Humanitarian Bulletin South Sudan | Monthly Update

April 2014



\$1.27bn

Funding needed for humanitarian action by June 2014.

(FTS.org, 30 April 2014)

39%

Funding received against requirements in the CRP.

(FTS.org, 30 April 2014)

3.7 million

People at high risk of food insecurity

(IPC, January 2014)

3.2 million

People targeted by projects in the Crisis Response Plan by June 2014.

(OCHA)

1.3 million

People provided with humanitarian assistance since the start of the crisis.

(OCHA, 2 May 2014)

237,734

Refugees living in South Sudan.

(UNHCR, 30 April 2014)



people into a swamp. Aid agencies are working to improve conditions in the base (Credit: OCHA)

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Highlights

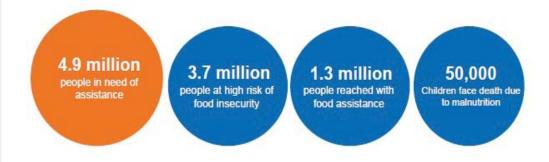
- The humanitarian community in South Sudan called for 30 days of tranquility in the month
 of May to allow people to move freely.
- Up to 50,000 children could die if malnutrition detection and treatment services are not promptly scaled up in 2014.
- Shelter partners are scaling up response to meet the needs of newly displaced people through the rehabilitation of existing sites and the setting up of new locations.
- At least 3,000 people have arrived in a number of locations in the Abyei region after fleeing violence in Unity State.

A call for non-violence in the month of May

The humanitarian community in South Sudan has called on all parties to the conflict to observe 30 days of non-violence in the month of May to enable people to move freely to tend to their livelihoods or to seek refuge wherever they choose to do so.

A month of non-violence will also allow people to take advantage of the remaining crop planting period – April to May – to ensure a harvest at the end of 2014. The conflict in South Sudan has left at least 3.7 million people at risk of food insecurity.

While a political resolution to the conflict is key, a month of tranquillity could have an immediate impact on the lives and livelihoods of millions of people in South Sudan.



About 50 per cent of deaths in children under the age of five in South Sudan are due to malnutrition

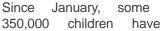
Health partners are supporting the emergency nutrition response to prevent deaths due to severe acute malnutrition.

Thousands of civilians continued to flee hostilities in Bentiu, Bor and Malakal. Partners scaled up efforts to meet the needs of newly displaced people.

Severe Acute Malnutrition (SAM) doubles in children under five

The conflict in South Sudan is worsening the general food security situation. Children are especially vulnerable with an estimated 222,700 of those under the age of five in need of treatment for Severe Acute Malnutrition (SAM).

This number represents a doubling of the 108,000 figure in January, according to health partners who warned that up to 50,000 children could die if malnutrition detection and treatment services are not promptly scaled up. About 50 per cent of deaths in children under the age of five in South Sudan are due to under nutrition.





Up to 50,000 children face death due to malnutrition, if treatment services are not put in place. (Credit:UNICEF)

been screened for acute malnutrition in various parts of the country. An additional 70,000 pregnant and lactating women have also been screened for acute malnutrition with 6,700 of them being admitted into treatment programmes.

Health partners are supporting the emergency nutrition response to prevent deaths due to severe acute malnutrition and to ensure long-term child survival. However, access constraints are a challenge. Health partners have reached some 228 locations with out-patient therapeutic feeding programmes countrywide compared to 336 locations before the conflict began in mid-December 2013.

The provision of comprehensive malnutrition prevention and management programmes throughout the states of Jonglei, Upper Nile and Unity also remains a challenge. Funding gaps may also affect the delivery of vital nutrition services.

Ramping up camp management ahead of the rains

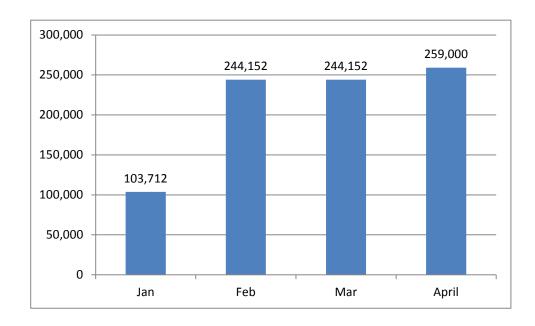
The demand for emergency shelter and subsequently, camp management, is growing as people continue to flee insecurity in various parts of South Sudan.

Indeed, the month of April recorded an increase in the number of people seeking refuge in UN bases - from 68,000 to about 80,000 - with the sharpest spike being noted in Bentiu, Unity State, where the number of displaced people sheltering at a UN base rose from 8,000 to 22,600 between 15 and 29 April. Thousands of people were forced to flee their homes in Bentiu following unprecedented violence there in mid-April, which left about 200 people dead.

Shelter partners are ramping up their response activities to meet the needs of newly displaced persons through the rehabilitation of existing camp sites and the setting up of new locations. They are also working with local authorities to reduce the threat of flooding, ahead of the rains, through activities such as relocating communities to higher grounds.

A new site for displaced people, at UN House in Juba, is scheduled to be completed in May. The site will have a capacity to host 13,000 people.

Up to 260,000 internally displaced people have been reached with camp management services since 15 Dec.



Since 15 December 2013, up to 260,000 internally displaced persons have been reached with camp management services in various sites. However, insecurity has remained a major obstacle to the expansion of camp management activities in many locations. Logistical challenges also hampered efforts to pre-position emergency supplies and to put in place measures to minimize the threat of disease outbreaks.

Fighting disrupts health care services

South Sudan's health care system has adversely been affected by the ongoing fighting in different parts of the country. In the hot spot areas of Bentiu and Mayom in Unity State, Bor in Jonglei State and Malakal in Upper Nile State, skilled health professionals have been forced to flee their duty stations.

Health infrastructure has also been damaged during attacks. Between mid-December 2013 and the end of April 2014, at least 20 clinics and health centers were attacked or destroyed. In Bentiu and Malakal for example, medical equipment, drugs and vaccines were also looted during attacks on health care facilities.

In most conflict-affected areas, access to secondary health care services remains limited despite an increase in the number of people in need of care.

A disruption in the health care service delivery and supply chain management has further compounded the challenges. For example, active hostilities and the targeting of civilians in the ongoing conflict have increased demand for emergency blood transfusion but blood banks are inadequately supplied.

The medical evacuation of the critically injured civilians also remained challenging due to the high cost of air transport coupled with a poor road network and the limited number of health facilities offering secondary health care.

By June 2014, the health cluster is targeting at least 1.9 million people with services. More than one million people had already been reached with medical support by mid-April.

In most crisis-affected areas, access to secondary health care remained limited.

Partners have so far reached over 1 million of the targeted 1.9 million people by June.

Humanitarian partners have reported an increase in the number of new arrivals seeking refuge in the contested Abyei area.

In the last two weeks of April, at least 3,000 displaced people arrived in a number of locations in the Abyei area after fleeing violence in South Sudan's Unity State. The new arrivals joined another estimated 3,000 people who had already sought refuge in the area earlier this year.

This latest influx of displaced people into the Abyei region is increasing pressure on existing basic resources including access to water. It is also over-stretching the capacity of the host communities to accommodate new arrivals. At least 35,000 people in Abyei were estimated to be in need of humanitarian assistance prior to the first arrival of internally displaced persons from South Sudan earlier this year.

Funding shortfall jeopardizes aid operation

Aid agencies in South Sudan warned of even more dire humanitarian consequences if urgently needed funds are not raised in the coming weeks.

The South Sudan Crisis Response Plan, which covers January to June 2014, was 39 per cent funded by the end of April. Of the US\$ 779 million shortfall in funding, \$232 million is the bare minimum required until June to avoid the humanitarian situation deteriorating sharply.

Funding is urgently required to provide life-saving aid to communities in hard-to-reach areas.

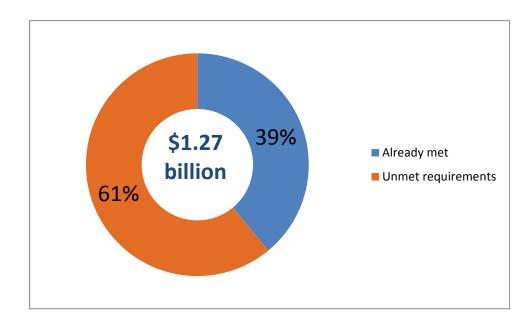
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This report was prepared by the OCHA South Sudan office in collaboration with humanitarian partners. For inputs to the next edition or questions/ comments on the current issue, please contact: ochasouthsudan@un.org The funding needed will enable rapid response teams to provide life-saving aid including food, health, nutrition and water and sanitation to communities in hard-to-reach areas affected by the conflict. It will also enable agencies to pre-position relief in these areas ahead of the imminent rainy season so that life-saving aid continues to be available to people during the second half of this year, when two thirds of the country becomes inaccessible by road.

3.2 million

People to be assisted by June

959,000

People internally displaced by violence

293,200

People in neighbouring countries (28 Apr.)