Half of Juba’s households face food insecurity

Juba’s food insecure population has more than doubled since July 2015, with hikes in the cost of food and fuel rendering 51 per cent of households food insecure, according to a new survey by food security and nutrition partners.

An estimated 260,280 people in the country’s capital city are now estimated to be food insecure. Given the stress households are facing, more than 80 per cent have resorted to crisis or emergency coping strategies. Over 90 per cent of households have reduced the number of meals they eat per day and 53 per cent have spent entire days without eating. Limiting the size of meals was reported by 98 per cent of the households, and in 88 per cent of households, adults had reduced their own food consumption in order for small children to eat. Borrowing of food, eating unusual wild foods and skipping days without eating more than tripled compared to 2015.

The deteriorating food security situation in Juba is mainly attributed to the unprecedented rates of inflation, deteriorating South Sudanese pound, loss of employment opportunities, asset stripping and eroded purchasing power. In October 2016, South Sudan’s inflation rate was 836 per cent; the highest in the world. The situation has been exacerbated by poor access to basic services, the crowded living environment, the July 2016 conflict and insecurity around Juba impeding trade.

The price of food has sky-rocketed due to hyperinflation, with the cost of a typical urban expenditure basket quadrupling between August 2015 and September 2016. Households now spend some 67 per cent of their overall expenditure on food, up from 31 per cent a year ago. Around 98 per cent of households in Juba depend on the market for food, and poor households – particularly those who host an orphan or have a disabled or chronically ill member - are finding it extremely difficult to afford food.

Rising food insecurity in Juba is indicative of the unprecedented food insecurity now faced across large swaths of the country. Some 3.7 million people in South Sudan are estimated to be severely food insecure from October to December 2016, the highest levels experienced at harvest time and an increase of 1 million people compared to the same period last year. Food insecurity is likely to worsen from January to April 2017 and is expected to peak during the lean season from May to July 2017 to the highest levels ever seen in the lean period.

Conflict, displacement disrupt HIV treatment

As the world marked World Aids Day on 1 December, conflict and displacement in parts of South Sudan were adversely affecting HIV treatment and response, while worsening the vulnerability of women and girls to infection.

There are an estimated 179,000 people living with HIV in South Sudan, of whom more than 19,500 are on treatment. HIV prevalence is highest in the Greater Equatoria region, where fighting and insecurity have escalated since July 2016, displacing tens of thousands of people.

Prior to the latest clashes, the Greater Equatoria region hosted about 90 per cent of patients on treatment. However, thousands of people living with HIV have been cut off from the health facilities where they normally access antiretroviral therapy and HIV care services as a result of the conflict. Some health facilities that provided HIV care have been looted or attacked. The fighting in July and subsequent months has also disrupted the planned distribution of treatment and diagnosis commodities for the third quarter of the year.

A rapid assessment of HIV treatment sites across South Sudan in August found that about 25 per cent of health staff engaged in HIV care services were no longer available at health facilities. In some of the locations hardest hit by conflict – including Wau in Western Equatoria and Ezo, Tambura and Source Yubu in Western Equatoria - health care providers fled with their communities, leaving facilities unattended. Most health facilities also reported that their health care providers had not been paid salaries or incentives for over three months.

Women account for more than half of the people living with HIV in South Sudan and have faced increasing exposure due to economic decline and conflict. Sex work and transactional sex have been used as negative coping mechanisms during the economic crisis, while survivors of sexual violence are often unable to access support, including vital preventative treatment such as post exposure prophylaxis.

Nearly 3 out of every 100 adults in South Sudan are living with HIV, according to UNAIDS. Even prior to the conflict, most health facilities providing HIV care in South Sudan were operating sub-optimally due to limited infrastructure - including laboratory services, logistics and supply chain management – and challenges in ensuring fuel for power supply.

Unity: Fighting deepens humanitarian crisis

Sporadic fighting persists in parts of Unity forcing thousands of people from their homes and exposing some of them to killings, abductions, rape, destruction, and looting of their homes and property.

Fighting has been reported in Buor, Mirnyal and Dablual areas of Mayendit County, Nhialdiu and Kalaj areas of Rubkona County, and Ding-Ding in Leer County in recent weeks. Partners report that small numbers of displaced people continue to arrive into Mayendit town, fleeing intensified fighting in northern villages of the county and parts of Leer. In addition, there are now an estimated 1,600 people seeking refuge near the UNMISS Temporary Operating Base (TOB) in Leer town. Those fleeing their homes report increased targeting of civilians. Houses and properties of both IDPs and host communities have been, looted, destroyed and set on fire. Humanitarian facilities including offices, health and nutrition centres have also been damaged and looted in Leer, Thonyor and Thakel.

The clashes have aggravated the already dire humanitarian situation in Unity, where over 534,000 people were already displaced by violence and food insecurity. Flooding, acute watery diarrhoea and cholera are exacerbating the already precarious health situation in Leer and Mayendit North, where suspected health-related deaths, particularly of women and children, have been reported. As of 1 December, 42 cholera cases, including one death, had been reported in Leer and 331 in Rubkona county. Unity also faces some of the highest rates of food insecurity and acute malnutrition, with an average global acute malnutrition rate of around 26.2 per cent, far above the emergency threshold of 15 per cent.

As the situation worsens, partners are stepping up efforts to reach those most in need.
Partners from Bentiu conducted a three-day mission to Leer town in November to address the immediate needs of people sheltering at the UNMISS TOB. The team provided health, nutrition and WASH assistance.

Civilians at the TOB reported serious protection concerns, with women reporting that they were raped while fleeing the fighting and are at risk of rape when they go outside the TOB to collect firewood. Community members indicated that they came to the TOB for safety and said they did not travel to Bentiu PoC or the islands because the journey was more dangerous and they feared that young children and the elderly would not be able to make it.

In order to reach people in safety and ensure they are not endangered by the delivery of assistance, partners have had to devise alternative and creative modalities, including canoing supplies on 18-hour trips to access communities in distress. In the last two weeks, partners have delivered 1,000 survival kits to displaced communities in Leer County, some on islands in the middle of the Sudd swamp. A survival kit is a collection of essential, multi-sectoral life-saving items that are easily transported by foot and aim to improve people’s ability to survive in remote locations where they are cut off from access to basic items.

This year’s flare-up in violence in Unity recalls last year’s clashes in the same areas, when tens of thousands of people were displaced and horrendous atrocities against civilians were reported.

**Bureaucratic impediments, access constraints increase**

One hundred humanitarian access incidents were reported in South Sudan in November 2016, the highest number recorded in any one month since June 2015 (120). This follows the trend of increased access incidents reported in the second half of 2016. Since July, the monthly average has been 90 incidents, compared to an average of 63.5 per month during the first half of the year.

Of the 100 humanitarian access incidents recorded in November, about 66 per cent involved violence against humanitarian personnel or assets, while 26 per cent involved interference in humanitarian action, including interference in administrative matters (5), illegal or arbitrary taxation (7) and expulsion of staff (2). Also in November, aid workers were denied access to areas outside of Yei town in Central Equatoria and Wau town in Western Bahr El Ghazal, where tens of thousands of people are in need of assistance and protection.

“Humanitarian organizations in South Sudan are striving every day to save lives and alleviate suffering across this country,” said the Humanitarian Coordinator for South Sudan, Eugene Owusu. “Yet, they continue to face obstacles and challenges which hamper their efforts. This must stop.”

“It is vital that we see the commitments made in high-level fora fully translate into real, tangible and immediate improvements in the operating environment.”

- Humanitarian Coordinator Eugene Owusu
“I am tremendously proud of the aid workers across this country who are working tirelessly day-in and day-out to help people in need,” said Mr. Owusu. “I call on all parties to allow free, safe and unhindered humanitarian access so that our colleagues can reach and assist people whose lives have been torn apart by this crisis. Regardless of where they are in the country, civilians in need have a right to receive help.”


Call to end sexual violence in South Sudan

The 16 Days of Activism Against Gender-Based Violence is being marked in South Sudan with an impassioned plea by partners to immediately end rampant gender-based violence (GBV).

Since the beginning of the crisis in December 2013, GBV has been a major protection concern in South Sudan. Myriad forms of violence have been reported across the country, including widespread rape, demands for sex for food and safe passage, sexual slavery, widow inheritance, early and forced marriage, forced recruitment and abuse of children, and intimate partner violence.

The Gender-Based Violence Information Management System (GBVIMS) recorded more than 2,000 incidents of GBV from January to September 2016. However, humanitarian partners believe that the reported incidents represent only the tip of the iceberg due to the stigma and retaliatory violence often associated with reporting GBV and survivors’ limited access to reporting mechanisms and services.

Intimate partner violence is the most commonly reported form of GBV, accounting for nearly half of the incidents recorded by GBVIMS in 2016. Different forms of sexual violence (rape, sexual assault, forced and early marriage and sexual slavery) were the second most reported types of GBV. More than one in five cases of GBV reported to humanitarian partners involved sexual violence, mainly perpetrated by armed actors.

Women and girls who are displaced face heightened risks of sexual violence, particularly by armed actors, with rape used as a weapon of war throughout the conflict. During the outbreaks of fighting in Wau in February and June and Juba in July 2016, hundreds of women reported being subjected to rape and gang rape. There have also been reports of attacks in Bentiu, Leer, Malakal, Yambio and other locations across the Equatorias, including abductions and rapes. These attacks often occur at armed checkpoints. There have also been multiple reports of sexual violence perpetrated against women and girls who leave Protection of Civilians (PoC) sites to gather firewood and food. Armed attacks that damage health facilities and the presence of armed actors in hospitals often prevent survivors from accessing life-saving interventions, including post-rape treatment.

Observed from the International Day to End Violence against Women on 25 November through 10 December, Human Rights Day, numerous events have been organized across South Sudan as part of the 16 Days of Activism, a campaign aimed to raise public awareness to end the violence against women and girls that affects many in the country.

At the launch ceremony in Juba, the UN Resident and Humanitarian Coordinator, Eugene Owusu, said: “No matter which prism one looks through, gender-based violence is a gross violation of individual’s dignity and their human rights and a serious obstacle to the country’s development. Not only does violence against women and girls have negative consequences for those who suffer it, but crucially it adversely affects families, the community and society at large.”


Fighting, insecurity persist in the Greater Equatoria

Violence in the Greater Equatoria region continues to cause people to flee their homes and restrict access to their livelihoods, nearly five months after fighting erupted in Juba on 7 July.
The refugee outflow to neighbouring countries continues, with an average of 2,480 South Sudanese arriving in Uganda each day in November. More than 405,000 South Sudanese refugees have now fled to Uganda since the beginning of 2016. The majority of refugees arriving in Uganda are coming from the Greater Equatoria region of South Sudan, particularly from Yei, Morobo, Lainya, and Kajo-Keji. Refugees report fleeing extreme violence in South Sudan, including: ethnically motivated killings; rape and sexual abuse of women and girls; forced recruitment of boys and men; attacks on homes; and looting and burning of villages, property and livestock. They also report hunger, lack of access to basic services, and the soaring cost of living as reasons for their flight.

Refugees report having to walk through the bush for several days to reach Uganda, usually with few belongings and limited access to food, water and other necessities. More than 1,800 South Sudanese refugees have reached Uganda through the Democratic Republic of Congo (DRC). Refugees interviewed reported roadblocks and insecurity between Morobo and Kaya as reasons for travelling through DRC. DRC itself is now hosting more than 60,200 refugees from South Sudan, most of them new arrivals, and there have been reports of movement of people from Eastern Equatoria towards Kakuma refugee camp in Kenya via Kapoeta, Narus and Nadapal.

People also continue to be internally displaced by the fighting. Recently, Kajo-Keji has seen the arrival of several thousand people. This includes displaced people who have arrived at Kala mainly from Morobo, Lainya and Yei, as well as South Sudanese who had previously fled to Uganda and have returned to South Sudan, temporarily settling at Liwolo.

In Central Equatoria, reports of targeted killings, rapes, abductions and restrictions on civilian freedom of movement persist in Yei. People remain cut off from their crops: the current harvest has not been collected, leaving crops to rot, and planting for the next harvest has not been able to take place. In Western Equatoria, tensions reportedly remain high in areas surrounding Yambio, impacting on civilians’ freedom of movement. There are reports that an armed actor was blocking civilians from accessing Nabiapai market in Gangura Payam and that market structures were burnt and goods looted during clashes between the armed actor and armed forces on 26 November. In Eastern Equatoria, there have been reports of increasing tensions in Ayacii in Magwi County, with civilians moving to Uganda in fear of potential clashes.

Despite the challenges, humanitarians are responding to those in need. In Yei, about 5,000 of the most vulnerable families have received household items such as blankets, sleeping mats, jerry cans, soap, buckets, mosquito nets, kitchen sets, and sanitary pads and underwear for women and girls of reproductive age. In Eastern Equatoria, an inter-agency team deployed to Lafon on 1 December for a three-day mission. The team carried with them life-saving medical supplies and undertook an Inter-Agency Rapid Needs Assessment (IRNA) to inform the next stage of the response. Lafon, which is about 96 km from Torit, has been largely inaccessible for humanitarian partners after heavy clashes in mid-August 2016. During the clashes, the population of Lafon centre fled to the bush for over a week and there was heavy looting of both civilian homes and the health centre, schools and nutrition supplies by armed actors.

Read more: [UNHCR Uganda sitrep](http://bit.ly/2h1X1qC)

For further information, please contact:
Frank Nyakairu, Head of Communications and Information Management, nyakairu@un.org
Guiomar Pau Sole, Public Information Officer, pausole@un.org

OCHA humanitarian bulletins are available at: [www.reliefweb.int](http://www.reliefweb.int)