IPC

Integrated Food Security Phase Classification

Evidence and Standards for Better Food Security Decisions

An Integrated Analysis of Food Security and Nutrition to support Agriculture Planning

The Example of IPC in Southern Africa

CAADP Nutrition Workshop – Botswana, 2013
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Why do we need an Integrated Analysis of Food and Nutrition Security?

• Need to understand multiple causes of Malnutrition for program design

• Several sources of data need to be used

• Common language/Consensus

• *The Emergency food security community has lacked a* common language *for classifying food security situations.*

  – *IPC developed and the approach can be used for development programming*

This results in…
Lack of clarity & consensus

IPC Addresses these Challenges and Ensures…

- Comparability over space and time

Comparability over space…

IPC Phase 3 in one area of the country has the same meaning as Phase 3 in other areas

And also the same meaning across countries

…and comparability over time

Showing improvements and worsening of situations over time

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…and comparability over time

Rural IPC, Post *Gu* '05 — Rural IPC, Post *Deyr* '05/06 — Rural IPC, Post *Gu* '06 — Rural IPC, Post *Deyr* '06/07 — Rural IPC, Post *Gu* '07 — Rural IPC, Post *Deyr* '07/08

Rural IPC, Post *Deyr* '07/08 Updated April '08 — Rural IPC, Post *Gu* '08 — Rural IPC, Post *Deyr* '08/09 — Rural IPC, Post Gu '09 — Rural IPC, Post *Deyr* '09/10 — Rural IPC, Post *Gu* '10
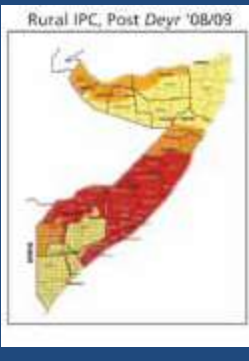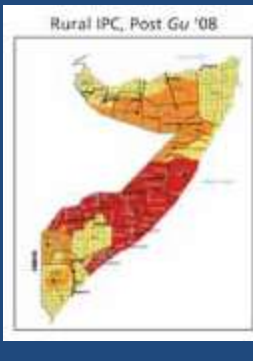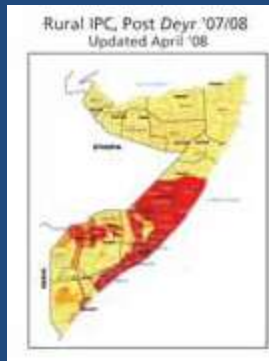
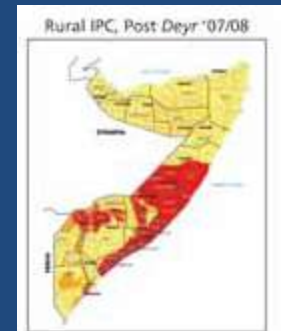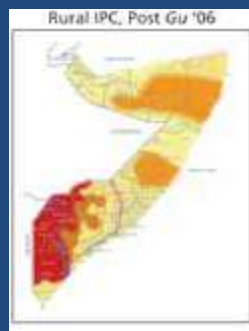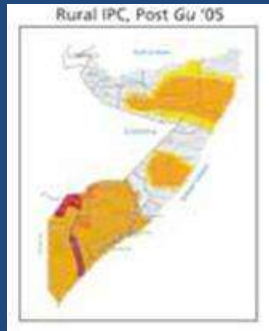Showing improvements and worsening of situations over time

IPC Addresses these Challenges and Ensures…

- Comparability over space and time

- Integrated food security analysis

Integrated Food Security Analysis

- Bringing together information from various sectors:
    - Market Data
    - Economic Data
    - Climatic Data
    - Agricultural Data
    - Nutrition Data
    - Etc…

- And from various sources
    - National Governments
    - NGOs
    - UN Agencies
    - Technical Agencies
    - Civil Society

IPC Addresses these Challenges and Ensures…

- Comparability over space and time

- Integrated food security analysis

- Technical consensus based on standards, transparency and evidence

IPC Addresses these Challenges and Ensures…

- Comparability over space and time

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- Simplifying complexity

Simplifying Complexity

Various scattered evidence

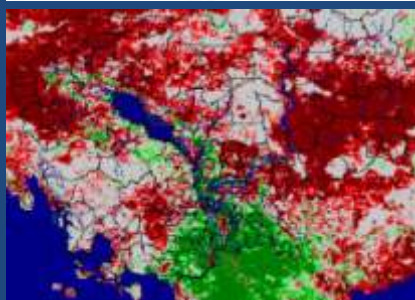

Transformed into concise and meaningful information

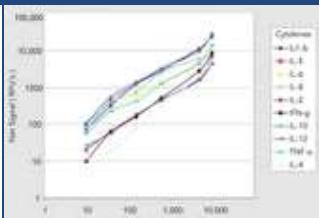# IPC Addresses these Challenges and Ensures…

- Comparability over space and time

- Integrated food security analysis

- Technical consensus based on standards, transparency and evidence

- Simplifying complexity

- Relevance for decision making

Relevance for decision making

- Provides core answers to six key questions:
  1. How severe is the situation?
  2. Where are the areas that are food insecure?
  3. How many people are food insecure?
  4. Who are the food insecure?
  5. When will people be food insecure?
  6. Why are people food insecure?

The IPC is a demand driven approach

As pushing noodles tangles the dish,
Pushing more information to decision makers
can create confusion and inefficiency

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What the IPC is <u>not</u>…

- A methodology for directly measuring food insecurity – it draws from multiple methods

- Limited to or biased towards any particular analytical methodology

- An information collection tool - though it may inform data collection and highlight information gaps

- An information system; it is a complementary add-on to existing systems

- Response analysis

How does the IPC Work?

Functions

| Building Consensus | Classifying Severity & Causes | | | Communica-ting for Action | Quality Assurance |

Tools

| TWG MATRIX | ANALYTICAL FRAMEWORK | REFERENCE TABLES | ANALYSIS WORKSHEETS | COMMUNI-CATION TEMPLATE | SELF ASS. PEER REVIEW |

Procedures for

| Multi-agency stakeholders to do collaborative analysis | Understanding evidence with an integrated Analytical Framework | Referencing evidence against international standards | Transparently, methodically & consensually analyzing evidence | Transforming analyses into concise information for action | Assuring for quality |

Elements considered

- The IPC uses worksheets that contain information on indicators that can be categorized into nine elements namely:
  - Mortality/Death rate
  - Nutritional Status
  - Food Consumption (Quantity and Nutritional Quality)
  - Livelihood Change (Assets and Strategies)
  - Availability, Access, Utilization & Stability
  - Hazards and Vulnerability

IPC Analytical Framework for Area and Household Classification

Food Security Contributing Factors

Causal Factors

Vulnerability: *(Exposure, Susceptibility, and Resilience to specific hazards events or ongoing conditions).*

- Livelihood Strategies *(food & income sources, coping, & expenditures)*
- Livelihood Assets *(human, financial, social, physical, & natural)*
- Policies, Institutions, and Processes

&

Acute Events or Ongoing Conditions

(natural, socio-economic, conflict, disease and others)

Impact

Food Security Dimensions

Availability	Access	Utilization
Production	Physical Access	Food Preferences
Wild Foods	Financial Access	Food Preparation
Food Reserves	Social Access	Feeding Practices
Markets		Food Storage
Transportation		Food Safety
		Water Access

Stability *(at all times)*

Non Food Security Specific Contributing Factors:
- Disease
- Water/Sanitation
- Health Social Services
- others….

Feedback

2⁰ Outcomes

Nutritional Status

Mortality

1⁰ Outcomes

Food Consumption

Quantity & Nutritional Quality

Livelihood Change

Assets & Strategies

Food Security Outcomes

(directly measured or inferred from contributing factors)

Classification of Acute Phase
(current or projected) and Chronic Level

Elements considered

Element	Potential Indirect Evidence for IPC Analysis	Potential Sources
Food Consumption (Quantity and Nutritional Quality)	Availability of fortified staple food items (e.g. maize and wheat flour)	(Grain traders, distributors)
	Shifts in expenditure patterns toward cheaper and less nutritious foods	(Food security monitoring)
	Number of meals/day	CFSVA (Comprehensive Food Security and Vulnerability Analysis), food security surveys
	Number of food groups consumed	HDDS (Household Dietary Diversity Score), CFSVA, food security surveys
Livelihood Change (Assets and Strategies)	Ownership of productive assets, e.g. bicycle and farming tools and recent changes in ownership	Household Budget Surveys, population census, household food security surveys
	Ownership of livestock and recent changes in ownership	Food security surveys
	Migration, e.g. from rural to urban areas or in search of casual labour	Food security surveys, authorities
	Expansion of informal settlements	Authorities, UN-Habitat
	Proportion of urban population living in slums	UN-Habitat, authorities
	Internally displaced persons/refugee concentrations	Authorities, Office of the United Nations High Commissioner for Refugees (UNHCR), United Nations Office for the Coordination of Humanitarian Affairs (OCHA), International Organization for Migration (IOM)
	Prevalence of extreme behavioural patterns, e.g. begging	Food security surveys

Elements considered

Nutritional Status	Underweight	Multiple Indicator Cluster Survey (MICS), Demographic and Health Survey (DHS), Nutrition studies (e.g. –Centre for Research on the Epidemiology of Disasters, Complex Emergency Database (CRED CEDAT database)
	Admissions to feeding programmes	Health Information System Data Sentinel site data
	Prevalence of night blindness (children under 5/pregnant mothers)	DHS (pregnant mothers)
	Prevalence of low birth weight	MICS
	Household iodized salt consumption	MICS
	Iron and folic acid supplementation programmes to pregnant women	MICS and DHS
	Vitamin A supplementation programmes to children under 5 and/or breastfeeding mothers	MICS

Elements considered

Element	Potential Indirect Evidence for IPC Analysis	Potential Sources
Mortality/Death Rate	Infant Mortality Rate (IMR)	MICS, DHS
	Neonatal mortality	DHS, birth records
	Under 5 Mortality Rate (U5MR)	MICS, DHS
	Mid-Upper Arm Circumference (<115 mm) (MUAC)	DHS, CFSVA, Nutrition surveys
	Severe Acute Malnutrition	MICS, DHS, CFSVA, Nutrition data
	Global Acute Malnutrition (GAM)	MICS, DHS, CFSVA, Nutrition data
	Maternal mortality rate	DHS (women)
	Adult Body Mass Index (BMI)	DHS (women)
	Case fatality rates (e.g. epidemics)	Health surveillance bulletins Religious leader consultations Grave counting

Elements considered

Availability	Food balance sheet	FAO
	Production figures	FAO, CFSAM (Crop and Food Supply Assessment Mission), national agricultural surveys
	Average cereal yield (kg per ha)	National agricultural surveys
	Land ownership/access to land	CFSVA, food security surveys
	Food sources of households	CFSVA, food security surveys
	Remote sensing data (rainfall, vegetation)	FEWS NET, Africa Data Dissemination Service, EC-JRC (Joint Research Centre of the European Commission)
Access	Prices (staple food items, price trends)	Government data, NGOs, United Nations agencies
	Distance to markets/market density (no. of markets per unit area)	FAO
	Purchasing power / terms of trade (livestock to cereals, labour to cereals)	CFSVA, food security surveys
	Percentage of population in lowest wealth quintile/ wealth index	DHS, CFSVA
	Proportion of population unable to access a basic consumption basket during the analysis period (poverty or food poverty line)	Household Budget Surveys, DHS, population census
	Percentage of income spent on food (for the poorest quintile)	CFSVA

Elements considered

Utilization	Typical meal composition/dietary preferences	(Food security surveys)
	Food preparation practices	(Food security surveys)
	Food storage practices	(Food security surveys)
	Child care practices (breastfeeding, weaning age, feeding, hygiene)	MICS, DHS
	Types of water sources	CFSVAs, MICS
	Average distance to water sources	(CFSVA, food security monitoring, government)
	Seasonality of water access	(CFSVA, food security monitoring, government)
	Price of water	(CFSVA, food security monitoring, government)
	Access to improved sanitation facilities	MICS, food security surveys, government
	Access to and type of cooking fuel used by households	Food security surveys
Stability	Cropping calendar	(Food security surveys)
	Seasonal migration patterns	(Food security surveys)
	Household food stocks	CFSVA, food security surveys
	Trends of food production	CSFAM, food security monitoring, government

Elements considered

Hazards and Vulnerability	Disease epidemics (human and animal)	WHO (World Health Organization), FAO, OCHA
	Morbidity patterns	Ministry of Health annual reports
	Measles vaccination coverage	DHS, MICS
	Household expenditure, out-of-pocket – expenditure on health	WHO Global Health Observatory Data Repository
	HIV/AIDS prevalence	DHS, national statistics, UNAIDS
	Coverage of antiretroviral therapy (ART)	UNAIDS (Joint United Nations Programme on HIV/AIDS country estimation reports), Ministry of Health
	Fertility rate	DHS
	Assisted deliveries by skilled birth attendants	DHS
	Natural hazards: drought, floods, earthquakes, etc.	Authorities, United Nations, NGOs
	Man-made hazards: conflict, deforestation, erosion, etc.	Authorities, United Nations, NGOs
	Number of displaced	OCHA, UNHCR
	Percentage of population under the national poverty line	Household budget surveys, census reports

IPC Chronic FI Prototype Tool

- Piloted in three countries in 2012 (Lesotho, Malawi, and Zimbabwe)

- Uses trend analysis as it analyses long term behaviour of indicators

- More relevant for long-term planning including CAADP

- Requires thorough understanding of Acute Analysis (not mutually exclusive)

Importance of Classifying Chronic Food Insecurity

- Ending hunger requires holistic actions with:
  - short term strategic objectives, which are informed by the IPC acute classification
  - medium and longer term strategic objectives, which are informed by the IPC chronic classification

- Essential to tackle structural and underlying causes of food insecurity

Relationship Between Acute and Chronic Food Insecurity

- Acute and Chronic food insecurity are not mutually exclusive
- Understanding the specific configuration of acute and chronic food insecurity is necessary to design strategic interventions to end hunger.

High

Low

Chronic   **Acute**

High

Low

Chronic   **Acute**

High

Low

Chronic   **Acute**

High

Low
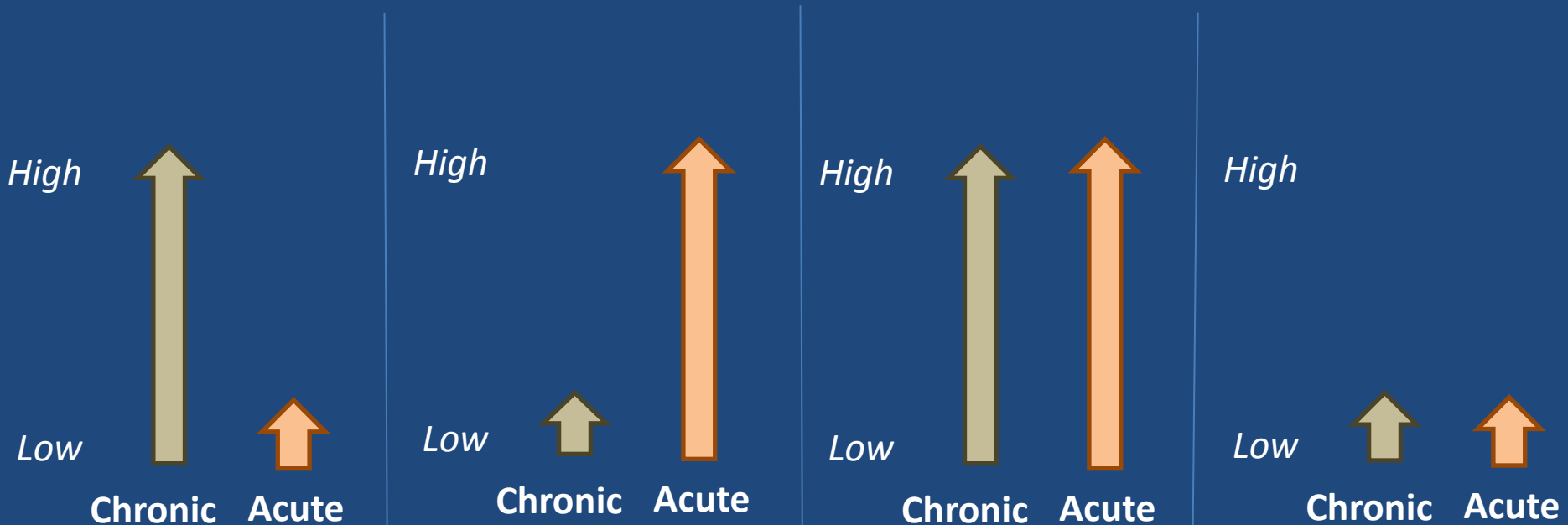
Chronic   **Acute**

Prototype Definition and Typology of Chronic Food Insecurity

- Chronic Food Insecurity is defined as **persistent** inability to meet food needs even in the absence of hazards/shocks, AND/OR high frequency years with acute food insecurity.

- IPC Typology of Chronic Food Insecurity:
  - *Type 1: Seasonal/cyclical food consumptions deficits*
  - *Type 2: Ongoing food consumption deficits in quantity and/or quality*
  - *Type 3: Periodic Acute Food Insecurity for the area equivalent to Phase 4 or 5 on the Acute Ref. Table*

Zambia

Type 1: 45,220 (7%)
Type 2: 110,617 (16%)
Type1&2: 155,837 (23%)

Confidence: 3

Type 1: 198,900 (7.9%)
Type 2: 93,421 (7%)
Type1&2: 292,321 (14.9%)

Confidence: 2

Mozambique

Type 1: 76,375 (7%)
Type 2: 130,928 (10%)
Type1&2: 207,303 (17%)

Confidence: 2

Mashonaland Central

Mashonaland West

Type 1: 68,442 (6%)
Type 2: 45,628 (4%)
Type1&2: 114,070 (10%)

Confidence: 2

Harare
Mashonaland East

Matebeleland North

Midlands

Type 1: 206,297 (12%)
Type 2: 257,871 (15%)
Type1&2: 464,168 (27%)

Confidence: 2

Manicaland

Type 1: 320,230 (20%)
Type 2: 80,057 (5%)
Type1&2: 400,287 (25%)

Confidence: 2

Bulawayo

Botswana

Matebeleland South

Masvingo

Type 1: 70,788 (10%)
Type 2: 141,575 (20%)
Type1&2: 212,363 (30%)

Confidence: 1

Type 1: 132,919 (10%)
Type 2: 199,378 (15%)
Type1&2: 332,297 (25%)

Confidence: 2

South Africa

Chronic Levels

1 Low
2 Moderate
3 High
4 Very High

International boundary

Provinces

Water bodies

W E N S

0   125   250
Kilometers

Causal Analysis in IPC & Nutrition Programming

- Causal analysis in IPC focuses on:
  - How much food security dimensions can be limiting factors (extreme, major, minor) that lead to food insecurity
  - Classification of food insecurity status

- Causal Analysis in Programming:
  - Tries to understand how the various determining factors interact and how they lead to poor nutritional status (the pathway)
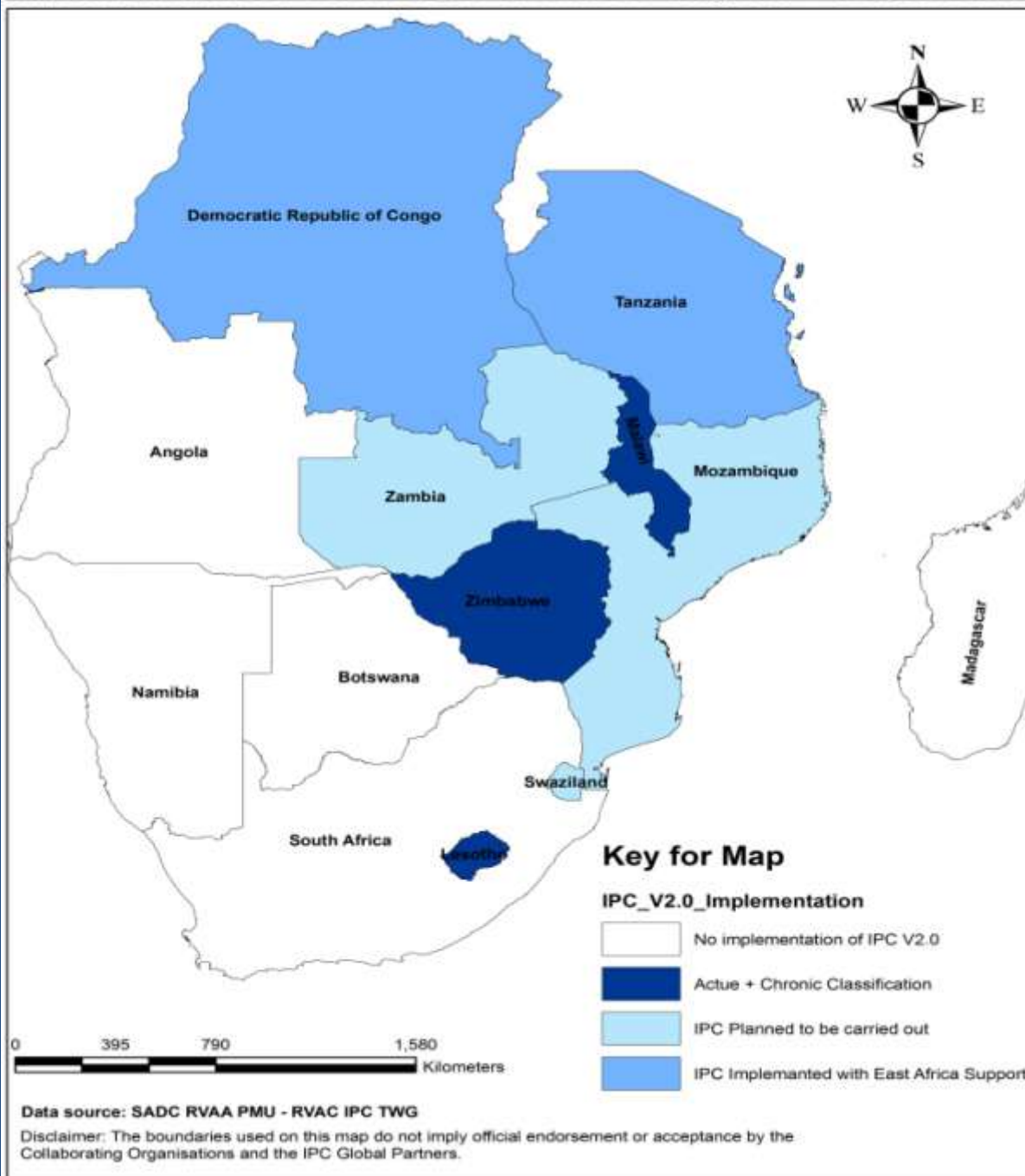 - Deals with identifying the key interventions to improve nutritional status

IPC 2013 Activities Schedule

	Item	Time Frame	Confirmed Funding	Comments
1.	**Awareness Raising (2days in each country)**			
	a. Swaziland	**14th October (Final)**	☑	
	b. Zambia		☑	**Awaiting ZVAC Response**
	c. Mozambique	**7th June**	☑	Completed
2.	**Acute IPC Training and Analysis (Consolidation – Training=4days, and classification = 4days)**			
	a. Lesotho	**17th – 25th June**	☑	Completed
	b. Zimbabwe	**16th – 23rd July**	☑	Completed
	c. Malawi	**19th – 26th August**	☑	Completed
3.	**Acute IPC Analysis (New Entrants – Training = 4days, and classification = 4days)**			
	a. Swaziland	**15th – 22nd October (Final)**	☑	
	b. Mozambique	*Not yet set*	☑	**Further communication to be engaged with SETSAN**
4.	**Chronic IPC analysis (Training = 1day, and Classification = 3days, Lessons learnt = 1day)**			
	a. Malawi	**28th October – 1st November**	☑	
5.	**Regional IPC Level 2 Training**	**11th – 15th November**	☑	**Preparation to start as soon as training Materials are finalised**

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Data source: SADC RVAA PMU - RVAC IPC TWG

Disclaimer: The boundaries used on this map do not imply official endorsement or acceptance by the
Collaborating Organisations and the IPC Global Partners.

End of Presentation!!!

More information can be found on:

www.ipcinfo.org

Thank you very much for Listening!
Ke ya leboga!