

OPERATION UPDATE

Africa Region | Hunger Crisis

Emergency appeal №: MGR60001 Emergency appeal launched: 06/10/2022 Operational Strategy published: 23/11/2022	Glide №: N/A
Operation update #2 Date of issue: 17/02/2023	Timeframe covered by this update: From 13/05/2021 to 31/12/2022
Operation timeframe: 15 months (06/10/2022 - 31/12/2023)	Number of people being assisted: 7.6 million
Funding requirements (CHF): CHF 132 million through the IFRC Emergency Appeal CHF 205 million Federation-wide	DREF amount initially allocated: CHF 9.3 million ¹

To date, this Emergency Appeal, which seeks CHF 205,000,000 Federation-wide, is 23 per cent funded. Further funding contributions are needed to enable the National Societies in the region, with the support of the IFRC, to continue providing humanitarian assistance and protection to people affected by the hunger crisis. A total of 14 countries are being supported through this appeal to improve food and nutrition security of 7.6M vulnerable people in rural and urban areas.



Nomadic families carry few items when migrating in search of food, water, and pasture during a drought. In Somalia's Qardho district, the Somali Red Crescent Society, with support from IFRC, support these families with plastic water tanks which they can use while on the move. (Charles Wachira/IFRC).

¹ This includes CHF 5,788,786 in DREF grants and loans on active operations, as well as an additional CHF 3,600,094 allocated with the launch of the Regional Hunger Crisis Appeal, to boost the response as part of the IFRC pan-Africa Zero Hunger Initiative.

A. SITUATION ANALYSIS

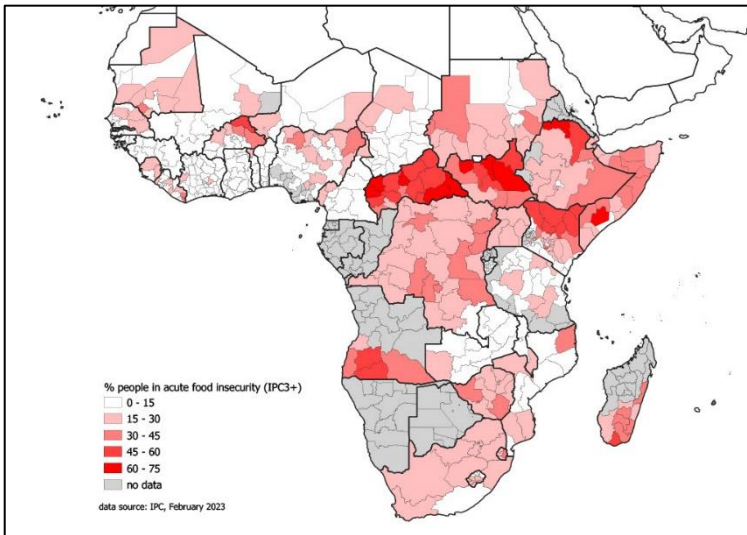


Figure 1: % of people in acute food insecurity (source: IPC data – February 2023)

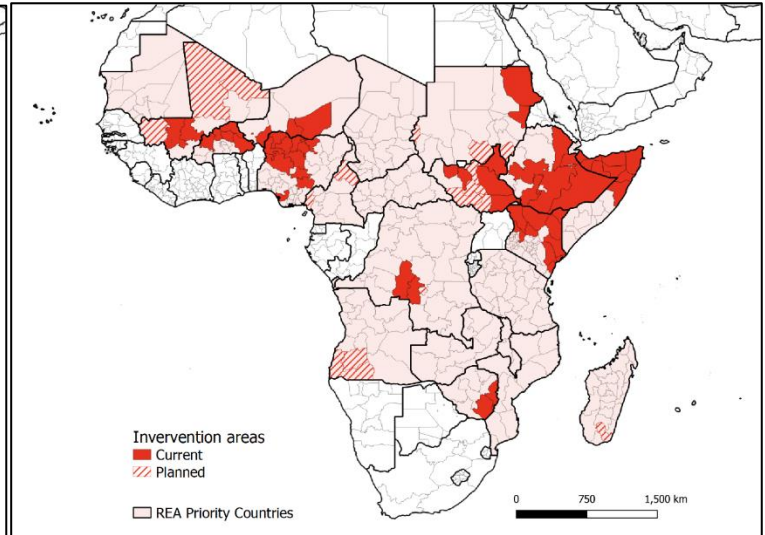


Figure 2: Federation-wide hunger crisis current intervention areas and planned areas.

Description of the crisis

The Hunger Crisis, like other crises and disasters, has exacerbated pre-existing inequalities, discriminations and violence which pose critical protection risks, especially to those most vulnerable and at high risk, including but not limited to women, children, people with disabilities, elderly, single or child-headed household.

Across the region, millions of people are living in poverty and facing multiple daily threats to their food security. An estimated 146 million people are facing crisis or worse levels of acute food insecurity in sub-Saharan Africa². Climatic shocks, such as prolonged drought and recurrent flooding, conflict, desert locusts, and economic downturns, exacerbated by the effects of COVID-19, have combined to hit communities hard. The impact of global drivers is compounding the effect of pre-existing deep-rooted local drivers such as REA poverty and marginalisation.

Warnings about the hunger crisis in Africa were issued over a year ago by African Red Cross and Red Crescent National Societies who have launched emergency appeals. So far, 17 National Societies have responded with limited resources, but more funding is needed to scale up the response. The IFRC must increase life-saving aid to those facing acute food insecurity and address the root causes of the crisis with longer-term commitments.

The Famine Early Warning Systems Network (FEWS NET) has noted³ a concerning pattern in the eastern Horn of Africa, with five consecutive dry seasons officially recorded, marking the longest dry spell ever recorded in the region. The poor rainy season across Ethiopia, Kenya, and Somalia was forecasted by FEWS NET and other agencies, due to the historic below-average March-May 2022 season. FEWS NET's latest Somalia Seasonal Monitor reveals significant delays in the start of rains, irregular rain distribution, and significant rainfall deficiencies throughout the country, with the October-December 2022 rainfall totals well below what is required for productive crops and rangeland. The multi-year drought, caused by La Niña conditions, is anticipated to persist into 2023, with a possibility of a drier-than-normal wet season in March-May 2023 because of warm sea surface temperatures in the west Pacific.

146 million
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Sub-Saharan Africa

² source: Integrated Food Security Phase Classification (IPC) data as of 26th August 2022 <https://www.ipcinfo.org/>

³ source: <https://fews.net> – Press release, January 23, 2023

Additionally, according to GEOGLAM⁴, the main season cereal harvest in East Africa has finished in the northern parts of the region under mixed conditions due to widespread flooding in Sudan and South Sudan. In Ethiopia, the Meher season cereal harvest was completed with below-average yields in the north due to prolonged conflict and in the south due to dry conditions. The fifth consecutive dry season has resulted in poor crop outcomes across the south of the region, and a sixth consecutive dry season is forecast for March to May 2023. Meanwhile, in West Africa, the main and second season cereal harvest is either complete or close to completion under generally favorable conditions, with the exception of conflict-affected areas. In Southern Africa, the main season cereals are currently developing under mixed conditions with increasing areas of dryness in Angola, Namibia, Botswana, Zambia, Zimbabwe, Mozambique, and Madagascar.



Amran Hassan, and her 2-year-old daughter, came to an SRCS mobile health clinic for check-ups. "I came here for the sake of my child because she is sick," Amran said. "There are so many challenges due to the drought, because we have lost our livestock...we don't have any access to food or water." The SRCS with the support of international Red Cross partners provides health services and medicines to people in areas where there are none of these supports. (Olav A. Saltbones

Approximately 8.3 million people across Somalia are expected to face Crisis (IPC Phase 3) or worse acute food insecurity between April and June 2023. Furthermore, Famine (IPC Phase 5) is projected among rural residents in Baidoa and Burhakaba districts and displaced people in Baidoa town of Bay region in southern Somalia, where malnutrition and mortality levels are already at alarming levels. Levels of acute food insecurity across Somalia remain very high and will further deteriorate if food assistance is not sustained. Between October and December 2022, an estimated 5.6 million people are still experiencing Crisis or worse (IPC Phase 3 or higher) outcomes, including 214,000 people estimated to be in Catastrophe (IPC Phase 5), meaning they have not received sufficient food assistance to prevent food consumption gaps. If humanitarian food assistance is not scaled up and sustained, then acute food insecurity and malnutrition levels are expected to deteriorate further and faster between April and June 2023, with approximately 8.3 million people expected to face Crisis (IPC Phase 3) or worse outcomes, including 2.7 million people that will likely be in Emergency (IPC Phase 4) and at least 727,000 people that will likely be in Catastrophe (IPC Phase 5)⁵.

IFRC is scaling up its presence in Somalia, both Somaliland and Puntland, to provide additional technical and operational support to the implementation of operations. In Puntland, we will set up an office in Garowe and continue to conduct security assessments to expand access beyond Garowe. This includes access to communities outside of Garowe, with potential expansion to Galckayo and Bosaso. Expanding access will enhance the efficiency of the operation, giving space for stronger assessments and monitoring and overall support to SRCS.

⁴ source: February 2023: https://earthobservations.org/geoglam.php?t=agricultural_monitoring&s1=global_monitoring

⁵ For further details on the situation in Somalia please check the [Multi-Partner Technical Release on Updated IPC Analysis for Somalia](#) and [SOMALIA: Acute Food Insecurity and Malnutrition Snapshot](#)

The following sections detail how the African Red Cross and Red Crescent National Societies have scaled-up life-saving assistance to millions of people and the response efforts since the launch of the emergency appeal. At the same time, through longer-term programming, African National Societies will address the root causes of food insecurity. IFRC will build on our previous successes and work in support of government plans and frameworks to improve the resilience of the most impoverished communities, including displaced populations.

Hunger Crisis Federation-Wide Regional Overview

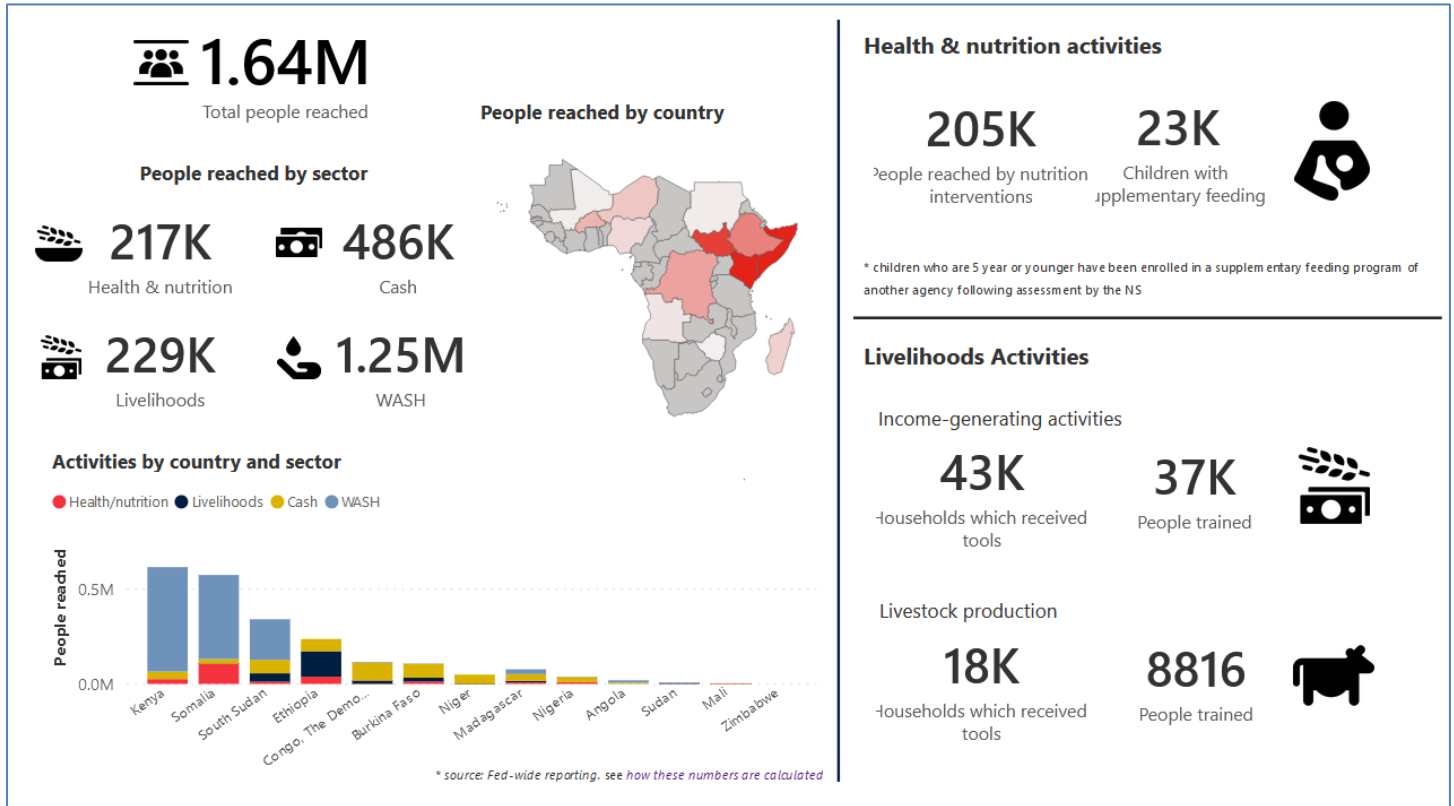
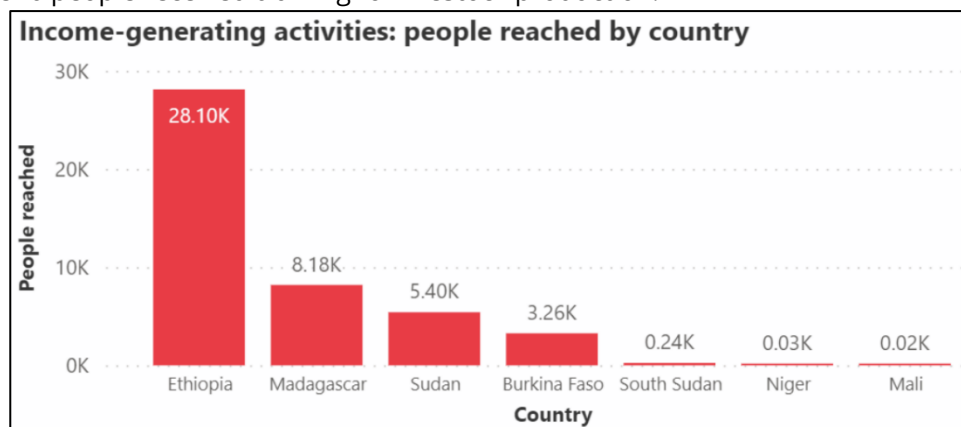
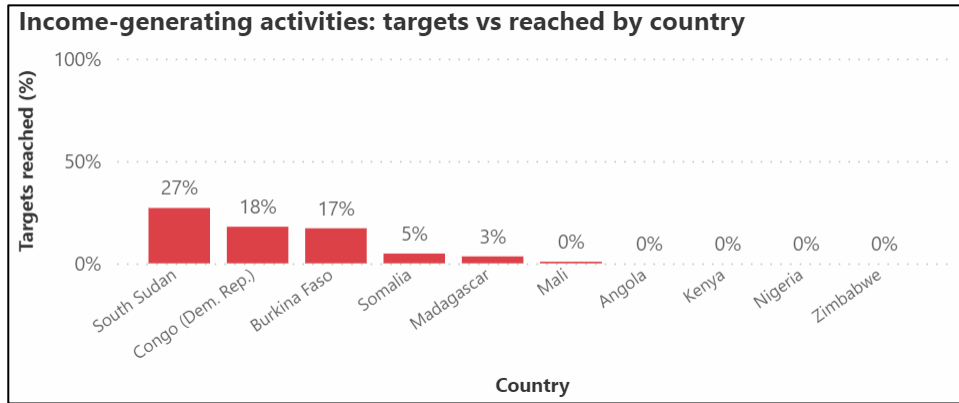


Figure 3: Federation-Wide Response Overview (source: <https://go.ifrc.org/emergencies/6008#data>)

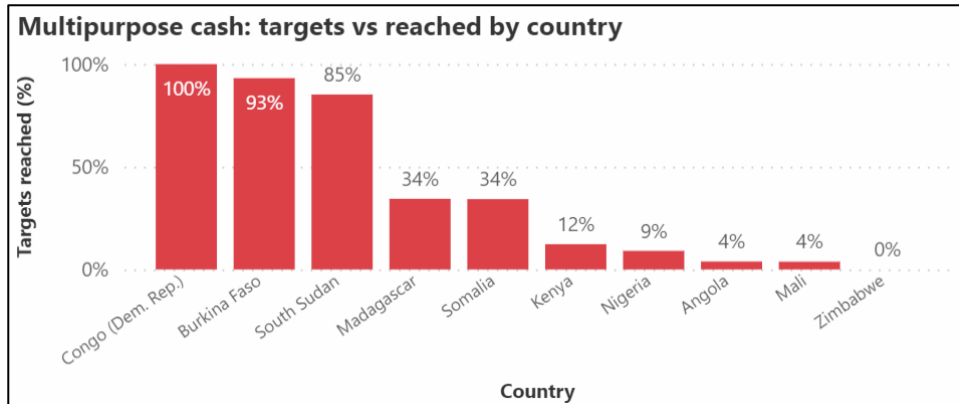
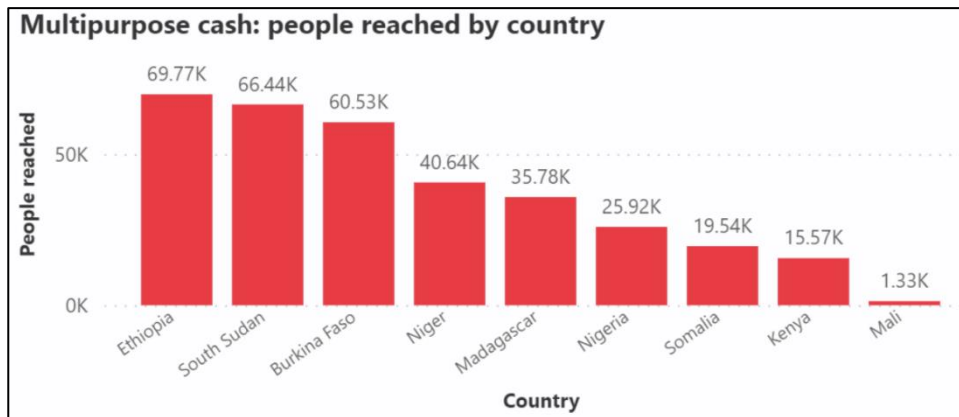
Pillar 1: Food Security and Livelihoods

413,000 people have received multi-purpose cash grants (MPGs). Additionally, 43,000 households have been provided with essential inputs, materials, and tools for income-generation activities and 37,000 people have received training on income-generation. 18,000 households were provided with essential inputs, materials, and tools for livestock production, and 8,816 people received training for livestock production.





Households are struggling to meet their basic food needs due to production losses, low incomes, and declining purchasing power. To address this, the hunger crisis response aims to improve food access and sustain consumption levels through the expansion of emergency food assistance, primarily in the form of cash transfers for poor households facing acute food insecurity. The assistance prioritizes a basic needs approach, utilizing multipurpose cash transfers (MPC) as the main response method. MPC, in the context of hunger, refers to cash transfers that address multiple basic needs affecting household food security. The value of MPC is set using the Minimum Expenditure Basket (MEB), which takes a comprehensive and multisectoral approach that considers the needs of affected populations, including access to health services, water, hygiene items, transportation (to markets and services), and communication.



Furthermore, it might also free up time for household members to focus on care activities, such as children’s nutrition and health, to protect and maintain their own livelihood activities.

The protection of livelihoods can be done from two angles:

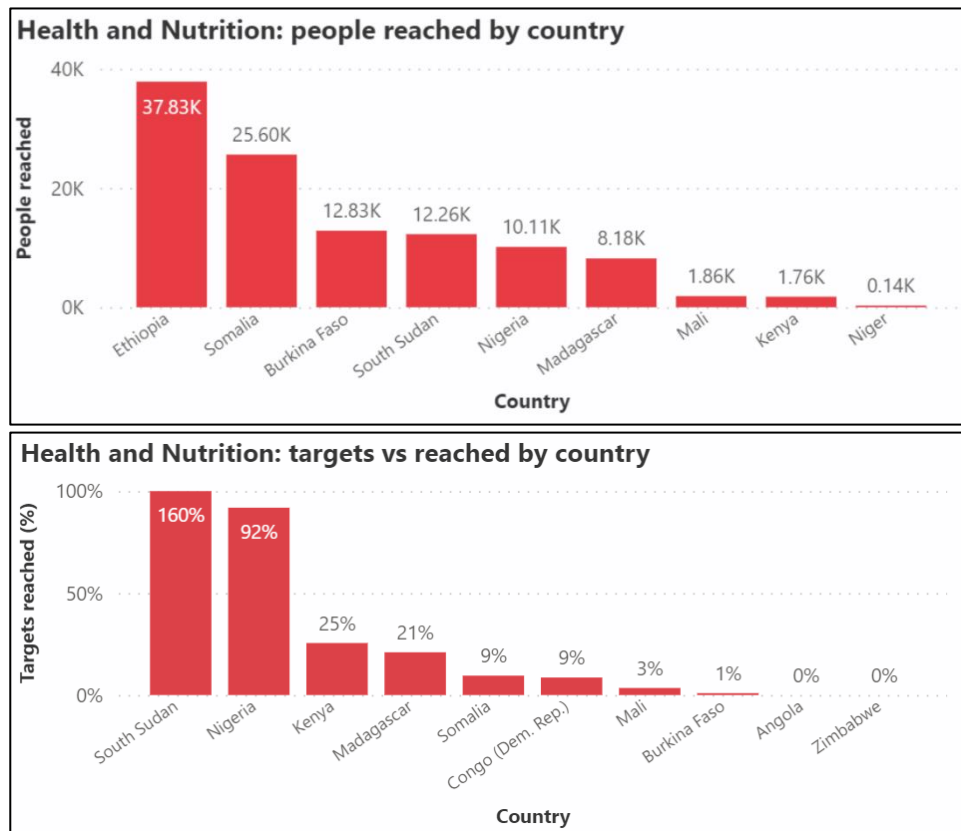
- 1) Through actions to prevent the consumption, sale, or exchange of household inputs and assets to cover food gaps originating from access and availability constraints – including after loss of production, during food price hikes, and/or during lean periods and,
- 2) Through actions that provide production inputs and tools aimed at protecting and sustaining primary household production (and where relevant income-generating) activities, mainly related to crops and livestock, based on market and weather-related information, and whenever possible promoting improved and climate adapted techniques for agriculture and livestock management

These actions can also prevent the overexploitation or destruction of natural resources – an important livelihood asset on which poor households depend for food, firewood, and other materials.

Pillar 2: Health and Nutrition

A total of 140,000 people⁶ have been reached with health and nutrition activities. During the reporting period, the health and nutrition approach was developed as part of the hunger crisis response operational strategy. The approach in this pillar aligns with the Zero hunger strategic framework and includes four main priorities actions areas:

- Nutrition education
- Acute Malnutrition case management support including screening and referral of cases, follow of malnourished cases under treatment in collaboration with nutrition partners, partnership building with relevant nutrition actors
- Health promotion including a one health approach aimed at addressing known interactions between malnutrition and infectious diseases as well as epidemics
- Mental health and psychosocial support services.



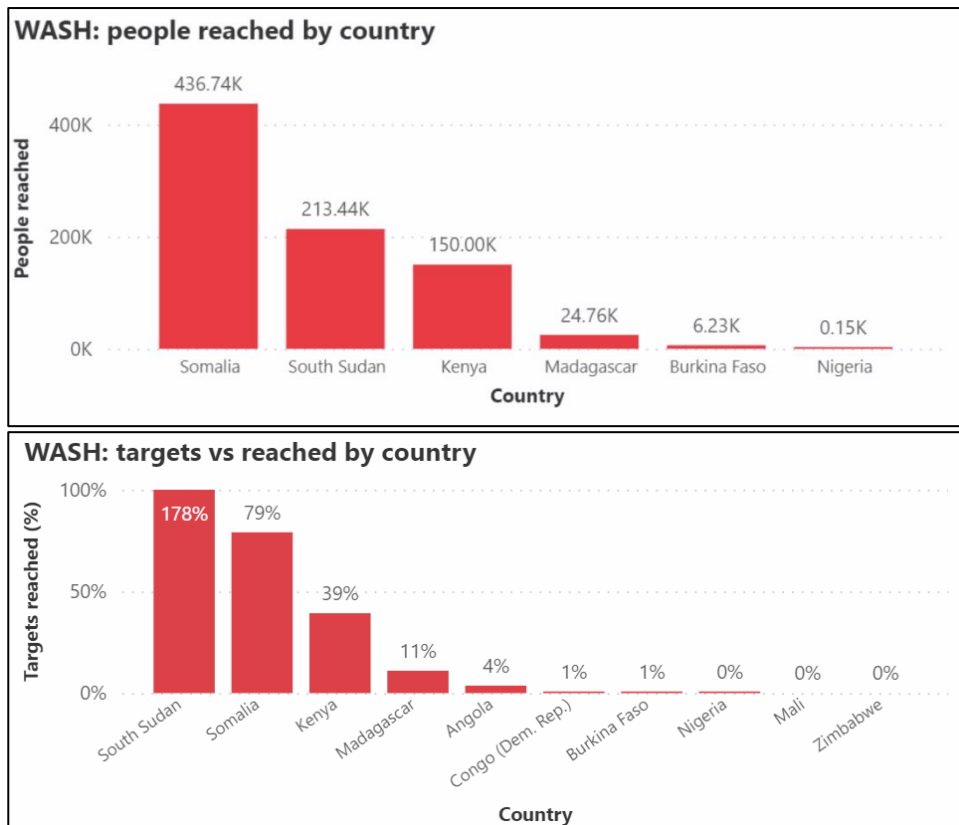
The Health and Nutrition team conducted a technical session to improve awareness and understanding of priority nutrition actions and linkages among response managers and technical leads. A support mission was also carried out in the Democratic Republic of Congo to provide technical guidance and support in various nutrition programming areas. To have a clear understanding of the situation, the team mapped key nutrition services, interventions, workforce capacities, and partners in each country. Mapping tools were developed and shared with all clusters, with the mapping exercise ongoing.



Photo: People visit an SRCS Health team during a mobile clinic, the clinics provide basic health care, medications, and test for malnutrition (Olav A. Saltbones/Norwegian Red Cross)

Pillar 3: Water, Sanitation and Hygiene

The appeal has reached 969,000⁷ people through WASH assistance. The interventions included the rehabilitation and maintenance of water points; provision of water storage tanks and household level containers; and community-based hygiene and sanitation promotion activities.



Access to WASH services is essential for health, food security, and livelihoods, as they are interdependent. WASH is not only a life-saving intervention but also contributes to sustainable improvements in health, dignity, protection, livelihoods, and resilience.

The provision of WASH services takes various forms including the direct provision or rehabilitation of basic water supply infrastructure, in-kind provision of water treatment and storage products, and the use of cash or voucher assistance to support WASH objectives. In many cases, water supply must be multipurpose. National Society WASH services typically focus on human consumption, but they also consider livestock, household production activities, food security, and livelihood issues.

Cross Sectors

Protection, Gender, and Inclusion

The IFRC PGI team assessed PGI capacity in National Societies facing a hunger crisis and worked with the IM team to identify strengths and weaknesses in PGI integration planning. Monthly meetings with National Societies discussed PGI strategy, shared best practices, and improved documentation. National Society hunger crisis response plans have a PSEA risk analysis with action points executed by the risk manager. Key messages developed by the PGI and communications teams highlighted the impact of the hunger crisis and emphasized PGI's importance in the response. The PGI team regularly participates in GBV, protection, and PSEA regional working groups to engage with other humanitarian actors on PGI strategies and messages. A PGI surge was deployed to Antananarivo to provide technical support to National Societies for two months and resulted in the development of a PGI Roadmap and newsletter.

Risk Reduction, climate adaptation and Recovery

The Zero Hunger Cell team is working on Food Security and Livelihoods (FSL) Strategic Innovation with three National Societies in Kenya, Malawi, and Zambia to understand the RCRC Movement's potential in FSL programming. The goal is to support National Societies in innovating and adapting to food security crises. The team is building on existing initiatives and working to strengthen National Societies' capacity to support community resilience and food systems.

The team is also collaborating with FAO on Anticipatory Action, Reaching the Last Mile, and Managing Post Harvest Losses as part of the Zero Hunger Initiative in seven countries: Kenya, Uganda, Ethiopia, Somalia, Democratic Republic of Congo, Mali, and Niger. The partnership aims to increase the impact and positioning of National Societies with governments, regional institutions, and donors and link emergency response with longer-term solutions to the food insecurity crisis.

The Regional Operational Strategy provides a framework for responding to food insecurity and building resilience, with considerations for protection, gender and inclusion, and community engagement and accountability.

The team is developing the IFRC-African Union Pan African Food and Nutrition Resilience Initiative, a long-term resilience building program focused on addressing food insecurity by strengthening livelihoods, restoring rangelands, planting and caring for trees, improving access to safe water and sanitation, and strengthening institutions. The plan will be implemented jointly with the African Union.

Community Engagement and Accountability

A CEA delegate was deployed from September to December 2022 to provide technical support to 23 National Societies in the hunger crisis response. The delegate developed a CEA strategy with five key pillars: minimum CEA actions, feedback system, community-driven solutions, coordination, and advocacy. Tools for community feedback were created, including information management systems and a monthly webinar series. A workshop was held to present these tools to the CEA country focal points, and a 4-day training was conducted by the Nigerian Red Cross with IFRC support to document and respond to community feedback. A biweekly technical meeting was established to share

information, address challenges, and improve coordination between CEA approaches and other programs from IFRC and National Societies in the same countries.

Enabling approaches

Humanitarian diplomacy and representation with external partners

The focus of the developed engagement strategy, for the diplomatic communities across our respective countries and region, is on the long-term plans for addressing food security issues and to continuously provide updates on how the RCRC movement is addressing the immediate needs of the affected populations.

Implementation of the IFRC and FAO global partnership in Africa was initiated by focusing on the potential immediate to long term joint responses to the current food insecurity crisis. As part of the IFRC/NS - FAO partnership, a total of 7 countries [Kenya, Uganda, Ethiopia, Somalia, Democratic republic of Congo, Mali and Niger] are part of the engagement. The partnership focuses on collaborating on the following FSL components: 1. post-harvest loss management 2. Last mile 3. Early warning and response work. The governments of Intergovernmental Authority on Development (IGAD) have validated these areas of work of the partnership.

IFRC is aligned with the African Union (AU) on COP27 on the IFRC-AU Pan Africa Food and Nutrition Resilience Initiative. A communication document was jointly developed to show how the two organizations have set to collaborate on addressing the twin challenges of climate change and food insecurity impacting Africa. The initiative was developed following the High-level Food Security and Nutrition Conference held in October 2022. The African Union and IFRC jointly proposed to massively scale-up interventions for climate change adaptation to increase food resilience and reducing disaster risk and to focus on countries most affected by the food and nutrition insecurity. Additionally, IFRC participated in a World Bank-led Roundtable on Food Insecurity in November 2022. It focused on longer-term issues and fostered future collaboration.

Regional stakeholder coordination

The International Federation of Red Cross and Red Crescent Societies (IFRC) and its National Societies work with governments, international organizations, and regional stakeholders such as the African Union, Intergovernmental Authority on Development (IGAD) and Southern African Development Community (SADC) to address food security and nutrition in the global and regional policy platforms. In line with government policies, the responses prioritize immediate support and focus on building longer-term resilience to address climate change and enhance community capacities.

The African Union Commission, in partnership with IFRC, the Food and Agriculture Organization of the United Nations, and the African Development Bank organized a high-level Food Security and Nutrition Conference in October 2022 to advocate for increased efforts to meet global and regional commitments for humanitarian and long-term needs. IFRC presented the Zero Hunger Crisis Language Caution and Key Messages, along with relevant facts and figures, to African high-level officials.

IFRC co-chairs the ESAR RCCE TWG and the Community Feedback Sub-Working Group to support partners in creating a resource bank⁸, conducting social science research, providing community feedback trainings, and establishing an inter-agency feedback system. IFRC is a member of the Humanitarian UN-OCHA Regional Office for Southern and Eastern Africa and participates in the inter-agency humanitarian briefing for the Horn of Africa Drought. The Food Security and Nutrition working group provides updates on climate change, humanitarian response needs, displacement, and gender-based violence issues, and IFRC FSL colleagues participate and provide updates to the IFRC country cluster delegations and National Societies.

⁸ <https://www.rcce-collective.net/resources/thematic-kits/drought/>

Secretariat Services

Regional Update

Technical sectors

Technical support aims to ensure that the international efforts of the IFRC Secretariat, RCRC membership partners support National Societies as the lead in implementing the Federation Wide collective response for the Hunger Crisis. Technical support for National Societies continues, however an innovative approach is under development to enhance and leverage Federation Wide technical closer to operation as possible. A new approach combined with the existing mapping of human resources gaps will optimize support and fill resource gaps.

Strategic engagement and partnerships

A Resource Mobilization Strategy has been developed to fundraise for the Regional Emergency Appeal focusing on external and IFRC non-traditional partners as well as strengthening country level donor engagement led by the delegations. Technical support is continuing to be provided to National Societies and IFRC delegations to develop a resource mobilization and humanitarian diplomacy plan to increase support and funding for the Hunger Crisis. Bi-weekly meetings have been established with delegation teams and National Societies. A fundraising toolkit was developed and shared Federation Wide to support fundraising efforts. The Strategic Engagement and Partnerships and Humanitarian Diplomacy teams conducted induction sessions for colleagues in South Sudan and Nigeria. Two Partners Calls were held since the launch of the Regional Emergency Appeal. A briefing for the Permanent Missions in Geneva was held on October 20th to present the emergency appeal and to highlight funding gaps. To foster information sharing, bi-weekly updates continue for Federation Wide membership partners on the emergency appeal funding and operations overview.

Planning, Monitoring

The PMER and Quality Assurance team is leading the Federation-wide reporting for the operation. The PMER team developed tools to collect indicator and financial data and subsequently facilitated orientation sessions with national societies, membership partners and IFRC colleagues. The data collected with this tool will contribute to an evidence-based decision making for the operations. National societies and membership partners are providing data on a monthly basis and the frequency will be re-evaluated after three months. The PMER unit in liaison with the IM unit have developed the ITT and financial overview data that is visualized in a dashboard on the GO platform and is available for the membership. A comprehensive PMER framework is being developed to further enhance PMER initiatives for the Hunger Crisis.

Risk Management

Current efforts are towards operationalizing the risk management plan developed for this operation. An initial risk identification and assessment process has been undertaken at the regional level, mapping out key risks that would impact the achievement of the operation's objectives. Top three risks assessed and closely being monitored and or proactively mitigated are (1) funding gap, (2) human resources capacity constraints on specialized areas of the intervention (FSL, Nutrition, WASH, IM etc), and (3) program delivery in terms of timeliness and quality.

Information Management

The IM team created a Storymap and dashboard to inform a wider audience about the hunger crisis, with the Storymap embedded in the IFRC GO landing page and the dashboard available on the website with the option to filter figures of National Society response. They are also supporting CEA, PMER, and Logistics in digital tools and information products. The IM team plans to map IM capacity, cultivate relationships with IM focal points, and maintain the Hunger Crisis profile on IFRC GO. They also regularly review secondary data to keep information updated.

IFRC Membership Coordination

The following Participating National Societies are supporting African National Societies through IFRC Secretariat or bilaterally: American Red Cross, Austrian Red Cross, Bahrain Red Crescent, Belgian Red Cross, British Red Cross, Canadian Red Cross, China Red Cross, Hong Kong branch, Danish Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Icelandic Red Cross, Irish Red Cross, Italian Red Cross, Japanese Red Cross, Kuwait Red Cross, Luxembourg Red Cross, Monaco Red Cross, Netherlands Red Cross, Norwegian Red Cross, Singapore Red Cross, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross, Taiwan Red Cross organisation and Turkish Red Crescent.

Participating National Society	Presence in country													
	Angola	Burkina Faso	Cameroon	DRC	Ethiopia	Kenya	Madagascar	Mali	Niger	Nigeria	Somalia	South Sudan	Sudan	Zimbabwe
American RC						●								
Austrian RC					●									
Belgium RC		●		●				●	●					
British RC						●				●				●
Canadian RC				●				●			●	●		
Danish RC					●	●		●	●		●	●	●	●
Finnish RC					●	●					●	●	●	
French RC			●	●			●		●					
German RC					●		●				●	●	●	
Icelandic RC											●			
Italian RC					●	●			●					
Luxembourg RC		●					●	●	●					
Monaco RC		●												
Netherlands RC	●			●	●	●		●				●	●	
Norwegian RC		●		●		●				●	●	●		
Qatar RC								●					●	
Spanish RC		●		●				●	●				●	
Swedish RC				●		●			●			●	●	
Swiss RC					●							●	●	
Turkish RC	●											●	●	

On 26 October 2022, the IFRC Africa Regional Office in Nairobi held a membership coordination meeting comprised of 10 Red Cross and Red Crescent Movement partners: American RC, Finnish RC, Austrian RC, British RC, Spanish RC, Netherlands RC, Danish RC, Canadian RC, French RC, and Swedish RC. The coordination meeting concluded with a collective agreement on the following:

- More consistent updates on how the operations are unfolding to allow them to brief their leadership and donors and seek new funding.
- The use of the IFRC Go Hunger Crisis dashboard to share updates on number of beneficiaries reached, funding coverage and other relevant information on the response operations.
- The identification of technical human resource gaps and needs for the response operations.
- A coordinated advocacy, communication, and reporting approach.

ICRC

ICRC and IFRC have been working together in strengthening Movement coordination platforms in each country and at the regional level; they ensure joint technical, operational, and strategic support to National Societies. Both organizations have already mobilized their resources on the ground in response to the Hunger Crisis. The ICRC, together with other partners of the Movement, is scaling up its operations, focusing on conflict-affected countries and increasing its emergency efforts to provide life-saving aid to communities most affected by food shortages and malnutrition. Although it is not spared from security risks, its neutral, impartial, and independent humanitarian approach, and its dialogue with parties to armed conflict enable it to reach communities in areas where few or no other humanitarian actors are present.

Between 8 to 9 September 2022, a time with intense global humanitarian need and competing demands, 23 African National Societies, the ICRC and the IFRC, including 13 partner National Societies, met in Nairobi to address and discuss the severe and growing food insecurity crisis across sub-Saharan Africa. 13 commitments were jointly developed and declared to be executed through federation-wide network. Movement partners will objectively evaluate and report back on progress through the IFRC-wide Zero Hunger Cell, in liaison with the Movement coordination mechanisms.

In responding to this food insecurity crisis, both international components of the Movement—ICRC and IFRC—are present in ten countries—Burkina Faso, Cameroon, Ethiopia, Kenya, Mali, Mauritania, Niger, Nigeria, Somalia, and Sudan—most of which are impacted by both conflict and climactic shocks. The ICRC has active emergency operations for these ten countries and is stepping up its resource mobilisation efforts, while the IFRC focused its Regional Emergency Appeal in 23 countries and supporting initially 14 National Societies across sub-Saharan Africa with the potential to expand its scope of activities, while the other remaining 9 will continue to focus on assessments and localized response via the DREF. The ICRC is scaling its operations in areas affected by armed conflict and violence alongside Operating and Participating National Societies. Being aware of security risks, its neutral, impartial, and independent humanitarian approach, and its dialogue with parties to armed conflict enable it to reach communities in areas where few or no other humanitarian actors are present. The IFRC and ICRC are signatory parties to the Nairobi Statement, and have agreed to the principles therein, reinforcing the Movement partnership in face of the Hunger crisis.

In line with the recent adoption of the Seville Agreement 2.0, Movement coordination aims to ensure that the movement international efforts and support acknowledge and strengthen the essential role of National Societies in their own countries, who play a central role in co-creating and delivering the Movement's collective response. Throughout the emergency response, the Movement coordination will ensure the complementarity of its interventions by ensuring that each component builds on its strength and comparative advantages and keeps the Operating National Societies at the centre. Movement coordination mechanisms will continue to be used and strengthened at all levels and, to the extent possible, operations, advocacy, communications, and fundraising will be aligned. Externally, the Movement is committed to complementing the actions of other humanitarian partners and avoiding duplication in programming design and implementation. Movement coordination mechanisms exist and have been strengthened at the sub-national, national, and Africa-regional levels to guide this complementarity and support operations through streamlined logistics, joint advocacy and communications, and coordinated fundraising.

Together with the ICRC in conflict situations and Participating National Societies operating in Africa, the Red Cross Red Crescent Movement is uniquely positioned to respond to this crisis given its reach and vast experience in humanitarian response, leading to greater collective and lasting impacts.

Operational risk assessment

Low Funding: The Hunger Crisis operations are experiencing challenges in accessing sufficient funding to meet the needs of the affected population. Although the project has received 11% (CHF 14 million) from the IFRC Secretariat and has 23% (CHF 47 million) of the Federation-wide funding requirements covered, the current level of global humanitarian needs, intensified by multiple ongoing crises worldwide, is straining the project's funding.

Political Insecurity: Most of the areas impacted by food insecurity are similarly impacted by resource-based conflict or political disturbance. Countries such as Somalia and Nigeria are impacted by armed conflict which limits access to areas impacted by food insecurity. Ethiopia's Tigray and South Sudan Unity State, Burkina Faso and Mali have been facing protracted conflict for at least 1 year. Similarly, there has been an increase in number of protests following dissatisfaction by citizens due to economic challenges. This may pose a risk in the implementation of the planned activities. In addition, limited access to the Federation, National society staff and volunteers, may hamper both implementation and monitoring of the operation. Volunteers emanating from the operational areas will be included

into the operation to ensure implementation is conducted as per the timelines. All staff and volunteers will complete the required safety and security training before deployments to reduce exposure to security risks.

Climate Shock: Climate change has led to an increase in number of disasters being reported globally and more so in Africa. Countries affected by drought in one area also faced flooding in other areas. In certain instances, the same countries must deal with disease epidemics such as Ebola and Cholera. These multiple operations are causing fatigue to the implementing National Society. Federation will seek for surge deployments to boost the capacity of national societies for effective and efficient implementation of the operation. The first "triple-dip" La Niña (three consecutive years) of the 21st century will continue to affect temperature & precipitation patterns and exacerbate drought & flooding in different parts of the world.

Health related risks: Outbreaks of infectious diseases are a major concern, especially when combined with low existing vaccination coverage and health service availability. As people become increasingly food insecure, they also must make the impossible choice between food and healthcare, even as nutritional deficiencies make them increasingly vulnerable to disease. This is particularly true for children, for whom the combination of malnutrition and disease can prove fatal. With malnutrition and displacement, the need for health services will increase as people become weaker and more vulnerable to disease. Addressing this, required collective partners efforts in the health sector and beyond to ramp up its response in the region to avert the worst effects of food insecurity and to give people access to the health services they need.

Risk Reduction, climate change and recovery: An enhanced and integrated approach is crucial to ensuring National Societies integrate risk reduction measures and increase key messages for resilience building towards achieving the Pan Africa Zero Hunger initiative 2030. At the moment, fewer of these activities are being prioritized and reported.

B. OPERATIONAL STRATEGY

Update on the strategy

The Regional Operational Strategy⁹ has remained largely unchanged since its implementation in 14 countries, including **Angola, Burkina Faso, Cameroon, DRC, Ethiopia, Kenya, Madagascar, Mali, Niger, Nigeria, Sudan, South Sudan, Somalia,** and **Zimbabwe**. However, the Famine Early Warning Systems Network (FEWS NET) has noted a concerning trend in the eastern Horn of Africa, with the region experiencing five consecutive dry seasons, marking the longest dry spell on record. FEWS NET and other agencies had forecasted the poor rainy season across Ethiopia, Kenya, and Somalia due to the historically below-average March-May 2022 season. As a result, there will be a significant increase in the number of affected people and extremely high humanitarian needs that are expected to persist and even worsen in 2023. This situation will accelerate the need for humanitarian assistance and pose a significant challenge to drought recovery efforts, leading to the necessity of reviewing the Regional Operational Strategy to meet the growing needs of the affected population.

⁹ The Regional Operations Strategy for the Hunger Crisis can be found on the IFRC Go Platform: <https://go.ifrc.org/emergencies/6008#reports>

C. DETAILED OPERATIONAL REPORT

National Society Response



Angola Red Cross

 1,500 HHs reached	 2,500 people reached	 12,082 people reached	 2,577 people reached	 12,082 people reached	
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Multi-purpose cash

A CVA specialist is being engaged for Angola. The mission is of short duration (3 months). It is expected that during this time the specialist will develop together with the NS, systems, and tools. The expert will also work with government entities and humanitarian partners to ensure the integration of the Red Cross cash within the existing initiatives in the country, (e.g., Kwenda program).

Water Sanitation and Hygiene (WASH)

During the period under review, the following activities were offered; provision and distribution of buckets, jerry cans, and aqua tablets for 500 families in the 3 provinces of Cunene, Huila, and Namibe. 4 Hygiene promotion sessions were conducted in each of the provinces reaching 12,082 people.

Protection, Gender, and Inclusion (PGI)

Conducted PGI sessions for 77 members including staff and volunteers involved in the appeal and a total of 2,500 households benefitted from education sessions on PGI.

Community, Engagement, and Accountability (CEA)

Sessions of community mobilization including RCCE, reached out 12,082 people, in Cunene, Huila and Namibe.



Burkinabe Red Cross



11,641 HHs
reached



3,256
people
reached



12,828
people
reached



636 people
reached

An additional 600 households have already been identified to benefit from emergency food assistance with support in nutrition education, nutritional sensitization, and WASH with a capacity-building component of the CRBF. Targeting and outreach activities went well in December 2022.

The targeting activities initiated did not allow to carry out the specific work on nutrition and health for the additional amount to be distributed for the CRBF. It is planned during the distributions to carry out awareness-raising activities, detection of malnourished children and women as well as WASH and health awareness. A community-based surveillance component as well as an epidemic preparedness component will be developed in the coming weeks/months.



Cameroon Red Cross

In late 2022, a joint needs assessment mission was carried out in the South-West Region's Fako Department, which brought to light the dire situation faced by the local population. The mission involved PNS, IFRC, community leaders, and administrative and traditional authorities of the cities of Buea and Limbe. The towns of Buea and Limbe were the focus, and a total of 700 vulnerable beneficiaries were identified.

The findings of the mission are alarming, and it is clear that urgent action is needed to support the affected population, whose livelihoods have deteriorated significantly. Efforts are being made to mobilize adequate resources to meet their needs, but it is evident that the number of vulnerable people exceeds the current supply being provided.

To date, the community committee for the selection of beneficiaries has identified and registered a total of 3,112 vulnerable households in the South-West and Far North Regions, with volunteers providing support. However, there is a pressing need to increase resources to address food insecurity in the target areas and provide more support to those in need.



CROIX-ROUGE
DE LA RÉP DÉM DU CONGO

Red Cross of the Democratic Republic of the Congo



14,996 HHs
reached



15,556
people
reached



1,353 people
reached



3,000
people
reached

USAID/BHA funding has enabled the DRC RC to provide essential aid to vulnerable populations in several provinces. In the province of Tanganyika, the DRC RC distributed food to 2,524 households, benefiting 15,556 individuals at the Katibili site. In December 2022, the provinces of Kasai and Central Kasai, and the town of TSHIKAPA received 500 kg of maize seed, 500 kg of groundnut seed, and 45 kg of vegetable seeds (including amaranth, okra, nightshade, aubergine, spinach, and tomato).

Looking ahead, the DRC RC is set to distribute food and vegetable seeds for the 2023 agricultural season, starting in January. However, access to beneficiary sites remains challenging due to the poor state of roads.

The provincial committee of the DRC in the province of Kasai Central continues to treat malnourished children at the Unité Nutritionnelle Thérapeutique Ambulatoire (UNTA) in Tukombe, located in the health zone of Katoka. The distribution of MUAC and Personal Protective Equipment (PPE) for acute malnutrition included 2,857 bracelets for MUAC, 4,000 Aquatab plates, 50 mask/nose covers, and 50 gels of 350 ml.

The DRC RC teams conducted VADs, reaching approximately 500 households, and conducted MUAC measurements for these households. To combat malnutrition and food insecurity, mass awareness sessions on FEFA were held, which focused on optimal breastfeeding, behavior change, eating habits, and essential family practices. In the province of Kasai, 72 children between the ages of 6-24 months who were suffering from severe acute malnutrition (SAM) were referred to nearby health centers for further treatment.

To address water and sanitation challenges, the DRC RC team distributed 4,000 aqua tab tablets for the treatment/purification of drinking water in households. They also raised awareness on essential family practices to prevent waterborne diseases. Additionally, 50 Personal Protective Equipment (masks and hydroalcoholic gels) were distributed to 25 volunteers in Kasai province to further promote health and safety.



Ethiopian Red Cross



13,418 HHs
reached



28,099
people
reached



37,826
people
reached

Multi-purpose cash

During the reporting period, out of a total of 42,000 targeted households, 13,418 HHs (7,246 female-headed and 6,172 male-headed) received CASH. These include 6,985 HHs (34,925 people) who received CASH from the IFRC in the Somali region of Kelafo and Dawa, as well as the Oromia region of Borana and Bale, 2,500 households (12,500 people) who received Cash from the German Red Cross in both Oromia and Somali regions, 3,483 household (15,015 people) who received Cash from the Moyale Oromia region in collaboration with the Swiss, Danish Red Cross, Finnish Red Cross, and Austria Red Cross, and 800 households who received Cash in the Somali region from Netherlands Red Cross through ERCS FW appeal bilateral resource.

Health and nutrition

ERACS volunteers were sent to their respective kebeles to conduct nutrition screenings and community mobilization campaigns to combat malnutrition. These volunteers managed to reach 37,826 mothers with nutrition education for two 38 rounds in the months of June and July. As a result, mothers have begun to refer their children to the nearest health facility or any institution that provides nutrition support, and their nutrition status has improved.



Kenya Red Cross



7,381 HHs
reached



39,250
people
reached



34,274
people
reached



550,000
people
reached

In-Kind food distribution was carried out in areas where cash was not feasible. These areas do not have functional markets to buy commodities, and no financial service providers can aid in cash distribution. Where the community could purchase items in case cash assistance is available is so remote for them to access cash transfer values. The

proposed food assistance through cash has considered the needs and preferences of women, girls, men, and boys of the affected population as identified from community feedback during the food security assessment.

The CVA enabled the community members to access essential basic needs. However, rapidly increasing prices of key food and non-food items such as maize flour, sugar, cooking oil and petrol were exacerbating the food insecurity among community members, hence seeking more cash or more frequency during the exercise. Most of the community members were not well informed on the feedback mechanisms in place and used existing channels of complaints and feedback. The few that used the mechanisms got responses within three days. A total of 144 pieces of feedback were received and addressed. KRCS has inclusive processes and activities, considering the views and needs of women, girls, boys, persons living with disabilities, and the elderly. Persons at risk of being discriminated against based on their sexual orientation or identity have also had their voices and needs heard. When targeting and identifying beneficiaries, KRCS staff ensures that communities include the participation of all age groups. Registration tools have ages and slots for those with special needs. Single women, PWDs, unaccompanied children, and others prone to stigmatization and exploitation/abuse are registered in their names.



Malagasy Red Cross



6,880 HHs
reached



8,179
people
reached



8,179
people
reached



24,757
people
reached

In December 2022, the Malagasy Red Cross Society (MRCS) collaborated with the International Federation of Red Cross and Red Crescent Societies (IFRC) and the Food and Agriculture Organization (FAO) to conduct a field mission. The aim of the mission was to identify new areas for intervention in order to address the ongoing food crisis in the southern region of Madagascar. Following the mission, MRCS worked with its partners to refine its approach and consolidate support under the framework of "Zero Hunger."

In order to achieve this goal, MRCS has engaged in a variety of activities. These include attending coordination meetings, contacting authorities and other stakeholders, preparing volunteers through training, conducting Preparedness Market Assessments, and distributing cash and WASH (Water, Sanitation, and Hygiene) kits. In addition, MRCS has recruited personnel for key positions to support the appeal, including WASH, Project Coordinator, Health and Nutrition, FSL & Cash, Log, and Finance.

As of the third week of January 2023, MRCS is in the final stages of recruiting staff to address the "Hunger Crisis." In the meantime, MRCS is continuing to refine its approach in partnership with local organizations. This includes providing Cash Voucher support, WASH assistance, and promoting livelihoods and reforestation activities. By working together with its partners, MRCS aims to make a positive impact in addressing the food crisis in southern Madagascar.



Mali Red Cross



256 people
reached



20 people
reached



2,367
people
reached

Mali Red Cross conducted a rigorous beneficiary selection process as part of their emergency response activities. To ensure a comprehensive response, the Mali Red Cross explored the gaps in the current response through data on the food situation and the response of humanitarian actors from the Cadre Harmonisé and the Food Security and Livelihoods cluster. Based on the information gathered, the community of Dilly in the Koulikoro region was selected for the distribution of cash.

Due to the rapidly deteriorating security situation in Mali, the distribution of cash proved to be a challenge. Despite this, the establishment of complaint and feedback committees during the Post Distribution Monitoring (PDM) exercise was positively appreciated and will be repeated in future distributions of the emergency appeal. Out of a sample of 116 households surveyed, 100% expressed their degree of satisfaction.

As an extension of the activities through the emergency appeal, targeting is carried out in Nara/koulikoro and Dah/Ségou for the selection of 557 households. A total of 10 volunteers will be trained in Dah to launch nutrition activities in the Ségou region. These activities will focus on community-based epidemic preparedness, community surveillance, and psychosocial first aid.



Red Cross Society of Niger



7,815 HHs
reached



30 people
reached



140
people
reached

In December, a total of 23,520 beneficiaries received cash assistance. This support was made possible by the Spanish Red Cross, which reached 360 households, and the IFRC Secretariat, which reached 3,000 households. The selection of beneficiaries was based on a comprehensive assessment of the Harmonized Framework published in November 2022, as well as discussions with the Niger government to identify gaps in the response.



Nigerian Red Cross



4,984 HHs
reached



131,845
people
reached



152 people
reached

Food Security and Livelihoods

In response to the crisis, the National Society has adopted Cash and Voucher as the preferred modality to provide humanitarian support. As part of this initiative, a total of 4,984 households comprising 29,904 people were reached with multipurpose cash grants. Additionally, 665 pregnant and lactating mothers were given conditional cash grants for supplementary feeding.

To ensure the effectiveness of this program, two Post Distribution Monitoring assessments were conducted for the Multipurpose Cash (MPC) and Nutrition CVA. The assessment revealed that 100% of the respondents were satisfied with the MPC and CVA.

To ensure proper implementation of the program, 210 NRCS volunteers were trained on cash transfer protocols in 7 states, with 30 volunteers per state.

Health and Nutrition

In terms of health and nutrition, a total of 34,051 children were screened for malnutrition. Of these, 1,914 were screened as malnourished and referred accordingly. Out of the 1,914 malnourished children, 1,855 were moderately malnourished and 904 were severely malnourished. The severely malnourished children were identified as having signs of acute malnutrition and were referred to health centers for further care.

To complement the screening process, Mothers' club volunteers conducted house-to-house visits to sensitize mothers, fathers, and caregivers on mother and child nutrition, maternal and child health, and hygiene promotion. This approach aimed to address the root causes of malnutrition and promote overall health and wellbeing in the community.



Somali Red Crescent



4,280 HH
reached



60 people
reached



106,000
people
reached



443,000
people
reached

FSL

To address the urgent needs of food-insecure families across the three regions, most activities focused on providing multipurpose cash assistance. The assistance was specifically targeted towards the most vulnerable and drought-affected households. The value of cash transfers was determined based on the latest regionally disaggregated transfer value rates presented by the Somalia Cash Working Group dashboard in September 2022. The cash transfers were made through mobile money, which was deemed the most appropriate method for Cash and Voucher Assistance (CVA), as approximately two-thirds of households own mobile phones, including 59% of nomadic households.

WASH

The severe water shortage caused by the drought has resulted in the complete or almost complete drying of water points, exacerbating the WASH crisis in the three regions. The Somali Red Crescent Society (SRCS) has prioritized the provision of emergency WASH services to communities in late 2021/2022. As a result, WASH activities have reached 443,000 people. The WASH response included hygiene and sanitation promotion campaigns which have a large reach and a larger number of people were reached with water trucking and fuel subsidies to the motors of 6 strategic boreholes due to acute water needs.

Health/Nutrition

Most of the health and nutrition activities were not funded and are planned for the coming months.



South Sudan Red Cross

 12,776 HHs reached	 7,873 people reached	 12,258 people reached	 213,440 people reached	 2,123 people reached	 101 people reached	 100,000 people reached
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The prevailing drought and floods have resulted in an increased need for cash assistance, leading to the revision of the target beneficiaries from 4,000 to 15,000 households. The National Society (NS) has supported 12,776 households with multipurpose cash, with each household receiving 40,000 SSP (equivalent to 100 USD). The International Federation of Red Cross and Red Crescent Societies (IFRC) has supported the SSRC to tender for a new Food Security Program (FSP) for at least two years, with consultation held at the national level with in-country PNSs before final selection was done.

In terms of health and nutrition, 48,030 people from 9,606 households have been reached through health education sessions on the prevention of communicable diseases, especially cholera. These sessions were integrated with hygiene promotion sessions, which included ongoing messaging related to COVID-19.

To ensure access to safe drinking water, 23 boreholes have been rehabilitated, reaching 11,500 people (based on 500 people per 1 borehole in emergencies). The last update reported the establishment of 23 water management committees, which have been engaged in raising awareness of safe drinking water. Moreover, hygiene promotion sessions have been conducted for 29,645 people, mostly by 153 trained volunteers and 15 water management committees. The messaging in these sessions covered treating water, personal and communal hygiene, and general sanitation.

Additionally, 22,479 households have received emergency household items, including water buckets, jerricans, and support from movement partners, including ICRC, Danish RC, Turkish RC, Norwegian RC, and Swedish RC. The distribution of 4,000 water buckets as part of the emergency household items was accompanied by education sessions on the proper use of the items distributed.

Lastly, during the distribution of emergency household items, 908 women and girls have received menstrual hygiene and dignity kits, ensuring their hygiene needs are met.



جمعية الهلال الأحمر السوداني
Sudanese Red Crescent Society

Sudanese Red Crescent



5,400
people
reached

Cash transfer assessments have been conducted in Red Sea and Kassala to determine the most appropriate and feasible modality and mechanism. The tender process for selecting a Financial Service Provider (FSP) has been completed, and the process of opening bank accounts has been initiated. Recruitment of Cash and Voucher Assistance (CVA) staff is underway, with interviews and selection scheduled in the coming weeks.

Due to budgetary limitations, the focus will be on cash transfers. Health needs have been identified in the mountainous area of Kamosana, where the quality of outreach clinics needs to be improved to reach the population with no road access. To aid the movement of health staff carrying medicines, the purchase of a camel has been recommended. In Kassala, where ICRC has a presence, assistance is planned for 2023 in the health sector.

In the Red Sea, WASH needs have been identified, including the rehabilitation of the community solar system and toilets in the health facility to improve hygiene for the general population in Komasaana. During the general familiarization of the intervention areas and meetings with communities in Rural Kassala and Al Guna in Red Sea, it was observed that men are seen as the head of families and primary decision-makers. However, women have a strong say in domestic decision-making. Therefore, it is important to ensure that any program does not disadvantage or place an extra burden on any one gender, especially women, through consideration and consultation.



Zimbabwe Red Cross



25 people
reached

In Mwenezi District, 20 volunteers (14 female, 6 male) trained in Cash and Voucher Assistance (CVA), health and nutrition, water, sanitation and hygiene (WASH), Community Engagement and Accountability (CEA), Protection and Gender Inclusion (PGI), and Red Cross Red Crescent (RCRC) principles and guidelines registered 850 households (519 male-headed and 331 female-headed) consisting of 4,127 beneficiaries (1,886 female and 2,241 male) for CVA.

Market assessments conducted in the area revealed that the markets are functional and accessible, and consumer behavior is stable. While there are currently no ongoing cash projects, demand is expected to increase due to the upcoming Cash Assistance, which may lead to local inflation and business malpractices. Despite a drought in the area, the shock did not affect the supply chain of both food and non-food commodities. Retailers and wholesalers have the capacity to increase their supply based on demand, sourcing most goods locally as well as from neighboring South Africa. The main commodities consumed are mealie meal, rice, beans, kapenta, sugar, salt, cooking oil, cabbage, tomato, and onion, with prices remaining constant for the past 6 months. The upcoming Cash Assistance is expected to boost the market, but it was clarified to business operators that no additional support would be provided.

During the registration process, the Ministry of Health and Child Care (MoHCC) assisted the Zimbabwe Red Cross Society (ZRCS) with Mid-Upper Arm Circumference (MUAC) assessments, which identified and screened 226 children for malnutrition. Out of these, 33 were recruited to the program and referred to local clinics and relevant authorities for further assistance and support. Nutrition messaging was also provided at all outreach points, covering exclusive breastfeeding, complementary feeding, hygiene, and Covid-19.

There have not been any significant WASH activities during the reporting period, save for preliminary WASH monitoring during the beneficiary registration process. The ZRCS team noted a dire WASH situation within the communities due to limited access to clean and safe water, with some households resorting back to traditional water sources such as riverbeds, a practice known as "mufuku" in Shona. Preliminary interviews with the local communities and leadership indicated that some boreholes have broken down completely while others are not fully functional, highlighting the need for a thorough qualitative and quantitative WASH audit and needs assessment.

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Reference documents



Click here for:

- [Previous Appeals, Operational Strategies, and updates](#)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter, and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate, and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.