Overview
Karamoja, located in the northeast, is one of the poorest regions in Uganda, with income poverty at 61% and food poverty at 70% (UNHS, 2016/17). The population is mainly rural, with livelihoods based on livestock and crop production, and of recent, a growing range of diversified livelihood activities. The region continues to have the highest food insecurity and malnutrition levels in Uganda due to factors related to inadequate food, poor dietary diversity, structural poverty, limited livelihood options, poor hygiene and sanitation, and disease, with a recent overall improvement in safe water source access but low water use. The region also faces a predisposition to recurrent climate-related shocks such as extended mid-season dry spells/drought, erratic rainfall that often causes floods/waterlogging, and the COVID-19 pandemic.

Acute Food Insecurity (AFI)
About 30% of the analyzed population in the six districts of Karamoja (361,000 people) are experiencing high levels of food insecurity (IPC Phase 3 or above) between March and July 2021. In terms of severity, the districts with the highest percentage of people in IPC Phase 3 or above are Kotido (46%), Kaabong (40%), Moroto (35%), Nakapiripirit (35%), Kaabong (40%), Kaabong (40%), Moroto (35%), Nakapiripirit (35%) and Napak (35%); while Kaabong, Kotido, Moroto and Nakapiripirit all have 10% in Emergency (IPC Phase 4). The key drivers of acute food insecurity include insecurity, the impact of the COVID-19 pandemic and high food prices. During the projection period (August 2021 – January 2022), the food security situation in the Karamoja region is expected to improve. Of the nine districts in the region, three districts are anticipated to be in IPC Phase 3 (Crisis) and six districts are anticipated to be in IPC Phase 2 (Stressed) during the projection period.

Acute Malnutrition (AMN)
During the lean season of 2021, February – July 2021, of the nine districts in the Karamoja region, one district has Critical levels of acute malnutrition (IPC AMN Phase 4), four districts have Serious levels of acute malnutrition (IPC AMN Phase 3), and four districts have Alert levels of acute malnutrition (IPC AMN Phase 2). About 56,600 children in these nine districts are affected by acute malnutrition and need treatment. Approximately 46,300 children are moderately malnourished, while over 10,200 children are severely malnourished. Around 10,000 pregnant or lactating women are also acutely malnourished. Kaabong district has Critical levels of acute malnutrition with a Global Acute Malnutrition (GAM) prevalence of 18.6%. Amudat, Kotido, Moroto and Napak districts have Serious levels of acute malnutrition, with GAM prevalences of 10.9%, 10.4%, 14.2% and 9.4%, respectively. The districts with Alert levels of acute malnutrition are Abim (GAM 6.3%), Karamoja (GAM 9.6%), Nakapiripirit (GAM 8%) and Nakapiripirit (GAM 8.2%). Karamoja has high levels of acute malnutrition, with a slight chance of slipping into IPC AMN Phase 3 during the projection period (August 2021 - January 2022).

Linkages between AFI and AMN
Based on both AFI and AMN analyses of Karamoja, the current results indicate a similar classification in Karamoja, Nakapiripirit, Moroto, Kotido and Napak. The remaining districts of Kaabong, Nabilatuk, Amudat and Abim showed different classifications for AFI and AMN, with high levels of AMN but low levels of AFI in Kaabong and Amudat, while Nabilatuk and Abim had high levels of AFI and low levels of AMN. Notably, Kaabong and Amudat had different classifications, with severe AMN classifications mainly attributed to a combination of very poor quality and quantity of food, high food insecurity, poor sanitation / latrine coverage, low per capita water use and reduced child care and inadequate breastfeeding, exposing the children to recurrent infections leading to increased malnutrition incidences.

Contributing Factors Acute Malnutrition
Poor Food Consumption
Inadequate food consumption, which is manifested in low Minimum Dietary Diversity (MDD), and Minimum Acceptable Diet (MAD) for children, is a significant factor for acute malnutrition among under-fives in this region.

Diseases
Malaria and diarrhoea cases are still high in some districts, which places severe disease burden on the children, eventually leading to malnutrition.

High Levels of Anaemia
High levels of anaemia (both among children and women) are significant public health concerns that call for urgent attention in all districts. Across the entire region, 59% of the children under five are estimated to be anaemic.