South Sudan

The food insecurity levels will remain elevated due to persistent poor macroeconomic conditions and the impact of flooding on livelihoods, but the situation is expected to improve for some areas in 2020 compared to last year.

IPC ACUTE FOOD INSECURITY AND **ACUTE MALNUTRITION ANALYSIS** January 2020 – July 2020 **Issued February 2020**

CURRENT (JANUARY 2020)			PROJECTED (FEBRUARY - APRIL 2020)			PROJECTED (MAY - JULY 2020)			
	Phase 5	40,000 People in Catastrophe		Phase 5	20,000 People in Catastrophe		Phase 5	0 People in Catastrophe	
5.29M 45% of the population	Phase 4	1,110,000 People in Emergency	6.01M 51% of the population	Phase 4	1,475,000 People in Emergency	6.48M 55% of the population	Phase 4	1,745 000 People in Emergency	
People facing severe	Phase 3	4,140,000 People in Crisis	People facing severe	Phase 3	4,515,000 People in Crisis	People facing severe	Phase 3	4,735 000 People in Crisis	
acute food insecurity (IPC Phase 3+)	Phase 2	3,875,000 People in Stress	acute food insecurity (IPC Phase 3+)	Phase 2	3,590,000 People in Stress	acute food insecurity (IPC Phase 3+)	Phase 2	3,285,000 People in Stress	
IN NEED OF URGENT ACTION	Phase 1	2,545,000 People minimally food insecure	IN NEED OF URGENT ACTION	Phase 1	2,100,000 People minimally food insecure	IN NEED OF URGENT ACTION	Phase 1	1,935,000 People minimally food insecure	

Overview

How Severe, How Many and When - In the analysis period of January 2020, 5.29 million people (45.2% of the population) are estimated to have faced Crisis (IPC Phase 3) or worse acute food insecurity, of which 1.11 million people faced Emergency (IPC Phase 4) acute food insecurity. About 40,000 people were classified in Catastrophe (IPC Phase 5) in the counties of Akobo¹, Duk² and Ayod³ in Jonglei State. Compared with the same time last year, the January 2020 levels of food insecurity reflect a 9% reduction⁴ in the proportion of population facing Crisis (IPC Phase 3) or worse acute food insecurity.

In the projection period of February to April 2020, 6.01 million people (51.4% of the population) will likely face Crisis (IPC Phase 3) or worse acute food insecurity, with 20,000 people in the counties of Akobo and Duk estimated to be in Catastrophe (IPC Phase 5). In the projection period of May to July 2020, a total of 6.48 million people (55.4% of the population) will face Crisis (IPC Phase 3) or worse acute food insecurity, which is 5% lower than was projected for the 2019 lean season⁵.

Immediate scale-up of humanitarian food 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).

Key Drivers



Flooding

Considerable flooding in 2019 triggered population movement and displacement in three (3) counties. The floods destroyed of houses, road networks and disrupted the livelihoods.



Low production

Low crop production is also contributing to food insecurity, with the 2019 cropping season only able to meet 63% of the 2020 national cereal needs.



Insecurity

Isolated insecurity incidents displace populations, disrupt livelihoods and impede households' access to other food sources, such as wild foods, fish, and livestock products.

ACUTE MALNUTRITION JANUARY - DECEMBER 2020



Severe Acute Malnutrition (SAM)

Moderate Acute

292,300

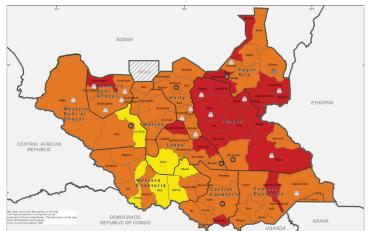
the number of 6-59 months children acutely malnourished

IN NEED OF TREATMENT

Malnutrition (MAM) 1,008,700 352,000 Pregnant or lactating women acutely malnourished

IN NEED OF TREATMENT

Projected Acute Food Insecurity February - April 2020



Key for the Map **IPC Acute Food Insecurity** Phase Classification

Areas not analysed

Urban settlement classification

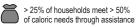
classification

IDPs/other settlements



Area receives significant Areas with inadequate evidence humanitarian food assistance (accounted for in Phase classification)

> 25% of households meet 25-50% of caloric needs through assistance



⁴ In January 2019, the proportion of population in Crisis (IPC Phase 3) or worse was 54% compared to the January 2020 proportion of 45% ⁵ In January 2019, it was projected that in May-July 2019, an estimated 60% of the population

would face Crisis (IPC Phase 3) or worse acute food insecurity

¹ In the Payams of Barmach, Buong, Diror and Walgak

² In the Payams of Ageer, Dongchak and Padiet

³ In the Payams of Kurwai, Wau and Pajiek

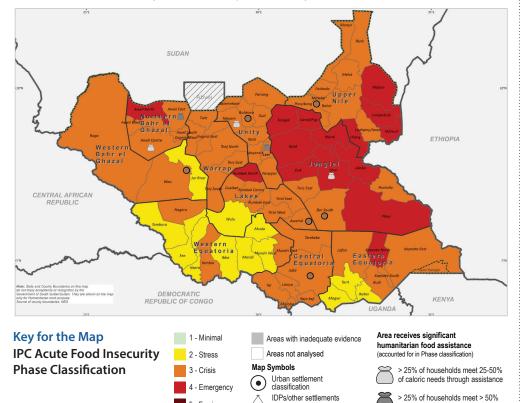


Where – The most severe acute food insecurity conditions are in the flood-affected counties of Akobo, Duk and Ayod. In January 2020, 15 counties across the country were classified in Emergency (IPC Phase 4) acute food insecurity, with Greater Upper Nile region having 12 (Longochuk, Maban, Maiwut and Ulang of Upper Nile State; and Akobo, Ayod, Canal/Pigi, Duk, Fangak, Nyirol, Pibor and Uror of Jonglei State); Greater Bahr el Ghazal region having 2 (Rumbek North of Lakes State, and Aweil North of Northern Bahr el Ghazal); and Greater Equatoria region having 1 (Kapoeta North of Eastern Equatoria State). Of the remaining counties, 51 are in Crisis (IPC Phase 3), and 12 are in Stressed (IPC Phase 2). From February to April 2020, 22 counties are in Emergency (IPC Phase 4), and the number will increase to 33 counties in May to July 2020.

Why – The cumulative effects of flooding and associated population displacements, localized insecurity, the economic crisis, and prolonged years of asset depletion continue to drive the high levels of acute food insecurity in the country. Low crop production is also a contributing factor, with the 2019 cropping season production meeting 63% of the 2020 national cereal needs (comparatively, 2018 cereal production met 57% of the 2019 national cereal needs). Isolated insecurity incidents displace populations, disrupt livelihoods and impede households' access to other food sources, such as wild foods, fish, and livestock products. The high food prices and continued currency depreciation have also consistently reduced the purchasing power of vulnerable households who are reliant on market purchases for their food and other basic needs. Seasonal scarcity of food coupled with a general reduction in humanitarian food assistance, when compared to the recent past, will likely result in an increase of acute food insecurity during the projection periods.

CURRENT IPC ACUTE FOOD INSECURITY FOR JANUARY 2020

IPC Acute Food Insecurity Situation Map for January 2020



classification

25% of households meet > 50% of caloric needs through assistance

What is on the map?

A total of 15 counties are classified in Emergency (IPC Phase 4), 51 are classified in Crisis (IPC Phase 3), and 12 are classified in Stressed (IPC Phase 2).

What is in the table?

With the current levels of HFA (Humanitarian Food Assistance), 0.3% of the population (about 40,000 people) are in IPC Phase 5 (Catastrophe) in Akobo, Duk and Ayod counties of Jonglei State; 9.5% of the population (about 1.11 million people) are in IPC Phase 4 (Emergency); and 35.4% of the population (about 4.14 million people) are in IPC Phase 3 (Crisis).

Three counties of Akobo, Duk, and Ayod (Jonglei State) have populations in Catastrophe (IPC Phase 5).

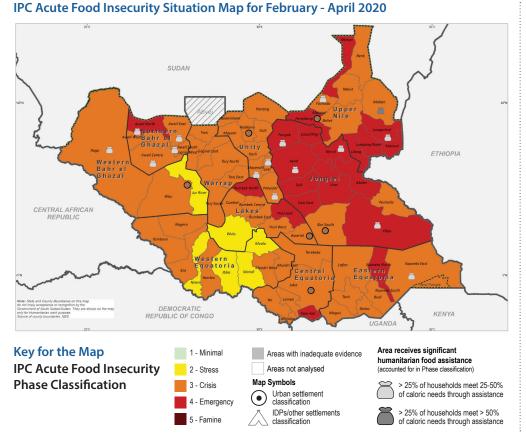
Estimations of populations for current period: January 2020

5 - Famine

State	2019/2020 Population (NBS)	Phase 1 Mimimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe	
		#people	#people	#people	#people	#people		
Central Equatoria	1,453,508	255,000	615,000	485,000	105,000	0	40.4%	
Eastern Equatoria	1,067,162	405,000	320,000	265,000	75,000	0	31.9%	
Jonglei	1,931,052	235,000	435,000	865,000	355,000	40,000	65.3%	
Lakes	1,137,753	165,000	380,000	475,000	115,000	0	52.0%	
Northern Bahr el Ghazal	946,905	145,000	285,000	420,000	100,000	0	54.7%	
Unity	1,059,682	175,000	395,000	430,000	60,000	0	46.2%	
Upper Nile	1,377,076	240,000	405,000	560,000	175,000	0	53.3%	
Warrap	1,222,397	405,000	380,000	340,000	95,000	0	35.7%	
Western Bahr el Ghazal	646,245	165,000	280,000	180,000	20,000	0	31.0%	
Western Equatoria	861,331	355,000	380,000	120,000	10,000	0	15.0%	
Total	11,703,111	2,545,000	3,875,000	4,140,000	1,110,000	40,000	45.2%	

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, due to receiving assistance.

PROJECTED IPC ACUTE FOOD INSECURITY FOR FEBRUARY - APRIL 2020



What is on the map?

A total of 22 counties are classified in Emergency (IPC Phase 4), 50 are classified in Crisis (IPC Phase 3), and 6 are classified in Stress (IPC Phase 2).

What is in the tables?

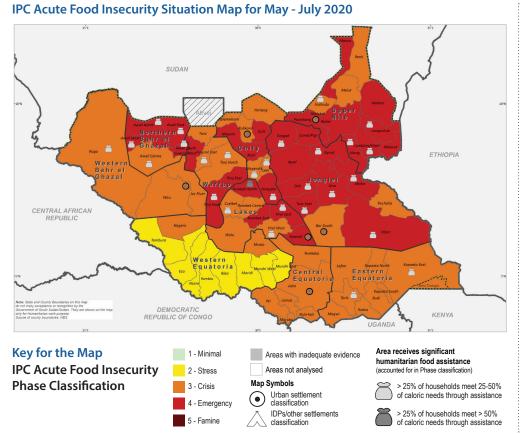
With the planned levels of HFA, 0.2% of the population (about 20,000 people) will be in Catastrophe (IPC Phase 5); 12.6% of the population (about 1.48 million people) will be in Emergency (IPC Phase 4); and 38.6% of the population (about 4.52 million people) will be in Crisis (IPC Phase 3).

Estimations of populations for projected period: February - April 2020

State	2019/2020 Population	Phase 1 Mimimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe	% of Crisis, Emergency &	
	(NBS)	#people	#people	#people	#people	#people	Humanitarian Catastrophe	
Central Equatoria	1,453,508	200,000	585,000	560,000	110,000	0	46.0%	
Eastern Equatoria	1,067,162	260,000	345,000	345,000	120,000	0	43.5%	
Jonglei	1,931,052	180,000	410,000	880,000	445,000	20,000	69.7%	
Lakes	1,137,753	140,000	340,000	495,000	160,000	0	57.7%	
Northern Bahr el Ghazal	946,905	120,000	255,000	430,000	140,000	0	60.3%	
Unity	1,059,682	175,000	335,000	470,000	85,000	0	52.1%	
Upper Nile	1,377,076	200,000	360,000	580,000	235,000	0	59.3%	
Warrap	1,222,397	370,000	310,000	390,000	150,000	0	44.3%	
Western Bahr el Ghazal	646,245	145,000	265,000	215,000	20,000	0	36.4%	
Western Equatoria	861,331	310,000	390,000	150,000	10,000	0	18.6%	
Total	11,703,111	2,100,000	3,595,000	4,515,000	1,475,000	20,000	51.4%	

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, due to receiving assistance.

PROJECTED IPC ACUTE FOOD INSECURITY SITUATION FOR MAY - JULY 2020



What is on the map?

A total of 33 counties are classified in Emergency (IPC Phase 4), 37 are classified in Crisis (IPC Phase 3) and 8 are classified in Stress (IPC Phase 2).

What is in the tables?

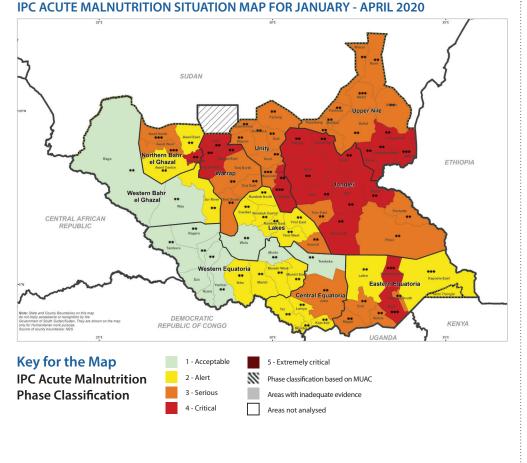
With the planned levels of HFA, 15% of the population (about 1.75 million people) will be in Emergency (IPC Phase 4); and 40.5% of the population (about 4.74 million people) will be in Crisis (IPC Phase 3).

Estimations of populations for projected period: May - July 2020

State	2019/2020 Population (NBS)	Phase 1 Mimimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Catastrophe	% of Crisis, Emergency &	
		#people	#people	#people	#people	#people	Humanitarian Catastrophe	
Central Equatoria	1,453,508	195,000	560,000	595,000	105,000	0	48.1%	
Eastern Equatoria	1,067,162	240,000	390,000	345,000	95,000	0	41.1%	
Jonglei	1,931,052	165,000	360,000	905,000	500,000	0	72.8%	
Lakes	1,137,753	120,000	285,000	535,000	200,000	0	64.5%	
Northern Bahr el Ghazal	946,905	80,000	265,000	410,000	195,000	0	63.7%	
Unity	1,059,682	110,000	290,000	545,000	110,000	0	62.1%	
Upper Nile	1,377,076	170,000	290,000	625,000	290,000	0	66.5%	
Warrap	1,222,397	325,000	245,000	440,000	210,000	0	53.3%	
Western Bahr el Ghazal	646,245	115,000	235,000	255,000	40,000	0	45.7%	
Western Equatoria	861,331	415,000	365,000	80,000	0	0	9.3%	
Total	11,703,111	1,935,000	3,285,000	4,735,000	1,745,000	0	55.4%	

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, due to receiving assistance.

CURRENT IPC ACUTE MALNUTRITION SITUATION FOR JANUARY - APRIL 2020



What is on the map?

IPC According to the Acute Malnutrition (AMN) scale, 20 counties in South Sudan ((Uror, Nyirol, Duk, Akobo, Fangak, Canal Pigi, Bor South, and Ayod (Jonglei State), Longochuk, Luakpiny/Nassir, Melut, Ulang, Melut (Upper Nile State), Leer, Panyijar, (Unity State), Gogrial East, Gogrial West, Twic (Warrap State) and Budi, Kapoeta North (Eastern Equatoria states) and Aweil South (Northern Bahr El Ghazel)) are classified as Critical (GAM 15.0-29.9%). While 28 other counties (Juba, Central Equatoria), Ikotos, Kapoeta South, Magwi, Torit, (Eastern Equatoria), Pibor, Pochalla, Twic East, (Jonglei), Aweil North, Aweil West, (Northern Bahr El Ghazel), Guit, Koch, Rubkona, Mayendit, Abiemnhom, Mayom, Pariang, Rubkona, (Unity), Baliet, Fashoda, Malakal, Maiwut, Manyo, Panyikang, Renk (Upper Nile), Tonj East, Tonj North, Tonj South (Warrap) and Awerial (Lakes)) are classified as Serious (GAM 10-14.9%). Parts of Central Equatoria, Eastern Equatoria and Lakes are classified as Alert (GAM 5-9.9%), while Western Equatoria states and Western Bahr El Ghazel are classified as Acceptable (GAM <5%). According to the IPC AMN scale, 'critical' and 'serious' acute malnutrition status requires urgent action. 'Alert' levels of acute malnutrition requires strengthening existing response capacity and resilience.

OVERVIEW

How Severe, How Many and When – A total of 1.3 million children under five years are expected to suffer from acute malnutrition in 2020 based on the results of the food security and nutrition monitoring system, SMART nutrition surveys and admission trends for 2019. The estimation of the caseload was based on the peak lean season data that provide higher caseload for better informed response planning. Furthermore, new incidence factor of 2.9 and total malnutrition (both MUAC and WHZ) were used as opposed to incidence factor of 2.6 and prevalence based on WHZ only.

Where – In January 2020, 48 counties are classified as Serious (IPC Acute Malnutrition Phase 3 and above): Uror, Nyirol, Duk, Akobo, Fangak, Canal Pigi, Bor South, and Ayod (Jonglei State), Longochuk, Luakpiny/Nasir, Melut, Ulang, Melut (Upper Nile State), Leer, Panyijiar, (Unity State), Gogrial East, Gogrial West, Twic (Warrap State). Budi, Kapoeta North (Eastern Equatoria state) and Aweil South (Northern Bahr el Ghazal state) are classified as Critical (IPC Acute Malnutrition Phase 4). There are 20 more counties classified as Critical (IPC Acute Malnutrition Phase 4). There are 20 more counties classified as Critical (IPC Acute Malnutrition Phase 4). There are 20 more counties classified as Critical (IPC Acute Malnutrition Phase 4) in the 2020 post-harvest season, as compared to 12 in the same period in 2019. Improvements in the nutrition situation within the country were varied. While counties in most states, particularly Western Bahr el Ghazal and Western Equatoria, have shown substantial seasonal improvement in malnutrition, high malnutrition levels have remained Jonglei and Upper Nile states.

Why – The major factors contributing to acute malnutrition include very poor quality and diversity of food (Minimum Acceptable Diet: 5%, Minimum dietary diversity: 17%) and an unexpectedly high prevalence of diseases (above 50%). The high morbidity rate is attributed to flooding that has worsened the spread of malaria and unsafe drinking water. Over 50% of the counties affected by flooding, show critical levels of acute malnutrition (IPC Acute Malnutrition Phase 4). Elevated levels of acute food insecurity (IPC Acute Malnutrition Phase 3 and above) also contributed to acute malnutrition in some counties. Outbreaks of measles in some counties, such as Budi and Aweil South, also had an impact on the nutrition situation in these counties.

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

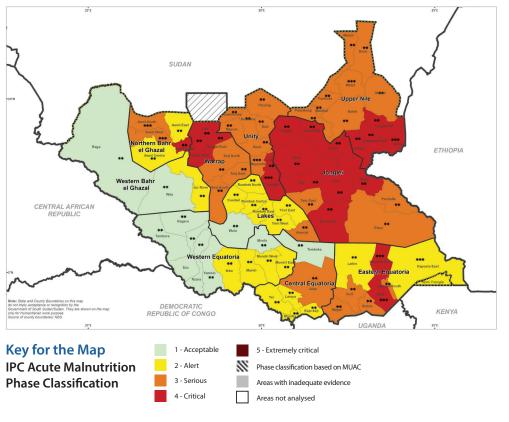
In 2020, there are 1,653,069 people in need (PIN) of treatment for acute malnutrition, including 292,373 children suffering from severe acute malnutrition (SAM), 1,008,696 children suffering from moderate acute malnutrition (MAM) and malnutrition and 352,000 pregnant and lactating women (PLW) suffering from acute malnutrition.

The PIN was calculated by using globally-accepted methods which includes both prevalent and incident cases of acute malnutrition. The acute malnutrition was defined based on the new approach called total acute malnutrition that combine malnourished childrenbased weight-for-height Z-score (WHZ), Mid Upper Arm Circumference (MUAC) measurement and oedema. The incidence correction factor of 2.9 was used for South Sudan based on the finding of the global study conducted by UNICEF and Harvard University.

State	Number of children 6 to 59 month	SAM Burden	MAM Burden	GAM Burden
Central Equatoria	276,166	16,018	78,487	94,504
Eastern Equatoria	202,761	24,108	69,973	94,081
Jonglei	366,900	70,225	234,082	304,307
Lakes	216,173	15,046	92,781	107,827
Northern Bahr El Ghazel	179,912	13,565	70,957	84,523
Unity	201,340	31,530	112,690	144,220
Upper Nile	261,644	53,114	141,131	194,245
Warrap	122,786	13,887	42,730	56,617
Western Bahr El Ghazel	232,255	36,371	108,440	144,811
Western Equatoria	163,653	18,509	57,426	75,935
Total	2,223,591	292,373	1,008,696	1,301,069

Summary of SAM, MAM and GAM caseloads in January 2020

PROJECTED IPC ACUTE MALNUTRITION SITUATION FOR MAY-AUGUST 2020



IPC ACUTE MALNUTRITION SITUATION MAP FOR MAY - AUGUST 2020

What is on the map?

According to the IPC AMN projection analysis, the acute malnutrition situation is likely to deteriorate during the lean season in most counties in the country. A total of 58 counties are projected to be in Serious (IPC Phase 3) and Critical (IPC Phase 4). Counties in Pibor, Twich_East, Uror, Nyirol, Duk, Ayod, Fangak, Canal Pigi, Bor South, Akobo (Jonglei), Abiemnhom, Leer, Mayendit, Panyijar, Pariang (Unity), Budi, Kapoeta North, Kapoeta South (Eastern Equatoria), Baliet, Fashoda, Longochuk, Luakpiny/Nasir, Maiwut, Malakal, Melut, Panyikang, Ulang, Renk (Upper Nile state), Gogrial East, Gogrial West, Twic, (Warrap) and Awerial (Lakes), and Aweil South (Northern Bahr El Ghazel) are projected to be in Critical (GAM 15%-29.9%). On the other hand counties Juba (Central Equatoria,) Ikotos, Kapoeta East, Lafon, Magwi, Torit (Eastern Equatoria state), Cueibet, Rumbek North, Yirol East, Yirol West (Lakes), Aweil Centre, Aweil East, Aweil North, Aweil West (Northern Bahr El Ghazel), Guit, Koch, Mayom, Rubkona, Maban, Manyo, Tonj East, Tonj North, Tonj South, (Warrap) Jur River (Western Bahr El Ghazel) and Pochalla (Jonglei) are projected to be in Serious (GAM 10-14.9%).

OVERVIEW

The prevalence of acute malnutrition seasonally deteriorates during the lean season (May-August) and improves thereafter. The deterioration during the lean seasons is due several factors including: the seasonal changes of food access and availability in households, increased morbidity, as well as poor childcare and infant and young child feeding practices, and limited access to basic services. In the January 2020 IPC AMN analysis, 29 counties are expected to deteriorate to worse IPC acute nutrition status in the lean period. IPC Acute Malnutrition analysis shows that malnutrition situation will deteriorate in most counties due to high food insecurity, increased morbidity/disease outbreaks, poor childcare practices, limited access to basic services and poor infrastructure.

ACUTE FOOD INSECURITY SITUATION OVERVIEW AND KEY DRIVERS

January 2020 to July 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 the same time last year. This deterioration is attributed to the effects of the excessive flooding that happened in late 2019 and affected crop production as well as livestock. In January 2020, an estimated 2.49 million people, representing 57% 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) classification. In the projection period of **February to April 2020**, food security will start to deteriorate and the number of people in Crisis (IPC Phase 3) or worse acute food insecurity will rise to 2.72 million, representing 62% of the population in Greater Upper Nile region. At the **peak of the lean season**, the number of people facing Crisis (IPC Phase 3 or worse) in the Greater Upper Nile region will rise to 2.98 million people, representing 68% of the population in Greater Upper Nile region.

In Jonglei State, food insecurity rose to unprecedented levels during the post-harvest period of January 2020 due to the effects of extensive flooding, at a time when food availability would 'normally' be the most abundant. An estimated 1.26 million people, representing 65% of the state population, faced Crisis (IPC Phase 3) or worse acute food insecurity in January 2020. The eight counties of Akobo, Ayod, Canal/ Pigi, Duk, Fangak, Nyirol, Pibor and Uror were experiencing Emergency (IPC Phase 4) outcomes, with the combined counties of Akobo, Ayod and Duk estimated to have 40,000 people in IPC Phase 5 (Catastrophe). Bor South, Pochalla and Twic East are experiencing Crisis (IPC Phase 3) outcomes due to the effects of flooding. Floods damaged homes and public infrastructure, destroyed crops, increased post-harvest losses, restricted the gathering of wild foods, resulted in considerable population displacement, disrupted market supply and increased commodity prices, and led to significant losses of livestock due to disease and starvation. This also resulted in widespread contamination of water supplies, an unhygienic environment and deteriorating health conditions, exacerbating the vulnerability of an already impoverished and asset-stripped population. Additionally, the macro economic crisis has continued to result in high food prices even at a time of the year when they would seasonally decline. Cattle raiding and intercommunal conflict, involving revenge killings, have continued to result in deaths, loss of livestock, disrupted livelihoods and restricted access to wild foods and fish, especially in Pibor, Duk and Twic East.

In the projection period of **February to April 2020**, an estimated 1.35 million people, representing 69.7% of the state population, are likely to be in Crisis (IPC Phase 3 or worse) acute food insecurity. **Akobo and Duk counties will still have a combined estimate of 20,000 people in Catastrophe (IPC Phase 5)** due to the continuation of conditions that contributed to the existence of Catastrophe (IPC Phase 5) populations in January 2020, which are further exacerbated by the earlier than normal seasonal depletion of stocks. The net seasonal deterioration in the food security situation is largely due to the flood-driven low production of food and associated earlier-than-normal exhaustion of cereal stocks, increased loss of livestock and the movement of animals away from homesteads to cattle camps. Some respite is likely due to extended availability of soil moisture and water for growth of wild foods as well as availability of fish, albeit restricted to locations with access to water bodies and mainly to those with fishing equipment. Significant levels of planned HFA in Ayod, Fangak, Nyirol, Pibor and Uror are likely to mitigate what would otherwise be even higher severity of acute food insecurity. In Akobo, Canal/ Pigi, Duk and Twic East, far lower levels of planned HFA will likely not prevent populations from moving to Emergency (IPC Phase 4) or worse acute food security across all the nine counties.

During the **May to July 2020** projection period, the food security situation is expected to continue to deteriorate throughout most of the state, with an estimated 1.4 million people, representing 72.8% of the state population, are expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. Emergency (IPC Phase 4 or worse) acute food insecurity will likely manifest in Akobo, Ayod, Canal/ Pigi, Duk, Fangak, Nyirol and Uror as the lean season progresses with the seasonal decline in fish and cereal stocks. Pibor will maintain an Emergency (IPC Phase 4) classification but will experience an improvement as the pastoralists' livestock return to the homesteads. Pochalla and Bor South maintain their Crisis (IPC Phase 3) classification throughout the projection periods.

In **Upper Nile State**, all the counties are in Crisis (IPC Phase 3) or Emergency (IPC Phase 4) across all the analysis periods. This persistent acute food insecurity is attributed to excessive flooding, limited livelihood opportunities, high food prices, poor infrastructure, and lack of markets. Sporadic incidents of insecurity are also a contributing factor to the high levels of food insecurity, particularly in the eastern counties of the State such as Maiwut. In January 2020, a typical post-harvest period in the State, an estimated 735,000 people, representing 53% of the state population are facing Crisis (IPC Phase 3) or worse acute food insecurity. During this period, Maiwut, Longochuk, Ulang, and Maban are in Emergency (IPC Phase 4). In Maiwut, food insecurity is driven by insecurity that resulted in displacement, disruption of livelihood activities, and low crop production. In Longochuk, Ulang and Maban, food insecurity is driven by excessive flooding that resulted in displacement, crop destruction, market disruption, and affected livestock. In the projection period of **February to April 2020**, the food security situation in Upper Nile State will deteriorate further and an estimated 815,000 people, representing 59% of the population, are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. During this period, people, people, representing 59% of the population, are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. During this period, people, representing 59% of the population, are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. During this period, people, representing 59% of the population, are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. During this period, people, representing 59% of the population, are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. During this period, people, representing 59% of the population, are likely to be in Crisis (IPC Phase 3) or worse acute food insecurity. During this period,



Longochuk, Nasir, Maiwut, Malakal, Manyo, Panyikang, and Ulang are estimated in Emergency (IPC Phase 4), a situation 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. However, availability of fish will counter some of the resultant food gaps. During the lean season that runs from **May to July 2020**, all counties in Upper Nile State will be in Emergency (IPC Phase 4) except Fashoda, Melut, and Renk that are classified in Crisis (IPC Phase 3). During this period, the effects of the lean season will result in an estimated 915,000 people, 67% of the population, being in Crisis (IPC Phase 3) or worse acute food insecurity. The high levels of food insecurity are driven by lack of stocks, degradation of road infrastructure that limits market functionality and access, increased incidences of water-borne illnesses. Wild foods and livestock products will however be available during this wet season and their consumption will prevent a further deterioration of the food security situation.

In **Unity State**, the food security situation has significantly improved compared to same time last year, with an estimated 490,000 people, representing 46.2% of the state population, facing Crisis (IPC Phase 3) or worse acute food insecurity (as compared to 660,000 people, representing 62.3% in 2019). All nine counties are classified as Crisis (IPC phase 3) due to improvement in security, commercial trade and humanitarian assistance delivery (this involved timely, frequent, and consistent HFA made possible by more efficient prepositioning), improved production against the five year average across the whole state, which has increased food availability. The current improvement appears to be fragile and based largely around unsustainable delivery levels of HFA, thus requiring in the future a gradual shift towards more investment into productive activities. Two counties, Mayom and Abienmhon were affected by floods and this is expected to have a longer lasting effect on high market prices.

In the projection period of **February to April 2020**, a seasonally driven deterioration is expected because households are expected to deplete their cereal stocks, and livestock will migrate out due to lack of forage and water around the homesteads. However, wild foods will likely be available even as households derive both food and income from fishing. In all nine counties, continued delivery of significant amounts of planned and funded Humanitarian Food Assistance (HFA), thanks to a stable security situation, will likely mitigate higher food consumption gaps and maintain Crisis (IPC Phase 3) levels of acute food insecurity. During this period, an estimated 565,000 people will be in Crisis (IPC Phase 3) and Emergency (IPC Phase 4), which representing 52.1% of the state population facing Crisis (IPC Phase 3) acute food security or worse during the post-harvest period.

Between May and July 2020, an estimated 655,000 people, representing 62.1% of the State population are expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. The peak of the lean season will likely result in the lowest levels of food security as households have a high reliance on markets at a time when cereal prices are at their seasonal highest, and wild foods and fish are no longer readily available. In the four counties Guit, Koch, Mayom and Panyijar, food consumption deterioration will be reflected in an area classification of Emergency (IPC phase 4). Notably, Leer and Mayendit will maintain their Crisis (IPC phase 3) classification exclusively due to more planned sustained delivery of HFA, as compared to the other counties in the state.

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 1.1 million people, representing 31% of the region's population are classified in Crisis (IPC Phase 3) or worse acute food insecurity during the January 2020 post-harvest period, an improvement compared to 48% at the same time last year. The reduction in proportion of the population in Crisis (IPC Phase 3) or worse acute food insecurity was driven by a decrease in insecurity incidents, relatively better harvest in 2019 due to improved security, above-normal rainfall based on preliminary CFSAM 2019/2020 data, and recovery in trade flows and market functioning. In January 2020, 14 counties in Greater Equatoria are classified in Crisis (IPC Phase 3) and Emergency⁶ (IPC Phase 4) and 10 are in Stressed (IPC Phase 2). Between **February to April 2020**, food security is expected to deteriorate in all counties of Greater Equatoria as household food stocks will start depleting, and food prices remain high, limiting food access for market dependent households. An estimated 1.3 million people (38% of region's population) are expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. From **May to July 2020**, marginal food security improvements are expected across the entire region due to arrival of some green harvest and seasonal availability of wild foods and fruits, in addition to market access given anticipated relative calm, permitting greater household movement. Fish and livestock products availability is also expected to contribute to overall improvements in food security conditions during this period, notably in semi-arid pastoral areas of Eastern Equatoria. It is estimated that 1.2 million people, representing 36% of the region's population will be in Crisis (IPC Phase 3) or worse acute food insecurity at the peak of the lean season.

In **Central Equatoria State**, an estimated 590,000 people (40.4% of the State population) are in Crisis (IPC Phase 3) or worse during January 2020 post-harvest period as compared to 50% of the state's population classified in Crisis (IPC Phase 3) or worse acute food insecurity in January 2019 period. This improvement in food security conditions, is driven by improved security, trade and market



recovery, better harvest due to above-average rainfall in 2019 based on preliminary CFSAM 2019/2020 data. Additionally, household movement in search of food has improved in most parts of the state relative to last year, with the exception of rural Yei, Morobo, Kajo-Keji and Lainya, where localized insecurity has persisted, despite ongoing peace deal implementation. However, food consumption gaps, typical of Crisis (IPC Phase 3) outcomes have persisted in all the 6 counties of the state due to high food prices, localized insecurity limiting food access, increased returnees, in addition to flood-induced crop losses especially in Mangalla and Rokon of Juba as well as parts of Terekeka. Between February and April 2020, relative calm is expected to prevail in most parts of the state, permitting physical access to markets, fish and wild foods. However, household food stocks are expected to deplete, and food prices likely to remain high, limiting household access to foods through markets, in addition to seasonally reduction in livestock products, and expectation of inter-communal conflicts or cattle-raiding especially in Terekeka. As a result of this, households are expected to face food consumption gaps during this period, and an estimated 670,000 people (46% of the State population) are expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. Five counties, including Juba, Lainya, Yei, Morobo and Terekeka will be in Crisis (IPC Phase 3). Emergency (IPC Phase 4) is likely in Kajo-Keji due to expected refugee returnees, who are likely to put additional pressure on the available food sources. From May to July 2020, further deterioration in the food security situation is expected as the lean season progresses and peaks in July. However, some improvements in food security conditions are expected as some green harvest availability begins in July, hinged on the expectation of a timely onset of the March-May rainfall in bi-modal areas, and improved security allowing access to far fields. Additionally, fish, wild foods, and livestock products are expected to seasonally become available. An estimated 700,000 people (48.1% of the State population) will be in Crisis (IPC Phase 3) or worse acute food insecurity. All of the 6 counties of Central Equatoria State are expected to be in Crisis (IPC Phase 3).

In **Eastern Equatoria State**, an estimated 340,000 people (31.9% of the State population) are classified in Crisis (IPC Phase 3) or worse acute food insecurity in January 2020 compared to 56% at the same time last year. The improvements in food security conditions are driven by improved security, availability of food stocks at household level, livestock products, game meat, and market access. Despite these improvements, food security remains concerning in 5 counties, including Kapoeta North, Kapoeta East, Budi, Kapoeta South and Lafon/Lopa which are classified in Crisis (IPC Phase 3) or worse due to high food prices, inter-communal conflicts and cattle-raiding, in addition to flood-and-pest related crop losses. From **February to April 2020**, the food security situation is expected to deteriorate in all counties in Eastern Equatoria state due to expectation of high food prices, depletion of household food stocks, seasonally limited availability of wild foods, and reduction in livestock products as livestock migrate to dry season grazing areas. An estimated 465,000 people, representing 43.5% of State population, will likely be in Crisis (IPC Phase 3) or worse acute food insecurity during this period. Two counties, including Kapoeta North and Kapoeta South will be in Emergency (IPC Phase 4), while the remaining 6 counties will be in Crisis (IPC Phase 3). From **May to July 2020**, marginal improvement in the food security situation are expected as livestock return near homesteads, and some green harvest and wild foods become seasonally available to households. It is estimated ta40,000 people (41% of the State population) will be in Crisis (IPC Phase 3) or worse acute food insecurity during the peak of the lean season.

In Western Equatoria State, where relative calm has persisted throughout 2019, and the June to September rainfall was above average, crop production was higher than last year based on preliminary CFSAM 2019/2020 data. As a result, the population classified in Crisis (IPC Phase 3) or worse acute food insecurity has reduced from 33% in January 2019 to 15% in January 2020 post-harvest period. In January 2020, an estimated 130,000 people, representing 15% of the state's population are classified in Crisis (IPC Phase 3) or worse acute food insecurity. Seven counties are in Stressed (IPC Phase 2) and only 3 counties, including Nagero, Mundri East and Yambio are in IPC Phase 3 due to high food prices, and presence of refugee returnees, and IDPs. From February to April 2020, the food security situation is expected to deteriorate in more than half of the counties as food stocks start to deplete, and food prices are likely to remain high this period, in addition to expectation of more spontaneous refugee returnees likely to put additional pressure on the available food sources. Despite the peace deal's implementation, some incidents of road banditry are likely to persist, particularly along the Juba-Mundri-Maridi and Yei-Maridi roads, limiting trade flows and market supplies. Given this, an estimated 160,000 people (18.6% of the State population) are expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. Six counties, including Nagero, Yambio, Mundri East, Mundri West, Ezo and Tambura will be in Crisis (IPC Phase 3), while 4 counties, including Maridi, Mvolo, Nzara and Ibba will be in Stressed (IPC Phase 2). From May to July 2020, the food security situation is expected to improve because of normal to above-normal rainfall forecast based on GHACOF 54, expectation of improved security, some green harvest, and wild foods and fruits that are expected to be seasonally available to households, thereby mitigating food consumption gaps. An estimated, 80,000 people, representing 9.3% of the state's population are projected to be in Crisis (IPC Phase 3) or worse acute food insecurity—nearly half of the population classified in Crisis (IPC Phase 3) or worse during the February to April 2020 period.

Factors to be monitored across greater Equatoria region include: spontaneous refugee returnees; prices of key cereals; the March-May rainfall performance; and desert locust infestation in Eastern Equatoria and Central Equatoria States.



Greater Bahr el Ghazal region

In the **Greater Bahr el Ghazal** region, an estimated 1.75 million people experienced Crisis (IPC 3) or worse acute food insecurity in January 2020 – approximately 44% of the population in the region. The proportion of people experiencing acute food insecurity reported in **January 2020** slightly decreased compared January 2019. Increased access, both physical and among humanitarians, and increased cereal production has supported a decline in the number of people experiencing Crisis (IPC 3) or worse food insecurity in Greater Bahr el Ghazal compared to the same time last year. However, continued incidents of inter-communal conflict, market disruptions and prolonged depletion of household assets continued to limit household food availability and coping capacity.

Across all the states in the Greater Bahr el Ghazal region, the key drivers of food insecurity are climatic shocks, increased instances of inter-communal violence and unfavorable terms of trade for majority of the households, coupled with reduced market access due to prolonged rainfall and flooding in multiple locations. Cereal production in Northern Bahr el Ghazal was reportedly 22% below 2018 production levels – although Western Bahr el Ghazal and Lakes states reported an increase of 29% and 12% respectively. Additionally, GAM prevalence deteriorated due to the limited access to and availability of food during this period coupled with seasonal increase in morbidity – such as malaria, and lack of adequate access to health services.

The start of the **February to April 2020** projection period will likely result in depletion of food stocks for the worst off households coupled with increased market dependency and reliance on natural resources. Overall, through both projections, availability and access to food is likely to deteriorate across the region. During the first projection, it is expected that all counties will experience an increase of people facing Crisis (IPC Phase 3) or worse acute food insecurity. A relative decrease in food availability is expected, particularly in Norther Bahr el Ghazal. However, a year on year increase in production for the majority of the region will likely result in food stocks lasting longer than in 2019. During the second projection period of **May to July 2020**, the high number of people experiencing an elevated severity of acute food insecurity demands close monitoring of the major risk factors.

In Western Bahr el Ghazal State, an estimated 200,000 people (31% of the state population) are in Crisis (IPC Phase 3) or worse, which represents a large improvement compared to January 2019 (51% were in IPC Phase 3 or above). This improvement can largely be attributed to the relative stability of the security situation, which has enabled greater physical movement and trade flows. Additionally, harvests have reportedly been good and households have access to fish and wild foods. However, high market prices remain a barrier to food access. This is especially salient in Wau county, where there has been a decrease in the proportion of households engaged in agriculture, with many households relying on casual labour for income.

In the projection period of **February to April 2020**, food security is expected to deteriorate slightly (with 36% of the residents in IPC Phase 3 and above), primarily because of persistently high market prices that are limiting access to food from markets. However, security conditions are expected to remain stable, allowing stability in food availability.

The most significant deterioration of the food security situation is expected to take place during the second projection period of **May to July 2020**, when 46% of the population is expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. By this time, food stocks will likely have run out and market prices are expected to increase even further. This will disproportionately affect households who did not cultivate crops and who rely on casual labour (including IDP households), as fewer opportunities for casual work may also be available during this period.

In Warrap State, flooding has negatively affected crop production in large areas of the state, especially where residents had planted late following a dry spell earlier in the season. Further challenges to food security include the absence of milk in households as livestock migrate to distant grazing areas and continued insecurity in Tonj East and Tonj South counties, which has reportedly limited access to markets, agricultural lands, and fishing grounds. An estimated 435,000 people, representing 36% of the population, are in Crisis (IPC Phase 3) or worse acute food insecurity.

Food security is expected to deteriorate significantly in both projection periods. Between **February and April 2020**, with 44% of the population expected to be in Crisis (IPC Phase 3) or worse acute food insecurity, as food stocks start to deplete and livestock remain in distant pastures away from homesteads, limiting access to livestock products such as milk. Insecurity will likely continue to limit access to food sources in the affected areas. Elsewhere, however, markets are expected to remain an important source of food for households, albeit with high commodity prices.

In the second projection period of **May to July 2020**, food stocks are expected to fully deplete for majority of households. Additionally, the flow of goods to markets will likely decrease and markets will become less accessible to households in Warrap state as the wet conditions degrade road networks and hamper physical movement. Consequently, 54% of the population is expected to be in Crisis (IPC Phase 3) or worse acute food insecurity. However, the return of livestock to homesteads, and the resulting improved access to milk and other livestock products will mitigate the deteriorating food security conditions.

Lakes State has experienced a decline in the number of people experiencing Emergency (IPC Phase 4) acute food insecurity. In all counties in Lakes State, the proportion of people in Crisis (IPC Phase 3) or worse acute food insecurity has decreased from to 52% in January 2020 compared to 61% in January 2019. Yirol East, Yirol West and Awerial have experienced a slight improvement with



an approximate 10% decrease in Crisis (IPC Phase 3) or worse acute food insecurity – linked to positive rainfall patterns, improved harvests and relative stability. Rumbek East, Rumbek Centre, Rumbek North and Cueibet counties have experienced a relative decline in the proportion of population in Crisis (IPC Phase 3) or worse acute food insecurity – the relative decrease is less than in counties found in eastern Lakes State. Additionally, high levels of inter-communal violence continue to disrupt livelihoods, with Rumbek North experiencing Emergency (IPC Phase 4) acute food insecurity for 25% of the population. During the first and second projections, livelihoods are expected to continue to be disrupted due to inter-communal violence and Crisis (IPC Phase 3) or worse acute food insecurity is expected to increase, with Yirol East, Awerial, Rumbek North and Rumbek East counties expected to be in Emergency (IPC Phase 4).

In Northern Bahr el Ghazal State, the food security situation has remained largely the same, with 55% of the population experiencing Crisis (IPC Phase 3) or worse acute food insecurity, compared to 57% in January 2019. The largest drivers of acute food insecurity are high market prices and general destruction of crops by floods. All counties in Northern Bahr el Ghazal reported a decrease in net cereal production compared to 2018 – with a statewide reduction of 22%. Aweil North county reported the most severe levels of acute food insecurity in the state with 20% of the population having experienced Emergency (IPC Phase 4) acute food insecurity. Given the low production rates and already high market dependency, the state is expected to deteriorate through the two projection periods. Many households are expected to deplete food stocks between February and April 2020 and increase dependence on natural resources, petty trade and humanitarian assistance to mitigate food consumptions gaps. During the second projection of May to July 2020, the food security situation will deteriorate further as market prices increase because of increased demand and reduced supplies, and more households depend on wild foods and engage in negative coping strategies to mitigate food consumptions gaps. Given the low livestock ownership, the seasonal access to milk would be minimal – further limiting quality and quantity of food consumed. As a result, it is projected that Aweil North, Aweil East, Aweil South and Aweil West will experience Emergency (IPC Phase 4) levels of acute food insecurity, and Aweil Centre will be in Crisis (IPC Phase 3).

Factors to monitor across Greater Bahr el Ghazal include the effects of flooding, crop pests and diseases, market price trends, and the impact of inter-communal conflict on households' access to livelihoods, markets and services.

Key Drivers

Food availability: Despite a 10% increase in cereal production this year, demand for cereals outstripped supply because of cereal deficits largely driven by flooding, low number of farming households and small planted area. Consequently, for majority of households, their cereal stocks will last for not more than 3 months.

Access to food: The ongoing economic crisis continues to make it difficult for majority of households to access food from markets because of their diminished purchasing power and high food prices. Reduced demand and very thin market for commodities does not provide much incentive for traders to import food and this has led to poorly functioning markets that get worse during the rainy season when road conditions deteriorate and cut off supplies to the markets. The effects of the conflict have also led to depletion of assets and disruption of livelihoods, further contributing to reduced income for purchasing food.

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 are high and require significant investment to address them.

ACUTE MALNUTRITION SITUATION OVERVIEW AND KEY DRIVERS

Situation Overview

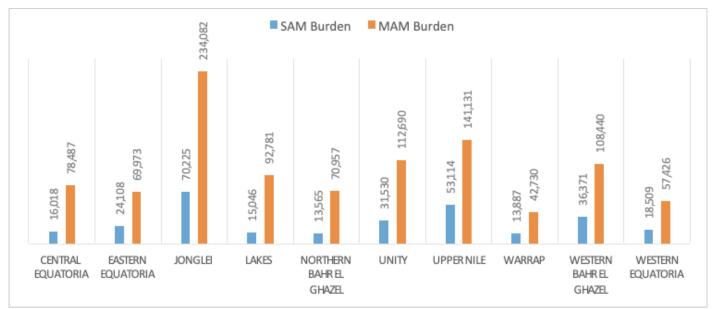
Based on the IPC Acute Malnutrition, all 78 counties were included in the analysis, 48 of which are classified as Serious (Acute Malnutrition Phase 3) and above. Counties of Uror, Nyirol, Duk, Akobo, Fangak, Canal pigi, Bor South, and Ayod (Jonglie state), Longochuk, Luakpiny/Nassir, Melut, Ulang, Melut (Upper Nile State), Leer, Panyijar, (Unity State), Gogrial East, Gogrial West, Twic (Warrap State) and Budi, Kapoeta North (Eastern Equatoria states) and Aweil South (Northern Bahr El Ghazel) are classified as Critical (IPC Acute Malnutrition Phase 4). No county was classified as Extremely Critical (IPC Acute Malnutrition Phase 5). At least 1.3 million children aged 6-59 months (under-five) are expected to suffer from acute malnutrition in 2020 based on the results of the SMART nutrition surveys, Food Security and Nutrition Monitoring System (FSNMS), and admission trends from 2019. An increase of 578,580 in the burden of acute malnutrition was observed in 2020 as compared to 2019. The change in the burden is partly due to deteriorating malnutrition (70%) situation and partly due to methodological change (30%). Malnutrition rates in Upper Nile and Jonglei have remained high from the 2019 lean season while significant improvement was observed in the rest of the county specifically, Western Equatoria and Unity

Unexpectedly high morbidity during the post-harvest season (58%), poor quality and dietary diversity contributed to the high level of acute malnutrition in South Sudan (Minimum Acceptable Diet: <5%, Minimum dietary diversity: <15%). Caring and feeding practices of children directly affect the nutritional status of children under two years of age and, ultimately, impact child survival. Additionally, high food insecurity contributes to high level of acute malnutrition.

IPC Acute Malnutrition current analysis was based on domain analysis of FSNMS round 25, county based SMART surveys of September to December 2019. The FSNMS managed to provide both improved data quality and access to most counties in round 25. This provided the possibility of re-analysis of data at county and livelihood levels.

Key Drivers

Major contributing factors to acute malnutrition identified during the analysis are the unexpectedly high morbidity partly attributed due to the flooding in over 27 counties in South Sudan. The proportions of children that reported illness two week prior to the survey was 58%, an unusual trend in the post-harvest season. Furthermore, the extremely poor quality and diversity of food intake by children and poor WASH services. It is noted that the quality of food intake is poor across the country and even in states where acute food insecurity is low (based on IPC analysis). This suggests that it may be related to behaviour and/or lack of awareness of child feeding practices among caregivers.



Burden of Acute Malnutrition in 2020



RECOMMENDATIONS FOR ACTION

Food Security

Humanitarian food assistance must be scaled up immediately to save lives and prevent total collapse of livelihoods in the Payams where populations were classified in Catastrophe (IPC Phase 5) as well as for the populations classified in Emergency (IPC Phase 4). Furthermore, nutrition partners should collect nutritional and mortality data in the flood-affected Payams in Jonglei State to ascertain 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 cessation of isolated insecurity incidents;
- Scale-up provision of humanitarian assistance (in kind and cash transfers) to counties in Crisis (IPC Phase 3) and above in order to cover at a minimum the six most food insecure months of the year;
- Provide livelihood support through improved market access, provision of seeds & tools (farm inputs) to stimulate production back to surplus levels in the more productive and stable counties;
- Maintain support to small scale subsistence producers (often the pastoral/ agro-pastoral areas) in less agricultural productive locations and include veterinary support (animal health);
- Scale up and improve access to basic services: WASH and health service delivery year-round; plus emergency nutrition, especially during the lean season; and
- Close monitoring of at-risk counties where food insecurity is high, with populations in Emergency (IPC Phase 4) and above.

Nutrition

The multi-sectoral component of acute malnutrition and the enabling factors within the country are clear drivers of the significant deterioration of the nutrition situation in South Sudan. This has led to an increased projection of children likely to suffer from acute malnutrition in 2020 indicative of a looming nutritional emergency that need to be addressed urgently and extensively. In 2020, about 1.3 million children will need nutrition assistance in the country, including about 300,000 and 1.0 million children projected to be severely and moderately malnourished, respectively. It is, therefore, necessary to adopt a paradigm shift and move from clinical and crisis approach to preventive and community-based approach. There is urgent need to extend the response to vital gap areas, ensure adequate intake of diverse diet, multi-sectoral collaboration and redefine community outreach structures to strengthen the resilience of populations and reduce their vulnerability to shocks. This also involves identifying areas of convergence with development partners and multi stakeholder involvement to address all forms of malnutrition.

PROCESS, METHODOLOGY AND LIMITATIONS

Process and Methodology

Food Security Analysis: The January IPC acute analysis was attended a multi-agency and multi-sectoral group of about 110. A parallel IPC acute malnutrition analysis was also conducted during the same period as the IPC analysis. State analysis teams conducted separate state level analyses and were vetted by the South Sudan IPC Technical Working Group, technical consensus reached on each area outcomes, and results reported. The primary source of data was from the 25th round of the Food Security and Nutrition Monitoring System (FSNMS) survey, and additional data from preliminary CSFAM results, SMART surveys, 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 the current analysis period and considered the impact of HFA.

Following the conclusion of the IPC analysis process in Aweil, the three counties of Akobo, Duk and Ayod remained in contention in regards to the proportion of populations in Catastrophe (IPC Phase 5) in the current and two projection periods. After several TWG meetings in Juba, with technical support from the IPC GSU, the TWG finally reached consensus on the IPC Phase 5 (Catastrophe) population distributions across the three counties.

Nutrition Analysis: A team of 21 experts and analysts on nutrition, health and statistics from South Sudan, with the support from the IPC Global Support Unit, carried out the analysis using the standard IPC Acute Malnutrition (AMN) methodology. The IPC AMN analysis was conducted from 22-31 January 2020.

The data on the outcome indicator GAM came from the FSNMS domain analysis (reanalyzing data by group counties with similar characteristics), SMART Nutrition Surveys and FSNMS survey conducted in October-December 2019. For information on other indicators and contributing factors, a range of documents and reports were used – e.g. food security assessment reports, admission trends, FSNMS data on mobility, infant feeding etc. State teams conducted analysis of their respective counties and a two-day vetting was held thereafter.

Limitations of the Analysis

Food Security Analysis: Insecurity resulted in data collection challenges in Maiwut with only 6 out of 9 clusters covered.

Nutrition Analysis: The number of county-based surveys were limited in number to cover all the counties for the analysis period. To cover for this gap, FSNMS data was used by clustering counties with similar characteristics into domain to get the meet the required number of cluster and children per domain.

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 or 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 to indicate that the amount of HFA was substantial enough to have an impact. 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 are 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 Food Insecurity 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).

Contact for further Information

Pangech, John Chairman of the South Sudan TWG jo.pangech@yahoo.co.uk

IPC Global Support Unit www.ipcinfo.org

This analysis has been conducted under the patronage of the Government of South Sudan.

Classification of food insecurity and malnutrition conducted using the IPC protocols, which are developed and implemented worldwide by the IPC Global Partnership - Action Against Hunger, CARE, CILSS, EC-JRC , FAO, FEWSNET, Global Food Security Cluster, Global Nutrition Cluster, IGAD, Oxfam, PROGRESAN-SICA, SADC, Save the Children, UNICEF and WFP.