



South Sudan - Eastern Equatoria State

Site Assessment - Kapoeta Town

South Sudan Displacement Crisis

November 2016

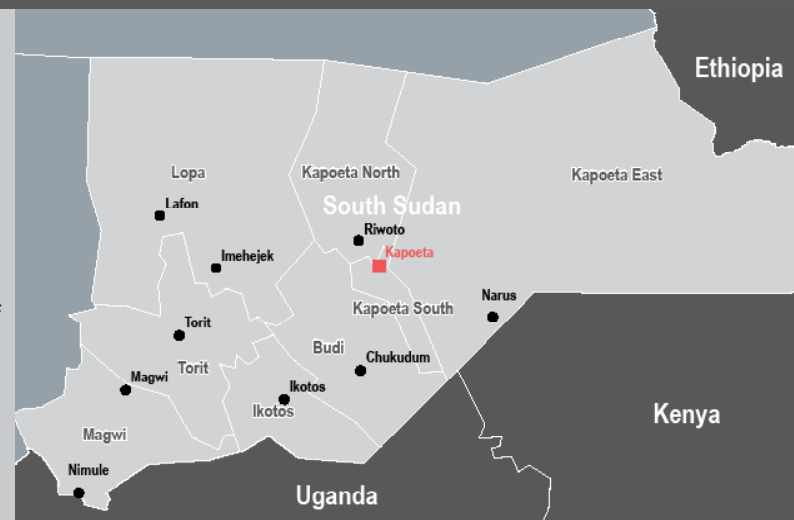
Overview

Since the re-emergence of conflict in Juba on 8 July 2016, fighting has spread across Greater Equatoria, triggering widespread displacement both inside and outside of South Sudan. Most of those who left fled, primarily populations from the Greater Equatoria Region, have gone south to Uganda, where 303,434 refugees have been registered as of 14 November 2016.¹ However increasing insecurity along the roads to Uganda has led many IDPs to flee east, toward Kenya. Of these, only 6,269 South Sudanese have been registered in Kakuma since the beginning of the crisis, though an estimated 10,000-11,000 IDPs have fled to Kapoeta, and hundreds are arriving in both locations each day.²

Despite the growing influx of IDPs and refugees, very little is understood about the nature and likelihood of further displacement, or the conditions experienced by the IDPs who

have left for Kapoeta town. In order to fill these information gaps and facilitate humanitarian planning, REACH conducted an on-site assessment of Kapoeta Town and the surrounding area. Findings presented in this document are drawn from primary data collected from Key Informants (KIs) in Kapoeta Town between 2nd and 10th November 2016. In total, 8 Focus group discussions and 127 KI interviews were conducted. The situation in terms of health, shelter, food security, WASH, education and protection, along with displacement patterns of IDPs, were assessed. Data was triangulated with interviews held with the heads of NGOs and government ministries in town.

This factsheet provides an indicative overview of needs and current humanitarian situation in Kapoeta Town, as well as the potential for further displacement.



Population in Kapoeta Town

REACH estimates the current population of Kapoeta Town to consist of approximately 14,000 host community and 10,600 IDPs. The vast majority arrived after July 2016. All IDPs have been integrated into the existing host community, most moving to areas where small numbers of people from their pre-crisis locations have been living since before the crisis.

Boma	Census population (2008) ³	Host Community (2016) ⁴	IDPs (2016) ⁴
Atalabara	936	1,338	801
Hai Musheshva (part of Malakia)		1,338	486
Hai Rei	792	1,699	1,180
Hai Sujun	1,028	1,029	947
Hai Tarawa	894	1,448	1,196
Lodingding	169	1,212	1,651
Malakia	3,492	1,991	1,317
Nalingaro	546	1,102	1,403
Palakal	1,260	2,842	1,619
Total	9,960	14,000	10,600

1. UNHCR, Flash Update on the South Sudan Emergency Response, 14 November 2016

2. UNHCR Kakuma New Arrival Registration Trends, 30 October - 5 November 2016

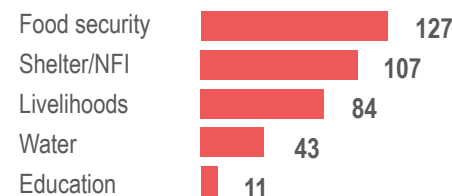
3. South Sudan Bureau of Statistics, Population Census, 2008.



Priority Needs

Most commonly reported needs of newly arrived IDPs:

Number of key informants reporting



Food security was reported by all respondents to be the most critical need in Kapoeta Town.

Perceptions of current service provision



95% of key informants reported that the current provision of services by the humanitarian community and local government is inadequate to meet the needs of the population.

4. Estimates of the host community and IDP population by boma were collected from boma community leaders, then divided by the estimated total of each group to give a proportion of the total population of IDPs and host community in town. Current host community population was estimated by multiplying the 2008 census population by the growth rate of the population of Kapoeta South County using the County population from the 2008 census and 2014 UN estimates. The current IDP population was made through consultation with local authorities using REACH's population estimates and the estimated total proportion of IDPs and host community. The total population was then multiplied by the estimated proportion of IDPs and host community for each boma.



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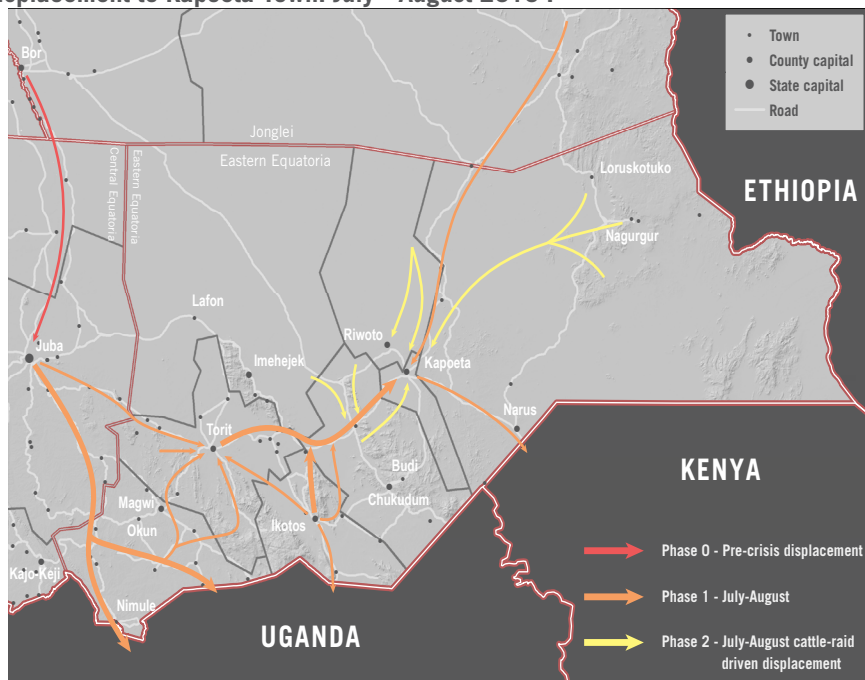
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Displacement Trends

Displacement to Kapoeta Town: July - August 2016 :



Displaced because of fighting: Prior to the July Crisis, many people had fled to Juba from Jonglei state because of inter-communal fighting. When conflict erupted in Juba, they and others from across Central Equatoria and Eastern Equatoria fled to Torit town. Most used roads to reach the town, whilst those from Magwi, because of perceived insecurity, avoided these roads and used alternative routes. This displaced population waited in Torit until they were able to find transport to Kapoeta Town.

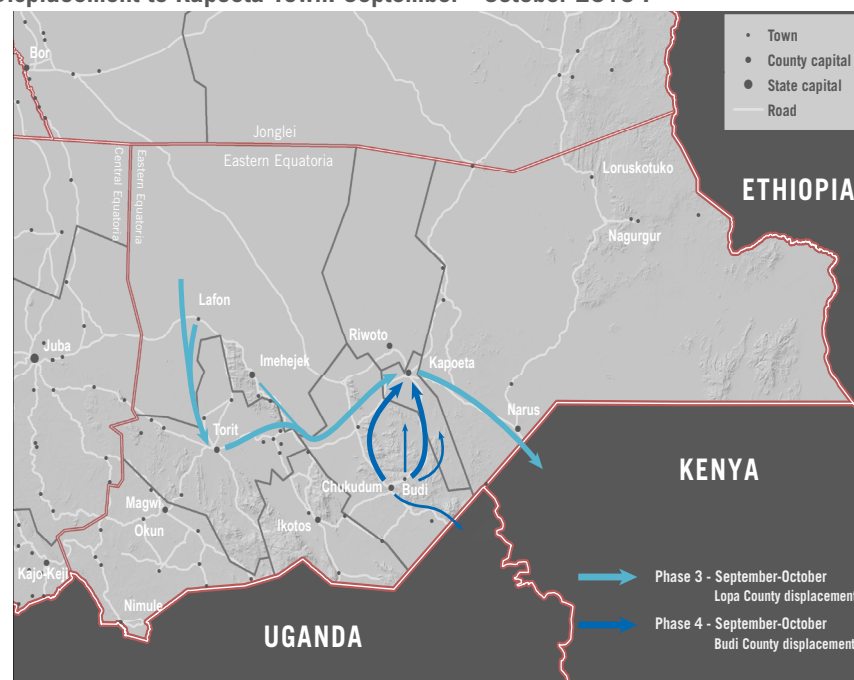
Displaced because of cattle raids: In Kapoeta North and East, a shortened wet season led to early cattle raiding, which has displaced people from Kapoeta North and East.

Dangers during journey to Kapoeta (Phase 1 - 4):



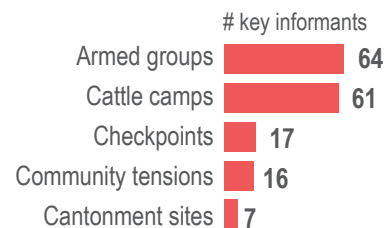
47% of key informants reported that they had experienced an attack along the route while coming to Kapoeta. 42% of all attacks have occurred within the last month.

Displacement to Kapoeta Town: September - October 2016 :

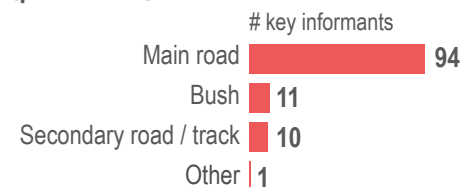


Fighting in Lopa/ Lafon: In October, emergent conflict in Lafon triggered renewed widespread displacement to Kapoeta Town by both the Torit Kapoeta Road and the Chukudum Kapoeta road. Population either fled directly to Kapoeta by car, walked to Torit before getting a ride to Kapoeta or sought shelter in remote mountain villages, far away from potential flash-points of conflict.

Observations along the route (phase 1 - 4):



Main method of transport (phase 1 - 4) :





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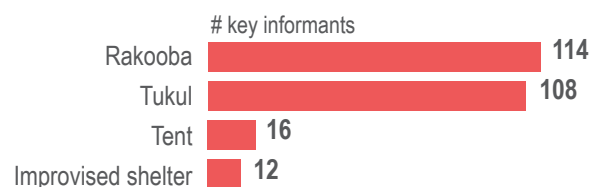
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Shelter/ NFI

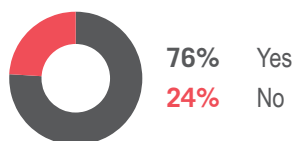
Although Kapoeta Town's population has nearly doubled, very few shelters have been built to accommodate this growth, in part because of a lack of materials. Grass will not be ready until December, and grows very far from town, which is dangerous to collect because of the presence of cattle raiders. To cope with lack of access to shelter, most IDPs are sharing houses with the host community. Between 5 and 20 people are reported to share each shelter; many reportedly sleep outside unless it rains. During an August-September distribution by PSI, mosquito nets were provided to most of the population, though IDPs who have arrived since typically do not have any.

Most common shelter types:

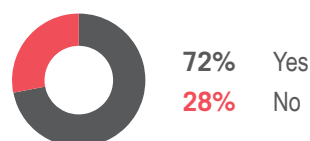
Participants could choose multiple responses



KIs reporting that IDPs have same access to shelter as host community:

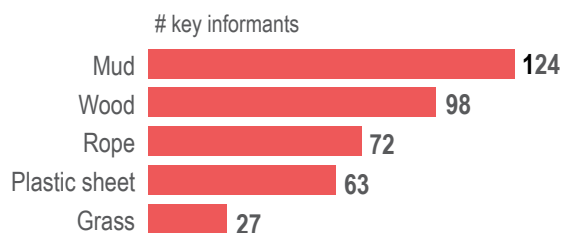


KIs reporting most in community sleeping under mosquito nets:



Reported available shelter materials:

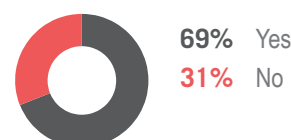
Participants could choose multiple responses



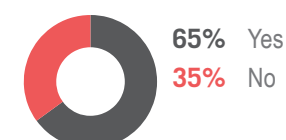
WASH

Years of poor maintenance and the recent influx of IDPs have put considerable strain on the town's limited water infrastructure, which has resulted in many boreholes breaking down. The town's water system is currently inactive due to a lack of fuel, leaving only 10 boreholes to serve nearly 25,000 people.

Reported access to safe drinking water:



Are IDPs able to get the same access to WASH as host community:

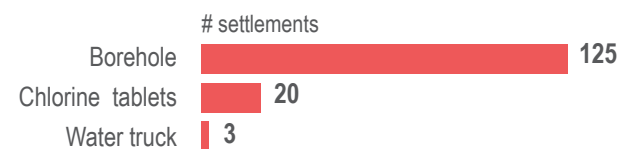


Functioning water systems in Kapoeta Town:⁵

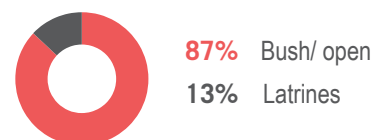
Water Source	Functioning	Not Functioning	Total
Boreholes	10	24	34
Water systems	8	1	9
Total	18	25	43

Main water sources used:

Participants could choose multiple responses



Reported use of sanitation facilities:



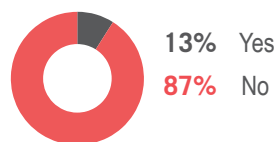
5. Department of Water, Kapoeta South County, October 2016



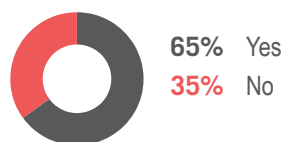
Food Security/ Livelihoods

Emergent conflict and a multi-year drought in the Greater Kapoeta area has led to extreme food shortages, particularly in rural areas. Kapoeta Town itself does not produce large quantities of food, and the population is completely dependent upon the market, where the economic crisis has made most goods unaffordable. Most people have reportedly adopted numerous coping strategies, including eating one meal or less per day. Additionally Kenyan export restrictions on food means most must come from Uganda, which has become increasingly difficult due to banditry on roads inside South Sudan.

KIs reporting adequate access to food:



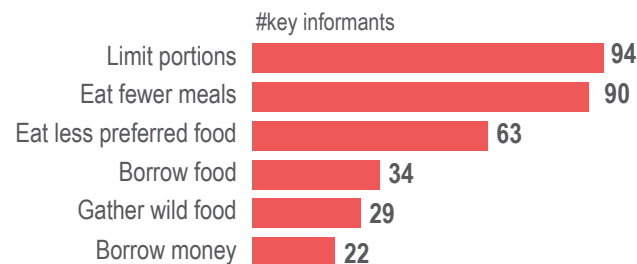
KIs reporting IDPs have same access to food as host community:



1 week

Estimated number of weeks IDPs have until food runs out. Most KIs reported buying food on a daily basis from the market, using money they were able to make that day selling firewood or charcoal made from wood collected in the bush.

Most commonly reported coping strategies:



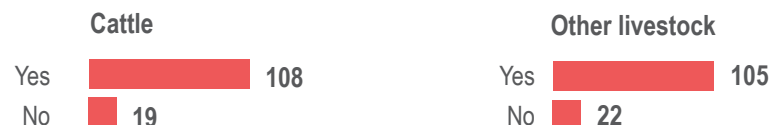
100%

of respondents reported access to a functioning market. All trade is reportedly conducted using cash, although prices have increased considerably with the reduction of trade in Eastern Equatoria because of the conflict.

-83%

Average change in volume of trade July. Most KIs reported that the recent conflict has made transporting food by road increasingly difficult. The cost of transporting one truck of food has been multiplied by six since the beginning of the crisis.

Number of key informants still owning cattle or other livestock:



In General, the vast majority of the host community still possess all of their cattle and other livestock, while most IDPs lost the majority of theirs to armed groups or sold them off to pay for transport to Kapoeta Town during their displacement. Cattle is kept in large camps located several kilometers outside of Kapoeta Town, while other livestock are typically kept near where they are staying in town.

Market prices (SSP) for staple goods:⁶

Food Type	Unit	Availability	Average	Minimum	Maximum
Maize flour	1 kg	Normal	63	20	100
Sorghum flour	1 kg	Scarce	66	45	80
Feterita grain	Malwa (3.5 kg)	Scarce	325	300	350
Mayo frain	Shawal (50 kg)	Scarce	2000	1500	2500
White maize grain	Malwa (3.5 kg)	Normal	215	100	480
White maize grain	Shawal (50 kg)	Normal	1313	1250	1400
Finger millet	Malwa (3.5 kg)	Not Available	N/A	N/A	N/A
White wheat flour	1 kg	Normal	72	65	80
Rice	1 kg	Normal	122	80	300

6. Figures are part of a market assessment conducted by REACH at select sites around the country.



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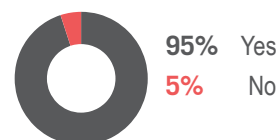
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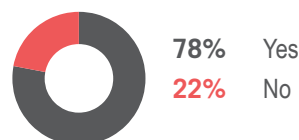
Education

Kapoeta Town is the only location in Kapoeta South County where education is still available. Under South Sudanese law, education is free, however many teachers have reportedly began to ask for contributions from parents to cover their salaries, which are too low to afford most goods during the current economic crisis. As a result, access to education, particularly for IDPs with limited money or assets, is now severely restricted.

Reported access to education:



KI's reporting IDPs have same access to education as host community:



Number of schools in Kapoeta town by functionality⁷

School type	Functioning	Non functioning	Total
Nursery	7	3	10
Primary	5	9	14
Secondary	1	0	1
AES Centres	3	0	3
VTC	1	0	1
Total	17	12	29

Numbers of pupils and teachers in Kapoeta town, October 2016⁷

	Pupils by gender and school			Teachers by gender and school		
	Boys	Girls	Total	Men	Women	Total
Nursery	290	168	458	NA ⁸	NA ⁸	NA ⁸
Primary	419	362	781	78	24	102
Secondary	233	56	289	17	0	17
AES centre	NA	NA	NA	NA	NA	NA
VTC	63	9	72	3	0	3
Total	1,005	595	1,600	98	24	122

7. Ministry of Education, Namorunyang State, October 2016

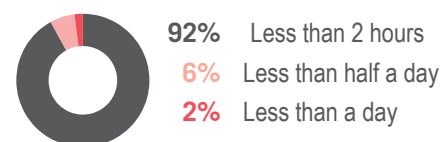
8. All primary school teachers in Kapoeta Town currently claim to also be nursery school teachers.

Health

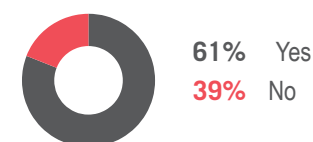
The state health ministry is supported by several NGOs to ensure hospitals are well stocked with drugs and doctors. Although one of the hospitals in Kapoeta town is currently not functional, it is projected to reopen soon and staff and funding have both been guaranteed by the state health ministry. However, many drugs are transported by road and subject to the same obstacles as food items.

100% of respondents reported access to a functioning healthcare centre.

Reported distance to nearest healthcare facility:



KI's reporting IDPs have same access to health care as host community:



Most commonly reported diseases:

Participants could choose multiple responses

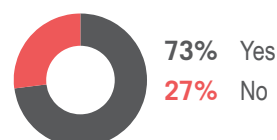
Key informants

1	Malaria	123
2	Typhus	85
3	Diarrhoea	65
4	Bursulosis	30

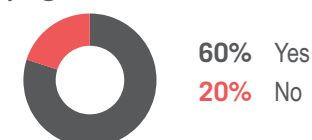
Hospitals in Kapoeta town:⁹

Hospital name	Functional	Specialty	Supporting agency
Kapoeta Mission Hospital	No	HIV, TB	CDOT
Kapoeta State Hospital	Yes	Surgery, Maternity	ARC

% of respondents aware of supplementary feeding programme for children:



% of respondents aware of supplementary feeding programme for pregnant women:



9. Ministry of Health, Namorunyang State, November 2016



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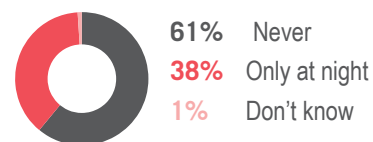
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Protection

The Kapoeta Town remains largely directly unaffected by the conflict that has recently spread across the Equatorias, and most people reported feeling safe at all times of the day and night. Most conflict has occurred far outside of the town, and is related to community tensions and cattle raiding. Relations between the host community and IDPs are reported and observed to be amicable, though this will likely change as displacement become protracted and competition for increasingly scarce resources increases.

Time of day when people in settlement feel unsafe: Most vulnerable groups reported:

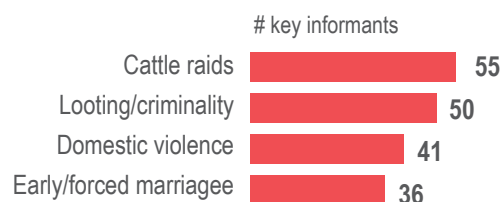


Participants could choose multiple responses

- 1 Women
- 2 Sick, Elderly, Disabled
- 3 IDPs
- 4 Girls

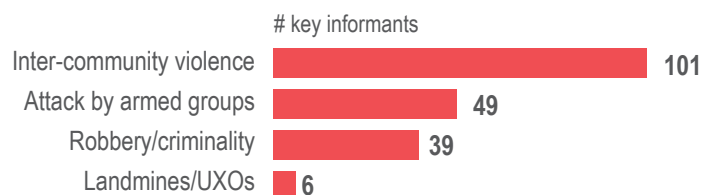
Top reported protection concerns in Kapoeta Town:

Participants could choose multiple responses

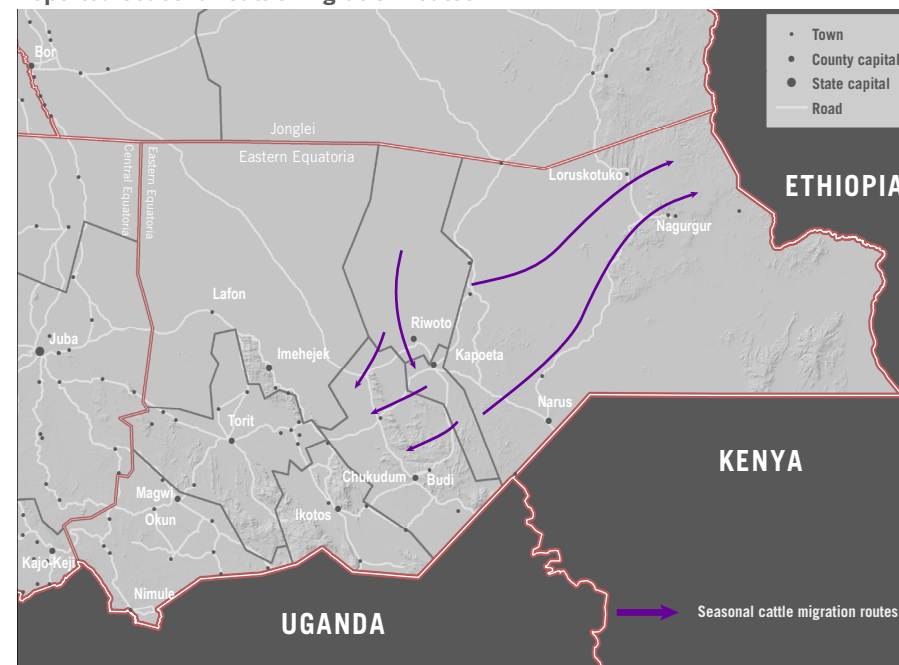


Top reported protection concerns when travelling:

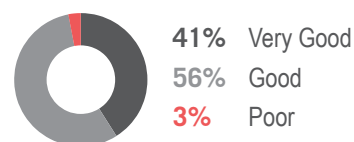
Participants could choose multiple responses



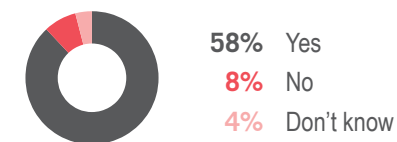
Reported seasonal cattle migration routes:



Reported relations between IDPs and host community:



How many key informants are aware of the Relief and Rehabilitation Commission:



About REACH

REACH facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. All REACH activities are conducted through inter-agency aid coordination mechanisms. For more information, you can write to our in-country office: south.sudan@reach-initiative.org or to our global office: geneva@reach-initiative.org.

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