Assessment of Hard-to-Reach Areas in South Sudan

South Sudan Displacement Crisis

July 2018

Overview

The continuation of conflict since December 2013 has created a complex humanitarian crisis in the country, restricting humanitarian access and hindering the flow of information required by aid partners to deliver humanitarian assistance to populations in need. To address information gaps facing the humanitarian response in South Sudan, REACH employs its Area of Knowledge (AoK) methodology to collect relevant information in 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 presented at the settlement level is the modal (most frequent) response for KIs reporting on that settlement. If there is an even number of 'yes/no' responses, data is aggregated as 'no consensus'.

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 July 2018, and are not statistically generalisable.

Assessment Coverage

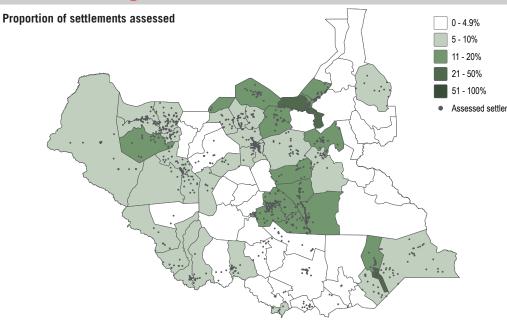
1,355 Key Informants interviewed

1,072 Settlements assessed

55 Counties assessed

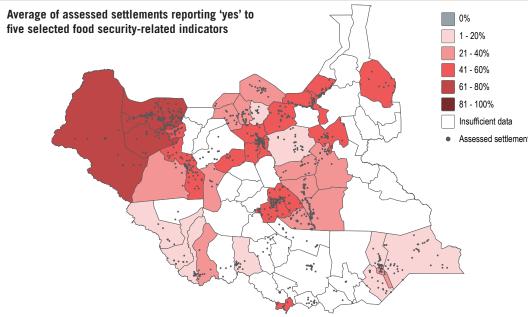
42 Counties with 5% or more coverage¹

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





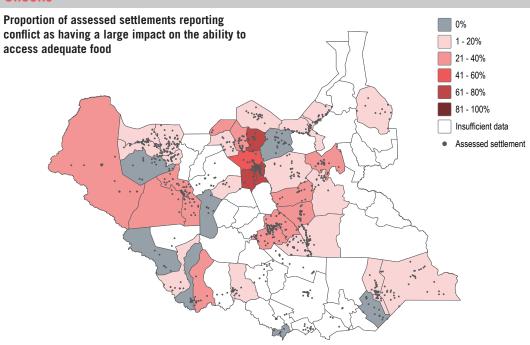


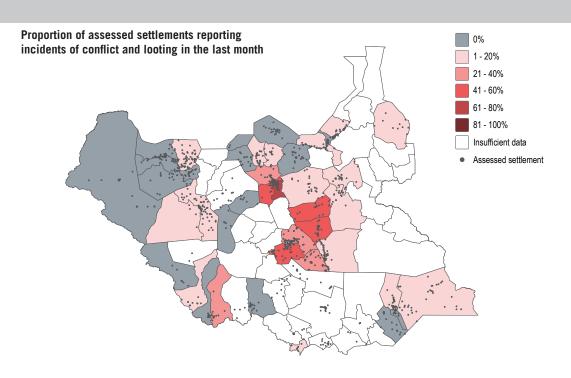
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Shocks





Shocks: IDPs

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

Morobo	63%
Mayendit	56%
Koch	50%
Aweil South	33%
Tambura	33%

Shocks: health

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

Guit	100%
Mayendit	88%
Leer	76%
Yambio	75%
Mayom	73%

Shocks: cereal prices

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

Morobo	88%
Uror	88%
Aweil North	68%
Abiemnhom	67%
Mayom	67%

Shocks: livestock

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

Kajo-keji	56%
Rubkona	44%
Aweil West	35%
Bor South	33%
Yirol West	33%





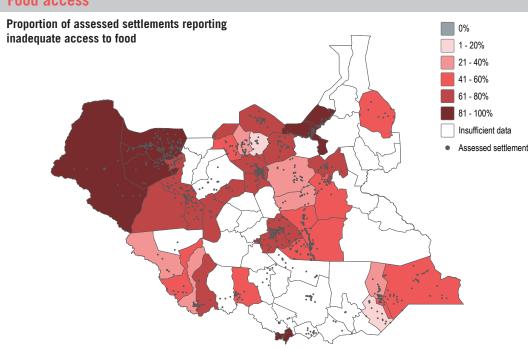


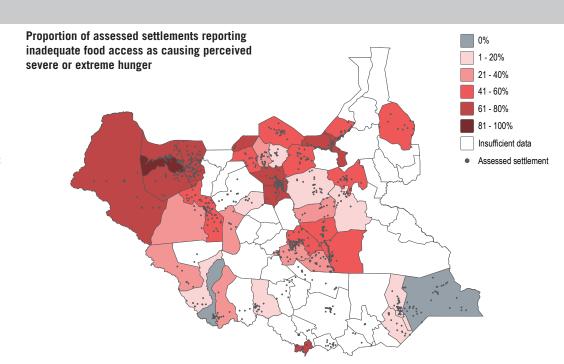
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Food access





Wild foods: nutrition Food coping: skipping days Wild foods: frequency **Meal frequency** Top five assessed counties reporting consumption Top five assessed counties reporting consumption Top five assessed counties reporting consuming Top five assessed counties reporting entire days of wild foods 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 84% Guit 100% 83% Pariang Morobo Tonj East Guit 75% Aweil North Raja Raja 72% Aweil East 78% Maban 50% Leer Panyikang Aweil Centre Aweil North Aweil Centre Mayendit Maban Yirol East Morobo Aweil West



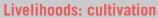


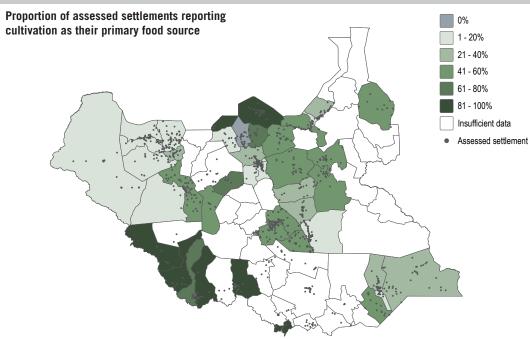


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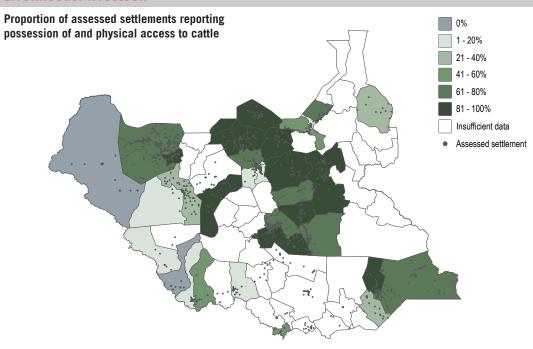
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Livelihoods: livestock



Agricultural inputs Land for cultivation		Food source: livestock		Livestock disease			
		Top five counties reporting land for cultivation	ting access restrictions to Top five counties rep primary food source		g livestock as their	Top five counties reporting a livestock disease outbreak	
Aweil North	100%	Maban	50%	Kapoeta North	30%	Yirol West	89%
Aweil West	100%	Bor South	43%	Mayom	27%	Tonj South	83%
Morobo	100%	Wau	35%	Yirol East	20%	Awerial	83%
Aweil East	98%	Yambio	33%	Aweil North	20%	Mayom	80%
Aweil Centre	96%	Kapoeta South	31%	Kapoeta South	19%	Aweil North	72%



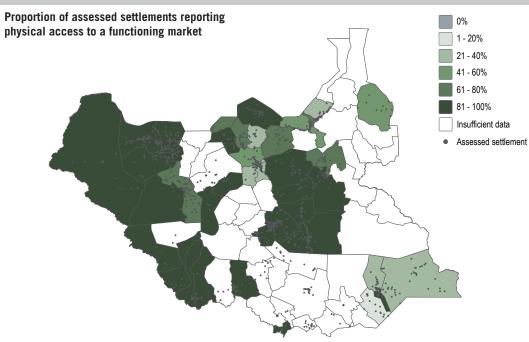




LIVEIINOODS (FSL) South Sudan Displacement Crisis

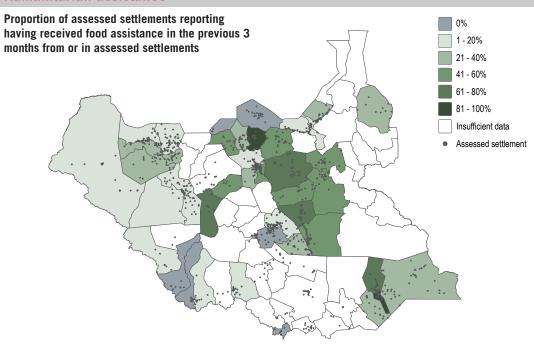
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Humanitarian assistance



Food source: purcl	ce: purchasing Livelihood: casual labour		Food source: humanitarian		Humanitarian distribution		
		Top five assessed count as a livelihood activity	ies reporting casual labour	Top five assessed counties reporting humanitarian assistance as primary food source in assessed settlements		Top five assessed counties reporting no humanitarian assistance received in the past 3 months	
Wau	71%	Raja	100%	Leer	56%	Abiemnhom	100%
Kapoeta South	63%	Tonj East	100%	Ayod	54%	Ezo	100%
Aweil West	61%	Tonj South	100%	Uror	50%	Morobo	100%
Malakal	50%	Wau	94%	Mayom	47%	Nzara	100%
Aweil North	44%	Maridi	90%	Nyirol	43%	Pariang	100%





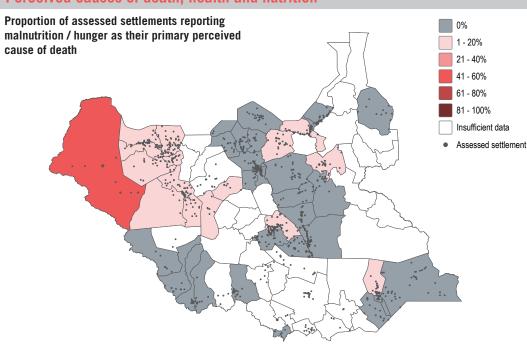


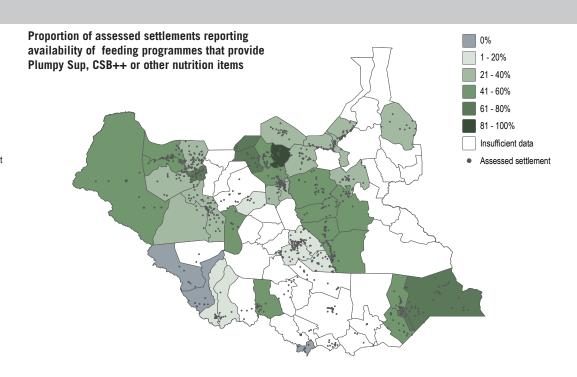
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Perceived causes of death, health and nutrition





Mortality increase	ortality increase Health: malnutrition		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	
Leer	56%	Raja	37%	Mayom	40%	Morobo	75%
Yambio	50%	Tonj South	17%	Tonj East	33%	Nyirol	70%
Yirol West	49%	Aweil Centre	16%	Maban	30%	Panyikang	68%
Awerial	37%	Nyirol	13%	Mayendit	28%	Fangak	67%
Yirol East	36%	Aweil West	9%	Ezo	20%	Malakal	67%





