# SUDAN: Integrated Food Security Phase Classification Snapshot | June - December 2020

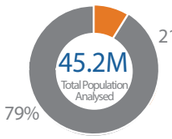
IPC Integrated Food Security Phase Classification
Evidence and Standards for Better Food Security and Nutrition Decisions

## Current Acute Food Insecurity Situation June-Sept 2020

**9.6M**

9.6 million people in Sudan are estimated to be in high acute food insecurity (IPC Phase 3 and above) between June and September 2020

People facing high acute food insecurity (IPC Phase 3 and above)




## Overview

In the current period (June to September 2020), an estimated 9.6 million people are experiencing high levels of acute food insecurity (IPC Phase 3 or above) and are in need of urgent action. This is the highest figure ever recorded in the history of the IPC in Sudan compared to previous years. Around 2.2 million people are facing an Emergency acute food insecurity situation (IPC Phase 4) and around 7.4 million people are facing Crisis acute food insecurity (IPC Phase 3). Nearly 15.9 million people are estimated to be in Stress (IPC Phase 2). This is also a high figure compared to previous analyses; a result of population shifting to worse phases. Overall, all localities from 18 Sudanese States have been classified, with exception of At Tina locality in North Darfur and Abyei PCA area in West Kordofan, where there was no data collected and similar locality data could not be used either.

Food insecurity remains alarmingly high in Sudan with increased and protracted displacement, economic decline and inflation, and high food price hikes, exacerbated by the impacts of the COVID-19 pandemic. The lockdown measures to prevent the spread of the COVID-19 pandemic significantly decreased commodity movement, market function and cross-border trade, and compromised livelihoods, daily labour opportunities, reducing household purchasing power and food access of the vulnerable population.

The most affected groups are: Internally displaced people (IDPs), returnees, those stranded in conflict areas, refugees from South Sudan and other neighbouring countries; Poor groups from agropastoral and pastoral communities in rural areas of Western, Eastern and Northern Sudan, whose livelihoods are directly affected by the impact of COVID-19 control measures; Poor groups in urban and semi-urban centers (25%), including Khartoum, Jazeera, White Nile and Red Sea state, in addition to other main towns in the country.

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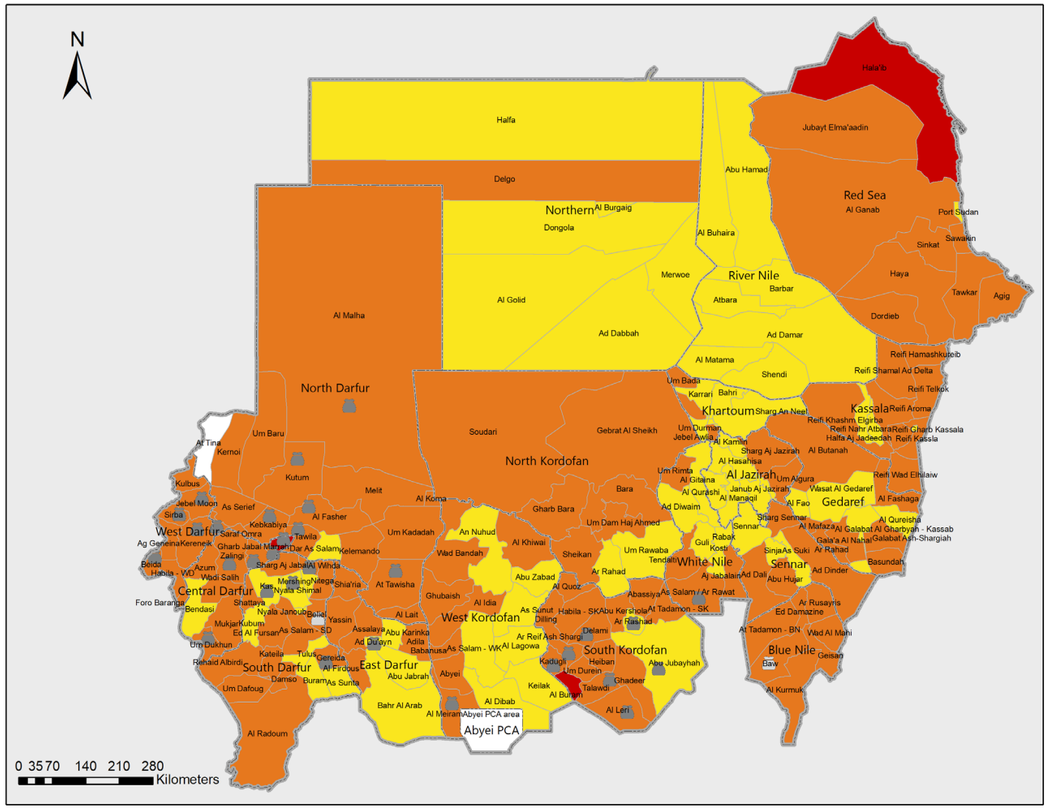



### Key for the Map

**IPC Acute Food Insecurity Phase Classification**

- 1 - Minimal
- 2 - Stress
- 3 - Crisis
- 4 - Emergency
- 5 - Famine
- Areas not analysed
- > 25% of households meet 25-50% of caloric needs through assistance
- > 25% of households meet > 50% of caloric needs through assistance

### The Impact of COVID-19

Lockdown and movement restrictions imposed may be lifted in the near future, however, the economic impact on trade/labour will likely continue. COVID-19 restrictions may have an indirect impact on agriculture production through reduced labour supply (less willingness to hire outsiders or increased illness and loss of productivity among labour supply). A FAO Sudan report on the adverse impact of COVID-19 shows that restricted internal and cross-border movements, livestock transhumance and nomadic migrations were already curtailed, causing the concentration of herds in limited spaces. This resulted in deteriorated health and body conditions of livestock and depletion of environment and natural resources. Furthermore, high food insecurity and livelihoods losses are anticipated, due to the adverse impacts of COVID-19 measures, coupled with the pre-existing common driving factors, in the immediate, medium and longer terms.

The effect of lockdown on market activities of selling and buying different needs; closures of state and national borders also affected transportation and availability of food commodities within and outside the States and drastically increased the prices. The daily labourers were among the most negatively affected groups. Food availability and supply to the market is affected by agricultural labour shortages and increased cost of transportation.

Access to food is also affected because many micro-enterprises and petty/small informal businesses were restricted or curtailed, causing loss of income that enabled vulnerable people to purchase food and other livelihood necessities.

Food utilization is affected by lower market availability and higher prices of nutritious foods, in addition to high rates of illiteracy and traditional food culture, which may result in increased acute malnutrition.

Above all, food stability is affected due to the restrictions/interruptions of flow of goods and services. In addition, the flow of safety nets and social protection of the vulnerable population might be affected by the COVID-19 restriction measures.

## Key Drivers

### COVID-19 prevention measures

Lockdown and other measures put in place to prevent COVID-19 spread had a negative impact on food availability and access, more precisely on prices, on income and food expenditure.

### Economic decline and inflation

Significant macroeconomic challenges still prevail in the country, resulting in high inflation rates exacerbated by COVID-19 prevention measures.

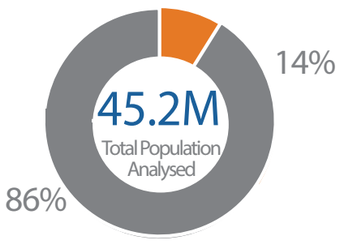
### Conflict induced displacements

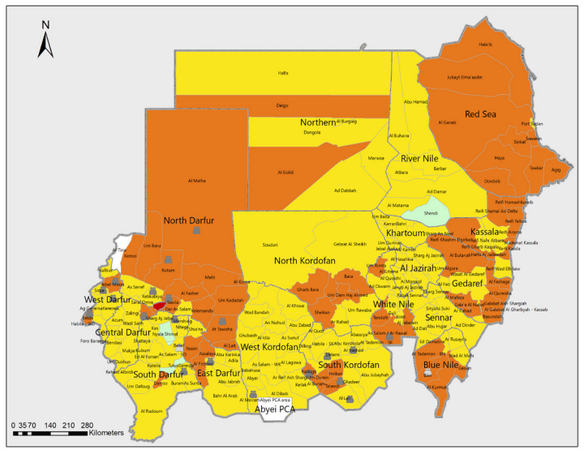
Increased population movements and displacement due to fresh and protracted conflict. Internally displaced population reached 1.89 million people.

## Projected Acute Food Insecurity Situation | October - December 2020

**6.4M**

6.4 million people are expected to be in high acute food insecurity (IPC Phase 3 and above) from October to December 2020




### Humanitarian Food Assistance

In the current and projection analysis periods, out of 86 localities that received Humanitarian Food Assistance (HFA), 32 localities had at least 25% of their households benefiting from the assistance in the form of food or food vouchers, and all the beneficiaries were receiving 50% and above of their daily caloric requirements. The people targeted by this humanitarian assistance are mainly Internally Displaced Populations, vulnerable host families, refugees and returnees, particularly in the states where some of the localities have received significant HFA: Khartoum, Blue Nile, White Nile, South Kordofan, West Kordofan, Central Darfour, North Darfour, West Darfour, South Darfour and East Darfur. Humanitarian assistance has contributed to reducing the impact of COVID-19 on the food security of the assisted population. However, the evolution of the COVID-19 pandemic and the measures taken to limit its spread will likely amplify needs, particularly in main urban centres, especially for those who lost their employment and those relying on daily wage labour.

In the projection period, 22 localities out of 86 will have 25% of households benefiting from the assistance and all of them will receive 50% and above of their daily caloric requirements. Humanitarian assistance in form of food or food vouchers should be scaled up and continue targeting IDPs, refugees, returnees and vulnerable households in the host community, as well as giving priority to populations classified in Emergency and Crisis.

**Publication date:** July 2020 *IPC population data is based on population estimates from the Central Bureau of Statistics of Sudan. *Disclaimer: The information shown on this map does not imply official recognition or endorsement of any physical and political boundries.*

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