

# PACIFIC – FIJI

mobile Vulnerability Analysis Mapping (mVAM) Bulletin: July - November 2020

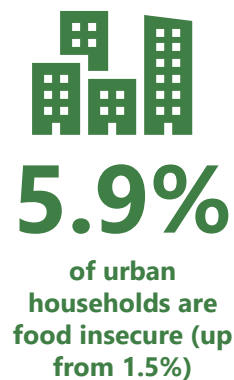
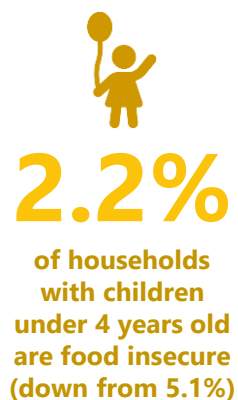
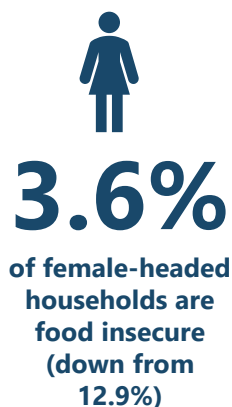


vam  
food security analysis

Driven by improvements in food consumption and decreases in levels of deprivation to essential needs, households estimated to be food insecure decreased to **3.7 percent** in November from 7.3% in September. Despite improvements, households are increasingly reliant on negative coping strategies to meet essential needs, which will have an impact on households in the long term.

## KEY FIGURES – PERCENTAGE OF FOOD INSECURE HOUSEHOLDS

NOVEMBER FIGURES COMPARED TO SEPTEMBER



## KEY INSIGHTS

When asked to provide insights into how the pandemic has affected their lives, here is what some respondents had to say:



It is a struggle when there are a lot of members in the house and only one supporting the household.

– Woman from Ba



We need to make use of our soil and plant for our own family.

– Man from Nadroga-Navosa



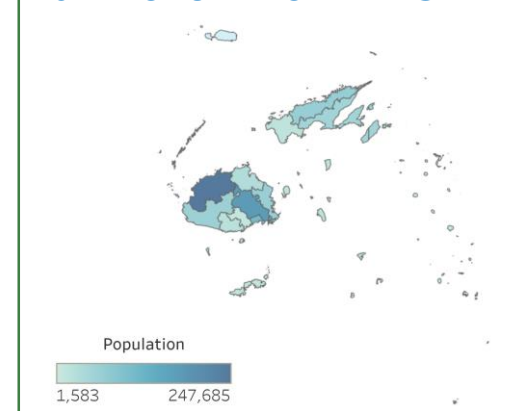
This pandemic it has affected children because before they used to have 3 normal meals and now the main issue is some households don't have any food.

– Woman from Ba

## PURPOSE

WFP finalized its fourth survey in late **November** 2020, collecting household data nationwide. The **aim** of this bulletin is to regularly update the food security and livelihoods situation in Fiji. The mobile Vulnerability Analysis and Mapping (mVAM) platform gathers data on impacts to food security, livelihoods and income-generating opportunities. Households answer key questions on the impacts of COVID-19 and natural hazards through telephone interviews.

## FIJI - POPULATION DENSITY



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## SITUATION UPDATES

Though Fiji marked 200 days without COVID-19 transmission on November 4th, the pandemic continues to drive unprecedented impacts on the economy.<sup>1</sup>

COVID-19's impacts on the economy had already been compounded by the FJD/USD 46.3 million losses suffered as a result of category 4 Tropical Cyclone Harold. High exposure to natural hazards continues to pose threats to the economy and food security, requiring monitoring households' ability to meet essential needs.<sup>2</sup>

Fiji's economy is expected to contract by 19.8% in 2020. Revenue as percentage of GDP fell by .9% from 27.3% in 2019, while a further decrease of 9.5% expected in 2021's fiscal year. The fiscal deficit is expected to increase to 20.2% of GDP in 2021, up from 8.2% in 2020.<sup>3</sup>

The expectation for tourism to bounce back through a travel bubble with tourist markets has not materialized. Meanwhile, domestic household demand continues to decline, as GDP contraction has significantly impacted household income.<sup>4</sup>

WFP's Fiji mVAM figures show that in October, 52% of households relied on their own production, gifts, aid, or other sources as their main source of food. Economic uncertainty continues to impact households, as 43% of households reported they were most worried about increases in food prices, while 20% worried most about lack of work in November. This shifted with concerns reported in July showing lack of work as the main concern.

Unemployment benefits have continued, but fiscal sustainability may require cutting back certain stimulus measures. To support continued stimulus, the Government of Fiji has also increased external borrowing.<sup>5</sup>

A positive trend during uncertain economic times have been remittances, which have held steady, with no recorded decreases<sup>6</sup>. WFP mVAM results show that 19% of households had received remittances in the past 30 days, while 13% had at some point received remittances but not within the 30-day window. Most households that received remittances in November (79%) stated that their value had remained the same (13% decreased and 7% increased).

<sup>1</sup>World Health Organization, November 2020. "Fiji reaches COVID-19 milestone, but remains vigilant". Accessed: <https://www.who.int/westernpacific/about/how-we-work/pacific-support/news/detail/05-11-2020-fiji-reaches-covid-19-milestone-but-remains-vigilant>

<sup>2</sup> Asian Development Bank, July 2020. "Pacific Economic Monitor". Accessed: <https://www.adb.org/sites/default/files/publication/622976/pem-july-2020.pdf>

<sup>3</sup>Asian Development Bank, December 2020. "Pacific Economic Monitor". Accessed: <https://www.adb.org/sites/default/files/publication/662406/pem-december-2020.pdf>

## KEY POINTS

In November, 95% of households nationwide had **acceptable food consumption** in the 7 days prior to survey; compared with 82% in round one. Though households improved overall consumption, **food prices became the main concern for 43% of households**.

**Urban** food insecurity overtook rural levels in November: 5.9% urban versus 2.5% rural.

**Low iron consumption** was widespread across households but slightly higher for households with children under 4 years of age (87% low and 4% not at all). A focus on monitoring pregnant and lactating women and young children will be necessary to guide options for increasing iron consumption.

**National** percentage of households employing stress, crisis, and emergency levels of negative coping strategies to meet basic needs **increased** (i.e. asset depletion like spent savings). These strategies increased from 44% in August to 60% in November. This will have **short and long-term** implications on households' ability to meet essential needs.

**Female-headed** households have seen a steady increase in adoption of negative coping strategies, likely due to higher reliance on the tourism industry. The percentage of female-headed households resorting to crisis strategies increased from 35% to 42%.

**Households living with a person(s) with a disability (PwD) had the highest percentages**, 37% engaged in negative coping strategies that meet stress levels, 19% crisis strategies, and 7% employed emergency strategies to meet basic needs.

Though percentage of households reporting current **reduction/no income** declined to 29% in November compared to 54% in round one, this is due to round 1 capturing responses since COVID-19. **Urban households reported higher percentages** of current reduction/no income than rural counterparts: 35% urban versus 25% rural.

**Deprivation** of essential needs along non-economic dimensions (food, living conditions, education, health, and sanitation) **improved** for urban and rural households, with 11% and 10% respectively classified as deprived compared 21% and 31% in August.

Despite decreases in households' deprivation of basic needs, in November, households that were female-headed (23%), had children under 4 (20%) and persons with a disability (21%) maintained **higher** levels of deprivation than seen nationally (11%).

<sup>4</sup> Asian Development Bank, December 2020. "Pacific Economic Monitor". Accessed: <https://www.adb.org/sites/default/files/publication/622976/pem-july-2020.pdf>

<sup>5</sup> Asian Development Bank, December 2020. "Pacific Economic Monitor". Accessed: <https://www.adb.org/sites/default/files/publication/622976/pem-july-2020.pdf>

<sup>6</sup> Howes & Surandiran, November 2020. "Pacific remittances: holding up despite COVID-19" Accessed: <https://devpolicy.org/pacific-remittances-covid-19-20201116/>

## HOUSEHOLD FOOD CONSUMPTION

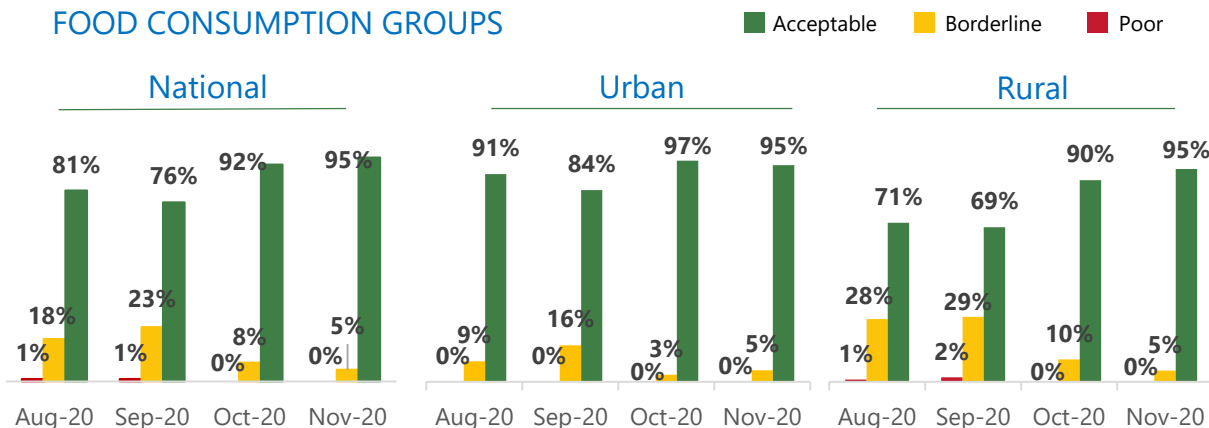
In November, Fiji’s national mean food consumption score based on nutritional quality analysis (FCS-N) showed frequency and diversity of food consumption to be acceptable. However, the FCS-N is used to understand which nutrient rich food groups are consumed by the household that are essential for nutritional health and well-being: protein, iron and vitamin A. The survey includes questions on consumption of food disaggregated for nutrient-rich groups, with results showing protein and iron consumption maintained the same low levels observed in previous rounds.

**NATIONALLY**, households’ food consumption by food groups showed a majority to have acceptable levels of consumption (95% up from 81%), this was the same of

vitamin A. Protein and heme iron consumption (iron from meat) had higher levels of low consumption (21% and 85% respectively). In November, 7% of households, up from 2% in July, recorded no consumption of iron at all.

Food consumption improved for **URBAN AND RURAL** households, increasing to 95% acceptable levels for both categories. The more notable difference was in rural areas, where 28% of rural households had recorded borderline levels in July/August, decreasing to 5% borderline consumption in November.

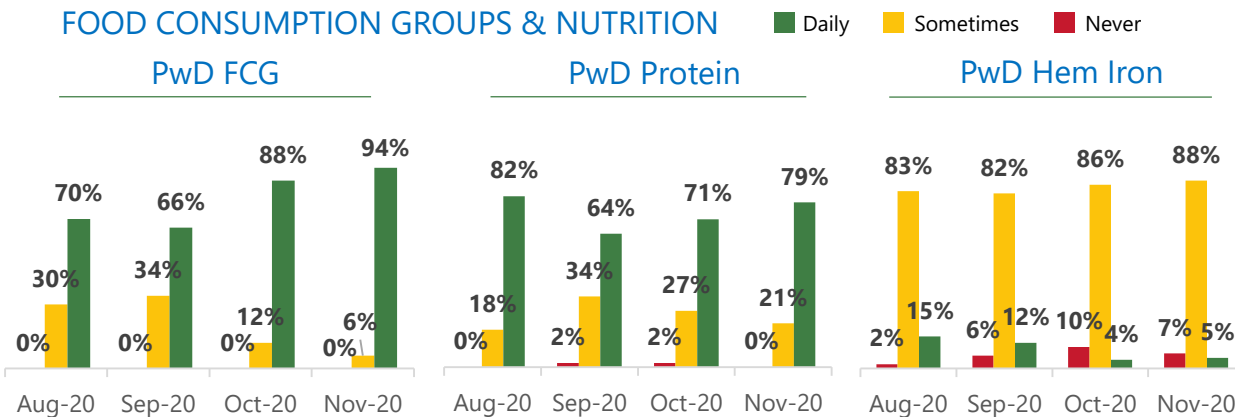
### FOOD CONSUMPTION GROUPS



Higher percentages of households that did not consume or reported low consumption frequency of specific nutrient-rich food face higher risks of micro-nutrient deficiency. Rural and urban households had similar percentages of low iron consumption, with 85% showing low consumption for both, while 6% of rural and 9% of urban households never consumed iron at all. The low iron consumption measure is driven by low intake frequency of meat, organ meat, and fish.

Rural and urban protein intake remained relatively unchanged from July to November, hovering above 20% for low intake. This was driven by lower consumption of pulses, dairy, and meats. Rural households had high frequency of consumption of sugary products (6 days average compared to 3.7 average days in urban households).

### FOOD CONSUMPTION GROUPS & NUTRITION



Though overall food consumption scores and consumption of food groups were generally acceptable and micro-nutrient and macro-nutrient consumption show similar trends for all categories (households that are female-headed, have children under 4, etc.) the lowest levels of iron consumption were found in households with persons with disabilities (**PwD**) and children under 4 years of age (**CH<4**).

88% of PwD households had low iron consumption compared to 84% of households with no PwD. Consumption by food groups improved considerably for households with PwD, with borderline levels of food group consumption decreasing from 30% to 6%.

87% of households with children under 4 years of age had low levels of iron consumption, 4% never consumed iron.

## Livelihood-based Coping Strategies (LCS)

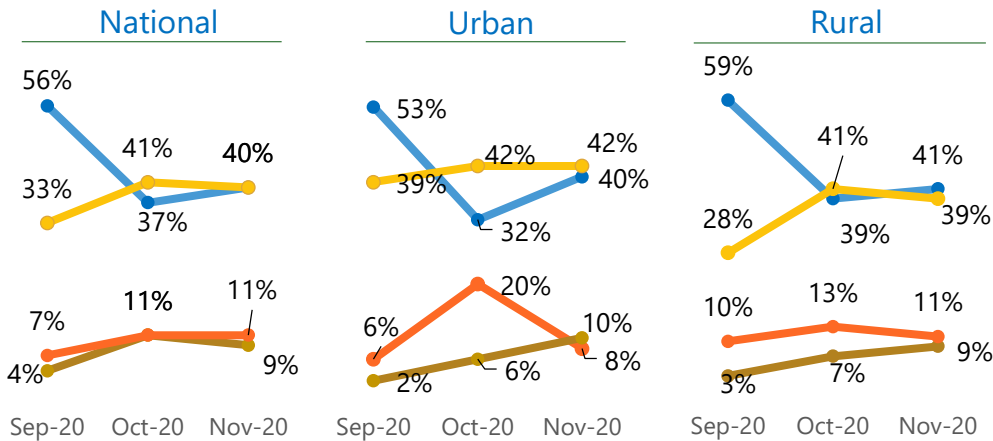
In September, WFP began collection of livelihood-based coping strategies (LCS), which identifies negative coping strategies adopted by households to meet essential needs. LCS classifies households according to the most severe coping strategies adopted, which highlight how households' mid to long-term capacity to generate an income and sustain livelihoods is negatively impacted.

**NATIONALLY**, more households adopted negative coping strategies to meet essential needs. In September, the percentage of households adopting stress strategies increased

from 33% to 40% in November. Stress strategies, such as borrowing money or spending savings indicate a reduced ability to deal with future shocks given current reduction in resources or increased debt. Crisis levels increased from 7% in September to 11% in November, pointing to households recurring to selling productive assets, which affects future productivity. Emergency strategies also increased from 4% to 9%. By selling-off major productive assets, emergency strategies affect future productivity, are more difficult to reverse, and are more dramatic in nature.

### LIVELIHOOD-BASED COPING STRATEGIES

■ None ■ Stress ■ Crisis ■ Emergency

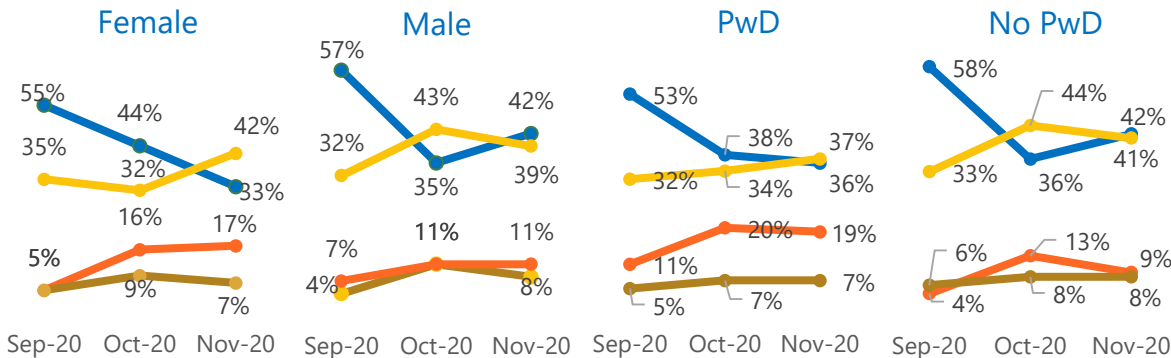


Both **URBAN AND RURAL** households have seen increases in the adoption of negative coping strategies to meet their essential needs. Urban households have increased adoption of emergency strategies from 2% in September to 10% in November; this worrying trend corresponded with high levels of borrowing in August. Though borrowing levels have declined since round 1, urban households reported higher levels of current reduction or no income than their rural counterparts (35% Urban and 25% Rural) in November. A reduction in crisis strategies for urban households was countered by increases in emergency levels in the adoption of negative coping strategies. Emergency strategies will have long term impacts on households' ability to generate an income and sustain livelihoods.

A similar trend is observed for rural households, which are experiencing an increasing reliance on emergency level strategies to meet essential needs. This trend corresponds to less dramatic decreases in crisis strategies seen in urban areas. The percentage of households resorting to crisis coping strategies was 28% in September, increasing and staying at 39% in October and November.

### Female-headed Households

### Households w/ Persons with a Disability



**FEMALE-HEADED** households have seen a steady increase in adoption of negative coping strategies, likely due to higher reliance on the tourism sector for employment. The percentage of female-headed households resorting to stress strategies increased from 35% to 42%. Households resorting to crisis strategies have had the sharpest increase from 5% to 17%. Emergency level strategies have remained between 5% and 9%. Male-headed households avoided continued increases in coping strategies, but stress levels remain high, with 41% of households adopting stress strategies, 9% engaged in crisis strategies and 8% emergency strategies.

**PWD** households experienced the highest increases in coping strategies, pointing to worrying trends in lack of ability to withstand COVID-19's economic downturn with long term implications. Increases across stress (32% to 37%), crisis (11% to 19%), and emergency (5% to 7%) strategies show high levels of asset depletion and hardship. This compounds the already higher levels of labour market exclusion observed in PwD households.

## MULTI DIMENSIONAL DEPRIVATION INDEX (MDDI) & ESSENTIAL NEEDS AND LIVELIHOODS

Traditional measures of poverty based on income are insufficient to describe the food security and livelihood situation in Fiji. mVAM data analysis therefore provides multi-dimensional deprivation as a measure of food, education, health, shelter and living conditions, water sanitation and hygiene, and debt.

**NATIONALLY**, as seen in the figures below, for the month of November 2020, there has been a steady decrease of households considered to experience deprivation to their essential needs, with 11% of households experiencing deprivation along non-economic dimensions, a 14% decrease from 25% of households experiencing deprivation in August.

For **URBAN AND RURAL** households, decreases in deprivation have been on a steady decline. Urban households had a decrease of 11% from August to November (21% down to 10% in November). This steady decrease is compared to national figures of

16% in the month of October and 21% in August. Rural households had a higher decline in deprivation, with levels matching urban areas in November decreasing to 10%, down from 13% in October, 20% in September, and 31% in August.

However, decreases nationally and in urban and rural areas mask the higher percentages of households experiencing deprivation. Households with person(s) with disability, female-headed, and with children under the age of 4 continue to hold significantly higher percentages of deprivation to essential needs than national levels.

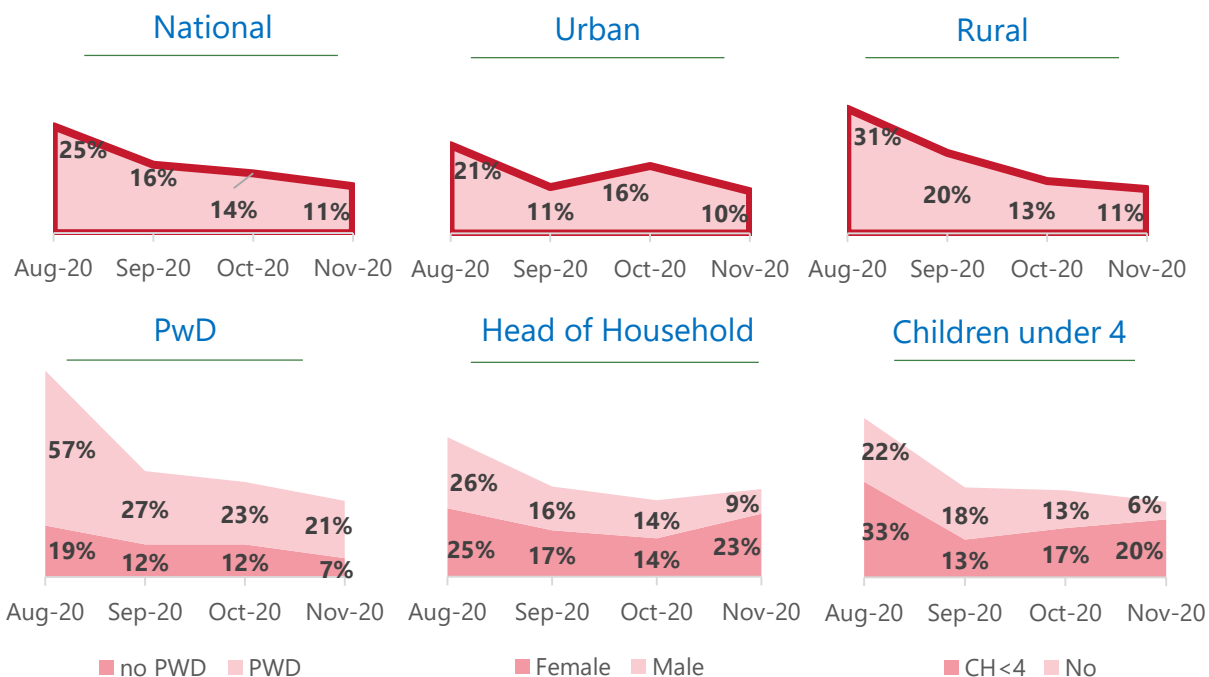
Though there was a significant decrease in deprivation for households with **PERSONS WITH A DISABILITY** (PwD) in September (57% in August to 27% in September), deprivation remains significantly high in November, at 21%, compared to 11% nationally. As seen in PwD figures, after September, the percentage of households experiencing deprivation have been on a slow decline.

Declines in deprivation to essential needs of households with PwD coincide with sharp increases in borrowing of money in August (15% of PwD), which declined sharply in September and October to 3%, rising again to 9% in November. Number of PwD households receiving remittances also increased, from 18% in August to 32%. Monitoring debt and remittances will be key to understanding economic vulnerability and overall impacts on PwD households.

Despite a sharp decline in deprivation from August to September for all households, **FEMALE-HEADED** households' deprivation was significantly higher in November at 23% compared to the national average of 11% and male-headed levels of 9%. Female-headed households have seen a decline in remittances, from 29% in August to 15% in November. Borrowing money also increased from 4% in September to 11% in October. These changes pose risks for female-headed households, requiring monitoring levels of borrowing and remittances in conjunction with other indicators and dimensions.

For households with **CHILDREN UNDER 4 YEARS** of age, deprivation declined from 33% in August to 13% in September, spiking again to 20% in November. High (55%) and moderate (41%) levels of dependency ratios for these households means working age members care for children (0-14 years old) and older persons (65 years and older) at significantly higher rates. These trends are worrying given high levels of unemployment.

### HHs DEPRIVED ALONG DIMENSIONS (%)



## HOUSEHOLD DEPRIVATION OF ESSENTIAL NEEDS BY DIMENSION

**Food** dimension is a measure based on borderline and poor food consumption and reported instances of not having enough food to feed members of the household. In November, the food deprivation measure dropped, driven by a decrease in borderline food consumption in November, which dropped to 5% nationwide. A sharp decline in borderline food consumption was observed from 23% in September to 8% in October, compared to higher levels in July of 18%. Concerns about food shortages decreased to 4% of households nationwide in November, down from 15% in August. Worries about food prices became the main concern for households across Fiji, increasing to 43% in November, likely due to market price fluctuations and not to available supply. 20% of households responded that at some point there had not been enough food to feed the household in July, decreasing to 15% in November, reflecting households' continued insecurity related to access to food not reflected in food consumption.

**Education** dimension is based on remote education policies. Education improved significantly, with 7% of households reporting remote education or other when asked if children were continuing their education remotely using resources/materials provided by their parent; a decrease from July, when this figure was 19%. 2% of households reported pulling children from school because there were not enough resources (food, cash, else) to access essential needs (adequate shelter, education services, health services or other basic needs).

**Health** dimension is developed by looking at number of household members that fell ill and their ability to access medical care. 3% of households reported not being able to receive medical attention when needed in October, the highest reported amount. 22% of households reported someone had been sick in the past two weeks in November, with nearly every respondent saying they had been able to access healthcare, a pattern held since August.

**Shelter** dimension is based on number of bedrooms compared to number of members in the household as well as worries related to no work or disruptions to livelihoods for those renting. This dimension serves as a proxy to measure whether households are meeting their essential needs as they relate to shelter.

In July, nationwide figures showed that 7% of households lived in dwellings with more than 3 persons per room. In November, nationwide figures remained at 7%. In November, when asked about their current living situation, 43% of households raised concerns regarding food prices. In November, 20% of households reported lack of work was a main concern.

The **water, health, and sanitation** dimension for deprivation of basic and essential needs was measured by accounting for the households that do not have enough access to clean drinking water when needed. This measure is a key indicator of deprivation in rural areas and households with children under 5 years. When asked if there had been a time in the last two weeks (when this survey was conducted) when the households did not have enough clean drinking water when needed, in November, 5% of households responded "yes" to this question, compared to 19% recorded in July/August, 13% in September, and 11% in October.

In July/August, 10% of rural households and 9% of urban households reported not enough access to drinking water. In subsequent rounds, rural access to clean drinking water maintained the same level of access, declining in November to 4% down from 9% and 8% in September and October, respectively. Urban households experienced low percentages related to access after July/August figures, declining to 4% in September down to 1% in November.

**Debt** dimension is based on needing to borrow money for food and health expenditures in the past 30 days, for round 1 surveys (July), this recall period was from when COVID-19 restrictions were first enforced. Deprivation is based on reasons for borrowing, with households borrowing for food and health reasons classified as deprived. In July, borrowing for urban households was higher than for rural households (15% urban and 9% rural) and has decreased to 6% rural and 8% urban in November. In November, the main reason for borrowing was to purchase food followed by transport. This points to the relationship between debt and food dimension, supported by very high levels of concern related to increases in food prices, which 43% of households report as the main concern in November.

### For more information please contact:

Andre Martinez	VAM Officer	Pacific Multi-Country Office	<a href="mailto:andre.martinez@wfp.org">andre.martinez@wfp.org</a>
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