











Prepared

16th March, 2023

Cadre Harmonisé for Identification of Food and Nutrition Insecurity Risk Areas and Vulnerable Populations in 26 States and Federal Capital Territory (FCT) of Nigeria

NIGERIA

Main results for zones and populations affected by Food and Nutrition Insecurity (FNI) in 26 states of Nigeria (Abia, Adamawa, Bauchi, Benue, Borno, Cross-River, Edo, Enugu, Gombe, Jigawa, Kaduna, Kano, Katsina, Kebbi, Kogi, Kwara, Lagos, Nasarawa, Niger, Ogun, Plateau, Rivers, Taraba, Sokoto, Yobe, Zamfara and the FCT). In the current period, about forty-two (42) LGAs located in Adamawa (4), Borno (19), Zamfara (4), Katsina (11) and Yobe (4) States were classified under crisis. During the projected period, the number of areas classified under crisis may triple to one hundred and thirty-five (135) unless life and livelihoods saving interventions are implemented to ameliorate the possible food and nutrition security crisis.



Food consumption:

During the current period, food consumption range from pressure to crisis phases in all the states

analyzed. Most severly affected areas included Adamawa, Borno, Yobe, Zamfara, Sokoto, Cross-River, Enugu (North), Kogi (East) and Katsina States. During the projected period (June to August, 2023), slight to moderate deterioration in household access to adequate food both in quality and quantity is expected. Atypical rise in staple food prices may plunge more households HHs into unacceptable food consumption situation following reduction in access to stable income generating activities.



Livelihood Change:

Livelihood evolution across the 26 states and the FCT was observed to be from pressure to emergency phases of FNI. Most affected areas

in parts of Borno, Sokoto (East), Kebbi (West) and Niger States are experiencing insecurity challenges. Limitation to access of stable income sources, was perpertuated by the cashless policy and cash crunch and its resultant impact on reduced economic activities. Scarcity and increased prices of fuel hiked transportation cost which significantly influenced the cost of farm inputs. This undermined HHs capacity to efficiently engage in the 2022 dry /irrigation season farming. Daily wage earners such as petty traders, migrant agricultural labourers and market vendors were also significantly affected. Across several markets, disrupted trade flows and undermined operations optimium functionality and performance. In the projected period (June to August, 2023), livelihoods activities may gradually stabilize, but at a marginal growth level. Thus, several HHs may still continue to face disrupted evolution of livelihoods.

Results of the Analysis of Current Period (March to May 2023) and Projected Period (June to August 2023)

The Permanent Inter-State Committee for Drought Control in the Sahel (CILSS) coordinates and manages the Cadre Harmonisé (CH) process, in joint partnership with the Economic Community of West African States (ECOWAS) and West African Economic and Monetary Union (UEMOA). The outcome from the analysis aids decision making and implementation of actions to strengthen resilience to address food crisis challenges. As an evidence based early warning tool for the consensual analysis of acute food and nutrition insecurity (FNI), the framework takes into account the primary and secondary outcome (food consumption, livelihood evolution, nutritional status and mortality) of food and nutrition security. Inferences were also drawn from the impact of relevant contributing factors (Hazards and vulnerability, food availability, food access, food utilization and stability) on these standard outcomes of FNI. In the March 2023 cycle of CH analysis, CH-V3.0 protocols was adopted, and covered twenty-six (26) states of Nigeria and the Federal Capital Territory (FCT). Results of the analysis indicates that, 17.7 million (9 %) of the analyzed

populations were in the crisis to emergency (Phase 3 to 4) situation of FNI and require emergency food assistance in the current period (March to May, 2023). During the projected period (June to August 2023), the number of vulnerable populations are expected to rise to 24.8 million (13 %) if deliberate actions are not put in place to improve life-saving and resilience-focused humanitarian interventions in areas worst affected.

Hazard and Vulnerability:

Protracted insecurity fuel scarcity, acute negative effect of the naira re-design and cashless monetary policy, new naira note scarcity, consistent soaring above average prices of staple food and basic commodities including the impact of the 2022 flood. In Addition, the slow post COVID-19 economic recovery in Nigeria were among the major hazards reported during the period. Banditry and kidnapping limited households (HHs) access to agricultural lands and functional markets to access agricultural farm inputs (fertilizer and agrochemicals) in several communities of Zamfara, Katsina, Niger, and Kaduna States, which impacted negatively on livelihoods. There were also observed incidences of natural and environmental disasters (wind storm and fire outbreaks), as well as farmer-herders conflicts in North Central States of Benue and Plateau, which resulted in increased vulnerability among displaced HHs and disruption of livelihoods in the affected communities. These bottlenecks have continued to impact negatively on the income sources of populations in the affected communities and the country at large.

Food Availability:

Although, several households cultivated their farm during the last cropping season, increases in yields and output were marginal (2 % to 4 %) in areas worst hit by flood, However, areas with more upland cultivation practices recorded significant increases in output ranging from 50 % to 81 % for both staple and cash crops compared to the last five years average. In crisis affected States of Borno, Adamawa, Yobe, Niger, Zamfara, Sokoto and parts of Benue and Plateau, limited production activities were reported. Stock availability both at the HHs and global market levels was observed to be favourable during the current period. However, early depletion in HHs stock may impact negatively on food consumption and nutrition status in the coming months (June to August, 2023). Despite the expected availability of staple supplies that would come from early harvest of 2023 cropping season to boost stocks level during the lean season, the possibility of obtaining sufficient quantity to augment shortages of HHs and market stocks will remain a challenge.

Food Access:

A higher than average (50 %) rise in major staples was witnessed across markets in all the analyzed states. This impacted negatively on household's capacity to sustain adequate food consumption levels with high hunger scales (HHS) and poor dietary diversity observed among a significant proportion (over 45 %) of the analyzed populations. Disrupted market activities and food distribution system following reduced cash flows also influenced prices of food and complementary food related items. This has limited the affordability and access to food for caregiver and producer HHs across the states. Moreover, year-on-year food price inflation in the country, rose to 24.35 % from 24.32 % in the previous month, the highest since October, 2005. This affected the prices of major staples, cooking oil and vegetables which are the most consumed food commodities across the states. Aside from the food inflation concerns, the consumer price index (CPI) which has been on the rise by an average of 0.2 % month-on-month since October 2020 also affected the prices of food and reduced the purchasing power of the analyzed populations. The spike in food prices may continue to be witnessed during the projected period with its resultant negative impact on HHs capacity to sustain adequate food access. Of particular concern are vulnerable internally displaced population (IDPs) who are already disenfranchised of stable livelihoods and income generating opportunities to sustain a balanced food and nutrition security outcome.

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Nutritional Status:

Incidences of high Global Acute Malnutrition (GAM) rates has continued to prevail among Under

five years (0 to 59 months) children across States like Yobe, Borno and Sokoto with a nutritional threshold observed to be under crisis (Phase 3). The poor nutritional situation is associated with nonfood related factors such as insecurity, displacement, poor dietary knowledge of caregivers, non-physical access to markets and unstable income sources.



Mortality:

Assessment on mortality was unavailable to ascertain the Crude Death Rate (CDR) and Under five

Death Rate (U5DR) during the period of analysis.

Food Utilization Including Water:

Access to safe and portable water sources for drinking and domestic purposes has remained a challenge across the states with over 50 % of HH having inadequate access. However, in Adamawa, Jigawa, Taraba, Kaduna, Katsina and Yobe States with positive moderate (60 % - 90 %) access to safe sources of portable drinking water, incidences of water borne diseases (Cholera and Diarrhea) and malaria remained a challenge in several rural and peri-urban communities. This brings to bear, the fact that availability may always transcend to access and thus perpetuating WASH related challenges across the analyzed populations. Despite, the acceptable access to improved administration of supplements (vitamin A and Iron foliate) to children (6 to 59 months) and pregnant mothers in several states, concerns are that area affected by insecurity and poor access to road networks including communication channels may experience difficulties in accessing stable health care delivery services. In the projected period, low access to safe portable water in some states may be witnessed following pollutions of water bodies from the seasonal rains which may impact negatively on food utilization. There are also concerns that the usual contamination of water bodies in coastal states (Rivers, Benue, Kogi, Cross-River, Niger, and Lagos) may undermine HHs food consumption and nutritional status.

Stability:

Although, the seasonal calendar was stable and favorable for agricultural and livestock production, a decline in HHs food stocks was observed across several states for producer HHs. Protracted insecurity, conflicts, high food prices and scarcity of fuel significantly reduced the access to food and services and impacted strongly on food consumption and livelihoods. During the projected period, households in states with high incidences of insecurity may face more challenges of livelihoods disruption, food access and WASH related concerns. These populations may resort to crisis to emergency coping strategies to meet their food and essential non-food needs.

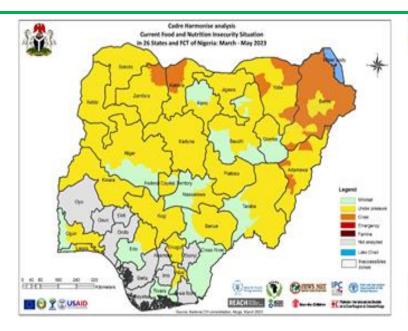


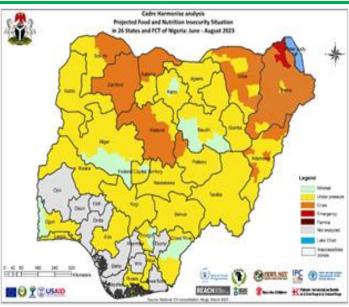
MAIN RESULTS AND PROBLEMS

Of the 552 analyzed LGAs and Zones, about 26.8 % (148) of the Zones/LGAs analyzed were classified under the minimal phase, while 65.6 % (362) were under stress Phase, and 7.61 % (42) were classified in crisis or worse phase in the current period. In the projected period however, 10.2 % (56) LGAs were classified in the minimal phase; 65 % (359) under stress; 24.5 % (135) in crisis and 0.4% (2) under emergency. Furthermore, it is pertinent to note that in March 2023 CH cycle, there was no population in catastrophe (Phase 5) in the current period as well as the projected period. (**Table 1**)

Table 1: Number of States, LGAs and Zones Analysed in March 2023

States	Current: March to May, 2023						Projected: June to August, 2023				
	Number of analyzed areas	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5
Adamawa	21	-	17	4	-	-	-	13	8	-	-
Abia	17	6	11	-	-	-	-	17	-	-	-
Bauchi	20	8	12	-	-	-	5	15	-	-	-
Benue	23	9	14	-	-	-	-	23	-	-	-
Borno	27	-	8	19	-	-	-	2	23	2	-
Cross River	18	18	-	-	-	-	6	12	-	-	-
Edo	18	7	11	-	-	-	-	18	-	-	-
Enugu	17	6	11	-	-	-	-	17	-	-	-
FCT	6	1	5	-	-	-	1	5	-	-	-
Gombe	11	6	5	-	-	-	-	11	-	-	-
Jigawa	27	-	27	-	-	-	-	27	-	-	-
Kaduna	23	-	23	-	-	-	-	8	15	-	-
Kano	44	28	16	-	-	-	15	29	-	-	-
Katsina	34	-	23	11	-	-	-	11	23	-	-
Kebbi	21	-	21	-	-	-	-	21	-	-	-
Kogi	21	-	21	-	-	-	-	21	-	-	-
Kwara	16	-	16	-	-	-	-	16	-	-	-
Lagos	20	10	10	-	-	-	-	20	-	-	-
Nassarawa	13	8	5	-	-	-	-	13	-	-	-
Niger	25	8	17	-	-	-	8	17	-	-	-
Ogun	20	5	15	-	-	-	14	6	-	-	-
Plateau	17	-	17	-	-	-	-	11	6	-	-
Rivers	23	23	-	-	-	-	-	23	-	-	-
Sokoto	23	-	23	-	-	-	-	15	8	-	-
Taraba	16	5	11	-	-	-	5	11	-	-	-
Yobe	17	-	13	4	-	-	-	1	16	-	-
Zamfara	14	-	10	4	-	-	-	-	14	-	-
Total	552	148	362	42	-	-	56	359	135	2	-





How Many People are in Food and Nutrition Insecurity in the Current period and Where are they?

In the current period (March to May 2023) about 17, 657, 727 persons, approximately 9 % of the analyzed population across the 26 States and the FCT were in crisis to emergency (Phase 3 to 4) situation of food and nutrition insecurity. Of these populations, 454,444 (0.23 %) were in the emergency phase of FNI with about 1,063 (0.2 %) located in internally displaced persons (IDPs) camps and settlements in Sokoto and Zamfara States. respectively. Nonetheless, overall Borno State has 216, 929 (48 %) of the analyzed population classifed under the emergency (Phase 4) of FNI in the current period, and these populations are expected to increase to about 328,819 (29.7 %) during the projected period (**Table 2**)

State	Total Population analyzed	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	Total in Phase 3 to 5
Adamawa	5,205,688	2,352,178	2,006,623	842,408	4,479	-	846,887
Abia	5,168,473	2,990,679	1,865,367	312,427	-	-	312,427
Bauchi	7,984,472	6,019,220	1,481,244	484,008	-	-	484,008
Benue	7,083,550	4,847,023	1,756,947	479,579	-	-	479,579
Borno	6,524,425	2,545,557	2,425,370	1,336,570	216,929	-	1,553,499
Cross River	4,913,292	4,137,590	680,557	95,145	-	-	95,145
Edo	5,571,715	4,448,094	787,812	335,809	-	-	335,809
Enugu	5,370,406	3,910,861	1,082,726	376,820	-	-	376,820
FCT	4,988,438	3,822,737	818,094	347,607	-	-	347,607
Gombe	3,658,473	2,825,439	639,892	193,142	-	-	193,142
Jigawa	7,502,661	4,430,675	2,008,353	1,063,633	-	-	1,063,633
Kaduna	9,958,036	4,823,509	3,911,598	1,222,929	-	-	1,222,929
Kano	15,938,219	11,970,937	2,960,740	954,950	51,593	-	1,006,542
Katsina	9,367,521	5,459,202	2,594,196	1,251,125	62,999	-	1,314,123
Kebbi	5,226,924	3,221,086	1,502,753	503,085	-	-	503,085
Kogi	4,530,100	2,521,475	1,490,086	518,539	-	-	518,539
Kwara	3,621,999	1,027,624	2,334,464	259,911	-	-	259,911
Lagos	29,985,050	22,374,681	6,014,271	1,596,099	-	-	1,596,099
Nasarawa	2,399,096	1,859,739	407,080	132,277	-	-	132,277
Niger	6,755,587	4,554,138	1,520,780	656,338	24,330	-	680,669
Ogun	8,269,381	5,770,891	2,192,246	306,244	-	-	306,244
Plateau	4,843,918	2,395,563	1,645,822	802,533	-	-	802,533
Rivers	8,683,579	7,120,535	1,212,193	350,852	-	-	350,852
Sokoto	6,043,183	3,743,974	1,614,102	685,107	-	-	685,107
Taraba	3,673,846	2,420,896	899,804	338,784	-	-	353,146
Yobe	4,887,043	2,482,967	1,597,164	727,513	79,399	-	806,912
Zamfara	5,396,348	1,995,201	2,370,943	1,015,489	14,715	-	1,030,204
Total	193,551,423	126,072,471	49,821,226	17,188,921	454,444	-	17,657,727

During the Projected Period, How Many People Will be Affected by Food and Nutrition Insecurity?

In the projected period (June-August, 2023), the number of people in the critical phases (3 to 5) of FNI may increase by 40 % to reach 24,814,440 representing 12.8 % of the overall analyzed population. These comprises of about 522,366 people in the emergency (Phase 4) situation of FNI residing in security challenged and Hard to Reach Areas (HRAs) across Adamawa, Borno and Yobe States. These also includes about 17,993 Internally Displaced Persons (IDPs) residing in camps and settlements in Sokoto and Zamfara States, respectively. Overall, 1,108,193 persons will be in the emergency phase of FNI across several LGAs /Zones of Adamawa, Borno, Kano, Katsina, Kebbi, Niger, Sokoto, Yobe and Zamfara States. Unless targeted food aids and agricultural livelihood interventions are urgently implemented by government and humanitarian communities at all levels to help save lives and strengthen resilience among these vulnerable populations, their FNI situation may deteriorate further. (Table 3)

Table 3: Estimated Population Per Phase of Food and Nutrition Insecurity in the Projected Situation (June to August, 2023)

State	Total Population analyzed	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	Total in Phase 3 to 5
Adamawa	5,205,688	1,744,258	2,407,367	1,049,583	4,479	-	1,054,062
Abia	5,168,473	2,510,653	2,156,996	500,824	-	-	500,824
Bauchi	7,984,472	5,232,175	2,029,340	722,957	-	-	722,957
Benue	7,083,550	3,811,774	2,530,631	741,145	-	-	741,145
Borno	6,524,425	1,734,091	2,817,288	1,644,227	328,819	-	1,973,047
Cross River	4,913,292	3,567,072	1,148,626	197,594	-	-	197,594
Edo	5,571,715	3,808,487	1,169,236	593,992	-	-	593,992
Enugu	5,370,406	3,237,960	1,555,060	577,386	-	-	577,386
FCT	4,988,438	3,531,295	1,002,034	455,108	-	-	455,108
Gombe	3,658,473	2,350,747	1,025,176	282,550	-	-	282,550
Jigawa	7,502,661	4,058,583	2,281,423	1,162,654	-	-	1,162,654
Kaduna	9,958,036	3,619,537	4,608,661	1,729,838	-	-	1,729,838
Kano	15,938,219	10,157,500	4,120,346	1,505,595	154,778	-	1,660,373
Katsina	9,367,521	4,455,238	3,126,855	1,628,755	156,674	-	1,785,429
Kebbi	5,226,924	2,874,808	1,724,885	574,962	52,269	-	627,231
Kogi	4,530,100	1,806,324	2,021,172	702,604	-	-	702,604
Kwara	3,621,999	1,013,602	2,267,116	341,281	-	-	341,281
Lagos	29,985,050	18,803,837	8,734,587	2,446,625	-	-	2,446,625
Nasarawa	2,399,096	1,516,702	585,913	296,481	-	-	296,481
Niger	6,755,587	4,079,290	1,837,056	769,403	69,839	-	839,242
Ogun	8,269,381	4,948,139	2,870,483	450,759	-	-	450,759
Plateau	4,843,918	2,134,152	1,723,317	986,449	-	-	986,449
Rivers	8,683,579	5,526,474	2,607,504	549,601	-	-	549,601
Sokoto	6,043,183	3,136,065	1,918,057	968,618	20,443	-	989,061
Taraba	3,673,846	2,063,826	1,137,348	443,948	-	-	443,948
Yobe	4,887,043	1,711,472	1,952,284	1,034,220	189,068	-	1,223,288
Zamfara	5,396,348	1,316,426	2,599,011	1,349,087	131,824	-	1,480,911
Total	193,551,423	104,750,487	63,957,773	23,706,246	1,108,193	-	24,814,440

Estimated IDPs Population per phase of Food and Nutrition Insecurity Situation in Sokoto and Zamfara States.

In the current period (March to May, 2023) about 13,971 (22.7 %) of the analyzed IDPs populations in Sokoto and Zamfara States were in crisis to emergency phases (Phase 3-4) of food and nutrition insecurity. Findings from the Essential Needs Assessment (ENA) in the various camps and settlement communities surveyed revealed high levels of food consumption gaps and disrupted livelihood. Borrowing food, unsustainable coping strategies and high debt rate to access food including basic non-food items (NFI) was a challenge among the populations. There were also constraints of access to basic primary health service delivery and WASH related issues in the camps (Table 4).

Table 4: Estimated IDP Population Per Phase of Food and Nutrition Insecurity in the Current Situation (March to May, 2023)

State	Total Population analyzed	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	Total in Phase 3 to 5
Sokoto	44,795	18,814	15,678	9,407	896	-	10,303
Zamfara	16,674	5,502	7,503	3,502	167	-	3,668
Total IDPs	61,469	24,316	23,182	12,908	1,063	-	13,971

In the projected period (June-August, 2023), the number of IDP population in the critical phases of FNI may increase to 17,993 representing 29.3 % of the overall analyzed IDPs populations in the critical phase of FNI. These persons would require urgent food aids and livelihood assistance interventions to prevent further deterioration of food and nutrition security situation. (Table 5)

Table 5: Estimated IDP Population Per Phase of Food and Nutrition Insecurity in the Current Situation (June to August, 2023)									
State	Total Population	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	Total in Phase		
	analyzed						3 to 5		
Sokoto	44,795	15,230	16,574	11,647	1,344	-	12,991		
Zamfara	16,674	3,335	8,337	4,169	834	-	5,002		
Total IDPs	61,469	18,565	24,911	15,815	2,178	-	17,993		



METHODS AND PROCESS

The Cadre Harmonisé Analytical Framework

The Cadre Harmonisé analytical framework is a regional system for food crisis prevention and management analysis that considers various outcome indicators of food and nutrition insecurity and the impact of contributing (key drivers and limiting) factors. The March, 2023 CH analysis was conducted at the zonal (senatorial) level in 22 out of the 26 States and the FCT, and at the LGA level in Adamawa, Bauchi, Borno, and Yobe States. The population of Internally Displaced Persons (IDPs) were specifically analyzed for Sokoto and Zamfara States. However, number of displaced persons were also factored in for all other states (Benue, Niger, Plateau and Katsina) that have related insecurity challenges. Inaccessible population in totally or partially accessible LGAs of Borno (10 LGAs), Adamawa (1 LGA) and Yobe (3 LGAs) were analyzed too. The methodology and process adopted for the analysis entails the collation of available data and information generated by partners and government Ministries, Departments and Agencies (MDAs) by the analysis team. The national and state analysis taskforces then harmonize these data and information following the principles and standards of Cadre Harmonisé through the convergence of evidences and technical consensus reached in a very objective manner. The state level analysis were conducted in each of the participating states from 28th February to 7th March, 2023. Results generated at the state level analysis were validated in Abuja by various stakeholders including Food Security Sector partners, Nutrition Sector partners, the humanitarian community, government institutions, non-governmental organizations, among others, from 13th to 15th March, 2023; while the final results of the Cadre Harmonisé analysis was presented to top government officials, policy makers and a spectrum of stakeholders at Federal and State levels on 16th March, 2023, for adoption and use in programming for intervention for the vulnerable population.

Analysis of populations in partially and totally inaccessible areas of Adamawa, Borno and Yobe States

The overall results of this March, 2023 CH analysis included those of 31 totally and partially inaccessible LGAs in Borno (24), Adamawa (3) and Yobe (4). Specifically, a total of fourteen (14) LGAs comprising 10 in Borno (Abadam, Askira/Uba, Bama, Chibok, Damboa, Gwoza, Kukawa, Magumeri, Marte, Guzamala), 1 in Adamawa (Madagali) and 3 in Yobe (Geidam, Gulani and Gujba) were comprehensively analyzed as either totally or partially inaccessible, using the special protocol prescribed in the Version 2.0 of the CH Manual, Based on technical consensus, these LGAs were specially analyzed because they met the threshold of sample size requirement (60 households) from new arrivals and the availability of relevant outcome and contributing factors generated on the areas by the Task Force on Humanitarian Situation Monitoring System (HSMS) for Inaccessible Areas, comprising of the Government Authorities, Food Sector Cluster, Nutrition Sector, WASH Sector, NGOs, CH Members and Humanitarian actors. The data used for the analysis of totally and partially inaccessible areas were basically for food consumption, livelihoods and nutrition outcomes, and several contributing factors which were collected from new arrivals who had left the inaccessible/partially accessible areas 30-day prior to the interviews. These outcomes were complemented with other evidences (contributing factors) such as high-resolution satellite images (from EU/JRC, Nigeria Space Research and Development Agency, AGRHYMET/CILSS, FEWS NET and WFP), population displacement, food commodities prices, flood disaster incidence by the National Emergency Management Agency and additional information on food security, livelihoods, weight for height and MUAC screening of new arrivals from inaccessible areas. Other inaccessible LGAs that were monitored by the HSM Task Force but were not specially analysed due to unrepresentative sample size include Biu, Dikwa, Gubio, Jere, Kaga, Konduga, Maiduguri, Mafa, Mobbar, Monguno, Ngala, Nganzai, and Mobbar (Borno), Hong and Michika (Adamawa) and Gulani, Yusufari and Yunusari (Yobe). In all the LGAs of Borno, Yobe, and Adamawa, with inaccessible population but unrepresentative sample size with limited outcome level information, the inaccessible populations were factored into the global analysis of these areas.



RECOMMENDATIONS

For Action by Policy Maker:

- 1. Government and humanitarian community should sustain the implementation of life-saving interventions of food assistance and unconditional cash transfers (social welfare package) to vulnerable populations in the affected areas.
- Intensify support towards Agricultural livelihood and resilience building, especially to returnees and host communities who have access to land for cultivation.
- 3. Government, Civil Society Organizations and Private Actors should sustain efforts in facilitating humanitarian access to the inaccessible/hard-to-reach areas so as to provide basic assistance to those in critical need.
- 4. Sustain and promote various resilience-building interventions for households through Small and medium Scale Enterprises (SMEs), prioritizing the vulnerable populations to enable them to get a fresh start-up for their livelihood, as well as dry-season agricultural production inputs.
- 5. Continue to adopt the CH analysis results as a tool for response planning, policy formulation and resource allocation by Governments, humanitarian agencies and NGOs to address the challenges of critical food and nutrition insecurity of populations and zones. Thus, states should consistently strengthen and expand the composition of the State Analysis Task Force (SATF) to ensure plurality.
- 6. Government at all levels should consciously make annual budgetary provision to support the implementation of CH activities. Such provision should be adequate enough to also cover the conduct of food and nutrition security related assessments in all the states to strengthen the credibility of the CH results.

By Technical and Financial Partners:

- Partners should sustain the joint support for timely conduct of Food and Nutrition Security assessments to ensure the provision of relevant data and
 information for the CH analysis, particularly in the states that are worst affected by insurgency, banditry and other forms of shocks and hazards,
 where population displacement and loss of livelihoods remain pronounced.
- 2. Continue to complement the efforts of governments in implementing the recommendations arising from the outcome of CH analysis, towards assisting the populations and areas identified to be vulnerable to acute food and nutrition insecurity.
- 3. Increase the support given to the NPFS/FMARD for the implementation of CH activities nationwide, but with special focus on the states yet to be mainstreamed into the CH process (advocacy visit to and sensitization of new states, decentralized training for new states and re-training of the CH analysis cells of the old states).

- Need to support the development of efficient technology-driven approaches to effectively communicate and disseminate the outcome of the CH
- Support for technical capacity strengthening of the national and state CH task force members in the analysis of food and nutrition security indicators, conduct of food and nutrition security assessments (FNSA), essential needs assessment (ENA), and household economic analysis (HEA) to deepen their insights on the CH process
- Increase synergy among Regional (ECOWAS, CILSS, WFP, FAO, FEWSNET, SCI, among others) and national partners to boost the support and implementation for scaling up of CH activities in Nigeria



CONTACTS

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FINANCIAL PARTNERS













TECHNICAL PARTNERS















































