

SOUTH SUDAN – COMPLEX EMERGENCY

FACT SHEET #1, FISCAL YEAR (FY) 2014

DECEMBER 13, 2013

NUMBERS AT A GLANCE

4.4 MILLION

People Projected in Need in South Sudan in 2014

U.N. Office for the Coordination of Humanitarian Affairs (OCHA) – November 2013

188,526

People Internally Displaced by Violence since January

OCHA – November 2013

809,663

South Sudanese Returns from Sudan to South Sudan since October 2010

International Organization for Migration (IOM) – November 2013

206,469

Refugees from Sudan's Two Areas in South Sudan since June 2011

Office of the U.N. High Commissioner for Refugees (UNHCR) – December 2013

15,559

Refugees from Central African Republic and the Democratic Republic of the Congo in South Sudan

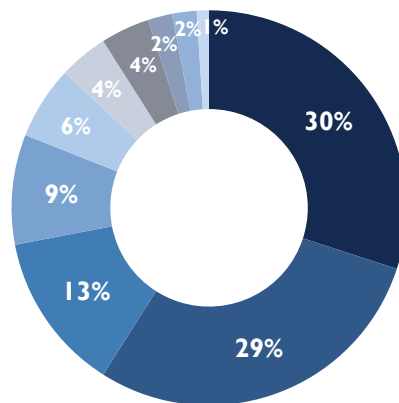
UNHCR – December 2013

5,890

Refugees from Ethiopia in South Sudan

UNHCR – December 2013

USAID/OFDA¹ FUNDING BY SECTOR FY 2013



- Water, Sanitation, & Hygiene (30%)
- Logistics & Relief Supplies (29%)
- Health (13%)
- Agriculture & Food Security (9%)
- Economic Recovery & Market Systems (6%)
- Humanitarian Coordination & Information Management (4%)
- Shelter (4%)
- Nutrition (4%)
- Protection (2%)
- Risk Management Policy & Practice (1%)

HIGHLIGHTS

- Three humanitarian hubs established in Jonglei State's Pibor County
- Relief agencies provide assistance to nearly 233,000 flood-affected people
- U.S. Government (USG) provides \$4.2 million in humanitarian assistance to date in FY 2014

HUMANITARIAN FUNDING TO SOUTH SUDAN TO DATE IN FY 2014

USAID/OFDA	\$4,415,281
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\$4,415,281

TOTAL USAID AND STATE HUMANITARIAN ASSISTANCE TO SOUTH SUDAN IN FY 2014

\$264,146,270

TOTAL USAID AND STATE HUMANITARIAN ASSISTANCE TO SOUTH SUDAN IN FY 2013²

KEY DEVELOPMENTS

- Humanitarian access improvements in Jonglei State's Pibor County have allowed relief agencies to provide assistance to nearly 90,000 people and consistently conduct operations in Pibor and Gumuruk towns and in the rural Kongor/Manzuben and Labraab areas. Humanitarian actors, including a USAID/OFDA partner, have established three mobile humanitarian hubs in Gumuruk, Kongor/Manzuben, and Labraab to ensure continuity of humanitarian services.
- On November 14, the U.N. released the South Sudan Consolidated Appeal (CAP) 2014–2016, which includes a three-year humanitarian strategy that integrates life-saving emergency assistance, resilience building, and capacity strengthening approaches. The CAP requests \$1.1 billion to address humanitarian needs among approximately 3.1 million of the most vulnerable individuals requiring humanitarian support in 2014. The U.N. emphasizes that incorporating resilience and capacity building into humanitarian activities will help prevent suffering, enable families to mitigate the effects of disasters, and empower national and state-level institutions to become the principal providers of basic services, such as safe drinking water and primary health care.
- In FY 2013, the USG provided approximately \$264.1 million in humanitarian assistance in South Sudan and continues to support relief activities in FY 2014.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

CURRENT SITUATION IN JONGLEI STATE

- In recent months, humanitarian access expanded in Pibor County, allowing relief agencies to consistently provide assistance in Pibor and Gumuruk towns, as well as in the rural areas of Kongor/Manzuben and Labraab. Humanitarian organizations have provided aid to nearly 90,000 people, the majority of those displaced by violence since March in Pibor County, according to the U.N. However, the January-to-May dry season—when roads become more passable for civilian migrations and armed group movements—is approaching, and any associated fighting could affect humanitarian operations. The U.N. and other humanitarian organizations are actively preparing for the unique set of challenges and opportunities presented by the dry season.
- Relief agencies have established three mobile humanitarian hubs in Pibor County, providing accommodation and office space for aid workers to support ongoing relief operations. The mobile hubs—currently located in Gumuruk town, Kongor/Manzuben, and Labraab—will ensure the continuity of urgent humanitarian services by providing basic infrastructure for field-based relief operations in towns and remote areas where humanitarian infrastructure was destroyed or damaged by fighting, according to the U.N.
- Through USAID/OFDA’s Rapid Response Fund (RRF)—an IOM-managed fund that enables quick and agile responses to acute crises—INTERSOS has received nearly \$108,000 to establish and manage the humanitarian hub in Kongor/Manzuben. USAID/OFDA funding is supporting basic facilities for the hub—including the construction of latrines, bathing facilities, and temporary shelters—and the deployment of experienced surge capacity personnel from INTERSOS to Kongor/Manzuben.
- Humanitarian organizations, including USAID Office of Food for Peace (USAID/FFP) partners, concluded food distributions in Labraab on November 28, reaching approximately 8,800 individuals through general food distributions and blanket supplementary feeding programs.

FLOODING & HUMANITARIAN RESPONSE

- The number of people affected by flooding in 2013 across nine of South Sudan’s ten states had reached nearly 345,000 by December 4, including more than 127,000 people in Jonglei State, according to the U.N. The U.N. reported that humanitarian agencies had assisted nearly 233,000 flood-affected people as of December 4, with relief operations ongoing. In 2012, flooding affected nearly 340,000 people in South Sudan.
- Since flooding began in August, humanitarian organizations and Government of the Republic of South Sudan (RSS) agencies have coordinated response efforts by sharing assessment information and conducting humanitarian operations based on assessed needs. Assistance included providing emergency medical care, food supplies, relief items, and water, sanitation, and hygiene (WASH) support in accessible areas.
- Through USAID/OFDA’s RRF, four local South Sudanese non-governmental organizations (NGOs) have received nearly \$337,000 to provide health care services and WASH assistance for flood-affected communities in Northern Bahr el Ghazal (NBeG) and Warrap states. USAID/OFDA-supported activities include rehabilitating latrines at health care centers, supporting hygiene promotion activities, and constructing emergency sanitation facilities.
- With RRF funding, local NGO the Aweil Window of Opportunities and Development Agency (AWODA) constructed 40 emergency latrines and 40 bathing shelters, as well as hand washing facilities, for approximately 800 displaced households in Aweil North County, NBeG, where flooding affected nearly 7,000 people. In addition, AWODA trained hygiene promoters to educate local communities on effective hygiene practices and use of emergency sanitation facilities and has supported the delivery of water purification tablets and other relief commodities to approximately 350 households since mid-October.

CURRENT SITUATION IN SUDAN–SOUTH SUDAN BORDER AREAS

Abyei Area

- Approximately 6,000 members of the Ngok Dinka community had traveled to Abyei Area as of October 25, prior to the late-October unofficial unilateral referendum on Abyei’s final status, according to the U.N. Reports indicate that nearly 1,000 individuals who returned for the referendum had left Abyei Area by mid-November. Security conditions remained stable but unpredictable throughout the referendum period.

- Humanitarian agencies provided assistance—including emergency food, household items, and water and sanitation support—to the new arrivals in Abyei town and in the village of Awolnohm, located near the River Kiir bridge crossing, according to the U.N. Humanitarian services for these populations complemented ongoing needs-based, multi-sector services for more than 80,000 people already living in Abyei Area.
- In FY 2014, USAID/OFDA provided Mercy Corps with an additional \$3.9 million to continue addressing agriculture, food security, and economic recovery needs in Abyei Area and Unity State, South Sudan. Using cash grants to stimulate local demand for and supply of seeds and agricultural tools, Mercy Corps is working to increase household resilience to natural and man-made shocks and stresses for more than 39,000 beneficiaries.
- USAID/FFP partner, the U.N. World Food Program (WFP), is providing general food distribution from pre-positioned stocks to nearly 80,000 people in Abyei Area, as well as to approximately 41,000 individuals displaced to nearby areas of South Sudan.

Unity and Upper Nile States

- Since mid-2013, mortality rates have decreased steadily in the refugee camps in Unity and Upper Nile states where refugees who fled conflict in Sudan’s Southern Kordofan and Blue Nile states reside, according to the U.N. Improved case management, early diagnosis, and treatment of illnesses, as well as improved water and sanitation services have contributed to the decline. The U.N. reports that the child mortality rate and the mortality rate for the general population—the crude mortality rate—in the camps are now at the normal level for a settled population.
- The U.S. Department of State’s Bureau of Population, Refugees, and Migration (State/PRM) contributed more than \$62 million in refugee assistance across South Sudan in FY 2013.

HUMANITARIAN ACCESS

- Increasing incidents of violence, harassment, and criminality targeting humanitarian personnel, as well as active hostilities and bureaucratic impediments, have constrained humanitarian access in South Sudan in recent months, according to the U.N. As of September 30, the U.N. had recorded 218 access incidents in South Sudan in 2013, exceeding the 141 incidents documented during the same period in 2012. Violence against humanitarian personnel, facilities, and assets remained the most reported access constraint, accounting for nearly 80 percent of all incidents countrywide between July and September. State actors accounted for nearly 39 percent of incidents reported, while unknown or non-state actors accounted for 61 percent, reflecting the prevalence of criminal activity targeting humanitarian operations.

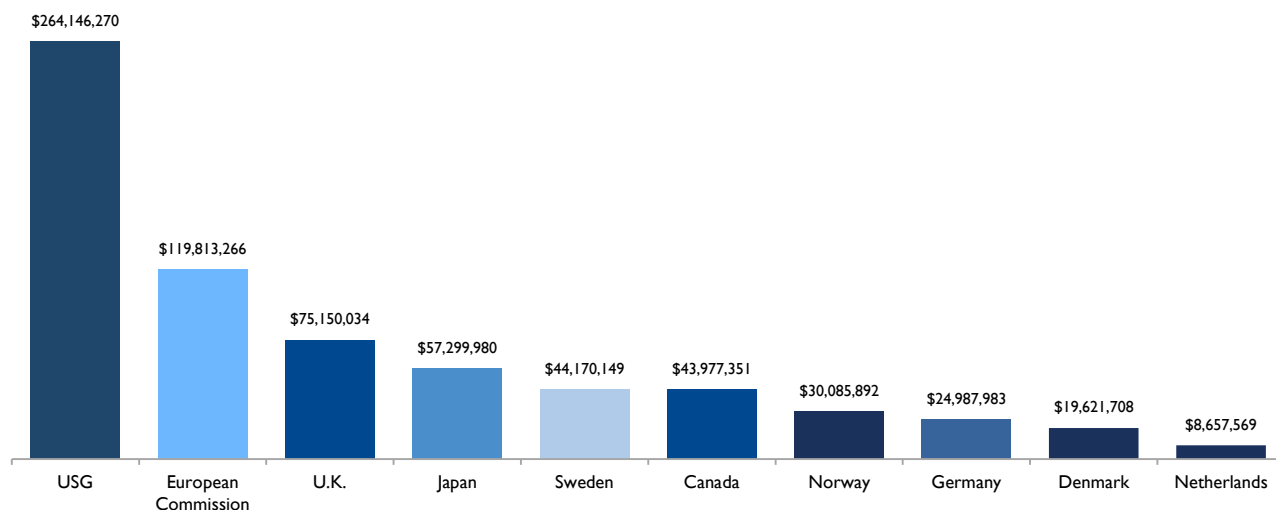
HEALTH AND WASH

- Health agencies have reported an increase in the number of new cases of visceral leishmaniasis—a parasitic disease, also known as kala-azar, that is spread through infected sand flies—in Upper Nile State. Between August and October, the number of kala-azar cases increased from 15 to 298, with 31 related fatalities, according to the U.N. World Health Organization (WHO). During the same period of 2012, only 23 cases were recorded. Health organizations have increased support, through provision of medical staff and supplies, to the Malakal Teaching Hospital and conducted assessments to investigate the rise in cases and diagnose new cases.
- On November 19, the RSS Ministry of Health and health organizations launched a national polio immunization campaign, part of South Sudan’s routine immunization program, according to the U.N. The campaign is targeting 3.3 million children under five years of age across the country. South Sudan has been polio-free since June 2009, but recent outbreaks in the region and three recent suspected cases in South Sudan that tested negative have heightened alertness.
- In FY 2013, USAID/OFDA provided more than \$7.3 million in emergency health assistance and more than \$17.6 million in WASH assistance in South Sudan, representing funding for projects that have remained active in FY 2014.

FOOD SECURITY

- The onset of the October-to-February harvest season in South Sudan has resulted in a general improvement in food security conditions countrywide, but conditions among communities in Pibor County and in Sudan–South Sudan border areas would likely deteriorate without ongoing humanitarian assistance, according to the USAID-funded Famine Early Warning Systems Network (FEWS NET). FEWS NET expects overall food security in South Sudan to improve to Stressed—Integrated Food Security Phase Classification (IPC) 2—levels between January and March, with Crisis—IPC 3—levels of food insecurity likely persisting in Pibor County through December due to insecurity and limited market access.
- The South Sudan CAP 2014–2016 estimates that 4.4 million people in South Sudan will be at risk of food insecurity in 2014 due to the combined effects of recurring violence, population displacement, weak purchasing power, above-average food prices, border closures, and trade restrictions.
- In FY 2013, USAID/FFP provided more than 89,000 metric tons of emergency food and therapeutic supplements, valued at approximately \$141.9 million, for vulnerable populations across South Sudan. USAID/FFP partner WFP continues to support populations in need of emergency food assistance through general food distributions, blanket supplementary feeding, seasonal food-for-assets interventions, school feeding, targeted supplementary feeding, and institutional feeding.
- USAID/OFDA supports nearly \$4.4 million in ongoing FY 2013 agriculture and food security activities in South Sudan and has committed more than \$1.2 million to support agriculture and food security interventions to date in FY 2014. USAID/OFDA-funded activities aim to improve food security among vulnerable populations by restocking livestock, training internally displaced person (IDP) and returnee communities in gardening techniques, increasing income-generating opportunities through seed-packet distributions, and providing training in agricultural techniques to improve crop production.

2013 TOTAL HUMANITARIAN FUNDING* PER DONOR



*Funding figures are as of December 13, 2013. All international figures are according to OCHA's Financial Tracking Service and based on international commitments during the 2013 calendar year, while USG figures are according to the USG and reflect the most recent USG commitments based on the 2013 fiscal year, which began on October 1, 2012, and ended September 30, 2013.

CONTEXT

- The January 2005 signing of the Comprehensive Peace Agreement (CPA) between the Government of Sudan (GoS) and the southern-based Sudan People’s Liberation Movement officially ended more than two decades of north–south conflict during which famine, fighting, and disease killed an estimated 2 million people and displaced at least 4.5 million others within Sudan. Between the signing of the peace agreement in 2005 and the independence of South Sudan in July 2011, more than 2 million IDPs and 331,000 refugees returned to areas of origin in present-day South Sudan, Abyei Area, and the Two Areas of Southern Kordofan and Blue Nile, according to IOM and UNHCR.
- The RSS declared independence on July 9, 2011, after a January 9, 2011, referendum on self-determination stipulated in the CPA. Upon independence, USAID designated a new mission in Juba, the capital city of South Sudan.
- The May 2011 Abyei Area conflict between the Sudanese Armed Forces and forces loyal to the Sudan People’s Liberation Army (SPLA) displaced approximately 77,000 people from areas north of the River Kiir, the majority of whom continue to reside in Agok town and Warrap State, South Sudan. The Abyei Joint Oversight Committee—comprising GoS, RSS, and African Union representatives—continues to discuss outstanding Abyei Area issues.
- Jonglei State—the largest state in South Sudan—has an extensive history of inter-communal fighting that predates South Sudan’s independence. Since January 2011, more than half of conflict-related deaths and displacements in South Sudan have occurred in Jonglei, according to relief agencies. Clashes among SPLA and non-state actors, as well as inter-ethnic conflict, continues to displace and otherwise adversely affect civilian populations across the state.
- In late January 2012, the RSS ceased oil production in South Sudan after negotiations stalled between Sudan and South Sudan regarding the terms and conditions related to the export of South Sudanese oil through Sudan. Although the RSS resumed oil production in April 2013, South Sudan continues to face significant financial issues due to the loss of oil income. The RSS derived 98 percent of its revenue from oil exports prior to the 2012 shutdown.
- On October 24, 2013, U.S. Ambassador Susan D. Page re-declared a disaster in South Sudan due to the ongoing complex emergency caused by the compounded effects of civil insecurity, continued armed conflict, population displacement, returnee and refugee inflows from Sudan, and perennial environmental stresses—including flooding.
- Insecurity, landmines, and limited transportation and communication infrastructure restrict humanitarian activities across South Sudan, hindering the delivery of critical assistance to populations in need, particularly in Jonglei, Unity, and Upper Nile states.

USAID AND STATE HUMANITARIAN ASSISTANCE TO SOUTH SUDAN PROVIDED IN FY 2014¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
Mercy Corps	Agriculture and Food Security, Economic Recovery and Market Systems	Unity, Abyei Area	\$3,936,987
	Program Support		\$478,294
TOTAL USAID/OFDA ASSISTANCE			\$4,415,281
TOTAL USAID AND STATE HUMANITARIAN ASSISTANCE TO SOUTH SUDAN IN FY 2014			\$4,415,281

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

² USAID/OFDA funding represents anticipated or actual obligated amounts as of December 13, 2013.

³ Estimated value of food assistance.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for response efforts around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - The Center for International Disaster Information: www.cidi.org or +1.202.821.1999.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.