





FOOD SECURITY & NUTRITION ASSESSMENT

KARAMOJAREGION ÚGANDA

Analysis conducted by ANALYSIS, MONITORING and EVALUATION (AME) UNIT WFP | UGANDA

EXECUTIVE SUMMARY

July - August 2015



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EXECUTIVE SUMMARY

Nearly half of the households are currently food insecure with either Borderline or Poor Food **Consumption Score, mainly** due to the lean season that has seen a decline in food stocks at household level and contributed to food price rises (therefore reducing economic ability to purchase food). While food security status has marginally improved since June 2014, **Global Acute Malnutrition** levels have deteriorated to the highest levels since 2010.

Food Security

Up to 45% of households in the region are currently food insecure (moderately or severely), with poor performance on key food security indicators:

- Fifty percent the of households have either Borderline or Poor Food Consumption Score, FCS, (marginal improvement from 66% in June 2014) suggesting low ability for most of the population to meet their daily energy and nutrient requirements.
- Up to 34% of the households spend proportionately more on food leaving little for essential non-food expenditures.
- More than half (52%) of households were found to be engaging in negative coping strategies that endanger their life, affect their dignity and, above all, affect their productivity in the future due to steady depletion of productive assets.

The following areas depict the highest levels of food insecurity and vulnerability:

Moroto

Particularly Katikekile and Tapac sub-counties where over 70% of households are food insecure

Kotido

Particularly Kacheri and Panyangara subcounties where approximately 60% of households are food insecure

> Up to 45% of households in the region are currently food insecure

Nutrition

The following areas depict the highest levels of Global Acute Mulnutrition:

Napak: Particulary Lotome & Lokopo Sub-counties

Moroto: In particular, Tapac and Nadunget Sub-county

> Prevalence of Global Acute Malnutrition (GAM) is at critical levels in 4 of the 7 Karamoja districts, while Severe Acute Malnutrition (SAM) is at critical levels in all 7 districts. Analysis shows that GAM rate has steadily increased every lean season since 2012 and is at the highest levels since 2010.

Prevalence of malnutrition in Karamoja: **Nutrition Indicators FSNA June 2015**



Main drivers of Food Insecurity/ Malnutrition

The majority (93%) of households suffered at leaset one shock in the 30 days before the assesment

Most households dedicate more than half of total expenditure on food

Two-thirds (67%) of households have no food

stocks

1. Reduced food availability at household & regional level

Two-thirds (67%) of households had no food stocks. The remaining 33% that had food stocks expected them to last an average of 4-5 weeks from the time of the assessment. Moreover, More than more than half of households do not half of households own any livestock do not own any livestock and are therefore and are therefore increasingly increasingly dependent on dependent on external sources including external markets. sources. for all their food needs.

2. Diminished ability to purchase food from the markets

Approximately 30% of households have no income earner Up to 70% of households have at least one income earner, their main sources of income are either seasonal (agricultural wage labour/ food crop sales) or unsustainable to the environment (sale of firewood/ charcoal). Above all, the level of income earned from these sources is inadequate; a situation exacerbated by high and/or increasing food prices.

> Female Headed Households earn less and spend UGX 10,000 less on food compared to Male Headed Households.

3. Reduced ability to cope with shocks among households

The majority (93%) of households had suffered at least one shock in the 30 days before the assessment, commonly sickness of most household members and high food prices. These findings are similar to those of previous assessments. repeated occurrence The of these shocks has led to high and/or increasing application of unsustainable coping strategies that affect both immediate food consumption and future ability to cope.

In 69% of the households, it has become necessary to reduce the number of meals per day

4. Poor Infant and Young Child Feeding (IYCF) practices



- Nearly three-quarters of women practice exclusive breast feeding but only 20% across the region start breast feeding within the first hour of birth.
- The majority of women (64%) introduce complementary foods at the recommended age of 6 months but the remaining 36% mostly do so before 6 months (22%) or after (14%).
- The diversity in children's diet is very low and only 14% of children meet the Minimum Acceptable Diet for children.

5. Poor sanitation and hygiene

Marked efforts have been made in improving access to safe water, with up to 81% of households reporting use of borehole water. However, 11% of the population especially in Amudat (30%) – are still using surface water for domestic use. Moreover, households are not adequately utilizing available water sources with only 19% using water at the recommended levels for adequate sanitation and personal hygiene (15 litres per person per day)



Only 19% of households use water at recommended the rate of 15 litres per-person-per-day despite 89% accessing safe water sources

Latrine coverage too remains exceptionally low in the region with twothirds of households reporting open defecation, a risk factor for water borne diseases and general well-being.

Gender dimensions of Food Security

Upon comparision of key food security outcomes, by gender, following patterns are seen.

Food availability:

While access to land was similar, it was seen that that more male headed households own livestock. Households with livestock are typically more resilient to shocks and enjoy better dietary diversity.

Food access:

Female headed Households earn less money than male headed households. While there was no difference in the percentage of households with at least one income earner, further analysis showed that male headed households were more likely to have two or more income earners (37%) compared to female headed households (27%). It is also seen that female headed households spend UgX 10,000 less than male headed households on food. Above findings underline their vulnerability to economic shocks.

Domain	Indicator	Female Headed	Male Headed
Demography	No formal education - %	79	66
	Programme participation - %	62	56
Availability	Own livestock - %	38	48
	Have access to land - %	84	88
	Have food stocks	32	33
Access	Atleast one income earner - %	71	70
	Monthly food exp av. (UgX)	47,000	57,000
	Households with FES <65% - %	64	68
	Have debt - %	31	38
	Borrowed to buy food	51	51
Utilization	Acceptabe FCS - %	48	52
	Low DDS - %	42	39
	Use surface water - %	10	12
	Use atleast 15L pppd - %	21	18
Stability	RCSI - average	15	16
	Alcohol consumption - %	25	26
	No livelihood coping - %	38	26
Overall Food Security Classification	Food Secure - %	15	14
	Marginally Food Secure - %	38	42
	Moderately Food Insecure - %	39	36
	Severely Food Insecure - %	8	8

Stability:

Female headed households are less likely to adopt various forms of coping strategies enumerated. This is similar to findings from the Food Security and Nutrition Assessment (Dec 2014) and needs to be further investigated. The most likely reason for this is that female headed households often do not have as many options – for example ability to sell livestock or land; ability to move to another village and source incomes etc.

Overall food security classification:

Despite the above, a multi-indicat or analysis depicts marginal differences in the

food security outcomes between male and female headed households with 56% and 53% classified as food secure respectively. The main reason for this is the continuous targeting of female headed households by government and development partners, also indicated by the higher participation of female headed households in development programmes.

This underlines the impact of targeted assistance programmes as well as the need to ensure that assistance programmes expand the current coverage of female headed households.

Recommendations

- Continued main streaming of gender into development programmes is encouraged to ensure that gains made are sustainably preserved
- Promotion of a) vocational education and b) business incubation among women with the view to increase opportunities for better paying income generating activities (agriculture-based and otherwise) to allow female headed households earn higher incomes.
 - Emphasis on longer term development opportunities with regard to access to education are encouraged in light of the higher prevalence of female household heads with no formal education. Increasing school attendance for girls in the region necessarily requires a grounded approach that enables households to value education over domestic chores.

Impact of Development Assistance

Upon analyzing the districts or groups depicting the poorest food consumption levels, it is seen that there is a direct correlation with a lack of participation in development programmes.

Moroto which has 27 % of households with Poor Food Consumption (highest in Karamoja) also has over 50% of households not participating in any development or assistance programme. A similar pattern is seen in Napak and amongst female headed households; where poor food consumption prevalence is seen in areas with below average rate of participation in assistance programmes.

Indeed, across Karamoja it is seen that households that were benefitting from at least one development programme were generally found to have better food consumption and diet diversity compared to those not benefitting.

Based on the above findings, it is recommended that a more specific impact study be carried out at the district level, starting with Moroto and Napak, in the immediate future.

Programmatic Recommendations KAABONG



insufficient to cover household food needs.

 Poor utilization: Poor infant feeding practices coupled with poor sanitation (poor access to safe water and the practice of open defecation) contribute to poor nutrition outcomes in the district.

Key factors limiting food security and nutrition in the district are:

Inadequate food access: А significant percentage of households borrow money to buy food amidst increasing food prices. This increase in food prices is itself attributed to declining stocks food household at level. Thus incomes earned by household bread winners seem

Key figures

42% Food Insecure
16% GAM (3rd highest)
35% Underweight (2nd highest)
40% Stunting (2nd highest)
84% part of at least one development
programme

) • • • • • • • • • • • • • • • • • • •	i)	WFP Pilot Post-Harvest storage related interventions in Karenga, Lobalangit, and Kamion sub-counties
Recommendations	ii)	WFP expand or implement Food for Work and/or Food for Assets interventions in Kaabong East, Kaabong West, and Lodiko sub-counties.
	iii)	Scale up WASH projects in the district to ensure adequate safe water coverage for all households and to improve availability and use of pit latrines for fecal disposal.

KOTIDO

Key figures

53% Food Insecure (2nd highest)
13% GAM
23% Underweight
31% Stunting

The key driving factors for food insecurity and malnutrition in the district are:

- Low food availability: Majority of households report depleted food stocks. There is equally limited availability at district level as reports indicate scarcity of maize in the month of May⁵.Consequently, households are finding difficulty in sourcing adequate quantity of food as well as ensuring adequate dietary diversity.
- ii) **Inadequate food access:** Some sections of the Kotido population are greatly limited by reduced economic access to food with 32% having Food Expenditure Share >75%; and with the majority of those that borrow money doing so to buy food.

i) Introduce post-harvest management and storage handling programmes that WFP has piloted in other parts of the country.

Recommendations

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i)

 Targeted WFP Food for Work and Food for assets programmes are recommended for those households lacking the ability to practice agriculture; approximately 18 % of households in Kotido lack access to agricultural land.

MOROTO

The high prevalence of food and nutrition insecurity in Moroto is due to a combination of factors;

	CARACTER SALES TEN AND AND AND AND
	• Limited availability of food with low production at household level and limited ability to store the little that is produced
Key figures62%Food62%FoodInsecure(highest)18%GAM (highest)31%Underweight32%Stunting	 Low economic access to food with the majority of households having no income earner. Some households have resorted to borrowing mainly to buy food for consumption Poor infant and young child feeding practices with untimely initiation of breast feeding and poor diets for children Poor sanitation with low safe water usage (despite availability) and high rate of open defecation Unstable availability, access and utilization conditions of above factors with exhaustion of coping strategies and/or adoption of hazardous ones like consumption of alcohol
	 A multi-sectoral food security/nutrition strategy and/or implementation plan is urgently required in order to synergistically address the key drivers of food insecurity in this district. i) Interventions related to income generation or livelihood must necessarily begin in Moroto; in particular the sub counties of Tapac and Nadunget.
Recommendations	 ii) WFP expand or implement Food for Work and/or Food for Assets programmes across this district to improve access to food. iii) Introduce post-harvest management and storage handling programmes that WFP has piloted in other parts of the country. iv) Mass screening of all children under 5 years is recommended to identify those with SAM/MAM v) Nutrition education on IYCF practices and sensitization campaigns on personal hygiene are recommended.

ABIM

The overall food security situation in Abim is relatively favourable but there remain some gaps that are contributing to food insecurity in the district

- Inadequate utilization, with Poor IYCF practices. Exclusive breast i) feeding is low and children's diets are inadequate with low percentage meeting Minimum Acceptable Diet
- There are gaps in food consumption at household level, with sub ii) optimal diversity of diets
- Seemingly high level of morbidity (sickness was the most common iii) shock) amongst household members further exacerbates the likelihood of poor nutrition outcomes.

Recommendations

- Intensify nutrition education campaigns in the district with the view to i) encourage diet diversity and promote appropriate infant and young child feeding practices
- ii) Review regular disease surveillance reports and implement preventive measures to curb the most common diseases for both adults and children.

AMUDAT

While this district depicts markedly lower food insecurity and malnutrition levels, child nutrition and sanitation are a cause for concern.

Key figures

44% Food Insecure

9% GAM (lowest)

13% Underweight (lowest)

23% Stunting (lowest)

- Inadequate utilization, with Poor IYCF practices. i) Exclusive breast feeding is low and the children's diets are inadequate with low percentage meeting minimum acceptable diet
- ii) Poor water, sanitation and health conditions, with very low latrine usage and high use of surface water sources. Moreover, this water is not treated before its use.

Unicef and WFP intensify nutrition education campaigns in the district i) with the view to encourage diet diversity and promote appropriate infant and young child feeding practices Recommendations ii) Introduce and/or scale up WASH interventions that should necessarily be accompanied by awareness raising campaigns on personal hygiene. 18

26% Food Insecure (lowest) 10% GAM (2nd lowest) Key figures 22% Underweight (2nd lowest) 23% Stunting (2nd lowest)

NAPAK

While Food availability has decreased in the district as a result of the lean season, the key drivers of food insecurity in the district are;

- i) *Inadequate access to food*, with majority of households spending the greater part of their expenditures (>65%) on food and many report borrowing money in order to buy food.
- ii) *Poor diets* at household level with 62% of households having either Borderline or Poor FCS and over half of households (56%) having low diet diversity.
- iii) *Poor IYCF practices* with low percentage of children that meet minimum meal frequency, minimum diet diversity and minimum acceptable diet
- iv) *Poor sanitary practices,* with 80% of households practicing open defecation and only 10% of households with members using water at recommended levels.
- v) **The high prevalence of disabled household heads** (vis-à-vis Karamoja average of 8%), especially in Matany and Lokopo sub counties, is a predisposing factor for food insecurity

Key figures 48% Food Insecure 16% GAM (2nd highest) 39% Underweight (highest) 46% Stunting (highest) 19% disabled household heads (highest)

Recommendations



- i) Interventions related to income generation or livelihoods must after Moroto, be introduced here.
- ii) WFP expand or implement Food for Work and/or Food for Assets programmes across this district.
- iii) Mass screening of all children under 5 years is recommended to identify those with SAM/MAM
- iv) Unicef and WFP to explore the possibility of blanket supplementary feeding; particularly in Lotome and Lokopo sub-counties
- v) Intensify nutrition education campaigns in the district with the view to encourage diet diversity and promote appropriate infant and young child feeding practices
- vi) Introduce and/or scale up WASH interventions that should necessarily be accompanied by awareness raising campaigns on personal hygiene.

NAKAPIRIPIRIT

Unlike other districts, food insecurity in Nakapiripirit is not generalized. The drivers of food insecurity are applicable to pockets of the population and include:

Key figures

39% Food Insecure15% GAM25% Underweight30% Stunting

- Inadequate access to food, with some 31% of the population having FES > 75% (i.e. spend more than 75% of total household expenditure on food) and 35% of the households in debt with majority (56%) doing so to buy food amidst the rising food prices.
- Poor IYCF practices with 44% of children not meeting minimum meal frequency. Only 36% of children had minimum diet diversity and 22% met Minimum Acceptable Diet.
- iii) Poor WASH situation with pockets of the population using surface water and more than half (56%) practicing open defecation.



Recommendations

i)

ii)

Targeted interventions that introduce or scale up income generating activities and/or use of food for assets interventions are recommended Intensify nutrition education campaigns in the district with the view to encourage diet diversity and promote appropriate infant and young child feeding practices

iii) Introduce and/or scale up WASH interventions that should necessarily be accompanied by awareness raising campaigns on personal hygiene.

Food Security & Nutrition Trend Analysis 2009 - 15

Food Insecurity Trends 2009- 2015



Only in one district, Amudat, has the percentage of food insecure households fallen below 20% since 2010. Indeed, since 2010, Amudat has shown a clear and steady improvement in food security. The main reason for this being better dietary diversity at the household level, especially for children; a function of greater access to animal products.

In the past 3 years, since 2013, Moroto and Napak depict gradually worsening food security levels. This is related to the poor nutrition levels reported for the same period.

The percentage of food secure and food insecure households tend to differ significantly between seasons; depending on household income levels, food stocks and food prices. This is particularly the case in Kaabong, Abim and Nakapiririt districts.

The constant fluctuation in household food security levels underlines the fact that households are unable to significantly improve their food security situation over time. Rather many households see short term gains following which there is a deterioration as food stocks and incomes dwindle.

Malnutrition Trends



Since 2009, the GAM rates have never fallen below 5% in any district in Karamoja.

On average GAM rates across districts in June 2015 are at the highest levels than any other time since 2009.

Moroto district has always had the highest GAM rates followed by Napak.

Abim district has historically had the lowest prevalence of GAM in the region. However, the current prevalence of 9.1% is amongst the highest rates recorded for the district since 2009.

Kaabong and Nakapiripirit have shown a clear and steady deterioration in GAM rates since 2012.

For more information related to analysis, data collection, tools and analysis software, please contact the AME Unit, WFP Uganda:

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