**Overview**

By the end of July 2020, corresponding to the harvest period, the number of people in crisis (IPC Phase 3) in the nine districts analysed will likely reach approximately 527,000 (23% of the population analysed), an increase of almost 10% compared to the estimate made in October 2019. As for the number of people in emergency (IPC Phase 4), it is estimated at 27,400, or 1% of the population analysed.

Despite the humanitarian aid provided since January 2020 and planned until July 2020, eight districts will likely remain in crisis (IPC Phase 3) and Tulear 2 in stress (IPC Phase 2). Almost all the districts of the Great South were affected by the drought that occurred between January and March 2020. Ampanihy and Tsimhobé Districts are the most affected, with 25% of households expected to be in IPC Phase 3 (Crisis) and 5% in IPC Phase 4 (Emergency).

The good rainfall forecast during the analysis conducted in October 2019 did not occur. On the contrary, the rainfall trends recorded between January and March 2020 showed a large rainfall deficit. The main agricultural season was missed by most of the rural population, especially for cereals and pulses. Expected production from April onwards will be low or insignificant for most districts. In addition, consumption of tubers before they reach full maturity will take place from May-June 2020. The lean season will likely be early.

In addition, the socio-economic impacts of the restriction measures to contain the spread of COVID-19, and the direct and indirect threats of COVID-19, hang over the Great South. A disruption of the market supply chain is inevitable, with food prices under threat in the coming weeks.

Migration will no longer be an option to find alternative sources of income, and the population of the Great South, who have already migrated to the big cities, are directly affected by the impacts of containment and can no longer transfer money to the family remaining in the area.

The most affected households will be poor agricultural households living on small plots of land and without livestock. Without assistance, this segment of the population could engage in coping strategies that could damage their livelihoods and the environment.

The number of people in IPC Phase 3+ is estimated at 27,400, or 1% of the population analysed, an increase of almost 10% compared to the estimate made in October 2019. As for the number of people in emergency (IPC Phase 4), it is estimated at 27,400, or 1% of the population analysed.

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Response priorities
➤ The Government and humanitarian partners should support the population in Phases 3 (Crisis) and 4 (Emergency), to limit the impacts of the drought, as well as put in place restrictive measures to contain the spread of COVID-19, while allowing households to maintain their livelihoods and access to food.
➤ In the current context of the COVID-19 epidemic, and given that the introduction of restrictive measures would be very challenging in the Great South (limited access to water and sanitary products), the Government and all actors intervening in the Great South are called upon to put in place systems and measures for the secure implementation of assistance to the vulnerable population of the Great South.
➤ During the projected period, it is necessary to put in place mechanisms for monitoring:
   • The actual level of mobility of people and goods in the areas of analysis in order to determine the impact of containment measures on economic activity;
   • The main sources of household income and food prices in secondary markets;
   • The nutritional situation;
   • The implementation of food aid plans taken into account in the analysis;
   • The number of households affected by COVID-19.

Risk factors to monitor
➤ Low production in the analysis districts, which could play a crucial role in the local market mechanism, to the disadvantage of the most vulnerable. Market prices could experience unusual increases due to disruptions in national and international supply chains (due to COVID-19) and stock retentions at the level of producers in the zone and/or at the level of the districts’ usual supply areas.
➤ Insecurity, which could increase in these areas and, as a result, there would be an increase in livestock theft and the supply of local markets could be disrupted.
➤ Groundwater availability and water table levels.
➤ Attendance at health centres for health care visits, for the management of malnutrition and associated diseases due to fear of COVID-19.

What is the IPC and IPC 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 on the determinants of food insecurity.

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Classification of food insecurity and malnutrition was conducted using the IPC protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-IIPC, FAO, FEWSNET, Global Food Security Cluster, Global Nutrition Cluster, IGAD, Oxfam, PROGRESAN-SICA, SADC, Save the Children, UNICEF and WFP.

IPC Analysis Partners: