



WORLD VISION POLICY BRIEF

There is no place for famine in the 21st century

World Vision is deeply concerned about the shocking increases in global food insecurity and malnutrition driven by a deadly mix of conflict, climate change and the socioeconomic impacts of Covid-19. Of most urgent concern are the more than 34 million people already suffering from “Emergency” (IPC 4) levels of food insecurity according to the Integrated Food Security Phase Classification (IPC)¹ levels of food insecurity or worse, including the 166,000 girls, boys, women and men who are currently living in famine-like (IPC 5) conditions in Yemen, South Sudan and Madagascar.

The vast majority of people facing these life-threatening crises were already living in humanitarian and fragile contexts, where humanitarian access is constrained and violations of International Humanitarian Law (IHL) and human rights are rife. Food crises and state fragility are closely linked – of the top ten countries facing the highest burden of Emergency and Catastrophe/Famine levels of food insecurity, all have longstanding humanitarian response plans and seven are categorised as ‘extremely fragile’ by the OECD.²

Food insecurity is a leading cause³ of wasting in children, and malnutrition is the main underlying cause of 45% of all preventable deaths of children under five. Young children with wasting are eleven times more likely to die from preventable diseases than well-nourished children.⁴ The Lancet’s modelling estimated that the Covid-19 pandemic could increase wasting by

34
MILLION
people are
suffering from
emergency levels
of food insecurity.



**Malnutrition is the
main underlying
cause of 45% of
all preventable
deaths of children
under five.**

¹ Integrated Food Security Phase Classification system’s Phase 4 (Emergency) and Phase 5 (Catastrophe/Famine). The Integrated Food Security Phase Classification (IPC) system is 1) a standardized scale of food insecurity; and 2) a process for building interagency technical consensus on the state of food insecurity in a specific country at a given moment and aims to inform evidence-based decision making. The 5 ‘phases’ of the IPC scale are: Phase 1 (None/Minimal), Phase 2 (Stressed), Phase 3 (Crisis), Phase 4 (Emergency) and Phase 5 (Catastrophe/Famine).

² OECD. 2020. *States of Fragility 2020*. Paris: OECD Publishing. 17 September. <https://doi.org/10.1787/ba7c22e7-en>.

³ Other causes include poor access to health and nutrition services, water and sanitation and poor infant feeding practices.

⁴ Zulfiqar A. Bhutta¹, James A. Berkley, Robert H. J. Banda, Marko Kerac, Indi Trehan, and André Briend. 2017. ‘Severe childhood malnutrition’. *Nature*. [ARTICLE NUMBER 17067 | VOLUME 3](https://doi.org/10.1038/nature21000).

50%, which could lead to an additional 1,157,000 preventable child deaths through disruptions in critical health services and decreased access to food.⁵ Poor nutrition in the first 1000 days, from pregnancy to age two, can have irreversible and lifelong negative physical and cognitive consequences, undermining long-term development and the resilience of individuals, households and nations.

While meeting urgent needs to prevent famine is the most pressing priority, it is not the first time the world has faced this situation in recent years. The last large-scale famine occurred in Somalia in 2011, where failure to act quickly on early warnings of famine and restricted humanitarian access due to conflict left 260,000 people dead, half of whom were children.⁶ As famine was declared and the UN Secretary-General made his plea to the international community to save 'children from a truly terrible nightmare',⁷ it was already too late. Half of all of the people that perished did so before famine was officially declared by the international community. The world's failure to heed early warnings led to thousands of preventable child deaths.

World Vision believes that famine is preventable and has no place in the 21st century. With strong collective leadership, political will and the right financing, large-scale food and nutrition crises could be a thing of the past. This requires the international community and national governments to support a triple nexus approach to food and nutrition crises, complementing short-term emergency response with commitments to support long-term solutions to the underlying drivers of those crises. Both short-term and long-term measures must prioritise the realisation of human rights; support peaceful resolution to conflict; and transform food systems to be more inclusive, sustainable and resilient.

World Vision welcomes recent high-level initiatives to address famine risks in multiple countries, including the UN Secretary-General's Famine Prevention Task Force, the UN's [Call for Action to avert famine in 2021](#) and the G7's Compact on Famine Prevention and Humanitarian Crises. However, much more must be done to get lifesaving resources into the hands of the vulnerable children and their families who need them right now.

Bold, decisive leadership and urgent action by national governments and the international community are needed to avoid this terrible situation from slipping into an unimaginable catastrophe, pushing progress on the food-security and nutrition-related sustainable development goals (SDGs) even further out of reach for the most vulnerable children and their families.



⁵ Timothy Robertson et al. 2020. 'Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: A modelling study'. *The Lancet Global Health*. 12 May.

⁶ UN News. 2013. 'Somalia famine killed nearly 260,000 people, half of them children – reports UN'. 2 May. <https://news.un.org/en/story/2013/05/438682-somalia-famine-killed-nearly-260000-people-half-them-children-reports-un>.

⁷ Ban Ki-moon. 2011. 'Famine in Somalia'. United Nations Secretary-General. 21 July. <https://www.un.org/sg/en/content/sg/articles/2011-07-21/famine-somalia>.

World Vision's response to food security and nutrition crises

- World Vision is on the ground, responding, and ready to do more. We are an experienced global leader in food security and nutrition in the most fragile contexts, able to meet emergency hunger and nutrition needs at scale. In 2020, World Vision:



reached more than 12 million of the most vulnerable people (7.2 million girls and boys) in 29 countries with lifesaving food security and nutrition programmes, in partnership with the Nobel Peace Prize Laureate the United Nations World Food Programme. Almost 83% of the people supported lived in fragile contexts.



provided supplementary feeding to over 684,000 children under five and 173,000 pregnant and lactating women to protect their nutritional status across 14 countries.



treated more than 96,000 children with wasting in 13 countries, with 89% of these children making a full recovery.

- In April 2021, World Vision declared a multi-country regional hunger crisis response in six countries in East Africa (Ethiopia, Somalia, South Sudan, Sudan, Uganda and Kenya). In 2020, World Vision reached seven million highly vulnerable people with food, cash, voucher and nutrition support in these six countries. World Vision has targeted 2.4 million people, including 490,000 children at heightened risk of famine in the region for lifesaving food security and nutrition support.
- In Sudan, World Vision is already addressing the immediate needs of highly food-insecure populations in Blue Nile, East Darfur, South Darfur and South Kordofan States, reaching more than 600,000 vulnerable people with lifesaving interventions that include food assistance; livelihoods support; and health, nutrition, water and sanitation and protection services. During the lean season World Vision's response will scale up to reach an additional 200,000 beneficiaries.
- World Vision has declared a national food security and nutrition response in Afghanistan which aims to reach 1,000,000 people at risk of famine. Almost 3.2 million Afghans are suffering from Emergency levels of food insecurity (IPC 4), and half of all children under five suffer from wasting.
- The Democratic Republic of Congo (DRC) faces the largest ongoing food security crisis in the world, with 6.7 million people already facing Emergency levels of food insecurity (IPC 4). Compounding already high levels of food insecurity, the DRC hosts the second largest number of displaced persons globally and has recently seen escalating violence in the eastern part of the country. World Vision's response is designed to address the complex humanitarian needs across the country. World Vision is providing lifesaving support to nearly 900,000 individuals, 65% of whom are children, through general food distributions, nutrition interventions for children and pregnant and lactating women, school-feeding programmes, and cash and voucher transfers. To complement short-term humanitarian response, World Vision is helping to increase livelihoods opportunities for vulnerable households by supporting community gardens, savings groups, strengthening farmers' cooperatives and improving male and female farmers' access to food markets.
- In Somalia, World Vision leads the multi-donor funded [Somalia Resilience Programme](#) which supports highly food insecure households and communities to improve their food security, livelihoods and assets in order to increase their ability to withstand shocks such as drought and pandemics, in both the short term and the long term.

Recommendations

The sheer scale of food and nutrition crises around the world requires a joint effort by humanitarian, development and peace actors to rapidly scale up lifesaving support and protect the rights of the more than 34 million people facing starvation and severe malnutrition. Preventing food and nutrition crises in future requires concomitant efforts and political will to address the underlying drivers of food insecurity, poverty and vulnerability at the global, national, community and household levels. To realise the vision of a hunger-free world today and tomorrow, World Vision makes the following recommendations.



National governments should:

- Strengthen access to and delivery of quality essential services for the most vulnerable, including food, nutrition, health and improved water and sanitation, and establish accountability mechanisms to ensure the most vulnerable children and families are able to safely and equitably access those services.
- Establish and/or strengthen national, child-sensitive, protection systems, and ensure that adequate budgetary allocations and accountability mechanisms are in place to make certain the most vulnerable families receive transfers of sufficient size and duration to meet lifesaving food and nutrition needs. Social protection is among the best documented and cost-effective ways to promote equity, reduce vulnerability, invest in human capital development, and protect people's food security and nutrition status when disaster hits, particularly for the extreme poor. Multipurpose cash transfers are particularly effective and efficient in supporting vulnerable families to meet immediate needs in contexts where multiple, overlapping shocks are the norm.
- Strengthen the functioning of local and national food and agriculture market systems, with particular attention to local food systems and markets where the majority of poor people buy and trade food. This requires greater investments in infrastructure, access to quality agricultural inputs and post-harvest storage, training and market information, savings and credit services and increased off-farm employment opportunities. It also requires increased access to financial services and business-training opportunities for small and medium enterprises.

- Reduce the risk of Covid-19 transmission for women and men engaged across the food system by ensuring equitable access to Covid-19 vaccines, in line with the World Health Organization's SAGE Values Framework for the Allocation and Prioritisation of Covid-19 Vaccination and following the WHO's Fair Allocation guidance.
- Support the most vulnerable households and communities to adapt to and build their resilience to climate change and weather-related hazards which are key drivers of food and nutrition crises and disproportionately affect children. Nationally Determined Contributions and National Adaptation Plans must explicitly recognise children as rights holders, integrate their needs and perspectives and ensure monitoring and evaluation frameworks include data disaggregated by age and gender.



Parties to Conflict should:

- Take immediate measures to end conflicts and sustain peace through diplomatic and political solutions. This is a critical element to prevent and respond to hunger crises faced by children in conflict settings, particularly in situations further exacerbated by climate change or the socioeconomic impacts of Covid-19.
- Adhere to IHL and human rights law, cease attacks on civilians, especially children, and on civilian infrastructure.
- Stop the use of starvation as a method of war alignment with UN Security Council Resolution 2417.
- Facilitate the safe provision of principled humanitarian assistance to affected populations to ensure the timely delivery of lifesaving aid.



Implementing agencies should:

- Urgently scale up humanitarian food, cash and/or vouchers to protect the nutrition, health and food security status of the more than 34 million girls, boys, women and men experiencing Emergency and Catastrophe/Famine levels of food insecurity.
- Support national social protection system strengthening by:
 - committing to develop harmonised, coherent mechanisms to coordinate cash transfers in humanitarian contexts, including common targeting and monitoring criteria and interoperability of systems and tools and approaches.
 - prioritising the use of multipurpose cash transfers through digital systems which will support better integration with existing social protection mechanism or serve as building blocks to support transitions to national social protection systems.
- Implement a time-bound plan on prevention and treatment approaches to wasting through a multi-sector approach so that all children with wasting – regardless of the severity – are treated in a single programme. This should include:
 - expanding the reach of Community Management of Acute Malnutrition programmes
 - improving the integration of nutrition services into health in-patient and out-patient services and programmes
 - increasing investment and scaling of nutrition education programmes that promote exclusive breastfeeding, Emergency Infant and Young Child Feeding and dietary diversity.
- Support interagency efforts to work across the humanitarian-development-peacebuilding nexus and apply lessons learned from 2011 Somalia famine through:
 - building NGO consortia focused on strengthening the resilience of children, families and communities to multiple shocks and stresses through livelihoods diversification; responsive, flexible programmes; and strengthening social connectedness⁸

⁸ Daniel Maxwell, Jeeyon Janet Kim, and Nisar Majid. 2015. 'Planning from the Future, Case Study: The Somalia Famine of 2011–12'. August. <https://www.alnap.org/help-library/planning-from-the-future-the-somalia-famine-of-2011-12>.



- providing greater support for productive, resilient livelihood opportunities for smallholder farmers and pastoralists to improve their skills; access appropriate tools, technologies and financial services; produce more nutritious foods; and increase market opportunities and off-farm employment opportunities throughout the food system.
- integrating early action ‘trigger’ indicators into planning, emphasising prevention and disaster risk reduction and ‘no regrets’ programmes; and increasing the use of crisis modifiers in development programming.



G7 governments should:

- Urgently disburse the US\$8.5 billion committed in the G7 Compact on Famine Prevention and Humanitarian Crises, targeting the 34 million people in Emergency and Catastrophe/Famine levels of food insecurity. The critical window to prevent famine is rapidly closing, and funding to save lives must:
 - translate into getting lifesaving assistance in the hands of those that need it most before September 2021.
 - be additional to existing humanitarian funding commitments to ensure resources are not diverted from the already existing 35 underfunded⁹ humanitarian response plans.
- Publish a breakdown and timeline of disbursements of their Compact commitments by G7 member and in advance of the G7 Foreign and Development Minister’s meeting in September 2021. This breakdown should be by sector, delivery channel; and recipient country.
- Ensure Compact implementation plans emphasise needs-based funding allocations based on independent, consensus-based analysis; the importance of adherence to IHL and humanitarian principles; reinforce a system-wide shift towards greater investment in prevention, preparedness and anticipatory action; and commit to political action to promote peace, protect civilians and safeguard humanitarian access.

⁹ Almost midway through the 2021, overall funding levels for humanitarian response plans are less than 16% of total requirements. Overall funding for food security is 23% of what is required; overall funding for nutrition is 11% of what is required. (FTS data as of 25 May 2021).



All donors should:

- Mobilise additional humanitarian funding to complement G7 commitments.
- Increase support for strengthening or establishing national social protection systems. This includes providing more funding as multipurpose cash transfers. Safety nets, as part of comprehensive social protection systems, are one of the most cost-effective means to minimise the impact of shocks and to protect and promote proper nutrition for children.
- Take diplomatic action to prevent famine, protect civilians and ensure humanitarian access in conflict situations, now and in future. Actions should comply with IHL, respect humanitarian principles and be aligned to UN Security Council Resolution 2417, which prohibits the deliberate starvation of civilians as a weapon of war, promotes early warning and seeks to protect agriculture and related infrastructure from attack.
- Support interagency efforts to work across the humanitarian-development-peacebuilding nexus to reduce humanitarian need, build resilience and promote sustainable livelihoods for the most vulnerable people. This requires multi-year, flexible support for community-based programmes that assist poor female and male smallholder farmers, pastoralists, fisherfolk and the urban poor to improve their livelihoods and increase investments in inclusive, sustainable and resilient food systems.
- Build 'crisis modifiers' into development programmes to increase flexibility to respond to and mitigate hunger crises through early action and 'no regrets' programming.¹⁰
- Pay particular attention to the prevention and treatment of wasting in children, with a focus on the first 1,000 days, through multi-sectoral action across food security, health, nutrition, WASH and child protection.
- Support programming that is needs driven, context specific, flexible and accountable to affected populations.

¹⁰ Daniel Maxwell, Jeeyon Janet Kim, and Nisar Majid. 2015. 'Planning from the Future: Component 2. The Contemporary Humanitarian Landscape: Malaise, Blockages and Game Changers'. Research project by Kings College (London), Humanitarian Policy Group at the Overseas Development Institute (HPG/ODI) and the Feinstein International Center (FIC). August.
https://fic.tufts.edu/wp-content/uploads/somalia_case_study_jan_6_2016.pdf.