Sahel: Food and Nutrition Crisis

**Facts & Figures**

- 42 million people severely or moderately food insecure including 9.3 million in need of emergency food assistance
- 8.7 million children expected to suffer from acute malnutrition including 3.4 million from Severe Acute Malnutrition
- Severe Acute Malnutrition kills more than 550,000 children each year in the Sahel
- 4.9 million forcibly displaced: 1 million refugees, 3.9 million internally displaced and returnees

The EU supports AGIR, an alliance for resilience building in West Africa/Sahel. 17 countries participate in this initiative to reduce chronic undernutrition and achieve ‘Zero Hunger’ by 2032.

**Humanitarian funding for the Sahel food and nutrition crisis:**

- 2016: €299 million

Sources: CILSS/WFP/COHA/FAO/UNICEF

**Key messages**

- The European Union is one of the largest contributors of humanitarian aid to the Sahel. Its assistance to this region reached over €299 million in 2016 in support of 1.9 million Sahelian people affected by severe food and nutrition insecurity. This contribution has helped to meet a quarter of all emergency food assistance required as well as to life-saving treatment to 618,000 children affected by Severe Acute Malnutrition.
- The ongoing food and nutrition crisis in the Sahel is compounded by the erosion of the populations’ resilience due to the succession of crises, extreme vulnerability and poverty and lack of basic services.
- While the humanitarian situation remains precarious in the entire Sahel region, the latest surveys indicate a worrying deterioration of the conditions for populations living in areas affected by conflict and insecurity, in particular in Northeast Nigeria and the rest of the Lake Chad region. An estimated 42 million people are currently food insecure in the Sahel. This situation is expected to deteriorate further in the coming lean season - from June to August 2017 - with a total of 53 million people estimated to be food insecure.
- Emergency needs in the Sahel will persist unless the root causes of food insecurity and under-nutrition are properly addressed and the resilience of the poorest people is strengthened. The European Commission championed the creation of AGIR*, a global alliance to strengthen resilience in West Africa/the Sahel which has set itself a ‘Zero Hunger’ goal by 2032.
Humanitarian situation and needs

Background

Vulnerable people in the Sahel region are still struggling to recover from the aftershocks of four consecutive food and nutrition crises (2005, 2008, 2010 and 2012). The food security situation is exacerbated by the spill-over of conflicts in Mali, Northeast Nigeria, Libya and the Central African Republic.

Approximately 20% of the population - at least 25 million people - are considered extremely poor, requiring some form of social protection. Although the majority of people in the Sahel live from agriculture, many poor households barely cover 20% of their food needs through farming. The successive food crises and numerous conflicts have severely eroded the resilience of the poorest and most affected populations, including of those communities that are hosting refugees. Their struggle to meet their daily food requirements has become nearly permanent. Dragged into a spiral of poverty, many families have just one meal a day during the lean season. The more desperate ones are driven to migration, debt or exploitative labour.

To break the endless cycle of emergencies in the Sahel, the underlying causes of the chronic food insecurity and high acute malnutrition rates need to be addressed. These causes include extreme poverty and inequality, limited access to basic services, environmental degradation, climate change and population growth. They outweigh economic growth and agricultural progress. At current rates, the population of Niger, where close to 1.1 million children suffer from Global Acute Malnutrition each year, doubles every 20 years. This contributes to the ever growing caseload of severely undernourished children.

Most of these structural causes require determined joint efforts by national governments, development and humanitarian donors to actually tackle these issues and reduce the impact of what could be called a "resilience deficit crisis".

Major needs and related problems

The humanitarian situation in the Sahel remains very fragile. Nearly one quarter of the population is currently facing moderate or severe food insecurity in nine Sahelian countries: Senegal, Gambia, Mauritania, Mali, Burkina Faso, Niger, Chad, Cameroon and Nigeria.

According to the figures of the Harmonised Framework (Cadre Harmonisé in French) survey carried out at the beginning of 2017, 42 million people are food insecure in the Sahel, with 9.3 million of them facing severe food insecurity and requiring emergency assistance, a figure that could increase to 13.5 million from June to August, the so-called lean season between harvests, when food stocks are depleted and the situation of hundreds of thousands of families tends to quickly deteriorate.

The nutrition situation is very critical overall in the region. An estimated 8.7 million children under age five are expected to suffer from Global Acute Malnutrition in the course of 2016, of whom 3.4 million will be affected by Severe Acute Malnutrition. Thus, nutrition care and supplementary feeding remain a priority.

The Boko Haram insurgency in Northeast Nigeria has resulted in indiscriminate violence against civilians on a massive scale, forcing 2.3 million people out of their homes and disrupting trade and agriculture. Health centres have been closed and people are on the run, hampering efforts to detect and help the undernourished. Currently, Nigeria alone accounts for more than 75% of the population in crisis in the Sahel, with 4.7 million people in crisis in the states of Borno, Adamawa and Jobe, of which 1.4 million are facing an emergency situation. In areas which are still under Boko Haram control and therefore inaccessible, up to 800 000 people are estimated to be cut off from humanitarian assistance, with reported pockets of populations facing famine.

In other parts of the Sahel, refugees and returnees from Mali, the Central African Republic and Sudan continue to rely on humanitarian assistance to cover their basic needs.

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The European Union’s Humanitarian Response

Funding
The severe food and nutrition crisis in 2012-2013 prompted an unprecedented scale-up of humanitarian aid. With a significant contribution of **C299 million in EU humanitarian aid in 2016**, the European Commission continued to support life-saving aid, covering quarter of all food assistance needs and 43% of child malnutrition treatment needs. The Commission’s funding allowed its partners to provide a food or cash assistance to 1.9 million people affected by food insecurity and to treat 618 000 severely under-nourished children within national health systems.

Activities funded include food assistance* in the form of cash transfers, vouchers and in-kind food rations, usually provided during the lean season; also the provision of Ready-To-Use Food and essential drugs to severely under-nourished children, equipment of health centres with water and hygiene systems, training and supervision of staff and screening of children at risk. The Commission also pursued its assistance to hundreds of thousands of displaced people from Mali, Nigeria, Sudan and the Central African Republic. In the region, the EU has successfully piloted cash transfer and free health care programmes as social protection measures.

Since 2015, the European Commission and the United Kingdom have been implementing a joint programme - "Providing Humanitarian Assistance to Sahel Emergencies" (PHASE) - with an initial period of three years. This partnership aims at responding to three major humanitarian challenges in the Sahel: under nutrition and food insecurity, conflict-related needs such as displacement and protection, and the rise of epidemics and other natural hazards. By joining forces and pooling resources, the Commission and the UK seek to have a better impact on addressing life-threatening crises, but also in encouraging resilience building approaches and policies to take hold in the region.

In 2017, the European Commission’s humanitarian action in the Sahel will continue to contribute to the UN Sahel Humanitarian Response Plan (HRP). Adapting to the particular context of the Sahel, the response strategy aims to strike a balance between responding to immediate needs triggered by conflicts and disasters and addressing chronic vulnerability so as to reverse the pattern of growing humanitarian needs, building the resilience of the most vulnerable.

AGIR and the EU Trust Fund
The European Commission has championed the creation 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 organizations, donors and the aid community around a "Zero Hunger" goal by 2032.

Through AGIR, the West African/Sahel governments and their development partners are encouraged to reduce chronic malnutrition, improve agricultural production and livelihoods, develop and strengthen social safety nets so as to prevent the most vulnerable from repeatedly falling into crisis. So far, eight out of the 17 participating countries have approved their National Resilience Priorities at political level. However, efforts have to be stepped ups to translate these priorities into effective action.

With an overall budget of **C2.5 billion** for five years, the EU Emergency Trust Fund for Stability and Addressing Root Causes of Irregular Migration and Displaced Persons in Africa was created in 2016. The European Commission’s Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) contributed **C10 million** in 2016 to the resilience objective of this Trust Fund. This includes actions linking relief, rehabilitation and development (LRRD) entailing supporting local communities in terms of food security and basic services for local populations - in particular the most vulnerable, as well as the refugees and displaced people.
Examples of humanitarian projects

**Prevention and management of under-nutrition**

DG ECHO has supported ALIMA’s strategy of training mothers to detect malnutrition at home, prompting them to seek medical attention for their child early, thereby increasing their chances of survival. Mothers are trained on how to use a simple coloured bracelet, which measures the ‘Mid-Upper Arm Circumference’ of a child indicating the level of undernutrition. Since the start of this strategy, ALIMA has trained 230 000 mothers in **Niger**. The approach is now being rolled out in other countries, such as Mali, Chad, Nigeria, Burkina Faso and Central African Republic. ©EU/ECHO/Isabel Coello

The acute nutrition crisis in **Northeast Nigeria** is massive and alarming. Undernutrition rates are spiralling, far above the emergency threshold of 15%. DG ECHO is funding numerous relief organisations to address the nutrition situation. This is done both in terms of prevention, for example by ensuring access to safe water to prevent diseases that cause or aggravate malnutrition, as well as in terms of treatment, with clinics providing medical care for the severely undernourished children. ©EU/ECHO/Isabel Coello

**Food assistance**

In **Mauritania**, humanitarian funding enables **Oxfam** to improve the nutritional security in several regions during the lean season, by providing cash transfers to 2 700 very poor households in which there is a child under five years old, a pregnant woman or a woman who is breastfeeding. These are among the population groups where severe undernutrition can have more serious consequences. The project also includes the distribution of supplementary feeding, as well as sensitization about good practices related to feeding, water, sanitation and hygiene. On top of that, with the aim of improving their resilience to shocks, Oxfam is working with the communities so that they have the knowledge to anticipate shocks, better prepare for disasters, and take measures to reduce or mitigate the risks and support community structures in the planning of responses. ©EU/ECHO/DFID/ACF/Sylvain Cherkaoui

**Resilience building**

In North of **Mali**, European Commission is working to reinforce the resilience of the most vulnerable households and to reduce their chronic vulnerability to crisis. The **KEY programme** integrates the four pillars defined by the Global Alliance for Resilience Initiative (AGIR), which aims to achieve ‘Zero hunger’ by 2030. The programme includes activities in the areas of nutrition (with screenings, but also improving community knowledge of practices that may cause undernutrition), social protection (with cash transfers around the most critical period of the year, the lean season), support to livelihoods and governance. KEY ensures there is a transition between the recurrent humanitarian interventions and the longer term development actions that address the underlying causes of acute undernutrition and food insecurity. ©EU/ECHO

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