

Humanitarian Situation Monitoring Factsheet for COVID-19

South Sudan, March 2020

Overview

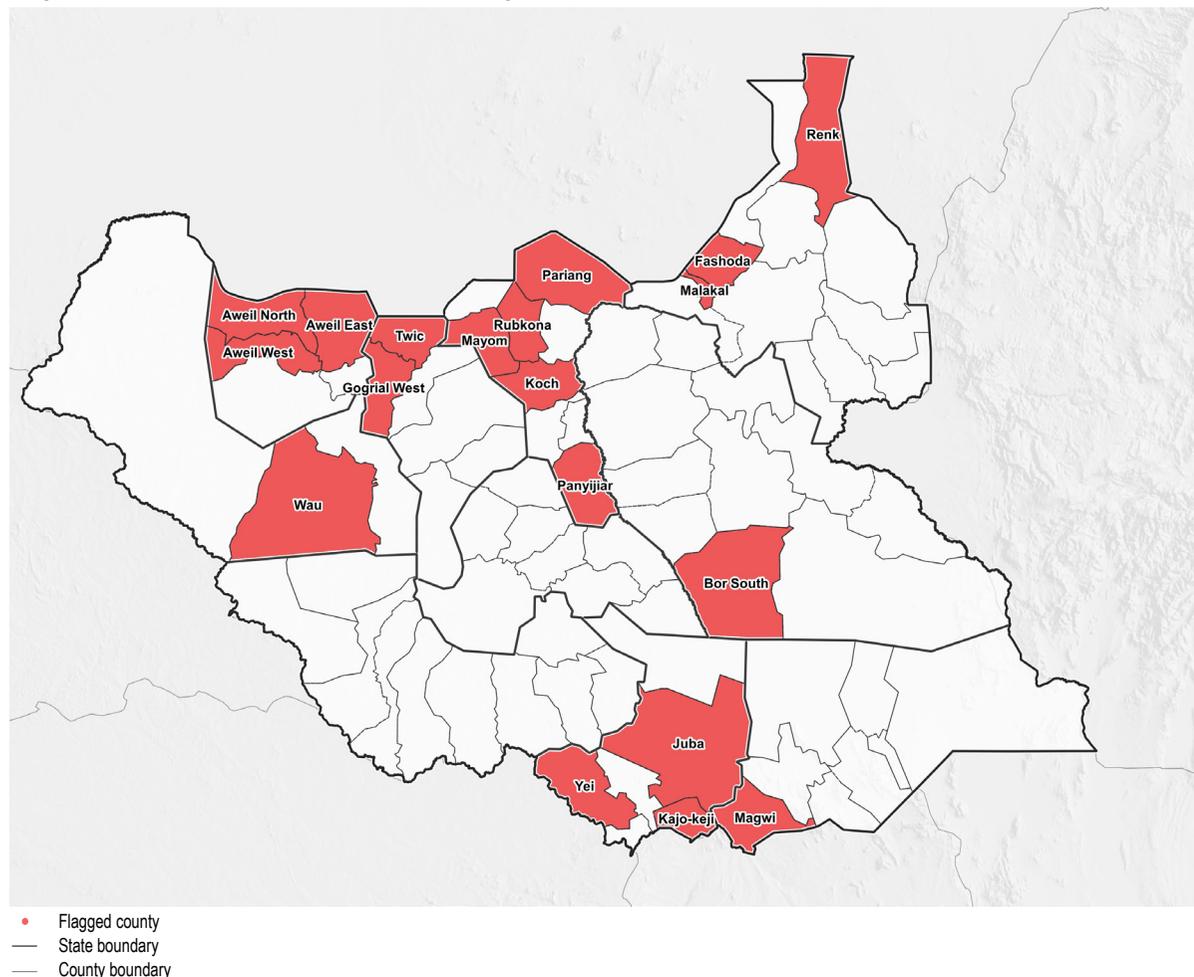
Given the existing vulnerability of the South Sudanese population and the persisting information gaps, an evidence-based identification of regions prone to COVID-19 outbreaks is urgently needed to inform a targeted humanitarian response. To support an evidence-based response to both the COVID-19 pandemic as well as ongoing humanitarian needs, this factsheet provides an overview of existing multi-sectoral vulnerabilities in the 19 counties prioritised for response (see vulnerability matrix below) to inform humanitarian actors on the risks related to a COVID-19 outbreak and prepare affected populations in vulnerable hard-to-reach communities. Indicators related to Health, Water Sanitation and Hygiene (WASH), Protection, and Food Security and Livelihoods (FSL) have been assessed to map the situation in these counties as of March 2020. The Rumor Tracking overview¹ provides a qualitative assessment of rumours across the country related to sources and transmission of COVID-19, symptoms, prevention and treatment, as well as the government and humanitarian response. This factsheet is intended to compliment in-depth State and sector analysis, as part of the [monthly sector factsheets](#), and quarterly [HSM State Situation Overviews](#).

Vulnerability Matrix

In collaboration with the Office for the Coordination of Humanitarian Affairs (OCHA) and the Needs Analysis Working Group (NAWG), REACH supported a risk analysis aimed at identifying the counties in South Sudan at the highest risk of COVID-19 entry and spread, and the counties with populations with high intersectoral vulnerabilities, that are likely to experience more serious COVID-19 disease outcomes. Composite indicators were constructed for each of these indices using available data sources, and scores were calculated for each county.

- For 'Risk of COVID-19 entry and spread': a combination of flow monitoring data (IOM, UNHCR, REACH), COVID-19 caseloads in neighbouring countries (UNICEF), population density (OCHA COD-PS, FSNMS, GHSL), and the presence of IDP/Refugee populations were used. Counties were scored on a scale from 0-12.
- For 'Intersectoral Vulnerabilities': a combination of population density, elderly demographic data (FSNMS), food insecurity and acute malnutrition projections (IPC), access to soap and water (FSNMS), access to healthcare (FSNMS), and proxy indicators for the level of infectious and chronic disease (IDSR, FSNMS), were used. Counties were scored on a scale from 0-25. The following 19 priority counties were chosen based on high scores in both 'risk of entry and spread' and 'intersectoral vulnerability' indices.

Map 1: Prioritised counties for COVID-19 Response



1. The Rumour Tracking Overview can be found on page 2.

For following pages:

2. A protected/improved waterpoint includes: boreholes, protected wells, tapstands, donkey carts, water kiosks and piped systems. Unprotected waterpoints are significantly more likely to be exposed to contaminants (animals, faeces, rainwater etc).

3. NC refers to 'no-consensus', which is assigned to responses when several Key Informant Surveys from the same settlement are triangulated and there is not agreement on one indicator.

4. Source: IPC - [Integrated Food Security](#) Phase Classification, Projection 1 February-April 2020

5. Food consumption coping strategies are methods adopted by households to increase existing food stocks such as reducing the number of meals, reducing food sizes, prioritising children eating in the household before adults, and skipping entire days without food.

Rumours and Perceptions Tracking

Whole of South Sudan Overview March 2020

Context and Methodology

Since March 2020, REACH has sought to improve data on perceptions and rumour monitoring by tracking COVID-19 perceptions and rumours to inform risk communication and outreach strategies. For more information, please refer to briefs produced in collaboration with the Communication and Community Engagement Working Group (CCEWG) and factsheets produced by REACH on [preferred communication modalities](#). A semi-structured qualitative tool was designed to assess community perceptions and concerns related to COVID-19. Data was collected by REACH enumerators in face-to-face interviews with Key Informants (KIs) in settlements with REACH bases. KIs were members of the local community, and selected using purposive sampling. Therefore, findings are indicative only.

Key Trends

- A number of key trends have emerged in community perceptions of the virus across South Sudan. In all assessed locations, there was a disparity between how respondents understood the severity of the virus, and the likelihood they would contract it. This disparity was especially pronounced in early May, as social distancing measures were relaxed across the country (despite an uptick in confirmed cases), leading to rumours that the virus was eradicated and did not pose a continued threat.
- There has been a widespread rumour that South Sudanese people could not contract the virus due to perceived superior immune systems, especially when compared to groups outside the country, such as Westerners and East Asians. These rumors were reported in all assessed locations, but were particularly prevalent in the Greater Equatorias.
- Rumours relating to South Sudan's hot and humid climate acting as a stopgap for the spread of the virus were reported across the assessed locations.
- In Jonglei and Greater Equatoria, respondents reported local communities were fearful of people who had come from outside the settlement or crossed international and county borders. However, in Northern Bahr el Ghazal (NBeG), no fears related to population movement were reported, despite the presence of returnees and other movements from Sudan.
- Spiritual and religious beliefs, especially the perceptions that god will provide protection continued to be commonly reported, and seemed especially prevalent in Jonglei and NBeG.
- KIs consistently desire for more information. In all assessed locations there were numerous requests from the community to clarify health information – such as whether drinking tea prevents coronavirus- and for government and humanitarian actors to provide more guidance on options for COVID-19 prevention and treatment methods.

Sources and Transmission of COVID-19

- Rumours suggest that South Sudanese are immune, due to a belief the virus cannot be transmitted to black-skinned Africans and that the hot weather will kill it. Some PoC residents, particularly in Bentiu, Bor and Wau, had reportedly been influenced by this rumour, choosing to stay in the PoC in the belief that the virus will not affect them.
- KIs from some rural communities, who may be less familiar with social distancing measures, expressed distrust and anger at guidelines altering physical-greeting practices, in particular, hand-shaking. Rural communities also reported that they were more protected from the virus than urban centers.
- Discriminatory rumours were generally directed towards “outsiders”, including “foreigners” in particular, Chinese and Caucasian and UN/INGO staff.

Symptoms of COVID-19

- While there have been relatively few rumours tracked regarding symptoms, recorded rumours suggested the coronavirus was “similar to the common flu” and should be identified and treated as such—these have been especially prevalent in NBeG.

Prevention and Treatment of COVID-19

- A widespread rumour suggested Africans could prevent COVID-19 by drinking tea with salt before sunrise. This belief might encourage community members to break social distancing guidelines to communally drink tea in local shops or with friends and family.
- Some rumours promoted the consumption of certain foodstuffs and use of natural remedies, including bitter roots and leaves, aribe, gitar and lulub fruits. Rumours that eating raw garlic, onion, ginger and reptiles (crocodile and python) could prevent COVID-19 were also reported, and were particularly common in both Panyijar and Pariang counties in Unity State.
- Perceptions on the humanitarian response were likely influenced by the initial cases of confirmed COVID-19 among UN staff. In Bentiu, Bor and Wau PoCs, KIs reported people were afraid of interacting with UN staff or visiting UN facilities. Reticence to visit UN facilities, especially if they contain medical clinics, may make it less likely that people seek medical care for treatable illnesses.
- Rumours were reported that the PoCs were closing and that people were being forced to exit. Official messaging reported that people had the choice to leave the PoCs, but would not be forced to do so; the prevalence of this rumour suggests that this messaging has not been fully understood by populations in the PoCs.

Area of Knowledge Methodology

South Sudan - March 2020

Methodology

To provide an indicative overview of the situation in hard-to-reach areas across South Sudan, REACH uses primary data from key informants who have recently arrived from, recently visited, or receive regular information from a settlement or "Area of Knowledge" (AoK). Information for this report was collected from the protection of civilians (PoC) site, collective centres, markets, towns, and through phone calling in March 2020.

In-depth interviews on humanitarian needs are conducted on a monthly basis using a structured survey tool. After data collection is completed, all data is aggregated at settlement level, and settlements are assigned the modal or most credible response. When no consensus (NC) was found for a settlement, that settlement is not included in reporting.

Only counties with interview coverage of at least 5% of all settlements in a given month were included in analysis. Due to access and operational constraints, the specific settlements assessed within each county each month vary.

For the purpose of this factsheet, all percentages provided are indicative of the proportion of assessed settlements in the county confirming the answer to that indicator. Throughout this factsheet, 'most commonly reported' indicates the option that was selected by the highest proportion of assessed settlements in March.

More details of the methodology can be found in the [AoK ToRs](#).

About REACH Initiative

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).

Visit www.reach-initiative.org and follow us @REACH_info.

Juba County Profile

Central Equatoria State, South Sudan - March 2020

County Overview

A contextualised high proportion of assessed settlements reported protection concerns in Juba County in March 2020. Adequate access to food remained low and high levels of severe hunger were reported, which may be a result of rising food prices and therefore declining purchasing power, affecting mainly low income households. In Juba City, many are dependent on the market as their main source of food, making communities vulnerable to market restrictions in line with COVID-19 contingency. Juba County has seen the highest rates of the virus so far, with the majority of cases reported from Juba town.



Communications

Preferred spoken language:
Juba Arabic
Preferred information source:
Chief/Community Leader

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Pharmacy (52%)

Most commonly reported health issue:
Malaria (52%)

Protection

Most commonly reported protection concern:

Women: **Family Separation (26%)** Men: **Family Separation (30%)**

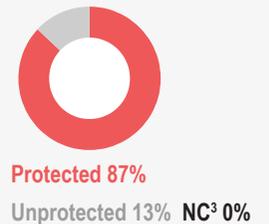
Girls: **Early Marriage (39%)** Boys: **Looting (39%)**

WASH

Reported primary means of washing hands

Soap 17%
Ash/Sand 22%
Water only 43%
Don't wash 17%

Main water source:²



Most commonly reported watersource: **Borehole (65%)**

69% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

100% of key informants reported inadequate access to food

57% of key informants reported that their main source of food was cultivated

4% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Kajo-Keji County Profile

Central Equatoria State, South Sudan - March 2020

County Overview

Kajo Keji is one of the most food insecure counties in the state, making it particularly vulnerable to a COVID-19 outbreak. Inadequate food stocks due to delayed and heavy rainfall in the last quarter of 2019 resulted in the exhaustion of food stocks earlier than expected, impacting adequate access to food in the county. IPC predictions also cited rising food prices, impacting communities using the market to access food in the peak of the lean season (June), particularly if border restrictions limit foodstuff arriving from Uganda.



Communications

Preferred spoken language:
Kuku
Preferred information source:
Chief/Community Leader

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (87%)

Most commonly reported health issue:
Malaria (53%)

Protection

Most commonly reported protection concern:

Women: **Domestic Violence and Sexual Violence (13%)**
Men: **Family Separation (7%)**

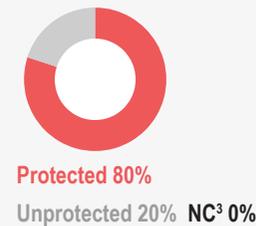
Girls: **Early Marriage (47%)**
Boys: **Early marriage (27%)**

WASH

Reported primary means of washing hands

Soap **20%**
Ash/Sand **7%**
Water only **40%**
Don't wash **33%**

Main water source:²



Most commonly reported watersource: **Borehole (80%)**

20% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 4 (Emergency) for projection 1)⁴

93% of key informants reported inadequate access to food

67% of key informants reported that their main source of food was cultivated

13% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Yei County Profile

Central Equatoria State, South Sudan - March 2020

County Overview

Heavy rainfall and the presence of pests resulted in low harvest yields, impacting food stocks to last the dry season. As the revitalised 2019 peace agreement halted conflict across most of the county at the start of 2020, the reported IDP presence increased, many arriving from neighbouring counties to seek refuge from insecurity and humanitarian needs, putting pressure on the availability of food and services. Bordering with Uganda, Yei is a major trading hub with a continued flow of traders travelling between the two countries. Continued flows of IDPs and trading routes increases the risk of COVID-19 transmission.



Communications

Preferred spoken language:
Juba Arabic
Preferred information source:
Community Mobilisers

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Hospital (92%)

Most commonly reported health issue:
Malaria (54%)

Protection

Most commonly reported protection concern:

Women: **Domestic Violence (46%)**
Men: **Domestic Violence (69%)**

Girls: **Early Marriage (46%)**
Boys: **Violence between neighbors (46%)**

WASH

Reported primary means of washing hands

Soap **31%**
Ash/Sand **23%**
Water only **38%**
Don't wash **8%**

Main water source:²



Most commonly reported watersource: **Borehole (100%)**

0% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

54% of key informants reported inadequate access to food

100% of key informants reported that their main source of food was cultivated

0% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Magwi County Profile

Eastern Equatoria State, South Sudan - March 2020

County Overview

Locusts were reported in Magwi in February 2020; if the locusts laid eggs this will negatively influence planting in the upcoming season, which will likely have a big impact on food security as communities rely heavily on agricultural production for livelihoods. Additionally, Magwi County sees a lot of cross-border movement and is a key route for trade coming from Uganda. There is an increased risk of COVID-19 cases being imported, and for these cases to be spread throughout the county.



Communications

Preferred spoken language:
Juba Arabic/Madi
Preferred information source:
Friend/Family

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (100%)

Most commonly reported health issue:
Malaria (50%)

Protection

Most commonly reported protection concern:

Women: Looting (25%) Men: Looting (25%)

Girls: Early Marriage (47%) Boys: Early marriage (13%)

WASH

Reported primary means of washing hands



Main water source:²



Most commonly reported watersource: Borehole (100%)

0% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

100% of key informants reported inadequate access to food

75% of key informants reported that their main source of food was bought

0% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Aweil East County Profile

Northern Bahr el Ghazal State, South Sudan - March 2020

County Overview

Aweil East County is located at a strategic border between Sudan and South Sudan. Two of the largest markets in Aweil East, located in Wanjok and Wararar, depend on supplies from Sudan. Despite movement restrictions in response to the COVID-19 outbreak, a small-scale cross-border trade continues in Northern Bahr el Ghazal, which may increase transmission of COVID-19. Before the COVID-19 outbreak, food security was a major concern in the county because of last season's flooding and pests, which KIs reported destroyed crops, leaving the population with limited harvest and dependent on the market for food. Access to basic services including health, water and sanitation remains a concern for most populations. The outbreak of COVID-19 pandemic will likely worsen the humanitarian situation in Aweil East County.



Communications

Preferred spoken language:
Dinka
Preferred information source:
Local Authority

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (90%)

Most commonly reported health issue:
Waterborne Disease (47%)

Protection

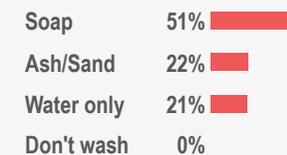
Most commonly reported protection concern:

Women: Domestic Violence (29%) Men: Family Separation (22%)

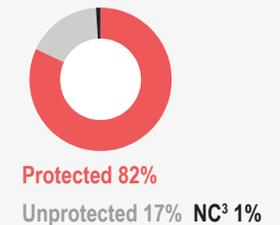
Girls: Early Marriage (48%) Boys: Domestic Violence (23%)

WASH

Reported primary means of washing hands



Main water source:²



Most commonly reported watersource: Borehole (81%)

27% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

70% of key informants reported inadequate access to food

49% of key informants reported that their main source of food was cultivated

33% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Aweil North County Profile

Northern Bahr el Ghazal State, South Sudan - March 2020

County Overview

Aweil North hosts Gok Machar, which is one of the main trade hubs for Northern Bahr el Ghazal. As of March 2020, according to KIs, Gok Machar had not been targeted with messaging surrounding COVID-19, indicating that traders and the host community might be unaware of methods to protect themselves and stop the spread. Furthermore, households in the county are heavily dependent on markets, and households will likely struggle to find alternative sources of livelihoods should access reduce due to COVID-19 and preventative measures.



📡 Communications

Preferred spoken language:
Dinka
Preferred information source:
Local Authority

🏥 Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (85%)

Most commonly reported health issue:
Malaria (39%)

🛡️ Protection

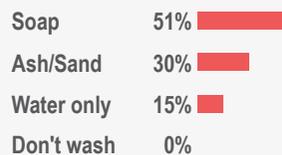
Most commonly reported protection concern:

Women: **Family Separation (27%)** Men: **Family Separation (22%)**

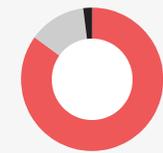
Girls: **Early Marriage (34%)** Boys: **Looting (22%)**

🚰 WASH

Reported primary means of washing hands



Main water source:²



Protected 85%
Unprotected 13% **NC**³ 2%

Most commonly reported watersource: **Borehole (85%)**

25% of key informants reported a distance of 1 hour or more to access their preferred water source

🍲 FSL (IPC Phase 4 (Emergency) for projection 1)⁴

88% of key informants reported inadequate access to food

40% of key informants reported that their main source of food was bought

55% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Aweil West County Profile

Northern Bahr el Ghazal State, South Sudan - March 2020

County Overview

Aweil West hosts the largest market in the state (Aweil Town) which is the main hub for trade in the region, and regularly receives IDPs from across the region seeking casual labour opportunities. Reported access to food rapidly decreased, with a low percentage of assessed settlements reporting adequate access in March. The market is one of the main sources of food, making the county vulnerable to shocks if cross-border movement is limited or stopped. Due to a lack of cross-border regulation, Aweil West is also vulnerable to cross-border cases of COVID-19.



📡 Communications

Preferred spoken language:
Dinka
Preferred information source:
Chief/Community Leader

🏥 Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (91%)

Most commonly reported health issue:
Malaria (35%)

🛡️ Protection

Most commonly reported protection concern:

Women: **Domestic Violence (30%)** Men: **Family Separation (11%)**

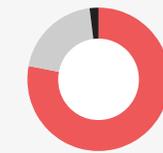
Girls: **Early Marriage (50%)** Boys: **Early marriage (20%)**

🚰 WASH

Reported primary means of washing hands



Main water source:²



Protected 78%
Unprotected 20% **NC**³ 2%

Most commonly reported watersource: **Borehole (77%)**

15% of key informants reported a distance of 1 hour or more to access their preferred water source

🍲 FSL (IPC Phase 3 (Crisis) for projection 1)⁴

92% of key informants reported inadequate access to food

59% of key informants reported that their main source of food was cultivated

44% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Wau County Profile

Western Bahr el Ghazal State, South Sudan - March 2020

County Overview

Limited access to sufficient water points in and around Wau Town has resulted in congestion around water points, and insufficient water for household consumption and COVID contingency measures. Shocks such as reduced market access and high prices due to lockdown measures could exacerbate existing food insecurity. Wau County has a high reported presence of IDPs, with many individuals coming to Wau Town to access the market and humanitarian services. This increases the likelihood of COVID-19 transmission.



Communications

Preferred spoken language:
Classical Arabic
Preferred information source:
Local Authority

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (69%)

Most commonly reported health issue:
Malaria (37%)

Protection

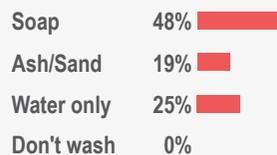
Most commonly reported protection concern:

Women: **Family Separation (17%)** Men: **Family Separation (19%)**

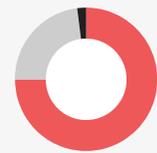
Girls: **Early Marriage (15%)** Boys: **Family Separation (15%)**

WASH

Reported primary means of washing hands



Main water source:²



Protected 75%
Unprotected 23% NC³ 2%

Most commonly reported watersource: **Donkey Cart (40%)**

12% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

59% of key informants reported inadequate access to food

53% of key informants reported that their main source of food was bought

49% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Gogrial West County Profile

Warrap State, South Sudan - March 2020

County Overview

Ongoing insecurity in northern Warrap have resulted in large scale displacement. In March, assessed settlements reported an increase in the reported presence of IDPs from December 2019, most likely due to increased violence in the region, as well as reported limited access to health services. Flooding in the last quarter of 2019 resulted in low crop yields and low food stocks. This resulted in high reported adoption of consumption coping strategies, raising concerns of community resilience to shocks. A reported lack of adequate access to boreholes impacts sufficient water access necessary for COVID-19 measures.



Communications

Preferred spoken language:
Dinka
Preferred information source:
Friend/Family

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (93%)

Most commonly reported health issue:
Malaria (46%)

Protection

Most commonly reported protection concern:

Women: **Family Separation (18%)** Men: **Domestic Violence (14%)**

Girls: **Early Marriage (11%)** Boys: **Abduction and violence between neighbors (7%)**

WASH

Reported primary means of washing hands



Main water source:²



Protected 50%
Unprotected 50% NC³ 0%

Most commonly reported watersource: **Borehole (50%)**

11% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

64% of key informants reported inadequate access to food

54% of key informants reported that their main source of food was bought

11% of key informants reported having received food assistance in the first quarter of 2020

96% of key informants reported using at least one food consumption coping strategy⁵

Twic County Profile

Warrap State, South Sudan - March 2020

County Overview

Twic County is the gateway to major trade and migration routes with Sudan. Low food stocks from high rainfall in 2019 resulted in low yields, impacting adequate access to food into the first quarter of 2020. Furthermore, reported increased rates of intercommunal violence during the dry season contributed to reported protection concerns and impacted access to livelihoods and water sources. This also resulted in population movement, leaving recently displaced populations in need of key shelter materials and non-food items, which may reduce the effectiveness of COVID-19 contingency measures for large sections of the community.



Communications

Preferred spoken language:
Dinka
Preferred information source:
Friend/Family

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (74%)

Most commonly reported health issue:
Water-borne diseases (44%)

Protection

Most commonly reported protection concern:

Women: **Sexual Violence (21%)**
Men: **Killing/ Injury from another tribe (44%)**
Girls: **Sexual Violence (26%)**
Boys: **Killing/ Injury from another tribe (35%)**

WASH

Reported primary means of washing hands

Soap	16%
Ash/Sand	60%
Water only	23%
Don't wash	0%

Main water source:²



Protected 63%
Unprotected 28% Other 9%

Most commonly reported watersource: **Borehole (63%)**

53% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

100% of key informants reported inadequate access to food

67% of key informants reported that their main source of food was bought

28% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Bor South County Profile

Jonglei State, South Sudan - March 2020

County Overview

The combined effects of flooding in late 2019 on access to food stocks, livestock and functional markets appear to have accelerated the onset of the lean season for vulnerable populations in Bor South and exacerbated existing vulnerabilities. The closure of national and state borders in response to COVID-19 has further disrupted supply chains and pushed up market prices at a time when food stocks are depleting and market reliance may increase.



Communications

Preferred spoken language:
Dinka
Preferred information source:
Friend/Family

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Pharmacy (100%)

Most commonly reported health issue:
Malaria (23%)

Protection

Most commonly reported protection concern:

Women: **Domestic Violence (42%)**
Men: **Family Separation (19%)**
Girls: **Early Marriage (56%)**
Boys: **Harassment to disclose information (21%)**

WASH

Reported primary means of washing hands

Soap	54%
Ash/Sand	18%
Water only	23%
Don't wash	0%

Main water source:²



Protected 93%
Unprotected 5% NC³ 2%

Most commonly reported watersource: **Borehole (93%)**

0% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

58% of key informants reported inadequate access to food

30% of key informants reported that their main source of food was bought

95% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Fashoda County Profile

Upper Nile State, South Sudan - March 2020

County Overview

High dependence on markets and humanitarian food distributions in Fashoda County suggest vulnerability to food insecurity, should these means be restricted due to border closures and scale backs on humanitarian operations. The IPC projects crisis level acute food insecurity between May and June 2020 and emergency levels of acute malnutrition for the period between May and August 2020. These food insecurity vulnerabilities make the county vulnerable to the effects of COVID-19.



Communications

Preferred spoken language:
English/Shilluk
Preferred information source:
Chief/Community Leader

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Maternity Centre and Nutrition Centre (98%)

Most commonly reported health issue:

Protection

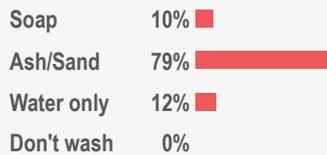
Most commonly reported protection concern:

Women: **Domestic Violence (14%)**
Men: **Family Separation (17%)**

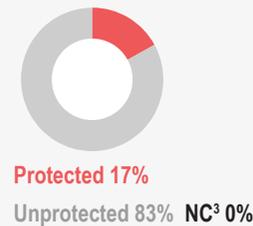
Girls: **Domestic Violence (17%)**
Boys: **Violence between neighbors (17%)**

WASH

Reported primary means of washing hands



Main water source:²



Most commonly reported watersource: **River (71%)**

14% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

33% of key informants reported inadequate access to food

50% of key informants reported that their main source of food was cultivated; and the other 50% reported that it was bought

93% of key informants reported having received food assistance in the first quarter of 2020

31% of key informants reported using at least one food consumption coping strategy⁵

Malakal County Profile

Upper Nile State, South Sudan - March 2020

County Overview

The use of soap for handwashing and access to health facilities within walking distance was relatively high in Malakal County. However, continued travel from Sudan, with confirmed cases of COVID-19, through Renk towards Malakal County suggests an increased vulnerability to the spread of COVID-19, particularly in the PoC. Further, the closure of national and state borders has disrupted supply chains, resulting in increased market prices and obstructing humanitarian operations at the end of the lean season when food stocks are low.



Communications

Preferred spoken language:
Classical Arabic
Preferred information source:
Chief/Community Leader

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (88%)

Most commonly reported health issue:
Water-borne diseases (67%)

Protection

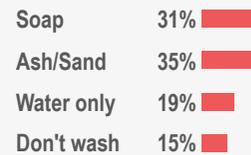
Most commonly reported protection concern:

Women: **Family Separation (19%)**
Men: **Domestic Violence (23%)**

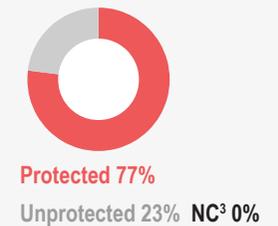
Girls: **Violence between neighbors (8%)**
Boys: **None (100%)**

WASH

Reported primary means of washing hands



Main water source:²



Most commonly reported watersource: **Tapstand (73%)**

42% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 4 (Emergency) for projection 1)⁴

15% of key informants reported inadequate access to food

50% of key informants reported that their main source of food was cultivated

81% of key informants reported having received food assistance in the first quarter of 2020

96% of key informants reported using at least one food consumption coping strategy⁵

Renk County Profile

Upper Nile State, South Sudan - March 2020

County Overview

Renk County, on the border with Sudan, relies on trade routes from the north to supply local markets. Combined with low access to improved water sources, low reported use of soap for handwashing, and low access to health facilities, the county is at risk of the spread of COVID-19. Furthermore, reports of rising food prices due to border closure may worsen the continuously high reported rates of malnutrition.



Communications

Preferred spoken language: **Classical Arabic/Dinka**
Preferred information source: **Friend/Family**

Health

Most commonly reported type of primary healthcare facility accessible by foot: **None (74%)**

Most commonly reported health issue: **Malaria (82%)**

Protection

Most commonly reported protection concern:

Women: **Domestic Violence (56%)**
Men: **Domestic Violence (9%)**

Girls: **Early Marriage (68%)**
Boys: **Domestic Violence (12%)**

WASH

Reported primary means of washing hands

Soap **3%**
Ash/Sand **9%**
Water only **26%**
Don't wash **50%**

Main water source:²



Protected 38%
Unprotected 56% NC³ 6%

Most commonly reported watersource: **Well (26%)**

3% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

41% of key informants reported inadequate access to food

85% of key informants reported that their main source of food was cultivated

18% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Koch County Profile

Unity State, South Sudan - March 2020

County Overview

Persistent intercommunal violence, cattle raiding and revenge killings restricted livelihood activities, access to other communities and markets, and humanitarian assistance in March. Market food prices are highly sensitive to road conditions, and likely to increase with the start of the rainy season, the deterioration of the road network, and restrictions on commercial traffic as part of COVID-19 preventative measures. In addition, frequent population movement between Koch and Bentiu Protection of Civilians (PoC) site and the arrival of IDP and refugee returnees, pose a threat for transmission of the virus.



Communications

Preferred spoken language: **Nuer**
Preferred information source: **Local Authority**

Health

Most commonly reported type of primary healthcare facility accessible by foot: **Nutrition Centre (52%)**

Most commonly reported health issue: **Malaria (52%)**

Protection

Most commonly reported protection concern:

Women: **Domestic Violence (21%)**
Men: **Looting (21%)**

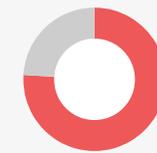
Girls: **Domestic Violence (15%)**
Boys: **Violence between neighbors (12%)**

WASH

Reported primary means of washing hands

Soap **6%**
Ash/Sand **12%**
Water only **76%**
Don't wash **0%**

Main water source:²



Protected 76%
Unprotected 24% NC³ 0%

Most commonly reported watersource: **Borehole (73%)**

39% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

52% of key informants reported inadequate access to food

55% of key informants reported that their main source of food was from a NGO

79% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Mayom County Profile

Unity State, South Sudan - March 2020

County Overview

Large-scale flooding in the second quarter of 2019 destroyed crops, killed livestock, and caused internal displacement within the county. Despite targeted food assistance, some of the population remains food insecure and dependent on humanitarian support. Furthermore, frequent intercommunal violence and cattle raiding incidents with neighbouring counties disrupt livelihood activities and humanitarian assistance, resulting in small-scale displacement. The start of the rainy season is also likely to interfere with disaster recovery efforts and limit COVID-19 contingency plans.



Communications

Preferred spoken language:
English/Nuer
Preferred information source:
Local Authority

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Nutrition Centre (76%)

Most commonly reported health issue:
Water-borne diseases (85%)

Protection

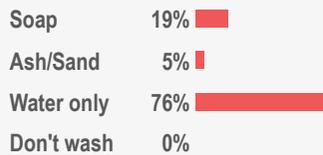
Most commonly reported protection concern:

Women: Domestic Violence (24%)
Men: Looting (14%)

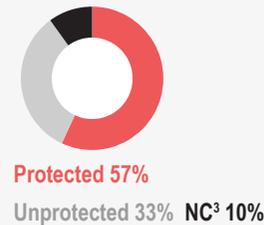
Girls: Domestic Violence (24%)
Boys: Violence between neighbors (14%)

WASH

Reported primary means of washing hands



Main water source:²



Most commonly reported watersource: Borehole (33%)

10% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

67% of key informants reported inadequate access to food

43% of key informants reported that their main source of food was from a NGO

67% of key informants reported having received food assistance in the first quarter of 2020

95% of key informants reported using at least one food consumption coping strategy⁵

Panyijiar County Profile

Unity State, South Sudan - March 2020

County Overview

Panyijiar has a vulnerable population comprised of IDPs from central Unity, with reportedly limited access to health services and high levels of food insecurity. Large-scale flooding in the second half of 2019 destroyed crops and caused livestock disease, exacerbating food insecurity in an already conflict-affected population. Lack of adequate road infrastructure has left Panyijiar disconnected from the rest of the state, and reliant on air and river transportation for goods and humanitarian assistance. Restrictions on river trading from Juba due to COVID-19 are likely to cause some depletion of staple foods and high market prices.



Communications

Preferred spoken language: Nuer
Preferred information source:
Local Authority

Health

Most commonly reported type of primary healthcare facility accessible by foot:
Primary Health Centre (100%)

Most commonly reported health issue:
Malaria (78%)

Protection

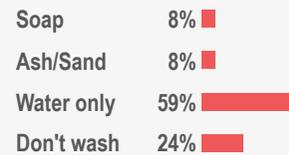
Most commonly reported protection concern:

Women: Looting (3%)
Men: Looting (3%)

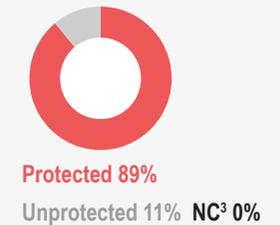
Girls: Looting (3%)
Boys: Looting (3%)

WASH

Reported primary means of washing hands



Main water source:²



Most commonly reported watersource: Borehole (89%)

57% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

0% of key informants reported inadequate access to food

76% of key informants reported that their main source of food was from a NGO

100% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Pariang County Profile

Unity State, South Sudan - March 2020

County Overview

Local markets in the area are mainly supplied through products imported from Sudan, and are likely to experience rapid price fluctuations due to cross border restrictions, which will impact communities' access to food in the coming months. Additionally, the county has a large reported presence of refugees and households with a history of population movements to Sudan, where the virus has been detected. Porous border conditions and the presence of various informal crossings have so far limited the ability to impose and effectively monitor border population movement controls and health checks.



Communications

Preferred spoken language: **Dinka**
Preferred information source: **Friend/Family**

Health

Most commonly reported type of primary healthcare facility accessible by foot: **Hospital and Nutrition Centre (100%)**

Most commonly reported health issue: **Malaria (44%)**

Protection

Most commonly reported protection concern:

Women: **Domestic Violence (53%)**
Men: **None (100%)**

Girls: **Early Marriage (12%)**
Boys: **None (100%)**

WASH

Reported primary means of washing hands

Soap: **0%**
Ash/Sand: **3%**
Water only: **97%**
Don't wash: **0%**

Main water source:²



Most commonly reported watersource: **Borehole (100%)**

14% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

10% of key informants reported inadequate access to food

100% of key informants reported that their main source of food was cultivated

5% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵

Rubkona County Profile

Unity State, South Sudan - March 2020

County Overview

The frequent movement of IDPs and refugee returnees in and out of the PoC, coupled with the continued flow of traders coming from Sudan and travelers arriving from Juba (areas known to have confirmed COVID-19 cases), poses a risk of virus transmission within the PoC and to surrounding counties. Furthermore, inadequate access to hygiene and sanitation facilities limit the implementation and effectiveness of preventative measures. Persisting criminality and localised forms of conflict pose additional challenges for launching health interventions and community awareness campaigns.



Communications

Preferred spoken language: **Nuer**
Preferred information source: **Local Authority**

Health

Most commonly reported type of primary healthcare facility accessible by foot: **Nutrition Centre (48%)**

Most commonly reported health issue: **Malaria (48%)**

Protection

Most commonly reported protection concern:

Women: **Domestic Violence (32%)**
Men: **Looting (16%)**

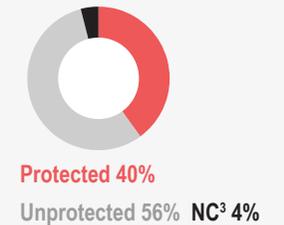
Girls: **Domestic Violence (32%)**
Boys: **Cattle raiding, domestic violence and violence between neighbors (8%)**

WASH

Reported primary means of washing hands

Soap: **20%**
Ash/Sand: **8%**
Water only: **60%**
Don't wash: **0%**

Main water source:²



Most commonly reported watersource: **River (40%)**

40% of key informants reported a distance of 1 hour or more to access their preferred water source

FSL (IPC Phase 3 (Crisis) for projection 1)⁴

40% of key informants reported inadequate access to food

84% of key informants reported that their main source of food was from a NGO

100% of key informants reported having received food assistance in the first quarter of 2020

100% of key informants reported using at least one food consumption coping strategy⁵