



Malawi Household Food Security Bulletin

Mobile Vulnerability Analysis and Mapping (mVAM) on the Effects of COVID-19 in Malawi

Round 18: 8th October – 6th November 2021

SUMMARY OF KEY FINDINGS

- The food security situation in Malawi has remained stable between April and November, with almost all interviewed households across the country classified as having *acceptable to borderline* food consumption as they continue to consume from the 2021 harvest.
- The proportion of households who are employing the *most severe* consumption-based coping strategies has remained quite low from April, indicating a largely stable food security situation.
- Physical access to markets has increased slightly, likely due to a decrease in new COVID-19 cases coupled with the fact that rural households are still selling their produce from the recent harvest.

restrictions, which include wearing face masks, observing social distancing, and washing hands to prevent the spread of the disease.



BACKGROUND

During this reporting period, Malawi continued to register low or no daily cases of COVID-19, representing the likely end of the third wave of the pandemic. As of 6th November 2021 (the last day of this round of data collection), the Ministry of Health registered 12 new COVID-19 cases within the past 24 hours, with 22 new recoveries and no new death. All new cases were locally transmitted. Cumulatively, Malawi had recorded 61,815 cases including 2,302 deaths with a case fatality rate at 3.72 percent. The Government continues strengthening measures in observance of the COVID-19

METHODOLOGY

Round 18 of remote household-level survey data collection in response to COVID-19 monitoring and seasonal trends in food security took place between 8th October – 6th November 2021. The survey for this report was conducted using live telephone calls, collecting information from some 2,507 households in all districts and major cities across the country.

The sample size was calculated based on the *Integrated Food Security Phase Classification Technical Manual (Version 3.0)* guideline of having at least 150 samples per strata. Additional details on this methodology are available in *Annex 1*.

The **Food Consumption Score (FCS)** is a composite score of diversity and frequency of food groups consumed over the past 7 days by household members, weighted by the relative nutritional importance. Based on the scores and the standard thresholds, households are grouped into three

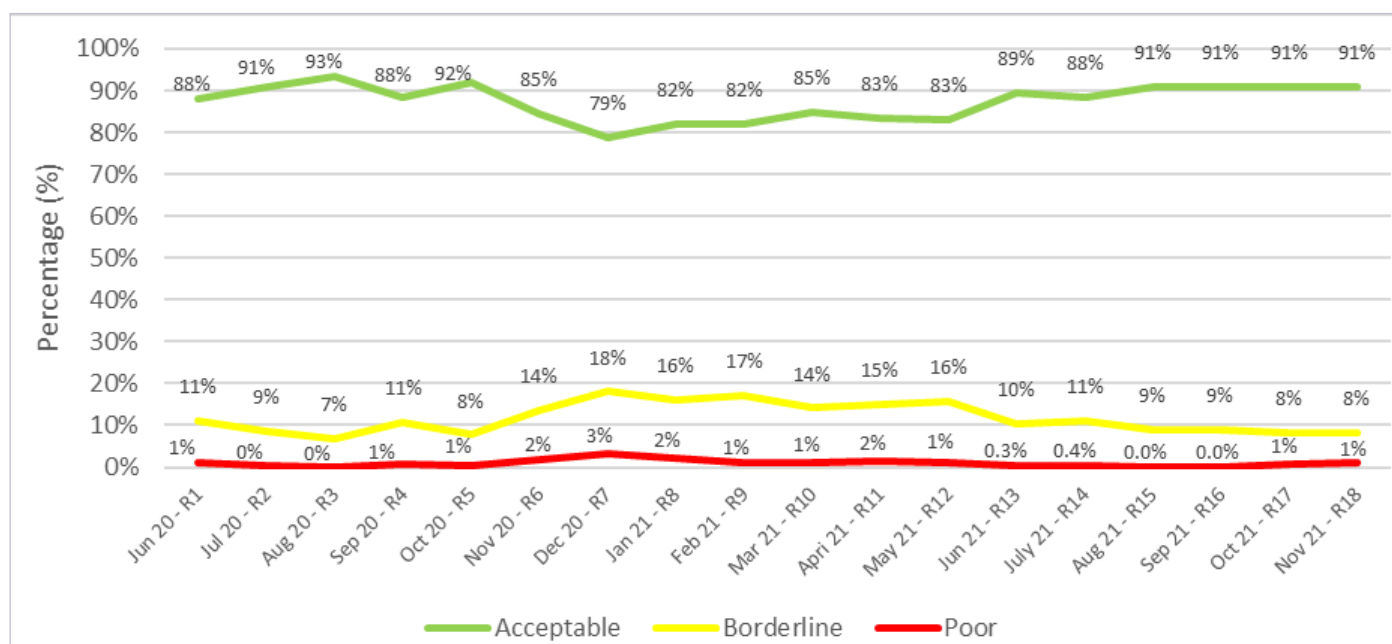
The **Reduced Coping Strategy (rCSI)** is an experience-based indicator measuring the behaviour of households over the past 7 days when they did not have enough food or money to purchase food.

KEY FINDINGS

Food Consumption Score (FCS)

The Round 18 household survey data showed that most households (91 percent) are currently classified as having *acceptable* food consumption, the same level as in Round 17. This shows that the overall food security situation continues to be stable in the country, which is expected at this time of year as it is the post-harvest period when a diverse variety of foods are abundantly available. Only 8 percent of households were classified as having *borderline* food consumption, the same figure as the previous round. Similarly, only 1.0 percent of surveyed households were classified as having *poor* consumption, which is also in-line with the previous round (Figure 1).

Figure 1: Trends on Households' Classification of Food Consumption Score, Round 1 (May 2020) to Round 18 (November 2021)

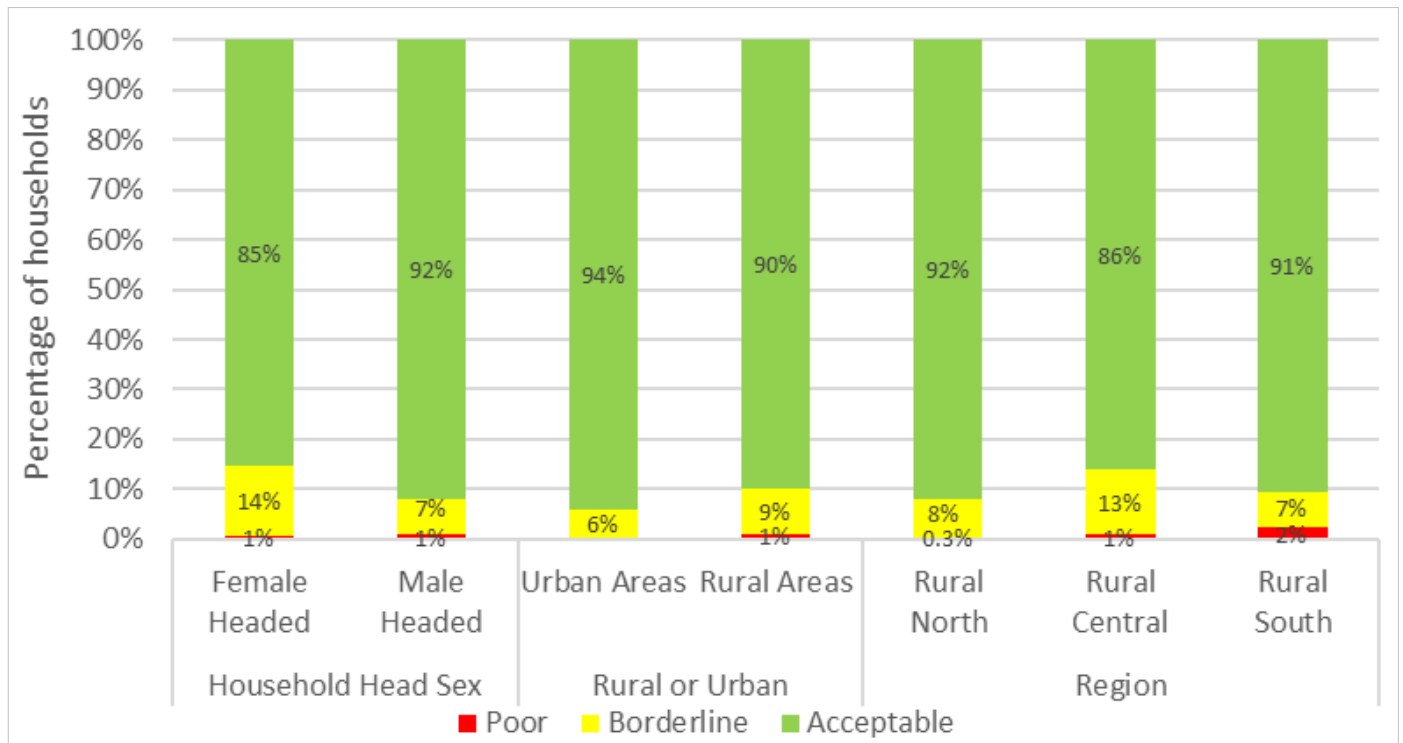


In line with Round 17, fewer female-headed households (85 percent) in Round 18 were classified as having *acceptable* food consumption compared to male-headed households (92 percent), indicating that female-headed households tend to consume less diversified food groups compared to male-headed households.

Most households in urban areas (94 percent) were classified as having *acceptable* food consumption compared to households in rural areas (90 percent). Only, 6 percent of urban-based and 9 percent of the rural-based households were classified as having *borderline* food consumption.

While *acceptable* food consumption was prevalent across all three regions of the country, slightly more households, some 92 percent, in the Rural Northern Region followed by 91 percent in the Rural Southern Region were classified as having *acceptable* food consumption, an indication that they consumed more diversified food groups compared to the Rural Central Region (86 percent) (Figure 2). These observations are attributed to the dietary habits across the regions, whereby—in general—households residing within the Northern Region tend to consume more diversified food groups than their counterparts residing in the Southern and Central Regions.

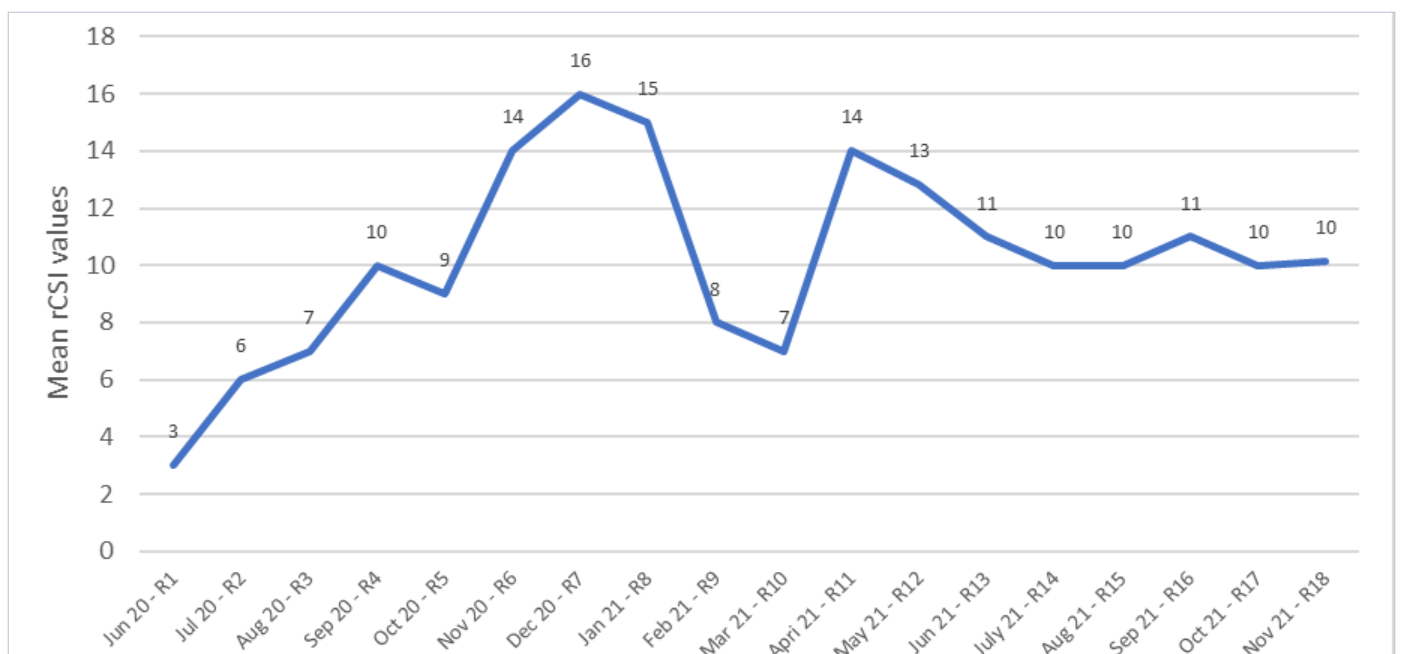
Figure 2: Percentage of Households by Food Consumption Score Classifications



Reduced Coping Strategies Index (rCSI)

In this round, the mean reduced Coping Strategy Index (rCSI) was ten (10), registering at the same level as the previous round, signifying that households were, generally, not employing many or severe consumption-based coping strategies to access food. This score is low and characteristic for the post-harvest period when food from one’s own production is abundant (Figure 3). At district level, analysis is done by grouping districts into strata. As shown in Figure 4, the grouping of Lilongwe Rural and Dedza, and Ntchisi, Dowa, Mchinji and Kasungu had the highest mean rCSI (15), indicating that households in these areas reported resorting to more adverse coping strategies than households in other areas. The lowest mean rCSI (8) was observed in Chitipa and Karonga Districts. In urban areas, the lowest mean rCSI (6) was observed in Mzuzu city, followed by Blantyre and Zomba cities (7).

Figure 3: Mean Reduced Coping Strategy Index (Mean rCSI) Trends, Round 1 (June 2020) to Round 18 (November 2021)



In Round 18, approximately 20 percent of surveyed households across the country reported having relied on the most severe consumption-based coping strategies (rCSI ≥ 19), the same as the previous round, indicating a stabilization in the food security situation. More female-headed households (32 percent) employed the *most severe* consumption-based coping strategies compared to male-headed households (17 percent). Nearly, 42 percent of all surveyed households reported that they had used *moderately severe* behaviours (rCSI 4-18)—such as borrowing food from friends or relatives and/or adults skipping meals in order to provide for children—compared to 44 percent in Round 17, indicating that food insecurity under this classification remained stable at high levels. In addition, 38 percent of households reported that they had employed at least one of the *least severe* behaviours of eating less preferred foods and/or reducing the number of meals (rCSI 0-3), further indicating a stabilization of food security across the country (Table 1).

In Round 18, households in rural areas (24 percent) applied more of the *most severe* consumption-based coping strategies or a combination of several strategies as compared to households residing in urban areas (9 percent). In general, urban-based households tend to employ less severe consumption-based strategies as compared to households in rural areas who rely on the sale of agricultural produce as a source of income (Table 1). Additionally, households within the Rural Central Region (34 percent) employed *more severe* consumption-based coping strategies than households in the Rural Southern (22 percent) and Rural Northern Regions (17 percent) (Table 1). The high use of the *most severe* consumption-based coping strategies in the Rural Central Region is likely due in part to poverty, which is the highest in the region compared to the other regions.

Table 1: Percentage of Households Employing Consumption-based Coping Strategies

		Normal (%)	Moderately Severe (%)	Most Severe (%)
Household Head Sex	Female-headed	22%	46%	32%
	Male-headed	42%	41%	17%
Rural or Urban	Urban Areas	50%	40%	9%
	Rural Areas	34%	42%	24%
Region	Rural North	47%	36%	17%
	Rural Central	21%	46%	34%
	Rural South	31%	46%	22%

Figure 4: Map of Malawi Showing the Mean rCSI by District Grouping (Strata)

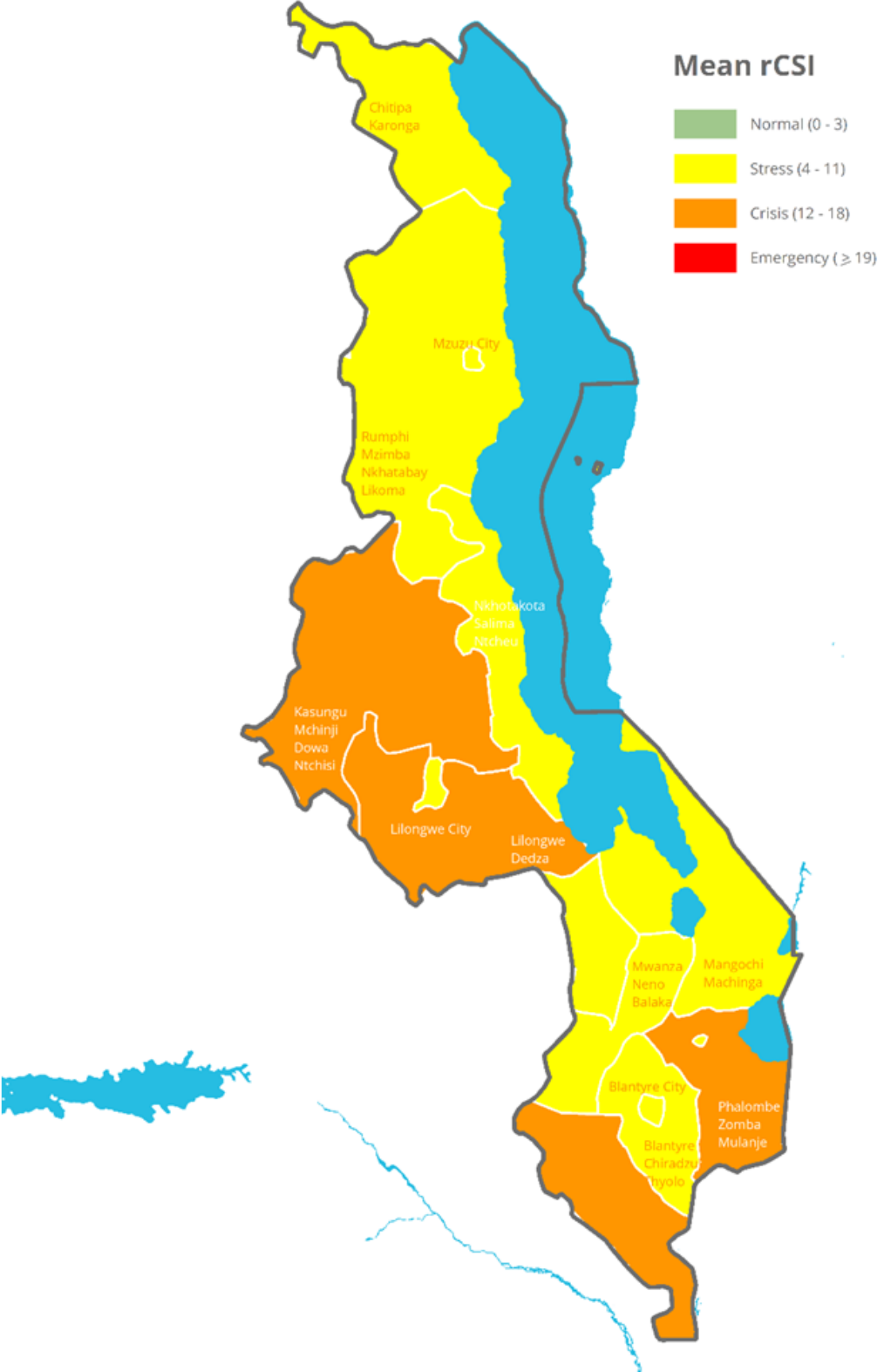
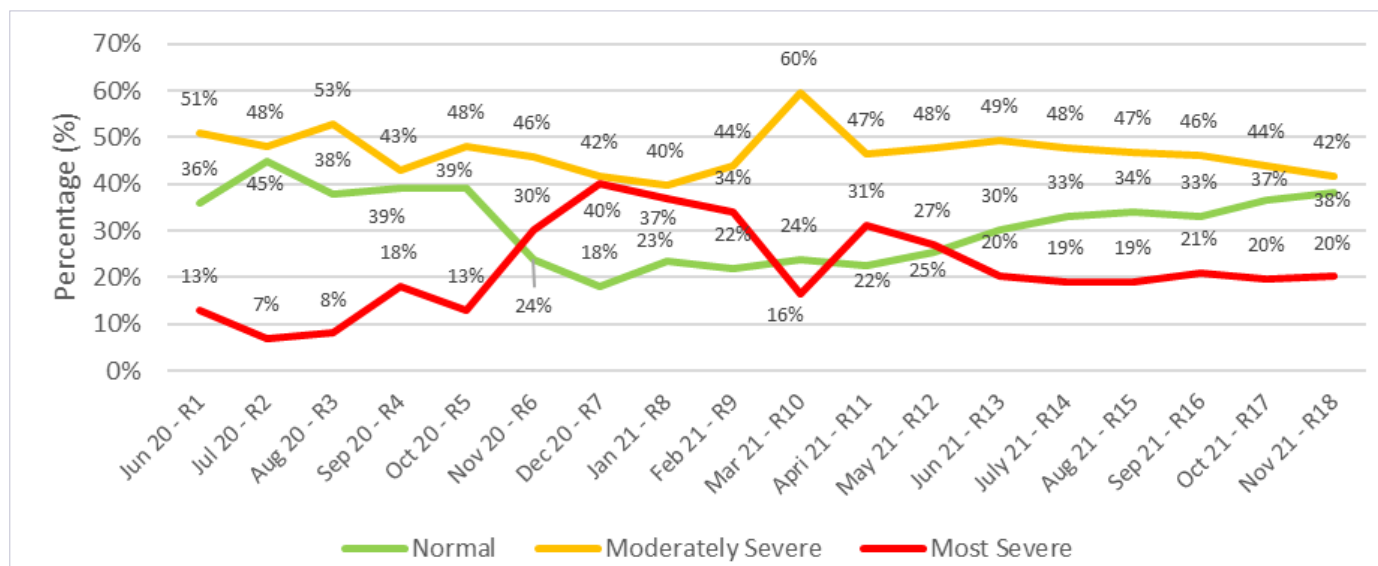


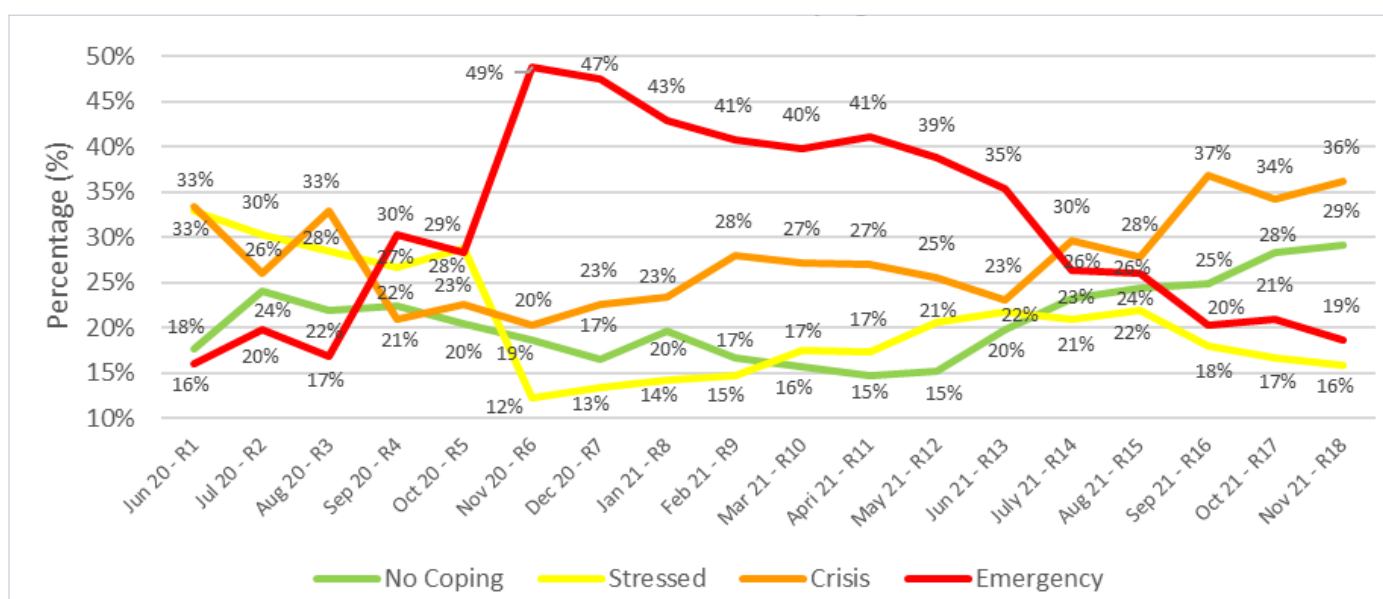
Figure 5: Households Employing Consumption-based Coping Strategies (rCSI) Trend



Livelihood Coping Strategies

Nearly 19 percent of surveyed households across the country reported having employed *emergency* livelihood-based coping strategies to access food within the last 30 days. This is a decrease from 21 percent in the previous round, showing a stabilization of the food security situation across the country. In addition, the proportion of households employing *crisis* livelihood-based coping strategies increased slightly to 36 percent in Round 18 compared to 34 percent in the previous round. While a slight dip, this does not necessarily suggest a deterioration in the food security situation. The use of stress-based coping strategies decreased slightly to 16 percent in this round compared to 17 percent in the previous round. Additionally, 29 percent of households did not employ any livelihood-based coping strategies compared to 28 percent in the previous round, further indicating a continued improvement in food security following the recent harvest (Figure 6).

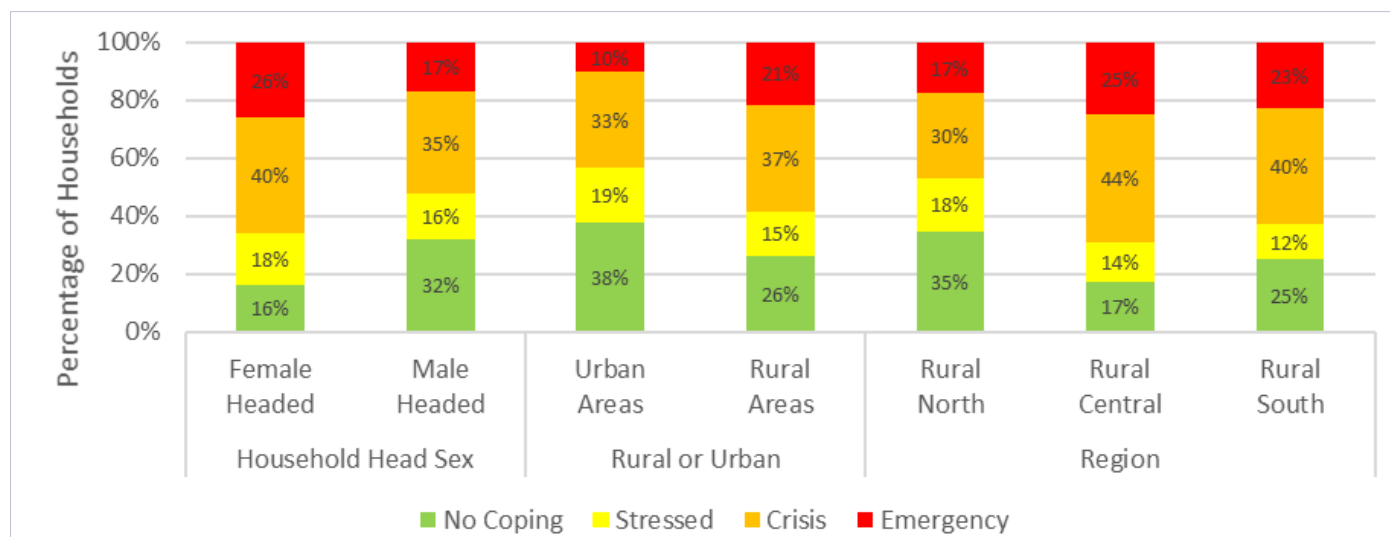
Figure 6: Trends on Households Employing Livelihood-based Coping Strategies



In general, female-headed households employed more *emergency* (26 percent) and *crisis* coping strategies (40 percent) compared to male-headed households (17 percent and 35 percent, respectively), indicating that female-headed households are generally facing greater food stress.

Additionally, a higher percentage of households residing in rural areas (21 percent) reported resorting to *emergency* coping strategies compared to households residing in urban areas (10 percent), indicating higher food stress in rural as compared to urban areas and the start of rural-based households beginning to deplete their food stocks. Further, more urban-based households (38 percent) did not employ any livelihood-based coping strategies as compared to households in rural areas (26 percent). From the regional perspective, the Rural Central Region had the highest proportion of households employing *emergency* coping strategies (25 percent) compared to the Rural South (23 percent) and Rural North (17 percent) (Figure 7). This is attributed to the practise of lending land for farming, which is more prevalent in the Central Region compared to the Northern and Southern Regions.

Figure 7: Percentage of Households Employing Livelihood Coping Strategies



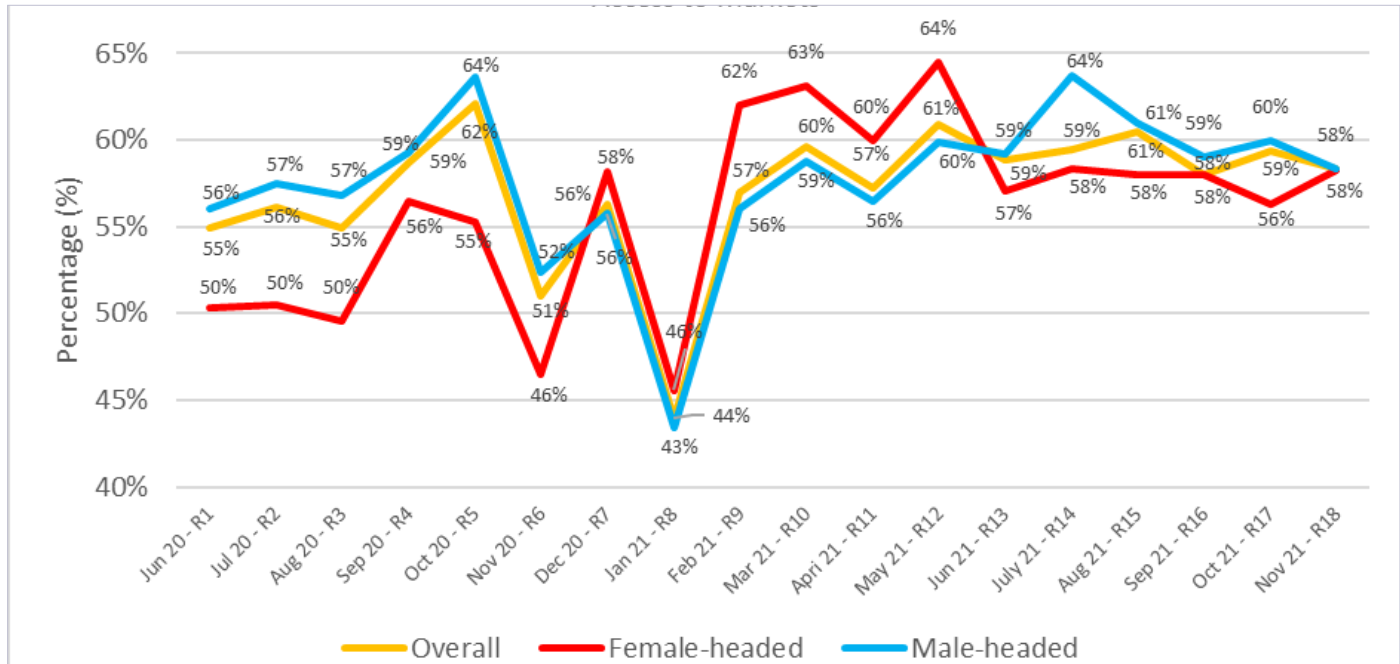
Market Access

Interviewed households were also asked if at any point in the 14 days prior to the survey they were unable to access markets or grocery stores and the reasons why. Reported access to markets in Round 18 of data collection remained stable over the last two rounds of data collection, hovering between 58 percent in Round 18 and 59 percent in Round 17 which is likely at least partly attributable to the decline of the third wave of the COVID-19 pandemic. Additionally, no differences in terms of market access were observed amongst female- and male-headed households, with 58 percent of households having access to markets. Of the 42 percent of surveyed households who had limited access to markets, a lack of money was the major reason (reported by some 95 percent of respondents) households stated explaining why they did not access markets.

The **Livelihood Coping Strategies Indicator (LCSI)** is derived from a series of questions regarding a household's experience with livelihood stress and asset depletion during the 30 days prior to the survey.

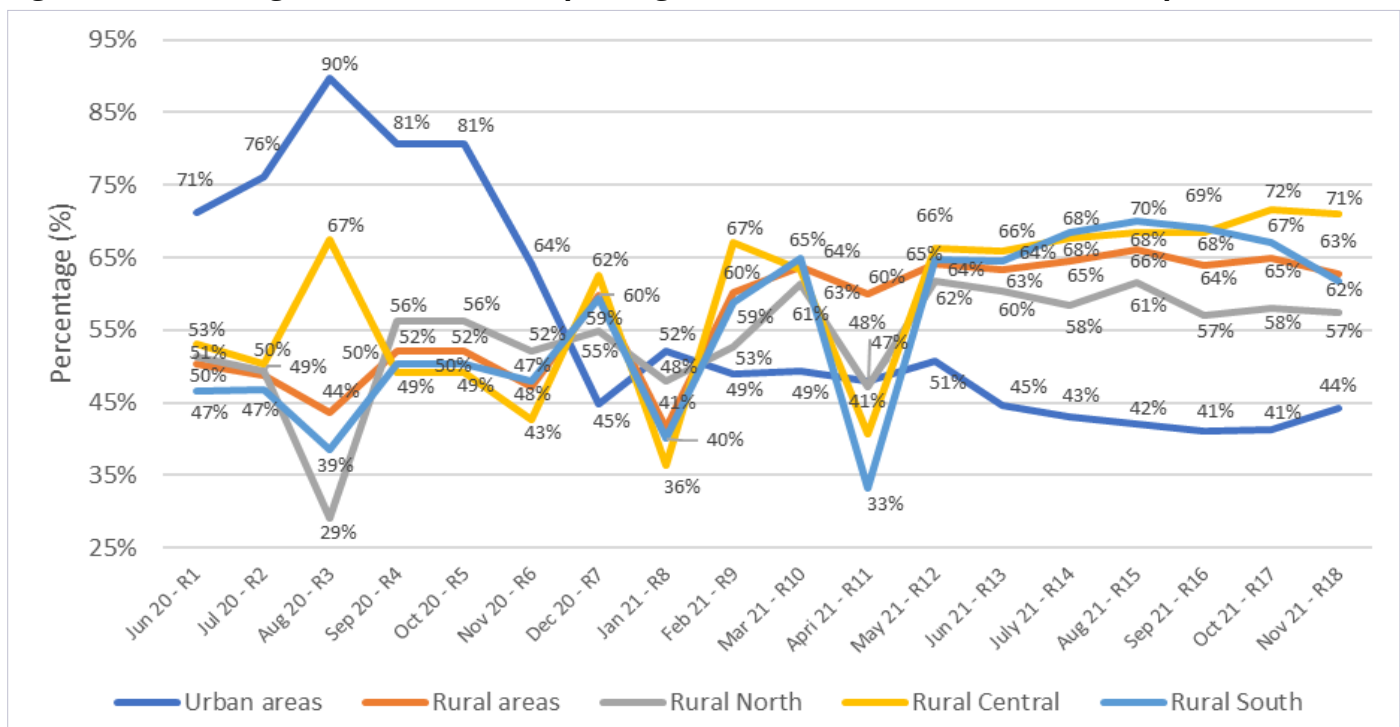
Coping is classified into broad categories: **Stress Strategies, Crisis Strategies, Emergency Strategies and Not coping/ Food Secure.**

Figure 8: Trends on Households Accessing Markets



Further, in the current round, more rural households reported that they had increased access to markets (62 percent) compared to 44 percent of urban households, partly due to the marketing season whereby rural households are selling produce from the recent harvest and buying other food and non-food items with the income that they generate from the sales. Within rural areas, the Rural North had the lowest proportion of households (57 percent) who reported having access to markets, followed by the Rural South (62 percent) and then the Rural Centre (71 percent). In general, the Rural Centre Region likely has higher access to markets, because this region is a food basket for the country, with households frequenting markets regularly during this period to sell part of their produce.

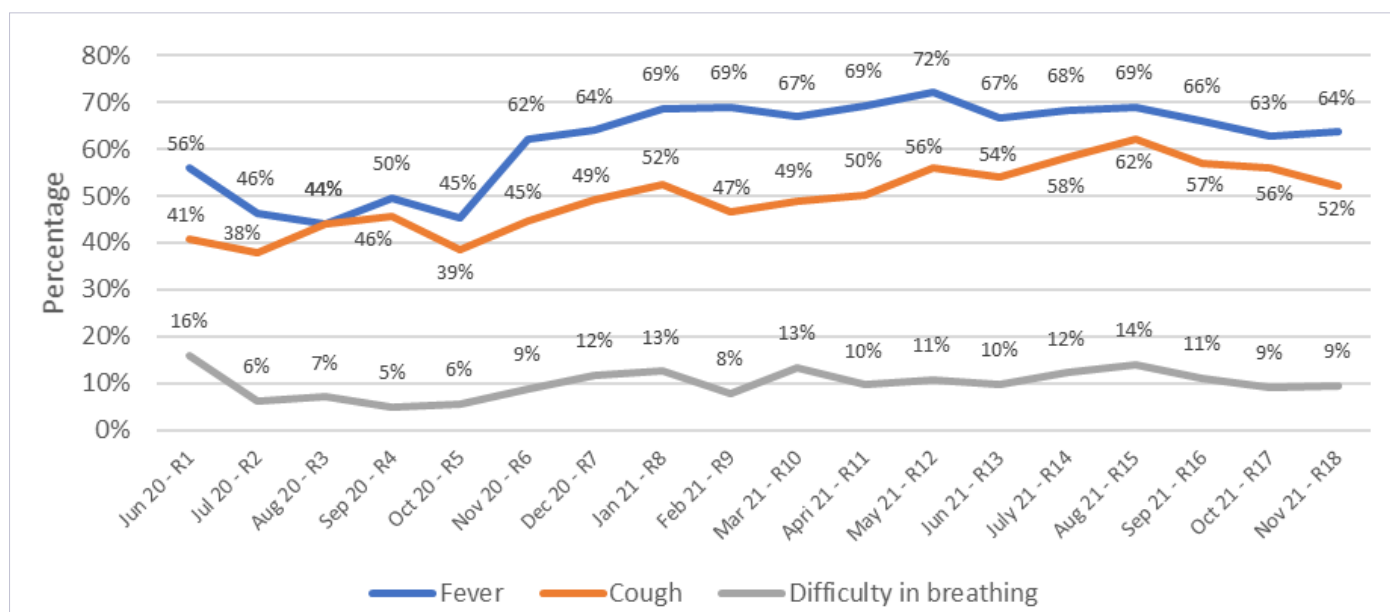
Figure 9: Percentage of Households Reporting Unlimited Access to Markets/Shops



Health Indicators Related to COVID-19

In Round 18, households were asked whether at least one member of their family had suffered from a fever, cough, and/or had difficulty breathing in the 14 days prior to the survey. Overall, the proportion of households who reported that one or more of their family members experienced a fever was 64 percent, a decrease from the previous Round 17. The prevalence of fevers is still high, which is expected during this period of dry dusty weather which results in allergies making people more susceptible to bacterial or viral infections. In addition, during this reporting period, roughly 9 percent of households reported that someone in their family had experienced difficulty breathing (*Figure 10*).

Figure 10: Percentage of Households Who Reported that at least One Member of Their Family Suffering from Fever, Cough, or Difficulty in Breathing in the Past 14 Days



CONCLUSIONS

The food security situation continues to be stable in the current round (mid-October to mid-November) of data collection as demonstrated by the high proportion of households classified as having *acceptable* food consumption coupled with the low proportion of households classified as having *poor* consumption. Additionally, the proportion of households who were employing emergency livelihood-based coping strategies is at low levels similar to the last round of data collection, while the proportion of those not engaging in any emergency livelihood-based increased, representing a stable household food security situation. Access to markets increased in Round 18 compared to the previous round and remains in line with normal trends for this time of year.

Annex A: Sampling Methodology

The three regions of the country (ADM1) and four major cities (Mzuzu, Lilongwe, Blantyre, and Zomba) were divided into 14 strata. Integrated stratification was conducted whereby each city was a stratum on its own to track the effects of COVID-19 in each city separately, as cities are likely to be most adversely affected by the impact/ severity of COVID-19, and the impact might differ from city to city. Districts were stratified by clustering those with similar livelihood activities together while maintaining a maximum of four districts per stratum. Participants were randomly selected from a national database of mobile subscribers. Respondents opted into the mobile call survey and were asked questions on socio-demographics, food consumption, coping behaviour, market access, health condition, and assistance received.

As of 2016, 54% of households in Malawi had a mobile phone (MDHS 2015-16). As such, it is acknowledged that household-level mobile surveys contain a certain level of inherent bias. Due to these biases, an attempt is made to capture patterns and trends. In terms of weights, the results are computed by applying a population weight at each respective district level (Admin 1) in order to debias the data.

The sample size was calculated based on the IPC guideline of a minimum of 150 per strata. The total sample size per strata is 180, as it includes a safety buffer of 30 in case the call centre could not achieve the full sample in 30 days. Please find the IPC manual [here](#) and refer to page 115, Table 28 for further details.

The sample was stratified at the ADM1 level to be able to report results at ADM1 level within 30 days of data collection.

The three regions in Malawi (ADM1) and the four cities of Mzuzu, Lilongwe, Blantyre, and Zomba have been divided into 14 strata (ADM1 strata) and quotas have been provided at the ADM1 strata and district (ADM2) level. To compute ADM2 quotas, WFP used Probability Proportional to Size (PPS) to ensure that the results are representative at the ADM1 level.

All ADM1 strata quotas (daily, 10 days and monthly) and AMD2 caps (10 days and monthly) were reached for this sample.

After the first initial rounds of data collection, WFP subsequently switched to a panel approach, and these quotas will be updated to include the quotas for old/new respondents based on the methodology outlined above.

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