

SEPTEMBER UPDATE

This report is an update of the GRFC 2025, and draws on data available as of 22 August 2025¹ to reveal recent dynamics in acute food insecurity, acute malnutrition and displacement since the 2024 peak.

Key findings


Conflict-driven Famines in Palestine (Gaza Strip) and the Sudan

The devastating impacts of man-made conflict have led to Famine (IPC Phase 5) in the **Gaza Strip** and the **Sudan**, and risk of Famine in parts of **South Sudan**. See page 2.

In mid-August 2025, in the **Gaza Strip**, Famine was confirmed in Gaza governorate while conditions in North Gaza were likely similar or worse, but lack of data prevented classification. Famine is also projected by the end of September in Deir al-Balah and Khan Younis, projecting 3 of 5 governorates in Famine. Rafah was not analysed as it is largely depopulated (IPC Global Initiative, August 2025).


In the **Sudan**, Famine was confirmed in five areas and projected to expand to five others in North Darfur from December 2024 to May 2025. Another 17 were at risk of Famine (IPC Famine Review Committee (FRC), December 2024).² Available evidence indicates that Famine conditions likely continue, with deterioration during the June to September lean season (IPC Alert, July 2025).

There was a risk of Famine in Ulang and Nasir counties of **South Sudan** from April to July 2025 (IPC, June 2025).

 Six countries/territories have populations facing **catastrophic levels of acute food insecurity** (IPC/CH Phase 5). Most of the 1.4 million people in this phase are in the Sudan and the Gaza Strip, followed by South Sudan, Yemen, Haiti and Mali. See page 3.

 As of August 2025, Nigeria, Democratic Republic of the Congo and the Sudan have **the largest numbers** of people facing high levels of acute food insecurity, while the Gaza Strip, South Sudan and Yemen have **the highest shares**. These are primarily conflict-driven crises. See figures 1 and 2.


 Analyses covering 2025 indicate **deteriorating acute food insecurity** in 14 countries since 2024, including in Democratic Republic of the Congo, Haiti, Myanmar, South Sudan and Yemen due to conflict/insecurity, and in Guinea and Senegal due to flooding and economic shocks. Deteriorations were projected for Kenya and Somalia due to forecast poor rainfall, although rains were better than expected in Kenya.

 In a number of countries the number of people in need of urgent food and livelihood assistance fell. This positive development may mask localized deteriorations (Afghanistan, Bangladesh and Nigeria), while some analyses do not refer to the lean season (Burundi and the Sudan), or were conducted before the abrupt 2025 funding cuts (Afghanistan, Lesotho and Pakistan).

 **Conflict, economic shocks and weather extremes**, underpinned by structural fragilities, continue to drive food crises. While inflation is easing in some countries, it remains high, especially in conflict-affected contexts such as the Gaza Strip, South Sudan and the Sudan. Temperature extremes, drought conditions and flooding continue to affect agricultural output and livelihoods in countries with food crises.

 **Twenty-six nutrition crises persist in countries/territories with food crises in 2025.** The four most severe are in the Gaza Strip, the Sudan, Yemen and now South Sudan. Mali, among the most severe in 2024, improved slightly through 2025.

 **Displaced people** in countries/territories with food crises continue to be **disproportionately affected by acute food insecurity**. Large numbers of returnees in Afghanistan, Lebanon, South Sudan, the Sudan and Syrian Arab Republic are highly vulnerable. In Democratic Republic of the Congo, the Gaza Strip, Haiti, South Sudan and the Sudan, conflict drove new displacements.

 **Abrupt and substantial funding reductions in early 2025** put at risk lifesaving operations in some of the worst food and nutrition crises.

 These funding cuts threaten to **reverse progress and investment in data collection and analysis** of food security and nutrition, with concomitant effects on response.

FIG. 1 Countries with the largest number of people facing high levels of acute food insecurity, 2025

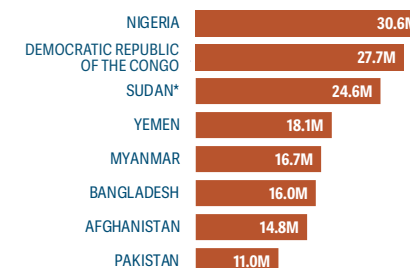
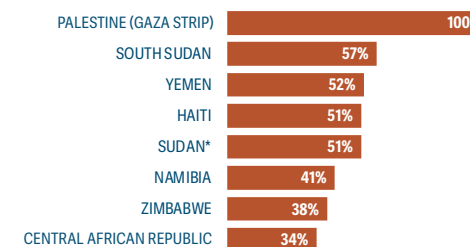


FIG. 2 Countries/territories with the highest share of analysed population facing high levels of acute food insecurity, 2025



* The Government of Sudan did not endorse this analysis. Projections refer to post-harvest period.

No 2025 consensus data are available for Ethiopia.




No data are available for Syrian Arab Republic.

Source: IPC Global Initiative, 2025; IPC TWGs, 2024 and 2025; CILSS, 2025; FEWS NET, 2025; May 2025 update of the previous analysis conducted under the HNRP in Myanmar to reflect the impact of the earthquake and significant reductions in humanitarian funding.

¹ Of the 65 countries/territories selected for the GRFC 2025, 53 had data in 2024. In 2025, data are available for 41 of them.

² The Government of the Sudan did not endorse this analysis.

The end of the ceasefire in March led to the suspension of humanitarian and commercial food deliveries in March and April, followed by critically

	2023	2024												2025											
	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
The Gaza Strip 		5 g'ates		2 governorates			5 governorates						5 governorates					5 g'ates			1 g'ate	3 g'ates			
				3 governorates																1 governorate					
The Sudan 								1 IDP camp*		5 localities and IDP camps*		10 localities and IDP camps*													
							13 localities, IDP camps and refugee settlements					17 localities and refugee settlements*													
South Sudan 																		2 counties							

Most of the population have been displaced multiple times and live in unsafe, overcrowded

Even before the start of conflict in April 2023, the Sudan ranked among the world's worst food crises. Conflict and economic collapse have driven a severe nutrition crisis and the world's largest

Food availability was likely to deteriorate through the June to September 2025 lean season, driving increased reliance on markets where prices are high. Areas experiencing conflict, displacement and besiegement in Greater Darfur and Greater Kordofan face extreme food shortages. Critical levels of acute malnutrition were identified in North Darfur – even during the post-harvest season – and acute malnutrition spread to areas previously not of concern ([IPC Alert, July 2025](#)). At the same time, North Darfur is facing one of its



Severity of acute food insecurity | 2025

worst cholera outbreaks ([MSF, August 2025](#)) amid very low access to basic services.

Despite some gains in humanitarian access in the past months, ongoing fighting in Kordofan and Darfur, and lack of funding, hinder consistent outreach to those in need in Famine-affected areas (IPC Alert, July 2025).

Risk of Famine in South Sudan

In **South Sudan**, Luakpiny/Nasir and Ulang counties in Upper Nile state were at risk of Famine from April to July 2025, as intensifying conflict forced people to leave their homes, and disrupted markets and livelihoods. Both counties were flagged as “no go zones” for international humanitarian actors due to insecurity, cutting off access to vital multi-sectoral humanitarian assistance (IPC, June 2025).

Identifying Famine (IPC/CH Phase 5) and risk of Famine

Famine, an area classification, occurs when at least 20 percent of households have an extreme lack of food and face starvation and destitution, resulting in at least 30 percent of children aged 6–59 months suffering from acute malnutrition, or 15 percent based on mid-upper arm circumference (MUAC) with evidence of rapidly worsening underlying drivers of acute malnutrition, and two adults or four children in every 10 000 dying each day due to outright starvation or to the interaction of malnutrition and disease. Risk of Famine refers to the reasonable probability of an area going into Famine in the future if conditions evolve in a manner worse than anticipated (IPC). [See technical notes, page 18.](#)

1 The Government of the Sudan did not endorse this analysis.

Populations in Catastrophe (IPC/CH Phase 5)

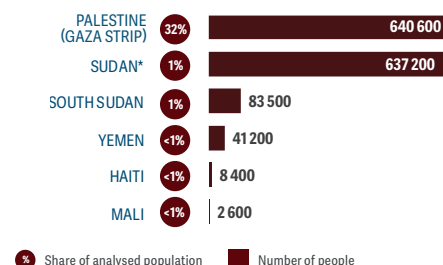
In Catastrophe (IPC/CH Phase 5), households experience an extreme lack of food and exhaustion of coping capacities, and face acute malnutrition and death. They need urgent and immediate action, including large-scale and multisectoral responses and unhindered humanitarian access to prevent further death and total collapse of livelihoods.

Around 1.4 million people were projected in Catastrophe (IPC/CH Phase 5) in six countries/territories, mainly in the **Gaza Strip** and the **Sudan**. *See figure 4.* Around 35 percent of the population of Gaza governorate and 30 percent of the populations of Deir al-Balah and Khan Younis were projected in this phase from mid-August to 30 September (IPC Global Initiative, August 2025).

In the **Sudan**, 11 percent of the population of North Darfur was projected in this phase from December 2024 to May 2025. Al Jazirah, East and South Darfur, Khartoum, and South and West Kordofan states also had populations in this phase (IPC FRC, December 2024).²

In **South Sudan**, of the 83 500 people projected in this phase from April to July, around 44 300 were in Jonglei and Upper Nile, and 39 200 were returnees from the Sudan (IPC, June 2025). In **Yemen**, 41 200 people were projected in Catastrophe in Amran, Al Hodeidah and Hajjah governorates from September, driven by protracted conflict and economic collapse amid reduced funding (IPC, June 2025). Relentless gang violence and economic collapse led to catastrophic conditions in displacement camps in Port-au-Prince, **Haiti**, from March to June (IPC, April 2025). In the conflict-affected Ménaka region of **Mali**, around 2 600 IDPs were still projected in this phase from June to August due to persistent humanitarian access constraints (CILSS, April 2025).

FIG. 4 Countries/territories with people in Catastrophe (IPC/CH Phase 5), 2025



* The Government of Sudan did not endorse this analysis. Projections refer to post-harvest period.

Source: IPC Global Initiative 2025; IPC TWGs, 2024 and 2025; CILSS, 2025.

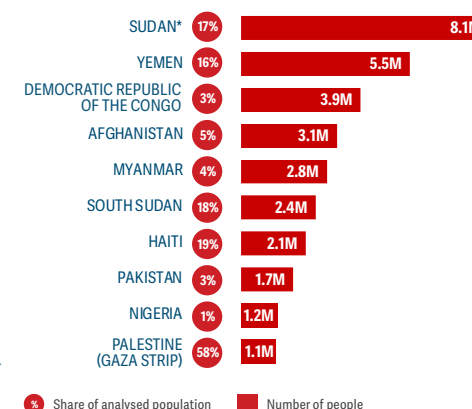
Populations in Emergency (IPC/CH Phase 4)

In Emergency (IPC/CH Phase 4), households either have large food consumption gaps reflected in very high acute malnutrition and excess mortality or they mitigate these gaps by using harmful coping strategies. They need urgent action to save lives and livelihoods.

The **Sudan**, **Yemen** and **Democratic Republic of the Congo** have the highest numbers of people in IPC Phase 4, while the **Gaza Strip**, **Haiti** and **South Sudan** have the highest share. *See figure 5.*

Eleven of the 36 countries/territories with data on severity have seen an increase in the number of people in IPC/CH Phase 4 since the 2024 peak. *See figure A1 in the annexe.* Among those with the largest relative increases are **Democratic Republic of the Congo** with 25 percent (0.8 million) more people, driven mostly by conflict and insecurity in the east (IPC, March 2025). **Guinea**, which had no one in this phase in 2024, has 0.1 million people in 2025 due to high food prices and effects of 2024 floods (CILSS, April 2025).

FIG. 5 Countries/territories with the largest number of people in Emergency (IPC/CH Phase 4), 2025



* The Government of Sudan did not endorse this analysis. Projections refer to post-harvest period.

Source: IPC Global Initiative 2025; IPC TWGs, 2024 and 2025; CILSS, 2025; May 2025 update of the previous analysis conducted under the HNRP in Myanmar to reflect the impact of the earthquake and significant reductions in humanitarian funding.

The number of people in IPC/CH Phase 4 decreased in 13 countries, with the largest reduction in **Bangladesh** (around 1.3 million fewer than in 2024) due to recovery from previous weather-related shocks. *See table A1 in the annexe.* However, over 60 percent of the 0.4 million people in this phase in **Bangladesh** are Rohingya refugees facing increasing hardship due to funding cuts and ration reductions (IPC, June 2025).

The population in this phase in **Afghanistan** was projected to decrease by nearly 450 000 during the harvest season due to the positive effect of food assistance and agricultural support to the most vulnerable families, and more agricultural labour opportunities (IPC, June 2025). No populations are in this phase in **Burundi** or **Lesotho**, down from 0.2 million and 0.03 million respectively in 2024 (IPC, January 2025; IPC, February 2025).



Acute malnutrition in countries/territories with food crises

Nutrition crises worsen amid intensifying conflict and funding cuts

In 2025, nutrition crises continue to be fuelled by persistently high levels of acute food insecurity, limited access to essential services and care, and poor health conditions, exacerbated by severe constraints on humanitarian aid delivery, reduced assistance due to funding cuts and the continued impact of conflict and displacement.

Twenty-six countries/territories with food crises were identified as having nutrition crises in the GRFC 2025. See table A2 in the annexe for nutrition data.

Severity of nutrition crises

Severity data are available for 20 countries/territories with nutrition crises. See figure 6.

The **Gaza Strip**, the **Sudan**, **South Sudan** and **Yemen** are facing the most severe nutrition crises in 2025. **Mali**, among the most severe in 2024, is no longer in this category as it has no areas in Extremely Critical (IPC AMN Phase 5).

In the **Gaza Strip**, during July–mid-August 2025, Famine thresholds for acute malnutrition were reached in Gaza governorate, while in Deir al-Balah and Khan Younis they were projected to be crossed between mid-August and late September, marking a sharp deterioration since the first half of the year. Conditions in North Gaza governorate are estimated to be as severe or worse than in Gaza governorate, but limited data prevent IPC classification of this area.

Since May, MUAC-based global acute malnutrition (GAM) prevalence has tripled in Gaza governorate and doubled in Deir al-Balah and Khan Younis, with mortality in Gaza governorate assessed to have reached the Famine threshold. Non-trauma mortality

figures are likely underreported due to collapsed surveillance systems, suggesting the true toll is significantly higher than available data indicate. Diets fall critically short in both quantity and quality, with over 90 percent of children under 2 years consuming fewer than two food groups daily, while nutrition supplies are nearly exhausted. By July, 96 percent of households faced moderate to high water insecurity, with diarrhoea cases increasing. As of mid-August, only half of hospitals remained partially functional, with critical nutrition and vaccination coverage far below global standards, leaving children and pregnant women at heightened risk of disease, malnutrition and preventable deaths (IPC FRC, August 2025).

In the **Sudan**, Famine (IPC Phase 5) and risk of Famine were detected through May 2025 in North Darfur, Greater Kordofan, Al Jazirah and Khartoum states, and acute malnutrition was expected to worsen during the July to September 2025 lean season. Over half of the 21 SMART surveys conducted during the harvest and post-harvest seasons reported Critical (≥ 15 percent) levels of acute malnutrition among young children in areas previously not of greatest concern. There were likely pockets of even higher severity, approaching Extremely Critical (≥ 30 percent) (IPC, July 2025).

In **South Sudan**, an updated projection triggered by renewed conflict found acute malnutrition increased sharply due to collapsing WASH and health services, catastrophic (IPC Phase 5) acute food insecurity and declining humanitarian assistance. Cholera outbreaks and rising malaria and diarrhoea cases – above seasonal patterns – are contributing to increasing child mortality. Northern counties of Baliet, Luakpiny/Nasir, Rubkona and Ulang were classified in Extremely Critical (IPC AMN Phase 5), with a risk

of Famine in Nasir and Ulang. Nearly 70 percent of areas analysed were in IPC AMN Phase 4 (IPC, June 2025).

In **Yemen**, acute malnutrition worsened in 2025 – though the situation was already dire in 2024, marked by widespread areas classified in IPC AMN Phase 3 or above or equivalent, including four districts in Extremely Critical (IPC AMN Phase 5) (IPC, August 2024).

Among the countries with Critical levels of acute malnutrition (IPC AMN Phase 4) were **Kenya**, **Chad**, **Djibouti** and **Somalia**, with over one-third of analysed areas in this phase, driven by the lingering effects of drought in East Africa and conflict-related displacement in **Chad**.

The first IPC AMN analysis for **Bangladesh** was conducted in 2025 and found that 85 percent of analysed areas were in IPC AMN Phase 3, largely due to recurrent childhood illnesses and limited access to WASH and health services, among displaced populations and host communities.

Magnitude of nutrition crises

Nigeria was estimated to have the highest number of children with acute malnutrition at 5.4 million followed by Democratic Republic of the Congo (4.5 million) and Afghanistan (3.5 million).

Among countries/territories with comparable data between 2024 and 2025, eight¹ have seen increases in burden since 2024, most notably **Senegal**, **Mauritania**, **South Sudan** and the **Gaza Strip**. Only two – **Djibouti** and **Madagascar** – have seen decreases. There are no new estimates for **Ethiopia**, **Haiti**, **Pakistan** or the **Sudan**.

FIG. 6 Ranking of severity of nutrition crises

Country	Highest area classification and share of areas in this phase
PALESTINE (GAZA STRIP) July–September 2025	Famine
SUDAN* July 2024–May 2025	Famine
SOUTH SUDAN April–June 2025	6%
YEMEN* July–October 2024	3%
KENYA March–June 2025	37%
CHAD (residents) June–September 2025	34%
DJIBOUTI August–December 2025	33%
SOMALIA April–June 2025	33%
MALI November 2024–May 2025	26%
CHAD (refugee and host populations) June–September 2025	21%
NIGERIA January–April 2025	20%
NIGER May–July 2025	13%
AFGHANISTAN November 2024–May 2025	12%
UGANDA (Karamoja) November 2024–February 2025	11%
BURKINA FASO May–July 2025	7%
DEMOCRATIC REPUBLIC OF THE CONGO January–June 2025	6%
CENTRAL AFRICAN REPUBLIC September 2025–February 2026	5%
BANGLADESH May–December 2025	85%
MADAGASCAR January–April 2025	41%
BURUNDI October 2024–May 2025	33%
MOZAMBIQUE October 2024–March 2025	9%

3 - Serious (IPC AMN Phase 3) or equivalent
4 - Critical (IPC AMN Phase 4) or equivalent
5 - Extremely Critical (IPC AMN Phase 5)/Famine

* Partial analysis coverage.

Source: IPC TWGs and IPC FRC, 2024 and 2025; Yemen HNO 2025.

¹ Central African Republic, Chad (residents and refugees), Kenya, Mauritania, the Gaza Strip, Senegal, Somalia and South Sudan.



Displaced populations are among the hardest hit by acute food insecurity

In 2025, the 53 countries/territories with food crises and data in the GRFC 2025 experienced returns of internally displaced persons (IDPs) and refugees, as well as new waves of displacement. Disaggregated data on acute food insecurity among displaced people and returnees were available for 13 countries with food crises. See figure 7.

By August 2025, a relative stabilization in security in some parts of the **Sudan** and in **Lebanon** enabled IDP returns (1.3 million and 0.9 million respectively) (IOM, August 2025; IOM, August 2025). Large numbers of returnee refugees and asylum seekers were reported in the **Sudan** (0.3 million), **Afghanistan** (2.3 million), **South Sudan** (0.8 million) and **Syrian Arab Republic** (0.7 million) (UNHCR, July; July and August 2025). Many of these returns are not voluntary or sustainable, and returnees face high levels of acute food insecurity (FSIN and GNAFC, May 2025). The return of refugees can also reduce household income for families reliant on their remittances. For instance, before the conflict in the **Sudan** in 2023, many South Sudanese living in urban areas of the country sent money home (WB, 2023).

In many countries/territories with food crises, people continued to be displaced. In the **Gaza Strip**, more than 737 000 were displaced between the end of the ceasefire in March and mid-July (OCHA, July 2025). The recent wave of displacement forced people to abandon any remaining food stocks and assets, further disrupted access to essential health services and compounded humanitarian needs. The repeated forced displacement and concentration of the population into ever smaller and overcrowded areas are contributing factors to the confirmation

of Famine (IPC Phase 5) in Gaza governorate and its projected expansion to Deir al-Balah and Khan Younis between mid-August and end of September 2025 (IPC Global Initiative, August 2025).

The **Sudan** remains the world's largest internal displacement crisis with 10 million IDPs (IOM, August 2025). The Darfur and Kordofan regions remain hotspots of displacement, despite return movements to Al Jazirah, Sennar and Khartoum states. Nearly all the 0.5 million IDPs in Zamzam camp and hundreds of people from Abu Shouk IDP camp were displaced after severe clashes, insecurity and deteriorating economic conditions (IOM, June 2025). Conflict prevented IDP and returnee households from farming, forcing them to rely even more on markets during the July to September lean season amid a sharp rise in staple food prices (IPC Alert, July 2025). Famine was already projected before the lean season in Zamzam, Abu Shouk and Al Salam camps, and among IDPs in the Western Nuba mountains from December 2024 to May 2025. A risk of Famine was projected in several other areas that were expected to receive IDP influxes in North and South Darfur (IPC FRC, December 2024).¹

The impacts of the crisis in the **Sudan** continue to affect neighbouring countries. In 2025 alone, almost 120 000 refugee returnees from the Sudan were recorded in **South Sudan** (UNHCR, July 2025) where they face major livelihood barriers, including limited access to farmland and lack of livestock, amid severe economic vulnerabilities (IPC, July 2025). Some 85 percent of them faced high levels of acute food insecurity from April to July 2025, up from 75 percent during the same period in 2024,

¹ The Government of the Sudan did not endorse this analysis.

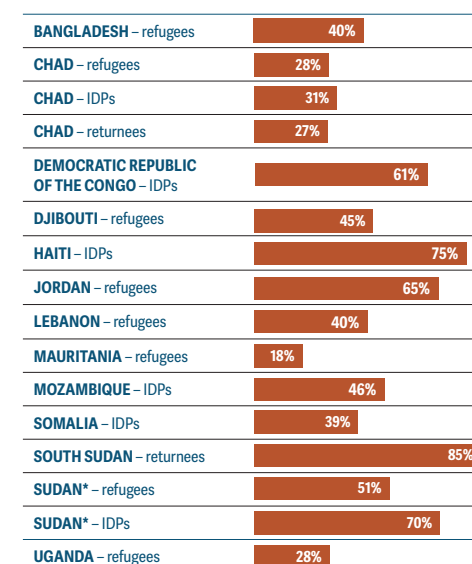
with 5 percent of them in Catastrophe (IPC Phase 5) (IPC, June 2025). The highest concentration of returnees was in Luakpiny/Nasir county in Upper Nile, where a risk of Famine persisted among residents from April to July. Returnees were not included in the risk of Famine analysis due to insufficient data (IPC, July 2025).

The number of Sudanese refugees in **Chad** also increased from 1.3 million in late 2024 to 1.4 million by July 2025 (UNHCR, July 2025). Most are in eastern provinces where agricultural and non-agricultural livelihood opportunities and resources remain scarce, while most new arrivals and returnees lack livestock or agricultural assets (FEWS NET, August 2025). Around 456 000 refugees, returnees and IDPs faced high levels of acute food insecurity from June to August 2025 (CILSS, April 2025).

Between January and March 2025, the eastern provinces of **Democratic Republic of the Congo** witnessed complex population movements as conflict and abrupt closure of IDP camps compelled 1.8 million IDPs in North and South Kivu to return to their places of origin or relocate to host communities elsewhere, while over 1 million remained displaced (IOM, March 2025). The IDP returnees often arrived post harvest, increasing the economic vulnerability of both displaced and host communities. Around 2.2 million IDPs or 61 percent of the IDP population in eastern provinces faced high levels of acute food insecurity from January to June 2025 (IPC, March 2025).

In **Haiti**, the number of IDPs increased by 24 percent since the end of 2024 due to escalating violence, reaching nearly 1.3 million or 11 percent of the country's population (IOM, July 2025). Displaced populations have no access to livelihood

FIG. 7 Share of displaced and returnee populations facing high levels of acute food insecurity, 2025



* The Government of Sudan did not endorse the December IPC analysis. Sources: IPC TWGs, 2024 and 2025; CILSS, 2025; FEWS NET, 2025.

opportunities due to insecurity and associated movement restrictions amid soaring prices. Some 75 percent of the analysed IDP population faced high levels of acute food insecurity from March to June 2025. All of the 8 400 people in Catastrophe (IPC Phase 5) are internally displaced (IPC, April 2025).

In many countries/territories with food crises, displaced populations were covered as part of the overall population analysed. However, gaps in data on acute food insecurity among displaced and returnee populations persist.



Assessing the impacts of the drastic decline in humanitarian funding

Seismic shifts in the funding landscape coincide with rising needs

The year 2025 is witness to a convergence of deepening food and nutrition crises and sharp reductions in official development assistance (ODA) and humanitarian aid. Programmes in food security, nutrition and related sectors (health, water, sanitation, agriculture, protection) are being scaled back or terminated, risking reversal of development gains, while data and information to assess needs and target operations is increasingly limited.

The scale of the crisis

In the first half of 2025, there was a drastic funding contraction with some major donors slashing their ODA budgets by between 35 and 83 percent, affecting health, nutrition and food security operations in over 100 countries (EC-JRC, June 2025).

The abrupt funding cuts and uncertain future funding scenarios mean that the full impacts at the local, regional and global levels are still unfolding.

The Organization for Economic Cooperation and Development (OECD) projects up to a 17 percent

drop in ODA in 2025. Least developed countries (LDCs) are projected to see a 13–25 percent fall in net bilateral ODA from Development Assistance Committee providers and countries in sub-Saharan Africa could face a 16–28 percent ODA decline. The outlook beyond 2025 remains uncertain (OECD, June 2025).

'The cruel maths of doing less with less'

In response, humanitarian actors are 'hyper-prioritizing'. The Global Humanitarian Overview (GHO) 2025 gave urgent priority to 114.4 million people deemed to be most at risk – just 38 percent of those it identified as being in need. As of July 2025, only 17 percent of the funding necessary to assist them was secured (OCHA-HNO, July 2025).

The reprioritization strategy focuses on lifesaving activities including food, water, health and protection. Stabilizing services, such as education and livelihoods, are deprioritised and long-term investments largely excluded, limiting support to

household and community recovery (OCHA-HNO, July 2025), and eliminating any potential gains along the humanitarian-development-peace nexus.

Shrinking budgets and sudden suspensions have limited operational capacity and raised expectations on those services that remain (ICVA, March 2025). In a global survey carried out in March by the UN Office for the Coordination of Humanitarian Affairs (OCHA), respondents reported the termination of at least 12 000 humanitarian staff contracts, and at least 22 organizations indicated they had to shut down completely. Local and national non-governmental organizations (NGOs) reported the highest proportion of terminations (OCHA, April 2025) and women-led and women's rights organizations are among the hardest hit (UN Women, May 2025).

Sectoral impacts

Food security

In the food security sector, operational targets are for about a quarter of those that the GRFC 2025 identified as being in need of urgent food and livelihood assistance (FSIN and GNAFC, May 2025). In 23 food crisis-affected countries, assistance targets were reduced from 100 million to 76 million people – despite growing needs. The largest reductions were in **Chad, Bolivarian Republic of Venezuela, Mozambique and Somalia** (OCHA-HNO, July 2025).

Food assistance operations have responded to funding cuts by reducing rations, duration of assistance, and/or reducing caseloads. The World Food Programme, the largest humanitarian food agency, estimates that it will reach almost

16.7 million fewer people in 2025 than 2024, representing a 21 percent decrease (WFP, April 2025). More than 10 million of these people are in **Yemen, Afghanistan, Somalia and Ethiopia**. The cuts may worsen food insecurity and lead to more severe coping mechanisms. They risk pushing millions of people currently receiving assistance into more severe forms of acute food insecurity (WFP, April 2025; World Vision, June 2025).

Nutrition

The nutrition sector is heavily affected, with the number of women and children targeted for nutrition interventions falling from 38 million to 22.4 million (OCHA-HNO, July 2025). By mid-2025, only 27 percent of nutrition funding required to reach them with curative and preventative assistance had been secured, leaving a gap of USD 993 million (Global Nutrition Cluster, 2025).

Projections indicate that reductions in global aid will disrupt nutrition services for 14 million children in low- and middle-income countries, leaving 2.3 million without treatment for severe acute malnutrition (SAM) and potentially causing an additional 369 000 preventable child deaths annually. This is likely an underestimate, as cuts also affect maternal nutrition, vitamin supplementation, food fortification, school feeding, and access to clean water and health services (Nature, April 2025).

In **Democratic Republic of the Congo, Somalia** and the **Sudan**, for example, access to treatment has been dramatically reduced. In **Afghanistan** alone nearly 300 nutrition centres remain closed, cutting off care for 80 000 acutely malnourished children and pregnant and breastfeeding women (OCHA, June 2025).

Country snapshot | Yemen

Yemen's protracted food crisis is driven by an interplay of prolonged conflict, economic shocks, weather extremes, displacement and severely disrupted livelihoods on top of structural fragilities. However, humanitarian assistance has played an important role in reducing food consumption gaps and averting widespread hunger during the last decade. In 2025, beneficiary caseloads and transfer values are expected to contract, including reducing operations to only the most severely affected areas. Assistance was largely suspended in de facto authority-controlled areas (DFA) of southern Yemen in 2024, leaving millions without critical support. It gradually resumed in late 2024 but has dropped sharply again since May 2025 (IPC, June 2025).



Assessing the impacts of the drastic decline in humanitarian funding

Health

Health and healthcare underpin food and nutrition security. Funding cuts have led to health facility closures, loss of health workers and disruptions to supply chains for lifesaving supplies, vaccinations and medicines, such as treatments for severe acute malnutrition and other preventable diseases (OCHA-HNO, July 2025).

Bilateral ODA for health is projected to decline by 19–33 percent in 2025 over 2023 levels, marking further falls from previous high levels related to COVID-19 support. ODA for health in 2025 is projected to fall below pre-COVID-19 levels (OECD, June 2025).

The reductions in disease-specific and health condition-specific programmes alone could result

in an additional 15.2 million AIDS-related deaths, 2.2 million tuberculosis deaths, and 7.9 million child deaths between 2025 and 2040 (*The Lancet*, April 2025). This risks having a significant impact on livelihoods and food access.

Forcibly displaced people

Forcibly displaced people tend to be more food insecure than the host community and residents. UNHCR reports that 11.6 million people – one-third of its caseload – risk losing direct assistance. Programmes in the Middle East and North Africa, and Latin America and the Caribbean face the largest percentage cuts at over 40 percent (UNHCR, July 2025).

As of June 2025, food, nutrition and emergency agriculture assistance programmes for displaced people face major shortfalls. Twenty countries were experiencing pipeline breaks in WFP food and nutrition assistance programmes, affecting 4.5 million forcibly displaced people. Between July and September, another 14 countries and 3.1 million refugees were at risk.

In **Bangladesh**, Rohingya refugees face further cuts by October after their rations were already halved in March (WFP, forthcoming). Both Cox's Bazar and Bhashan Char, where Rohingya refugees reside, are projected to shift from a Crisis (IPC Phase 3) classification to Emergency (IPC Phase 4) in May to December 2025, with funding cuts a contributing factor (IPC, July 2025).

In **Yemen**, the notable decline in funding is contributing to higher levels of acute food insecurity in areas with a high concentration of IDPs (IPC, June 2025).

A dangerous data drought

Funding cuts threaten to reverse significant progress made over the last decade in data collection and analysis of food security and nutrition, with concomitant effects on response (EC-JRC, June 2025).

The IPC/CH, developed to establish a comparable and consensus-based analysis of acute food insecurity and acute malnutrition, face a major funding gap in 2025–2026 (IPC, June 2025).

Agencies and organizations that provide crucial data and evidence for early warning systems and needs assessments, such as those of the IPC/CH, are struggling too. FEWS NET operations were disrupted between January and June by the sudden suspension of funding in January. FAO, IOM, IMPACT, WFP and others have lost funding for data collection that underpins the international community's understanding of humanitarian needs and operational planning. Demographic and Health Surveys, which ensure maternal and child health monitoring, are paused, and some SMART surveys have been cancelled (EC-JRC, June 2025).

While much data will still be collected and datasets will be produced, the ability to accurately measure the dynamics of humanitarian crises and the needs of affected people is set to weaken over time with the funding cuts, with wider impacts on saving lives (OCHA, March 2025). Without these tools, future interventions will be less targeted and less effective. There is a risk of a return to "hidden famines" in which mass starvation and mortality proceed unseen, unspoken and unaddressed, even in war zones where starvation is being used as a weapon (ICG, February 2025).

The funding squeeze began before 2025 despite increasing needs

The sharpest reduction in funding has occurred in 2025. Even with hyper-prioritization, by mid-June 2025, only 17 percent of funding required for humanitarian assistance to all sectors has been received (OCHA-HNO, July 2025).

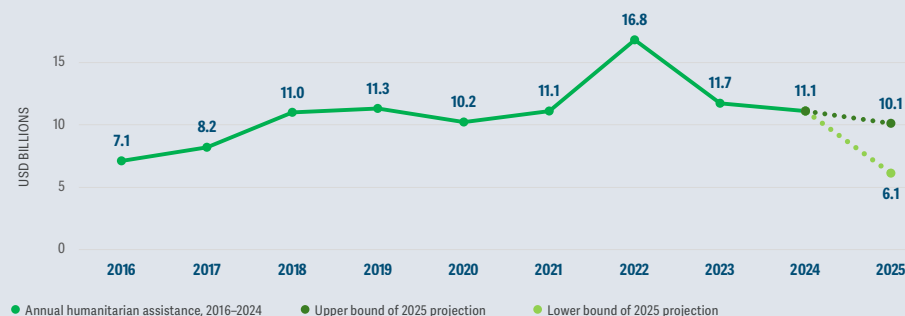
However, funding was already on a downward trend since 2022 due to the impact of COVID-19 on government resources and re-orientation of national budgets away from ODA. The global system's reliance on a small group of donors had left it exposed to changes in policy agendas.

Humanitarian needs more that doubled between 2016 and 2023, but between 2022 and 2023,

humanitarian assistance allocations to food sectors in countries/territories with food crises saw an overall decrease of 30 percent (GNAFC, January 2025). Between 2019 and 2023, nutrition and food security funding from European donors stagnated, growing only 1 percent per year on average (Results for Development, June 2025).

By 2024, many programmes were underfunded, with food assistance rations and beneficiary numbers scaled down in **Afghanistan, Democratic Republic of the Congo, Ethiopia, Haiti, Nigeria, Somalia, South Sudan** and **Syrian Arab Republic** (Humanitarian Action, December 2024).

FIG. 8 Humanitarian allocations to food sectors in food-crisis contexts



Source: GNAFC, 2025.

Regional updates


Central and Southern Africa

The lingering effects of the 2024 drought and ongoing economic hardship in many countries continued to drive high levels of acute food insecurity, even though cereal production improved. Conflict and displacement remain dominant drivers, especially in Central African Republic and Democratic Republic of the Congo.

Of the 12 countries facing food crises in the region in the GRFC 2025, all but the **Congo** have acute food insecurity estimates for 2025. **Central African Republic, Democratic Republic of the Congo, Madagascar** and **Mozambique** are also experiencing nutrition crises.


In **Democratic Republic of the Congo**, acute food insecurity worsened due to intensifying conflict in the east and deteriorating economic conditions (IPC, March 2025). It was flagged as a hunger hotspot in FAO-WFP's early warning outlook for June to October 2025 (WFP and FAO, June 2025). **Zimbabwe**'s food crisis also worsened in the first months of 2025, before the harvest, as food stocks were widely unavailable due to the El Niño-induced 2024 drought, while high prices and below-average income constrained food access (FEWS NET, October 2024).

Slight improvements were projected in **Central African Republic** mostly due to an easing in the security situation facilitating marginally higher agricultural production than in recent years (IPC, July 2025). Humanitarian assistance contributed to improvements in **Lesotho** (IPC, February 2025). For **Eswatini, Malawi, Mozambique, Namibia** and **Zambia**, the peaks are the same for the two years as they cover the October 2024 to March 2025 period.

 **Weather extremes** continue to drive acute food insecurity in the region. Despite the regional maize surplus, acute food insecurity



remains a challenge for the 2025–2026 consumption period due to localized rainfall deficits and the lingering effects of the 2024 El Niño on crop production and pasture and water availability (FAO, July 2025). At the regional level, maize production in 2025 showed a generally positive outlook, led by a 261 percent increase in production in **Zimbabwe** and 140 percent increase in **Zambia** compared with the dismal 2024–2025 harvest (SADC report, forthcoming).

 **Conflict/insecurity** in eastern **Democratic Republic of the Congo**, northern **Mozambique** and southeastern, northeastern and northwestern **Central African Republic** continue to drive population displacement, limit access to farmland and negatively impact livelihoods (FAO, July 2025).

 **Economic shocks** remain a significant driver. High inflation, driven by currency depreciation, food price spikes and the lingering effects of the 2024 drought, drive acute food insecurity in **Zambia, Zimbabwe** and **Malawi**. Inflation remained high in **Democratic Republic of the Congo** and **Central African Republic**, largely due to conflict, supply chain disruptions and weak currencies (World Bank, May 2025).

East Africa

The devastating social and economic impacts of conflict, especially in the Sudan, as well as weather extremes, continue to drive the region's severe food crises.

Of the ten countries identified as facing food crises in the region in the GRFC 2025, seven have acute food insecurity estimates for 2025. All of these are experiencing nutrition crises. No data are available for **Eritrea, Ethiopia** or **Rwanda** (refugees).

The **Sudan** remains the region's largest and most severe food crisis as the conflict entered its third year. Available information suggests that Famine conditions persist in several areas during the July to September lean season (IPC Alert, July 2025).

The **Sudan** conflict is contributing to worsening acute food insecurity in neighbouring **South Sudan**, with Catastrophe (IPC Phase 5) and an ongoing cholera outbreak among returnees (IPC, June 2025; WHO, July 2025). Escalating conflict and an economic crisis in the country also led to Catastrophe (IPC Phase 5) conditions across Pibor county and Luakpiny/Nasir, Ulang and Malakal counties in Upper Nile. Nasir and Ulang are facing a risk of Famine (IPC, June 2025).


In **Somalia**, drought and conflict-related displacement and reduced humanitarian assistance were expected to contribute to a worsening situation (IPC, March 2025). In **Kenya's** arid and semi-arid lands (ASALs), a projected deterioration was based on forecast below-average March–May 2025 rains (IPC, March 2025), which occurred but not as expected (NDMA, May 2025).

Despite overall ongoing recovery from the previous drought in **Ethiopia**, erratic rainfall in 2025 damaged crop performance in northern and central areas. Concern remains for populations in Amhara, Oromia and Tigray regions, due to



the impact of past and ongoing conflict and insecurity, as well as for households in southern pastoral parts of Afar that have not recovered yet from past droughts (FEWS NET, June 2025). Projected improvements for **Burundi** are for the post-harvest period. In **Djibouti**, despite an overall improvement, food security among the country's refugees was expected to deteriorate, with reduction of humanitarian assistance a contributing factor (IPC, June 2025). In **Uganda**, the food crisis remained on a par with 2024 (FEWS NET, 2025).

Somalia, the Sudan and **South Sudan** were flagged as hunger hotspots in FAO-WFP's early warning outlook for June to October 2025 (WFP and FAO, June 2025).

 **Conflict/insecurity** is the key driver in the **Sudan**. Despite a relative stabilization in security in Al Jazirah, Khartoum and Sennar states allowing for IDP and refugee returns, conflict continued unabated in Darfur and Kordofan, triggering new displacements amid increasing attacks against humanitarian organizations. Intensified fighting around El Fasher town crippled access to medicine and food for its besieged residents (OCHA, June 2025). North Darfur, where



Regional updates

Famine was projected in several areas, is experiencing a cholera outbreak (IPC, July 2025; MSF, July 2025).

Any potential food security gains from improved agricultural production in 2024–25 in the **Sudan** were tempered by conflict-induced trade disruptions, driving up production costs and cereal prices, amid reduced employment opportunities, which constrained food access (FAO-GIEWS, May 2025). These vulnerabilities were likely to be exacerbated during the July to September 2025 lean season when households increasingly depend on markets (IPC, July 2025).

In **South Sudan**, conflict and insecurity displaced households, disrupted humanitarian assistance, and limited access to farms and markets (IPC, June 2025). Conflict and insecurity persist in parts of **Ethiopia** and **Somalia**, driving internal displacement (IOM, July 2025; IOM, July 2025).

 **Weather extremes** In southern **Sudan**, central and eastern **South Sudan**, and northern **Ethiopia**, early rainfall deficits during the June–September season affected crop planting (EU-JRC, July 2025). Forecast above-average rainfall for the remainder of the season should benefit agriculture and water access but increases flood risks, especially in **South Sudan**.

Moderate and severe drought conditions have materialized in northern and coastal areas of **Somalia** (OCHA, August 2025) driving displacement (IPC, March 2025). In **Ethiopia**, livestock production improved in some regions and the meher harvest was at near-average levels, while pastoral southern areas of Afar and northern areas of Somali recorded below-average rainfall (FEWS NET, July 2025).

 **Economic shocks** In 2025, the **Sudan** and **South Sudan** as well as **Burundi** continue to have some of the highest year-on-year inflation rates globally (IMF, April 2025). Although inflation



in **Ethiopia** eased in 2025, it remains elevated at around 14 percent, with high fuel costs impacting food production and transport (ESS, July 2025).

West Africa and the Sahel


Despite improvements in acute food insecurity in some countries, conflict, insecurity and economic challenges continue to drive food crises, while the risk of floods in Sahelian areas are likely to exacerbate conditions.

Of the 13 countries identified as facing food crises in the region in the GRFC 2025, 11 have acute food insecurity estimates for 2025. Among these, eight are also experiencing nutrition crises. No data are available for **Burkina Faso** and **Liberia**.


Nigeria remains the largest food crisis in terms of numbers, followed by **Chad**, **Cameroon**, the **Niger**, **Guinea** and **Mali**. Overall improvements were expected in the **Niger**, **Sierra Leone**, **Cameroon** and **Nigeria**. However, increases in the number of people in Emergency (CH Phase 4) were projected in conflict-affected areas of **Nigeria**, primarily due to ongoing insecurity and displacement, as well as in **Sierra Leone** and **Cameroon** (CILSS, April 2025).

Burkina Faso, **Chad**, **Mali** and **Nigeria** were flagged as hunger hotspots in FAO-WFP's early warning outlook for June to October 2025 (WFP and FAO, June 2025).

 **Conflict/insecurity** continues to disrupt livelihoods, markets, humanitarian assistance and trigger displacement – especially in the Liptako-Gourma and Lake Chad Basin areas, northern **Nigeria** and eastern **Chad**. It disrupted agriculture and market access, and was expected to lead to localized production shortfalls in **Burkina Faso**, **Mali**, the **Niger**, Lake Chad Basin and northern **Nigeria** (FAO, July 2025; FEWS NET, June 2025). The refugee and returnee influx from the **Sudan** into **Chad** and spillover violence from the Central Sahel into coastal countries, worsened conditions in those areas (CILSS, April 2025).

 **Economic shocks** Regional growth is projected at 4.3 percent in 2025, but inflation and high cost of living erode household purchasing power (AfDB, May 2025; FEWS NET, June 2025).

In **Nigeria**, macroeconomic reforms and currency weakness contribute to high food inflation and restrict food access (WFP and FAO, June 2025). Food prices remain high in **Burkina Faso**, **Guinea**, **Sierra Leone**, **Senegal** and **Togo**, with trade restrictions and export bans in some countries straining markets (FEWS NET, June 2025).

 **Weather extremes** The 2024 floods have left lasting impacts, with almost 1 million hectares of agricultural land affected (OCHA, February 2025). Although the 2025 rainy season forecast was favourable, the risk of flooding remains high (CILSS, April 2025) with farmland damaged in **Ghana**, **Guinea**, the **Niger** and **Nigeria** (OCHA, July and August 2025).



Asia

Conflict remains the primary driver of acute food insecurity in Myanmar, while climate extremes and economic shocks are the main drivers in Afghanistan, Bangladesh and Pakistan.

Out of the five countries identified as facing food crises in the region in the GRFC 2025, acute food insecurity estimates for 2025 are available for **Afghanistan**, **Bangladesh**, **Pakistan** and **Myanmar**. All are also experiencing nutrition crises, while **Myanmar** is a nutrition concern. No data are available for **Timor Leste**, and **Democratic People's Republic of Korea** remains a data gap.


Myanmar, **Bangladesh** and **Afghanistan** remain the largest food crises in the region, followed by **Pakistan**. **Myanmar** faces a worsening food crisis, primarily driven by conflict¹ and was flagged as a hunger hotspot in FAO-WFP's early warning outlook for June to October 2025 (WFP and FAO, June 2025).

¹ May 2025 update of the previous analysis conducted under the HNRP in Myanmar to reflect the impact of the earthquake and significant reductions in humanitarian funding.



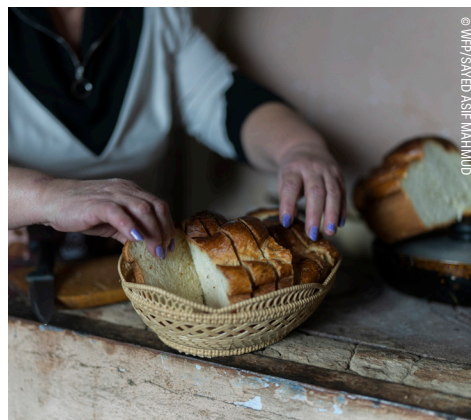
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Improvements in **Afghanistan** were due in part to humanitarian food assistance and agricultural support to the most vulnerable families, as well as more agricultural labour opportunities (IPC, January 2025). However, large-scale returnee inflows, the recent earthquake and 2025 funding reductions risk offsetting these gains in the second half of 2025. In **Bangladesh**, improvements were due to the absence of major natural disasters in recent months (IPC, June 2025). However, Rohingya refugees continue to face high severity linked to ration reductions and funding shortfalls.

 **Weather extremes** Severe rainfall deficits in **Afghanistan** caused widespread failure of crops in the north and northwest (EC, June 2025).

The first two months of the 2025 monsoon season (June–September) brought mostly favourable rainfall that supported land preparation and crop planting in **Bangladesh** and **Myanmar** (ERCC, June 2025), but also led to localized flooding. In **Myanmar**, floods in Kachin and Rakhine affected more than 30 000 people and disrupted road access in areas with already limited humanitarian access (OCHA, June 2025). As of 22 August, severe monsoon flooding in **Pakistan** has caused widespread destruction, leading to the loss of more than 5 400 livestock, and has severely impacted mobility, livelihoods and access to services, with Khyber Pakhtunkhwa worst affected to date (OCHA, August 2025).

 **Conflict/insecurity** Escalating conflict in **Myanmar** since May 2025, particularly in Sagaing, Rakhine, Mandalay and Northern Shan, disrupted livelihoods and markets and drove displacement (OCHA, May and July 2025). Many of these areas were affected by the March 2025 earthquake, for which humanitarian assistance has been limited due to conflict and constrained access. In June alone, renewed clashes in Magway, Sagaing and Southern Shan displaced over 60 000 people (OCHA, June 2025).



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Europe

In Ukraine, the escalation of hostilities from May 2025 damaged infrastructure, even in less-affected western and central areas. People along the frontline and border areas of the conflict face the most difficulties in producing and accessing food, with IDPs reporting high losses of productive land assets and very few (5 percent) able to replace them (IOM, May 2025).

Increasing insecurity in the east reduced humanitarian access and almost 1.5 million civilians in need could not be reached in Donetsk, Kherson, Luhansk and Zaporizhzhia oblasts (OCHA, June 2025). Ukraine is now one of the world's most mine-contaminated countries (UNMAS, January 2025) with over 20 percent of land polluted with mines or unexploded ordnance (OCHA, June 2025).

While **Ukraine** remains a significant supplier of food globally, conflict continues to affect agriculture, including area planted, access to fields and supply chains (GEOGLAM, July 2025). High temperatures and below-average precipitation in the south and the east triggered drought alerts in

July. Nonetheless, in July harvests began in the south under overall favourable conditions (FAO, July 2025; GEOGLAM, July 2025). Total cereal output in 2025 is expected to be about 14 percent lower than the five-year average (FAO, July 2025).

Inflation continued to increase each month into June 2025, when it slowed for the first time since March 2024. It eased slightly in July due to harvests (FAO, July 2025; State Statistics Service of Ukraine, 15 August 2025).

The **Republic of Moldova** again extended temporary protection status for refugees to 1 March, 2026 (Government of Moldova, 2025).

Latin America and the Caribbean

High levels of acute food insecurity are projected to persist or worsen, driven by violence, structural economic challenges and weather extremes. New migration flows are further straining humanitarian response capacities.

Out of the six countries and refugee populations selected for GRFC 2025, acute food insecurity estimates for 2025 are available for **El Salvador**, **Guatemala**, **Haiti** and **Honduras**. No data covering 2025 are available for **Colombia** or **Ecuador** (migrants and refugees). **Haiti** is the region's only nutrition crisis.

In **Haiti**, the region's most severe food crisis, acute food insecurity was expected to worsen, with half of the population in IPC Phase 3 or above, nearly 20 percent in IPC Phase 4 and pockets in Catastrophe (IPC Phase 5) in March–June 2025 (IPC, April 2025). It was flagged as a hunger hotspot in FAO-WFP's early warning outlook for June to October 2025 (WFP and FAO, June 2025).


In **El Salvador**, persisting levels of acute food insecurity are projected, highlighting the low resilience of households during the lean season



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and below-average cereal output in 2024 (FAO, July 2025; FEWS NET, May 2025).

The situation improved in **Honduras**, reflecting national policies to mitigate food insecurity (IPC, April 2025). In **Guatemala**, improvements were initially projected, supported by expected above-average agricultural production (IPC, August 2024). However, dry conditions may alter these outcomes (FEWS NET, July 2025).

 **Conflict/insecurity** In **Haiti**, escalating gang violence continues to displace populations (IOM, June 2025) and severely disrupt livelihoods and markets. In **Colombia**, violence continues to affect rural communities resulting in displacement, confinements and access constraints, notably in Catatumbo and Cauca (OCHA, July 2025).

 **Economic shocks** The region has experienced stagnant economic growth since before the COVID-19 pandemic, exacerbating structural socioeconomic challenges such as poverty and inequality. Regional GDP growth was revised down to 2.0–2.3 percent for 2025 amid global trade tensions and uncertainty (WB, June 2025; ECLAC, April 2025). In **Haiti**, a further economic contraction and high food inflation are severely limiting food access. While food inflation



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has eased in **Colombia** and **Honduras**, it remains above 4 percent, straining household budgets (DANE, July 2025; Banco Central de Honduras, July 2025). New north-to-south migration is reshaping flows across the region, including **Colombia** and **Ecuador** with increased arrivals and returns further straining humanitarian resources (IOM, July 2025; MMC, April 2025).



Weather extremes In **Haiti**, April 2025 floods damaged crops while below-average rainfall forecast for July–September 2025 threatens second-season planting. In **Honduras**, livelihoods were still affected by the November 2024 tropical storm Sara.

In the Dry Corridor, delayed and below-average rains postponed planting in **El Salvador**, **Guatemala** and **Honduras**. Dry, hot conditions are expected in northern areas while extremely high temperatures have reduced soil-moisture, increasing production costs and lowering yield prospects (FEWS NET, June 2025; July 2025). **Colombia** experienced flooding and landslides, affecting key infrastructure and agricultural activities (CPC, July 2025; OCHA, July 2025).

Middle East and North Africa

Humanitarian conditions have deteriorated across parts of the Middle East due to escalating hostilities, increasing economic hardship and poor rainfall.

Out of the 11 countries/territories and refugee populations identified as facing food crises in the GRFC 2025, acute food insecurity estimates for 2025 are only available for the **Gaza Strip**, **Lebanon** and **Yemen**. No data are available for **Palestine (West Bank)**, **Syrian Arab Republic** or for refugees in **Algeria**, **Egypt**, **Iraq** or **Jordan**. The **Gaza Strip** and **Yemen** are among the four food-crisis countries/territories with the most

severe nutrition crises. The **Gaza Strip** and **Yemen** both experienced sharply deteriorating conflict-driven food crises, with Famine confirmed in the former. In **Lebanon**, lower numbers of people facing high levels of acute food insecurity is mainly attributed to the enforcement of the November 2024 ceasefire, followed by a temporary increase in humanitarian assistance (IPC, May 2025).

Palestine, Syrian Arab Republic and Yemen were flagged as hunger hotspots in FAO-WFP's early warning outlook for June to October 2025 (WFP and FAO, June 2025).



Conflict/insecurity Since the resumption of military operations and closure of borders in March 2025, the food and nutrition crises in the **Gaza Strip** have become even more dire, reversing the limited humanitarian gains achieved during the mid-January–mid-March 2025 ceasefire (WFP and FAO, June 2025). Between 2 March and 19 May, no food entered by any actor or supplier (humanitarian or commercial) (IPC Global Initiative, August 2025).

Since July, food and aid supplies increased slightly but remained vastly insufficient, inconsistent and inaccessible (WFP, August 2025). In the first two weeks of August, nearly all food supplies brought in for community kitchens were offloaded by hungry crowds or looted by armed gangs (OCHA, August 2025), making organized distributions impossible (WFP, August 2025). Hundreds of people have been killed and injured at or near food distribution sites run by non-humanitarian partners (IPC FRC, August 2025).

In **Palestine (the West Bank)**, intensified military operations and violence – particularly in refugee camps – have triggered new displacement (WFP and FAO, June 2025).

In **Lebanon**, despite the de-escalation of conflict following the November 2024 ceasefire, its repercussions persist, especially in the South, where it disrupted agricultural activities,



reducing crop yields and negatively impacted food availability and incomes. An estimated USD 14 billion in damage has weakened local economies and livelihoods (IPC, May 2025).

Conflict in **Yemen** and the Red Sea continues to displace populations, restrict movement and disrupt economic activity and humanitarian access, driving a worsening crisis (IPC, June 2025).

In **Syrian Arab Republic**, the political transition remains fragile, with intensified localized hostilities resulting in new displacements and infrastructure damage. Humanitarian access remained limited, particularly in central, coastal and southern parts (WFP, June 2025). Violence in Sweida in July 2025 disrupted food, fuel and medical supplies, impeded humanitarian access and displaced more than 93 000 people (UN, July, 2025).



Economic shocks In the **Gaza Strip**, where highly limited aid is the main source of food, cycles of increased humanitarian access have been followed by severe restrictions. Households are unable to buy the highly inadequate food available in markets due to skyrocketing prices, cash shortages and lack of purchasing power (IPC Global Initiative, August 2025). Fuel access remains critically low, cutting off essential services

including hospitals, water treatment, bakeries and transport (OCHA, July 2025).

In **Palestine (the West Bank)**, unemployment remains high at 35 percent, largely due to movement restrictions and job losses (WFP and FAO, June 2025).

Despite partial lifting of sanctions in May 2025, **Syrian Arab Republic** still faces economic hardship. The cost of the minimum expenditure basket in May 2025 was 15 percent lower than the previous year, but the minimum wage still covered only 12 percent of its food component (WFP, May 2025).

In Government-controlled areas of **Yemen** (GoY), local currency depreciation led to soaring import costs for this import-dependent economy, driving up consumer prices and further eroding household purchasing power amid declining incomes. In DFA areas, economic sanctions are weighing down on the economy. Despite currency price controls, populations in DFA areas are equally hit by 'hidden inflation' as essential basic food items cost about 15–25 percent more than in GoY-controlled areas when converted to dollars (IPC, June 2025).



Weather extremes Prolonged dry weather is expected to contribute to below-average cereal production in **Palestine, Lebanon, Syrian Arab Republic and Yemen** in 2025. In **Syrian Arab Republic**, cumulative rainfall between November 2024 and April 2025 was the lowest recorded since 2013/14 (FAO, June 2025) and in western areas, between January and July, it was the worst since 1991 (ASAP, 2025). Projections for 2025/2026 point to wheat production being 5 percent below the recent five-year average (USDA, July 2025).

In **Yemen**, erratic rainfall in May–June 2025 delayed planting and resulted in germination failures, risking below-normal harvests and livestock production, and limiting availability of casual labour opportunities (IPC, June 2025).

GREC 2025 September update |

Technical notes



Technical notes



GRFC PRODUCTION PROCESS

The GRFC process

The GRFC is a global public good that serves as the reference document for acute food insecurity, acute malnutrition and displacement in countries/territories with food and nutrition crises.

In order to provide independent and consensus-based evidence and analysis, it follows a systematic and transparent process that consolidates data from a range of sources that all use rigorous methodologies.

1. Preliminary work

Initial GRFC technical consultations lay the groundwork for the production process.

The GRFC production process is launched in September/October each year with a three-day in-person workshop held in Rome, Italy, attended by all GRFC partners. The agenda includes sessions with the food security, displacement, and nutrition technical working groups (TWGs), as well as the senior committee, to:

- reaffirm partner organizations' engagement and responsibilities;
- confirm the purpose and scope of the report;
- agree on key definitions, including for food crises and, since 2024, nutrition crises;
- provide initial guidance on content and structure;
- agree and endorse country selection and data/analysis criteria; and
- agree on the report workplan and launch date.

2. Research, analysis and production

Through the fourth quarter of each year, the Food Security Information Network (FSIN) facilitates TWG discussions.

The food security TWG selects countries/territories with food crises as per the GRFC selection criteria on page 2, and identifies the period and figures corresponding to the peak number of people facing high levels of acute food insecurity. Acute food insecurity (AFI) figures are recorded in the GRFC master AFI data matrix. This matrix contains historical data, published in the GRFC, for AFI peaks since 2016.

The nutrition TWG identifies the nutrition crises in the countries/territories with food crises, and acute malnutrition (AMN) estimates are recorded in the GRFC master AMN matrix. This matrix contains data on outcome level and contributing factors since 2018.

The FSIN:

- compiles data on countries/territories that may be facing food crises, nutrition crises or have acute food insecurity data on displaced populations;
- drafts content and analysis;
- develops layout, maps and other infographics;
- manages the production schedule; and
- chairs TWG, and senior committee, meetings.

The food security TWG:

- selects countries/territories with food crises based on consensually established criteria;
- validates the reliability/ relevance of the data source and methodology;

- identifies and endorses peak acute food insecurity estimates;
- identifies and endorses peak acute food insecurity projections;
- endorses the main driver for each country/territory;
- defines key content for the acute food insecurity narrative and indicators to support analysis and findings; and
- discusses possible infographics to best communicate content.

The nutrition TWG:

- develops and endorses criteria to identify countries/territories with nutrition crises or nutrition concerns from the list of countries/territories with food crises;
- identifies and endorses acute malnutrition data;
- identifies and endorses key contributing factors to acute malnutrition in countries/territories identified as having nutrition crises and nutrition concerns;
- reviews and ensures consistency of nutrition content throughout the report and endorses nutrition indicators to be featured; and
- discusses possible infographics to best communicate content.

The displacement TWG:

- identifies countries/territories with acute food insecurity data on forcibly displaced persons and migrants from the countries/territories with food crises;

- identifies and endorses data on displacement, acute food insecurity and acute malnutrition related to these populations;
- defines key content and indicators; and
- discusses possible infographics to best communicate content.

The senior committee:

- endorses country/territory selection, data sources, methodologies and key content; and
- provides guidance and/or decisions where there is a lack of consensus or need for strategic orientation.

3. Review and finalization of the report

To ensure transparency, all closed and draft files are shared and accessible on SharePoint.

The TWGs:

- conduct a technical review the first draft, followed by discussion of the key issues arising and amendments required; and
- ensure technical accuracy and internal consistency of the drafts.

The senior committee:

- reviews the report in page layout to ensure consistency of the overall structure and messaging of the report; and
- adjudicates any technical issues that may have been raised by the TWGs. It may refer issues back to the TWGs for further analysis and consideration.



GRFC PRODUCTION PROCESS

4. Institutional clearance

Each member of the senior committee validates their endorsement of the findings of the report as per their institutional internal processes.

5. Release and dissemination

The dissemination plan and related communications and advocacy campaign for the GRFC is coordinated by FSIN in collaboration with the Global Network Against Food Crises (GNAFC). It is built on the communications network of the GRFC partnership, which includes focal points from partner organizations.

The outreach and dissemination strategy is structured in three phases:

Pre-launch

A social media campaign and stakeholder outreach create momentum ahead of the report's release.

Launch

A media and social media campaign, along with a launch event and direct outreach to stakeholders, maximizes the report's visibility and ensures that it reaches key stakeholders. GRFC partners play a key role in amplifying the findings. Each partner integrates relevant messages into their own communications, ensuring dissemination within their networks and alignment with their mandates. This collective effort broadens the reach and impact of the report.

Post-launch

The media and social media campaign continues beyond the launch, distilling the key findings and deep diving into specific thematic areas.

The GRFC findings are actively integrated into relevant global, regional and national fora. Advocacy opportunities – including events, seminars and presentations – are identified and

pursued in coordination with partners, leveraging their networks to sustain engagement and drive action.

The interactive version of the GRFC serves as the primary landing page, with partners directing traffic there during dissemination efforts. This also plays a role in the monitoring campaign, as FSIN tracks visits and downloads, and conducts qualitative analysis on how the report is used.

The GRFC is launched in Q2, followed by a Mid-year Update in Q3, which provides insights into key developments and emerging trends.

FSIN produces a range of supporting materials in coordination with GNAFC and partners, including:

- briefs in English, French and Spanish;
- an interactive version of the report;
- key findings and key messages;
- social media assets, talking points, Q&As, presentations, multimedia content; and
- support for the press release.

These efforts ensure that the GRFC serves as a timely and accessible resource for decision-makers, analysts and stakeholders responding to food and nutrition crises worldwide.

FSIN collaborates with regional partners to develop regional overviews with new data, ensuring a twice-yearly update in those regions where the situation evolves quickly.

Decision-making processes

The GRFC production and decision-making processes are designed with the objective of transparently producing an independent, neutral, technically rigorous and consensus-based document.

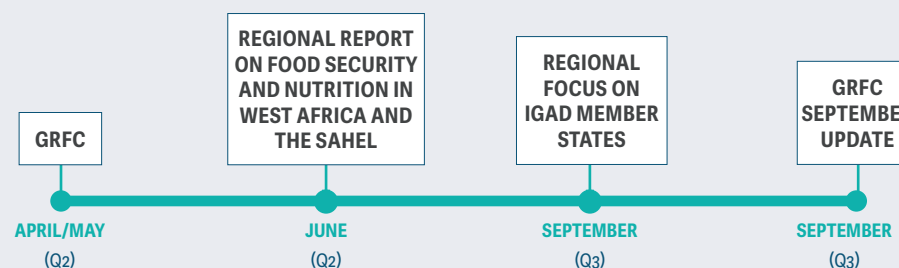
Consensus building is the primary objective.

The preferred modality of decision-making is consensus through dialogue, which is defined as 75 percent of partners in agreement with a decision. A quorum is considered to be at least 50 percent of partners. Agreement is established through a "round robin" with partners present declaring their positions and those who cannot attend providing written contributions in advance.

If consensus cannot be reached, partners may request a more formal vote.

Where there is no consensus, or the workplan necessitates an immediate decision, a vote may be triggered, including to request additional information. To be endorsed, a vote needs a 75 percent majority based on a quorum of 50 percent or more GRFC partners. Where there is a lack of consensus or majority vote, the GRFC senior committee can request that the FSIN secretariat raise issues to the FSIN steering committee for guidance, or partners can request a disclaimer.

FIG. TN.1 FSIN publications timeline, 2025





GRFC METHODOLOGY

Definitions

The following definitions were developed by the GRFC TWGs and endorsed by the GRFC senior committee.

These definitions provide a clear framework for identifying countries/territories with food crises and with nutrition crises or concerns.

Food crisis

A food crisis is defined as 'a situation where acute food insecurity requires urgent action to protect and save lives and livelihoods at local or national levels and exceeds the national resources and capacities to respond'.

Nutrition crisis

In the GRFC 2025, FSIN and the nutrition TWG developed a definition for countries/territories with 'nutrition crises' or 'nutrition concerns'.

A nutrition crisis is 'a situation characterized by a combination of factors such as widespread lack of access to sufficient, safe and nutritious food, high morbidity, environmental disasters, conflict, poor healthcare infrastructure and inadequate practices, resulting in high levels of acute malnutrition'.

High levels of acute malnutrition are defined as:

- classification in Serious or worse (IPC AMN Phase 3 or above); or
- Global Acute Malnutrition (GAM) prevalence by weight-for-height z-score (WHZ) greater than or equal to 10 percent.

Nutrition concern

If a country/territory lacks data on acute malnutrition outcomes (GAM prevalence or IPC AMN), it can be classified as a nutrition concern.

A nutrition concern is defined as 'a situation in a country/territory with limited data on acute malnutrition outcomes where available data on contributing and contextual factors indicate high nutritional vulnerability and a risk of deterioration of the nutrition situation'.

High nutritional vulnerability is identified by the GRFC nutrition TWG considering all the following:

- Acute malnutrition risk factors: specifically, when one or more indicators across each pathway of acute malnutrition (food, health, care and services) are classified as 'high' or 'very high' according to defined thresholds;
- Contextual factors: presence of populations or areas facing Emergency or worse (IPC Phase 4 or above) levels of acute food insecurity alongside a 'high' or 'very high' INFORM Severity ranking; and
- INFORM Risk Index: 'high' and 'very high' risk scores signal severe humanitarian crisis in a country/territory.

Country selection process

The FSIN and food security TWG use the following selection criteria to identify countries/territories with a food crisis, which are then presented to the senior committee for endorsement.

The process is continuous during the year and finished on 31 December to ensure inclusiveness throughout the reporting year (in this edition 2024).

A country/territory is selected if at least one of the following criteria is met:

1. Global Information and Early Warning System (FAO-GIEWS) list

Countries/territories that required external assistance for food and/or faced shocks as assessed by FAO-GIEWS in 2024.

FAO-GIEWS classifies and regularly updates the list of countries requiring external assistance for food, dividing them into three categories according to the predominant driver:

- countries with an exceptional shortfall in aggregate food production and supplies;
- countries with a widespread lack of access to food; and
- countries with severe localized food insecurity.

2. Humanitarian Needs and Response Plan (HNRP)

Countries/territories that had an HNRP in 2024.

3. Low-income and middle-income countries/territories that requested and received emergency assistance from FAO/UNHCR/WFP in 2024

Countries/territories that received assistance as follows:

- from UNHCR/WFP, to at least 5 000 refugees¹;
- from FAO/WFP, in the context of a shock, to at least 0.5 percent of the country population, or 50 000 people in cases where the country population is less than 10 million; or
- in situations where over 1 million people, or 20 percent of its population, were forcibly displaced.

High-income countries – even if acute food insecurity data were available – are not included.

External assistance for logistical support, capacity building, poverty reduction or development is not considered a qualifying factor for a food-crisis response.

¹ If this criterion is met, only the refugee populations in that country are included, while the host country is only selected if its resident population needed external food assistance.



GRFC METHODOLOGY

Data sources and assessment methodology

The GRFC partnership evaluated the following elements for acute food insecurity data to meet the GRFC technical requirements.

Methodology

The construct of the methodology used to produce acute food insecurity estimates is evaluated to determine whether the assessment/analysis provides an estimate or a projection of acute food insecurity that considers all its dimensions. Reference is mainly made to the Integrated Food Security Phase Classification (IPC) and Cadre Harmonisé (CH) methodologies and classification and other methodologies providing a quantification of acute food insecurity levels equivalent to or an approximation of IPC/CH Phase 3 or above. For country/territory data to be included in the GRFC, all partners agree with the degree of magnitude and severity of acute food insecurity indicated by the endorsed assessment.

Timeframe

The acute food insecurity assessment/analysis must cover at least one month of the year being analysed, in this edition 2025.

Coverage

Where the acute food insecurity assessment/analysis does not cover the entire country/territory, the TWG determines whether the partial analysis is appropriate and acceptable, and ensures that such situations are clearly highlighted in the report.

Consensus and participation

The TWG evaluates the consensus-building process around the acute food insecurity estimates as well as the participation of and endorsement by national stakeholder(s). The acute food insecurity assessment/analysis should be based on a multi-stakeholder technical consensus, a convergence of evidence, data collection by a trusted actor and/or endorsed at country level by national stakeholders.

Data sources and their methodologies

The preferred source of data for estimates of acute food insecurity is the IPC/CH.

If these are unavailable, the TWGs evaluate the use of other sources of evidence as per the following (in order of priority):

- The Famine Early Warning Systems Network (FEWS NET) analyses;
- WFP Consolidated Approach for Reporting Indicators of Food Security (CARI); and
- Humanitarian Needs and Response Plan (HNRP) estimates of people in need in the food security sector.

These sources are not necessarily comparable with IPC/CH and usually do not provide disaggregation by Phase 2, 3, 4 and 5. The methodology used in the GRFC 2025 to estimate populations facing Crisis or worse (IPC/CH Phase 3 or above) is described for each source.


Integrated Food Security Phase Classification (IPC)

The IPC results from a partnership of various organizations at the global, regional and country levels and is widely accepted by the international community as a global reference for the classification of acute food insecurity. There are around 30 countries currently implementing the IPC. It provides the 'big picture' evidence base of food crises by assessing the following: how severe, how many, when, where, why, who, as well as the key characteristics of the food crisis. It provides data for two time periods – the current situation and a projection. This information helps governments, humanitarian actors and other decision-makers quickly understand a crisis (or potential crisis) and informs appropriate action. The IPC makes the best use of the evidence available through a transparent, traceable and rigorous process. Evidence requirements to complete classification have been developed, considering the range of circumstances in which evidence quality and quantity may be limited,

while ensuring adherence to minimum standards. To ensure the application of the IPC in settings where access for collecting evidence is limited, specialized parameters have been developed. The IPC provides a structured process for making the best assessment of the situation based on what is known and shows the limitations of its classifications as part of the process. IPC analysis teams consolidate and analyse complex evidence from different methods and sources (e.g. food prices, seasonal calendars, rainfall, food security assessments, etc.), but the IPC allows them to describe their conclusions using consistent language and standards, and in a simple and accessible form. This harmonized approach is particularly useful in comparing situations across countries and regions, and over time. The IPC technical manual version 3.1 provides information to help people understand and use IPC products and protocols, including tools and procedures, to conduct the classifications.

See <https://www.ipcinfo.org/ipcinfo-website/resources/ipc-manual/en/>

FIG. TN.3 IPC 3.1 acute food insecurity reference table

Phase name and description		Phase 1 None/Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe/Famine	
		Households are able to meet essential food and non-food needs without engaging in atypical and unsustainable strategies to access food and income.	Households have minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in stress-coping strategies.	Households either have food consumption gaps that are reflected by high or above-usual acute malnutrition; or are marginally able to meet minimum food needs but only by depleting essential livelihood assets or through crisis-coping strategies.	Households either have large food consumption gaps which are reflected in very high acute malnutrition and excess mortality; or are able to mitigate large food consumption gaps but only by employing emergency livelihood strategies and asset liquidation.	Households have an extreme lack of food and/or other basic needs even after full employment of coping strategies. Starvation, death, destitution and extremely critical acute malnutrition levels are evident. (For Famine Classification, area needs to have extreme critical levels of acute malnutrition and mortality.)	
Priority response objectives		Action required to build resilience and for disaster risk reduction	Action required for disaster risk reduction and to protect livelihoods	Urgent action required to 			
				Protect livelihoods and reduce food consumption gaps	Save lives and livelihoods	Revert/prevent widespread death and total collapse of livelihoods	
Food security first-level outcomes	First-level outcomes refer to characteristics of food consumption and livelihood change. Thresholds that correspond as closely as possible to the Phase descriptions are included for each indicator. Although cut-offs are based on applied research and presented as global reference, correlation between indicators is often somewhat limited and findings need to be contextualized. The area is classified in the most severe Phase that affects at least 20% of the population.						
	Food consumption (focus on energy intake)	Quantity: Adequate energy intake Dietary energy intake: Adequate (avg. 2 350 kcal pp/day) and stable Household Dietary Diversity Score: 5–12 food groups and stable Food Consumption Score: Acceptable and stable Household Hunger Scale: 0 (none) Reduced Coping Strategies Index: 0–3 Household Economy Analysis: No livelihood protection deficit Food Insecurity Experience Scale: (FIES 30 days recall):<0.58	Quantity: Minimally Adequate Dietary energy intake: Minimally adequate (avg. 2 100 kcal pp/day) Household Dietary Diversity Score: 5-FG but deterioration ≥1 FG from typical Food Consumption Score: Acceptable but deterioration from typical Household Hunger Scale: 1 (slight) Reduced Coping Strategies Index: 4–18 Household Economy Analysis: Small or moderate livelihood protection deficit <80% FIES: Between -0.58 and 0.36	Quantity: Moderately Inadequate – Moderate deficits Dietary energy intake: Food gap (below avg. 2 100 kcal pp/day) Household Dietary Diversity Score: 3–4 FG Food Consumption Score: Borderline Household Hunger Scale: 2–3 (moderate) Reduced Coping Strategies Index: ≥19 (non-defining characteristics (NDC) to differentiate P3, 4 and 5) Household Economy Analysis: Livelihood protection deficit ≥80%; or survival deficit <20% FIES: > 0.36 (NDC to differentiate between Phases 3, 4 and 5)	Quantity: Very Inadequate – Large deficits Dietary energy intake: Large food gap; well below 2 100 kcal pp/day Household Dietary Diversity Score: 0–2 FG (NDC to differentiate P4 and 5) Food Consumption Score: Poor (NDC to differentiate P4 and 5) Household Hunger Scale: 4 (severe) Reduced Coping Strategies Index: ≥19 (NDC to differentiate P3, 4 and 5) Household Economy Analysis: Survival deficit ≥20% but <50% FIES: > 0.36 (NDC to differentiate between Phases 3, 4 and 5)	Quantity: Extremely Inadequate – Very large deficits Dietary energy intake: Extreme food gap Household Dietary Diversity Score: 0–2 FG Food Consumption Score: Poor (NDC to differentiate P4 and 5) Household Hunger Scale: 5–6 (severe) Reduced Coping Strategies Index: ≥19 (NDC to differentiate P3, 4 and 5) Household Economy Analysis: Survival deficit ≥50% FIES: > 0.36 (NDC to differentiate between Phases 3, 4 and 5)	
	Livelihood change (assets and strategies)	Livelihood change: Sustainable livelihood strategies and assets Livelihood coping strategies: No stress, crisis or emergency coping observed	Livelihood change: Stressed strategies and/or assets; reduced ability to invest in livelihoods Livelihood coping strategies: Stress strategies are the most severe strategies used by the household in the past 30 days	Livelihood change: Accelerated depletion/erosion of strategies and/or assets Livelihood coping strategies: Crisis strategies are the most severe strategies used by the household in the past 30 days	Livelihood change: Extreme depletion/liquidation of strategies and assets Livelihood coping strategies: Emergency strategies are the most severe strategies used by the household in the past 30 days	Livelihood change: Near complete collapse of strategies and assets Livelihood coping strategies: Near exhaustion of coping capacity	
Food security second-level outcomes	Second-level outcomes refer to area-level estimations of nutritional status and mortality that are especially useful for identification of more severe phases when food gaps are expected to impact malnutrition and mortality. For both nutrition and mortality area outcomes, household food consumption deficits should be an explanatory factor in order for that evidence to be used in support of the classification.						
	Nutritional status*	Global Acute Malnutrition based on Weight-for-Height Z-score	Acceptable <5%	Alert 5–9.9%	Serious 10–14.9% or > than usual	Critical 15–29.9% or > much greater than average	Extremely Critical ≥30%
		Global Acute Malnutrition based on Mid-Upper Arm Circumference	<5%	5–9.9%	10–14.9%	≥15%	
		Body Mass Index <18.5	<5%	5–9.9%	10–19.9%, 1.5 x greater than baseline	20–39.9%	≥40%
	Mortality*	Crude Death Rate <0.5/10,000/day Under-five Death Rate <1/10,000/day	Crude Death Rate <0.5/10,000/day Under-five Death Rate <1/10,000/day	Crude Death Rate 0.5–0.99/10,000/day Under-five Death Rate 1–2/10 000/day	Crude Death Rate 1–1.99/10,000/day or <2x reference Under-five Death Rate 2–3.99/10,000/day	Crude Death Rate ≥2/10,000/day Under-five Death Rate ≥4/10,000/day	
Food security contributing factors	For contributing factors, specific indicators and thresholds for different phases need to be determined and analysed according to the livelihood context; nevertheless, general descriptions for contributing factors are provided below.						
	Food availability, access, utilization, and stability	Adequate to meet short-term food consumption requirements Safe water ≥15 litres pp/day	Borderline adequate to meet food consumption requirements Safe water marginally ≥15 litres pp/day	Inadequate to meet food consumption requirements Safe water >7.5 to 15 litres pp/day	Very inadequate to meet food consumption requirements Safe water >3 to <7.5 litres pp/day	Extremely inadequate to meet food consumption requirements Safe water ≤3 litres pp/day	
	Hazards and vulnerability	None or minimal effects of hazards and vulnerability on livelihoods and food consumption	Effects of hazards and vulnerability stress livelihoods and food consumption	Effects of hazards and vulnerability result in loss of assets and/or significant food consumption deficits	Effects of hazards and vulnerability result in large loss of livelihood assets and/or extreme food consumption deficits	Effects of hazards and vulnerability result in near complete collapse of livelihood assets and/or near complete food consumption deficits	



GRFC METHODOLOGY

Cadre Harmonisé (CH)

Since 1999, the Permanent Interstate Committee for Drought Control in the Sahel (Comité permanent Inter-Etats de Lutte contre la Sécheresse au Sahel (CILSS)), along with the Economic Community of West African States (ECOWAS), Union Economique et Monétaire Ouest Africaine (UEMOA), United Nations agencies (FAO, WFP and UNICEF), non-governmental organizations (Action contre la Faim (ACF), Save the Children, Oxfam), and other international organizations, such as FEWS NET, have been engaged in the development and implementation of the CH for the analysis and identification of areas at risk and populations affected by food and nutrition insecurity in West Africa and the Sahel.

The CH is the multidimensional analytical framework led by CILSS to provide rigorous, evidence and consensus-based analyses of current and projected food and nutrition situations in, currently, 18 countries¹ in West Africa and the Sahel. It classifies the severity of food and nutrition insecurity based on the international classification scale through an approach that refers to well-defined functions and protocols. It is used to inform national and regional food-crisis prevention and management systems.

The CH relies on existing food security and nutrition information systems that have been in place in most Sahelian countries since 1985, and more recently in coastal countries of West Africa.

The Cadre Harmonisé Manual v3.0 describes the specific functions and protocols for carrying out an integrated and consensual analysis of acute food and nutrition insecurity.

See <https://agrhyment.cilss.int/manuel-cadre-harmonise-version2-0/>

IPC/CH five-phase classification

IPC and CH have closely collaborated to harmonize their tools and processes to ensure comparable figures of acute food insecurity.

The five-phase classification is the same, though there are a few differences in the use of certain indicators and in how humanitarian assistance is factored in the analysis:

1. None/Minimal
2. Stressed
3. Crisis
4. Emergency
5. Catastrophe/Famine

These are determined based on a convergence of available evidence, including indicators related to food consumption, livelihoods, malnutrition and mortality. Each phase has important and distinct implications for where and how best to intervene and thus influences priority response objectives.

Populations in Crisis (IPC/CH Phase 3), Emergency (IPC/CH Phase 4) and Catastrophe (IPC/CH Phase 5) are deemed to be those in need of urgent assistance.

Populations in Stressed (IPC/CH Phase 2) are considered acutely food insecure due to their extreme vulnerability to shocks, but rather than urgent assistance they require livelihood protection and disaster risk reduction interventions.

Classifying Famine (IPC/CH Phase 5)

Famine is an area classification based on internationally accepted criteria:

- at least 1 in 5 households face an extreme lack of food;
- at least 30 percent of children suffer from acute malnutrition – or 15 percent from global acute malnutrition (GAM) by Mid-Upper Arm Circumference (MUAC) with evidence of rapidly worsening underlying drivers of acute malnutrition; and
- at least 2 people for every 10 000, or 4 children under 5 years old for every 10 000, are dying each day due to outright starvation or the interaction of malnutrition and disease.

Given the severity and implications of this classification, special Famine protocols must be met before an area is classified in Famine (IPC/CH Phase 5). See *TN.3 IPC 3.1 acute food insecurity reference table, page 207*.

An area is classified in Famine with solid evidence if there is clear and compelling evidence of food insecurity (food deprivation and livelihood collapse), acute malnutrition and mortality to support the classification. An area is classified in Famine with reasonable evidence if minimally adequate evidence is available on two out of the three outcomes – food insecurity, malnutrition or mortality – to support the classification. Famine with solid evidence and Famine with reasonable evidence are equally severe – the only difference is the amount of reliable evidence available to support the statement.

The IPC/CH supports Famine prevention by highlighting the following:

- Emergency (IPC/CH Phase 4) is an extremely severe situation where urgent action is needed to save lives and livelihoods.
- Households can be in Catastrophe (IPC/CH Phase 5) even if areas are not classified in Famine (IPC/CH Phase 5). This is the case when less than 20 percent of the population is experiencing Catastrophe (IPC/CH Phase 5) conditions and/or when malnutrition and/or mortality levels have not (or not yet) reached Famine thresholds. These households experience the same severity of conditions even if the area is not yet classified in Famine (IPC/CH Phase 5). This can occur due to the time lag between food insecurity, malnutrition and mortality, or in the case of a localized situation.
- Projections of Famine (IPC/CH Phase 5) can be made even if the areas are not currently classified in Famine, thus allowing early warning.

Risk of Famine

This is an IPC statement that highlights the potential deterioration of the situation compared with the most-likely scenario expected during the projection period. Although it is not an IPC classification, it indicates a worst-case scenario that has a reasonable chance of occurring.

¹ Benin, Burkina Faso, Cabo Verde, Cameroon, Chad, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo.



GRFC METHODOLOGY

FEWS NET

The Famine Early Warning Systems Network (FEWS NET) classification is IPC-compatible, meaning that it follows key IPC protocols but is not built on multi-partner technical consensus, so it does not necessarily reflect the consensus of country-level stakeholders. The analysis is not disaggregated by severity.

Funded and managed by USAID's Bureau for Humanitarian Assistance (BHA), FEWS NET provided early warning and evidence-based analysis of acute food insecurity to inform humanitarian and development response.

WFP CARI

The WFP Consolidated Approach for Reporting Indicators of Food Security (CARI) methodology is commonly used by WFP and other food security actors, including Multi-Sector Needs Assessments and are used to calculate the People in Need (PiN) for Food Security in the OCHA HNRPs in countries/territories not covered by IPC/CH analysis.

The CARI addresses the multiple dimensions of food security through five indicators:

- Food Consumption Score (FCS)
- Reduced Coping Strategies Index (rCSI)
- Economic Capacity to Meet Essential Needs (ECMEN)
- Food Expenditure Share (FES)
- Livelihood Coping Strategies (LCS)

Each surveyed household is classified into one of four food security categories:

1. Food secure
2. Marginally food secure
3. Moderately acutely food insecure
4. Severely acutely food insecure

The results are presented within the CARI food security console, which provides the prevalence of each available CARI food security indicator.

Populations that are classified as 'moderately acutely food insecure' and 'severely acutely food insecure', as per WFP's CARI methodology, are reported as an approximation for populations facing Crisis or worse (IPC/CH Phase 3 or above).

A key difference between the IPC/CH and CARI analyses is that CARI analyses primary data from a single household survey, while the IPC/CH uses a convergence-of-evidence approach, incorporating and analysing a variety of secondary information. While the CARI assesses the situation at a fixed point in time with no projection, the IPC/CH provides the current snapshot and a projection based on the most likely scenario for any period in the future. The indicators included in the CARI approach can be used in the IPC/CH analyses.

See CARI methodology: <https://docs.wfp.org/api/documents/WFP-0000134704/download/>

Acute food insecurity peak

Among data available for a given country/territory that have been endorsed for 2024 and validated by the TWG according to the criteria listed above, the analysis/assessment reporting the highest number of acutely food-insecure people is selected as the peak.

It does not necessarily reflect the latest analysis available. The **peak** can be either an analysis made for the current period in 2025 or a projection made in 2024 or 2025 and referring to a period of the year 2025. If none of the above are available, an analysis covering Q3/Q4 of 2023 can be used as peak, if considered still relevant by the food security TWG.

For this September update of the GRFC, the cut-off date for data inclusion was 25 February 2025 so the projection estimates only partially cover 2025. Where the 2025 projection does not cover the same period as the 2024 peak, this is indicated. Comparison in this case can be biased and lead to underestimations.

Analyses that straddle 2024 and 2025 are considered for both years and, if reporting the highest number of people compared with other available analyses in the two years, the same analysis is used as the peak for both 2024 and 2025. A projection update or a new analysis covering at least part of the previous projection period overrides the original projection findings since it is based on more up-to-date information, hence providing more accurate findings.

Data from non-IPC/CH (FEWS NET, CARI and HNO analyses) sources are presented in the country narratives according to their specific terminology and categorization. For communication purposes, the wording 'high levels of acute food insecurity' or 'IPC/CH Phase 3 or above, or equivalent' are used to include both IPC/CH estimates and any food security estimates that are based on non-IPC/CH data sources reflecting an approximation of IPC Phase 3 and above. Information is presented in summary tables as IPC/CH Phase 3 or above or equivalent without further breakdown to more specific IPC/CH phases.

Humanitarian Needs and Response Plan (HNRP) and other estimates of people in need in the food security sector.

OCHA HNRPs provide the People in Need (PiN) figure for the Food Security and Livelihoods cluster, based on data collected during the year, and it is endorsed by the Humanitarian Country Team in each country/territory.

Similarly, food insecurity estimates are provided by OCHA in the Humanitarian Response Plan (HRP) and Flash Appeal. When no other sources for acute

food insecurity estimates are available, the GRFC food security TWG assesses the methodology behind the PiN number to determine if it is based on acute food insecurity indicators and can be used as an equivalent, comparable estimate of, or as an approximation for, Crisis or worse (IPC/CH Phase 3 or above). The data are used where there is agreement that it reflects a particular country's food security situation. If there is no consensus within the food security TWG, the decision is referred to the GRFC senior committee.



GRFC METHODOLOGY

Data not meeting GRFC technical requirements and data gaps

Each year there are countries/territories that are identified as having food crises but food security information, even if available, does not meet the GRFC partnership technical requirements outlined above. As such, the GRFC aggregate figures underestimate the magnitude and severity of acute food insecurity, and additional investment in rationalizing methodologies and data collection is necessary.

There are ongoing efforts to analyse accuracy and equivalence of methodologies currently not considered in the GRFC.

Such countries are listed in the GRFC as 'data gap/ data not meeting GRFC technical requirements' and reported at the end of each regional section as countries 'of concern'.

'Data gaps' are countries for which there is no publicly available analysis for the year in question.

Categories and qualifiers

The GRFC 2025 aims to classify food crises to provide a contextualized description of the overall situation in the country/territory and to inform a tailored response. Among categories already used in previous editions, including protracted food crises or the ten countries with the highest magnitude and prevalence of high levels of acute food insecurity, this year it also utilizes the INFORM Risk Index's vulnerability and lack of coping capacity dimensions, along with reliance on external assistance and income levels, to assess vulnerabilities and the capacity to address food insecurity and malnutrition.

Protracted food crises

A country/territory is defined as a protracted food crisis when it is included in all editions of the GRFC. In GRFC 2025, there are 35 countries that are considered 'protracted' food crises.

Vulnerability

The INFORM Risk Index vulnerability dimension assesses the predispositions of an exposed population to be affected by a shock, including economic, political and social characteristics of the community that can be destabilized in case of a hazardous event (JRC, 2017). All countries/territories included in the GRFC 2025 were classified as 'highly vulnerable'.

This dimension examines two categories:

1. Socioeconomic vulnerability

This evaluates factors that increase a population's vulnerability to a hazardous event, such as the ability of individuals and households' ability to afford safe and resilient livelihood conditions and well-being.

2. Vulnerable groups

This identifies populations within a country that have specific characteristics placing them at higher risk of needing humanitarian assistance or being excluded from financial and social services.

Coping capacity

The INFORM Risk Index lack of coping capacity dimension assesses a country's ability to manage disasters through formal, organized efforts, including government actions and existing infrastructure contributing to risk reduction (JRC, 2017). All countries/territories included in the GRFC 2025 had a value categorized as 'high' within this dimension.

This dimension is divided into two categories:

1. Institutional capacity

This evaluates government priorities and institutional basis for implementing disaster risk reduction activities.

2. Infrastructure

This examines communication networks, physical infrastructure and accessible health systems, which are needed during emergency response.

World Bank country classifications by income level

The GRFC utilizes income levels based on the World Bank's definitions (low, lower-middle, upper-middle and high income). These thresholds are updated annually and are based on Gross National Income (GNI) per capita, converted to US dollars using the World Bank's Atlas method. This method applies a three-year moving average with a price-adjusted conversion factor, to reduce short-term exchange rate fluctuations due to inflation (WB, July 2024). High-income countries are excluded from the GRFC analysis, even if acute food insecurity data are available, as they are considered to have capacities to cope.

ODA/GNI

The indicator of net Official Development Assistance (ODA) received as a percentage of GNI provides a measure of a recipient country's dependency on aid. A degree of dependency on external assistance often reflects a country/territory's economic and institutional capacity to address food crises. In the GRFC, this indicator is used as a proxy measure for a country's capacity to respond to shocks and assist their population.



ANALYSING ACUTE FOOD INSECURITY

Drivers of acute food insecurity

The drivers of food crises are often interlinked, mutually reinforcing and superimposed on structural vulnerabilities, making it difficult to pinpoint one main driver for each food crisis.

FSIN and the food security TWG identify the primary driver of acute food insecurity for each country/territory based on events during the year and information on the number of people affected by each of the shocks. For countries/territories with two or more drivers affecting different parts of the country or different population groups, the primary driver is chosen by estimating which driver affected the largest number of people. While acknowledging that other drivers underlie the acute food insecurity numbers in each country in addition to the primary driver, the GRFC aggregates the number of countries/territories by primary driver at the global level.

For countries where the analysis is purely focused on the displaced populations, the primary driver reflects the reason those populations are displaced from their country of origin.

It is also acknowledged that food insecurity is not driven solely by the occurrence of a shock, but rather by the interaction between shocks and structural vulnerabilities. Some of the main indicators of vulnerability for each country are discussed in chapter 1.

The GRFC estimates which is the most salient driver for each country/territory from the following main drivers.

Conflict/insecurity

This includes interstate and intra-state conflicts, internal violence, banditry and criminality, civil unrest or political crises often leading to population displacements and/or disruption of livelihoods and food systems.

Conflict/insecurity is a key driver of acute food insecurity. During conflict people may be deprived of their income sources, lose assets and/or have difficulties in accessing food, as food systems and markets are disrupted, in turn pushing up food prices and sometimes leading to scarcities of food, water, fuel and other basic needs.

Conflict/insecurity can undermine household and community coping capacities, break down social support systems and lead to displacement.

As well as the direct destructive effects that conflict/insecurity can have on agricultural infrastructure, such as mills, irrigation systems, storage facilities and machinery, landmines, explosive remnants of war and improvised explosive devices often make agricultural land unusable for many years, as they require complex and expensive clearance operations to be made safe for use.

Conflict prevents businesses from operating and weakens the national economy, reducing employment opportunities, increasing poverty levels and diverting government spending towards the war effort. Health systems can be damaged or destroyed, leaving people reliant on humanitarian support.

Increasingly, however, insecurity, as well as physical and administrative barriers, prevent humanitarian access to the most vulnerable, or aid agencies face lengthy delays, restrictions on personnel or the type or quantity of aid supplies, or insufficient security guarantees. Parties to conflict can deny people access to food as a weapon of war, especially in areas under blockade/embargo.

Food insecurity itself can become a trigger for violence and instability, particularly in contexts marked by pervasive inequalities and fragile institutions. Sudden spikes in food prices tend to exacerbate the risk of political unrest and conflict (FAO et al., 2017).

For countries/territories with conflict/insecurity as the primary driver during the previous edition, change to another primary driver needs serious consideration as recovery from conflict/insecurity is slow, and it may remain the underlying cause of food insecurity. In cases where conflict/insecurity has reduced and/or localized, with other drivers showing a predominant effect, the change in the primary driver from the previous year is considered.

Weather extremes

This includes droughts, floods, dry spells, storms, cyclones, hurricanes, typhoons and the untimely start of rainy seasons.

Weather extremes drive food insecurity by directly affecting crops and/or livestock, cutting off roads and preventing markets from being stocked. Poor harvests push up food prices and diminish agricultural employment opportunities and pastoralists' terms-of-trade, lowering purchasing power and access to food, and may trigger an early lean season by making households more market-reliant because of reduced food stocks.

Adverse weather events are particularly grave for smallholder farmers and pastoralists who rely on agriculture and livestock-rearing to access food and often lack the resilience to withstand and recover from the impacts of such shocks. People's vulnerability to weather shock events rests on their capacity to adapt and bounce back after their livelihood has been affected, as well as the timing, scale and frequency of shocks. Repeated events further erode capacity to withstand future shocks.

Weather events and climate changes can lead to an intensification of conflict, such as between pastoralist herders and farmers over access to water and grazing. There is ample evidence suggesting that natural disasters – particularly droughts – can aggravate existing civil conflicts as well as strain traditional conflict resolution mechanisms.

Economic shocks

At country level, this can affect the food insecurity of households or individuals through various channels. Macroeconomic shocks may lead to increases in acute food insecurity through for instance, a contraction in GDP leading to high unemployment rates and consequent loss of income for those affected households, or a significant contraction in exports and/or a critical decrease in investments and other capital inflows, bringing currency depreciation and inflation, increasing production costs and food prices, and worsening terms of trade, which may in turn lead to increases in acute food insecurity.

High debt and limited fiscal space constrain economic growth, increase vulnerability to economic shocks and detract from development spending.

Increases in world market prices of staple grains, oil and agricultural inputs can affect food availability and access, pushing up domestic food prices for consumers and reducing their purchasing power. Economic shocks can also occur at a more localized level or hit only a particular socioeconomic category of households. For instance, pastoralists facing lack of animal feed and veterinary services may lead to deteriorating livestock body conditions and depressed livestock prices, which in turn may reduce pastoralists' purchasing power and thus constrain access to food.

Crop pests, livestock disease, and natural disasters

These could include crop pests such as locust invasion and fall armyworm; livestock diseases, such as foot and mouth disease; and natural disasters, such as earthquakes and tsunamis. As relevant, these may be indicated as primary/secondary/tertiary drivers.



NUTRITION DATA AND ANALYSIS

Identification of crises and concerns

In 2025, FSIN and the nutrition TWG strengthened the integration of nutrition in the GRFC by providing a holistic analysis of acute malnutrition in countries/territories with food crises.

The interplay between acute food insecurity, acute malnutrition and their contributing factors are the main focus, with more data and analysis, and new conceptual and analytical frameworks.

Definitions of nutrition crises and nutrition concerns are provided to better anchor countries/territories with critical nutritional vulnerabilities within the analysis of countries/territories with food crises.

The nutrition decision tree

The nutrition decision tree, *see figure TN.4*, ensures a consistent, evidence-based identification/selection of countries/territories as nutrition crises based on two main criteria and the availability of malnutrition data as follows:

Criteria 1

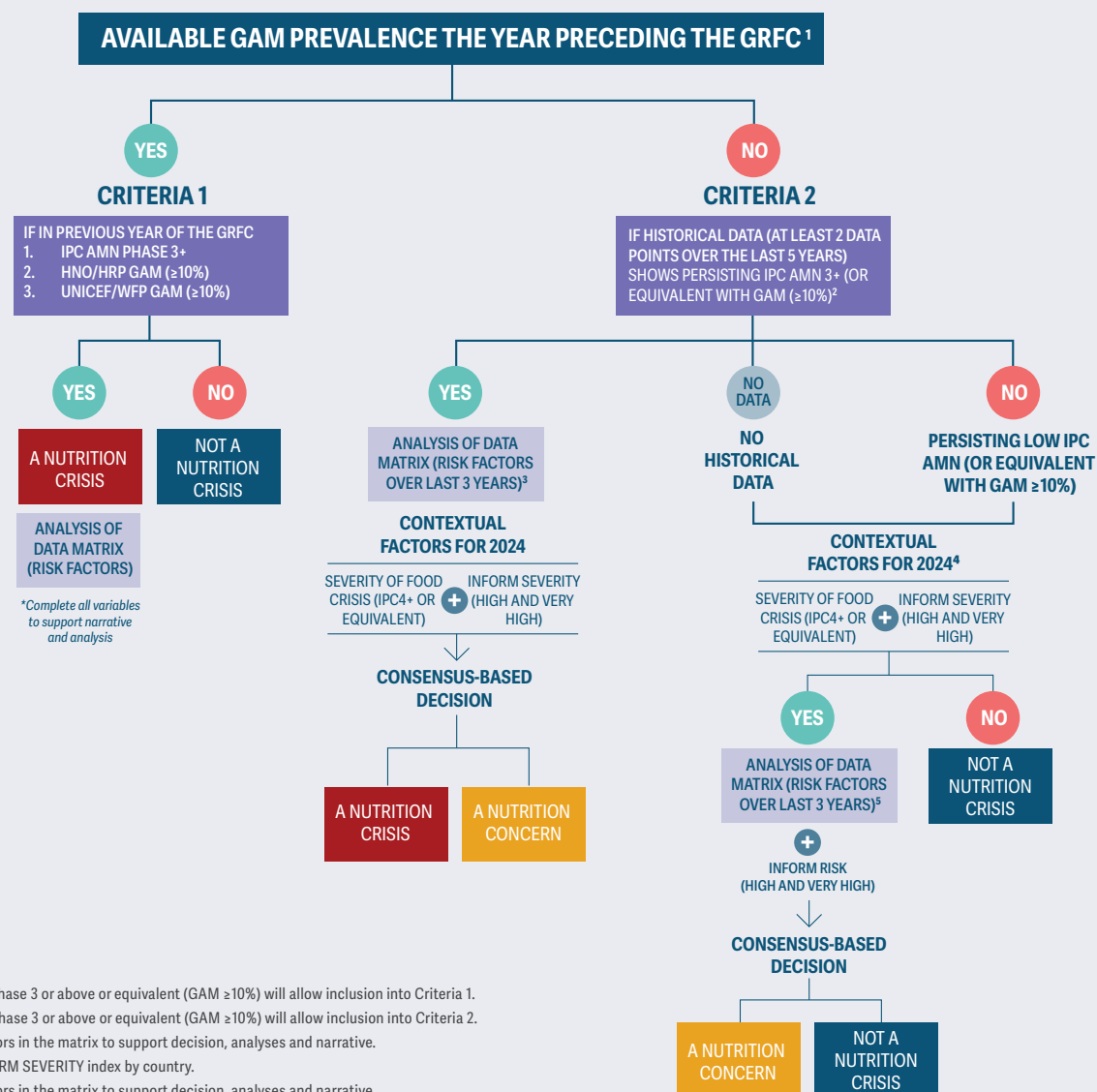
A country/territory with areas classified in IPC AMN Phase 3 or above, or with Global Acute Malnutrition (GAM) prevalence by weight-for-height z-score (WHZ) ≥ 10 percent in the reporting year (in this edition 2024) is identified as experiencing a nutrition crisis.

Criteria 2

A country/territory with areas with data indicating IPC AMN Phase 3 or above classifications or GAM prevalence by WHZ ≥ 10 percent, with at least two data points in the past five years.

Identification of a country with a nutrition concern is determined through consensus by the GRFC nutrition TWG based on GAM, data thresholds, and contextual and risk factors.


FIG. TN.4 The GRFC nutrition TWG decision tree: countries with a nutrition crisis or a nutrition concern





NUTRITION DATA AND ANALYSIS

FIG. TN.5 **The IPC acute malnutrition scale**

Phase name and description	Phase 1 Acceptable	Phase 2 Alert	Phase 3 Serious	Phase 4 Critical	Phase 5 Extremely Critical
	Less than 5% of children are acutely malnourished.	5–9.9%of children are acutely malnourished..	10–14.9%of children are acutely malnourished.	15–29.9%of children are acutely malnourished. The mortality and morbidity levels are elevated or increasing. Individual food consumption is likely to be compromised.	30% or more children are acutely malnourished. Widespread morbidity and/or very large individual food consumption gaps are likely evident.
	The situation is progressively deteriorating, with increasing levels of acute malnutrition. Morbidity levels and/or individual food consumption gaps are likely to increase with increasing levels of acute malnutrition.				
Priority response objective to decrease acute malnutrition and to prevent related mortality.	Maintain the low prevalence of acute malnutrition.	Strengthen existing response capacity and resilience. Address contributing factors to acute malnutrition. Monitor conditions and plan response as required.	Urgently reduce acute malnutrition levels through 		
			Scaling up of treatment and prevention of affected populations.	Significant scale-up and intensification of treatment and protection activities to reach additional population affected.	Addressing widespread acute malnutrition and disease epidemics by all means.
Global Acute Malnutrition (GAM) based on weight-for-height Z-score (WHZ)	<5%	5.0–9.9%	10.0–14.9%	15.0–29.9%	≥30%
Global Acute Malnutrition (GAM) based on mid-upper arm circumference (MUAC)	<5%				
	5–9.9%				
			10–14.9%		
			≥15%		
*GAM based on MUAC must only be used in the absence of GAM based on WHZ; the final IPC Acute Malnutrition phase with GAM based on MUAC should be supported by an analysis of the relationship between WHZ and MUAC in the area of analysis and also by using convergence of evidence with contributing factors. In exceptional conditions where GAM based on MUAC is significantly higher than GAM based on WHZ (i.e. two or more phases), both GAM based on WHZ, and GAM based on MUAC should be considered, and the final phase should be determined with convergence of evidence.					

Data sources

Outcome-level data for acute malnutrition include both prevalence and burden estimates of GAM, disaggregating the proportion of moderate acute malnutrition (MAM) and severe acute malnutrition (SAM).

Data are also disaggregated by population groups:

- children under 5 years of age (aged 6–59 months in most sources, except for Demographic and Health Surveys (DHS), which reports on all children under 5 years of age);
- pregnant and breastfeeding women (PBW); and
- forcibly displaced populations, mainly refugees and returnees but also internally displaced persons (IDPs).

GAM prevalence

The use of GAM prevalence by WHZ (including MAM and SAM) adheres to a prioritized list of data sources:

- Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys;
- Multiple Indicator Cluster Surveys (MICS);
- Demographic and Health Surveys (DHS) for national surveys; and
- Standardized Expanded Nutrition Surveys (SENS), for refugee populations.



NUTRITION DATA AND ANALYSIS

GAM burden

Burden estimates refer to the number of children under 5 years of age and PBW who are acutely malnourished, as per the following sources in order of priority:

- IPC Acute Malnutrition analyses;
- Humanitarian Needs and Response Plans (HNRP); and
- burden estimates from UNICEF and WFP.

The nutrition TWG identifies the data that best reflects a country/territory's nutrition situation. Alternative data sources may be chosen based on analysis coverage or period(s) of analysis.

Data methodologies

IPC Acute Malnutrition Scale

The IPC Acute Malnutrition Scale classifies the severity of acute malnutrition in the analysed population based on the GAM prevalence. See *figure TN.5*. The IPC analysis process also reviews and ranks contributing factors that affect acute malnutrition as per the IPC Acute Malnutrition Analytical Framework, including indicators (also referred to as risk factors) such as dietary intake, disease, feeding and care practices, health and WASH environment, and contextual information such as access to services.

Nutrition analysis in Humanitarian Needs and Response Plans (HNRPs)

The HNRPs estimate the People in Need (PiN) figure for nutrition services, including burden estimates of acute malnutrition for children and PBW. The HNRP assesses the scale and severity of needs based on data collected throughout the year, endorsed by the Humanitarian Country Team.

Nutrition and health surveys

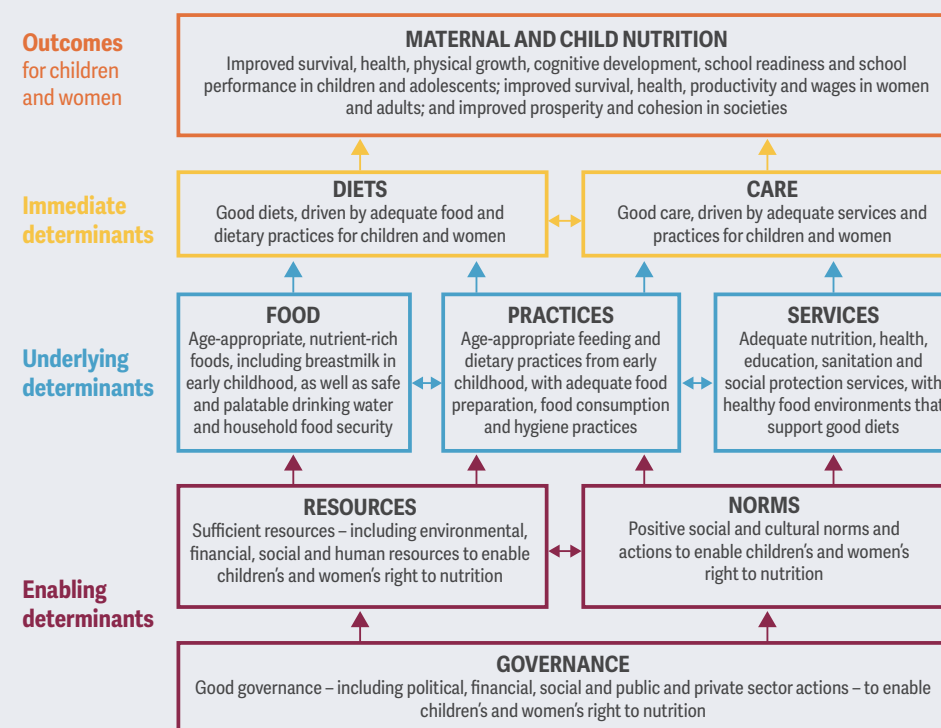
Several standardized surveys are used to assess nutrition, health, and population indicators in humanitarian and development settings:

- SMART Surveys: Developed in 2002, SMART Surveys provide rapid and technically sound assessments of acute malnutrition and mortality in crises.
- MICS & DHS: UNICEF-led and nationally representative survey initiatives that collect data on population, health, nutrition and child well-being through household interviews, including the assessment of GAM.
- SENS: A UNHCR adaptation of SMART methodology designed for refugee populations, covering malnutrition, feeding practices of infants and young children, anaemia, and key health indicators.

UNICEF's conceptual framework

The UNICEF Conceptual Framework on Maternal and Child Nutrition serves as a complementary tool to the IPC Acute Malnutrition Analytical Framework in identifying the contributing factors of acute malnutrition and their respective pathways. This framework offers clear insights into the factors influencing children's and women's nutrition, focusing on the interplay between enabling, underlying and immediate nutrition determinants. It highlights the role of diets and care as immediate determinants of maternal and child nutrition, and articulates a positive narrative about what contributes to good nutrition in children and women. It underscores the beneficial impacts of enhanced maternal and child nutrition, including better survival rates, health, development, education outcomes, economic growth and social unity. See *figure TN.6*.

FIG. TN.6 The UNICEF conceptual framework





NUTRITION DATA AND ANALYSIS

Contributing factors

The GRFC nutrition TWG has grouped the contributing factors of acute malnutrition across three pathways – food, health, and care and services.

This ensures alignment with the underlying and immediate causes of the IPC Acute Malnutrition Analytical Framework and the underlying determinants of UNICEF's Conceptual Framework.

The key indicators for each pathway, referred to as risk factors in IPC AMN analyses, are as follows:

Food pathway

Indicators are minimum dietary diversity among children under 5 years of age and among women of reproductive age (15–49 years); minimum acceptable diet among children aged 6–23 months; and the prevalence of anaemia in children under 5 years and women of reproductive age (15–49 years) or pregnant and breastfeeding women.

Health pathway

Indicators are the prevalence and incidence for acute respiratory infections (ARIs), cholera, acute watery diarrhoea (AWD), malaria and fever.

Care and services pathway

Indicators are vitamin A supplementation coverage, measles vaccination (second dose), exclusive breastfeeding rates and access to improved water supplies (safely managed).

For a country to be identified as facing a nutrition crisis or nutrition concern under Criteria 2, at least one indicator per pathway (food, health, care and services) must be classified as 'high' or 'very high', based on thresholds established by the nutrition TWG partners. A detailed breakdown of each indicator and its respective thresholds can be found in Appendix 6: Indicators. See page 198.

Contextual and risk factors

To increase the robustness of the identification of nutrition crisis or nutrition concern under Criteria 2, the GRFC nutrition TWG incorporated additional contextual and risk factors into the analysis.

Contextual factors

- Populations in Emergency or worse (IPC Phase 4 or above): The presence of populations in areas classified as IPC Phase 4 or above was considered a key contextual factor by the nutrition TWG.
- INFORM Severity Index: A composite indicator that assesses the severity of humanitarian crises on a standardized global scale. It helps inform response planning by measuring crisis severity and was used by the nutrition TWG as an additional contextual factor.

Risk factor

- INFORM Risk Index: A comprehensive risk assessment tool that consolidates 54 indicators into three dimensions: hazards, vulnerability, and lack of coping capacity. This index provides an overall measure of risk for humanitarian crises and disasters and was used by the nutrition TWG as a risk factor in the identification process.

Malnutrition peak

The malnutrition peak is determined as the period with the most severe acute malnutrition situation based on IPC AMN analyses that provide area classifications and burden estimates for specific timeframes.

The selected peak does not necessarily coincide with the most recent IPC AMN analysis available for the reporting year.

Severity is measured by the percentage of areas classified as Serious or worse (IPC AMN Phase 3 or above) relative to the total areas analysed. Therefore, the malnutrition peak is the period with the highest percentage of areas in IPC AMN Phase 3 or above. When possible, this percentage is compared with the corresponding peak period from the previous year to assess annual changes in severity.

The burden of children aged 6–59 months and PBW suffering from acute malnutrition is drawn from the same analysis where the peak was identified.

The identified malnutrition peaks are confirmed by the nutrition TWG to ensure that they reflect the actual periods of worse severity of acute malnutrition in the country for the reporting year.

In countries where an IPC AMN analysis is available, the peak corresponds to the specific period identified following the criteria indicated above. However, in countries without IPC AMN

analysis, the entire reporting year (2024) is considered the peak period by default.

The peak data may originate from an analysis conducted in 2024 or from projections made in 2023 or 2024, pertaining to any period within 2024. For a period to be considered the peak of 2024, it needs to cover at least one month of 2024. If such data are unavailable, most recent analyses from 2022 or 2023 may serve as the peak for those years, provided the nutrition TWG deems it still relevant.

For countries with an IPC AMN analysis, prevalence estimates should be compared only for the same season across two years. Year-on-year changes were assessed by comparing the proportion of areas classified in IPC AMN Phase 3 or above out of the total areas analysed in both years. A reduction in this proportion was interpreted as an overall improvement, while an increase indicated deterioration.

To allow for more granular interpretation, a more focused analysis was conducted on areas classified in IPC AMN Phases 4 and 5. This helped identify situations where, despite an overall improvement, certain areas experienced worsening conditions – and vice versa.

For countries without an IPC AMN analysis, year-on-year comparability is based on prevalence data. If prevalence data are unavailable, malnutrition burden should be used as the comparative metric.



DISPLACEMENT DATA AND ANALYSIS

Data gathering criteria

FSIN and the displacement TWG identify and endorse data on displacement and acute food insecurity and nutrition among forcibly displaced populations, returnees and vulnerable migrant populations in Latin America and the Caribbean in countries/territories with food crises, including key content, indicators and infographics.

To be included in the report, data must follow the GRFC criteria and requirements. The displacement TWG evaluate data available for the reporting year (in this edition 2024). If no data were available, the displacement TWG may consider using data from the prior year (in this edition 2023). Data covering the whole country/territory are generally preferred, however, for certain countries/territories, only specific areas are analysed.

Data on displacement were gathered for all 65 countries with food crises but, for internal consistency, aggregated figures at the global and regional level comprise data for the 53 countries that have acute food insecurity data meeting GRFC requirements.

Out of the 53 countries/territories with food crises and acute food insecurity data meeting the GRFC technical requirements, 52 had displacement data for forcibly displaced persons and returnees. Of those, 15 had acute food insecurity data and 19 had nutrition data on displaced populations and returnees.

Data sources and methodologies

The displacement data sources depend on the category of the displaced person.

Data on Palestine refugees and asylum-seekers are based on UNRWA. All other data on refugees and asylum-seekers are based on UNHCR nowcasting data.

Data for internally displaced persons (IDPs) are based on the following priority ranking:

- International Organization for Migration (IOM); then
- Internal Displacement Monitoring Centre (IDMC).

Exceptions can be made by consensus by the displacement TWG to use data that appear to best reflect a particular country/territory's displacement situation. When a country/territory has information from several sources, the choice of a data source is driven by the size of the analysis coverage and the reporting period.

Figures for displaced populations aim to be countrywide but depend on the assessment and can cover only specific areas where displaced persons are concentrated.

Data validity

The timeframe of data validity varies for different categories of displaced people. For refugees and asylum-seekers, the GRFC uses UNHCR nowcasting data from December 2024. For global aggregates, UNHCR data are from mid-2024. UNRWA data on Palestine refugees and asylum-seekers are from September 2024.

For IDPs, IOM data are the most recent available and vary depending upon when the analysis was conducted at country level. When IOM data are not available, the most recent data from IDMC from end-2023 are used.



The Global Network Against Food Crises (GNAFC) is a multi-stakeholder initiative of humanitarian and development actors, united by a commitment to tackle the root causes of food crises and to promote sustainable solutions. GNAFC produces and shares analysis and knowledge, and strengthens the coordination of evidence-based responses across the humanitarian–development–peace nexus. It operates at national, regional and global levels.



The Food Security Information Network (FSIN) is a technical global platform for the exchange of expertise, knowledge and best practices on food security and nutrition analysis. Its purpose is to promote timely, independent and consensus-based information about food crises, while also highlighting and addressing critical data gaps. As a key partner of the GNAFC, FSIN coordinates the publication of the *Global Report on Food Crises*.