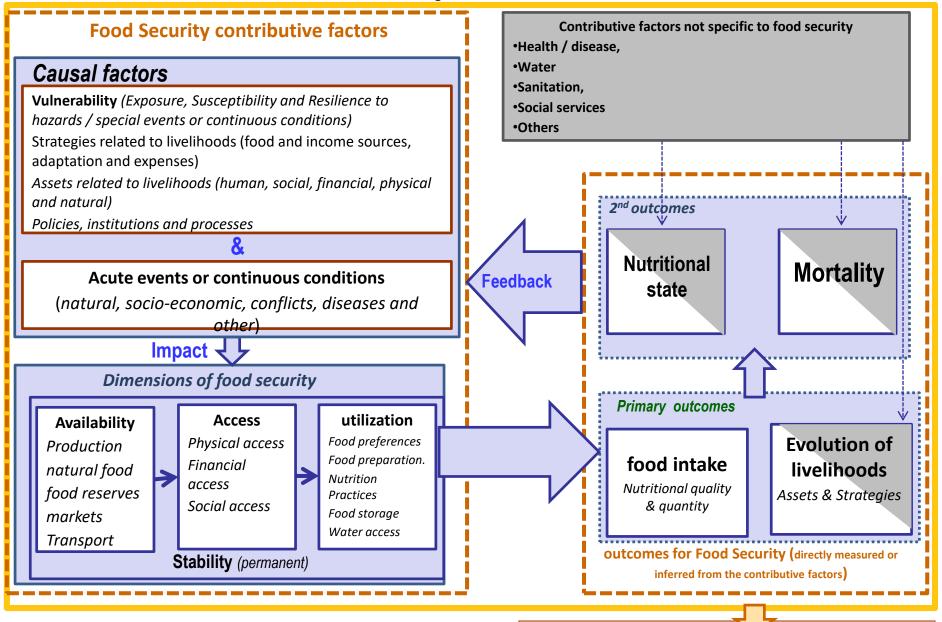
Update on the Cadre Harmonise as of 10th Oct 2017

Presentation at the FSWG meeting, 10 Oct, 2017

Preamble

- The CH introduced in Nigeria in 2015 with the maiden CH analysis done in October 2015 (in 8 states)
- Subsequent analyses done in Mar 2016 (in 8 States); in Aug 2016 (special for Bo, Yb & Ad); in October 2016 & Mar 2017 (in 16 states)
- Next analysis due in Oct 2017 (in 17 States)

The CH Analytical Framework



Classification of the acute phase (Current or projected)

Key points in the CH approach and analytical framework

- It uses the "meta-analysis" approach to produce a "whole picture" about the state of food & nutrition security
- It applies the "convergence of evidence" approach to classify the severity of food & nutrition insecurity
- Depends on the impartiality of the members in the analysis to "seek the truth" or evidence and not their personal or organization's interests

Convergence of Evidence using CH Reference Table

- Convergence of evidence requires a critical evaluation of the overall evidence to estimate better the gravity of the situation guided by the CH Reference Table
- Members must transparently share the body of evidence that enable analysis of the current and future situations
- Members work as a team to produce a report that reflects the reality of the food and nutrition situation based on reliable evidence in a participatory, inclusive and consensual approach

CH Steps

- Inventory of evidence
- Analysis of key evidence
- Synthesis and classification into phases using results indicators and contributing factors
- Estimation of populations (current and projected) in various phases – minimal, under pressure or stressed, crisis, emergency and famine
- Communicating the findings/report for action

CH phases classification

Name and phase description	Phase 1 Minimum	Phase 2 Under pressure	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Famine
	At least four out of five households are able to meet their dietary and nondietary needs without resorting to unusual coping strategies, nor depend on humanitarian aid.	Even with humanitarian aid, at least one out of five households in the area is in the following situation or worse: A reduced food consumption and minimal adequacy but inability to afford to certain essential non-food expenditure without engaging in irreversible coping strategies	Even with humanitarian aid, at least one out of five households in the area is in the following situation or worse: considerable food deficits and acute malnutrition at high or higher rates than the normal; OR Marginally able to meet the minimum food needs by depleting assets related to livelihoods, leading to deficits in food consumption.	Even with humanitarian aid, at least one out of five households in the area is in the following situation or worse: extreme food deficits, which results in a very high acute malnutrition or an excessive mortality, OR an extreme loss of assets relating to livelihoods, resulting to deficits in food consumption in the short term.	Even with humanitari at least one out of five households in the are complete deficit in foot or other basic needs clearly exposed to inato death and to destit (Note, the evidences find three criteria of food consumption, emacia and CMR are required classifying into famine
Priority intervention objectives	Action required for building resilience and reducing disaster risks.	Action required for reducing disaster risks and protecting livelihoods.	Urgent action is required to :		
			Protect livelihoods, prevent malnutrition, and prevent deaths.	Save lives and livelihoods.	Prevent large-scale c and avoid the total co of livelihoods.

Roles of the CH Analysis Cell

- Collect and use the contributions of experts/actors from different disciplines, sectors and organizations that are knowledgeable in all the evidence presented
- Enable different actors to adhere fully to the process and agree technically on the essentials
- Enable actors to make consensual conclusions on the results obtained. Help ensure that the analysis will be widely accepted and that the reports disseminated
- Members must have received training on the CH Manual and must have experience in food security and nutrition analysis

- Participants in the CH analysis are national services and partners involved in feed articipants food security and nutrition monitoring, those responsible for early warning system, statistics on agriculture, livestock, trade and market, meteorology, health & nutrition, water resources, fisheries, environment, etc.
- They include CILSS, FEWSNET, FAO, WFP, UNICEF, OXFAM, ACF, Save-the-Children, NCO2, etc.

Expectations from Partners

- Participate in the collection and supply of all required data for the CH analysis; e.g., the FSVS/EFSA, SMART Survey, Nutrition Surveillance survey, etc
- Send all required data for the CH analysis to the Analysis Cell before the scheduled date for commencement of the analysis
- Participate in the analysis at both the state and national levels

Next CH analysis

- State-level analysis: 23rd 27th
 October, 2017 (5 centres).
- National consolidation: 30th
 October 2nd November, 2017 (at Abuja)
- National Report Presentation Workshop: 3rd November, 2017 (at Abuja)

States & their Analysis Centres for Oct/Nov 2017

s/n	Centre		States to convene
1	Yola,	Adamawa	Borno, Yobe, Adamawa
	state		
2	Gombe		Bauchi, Gombe, Plateau
3	Gusau,	Zamfara	Zamfara, Sokoto, Kebbi,
	state		Katsina
4	Dutse,	Jigawa	Jigawa, Kano, Kaduna
	state		
5	Makurdi,	Benue	Niger, FCT, Benue,
	state		Taraba
6	Abuia		All

Venues

• Yola, Adamawa state: City Green Hotel

Gombe: Gombe International Hotel

Dutse, Jigawa state: Dutse Royal Hotel

Makurdi, Benue state: HAF Haven Hotel

Gusau, Zamfara state: Jaiz Hotel

Thank you for the attention