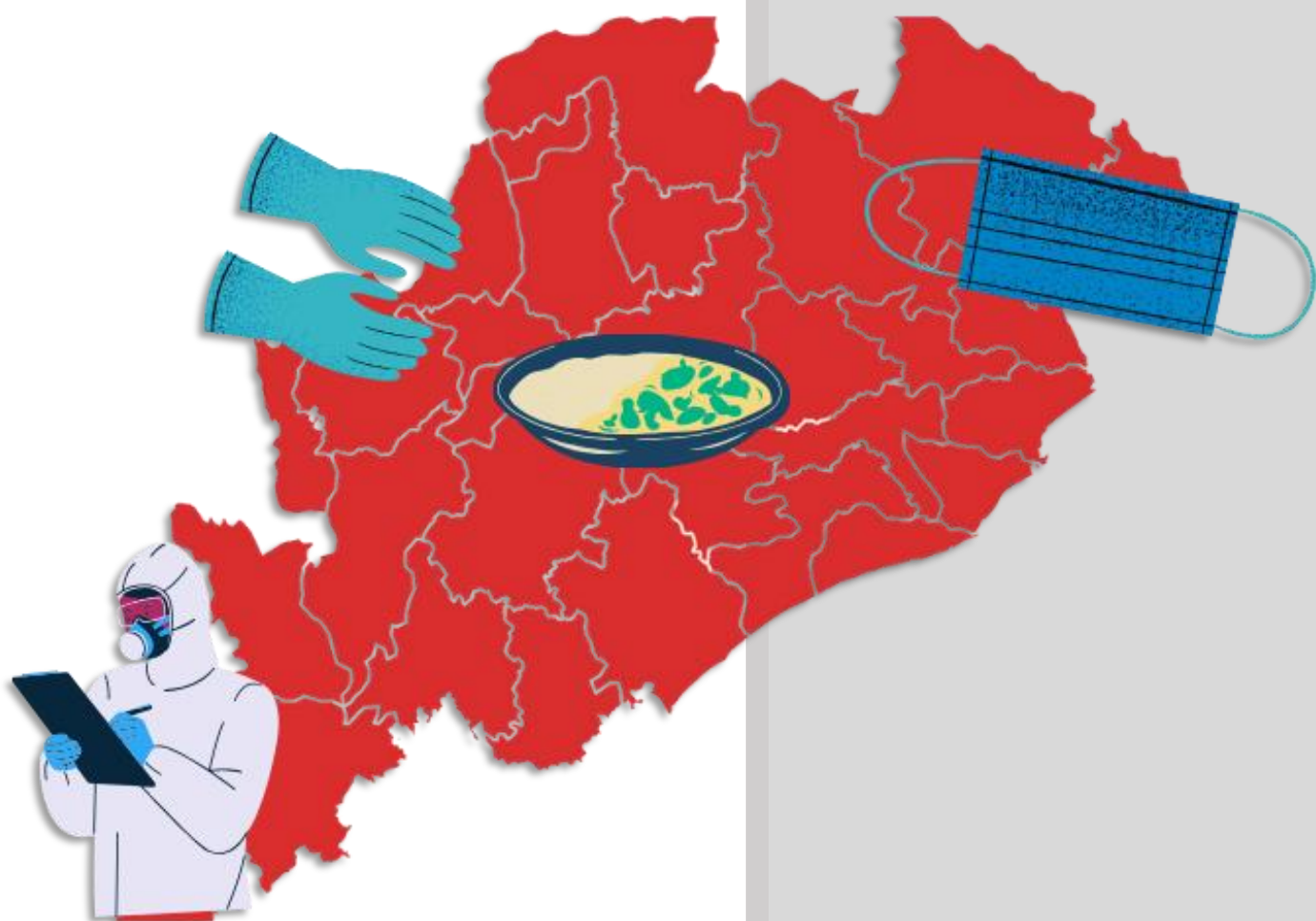


2020



**Joint Rapid Needs Assessment in Odisha, India - A Detailed
Analysis of Food and Nutrition Sector during COVID-19**

**Inter-Agency Group, Odisha &
World Food Programme**

6/19/2020

Foreword

Emerging as a public health crisis, the COVID-19 pandemic also threatened the food and nutrition security of vulnerable populations across the country, including those in Odisha. The Inter-Agency Group (IAG), Odisha, which is comprised of lead national and international non-governmental organisations, civil society organisations and UN agencies, conducted a state-wide mobile-phone based survey to gauge the impact of COVID-19 on the vulnerable people of the state. The survey focused on the areas of food security, nutrition, livelihoods, social protection, health, WASH and migration.

The Food Security and Nutrition sector, represented by Oxfam India, Catholic Relief Services, World Vision, Caritas India, Help Age India, UNICEF and WFP worked together to develop the data collection tool and, through their respective partners in the field, collected data through phone interviews. The team from WFP India did the analysis and for the section presented in the “Joint Rapid Needs Assessment”. Over 473 households from across 14 districts were interviewed in the first half of April 2020 to produce this report. The report captures early results during the Lockdown 1.0 in the State.

Despite the heavy toll exacted by COVID-19, the food security and nutrition of vulnerable populations is maintained across various regions of the state and sections of people. The significant support coming from the Government helped the people in need to navigate the crisis. The succinct findings and the relevant recommendations that follow in the report are still pertinent for helping policy makers to adopt timely and informed decisions and strategies to contain the spread of COVID-19 against the potential negative impact of preventive measures on the economy, employment and income, safety and food security. The strategies will undoubtedly change as the crisis evolves. But the report calls for the key stakeholders to put the right foundation in place now in order to effectively implement the strategies.

We acknowledge the contributions of the team IAG and their network of agencies and CSO and in particular, teams from CRS, Oxfam, World Vision, Caritas India, Help Age India and WFP for their able programmatic insights and support along with dedicated efforts in analysing and presenting the data and preparing this report.

As IAG is committed to the value of wellbeing of the people of Odisha, we hope these efforts will translate into providing food security and nutrition benefits to the population in Odisha.

Lastly, WFP expresses its assurances to continue working with Government of Odisha and providing technical assistance in the joint efforts of the State towards achieving Zero Hunger.

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Executive Summary

The COVID-19 outbreak is affecting all segments of the society and is particularly proving detrimental to the members of social groups who are in a vulnerable situation. Global evidence indicates that poor, people without access to running water, refugees, labours, migrants or displaced persons stand to suffer disproportionately due to the COVID-19.

In order to understand the situation of food and nutritional security among the small/marginal farmers, landless/daily wage labourers and migrant labours during the post COVID-19 period, the Inter-Agency Group, including Oxfam India, Catholic Relief Services, World Vision India, Caritas India, HelpAge India along with UNICEF and WFP commissioned a study in Odisha, India.

The objectives of the study were to:

- assess the impact of COVID-19 on food and nutrition security of vulnerable people such as small/marginal farmers, daily wage earners, migrant families in Odisha.
- communicating to the government about the seriousness of the problem and providing recommendations.
- facilitate in designing short term and long-term responses for most vulnerable community in Odisha

This study adopted the ***mixed-method approach***. Quantitative data was collected at the household level. The forms containing the tools specifically designed for the purpose were filled by volunteers either telephonically with the respondent or through one to one discussion maintaining social distancing norms. Qualitative data was collected from the government officials currently engaged in COVID-19 response, Government websites and local leaders like sarpanch, ward member or Panchayati Raj Institution (PRI) members. However, this report only includes quantitative findings.

The data were collected from 14 diverse districts of Odisha. To bring diversity, two to three different locations/villages in the districts were covered. The respondents included nearly equal proportion of female and male participants.

Key findings emerged from the study have been discussed below:

Source of food: Respondents were asked about the main source of food in their households. More than half of respondents access their food from the market or grocery store.

Sufficiency of food: More than half of the respondents reported of having insufficient food in last 7 days. In this regard, aspirational districts (54 percent) and female headed households (56 percent) are slightly more vulnerable as compared to non-aspirational districts (47 percent) and male headed households (48 percent).

Reason for shortage of food: The most common reasons for household food shortages were lack of money to buy food and inability to access market due to lockdown. A higher

proportion of respondents from the aspirational district (46 percent) and female headed households (44 percent) mentioned lack of money to purchase food, as compared to non-aspirational districts (33 percent) and male headed households (36 percent).

Change in price of food: It's a matter of concern that two out of every five respondents mentioned that the prices of food commodities increased in their locality. Remarkably, a much higher proportion of respondents residing in the Southern Zone (54 percent) mentioned that the prices increased in their locality, as compared to Central (40 percent) and Northern (31 percent) zones.

Food consumption: Findings shows that overall, all households had eaten cereals, roots and tubers while 89 percent had eaten vegetables/ leaves, 78 percent had consumed pulses and/or nuts and 72 percent had consumed and oil/fat/butter in the last 24 hours. More than half (55 percent) had sugar or sweets. As compared to other food groups, consumption of meat (32 percent), dairy products (25 percent) and fruits (20 percent) were low. Male headed households have better consumption in terms of dietary diversity, as compared to households headed by women. A lower proportion of respondents from aspirational districts reported consumption of more than 4 food groups in the last 24 hours. Male headed households had the highest dietary diversity in terms of different food groups.

Coping during food shortages: Overall, 80 percent of respondents coped with food shortage by relying on less preferred and less expensive foods, while two out of every five households borrowed food, or relied on help from friends or relatives. Slightly more than half limited portion size at mealtimes, 39 percent restricted consumption by adults for small children to eat, and 40 percent reduced the number of meals eaten in a day to cope with food shortages. Residents of Aspirational districts and female headed households use a greater number of coping strategies.

Relation between consumption of food groups and coping strategy: With the increase in the number of food groups consumed in the last 24 hours, number of coping strategies used in the last 7 days decreases.

Change in intra-household food consumption: Due the crisis, adult men and women were the most likely members to reduce their consumption in around two-thirds of the households. Only a few changes in consumption for children and elderly were reported. However, in female-headed households, women and girls were more likely to reduce their consumption than men and boys.

Borrowing of money to meet food needs: Since COVID-19, almost half of the respondents had borrowed any money to help meet their family's food needs. Almost two-thirds of the sample in the Central Zone borrowed money, which is much higher than Northern (46 percent) and Southern (37 percent) zones.

Support from Government and Non-Government Organizations: Four out of five households reported receiving COVID response support. Among those who received

support, almost all mentioned receiving the support from the government. Most common reported form of support received was cash.

Role of PDS during COVID-19 crisis: Almost two-thirds (65 percent) received support from the government's Public Distribution System (PDS), which shows that PDS was a major source of support during the COVID-19 crisis.

Type of support received from the government: A higher percentage of female headed households received support under other schemes like widow pension, old age pension, and Mamata. A much higher proportion of respondents residing in the Aspirational Districts received their support in the form of food, money, school mid-day meals (MDM), dry hot cooked meals (HCM) and 3 months emergency supply.

Information on COVID from the government: The majority of the respondents received information on COVID from the government, with the most often being through the television (61 percent) while the least common was social media (27 percent).

Most important concern under the COVID-19 circumstances: Most common reported concerns were shortage of food (30 percent) and lack of work (28 percent). People were least concerned about disruption of medical services or getting sick (2 percent each), or disruption of education institutes and shortage of medicine (1 percent each).

Households' immediate needs in the next 10 days: Almost three-quarters of the households requested food and money support. The need for hygiene supplies (39 percent) and access to health services/medicines (27 percent) is also high. A higher percentage of respondents from the Aspirational Districts indicated that food and money were the immediate needs over the next 10 days. Female headed households were more likely to mention hygiene supplies as compared to male headed households.

Households' long-term needs in next one month: Almost four out of every five households need food and money over next one month. Need for hygiene supplies (41 percent) and access to health services/medicines (35 percent) is also high. One in ten households need agricultural or livestock inputs. A higher percentage of respondents from the Aspirational District mentioned the need for food (95 percent) and money (87 percent) compared to other groups.

Households' preferences for assistance: It is to be noted that cash and food are the most preferred form of assistance. Preference for food and materials is much higher among the female headed households as compared to those headed by men.

Based on the results of the assessment, following recommendations have been suggested:

Recommendation 1: Increase diversity of food consumption, especially amongst the more vulnerable households as the analysis of household consumption, showed low diversity which can lead to malnutrition and poor health outcomes. This can be done by diversifying foods provided in assistance, through information, education and

communication (IEC) campaigns and by ensuring availability of fresh foods in the markets.

Recommendation 2: Increase the quantity of food support and expand the coverage of COVID response systems to reach more vulnerable people, due to the high reliance on coping mechanisms by the sample of households.

Recommendation 3: Cash assistance should be continued and feasibility of increasing the amount of money and coverage of vulnerable households should be explored, as many households reported having cash shortages due to lack of work and loss of income during the lockdown.

Recommendation 4: Distribution of assistance through Targeted Public Distribution System (TPDS) should be expanded since most households in the survey reporting relying heavily on the programme.

Recommendation 5: Households in Aspirational Districts and those headed by women have emerged to be the most vulnerable, thus it is recommended that the government should place more emphasis on the food and nutritional needs of these groups both during and after the COVID crisis.

Recommendation 6: Continue providing food and cash assistance to the vulnerable while exploring creative longer-term solutions, including strategies to reach the most vulnerable more efficiently and effectively.

1. Background

Globally, the number of people facing acute food insecurity stands to rise to 265 million in 2020, up by 130 million from the 135 million in 2019, as a result of the economic impact of COVID-19, according to a WFP projection. The estimate was announced alongside the release of the Global Report on Food Crises, produced by WFP and 15 other humanitarian and development partners. In this context, it is vital that food assistance programme be maintained.

In order to understand the food security and nutritional problem among the small/marginal farmers, landless/daily wage labourers and migrant labours in the post COVID-19 situation, the Inter-Agency Group, including Oxfam India, Catholic Relief Services, World Vision India, Caritas India, HelpAge India along with UNICEF and WFP commissioned a study in Odisha. This study was conducted in the 14 districts of Odisha.

2. Objectives

The objectives of the study were to:

- assess the impact of COVID-19 on food and nutrition security of vulnerable people such as small/marginal farmers, daily wage earners, migrant families in Odisha.
- communicating to the government about the seriousness of the problem and providing recommendations.
- facilitate in designing short term and long-term responses for most vulnerable community
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3. Method

This study adopted the ***mixed-method approach***. Quantitative data were collected by volunteers through interviews with a household key informant, using a structured questionnaire, either telephonically with the respondent or through one to one discussion while maintaining social distancing norms. The respondents included

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