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Overview

The acute food insecurity in South Sudan remains worrying with the latest data showing that 5.83 million people (46.3 percentage of the population) are experiencing high levels of acute food insecurity classified as IPC Phase 3 or above (Crisis or worse). An estimated 35,000 people are in IPC Phase 5 (Catastrophe) in the Duk (3,000) and Nyirol (3,000) counties of Jonglei State; and the Rubkona County (15,000) of Unity State, while 14,000 South Sudanese returnees who fled the ongoing conflict in Sudan are also classified in IPC Phase 5 (Catastrophe). A further 1.64 million people are in IPC Phase 4 (Emergency).

The most food insecure states between September and November 2023 with more than 50 percent of their populations facing IPC Phase 3 or above (Crisis or worse) are Jonglei State (61.3 percent), Unity State (57.9 percent), Upper Nile State (56.1 percent) and Lakes State (52.8 percent).

In the first projection period of December 2023 to March 2024 (harvest/post-harvest season), the situation is projected to improve marginally as a result of seasonal availability of harvets. An estimated 5.79 million people (45.8 percent of the population) are projected to face IPC Phase 3 or above (Crisis or worse), including 25,000 people likely to be in IPC Phase 5 (Catastrophe) and 1.71 million people likely to be in Phase 4.

In the lean season projection period of April to July 2024, the food security situation will deteriorate and an estimated 7.1 million people (56.3 percent of the population) will be severely food insecure (IPC Phase 3 or above). 79,000 people are likely to be in IPC Phase 5 (Catastrophe) while an estimated 2.34 million people are likely to be in Phase 4 (Emergency).

The most food insecure populations are in locations that have been significantly affected by frequent climate-related shocks (flooding and dry spells), the economic crisis (currency depreciation and high food prices), conflict and insecurity – including the spillover effects of the conflict in Sudan – causing forced displacement, low agricultural production and a reduction in humanitarian assistance.

Between July 2023 and June 2024, an estimated 1.65 million children between 6-59 months are expected to suffer acute malnutrition including 480,000 million children expected to suffer Severe Acute Malnutrition (SAM) and 1.17 million expected to suffer Moderate Acute Malnutrition (MAM). 870,000 pregnant or breastfeeding women are expected to suffer acute malnutrition in this period. An estimated 72 percent of the acute malnutrition burden is concentrated in the five states of Jonglei, Northern Bahr el Ghazal, Upper Nile, Unity and Warrap.

As for the severity of the situation, between July and September 2023, 46 counties are classified in IPC AMN Phase 4 (Critical), 15 counties in IPC AMN Phase 3 (Serious), 10 counties in IPC AMN Phase 2 (Alert) and 9 in IPC AMN Phase 1 (Acceptable). During the post-harvest period of October 2023 to March 2024, the AMN situation is expected to remain the same. Deterioration in 66 counties is expected during the lean season period of April to June 2024.

Publication date: November 6, 2023, \*IPC population data is based on population estimates by South Sudan's National Bureau of Statistics. Disclaimer: The information shown on this map does not imply official recognition or endorsement of any physical and political boundaries.



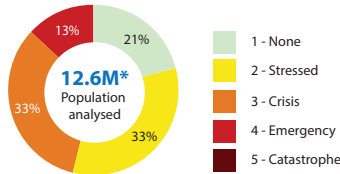
Current Acute Food Insecurity Situation | September - November 2023



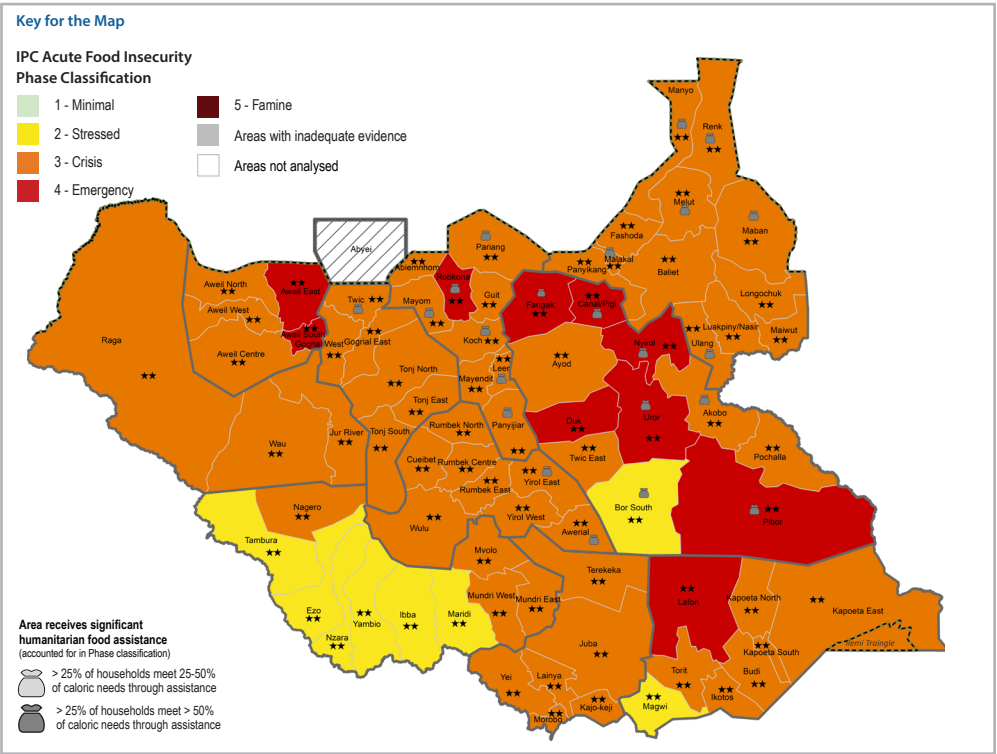
5.83 M

Over 5.8 million people in South Sudan are experiencing high levels of acute food insecurity (IPC Phase 3 or above) between September and November 2023.

46% of the analysed population of 12.6 million are experiencing high levels of acute food insecurity (IPC Phase 3 or above) between September and November 2023.



Current Acute Food Insecurity Situation | September - November 2023



Key Drivers of Acute Food Insecurity



Economic decline

South Sudan's economy is experiencing a macroeconomic crisis caused by the depreciation of the local currency and high food prices.



Conflict and insecurity

The spillover effects of the conflict in Sudan as well as subnational and localized conflict are disrupting livelihoods and forcing the displacement of people. Multi-sectoral humanitarian assistance delivery is severely hampered by ongoing conflict.



Low agricultural production

Drier-than-average conditions and severe rainfall deficits in South Sudan negatively impact agricultural production, resulting in high humanitarian needs.



Climatic shocks

The country is highly prone to natural disasters, particularly floods and dry spells that affect agriculture, disrupt livelihoods and hamper humanitarian access.

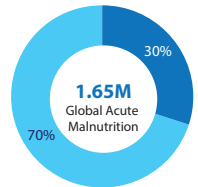


Acute Malnutrition Situation | July 2023 - June 2024

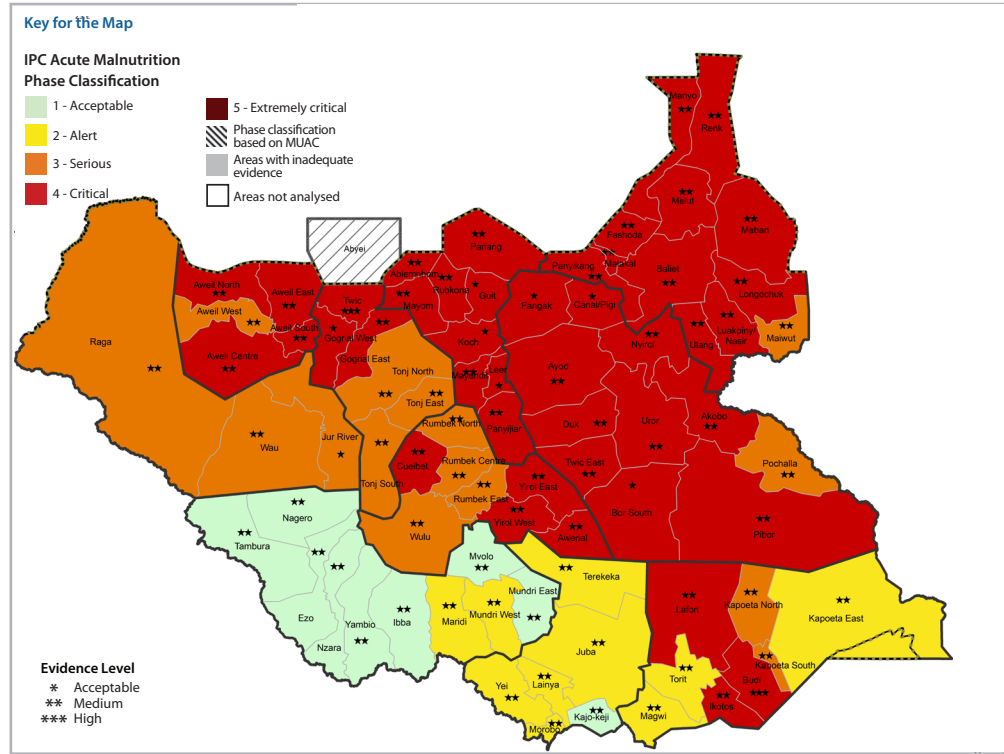


1.65M

About 1.65 million children under the age of five in South Sudan will likely suffer from acute malnutrition through June 2024 and will need treatment. Of these, nearly 480,000 children and 870,000 pregnant or breastfeeding women are likely acutely malnourished.



Current Acute Malnutrition Situation | July - September 2023



Contributing Factors for Acute Malnutrition



Diseases

A high prevalence of diseases such as diarrhoea, malaria/fever and respiratory illnesses occur with 50 out of 80 counties reported illness greater than 50 percent among children.



Poor childcare practices

All Infant and Young child feeding (IYCF) indicators remain suboptimal at national level with only 5 children out of 100 are getting the recommended quality and frequency of food required for optimal growth.



Poor water, sanitation & hygiene

Poor access to improved drinking water and sanitation compromises hygiene practices and increases the risk of high incidences of illness among children.

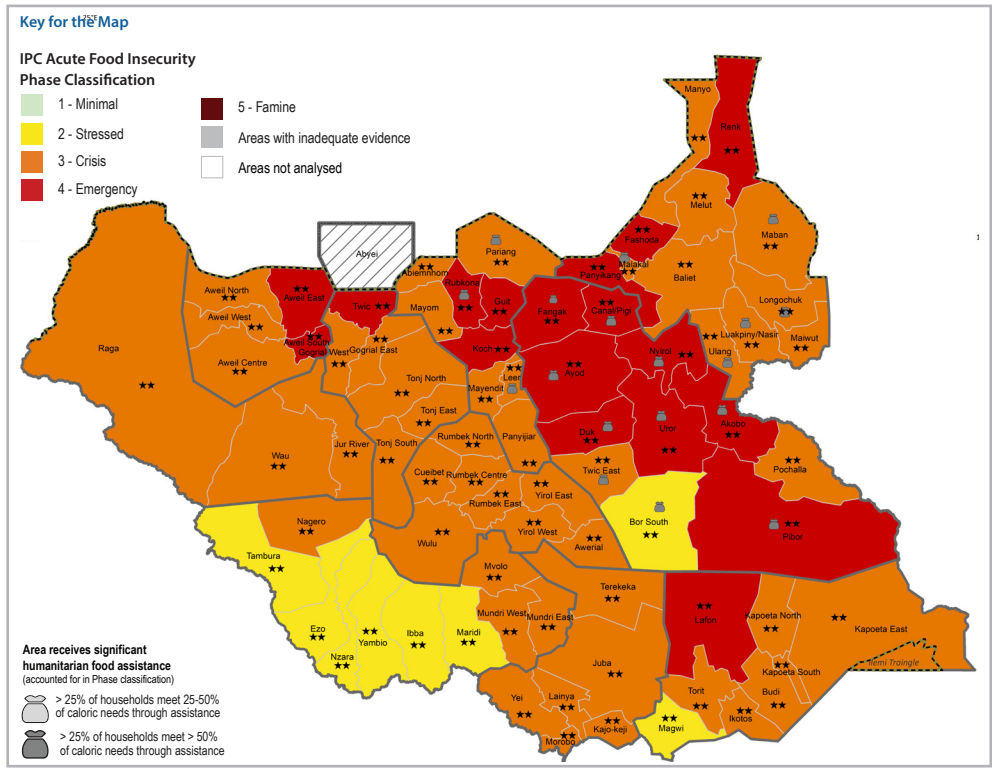


Insufficient health services

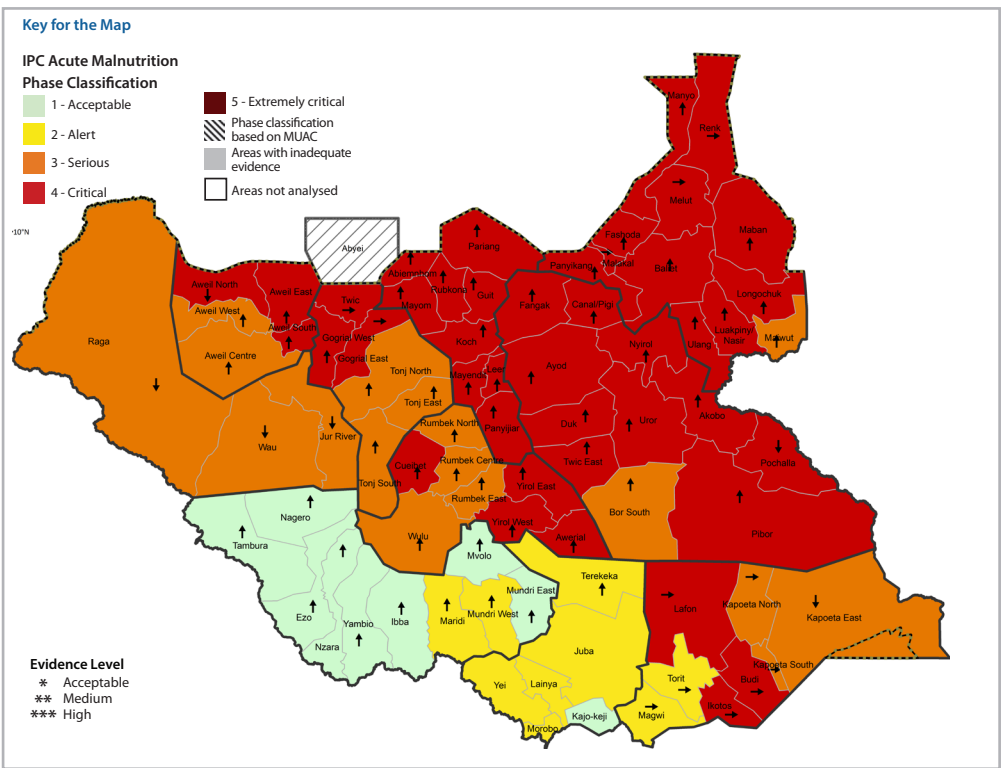
Stock-out of essential supplies for management of acute malnutrition and sub-optimal coverage of health and nutrition programs.



Projected Acute Food Insecurity Situation | December - March 2024



Projected Acute Malnutrition Situation | October 2023 - March 2024



Recommended Actions



Lifesaving humanitarian response

Humanitarian food assistance must be scaled up immediately to save lives and prevent a total collapse of livelihoods in locations where populations were classified in IPC Phase 5 (Catastrophe) and IPC Phase 4 (Emergency) acute food insecurity.



Promote de-escalation of violence and facilitate response

Continue implementing the peace agreement and addressing the root causes of insecurity and conflict in the affected locations across the country.



Scale up nutrition interventions

Ensure that existing prevention and treatment programs are sustained. Prevention and treatment program coverage is to be prioritized in counties where acute malnutrition is at IPC AMN Phase 4 (Critical) and IPC AMN Phase 5 (Extremely Critical) levels.

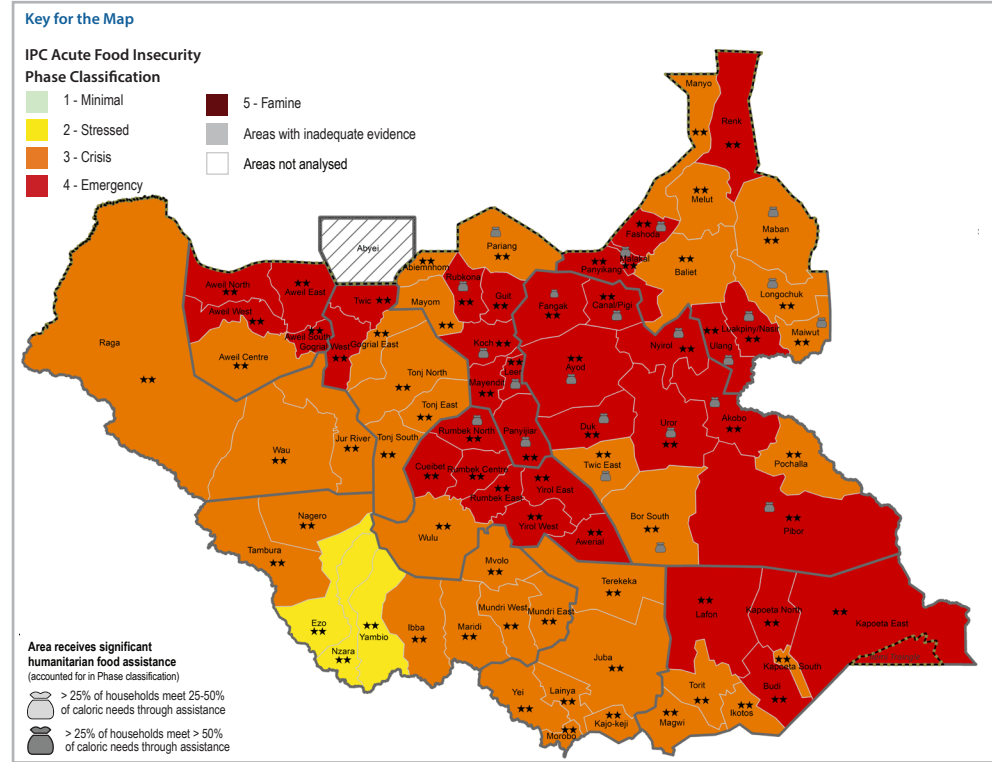


Livelihood support

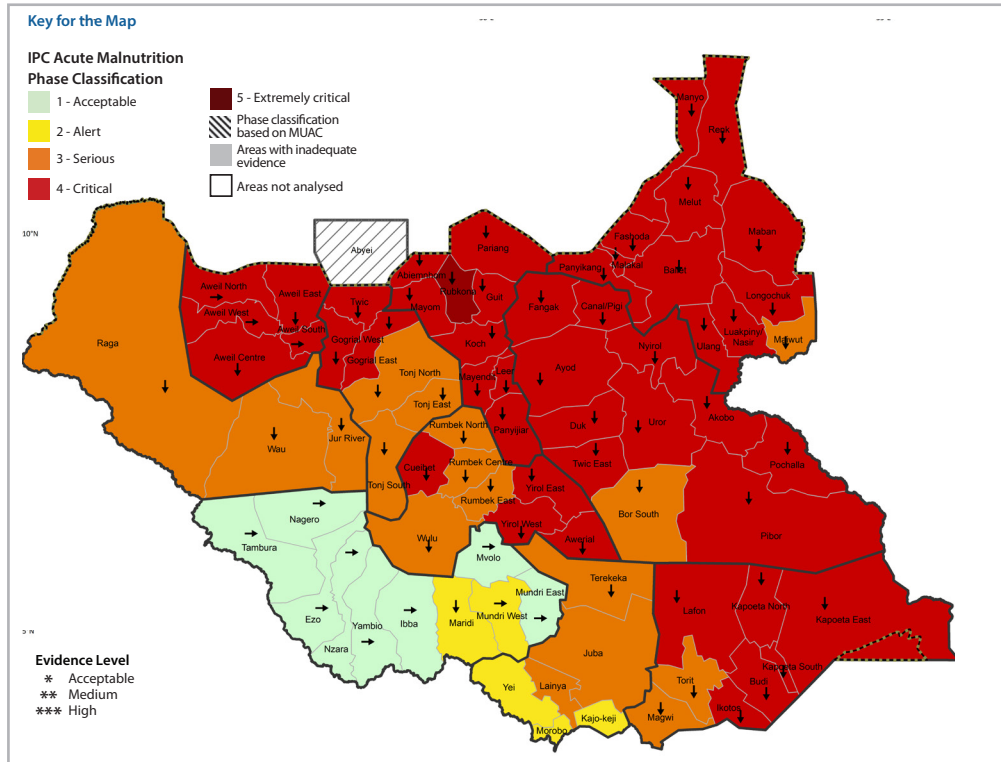
Provide livelihood support such as seeds and tools (farm inputs) to support production and return it back to surplus levels, as well as support farmers to adapt to the climate-induced environmental changes by training them on climate-smart agricultural practices and distributing flood/drought resistant crop varieties.



Projected Acute Food Insecurity Situation | April - July 2024



Projected Acute Malnutrition Situation | April - June 2024



Acute Food Insecurity Phase name and description

Phase 1 None/Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe/ Famine
Households are able to meet essential food and non-food needs without engaging in atypical and unsustainable strategies to access food and income.	Households have minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in stress-coping strategies.	Households either: • have food consumption gaps that are reflected by high or above-usual acute malnutrition; <b>or</b> • are marginally able to meet minimum food needs but only by depleting essential livelihood assets or through crisis-coping strategies.	Households either: • have large food consumption gaps that are reflected in very high acute malnutrition and excess mortality; <b>or</b> • are able to mitigate large food consumption gaps but only by employing emergency livelihood strategies and asset liquidation	Households have an extreme lack of food and/or other basic needs even after full employment of coping strategies. Starvation, death, destitution and extremely critical acute malnutrition levels are evident.  For famine classification, area needs to have extreme critical levels of acute malnutrition and mortality.)

Acute Malnutrition Phase name and description

Phase 1 Acceptable	Phase 2 Alert	Phase 3 Serious	Phase 4 Critical	Phase 5 Extremely Critical
Less than 5% of children are acutely malnourished.	5–9.9% of children are acutely malnourished.	10–14.9% of children are acutely malnourished.	15–29.9% of children are acutely malnourished. The mortality and morbidity levels are elevated or increasing. Individual food consumption is likely to be compromised.	30% or more children are acutely malnourished. Widespread morbidity and/or very large individual food consumption gaps are likely evident.