

Violence in Fangak triggers deterioration of already severe humanitarian conditions

23 May 2025 | Fangak County | Jonglei State | South Sudan



Key Messages

- **Displaced communities in Fangak County are confined to remote, hard-to-reach areas, as flooding and insecurity prevent both return and onward movement.** Access to canoes, the main mode of transportation in the county, has further decreased with households' income sources lost and reported increased rental costs. Fear and anxiety among local populations reportedly remains high, with continued violence and multiple sightings of aircraft during the reporting period.
- **The influx of displaced people into remote areas has overwhelmed local capacities, exacerbating pre-existing shortages of food, water, and shelter.** With markets disrupted, income sources lost, and aid suspended, households primarily rely on wild foods like water lilies and fish – though access is limited by a lack of canoes, fishing gear and knowledge. Water, Sanitation, and Hygiene (WASH) conditions are extremely dire, with overcrowded boreholes and widespread open defecation. Access to shelter is extremely limited, with the vast majority of the population reportedly sleeping in the open.
- **Humanitarian operations remain severely constrained,** as insecurity and logistical barriers continue to make Fangak County largely inaccessible. This lack of humanitarian assistance, coupled with the current high severity of unmet needs and the onset of the rainy season in May, means a severe public health crisis is likely to unfold.

Context & Rationale

Since May 3, 2025, aerial bombardments have hit several locations in Fangak County, including the towns of Old Fangak and New Fangak. Key public and humanitarian infrastructure, including health facilities and markets, have been directly hit, severely affecting access to food, healthcare, and other essential services. The growing insecurity in Fangak County threatens the safety of local populations and risks triggering further humanitarian needs in an area already grappling with significant food insecurity, poor sanitation conditions and limited access to health services.

From May 13-19, 2025, REACH conducted a rapid and remote qualitative needs assessment covering Fangak County. The team conducted 12 Key Informant Interviews (KIIs) with humanitarian actors, local authorities and community members who were still in Fangak at the time of data collection.

Humanitarian conditions were already critically severe before the recent violence

Before May 2025, humanitarian needs in Fangak County were already extremely severe. The county had been grappling with **significant food insecurity, poor sanitation conditions and limited access to health services**. The latest Integrated Food Security Phase Classification (IPC) [analysis](#), conducted in October 2024, found that **more than half of the population in Fangak was acutely food insecure** (IPC Phase 3+), with 51,000 people experiencing emergency-level food insecurity (IPC Phase-4). In March 2024, a SMART survey conducted in Fangak County found a **Global Acute Malnutrition (GAM) prevalence of 16.8%** (95% Confidence Interval: 13.2–21.0%)¹. This corresponds to a Phase 4 (critical) acute malnutrition prevalence as per [IPC guidelines](#), with individual food consumption likely compromised and elevated or increasing mortality and morbidity levels. A recent Integrated Public Health Rapid Assessment (IPHRA)², conducted by REACH in February-March 2025, indicated a **medium to high severity of public health outcomes and their underlying drivers**. The area is highly vulnerable to disease outbreaks, with alarming levels of hunger, especially among the returnee population, who are reportedly facing large food consumption gaps. Contributing factors such as overcrowding, stagnant floodwaters, open defecation, and limited access to soap significantly elevate the risk of further public health emergencies.

Displaced communities in Fangak are confined to remote, hard-to-reach areas, as insecurity and flooding prevent both return and onward movement

Between May 3 and May 23, 2025, sustained aerial bombardments and armed clashes caused **widespread destruction and displacement** across Fangak County, South Sudan.

In **Old Fangak**, key infrastructure was severely damaged. A hospital run by Médecins Sans Frontières (MSF) was [hit](#), with its pharmacy completely destroyed. The main market was also devastated, with most shops reportedly destroyed, leading to closure of the market. Other parts of the town remain largely intact. In contrast, **New Fangak** was reportedly “completely burned to the ground” after a combination of aerial attacks and ground fighting, according to a humanitarian Key Informant (KI) whose organisation’s compound in New Fangak was destroyed.

Key informants reported that **large-scale displacement has occurred across the county**. From Old Fangak, most residents fled to the villages of Paguir and Toch – each about 10 km away by boat – or to swamp areas along the riverbanks between Old Fangak and these settlements. From New Fangak, people sought refuge in surrounding peripheries or swamp areas along the riverbank.

Movement in Fangak County has been heavily dependent on **access to boats**, primarily canoes, for several years, due to widespread flooding across the county. With few households owning a canoe, most rely on their financial capacity to hire boats. One community member KI explained not all households have sufficient financial capacity, especially now that boat rental prices have reportedly increased. As a result, some households resorted to makeshift rafts made from plastic sheets and local grasses. While the majority of households had reportedly fled the towns by May 19, KIs explained that some residents remained in Old Fangak due to a lack of access to transportation.

With multiple sightings of aircraft during the reporting period, **fear and anxiety among local populations remain high**,

according to a local authority KI still in Fangak in mid-May. Airstrikes on villages surrounding New Fangak – where many households had initially fled – further exacerbated levels of fear and anxiety. In response, communities attempted to avoid crowded areas. However, limited accessibility left few options, resulting in overcrowding, particularly in Paguir and Toch. These villages, surrounded by floodwater for extended periods, have become isolated, and the scarcity of canoes continues to hinder further movement.

The influx of displaced people into remote areas has overwhelmed local capacities, exacerbating pre-existing shortages of food, water, and shelter

Market functionality & food security

Market functionality has been severely impeded. While some traders managed to transport limited supplies, including food, from Old Fangak to Paguir and Toch, **prices have reportedly skyrocketed**, making goods unaffordable for most households. Furthermore, supplies are dwindling as **continued insecurity has cut off Fangak’s major supply route**: the river corridor from Juba and Malakal.

With market functionality severely impeded, income sources lost, and the delivery of humanitarian assistance severely hampered, **access to food is reportedly extremely limited** for displaced populations – many of whom previously relied on markets or humanitarian food assistance (HFA), according to several KIs. Food access for host community households has reportedly declined as well, as they are sharing their already limited resources with new arrivals.

According to KIs, populations are mainly relying on the **consumption of wild foods including water lilies and fish**. However, access to these is restricted – particularly among displaced populations – as many lacked canoes, fishing nets, or the know-how on how to access these food sources. As a result, coping strategies reportedly commonly practiced include skipping meals for several days and prioritising children’s consumption of the limited food available over that of adults.

Water, Sanitation and Hygiene (WASH)

WASH conditions are reportedly extremely dire. No public toilets exist in Paguir, Toch, or other displacement sites, leading to **widespread open defecation** and heightened risk of disease outbreaks. While some boreholes are functional in the villages of Paguir and Toch, several humanitarian KIs reported these are overcrowded due to the arrival of displaced populations. Outside these villages, displaced populations reportedly rely on river and swamp water.

Shelter

Access to shelter was extremely limited.

While KIs reported that a small number of displaced people have found refuge in relatives' homes, schools, or public buildings, the vast majority are reportedly sleeping in the open.

Health

While public health outcomes and their drivers were of medium to high severity in February and March 2025,³ the closure of the MSF-run hospital in Old Fangak and the destruction of its pharmacy have **drastically reduced access to healthcare**. This facility provided critical healthcare services for over 120,000 people annually.⁴ In line with findings from the March 2025 IPHRA, which found that the MSF-run hospital was the primary healthcare access point for the population of Old Fangak, several KIs stressed that this hospital was the only functional hospital in their area. According to a community member KI, supplies of essential medicines, including those for malaria and diarrhoea, have already run out at the time of reporting. With the onset of the rainy season in May, and the limited access to shelter, a severe public health crisis is likely to unfold.

With Fangak largely inaccessible due to insecurity, humanitarian operations in the county remain limited

Humanitarian service delivery in Fangak County has been almost fully suspended as a result of the ongoing and volatile security situation.

Local humanitarian staff were displaced along with the population from Old Fangak, where most organisations were based. A humanitarian KI explained that while the safety of staff remains paramount, local humanitarian staff who have been displaced alongside their communities are **trying to continue operations to the best of their abilities**. MSF, for example, have relocated their patients and supplies from Old Fangak to Toch, from where they have been resuming operations "from under a tree" according to a KI from another humanitarian organisation now in Toch.

Furthermore, partners jointly conducted a **spot-check assessment** on May 8, 2025,⁵ in areas around Old Fangak, including Paguir and Toch. The findings highlighted an urgent need for food assistance, critical non-food items such as plastic sheets, mosquito nets and cooking supplies, WASH interventions, health support, nutrition services and protection assistance.

Despite these efforts, **humanitarian service delivery remains severely disrupted**.

Distribution of HFA for the months of May and June has been temporarily suspended. With warehouses of several organisations in New Fangak either hit by airstrikes, looted, or rendered inaccessible due to security considerations, the resumption of humanitarian aid will prove challenging. Furthermore, resupplying stocks from Juba or Malakal is reportedly virtually impossible at the time of writing due to logistical challenges, with continued insecurity cutting off Fangak's major river supply routes.

These numerous logistical and security challenges have resulted in virtually no humanitarian assistance being delivered in Fangak County since the onset of violence in early May until the time of writing. Discussions around large-scale resumption of aid across the county are still ongoing.

Endnotes

- 1 Integrated Nutrition and Mortality SMART Survey, Fangak County, Jonglei State – July 2024. (On file with REACH).
- 2 Integrated Public Health Rapid Assessment in Old Fangak, Fangak County, Jonglei State. (On file with REACH).
- 3 Ibid.
- 4 Dakat, H., Worri, D. G., Mathot, M., & Kueth, N. (2025). Damages on Fangak hospital impact access to healthcare for surrounding communities. World Health Organization (WHO), 6.
- 5 Coordinated Assessments. (2025). Spot-check Assessment Report: Fangak County - Jonglei State. (On file with REACH)