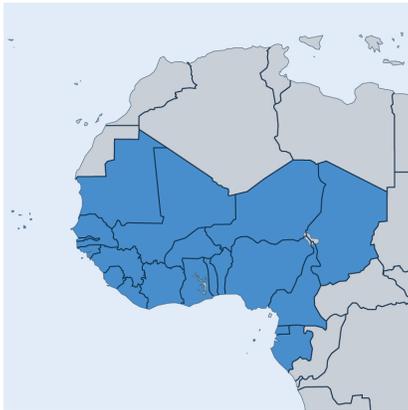


Regional Snapshot

WEST AFRICA | FISCAL YEAR (FY) 2014



REGIONAL SUMMARY¹

Recurring food insecurity and acute malnutrition, cyclical drought, locust infestations, seasonal floods, disease outbreaks, and complex emergencies have presented significant challenges to the vulnerable populations of the West Africa region.² Complex emergencies and food insecurity constituted the primary concerns in West Africa during FY 2014. USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA) maintains a permanent regional presence in Dakar, Senegal.

RECENT HUMANITARIAN EVENTS IN THE REGION

- USAID/OFDA responded to multiple disasters in West Africa during FY 2014, including complex emergencies in Chad, Mali, Mauritania, and Niger, food insecurity crises in Burkina Faso and Senegal, and a regional Ebola Virus Disease (EVD) epidemic.
- In March 2014, health authorities in Guinea identified the first case of EVD related to the current outbreak, which has since spread to four other nations in West Africa. Between March and September, the U.N. World Health Organization (WHO) documented more than 6,553 cases and 3,083 deaths due to EVD in Guinea, Liberia, Nigeria, Senegal, and Sierra Leone, with the majority of cases and deaths occurring in Liberia.³ Regional governments and the international community are working to contain the epidemic.
- In 2014, food insecurity threatened an estimated 20 million people in the Sahel region—comprising portions of Burkina Faso, Cameroon, Chad, the Gambia, Mali, Mauritania, Niger, Nigeria, and Senegal. Chronic underdevelopment, a sustained high prevalence of acute malnutrition, and multiple droughts in recent years have left populations particularly vulnerable to food insecurity and nutrition emergencies that are often exacerbated by conflicts in the region.
- Within the Sahel, food security in Chad, Mali, and Niger has been of particular concern. Through December 2014, the USAID-funded Famine Early Warning Systems Network (FEWS NET) forecasts good agricultural production for much of the region except in conflict-affected areas in northeast Nigeria, southeast Niger, and western Chad, where Crisis—IPC 3—levels of food insecurity are likely.⁴
- In Mali, conflict in the north calmed significantly, prompting nearly 362,000 internally displaced persons (IDPs) and refugees to return to areas of origin by August 2014. Although overall food security conditions improved during FY 2014, 3.3 million Malians remain food-insecure, while sporadic violence and depleted household resources have left many families in the north vulnerable.
- In northeastern Nigeria, humanitarian access to more than 700,000 IDPs is precarious as attacks by Boko Haram insurgents have become more frequent throughout 2014. Escalating insecurity has resulted in significant and increasing humanitarian needs among affected populations, particularly in Adamawa, Borno, and Yobe states. Ongoing urgent humanitarian needs include protection, emergency non-food relief items, and water, sanitation, and hygiene (WASH) assistance.

¹ For additional information on West Africa, please see USAID/OFDA fact sheets, available at: <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>

² The West Africa region includes Benin, Burkina Faso, Cameroon, Cape Verde, Chad, Côte d'Ivoire, Equatorial Guinea, Gabon, the Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, São Tomé and Príncipe, Senegal, Sierra Leone, and Togo.

³ Source: The U.N. Ebola Crisis Centre: External Situation Report, September 27, 2014.

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

USAID/OFDA PRIORITIES FOR 2015

- Respond to the acute food security needs of vulnerable populations struggling to protect their livelihoods following successive periods of drought and conflict in already stressed environments—particularly through agriculture, nutrition, and WASH interventions—while also focusing on building resilience to future shocks.
- Focus investments on integrated food security, health, nutrition, and WASH assistance to address both food insecurity and other factors that contribute to malnutrition.
- Continue building national and regional leadership capacity in disaster risk reduction (DRR) and disaster preparedness initiatives that address the root causes of crises.
- Invest in proven approaches to reduce disaster risks and ensure preparedness to respond to drought, epidemics, food insecurity, and malnutrition.
- Ensure adequate access to information—including trends in epidemics, markets, vulnerability, children’s nutritional status, and other relevant humanitarian indicators—to encourage effective and appropriate responses by the humanitarian community.

CHALLENGES

- The rapid spread of EVD has significantly impacted the populations of Liberia, Guinea, and Sierra Leone, while Nigeria and Senegal have conducted contact-tracing on isolated cases in an effort to stem transmission. Secondary effects of EVD include regional food insecurity, compromised livelihoods, the diversion of already scarce resources to EVD prevention and preparation activities, and restricted travel.
- The regional impact of EVD, drought conditions, and conflict in northern Nigeria, which plays a major role in the regional economy, will create challenging conditions for humanitarian actors during FY 2015. The deterioration of security may reduce humanitarian access and the ability of relief agencies to distribute assistance to vulnerable populations.
- Fighting between Boko Haram militants and Government of Nigeria forces that has led to the crisis in northeastern Nigeria and destabilized pockets of northern Cameroon, eastern Niger, and western Chad as affected populations seek to escape fighting remains a concern. Populations in these areas continue to experience insecurity due to frequent insurgent attacks, and the extended duration of the hostilities has negatively affected food security and livelihoods of vulnerable populations.
- Although the rainy season in FY 2014 was moderate in much of the Sahel, pockets of dryness have affected agricultural production and livestock among vulnerable populations.
- Despite the start of the peace process in Algiers in July 2014, the security situation in northern Mali remains precarious. The increased incidence of localized crime, the use of roadside improvised explosive devices, and ongoing sporadic conflict continue to affect the ability of some IDPs to return home, hamper the return of government officials, and restrict the delivery of humanitarian assistance.
- Limited investment in institutional capacity from national governments continues to thwart large-scale and coordinated efforts to address the high frequency and increased intensity of crises within the region. West African governments and multilateral organizations, such as the Economic Community of West African States (ECOWAS), recognize the need to build regional capacity in order to respond to humanitarian emergencies, yet issues related to the design and implementation of response mechanisms remain a major challenge.

KEY LESSONS LEARNED IN 2014

- Resilience-building efforts, along with long-term DRR initiatives, are necessary to address the root causes of cyclical crises in the region. When possible, short-term emergency and early recovery assistance should include a focus on building community resilience to prevent deterioration of conditions in the event of future shocks. To foster resilience in each step of response activities, humanitarian donors and partner organizations should seek to better integrate development programming with humanitarian responses, utilizing co-funding and joint programs, where appropriate.
- A multi-sector, integrated approach to response and recovery programs must address underlying causes of food insecurity and malnutrition. Continued engagement in communities with multi-year programs that include training, community mobilization, and behavior change components will help foster a degree of resilience and sustainability within humanitarian interventions.