



# Time to act not react:

## IRC's recommendations for halting famine in Somalia and mitigating risk globally

September 2022

### Executive Summary

The world is facing an unprecedented hunger crisis that requires a bold international response. This crisis should top the agenda as world leaders gather at the UN General Assembly (UNGA) meetings this month. Progress toward food security is reversing. In the past three years, acute food insecurity has [more than doubled](#) from 135 million in 2019 to 345 million today. These 345 million people are forced to make impossible and heartbreaking choices about how to feed their families – skipping meals, taking children out of school to work, and enduring the anguish of seeing their children on the brink of starvation. As food insecurity increases, so do malnutrition levels, creating a global children's crisis with the lives of more than 50 million children [at risk](#).

In 2017, the threat of four famines in Yemen, South Sudan, Somalia, and Nigeria captured global attention and galvanized humanitarian action, averting the worst outcomes. But since then, food insecurity has spread across dozens of countries, stretching resources and attention thin. A complex set of interwoven global and regional shocks – coupled with a lack of timely, bold international action – are to blame. In December 2021, the International Rescue Committee's (IRC) [Emergency Watchlist report](#) warned the prices of food and basic goods would soar in the coming year as a result of protracted conflicts, COVID-19, global economic recession, and climate change. The war in Ukraine accelerated these price hikes and added exponentially to supply chain challenges globally, stretching the ability of millions to meet their basic needs.

Somalia should be at the forefront of international attention, given spikes in food insecurity, high rates of mortality, and alarming rates of acute malnutrition. More than half the country – [7.1 million people](#) – need emergency food aid. Children are [dying](#), with 1.5 million kids under five years of age battling acute malnutrition. The [latest analysis](#) shows that famine is [expected](#) in parts of Somalia by October unless action is taken now. IRC's own data echoes the severity of the situation with one clinic in Somalia reporting a staggering 818 percent increase in children with acute malnutrition from February to June 2022. Immediate action is critical to halting famine in Somalia, while working in parallel to prevent similar catastrophe in other countries.

Six countries – Somalia, Ethiopia, Yemen, Afghanistan, Nigeria, and South Sudan – are most immediately at risk of famine with [populations facing catastrophic levels of hunger](#) and widespread acute malnutrition as the global hunger crisis escalates. Three are in East Africa, pointing to the urgency of a coherent regional response. Yet, coordinated international action and funding have been [slow to materialize](#). Waiting for formal declarations before taking definitive action jeopardizes hundreds of thousands of lives. Such was the cost of inaction during the deadly [2011 famine](#) in Somalia during which 260,000 people – half of them children – perished waiting for aid to reach them. In fact, half of all deaths occurred before a famine was officially declared. During this year's UNGA high-level week, member states and multilateral agencies should mount a swift and focused international response to famine, aimed at preventing the worst outcomes in the most at-risk contexts starting with Somalia. Repurposing the UN High-Level [Task Force](#) on Famine Prevention can serve to galvanize attention, funding, and action from donors, amid a proliferation of global initiatives that risk diffusing responsibility and diluting focus. At the same time, member states should catalyze efforts to break the cycle, think beyond crisis response, and commit to maintaining this focus beyond this emergency moment. Evidence-based, turnkey solutions and programmatic innovations, if adopted and scaled quickly, can have immediate impacts as part of the effort. One such solution pioneered and promoted by IRC in the field of acute malnutrition should be adopted immediately as a critical tool in fighting global hunger.

## Recommendations

**Leverage evidence-based approaches: Implement simplified protocol for acute malnutrition to mitigate current crises and avert child deaths**

### Prioritize famine response in East Africa

Mobilize flexible funding to NGOs on the frontlines by increasing grant top-ups

Demand accountability, inclusivity, and transparency in coordinating a holistic response

Remove barriers to humanitarian action and prioritize diplomatic negotiations

### Focus efforts to mitigate global famine risks

Embolden the UN High-Level Taskforce (HLTF) on Preventing Famine to focus on the six countries at highest risk by convening humanitarian and development actors and scaling anticipatory financing

Increase funding channeled through existing social safety nets

Provide predictable, multi-year financing that supports multisector actions to build resilience and reduce the impact of recurring, future shocks

## Famine in East Africa: The cost of inaction

In July 2022, IRC published an unprecedented [Crisis Alert](#) to its annual Emergency Watchlist to warn of impending famine in Somalia, coupled with alarming levels of food insecurity gripping Kenya and Ethiopia. While Ethiopia, Kenya, and Somalia make up 2 percent of the world's population, they are home to 70 percent of the world's most extremely food insecure.<sup>i</sup>

East Africa's unique vulnerability is rooted in the lingering economic impacts of the COVID-19 pandemic, escalating internal conflict, rising food and fuel prices resulting from the fallout of the war in Ukraine, and extreme drought – the worst in 40 years – leading to crop failure, [declining agricultural productivity and livelihoods](#), and mass death of livestock. More than one million people [have been displaced](#) in Somalia alone since January 2021. The cost of a food basket [has risen](#) by 66 percent in Ethiopia and 36 percent in Somalia as cash-strapped communities struggle to pay for basic necessities. According to IRC's clients, prices for staples like cooking oil and grains have tripled. While recent breakthroughs in Ukrainian grain exports provide hope for reprieve from skyrocketing food prices and [disrupted](#) global supply, relief is coming too late for highly dependent import nations like Somalia, which relies on Russia and Ukraine for 90 percent of its wheat imports.

The recent system-wide [scale-up](#) by the Inter-Agency Standing Committee (IASC) in Somalia was a vital first step to recognizing the gravity of the situation, signaling the urgent need for donors to quickly and flexibly fund the humanitarian response to ensure that insufficient resources do not stall efforts to save lives. However, as of September 8, the Somalia HRP is still only [69 percent funded](#). Ethiopia's HRP is similarly [short](#) on funding with less than 40 percent of needs met.

Speed is of the essence, and frontline NGOs – international, national, and local – are best-placed to rapidly scale up humanitarian interventions. Their long-term presence and established services to affected communities, particularly hard-to-reach populations, means they best understand the most pressing and often interconnected needs. Frontline NGOs

***Women and girls: Invisible at the heart of the crisis*** Women and girls should have a central and leading role in the design of improved future food systems, as they are [disproportionately](#) impacted by food insecurity. Inclusive consultation and co-design of programs from the outset lead to improved food security and resilience given women’s prominent role as heads of households and producers, sellers, and preparers of food. Female-headed households and adolescent girls are particularly vulnerable to the secondary impacts of food insecurity, with increased rates of violence, exploitation, and abuse [reported](#). In most developing countries, women are [responsible](#) for 60 to 80 percent of food production, and for half the world’s food production. Long-term investment in feminist, localized, and sustainable approaches to mitigating food insecurity – and climate change – requires long-overdue recognition of their unique role, as well as a commitment to close the gender data gap as women are too often [left out](#) of food security analyses.

can access areas and populations that others cannot, namely in insecure areas and conflict settings like Somalia. To ensure resources reach organizations with the access and capacity to respond, donors should deploy funding to NGOs through grant top-ups, the fastest and most responsive mechanisms to scale aid.

Leading donors should demand accountability from response coordinators and implementers. Coordination must be active, transparent, and inclusive of all organizations with reach and capacity. While food aid, nutrition, and humanitarian cash programming are often understood as immediate vital responses, poor sanitation, lack of potable water, and spread of disease are similarly drivers of mortality during famine. As such, health and water and sanitation activities are also critical to addressing current and future disease outbreaks, as well as support for programs that address the secondary protection impacts of the food crisis and consequent displacement.

With conflict and insecurity an impediment and constraint to the delivery of humanitarian aid in East Africa, diplomatic negotiations targeted at improving humanitarian access should be prioritized to support frontline actors with reaching populations. [Somalia](#), [Ethiopia](#), and [Kenya](#) all have “high” or “very high” constraints on humanitarian access this year. In Somalia, around [900,000 people](#) were living in inaccessible areas in early 2022. UN OCHA should work closely with the Special Envoys for East Africa to prioritize engagement that aims to expand access. UN agencies can help in this effort by deploying staff to East Africa to facilitate access dialogue with non-state actors and

member states must carefully weigh the fallout of new counter-terror restrictions to avoid any unintended consequences on humanitarian, commercial, and financial actors.

### **Scaling turnkey solutions: Simplifying and scaling treatment for acute malnutrition**

In times of severe food insecurity and famine, acute malnutrition surges, especially among children under five years old – which can have [lifelong health, physiological, and sociological impacts](#). In fact, a famine declaration means that at least 30 percent of children are already suffering acute malnutrition. Today in East Africa, more than [8 million children](#) are severely malnourished, increasing their risk of death up to eleven-fold. UN Humanitarian Coordinator Martin Griffiths [recently](#) warned that in Somalia, “... the malnourished children are likely to die first.”

The scope of this children-centered crisis is devastating, but a scalable solution exists. Treatment with ready-to-use therapeutic food (RUTF), an easy-to-administer, shelf-stable fortified peanut butter paste is highly effective. The overwhelming majority of malnourished children who receive this treatment fully recover within weeks. And yet globally, just [20 percent](#) of children suffering from acute malnutrition can access this treatment.

At present, wasting treatment – or treatment for the [most acute and deadly form](#) of malnutrition – is delivered through a bifurcated system that treats severe and moderate forms of malnutrition with different products, different supply chains, and different delivery points, supported by UNICEF and WFP respectively. In addition, children are diagnosed and treated according to complex weight-based calculations, primarily through formal health facilities. The current approach is difficult to coordinate and impossible to scale. Likewise, when fuel and food prices are surging and cash-strapped families are making impossible decisions, the need to travel to a health facility can [prove an insurmountable barrier](#). There are three steps to overcome these complexities while increasing the reach of treatment.

First, donors, UNICEF, WFP, and WHO should support national nutrition programs in adopting new care models that simplify and decentralize treatment, with children and caregivers at the center. Numerous studies demonstrate that a simplified combined protocol using a single product, a simplified dosing schedule, and simplified diagnostic criteria is equally effective and in fact more cost-effective than the standard, more complex clinical approach. Delivering treatment through community health workers and empowering families to regularly screen children further promotes reach, scale, and impact.

Simplified protocol has been a useful approach in many contexts during times of crisis, including during the global COVID-19 pandemic. UNICEF reports that to date, 52 countries [have used](#) some form of simplified treatment approaches. Donors and UN agencies should give countries the option of requesting a single treatment product and issue clear technical guidance on simplified approaches as a safe, effective, and efficient option.

Second, achieving global progress through nationally led plans requires all actors to commit to a system of mutual accountability. UNICEF is [the lead agency](#) for supporting national governments with wasting treatment. UNICEF should lead donors, the UN, government, and civil society partners in forming a new accountability mechanism that optimizes delivery by tracking progress toward scale targets and agreeing on problem solving strategies to address persisting gaps in coverage and quality.

Third, donors should build upon the momentous US-led \$250 million contribution, urgently mobilize behind [UNICEF's call](#) for \$1.2 billion to address the most life-threatening cases of acute malnutrition, and strive for long-term pooled financing, drawing from diverse sources including philanthropy, private sector, and multilateral development actors to support nationally-led efforts to treat acute malnutrition.

While shrinking development assistance budgets and capital markets downturns have created a tight funding environment, fully financing wasting treatment may be as simple as allocating a portion of existing commitments toward acute malnutrition treatment. The 2021 Nutrition for Growth and 2022 G7 summits collectively raised over \$31 billion in donor commitments for food security and nutrition. Directing just a portion of these funds to wasting treatment could catalyze an increase in its scale at a moment of unprecedented need.

***Tried and true: A simplified protocol for treating all children with acute malnutrition***  
The IRC, in partnership with Action Against Hunger and the London School of Hygiene and Tropical Medicine, has developed, tested, and piloted the combined protocol, which offers a simpler and more comprehensive approach to treatment. A clinical trial in Kenya and South Sudan demonstrated that the combined treatment protocol is equally effective and more cost-effective than the standard, more complex approach. Performance at scale was also notable. Together with Mali's Ministry of Health, IRC [found that](#) 96 percent of over 27,000 children treated with a simplified protocol achieved a full recovery. In total, IRC has tested this approach in ten countries (Burkina Faso, Central African Republic, Chad, Democratic Republic of Congo, Kenya, Mali, Niger, Nigeria, Somalia, and South Sudan), and published 11 [papers](#) supporting the protocol's safety, efficacy, and efficiency.

### **Proactive, not reactive: Preventing famine now and later**

The international community must learn from its failure to act sooner in Somalia this year – and in 2011. While 20 countries are [at risk](#) of worsening, six – Somalia, Ethiopia, Afghanistan, Nigeria, South Sudan, and Yemen – remain at highest risk of famine with hundreds of thousands of people already facing catastrophic conditions, demanding immediate attention.

A myriad of international groups and initiatives have been created to address global food insecurity, including the G7's Famine Prevention Compact in 2021 and Global Alliance for Food Security in 2022, the United States' Roadmap for Global Food Security, the African Union's declaration of malnutrition as the theme of 2022, and the International Financial Institutions' Action Plan to Address Food Insecurity. While commendable, this proliferation of initiatives risks diffusing responsibility and diluting focus while failing to provide the coordination and attention needed to mount an effective, multisectoral response to regions at highest risk of famine.

Rallying support and action around one group focused specifically on famine prevention – the UN Secretary-General’s [High-Level Taskforce](#) (HLTF) on Preventing Famine – could help center immediately needed action and attention on the countries facing the most severe famine risk. The HLTF is led by the Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator and comprised of representatives from the UN World Food Program (WFP) and Food and Agriculture Organization (FAO). The make-up of this taskforce should be expanded to include leadership from key international financial institutions, local community-based organizations, local and international NGOs, member states including affected states, and leading donors. The taskforce should function as a forum to coordinate multisectoral humanitarian, development, and diplomatic interventions to address famine risks.

***Climate change as long-term driver: Building truly resilient food systems***

Donors, in close partnership and collaboration with humanitarian and development actors, should come together to better design and layer interventions with the goal of addressing emergency needs while also building more diverse, local, and climate-resilient food systems as a strategy to slow the hunger crisis. Donors can drive this effort by providing multiyear, flexible funding capable of bridging interventions on both sides of the development-humanitarian divide to promote collaboration and joint design between actors on projects. Increased collaboration and co-design will lead to greater efficiency and longer-term resilience.

First, the HLTF should hold regular meetings between core stakeholders to promote famine prevention and response. Meeting outcomes and actionable next steps should be made public and transparent for accountability. Second, the taskforce should analyze funding needs across all six countries and swiftly organize joint donor pledging events with UN OCHA to mobilize funding. Third, along with its expanded membership, the HLTF should expand its mandate to identify the country-specific drivers of famine risks. As part of this, the HLTF should assess current gaps in data needed to measure food security conditions, highlighting barriers to standardized country monitoring and data collection. Tackling humanitarian access should be the specific focus of upcoming HLTF meetings to assess and mitigate the challenges facing scaled interventions in each prioritized country. This year, all six countries at highest risk of food insecurity are [assessed](#) to have “high” or “very high” constraints on humanitarian access.

The HLTF should promote increased funding to be channeled through existing government [social safety net programs](#) and for cash transfers channeled through the UN and NGOs for basic service delivery in the countries experiencing the highest levels of food insecurity and malnutrition. These cash-based interventions provide swift and critical lifelines to families on the edge of poverty. In the immediate term, the HLTF can serve as a central forum for engagement with the World Bank to expand partnerships with NGOs in instances where government social safety net infrastructure is weak or absent, to better reach affected populations and bridge gaps. Tightening coordination and partnership will increase data exchanges and targeted interventions between NGOs, the UN, the World Bank, and key development donors.

While the primary goal of this expanded body remains immediate famine prevention, it can also serve as a tool to inform future discussions aimed at reassessing a historically siloed, reactive, and cyclical approach to global food security and famine prevention. The HLTF’s expanded membership structure, post-response coordination experience, and increased understanding of country-specific causes of famine risk and barriers to data collection will be useful in any future reform discussions. Early warning systems such as [FEWS NET](#) exist to warn of food insecurity risks before it is too late; what remains lacking is the political will and investments at scale to take advantage of this data and mobilize anticipatory action across the humanitarian-development divide. Future approaches to food security should seek to limit last-minute humanitarian action in favor of building resilience through robust multisectoral interventions triggered well before a famine declaration or famine threat. Building resilient food systems will require clear commitments by donors to mobilize multi-year, predictable, and flexible funding.

To aid in any future reform conversations, the HLTF should publicly issue an after-action report with findings and lessons learned from the current famine response.

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<sup>1</sup> WFP reported that there were 882,000 people facing IPC Phase 5 levels of food insecurity, including 401,000 in Ethiopia and 213,000 in Somalia, as of June 2022.