

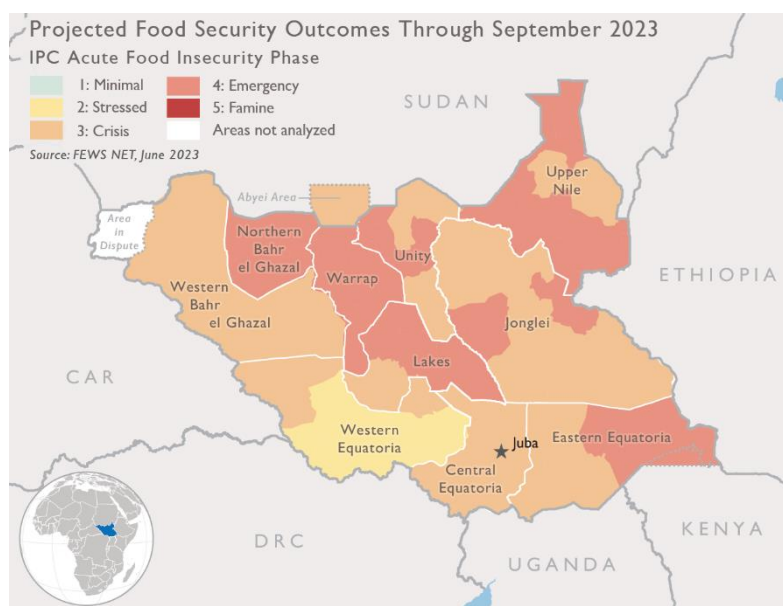
South Sudan – Complex Emergency

SEPTEMBER 30, 2023

SITUATION AT A GLANCE

12.4 MILLION Population of South Sudan <i>UN – November 2022</i>	9.4 MILLION Number of People in Need of Humanitarian Assistance in 2023 <i>UN – November 2022</i>	7.8 MILLION Number of People Facing Acute Food Insecurity in 2023 Lean Season <i>IPC – November 2022</i>	2.3 MILLION Number of IDPs in South Sudan <i>IOM – August 2023</i>	292,672 Number People Who Have Fled Sudan to South Sudan Since April 16 <i>UN – September 2023</i>
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- Nearly 293,000 people fled into South Sudan from neighboring Sudan between the beginning of Sudan's militarized conflict in mid-April and late September.
- Relief actors documented dramatic increases in acute malnutrition prevalence among South Sudanese returnee children and PLW between May and August.
- South Sudan has the highest proportion of people experiencing Emergency—IPC 4—levels of acute food insecurity worldwide, relief actors report.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING

For the South Sudan Response in FY 2023

USAID/BHA¹ \$513,726,849

State/PRM² \$116,052,769

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

Total \$629,779,618

¹ USAID's Bureau for Humanitarian Assistance (USAID/BHA)

² U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

KEY DEVELOPMENTS

Nearly 293,000 People Arrive in South Sudan From Sudan Since Mid-April

Nearly 293,000 people fleeing conflict in Sudan arrived in South Sudan between April 16 and September 30, according to the International Organization for Migration (IOM) and the Office of the UN High Commissioner for Refugees (UNHCR). Approximately 91 percent of the new arrivals during the period were South Sudanese refugee returnees while 7 percent were Sudanese refugees—most of whom fled Sudan’s capital city of Khartoum—and the remaining 2 percent were third-country nationals, the UN reports. Routes into South Sudan are increasingly difficult to travel due to insecurity and adverse weather conditions as the May-to-November rainy season persists. In addition, new arrivals have reported experiencing extortion, harassment, and restrictions on their movement, preventing safe passage to border points in Unity and Upper Nile states and Abyei Administrative Area, a contested area along the South Sudan–Sudan border. Armed actors have also committed acts of gender-based violence (GBV) against women and girls fleeing Sudan, including populations seeking refuge in South Sudan, according to the UN.

Approximately 80 percent of new arrivals entered South Sudan through Upper Nile’s Joda point of entry, exacerbating overcrowded conditions at transit centers with limited onward transportation opportunities. Onward transport of new arrivals from Upper Nile’s Renk transit center—the closest transit center to Joda—to Upper Nile’s Malakal County resumed in early September following a brief pause due to funding constraints. However, movements remained slow due to heavy rains and resultant flooding, which restricted movements, and limited availability of funding for onward transportation. As a result, shelters remained overcrowded and continued to lack adequate water, sanitation, and hygiene (WASH) facilities to support the population as of late September, contributing to worsening health conditions and posing greater risks for disease transmission among the displaced population. IOM and UNHCR plan to facilitate the onward transportation of an estimated 69,000 returnees between September and December, prioritizing vulnerable individuals and their family members. New arrivals report onward transportation assistance as one of their most urgent needs, in addition to emergency relief commodities, food, health, protection, shelter, and WASH assistance, according to the UN. Relief actors anticipate the influx of new arrivals will continue through the year and into 2024 if the militarized conflict in Sudan persists.

Acute Malnutrition Increases Among Returnee Children and Pregnant and Lactating Women Between May and August

Health actors diagnosed nearly 5,400 children ages five years and younger with severe acute malnutrition (SAM) in Northern Bahr el Ghazal, Unity, Upper Nile, and Warrap states during August, a significant increase from the estimated 960 children diagnosed with SAM in these areas in May, according to the South Sudan Nutrition Cluster.³ The cluster also reported an increase in moderate acute malnutrition (MAM) among children younger than five years of age and pregnant and lactating women (PLW) across the four states with the number of cases rising from more than 360 among children and 450 among PLW in May to nearly 3,100 among children and more than 2,700 among PLW during August. Approximately 40 percent of children identified with SAM reportedly did not receive treatment or a referral for their condition, most likely due to families having moved for onward transportation, according to the cluster. As the conflict in Sudan persists and compels more refugees and returnees to flee to South Sudan, increased demands on humanitarian service providers and local resources may exacerbate tensions across the country, according to USAID/BHA analysis.

³ The Nutrition Cluster is the coordinating body for humanitarian nutrition activities, comprising UN agencies, nongovernmental organizations (NGOs), and other stakeholders.

Populations in South Sudan Record the Highest Prevalence of Acute Food Insecurity Worldwide

South Sudan has the greatest proportion of its population experiencing Emergency—IPC 4—levels of acute food insecurity compared to other countries facing acute food crises, according to the 2023 Global Report on Food Crises' Mid-Year Update, a mid-September analysis conducted by 16 international relief actors, including USAID/BHA partners.⁴ Conflict and economic shocks continue to contribute to acute food insecurity in South Sudan. In addition, heightened conflict in Sudan since mid-April has disrupted supply chains in South Sudan, increasing the price of food and other relief commodities in northern areas of the country by up to 80 percent and diminishing household purchasing power, the UN reports. According to recent IPC analyses, an estimated 63 percent of South Sudan's population likely experienced Crisis—IPC 3—or worse outcomes of acute food insecurity between April and July. Approximately 23 percent of this population likely faced Emergency levels of acute food insecurity, while an estimated 43,000 people in Jonglei and Unity states likely experienced Catastrophe—IPC 5—outcomes during the same period. While this analysis represents an approximately 50 percent reduction in the population size facing Catastrophe conditions compared to the same period during 2022, it remains indicative of dire food assistance needs across the country. Humanitarian actors attribute the reduction in Catastrophe levels to increased rainfall, resulting in better harvests, and the scale-up of humanitarian assistance to address needs of these vulnerable populations. With USAID/BHA and State/PRM support, the UN World Food Program (WFP) had prepositioned more than 90,900 metric tons (MT) of food across South Sudan by August 31 to respond to needs during the rainy season.

USG Partner UNICEF Temporarily Pauses Transport of Commodities Following Attacks on Two Trucks in Central Equatoria

Unidentified armed actors attacked and destroyed two UN Children's Fund (UNICEF)-contracted trucks along the road between South Sudan's capital city of Juba Central Equatoria State's Yei County on September 23, resulting in the death of two drivers and injury to another, according to the UN agency. The drivers and trucks were returning to Juba after delivering humanitarian commodities in Central Equatoria State's Yei County at the time of the attack. UNICEF publicly condemned the incident and temporarily paused movement of supplies in the Yei area on September 23. UNICEF South Sudan Representative Hamida Lasseko also called on the Revitalized Transitional Government of National Unity to increase security on the road and hold the perpetrators accountable. UNICEF is coordinating with the humanitarian community and South Sudanese authorities to ensure the security of their personnel and enable the safe distribution of life-saving health, nutrition, and WASH supplies.

⁴ The Integrated Food Security Phase Classification (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. IPC Phase 5 is referred to as "Catastrophe" when classifying a household and "Famine" when classifying an area. Famine conditions occur when at least 20 percent of the population in a given area face an extreme lack of food; the Global Acute Malnutrition prevalence, measured by weight-for-height z-score, exceeds 30 percent; and the mortality rate exceeds two people per 10,000 individuals per day.

KEY FIGURES



2.5 Million

People reached with food assistance by USG partner WFP during August



438,000

People reached with primary health care services in August by USG partner UNICEF



127,000

Number of crisis-affected persons receiving safe drinking water from UNICEF during August

U.S. GOVERNMENT RESPONSE

FOOD SECURITY

USAID/BHA supports multiple UN agencies and nongovernmental organizations (NGOs) to bolster early recovery, food security, and livelihood efforts in South Sudan. USAID/BHA partners provide emergency food assistance—including cash transfers for food, regionally and internationally procured commodities, and U.S. in-kind food assistance—to food-insecure households across the country. USAID/BHA continues to support WFP to sustain emergency food assistance as food needs increase in heavily affected areas of South Sudan while USAID/BHA and State/PRM NGO partners provide agricultural inputs, fishing kits, and livelihood training to support at-risk populations. Through USG support, WFP provided nearly 19,000 MT of in-kind food and more than \$6 million in cash assistance to an estimated 2.5 million people during August. WFP also provided nearly 129,000 PLW and children ages 6–59 months experiencing wasting—the deadliest form of malnutrition—with specialized treatment.

HEALTH

USG partners continue to provide health support in South Sudan through community health facilities and mobile medical units (MMUs), which provide a range of maternal, mental, and primary health care services. South Sudan has the highest rate of maternal mortality in the world, and MMUs provide life-saving maternal and newborn health care services to reduce the prevalence of maternal and infant deaths. USAID/BHA also supports integrated community case management services in South Sudan, which deliver life-saving health interventions for common childhood illnesses, particularly in areas with limited access to facility-based services.

To mitigate the effects of infectious disease outbreaks in South Sudan, USAID/BHA and State/PRM partners continue to assist in training local health care workers in infection prevention and control methods, provide support for vaccination campaigns, and strengthen community health coordination. Additionally, State/PRM supports UNHCR and NGOs to address the health care needs of refugees and refugee returnees while USAID/BHA support addresses health care needs for IDPs and other vulnerable populations. Health interventions are integrated with nutrition and WASH services wherever possible to promote a comprehensive system of clinical services.

WASH

USAID/BHA and State/PRM support partners implementing critical WASH programs, including activities to provide access to safe drinking water, handwashing facilities, sanitation services, and solid waste disposal. Additional WASH programming includes interventions to help prevent cholera outbreaks among vulnerable populations and to mitigate the risk of GBV by providing safe access to latrines, sanitation services, and other

WASH facilities. Additionally, USAID/BHA and State/PRM continue to support efforts by UN and NGO partners to respond to recent flooding throughout South Sudan by rehabilitating WASH infrastructure and providing WASH supplies to flood-affected populations. USAID/BHA also supports hygiene promotion activities through public health campaigns and the distribution of essential supplies, such as dignity and hygiene kits, soap, and water containers.



16

Number of USG partners implementing critical protection interventions

PROTECTION

USAID/BHA and State/PRM support multi-sector protection interventions that ensure the safety and dignity of vulnerable people in South Sudan. Protection activities include assistance to GBV survivors through case management, mobile emergency response teams, psychosocial support services, child protection, and referrals to health specialists, as well as assessments to integrate protection into multi-sector emergency response activities. State/PRM partners also provide protection services to conflict-affected communities, IDPs, and refugees countrywide, including family reunification interventions, GBV prevention and response programs, legal assistance, disability inclusion, and mental health and psychosocial support activities. USAID/BHA and State/PRM also support coordination and capacity-building among protection actors in South Sudan.



2,137

MT of humanitarian cargo transported by the Logistics Cluster in South Sudan during April–June with USG support

LOGISTICS

USAID/BHA and State/PRM provide countrywide support to the humanitarian response through the WFP-managed UN Humanitarian Air Service (UNHAS) and the Logistics Cluster, the coordinating body for humanitarian logistics, comprising UN agencies, NGOs, and other stakeholders. UNHAS provides air transportation to relief actors throughout the country, while the Logistics Cluster provides coordination and information management services for humanitarian workers, delivery and common warehousing of essential relief commodities, and geographical information system mapping. Additionally, USG partner IOM supports humanitarian partner responses across South Sudan by procuring, storing, and transporting critical relief supplies, including emergency shelter and WASH commodities.



29,700

Children ages 6–59 months treated for SAM in August by USG partner UNICEF

NUTRITION

USAID/BHA supports partners to prevent and treat wasting—the deadliest form of malnutrition—across South Sudan. USAID/BHA supports NGOs, UNICEF, and WFP to provide nutrition assistance—including specialized food products to treat wasting—to children and PLW countrywide; and State/PRM supports UNICEF’s nutrition efforts for refugee and refugee returnee populations fleeing Sudan. Using a community-based approach, USAID/BHA and State/PRM partners promote recommended infant and young child feeding practices through one-on-one counseling and group education to manage wasting.

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 disease, famine, and fighting 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 South Sudan—the country's pre-2018 governing body—in the capital city of Juba and quickly spread into a protracted national conflict, generating displacement and exacerbating humanitarian needs. On December 20, 2013, USAID activated a Disaster Assistance Response Team (DART) to lead the U.S. Government (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 USAID/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 humanitarian needs of the South Sudanese people.
- On October 5, 2022, U.S. Ambassador Michael J. Adler reissued a declaration of humanitarian need in South Sudan for Fiscal Year (FY) 2023 due to inflation, ongoing conflict, population displacement, restricted humanitarian access, and severe flooding, all of which have significantly exacerbated food insecurity and humanitarian needs.

USG HUMANITARIAN FUNDING FOR SOUTH SUDAN RESPONSE IN FY 2023^{1,2,3}

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/BHA			
ACTED	Disaster Risk Reduction Policy and Practice; Humanitarian Coordination, Information Management, and Assessments (HCIMA); Multipurpose Cash Assistance (MPCA); Protection; Shelter and Settlements; WASH	Countrywide	\$3,600,000
Action Against Hunger/USA (AAH/USA)	Agriculture, Health, HCIMA, Nutrition, Protection, WASH	Countrywide	\$7,500,000
Catholic Relief Services (CRS)	Agriculture, Food Assistance, Nutrition, Protection, WASH	Eastern Equatoria, Jonglei	\$19,706,056
DRC	Economic Recovery and Market Systems (ERMS), HCIMA, Protection, Shelter and Settlements	Countrywide	\$5,000,000
Interchurch Medical Assistance (IMA)	Health, Nutrition, WASH	Jonglei	\$2,100,000
International Medical Corps (IMC)	Health, Nutrition, Protection	Central Equatoria, Greater Pibor Administrative Area (GPAA), Jonglei, Upper Nile	\$8,200,000
International Rescue Committee (IRC)	ERMS, Health, Nutrition, Protection	Central Equatoria, GPAA, Northern Bahr el Ghazal, Unity	\$6,200,000

IOM	Agriculture, HCIMA, Health, Logistics Support, MPCA, Nutrition, Protection, Shelter and Settlements, WASH	Abyei, Central Equatoria, Eastern Equatoria, Jonglei, Lakes, Northern Bahr el Ghazal, Upper Nile, Unity, Warrap, Western Bahr el Ghazal, Western Equatoria	\$21,100,000
Medair	Health, Nutrition, Protection, WASH	GPAA, Unity, Upper Nile	\$7,700,000
Mercy Corps	WASH	Unity	\$184,716
Nonviolent Peaceforce	Protection	Central Equatoria, Jonglei, Unity, Warrap	\$4,000,000
Norwegian Refugee Council (NRC)	Agriculture, Food Assistance, HCIMA, Protection, WASH	Countrywide	\$14,451,438
Relief International	Health, Nutrition, Protection, Shelter and Settlements, WASH	Upper Nile	\$6,597,720
Save the Children Federation (SCF)	HCIMA, Health, MPCA, Nutrition, Protection, WASH	Jonglei	\$5,200,000
Tearfund	Agriculture, Health, Nutrition, Protection, WASH	Central Equatoria, GPAA, Jonglei	\$5,341,652
UNICEF	Food Assistance—Local, Regional, and International Procurement (LRIP); Nutrition; Protection	Countrywide	\$23,500,000
UN Food and Agriculture Organization (FAO)	Agriculture	Countrywide	\$6,500,000
UN Office for the Coordination of Humanitarian Affairs (OCHA)	HCIMA	Countrywide	\$1,500,000
UN World Health Organization (WHO)	Health, Nutrition, WASH	Central Equatoria, Eastern Equatoria, GPAA, Jonglei, Northern Bahr el Ghazal, Unity, Upper Nile, Warrap, Western Equatoria	\$5,000,000
Vétérinaires Sans Frontières/Germany (VSF/G)	Agriculture	GPAA, Jonglei, Unity, Upper Nile	\$1,906,213
WFP	Food Assistance—Cash Transfer for Food, LRIP, Logistics Support, Nutrition	Countrywide	\$200,000,000
	Food Assistance—U.S. In-Kind Food Aid, U.S. In-Kind Specialized Nutrition Products	Countrywide	\$140,441,390
World Vision	Agriculture, Food Assistance, HCIMA, Health, Protection, WASH	Countrywide	\$12,636,790
World Relief International (WRI)	Agriculture, Health, Nutrition, WASH	Jonglei, Unity, Upper Nile	\$5,000,000
	Logistics Support		\$268,348
	Program Support		\$92,526
TOTAL USAID/BHA FUNDING			\$513,726,849
STATE/PRM⁴			
ACTED	Protection, WASH	Upper Nile	\$2,800,000
African International Action (AHA)	Health, Protection	Unity	\$1,975,059
Implementing Partner	Multi-Sector Assistance	Countrywide	\$23,600,000
Internews Network	Protection	Unity, Upper Nile	\$145,000
IRC	Food Assistance, Health, Protection, WASH	Unity	\$2,900,000
IOM	Multi-Sector Assistance	Countrywide	\$11,800,000
Jesuit Refugee Service USA (JRS)	Education, Protection	Upper Nile	\$1,900,063
The Lutheran World Federation (LWF)	Education, Protection	Unity, Upper Nile	\$2,250,000
The Mentor Initiative	Health	Unity, Upper Nile	\$1,229,750
Relief International	Health	Upper Nile	\$4,767,897

SCF	Protection	Upper Nile	\$2,500,000
UN Population Fund (UNFPA)	Multi-Sector Assistance	Countrywide	\$500,000
UNHCR	Multi-Sector Assistance	Countrywide	\$57,000,000
UNICEF	Multi-Sector Assistance	Countrywide	\$1,300,000
WFP	Logistics Support	Countrywide	\$1,295,000
TOTAL STATE/PRM FUNDING			\$116,052,769
TOTAL USG FUNDING FOR THE SOUTH SUDAN RESPONSE IN FY 2023			\$629,779,618

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 30, 2023.

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ USAID/BHA and State/PRM funding in South Sudan benefitting displaced people from Sudan is also reported in the USG Sudan Complex Emergency Fact Sheet.

⁴ State/PRM funding does not include the more than \$86 million in FY 2023 USG funding for South Sudanese refugees in neighboring countries. This increases total USG emergency funding for the South Sudan crisis in FY 2023 to more than \$716 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.
- 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
 - Information on relief activities of the humanitarian community can be found at reliefweb.int.

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