and urban markets, with a likely

ACUTE FOOD INSECURITY PROJECTION 2023

0.69M people or **16%** of the analysed population in CH Phase 3 or above, June–August 2023



Projected CH acute food insecurity situation, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, November 2022.

drop in per capita consumption (FEWS NET, December 2022). According to the Ministry of Agriculture, as of November 2022, prices of imported wheat flour were 79 percent above the five-year average, and 60 percent above the previous year's levels (FAO-GIEWS, September 2022).

In December 2022, prices of imported wheat flour were 17 percent above levels of the previous year in Nouakchott (FAO, December 2022).

Weather extremes During the 2021 agricultural season, Mauritania experienced its highest level of drought since 2012, with 34 of 48 regions and around 1.4 million people affected (Africa Times, citing IRFC 2022). The drought decimated local food production, driving up prices and increasing import dependency in 2022.

Torrential rains and flash floods in September 2022 caused extensive damage in areas previously affected by flooding in 2020. South-eastern areas bordering Mali experienced 600 percent higher-than-normal precipitation, flooding several cities including the regional capital and affecting around 153 000 people (US HIU, October 2022).

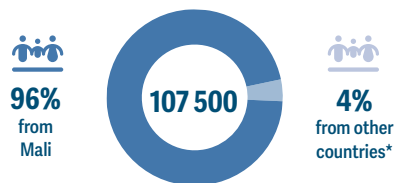
On the up-side, the rains bolstered crop production and pastoral resources (FEWS NET, November 2022). The 2022 harvests were 8 percent higher than the five-year average and 33 percent above 2021 (PREGEC, November 2022), which could help ease food insecurity in 2023.

DISPLACEMENT

Refugees Following the resurgence of tensions in Mali, Mauritania recorded an influx of 7 800 Malian refugees as well as over 4 400 Mauritians returning from Mali in 2022. Many had lost assets, properties and livestock as they escaped violence (UNICEF, January 2023).

By the end of 2022, Mauritania hosted nearly 102 000 refugees (about 60 percent of them children) and 5 450 asylum-seekers (UNHCR, December 2022). More than 80 percent live in Mberra refugee camp in the eastern Hodh Ech Chargui region, bordering western Mali from where they have fled conflict since early 2012.

Refugees and asylum-seekers, end 2022



* Includes Central African Republic and Syrian Arab Republic. Source: UNHCR, December 2022.

Pastoralist movements linked to refugee returns are putting further pressure on already scarce resources and sparking fears of tensions with the host population over access to water (UNICEF, January 2023).

Over 80 percent of households in the camp were assessed to have inadequate food consumption, according to data from a joint World Bank and UNHCR/WFP targeting hub survey in 2021. Only 12 percent of working-age refugees (18–59 years) were employed, while about 42 percent reported having a low capacity to meet their needs and about 47 percent reported having a very low capacity, being entirely reliant on humanitarian assistance (UNHCR-WFP, 2021).

The presence of refugees and new returnees, especially in the Mberra refugee camp, created an increased demand on social services (UNICEF, 2022). The prevalence of wasting among children under 5 years in this camp is 'high' at more than 10 percent (SMART 2021).

About 15 280 refugees and asylum-seekers resided in the two major urban centres, Nouakchott and Nouadhibou. Among them, a significant number of children aged 5–17 years were living in education centres that were ill-equipped as accommodation and with poor sanitation (IOM, January 2022). A survey by UNHCR on the socioeconomic conditions of refugees and asylum-seekers in Nouadhibou reported that they faced integration challenges, with two out of three lacking official documents, impeding their access to essential services and income-generating opportunities. About 70 percent struggled to meet their needs due to monetary poverty, and about 40 percent reported being socially excluded (UNHCR, 2019).

IDPs Disaster-related displacement in Mauritania was the highest recorded since IDMC data began in 2008. Heavy rain and flooding from July to early August displaced 28 900 people in Hodh El Gharbi, Assaba and Tagant in southern and central Mauritania following the destruction of their homes (ICRC, August 2022).

NUTRITION

Number of children under 5 years old with wasting, 2022



59 400 pregnant and lactating women acutely malnourished, 2022

Source: SMART 2021.

Two consecutive years of SMART surveys pointed to a worsening acute malnutrition situation in Mauritania.

The 2021 survey found a national child wasting prevalence of 11.1 percent (high), including 1.9 percent with severe wasting. The wilaya of Guidimakha faced a critical nutritional situation with an under-5 wasting prevalence of 22.3 percent (very high), including 4.1 percent with severe wasting. The regions of Assaba, Gorgol, Hodh El Gharbi and Brakna were in the same situation (SMART, 2021).

The 2022 SMART survey showed a wasting prevalence of 13.5 percent, considered 'high' by WHO cut-offs, as was that of severe wasting (2.6 percent). The number of children with wasting under 5 years was projected to increase from about 137 700 in 2022 to 168 900 in 2023. The number of severely wasted children was projected to increase from 32 949 to 44 384 (SMART, 2021 and 2022).

As of 2021, 17 percent of children under 5 were stunted, which is considered a 'medium' prevalence. At wilayas level, the highest prevalence was in Hodh Ech Chargui (28.5 percent) and Mberra camp (28.9 percent) (SMART, 2021).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets The worsening acute food insecurity situation linked to burgeoning food prices is a contributing factor to increasing undernutrition in Mauritania (UNICEF, 2022a, 2023).

Inadequate maternal and child-feeding practices At the national level, the proportion of children under 6 months having benefitted from exclusive breastfeeding is low at 60.1 percent (SMART, 2021), while only 21.7 percent of children aged 6–23 months received the Minimum Acceptable Diet in terms of quality and quantity. About 65.5 percent of children, aged 6–59 months, were anaemic, indicating a severe public health problem (WHO, 2019).

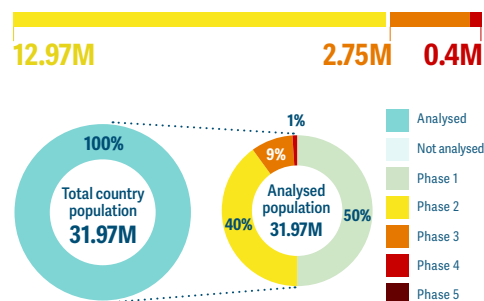
High prevalence of infectious diseases The prevalence of diarrhoea at national level was quite high, at 39.9 percent, but varying between 15.1 percent and 66.6 percent in the wilayas.

Poor household environment The 2021 SMART survey showed that the two main sources of drinking water at national level are tap (57.8 percent) and protected wells (18.2 percent). In Guidimakha, which has the lowest rate of tap water use at 50.4 percent of the population, 35.4 percent of residents use water from unprotected wells as their main source of drinking water, which increases the risk of water-borne diseases such as diarrhoea (SMART 2021).

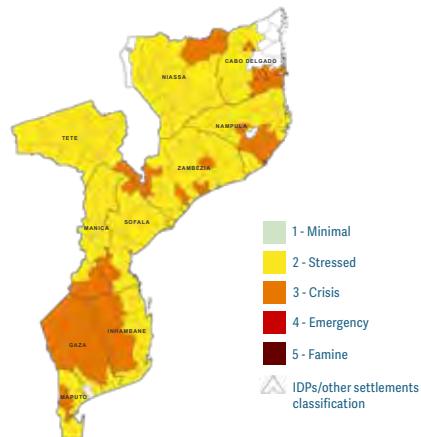
Mozambique

ACUTE FOOD INSECURITY PEAK 2022/2023

3.15M people or **10%** of the analysed population in IPC Phase 3 or above, November 2022–March 2023



IPC acute food insecurity situation, November 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Mozambique IPC TWG, March 2023.

Food crisis overview

In November 2022–March 2023, 3.15 million people were estimated to be in Crisis or worse (IPC Phase 3 or above), representing 10 percent of the total population. This 69 percent increase in the population in IPC Phase 3 or above since the November 2021–March 2022 lean season is partly due to a more than doubling of the analysed population, but there is nonetheless a significant shift from Crisis (IPC Phase 3) to Emergency (IPC Phase 4), with some 400 000 people in that phase, mainly in Cabo Delgado and Nampula (IPC, December 2021; IPC, March 2023).

The highest numbers of people in IPC Phase 3 or above were in the districts of Cabo Delgado, Zambézia and Nampula. Of the 150 districts analysed, 34 were classified in IPC Phase 3 and the rest in Stressed (IPC Phase 2), except for the municipality of the city of Maputo which was classified in Minimal (IPC Phase 1) (IPC, March 2023).

Acute food insecurity since 2016

Mozambique has been categorized as a major food crisis in every edition of the GRFC. Three districts of Gaza (Chibuto, Mabalane and Guijá) have consistently been classified in IPC Phase 3 since 2018. Acute food insecurity increased sharply in Cabo Delgado since 2017, when all districts were in Minimal acute food insecurity (IPC Phase 1). By 2021, most districts were in IPC Phase 3 (GRFC, April 2022).

In terms of magnitude, trends reveal that the worst year in GRFC history was 2022, with 3.15 million people in IPC Phase 3 or above. However, 2017 had the highest number of people in IPC Phase 4 – almost 1 million people (IPC, January 2021).

Drivers of the crisis, 2022–23

Conflict/insecurity Since 2017, conflict in Cabo Delgado has disrupted livelihoods, caused displacement and limited access to basic social services. In 2022, violence spilled into the neighbouring province of Nampula (UN, October 2022), and persisting attacks by non-state armed groups continued to cause large population displacements.

The conflict has impacted the fisheries sector in northern Mozambique, with direct damage to infrastructure, while insecurity restricted access to resources to repair and maintain boats (FAO/Government of Mozambique, June 2022). Conflict will likely contribute to a low level of planting in the 2022/23 cropping season in affected areas (FAO-GIEWS, January 2023).

Weather extremes In early 2022, flood damage from tropical storms Ana and Dumako, and cyclone Gombe, affected 217 000 hectares of agricultural land across Nampula, Zambézia, Tete, and parts of Niassa, Cabo Delgado, Manica and Sofala provinces. They caused heavy rains upriver of the Maputo, Incomati and Umbelúzi rivers, resulting in the flooding of 11 500 hectares of agricultural land in Maputo province. Parts of southern and central Mozambique (FEWS NET, April 2022), including Tete, Manica, Gaza, Inhambane and Maputo provinces, also experienced high land temperatures and prolonged dry spells (IPC, December 2021). In the provinces of Gaza and Manica, over half of the reported acute food insecurity was due to drought or irregular rains (IPC, March 2023).

In Nampula province, maize was severely affected by the cyclones, but preliminary findings of a January 2023 study indicate that most poor households had a good cassava harvest in October–November 2022 and earned income from cashew nut sales and agricultural labour opportunities. Additionally, households reported that post-cyclone humanitarian assistance and a good harvest during the post-flood planting season contributed to minimizing food consumption gaps (FEWS NET, January 2023).

In September and October 2022, most crop-producing households reported a drop in planted area for the upcoming 2022/23 season, mainly in Cabo Delgado, Manica and Gaza (FAO, February 2023). The impact of tropical cyclone Freddy in February and March is likely to aggravate food insecurity in 2023 (OCHA, March 2023).

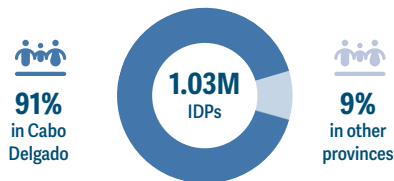
Economic shocks Food, fuel and agricultural input prices, already high due to the effects of the COVID-19 pandemic, rose further in 2022, in part due to the war in Ukraine, impacting household purchasing power. In previous years, Mozambique relied heavily on wheat supplies from the Russian Federation and Ukraine, but in 2022 an increase in imports from India helped to compensate for reduced supplies from these countries (FAO-GIEWS, January 2023). In October, food inflation declined to 20 percent from a peak of 22 percent in August 2022. The stable exchange rate has contributed to containing imported inflationary pressure, while a one-percentage point cut in value-added tax rates in December 2022 was expected to further ease pressure on food prices (FAO, December 2022). Still, annual food inflation was estimated at 14 percent in January 2023 (FEWS NET, January 2023).

DISPLACEMENT

IDPs Since 2017, armed violence has driven hundreds of thousands of families to flee their homes in Cabo Delgado. From June to November 2022, the number of internally displaced people increased by 9 percent from about 946 500 to about 1.03 million. Of the total displaced people, more than half were children under 18 years old (IOM, November 2022).

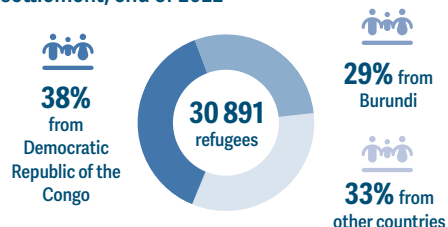
Of these, around 946 000 had fled violence in Cabo Delgado, with about 70 percent living in host communities and 30 percent in displacement sites (UNHCR, December 2022). Despite the return of some IDPs, persistent volatility in the security situation, characterized by scattered and sporadic attacks by insurgents, stopped households from resettling or fully

IDPs largely having fled violence in Cabo Delgado, end of 2022



Source: IOM, November 2022.

Refugees living mainly in Maputo and Maratane settlement, end of 2022



Source: UNHCR, 31 December 2022.

engaging in their income-generating opportunities, keeping them dependent on humanitarian food assistance (FEWS NET, November 2022). Additionally tropical cyclone Gombe displaced 736 000 people in Nampula and Zambezia provinces (OCHA, March 2022). Meanwhile, more than 129 000 people had still not returned home since tropical cyclone Idai in March 2019. Many of them continue to live in emergency shelters in central Manica and Sofala provinces (UNHCR, December 2022).

IDPs face the highest levels of acute food insecurity (FAO-GIEWS, January 2023), yet funding shortfalls hinder sufficient provision of humanitarian assistance. Due to increasing needs and limited funding, the food basket for IDPs was halved in April 2022 to 40 percent of the recommended minimum daily caloric needs (2 100 kcals) (OCHA, October 2022).

In Cabo Delgado, 45 percent of IDPs reported no access to farmland (IOM, September 2021). In Balama, around 92 percent of IDP families had no access to land,

97 percent lacked food and 91 percent struggled to access income-generating activities (IOM, October 2021).

Refugees By the end of 2022, Mozambique hosted over 30 000 refugees. More than half (53 percent) live in the Maputo area and other provinces across the country, about 34 percent in Maratane settlement in Nampula province and 11 percent in Nampula city. Maratane settlement hosts 9 135 refugees and asylum seekers from the Democratic Republic of the Congo (67 percent) and Burundi (28 percent). Almost half are children. In October 2021, 6 percent of households in Maratane settlement had poor food consumption and 38 percent borderline food consumption (UNHCR/WFP, October 2021).

The majority of households, 78 percent, lack the necessary economic resources to cover minimum food needs. In order to cope, refugee households are more likely than their counterparts in the host community to adopt negative coping strategies to make ends meet. Agriculture is the main livelihood option for 44 percent of the population, but there are limitations to accessing land, agricultural inputs, and capital. Continued high food prices also adversely impacted food access (UNHCR/WFP, October 2021).

NUTRITION

Number of children under 5 years old with wasting, in Cabo Delgado and IDP sites, 2022



Source: SMART October, 2021.

The 2021 rapid SMART survey conducted in seven districts and four IDP sites in Cabo Delgado found a 12.7 percent combined prevalence of wasting. Around 74 700 children under 5 years were projected to be suffering from wasting in 2022 in Cabo Delgado, including 27 400 with severe

wasting. According to this SMART survey, severe wasting ranged from 1–3.8 percent across IDP and host communities (SMART, October 2021). An improvement in child wasting is projected in 2023 due to an overall improvement of food availability at the national level, in spite of localized production shortfalls due to weather extremes.

The prevalence of acute malnutrition in pregnant or lactating women is 'acceptable' (<5 percent), by MUAC (SMART, October 2021).

In 2021, stunting levels were 'very high', ranging from 30.6–67.4 percent among displaced and host communities in Cabo Delgado (SMART, October 2021).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Inadequate food consumption, in terms of quantity and variety, leading to nutrient intake deficits is a significant contributor to the poor nutrition situation.

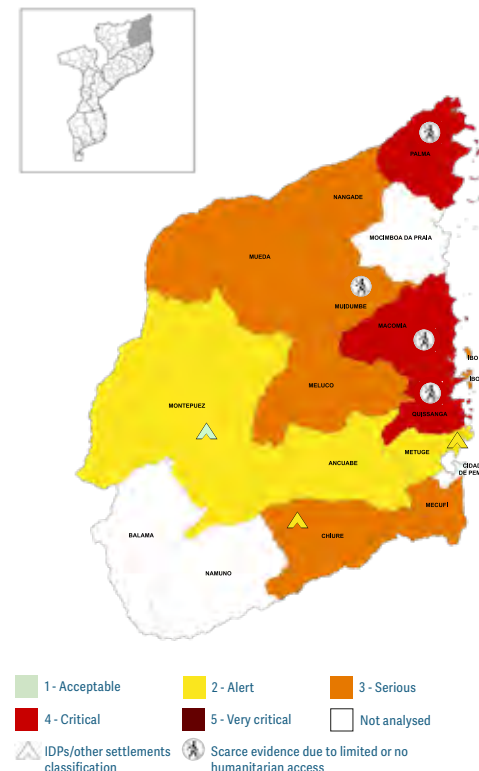
At national level, micronutrient deficiencies account for anaemia in approximately 68.2 percent of children aged 6–59 months and 47.9 percent women of reproductive age (15–49 years), indicating a severe public health problem for both (WHO, 2019).

Inadequate maternal and child-feeding practices Only 41 percent of infants under 6 months were exclusively breastfed. Very few children (13 percent) aged 6–23 months consume a MAD that meets both the recommended dietary diversity and frequency thresholds (SMART, October 2021).

High prevalence of infectious diseases In Cabo Delgado and among IDP households, 20–50 percent of children reported fever and 20–25 percent had diarrhoea two weeks prior to the survey. Outbreaks of measles, cholera and acute watery diarrhoea are also common (SMART, October 2021).

Limited access to health and nutrition services Fewer than 20 percent of the targeted caseload of children with wasting were admitted for treatment in 2021, mainly due to limited access to health systems that are already under strain due to limited resources and increased demand (UNICEF, October 2021).

IPC acute malnutrition situation, October 2021–January 2022




The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Mozambique IPC TWG, June 2021.

Poor household environment Around 63.4 percent of the total population have access to basic drinking water (UNICEF, Global Report 2020). For Cabo Delgado and the IDP sites, limited access to quality water and sanitation and sub-optimal hygiene contribute to outbreaks of disease (UNICEF Global Report, 2020).


Myanmar

ACUTE FOOD INSECURITY PEAK 2022

 **15.2M** people or **27%** of the total population faced high levels of acute food insecurity and were in need of humanitarian assistance in 2022

Source: HNO 2023, January 2023.

Food crisis overview


 The number of people experiencing high levels of acute food insecurity and in need of humanitarian assistance increased from over 13 million in 2021 to 15.2 million in 2022, representing 27.1 percent of the total population, based on WFP's rCARI methodology (see Technical Notes). Active fighting, population displacement and movement restrictions, as well as rapid currency depreciation and high food, fuel and fertilizer prices, severely limited food access and availability and pushed prices beyond many households' reach (WB, July 2022).

The worst food security outcomes were reported in the states/regions of Chin, Kayah, Kayin, Rakhine and Sagaing. An estimated more than half of households were relying on crisis and emergency coping mechanisms that are more difficult to reverse and likely to reduce future income streams and food production levels (HNO, January 2023).

Drivers of the crisis, 2022–23


 **Conflict/insecurity** Resistance to the military takeover in February 2021 has evolved into a protracted conflict that has led to widespread insecurity and displacement. Ongoing armed civil conflict has limited people's ability to produce food, mainly in the Rakhine, Sagaing and Kayah states/regions, through a reduction in the area planted, disruptions to value chains, soil contamination or land confiscation, as well as

reduced employment and livelihood opportunities (HNO 2023, January 2023). Physical access to food was constrained in conflict-affected areas by movement restrictions, which also challenged humanitarian assistance efforts as agencies were unable to enter certain areas or transport supplies across state borders (ACAPS, December 2022).

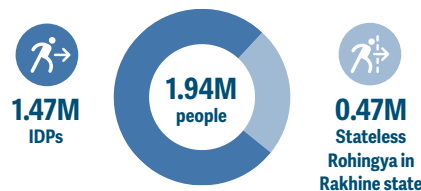
 **Economic shocks** Macroeconomic volatility in 2022 compounded issues of food access. The local currency continued to depreciate, losing nearly a quarter of its value in 2022 (WFP, March 2023). This led to issues with production of food and food affordability for households as prices of fuel and basic food items continued to increase throughout the year. At the end of December 2022, the cost of a basic food basket was 54 percent higher year-on-year, and had doubled since the start of 2021 (WFP, March 2023).

Price increases for agricultural inputs also negatively impacted 2022 yields, with paddy production estimated to be 10 percent below the five-year average (FAO-GIEWS, October 2022). A survey found that domestic prices of urea and compound fertilizers in July 2022 were 90 percent and 75 percent higher year-on-year, respectively (IFPRI, August 2022). Limited credit availability compounded farmers' inability to pay the higher cost of inputs (WB, July 2022). According to the findings of the food security and livelihoods assessment that was conducted by FAO and WFP in September 2022, 54 percent of farmers reported a reduction in their expected harvest.

DISPLACEMENT

 **IDPs** In 2022, the number of IDPs more than doubled to 1.47 million due to conflict and insecurity. Nearly 70 percent of all new IDPs were in the northwest, which included 47 200 in Chin, 124 400 in Magway, and 624 000 in Sagaing. Approximately 126 000 people, mostly Rohingya IDPs, were in camps in central Rakhine state (HNO 2023, January 2023).

Number of displaced and stateless people, 2022




Source: HNO 2023, January 2023.


Most IDPs were in overcrowded or otherwise inadequate displacement sites, often in jungles and forests, where they faced movement restrictions, security risks, as well as limited access to livelihood opportunities and basic services. For instance, large unmet WASH needs in camps and displacement sites led IDPs to resort to coping strategies that impacted their health, such as open defecation and drinking contaminated water. Many were also fully reliant on humanitarian assistance to meet their basic needs. With conflict anticipated to continue unabated, the number of IDPs is projected to increase to 2.7 million by the end of 2023 (HNO 2023, January 2023).


Around 470 000 non-displaced stateless Rohingya in Rakhine state remained extremely vulnerable to shocks, and continued to experience significant difficulties in accessing identity documents that would allow them to receive basic services like healthcare, education and jobs due to longstanding discrimination and marginalization (HNO 2023, January 2023). They were also more likely to face food insecurity since their access to agricultural land was limited and they have high levels of debt.

NUTRITION


 In Myanmar, about 290 000 children under 5 years old were wasted, including nearly 50 000 severely wasted (HNO 2023, December 2022). Pockets of malnutrition are likely in northwestern and southeastern areas where there is limited humanitarian access.

Drivers of undernutrition

 **Food insecurity and lack of access to healthy diets** Rising inflation, loss of livelihoods, reduced incomes, market disruptions and reduced harvests negatively affected household food consumption patterns and the affordability of healthy diets. Nearly a quarter of households reported insufficient food consumption in August–September 2022, with those outcomes worse in rural areas (26 percent) than in urban (19 percent) (HNO 2023, January 2023). The prevalence of low diet diversity among women and children increased, with fewer vitamin-A-rich fruits and vegetables, dairy, meat, fish and eggs consumed (IFPRI, December 2022).

 **Limited access to health and nutrition services** Interruptions to public health programmes and services, attacks on health facilities and a lack of trained professionals meant the healthcare system became even more fragmented and fragile (HNO 2023, January 2023).

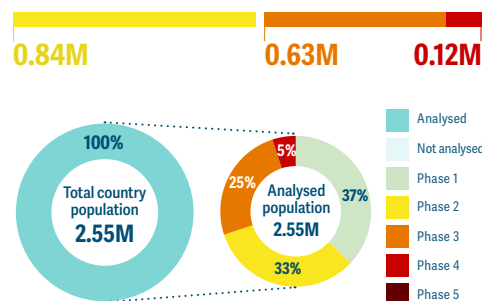
Ethnic and community-based health organizations and private providers worked to cover gaps, but the response capacity was not commensurate with needs. Private providers were too expensive for many people amid the current economic shock. A survey found that 1 in 10 people were unable to access healthcare services when needed. Restrictions on the import, transport and provision of medical supplies impeded emergency and primary healthcare in conflict areas (HNO 2023, January 2023).

 **Poor household environment** Many households, especially in rural areas, lack access to safe drinking water. A 2022 assessment found that safe water access remained very low for the most vulnerable groups, especially among non-displaced stateless people, with more than 40 percent of households in this population group reporting using unsafe water sources for drinking (HNO 2023, January 2023). Public provision of WASH services declined with attacks on infrastructure, lack of funding and movement restrictions. At the same time, high prices limited households' ability to purchase WASH-related items (HNO 2023, January 2023).

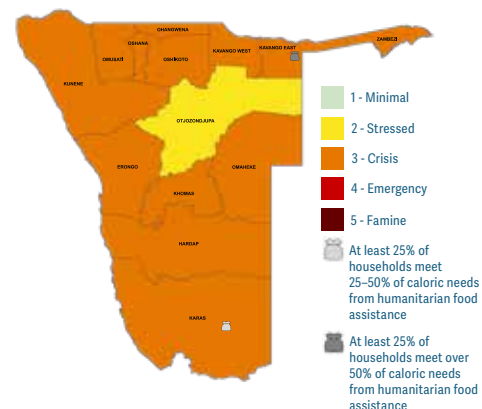
Namibia

ACUTE FOOD INSECURITY PEAK 2022

0.75M people or **30%** of the analysed population in IPC Phase 3 or above, December 2021–March 2022



IPC acute food insecurity situation, December 2021–March 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Namibia IPC TWG, December 2021.

Food crisis overview

In December 2021–March 2022, corresponding to the lean season, 750 000 people were in Crisis or worse (IPC Phase 3 or above), including almost 120 000 people in Emergency (IPC Phase 4). This is the highest figure reported by the IPC for Namibia and represents 30 percent of the country's population. The 70 percent increase in the number of people in IPC Phase 3 or above between the 2021 and 2022 lean seasons was significantly higher than the increase in the population analysed (+13 percent). Key drivers of this concerning situation were drought, price shocks, and the economic impacts from COVID-19 measures (IPC, December 2021). The analysis was carried out before the start of the war in Ukraine.

An improving outlook for 2023

Compared with the 2022 peak, a considerable improvement was projected with the number of people in IPC Phase 3 or above almost halving to 390 000 between January and March 2023. However, the situation remains serious, with six regions classified in Crisis (IPC Phase 3) – namely, Kavango East, Kavango West, Kunene, Omaheke, Otjozondjupa and Oshikoto – although the number of people in IPC Phase 4 is projected to reduce to almost 6 000. Factors contributing to continued high levels of acute food insecurity include limited opportunities for casual work and rising food prices made worse by inflation, rising fuel prices and the effects of the war in Ukraine.

Between April and August 2023, food security is projected to improve further, as households start consuming food from their own production. An estimated 239 000 people are projected to be in IPC Phase 3 or above (IPC, February 2023)

Acute food insecurity since 2016

The severity and magnitude of acute food insecurity in Namibia have been rising steadily since its first IPC analysis in 2019, with the country first being included as a major food crisis in the GRFC 2022. The largest increase in magnitude was between the 2020 and the 2021/2022 peaks.

Drivers of the crisis, 2022–23

Economic shocks Increases in food and non-food prices that started in 2021 continued in 2022, driven in part by increased import costs as a result of high fertilizer, food and fuel prices linked to the effects of the COVID-19 pandemic and the war in Ukraine. Prices of maize meal jumped sharply and reached record-high levels in the last quarter of 2022, mainly the result of elevated grain prices in South Africa, which is the main source of imports for the country. The high fuel prices combined with currency weakness inflated operational costs along the food value chain.

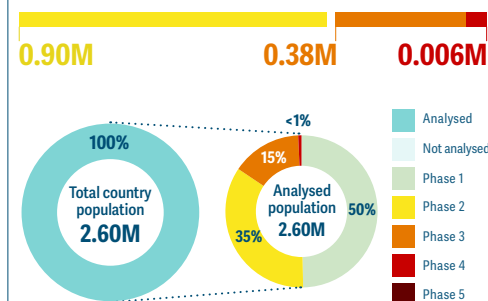
Economic growth is forecast to slow in 2023, with adverse implications for employment and incomes while high food prices are also expected to diminish vulnerable households' purchasing power (FAO, February 2023). Above average production is anticipated in South Africa, which may increase market supply (IPC, February 2023).

Weather extremes In the 2021/2022 season, drought and dry spells in drought-prone areas affected both crop and livestock production, with some farmers experiencing high rates of livestock mortality due to reduced water availability.

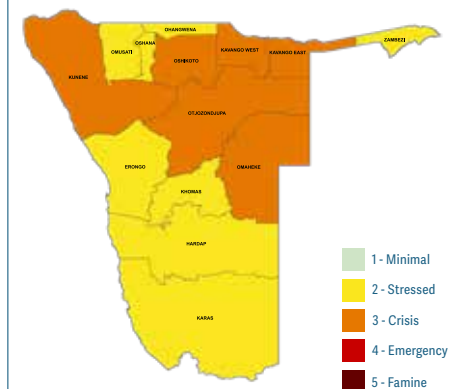
Following a late start of seasonal rains, precipitation amounts increased from December 2022, fostering an improvement in vegetation conditions in January. The heavy rains also caused localized flooding in northern Namibia when crops were in germination and emergence stages, a period when they are particularly susceptible to flood damage (FAO, March 2023).

ACUTE FOOD INSECURITY PROJECTION 2023

0.39M people or **15%** of the analysed population in IPC Phase 3 or above, January–March 2023



Projected IPC acute food insecurity situation, January–March 2023



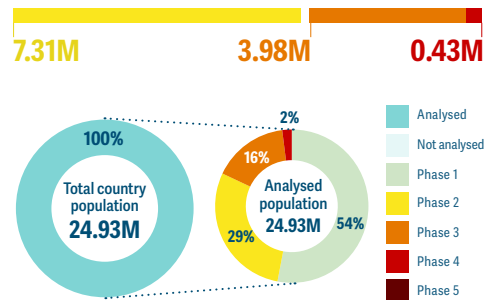
The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Namibia IPC TWG, February 2023.

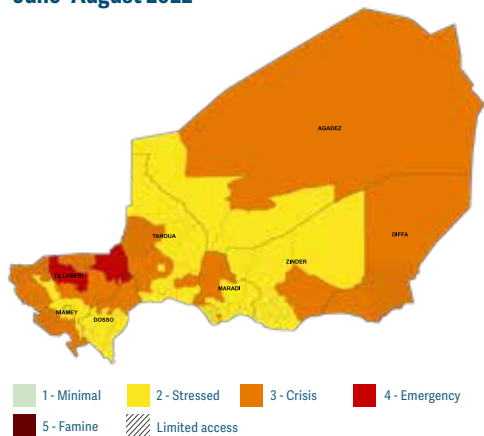
Niger

ACUTE FOOD INSECURITY PEAK 2022

4.40M people or **18%** of the analysed population in CH Phase 3 or above, June–August 2022



CH acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, March 2022.

Food crisis overview

The number of people in Crisis or worse (CH Phase 3 or above) during the June–August 2022 lean season in the Niger was 71 percent higher than the 2021 peak in October–December, setting a new high in CH reporting for the country. This represents an increase of more than 1.8 million people since the last quarter of 2021.

The deterioration is attributable to escalating conflict, and flooding that damaged crops, assets and livestock, as well as high food prices linked to the poor 2021–22 harvest and the war in Ukraine. Out of 75 zones analysed, two were classified in Emergency (CH Phase 4) for the first time in the history of the GRFC, 34 in Crisis (CH Phase 3) and 39 in Stressed (CH Phase 2) (CH, March 2022).

Improvement projected for 2023

The situation is projected to improve during the same June–August period of 2023, with 31 percent fewer people expected to be in CH Phase 3 and 53 percent fewer in CH Phase 4. However, the number of acutely

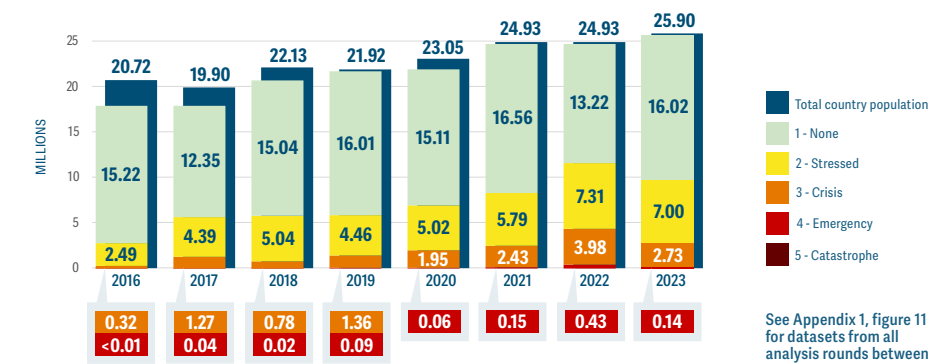
food-insecure people in CH Phase 2 will remain high at 7 million indicating their high vulnerability to shocks. Out of 78 zones analysed, 23 are expected to be in Crisis (CH Phase 3) and 50 in Stressed (CH Phase 2) (CH, November 2022).

Acute food insecurity since 2016

The Niger has qualified as a food crisis in all seven editions of the GRFC. It was included in the first three editions as part of the Lake Chad Basin regional crisis, due to the spread of insurgency violence to the eastern Diffa region from northeastern Nigeria. In 2020, it was included as part of the Central Sahel regional crisis, due to a worsening of security conditions in the Liptako Gourma area, which comprises the western Tillabéri and Tahoua regions. From 2021 onwards, it qualified as a major food crisis with more than 1 million people in CH Phase 3 or above.

The wide-reaching impacts of escalating conflict-related violence and internal displacement, as well as high food prices, cyclical floods, droughts, and the socioeconomic

Numbers of people by phase of acute food insecurity, 2016–2023

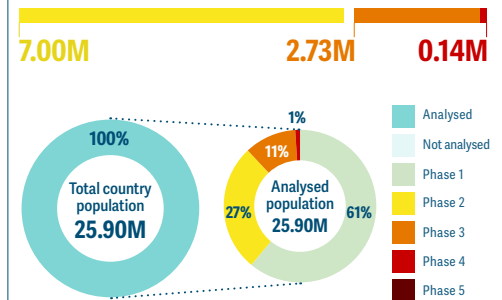


See Appendix 1, figure 11 for datasets from all analysis rounds between 2016 and 2023.

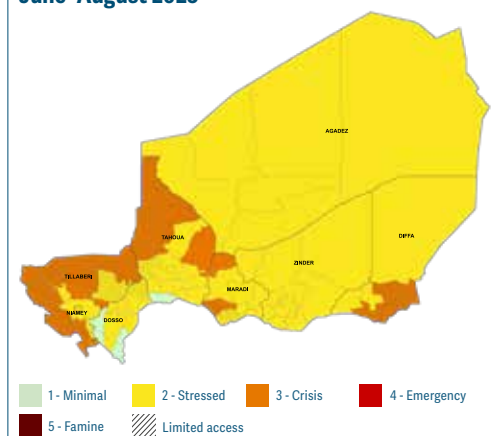
Source: Cadre Harmonisé.

ACUTE FOOD INSECURITY PROJECTION 2023

2.87M people or **11%** of the analysed population in CH Phase 3 or above, June–August 2023



Projected CH acute food insecurity situation, June–August 2023



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Source: Cadre Harmonisé, November 2022.

impacts of COVID-19 and the war in Ukraine have led to an increasing number of people facing high levels of acute food insecurity since 2019 (FEWS NET, December 2022). Prior to October–December 2021, the highest numbers of people in CH Phase 3 or above had been in June–August 2014 (2.2 million people) due to drought, flooding, violence, an influx of refugees, a cholera outbreak and high food prices during the lean season (OCHA, September 2014).

Drivers of the crisis, 2022–23

Conflict/insecurity The Defence and Security Forces operations in the Diffa region led to improved security, but a resurgence of attacks by non-state armed groups in Tillabéri region continued to affect agricultural activities, mainly through population displacements and by limiting access to land (FEWS NET, December 2022).

Weather extremes Between June and October 2022, heavy rainfall brought flooding, affecting 248 371 people mainly in Maradi and Zinder regions as well as Diffa, Tillabéri and Dosso. The floods resulted in the destruction of 2 186 hectares of rainfed crops, with Tillabéri, Dosso and Zinder suffering the greatest losses (FEWS NET, October 2022). In the Diffa region, producers along the Komadougou Yobé River, which burst its banks, lost most of their production for the fourth consecutive year (OCHA, January 2023).

There is a more positive food security outlook for the 2023 lean season, with cereal production in 2022 expected to increase by 65 percent compared with the weather- and insecurity-reduced output in 2021 and 10 percent above the latest five-year average, reflecting beneficial effects of abundant rains and the distribution of fertilizers and pesticides by the government (FAO, December 2022).

Economic shocks Food prices increased due to an increased reliance on food imports following the steep decline in cereal production for 2021–22, and the failure to meet import requirements due to lingering cross-border logistical bottlenecks related to COVID-19, poor security, and export bans of grains and cereal products in neighbouring countries, especially Algeria, Burkina Faso,

Chad and Mali (FAO-GIEWS, October 2022). The war in Ukraine further drove up international fuel, food and fertilizer prices affecting domestic food prices.

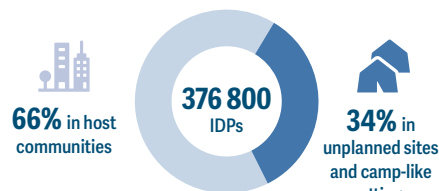
Prices of coarse grains increased by up to 40 percent in the 12 months to August 2022. They declined seasonally in September and October and were near or below their year-earlier levels by December 2022 (FAO, December 2022) reflecting the sharp production upturn in 2022. However, in Niamey and conflict-affected Tillabéri, prices were still above their year-earlier levels, mostly linked to conflict-related market disruptions (FAO, December 2022).

In early 2023, food availability was satisfactory in most markets immediately following the harvest, but low levels of carry-over stocks and trade bottlenecks related to insecurity and restrictive food exit measures in Burkina Faso, Mali and Nigeria still hindered supplies (FEWS NET, January 2023). Prices remained significantly higher than the recent five-year average, particularly in Agadez, Tahoua and Tillabéri markets, in line with 2021 prices (FEWS NET, December 2022).

A household survey carried out by FAO in July and August 2022 found that of the 80 percent of surveyed households that were engaged in livestock production, 58 percent reported decreasing herd size due to distress sales or death of animals. The majority (62 percent) faced difficulties purchasing feed (FAO, November 2022).

DISPLACEMENT

IDP numbers increased sharply in 2022



Source: IOM, March 2023.

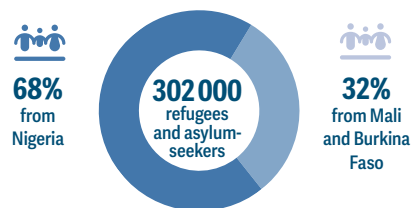
IDPs The number of people internally displaced in the Niger increased by around 112 550 in 2022 to reach 376 800 by the end of the year as people continued to escape the impacts of the

insurgency in the Lake Chad Basin and conflict in the Central Sahel (IOM, March 2023). IDPs, 56 percent of them children, mainly reside in urban or peri-urban areas of Diffa and Tillabéri, followed by Tahoua, Maradi and Niamey (IOM DTM, October 2022).

Despite deteriorating insecurity, over 380 000 IDPs and Nigerien refugees abroad returned to their communities of origin in 2022 (IOM, August 2022; UNHCR, January 2023).

More than 80 percent of IDP households reported food as their primary urgent humanitarian need. More than 70 percent of children aged 6–23 months were not consuming a sufficiently diverse diet for their health and development (IOM DTM, October 2022).

Refugees have fled conflict in neighbouring countries, 2022



Source: UNHCR, December 2022.

Refugees Nearly 65 000 refugees and asylum-seekers arrived in the Niger in 2022, more than half of them (54 percent) fleeing conflict in Burkina Faso and 39 percent from Nigeria, bringing the total number to over 302 000 (UNHCR, March 2022). The majority reside in the regions of Diffa (39 percent) and Tillabéri (36 percent).

Refugees continued to arrive at Sayam Forage camp from Nigeria, which hosts 32 587 people, as well as at other host sites in the Diffa region, seeking better humanitarian assistance and security. As of 16 December 2022, 21 300 Malian refugees and asylum-seekers as well as 16 400 Nigerian asylum-seekers and 3 500 Nigerien returnees had been registered in the Tahoua region. By the end of 2022, the capital Niamey hosted around 5 800 refugees

and asylum-seekers, mostly from Mali (UNHCR, January 2023).

Severe funding constraints in West Africa have forced WFP to significantly reduce rations for refugees living in the Niger (WFP, June 2022). Additionally, displaced households in Tillabéri and Tahoua lack access to food assistance distributions due to insecurity that makes these areas inaccessible (FEWS NET, October 2022).

The prevalence of wasting among refugees ranged from 5–11 percent, with the highest prevalence in Abala and Ayerou refugee camps. The prevalence of stunting was ‘very high’, at 33–48 percent. Anaemia levels were severe, affecting 71–80 percent of refugee children under 5 years, and 36–72 percent of non-pregnant women (SMART, 2021).

NUTRITION

Number of children under 5 years old with wasting, 2022



64 000 pregnant and lactating women acutely malnourished, 2022

Source: SMART, 2022.

The Niger continued to face a dire acute malnutrition crisis throughout 2022 – even worse than that of 2021 – driven by high levels of infectious diseases linked to poor sanitation and flooding, as well as poorly diversified diets linked to harmful social norms and high levels of acute food insecurity. Nearly 2.2 million children were estimated to suffer from wasting, of whom almost half a million had severe wasting (SMART, 2022).

At the national level, the wasting prevalence stood at 12.2 percent, which is considered 'high'. All regions had a 'high' prevalence except Niamey (7.8 percent). The levels reached 'very high' (>15 percent) in the department of Dogondoutchi in Dosso region and Mainé-Soroa in Diffa region. The prevalence of severe wasting was above 2 percent in Agadez, Dosso, Maradi and Zinder regions. Between August and November 2022, 43 departments were in a Serious situation (IPC AMN Phase 3), while the two departments of Mainé-Soroa (Diffa) and Dogondoutchi (Dosso) were in a Critical situation (IPC AMN Phase 4) (IPC, March 2023).

Between December 2022 and April 2023, the nutritional situation was expected to improve due to a drop in diarrhoea and malaria and an improvement in children's dietary diversity due to good availability of market garden produce. The estimated total number of wasted children was projected to decrease to 1.89 million in 2023 and the number of severely wasted children from 0.49 million to 0.43 million. However, the number of acutely malnourished pregnant and lactating women was expected to increase sharply from around 64 000 in 2022 to 154 000 in 2023 (IPC, March 2023).

Between December 2022 and April 2023, no departments were projected to be in IPC AMN Phase 4 while 32 were projected to be in IPC AMN Phase 3. Between May and July 2023, the nutritional situation will likely deteriorate again because of the lean season and rising cases of diseases (malaria, diarrhoea) due to the onset of the rainy season. In total, 42 departments are projected to be in IPC AMN Phase 3 and four in IPC AMN Phase 4 (IPC, March 2023).

At the national level, stunting prevalence is considered 'very high' at 47 percent with large regional disparities, ranging from 18.5 percent in Niamey city to 61.7 percent in Maradi and 51.7 percent in Zinder. Levels exceeded the 30 percent 'very high' threshold in Agadez, Diffa, Dosso, Tahoua and Tillabéri (SMART 2022).

Drivers of undernutrition

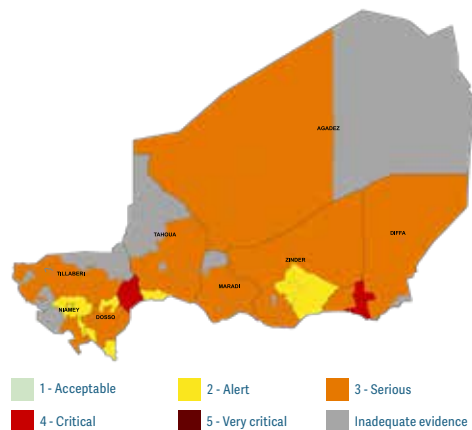
Poor household environment Low levels of access to drinking water and sanitation facilities contribute to poor hygiene conditions and high prevalence of infectious illnesses, such as fever and diarrhoea, especially during the rainy season (IPC, March 2023). At the national level, only 56 percent of the population had access to safe drinking water, and 13 percent access to basic sanitation services, while open defecation is practised by more than 71 percent of the population (IFRC, May 2022).

Inadequate maternal and child-feeding practices Exclusive breastfeeding for infants under 6 months is practised by only 22 percent of mothers, which is at 'Critical' levels, and around 56 percent are given plain water (UNICEF, 2022). Around 93 percent of children aged 6–23 months do not receive a Minimum Acceptable Diet: on average, they consume just three out of five recommended food groups per day (SMART, 2022). Anaemia is considered a 'severe' public health problem among children (55.5 percent are anaemic) and women of reproductive age (40.5 percent) (SMART, 2022).

Food insecurity and lack of access to healthy diets Extremely high levels of acute food insecurity, linked to escalating conflict, flooding and high food prices, prevented Nigerien households from accessing adequate nutritious food, contributing to both acute and chronic malnutrition.

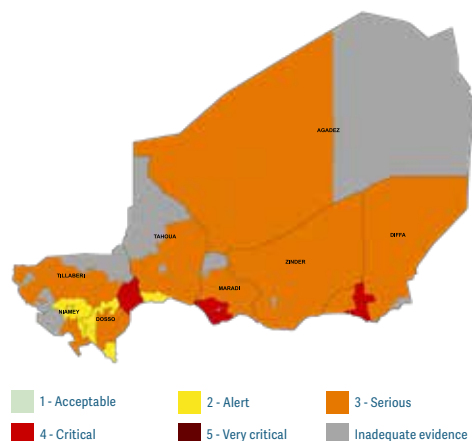
Limited access to health and nutrition services Due to insecurity, many health centres in rural areas have closed, services have been disrupted, or they face a lack of access to medicines (IFRC, May 2022).

IPC acute malnutrition situation, August–November 2022



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Source: Niger IPC TWG, March 2023.

Projected IPC acute malnutrition situation, May–July 2023

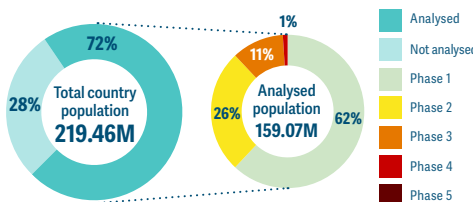
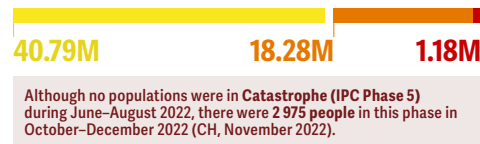


The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Niger IPC TWG, March 2023.

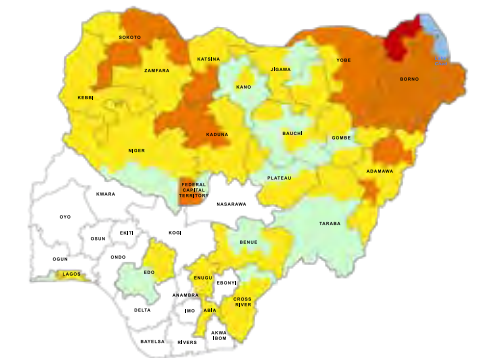
Nigeria

ACUTE FOOD INSECURITY PEAK 2022

19.45M people or **12%** of the analysed population in 21 states and FCT in CH Phase 3 or above, **June–August 2022**



CH acute food insecurity situation, June–August 2022



1 - Minimal 2 - Stressed 3 - Crisis 4 - Emergency 5 - Famine Not analysed Limited access

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Cadre Harmonisé, November 2022.

Food crisis overview

An additional 6.5 million people were in Crisis or worse (CH Phase 3 or above) in Nigeria between the 2021 peak in October–December, and the 2022 peak in June–August.

The sharp increase in acute food insecurity levels reflects a deterioration of conditions in northwestern, northcentral and northeastern states, driven by insecurity and conflicts, below-average market supplies and high food prices (FAO-GIEWS, September 2022).

Out of nearly 4.1 million people in CH Phase 3 or above in the northeastern BAY states of Borno, Adamawa and Yobe, over 504 000 were in inaccessible areas, mainly in Borno, and lacked access to critical life-saving support (CH, March 2022).

A deteriorating outlook for 2023

In June–August 2023, the number of people in CH Phase 3 or above is projected to increase to 25.3 million, representing around 13 percent of the

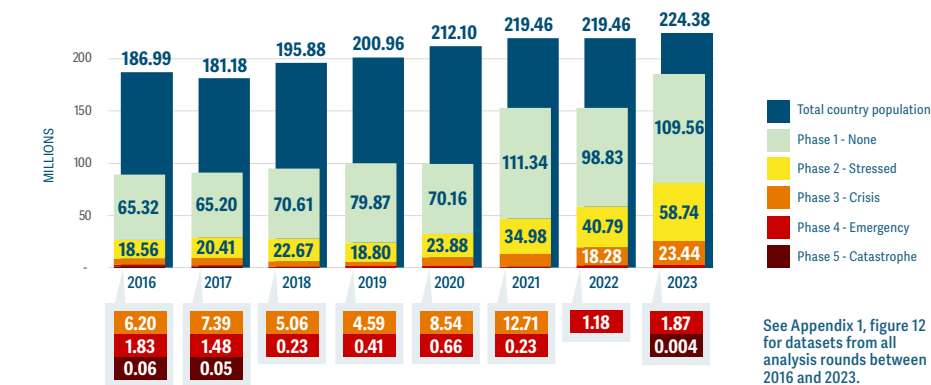
analysed population. This included five additional states – Kogi, Kwara, Nasarawa, Ogun and Rivers – and an additional 34 million people analysed compared with the previous year, of whom 2 million were in CH Phase 3 or above. The increase also reflects the impact of protracted conflicts and ongoing insecurity, and the expectation of a continued rise in food prices.

This projection includes 4.4 million people in the BAY states, of whom 578 000 will be in Emergency (CH Phase 4). Around 4 000 people are projected to face Catastrophe (CH Phase 5) in the Bama local government area (LGA) in Borno unless coordinated and strategic life-saving interventions are implemented to save lives and rebuild livelihoods (CH, November 2022).

Acute food insecurity since 2016

The 16 states of Nigeria have been among the 10 worst food crises in terms of numbers of people in Crisis or worse (CH Phase 3 or above), particularly in the three BAY states, since the first edition of the GRFC in 2017. This has been largely driven by the Boko Haram insurgency in

Numbers of people by phase of acute food insecurity, 2016–2023

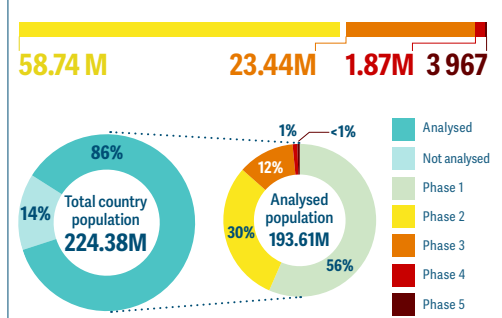


Source: Cadre Harmonisé.

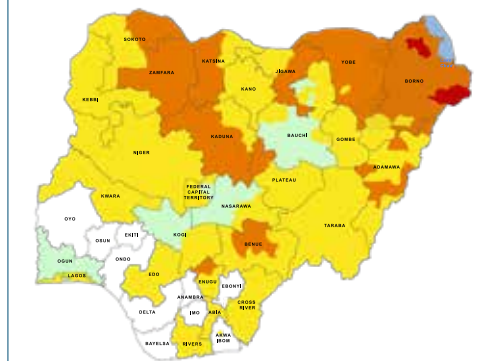
See Appendix 1, figure 12 for datasets from all analysis rounds between 2016 and 2023.

ACUTE FOOD INSECURITY PROJECTION 2023

25.31M people or **13%** of the analysed population in 26 states and FCT in CH Phase 3 or above, **June–August 2023**



Projected CH acute food insecurity situation, June–August 2023



1 - Minimal 2 - Stressed 3 - Crisis 4 - Emergency 5 - Famine Not analysed Limited access

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Source: Cadre Harmonisé, March 2022.

northeastern states and more recently by banditry and farmer–pastoralist conflict in northern and central states.

Between 2020 and 2021, the Nigeria analysis expanded from 16 to 21 states and the Federal Capital Territory (FCT) and the analysed population increased from 49 percent to 71 percent. Still, when considering the same 16 states and FCT covered by CH analyses, the number of people in CH Phase 3 or above has increased each year since 2019.

During 2016 and 2017, populations have faced Catastrophe (CH Phase 5) in Borno state: 55 000 people during October–December 2016 and 50 000 people in June–August 2017.

Drivers of the crisis, 2022–23

Conflict/Insecurity Although the number of violent incidents in the northeastern BAY states decreased and more farmers were able to cultivate land, large-scale displacements still occurred and the insurgent violence continued to disrupt agricultural livelihoods and markets in 2022.

Years of insecurity have limited farmers' ability to purchase inputs by reducing their incoming-earning opportunities (FAO-GIEWS, September 2022).

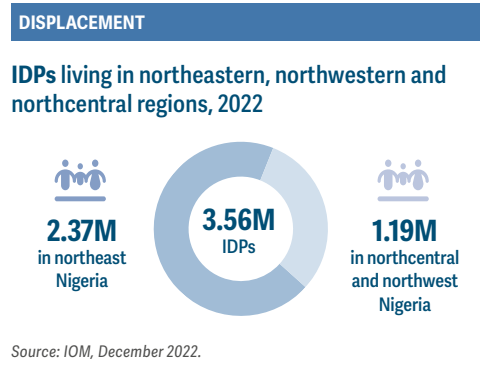
Banditry and kidnapping in the northwestern and northcentral states of Sokoto, Katsina, Zamfara, Kaduna, Benue, Plateau and Niger continued to hinder food production (CH, March 2022). Additionally, communal attacks and farmer–pastoralist conflict persisted in Plateau and Benue states leading to population displacement, civilian fatalities, market disruptions and loss of livelihoods (FEWS NET, December 2022).

Weather extremes Rainfall was generally favourable across the country for the 2022 season, but between July and November, flooding in riverine areas in central and northeastern states affected more than 4.4 million people across 36 states and the FCT, of whom over 2.4 million were displaced, about half in Bayelsa state. The floods damaged over 650 000 hectares of farmland (OCHA, November 2022) and affected livestock, fishponds and food storage at household, community and market levels (CH, November 2022).

Cereal production was projected at a near-average level (PREGEC, November 2022) due to overall conducive weather conditions and an expansion of the planted area to cereal crops, which more than offset crop losses associated with poor security conditions and floods (FAO, December 2022).

Economic shocks High food prices were attributable to the soaring prices of farm inputs, fuel and transportation. Annual inflation hit a 17-year high in October at just over 21 percent, driven by high food prices, increasing fuel and transportation costs, and limited foreign exchange reserves (FEWS NET, November 2022). Annual food inflation reached a record high of 23.7 percent in October. In some markets in the northeast and northcentre, yearly increases of prices were higher, due to insecurity, high transportation costs and disruptions associated with flooding. Prices of rice were up to 55 percent higher on a yearly basis underpinned by strong demand (FAO, December 2022).

During the 2023 lean season, an atypical increase in food prices due to the factors mentioned above is expected, although early harvest from the 2022/23 dry season may help to stabilize market supply and mitigate deterioration in food availability and access (CH, November 2022).

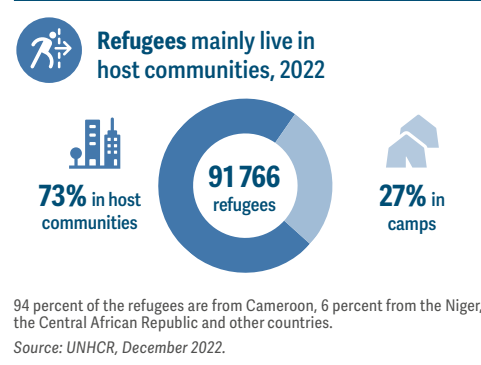


IDPs Three regions of Nigeria – the northeast, northwest and northcentral – host over 45 percent of the total IDP population of West Africa and the Sahel – a total of 3.56 million displaced people (UNHCR, February 2023).

In the northeastern states, there were about 2.37 million IDPs by the end of 2022. Most of the were in Borno, where people continued to abandon their homes in 2022, followed by Adamawa and Yobe states. According to DTM monitoring, the majority (95 percent) reported conflict as the primary reason for leaving their homes, followed by communal clashes (5 percent) (IOM DTM, February 2023). Around 56 percent live in host communities and 44 percent in camps.

In the northcentral and northwestern states, about 1.19 million people were internally displaced by the end of 2022 largely due to escaping from armed banditry/ kidnapping and communal clashes, or, to a lesser extent, to increasing tensions between pastoralists and farmers over land and border issues (IOM DTM, March 2023). Around 79 percent live in host communities and 21 percent in camps and camp-like settings (IOM DTM, October 2022).

Reliant on informal, low-paid and insecure livelihoods, IDPs face high levels of acute food insecurity. Overall, more than 891 000 IDPs in Borno and Benue and 58 000 returnees in Borno were projected to be in Crisis or worse (CH Phase 3 or above) from June to August 2023, of whom nearly 289 000 were projected to be in Emergency (CH Phase 4) (CH, November 2022).



Refugees Most of the almost 92 000 refugees in Nigeria (94 percent) fled conflict in the northwestern and southwestern regions of Cameroon. Around 63 100 live in host communities and 23 300 in four refugee settlements; around 41 percent are children (UNHCR, February 2023). From June to August 2023, nearly 41 000 refugees were projected to be in Crisis or worse (CH Phase 3 or above), representing almost half (48.6 percent) of the refugee population (CH, November 2022).

Findings from Essential Needs Assessments in various camps and settlements found food consumption gaps as well as deteriorating livelihoods. Refugees were taking on debt to access food and non-food items. They faced challenges accessing health services and water for drinking and cooking, likely affecting nutrition (CH, November 2022).

The prevalence of wasting across four camps/sites ranged from 'low' to 'medium' (1–2 percent), while that of stunting was very high (32–52 percent) (UNHCR SENS, 2021).

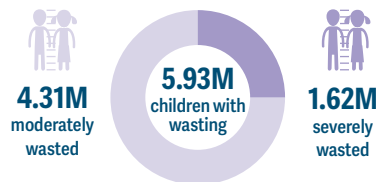
The arrival of Cameroonian refugees predominantly fleeing conflict in the northwestern and southwestern regions of Cameroon added a new dimension to the already complex humanitarian situation in Nigeria.

Food remains one of the critical needs of these refugees since they cannot risk crossing back and forth to Cameroon in search of food and livelihood opportunities to sustain their families. Limited access to livelihood opportunities and suitable land for

agricultural production results in an excessive reliance on humanitarian assistance to meet basic needs. According to the results of a survey conducted in four refugee settlements in 2021, the wasting prevalence was considered 'low' by WHO thresholds at 4.6 percent, but at 44 percent the stunting prevalence was well above the 'very high' 30 percent threshold. Only 19 percent of children aged 6–23 months received an iron-rich diet, well below the UNHCR target of ≥60 percent (UNHCR SENS, 2021).

NUTRITION

Number of children under 5 years old with wasting, in northwest and northeast Nigeria, May 2022–April 2023



Source: IPC, November 2022.

A total of 5.93 million children under 5 years old were expected to be wasted from May 2022 to April 2023 in the northern states of Nigeria: 3.90 million in the northwestern states and 2.03 million in the northeastern states.

This is an increase of 56 percent from the previous IPC AMN conducted in the northeastern states (January–December 2022). A similar comparison for the northwestern states is not possible, as it was the first time an IPC AMN analysis was conducted there.

From May to September 2022, more than half of the 134 LGAs included in the analysis for northeast and northwest Nigeria were facing Serious or worse (IPC AMN Phase 3 or above) levels of acute malnutrition. Of them, 30 were facing Critical levels (IPC AMN Phase 4).

Of the 63 LGAs analysed in northeast Nigeria, 13 were classified in Critical (IPC AMN Phase 4) in Borno and

Yobe states, 17 in Serious (IPC AMN Phase 3) and 30 in Alert (IPC AMN Phase 2). In northwest Nigeria, out of 71 LGAs with sufficient data, 17 were classified in IPC AMN Phase 4, 25 in IPC AMN Phase 3 and 28 in IPC AMN Phase 2.

Although acute malnutrition levels were expected to improve slightly during the two projected periods of October–December 2022 and January–April 2023, the majority of the LGAs were expected to remain in IPC AMN Phase 3 or above (IPC, November 2022).

According to the Nutrition and Food Security Surveillance (NFSS) conducted in 2022 in the northeastern states, the wasting prevalence ranged from 8.6 percent in Adamawa to 14 percent in Borno, while the SMART 2022 survey revealed a wasting prevalence of 13.5 percent in Katsina, 14.2 percent in Sokoto and 9.5 percent in Zamfara. All of those states presented a severe wasting prevalence above the 2 percent emergency threshold, except Adamawa (1.3 percent) and Zamfara (1.7 percent).

Drivers of undernutrition

Poor household environment Diseases and infection associated with poor WASH services in some areas of northeast and northwest Nigeria have adversely affected the nutrition situation.

In states affected by floods, including Adamawa, Jigawa and Kogi, displaced and resident populations experienced difficulty accessing potable water and healthcare services (CH, November 2022), raising the risk of diseases such as acute watery diarrhoea, cholera and dysentery, which contribute to malnutrition.

High prevalence of infectious disease A severe cholera outbreak killed more than 465 people and affected over 18 000 others in 31 states between January and November 2022. According to WHO, flooding and insecurity triggered population movements from places with cholera outbreaks to places not yet affected, increasing the risk of spread of the disease (OCHA, November 2022).

Low coverage of health services and poor health-seeking behaviours also contributed to the high levels of disease and wasting among children in the analysed areas.

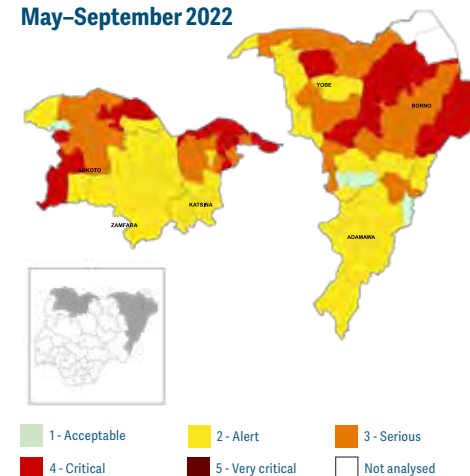
Food insecurity and lack of access to healthy diets The protracted crisis in northeast Nigeria has created a complex humanitarian crisis, with widespread displacement, destroyed infrastructure and collapsed basic social services. Inadequate access to safe nutritious foods, especially in the context of rising food prices, has contributed to inadequate consumption.

While the CH acute food insecurity and IPC AMN analyses were both conducted at the LGA level, the analysis of contributing factors to acute malnutrition was carried out at the zonal or domain level (i.e. a cluster of several LGAs) in line with available data representativeness. As a result, it is not possible to establish direct links at LGA level (IPC, November 2022).

Inadequate maternal and child-feeding practices Most children aged 6–23 months across the analysed regions did not receive adequate diets, particularly in terms of diversity. Across ten domains in Borno, Adamawa and Yobe in northeast Nigeria, the percentage of children who received the recommended Minimum Acceptable Diet (MAD) was considered 'Extremely Critical' (<10 percent). The situation was a bit better in the northwest, but still ranged from 'Serious' to 'Extremely Critical' (IPC, November 2022).

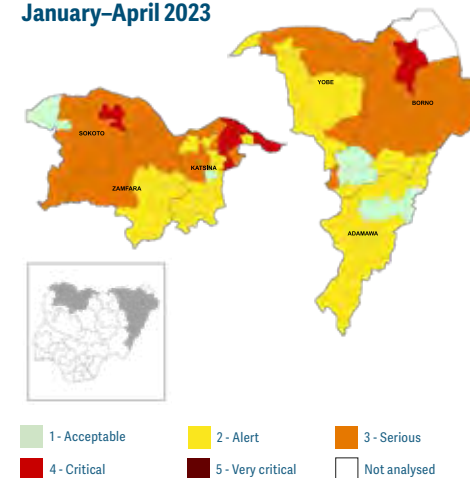
The most recent anaemia data from 2019 indicate a 'severe' public health problem, with 68.9 percent of children aged 6–59 months and 55.1 percent of women of reproductive age anaemic (WHO Database, 2019).

IPC acute malnutrition situation, May–September 2022



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Projected IPC acute malnutrition situation, January–April 2023

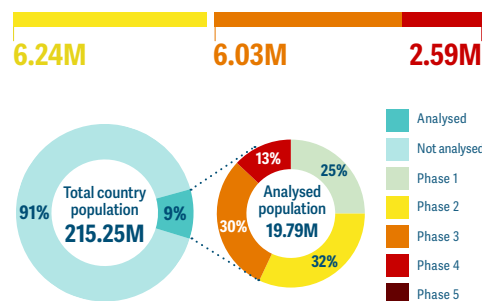


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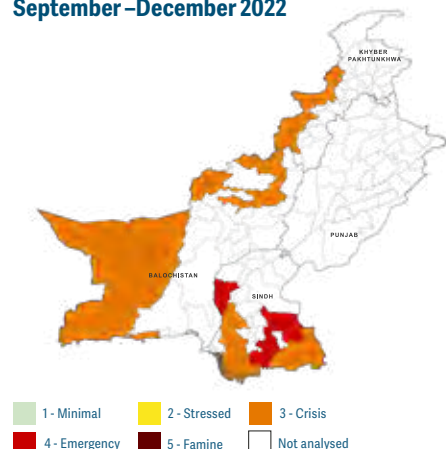
Pakistan (Balochistan, Khyber Pakhtunkhwa and Sindh)

ACUTE FOOD INSECURITY PEAK 2022

8.62M people or **43%** of the analysed population in IPC Phase 3 or above, September–December 2022



IPC acute food insecurity situation, September–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Pakistan IPC TWG, December 2022.

Food crisis overview

In the last quarter of 2022, the number of people in Crisis or worse (IPC Phase 3 or above) reached 8.6 million in rural districts of the three analysed provinces of Pakistan as one of the worst monsoon floods in years caused devastation in the agricultural and livestock sectors. Of these people, 5.2 million were in nine districts of Sindh, 1.8 million in seven districts of Khyber Pakhtunkhwa and 1.6 million in 12 districts of Balochistan.

When comparing the September 2022 IPC analysis with the previous one that took place in October 2021, an additional 4 million people faced high levels of acute food insecurity largely due to the impact of floods on food production, prices and livelihoods (IPC, January 2022; IPC, December 2022).

While this increase is partly due to greater coverage by around 1.2 million people (with three more districts analysed in Balochistan), the increase in severity, from 25 percent to 43 percent, indicates a significantly deteriorating situation in all provinces, especially in Sindh, where five areas that were previously classified in Crisis (IPC Phase 3) shifted to Emergency (IPC Phase 4). Overall, the share of the analysed population in IPC Phase 3 increased from 19 percent to 30 percent, while the proportion in IPC Phase 4 increased from 6 percent to 13 percent (IPC, December 2022).

Acute food insecurity since 2017

Pakistan has been defined as a 'major' food crisis since 2017 when over 50 percent of its analysed population was in IPC Phase 3 or above. In recent years, analyses were only conducted for the most vulnerable areas which often face natural and man-made shocks. The analyses of 2017 and 2018 only covered drought-affected areas of Sindh; those of 2019 included Balochistan and drought-affected areas of Sindh, while that of 2020 only covered Khyber Pakhtunkhwa. Since 2021, the analyses have covered a number of rural districts in all three provinces.

Drivers of the crisis, 2022–23

Weather extremes Even before Pakistan was hit by the devastating monsoon floods in mid-June and the end of August, heatwaves in March and April, in conjunction with fertilizer shortages and lack of irrigation water, had affected 'Rabi' wheat crop yields (FAO-GIEWS, October 2022) and lowered livestock production in most of the analysed districts (IPC, December 2022).

Subsequently, flooding and landslides brought widespread destruction, disrupting the lives and livelihoods of about 33 million people in five of six provinces. Around 4.4 million acres of agricultural land were damaged, prompting the downward revision of 2022 production forecasts for rice, maize, sorghum and millet. Around 0.8 million livestock were estimated to have perished (FAO, December 2022).

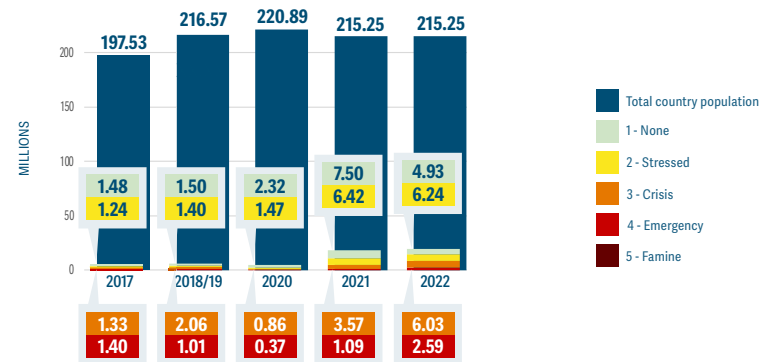
As of October 2022, over 7.9 million people were still temporarily displaced and 589 000 people were living in camps (OCHA, October 2022).

The total damage and loss in the agriculture sector was estimated at almost USD 13 billion, consisting mainly of crops (82 percent) followed by livestock (17 percent) (FAO, October 2022).

The October–December planting of the 'Rabi' wheat crop was hampered in localized areas that were still under flood water. The loss or damage of agricultural inputs, including seed stocks, fertilizers, machinery and irrigation infrastructure, may result in a contraction in the area planted with a negative impact on 2023 production (FAO-GIEWS, October 2022).

Economic shocks Strong domestic demand and high global commodity prices – largely linked to COVID-19-related disruptions and the war in Ukraine – led to the largest current account deficit in four years by the end of June 2022. The currency depreciated by 23.1 percent against the US dollar and inflation reached an average of 12.2 percent by the end of June, an 11-year high (WB, October 2022). By August 2022, prices of wheat flour were about 30 percent higher year-on-year and domestic prices of rice were at record

Numbers of people by phase of acute food insecurity, 2017–2022



Source: Pakistan IPC TWG; WFP CARI (2018).

levels (FAO-GIEWS, October 2022). Prices continued to increase until the end of the year and, by December 2022, the price of a basket of basic food items was 36 percent higher year-on-year (WFP, January 2023).

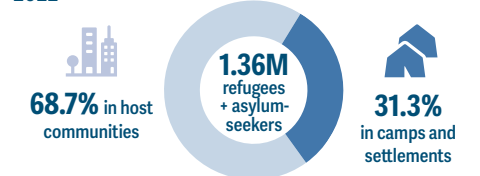
A damage, loss and needs assessment estimated total flood damages to exceed USD 14.9 billion, and total economic losses to reach about USD 15.2 billion (WB, October 2022). Due to higher domestic energy prices, flood disruptions, high agricultural input costs and the weaker rupee, inflation is projected to rise to 23 percent in the year to the end of June 2023 (WB, October 2022).

Conflict/insecurity The analysed districts of Khyber Pakhtunkhwa were characterized by poor security conditions and localized tribal disputes in some areas that affected food access and availability, and limited agricultural activities (IPC, December 2022).

The increase in militant activities poses a major challenge to the country in 2023 – and to food access and availability (DW, December 2022; IFRC, January 2023).

DISPLACEMENT

Refugees and asylum-seekers from Afghanistan, 2022



Source: UNHCR December 2022.

Refugees Pakistan has hosted Afghan refugees for more than 40 years (UNHCR, December 2022) – one of the largest displaced populations in the world – with the number of arrivals increasing since the change of the regime in August 2021. In 2022, there were an additional 28 500 asylum-seekers and 3 500 refugees (UNHCR, March 2023).

An estimated more than 3 million Afghans are living in Pakistan (Refugee Response Plan, 2022), of whom only around 1.35 million hold a Proof of Registration (PoR)

card issued by the Government of Pakistan, giving them access to employment, education, health services, bank accounts and SIM cards.

The 840 000 refugees who hold an Afghan Citizen Card (ACC) have some protection but can face deportation at any time, while the estimated 780 000 unregistered Afghan nationals do not have any protection status and cannot access services.

At least 50 percent of the more than 1.5 million ACC holders and unregistered Afghans are categorized as highly to extremely vulnerable to poverty (HRP 2021, May 2021).

In addition, ACC holders and unregistered Afghan nationals face multiple challenges in ensuring their freedom of movement and accessing markets and services such as employment, education, housing, telecommunication, banking services and healthcare (IOM, January 2023).

IDPs As a result of the catastrophic flooding, over 14 million people lost their homes or had their houses damaged, forcing many to seek immediate shelter on roads and in makeshift camps. According to the Provincial Disaster Management Authority of Sindh, over 240 000 people remained displaced in the province as of 3 December 2022, down from 6.5 million in early September.

Nearly 90 percent of flood-displaced people were reportedly living with host communities, while the remaining are in tent cities and relief camps. Available data indicate that the relief response to date has fallen well short of need (OCHA, December 2022).

NUTRITION

In June–August 2022, about 1.6 million children in flood-affected areas were suffering from severe wasting and another 6 million from stunting. Post floods, UNICEF expects this situation to have worsened exponentially (UNICEF, January 2023).

In January 2023, around 4 million children were still living near contaminated and stagnant flood waters, which have caused diarrhoea, malaria, dengue fever, typhoid, acute respiratory infections and painful skin conditions as well as malnutrition (UNICEF, January 2023). Prior to

this flooding, Critical (IPC AMN Phase 4) levels of child wasting were recorded in eight out of nine analysed districts of Sindh province where 636 000 children under 5 years were estimated to be suffering from wasting in April 2021–February 2022. Of them, 126 000 were severely wasted. Wasting in these provinces ranged from 15.2 percent to 26.4 percent (IPC, October 2021).

Drivers of undernutrition

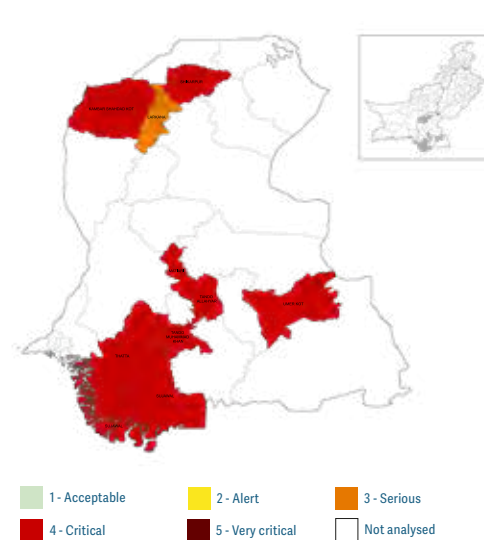
Poor household environment During the 2022 monsoon season, catastrophic flooding contaminated the drinking water supply. In affected areas, 30 percent of water systems were estimated to have been damaged, with people resorting to open defecation and drinking unsafe water, increasing the likelihood of disease outbreaks (UNICEF, September 2022). In 2020, only 36 percent of households had access to drinking water sources (UNICEF, 2020).

High prevalence of infectious diseases High rates of diarrhoea, acute respiratory infection and fever as well as low prevalence of health-seeking behaviour underlie the malnutrition crisis. By the end of 2022, there were still high numbers of malaria and cholera cases in some districts in Sindh and Balochistan where standing water remained. In November 2022, around 70 suspected cases of diphtheria were reported from the flood-affected provinces of Khyber Patunkhwa, Sindh and Punjab (OCHA, December 2022).

Food insecurity and lack of access to healthy diets Inadequate quality and quantity of food linked to high levels of household food insecurity are contributors to child malnutrition. Deteriorating quality and quantity of food consumption due to the impacts of flooding as well as high food prices and limited livelihood activities were likely to worsen child wasting.

Inadequate maternal and child-feeding practices Anaemia levels were a severe public health concern (>40 percent prevalence) among children under 5 years and women of reproductive age (UNICEF, 2019). Low exclusive breastfeeding (48.4 percent), high prevalence of early childbearing, high prevalence of low birth weight, and high prevalence of malnutrition among pregnant and lactating women were of concern in several analysed districts in Sindh (IPC, October 2021).


IPC acute malnutrition situation, Sindh province December 2021–February 2022



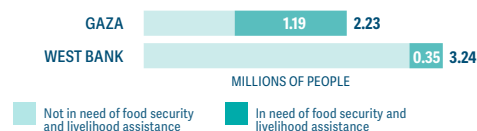
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Source: Pakistan IPC TWG, October 2021.

Palestine

ACUTE FOOD INSECURITY PEAK 2022


 **1.54M** people or **28%** of the population in need of food security and livelihood assistance in 2022

Source: HNO 2023, January 2023.




Source: HNO 2023, January 2023.

Food crisis overview

 Of the 1.54 million acutely food-insecure people in Palestine, around 1.19 million were in the Gaza Strip and 0.35 million in the West Bank. The figures are based on HNO estimates of people in need of food assistance in 2023.


This equated to 53 percent of Gaza's population and 11 percent of the population of the West Bank. The highest number of acutely food-insecure people in the West Bank were in Nablus and Hebron and the highest prevalence in Nablus and Jerusalem (HNO, January 2023). Palestine has been included as a major food crisis in the GRFC since 2017 (GRFC 2018), but changing data sources challenge comparability.

Drivers of the crisis, 2022–23

 **Conflict/insecurity** Recurrent hostilities continued to diminish the profitability and sustainability of economic activities, including in agriculture. Restricted endowment of natural resources constrained national food production and increases reliance on food imports. In the West Bank,

settlement activity and related violence, loss of land, destruction of property, and restricted access to basic services continued to undermine livelihoods (WFP, August 2022).

In Gaza, the August 2022 escalation of violence increased needs for assistance (WFP, August 2022). In 2022, there were 868 more conflict events than in 2021. Political violence characterized the beginning of 2023 in the West Bank, sparking protests in Gaza (ACLED, January 2023).


 **Economic shocks** In Gaza, 15 years of economic blockade continued to worsen socioeconomic indicators (WFP, January 2023). Ongoing restrictions on movement, limited humanitarian access, the protracted fiscal distress, the expansion of settlements and settler activities in the West Bank, combined with a rapid increase in prices linked to the war in Ukraine, hindered economic recovery from COVID-19 (HNO 2023, January 2023).

High unemployment levels continued to limit access to food: during the second quarter of 2022, the unemployment rate was 45 percent in the Gaza Strip (66 percent for females) and 13 percent in the West Bank (22 percent for females) (PCBS, February 2023).


Civil servants of the Palestinian Authority and the de-facto authorities in Gaza faced cuts and irregularities in payment of salaries (HNO 2023, January 2023). In July 2022, 57 percent of households in Gaza (Gaza MSNA, September 2022) and 35 percent in the West Bank (West Bank MSNA, September 2022) reported that their income had decreased in the last year.

With high dependence on wheat flour and sunflower oil imports, which were traditionally sourced from Ukraine and the Russian Federation, Palestine was highly affected by lack of trade flows from that region in early 2022, and by high international food and fuel prices. Between January and April 2022, the food component of the Palestinian Consumer Price Index rose steeply to its highest point in the past six years (WB, September 2022). In 2022, the cost of the food basket was 16.5 percent higher on average than in 2021 (WFP, December 2022).


High reported levels of debt, incurred primarily to meet basic needs, further exacerbated households' financial precariousness: 79 percent of households in Gaza and 37 percent in the West Bank had taken on debt in the three months prior to data collection (MSNA, September 2022).


 **Weather extremes** From mid-January 2022, extreme weather conditions, including heavy rain, floods, winds, snow, and a cold wave, hit Palestine, with floods affecting thousands of people and forcing many families to flee their homes (IFRC, February 2022).

NUTRITION

 The most recent child wasting data – from 2019–2020 – show 'very low' levels by WHO thresholds at 1.3 percent, but since then the drivers of acute malnutrition have intensified. Child stunting was at 8.7 percent in 2021 (MICS, 2019–2020). Malnutrition is worse in Gaza than in the West Bank.

Drivers of undernutrition

 **Inadequate maternal and child-feeding practices** Only 31.4 percent of children aged 6–23 months have a Minimum Acceptable Diet, decreasing to 17 percent among the poorest households (UNICEF, 2021). In 2021, 70 percent of children under 5 years old in Gaza were anaemic, indicating a severe public health problem. In the West Bank, the prevalence was 30 percent, indicating a moderate concern (Ministry of Health, 2021). In 2020, only 43.3 percent of infants under 6 months old were exclusively breastfed (MICS 2020).

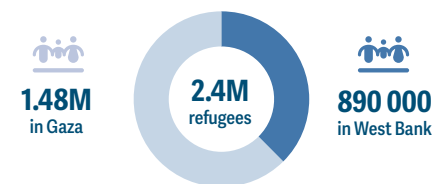
 **Limited access to health and nutrition services** The public health system in Gaza lacks the resources and infrastructure to provide adequate healthcare (ACAPS, July 2022).

 **Poor household environment** Poor water access, poor sanitation and risk of flooding expose


1.36 million Palestinians to water-borne diseases. More than 718 000 people in the West Bank and 648 000 in Gaza have limited access to WASH (HNO, January 2023).

DISPLACEMENT

Around 45 percent of the population of Palestine are Palestine refugees



Source: UNRWA, October 2022; HNO 2023, January 2023.

 **Refugees** Poverty rates among refugees residing inside and outside the eight refugee camps in Gaza more than doubled in the ten years between 2011 and 2021, from 39 percent to 82 percent (UNRWA and PCBS, November 2021). Conditions have since continued to deteriorate. As of the second quarter of 2022, 47 percent of Palestine refugees in Gaza were unemployed (HNO 2023, January 2023).

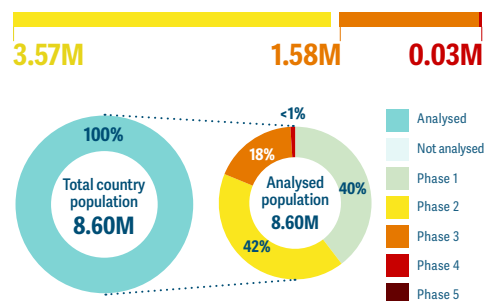
Displaced communities living in semi-structured or transitional shelters or tents due to the loss of their homes during hostilities were particularly affected by floods in early 2022 (IFRC, February 2022).

Across the West Bank, including East Jerusalem, about 25 percent of registered Palestine refugees reside in 19 refugee camps. The deepening financial and fiscal crisis within the Palestinian economy, exacerbated by the COVID-19 closures in 2021 and the effects of the war in Ukraine, have particularly affected the nearly 276 000 Palestine refugees who reside in one camp (OCHA, REACH, September 2022).

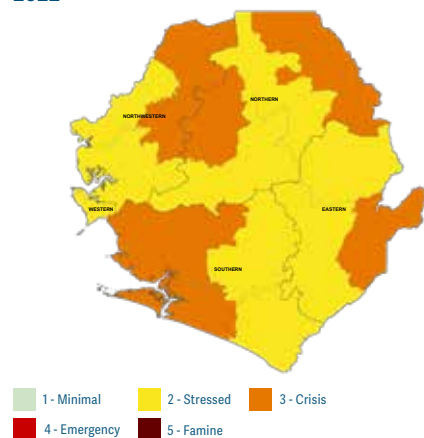
Sierra Leone

ACUTE FOOD INSECURITY PEAK 2022

1.61M people or **19%** of the analysed population in CH Phase 3 or above, June–August 2022



CH acute food insecurity situation, June–August 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, March 2022.

Food crisis overview

The number of people in Crisis or worse (CH Phase 3 or above) during the June–August 2022 lean season was 1.61 million, largely due to persistently high food and fuel prices, coupled with diminished purchasing power. This was 9 percent lower than the 2021 lean season figure of 1.76 million.

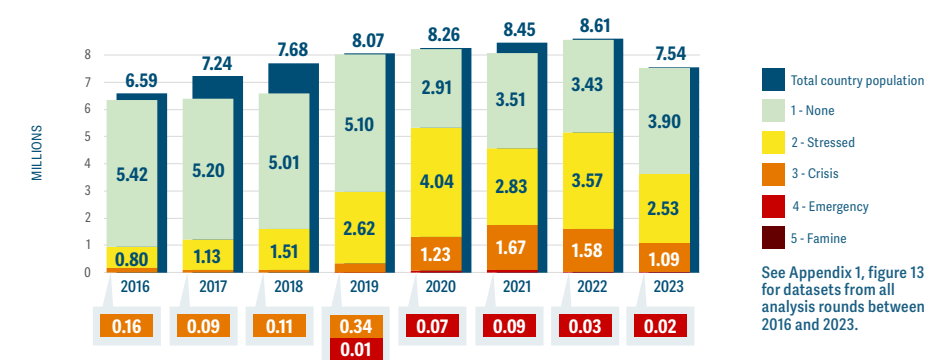
The share of the total population facing high levels of acute food insecurity dropped from 22 percent to 19 percent in the same period. This reflected favourable cereal production in 2022, at about 9 percent above the five-year average, which mitigated the effects of economic drivers.

However, cereal production was still 8 percent lower than in 2021 due to below-average rainfall and floods that damaged crops (PREGEC, November 2022).

Improvement projected for 2023

The number of people in CH Phase 3 or above is projected to decrease to 1.1 million by the June–September 2023 lean season (CH, November 2022).

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Cadre Harmonisé.

Acute food insecurity since 2016

Sierra Leone has qualified as a food crisis in all seven editions of the GRFC, and for the last three years has also qualified as a major food crisis with more than 1 million people in CH Phase 3 or above. The food crisis escalated in June–August 2020 due to price spikes and job losses associated with COVID-19.

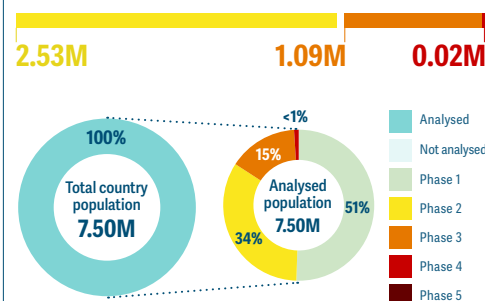
The share of the population facing Phase 2 increased from 12 percent in 2016 to 49 percent by 2020 (GRFC 2022). Stressed conditions (CH Phase 2) are still expected to affect one in three Sierra Leoneans by June–August 2023.

Drivers of the crisis, 2022–23

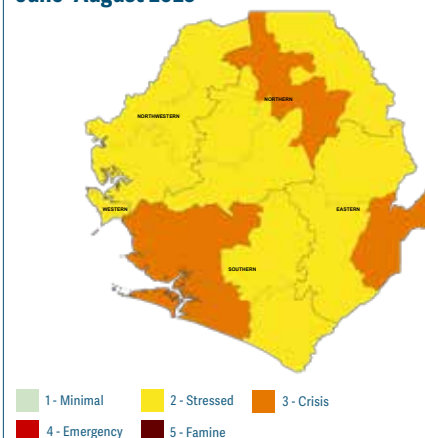
Economic shocks In 2022, the weak economy was dealt a further blow by the rise in global food and fuel prices caused by the war in Ukraine (FAO-GIEWS, November 2022). The continued depreciation of the national currency – by September 2022, its value had depreciated by 40.7 percent compared with September 2021 (WFP, November 2022) – made food

ACUTE FOOD INSECURITY PROJECTION 2023

1.11M people or **15%** of the analysed population in CH Phase 3 or above, June–August 2023



Projected CH acute food insecurity situation, June–August 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Cadre Harmonisé, November 2022.

imports more costly despite increasing need. Rice imports were anticipated to be 20 percent higher than the previous year and about 25 percent above the five-year average, following a drop in production in 2019 and 2020 (FAO-GIEWS, November 2022).

Despite the government's allocation of USD 100 million to support rice, wheat flour, sugar and fuel imports, prices of local and imported rice varieties were up by 50 percent and 40 percent respectively year-on-year in November 2022. Prices of cassava, an important substitute for rice for poor households, were 40 percent higher year-on-year in November 2022. Food inflation increased from 19.4 percent in December 2021 to 46.7 percent in December 2022 (Statistics Sierra Leone, January 2023). The average price of fuel continued to increase in the third quarter of 2022 and was about 20 percent higher compared with the previous quarter (FAO-GIEWS, November 2022).

At the same time, high public debt levels, monetary tightening and reduced domestic consumption slowed down economic growth in 2022, reducing income-generating opportunities for the most vulnerable households (FAO-GIEWS, November 2022).

Weather extremes Rainfall deficits led to localized crop losses in July and August. Floods in August in the northwest, west and southern areas destroyed an estimated 6 000 ha of rice farms and other crops. As of November 2022, about 17 000 people were affected by floods (FAO-GIEWS, November 2022), including 3 989 farmers in Kambia, Moyamba and Bonthe districts (PREGEC, November 2022).

Insecurity In July 2022, Freetown experienced a series of strike actions with civil unrest precipitating a humanitarian crisis affecting populations across many parts of the country. On 10 August, demonstrators in Freetown, Waterloo, Makeni and Kamakwie demanded reductions in fuel prices, economic relief for indebted families, fair prices for agricultural products, employment and labour rights, security and protection, blocking roads and main supply routes (ICRC, December 2022).

NUTRITION

Number of children under 5 years old with wasting, 2022



3 200 pregnant and lactating women acutely malnourished, 2022

Source: SLNNS, 2021.

The number of wasted children under 5 years is projected to increase marginally from 176 269 in 2022 to 180 338 in 2023. According to the most recent national nutrition survey (SLNNS, 2021), child wasting levels were classified as 'medium' by WHO thresholds at 5.2 percent, compared with 9 percent in 2010. Regional disparities exist with the prevalence of wasting highest in the Western Area Urban district at 9.6 percent and Western Area Slums (7.6 percent). The prevalence also exceeded 5 percent in Bonthe Kambia, Kenema, Port Loko, Pujehun and Western Area Rural.

The prevalence of Global Acute Malnutrition (GAM) was significantly higher among 6–23-month-old children (7.1 percent) than among 30–59-month-olds (3.5 percent).

Around 5.5 percent of pregnant/lactating women (PLW) were acutely malnourished (MUAC <23cm) – considered a medium prevalence – with 0.9 percent of them severely acutely malnourished (MUAC <21cm) (SLNNS, 2021).

Stunting levels were 'high' at 26.2 percent of children nationally, with four out of 17 districts – Kailahun, Kenema, Koinadugu and Tonkolili – reporting levels above the 30 percent 'very high' WHO threshold. A higher percentage of boys (29.2 percent) than girls (23.4 percent) were stunted (SLNNS, 2021).

Drivers of undernutrition

Inadequate maternal and child-feeding practices High consumption of monotonous starchy staple diets and poor consumption of iron-rich animal-sourced foods, such as milk, meat and eggs, lead to nutrient intake deficits. Very few children (4.9 percent) aged 6–23 months eat the Minimum Acceptable Diet, which meets both the recommended dietary diversity and frequency thresholds. This is considered an 'extremely critical' level of MAD. The situation is worst in the southern district of Bonthe (zero percent). Around 25 percent have acceptable dietary diversity (SLNNS, 2021).

Micronutrient deficiencies account for anaemia in approximately 73 percent of children aged 6–59 months old and 43 percent of women of reproductive age (15–49 years), indicating a severe public health problem for both (WHO, 2019). Just over half (52.7 percent) of infants up to 6 months are exclusively breastfed – considered 'alert' – though the country is on course to meet the exclusive breastfeeding target (SLNNS, 2021; Global Nutrition Report, 2020).

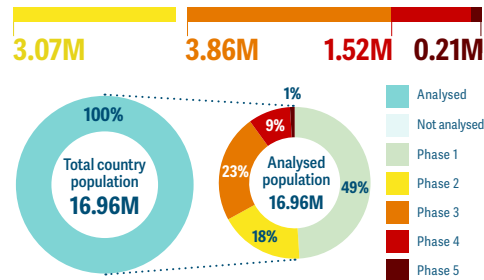
High prevalence of infectious diseases Nearly one in every eight (12.3 percent) assessed children experienced one or more communicable childhood diseases (e.g. fever, cough, diarrhoea, among others) in the two weeks prior to the assessment, which is a possible contributory factor to the poor undernutrition situation (SMART, 2021).

Poor household environment Morbidity levels are aggravated by the poor WASH conditions in many parts of the country, characterized by poor access to safe drinking water, lack of sanitation facilities and poor handwashing practices at critical times. Only 11 percent of households have access to basic water services (UNICEF Global Report, 2020) and just 14.5 percent have safely managed sanitation services (JME, 2020).

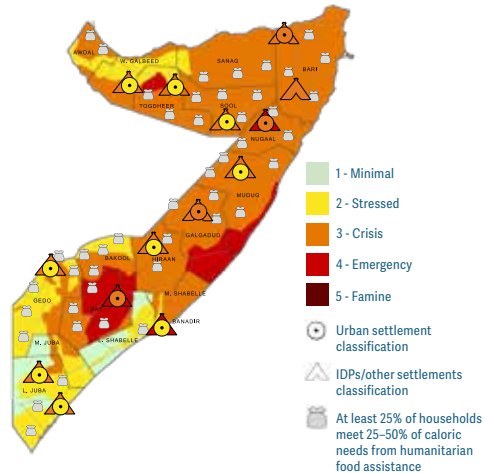
Somalia

ACUTE FOOD INSECURITY PEAK 2022

5.59M people or **33%** of the analysed population in IPC Phase 3 or above, **October–December 2022**



IPC acute food insecurity situation, October–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Somalia IPC TWG, December 2022.

Food crisis overview

In Somalia, 5.59 million people, or 33 percent of the total population, were estimated to face Crisis or worse (IPC Phase 3 or above) in October–December 2022, representing the highest number in the seven-year history of the GRFC. This equates to more than 2 million additional people in IPC Phase 3 or above compared with the same period in 2021 (IPC, November 2021) and is attributable to the impacts of the unprecedented drought, record food and fuel prices, and continued conflict, as well as an increase of 1.2 million in the country's population analysed between the two years. Within this figure, 214 050 people faced Catastrophe (IPC Phase 5) in eight regions in central and southern parts of the country. Around 1.5 million people faced Emergency (IPC Phase 4) (IPC, December 2022).

A deteriorating outlook for 2023

Around 6.5 million people across Somalia are expected to face IPC Phase 3 or above between April and June 2023, an increase of 16 percentage points since 2021. This is mainly due to the persistence of drought conditions, with a sixth season of below-average rainfall forecast for April–June 2023, and inadequate levels of humanitarian assistance anticipated. However, the waning of La Niña climate conditions is anticipated to result in less severe rainfall deficits than earlier in the drought (ICPAC, February 2023), which would support somewhat better cropping and livestock conditions than the previous year, although multiple seasons of good rainfall would be required for a full recovery (IPC, February 2023).

Drivers of the crisis, 2022–23

Weather extremes Somalia is in an unprecedented drought, caused by five consecutive seasons of below-average rains since late 2020 (IPC, December 2022a). This drought has devastated livelihoods, both in terms of well-below-average harvests and the loss of 3.8 million livestock as

Risk of Famine persists until mid-2023

Famine (IPC Phase 5) has been averted thus far in Somalia and is not expected to be the most likely outcome through June 2023, due to multiple factors, including slightly better-than-expected agricultural production in 2023, and a scaling up of multisectoral humanitarian assistance that also supported market functioning.

However, the population in Baidoa and Mogadishu IDP sites established after April 2022 and in Burhakaba district will still face a Risk of Famine¹ between April and June 2023, depending on the outcome of the Gu rainfall season and the extent of humanitarian assistance. If conflict/insecurity intensify, thereby increasing the number of IDPs, this will increase the risk of Famine (IPC, February 2023).

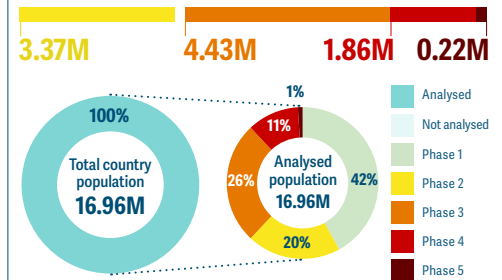
¹ 'Risk of Famine' is defined as the reasonable probability of an area going into Famine (IPC Phase 5) in the projected period, when Famine (or Famine Likely) is not the most likely scenario.

of December 2022 (FSNWG, December 2022). Reduced income sources and extremely limited access to food and other basic needs have led to widespread population displacements, with 1.18 million people internally displaced due to drought in 2022 (UNHCR, January 2023). The 2023 food security projections assume that the April–June 2023 Gu rainy season will again be below average indicating the probability of another poor rainy season (IPC, February 2023).

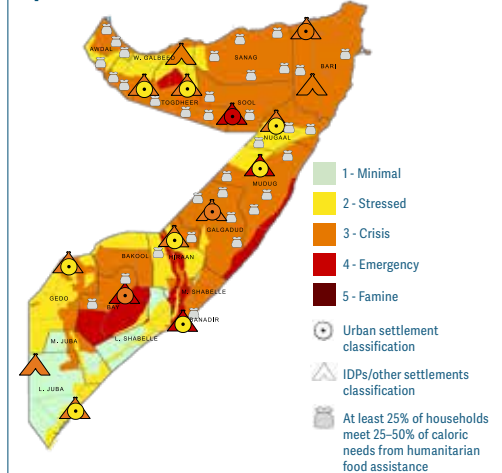
Economic shocks Across Somalia, record prices of basic commodities, including food and fuel, severely limited food access for poor households who were also facing reduced levels of income, eroding their purchasing power. In October 2022, prices of local cereals were up by 32–142 percent

ACUTE FOOD INSECURITY PROJECTION 2023

6.51M people or **38%** of the analysed population in IPC Phase 3 or above, **April–June 2023**

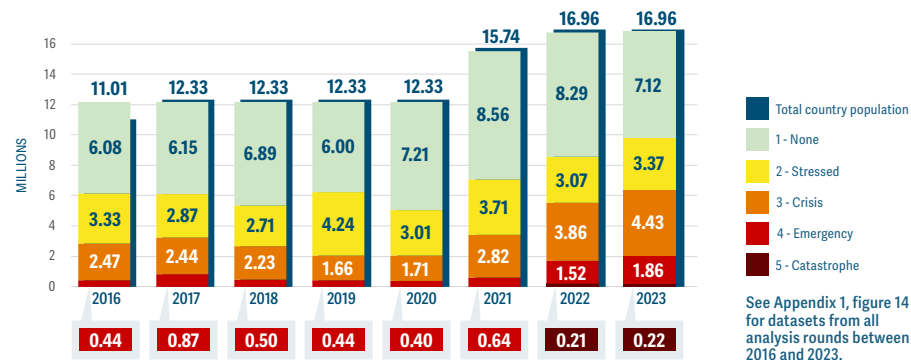


Projected IPC acute food insecurity situation, April–June 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Somalia IPC TWG, February 2023.

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Somalia IPC TWG.

compared with the five-year average, while imported rice prices were up by 27–85 percent and diesel prices by 43–102 percent. Similarly, water prices escalated during the same period, up by 9–154 percent compared with the five-year average. The 2023 food security projections assume that food, fuel and water prices will remain well above average levels (IPC, December 2022).

Conflict/insecurity Continued conflict in Somalia killed over 1 000 civilians (IPC, December 2022) and drove over 600 000 displacements in 2022 (UNHCR, January 2023). Conflict impaired humanitarian assistance access with limited presence outside major cities, as well as livelihoods, markets and economic activity (IPC, December 2022). Projections for 2023 assume that an increase in conflict will further constrain markets, humanitarian assistance and access, livelihood activities, and trade (IPC, December 2022).

Acute food insecurity since 2016

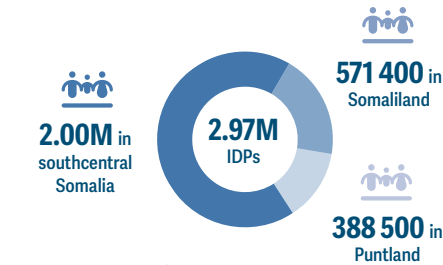
Somalia has a long history of food crises and has been included as a ‘major’ food crisis in every edition of the GRFC, driven by conflict, weather-induced shocks and economic challenges.

Prior to the current drought, two previous drought emergencies led to dire food security outcomes, with a Famine in 2011 resulting in the death of nearly 260 000 people, while in 2017, Famine was only prevented due to large-scale humanitarian assistance (IPC, October 2022). Nonetheless, almost 900 000 people were in Emergency (IPC Phase 4) in the agropastoral livelihoods in the mainly crop-dependent Bay and southern parts of Bakool region (FSNAU/FEWS NET, September 2017).

Between 2018 and 2022, the number of people in Crisis or worse (IPC Phase 3 or above) more than doubled, with the most significant increases in the last two years (IPC, October 2022).

DISPLACEMENT

Number of IDPs, end 2022



Source: UNHCR, December 2022.

IDPs By the end of 2022, nearly 3 million IDPs were living in congested settlements or temporary shelters established at different sites across the country, uprooted from homes by armed conflict and drought.

Between January 2021 and November 2022, more than 1.36 million people were newly displaced by the prolonged catastrophic drought with tens of thousands of people leaving their homes in search of assistance every month in 2022. The highest numbers were in January 2022 (311 000) and June 2022 (114 000) (IOM, March 2023).

Through Emergency Tracking Tool (ETT) assessments, IOM observed that 343 600 individuals had been displaced by drought across 216 settlements in Gedo (40 percent in IDP sites and 60 percent outside of IDP sites) in the year to November 2022. According to UNHCR, 79 percent of IDPs are women and children (PRMN, 2022).

In early 2023, WHO reported that 15–20 families were arriving daily – sick, exhausted and hungry – in the suburbs around Mogadishu after week-long journeys on foot from remote villages to reach IDP camps in Banadir. The IDP camp in Daynile district houses over 500 000 people and is growing each day, but the district’s fragile health system struggles to provide essential health and nutrition services and there is no access to safe water, sanitation and hygiene. Malnutrition, epidemic-prone diseases like acute watery diarrhoea and measles, pneumonia, anaemia in pregnant woman, and

skin infections due to lack of water intake are common among new arrivals (WHO, February 2023).

Acute food insecurity and critical levels of malnutrition are major concerns among IDPs, host communities and returnees due to limited livelihood assets and opportunities, low access to communal support and high reliance on external humanitarian assistance, including food assistance. Some 2.5 million IDPs are in IPC Phase 3 or above, including 185 400 projected to be in Catastrophe (IPC Phase 5) in April–June 2023.

A UNHCR Protection and Return Monitoring Network (PRMN) survey of 288 000 IDP arrivals in January 2023 found that food was the priority need for 78 percent and shelter the priority need for 10 percent. Of those, 277 000 had fled conflict, and 60 000 were displaced due to drought (UNHCR PRMN, January 2023). Wasting prevalence among IDPs has increased each year since 2019, reaching 18.2 percent in 2022 (HNO 2023, February 2023).

Armed conflict and the climate-related crisis are likely to trigger further displacement and put additional pressure on already strained communities (IOM Migration Report, 2022). Up to 450 000 people are expected to be displaced by conflict in 2023 (HNO, February 2023).

Refugees Somalia hosts nearly 35 000 refugees and asylum-seekers, the majority from Ethiopia, followed by Yemen. Around 69 percent of them are women and children, and live in urban areas in relatively stable Somaliland (58 percent), Puntland (32 percent) and southcentral Somalia (10 percent). During 2022, around 5 500 newly arrived refugees were registered. In addition, around 3 000 Somali refugees returned home, including those who returned spontaneously from neighbouring countries, bringing the total to 93 700 people (UNHCR, December 2022).

Refugees in Somalia do not receive humanitarian assistance. Many cannot afford housing and live in traditional shelters, leaving them susceptible to robbery, sexual assault and harassment, while others have settled at the periphery of towns due to rental challenges, and face poor living conditions, a lack of water and sanitation, and limited access to healthcare and nutrition services (UNHCR, 2022).

NUTRITION

Number of children under 5 years old with wasting, January–December 2023



Source: Somalia IPC TWG, February 2023.

According to estimates released in June 2022, about 1.48 million children under 5 years suffered from wasting from May–December 2022. Updated analysis in September 2022 estimated an increase in the number of children expected to be wasted to 1.78 million from August 2022–July 2023, based on the post-Gu assessments. The number of children suffering severe wasting increased by over 30 percent mostly due to deteriorating food insecurity and limited access to clean water, leading to outbreaks of acute watery diarrhoea and increasing incidence of diseases such as measles (IPC, February 2023). The most recent projection indicates stagnating high wasting burden of 1.8 million children expected to be affected throughout 2023 (IPC, February 2023).

Although still critical, the number of severely wasted children projected in 2023 is slightly below the estimates based on the results of the IPC acute malnutrition analysis conducted in August 2022, thanks to significant efforts in the scale-up of multisectoral humanitarian assistance, supported by slightly more favourable than previously foreseen rainfall performance (IPC, September 2022; IPC, February 2023). In April–June 2023, fewer districts were projected to be in Critical (IPC Phase 4) than in October–December 2022, and the Bay region was no longer classified in Very Critical (IPC AMN Phase 5). The highest numbers of wasted children were in Banadir, Bay, Lower Shabelle, Mudug, Bari and Lower Juba (IPC, September 2022). In addition, stunting prevalence remains high in Somalia, affecting 27.8 percent of children under 5 years (DHS, 2020).

In addition, the results from 31 integrated surveys conducted between October and December 2022 showed very high levels of mortality (Crude Death Rate and/or Under-5 Death Rate) among agropastoral populations in Baidoa and Burhakaba districts, displaced populations in Baidoa, agropastoral populations in Middle Shabelle, and displaced populations in Mogadishu, but the levels were low elsewhere (IPC, February 2023).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Severe food shortage resulting in inadequate food intake is a major cause of the high levels of acute malnutrition in Somalia (HNO, 2023).

Inadequate maternal and child-feeding practices Only 47 percent of infants under 6 months are exclusively breastfed and only 8.7 percent of children aged 6–23 months receive a Minimum Acceptable Diet (MAD) (HNO, 2023; IPC, September 2022). Women and girls in Somalia often have limited access to resources and lack skills and knowledge to provide optimal nutrition for themselves and their children (HNO 2023, February 2023).

Although no recent anaemia data are available, data from 2019 indicate a ‘severe’ public health problem, with 51.8 percent of children aged 6–59 months and 43.1 percent of women of reproductive age anaemic (WHO, 2021).

Poor household environment More than 6.4 million people were facing acute water shortages in October 2022 and new IDPs had limited access to sanitation facilities (UNICEF, November 2022; OCHA, 2022). Poor water and sanitation led to outbreaks of infectious diseases in several areas.

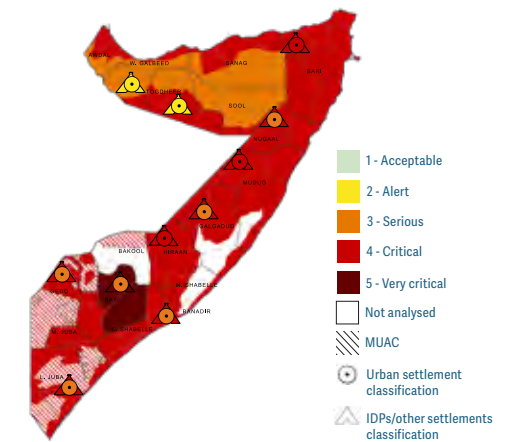
The WASH cluster reports that 8 million people are in need of emergency WASH services across the country in 2023, a 25 percent increase since 2022. According to Somalia’s Water Sources Information Management System, about 1 800 out of 8 200 water sources are non-functional and require urgent rehabilitation (UNICEF, March 2023).

High prevalence of infectious diseases Acute watery diarrhoea and measles are endemic and cases continue to rise compared with recent years, driven by severe water shortages, poor sanitation and limitations in the healthcare system (OCHA, January 2023).

Limited access to safe water, open defecation in IDP camps and insecurity leading to delayed access to care were among the factors that contributed to the cholera outbreak, with 13 383 cases across 25 districts in 2022 (WHO, December 2022). In January 2023, the Federal Ministry of Health reported 217 new cholera cases from 23 drought-affected districts, with most of the cases reported from Banadir region, and Kismayo and Afmadow districts (UNICEF, March 2023).

An estimated 90 percent of the cases of severe acute malnutrition and medical complications are attributed to diarrhoeal diseases and measles (HNO 2023, February 2023).

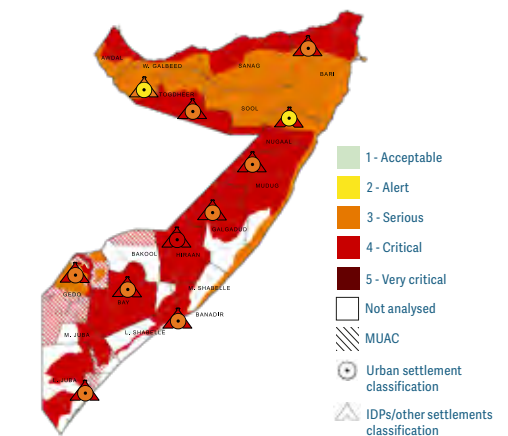
IPC acute malnutrition situation, October–December 2022



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Source: Somalia IPC TWG, September 2022.

Projected IPC acute malnutrition situation, April–June 2023



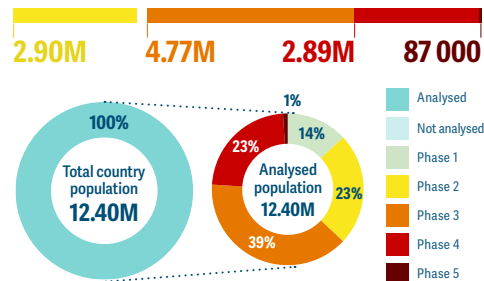
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Source: Somalia IPC TWG, February 2023.

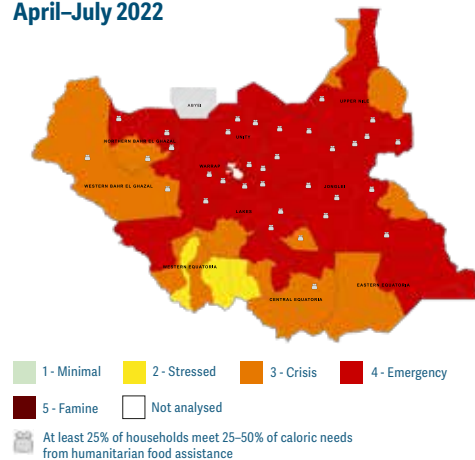
South Sudan

ACUTE FOOD INSECURITY PEAK 2022

7.74M people or **63%** of the analysed population in IPC Phase 3 or above, April–July 2022



IPC acute food insecurity situation, April–July 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: South Sudan IPC TWG, April 2022.

Food crisis overview

At 7.74 million people, representing some 63 percent of the country's total population, the number of people in Crisis or worse (IPC Phase 3 or above) reached the highest level in the seven-year history of the GRFC during the April–July 2022 lean season (IPC, April 2022). This represented over half a million additional people in these phases than during the same period in 2021 (IPC, December 2020).

The deterioration was driven by numerous interconnected shocks and stressors including a macroeconomic crisis characterized by a weak local currency and low foreign currency reserves, high food prices, livelihood and crop losses in areas affected by unusually severe floods, and the escalation of intercommunal violence (FAO, December 2022).

Two-thirds of the country's 79 counties were classified in Emergency (IPC Phase 4), and almost one-third in Crisis (IPC Phase 3). Only three counties were in Stressed (IPC Phase 2). The most food-insecure states were facing high levels of acute food insecurity were Jonglei, Unity, Warrap, Upper Nile and Northern Bahr el Ghazal (IPC, April 2022).

A similar projection for 2023

This alarming situation is expected to persist at similar levels in terms of magnitude during the April–July 2023 lean season. Nevertheless, the number of counties classified in Emergency (IPC Phase 4) is expected to decrease from 52 to 47, and those in Crisis (IPC Phase 3) to increase from 23 to 29 (IPC, November 2022).

Drivers of the crisis, 2022–23

Economic shocks The prolonged macroeconomic crisis is linked to the lingering impact of almost a decade of conflict, the COVID-19 pandemic, the effects of the war in Ukraine and the continuing fallout of flooding on oil production.

Populations in Catastrophe (IPC Phase 5)

In April–July 2022, around 87 000 people faced Catastrophe (IPC Phase 5) in the states of Jonglei and Greater Pibor Administrative Area (67 000 people), Lakes (13 000 people) and Unity (7 000 people) – 19 percent lower than during the April–July 2021 lean season. In April–July 2023, around 43 000 people are still expected to face Catastrophe (IPC Phase 5) in Akobo, Canal/Pigi and Fangak counties in Jonglei state; and in Leer and Mayendit counties in Unity state (IPC, November 2022).

Exceptionally high staple food prices, in tandem with limited economic activity, severely curtailed household purchasing power and food access in 2022.

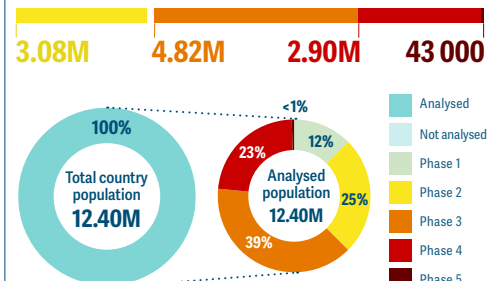
Factors underpinning these rising food prices included insufficient domestic food supplies due to a structural deficit and below-average 2021 cereal production; low foreign currency reserves and the weak national currency; high fuel prices, with prices of diesel in December 2022 more than twice its year-earlier values in the capital Juba; and reduced imports from neighbouring Uganda, the main source of imported cereals, due to low exportable surpluses following reduced 2022 cereal production (FAO/WFP, forthcoming).

In Juba, prices of maize surged by almost 70 percent between June and September 2022, while prices of the main staple sorghum more than doubled (FAO, December 2022). In November, maize and sorghum prices were around twice their already high year-earlier values and about 100 times those of July 2015, before the currency collapse (FAO, December 2022).

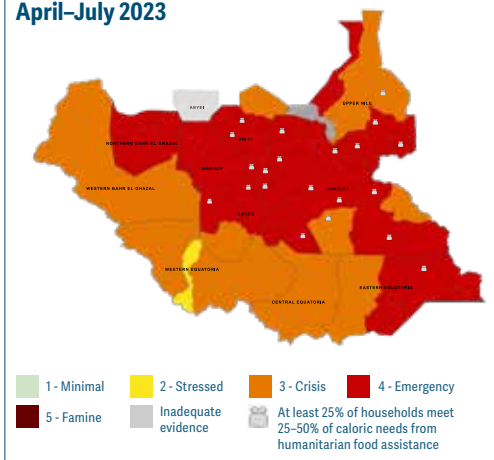
Conflict/Insecurity Despite the August 2022 agreement to extend the Transitional Government of National Unity through February 2025, and an overall decrease in the number of acts of violence against civilians (ACLED, January 2023),

ACUTE FOOD INSECURITY PROJECTION 2023

7.76M people or **63%** of the analysed population in IPC Phase 3 or above, April–July 2023



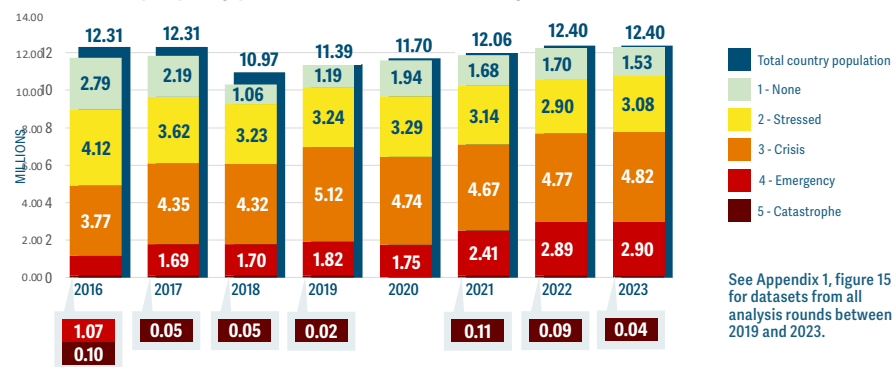
Projected IPC acute food insecurity situation, April–July 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: South Sudan IPC TWG, November 2022.

Peak numbers of people by phase of acute food insecurity, 2016–2023



In 2018, the peak of acute food insecurity was reached in September that year although 155 000 people faced IPC Phase 5 in May–July 2018. Source: IPC TWGs.

subnational conflict and attacks on civilians persisted in seven out of ten states, especially in Upper Nile, Jonglei, Unity and Warrap. Insecurity prevented people from accessing fields, livestock and income-generating activities, disrupted trade and markets, drove up food prices, and constrained humanitarian access. In 2022 alone, an estimated 257 000 people were displaced by conflict (OCHA, November 2022).

In the November 2022–May 2023 dry season, localized conflict/insecurity are expected to continue leading to displacement, depletion or loss of assets, and disruption of livelihoods, further reducing income for purchasing food and covering essential needs (IPC, November 2022).

Weather extremes In 2022, an estimated 130 000 hectares of cultivated land were damaged by floods, with an estimated loss of 65 000 tonnes of cereals (CFSAM, December 2022). Over 1 million people were reportedly affected in nine of the ten states in August to late October, mainly impacting Northern Bahr el Ghazal, Warrap and Unity (OCHA, November 2022). Atypical rainfall from October to mid-December (the start of the usual dry season), combined with elevated water levels in the Nile River and its tributaries, slowed the expected recession of the floodwaters in the Sudd Wetland and White Nile River Basin (FEWS NET, December 2022).

Acute food insecurity since 2016

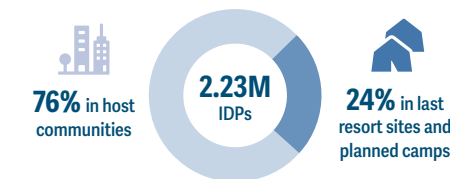
Since the first edition of the GRFC in 2017, South Sudan has consistently ranked among the worst eight food crises in terms of numbers of people in Crisis or worse (IPC Phase 3 or above). Each year since 2017, at least half of its population has faced IPC Phase 3 or above during the April–July lean period, reaching over 60 percent in 2019, 2021 and 2022.

For seven consecutive years, South Sudan has had populations in Catastrophe (IPC Phase 5), reaching the highest number (155 000) in May–July 2018 (IPC, January 2018). The severity of acute food insecurity has increased sharply since 2020 with the number of people in Emergency (IPC Phase 4) rising by 38 percent between 2020 and 2021, and by another 20 percent between 2021 and 2022.

This protracted and worsening food crisis is attributable to the combined effects of recurrent shocks and underlying fragility, instability and ubiquitous poverty. Persistent annual cereal deficits, years of asset depletion and livelihood losses, and constrained access to basic services hamper households' capacities to cope with repeated shocks and erode opportunities to build resilience.

DISPLACEMENT

IDPs live in host communities or displacement sites



Source: UNHCR, February 2023.

IDPs Since 2014, more than 2.2 million people in South Sudan have been internally displaced by conflict and natural disasters, with subnational and localized violence leading to the displacement of more than 300 000 people in 2022 alone. A further 2.3 million are refugees in five surrounding countries (mainly Uganda and the Sudan) (UNHCR, February 2023).

Most displaced people live in host communities, further straining limited essential services. Instability and flooding have resulted in hundreds of thousands of people living in protracted displacement in camp-like settings in overcrowded shelters that get flooded during the rainy season, increasing disease outbreaks. These poor living conditions, lack of water and sanitation services and insufficient health services sometimes spark tensions between population groups (HNO 2023, November 2022).

More than 61 percent of IDPs nationally face high levels of acute food insecurity in 2023 with the highest percentages in Western Bahr el Ghazal (69.9 percent) and Central Equatoria (67.3 percent) (IPC as reported in HNO 2023, November 2022). In camps, wasting levels exceeded WHO emergency thresholds. In interviews, IDPs indicated insufficient or no access to food for children or nutrition services in Leer, Mayendit, Malakal, Akobo, Wau and Juba counties (OCHA, January 2023). An estimated 390 000 IDP children and pregnant and lactating women are expected to suffer from acute malnutrition in 2023 (HNO 2023, November 2022).

Returnees Since 2016, 1.92 million people returned to their place of origin, 67 percent of them from within South Sudan following the peace agreement in 2018. In 2022, nearly 126 600 South Sudanese refugees spontaneously returned, mainly from the Sudan (HNO 2023, November 2022). Returnees face severe obstacles to food security and adequate nutrition, including lack of access to livelihoods, disputes over land tenure and poor household environment.

The 2022 Inter-Sector Needs Assessment found that 63 percent did not receive any support to return or relocate and 75 percent reported food as a priority need (OCHA, January 2023).

Refugees By the end of 2022, 308 374 refugees were living in South Sudan, mainly in camps (92 percent) in Upper Nile and Unity states. The majority are from the Sudan (92 percent) and the rest from the Democratic Republic of the Congo, Ethiopia, the Central African Republic, Eritrea and Burundi. During 2022, around 6 591 new arrival refugees were registered (UNHCR, December 2022).

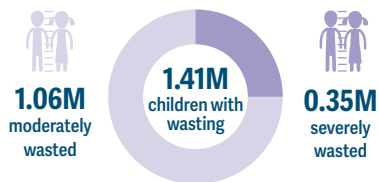
Due to limited access to livelihoods, lack of agricultural opportunities and continued insecurity, refugees rely on humanitarian food assistance. In 2021, the food ration was reduced from 70 to 50 percent of the daily recommended 2 100 kilocalories (UNHCR & WFP, 2022).

The percentage of moderately and severely food-insecure refugee households has progressively increased since September 2020 to reach 79 percent by June 2022, largely attributed to the after-effects of COVID-19, an increase in market prices of food commodities and the ration cuts, as well as prolonged flooding and limited livelihood options. Around 70 percent of refugee households spent more than 65 percent of their incomes on food (WFP, June 2022).

The prevalence of child wasting was 'high' (>10 percent) in four out of eight monitored refugee sites and that of severe wasting was above 2 percent in two sites. Stunting was 'very high' or 'high' in two camps. Anaemia was a severe public health concern among children under 5 years old in five camps (SENS, 2021).

NUTRITION

Number of children under 5 years old with wasting, July 2022–June 2023



0.74M pregnant and lactating women acutely malnourished, 2023

Source: IPC, November 2022.

Acute malnutrition was expected to deteriorate further from mid-2022 due to insufficient and poor access to health and nutrition services, high levels of disease and inadequate child-feeding practices, in tandem with persistently high acute food insecurity.

The 2021 figure of 1.3 million children with wasting had already marked the highest caseload since the start of the conflict in December 2013, according to the IPC (IPC AMN, December 2020). From July 2022 to June 2023, the number of children with wasting was estimated to reach 1.4 million, with 0.36 million of them severely wasted, based on analysis of the results of the SMART nutrition surveys (IPC AMN, November 2022).

The majority (around 61 percent) of South Sudan’s wasted children are in the states of Jonglei, Upper Nile, Unity and Warrap, which also have the highest numbers and prevalence of people in Crisis or worse (IPC Phase 3 or above) phases of acute food insecurity (IPC AMN, November 2022).

From July to October 2022, 30 counties are classified in Critical (IPC AMN Phase 4) and 15 in Serious (IPC AMN Phase 3). During the post-harvest season from November 2022, rather than an improvement that would be typical

of this period, the situation was projected to worsen, with 34 counties in IPC AMN Phase 4 and 22 in IPC AMN Phase 3. During the March–June 2023 lean season – which is characterized by limited household-level food affecting individual intake and increased rains likely contributing to increased illness among children – wasting levels are expected to worsen, with 77 percent of analysed counties projected to be in Serious or worse (IPC AMN Phase 3 or above). This translates to 44 counties in Critical (IPC AMN Phase 4) and 15 in Serious (IPC AMN Phase 3).

Two in three counties classified in IPC AMN Phase 4 are in Upper Nile, Jonglei and Unity (IPC, November 2022). Stunting levels in South Sudan are ‘very high’ with 31.3 percent of children under 5 years of age affected (Global Nutrition Report, 2021).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets There is a strong linkage between the severity of acute food insecurity and acute malnutrition during the lean season when households face depleted food stocks, limited access to and reduced functionality of markets because of the rainy season, high food prices, and reduced income.

Despite this, in some areas in Lakes and Western Equatoria states, low levels of disease mean that acute malnutrition may not reach more severe phases, which translates into a significantly lower projected severity of acute malnutrition than acute food insecurity (IPC AMN, November 2022).

Inadequate maternal and child-feeding practices All IYCF indicators remain suboptimal. At national level, fewer than 5 percent of children aged 6–23 months receive a Minimum Acceptable Diet, i.e. the required food quality at the required frequency (IPC AMN, November 2022).

High prevalence of infectious diseases Nearly 63 percent of children reported having been ill two weeks prior to the assessment, mainly with diarrhoea, fever and cough. Existing poor sanitation conditions are likely contributing to the high incidence of illness, with open defecation reported by half of households in 56 counties (IPC AMN, November 2022). The government

declared a cholera outbreak in March 2022 (WHO, September 2022).

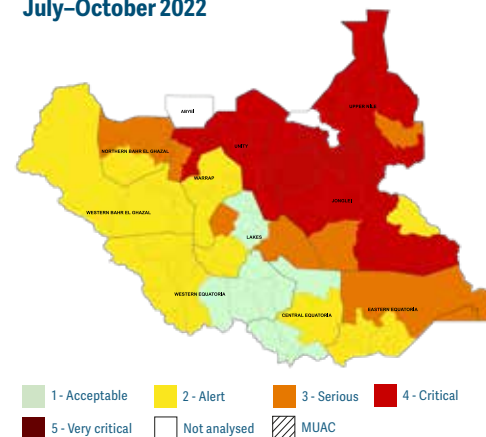
Disruption in health services was a critical factor in the nationwide measles outbreak that the Ministry of Health declared on 11 December. Cases had been reported in 22 counties by mid-December, raising the risk of increased acute malnutrition and mortality levels due to the interaction of hunger and disease, especially in areas with large populations in Emergency (IPC Phase 4) (FEWS NET, December 2022).

Limited access to health and nutrition services

Access to health facilities is a major driver of undernutrition with only 8 percent of health facilities countrywide fully functional, while 53 percent are moderately functional (OCHA February 2022). This is a major contributing factor, especially in locations with flooding and conflict (Jonglei, Upper Nile and Unity states) where access to humanitarian support is limited and delivery is costly.

The 24 percent cut in the donor-financed Health Pooled Fund in mid-2022, which was used to support the provision of primary healthcare services, reduced critical health support in at least 220 facilities across eight out of ten states. Coupled with conflict/insecurity leading to displacement and the targeting of humanitarian actors, these multiple deprivations are hampering the delivery of life-saving programmes and are expected to lead to further deterioration if urgent and adequate support is not provided on time (IPC AMN, November 2022).

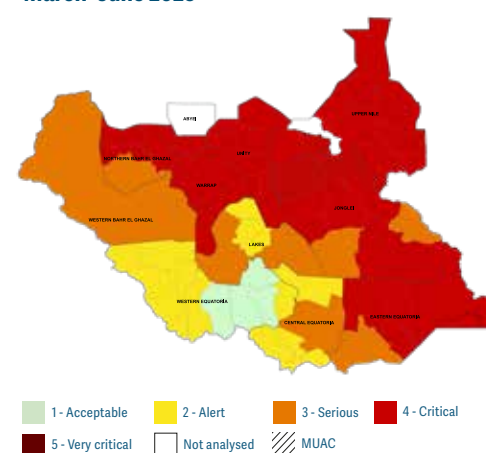
IPC acute malnutrition situation, July–October 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined.

Source: South Sudan, IPC TWG, November 2022.

Projected IPC acute malnutrition situation, March–June 2023



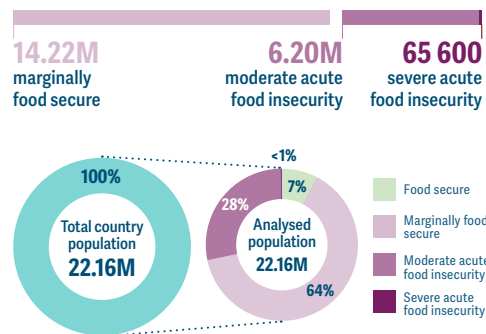
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Source: South Sudan, IPC TWG, November 2022.

Sri Lanka

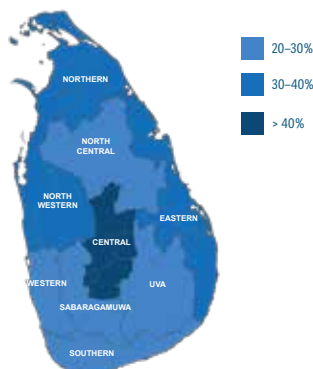
ACUTE FOOD INSECURITY PEAK 2022

6.27M people or **28%** of the analysed population faced moderate or severe acute food insecurity, May–June 2022



Source: FAO/WFP CFSAM, September 2022.

Prevalence of acute food insecurity, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: WFP CARI, September 2022.

Food crisis overview

The unprecedented levels of acute food insecurity in 2022 reflected soaring food prices, reduced income opportunities, poor harvests and severe disruptions to the food supply chain, including shortages of fuel, fertilizers and imported foods, triggered by severe macroeconomic challenges. Around 6.20 million people (28 percent of the population) were moderately food insecure and 65 600 people severely food insecure in May–June 2022, as per WFP CARI methodology (FAO/WFP September 2022).

The highest levels of acute food insecurity were in the estate sector (tea plantations), with 57 percent of the population moderately or severely food insecure, followed by Central (41.6 percent) and Northern (38.5 percent) provinces, and among female-headed households (39.8 percent) and the Tamil population (50.3 percent) (FAO/WFP, September 2022).

The food security situation was expected to deteriorate during the lean season from October 2022–February 2023, driven by poor harvests of staple foods, in particular paddy rice following acute shortage of fertilizer and agrochemicals, and the ongoing economic crisis (FAO/WFP, September 2022). Sri Lanka has been selected for inclusion in the GRFC each year except 2019. However, food insecurity estimates were available only in 2017 and in 2022. This is the first time it has been defined as a ‘major’ food crisis.

Drivers of the crisis, 2022–23

Economic shocks Since 2020, the country has been facing a deteriorating economic crisis caused by reduced government earnings and accumulating debt. The COVID-19 travel restrictions affected tourism, an important foreign exchange earner, and remittances from expatriate workers. The situation was aggravated by political and social turmoil.

Furthermore, global hikes in energy costs, linked to the war in Ukraine, made things worse. The war affected

Sri Lanka’s main export commodity tea, due to sanctions against the Russian Federation, its third-largest market. In March 2022, the Sri Lankan Government imposed daily electricity cuts due to the limited availability of imported fuel needed for electricity generation. Debt levels became unsustainable and in May 2022 there was a declaration of sovereign default (FAO/WFP, September 2022).

Strong depreciation of the national currency coupled with dwindling foreign currency reserves curtailed the country’s capacity to import fuel, medicines, food and agricultural inputs, causing acute shortages and spikes in the prices of essential products (FAO/WFP, September 2022). As fuel shortages worsened, in July, the Government restricted fuel usage to essential services, which incited political unrest and street protests.

Reduced application of agrochemicals as a consequence of both an import ban between May and November 2021 and limited import capacity thereafter was among the main causes of decreased agricultural production (FAO/WFP, September 2022). Paddy rice production, the main food staple, was forecast to decline by 42 percent year-on-year in 2022, the lowest level since the 2017 drought-affected harvest. Maize production, mainly used as animal feed, was forecast at 40 percent below the recent five-year average, with knock-on effects on poultry and livestock production. Vegetables, fruit and export crops, such as tea, rubber, coconut and spice harvests, were also severely affected, causing a significant decline in household income and export revenues (FAO/WFP, September 2022).

Production shortfalls and fuel shortages led to food price spikes and by July 2022, they were 90 percent higher year-on-year. Prices of imported wheat flour, more than tripled their year-earlier levels and were at record levels in July 2022 (FAO/WFP, September 2022; FAO-GIEWS, September 2022). Food inflation was 85.6 percent over the year to October 2022 making food less affordable for households (Colombo Consumer Price Index). High prices and shortages of fuel and other imported goods severely disrupted a wide range of livelihoods, including those of farmer, traders, fishing communities, and

construction and transport workers, among others (FAO/WFP, September 2022).



Weather extremes Uneven rainfall distribution during the 2021/22 main ‘Maha’ season had localized negative effects on crop yields. The Southern and Northwestern provinces received below-average rains in June–July, which, coupled with drainage problems and lack of fuel for pumping irrigation waters, constrained the late cultivation of the ‘Yala’ paddy crops (FAO/WFP, September 2022).

NUTRITION



According to the latest nationally representative nutrition survey, 13.2 percent of children under 5 years were wasted, which is ‘high’ according to the WHO’s classification. This includes 1.7 percent of children with severe wasting. Key micronutrient intake, specifically calcium and vitamin A was inadequate, especially for the 24–36 month age group (Medical Research Institute (MRI), January 2022).

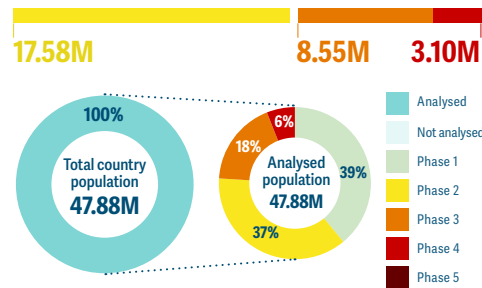
The impacts of the country’s political and economic crisis have likely driven a deterioration in the nutrition situation. As of April 2022, the monthly cost of a nutritious diet increased by 156 percent. Nutritional assistance was temporarily reduced, including the delivery of Thripasha, a nutrition supplement targeting wasted children and pregnant and lactating women (PLW), and the provision of school meals. This left many children untreated and acutely food insecure, with parents struggling in the context of food price hikes and nationwide food rationing. Schools still serving meals significantly cut portion sizes and protein density.

The inability to import medicines due to depleted foreign reserves caused shortages that severely impacted healthcare supplies, and there are disparities in access to water with a national coverage of 84 percent, about 66.8 percent of households in the estate sector do not have access to safe drinking water. Nationally, 48.5 percent nationally do not practise water treatment (OCHA, October 2022).

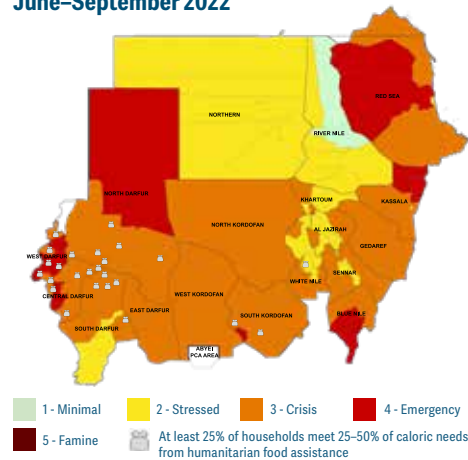
Sudan

ACUTE FOOD INSECURITY PEAK 2022

11.65M people or **24%** of the analysed population in IPC Phase 3 or above, **June–September 2022**



IPC acute food insecurity situation, June–September 2022



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Source: Sudan, IPC TWG, June 2022.

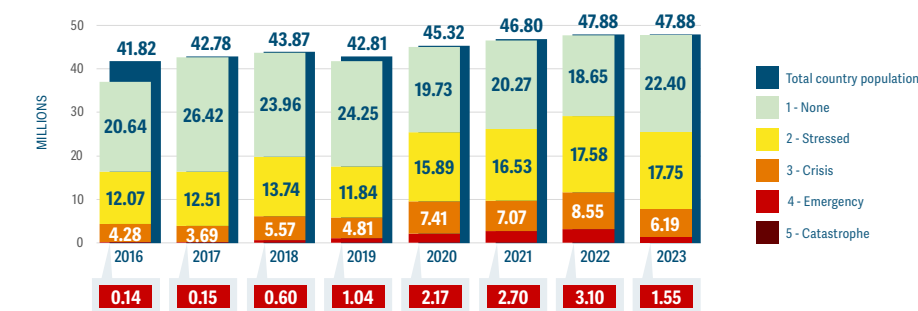
Food crisis overview

Acute food insecurity sharply deteriorated with 11.65 million people estimated to face Crisis or worse (IPC Phase 3 or above) in June–September 2022, the highest recorded figure in the seven-year history of the GRFC and an increase of 2 million people compared with the previous high in June–September 2021. A worsening macroeconomic crisis, exacerbated by international supply shocks, an early onset of the lean season, and conflict, civil unrest and political instability drove the deterioration.

Of the 187 localities analysed, 14 were estimated to be in Emergency (IPC Phase 4) and 138 in Crisis (IPC Phase 3) (IPC, June 2022). Central, North and West Darfur, Blue Nile, and South and North Kordofan states had 30–42 percent of their analysed populations in IPC Phase 3 or above. Displaced populations, those residing in conflict-affected areas, and vulnerable agropastoral and pastoral communities in eastern, northern and western Sudan were the most food insecure (IPC, June 2022).

Between October 2022 and February 2023, levels of acute food insecurity were projected to decline, with 7.74 million people to face Crisis or worse (IPC Phase 3 and above). This improvement reflects improved food access

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Sudan IPC TWG.

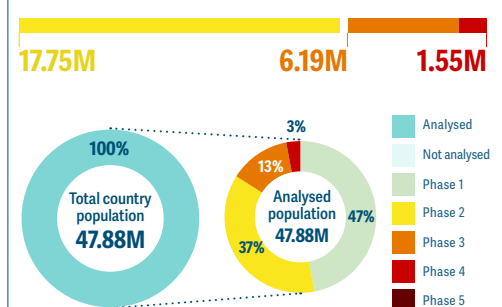
following the 2022 main cereal harvests, estimated at an above average level and significantly higher than the reduced levels in 2021 (FAO, March 2023). However, the recent onset of clashes between the Sudanese Armed Forces and paramilitary forces in mid-April is likely to worsen acute food insecurity as markets and livelihoods have been severely and suddenly disrupted, humanitarian operations halted and the risk of further internal displacement heightened.

Acute food insecurity since 2016

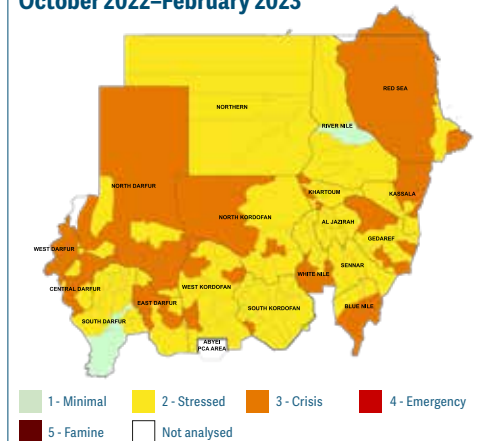
The Sudan has persistent high levels of acute food insecurity due to the combined impact of the macroeconomic crisis since 2017, civil unrest since 2018, sustained inter-communal conflicts and weather extremes. In six out of seven years, the country has been among the ten largest food crises in the GRFC, with its population in IPC Phase 3 or above consistently increasing from 3.8 million in 2017. In 2020 and 2021, the socioeconomic impacts of the COVID-19 pandemic compounded the dire economic situation, resulting in 21 percent of the population being in IPC Phase 3 or above compared with 14 percent in 2019. The people facing IPC Phase 4 more than doubled over the same period, and steadily increased to over 3 million in 2022.

ACUTE FOOD INSECURITY PROJECTION 2023

7.74M people or **16%** of the analysed population in IPC Phase 3 or above, **October 2022–February 2023**



Projected IPC acute food insecurity situation, October 2022–February 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Sudan, IPC TWG, June 2022.

Drivers of the crisis, 2022–23



Economic shocks Poor macroeconomic conditions persisted due to low foreign currency reserves, continued currency depreciation and rampant inflation. The consequent upward pressure on local and imported food and non-food prices curtailed households' purchasing power.

In September 2022, the national average retail price of a kilogram of sorghum was 243 percent higher than in the same period in 2021 (WFP, September 2022), while in August 2022, a litre of fuel was 135 percent higher year-on-year (FEWS NET, August 2022).

The Sudan was heavily affected by the war in Ukraine due to high dependence on cereal imports from the Russian Federation and Ukraine. The 2022–23 IPC acute food insecurity projections assume that staple cereal prices will decline through February 2023 due to near-average 2022/23 main season harvests but will remain four to five times above the recent five-year average (IPC, June 2022).



Conflict/insecurity Inter-communal clashes, political instability, civil unrest and the increased presence of armed groups led to population displacement, disruption of agricultural production and livelihoods, and destruction of households' productive assets, particularly in Blue Nile, Darfur, Kassala and Kordofan states (FEWS NET, August 2022). The 2022–2023 projection period coincides with the harvest season, when conflict levels typically increase due to disputes over land (IPC, June 2022).

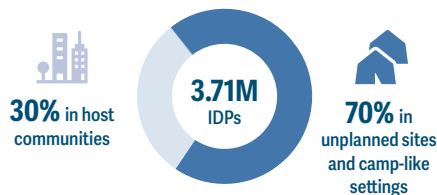


Weather extremes The 2021/22 cereal production was estimated to be 35 percent below the output obtained in the previous year and about 30 percent below the average of the previous five years, mainly due to an irregular distribution of rains, with prolonged dry spells in July 2021, followed by torrential rains in late July, which triggered floods and forced several farmers to replant (FAO, March 2022).

The 2022/23 aggregate cereal production is estimated at about 45 percent above the output obtained in the previous year and 13 percent above the average of the previous five years. The increase is mainly due to abundant and well-distributed rains over most cropping areas, which boosted yields (FAO, March 2023).

DISPLACEMENT

IDPs were mainly displaced by conflict



Source: IOM, December 2022.

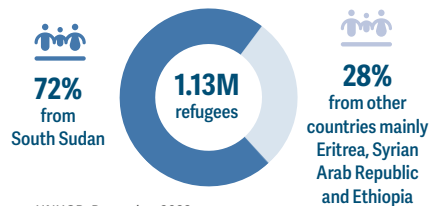
IDPs In 2022, around 418 500 people were internally displaced, 75 percent of them due to a spike in localized conflict in Darfur and Kordofan, and 25 percent due to flooding. Overall, about 85 percent of the 3.71 million IDPs were displaced by armed conflict and communal clashes, 7 percent by economic shocks and 6 percent by weather extremes (IOM DTM, February 2023). At least 2 million are under 18 years and have been displaced for most of their lives (HNO 2023, November 2022).

Most IDPs live in camps in the highly food-insecure Darfur states (HNO 2023, November 2022) and in settlements in Kordofan, Red Sea, Blue Nile, Gedaref and Kassala states. They face high levels of acute food insecurity, consistent with Crisis or worse (IPC Phase 3 or above) and incomes below the level necessary to safeguard their means of subsistence (FEWS NET, August 2022).

Refugees The Sudan hosts one of the largest refugee populations in Africa, with 39 percent residing in camps, and 61 percent in out-of-camp settings. During 2022, over 56 000 new arrivals were registered as refugees in the country, mostly from South Sudan (UNHCR, December 2022).

High levels of acute food insecurity and malnutrition remain a key concern. Results from the 2022 UNHCR SENS surveys in refugee camps in White Nile state revealed that 43 percent of surveyed households had poor food consumption and 40 percent borderline. They revealed very high levels of child wasting (above the 15 percent threshold) and severe wasting above

Refugees mainly reside in Khartoum and White Nile states, 2022



Source: UNHCR, December 2022.

2 percent in all the camps, indicative of a significant deterioration compared with previous years (UNHCR SENS, 2022). Food ration cuts since July 2022 entailed refugees receiving 50 percent of the recommended daily food basket of 2 100 kcals per person a day, which likely exacerbated the situation (ECHO, June 2022).

NUTRITION

Number of children under 5 years old with wasting, 2022



905 000 pregnant and lactating women acutely malnourished, 2022

Source: HNO 2023, November 2022.

The nutrition situation in the Sudan is dire, with 11 of the 18 states having wasting prevalence above 15 percent (OCHA, June 2022). The number of wasted children under 5 years was projected to increase from 2.76 million in 2022 to around 3 million in 2023, with the number of severely wasted children increasing from 0.56 million in 2022 to 0.61 million in 2023. Over 91 000 severely wasted children are expected to have complications that need in-patient treatment services in 2023 (HNO 2023, November 2022).

Drivers of undernutrition



Food insecurity and lack of access to healthy diets Sharply deteriorating levels of acute food insecurity in 2022 contributed to worsening acute malnutrition by restricting dietary intake. A dry spell in 2022 affected food security in 115 localities and led to an estimated 153 000 more cases of severe and moderately malnourished children (HNO 2023, November 2022).



Poor household environment Unsafe water, inadequate sanitation and poor personal and environmental health and hygiene increased the risk of contracting a growing number of WASH-related diseases. About 28 percent of water sources lack sufficient water, and 25 percent do not function, largely attributable to fuel price increases. Around 30 percent of the population has access to basic sanitation with a 33.3 percent prevalence of open defecation. Handwashing with soap and water is estimated at 14.3 percent (HNO 2023, November 2022).



High prevalence of infectious diseases Children under 5 years of age are exposed to vaccine-preventable diseases due to reduced coverage of the expanded programme of immunization: the measles vaccine coverage at the national level declined to 60 percent in 2022, following an already reduced rate of 67 percent in 2020. In Central Darfur, East Darfur, South Darfur, South Kordofan, West Kordofan and Red Sea states, the vaccination coverage was even lower, severely compromising the nutrition status of children under 5 years (HNO 2023, November 2022).



Limited access to health and nutrition services The protracted humanitarian crisis in the Sudan continues to impact the already fragile health system (HNO 2023, November 2022).

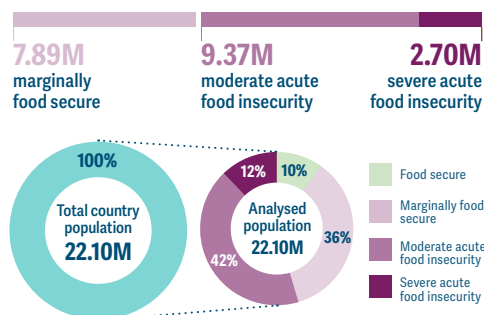


Inadequate maternal and child-feeding practices According to the latest available data, while over 62 percent of children under 6 months were exclusively breastfed, only 12.6 percent of children aged 6–23 months consumed a Minimum Acceptable Diet (S3M II, 2019). Anaemia prevalence in children aged 6–59 months was estimated at 50.8 percent, indicating a severe public health problem. Among women of reproductive age, it was a moderate problem (36.5 percent) (UNICEF, 2019).

Syrian Arab Republic

ACUTE FOOD INSECURITY 2022

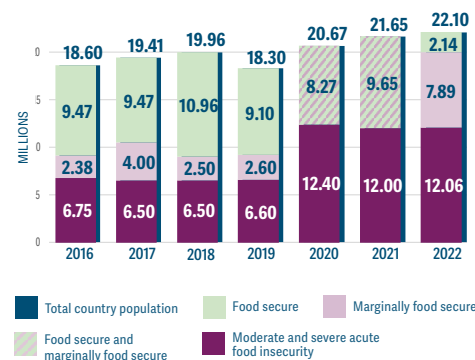
12.06M people or **55%** of the analysed population faced moderate or severe acute food insecurity in 2022



The analysis covered 100% of the Syrian Arab Republic's population of 22.1 million people.

Source: HNO 2023, December 2022.

Acutely food-insecure and food-secure populations, 2016–2022



Source: HNO/HRP.

Food crisis overview

An estimated 12.06 million people in the Syrian Arab Republic were facing acute food insecurity in 2022. Of them, 9.37 million were estimated to be moderately food insecure and 2.7 million severely food insecure, representing more than half (55 percent) of the total population, based on the CARI methodology. This number includes the 2 million people living in displacement camps, all of whom were deemed to be acutely food insecure (HNO, December 2022).

Acute food insecurity levels are high in Idlib, largely attributable to conflict and economic crisis, as well as in Quneitra, Al-Raqqa, Aleppo, Deir-ez-Zor, Al-Hasakeh and Hama governorates, which experienced poor harvests (HNO 2023, December 2022).

Even before the earthquakes struck on 6 February 2023, the food security outlook for 2023 was precarious with an additional 2.9 million people estimated to be at risk of acute food insecurity. Prices of imported fertilizers, foods and fuels are expected to continue to be volatile through 2023, which will weigh heavily on households' purchasing power (HNO, December 2022).

The first significant rainfall of the 2022–23 cropping season was recorded in November, with above-average amounts in all governorates. However, December 2022 rainfall was significantly lower than average across the country, with the largest differences in Al-Hasakeh (the main cereal-producing governorate) and southern parts of the country (FAO-GIEWS, January 2023).

Acute food insecurity since 2016

The number of acutely food-insecure people increased from 6.5 million in 2018 and 6.6 million in 2019 to 12.4 million (60 percent of the population) by November 2020. This was due to protracted and intensifying conflict leading to further displacement, high unemployment and increasing food prices but also to a change in methodology for the Food Security and Livelihoods Assessment. Since 2020, the number of acutely food-

insecure people remains persistently high at around 12 million, representing 56 percent of the population, due to the continuation of hostilities and compounding effects of the pandemic, adverse weather events, regional fragility and macroeconomic instability.

Drivers of the crisis, 2022–23

Economic shocks The impact of the war in Ukraine on the global macroeconomic environment exacerbated the Syrian Arab Republic's already deep economic crisis resulting from protracted conflict, sanctions, the COVID-19 pandemic and the financial collapse in Lebanon (WB, June 2022).

The Syrian pound continued to depreciate on the parallel market in 2022, leading to rampant inflation, erosion of real wages and further decreases in household purchasing power (FAO-GIEWS, January 2023).

As the country is highly dependent on imports for food and fuel the soaring commodity prices sustained by the impact of the war in Ukraine aggravated inflation (HNO, December 2022). By October 2022, the standard reference food basket cost 52 percent more than it did at the outset of the war – a record high – and was 91 percent more expensive compared with a year earlier (WFP, November 2022).

In response, the Syrian government scaled back subsidy programmes and rationed essential foods, such as wheat, rice and potatoes, as well as reduced fuel allocations for public institutions and heating oil for families (WB, June 2022). The high price of fuel led to shortages throughout the country (FAO-GIEWS, January 2023).

Conflict/insecurity Twelve years since the start of the conflict, despite significant improvements in the security situation across most of the country, some regions remained volatile in 2022 with bombardments continuing to drive civilian casualties, internal displacement and constraining humanitarian access (HNO, December 2022). Violence peaked in October–December 2022 with a 21 percent

increase in the number of incidents of explosions and remote violence compared with the year before (ACLEDA, January 2023), particularly affecting the northwest and northeast, especially Idlib and Aleppo governorates (HNO, December 2022).

These hostilities affected people's welfare and livelihoods through the destruction of physical capital, forced displacement and collapse of economic activity, which increased the use of negative food and livelihood coping strategies (WB, June 2022).

Conflict also hindered humanitarian assistance as damage to roads, electricity and communication networks made it difficult to reach affected populations and violence interrupted operations (HNO, December 2022).

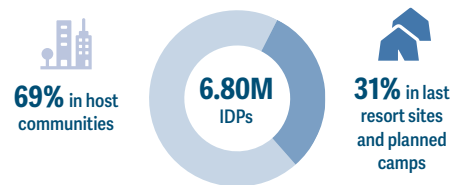
By February 2023, more than 5.4 million Syrian refugees were registered in neighbouring countries, primarily in Türkiye, Lebanon and Jordan (UNHCR, February 2023), and 6.8 million people were internally displaced. See Lebanon country brief for IPC acute food insecurity analysis of Syrian refugees in Lebanon.

Weather extremes Recurring drought-like conditions persisted in most of the country due to insufficient and poorly distributed rainfall and higher-than-average temperatures. Water scarcity affected rainfed crop systems as well as irrigated crops, such as legumes and cereals, as the Euphrates River has experienced low water levels since 2021.

High prices for agricultural inputs in combination with weather anomalies and water scarcity drove the reduction in crop yields and consequently food and livestock feed availability (HNO, December 2022). The 2022 cereal harvest continued to be below average, with the estimated 1.1 million tonnes of wheat produced similar to that of last year, but still a quarter of the pre-conflict average (FAO-GIEWS, January 2023).

DISPLACEMENT

IDPs living in host communities or displacement sites, 2022



Source: HNO 2023, December 2022.

IDPs As the conflict in the Syrian Arab Republic enters its twelfth year, the country still has the highest IDP population in the world at 6.8 million. Nearly 80 percent of IDP households have been displaced for at least five years and many have experienced multiple displacements (OCHA, February 2023).

The majority (69 percent) live out of camps, many of them in northwestern Aleppo and Idlib (HNO 2023, December 2022) – the governorates hit by the devastating earthquakes in February 2023 – as well as in Rural Damascus.

The remainder – mainly women and children – are in ‘last resort’ sites in the northwest and planned camps and collective centres in the northeast. Some 86 percent of the 1.8 million IDPs in sites in the northwest are also in Idlib and Aleppo governorates and were enduring extremely harsh living conditions even before the earthquakes. An additional 278 400 IDPs live in over 260 sites in the northeast (HNO 2023, December 2022).

Conflict-driven population displacements continued throughout 2022 ranging from 7 000 to 11 000 new displacements per month on average in the northwest. In the northeast, 3 000 new arrivals were reported in camps (HNO 2023, December 2022). The earthquakes led to additional displacement due to destroyed, damaged or unsafe shelter: in the immediate aftermath, more

than 30 000 displacement movements were recorded in the northwest between 6 February and 8 February 2023 (OCHA, February 2023).

Although no specific food security or nutrition assessments are available, surveys indicate that IDPs are vulnerable to both; two-thirds of IDPs across the country report needing access to livelihoods (68 percent) and basic services (67 percent), and more than half (55 percent) need food (HNO 2023, December 2022).

According to community-level assessments conducted by IOM partners, IDPs mentioned the lack of job opportunities and required skills to qualify for jobs as the primary reasons for lacking a stable income (IOM, December 2022).

Those in camps and informal sites reside in tents or makeshift shelters that are often damaged, overcrowded and inadequate during the winter and rainy seasons. In 2022, 30 percent of IDP sites in the northwest flooded, affecting over 540 000 people (HNO 2023, December 2022).

WASH infrastructure is inadequate. According to the WASH sector’s household assessment, only 39 percent of IDP sites are connected to sewage networks, with implications for public health evidenced most recently by a cholera outbreak. In the northwest, only 21 percent of camps are connected to water networks, leaving the majority of IDPs reliant on expensive sources of safe drinking water (HNO 2023, December 2022).

Overburdened host communities and IDPs who have returned to their (often damaged or destroyed) areas of origin (mainly in Idlib and Rural Damascus) face significant challenges meeting their basic needs. Surveys suggest that conditions, whether physical, material, psychosocial or legal safety, are not yet conducive to return anywhere in the country and expressed intention to return to places of origin remains low (HNO 2023, December 2022).



Refugees The Syrian Arab Republic is home to more than 438 000 Palestine refugees. Around 420 000 of them are in need of food assistance. Most (82 percent) live on less than USD 1.90 a day (UNRWA, January 2023).

Of the 35 000 children living in detention-like camps, such as Al-Hol and Al-Roj in the northeast, 12 000 are Syrians, 16 200 are Iraqis and 6 800 are from 60 other nationalities. During 2022, 405 third-country national women and children were repatriated, and 2 367 Iraqis voluntarily returned to Iraq (UNICEF, February 2023).

Since the start of the Syrian conflict in 2011, protection for refugees has seriously deteriorated, with over half of the Palestine refugees in the country displaced by violence at least once, including 120 000 who sought safety in neighbouring countries, mainly Lebanon and Jordan (UNHCR, December 2021; UNWRA, March 2021).

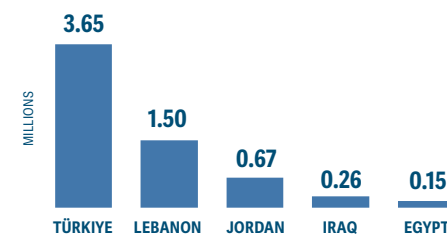
Syrians hosted in neighbouring countries

The protracted nature of the Syrian crisis has led to increased needs and deepening vulnerabilities among most of the 6.8 million Syrian refugees, dispersed across Türkiye, Lebanon, Jordan, Iraq and Egypt, many of whom are now past their twelfth year of displacement (3RP, February 2023).

During 2022, the number of Syrian refugees in host countries remained relatively stable, without major influxes, onward movements or large-scale returns. Between January and November 2022, UNHCR verified the return of around 47 600, with few intending to repatriate within the next 12 months (only 1.7 percent at the beginning of 2022) (3RP, February 2023).

In this context of protracted displacement and limited opportunities for durable solutions, the COVID-19 crisis and war in Ukraine aggravated pre-existing structural challenges and vulnerabilities in all neighbouring host countries. Overstretched resources and capacity of social safety nets in some countries as well as limited accessibility to refugees resulted in refugee families resorting to harmful coping strategies, such as meal reduction, child labour and child marriage (3RP, February 2023).

Numbers of Syrian refugees in neighbouring countries



According to UNHCR, around 814 700 Syrians are registered as refugees in Lebanon. However, according to the Government of Lebanon, an additional 685 300 Syrian refugees are not registered, bringing the total number of Syrian refugees to 1.5 million.

Source: 3RP.

The worsening situation for Syrian refugees has been highlighted by needs assessments conducted in all host countries. For instance, the percentage of the population in IPC Phase 3 or above ranged from 55–60 percent in seven districts of Lebanon (IPC, December 2022).

In Jordan, findings of the Food Security Outcome Monitoring for the second quarter of 2022 showed that 77 percent of refugees living in host communities were food insecure or vulnerable to food insecurity (3RP, February 2023).

In Türkiye, according to the latest Inter-Agency Protection Sector Needs Assessment, 90 percent of refugees could not fully cover their monthly expenses or basic needs, while 94 percent adopted a survival strategy by reducing food consumption and borrowing money (3RP, February 2023). According to government estimates, more than 1.7 million Syrian refugees lived in the ten southern Turkish provinces devastated by the earthquakes in early February 2023 (UNHCR, February 2023).

In Egypt, 46 percent of the Syrian population was estimated to be living under the national poverty line in 2022 with 28.5 percent scoring poor or borderline food consumption. In Iraq, 86 percent of refugees living in camps remained food insecure or vulnerable to food insecurity (3RP, February 2023).

NUTRITION

Number of children under 5 years old with wasting, 2022



544 800 pregnant and lactating women acutely malnourished, 2022

Source: HNO 2023, December 2022.

The number of children suffering from wasting was estimated at about 363 500 in 2022, including 75 700 severely wasted children, representing a significant deterioration compared with 236 380 wasted children in 2021, of whom 51 000 were severely wasted (HNO 2023, December 2022). This followed a significant increase in 2021, when the number of wasted children was about 42 percent higher compared with the estimated levels in 2020 (HNO, 2022).

Maternal malnutrition is concerning, with acute malnutrition prevalence ranging from 11 percent in the northwest and parts of Damascus to 25 percent in the northeast. Overall, about 544 800 pregnant and lactating women suffered from moderate acute malnutrition in 2022, including about 460 100 suffering from anaemia.

An estimated 610 000 children below 5 years of age were stunted in 2022, with stunting prevalence ranging from 25 percent to 28 percent across different geographical areas (HNO 2023, December 2022).

This alarming situation in 2022, which was estimated before the earthquakes hit northwestern areas in early February 2023, is likely to deteriorate further due to the catastrophic impact on the children and families from the most affected areas. The earthquakes left hundreds of thousands in precarious conditions in temporary shelters, often facing freezing temperatures, while they

also caused widespread damage to schools and other essential infrastructure, further jeopardizing the health, nutrition and wellbeing of an estimated 2.5 million children and their families (UNICEF, February 2023).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets High levels of food insecurity, in terms of both quantity and quality, was the major driver of increasing malnutrition rates among children and women in the Syrian Arab Republic. The deteriorating macroeconomic situation and sharp decline in household purchasing power made access to food more difficult (HNO 2023, December 2022).

Inadequate maternal and child-feeding practices Gender-based violence (GBV), exacerbated by poverty and protracted conflict, has been identified as a key driver for the worsening nutrition situation and an important barrier for uptake of optimal Infant and Young Child Feeding (IYCF) practices (HNO 2023, December 2022). In the northwest, only 56 percent of infants under 6 months are exclusively breastfed and fewer than 5 percent of children aged 6–23 months received the Minimum Acceptable Diet (MAD), a decrease from almost 11 percent in 2021 (SMART, 2022).

More than 460 100 pregnant and lactating women and around 721 400 children suffer from anaemia, representing 25 percent of the under-5 population, indicating a ‘moderate’ public health problem (HNO 2023, December 2022).

Limited access to health and nutrition services The Syrian healthcare system is overstretched and fragile. The years of conflict have severely disrupted people’s access to basic services, including healthcare, as well as its availability and quality, which compounds household vulnerabilities and contributes significantly to malnutrition. In 2022, 41 percent of public hospitals and 43 percent of primary health care facilities were either partially functioning or not functioning (HNO 2023, December 2022).

Poor household environment Access to WASH services decreased in 2022, with almost half a million more people in acute need of WASH assistance and an additional 10 percent of subdistricts reported to

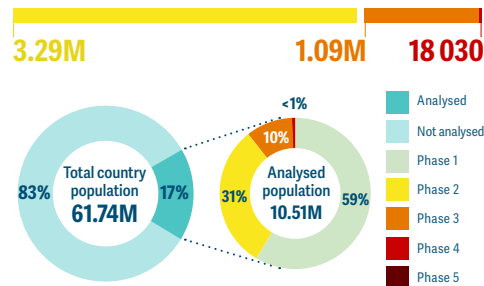
be in severe need. Power shortages across the country have affected the functionality of water systems, including distribution to households (HNO 2023, December 2022). Inadequate rainfall, low water levels in the Euphrates River and mismanagement of water systems also affected the quantity and quality of water. Access to safe water and sanitation is a major concern following the February earthquakes in northwestern areas (UNICEF, February 2023).

High prevalence of infectious diseases The lack of safe water means that up to 52 percent of the population rely on unsafe water sources to meet or complement their needs and contributed to recurrent water-borne and vector-borne disease outbreaks (HNO 2023, December 2022). Not only were there outbreaks of COVID-19, measles, acute watery diarrhoea and leishmaniasis, but the unsafe water also led to a major cholera outbreak in September 2022 – the first one in decades. The outbreak exerted more stress on the fragile healthcare system and exacerbated the existing challenges people face accessing essential healthcare and nutrition services. This may lead to the number of severely wasted children increasing sharply in 2023 (HNO 2023, December 2022).

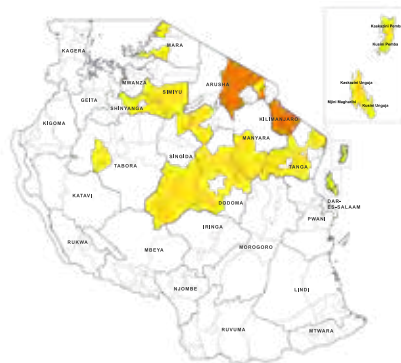
United Republic of Tanzania

ACUTE FOOD INSECURITY PEAK 2022/23

1.11M people or **10%** of the analysed population in IPC Phase 3 or above, October 2022–February 2023



IPC acute food insecurity situation, October 2022–February 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: United Republic of Tanzania IPC TWG, December 2022.

Food crisis overview

Out of the 1.1 million people facing Crisis or worse (IPC Phase 3 or above) in October 2022–February 2023, 964 000 were in 28 analysed districts of the centre, north and northeast Tanzanian mainland and 147 000 in five districts of Zanzibar (IPC, December 2022). This acute food insecurity is attributable to price shocks and dry spells. The highest severity was observed in Longido and Monduli districts, each having 25 percent of their population in IPC Phase 3 and an estimated 18 000 people in Emergency (IPC Phase 4).

Improvement projected for 2023

From March–May 2023, the number of people in IPC Phase 3 was projected to decrease to 990 000, with no populations in IPC Phase 4. Almost a third of the 150 000 people in IPC Phase 3 in Zanzibar were expected to be in the Kaskazini region of Pemba island (IPC, December 2022). Msimu and Masika rains were expected to improve food availability, pasture condition and water availability for the projected period (IPC, December 2022).

Acute food insecurity since 2016

The country has been identified as a food crisis in the GRFC for the past seven years, and as a major food crisis three times – in 2019, 2020 and 2022 (GRFC, April 2022).

Drivers of the crisis, 2022–23

Weather extremes Households in Zanzibar and the mainland were affected by prolonged dry spells and erratic rains in the October–December 2021 Vuli and in the March–May 2022 Masika seasons. This resulted in reduced harvests and insufficient regeneration of rangeland, leading to poor livestock body condition, which diminished their market value, reducing household incomes. Faster-than-usual food stock depletion, low purchasing power, high prices

of food commodities and reduction in casual on-farm labour opportunities on the mainland contributed to food insecurity (IPC, December 2022).

Economic shocks Prices of key food commodities in Zanzibar, which is a net importer, continued to increase from January 2022 due to the poor Vuli harvest. By October 2022, staple food prices had doubled year-on-year, with the average consumer price of maize in October 2022 150 percent higher. Some 90 percent of households in Zanzibar reported spending more than half of their household income on food (IPC, December 2022).

High demand for staple food in neighbouring countries was likely to keep prices high until March 2023 (before green consumption from Msimu harvest) since the country is a key regional exporter (IPC, December 2022).

NUTRITION

Low national prevalence of wasting among children under 5 years (3 percent) masks high regional disparities. The prevalence was higher in Zanzibar at 8.2 percent, and the northern mainland zone at 4.8 percent. In Kaskazini Unguja in Zanzibar, the prevalence reached 10 percent. Stunting levels are 'very high' at about 30 percent, with 9 percent severely stunted (DHS, January 2023).

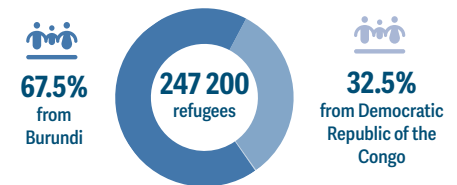
Only 19 percent of children aged 6–23 months met the Minimum Dietary Diversity (MDD) requirements, although 64 percent of infants under 6 months were breastfed (TDHS, January 2023).

In 2020, around 54.7 percent of rural households at national level had unimproved sanitation access, 45.4 percent had access to drinking water and 16.1 percent practised open defecation (JMP, 2020).

Anaemia prevalence among women of reproductive age was 38.9 percent in 2019 (WHO, 2019), which is considered a moderate public health problem, while anaemia among children under 5 years was a severe public health problem at 56.1 percent (WHO, 2019).

DISPLACEMENT

Refugees from neighbouring countries



Source: UNHCR, December 2022.

Refugees Most refugees reside in two large camps in the northwestern Kigoma region, while others are in smaller settlements, rural villages in Kigoma and urban settings. Since 2017, just over 145 000 Burundians have been assisted to return to Burundi (UNHCR, December 2022).

All refugee households in camps rely on WFP assistance as their main source of food (SENS, October 2021). In 2021, the food ration provided was reduced to 68 percent of the recommended 2 100 kilocalories per person per day. While most refugees had acceptable food consumption in camps, 18.5 percent had borderline and 4.6 percent poor. On average, 75.8 percent of households reported using negative coping strategies to access nutritious foods (SENS, October 2021).

While wasting prevalence among refugee households was low, stunting prevalence remained 'very high', averaging 38.1 percent, with 11.8 percent of children under 5 years suffering severe stunting (SENS, October 2021).

Anaemia levels were a severe concern among refugee children under 5 years (42.2 percent) – though it was not clear why since 70–80 percent of them were eating iron-rich foods. However, newly weaned infants tend to be fed maize porridge alone, which may contribute to the high levels of anaemia. On average, 80 percent of infants under 6 months were exclusively breastfed, meeting UNHCR targets (SENS, October 2021).

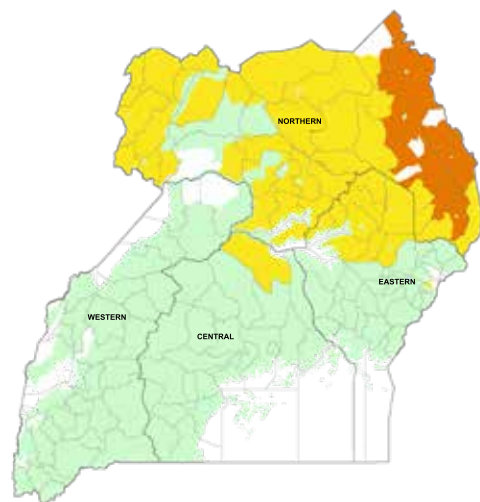
Uganda

ACUTE FOOD INSECURITY PEAK 2022

 **2.3M** people or **5%** of the analysed population in IPC Phase 3 or above, **July–August 2022**

Source: FEWS NET, June 2022.

IPC acute food insecurity situation, July–August 2022




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

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: FEWS NET, June 2022.

Food crisis overview

 At 2.3 million in July–August 2022, the number of people facing Crisis or worse (IPC Phase 3 or above) was among the highest estimated in Uganda over the previous seven years. Consecutive seasons of below-average harvests, compounded by high food prices, were the main drivers of the acute food insecurity situation (FEWS NET, June 2022).

Following consecutive seasons of below-average harvests, high levels of acute food insecurity were especially prevalent in north-eastern Karamoja, Teso subregion, and in northern areas of the country.

Refugees, mainly from South Sudan and the Democratic Republic of the Congo, were among the country's most acutely food-insecure, as limited income and diminished coping capacity exacerbated their vulnerabilities.

Acute food insecurity projected to persist at similar levels in 2023


In the projection period, the situation is not expected to improve at national level, with the estimated number of people facing high levels of acute food insecurity ranging between 2–2.5 million in March–May 2023 (FEWS NET, January 2023), mostly due to below-average rainfall over several cropping areas and economic shocks. Even with humanitarian assistance, increasing numbers of refugees are estimated to face IPC Phase 3 or worse (FEWS NET, June 2022).

Acute food insecurity since 2016

Over the seven years of the GRFC's existence, Uganda has been identified as a major food crisis with over 1 million people in IPC Phase 3 or above. The differing analysis coverage and data sources challenge comparisons over time. The highest number of people in IPC Phase 3 or above in the history of the GRFC was 2.6 million in 2020 at the height of the COVID-19 pandemic, even though the analysis only covered the food insecurity hotspots, accounting for

25 percent of the country population (Karamoja, urban areas, refugee populations and their host communities), while in other years analyses covered at least 87 percent of the population. Since 2020, the number has remained above the 2-million mark, indicating continued fragility of the food security situation. The proportion of the population facing high levels of acute food insecurity in some areas has continued to increase since 2020.

Drivers of the crisis, 2022–23


 **Weather extremes** In bimodal rainfall areas covering most of the country except the Karamoja region, the March–June 2022 first season rains performed poorly, characterized by a 30–40 day delayed onset, erratic distribution and severe precipitation deficits, especially in northern areas. The insufficient rains significantly constrained crop yields, resulting in 30–50 percent below five-year average crop production and a third consecutive season of poor harvests (FEWS NET, June 2022). According to FAO's Agricultural Stress Index, as of mid-June, severe drought conditions affected more than 85 percent of the cropland in the Central, Eastern and Northern districts (FAO-GIEWS, October 2022).

In July, unseasonal torrential rains in the Eastern and Northern areas triggered landslides and flash floods that affected over 12 000 people and resulted in loss of lives, damage to infrastructure and localized crop losses (FAO-GIEWS, October 2022).

Improved late-season rains in December resulted in a partial crop recovery, and the second season harvest performed better than the first but was still estimated to be below average (FEWS NET, December 2022).

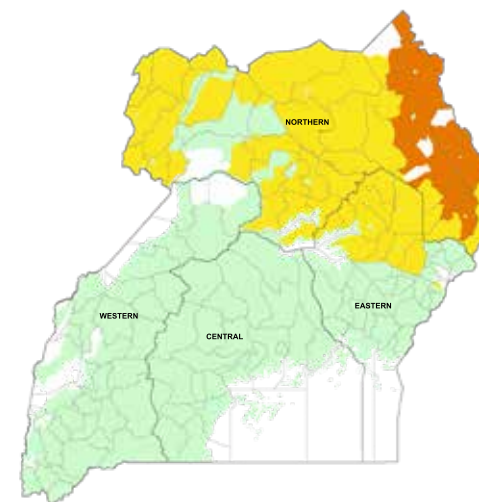
Unfavourable weather conditions prevailed in the unimodal rainfall, agropastoral Karamoja region where the April–September 2022 seasonal rains started late and were significantly below average and erratic, especially between May and July, resulting in prolonged dry spells (FAO-GIEWS, October 2022). Crop production for the late 2022 harvest was estimated to be 50–80 percent below

ACUTE FOOD INSECURITY PROJECTION 2023

 **2.0–2.5M** people or **4–5%** of the analysed population in IPC Phase 3 or above, **February–May 2023**

Source: FEWS NET, February 2023.

Projected IPC acute food insecurity situation, March–May 2023



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

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: FEWS NET, February 2023.

average (FEWS NET, January 2023), marking the fourth consecutive season of reduced harvests in the subregion (FAO-GIEWS, October 2022).

Inadequate pasture regeneration and water-source recharge led to below-average livestock body conditions and productivity both in the cattle corridor area and in the Karamoja region (FEWS NET, July 2022).

Economic shocks Food prices were elevated across the country due to tight market availability and sustained local demand, as households relied more on the market for food due to lower stocks at the household level caused by consecutive poor harvests. Above-average export demand, mainly from Kenya where crop production was also reduced, and high fuel prices, underpinned by the ripple effects of the war in Ukraine, exerted additional pressure on food prices (FEWS NET, August 2022; FAO-GIEWS, October 2022).

The annual inflation rate, estimated at 10 percent in December 2022, has been increasing since early 2022, underpinned by increasing food and fuel prices. Food inflation was estimated in December 2022 at 23 percent, compared with 5.3 percent in January. In December 2022, average national prices of beans, matooke cooking bananas, cassava flour and maize flour were between 23 percent and 84 percent higher on a yearly basis (Uganda Bureau of Statistics, December 2022).

In Karamoja, incomes were below average for most households due to the below-normal crop production season, ongoing insecurity and rising inflation, all of which constrained typical livelihood activities and reduced purchasing power. Firewood collection and charcoal production – which are typically used by poor households to fill income gaps during the lean season – were constrained in some areas due to insecurity, and prices of charcoal and firewood were below average in many markets, further constraining incomes (FEWS NET, August 2022).

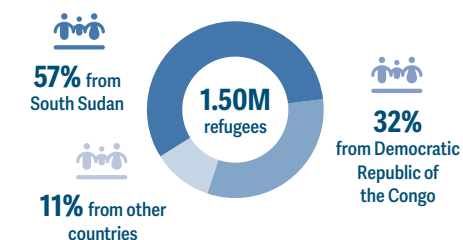
Conflict/insecurity A volatile security situation in North Kivu and Ituri provinces of the Democratic Republic of the Congo and in South Sudan resulted in over 144 600 new refugees and asylum-seekers arriving in the country during 2022 (UNHCR, March 2023), putting a strain on already limited

resources for humanitarian assistance. Concurrently, WFP cut already partial food rations to 60–70% of the food basket of 2100 kilocalories per person per day, which forced many refugees to resort increasingly to negative coping strategies, including child labour and early marriage (ECHO, January 2023).

Localized cattle raid-related conflict as well as intercommunal clashes over resources and sporadic attacks by armed gunmen in Karamoja spread to Teso subregion, causing population displacement and the establishment of mini IDP camps in Kapelebyong district (IPC, November 2022). Insecurity in Karamoja constrained households' access to farmlands and grazing areas, resulting in reduced crop and livestock production (FEWS NET, June 2022).

DISPLACEMENT

Uganda hosts the largest refugee population in Africa



Source: UNHCR, December 2022, UNHCR January 2023.

Refugees Uganda hosts 1.5 million refugees, the largest refugee population in Africa, mainly from South Sudan and the Democratic Republic of Congo. The majority live in 13 settlements in the West Nile subregion, and southern and midwestern regions, while 8 percent live in urban areas, particularly Kampala (UNHCR, December 2022).

Refugees in Uganda are dependent on food aid assistance, but rations were cut due to underfunding in 2021. According to the WFP/UNHCR Food Security and Nutrition Assessment 2022 in 13 refugee settlements as well as host districts, refugees living without food assistance, surviving by themselves in Kampala, had

better nutrition status than those in the settlements (UNHCR and WFP, June 2022).

According to an IPC acute malnutrition analysis in refugee settlements, between February 2022–January 2023, an estimated 36 600 children aged 6–59 months suffered wasting across all refugee settlements, with 8 600 severely wasted. Additionally, 4 200 pregnant and lactating women among the refugee population were acutely malnourished (IPC, November 2022).

During February–July 2022, Adjumani – the largest settlement, hosting around 237 800 refugees – was classified as in a Serious situation (IPC AMN Phase 3), with a wasting prevalence of 10.5 percent. Six others were classified as in Alert (IPC AMN Phase 2), and the rest in Acceptable (IPC AMN Phase 1) (IPC, November 2022).

The stunting prevalence ranged from 35–48 percent ('very high') in five settlements in western districts, and was 'high' in three settlements in the West Nile subregion (UNHCR and WFP, June 2022).

Drivers of undernutrition for refugees

Inadequate maternal and child-feeding practices Only 8.5 percent of children aged 6–23 months received a Minimum Acceptable Diet (MAD) across the refugee settlements, based on results from the December 2020 Food Security and Nutrition Assessment (FSNA).

Exclusive breastfeeding during the first 6 months reduced from 62 percent in 2021 to 60 percent, while mixed feeding practices for infants were rampant among refugee mothers with premature introduction of solid, semi-solid and soft foods (IPC, November 2022).

High levels of anaemia among children aged 6–59 months are a major public health concern at 45 percent. The 'moderate' anaemia prevalence among pregnant and lactating women (32 percent) is a contributing factor to low birth weight infants, who are then more prone to acute malnutrition. Only 28.2 percent of the women in refugee settlements were able to consume five or more food groups in a day (IPC, November 2022).

High prevalence of infectious diseases Malaria and acute respiratory infection cases are high in refugee settlements and in host communities, which places a disease burden on the children and strains the health services, contributing to malnutrition. From the most recent FSNA, 76.3 percent of children in the settlements and 77.1 percent of those in host communities were found to have tested positive for malaria in the two weeks preceding the survey (IPC, November 2022).

Food insecurity and lack of access to healthy diets Access to a nutritious, iron-rich diet is a challenge for refugees living in settlements. Most households do not have enough food from own production, and the high prices in local markets significantly limit their ability to meet the Minimum Expenditure Basket. According to WFP CARI, about 49 percent of the refugee population faced moderate acute food insecurity while another 6 percent faced severe food insecurity in 2022 (IPC, November 2022).

Poor household environment Although 94 percent of refugee households could access safe water sources, the per capita water use is still low, with only 33 percent able to use 20 or more litres of water per person per day. In almost 63 percent of refugee households, water for drinking is not treated before use (IPC, November 2022).

NUTRITION

Number of children under 5 years old with wasting, February 2022–January 2023



22 300 pregnant and lactating women acutely malnourished, 2022

Source: Uganda IPC TWG, May and November 2022.

According to IPC analyses in Karamoja, refugee settlements and refugee-hosting districts, around 196 000 children under 5 years old were suffering from wasting in 2022. Of them, around 36 600 were in refugee settlements and 67 900 in 12 refugee-hosting districts (IPC, November 2022). In Karamoja region, the number of children with wasting increased from 56 600 to 91 600 between the 2021 and 2022 lean seasons. The number of children with severe wasting in Karamoja more than doubled from 10 300 to 23 000 (IPC July 2021; IPC, May 2022).

In February–July 2022, two of nine districts in Karamoja were classified as in Critical (IPC AMN Phase 4) – up from one during the 2021 lean season – with the wasting prevalence among children under 5 years old reaching 22 percent in Moroto and 19.8 percent in Kaabong. Four districts were classified as in Serious (IPC AMN Phase 3) with a wasting prevalence of around 14 percent (IPC May 2022). From August 2022–January 2023, wasting was projected to remain at similar levels (IPC May 2022).

Available data show no improvement in wasting among children in Karamoja in the last eight years. From 2015–2019, the wasting levels were 'high' each year (10–<15 percent). They improved to 9.7 percent in

2020 before increasing again to 10.7 percent in 2021 and then to 13.1 percent in 2022 (IPC, May 2022).

According to UNICEF, 2.4 million children are stunted (UNICEF, 2022).

Drivers of undernutrition in Karamoja

Food insecurity and lack of access to healthy diets Of the nine districts analysed, six were of concern in terms of both acute food insecurity and acute malnutrition, namely Amudat, Kaabong, Kotido, Moroto, Nabilatuk and Napak, with at least a classification of Crisis (IPC Phase 3) for acute food insecurity and Alert (IPC AMN Phase 2) for acute malnutrition. Overall, there was consistency and convergence between results from the analyses, demonstrating the link between the two dimensions (IPC, May 2022).

Inadequate maternal and child-feeding practices As women are the main breadwinners in Karamoja, high workloads and high levels of maternal alcoholism were leading causes of 'Extremely Critical' child-feeding practices (IPC, May 2022).

According to results from the FSNA from February–March 2022, just 1.8 percent of 6–23-month-old children received the MAD across Karamoja, ranging from 0 percent in Napak and Nakapiripirit districts to 8.6 percent in Amudat district. The remaining districts had fewer than 5 percent of children able to meet the minimum dietary requirements for growth and development (IPC, May 2022).

In 2021, at the national level, 10 percent of 6–23-month-old children received the MAD, which is considered 'Critical' (LSMS 2019–20). Exclusive breastfeeding rates for children aged 0–5 months were at an 'Alert' level of 61 percent in May 2022 in Karamoja region.

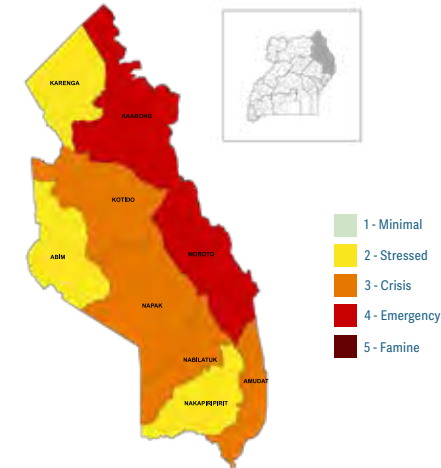
In 2022, anaemia prevalence for women of reproductive age was estimated nationally at 32.8 percent, a 'moderate' public health problem. In Karamoja region, 37 percent (a reduction from the 59 percent recorded in 2021 but still considered a 'severe' public health problem (WHO 2019)) of children aged under 5 were estimated to be anaemic, with the highest prevalence of children suffering from anaemia in Napak (52.5 percent), Amudat (51.5 percent) and Nakapiripirit (45.7 percent) districts (IPC, May 2022).

Only about 19 percent of women were able to consume an adequately diverse diet in Karamoja. The most affected districts in this regard were Napak (3.2 percent), Moroto (15.4 percent), Abim (11.5 percent) and Karenga (15 percent) (IPC, May 2022).

Poor household environment Low water availability at household level and poor access to improved sanitation facilities led to poor hygiene practices that exposed children to diarrhoea, dysentery and skin infections. Although 92 percent of households had access to safe water sources (FSNA, 2022), the per capita water use in Karamoja was found to be below the recommended WHO standard of 20 litres per person per day. Only 19 percent of households (30 percent in 2021) met this minimum water-use standard with average per capita use being 13.2 litres per person per day, most likely due to long distances and high queuing time, coupled with heavy female workload (IPC, May 2022).

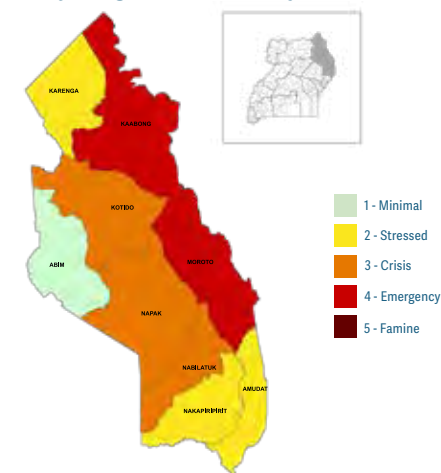
In 2022, access to improved sanitation facilities was still very low across the region. Open defecation stood at 56 percent. The worst-performing districts were Amudat, Moroto, Napak and Kotido, where open defecation ranged from 66–80 percent (IPC, May 2022).

IPC acute malnutrition situation in Karamoja, February–July 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Uganda IPC TWG, May 2022.

Projected IPC acute malnutrition situation in Karamoja, August 2022–January 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Uganda IPC TWG, May 2022.


Ukraine

ACUTE FOOD INSECURITY PEAK 2022

 **25%** of the total population faced moderate or severe acute food insecurity in 2022

Source: REACH, February 2023.


Food crisis overview

 Prior to the start of the war in February 2022, acute food insecurity had been limited to the Luhanska and Donetsk oblasts for more than eight years due to conflict, high food prices and limited access to markets and basic services, as well as loss/lack of livelihood opportunities (GRFC, May 2022).

With the escalation and expansion of the conflict to full-scale war, 23 percent of the population experienced moderate levels of acute food insecurity and 2 percent severe levels of acute food insecurity, according to the CARI categorization. See *Technical Notes*. The worst outcomes were recorded in the southern (31 percent) and eastern (29 percent) oblasts, while the lowest levels were in central ones (19 percent) (REACH, February 2023).

Ukraine's agrifood sector suffered massive losses from the war, which have had a profound impact on crop and livestock activities within the country, as well as on global markets as Ukraine was a leading producer and exporter of agricultural commodities (FAO, December 2022).

Drivers of the crisis, 2022–23

 **Conflict/insecurity** Production of cereals in 2022 was estimated to be about 30 percent lower than the five-year average, due to active fighting in parts of the country as well as lack of labour, high production costs and low farm gate prices. Remnants of the war in fields, especially mines, and constrained fertilizing and harvesting activities have

meant that large cropped areas were left unharvested and have also hampered planting of 2023 crops (FAO-GIEWS, December 2022).

Active fighting and the unprecedented scale of attacks on critical civilian infrastructure, especially energy infrastructure, disrupted public services and constrained farmers' abilities to store and transport crops.

The World Bank estimated that, as of June 2022, the war-induced damage to the agriculture sector within Ukraine was USD 2.2 billion, with the aggregate losses totalling USD 28.3 billion. These damages included the partial or full destruction of machinery and equipment, storage facilities, livestock and perennial crops, extensive losses of inputs and outputs, as well as large-scale damages to agricultural land (WB, August 2022). By February 2023, the damage to the sector was estimated at

USD 8.8 billion, and losses at USD 31.4 billion (WB, 2023).

Food availability at the national level was adequate in 2022 despite crop production being curtailed by war-induced damages (FAO-GIEWS, December 2022). Humanitarian access was highly constrained in parts of Ukraine, especially in frontline oblasts, due to the active fighting and shelling, as well as damage to infrastructure around the country (ACAPS, December 2022).

More than one in four respondents in a 2022 survey in rural areas had reduced or ceased agricultural production, with one in every three respondents having done so in the frontline oblasts (FAO, December 2022). There was also an estimated 40 percent reduction in the area planted with winter cereals, which could impact food availability throughout 2023 (FAO-GIEWS, December 2022).

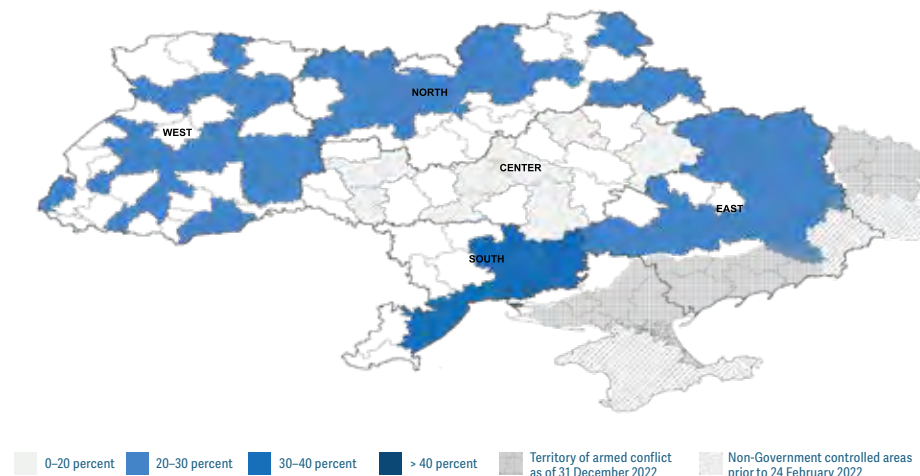


Economic shocks The war has had a severe impact on Ukraine's economy, challenging food access for households across the country (FAO-GIEWS, December 2022).

Before February 2022, Ukraine had already been experiencing elevated levels of food price inflation resulting from the conflict in the eastern parts of the country. In February 2022, annual food price inflation stood at 14.3 percent, but it spiked dramatically with the start of the war, rising to 35.1 percent by November 2022 (WFP, March 2023).

Increased energy costs amid high unemployment and limited livelihood opportunities reduced households' purchasing power (FAO-GIEWS, December 2022). The high costs of inputs and low farm gate prices hampered crop production, especially for rural households and small producers who are significant contributors to Ukraine's national crop production (HNO, January 2023).

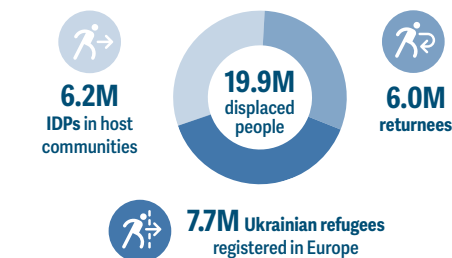
Share of the population facing moderate or severe acute food insecurity, 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: REACH, February 2023.

DISPLACEMENT

Number of displaced people as a result of the war in Ukraine



Source: HNO, December 2022.

The war in Ukraine has led to unprecedented movements of people within the country and across its borders into Europe. As of October 2022, there were an estimated 7.7 million registered Ukrainian refugees in Europe.

The number of internally displaced people fluctuated throughout the year, with an estimated 6.5 million people being displaced internally within the first few weeks of the full-scale war. This eventually peaked at 8 million in early May 2022, and since then the number has gradually decreased to around 6.2 million as of September 2022 (HNO, December 2022).

The origin of IDPs also shifted in conjunction with where active fighting took place. At the beginning of the war in Ukraine, 49 percent of IDPs were from Kyiv and northern regions, but that changed from April 2022 when the Government of Ukraine regained control of these areas. The number of IDPs from the eastern oblasts steadily increased from June 2022 (HNO, December 2022).

Compared with the general population, a higher share of IDP households reported adoption of negative coping strategies in response to high prices and limited livelihood opportunities, including reduced food consumption (69 percent, compared with 55 percent of non-IDPs, including returnees) and savings spent (73 percent, compared with 60 percent of non-IDPs, including returnees) (HNO, December 2022).

From the start of the war, refugees' priority needs have remained constant: cash and financial support (67 percent), heating appliances (29 percent), solid fuel (23 percent) and food (22 percent). This is unsurprising given the widespread and continued disruption to utilities as well as respondents' employment of coping strategies to offset the financial exigencies of displacement. Between early November and the end of December 2022, 52 percent of IDP respondents reported actively reducing food consumption, and 63 percent reported reducing usage of gas, electricity and solid fuel due to financial concerns and disruption of supply chains (IOM, December 2022).

NUTRITION



No recent nutrition data are available for Ukraine, but the factors that underlie wasting have been exacerbated by the war.

Drivers of undernutrition



Food insecurity and lack of access to healthy diets

A remote emergency assessment on food security conducted from March–April 2022 showed that 21 percent of households in Ukraine had a borderline or poor food consumption score. The Luhanska oblast had the highest share of households with inadequate food consumption (47 percent), followed by the Donetska (35 percent) and Khersonska (30 percent) oblasts. In those areas, households principally resorted to consuming less expensive foods and/or reducing portion sizes to stretch out the food that was available to them. IDP households and those headed by women were more likely to have a borderline or poor food consumption score (WFP, May 2022). The assessment took place early in the war, before the active fighting retreated eastwards. Thereafter, following the retreat, in parts of the country not affected by active fighting, economic activities resumed.



Limited access to health and nutrition services

The war in Ukraine has put severe pressure on the country's healthcare system. The Ministry of Health of Ukraine reported that 955 health facilities have been damaged and another 144 were destroyed, with the highest numbers recorded in the Kharkivska and Donetska oblasts (HNO, December 2022). This has caused vital healthcare services to be interrupted. Ukrainians' access to medicines, and to health and social services has also been indirectly affected by lack of and rising cost of medicines in pharmacies, issues with transport, and lack of financial resources to pay out-of-pocket expenses (HNO, December 2022). As a result, people's health and nutrition have been negatively impacted.



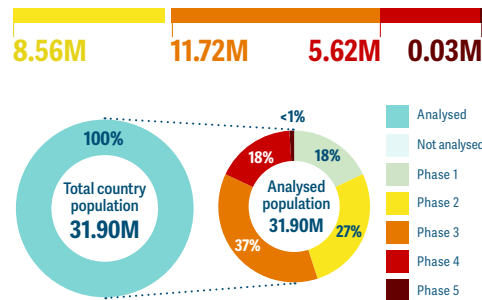
Poor household environment

Damages to water supply and wastewater infrastructure led to shortages of drinking water and breakdowns in centralized heating, sewage and municipal services. This has placed thousands of people at risk of contracting illnesses, such as acute watery diarrhoea (HNO, December 2022). In the southern and eastern oblasts, access to safe water was also limited, as households are heavily dependent on energy for pumping their drinking water supply. In other oblasts, the change in living conditions and constraints on access to WASH services and products created new risks related to water quality and storage, and food and personal hygiene (HNO, December 2022).

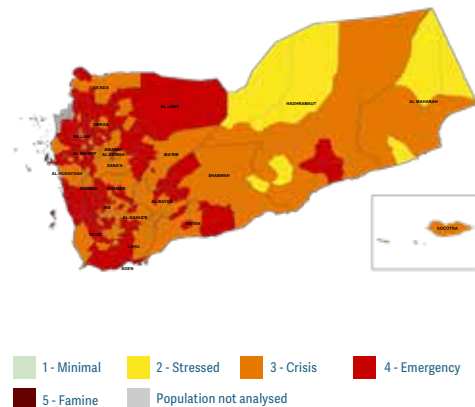
Yemen

ACUTE FOOD INSECURITY PEAK 2022

17.37M people or **55%** of the analysed population in IPC Phase 3 or above, January–May 2022



IPC acute food insecurity situation, January–May 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Yemen, IPC TWG, March 2022.

Food crisis overview

During the first five months of 2022, over 1 million additional people were in Crisis or worse (IPC Phase 3 or above) compared with the same period in 2021, bringing the total to over 17 million people or 55 percent of the population.

Around 31 000 people were in Catastrophe (IPC Phase 5) in Abs, Aslem and Al Maghrabah districts in Hajjah governorate, and 5.6 million people were in Emergency (IPC Phase 4), representing 18 percent of the population (IPC, March 2022).

The situation is driven by nine years of protracted armed conflict and ensuing economic collapse aggravated in 2022 by the ripple effects of the war in Ukraine, and the inconsistent humanitarian assistance (OCHA, December 2022). The increase also reflects a rise by almost 2 million people in the country population estimates and thus the population analysed between January–June 2021 and January–May 2022.

At least 65 percent of the population was in IPC Phase 3 or above in Al-Hudaydah, Raymah, Hajjah,

Sa'ada and Al-Jawf governorates, while population-dense governorates facing conflict and increased displacement, such as Al-Hudaydah, Hajjah, Ta'izz and Sana'a City, hosted about half of the total population in these phases. Nearly half of all districts were classified in Emergency (IPC Phase 4) (IPC, March 2022).

Acute food insecurity since 2016

For nearly a decade – even before the conflict – more than half of the population has consistently been in IPC Phase 3 or above, mainly driven by structural instability aggravated by human-induced factors and weather extremes (IPC, November 2022).

Yemen has been listed as a 'major' food crisis in all seven editions of the GRFC, and from 2016 to 2019, it was the country with the highest numbers of people in IPC Phase 3 or above in the report.

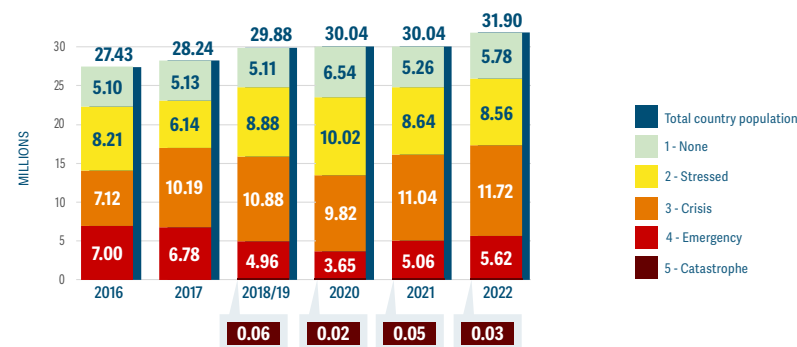
It remains among the five worst food crises in the world, with a consistent increase in the numbers of people in IPC Phase 3 or above since 2020. It is also one of the very few countries with populations in Catastrophe

(IPC Phase 5) every year since 2018, with the highest figure being reported in December 2018–January 2019 (64 000 people).

Drivers of the crisis, 2022–23

Conflict/insecurity The Global Peace Index 2022 ranked Yemen as the second least peaceful country in the world, after Afghanistan, and the least peaceful country in the Middle East and North Africa (MENA) region for the second consecutive year (IEP, July 2022). The conflict between the Houthis and the Internationally Recognized Government escalated during the first quarter of 2022, as new operations and renewed violence occurred in the Shabwah, Ma'rib, Hajjah and Sana'a governorates (ACLED, August 2022). The parties to the conflict agreed to a United Nations-mediated truce on 2 April, 2022 that allowed for a halt in hostilities, entry of fuel ships into the Al-Hudaydah ports, resumption of commercial flights from and to Sana'a airport, and the reopening of closed roads (OSESFY, April 2022). The truce was extended twice through 2 October, 2022.

Numbers of people by phases of acute food insecurity, 2016–2022



Source: Yemen IPC TWG.

Populations in Catastrophe

In February 2022, the Yemen IPC Technical Working Group (TWG) had projected that 161 000 people would be in Catastrophe (IPC Phase 5) in the second half of the year and the total number of people in IPC Phase 3 or above would reach 19 million. Furthermore, given the acute food insecurity and acute malnutrition levels of the time in a few districts of Hajjah governorate, a Risk of Famine was forecast under the worst-case scenario. However, the scenario was averted due to an improvement in the security situation in conjunction with humanitarian assistance. The analysis conducted in August 2022 found no populations in IPC Phase 5 for the rest of the year (IPC, November 2022).

Despite the six-month truce, decreased household purchasing power, extremely limited livelihood options and lack of public services and infrastructure continued to drive very high levels of acute food insecurity (FEWS NET, October 2022). Funding shortages, climate-induced weather events and rising costs of food and fuel constrained humanitarian operations (OCHA, December 2022).

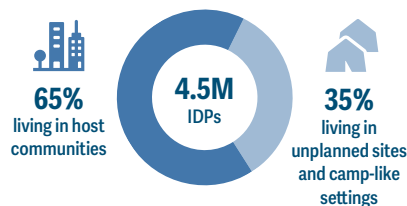
Economic shocks Yemen imports over 85 percent of its food requirements, making the country extremely vulnerable to global market fluctuations, import restrictions and currency fluctuations (FAO, October 2022). In 2022, already elevated domestic food prices rose higher due to the continued depreciation of the local currency (despite a short rebound in April 2022) and high global commodity prices partially supported by uncertainty related to export prospects from Ukraine (OCHA, December 2022). Traditional sources of foreign currency, such as remittances, oil and gas exports and bilateral funding streams, remained low (OCHA, December 2022).

These high prices compounded the erosion of livelihood opportunities and incomes from the previous nine years of conflict, which led to more households taking on higher levels of debt to cover basic needs (IPC, March 2022).

Weather extremes Although landscape and natural conditions constrain agricultural production, agriculture remains a crucial source of rural livelihoods. Moderate-to-severe drought conditions with unprecedented temperature rises during the first half of the year followed by heavy rainfall in August 2022 affected all cropped regions (IPC, November 2022). Out of the 76 percent of crop producers who faced difficulties during production, the majority cited insufficient irrigation or rainwater. Of those who planted crops, 37 percent reported a decrease in the area planted, and 55 percent expected a reduced harvest compared with a typical year. In Aden, Hajjah, Al-Hudaydah, Al-Jawf, Ibb, Ma'rib and Sana'a, the reduction in the area planted was higher than the national average (FAO, August 2022).

DISPLACEMENT

IDP numbers continued to increase in 2022



Source: HNO 2023, December 2022.

IDPs By the end of 2022, Yemen had about 4.5 million IDPs, representing the sixth largest internal displacement crisis in the world, with most of them being displaced for over a year and many of them more than once (HNO 2023, December 2023). About 1.6 million IDPs were living in 2 431 camp-like hosting sites across the country, and the remaining 2.9 million were living in host communities.

Competition over access to and use of land and water resources in and around these sites resulted in disputes between displaced people and host communities, hampering the provision of shelter, health and WASH services, as well as humanitarian assistance (HNO 2023, December 2022). Levels of wasting were higher among IDP children (12.3 percent) than among host community children (9.8 percent) (SMART 2022).

More than two-thirds of IDPs were living in rental accommodation or hosting arrangements, most without rental agreements – exposing them to arbitrary price increases. Eighty-two percent of displaced people reported serious difficulties in paying rent, leading to a drastic increase in evictions in 2022 (HNO 2023, December 2022).

While conflict-related displacement reduced significantly between April and October, disaster displacement increased, especially in July and August due to flooding during the rainy season. In 2022, IOM recorded 60 810 new IDPs. Around 49 percent of them were driven from their homes by combat and shelling,

36 percent by general insecurity conditions, 13 percent for economic reasons including unemployment and salary cuts, and 3 percent by rain and flooding. Ma'rib continued to receive more IDPs than any other governorate in 2022 (29 percent) – mainly from other governorates – although it received a lower percentage than in 2021 (50 percent). Both Ma'rib and the state of Al-Hudaydah reported multiple displacements as more common than new displacements (IOM DTM, December 2022).

At the country level, the self-reported priority needs among IDPs were shelter (41 percent), food (24 percent) and financial assistance (23 percent). However, in Al-Hudaydah the priority need was food assistance (35 percent), followed by shelter (26 percent) and financial support (20 percent).

For returning IDP households, food was the highest cited priority need, reaching 96 percent in Ma'rib, 92 percent in Al-Hudaydah and 86 percent in Aden (IOM DTM, December 2022).

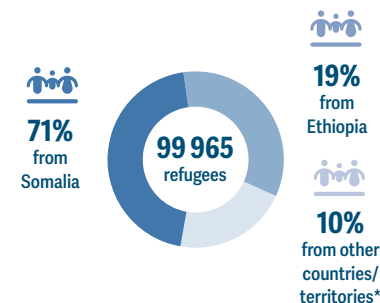
Most IDPs living in displaced sites belonged to the marginalized Muhamasheen community, who have been systematically excluded from accessing formal land and housing markets (UNHCR, February 2023).

In 2023, 378 000 people are expected to be newly displaced due to fighting, weather extremes and increased pressure on informal settlements, with children accounting for over half of them. Rental costs could rise as demand increases (HNO 2023, December 2022).

Refugees Yemen hosts almost 100 000 refugees, mainly from Somalia, living in overcrowded spaces without access to water or sanitation, particularly in urban areas. Nearly 28 000 people arrived in 2022 and 63 000 are expected to arrive in 2023. The collapse of the economy and public services, and legal barriers to formal employment, have severely affected refugees' capacity to become self-reliant. Informal sector work has plummeted, with the equally destitute Yemeni population competing for a limited number of jobs (HNO 2023, December 2022).

Community support structures have been fragmented to such an extent that non-Yemenis can no longer rely on the assistance and goodwill of host communities

Refugees are mainly from Somalia



* Eritrea, Iraq, Palestine, the Sudan and the Syrian Arab Republic. Source: HNO 2023, December 2022.

that have long supported them. They are often subject to high levels of stigma and discrimination and excluded from local systems of support and community-based protection mechanisms. Migrants, refugees and asylum-seekers frequently find themselves without access to essentials required for survival, including food, water, healthcare, shelter or cash (HNO 2023, December 2022).

NUTRITION

Number of children under 5 years old with wasting, 2023



1.30M pregnant and lactating women acutely malnourished, 2022

Source: IPC TWG, November 2022.

The prevalence of acute malnutrition among children under five years of age and women in Yemen remained among the highest in the world in 2022. The number of children with wasting under 5 years was 2.2 million, including 0.54 million who suffered from severe wasting (IPC, November 2022).

The acute malnutrition analysis from November 2022 provided an update of a previous IPC assessment in March 2022, indicating a worsening nutrition situation in 17 districts compared with the March projection with 26 districts classified as in Critical (IPC AMN Phase 4), 83 in Serious (IPC AMN Phase 3) and 16 in Alert (IPC AMN Phase 2) (IPC, November 2022).

Prior to the IPC analyses in 2022, a SMART survey conducted in 2021 concluded that the wasting prevalence for children under age 5 was 10 percent – although the survey was not conducted during the peak acute malnutrition season (July–October) when it was likely to be higher. Children aged 6–11 months had the highest prevalence, at over 15 percent, and boys were significantly more likely to suffer wasting than girls (11.1 percent versus 8.6 percent). At the governorate level, Al-Hudaydah had ‘very high’ severity at 18.5 percent, while seven other governorates had ‘high’ levels (10–<15 percent), namely Abyan, Hajjah, Socotra, Ta’izz,

Hadhramaut, Shabwah and Aden. All other governorates are classified as in ‘medium’ severity. The prevalence of severe wasting was nearly 1.5 percent, and was above the Emergency threshold in Aden (2.5 percent) and Al-Hudaydah (2.4 percent) governorates (SMART 2021).

The survey highlighted ‘very high’ levels of stunting across the country, with 45 percent of children under the age of 5 stunted. The prevalence was 30 percent or higher in 18 out of the 21 governorates surveyed. Stunting was shown to be more prevalent among boys (48 percent) than girls (42 percent), a trend also seen in wasting (SMART 2021).

Drivers of undernutrition

Food insecurity and lack of access to healthy diets Access to an adequate amount of healthy and diverse food has been severely curtailed by the economic deterioration, displacements and insecurity, especially in conflict-affected areas (HNO, December 2022). The situation is further exacerbated by the instability of humanitarian assistance (IPC, March 2022).

In the second quarter of 2022, households reported more difficulty coping with food shortages than at any other point over the previous three years. Food consumption gaps were concentrated in seven governorates: Al-Hudaydah, Hajjah, Ibb, Amran, Abyan, Ta’izz and Lahij, with particularly high food consumption gaps in Ta’izz and Lahij (HNO, December 2022).

Limited access to health and nutrition services Access to health facilities has remained severely restricted, which meant that approximately 42 percent of the population had to travel more than an hour to reach the nearest fully or partially functional public hospital. Almost half of health facilities are either partially functional or non-functional due to a lack of staff, funding, basic equipment and medicines, as well as due to power shortages. Another 11 percent of health facilities were either fully or partially damaged due to the conflict (HNO, December 2022).

In addition to rising prices of medicines and transportation, currency depreciation and lack of disposable income have reduced access to health services and contributed to people’s increased vulnerability to disease. For instance, immunization

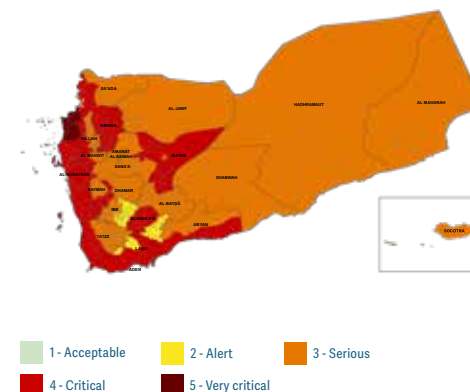
coverage has deteriorated, with 28 percent of children under 12 months of age missing routine vaccinations, which made Yemen the country in the MENA region with the highest number of children aged under 5 who aren’t vaccinated or are undervaccinated for the third consecutive year (HNO, December 2022).

Poor household environment An underlying driver of acute malnutrition was the lack of access to appropriate WASH services, which caused vulnerable households to use unprotected and unsafe water sources.

The 2021 SMART survey showed that only 24 percent of households in Yemen had at least basic drinking water services. Others, mainly in urban areas, were forced to rely more on water-trucking services since water demand has increased beyond water service capacity due to the influx of displaced persons (HNO, December 2022). Climate change also drove increased water demand, as inadequate rainfall led households that depend on rainwater harvesting to use unprotected water sources.

Inadequate maternal and child-feeding practices The SMART survey showed only 11.5 percent of children aged 6–23 months met their minimum dietary diversity requirements, with the lowest prevalence in Shabwah (3 percent), Al-Jawf (4.2 percent), and Al-Baydā (5.8 percent). Furthermore, the percentage of children under 6 months old who were exclusively breastfed declined to 20 percent.

IPC acute malnutrition situation, October–December 2022

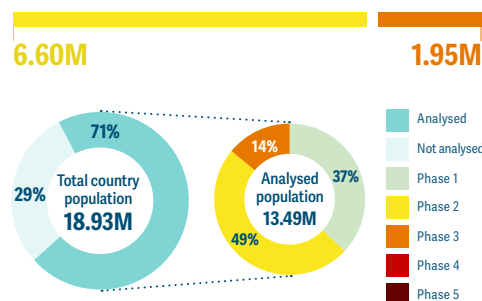


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Source: Yemen, IPC TWG, November 2022.

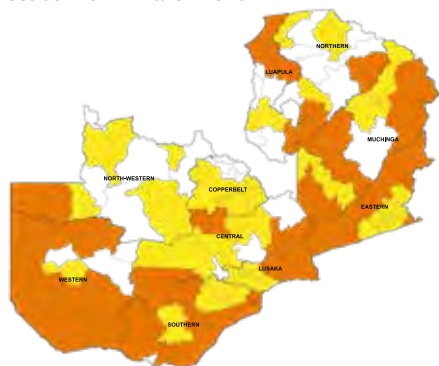
Zambia

ACUTE FOOD INSECURITY PEAK 2022/23

1.95M people or **14%** of the analysed population in IPC Phase 3 or above, **October 2022–March 2023**



IPC acute food insecurity situation, October 2022–March 2023



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Zambia IPC TWG, August 2022.

Food crisis overview

The share of the analysed population in Crisis or worse (IPC Phase 3 or above) decreased from 25 percent during the 2021 peak in February–March to 14 percent during October 2022–March 2023. The severity of acute food insecurity also decreased: no populations were in Emergency (IPC Phase 4) compared with over 230 000 people in February–March 2021.

Shocks – such as prolonged dry spells, flooding, reduced incomes, pests, and high input and food prices linked to the below-average 2022 harvest and war in Ukraine – continued to drive acute food insecurity. Households' reliance on food markets increased and around 1.95 million people were estimated to be in Crisis (IPC Phase 3) in October 2022–March 2023. This 13 percent increase since February–March 2021 reflects a doubling of the analysed population. Out of the 91 districts covered in the October 2022–March 2023 analysis, 48 were classified in IPC Phase 3 (IPC, August 2022).

Acute food insecurity since 2016

For each of the seven editions of the GRFC, Zambia has been classified as a food crisis and defined as major crisis for the last five, with at least 1 million people in IPC Phase 3 or above largely due to the impact of weather extremes. The analysis coverage differed substantially from year to year. However, the number of people in IPC Phase 3 or above in 2022 was lower than in 2019 and 2020, when a lower share of the population was analysed, suggesting an improvement in the situation.

Drivers of the crisis, 2022–23

Weather extremes The 2022 cereal harvest was below average due to poor distribution of rains. Flooding waterlogged crops in parts of the Central, Eastern, Muchinga, Copperbelt, Luapula, Lusaka, Southern and Western provinces and rainfall deficits led to areas bordering Zimbabwe, Malawi and

Mozambique experiencing severe drought conditions. Due to the La Niña event, rainfall amounts were forecast to be above average with the possibility of flooding between December 2022 and March 2023, while in northeastern areas, below-average precipitation until January 2023 was expected to cause delays in planting (FAO-GIEWS, December 2022; IPC, August 2022).

Crop pests Almost all provinces experienced fall armyworm infestations that devastated field crops in affected districts and were a contributing factor to the below-average harvest (IPC, August 2022).

Economic shocks Zambia's economic growth has stalled in recent years under the strain of the COVID-19 pandemic, recurrent weather shocks and falling prices of key export commodities (WFP, January 2023). At the start of the October 2022 lean season, the national average price of maize was about 30 percent higher year-on-year, underpinned by the low harvest and compounded by the war in Ukraine (FAO-GIEWS, December 2022). The offer of higher prices for maize in Malawi and the Democratic Republic of the Congo put upward pressure on prices in areas bordering these countries (IPC, August 2022).

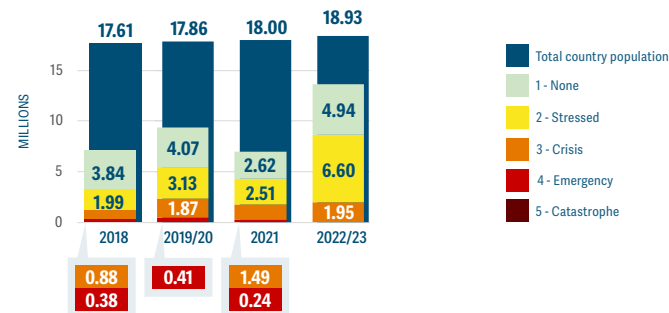
DISPLACEMENT

Refugees, asylum-seekers and returnees Zambia hosts around 93 500 refugees, asylum-seekers and returnees with nearly 12 000 new refugees registered in 2022 from the Democratic Republic of the Congo, Rwanda, Burundi and Somalia. The majority are from the Democratic Republic of the Congo and the Great Lakes region and arrived between 2001 and 2020.

By the end of 2022, about 65 500 refugees and asylum-seekers lived in Mantapala, Meheba and Mayukwayukwa refugee settlements – about 70 percent of the refugee population – with the remainder in urban centres including Lusaka (UNHCR, February 2023). Insufficient funding in 2022 posed a challenge, particularly in Mantapala, where WFP reduced the food ration/cash transfers by up to 37 percent (UNHCR, February 2023). From 2021–22, 21 501 individuals voluntarily repatriated from Mantapala settlement to southeastern areas in the Democratic Republic of the Congo (UNHCR, January 2023).

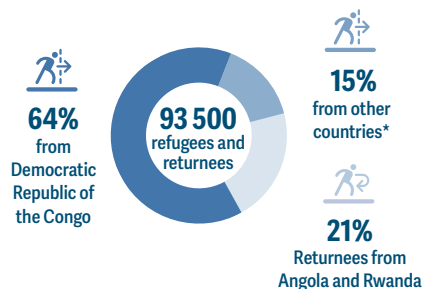
A Standardised Expanded Nutrition Survey (SENS) 2021 analysis found that 40 percent of households

Numbers of people by phase of acute food insecurity, 2018–2023



Source: Zambia IPC TWG.


Refugees, asylum-seekers and returnees



* including Burundi, Somalia and Rwanda.
Source: UNHCR, October 2022.


in the three settlements had poor food consumption (46 percent in Meheba) and 36 percent had borderline food consumption. Poor infant and young child-feeding practices are key drivers of malnutrition among refugee children. Wasting (5 percent) in children under 5 years was a medium level of prevalence, but stunting prevalence was very high at more than 30 percent in Meheba and Mantapala. Exclusive breastfeeding levels were just 20 percent in Mantapala, 38.5 percent in Mayukwayukwa and 50 percent in Meheba. Anaemia levels were a severe public health concern (>40 percent) among both children aged under 5 years and among women of reproductive age. Disease contributes to malnutrition in the settlements (SENS, 2021).


NUTRITION


 Based on data from 2020, the prevalence of wasting among children under 5 years was 4 percent, which is 'low' according to WHO classification. Around 140 500 children were severely wasted. The prevalence of stunting remained high at 32 percent (UNICEF, 2020).

As of 2021, HIV prevalence among adults aged 15–49 years was 10 percent, specifically 13.2 percent of women and 6.3 percent of men (Zambia Statistics Agency et al, 2022).

Drivers of undernutrition

 **Inadequate maternal and child-feeding practices** Micronutrient deficiencies and low dietary diversity remain the key nutrition challenges in Zambia in 2022 (UNICEF, 2022). About 32 percent of women of reproductive age and 55 percent of children aged 6–59 months were anaemic (WHO, 2019), indicating moderate and severe levels respectively based on WHO anaemia classifications. Only 12 percent of children aged 6–23 months received the Minimum Acceptable Diet, while nearly 70 percent of children under 6 months were exclusively breastfed (UNICEF, 2020).

 **Food insecurity and lack of access to healthy diets** If not immediately addressed, the acute food insecurity situation – linked to poverty, macroeconomic instability and exposure to climatic shocks – could drive up the prevalence of acute malnutrition (IPC, 2022).

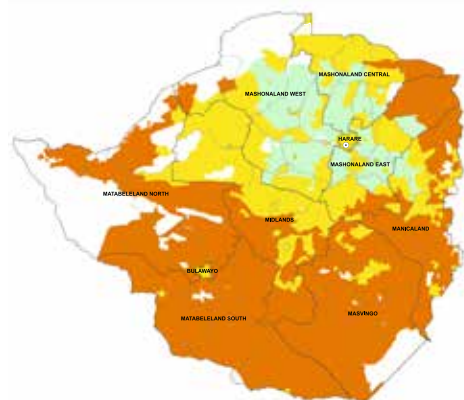
 **Poor household environment** In 2020, about 65 percent of households had access to basic drinking water services, falling to 25 percent in the rural population.

Zimbabwe

ACUTE FOOD INSECURITY PEAK 2022

 **3.0M** people or **20%** of the analysed population in IPC Phase 3 or above, **October–December 2022**

IPC acute food insecurity situation, October–December 2022




■ 1 - Minimal
 ■ 2 - Stressed
 ■ 3 - Crisis
 ■ 4 - Emergency
 ■ 5 - Famine
 Not analysed
 ● Urban settlement classification

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: FEWS NET, October 2022.

Food crisis overview

 In October–December 2022, even before the height of the lean season, which usually finishes in March, 3 million people were in Crisis or worse (IPC Phase 3 or above), representing 20 percent of the total population (FEWS NET, internal analysis, October 2022).

The numbers are not fully comparable with the GRFC 2021 peak figure, due to a change in the geographical coverage and data source. However, the situation improved in 2022 compared with FEWS NET's January–March 2021 peak analysis, when 5 million people were in IPC Phase 3 or above.

The annual Zimbabwean Government-led rural livelihood assessment estimated that 38 percent of households were unable to access an adequate quantity of cereals in 2022, up from 27 percent in 2021, but below the 2020 level of 56 percent (ZimVAC, April 2022).

Continued high levels of acute food insecurity in early 2023

Crisis (IPC Phase 3) outcomes are expected to intensify throughout the lean season in early 2023 in typical deficit-producing areas in the south, east, west and far north (FEWS NET, October 2022). Stressed (IPC Phase 2) outcomes are expected to prevail in surplus-producing northern districts and urban areas. With the start of harvests in April/May 2023, household food access will improve (FEWS NET, December 2022).

Acute food insecurity since 2016

Zimbabwe has been identified as a major food crisis since the first edition of the GRFC due to weather extremes and, increasingly, economic shocks. For the past seven years, around 3.5 million people have faced IPC Phase 3 or equivalent on average.

The numbers of acutely food-insecure people in need of urgent assistance are not fully comparable over the

years, given differences in the geographical coverage and data sources. The analysis coverage has remained at around 65 percent until 2022, when the whole country was analysed. Some 45 percent of the rural population were in IPC Phase 3 or above in 2020, which marked the worst year for Zimbabwe in the history of the GRFC, when the number of people in these phases reached 4.3 million, with over 1 million of them in Emergency (IPC Phase 4).

Drivers of the crisis, 2022–23

 **Economic shocks** The monthly official food inflation rate increased steeply in 2022, with the country experiencing triple-digit inflation rates since April 2022, underpinned by a sharp depreciation of the national currency, which amplified the effect of rising and high international food and fuel prices (FAO FPMA, June 2022).

The lower domestic harvest in 2022 contributed to pushing up prices further, although the lifting of the import ban on maize helped shore up domestic availabilities and, in part, eased supply pressure on prices (FAO FPMA, June 2022).

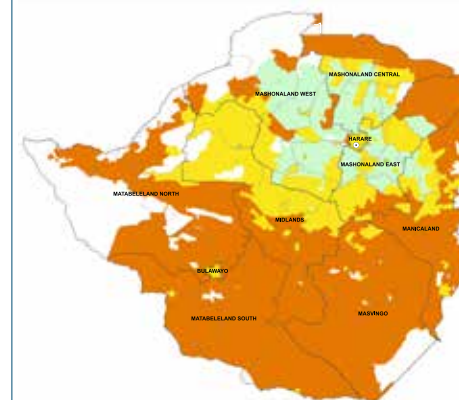
In August, food prices were 353 percent higher year-on-year (FAO FPMA, September 2022). A number of Government measures introduced to curb inflationary pressure, including the removal of import duties on several key food commodities, such as cooking oil, maize meal and rice, between May and October 2022, as well as a relative stabilization of the exchange rate and some softening of international prices, slowed food inflation somewhat, and by February 2023 the annual rate of inflation was estimated to be just below 140 percent (FAO FPMA, March 2023).

Throughout the main 2022/23 agricultural season, access to crop inputs, such as fertilizer, was expected to be significantly below normal, due to above-average prices (FEWS NET, October 2022). Fuel prices marginally decreased since the peak in June 2022, but remained above average and still the highest in southern Africa (FEWS NET, October 2022).

ACUTE FOOD INSECURITY PROJECTION 2023

 **3.0–3.5M** people or **19–23%** of the analysed population in IPC Phase 3 or above equivalent, **January–March 2023**

Projected IPC acute food insecurity situation, January–March 2023



■ 1 - Minimal
 ■ 2 - Stressed
 ■ 3 - Crisis
 ■ 4 - Emergency
 ■ 5 - Famine
 Not analysed
 ● Urban settlement classification

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: FEWS NET, February 2023.

The economic crisis also lowered domestic work opportunities in better-off households (FEWS NET, October 2022). In April 2022, average household monthly income was USD 57, which is USD 18 lower than the previous April, with the lowest reported in Matabeleland North (USD 38) (ZimVAC, April 2022).



Weather extremes The 2021/2022 season started late in most parts of the country, and the rainfall was poorly distributed across the country (MoA, April 2022). By February 2022, the harvest was already expected to be below average (FEWS NET, February 2022), and production of the main staple, maize, was estimated to be 43 percent below that of the previous season, but only 6 percent down from the five-year average (MoA, April 2022). More than 80 percent of households were affected by drought in the central and eastern part of the country (ZimVAC, April 2022). Below-average 2022 harvests and crop sales dampened labour opportunities and rates in October 2022.

Generally well-distributed rains in early 2023 are expected to improve labour opportunities, livestock conditions and sales and to result in a near-average cereal harvest at the national level, but reduced outputs were likely in the south due to prolonged dry spells (FEWS NET, January 2023).



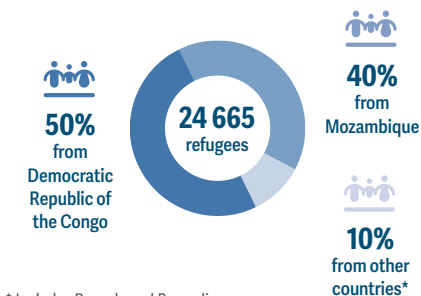
Refugees Zimbabwe hosts around 24 000 refugees and asylum-seekers with most of them living in Tongogara camp in Manicaland province, southeastern Zimbabwe. Half are from the Democratic Republic of the Congo, while others come from Mozambique, Burundi, Rwanda and other countries.

Regarding the food security situation of refugee populations, the most recent SENS 2021 analysis found that nearly all (95 percent) of refugee households rely on WFP assistance as their main source of food. The study found that 21.5 percent of refugee households in Tongogara camp had borderline food consumption and 9.4 percent poor food consumption (SENS, July 2021).

In Tongogara camp, 3 percent of children under 5 years old were found to have wasting, which is considered a low prevalence. At 18.6 percent, stunting in the camp was considered of medium concern. Access to nutritious, iron-rich diets for refugee households was also a problem, with SENS data reporting that anaemia was at a

DISPLACEMENT

Refugees and asylum-seekers, 2022



* Includes Rwanda and Burundi.
Source: UNHCR, 31 December 2022.

‘medium’ level in children under 5 years old (34 percent), and in women of reproductive age (27.9 percent). The exclusive breastfeeding target of 75 percent has not been met, with only 63.3 percent of infants under 6 months old exclusively breastfed (SENS 2021).

NUTRITION

The prevalence of wasting among children under 5 years old has increased since 2021 from 2.9 percent to 7.2 percent – classified as a ‘medium’ public health emergency by WHO thresholds. It reached a ‘high’ prevalence in Mashonaland Central and Matabeleland South (11 percent) (ZimVAC, August 2022).

The proportion of children with severe wasting was very concerning. At the national level, the severe wasting prevalence was 4 percent, reaching 8 percent in Mashonaland Central, 6 percent in Matabeleland South and 5 percent in Manicaland. Almost 20 000 children under 5 years old had severe wasting in 2022. In 2023, this number is projected to decrease to 12 700 (ZimVAC, August 2022).

Nationally, stunting (26.7 percent) remains ‘high’ with all provinces recording a stunting prevalence surpassing the WHO ‘high’ threshold of 20 percent. Matabeleland North had the highest prevalence (35.3 percent) and Masvingo (22.9 percent) the lowest (ZimVAC, August 2022).

Drivers of undernutrition



Food insecurity and lack of access to healthy diets Inadequate food consumption in terms of quantity and variety leading to nutrient intake deficits is a significant contributing factor to child undernutrition, with households living mainly on cereals, oils and vegetables. Only 35 percent of households consumed ‘acceptable’ diets (as per the Food Consumption Score indicator) in 2022 – although this was an improvement on 2021 (29 percent). Hwange (92 percent) and Hurungwe (72 percent) districts had the highest proportion of households consuming ‘poor’ diets. About 13 percent of households reported experiencing moderate to severe hunger (as per the Household Hunger Scale), and at least 29 percent of households were engaging high coping strategies (as per Household Consumption Coping Strategy Index) (ZimVAC, August 2022).

The daily consumption of iron-rich, animal-sourced foods, such as milk, meat and eggs, remained low in 2022, with 41 percent of households never consuming them (ZimVAC, August 2022).



Inadequate maternal and child-feeding practices Few children (7 percent) aged 6–23 months old are fed a Minimum Acceptable Diet (MAD) that meets both the recommended dietary diversity and frequency thresholds (UNICEF, 2020).

While 61.6 percent of children are breastfed beyond one year according to the ZimVAC survey, exclusive breastfeeding of babies under 6 months old is concerning at 42 percent (UNICEF, 2020).

According to the latest available data, nearly 38 percent of children aged 6–59 months and 29 percent of women of reproductive age (15–49 years) were anaemic (UNICEF, 2020), indicating a ‘moderate’ public health problem (WHO, 2019).



Poor household environment Nationally, 22 percent of rural households were using unimproved water sources, rising to 31 percent in Masvingo and 27 percent in Matabeleland South. At least 13 percent of households in Matabeleland South and 11 percent in Matabeleland North were consuming surface water.

Lack of sanitation is a nutrition concern, with 33 percent of rural households having no access to improved sanitation and 27 percent practising open defecation nationally, reaching 50 percent in Matabeleland North (ZimVAC, July 2022).



High prevalence of infectious diseases At least 37 percent of children had experienced cough and 25 percent fever in the two weeks preceding the survey. About 12 percent of households have to travel more than 10 kilometres to reach the nearest health facility. The proportion is highest in Matabeleland North (18 percent) (ZimVAC, July 2022).



TECHNICAL NOTES

Technical notes

GRFC as a public good: Consultation, partnership and consensus

1 | PRELIMINARY WORK

Technical consultation

Senior Committee

(17 partner organisations)

- Reaffirm the partner organisations' engagement and responsibilities
- Confirm scope of the report
- Provide initial guidance
- Endorse country selection criteria
- Agree on date of release

Pre-selection of countries

FSIN and Food Security Technical Working Groups

- Identify qualifying countries according to the criteria for inclusion: assistance request, FAO-GIEWS monitor, or hosting refugee populations

Data gathering

FSIN and Technical Working Groups

- Identify and share relevant data and analyses pertaining year 2022.
- Engage with regional and country-level food security and nutrition specialists to try and fill data gaps

2 | RESEARCH, ANALYSIS AND PRODUCTION

Data endorsement

FSIN and Technical Working Groups

- Agree on criteria for endorsement of data/analysis
- Validate the reliability of the data source
- Identify and endorse peak acute food insecurity estimates for 2022
- Identify and endorse undernutrition data
- Identify and endorse displacement data
- Identify and endorse key drivers of acute food insecurity

Drafting

FSIN and Technical Working Groups

- Initial drafting based on data endorsed by the Technical Working Groups
- Complement data and figures with qualitative literature reviews
- Produce relevant infographic, maps, graphics, and other visuals

Quality control check

FSIN and Technical Working Groups

- Review and comment on drafts
- Discuss until consensus is reached on draft report

3 | REVIEW AND CLEARANCE

Review

Senior Committee

- Review and comment on the report
- Provide guidance on addressing gaps or lack of consensus
- Troubleshoot on technical challenges
- Discuss until consensus is reached

Finalise production

FSIN and Technical Working Groups

- Implement Senior Committee recommendations
- Refine draft

FSIN

- Final proof-read

Institutional clearance

Senior Committee

- Each partner organisation validates the report

4 | RELEASE AND DISSEMINATION

Publication of the 2023 Global Report on Food Crisis

FSIN and the Global Network Against Food Crises

- Digital and physical publication of the full report and related products, including In Briefs (translated in English, Spanish, French, and Arabic), interactive version, and stand-alone assets (maps and infographics)
- Hybrid launch event with main partners
- Coordinated communications campaign to maximize visibility and outreach

Regional reports

FSIN, regional organisations and the Global Network Against Food Crises

- Production and publication of regional reports in coordination with regional partners to provide in-depth information on specific areas and regions
- Dissemination, including outreach campaign and events, organized in coordination with regional partners

All partners are in agreement with the approximate degree of magnitude and severity of acute food insecurity indicated for the countries included in this report except where a disclaimer is present. The differences stem from the varying interpretations of the data related to the factors which contribute to or indicate acute food insecurity.

Data selection

Country selection process

Step 1
FSIN and the Food Security Technical Working Group (TWG) lead the country selection process and present the list of countries/territories with the selection rationale to the Senior Committee for endorsement.

The process starts around October and continues until the end of the year to ensure inclusiveness throughout 2022. This step includes:

1. Pre-select all countries/territories that requested external assistance for food and/or faced shocks as assessed by FAO-GIEWS:
 - a. in 2022, or
 - b. at least once in the past 3 years, or
 - c. at least 3 years in the past 10 years

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

Countries that did not request external humanitarian food assistance, but which had acute food insecurity analyses available that indicate high levels of food insecurity, are not included in the GRFC. However, the TWG can still consider such analyses for the regional overviews in consultation with the Senior Committee.

2. Exclude high-income countries from the global country list, as these countries are expected to manage their food crises with internal resources.
3. Assess the following among the low or middle-income countries/territories, that are not identified by FAO-GIEWS assessments, but requested external food assistance because of:
 - a. hosting refugee populations who were assisted by UNHCR and WFP. If this criterion is met, only the refugee populations in that country are included, while the host country is only pre-selected if its resident population needed external food assistance.

- b. having over 1 million or at least 20 percent of its population forcibly displaced.
- c. having populations affected by conflict and insecurity, weather extremes and/or economic shocks

As a result of the above process, 73 countries/territories were identified as food crises in 2022.

Step 2
FSIN facilitates discussions with the Food Security TWG on the available acute food insecurity data for the pre-selected countries/territories. There are a few core rules on the data endorsement:

1. Assessment/analysis methodology is among those endorsed by the TWG (see data endorsement)
2. The 2022 peak analysis covers at least one month of 2022, and if several analyses are available, the one describing the highest magnitude of acute food insecurity is selected
3. The 2023 projection analysis covers at least one month of 2023, and if several analyses are available, the one describing the highest magnitude of acute food insecurity is selected instead of the projection that extends to the furthest.
4. For countries/territories where the analysis source or methodology differs between the 2022 peak and 2023 projection, the TWG reviews where and how the analysis results can be included to avoid confusion. Different methods may result in different estimates, and therefore it might be decided not to include some analyses or their figures and rather have more qualitative information from the sources.

Out of the 73 countries/territories identified as food crises, 58 had data available that met the requirements to be included in the GRFC 2023.

Out of the 73 countries/territories identified as food crises, 15 did not have data or did not meet the data/evidence criteria. Available information is included where possible in regional and global narratives.

Step 3
Identification of major food crises based on meeting one or more of the following criteria:

1. At least 20 percent of the country population in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
2. At least 1 million people in Crisis or worse (IPC/CH Phase 3 or above) or equivalent
3. Any area classified in Emergency (IPC/CH Phase 4) or above
4. Included in the IASC humanitarian system-wide emergency response-level 3

42 countries/territories were identified as major food crises in 2022 and are reported in Chapter 3 of the GRFC.

Data endorsement: sources and methodologies

The data presented in the GRFC follow the data source priority ranking listed below. Exceptions can be made based on the Food Security TWG discussion and agreement on the data that appear to best reflect a particular country's food security situation. This is primarily due to different analysis coverage, timings or when a country/territory has information from several sources.

1. IPC/CH Acute Food Insecurity Analysis
2. FEWS NET IPC-compatible analysis
3. WFP's CARI methodology
4. Humanitarian Needs Overview, or similar country team 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. It provides data for two time periods – the current situation and future 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 the same, 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 understand and critically utilize IPC products and the protocols, including tools and procedures, to conduct the classification itself. See <https://www.ipcinfo.org/ipcinfo-website/resources/ipc-manual/en/>

IPC 3.1 acute food insecurity reference table

Phase name and description		Phase 1 None/Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe/Famine	
		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	
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 security first-level outcomes	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: Poor (NDC to differentiate P4 and 5) 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	
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.							
Food security second-level outcomes	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	
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 security contributing factors	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	

Classifying Famine (IPC/CH Phase 5)

Famine is classified at area level in the IPC according to an internationally accepted standard based on the following three criteria:

- At least 1 in 5 households face an extreme lack of food.
- At least 30 percent of children suffer from wasting.
- Two people for every 10 000 dying each day due to outright starvation or to the interaction of malnutrition and disease.

Given the severity and implications of this classification, all regular IPC protocols and special Famine protocols must be met before an area is classified in Famine (IPC/CH Phase 5). See IPC version 3.1.

Areas can be classified in Famine Likely if minimally adequate evidence available indicates that a Famine may be occurring or will occur. This classification should trigger prompt action by decision-makers to address the situation while calling for urgent efforts to collect more evidence. Famine and Famine Likely are equally severe, the only difference is the amount of reliable evidence available to support the statement.

The IPC supports Famine prevention by highlighting the following:

- IPC Phase 4 Emergency 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 Famine 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. 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 can be made even if the areas are not currently classified in Famine, thus allowing early warning.

Risk of Famine 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 probability of occurring.

Cadre Harmonisé (CH)

The Cadre Harmonisé is the multi-dimensional analytical framework used by CILSS for the analysis and identification of areas and groups at risk of acute food insecurity in the Sahel, West Africa and Cameroon. It aims to inform national and regional food crisis prevention and management systems. It considers various indicators of food and nutrition security outcomes and contributing factors.

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 other coastal countries of West Africa. There are 18 countries currently implementing the CH: Burkina Faso, Benin, Cameroon, Cabo Verde, Chad, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, the Niger, Nigeria, Senegal, Sierra Leone and Togo.

The CH version 2.0 clarifies the specific functions and protocols for carrying out an integrated and consensual analysis of acute food and nutrition insecurity. See <http://www.cilss.int/index.php/2019/10/04/cadre-harmonise-manuel-version-2-0/>

IPC/CH five-phase classification

As a result of technical developments of the CH tools and processes and harmonization efforts carried out over the last decade, the IPC and the CH acute food insecurity approaches are very close to each other and give comparable figures of acute food insecurity. The five-phase classification is the same though there are a few differences pertaining to the use of certain indicators, classification of famine and estimation of humanitarian assistance.

Classification into five phases (1) None/Minimal, (2) Stressed, (3) Crisis, (4) Emergency, (5) Catastrophe/ Famine is 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 food, livelihood and nutrition assistance. Populations in Stressed (IPC/CH Phase 2) require a distinct set of actions – ideally disaster risk reduction and livelihood protection interventions. Classifying Famine (IPC/CH Phase 5), the fifth phase of food insecurity, requires analytical conclusions that meet three specific criteria.

FEWS NET

Funded and managed by USAID's Bureau for Humanitarian Assistance (BHA), the Famine Early Warning Systems Network (FEWS NET) provides early warning and evidence-based analysis of acute food insecurity to inform humanitarian and development response. FEWS NET is monitoring 29 countries where it analyses the dynamics of food, nutrition and livelihood security so policymakers can design programmes that address the root causes of persistent or recurrent acute food insecurity, undernutrition and vulnerability.

FEWS NET classification is IPC-compatible, which means it follows key IPC protocols but is not built on multi-

partner technical consensus, so it does not necessarily reflect the consensus of national food security partners. See <https://fews.net/fews-data/333>

CARI

WFP has developed, and uses, the Consolidated Approach for Reporting Indicators of Food Security (CARI) methodology. This methodology is also commonly used by other food security partners in their assessments. CARI is a widespread practice for Multi-Sector Needs Assessments, used in calculating the People in Need figure for countries/territories not covered by IPC/CH analyses.

Before any intervention, WFP analyses the food security situation with partners to perform effective targeting, determines the most appropriate type and scale of intervention and ensures the most efficient use of humanitarian resources.

The CARI addresses the multiple dimensions of food security through five indicators – Food Consumption Score, reduced Coping Strategies Index, Economic Capacity to Meet Essential Needs (ECMEN) OR Food Expenditure Share, and Livelihood Coping Strategies.

Each surveyed household is classified into one of four food security categories – food secure, marginally food secure, moderately food insecure and severely food

Example of a completed CARI console

DOMAIN		INDICATOR	FOOD SECURE (1)	MARGINALLY FOOD SECURE (2)	MODERATELY FOOD INSECURE (3)	SEVERELY FOOD INSECURE (4)
CURRENT STATUS	Food Consumption	Food consumption groups FCG and reduced Coping Strategies Index	Acceptable consumption and reduced Coping Index below 4 21.1%	Acceptable consumption and reduced Coping Index 4 or above 30.3%	Borderline consumption 36.2%	Poor consumption 13.4%
COPING CAPACITY	Economic Capacity	ECMEN (or Food expenditure share when ECMEN is not available)	Total expenditure > MEB Food Expenditure Share <50%	Food Expenditure Share 50-65%	SMEB > Total Exp < MEB Food Expenditure Share 65-75% 18.4%	Total Exp < SMEB Food Expenditure Share >75% 71.5%
	Livelihood Coping Strategies	Livelihood Coping Strategies – Food Security	No coping 10.1%	Stress 19%	Crisis 3.6%	Emergency 11.4%
Food Security Index (CARI)			30.1%	27.0%	25.3%	17.6%

insecure. The results are presented within the CARI food security console, which provides the prevalence of each available CARI food security indicator. The aggregate results provide the population's overall food security outcome or Food Security Index (FSI).

Populations that are classified as 'moderately acute food insecure' and 'severely acute food insecure' as per WFP's CARI methodology are reported as an approximation to populations facing IPC/CH Phase 3 or above.

The indicators included within the CARI approach can be used within IPC/CH analyses, but there are many differences between the two methods. The fundamental difference is that the 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.

Change in CARI methodology

The third edition was launched in December 2021, and it introduced two changes. First, the food consumption domain now also includes reduced Coping Strategies Index in addition to Food Consumption Group. Secondly, Economic Capacity to Meet Essential Needs (ECMEN) is now the preferred measure for economic vulnerability instead of food expenditure share. This is better for assistance targeting purposes. The main implication in the use in GRFC is the comparison of the CARI findings with prior surveys.

The ECMEN indicator identifies the percentage of households whose expenditures exceed the Minimum Expenditure Basket (MEB). A MEB is defined as what a household requires in order to meet their essential needs, on a regular or seasonal basis, and its cost. The MEB covers those needs that households meet fully or partially through the market. It serves as a monetary threshold that can be used to assess a household's economic capacity to meet their needs. To compute the ECMEN, household expenditures are used as a proxy for household economic capacity.

Link to CARI methodology <https://docs.wfp.org/api/documents/WFP-0000134704/download/>

Humanitarian Needs Overview (HNO) and other estimates

OCHA HNOs 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 Joint Response Plan (JRP). When no other sources for acute food insecurity estimates are available, the GRFC food security TWG assesses the methodology of the PiN to ensure it is based on acute food insecurity indicators and equivalent to Crisis or worse (IPC/CH Phase 3 or above) for use in the GRFC.

In GRFC 2023 three of the endorsed HNOs were based on methodologies that are not currently endorsed as data sources. These include:

FIES – The Food Insecurity Experience Scale is an experience-based metric of food insecurity severity. It relies on people's direct responses to questions about their experiences facing constrained access to food. Inspired by two decades of accumulated experience with similar tools in several countries, Voices of the Hungry developed the analytical protocols necessary to take experience-based food security measurement global, making it possible to compare prevalence rates across countries and even sub-national populations.

rCARI – The WFP remote-CARI (rCARI) methodology is implemented through remote surveys (phone or web-based) and rests on a reduced questionnaire adjusted for remote data collection compared with the traditional WFP CARI methodology. Comparability studies between the results of rCARI analyses and the results of traditional CARI methodology are ongoing, therefore there is uncertainty at this stage regarding the degree of over- and under-estimation biases.

The **WFP Essential Needs Assessment (ENA)** uses both qualitative and quantitative analysis to understand whether and how people facing a crisis or shock, including in refugee settings, are meeting their essential needs. The assessment estimates the number of people

unable to meet their essential needs and profiles these households by describing their main characteristics. Indicators include measures of households' economic capacity to meet essential needs, multidimensional deprivation of essential needs, coping strategies employed, and how households prioritize needs. In the GRFC, ENA-driven food insecurity statistics are considered as 'insufficient evidence'.

In preparation for the next GRFC process, the GRFC TWG will assess in more detail the comparability of ENA estimates with conventional estimates included in the GRFC. For more information see <https://www.wfp.org/publications/essential-needs-guidelines-july-2018>

Data not meeting GRFC requirements and data gaps

All information in the GRFC is carefully assessed prior to use in the report, particularly on the methods and indicators used in the analysis. Because of this rigorous process, there are countries where food security information is available, but the source does not use the methods endorsed by the GRFC food security TWG. The information is acknowledged and the decision not to utilize it in the report is primarily because it lacks robustness. Until a comparability study on indicators is available, such countries are listed in the GRFC as 'data not meeting GRFC requirements'.

'Data not meeting GRFC requirements' refers to publicly available information with limitations on robustness, whereas a "data gap" refers to absence of any public analysis for the year in question.

Citing the data source in the GRFC

All data sources are referenced according to the month and year of its publication. The analysis period is aligned with the IPC/CH and FEWS NET current and projection time frames, while for the other sources the analysis period reflects the timing of the data collection.

Acute food insecurity peak for 2022 and projection estimates for 2023

The peak estimate is based on the highest number of acutely food-insecure people in the year in question as reported by endorsed data sources. It does not reflect the latest analysis available but purely the observed peak.¹

Projection sections aim to identify the expected peak of acute food insecurity in 2023, notably through IPC/CH and IPC-compatible projections indicating the expected peak magnitude of population facing Crisis or worse (IPC/CH Phase 3 or above) in food-crisis countries. These projections do not necessarily extend to the typical lean season, but indicate the most severe period covered by the analyses by the time of the GRFC launch.

IPC/CH projections are estimated by outlining the main assumptions driving the evolution of acute food security in the projected period. The focus is on the 'most likely scenario' which helps to devise the potential changes on population distribution across IPC/CH phases. IPC projections take into account the potential effects of already funded or likely-to-be-funded and delivered humanitarian assistance in the area of analysis. CH projections project the number of people in CH Phase 3 or above in a scenario in which no food assistance is provided.

FEWS NET has available projection estimates in ranges for the countries where they have a presence, or they monitor remotely. FEWS NET food assistance outlook briefs provide information on the projected severity and magnitude of acute food insecurity (using ranges) and indicate each country's food-insecure population in need of urgent humanitarian food assistance (IPC Phase 3 or above). FEWS NET projections are based on a scenario development approach where a set of assumptions regarding the evolution of food security drivers and their impacts on food security outcomes in the absence of humanitarian food assistance. The upper bound of the range is included in regional and global aggregates.

¹ AFI estimates are rounded in this document.

Update of IPC/CH analysis

A projection update or a new analysis that covers at least part of the previous projection period overrides the original projection findings since the latest analysis is based on more up-to-date information, hence providing more accurate findings. In GRFC 2023, for Afghanistan and Yemen, the original projection analyses with higher numbers of acute food insecurity were not used, as subsequent analyses provided updated findings based on latest developments, including the operational environment and the scale of humanitarian assistance.

Use of 2023 projections when source changes from 2022 peak

Cases where the data source of projections figures for a given country differs from the 2022 peak are discussed at GRFC food security TWG level to ensure comparability. As a rule, 2023 projections are used if the 2022 and 2023 peak analyses from the two data sources are comparable and there is full consensus on the peak estimate for 2022. This is to make sure that the two data sources have a similar baseline situation for the projection. If this not the case, the TWG decides whether the 2023 projection is used with or without the numbers and/or maps. Qualitative narrative from the 2023 projection is always included.

Presenting information for displaced populations

For any country where the data are available for displaced populations and host communities, this is featured together with the host country brief. This is the case for Lebanon where acute food insecurity information is available for both the resident population and Syrian refugees, and for Colombia where it is available for residents and Venezuelan migrants. For those countries where information is only available for the displaced and the host country is not selected itself as a food crisis (e.g. Jordan), refugee narrative and findings is presented in the refugees' country of origin narrative and/or in the regional and global overview.

Data sources for the 2022 peak estimates and 2023 projection estimates

	Number of countries in 2022	Number of countries in 2023
IPC	27	21
CH	15	14
FEWS NET	3	4
WFP CARI	6	
OCHA	7	

Data from non-IPC/CH (FEWS NET, CARI and HNOs analyses) sources are presented in the country narratives according to the terminology and categorization used in the original data source.

In global and regional narratives, 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 source reflecting an approximation of IPC Phase 3 and above.

Until a thorough indicator comparability study is conducted, information is presented in summary tables as IPC/CH Phase 3 or above or equivalent without further breakdown to more specific IPC/CH Phases.

Graphs

The graphs to visualize acute food insecurity peaks, if possible, broken down by severity (Phase 1 to 5) over the seven years of GRFC history are included in chapter 3. To better contextualize the acute food insecurity levels, the graphs also show the total country population to which those peaks refer to for each year, as well as the number of people in IPC/CH Phases (1-2) to give the extent of the total population analysed.

In the previous editions of the GRFC, graphs have included all available comparable analyses, but these graphs are now shifted to the Annex while only the annual peak analysis is included in Chapter 3. Only years whose figures are from the same data source are presented in the 2016–2023 trends graphs.

Graphs for countries that are only covered in the GRFC for the first year as well as those for which data are only available for two years are not presented in Chapter 3.

Maps

The boundaries and names shown and the designations used on all the maps in this document do not imply official endorsement or acceptance by the United Nations.

Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties.

Final boundary between the Republic of the Sudan and the Republic of South Sudan has not yet been determined. The final status of the Abyei area is not yet determined.

A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).

Drivers of food insecurity

The drivers of food crises are often interlinked and mutually reinforcing, making it difficult to pinpoint the specific trigger or driver of each food crisis. Also, it is acknowledged that food insecurity is not driven solely by the occurrence of a hazard, but rather by the interaction between hazards and people specific vulnerabilities. Although not listing each specific vulnerability factor for each country, the GRFC 2023 takes a practical approach by estimating which are the most salient drivers for each country/territory out of the broad categories explained below. The Food Security TWG analyses each selected country and identifies which of the drivers could be considered as the primary driver. For countries with two or more drivers affecting various parts of the country, the primary driver was selected based on analysis of how many people were affected by each of the drivers. The GRFC presents the number of countries by primary driver in global and regional narratives and aggregates the corresponding numbers of acutely food insecure people.

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.

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.

It is a key driver of acute food insecurity because in conflict situations civilians are frequently deprived of their income sources and or have difficulties in accessing food as food systems and markets are disrupted, pushing up food prices and sometimes leading to scarcities of water and fuel, or of food itself.

Landmines, explosive remnants of war and improvised explosive devices often destroy agricultural land, mills, storage facilities, machinery etc.

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 are usually damaged or destroyed, leaving people reliant on humanitarian support – yet increasingly, insecurity and roadblocks prevent humanitarian convoys from reaching 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 with conflict/insecurity as the primary driver during the past year, change to another primary driver needs serious consideration as recovery from conflict/insecurity takes a long time and may remain as 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

These include 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 triggering an early lean season when households are 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 capacities 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 scale and frequency of shocks. Repeated events further erode capacity to withstand future shocks.

Weather events and changes in climate can lead to an intensification of conflict, for instance, between pastoralist herders and farmers over access to water and grazing. There is ample evidence suggesting that natural disasters – particularly droughts – contribute to aggravating existing civil conflicts.

Economic shocks

Economic shocks at country level 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 a significant currency depreciation and high inflation, increasing production costs and food prices and worsening terms of trade which may 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, push up domestic food prices for consumers and reduce 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, veterinary services, subsequent deteriorating livestock body conditions and depressed livestock prices are likely to be affected by a reduction in purchasing power and face a constrained access to food as a result.

Disease outbreaks

Disease outbreaks (occurrence of disease cases in excess of normal expectancy) are usually caused by an infection, transmitted through person-to-person contact, animal-to-person contact, or from the environment or other media. Water, sanitation, food and air quality are vital elements in the transmission of communicable diseases and in the spread of diseases prone to cause epidemics.

Displaced populations – particularly in overcrowded camps – are more susceptible to disease outbreaks which strained health systems cannot prevent or control (WHO). Epidemics and pandemics can also affect the ability of people to carry on their activities and livelihoods and, in the worst cases when widespread, may also affect markets and supply chains.

Crop pests and animal diseases

Transboundary plant pests and diseases can easily spread to several countries and reach epidemic proportions. Outbreaks and upsurges can cause huge losses to crops and pastures, threatening the livelihoods of vulnerable farmers and the food and nutrition security of millions at a time.

All animal diseases have the potential to adversely affect human populations by reducing the quantity and quality of food, other livestock products (hides, skins, fibres) and animal power (traction, transport) that can be obtained from a given quantity of resources and by reducing people's assets. Transboundary Animal Diseases (TADs) may be defined as those epidemic diseases that are highly contagious or transmissible and have the potential for very rapid spread, irrespective of national borders, causing serious socioeconomic and possibly public health consequences.

These diseases, which cause a high morbidity and mortality in susceptible animal populations, constitute a constant threat to the livelihood of livestock farmers. Peste des petits ruminants (PPR), foot-and-mouth disease (FMD) or Rift Valley fever (RVF) often affect livestock and pastoralists' livelihoods in food-crisis contexts.

Nutrition

IPC acute malnutrition reference table

The IPC Acute Malnutrition Scale classifies the severity of acute malnutrition in the population under assessment. The IPC analysis process reviews all contributing factors affecting wasting in the area of analysis, such as dietary intake, disease, feeding and care practices, health and WASH environment and contextual information such as access to services and mortality are all included in the analysis.

Phase name and description	Phase 1 Acceptable	Phase 2 Alert	Phase 3 Serious	Phase 4 Critical	Phase 5 Extremely Critical
	<p>Less than 5% of children are acutely malnourished.</p> <p>5-9.9% of children are acutely malnourished..</p> <p>10-14.9% of children are acutely malnourished.</p> <p>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.</p> <p>30% or more children are acutely malnourished. Widespread morbidity and/or very large individual food consumption gaps are likely evident.</p>	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. ²	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 to 9.9%	10.0 to 14.9%	15.0 to 29.9%	≥30%
Global Acute Malnutrition (GAM) based on mid-upper arm circumference (MUAC)	<5%				
	5-9.9%				
	10-14.9%				
	≥15%				
<p>*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.</p>					

Nutrition and health – key indicators and categorization

Wasting

Moderate wasting using the weight for height indicator is identified by weight for height z scores (WHZ) between -2 and -3 of the reference population, and severe wasting by WHZ below -3. Wasting reflects both moderate and severe wasting in a population. Wasting can also be defined by Mid-Upper Arm Circumference (MUAC) measurements ≤ 12.5 cm, with severe wasting defined with a measurement of ≤ 11.5 cm.

Severity index for prevalence of wasting in children aged 6–59 months

Prevalence ranges	Label
< 2.5%	Very low
2.5–< 5%	Low
5–< 10%	Medium
10–< 15%	High
$\geq 15\%$	Very high

Source: De Onis et al. Public Health Nutrition, 2018. Available at: <https://www.who.int/nutrition/team/prevalence-thresholds-wasting-overweight-stunting-children-paper.pdf>

Stunting

Stunted children under 5 years old are identified by a height for age z score (HAZ) below -2 of the reference population. Severe stunting is defined as HAZ below -3.

Severity index for prevalence of stunting in children aged 6–59 months

Prevalence ranges	Label
< 2.5%	Very low
2.5–10%	Low
10–< 20%	Medium
20–<30%	High
$\geq 30\%$	Very high

Source: De Onis et al. Public Health Nutrition, 2018. Available at: <https://www.who.int/nutrition/team/prevalence-thresholds-wasting-overweight-stunting-children-paper.pdf>

Minimum Dietary Diversity

This indicator refers to the percentage of children aged 6–23 months who receive foods from five or more out of eight food groups a day.

The eight food groups are: i. breastmilk; ii. grains, roots and tubers; iii. legumes and nuts; iv. dairy products (infant formula, milk, yogurt, cheese); v. flesh foods (meat, fish, poultry and liver/organ meats); vi. eggs; vii. vitamin-A rich fruits and vegetables; viii. other fruits and vegetables. In some surveys, minimum dietary diversity is calculated based on seven food groups, excluding breastmilk. In these cases, the indicator refers to the percentage of children aged 6–23 months who receive foods from four or more out of seven food groups a day.

Minimum Meal Frequency

The indicator refers to the proportion of children aged 6–23 months who receive solid, semi-solid or soft foods at least the minimum number of recommended times a day depending on their age and whether they are breastfed.

Minimum Acceptable Diet

This composite indicator combines meal frequency and dietary diversity to assess the proportion of children aged 6–23 months consuming a diet that meets the minimum requirements for growth and development.

Prevalence ranges	Label
> 70%	Phase 1 – Acceptable/minimal
40–70%	Phase 2 – Alert/stress
20–39.9%	Phase 3 – Serious/severe
10–19.9%	Phase 4 – Critical/extreme
< 10%	Phase 5 – Extremely critical/ catastrophic

Source: Preliminary thresholds suggested by IFE Core Group.

Percentage of households not consuming micronutrient-rich food (analysed in refugee populations)

This refers to the proportion of households with no member consuming any vegetables, fruits, meat, eggs, fish/seafood, and milk/ milk products over a reference period of 24 hours. The food group of vegetables, fruits, meat, eggs, fish/seafood, and milk/milk products are the same as the 12 food groups defined by FAO (2011).

Exclusive breastfeeding

Exclusive breastfeeding in the first 6 months followed by the timely introduction of safe and nutritionally adequate complementary foods with continued breastfeeding until 2 years of age or beyond ensures children receive all the nutrients they need. This indicator refers to the percentage of infants 0–5 months of age who were fed only breast milk during the previous day.

Prevalence ranges	Label
> 70%	Phase 1 – Acceptable/minimal
50–70%	Phase 2 – Alert/stress
30–49.9%	Phase 3 – Serious/severe
11–29.9%	Phase 4 – Critical/extreme
< 10%	Phase 5 – Extremely critical/catastrophic

Source: adapted from UNICEF Breastfeeding Score Card.

Prevalence of anaemia

This indicator refers to the proportion of children aged 6–59 months and of reproductive age women (15–49 years) who are anaemic.

Anaemia is a condition in which the number of red blood cells or their oxygen-carrying capacity is insufficient to meet physiological needs, which varies by age, sex, altitude, smoking and pregnancy status.

Iron deficiency is thought to be the most common cause of anaemia globally, although other conditions, such as folate, vitamin B12 and vitamin A deficiencies, chronic inflammation, parasitic infections and inherited disorders can all cause anaemia. In its severe form, it is associated with fatigue, weakness, dizziness and drowsiness. Pregnant women and children are particularly vulnerable (WHO).

Prevalence ranges	Label
< 5.0%	No public health problem
5.0–19.9%	Mild public health problem
20.0–39.9%	Moderate public health problem
$\geq 40.0\%$	Severe public health problem

Source: WHO, 2008.

Access to basic drinking water services

Improved drinking water sources are those which, by nature of their design and construction, have the potential to deliver safe water. The WHO and UNICEF Joint Monitoring Program for Water Supply Sanitation and Hygiene (JMP) subdivides the population using improved sources into three groups (safely managed, basic and limited) according to the level of service provided. In order to meet the criteria for a safely managed drinking water service, people must use an improved source meeting three criteria: accessible on premises; available when needed; free from contamination. If the improved source does not meet any one of these criteria but a round trip to collect water takes 30 minutes or less, then it is classified as a basic drinking water service. If water collection from an improved source exceeds 30 minutes, it is categorized as a limited service (WHO and UNICEF).

GRFC 2023

Limitations and data challenges, 2022

There are no estimates for populations in Stressed (IPC/CH Phase 2) due to the use of non-IPC/CH data sources in 16 countries/territories: Algeria (refugees), Bangladesh (Cox's Bazar), Congo (refugees), Ecuador (migrants), Ethiopia, Iraq, Jordan (Syrian refugees), Libya, Myanmar, Nicaragua, Palestine, Sri Lanka, the Syrian Arab Republic, Uganda, Ukraine, and Zimbabwe.

Lack of/low data availability for refugee food security
Refugee food security is measured in various ways across refugee populations and data are not systematically collected, disaggregated, consolidated or shared.

WFP ENA assessment is available for refugee populations in Rwanda and IFRC vulnerability assessment for Syrian refugees in Türkiye but not accepted by the GRFC 2023 for inclusion.

Timely public release of acute food insecurity analyses
While some countries were known to have food security analyses conducted in 2022, the results were not always available for the GRFC on time. In the case of El Salvador, assessment results for 2022 were not released, and IPC analyses for Angola did not meet the data deadline.

Limited availability and frequency of IPC acute malnutrition analyses
Only 18 countries conducted an IPC acute malnutrition analysis covering a portion of 2022: Afghanistan, Angola, Burkina Faso, Burundi, Central African Republic, Chad, Democratic Republic of the Congo, Kenya, Madagascar, Mali, Mozambique, Nigeria, the Niger, Pakistan, Somalia, South Sudan, Uganda and Yemen. Out of these, 15 had projections for child wasting in 2023 while the three others, Angola, Mozambique and Yemen, did not.

Limited availability of updated information and frequency of national nutrition surveys
Eleven out of the 42 major food-crisis countries in chapter 3 do not have national updated/recent malnutrition

prevalence and IYCF data at the sub-national or national level beyond 2019.

Limited 2023 projections (acute food insecurity and malnutrition)
For several countries with no IPC/CH or compatible products where alternative estimates are used, 2023 projections are not available.

In some cases where IPC/CH is used, data collection and analysis updates are not as frequent as might be needed to provide estimates for the projection section of this report. IPC-compatible analyses offer range values for projection rather than precise estimates. Out of the 17 IPC acute malnutrition analyses available for 2022, 14 had projections for wasting in 2023 while the three others, Angola, Mozambique and Yemen, did not.

Comparability of data source for acute food insecurity estimates in food crises, 2021–2023

This section briefly summarizes the countries for which it is suggested to pay attention when comparing figures for 2021 and 2022, or for 2022 and 2023.

In countries where the population increased, peak estimates for 2021, 2022 and the 2023 projection remain comparable as the size of the analysed population increased proportionally to the size of the total country population based on official estimates.

Burundi

The 2021 and 2022 peak estimates are comparable. However, the 2023 projection saw a change from IPC analysis to FEWS NET IPC-compatible analysis. These two data sources may not always provide similar estimates, therefore, caution is required when comparing these estimates.

Central African Republic

The peak estimates of 2021, 2022 and projection for 2023 are comparable (having less than 10 percentage point difference in total population coverage). However, the official estimates used for the country population data used by the IPC analysis increased from 4.9 million in 2021 to 6.1 million in 2022.

Democratic Republic of the Congo

The comparison of the 2021 peak estimate with the 2022 peak and 2023 projection needs careful consideration. Firstly, the analysis coverage increased from 96.0 million people or 91 percent of the country population in February 2021 to 103.0 million people or 94 percent in July 2022. Secondly, the official estimates used for the country population data increased from 105.0 million people in February 2021 to 109.6 million in July 2022.

Ethiopia

The 2021 and 2022 peaks are not comparable because of the change in the data source and coverage of the analyses. The 2021 peak is derived from IPC analysis that covered 49 percent of the country, while the 2022 estimate is based on an HRP mid-year update, that is basing the food insecurity estimates on WFP's CARI-based assessments in Tigray, and Household Economic Assessment methodology for the rest of the country.

Jordan (refugee populations)

The 2021 and 2022 peak estimates are not comparable, even though both are based on WFP's CARI methodology. The main challenge on comparability is the change in the economic vulnerability domain. During 2021, the

domain was based on food expenditure share while in 2022 it is measured via the economic vulnerability to meet essential needs indicator. This change helps with food assistance targeting, but usually results in higher numbers and prevalence of food insecurity.

Lebanon (refugee populations)

With the initiation of acute food insecurity IPC analysis in Lebanon, the 2021 and 2022 peak estimates are not comparable. The 2021 peak figure followed WFP's CARI methodology and the 2022 peak and 2023 projection are derived from IPC analyses.

Libya

The 2021 and 2022 peaks are not comparable because of the change in the analysis coverage. Both analyses include IDPs, returnees, refugees and migrants. While 2021 includes vulnerable residents too, this population group was excluded in 2022.

Mozambique

The 2021 peak is not comparable with the 2022 peak and 2023 projection, as the analysis coverage increased from 18.1 million people or 60 percent of the country population in October 2020 to 32.0 million people or 100 percent in November 2022.

At the same time, the official estimates used for the country population data by the IPC analysis increased from 30.1 million in October 2020 to 32.0 million in November 2022.

Nigeria

The peak estimates for 2021 and 2022 peaks are comparable according to GRFC comparability rules (covering similar areas and having less than 10 percentage point difference in total population coverage). However, there are some geographical changes between the analyses. The 2021 peak covered 21 states and the FCT, accounting for 73 percent of the population and the 2022 peak covered 21 states and the FCT, accounting for 72 percent of the population.

However, the 2023 projection is not comparable to the 2022 peak, as the CH analysis coverage increased to 26 States and the FCT, with the population analysed increasing from 159.1 million people in April 2022 to 193.6 million in November 2022, which accounted for 86 percent of the national population. At the same time the country population data used by the CH analysis increased from 219.5 million in April 2022 to 224.4 million in November 2022 for the 2023 projection.

Pakistan

The 2021 and 2022 peak estimates are not comparable at the national level without mentioning the different districts covered. Both years' analyses covered 9 percent of the country population. However, the analysis coverage increased from nine districts in 2021 to 12 districts in Balochistan province. At the same time the total population analysed increased from 18.6 million to 19.8 million people.

Palestine

The 2021 and 2022 peaks are not comparable due to a change in the indicators used when calculating the composite indicator for acute food insecurity. For 2021, the methodology followed WFP's CARI approach, while the 2022 numbers are based on the Multi-sectoral Needs Assessment (MSNA) which uses different indicators including FIES with a 30-day recall period and ECMEN.

Somalia

The peak estimates of 2020, 2021 and projection for 2022 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the official estimates used for the country population data used by the IPC analysis increased from 15.7 million August 2021 to 17.0 million in November 2022.

United Republic of Tanzania

The comparison over the years of analysis is particularly limited as the population and geographical coverage increased from 14 district councils located in the mainland covering 6 percent of the country population in 2021 to 28 district councils in the mainland and the two islands in Zanzibar (17 percent) in 2022. Additionally, the official estimates used for the country population data used by the IPC analysis increased from 57.6 million in December 2021 to 61.7 million in October 2022.

Uganda

The peak estimates of 2021, 2022 and projection for 2023 are comparable (covering similar areas and having less than 10 percentage point difference in total population coverage). However, the country population data used by the FEWS NET analysis decreased from 45.7 million in 2021 to 44.2 million in 2022.

Uganda has an IPC analysis available, but the TWG opted to use FEWS NET analysis because of wider analysis coverage.

Ukraine

The 2021 and 2022 peak estimates are not comparable because the 2021 analysis covered only Donetsk and Luhansk oblasts while the 2022 analysis is nationwide. For the 2022 peak, a REACH assessment based on WFP CARI methodology was used and the prevalence of food insecurity applied to the HNO 2023 country population figures, which specifies how many people are living in Ukraine at the end of 2022.

Zambia

The comparison over the years of analysis is particularly limited as the population and geographical coverage increased from 64 rural districts (38 percent) in 2021 to nationwide rural coverage for the 2022 peak and 2023 projection. In the 2022 analysis, while the geographical coverage decreased to 61 rural districts, the country population coverage increased to 66 percent. Additionally, the official estimates used for the country population data by the IPC analysis increased from 18.0 million in February 2021 to 18.9 million in June 2022.

Zimbabwe

The comparison between the 2021 and 2022 peak numbers is limited by the change in the data source. The GRFC 2022 used the IPC analysis covering rural populations, while the GRFC 2023 source shifted to FEWS NET with nationwide coverage. To overcome the data source change while building the narrative, the chapter 3 makes comparisons to FEWS NET 2021 and 2022 peaks and 2023 projection.

The IPC analysis for 2021 peak (3.4 million people / 35 percent of the analysed population in IPC Phase 3 or above) remains in the trend table in chapter 1 for consistency with the GRFC 2022 reported figures.

History of GRFC criteria 2016–2023

With high demand for the GRFC as an annual reference document for the coming years, some technical criteria have been adjusted.

Country selection

In the first GRFC edition, all countries in the FAO-GIEWS list for countries requiring external assistance were included, plus an additional set based on reports and publicly available information on food insecurity.

From the 2018 edition, the GRFC considers only countries requesting urgent assistance to face a shock on their food security. Countries managing the crises without external assistance or requesting assistance on root causes and/or technical support or assisting fewer than 5 000 people are not considered for inclusion.

Countries that have been excluded from the GRFC due to this change (data are available, but country is not selected as no external humanitarian food assistance was requested) are for example South Africa (GRFC 2021) and Timor Leste (GRFC 2023).

Identification of major food crises

The identification of major food crises has evolved slightly over the GRFC editions, and the changes are explained below:

For GRFC 2017, countries/territories were identified based on:

- They had populations in IPC/CH Phase 4 or above
- At least 20 percent of the populations was in IPC/CH Phase 3 or above or equivalent
- At least 1 million people were in IPC/CH Phase 3 or above or equivalent
- Country is included in the IASC Humanitarian System-Wide Emergency Response emergencies list

The list was finally reviewed against ranking as 'very high risk' Index for Risk (INFORM). Exceptions were made for Myanmar, Mali and Cote d'Ivoire.

For GRFC 2018, the criteria ‘countries having any segment of the population in IPC/CH Phase 4 or higher’ was replaced by ‘countries having any area classified in IPC/CH Phase 4 or higher’. This criterion has remained unchanged since. For GRFC 2021, the criterion of ‘at least 20 percent of the population analysed in IPC/CH Phase or above’ was changed to ‘at least 20 percent of the country population in IPC/CH Phase or above’. This change was initiated primarily to avoid small-coverage analyses being identified as major food crises. If the analysis findings indicate a serious food insecurity situation, the country would still be identified if any of the other three criteria were met.

Countries that have not been identified as major food crises with this amended rule are for example the Republic of the Congo (GRFC 2021) and Lesotho (GRFC 2023).

Regional crises as major food crises

Previous GRFC editions identified regional crises as major food crises. Different countries, or specific areas within neighboring countries being affected by the same crisis were considered as one major food crisis. Between 2017 and 2023 this was the case for:

Areas in Cameroon, Chad and Nigeria in GRFC 2017, 2018, 2019 included as Lake Chad Basin food crisis.

Areas in Burkina Faso, Mali and Niger in GRFC 2020 included as Central Sahel crisis in the regional analysis in chapter 2, while country-wide analyses for Burkina Faso, Mali and Niger were included in chapter 3. Although Mali was not identified as a major food crisis, the country was exceptionally identified so to follow the past practice for regional crisis.

Areas in El Salvador, Guatemala and Honduras in GRFC 2019 and GRFC 2020 included as the Central American Dry Corridor crisis.): specific areas and numbers were presented in GRFC 2019, while for GRFC 2020, the regional crisis was captured in the regional section and in the country summary table full national figures were presented.

As many of these food crises have grown in severity and magnitude, the countries have individually met the criteria for being defined a major food crisis in the following GRFC report.

GRFC partners endorsed, that no past approaches will be amended with the new ones to avoid confusion. Therefore, all countries that have been included in the report, and those that have been identified as major food crises with past criteria, will remain in historical records according to the practices at that specific time.

Regional composition – chapter 2

Regional grouping has changed over the years primarily related to availability of data for neighboring countries and having a group of countries in the region affected by the same type of crisis or having common underlying factors. These year-to-year changes as well as those in the data availability, strongly affects regional trend analysis.

Historical inclusion of countries/territories in the GRFC, 2017–23

Over the seven years of the GRFC's existence, 39 countries/territories have systematically appeared as food crises each year following the rigorous selection process. Of these, 19 have qualified as a major food crisis each year. See tables.

Thirteen countries have regularly been selected for inclusion but subsequently excluded because of recurrent data gaps. The Democratic People's Republic of Korea and the Bolivarian Republic of Venezuela have had estimates available only once and qualified as major food crises. The other countries regularly excluded are: Cuba, the Republic of the Congo, Eritrea, the Lao People's Democratic Republic, Nepal, Papua New Guinea, Peru (Venezuelan migrants), Philippines, Tajikistan, Timor-Leste and Vanuatu. On the other hand, the Kyrgyz Republic – a regularly excluded country, was no longer identified as a food crisis. Algeria (refugees) and Lebanon (national), regularly selected in the GRFC, had first time data in 2022 that met the GRFC requirements.

Economic shocks drove new countries – Colombia, Ecuador and Peru – to be identified as food crises in 2022. Of these, Colombia met the criteria as a major food crisis. Other new countries that were identified as a major food crises in the GRFC 2023 were Guinea, Dominican Republic, Lebanon, Mauritania and Myanmar.

Over the seven years, several regional crises have featured, allowing for coverage of countries that would otherwise not have qualified for inclusion as a major food crises. The Lake Chad Basin region, encompassing the Extrême Nord region of Cameroon, western Chad, northeastern Nigeria and eastern Niger, was included in 2017, 2018 and 2019 editions. The Central Sahel region, covering Burkina Faso, Mali and western Tillabéri and Tahoua regions in the Niger, was in the GRFC 2020. The Central American Dry Corridor region (El Salvador, Guatemala, Honduras) was in the 2018–2020 editions. As many of these food crises have grown in severity and magnitude, the countries have qualified for inclusion in their own right.

Number of food crises and major food crises, GRFC 2017–2023

	2016	2017	2018	2019	2020	2021	2022
Number of potential food crises considered ¹	65	61	66	71	79	77	73
Number of food crises identified (with endorsed data)	48	51	53	55	55	53	58
Number of major food crises	23	29	32	35	34	35	42

Countries/territories identified as major food crises in the GRFC, 2017–2023

7 years	19 countries/territories Afghanistan, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Ethiopia, Haiti, Madagascar, Malawi, Mozambique, Niger, Nigeria, Somalia, South Sudan, Sudan, Syrian Arab Republic, Yemen, Zimbabwe
6 years	7 countries/territories Bangladesh, Burundi, Guatemala, Kenya, Pakistan, Palestine, Uganda
5 years	3 countries Burkina Faso, Honduras, Lesotho
4 years	5 countries Angola, Iraq, Mali, Namibia, Zambia
3 years	5 countries Djibouti, El Salvador, Sierra Leone, Ukraine, United Republic of Tanzania
2 years	1 country South Africa,
Once	8 countries Colombia, Democratic People's Republic of Korea, Guinea, Lebanon, Mauritania, Myanmar, Sri Lanka, Venezuela (Bolivarian Republic of)
Never	13 countries Cabo Verde, Congo, Côte d'Ivoire, Gambia, Ghana, Guinea-Bissau, Liberia, Libya, Nepal, Nicaragua, Rwanda, Senegal, Togo

Frequency of inclusion of food crises countries/territories with data meeting the GRFC requirements, 2017–2023

7 years	39 countries/territories Afghanistan, Bangladesh, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Ethiopia, Gambia, Guatemala, Guinea, Guinea Bissau, Haiti, Honduras, Iraq, Kenya, Lesotho, Liberia, Libya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Nicaragua, Niger, Nigeria, Senegal, Sierra Leone, Somalia, South Sudan, Sudan, Syrian Arab Republic, Uganda, Yemen, Zambia, Zimbabwe
6 years	8 countries/territories Angola, Djibouti, El Salvador, Namibia, Pakistan, Palestine*, United Republic of Tanzania, Ukraine
5 years	4 countries Cabo Verde, Côte d'Ivoire, Lebanon (refugees), Myanmar
4 years	1 country Jordan (refugees)
3 years	3 countries Colombia (migrants), Ecuador (migrants), Türkiye (refugees),
2 years	6 countries Egypt (refugees), Nepal, Rwanda (refugees), South Africa, Sri Lanka, Togo
Once	7 countries Algeria (refugees), Congo (national or refugees), Colombia, Democratic People's Republic of Korea, Lebanon, Peru (migrants), Venezuela (Bolivarian Republic of)

* The occupied Palestinian territories are referred to as Palestine in the GRFC 2023.



APPENDICES

The Global Network Against Food Crises

Founded by the European Union, FAO and WFP at the 2016 World Humanitarian Summit, the Global Network Against Food Crises is an alliance of humanitarian and development actors working together to prevent, prepare for, and respond to food crises and support the Sustainable Development Goal to End Hunger (SDG 2).

It seeks to reduce vulnerabilities associated with acute hunger; achieve food security and improved nutrition; and promote sustainable agriculture and food systems, using a '3x3 approach.' This involves working at the global, regional and national levels to support partnerships within existing structures and to improve advocacy, decision-making, policy and programming along the following three dimensions:

Dimension 1 | Understanding food crises

The work within this dimension aims to build greater consensus and promote evidence-based food security and nutrition analyses and reporting in order to strengthen the collection, quality and coverage of the food security and nutrition data and analysis, and inform decision-making and action. This will be achieved through the contribution to the *Global Report on Food Crises*, a unique 'global public good' under the coordination and leadership of the Food Security Information Network (FSIN), as well as the coordination, synthesis, and publication of technical analyses, including forward-looking analyses of food crises.

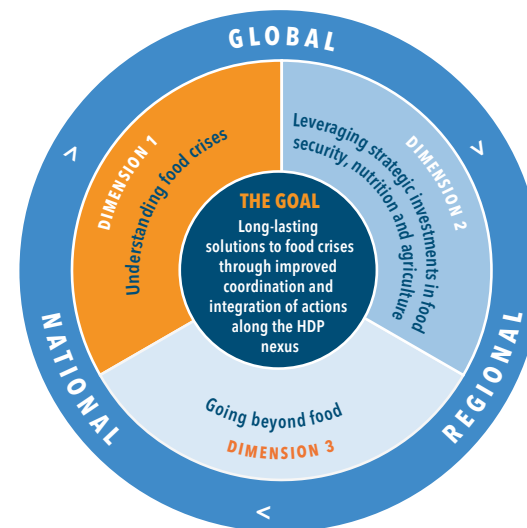
Dimension 2 | Leveraging strategic investments in food security, nutrition and agriculture

The work within this dimension aims to advocate for 'fit for purpose' financing that draws on the full range of resource flows (public and private, international and domestic) to better prepare for, prevent and respond to food crises. It seeks to improve coherence between humanitarian, development and peace actions (the HDP 'nexus') to build resilience to shocks and promote longer-term self-reliance. Activities include a strong focus on supporting capacity strengthening of country-level actors and institutions, as well as strengthening coordination at the regional level to ensure that investments are focused on the right place, at the right time.

Dimension 3 | Going beyond food

The work within this dimension aims to foster political uptake and coordination across clusters/sectors to address the underlying multi-dimensional drivers of food crises including environmental, political, economic, societal and security risk factors. It seeks to improve understanding and promote linkages between the different dimensions of fragility through knowledge sharing, advocacy and integrated policy responses.

The 3 x 3 approach to addressing food crises



Glossary

Acute food insecurity

Acute food insecurity is any manifestation of food insecurity at a specific point in time that is of a severity that threatens lives, livelihoods or both, regardless of the causes, context or duration.

These acute states are highly susceptible to change and can 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 and malnutrition (IPC, 2019). Transitory food insecurity is a short-term or temporary inability to meet food consumption requirements related to sporadic crises, indicating a capacity to recover.

Asylum-seekers

An asylum-seeker is a person seeking sanctuary in a country other than their own and waiting for a decision about their status. The legal processes related to asylum are complex and variable, which is a challenge when it comes to counting, measuring and understanding the asylum-seeking population. When an asylum application is successful, the person is awarded refugee status.

Chronic food insecurity

Chronic food insecurity refers to food insecurity that persists over time, largely due to structural causes. The definition includes seasonal food insecurity that occurs during periods with non-exceptional conditions.

Chronic food insecurity has relevance in providing strategic guidance to actions that focus on the medium- and long-term improvement of the quality and quantity of food consumption for an active and healthy life (FAO *et al.*, 2021). FAO defines this as 'undernourishment' and it is the basis for the SDG indicator 2.1.1 published in the SOFI report.

Moderate food insecurity refers to the level of severity of food insecurity, based on the Food Insecurity Experience Scale (FIES), in which people face uncertainties about their ability to obtain food and have been forced to reduce, at times during the year, the quality and/or quantity of food they consume due to lack of money or other resources. It thus refers to a lack of consistent access to food, which diminishes dietary quality, disrupts normal eating patterns, and can have negative consequences for nutrition, health and well-being.

Severe food insecurity refers to the level of severity of food insecurity in which people have likely run out of food, experienced hunger and, at the most extreme, gone for days without eating, putting their health and well-being at grave risk, based on the FIES (FAO *et al.*, 2021).

According to the SOFI report, between 702 million and 828 million people in the world faced hunger in 2021 – an increase by about 150 million since the outbreak of the COVID-19 pandemic. The number of people affected by severe food insecurity which is another measure that approximates hunger, shows a similar upward trend. Around 11.7 percent of the global population was severely food insecure in 2021, representing 923.7 million people – 207 million more people in two years. Around 2.3 billion people in the world were moderately or severely food insecure in 2021 – an increase by more than 350 million people compared with 2019, the year before the COVID-19 pandemic unfolded (FAO *et al.*, July 2022).

Coping strategies

Coping strategies are measures to which people resort in order to obtain food, income and/or other essential goods or services when their normal means of livelihood have been disrupted or other shocks/hazards affect their access to basic needs.

Export prohibitions and restrictions

Export prohibitions and restrictions are export measures that have a limiting effect on the quantity or amount of a product being exported. They can take the form of a tax or a quantitative restriction. The latter is generally prohibited with some exceptions, notably those applied to prevent or relieve critical shortage of foodstuffs.

Food access

Food access refers to access by households/individuals to adequate resources for acquiring appropriate foods for a nutritious diet.

Food availability

Food availability refers to the availability of sufficient quantities of food of appropriate quality, supplied through domestic production or imports.

Food crisis

A food crisis occurs when rates of acute food insecurity and malnutrition rise sharply at local or national levels, raising the need for emergency food assistance.

This definition distinguishes a food crisis from chronic food insecurity, although food crises are far more likely among populations already suffering from prolonged food insecurity and malnutrition. A food crisis is usually set off by a shock or combination of shocks that affect one or more of the pillars of food security: food availability, food access, food utilization or food stability.

Forced displacement

Forced displacement is an involuntary or coerced movement of a person or people away from their home or home region as a result of persecution, conflict, generalized violence or human rights violations. Displacement is often a side-effect of conflict, food insecurity and weather shocks.

Displaced people are often more vulnerable to food insecurity and malnutrition, having had to abandon their livelihoods and assets, undertake arduous journeys, and settle in areas or camps with limited access to basic services or former social networks. Their rights are often restricted due to host country legal frameworks, resulting in a lack of access to land, employment and freedom of movement. They are often dependent on humanitarian assistance to meet their food needs.

Displaced populations often face severely compromised access to safe water and improved sanitation and are at increased risk of frequent outbreaks of infectious disease, which weakened health systems cannot treat, prevent or control. In crises, children are often not able to access other preventive services such as micronutrient supplementation and immunization, further increasing the risk of malnutrition. Displacement can also result in the breakdown of familial and community networks that provide the necessary support and guidance for looking after young children.

Food insecurity

Food insecurity refers to the lack of secure access to sufficient amounts of safe and nutritious food for normal human growth and development and an active and healthy life. For people to be food secure, food must be both consistently available and accessible in sufficient quantities and diversity, and households must be able to utilize (store, cook, prepare and share) the food in a way that has a positive nutritional impact.

GIEWS assessment (used in country selection for GRFC)

The FAO Global Information and Early Warning System (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 (1) an exceptional shortfall in aggregate food production and supplies; (2) widespread lack of access to food; and (3) severe localized food insecurity.

Internally displaced people

IDPs are those people forced to flee their homes as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights, or natural or human-made disasters, and who have not crossed an international border.

Livelihoods

People's capabilities, assets (both material and social) and activities required for a means of living linked to survival and future well-being, and the policies and institutions that shape or constrain access to assets and choices about activities.

Major food crisis

A food crisis is defined as 'major' if more than 1 million people or more than 20 percent of a total area, region or country population is estimated to be facing IPC/CH Phase 3 or above or equivalent, or if at least one area is classified in Emergency (IPC/CH Phase 4) or worse, or if the country is included in the IASC humanitarian system-wide emergency response-level 3.

Malnutrition

Malnutrition is an umbrella term that covers undernutrition and overweight, obesity and diet-related non-communicable diseases (NCDs) such as heart disease, stroke, diabetes and cancer. See <https://www.who.int/news-room/fact-sheets/detail/malnutrition>.

Undernutrition is a consequence of inadequate nutrient intake and/or absorption, and/or illness or disease. Acute malnutrition (wasting, thinness and/or bilateral pitting oedema), stunting, underweight (a composite of stunting and wasting) and micronutrient deficiencies (e.g. deficiencies in vitamin A, iron) are all forms of undernutrition.

While overweight, obesity and NCDs are not a focus of this report, they often coexist with undernutrition within the same country, community and even individual. Stunted children, for example, face a greater risk of becoming overweight as adults (UNICEF).

Malnutrition has immediate and long-reaching consequences, including stunting children's growth, increasing susceptibility to disease and infections, and contributing to 45 percent of deaths among children aged under 5 (WHO). The determinants of malnutrition also include inadequate access to healthcare, poor water and sanitation services, and inappropriate child-feeding and care practices, as described in the UNICEF framework.

Migrants

According to IOM, migrant is an umbrella term, not defined under international law, reflecting the common lay understanding of a person who moves away from his or her place of usual residence, whether within a country or across an international border, temporarily or permanently, and for a variety of reasons. The term includes a number of well-defined legal categories of people, such as migrant workers; persons whose particular types of movements are legally defined, such as smuggled migrants and those whose status or means of movement are not specifically defined under international law, such as international students.

A migrant with the intention to settle is someone who has reached the final destination country, where the person wishes to remain permanently.

- Transit migrant is someone who is temporarily staying in one or more countries with the objective of reaching a further and final destination country.
- Pendular migrant: Temporary and usually repeated population movements, which may represent a movement pattern within a country and between neighbouring countries.

Minimum Expenditure Basket

A Minimum Expenditure Basket (MEB) is defined as what a household requires in order to meet basic needs, on a regular or seasonal basis, and its average cost. The MEB is a monetary threshold – the cost of these goods, utilities, services and resources – and is conceptually equivalent to a poverty line. It typically describes the cost of meeting one month's worth of essential needs. Since the MEB sets a monetary threshold for what is needed to cover essential needs, the households whose expenditures fall below the MEB are defined as being unable to meet their essential needs. More information is available: <https://docs.wfp.org/api/documents/WFP-0000074198/download/>

Nutritional status

Nutritional status refers to the physiological state of an individual that results from the relationship between nutrient intake and requirements and the body's ability to digest, absorb and use these nutrients.

Nutritious foods

Nutritious foods are referred to as safe foods that contribute essential nutrients such as vitamins and minerals (micronutrients), fibre and other components to healthy diets that are beneficial for growth, and health and development, guarding against malnutrition. In nutritious foods, the presence of nutrients of public health concern (including saturated fats, free sugars and salt/sodium) is minimized, industrially produced trans fats are eliminated, and salt is iodized.

People facing high levels of acute food insecurity

People who are referred to as 'facing high levels of acute food insecurity' are in IPC/CH Phase 3 or above. However, this does not necessarily reflect the full population in need of urgent action to decrease food gaps and protect and save lives and livelihoods. This is because some households may only be classified in IPC/CH Phase 1 or 2 because they receive assistance, and are in fact in need of continued action. In many countries, the number in Crisis or worse (IPC/CH Phase 3 or above) refers to populations in need of action further to that already taken.

People in Need (PiN) vs gap

PiN estimates, used in HNOs, are based on analysis that does not take into consideration humanitarian assistance. This is purely a figure for the number of people who would need assistance. The gap, however, takes into consideration all existing and likely happening assistance, and bases the needs according to unmet needs. In summary, the gap figure is smaller, and should only reflect those who need assistance on top of the assistance already being provided.

Primary driver of acute food insecurity

Although acknowledging that drivers are often interlinked and mutually reinforcing, the GRFC identifies as primary driver the most prominent trigger of acute food insecurity for each country/territory in terms of number of people affected on a yearly basis.

Refugees

A refugee is someone who has been forced to flee his or her country because of persecution, war or violence. Refugees are recognized under various international agreements. Some are recognized as a group or on a 'prima facie' basis while others undergo an individual investigation before being given refugee status. The 1951 Convention and 1967 Protocol Relating to the Status of Refugees provide the full legal definition of a refugee.

Stateless people

A stateless person is someone who does not have a nationality of any country. Some people are born stateless, but others become stateless due to a variety of reasons, including sovereign, legal, technical or administrative decisions or oversights. The Universal Declaration of Human Rights underlines that 'Everyone has the right to a nationality' (UNGA, 1948, article 15).

Stunting

Stunting is associated with physical and cognitive damage which can affect learning and school performance, and lead to lost potential and lower earnings later in life. It can also affect the next generation. Efforts to prevent stunting are most effective in the 1 000 days between conception and a child's second birthday. Stunted children aged under 5 years are identified by a height-for-age z score (HAZ) below -2 of the reference population. Severe stunting is defined as HAZ below -3.

Survival Minimum Expenditure Basket

While the MEB is defined as what a household requires in order to meet their essential needs, on a regular or seasonal basis, and its average cost, the SMEB is the absolute minimum amount required to maintain existence and cover life-saving needs, which could involve the deprivation of certain human rights. However, the concepts of SMEB and MEB have not always been used consistently by the humanitarian community and are sometimes used interchangeably. It is therefore important to be clear from the outset of the analysis whether a MEB or SMEB is the goal. More information is available: <https://docs.wfp.org/api/documents/WFP-0000074198/download/>

Undernourishment

Undernourishment is defined as the condition in which an individual's habitual food consumption is insufficient to provide the amount of dietary energy required to maintain a normal, active, healthy life. For the purposes of this report, hunger is defined as being synonymous with chronic undernourishment. The PoU is used to measure hunger.

Undernutrition

Undernutrition is a consequence of insufficient nutrient intake and/or absorption, and/or illness or disease. Acute malnutrition (wasting and/or bilateral pitting oedema), stunting, underweight (a composite of stunting and wasting) and micronutrient deficiencies (e.g. deficiencies in vitamin A, iron) are all forms of undernutrition.

Vulnerability

Vulnerability refers to the conditions determined by physical, social, economic and environmental factors or processes that increase the susceptibility of an individual, community, assets or systems to the impacts of hazards. Vulnerability to food insecurity is the range of conditions that increases the susceptibility of a household to the impact on food security in case of a shock or hazard.

Wasting

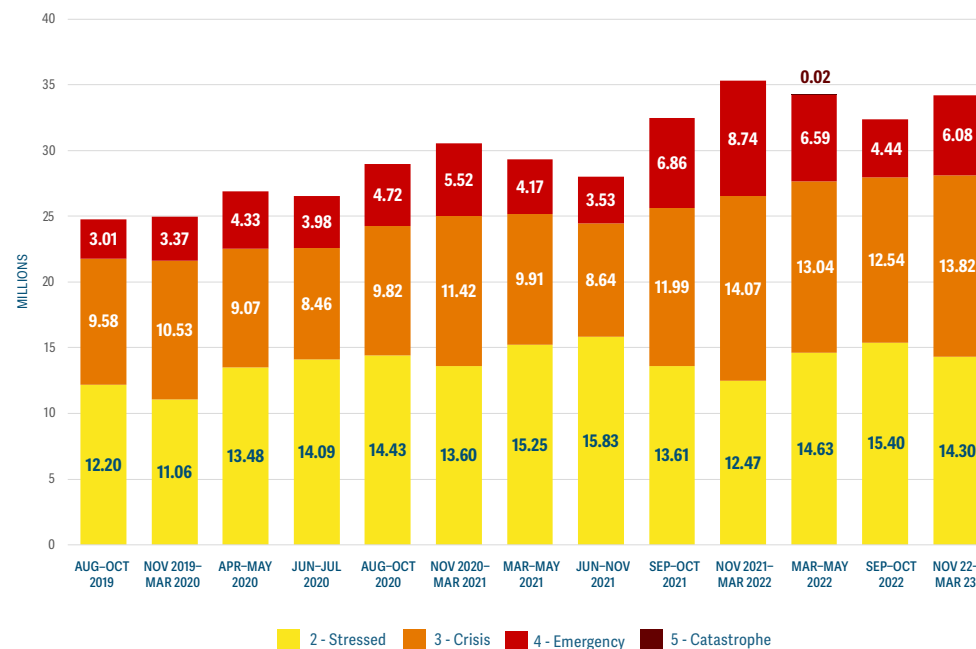
A child who is too thin for his or her height as a result of rapid weight loss or the failure to gain weight is a sign of wasting which, although treatable, can lead to illness, disability or death. Moderate wasting is identified by weight-for-height z scores (WHZ) between -2 and -3 of the reference population, and severe wasting by WHZ below -3. Global Acute Malnutrition reflects both moderate and severe wasting in a population as well as presence of bilateral pitting oedema. Wasting can also be defined by Mid-Upper Arm Circumference (MUAC) measurements ≤ 12.5 cm, with severe wasting defined with a measurement of ≤ 11.5 cm. Wasting is used in this report to describe all forms of acute malnutrition including those diagnosed with oedema. Affected children require urgent feeding, treatment and care to survive. Wasting prevalence depicts the nutrition situation in the general population at a specific time: it can show marked seasonal patterns and can change quickly over time.

The immediate cause of wasting is a severe nutritional restriction as a result of inadequate food intake or recent illness, such as diarrhoea, that hinders appropriate intake and absorption of nutrients.

Trends graphs for numbers of people in IPC/CH Phase 2 or above

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Figure 1 Numbers of people in Afghanistan in IPC Phase 2 or above, 2019–2023

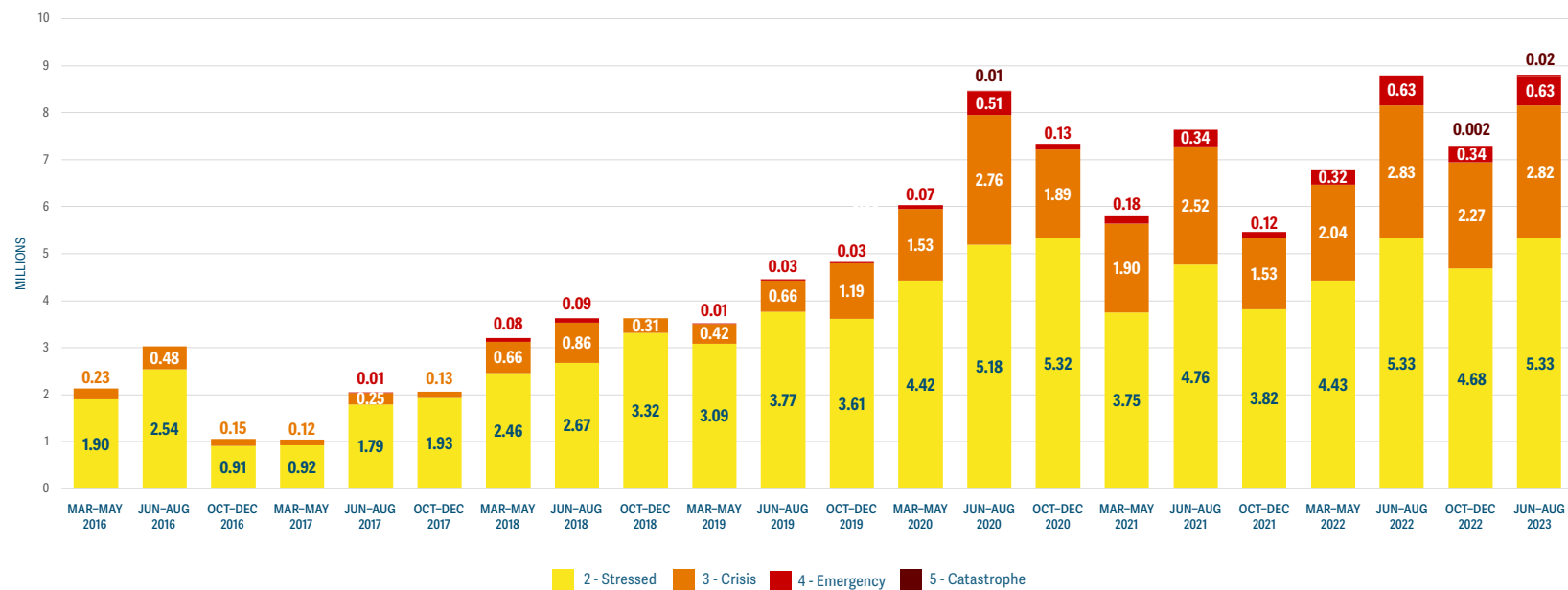


	AUG-OCT 2019	NOV 2019-MAR 2020	APR-MAY 2020	JUN-JUL 2020	AUG-OCT 2020	NOV 2020-MAR 2021	APR-MAY 2021	JUN-AUG 2021	SEP-OCT 2021	NOV 2021-MAR 2022	MAR-MAY 2022	SEP-OCT 2022	NOV 22-MAR 23
STRESSED (PHASE 2)	12.20	11.06	13.48	14.09	14.43	13.60	15.25	15.83	13.61	12.47	14.63	15.40	14.30
CRISIS (PHASE 3)	9.58	10.53	9.07	8.46	9.82	11.42	9.91	8.64	11.99	14.07	13.04	12.54	13.82
EMERGENCY (PHASE 4)	3.01	3.37	4.33	3.98	4.72	5.52	4.17	3.53	6.86	8.74	6.59	4.44	6.08
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.02	0.00	0.00

Data are displayed from 2019 onwards due to the fact that Flowminder population estimates were available from 2019 onwards. The base population used in 2019 was 36.66 million according to Flowminder estimates and rose to 41.7 million by the October 2021 IPC, and to 43.1 million by September 2022.

Source: Afghanistan IPC TWG, HNO 2023, January 2023.

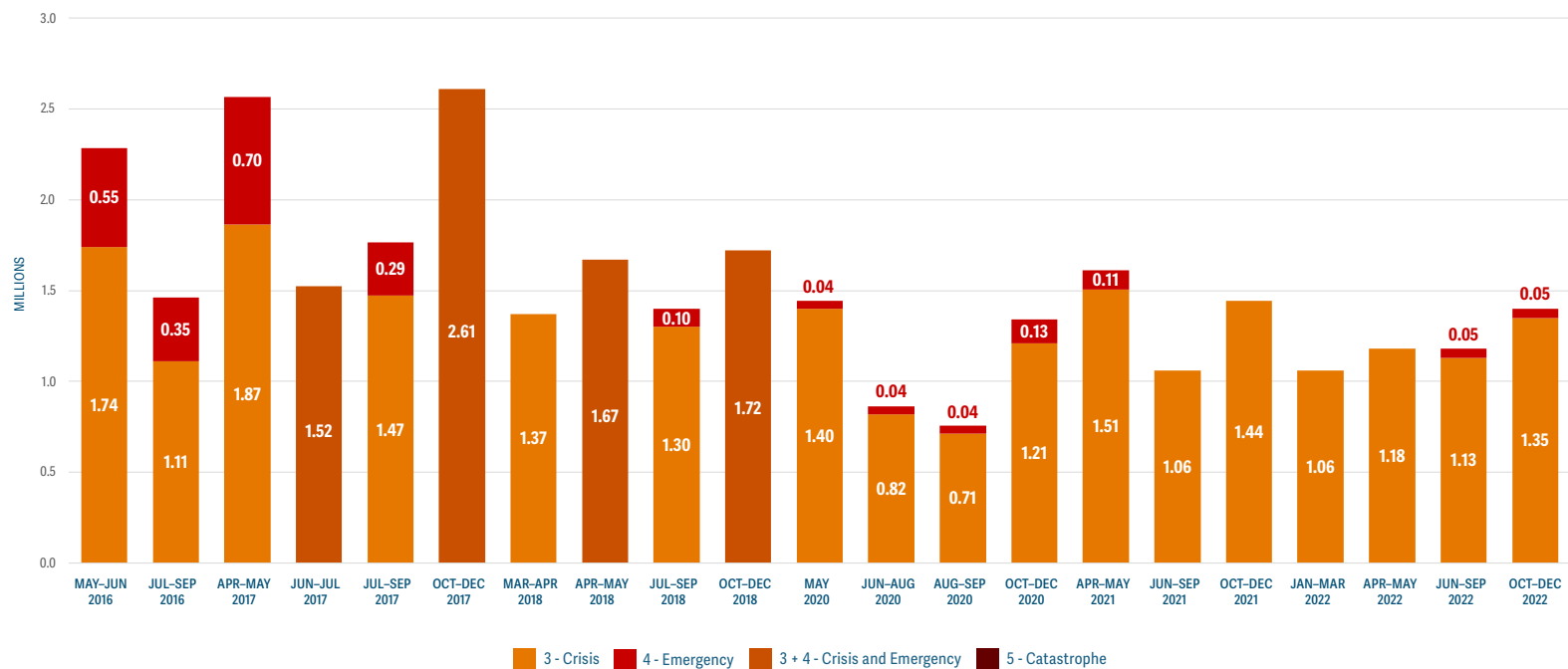
Figure 2 Numbers of people in Burkina Faso in CH Phase 2 or above, 2016–2023



	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	1.90	2.54	0.91	0.92	1.79	1.93	2.46	2.67	3.32	3.09	3.77	3.61	4.42	5.18	5.32	3.75	4.76	3.82	4.43	5.33	4.68	5.33
CRISIS (PHASE 3)	0.23	0.48	0.15	0.12	0.25	0.13	0.66	0.86	0.31	0.42	0.66	1.19	1.53	2.76	1.89	1.90	2.52	1.53	2.04	2.83	2.27	2.82
EMERGENCY (PHASE 4)	0.00	0.00	0.00	0.00	0.01	0.00	0.08	0.09	0.00	0.01	0.03	0.03	0.07	0.51	0.13	0.18	0.34	0.12	0.32	0.63	0.34	0.63
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.002	0.02

Source: CH.

Figure 3 Numbers of people in Burundi in IPC Phase 3 or above, 2016–2022

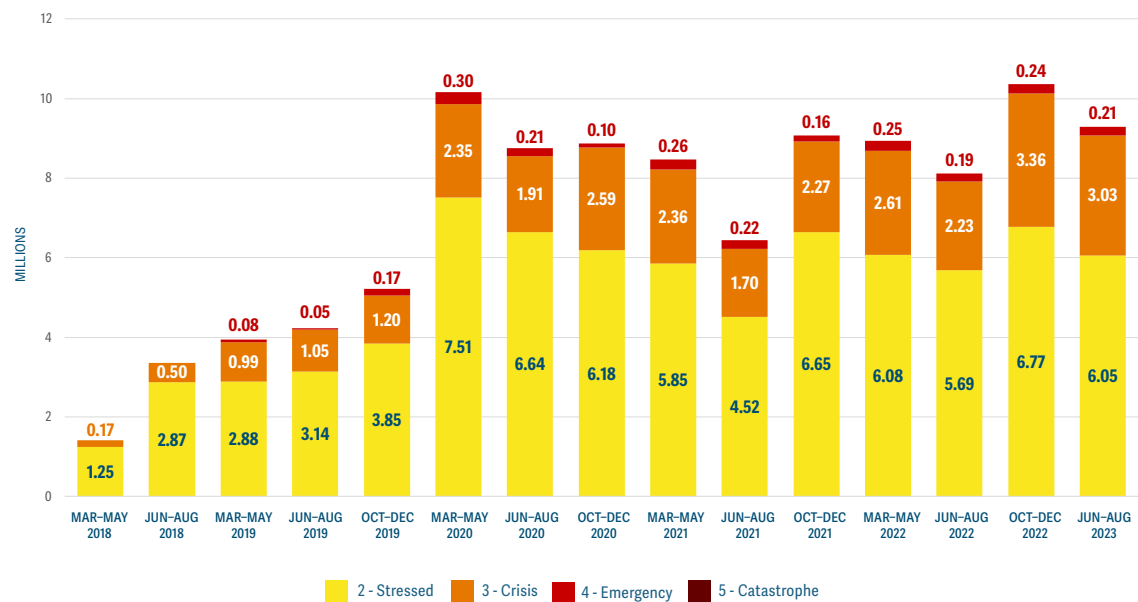


	MAY-JUN 2016	JUL-SEP 2016	APR-MAY 2017	JUN-JUL 2017	JUL-SEP 2017	OCT-DEC 2017	MAR-APR 2018	APR-MAY 2018	JUL-SEP 2018	OCT-DEC 2018	MAY 2020	JUN-AUG 2020	AUG-SEP 2020	OCT-DEC 2020	APR-MAY 2021	JUN-SEP 2021	OCT-DEC 2021	JAN-MAR 2022	APR-MAY 2022	JUN-SEP 2022	OCT-DEC 2022
CRISIS (PHASE 3)	1.74	1.11	1.87		1.47		1.37		1.30		1.40	0.82	0.71	1.21	1.51	1.06	1.44	1.06	1.18	1.13	1.35
EMERGENCY (PHASE 4)	0.55	0.35	0.70		0.29		0.00		0.10		0.04	0.04	0.04	0.13	0.11	0.00	0.00	0.00	0.00	0.05	0.05
CRISIS & EMERGENCY (PHASE 3 + 4)				1.52		2.61		1.67		1.72											

From 2020 onwards, data for disaggregated IPC phases were consistently available.

Source: Burundi IPC TWG.

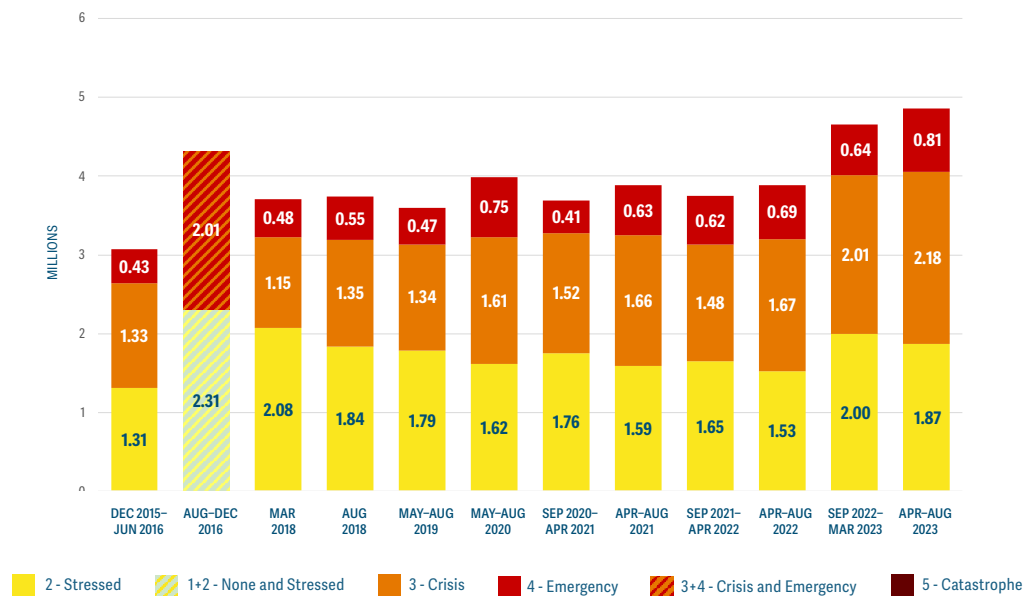
Figure 4 Numbers of people in Cameroon in CH Phase 2 or above, 2018–2023



	MAR-MAY 2018	JUN-AUG 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	1.25	2.87	2.88	3.14	3.85	7.51	6.64	6.18	5.85	4.52	6.65	6.08	5.69	6.77	6.05
CRISIS (PHASE 3)	0.17	0.50	0.99	1.05	1.20	2.35	1.91	2.59	2.36	1.70	2.27	2.61	2.23	3.36	3.03
EMERGENCY (PHASE 4)	0.00	0.00	0.08	0.05	0.17	0.30	0.21	0.10	0.26	0.22	0.16	0.25	0.19	0.24	0.21
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

While the 2020–22 CH analyses provide data for the entire country, the CH analyses of 2018–2019 only covered from four to seven regions so these are not presented here for better comparability.
Source: CH.

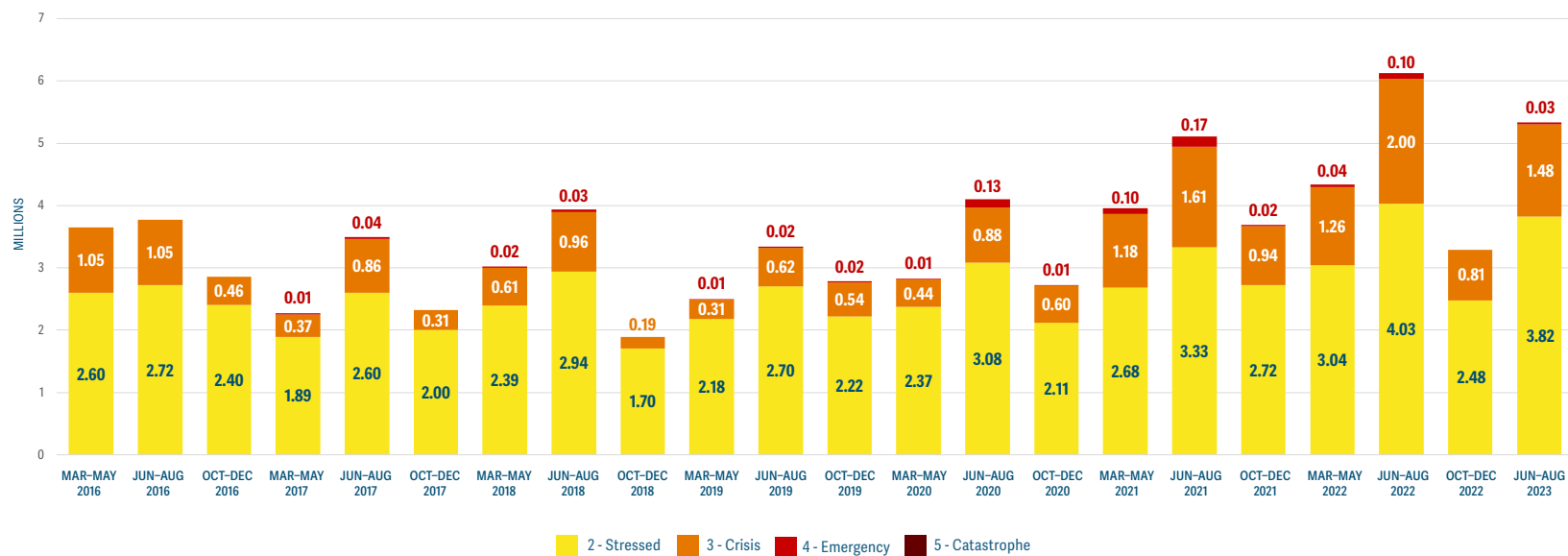
Figure 5 Numbers of people in the Central African Republic in IPC Phase 2 or above, 2016–2023



	DEC 2015–JUN 2016	AUG–DEC 2016	MAR 2018	AUG 2018	MAY–AUG 2019	MAY–AUG 2020	SEP 2020–APR 2021	APR–AUG 2021	SEP 2021–APR 2022	APR–AUG 2022	SEP 2022–MAR 2023	APR–AUG 2023
STRESSED (PHASE 2)	1.31		2.08	1.84	1.79	1.62	1.76	1.59	1.65	1.53	2.00	1.87
NONE AND STRESSED (PHASES 1 & 2)		2.31										
CRISIS (PHASE 3)	1.33		1.15	1.35	1.34	1.61	1.52	1.66	1.48	1.67	2.01	2.18
EMERGENCY (PHASE 4)	0.43		0.48	0.55	0.47	0.75	0.41	0.63	0.62	0.69	0.64	0.81
CRISIS AND EMERGENCY (PHASES 3 & 4)		2.01										
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Country population estimates used in the IPC are based on revised data from the national statistics institute from 4.9 million people in 2021 to 6 million in 2022.
 Source: Central African Republic IPC TWG.

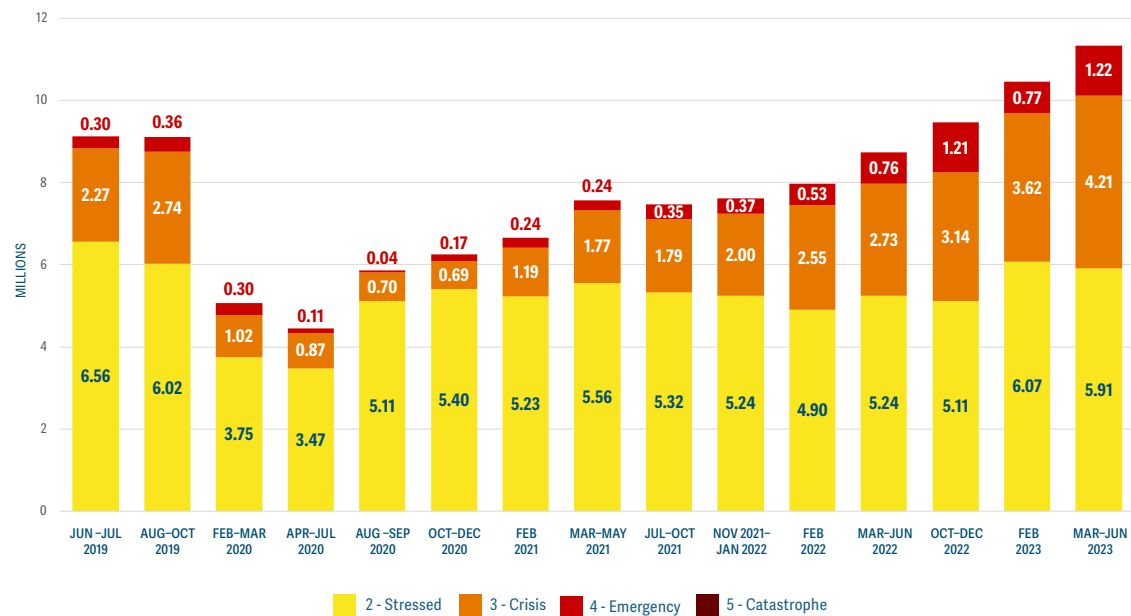
Figure 6 Numbers of people in Chad in CH Phase 2 or above, 2016–2023



	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	2.60	2.72	2.40	1.89	2.60	2.00	2.39	2.94	1.70	2.18	2.70	2.22	2.37	3.08	2.11	2.68	3.33	2.72	3.04	4.03	2.48	3.82
CRISIS (PHASE 3)	1.05	1.05	0.46	0.37	0.86	0.31	0.61	0.96	0.19	0.31	0.62	0.54	0.44	0.88	0.60	1.18	1.61	0.94	1.26	2.00	0.81	1.48
EMERGENCY (PHASE 4)	0.00	0.00	0.00	0.01	0.04	0.00	0.02	0.03	0.00	0.01	0.02	0.02	0.01	0.13	0.01	0.10	0.17	0.02	0.04	0.10	0.00	0.03
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Source: CH.

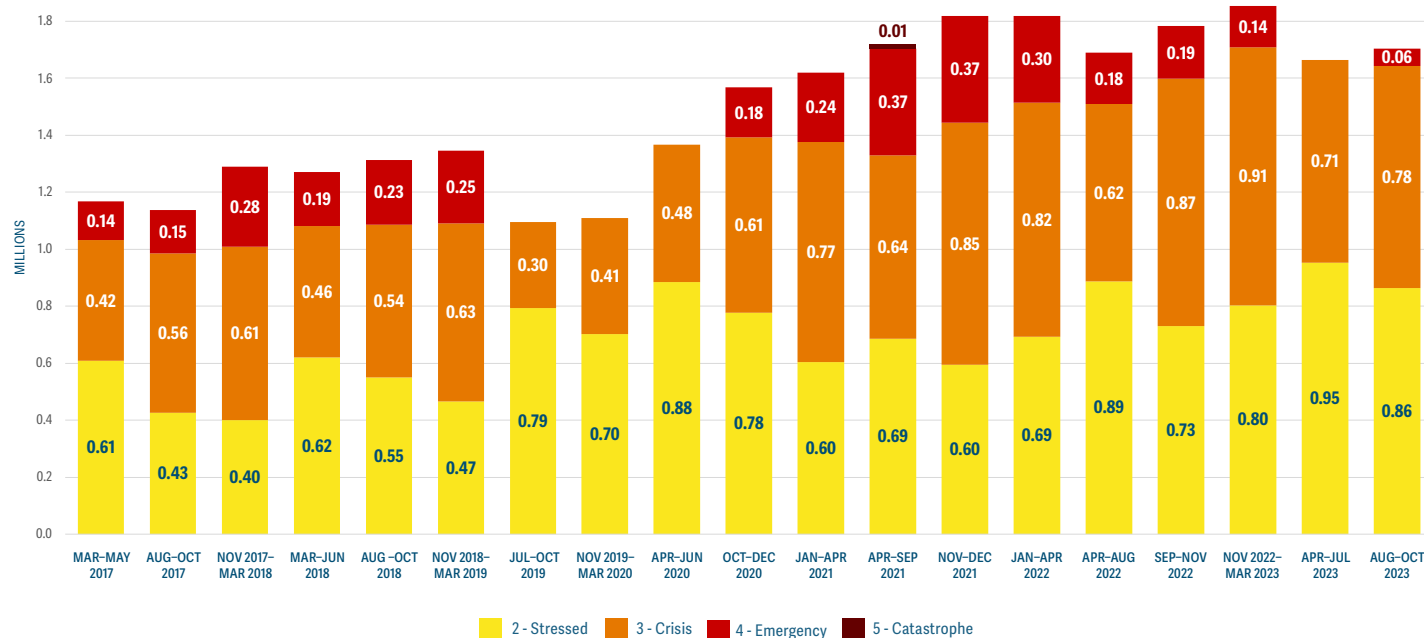
Figure 7 Numbers of people in Kenya in IPC Phase 2 or above, 2019–2023



	JUN-JUL 2019	AUG-OCT 2019	FEB-MAR 2020	APR-JUL 2020	AUG-SEP 2020	OCT-DEC 2020	FEB 2021	MAR-MAY 2021	JUL-OCT 2021	NOV 2021-JAN 2022	FEB 2022	MAR-JUN 2022	OCT-DEC 2022	FEB 2023	MAR-JUN 2023
STRESSED (PHASE 2)	6.56	6.02	3.75	3.47	5.11	5.40	5.23	5.56	5.32	5.24	4.90	5.24	5.11	6.07	5.91
CRISIS (PHASE 3)	2.27	2.74	1.02	0.87	0.70	0.69	1.19	1.77	1.79	2.00	2.55	2.73	3.14	3.62	4.21
EMERGENCY (PHASE 4)	0.30	0.36	0.30	0.11	0.04	0.17	0.24	0.24	0.35	0.37	0.53	0.76	1.21	0.77	1.22
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Source: Kenya IPC TWG.

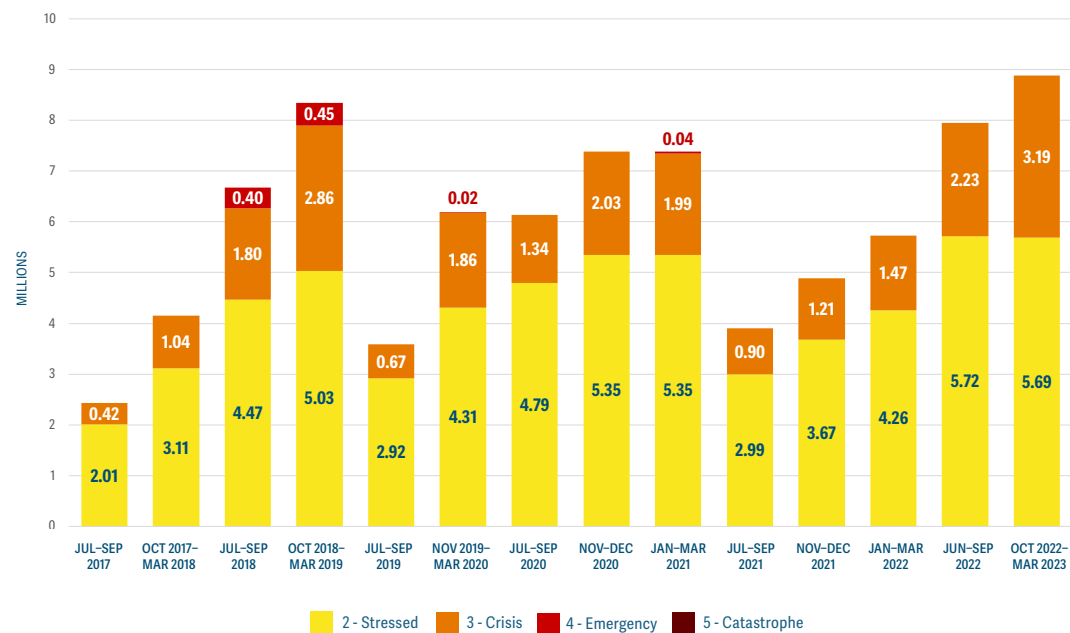
Figure 8 Numbers of people in Madagascar in IPC Phase 2 or above, 2017–2023



	MAR-MAY 2017	AUG-OCT 2017	NOV 2017-MAR 2018	MAR-JUN 2018	AUG-OCT 2018	NOV 2018-MAR 2019	JUL-OCT 2019	NOV 2019-MAR 2020	APR-JUN 2020	OCT-DEC 2020	JAN-APR 2021	APR-SEP 2021	NOV-DEC 2021	JAN-APR 2022	APR-AUG 2022	SEP-NOV 2022	NOV 2022-MAR 2023	APR-JUL 2023	AUG-OCT 2023
STRESSED (PHASE 2)	0.61	0.43	0.40	0.62	0.55	0.47	0.79	0.70	0.88	0.78	0.60	0.69	0.60	0.69	0.89	0.73	0.80	0.95	0.86
CRISIS (PHASE 3)	0.42	0.56	0.61	0.46	0.54	0.63	0.30	0.41	0.48	0.61	0.77	0.64	0.85	0.82	0.62	0.87	0.91	0.71	0.78
EMERGENCY (PHASE 4)	0.14	0.15	0.28	0.19	0.23	0.25	0.00	0.04	0.03	0.18	0.24	0.37	0.37	0.30	0.18	0.19	0.14	0.00	0.06
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Note: This graph only includes the following districts: Ambovombe, Bekily, Eloha, Amboasary, Betioky, Ampanihy and Tsihombe.
Source: Madagascar IPC TWG.

Figure 9 Numbers of people in Malawi in IPC Phase 2 or above, 2017–2023

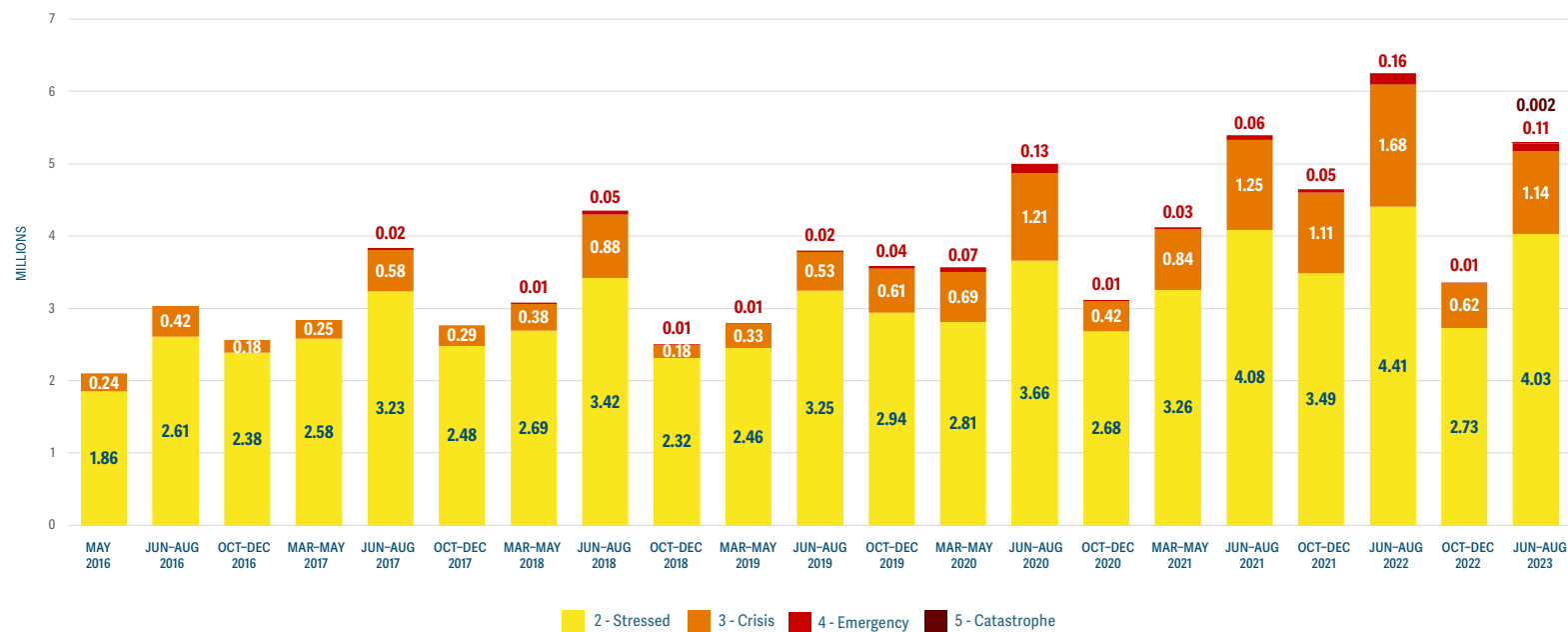


	JUL-SEP 2017	OCT 2017-MAR 2018	JUL-SEP 2018	OCT 2018-MAR 2019	JUL-SEP 2019	NOV 2019-MAR 2020	JUL-SEP 2020	NOV-DEC 2020	JAN-MAR 2021	JUL-SEP 2021	NOV-DEC 2021	JAN-MAR 2022	JUN-SEP 2022	OCT 2022-MAR 2023
STRESSED (PHASE 2)	2.01	3.11	4.47	5.03	2.92	4.31	4.79	5.35	5.35	2.99	3.67	4.26	5.72	5.69
CRISIS (PHASE 3)	0.42	1.04	1.80	2.86	0.67	1.86	1.34	2.03	1.99	0.90	1.21	1.47	2.23	3.19
EMERGENCY (PHASE 4)	0.00	0.00	0.40	0.45	0.00	0.02	0.00	0.00	0.04	0.00	0.00	0.00	0.00	0.00
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

The estimates for Blantyre city, Likoma, Lilongwe city, Mzuzu city, Zomba city (available for July–September 2020, November–December 2020, January–March 2021, July–September 2021, November–December 2021 and January–March 2022) were not included to focus on rural areas only.

Source: Malawi IPC TWG.

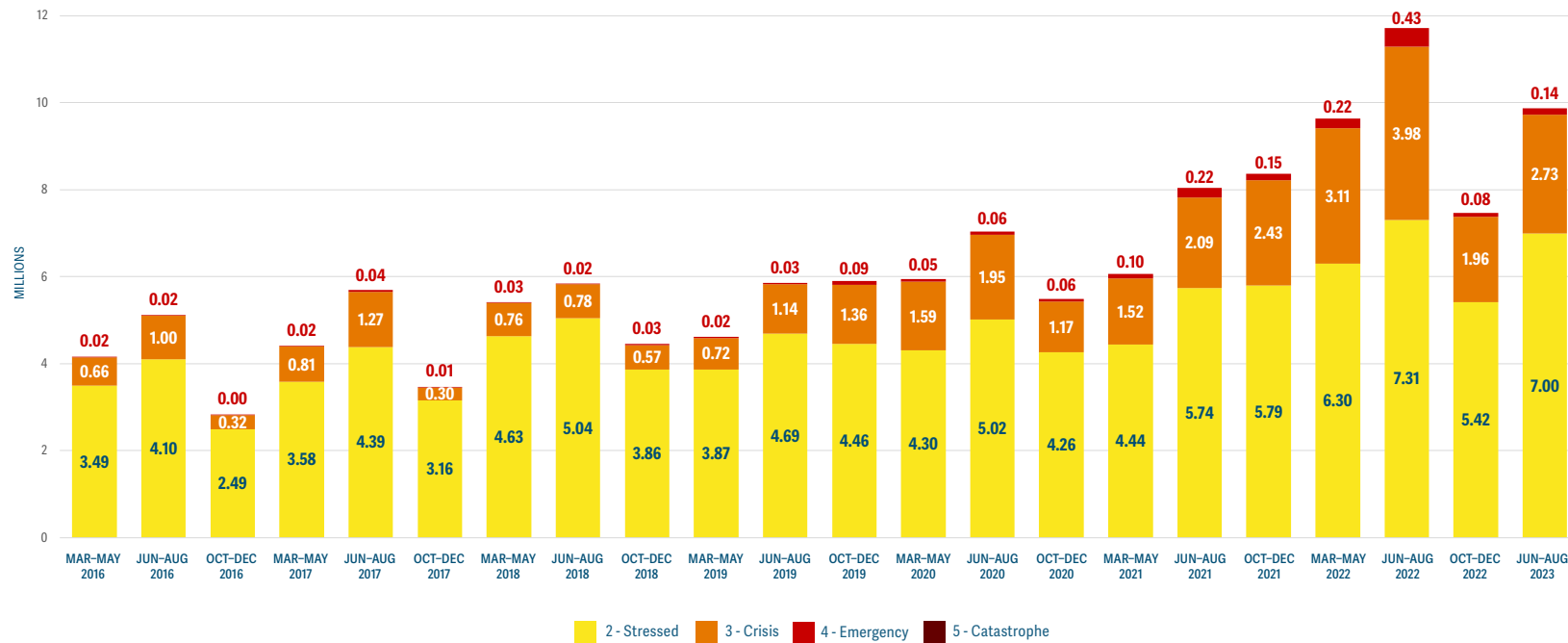
Figure 10 Numbers of people in Mali in CH Phase 2 or above, 2016–2023



	MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	1.86	2.61	2.38	2.58	3.23	2.48	2.69	3.42	2.32	2.46	3.25	2.94	2.81	3.66	2.68	3.26	4.08	3.49	4.41	2.73	4.03
CRISIS (PHASE 3)	0.24	0.42	0.18	0.25	0.58	0.29	0.38	0.88	0.18	0.33	0.53	0.61	0.69	1.21	0.42	0.84	1.25	1.11	1.68	0.62	1.14
EMERGENCY (PHASE 4)	0.00	0.00	0.00	0.00	0.02	0.00	0.01	0.05	0.01	0.01	0.02	0.04	0.07	0.13	0.01	0.03	0.06	0.05	0.16	0.01	0.11
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.002

Source: CH.

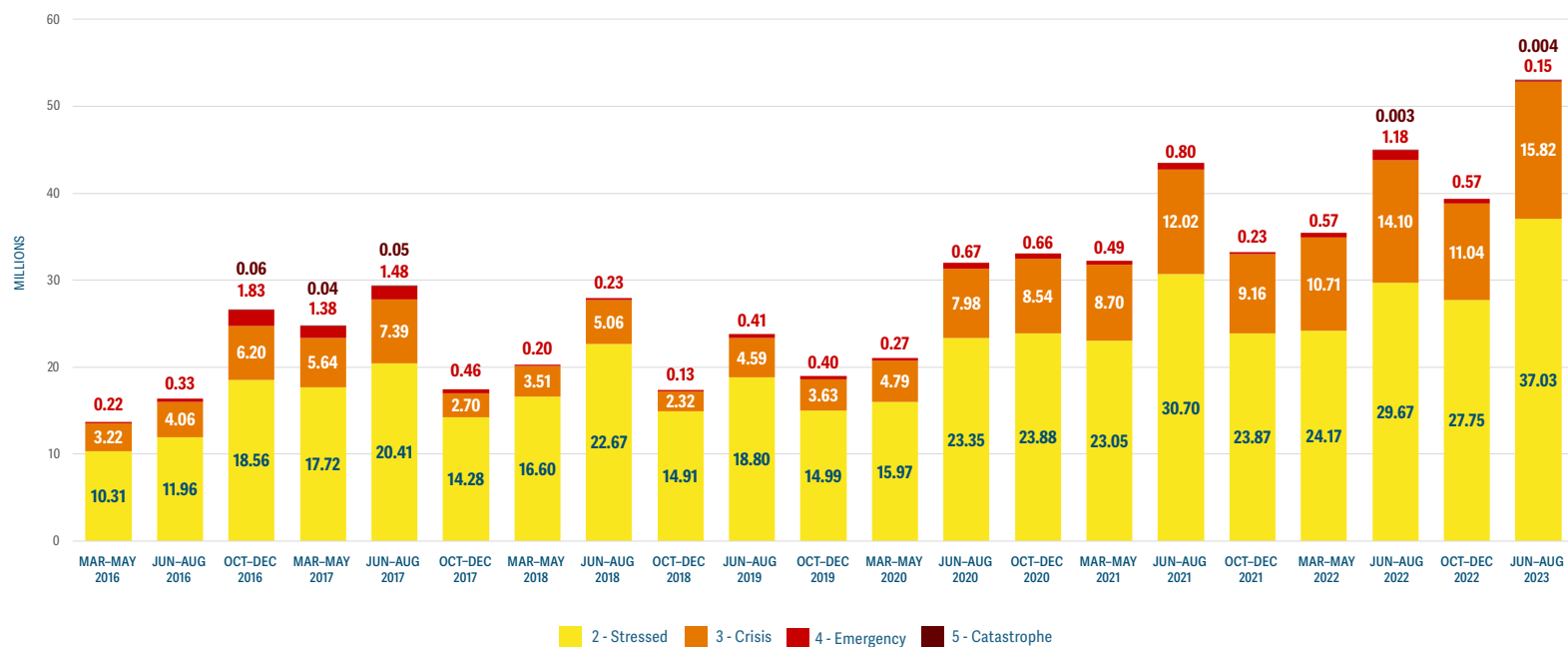
Figure 11 Numbers of people in the Niger in CH Phase 2 or above, 2016–2023



	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	3.49	4.10	2.49	3.58	4.39	3.16	4.63	5.04	3.86	3.87	4.69	4.46	4.30	5.02	4.26	4.44	5.74	5.79	6.30	7.31	5.42	7.00
CRISIS (PHASE 3)	0.66	1.00	0.32	0.81	1.27	0.30	0.76	0.78	0.57	0.72	1.14	1.36	1.59	1.95	1.17	1.52	2.09	2.43	3.11	3.98	1.96	2.73
EMERGENCY (PHASE 4)	0.02	0.02	0.00	0.02	0.04	0.01	0.03	0.02	0.03	0.02	0.03	0.09	0.05	0.06	0.06	0.10	0.22	0.15	0.22	0.43	0.08	0.14
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Source: CH.

Figure 12 Numbers of people in Nigeria in CH Phase 2 or above, 2016–2023

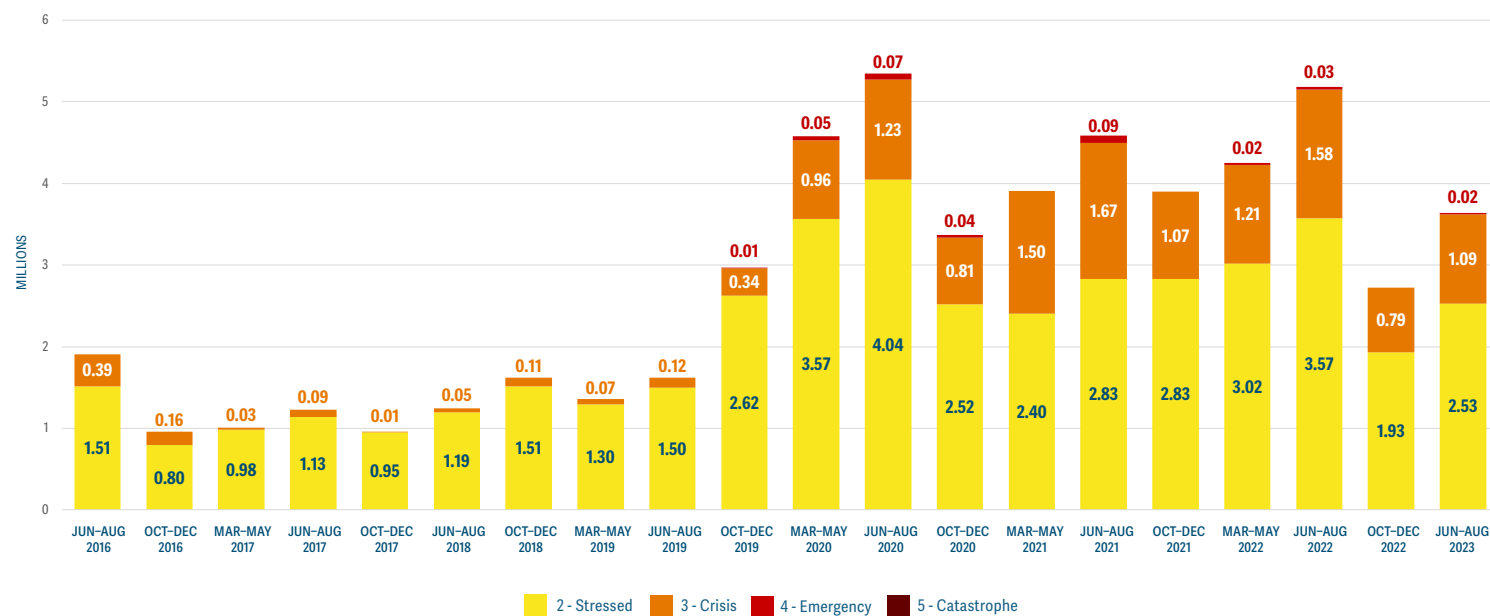


	MAR-MAY 2016	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	MAR-MAY 2018	JUN-AUG 2018	OCT-DEC 2018	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	10.31	11.96	18.56	17.72	20.41	14.28	16.60	22.67	14.91	18.80	14.99	15.97	23.35	23.88	23.05	30.70	23.87	24.17	29.67	27.75	37.03
CRISIS (PHASE 3)	3.22	4.06	6.20	5.64	7.39	2.70	3.51	5.06	2.32	4.59	3.63	4.79	7.98	8.54	8.70	12.02	9.16	10.71	14.10	11.04	15.82
EMERGENCY (PHASE 4)	0.22	0.33	1.83	1.38	1.48	0.46	0.20	0.23	0.13	0.41	0.40	0.27	0.67	0.66	0.49	0.80	0.23	0.57	1.18	0.57	0.15
CATASTROPHE (PHASE 5)	0.00	0.00	0.06	0.04	0.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.004

The analyses carried out between October–December 2016 and June–August 2017 do not cover the Federal Capital Territory; in October–December 2020, the state of Zamfara was not analysed; in March–May 2021, the states of Kebbi and Taraba were not analysed; the analysis of October–December 2019, March–May 2021 and June–August 2021 also covers IDP populations; in October–December 2021 and June–August 2022, the analyses also covered five states (Abia, Cross River, Edo, Enugu and Lagos) not covered in this graph for better comparability with previous rounds.

Source: CH.

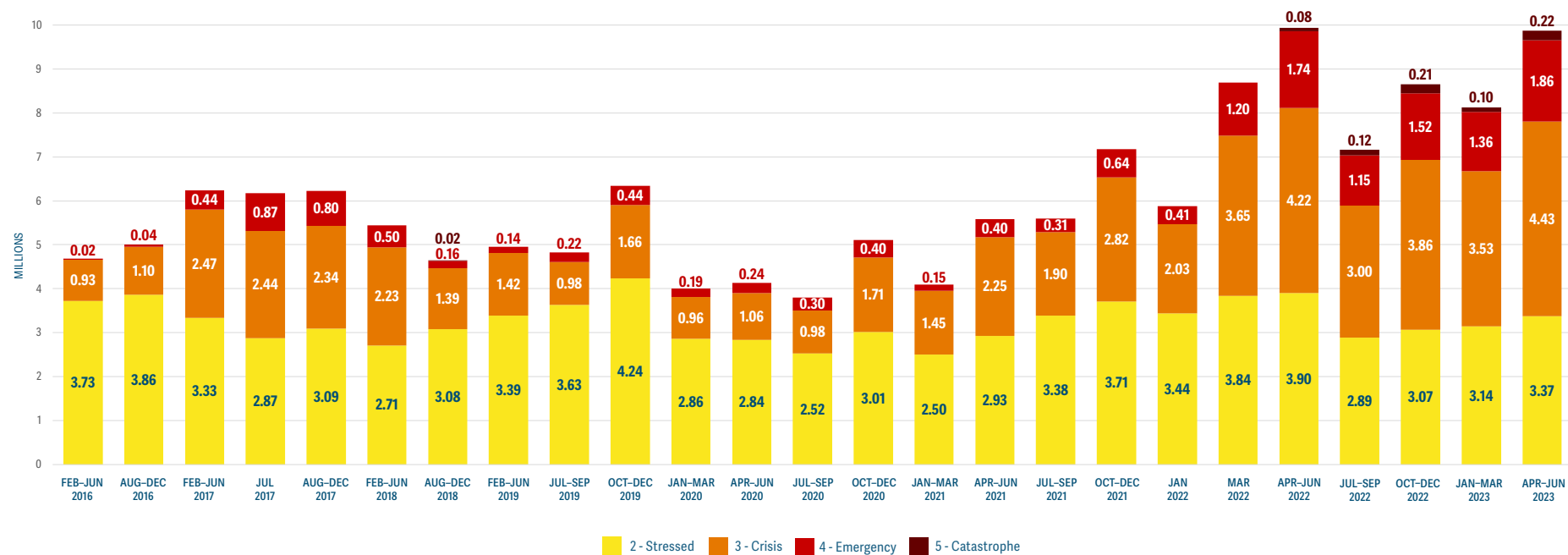
Figure 13 Numbers of people in Sierra Leone in CH Phase 2 or above, 2016–2023



	JUN-AUG 2016	OCT-DEC 2016	MAR-MAY 2017	JUN-AUG 2017	OCT-DEC 2017	JUN-AUG 2018	OCT-DEC 2018	MAR-MAY 2019	JUN-AUG 2019	OCT-DEC 2019	MAR-MAY 2020	JUN-AUG 2020	OCT-DEC 2020	MAR-MAY 2021	JUN-AUG 2021	OCT-DEC 2021	MAR-MAY 2022	JUN-AUG 2022	OCT-DEC 2022	JUN-AUG 2023
STRESSED (PHASE 2)	1.51	0.80	0.98	1.13	0.95	1.19	1.51	1.30	1.50	2.62	3.57	4.04	2.52	2.40	2.83	2.83	3.02	3.57	1.93	2.53
CRISIS (PHASE 3)	0.39	0.16	0.03	0.09	0.01	0.05	0.11	0.07	0.12	0.34	0.96	1.23	0.81	1.50	1.67	1.07	1.21	1.58	0.79	1.09
EMERGENCY (PHASE 4)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.05	0.07	0.04	0.00	0.09	0.00	0.02	0.03	0.00	0.02
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Source: CH.

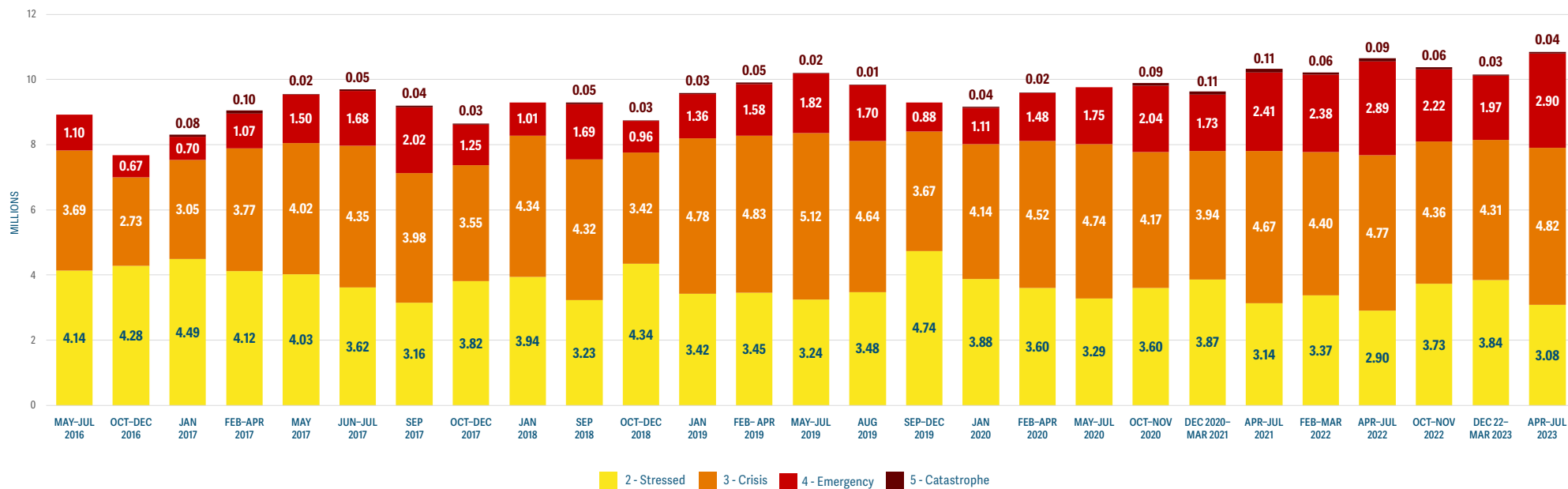
Figure 14 Numbers of people in Somalia in IPC Phase 2 or above, 2016–2023



	FEB-JUN 2016	AUG-DEC 2016	FEB-JUN 2017	JUL 2017	AUG-DEC 2017	FEB-JUN 2018	AUG-DEC 2018	FEB-JUN 2019	JUL-SEP 2019	OCT-DEC 2019	JAN-MAR 2020	APR-JUN 2020	JUL-SEP 2020	OCT-DEC 2020	JAN-MAR 2021	APR-JUN 2021	JUL-SEP 2021	OCT-DEC 2021	JAN 2022	MAR 2022	APR-JUN 2022	JUL-SEP 2022	OCT-DEC 2022	JAN-MAR 2023	APR-JUN 2023
STRESSED (PHASE 2)	3.73	3.86	3.33	2.87	3.09	2.71	3.08	3.39	3.63	4.24	2.86	2.84	2.52	3.01	2.50	2.93	3.38	3.71	3.44	3.84	3.90	2.89	3.07	3.14	3.37
CRISIS (PHASE 3)	0.93	1.10	2.47	2.44	2.34	2.23	1.39	1.42	0.98	1.66	0.96	1.06	0.98	1.71	1.45	2.25	1.90	2.82	2.03	3.65	4.22	3.00	3.86	3.53	4.43
EMERGENCY (PHASE 4)	0.02	0.04	0.44	0.87	0.80	0.50	0.16	0.14	0.22	0.44	0.19	0.24	0.30	0.40	0.15	0.40	0.31	0.64	0.41	1.20	1.74	1.15	1.52	1.36	1.86
CATASTROPHE (PHASE 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.08	0.12	0.21	0.10	0.22

Source: Somalia IPC TWG.

Figure 15 Numbers of people in South Sudan in IPC Phase 2 or above, 2016–2023



	MAY-JUL 2016	OCT-DEC 2016	JAN 2017	FEB-APR 2017	MAY 2017	JUN-JUL 2017	SEP 2017	OCT-DEC 2017	JAN 2018	SEP 2018	OCT-DEC 2018	JAN 2019	FEB-APR 2019	MAY-JUL 2019	AUG 2019	SEP-DEC 2019	JAN 2020	FEB-APR 2020	MAY-JUL 2020	OCT-NOV 2020	DEC 2020-MAR 2021	APR-JUL 2021	FEB-MAR 2022	APR-JUL 2022	OCT-NOV 2022	DEC 2022-MAR 2023	APR-JUL 2023
STRESSED (PHASE 2)	4.14	4.28	4.49	4.12	4.03	3.62	3.16	3.82	3.94	3.23	4.34	3.42	3.45	3.24	3.48	4.74	3.88	3.60	3.29	3.60	3.87	3.14	3.37	2.90	3.73	3.84	3.08
CRISIS (PHASE 3)	3.69	2.73	3.05	3.77	4.02	4.35	3.98	3.55	4.34	4.32	3.42	4.78	4.83	5.12	4.64	3.67	4.14	4.52	4.74	4.17	3.94	4.67	4.40	4.77	4.36	4.31	4.82
EMERGENCY (PHASE 4)	1.10	0.67	0.70	1.07	1.50	1.69	2.02	1.25	1.01	1.70	0.96	1.36	1.58	1.82	1.70	0.88	1.11	1.48	1.75	2.04	1.73	2.41	2.38	2.89	2.22	1.97	2.90
CATASTROPHE (PHASE 5)	0.00	0.00	0.08	0.10	0.02	0.05	0.04	0.03	0.00	0.05	0.03	0.03	0.05	0.02	0.01	0.00	0.04	0.02	0.00	0.09	0.11	0.11	0.06	0.09	0.06	0.03	0.04

In the periods October–November 2020, December 2020–March 2021 and April–July 2021, the population analysed in Jonglei and Pibor administrative area does not include the population from four payams (Marow, Boma, Kiziongora and Miwono) that were not classified due to lack of data. Source: South Sudan IPC TWG.



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Chapter 3

The sources used to the inform the country analyses presented in chapter 3 are also used for the regional sections in chapter 2, including IPC analyses for each country. Please refer to references listed for each separate country as well as the additional references below.

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**Global Network
Against Food Crises**

Integrated actions for lasting solutions

Founded by the European Union, FAO and WFP in 2016, the Global Network Against Food Crises (GNAFC) is an alliance of humanitarian and development actors committed to addressing the root causes of food crises and finding lasting solutions to them, through shared analysis and knowledge, strengthened coordination in evidence-based responses and collective efforts across the humanitarian, development and peace (HDP) nexus.



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*.