Area of Knowledge - Neighbourhoods Factsheets

To inform the October-November 2020 Integrated Food Security Phase Classification Workshop

OVERVIEW

Crucial information gaps remain in South Sudan, with poor access to many parts of the country due to insecurity and inadequate infrastructure. These information gaps limit the effectiveness of humanitarian planning and implementation. In addition, since COVID-19 travel restrictions were put in place to avoid the spread of the virus countrywide in March 2020, the ability to carry out data collection has been even more constrained.¹ In this context, alternative and innovative data collection methodologies are required, to support humanitarian decision making and prioritisation. Building on its experience of conducting remote monthly monitoring through the Area of Knowledge (AoK) methodology in South Sudan since 2016, REACH, in coordination with the Organisation for the Coordination of Humanitarian Affairs (OCHA) and the Inter Cluster Coordination Group (ICCG), innovated a remote, Key Informant (KI)-based household methodology: the "Area of Knowledge-Neighbourhoods (AoK-N)".

REACH employs its AoK-N methodology to collect relevant information in hard-to-reach areas. The purpose of the AoK-N methodology is to provide household level data on needs to inform the response, in a context where direct household surveys are currently extremely limited. The AoK-N methodology aims to compare humanitarian needs across geographic areas, and it is intended to support strategic planning, prioritisation, and contribute, as one of many

data sources, to a more targeted and evidence-based humanitarian response. The neighbourhoods methodology was first developed by the <u>Care and Protection of Children (CPC) Learning Network</u> to gather population based data on difficult to measure or stigmatised concepts, such as Gender Based Violence (GBV). It is a remote KI-based methodology, based on the assumption that people reasonably know some information about other people in their immediate neighbourhoods. REACH conducted a pilot between the 16th and 26th of June 2020, covering three states in South Sudan to assess the practicality of this methodology and analysed the results through: 1) a comparison to data from Food, Security and Nutrition Monitoring System (FSNMS) Round 25, and 2) a verification exercise directly with selected households. The results of this analysis have been used to inform the full country-wide rollout of this methodology².

With the aim of facilitating a better understanding of the food security and livelihoods (FSL) situation in South Sudan and to inform the Integrated Food Security Phase Classification (IPC) October 2020 update, REACH has developed FSL factsheets of counties where households were assessed using the Area of Knowledge - Neighbourhood (AoK-N) methodology.

METHODOLOGY

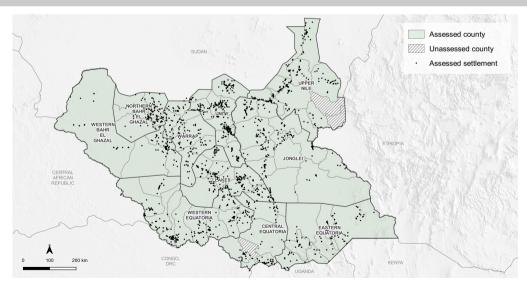
The 2020 South Sudan AoK-N assessment consisted of a quantitative remote multi-sectoral assessment implemented across all ten states of South Sudan between the 3rd of August and 1st of September 2020. With the objective of gathering comparable information across the entire country, REACH conducted 2,930 face-to-face and phone surveys, covering a total of 21,260 households, across 75 counties (see South Sudan Coverage Map on the right).

For the AoK-N methodology, 25 clusters were targeted per county, where each cluster was defined as a settlement or urban neighbourhood. For each cluster one Key Informant (KI) Interview was conducted, and KIs were purposively sampled. The selection criteria for a KI was that they had knowledge of their own settlement, knowledge on up to 9 of their closest neighbours geographically and had been established in the location they were reporting on for at least 1 month. Each KI was asked to list up to 9 geographically closest households to their own home and was then asked a multi-sectoral questionnaire about their own household, as well as each of the listed neighbours. Data was aggregated at the county level for analysis and weighted to compensate for over- or under-sampling of payams within the county.

Results are reported as a "% of households" and interpreted as any normal household survey, given certain acknowledgements and limitations. Key is that since households are not selected with probability sampling, the results are not statistically representative. In addition, there is added uncertainty in the validity of results, as most households are not reporting directly on their own needs.

Further information on the AoK-N methodology can be found in the Annex at the end of each State package.

SOUTH SUDAN COVERAGE MAP



¹Movement restrictions, included no inter-state travel, temporary cancellation of all internal United Nations Humanitarian Air Service (UNHAS) flights, and additional permissions required to carry out face-to-face data collection activities. Source: WHO, June 2020, South Sudan 2020 Humanitarian Response Plan COVID-19 Addendum.

²AoK-N State-level factsheets can be found at the REACH resource centre







Area of Knowledge-Neighbourhoods³: Juba County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

High prices	26%	
Couldn't harvest	18%	
Crops destroyed	17%	
No markets	12%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Casual labour	52 %	
Petty trade	34%	
Consuming crops	24%	
Collecting wild food	17%	
Livestock	11%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	36%	
Insecurity	25%	
Natural disaster	20%	
Cattle destroyed	17%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	64%	
Limiting meal sizes	28%	
Adults don't eat so children can	19%	
No coping strategies	5 %	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



70% At least some food22% No food8% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



63% At least some food 24% Sleep hungry 13% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



73% At least some food18% No food9% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³ Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Juba County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



60% Yes 32% No 8% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



48% Yes 32% No 20% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



16% Yes <mark>75%</mark> No 9% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	46%	
Flooding	13%	
Too far	12%	
No market access barriers	3%	1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	8%	
Non-food items	5%	
Cash	0%	
No humanitarian aid	92%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	25%	
No, not needed	27%	
No, already done	6%	
No, needed but not possible	26%	
Don't know	16%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	27%	
No, not needed	32%	
No, already done	5%	
No, needed but not possible	23%	
Don't know	13%	

Yes	10%	
No, not needed	0%	
No, already done	8%	
No, needed but not possible	48%	
Don't know	34%	

⁶ Because of a lack of food, or money to buy food





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Juba County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	21%	
No, not needed	0%	
No, already exhausted	0%	
No, needed but not possible	38%	
Don't know	42 %	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	46%	
No, not needed	21%	
No, already done	3%	I
No, needed but not possible	22 %	
Don't know	9%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	71%	
No, not needed	11%	
No, already done	1%	I
No, needed but not possible	11%	
Don't know	7%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



11% Yes⁷ 89% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



15% No5% Yes

% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



1% No
% Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	20%	
Too far	20%	
No staff/medicine	9%	
No barriers	42%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Borrow money	25%	
Go to a lower quality facility	16%	
Don't know	11%	
No coping strategies used	38%	

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



Area of Knowledge-Neighbourhoods: Juba County

Central Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



98% Improved⁹
2% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	54%	
15 - 29 minutes	17%	
30 - 59 minutes	6%	
1 hour - 2 hours	18%	

Most commonly reported barriers to accessing water⁴

Expensive	28%	
Water points are too far	23%	
Containers are insufficient	22%	
Long waiting time	14%	
No water access barriers	18%	

% of households with access to a functional latrine, as reported by KIs



78% Yes 22% No 0% Don't know % of households with access to soap, as reported by KIs



50% Yes 41% No 9% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	71%	
Cooking	66%	
Personal hygiene	64%	
Domestic	50 %	
Not enough for any need	26%	

Most commonly reported strategies used to cope with a lack of water⁴

Don't know	13%	
Reducing use of water for bathing	13%	
Reducing use of water for cleaning	13%	
Using a less preferred water source	11%	
No coping strategies used	48%	

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REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Kajo-Keji County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	73%	
New arrivals	11%	
Previous harvest exhausted	4%	1
Couldn't harvest	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	69%	
Collecting wild food	55%	
Casual labour	39%	
Petty trade	35%	
Livestock	21%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	54%	
Pests	25%	
Insecurity	10%	
Lack of materials	7%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	70 %	
Limiting meal sizes	38%	
Adults don't eat so children can	9%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



71% At least some food 16% No food 13% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



64% At least some food 14% Sleep hungry 22% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



71% At least some food7% No food

22% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kajo-Keji County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



63% Yes 34% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



9% Yes 69% No 22% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



3% Yes 85% No 12% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	38%	
No money	35%	
Closed market	270/	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	23%	
Food	4%	1
Cash	1%	1
No humanitarian aid	72%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	34%	
No, not needed	20%	
No, already done	1%	I
No, needed but not possible	32%	
Don't know	13%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	23%	
No, not needed	25%	
No, already done	5%	
No, needed but not possible	36%	
Don't know	11%	

Yes	16%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	45%	
Don't know	39%	

⁶ Because of a lack of food, or money to buy food





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kajo-Keji County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	74%	
No, not needed	4%	1
No, already done	0%	
No, needed but not possible	20%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	63%	
No, not needed	1%	1
No, already done	5 %	
No, needed but not possible	25 %	
Don't know	6%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



4% Yes⁷ 96% No % of households with malnourished children, as reported by \mbox{Kls}^{8}



04% No 6% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	31%	
Too far	21%	
Worried to get sick	5%	
No barriers	38%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	23%	
Delay treatment	15%	
Don't know	11%	
No coping strategies used	38%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Kajo-Keji County

Central Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



100% Improved9 Unimproved¹⁰ Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	16%	
15 - 29 minutes	37%	
30 - 59 minutes	35%	
1 hour - 2 hours	11%	

Most commonly reported barriers to accessing water4

Containers are insufficient	52 %	
Bad taste	46%	
Long waiting time	15%	
Insecurity	5%	
No water access barriers	21%	

% of households with access to a functional latrine. as reported by KIs



Don't know

% of households with access to soap, as reported by KIs



Don't know

% of households reported by KIs to have a sufficient quantity of water for each need4



Most commonly reported strategies used to cope with a lack of water4

Using a less preferred water source	24%		
Don't know	8%		
Reducing use of water for bathing	6%		
Reducing use of water for cleaning	4%	1	
No coping strategies used	64%		

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Morobo County

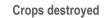
Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



13% Yes 87% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴



87%

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	97%	
Casual labour	88%	
Collecting wild food	39%	
Selling crops	12%	
Petty trade	5%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴



Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	83%	
Reducing meals	82%	
Adults don't eat so children can	45%	
No coping strategies	5%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



69% At least some food 6% No food 25% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



53% At least some food35% Sleep hungry12% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



100% At least some food

0% No food

% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Morobo County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



100% Yes 0% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



44% Yes 56% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



0% Yes 100% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴



% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	3 %	
Cash	0%	
Cash for work	0%	
No humanitarian aid	97%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶



% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	50%	
No, not needed	1%	1
No, already done	0%	
No, needed but not possible	37%	
Don't know	12%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

No data available because of a lack of livestock.

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected ⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Morobo County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

No data available because of a lack of livestock.

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	87%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	1%	1
Don't know	12%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	46%	
No, not needed	6%	
No, already done	0%	
No, needed but not possible	43%	
Don't know	4%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

5% Yes⁷ 95% No

Estimated time to access nearest functioning

health facility by walking according to Kls, by % of

% of households with malnourished children, as reported by KIs⁸



100% No 0% Yes

Most commonly reported barriers to accessing

healthcare in the six months prior to data collection⁴

% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Less than 15 minutes	74%		
15 - 30 minutes	0%		Too far
		_	Costs
31 - 59 minutes	7%		Discrimination
1 - 2 hours	3%	I	
2 - 3 hours	30/2		No barriers

Go to a lower quality facility	37%	
Go to further facility	7%	
Sold assets	5%	
No coping strategies used	63%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Morobo County

Central Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



83% Improved⁹
17% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	87%	
15 - 29 minutes	1%	I
30 - 59 minutes	12%	

Most commonly reported barriers to accessing water⁴

Bad taste	50%	
Containers are insufficient	29%	
Long waiting time	7 %	
Water points are too far	6%	
No water access barriers	44%	

% of households with access to a functional latrine, as reported by KIs

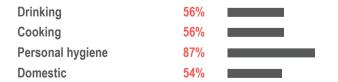


45% Yes 55% No 0% Don't know % of households with access to soap, as reported by KIs



19% Yes 77% No 4% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	50 %	
Reducing use of water for cleaning	28%	
Reducing use of water for bathing	13%	
Buying more water than usual	6%	
No coping strategies used	44%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Terekeka County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	57%	
Didn't plant	19%	
New arrivals	13%	
Couldn't harvest	7%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Collecting wild food	85%	
Consuming crops	75%	
Livestock	39%	
Fishing	25%	
Casual labour	15%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	75%	
Insecurity	15%	
Don't know	6%	
Lack of materials	4%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	73%	
Limiting meal sizes	39%	
Adults don't eat so children can	16%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



44% At least some food28% No food28% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



32% At least some food 27% Sleep hungry 41% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



47% At least some food 18% No food 35% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Terekeka County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



69% Yes 20% No 11% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



37% Yes 32% No 31% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



32% Yes 52% No 16% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	48%	
Too far	42 %	
Flooding	28%	
No market access barriers	11%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	14%	
Non-food items	6%	
Don't know	2%	1
No humanitarian aid	79%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	12%	
No, not needed	3%	1
No, already done	8%	
No, needed but not possible	65 %	
Don't know	12%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	4%	1
No, already done	8%	
No, needed but not possible	68%	
Don't know	1%	1

Yes	52 %	
No, not needed	9%	
No, already done	12%	
No, needed but not possible	13%	
Don't know	14%	

⁶ Because of a lack of food, or money to buy food





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Terekeka County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	25%	
No, not needed	9%	
No, already exhausted	1%	1
No, needed but not possible	47%	
Don't know	18%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	74%	
No, not needed	5%	
No, already done	5%	
No, needed but not possible	10%	
Don't know	6%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	66%	
No, not needed	3%	1
No, already done	0%	
No, needed but not possible	15%	
Don't know	16%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



18% Yes⁷ 82% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



81% No 19% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	33%	
Too far	17%	
Costs	4%	1
No barriers	46%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Delay treatment	26%	
Sold assets	20%	
Go to further facility	17%	
No coping strategies used	17%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Terekeka County

Central Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



72% Improved⁹
28% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	3%	I
15 - 29 minutes	19%	
30 - 59 minutes	49%	
1 hour - 2 hours	12%	
2 hours - 3 hours	7%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	70%	
Bad taste	57%	
Long waiting time	15%	
Water points are too far	9%	

% of households with access to a functional latrine, as reported by KIs

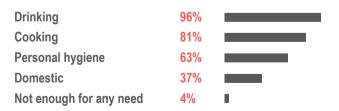


14% Yes 86% No 0% Don't know % of households with access to soap, as reported by KIs



1% Yes 95% No 4% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	29%	
Reducing use of water for bathing	21 %	
Reducing use of water for cleaning	16%	
Reducing use of water for cleaning	5 %	
No coping strategies used	54%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Yei County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	64%	
Couldn't harvest	7%	
No markets	4%	1
Didn't plant	3%	I

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	88%	
Selling crops	63%	
Collecting wild food	56%	
Casual labour	44%	
Petty trade	33%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Pests	48%	
Crop disease	19%	
Natural disaster	13%	
Lack of materials	12%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	59%	
Reducing meals	39%	
Adults don't eat so children can	36%	
No coping strategies	5%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



65% At least some food 4% No food 31% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



45% At least some food10% Sleep hungry45% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



50% At least some food 8% No food 42% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Yei County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



89% Yes 11% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



23% Yes 32% No 45% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



0% Yes 39% No 11% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Don't know	9%	
Too far	8%	
No money	6%	
No market access barriers	9%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Non-food items	16%	
Food	11%	
Cash	0%	
No humanitarian aid	81%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	7%	
No, not needed	49%	
No, already done	1%	I
No, needed but not possible	2%	1
Don't know	40%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	6%	
No, not needed	46%	
No, already done	0%	
No, needed but not possible	2%	I
Don't know	46%	

Yes	11%	
No, not needed	89%	

⁶ Because of a lack of food, or money to buy food





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Yei County

Central Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	87%	
No, not needed	8%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	5%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	17%	
No, not needed	53%	
No, already done	0%	
No, needed but not possible	3%	1
Don't know	27%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs

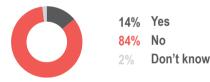


97% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



06% No 4% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	8%	
No staff/medicine	4%	1
Costs	3%	1
No barriers	86%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	35%	
Go to a lower quality facility	33%	
Don't know	10%	
No coping strategies used	16%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Yei County

Central Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



79% Improved⁹
21% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	67%	
15 - 29 minutes	18%	
30 - 59 minutes	15%	

Most commonly reported barriers to accessing water⁴

Water points are too far	7%	
Containers are insufficient	5%	1
Bad taste	5%	
Long waiting time	4%	1
No water access barriers	79%	

% of households with access to a functional latrine, as reported by KIs



69% Yes 30% No 1% Don't know % of households with access to soap, as reported by KIs



76% Yes 14% No 10% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	94%	
Cooking	94%	
Personal hygiene	94%	
Domestic	69%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	35%	
Reducing use of water for bathing	34%	
Buying more water than usual	22%	
Using a less preferred water source	6%	
No coping strategies used	20%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

ANNEX: AoK-N METHODOLOGY

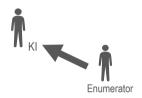
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

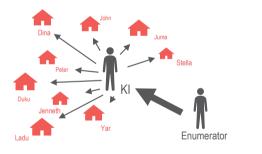
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

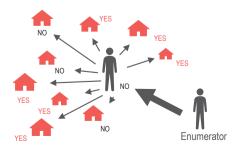
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Budi County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	65 %	
Previous harvest exhausted	8%	
No food distribution	6%	
High prices	5 %	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	97%	
Livestock	79%	
Petty trade	32%	
Selling crops	14%	
Collecting wild food	6%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	94%	
Reducing meals	92%	
Skipping days	33%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



20% At least some food13% No food67% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



19% At least some food14% Sleep hungry67% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



15% At least some food19% No food66% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Budi County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



100% Yes 0% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



17% Yes 32% No 51% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



30% Yes <mark>45%</mark> No 25% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	46%	
High prices	44%	
Unsafe to travel	190/	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	42%	
Food	39%	
Don't know	10%	
No humanitarian aid	27%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	46%	
No, not needed	8%	
No, already done	0%	
No, needed but not possible	3%	I
Don't know	44%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	12%	
No, not needed	7%	
No, already done	0%	
No, needed but not possible	4%	1
Don't know	77%	

Yes	60%	
No, not needed	2%	1
No, already done	0%	
No, needed but not possible	1%	1
Don't know	36%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Budi County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

Yes	0%	
No, not needed	4%	1
No, already exhausted	0%	
No, needed but not possible	19%	
Don't know	77%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	49%	
No, not needed	2%	I
No, already done	0%	
No, needed but not possible	12%	
Don't know	37%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	70%	
No, not needed	1%	1
No, already done	0%	
No, needed but not possible	2%	I
Don't know	26%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

Estimated time to access nearest functioning

health facility by walking according to Kls, by % of

% of households with malnourished children, as reported by KIs8



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



16% Don't know

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Most commonly reported coping strategies used to meet health needs in the month prior to data collection4

16%	
69%	
11%	
	69%

No staff/medicine	12%	
Too far	2%	I
Costs	0%	
No barriers	86%	

Go to further facility	31%	
Don't know	6%	
Delay treatment	3%	1
No coping strategies used	62 %	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Budi County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



80% Improved⁹
20% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	35%	
15 - 29 minutes	48%	
30 - 59 minutes	14%	
1 hour - 2 hours	3%	I

Most commonly reported barriers to accessing water⁴

Long waiting time	45%	
Insecurity	17%	
Containers are insufficient	9%	
Water points are too far	7 %	
No water access barriers	39%	

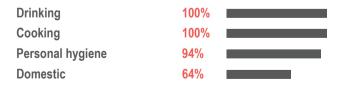
% of households with access to a functional latrine, as reported by KIs



27% Yes 64% No 9% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	41%	
Don't know	2%	I
Buying more water than usual	0%	
Reducing use of water for bathing	0%	
No coping strategies used	57%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Ikotos County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	62%	
Consuming crops	37%	
Casual labour	18%	
Collecting wild food	10%	
Livestock	9%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	83%	
Limiting meal sizes	37%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



87% At least some food3% No food10% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



78% At least some food1% Sleep hungry21% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



86% At least some food1% No food13% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Ikotos County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



92% Yes 8% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



78% Yes 22% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



49% Yes 4<mark>8%</mark> No 3% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

High prices	50 %	
No money	17%	
Closed market	6%	
No market access barriers	24%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Non-food items	4% ■	
Cash	0%	
Cash for work	0%	
No humanitarian aid	96%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	13%	
No, not needed	27%	
No, already done	0%	
No, needed but not possible	60%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	11%	
No, not needed	18%	
No, already done	2%	1
No, needed but not possible	67%	
Don't know	2%	1

Yes	53%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	47%	

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Ikotos County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	42%	
No, not needed	0%	
No, already exhausted	0%	
No, needed but not possible	58%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	82%	
No, not needed	9%	
No, already done	0%	
No, needed but not possible	6%	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	1%	1
No, not needed	38%	
No, already done	0%	
No, needed but not possible	47%	
Don't know	14%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



62% Yes 38% No

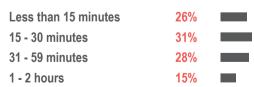
% of households with malnourished children, as reported by \mbox{KIs}^{8}



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	3%
Costs	0%
Discrimination	0%
No barriers	97%

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Don't know	24%	
Borrow money	5 %	
Sold assets	3%	I
No coping strategies used	71%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Ikotos County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



82% Improved⁹
18% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	58%	
15 - 29 minutes	32%	
30 - 59 minutes	10%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	4%	1
Water points are broken	0%	
Insecurity	0%	
Don't know	0%	
No water access barriers	96%	

% of households with access to a functional latrine, as reported by KIs

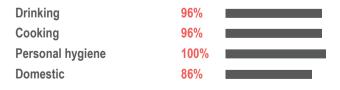


83% Yes 17% No 0% Don't know % of households with access to soap, as reported by KIs



90% Yes 10% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

No coping strategies used 1

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Kapoeta East County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	96%	
Rain/flooding	2%	I
Didn't plant	1%	1
Other	1%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	99%	
Livestock	99%	
Petty trade	48%	
Selling crops	42%	
Fishing	7%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴



Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	85%	
Reducing meals	61%	
Skipping days	4%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



100% At least some food
0% No food
0% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



5% At least some food 90% Sleep hungry 5% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



23% At least some food74% No food3% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kapoeta East County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



100% Yes 0% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



100% Yes 0% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



76% Yes 2<mark>4%</mark> No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	67%	
High prices	6%	
Don't know	2%	I
No market access harriers	28%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	98%	
Non-food items	46%	
Cash for work	8%	
No humanitarian aid	1% I	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	3%	1
No, already done	14%	
No, needed but not possible	76 %	
Don't know	7%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	1%	1
No, not needed	4%	1
No, already done	17%	
No, needed but not possible	73%	
Don't know	6%	

Yes	35 %	
No, not needed	3%	1
No, already done	10%	
No, needed but not possible	53%	

⁶ Because of a lack of food, or money to buy food







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kapoeta East County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	1%	I
No, already exhausted	1%	1
No, needed but not possible	96%	
Don't know	2%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	1%	1
No, already done	25 %	
No, needed but not possible	72 %	
Don't know	3%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	1%	1
No, already done	2%	I
No, needed but not possible	93%	
Don't know	3%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

15 - 30 minutes 31 - 59 minutes 1 - 2 hours 2 - 3 hours

Less than 15 minutes

15% Yes⁷ 85% No

Estimated time to access nearest functioning health facility by walking according to KIs, by % of

% of households with malnourished children, as reported by \mbox{KIs}^{8}



100% No 0% Yes

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



0% Yes 100% No 0% Don't know

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Don't know	1% I
Borrow money	0%
Delay treatment	0%
No coning strategies used	99%





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Kapoeta East County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



88% Improved⁹
12% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	7%	
15 - 29 minutes	48%	
30 - 59 minutes	29%	
1 hour - 2 hours	16%	

Most commonly reported barriers to accessing water⁴

Long waiting time	46%	
Water points are broken	0%	
Insecurity	0%	
Don't know	0%	
No water access barriers	54%	

% of households with access to a functional latrine, as reported by KIs



0% Yes 100% No 0% Don't know % of households with access to soap, as reported by KIs



64% Yes 30% No 6% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	100%	
Personal hygiene	99%	
Domestic	34%	

Most commonly reported strategies used to cope with a lack of water⁴

1%	I
1%	ı
0%	
0%	
99%	ı
	1% 0% 0%

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Kapoeta North County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	35%	
No markets	27%	
Unpredictable rainfall	12%	
NA	10%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	84%	
Petty trade	56%	
Consuming crops	18%	
Fishing	8%	
Collecting wild food	6%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	64%	
Reducing meals	56%	
Skipping days	13%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



88% At least some food 4% No food 8% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



83% At least some food 7% Sleep hungry 10% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



89% At least some food

4% No food

7% Don't know

⁵Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kapoeta North County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



99% Yes 1% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs

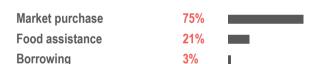


24% Yes 72% No 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs

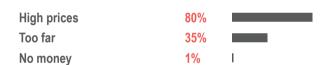


70% Yes 30% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴



% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	39%	
Non-food items	5%	
Don't know	4%	1
No humanitarian aid	53%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	5%	
No, not needed	2%	I
No, already done	11%	
No, needed but not possible	68%	
Don't know	14%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	6%	1
No, not needed	0%	
No, already done	3%	1
No, needed but not possible	79 %	
Don't know	11%	

Yes	81%	
No, not needed	1%	I
No, already done	3%	I
No, needed but not possible	0%	
Don't know	15%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Kapoeta North County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	79 %	
No, not needed	0%	
No, already done	5%	1
No, needed but not possible	7%	
Don't know	6%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	20%	
No, not needed	7%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	73%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

15 - 30 minutes

31 - 59 minutes

1 - 2 hours

2 - 3 hours

Less than 15 minutes

36% Yes⁷ 64% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



9% No 1% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



12% No 12% Don't know

Estimated time to access nearest functioning Most commonly reported barriers to accessing health facility by walking according to KIs, by % of healthcare in the six months prior to data collection⁴

Too far 4%
Costs 0%
Discrimination 0%
No barriers 95%

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	16%	
Delay treatment	1%	1
Borrow money	0%	
No coping strategies used	83%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Kapoeta North County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



57% Improved⁹
43% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	20%	
15 - 29 minutes	64%	
30 - 59 minutes	12%	
1 hour - 2 hours	0%	
2 hours - 3 hours	4%	1

Most commonly reported barriers to accessing water⁴

Long waiting time	15%	
Bad taste	13%	
Water points are too far	8%	
Water points are broken	0%	
No water access harriers	66%	

% of households with access to a functional latrine, as reported by KIs



0% Yes 100% No 0% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	100%	
Personal hygiene	100%	
Domestic	4%	ı

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	16%	
Reducing use of water for bathing	4%	
Buying more water than usual	0%	
Don't know	0%	
No coping strategies used	83%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Kapoeta South County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	28%	
Couldn't harvest	6%	
Didn't plant	4%	
No markets	4%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	63%	
Petty trade	58%	
Livestock	51 %	
Selling crops	21%	
Casual labour	8%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	40%	
Lack of materials	30%	
Sickness	20%	
Don't know	11%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	59%	
Limiting meal sizes	40%	
Skipping days	12%	
No coping strategies	30%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



82% At least some food2% No food16% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



63% At least some food 15% Sleep hungry 22% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



71% At least some food 10% No food 19% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kapoeta South County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



95% Yes

0% No

5% Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



41% Yes 41% No 18% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



71% Yes 27% No 2% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	69%	
Own crop	17%	
Neighbours/relatives	5%	
Food assistance	4%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	48%	
High prices	26%	
Flooding	8%	
No market access barriers	20%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	28%	
Non-food items	15%	
Cash for work	4%	
No humanitarian aid	71%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	6%	
No, not needed	50%	
No, already done	4%	1
No, needed but not possible	21%	
Don't know	19%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	8%	
No, not needed	49%	
No, already done	2%	I
No, needed but not possible	20%	
Don't know	20%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	9%	
No, not needed	63%	
No, already done	4%	1
No, needed but not possible	19%	
Don't know	5 %	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Kapoeta South County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	3%	I
No, not needed	51 %	
No, already done	0%	
No, needed but not possible	30%	
Don't know	15%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	24%	
No, not needed	51 %	
No, already done	0%	
No, needed but not possible	12%	
Don't know	13%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



17% Yes⁷ 83% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



7% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



98% No 0% Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	1%	1
Too far	1%	1
Costs	0%	
No barriers	98%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	36%	
Borrow money	3%	1
Go to a lower quality facility	2%	I
No coping strategies used	58%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Kapoeta South County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



97% Improved⁹
3% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

ess than 15 minutes	11%	
15 - 29 minutes	31%	
80 - 59 minutes	32 %	
hour - 2 hours	25%	

Most commonly reported barriers to accessing water⁴

Long waiting time	44%	
Water points are too far	19%	
Containers are insufficient	14%	
Bad taste	5%	
No water access barriers	32%	

% of households with access to a functional latrine, as reported by KIs



19% Yes 78% No 3% Don't know % of households with access to soap, as reported by KIs



Yes
No
Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	100%	
Personal hygiene	97%	
Domestic	68%	

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	34%	
Reducing use of water for cleaning	23%	
Reducing use of water for bathing	21%	
Buying more water than usual	2%	1
No coping strategies used	56 %	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Lafon County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

100%



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Fishing	67%	
Collecting wild food	67%	
Consuming crops	47%	
Livestock	36%	
Retail trade	33%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	100%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Adults don't eat so children can	56 %	
Limiting meal sizes	41%	
Reducing meals	39%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



82% At least some food18% No food0% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



49% At least some food37% Sleep hungry14% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



62% At least some food 30% No food 8% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Lafon County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



40% Yes 42% No 18% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



78% Yes 19% No 3% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs

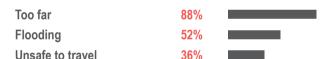


40% Yes 60% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴



% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	54%	
Don't know	12%	
Cash	0%	
No humanitarian aid	33%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	76%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	16%	
Don't know	8%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	57%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	27%	
Don't know	16%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	27 %	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	51%	
Don't know	22%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Lafon County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	27%	
No, not needed	0%	
No, already exhausted	0%	
No, needed but not possible	56%	
Don't know	17%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	100%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	75 %	
Don't know	25%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



32% Yes⁷ 68% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



82% No 18% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Borrow money	46%	
Go to a lower quality facility	33%	
Sold assets	10%	
No coping strategies used	17%	

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	31%	
15 - 30 minutes	19%	
31 - 59 minutes	0%	
1 - 2 hours	50%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No barriers 100%





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Lafon County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



80% Improved⁹
20% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 29 minutes	48%	
30 - 59 minutes	33%	
1 hour - 2 hours	19%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	100%	
Long waiting time	36%	
Insecurity	33%	

% of households with access to a functional latrine, as reported by KIs

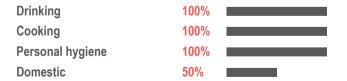


31% Yes 69% No 0% Don't know % of households with access to soap, as reported by KIs



12% Yes 78% No 10% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Don't know	26%	
Reducing use of water for bathing	2%	1
Reducing use of water for cleaning	2%	1
Buying more water than usual	0%	
No coping strategies used	70%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Magwi County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	64%	
Couldn't harvest	7 %	
Lack of rain	4%	1
Cultivation issues	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Casual labour	57%	
Consuming crops	53%	
Collecting wild food	44%	
Petty trade	37%	
Selling crops	21%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Cattle destroyed	44%	
Pests	26%	
New arrival	20%	
Lack of materials	7%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	91%	
Limiting meal sizes	74%	
Adults don't eat so children can	57%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



58% At least some food 35% No food 7% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



61% At least some food 23% Sleep hungry 16% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



70% At least some food14% No food16% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³ Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Magwi County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



84% Yes 13% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



12% Yes 81% No 7% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



1% Yes 98% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	46%	
Market purchase	32 %	
Exchange	3%	I
Neighbours/relatives	3%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	42%	
Closed market	25%	
Too far	25 %	
No market access barriers	6%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	14%	
Food	8%	
Don't know	6%	
No humanitarian aid	80%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	26%	
No, not needed	5 %	
No, already done	5 %	
No, needed but not possible	48%	
Don't know	16%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	30%	
No, not needed	5 %	
No, already done	3%	I
No, needed but not possible	52 %	
Don't know	9%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	63%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	22 %	
Don't know	16%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Magwi County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	52 %	
No, not needed	0%	
No, already exhausted	0%	
No, needed but not possible	40%	
Don't know	8%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	64%	
No, not needed	10%	
No, already done	3%	1
No, needed but not possible	19%	
Don't know	4%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	14%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	78%	
Don't know	8%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



29% Yes⁷
71% No

% of households with malnourished children, as reported by KIs⁸



92% No 8% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	35%	
No staff/medicine	4%	1
Costs	2%	I
No barriers	59%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	37%	
Borrow money	19%	
Sold assets	13%	
No coping strategies used	26%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Magwi County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



96% Improved⁹
4% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	31%	
15 - 29 minutes	38%	
30 - 59 minutes	16%	
1 hour - 2 hours	16%	

Most commonly reported barriers to accessing water⁴

Long waiting time	49%	
Bad taste	47%	
Containers are insufficient	39%	
Water points are too far	13%	
No water access barriers	12%	

% of households with access to a functional latrine, as reported by KIs



75% Yes 25% No 0% Don't know % of households with access to soap, as reported by KIs



21% Yes 72% No 70% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	78%	
Cooking	76%	
Personal hygiene	67%	
Domestic	40%	
Not enough for any need	4%	1

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	35%	
Reducing use of water for bathing	28%	
Reducing use of water for cleaning	26%	
Buying more water than usual	10%	
No coping strategies used	33%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Torit County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	54%	
High prices	22%	
Couldn't harvest	11%	
No food distribution	11%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	70%	
Collecting wild food	50%	
Petty trade	37%	
Casual labour	33%	
Livestock	11%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	91%	
Don't know	9%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴



% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



46% At least some food14% No food40% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



43% At least some food 11% Sleep hungry 46% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



51% At least some food 8% No food 41% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Torit County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



87% Yes 10% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



69% Yes 9% No 22% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



15% Yes <mark>33%</mark> No 52% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	48%	
Too far	44%	
Unsafe to travel	9%	
No market access barriers	20%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	20%	I
Cash	0%	
Cash for work	0%	
No humanitarian aid	80%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	14%	
No, not needed	27 %	
No, already done	0%	
No, needed but not possible	45%	
Don't know	10%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	9%	
No, already done	3%	1
No, needed but not possible	70%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	56%	
No, not needed	22%	
No, already done	0%	
No, needed but not possible	22%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Torit County

Eastern Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	83%	
No, not needed	5%	1
No, already done	0%	
No, needed but not possible	0%	
Don't know	12%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	49%	
No, not needed	4%	1
No, already done	0%	
No, needed but not possible	32 %	
Don't know	15%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

Less than 15 minutes 15 - 30 minutes 31 - 59 minutes 1 - 2 hours 2 - 3 hours 56% Yes⁷ 44% No

Estimated time to access nearest functioning health facility by walking according to KIs, by % of

% of households with malnourished children, as reported by \mbox{KIs}^{8}



04% No 6% Yes

Most commonly reported barriers to accessing

healthcare in the six months prior to data collection4

% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Too far	19%	
Not always open	3%	1
Costs	0%	
No barriers	78%	

Don't know	42%	
Sold assets	13%	
Delay treatment	11%	
No coping strategies used	21%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.









⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Torit County

Eastern Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



81% Improved⁹
19% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households



Most commonly reported barriers to accessing water⁴

Containers are insufficient	10%	
Insecurity	5%	
Water points are broken	0%	
Don't know	0%	
No water access barriers	90%	

% of households with access to a functional latrine, as reported by KIs



33% Yes 67% No 0% Don't know % of households with access to soap, as reported by KIs



45% Yes 27% No 28% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	83%	
Cooking	83%	
Personal hygiene	92%	
Domestic	82 %	
Not enough for any need	8%	

Most commonly reported strategies used to cope with a lack of water⁴

Don't know	8%	
Reducing use of water for bathing	5 %	
Reducing use of water for cleaning	5 %	
Using a less preferred water source	3%	1
No coping strategies used	84%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

ANNEX: AoK-N METHODOLOGY

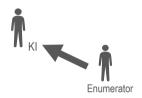
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

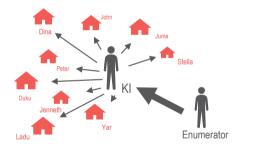
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

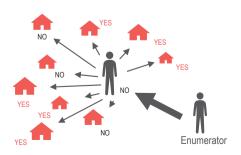
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"





Area of Knowledge-Neighbourhoods³: Akobo County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	36%	
New arrivals	17%	
Couldn't harvest	6%	
No food distribution	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	92%	
Selling crops	77%	
Livestock	66%	
Fishing	38%	
Petty trade	7%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	46%	
Crop disease	29%	
Natural disaster	26%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Adults don't eat so children can	53%	
Limiting meal sizes	51%	
Reducing meals	25%	
No coping strategies	23%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



62% At least some food 35% No food 3% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



67% At least some food 29% Sleep hungry 4% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



58% At least some food 38% No food 4% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³ Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Akobo County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



60% Yes 38% No 2% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



73% Yes 26% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



67% Yes 33% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	39%	
No money	30%	
Unsafe to travel	7%	
No market access harriers	24%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	97%	
Non-food items	37%	
Cash for work	11%	
No humanitarian aid	3%	1

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	14%	
No, not needed	51 %	
No, already done	31%	
No, needed but not possible	3%	1
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	13%	
No, not needed	52 %	
No, already done	26%	
No, needed but not possible	8%	
Don't know	2%	1

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	20%	
No, not needed	52 %	
No, already done	25 %	
No, needed but not possible	2%	1
Don't know	1%	1

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Akobo County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	16%	
No, not needed	53 %	
No, already exhausted	28%	
No, needed but not possible	0%	
Don't know	2%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	28%	
No, not needed	42%	
No, already done	27%	
No, needed but not possible	1%	I
Don't know	2%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	53 %	
No, already done	35%	
No, needed but not possible	3%	1
Don't know	2%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



63% Yes⁷ 37% No

% of households with malnourished children, as reported by KIs⁸



7% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴ Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	33%	
Go to a lower quality facility	30%	
Borrow money	7%	
No coping strategies used	52 %	

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 30 minutes	4%	
31 - 59 minutes	17%	
1 - 2 hours	22%	
2 - 3 hours	27%	

Too far 21%

No staff/medicine 2% I

Unsafe to travel 1% I

No barriers 76%





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Akobo County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



59% Improved⁹
41% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	5%	
15 - 29 minutes	51%	
30 - 59 minutes	14%	
1 hour - 2 hours	12%	
2 hours - 3 hours	18%	

Most commonly reported barriers to accessing water⁴

Water points are too far	41%	
Long waiting time	29%	
Bad taste	8%	
Containers are insufficient	3%	1
No water access barriers	19%	

% of households with access to a functional latrine, as reported by KIs



22% Yes 78% No 0% Don't know % of households with access to soap, as reported by KIs



5% Yes 95% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	89%	
Cooking	90%	
Personal hygiene	46%	
Domestic	9%	
Not enough for any need	4%	1

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	26%	
Reducing use of water for bathing	22%	
Using a less preferred water source	9%	
Reducing use of water for cleaning	6%	
No coping strategies used	68%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Ayod County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



10% Yes 90% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Fishing	38%	
Livestock	33%	
Consuming crops	24%	
Collecting wild food	7%	
Selling crops	3%	1

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴



Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	37%	
Adults don't eat so children can	33%	
Reducing meals	29%	
No coping strategies	3%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



76% At least some food 24% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



12% At least some food 88% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



12% At least some food 88% No food 0% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Ayod County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



94% Yes 6% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



92% Yes 8% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



9% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	35%	
Flooding	34%	
No money	4%	1
No market access barriers	23%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	52 %	
Non-food items	33%	
Cash	0%	
No humanitarian aid	16%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	93%	
No, not needed	2%	1
No, already done	2%	1
No. needed but not possible	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	1%	I
No, not needed	1%	1
No, already done	0%	
No, needed but not possible	98%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	96%	
No, not needed	1%	1
No, already done	0%	
No, needed but not possible	2%	I

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Ayod County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	1%	I
No, already exhausted	0%	
No, needed but not possible	99%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	98%	
No, not needed	2%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	99%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



30% Yes⁷ 70% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



84% No 16% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	5%	
Not always open	1%	1
Costs	0%	
No barriers	94%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Delay treatment	5 %	
Borrow money	4%	1
Go to further facility	1%	1
No coping strategies used	90%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Ayod County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



66% Improved⁹
34% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	43%	
15 - 29 minutes	48%	
30 - 59 minutes	7%	
1 hour - 2 hours	2%	L

Most commonly reported barriers to accessing water⁴

Water points are too far	4%	1	
Water points are broken	1%	1	
Bad taste	1%	1	
Insecurity	0%		
No water access barriers	87%		

% of households with access to a functional latrine, as reported by KIs



15% Yes 85% No 0% Don't know % of households with access to soap, as reported by KIs



62% Yes 38% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	99%	
Cooking	100%	
Personal hygiene	99%	
Domestic	80%	

Most commonly reported strategies used to cope with a lack of water⁴

Buying more water than usual	0%
Don't know	0%
Reducing use of water for bathing	0%
Reducing use of water for cleaning	0%
No coping strategies used	100

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Bor South County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	22%	
Couldn't harvest	14%	
Didn't plant	6%	
Cultivation issues	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	51%	
Livestock	50 %	
Fishing	35%	
Retail trade	27%	
Casual labour	25%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	68%	
Lack of materials	15%	
Insecurity	9%	
Pests	4%	•

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	55%	
Reducing meals	42%	
Adults don't eat so children can	41%	
No coping strategies	2%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



58%	At least some food
32 %	No food
10%	Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{62%} At least some food 28% Sleep hungry 10% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



66% At least some food 23% No food 11% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Bor South County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



% of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



26% Yes 67% No 7% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	18%	
Borrowing	13%	
Neighbours/relatives	8%	
Market nurchase	6%	

Most commonly reported market access barriers, in the month prior to data collection⁴

Flooding	21%	
Too far	16%	
No money	10%	
No market access harriers	20%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Cash	41%	
Food	40%	
Cash for work	21%	
No humanitarian aid	48%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	24%	
No, not needed	50%	
No, already done	11%	_
		_
No, needed but not possible	13%	_
Don't know	1%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	24%	
No, not needed	49%	
No, already done	10%	
No, needed but not possible	12%	
Don't know	5%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	40%	
No, not needed	43%	
No, already done	5%	
No, needed but not possible	11%	
Don't know	1%	1

⁶ Because of a lack of food, or money to buy food







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Bor South County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	36%	
No, not needed	44%	
No, already exhausted	8%	
No, needed but not possible	10%	
Don't know	2%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	17%	
No, not needed	48%	
No, already done	10%	
No, needed but not possible	19%	
Don't know	5%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	9%	
No, not needed	81%	
No, already done	4%	1
No, needed but not possible	6%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



38% Yes⁷ 62% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



92% No 8% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	10%	
Too far	1%	1
Discrimination	0%	
No barriers	88%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Borrow money	49%	
Sold assets	38%	
Delay treatment	27%	
No coping strategies used	13%	

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



Area of Knowledge-Neighbourhoods: Bor South County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



85% Improved⁹
15% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	29%	
15 - 29 minutes	40%	
30 - 59 minutes	31%	

Most commonly reported barriers to accessing water⁴

Water points are broken	24%	
Long waiting time	15%	
Containers are insufficient	13%	
Bad taste	10%	
No water access barriers	47%	

% of households with access to a functional latrine, as reported by KIs



64% Yes 34% No 2% Don't know % of households with access to soap, as reported by KIs



64% Yes 28% No B% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	97%	
Cooking	97%	
Personal hygiene	90%	
Domestic	71%	

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	6%	
Reducing use of water for cleaning	5%	
Buying more water than usual	4%	1
Reducing use of water for bathing	3%	1
No coping strategies used	87%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Canal/Pigi County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



74% Yes 26% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	7%	
No food distribution	6%	
Couldn't harvest	3%	ı
No markets	3%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	65%	
Fishing	55 %	
Livestock	45%	
Petty trade	28%	
Collecting wild food	20%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Laste of materials	4000/	
Lack of materials	100%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	42%	
Reducing meals	36%	
Adults don't eat so children can	3%	1
No coping strategies	43%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



78% At least some food 19% No food 3% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



77% At least some food18% Sleep hungry5% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



77% At least some food20% No food3% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³ Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Canal/Pigi County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



69% Yes 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



0% Don't know

Most commonly reported source of cereals, in the month prior to data collection4



Most commonly reported market access barriers, in the month prior to data collection⁴

Closed market	17%	
Unsafe to travel	9%	
Don't know	0%	
No market access barriers	28%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs4

Food	52 %	
Non-food items	45%	
Cash	2%	1
No humanitarian aid	40%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	10%	
No, not needed	57%	
No, already done	13%	
No, needed but not possible	15%	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	6%	
No, not needed	69%	
No, already done	13%	
No, needed but not possible	9%	
Don't know	3%	1

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	5%	
No, not needed	77%	
No, already done	7%	
No, needed but not possible	11%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Canal/Pigi County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	5%	
No, not needed	64%	
No, already exhausted	7%	
No, needed but not possible	24%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	9%	
No, not needed	62 %	
No, already done	20%	
No, needed but not possible	8%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	12%	
No, not needed	68%	
No, already done	8%	
No, needed but not possible	8%	
Don't know	3%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs

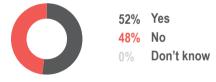


41% Yes 59% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



98% No 2% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	29%	
No staff/medicine	16%	
Not always open	7%	
No barriers	48%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Sold assets	14%	
Go to further facility	12%	
Go to a lower quality facility	4%	I
No coping strategies used	69%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Canal/Pigi County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



14% Improved⁹
86% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	34%	
15 - 29 minutes	33%	
30 - 59 minutes	17%	
1 hour - 2 hours	16%	

Most commonly reported barriers to accessing water⁴

Water points are too far	30%	
Long waiting time	21%	
Insecurity	16%	
Containers are insufficient	11%	
No water access barriers	66%	

% of households with access to a functional latrine, as reported by KIs



51% Yes 49% No 0% Don't know % of households with access to soap, as reported by KIs



41% Yes 59% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	78%	
Cooking	81%	
Personal hygiene	80%	
Domestic	30%	
Not enough for any need	16%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	4%	1	
Reducing use of water for cleaning	4%		
Reducing use of water for cleaning	1%	1	
Using a less preferred water source	1%	1	
No coping strategies used	93%		

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Duk County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	23%	
Couldn't harvest	15%	
Didn't plant	8%	
No food distribution	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Fishing	52 %	
Petty trade	51 %	
Livestock	46%	
Casual labour	19%	
Retail trade	14%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	69%	
Lack of materials	13%	
Insecurity	12%	
Pests	4%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	69%	
Reducing meals	46%	
Adults don't eat so children can	44%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



77% At least some food20% No food3% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



75% At least some food20% Sleep hungry5% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



77% At least some food16% No food7% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Duk County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



45% Yes 52% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



39% Yes 60% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



I5% Yes 5<mark>3%</mark> No 2% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	15%	
Neighbours/relatives	11%	
Market purchase	10%	
Borrowing	6%	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	34%	
Flooding	31%	
Unsafe to travel	10%	
No market access harriers	27%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	31%	
Cash	23%	
Cash for work	14%	
No humanitarian aid	62%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	19%	
No, not needed	68%	
No, already done	6%	
No, needed but not possible	7%	
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	21 %	
No, not needed	65%	
No, already done	5 %	
No, needed but not possible	8%	
Don't know	1%	1

Yes	43%	
No, not needed	50 %	
No, already done	1%	1
No, needed but not possible	7%	

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Duk County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	32%	
No, not needed	58 %	
No, already exhausted	0%	
No, needed but not possible	9%	
Don't know	1%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	65%	
No, already done	5%	I
No, needed but not possible	16%	
Don't know	4%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	12%	
No, not needed	69%	
No, already done	0%	
No, needed but not possible	20%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



45% Yes⁷ 55% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



89% No 11% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



16% Yes 3<mark>2%</mark> No 2% Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	16%	
Discrimination	0%	
Don't know	0%	
No barriers	84%	

Borrow money	57 %	
Sold assets	44%	
Delay treatment	42 %	
No coping strategies used	3%	1

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Duk County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



45% Improved⁹
55% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households



Most commonly reported barriers to accessing water⁴

Long waiting time	25 %	
Containers are insufficient	20%	
Water points are broken	12%	
Bad taste	10%	
No water access barriers	52 %	

% of households with access to a functional latrine, as reported by KIs



46% Yes 52% No 2% Don't know % of households with access to soap, as reported by KIs



54% Yes 42% No 4% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	100%	
Personal hygiene	99%	
Domestic	86%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	2%	1	
Buying more water than usual	1%	1	
Using a less preferred water source	1%	1	
Don't know	0%		
No coning strategies used	96%		

About REACH:

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The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through interagency aid coordination mechanisms.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Fangak County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



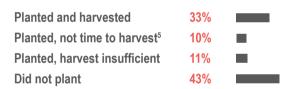
54% Yes 46% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

No food distribution	22%	
Crops destroyed	14%	
Couldn't harvest	6%	
Rain/flooding	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	52 %	
Consuming crops	47%	
Fishing	37%	
Petty trade	29%	
Collecting wild food	12%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	42 %	
Reducing meals	41%	
Adults don't eat so children can	40%	
No coping strategies	39%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



88% At least some food 12% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



84% At least some food 16% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



85% At least some food 15% No food 0% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Fangak County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



% of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs





Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	13%	
Too far	7%	
High prices	4%	
No market access barriers	30%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	73%	
Non-food items	7%	
Cash	0%	
No humanitarian aid	27%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	38%	
No, not needed	47%	
No, already done	5 %	
No, needed but not possible	9%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	42%	
No, already done	2%	I
No, needed but not possible	52 %	
Don't know	3%	1

Yes	43%	
No, not needed	43%	
No, already done	0%	
No, needed but not possible	14%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Fangak County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	13%	
No, not needed	43%	
No, already exhausted	1%	1
No, needed but not possible	42%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	14%	
No, not needed	44%	
No, already done	2%	I
No, needed but not possible	38%	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%		
No, not needed	80%		
No, already done	2%	1	
No, needed but not possible	17%		
Don't know	1%	1	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



82% Yes⁷ 18% No % of households with malnourished children, as reported by \mbox{KIs}^{8}



97% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	37%	
15 - 30 minutes	43%	
31 - 59 minutes	6%	
1 - 2 hours	4%	
2 - 3 hours	3%	1

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	5%	
Not always open	2%	1
Don't know	1%	1
No barriers	93%	

Go to further facility	7%	
Go to a lower quality facility	2%	I
Borrow money	1%	1
No coping strategies used	89%	

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.









⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Fangak County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



Improved9 Unimproved¹⁰ Time required to access the primary water source by walking according to KIs, by % of households



Most commonly reported barriers to accessing water4

Long waiting time	3%	1	
Water points are broken	0%		
Insecurity	0%		
Don't know	0%		
No water access barriers	97%		-

% of households with access to a functional latrine. as reported by KIs



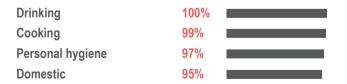
Don't know

% of households with access to soap, as reported by KIs



Don't know

% of households reported by KIs to have a sufficient quantity of water for each need4



Most commonly reported strategies used to cope with a lack of water4

No coping strategies used

the capacity of aid actors to make evidencebased decisions in emergency, recovery and

The methodologies used by REACH include

development contexts.

About REACH:

primary data collection and in-depth analysis, and all activities are conducted through interagency aid coordination mechanisms.

REACH Initiative facilitates the development of information tools and products that enhance

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Nyirol County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

No food distribution	3%
New arrivals	1%

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	65%	
Livestock	37%	
Selling crops	33%	
Petty trade	22%	
Fishing	9%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	13%	
Reducing meals	8%	
Adults don't eat so children can	5 %	
No coping strategies	81%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



99% At least some food 0% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



100% At least some food 0% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



99% At least some food 0% No food

% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Nyirol County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



94% Yes 6% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs

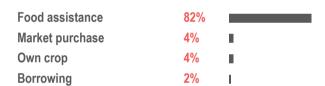


78% Yes 22% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



87% Yes 1<mark>3%</mark> No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	8%	
Flooding	1%	I
Too far	1%	1
No market access barriers	80%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	94%	
Non-food items	50%	
Cash	5%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	73%	
No, already done	17%	
No, needed but not possible	10%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	76%	
No, already done	15%	
No, needed but not possible	8%	

Yes	4%	1
No, not needed	46%	
No, already done	38%	
No. needed but not possible	11%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Nyirol County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	42%	
No, already exhausted	42%	
No, needed but not possible	16%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	3%	1
No, not needed	72 %	
No, already done	20%	
No, needed but not possible	4%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	82 %	
No, already done	8%	
No. needed but not possible	10%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

15 - 30 minutes 31 - 59 minutes 1 - 2 hours 2 - 3 hours

Less than 15 minutes

98% Yes⁷ 2% No

Estimated time to access nearest functioning health facility by walking according to KIs, by % of

% of households with malnourished children, as reported by \mbox{KIs}^{8}



100% No 0% Yes

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



0% Yes 100% No 0% Don't know

Sold assets	50%	
Go to further facility	47%	
Borrow money	3%	I
No coping strategies used	41%	

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



Area of Knowledge-Neighbourhoods: Nyirol County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



57% Improved⁹
43% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	24%		
15 - 29 minutes	64%		
30 - 59 minutes	9%		

Most commonly reported barriers to accessing water⁴

Long waiting time	23%	
Containers are insufficient	5%	
Water points are too far	3%	1
Insecurity	2%	1
No water access barriers	69%	

% of households with access to a functional latrine, as reported by KIs



80% Yes 20% No 0% Don't know % of households with access to soap, as reported by KIs



25% Yes 75% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	97%	
Cooking	97%	
Personal hygiene	91%	
Domestic	62 %	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	3%	
Buying more water than usual	0%	
Don't know	0%	
Reducing use of water for cleaning	0%	
No coping strategies used	97%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Pibor County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



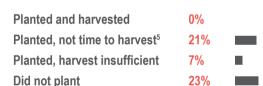
3% Yes 97% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	64%	
Livestock	23%	
Consuming crops	11%	
Fishing	6%	
Collecting wild food	2%	1

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Insecurity	85%	
Natural disaster	8%	
Lack of materials	7%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Skipping days	89%	
Limiting meal sizes	55%	
Reducing meals	25%	
No coping strategies	11%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



15% At least some food 85% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



3% At least some food 97% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



2% At least some food 98% No food 0% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Pibor County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



73% Yes 27% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



23% Yes 77% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



3% Yes 97% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴



% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	52 %	
Non-food items	2%	I
Cash	0%	
No humanitarian aid	46%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	15%	
No, not needed	5 %	
No, already done	4%	1
No, needed but not possible	73%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	8%	
No, not needed	2%	1
No, already done	6%	
No, needed but not possible	81%	

Yes	53%	
No, not needed	10%	
No, already done	7 %	
No, needed but not possible	18%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Pibor County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	36%	
No, not needed	7%	
No, already exhausted	7%	
No. needed but not possible	38%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	38%	
No, not needed	0%	
No, already done	4%	1
No, needed but not possible	49%	
Don't know	6%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

	700/	
Yes	79%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



29% Yes⁷ 71% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



88% No 12% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to Kls, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	25%	
Other	19%	
Too far	15%	
No barriers	30%	

Delay treatment	9%	
Go to further facility	6%	
Sold assets	1%	I
No coping strategies used	77%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Pibor County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



51% Improved⁹
49% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	3%	I
15 - 29 minutes	25%	
30 - 59 minutes	23%	
1 hour - 2 hours	23%	
2 hours - 3 hours	11%	

Most commonly reported barriers to accessing water⁴

Long waiting time	32 %	
Containers are insufficient	18%	
Bad taste	18%	
Insecurity	13%	

% of households with access to a functional latrine, as reported by KIs



14% Yes 86% No 0% Don't know % of households with access to soap, as reported by KIs



5% Yes 95% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	42%	
Cooking	33%	
Personal hygiene	10%	
Domestic	10%	
Not enough for any need	31%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	22%	
Reducing use of water for bathing	21 %	
Using a less preferred water source	16%	
Reducing use of water for cleaning	12 %	
No coping strategies used	12%	

About REACH:

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Pochalla County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	77%	
Fishing	24%	
Selling crops	1%	1
Livestock	1%	1
Petty trade	1%	T

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	88%	
Lack of materials	8%	
Insecurity	4%	•

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Skipping days	43%	
Reducing meals	36%	
Limiting meal sizes	21%	
No coping strategies	34%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



48%	At least some food
49%	No food
3%	Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{45%} At least some food52% Sleep hungry3% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



54% At least some food 42% No food 4% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Pochalla County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



93% Yes 7% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



86% Yes 13% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



1% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	79%	
Market purchase	7%	
Own crop	4%	1
Borrowing	3%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Flooding	33%	
Too far	4%	
Closed market	0%	
No market access barriers	20%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	97%	
Cash	0%	
Cash for work	0%	
No humanitarian aid	3 %	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	43%	
No, not needed	24%	
No, already done	2%	I
No, needed but not possible	27%	
Don't know	4%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	38%	
No, not needed	10%	
No, already done	4%	
No, needed but not possible	42 %	
Don't know	6%	

Yes	33%	
No, not needed	0%	
No, already done	33%	
No. needed but not possible	33%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Pochalla County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%
No, not needed	0%
No, already exhausted	0%
No. needed but not possible	100%

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	3%	1
No, not needed	9%	
No, already done	1%	1
No, needed but not possible	87%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	72 %	
No, not needed	21%	
No, already done	0%	
No. needed but not possible	7%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

15 - 30 minutes

31 - 59 minutes

1 - 2 hours

Less than 15 minutes

94% No

% of households with malnourished children, as reported by KIs⁸



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



94% No 0% Don't know

Estimated time to access nearest functioning Most commonly reported barriers to accessing health facility by walking according to KIs, by % of healthcare in the six months prior to data collection⁴

No staff/medicine 6%

Costs 0%

Discrimination 0%

No barriers 94%

Go to further facility	11%	
Delay treatment	1%	1
Borrow money	0%	
No coping strategies used	88%	

Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







 $^{^4}$ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



Area of Knowledge-Neighbourhoods: Pochalla County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



44% Improved⁹
56% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	29%	
15 - 29 minutes	16%	
30 - 59 minutes	55%	

Most commonly reported barriers to accessing water⁴

Water points are too far	55 %	
Insecurity	3%	1
Don't know	3%	I
Water points are broken	0%	
No water access barriers	29%	

% of households with access to a functional latrine, as reported by KIs



5% Yes 94% No 1% Don't know % of households with access to soap, as reported by KIs



13% Yes 87% No Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%
Cooking	100%
Personal hygiene	1% I

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	9%	
Reducing use of water for cleaning	9%	
Using a less preferred water source	1%	1
Buying more water than usual	0%	
No coping strategies used	2%	1

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

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⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Twic East County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	28%	
Crops destroyed	28%	
Didn't plant	16%	
No food distribution	1%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	46%	
Fishing	32%	
Livestock	31%	
Retail trade	21%	
Casual labour	14%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	57%	
Lack of materials	35%	
Insecurity	4%	
Pests	3%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	66%	
Reducing meals	45%	
Adults don't eat so children can	39%	
No coping strategies	1%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



83%	At least some food
13%	No food
4%	Don't know

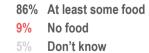
% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{82%} At least some food11% Sleep hungry7% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs





⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Twic East County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



67% Yes 30% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



29% Yes 67% No 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



29% Yes 67% No 4% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Flooding	68%	
Too far	37%	
Unsafe to travel	15%	
No market access barriers	3%	1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	57%	
Cash	35%	
Cash for work	14%	
No humanitarian aid	28%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	21%	
No, not needed	71%	
No, already done	4%	1
No, needed but not possible	4%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	16%	
No, not needed	70%	
No, already done	4%	1
No, needed but not possible	9%	
Don't know	2%	1

Yes	41%	
No, not needed	51 %	
No, already done	3%	1
No, needed but not possible	4%	1
Don't know	1%	I

⁶ Because of a lack of food, or money to buy food







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Twic East County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	38%	
No, not needed	53%	
No, already exhausted	1%	I
No, needed but not possible	6 %	
Don't know	1%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	9%	
No, not needed	71%	
No, already done	3%	I
No, needed but not possible	14%	
Don't know	2%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%
No, not needed	100%
No, already done	0%
No, needed but not possible	0%
Don't know	0%

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



39% Yes⁷ 61% No

% of households with malnourished children, as reported by KIs⁸



32% No 18% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



4% No % Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	9%		
Too far	3%	1	
No staff/medicine	1%	1	
No barriers	87%		

Borrow money	44%	
Go to further facility	38%	
Delay treatment	37%	
No coping strategies used	4%	

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



Area of Knowledge-Neighbourhoods: Twic East County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



69% Improved⁹
31% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households



Most commonly reported barriers to accessing water⁴

Water points are broken	21%	
Insecurity	15%	
Containers are insufficient	15%	
Long waiting time	11%	
No water access barriers	41%	

% of households with access to a functional latrine, as reported by KIs



64% Yes 35% No 1% Don't know % of households with access to soap, as reported by KIs



65% Yes 29% No 6% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	95%	
Cooking	96%	
Personal hygiene	87%	
Domestic	69%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	9%	
Using a less preferred water source	8%	
Reducing use of water for bathing	6%	
Reducing use of water for cleaning	5%	1
No coping strategies used	82%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Uror County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

New arrivals



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Selling crops	59%	
Livestock	45%	
Consuming crops	43%	
Petty trade	29%	
Fishing	11%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	12%	
Reducing meals	8%	
Adults don't eat so children can	6%	
No coping strategies	76 %	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



99% At least some food 1% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



99% At least some food 1% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



99% At least some food

1% No food

% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Uror County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



86% Yes 14% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs

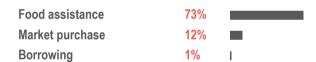


61% Yes 38% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



84% Yes16% No0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴



% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	99%	
Non-food items	38%	
Cash	0%	
No humanitarian aid	1%	1

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶



% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	67%	
No, already done	18%	
No. needed but not possible	15%	

Yes	0%	
No, not needed	42 %	
No, already done	44%	
No, needed but not possible	14%	

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Uror County

Jonglei State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

Yes	0%	
No, not needed	57 %	
No, already exhausted	26%	
No, needed but not possible	17%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	4%	1
No, not needed	59%	
No, already done	26%	
No, needed but not possible	11%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	69%	
No, already done	14%	
No. needed but not possible	17%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

% of households with malnourished children, as reported by KIs8



100% No 0% Yes

Estimated time to access nearest functioning health facility by walking according to Kls, by % of



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Don't know

Go to further facility	47%	
Sold assets	37%	
Borrow money	1%	1
No coping strategies used	52%	

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



Area of Knowledge-Neighbourhoods: Uror County

Jonglei State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



100% Improved⁹
0% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	19%	
15 - 29 minutes	69%	
30 - 59 minutes	10%	
1 hour - 2 hours	2%	1

Most commonly reported barriers to accessing water⁴

Long waiting time	21%	
Water points are broken	7%	
Water points are too far	5%	
Containers are insufficient	4%	1
No water access barriers	54%	

% of households with access to a functional latrine, as reported by KIs



72% Yes 28% No 0% Don't know % of households with access to soap, as reported by KIs



32% Yes 68% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	90%	
Cooking	90%	
Personal hygiene	83%	
Domestic	53 %	
Not enough for any need	5%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	2%	ı
Buying more water than usual	0%	
Don't know	0%	
Reducing use of water for cleaning	0%	
No coping strategies used	98%	1

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

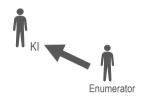
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

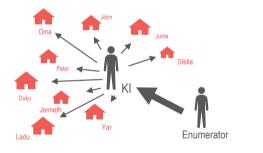
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

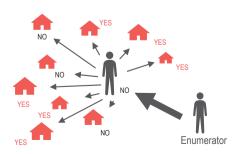
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Awerial County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	35%	
Crops destroyed	29%	
No markets	5%	
Didn't plant	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	46%	
Livestock	38%	
Collecting wild food	27%	
Selling crops	24%	
Petty trade	18%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	41%	
Natural disaster	29%	
Crop disease	15%	
Pests	9%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	49%	
Reducing meals	47%	
Skipping days	35%	
No coping strategies	1%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



67%	At least some food
30%	No food
3%	Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{42%} At least some food 55% Sleep hungry 2% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



44% At least some food53% No food3% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Awerial County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



65% Yes 31% No 4% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



36% Yes 59% No 5% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



36% Yes 50% No 4% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	21%	
Own crop	16%	
Food assistance	11%	
Borrowing	10%	

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	27 %	
Too far	24%	
Flooding	10%	
No market access barriers	7%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	56 %	
Cash	41%	
Non-food items	24%	
No humanitarian aid	21%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	25%	
No, not needed	10%	
No, already done	24%	
No, needed but not possible	38%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	8%	
No, already done	25%	
No, needed but not possible	46%	
Don't know	3%	1

Yes	40%	
No, not needed	4%	
No, already done	18%	
No, needed but not possible	34%	
Don't know	4%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Awerial County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	2%	1
No, not needed	5%	
No, already exhausted	23%	
No, needed but not possible	67%	
Don't know	3%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	34%	
No, not needed	6%	
No, already done	16%	
No, needed but not possible	41%	
Don't know	3%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	45%		
No, not needed	10%		
No, already done	22%		
No, needed but not possible	22%		
Don't know	2%	1	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

2 - 3 hours

21% Yes⁷ 79% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



99% No 1% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of healthcare in the six months prior to data collection⁴

 Less than 15 minutes
 4%

 15 - 30 minutes
 9%

 31 - 59 minutes
 22%

 1 - 2 hours
 21%

No staff/medicine 32%

Too far 29%

Costs 6%

No barriers 30%

Delay treatment	28%	
Go to further facility	28%	
Borrow money	23%	
No coping strategies used	13%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Awerial County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



93% Improved⁹
7% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	24%	
15 - 29 minutes	30%	
30 - 59 minutes	19%	
1 hour - 2 hours	12%	
2 hours - 3 hours	9%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	26%	
Bad taste	21%	
Long waiting time	18%	
Water points are too far	14%	
No water access barriers	29%	

% of households with access to a functional latrine, as reported by KIs



27% Yes 73% No 0% Don't know % of households with access to soap, as reported by KIs



34% Yes 60% No 60% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	77%	
Cooking	77%	
Personal hygiene	66%	
Domestic	20%	
Not enough for any need	2%	1

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	20%	
Reducing use of water for bathing	14%	
Reducing use of water for cleaning	12%	
Reducing use of water for cleaning	7%	
No coping strategies used	56%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Cueibet County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



34%	Yes
63%	No
3%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	17%	
Lack of rain	8%	
No markets	8%	
Previous harvest exhausted	8%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	35%	
Livestock	21%	
Petty trade	17%	
Selling crops	13%	
Collecting wild food	12%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	77%	
Natural disaster	12%	
Pests	11%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	69%	
Reducing meals	43%	
Skipping days	30%	
No coping strategies	2%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



56%	At least some food
39%	No food
5%	Don't know

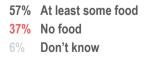
% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{58%} At least some food 38% Sleep hungry 4% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs









³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Cueibet County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



60% Yes 33% No 7% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



11% Yes 81% No 8% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



20% Yes 7<mark>5%</mark> No 5% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	18%	
Flooding	6%	
Too far	5 %	
No market access barriers	8%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	41%	
Non-food items	25%	
Cash	7%	
No humanitarian aid	50%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	15%	
No, not needed	8%	
No, already done	0%	
No, needed but not possible	72 %	
Don't know	4%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	27 %	
No, not needed	7%	
No, already done	1%	1
No, needed but not possible	60%	
Don't know	5%	

Yes	62 %	
No, not needed	16%	
No, already done	0%	
No, needed but not possible	12%	
Don't know	10%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.
⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Cueibet County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	53%	
No, not needed	4%	1
No, already done	0%	
No, needed but not possible	43%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	93%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	7%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



7% Yes⁷ 93% No % of households with malnourished children, as reported by \mbox{Kls}^{8}



91% No 9% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	23%	
Too far	12%	_
Discrimination	4%	-
No barriers	54%	_

Go to further facility	35%	
Sold assets	14%	
Delay treatment	13%	
No coping strategies used	44%	

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Cueibet County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



82% Improved⁹
18% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	14%	
15 - 29 minutes	27%	
30 - 59 minutes	19%	
1 hour - 2 hours	27%	
2 hours - 3 hours	7%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	39%	
Long waiting time	36%	
Bad taste	23%	
Water points are too far	8%	
No water access barriers	24%	

% of households with access to a functional latrine, as reported by KIs



15% Yes 85% No 0% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	98%	
Cooking	97%	
Personal hygiene	98%	
Domestic	74%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	31%	
Buying more water than usual	3%	1
Reducing use of water for bathing	3%	1
Don't know	0%	
No coping strategies used	64%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Rumbek Centre County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	27%	
Crops destroyed	9%	
No markets	8%	
Unsafe access to land	6%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	53%	
Consuming crops	30%	
Casual labour	24%	
Livestock	15%	
Selling crops	10%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	45%	
Insecurity	42%	
Natural disaster	14%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	84%	
Reducing meals	42%	
Skipping days	31%	
No coping strategies	6%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



48% At least some food 50% No food 2% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



50% At least some food 49% Sleep hungry 1% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



53% At least some food45% No food2% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Rumbek Centre County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



82% Yes 16% No 2% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



23% Yes 74% No 3% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



13% Yes 35% No 2% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	35%	
Unsafe to travel	9%	
Too far	8%	
No market access barriers	8%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Non-food items	44%	
Food	35%	
Cash	3%	1
No humanitarian aid	33%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	14%	
No, not needed	10%	
No, already done	2%	1
No, needed but not possible	73%	
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	42%	
No, not needed	10%	
No, already done	1%	1
No, needed but not possible	46%	
Don't know	2%	1

Yes	57%	
No, not needed	6%	
No, already done	0%	
No, needed but not possible	33%	
Don't know	4%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Rumbek Centre County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	26%	
No, already exhausted	16%	
No, needed but not possible	54 %	
Don't know	4%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	24%	
No, not needed	5 %	
No, already done	1%	1
No, needed but not possible	69%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	82%	
No, not needed	6%	
No, already done	1%	1
No, needed but not possible	9%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



12% Yes⁷ 88% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



3% No 7% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	13%	
Costs	11%	
Too far	7%	
No barriers	66%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	20%	
Borrow money	10%	
Sold assets	9%	
No coping strategies used	57 %	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Rumbek Centre County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



79% Improved⁹
21% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	6%	
15 - 29 minutes	28%	
30 - 59 minutes	34%	
1 hour - 2 hours	14%	
2 hours - 3 hours	17%	

Most commonly reported barriers to accessing water⁴

Long waiting time	27%	
Expensive	20%	
Containers are insufficient	16%	
Water points are too far	13%	
No water access barriers	29%	

% of households with access to a functional latrine, as reported by KIs



54% Yes 46% No 0% Don't know % of households with access to soap, as reported by KIs



54% Yes 46% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	93%	
Cooking	96%	
Personal hygiene	85%	
Domestic	55%	
Not enough for any need	3 %	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	21%	
Reducing use of water for bathing	7%	
Buying more water than usual	6%	1
Don't know	2%	I
No coping strategies used	67%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Rumbek East County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



26% Yes 73% No 1% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	35%	
Didn't plant	10%	
Crops destroyed	5%	
No money	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	41%	
Petty trade	29%	
Livestock	21%	
Casual labour	18%	
Collecting wild food	12%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Insecurity	46%	
Lack of materials	30%	
Crop disease	15%	
Pests	6%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	74%	
Reducing meals	40%	
Adults don't eat so children can	27%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



51% At least some food45% No food4% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



48% At least some food 48% Sleep hungry 4% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



50% At least some food 46% No food 4% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Rumbek East County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



62% Yes 35% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



13% Yes 84% No 3% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



11% res 88% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	38%		
Own crop	18%		
Food assistance	4%		
Neighbours/relatives	1%	1	

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	22%	
Unsafe to travel	19%	
Too far	17%	
No market access barriers	3%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	32%	
Non-food items	25%	
Seed distribution	4%	1
No humanitarian aid	55%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	20%	
No, not needed	0%	
No, already done	4%	1
No, needed but not possible	73 %	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	31%	
No, not needed	0%	
No, already done	2%	1
No, needed but not possible	64%	
Don't know	3%	1

Yes	60%	
No, not needed	2%	1
No, already done	13%	
No, needed but not possible	15%	
Don't know	10%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.
⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Rumbek East County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

Yes	6%	
No, not needed	8%	
No, already exhausted	0%	
No, needed but not possible	80%	
Don't know	5%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	28%	
No, not needed	0%	
No, already done	0%	
No, needed but not possible	71%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	77%	
No, not needed	0%	
No, already done	3%	I
No. needed but not possible	20%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



Yes 86% No

% of households with malnourished children, as reported by KIs8



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported barriers to accessing

Estimated time to access nearest functioning health facility by walking according to Kls, by % of households



healthcare in the six months prior to data collection⁴

No staff/medicine	18%	
Costs	13%	
Too far	10%	
No barriers	52 %	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection4

Go to further facility	22 %	
Sold assets	19%	
Borrow money	11%	
No coping strategies used	39%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling. 8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Rumbek East County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



89% Improved⁹
11% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	5 %	
15 - 29 minutes	20%	
30 - 59 minutes	23%	
1 hour - 2 hours	38%	
2 hours - 3 hours	9%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	43%	
Long waiting time	41%	
Water points are too far	21%	
Expensive	12%	
No water access barriers	13%	

% of households with access to a functional latrine, as reported by KIs



26% Yes 74% No 0% Don't know % of households with access to soap, as reported by KIs



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% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	94%	
Cooking	92%	
Personal hygiene	84%	
Domestic	56 %	
Not enough for any need	2%	1

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	29%	
Reducing use of water for bathing	16%	
Buying more water than usual	8%	
Using a less preferred water source	6%	
No coping strategies used	40%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Rumbek North County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	21%	
Didn't plant	15%	
Couldn't harvest	14%	
No food distribution	6%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	34%	
Consuming crops	27%	
Petty trade	22%	
Selling crops	15%	
Fishing	11%	

% of households reported by KIs as having planted or harvested in 2020

Planted and harvested	22%	
Planted, not time to harvest ⁵	26%	
Planted, harvest insufficient	5%	
Did not plant	40%	

Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Insecurity	68%	
Lack of materials	22%	
Crop disease	3%	1
Natural disaster	3%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	70%	
Adults don't eat so children can	33%	
Reducing meals	33%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



38%	At least some food
60%	No food
2%	Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{32%} At least some food67% Sleep hungry1% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



32% At least some food 67% No food 1% Don't know

³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Rumbek North County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



61% Yes 38% No 1% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



29% Yes 70% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



34% Yes 5<mark>4%</mark> No 2% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	26%	
Own crop	22%	
Food assistance	8%	
Borrowing	2%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	19%	
Too far	15%	
Flooding	14%	
No market access harriers	2%	- 1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	45%	
Non-food items	25%	
Cash for work	2%	I
No humanitarian aid	41%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	27%	
No, not needed	6%	
No, already done	7%	
No, needed but not possible	57 %	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	40%	
No, not needed	6%	
No, already done	7%	
No, needed but not possible	46%	
Don't know	2%	1

Yes	86%	
No, not needed	1%	1
No, already done	5%	
No, needed but not possible	3%	1
Don't know	5%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Rumbek North County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	25%	
No, not needed	4%	1
No, already exhausted	3%	1
No, needed but not possible	64%	
Don't know	4%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	51 %	
No, not needed	4%	1
No, already done	3%	1
No, needed but not possible	40%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

88%	
1%	1
0%	
11%	-
	1% 0%

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



14% Yes³ 86% No % of households with malnourished children, as reported by \mbox{KIs}^{8}



87% No 13% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	22%	
Too far	19%	
Costs	10%	
No barriers	47%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	29%	
Sold assets	16%	
Borrow money	12%	
No coning strategies used	33%	

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Rumbek North County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



89% Improved⁹
11% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	17%	
15 - 29 minutes	27%	
30 - 59 minutes	20%	
1 hour - 2 hours	27%	
2 hours - 3 hours	8%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	38%	
Long waiting time	35%	
Water points are too far	24%	
Insecurity	14%	
No water access barriers	9%	

% of households with access to a functional latrine, as reported by KIs



28% Yes 71% No 1% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	33%	
Buying more water than usual	10%	
Using a less preferred water source	10%	
Reducing use of water for bathing	9%	
No coping strategies used	47%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Wulu County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



39% Yes 61% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	19%	
Crops destroyed	11%	
Previous harvest exhausted	8%	
No markets	6%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	44%	
Collecting wild food	33%	
Petty trade	30%	
Casual labour	25%	
Selling crops	17%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	78%	
Reducing meals	34%	
Skipping days	26%	
No coping strategies	13%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



52% At least some food 44% No food 4% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



57% At least some food 39% Sleep hungry 4% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



55% At least some food 41% No food 4% Don't know





³Area of Knowledge - Neighbourhoods

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Wulu County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



70% Yes 26% No 4% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



28% Yes 65% No 7% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



3% Yes 92% No 5% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	29%	
Too far	27%	
Unsafe to travel	10%	
No market access barriers	15%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	50%	
Non-food items	50%	
Cash	24%	
No humanitarian aid	20%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	27%	
No, not needed	13%	
No, already done	0%	
No, needed but not possible	59%	
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	31%	
No, not needed	13%	
No, already done	0%	
No, needed but not possible	51 %	
Don't know	6%	

Yes	91%	
No, not needed	9%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.
⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Wulu County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	69%	
No, not needed	9%	
No, already exhausted	0%	
No, needed but not possible	21%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	57 %	
No, not needed	5 %	
No, already done	0%	
No, needed but not possible	38%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	54%	
No, not needed	21%	
No, already done	0%	
No, needed but not possible	23%	
Don't know	3%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



21% Yes⁷ 79% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



88% No 12% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	27%	
Too far	18%	
Costs	0%	
No barriers	56%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	46%	
Borrow money	13%	
Sold assets	8%	
No coping strategies used	40%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Wulu County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



96% Improved⁹
4% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	5%	
15 - 29 minutes	44%	
30 - 59 minutes	26%	
1 hour - 2 hours	14%	
2 hours - 3 hours	11%	

Most commonly reported barriers to accessing water⁴

Long waiting time	31%	
Bad taste	26%	
Containers are insufficient	20%	
Insecurity	16%	
No water access barriers	22%	

% of households with access to a functional latrine, as reported by KIs

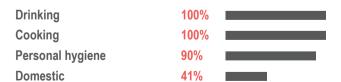


24% Yes 76% No 0% Don't know % of households with access to soap, as reported by KIs



32% Yes 67% No 1% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	12%	
Using a less preferred water source	8%	
Reducing use of water for bathing	6%	
Buying more water than usual	1%	1
No coping strategies used	73%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Yirol East County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



12%	Yes
85%	No
3%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	56%	
Couldn't harvest	21%	
Didn't plant	3%	1
No food distribution	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	70%	
Livestock	47%	
Collecting wild food	27%	
Petty trade	23%	
Casual labour	19%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Crop disease	66%	
Lack of materials	17%	
Insecurity	7%	
Pests	7%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	53%	
Reducing meals	49%	
Skipping days	33%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



56%	At least some food
40%	No food
4%	Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



^{53%} At least some food 40% Sleep hungry 4% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



55% At least some food 39% No food 6% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Yirol East County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



63% Yes 32% No 5% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



39% Yes 51% No 10% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



41% Yes 5<mark>0%</mark> No 9% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	36%	
Market purchase	11%	
Borrowing	7%	
Neighbours/relatives	7%	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	31%	
No money	21%	
Flooding	7%	
No market access barriers	7%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	25%	
Non-food items	13%	
Cash	4%	1
No humanitarian aid	56%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	18%	
No, not needed	11%	
No, already done	29%	
No, needed but not possible	38%	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	6%	
No, not needed	10%	
No, already done	33%	
No, needed but not possible	44%	
Don't know	6%	

Yes	29%	
No, not needed	9%	
No, already done	33%	
No, needed but not possible	27%	
Don't know	3%	1

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected ⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Yirol East County

Lakes State. South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

Yes	0%	
No, not needed	11%	
No, already exhausted	28%	
No, needed but not possible	58%	
Don't know	4%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	29%	
No, not needed	6%	
No, already done	27%	
No, needed but not possible	35%	
Don't know	3%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	36%	
No, not needed	9%	
No, already done	27%	
No, needed but not possible	26%	
Don't know	2%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

15 - 30 minutes

31 - 59 minutes

1 - 2 hours

2 - 3 hours

Less than 15 minutes

Yes 82% No

Estimated time to access nearest functioning health facility by walking according to Kls, by % of % of households with malnourished children, as reported by KIs8



1% Yes

% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Don't know

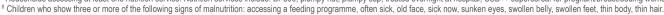
Most commonly reported barriers to accessing healthcare in the six months prior to data collection4

No staff/medicine Too far Costs

Most commonly reported coping strategies used to meet health needs in the month prior to data collection4

Go to further facility	44%	
Delay treatment	43%	
Sold assets	32 %	
No coping strategies used	1%	ı

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.



No barriers





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Yirol East County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



86% Improved⁹
14% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	29%	
15 - 29 minutes	32%	
30 - 59 minutes	23%	
1 hour - 2 hours	8%	
2 hours - 3 hours	5 %	

Most commonly reported barriers to accessing water⁴

Long waiting time	25%	
Containers are insufficient	20%	
Water points are too far	16%	
Bad taste	14%	
No water access barriers	35%	

% of households with access to a functional latrine, as reported by KIs



28% Yes 72% No 0% Don't know % of households with access to soap, as reported by KIs



45% Yes 50% No 5% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	83%	
Cooking	85%	
Personal hygiene	67%	
Domestic	22%	
Not enough for any need	2%	1

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	16%	
Reducing use of water for cleaning	16%	
Using a less preferred water source	16%	
Reducing use of water for bathing	11%	
No coping strategies used	54%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Yirol West County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	46%	
Couldn't harvest	25%	
Didn't plant	6%	
No food distribution	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	69%	
Livestock	45%	
Petty trade	30%	
Collecting wild food	24%	
Casual labour	16%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Crop disease	62%	
Lack of materials	20%	
Pests	11%	
Insecurity	4%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	52 %	
Reducing meals	44%	
Skipping days	35%	
No coping strategies	2%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



72% At least some food25% No food3% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



47% At least some food47% Sleep hungry5% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



50% At least some food 45% No food 5% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Yirol West County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



62% Yes 34% No 4% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



33% Yes 60% No 7% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



31% Yes 64% No 5% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	31%	
Market purchase	21%	
Borrowing	5%	
Neighbours/relatives	3%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	28%	
No money	26%	
Flooding	9%	
No market access barriers	6%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	33%	
Non-food items	28%	
Cash	8%	
No humanitarian aid	26%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	16%	
No, not needed	11%	
No, already done	28%	
No, needed but not possible	43%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	6%	
No, not needed	10%	
No, already done	31%	
No, needed but not possible	50 %	
Don't know	3%	1

Yes	37%	
No, not needed	14%	
No, already done	23%	
No, needed but not possible	21%	
Don't know	5%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Yirol West County

Lakes State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	2%	1
No, not needed	12 %	
No, already exhausted	25%	
No, needed but not possible	60%	
Don't know	2%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	33%	
No, not needed	5%	
No, already done	24%	
No, needed but not possible	35 %	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	45%		
No, not needed	11%		
No, already done	22%		
No, needed but not possible	19%		
Don't know	3%	1	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



16% Yes⁷ 84% No % of households with malnourished children, as reported by \mbox{KIs}^{8}



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning Most commonly reporte health facility by walking according to KIs, by % of healthcare in the six mont households

Less than 15 minutes	1%	I
15 - 30 minutes	19%	
31 - 59 minutes	21%	
1 - 2 hours	29%	
2 - 3 hours	25%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	47%	
Too far	13%	
Costs	4%	1
No barriers	32%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	38%	
Delay treatment	35%	
Borrow money	28%	
No coping strategies used	4%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Yirol West County

Lakes State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



67% Improved⁹
33% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	19%	
15 - 29 minutes	37%	
30 - 59 minutes	20%	
1 hour - 2 hours	12%	
2 hours - 3 hours	8%	

Most commonly reported barriers to accessing water⁴

Long waiting time	34%	
Containers are insufficient	26%	
Water points are too far	18%	
Bad taste	14%	
No water access barriers	22%	

% of households with access to a functional latrine, as reported by KIs



43% Yes 57% No 0% Don't know % of households with access to soap, as reported by KIs



42% Yes 55% No 3% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	79%	
Cooking	79 %	
Personal hygiene	68%	
Domestic	14%	
Not enough for any need	2%	1

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	15%	
Reducing use of water for cleaning	11%	
Reducing use of water for cleaning	11%	
Reducing use of water for bathing	10%	
No coping strategies used	61%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water

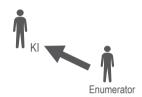
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

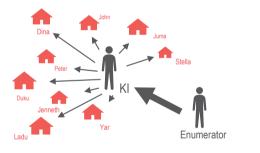
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

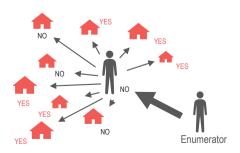
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Aweil Centre County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	50%	
No markets	9%	
Couldn't harvest	6%	
Didn't plant	4%	I .

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	65%	
Casual labour	62%	
Petty trade	55%	
Collecting wild food	46%	
Retail trade	30%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	55%	
Natural disaster	45%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	86%	
Reducing meals	85%	
Adults don't eat so children can	54 %	
No coping strategies	2%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



54% At least some food 45% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



51% At least some food 46% Sleep hungry 3% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



49% At least some food49% No food2% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Aweil Centre County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



96% Yes 3% No 1% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



51% Yes 43% No 6% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



7% No Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	31%	
Too far	31%	
High prices	14%	
No market access barriers	26%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	89%	
Food	22%	
Cash	3%	1
No humanitarian aid	5%	1

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	5%	
No, not needed	34%	
No, already done	21%	
No, needed but not possible	34%	
Don't know	6%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	8%	
No, not needed	35%	
No, already done	19%	
No, needed but not possible	33%	
Don't know	6%	

Yes	45%	
No, not needed	33%	
No, already done	6%	
No, needed but not possible	12%	
Don't know	4%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.
⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Aweil Centre County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	12%	
No, not needed	33%	
No, already exhausted	27%	
No, needed but not possible	21%	
Don't know	7%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	52 %	
No, not needed	24%	
No, already done	10%	
No, needed but not possible	12%	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	8%	
No, not needed	37%	
No, already done	16%	
No, needed but not possible	36%	
Don't know	3%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



24% Yes⁷ 76% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



15% No5% Yes

% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	19%	
Costs	11%	
No staff/medicine	6%	
No barriers	61%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	22%	
Sold assets	13%	
Go to a lower quality facility	10%	
No coping strategies used	62 %	

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Aweil Centre County

Northern Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



62% Improved⁹
38% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	9%	
15 - 29 minutes	50%	
30 - 59 minutes	28%	
1 hour - 2 hours	13%	

Most commonly reported barriers to accessing water⁴

Bad taste	31%	
Water points are too far	23%	
Long waiting time	11%	
Containers are insufficient	4%	
No water access barriers	36%	

% of households with access to a functional latrine, as reported by KIs

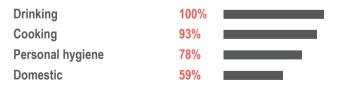


40% Yes 60% No 0% Don't know % of households with access to soap, as reported by KIs



69% Yes 28% No 3% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

No coping strategies used 10

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.



Area of Knowledge-Neighbourhoods³: Aweil East County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	45%	
High prices	11%	
Other	7%	
Didn't plant	6%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	68%	
Consuming crops	59%	
Casual labour	58%	
Collecting wild food	56%	
Livestock	44%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	77%	
Natural disaster	22%	
Insufficient labour	1%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	83%	
Reducing meals	73%	
Adults don't eat so children can	57 %	
No coping strategies	4%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



57% At least some food 41% No food 2% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



48% At least some food 49% Sleep hungry 3% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



49% At least some food48% No food3% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Aweil East County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



99% Yes 1% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



52% Yes 42% No 6% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



10% No 7% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	52 %	
Too far	37%	
High prices	9%	
No market access barriers	12%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	93%	
Food	25%	
Cash for work	10%	
No humanitarian aid	4%	1

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	13%	
No, not needed	35%	
No, already done	10%	
No, needed but not possible	38%	
Don't know	4%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	13%	
No, not needed	40%	
No, already done	9%	
No, needed but not possible	33%	
Don't know	5%	

Yes	48%	
No, not needed	31%	
No, already done	14%	
No, needed but not possible	6%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Aweil East County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	38%	
No, not needed	41%	
No, already exhausted	14%	
No, needed but not possible	6%	
Don't know	1%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	58%	
No, not needed	22%	
No, already done	8%	
No, needed but not possible	10%	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	5%	
No, not needed	42 %	
No, already done	5 %	
No, needed but not possible	47%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs

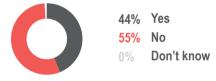


23% Yes⁷ 77% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



96% No 4% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	20%	
No staff/medicine	12%	
Too far	10%	
No barriers	56%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	26%	
Sold assets	26%	
Go to a lower quality facility	13%	
No coping strategies used	44%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Aweil East County

Northern Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



84% Improved⁹
16% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	16%	
15 - 29 minutes	51%	
30 - 59 minutes	18%	
1 hour - 2 hours	13%	
2 hours - 3 hours	2%	I

Most commonly reported barriers to accessing water⁴

Bad taste	22%	
Long waiting time	20%	
Water points are too far	18%	
Containers are insufficient	7 %	
No water access barriers	45%	

% of households with access to a functional latrine, as reported by KIs



51% Yes 48% No 1% Don't know % of households with access to soap, as reported by KIs



63% Yes 34% No 3% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	99%	
Personal hygiene	67%	
Domestic	53%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	12%	
Reducing use of water for cleaning	10%	
Buying more water than usual	0%	
Don't know	0%	
No coping strategies used	84%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.



Area of Knowledge-Neighbourhoods³: Aweil North County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



13% Yes 87% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	49%	
High prices	19%	
No food distribution	7%	
New arrivals	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Collecting wild food	74%	
Petty trade	72 %	
Casual labour	68%	
Consuming crops	58%	
Livestock	44%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	74%	
Lack of materials	26%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	87%	
Reducing meals	86%	
Adults don't eat so children can	61%	
No coping strategies	2%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



49% At least some food 51% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



45% At least some food 54% Sleep hungry 1% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



45% At least some food 55% No food 0% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Aweil North County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



100% Yes 0% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



55% Yes 41% No 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



62% Yes 35% No 3% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	43%	
No money	40%	
High prices	6%	
No market access barriers	20%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	91%	
Food	32%	
Cash	8%	
No humanitarian aid	8%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	23%	
No, not needed	29%	
No, already done	16%	
No, needed but not possible	30%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	23%	
No, not needed	26%	
No, already done	16%	
No, needed but not possible	35%	
Don't know	1%	1

Yes	77%	
No, not needed	11%	
No, already done	10%	
No, needed but not possible	1%	I



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Aweil North County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	56%	
No, not needed	23%	
No, already exhausted	14%	
No, needed but not possible	7%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	71%	
No, not needed	15%	
No, already done	9%	
No, needed but not possible	5%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	3%	1
No, not needed	41%	
No, already done	13%	
No, needed but not possible	41%	
Don't know	2%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



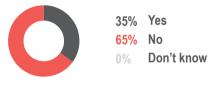
25% Yes⁷ 75% No

Estimated time to access nearest functioning

% of households with malnourished children, as reported by \mbox{KIs}^{8}



7% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported barriers to accessing Most conhealthcare in the six months prior to data collection⁴ to meet I

health facility by walking according to KIs, by % of healthcare in the six months prior to data collect households

Less than 15 minutes 8%

Too far 18% ■
No staff/medicine 8% ■
Costs 6% ■
No barriers 65%

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Sold assets	33%	
Go to further facility	16%	
Delay treatment	8%	
No coning strategies used	44%	

15 - 30 minutes

31 - 59 minutes

1 - 2 hours

2 - 3 hours



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Aweil North County

Northern Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



84% Improved⁹
16% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	22%	
15 - 29 minutes	47%	
30 - 59 minutes	16%	
1 hour - 2 hours	15%	
2 hours - 3 hours	1%	1

Most commonly reported barriers to accessing water⁴

Bad taste	23%	
Water points are too far	12%	
Containers are insufficient	10%	
Long waiting time	7%	
No water access barriers	55%	

% of households with access to a functional latrine, as reported by KIs



59% Yes 41% No 0% Don't know % of households with access to soap, as reported by KIs



82% Yes 17% No 1% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	94%	
Cooking	99%	
Personal hygiene	79%	
Domestic	67%	
Not enough for any need	1%	1

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	10%	
Reducing use of water for cleaning	4%	
Buying more water than usual	0%	
Don't know	0%	
No coping strategies used	88%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Aweil South County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	52 %	
Other	8%	
Didn't plant	5%	
Couldn't harvest	4%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	69%	
Consuming crops	68%	
Casual labour	59%	
Collecting wild food	52 %	
Livestock	50%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	51%	
Natural disaster	27%	
Didn't want	22%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	87%	
Reducing meals	67%	
Adults don't eat so children can	53 %	
No coping strategies	2%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



52% At least some food 47% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



50% At least some food 48% Sleep hungry 2% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



46% At least some food 52% No food 2% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Aweil South County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



month prior to data collection4

Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



47% Yes 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



Most commonly reported source of cereals, in the Most commonly reported market access barriers, in the month prior to data collection⁴

Market purchase Own crop

Neighbours/relatives 10% Food assistance 8%

No money 40% Too far High prices 9% No market access barriers 23%

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs4

Non-food items	94%	
Food	16%	
Cash for work	14%	
No humanitarian aid	4%	1

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes No. not needed No, already done No, needed but not possible Don't know 3% % of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	36%	
No, already done	12%	
No, needed but not possible	39%	
Don't know	3%	1

Yes	68%	
No, not needed	25 %	
No, already done	3%	I
No, needed but not possible	3%	I
Don't know	1%	1



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Aweil South County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	26%	
No, not needed	45%	
No, already exhausted	9%	
No, needed but not possible	17%	
Don't know	3%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	53%	
No, not needed	21%	
No, already done	7%	
No, needed but not possible	17%	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	8%	
No, not needed	35%	
No, already done	9%	
No, needed but not possible	47%	
Don't know	2%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



25% Yes⁷ 75% No

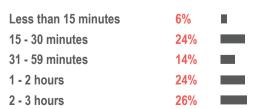
% of households with malnourished children, as reported by \mbox{Kls}^{8}



7% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	25%	
No staff/medicine	20%	
Costs	10%	
No barriers	45%	

Sold assets	32 %	
Go to further facility	31%	
Go to a lower quality facility	12%	
No coping strategies used	51%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Aweil South County

Northern Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



83% Improved⁹
17% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	15%	
15 - 29 minutes	35%	
30 - 59 minutes	19%	
1 hour - 2 hours	31%	

Most commonly reported barriers to accessing water⁴

Water points are too far	32 %	
Long waiting time	20%	
Bad taste	18%	
Containers are insufficient	3%	1
No water access barriers	38%	

% of households with access to a functional latrine, as reported by KIs



38% Yes 62% No 0% Don't know % of households with access to soap, as reported by KIs



64% Yes 83% No Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	97%	
Personal hygiene	66%	
Domestic	47%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	15 %	
Reducing use of water for cleaning	13%	
Buying more water than usual	0%	
Don't know	0%	
No coping strategies used	84%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Aweil West County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	42%	
High prices	14%	
Other	5%	
Didn't plant	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	74%	
Casual labour	62%	
Consuming crops	48%	
Collecting wild food	46%	
Livestock	32%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	68%	
New arrival	21%	
Natural disaster	11%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	82%	
Reducing meals	80%	
Adults don't eat so children can	53 %	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



54% At least some food 45% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



53% At least some food 46% Sleep hungry 1% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



53% At least some food 46% No food 1% Don't know



³ Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Aweil West County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



99% Yes

1% No

0% Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



62% Yes 33% No 5% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



61% Yes 36% No 3% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	36%	
Too far	16%	
High prices	8%	
No market access barriers	26%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	84%	
Food	33%	
Cash	7%	
No humanitarian aid	7%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	12%	
No, not needed	29%	
No, already done	16%	
No, needed but not possible	41%	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	14%	
No, not needed	32 %	
No, already done	12%	
No, needed but not possible	37%	
Don't know	5%	

Yes	59 %	
No, not needed	24%	
No, already done	6%	
No, needed but not possible	9%	
Don't know	2%	I

⁶ Because of a lack of food, or money to buy food





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Aweil West County

Northern Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	52 %	
No, not needed	30%	
No, already exhausted	10%	
No, needed but not possible	7%	
Don't know	1%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	52 %	
No, not needed	22 %	
No, already done	9%	
No, needed but not possible	15%	
Don't know	3%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	3%	1
No, not needed	32 %	
No, already done	11%	
No, needed but not possible	54%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



35% Yes⁷ 65% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



08% No 2% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	20%	
Costs	14%	
No staff/medicine	4%	I
No barriers	60%	

Sold assets	18%	
Go to further facility	11%	
Borrow money	8%	
No coping strategies used	69%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Aweil West County

Northern Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



87% Improved⁹
13% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	20%	
15 - 29 minutes	60%	
30 - 59 minutes	16%	
1 hour - 2 hours	5%	

Most commonly reported barriers to accessing water⁴

Bad taste	20%	
Long waiting time	17%	
Containers are insufficient	10%	
Water points are too far	4%	1
No water access barriers	55%	

% of households with access to a functional latrine, as reported by KIs



74% Yes 26% No 0% Don't know % of households with access to soap, as reported by KIs



85% Yes 13% No 2% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	99%	
Cooking	99%	
Personal hygiene	87%	
Domestic	65%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	3%	1	
Don't know	1%	1	
Reducing use of water for bathing	1%	I	
Buying more water than usual	0%		
No coping strategies used	96%		

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.

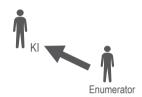
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

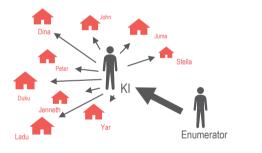
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

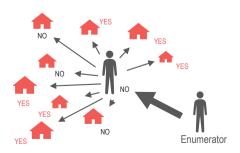
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Baliet County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



59% Yes 39% No 2% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	27%	
No food distribution	7%	
Couldn't harvest	3%	1
Didn't plant	1%	1

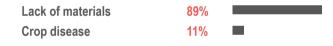
Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	90%	
Fishing	55%	
Livestock	29%	
Casual labour	24%	
Petty trade	9%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴



Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	61%	
Limiting meal sizes	56%	
Don't know	2%	1
No coping strategies	14%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



63% At least some food 35% No food 2% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



61% At least some food 35% Sleep hungry 4% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



58% At least some food 35% No food 7% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Baliet County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



61% Yes 37% No 2% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



79% Yes 16% No 5% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



78% Yes 1<mark>4%</mark> No 8% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	3%	I
High prices	3%	1
Too far	2%	1
No market access barriers	30%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	71%	
Non-food items	54%	
Cash	18%	
No humanitarian aid	26%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	17%		
No, not needed	26%		
No, already done	46%		
No, needed but not possible	9%		
Don't know	2%	1	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	29%	
No, already done	46%	
No, needed but not possible	4%	1
Don't know	3%	1

Yes	2%	1
No, not needed	22%	
No, already done	74%	
No. needed but not possible	2%	1



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Baliet County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	2%	1
No, not needed	23%	
No, already exhausted	74%	
No needed but not possible	1%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	17%	
No, not needed	30%	
No, already done	46%	
No, needed but not possible	6%	
Don't know	1%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	28%	
No, already done	47%	
No, needed but not possible	7 %	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs

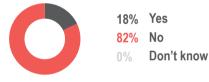


32% Yes⁷ 68% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



98% No 2% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	8%		
15 - 30 minutes	33%		
31 - 59 minutes	34%		
1 - 2 hours	22%		
2 - 3 hours	2%	1	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	11%	
No staff/medicine	5%	
Not always open	2%	I
No barriers	82%	

Borrow money	7 %	
Sold assets	4%	1
Go to further facility	3%	1
No coping strategies used	86%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Baliet County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



36% Improved⁹
64% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	7%	
15 - 29 minutes	21%	
30 - 59 minutes	62 %	
1 hour - 2 hours	10%	

Most commonly reported barriers to accessing water⁴

Water points are too far	40%	
water points are too far	40 /0	
Long waiting time	38%	
Bad taste	11%	
Expensive	3%	1
No water access barriers	23%	

% of households with access to a functional latrine, as reported by KIs



34% Yes 66% No 0% Don't know % of households with access to soap, as reported by KIs



45% Yes 47% No 8% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	98%	
Cooking	98%	
Personal hygiene	92%	
Domestic	45%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	40%	
Reducing use of water for cleaning	32 %	
Reducing use of water for cleaning	31%	
Buying more water than usual	12%	
No coping strategies used	50%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Fashoda County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



55%	Yes
43%	No
2%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	29%	
Didn't plant	4%	1
No food distribution	4%	1
New arrivals	4%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	77%	
Fishing	44%	
Collecting wild food	38%	
Livestock	34%	
Consuming crops	26%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	40%	
Natural disaster	28%	
Insecurity	10%	
Insufficient labour	10%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	51%	
Reducing meals	51%	
Adults don't eat so children can	18%	
No coping strategies	45%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



60% At least some food 38% No food 2% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



60% At least some food 39% Sleep hungry 1% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



69% At least some food 31% No food 0% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Fashoda County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



54% Yes 46% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



39% Yes 60% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



37% Yes 61% No 2% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	32%		
Food assistance	7%		
Own crop	5%		
Borrowing	1%	1	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	16%	
Flooding	8%	
No money	2%	I
No market access barriers	24%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	73%	
Cash	0%	
Cash for work	0%	
No humanitarian aid	27%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	41%	
No, not needed	36%	
No, already done	19%	
No, needed but not possible	1%	1
Don't know	4%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	35%	
No, not needed	34%	
No, already done	16%	
No, needed but not possible	11%	
Don't know	4%	1

Yes	17%	
No, not needed	19%	
No, already done	50 %	
No, needed but not possible	13%	
Don't know	2%	1



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Fashoda County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	9%	
No, not needed	31%	
No, already exhausted	38%	
No, needed but not possible	11%	
Don't know	12%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	43%	
No, not needed	42 %	
No, already done	15%	
No, needed but not possible	0%	
Don't know	1%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	51%	
No, not needed	20%	
No, already done	22%	
No, needed but not possible	6%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



11% Yes⁷ 89% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



99% No 1% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	11%	
Worried to get sick	1%	
Costs	0%	
No barriers	89%	

Go to further facility	30%	
Borrow money	28%	
Sold assets	23%	
No coping strategies used	45%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Fashoda County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



100% Improved⁹
0% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	26%	
15 - 29 minutes	57%	
30 - 59 minutes	13%	
1 hour - 2 hours	3%	1

Most commonly reported barriers to accessing water⁴

Long waiting time	7%	
Water points are too far	4%	1
Containers are insufficient	2%	1
Bad taste	1%	1
No water access barriers	82%	

% of households with access to a functional latrine, as reported by KIs



25% Yes 75% No 0% Don't know % of households with access to soap, as reported by KIs



27% Yes 72% No 1% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	99%	
Cooking	99%	
Personal hygiene	95%	
Domestic	91%	
Not enough for any need	1%	I

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	3%	1	
Reducing use of water for cleaning	3%	1	
Buying more water than usual	2%	I	
Reducing use of water for cleaning	2%	1	
No coping strategies used	94%		

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.



Area of Knowledge-Neighbourhoods³: Luakpiny/Nasir County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



77% Yes
21% No
2% Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	7%	
No food distribution	6%	
New arrivals	4%	
Couldn't harvest	2%	- 1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	84%	
Fishing	74%	
Consuming crops	44%	
Collecting wild food	41%	
Petty trade	39%	

% of households reported by KIs as having planted or harvested in 2020

Planted and harvested	0%	
Planted, not time to harvest ⁵	46%	
Planted, harvest insufficient	4%	1
Did not plant	50%	

Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	76%	
Insecurity	11%	
Natural disaster	9%	
Crop disease	4%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	44%	
Limiting meal sizes	43%	
Skipping days	32 %	
No coping strategies	40%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



76% At least some food 20% No food 4% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



53% At least some food 43% Sleep hungry 4% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



49% At least some food44% No food7% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Luakpiny/Nasir County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



92% Yes 7% No 1% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



89% Yes 11% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



04% Yes 6% No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Closed market	13%	
Unsafe to travel	10%	
Too far	9%	
No market access harriers	40%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	76%	
Non-food items	45%	
Cash for work	1%	1
No humanitarian aid	12%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	18%	
No, not needed	50 %	
No, already done	18%	
No, needed but not possible	14%	
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	19%	
No, not needed	44%	
No, already done	18%	
No, needed but not possible	17%	
Don't know	3%	1

Yes	12%	
No, not needed	46%	
No, already done	23%	
No, needed but not possible	19%	
Don't know	0%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Luakpiny/Nasir County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	12%	
No, not needed	49%	
No, already exhausted	20%	
No, needed but not possible	19%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	19%	
No, not needed	50%	
No, already done	20%	
No, needed but not possible	10%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	19%	
No, not needed	32%	
No, already done	21%	
No, needed but not possible	26%	
Don't know	2%	I

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



58% Yes⁷ 42% No

% of households with malnourished children, as reported by KIs⁸



80% No 20% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	38%	
Not always open	10%	
Too far	8%	
No barriers	40%	

Delay treatment	16%	
Sold assets	8%	
Borrow money	7%	
No coping strategies used	75%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Luakpiny/Nasir County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



43% Improved⁹
57% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	21%	
15 - 29 minutes	35%	
30 - 59 minutes	21%	
1 hour - 2 hours	23%	

Most commonly reported barriers to accessing water⁴

Long waiting time	34%	
Water points are too far	22%	
Containers are insufficient	13%	
Bad taste	7 %	
No water access barriers	37%	

% of households with access to a functional latrine, as reported by KIs



77% Yes
22% No
1% Don't know

% of households with access to soap, as reported by KIs



49% Yes 49% No 2% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	72 %	
Cooking	68%	
Personal hygiene	50 %	
Domestic	36%	
Not enough for any need	6%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	8%	
Reducing use of water for cleaning	7%	
Reducing use of water for cleaning	5%	
Buying more water than usual	3%	1
No coping strategies used	81%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Maban County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



65% Yes 28% No 7% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

28%

Crops destroyed



Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Casual labour	84%	
Consuming crops	81%	
Livestock	43%	
Petty trade	35%	
Fishing	25%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	59%	
Reducing meals	58%	
Don't know	14%	
No coping strategies	26%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



81% At least some food 0% No food 19% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



67% At least some food 1% Sleep hungry 32% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



49% At least some food

5% No food

6% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Maban County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



59% Yes 32% No 9% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



44% Yes 7% No 49% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



44% Yes 4% No 52% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	22%	
Market purchase	13%	
Own crop	12%	
Neighbours/relatives	8%	

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	27%	
High prices	18%	
Too far	1%	1
No market access barriers	15%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	54%	
Non-food items	42%	
Cash	22%	
No humanitarian aid	45%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	52 %	
No, already done	36%	
No, needed but not possible	0%	
Don't know	12%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	2%	1
No, not needed	49%	
No, already done	39%	
No, needed but not possible	0%	
Don't know	10%	

Yes	59 %	
No, not needed	10%	
No, already done	5%	1
No, needed but not possible	2%	1
Don't know	24%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Maban County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	91%	
No, already exhausted	1%	1
No, needed but not possible	4%	1
Don't know	5%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	1%	I
No, not needed	16%	
No, already done	30%	
No, needed but not possible	52 %	
Don't know	2%	I

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	57 %	
No, already done	37%	
No, needed but not possible	0%	
Don't know	6%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



23% Yes⁷ 77% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	22%	
Natural hazard	1%	1
Costs	0%	
No barriers	77%	

Delay treatment	30%	
Sold assets	23%	
Borrow money	11%	
No coping strategies used	67%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Maban County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



36% Improved⁹
64% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	54%	
15 - 29 minutes	19%	
30 - 59 minutes	23%	
1 hour - 2 hours	2 %	I

Most commonly reported barriers to accessing water⁴

Bad taste	39%	
Long waiting time	26%	
Water points are broken	5%	
Expensive	4%	
No water access barriers	27%	

% of households with access to a functional latrine, as reported by KIs



32% Yes 68% No 0% Don't know % of households with access to soap, as reported by KIs



33% Yes 30% No 37% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	91%	
Cooking	91%	
Personal hygiene	90%	
Domestic	87%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	30%	
Reducing use of water for bathing	25%	
Reducing use of water for cleaning	25%	
Buying more water than usual	5 %	
No coping strategies used	66%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Malakal County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



78%	Yes
21%	No
1%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	13%	
No food distribution	3%	1
Lack of rain	3%	1
Couldn't harvest	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	91%	
Fishing	47%	
Petty trade	25%	
Retail trade	19%	
Livestock	14%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	49%	
Reducing meals	24%	
Don't know	2%	I
No coping strategies	44%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



81% At least some food 18% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



80% At least some food 19% Sleep hungry 1% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



81% At least some food 18% No food 1% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Malakal County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



64% Yes 36% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



64% Yes 36% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	9%	
Closed market	2%	I
Flooding	1%	1
No market access barriers	69%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	88%	
Non-food items	59%	
Cash	1%	I
No humanitarian aid	11%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	10%	
No, not needed	68%	
No, already done	8%	
No, needed but not possible	5%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	73%	
No, already done	9%	
No, needed but not possible	6%	
Don't know	2%	1

Yes	0%	
No, not needed	32 %	
No, already done	46%	
No, needed but not possible	23%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Malakal County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	86%	
No, already exhausted	14%	
No. needed but not possible	0%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	11%	
No, not needed	60%	
No, already done	15%	
No, needed but not possible	12 %	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	53%	
No, already done	24%	
No, needed but not possible	12%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



57% Yes⁷ 43% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



98% No 2% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



95% No
Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	13%	
15 - 30 minutes	65%	
31 - 59 minutes	14%	
1 - 2 hours	7%	
2 - 3 hours	2%	I

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	5%	
Costs	0%	
Discrimination	0%	
No barriers	95%	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Go to further facility	6%		
Delay treatment	1%	1	
Borrow money	0%		
No coping strategies used	92%		





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Malakal County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



16% Improved⁹
84% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	6%	
15 - 29 minutes	18%	
30 - 59 minutes	76%	

Most commonly reported barriers to accessing water⁴

Water points are too far	58%	
Long waiting time	42%	
Water points are broken	0%	
Insecurity	0%	
No water access barriers	42%	

% of households with access to a functional latrine, as reported by KIs

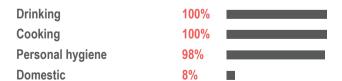


85% Yes 15% No 0% Don't know % of households with access to soap, as reported by KIs



75% Yes 25% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Buying more water than usual	22%	
Don't know	1%	1
Reducing use of water for bathing	0%	
Reducing use of water for cleaning	0%	
No coping strategies used	77%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.



Area of Knowledge-Neighbourhoods³: Manyo County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



74% Yes 23% No 3% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Didn't plant	8%	
Crops destroyed	6%	
No food distribution	5%	
Couldn't harvest	2%	- 1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	71%	
Casual labour	61%	
Fishing	55%	
Petty trade	35%	
Livestock	20%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	60%	
Natural disaster	27%	
Don't know	12%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	58%	
Reducing meals	55%	
Don't know	7%	
No coping strategies	29%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



81% At least some food8% No food11% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



77% At least some food7% Sleep hungry16% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



78% At least some food5% No food17% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Manyo County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



46% Yes 46% No 8% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



56% Yes 29% No 15% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



26% No 15% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	19%	
Own crop	14%	
Food assistance	9%	
Borrowing	2%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	9%	
Too far	9%	
High prices	7%	
No market access harriers	30%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	48%	
Cash	28%	
Non-food items	27%	
No humanitarian aid	52 %	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	8%	
No, not needed	49%	
No, already done	35%	
No, needed but not possible	5 %	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	5%	
No, not needed	51 %	
No, already done	35%	
No, needed but not possible	5 %	
Don't know	5%	

Yes	33%	
No, not needed	41%	
No, already done	9%	
No, needed but not possible	4%	1
Don't know	14%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.
⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Manyo County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	9%	
No, not needed	40%	
No, already done	32 %	
No, needed but not possible	10%	
Don't know	8%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	2%	I
No, not needed	54 %	
No, already done	43%	
No, needed but not possible	0%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



8% Yes⁷ 92% No % of households with malnourished children, as reported by \mbox{Kls}^{8}



08% No 2% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	9%	
Costs	0%	
Discrimination	0%	
No barriers	91%	

Sold assets	22%	
Borrow money	19%	
Go to further facility	10%	
No coping strategies used	66%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Manyo County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



82% Improved⁹
18% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	30%	
15 - 29 minutes	40%	
30 - 59 minutes	18%	
1 hour - 2 hours	10%	

Most commonly reported barriers to accessing water⁴

Bad taste	21%	
Water points are too far	12%	
Expensive	9%	
Long waiting time	8%	
No water access harriers	57%	

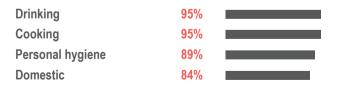
% of households with access to a functional latrine, as reported by KIs



48% Yes 52% No 0% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	45%	
Reducing use of water for bathing	43%	
Reducing use of water for cleaning	32%	
Buying more water than usual	16%	
No coping strategies used	42%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Melut County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



89%	Yes
6%	No
5%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	6%	
Couldn't harvest	0%	
Cattle raids	0%	
Cultivation issues	0%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	98%	
Casual labour	71%	
Fishing	53%	
Livestock	50%	
Retail trade	10%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	79%	
Reducing meals	76%	
Don't know	5%	
No coping strategies	12%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



91% At least some food 2% No food 7% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



84% At least some food1% Sleep hungry15% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



80% At least some food 3% No food 17% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Melut County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



28% Yes 66% No 6% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



78% Yes 7% No 15% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



79% Yes 5% No 16% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	13%	
rood assistance	1370	
Own crop	12%	
Market purchase	2%	-1
Borrowing	0%	

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	8%	
High prices	4%	
Don't know	2%	I
No market access barriers	15%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	44%	
Non-food items	36%	
Cash	23%	
No humanitarian aid	55%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	2%	1
No, not needed	25%	
No, already done	63%	
No, needed but not possible	0%	
Don't know	10%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	2%	1
No, not needed	25%	
No, already done	63%	
No, needed but not possible	0%	
Don't know	10%	

Yes	9%	
No, not needed	6 %	
No, already done	70%	
No, needed but not possible	1%	1
Don't know	13%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Melut County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	23%	
No, already done	65%	
No, needed but not possible	5%	
Don't know	6%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	26%	
No, already done	65 %	
No, needed but not possible	0%	
Don't know	9%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



21% Yes⁷ 79% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



9% No 1% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



3% No % Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

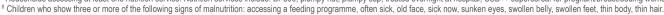
Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Less than 15 minutes 23%
15 - 30 minutes 36%
31 - 59 minutes 26%
1 - 2 hours 9%
2 - 3 hours 3%
■■■

Too far 7%
Costs 0%
Discrimination 0%
No barriers 93%

Borrow money	4%	1
Delay treatment	4%	1
Buy from pharmacy/shop	3%	1
No coping strategies used	90%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Melut County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



45% Improved⁹
55% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	20%	
15 - 29 minutes	32 %	
30 - 59 minutes	32%	
1 hour - 2 hours	12%	
2 hours - 3 hours	5%	

Most commonly reported barriers to accessing water⁴

Long waiting time	31%	
	3170	
Water points are too far	17%	
Water points are broken	7%	
Bad taste	6%	
No water access barriers	36%	

% of households with access to a functional latrine, as reported by KIs



44% Yes 56% No 0% Don't know % of households with access to soap, as reported by KIs



70% Yes 10% No 20% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	92%
Cooking	92%
Personal hygiene	91%
Domestic	90%

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	66%	
Reducing use of water for cleaning	66%	
Reducing use of water for cleaning	61%	
Buying more water than usual	9%	
No coping strategies used	23%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Panyikang County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



50% Yes 50% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	18%	
New arrivals	13%	
Didn't plant	7%	
Lack of rain	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Fishing	76%	
Consuming crops	49%	
Petty trade	47%	
Collecting wild food	31%	
Livestock	22%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	88%	
Crop disease	6%	
Didn't want	3%	I
Natural disaster	3%	I

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	77%	
Reducing meals	62 %	
Adults don't eat so children can	10%	
No coping strategies	20%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



66% At least some food 34% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



72% At least some food 28% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



77% At least some food22% No food1% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Panyikang County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



42% Yes 58% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



18% Yes 82% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



61% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	33%		
Food assistance	5%		
Neighbours/relatives	1%	1	
Own crop	1%	1	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	28%	
Closed market	0%	
Don't know	0%	
No market access barriers	19%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	30%	
Non-food items	16%	
Cash	0%	
No humanitarian aid	59%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	38%	
No, not needed	25%	
No, already done	12%	
No, needed but not possible	24%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	38%	
No, not needed	39%	
No, already done	6%	
No, needed but not possible	12%	
Don't know	5%	

Yes	0%	
No, not needed	67%	
No, already done	11%	
No, needed but not possible	22%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.
⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Panyikang County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	50 %	
No, already exhausted	32 %	
No, needed but not possible	18%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	37%	
No, not needed	27%	
No, already done	16%	
No, needed but not possible	16%	
Don't know	3%	ı

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	40%	
No, already done	11%	
No, needed but not possible	38%	
Don't know	2%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



16% Yes⁷ 84% No

% of households with malnourished children, as reported by KIs⁸



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	16%	
No staff/medicine	6%	
Costs	0%	
No barriers	78%	

Go to further facility	31%	
Borrow money	14%	
Go to a lower quality facility	14%	
No coping strategies used	46%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Panyikang County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



28% Improved⁹
72% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	54%	
15 - 29 minutes	40%	
30 - 59 minutes	6%	

Most commonly reported barriers to accessing water⁴

Long waiting time	6%	
Natural hazards	2%	I
Water points are broken	0%	
Insecurity	0%	
No water access barriers	93%	

% of households with access to a functional latrine, as reported by KIs



8% Yes 92% No 0% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	99%	
Cooking	96%	
Personal hygiene	93%	
Domestic	57%	

Most commonly reported strategies used to cope with a lack of water⁴

No coping strategies used 100

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water,



Area of Knowledge-Neighbourhoods³: Renk County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



93% Yes 5% No 2% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

High prices 1%

Most commonly reported sources of livelihoods, in the month prior to data collection⁴



% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Don't know 100%

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	66%	
Reducing meals	58%	
Don't know	2%	I
No coping strategies	26%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



94% At least some food 2% No food 4% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



87% At least some food1% Sleep hungry12% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



76% At least some food3% No food21% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Renk County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



46% Yes 52% No 2% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



69% Yes 15% No 16% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



18% No 21% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	25%	
Own crop	18%	
Market purchase	2%	1
Borrowing	1%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

High prices	11%	
No money	7 %	
Too far	6%	
No market access barriers	26%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	81%	
Cash	34%	
Non-food items	33%	
No humanitarian aid	17%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	55 %	
No, already done	41%	
No, needed but not possible	1%	I
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	1%	I
No, not needed	56 %	
No, already done	41%	
No, needed but not possible	0%	
Don't know	1%	1

Yes	6%	
No, not needed	26%	
No, already done	58%	
No, needed but not possible	0%	
Don't know	9%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Renk County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	43%	
No, already exhausted	57 %	
No, needed but not possible	0%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

7%	
47%	
40%	
0%	
7%	
	47% 40% 0%

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	3%	1
No, not needed	50 %	
No, already done	43%	
No, needed but not possible	4%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



47% Yes⁷ 53% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



08% No 2% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	6%	
Natural hazard	1%	1
Costs	0%	
No barriers	93%	

Borrow money	11%	
Sold assets	5 %	
Go to further facility	3%	1
No coping strategies used	83%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Renk County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



95% Improved⁹
5% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	38%	
15 - 29 minutes	35%	
30 - 59 minutes	10%	
1 hour - 2 hours	13%	

Most commonly reported barriers to accessing water⁴

Long waiting time	16%	
Water points are broken	14%	
Water points are too far	9%	
Bad taste	6%	
No water access barriers	44%	

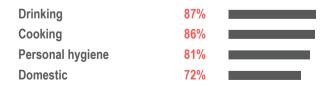
% of households with access to a functional latrine, as reported by KIs



55% Yes 45% No 0% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	50%	
Reducing use of water for bathing	49%	
Reducing use of water for cleaning	44%	
Buying more water than usual	16%	
No coping strategies used	23%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Ulang County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



78% Yes

22% No

0% Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	7%	
No food distribution	7%	
Didn't plant	3%	- 1
New arrivals	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	83%	
Fishing	68%	
Collecting wild food	52 %	
Petty trade	36%	
Consuming crops	11%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	89%	
Crop disease	6%	
Insecurity	4%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	30%	
Limiting meal sizes	23%	
Adults don't eat so children can	18%	
No coping strategies	64%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



79% At least some food17% No food4% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



67% At least some food 28% Sleep hungry 5% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



70% At least some food24% No food6% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Ulang County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



87% Yes 9% No 4% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



96% Yes 3% No 1% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



7% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Food assistance	60%	
Own crop	12%	
Neighbours/relatives	10%	
Borrowing	3%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Closed market	21%	
Too far	19%	
Unsafe to travel	13%	
No market access harriers	27%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	71%	
Non-food items	44%	
Cash	0%	
No humanitarian aid	12%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	18%	
No, not needed	57%	
No, already done	10%	
No, needed but not possible	14%	
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	58%	
No, already done	12%	
No, needed but not possible	12%	

Yes	15%	
No, not needed	60%	
No, already done	12%	
No, needed but not possible	12 %	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Ulang County

Upper Nile State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	11%	
No, not needed	65%	
No, already exhausted	16%	
No, needed but not possible	7%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	21%	
No, not needed	57 %	
No, already done	11%	
No, needed but not possible	11%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	37%	
No, not needed	36%	
No, already done	11%	
No. needed but not possible	16%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs

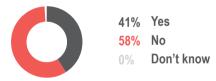


43% Yes⁷ 57% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



84% No 16% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No otoff/modicine	19%	_
No staff/medicine	19%	
Not always open	11%	
Too far	4%	1
No barriers	58%	

Delay treatment	11%	
Go to further facility	5 %	
Sold assets	4%	1
No coping strategies used	79%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Ulang County

Upper Nile State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



89% Improved⁹
11% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	24%	
15 - 29 minutes	41%	
30 - 59 minutes	22%	
1 hour - 2 hours	11%	

Most commonly reported barriers to accessing water⁴

Long waiting time	36%	
Water points are too far	15%	
Containers are insufficient	9%	
Insecurity	8%	
No water access barriers	18%	

% of households with access to a functional latrine, as reported by KIs



77% Yes 23% No 0% Don't know % of households with access to soap, as reported by KIs



52% Yes 44% No 4% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	53%	
Cooking	50 %	
Personal hygiene	33%	
Domestic	22%	
Not enough for any need	13%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	12%	
Reducing use of water for cleaning	12%	
Reducing use of water for cleaning	3%	1
Using a less preferred water source	2%	1
No coping strategies used	79%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

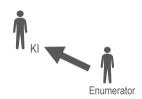
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

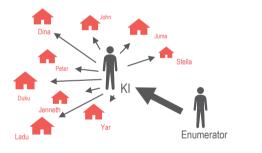
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

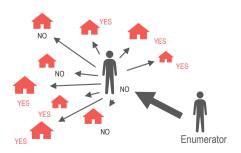
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Gogrial East County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



14%	Yes
85%	No
1%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	37%	
Couldn't harvest	3%	1
No food distribution	2%	1
New arrivals	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Collecting wild food	66%	
Petty trade	31%	
Casual labour	27%	
Livestock	16%	
Consuming crops	9%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	100%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	58%	
Limiting meal sizes	48%	
Skipping days	21%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



32% At least some food65% No food3% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



28% At least some food 70% Sleep hungry 2% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



32% At least some food 64% No food 4% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Gogrial East County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



45% Yes 53% No 2% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



14% Yes 79% No 7% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



i3% Yes i<mark>7%</mark> No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	28%	
Borrowing	8%	
Neighbours/relatives	3%	1
Own crop	3%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	34%	
No money	19%	
Flooding	13%	
No market access barriers	13%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Non-food items	40%	
Food	23%	
Cash for work	3%	1
No humanitarian aid	40%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	32%	
No, not needed	28%	
No, already done	1%	I
No, needed but not possible	32 %	
Don't know	8%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	49%	
No, not needed	26%	
No, already done	1%	1
No, needed but not possible	20%	
Don't know	3%	1

Yes	49%	
No, not needed	48%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	3%	1

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Gogrial East County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	74%	
No, not needed	18%	
No, already done	3%	1
No, needed but not possible	3%	1
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	50 %	
No, already done	0%	
No, needed but not possible	39%	
Don't know	11%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

Less than 15 minutes 15 - 30 minutes 31 - 59 minutes 1 - 2 hours 2 - 3 hours

33% Yes 67% No

Estimated time to access nearest functioning health facility by walking according to Kls, by % of % of households with malnourished children, as reported by KIs8



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Don't know

Most commonly reported barriers to accessing healthcare in the six months prior to data collection4

Too far	48%	
No staff/medicine	17%	
Costs	7%	
No barriers	22%	

Go to further facility	57%	
Borrow money	32 %	
Sold assets	9%	
No coping strategies used	3%	1



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Gogrial East County

Warrap State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



56% Improved⁹
44% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	15%	
15 - 29 minutes	32 %	
30 - 59 minutes	31%	
1 hour - 2 hours	13%	
2 hours - 3 hours	9%	

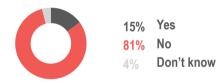
Most commonly reported barriers to accessing water⁴

Containers are insufficient	48%	
Bad taste	36%	
Long waiting time	31%	
Water points are too far	21%	
No water access barriers	14%	

% of households with access to a functional latrine, as reported by KIs



8% Yes 92% No 0% Don't know % of households with access to soap, as reported by KIs



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% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	78%	
Cooking	76%	
Personal hygiene	56 %	
Domestic	29%	
Not enough for any need	22%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	50%	
Reducing use of water for cleaning	29%	
Reducing use of water for cleaning	16%	
Using a less preferred water source	3%	ı
No coping strategies used	26%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Gogrial West County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





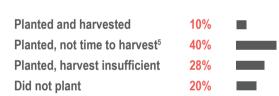
Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	42%	
Didn't plant	13%	
No food distribution	8%	
No markets	4%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	40%	
Casual labour	40%	
Livestock	38%	
Petty trade	21%	
Collecting wild food	19%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	69%	
Pests	28%	
Lack of materials	3%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	53%	
Limiting meal sizes	45%	
Skipping days	11%	
No coping strategies	6%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



50% At least some food 49% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



57% At least some food 40% Sleep hungry 3% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



60% At least some food 37% No food 3% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Gogrial West County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



81% Yes 18% No 1% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



49% Yes 51% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



34% Yes 1<mark>6%</mark> No 0% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	26%	
Market purchase	20%	
Exchange	18%	
Neighbours/relatives	9%	

Most commonly reported market access barriers, in the month prior to data collection⁴

Flooding	26%	
Too far	22%	
No money	13%	
No market access barriers	45%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	52 %	
Cash for work	15%	
Cash	11%	
No humanitarian aid	33%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	28%	
No, not needed	23%	
No, already done	26%	
No, needed but not possible	20%	
Don't know	2%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	21%	
No, not needed	23%	
No, already done	32 %	
No, needed but not possible	21%	
Don't know	2%	1

Yes	76%	
No, not needed	6 %	
No, already done	8%	
No, needed but not possible	5%	
Don't know	4%	1

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Gogrial West County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	62 %	
No, not needed	14%	
No, already exhausted	14%	
No, needed but not possible	7%	
Don't know	3%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	27 %	
No, not needed	20%	
No, already done	33%	
No, needed but not possible	20%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	32%	
No, not needed	22%	
No, already done	21%	
No, needed but not possible	24%	
Don't know	2%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



95% Yes⁷ 5% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



75% No 25% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



1% No
% Don't know

Estimated time to access nearest functioning Most health facility by walking according to KIs, by % of health households

Less than 15 minutes	0%	
15 - 30 minutes	2%	1
31 - 59 minutes	11%	
1 - 2 hours	29%	
2 - 3 hours	36%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	19%	
Too far	18%	
No staff/medicine	11%	
No barriers	42%	

Sold assets	62 %	
Borrow money	37%	
Delay treatment	30%	
No coping strategies used	6%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Gogrial West County

Warrap State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



94% Improved⁹
6% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	32%	
15 - 29 minutes	38%	
30 - 59 minutes	27%	
1 hour - 2 hours	2%	I

Most commonly reported barriers to accessing water⁴

Containers are insufficient	29%	
Long waiting time	15%	
Bad taste	14%	
Water points are too far	12%	
No water access barriers	48%	

% of households with access to a functional latrine, as reported by KIs



6% Yes 94% No 0% Don't know % of households with access to soap, as reported by KIs



44% Yes 54% No 2% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	76%	
Cooking	77%	
Personal hygiene	67%	
Domestic	59%	
Not enough for any need	16%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	30%	
Reducing use of water for cleaning	16%	
Using a less preferred water source	14%	
Buying more water than usual	12%	
No coping strategies used	57%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water.



Area of Knowledge-Neighbourhoods³: Tonj East County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



14% Yes 85% No 1% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	39%	
Didn't plant	17%	
New arrivals	7%	
No markets	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Collecting wild food	63%	
Livestock	49%	
Consuming crops	19%	
Casual labour	15%	
Fishing	10%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Insecurity	71%	
Natural disaster	27%	
Lack of materials	2%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	54%	
Reducing meals	52 %	
Skipping days	18%	
No coping strategies	2%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



44% At least some food55% No food1% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



43% At least some food 52% Sleep hungry 5% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



43% At least some food52% No food5% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Tonj East County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



63% Yes 34% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



37% Yes 61% No 2% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



62% Yes 34% No 4% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	28%	
Exchange	16%	
Own crop	14%	
Borrowing	3%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Flooding	35%	
Too far	19%	
No money	13%	
No market access barriers	10%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	14%		
Food	5%		
Cash for work	1%	1	
No humanitarian aid	84%		

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	45%	
No, not needed	26%	
No, already done	10%	
No, needed but not possible	15%	
Don't know	4%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	42%	
No, not needed	28%	
No, already done	13%	
No, needed but not possible	14%	
Don't know	3%	1

Yes	82 %	
No, not needed	16%	
No, already done	1%	1
No, needed but not possible	0%	
Don't know	1%	1

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Tonj East County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	58%	
No, not needed	19%	
No, already exhausted	16%	
No, needed but not possible	5 %	1
Don't know	2%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	55 %	
No, not needed	22%	
No, already done	15%	
No, needed but not possible	7%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	11%	
No, not needed	68%	
No, already done	6%	
No, needed but not possible	11%	
Don't know	4%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

31% Yes⁷ 69% No

Estimated time to access nearest functioning health facility by walking according to KIs, by % of

% of households with malnourished children, as reported by \mbox{Kls}^{8}



74% No 26% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Less than 15 minutes 0%
15 - 30 minutes 10% ■
31 - 59 minutes 6% ■
1 - 2 hours 29% ■
2 - 3 hours 22%

No staff/medicine 37%

Too far 25%

Costs 5%

No barriers 27%

Go to further facility	50 %	
Borrow money	23%	
Delay treatment	23%	
No coping strategies used	8%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Tonj East County

Warrap State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



93% Improved⁹
7% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	25%	
15 - 29 minutes	30%	
30 - 59 minutes	23%	
1 hour - 2 hours	13%	
2 hours - 3 hours	9%	

Most commonly reported barriers to accessing water4

Bad taste	61%	
Containers are insufficient	45%	
Long waiting time	18%	
Water points are too far	18%	
No water access barriers	26%	

% of households with access to a functional latrine, as reported by KIs



6% Yes 94% No 0% Don't know % of households with access to soap, as reported by KIs



17% Yes 81% No 2% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	85%	
Cooking	86%	
Personal hygiene	80%	
Domestic	64%	
Not enough for any need	10%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	31%	
Reducing use of water for cleaning	20%	
Using a less preferred water source	16%	
Reducing use of water for cleaning	13%	
No coping strategies used	43%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Tonj North County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



62%	Yes
38%	No
00/	Don't kno

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

New arrivals	11%	
Crops destroyed	6%	
High prices	5%	
No markets	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	67%	
Livestock	61%	
Casual labour	26%	
Collecting wild food	15%	
Petty trade	10%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	68%	
Natural disaster	17%	
Insecurity	15%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	59%	
Reducing meals	38%	
Adults don't eat so children can	11%	
No coping strategies	7%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



89% At least some food 9% No food 2% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



87% At least some food 11% Sleep hungry 2% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



88% At least some food 12% No food 0% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Tonj North County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



96% Yes 4% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



64% Yes 33% No 3% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



66% Yes 31% No 3% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	21%	
No money	8%	
Unsafe to travel	6%	
No market access harriers	A50/ ₂	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	35%	
Cash for work	15%	
Cash	7%	
No humanitarian aid	59%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	22%	_
No, not needed	70%	
No, already done	5%	
No, needed but not possible	2%	1
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	71%	
No, already done	6%	
No, needed but not possible	8%	
Don't know	5%	

Yes	19%	
No, not needed	71%	
No, already done	5%	
No, needed but not possible	2%	1
Don't know	3%	1

⁶ Because of a lack of food, or money to buy food







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Tonj North County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	16%	
No, not needed	73%	
No, already exhausted	6%	
No, needed but not possible	3%	1
Don't know	2%	I

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	20%	
No, not needed	66%	
No, already done	8%	
No, needed but not possible	5%	
Don't know	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	82%	
No, already done	2%	1
No, needed but not possible	8%	
Don't know	8%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



33% Yes⁷ 67% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



34% No 16% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



83% No
0% Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	7%	
Unsafe to travel	5%	
Costs	3%	1
No barriers	83%	

Borrow money	27%	
Delay treatment	18%	
Sold assets	14%	
No coping strategies used	43%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Tonj North County

Warrap State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



78% Improved⁹
22% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	14%	
15 - 29 minutes	41%	
30 - 59 minutes	23%	
1 hour - 2 hours	8%	
2 hours - 3 hours	15%	

Most commonly reported barriers to accessing water4

Containers are insufficient	19%	
Long waiting time	17%	
Water points are too far	7 %	
Insecurity	5%	
No water access barriers	52 %	

% of households with access to a functional latrine, as reported by KIs



30% Yes 69% No 1% Don't know % of households with access to soap, as reported by KIs



57% Yes 42% No 1% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	97%	
Cooking	97%	
Personal hygiene	86%	
Domestic	57 %	
Not enough for any need	3%	1

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	19%		
Reducing use of water for cleaning	12%		
Using a less preferred water source	5%		
Don't know	4%	1	
No coping strategies used	64%		

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Tonj South County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



36% Yes 64% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Lack of rain	22%	
Didn't plant	12%	
New arrivals	9%	
Crops destroyed	8%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	76%	
Consuming crops	39%	
Collecting wild food	39%	
Casual labour	22%	
Petty trade	18%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	52 %	
Insecurity	27%	
Natural disaster	21%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	83%	
Reducing meals	56 %	
Skipping days	34%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



87% At least some food 13% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



56% At least some food 34% Sleep hungry 10% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



56% At least some food 39% No food 5% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Tonj South County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



82% Yes 8% No 10% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



48% Yes 52% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



10% No 5% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	36%	
No money	33%	
Flooding	15%	
No market access barriers	38%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	32%	
Cash for work	7%	
Cash	4%	1
No humanitarian aid	59%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	12%	
No, not needed	44%	
No, already done	9%	
No needed but not possible	35%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	32 %	
No, not needed	47%	
No, already done	11%	
No, needed but not possible	10%	

Yes	54 %	
No, not needed	39%	
No, already done	6 %	
No, needed but not possible	1%	1
Don't know	1%	I

⁶ Because of a lack of food, or money to buy food







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Tonj South County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	9%	
No, not needed	38%	
No, already exhausted	22%	
No, needed but not possible	30%	
Don't know	1%	I

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	42%	
No, not needed	40%	
No, already done	2%	I
No, needed but not possible	15%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	3%	1
No, not needed	80%	
No, already done	1%	1
No, needed but not possible	15%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



25% Yes⁷ 75% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



88% No 12% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Costs	5%	
No staff/medicine	4%	1
Unsafe to travel	3%	1
No barriers	85%	

Go to further facility	34%	
Delay treatment	33%	
Sold assets	11%	
No coping strategies used	33%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Tonj South County

Warrap State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



29% Improved⁹
71% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	14%	
15 - 29 minutes	29%	
30 - 59 minutes	32 %	
1 hour - 2 hours	15%	
2 hours - 3 hours	10%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	36%	
Bad taste	23%	
Long waiting time	16%	
Water points are too far	12 %	
No water access barriers	54%	

% of households with access to a functional latrine, as reported by KIs



18% Yes 82% No % of households with access to soap, as reported by KIs



39% Yes 57% No 4% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	69%	
Cooking	78%	
Personal hygiene	75%	
Domestic	65%	
Not enough for any need	19%	_

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	19%	
Reducing use of water for bathing	11%	
Using a less preferred water source	10%	
Reducing use of water for cleaning	9%	
No coping strategies used	59 %	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Twic County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Rain/flooding	65%	
Couldn't harvest	6%	
No food distribution	5%	
Insufficient labour	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Livestock	78%	
Collecting wild food	64%	
Petty trade	43%	
Casual labour	24%	
Fishing	10%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

No data available either because households were not in agricuture, or because no household was unsuccessfully planting.

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	92%	
Limiting meal sizes	82%	
Skipping days	78%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



72% At least some food23% No food5% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



30% At least some food 68% Sleep hungry 2% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



22% At least some food71% No food7% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Twic County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



79% Yes
11% No
10% Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



26% Yes 74% No 0% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



35% Yes 6<mark>0%</mark> No 5% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	60%	
Neighbours/relatives	6%	
Own crop	6%	
Food assistance	5%	

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	40%	
Too far	35 %	
Flooding	27%	
No market access barriers	11%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Non-food items	28%	
Cash for work	10%	
Food	7%	
No humanitarian aid	58%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	34%	
No, not needed	11%	
No, already done	3%	1
No, needed but not possible	46%	
Don't know	6%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	49%	
No, not needed	12%	
No, already done	3%	1
No, needed but not possible	34%	
Don't know	2%	1

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	76 %	
No, not needed	5 %	
No, already done	18%	
No, needed but not possible	1%	1





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Twic County

Warrap State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	58%	
No, not needed	5%	
No, already done	16%	
No, needed but not possible	16%	
Don't know	5%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	83%	
No, already done	14%	
No, needed but not possible	3%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



30% Yes⁷ 70% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



33% No 1<mark>7%</mark> Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Delay treatment	61%	
Go to further facility	49%	
Borrow money	7%	
No coping strategies used	21%	

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	2%	1
15 - 30 minutes	0%	
31 - 59 minutes	27%	
1 - 2 hours	18%	
2 - 3 hours	45%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	6%	
Costs	1%	I
Discrimination	0%	
No barriers	92%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.





⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Twic County

Warrap State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



49% Improved⁹
51% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	6%	
15 - 29 minutes	38%	
30 - 59 minutes	19%	
1 hour - 2 hours	23%	
2 hours - 3 hours	14%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	53%	
Long waiting time	28%	
Bad taste	26%	
Water points are too far	20%	
No water access barriers	33%	

% of households with access to a functional latrine, as reported by KIs



12% Yes 88% No 0% Don't know % of households with access to soap, as reported by KIs



36% Yes 58% No 6% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	83%	
Cooking	76 %	
Personal hygiene	81%	
Domestic	65 %	
Not enough for any need	17%	

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	41%	
Reducing use of water for cleaning	24%	
Reducing use of water for bathing	5%	
Reducing use of water for cleaning	5%	
No coping strategies used	52 %	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

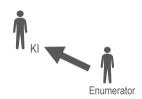
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

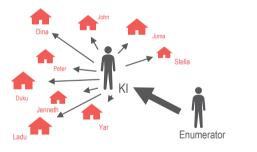
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

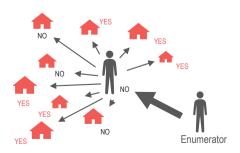
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Jur River County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



41%	Yes
53 %	No
6%	Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Didn't plant	17%	
No food distribution	9%	
New arrivals	9%	
Crops destroyed	6%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Petty trade	39%	
Casual labour	31%	
Collecting wild food	25%	
Consuming crops	24%	
Livestock	18%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	51%	
Insecurity	30%	
Crop disease	8%	
Natural disaster	6%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	55%	
Reducing meals	37%	
Skipping days	14%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



69% At least some food 23% No food 8% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



70% At least some food20% Sleep hungry10% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



68% At least some food 19% No food 13% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Jur River County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



86% Yes 11% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



42% Yes 43% No 15% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



64% No 16% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	35%	
Own crop	21%	
Food assistance	15%	
Neighbours/relatives	6%	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	17%	
No money	13%	
Don't know	5%	
No market access harriers	38%	1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	47%	
Non-food items	18%	
Cash for work	8%	
No humanitarian aid	32 %	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	17%	
No, not needed	38%	
No, already done	9%	
No, needed but not possible	27%	
Don't know	10%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	11%	
No, not needed	34%	
No, already done	19%	
No, needed but not possible	25%	
Don't know	11%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	11%	
No, not needed	50%	
No, already done	18%	
No, needed but not possible	18%	
Don't know	3%	1





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Jur River County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

Yes	4%	
No, not needed	42%	
No, already exhausted	11%	
No, needed but not possible	41%	
Don't know	2%	1

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	25 %	
No, not needed	35%	
No, already done	15%	
No, needed but not possible	18%	
Don't know	8%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	62 %	
No, already done	19%	
No, needed but not possible	8%	
Don't know	4%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



% of households with malnourished children, as reported by KIs8



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to Kls, by % of households

Less than 15 minutes	8%	
15 - 30 minutes	17%	
31 - 59 minutes	29%	
1 - 2 hours	25%	
2 - 3 hours	13%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	16%	
Unsafe to travel	6%	
Costs	2%	1
No barriers	71%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection4

Borrow money	23%	
Go to further facility	22%	
Delay treatment	18%	
No coping strategies used	22%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling. 8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Jur River County

Western Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



25% Improved⁹
75% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	3%	I
15 - 29 minutes	45%	
30 - 59 minutes	37%	
1 hour - 2 hours	8%	
2 hours - 3 hours	2%	I

Most commonly reported barriers to accessing water⁴

Bad taste	20%	
Water points are too far	17%	
Containers are insufficient	11%	
Long waiting time	7 %	
No water access barriers	44%	

% of households with access to a functional latrine, as reported by KIs



9% Yes 90% No 1% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	79%	
Cooking	70 %	
Personal hygiene	33%	
Domestic	9%	
Not enough for any need	6%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	18%	
Reducing use of water for cleaning	16%	
Don't know	10%	
Using a less preferred water source	3%	1
No coping strategies used	61%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Raja County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

No food distribution	28%	
Didn't plant	11%	
New arrivals	11%	
Couldn't harvest	3%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Casual labour	39%	
Petty trade	32%	
Consuming crops	29%	
Fishing	19%	
Retail trade	19%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	89%	
Natural disaster	8%	
Crop disease	4%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	62 %	
Reducing meals	41%	
Skipping days	7%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



75% At least some food11% No food14% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



80% At least some food 13% Sleep hungry 7% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



79% At least some food11% No food10% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Raja County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



93% Yes 4% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



62% Yes 25% No 13% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



18% Yes <mark>72%</mark> No 10% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	47%	
Own crop	28%	
Borrowing	7%	
Food assistance	5%	

Most commonly reported market access barriers, in the month prior to data collection⁴

No money	11%	
Too far	5 %	
Don't know	2 %	1
No market access harriers	44%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	49%	
Non-food items	12%	
Cash for work	4%	1
No humanitarian aid	34%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	16%	
No, not needed	38%	
No, already done	10%	
No, needed but not possible	27%	
Don't know	10%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	13%	
No, not needed	38%	
No, already done	11%	
No, needed but not possible	28%	
Don't know	10%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

No data available because of a lack of livestock.

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected ⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Raja County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

No data available because of a lack of livestock.

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	17%	
No, not needed	31%	
No, already done	26%	
No, needed but not possible	21%	
Don't know	5 %	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	41%	
No, already done	18%	
No, needed but not possible	25 %	
Don't know	6%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



19% Yes⁷ 81% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



07% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

5%	
39%	
20%	
14%	
10%	
	39% 20% 14%

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	24%	
No staff/medicine	12%	
Costs	2%	I
No barriers	61%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	20%	
Go to a lower quality facility	17%	
Borrow money	13%	
No coping strategies used	36%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Raja County

Western Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



99% Improved⁹
1% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	16%	
15 - 29 minutes	57 %	
30 - 59 minutes	25%	

Most commonly reported barriers to accessing water⁴

Long waiting time	16%	
Bad taste	9%	
Containers are insufficient	8%	
Don't know	3%	1
No water access barriers	61%	

% of households with access to a functional latrine, as reported by KIs



37% Yes 62% No 1% Don't know % of households with access to soap, as reported by KIs



37% Yes 58% No 5% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	83%	
Cooking	82%	
Personal hygiene	47%	
Domestic	14%	
Not enough for any need	7%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	30%	
Reducing use of water for bathing	13%	
Using a less preferred water source	5%	
Don't know	4%	1
No coping strategies used	58%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Wau County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	17%	
Didn't plant	15%	
No food distribution	11%	
Crops destroyed	1%	1

Most commonly reported sources of livelihoods, in the month prior to data collection4

Casual labour	41%	
Petty trade	29%	
Retail trade	21%	
Salaries	10%	
Consuming crops	9%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection4

Lack of materials	75%	
Insufficient labour	11%	
Crop disease	8%	
Didn't want	4%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection4

Limiting meal sizes	50%	
Reducing meals	43%	
Skipping days	5%	
No coping strategies	1%	I

% of households that had no food at all in the house in the week prior to data collection, as reported by Kls



84% At least some food 7% No food

Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



84% At least some food 4% Sleep hungry 12% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



88% At least some food

No food

Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Wau County

Western Bahr el Ghazal State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



98% Yes 1% No 1% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



69% Yes 20% No 11% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



37% Yes48% No15% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	11%	
Too far	9%	
Don't know	4%	1
No market access harriers	66%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by KIs⁴

Food	37%	
Non-food items	14%	
Don't know	5%	
No humanitarian aid	47%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	10%	
No, not needed	41%	
No, already done	11%	
No, needed but not possible	28%	
Don't know	9%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	15%	
No, not needed	35%	
No, already done	13%	
No, needed but not possible	30%	
Don't know	7%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

No data available because of a lack of livestock.

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected ⁶ Because of a lack of food, or money to buy food.









Area of Knowledge-Neighbourhoods: Wau County

Western Bahr el Ghazal State. South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

No data available because of a lack of livestock.

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	34%	
No, already done	11%	
No, needed but not possible	33%	
Don't know	14%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	45%	
No, already done	9%	
No, needed but not possible	33%	
Don't know	13%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



Yes⁷

% of households with malnourished children, as reported by KIs8



% of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Don't know

Most commonly reported barriers to accessing Estimated time to access nearest functioning healthcare in the six months prior to data collection4

health facility by walking according to Kls, by % of households

Less than 15 minutes 15 - 30 minutes 31 - 59 minutes 1 - 2 hours 2 - 3 hours

No staff/medicine Not always open

Don't know No barriers Most commonly reported coping strategies used to meet health needs in the month prior to data collection4

Go to further facility	19%	
Borrow money	16%	
Delay treatment	13%	
No coping strategies used	32 %	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling. 8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Wau County

Western Bahr el Ghazal State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



74% Improved⁹
26% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	26%	
15 - 29 minutes	28%	
30 - 59 minutes	33%	
1 hour - 2 hours	12%	

Most commonly reported barriers to accessing water⁴

Expensive	17%	
Water points are too far	15%	
Long waiting time	9%	
Bad taste	5%	
No water access barriers	51%	

% of households with access to a functional latrine, as reported by KIs



72% Yes 28% No 0% Don't know % of households with access to soap, as reported by KIs



66% Yes 28% No 6% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	82%	
Cooking	80%	
Personal hygiene	43%	
Domestic	18%	
Not enough for any need	8%	

Most commonly reported strategies used to cope with a lack of water⁴

Buying more water than usual	27%	
Reducing use of water for cleaning	21%	
Reducing use of water for bathing	12 %	
Don't know	9%	
No coping strategies used	39%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water

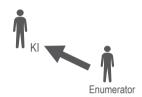
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

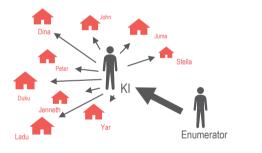
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

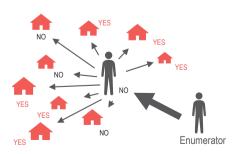
Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"







Area of Knowledge-Neighbourhoods³: Ezo County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



78% Yes 22% No 0% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed	9%	
Didn't plant	8%	
Couldn't harvest	5%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	96%	
Petty trade	49%	
Livestock	20%	
Casual labour	18%	
Selling crops	17%	

% of households reported by KIs as having planted or harvested in 2020

Planted and harvested	71%	
Planted, not time to harvest ⁵	7 %	
Planted, harvest insufficient	13%	
Did not plant	1%	1

Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Crop disease	38%	
Lack of materials	23%	
Natural disaster	22%	
Insecurity	17%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	54 %	
Limiting meal sizes	24%	
Adults don't eat so children can	12%	
No coping strategies	34%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



91% At least some food 6% No food 3% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



94% At least some food 4% Sleep hungry 2% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



93% At least some food

7% No food

% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Ezo County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



80% Yes 20% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs

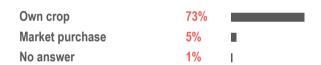


53% Yes 43% No 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



2% Yes 96% No 2% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

No money	17%	
Too far	12%	
High prices	10%	
No market access barriers	39%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

No humanitarian aid	100%	
No numanitarian aid	100%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	17%	
No, not needed	75 %	
No, already done	1%	1
No, needed but not possible	7%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	13%	
No, not needed	75 %	
No, already done	0%	
No, needed but not possible	11%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	20%	
No, not needed	52 %	
No, already done	0%	
No, needed but not possible	26%	
Don't know	2%	I

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Ezo County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	3%	1
No, not needed	64%	
No, already exhausted	0%	
No, needed but not possible	26%	
Don't know	8%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	27%	
No, not needed	64%	
No, already done	0%	
No, needed but not possible	8%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	17%	
No. not needed	83%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



16% Yes 84% No % of households with malnourished children, as reported by \mbox{KIs}^{8}



04% No 6% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Go to further facility	17%	
Borrow money	16%	
Delay treatment	14%	
No coping strategies used	61%	

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 30 minutes	12%	
31 - 59 minutes	30%	
1 - 2 hours	58%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	18%	
Too far	5%	
Not always open	2%	1
No barriers	74%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Ezo County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



89% Improved⁹
11% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 29 minutes	12%	
30 - 59 minutes	32%	
1 hour - 2 hours	52 %	
2 hours - 3 hours	4%	1

Most commonly reported barriers to accessing water⁴

Water points are too far	55 %	
Long waiting time	7%	
Containers are insufficient	6%	
Bad taste	5 %	
No water access barriers	23%	

% of households with access to a functional latrine, as reported by KIs



97% Yes 3% No 0% Don't know % of households with access to soap, as reported by KIs



44% Yes 56% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	95%	
Cooking	95%	
Personal hygiene	95%	
Domestic	17%	
Not enough for any need	5%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	47%	
Reducing use of water for cleaning	46%	
Reducing use of water for cleaning	12%	
Using a less preferred water source	6%	
No coping strategies used	48%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Ibba County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



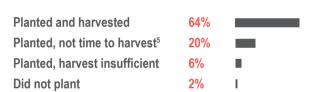
Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Crops destroyed

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	95%	
Selling crops	64%	
Livestock	34%	
Casual labour	23%	
Petty trade	14%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	91%	
Crop disease	5%	
Lack of materials	5%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	80%	
Limiting meal sizes	38%	
Don't know	10%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



85% At least some food 3% No food 12% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



85% At least some food1% Sleep hungry14% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



88% At least some food 0% No food 12% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Ibba County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



97% Yes
0% No
3% Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



29% Yes 58% No 13% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



16% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	14%	
No money	8%	
Don't know	2%	- 1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Cash	1%	-
Don't know	1%	1
Cash for work	0%	
No humanitarian aid	98%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	3%	1
No, not needed	74%	
No, already done	1%	1
No, needed but not possible	4%	1
Don't know	17%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	2%	I
No, not needed	73%	
No, already done	5%	
No, needed but not possible	4%	1
Don't know	16%	_

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	6%	
No, not needed	77%	
No, already done	0%	
No, needed but not possible	9%	
Don't know	8%	

⁶ Because of a lack of food, or money to buy food







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected



Area of Knowledge-Neighbourhoods: Ibba County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	6%	
No, not needed	82 %	
No, already exhausted	2%	I
No, needed but not possible	2%	1
Don't know	8%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	1%	1
No, not needed	75%	
No, already done	4%	1
No, needed but not possible	6%	
Don't know	14%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	14%	
No, not needed	67%	
No, already done	1%	1
No, needed but not possible	0%	
Don't know	18%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



98% Yes 2% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



71% No 7% Don't know

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 30 minutes	5%	
31 - 59 minutes	53%	
1 - 2 hours	29%	
2 - 3 hours	3%	1

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	9%	
Too far	8%	
Discrimination	3%	1
No barriers	77%	

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Delay treatment	51 %	
Go to further facility	38%	
Sold assets	20%	
No coping strategies used	5 %	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Ibba County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



77% Improved⁹
23% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 29 minutes	14%	
30 - 59 minutes	63%	
1 hour - 2 hours	19%	

Most commonly reported barriers to accessing water⁴

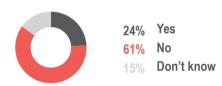
Containers are insufficient	76 %	
Long waiting time	25%	
Bad taste	18%	
Water points are too far	9%	
No water access barriers	6%	

% of households with access to a functional latrine, as reported by KIs



67% Yes
23% No
10% Don't know

% of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	94%	
Cooking	94%	
Personal hygiene	47%	
Domestic	47%	
Not enough for any need	3%	1

Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	29%	
Reducing use of water for bathing	27%	
Reducing use of water for cleaning	17%	
Don't know	12 %	
No coping strategies used	21%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Maridi County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



74% Yes 14% No 12% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Rain/flooding	2%	I
Didn't plant	1%	- [
Insufficient labour	1%	- 1
NA	1%	- 1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	91%	
Selling crops	75 %	
Livestock	26%	
Petty trade	22%	
Casual labour	10%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Insecurity	50%	
Lack of materials	26%	
Insufficient labour	17%	
Pests	7%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	80%	
Limiting meal sizes	48%	
Don't know	12%	
No coping strategies	4%	1

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



85% At least some food 2% No food 13% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



88% At least some food 3% Sleep hungry 9% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



82% At least some food4% No food14% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Maridi County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



% of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



0% Yes 88% No 12% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	81%	
Market purchase	8%	
Food assistance	4%	1
Borrowing	1%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	16%	
No money	6%	
High prices	4%	
No market access harriers	0%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Cash	6%	
Don't know	1%	1
Food	1%	1
No humanitarian aid	90%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	9%	
No, not needed	72 %	
No, already done	0%	
No, needed but not possible	7%	
Don't know	13%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	5 %	1
No, not needed	72 %	
No, already done	1%	I
No, needed but not possible	6 %	
Don't know	16%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	88%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	5%	





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Maridi County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	2%	1
No, not needed	90%	
No, already exhausted	0%	
No, needed but not possible	2%	1
Don't know	7%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	6%	
No, not needed	76%	
No, already done	0%	
No, needed but not possible	7%	
Don't know	11%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	47%	
No, not needed	40%	
No, already done	1%	1
No, needed but not possible	1%	1
Don't know	11%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



92% Yes⁷ 8% No % of households with malnourished children, as reported by KIs⁸



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Delay treatment	44%	
Go to further facility	29%	
Borrow money	17%	
No coping strategies used	3%	1

Estimated time to access nearest functioning health facility by walking according to KIs, by % of households

Less than 15 minutes	6%	
15 - 30 minutes	2%	1
31 - 59 minutes	71%	
1 - 2 hours	19%	

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	6%	
Costs	5%	
Too far	3%	1
No barriers	81%	

⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.





⁶ Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Maridi County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



99% Improved⁹
1% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	4%	I .
15 - 29 minutes	20%	
30 - 59 minutes	63%	
1 hour - 2 hours	12%	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	45%	
Long waiting time	24%	
Water points are too far	16%	
Water points are broken	9%	
No water access barriers	17%	

% of households with access to a functional latrine, as reported by KIs



89% Yes 8% No 3% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Using a less preferred water source	22%	
Reducing use of water for bathing	21%	
Reducing use of water for cleaning	10%	
Don't know	7%	
No coping strategies used	47%	

About REACH:

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Mundri East County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

No data available because no food access barriers were reported by KIs.

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	73%	
Selling crops	55%	
Livestock	31%	
Casual labour	21%	
Petty trade	19%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	29%	
Natural disaster	29%	
Pests	29%	
Crop disease	14%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	67%	
Limiting meal sizes	33%	
Don't know	12%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



83% At least some food 0% No food 17% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



81% At least some food 0% Sleep hungry 19% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



81% At least some food 0% No food 19% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Mundri East County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



84% Yes
7% No
9% Don't know

% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



26% Yes 60% No 14% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



52% res 53% No 15% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	65 %	
Market purchase	14%	
Food assistance	2%	1
Borrowing	1%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	15%	
No money	2%	-
Unsafe to travel	2%	1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Don't know	4%	1
Food	2%	1
Cash	0%	
No humanitarian aid	94%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	42 %	
No, already done	15%	
No, needed but not possible	24%	
Don't know	18%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	41%	
No, already done	15%	
No, needed but not possible	26%	
Don't know	18%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	34%	
No, already done	19%	
No, needed but not possible	28%	
Don't know	20%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Mundri East County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	42%	
No, already exhausted	12%	
No, needed but not possible	28%	
Don't know	18%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	32 %	
No, already done	48%	
No, needed but not possible	0%	
Don't know	19%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	5%	
No, not needed	50 %	
No, already done	23%	
No, needed but not possible	0%	
Don't know	23%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



99% Yes⁷
1% No

Estimated time to access nearest functioning

health facility by walking according to Kls, by % of

% of households with malnourished children, as reported by \mbox{KIs}^{8}



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



57% No 13% Don't know

Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far 12% ■
No staff/medicine 8% ■
Unsafe to travel 6% ■
No barriers 65%

Most commonly reported coping strategies used to meet health needs in the month prior to data collection⁴

Delay treatment	38%	
Go to further facility	25%	
Sold assets	22%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



households

15 - 30 minutes

31 - 59 minutes

1 - 2 hours

2 - 3 hours

Less than 15 minutes





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Mundri East County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



80% Improved⁹
20% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 29 minutes	2%	I
30 - 59 minutes	47%	
1 hour - 2 hours	50%	

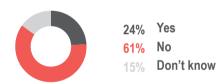
Most commonly reported barriers to accessing water⁴

Containers are insufficient	48%	
Long waiting time	30%	
Water points are too far	28%	
Bad taste	14%	
No water access barriers	1%	1

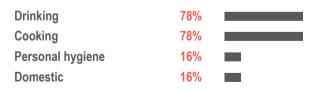
% of households with access to a functional latrine, as reported by KIs



34% Yes 53% No 13% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for cleaning	33%	
Reducing use of water for bathing	32%	
Using a less preferred water source	23%	
Don't know	10%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Mundri West County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



75% Yes

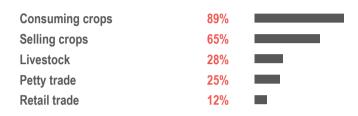
2% No

23% Don't know

Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Didn't plant 2%

Most commonly reported sources of livelihoods, in the month prior to data collection⁴



% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	50%	
Pests	34%	
Natural disaster	11%	
Crop disease	5%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	67%	
Limiting meal sizes	24%	
Don't know	16%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



80% At least some food
0% No food
20% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



79% At least some food 0% Sleep hungry 21% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



78% At least some food
0% No food

0% No food
22% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Mundri West County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



73% Yes 18% No 9% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



23% Yes 60% No 17% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



6% Yes <mark>76%</mark> No 18% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	53%		
Market purchase	17%		
Neighbours/relatives	2%	ı	
Food assistance	1%	1	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	13%	
No money	4%	
Unsafe to travel	3%	1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Don't know	8 % ■
Cash	0%
Cash for work	0%
No humanitarian aid	92%

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	41%	
No, already done	31%	
No, needed but not possible	4%	1
Don't know	24%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	47%	
No, already done	19%	
No, needed but not possible	12%	
Don't know	23%	

% of households that sold more animals than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	47%	
No, already done	14%	
No, needed but not possible	18%	
Don't know	21%	

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Mundri West County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion. as reported by KIs⁶

Yes	0%	
No, not needed	51%	
No, already exhausted	14%	
No, needed but not possible	18%	
Don't know	17%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	39%	
No, already done	31%	
No, needed but not possible	7%	
Don't know	23%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	46%	
No, already done	21%	
No, needed but not possible	2%	1
Don't know	24%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



households

85% Yes7 15% No

% of households with malnourished children, as reported by KIs8



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



17% Don't know

Estimated time to access nearest functioning health facility by walking according to Kls, by % of

Less than 15 minutes 15 - 30 minutes 31 - 59 minutes 1 - 2 hours 2 - 3 hours

Most commonly reported barriers to accessing healthcare in the six months prior to data collection4

Too far No staff/medicine Unsafe to travel No barriers

Most commonly reported coping strategies used to meet health needs in the month prior to data collection4

Delay treatment	26%	
Sold assets	24%	
Go to further facility	21%	

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling. 8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶ Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Mundri West County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



100% Improved⁹
0% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 29 minutes	0%	
30 - 59 minutes	39%	
1 hour - 2 hours	57 %	

Most commonly reported barriers to accessing water⁴

Containers are insufficient	60%	
Water points are too far	38%	
Long waiting time	22%	
Bad taste	16%	
No water access barriers	1%	1

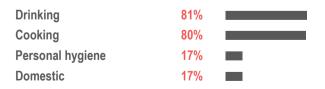
% of households with access to a functional latrine, as reported by KIs



42% Yes 41% No 17% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	31%	
Reducing use of water for cleaning	28%	
Using a less preferred water source	23%	
Don't know	17%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Mvolo County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



82% Yes 0% No 18% Don't know Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

No data available because no food access barriers were reported by Kls.

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	55%	
Selling crops	46%	
Livestock	22%	
Petty trade	21%	
Casual labour	17%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	50%	
Pests	30%	
Lack of materials	20%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	60%	
Limiting meal sizes	30%	
Don't know	11%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



85% At least some food 0% No food 15% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



85% At least some food 0% Sleep hungry 15% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



84% At least some food 0% No food 16% Don't know





³Area of Knowledge - Neighbourhoods

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Mvolo County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



% of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



% of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



21% Yes 63% No 16% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	33%		
Market purchase	12%		
Neighbours/relatives	3%	1	
Exchange	1%	1	

Most commonly reported market access barriers, in the month prior to data collection⁴

Too far	13%	
No money	8%	
Unsafe to travel	3%	1

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Don't know	5%	1
Food	2%	1
Cash	0%	
No humanitarian aid	93%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	29%	
No, already done	30%	
No, needed but not possible	24%	
Don't know	17%	

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	31%	
No, already done	15%	
No, needed but not possible	40%	
Don't know	14%	

Yes	0%	
No, not needed	36%	
No, already done	0%	
No, needed but not possible	44%	
Don't know	20%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Mvolo County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	38%	
No, already exhausted	0%	
No, needed but not possible	44%	
Don't know	17%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	0%	
No, not needed	25 %	
No, already done	53%	
No, needed but not possible	5%	1
Don't know	17%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	1%	1
No, not needed	52 %	
No, already done	20%	
No, needed but not possible	0%	
Don't know	26%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



83% Yes⁷ 17% No

% of households with malnourished children, as reported by KIs⁸



100% No 0% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

Too far	13%	
Costs	6%	
Unsafe to travel	6%	
No barriers	59 %	

Delay treatment	30%	
Go to further facility	27 %	
Borrow money	18%	
No coping strategies used	2%	1



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⁶Because of a lack of food, or money to buy food.

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Mvolo County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



98% Improved⁹
2% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	0%	
15 - 29 minutes	3%	I
30 - 59 minutes	60%	
1 hour - 2 hours	32%	
2 hours - 3 hours	2%	1

Most commonly reported barriers to accessing water⁴

Containers are insufficient	470/	
Containers are insufficient	47%	
ong waiting time	25%	
Nater points are too far	23%	
Bad taste	9%	

% of households with access to a functional latrine, as reported by KIs



29% Yes 60% No 11% Don't know % of households with access to soap, as reported by KIs



32% Yes 55% No 13% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	70%	
Cooking	67%	
Personal hygiene	16%	
Domestic	14%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	31%	
Reducing use of water for cleaning	30%	
Using a less preferred water source	27%	
Don't know	8%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Nagero County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



37% Yes62% No1% Don't know

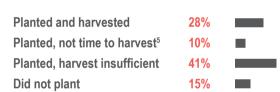
Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

No food distribution	32%	
Crops destroyed	9%	
Didn't plant	6%	
Couldn't harvest	1%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	81%	
Petty trade	51%	
Fishing	39%	
Retail trade	16%	
Casual labour	15%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Crop disease	51%	
Lack of materials	43%	
Natural disaster	3%	1
Don't know	1%	1

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	71%	
Reducing meals	35%	
Adults don't eat so children can	23%	
No coping strategies	8%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



83% At least some food 14% No food 3% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



80% At least some food15% Sleep hungry4% Don't know

% of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



78% At least some food18% No food4% Don't know



³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Nagero County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



53% Yes 46% No 1% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



28% Yes 69% No 3% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



10% No 5% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Market purchase	23%	
Own crop	21%	
Neighbours/relatives	3%	I
Borrowing	2%	1

Most commonly reported market access barriers, in the month prior to data collection⁴

High prices	26%	
No money	22%	
Too far	12%	
No market access harriers	7%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	4%	1
Cash for work	3%	1
Don't know	3%	1
No humanitarian aid	87%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	28%	
No, not needed	40%	
No, already done	12%	
No, needed but not possible	16%	
Don't know	3%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	29%	
No, not needed	35%	
No, already done	5%	
No, needed but not possible	27 %	
Don't know	3%	1

Yes	20%	
No, not needed	20%	
No, already done	0%	
No, needed but not possible	40%	
Don't know	20%	

⁶ Because of a lack of food, or money to buy food.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Nagero County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	40%	
No, not needed	20%	
No, already exhausted	0%	
No, needed but not possible	40%	

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	49%	
No, not needed	23%	
No, already done	10%	
No, needed but not possible	12%	
Don't know	6 %	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	57 %	
No, not needed	29%	
No, already done	2%	1
No, needed but not possible	6%	
Don't know	4%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



26% Yes⁷

% of households with malnourished children, as reported by \mbox{KIs}^{8}



04% No 6% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



4% No
% Don't know

Estimated time to access nearest functioning Most commonly report health facility by walking according to KIs, by % of healthcare in the six methods



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	40%	
Too far	13%	
Discrimination	1%	1
No barriers	44%	

Borrow money	37%	
Sold assets	23%	
Go to further facility	20%	
No coping strategies used	17%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Nagero County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



70% Improved⁹
30% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	7%	
15 - 29 minutes	21%	
30 - 59 minutes	21%	
1 hour - 2 hours	38%	
2 hours - 3 hours	13%	

Most commonly reported barriers to accessing water⁴

Water points are too far	68%	
Water points are broken	8%	
Bad taste	7%	
Long waiting time	4%	
No water access barriers	17%	

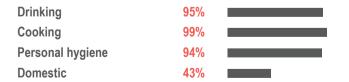
% of households with access to a functional latrine, as reported by KIs



69% Yes 31% No 0% Don't know % of households with access to soap, as reported by KIs



% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	67%	
Reducing use of water for cleaning	63%	
Reducing use of water for cleaning	13%	
Using a less preferred water source	4%	1
No coping strategies used	10%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Nzara County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection





Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Issues with materials	5%	
Didn't plant	3%	

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	99%	
Petty trade	49%	
Livestock	29%	
Selling crops	25%	
Casual labour	20%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Natural disaster	61%	
Lack of materials	15%	
Insecurity	13%	
Pests	9%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	48%	
Limiting meal sizes	34%	
Don't know	3%	I
No coping strategies	23%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



95% At least some food 4% No food 1% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



95% At least some food 4% Sleep hungry 1% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



96% At least some food

1% No food

% Don't know





³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.



Area of Knowledge-Neighbourhoods: Nzara County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



64% Yes 33% No 3% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



48% Yes 48% No 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



13% No 4% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴

High prices	35%	
Too far	19%	
No money	16%	
No market access barriers	21%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Non-food items	4%	
Cash	1%	-
Food	1%	-1
No humanitarian aid	94%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	10%	
No, not needed	85%	
No, already done	2%	1
No, needed but not possible	1%	1
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	1%	1
No, not needed	90%	
No, already done	4%	1
No, needed but not possible	5%	

Yes	7%	
No, not needed	87%	
No, already done	3%	I
No, needed but not possible	3%	I

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Nzara County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	0%	
No, not needed	85%	
No, already exhausted	3%	1
No, needed but not possible	9%	
Don't know	3%	I

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	16%	
No, not needed	78%	
No, already done	1%	1
No, needed but not possible	5%	

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	86%	
No, already done	1%	I
No, needed but not possible	1%	I

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



8% Yes⁴ 92% No % of households with malnourished children, as reported by \mbox{KIs}^{8}



9% No 1% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	18%	
Costs	16%	
Too far	15%	
No barriers	40%	

Go to further facility	33%	
Borrow money	30%	
Delay treatment	17%	
No coping strategies used	27%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Nzara County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



57% Improved⁹
43% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	15%	
15 - 29 minutes	22%	
30 - 59 minutes	20%	
1 hour - 2 hours	38%	
2 hours - 3 hours	5%	

Most commonly reported barriers to accessing water⁴

Water points are too far	47%	
Bad taste	7 %	
Water points are broken	4%	
Containers are insufficient	2%	I
No water access barriers	43%	

% of households with access to a functional latrine, as reported by KIs



98% Yes
2% No
1% Don't know

% of households with access to soap, as reported by KIs



42% Yes 56% No 2% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	100%	
Personal hygiene	100%	
Domestic	29%	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	47%	
Reducing use of water for cleaning	40%	
Reducing use of water for cleaning	14%	
Using a less preferred water source	5%	
No coping strategies used	44%	

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⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water



Area of Knowledge-Neighbourhoods³: Tambura County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	11%	
Crops destroyed	7%	
Didn't plant	5%	
Other	2%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	88%	
Petty trade	45%	
Livestock	36%	
Casual labour	27%	
Selling crops	20%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	39%	
Insecurity	30%	
Natural disaster	16%	
Crop disease	14%	

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Limiting meal sizes	40%	
Reducing meals	40%	
Skipping days	17%	
No coping strategies	25%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



99% At least some food 1% No food 0% Don't know % of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



91% At least some food 6% Sleep hungry 3% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



90% At least some food 10% No food 0% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Tambura County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



78% Yes 22% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



59% Yes 39% No 2% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



6% Yes 93% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴

Own crop	64%	
Market purchase	13%	
Food assistance	1%	I
Borrowing	0%	

Most commonly reported market access barriers, in the month prior to data collection⁴

High prices	22%	
No money	14%	
Bad roads	4%	1
No market access harriers	40%	

% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

Food	5%	
Non-food items	4%	1
Cash for work	2%	1
No humanitarian aid	93%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	19%	
No, not needed	77%	
No, already done	2%	I
No, needed but not possible	0%	
Don't know	1%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	18%	
No, not needed	76%	
No, already done	4%	1
No, needed but not possible	2%	1

Yes	33%	
No, not needed	66%	

⁶ Because of a lack of food, or money to buy food.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Tambura County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶



% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	24%	
No, not needed	74%	
No, already done	0%	
No, needed but not possible	2%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	14%	
No, not needed	85%	

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



12% Yes⁷ 88% No

% of households with malnourished children, as reported by \mbox{Kls}^{8}



9% No 1% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	12%	-
Right documents are not available	3%	1
Costs	1%	1
No barriers	83%	

Go to further facility	21%	
Borrow money	11%	
Delay treatment	8%	
No coping strategies used	68%	

⁷ Households accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

8 Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.



Area of Knowledge-Neighbourhoods: Tambura County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



100% Improved⁹
0% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	7%	
15 - 29 minutes	11%	
30 - 59 minutes	32 %	
1 hour - 2 hours	51 %	

Most commonly reported barriers to accessing water⁴

Water points are too far	53%	
Bad taste	12%	
Containers are insufficient	7%	
Long waiting time	3%	1
No water access barriers	30%	

% of households with access to a functional latrine, as reported by KIs

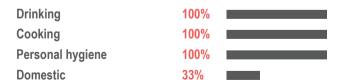


94% Yes 6% No 0% Don't know % of households with access to soap, as reported by KIs



39% Yes 61% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴



Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	56%	
Reducing use of water for cleaning	52 %	
Reducing use of water for cleaning	13%	
Using a less preferred water source	5%	
No coping strategies used	40%	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.



Area of Knowledge-Neighbourhoods³: Yambio County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households reported by KIs with adequate access to food, in the month prior to data collection



83%	Yes
17%	No
00/	Don't kno

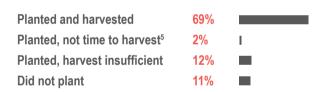
Most commonly reported barriers to adequate levels of food access, in the month prior to data collection⁴

Couldn't harvest	4%	
No food distribution	4%	
Didn't plant	3%	1
Crops destroyed	1%	1

Most commonly reported sources of livelihoods, in the month prior to data collection⁴

Consuming crops	90%	
Casual labour	44%	
Petty trade	43%	
Livestock	40%	
Retail trade	21%	

% of households reported by KIs as having planted or harvested in 2020



Most commonly reported barriers to engaging in agriculture, in the month prior to data collection⁴

Lack of materials	62 %	
Crop disease	36%	
New arrival	3%	I

Most commonly reported strategies used to cope with a lack of food, in the month prior to data collection⁴

Reducing meals	63%	
Limiting meal sizes	26%	
Skipping days	7%	
No coping strategies	25%	

% of households that had no food at all in the house in the week prior to data collection, as reported by KIs



94% At least some food5% No food1% Don't know

% of households where one or more person(s) went to sleep hungry in the week prior to data collection, as reported by KIs



96% At least some food 4% Sleep hungry 0% Don't know % of households where one or more person(s) went all day and night without food in the week prior to data collection, as reported by KIs



97% At least some food 3% No food

% Don't know

⁵ Households planted but, at the time of the survey (August), the harvest season had not started yet.







³Area of Knowledge - Neighbourhoods.

⁴Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.



Area of Knowledge-Neighbourhoods: Yambio County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that consumed cereals at least once in the week prior to data collection, as reported by KIs



90% Yes 10% No 0% Don't know % of households that consumed meat or fish at least once in the week prior to data collection, as reported by KIs



60% Yes 36% No 4% Don't know % of households that consumed dairy/milk at least once in the week prior to data collection, as reported by KIs



16% Yes 83% No 1% Don't know

Most commonly reported source of cereals, in the month prior to data collection⁴



Most commonly reported market access barriers, in the month prior to data collection⁴



% of households with access to humanitarian aid in the three months prior to data collection, by type, as reported by Kls⁴

No humanitarian aid	99%	

% of households that had to beg for food in the month prior to data colletion, as reported by KIs⁶

Yes	11%	-
No, not needed	84%	
No, already done	0%	
No, needed but not possible	4%	1

% of households that sent household members to eat with another household in the month prior to data collection, as reported by KIs⁶

Yes	7%	
No, not needed	89%	
No, already done	1%	1
No, needed but not possible	1%	1
Don't know	2%	1

Yes	18%	
No, not needed	77%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	3%	1





⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected

⁶ Because of a lack of food, or money to buy food



Area of Knowledge-Neighbourhoods: Yambio County

Western Equatoria State, South Sudan

FOOD SECURITY AND LIVELIHOODS

% of households that sold or slaughtered their last cow and/or goat in the month prior to data colletion, as reported by KIs⁶

Yes	4%	1
No, not needed	91%	
No, already exhausted	1%	1
No, needed but not possible	0%	
Don't know	3%	I

% of households that gathered more wild food than usual in the month prior to data collection, as reported by KIs⁶

Yes	10%	
No, not needed	89%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	1%	1

% of households that sold or ate their green harvest before it was ready in the month prior to data collection, as reported by KIs⁶

Yes	14%	
No, not needed	85%	
No, already done	0%	
No, needed but not possible	0%	
Don't know	1%	1

NUTRITION & HEALTH

% of households with access to nutrition services in the three months prior to data collection, as reported by KIs



25% Yes 75% No

% of households with malnourished children, as reported by \mbox{KIs}^{8}



7% No 3% Yes % of households with access to healthcare when needed in the six months prior to data collection, as reported by KIs



Estimated time to access nearest functioning health facility by walking according to KIs, by % of households



Most commonly reported barriers to accessing healthcare in the six months prior to data collection⁴

No staff/medicine	8%	
Too far	7%	
Costs	1%	1
No barriers	84%	

Go to further facility	14%	
Borrow money	10%	
Delay treatment	6%	
No coping strategies used	76%	



⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁶Because of a lack of food, or money to buy food.

Thouseholds accessing at least one nutrition service. Nutrition services include: BP500, plumpy nut, plumpy sup, treated overnight at hospital, CSB++ supercereal for pregnant/breastfeeding women, child screened for malnutrition, vitamin A or deworming, nutrition counselling.

⁸ Children who show three or more of the following signs of malnutrition: accessing a feeding programme, often sick, old face, sick now, sunken eyes, swollen belly, swollen feet, thin body, thin hair.



Area of Knowledge-Neighbourhoods: Yambio County

Western Equatoria State, South Sudan

WASH

% of households with access to an improved water source, as reported by KIs



82% Improved⁹
18% Unimproved¹⁰

Time required to access the primary water source by walking according to KIs, by % of households

Less than 15 minutes	14%	
15 - 29 minutes	27%	
30 - 59 minutes	23%	
1 hour - 2 hours	34%	
2 hours - 3 hours	2%	I

Most commonly reported barriers to accessing water⁴

Water points are too far	33%	
Water points are broken	14%	
Containers are insufficient	12%	
Bad taste	10%	
No water access harriers	50%	ı

% of households with access to a functional latrine, as reported by KIs



95% Yes 5% No 0% Don't know % of households with access to soap, as reported by KIs



58% Yes 42% No 0% Don't know

% of households reported by KIs to have a sufficient quantity of water for each need⁴

Drinking	100%	
Cooking	100%	
Personal hygiene	99%	
Domestic	62 %	

Most commonly reported strategies used to cope with a lack of water⁴

Reducing use of water for bathing	40%	
Reducing use of water for cleaning	37%	
Reducing use of water for cleaning	18%	
Using a less preferred water source	8%	
No coping strategies used	54 %	

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¹⁰ Unimproved water sources: river, swamp, pond, open well, rain water







⁴ Top results presented by % of households. Percentages may exceed 100% as all options that applied could be selected.

⁹ Improved water sources: borehole, tap stand, water yard.

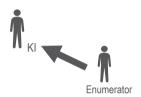
AoK-N METHODOLOGY

This annex provides further information on the methodology used for the Area of Knowledge - Neighbourhoods.

1. Purposively Sampling Kls

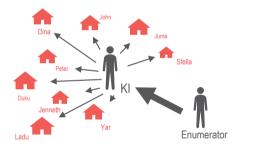
REACH enumerators interview key informants (KIs) via one of three approaches:

- Interviews with IDPs or other individuals moving through key transit points like bus stops and ports, or travelling to 3rd locations to access markets or other services, all reporting remotely on hard to reach settlements
- Interviews with host community members, reporting directly on an accessible settlement
- Phone interviews for areas with mobile phone coverage, with KIs reporting remotely on their settlement



2. Neighbour Listing

Each KI is asked to list up to 10 households; their own household, and up to the 9 geographically closest neighbours in their community.



3. Key Informant Interview

The KI is asked a multi-sectoral questionnaire about the needs and conditions of their own household, as well as for each of their neighbouring households.

For example: "Have any of these households been displaced due to flooding in the last month?"

