Integrated Food Security Phase Classification Evidence and Standards for Better Food Security and Nutrition Decisions

YEMEN

IPC ACUTE FOOD INSECURITY ANALYSIS DECEMBER 2018 - JANUARY 2019

o7 December, 2018

YEMEN'S FOOD SECURITY SITUATION REMAINS DIRE DESPITE SUBSTANTIAL HUMANITARIAN ASSISTANCE

December 2018 - January 2019 (with HFA)

15.9 M 53% of the population

People facing severe acute food insecurity (IPC Phase 3+) **DESPITE ONGOING HUMANITARIAN ASSISTANCE**

Phase 5	63 500 People in Catastrophe
Phase 4	4 957 000 People in Emergency
Phase 3	10 879 500 People in Crisis
Phase 2	8 875 000 People in Stress
Phase 1	5 109 500 People minimally food insecure

December 2018 - January 2019 (without HFA)

20.1 M

67% of the population

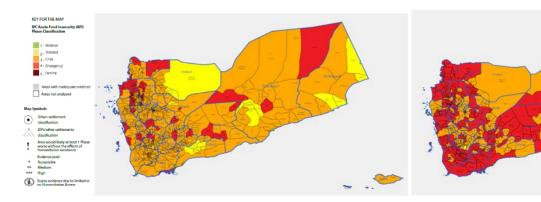
People facing severe acute food insecurity (IPC Phase 3+) WITHOUT HUMANITARIAN FOOD ASSISTANCE

Junioury 2029 (minious minious)									
Phase 5	238 000 People in Catastrophe								
Phase 4	9 647 000 People in Emergency								
Phase 3	10 239 000 People in Crisis								
Phase 2	6 323 000 People in Stress								
Phase 1	3 437 000 People minimally food insecure								

Note: In this graphic, population estimates are rounded. For the detailed population estimates tables, see pages 2-3.

- How Severe, How Many and When: According to the latest IPC analysis, from December 2018 to January 2019, while accounting for the current levels of Humanitarian Food Assistance (HFA), 17% of the population analyzed (about 5 million people) are in IPC Phase 4 (Emergency) and 36% (about 10.8 million people) in IPC Phase 3 (Crisis). Of greatest concern are the 65,000 people in IPC Phase 5 (Catastrophe). Overall, this constitutes 15.9 million or 53% of the total population. It is estimated that in the absence of HFA, about 20 million people or 67% of the total population (including Internally Displaced People - IDPs) would be in need of urgent action to save lives and livelihoods. This includes 240,000 people in IPC Phase 5 (Catastrophe), i.e. threefold the actual number.
- Where and Who: Food insecurity is more severe in the areas with active fighting, and is particularly affecting IDPs and host families, marginalized groups, as well as landless wage labourers facing difficulties in accessing basic services and conducting livelihood activities. Overall, there are more than 3 million IDPs in Yemen who face comparatively worse food security outcomes. In terms of severity (areas in IPC Phase 3+), the worst affected areas are located in Al Hudaydah, Amran, Hajjah, Taiz and Saada Governorates. In terms of magnitude (population in IPC Phase 3+), each of the governorates of Al Hudaydah, Amanat Al Asimah, Dhamar, Hajjah, Ibb and Taiz have more than one million people in IPC Phase 3 (Crisis) and above, while 13 governorates without HFA would have populations experiencing catastrophic food gaps. They include; Abyan, Aden, Al Bayda, Al Dhaleé, Al Hudaydah, Al Mahwit, Amran, Hadramout, Hajjah, Ibb, Lahi, Saada and Taiz.
- Why: Armed conflict remains the main driver of food insecurity in Yemen, curtailing food access for both the displaced and the host communities. The food security crisis is further exacerbated by extremely high food prices, the liquidity crisis, disrupted livelihoods, and high levels of unemployment. The large food gaps are only marginally mitigated by HFA which is not adequate to reverse the continuous deterioration of the situation.

IPC ACUTE FOOD INSECURITY SITUATION CURRENT MAP WITH AND WITHOUT HFA



IPC Global Support Unit www.ipcinfo.org

 $NOTE: The \ decision \ to \ publish \ this \ Yemen \ IPC \ report, \ reflecting \ the \ Acute \ Food \ Insecurity \ situation \ with \ and \ without \ humanitarian \ food$ assistance from December 2018 to January 2019, has been made by the Global IPC Steering Committee. This version of the report is being presented as preliminary findings and is not necessarily endorsed by the Technical Working Group in Yemen.

Classification of food insecurity and malnutrition conducted using the IPC V₃ protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-JRC, FAO, FEWSNET, Global Food Security Cluster, IGAD, Oxfam, SICA, Save the Children, UNICEF and WFP





























Shabwah

Socotra

Taizz

TOTAL

665,881

68,247

3,065,034

29,884,585

99,500

433,000

5,109,500

7,500

15%

11%

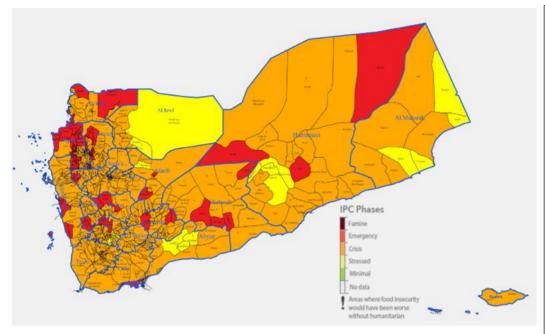
14%

17%

IPC ACUTE FOOD INSECURITY ANALYSIS DECEMBER 2018 - JANUARY 2019

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IPC ACUTE FOOD INSECURITY SITUATION FOR DEC 2018 - JAN 2019 with HFA



- WHAT'S ON THE MAP?
 With current levels of Humanitarian Food ssistance, 17% of the population analyzed about 5 million people) is in IPC Phase 4 imergency) and 36% (about 10.8 million eople) in IPC Phase 3 (Crisis).
 Additionally, during the same period, about 5,000 people are in IPC Phase 5
- 65,000 people are in IPC Phase 5
 (Catastrophe).

 49 districts are classified in IPC Phase 4
 (Emergency), 141 districts are classified in IPC
 Phase 3! (Crisis instead of IPC Phase 4 due to
 effects of HFA), 123 districts in IPC Phase 3
 (Crisis), 10 districts in IPC Phase 2! (Stressed
 instead of IPC Phase 3 due to effects of HFA)
 and 10 districts are classified IPC Phase 2
 (Stressed)

- The estimated populations per governorate ccording to different phases.
 25 districts in 8 governorates have some opulations experiencing catastrophic food

Population Phase 1 Phase 2 Phase 3 Phase 4 Phase 5 Phase 3 and Governorate (2019)Minimal Stressed Crisis **Emergency** Catastrophe higher 232,000 79,500 Abyan 615,154 125,000 20% 38% 179,000 29% O 0% 258,500 42% 13% Aden 18% o 0% 997,308 181,500 357,000 36% 284,500 174,000 458,500 46% 17% Al Bayda 12% 56% 775,404 91,500 247,500 32% 315,500 41% 119,500 15% 1,500 0% 436,500 Al Dhale'e 779,656 122,000 16% 232,500 30% 295,000 38% 129,000 17% 1,500 425,500 55% Al Hudaydah 18% 767,500 26% 1,126,500 38% 2,985,122 526,500 558,500 0% 19% 6,000 1,691,000 57% Al Jawf 603,816 111,500 18% 217,000 36% 188,000 87,000 0% 46% 31% 14% o 275,000 Al Maharah 31% 0% 169,327 53,000 66,500 39% 31,500 19 18.000 O 49,500 29% 16% Al Mahwit 127,000 200,000 26% 287,000 37⁹ 20% 7,000 1% 58% 774,511 153,500 447,500 Amanat Al Asimah 606,500 18% 30% 40% 0% 52% 3,406,643 1,017,000 1,375,000 408.000 12% O 1,783,000 Amran 1,205,960 184,000 15% 306,500 25% 451,000 11,000 1% 715,500 59% 253,500 Dhamar 411,500 19% 0% 56% 2,176,229 548,000 25% 785,000 1,216,500 20% o 431,500 Hadramaut 1,510,895 372,000 25% 579,500 38% 414,500 279 145,500 10% o 0% 560,000 37% Hajjah 271,500 11% 541,500 41% 579,000 66% 2,405,057 23% 994,000 24% 19,000 1% 1,592,000 Ibb 3,080,130 573,500 19% 1,064,500 35% 1,020,500 o ი% 1,442,000 47% Lahi 1,058,219 172,500 16% 300,000 28% 426,000 40% 160,000 15% o 0% 586,000 55% Marib 463,631 124,000 27% 136,000 29% 126,000 279 77,500 o 0% 203,500 44% 17% Raymah 646,854 147,500 23% 198,500 31% 34% 83,500 o 0% 47% 217,500 13% 301,000 Sa'ada 24% 961,547 110,000 11% 231,000 427,500 44% 186,500 19% 7,000 1% 621,000 65% 18% 0% Sana'a 1,469,960 258,500 520,500 35% 474,000 217,000 o 691,000 47%

30%

32%

29%

30%

244,500

1,186,000

10,879,500

31,000

379

45%

39%

36%

124,500

542,500

4,957,000

7,500

19%

11%

18%

17%

o

o

10,500

63,500

0%

0%

0%

0%

369,000

1,739,000

15,900,000

38,500

55%

56%

57%

53%

197,500

22,000

892,500

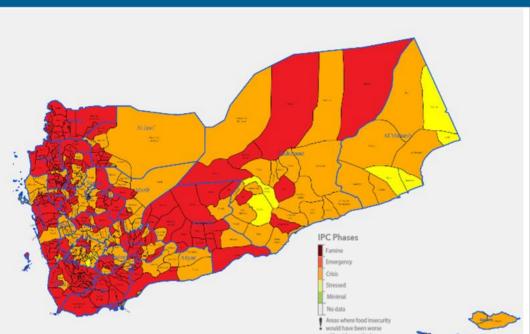
8,875,000

Current with Humanitarian Food Assistance (HFA)



YEMEN CLASSIFICATION MAPS and SUMMARY POPULATION TABLES

IPC ACUTE FOOD INSECURITY SITUATION FOR DEC 2018 - JAN 2019 WITHOUT HFA



WHAT'S ON THE MAP?

- what's on the MAP?

 In the absence of humanitarian food assistance, from December 2018 to January 2019, 32% (about 9.6 million people) would be in IPC Phase 4 (Emergency) and 34% (about 10.2 million people) in IPC Phase 3 (Crisis).

 •1% about 238 000 people would be in IPC Phase 5 (Catastrophe).

 •190 districts are classified in IPC Phase 4 (Emergency), 133 districts classified in IPC Phase 3 (Crisis) and 10 districts classified under IPC Phase 2 (Stress).

- WHAT'S IN THE TABLE?
 The estimated populations per governorate according to different IPC phases.
- 45 districts in 13 governorates (Abyan, Aden, Al Bayda, Al Dhaleé, Al Hudaydah, Al Mahwit, Amran, Hadramout, Hajjah, Ibb, Lahj, Saada and Taiz) have some populations experiencing catastrophic food gaps.

CURRENT without Humanitarian Food Assistance (HFA)													
Governorate	Population (2019)	Phase Minima		Phase 2 Stressed		Phase 3 Crisis		Phase 4 Emergency		Phase 5 Catastrophe		Phase 3 and higher	
Abyan	615,154	73,000	12%	141,000	23%	191,000	31%	197,500	32%	12,500	2%	401,000	65%
Aden	997,308	159,000	16%	250,000	25%	307,500	31%	277,000	28%	3,500	о%	588,000	59%
Al Bayda	775,404	80,000	10%	163,000	21%	251,000	32%	276,500	36%	5,000	1%	532,500	69%
Al Dhale'e	779,656	60,000	8%	124,500	16%	234,500	30%	344,000	44%	16,000	2%	594,500	76%
Al Hudaydah	2,985,122	364,500	12%	573,000	19%	1,003,000	34%	1,022,000	34%	23,000	1%	2,048,000	69%
Al Jawf	603,816	70,000	12%	135,000	22%	201,000	33%	198,000	33%	0	0%	399,000	66%
Al Maharah	169,327	41,500	25%	51,000	30%	44,500	26%	32,000	19%	0	о%	76,500	45%
Al Mahwit	774,511	72,000	9%	151,000	19%	286,500	37%	254,500	33%	10,500	1%	551,500	71%
Amanat Al Asimah	3,406,643	448,500	13%	858,500	25%	1,426,000	42%	673,500	20%	0	0%	2,099,500	62%
Amran	1,205,960	100,000	8%	224,500	19%	401,500	33%	455,000	38%	25,000	2%	881,500	73%
Dhamar	2,176,229	246,000	11%	419,500	19%	825,000	38%	685,500	31%	0	0%	1,510,500	69%
Hadramaut	1,510,895	284,500	19%	455,500	30%	494,500	33%	276,000	18%	500	0%	771,000	51%
Hajjah	2,405,057	163,000	7%	367,000	15%	810,500	34%	1,015,000	42%	49,000	2%	1,874,500	78%
Ibb	3,080,130	376,500	12%	789,500	26%	1,121,500	36%	782,000	25%	11,000	о%	1,914,500	62%
Lahj	1,058,219	110,000	10%	188,500	18%	344,000	33%	414,000	39%	2,000	о%	760,000	72%
Marib	463,631	70,500	15%	116,500	25%	165,000	36%	112,000	24%	0	0%	277,000	60%
Raymah	646,854	101,500	16%	169,500	26%	223,000	34%	153,000	24%	0	0%	376,000	58%
Sa'ada	961,547	81,500	8%	156,500	16%	258,500	27%	430,000	45%	35,000	4%	723,500	75%
Sana'a	1,469,960	191,000	13%	298,000	20%	501,000	34%	479,500	33%	0	о%	980,500	67%
Shabwah	665,881	63,500	10%	118,500	18%	218,500	33%	265,000	40%	0	о%	483,500	73%
Socotra	68,247	13,000	19%	18,000	26%	26,500	39%	11,000	16%	0	0%	37,500	55%
Taizz	3,065,034	267,500	9%	554,500	18%	904,500	30%	1,294,000	42%	45,000	1%	2,243,500	73%
TOTAL	29,884,585	3,437,000	12%	6,323,000	21%	10,239,000	34%	9,647,000	32%	238,000	1%	20,124,000	67%



YEMEN

RECOMMENDATIONS

IPC ACUTE FOOD INSECURITY ANALYSIS DECEMBER 2018 - JANUARY 2019

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RESPONSE PRIORITIES

- SAVE LIVES AND LIVELIHOODS: For the first time, food security assessments have confirmed the worst levels of hunger 4 in Yemen. Tens of thousands of people are currently facing emergency and catastrophic food consumption gaps. IPC data confirm that nearly 65,000 people in Yemen are already in IPC Pase 5 (catastrophe) despite concerted efforts to prevent this. Without large-scale humanitarian assistance, IPC analysts' estimate that nearly 240,000 people would be in IPC Phase 5 (catastrophe). Immediate responses are required to save lives and livelihoods of millions not to slide to the next worse case which is Famine. Humanitarian Food Assistance has been critical to preventing further deterioration in 151 districts out of 333 representing 46% of the districts and 38% of the total population; however, the assistance provided is not sufficient to cover the huge gaps largely due to limited funding and access issues in the areas most affected by the conflict. Urgent scale up of humanitarian food and livelihood assistance is required to save lives and protect and restore livelihoods for the population in IPC Phase 3+ (Crisis and above) and Humanitarian access should continuously be granted to all districts under active fighting. Special attention should be given to Internally Displaced Persons to enhance economic and physical access to food.
- CESSATION OF CONFLICT, PROTECTION OF HUMANITARIAN AND COMMERCIAL IMPORTS AND PROVISION OF A SOLUTION TO THE ECONOMIC CRISIS: The Humanitarian Food Assistance alone will not prevent further deterioration if not accompanied by actions addressing the key drivers of food insecurity. It is imperative that there is a halt to the violence, the full engagement into the peace talks, the re-establishment of humanitarian and commercial imports flows into all ports and onwards to their final destinations, facilitating delivery of assistance, addressing the macroeconomic crisis such as the currency depreciation and the liquidity crisis in the Yemeni economy, as well as regular of payments of pensioners and civil servants. Due to the severity of the food insecurity and nutrition situation, special attention should be given to those districts where the active fighting is taking place in particular to districts of Hodaidah, Hajjah, Saadah, Taiz, Al Dhale, Al Baidhaa and Aljawf. Special focus should be given to those districts with households in IPC Phase 5 (Catastrophe) food insecurity status.
- SCALE UP ACUTE MALNUTRITION TREATMENT AND PREVENTION: Services aimed at identification, prevention and treatment of malnourished children under age of five years, Pregnant and lactating mothers should be prioritized and scaled up. This will be primarily through outreach and community-based nutrition treatment and management of acute malnutrition and service delivery, preventive supplementary blanket feeding programs, expand health surveillance systems, increase screening and referral of children with Severe Acute Malnutrition (SAM) or Moderate Acute Malnutrition (MAM) and PLW with acute malnutrition.
- PROMOTE RECOVERY BY LIVELIHOOD ENHANCEMENT AND PROVISION OF SAFETY NETS: The drivers of food insecurity and malnutrition are multi-faceted - the Humanitarian response has to be integrated with livelihoods restoration to revitalize livelihoods and support basic services. The four-year protracted conflict has continued damaging the lives and livelihoods of the population. The humanitarian community, donors and partners should continue advocating for and implement the twin-track approach of providing humanitarian assistance, and side by side implementing activities that enhance resilience of livelihoods. Humanitarian interventions should be geared towards strengthening and provision of social protection and economic support by setting up safety nets, access to finance for income-generating activities, training, which will have an effect on reducing infant mortality and promoting nutrition. Improve employment Increase Household Purchasing Power through expanding emergency cash assistance and cash modalities. The increased transfer value of the survival minimum expenditure food basket in Yemen will be used alongside scale up cash based programming to enable local demand and increase affordability of essential goods in markets. Advocacy for lifting the restrictions that limits importation of essential commodities and access to humanitarian services. Structural support to protect the Yemeni economy from further crisis and collapse which has significant impact aggravating the dire food security and nutrition situation in the country.

support with a mere 1.4M reached cumulatively from January to Oct 2018.

https://fscluster.org/sites/default/files/documents/yemen_fsac_emergency_livelihoods_gap_map_october_2018_0.pdf . This clearly shows without livelihoods support mechanisms, the food insecurity and malnutrition will continue with worsening trends if only food assistance will be prioritized and other life saving short term interventions.

YEMEN

SITUATION OVERVIEW AND KEY DRIVERS

IPC ACUTE FOOD INSECURITY ANALYSIS DECEMBER 2018 – JANUARY 2019

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SITUATION OVERVIEW, KEY DRIVERS AND LIMITING FACTORS

5

KEY DRIVERS OF FOOD INSECURITY

The ongoing conflict and the resultant economic crisis are the main drivers of food insecurity in Yemen. Four years of protracted conflict have left the country's critical economic and civil infrastructure in ruins, displaced more than three million people, led to significant loss of income and livelihoods, increased prices of basic foods up to double pre-crisis levels and pushed the economy close to a downfall. The liquidity crisis and the hard currency scarcity from commercial banks in the entire country affect the overall economic system, on both supply and demand sides. On the supply side, imports of essential commodities continue to suffer from lack of foreign currencies as a result of continued depreciation of Yemen Riyal (YER) against US Dollar (USD).

One the demand side, despite relatively functional markets, financial access to food remains of great concern, as the prices of basic commodities continue to increase due to depreciation of the national currency, high import taxes, double taxation and increased transport and storage costs. The economic access to food remained the main constraint for most of the population including civil servants who are normally better off. A great portion of the population, even in the more stable areas, cannot access basic food commodities as the cost of the Minimum/Survival Food Basket continues to increase on monthly basis. Currently, the cost of the Minimum/Survival Food Basket is about 150% compared to pre-crisis levels. Prices of fuel products such as petrol, diesel and cooking gas cylinders have increased since escalation of conflict compared to the pre-crisis era and is expected to increase further.

High food prices, contributed to households employing different food coping strategies like shifting to less preferred and cheaper food or reducing number of meals among others. Limited job opportunities and decreased wages and salaries of different segments of the society affected household income, diminishing purchasing power and added additional problem to food access. There was evidence of households adopting different livelihoods coping strategies to cope with difficulties in accessing food. Among these strategies were selling last female animal, begging, selling household assets, strategies that will compromise households' ability to further cope with food gaps in the future.

The reduced local production due to rainfall shortages, highly priced farm inputs (Seeds, Fertilizer, Farm tools, veterinary services including vaccinations, fuel for pumping irrigation water etc) and conflict limiting access to fishing ground contributed to shortage of food produced locally. According to the Ministry of Agriculture and Irrigation production assessment conducted this year for 2017 production period. There is general production reduction in all agricultural sectors (crop farming including horticulture, livestock keeping and fishing). The production at national level, normally account for about 25% of food consumed in the country, has decreased by 20% to 30% compared to 2016, the production in 2018 is estimated to be even worse. Due to reduction in local production markets remained the main source of food for households even during seasons when local supplies could have ensured reduced prices. Fishing opportunities in the red seas and Arabian seas were affected by either conflict, or natural weather phenomenon such as cyclones and hurricanes.

Access to low quality water and in diminishing quantities at household levels contributed negatively to food preparation while cost of cooking fuel particularly cooking gas went up sharply since February and remained high and at some point, was unavailable. High number of suspected cases of disease like Cholera, malaria and acute diarrhea is compromising the food utilization compounded by malnourished children and collapsed health system and services.

An analysis of the hazards and the vulnerability suggests that the situation could deteriorate rapidly: there are multiple shocks of conflict, political and macro-economic nature at different levels, all of which make the affected population more desperate and increasingly vulnerable. People are doing their absolute best to cope and manage these difficult times, mostly through informal community support mechanisms and the tradition of sharing; but the signs are that these coping mechanisms are reaching their limits.

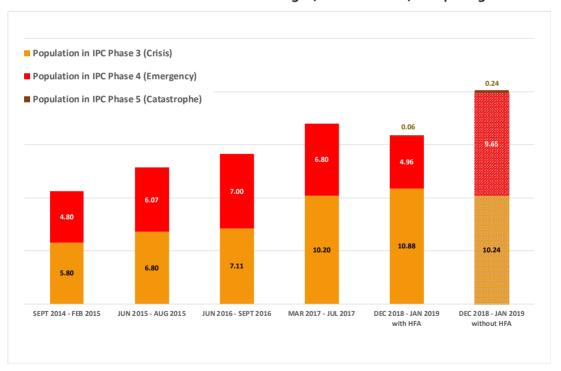
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KEY OUTCOMES OF FOOD INSECURITY

- Food consumption indicators show a very precarious situation, with more than half of the population experiencing food gaps of different magnitude, up to extreme food gaps for the populations that have been classified in IPC Phase 5 (Catastrophe). Households in these conditions are engaging in crisis and emergency livelihoods coping strategies which will hamper their resilience in the future. It is worth noting that nutrition and mortality evidence portray a slight less grim situation than those depicted by the food security outcomes, however, given the lack of recent data informing nutrition and considering the lagging nature of nutrition and mortality, the severity of the situation should not be underestimated.
- Despite the Humanitarian Food Assistance provided in Al Bayda, Al Dhale'e, Al Hudaydah, Al Mahwit, Amran, Hajjah, Saada'a and Taiz, there exist presence of pockets of households experiencing extreme food gaps and exhaustion of coping strategies. Food security outcomes portray an extremely dire situation where more than half of the population are in the most affected districts are classified in IPC Phase 4 (Emergency) and 45 districts with nearly 240,000 population are classified in IPC Phase 5 (Catastrophe) based on extremely high proportions of population with poor food score and household hunger score in the absence of Humanitarian food assistance.
- Food consumption related coping strategies such as reduced portions sizes, allowing children to consume at expense of adults and consumption of less preferred food are applied by a large number of the population in most districts of Yemen.

COMPARISON WITH PREVIOUS ANALYSES

POPULATION IN IPC PHASES 3+ (IN MILLIONS) 2014-2019



6

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THE ROLE OF HUMANITARIAN FOOD ASSISTANCE

- At least 8.4 million people are currently targeted for food assistance with a food basket covering 80% of the households Kilocalories needs. However, the assistance provided is not sufficient to cover the huge gaps largely due to limited funding and access issues in the areas most affected by the conflict.
- From an estimation conducted by the analysts on the situation in absence of Humanitarian Food Assistance, 151 districts out of 333 would likely be in a more severe phase, which is the primary source of food for over 30% of the Yemenis households.
- It is estimated that in absence of Humanitarian Food Assistance, there will
 - be a sharp increase of the population in need or urgent action (IPC Phase 3 and above) from 15.9 million to 20 million (67% of total population) constituting; 1% (about 240,000) in IPC Phase 5 (Catastrophe), 32% (9.6 M) in IPC Phase 4 (Emergency) and 34% (10 M) in IPC Phase 3 (Crisis).
- The sharp increase in the number of populations in IPC phase 5 (Catastrophe) and IPC phase 4 (Emergency) is due to the fact that populations in IPC phase 3 are currently not being targeted for Humanitarian Food Assistance. A significant portion if not all should be targeted in future interventions.

HUMANITARIAN FOOD ASSISTANCE COVERAGE MAP JAN-OCT 2018 **TOTAL CONTROL OF THE PROPERTY OF THE

SITUATION MONITORING AND UPDATE ACTIVITIES

- DATA COLLECTION: Lack of district level nutrition and mortality data has significantly hampered the convergence of evidence process at the unit of analysis. Urgent action is required to conduct nutrition assessment in order to ascertain the impact of the further more recent deterioration of food security on the nutritional status. Sufficient technical, financial, logistics, and administrative support should be provided to the Famine Risk Monitoring and Nutrition Anthropometric and Mortality SMART surveys. Key stakeholders including local authorities' partners are expected to give more attention to neutrality of the data collection and analysis along the standardized food and nutrition security outcome indicators. Special focus should be given to the Household Hunger Score (HHS), as the new indicator introduced to Yemen by more training for the data collectors to insure quality of the data collected.
- **SITUATION MONITORING**: Given the high volatility of the context and the expected evolutions in term of conflict, the food security and nutrition situation has to be monitored frequently. In addition, follow up and monitoring is needed to ensure that Humanitarian Food Assistance reaches the targeted needy populations.
- ANALYSIS UPDATE: Frequency of IPC analysis in Yemen needs to be increased to allow frequent update.

What is IPC and IPC Acute Food Insecurity?

IPC is a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. IPC consists of four mutually reinforcing functions, each with a set of specific protocols (tools and procedures). The core IPC parameters include consensus building, convergence of evidence, accountability, transparency and comparability. The IPC analysis aims at informing emergency response as well as medium and long-term food security policy and programming. For IPC, acute food insecurity is defined as any manifestation of food insecurity found in a specified area at a specific point in time of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. It is highly susceptible to change and can occur and manifest in a population within a short amount of time, as a result of sudden changes or shocks that negatively impact on the determinants of food insecurity.

7

PROCESS, METHODOLOGY AND CHALLENGES



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YEMEN 2018 IPC ANALYSIS PROCESS

The 2018 Yemen IPC analysis went through multiple layers of technical, logistical, administrative, procedural, coordination, analytical and reviewing processes. With the overall management and coordination by FAO, the TWG conducted series of consultative and technical meetings and implemented the different phases of 2018 IPC analysis process. The IPC process started early 2018 by preparing detailed implementation plan and establishing timelines of activities including inventory of available information and determining the need for fresh data required for the analysis. Gathering and reviewing of secondary data as well as monitoring of the status of different planned surveys and assessments were among the TWG's tasks at the beginning of the entire exercise. The IPC analysis covered all the 333 districts of Yemen spread in 22 Governorates. In order to address political sensitivity and seeking for better participation of local experts from governorate level government offices, the TWG decided to carry out the 2018 IPC analysis in two hubs/locations – Aden and Sana'a.

With revised IPC version 3.0, the IPC Global Support Unit gave the Yemen Technical Working Group the opportunity to build the capacity by inviting members to trainings on the new IPC Version 3 manual. The trained experts gave detailed training and orientation to the TWG members on the new version and demonstrated the key changes made in the latest version compared to the IPC Manual Version 2. Upon completion of gathering all the required data for the 2018 Yemen IPC analysis, a comprehensive training and the analysis workshops were conducted.

MAIN SOURCES OF EVIDENCE USED IN THE IPC ANALYSIS

The Yemen TWG collected and analysed available data and information on food availability, access, utilization, and stability from assessments carried in 2018. The process brought together available food security information in a systematic manner to produce the best possible analysis of the food security situation. The data repository included recent data collected by the Famine Risk Monitoring (FRM) system in September-October 2018 and May 2018. The FRM data had all the IPC direct evidence for food consumption (Food consumption score, Household dietary diversity score, Household Hunger score and Reduced food related coping strategies) and livelihood coping strategies. The FRM assessments were designed according to the global standards using WFP's/FAO's/FSAC's corporate level technical protocols taking special considerations of data requirements for the IPC analysis. Market related data was from - WFP's VAM and market monitoring system and FSTS/FAO-EFRLP Market monitoring data. Malnutrition and mortality data was from - Nutrition cluster/UNICEF/MoPHP SMART Nutrition surveys conducted in 2018 for 15 Governorates. Health and disease outbreak data from - WHO/MoPHP (eDEWS), FEWSNET rainfall data, government institutions including agriculture production assessment by MAI, recent Task force for population movements reports and others, which were made available to the IPC analysis. In addition, the latest reports from various clusters (Nutrition, FSAC, WASH etc), different Governorates and the local knowledge and different expertise from the analysis team contributed to the systematic IPC analysis and classification of the governorates using acute food security IPC protocols version 3.

KEY CHALLENGES

The main challenge faced was to ensure availability of district level data and information, considering not all areas have been assessed contextually due to access issues. Hence, the process has been slightly delayed due to the need to complete data collection in all locations. Conducting the analysis in two different locations posed a challenge of timing and that is why after Aden Hub analysis in May, Sanaa hub delayed until October and the TWG had to do a repeat analysis for Aden hub in October. In addition, but not less important, the absence of recent data on nutrition and mortality, especially in the most affected areas has hampered the triangulation of food consumption and livelihood change outcomes with the nutrition and mortality evidence. An intrinsic limitation also came from the use of new IPC protocols, especially with regards to the estimations of population in presence and absence of Humanitarian Food Assistance.

PLAN FOR THE NEXT ANALYSIS

Update the current analysis by March 2019. The next IPC analysis is planned to take place next year in May/June 2019.

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NOTE: The decision to publish this Yemen IPC report, reflecting the Acute Food Insecurity situation with and without humanitarian food assistance from December 2018 to January 2019, has been made by the Global IPC Steering Committee. This version of the report is being presented as preliminary findings and is not necessarily endorsed by the Technical Working Group in Yemen.

Classification of food insecurity and malnutrition conducted using the IPC V₃ protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-JRC, FAO, FEWSNET, Global Food Security Cluster, IGAD, Oxfam, SICA, Save the Children, UNICEF and WFP.























