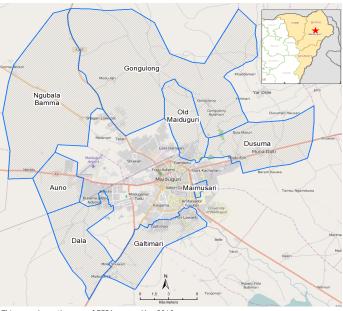


# Nigeria Maiduguri, Borno State

May 2016: Emergency Food Security Assessment

### **HIGHLIGHTS**

- **◊ IDPs food insecurity and malnutrition are significantly higher than for host populations**
- ♦ CH/IPC-compatible classification of the EFSA data indicates that acute food insecurity is at Crisis (CH/IPC Phase 3) in Maiduguri, with a smaller proportion of households in Emergency (CH/IPC Phase 4)



WHAT: Emergency Food Security Assessment;

**WHY:** To better understand the food security and nutrition situation of IDPs and Host Populations Households;

WHERE: Maiduguri 7 out 8 Wards were covered;

WHEN: May 16 to May 26 (Data Collection);

**HOW:** Two methodologies were used, the CARI console and

the CH/IPC;

**SAMPLING:** Random selection of households was attempted. 809 households out of the planned 900 households were interviewed (373 IDPs and 436 Host populations);

**LIMITATION:** Due to insecurity, 7 out 8 Wards were covered; Given the time and security limitation, purposive sampling of households was applied.

This map shows the area of EFSA survey May 2016

# Methodology and Main Findings

⇒ The Food Security Classification (CARI)

**CARI** was calculated using the food consumption score, share of food expenditure and coping strategies.

The overall prevalence of food insecurity stands at **52 percent**, of which **5 percent** is severe food insecurity. IDP households' food insecurity stands at 65 percent, of which 6 percent is severe food insecurity. Host populations food insecurity stands at 41 percent, of which 5 percent is severe food insecurity.

The most severely food insecure households are located in Auno (11,7 percent) and Ngubala Bamma (8,5 percent) Ward where there are more IDPs.

⇒ CH/IPC-compatible classification

An analysis of the data, to provide indicative *Cadre Harmonisé* (CH)/Integrated Food Security Phase Classification (IPC)-compatible outputs from the survey, was also conducted. To do this, individual households were classified using the HHS, FCS, rCSI, and livelihoods coping indicators.

- A table of the 45 possible food consumption outcome indicator combinations was created, and each combination was assigned a classification based on the food consumption thresholds provided by either the CH/IPC reference tables or the FANTA/FEWS NET indicator study in the case when IPC thresholds did not exist.
- ♦ The individual households surveyed were then grouped in the food consumption indicator table, and given a final household indicative classification based on the results of livelihoods coping responses using categories provided by the *Cadre Harmonisé*. The proportion of households in each Phase was then summed. Using the CH/IPC area classification protocol, information on malnutrition from the survey was then considered.

Survey results for malnutrition corroborate an indicative classification for the survey area in **Greater Maiduguri** of Crisis (CH/IPC Phase 3) acute food insecurity in May based on the EFSA survey results. Results also indicate a number of households were facing larger gaps in their basic food needs and in Emergency (CH/IPC Phase 4).

# More than half of the surveyed household do not have access to an adequate diet. *IDPs food security significantly more dire than host populations.*

Overall, 44 percent of interviewed household have an acceptable food consumption score, 26 percent have a borderline food consumption score and 30 percent have a poor food consumption score (38 percent for IDPs and 23 percent for host populations). The average diet of IDP households consisted primarily of cereals, vegetables, oil and some pulses. IDP households consume practically no meat, dairy, fruits and sugar. The average diet of host populations differentiated themselves by consuming meat and fruit on average one day out of the week and twice as much pulses as IDP households.

Table 1: CARI console

Domain		Indicator	Food Secure (1)	Marginally Food Secure (2)	Moderately Food Insecure (3)	Severely Food Inse- cure (4)
Current Status	Food Consumption	Food Consumption Group	44.3		26	29.8
Coping Capacity	Economic Vulnerability	Food Expenditure Share	35.8	21.9	16.5	25.7
	Asset Depletion	Livelihood coping strategy categories	30.8	18.9	24.1	26.2
Food Security Index			4.3	43.4	46.8	5.4

## **Coping Strategies**

Overall, 31 percent of households indicated that they did not use any coping strategies, while 21 percent of households indicated that they used stress strategies (like borrowing money or selling household assets), 24 percent used crisis strategies (like selling productive assets) and 26 percent (significantly high ) used emergency strategies.

IDP households' emergency strategies were significantly higher than host populations (32 percent vs 21 percent). The most vulnerable IDP women and children spend their days begging in the Maiduguri markets while the IDP men make themselves available for small jobs that seldomly come.

## **Nutrition Situation: MUAC (Mid-Upper Arm Circumference) analysis**

#### **Nutrition - Children 6-59 months**

- ♦ The rate of global acute malnutrition measured with a yellow + red MUAC is 8.3 percent (9.5 percent for IDPs, and 7.5 percent for host population), considered a medium prevalence.
- Although the global acute malnutrition remains below 10 percent, the percentage of children with a red MUAC (indicating a high risk of mortality) is above the emergency threshold both in IDPs and host communities, indicating the need for access to therapeutic treatment and prevention.
- ♦ The 6 to 23 months old age group is more affected by malnutrition than children aged 24 to 59 months.

#### Nutrition - Mothers 15 to 49 years

- ♦ In IDP households, 9.5 percent of mothers are malnourished (MUAC under 21 cm). This level goes up to 15.9 percent for pregnant or lactating mothers.
- $\diamond$  In host population households, 2.1 percent of mothers are malnourished. This level goes up slightly for pregnant or lactating mothers.
- Displaced pregnant and lactating mothers are much more affected by malnutrition than mothers who are not pregnant nor lactating, representing a very vulnerable group.



For more information, please contact:

WFP Regional Bureau Dakar, VAM Unit rbd.vam@wfp.org

FEWS NET West Africa Regional Office

fews.west@fews.net