Assessment of Hard-to-Reach Areas in South Sudan

South Sudan Displacement Crisis

December 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 hardto-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 been in contact with someone living in a hard-to-reach settlement, or have been visiting one 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 December 2019, and are not statistically generalisable.

Assessment Coverage

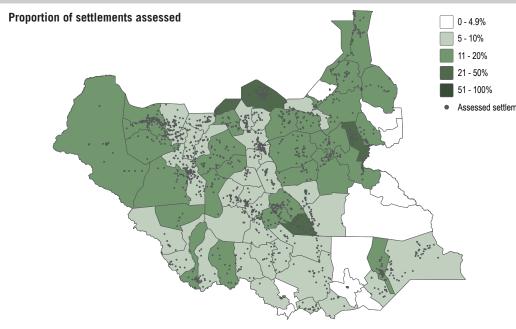
2,137 Key Informants interviewed

1.759 Settlements assessed

70 Counties assessed

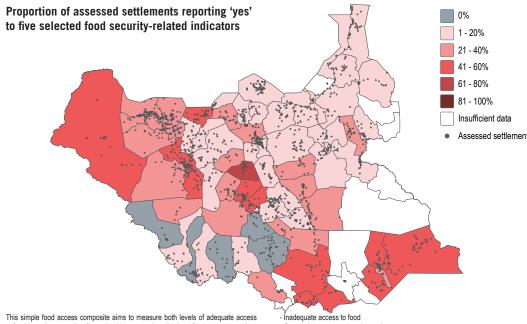
68 Counties with 5% or more coverage¹

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 March 2019 has been used as the reference for settlement names and locations

Food access composite indicator



to food as well as severity of perceived hunger and application of severe consumptionbased coping strategies. The composite was created by averaging the 'yes' responses of settlements reporting on the following indicators, with all indicators considered to

- Consuming one or no 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



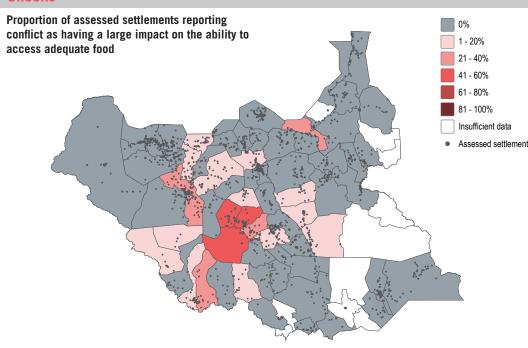


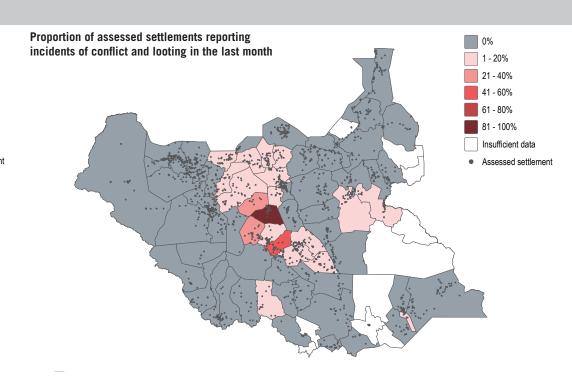
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Shocks





Shocks: IDPs

Top five counties where the highest proportion of assessed settlements reported the presence of newly arrived IDPs is having a large impact on the ability to access adequate food.

Kajo-keji	60%
Rumbek Centre	47%
Rumbek North	45%
Twic	40%
Nagero	33%

Shocks: health

Top five counties where the highest proportion of assessed settlements reported perceived health problems are having a large impact on the ability to access adequate food.

Magwi	75%
Rumbek North	73%
Twic	69%
Juba	63%
Kapoeta South	58%

Shocks: cereal prices

Top five counties where the highest proportion of assessed settlements reported an increase in cereal prices is having a large impact on the ability to access adequate food.

Terekeka	84%
Juba	75%
Twic	71%
Aweil Centre	63%
Aweil North	60%

Shocks: hunger

Top five counties where the highest proportion of assessed settlements reported hunger is severe or worst in can be.

Rumbek North	91%
Kajo-keji	87%
Magwi	75%
Twic	69%
Rumbek East	67%

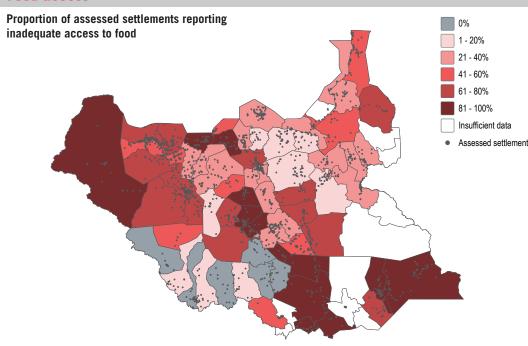


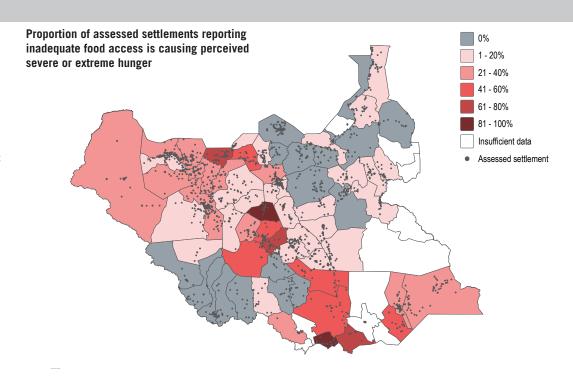
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Food access





Wild foods: frequency

Top five counties where the highest proportion of assessed settlements reported consumption of wild foods happens all the time.

Yei	46%
Juba	42%
Kapoeta South	42%
Rumbek North	36%
Kapoeta North	30%

Wild foods: nutrition

Top five counties where the highest proportion of assessed settlements reported consumption of wild foods that are known to make people sick.

Fangak	83%
Rumbek North	64%
Panyikang	63%
Panyijiar	59%
Tonj East	44%

Meal frequency

Top five counties where the highest proportion of assessed settlements reported that most people consume one meal per day or less.

Rumbek East	100%
Rumbek North	100%
Kapoeta North	95%
Kapoeta East	92%
Rumbek Centre	88%

Food coping: skipping days

Top five counties where the highest proportion of assessed settlements reported people go entire days without eating as a coping strategy.

Rumbek North	64%
Tonj East	56%
Ulang	39%
Twic	34%
Jur River	34%



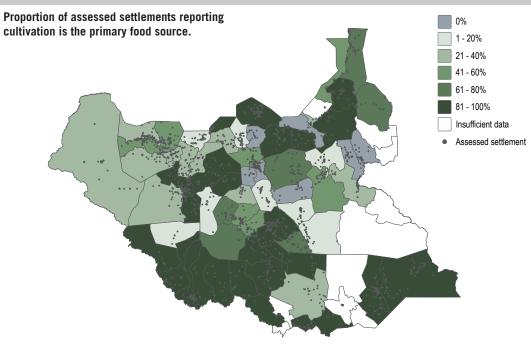


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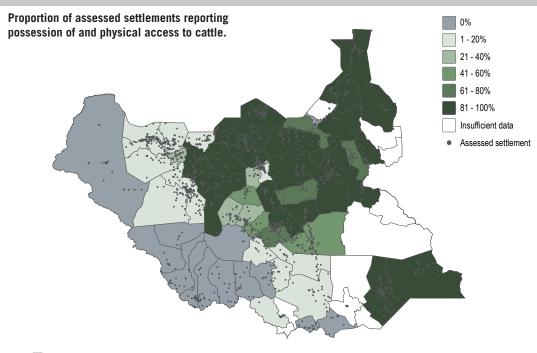
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Livelihoods: cultivation



Livelihoods: livestock



Agricultural inputs

Top five counties where the highest proportion of assessed settlements reported having inadequate access to farming tools.

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Magwi	100%
Rumbek North	100%
Kajo-keji	87%
Cueibet	83%
Rumbek East	71%

Land for cultivation

Top five counties where the highest proportion of assessed settlements reported experiencing restrictions to access land for cultivation.

Akobo	97%
Bor South	49%
Wau	45%
Panyikang	38%
Rumbek North	36%

Food source: livestock

Top five counties where the highest proportion of assessed settlements reported livestock is their primary source of food.

Twic East	38%
Aweil South	37%
Duk	20%
Ulang	14%
Aweil East	13%

Livestock engagement

Top five counties where the highest proportion of assessed settlements reported that most people are engaged in livestock activities.

Abiemnhom	100%
Akobo	100%
Ayod	100%
Fangak	100%
Kapoeta East	100%

*Other assessed counties reporting 100% engaged in livestock activities include: Kapoeta North,Luakpiny/Nasir, Nyirol, Pariang, Tonj South, Ulang and Uror.

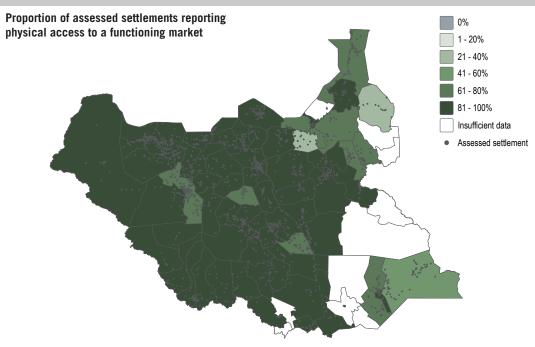


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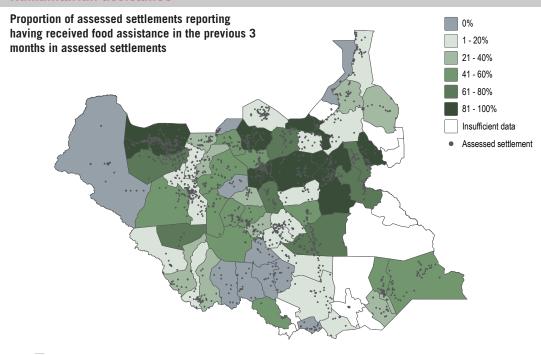
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Markets



Humanitarian assistance



Food source: purchasing

Top five counties where the highest proportion of assessed settlements reported purchase as a primary source of food.

Tonj South	79%
Wau	60%
Juba	58%
Raja	50%
Gogrial East	47%

Livelihood: casual labour

usually doing low skill or low paid work.

Top five counties where the highest proportion of assessed settlements reported casual labour* is a livelihood activity.

Ibba	100%
Mundri East	100%
Raja	100%
Wau	98%
Jur River	96%
Casual labour is when someone is informally employed for a short period of time,	

Food source: humanitarian

Top five counties where the highest proportion of assessed settlements reported humanitarian assistance is the primary source of food.

Guit	100%
Leer	93%
Rubkona	92%
Mayendit	83%
Luakpiny/Nasir	67%

Humanitarian distribution

Top five counties where the highest proportion of assessed settlements reported having not received any humanitarian assistance in the past three months.

Abiemnhom	100%
Ibba	100%
Kajo-keji	100%
Manyo	100%
Maridi	100%

*Other assessed counties reporting 100% to no humanitarian assistance include: Mundri East, Mundri West, Mvolo and Tonj East.



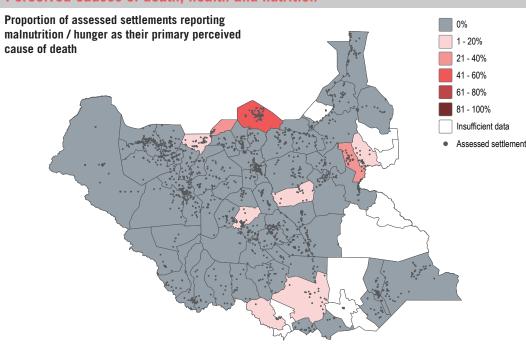


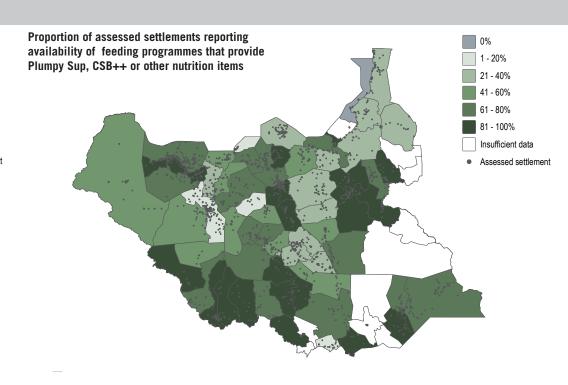
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Perceived causes of death, health and nutrition





Mortality increase

Top five counties where the highest proportion of assessed settlements reported a higher perceived number of deaths than normal.

Rumbek North	64%
Panyikang	63%
Mvolo	60%
lbba	54%
Mundri East	45%

Health: malnutrition

Top five counties where the highest proportion of assessed settlements reported perceived malnutrition is a main health problem.

Ulang	32%
Tonj East	22%
Tonj North	18%
Tonj South	14%
Abiemnhom	11%

Health: malaria

Top five counties where the highest proportion of assessed settlements reported malaria is a main health problem.

Maban	100%
Manyo	100%
Melut	100%
Cueibet	96%
Rumbek East	95%

Health services

Top five counties where the highest proportion of assessed settlements reported having no physical access to health services.

Canal/Pigi	79%
Renk	72%
Baliet	63%
Maban	54%
Melut	52%

