

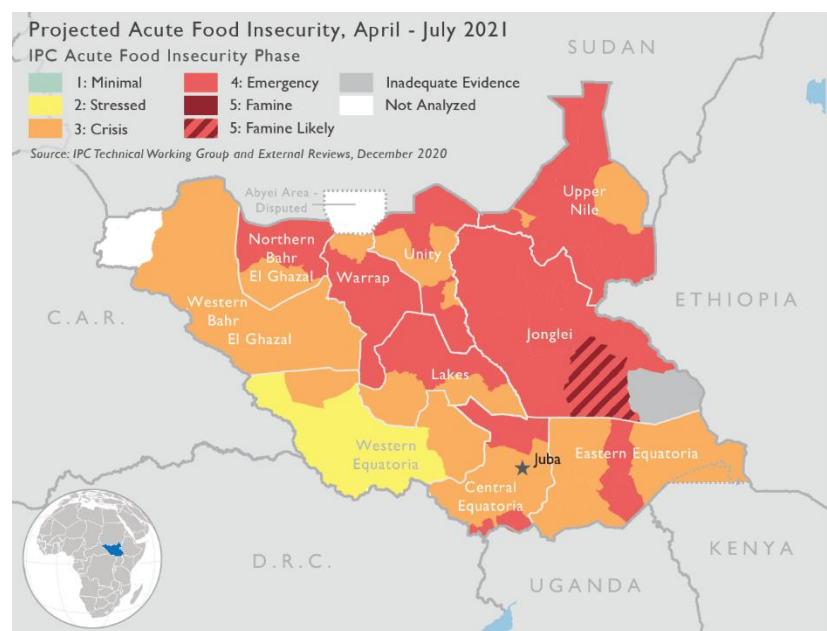
South Sudan – Complex Emergency

APRIL 6, 2021

SITUATION AT A GLANCE

12.1 MILLION Estimated Population of South Sudan <i>UN – January 2021</i>	8.3 MILLION Estimated Number of People in Need of Humanitarian Assistance in 2021 <i>UN – January 2021</i>	7.7 MILLION Estimated Population Requiring Emergency Food Assistance in 2021 <i>UN – March 2021</i>	1.6 MILLION Estimated Number of IDPs in South Sudan <i>UN – December 2020</i>	2.2 MILLION South Sudanese Refugees in Neighboring Countries <i>UN – February 2021</i>
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- The 2021 South Sudan HRP requests \$1.7 billion to provide humanitarian assistance to 6.6 million people.
- Relief actors—including USAID/BHA partners—have scaled up multi-sector response efforts in highly food-insecure areas of South Sudan, despite facing access challenges related to widespread insecurity and flooding.
- Deteriorating security conditions drive increased humanitarian needs and threaten relief efforts in Central Equatoria State.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING

For the South Sudan Response in FY 2020 and FY 2021

USAID/BHA ^{1,2}	\$969,467,840
State/PRM ³	\$107,763,910

For complete funding breakdown with partners, see detailed chart on page 7

Total \$1,077,231,750^{4,5}
¹ USAID's Bureau for Humanitarian Assistance (USAID/BHA)

² USAID/BHA FY 2020 funding includes emergency food assistance from the former Office of Food for Peace and non-food humanitarian assistance from the former Office of U.S. Foreign Disaster Assistance.

³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

⁴ This total includes approximately \$45.2 million in supplemental FY 2020 funding through USAID/BHA and State/PRM for coronavirus disease (COVID-19) preparedness and response activities.

⁵ This total does not include approximately \$290.1 million in FY 2020 U.S. Government (USG) funding for South Sudanese refugees in neighboring countries, of which nearly \$19.1 million is towards responding to COVID-19. This increases total USG emergency funding for the South Sudan crisis in FY 2020 and FY 2021 to nearly \$1.37 billion.

KEY DEVELOPMENTS

2021 HRP Requests Nearly \$1.7 Billion to Reach 6.6 Million People in 2021

The UN released the 2021 South Sudan Humanitarian Response Plan (HRP) on March 16, requesting nearly \$1.7 billion to reach 6.6 million people with life-saving, multi-sector support in 2021. The number of intended beneficiaries in the 2021 HRP increased nearly 20 percent from the 5.6 million people targeted for humanitarian assistance in the 2020 HRP. Widespread sub-national violence, the disruptive impacts of the coronavirus disease (COVID-19) pandemic on market functionality and household livelihoods, and the impact of two consecutive years of atypically severe flooding in 2019 and 2020 have all contributed to a substantial increase in the severity and scale of humanitarian needs in South Sudan. An estimated 8.3 million people—including approximately 300,000 refugees—are currently in need of humanitarian assistance, representing a nearly 11 percent increase from the 7.5 million people in need in 2020, according to the 2021 HRP. In conjunction with the release of the HRP, State/PRM partner the Office of the UN High Commissioner for Refugees (UNHCR) also launched the South Sudanese Regional Refugee Response Plan, calling for \$1.2 billion in 2021 to support 2.28 million refugees in five countries of asylum—the Democratic Republic of Congo, Ethiopia, Kenya, Sudan, and Uganda—with support from more than 90 partners.

Populations in South Sudan are facing the worst food insecurity and malnutrition crisis since the country's independence in 2011, with the upcoming May-to-July lean season expected to be the most severe on record, according to the 2021 HRP. The HRP anticipates that 7.7 million people will require food assistance during the year, including an estimated 108,000 people who are likely experiencing Catastrophe—IPC 5—levels of acute food insecurity.⁶ Furthermore, an estimated 1.4 million children younger than five years of age and 480,000 pregnant and lactating women will likely require treatment for acute malnutrition during the year. According to the HRP, immediate humanitarian response priorities include sustaining the multi-sector response scale-up in South Sudan's six most food-insecure counties—Jonglei State's Akobo and Pibor counties, Northern Bahr el Ghazal State's Aweil South County, and Warrap State's Tonj East, Tonj North, and Tonj South counties—and preparing for the 2021 April-to-September rainy season, which is forecast to result in widespread flooding for a third consecutive year.

Flooding, Insecurity Hamper Multi-Sector Response in Food-Insecure Areas

Humanitarian actors—including USAID/BHA partners—scaled up multi-sector response activities in highly food-insecure areas of South Sudan in February and March, despite facing significant access challenges due to insecurity and widespread flooding. The UN Office for the Coordination of Humanitarian Affairs (OCHA) deployed additional staff to Akobo and Pibor counties, Northern Bahr el Ghazal, and Warrap's Kuajok area in early March to assist with the coordination of relief activities in areas with severe humanitarian needs. In addition, as part of its lean season response, USAID/BHA partner the UN World Food Program (WFP) had provided emergency food assistance to nearly 55,000 people—approximately 50 percent of 106,000 intended beneficiaries—as of late March in Pibor, where Famine—IPC 5—is likely ongoing in western areas of the county.⁷ By late March, WFP had also provided food assistance to nearly 21,000 people and more than 43,000 people in Akobo and Aweil South, respectively, and had begun lean season food distributions in Warrap's Greater Tonj Region—comprising Tonj East, Tonj North, and Tonj South—following delays due to insecurity and incomplete preparations.

⁶ The IPC is a multi-partner initiative that developed a standardized scale to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries and time, ranges from Minimal—IPC 1—to Famine—IPC 5—for acute food insecurity.

⁷ A Famine—IPC 5—classification applies to a wider geographical location, while the term classification of Catastrophe—also IPC 5—refers to a household. A household in Catastrophe has an extreme lack of food at the household level even with full employment of coping strategies. Famine is determined when more than 20 percent of households in an area are experiencing Catastrophe, when global acute malnutrition (GAM) levels exceed 30 percent, and when the crude mortality rate exceeds two people per 10,000 persons per day.

USAID/BHA non-governmental organization (NGO) sub-partners Livewell, Save the Children Federation (SCF), United Networks for Health, and TADO began increasing mobile medical services and bolstering primary health care unit staffing in Pibor, Tonj East, and Tonj South in early March. Moreover, humanitarian partners have scaled up programs for humanitarian protection in severely affected areas in recent weeks, initiating gender-based violence (GBV) prevention and risk mitigation activities in Pibor, reaching more than 3,800 children with psychosocial support, case management, and risk mitigation messaging in Akobo, and establishing women- and girl-friendly spaces in Tonj North and Tonj South. In addition, the USAID/BHA-funded and International Organization for Migration (IOM)-managed Rapid Response Fund (RRF) is supporting NGO partners to provide relief commodities and emergency water, sanitation, and hygiene (WASH) services to households experiencing Catastrophe levels of acute food insecurity in Akobo and Aweil South.

Despite concerted efforts to scale up the humanitarian response in areas experiencing Emergency—IPC 4—and Catastrophe levels of acute food insecurity in South Sudan, widespread insecurity and flooding continue to limit access and relief activities. In mid-March, sub-national violence, vehicle ambushes, and the looting of a humanitarian convoy hindered relief activities in Pibor, with clashes between local communities prompting relief workers to withdraw from affected areas, according to WFP. A commercial vehicle travelling along the road between Pibor's Gumuruk town and Pibor town was caught in the crossfire during an intercommunal clash, injuring a relief worker and resulting in the temporary closure of the road between Pibor and Jonglei's capital city of Bor. Moreover, unknown actors looted a nutrition facility along the Pibor–Gumuruk Road on March 13; the attack also resulted in the death of one person.

In addition, renewed sub-national violence in Greater Tonj in February and early March displaced an estimated 117,000 people, led to the relocation of 20 health workers, and prompted the UN World Health Organization (WHO) to suspend an ongoing polio vaccination campaign. The violence also delayed the prepositioning of essential health supplies and equipment in Tonj East and led to the suspension of nutrition services in parts of Tonj North, adversely affecting more than 1,100 malnourished children. Furthermore, on February 27, unknown armed actors looted approximately 1.5 metric tons (MT) of WFP nutrition commodities from a health care center in Tonj East. Moreover, livestock vaccination and treatment remains suspended in Tonj East and Tonj North due to insecurity. Flood-damaged road infrastructure is also limiting humanitarian response efforts across much of Jonglei, including Akobo and western areas of Pibor County, where WFP is using river transport and costly air drops to deliver food assistance.

Insecurity Exacerbates Humanitarian Conditions in Central Equatoria

Deteriorating security conditions have increased humanitarian needs and resulted in heightened threats to relief actors in Central Equatoria since early March, relief actors report. Armed pastoralist groups attacked local communities in Central Equatoria's Juba, Kajo-Keji, Lainya, Morobo, and Yei counties in recent weeks, resulting in an undetermined number of deaths, reported incidents of GBV, and the destruction of crops, farms, houses, livelihoods assets, and water facilities. The renewed insecurity has also prevented internally displaced persons (IDPs) and refugees from returning to places of origin in Central Equatoria; moreover, some recently arrived former refugees plan to return to locations of asylum in Uganda due to the violence and deteriorating food security following the loss of their farms. IDPs in affected areas are reportedly sleeping in the open or sharing shelters with host community members.

Increasing insecurity has also adversely affected humanitarian response efforts and generated threats against relief workers in Central Equatoria in recent weeks. Between February and mid-March, unknown armed actors attacked and looted humanitarian convoys in Morobo on seven occasions,

according to the UN. The presence of armed pastoralist groups has also prevented IDPs and host communities from accessing essential humanitarian services. For example, the occupation of three Lainya health facilities by pastoralist groups has disrupted critical health care services in surrounding areas, forcing vulnerable populations to travel long distances to access health care services in Juba or elsewhere in Lainya. Moreover, armed pastoralist groups established encampments near a humanitarian compound in mid-March, increasing the risk of interference in relief operations.

Relief actors have responded to increased humanitarian needs in Central Equatoria by providing three-month stocks of essential medicines to health care facilities in Katigiri, Lainya, and Wonduruba counties, and additional interventions are ongoing. Relief actors note that the situation in Central Equatoria remains volatile; in recent days, local armed groups threatened to launch reprisal attacks against the pastoralist groups if local authorities do not take action to address the problem. Humanitarian organizations have requested support from OCHA and the UN Mission in South Sudan to raise concerns regarding insecurity in Central Equatoria with senior government officials.

Forecast Rainfall Threatens Third Consecutive Year of Flooding in Pibor

Persistently high floodwater levels continue to adversely affect populations in South Sudan, impeding food security and livelihoods activities and hampering humanitarian assistance delivery, according to the Famine Early Warning Systems Network (FEWS NET). Between July 2020 and January 2021, heavy rains and resultant flooding adversely impacted more than 1 million people in South Sudan, including approximately 495,000 people in Jonglei. While floodwaters had largely receded from most flood-affected areas of northern and western South Sudan by February, flooding continues to constrain access to food and limit humanitarian response efforts in large areas of Jonglei, as well as parts of neighboring Unity and Upper Nile states. In late February, OCHA identified approximately 30,000 flood-affected people in Akobo and reported that other large populations had travelled to Gambella refugee camp in Ethiopia to access basic services.

Repeated flooding has significantly damaged road and dike infrastructure in Jonglei, resulting in the inundation of large areas and hindering overland humanitarian access. In early March, WFP identified approximately 45 miles of dikes from Bor to Jonglei's Panyagor town currently in need of repair, as well as at least 120 damaged dike points. The UN agency is currently undertaking the rehabilitation of the dike and road network, aiming to complete repairs prior to the start of the rainy season. However, in mid-March, WFP reported an emergency funding shortfall of \$7.5 million to complete dike rehabilitation activities in Jonglei. Dike repairs are essential to providing cost-effective and efficient food assistance deliveries for food-insecure populations in Jonglei, enabling overland transport of relief commodities and preventing WFP from relying on costly airdrops to deliver 60,000 MT of food commodities in the state, at an estimated cost of approximately \$100 million.

South Sudan's April-to-September rainy season is likely to result in above-average rainfall across most parts of the country, according to the 57th Greater Horn of Africa Climate Outlook Forum. Coupled with atypically high water levels in the Nile River, the high projected rainfall amounts will likely lead to widespread, severe flooding in many parts of South Sudan by August, resulting in a third consecutive year of significant flooding in Pibor, FEWS NET reports. Relief actors note that flooding will increase the risk of waterborne diseases, including cholera, due to inadequate or damaged WASH facilities in flood-affected areas. With support from USAID/BHA and other donors, IOM, the Government of the Republic of South Sudan Ministry of Health, and partners conducted a first-round oral cholera vaccination campaign in Jonglei's Greater Pibor Administrative Area between January and late March, inoculating nearly 58,000 people ages 12 months and older.

KEY FIGURES



**\$674.7
Million**

In USG funding for emergency food assistance and livelihoods support in FY 2020 and FY 2021



\$36.8 Million

In USG support for life-saving health care programming in FY 2020 and FY 2021



3 Million

People supported with USG-funded WASH activities in FY 2020 and FY 2021

U.S. GOVERNMENT RESPONSE

FOOD SECURITY

USAID/BHA supports four UN agencies and nine NGOs to bolster food security, livelihoods, and early recovery efforts in South Sudan. With more than \$395.8 million in FY 2020 funding and more than \$278.9 million in FY 2021 funding to date, USAID/BHA partners provide emergency food assistance, agricultural inputs, fishing kits, and livelihoods training to support vulnerable populations across the country. Emergency food assistance includes U.S.-sourced commodities, locally and regionally procured commodities, and cash-based resource transfers where feasible.

USAID/BHA partners reached approximately 1.3 million beneficiaries with food assistance monthly in FY 2020.

HEALTH

With approximately \$36.8 million in FY 2020 and FY 2021 funding, USAID/BHA provides health care services in South Sudan through community health facilities and mobile medical units (MMUs). Through MMUs, partners provide a range of primary care, mental health, and maternal and newborn health services. USAID/BHA also supports integrated community case management services in South Sudan, which deliver life-saving curative interventions for common childhood illnesses, particularly where there is limited access to facility-based services. To mitigate the effects of the COVID-19 pandemic, USAID/BHA partners are training local healthcare workers in infection prevention and control methods and strengthening community health coordination. Additionally, State/PRM supports UNHCR to address the specific health care needs of refugees and other vulnerable populations in South Sudan. Health interventions are integrated with nutrition and WASH services wherever possible to ensure a sustainable system of clinical services and support.

WASH

USAID/BHA has provided more than \$35.2 million in FY 2020 and FY 2021 funding for WASH programming in South Sudan to provide access to safe drinking water, handwashing facilities, sanitation services, and solid waste disposal to more than 3 million people—including more than 1 million IDPs. WASH programming includes interventions to help prevent cholera outbreaks among vulnerable populations as well as mitigate GBV risks by providing safe access to latrines, sanitation services, and other WASH assets. USAID/BHA also supports hygiene promotion activities through public health campaigns and the distribution of essential supplies, such as buckets, soap, and dignity and hygiene kits.



**\$106.9
Million**

In USG funding for
life-saving nutrition
programming in
FY 2020 and FY 2021

NUTRITION

USAID/BHA supports partners in their efforts to prevent and treat malnutrition across South Sudan. In partnership with the UN Children's Fund (UNICEF), WFP, and NGOs, USAID/BHA nutrition assistance reaches children and pregnant and lactating women nationwide with specialized food products to treat malnutrition and provide supportive supervision to frontline health nutrition staff. Using a community-based approach, USAID/BHA partners promote recommended infant and young child feeding practices through one-on-one counseling and group education to manage acute malnutrition. With more than \$43.2 million in FY 2020 funding, USAID/BHA reached nearly 2.5 million people—including more than 325,200 IDPs—with life-saving nutrition services. USAID/BHA has also dedicated more than \$63.7 million in FY 2021 funding for nutrition assistance in South Sudan.



\$22.9 Million

In dedicated USG
support for critical
protection interventions
in FY 2020 and FY 2021

PROTECTION

With \$22.9 million in FY 2020 and FY 2021 funding, USAID/BHA supports multi-sector protection interventions that ensure the safety and dignity of more than 5 million people—including approximately 200,000 IDPs—in South Sudan. Protection activities include assistance to GBV survivors through case management, emergency protection-led assessments, mobile emergency response teams, psychosocial support, and referrals to health specialists. Additionally, State/PRM partners provide protection services to IDPs, refugees, and conflict-affected communities countrywide, including through GBV prevention and response programs, mental health and psychosocial support activities, family reunification, and legal assistance to facilitate access to identity documentation. USAID/BHA is also working to strengthen protection coordination and capacity-building by funding the GBV Sub-Cluster—the coordinating body for humanitarian GBV response activities, comprising UN agencies, NGOs, and other stakeholders—in South Sudan.



\$40.4 Million

In USG funding for
logistics support in
FY 2020 and FY 2021

LOGISTICS

With \$26.4 million in FY 2020 funding and \$14 million in FY 2021 funding to date, USAID/BHA provides countrywide support to the humanitarian response through the WFP-managed UN Humanitarian Air Service (UNHAS) and Logistics Cluster for South Sudan. UNHAS offers air transportation to relief actors throughout the country, while the Logistics Cluster provides coordination and information management services for humanitarian workers, delivery of essential humanitarian relief items, common warehousing of basic relief commodities, and geographical information system mapping. Additionally, USAID/BHA partner IOM supports fellow humanitarian partners' responses across South Sudan by procuring, storing, and transporting critical relief supplies, including emergency shelter and WASH commodities.

CONTEXT IN BRIEF

- The January 2005 signing of the Comprehensive Peace Agreement between the Government of Sudan and the southern-based Sudan People's Liberation Army 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. In July 2011, South Sudan became an independent state following a referendum earlier in the year.
- On December 15, 2013, clashes erupted between factions within the Government of the Republic of South Sudan (GoRSS) in Juba and quickly spread into a protracted national conflict, prompting displacement and humanitarian needs. On December 20, 2013, USAID activated a Disaster Assistance Response Team (DART) to lead the USG response to the crisis in South Sudan and stood up a Washington, D.C.-based Response Management Team (RMT) to support the DART.
- After nearly seven years, USAID transitioned the South Sudan DART and RMT to a normalized response under BHA on November 6 and November 20, 2020, respectively. USAID/BHA remains committed to maintaining a robust humanitarian response in South Sudan, and USAID/BHA partners continue to carry out life-saving programs to meet the ongoing humanitarian needs of the South Sudanese people.
- On November 12, 2020, Chargé d'Affaires, a.i. Jon Danilowicz redeclared a disaster in South Sudan for FY 2021 due to ongoing conflict and population displacement; restricted humanitarian access; and disruption of cultivation activities, markets, and trade, all of which have significantly exacerbated food insecurity and humanitarian needs.

USAID HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2021¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/BHA			
Catholic Relief Services (CRS)	Food Assistance—U.S. In-Kind	Jonglei	\$17,108,241
	Agriculture, Disaster Risk Reduction Policy and Practice (DRRPP), Economic Recovery and Market Systems (ERMS), Nutrition	Eastern Equatoria, Jonglei	\$10,058,615
IOM	Agriculture; Health; Humanitarian Coordination, Information Management, and Assessments (HCIMA); Nutrition; Protection; Shelter and Settlements; WASH	Central Equatoria, Eastern Equatoria, Jonglei, Northern Bahr el Ghazal, Unity, Upper Nile, Western Bahr el Ghazal, Western Equatoria	\$5,500,000
Norwegian Refugee Council (NRC)	Agriculture, DRRPP, ERMS, HCIMA, Nutrition, WASH	Unity, Western Bahr el Ghazal	\$10,058,614
UNICEF	Nutrition	Countrywide	\$25,000,000
WFP	Food Assistance, Logistics Support, Nutrition	Countrywide	\$313,986,339
World Vision	Agriculture, DRRPP, ERMS, HCIMA, Nutrition	Upper Nile	\$4,882,771
Program Support			\$120,596
TOTAL USAID HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2021			\$386,715,176

USG HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2020¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
FUNDING IN SOUTH SUDAN FOR COMPLEX EMERGENCY			
USAID/BHA			
Action Against Hunger USA (AAH/USA)	Agriculture; HCIMA; Health; Humanitarian Policy, Studies, Analysis, or Applications; Nutrition; Protection; WASH	Countrywide	\$4,803,069
Agency for Technical Cooperation and Development (ACTED)	HCIMA, Shelter and Settlements	Countrywide	\$3,950,000
Alliance for International Medical Action (ALIMA)	Agriculture, Health, Multipurpose Cash Assistance, Nutrition, WASH	Western Bahr el Ghazal	\$1,944,000
American Refugee Committee (ARC)	ERMS, Protection, Shelter and Settlements, WASH	Central Equatoria, Eastern Equatoria, Upper Nile	\$3,441,830
CRS	Health, Nutrition, WASH	Countrywide	\$8,100,000
	Food Assistance—7,520 MT of U.S. In-Kind	Jonglei	\$6,350,833
CONCERN	Agriculture, Health, Nutrition, Shelter and Settlements, WASH	Central Equatoria, Northern Bahr el Ghazal, Unity	\$6,500,000
Danish Refugee Council (DRC)	HCIMA, Protection, Shelter and Settlements	Unity, Upper Nile	\$3,314,295
Development Alternatives, Inc. (DAI)	Other	Countrywide	\$610,000
FAO	Agriculture	Countrywide	\$2,000,000
	Food Assistance—Vouchers, Complementary Services	Countrywide	\$25,000,000
International Medical Corps (IMC)	Health, Nutrition, Protection	Central Equatoria, Upper Nile	\$4,929,000
International Rescue Committee (IRC)	ERMS, Health, Nutrition, Protection	Central Equatoria, Unity	\$5,500,000
IOM	Agriculture, HCIMA, Health, Logistics Support, Nutrition, Protection, Shelter and Settlements, WASH	Countrywide	\$23,000,000
MEDAIR, SWI	Health, Nutrition, Protection, WASH	Northern Bahr el Ghazal, Unity, Jonglei, Upper Nile	\$8,000,000
Mercy Corps	WASH	Unity, Western Equatoria	\$3,260,576
Nonviolent Peaceforce	Protection	Central Equatoria, Jonglei, Unity	\$4,105,061
NRC	HCIMA, Protection	Countrywide	\$1,346,531
Relief International (RI)	Health, Nutrition, Protection, WASH	Upper Nile	\$6,800,000
Samaritan's Purse	Agriculture, ERMS, Health, Nutrition, WASH	Central Equatoria, Unity, Upper Nile	\$4,300,000
Save the Children Federation (SCF)	Health, Nutrition, Protection, WASH	Eastern Equatoria	\$3,015,788
Tearfund	Agriculture, Health, Nutrition, WASH	Central Equatoria	\$2,500,000
OCHA	HCIMA	Countrywide	\$3,000,000

WHO	Health	Countrywide	\$500,000
UNICEF	Nutrition, Protection	Countrywide	\$3,500,000
	Food Assistance—1,470 MT of Local, Regional, and International Procurement (LRIP)	Countrywide	\$25,225,000
VSF/G	Agriculture	Jonglei, Unity, Upper Nile	\$2,164,501
WFP	Food Assistance—84,180 MT of U.S. In-Kind	Countrywide	\$144,112,353
	Food Assistance—102,688 MT of LRIP	Countrywide	\$182,187,413
	Food Assistance—Cash Transfers	Countrywide	\$22,567,587
WFP (UNHAS)	Logistics Support	Countrywide	\$23,221,609
World Relief International (WRI)	Agriculture, Health, Nutrition, WASH	Jonglei, Unity	\$3,540,325
World Vision	Agriculture, ERMS, HCIMA, Health, Protection, WASH	Countrywide	\$4,531,938
Program Support			\$231,536
TOTAL USAID/BHA FUNDING			\$547,553,245
STATE/PRM			
Africa Humanitarian Action	Health, Protection	Countrywide	\$1,495,243
Internews Network	Protection, HCIMA	Countrywide	\$1,499,928
IRC	Health, Protection	Countrywide	\$2,000,000
International Committee of the Red Cross (ICRC)	Multi-Sector Assistance	Countrywide	\$30,000,000
Jesuit Refugee Service (JRS)	Education, Protection	Countrywide	\$1,993,329
Lutheran World Federation	Education, Protection	Unity, Upper Nile	\$2,140,689
Mentor Initiative	Health, Protection	Unity, Upper Nile	\$2,096,024
Relief International	Health	Upper Nile	\$4,983,089
SCF	Education, Protection	Upper Nile	\$2,226,608
UNHCR	Multi-Sector Assistance	Countrywide	\$49,300,000
TOTAL STATE/PRM FUNDING			\$97,734,910
TOTAL USG FUNDING FOR COMPLEX EMERGENCY IN SOUTH SUDAN IN FY 2020			\$645,288,155

FUNDING IN SOUTH SUDAN FOR COVID-19 OUTBREAK PREPAREDNESS & RESPONSE²			
USAID/BHA			
CRS	Food Assistance—Cash Transfers, Complementary Services	Central Equatoria	\$5,099,506
Doctors of the World	Health	Jonglei	\$300,000
FAO	Complementary Services	Central Equatoria, Eastern Equatoria, Northern Bahr el Ghazal, Western Bahr el Ghazal	\$2,200,494
IMC	Health, Protection	Central Equatoria, Upper Nile, Western Bahr el Ghazal	\$6,228,300
International Federation of Red Cross and Red Crescent Societies (IFRC)	Health	Countrywide	\$500,000
Internews	Health	Countrywide	\$700,001

IOM	WASH	Countrywide	\$6,864,000
Nonviolent Peaceforce	Protection	Central Equatoria	\$450,000
OCHA	HCIMA	Countrywide	\$734,020
Samaritan's Purse	Health	Central Equatoria, Northern Bahr el Ghazal	\$1,533,577
SCF	Health	Central Equatoria	\$300,000
UNICEF	Health, WASH	Central Equatoria	\$2,000,000
WFP	Food Assistance—4,712 MT of LRIP	Urban and Peri-Urban Areas, Countrywide	\$7,700,000
WFP (UNHAS)	Logistics Support	Countrywide	\$589,521
TOTAL USAID/BHA FUNDING			\$35,199,419
STATE/PRM			
ICRC	Multi-Sector Assistance	Countrywide	\$4,879,000
UNHCR	Multi-Sector Assistance	Countrywide	\$5,150,000
TOTAL STATE/PRM FUNDING			\$10,029,000
TOTAL USG FUNDING FOR COVID-19 OUTBREAK PREPAREDNESS & RESPONSE IN SOUTH SUDAN IN FY 2020			\$45,228,419

TOTAL USAID/BHA FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2020	\$582,752,664
TOTAL STATE/PRM FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2020	\$107,763,910
TOTAL USG HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2020	\$690,516,574

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of April 6, 2021.

² Figures represent supplemental FY 2020 International Disaster Assistance (IDA) and Migration and Refugee Assistance (MRA) funding committed for COVID-19 preparedness and response activities as of September 30, 2020.

³ This total does not include approximately \$290.1 million in FY 2020 U.S. Government (USG) funding for South Sudanese refugees in neighboring countries, of which nearly \$19.1 million is towards responding to COVID-19. This increases total USG emergency funding for the South Sudan crisis in FY 2020 to more than \$981.7 million.

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 disaster responses around the world can be found at [interaction.org](https://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, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: [cidi.org](https://www.cidi.org)
 - Information on relief activities of the humanitarian community can be found at [reliefweb.int](https://www.reliefweb.int).

USAID/BHA bulletins appear on the USAID website at [usaid.gov/humanitarian-assistance/where-we-work](https://www.usaid.gov/humanitarian-assistance/where-we-work)