



# Sahel: Food and Nutrition Crisis

ECHO FACTSHEET

## Facts & Figures

- 24 million people **food insecure** including 6.5 million in need of emergency food assistance (CILSS)
- **4.9 million children** estimated to suffer from **acute malnutrition** including 1.5 million from its most severe form (UNICEF)

**1 in 8 inhabitants** of the Sahel region suffers from **food insecurity**.

**Children in the Sahel** are among the world's most at risk of dying from malnutrition.

The Sahel region hosts approximately **768 000 refugees** in addition to hundreds of thousands of internally displaced people (UNOCHA)

**EU aid response to the Sahel food & nutrition crisis in 2014 : €290 million**

- **Humanitarian aid (ECHO): €196 million**
- **Member States: €94 million**



Nutrition care for children in Abeche regional hospital, Chad. ©WFP/Rein Skullerud

## Key messages

- The **food and nutrition crisis in the Sahel** continues. People are facing a **triple crisis**: limited **access to food**, **erosion of resilience** due to recurrent crises and weak social services, and region-wide ramifications of **conflicts** in the region.
- As one of the largest providers of humanitarian assistance to the Sahel, the European Commission's humanitarian aid and civil protection department (ECHO) is helping to ensure appropriate assistance for **1.7 million extremely food insecure people** and **580 000 severely malnourished children** in 2014. This represents respectively a quarter and half of all people targeted to receive assistance.
- **The food and nutrition prospects are unlikely to improve significantly in 2015.** This past year has seen average harvests, high food prices as well as conflict and insecurity. There are particular concerns due to erratic rain fall in Senegal, Mauritania and Gambia and as a result of the expanding conflict in northern Nigeria.
- Emergency needs in the Sahel will persist unless the **root causes of food insecurity and malnutrition are addressed** and the resilience of the poorest people is strengthened. The European Commission has been instrumental in the creation of **AGIR**, a global alliance to strengthen resilience in West Africa which has set itself a 'zero hunger' goal by 2032.
- The **Ebola outbreak** in the coastal states of West Africa requires preparedness and contingency plans on the part of the Sahel countries and ECHO's humanitarian partners. People are very mobile in this part of the world, increasing the likelihood of the virus spreading further.

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## Humanitarian situation and needs

### Background

The Sahel region is still reeling from the aftershocks of four consecutive food and nutrition crises (2005, 2008, 2010 and 2012) with many vulnerable households struggling to recover. An estimated 24 million people are facing food insecurity across nine West African countries: Senegal, Gambia, Mauritania, Mali, Burkina Faso, Niger, Chad, northern Cameroon and northern Nigeria.

The food security situation has been exacerbated by a massive decline in migrants' remittances as a result of the global economic downturn and the spill over from conflicts in Mali, Nigeria, Darfur and the Central African Republic. Approximately 20% of the population (at least 25 million people) is considered to be ultra-poor and requires some form of social protection to shield it from future crises.

### Major needs and related problems

Nutrition care and supplementary feeding continue to be a massive need. An estimated 1.5 million children under five are at risk of severe acute malnutrition while 3.4 million are expected to suffer from moderate acute malnutrition in the course of 2014.

Although agriculture is the main livelihood for the majority of people in the Sahel, many poor households barely cover 20% of their food needs through farming. 2014 has seen a late arrival of rains in many parts of the region. Poor harvests are expected in Senegal, Mauritania and Gambia, whereas average harvests are expected elsewhere.

The situation in northern Nigeria is of particular concern. Trade and agriculture are heavily disrupted as a result of the Boko Haram insurgency and the government's military response. Health centres have closed and people are on the run, hampering efforts to detect and help the undernourished. In other parts of the Sahel, hundreds of thousands of refugees, displaced persons and returnees continue to rely on humanitarian assistance to cover their basic needs.

Regardless of harvests, the successive food crises and numerous conflicts have severely eroded the resilience of the poorest and most affected populations, including of communities that are hosting refugees. Dragged into a poverty spiral, many families have just one meal a day during the 'lean season' while the more desperate ones are forced to migrate, incur debt or accept exploitative labour.

To break the endless cycle of emergencies in the Sahel, the underlying causes of the chronic food insecurity and high malnutrition rates need to be addressed. These causes include extreme poverty and inequality, limited access to basic services, environmental degradation and populating growth, which at 3% per year is one of the world's highest. It outstrips economic growth and agricultural advances. At current rates the population of Niger, where 1 million children suffer from acute malnutrition each year, doubles every 20 years.

## The European Union's Humanitarian Response

### Funding

2012-13 saw an unprecedented scale-up of humanitarian aid in response to the severe food and nutrition crisis. In 2014, the European Commission continues to support life-saving aid, covering a quarter of food security needs and half of nutrition care needs. The Commission is also funding assistance for hundreds of thousands of Malian, Nigerian, Sudanese and Central African refugees, and for returnees in Chad and Niger.

### European Commission

With €196 million in humanitarian aid for 2014, the European Commission has made a significant contribution to addressing the emergency needs in the region. This includes €82 million for nutrition care and € 71.6 for [food assistance](#) in the form of cash transfers, vouchers and in-kind food rations.



In Mali, €23 million were mobilized to support basic health care and develop social safety nets in an effort to link recovery, rehabilitation and development (LRRD).

## Member States

Up to June 2014, EU Member States had contributed €94.77 million for the Sahel response.

## Outreach and coordination

The European Commission has been instrumental in the establishment of AGIR, the Global Alliance for Resilience Initiative in the Sahel and West Africa. Launched in December 2012, the initiative brings together West African governments, regional organisations, donors, and the development and humanitarian aid communities around a 'Zero Hunger' goal for the Sahel.

Governments and development partners are being encouraged to develop social safety nets so as to prevent the most vulnerable from repeatedly falling into crisis during the lean season. Cash transfers and targeted free health care programmes have been successfully piloted by ECHO throughout the region.

## Examples of ECHO funded projects

### Food assistance



In Bagaroua commune, **Niger**, the World Food Programme (WFP) is providing 540 vulnerable families with four installments of cash, the equivalent of 200€. Cash transfers enable families in the most food insecure regions of Niger to buy food or pay for other basic necessities. 60 pregnant women and 112 children under the age of two are also given food supplements. Niger's operation 'Hunger Gap 2014' is supported by the EU and aims to provide emergency food assistance to a total of 1.3 million Nigeriens during the 2014 lean season, from June to October. ©EC/ECHO/Jean De Lestrangle

In **Burkina Faso**, in the remote region of Tapoa, Action Contre la Faim (ACF) implements cash-for-work programmes. In exchange for money to buy food, 900 households have helped to build embankments around rice fields in order to retain rainwater and enhance future crops. In total, each worker received €90 over two months, the equivalent of about three 100kg bags of sorghum. Overall, the EU has enabled ACF to assist 40 000 people in the region. ©Raphael de Bengy



In northern **Mali**, five NGOs work as a consortium to lay the foundations of seasonal safety nets. 40 000 vulnerable households have been targeted in Gao and Timbuktu regions to receive transfers of cash or vouchers. Each household is given three instalments of 50€ each to satisfy their basic needs and to help restore their livelihoods. This region and its inhabitants were severely affected by 2012-2013 food crisis and conflict. ©Action Contre La Faim Espagne



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## Nutrition care & management

In the region of Gorgol, **Mauritania**, the French Red Cross and the Mauritanian Red Crescent have been treating severe malnutrition with the support of ECHO since July 2007. The partnership which now extends to the entire region, guarantees care for thousands of children and pregnant and breastfeeding women. Malnourished children are being cared for in 50 health posts, 3 health centres and 1 hospital. Red Crescent volunteers are actively involved in the detection of malnutrition within the communities. ©Croix-Rouge française/David ORME



Severe acute malnutrition is responsible for more than a third of all child deaths in **Nigeria**, which amount to 350 000 each year. In the northern state of Katsina, ECHO is supporting Save the Children for the community management of acute malnutrition. This allows the organization to provide quality services to prevent and treat child malnutrition. 750 health workers from over 40 government health facilities have been trained. 1 700 community volunteers are involved in the detection and referral of malnourished children. With its partners, ECHO has contributed to scaling up nutrition care for acutely malnourished children in Nigeria, from 40 000 in 2010 to over 236 000 in 2013. © Save the Children

Acute malnutrition among **Chadian** children has been vastly underreported in the past. ECHO supports the NGO ALIMA and its local partner Alerte Santé to treat thousands of severely malnourished children in the Lac region and in the capital N'Djamena. Prior to this programme, effective treatment of severe acute malnutrition was all but non-existent in the capital. The project also aims to reinforce local capacities so as to ensure better management of acute malnutrition in future. ©EU/ECHO/Anouk Delafortrie

