

# South Sudan

The food insecurity levels will remain elevated due to insecurity, the effects of COVID-19, persistent poor macroeconomic conditions, and the impact of flooding on livelihoods.

## IPC ACUTE FOOD INSECURITY & ACUTE MALNUTRITION ANALYSIS

October 2020 – JULY 2021

Issued: 18 December 2020

ACUTE FOOD INSECURITY								
CURRENT (OCTOBER-NOVEMBER 2020)			PROJECTED (DECEMBER 2020 - MARCH 2021)			PROJECTED (APRIL - JULY 2021)		
<b>6.35M</b> (52.6% of the population) People facing severe acute food insecurity (IPC Phase 3+) IN NEED OF URGENT ACTION	Phase 5	24 000 People in Catastrophe	<b>5.82M</b> (48.3% of the population) People who will be facing severe acute food insecurity (IPC Phase 3+) IN NEED OF URGENT ACTION	Phase 5	11 000 People in Catastrophe	<b>7.24M</b> (60% of the population) People who will be facing severe acute food insecurity (IPC Phase 3+) IN NEED OF URGENT ACTION	Phase 5	31 000 People in Catastrophe
	Phase 4	2 102 000 People in Emergency		Phase 4	1 785 000 People in Emergency		Phase 4	2 467 000 People in Emergency
	Phase 3	4 222 000 People in Crisis		Phase 3	4 024 000 People in Crisis		Phase 3	4 743 000 People in Crisis
	Phase 2	3 602 000 People in Stress		Phase 2	3 873 000 People in Stress		Phase 2	3 144 000 People in Stress
	Phase 1	2 110 000 People minimally food insecure		Phase 1	2 368 000 People minimally food insecure		Phase 1	1 675 000 People minimally food insecure

ACUTE MALNUTRITION		JANUARY – DECEMBER 2020	
<div></div> <div>1,392,259</div> <div>Number of 6-59 months old children acutely malnourished</div> <div>IN NEED OF TREATMENT</div>	<div></div> <div>313,391</div> <div>SAM*</div> <div>Number of cases</div>	<div></div> <div>483,382</div> <div>Pregnant or lactating women acutely malnourished</div> <div>IN NEED OF TREATMENT</div>	<div></div> <div>1,078,867</div> <div>MAM*</div> <div>Number of cases</div>

\* Severe and Moderate Acute Malnutrition

**How Severe, How Many and When** – In the current analysis period of October to November 2020, an estimated 6.35 million people (52.6% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 2.102 million people faced Emergency (IPC Phase 4) acute food insecurity. **An estimated 24,000 people were classified in Catastrophe<sup>1</sup> (IPC Phase 5) acute food insecurity, in Pibor County (11,000) in Pibor Administration Area, and in Tonj North County (13,000) in Warrap State.** The most food insecure states are Jonglei, Unity, Upper Nile, Lakes, Warrap and Northern Bahr el Ghazal where more than 50% of their respective populations are facing Crisis (IPC Phase 3) or worse acute food insecurity.

In the first projection period of **December 2020 to March 2021**, an estimated **5.82 million people (48.3% of the population)** will likely face Crisis (IPC Phase 3) or worse acute food insecurity, with **11,000 people likely to be in Catastrophe (IPC Phase 5) acute food insecurity in Pibor County in Pibor Administrative Area.** During this period, an estimated 1.79 million people are likely to face Emergency (IPC Phase 4) acute food insecurity.

In the second projection period of **April to July 2021**, an estimated **7.24 million people (60% of the population)** are likely to face Crisis (IPC Phase 3) or worse acute food insecurity, with **31,000 people likely to be in Catastrophe (IPC Phase 5) acute food insecurity in Akobo County (11,000) in Jonglei State, Aweil South County (7,000) in Northern Bahr el Ghazal State, and Tonj North County (13,000) in Warrap State.** During this period, an estimated 2.47 million are likely to be in Emergency (IPC Phase 4) acute food insecurity.

<sup>1</sup> Contrary to this release by the South Sudan IPC Technical Working Group, on 11 December 2020, the IPC Global Support Unit released a Real Time Quality Review (RTQR) report indicating a likelihood of populations in Catastrophe (IPC Phase 5) acute food insecurity in Akobo, Aweil South, Tonj East, Tonj North and Tonj South, as well as a Famine Review Committee (FRC) report indicating that some Payams in Pibor are classified as Famine Likely.



Immediate scale-up of multi-sectoral humanitarian assistance is needed to save lives and avert total collapse of livelihoods in the affected counties, particularly those with populations in Catastrophe (IPC Phase 5) and Emergency (IPC Phase 4). Furthermore, urgent action is required for populations in Crisis (IPC Phase 3) to protect livelihoods and reduce food consumption gaps.

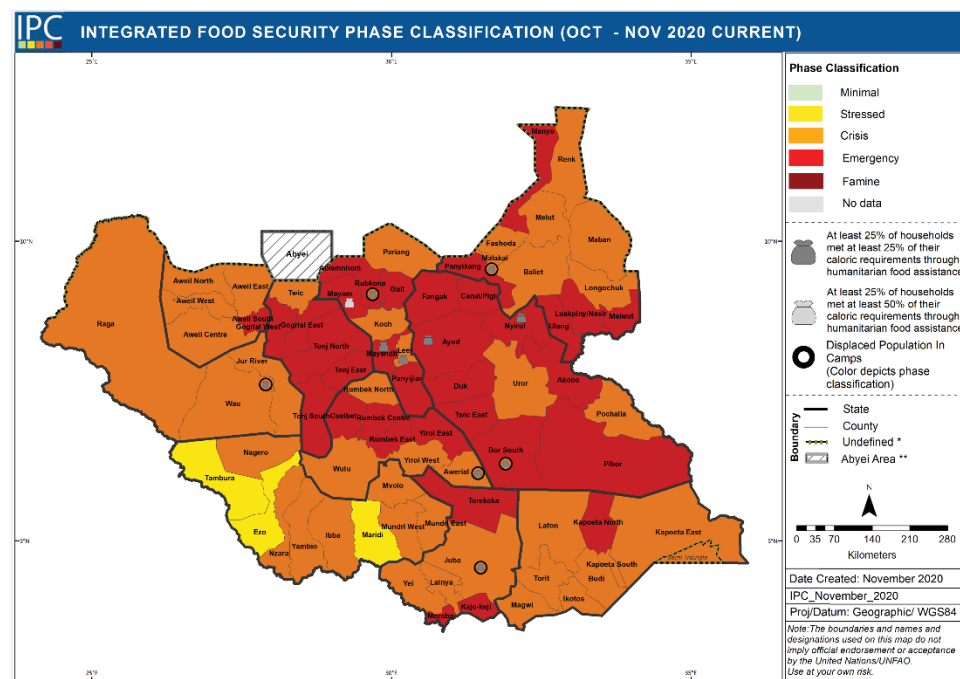
**Where – The most severe acute food insecurity conditions are in counties where chronic vulnerabilities have been exacerbated by a combination of shocks, including floods, insecurity incidents, the macro-economic crisis, and the effects of COVID-19 measures.** Between October and November 2020, 34 counties across the country were classified in Emergency (IPC Phase 4) acute food insecurity. Greater Upper Nile region had 20 counties classified in Emergency (IPC Phase 4) acute food insecurity (i.e. Akobo, Ayod, Bor South, Canal/Pigi, Duk, Fangak, Nyirol, Pibor and Twic East in Jonglei State; Abiemnhom in Ruweng Administrative Area; Guit, Mayendit, Mayom, Panyijiar and Rubkona in Unity State; Luakpiny/Nasir, Maiwut, Manyo, Panyikang and Ulang in Upper Nile State); Greater Bahr el Ghazal region had 10 counties classified in Emergency (IPC Phase 4) acute food insecurity (i.e. Cueibet, Rumbek Center, Rumbek East and Yirol East in Lakes State; Aweil South in Northern Bahr el Ghazal State; Gogrial East, Gogrial West, Tonj East, Tonj North and Tonj South in Warrap State); and Greater Equatoria region had 4 counties classified in Emergency (IPC Phase 4) acute food insecurity (i.e. Kajo Keji, Morobo and Terekeka in Central Equatoria State; and Kapoeta North in Eastern Equatoria State). Of the remaining counties, 51 were classified in Crisis (IPC Phase 3) acute food insecurity, and 12 were classified in Stressed (IPC Phase 2) acute food insecurity. In the first projection period of December 2020 to March 2021, 22 counties are classified in Emergency (IPC Phase 4) acute food insecurity, with the number likely to increase to 33 counties in the second projection period of April to July 2021.

**Why –** The high levels of acute food insecurity in the country are driven by flooding, insecurity, population displacements, declined crop production, diseases and pests, the economic crisis, the effects of COVID-19, limited access to basic services, and the cumulative effects of prolonged years of asset depletion and loss of livelihoods.

The continuing currency depreciation and associated impacts on commodity prices and incomes coupled with the effects of COVID-19 continue to erode the purchasing power of vulnerable households who rely on markets to purchase food and other basic needs. Seasonal scarcity of food, the flooding in 2020 (with limited recovery from the previous floods), and the much lower than required humanitarian food assistance in the face of increased needs, will likely result in an increase of acute food insecurity during the projection periods, especially during the lean season.

### CURRENT IPC ACUTE FOOD INSECURITY SITUATION FOR OCTOBER-NOVEMBER 2020

Figure 1: IPC Acute Food Insecurity Situation Map for October-November 2020



#### What is on the map?

A total of 34 counties were classified in Emergency (IPC Phase 4) acute food insecurity, 41 were classified in Crisis (IPC Phase 3) acute food insecurity, and 3 were classified in Stressed (IPC Phase 2) acute food insecurity.

#### What is in the population table?

With the current levels of HFA (Humanitarian Food Assistance), 0.2% of the population (about 24,000 people) were in IPC Phase 5 (Catastrophe) acute food insecurity in Pibor County in Pibor Administrative Area, and Tonj North County in Warrap State; 17.4% of the population (about 2.10 million people) were in IPC Phase 4 (Emergency) acute food insecurity; and 35.0% of the population (about 4.22 million people) were in IPC Phase 3 (Crisis) acute food insecurity.

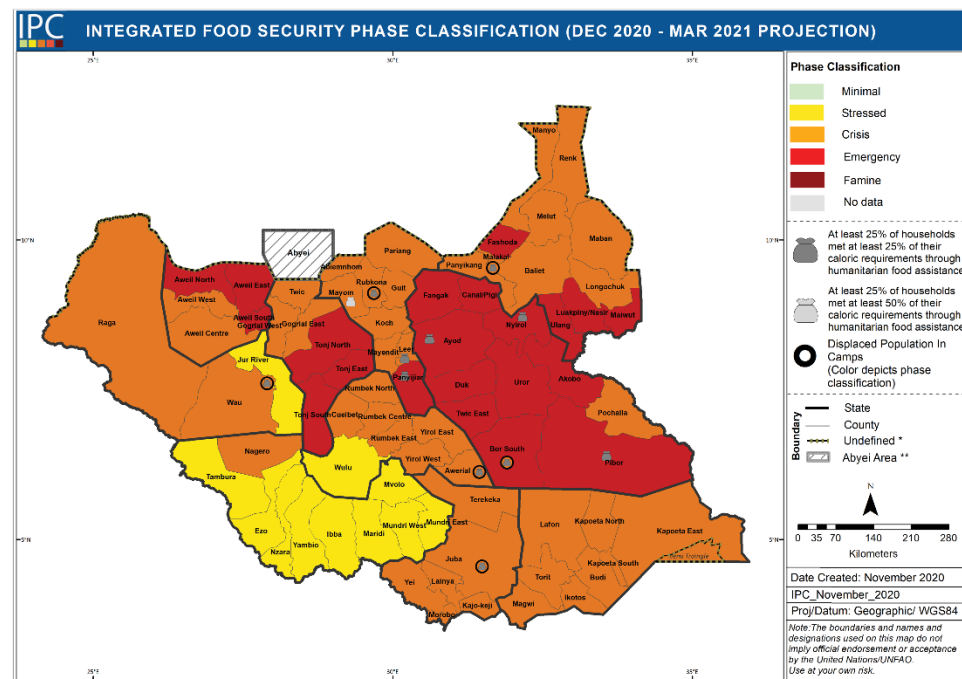
State	Population (NBS)	Minimal	Stressed	Crisis	Emergency	Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe
Central Equatoria	1,507,980	298,000	524,000	480,000	206,000	-	45.5%
Eastern Equatoria	1,097,900	277,000	364,000	348,000	109,000	-	41.6%
Jonglei & Pibor Administrative Area	1,982,222	230,000	369,000	724,000	648,000	11,000	69.8%
Lakes	1,180,247	190,000	334,000	447,000	208,000	-	55.6%
Northern Bahr el Ghazal	912,347	122,000	310,000	330,000	151,000	-	52.7%
Unity & Ruweng Administrative Area	1,096,229	114,000	279,000	500,000	204,000	-	64.2%
Upper Nile	1,459,701	183,000	430,000	612,000	235,000	-	58.0%
Warrap	1,262,489	215,000	349,000	426,000	259,000	13,000	55.3%
Western Bahr el Ghazal	646,729	106,000	273,000	199,000	69,000	-	41.4%
Western Equatoria	914,326	375,000	370,000	156,000	13,000	-	18.5%
<b>Total</b>	<b>12,060,167</b>	<b>2,110,000</b>	<b>3,602,000</b>	<b>4,222,000</b>	<b>2,102,000</b>	<b>24,000</b>	<b>52.6%</b>

Table 1: Estimation of populations for current period: October – November 2020

**Note:** A population in IPC Phase 3 and above does not necessarily reflect the full population in need of urgent action. This is because some households may be in IPC Phase 2 or even in IPC Phase 1, because of humanitarian assistance.

## PROJECTED IPC ACUTE FOOD INSECURITY SITUATION FOR DECEMBER 2020 – MARCH 2021

Figure 2: IPC Acute Food Insecurity Situation Map for December 2020 – March 2021



### What is on the map?

A total of 21 counties are classified in Emergency (IPC Phase 4) acute food insecurity, 46 are classified in Crisis (IPC Phase 3) acute food insecurity, and 11 are classified in Stressed (IPC Phase 2) acute food insecurity.

### What is in the population table?

With the planned levels of HFA, 0.1% of the population (about 11,000 people) will likely be in Catastrophe (IPC Phase 5) acute food insecurity in Pibor County in Pibor Administrative Area; 14.8% of the population (about 1.78 million people) will likely be in Emergency (IPC Phase 4) acute food insecurity; and 33.4% of the population (about 4.02 million people) will likely be in Crisis (IPC Phase 3) acute food insecurity.

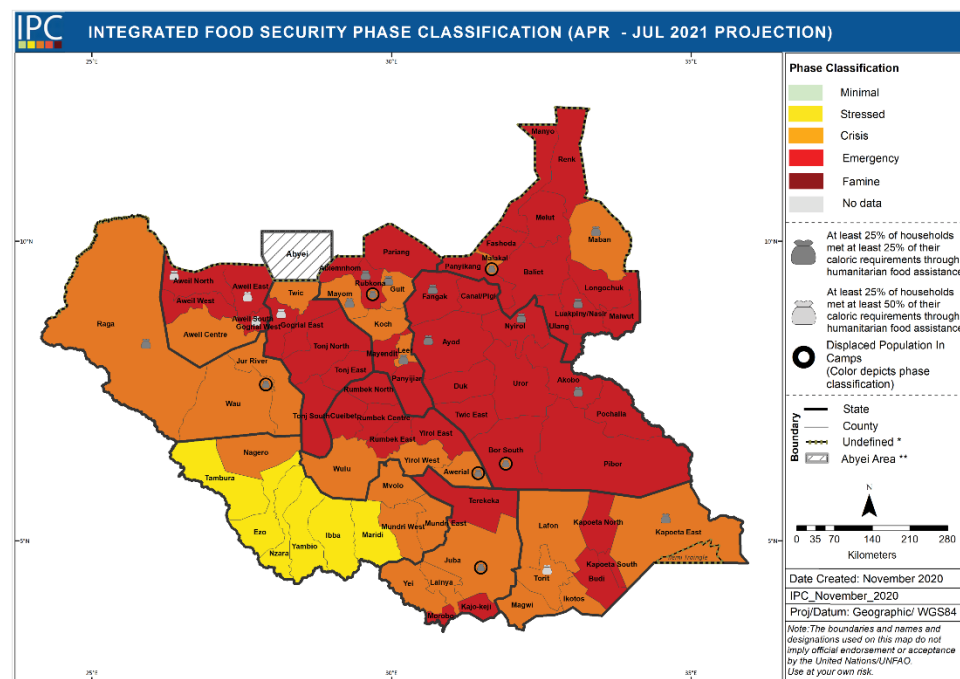
State	Population (NBS)	Minimal	Stressed	Crisis	Emergency	Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe
Central Equatoria	1,507,980	434,000	652,000	355,000	66,000	-	27.9%
Eastern Equatoria	1,097,900	290,000	392,000	341,000	76,000	-	37.9%
Jonglei & Pibor Administrative Area	1,982,222	139,000	291,000	822,000	719,000	11,000	78.3%
Lakes	1,180,247	249,000	434,000	384,000	112,000	-	42.1%
Northern Bahr el Ghazal	912,347	95,000	266,000	372,000	179,000	-	60.4%
Unity & Ruweng Administrative Area	1,096,229	139,000	351,000	466,000	140,000	-	55.3%
Upper Nile	1,459,701	179,000	423,000	634,000	224,000	-	58.8%
Warrap	1,262,489	244,000	372,000	417,000	230,000	-	51.2%
Western Bahr el Ghazal	646,729	154,000	303,000	153,000	37,000	-	29.4%
Western Equatoria	914,326	445,000	389,000	80,000	2,000	-	9.0%
<b>Total</b>	<b>12,060,167</b>	<b>2,368,000</b>	<b>3,873,000</b>	<b>4,024,000</b>	<b>1,785,000</b>	<b>11,000</b>	<b>48.3%</b>

Table 2: Estimation of populations for projected period: December 2020 – March 2021

**Note:** A population in IPC Phase 3 and above does not necessarily reflect the full population in need of urgent action. This is because some households may be in IPC Phase 2 or even in IPC Phase 1, because of humanitarian assistance.

## PROJECTED IPC ACUTE FOOD INSECURITY SITUATION FOR APRIL-JULY 2021

Figure 3: IPC Acute Food Insecurity Situation Map for April-July 2021



### What is on the map?

A total of 45 counties are classified in Emergency (IPC Phase 4), 27 are classified in Crisis (IPC Phase 3) and 6 are classified in Stressed (IPC Phase 2).

### What is in the tables?

With the planned levels of HFA, 0.3% of the population (about 31,000 people) will likely be in Catastrophe (IPC Phase 5) acute food insecurity in Akobo County in Jonglei State, Aweil South County in Northern Bahr el Ghazal State, and Tonj North County in Warrap State; 20.5% of the population (about 2.47 million people) will be in Emergency (IPC Phase 4) acute food insecurity; and 39.3% of the population (about 4.74 million people) will be in Crisis (IPC Phase 3) acute food insecurity.

State	Population (NBS)	Minimal	Stressed	Crisis	Emergency	Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe
Central Equatoria	1,507,980	283,000	446,000	551,000	227,000	-	51.6%
Eastern Equatoria	1,097,900	212,000	379,000	367,000	140,000	-	46.2%
Jonglei & Pibor Administrative Area	1,982,222	61,000	243,000	876,000	792,000	11,000	84.7%
Lakes	1,180,247	162,000	341,000	485,000	192,000	-	57.4%
Northern Bahr el Ghazal	912,347	83,000	194,000	428,000	201,000	7,000	69.7%
Unity & Ruweng Administrative Area	1,096,229	83,000	260,000	547,000	205,000	-	68.7%
Upper Nile	1,459,701	108,000	318,000	688,000	346,000	-	70.8%
Warrap	1,262,489	180,000	308,000	481,000	281,000	13,000	61.4%
Western Bahr el Ghazal	646,729	108,000	259,000	226,000	54,000	-	43.3%
Western Equatoria	914,326	395,000	396,000	94,000	29,000	-	13.5%
<b>Total</b>	<b>12,060,167</b>	<b>1,675,000</b>	<b>3,144,000</b>	<b>4,743,000</b>	<b>2,467,000</b>	<b>31,000</b>	<b>60.0%</b>

Table 4: Estimation of populations for projected period: April-July 2021

**Note:** A population in IPC Phase 3 and above does not necessarily reflect the full population in need of urgent action. This is because some households may be in IPC Phase 2 or even in IPC Phase 1, because of humanitarian assistance.



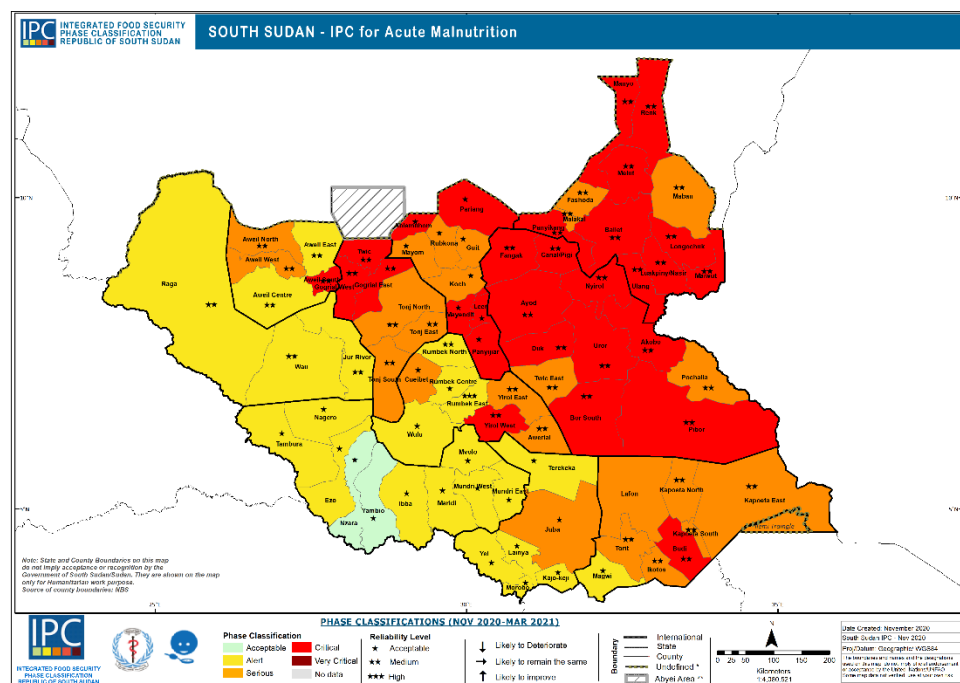
### CURRENT IPC ACUTE MALNUTRITION SITUATION FOR NOVEMBER 2020 – MARCH 2021

**How Severe, How Many and When** – About 1.4 million children under five years are expected to suffer from acute malnutrition in 2021 based on same season historical data of food security and nutrition monitoring system, SMART nutrition surveys and admission trends for 2020. This is the highest caseload for acute malnutrition since the start of the crisis in December 2013. The estimation of the caseload was based on the peak lean season historical data that provide higher caseload for better informed response planning.

**Where** – 53 (68%) counties are classified as IPC Acute Malnutrition (AMN) Phase 3 and above. Out of this, 29 counties are in IPC AMN Phase 4, and 24 counties in IPC AMN Phase 3. Of the counties in IPC AMN Phase 4, nearly 80% are in Greater Upper Nile followed by Greater Bahr el Ghazal. Counties in Jonglei (31%), Upper Nile (31%), Unity (17%), and Warrap (10%) and parts of Eastern Equatoria (3%), Northern Bahr el Ghazal (3%) and Lakes (3%) are in IPC AMN Phase 4. Further deterioration of the nutrition situation is projected during the lean season of April to August 2021. During the lean season, 57 (72%) counties are projected to be in IPC AMN Phase 3 and above, with Renk County projected to be in IPC AMN Phase 5. A total of 9 counties that are currently in IPC AMN Phase 3 will deteriorate into IPC AMN Phase 4 during the lean season, while 4 counties in IPC AMN Phase 2 will deteriorate into IPC AMN Phase 3.

**Why** – The major factors contributing to acute malnutrition include high prevalence of diseases (up to 36%), poor quality and diversity of food (Minimum Acceptable Diet: 7%, Minimum Dietary Diversity: 15%). Elevated levels of food insecurity (IPC AFI Phase 3 and above) in most counties also contribute to acute malnutrition. Furthermore, poor access to health and nutrition services due to heightened inter-communal conflict and flooding mainly in the Greater Upper Nile are also contributing to acute malnutrition. COVID-19 related disruptions, including those rightfully implemented to curb coronavirus infection rates, as well as changes in SAM and MAM referral protocols for children have exacerbated lack of access to services.

### IPC ACUTE MALNUTRITION SITUATION MAP FOR NOVEMBER 2020 – MARCH 2021



#### What is on the map?

According to the IPC AMN scale, 53 counties are in IPC AMN Phase 3 (Serious) and above. Out of these 29 counties are in IPC AMN Phase 4 (Critical) while 24 counties in IPC AMN Phase 3 (Serious). About 80% of the counties in IPC AMN Phase 4 (Critical) are in the Greater Upper Nile State followed by 17% in Greater Bahr el Ghazal State. 25 counties mainly in Greater Equatoria are in IPC AMN Phase 2 (Alert) and below. Of the counties in IPC AMN Phase 4 (Critical), nearly 80% are in Greater Upper Nile State followed by Greater Bahr el Ghazal State. Counties in Jonglei State (31%), Upper Nile State (31%), Unity State (17%), and Warrap State (10%) and parts of Eastern Equatoria State (3%), Northern Bahr el Ghazal State (3%) and Lakes State (3%) are in IPC AMN Phase 4 (Critical). Compared to the same season of 2019, the situation in 2020 shows a worsening nutrition situation. There has been an increase in the number of counties in IPC AMN Phase 3 (Serious) and above as well as an increase of overall severity with 9 additional counties classified as IPC AMN Phase 4 (Critical) in 2020. Out of these, 5 counties are in Upper Nile State while 4 are in Jonglei State (1), Unity State (3), and Lakes State (1). Furthermore, counties in Northern Bahr el Ghazal State and Western Equatoria State that had acceptable level of acute malnutrition deteriorated to IPC AMN Phase 2 (Alert).



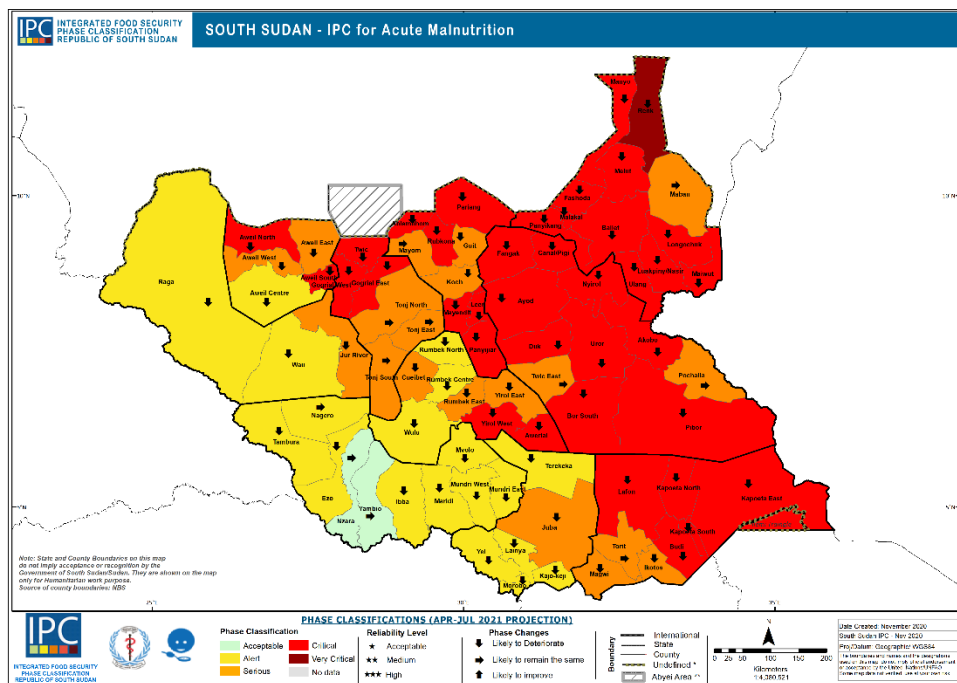
## TOTAL NUMBER OF CHILDREN AFFECTED BY ACUTE MALNUTRITION AND ARE IN NEED OF TREATMENT

State	Number of children 6 to 59 month	SAM Burden	MAM Burden	GAM burden
Central Equatoria	296,974	17,224	84,400	101,625
Eastern Equatoria	217,821	25,899	75,170	101,069
Jonglei	389,051	74,464	248,214	322,679
Lakes	234,114	16,294	100,482	116,776
N Bahr el Ghazal	179,292	13,519	70,713	84,231
Unity	217,052	33,990	121,484	155,474
Upper Nile	288,132	58,491	155,418	213,909
W Bahr el Ghazal	127,364	14,405	44,323	58,727
Warrap	248,508	38,916	116,029	154,945
Western Equatoria	178,499	20,188	62,635	82,824
<b>Total</b>	<b>2,376,806</b>	<b>313,391</b>	<b>1,078,867</b>	<b>1,392,259</b>

Table 6: Summary of SAM, MAM, and GAM caseloads in 2021

## PROJECTED IPC ACUTE MALNUTRITION SITUATION FOR APRIL-JULY 2021

## IPC ACUTE MALNUTRITION SITUATION MAP FOR APRIL-JULY 2021



## What is on the map?

According to the IPC AMN projection analysis, seasonal deterioration of acute malnutrition situation is expected during the lean season due to increased morbidity, high food insecurity and poor infant and young child feeding practices. A total of 57 counties are projected to be in IPC AMN Phase 3 (Serious) and above, with 19 classified in IPC AMN Phase 3 (Serious) and 38 classified in IPC AMN Phase 4 (Critical). Based on the historical data trends (GAM rates above 30 % were observed in Renk County in three consecutive years) used in this analysis, and disruptions to basic health, nutrition and food security and livelihoods services, Renk County is projected to be in IPC AMN Phase 5 (Extremely Critical).

A total of 9 counties that were previously classified as IPC AMN Phase 3 (Serious) during the previous lean season will deteriorate into a worse phase in the coming 2021 projection period. Likewise, 4 counties that were previously IPC AMN Phase 2 (Alert) during the last lean season, are projected to be in IPC AMN Phase 3 (Serious) for the 2021 projection period. Out of all the counties in IPC AMN Phase 4 (Critical), nearly 70% are in Greater Upper Nile followed by Greater Bahr el Ghazal (18%). Counties in Upper Nile State (29%), Jonglei State (24%), Unity State (16%), Eastern Equatoria State (13%), Warrap State (8%), Northern Bahr el Ghazal State (5%) and Lakes State (5%) are in IPC AMN Phase 4 (Critical).

The major factors contributing to acute malnutrition include high prevalence of diseases (up to 36%), poor quality and diversity of food (Minimum Acceptable Diet: 7%, Minimum dietary diversity: 15%). Elevated level of food insecurity (IPC AFI Phase 3 and above) in most counties also contribute to acute malnutrition. Furthermore, poor access to health and nutrition services due to heightened inter communal conflict and flooding mainly in the Greater Upper Nile. COVID-19 related disruptions, including those rightfully implemented to curb coronavirus infection rates, as well as changes in SAM and MAM referral protocol for children has exacerbated access to services.





## ACUTE FOOD INSECURITY SITUATION OVERVIEW AND KEY DRIVERS



## October to November 2020 Situation Overview

## GREATER UPPER NILE REGION

In the **Greater Upper Nile** region, the food security situation has generally deteriorated across all the analysis periods compared to September-December last year. This deterioration is attributed to the effects of excessive flooding, insecurity, low crop production, the economic crisis, morbidity, pests and diseases for crops and livestock, among others. This year, flooding started early and disrupted farming activities, resulting in low crop production for the most affected areas. The flooding also affected livestock by displacing animals, submerging pasturelands, and increasing incidences of water-borne diseases. In **October to November 2020**, an estimated 2.93 million people (64.6% of the population in Greater Upper Nile region) faced Crisis (IPC Phase 3) or worse acute food insecurity. Furthermore, all counties were in Crisis (IPC Phase 3) or Emergency (IPC Phase 4) acute food insecurity classification. In the projection period of **December 2020 to March 2021**, the food security situation deteriorates and the number of people in Crisis (IPC Phase 3) or worse acute food insecurity is likely to rise to 3.02 million (66.5% of the population in Greater Upper Nile region). At the **peak of the lean season in April to July 2021**, the number of people facing Crisis (IPC Phase 3) or worse acute food insecurity in the Greater Upper Nile region will likely rise to 3.47 million people (76.4% of the population in Greater Upper Nile region). The deteriorations in the first and second projection periods is driven by low crop production, seasonality, the economic crisis, and the impacts of COVID-19 that are expected to persist into next year.

## JONGLEI STATE AND PIBOR ADMINISTRATIVE AREA

In **October and November 2020**, an estimated 1.38 million people (69.8% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 724,000 people were in Crisis (IPC Phase 3) acute food insecurity, 648,000 people were in Emergency (IPC Phase 4) acute food insecurity, and 11,000 people were in Catastrophe (IPC Phase 5) acute food insecurity in Pibor County. Food insecurity in Jonglei State and Pibor Administrative Area was driven by the effects of significant underlying vulnerabilities that have built up over time due to the protracted crisis and recurrent shocks. The nine counties of Akobo, Ayod, Bor South, Canal/ Pigi, Duk, Fangak, Nyirol, Pibor and Twic East were classified in Emergency (IPC Phase 4) acute food insecurity, whereas Pochalla and Uror counties were classified in Crisis (IPC Phase 3) acute food insecurity. In 2020, Jonglei has experienced compounded shocks across most of the counties which include: an intensification of conflict that resulted in loss of life and assets, displacement, disruption and destruction of livelihoods; a second consecutive year of exceptional 40 – 50 year high floods that submerged human settlements, farmlands and pasturelands as well as disrupted markets and delivery of humanitarian assistance to the flood-affected populations; the continuing and worsening macro-economic crisis that is resulting in food price hikes due to the devaluation of the South Sudanese Pound; and the indirect effects of COVID-19 that have disrupted livelihoods as well as slowed and restricted the flow and delivery of both commercial and humanitarian supplies and services.

This year's floods were more intense than 2019 due to the high-water levels in Lakes Victoria and Albert moving through the River Nile and with above average rainfall experienced in most parts of the country and in neighbouring Ethiopia. This damaged homes and public infrastructure, destroyed crops, increased post-harvest losses, restricted the gathering of wild foods, resulted in considerable population displacement, disrupted market functionality, led to high commodity prices, and significant loss of livestock due to starvation and disease. There was also widespread contamination of the water supply, resulting in an unhygienic environment and deteriorating health conditions for both humans and livestock, thus exacerbating the vulnerability of an already impoverished and asset stripped population. Additionally, the macro-economic crisis has continued to result in currency devaluation and high food prices, which has negatively impacted on households' purchasing power and reduced their access to food. Intensified sub-national violence often by highly organized and well-armed youth that includes revenge killings and counter attacks have continued to result in the loss of life, destruction of property, population displacement, deliberate disruption of livelihoods, the loss of livestock, and has restricted access to food sources.

Between **December 2020 and March 2021**, an estimated 1.55 million people (78.3% of the population) are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 822,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, 719,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity, and 11,000 people will likely be in



Catastrophe (IPC Phase 5) in Pibor County in Pibor Administrative Area. During this period, the entire State will be classified in Emergency (IPC Phase 4) acute food insecurity, except for Pochalla County that will be classified in Crisis (IPC Phase 3) acute food insecurity. Catastrophe (IPC Phase 5) acute food insecurity in Pibor County is due to the combination of the seasonal deterioration moving into the depth of the lean season in the semi-arid plains without food stocks from their harvest; any remaining livestock are moved to the distant dry season grazing grounds; some fish is likely to remain available but key will be the efficiency in scaling up the already disrupted delivery of Humanitarian Food Assistance (HFA) and the risk of continued conflict which will maintain a significant proportion of the population in Catastrophe (IPC phase 5). In the other counties, the food security situation is also expected to worsen, with six counties having more than 80% of their population in Crisis (IPC Phase 3) or worse acute food insecurity conditions. What would normally be a post-harvest period is likely to see an early start to the lean season due to the conflict and flood-driven low crop production and associated earlier than normal exhaustion of cereal stocks and without the compensatory effects of livestock products due to animal losses and flood induced morbidities. The extended rainy season might provide some respite in the form of extended availability of soil moisture and water for growth of wild foods as well as availability of fish, albeit restricted to locations with rainfall and those with access to water bodies and to households with fishing equipment.

Between **April and July 2021**, the food security situation is expected to deteriorate further throughout the entire State, with an estimated 1.68 million people (84.7% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 876,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, 792,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity, and 11,000 people will likely be in Catastrophe (IPC Phase 5) acute food insecurity in Akobo County. During this period, the entire State will be classified in Emergency (IPC Phase 4) acute food insecurity because of further deterioration of the conditions causing food insecurity in the preceding two analysis periods. Pibor County, which would normally see a seasonal improvement with the return of livestock to the homesteads, is expected to further deteriorate as very few animals will return because of the considerable earlier losses, the anticipated continuation of conflict, the reduced availability of wild animals and fish, the economic crisis, high food prices, and the reduction of commercial and humanitarian supplies because of the onset of the rains and the likely effects of COVID-19 measures. All eleven counties will likely see a further deterioration in food insecurity during this second projection period.

### UPPER NILE STATE

In **Upper Nile State**, all the counties are classified in either Crisis (IPC Phase 3) or Emergency (IPC Phase 4) acute food insecurity across all the analysis periods, with the lean season projection period being the worst. This persistent acute food insecurity is attributed to climatic shocks such as flooding and dry spells, limited livelihood opportunities, high food prices, poor infrastructure, and lack of adequately functioning markets.

Between **October and November 2020**, a typical harvest / post-harvest period in the State, an estimated 847,000 people, (58.0% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 612,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 235,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, Panyikang, Ulang, Nasir, Maiwut and Manyo counties were classified in Emergency (IPC Phase 4) acute food insecurity, whereas the rest were classified in Crisis (IPC Phase 3) acute food insecurity. In Panyikang County, food insecurity was driven by reduced incomes, high food prices, lack of markets and low livestock holdings that affected access to milk. In Ulang County, the food insecurity was driven by reduced employment and income of household members, illnesses, unusually high food prices, livestock disease outbreaks, floods destroying crops and shelters and incidences of insecurity. In Nasir, the main shocks leading to food insecurity included high food prices, floods that destroyed crops and shelters, inaccessibility of markets due to flooding, and low crop production because of the floods. Maiwut County was affected by both long dry spells and episodes of flooding, coupled with livestock and crop pests and diseases, low asset ownership and high food prices in poorly functioning markets. Manyo County's food insecurity was driven by constraints in accessing cereals, high food prices in the markets, supply chain disruptions that were associated with COVID-19 containment measures and seasonal reduction in household food stocks. Migration in search of food was reported in most of the severely food insecure counties.

In the projection period of **December 2020 to March 2021**, the food security situation in Upper Nile State will not change much and an estimated 858,000 people (58.8% of the population) are projected to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 634,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 224,000 people will



likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, Fashoda, Ulang, Nasir and Maiwut counties are projected to be classified in Emergency (IPC Phase 4) acute food insecurity, whereas the rest of the counties are projected to be in Crisis (IPC Phase 3) acute food insecurity. The food insecurity situation is driven by depleted stocks, high food prices, and a reduction in the availability of livestock products as cattle move away from homesteads in search of water and pasture. The impacts of COVID-19 are also expected to continue, and this will likely further affect the functionality of markets and affect some livelihoods that households depend on, resulting in a reduction of income. Furthermore, households whose farming activities were affected by flooding and dry spells are expected to run out of their cereal stocks earlier in the projection period, resulting in a deterioration of their food security situation. However, availability of fish will counter some of the resultant food gaps.

During the lean season period between **April and July 2021**, the food security situation will deteriorate with an estimated 1,034,000 people (70.8% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 688,000 people will be in Crisis (IPC Phase 3) acute food insecurity, and 346,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties in Upper Nile State will be classified in Emergency (IPC Phase 4) acute food insecurity except for Malakal and Maban counties which are classified in Crisis (IPC Phase 3) acute food insecurity. The high levels of food insecurity are driven by depleted cereal stocks at household level, degradation of road infrastructure that limits market functionality and access, increased incidences of water-borne illnesses, the impacts of COVID-19, the economic crisis, and high food prices. Wild foods and livestock products will however be available during this wet season and they will mitigate the effects of the lean season.

### **UNITY STATE AND RUWENG ADMINISTRATIVE AREA**

In **October to November 2020**, an estimated 704,000 people (64.2% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 500,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 204,000 people were in Emergency (IPC Phase 4) acute food insecurity. All counties were classified in Emergency (IPC phase 4) acute food insecurity, except for Koch, Leer and Pariang which were classified in Crisis (IPC Phase 3) acute food insecurity. The key drivers of food insecurity included COVID-19 related loss of employment and income, flooding that destroyed crops and affected livestock, pockets of insecurity, high food prices, and markets that are not functioning optimally. Some of the less severely food insecure population however had access to humanitarian food assistance, wild foods, milk, and fish.

Between **December 2020 and March 2021**, the situation is expected to seasonally improve with an estimated 606,000 people (55.3% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 466,000 people are likely to be in Crisis (IPC Phase 3) acute food insecurity, and 140,000 people are likely to be in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties will be classified in Crisis (IPC Phase 3) acute food insecurity, except for Panyijiar County that will be classified in Emergency (IPC Phase 4) acute food insecurity. The improvement in the food security situation early in the period is largely attributed to availability of harvests, fish, and livestock products such as milk before the animals migrate in search of pasture and water. With the onset of the dry season, market access and functionality are also expected to improve, even as harvests find their way into the markets and lead to some drop in the prices of staples. However, for the severely food insecure households, their dire food security situation is attributed to low crop production because of flooding events during the agricultural season, the continued effects of COVID-19 on their livelihoods and incomes, the ongoing economic crisis and currency devaluation that continues to erode their purchasing power, and limited access to milk and wild foods.

During the lean season period of **April to July 2021**, the food security situation will deteriorate with an estimated 752,000 people (68.7% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 547,000 are likely to be in Crisis (IPC Phase 3) acute food insecurity, and 205,000 are likely to be in Emergency (IPC Phase 4) acute food insecurity. During this period, Abiemnhom and Pariang in Ruweng Administrative Area, Mayendit, Panyijiar and Rubkona counties will be classified in Emergency (IPC Phase 4), whereas the rest of the counties will be classified in Crisis (IPC Phase 3) acute food insecurity. Food insecurity during the lean season is driven by high reliance on markets at a time when cereal prices are at their seasonal highest and most households have depleted their harvest stocks, as well as reduced volumes of fish. The effects of COVID-19, the economic crisis, currency devaluation and reduced market access and functionality because of the rainy season are also expected to play a role in the deterioration of the food security situation. Incidents of insecurity related to inter-communal violence and cattle raiding between Leer and Guit communities are likely to be



experienced during this period, further contributing to the projected severe acute food insecurity. To mitigate the food consumption gaps, households are likely to rely on the availability of milk and other livestock products as animals return nearer homesteads, increased availability of wild foods, some access to fish, and delivery of planned humanitarian food assistance.

Factors to monitor through the projected period include inter-communal conflict and cattle raiding; market price trends; returnee movements and how this might affect sharing of community resources in their places of origin; and the rainy season performance and associated risks of flooding.

## GREATER EQUATORIA REGION

In the **Greater Equatoria Region**, an estimated 1.31 million people (37.3% of the region's population) were classified in Crisis (IPC Phase 3) or worse acute food insecurity during the **October to November 2020** post-harvest period. The severe acute food insecurity situation was driven by insecurity incidents, COVID-19 related restrictions of movement that resulted in loss of jobs and impacted on markets and trade, hyperinflation stemming from the devaluation of the South Sudanese Pound (SSP) and unprecedented levels of floods that affected crops and destroyed homes and infrastructure. In October to November 2020, 4 counties were classified in Emergency (IPC Phase 4) acute food insecurity, 17 counties were classified in Crisis (IPC Phase 3) acute food insecurity, and 3 counties were classified in Stressed (IPC Phase 2) acute food insecurity. From **December 2020 to March 2021**, food security is expected to slightly improve in all counties of Greater Equatoria as households will increase reliance on own production following the harvest of the main season crops, improved access to fish and wild foods. Physical access to the market will also improve as the dry season starts. During this period, an estimated 920,000 people (26.1% of region's population) are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. From **April to July 2021**, the food security situation is expected to deteriorate across the region as households will increase dependency on the markets following the depletion of their harvested food stocks. Market prices are likely to increase, thus reducing households' ability to access food during this time of the year - marking the peak of the lean season. Insecurity is expected to continue in parts of the region. However, vegetables and some harvests will become available in the second half of the second projection. Access to livestock products is also expected to improve mainly in semi-arid pastoral areas of Eastern Equatoria where livestock are expected to return from the dry season grazing areas following the start of the rains. It is estimated that 1.41 million people (40% of the region's population) will likely be in Crisis (IPC Phase 3) or worse acute food insecurity during this period.

## CENTRAL EQUATORIA STATE

In **Central Equatoria State**, an estimated 686,000 people (45.5% of the State population) faced Crisis (IPC Phase 3) or worse acute food insecurity during the **October to November 2020** post-harvest period, of which 480,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 206,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, Morobo, Kajo Keji and Terekeka were classified in Emergency (IPC Phase 4) acute food insecurity, whereas Juba, Lainya and Yei counties were classified in Crisis (IPC Phase 3) acute food insecurity. Food insecurity was driven by insecurity mainly in Kajo Keji, Morobo, Yei and Lainya counties, movement restrictions related to the COVID-19 with resultant negative impacts on trade and markets, devaluation of the local currency resulting in high prices of food, and excessive rainfall that resulted in atypical flooding which reduced crop yields and displaced some populations. The impact of COVID-19 on the volume of traded commodities in the main market in Juba County was apparent and resulted in high prices. The COVID-19 pandemic also pushed large number of people out of jobs and many businesses were closed leaving a substantial proportion of the population with little or no access to food.

Between **December 2020 and March 2021**, an estimated 421,000 people (27.9% of the population) are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 355,000 people are likely to be in Crisis (IPC Phase 3) acute food insecurity, and 66,000 people are likely to be in Emergency (IPC Phase 4) acute food insecurity. All the six counties in the State are classified in Crisis (IPC Phase 3) acute food insecurity. During this period, even as majority of households are enjoying access to harvests, insecurity is likely to continue in Kajo Keji, Morobo, Yei and Lainya counties, thus affecting food security in these counties. COVID-19 control measures are also likely to continue affecting livelihoods, markets, and trade. This will affect household incomes, reduce their purchasing power, and limit their access to food. However, the second





season's harvest and access to some wild foods are expected to improve food availability and access for many households. As a result, the food security situation is expected to improve during this period.

From **April to July 2021**, deterioration in the food security situation is expected with an estimated 778,000 people (51.6% of the population) likely to be in Crisis (IPC Phase 3) or worse acute insecurity, of which 551,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 227,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, Kajo Keji, Morobo and Terekeka counties are classified in Emergency (IPC Phase 4) acute food insecurity, whereas Juba, Lainya and Yei counties are classified in Crisis (IPC Phase 3) acute food insecurity. The deterioration is mainly driven by typical lean season factors such as depletion of harvest stocks, high food prices, degraded road conditions that affect market access and functionality, likelihood of insecurity in some counties such as Kajo Keji, Morobo, Yei and Lainya, the economic crisis and associated currency devaluation and diminished household purchasing power, and the effects of the COVID-19 pandemic on supply chain systems, markets and household livelihoods and incomes. However, some mitigating factors include availability of green harvests in June/July, provided that the start of rainy season is timely in the bi-modal areas, and there is improved security that will allow farming households to access far fields. Additionally, fish, wild foods, and livestock products are expected to become seasonally available because of the rainy season.

## **EASTERN EQUATORIA STATE**

In **October to November 2020**, an estimated 457,000 people (41.6% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 348,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 109,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties were classified in Crisis (IPC Phase 3) acute food insecurity, except for Kapoeta North which were classified in Emergency (IPC Phase 4) acute food insecurity. Food insecurity was driven by high food prices, unusually heavy rainfall resulting in flooding that caused livestock deaths and destroyed crops, as well as the negative impacts of the COVID-19 pandemic on the lives and livelihoods of the population. The situation was further exacerbated by reported incidences of fall armyworm and desert locusts that further reduced crop yields. Insecurity in Budi and parts of Torit county also negatively affected livelihoods especially trade and markets.

From **December 2020 to March 2021**, the food security situation is expected to slightly improve, with an estimated 417,000 people (37.9% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 341,000 people are likely to be in Crisis (IPC Phase 3) acute food insecurity, and 76,000 people are likely to be in Emergency (IPC Phase 4) acute food insecurity. The slight improvement is because of households having access to their own crop harvests as well as livestock products such as milk. Given the below average harvest in some areas because of floods and dry spells, the lean season is expected to start earlier than normal. Households are therefore expected to increase reliance on the markets during the December 2020 to March 2021 period thus triggering price increases much earlier and decreasing households' ability to access food from the markets. Conflict is likely to increase in pastoral areas as increased competition for resources is expected to start during this period. While the food insecurity is likely to affect the whole population, it is expected to be more severe among recent returnees.

From **April to July 2021**, the food security situation is expected to deteriorate as the lean season progresses, with an estimated 507,000 people (46.2% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 367,000 people are likely to be in Crisis (IPC Phase 3), and 140,000 people are likely to be in Emergency (IPC Phase 4) acute food insecurity. During this period, Budi, Kapoeta North, and Kapoeta South will be classified in Emergency (IPC Phase 4) acute food insecurity, while the rest of the countries will be classified in Crisis (IPC Phase 3) acute food insecurity. Food insecurity is expected to be severe among households whose food stocks will have run out and they will be relying on markets for food purchases. In the pastoral areas, livestock are expected to return near homesteads thus increasing availability of livestock products such as milk, even as some green harvest and wild foods become seasonally available towards the end of this period.

## **WESTERN EQUATORIA STATE**

In **October to November 2020**, an estimated 169,000 people (18.5% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 156,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 13,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties were classified in Crisis (IPC Phase 3) acute food insecurity, except for Ezo, Maridi, and Tambura counties which were classified in Stressed (IPC Phase 2) acute food



insecurity. The main drivers of food insecurity included insecurity stemming from political instability, high market prices, loss of employment due to the COVID 19 pandemic, poor water and sanitation conditions, high cost of living due to the devaluation of the local currency against the dollar, serious illnesses, crop pests and diseases, high prices of fuel, and flooding especially in Maridi, Mundri East and Mundri West counties. Conversely, the area cultivated has increased, resulting in increased crop production.

From **December 2020 to March 2021**, the food security situation is expected to improve following the second harvest. During this period, an estimated 82,000 people (9.0% of the population) are likely to face Crisis (IPC phase 3) or worse acute food insecurity, of which 80,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 2,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. All counties will be classified in Stressed (IPC Phase 2) acute food insecurity, except for Nagero County which will be classified in Crisis (IPC Phase 3) acute food insecurity. The improved food security situation is because of increased food availability from the main harvest, access to fish and decreased morbidity. Also, with the dry season, market functionality and access will improve, with prices of staple commodities reducing seasonally.

From **April to July 2021**, the food security situation is expected to deteriorate as the lean season progresses and households' food stock start to get depleted and reliance on the markets increases. During this period, an estimated 123,000 people (13.5% of the population) are likely to face Crisis (IPC Phase 3) or worse acute food insecurity, of which 94,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 29,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. Mundri East, Mundri West, Mvolo and Nagero counties are expected to be classified in Crisis (IPC Phase 3) acute food insecurity, while the remaining counties will be classified in Stressed (IPC Phase 2) acute food insecurity. Physical access to food will be difficult as some of the feeder roads will become impassable because of the rains, thus hindering trade flows to some of the markets. The effects of the economic crisis, currency devaluation and COVID-19 measures are also likely to contribute to household food insecurity. Access to clean water is expected to reduce and water borne diseases are likely to increase as the rainy season starts. However, the situation is expected to improve towards the end of this period as the first harvest becomes available in June/July.

Factors to be monitored across greater Equatoria region include spontaneous refugee returnees, prices of staples, the March-May rainfall performance, the COVID-19 pandemic, and the likelihood of a desert locust infestation in Eastern Equatoria and Central Equatoria States.

### GREATER BAHR EL GHAZAL REGION

In the **Greater Bahr el Ghazal** region (GBEG), an estimated 2.10 million people (52.5% of the population in the region) likely experienced Crisis (IPC Phase 3) or worse acute food insecurity in **October and November 2020**. The key drivers of food insecurity in the region were dry spells, floods, incidents of intercommunal conflict, and market price shocks. Among the four States of GBEG, three States, namely, Lakes (55.6%), Warrap (55.3%) and Northern Bahr el Ghazal (52.7%) were the most affected with more than 50% of their population in Crisis (IPC Phase 3) or worse acute food insecurity.

In the first projection period of **December 2020 to March 2021**, the overall food security situation in GBEG will likely improve slightly, with 1.88 million people (47.1% of the total population in the region) likely to be in Crisis (phase 3) or worse acute food insecurity. The improvement will be attributed to seasonal harvests, access to wild foods and fish, as well as improve access and functionality of markets during the dry season.

In the second projection period of **April to July 2021**, the situation is expected to seasonally deteriorate and an estimated 2.37 million (59.2% of the total population in the region) will likely be in Crisis (IPC Phase 3) or worse acute food insecurity. This deterioration will be driven by the depletion of food stocks, reduced availability of wild foods, challenges in physically accessing and resupplying markets because rainfall-induced deterioration of road conditions, increased market prices, and the likelihood of intercommunal conflicts, including cattle raiding. This period requires close monitoring of the situations as there could also be aggravating factors related to water borne diseases and flooding as the period falls within the rainy season.





## WESTERN BAHR EL GHAZAL STATE

In **October and November 2020**, an estimated 268,000 people (41.4% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 199,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 69,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, all the counties were classified in Crisis (IPC Phase 3) acute food insecurity. The food insecurity was attributed to typical seasonal factors such as depletion of stocks just before the harvests, and the macroeconomic shocks which led to increased market prices and reduced household purchasing power. Measures put in place to limit the spread of COVID-19 also had a negative impact on trade and the flow of goods to markets, as well as disrupted livelihoods and impacted negatively on incomes of the affected households. Other shocks included prolonged dry spells and irregular rains, crop pests and diseases, insecurity, and crime. However, during this period, the seasonal harvests were available to most households through their own production and in the markets. Households could also access market goods by selling their own produce, wild foods, and other natural resources such as firewood and building poles.

Between **December 2020 and March 2021**, the food security situation is expected to seasonally improve with an estimated 190,000 people (29.4% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 153,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 37,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, Raga and Wau counties are classified in Crisis (IPC Phase 3) acute food insecurity, whereas Jur River County is classified in Stressed (IPC Phase 2) acute food insecurity. A key driver of the improvement in the food security situation is the availability of harvests. Although market prices will likely remain high across the state, and some COVID-related restrictions will remain in place, trade routes from Sudan and from other countries via Juba will become more accessible thus increasing availability of food commodities in the markets. Additionally, households will be able to sell and consume farm products, and the availability of casual labour opportunities will improve. Additionally, receding water levels will improve access to fish, and the population will have access to wild foods and honey. At the same time, the prevalence of water-borne diseases will likely decrease.

The food security situation is expected to deteriorate in the lean season period of **April to July 2021** with an estimated 280,000 people (43.3% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 226,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 54,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties will be classified in Crisis (IPC Phase 3) acute food insecurity. The deterioration is because of the depletion of harvested food stocks, high food prices and reduced household purchasing power because of the anticipated continuation of the local currency's devaluation. However, availability of agricultural labour opportunities will provide some income for poorer households to access food.

## WARRAP STATE

In **October and November 2020**, an estimated 698,000 people (55.3% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 426,000 people were in Crisis (IPC Phase 3) acute food insecurity, 259,000 people were in Emergency (IPC Phase 4) acute food insecurity, and 13,000 people were in Catastrophe (IPC Phase 5) acute food insecurity in Tonj North County. During this period, all counties were classified in Emergency (IPC Phase 4) acute food insecurity, except for Twic County which was classified in Crisis (IPC Phase 3) acute food insecurity. The drivers of food insecurity in Warrap State were high food prices in the face of reduced household income, prolonged dry spells that affected crop and availability of pasture for livestock, and insecurity and flooding incidents. Insecurity disrupted agricultural activities, leading to the loss of livestock and other assets, restricted physical movement, and access to markets, and disrupted market functionality. The COVID-19 measures were also reported to have contributed to high food prices because of supply chain disruptions, and traders' reluctance to extend credit facilities.

Between **December 2020 and March 2021**, the food security situation slightly improves and an estimated 647,000 people (51.2% of the population) are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 417,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 230,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, Gogrial East, Gogrial West and Twic counties are classified in Crisis (IPC Phase 3) acute food insecurity whereas Tonj East, Tonj North and Tonj South counties are classified in Emergency (IPC Phase 4) acute food insecurity. The slight improvement in the food security situation is attributed to availability of harvests and other seasonal improvements such as availability of some milk, fish, and wild foods. However, with the onset of the dry season, there is a



likelihood of intercommunal conflicts and associated insecurity which will limit dry season movements to access food sources and market areas in the affected areas.

In the lean season of **April to July 2021**, the food security situation deteriorates and an estimated 775,000 people (61.4% of the population) will face Crisis (IPC Phase 3) or worse acute food insecurity, of which 481,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 281,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity, and 13,000 people will likely be in Catastrophe (IPC Phase 5) acute food insecurity in Tonj North County. During this period, all counties are classified in Emergency (IPC Phase 4) acute food insecurity, except for Twic County which is classified in Crisis (IPC Phase 3) acute food insecurity. This deterioration will be driven by the seasonal depletion of food stocks, likelihood of high food prices, reduced market functionality and access challenges occasioned by the onset of rainfall that leads to the worsening of road conditions, as well as the ongoing COVID-19 pandemic, economic shocks and currency devaluation that will continue to erode households' purchasing power.

## LAKES STATE

In **October to November 2020**, an estimated 655,000 people (55.6% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 447,000 people were in Crisis (IPC Phase 3) acute food insecurity, and 208,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, Cueibet, Rumbek Center, Rumbek East and Yirol East counties were classified in Emergency (IPC Phase 4) acute food insecurity, whereas Awerial, Rumbek North, Wulu and Yirol West counties were classified in Crisis (IPC Phase 3) acute food insecurity. The key drivers of food insecurity were the combined effects of high food prices, insecurity events and devastating floods that affected farming activities mainly in Awerial, Rumbek East and Yirol East counties. Due to COVID-19 prevention and control measures, households experienced reduced incomes, and associated supply chain disruptions led to markets not restocking on time, high food prices and reduced access to credit facilities.

Between **December 2020 and March 2021**, the food security situation is expected to improve with an estimated 496,000 people (42.1% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 384,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 112,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties are classified in Crisis (IPC Phase 3) acute food insecurity, except for Wulu County which is classified in Stressed (IPC Phase 2) acute food insecurity. The improvement in the food security situation is attributed to the seasonal availability of harvests, increased access to fish and wild foods, and improved market access and functionality because of better road conditions. However, the effects of COVID-19 measures on supply chain systems, and the ongoing economic crisis will have an impact on household access to food.

In the lean season of **April to July 2021**, the food security situation is expected to seasonally deteriorate, with an estimated 677,000 people (57.4% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 485,000 people will likely be in Crisis (IPC Phase 3) acute food insecurity, and 192,000 people will likely be in Emergency (IPC Phase 4) acute food insecurity. During the lean season, Cueibet, Rumbek Center, Rumbek East, Rumbek North and Yirol East counties are classified in Emergency (IPC Phase 4) acute food insecurity, whereas Awerial, Wulu and Yirol West counties are classified in Crisis (IPC Phase 3) acute food insecurity. The main drivers of food insecurity will be the depletion of own food stocks, limited access to, and reduced functionality of markets because of the rainy season, high food prices in markets, the ongoing economic crisis, currency devaluation and reduced household purchasing power.

## NORTHERN BAHR EL GHAZAL STATE

In **October to November 2020**, an estimated 481,000 people (52.7% of the population) faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 330,000 people were in Crisis (IPC Phase 3) acute food insecurity, 151,000 people were in Emergency (IPC Phase 4) acute food insecurity. During this period, all counties were classified in Crisis (IPC Phase 3), except for Aweil South County which was classified in Emergency (IPC Phase 4) acute food insecurity. The key drivers of food insecurity included the restrictions put in place to reduce the spread of COVID-19 which negatively impacted the movement of goods and people to and from the State. Furthermore, crops were affected by pests as well as climatic shocks including a long dry spell and subsequent flooding that also inundated shelters and displaced households. Decreased road access also affected access to markets and services. However, the start of the harvest season mitigated some of the food



insecurity by increasing food availability and causing market prices to decline. Cattle that were near homesteads also enabled households to access livestock products such as milk, and receding flood waters increased access to fish.

The food security situation is expected to deteriorate in the first projection period of **December 2020 to March 2021**, with an estimated 551,000 people (60.4% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 372,000 people are likely to be in Crisis (IPC Phase 3) acute food insecurity, and 179,000 people are likely to be in Emergency (IPC Phase 4) acute food insecurity. During this period, Aweil East, Aweil North, and Aweil South counties are classified in Emergency (IPC Phase 4) acute food insecurity, whereas Aweil Center and Aweil West counties are classified in Crisis (IPC Phase 3) acute food insecurity. The key drivers of food insecurity are low crop production caused by prolonged dry spells, crop pests and diseases, and shortage of seeds and agricultural tools; the COVID-19 restrictions and insecurity along the border that are likely to disrupt the trade supply routes and lead to high food prices; reduced access to livestock products as animals migrate in search of water and pasture; the economic crisis and the resultant erosion of household purchasing power. However, some households will continue to have access to stocks from the previous harvests, some of which they can sell in markets for income to diversify their diets.

The food security situation is expected to deteriorate further during the lean season period of **April to July 2021**, with an estimated 636,000 people (69.7% of the population) likely to be in Crisis (IPC Phase 3) or worse acute food insecurity, of which 428,000 people are likely to be in Crisis (IPC Phase 3) acute food insecurity, 201,000 people are likely to be in Emergency (IPC Phase 4) acute food insecurity, and 7,000 people are likely to be in Catastrophe (IPC Phase 5) acute food insecurity in Aweil South County. During the lean season, all counties are classified in Emergency (IPC Phase 4) acute food insecurity, except for Aweil Center which is classified in Crisis (IPC Phase 3) acute food insecurity. The key drivers of food insecurity include the seasonal depletion of own stocks, particularly for households whose crop production was negatively affected by climatic shocks; increased market dependence at a time when food prices are expected to rise further; the unpredictable security situation along the border with Sudan that is likely to impact on trade; the ongoing economic crisis that is likely to continue eroding household purchasing power in a highly market-dependent State; migration of livestock away from homesteads that will lead to decreased access to livestock products; and COVID-19 measures that are likely to have an impact on the supply chain systems and affect market functionality. Households will increasingly rely on petty trade and selling of natural resources for income, as well as consuming of wild foods.

### Key Drivers

**Food availability:** Cereal production in 2020 will most likely not meet the country's cereal needs because of flooding, dry spells, crop pests and diseases, insecurity, and displacement of farming households which affected most agricultural activities. In Greater Equatoria, there is likely to be a slight increase in the area cultivated because of improved security, favourable rains, and participation of returnees and IDPs in farming – all of which are expected to translate to slightly higher production than that of the previous year. The breadbasket of the country will require a longer period of stability for it to regain its former production levels. Production in Greater Bahr el Ghazal and Greater Upper Nile regions is however expected to decline compared to last year, particularly in Jonglei, Warrap, Northern Bahr el Ghazal, Lakes and Upper Nile. *The national level production is yet to be determined through the CFSAM analysis scheduled for December 2020 and results are planned to be released in January 2021. However, the overall production in the current year is anticipated to be equivalent or slightly below last year's but is likely to be slightly higher than the average of the previous five years.*

**Access to food:** The ongoing economic crisis and the effects of COVID-19 continue to make it difficult for majority of households to access food from markets because of loss of sources of livelihoods, reduced income, and high food prices. The seasonal deterioration of road infrastructure during the rainy season will also affect market functionality by disrupting the timely restocking of markets. The effects of insecurity in parts of the country will also lead to displacement, depletion or loss of assets, and disruption of livelihoods, further contributing to reduced income for purchasing food and essential needs.

**Food utilization:** This is a significant problem over most of the country because of the chronic nature of waterborne diseases, low use of latrines, poor personal hygiene and living environments, and limited access to hygienic materials. Access to health services is also poor which leads to high incidences of diseases that not only affect the health of the

population, but also negatively affects availability of labour and leads to reduced income at household level. WASH needs for the country will be particularly high during the rainy season and will require significant investment to address them.



## ACUTE MALNUTRITION SITUATION OVERVIEW AND KEY DRIVERS



### Situation Overview

Due to the COVID-19 pandemic, anthropometric assessment was suspended in 2020 in line with the global guidance. Therefore, no recent anthropometric data was available to inform the October 2020 IPC AMN analysis. As per the IPC AMN guidelines historical data of the same season in the past 5 years was utilized for the IPC AMN phase classification, in addition to triangulation with other recent contextual data such as the Food Security and Nutrition Monitoring System (FSNMS Round 26) and nutrition program data.

The year of 2020 has been characterized by several emerging and anticipated shocks that have impacted hugely on the nutrition situation of children as well as nutrition service delivery. The COVID-19 pandemic, floods in Jonglei and heightened inter-communal conflict were shocks that tremendously impacted access to nutrition services in the country. COVID-19 related disruptions, including those rightfully implemented to curb coronavirus infection rates, as well as changes in SAM and MAM admission criteria for children have exacerbated access to services alongside other factors such as heightened inter-communal conflict and insecurity, worsening economic crises, flooding, among others.

Based on the IPC AMN, all the 79 counties were included in the analysis of which 53 counties are in phase IPC AMN Phase 3 (Serious) and above. Out of these, 29 counties are in IPC AMN Phase 4 (Critical) while 24 counties in IPC AMN Phase 3 (Serious). About 80% of the counties in IPC AMN Phase 4 (Critical) are in the Greater Upper Nile followed by 17% in Greater Bahr el Ghazal. 25 counties mainly in Greater Equatoria are in IPC AMN Phase 2 (Alert) and below. Of the counties in IPC AMN Phase 4 (Critical), nearly 80% are in Greater Upper Nile followed by Greater Bahr el Ghazal. Counties in Jonglei (82%), Upper Nile (75%), Unity (56%), and Warrap (50%) states and parts of Northern Bahr el Ghazal (20%), Eastern Equatoria (13%), and Lakes (13%) states are in IPC AMN Phase 4 (Critical). Compared to the same season of 2019, the situation in 2020 shows a worsening nutrition situation. There has been an increase in the number of counties in IPC AMN Phase 3 (Serious) and above as well as an increase of overall severity with 9 additional counties classified as IPC AMN Phase 4 (Critical) in 2020. Out of these, 4 counties are in Upper Nile State, while others are in Jonglei (1) Unity (3) Lakes (1) states. Furthermore, counties in Northern Bahr el Ghazal and Western Equatoria that had Acceptable (IPC AMN Phase 1) level of acute malnutrition deteriorated to IPC AMN Phase 2 (Alert).

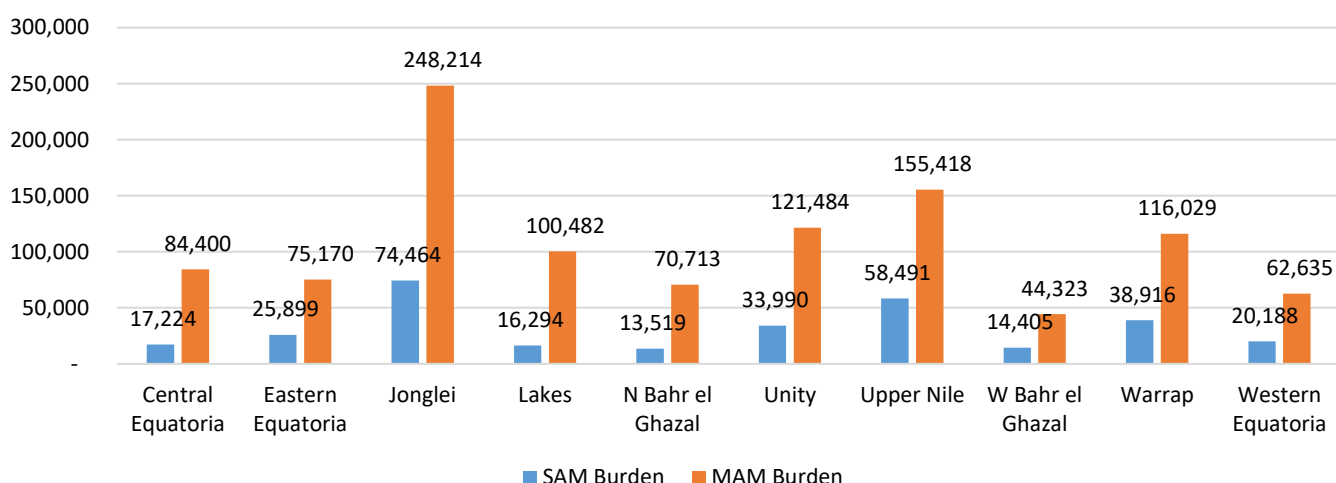
About 1.4 million children under five years are expected to suffer from acute malnutrition in 2021 based on same season historical data of food security and nutrition monitoring system, SMART nutrition surveys and admission trends for 2020. The estimation of this caseload was based on the peak lean season historical data that provides a higher caseload for better informed response planning.

The major factors contributing to acute malnutrition include and high prevalence of diseases (affecting up to 36% of children under five), poor quality and diversity of food (Minimum Acceptable Diet: 7%, Minimum dietary diversity: 15%). Elevated level of food insecurity (IPC AFI phase 3 and above) in most counties also contributes to acute malnutrition. Furthermore, poor access to health and nutrition services due to heightened, sub-national conflict and flooding mainly in the Greater Upper Nile. COVID-19 related disruptions, including those rightfully implemented to curb coronavirus infection rates, as well as changes in SAM and MAM referral protocol for children have exacerbated access to services.





### Burden of Acute Malnutrition in children 6-59 months, 2020



### ? Key Drivers

The major factors contributing to acute malnutrition include and high prevalence of diseases (affecting up to 36% of children under five), poor quality and diversity of food (Minimum Acceptable Diet: 7%, Minimum dietary diversity: 15%). Elevated level of food insecurity (IPC AFI phase 3 and above) in most counties also contributes to acute malnutrition. Furthermore, poor access to health and nutrition services due to heightened, sub-national conflict and flooding mainly in the Greater Upper Nile. COVID-19 related disruptions, including those rightfully implemented to curb coronavirus infection rates, as well as changes in SAM and MAM referral protocol for children have exacerbated access to services.

## RECOMMENDATIONS FOR ACTION

### Food Security

Humanitarian food assistance must be scaled up immediately to save lives and prevent total collapse of livelihoods in locations where populations were classified in Catastrophe (IPC Phase 5) and Emergency (IPC Phase 4). Furthermore, partners should collect food security, nutrition, and mortality data in the most affected locations to verify the situation in these areas.

In all regions, the necessary conditions for addressing the food security crisis are:

- Continued implementation of the peace agreement and addressing the root causes of insecurity especially across Jonglei, Lakes, Warrap, and parts of Central Equatoria State.
- Scale-up provision of humanitarian assistance (in kind and cash transfers) to counties in Crisis (IPC Phase 3) and above.
- Provide livelihood support through improved market access, provision of seeds and tools (farm inputs) to stimulate production back to surplus levels, particularly in the greenbelt.
- Maintain support to small scale subsistence producers in locations with less agricultural potential and include animal health support.
- Scale up and improve access to basic services, including WASH and health service delivery throughout the year. This should also include emergency nutrition, especially during the lean season.



- Close monitoring of counties whose food security situation is already dire and is at risk of deteriorating further to a point where lives and livelihoods will be jeopardized.

### **Nutrition**

Continued scale up of treatment of acute malnutrition targeting the current and future caseload is a high priority. Further expansion of services to previously insecure areas for both treatment of severe and moderate acute malnutrition is also important to reach the previously less accessible areas.

While ensuring universal treatment for acute malnutrition is a priority, attention must also be given to addressing the identified major contributing factors to prevent acute malnutrition in the future. The prevention efforts should focus on childcare practices including improving quality of food consumed by children and treatment and prevention of childhood illness. It is recommended that a response analysis involving all nutrition, health, food security, as well as WASH stakeholders in the country be carried out to identify appropriate interventions to address acute malnutrition. This response analysis may initially focus on the Greater Upper Nile region, and Warrap and Northern Bahr el Ghazal states which have relatively elevated levels of acute malnutrition, but optimally, such response should be done for all regions. It is also recommended that resource mobilization efforts are taken to address treatment and prevention of malnutrition.

- Efforts to reduce malnutrition should include the broader goals of improving knowledge related to childhood nutrition and IYCF practices and health seeking.
- Establishment of kitchen gardening for food diversification as part of the nutrition-sensitive agriculture agenda.
- Cooking demonstration on complementary feeding using commonly available foods.
- Strengthen active case finding and integrated community outreach program.
- Increase surveillance in counties where the nutrition situation is critical and projected to deteriorate
- Mother MUAC is tool that will be used in the coming months and years and therefore requires improvement in training of mothers on the appropriate use of MUAC for screening.
- COVID-19 guidelines need to be reviewed in view of enhancing program coverage.
- Adopt revised global guidance on population-based assessments so that real time data is available on the nutrition situation.



## PROCESS, METHODOLOGY AND LIMITATIONS

### Process and Methodology

**Food Security Analysis:** The October/November 2020 IPC acute analysis was conducted virtually and was attended by a multi-agency and multi-sectoral group of about 109 analysts. Before the IPC analysis commenced, an IPC Level 1 training workshop was held for about 35 trainees from 20<sup>th</sup> to 23<sup>rd</sup> October 2020. Thereafter, the analysts conducted State level analyses and were vetted by the South Sudan IPC Technical Working Group. The primary source of data was from the 26<sup>th</sup> round of the Food Security and Nutrition Monitoring System (FSNMS) survey, and additional data from field assessment reports from the FSL Cluster partners, market analysis and projections, rainfall estimates and forecasts, population movement data, humanitarian assistance data and Emergency Operational plans. The State analysis teams provided population numbers for all the analysis periods and considered the impact of humanitarian food assistance (HFA).

**Nutrition Analysis:** A team of experts and analysts on nutrition, health, and statistics from South Sudan with the support from Regional and Global IPC Support Unit carried out the analysis process using the standard IPC AMN methodology. Given that 2020 IPC AMN analysis was unique due to lack of recent data, and use of historical data, a half day training was provided by IPC GSU to the Nutrition Information Working Group (NIWG). A further one-day training was also provided to the IPC AMN analysts on the first day of the IPC analysis. Teams of 2-3 people were formed to conduct analysis at State level. A total of 25 members of NGOs, UN, and Government staff participated in the IPC AMN analysis. The analysis was conducted from 26<sup>th</sup> October to 6<sup>th</sup> November 2020. A two-day vetting was done after the teams were done with the analysis.

### Limitations of the Analysis

**Food Security Analysis:** Floods and the movement restrictions associated with COVID-19 delayed the collection of data from the field. Furthermore, the IPC analysis was conducted online, thus affecting the close interaction of the State analysts.

**Nutrition Analysis:** The IPC AMN analysis was conducted virtually and therefore there were some challenges on internet access which caused delays on timely completion of the training and analysis as well as lack of clarity on the conference calls sometimes.

**Estimating effect of HFA:** There being no standard methodology for the calculation of the effects of Humanitarian Food Assistance (HFA), the South Sudan IPC Technical Working Group used the Food Security Cluster (FSC) food assistance data which provides the total number of beneficiaries and the quantity (tonnes) delivered. With this and information from FSC partners that a full ration provided is 17.55kg of mixed commodities per person per month, the TWG first estimated the percentage ration size provided through HFA for the period of analysis. Using this information, areas where at least 25% kilocalorie needs for every beneficiary were met, and the beneficiaries composed of at least 25% of the total population were flagged with a white bag, whereas areas where at least 25% kilocalorie needs were met for at least 50% of beneficiaries were flagged with a black bag. In determining the unmet needs i.e. population in need of action after considering HFA, perfect targeting was assumed thus meaning that the people in the worst-off phases benefit first from the HFA distribution before the remainder of the HFA, if any, is assigned to better off phases.

**What is the IPC, IPC Acute Food Insecurity and IPC Acute Malnutrition?**

The **IPC** is a set of tools and procedures to classify the severity and characteristics of acute food and nutrition crises as well as chronic food insecurity based on international standards. The IPC consists of four mutually reinforcing functions, each with a set of specific protocols (tools and procedures). The core IPC parameters include consensus building, convergence of evidence, accountability, transparency and comparability. The IPC analysis aims at informing emergency response as well as medium and long-term food security policy and programming.

For the IPC, **Acute Food Insecurity** and **Acute Malnutrition** are defined as any manifestation of food insecurity or malnutrition found in a specified area at a specific point in time of a severity that threatens lives or livelihoods, or both, regardless of the causes, context or duration. The **IPC Acute Malnutrition Classification** is highly susceptible to change and can occur and manifest in a population within a short amount of time, as a result of sudden changes or shocks that negatively impact the determinants of food insecurity.

The **IPC Acute Malnutrition Classification**'s focus is on identifying areas with a large proportion of children acutely malnourished preferably by measurement of Weight for Height Z-Score (WHZ) but also by Mid-Upper Arm Circumference (MUAC).