WEBINAIRE SUR LE PROCESSUS HNO 2024

Global NUTRITION CLUSTER

29 Aout 2023

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Rachel Lozano

AGENDA

- **Introduction** 10min (Geraldine)

- **Facteurs contributifs et portée de l'analyse**   20min (Geraldine)

- **Analyse sectorielle** 30min (Geraldine)
  - Estimation du PIN pour le secteur de la Nutrition
    - Définition du PIN par le JIAF
    - Définition du PIN pour le secteur Nutrition
    - Processus d'estimation du PIN
    - Q&R
  - Indicateurs de sévérité pour le secteur de la Nutrition
    - Indicateurs globaux de référence pour la sévérité
    - Alignment et contextualisation des indicateurs
    - Q&R

- **Analyse intersectorielle** 30min (Rachel)
    - Estimation du PIN general
    - Sévérité intersectorielle
    - Schémas, liens, tendances
    - Q&R

- **Soutien du GNC et conclusion -** 5min (Rachel)

INTRODUCTION
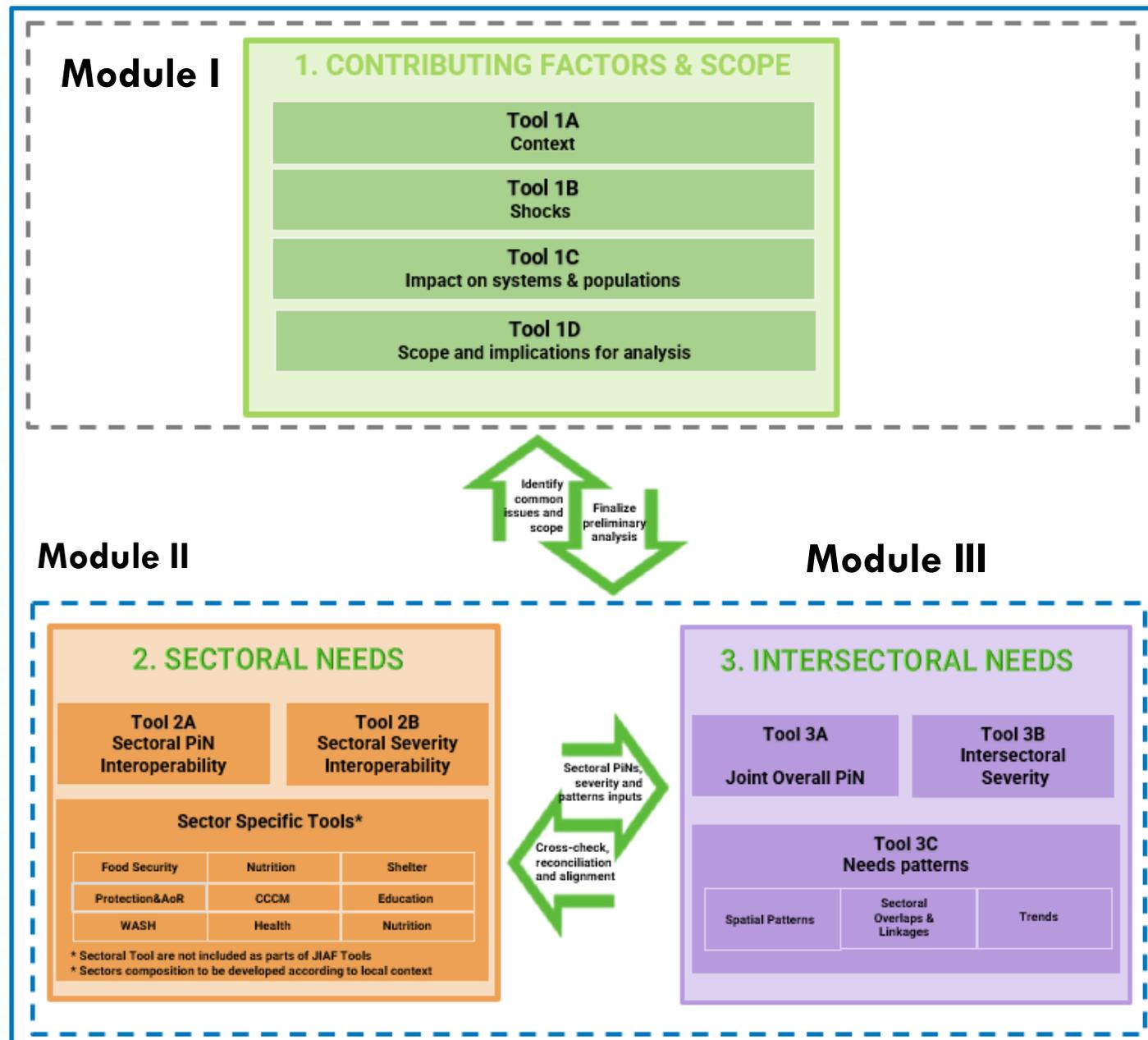
CADRE DE TRAVAIL ET ETAPES

PLATEFORME

OUTILS

DOCUMENTS DE REFERENCE

Global **NUTRITION** CLUSTER

CADRE DE TRAVAILS ET ETAPES DU HNO/JIAF

Module I

1. CONTRIBUTING FACTORS & SCOPE

Tool 1A
Context

Tool 1B
Shocks

Tool 1C
Impact on systems & populations

Tool 1D
Scope and implications for analysis

Identify common issues and scope — Finalize preliminary analysis

Module II

Module III

2. SECTORAL NEEDS

Tool 2A
Sectoral PiN
Interoperability

Tool 2B
Sectoral Severity
Interoperability

Sector Specific Tools*

Food Security	Nutrition	Shelter
Protection&AoR	CCCM	Education
WASH	Health	Nutrition

* Sectoral Tool are not included as parts of JIAF Tools
* Sectors composition to be developed according to local context

Sectoral PiNs, severity and patterns inputs

Cross-check, reconciliation and alignment

3. INTERSECTORAL NEEDS

Tool 3A
Joint Overall PiN

Tool 3B
Intersectoral Severity

Tool 3C
Needs patterns

| Spatial Patterns | Sectoral Overlaps & Linkages | Trends |

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ETAPES DU HNO/JIAF

Step 1: Complete Workspace 1A, 1B, and 1C: Contributing Factors and Scope

In preparation for the joint multi-partner working session:
- Step 1.1 OCHA prepares the Analysis Platform and Workspace 1A, 1B, and 1C
- Step 1.2 Sectors review workspaces and add content ahead of the multi-partner working session

During the joint multi-partner working session:
- Step 1.3: Jointly agree on the context of the crisis
- Step 1.4: Jointly identify major shocks and impacts
- Step 1.5: Jointly agree on the scope of the analysis and implications for data gathering

Step 2: Complete Workspace 2A and 2B - Interoperable Sectoral Needs
- Step 2.1: Complete Workspace 2A and 2B
- Step 2.2: Design and implement sector PiN estimation and severity classification methods.
- Step 2.3: Submit sectoral findings and documentation on methods

Step 3: Complete Workspace 3A, 3B, and 3C: Intersectoral Needs

In preparation for the joint multi-partner working session(s):
- Step 3.1 OCHA prepares Workspace 3A, 3B, and 3C
- Step 3.2 Sectors review workspaces and address flags ahead of the working session

During the joint multi-partner working session(s):
- Step 3.3: Sectors present results and discuss flags (optional time for sectors to revise initial findings[6])
- Step 3.4: Jointly agree on joint overall PiN for areas flagged
- Step 3.5: Jointly conduct analysis of intersectoral severity for areas flagged
- Step 3.6: Identity patterns, linkages, and overlaps of humanitarian needs

Return to Step 1 and finalize initial findings from Module 1

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LA PLATEFORME POUR LE HNO/JIAF 2024 :

LES OUTILS POUR LE HNO/JIAF 2024

TABLEAUX DE REFERENCE DU JIAF

OUTIL DU GNC POUR L'ANALYSE DU PIN & DE LA SEVERITE

Select language
Sélectionnez la langue
Seleccione el idioma

French

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unicef

Nutrition Humanitarian Needs Analysis Calculation tool*, v2.0

Links:

- Indicator Registry
- Classification Thresholds
- Evidence Repository, Reliability
- Analysis Team Composition
- Scenario 2 - Nut. Analysis
- Scenario 2 Contributing Fact.
- Scenario 3 - Nut. Analysis
- Scenario 3 Contributing Fact.
- Population figures

There are thirteen important sheets in the tool:

Indicator Registry– The list of all nutrition-related indicators adapted from Nutrition Cluster's *Indicators registry and framework*, separating those deemed "core" to guide the Nutrition Situation Analysis.

Classification Thresholds– The list of core nutrition-specific and nutrition-sensitive indicators and their corresponding thresholds (i.e. severity scale) to guide the situation analysis of nutritional needs for response planning.

Evidence Repository, Reliability – Summary of the reliability scores for all evidence used for the Nutrition Situation Analysis based on IPC Acute Malnutrition's Reliability Scale.

Analysis Team Composition– Summary of all members involved in the analysis, adapted from IPC Acute Malnutrition's Team Composition Matrix.

Scenario 2 - Nut. Analysis– Humanitarian situations where an IPC Acute Malnutrition cannot be conducted and the prevalence of GAM for children U5 is ≥5%.

Scenario 2 Contributing Fact.– Analysis of key contributing/contextual factors (often found in *Living Standards* pillar) to support the Nutrition Situation Analysis for Scenario 2 (U5 GAM ≥5%).

Scenario 3 - Nut. Analysis– Humanitarian situations where the prevalence of GAM for children U5 is <5%.

Scenario 3 Contributing Fact.– Analysis of key contributing/contextual factors (often found in *Living Standards* pillar) to support the Nutrition Situation Analysis.

Population figures– Key demographic information required for each of the "Affected" areas of interest in order to automatically calculate the subsequent number of "People in Need" for "Physical and Mental Well-being" and "Living Standards".

MATERIEL DE REFERENCE

Guide du GNC pour l'analyse des besoins

JIAF 2.0 Technical Manual

Q&R

ETAPE 1 (MODULE I) : CONTEXTE, SHOCK IMPACT, ET PORTEE DE L'ANALYSE

ETAPE 1: COMPLETER L'ESPACE DE TRAVAIL/WORKSPACE 1A, 1B, ET 1C: FACTEURS CONTRIBUTIFS ET PORTEE

EN PREPARATION DE L'ATELIER CONJOINT MULTI-PARTNERAIRES:

ETAPE 1.1 OCHA PREPARE LA PLATEFORME POUR L'ANALYSE ET LES ESPACES DE TRAVAIL 1A, 1B, AND 1C

ETAPE 1.2 LES SECTEURS REVOIENT LES DIFFERENTS ESPACES DE TRAVAIL ET COMMENTENT/RAJOUTENT DU CONTENU AVANT L'ATELIER CONJOINT

PENDANT L'ATELIER CONJOINT MULTI-PARTNERAIRES:

ETAPE 1.3: ON SE MET D'ACCORD SUR LE **CONTEXT DE LA CRISE**

ETAPE 1.4: ON IDENTIFIE CONJOINTEMENT LES PRINCIPAUX **SHOCKS ET IMPACTS**

ETAPE 1.5: ON S'ACCORDE SUR LA **PORTEE DE L'ANALYSE ET LES IMPLICATIONS DE LA COLLECTE DES DONNEES**
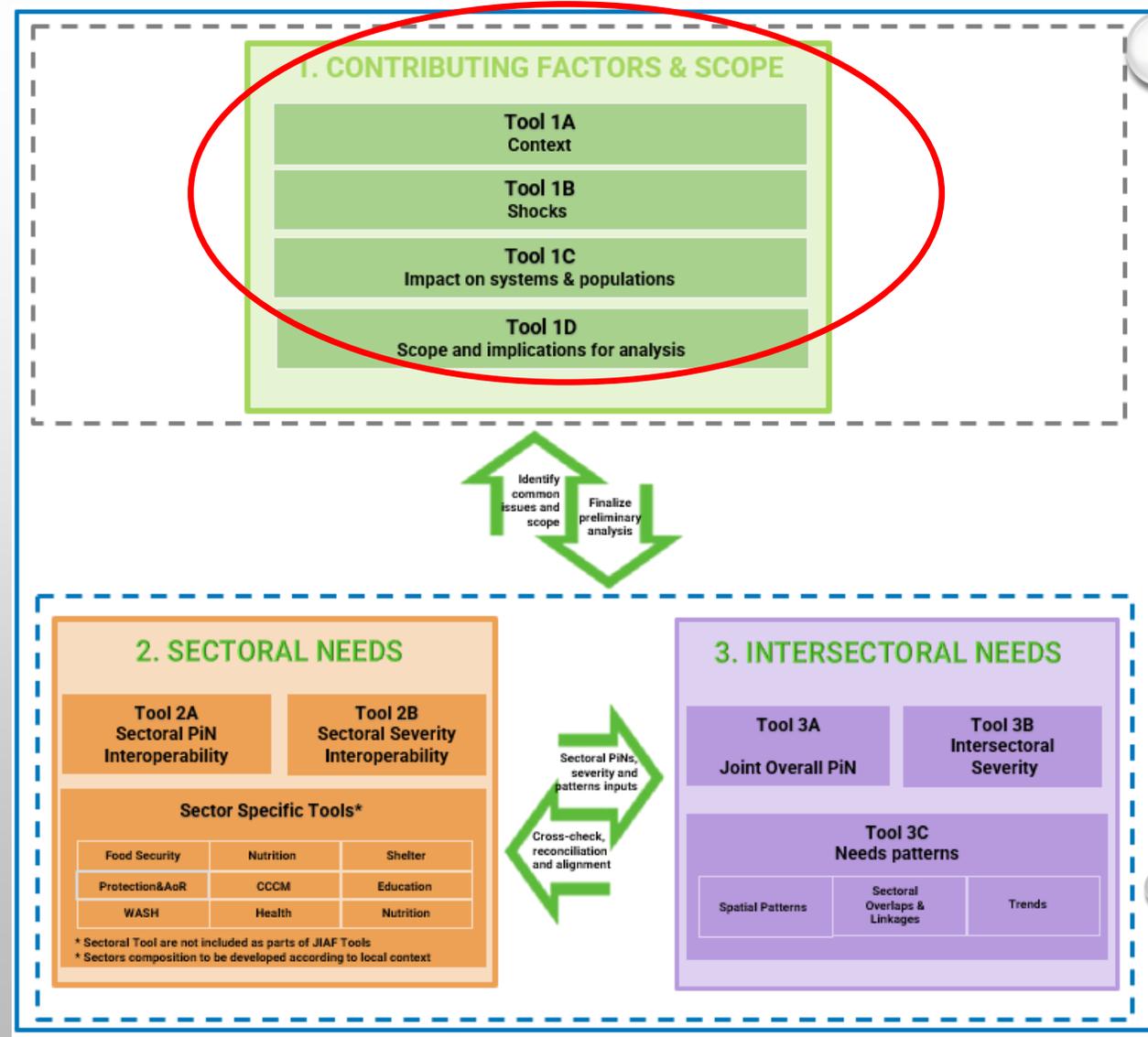
ETAPE 1 (MODULE I) : OUTILS ET REFERENCES

Collecte de données suivant les indicateurs contenus dans le tableau de référence 1 & 1D

Revoir et fournir des commentaires sur les espaces de travail/workspace 1A, 1B,1C

Reference Table 1: Potential Indicators for Context, Shocks and Impatcs

#	Dimension	Theme	Indicator Name/label	Examples of source	Unit of Analysis
1	Context	Aid Dependency	Aid Dependency		area
2	Context	financial services availability	financial services availability		area
3	Context	Humanitarian Access	Humanitarian Access		area
4	Context	IDP:Host ratio	IDP:Host ratio		area
5	Context	livelihood zones	livelihood zones		area
6	Context	market functionality	market functionality		area
7	Context	mobile coverage	mobile coverage		area
8	Context	population figures	population figures		area
9	Context	Poverty	Poverty		area
10	Shock	conflict	conflict intensity		area
11	Shock	conflict	conflict proximity		area
12	Shock	environment	agro-ecological shock intensity		area
13	Shock	environment	agro-ecological shock proximity		area
14	shock	environment	natural hazard intensity		area
15	Shock	environment	natural hazard proximity		area
16	shock	financial	currency devaluation		area
17	shock	financial	rate of inflation		area
18	Impact	displacement	IDP		area
19	Impact	displacement	Returnee		area
20	Impact	displacement	Refugee		area
21	Impact	displacement	Host		area
22	Impact	displacement	IDP in sites		area
23	Impact	displacement	IDP in Host Community		area

Q&R

MODULE II / ETAPE 2 : ESTIMATION SECTORIELLE DES PERSONNES DANS LE BESOIN

2.1

Etape 2.1: Completer le Workspace 2A (Contextualisation et Alignement du PIN avec les définitions du IASC et du cluster global)

2.2

Etape 2.2: Estimation et obtention du PIN

2.3

Etape 2.3: Soumission des résultats pour le secteur et documentation de la méthode utilisée

ETAPE 2.1: **COMPLETER LE WORKSPACE 2A (CONTEXTUALISATION ET ALIGNEMENT DU PIN AVEC LES DEFINITIONS DU IASC ET DU CLUSTER GLOBAL).**

Exercice : Parmi les éléments suivants, quels sont ceux qui répondent à la définition du PIN du IASC (choisissez tous ceux qui s'appliquent) ?

- Populations touchées par la crise, telles qu'identifiées dans le champ d'analyse de l'aperçu des besoins humanitaires.

- Les personnes en dessous du seuil de pauvreté non affectées par la crise, telles qu'identifiées dans le champ d'analyse de l'aperçu des besoins humanitaires.

- Les personnes dont la sécurité physique, les droits fondamentaux, la dignité, les conditions de vie ou les moyens de subsistance sont menacés ou ont été perturbés.

- Les personnes dont le niveau actuel d'accès aux services de base, aux biens et à la protection sociale est inadéquat pour rétablir des conditions de vie normales avec leurs moyens habituels dans un délai raisonnable sans assistance supplémentaire.

- Les personnes qui reçoivent déjà une assistance et qui ont besoin d'une aide humanitaire continue pour répondre à leurs besoins fondamentaux.

- Inclut toutes les personnes dans le besoin, que la réponse soit ou sera apportée par les gouvernements nationaux, la société civile ou tout autre acteur.

- Inclut les besoins actuels et les projections basées sur les tendances connues et les schémas saisonniers.

ETAPE 2.1: **COMPLETER LE WORKSPACE 2A (CONTEXTUALISATION ET ALIGNEMENT DU PIN AVEC LES DEFINITIONS DU IASC ET DU CLUSTER GLOBAL).**

ETAPE 2.1: **COMPLETER LE WORKSPACE 2A (CONTEXTUALISATION ET ALIGNEMENT DU PIN AVEC LES DEFINITIONS DU IASC ET DU CLUSTER GLOBAL).**

Exercice : Lesquels des éléments suivants correspondent à la définition du PiN "Nutrition en situation d'urgence" (choisissez tous ceux qui s'appliquent) ?

- Les enfants de 0 à 59 mois, les femmes enceintes et allaitantes et les autres groupes très vulnérables qui souffrent de malnutrition aiguë ou qui risquent de souffrir de malnutrition aiguë et qui vivent dans des zones touchées par une crise humanitaire telle que définie par le champ d'analyse.

- Tous les enfants souffrant de malnutrition aiguë et les FEFAs dans toutes les régions du pays, que la zone soit touchée par une crise ou non.

- Enfants de 0 à 59 mois, femmes enceintes et allaitantes et autres groupes très vulnérables souffrant de malnutrition aiguë ou risquant de souffrir de malnutrition aiguë et vivant dans des zones où le taux de malnutrition aiguë est supérieur au niveau d'urgence, en dehors des zones touchées par la crise, telles que définies dans le champ d'analyse.

Reference Table 2A: Sectoral PiN Interoperability

Cluster	Operational guidance for JIAF 2.0 People in Need
Nutrition	Children 0 to 59 months, Pregnant and Lactating Women, and other highly vulnerable groups[1] who are acutely malnourished or at risk[2] of becoming acutely malnourished who are: 1. in areas affected by the crisis[i] OR 2. in areas where acute malnutrition rate is above emergency level[3] **outside areas affected by the crisis as defined by the scope of analysis** 1 - Highly vulnerable groups are exceptionally considered and can include: people in high HIV prevalence context or also in contexts where there is extensive family where adults and elderly may also be affected. 2 - People at heightened risk of acute malnutrition includes 1) all those in camps or camp like settings, IDPs, vulnerable migrants and refugees 2) a subset of population who experience poor Infant and Child Feeding Practices, micronutrient deficiency, high morbidity, who are not covered through regular nutrition programs (Bi-Annual Vitamin A supplementation , 3 - Emergency level typically reflects GAM >=15% or GAM >=10% with aggravating factors

LA DEFINITION DU PIN PAR LE GNC/CRITERES D'INCLUSION

NC_Nutrition Humanitarian Needs Analysis Calculator [En,Fr,Sp]_V20230220.xlsm (live.com)

Population Figures

UNDER FIVE (

Admin 2 for "Affected" areas of interest	Admin 2 for "Affected" areas of interest	Admin 2 for "Affected" areas of interest	Admin 2 for "Affected" areas of interest	Population Figures	Children 0-59 months as percentage of total population, %	Girls 0-59 months as percentage of total population, %	Boys 0-59 months as percentage of total population, %	Children 0-5 months as percentage of total population, %	Girls 0-5 months as percentage of total population, %	Boys 0-5 months as percentage of total population, %
Use lower level of administrative areas (generall Admin 2) which reliable evidence is available	Use lower level of administrative areas (generall Admin 2) which reliable evidence is available	Use lower level of administrative areas (generall Admin 2) which reliable evidence is available	Use lower level of administrative areas (generall Admin 2) which reliable evidence is available	Provided by OCHA and/or government at country-level	Provided by OCHA and/or government at country-level	If available, provided by OCHA and/or government at country-level	If available, provided by OCHA and/or government at country-level	Provided by OCHA and/or government at country-level	If available, provided by OCHA and/or government at country-level	If available, provided by OCHA and/or government at country-level
			Badakhshan	2,958,374	16%	8%	8%	1.8%	1.0%	0.8%
			Badghis	1,542,806	15%			1.8%		
			Baghlan	2,836,525	16%			1.8%		
			Balkh	4,142,096	16%			1.8%		
			Bamyan	1,391,177	16%			1.8%		
			Dykundi	1,432,625	16%			1.8%		

ETAPE 2.3 : SOUMISSION DES RESULTATS POUR LE SECTEUR ET DOCUMENTATION DE LA METHODE UTILISEE

Q&R

MODULE II / ETAPE 2 : ANALYSE SECTORIELLE DE LA SEVERITE

2.1

2.2

2.3

ETAPE 2.1: Compléter le Workspace 2B, pour renseigner si la méthode utilisée dans le pays s'aligne sur les définitions du niveau global pour le même secteur, ou si des adaptations au contexte local sont nécessaires

Etape 2.2: Conception et mise en oeuvre de l'analyse sectorielle de la sévérité (utiliser l'outil du GNC pour l'analyse de la sévérité)

Etape 2.3: Soumission des résultats du secteur et documentation de la méthode utilisée

Si les indicateurs/seuils de référence du IASC et du GNC ne s'appliquent pas à votre contexte, fournissez une explication en remplissant l'espace de travail 2B

TOOLKITS

1.Contributing Factors & Scope
→ Context
→ Shocks and Impact
→ Scope

2.Sectoral Needs
→ PiN Interoperability
→ Severity Interoperability
→ Sectoral Methods and Outputs

3.Intersectoral Needs
→ PiN and Severity
→ Patterns & Linkages

→ Analysis Dashboard

→ Contact the JIAF Help Desk

Admin

Hello student!   Logout

Workspace 2B: Sectoral Severity Interoperability

Select if the country method fully aligns with global sectoral-specific definitions or requires adaptation to the local context.

Sector	1. Minor or no sectoral deprivation — Essential basic sectoral needs are met in the area		2. Borderline and Stressed sectoral deprivation — Area has stressed basic services and borderline inability to meet basic sectoral needs		3. Elevated Sectoral deprivations — Area has moderate strain on basic services and moderate inability to meet basic sectoral needs		4. Extreme sectoral deprivations — Area has high strain on basic services and/or extreme inability to meet basic sectoral needs		5. Sectoral Collapse — Area has a collapse of basic services and/or total inability to meet basic sectoral needs	
CCCM ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted
Education ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted
Food Security ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted
Health ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted
Nutrition ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted
Shelter/NFI ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted
Protection & AoRs ▦	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted	Aligned	Adapted

Vérifier si les indicateurs et les seuils de sévérité au niveau national s'alignent sur le tableau de référence de la classification de la sévérité du GNC. Contextualiser si nécessaire en consultation avec les partenaires.

UTILISER LA CLASSIFICATION DE LA SEVERITE DE L'IPC, SI L'ANALYSE IPC EST RECENTE

Reference Table 2B: Sectoral Severity Interoperability

Phases for area-based classification General description	1. Minor or no sectoral deprivation Essential basic sectoral needs are met in the area	2. Borderline and Stressed sectoral deprivation Area has stressed basic services and borderline inability to meet basic sectoral needs	3. Elevated Sectoral deprivations Area has moderate strain on basic services and moderate inability to meet basic sectoral needs	4. Extreme sectoral deprivations Area has high strain on basic services and/or extreme inability to meet basic sectoral needs	5. Sectoral Collapse Area has a collapse of basic services and/or total inability to meet basic sectoral needs
Nutrition Cluster	Minimal level acute malnutrition among children under five (< 5 % of children are acutely malnourished), Minimal risk of mortality(<1 child deaths/10000), and /or Optimal level infant and child feeding practices among children 0-23 months ≥70% of infants 0-5 months Are exclusively breastfed. ≥70% Minimum Dietary Diversity in children 6 to 23 months.	Poor level of acute malnutrition among children under five(5-9.9 % children are acutely malnourished), Minimal risk of mortality (<1 child death/10000), AND/OR Suboptimal level infant and child feeding practices among children 0-23 months. 50-70% of infants 0-5 months are exclusively breastfed. 40-70% Minimum Dietary Diversity in children 6 to 23 months.	Severe level of acute malnutrition among children under five (10-14.9 % of children are acutely malnourished), Worsening child mortality(1-1.9 child deaths/10000, AND /OR Worsening Sub optimal level infant and child feeding practices among children 0-23 months 30-50% of infants 0-5 months are exclusively breastfed. 20-39% Minimum Dietary Diversity in children 6 to 23 months.	Critical level acute malnutrition among children under five (15-29.9 % children are acutely malnourished), Above emergency level child mortality(2-3.9 child deaths/10000), AND /OR Poor infant and child feeding practices among children 0-23 months 11-30% of infants 0-5 months are exclusively breastfed. 10-19% Minimum Dietary Diversity in children 6 to 23 months.	Extremely Critical level of acute malnutrition among children under five (30% or more children are acutely malnourished), Extremely critical risk of mortality(>4 child deaths/10000), AND/OR Extremely poor infant and child feeding practices among children 0-23 months <11% of infants 0-5 months are exclusively breastfed. <10% Minimum Dietary Diversity in children 6 to 23 months.

Classification Thresholds for Core Indicators

Category	Alignment with IPC AMN framework	Outcome Indicator Name/label	Severity Scale based on IPC/OCHA phases					Sources
			Phase 1 Acceptable/ Minimal	**Phase 2** Alert/ Stress	**Phase 3** Serious/ Severe	**Phase 4** Critical/ Extreme	**Phase 5** Extremely Critical/ Catastrophic	
Primary Outcomes	Acute and chronic malnutrition	Prevalence of Global Acute Malnutrition (GAM) based on weight for height Z-score (WHZ)<-2 and/or bilateral pitting oedema among children 0-59 months (if no data, use 6-59 months)	<5%	5-9.9%	10-14.9%	15-29.9%	≥30%	Based on IPC AM Malnutrition Version 3 Guidance
		Prevalence of Global Acute Malnutrition (GAM) based on Mid-Upper Arm Circumference (MUAC) <125mm and/or bilateral pitting oedema among children 6-59 months	<5%	5-9.9%	10-14.9%	≥15%		*Preliminary thresholds* suggested by IPC Acute Malnutrition Version 3 guidance
		Prevalence of Global Acute Malnutrition (GAM) based on Mid-Upper Arm Circumference (MUAC)<210-230 (depending on the contexts) and/or bilateral pitting oedema among PLW	<12.5%	12.6%-19.9%	20-24.9%	25-34.9%	≥35%	*Preliminary thresholds* based on Somalia's Food Security and Nutrition Analysis
		Prevalence of stunting based on height-for-age Z-score (HAZ)<-2 among children 0-59 months	<10%	10-19.9%	20-29.9%	≥30%		De Onis et al (2018) Prevalence thresholds for wasting, overweight, and stunting
Contextual Factors* *optional depending on the humanitarian situation*	Other causes	Prevalence of overweight based on weight for height Z-score (WHZ)>2 among children 0-59 months	<2.5%	2.5-4.9%	5-9.9%	10-14.9%	≥15%	De Onis et al (2018) Prevalence thresholds for wasting, overweight, and stunting
	Acute malnutrition	Prevalence of Global Acute Malnutrition (GAM) based on Mid-Upper Arm Circumference (MUAC)<210mm among Older People	<5%	5-9.9%	10-14.9% OR 5-9.9%*	≥15% OR 10-14.9%*		Based on HelpAge's Nutrition Interventions for Older People in Emergencies
		Prevalence of Global Acute Malnutrition (GAM) based on BMI-for-Age Z-Score<-2 among Adolescents	<2.5%	2.5-4.9%	5-9.9%	10-14.9%	≥15%	*Preliminary thresholds* suggested by Taskforce and NISWG
	Micronutrient deficiencies	Prevalence of anemia Hb <11g/dl in children 6-59 months	<5%	5-19.9%	20-39.9%	≥40%		WHO (2011) Haemoglobin concentrations for the diagnosis of anaemia and as...
		Prevalence of anemia Hb <11g/dl in pregnant women	<5%	5-19.9%	20-39.9%	≥40%		WHO (2011) Haemoglobin concentrations for the diagnosis of anaemia and as...
	Mortality indicators	Crude Death/Mortality Rate (deaths/ 10,000 persons/ day)	<0.5		0.5-0.9	1-1.9	≥2	Based on IPC AM Malnutrition Version 3 Guidance
		Under-five Death/Mortality Rate (deaths/ 10,000 children U5/ day)	<1		1-1.9	2-3.9	≥4	Based on IPC AM Malnutrition Version 3 Guidance
	Immediate causes (Food consumption)	Minimum Dietary Diversity in children 6 to 23 months	≥70%	40-70%	20-40%	10-20%	<10%	*Preliminary thresholds* suggested by IFE Core Group
		Minimum Acceptable Diet in children 6 to 23 months* *Requires *Minimum Meal Frequency in children 6-23 months* to be derived	≥70%	40-70%	20-40%	10-20%	<10%	*Preliminary thresholds* suggested by IFE Core Group
		Exclusive breastfeeding for infants 0-5 months	≥70%	50-70%	30-50%	11-30%	<11%	Thresholds adapted from UNICEF Breastfeeding score cards
	Underlying causes (Caring and feeding practices)	Infants 0-5 months that are not breastfed who have access to Breast Milk Substitutes (BMS) supplies and support in line with the Code and the IFE OG standards and recommendations	≥60%	40-60%	20-40%	10-20%	<10%	*Preliminary thresholds* suggested by IFE Core Group
		Infants 6-11 months that are not breastfed who have access to Breast Milk Substitutes (BMS) supplies and support in line with the Code and the IFE OG standards and recommendations	≥60%	40-60%	20-40%	10-20%	<10%	*Preliminary thresholds* suggested by IFE Core Group

ETAPE 2.2: CONCEPTION ET MISE EN OEUVRE DE L'ANALYSE SECTORIELLE DE LA SÉVÉRITÉ (UTILISER L'OUTIL DU GNC POUR L'ANALYSE DE LA SÉVÉRITÉ)

▪NC_Nutrition Humanitarian Needs Analysis Calculator [En,Fr,Sp]_V20230220.xlsm (live.com)

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ETAPE 2.3 : SOUMISSION DES RESULTATS POUR LE SECTEUR ET DOCUMENTATION DE LA METHODE UTILISEE

Q&R

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MODULE III/ETAPE 3 : ESTIMATION INTERSECTORIELLE DU PIN

1

2

3

4

Etape 3.1 OCHA prepare les espaces de travail/workspace 3A, 3B et 3C

Etape 3.2 Les secteurs examinent les workspaces et revoient/corrigent les alertes (flags) avant l'atelier conjoint

Etape 3.3: Les secteurs présentent les résultats et discutent des alertes (possibilité en option d'un temps supplémentaire pour revoir les premiers résultats d'analyse)

Etape 3.4: Se mettre d'accord conjointement sur un PIN global pour les zones présentant une alerte/un flag

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MODULE III/ETAPE 3 : ESTIMATION DU PIN INTERSECTORIEL – ALERTES/FLAGS

Reference Table 3B1: Flags for Inconsistency of Preliminary Severity

Flag Number	Flag Description	Recommended Threshold
1	# Sectors with missing or zero PiN	1 or 2
2	% difference between 1st and 2nd highest PiN	30%
3	% difference between 1st and 3rd highest PiN	50%
4	Highest sector PIN targets sub-population group(s)	50%
5	PiN greater than 90% of total affected population	90%
6	Change from last year	100%
7	Manual Flag	Explaination to be provided at country level

Admin Units	WASH	FSL	Education	Nutrition	Protection	FLAG
Demsa	25000	32000	11000	0	0	1
Fufore	20000	50000	10000	5000	12000	2 &3
Ganye	20000	22000	10000	8000	12000	
Girei	11000	13000	9000	6000	12000	

ESTIMATION CONJOINTE DU PIN POUR LES ZONES AYANT UNE ALERTE

Admin Units	WASH	FSL	Education	Nutrition	Protection	INTERSECTORAL PIN
Demsa	25000	32000	11000	8000	11000	32,000
Fufore	20000	50000	10000	5000	12000	50,000
Ganye	20000	22000	10000	8000	12000	22,000
Girei	11000	13000	9000	6000	12000	13,000

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MODULE III/ETAPE 3 : ANALYSE INTERSECTORIELLE DE LA SEVERITE

1

Etape 3.2 Les secteurs examinent les workspaces et revoient/corrigent les alertes (flags) avant l'atelier conjoint

2

Etape 3.3: Les secteurs présentent les résultats et discutent des alertes (possibilité en option d'un temps supplémentaire pour revoir les premiers résultats d'analyse)

3

Etape 3.5: Conduire conjointement une analyse de la sévérité intersectorielle pour les zones présentant une alerte/un flag

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MODULE III/ETAPE 3 : SEVERITE INTERSECTORIELLE

Reference Table 3B2: Intersectoral Severity Classification

Severity Scale		1 - Minimal	2 - Stressed	3 - Severe	4 - Extreme	5 - Catastrophic
General Description	Area Level Description	People are able to meet essential basic needs for survival, protection and dignity without engaging in atypical and unsustainable livelihood strategies.	Area has: Deterioration of physical or mental wellbeing Sporadict threats to human rights and/or use of stress coping strategy Stressed basic services and borderline inability to meet basic sectoral needs	Area has: Elevated and increasing deterioration of physical or mental wellbeing and human rights, AND Regulat threats to human rights and/or accelarated erosion of strategies and/or assets, AND Moderate strain on basic services and moderate inability to meet basic needs for survival, protection, and dignity.	Area has: Elevated mortality or risk of death, AND Widespread violations of human rights and/or unsustainable reliance on negative coping strategy, AND High strain on basic services and/or extreme inability to meet basic needs for survival, protection, and dignity.	Area has: Widespread mortality or risk of death, AND Widespread and systemic violations of human rights and/or exhaustion of coping options and mechanisms, AND Collapse of basic services and/or total inability to meet basic needs for survival, protection, and dignity.
rian Condition s	Life-threatening conditions (actual or risk of death)	Death or Imminent Risk of Death: 1) Crude Death Rate[1]: <0.5/10,000/day OR 2) Under-Five Death Rate: <1/10,000/day OR 3) Civilian casualty, injury, abduction or disappearance from conflict, violence or natural hazards: <0.5/10,000/day	Death or Imminent Risk of Death 1) Crude Death Rate: <0.5/10,000/day OR 2) Under-Five Death Rate: <1/10,000/day 3) Civilian casualty, injury, abduction or disappearance from conflict, violence or natural hazards: <0.5/10,000/day	Death or Imminent Risk of Death Crude Death Rate: 0.5-0.99/10,000/day OR Under-Five Death Rate: 1-2/10,000/day OR Civilian casualty, injury, abduction or disappearance from conflict, violence or natural hazards: 0.5-0.99/10,000/day OR any rate > than usual	Death or Imminent Risk of Death Crude Death Rate: 1.0-1.99/10,000/day Under-Five Death Rate: 2-3.99/10,000/day Civilian casualty, injury, abduction or disappearance from conflict, violence or natural hazards: 1.0-1.99/10,000/day OR any rate > 2x rate	Death or Imminent Risk of Death Crude Death Rate: ≥2/10,000/day Under-Five Death Rate: ≥4/10,000/day Civilian casualty, injury, abduction or disappearance from conflict, violence or natural hazards: >2/10,000/day OR any rate much greater than doubling of baseline
		Global Acute Malnutrition: Weight for heigh z-score (WHZ) <5% OR Middle Upper Arm	Global Acute Malnutrition WHZ: 5-9.9% OR MUAC: <5%	Global Acute Malnutrition WHZ: 10-14.9% OR MUAC: 5-15%	Global Acute Malnutrition WHZ: 15-29.9% OR MUAC: <10%	Global Acute Malnutrition WHZ: 30% or higher OR MUAC: >15%

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Reference Table 3B1: Flags for Preliminary Intersectoral Severity

Flag Number	Flag Description
1	Any sector is in Severity Phase 5
2	One outcome indicator is +2 / -2 compared to preliminary classification
3	Two or more outcome indicators are +1 / -1 compared to preliminary classification
4	More than 4 sectors are in Phase 4 and preliminary intersectoral severity is Phase 4
5	Manual Flag (description to be provided at country level)

* Alignment between preliminary severity and outcomes indicators occurs when the more severe indicator of life threatning and the more severe indicator of irreversible harm are both at least one Phase different than preliminary classification

MODULE III/ETAPE 3 : SEVERITE INTERSECTORIELLE

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MODULE III/ETAPE 3 : SEVERITE INTERSECTORIELLE

Admin Units	WASH	FSL	Education	Health	Nutrition	Protection	Preliminary intersectoral severity	Flags/Alertes	Sévérité intersectorielle finale (après discussion des experts sur les flags - exemples)
Demsa	3	3	3	5	4	2	5	Flag 1	5
Fufore	3	5	3	3	3	3	5	Flag 1	4
Ganye	4	4	3	4	3	4	4	Flag 4	4
Sanga	4	4	3	3	3	3	3	Pas de flag	3
Fayar	4	4	4	4	4	4	3	Flag 3, 5	4
Rewe	2	3	2	4	2	2	2	Pas de flag	2

MODULE III/ETAPE 3 : SCHEMAS, LIENS, TENDANCES

IDENTIFIER LES TENDANCES, SCHEMAS, LIENS ET LEURS IMPLICATIONS OPERATIONNELLES

1

2

3

Etape 3.1 OCHA prepare les espaces de travail/workspace 3A, 3B et 3C

Etape 3.2 Les secteurs examinent les workspaces et revoient/corrigent les alertes (flags) avant l'atelier conjoint

Etape 3.6: Identication des schemas, liens et tendances des besoins humanitaire

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MODULE III/ETAPE 3 : CONVERGENCES ET LIENS INTERSECTORIELS

L'EQUIPE D'ANALYSE UTILISE LES QUESTIONS SUIVANTES POUR IDENTIFIER LES SCHEMAS ET INTERPRETER LES OBSERVATIONS:

- **Ou sont les zones avec le plus de besoins?**

- **Quels sont les secteurs qui ont le plus de besoins par zone identifiée?**

- **Ou est le plus grand/petit chevauchement de PIN et sévérités sectoriels?**

- **Quels sont les zones qui ont les plus hauts PIN et les plus grandes sévérités?**

Ainsi que tout autre question pertinente pour la prise de décisions informées
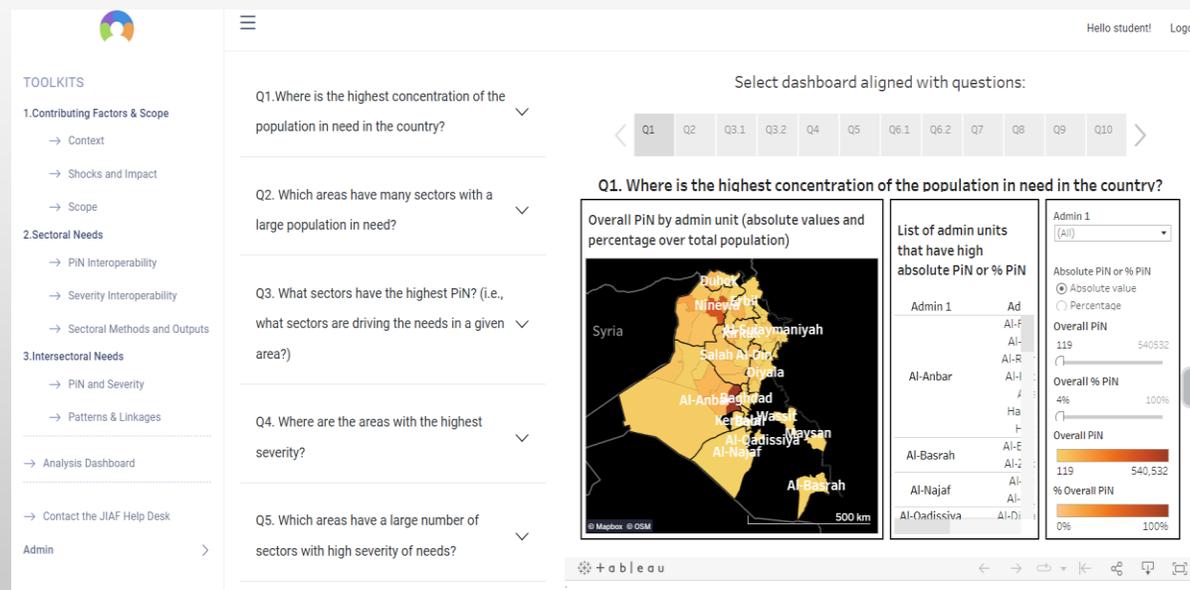
Q&R

SOUTIEN DU GNC

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REMPLIR LE FORMULAIRE DE DEMANDE DE SOUTIEN

CREATE REQUEST FORM | GLOBAL NUTRITION CLUSTER: TECHNICAL ALLIANCE

RESSOURCES

- NUTRITION HUMANTERIAN NEEDS ANALYSIS GUIDANCE

- GNC CROSS_CUTTING CHECKLIST

- HPC 2024 FACILITATION PACKAGE FACILITATION PACKAGE – HUMANITARIAN PROGRAMME CYCLE (HPC.TOOLS)

- JIAF 2.0 MANUAL

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