

RIASCO ACTION PLAN FOR SOUTHERN AFRICA

REVISED REGIONAL RESPONSE PLAN FOR THE
EL NIÑO-INDUCED DROUGHT IN SOUTHERN AFRICA



DECEMBER 2016 - APRIL 2017
REGIONAL INTER-AGENCY STANDING COMMITTEE
(RIASCO)



Cover Photo:

People are dividing pulses among themselves during a food distribution in Chikwawa district, Malawi. The food distribution is done by World Food Programme and World Vision International, on behalf of the Government of Malawi.

Credit: OCHA/Tamara van Vliet

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KEY MESSAGES

El Niño conditions persisting during the 2015/16 planting season have caused the worst drought in 35 years in Southern Africa, resulting in a second consecutive failed harvest. This has created severe food shortages and compounded existing vulnerabilities. Since July 2016, Namibia and Botswana have declared national drought emergencies, in addition to the declarations made earlier by Lesotho, Malawi, Swaziland and Zimbabwe. Madagascar issued a letter of solidarity with the SADC Appeal, and Mozambique has maintained a red alert in affected areas.

Southern Africa is now entering the peak of the crisis. Subsistence farmers' meagre April 2016 harvest had largely been depleted by October. The next harvest is five months away in March/April 2017. Almost 513,000 children need treatment for severe acute malnutrition, 780,000 children for moderate acute malnutrition, and more than 3 million children still have reduced access to safe drinking water as a direct result of the drought. People targeted for humanitarian assistance will increase from 12.3 to 13.8 million during the January to April 2017 peak of the lean season, mainly due to rising needs in Malawi, Madagascar and Zimbabwe. Even with the generous funds received to date, many countries are facing a growing gap between needs and assistance levels.

Funding from international development partners and national governments has saved lives, protected livelihoods and helped reduce human suffering. As of November 2016, US\$757 million have been raised for the humanitarian programmes in the RIASCO Action Plan. This funding has allowed WFP and partners to reach 6.6 million people in October and plan for 9 million in November with food and cash assistance. UNICEF and partners have treated more than 82,000 children for severe acute malnutrition and reached more than 790,000 people with clean water. More than 175,000 households (875,000 people) have received crop and livestock inputs from FAO. National social protection programmes have been strengthened and cash transfer programmes expanded to stimulate local markets. National and international NGOs, as well as IFRC and local Red Cross societies, have played an indispensable role in the response.

Humanitarian assistance across the region is being scaled up. Subject to availability of resources, WFP expects to reach 13 million of the food insecure people in January. FAO is planning to reach a total of 800,000 households (3.1 million people) with agriculture and livelihood support between December 2016 and January 2017. During the coming months, UNICEF will work with partners to reach some 513,000 severely malnourished children with lifesaving treatment and to provide water, sanitation and hygiene for over 4.6 million children and their families who are in need of critical support. UNICEF and partners will also continue to support countries to secure education for 1.9 million affected children, to provide protection and care for over 5 million vulnerable children, including through reinforcing and scaling up social cash transfer programmes.

The El Niño phenomenon has disproportionately affected women and children, exacerbating existing protection threats and vulnerabilities and creating new ones, adding another layer of negative coping mechanisms such as transactional sex, which increases vulnerability to sexually transmitted and HIV infections. Children are dropping out of school due to lack of water and food and entering into child labour or early marriage. In the 7 RIASCO countries, over **4 million children** are in need of support to make sure they remain in school.

Southern Madagascar is of particular concern as maize, cassava and rice production decreased by as much as 95 per cent compared with 2015. An estimated 845,000 people are in either Emergency (330,000 in IPC Phase 4) or Crisis (515,000 in IPC Phase 3). The Madagascar humanitarian response plan is only 29 per cent funded.

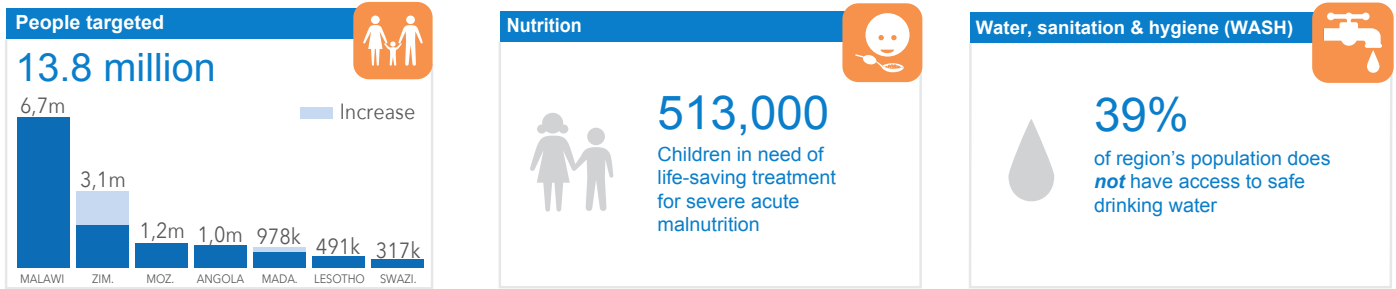
The impact of El Niño-induced drought is exacerbated by weak commodity prices, unfavourable exchange rates and slow economic growth. In Malawi, the fourth poorest country in the world, per capita income is actually declining while food prices have increased to 172 per cent above the five year average. The fragile political and economic situation in several drought-affected countries further limit their governments' capacity to respond effectively to the crisis.

Droughts cannot be prevented from occurring, but they should not result in humanitarian emergencies. Alongside humanitarian assistance, the RIASCO Action Plan includes a range of practical options to build resilience. Focus should be on the development of sound national policies and strategies, expanding coverage and strengthening social safety nets, promoting climate smart agriculture, reinforcing early warning systems and improving the management of water and other natural resources. Further investments in these areas, combined with solid fiscal and other risk management instruments at national and regional level, are required to build resilience.

Critical remaining funding gaps need to be met between December 2016 and April 2017. \$1.3 billion is required to assist 13.8 million people in 7 priority countries between May 2016 and April 2017, up from \$1.2 billion. To date \$757 million have been provided, leaving a \$550 million gap. The sectors of WASH, Health, Education, Protection and Nutrition remain especially underfunded.

Without additional funding, critical humanitarian needs will not be met. Millions of the most vulnerable will not receive full rations, hundreds of thousands of children are at risk of irreparable damage from undernutrition and risk dropping out of school, health centres cannot provide the most essential services as drought-related illnesses increase, and farmers will not be able to fully resume agricultural production.

KEY FIGURES



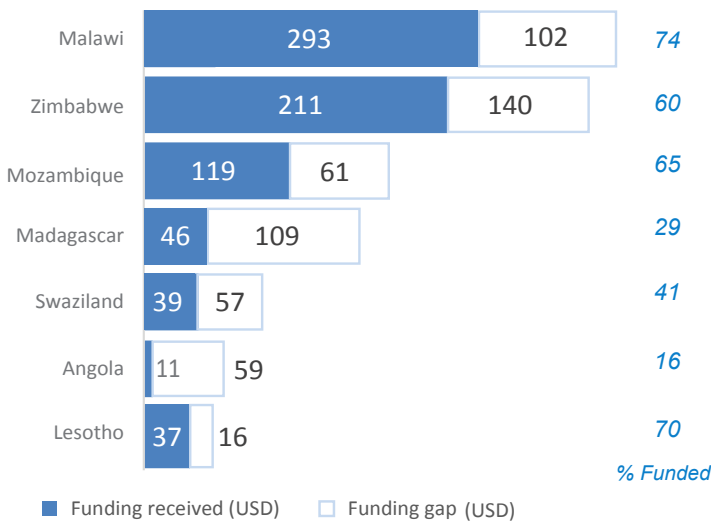
RIASCO FUNDING

\$1.3 billion
REQUESTED (US\$)

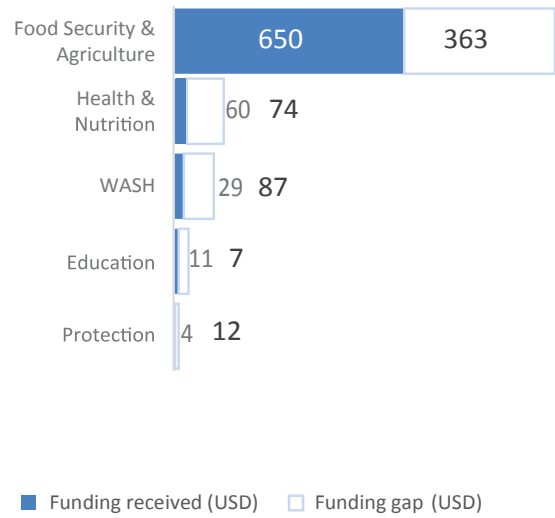
57.9%
FUNDED

\$757 million
RECEIVED

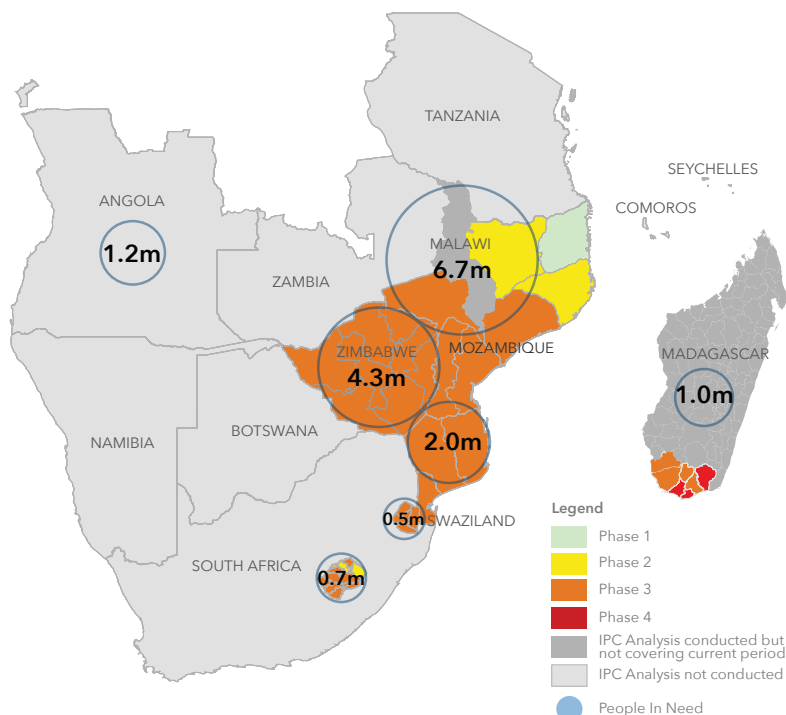
Requirements by country (million \$) % funded by country



Funding by sector (million \$)



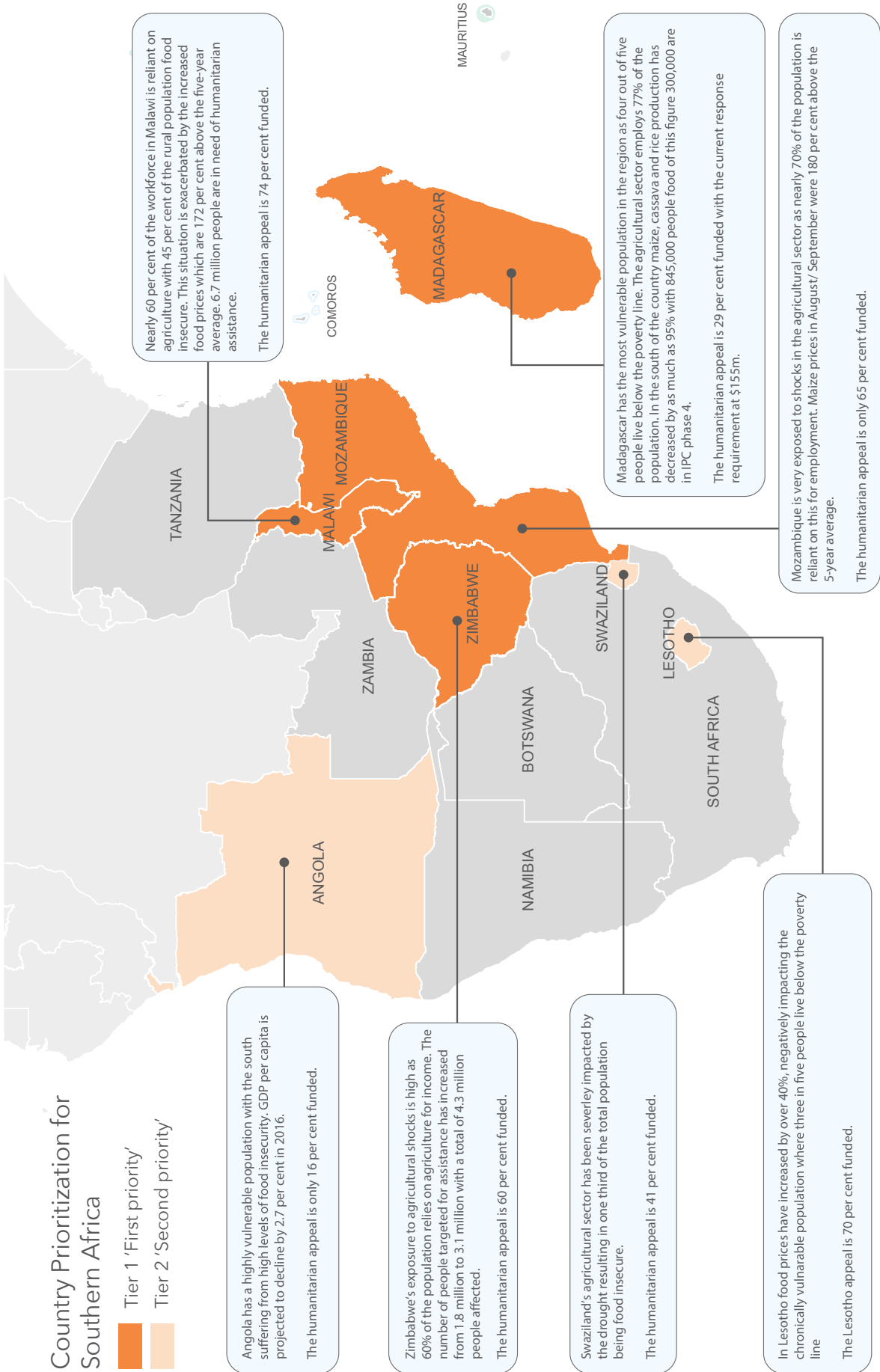
IPC DATA ON PEOPLE IN NEED



PRIORITIZATION OF 7 SOUTHERN AFRICA COUNTRIES

Country Prioritization for Southern Africa

- Tier 1 'First priority'
- Tier 2 'Second priority'



SITUATION OVERVIEW

This document is a revision of the Regional Inter-Agency Standing Committee (RIASCO) Action Plan published in July 2016¹. It is in support of the Southern African Development Community's (SADC) Regional Appeal for Humanitarian and Recovery Support². The Action Plan was developed in three pillars: a humanitarian pillar setting out the immediate needs for initially 12.3 million people and now revised to 13.8 million people in 7 priority countries totaling \$1.3 billion over 12 months; a resilience pillar to be undertaken in parallel to humanitarian efforts; and a macro-economic pillar which sets out policy options for governments to address the long term impacts and risk management of the regional drought crisis.

The El Niño conditions that persisted during the 2015/16 planting season have caused the worst drought in 35 years in Southern Africa, resulting in a second consecutive failed harvest, reducing food availability by 15 per cent compared to the 5-year average. As a result, the Region has recorded cereal and maize deficits of 9 million tons and 5 million tons respectively. Food prices in the region have risen substantially by 172 per cent in Malawi and 180 per cent in Mozambique, compared to the 5-year average.

The humanitarian impact extends beyond food insecurity, including increased levels of malnutrition (in Malawi, both severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) admissions have almost doubled), and reduced access to water which in turn has led to an increase in migration, according to UNICEF study in Angola, DRC, Lesotho, Malawi, Mozambique and Zimbabwe. Development gains could also be reversed – reduced school attendance, increased incidence of HIV and rising poverty levels.

Many children have dropped out of school as a result of the drought. In Madagascar, the dropout rate in primary schools is up to 40 per cent in most affected communities. A total of 860,449 children, especially girls, are out of school in Lesotho, Malawi, Mozambique and Swaziland as a consequence of the drought.

Moreover there has been an increase in disease burden and mortality rates. Several communicable disease outbreaks have been recorded: cholera (Malawi, Mozambique, Zambia and Zimbabwe), typhoid (Malawi and Zimbabwe), diarrhea (Lesotho, Malawi, Mozambique and Swaziland) and dysentery (Zimbabwe). Increased rates of sexual abuse and negative coping mechanism such as exchanging sex for food has led to unwanted pregnancies, gender-based violence and an increasing incidents of sexually transmitted infections, HIV and Aids. In addition, in Malawi, Lesotho and Swaziland higher mortality in food insecure anti-retroviral treatment (ART) clients has been reported.

Chronic vulnerability in Southern Africa has increased the impact of the drought. Due to high levels of income inequality economic growth has not always translated in a reduction of poverty, which exceeds 50 per cent in seven countries in the region. Small-scale non-irrigated low productive agriculture is the main source of employment in most of the economies of Southern Africa. The lack of irrigation is compounded by the lack of diversified cropping, with maize the most important field crop and the main food. This has led to soil-depletion, an undiversified diet and high levels of vulnerability to climatic shocks. Recent missions by an OCHA Gender Standby Capacity Project Advisor found that depletion of water, pasture and food due to El Niño drought led to the increase in the time spent by women in rural and urban households while searching for food and water.

1 <http://reliefweb.int/report/world/riasco-action-plan-southern-africa-response-plan-el-ni-o-induced-droughtsouthern>

2 <http://reliefweb.int/report/zimbabwe/sadc-regional-humanitarian-appeal-june-2016>

COMPOUNDING SHOCKS

The humanitarian impact is compounded by communicable disease outbreaks, economic shocks as well as the risk of civil unrest and conflict, especially in those countries going through political transition.

Southern Africa is also experiencing a variety of economic difficulties not related to the drought. Weakened commodity prices and export volumes and tighter financial conditions, exacerbated by domestic pressures arising from policy uncertainties, adverse weather conditions, and political and security concerns, have continued to weigh on economies. Real gross domestic product (GDP) growth in the SADC region is set to slow to 1.6 per cent in 2016, while GDP per capita growth is set to decline by 0.4 per cent, in part due to rapidly growing populations.

Public health and the risk of communicable disease spread is also a concern. Schools and hospitals struggle to operate without water, as is being seen in Swaziland, where 80 per cent of schools are experiencing a water and sanitation crisis, leading to increased incidence and prevalence of morbidity, especially among children, including diarrhoeal diseases and parasitic infection. These negatively influence nutritional status. Mosquito-borne diseases generally increase following dry conditions (malaria, yellow fever, dengue etc.). Increased use of unprotected water sources can lead to increased cases of trachoma, cholera, typhoid and bilharzia.

All countries have been running a fiscal deficit in 2016 with the median fiscal deficit expected to be 4.8 per cent of GDP. Lesotho, Swaziland and Malawi have a deficit exceeding 10 per cent. In addition, government debt is increasing rapidly, especially in Angola and Mozambique. Zimbabwe's liquidity crisis is worsening. Large fiscal deficits and sizeable debt burdens have eroded fiscal space in several countries, limiting the capacity of governments to cope with shocks. The challenge for these countries is to bolster fiscal buffers so as to be able to respond to adverse shocks and to spend on worthwhile infrastructure projects and social programs.

The combination of elections, climatic shocks and economic shocks increase the probability of conflict in the region which require close monitoring. Elections in particular are potential flashpoints that can trigger conflict and humanitarian need as a result. Historically, violence affects between 19 and 25 per cent of elections in Africa. Various elections are due to take place before the end of the year.








Dialogue has started between the Government of Mozambique and the opposition, but both have not been able to reach agreement on the roadmap for power sharing. Continued opposition attacks on road and rail convoys is impacting humanitarian operations in central Mozambique including in supply routes that are used by aid agencies.

CHANGES IN NEEDS SINCE JULY 2016

The overall number of people targeted for assistance through the Action Plan has increased by 11 per cent, from 12.3 million to 13.8 million as we enter the peak of the lean season in the first quarter of 2017. Countries that have shown the greatest increases in food and nutrition insecurity include Madagascar and Zimbabwe. Needs have also increased in Health and Nutrition (by 18 per cent) and most significantly in water, sanitation and hygiene (WASH) (by 28 per cent).


The financial requirements have risen from \$1.2 billion to \$1.3 billion with \$550 million urgently required. Almost all RIASCO priority countries, with the exception of Angola, have now put in place response plans, which form the basis of this document. In Lesotho, Mozambique, Swaziland and Zimbabwe, the Humanitarian Country Teams (HCT) have developed response plans in support of government; while in Malawi and Madagascar, joint HCT-government plans are in place. Mozambique, Madagascar and Zimbabwe have all updated their plans since July 2016.

EL NIÑO-INDUCED DROUGHT IN SOUTHERN AFRICA: FUNDING SITUATION

Country	Funding Required (USD)	Funding Received (USD)	Funding Gap (USD)	% Funding Gap	People in Need	People Targeted	IFRC Funds Requested (USD)	IFRC Funds Received (USD)
 ANGOLA	70,409,614	11,279,900	59,129,714	84.0%	1,213,551	1,000,000		
 LESOTHO	52,641,594	37,012,095	15,629,499	29.7%	679,437	491,198	728,378	595,153
 MADAGASCAR	154,934,800	45,519,448	109,415,352	70.6%	978,000	978,000		
 MALAWI	395,451,811	292,868,276	102,583,535	25.9%	6,700,000	6,700,000	3,554,770	874,313
 MOZAMBIQUE	180,231,870	119,048,492	61,183,378	33.9%	1,500,000	1,209,672	1,685,866	442,618
 SWAZILAND	95,360,000	39,748,100	55,611,900	58.3%	492,454	317,196		
 ZIMBABWE	352,304,020	211,908,110	140,395,910	39.9%	4,300,000	4,100,000	5,129,508	1,880,186
GRAND TOTAL	1,307,433,709	757,384,421	550,049,288	42.1%	15,863,442	13,796,066	11,098,522	3,792,270

The main humanitarian donors in this response include USAID, DFID, ECHO, CERF and World Bank. The region has a very narrow donor base, with only a few major donors. The World Bank and the IMF have provided direct support to the humanitarian appeal in some countries, and as some of this is in the form of loans, government are also sharing the burden. In Malawi, for example, development partners have stepped up their assistance to Government, with the IMF providing \$49 million for the importation of maize. In November the Board of the World Bank will review two projects totalling \$160 million: a \$90 million project for disaster recovery, including food assistance and resilience building, and a \$70 million project for Social Protection through the Malawi Social Action Fund.

RIASCO ACTION PLAN PRIORITIZATION

Tier Level	Country	Comments
1	Malawi	Highest Priority
	Madagascar	
	Mozambique	
	Zimbabwe	
2	Angola	
	Lesotho	
	Swaziland	
3	Namibia	
	Tanzania	
	Zambia	
4	Botswana	
	South Africa	
5	Mauritius	Lowest Priority
	Seychelles	
	Comoros	

Given finite resources, there is a need to prioritize the international humanitarian intervention by using available evidence about existing vulnerabilities, exposure to climatic change, the impact of the drought, and the capacity of governments to respond. This RIASCO Action Plan revision updates the prioritization model presented in the original document by incorporating new data on exposure and impact (changes in food prices and agricultural output and number of food insecure) and government coping capacity (national debt and fiscal balance), as well as humanitarian funding received.

Madagascar has been moved up to tier 1, the most severe classification, due to the significant number of people in Emergency (IPC Phase 4) in the south of the country and the limited funding received for the humanitarian appeal, which increased to \$155 million but is only 29 per cent funded (for more information on prioritization, please see Annex 1).

THE RESPONSE FROM JULY TO NOVEMBER 2016

Since July 2016, humanitarian assistance across the region has been scaled up significantly by governments, the UN and NGOs. IFRC is currently appealing for a total of \$11.1 million to support 99,097 people in Lesotho, Malawi, Mozambique, Namibia, and Zimbabwe, where the most vulnerable people are primarily being supported through mobile cash transfers. The response will continue to ramp up until April 2017.

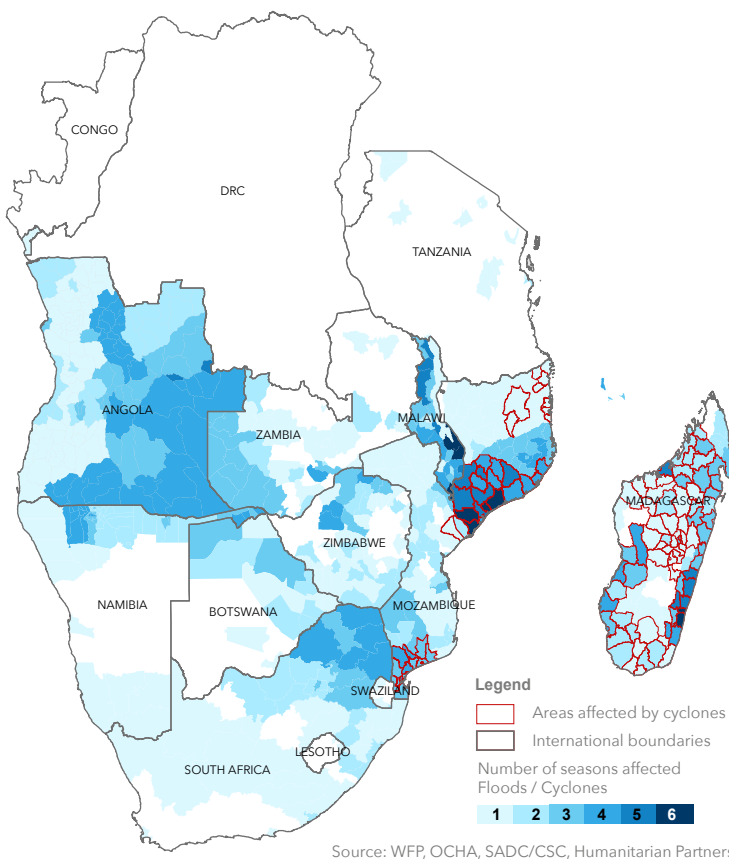
Sector	Key activities undertaken
Food security	9 million people received food and cash assistance in November
Agriculture and livelihoods	More than 175,000 households (875,000 people) received crop and livestock inputs
Nutrition	More than 82,500 children have been treated for severe acute malnutrition
WASH	<ul style="list-style-type: none"> More than 790,000 people have been reached with clean water Almost 1 million people have received information on hygiene promotion
Health	<ul style="list-style-type: none"> In Angola, Malawi and Swaziland, 368,512 children were vaccinated against measles 100,000 people have been reached with HIV education and services

Education	<ul style="list-style-type: none"> • Emergency school meals are being provided to more than 110,000 children in Mozambique and to 219,500 children in Madagascar • In Lesotho, 15 schools (3,750 learners) have been provided with access to clean water and toilets through the rehabilitation of existing, or installation of new, systems and about 300 primary schools have been trained on Climate Change, Sustainable Land Management, Conservation Agriculture and Home Gardening and Nutrition.
Protection	In Zimbabwe, more than 23,000 children have received emergency child protection services

OUTLOOK

According to SADC³, the rainfall season has started well in the southern parts of the region, but rainfall in the northern areas, particularly northern Zambia, has been delayed. While not yet a cause for concern, monitoring is required, and if the delay continues farmers should be encouraged to plant short-term crop varieties. The forecast is still that most SADC countries will have normal to above-normal rainfall in the coming months, meaning that if properly supported, the April 2017 harvest can initiate livelihood recovery. However, concerns have been raised regarding farmers’ ability to access inputs (including seeds) this season in drought-affected areas, as many households have experienced a significant erosion of purchasing power.

HISTORICAL SOUTHERN AFRICAN FLOOD AFFECTED AREAS



Humanitarian needs are likely to persist beyond the timeframe of the Action Plan and the next harvest in April 2017. Post-harvest assessment data will be available in June 2017 in most SADC countries, which will provide an opportunity to review humanitarian needs.

With good rains expected, there still is a high probability of flooding, which every year affects hundreds of thousands of people and displaces tens of thousands across Southern Africa, especially in Malawi, Madagascar and Mozambique. The latter two are also at risk of cyclones, particularly between December and March. It is therefore imperative to prepare. High risk countries are already undertaking preparedness activities for the flood season, with contingency planning ongoing in Zimbabwe, Malawi, Madagascar and Mozambique.

3 <https://www.humanitarianresponse.info/en/operations/zimbabwe/document/sadc-agromet-update-issue-02-2016-2017>

RESILIENCE: BREAKING THE CYCLE

Immediate life-saving humanitarian action needs to be combined with a range of practical options to address systemic issues necessary to avoid repeated shocks and build resilience. The objective of the RIASCO Action Plan is to break down traditional siloes typical of emergency responses, and encourage governments, humanitarian relief agencies, and development partners to work together to meet the immediate humanitarian needs whilst also taking into account the need to build the resilience of the affected population to better handle future shocks. Furthermore, a range of macro-economic and risk management instruments are required to better enable the countries of the region to respond to such crises now and in the future. This can be achieved, inter alia, through the following:

- i. Building buffers:** Addressing food crises requires fiscal and foreign currency resources, to finance food aid, reduced food taxes, and social programs. Retention of sufficient fiscal and foreign exchange reserves, which fundamentally requires saving in good times to counter-cyclically smooth public spending in bad times. Related to such sound fiscal management is the capacity to borrow externally without compromising debt sustainability.
- ii. Economic and productive diversification:** Most of the rural populations in Southern Africa are dependent on the extractive use of natural resources through farming, fishing, crafts, and the harvesting of forestry products. In addition there is overdependence on maize as a single, soil-depleting crop, which is vulnerable to drought. Due to technological gaps, poor physical infrastructure, inadequate support services, dependence on rain-fed agriculture as well as the eroding impact of frequent shocks (such as drought, floods, transboundary pests and diseases), vulnerable farmers' production capacity is extremely low, relegating households and communities to a perpetual life of subsistence. There is an acute need for economic diversification (adopting a wider range of economic activities, e.g. off-farm income), as well as productive diversification to reduce the overdependence
- iii. Building on existing social protection systems:** The region has a basic network of social protection systems that provide cash to the most vulnerable, though efficiency, coverage, and targeting can be improved. Where markets are functioning and basic supplies are readily available, governments and partners can provide emergency cash assistance through such existing systems. In the medium to long term improvements to the systems contribute to increased resilience and societal ability to either prevent a crisis or cope with the next crisis.
- iv. Disaster risk reduction, early warning systems, climate change adaptation:** Early warning systems can enhance the preparedness of decision-makers and private individuals for climate-related natural hazards and their readiness to harness favourable weather conditions. Early warning systems for climate-related natural hazards need to have not only a scientific and technical basis, but also a strong focus on the people exposed to risk. Developing capacities in this regard at all levels can enhance the preparedness of decision-makers and individuals to respond and manage climate-induced risk. Schools offer a very effective entry point for capacity development in hands-on disaster risk reduction and climate change adaptation for more resilient communities.
- v. Ensuring women and girls are both leaders and targets of humanitarian assistance.** Ensuring women and girls and their specific needs are integrated across emergency response is essential to reaching the most affected populations. Women and girls make up the majority of the agricultural sector in most affected countries, face increased barriers to service provision and support, are at risk of violence and exploitation, and have particular reproductive health needs that are both exacerbated by poor nutrition and increase the

rates of malnutrition, poor health and death.

vi. National resilience frameworks and strategies are put in place in all priority countries to ensure a coherent and integrated approach to resilience. In addition they ensure that sufficient government revenue is allocated and links the resilience agenda to the budget execution.

vii. Land, water and natural resource management: Water and weather, the delicate balance between evaporation and precipitation, is the primary cycle through which climate change is felt. The World Economic Forum ranked water crises as number 1 in its 2015 assessment of global risks, with potential to cause damaging economic and social impacts across entire countries and sectors. Nature-based solutions such as mangroves protecting shorelines from storms, lakes storing large water supplies, floodplains absorbing excess water runoff, are a key part of this strategy RIASCO Action Plan, which aims to forge closer linkages between humanitarian and development responses and encourage governments, humanitarian relief agencies, and development partners to work together to reduce vulnerabilities to recurring drought. The three pillars of the plan provide an integrated approach to building the resilience of the affected populations, of institutions and of systems to better handle future shocks and protect development gains.

The UN Special Envoys on El Niño and Climate appointed by the UN Secretary General in May 2016 have called attention to the need for an integrated response to the impact of El Niño. They have identified a more preventative approach that will build long term resilience presented in a Blueprint for Action. Still under development, the blueprint will identify building blocks that can form the basis of a transformational shift in approach and necessary systemic change.








PILLAR 1: HUMANITARIAN RESPONSE

The humanitarian pillar of the RIASCO Action Plan for Southern Africa represents the consolidated priority humanitarian needs, response plans and funding requirements of the seven Southern African countries that require urgent international assistance: Angola, Lesotho, Madagascar, Malawi, Mozambique, Swaziland, and Zimbabwe. The regional humanitarian plan has been prepared in close coordination with the Resident Coordinators, the Humanitarian Country Teams (or equivalent), the humanitarian sectors, and government representatives in these seven countries. The humanitarian needs and response included in the RIASCO Action Plan supports the needs identified in the SADC Appeal.

REGIONAL SECTORAL ANALYSIS


The following section will provide a regional sectoral overview of the humanitarian impact, response and current needs related to the El Niño-induced drought.

SECTORAL FUNDING DATA

SECTORS	People in Need	People Targeted	People Reached	Funding requirement	Funding received	Outstanding Funding Gap	Funding Gap
 COORDINATION	-	-	-	\$8,894,582	\$1,286,061	\$7,608,521	86%
 EDUCATION	4,118,263	1,921,617	440,285	\$18,490,669	\$11,563,228	\$27,105,585	70%
 FOOD SECURITY AND AGRICULTURE	15,634,675	14,700,103	4,353,292	\$1,013,146,026	\$650,016,632	\$363,129,394	36%
 HEALTH AND NUTRITION	11,145,981	5,264,539	872,503	\$134,288,850	\$60,273,583	\$74,015,267	55%
 MULTI-CLUSTER	-	-	-	-	\$1,485,872	(\$1,485,872)	0%
 PROTECTION	10,082,897	5,117,114	357,090	\$15,619,332	\$3,718,367	\$11,900,965	76%
 WASH	8,412,935	4,678,600	1,314,671	\$116,994,250	\$29,040,678	\$87,953,572	75%
TOTAL				\$1,307,433,709	\$757,384,421	\$550,049,288	42%

Multi-sector funding is available in Madagascar and Zimbabwe; Coordination funding is in Angola, Lesotho, Madagascar, Malawi, Swaziland and Zimbabwe; Early Recovery funding is available Lesotho, Madagascar and Mozambique

FOOD SECURITY, AGRICULTURE AND LIVELIHOODS

 FOOD SECURITY AND AGRICULTURE						
COUNTRY	People in Need	People Targeted	Funding Requirement	Funding Received	Funding Gap	Funding Gap
ANGOLA	1,213,551	1,000,000	\$22,500,000	\$3,030,181	\$19,469,819	87%
LESOTHO	679,437	491,198	\$43,477,256	\$34,172,800	\$9,304,456	21%
MADAGASCAR	978,000	978,000	\$103,873,900	\$26,743,496	\$77,130,404	74%
MALAWI	6,700,000	6,700,000	\$338,305,000	\$265,894,174	\$72,410,826	21%
MOZAMBIQUE	1,500,000	1,209,672	\$151,429,870	\$99,885,592	\$51,544,279	34%
SWAZILAND	492,454	250,000	\$75,000,000	\$32,036,084	\$42,963,916	57%
ZIMBABWE	4,071,233	3,100,000	\$278,560,000	\$188,254,306	\$90,305,694	32%
TOTAL			\$1,013,146,026	\$650,016,632	\$363,129,394	36%

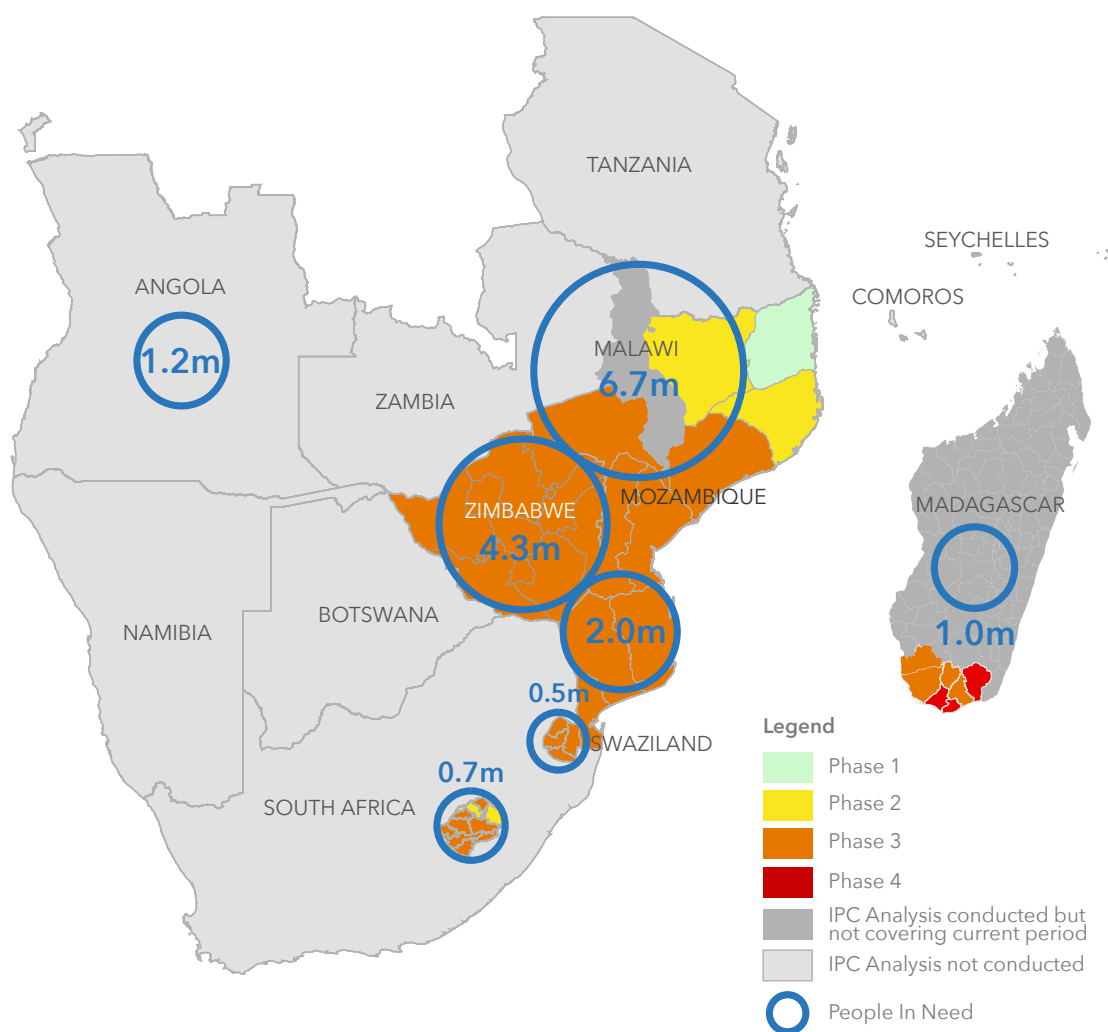
Key messages

- Resourcing needs have increased. Despite the generosity of resource partners, the sector funding is 64 per cent covered.
- With the start of the rainy season there is an urgent need to continue to support efforts of vulnerable rural households for a successful planting season. Short cycle and secondary season crops can provide an essential contribution to incomes and diets of rural communities. It is important to continue efforts to save livestock assets and avoid distress sales and destocking by providing feed and essential veterinary care up to April 2017.
- In some countries commodity vouchers may be the best transfer mechanism come January 2017 in view of market and liquidity constraints.
- Regular and coordinated monitoring of the food and nutrition security situation, vulnerabilities, rains, the upcoming harvest, markets and prices is critical. Monitoring the agricultural situation from now on until June, especially the before and after the upcoming harvest, will be paramount to understand food security needs and vulnerabilities, and inform decision-making for 2017.
- Joint food security analysis should be promoted at all levels - district, national and regional - to initiate the shift to resilience programming, with a more consistent integration of humanitarian and longer term activities. This has to be implemented in close coordination with the other sectors.

Situation update since July 2016

There has been considerable progress made in the adoption by some countries of the Integrated Food Security Phase Classification (IPC). Mozambique this August conducted an IPC Acute Food Insecurity Analysis Update of the March 2016 results and piloted IPC Nutrition. An IPC chronic analysis is planned for early 2017. In Madagascar partners conducted an IPC Acute Level 1 Training and Analysis from 29 September to 03 October in 8 southern districts. Following a joint FAO, FEWS NET and WFP mission to Malawi in September, it has been agreed to boost the capacity of the Malawi Vulnerability Assessment Committee (MVAC) in advance of an IPC acute analysis training between April and June 2017. The plan for IPC in Angola has been put on hold until 2017.

IPC DATA ON PEOPLE IN NEED



Source: FAO, IPC, WFP, Humanitarian partners

In the area of market and urban food and nutrition security assessments, some governments requested technical assistance to conduct national surveys. In Zimbabwe, analysis and reporting of an urban food and nutrition security assessment is now complete; it found that an additional 1.1 million people are food insecure in urban and peri-urban areas. In addition, an inter-agency market assessment is ongoing in 51 rural districts. In Lesotho, data analysis of the urban assessment is expected to inform the lean season response. In Malawi, the MVAC household economy approach (HEA) and market assessments have been finalized but are yet to be officially released by the Government. In Madagascar and Swaziland, market assessments are ongoing to inform feasibility of scaling up cash-based interventions.

Food security regional trends

The lean season started earlier than usual throughout the region and most households have decreased purchase power as incomes from crop and livestock sales have dropped. In parallel, prices have consistently increased, and households are more dependent on the markets for basic commodities.

Remittance-dependent countries such as Lesotho, Zimbabwe and Mozambique have been affected, and will continue to be affected, by fluctuations in currency exchange rates. This will also affect households that depend on remittances from South Africa as well as Botswana and Namibia, whose economies are pegged to the Rand.

Food consumption is very poor for most households across the region. HEA indicators (survival and livelihoods protection), household dietary diversity score, household hunger score, food consumption score, coping strategy index and other consumption indicators used by National Vulnerability Assessment Committees (NVACs) reflect that the majority of very poor and poor households will not have a sufficient diet during the projected period, both in quality and quantity.

Markets and prices

Global commodity markets are currently well supplied with rice, wheat and maize but SADC countries capacity to import will be greatly affected by the macro economic challenges experienced by some countries, such as Mozambique and Malawi. Furthermore white maize, which is the regional staple, is not easily procured from the international market.

Seed availability and requirements for the 2016/17 cropping season

Recent assessments on seed demand and availability indicate significant gaps in the formal seed system, most notably in Madagascar, Malawi and Mozambique. According to a seed security assessment undertaken by ICRISAT and FAO, in most countries farmers are planning to acquire seed and planting materials from own stock, local markets and social networks, being able in this way to partially fill the gap.

However, in Madagascar and Mozambique, although farmers indicated that they will rely on the informal market, the shortage of seed on the formal market will negatively affect the capacity of government and development partners to provide improved seeds and other agricultural inputs. This challenge will be further compounded by the fact that most countries did not adopt the SADC Seed Harmonised regulations which facilitate the movement of seed among countries.

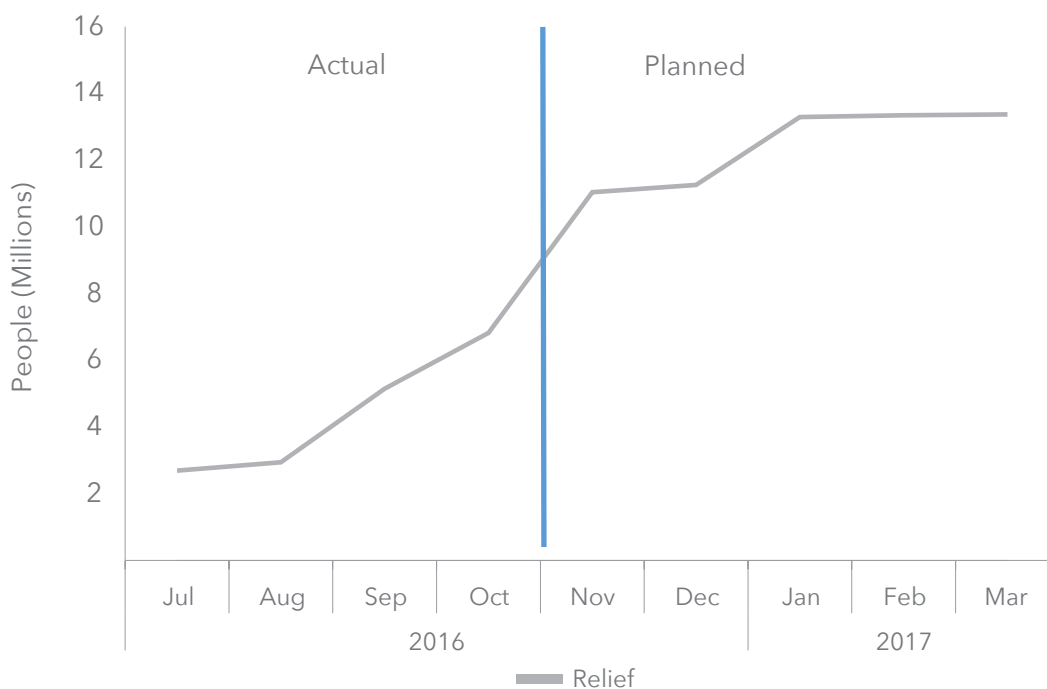
Food security response July - November 2016

Already before the launch of RIASCO Plan of Action (July 2016), food security partners had started scaling up their activities, while at the same time fundraising and planning for the peak lean season. Coordination between Government, UN and NGOs has been enhanced at the country level, particularly in Madagascar and Mozambique.

Food assistance

A combination of food and cash transfers is being provided by Government, WFP and NGOs throughout southern Africa.

WFP: NUMBER OF ACTUAL AND PLANNED BENEFICIARIES REACHED IN SOUTHERN AFRICA



Note: This chart excludes Zambia and Angola

Agriculture and livelihoods

The RIASCO response plan targeted 1,035,186 households (5,175,930 people) with livelihood assistance to enable affected households to produce their own food and protect their assets.

To date, FAO has supported more than 175,000 households (875,000 people) with crop and livestock inputs. Crop-based interventions include supporting seed production, distribution of crop and vegetable seeds and planting materials, tools and fertilizer. Livestock activities include support for forage production, provision of feed, animal health and restocking with small ruminants. Vulnerable households are also being supported with water-related interventions (irrigation, water point rehabilitation/construction and water harvesting).

Strategy for action December 2016 - April 2017

Food assistance

Although ongoing actions demonstrate the significant progress made and preparations undertaken, it is important to note, however, that the full-scale of humanitarian needs across the region are still to materialize between January and March/April 2017. Food assistance must now reach some 13 million people by January 2017. In all probability, a humanitarian caseload will remain after the harvest and will need further food assistance support.

In Malawi, operations will progressively expand to reach 7 million people by January 2017 (including school feeding). In Madagascar, WFP is currently scaling-up the relief component of its Protracted Relief and Recovery Operations (PRRO) to approximately 1 million on a monthly basis. In Zimbabwe, the plan is to assist up to 1.9 million people by January 2017. In Mozambique, efforts are underway to scale up and expand life-saving MAM treatment, school meals and food assistance to 1.2 million people. In Swaziland, emergency food and cash distributions will reach more than 100,000 severely-drought affected people in November 2016. Cash-based transfers reached 35,000 people in Lesotho in October and relief and resilience capacities are


being strengthened to meet the needs of the 510,000 most vulnerable people by the peak hunger-season, including the use of social protection top-ups.

Agriculture and livelihoods

The window to support households with most of the activities outlined in the original Action Plan is now closed. The response plan for the period between December 2016 and April 2017 will focus on:

- Supporting production of late planting short cycle drought-tolerant rain-fed crops that can be planted in January and early February 2017.
- Assisting smallholder farming communities through the provision of off season (dry season) cropping inputs such as pulses, vegetables, sweet potatoes and tools through in-kind support or cash transfers.
- Promotion of post-harvest management techniques to reduce losses and maximize the use of harvested crops.
- Providing drought-tolerant short-cycle fodder seeds/seedlings and associated inputs to communities to increase fodder production and feeding conditions of livestock.
- Undertaking livestock vaccinations for the control and prevention of trans-boundary and zoonotic animal diseases that are likely to increase in incidence/prevalence during the wet season.
- Promoting livestock livelihood diversification options through restocking programs, including small ruminants, poultry, apiculture, rabbit-keeping, etc.

HEALTH AND NUTRITION

 NUTRITION AND HEALTH						
COUNTRY	People in Need	People Targeted	Funding Requirement	Funding Received	Funding Gap	Funding Gap
ANGOLA	1,213,551	604,800	\$36,630,627	\$5,770,444	\$30,860,183	84%
LESOTHO	69,430	69,430	\$3,182,613	\$423,796	\$2,758,817	87%
MADAGASCAR	850,000	850,000	\$24,491,000	\$5,833,805	\$18,567,195	76%
MALAWI	6,500,000	2,520,000	\$30,195,130	\$23,316,622	\$6,878,508	23%
MOZAMBIQUE	1,460,000	243,113	\$11,706,000	\$11,194,768	\$511,232	4%
SWAZILAND	353,000	317,196	\$2,430,000	\$1,567,251	862,749	36%
ZIMBABWE	700,000	660,000	\$25,653,480	\$12,166,897	\$13,486,583	53%
TOTAL			\$134,288,850	\$60,273,583	\$74,015,267	55%

Because the planning for health and nutrition sectors in Lesotho, Swaziland, and Zimbabwe are conducted jointly, these sectors have been combined for the purposes of overall requirements. See country pages for disaggregated health and nutrition requirements for Angola, Madagascar, Malawi, and Mozambique.

NUTRITION

Key messages

- **In the 7 priority countries 513,000 children⁴** were estimated to need life saving treatment in 2016, as of July 2016 along with 778,000 for Moderate Acute Malnutrition (MAM) (excluding Angola). Although updated estimates are not available for all priority countries, it is believed that the numbers in need of treatment have increased since then as food insecurity, water scarcity, poor hygiene, frequent child illnesses, and the departure of primary caregivers including breastfeeding mothers from the home in search of water, all continue to aggravate the situation for children in most Southern African countries. For example, in Malawi in September 2016 both SAM and MAM cases doubled compared with September 2015.
- Untreated severe acute malnutrition leads to **increased mortality** and further worsens the already record-high **chronic malnutrition** rates seen in many countries currently affected by the drought. This is also a threat to the significant gains made in stemming the AIDS epidemic.

Situation update since July 2016

The estimated numbers of children in need of treatment for SAM in 2016 stands at 513,000 in the seven RIASCO priority countries. In El Niño-affected Southern African countries, people with greater nutritional needs remain most at risk, including young children, pregnant and lactating women (PLW), the elderly and those living with TB and/or HIV. Untreated episodes of severe SAM and MAM expose affected children to increased risk of mortality and lead to a further deterioration of the already high chronic malnutrition rates and may threaten the gains made on the HIV situation. Also, there are currently stock outs of supplies for treatment of acute

malnutrition in some health centres and hospitals.

There is a challenge in obtaining accurate, up to date, representative data on nutritional status of young children and pregnant and lactating women and people living with HIV. Surveys are currently being planned in Malawi, Zimbabwe and Madagascar. Although integrated analysis of nutrition, gender, HIV information in this crisis to further substantiate the impact of El Niño has not typically been done, questions have been integrated into a number of recent representative surveys (e.g. Swaziland, Lesotho and Zimbabwe). Even if and when harvests are made, sick and malnourished children need time and treatment to recover. Furthermore, micronutrient deficiencies in children and pregnant and lactating mothers will not immediately disappear with the harvest, and are likely to worsen during the lean season before the harvesting.

The deterioration in nutritional status of children in the affected countries is likely to have a long lasting, perhaps permanent impact on these children, because even if it does not reach acute severe malnutrition levels, permanent cognitive and growth stunting may worsen. The prevalence of stunting, ranging from 25.5 per cent in Swaziland to 49.2 per cent in Madagascar (from medium to very high) highlights the pre-crisis vulnerability of young children.

Unless emergency nutrition and food security emergency response are HIV-specific and HIV-sensitive, and address the negative synergies of malnutrition with challenges in WASH and common illnesses, the El Niño-induced drought has the potential to reverse gains that have been made through previous HIV and health investments and response in the region.

Inventories show gaps in availability of nutrition assessment tools, recording, therapeutic and supplementary feeds, nutritional supplements, antibiotics, and infection prevention and control and reproductive health commodities.

Nutrition response July - November 2016

Data from the seven RIASCO priority countries (Madagascar, Mozambique, Angola, Malawi, Zimbabwe, Lesotho and Swaziland) indicate that 82,512 children ages 6 to 59 months were treated for severe acute malnutrition January through October 2016 against an annual target of 184,771.

In Madagascar and Malawi, 112,850 children aged 6 to 59 months and 46,733 pregnant or lactating women were treated for moderate acute malnutrition. Food containing micro-nutrient supplements, linked to household food responses, was provided to 336,780 children ages 6 to 59 months and to 149,591 pregnant or lactating women in Madagascar, Malawi, Lesotho and Zimbabwe. Malnutrition admissions have gone up in several countries including Malawi. In September 2016 alone, a total of 4,016 children under age 5 suffering from SAM were treated, representing a 99 per cent increase in admissions compared to 2,012 during the same month in 2015. Admissions for MAM increased by a factor of 2.5 in September 2016 when compared to September 2015.

Screening activities are ongoing in several countries. In Madagascar and Malawi, screening campaigns reached a cumulative 2,730,761 children aged 6 to 59 months between January and August 2016. Screening involves strengthening community-based nutrition and disease surveillance through empowering community health workers to be able to identify malnourished and sick children and adults and refer them for treatment. It also involves procurement of tools for diagnosing malnutrition, which include tapes and scales for measurement of mid-upper arm circumference, weight measurement and height boards. Procurements also include ready-to-use foods (RUTF), therapeutic milks such as F75 and F100, Resomal and other routine medicine

for the treatment of children with severe acute malnutrition in health facilities.

As much as possible, emergency nutritional needs are assessed and responded to in a multi-sector manner that includes food security, WASH, health and HIV. In order not to undermine Government systems, and to build their resilience capacity for emergency response while responding, existing systems and staff are being used, with additional surge capacity as required.

Strategy for action December 2016 - April 2017

Strengthen nutrition information reporting as close to real time as possible and link nutrition and HIV, with a gender sensitive lens, into vulnerability assessment and analysis.

- Ensure that children and PLW are screened for SAM and MAM and referred to treatment facilities when needed for nutritional rehabilitation.
- Stronger efforts are required to reduce rates of death and defaulting in SAM treatment programmes.
- Ensure that children being treated for SAM and MAM are tested for HIV.
- Governments will be supported to reach 377,840 children 6-59 months, 52,476 PLW and 122,943 PLHIV with MAM interventions. Children 6-59 months and pregnant and lactating women from food insecure households in Malawi, Lesotho, Zimbabwe and Madagascar, will continue to be provided with specialized nutritious foods along with cash/vouchers/food and non- food items assistance to prevent a further deterioration of the nutrition situation recognizing the most vulnerable 1000 days.
- Stunting prevention activities will complement the emergency response and help to prevent long term nutritional damage.
- Protect, promote and support infant and young child feeding (IYCF) practices, with a strong component of hygiene and sanitation knowledge and behaviour communication, in the context of high HIV prevalence.
- Offer food for prescription where available to food insecure PLHIV, especially children and pregnant and breastfeeding women.
- Increase knowledge of affected people about nutrition and HIV, and on the importance of consumption of nutrient dense food.
- Promote production of nutrient-dense crops (vegetables and legumes) and small-scale livestock to complement food for prescription interventions
- Prioritise access to clean water and sanitation and improved hygiene practices in areas with high incidence of malnutrition among young children and pregnant and lactating women
- Regional contingency planning and procurement of supplies must continue to ensure that adequate amounts of specialised nutritious foods are available to sufficiently address the needs.
- Strengthen multi-sectoral collaboration and coordination through clusters and other platforms.

HEALTH

Key messages

- In several countries, hospitals and clinics are not able to maintain basic services. In Swaziland the defaulter rate for antiretroviral treatment has increased by 12 per cent and TB defaulters by a much larger amount. In Malawi and Swaziland higher mortality in food insecure anti-retroviral treatment (ART) clients has been reported.
- Several disease outbreaks have been recorded: cholera (Malawi, Mozambique, Zambia and Zimbabwe), typhoid (Malawi and Zimbabwe), diarrhoea (Lesotho, Malawi, Mozambique and Swaziland), dysentery (Zimbabwe), Yellow Fever (Angola) and malaria (Botswana and Madagascar).

Situation update since July 2016

The El Niño event and its consequences have negatively affected human health and access to care and treatment, including directly through injury, morbidity and mortality and indirectly through its effect on the socio-economic and environmental determinants of health (water, sanitation, food security and safety, nutrition, secure shelter, and reduced household income). At least 135 health districts out of 404 were affected by El Niño, including 45/70 in Angola, 7/112 in Madagascar, 25/29 in Malawi, 54/144 in Mozambique, 4/4 in Swaziland, and 15/63 in Zimbabwe.

In several countries, hospitals and clinics are not able to maintain their basic services. Some health facilities face a lack or shortage of water, as well as a lack of essential medicines. For example, in Lesotho water shortages compromised the functioning of health facilities, leading to the suspension of some health services. Pregnant mothers, in some areas of Lesotho and Swaziland, have abandoned routine antenatal and delivery care because of shortage of water. Patients have been required to bring water to the health centres. The loss of revenue caused by drought and the decline in agricultural production has made vulnerable groups less able to reach health facilities due to the distance and the cost of transport. The number of hypertension patients seen in health facilities has declined by about 40 per cent and diabetes patients declined by 53 per cent.

High food prices in the region and an overall economic downturn in many countries including liquidity issues, add another layer of negative coping mechanisms such as transactional sex, which increases vulnerability to sexually transmitted and HIV infections, as well as sexual exploitation and abuse. There are already signs of a deteriorating HIV situation, for example in Malawi and Swaziland where higher mortality in food insecure ART clients has been reported along with breaks in adherence to treatment as well as in prevention of mother to child transmission (PMTCT) services due to the lack of antenatal care. There is indication of increased attrition from HIV treatment and increased risk of transmission.

Patients living with chronic diseases are also defaulting on their medication. A significant reduction in attendance at outpatient consultations at the beginning of the year, compared to previous years, has also been observed.

Health response July-November 2016


Health promotion and child health day campaigns have been carried out in several countries, and where no special emergency funds were available, there was an attempt to reach emergency affected areas with more intensive and extensive measures.

Health promotion and other communication focused on high risk population groups such as children under five years of age, pregnant women and breastfeeding mothers, the elderly, people living with HIV, TB and non-communicable diseases (diabetes, hypertension and cancer), as well as people living with disabilities, has been carried out through development, printing and distribution of posters and leaflets; and public service announcements on television and radio. Ministries of Health have done media briefings, as well as other social mobilization and community engagement activities. These activities are crucial for encouraging timely disease prevention and health care behaviour.

Strategy for action December 2016 - April 2017

- Improve knowledge and practice of community health workers and primary health clinic nurses in the management of neonatal and childhood illnesses (IMNCI), integrated management of pregnancy, childbirth and postnatal care, linkages with integrated management of acute malnutrition (IMAM), HIV, TB and specific attention to drought-related illnesses using national protocols and guidelines.
- Continuous paediatric HIV and PMTCT treatment, community action/ prevention campaign to prevent/ mitigate risks for drought related migration, in particular in relation to gender and HIV.
- Ensure essential supplies and services for pregnancy and delivery and child health supplies are available at all times.
- Scale up coverage of routine immunization services to sustain high coverage of all antigens by reaching every child, including through outreach, and as necessary, through multi-antigen catch-up campaigns.
- Target adolescents and pregnant women in drought affected areas with special monitoring, outreach, referral and care, to prevent increases in sexually transmitted infections, including HIV, and to ensure adequate nutrition and maternal and obstetric care.
- Ensure uninterrupted availability of lifesaving essential medical supplies, particularly those needed to manage disease outbreaks and the ongoing HIV and TB epidemics.
- Strengthen capacities of rapid response health teams and primary health care facilities and teams to respond to patient surges in emergency situations.
- Ensure provision of emergency water and sanitation services in health facilities.
- Provide community-based and referral health services for all emergency medical treatment, outbreak investigation, early case detection, and case management.
- Support community health workers programmes and social mobilization activities to improve health seeking behavior; build trust for the health system, encourage TB and HIV treatment adherence and retention; and reinforce positive health promotion and disease preventive action.
- Support social mobilization to improve health seeking behaviour, build trust in the health system, encourage TB and HIV treatment adherence and retention, and reinforce positive health promotion and disease preventive action.
- Health Ministries' Immediate Disease Notification Systems (IDNS) require updating to include drought-related disease threats. Strengthening surveillance also involves setting up Health and Nutrition Emergency Committees at all levels and equip them for action.
- Support the inclusion of SAM in the integrated disease surveillance system.

WATER, SANITATION AND HYGIENE (WASH)

 WASH						
COUNTRY	People in Need	People Targeted	Funding Requirement	Funding Received	Funding Gap	Funding Gap
ANGOLA	420,000	420,000	\$6,479,215	\$1,074,861	\$5,404,354	83%
LESOTHO	302,507	139,600	\$4,948,030	\$1,661,804	\$3,286,226	66%
MADAGASCAR	850,000	430,000	\$14,549,000	\$4,761,275	\$9,787,725	67%
MALAWI	1,550,000	775,000	\$22,087,500	\$-	\$22,087,500	100%
MOZAMBIQUE	690,428	414,000	\$16,120,000	\$7,731,219	\$8,388,781	52%
SWAZILAND	300,000	200,000	\$14,000,000	\$4,041,420	\$9,958,580	71%
ZIMBABWE	4,300,000	2,300,000	\$38,810,505	\$9,770,099	\$29,040,406	75%
TOTAL			\$116,994,250	\$29,040,678	\$87,953,572	75%

Key messages

- Water scarcity continues to be extremely acute, with people using unprotected water sources, often sharing these with livestock. Water shortages from the drought have multiple negative impacts on health (including people living with HIV), nutrition, school attendance, functioning of clinics and risks of violence.
- A recent study by UNICEF and partners in Angola, DRC, Lesotho, Malawi, Mozambique and Zimbabwe found an increase in migration due to lack of food and water, with about a third citing lack of water as the main reason for their migration. Migration in search of food, water or cash can also lead to family separation, with children left behind with older siblings or elderly caregivers.

Situation update since July 2016

Due to a lack of infrastructure, only 61 per cent of the region's population normally has access to safe drinking water and 39 per cent access to adequate sanitation facilities. The El Niño-induced drought has greatly worsened conditions for those people who already had low access and thus no resilience to worsening conditions in water and sanitation.

Cholera is endemic in at least half of the countries in Southern Africa. The upcoming rainy season with likely localised flooding could cause outbreaks, thus prevention and preparedness in WASH are essential now. The mobile nature of the Southern African population could also mean (as in the case of 2008-2009 Zimbabwe outbreak) that a cholera outbreak in one country could easily spread to its neighbours.

WASH response July - November 2016

Emergency WASH sector groups were established in six of the seven priority countries (with the exception of Angola) to coordinate the response. Despite funding shortfalls, governments and WASH development partners were able to provide safe water to approximately 790,000 people across the seven countries through a combination of approaches such as the construction/rehabilitation of water points, the distribution of household water treatment products and water trucking. In addition, partners were able to reach approximately 995,000 people with hygiene promotion on hand-washing, adequate sanitation and safe household water treatment and

storage.


A quick survey conducted by UNICEF indicated that WASH climate resilience building is ongoing in most countries. These include interventions to strengthen water resource management, rainwater harvesting, promotion of improved and sustained hygiene knowledge and practices, increased access to drought-resilient WASH infrastructure in schools and health centres, and the integration of climate resilience into WASH sector strategies and plans.

Strategy for action December 2016 - April 2017

There is urgent need to provide communities with life-saving water supply interventions and hygiene/ sanitation promotion. This will reduce mortality and morbidity associated with diarrhoea, malnutrition and other drought-related illnesses. Water collection distances will also be reduced, thus favouring school attendance of children and diminishing sexual and gender-based violence (SGBV) risks to women and young girls. Health facilities are the preventative and curative centres for the affected communities and hence they must have water supply on a daily basis to ensure that those affected at least have a place to receive treatment for diarrhoea and any other drought-related illnesses. It is paramount to ensure daily water supply to schools and to conduct hygiene sensitization using schools and health facilities as community gateways for learning and behaviour change. As such, the following activities still need to be undertaken in selected drought-affected communities:

- Provision of temporary access to safe drinking water: This includes short term water trucking, chlorination of water systems and distribution of household water treatment products.
- Provision of permanent access to safe drinking water: Many existing water sources need to be rehabilitated or upgraded, with a focus on maximizing the safe, managed use of perennial sources. Construction of new, drought-resistant water systems will be considered when technically feasible and when other sources of water are not available.
- Improvement of WASH conditions in schools and health and nutrition centres: This consists of a minimum WASH package in institutions through the construction/rehabilitation of infrastructure, hygiene education and reinforcement of sustained operations and maintenance systems.
- Hygiene/sanitation promotion in affected communities: This includes a package of community-led total sanitation consisting of promotion of hand-washing, safe and efficient use of water and sanitation self-supply and maintenance.
- Improvement of WASH conditions in schools and health and nutrition centres: This consists of a minimum WASH package in institutions through the construction/rehabilitation of infrastructure, hygiene education and reinforcement of sustained operations and maintenance systems.
- Provision of critical WASH supplies: This includes water containers with lids, of an appropriate size for purification tablets and flocculants, and not too large for manual carrying; and also, in some locations, soap to teach and promote hygiene practices.
- Increase use and extension of rapid assessment and mapping of WASH situation and response: This includes collection, analysis and sharing of data and information in real time to better understand the impact of the drought on WASH services and to quickly identify urgent gaps in the most affected geographical areas

EDUCATION

 EDUCATION						
COUNTRY	People in Need	People Targeted	Funding Requirement	Funding Received	Funding Gap	Funding Gap
ANGOLA	300,000	150,000	\$1,224,414	\$224,414	\$1,000,000	82%
LESOTHO	310,000	310,000	\$282,000	\$2,000	\$280,000	99%
MADAGASCAR	518,000	300,000	\$9,197,000	\$6,947,000	\$2,250,000	25%
MALAWI	520,000	208,000	\$4,327,255	\$3,069,814	\$1,257,441	29%
MOZAMBIQUE	292,000	90,000	\$500,000	\$100,000	\$400,000	80%
SWAZILAND	258,623	197,157	\$2,960,000	\$1,220,000	\$1,740,000	88%
ZIMBABWE	1,920,000	666,460	-	-	-	-
TOTAL			\$18,490,669	\$11,563,228	\$6,927,441	38%

Key messages

- Over 4 million children are in need of support to make sure they remain in school. In Madagascar, the dropout rate in primary schools is up to 40 per cent in most affected communities. A total of 860,449 children, especially girls, are out of school in Lesotho, Malawi, Mozambique and Swaziland as a consequence of the drought.
- Restoring water and sanitation facilities at schools, with structures and maintenance systems that are more resilient to drought and usage, is a priority. Otherwise, not only the health of teachers and children are at risk, but past gains in educational attainment across the region are under threat.
- Emergency school meals are being provided in Malawi and Mozambique, reaching more than 110,000 children in Gaza, Inhambane and Sofala in Mozambique

Situation update since July 2016

The drought has highlighted the need for ministries of education to monitor the impact of emergencies on their education system as existing education management information systems (EMIS) provide only annual indicators for education reports and do not have the flexibility to report changes, including shocks, throughout the year. Evidence collected shows that the current drought has had an alarming impact on school retention. Lack and erratic availability of water or the interruption of school meal programmes at their schools have forced a total of 860,449 children, especially girls, out of school in Lesotho, Malawi, Mozambique and Swaziland. In total, more than 4 million children are in need of support to remain in school in the seven RIASCO priority countries.

Recent findings show that students in poor families are more at risk of dropping out. Furthermore, those children who are not at school or who have abandoned the school are also more exposed to protection problems, especially girl children. Keeping girls in school, especially during their adolescence, is one of the effective ways to protect them from acquiring HIV.⁵ As more girls miss or drop out of school, there is an increased risk of pregnancy, and sexual transmission of

5. Hargreaves, JR et al, Systematic reviewing exploring time trends in the association between educational attainment and risk of HIV intervention in sub-Saharan Africa. AIDS. 2008 Jan 30;22 (3)403-14

diseases including HIV. Up to 58 per cent of children in households interviewed in Madagascar were going out to work to support the family income and up to 44 per cent of families had married off their children⁶.

The ongoing emergency has compounded needs and gaps of the past in regions where schools were fragile and poorly equipped, e.g. many schools did not have adequate WASH facilities both in terms of quality and quantity.⁷ The current response provides an opportunity to fix outstanding problems, strengthening the resilience of the education system and linking the current humanitarian intervention with more long term development.

Sector response July - November 2016

The education sector response to restore teaching and learning in conducive, safe, clean conditions has been about two-thirds unfunded and mostly through funding for WASH - providing access to safe water, functional toilets and hygiene facilities at schools and for nutrition (school feeding). Where funding is available, school water points are being refilled by water tankers, while more long term solutions such as increased water storage capacities, borehole drilling/deepening and rain water harvesting facilities are being repaired or established.


Strategy for action December 2016-April 2017

- Improve timeliness of data collection and analysis by Ministries of Education, for essential monitoring of the emergency situation, gap filling, and adjustments in the response as needed.
- Collaborate with the WASH sector to address immediate and long term water, hygiene and toilet needs in schools, and invest in infrastructure to strengthen drought resilience in vulnerable schools beyond the current drought. Prioritise investments that enable girls to practice menstrual hygiene at school to reduce low attendance or drop out.
- Sensitize Ministries of Education on the negative impact of emergencies on teaching and learning outcomes, and strengthen individual and institutional capacities on emergency preparedness and response (EPR), disaster risk reduction DRR and Climate Change Adaptation (CCA) in collaboration with national disaster management authorities.
- Mobilize resources to continue and scale up emergency school meal programmes.
- Promote child-centred life skill programmes that include DRR, climate change adaptation (CCA), sexual and reproductive health education, prevention of HIV/AIDS and violence against children, and education for sustainable development in schools; include children in DRR/CCA programming in their school to build a society resilient to climate and environmental changes.
- Mobilize funds to scale up in some countries, and initiate in other countries, cash transfers that enable the poorest, drought-affected families to send children back to school or keep them in school, including reducing low attendance or drop out due to adolescent pregnancy, marriage, child labour, family separation or exposure to violence.
- Provide supplies to pupils and teachers to motivate them to return to school and to reduce the financial burden.

6. Multisectoral Evaluation mission conducted in the South, organised by the Food Security Cluster (FSC) in June 2016

7. For example, a recent diagnosis of WASH situation in 600 schools in Angola in six provinces has shown that 70% and 62% of the schools have no reliable sanitation facilities and water supply sources respectively (UNICEF 2016); school WASH services in Malawi are compromised with 13% of boreholes and 21% of water taps in schools not functioning (PDNA report, 2016)

PROTECTION

 PROTECTION						
COUNTRY	People in Need	People Targeted	Funding Requirement	Funding Received	Funding Gap	Funding Gap
ANGOLA	1,213,551	604,800	\$2,651,106	\$1,050,000	\$1,601,106	60%
LESOTHO	206,666	206,666	\$455,300	\$455,300	\$-	0%
MADAGASCAR	850,000	430,000	\$2,390,000	\$90,000	\$2,300,000	96%
MALAWI	6,500,000	3,000,000	\$306,926	\$278,000	\$28,926	9%
MOZAMBIQUE	650,000	400,000	\$476,000	\$136,914	\$339,086	71%
SWAZILAND	162,680	75,648	\$640,000	\$691,345	(\$51,345)	-8%
ZIMBABWE	500,000	400,000	8,700,000	\$1,016,808	\$7,683,192	90%
TOTAL			\$15,619,332	\$3,718,367	\$11,900,965	76%

Key message

- The El Niño emergency poses specific and significant threats to the protection of children, including sexual violence, child labour, and absence from school. An increase in sex being exchanged for food has been widely reported across the region.
- There is an increase in population movement, which is likely to continue. Migration in search of food, water or cash can also lead to family separation, with children left behind with older siblings or elderly caregivers. Systems for monitoring of child migration and related risks, including unlawful arrest or illegal detention, need to be put in place and/or enhanced.
- IOM and partners have launched a Displacement Tracking Monitoring (DTM) project in Mozambique to contribute to the identification and monitoring of needs of displaced communities and support the humanitarian community efforts to gather a broader perspective of the challenges related to human mobility in the country. DTM exercises are also planned in Zimbabwe, Madagascar and Malawi.

Situation update since July

Child protection rapid assessments were undertaken between March and May 2016 to determine and prioritise the protection risks of children affected by El Niño; however, since July, there has been very little funding for updated assessments or for assessments of the situation of vulnerable groups beyond children.

The provision of psychosocial support services is emerging as a critical gap for children who are exposed to family separation and neglect as caregivers are spending more time away from homes in search of livelihood opportunities. The risk of sexual exploitation sex is increasing, especially for adolescent girls who are now heading households. Levels of neglect for younger children are also increasing due to the prolonged absence of caregivers.

Protection responses July 2016-November 2016

Child, family or HIV-related cash grant emergency top-ups are a cross-sectoral social protection response in several countries. For example, by the end of October 2016, the Lesotho Ministry of Social Development had disbursed the second tranche of a cash grant top-up to approximately 80,000 children in 26,681 households, providing unconditional emergency support to poor families with children in drought-affected areas. In Madagascar, the national cash transfer programme is being extended to approximately 45,000 households in five districts, along with the distribution of water vouchers for 10,000 families in an affected district.

The protection needs and the inclusion of women and girls in the multi-sectoral response to the El Niño will go a long way to address the challenges facing these vulnerable group of affected persons, as enumerated above.

Strategy for action in Protection December 2016 to April 2017

- Mainstream prevention, protection of and response to sexual and gender-based violence interventions across all sectoral preparedness, response and resilience development programming.
- Improve data collection, including multi-sectoral assessments to incorporate sex and age disaggregation to identify most vulnerable groups to benefit from supplementary distribution of critical lifesaving items.
- Work with adolescent girls to meet their special needs, guarantee their safety and dignity such that they remain in school.
- Deliver inter-agency trainings for personnel involved in food distribution on obligations under the Inter-Agency Standing Committee on Protection from Sexual Abuse and Exploitation, code of conducts and child safeguarding policies.
- Deliver awareness raising initiatives for communities on child protection risks, how concerns can be reported, and how to access specialised SGBV and HIV services.
- Develop simple emergency specific referral pathways to guide referral and response to the most affected emergency affected children (including SGBV). Strengthen identification and referral of child protection concerns through orientation and awareness raising sessions for field staff and at community level on child protection risks, including sexual exploitation and increased risk of HIV transmission, and risks associated with leaving children unsupervised for long periods.
- Work in collaboration with the Education sector to establish joint responses to prevent children dropping out of school and return those who have dropped out.
- Strengthen case management work by governmental departments of social service or welfare, and NGOs, through a coordinated sector approach so that process and tools are harmonised, prioritizing the most serious protection concerns.
- Establish systems to systematically monitor child protection concerns, including child migration through cross border mechanisms. Responses should be based on approaches incorporating individual assessment and case management and to the extent possible build on existing government led child protection systems.
- Prevent violence, exploitation and abuse by strengthening community level awareness, commitment and capacity for early identification and referral of at risk and abused children.
- Mainstream SGBV prevention, protection of and response and child protection and resilience programming in the actions of other sectors (awareness raising with communities on protection risks, early detection and response to children dropping out of school.
- Strengthen data collection through multi-sectoral assessments to incorporate sex and age disaggregation to identify most vulnerable groups to benefit from supplementary distribution of critical lifesaving items.

REGIONAL COORDINATION

In 2016, OCHA deployed for a total of 758 staff days to the seven RIASCO priority countries to support Resident Coordinators and Humanitarian Country Teams in strengthening coordination and information management, as well as to develop strategic documents such as CERF funding applications and response plans. OCHA seconded staff to SADC for a total of 355 staff days to support the development of its regional appeal and strengthen overall information management. Throughout the response OCHA has continued to convene and chair RIASCO's monthly meetings, and provided secretarial support to the development of the RIASCO Action Plan and this revision.

OCHA Southern and Eastern Africa requires \$5.9 million to coordinate the response effectively in 2017.

In line with the OCHA Strategic Framework 2014- 2017, the strategy of OCHA centres on building capacity to identify and effectively respond to humanitarian needs. OCHA aims to continue supporting the UN system in the areas of emergency preparedness and capacity building and disaster response.

With the funds requested, OCHA Southern Africa will:








1. Perform its core functions, with a growing emphasis on ensuring that its contribution to regional and national preparedness and response are sustained in 7 priority countries.
2. Ensure that OCHA's presence in the region is informed by a deeper understanding of risk in the region, and thus necessary capacities, programmes and presence to address it; and
3. Continue to fill a major capacity gap, ensuring that the needs of disaster-affected communities are met and their voices heard.

It will do so by expanding its work within the following areas:

1. Chairing of RIASCO.
2. Maintaining an OCHA platform for surge response in the region.
3. Developing risk analysis and the humanitarian outlook.
4. Rolling out Minimum Preparedness Actions (MPAs) and ERP guidelines with main operational UN partners (UNHCR, UNICEF and WFP) in priority countries for priority threats, and delivering information management minimum preparedness as part of the package.
5. Continuing support to SADC to develop credible capacity in humanitarian coordination.
6. Supporting capacity building initiatives at regional and national level on emergency operation centres.

COUNTRY UPDATES

ANGOLA

 ANGOLA		People in Need October 2016	People Targeted by Action Plan	Funding requirement October 2016	Funding received October 2016	Funding Gap	Funding Gap	People Reached
SECTORS								
	HEALTH AND NUTRITION	1,213,551	604,800	\$36,630,627	\$5,770,444	\$30,860,183	84.2%	15,965
	FOOD SECURITY AND AGRICULTURE	1,213,551	1,000,000	\$22,500,000	\$3,030,181	\$19,469,819	86.5%	25,888
	WASH	420,000	420,000	\$6,479,215	\$1,074,861	\$5,404,354	83.4%	245,270
	PROTECTION	1,213,551	604,800	\$2,651,106	\$1,050,000	\$1,601,106	60.6%	10,263
	EDUCATION	300,000	150,000	\$1,224,414	\$224,414	\$1,000,000	81.7%	2,500
	COORDINATION	1,213,551	755,930	\$924,252	\$130,000	\$794,252	85.9%	-
TOTAL				\$70,409,614	\$11,279,900	\$59,129,714	84.0%	

Humanitarian situation

The El Niño-induced drought continues to affect 1.2 million people, mostly living in the southern provinces of Cunene (with 755,930 people affected), Huila (205,507) and Namibe (177,627). An estimated 90 per cent of affected people live in rural areas and are dependent on subsistence farming and livestock, with limited access to safe water and electricity, and reside long distances from health centres, schools and markets. The situation is exacerbated by the economic crisis and reduced imports, reflected in the significant increase in staple food prices and lack of certain basic commodities. The food insecurity is of concern to local authorities, with a large number of livestock sold daily to buy staple food, which may result in shortage of draught power for the next agriculture season. The little remaining grains and beans stocks are also being sold in Namibia, taking advantage of a profitable currency exchange rate.

In Cunene, migration with livestock in search of water and pasture is being widely used as preferred coping strategy. However, although there is no regular food security data collection, selling livestock and other household assets at low prices is becoming one of the most commonly used coping mechanism.

Following recent assessments conducted by World Vision in May 2016, the severe acute malnutrition rates are still above 4 per cent in the three most affected provinces, with reported increasing water-borne diseases, a high burden of malaria caseloads, and absence of safe water for most households.

Outbreak of yellow fever is still a cause for concern considering the inadequate health service provision and weak surveillance systems. SAM rates remain high in remote rural communities. The hospital of Chiulo in Cahama municipality reported a doubling in the caseload of children suffering SAM with complications in October 2016 compared to September 2016, and a tripling compared to July 2016.

The most affected are children, widows and the ethnic groups of Kungs (Koisãa), Mokubal, Vãtuas. The situation is also critical for pastoralists, who have been in transhumance for the past months. Outbreaks of anthrax and dermatoses have reduced livestock's capacity to stand

the prolonged transhumance. The routine livestock vaccination campaign is about to start, following three years without any campaign.

Lack of water continues to pose risks of disease outbreaks, despite the fact that the National Commission of Civil Protection (CNPC) has distributed water tanks of five to ten thousand litres in all municipalities of Cunene and two municipalities of Huila, and is carrying on a weekly water-filling programme. People are forced to trek long distance to get water; this is affecting livelihood income activities and has led to an increase in school drop-out rates.

Response

Angola benefitted from a \$5 million grant from the UN Central Emergency Response Fund (CERF) that strengthened life-saving projects in Agriculture and Food Security, Nutrition, Health and WASH; and a \$3.9 million grant from the European Civil Protection and Humanitarian Aid Operations (ECHO) that funded Child Nutrition and Food Security projects in Huila and Cunene provinces.

Almost 15,000 children suffering from SAM were treated in community-based management of acute malnutrition (CMAM) centres from January to September 2016 in the three most affected provinces. In terms of capacity building, training is being conducted for 537 health workers and 489 community workers in the management of acute malnutrition. With additional community workers trained, the screening in communities is increasing and have to date reached 59,188 children under age 5. Up to the third quarter of 2016, 43 per cent of the targeted 37,834 malnourished children were reached for SAM treatment (16,500 children in total); 80 per cent admitted through out-patient treatment (OTP) and 20 per cent through in-patient treatment (ITP).

UNFPA reached 10,303 adolescents girls and boys with information on sexual and reproductive health (SRH), SGBV and HIV/AIDS; 35 social mobilizers from Cunene and Huila were trained; and 2,460 adolescent girls received sanitary kits in three municipalities of Cunene Province.

WASH interventions led to the rehabilitation of 73 hand pumps to provide safe water access to 36,500 people, including at schools. This however leaves a gap of more than 400,000 people in need of water at a time when water-related diseases are posing increasing risks. In September 2016 UNDP started to provide 12-month livelihood and income diversification support to 16,000 beneficiaries for drought recovery and strengthened flood preparedness.

Also through CERF funding, FAO implemented three projects aimed at improving the capacity of almost 3,000 households (15,000 people) in Cunene, Huila and Namibe to cope with the drought and improve production of short-cycle millet, maize and vegetables in their gardens. In total, seed distribution, family garden, animal health and rehabilitation of water points for livestock in transhumance is targeting 211,700 households severely affected by the drought.

A total of 1720 students received DRR education kits and 600 teachers and 18 trainers in rural schools were trained on DRR.

Challenges








Due to the significant funding gap, with some critical sectors such as Health at only 16 per cent funded, WASH at only 27 per cent funded, and Food Security and Agriculture at only 23 per cent funded, most projects and interventions are lagging behind. This compromises health delivery at a time when the country is experiencing challenges of yellow fever and the risk of cholera outbreaks. The situation has been worsened by high staff turn-over at health centres, a limited number of skilled personnel, lack of standardized national guidelines or treatment protocols

for SAM, no teaching curriculum for SAM (pre-service or in-service), lack of equipment (e.g., infanto-meters, scales, MUAC tapes), and poor reporting skills, which poses a challenge to address disease outbreaks. Also, the prolonged shortages of nutritional supplements and TB drugs have discouraged mothers and TB-infected patients from seeking medical assistance, which increases the risk of escalating malnutrition and TB-related mortalities. Existing resistance from communities to accessing health services, extensive inpatient stays and traditional beliefs are also challenges.

In addition, lack of a food assistance programme to help prevent worsening malnutrition, and limited nutritional supplements being used to feed the entire family, has led to increased risks for children to become severely malnourished. Within OPT care the overall cure rate is about 55 per cent and the proportion of defaulters is 39 per cent. The highest rates of defaulters were found in the provinces of Huila and Cunene, with about 57 per cent and 55 per cent respectively.

Food commodity prices continue to increase at a rate of up to 50 per cent almost every month. This should be viewed in the context of restrictions on US\$ transfers which has led to shortages of essential products for humanitarian intervention especially veterinary medicines and hand pumps. Despite food shortages in most parts of the country, farmers continue to sell grain stocks in neighbouring Namibia which may exacerbate food shortages even after a potentially good agriculture season being forecasted.

LESOTHO

 LESOTHO		People in Need October 2016	People Targeted by Action Plan	Funding requirement October 2016	Funding received October 2016	Funding Gap	Funding Gap	People Reached
SECTORS								
 FOOD SECURITY AND AGRICULTURE		679,437	491,198	\$43,477,256	\$34,172,800	\$9,304,456	21.4%	509,695
 WASH		302,507	139,600	\$4,948,030	\$1,661,804	3,286,226	66.4%	29,880
 HEALTH AND NUTRITION		69,430	69,430	\$3,182,613	\$423,796	\$2,758,817	86.7%	66,985
 PROTECTION		206,666	206,666	\$455,300	\$455,300		0.0%	
 COORDINATION				\$296,395	\$296,395		0.0%	
 EDUCATION		310,000	310,000	\$282,000	\$2,000	\$280,000	99.3%	
TOTAL				\$52,641,594	\$37,012,095	\$15,629,499	29.7%	

Humanitarian situation

Lesotho is currently reaching the peak of the lean season that is projected to continue up until April/May 2017, when the next harvest is expected. Food insecurity in rural areas is around 48 per cent with 679,437 people affected. Vulnerability in urban areas is likely to be compounded by the loss of jobs of up to 40,000 textile workers if the US African Growth and Opportunity Act (AGOA) agreement is cancelled for Lesotho due to governance concerns. This may also worsen vulnerability in rural areas since some of the workers likely to be affected provide financial support to their families in the rural areas. A compound vulnerability is the severe AIDS epidemic in Lesotho where one in four people are living with HIV.

Following the drought conditions due to the El Niño, heavy snowfall has impacted the agricultural production during July and August 2016, particularly animal pasture and winter crop.

Although the last meteorological outlook foresees normal to above-normal rainfall for Lesotho for the upcoming months, water shortages still persist, with 54 per cent of schools reporting dried-up water sources.

Response

The Humanitarian Country Team has been able to raise around \$37 million to date, while Government has committed \$11 million for the implementation of its response plan and an additional \$12 million for a 30 per cent subsidy on selected staple foods.

With the funds received, humanitarian partners are able to reach 509,695 people - almost all those within the targeted population facing survival food deficits. Furthermore, a significant portion of the rural population (522,875) will receive some form of agricultural assistance, with the livelihoods component being provided in time for the next planting season. WASH interventions have been able to reach 29,880 people, through the provision of water, the rehabilitation of water sources as well as the provision of water purification tablets. In parallel, the Government continues water trucking to locations most in need.

By mid-September 2016 the Government of Lesotho has been able to spend \$387,729 for the implementation of its humanitarian response plan. In the first four months of the implementation of the food subsidy the Government of Lesotho paid millers and packers around \$2.5 million.

The LVAC is in the process of updating their figures, in addition to an urban assessment, the results of which will inform the humanitarian response during the last months of the lean season. The number of people in need and funds required may increase in late 2016.

A number of risk-informed themes such as sustainable land management and climate smart agriculture are taught in 300 schools across the country to increase awareness around issues of resilience and improve the effectiveness of the school curriculum in addressing these topics.

Challenges

The delivery of Government projects has encountered challenges due to lengthy procurement processes. The revision of the Government response plan is still outstanding and the delivery against the initially identified activities, remain low.









Currently, the Lesotho Vulnerability Assessment Committee is conducting an urban assessment to establish the urban food security gap, which is expected to increase the numbers of people facing food insecurity until the end of the lean season in April 2017.

WASH needs are still high with reported rationing of water in communities, despite the initial onset of seasonal rains. The water levels in dams that supply urban areas are low which may lead to more water rationing and possible disease outbreaks. A UNICEF survey revealed that 56 per cent of all schools reported water shortages. The WASH sector remains one of the most underfunded and further implementation and funding is required to create access to water for all people in need. Interventions by humanitarian partners in the Health and Nutrition sector have revealed a need for better training and capacity building at the district and community level, combined with the need for an improved early warning system. Due to lack of capacity, disease outbreaks often are not detected early and are difficult to trace once they are detected. This is of particular concern with the onset of the rainy season when further outbreaks are typically expected. Documentation on case management, monitoring and surveillance of SAM is weak. There are large gaps in the data from health facilities.

Government has been slow to establish a coordination mechanism for cash assistance that ensures harmonized targeting tools, transfer values, etc. Therefore, the role of the UN has been critical to establish a coordination mechanism. However, the different positions of Government entities on cash assistance has hampered the coordination efforts.

Delays in the targeting process led by the Disaster Management Authority are slowing down the various food assistance agencies' efforts to reach all food insecure people during the lean season. The transfer value of emergency cash transfer top ups should be harmonized with other ongoing or planned emergency cash transfers. The National Information System for Social Assistance needs to be updated and also expanded to cover many more people, and especially those living in areas severely affected by drought; in its current state the database is of limited use for humanitarian targeting.

MADAGASCAR

 MADAGASCAR		People in Need (October 2016)	People Targeted by Action Plan	Funding requirement October 2016	Funding received October 2016	Funding Gap	Funding Gap	People Reached
	FOOD SECURITY AND AGRICULTURE	978,000	978,000	\$103,873,900	\$26,743,496	\$77,130,404	74.3%	615,000
	HEALTH AND NUTRITION	850,000	850,000	\$24,491,000	\$5,833,805	\$18,657,195	76.2%	334,804
	WASH	850,000	430,000	\$14,549,000	\$4,761,275	\$9,787,725	67.3%	203,130
	EDUCATION	-	300,000	\$9,197,000	\$6,947,000	\$2,250,000	24.5%	250,000
	COORDINATION	850,000	850,000	\$433,900	\$158,000	\$275,900	64.6%	
	PROTECTION	850,000	430,000	\$2,390,000	\$90,000	\$2,300,000	96.2%	
	MULTISECTOR	-	-	\$-	\$985,872	(\$985,872)	0.0%	
TOTAL				\$154,934,800	\$45,519,448	\$109,415,352	70.6%	

Humanitarian situation

The October 2016 Integrated Phase Classification (IPC) survey found that the number of people requiring humanitarian assistance stands at 845,000: 330,000 of those being in Emergency (IPC Phase 4) and 515,000 in Crisis (IPC Phase 3). Out of the eight districts in the Grand Sud, three (Amboasary, Tsihombe, Beloha) are classified as in Emergency and the remainder in Crisis. The response plan of the Food Security and Livelihoods sector aims to provide immediate food assistance and support for the restoration of livelihoods to 978,000 individuals, distributed in the IPC 4 and 3 (850,000) and IPC 2 (128,000) areas. These IPC 2 districts are at high risk of sinking into IPC 3 or even 4 without appropriate assistance from November 2016 to March 2017, the peak of the lean season.

The school year commenced on 3 October but as with previous years, the return to school was low most likely due to limited or no access to food for some families. The current drought has had an alarming impact on school retention: the dropout rate in primary schools has climbed up to around 40 per cent in some of the most affected communities. In those schools, several classrooms are almost empty and many families with their children are working in the fields as a survival strategy.

There is a high risk of affected people resorting to negative coping mechanism during the lean season from November 2016 to March 2017 as they lack the financial resources necessary to access food and health services. Begging has already been adopted by 44 per cent of households, and 31 per cent of households have reported primary school dropouts.

Response

Based on the outcomes of the IPC results, a joint drought response plan was revised in October 2016, under the leadership of Government with the support of the United Nations System and humanitarian partners, to adjust the planned interventions in line with emerging priorities. The humanitarian response over the next six months will require \$155 million, of which \$109 million is still to be secured. As a result of the efficient use of the limited resources, 90,000 people moved from being severely food insecure to being moderately food insecure between February and August 2016. Nearly 12,000 children aged 6 to 59 months have gotten access to treatment for severe acute malnutrition. The number of municipalities reporting acute malnutrition decreased from 32 in February to 17 in August 2016.






Special attention has also been given to early recovery and resilience planning (covering 36 months), which proposes investment opportunities to break the cycle of humanitarian disasters and ensure a swift move to recovery and community resilience programmes.

Challenges

The Health and WASH sectors still remain severely underfunded, increasing risks of possible water-borne disease outbreaks, particularly with the onset of the rainfall season. The early warning system is not financed and data is not collected on a regular basis, which may lead to under-reporting on levels of vulnerabilities and needs. Despite humanitarian actors having reinforced their presence in the **Grand Sud** to support the on-going response, implementation capacity in the **Grand Sud** is structurally weak as the presence of humanitarian actors do not cover all the **Grand Sud** with the main challenge being limited human resources.

In general, humanitarian and development actors have all within their programmes and projects a focus on resilience, but it has emerged that there is not a common understanding of resilience (planning, budgeting, implementation, measurement), which can impede moving forward in a concerted manner.

MALAWI

MALAWI		People in Need October 2016	People Targeted by Action Plan	Funding requirement October 2016	Funding received October 2016	Funding Gap	Funding Gap	People Reached
 FOOD SECURITY AND AGRICULTURE	6,700,000	6,700,000	\$338,305,000	\$265,894,174	\$72,410,826	21.4%	1,730,000	
 HEALTH AND NUTRITION	6,500,000	2,520,000	\$30,195,130	\$23,316,622	\$6,878,508	22.8%	29,022	
 WASH	1,550,000	775,000	\$22,087,500		\$22,087,500	100.0%	362,394	
 EDUCATION	520,000	208,000	\$4,327,255	\$3,069,814	\$1,257,441	29.0%	113,285	
 PROTECTION	6,500,000	3,000,000	\$306,926	\$278,000	\$28,926	9.4%	300,000	
 COORDINATION			\$230,000	\$309,666	(\$79,666)			
TOTAL			\$395,451,811	\$292,868,276	102,583,535	25.9%		

Humanitarian situation

The October 2016 MVAC update brings the current number of people in need of food assistance to 6.7 million. The increase is particular to the two districts of Ntcheu and Kasungo, and is attributed mainly to a 14.7 per cent drop in maize production (Ministry of Agriculture Irrigation and Water Development, crop assessment, June 2016), and ongoing decline of the tobacco sector due to a lack of rains. This is an increase of 200,000 (3 per cent) from the June 2016 figure of 6.5 million people in need of food assistance. Current maize prices have risen further, from 54 per cent above 2015 prices in July 2016 to 90 per cent in October 2016, which is also 172 per cent above the 5-year average. In Salima, maize prices are a staggering 300 per cent above the 5-year average. Prices seem to have stabilized in recent assessments which is attributed to a slowdown in maize purchases for the Agricultural Development and Marketing Corporation (ADMARC) outlet markets and the commencement of humanitarian assistance in severely affected districts in the south.

SAM and MAM admissions in September 2016 were up by 100 per cent and 154 per cent respectively compared to September 2015. Six new cholera cases were reported in September 2016. Many people on anti-retroviral therapy (ART) and/or TB treatment have had their treatment interrupted due to the lack of food and the default rate has doubled from 16 per cent in April to 32 per cent in September 2016. Children wanting to attend school are moved into schools with active school meal programmes, leading to overcrowded classrooms and requiring children to walk longer distances, exposing them to violence. Out-of-school children have moved to urban centres to beg or engage in child labour and an increase in child marriages is also being reported as a negative coping strategy. An increase in sex being exchanged for food has been widely reported. Incidences of sexual violence and abuse in Malawi have risen by at least 41 per cent in two years.

The drought has also adversely impacted tobacco export earnings, which are 30 per cent below average. As a result the Malawi Kwacha has depreciated by about 20 per cent since April 2016, increasing the cost of imports. The economic contraction has reduced tax revenue, adversely affecting the government's ability to respond, as its fiscal space is severely limited. Inflation can also be considered a heavy tax burden on the poor.

Response

From January through October 2016, over 827,000 children were screened and over 41,000 treated for SAM. Food assistance by WFP and NGO partners is being rapidly scaled up from 240,000 beneficiaries in July to 1.73 million in September, and 3 million people will be assisted in October.

During September, 644,040 children under age 5 were reached through a mass screening drive while 17,700 children were referred to facilities for further investigations and admissions into community-based management of acute malnutrition (CMAM) programmes. In October UNICEF, through NGO partners, provided potable water to 7,000 drought-affected people through the construction and rehabilitation of water points. In the same period, NGOs carried out interventions to stimulate the demand for improved sanitation facilities and 6,625 people in drought-affected areas are now using improved sanitation facilities. In addition, UNICEF in partnership with NGOs carried out hygiene promotion interventions that promote hand washing, reaching 55,915 drought-affected people.


Government is expected to launch a national resilience plan to break the cycle of food insecurity, complemented by a national agricultural policy to promote climate-smart and water harvesting technologies. Development Partners have stepped up their assistance to Government, with the IMF providing \$49 million for the importation of maize. In November the Board of the World Bank will review two projects totalling \$160 million: a \$90 million project for disaster recovery, including food assistance and resilience building, and a \$70 million project for Social Protection through the Malawi Social Action Fund.

The Education cluster is working with the Food and Nutrition partners for the provision of school meals in 121 primary schools, reaching 91,000 primary school learners. Observations from schools with meal programmes have shown an increase in first time enrolment, reductions in drop-out figures and absenteeism. Also, 186 emergency response volunteer teachers have been deployed to emergency-affected schools.

Challenges

The Food Insecurity Response Plan (FIRP) is 74 per cent funded (including pledges, which do not always translate into cash). The shortage of and delay in funding is directly impacting the ability to respond. In July and August, eligible households only received half food rations and the 27 per cent funding gap in the education cluster has meant that 39 schools from the priority list (40,000 learners) in need of school meal programmes are not being reached. Thus far the Health and WASH clusters have not received any funding impacting their ability to monitor and respond to public health and water related emergencies. The lack of funding for the Health Cluster, for example, leaves people at risk of HIV infection. Malawian Kwacha also depreciated by about 20% since April, increasing the cost of imports at a time the country is experiencing economic contraction.

MOZAMBIQUE

 MOZAMBIQUE		People in Need in October	People Targeted by Action Plan	Funding requirement of plan (j'c6 16)	Funding received (Oct 16 USD)	Funding Gap	Funding Gap	People Reached
	FOOD SECURITY AND AGRICULTURE	1,500,000	1,209,672	\$151,429,870	\$99,885,591	\$51,544,279	34.0%	411,335
	WASH	690,428	414,000	\$16,120,000	\$7,731,219	\$8,388,781	52.0%	221,000
	HEALTH AND NUTRITION	1,460,000	243,113	\$11,706,000	\$11,194,768	\$511,232	4.4%	14,136
	EDUCATION	292,000	90,000	\$500,000	\$100,000	\$400,000	80.0%	
	PROTECTION	\$650,000	\$400,000	\$476,000	\$136,914	\$339,086	71.2%	22,639
TOTAL				\$180,231,870	\$119,048,492	\$61,183,378	33.9%	

Humanitarian situation

The food security and nutritional assessment of the Technical Secretariat for Food Security and Nutrition (SETSAN), released in September 2016, estimates that 1.5 million people are food insecure in seven provinces: Maputo, Gaza, Inhambane, Tete, Manica, Sofala and Zambézia. FEWS NET estimates that between October and December 2016, nearly 1.8 million people will likely face Crisis (IPC Phase 3) outcomes, requiring urgent humanitarian assistance. In addition, an estimated 243,000 children under age 5 are moderately or severely acutely malnourished and 113,000 pregnant and lactating women will be in need of food assistance between October 2016 and March 2017 in all affected provinces, including the northern provinces where chronic malnutrition and stunting levels are the highest in the country. High HIV prevalence rates compound the impact of the drought in Mozambique.

The drought has also led to a sharp increase in staple food prices. Maize prices in August/September were 182 per cent above the 5-year average and 121 per cent above last year's. This risks pushing a significant proportion of rural households below the poverty line. The drought reduced employment opportunities, leading to decreased disposable income to purchase food, even if food was to be made available on the market.

The second season agricultural production phase that usually peaks in August has been well below average due to low levels of residual moisture. Poor second season production is negatively affecting food availability and income generation from agricultural labour. As a consequence, more households are forced to engage in self-employment including negative coping mechanisms such as increased charcoal sales that lead to deforestation.

Response

Between April and October 2016, bilateral and multilateral donors have contributed \$119 million of the requested \$180 million. In September 2016, partners were able to reach 384,385 of the 1.2 million targeted people with emergency food assistance.

The Food Security cluster operationalizes a seed distribution plan starting in November 2016, and in total partners are planning to distribute seeds and agricultural inputs to 109,000 households (545,000 people), as well as improve access to water for human, cattle and home gardens through the construction of temporary wells in river beds and drilling boreholes for

25,000 households. While these efforts are not likely to meet all of the needs, they will help poor households access needed seeds for the agricultural season. Food for Assets programmes are also designed to mitigate the impact of the drought and increase community resilience. In 2016³, through October, partners reported 8,100 children with severe acute malnutrition be treated.

The current fiscal situation limits Mozambique's capacity to mitigate the impact of El Niño on its own. To date, approximately \$10 million has been provided by Government prior to the strategic response plan. In addition, Government have mobilised a donation of 10,000 tons of rice from China, \$1 million from the African Development Bank and \$15 million from the World Bank.

With UNICEF support, the Ministry of Health deployed mobile brigades that screened more than 118, 000 children for malnutrition, and around 8,100 were referred for treatment. A cholera vaccination programme in Nampula reached all of the target population. More than 221,000 people were reached with safe water and more than 114, 000 people were reached with hygiene promotion activities.

Challenges

Insecurity in some northern and central areas due to conflict has limited access to affected people by humanitarian organisations. The number of people involuntarily resettled as a result of the conflict is growing, with the number of people migrating to camps increasing, as well as the number of people that have sought refuge with host families. This may increase pressure on host families to meet food needs for additional people considering that host families also rely on food assistance and internally displaced persons may be left out during targeting.

The 2016/17 cropping season was officially launched by the Government of Mozambique on 28 October, a bit later than usual. According to the Crop and Early Warning Unit (DCAP) from the Ministry of Agriculture and Food Security (MASA), as of mid-October, land preparation in the southern region has reached 70 per cent of the total planned area, while in the central and northern regions land preparation has reached 50 per cent of the total planned area, according to FEWS NET.

The funding currently available will likely be insufficient to meet the food needs of the affected population until the end of March 2017. As of January 2017, funding shortfalls will have a negative influence on the number of people receiving food assistance, or on the quantity of food distributed and could also negatively influence the quality of humanitarian intervention.

SWAZILAND

 SWAZILAND		People in Need in October	People Targeted by Action Plan	Funding requirement of plan (Oct 16)	Funding received (Oct 16 USD)	Funding Gap	Funding Gap	People Reached
 FOOD SECURITY AND AGRICULTURE	492,454	250,000	\$75,000,000	\$32,036,084	\$42,963,916	57.3%	77,000	
 WASH	300,000	200,000	\$14,000,000	\$4,041,420	\$9,958,580	71.7%	71,162	
 HEALTH AND NUTRITION	353,000	317,196	\$2,430,000	\$1,567,251	\$862,749	35.5%	74,000	
 EDUCATION	258,623	197,157	\$2,960,000	\$1,220,000	\$1,740,000	85.7%	77,000	
 PROTECTION	162,680	75,648	\$640,000	\$691,345	(\$51,345)	-8.0%	125	
 COORDINATION			\$330,000	\$192,000	\$138,000	41.8%		
TOTAL			\$95,360,000	\$39,748,100	\$55,611,900	58.3%		

Humanitarian situation

The risk of prolonged food insecurity and the need for humanitarian intervention remains very high considering that thousands of subsistence farmers have not yet planted this season due to poor and delayed rains (30 to 60 days late) as of October 2016, due to insufficient rainfall.

Reduced food access caused by high and increasing food prices have led to poor adherence to HIV and TB treatment, which is a disturbing trend considering that Swaziland has one of the highest adult HIV rates in the world at 25 per cent.

WASH remains a challenge despite the nominal rainfall received in October 2016, which has been insufficient to offset the acute water stress that communities are experiencing. Approximately 300,000 people are unable to access potable water with water rationing having been extended beyond the capital Mbabane to Lubombo Region urban centres, increasing the risk of water-borne diseases, particularly diarrheal outbreaks.

The Swaziland VAC projects 640,000 people will endure some form of food insecurity from the peak of the lean period from November 2016 to March 2017. This includes the 350,000 people in need of immediate food assistance as well as livelihood support. The drought has impacted 78 per cent of the country's primary and secondary schools, and more than 332,000 students have been affected by lack or erratic availability of water at their schools.

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Response

The UN drafted a humanitarian response plan to support the humanitarian components of the Government's National Emergency Response, Mitigation and Adaptation Plan (NERMAP)⁸. As of 31 November 2016, only 40 per cent of the government plan had been funded.

8. The UN response covers the humanitarian components of the NERMAP and does not include energy, shelter and environment interventions.

In August 2016, WFP targeted some 100,000 drought-affected people with emergency food assistance, and plans to scale up over the coming months to 150,000 people in severely affected areas with both food and cash transfers. In October 2016, World Vision distributed food to a total of 49,438 people out of a planned 60,000 people. Partners are supporting screening for HIV and for malnutrition, as well as referrals for treatment and a household mitigation food ration.

The National Disaster Management Agency (NDMA) and partners have been providing supplementary hay bales to farmers whose animals lack access to pasture - 80,000 animals (13 per cent of the national herd) have already died as a result of lack of pasture and water. Water conservation and hygiene promotion activities targeting school children, teachers and community workers have been scaled up in October 2016 to maximise safe water utilisation during the rainy season. A total of 56,000 people have been reached with safe water.

Swaziland is finalising a national protection assessment to update needs and affected caseloads to inform programming decisions and update requirements. In order to strengthen national efforts aimed at building and strengthening capacity for adaptation and mitigation the effects posed by climate change and variability, UNDP supported NDMA to develop a resilient recovery proposal costed at \$1.5 million, which was submitted to the Japanese Government for supplementary funding. The project aims to improve food security, recovery, and resilience to the impacts of El Niño- induced drought; and improve integrated national early warning systems management. With UNICEF support, more than 15,000 people accessed clean water, including through water trucking. The Ministry of Health carried out integrated Vitamin A, deworming and vaccination campaigns in October 2016. Malnutrition treatment supplies were procured for distribution to 40 integrated management of acute malnutrition centres, to treat 1,058 severe acute malnourished children under age 5.









Challenges

Out of an estimated 350,000 people facing Crisis and Emergency food insecurity levels and are in need of urgent assistance, the Government, WFP, World Vision and partners plan to reach 160,000 people (45 per cent of the total caseload) from November to December 2016; while an additional 100,000 people will receive Red Cross and WFP cash assistance until the end of February 2017. This means that there are about 90,000 people (26 per cent of the estimated population in need) who will not receive emergency assistance. There have been no new pledges for food in 2017 and for cash from February 2017. Despite the efforts of the Government of Swaziland and humanitarian partners, Government's drought response plan (NERMAP) stands at only 40 per cent funded as of November 2016. This has resulted in inadequate coverage of interventions across all sectors of the response.

Protection is struggling for funding despite reports of increasing incidences of SGBV cases and protection concerns created by the continuing food insecurity and water scarcity, which progressively places vulnerable adolescent girls and women at risk. The orphans and vulnerable children (OVC) programme has been temporarily suspended due to lack of resources and the ration size had to be reduced in the Food by Prescription programme due to limited funding. The Protection cluster is working on reassessing its caseload and sector needs

The onset of the October rainy season was marked by delayed and erratic rainfall which affected planting. In addition, there is inadequate seed stock in the country. Swaziland has only one agricultural season (October to March) and if this harvest is not maximised, subsistence farmers may require additional assistance. This means that the caseload for those in need of humanitarian assistance, livelihood support and the period of assistance may extend up to 2018.

ZIMBABWE

 ZIMBABWE		People in Need in October	People Targeted by Action Plan	Funding requirement USD	Funding received USD	Funding Gap	Funding Gap	People Reached
SECTORS								
	FOOD SECURITY AND AGRICULTURE	4,071,233	4,071,233	\$278,560,000	\$188,254,306	\$90,305,694	32%	1,100,000
	WASH	4,300,000	2,300,000	\$38,810,505	\$9,770,099	\$29,040,406	75%	24,063
	HEALTH AND NUTRITION	700,000	660,000	\$25,653,480	\$12,166,897	\$13,486,583	53%	330,000
	EDUCATION	-	-	\$20,178,144	-	\$20,178,144		38,525
	PROTECTION	500,000	400,000	\$8,700,000	\$1,016,808	\$7,683,192	88%	260,000
	COORDINATION	-	-	\$580,035	\$200,000	\$380,000	66%	
	MULTISECTOR	-	-	-	\$500,000	(\$500,000)	0.0%	
TOTAL				\$352,304,020	\$211,908,110	\$140,395,910	39.9%	

Rural population affected only.

Humanitarian situation

The preliminary results from a recent urban vulnerability assessment indicate that about 1.1 million people in urban and peri-urban settlements (30 per cent of urban population in Zimbabwe) are food insecure. This is in addition to the 4.1 million people (42 per cent of the rural population) that according to the Zimbabwe VAC will require food assistance during the peak hunger period of January to March 2017. This additional urban caseload is likely to put strain on limited resources being used for the current response mostly focused in rural areas. While there has been relatively low implementation of urban humanitarian programming, it is clear that urban food security is not only about production of food. Urban food insecurity is also strongly linked to income poverty, and is exacerbated by poor infrastructure and access to basic social services. With the increase in urban vulnerability, there is therefore need to invest in developing tools and systems for responding to the needs of this particular group of vulnerable people in both urban and peri-urban settings.

Response

The Humanitarian Response Plan has been revised to reflect the results of the ZimVAC 2016 Rural Livelihoods Assessment, which reported an increase in the number of people affected by the drought. However, the revision did not factor in additional caseloads from the recently completed urban vulnerability assessment and those likely to be affected by floods. This therefore means that resource requirements may fall far short of actual needs. Approximately \$212 million (60 per cent) has been committed against the \$352 million sought. Humanitarian partners have been complementing Government support, which to date has provided 386,162 tons of maize to approximately 687,892 food insecure households (3.44 million people), including urban areas. While Government coverage is geographically expansive, it is important to note that through the Government's programme, households are receiving only a 50kg bag of maize meal per month.

In October, Food Security and Agriculture partners provided assistance to 2.135 million beneficiaries in 45 districts through lean season, resilience & livelihood, and agricultural assistance. For the month of October, 51 per cent of beneficiaries received assistance through cash-based transfers.

WFP resumed the emergency school feeding programme in September in Mbire and Zvishavane, targeting 38,525 pupils during the third term, with more primary schools meeting the minimum facility standards. Schools in Binga came on board end of September, which will bring the total number of targeted students to 77,000. In October, WFP's emergency school feeding programme reached approximately 74,000 of the 77,000 targeted beneficiaries.

The agricultural productive capacity of farming households is expected to be further constrained this year, particularly with regard to access to fertiliser and seed supplies that is reflective of two consecutive years of below average harvests. In response, FAO and agriculture partners are supporting approximately 100,000 households in the most affected districts mostly in the southern half of the country with agricultural inputs, as well as subsidized stock feed. The Government is also continuing to facilitate improved access to agricultural inputs (This assistance is targeting 800 000 vulnerable small holder farmers through the presidential input scheme and commercial farmers through the command agriculture Programme). In addition FAO is supporting the Department of Livestock and Veterinary Services with vaccines to safeguard livestock assets from Anthrax, Foot and Mouth Disease and Newcastle disease.

UNICEF and WASH partners continued the implementation of the Emergency Programme Fund (EPF) in Mwenezi and Zvishavane districts in a bid to restore the access to water, increase awareness on hygiene and sanitation practices and distribute critical WASH non-food items. Prepositioning of spare parts for the rehabilitation of 78 boreholes in the project was conducted and rehabilitation works commenced: 56 boreholes were successfully rehabilitated benefiting approximately 100,000 people by restoring their access to safe water. Approximately 1,520 households (7,600 people) received WASH kits. In addition, 78 village pump minders and 78 water point user committees were trained as part of the preparatory works for the rehabilitation of the remaining boreholes.

Challenges

The economic situation continues to deteriorate with the worsening liquidity crisis over the past several months. This has been exacerbated by Government's inability to access resources from foreign direct investment (FDI) and international financial institutions (IFIs), creating possible challenges to import food. WASH, Health, Nutrition and Protection needs remain seriously underfunded, placing very vulnerable children and other people at serious risk of disease, malnutrition and violence. Four recently confirmed cases of cholera in southern Zimbabwe, while now under control, is still a clear indication of possible risks posed by inadequate sanitation provision, particularly in urban areas where most boreholes are now dysfunctional and funding for water treatment chemicals remains a challenge in cities such as Harare.

PILLAR 2: BUILDING RESILIENCE

Humanitarian action alone will be unable to break the cycle of recurrent crises. IPCC 5 predicts that extreme weather will occur with increasing frequency and intensity and therefore systemic change is required to avoid repeat shocks. This is in the line with the outcome of the World Humanitarian Summit, which called for “humanitarian and development actions to converge around the need to prevent, prepare for and respond to crises, particularly with regard to the most vulnerable and at risk populations”⁹. In short to increase resilience, which can be defined as enhancing the capacity of at-risk individuals, households, communities and systems to anticipate, cope, adapt and transform from the effects of shocks, hazards and disasters.

This pillar puts forward a call to action for scaling up the resilience response to break the cycle of recurrent drought emergencies in Southern Africa. It provides (i) a succinct definition of resilience (ii) proposed priority areas for resilience investment and provides a snapshot of progress underway to build on existing resilience programming and (iii) examples of good practices and singles out the development of a strategic regional level resilience programme.

Defining resilience

Resilience can be defined as enhancing the capacity of at-risk individuals, households, communities and systems to anticipate, cope, adapt and transform from the effects of shocks, hazards and disasters.

There are three capacities of resilience:

- Absorptive Capacity: the ability to minimize exposure to shocks and stresses through preventative measures and appropriate coping strategies to avoid permanent, negative impacts¹⁰.
- Adaptive Capacity: making proactive and informed choices about alternative strategies, systems and technologies, based on an understanding of changing conditions.
- Transformative Capacity: the governance mechanisms, policies/regulations, infrastructure, community networks, and formal and informal social protection mechanisms that constitute the enabling environment for systemic change¹¹.

In the case of the Southern African region, which has historically been exposed and is vulnerable to weather events and shocks and highly dependent on rain fed agriculture, resilience measures should include:

- Climate smart agriculture to address the disastrous effects on agriculture, food production and nutrition.
- Integrated water resource management and critical water supply challenges from household up through national levels, (including unprotected sources of drinking and bathing water) which are at the core of the El Niño and other droughts.
- Early Warning systems and climate information that supports agricultural decision making.
- Social protection systems.
- Early recovery programmes that build on humanitarian efforts and link to recovery and resilience.
- Efforts to mitigate forced migration that result from environmental factors.

9 After the World Humanitarian Summit: Better Humanitarian-Development Cooperation for Sustainable Results on the Ground (2016) p.6

10 The State of Resilience Programming in the 3RP, UNDP RBAS 2016

11 For an elaboration of these concepts see for example Bene 2012 and Conostas 2014.

Priority Resilience Action Areas

Resilience Action areas	Key Resilience Capacity		
	Absorptive	Adaptive	Transformative
Climate smart agriculture, Livelihoods and diversification of production			
Boost resilient crop production (appropriate technologies, practices, varieties, inputs, value chains, farmer awareness of likely weather conditions)		X	
Support to policy and institutional work that analyses production systems			X
Scale up Community-based climate resilient early recovery and livelihoods programmes for people affected by the El Niño-induced drought	X	X	
Invest in on-farm diversification and climate-smart agriculture		X	X
Establish new technologies for climate information and dissemination to support agricultural decision making		X	X
Support to adaptive management of crop, livestock, fisheries and forestry systems		X	X
Invest in upgrading storage systems	X	X	
Strengthening farmer linkages to private sector-driven inputs and produce markets			X
Social safety nets and systems			
Integrate humanitarian relief operations with national safety nets (with focus on under-served groups); provide food but also inputs and seeds for next growing season		X	X
Develop integrated registries of vulnerable households		X	X
Replace in-kind responses with cash transfers wherever possible		X	
Scale up opportunities for cash/food for work/ agricultural input vouchers	X		
Early Warning Systems (EWS), Disaster Risk Reduction (DRR) and Climate Change risk information			
Strengthen the DRR and Climate risk plans and strategies and capacities of government at national and sub-national levels as well as at community level		X	
Increase use of climate information and analysis for decision making, ensure that Early warning systems prioritize agriculture, livestock, fisheries and forestry systems and focus on the people exposed to risk			X
National Policies and Strategies key to Resilience building			
National Resilience Strategies - development of multi-sector frameworks, integrated with national development plans, DRR and CCA policies and plans, and linked to global and regional policy commitments			X
Cross linkages with expanded work on DRR governance and piloting of resilience systems analyses such as CADRI			X

Integrated Water and Natural Resource Management			
Technical support to integrated water resource management at institutional level			X
Strengthen community natural resource and rangeland management	X	X	X
Strengthen community water conservation practices, technologies and infrastructure management including community led total sanitation projects to end open defecation and reduce associated disease and malnutrition	X	X	
Mitigate forced migration that result from environmental factors			
Integrate human mobility management work in DRR and CCA policies plans by including migrants in DRR work; informing urban development about current and future mobility trends; managing relocations, evacuations, and displacement to prevent future risks and reduce existing ones	X	X	X
Technical support for preparing and managing disaster-induced population movements to reduce the direct and indirect impacts of natural hazards and climate change	X	X	

[1] The objective of the Capacity for Disaster Reduction Initiative (CADRI) is to enable the UN and others to support governments to build and implement a coherent framework for developing national capacities for DRR

PROGRESS IN THE REGION

A mapping of Resilience programming undertaken in the seven tier 1 and 2 countries of the RIASCO Action Plan showed a broad scope of programming on resilience underway in Lesotho, Zimbabwe, Mozambique, Malawi, Swaziland, Angola, and Madagascar. Community-based early recovery programming in support of agricultural livelihoods (assets, infrastructure, training), and water and livestock is evident in all countries with climate-smart agricultural practices being introduced. Governments in the region are showing strong commitment to Early Warning and, DRR as illustrated by the institutional mechanisms with a mandate for DRR¹² and systems and plans in place. In addition, considerable work is ongoing to improve climate monitoring and early warning systems specifically linked to climate shocks impacting food security.

Governments are expanding social protection programmes, including through cash transfers, to the poorest and most vulnerable families. Healthier and better nourished people are more resilient, and there are numerous projects at household, community, school and clinic level for building local, sustained management of disease and malnutrition prevention through better access to clean water and safe sanitation, even during droughts.

Six out of the seven priority countries have drafted or started national resilience frameworks or strategies. While the depth and content of these policy documents varies, the recognition of the need for national resilience strategies is an important sign of progress on resilience and in transformative capacity for systemic change. The generation and use of climate data, information and methods have begun in some countries. The implementation of small farm holder insurance schemes and access to finance in four of the seven countries is an important step in transformative resilience building.

The mapping indicates areas of similar activities by organizations for the tier 1 and 2 countries, (although it does not capture government programmes). Many activities, when synchronized and better coordinated among actors, would potentially result in robust resilience and systemic change in key areas such as agriculture diversification and integrated water resource management. Robust efforts in emergency preparedness and an expanded scope of DRR and CCA can also lead to systemic change and individual and social transformation¹³

12 AU Report on Assessment of implementation of the extended programme of action for implementation of the Africa regional strategy for disaster risk reduction and the Sendai Framework, July 2016.

13 UNDP RBAS, 2016 on transformative resilience and systemic change.

EXAMPLES OF RESILIENCE PROGRAMS UNDERWAY IN THE REGION

Climate-smart agricultural practices and resilient livelihoods

In Angola, FAO is implementing a programme which links immediate response (vaccination and emergency feeding) and prevention and preparedness elements (strengthening disease surveillance, quarantine and trans-boundary animal diseases control), with resilience building by integrating soil fertility management in vulnerable areas using the farmer field schools programme. This offers scope for learning and exchange of best practices, further enhancing farmers' knowledge and productivity, and reinforcing their resilience to future shocks. It has benefited 21,000 people in Huila, 7,200 and indirectly 8,000 people in Namibe and Cunene.

R4 Rural Resilience Initiative in Malawi and Zambia is a comprehensive risk management approach developed by OXFAM and WFP to help farmers and communities become more resilient to climate variability and shocks. Farmers can access weather index insurance by paying with their labour through Insurance-for-Assets (IFA) schemes, which are built into either existing social safety nets, disaster risk reduction schemes, or WFP's Food Assistance for Assets program. By protecting farmers' investments against a poor season, R4 enables households to invest in riskier but more remunerative enterprises through a combination of four risk management strategies: improved resource management through asset creation (risk reduction), insurance (risk transfer), livelihoods diversification and microcredit (prudent risk taking) and savings (risk reserves). Participants establish small-scale savings, which are used to build 'risk reserves'. To ensure long-term sustainability, R4 contributes to the creation of rural financial markets, by building the capacity of farmers, local insurance companies and micro-finance institutions and by gradually transitioning farmers to pay for insurance in cash.

WFP's Purchase for Progress (P4P) Programme connects smallholder farmers to markets in Mozambique, Malawi, Tanzania and Zambia. P4P works with smallholder farmer organizations to build agricultural markets and help farmers develop business and harvesting skills, improve credit and market access, and through capacity building and procurement practices. Under P4P, stable demand from WFP and partners provides smallholder farmers with an incentive to invest. Investing in smallholder farmers has the potential to improve hundreds of millions of livelihoods worldwide. Investments in smallholder agriculture can also strengthen rural economies, build more effective markets and increase food security and nutrition for those who need it most. For example in Mozambique, WFP already purchases cowpeas from IKURU - a cooperative based in the northern province of Nampula, which works with 9,500 small-scale farmers.

Social safety nets and systems

Resilience and scalability of social safety nets: Drought/shocks can be an opportunity to restructure and expand safety nets. In Lesotho, a wide range of partners, including UNICEF, FAO, NGOs, Government, development partners, communities and beneficiaries, are engaged to top up existing safety net schemes (agricultural inputs, cash/food/vouchers transfer combined with agricultural start-up kit and training) and to maintain existing safety nets (school feeding, child grants, pensions, nutrition support). The vulnerability criteria under the Lesotho Vulnerability Assessment Committee (LVAC) was used to develop typologies of households to be targeted. Lesotho's National Information System for Social Assistance (national registry system) under the Ministry of Social Development was used for targeting beneficiaries. A robust community-based targeting system ensures that those in need, but not enrolled in the current safety nets, are not left out. Including agricultural inputs and start-up kit and training with the safety net top up programme has greatly impacted household resilience.

Social safety nets in Madagascar: The World Bank (WB) is working with the Government and humanitarian response partners to integrate humanitarian relief operations with national safety nets focusing on under-served groups.

Strengthening resilience of vulnerable smallholder farmers to climate risks through coordination between agriculture and social protection in Malawi and Lesotho. FAO is working with other partners to (i) Strengthen coordination of social support programmes at national, district and community level; (ii) Develop a single targeting process for beneficiaries of social support programmes; (iii) Develop a single registry for social support beneficiaries at district level in coordination with other partners. In Lesotho, the provision of the agricultural kits to households as part of the safety net top up programme by humanitarian relief agencies has been highlighted as a good practice for its significant impact on household resilience.

Early warning systems, disaster risk reduction (DRR) and climate change risk information

UNDP, in partnership with the Government of Malawi's Environmental Affairs Department is implementing a climate resilience project to strengthen community resilience and adaptation to climate change through rights-based approaches, participatory and inclusive approaches and utilization to water resources and forest based products.

Using climate information for improved agricultural decision making in Mozambique.

UNDP is supporting the increase of climate information and improvement of Early Warning Systems - including installation of affordable WMO-certified weather stations; dissemination of this information and training of agronomists on accessing, using and applying the information. Automatic weather station coverage and trained technicians assist agricultural decision making. New models and approaches for generating and using climate data and information, and multi-hazard mapping have started in Zimbabwe, Mozambique, and Lesotho.

IOM is providing capacity-building for Disaster Risk Management (DRM) stakeholders in Angola, Namibia, Mozambique, Botswana, Zambia, Malawi to enhance national capacity to respond before, during and after natural disasters, by developing training manuals and tools tailored to the specific needs of each country along with promoting information and best practices exchange between the countries.

National policies and strategies

Six out of the seven tier 1 and 2 countries have drafted or started National Resilience Strategies: Zimbabwe, Malawi, Madagascar and Lesotho have completed drafts while Angola and Swaziland have now started.

Breaking the Cycle and Building Resilience in Malawi is a multi-sector, multi-year joined up humanitarian and development response in support of the National Resilience Strategy and the National Development Plan with climate smart agriculture and social protection at the core. The Resilience Strategy serves as the platform upon which Development Partners converge resilience programming in livelihoods, social protection and humanitarian relief to enable climate-resilient development in Malawi.

Integrated water and natural resource management

Technical support to integrated water resource management at institutional level in Mozambique and Swaziland and in schools and communities in all countries is ongoing. Increasing water storage (small multi-purpose reservoirs and sand storage dams); borehole and rainwater harvesting and storage systems for households, schools, health clinics as well as for agriculture; artificially recharging aquifers; solar power water pumping; water conservation and water recycling and re-use, are underway in all countries supported.

Regional SADC Integrated water resources management-SADC-WIN

Addressing poor water development and management as a central driver of the resultant food and energy security impacts require a medium to longer term perspective.

UNESCO in partnership with R-UNDG and SADC Water Division is leading a regional initiative on integrated water resources management titled SADC-WIN, as means to providing long-term relief to the current food-water-energy challenges of the region. This initiative addresses the root causes of the food and energy security crises, and building resilience and improving people's livelihoods via improved water management.

SADC-WIN addressed the impacts of perennial extreme weather using holistic innovative water chain approaches. A regional consultative meeting was held in October 2016 with over 25 institutions, development partners, UN agencies and NGOs to finalise the regional proposal and partnership for joint action in building long-term resilience to extreme weather events and climate variability through water security. This is a joint 3-5-year medium to long term resilience building project.

JOINT REGIONAL RESILIENCE PROGRAMME

The SADC Secretariat's role in supporting countries to integrate global commitments to climate action and disaster risk management from the Paris Agreement and the Sendai Framework and to foster a resilient path to the achievement of the Sustainable Development Goals is critical to building resilience in the region. RIASCO with the coordination of UNDP has initiated the development of a joint resilience programme with SADC, in support of its critical role.

The purpose is to undertake work on a select number of resilience building areas that can bring value to the work being pursued at individual country levels.

PILLAR 3: ECONOMIC IMPACTS AND POTENTIAL SOLUTIONS FOR MITIGATING RISKS

INTRODUCTION

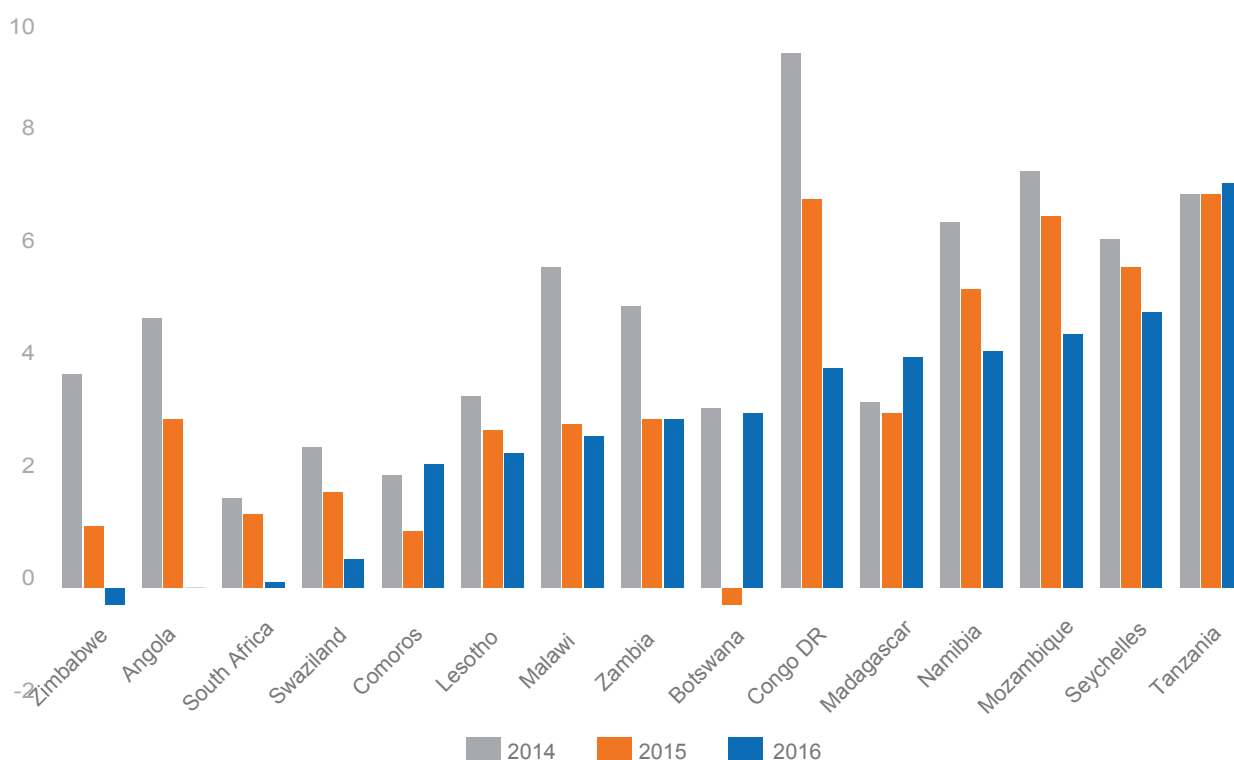
The objective of this pillar is fourfold. First, it will provide an update on the economic situation in the region. Second, a range of available risk management tools in the short, medium and longer-term will be presented to enhance fiscal buffers, strengthen food supply chains and protect vulnerable groups. Third, policy changes as implemented by governments in the region will be examined. Fourth and finally, it will outline a range of interventions supported by the World Bank (WB), African Risk Capacity (ARC) and the African Development Bank (AfDB) in order to scale up the response to the ongoing crisis.

MACRO-ECONOMIC CONTEXT

Large fiscal deficits and sizeable debt burdens have eroded fiscal space in several countries. The challenge for these countries is to bolster fiscal buffers so as to be able to respond to adverse shocks and to invest in infrastructure and social programs.

GDP growth is slowing down. A combination of weakened commodity prices and tighter financial conditions, domestic policy uncertainties, adverse weather conditions, as well as political and security concerns, has continued to negatively impact on economic activities in the Southern Africa region. After falling to 2.7 per cent in 2015, real GDP growth in the SADC region is expected to slow further to 1.6 per cent by the end of 2016.

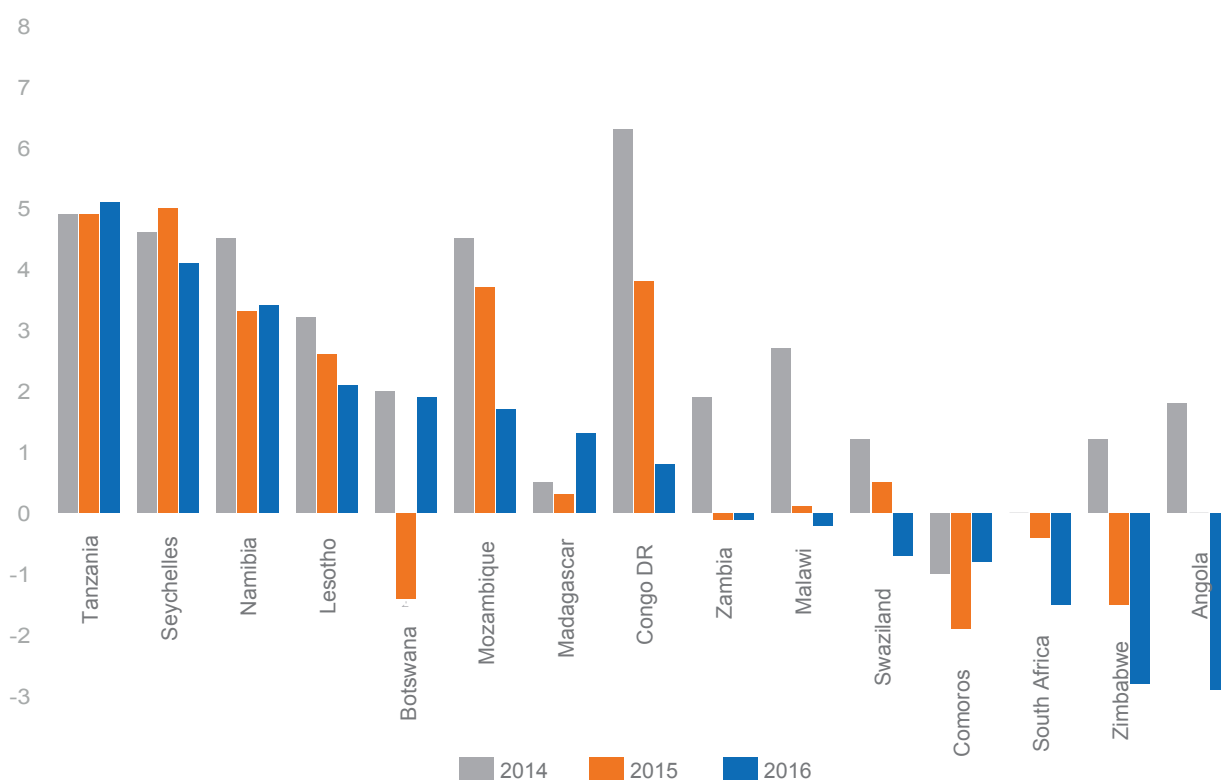
REAL GDP GROWTH (%)



However, the per capita economic growth varies greatly across countries. While many countries have registered a sharp decline in economic growth, a handful of countries have continued to post annual average growth rates that exceed the top tercile of the regional distribution; and several other countries have moved into the top tercile of performers. At 5 per cent growth rate, Tanzania, for example, is projected to record the strongest per capita GDP growth in sub-Saharan Africa whereas GDP per capita in Angola is projected to contract by 2.9 per cent and Zimbabwe by 3 per cent.

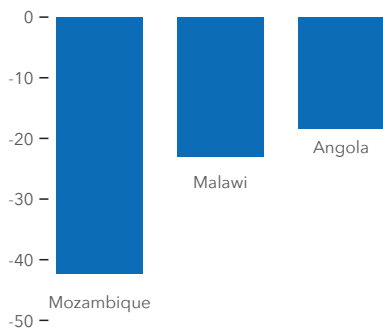
Each country's economic performance is affected by multiple factors besides the drought. The biggest economy in the region, South Africa, had a 0.1 per cent contraction in its GDP in the first quarter of 2016 not only as a result of the effect of drought on agricultural production but also by the deterioration in the performance of the mining sector. Similarly, while remaining positive overall, growth in Mozambique has decelerated significantly in the first half of the year partly due to the increasingly negative investor sentiment. In general, commodity-importing countries has been relatively resilient compared to the commodity-exporting countries.

REAL PER CAPITA GDP GROWTH (%)



Increased external deficits are putting pressure on national currencies, with Mozambique, Angola and Malawi experiencing the sharpest depreciation of currency values, increasing the price of imported food. In August, headline inflation reached 38 per cent (y/y) in Angola and in Mozambique annual inflation hit 24.92 per cent in September, compared to only 2.73 per cent a year earlier.

CURRENCY DEPRECIATION



Government finances have remained under pressure across the region, severely limiting their capacity to respond. Government debt has continued to rise in the region amid large fiscal deficits.

Among other commodity exporters, Mozambique is expected to see its public debt exceed 100 percent of GDP. Both Angola and Mozambique saw their credit ratings cut because of concerns about debt sustainability. Overall the macro-economic outlook has deteriorated further, with fiscal space even more constrained, particularly in the countries that are most impacted

by the drought, limiting their ability to cope with its impacts.

AVAILABLE RISK MANAGEMENT SOLUTIONS TO MITIGATE DROUGHT IMPACTS

Governments need to consider a range of risk management instruments, at the national or regional level, to mitigate the impacts of drought and other natural disasters.

The present drought provides an important window of opportunity to focus attention on the feasibility and establishment of new instruments to enhance resilience to shocks in the medium to long-term. An optimal disaster risk management and resilience strategy will seek to balance the effective and efficient use of available resources to maximize the resilience of households, businesses and governments to a range of shocks.

The choice and mix of instruments will ultimately depend on the country context, the government’s overarching objectives, the probability of key risks, and the intensity of their impact. To this end, the table below highlights a range of practical options to build resilience and manage systemic risks through a sequenced, prioritized and cross-sectoral framework over the short, medium and longer-term to support three distinct objectives:

- Ensure the availability of fiscal buffers at all times: Addressing food crises requires fiscal and foreign currency resources to finance food aid, reduce food taxes and extend social programmes. Retention of sufficient fiscal and foreign exchange reserves requires saving in good times to counter-cyclically smooth public spending in bad times. Related to such sound fiscal management is the capacity to borrow externally without compromising debt sustainability.
- Build resilient production systems and markets through economic and productive diversification. Most of the rural populations in Southern Africa are dependent on the extractive use of natural resources through farming, fishing, crafts and the harvesting of forestry products. In addition there is overdependence on maize as a single, soil-depleting crop which is vulnerable to drought. Due to technological gaps, poor physical infrastructure, inadequate support services, dependence on rain-fed agriculture as well as the eroding impact of frequent shocks (such as drought, floods, transboundary pests and diseases), farmers’ production capacity is extremely low, relegating households and communities to a life of subsistence. There is an acute need for economic diversification (adopting a wider range of economic activities, e.g. off-farm income), as well as productive diversification to reduce the overdependence on rain-fed agriculture.

Support poor and vulnerable household by building on existing social safety net systems: The region has a basic network of safety nets that provide cash to the most vulnerable; though efficiency, coverage and targeting can be improved. Where markets are functioning and basic supplies are readily available, governments and partners can provide emergency cash assistance through such existing systems. In the medium to long term improvements to the systems contribute to increased resilience and ability to cope with crises.

Southern Africa Proposed Risk Management Framework for Intervention

Interventions	Implementation time required (in years)		
	<1	1-3	>3
Building fiscal buffers			
Assess and quantify fiscal impact of shocks and analyze costs over time		X	
Evaluate budget mechanisms and arrange procedures for rapid budget re-allocation	X		
Establish counter-cyclical macro-fiscal policies to support savings/reserves	X		
Establish counter-cyclical macro-fiscal instruments, such as contingency funds		X	
Establish risk units in Ministries of Finance, with supportive institutional structures		X	
Arrange contingent loans and contingent grants		X	
Structure, design, and finance risk transfer solutions (through stand-alone contracts or risk pools)		X	
Strengthen and consolidate contingency plans	X		
Establish budget execution mechanisms	X		
Building resilient production systems and markets			
Boost resilient crop production (seeds, inputs, farmer awareness of likely conditions)	X		
Revise/remove policies that contribute to single-crop dependency, such as non-market based price stabilization and input support programs			
Replace ad hoc import/export restrictions with market-based price and supply hedging arrangements			
Invest in on-farm diversification and climate smart agriculture	X	X	X
Modernize management and operation of strategic grain reserves	X		
Invest in upgrading storage systems		X	X
Provide support to local and regional trade finance arrangements	X	X	
Invest in public-private sector approach to develop micro-level insurance programs		X	X
Building on existing safety net systems			
Integrate humanitarian relief operations with national safety nets (focus on underserved groups) to provide food but also inputs and seeds for next growing season	X	X	
Develop integrated registries of vulnerable households	X	X	

Replace in-kind responses with cash transfers wherever possible	X		
Scale up opportunities for cash/food for work		X	
Establish procedures and policies support scaling up national systems in the event of shocks. This includes : <ul style="list-style-type: none"> defining triggers for scale up (using early warning info) analyzing costs of different scenarios (how much, how often, who) developing financing strategies 		X	

RESPONSE TO DATE BY GOVERNMENTS

Even though implementing policy changes to build fiscal buffers, promote resilient production systems, markets and strengthen and expand social safety nets take time to implement, some initial policy and budgetary changes in response to the current crisis has been put in place:

The Government of Lesotho has allocated \$10 million from its own resources (equivalent to 0.6 per cent of GDP)

The Government of Malawi is seizing the opportunity to introduce significant policies to lay the foundations for a more resilient economy, and is due to launch a national resilience Plan aptly titled **Breaking the Cycle**. Following the conclusion of the irrigation Master Plan, the irrigation policy is also due to be introduced this year, reducing the dependence on increasingly erratic rainfall.

COMPLEMENTARY FINANCING INSTRUMENTS BY INTERNATIONAL FINANCE INSTITUTIONS

The World Bank

WB offers policy advice, research and analysis, as well as technical assistance, which underpins WB’s financing and helps inform developing countries’ own investments. In the context of a crisis such as El Niño, WB can offer support in several ways, provided there is an official request by government (typically the ministry of finance) or regional entity (where applicable). Following the declaration of national emergencies, several countries have approached WB for support. This includes:

- Post-disaster needs assessments (Malawi and Angola) and technical assistant for other vulnerability assessments (Zambia, Zimbabwe and SADC).
- Restructuring of existing portfolio (Angola, Malawi, Swaziland and Lesotho).
- Strengthening national safety net programmes as a delivery mechanism for assistance in times of shock (Lesotho, Malawi, Madagascar, Mozambique and Swaziland).
- Emergency recovery loans (Malawi, Lesotho, Madagascar and Mozambique).
- Preliminary advice on potential risk mitigation options to learn more about the scope of catastrophe deferred drawdown options (Swaziland) and the scoping of national agriculture insurance programme (South Africa).
- Food subsidies (Lesotho).

The Bank’s response has been mindful to balance emerging needs with the need for coherent long-term policy actions. The table below summarizes new operations developed in response to the drought.

Support by the World Bank in response to the drought in Southern Africa

Botswana	\$150 million for Emergency Water Security and Efficiency Project (under preparation). The projects aim to improve the availability of water supply to areas affected by the drought and protect water resources from further decline.
Lesotho	<p>\$20 million from IDA’s Crisis Response Window, as additional financing the Social Assistance Project (Approved by WB Board on Dec 6) to (i) provide liquidity to the Government to ease the fiscal pressure due to the emergency response; (ii) support the current and future use of social assistance as a crisis response mechanism; (iii) strengthen the future scalability and resilience aspects of social assistance. TA to build disaster responsive Social Projection systems</p> <p>\$1.4 million through reallocation of International Development Association (IDA) and International Fund for Agricultural Development (IFAD) funds to Smallholder Agriculture Development Project CERC component (under preparation) to scale up FAO emergency seed pack distribution and small-scale rainwater harvesting and irrigation systems.</p>
Madagascar	<p>\$20 million from IDA’s Crisis Response Window, combined with \$15 million from the national IDA allocation, as additional financing to the Social Safety Net Project to expand cash transfer activities and complementary measures to support livelihood recovery; scale up interventions on food supplementation through the existing network of community nutrition sites.</p> <p>\$350,000 analytical work on El Niño impacts in Madagascar on food security, agriculture, and livestock and on the population of the southern region. Analyze the impact of El Niño events on food security, crops and livestock; and identify effective responses to protect the poor and vulnerable population from the devastating effects of the drought intensified by the El Niño phenomenon.</p>
Malawi	<p>\$70 million as additional finance for Social Cash Transfers to expand coverage of cash transfers nationwide, and to finance productive community driven public works.</p> <p>\$104 million Emergency Response Loan to meeting immediate food security needs; scale up inputs for assets resilience program; building drought resilience in water management and agricultural productivity; and technical assistance to strengthen drought resilience.</p> <p>\$10 million in additional financing for the Nutrition and HIV/AIDS project for emergency nutritional supplies for the management of acute malnutrition in 14 drought affected districts.</p> <p>\$30 million Budget Support (under preparation) to augment a (\$50 million) Development Policy Operation to support strong policy reform measures aligned to the “Breaking the Cycle” agenda and structural reform in the agriculture sector.</p> <p>\$300,000 Analytical work on strengthening El Niño preparedness and response Activities: Needs Assessment; Strengthening Disaster Response Implementation System in the Agriculture Sector and other relevant institutions; and Project Coordination.</p>
Mozambique	<p>\$20 million activated through IDA Immediate Response Mechanism. The funding is available to address the immediate needs for food assistance, nutrition, health, water supply and agriculture recovery.</p> <p>\$30 million requested from IDA’s Crisis Response Window as additional financing to two existing lending operations: the Emergency Resilient Recovery Project and the Social Safety Net Project to scale-up the implementation of ongoing emergency recovery and resilience building activities, and social protection programs.</p> <p>\$200,000 analytical work on Food security monitoring and Climate Resilience Planning. Activities: the development of a food market monitoring system that would provide early warning signals of food shortages; and the design of agriculture production recovery programs in affected areas.</p>

Swaziland	\$0.9 million through reallocation of IDA funds of Local Government Development Project to CERC component to reimburse costs of drought emergency response activities carried out by the National Disaster Management Authority. Technical assistance on building disaster responsive Social Protection.
Tanzania	\$240,000 Analytical work in support of El Niño response. Activities: Diagnosis of Impacts of El Niño on Food Security; and Assessment of Needs
Zambia	\$250,000 analytical work on El Niño Effects on Agriculture Activities: Strengthening Agricultural Policies; Agricultural risk assessment; and Knowledge Exchange and Dissemination Framework.
Zimbabwe	\$250,000 analytical work on strengthening El Niño response Activities: The analysis of production, price and growth impacts of El Niño or La Niña; and develop response plans in line with larger efforts to address adaptation to climate change and drought.
Regional	\$590,000 analytical work on strengthening El Niño Response and Food Systems Resilience in East and Southern Africa. Activities: El Niño Impact on Grain Markets & Trade; El Niño Impact on Seed Supply; Regional EWS/MIS Needs Assessment; El Niño Country Case Studies; and South-South El Niño Study Tour.

African Development Bank

AfDB uses a number of instruments in supporting its regional member countries. As part of its five strategic priorities as well as its Feed Africa objective¹⁴, AfDB is elaborating a new African Agriculture Transformation Strategy to support four specific goals of the Comprehensive African Agricultural Development Programme (CAADP). This includes (i) contributing to eliminate extreme poverty in Africa by 2025; (ii) ending hunger and malnutrition in Africa by 2025; (iii) making Africa a net food exporter; and (vi) moving Africa to the top of export-orientated global value chains where it has comparative advantage. AfDB has invested an average of \$612 million per year in agricultural and agribusiness from the period of 2011-2015. As one of its five strategic priorities, AfDB envisages agricultural investment rising to \$2.4 billion per year going forward.

In the context of the Southern Africa El Niño-induced drought, AfDB has four main categories of interventions in the affected region, with an aim to address both immediate solution and long term resilience building in affected areas:

- **Emergency support:** AfDB's emergency relief window has \$7 million unallocated for the current financial year. While this may not be sufficient to support all the countries to respond to the impact of drought, the Bank could allocate this amount to emergency response in the most severely impacted country (ies). The Bank will also look into the possibility of reallocating some additional funds to the Emergency Relief Fund from the contingency fund. In Swaziland for example, AfDB donated US\$1 million to WFP towards food assistance.
- **Budget support:** The Bank will explore the possibility of reallocating resources through close examination of existing country portfolios. Resources allocated to two categories of projects, i.e. those that qualify for cancellation and those in the pipeline for preparation and approval under African Development Fund (ADF) 13¹⁵ may be freed up to the respective countries for targeted budget support in areas aligned to emergency drought response. This will give them flexibility to address the impacts of the current drought. Pursuing this option will require prior consultations with affected countries.

14 <http://www.afdb.org/en/news-and-events/article/feed-africa-afdb-develops-strategy-for-africas-agricultural-transformation-15875/>

15 <http://www.afdb.org/en/about-us/corporate-information/african-development-fund-adf/about-the-adf/>

- Long term intervention: The Bank has an ongoing long term development programme on drought and resilience building in the Horn of Africa called Drought Resilience and Sustainable Livelihoods Programme (DRLSP). The Bank will explore the possibility of initiating similar long-term resilience building programme for other vulnerability hot-spots in other parts of Africa, such as Southern Africa. Specifically, the Bank will work with the affected countries in Southern Africa to allocate its next financing cycle (ADF 14) to long term resilience building programs to address the impacts of climate-related floods and droughts in the region. Experience has shown that countries are generally reluctant to allocate part of the Performance-Based Allocation for resilience building in addition to any funds that can be leveraged from the regional window.
- Long term disaster risk insurance: Many institutions are currently providing weather index insurance at national and local levels in the continent. The Bank will provide a nearly €20 million (\$21.1 million) grant resources to support four African Regional Climate Centres (RCCs) in West Africa, Eastern Africa, Central Africa and Southern Africa and the continental African Centre for Meteorological Applications for Development (ACMAD) to strengthen their early warning and management systems. AfDB will also support the development of weather-index insurance products in the vulnerable countries, as availability of high resolution climate and weather information is essential to analysing climate related risks.

African Risk Capacity

In 2012, the African Risk Capacity (ARC) was established as a specialised agency of the African Union (AU) to help Member States improve their capacities to better plan, prepare and respond to extreme weather events and natural disasters, as well as to protect vulnerable populations from the risk of food insecurity. In 2014, AU Member States established ARC Insurance Company Limited (ARC Ltd) as a financial affiliate and licensed mutual insurer to jointly manage the potential weather and other disaster risks. To date, the ARC Establishment Agreement has been signed by 32 countries across the continent, including the Government of Malawi, and is a critical part of Africa's new climate and disaster management infrastructure.

In its first year of operation, four governments, including Kenya, Mauritania, Niger and Senegal, purchased \$129 million drought insurance cover from ARC Ltd at a total of \$17 million in premium costs paid by those governments. Following a poor agricultural season in the Sahel, by February 2015 three Member States received pay-outs from ARC Ltd totalling over US\$26 million which allowed these governments to deliver timely assistance to 1.3 million people and over half a million livestock.

This intervention averted a situation that could have forced millions of families to sell off hard-won household assets, take children out of school, migrate, or simply accept that their herds have perished, pushing them further into chronic food insecurity.

In May 2015, ARC added three countries to the pool, The Gambia, Mali, and Malawi. Each of these countries, in addition to the original four members, secured drought coverage for the 2015/16 policy year totalling \$178 million with corresponding premium of \$24.7 million. ARC is now expanding its products from drought alone to also cover flood and tropical cyclone risks across the continent.

Overview of ARC Response to the 2015 - 2016 Drought in Malawi

Malawi is a Member of ARC Ltd which issues parametric insurance policies that pay out based on results from its drought risk model, Africa RiskView. ARC Ltd will make a payout of \$ 8.1 million to the Government of Malawi to support the response to drought affected families due to food insecurity resulting from the poor 2015/16 agricultural season. This payout comes after

the completion of a technical review process of the performance of the agricultural season to reconcile outputs from the Africa RiskView model with impacts on the ground. The payout, which will be released to Malawi as soon as it's Final Implementation Plan (outlining how the payout will be used to respond to drought affected people in the country) is approved by the ARC Agency Governing Board. ARC will to continue to help Malawi to develop a comprehensive and effective drought risk management strategy.

CONCLUSION

Droughts and other climatic shocks will continue to impact Southern Africa, with likely increased frequency and intensity. The region is particularly vulnerable, given that its staple crop, maize, is highly susceptible to inter-annual rainfall variations, resulting in highly variable yields and price volatility.

With climate shocks such as El Niño the 'new normal' more needs to be done to enhance countries' ability to manage and withstand shocks. Governments have a number of tools at their disposal to enhance their capacity to better withstand repeat shocks, by building fiscal buffers, robust food supply chains and dynamic safety-net systems. Although, the uptake of these new instruments has been limited to date in the sub-region, the latest crisis provides a unique window of opportunity for greater joint action amongst governments, humanitarian relief agencies and development partners, by enhancing the collective understanding of the range of options along the humanitarian, resilience, macro-economic and risk management spectrum.

ANNEX 1: PRIORITIZATION FOR THE REGIONAL HUMANITARIAN RESPONSE

Given finite resources, there is a need to prioritize the international humanitarian intervention by using available evidence about existing vulnerabilities, exposure to climatic change, the impact of the drought, and the capacity of governments to respond. This RIASCO Action Plan revision updates the prioritization model presented in the original document by incorporating new data on exposure and impact (changes in food prices and agricultural output and number of food insecure) and government coping capacity (national debt and fiscal balance).

	Vulnerability	Exposure and impact	Lack of Capacity to cope	Risk
Angola	6	3.4	5.9	4.9
Botswana	2	3.7	4.2	3.1
Comoros	3	3.2	7.8	4.2
DRC	n/a	n/a	n/a	n/a
Lesotho	5	4.1	6.5	5.1
Madagascar	8	3.5	8	6.1
Malawi	7.5	9.2	8.3	8.3
Mauritius	1	1	3.6	1.5
Mozambique	7	6.1	8.6	7.2
Namibia	4	6.1	5.4	5.1
Seychelles	1	1	4.3	1.6
South Africa	2	2.1	3.8	2.5
Swaziland	4	3.8	5.3	4.3
Tanzania	6	3.5	6.9	5.3
Zambia	6.5	4.6	7.1	6
Zimbabwe	5.5	7.4	7.7	6.8

In addition the model looks at the degree of underfunding of the appeal to determine the prioritization of countries. The level of funding within countries varies greatly by sector and the following table shows which sectors are relatively well funded and which are relatively underfunded.

	Coordination	Education	Food Security and Agriculture	Health and Nutrition	Protection	WASH	Early recovery	Overall funding shortfall
Angola	85.9%	81.7%	86.5%	87.4%	94.3%	83.4%	n/a	84.0%
Lesotho	0.0%	99.3%	21.3%	86.7%	0.0%	65.5%	n/a	29.7%
Madagascar	72.8%	24.5%	74.3%	90.3%	n/a	81.7%	100.0%	70.6%
Malawi	0.0%	27.6%	21.4%	22.8%	9.4%	100.0%	n/a	25.9%
Mozambique	n/a	n/a	47.4%	53.2%	79.0%	38.3%	96.0%	34.0%
Swaziland	41.8%	85.7%	59.7%	0.0%	14.2%	76.4%	n/a	58.3%
Zimbabwe	66.7%	n/a	48.3%	56.3%	89.7%	80.3%	n/a	39.9%
Total	45.0%	37.5%	35.8%	60.4%	81.6%	80.9%	96.7%	42.1%

This prioritization model is constructed as a guide, and prioritization is not formulaic. The model presents and combines the best available evidence in a logical order. However, there are dimensions, like for example the willingness of a host government to assist or the capacity of the humanitarian to access and assist those in need that are not easily quantitatively captured.

In addition some risk – like conflict or disease outbreaks are also not easily measured.

Upon re-evaluating the evidence Madagascar was moved up to tier 1, due to the unique severity of the crisis in the Grand Sud (with 40 per cent of the food insecure population in IPC 4) and the high level of underfunding of the humanitarian appeal, which increased to \$155 million but is only 29 per cent funded.

Tier 1: Most severely affected

Malawi scores poorly in all categories, with marked vulnerability due to chronic poverty. It's very exposed to climatic shocks as nearly 60 per cent of the workforce is reliant on rain-fed agriculture, which constitutes one third of GDP. Nearly half (45 per cent) of the rural population is food insecure, exacerbated by increased food prices. In August Malawi was the country with the highest reported number of alert for price spikes (ALPS) monitored markets in Alert and Crisis across southern Africa (88 per cent). The number of people in need has increased by 200,000 to 6.7 million. GDP per capita is falling and government capacity to respond to the increased needs is negatively affected by high levels of debt and constrained fiscal space. Following a major public financial management scandal in 2013, the level of on-budget development assistance received by Malawi has declined significantly. On the positive side, the humanitarian appeal in Malawi is the best funded in the region (74 per cent).

Madagascar has the most vulnerable population in the region as four out of five people live below the poverty line and women and girls face high levels of violence, including child marriage, adolescent pregnancy, sex tourism, and harmful cultural practices. The agricultural sector employs 77 per cent of the population the highest proportion in the region, many of these are female headed households with small farms. The sector constituting one quarter of GDP, which makes it highly exposed to climatic shocks. Even though national agricultural output is not affected, this masks regional variation, with the drought having affected the South of the country, where maize, cassava, and rice production decreased by as much as 95 per cent compared with the levels obtained in 2015. The Government has limited capacity to respond as GDP per capita is low and little has been invested in social safety nets, with only 2.2 per cent of the poorest 20 per cent covered, which represents a meagre 1 per cent of GDP.

Mozambique is very exposed to shocks in the agricultural sector as nearly 70% of the population is reliant on this for employment suffers the highest food price increases in the region. Women and girls are particularly at risk of shocks, with lower education; fewer alternative employment options; less control over productive land and their primary burden of caring for their families, they are forced into sexual abuse in order to provide for themselves and their families. Maize prices in August/ September were 182 per cent above the 5-year average and 121 per cent above last year's. The lack of capacity to cope is marked by low GDP per capita, high government debt, and very limited social safety nets that cover less than 8 per cent of the poorest 20 per cent. The humanitarian appeal is only 65 per cent funded.

Zimbabwe's exposure to agricultural shocks is high as 60 per cent of the population relies on agriculture for income, with 40 per cent of the rural population affected by food insecurity, compounded by a nearly 50 per cent reduction in agricultural output. Women carry the main burden of agriculture and food production in the country, and 60 per cent of households in rural areas are female-headed, earning on average 40 per cent less than male-headed households. The number of people targeted for assistance has increased from 1.86 million to 3.1 million. The capacity to cope is hindered by low GDP per capita, limited grain reserves and the worst overall ranking of foreign currency reserves. In Zimbabwe, the ongoing non-cooperation status currently prevents IFIs to extend lending, and severely limits fiscal and external borrowing space. The humanitarian appeal is only 60 per cent funded.

Tier 2: Seriously affected

In **Angola**, an estimated 90 per cent of rural population is vulnerable, due to limited access to basic services and road condition that makes them isolated during crisis. Although its aggregate agricultural output is unaffected, the south is suffering from high levels of food insecurity. GDP per capita is projected to decline by 2.7 per cent in 2016 with female-headed household most affected due to their lower earning potential. Government capacity to respond is hindered by high government debt and low grain reserves compounded by the current fiscal pressure resulting from low oil prices. More importantly is the Angola's government limited recognition of the scale of the crisis and the limited capacity of the humanitarian community to respond, coupled with the lowest funding level (only 16 per cent funded) make Angola a real concern.

Lesotho's relatively small agricultural sector makes it comparatively less exposed, yet the government's poor economic performance, including high government debt and poor fiscal balance, make it difficult to meet the needs of a food insecure population which exceeds 30 per cent of the rural population. Food prices have increased by over 40 per cent, which negatively impacts a chronically vulnerable population where three in five people live below the poverty line. This is somewhat offset by the investment in social safety nets, which cover two thirds of the poorest 20 per cent and accounted for 4.6 per cent of GDP in 2014/2015- by far the highest in the region. In addition the Lesotho appeal is over 70 per cent funded.

Swaziland's agricultural sector is relatively small but is severely impacted by the drought with a 30 per cent reduction in agricultural outputs. Over 40 per cent of the rural population is food insecure, or one third of the total population. Rural women and girls, who make up to 40 per cent of household heads in rural areas, have lower education rates and traditional practices restrict their control over land and other household assets. Government grain reserves are limited and its middle income status is not sufficient for it to respond to the magnitude of the shock. Moreover the humanitarian appeal is only 40 per cent funded.

Tier 3: Close monitoring watch list and countries that have not appealed for international assistance

Namibia's agricultural sector is severely affected by drought, with a 44 per cent reduction in outputs and almost half of the rural population facing food insecurity. As a middle income country, the government is fairly well equipped economically to cope with the increased need despite very limited grain reserves, and considering the low levels of vulnerability.

Tanzania has high exposure to climatic shocks as two thirds of the population is engaged in agriculture, representing one third of GDP, however the impact on the sector is minimal. The government's fiscal balance ranking is poor and although social safety nets have good coverage, reaching nearly 80 per cent of the poorest 20 per cent, investment is minimal at 0.3 per cent of GDP.

Zambia's vulnerability ranking is the same as Mozambique's as it suffers from both MDP and absolute poverty. Over half (51 per cent) of the population is dependent on the agricultural sector, but this represents only 10 per cent of GDP. Despite producing a surplus, food prices are 66 per cent above the 5-year average, but only 6 per cent of the total population is food insecure. Government capacity to cope is mixed, with only 1 per cent of the poorest 20 per cent being covered by social safety nets, the lowest in the region, offset by the highest recorded grain reserves.

Tier 4: Affected by drought by sufficient coping capacity

Botswana and South Africa both have government capacity to cope with shocks, made possible by high levels of GDP per capita and extensive social safety nets that cover over 80 per cent of the poorest. Both countries, however, have been severely impacted by the drought, with agricultural outputs falling by 73 per cent and 39 per cent respectively. Food prices in South Africa have increased by 100 per cent and falling commodity prices continue to put downward pressure on the economy. South Africa may be affected by an increase in the influx of migrants from neighbouring countries, particularly from Zimbabwe, as a result of food insecurity. This may further exacerbate tension in particularly the informal urban settlements, which previously were the scene of violence against migrants.

Tier 5: Unaffected by drought

Mauritius, Seychelles and Comoros have the lowest needs, given the negligible impact on the agricultural sector, despite the high exposure in Comoros with agriculture constituting 36 per cent of GDP.

ANNEX 2: RIASCO ACTION PLAN PILLARS

RIASCO Regional Action Plan for El Niño



HUMANITARIAN PILLAR

Co-Leads
WFP/OCHA/UNICEF

- Develop Regional needs and requirements overview for short term assistance (0-12 months).
- Monitor and track changes in humanitarian needs and response required, including impediments to delivery.
- Develop scenario with priorities and forward view.

Pillar section is based on Humanitarian Outlook document and aligned with the proposed SADC appeal.

(costing has been calculated based on overall needs and response interventions planned which have been derived from country-level interagency appeals)



RESILIENCE PILLAR

Co-Leads
WVI/UNDP/FAO

- Calls for a more robust resilience response to address the cycle of recurrent droughts in the region
- Provides a snapshot of progress in resilience programming under the RIASCO Action Plan
- intended to help efforts to improve resilience programming and build on existing resilience initiatives that can be scaled up
- identifies key action areas for resilience building work in response to El Niño induced crisis
- singles out the development of a strategic regional level resilience program in 9 action areas.



MACRO FINANCE/ECONOMIC PILLAR

Co-Leads
AfDB/WB

- Calculate, tracking and monitoring development loss due to disasters.
- Compile structural policy options to mitigate impact.
- Capture and track resources from institutions under this pillar contributing to El Niño response (*for pillar 1*).
- Provide quality assurance advice on policy development quality control and ensure linkages with the other pillars.
- Map support needs to provide technical support to countries on how to leverage and/or fast-track existing support from existing financing institutions.

ANNEX 3: REGIONAL COORDINATION STRUCTURES

RIASCO is part of the accountability framework of the Regional UN Development Group (UNDG) for Eastern and Southern Africa on Emergency Preparedness and Response. RIASCO's strategic objective seeks to strengthen humanitarian coordination for effective disaster risk management (strengthening information management, mobilizing regional resources & institutional partnerships & response, preparedness, knowledge management & advocacy). RIASCO has established three working groups:

Resilience Working Group

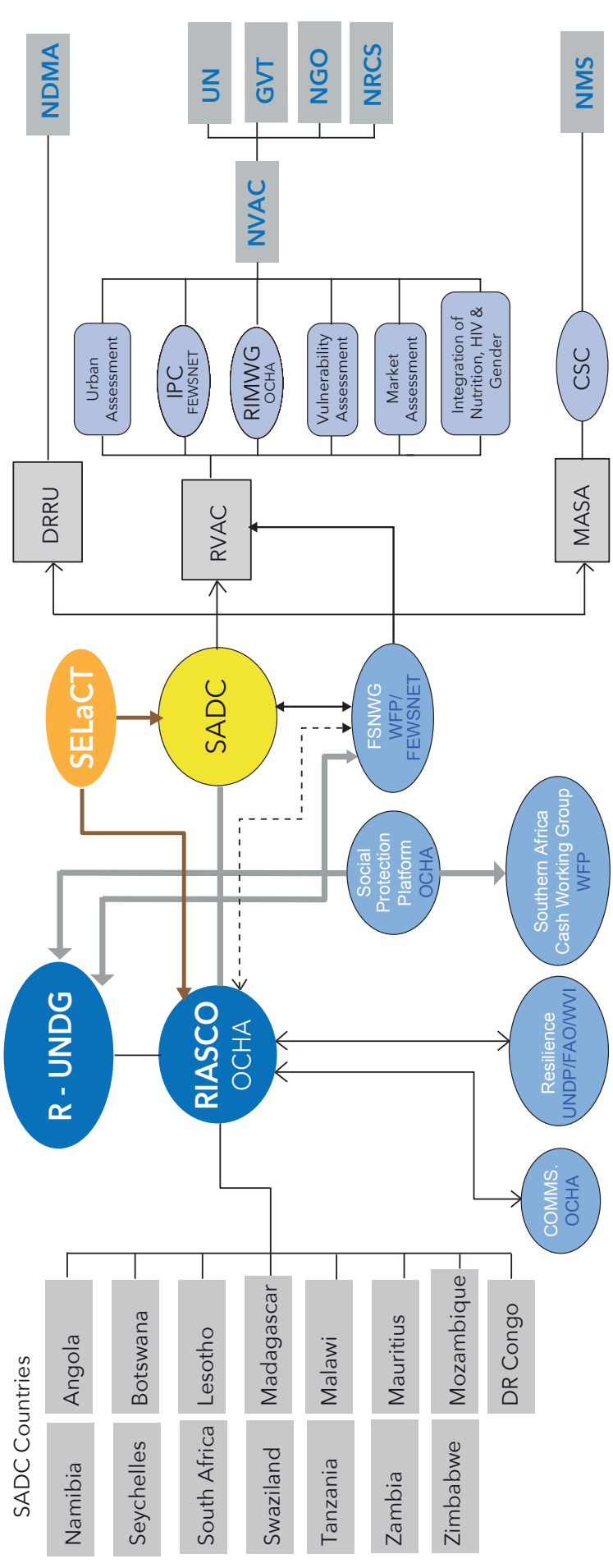
The Resilience Coordination Group (RCG) is accountable to the Chair of RIASCO. The RCG provides RIASCO strategic advice and facilitates coordination of Resilience programming in response to El Niño under the SADC Regional Appeal and RIASCO Action Plan. The Resilience Team at the OCHA-RIASCO Office in Johannesburg, led by UNDP (with support of FAO and World Vision International) and working under the overall oversight of the RIASCO Chair, would facilitate the convening and work of the RCG. As usual, the RIASCO chair will seek guidance from, liaise and share relevant information with the UNDG-R Group as and when required.

Social Protection Platform

The Regional Social Protection meeting of 10 August recommended the establishment of a senior-level regional coordination mechanism, consisting of regional directors or their designates to collaborate and coordinate social protection in the region. The membership of the Platform is to be expanded to include: ARC; donors (DFID and USAID) and INGO representatives from the Cash Working Group. Government involvement will be done through existing government feedback mechanism at Resident Coordinator's level or other interlocutors responsible for supporting the Government. The Platform should be strategic and operate at an advisory level. It should not conflict/duplicate work ongoing at country level. The focus will be both short terms and longer term social protection development issues that require to be addressed at regional level.

Cash Working Group

The Southern Africa Regional Technical Cash Working Group (SARTCWG) has been established with the overall objectives of streamlining the design, development and implementation of cash based responses, as well as influencing informed decisions by government and humanitarian actors. The group will strive to improve programs and their ability to benefit vulnerable groups. SARTCWG is a platform of technical professionals and experts dedicated to cash transfers programming in the Southern Africa region. Its membership is open to all interested humanitarian actors in the region. So far the following organizations have indicated their interest - World Vision, IFRC, Save the Children, ADRA, CARE, Oxfam, OHCHR, OCHA and WFP. It is chaired by WFP.



	Regional United Nations Development Group (Eastern and Southern Africa)	IPC	Integrated Food Security Phase Classification
R UNDG	SADC El Niño Logistics and Coordination Team	NDMA	National Disaster Management Authority
SELaCT	SADC Climate Service Centre	NMS	National Meteorological Services
CSC	Disaster Risk Reduction Unit	RVAC	Regional Vulnerability Assessment Committee
DRRU	National Vulnerability Assessment Committee	MASA	Meteorological Association of Southern Africa
NVAC	National Red Cross Society	RIMWG	Regional Information Management Working Group

RIASCO Members - NGO/UN/IFRC/DONOR/ACAD/WB/AFDB/ARC/PRIVATE SECTOR

RIASCO ToR

1. Strengthening information management among regional and national partners; Provision/brokering of technical advice and support for addressing chronic and transitory vulnerability;
2. Mobilizing and leveraging regional resources and institutional partnerships to reduce vulnerability to hazards;
3. Ensuring more humanitarian coherent and effective response by mobilizing groups of agencies, organisations and NGOs to respond in a strategic manner across all key sectors or areas of activity;
4. Providing quality technical and programming support to countries and their international partners on issues of humanitarian concerns and in particular on disaster response preparedness;
5. Managing, stimulating and supporting the use of a regional knowledge repository of strategic information and best practices on DRR and humanitarian action;
6. Conducting advocacy for an effective humanitarian response; and
7. To ensure adequate reporting and effective information sharing (with OCHA support).

ANNEX 4: AFRICAN STRATEGIC FRAMEWORKS THAT UNDERPIN AND GUIDE THE RESILIENCE AGENDA

AFRICAN STRATEGIC FRAMEWORKS THAT UNDERPIN AND GUIDE THE RESILIENCE AGENDA	
Final Declaration adopted by the High-Level Meeting on National Drought Policy (HMNDP)	March 2013, Geneva
Sendai Framework for Disaster Risk Reduction and Yaoundé Declaration for the implementation of the Sendai Framework	March 2015 July 2015
Paris Agreement on Climate Change	November 2015
The 12th Conference of the Parties of the UN Convention to Combat Desertification (UNCCD), particularly Decisions 3 (Report of the Eleventh Roundtable of Members of Parliament) and 9 (the Ankara Ministerial Declaration)	October 2015
Sustainable Development Goals (SDGs) in 2015, particularly Goal 15, Target 15.3 on achieving land degradation neutrality; and SDG 13 on Climate Action, Target 13.1 strengthening resilience and adaptive capacity and Target 13.3 improving human and institutional capacity on mitigation, adaptation and early warning	September 2015
The 2 nd United Nations Environmental Assembly (UNEA-2) Resolution 24 on combating desertification, land degradation and drought and promoting sustainable pastoralism and rangelands	May 2016
<p>The Windhoek Declaration for Enhancing Resilience to Drought in Africa, which committed to implement the Strategic Framework for Drought Risk Management and Enhancing Resilience in Africa, which proposes six elements at national level for a drought resistant and prepared Africa:</p> <ul style="list-style-type: none"> ➤ Drought policy and governance for drought risk management; ➤ Drought monitoring and early warning; ➤ Drought vulnerability and impact assessment; ➤ Drought mitigation, preparedness, and response; ➤ Knowledge management and drought awareness; and ➤ Reducing underlying factors of drought risk. 	August 2016
The Intergovernmental Authority on Development (IGAD)'s Drought Disaster Resilience and Sustainability Initiative (IDDRSI)	January 2013
The Global Alliance for Resilience (AGIR) Regional Roadmap for the Sahel and West Africa	April 2013

ANNEX 5: REGIONAL HUMANITARIAN COORDINATION ARCHITECTURE

Country	Government coordination structures	Strategic humanitarian coordination body for International Community	Humanitarian sectors present	Sector lead/ co-leads	Inter-sector coordination mechanism?
Angola	CNPC (National commission of civil protection)	RCO- UNDP	Health Nutrition Agriculture WASH	RCO-Nutrition	National level response coordination team led by the RCO. Provincial level: Inter sector coordination meeting led by Civil Protection
Botswana	NDMO coordinates with and through the National Committee on Disaster Management, the National Disaster Management Technical Committee and the District Disaster Management Committee	UN Country Team	No emergency sectors	No emergency sectors	No emergency Sectors
Comoros	Via National Disaster Management Office (COSEP)	RCO- UNDP	None activated for drought	None activated for drought	Via National Disaster Management Office (COSEP)
Lesotho	Inter-ministerial Cabinet Task Force, Disaster Management Agency is the lead coordination agency	Humanitarian Country Team	1 Food Security and Agriculture; 2 Health and Nutrition; 3 Water, Sanitation and Hygiene; 4 Protection and 5 Education	Relevant Government Line Ministries Lead. UN Co-leads: 1 WFP/FAO; 2 WHO/ UNICEF; 3 UNICEF; 4 UNFPA 5 UNICEF	Inter-sectoral meeting (chaired by CEO DMA)

<p>Madagascar</p>	<p>Under the Prime Minister responsibility, and institutionally under the Ministry in charge of Interior: National Office for Disaster Risk and Management (BNGRC)</p> <p>BNGRC coordinates the national humanitarian platform named CRIC which includes all the humanitarian actors, donors, private sector and civil society in the country.</p>	<p>Humanitarian Country Team</p>	<p>1 Water, Sanitation and Hygiene;</p> <p>2 Food Security and Livelihoods;</p> <p>3 Nutrition;</p> <p>4 Health;</p> <p>5 Education;</p> <p>6 Early Recovery</p> <p>7. Logistic and Telecommunication,</p> <p>8. Shelter and NNFI,</p> <p>9. Protection</p>	<p>Co-Lead. UN co-leads</p> <p>1 UNICEF;</p> <p>2 WFP/FAO;</p> <p>3 UNICEF;</p> <p>4 WHO;</p> <p>5 UNICEF;</p> <p>6 UNDP;</p> <p>7. WFP;</p> <p>8. IFRC/Local Red Cross;</p> <p>9. CRS</p>	<p>Operational structure of HCT, with OCHA coordination.</p>
<p>Malawi</p>	<p>Humanitarian Response Committee (technical committee) led by DoDMA, National Disaster Preparedness and Response Committee (executive Committee) lead by the Chief Secretary.</p> <p>Ad hoc CASH transfer coordination committees led by DoDMA - mostly operational</p>	<p>Humanitarian Country Team</p>	<p>1 Food Security</p> <p>2 Agriculture</p> <p>3 Education</p>	<p>1 Lead DoDMA, Co-lead WFP</p> <p>2 Lead Ministry of Agriculture, Co-lead FAO</p> <p>3 Lead Ministry of Education, Science and Technology , Co-Lead UNICEF</p>	<p>Coordination and Assessments Lead by DodMA Co-lead RCO</p> <p>Intercluster coordination meetings same as above</p>

			<p>4 Protection</p> <p>5 Water and Sanitation</p> <p>6 Nutrition</p> <p>7 Health</p> <p>8 Transport & Logistics</p> <p>9 Coordination and Assessments</p>	<p>4 Lead Ministry of Gender, Children and Social Welfare, Co-Lead UNICEF</p> <p>5 Lead Ministry of Agriculture and Water Devt, co-lead UNICEF</p> <p>6 Lead Ministry of Health, Dept. of Nutrition, Co-lead UNICEF</p> <p>7. Lead Ministry of Health Co-lead WHO.</p> <p>8 Lead Ministry of Transport and Public Works Co- lead WFP.</p> <p>9 Lead DoDMA co- lead RCO</p>	
Mozambique	INGC (Agency), Technical Council for Disaster Management (CTGC) (EOC)	Humanitarian Coordination Team	1 Food Security, 2 Water, Sanitation and Hygiene, 3 Nutrition	1 WFP/FAO 2 UNICEF 3 UNICEF	INGC (Agency), Technical Council for Disaster Management (CTGC) and CENOE (EOC) Provincial (CTPGC)
Mauritius	Via Government-led platform (DRDM) (NDRRMC) and National Emergency Operations Centre	UN Country Team (UNCT)	N/A	N/A	Via Government-led platform (DRDM) (NDRRMC) and National Emergency Operations Centre
Namibia	Via Directorate of Disaster Risk Management DDRM (Office of the Prime Minister)	Emergency Working Group	N/A	N/A	Via Government-led platform
Seychelles	Via Division of Risk and Disaster Management (DRDM) (Office of the Vice President)	UN CT (RC based in Mauritius)	N/A	N/A	Via Government-led platform (DRDM) And National Operations Centre

<p>South Africa</p>	<p>Via South African National Disaster Management Centre (predominantly decentralised to provincial level)</p>	<p>UNCT</p>	<p>Development oriented working-groups</p>	<p>Development oriented working groups.</p>	<p>Via Government-led platform (DRDM) And National Operations Centre</p>
<p>Swaziland</p>	<p>National Disaster Management Agency (NDMA) convenes a monthly strategic coordination meeting with UNCT, line ministries and NGO Directors</p>	<p>Technical Working Group for Drought monthly meeting chaired by NDMA and UNRC Inter cluster coordination meeting every 2 weeks chaired by NDMA</p>	<p>Food Security and Agriculture, Health and Nutrition, WASH, Education, and Social Protection, Energy/Environment, Shelter (Early Recovery is cross cutting across all sectors)</p>	<p>Weekly and bi-weekly meetings of: Agriculture and Food Security cluster Lead Agency MOA, co-lead agencies FAO/WFP Health and Nutrition cluster Lead Agency MOH, co-lead WHO WASH cluster Lead agency DWA, co-lead UNICEF Education cluster Lead agency MOET, co-lead UNICEF/SCF Social Protection cluster Lead agency DSW, DPMO, co-lead UNFPA/BRCS</p>	<p>NDMA convenes an inter-sectoral coordination forum</p>
<p>Tanzania</p>	<p>Disaster Management Agency</p>	<p>Emergency Coordination Group</p>	<p>No sectors for drought- Only for refugee response</p>	<p>No sectors for drought- Only for refugee response</p>	<p>N/A</p>
<p>Zambia</p>	<p>Disaster Management and Mitigation Unit</p>	<p>No humanitarian mechanisms activated</p>	<p>No humanitarian mechanisms activated</p>	<p>No humanitarian mechanisms activated</p>	<p>No humanitarian mechanisms activated</p>

<p>Zimbabwe</p>	<p>Ministerial Committee and Special Cabinet Committee on Emergency Response</p> <p>Multi Stakeholder Consultative Meetings jointly led by the Office of the President and Cabinet and the UN RC</p>	<p>Humanitarian Country Team</p>	<p>1) Agriculture and Food Security, 2) Health and Nutrition, 3) WASH 4) Education, 5) Protection, 6) Early Recovery,</p>	<p>Relevant Government Line Ministries Lead. UN Co-leads: 1) WFP/FAO; 2) WHO/UNICEF; 3) UNICEF; 4) UNICEF; 5) UNFP/ UNICEF; 6) UNDP</p>	<p>Humanitarian Inter-Sector Coordination Group Established in April 2016</p>
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