Assessment of Hard-to-Reach Areas in South Sudan

South Sudan Displacement Crisis

July 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 July 2019, and are not statistically generalisable.

Assessment Coverage

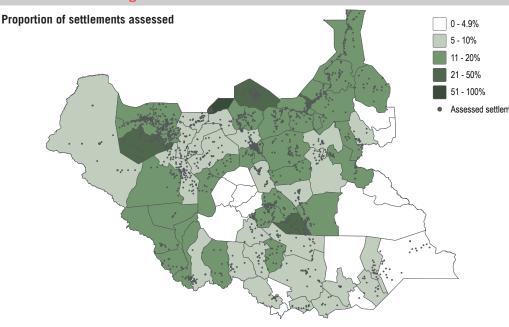
2,390 Key Informants interviewed

1.795 Settlements assessed

67 Counties assessed

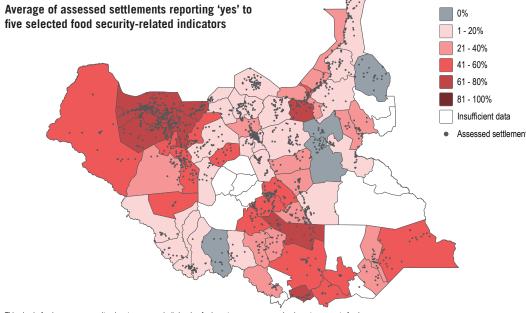
64 Counties with 5% or more coverage¹

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 severify 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



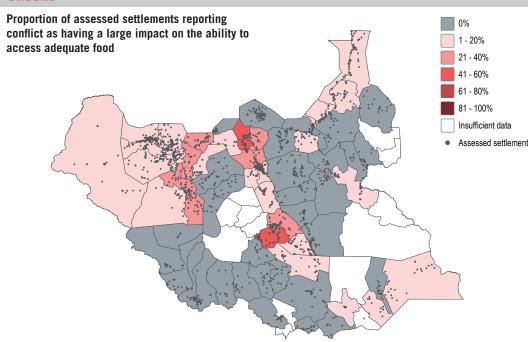


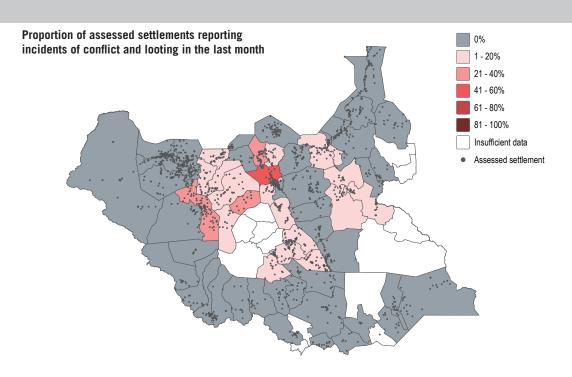
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Shocks





Shocks: IDPs

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

Twic	55%
Gogrial West	30%
Tonj East	30%
Nagero	29%
Torit	27%

Shocks: health

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

94%
92%
87%
57%
57%

Shocks: cereal prices

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

Abiemnhom	100%
Kapoeta North	100%
Pariang	98%
Torit	93%
Terekeka	92%

Shocks: hunger

Top five assessed counties reporting hunger is severe or the worst it can be

92%
74%
71%
71%
67%



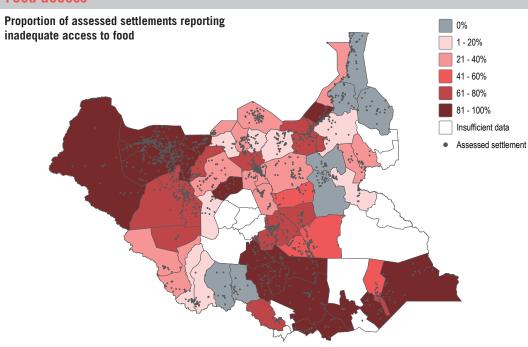


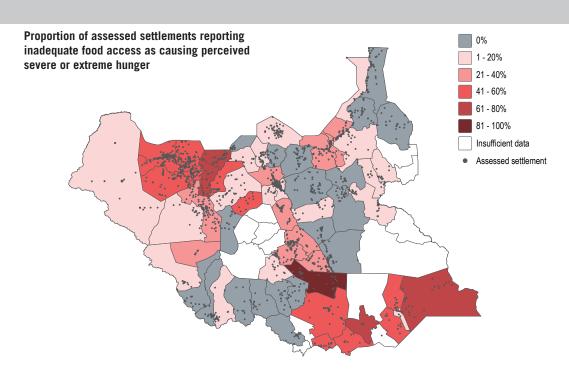
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Food access





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 Centre 100% **Gogrial West** 74% Yei Fangak Canal/Pigi Aweil North Twic Canal/Pigi Aweil West 72% Aweil South 100% Canal/Pigi Mvolo Tonj East Mundri East Aweil West 100% Jur River Aweil Centre Magwi Nagero Juba

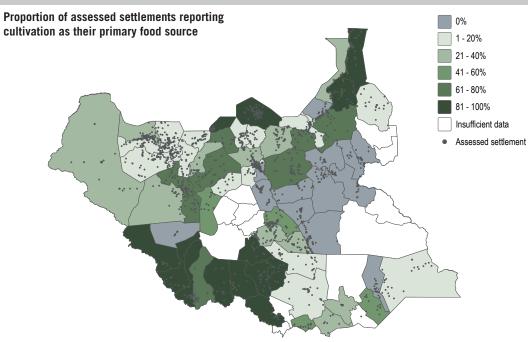


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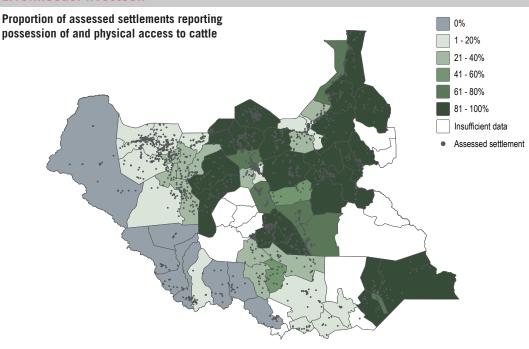
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Livelihoods: cultivation



Livelihoods: livestock



Agricultural inputs

Top five counties reporting inadequate access to agricultural inputs



Land for cultivation

Top five counties reporting access restrictions to land for cultivation

Maban	80%
Wau	48%
Manyo	46%
Juba	37%
Duk	33%

Food source: livestock

Top five counties reporting livestock as their primary food source

Maban	45%
Kapoeta North	33%
Akobo	30%
Aweil South	30%
Yirol East	25%

Livestock engagement

Top five counties reporting engagement in livestock activities

Abiemnhon	n	100%	
Ayod		100%	
Fangak		100%	
Kapoeta No	orth	100%	
Luakpiny/N	asir	100%	

*Other assessed counties reporting 100% engaged in livestock activities includes: Nyirol, Pariang, Tonj South, Ulang, Uror and Yirol West ".



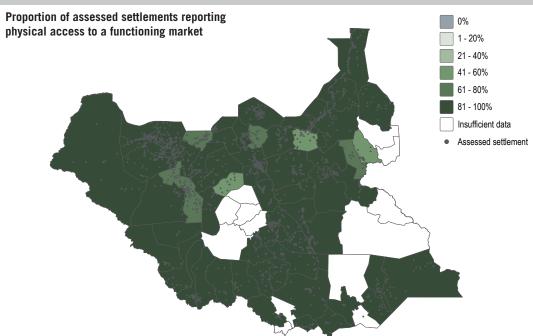


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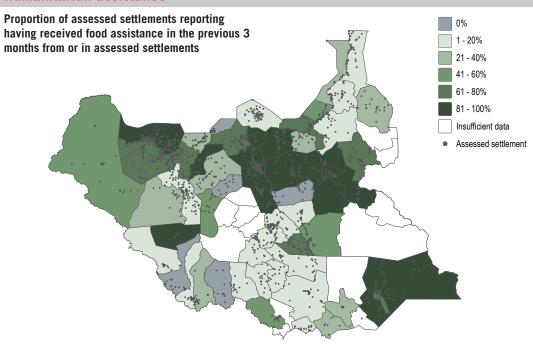
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Markets



Humanitarian assistance



Food source: pur	chasing	Livelihood: casual labour		Food source: humanitarian		Humanitarian distribution	
Top five assessed counties reporting purchase as primary food source Top five assessed counties reporting casual labour as a livelihood activity		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			
Juba	89%	Magwi	100%	Nyirol	100%	Duk	100%
Kapoeta South	67%	Raja	100%	Uror	100%	Ezo	100%
Torit	67%	Yei	100%	Nagero	86%	Ibba	100%
Wau	65%	Jur River	98%	Leer	85%	Yirol East	95%
Malakal	62%	Wau	98%	Guit	82%	Melut	95%

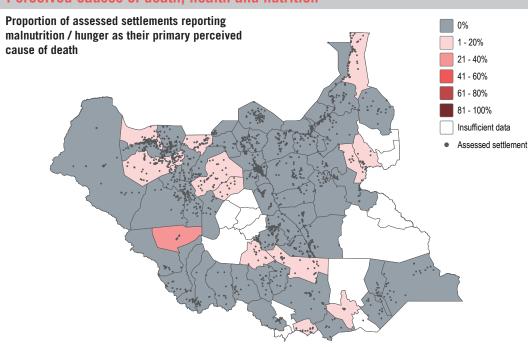


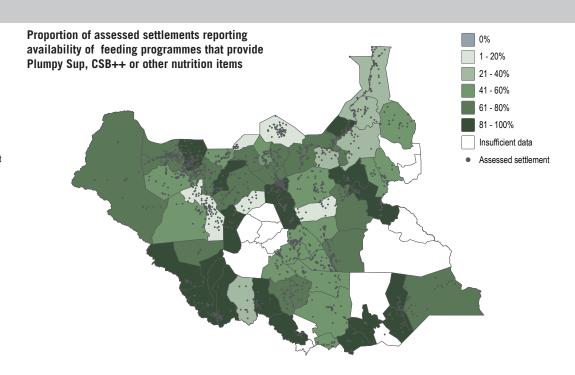
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Perceived causes of death, health and nutrition





Mortality increase Health: malnutrition Health: malaria	Health: malaria		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 malnutrition as main health problem their main health problem	Top five assessed counties reporting malaria as their main health problem		Top five assessed counties reporting no physical access to health services	
Gogrial West 48% Tonj East 30% Maban	95%	lbba	58%	
Tonj East 40% Ulang 23% Baliet	90%	Renk	58%	
Twic 38% Luakpiny/Nasir 17% Manyo	85%	Jur River	54%	
Luakpiny/Nasir 37% Aweil Centre 9% Panyijiar	79%	Juba	48%	
Mvolo 36% Jur River 8% Terekeka	77%	Canal/Pigi	48%	

