Assessment of Hard-to-Reach Areas in South Sudan

South Sudan Displacement Crisis

January 2019

Overview

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

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

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

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

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

(Link to AoK Terms of Reference)

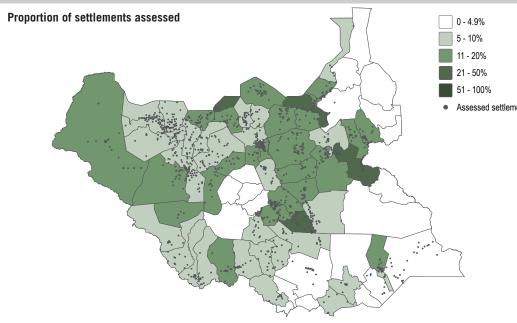
All percentages presented in this factsheet, unless otherwise specified, represent the proportion of settlements assessed with that specific response.

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

Assessment Coverage

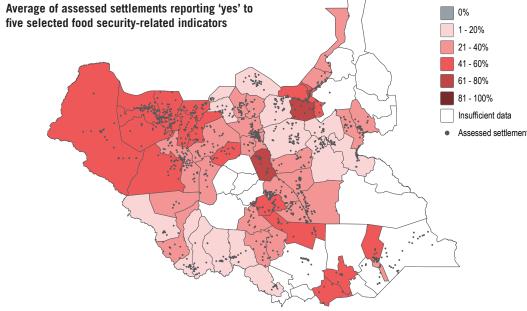
- 1,820 Key Informants interviewed
- 1.422 Settlements assessed
 - 61 Counties assessed
 - 57 Counties with 5% or more coverage¹

Assessment coverage



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

Food access composite indicator



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

- Inadequate access to food
- Consuming one or fewer meals per day
- Skipping days to cope with a lack of food or money to buy food
- Perceived hunger from inadequate food access: severe or worst it can be
- Wild foods known to be making people sick consumed all the time







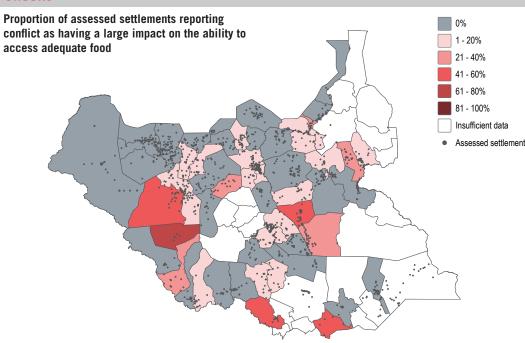


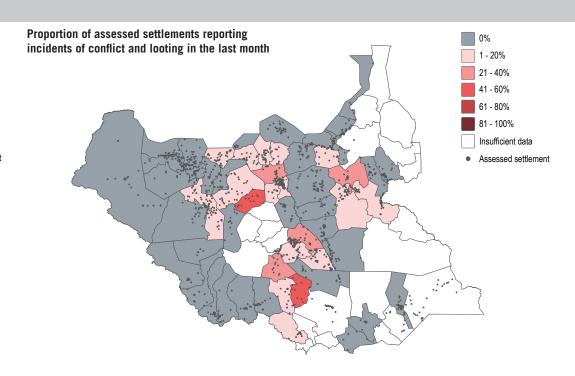
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Shocks: IDPs

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

Magwi	71%
Gogrial West	57%
Guit	50%
Tonj East	42%
Panyijiar	40%

Shocks: health

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

Gogrial West	89%
Pariang	88%
Rubkona	83%
Abiemnhom	67%
Nagero	67%

Shocks: cereal prices

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

Gogrial West	86%
Nagero	67%
Torit	62%
Terekeka	60%
Magwi	57%

Shocks: livestock

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

Fashoda	77%
Panyijiar	40%
Aweil South	35%
Ayod	33%
Manyo	33%





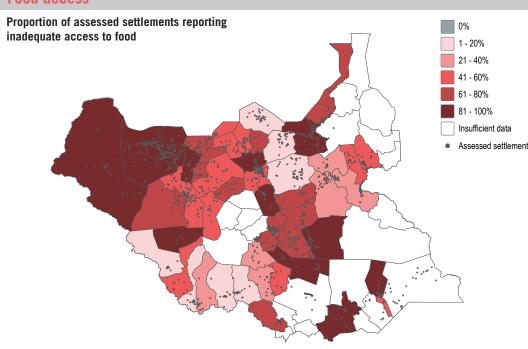


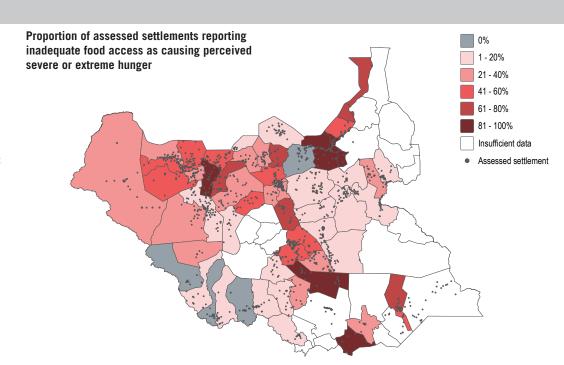
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Wild foods: nutrition Food coping: skipping days Wild foods: frequency **Meal frequency** Top five assessed counties reporting consumption Top five assessed counties reporting consumption Top five assessed counties reporting consuming Top five assessed counties reporting entire days of wild foods all of the time of wild foods that are known to make people sick on average one meal per day or less without eating as a coping strategy Panyijiar Kapoeta North 75% Panyikang 73% 100% Tonj East Mundri West Gogrial West Aweil East Raja Yei 64% Twic Aweil South 60% Mvolo Mvolo Ulang Raja Ulang Yirol West Aweil Centre Wau Aweil Centre





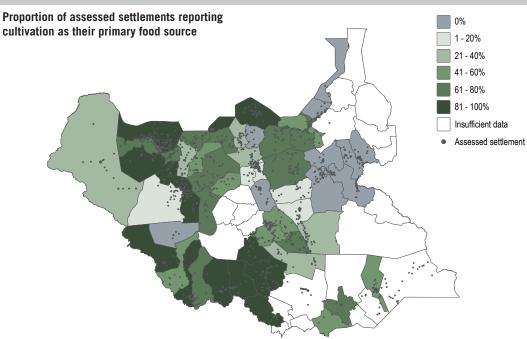


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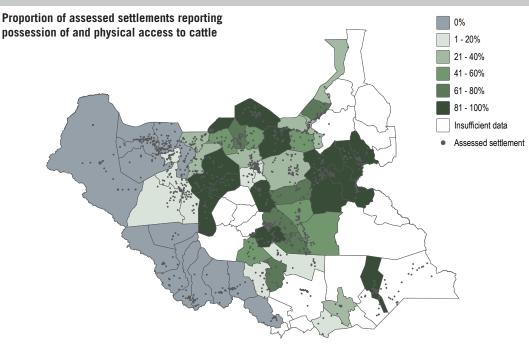
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Livelihoods: cultivation



Livelihoods: livestock



Land for cultivation Livestock disease **Agricultural inputs Food source: livestock** Top five counties reporting inadequate access to Top five counties reporting access restrictions to Top five counties reporting livestock as their Top five counties reporting a livestock disease land for cultivation agricultural inputs primary food source outbreak Aweil Centre 100% 35% 100% Akobo Terekeka Ezo Aweil Fast 100% 29% Mvolo Nyirol Nyirol Aweil South 100% 93% 22% 100% Uror Ulang Nzara 100% Kapoeta North 19% Kapoeta South Tambura Panyikang 100% Luakpiny/Nasir 17% Mundri East Magwi Malakal



inputs include: Mundri East

Another assessed county reporting 100% inadequate access to agricultural



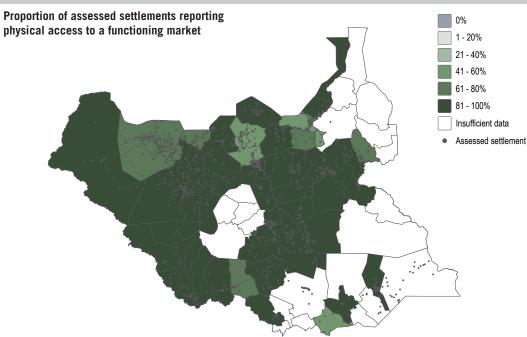


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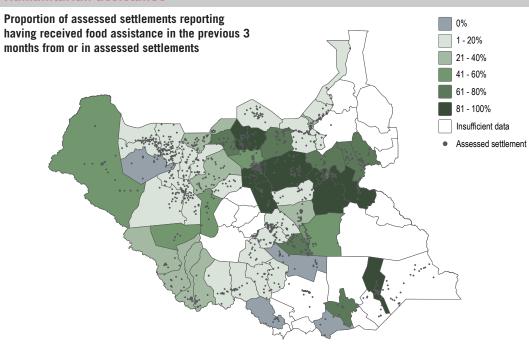
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Humanitarian assistance



Food source: purchasing

Top five assessed counties reporting purchase as primary food source

Fashoda	96%
Manyo	83%
Wau	57%
Nagero	50%
Raja	50%

Livelihood: casual labour

Top five assessed counties reporting casual labour as a livelihood activity

Abiemnhom	100%
Ezo	100%
Mvolo	100%
Nagero	100%
Tambura	100%
*Other assessed counties reporting include: Tonj East, Tonj South, Ye	ng 100% casual labour as a livelihood activity

Food source: humanitarian

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

Guit	100%
Mayendit	89%
Leer	82%
Uror	70%
Rubkona	58%

Humanitarian distribution

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

Aweil Centre	100%
Magwi	100%
Terekeka	100%
Yei	100%
Aweil East	98%



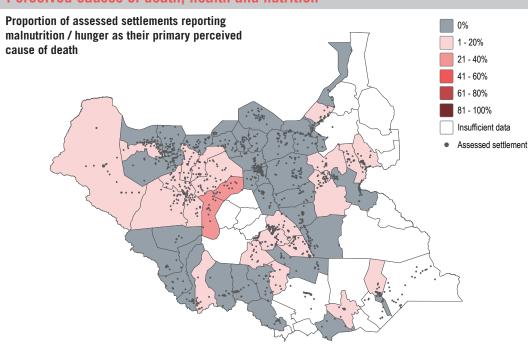


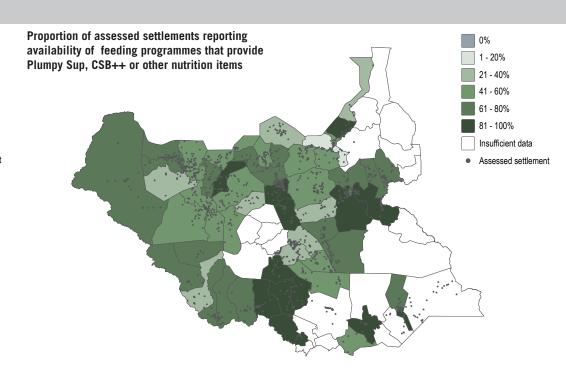
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Martality ingresses Health, malnutrition		Hoolth, choloro		Health convices			
Mortality increase Health: malnutrition		Health: Cholera	Health: cholera		Health services		
Top five assessed counties reporting a higher perceived number of deaths than normal in the last month Top five assessed counties reporting perceived hunger / malnutrition as main health problem		Top five assessed counties reporting cholera / diarrhoea as their main health problem		Top five assessed counties reporting no physical access to health services			
Ulang	87%	Tonj East	33%	Gogrial West	57%	Panyikang	65%
Mvolo	70%	Tonj South	25%	Mayom	35%	Canal/Pigi	62%
Ibba	69%	Ulang	17%	Guit	33%	Aweil Centre	58%
Mundri West	69%	Manyo	17%	Twic	32%	Aweil East	54%
Gogrial West	68%	Yirol West	16%	Torit	31%	Malakal	38%





