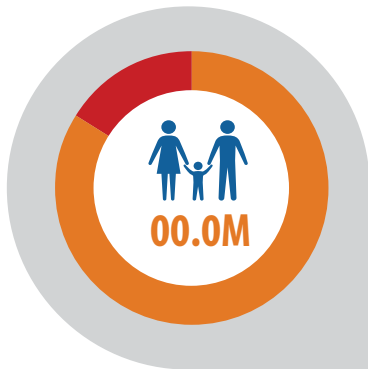


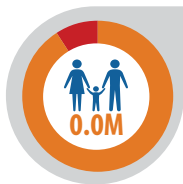
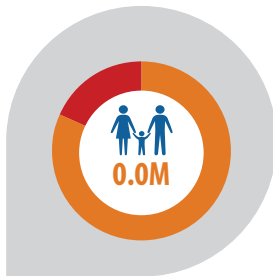
Country Name

Crisis

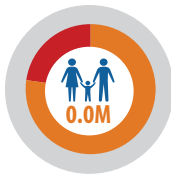
Emergency



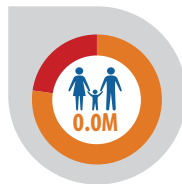
Country Name



Country

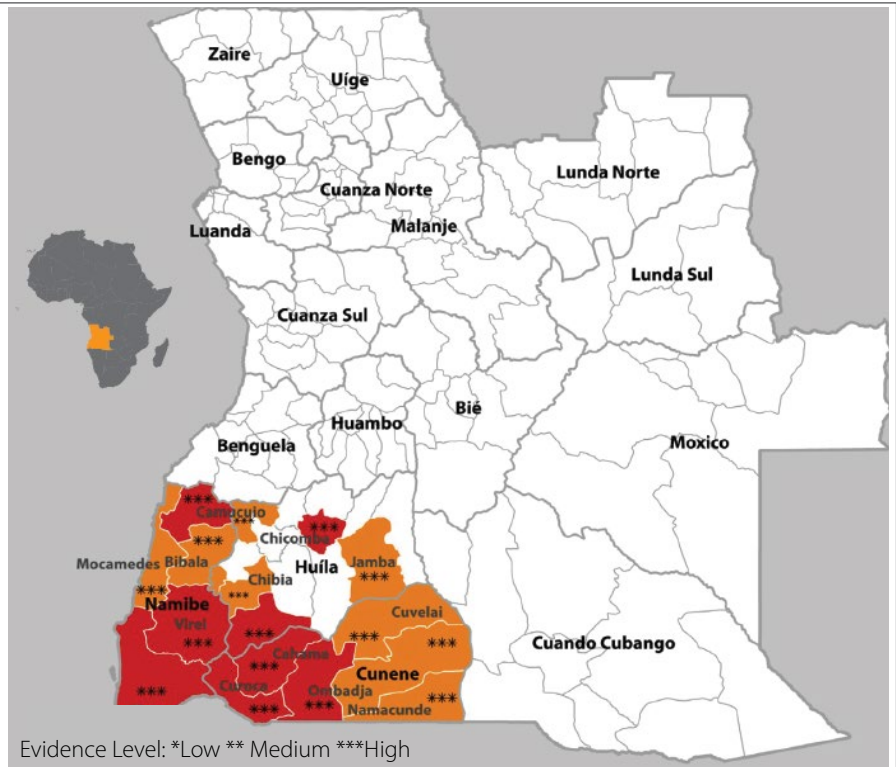


Country



Country

ANGOLA: Projection | October 2021 – March 2022



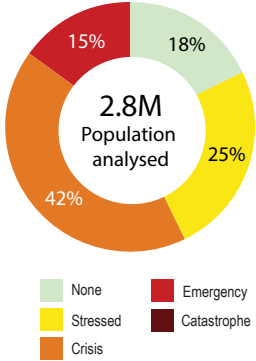
Projected Acute Food Insecurity | October 2021 - March 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between October 2021 and March 2022

Key Drivers

- Drought
- High Food Prices
- Locusts

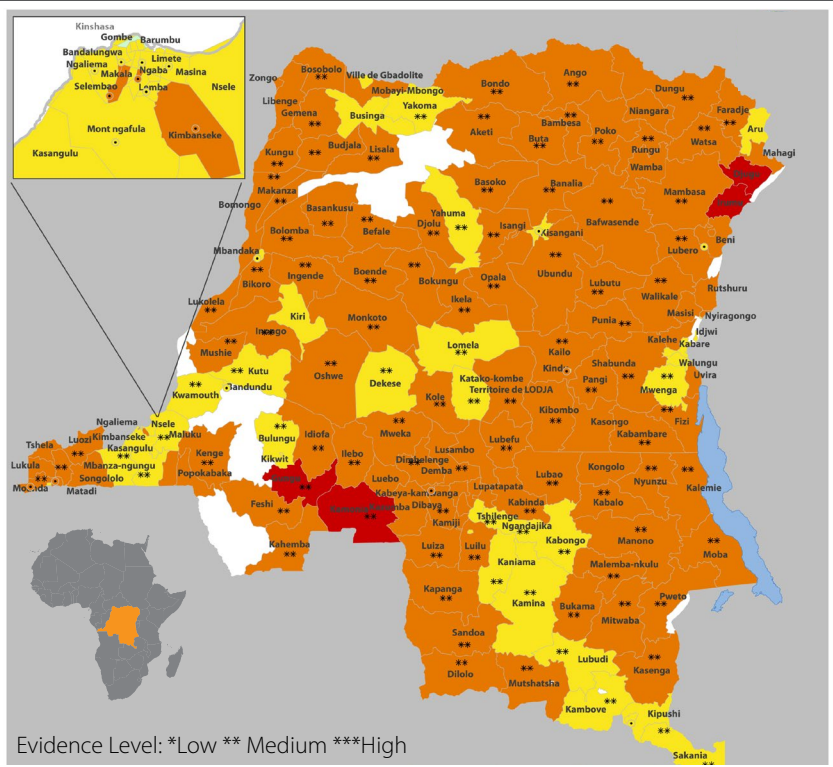


Overview

The worst drought in the last 40 years and rising food prices have resulted in high acute food insecurity in the Cunene, Huila and Namibe provinces of South-Western Angola. The poor harvests have severely affected people's access to food in this region, which is highly dependent on agriculture and has also adversely affected the nutrition situation. As food reserves are depleting, the situation has deteriorated, likely having worsened during the lean season. Between October 2021 and March 2022, 1.58 million people will likely experience high levels of acute food insecurity (IPC Phase 3 or above) in 17 municipalities of this region, including over 400,000 people in Emergency conditions (IPC Phase 4). There are also an estimated 114,000 cases of acute malnutrition in children under the age of five in ten municipalities of this region.

[See full IPC analysis here](#)

DEMOCRATIC REPUBLIC OF CONGO: Projection | January - June 2022



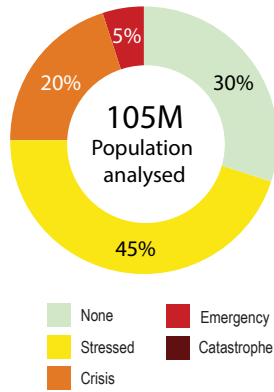
Projected Acute Food Insecurity | January - June 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between January and June 2022

Key Drivers

- Conflict & Insecurity
- Poor Production
- High Food Prices

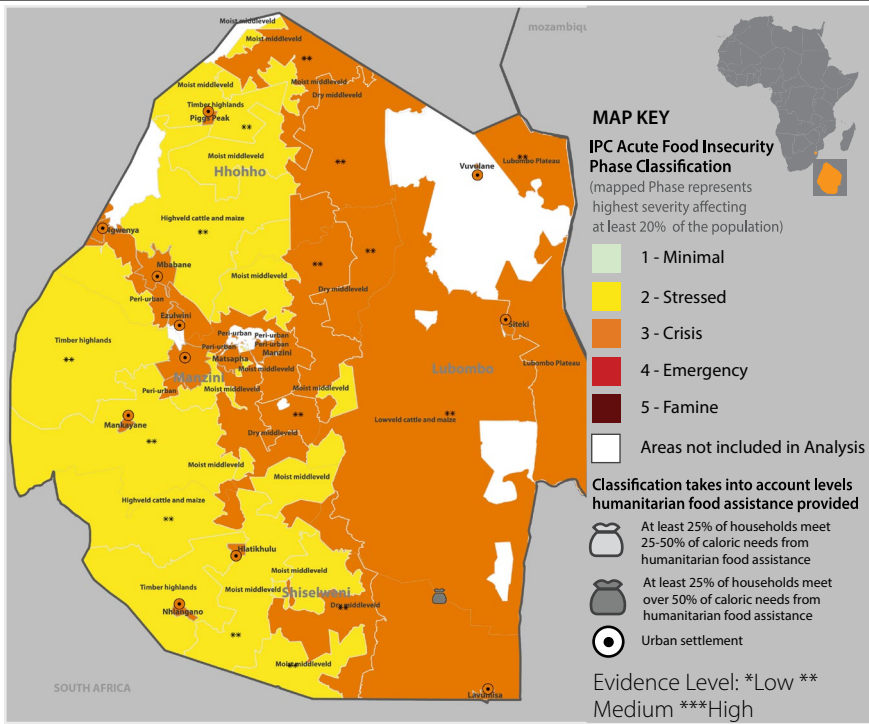


Overview

Around 27 million people in the Democratic Republic of Congo experienced high levels of acute food insecurity (IPC Phase 3 or above) between September and December 2021. The country has the largest number of highly food insecure people in the world. This food crisis is a result of a combination of conflict, economic decline, high food prices and the impact of the COVID-19 pandemic. Although the latest analysis represents a slight improvement in comparison with the previous one, and a further reduction is expected in the projection period, the caseload and severity remain unacceptably high. Between January and June 2022, 26 million people (around 23% of the country's population) will likely be in IPC Phase 3 or above. A partial IPC Acute Malnutrition analysis also revealed that around 860,000 children under the age of five and 470,000 pregnant or lactating women are likely suffering from acute malnutrition.

[See full IPC analysis here](#)

ESWATINI: Projection | December 2021 – March 2022



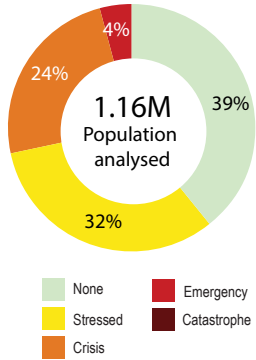
Projected Acute Food Insecurity | December 2021 – March 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between December 2021 and March 2022

Key Drivers

- High Unemployment
- High Food Prices
- COVID-19

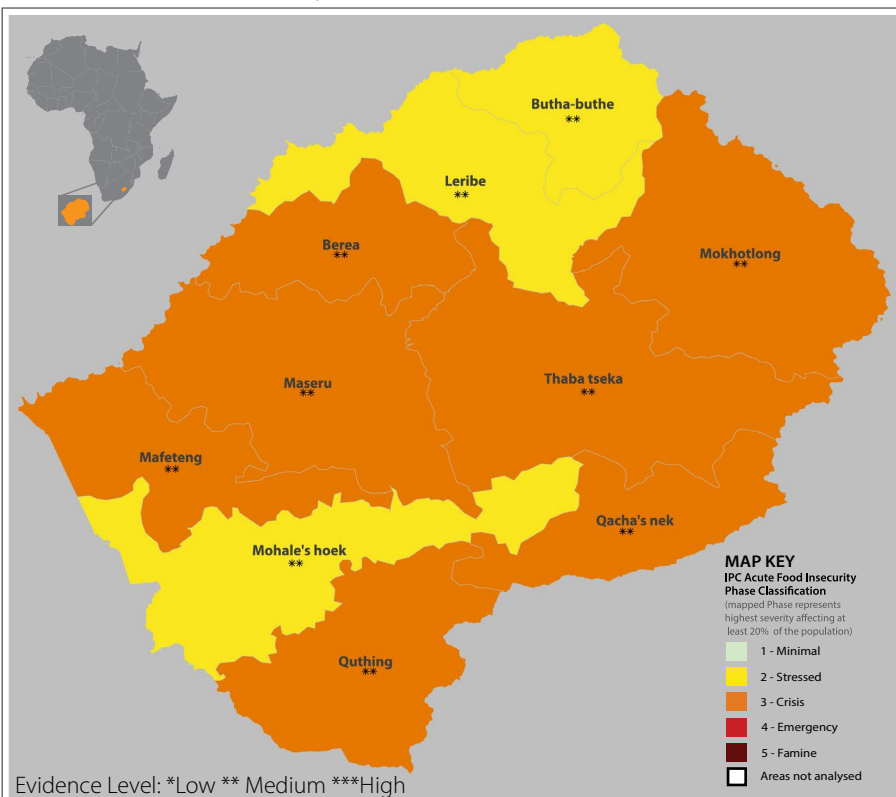


Overview

Nearly 30% of Eswatini's rural and urban population is facing high levels of acute food insecurity between December 2021 and March 2022, with around 336,000 people classified in IPC Phase 3 or above, including around 50,000 people in Emergency (IPC Phase 4). There are several factors driving this deteriorating food insecurity situation. The protracted impacts of the COVID-19 pandemic led to a significant increase in the levels of unemployment. The recent countrywide civil unrest, which resulted in disruptions to food supply systems as shops were looted, roads blocked, and borders closed, led to increased prices of commodities due to decreased access to food, especially in urban areas. The dry spells from November and December 2020 also negatively impacted the start of the farming season. Crop production and prolonged rains in February as a result of Cyclone Eloise resulted in flooding in most areas, causing crop damage and poor yields.

[See full IPC analysis here](#)

LESOTHO: Projection | January - March 2022

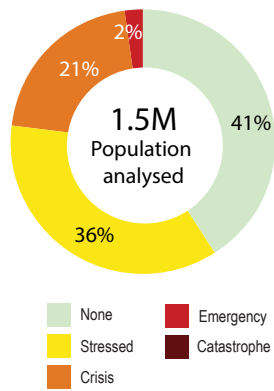


Projected Acute Food Insecurity | January - March 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between January and March 2022

Key Drivers

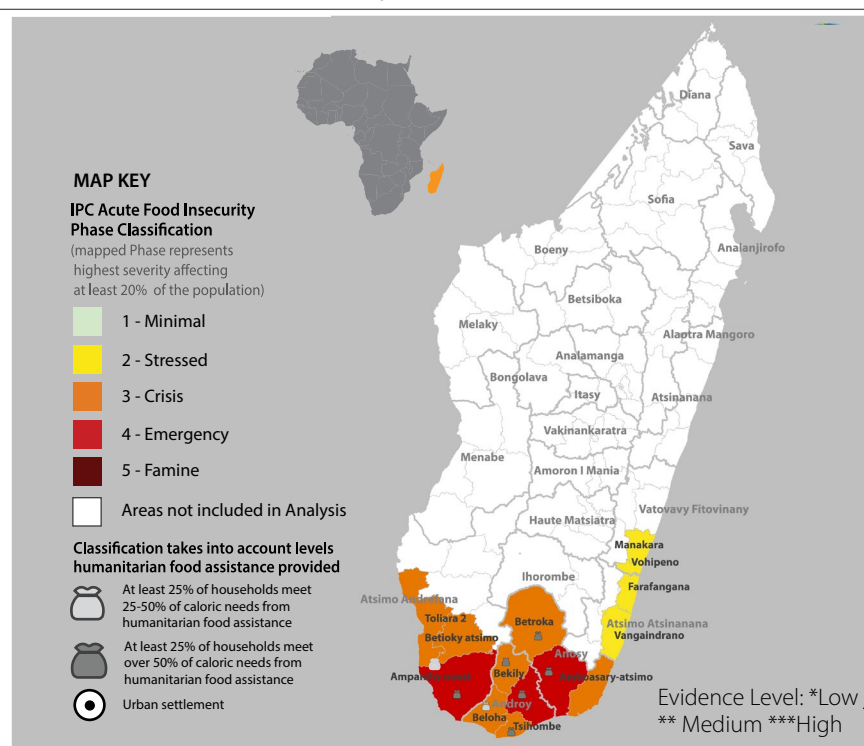


Overview

Between January and March 2022, around 338,000 people (23% of the population) from rural areas will likely experience high levels of acute food insecurity (IPC Phase 3 or above), with seven out of Lesotho's ten districts classified in Crisis (IPC Phase 3) and the other three in Stressed (IPC Phase 2). Although heavy rains destroyed some crops in January 2021, causing waterlogging in some parts of the country, Lesotho registered an improvement in crop production this year due to the good seasonal rainfall performance, after three consecutive years (2018, 2019 & 2020) of poor agriculture production. Crop production is therefore expected to boost the economy to a moderate growth of 2.6% and improve household food access. However, some poorer households across all livelihood zones are already experiencing food consumption gaps during this period, which is normally the lean season in Lesotho. The unfavourable food insecurity situation is also a result of food prices that remain higher compared to both 2020 and the five-year average.

[See full IPC analysis here](#)

MADAGASCAR: Projection | January - April 2022

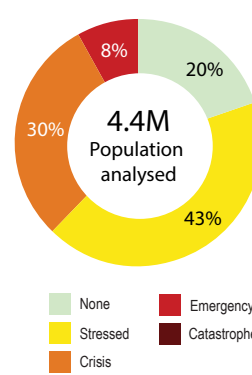
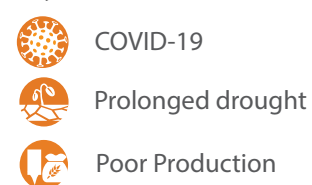


Projected Acute Food Insecurity | January - April 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between January and April 2022

Key Drivers

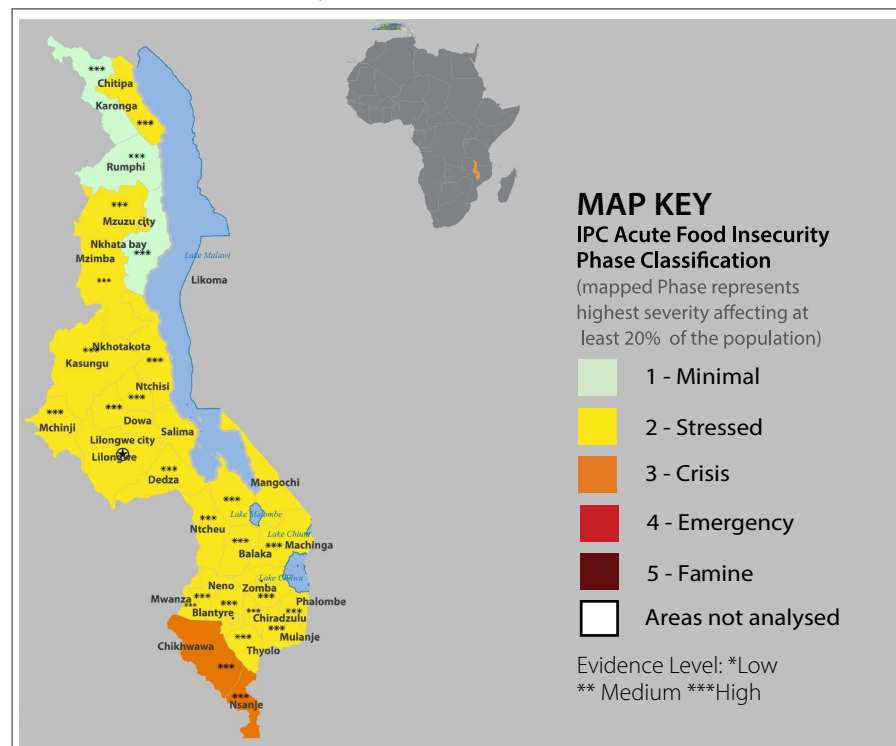


Overview

Despite ongoing interventions, food insecurity in Madagascar's Grand South and Grand South-East remains high, with 1.64 million people likely experiencing high levels of acute food insecurity (IPC Phase 3 or above) between January and April 2022. The persisting food and nutrition crisis is exacerbated by prolonged drought, insecurity and the impact of the COVID-19 pandemic. The most-affected districts, classified in Emergency (IPC Phase 4), include Amboasary Atsimo, Ambovombe Androy and Ampanihy, hosting over 220,000 people among the 334,000 people in these conditions. Over 300,000 children under five are also likely suffering from acute malnutrition in the Grand South through August 2022. Humanitarian food assistance has provided broad coverage in terms of the number of beneficiaries over the past few months, thus averting a catastrophic situation. Nevertheless, this assistance remains insufficient to meet all kilocaloric needs and to sustainably address household consumption deficits, leaving people in continuous need of urgent action.

[See full IPC analysis here](#)

MALAWI: Projection | January - March 2022

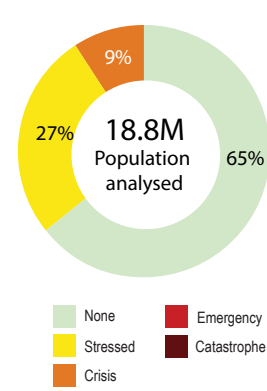
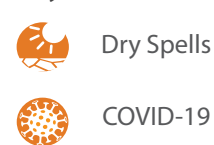


Projected Acute Food Insecurity | January - March 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between January and March 2022

Key Drivers

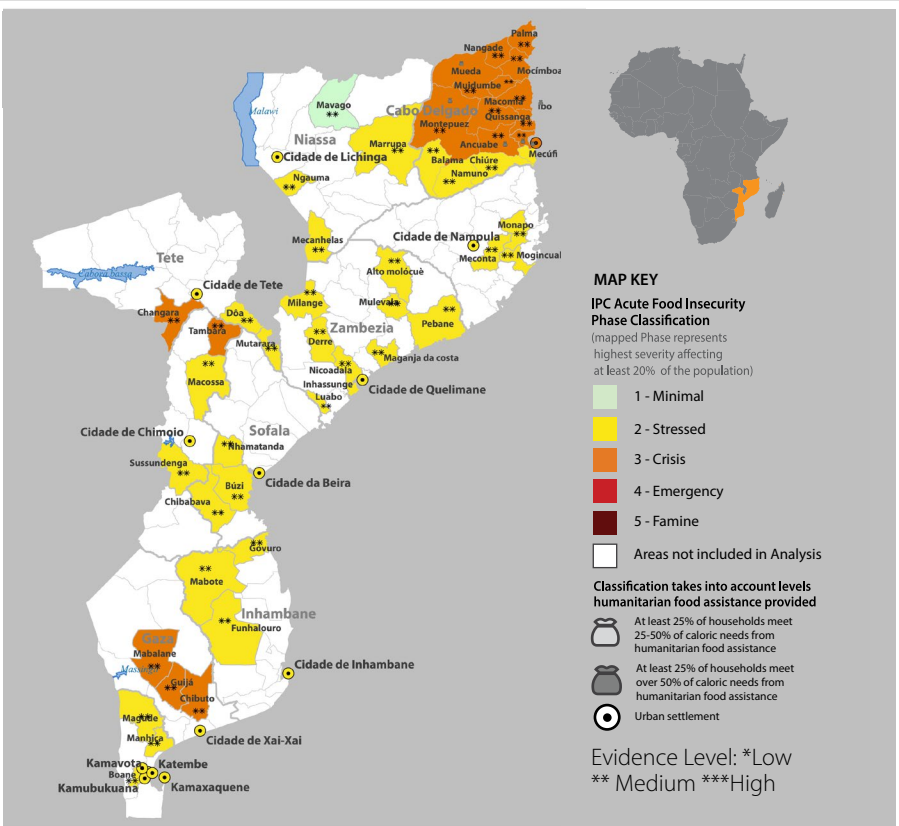


Overview

Between January and March 2022, around 1.65 million people are likely experiencing Crisis food insecurity conditions (IPC Phase 3), with Nsanje and Chikwawa being the only districts classified in this phase. The remaining areas were classified in Stressed (IPC Phase 2) or Minimal (IPC Phase 1) acute food insecurity. Populations classified in Crisis include poor urban/bomas and rural households in the southern region, which is experiencing a deficit in production, and some parts of the northern and central region districts. Despite the country reaching record high maize production - at 46% above the five-year average - there are still some pockets in the districts and cities that are likely to face high acute food insecurity. These areas experienced dry spells and later-than-normal tailing off of rainfall, leading to localised production shortfalls. This was exacerbated by slow livelihood recovery from previous seasons and the impact of COVID-19 on remittances, petty trading and self-employment activities.

[See full IPC analysis here](#)

MOZAMBIQUE: Current | November 2021 – March 2022



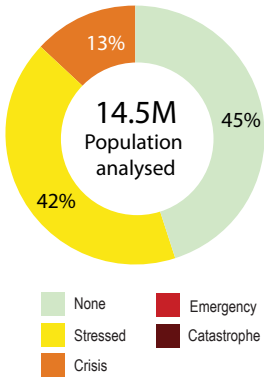
Current Acute Food Insecurity | November 2021 – March 2022



People estimated to be in Crisis or worse (IPC Phase 3 or above) between November 2021 and March 2022

Key Drivers

- Conflict
- Erratic Rainfall
- COVID-19

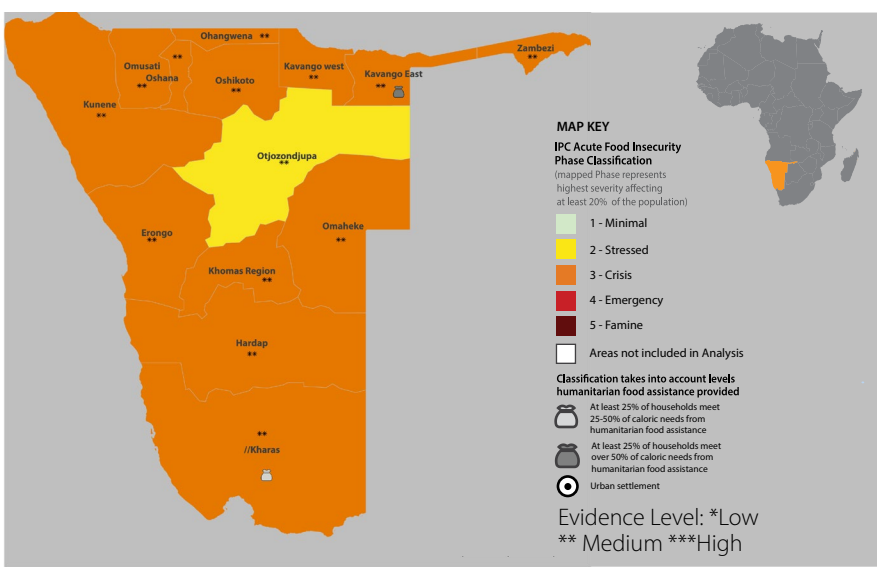


Overview

Between November 2021 and March 2022, coinciding with the lean season, around 1.9 million people are estimated to be in high acute food insecurity (IPC Phase 3 or above) in the urban and rural areas analysed of Mozambique. Of these, 71% (1.32 million people) are in the four provinces of Cabo Delgado, Niassa, Nampula and Zambézia, where many of the country's Internally Displaced Persons (IDPs) are concentrated. One district of Tete (Changara), one of Manica (Tambara) and three of Gaza (Chibuto, Mabalane and Guijá) are classified in IPC Phase 3 (Crisis). The main causes of food insecurity in this period include the armed conflict in Cabo Delgado province – with nearly 820,000 people estimated to have been displaced – shortage of rainfall or irregular rains in parts of Nampula, Tete, Manica, Gaza, Inhambane and Maputo provinces, increasing food prices and COVID-19 restrictive measures. Nearly 75,000 children under the age of five and 22,000 pregnant or lactating women in Cabo Delgado, also likely suffered from acute malnutrition through January 2022.

[See full IPC analysis here](#)

NAMIBIA: Projection | December 2021 - March 2022



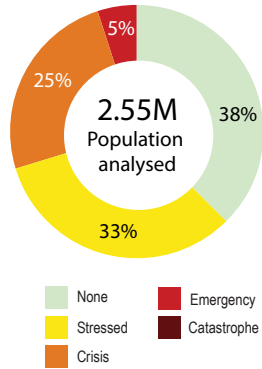
Projected Acute Food Insecurity | December 2021 - March 2022



People projected to be in Crisis or worse (IPC Phase 3 or above) between December 2021 and March 2022

Key Drivers

- COVID-19
- Price Shocks
- Drought

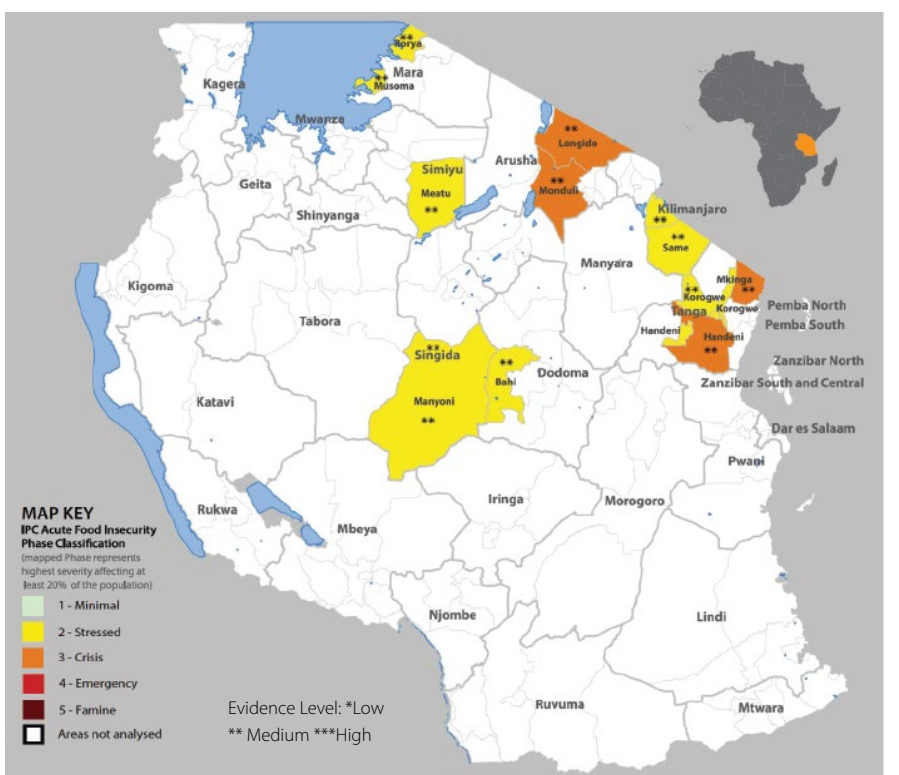


Overview

The latest IPC analysis in Namibia indicates that around 750,000 people are facing high levels of acute food insecurity (IPC Phase 3 or above) between December 2021 and March 2022, with over 100,000 of these in Emergency conditions (IPC Phase 4). Compared with the same period last year, the situation has deteriorated drastically, with the number of people facing high acute food insecurity almost doubling since then. This was due to several factors. Firstly, drought and dry spells were experienced in the drought-prone areas of Namibia, affecting both crop and livestock production. Secondly, food and non-food prices increased twice by 2-6% in 2021. The price increment was triggered by increased global fuel prices, and as a result, people's purchasing power was reduced. Finally, COVID-19 restrictive measures resulted in disruptions in food and non-food supply chains, which in turn led to an increase in food prices, high rates of unemployment, and loss of income for most businesses, including the tourism sector, due to business closures and deaths of breadwinners.

[See full IPC analysis here](#)

TANZANIA: Current | November 2021 – April 2022



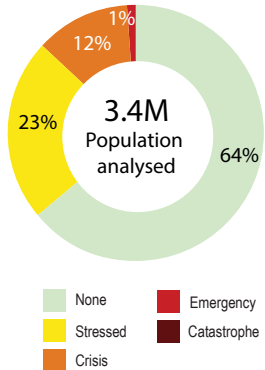
Current Acute Food Insecurity | November 2021 – April 2022



People estimated to be in Crisis or worse (IPC Phase 3 or above) between November 2021 and April 2022

Key Drivers

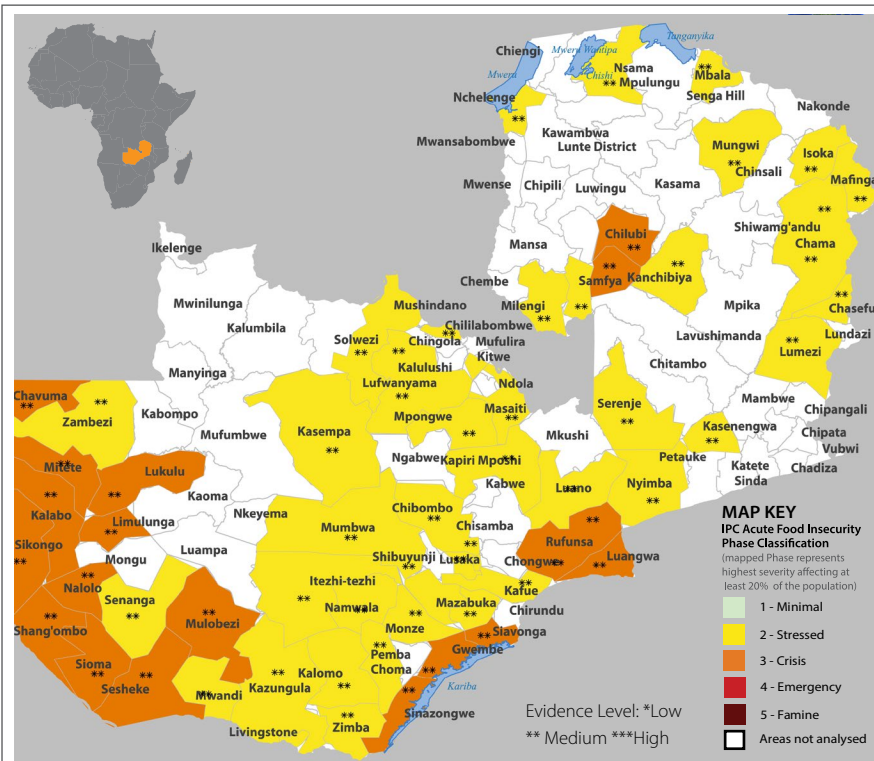
- Dry Spells
- High Food Prices
- Pests & Diseases



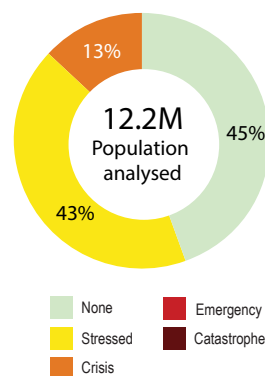
Overview

It is estimated that nearly 440,000 people (13% of the population) in 14 analysed councils of Tanzania (12 district councils and the rural parts of two town councils), are experiencing high levels of acute food insecurity (IPC Phase 3 or above) between November 2021 and April 2022. These include around 22,000 people in Emergency conditions (IPC Phase 4). The recent poor harvest resulted in limited food availability and a reduction of casual on-farm labour opportunities related to post-harvest activities. During this period, unusually high commodity prices were recorded in all districts analysed. Some of the households continued to deplete their assets, with the majority of households applying consumption-based coping to moderate large food consumption gaps. For the projected period of analysis (May – September 2022), the number of people facing IPC Phase 3 or above is expected to increase to 600,000, including 95,000 in IPC Phase 4. This is due to anticipated inadequate rainfall, which is likely to have negative impacts on food production.

[See full IPC analysis here](#)

ZAMBIA: Projection | October 2021 – March 2022**Projected Acute Food Insecurity | October 2021 – March 2022**

People projected to be in Crisis or worse (IPC Phase 3 or above) between October 2021 to March 2022

Key Drivers**Overview**

The latest IPC Acute Food Insecurity analysis results indicate that, between July and September 2021, in spite of a good harvest, about 1.18 million people in Zambia experienced Crisis conditions of food insecurity (IPC Phase 3). The northern half of Zambia experienced flooding due to excessive rains, leading to waterlogging of crops and reducing food availability. The infestation of the African Migratory Locusts on the country's Central, Southern and Western Provinces also reduced food availability. Although the COVID-19 restrictions were not severe, the country registered massive job losses and reductions in remittances. Food prices remained higher than the five-year average due to stifled supply chains due to COVID-19 restrictions and food inflation pressures. The projected period (October 2021 to March 2022) coincides with the lean season, when the country's food security situation is expected to deteriorate, with around 1.58 million people facing Crisis conditions.

[See full IPC analysis here](#)

The IPC in the SADC Region

The Integrated Food Security Phase Classification (IPC) was introduced in Southern Africa in February 2008, during an awareness-raising workshop held in Gaborone. The event was hosted by the Southern African Development Community's (SADC) multi-agency Regional Vulnerability Assessment Committee (RVAC), which leads critical improvements in food security and vulnerability analyses at the regional and country level.

In 2009, a Technical Working Group (TWG) was established within the RVAC of the SADC, taking on the coordination role of IPC activities in the region. Awareness was raised among all the VACs in the region, and four countries requested support to introduce the IPC: South Africa, Zimbabwe, Malawi, and Mozambique.

The 2015/16 El Niño occurrence in the Southern Africa region led to an increase in calls for IPC adoption to classify the severity of food insecurity. To date, 12 countries have taken up the IPC Acute Food Insecurity Classification (Angola, the Democratic Republic of Congo, Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, South Africa, Tanzania, Zambia and Zimbabwe) and have integrated it as part of their annual Vulnerability Assessment and Analysis (VAA). Besides, Mozambique and Madagascar undertake the IPC Acute Malnutrition (AMN) Analysis once a year, after completion of the nutrition surveys. IPC AMN analyses have also taken place in Angola and the Democratic Republic of Congo.

The main objectives of the Southern Africa IPC TWG are to: ensure a demand-driven and regionally owned process; implement the regional IPC strategy; develop technical capacity at the country and regional levels; coordinate and facilitate country and regional level events; provide technical and institutional support; and consolidate, disseminate and internalise lessons learned.

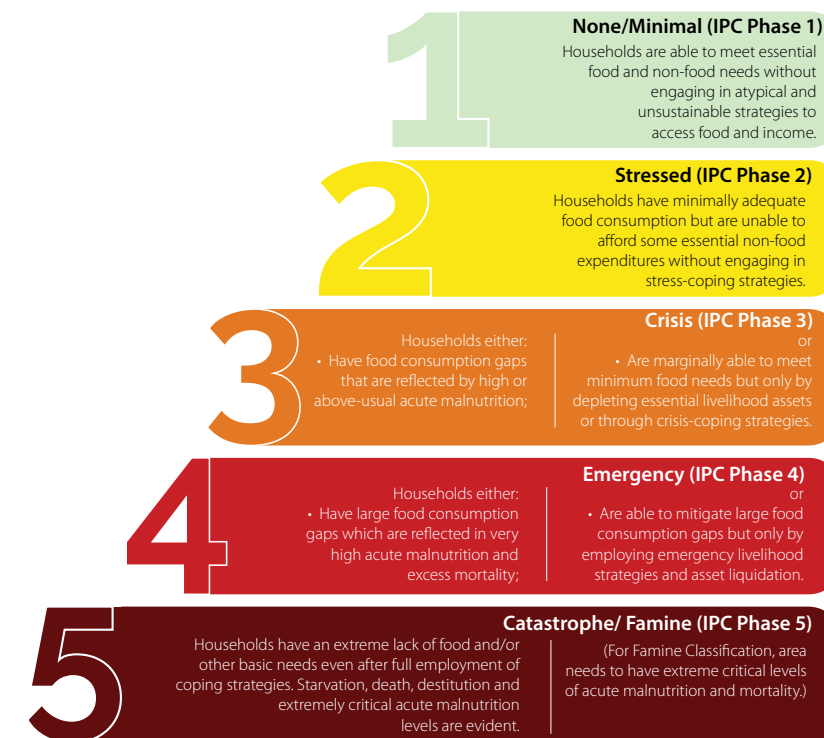
The IPC TWG in this region is permanently chaired by SADC (FANR Division) and a cooperating partner, with a two-year co-chairing term. Currently, FAO is the co-chair of SADC. Other members include FEWSNET, Oxfam, Save the Children, UNICEF, WFP and World Vision. Members of the regional IPC TWG provide a range of support to SADC member states implementing any of the three IPC scales, including the reviewing of survey tools, indicators, and data analysis. The IPC Global Support Unit (GSU) provides funding and technical support for countries that want to undertake any of the IPC classifications. A Southern Africa regional team in the IPC has been established to coordinate the implementation of IPC in the countries and works in close collaboration with all IPC partners and countries.

About the IPC and Acute Food Insecurity

The IPC is a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. The IPC consists of four mutually reinforcing functions, each with a set of specific protocols (tools and procedures).

The core IPC parameters include consensus building, convergence of evidence, accountability, transparency and comparability. The IPC analysis aims at informing emergency response as well as medium and long-term food security policy and programming.

For the IPC, Acute Food Insecurity is defined as any manifestation of food insecurity found in a specified area at a specific point in time of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. It is highly susceptible to change and can occur and manifest in a population within a short amount of time, as a result of sudden changes or shocks that negatively impact the drivers of food insecurity.

The IPC Acute Food Insecurity Scale

For more information, please contact the IPC at ipc@fao.org or the IPC Regional Coordinator for SADC, Kudzayi Kariri at kudzayi.kariri@fao.org

Publication date: February 22, 2022 | *IPC population data is based on population estimates the statistics agencies of Angola, the Democratic Republic of Congo, Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Tanzania and Zambia. | Feedback: IPC@FAO.org | Disclaimer: The information shown on this map does not imply official recognition or endorsement of any physical and political boundaries.

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