



SUDAN MULTI-SECTOR NEEDS ASSESSMENT (MSNA)

Sectoral Key Findings: Food Security & Livelihoods,
Nutrition

3 December 2020



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01

Overview of the MSNA

A person wearing a dark vest with 'REACH' and 'An Initiative of INTERAG PROGRAMS' printed on the back, standing in a crowded outdoor area with many cars and people in the background. The scene is dimly lit, possibly at dusk or dawn.

Background

Objectives of the MSNA

- The MSNA seeks to understand **multi-sectoral priority humanitarian needs** of populations and localities across the whole of Sudan.
- The findings intend to **provide timely updates** on key sectoral needs and priorities in order to **inform humanitarian response** and strategic programming for non-displaced, IDP and refugee households.
- The 2020 MSNA **aims to inform the 2021 Humanitarian Needs Overview (HNO) and the 2021 Humanitarian Response Plan (HRP)**.
- Contribute to a more **targeted and evidence-based** humanitarian response.

Coordination framework

Design



Coordination

National Assessment Task Team (NATT)



Partners



AND ADRA, Altawaki, ARC, CDF, CIS, DPI, DRC, EDCO, GPA, IRW, JMCO, Maarif, NaHA, NCA, NIDAA, NRC, NuWEDA, Plan International, SMOH, SOS Sahel, SRCS, UNHCR, UNICEF, VNRHD, WDECO, WFP, WHH, World Relief, ZOA

Donors



REACH Informing
more effective
humanitarian action

Quick guide to the versions of the MSNA HH survey dataset

Rationale: Versions 1 and 2 released to aid in the writing of the HNO and HRP

	Version 1	Version 2	Version 3
Date circulated	12 September	6 October	1 December
Dates of data collection	HH surveys: 16 August-7 September	HH surveys: 16 August-27 September	HH surveys: 16 August-27 October
Geographic coverage	HH surveys: 12 states and 36 localities	HH surveys: 17 states and 120 localities, plus Abyei PCA	HH surveys: 18 states and 165 localities, plus Abyei PCA
Number of surveys	HH surveys: 2,508	HH surveys: 9,003	HH surveys: 13,769
Criteria for including a stratum	HH surveys: $\geq 80\%$ of the original sample quota, ≥ 30 surveys, and surveys validated	HH surveys: $\geq 80\%$ of the original sample quota, ≥ 30 surveys, and surveys validated	HH surveys: $\geq 90\%$ of the original sample quota and surveys validated



02

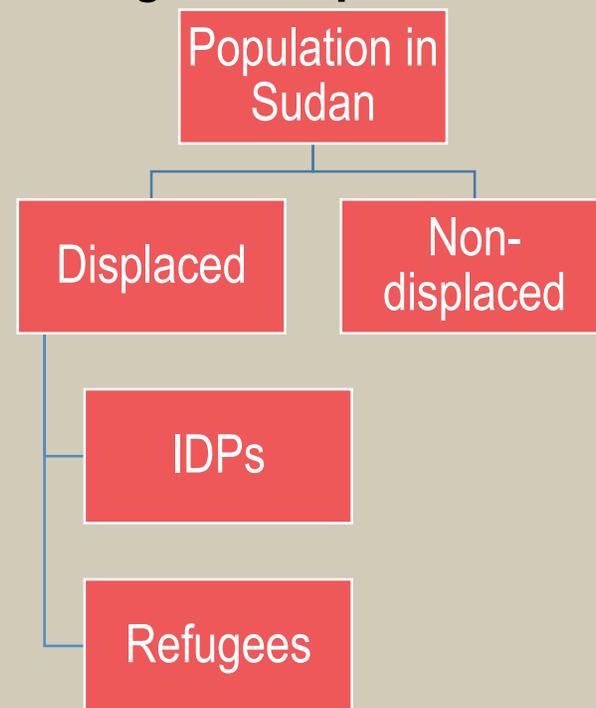
Scope and Coverage

Geographic and demographic scope

Geographic Scope

- Nation-wide
- All 18 states, 184 localities
 - In South Kordofan, 3 localities excluded
 - In Blue Nile, only government-controlled portions of localities included
 - In White Nile, Kosti excluded due to lack of partner
- Plus Abyei PCA

Targeted Populations





**Thematic
scope**



Food Security & Livelihoods



Health



Nutrition



WASH



Emergency Shelter & NFIs



Protection (including CP, GBV, HLP, and MA)



Education



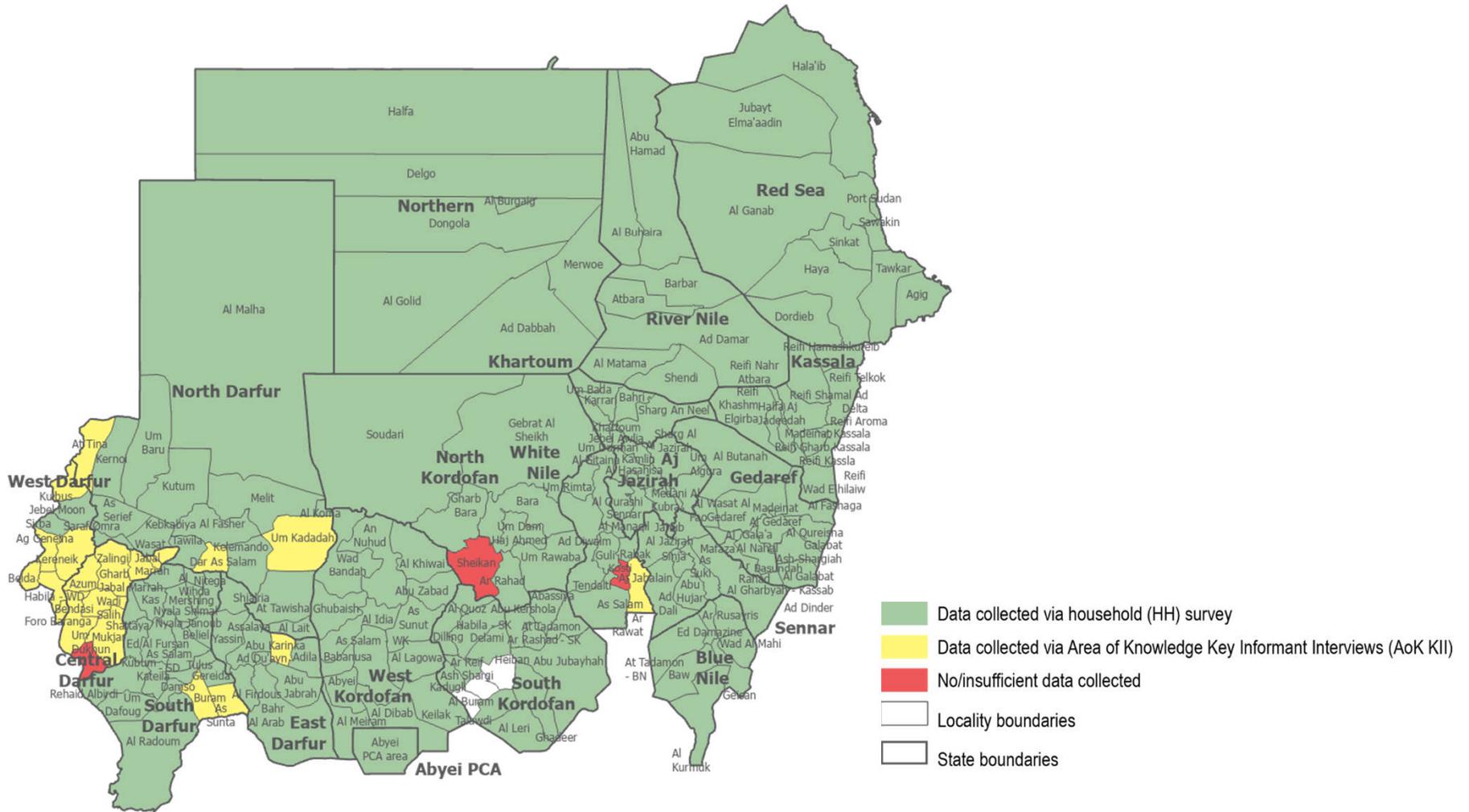
Accountability to Affected
Populations

Data collection by the numbers

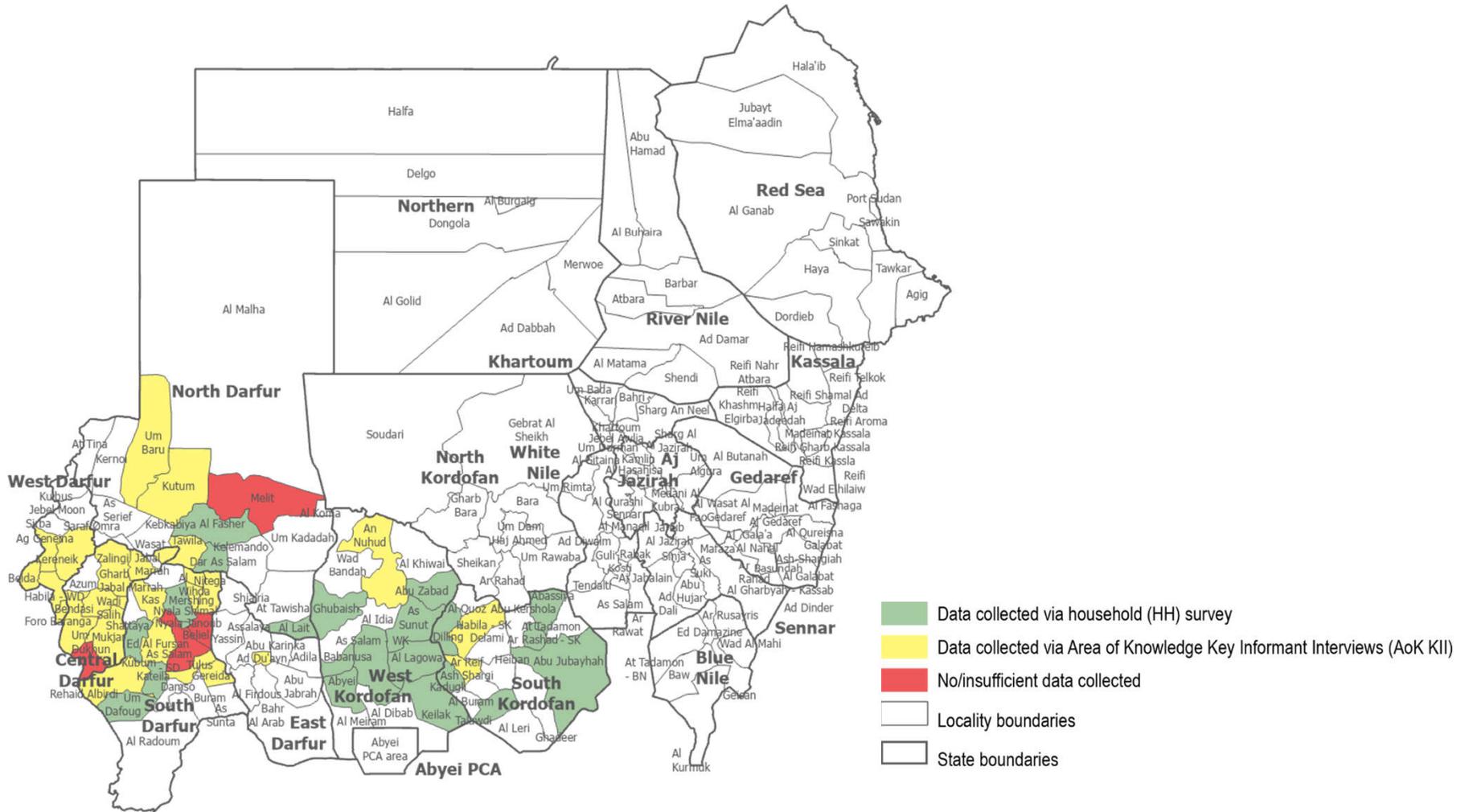
- Data was collected using both **household (HH) surveys** and **Area of Knowledge Key Informant Interviews (AoK KIIs)**.
- Initial target collection targets were ambitious. In the end, almost all non-displaced and IDP strata were completed. However, only about a third of refugee strata were completed.

Population group	# of strata	Completed with HH surveys	Completed with AoK KIIs	Total completed
Non-displaced	186	162 (87%)	22 (12%)	184 (99%)
IDPs	52	22 (42%)	28 (54%)	50 (96%)
Refugees	84	22 (26%)	5 (6%)	27 (32%)
Total	322	206 (64%)	55 (17%)	261 (81%)

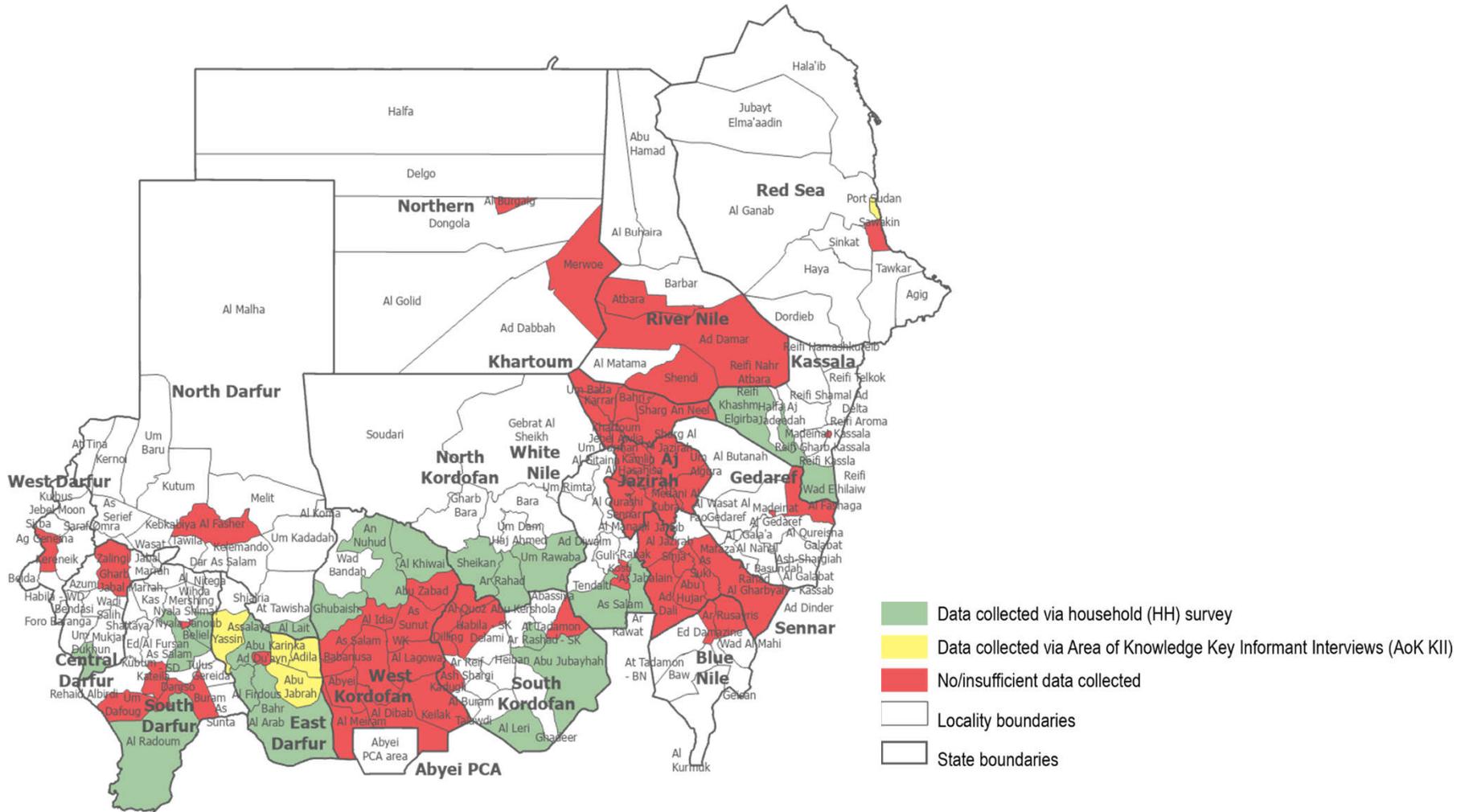
Details of non-displaced population coverage



Details of IDP population coverage



Details of refugee population coverage





03

Methodology

Sampling methods

Household surveys (HH surveys)

- Non-representative, snowball quota sampling
- Stratum = Population group in a specific locality
- Data collection targets determined proportionally, based on population size, with ≥ 33 HH surveys (30 + 10% buffer) per stratum
- Data collected via phone and face-to-face
- Data collection ran from 16 August-27 October
- Final total: 13,769 HH surveys
- Strata-specific sampling weights applied to data when calculating results

Area of Knowledge Key Informant Interviews (AoK KIIs)

- AoK KIIs were conducted for strata which could not be covered by HH surveys (e.g. due to partner capacity)
- Purposive sampling
- AoK KIIs selected on the basis of their recent knowledge of humanitarian conditions for the targeted stratum
- Minimum of 3 AoK KIIs per stratum
- Data collected via phone and face-to-face
- Data collection ran from 27 October-26 November
- Final total: 196 AoK KIIs

A person wearing a grey vest with the REACH logo and the text 'AN EVALUATION OF IMPACT TRAINING ACTION FOR URBAN' is seen from behind in a field setting. The vest is the central focus, with the REACH logo prominently displayed. The background shows a group of people and a white car, suggesting a field or community setting.

Limitations (1 of 2)

Sampling approach

- **Results indicative, not representative:** Findings should be considered as indicative only, due to the applied non-probability sampling.
- **Limited comparability of HH survey and AoK KII data:** HH survey and AoK KII results cannot be directly compared since they were conducted using different sampling approaches. Comparison between the results of the two datasets should be qualitative (i.e., through narrative) only.

Geographic coverage

- **<100% geographic coverage:** <100% of the strata in the original sampling frame for all 3 population groups are covered in the final dataset. Refugee coverage was especially low, with only 32% of the original strata covered. This limits the extent to which findings can be considered indicative for the population groups as a whole, or for the country as a whole.
- **NSAG-controlled areas excluded:** NSAG-controlled portions of South Kordofan and Blue Nile were excluded.

A person wearing a grey vest with the REACH logo and the text 'AN INSTITUTE OF IMPACT TRAINING ACTED VIA UNHCR' is seen from behind in a field setting. The vest is the central focus, with the REACH logo prominently displayed. The background shows a blurred scene of people and a white car, suggesting a humanitarian or field environment.

Limitations (2 of 2)

Data collection period

- **Long data collection period:** Data collection started in August and ended in November. Since certain indicators (e.g., problems with drinking water) may fluctuate seasonally, their data was likely affected by the relatively long data collection period.

Data collection methods

- **Potential respondents limited by phone-based data collection:** Some of the HH survey and AoK KII data was collected via phone, as a way of reducing COVID-related risks. However, using phone-based data collection may have excluded some vulnerable HHs or individuals (e.g., women) that do not have access to a phone (theirs or borrowed) and/or who live in an area without mobile network coverage.

Final dataset

- **Female respondents under-represented:** Only 27% of all HH survey respondents and 4% of AoK KII respondents were female.
- **Inaugural MSNA:** As this was the first-ever Sudan MSNA, it was not possible to compare the data to previous years’.



04

Key Findings: Demographics

Demographics of surveyed households (1 of 2)

7

Median HH size

3

Median children per HH

43 years

Median age of Head of HH

85%

Of respondents were
Head of HH

% of HHs that were female-headed

Overall
21%

Non-displaced
20%

IDP*
43%

Refugee*
37%

*Limited sample

Demographics of surveyed households (2 of 2)

27%

Of HHs overall had ≥ 1 member who has difficulty seeing, hearing, speaking, walking, climbing steps, taking care of themselves (e.g., washing), remembering or concentrating

% of HHs with at least one **child** under the age of 18 who is **not living with the HH**

Overall	Non-displaced	IDP*	Refugee*
3%	3%	5%	12%

*Limited sample

Settlement type by population group

Population group	City	Village	Camp	Informal settlement	Other
Overall	58%	38%	3%	0%	1%
Non-displaced	60%	39%	0%	0%	1%
IDP*	19%	19%	57%	3%	2%
Refugee*	8%	2%	82%	8%	0%

*Limited sample

Displacement

Top 3 IDP HH states of origin

1. North Darfur (61%)
2. South Kordofan (21%)
3. South Darfur (11%)

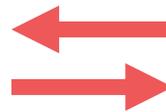
Refugee HH countries of origin

1. South Sudan (75%)
2. Eritrea (23%)
3. Central African Republic (1%)
4. Other (1%)
5. Ethiopia (<1%)

84% of refugee HHs have a UNHCR refugee ID card

7%

Of **non-displaced** HHs were returnees



93%

Of **non-displaced** HHs had not experienced displacement since 2003

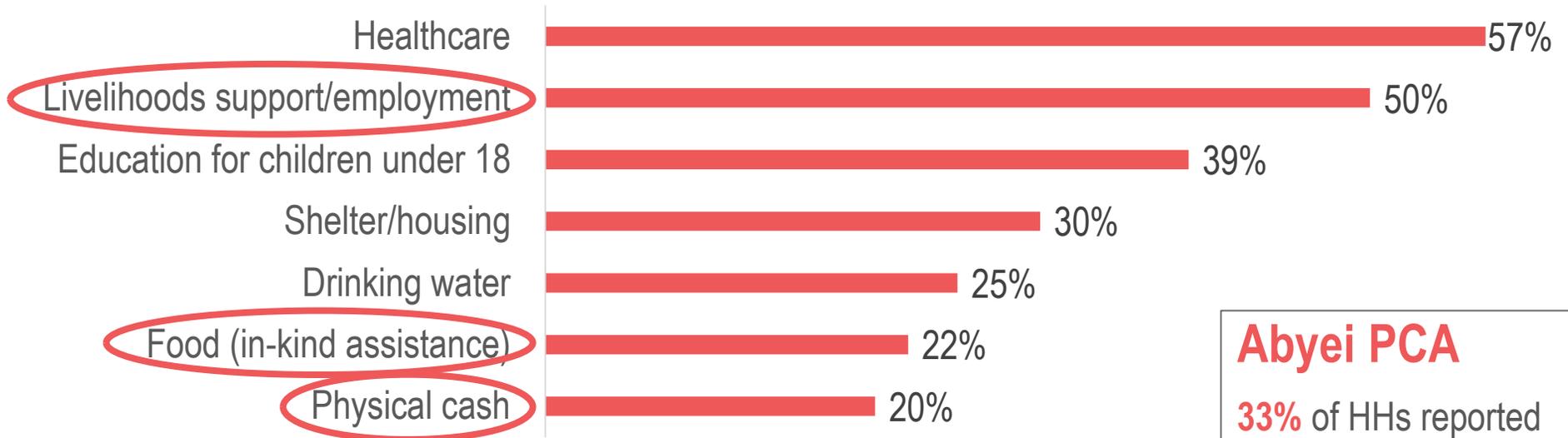


05

Key Findings:
Self-reported
Needs

Self-reported FSL needs

% of HHs overall by top 7 self-reported priority needs
(HHs selected their top 3)



Top 5 states

% of HHs overall with 'livelihoods support' among their top 3 priority needs

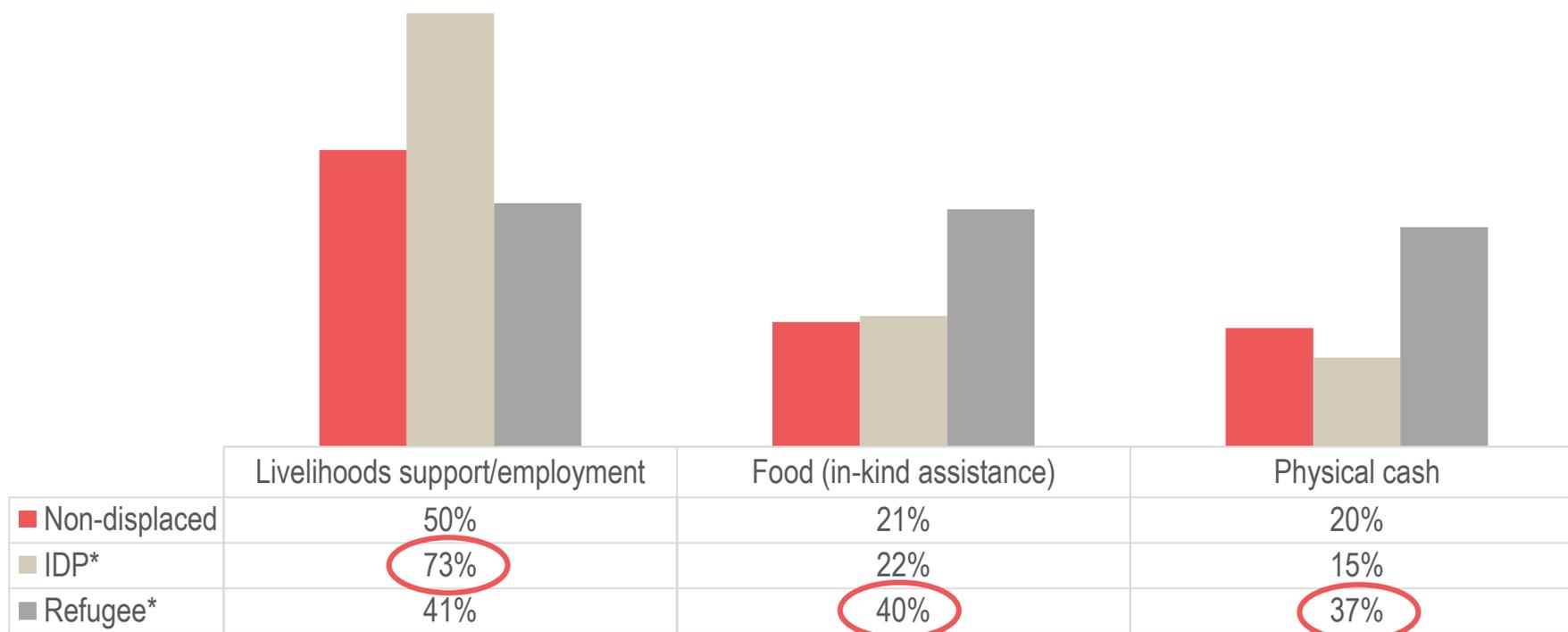
1. North Darfur (63%)
2. East Darfur (56%)
3. White Nile (54%)
4. Sennar (54%)
5. West Darfur (53%)

Abyei PCA

33% of HHs reported 'livelihoods support,' 27% reported 'food' and 33% reported 'physical cash' to be among their top 3 priority needs

Breakdown of top 3 FSL self-reported needs by population group

% of HHs by top 3 FSL self-reported priority needs, by population group (HHs selected their top 3)



*Limited sample



06

Key Findings: Shocks

Household shocks in the 6 months prior to data collection

76%

Of HHs overall experienced a shock in the 6 months prior to data collection

Non-displaced **(76%)** IDP* **(91%)** Refugee* **(68%)**

Among HHs that experienced a shock in the 6 months prior to data collection,

52%

of HHs overall sold assets to cope with this shock

Non-displaced **(52%)** IDP* **(61%)** Refugee* **(37%)**

*Limited sample

Abyei PCA **(81%)**

Breakdown by type of shock(s) and population group

Among HHs that experienced ≥ 1 shock in the 6 months prior to data collection, top 8 types of shocks (HHs could select multiple)	Overall	Non-displaced	IDP	Refugee
Unusually high food prices	69%	69%	82%	61%
COVID-19 (i.e., any shock related to COVID)	54%	55%	45%	36%
Reduced income of any household member	53%	53%	65%	53%
Unusually high prices of fuel/transport and other non-food prices	23%	23%	25%	12%
Loss of or reduced employment for any household member	22%	21%	32%	43%
Too much rain, flooding	11%	11%	6%	8%
Serious illness (other than COVID-19) or accident resulting in injury for any household member	4%	4%	4%	11%
Insecurity/violence/raiding/looting	3%	3%	11%	2%

*Limited HH survey sample



07

Key Findings:
Income &
Expenditures

Challenges obtaining enough money to meet household needs in the 30 days prior to data collection

80%

Of HHs overall faced challenges in obtaining enough money to meet their needs in the 30 days prior to data collection

Non-displaced **(80%)** IDP* **(98%)** Refugee* **(84%)**

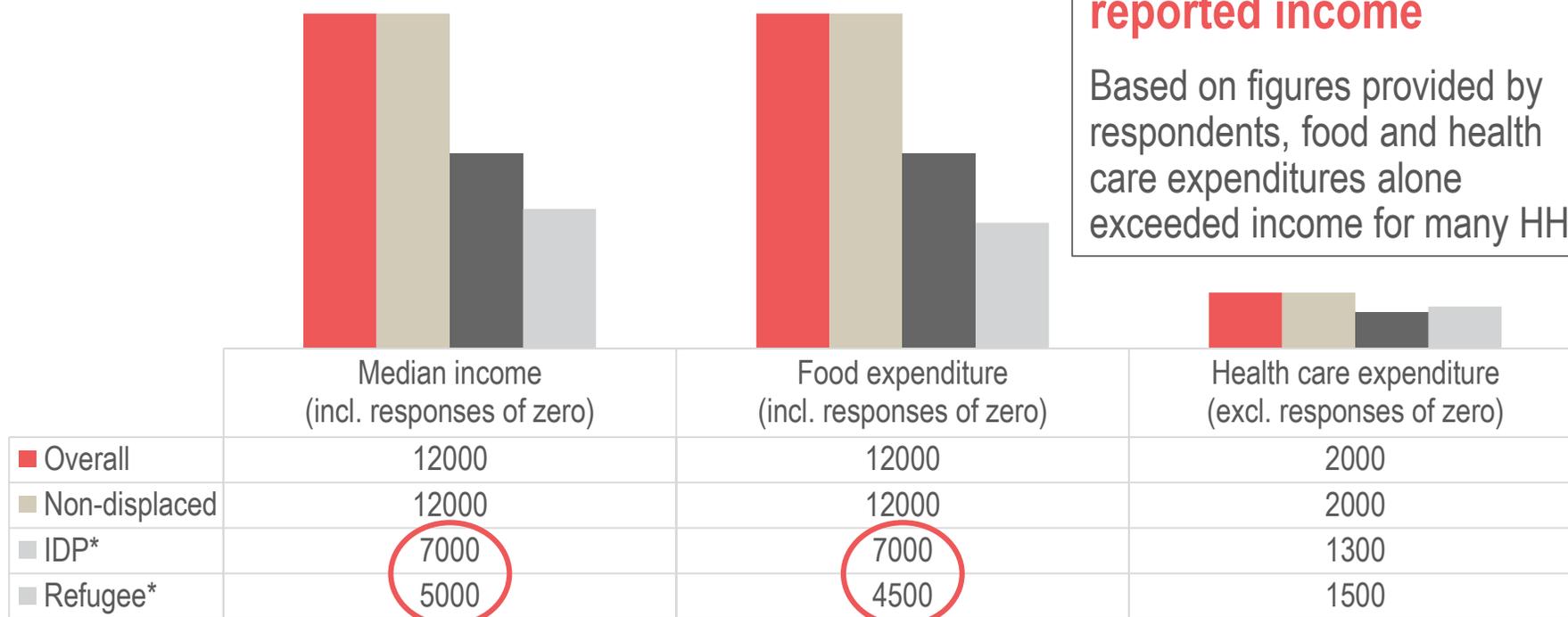
Abyei PCA **(91%)**

*Limited sample

Income and expenditures in the 30 days prior to data collection, broken down by population group

Median income, food expenditure and health care expenditure in the 30 days prior to data collection, by population group
(All figures are in SDG)

Expenditures exceed reported income
Based on figures provided by respondents, food and health care expenditures alone exceeded income for many HHs



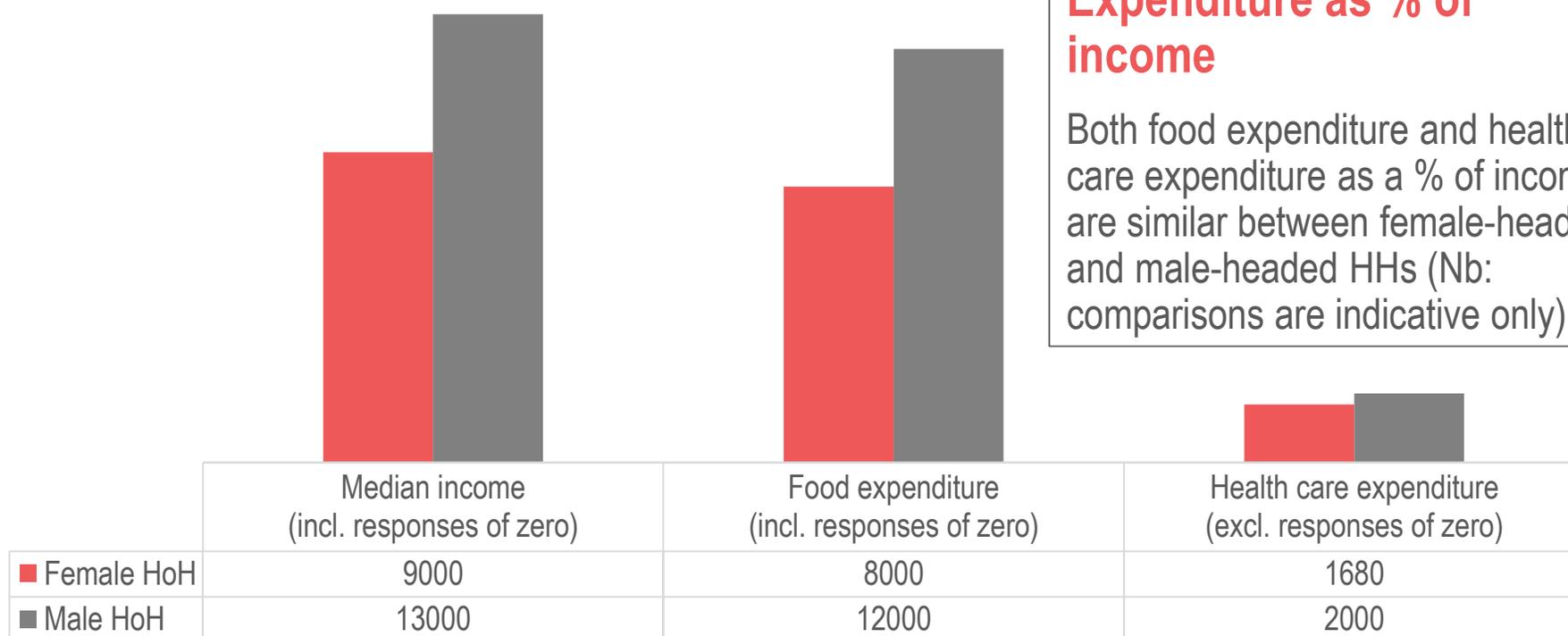
*Limited sample

Income and expenditures in the 30 days prior to data collection, broken down by head of household gender

Median income, food expenditure and health care expenditure in the 30 days prior to data collection, by HoH gender
(All figures are in SDG)

Expenditure as % of income

Both food expenditure and health care expenditure as a % of income are similar between female-headed and male-headed HHs (Nb: comparisons are indicative only)



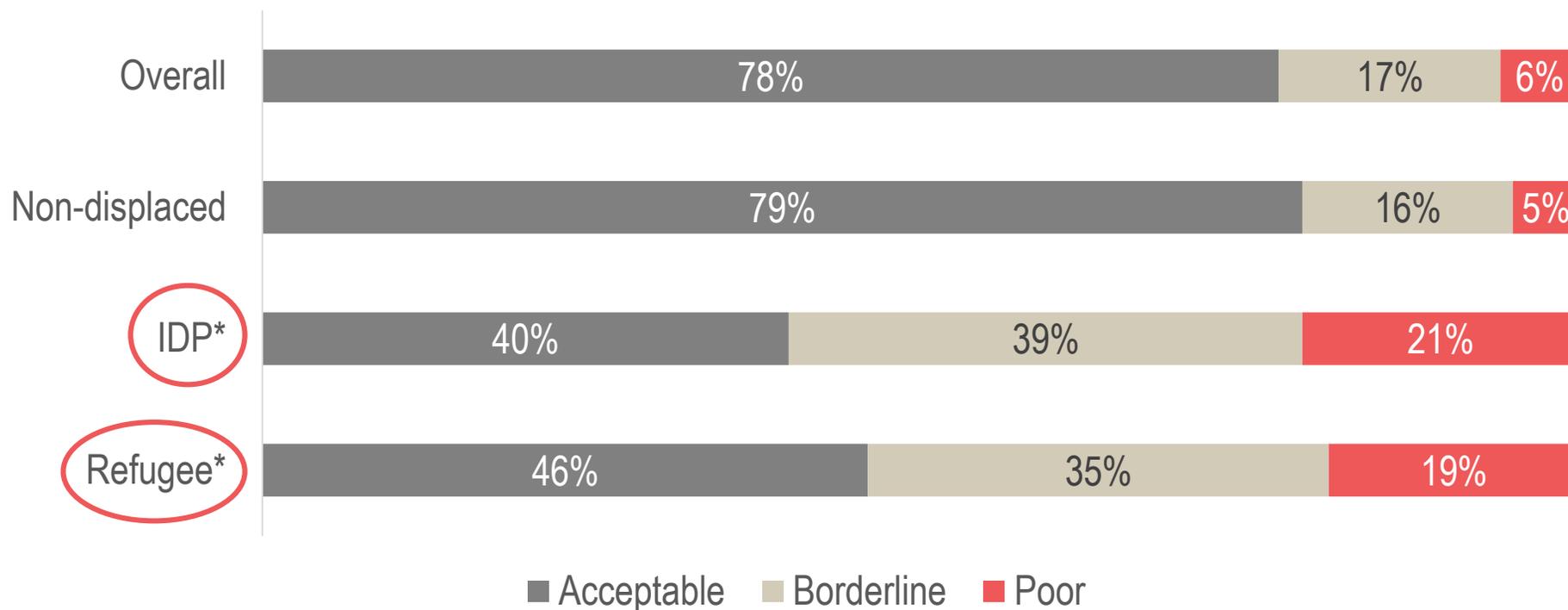


08

Key Findings:
FCS & rCSI

Food Consumption Score, broken down by population group

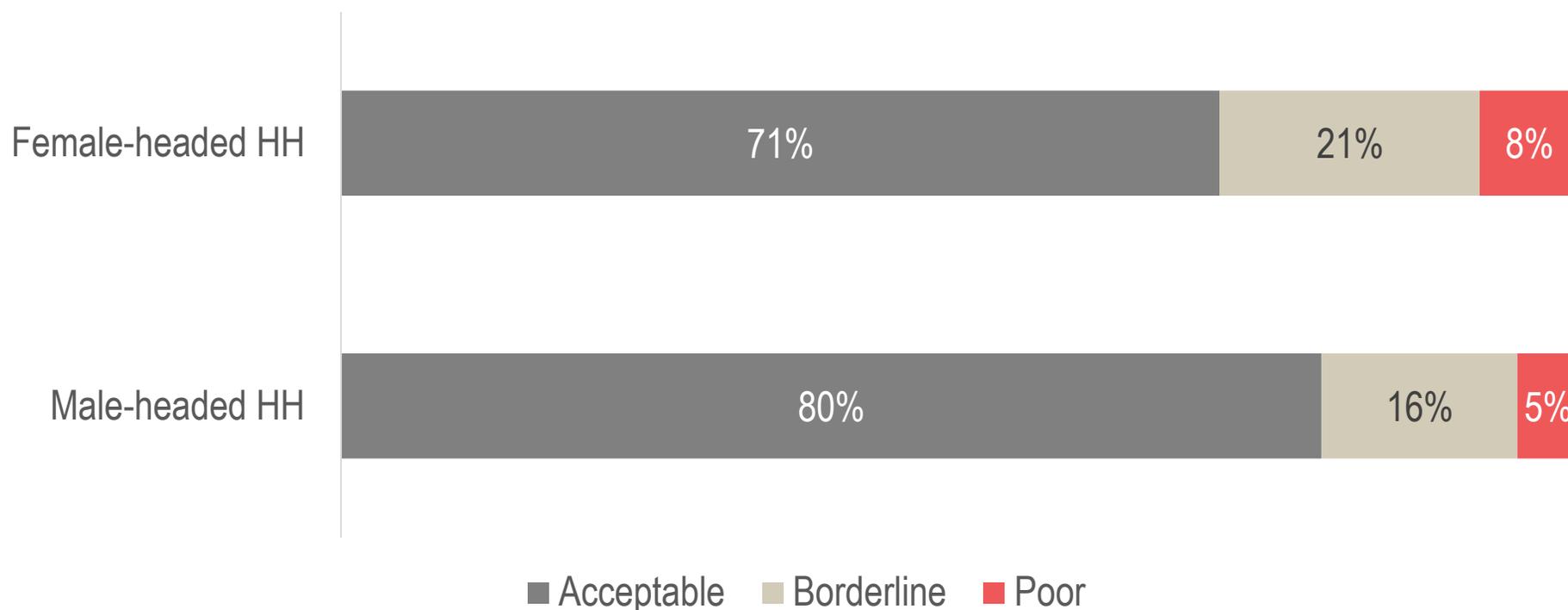
% of HHs in each Food Consumption Score category,
by population group



*Limited sample

Food Consumption Score, broken down by head of household gender

% of HHs in each Food Consumption Score category,
by HoH gender



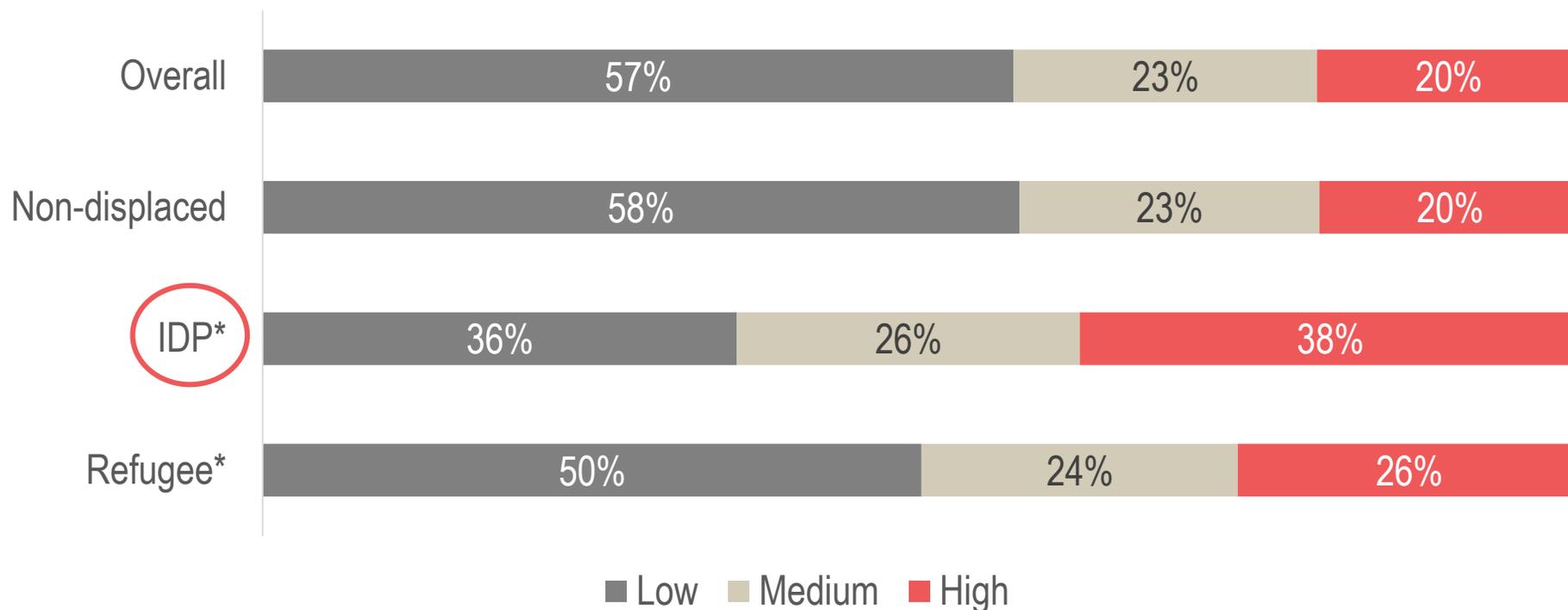
Top 5 states with greatest proportion of HHs that have 'borderline' or 'poor' FCS

Top 5 states with the greatest proportion of HHs that have either 'borderline' or 'poor' FCS

1. Central Darfur (**36%** borderline, **64%** poor, **100%** combined)
2. North Darfur (**42%** borderline, **18%** poor, **60%** combined)
3. West Darfur (**26%** borderline, **20%** poor, **46%** combined)
4. South Darfur (**27%** borderline, **7%** poor, **34%** combined)
5. East Darfur (**14%** borderline, **18%** poor, **33%** combined)

Reduced Coping Strategy Index, broken down by population group

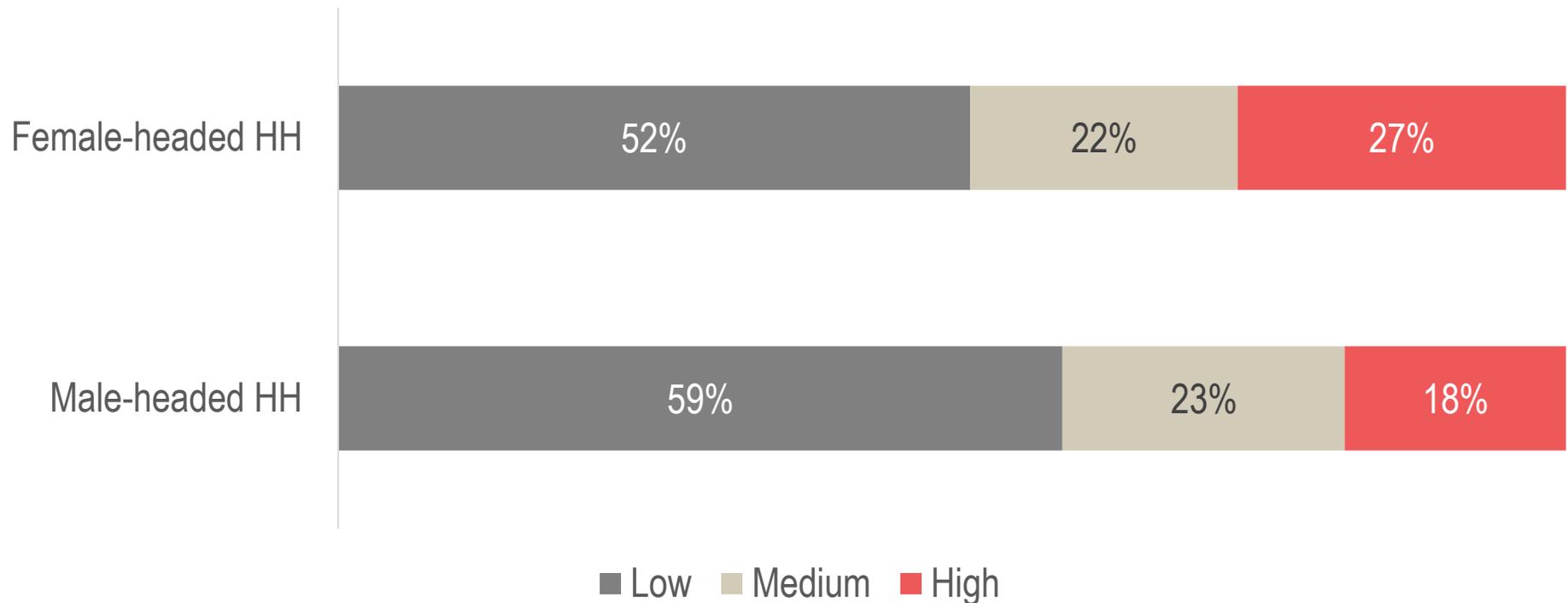
% of HHs in each Reduced Coping Strategy Index category,
by population group



*Limited sample

Reduced Coping Strategy Index, broken down by head of household gender

% of HHs in each Reduced Coping Strategy Index category,
by HoH gender





Top 5 states with greatest proportion of HHs that have 'medium' or 'high' rCSI scores

Top 5 states with the greatest proportion of HHs that have either 'medium' or 'high' rCSI scores

1. Central Darfur (**5%** medium, **80%** high, **84%** combined)
2. South Darfur (**32%** medium, **21%** high, **52%** combined)
3. West Kordofan (**28%** medium, **21%** high, **48%** combined)
4. Khartoum (**20%** medium, **28%** high, **48%** combined)
5. South Kordofan (**26%** medium, **20%** high, **46%** combined)



09

Key Findings: Nutrition



Enrolment in therapeutic feeding programmes

16%

Of HHs overall had ≥ 1 child aged 6-59 months enrolled in a therapeutic feeding programme

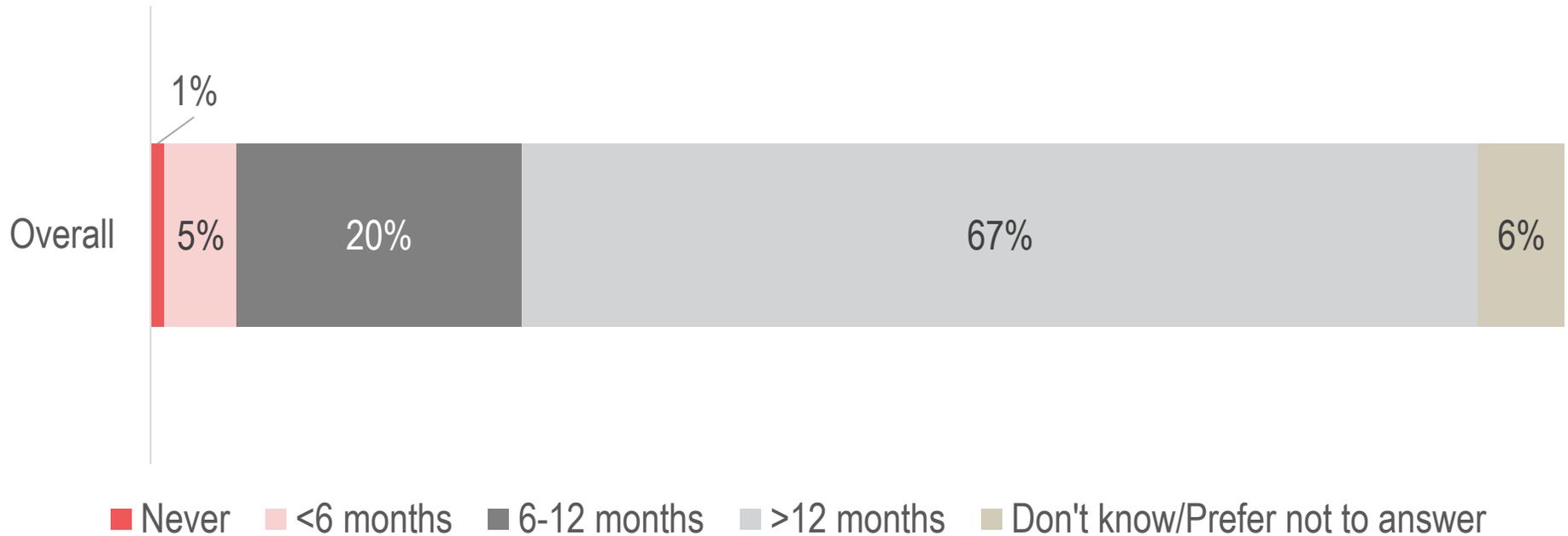
Among HHs with ≥ 1 child aged 6-59 months enrolled in a therapeutic feeding programme,

77%

of HHs overall received micronutrient powder

Duration of breastfeeding

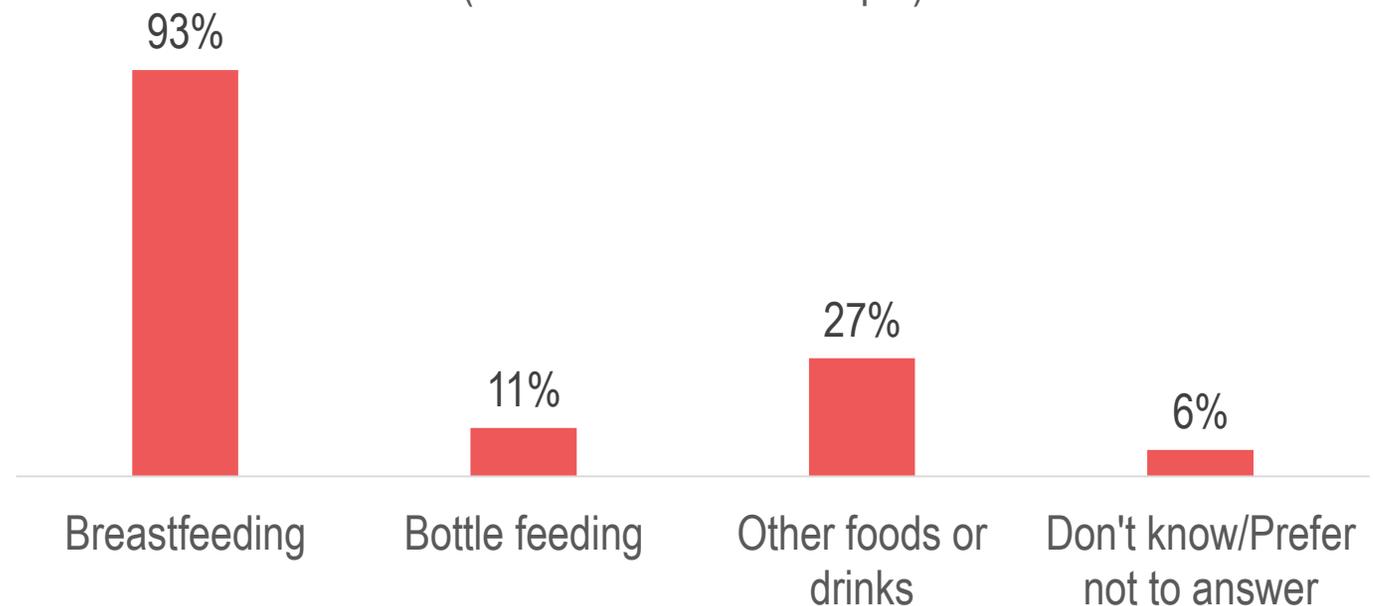
Among HHs with ≥ 1 woman who has given birth in the 2 years prior to data collection, % of HHs overall by duration of breastfeeding the child



Feeding methods from ages 0-6 months

Among HHs overall with ≥ 1 woman who has given birth in the 2 years prior to data collection, **63%** relied exclusively on breastfeeding between the ages of 0-6 months

Among HHs with ≥ 1 woman who has given birth in the 2 years prior to data collection, % of HHs overall by feeding method(s) between the ages of 0-6 months
(HHs could select multiple)





10

Discussion
Points



Key takeaways

- **50%** of HHs overall say that livelihoods support/employment is one of their top 3 self-reported priority needs, **22%** cite food (in-kind assistance) and **20%** cite physical cash
- **76%** of HHs overall experienced a shock in the 6 months prior to data collection, and **91%** of IDPs HHs experienced a shock
 - Among households that experienced a shock in the 6 months prior to data collection, **52%** of HHs overall sold assets to cope with this shock
 - Most-reported shocks overall were unusually high food prices (**69%**), COVID-19 (**54%**) and reduced income of any HH member (**53%**)
- **80%** of HHs overall faced challenges in obtaining enough money to meet their needs in the 30 days prior to data collection
- **23%** of HHs overall have either a borderline or a poor FCS, and **43%** of HHs overall have either a medium or a high rCSI score
- **16%** of HHs overall had ≥ 1 child aged 6-59 months enrolled in a therapeutic feeding programme
- Among HHs overall with ≥ 1 woman who has given birth in the 2 years prior to data collection, **63%** relied exclusively on breastfeeding between the ages of 0-6 months



Questions to guide discussion

1. Did you find any of the results of this assessment (whether in this presentation or in the analysis tables) surprising or inconsistent with what you have seen in the field?
2. Is there any context that you could share based on your work in the field that could help explain some of these results?
3. Is there any additional analysis which would be useful to you, and which is not already in the analysis tables?



11

Next Steps

Summary of next steps*



ANALYSIS TABLES

Analysis tables (Excel) will be circulated in **early December**



PRESENTATIONS

REACH will present findings to the sectors between **2-9 December** and to the ISCG on **15 December**



DASHBOARD

An online, interactive dashboard will go live at the **end of January**



FINAL REPORT

The final report will be published at the **end of February**

*Dates are subject to change.



**THANK YOU
FOR YOUR
ATTENTION**

REACH Informing
more effective
humanitarian action