Overview

The IPC is a set of standardized protocols (tools & procedures) to classify the severity of food insecurity situations for evidence-based strategic decision making, providing information on where, how many, how bad, why, what characteristics, when and how sure we are.

After many years of use of the IPC approach to inform the need of interventions with short-term objectives to address crisis situations, the version 1.0 of the IPC Chronic Food Insecurity Classification, also abbreviated as IPC-Chronic Classification*, has been developed to complement IPC Acute Food Insecurity Classification and provide invaluable information for decision makers that focus on medium and long term objectives. It makes IPC an inclusive classification system to inform both crisis mitigation and prevention as well as structural and developmental policies and programs.

Starting from the introduction of the prototype tools for chronic food insecurity analysis in the version 2.0 of the IPC Technical Manual (2012), over two years of preparation and piloting of improved prototypes, numerous and intense multi-partner technical discussions led to the finalization of the version 1.0 of the IPC Chronic Food Insecurity Classification.

A multi-partner technical working group including experts from EC-JRC, FAO, FEWS-NET, ICF, WFP, USAID-FANTA, Save the Children, SICA-PRESANCA and the World Bank was crucial all along the development process and in achieving the finalized parameters, tools and procedures, and associated guidance for the roll-out of the IPC chronic food insecurity classification.

FOCUS and BENEFITS

⇒ Measure the extent, severity and underlying factors of persistent food insecurity.
⇒ Clarify differences between the causes, outcomes and character of acute and chronic food insecurity.
⇒ Focus on the analysis of structural and underlying causes of food insecurity.
⇒ Detangles chronic food insecurity from poverty.
⇒ Informs medium and long-term programmes and policies to address structural inefficiencies and poverty.

NEW TOOLS

The IPC chronic food insecurity analysis follows the IPC core principles, such as consensus building and convergence of evidence, and is conducted according to the four IPC core functions.

New specific tools and procedures are featured to classify the chronic food insecurity conditions and to communicate the analysis results. In particular:

⇒ IPC Chronic Food Insecurity Reference Table, a four-level scale to classify the severity of chronic food insecurity of population groups based on common reference indicators. It provides a description of each level of chronic food insecurity and key implications for response;
⇒ The Analysis Worksheets for the analysis of evidence and underlying factors of chronic food insecurity; and
⇒ The New Communication Template and Mapping Protocols to reflect the final overview of chronic food insecurity situation analysis, main conclusions and key implications for medium and long-term response planning and decision-making.

*For easy reference, abbreviations can be used to refer to the IPC Acute and/or Chronic Food Insecurity Classification, specifically: IPC–Acute classification (or analysis); IPC-Chronic classification (or analysis). More information can be found on the IPC website.
## DIFFERENCES BETWEEN IPC CHRONIC AND ACUTE FOOD INSECURITY ANALYSIS

<table>
<thead>
<tr>
<th>Factor</th>
<th>Chronic</th>
<th>Acute</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Relevance</strong></td>
<td>To inform actions that focus on improving quality and quantity of food consumption through strengthening and rebuilding livelihoods and resilience through complementary programs.</td>
<td>To inform actions that focus on preventing, mitigating, and decreasing severe food insecurity that threatens lives or livelihoods.</td>
</tr>
<tr>
<td><strong>Definition</strong></td>
<td>Food insecurity that persists due to structural causes.</td>
<td>Food insecurity found in a specified area at a specific point in time and of a severity that threatens lives and/or livelihoods regardless of the causes, context or duration.</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>To inform medium and long term strategic objectives</td>
<td>To inform short term strategic objectives</td>
</tr>
<tr>
<td><strong>Scale</strong></td>
<td>4 Levels of CFI – (1) Minimal/No, (2) Mild, (3) Moderate, (4) Severe.</td>
<td>5 Phases – (1) Minimal/None, (2) Stressed, (3) Crisis, (4) Emergency, (5) Catastrophe/Famine.</td>
</tr>
<tr>
<td><strong>Susceptibility to change</strong></td>
<td>Low: changes are slow and happen gradually</td>
<td>High: dynamic, degree of acute FI can and often does change quickly</td>
</tr>
<tr>
<td><strong>Validity period</strong></td>
<td>Long-term/ 3 -5 years</td>
<td>Short – days /weeks/ months</td>
</tr>
<tr>
<td><strong>Indicators</strong></td>
<td>Persistence is determined based on analysis of conditions under non-exceptional circumstances. ♦ Quick-changing indicators ♦ Slow-changing indicators</td>
<td>Quick-changing indicators analyzed for current or projected situation through “snap-shots”.</td>
</tr>
<tr>
<td><strong>Focus on food consumption</strong></td>
<td>Food consumption quality and quantity</td>
<td>Mainly food consumption quantity</td>
</tr>
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</table>
AN ALL INCLUSIVE DEVELOPMENT PROCESS

The development process of the IPC Chronic Food Insecurity Classification started in 2011 with the development of an initial prototype, which was included in the version 2.0 of the IPC Technical Manual in 2012. Over time and as the IPC Acute Food Insecurity Classification was rolled out to different countries around the world, governments and country teams demanded not only tools for acute food insecurity analysis, but better information and measurements on the extent and severity of chronic food insecurity.

To ensure global applicability the IPC Global Steering Committee prioritized the further development of tools and procedures for chronic food insecurity analysis and, in line with the IPC inclusive and consultative approach, the IPC Chronic Working Group was established in 2012 and engaged in a two-year long process involving more than 200 professionals from 10 different countries in Asia, Southern Africa, East and Central Africa, and Latin America.

The first round of piloting took place between September 2012 and February 2013 in Nepal, Zimbabwe, Malawi, Lesotho, the Philippines, and Honduras. A second round of piloting took place at the end of 2013 and involved Kenya, Bangladesh, Guatemala and Southern Africa. The pilots gave valuable feedback on the technical details and also on the analysis process, which was reviewed by the working group and helped improve the prototype and finalize tools.

The version 1.0 of the IPC Chronic Food Insecurity Classification was endorsed by the IPC Steering Committee in February 2014 and was officially launched in July 2014 in the context of the IPC Global Event on the “Use and Impact of IPC at Global, Regional, Country Level” which took place 1-2 July 2014 at FAO-HQs.

On the left, IPC Chronic Working Group Meeting, Rome, May 2013
Below, IPC Chronic Pilot in Philippines, February 2013
ROLL-OUT OF THE IPC-CHRONIC CLASSIFICATION

Country demand for the IPC Chronic Classification is high, and already many countries have requested its implementation in 2014. The roll-out consists of 6 Steps to implement the chronic food insecurity classification in 8 target countries in 2014: Nepal, Bangladesh, Philippines, Burundi, Kenya, Uganda, Malawi, and El Salvador. From 2015 to 2018, the roll-out is planned to continue in an further 36 to 40 countries.

As part of the rollout, the IPC Global Support Unit will be working with the government and development partners to more effectively link the results of the IPC chronic analysis – with a review of how they can be used to help inform medium and long term programming and policy to more effectively address chronic food insecurity.

In addition to the field application of the IPC-Chronic Classification, an addendum on the IPC Chronic Food Insecurity - key parameters, tools and procedures – will be included in the IPC Technical Manual version 2.0. The addendum and training materials on the IPC-Chronic are expected to be released in September 2014.

6 STEPS for the Implementation of the IPC-Chronic Classification at Country Level

1. INTRODUCTION & PLANNING
2. TRAINING 1: Data Requirement & ISS for Chronic
3. EVIDENCE COLLECTION
4. TRAINING 2: IPC-Chronic Classification
5. IPC CHRONIC ANALYSIS & VALIDATION
6. PRODUCTION & DISSEMINATION OF RESULTS

IPC CHRONIC TECHNICAL WORKING GROUP

The working group includes led technical experts from the different IPC global partners (FAO, WFP, FEWSNET, Save the Children and EC-JRC) and from other institutions, including the ICFI, FANTA-USAID, SICA-PRESANCA, and the World Bank.

For updates and additional information, visit the IPC web site at: http://www.ipcinfo.org/ipcinfo-technical-development/ipc-chronic-scale/en/

IPC Global Steering Committee Members:

The IPC development and implementation is made possible by the support of:

The IPC has also benefited from the support of the governments of Australia, Canada, Germany, the Netherlands, Sweden, and the United States of America.