

South Sudan displacement crisis: Critical conditions in areas of transit and return threaten health, wellbeing, and sustainable integration.

August 2023 | South Sudan

KEY MESSAGES

- Since the 15th of April, large numbers of South Sudanese returnees have arrived and continue to arrive in transit locations in Unity and Upper Nile State, such as Renk and Malakal. Despite humanitarian efforts to provide emergency services in transit locations and timely facilitation of onward travel to areas of return, as of August 2023, **these locations are highly congested and the situation remains dire**. This is evidenced by exceptionally **critical rates of acute malnutrition and a rising disease burden, including ongoing measles outbreaks**.
- **Highly vulnerable returnees are settling into areas of return that are facing emergency levels of acute food insecurity and a dearth of available livelihoods** due to years of compounding shocks and stressors, putting pressure on local communities and existing infrastructure and reducing already limited per-household food consumption.
- Despite the critical situation, **partners have warned that the shortfall in funding will inevitably lead to a cessation of lifesaving activities**, including humanitarian-facilitated transportations, which are anticipated to be halted on the 4th of September. Impacts will likely be disastrous, particularly in Renk, which receives the majority of new arrivals. **Additional funding is urgently needed to prevent largescale loss of life and facilitate sustainable integration of returnees in areas of return**.
- While timely onward movement is a critically important pillar of the response, **adequate service provision needs to be provided along all stages of transit and in areas of final return**, as stipulated in the Emergency Response Plan. Reports of **children dying due to non-trauma causes in transit centres and during facilitated transportation journeys** point to glaring service gaps.

CONTEXT & RATIONALE

Since the outbreak of conflict in Sudan on the 15th of April, more than [250,000 people, nearly all of whom South Sudanese nationals](#), have been recorded entering South Sudan, mostly through Joda point of entry in Renk county (Upper Nile State), where partners have recorded an average of [1,000-1,500 new arrivals per day](#) in August. [Roughly half of returnees have moved into local communities](#), while the remainder remains in transit locations, in transit, or border regions, where some have temporarily settled. In border regions, limited infrastructure and poor access due to the rainy season present considerable barriers to the humanitarian response and onward travel.

Returnees enter a highly fragile context, driven by climatic shocks, eroded livelihoods, and severe food insecurity, and many do not have a home to return to. These factors complicate sustainable integration into host communities.

Between 14 and 22 August, REACH conducted two qualitative rapid assessments to assess the impact of the Sudan crisis in two areas of return: Malakal and Rubkona counties (See map 1).¹ The team spoke with returnees, host communities,² local government representatives, community leaders, and humanitarian service providers. This brief summarises the key findings, triangulated with secondary data, related to exceptionally severe needs, vulnerabilities of returnee populations, and hazards to which the returnee population are exposed during transit and upon their return.

KEY FIGURES

253,023

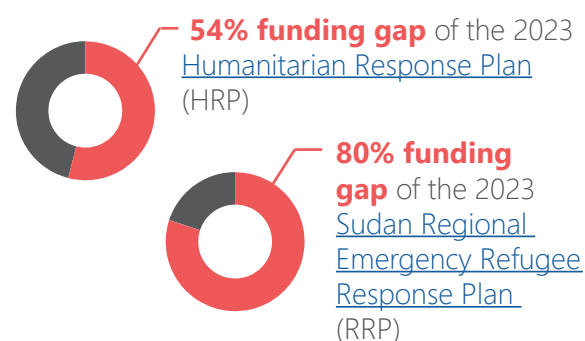


persons have been registered entering South Sudan from Sudan since the 15th of April, **91% of whom are returnees** ([IOM 3 September](#))

They enter a highly fragile country, where

9.4 million

people are already estimated to be in need of humanitarian assistance, representing **76% of the population** ([HNO 2023](#))



CONGESTION AND BREAKDOWN OF SERVICES IN TRANSIT LOCATIONS

Since April, 80% of registered arrivals have entered South Sudan from the Joda Point of Entry (PoE) in Renk (Upper Nile State), with [recent estimates at 97% in August](#). According to the Office for the Coordination of Humanitarian Affairs (OCHA), on the 31st of August, the Renk Transit Centre hosted approximately 6,500-7,000 individuals, in addition to an estimated 5,000 people residing in informal sites.³ An average of 1,000-1,500 persons continue to arrive each day, severely [outpacing the 2,000 person capacity](#).⁴ Funding deficits, compounded by heavy rain, flooding, and limited infrastructure reportedly pose considerable challenges to the facilitation of onward riverine transport to Malakal to ease pressure on the overburdened services in Renk. Such narratives also exist about the situation in transit locations further down the line, in Malakal (Upper Nile State) and Bentiu (Unity State), where returnees reportedly remain stranded in overburdened transit and reception sites due to similar transportation barriers.

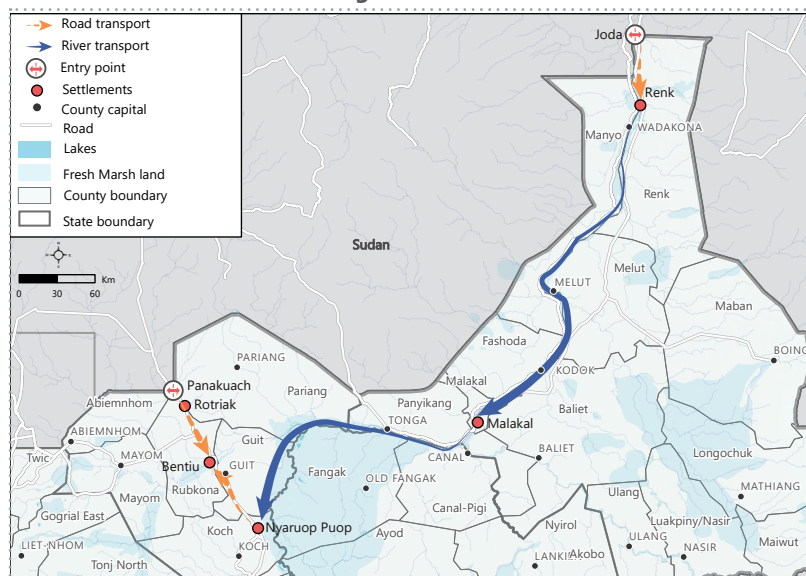
Funding gaps, flooding, and access constraints are also challenging humanitarian operations inside the transit sites. Already in June, findings from inter-agency needs assessments conducted in transit locations in Upper Nile and Unity States suggested **extremely inadequate sanitation conditions, under-resourced health services, a lack of shelter from rain, and a rising disease burden**.⁵ In a recent humanitarian update (28th of

August), OCHA reported shortages of essential medicines and supplies; including [a stock-out of measles and polio vaccines in Renk](#), leading to **children leaving the transit location unvaccinated**.

In addition, returnees and host communities alike face severe food insecurity. Across all focus group discussions and key informant interviews conducted in Malakal in August, participants reported that **there was not enough food**. While most returnees have reportedly received at least one one-off food distribution of between 1-2 week rations, prolonged stays in sites with a lack of livelihoods options and alternative food sources, exacerbated by [atypically high prices at markets](#), have meant that people reportedly resort to selling their clothes and last assets, with most people already largely dependent on social connections to access food.

These conditions seem to be reflected in **alarming rates of acute malnutrition among children under 5 and pregnant and nursing women**; nutrition screenings conducted by partners in various sites between June and August have all yielded results that surpassed the 15% Global Acute Malnutrition (GAM) threshold,⁶ indicative of critical acute malnutrition as per the Integrated Phase Classification (IPC) standards, **requiring immediate action to prevent loss of life**. To put this into perspective, while acute malnutrition is not a new phenomenon in South Sudan, in their mid-August update, the United Nations Children's Fund (UNICEF) [warned not having seen such high levels of acute malnutrition in children since the civil war](#), further corroborating these numbers.

Map 1: Routes of return to Rubkona county via Panakuach and Joda points of entry REACH data collection sites August 2023



Among the over 250,000 people who have entered South Sudan, an estimated 42,965 individuals moved to **Rubkona** county, in Upper Nile State, either through Panakuach or Joda, before onward riverine transit to Rubkona through Malakal and Koch counties. Many remain in Rubkona as their final destination while others proceed to different counties of return. Due to largescale flooding since 2021, most residents and new arrivals stay in/near Bentiu and Rubkona towns, which are protected by dikes, or Rotriak which is on higher grounds. **Malakal** has also been a key transit location for returnees travelling from Renk to other areas in Upper Nile, Jonglei, and Unity states, in addition to a final destination.

CRITICAL CONDITIONS AND HEALTH RISKS PERSIST DURING TRANSIT ...

While humanitarian actors are working tirelessly to provide emergency services to new arrivals, the persistent congestion and poor living conditions in transit locations in Upper Nile and Unity states necessitates onwards movement of returnees to ease pressure. However, findings from various assessments indicate that transportation also poses considerable risks to people on the move.

In June, recent arrivals who were interviewed by REACH teams in Malakal reported that the conditions during riverine transport between Renk and Malakal had been difficult. They reported having been unable to access food and clean water during the journey, which takes up to 4 days. Many reported having had to drink water from the Nile and defecate in containers onboard overcrowded vessels, accounts that are corroborated with [statements collected by Médecins Sans Frontières \(MSF\)](#) and [findings from an assessment conducted by the Food Security and Livelihoods Cluster \(FSLC\)](#) in May and June.

New findings from August indicate that the situation onboard transportation vessels remains dire. During focus group discussions conducted in Rubkona, returnees reported **having observed instances of young children dying during riverine transport between Malakal and Rubkona** in three separate focus group discussions. These eyewitness accounts were corroborated by two representatives from humanitarian agencies interviewed in Rubkona, as well as by second-hand reports that were shared by host community members in two focus groups, and a community leader key informant interviewed in Bentiu.

... AND COMPLICATE INTEGRATION IN AREAS OF RETURN

Humanitarian actors interviewed in Rubkona and Malakal in August reported services in transit and reception areas were overwhelmed by the high need for care among increasingly vulnerable people arriving from Malakal and Renk, respectively, which they linked to people's prolonged exposure to food consumption gaps, lack of access to WASH and health

infrastructure, and disease outbreaks during transit and in transit sites. According to MSF estimates, [less than 15% of children under five arriving in Malakal have been vaccinated against measles](#).

The long journeys on overcrowded boats, dependence on surface water, open defecation, and lack of food and shelter are reportedly contributing to an ["enormous" spread of disease](#) and an ["extremely high mortality rate" in facilities](#). In Bentiu, a key area of return for many returnees traveling through Renk and Malakal, healthcare providers also reported that **the influx of vulnerable populations has overwhelmed existing healthcare capacity and resulted in shortages and stock-outs of medicine** throughout town, while UNICEF reports having observed a [worrying increase in acutely malnourished children among host community and returnee children alike](#).

In addition to the impact on existing infrastructure in areas of return, **the high vulnerability of new arrivals is likely to challenge sustainable integration**. According to the [latest figures](#), most returnees who moved into communities of origin and/or settled with host communities have done so in Upper Nile and Unity States, locations that are highly susceptible to flooding and the related consequences for mobility and livelihoods, and food security.

Members of the host community who participated in focus group discussions in Rubkona county (Unity State) in August, reported flooding in recent years has severely diminished the viability of traditional agricultural livelihood activities and has increased dependence on food assistance and wild foods. Their vulnerability is reflected in Rubkona likely facing **emergency levels of acute food insecurity**, as are other counties of return, including Malakal, Guit, and Koch (Phase 4 as per the latest [Integrated Phase Classification](#) projection, April-July 2023).

Returnees interviewed in Rubkona reported **not having access to any income-generating activities** and being solely dependent on social sharing and the little humanitarian assistance they had received to access food.⁷ And while host communities commonly reported sharing their food rations with returnees (or being willing to do so), this is not a sustainable option and risks **decreasing per-person food consumption in an area already facing high levels of acute food insecurity and underlying vulnerability**.

ZOOMING OUT: REALITY CATCHES UP WITH THE RESPONSE

Not long after the outbreak of the conflict and the first arrivals of refugees and returnees at the border with South Sudan, facilitating people's onward movement away from the fragile border region to areas of origin and/or intended areas of return [has become a core pillar of the response](#). The rationale behind this is mostly built on the assumption that flooding, remoteness, and other logistical challenges could pose considerable barriers to the response and an [associated aim to prevent a sprawl of large-scale camp-like settlements forming in hard-to-reach border areas](#).

However, findings suggest that **reality is catching up**. Logistical challenges and a lack of available funding and resources against continuing arrivals are resulting in a scenario of intensifying congestion and a **public health crisis**. People's prolonged stays in overcrowded transit locations and the related lack of access to adequate shelter, food, healthcare, and basic services contributes to them being **increasingly vulnerable to health risks during transportation and relocation**, particularly now that the rainy season has begun.

Moreover, many areas of return have also suffered compounding shocks and stressors over the years, which have eroded self-sustaining livelihoods, increased dependence on markets and humanitarian assistance, and have **limited host communities' abilities to welcome and support new arrivals in their community**.

Looking ahead, if conflict is to spread further into White Nile or Blue Nile state in Sudan, or if living conditions there deteriorate for the hundreds of thousands of South Sudanese who are residing in refugee camps, **the number of people arriving at the border could significantly increase**. Further, conflict sensitivity actors have warned that the current level of congestion **is already posing security risks**, with tensions between displaced populations and humanitarian actors already leading to instances of violence in and near transit sites.⁷

Despite the high severity of need and the risk of escalation, humanitarian actors have warned they will likely soon have to cease activities, including the facilitation of onward transportation from Renk and [WASH programming](#),⁹ due to a lack of funding. With the current rate of arrivals, **a stop of transportation could result in an increase of 25k new arrivals in Renk in a single month**. The critical conditions witnessed in this brief highlight the **need to urgently scale up funding** to sustain and increase services **to prevent loss of life** in areas of transit, during transit, and in areas of return.

The findings also point to **the need to rethink the no-camp strategy to align with the current situation of needs outpacing supplies in areas of transit**. While quick onwards movement is an important objective that should be strived for, **the provision of adequate services, shelter, and food is urgently needed along each stage of transit and in areas of return** to prevent the cascading impact of displacement on people's health and resilience and its consequences on integration into host communities.

ABOUT REACH

REACH Initiative 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. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).

ENDNOTES

¹ In total, REACH conducted 12 semi-structured focus group discussions with returnees and 11 with members of the host community, as well as 16 key informant interviews with service providers, community leaders, and local authority representatives in Rubkona and Malakal counties. Data was analysed in data analysis grids and triangulated with secondary sources where possible.

² For the purpose of this assessment, the definition of "host community" includes internally displaced households who were already residing in the assessment area prior to the 15th of April.

³ Nonviolent Peaceforce, August 2023. "Seeking harmony in hardship: A conflict sensitivity report on Renk South Sudan." On file with REACH.

⁴ Expansion work is reportedly underway to [increase the site capacity](#).

⁵ Results shared in multiple inter-agency rapid assessment reports, which are on file with REACH. For an impression, see for instance the [results from the assessment in Paloich transit site](#), dating July 5th.

⁶ Exhaustive nutrition screenings were conducted by various agencies in various sites in Upper Nile and Unity States between June and August 2023. Global Acute Malnutrition (GAM) by proxy through Mid-Upper Arm Circumference (MUAC) rates among children under 5 ranging between 16.6% to as high as 44.2% (Paloich, Melut county). Results are on file with REACH.

⁷ It should be noted that multiple key informants, as well as focus group discussions, reported to REACH that people who did not arrive through facilitated transportation and had instead arrived by their own means had not received any assistance. These people were often identified as the most vulnerable individuals as a result of this.

⁸ OCHA, September 4, 2023. "Renk Humanitarian Briefing Note". On file with REACH. Nonviolent Peaceforce, August 2023.

"Seeking harmony in hardship: A conflict sensitivity report on Renk South Sudan." On file with REACH.

⁹ OCHA, August 30, 2023. "Humanitarian Updates Note". On file with REACH. At the time of writing, partners have warned having to cease transport activities on the 4th of September.