

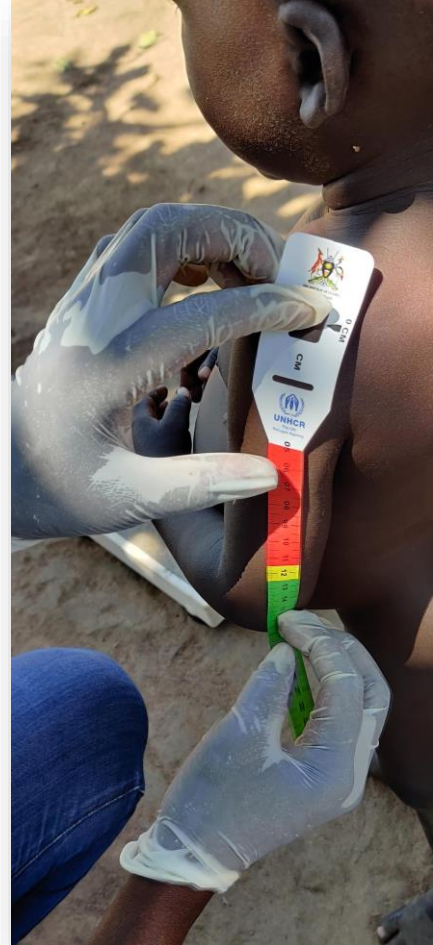
Food Security and Nutrition Assessment Refugee Settlements and Kampala December 2020



THE REPUBLIC OF UGANDA



UNHCR Representation in Uganda



Key stakeholders

- GOU: OPM, MoH, UBOS, DLGs.
- UN: UNHCR, WFP, UNICEF.
- NGOs: MTI, IRC, ACF, FHU, SCI, AHA, LWF, AFI, AVSI, ALIGHT, AIRD, HFU, OPWIG, PACHEDO, PAG.
- Refugees, VHTs, RWCs.



Thematic areas

- Demography
- Nutrition
- Health
- Food Security
- LITN
- WASH
- GBV
- Energy



Methodology

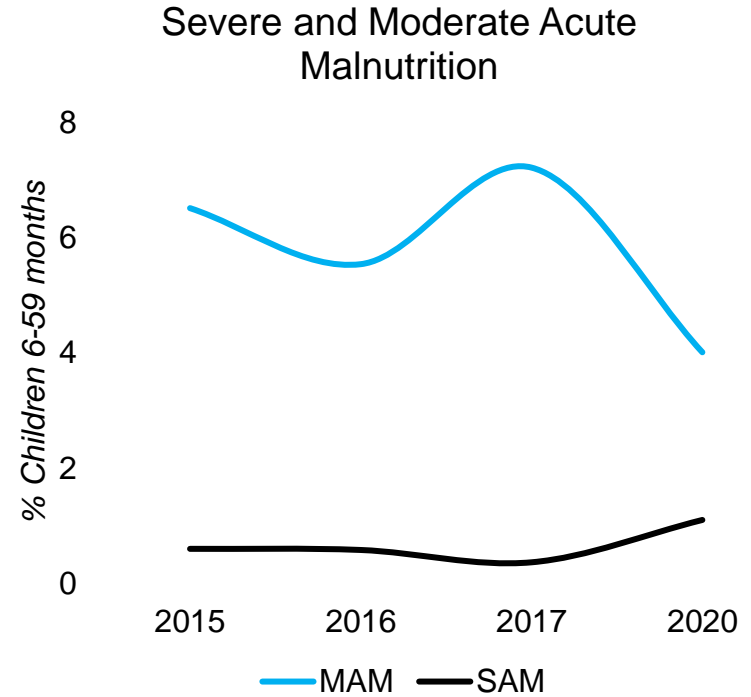
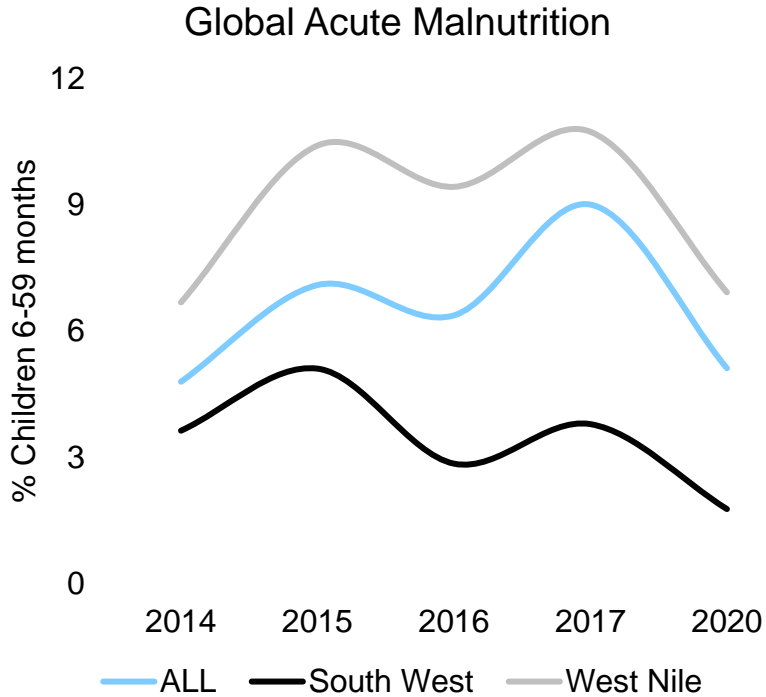
- Cross-sectional study, SMART methodology, cluster sampling
- 42,530 individuals, 7141 households reached in settlements and Kampala
- 51.8% female and 48.2% male



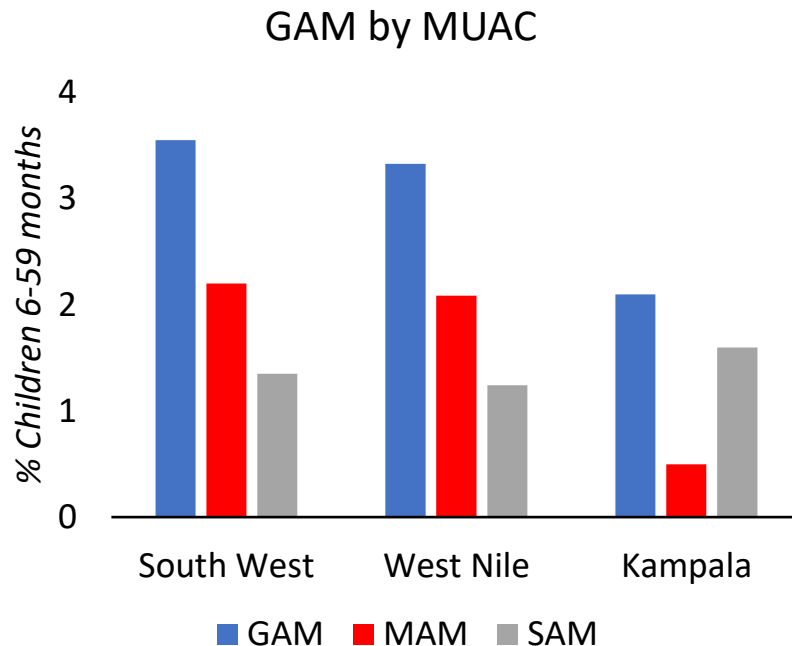
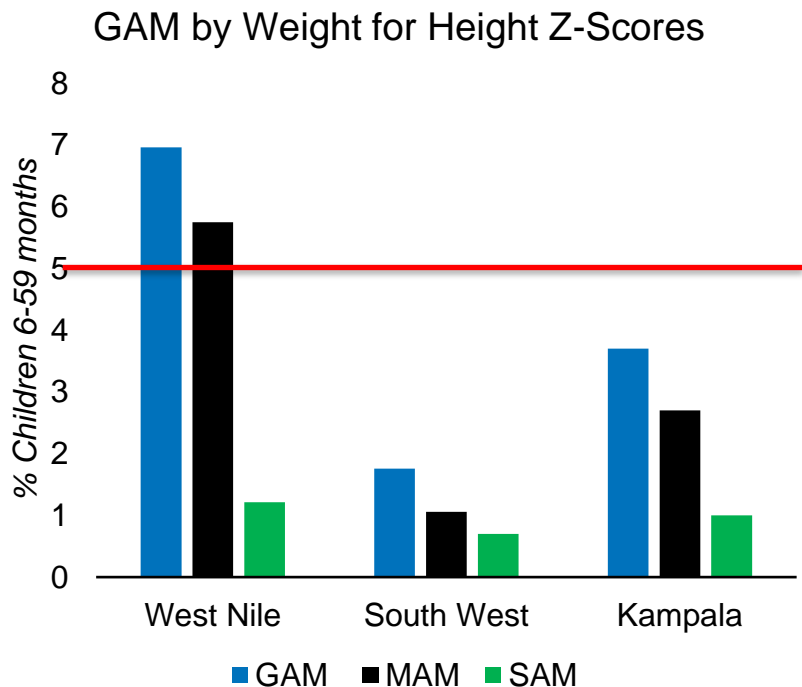
Nutrition



Acute Malnutrition

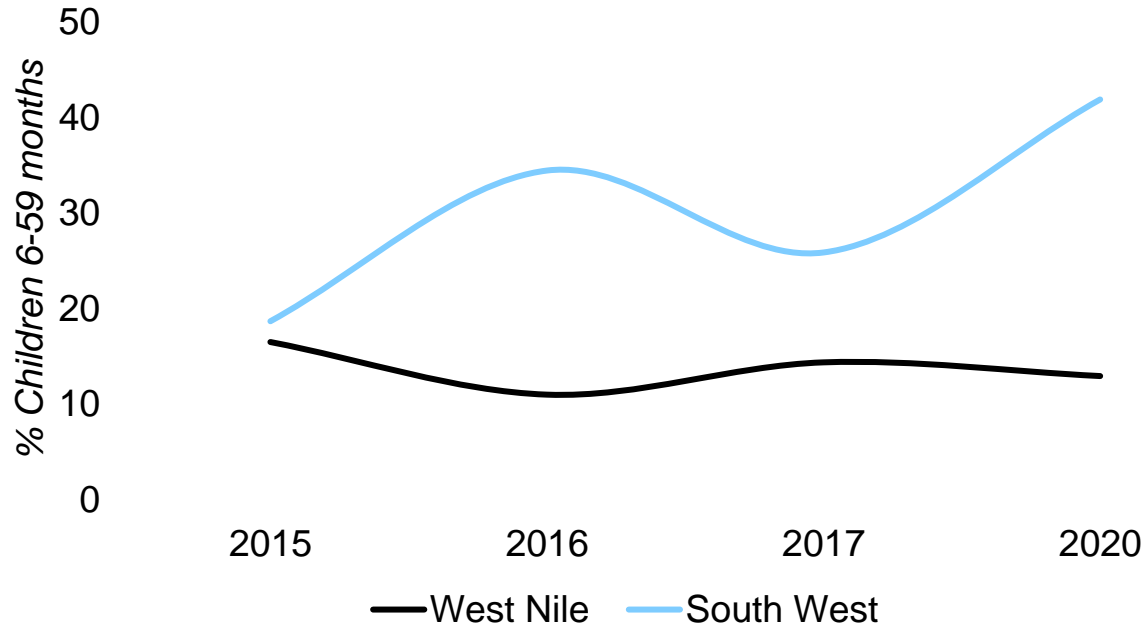


Acute Malnutrition

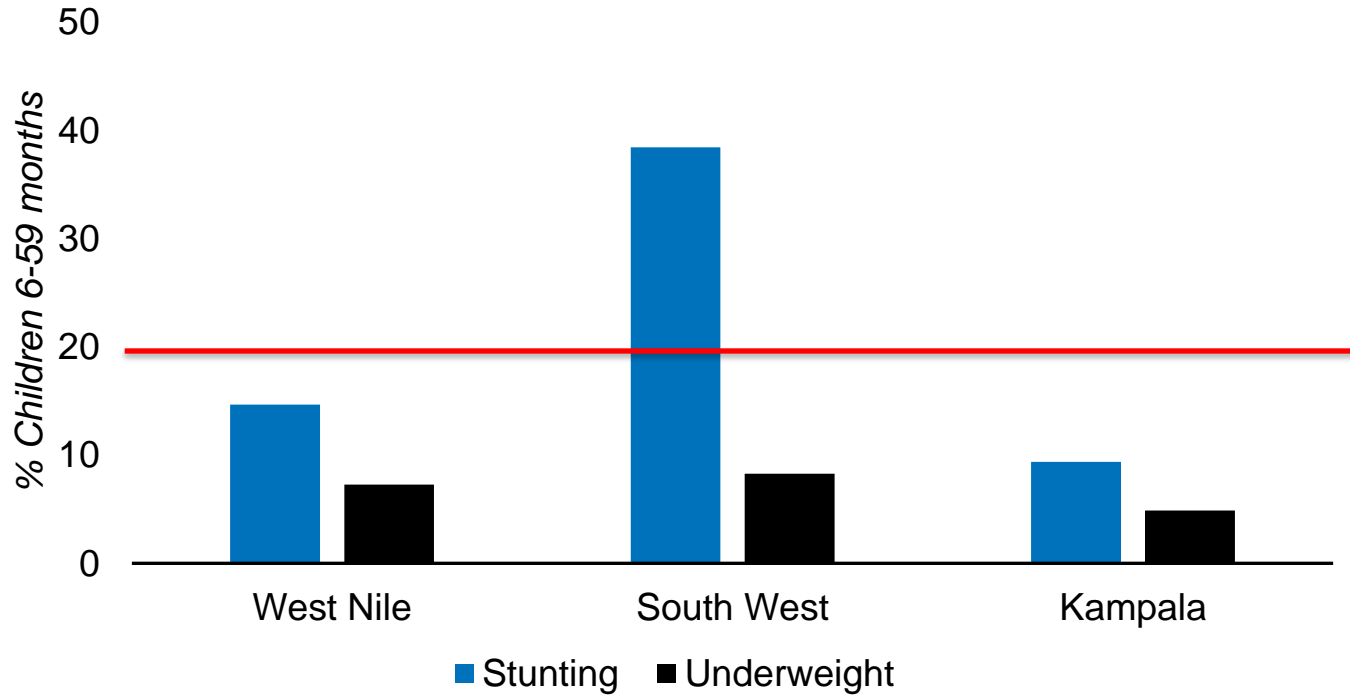


Stunting

REGIONAL STUNTING TREND ANALYSIS

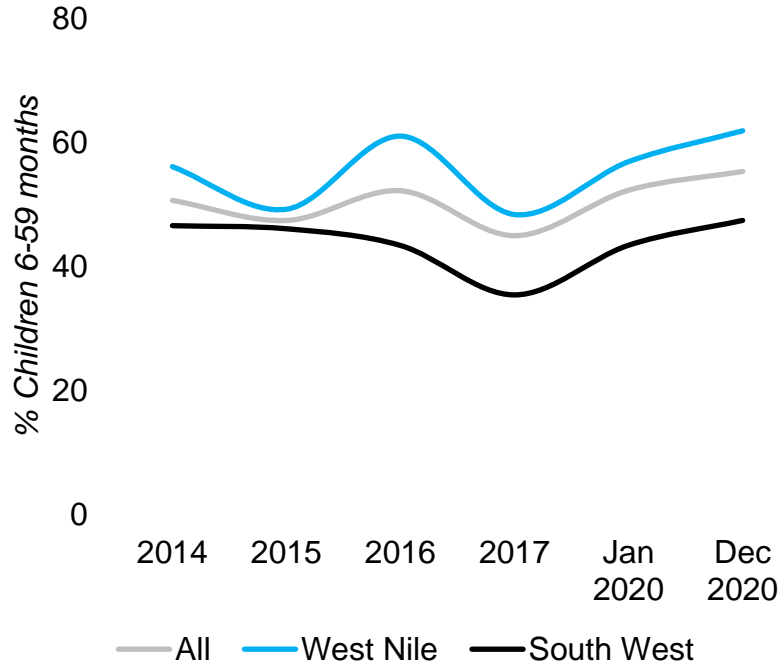


Stunting and Underweight

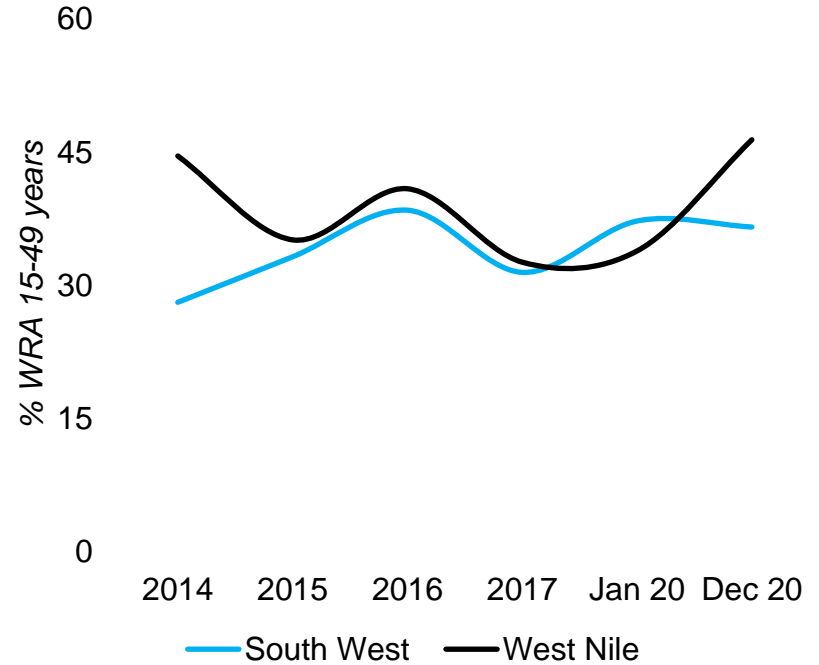


Anemia Trends

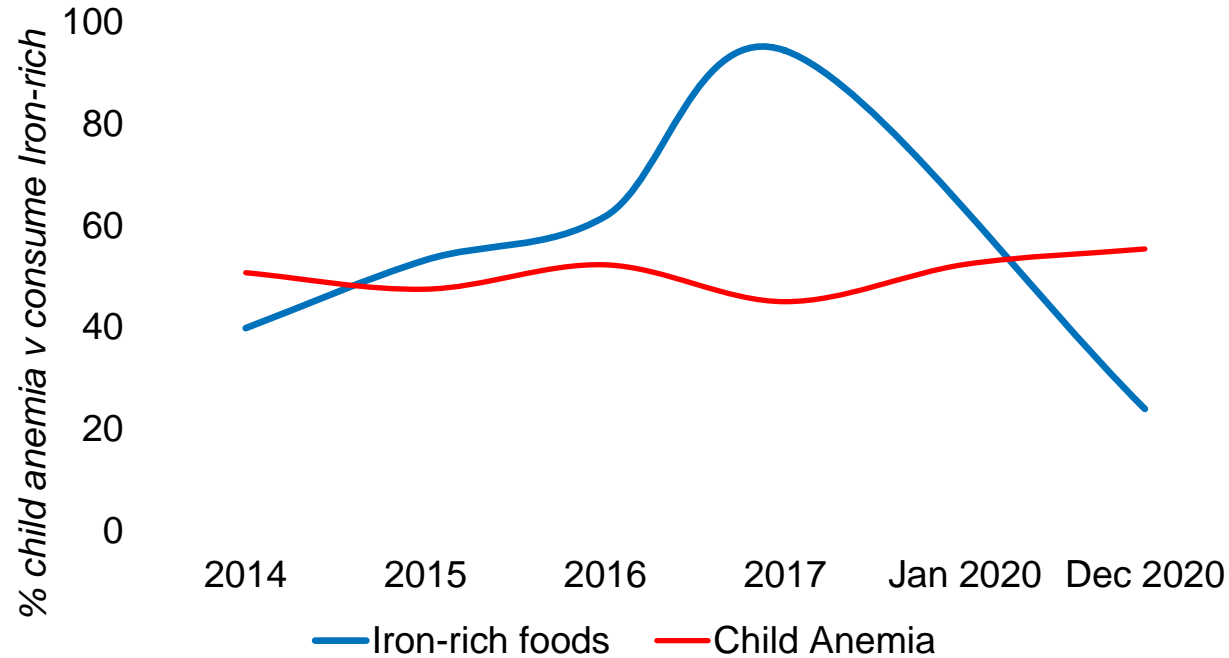
Anemia children (6-59) trends



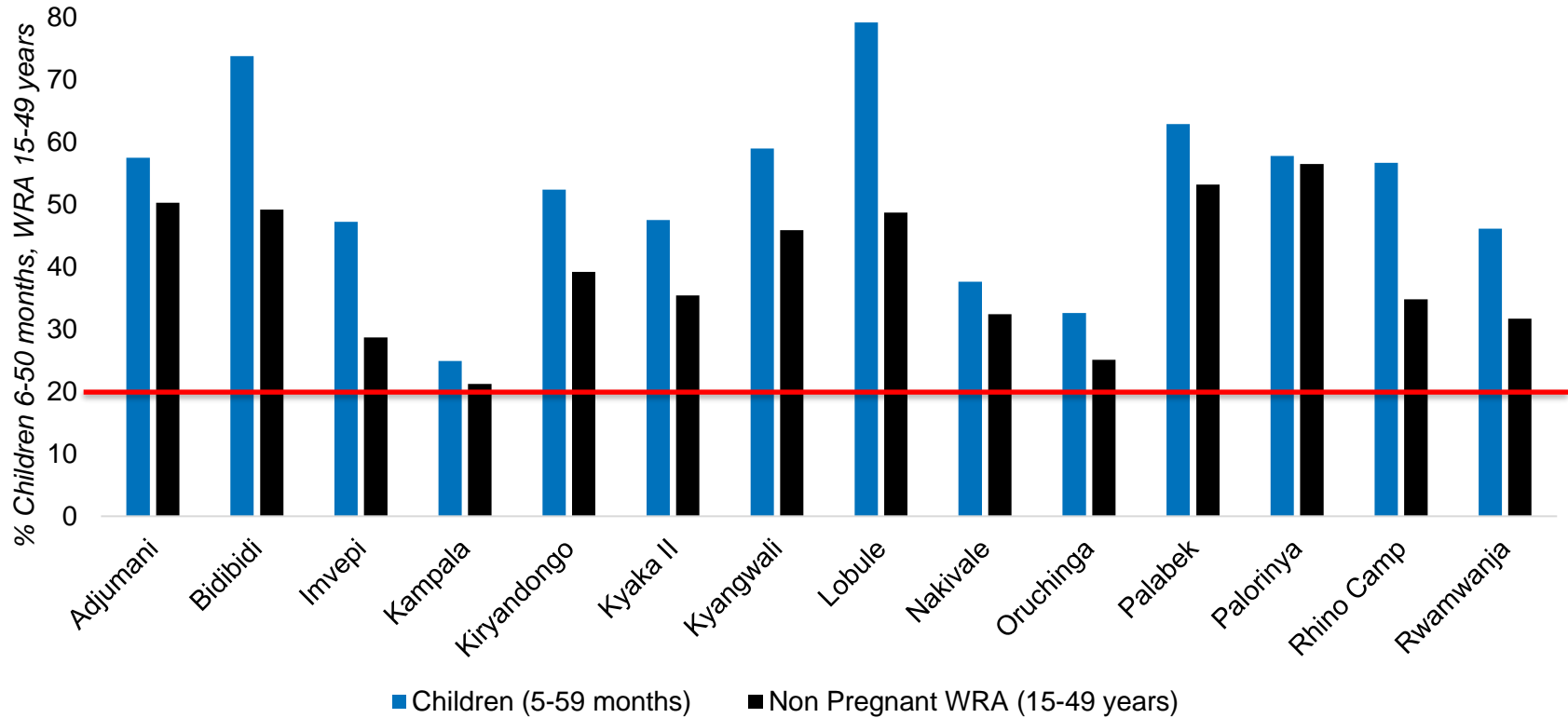
Anemia WRA (15-49) trends



Child Anemia and Iron-rich foods

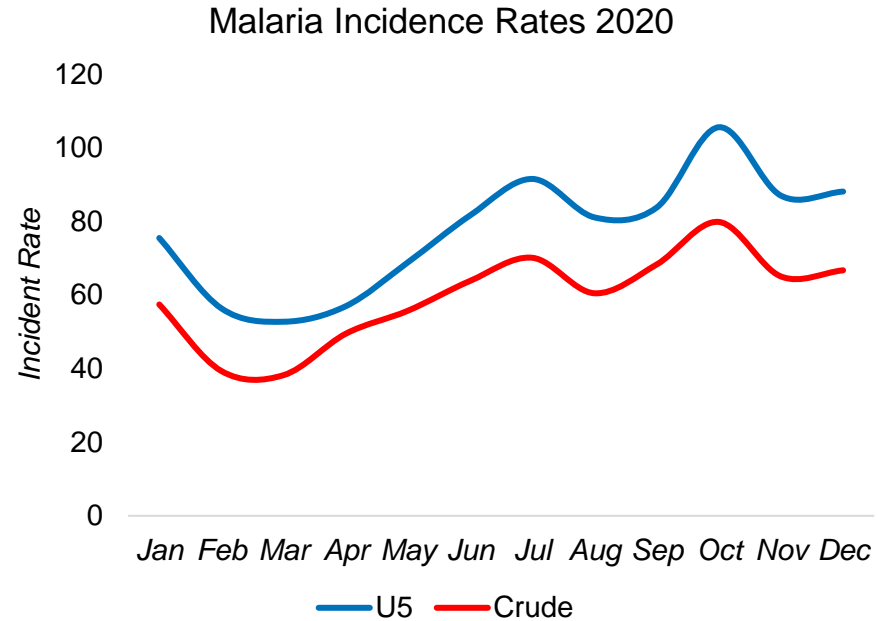


Anemia



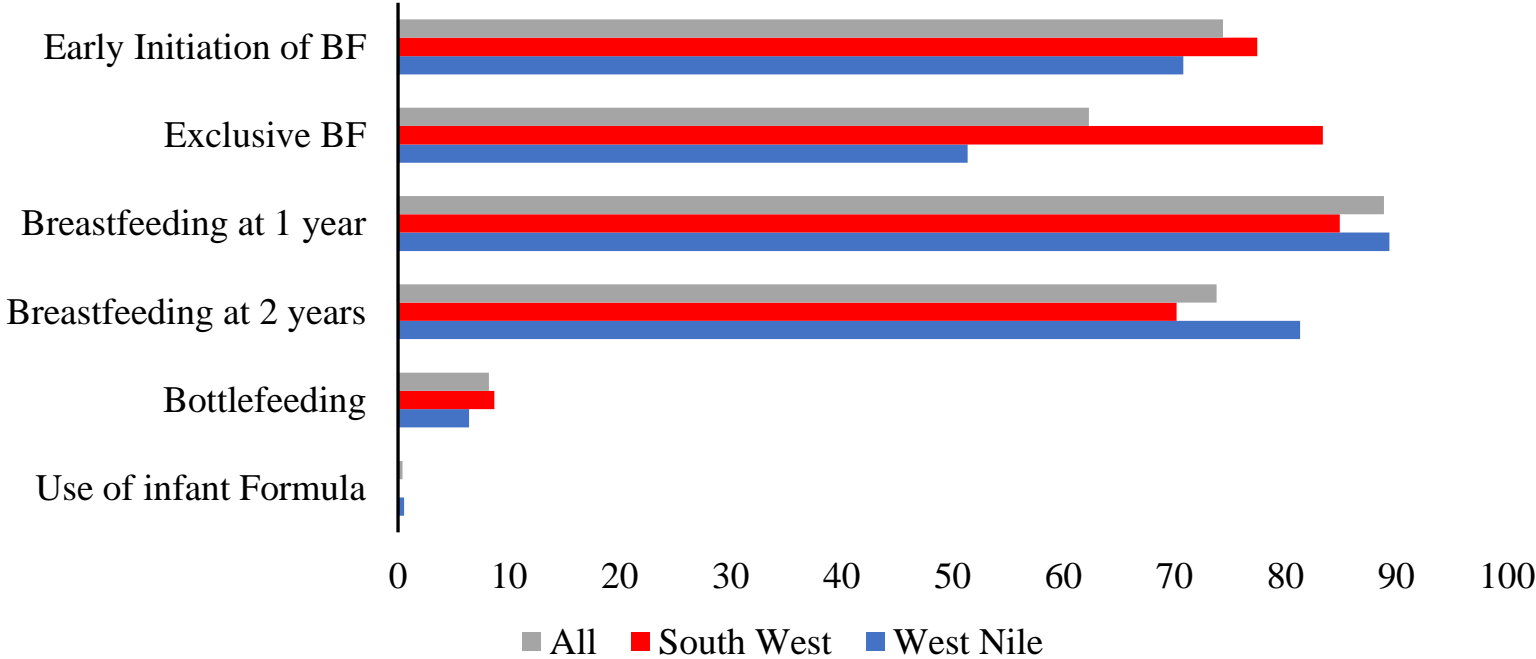
Contributing Factors

- Low dietary diversity – coping mechanism to ration cuts, less Vit C (plant-based diets)
- Disease incidence – malaria, intestinal worms

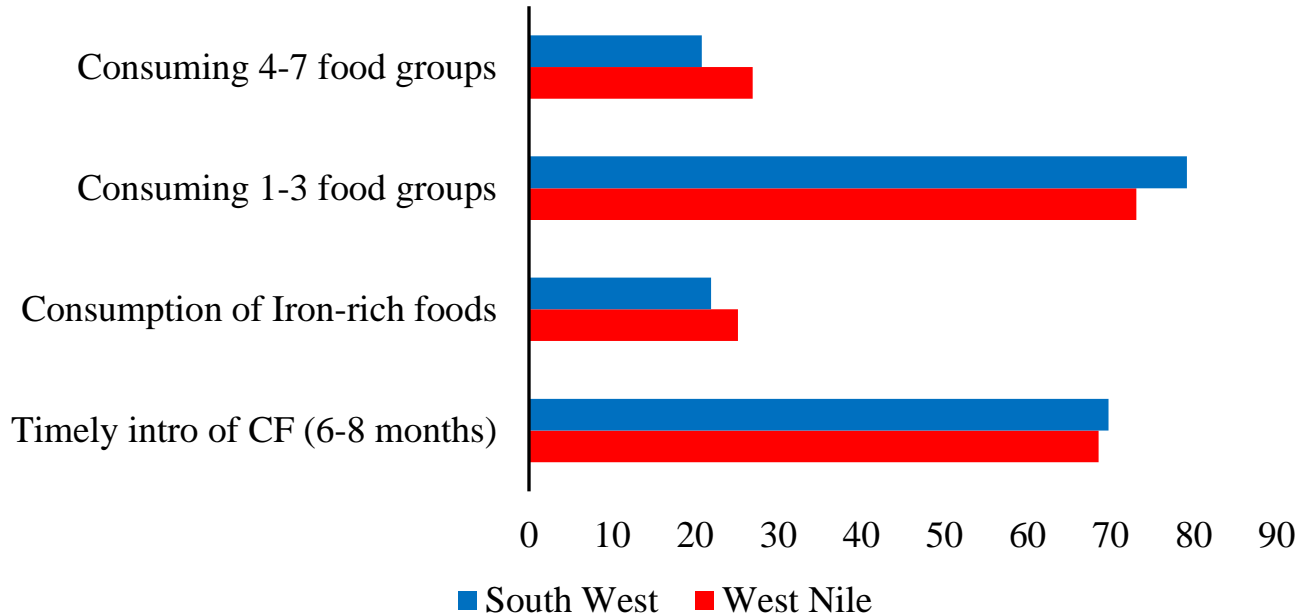


IYCF – Optimal Breastfeeding

Optimal Feeding practices



IYCF – Complementary Feeding and Dietary Diversity



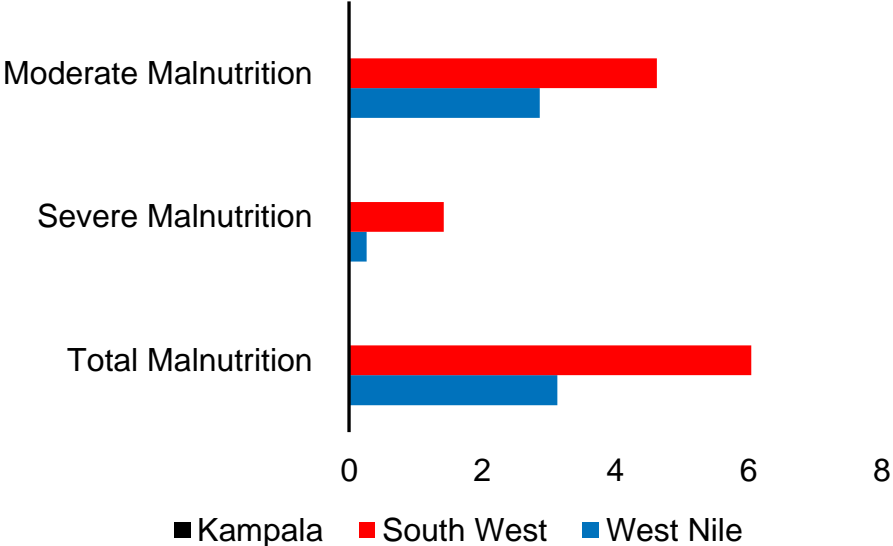
*Palorinya (7.8%),
Kyangwali (10.6%)
Nakivale (16.3%) had
lowest MDD-C*

*25.2% SW, 21.9% WN
consumed iron-rich
foods*

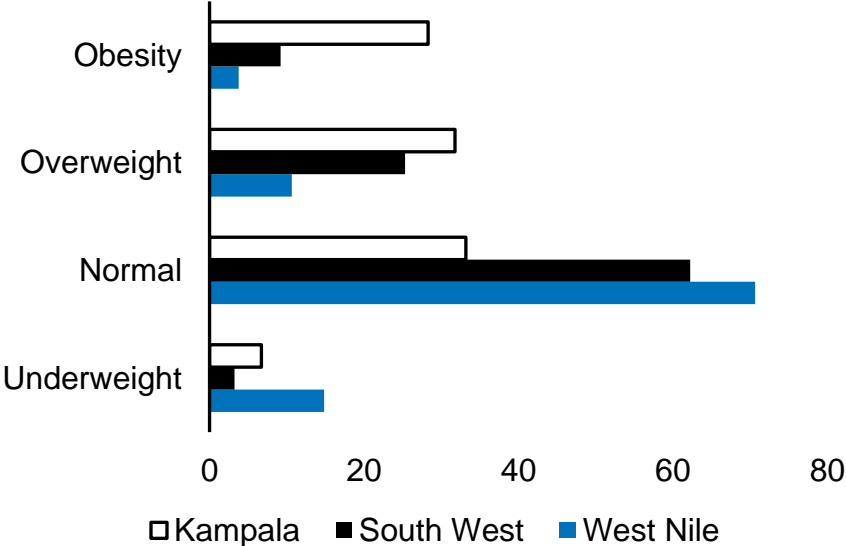


Maternal Nutrition

Malnutrition among PLWs

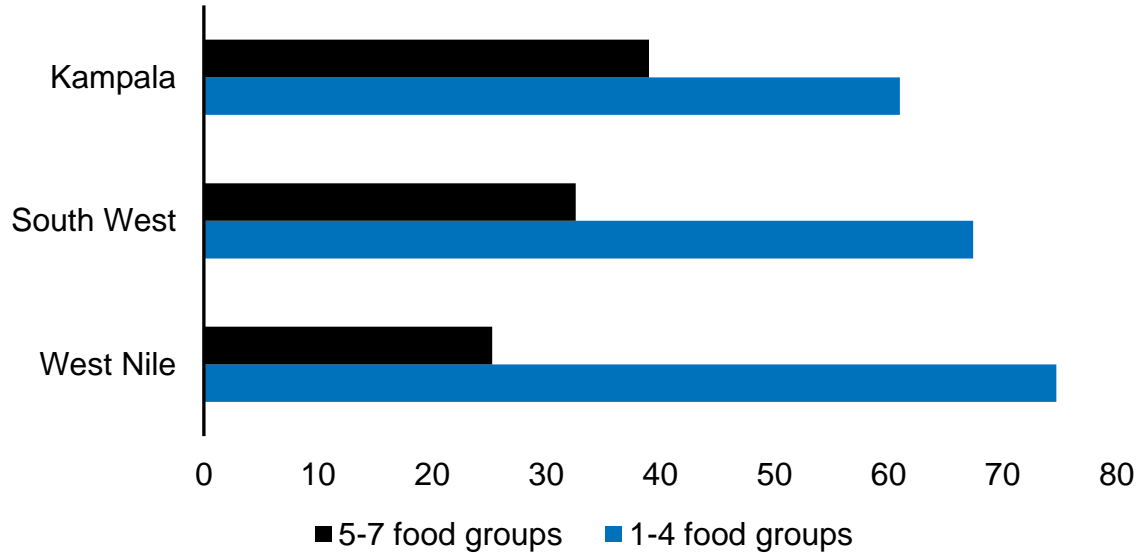


Malnutrition in non-pregnant WRA



Maternal Nutrition

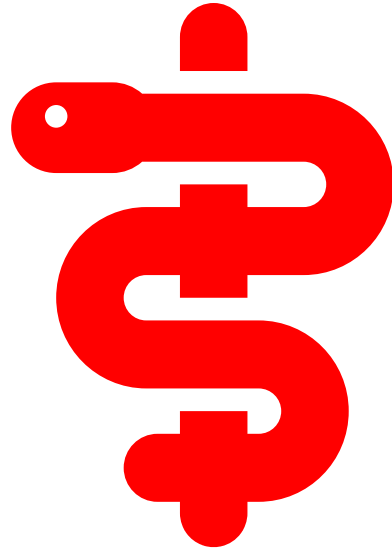
Women Dietary Diversity (MDD-W)



98.7% grains & tubers
79.7% legumes & pulses
51.6% nuts & seeds
50.1% dark green leafys

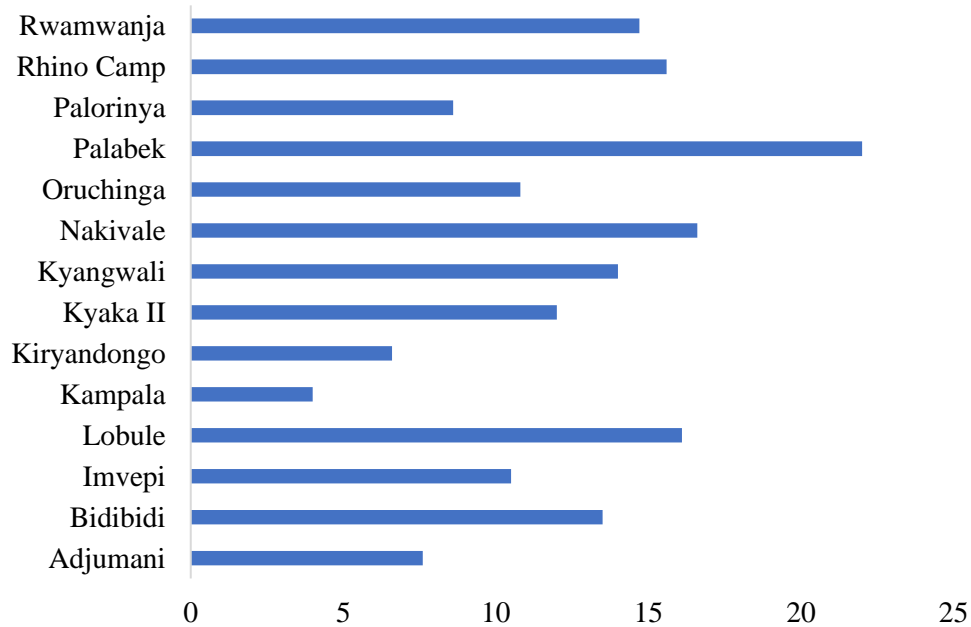


Health

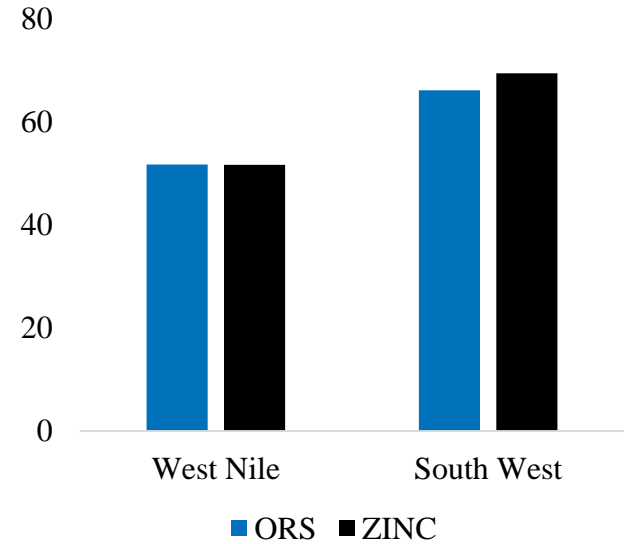


Child Health

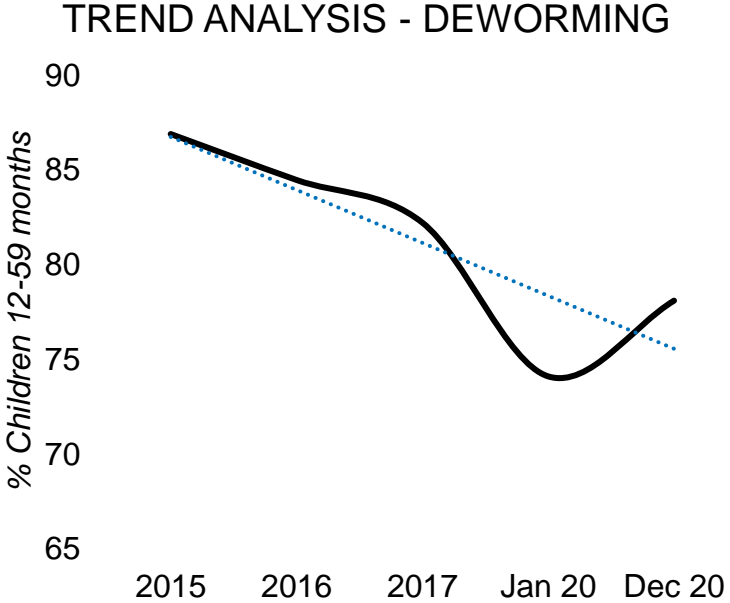
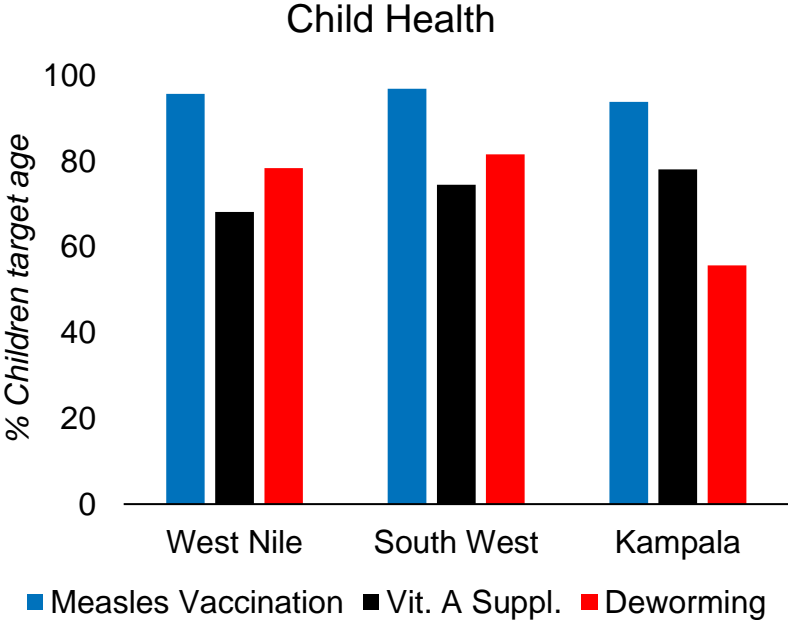
Diarrhea



Treatment of Diarrhea

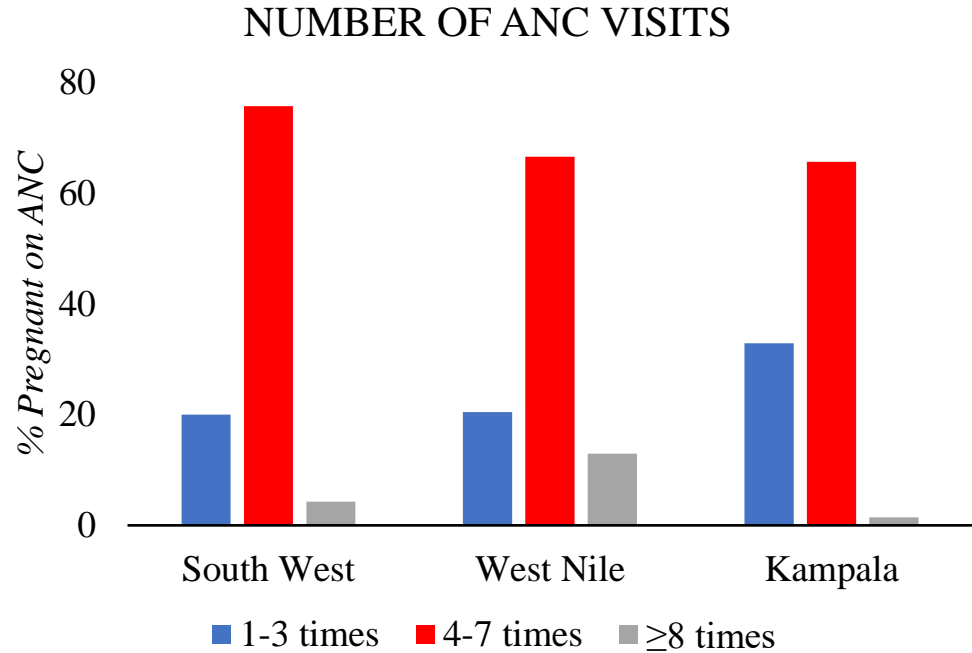


Child Health



SRH - ANC

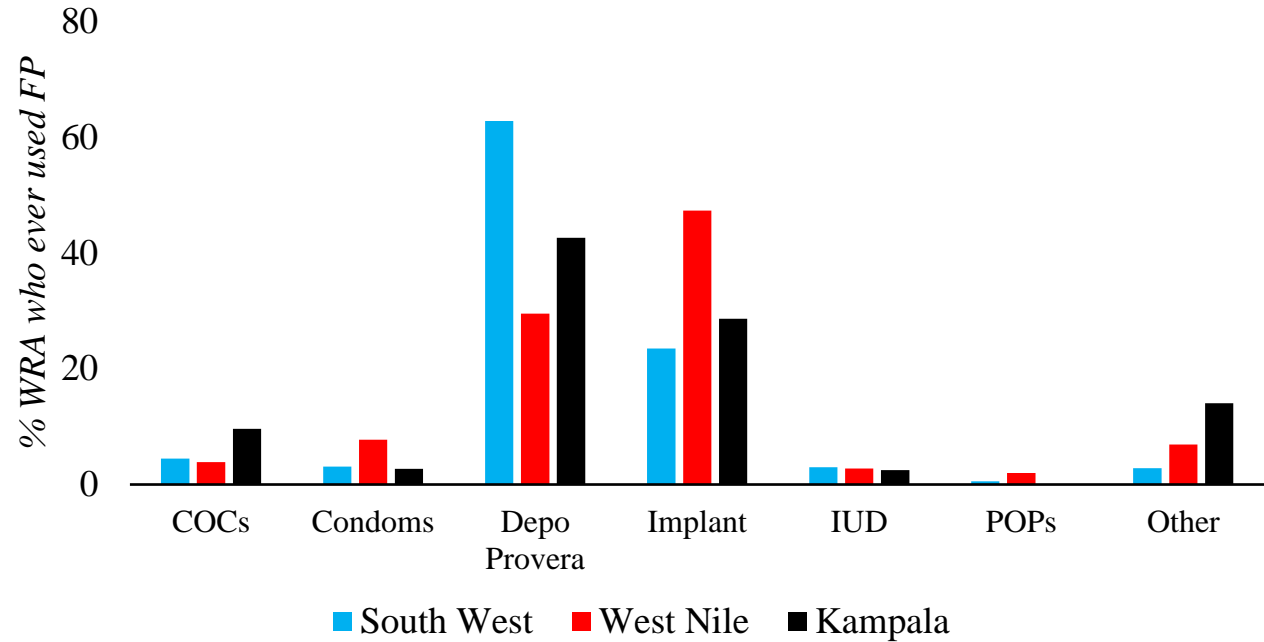
93.7% were enrolled for ANC in last pregnancy
– 95.3% SW,
94.2% WN,
74.9% K'LA



SRH – Family Planning

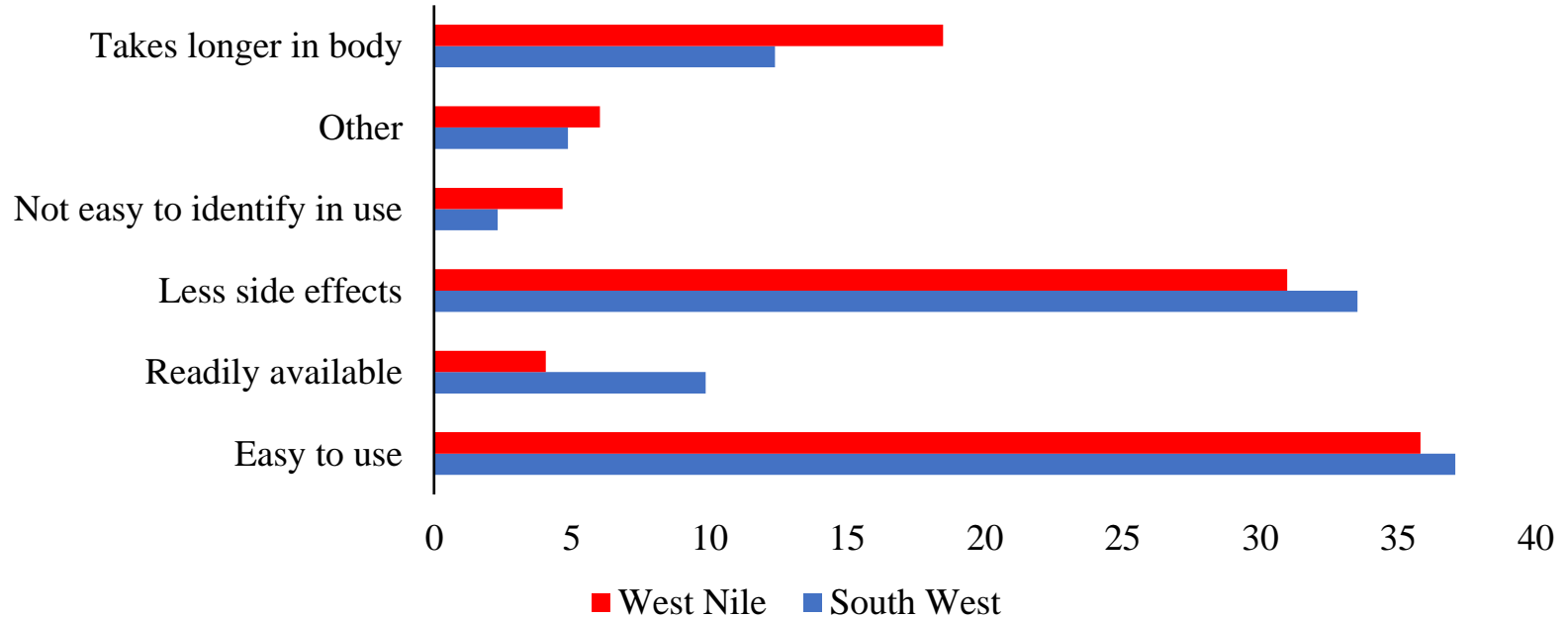
MOST PREFERRED FP METHOD

14.7% ever used FP -
SW 19.8%,
WN 11.1%,
K'LA 4.9%



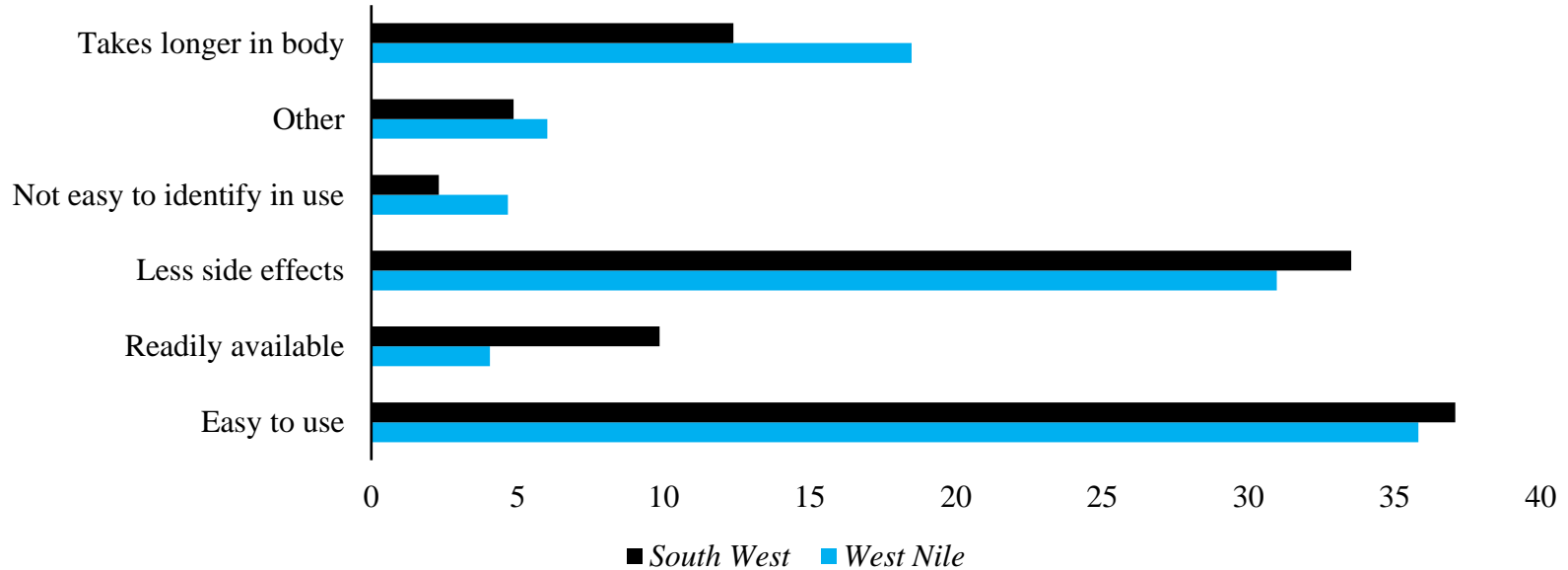
SRH - Family Planning

Reasons for choice of FP method

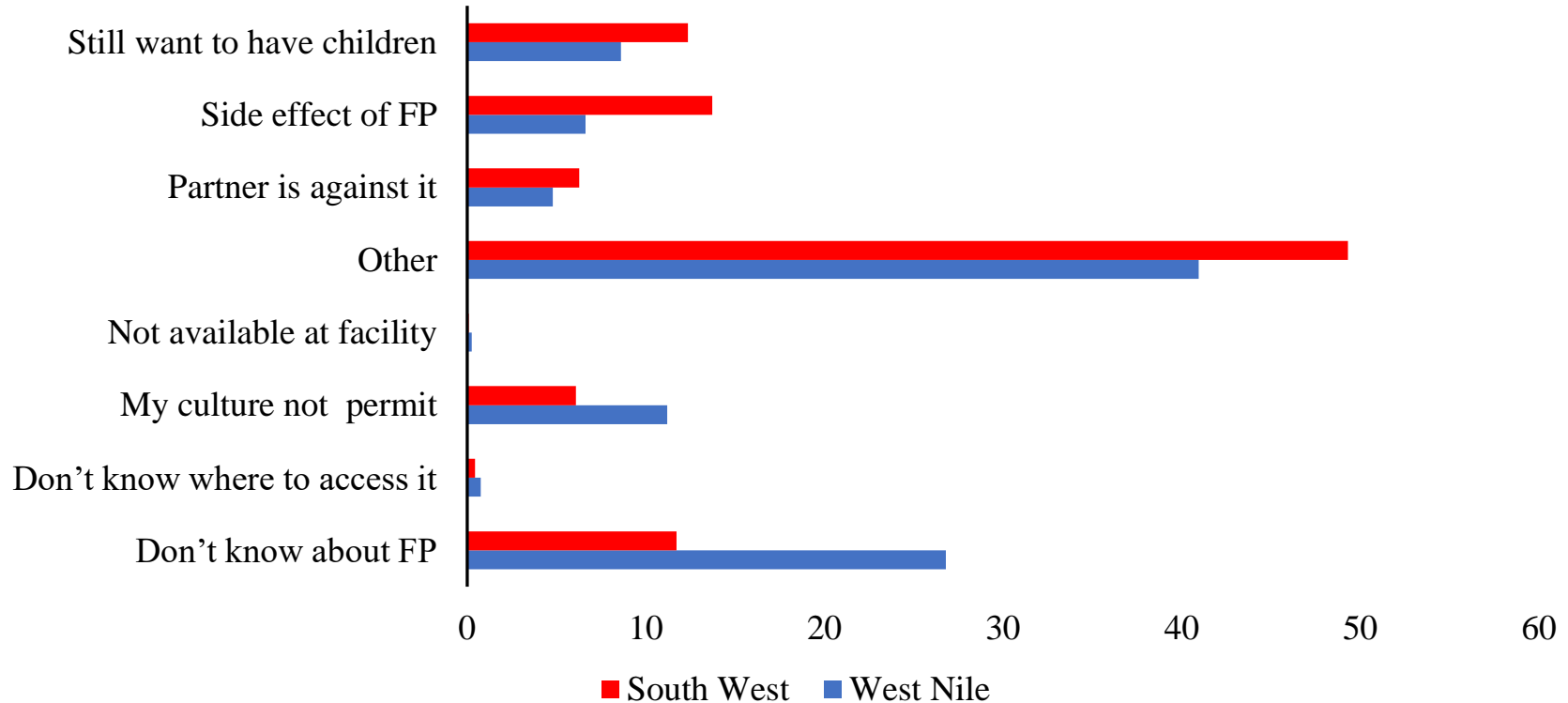


SRH - Family Planning

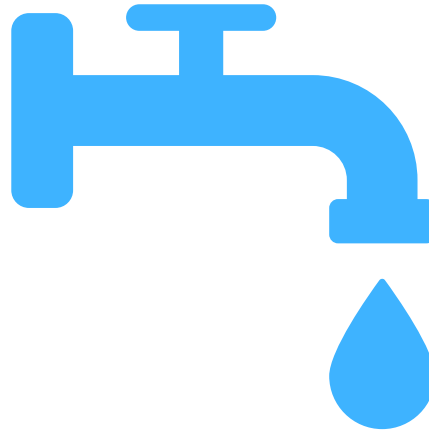
Reasons for preference of FP method



Barriers to Family Planning

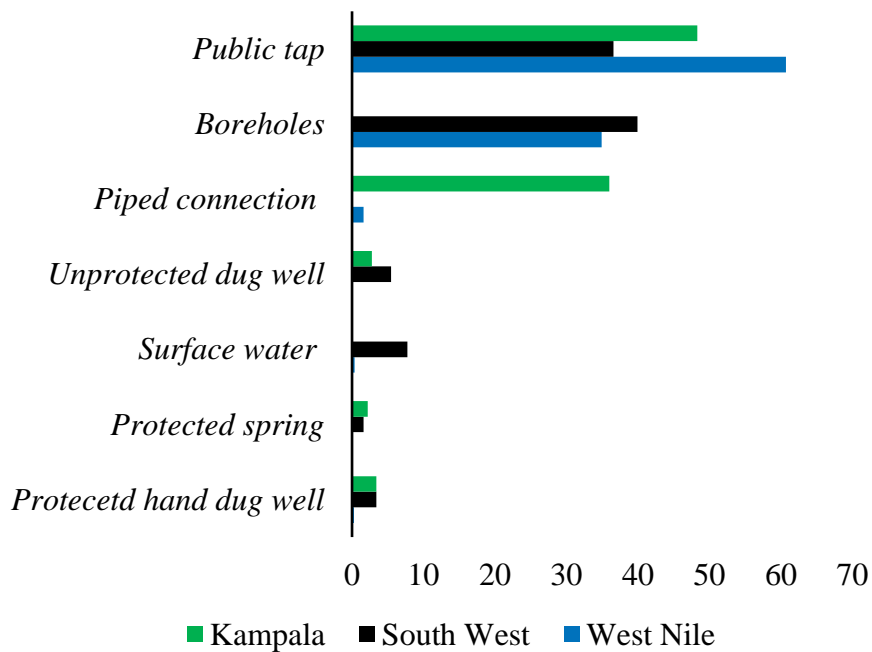


WASH

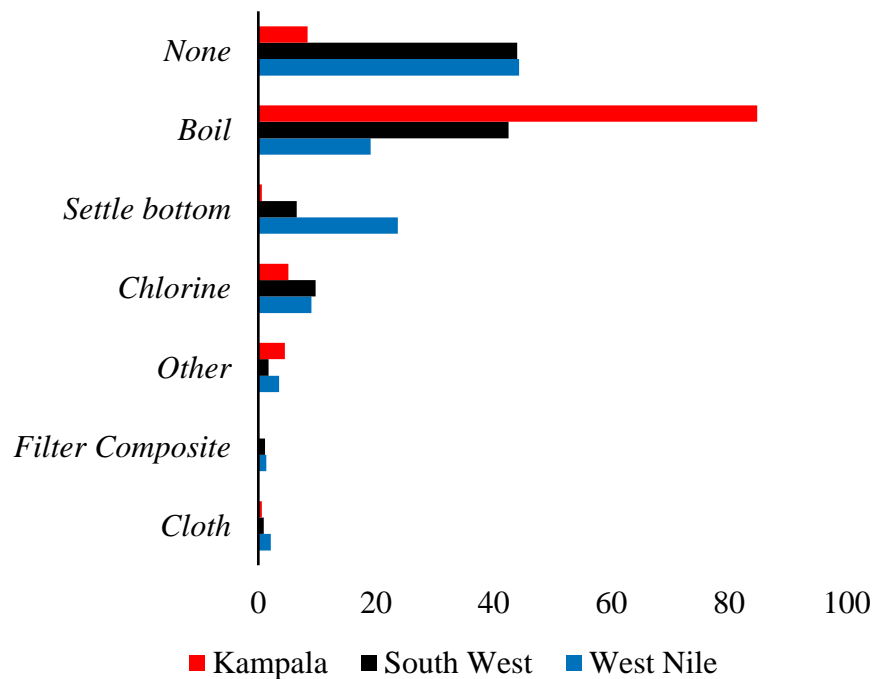


WASH

Drinking Water Sources

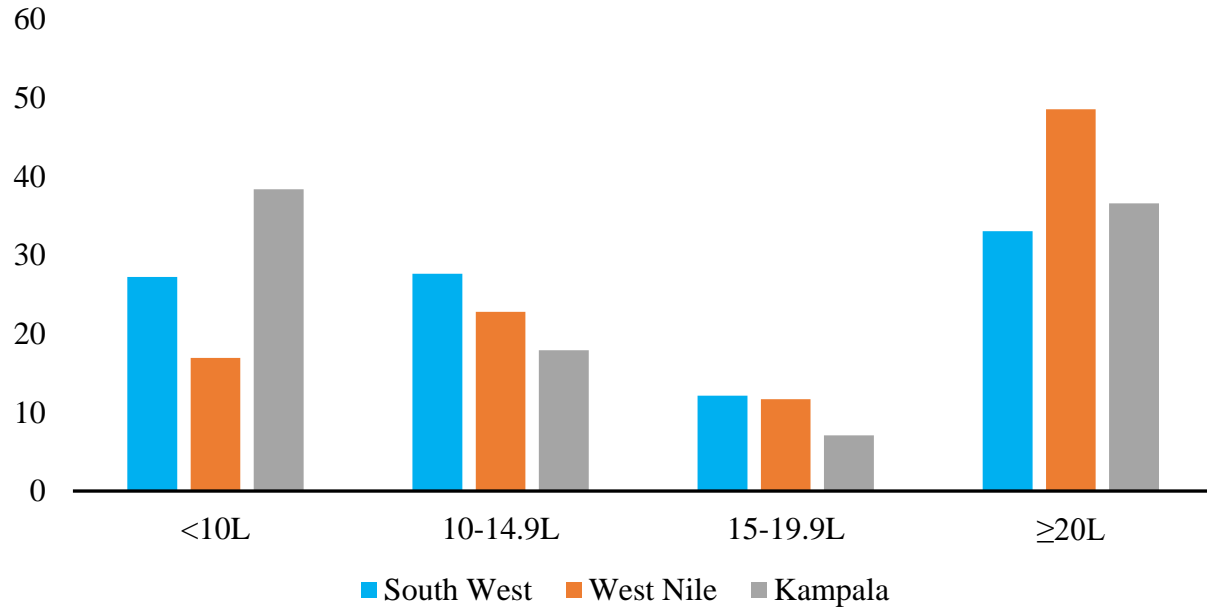


Drinking Water Safety Method

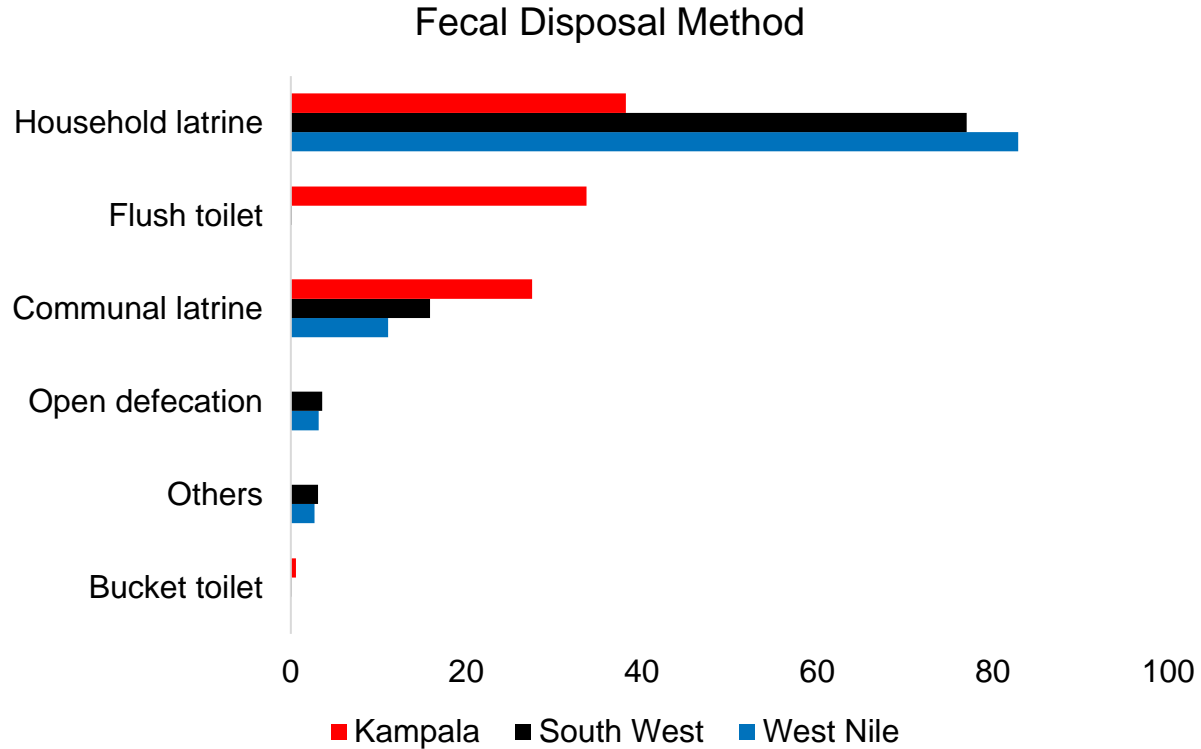


WASH

WATER CONSUMPTION L/P/D



WASH

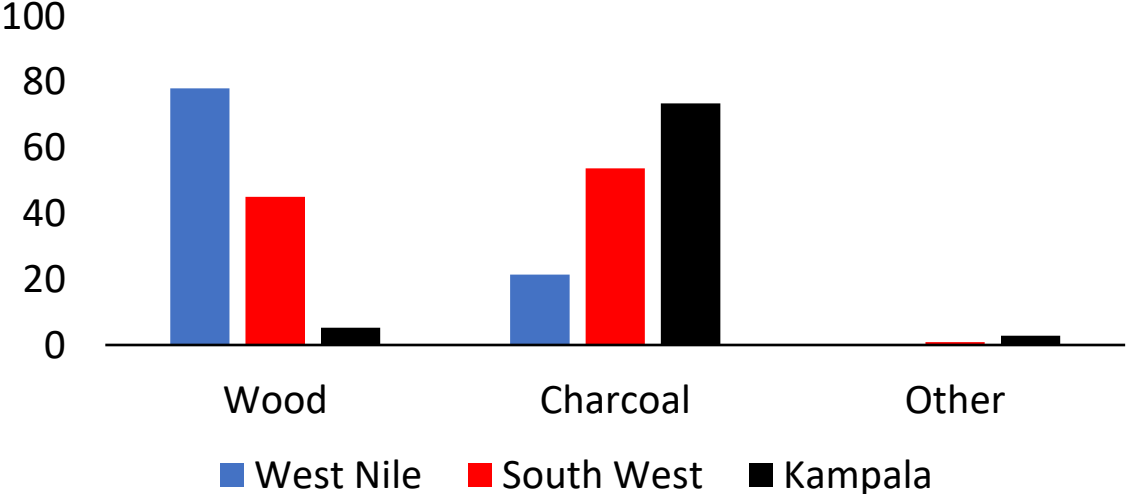


Energy and Environment



Energy

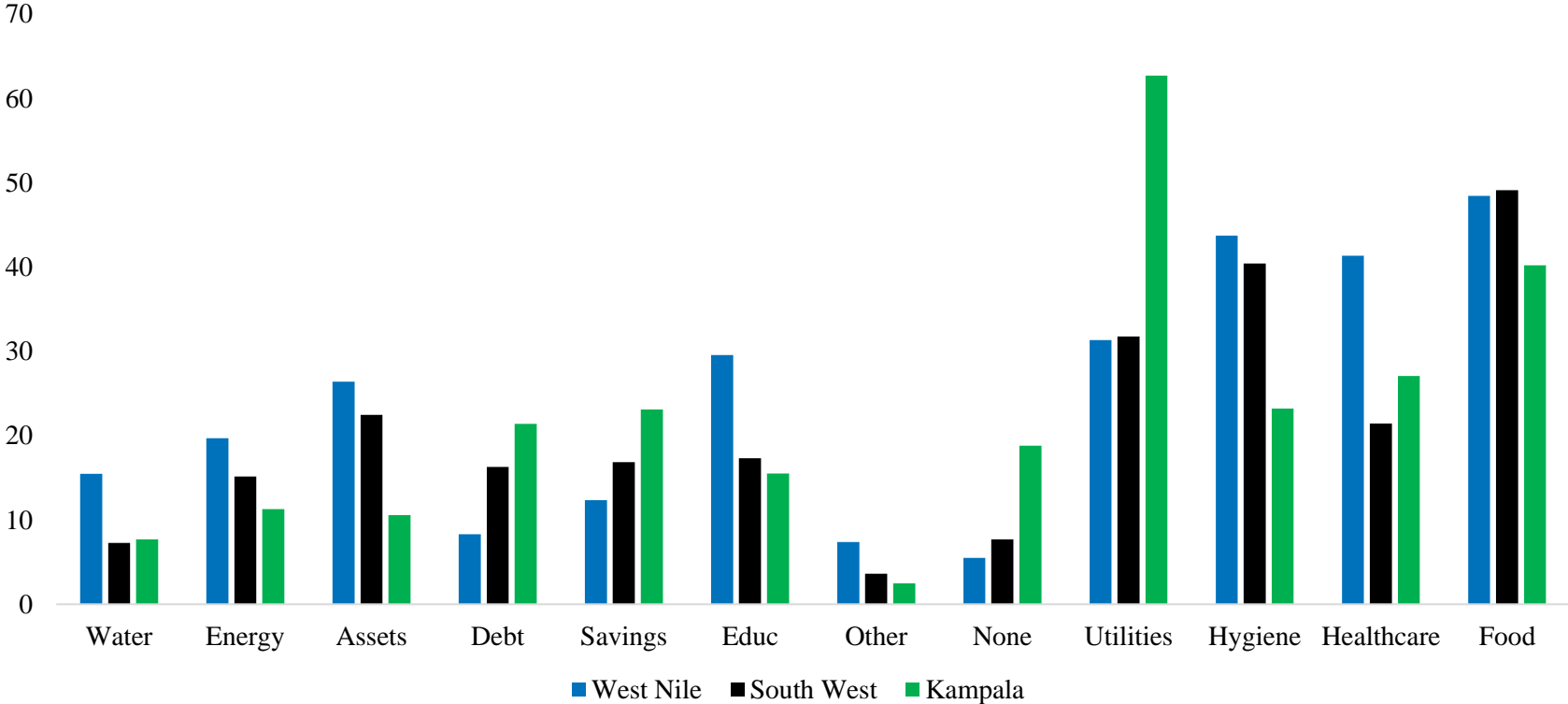
COOKING FUEL SOURCES



Livelihoods



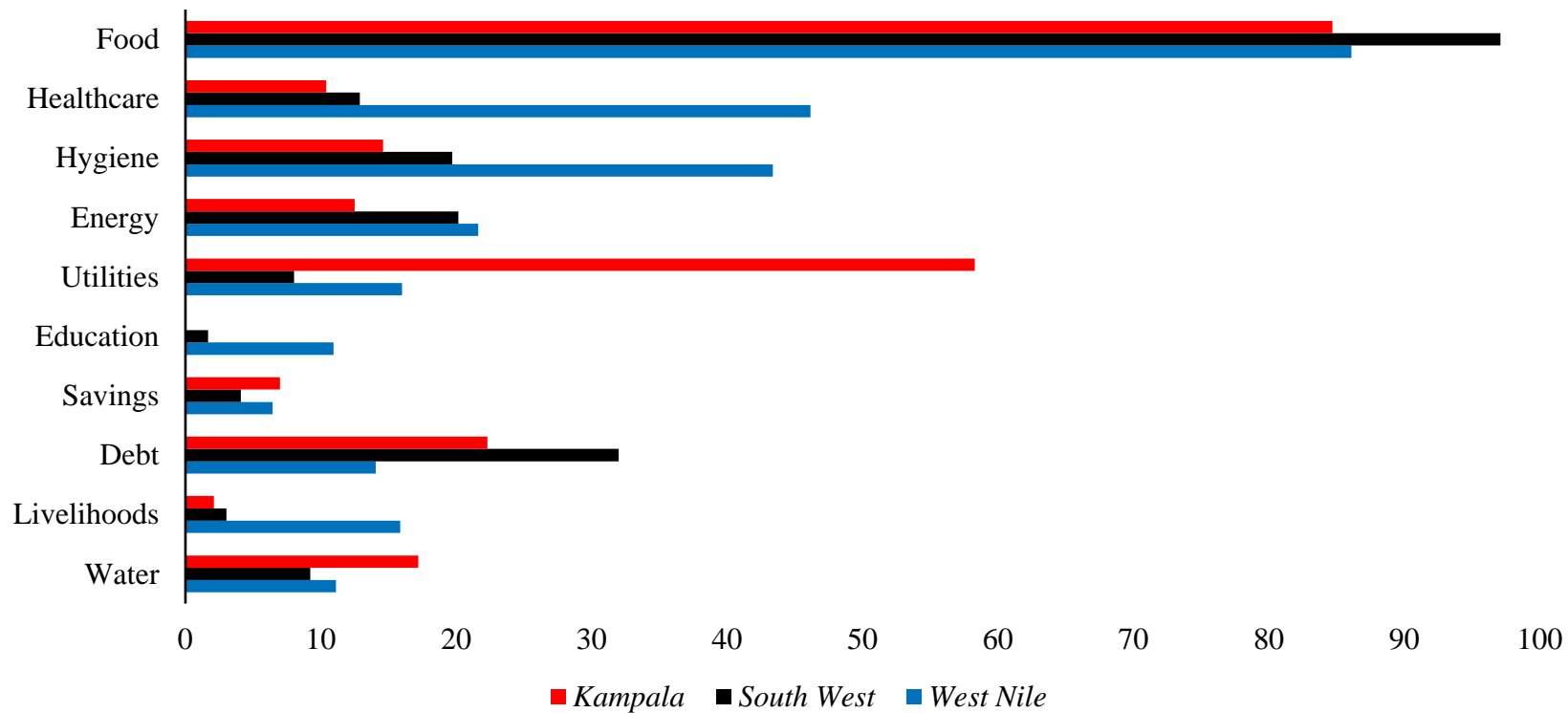
Unmet Basic Needs



Food Security



GFA Cash Expenditure



Household Food Consumption

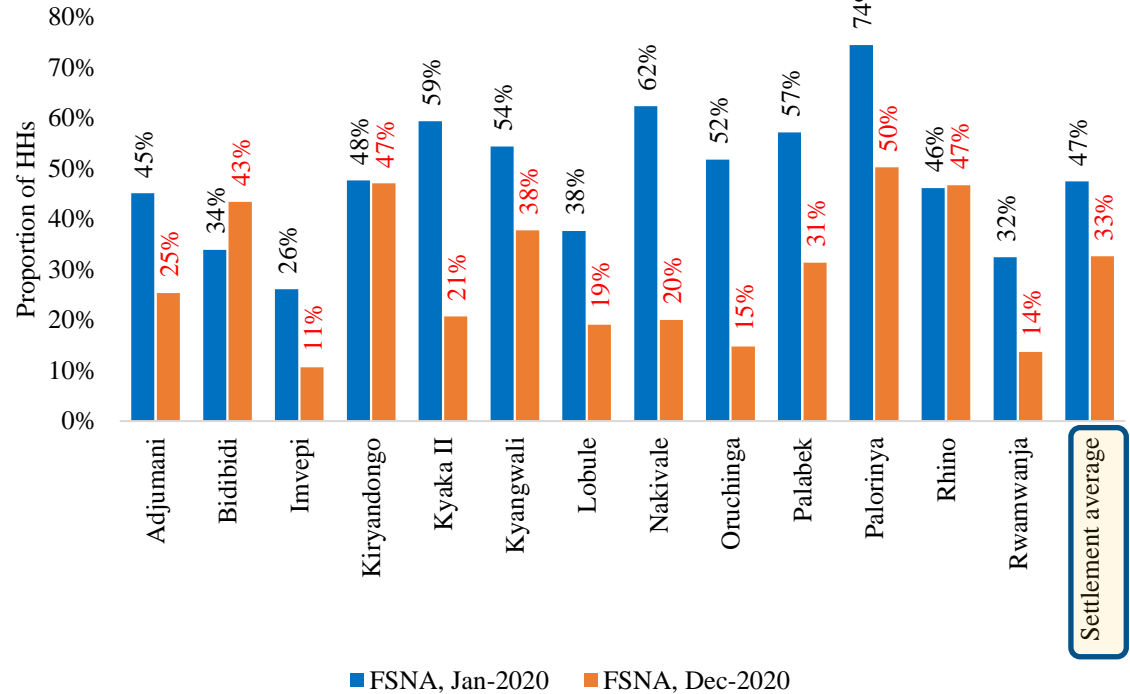
Insufficient food consumption ↓ from 47% in Jan 2020 to 33% in Dec 2020

Food consumption ↑ in 11/13 settlements. Substantial gains in Oruchinga, Nakivale and Kyaka II.

11/13 settlements had just received double GFA during data collection.

Above-average 2020 second season harvests and low staple food prices since May 2020.

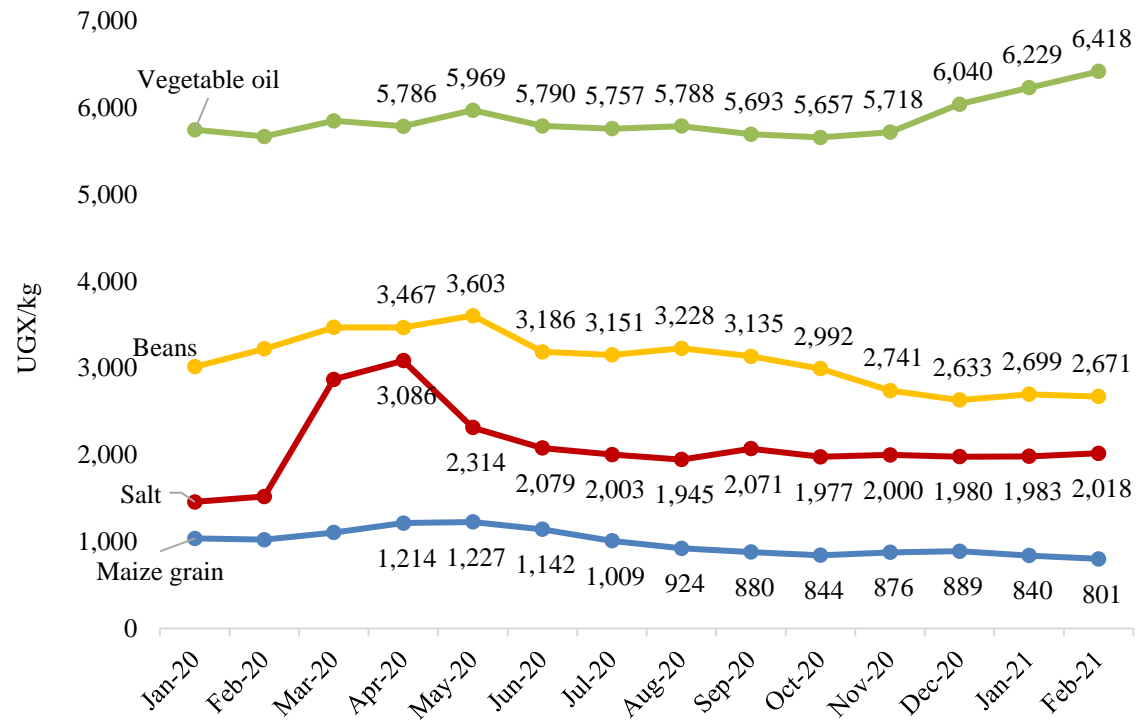
Proportion of HHs with insufficient food consumption



Settlement Markets Food Prices

- Food prices low since Apr-May June 2020, above average harvests in 2020.
- Retail prices for maize, beans and salt reduced by 28%, 23% & 30% between Mar 20 and Feb 2021.
- The cost Food MEB reduced by 18% overall (-23% in SW & -14% in WN)
- FS more likely moderated by higher consumption in Dec

Market price trends Jan 2020-February 2021



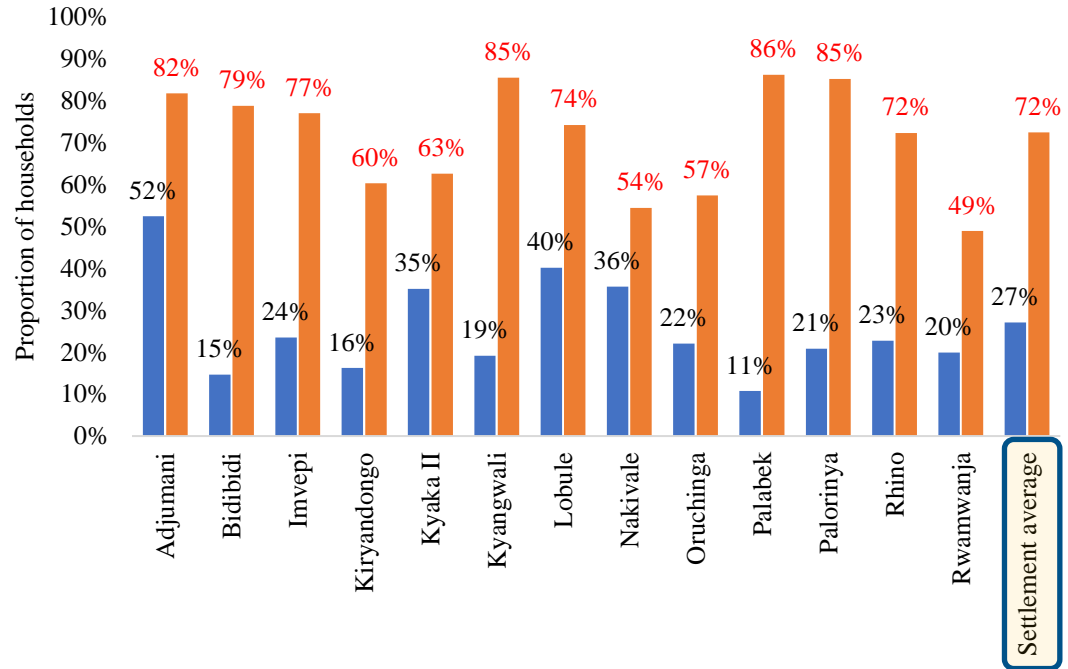
Economic Vulnerability

High HH spending on food is proxy of economic stress. Limited capacity to meet essential needs and manage fluctuations in prices.

Proportion of economically stressed HHs increased by 45% from Jan to Dec 2020.

More spending on food likely due to the ration reductions, and decreased spending on non-food items due to the lock-down.

Proportion of households with high food expenditure share



■ FSNA, Jan 2020 ■ FSNA, Dec 2020



Overall Food Insecurity

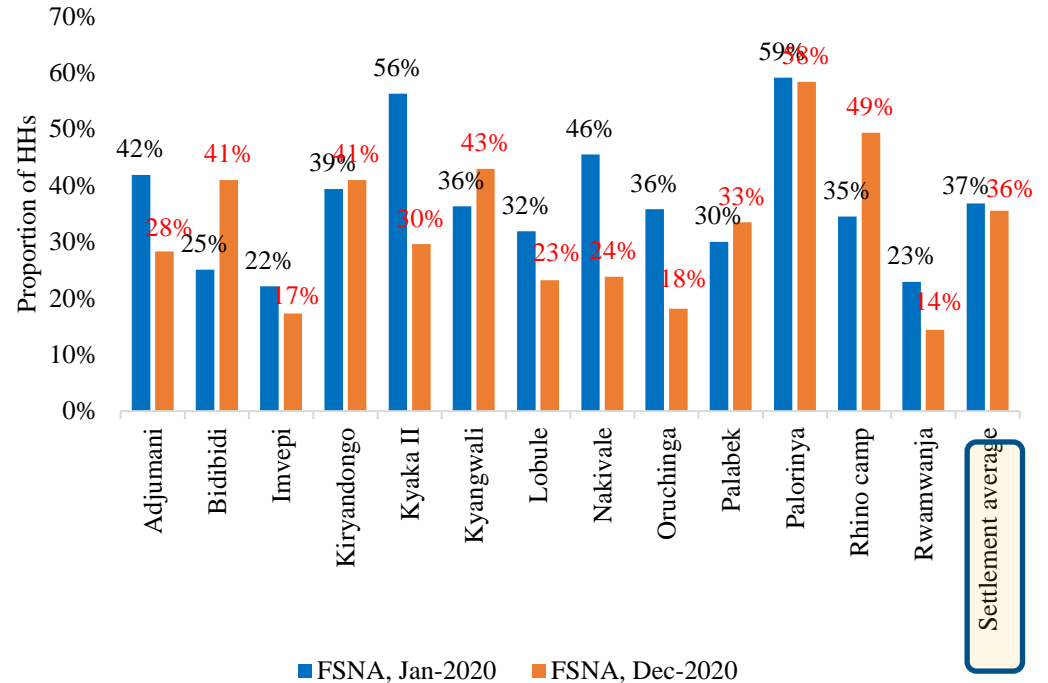
Overall, the prevalence of food insecurity unchanged between the two surveys.

Impact of ration cuts likely cushioned by reduced food prices, good harvests.

Regional difference remain, food insecurity at 26% in SW and 36% in WN

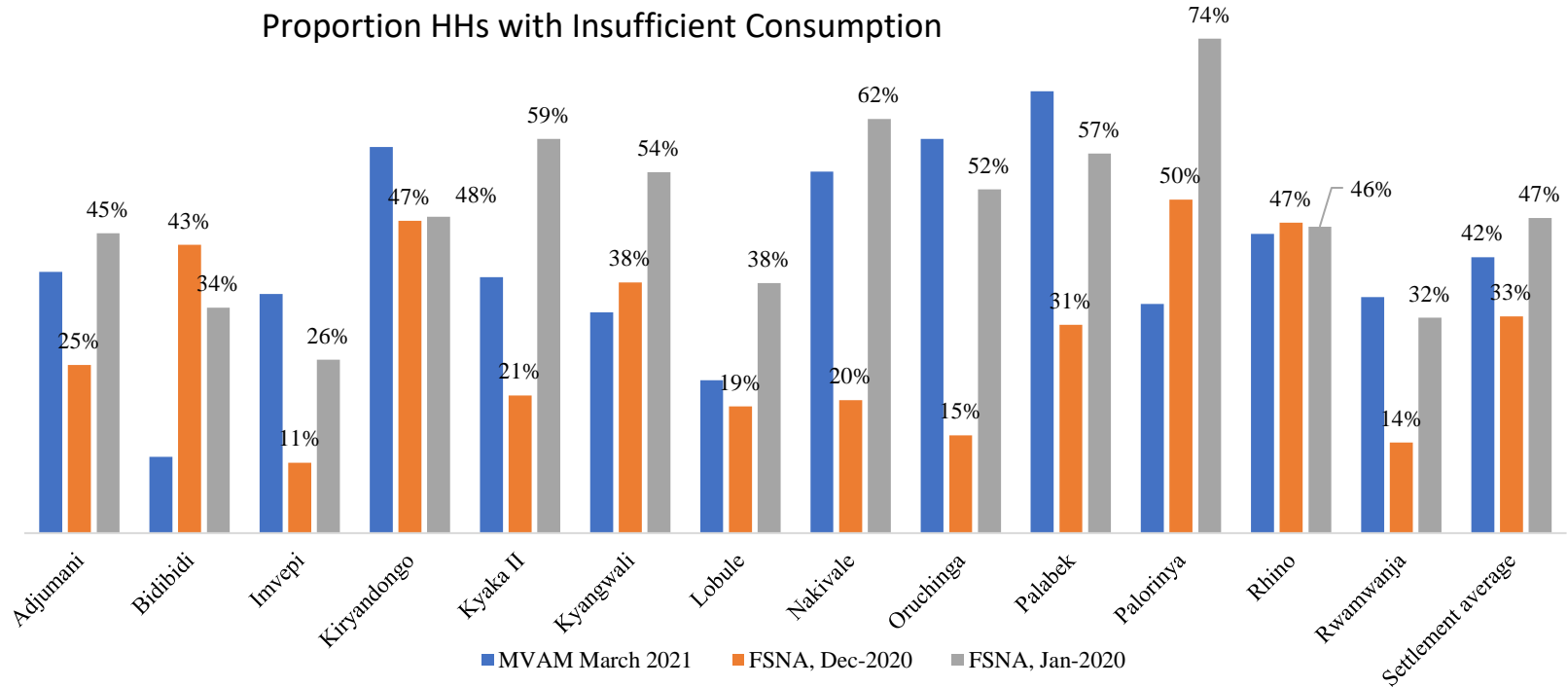
Food security deteriorated in Bidibidi and Rhino camp and improved in Kyaka II, Nakivale and Oruchinga.

Proportion of Food Insecure households



Household Food Consumption (updated)

Proportion HHs with Insufficient Consumption



Considerations and Risk Factors to Monitor

- Food Prices (return to normal from low)
- Resumption of education. Substitution of expenditures towards food to become more unlikely.
- Double distributions (monitor food consumption and food security outcomes in the 2nd month after distribution).

Settlement	Distribution Mode	November				December				January				February				
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	
Rwamwanja	Double		■	■	■	■	*	■	■	■								
Kyangwali	Double			■	■	■	*	■	■	■			■					
Kyaka II	Double			■	■	■	*	■	■	■								
Nakivale	Single		■		■	*	*	■	■	■								
Oruchinga	Single				■	*	■	■	■	■								
Rhino Camp	Double				■	*	■	■	■	■								
Palorinya	Double					■	*	■	■	■			■	■				
Imvepi	Double					■	*	■	■	■			■	■				
Bidibidi	Double			■	■	■	*	■	■	■								
Lobule	Double			■	■	■	*	■	■	■								



Actions on Anemia

Immediate	Implementation status
Anemia typing (causal analysis)	Pilot done, planned for scaleup
Deworming	Routine, planned for scaleup
Bi-annual anemia screening + treatment	Part of 2021 activities
Iron-Folic Acid supplementation	Routine, limited to pregnant women
Mid-term to long term	
<i>Nutrition-sensitive food systems</i>	
Fortification of school meals	Not done
Kitchen gardens (variety)	Done, small scale
Biofortification (iron-rich beans, orange-fleshed potatoes)	Pilot, small scale
Food Security and Livelihoods	Ongoing, gaps
Kyangwali Pilot**	Ongoing
<i>Others</i>	
MIYCAN and Anemia sensitization	Ongoing, scaleup
Malaria control	Ongoing



What has worked elsewhere

Fortifying rice in school meals contributed to a 20% reduction in Anemia in 99,231 in Odisha, India at a cost of \$0.06 – \$0.09 per child over 3 years - Nutrition Exchange

Weekly Iron-Folic Acid for all WRA and regular deworming reduced Anemia (WRA) from 37.5% to 19.3%, Iron deficiency from 22.8% to 9.3%, and intestinal worms from 76.2% 23.0% over 12 months in Vietnam - WHO



Take Away

- Continuity of treatment services for acute malnutrition, anemia
- Aligning short term and long-term actions on anemia reduction
- Potential areas of investment – nutrition-sensitive food systems, school feeding, kitchen gardens, behavior change
- Midterm to long term actions on food security and livelihoods

The end

