



IPC Technical Guidance Note

Data Sources for IPC Acute Malnutrition Analyses

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IPC AMN analyses can rely on different types of data sources. Nutrition surveys (such as SMART) are classified as a 'Good' method (IPC-M2). However, analyses can also be carried out using limited methods (IPC-M1). In such cases, the availability of recent data (IPC-T1) from the same season as the analysis is essential to meet the minimum requirements on the main outcome – the Global Acute Malnutrition (GAM).



For detailed information, please refer to pages 164-165 of the <u>IPC Manual</u>	
DATA SOURCES	MINIMUM REQUIREMENTS
NUTRITION SURVEY (M2)	
Surveys that are representative at the unit of analysis with data collected on children aged 6-59 months. Anthropometric indicators can include GAM based on WHZ and/or based on MUAC (including bilateral oedema), and other key contributing factors. <u>SMART surveys</u> is the gold standard, however, rapid SMARTs, MICS/ DHS, KAP, and SENS and others methods are applicable.	 * Representative at the unit of analysis. * From the same analysis season, in case of seasonality (T2) or from the previous season (T1). * Design: ≥25 clusters (if cluster-based sampling) or ≥150 children (if simple or systematic random sampling). * Quality checked at ≤25 Plausibility Score and SD-WHZ < 1.2.
FOOD SECURITY & NUTRITION SURVEY (M1) Coordination between the Food Security Cluster and the Nutrition Cluster allows food security surveys to integrate a nutrition component and to collect data on GAM. JANSFA methodology is the gold standard, however, the FSNMS, CFSVA, EFSA, FSMS, etc., methods are also applicable.	 * All requirements applicable to Nutrition Survey, however the minimum number of clusters can be lowered to 20. * From the same analysis season, in case of seasonality (T2). * Training: standardization test mandatory. * Supervision: field supervision during data collection required. * Monitoring: daily quality checks conducted during data collection.
SENTINEL SITES (M1) Community-based surveillance system with periodical anthropometric measurement on specific areas generally selected intentionally on the basis of a predefined criteria. Only <u>community-based Sentinel Sites</u> are compatible with the IPC (Health Facility-based sentinel sites are not allowed).	 * ≥5 sites per unit of analysis with ≥200 total observations (if the area is pastoral, ≥5 sites with 100 observations is acceptable). * From the same analysis season, in case of seasonality (T2). * Quality: ≤25 Plausibility Score (GAM-WHZ) or MUAC quality requirement.
SCREENINGS (M1) Rapid population-based assessments, typically conducted to obtain an overview of the nutrition situation. Screenings can be <i>exhaustive</i> - when measuring at least 80% of the children aged 6-59 in the unit of analysis - <i>randomly</i> or <i>purposively</i> targeting a selected area. In the selected area, children can be screened exhaustively (if there are less than 200 children in the area) or randomly if there are less than 200 children.	 * Actual MUAC measurement needs to be recorded (colour code only does not meet the IPC minimum requirements). * Variable gender and age (in months or categorized into 6-23 and 24-59) should be collected. * Exhaustive screening (door to door) at the unit of analysis (>80% coverage), or Screening from ≥3 sites (selected randomly or purposively, for variability reasons) from the unit of analysis totaling ≥600 observations (selected randomly or with ≥80% coverage). * From the same analysis season, in case of seasonality (T2). * Quality: <u>MUAC quality requirement.</u>
IPC AMN analysis can also be conducted when recent and repr specific conditions, historical evidence and data from similar n	esentative data collection could not occur. In this case, under earby areas can also be used to classify.
HISTORICAL GAM-WHZ (M1) Historical evidences (only GAM based on WHZ) from survey representative at the unit of analysis (IPC M2) and from the same season can be used in IPC AMN analyses. This evidence must be converged with other contributing factors.	 Historical evidence can be used if : There are at least 2 data points of GAM based on WHZ rates collected from the same season as that of the analysis in the previous 5 years, The two or more data points show the same IPC AMN phase from typical or similar years.

• No major shocks or changes have occurred affecting acute malnutrition contributing factors between the data points and the period of analysis.

SURVEY FROM SIMILAR AREAS (M1) Representative surveys from similar areas (only for GAM based on WHZ) can be used to classify a given unit of analysis when evidence is unavailable from the same unit.

Estimates from similar areas can only be used if they were collected from representative surveys and within the same season of analysis.

Two areas may be considered similar if:

- They follow the same livelihood, seasonality and ecological patterns.
- Surveys from both areas in the past indicated comparable estimates.
 Recent contributing factors justify no significant changes in the context.

In humanitarian situations where access to affected populations is limited or non-existent, information required for IPC analysis is often unavailable, or the available information does not meet the IPC minimum criteria. Classification can still be completed under specific conditions, as described in the IPC Guidance for data collection in these areas. Considering that this data requires contextualization, it is recommended to contact the IPC Global Support Unit for further guidance.