Assessment of Hard-to-Reach Areas in South Sudan

**South Sudan Displacement Crisis** 

March 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 March 2019, and are not statistically generalisable.

#### **Assessment Coverage**

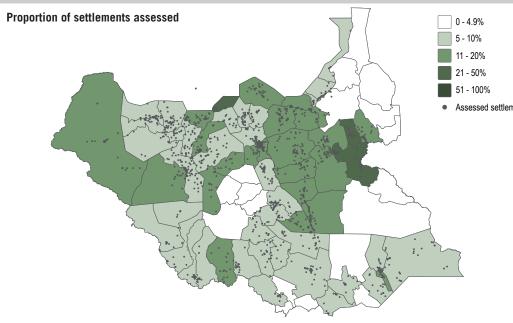
1,774 Key Informants interviewed

1,365 Settlements assessed

61 Counties assessed

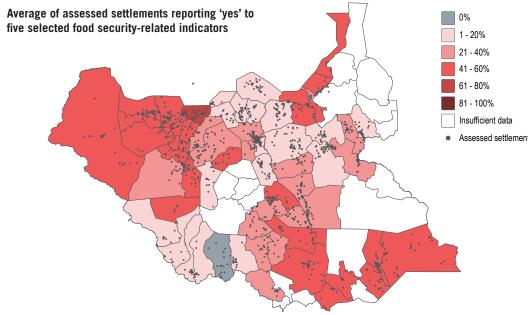
60 Counties with 5% or more coverage<sup>1</sup>

#### **Assessment coverage**



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

#### 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



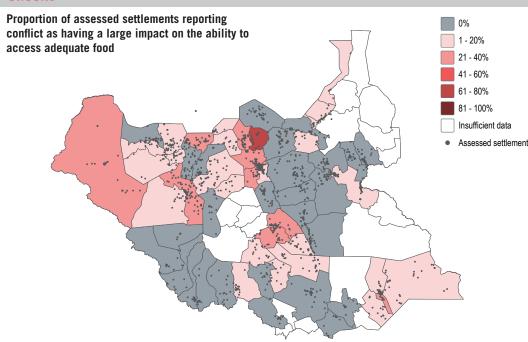


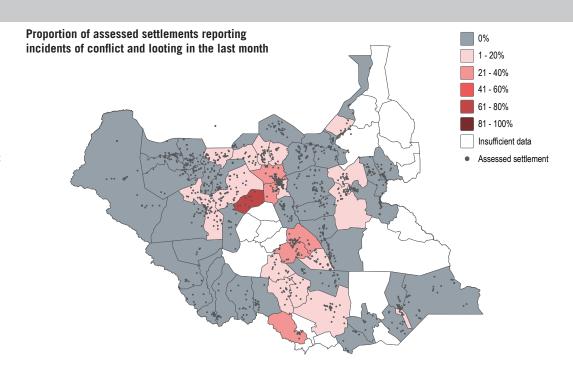


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#### **Shocks**





### **Shocks: IDPs**

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

Koch	37%
Terekeka	35%
Gogrial West	33%
Gogrial East	31%
Fashoda	28%

#### **Shocks: health**

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

Abiemnhom	100%
Pariang	80%
Rubkona	78%
Twic	69%
Gogrial West	67%

### **Shocks: cereal prices**

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

Nagero	100%
Torit	100%
Fashoda	94%
Magwi	82%
Twic	79%

#### **Shocks: livestock**

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

Ayod	64%
Fashoda	56%
Rubkona	52%
Aweil East	39%
Aweil South	38%





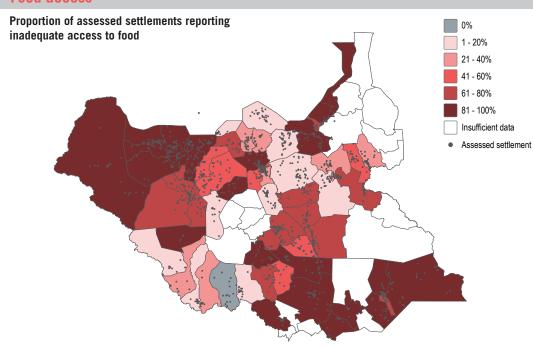


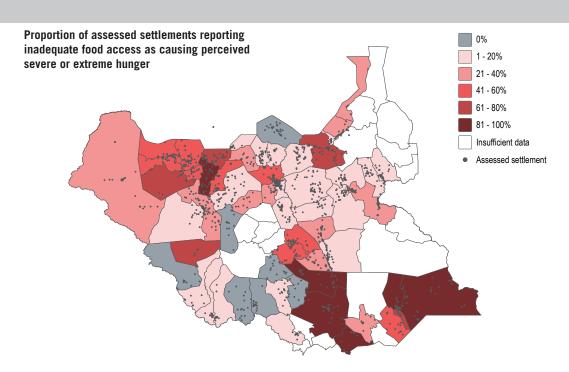
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#### **Food access**





#### 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 Aweil South Aweil Centre 100% 80% Tonj East Canal/Pigi 75% Aweil West Aweil West Mundri West Twic 75% Kapoeta North 100% Ibba Nagero Raja Tonj East 100% Akobo Mvolo Manyo Mundri East 64% Canal/Pigi Torit 100% Ulang





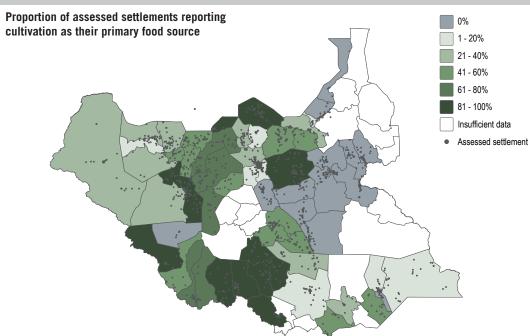


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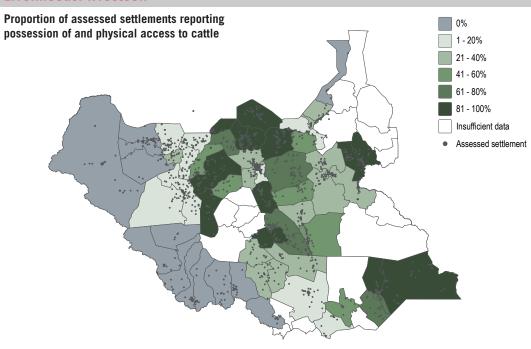
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#### **Livelihoods: cultivation**



#### Livelihoods: livestock



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Agricultural input	S .	Land for cultivatio	n	Food source: lives	Food source: livestock		Livestock disease	
Top five counties repor agricultural inputs	ting inadequate access to	Top five counties report land for cultivation	ing access restrictions to	Top five counties reporti primary food source	ng livestock as their	Top five counties reporting outbreak	ng a livestock disease	
Canal/Pigi	100%	Nyirol	100%	Kapoeta East	67%	Mundri West	94%	
Magwi	100%	Uror	100%	Manyo	40%	Mvolo	93%	
Juba	92%	Akobo	98%	Aweil North	35%	Yambio	93%	
Terekeka	91%	Yei	94%	Kapoeta South	29%	Tambura	92%	
Aweil North	90%	Wau	63%	Kapoeta North	27%	Yirol West	88%	



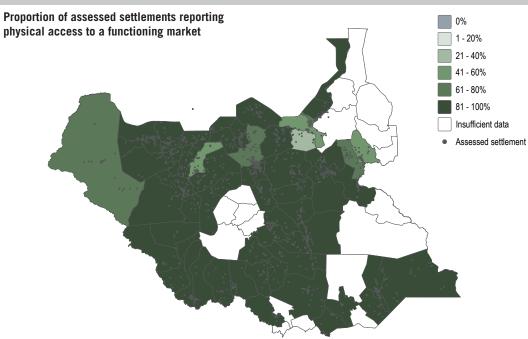


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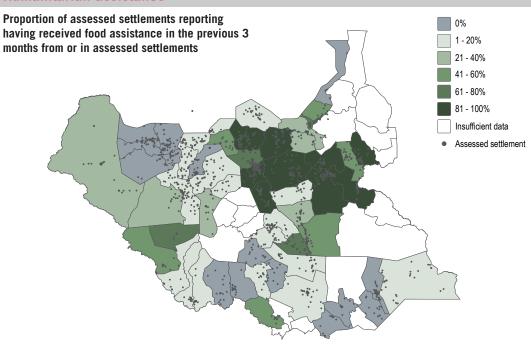
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#### **Markets**



#### **Humanitarian assistance**



#### Food source: purchasing

## Top five assessed counties reporting purchase as primary food source

Juba	84%
Kapoeta South	71%
Wau	67%
Torit	63%
Manyo	60%

#### Livelihood: casual labour

## Top five assessed counties reporting casual labour as a livelihood activity

Ezo	100%
Nzara	100%
Tonj East	100%
Tonj North	100%
Tonj South	100%

#### Food source: humanitarian

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

Panyijiar	94%
Guit	83%
Uror	83%
Nyirol	76%
Rubkona	74%

#### **Humanitarian distribution**

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

Aweil Centre	100%
Aweil East	100%
Aweil North	100%
Aweil South	100%
Aweil West	100%

\*Other assessed counties reporting 100% no humanitarian assistance received in the past 3 months include: Budi, Gogarial East, Ibba, Kapoeata North, Kaopeata South, Magwi, Mayo, Maridi, Mundri East, Mvolo, Torit





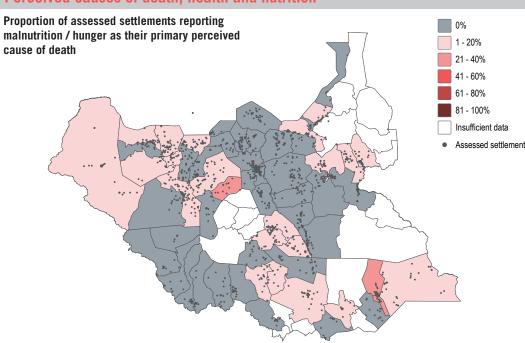


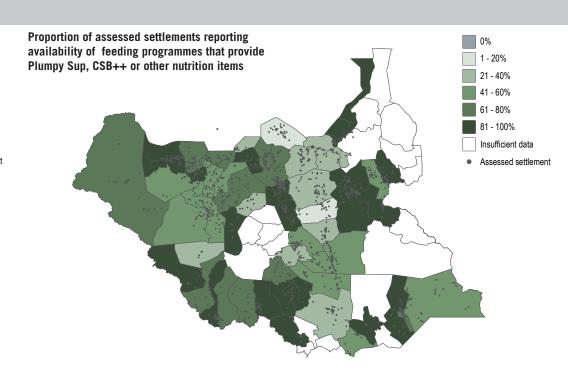
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#### Perceived causes of death, health and nutrition





Panyikang

#### **Health: malnutrition Mortality increase** Health: cholera **Health services** Top five assessed counties reporting a higher Top five assessed counties reporting perceived Top five assessed counties reporting cholera / Top five assessed counties reporting no physical perceived number of deaths than normal in the hunger / malnutrition as main health problem diarrhoea as their main health problem access to health services last month 70% 42% Gogrial West Kapoeta East **59%** Ulang Tonj East Mvolo 64% Tonj North 20% Mvolo Panyijiar Luakpiny/Nasir 15% 58% Yirol East Twic 40% Canal/Pigi 13% Mundri East Luakpiny/Nasir Torit Jur River



Twic

53%



Yirol West



Mvolo

36%

**12%**