



FOOD CRISIS and MALNUTRITION IN THE SAHEL



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Facts and Figures (Feb.2012)

- Global Acute Malnutrition (GAM) rates range from 10.9% in Mali to 20.1 % in some parts of Chad. UNICEF estimates that over 1 million children in the region will be exposed to severe malnutrition in 5 months time
- In 2011, **320,000** children were treated in humanitarian aid nutrition programmes. **160.000** (50%) of these were treated in ECHO- funded programmes
- **In 2012, it is estimated that over 23 million** people will be affected by the food crisis, of which nearly **12 million** will be at risk of severe food insecurity, mainly due to poor harvest and rising food prices
- Commissioner Georgieva: "*The question is not whether there will be another food crisis in the Sahel in 2012, but to what extent*"
- The European Commission is providing €123,5 million in humanitarian aid to address the food crisis in 2012

THE HUMANITARIAN SITUATION

Erratic rains, poor harvests, returnees from the Libyan and Ivory Coast crises and rapidly rising food prices in 2012 are combining to massively aggravate the serious problem of persistent food insecurity in the Sahel. The countries of the Sahel (Senegal, Mauritania, Mali Burkina Faso, Niger, and Chad) already suffer from chronic food insecurity. An estimated 300.000 children die in the region from malnutrition or related causes during a 'non-crisis year'. But this year, following a very poor harvest the situation will be much worse for more than 23 million people of which nearly 12 million are at risk of severe food insecurity (see box). UNICEF estimates that more than a million children in the region will be exposed to severe malnutrition during the next 'lean season' in 2012. Anticipating that situation, five of the most affected Sahel states have declared a crisis and called for international assistance.

The underlying causes of this persistent food insecurity and high acute malnutrition rates are low levels of food production and poor access to basic services, both of which are related to acute poverty and aggravated by environmental degradation, rapid population growth (3% per year), and poor governance. The poorest households, approximately 50% of the rural population, live permanently on the edge of crisis.

In this context, children are most at risk of falling victim to malnutrition. The damage caused by severe malnutrition in the early years of childhood is permanent if not lethal. Malnutrition is estimated by the World Bank

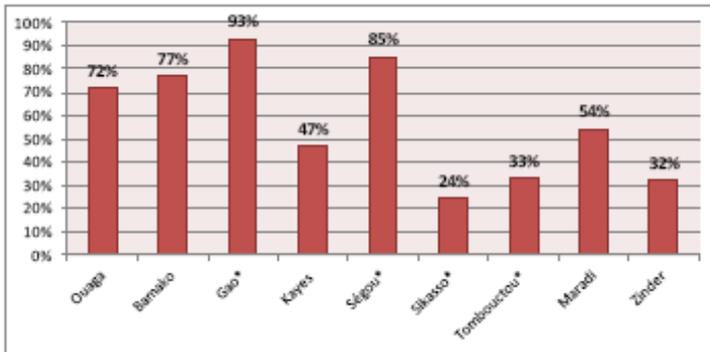
as a major cause of the slow economic and social growth in these countries and therefore partly responsible for their underdevelopment. None of the Sahel states will reach the Millennium Development Goals by 2014, especially not MDG1 (reduction in hunger), MDG 4 (reduction in infant mortality) or MDG 5 (reduction in maternal mortality).

Affected countries	Pop. living in affected areas	Population at risk	Source of information
Niger	6 006 711	5 458 871	SAP / WFP
Mauritania	3 542 000	700 000	CSA/WFP
Chad	5 000 000	2 500 000	EFSA/WFP
Mali	2 892 795	1 148 066	SAP
Burkina	5 486 614	1 671 178	SAP
Senegal	850 211	210 000	SAP/WFP
Total	23 778 331	11 688 115	

This year, the worst affected states are Chad, Niger and Mauritania with harvest deficits of 50%, 30% and 52% respectively. And all of the Sahel countries are facing rising prices for staple foods from 35% to 50% compared with the same time last year. These prices could triple in the coming months, putting food out of reach for the poorest (see below).

Figure 1: Percentage change in the price of millet in December 2011 compared with its average price over the last 5 years. Millet is the main commodity for rural communities and the urban poor in the Sahel.

Figure 1: Evolution du prix au détail du mil, décembre 2011 par rapport à la moyenne quinquennale.



Source: FAO/GIEWS data * = moyenne 2008-2010

Food, fodder and water shortages are also leading to increased migration for pastoralists. The World Food Programme (WFP) estimates that pastoralists will move 8 million livestock over the border from Mauritania into Mali and Senegal in search of grazing for their herds. This competition for increasingly scarce resources in turn increases the risk of local conflicts.

Remittances sent home by relatives working abroad was a major source of income for the most vulnerable households in many areas. The return of hundreds of thousands of unemployed men fleeing the conflicts in

THE EUROPEAN UNION'S RESPONSE

The European Commission has been at the forefront of the humanitarian response to malnutrition in the Sahel. Since 2007, by funding aid responses in cooperation with humanitarian agencies, EU Delegations and other donors in the region, ECHO has allocated over €250 million to the fight against malnutrition in the Sahel. 320,000 children were treated across the Sahel in 2011. Approximately half of these children were treated as a result of the European Commission's humanitarian funding. Nevertheless thousands more remain unidentified.

What has to be done to contain the impact of this food crisis?

Based on the continuous monitoring of people's needs through its five offices spread across the region, ECHO has allocated €123,5 million in humanitarian aid funding specifically to address the 2012 food crisis. ECHO has adopted a three-phased response approach that will adapt to the expected changes in the food security of the most affected households over the coming months. In addition to continuous resilience building, the main phases are crisis mitigation and preparedness (Nov '11 – Feb '12), emergency response (March – Sept '12) and recovery/resilience building (Sept '12 onwards).

This year in some places the lean season is expected to begin in February, three months earlier than usual. To reduce malnutrition rates at the peak of the food crisis, prevention and mitigation measures have been taken.

Libya and the Ivory Coast and the economic crisis in Europe has ended the flow of remittances for many and increased the number of vulnerable households.

What is of particular concern is how quickly this new food crisis has followed the last major crisis of 2010. The poorest households have had no time to recover. The quick succession of crises has severely diminished the resilience capacity of these populations who struggle to cover basic food needs in a 'normal' year. This year the depletion of their few productive assets and livestock is compounded for many by high levels of indebtedness. Coping strategies such as seeking day labour are no longer possible, as a bad harvest and the economic crisis also mean less local work opportunities.

A further challenge to the aid effort is the increasing insecurity in the region. Recent attacks by armed groups in Mali have forced 120,000 people to flee their homes and move to different towns or into bordering countries. These attacks are increasing the intensity of the food crisis in two ways: by reducing the ability of humanitarian agencies to get to people in need and by increasing food prices because supply lines have been cut. The activities of the militant group Boko Haram, risk causing similar disruption to food supply lines through Nigeria, while Al-Queda is a persistent concern for access in northern Niger.

- Scaling up of cash & voucher transfers, where vulnerable populations are given money or vouchers with which they can purchase food for themselves. This type of intervention can have the added-value of boosting local economies and food importations.
- Committing to a closer coordination between humanitarian, development agencies and national governments.

During the Emergency response phase, the specific nutritional needs of children and pregnant and nursing women will be given priority through:

- Mobilising funding in advance of the crisis to purchase food stocks before food prices rise.
- Reinforcing existing nutrition operations to scale up the treatment of acute malnutrition among children under 5 years of age and pregnant and breastfeeding women.
- Providing general food distributions at household level to the most vulnerable populations when and where food is not available on markets.

Action began in November last year when ECHO provided an initial €10 million in an emergency decision to support the preparation and mitigation of the first adverse effects of the crisis for 400 000 people. In Chad, a further €10 million is being mobilised to contribute to ECHO's activities. With ECHO funding, UNICEF and WFP are shipping therapeutic food products to be ready when malnutrition rates peak in a few months.

The WFP has also started purchasing cereals in the region for general food-distribution.

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