### KEY FIGURES

**OCT.-DEC. 2016**

- **People in “Crisis” (IPC Phase 3) and “Emergency” (IPC Phase 4)**
  - Ampanihy: 168,000 pp.

- **Over 840,000**
  - 52% of the population

**KEY HIGHLIGHTS**

- The level of food insecurity is alarming in 8 districts of 3 regions of the *Grand Sud* of Madagascar and is expected to deteriorate by early 2017, unless the affected populations are able to recover their livelihoods and access to food and income drastically improves.

- The main causes of the severe situation in the most affected districts are the devastating effects of El Niño, including poor rainfall, which have resulted in insufficient household agricultural production (corn, cassava and rice) and depletion of food stocks. Rising food prices have further exacerbated the situation and significantly affected households’ purchasing power in a context of limited resilience to climate and natural shocks.

- The prospects for the period January - March 2017 indicate that the situation might further deteriorate if humanitarian assistance is not scaled up.

### INTEGRATED FOOD SECURITY PHASE CLASSIFICATION (IPC) MAPS

**Projected IPC Acute Analysis (Oct. – Dec. 2016)**

**Projected IPC Acute Analysis (Jan. - Mar. 2017)**

**Emergency agricultural interventions are critical to relaunching household food production as well as income generation.**

Map Notes:
- District classification based on whether area has at least 20% of households in need of urgent assistance to protect livelihoods and decrease food consumption gaps.
As of October-December 2016, 52% of households in 8 districts of the Grand Sud of Madagascar are severely food insecure (equivalent to IPC Phase 3 "Crisis" and IPC Phase 4 "Emergency"). Among those, 20% are classified to be in Emergency (IPC Phase 4) with extreme food gaps and are in urgent need of assistance.

The highest proportions of acutely food insecure populations are observed in Tsihombe, Beloha and Amboasary Sud districts and four municipalities in the district of Tsihombe. Households in IPC Phase 4 are likely to be those who have lost all crops, do not own animals and do not have other significant sources of income apart from those related to agricultural activities.

Evidence shows that the situation is likely to deteriorate in January-March 2017 if humanitarian assistance is not scaled up. During this period, food production, stocks and income will continue to be insufficient to allow adequate food consumption of households that are already facing acute food insecurity conditions.

FACTORS DRIVING ACUTE FOOD INSECURITY and OUTCOMES

The devastating effects of El Nino have significantly affected households’ food availability and access thus contributing to acute food insecurity. Inadequate and erratic rainfall have resulted in a major decrease in agricultural production and livestock holdings, consequently reducing food availability. Local production of key staples (corn, rice, and cassava) in the areas analysed was 50 to 95 percent below the recent 5-year average, resulting in a third consecutive year of below-average production in the worst-affected districts. As a result, prices have increased rapidly and significantly affected households’ purchasing power, in a context of high poverty levels and limited employment opportunities.

Major outcomes of acute food insecurity include the significant increase in the proportion of households consuming an inadequate diet in all analysed districts. In addition, 30 to 40% of households are resorting to coping strategies that are typical of emergency and crisis conditions, including consumption of seeds, sale of productive assets etc. Furthermore, the measurement of the Global Acute Malnutrition (GAM) among assessed children showed emergency levels in three municipalities of Tsihombe district and three municipalities of Behara, Maroivo, Kopoky.

RECOMMENDATIONS FOR IMMEDIATE RESPONSE

The Government and partners are recommended to scale-up on-going efforts and prioritize the most affected populations between for the period October-December 2016 and until March 2017, by:

- Providing immediate humanitarian assistance, especially food aid to the estimated 52% of people in IPC Phase 3 and 4 in the most affected districts and municipalities.
- Urgently distributing seeds and cuttings of maize, sorghum, cassava to abovementioned populations as complementary intervention to food aid for seeds protection purposes.
- Implementing other interventions focused on livelihoods protection and assets recovery in all IPC Phase 3 and IPC Phase 4 areas.
- Support the estimated 32% of people in IPC Phase 2 in order to prevent further deterioration of their food insecurity
- Scaling -up prevention, screening and treatment of acute malnutrition in all districts.
- Increasing WASH and basic health emergency programmes targeting the most vulnerable.

METHODS AND PROCESSES

The IPC Acute Analysis was conducted in September - October 2016 by the Multi-Sectoral IPC Technical Working Group (TWG), which is coordinated by the which is coordinated by the National Vulnerability Assessment and Analysis Committee (NVAC) of the Southern African Development Community (SADC). Over forty experts, coming from several national institutions and international NGOs, as well as UN agencies, participated in the analysis. Government staff represented 90 per cent of the participants The IPC TWG used all available and relevant data on acute food insecurity and developed the classification of projected situation applying the Integrated Food Security Phase Classification (IPC) protocols.

RECOMMENDATIONS FOR MONITORING

The Multi-Sectoral IPC TWG is recommended to update the IPC Acute Food Insecurity analysis as new key food security and nutrition data becomes available. In particular, further evidence (essentially on nutrition and mortality – in addition to more recent Food Security indicators) will be required to exclude or estimate whether a portion of the population may be facing a Catastrophe (IPC Phase 5).

CONTACT

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