Assessment of Hard-to-Reach Areas in South Sudan

South Sudan Displacement Crisis

October 2019

Overview

The continuation of conflict since December 2013 has created a complex humanitarian crisis in the country, restricting humanitarian access and hindering the flow of information required by aid partners to deliver humanitarian assistance to populations in need. To address information gaps facing the humanitarian response in South Sudan, REACH employs its Area of Knowledge (AoK) methodology to collect relevant information in hard-to-reach areas to inform humanitarian planning and interventions outside formal settlement sites.

Using the AoK methodology, REACH remotely monitors needs and access to services in the Greater

Upper Nile, Greater Equatoria and Greater Bahr el Ghazal regions. AoK data is collected monthly and through multi-sector interviews with the following typology of Key Informants (KIs):

- Kls who are newly arrived internally displaced persons (IDPs) who have left a hard-to-reach settlement in the last month
- KIs who have been in contact with someone living in a hard-to-reach settlement, or have been visiting one in the last month (traders, migrants, family members, etc.)
- KIs who are remaining in hard-to-reach settlements, contacted through phone

Selected KIs are purposively sampled and have knowledge from within the last month about a specific settlement in South Sudan, with data collected at the settlement level. About half of settlements assessed have more than one KI reporting on the settlement. In these cases, data is aggregated at the settlement level according to a weighting mechanism, which can be found in the Terms of Reference (ToRs).

(Link to AoK Terms of Reference)

All percentages presented in this factsheet, unless otherwise specified, represent the proportion of settlements assessed with that specific response.

The findings presented in this factsheet are indicative of the broad food security and livelihood trends in assessed settlements in October 2019, and are not statistically generalisable.

Assessment Coverage

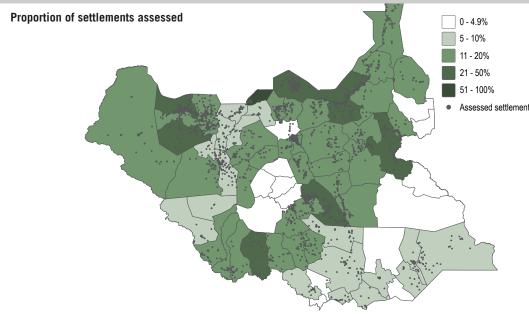
2,944 Key Informants interviewed

2,246 Settlements assessed

66 Counties assessed

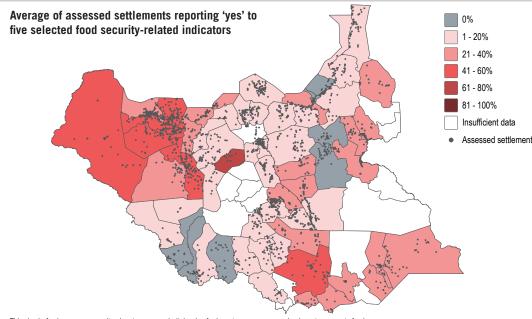
64 Counties with 5% or more coverage¹

Assessment coverage



¹ Data is only represented for counties in which at least 5% of settlements have been assessed. The most recent OCHA Common Operational Dataset (COD) released in February 2016 has been used as the reference for settlement names and locations.

Food access composite indicator



This simple food access composite aims to measure both levels of adequate access to food as well as severify of perceived hunger and application of severe consumption-based coping strategies. The composite was created by averaging the 'yes' responses of settlements reporting on the following indicators, with all indicators considered to have the same weight:

- Inadequate access to food
- Consuming one or no meals per day
- Skipping days to cope with a lack of food or money to buy food
- Perceived hunger from inadequate food access: severe or worst it can be
- Wild foods known to be making people sick consumed all the time



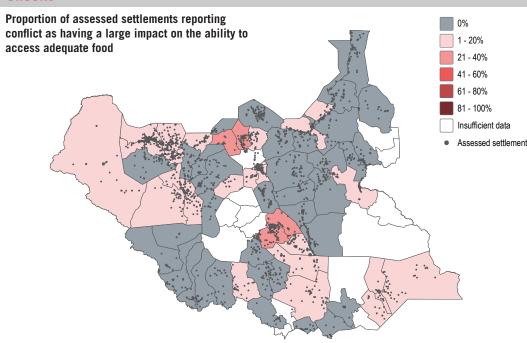


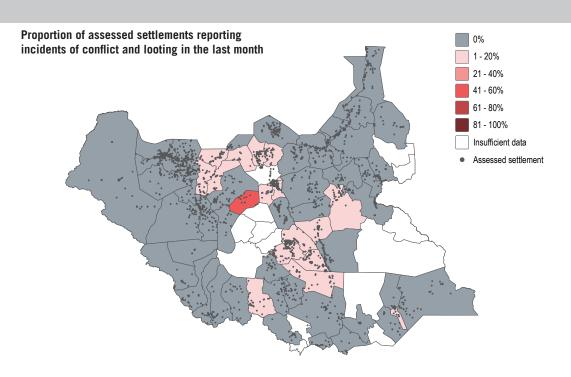
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Shocks





Shocks: IDPs

Top five assessed counties reporting presence of newly arrived IDPs as having a large impact on ability to access adequate food

Tonj East	42%
Gogrial West	26%
Gogrial East	25%
Magwi	22%
Twic	21%

Shocks: health

Top five assessed counties reporting perceived health problems as having a large impact on ability to access adequate food

Abiemnhom	100%
Pariang	85%
Canal/Pigi	77%
Kapoeta South	67%
Magwi	67%

Shocks: cereal prices

Top five assessed counties reporting increase in cereal prices as having a large impact on ability to access adequate food

Pariang	95%
Kapoeta South	83%
Abiemnhom	75%
Malakal	74%
Magwi	56%

Shocks: hunger

Top five assessed counties reporting hunger is severe or the worst it can be

Kapoeta South	67%
Juba	65%
Twic	59%
Tonj East	58%
Aweil West	47%

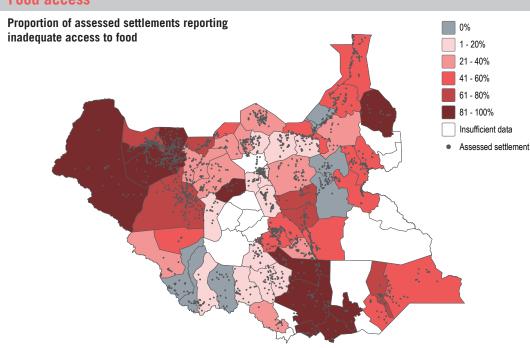


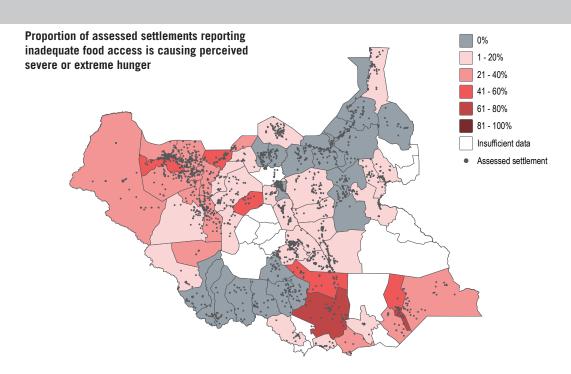
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Food access





Wild foods: nutrition Food coping: skipping days Wild foods: frequency **Meal frequency** Top five assessed counties reporting consumption Top five assessed counties reporting consumption Top five assessed counties reporting consuming Top five assessed counties reporting entire days of wild foods happens all of the time of wild foods that are known to make people sick on average one meal per day or less without eating as a coping strategy Fangak Aweil West Kapoeta South Toni East Yei Aweil South Tonj East Ulang Luakpiny/Nasir 60% Aweil Centre 83% Mvolo Ulang Juba Aweil East Jur River Kapoeta North Mundri East Tonj East Luakpiny/Nasir Raja 36%

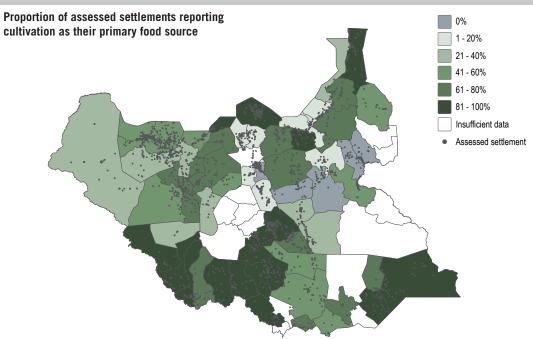


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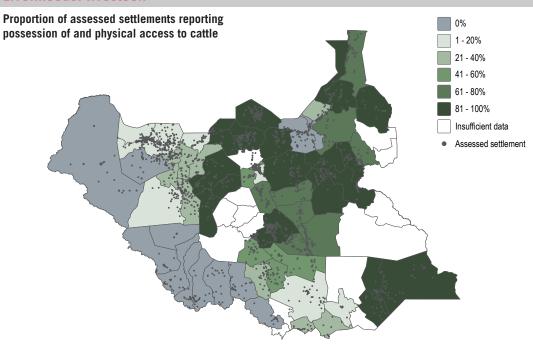
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Livelihoods: cultivation



Livelihoods: livestock



Agricultural inputs

Top five counties reporting inadequate access to farming tools

Juba	92%
Magwi	89%
Gogrial West	87%
Terekeka	77%
Gogrial East	75%

Land for cultivation

Top five counties reporting access restrictions to land for cultivation

Maban	50%
Akobo	47%
Manyo	45%
Wau	38%
Torit	28%

Food source: livestock

Top five counties reporting livestock as their primary food source

Aweil South	52%
Manyo	36%
Duk	32%
Luakpiny/Nasir	19%
Aweil East	16%

Livestock engagement

Top five counties reporting engagement in livestock activities

Abiemnhom	100%
Ayod	100%
Budi	100%
Kapoeta East	100%
Kapoeta North	100%

*Other assessed counties reporting 100% engaged in livestock activities include: Kapoeta South, Nyirol, Pariang, Ulang, and Uror.



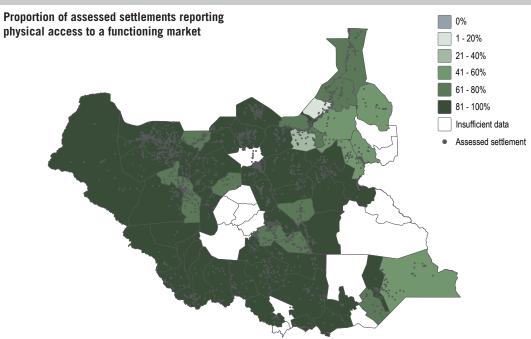


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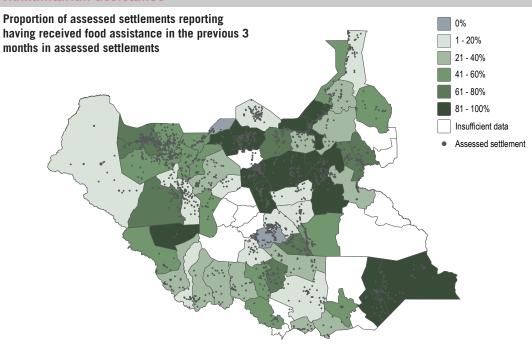
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Markets



Humanitarian assistance



Top five assessed counties reporting purchase as primary food source

Food source: purchasing

Tonj South	60%
Panyikang	57%
Raja	51%
Wau	50%
Gogrial West	48%

Livelihood: casual labour

Top five assessed counties reporting casual labour as a livelihood activity

Magwi	100%
Mundri East	100%
Raja	100%
Tonj South	100%
Yei	100%

Food source: humanitarian

Top five assessed counties reporting humanitarian assistance as primary food source in assessed settlements

Uror	100%
Leer	96%
Nyirol	96%
Fashoda	95%
Rubkona	90%

Humanitarian distribution

Top five assessed counties reporting no humanitarian assistance received in the past 3 months

Yirol West	100%
Pariang	97%
Yirol East	93%
Renk	88%
Nzara	88%

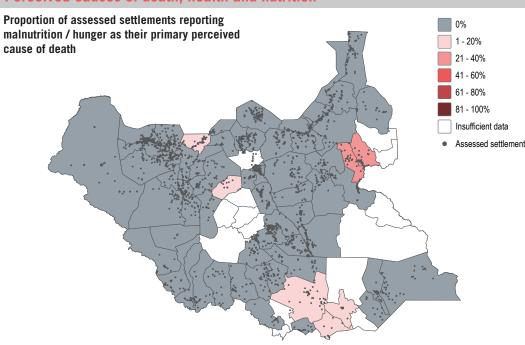


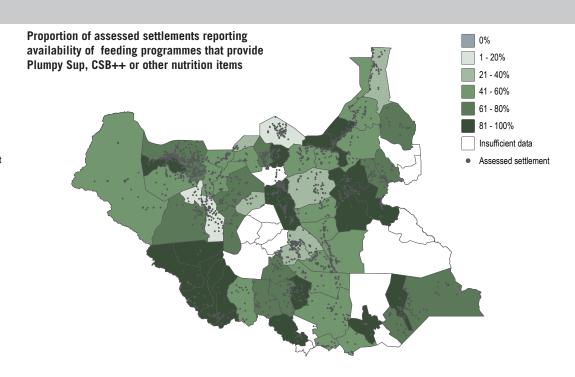
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Perceived causes of death, health and nutrition





Health: malnutrition Mortality increase Health: malaria **Health services** Top five assessed counties reporting a higher Top five assessed counties reporting perceived Top five assessed counties reporting malaria as Top five assessed counties reporting no physical perceived number of deaths than normal in the malnutrition as main health problem their main health problem access to health services last month Twic 65% **50%** Canal/Pigi Tonj East Maban 100% **Gogrial West** 31% Renk Ulang Manyo Tonj East Luakpiny/Nasir 100% Baliet Renk Tonj North 12% Melut **Gogrial West** Maridi 11% Melut Mvolo Duk Panyijiar

