

Assessment of Hard-to-Reach Areas in South Sudan

December 2018

### **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 hardto-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):

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

of settlements reporting on the following indicators, with all indicators considered to

The findings presented in this factsheet are indicative of the broad food security and livelihood trends in assessed settlements in December 2018, and are not statistically generalisable.

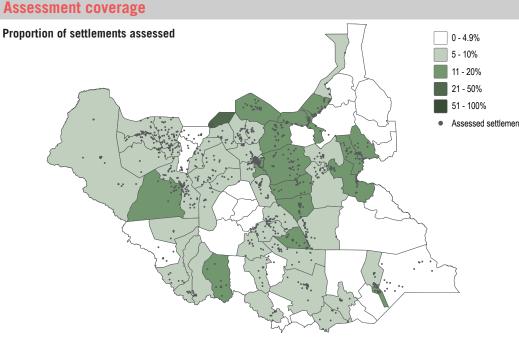
## **Assessment Coverage**

- 1,353 Key Informants interviewed
- 1,083 Settlements assessed
  - 58 Counties assessed
  - 52 Counties with 5% or more coverage<sup>1</sup>

- Perceived hunger from inadequate food access: severe or worst it can be

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- Wild foods known to be making people sick consumed all the time



<sup>1</sup>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.

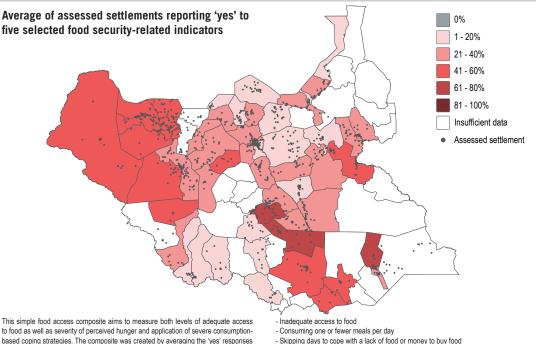


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Swiss Agency for Development and Cooperation SDC For more information on this factsheet please contact: REACH south.sudan@reach-initiative.org

have the same weight

## Food access composite indicator



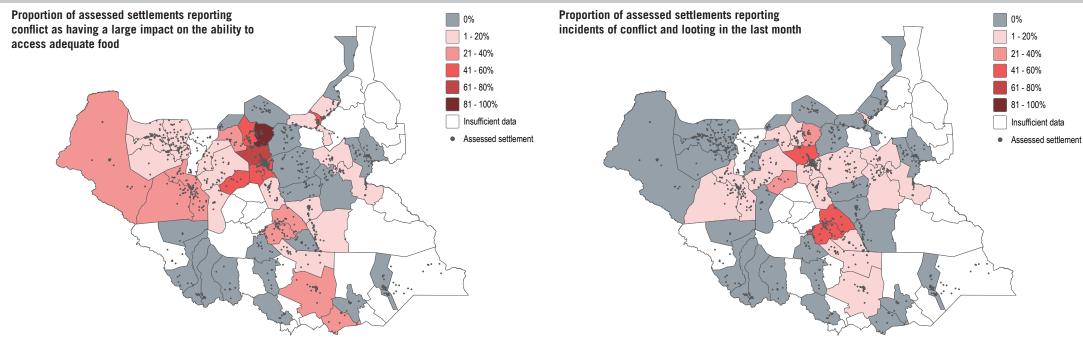


South Sudan Displacement Crisis

Assessment of Hard-to-Reach Areas in South Sudan

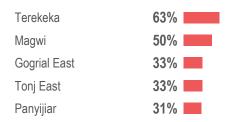
December 2018

## Shocks



## **Shocks: IDPs**

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



### Shocks: health

Rubkona

Guit

Koch

Pariang

Abiemnhom

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



## **Shocks: cereal prices**

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

78%	
68%	
62%	
62%	
53%	

## **Shocks: livestock**

Top five assessed counties reporting livestock disease outbreak as having a large impact on ability to access adequate food

Rubkona	71%
Aweil South	50%
Ayod	44%
Guit	33%
Aweil East	30%

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Pariang

Terekeka

Raja

Torit

Akobo

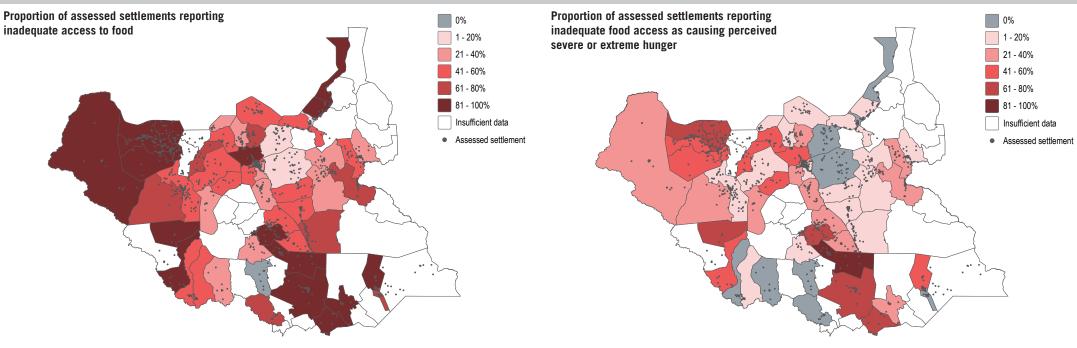


**South Sudan Displacement Crisis** 

Assessment of Hard-to-Reach Areas in South Sudan

**December 2018** 

## **Food access**



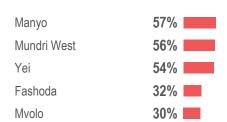
## Wild foods: frequency

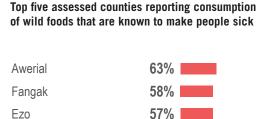
Wild foods: nutrition

Mundri West

Terekeka

Top five assessed counties reporting consumption of wild foods all of the time







# **Meal frequency**

Raja

Torit

Terekeka

Aweil East

Top five assessed counties reporting consuming on average one meal per day or less



# Food coping: skipping days

Top five assessed counties reporting entire days without eating as a coping strategy

Kapoeta North	83%
Akobo	71%
Raja	66%
Yirol West	61%
Jur River	59%





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Assessment of Hard-to-Reach Areas in South Sudan

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December 2018

## Livelihoods: cultivation **Livelihoods: livestock** Proportion of assessed settlements reporting Proportion of assessed settlements reporting 0% 0% cultivation as their primary food source possession of and physical access to cattle 1 - 20% 1 - 20% 21 - 40% 21 - 40% 41 - 60% 41 - 60% 61 - 80% 61 - 80% 81 - 100% 81 - 100% Insufficient data Insufficient data Assessed settlement Assessed settlement

Agricultural inp	uts	Land for cultivation		Food source: liv	estock	Livestock disease		
Top five counties rep agricultural inputs	orting inadequate access to	Top five counties reporting access restrictions to land for cultivation				Top five counties reporting a livestock disease outbreak		
Aweil Centre	100%	Akobo	100%	Kapoeta North	50%	Yambio	92%	
Kapoeta South	100%	Fashoda	77%	Aweil South	31%	Fangak	88%	
Magwi	100%	Wau	62%	Ulang	30%	Rubkona	88%	
Mundri West	100%	Manyo	57%	Uror	24%	Nzara	86%	
Mvolo	100%	Juba	54%	Akobo	21%	Awerial	84%	

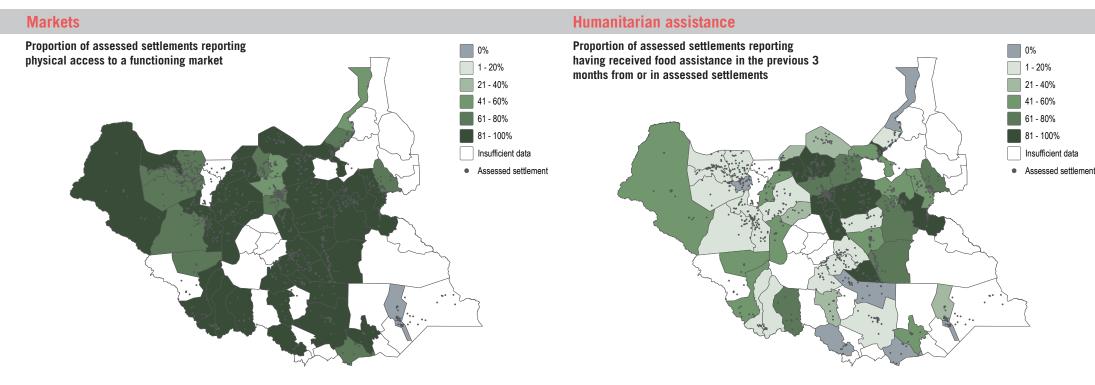


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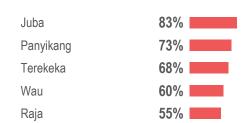
Assessment of Hard-to-Reach Areas in South Sudan

**December 2018** 



# Food source: purchasing

Top five assessed counties reporting purchase as primary food source



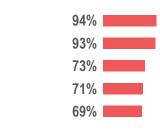
### Livelihood: casual labour

Top five assessed counties reporting casual labour as a livelihood activity



## Food source: humanitarian

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



## **Humanitarian distribution**

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

Aweil South	100%
Magwi	100%
Manyo	100%
Terekeka	100%
Yei	100%





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Nzara

Raja

Tonj East

Tonj South

Tonj North

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Mayendit

Rubkona

Panyijiar

Leer

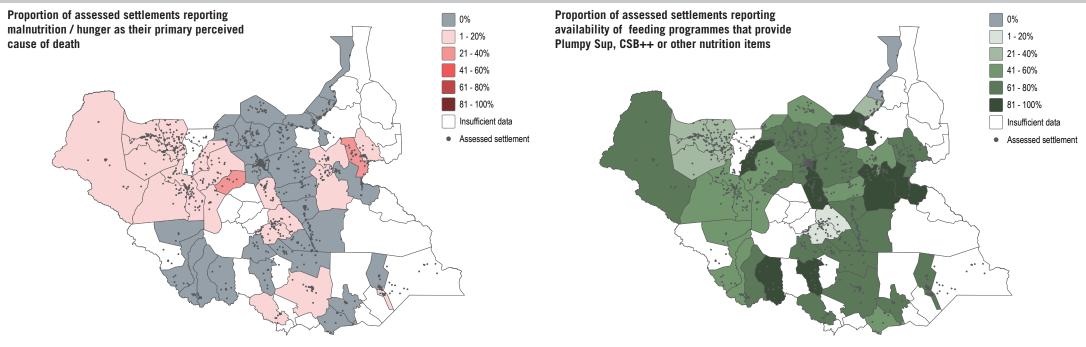
Guit



Assessment of Hard-to-Reach Areas in South Sudan

**December 2018** 

## Perceived causes of death, health and nutrition



## **Mortality increase**

Top five assessed counties reporting a higher perceived number of deaths than normal in the last month

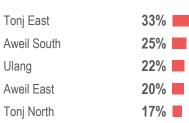


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Top five assessed counties reporting perceived hunger / malnutrition as main health problem



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Health: cholera	а					Ca	

Ezo

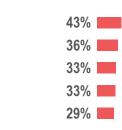
Leer

Koch

6

Mayom Tonj South

Top five assessed counties reporting cholera / diarrhoea as their main health problem



## **Health services**

Top five assessed counties reporting no physical access to health services

Manyo	71%
Aweil East	57%
Aweil West	50%
Fashoda	50%
Kapoeta North	50%



