

HIGHLIGHTS

- Conflict, hunger and disease, among other factors, forced more than 700,000 people to flee South Sudan as refugees to neighbouring countries in 2017.
- In 2017 over 1,159 humanitarian access incidents were reported by humanitarian actors in South Sudan, indicative of increasingly difficult times for aid workers in the country.
- Humanitarian partners working in Malakal PoC site in Upper Nile are stepping up response activities to address the incidence of people attempting suicide.
- As part of the ongoing cholera response, health partners have deployed cholera vaccines to complement traditional prevention strategies in high-risk locations.

FIGURES

No. of Internally Displaced People	1.9 million
No. of refugees in neighboring countries	2.0 million
No. of people food insecure (Jan-March 2018)	5.1 million

FUNDING (2017)

\$1.17 billion
funding received in 2017*

71%
of appeal funding received in 2017

\$1.6 billion
requirements for South Sudan 2017 Humanitarian Response Plan

*According to the Financial Tracking Service (<https://fts.unocha.org>).



South Sudanese refugee Ariat Ochocka Odulla with her 18 day-old son after registration in Ethiopia. Photo: UNHCR/Diana Diaz

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700,000 South Sudanese fled as refugees in 2017

Conflict, hunger and disease, among other factors, forced nearly 700,000 people to flee South Sudan as refugees to neighbouring countries in 2017, the latest refugee data shows. More than 70 per cent of those fled in the first half of 2017, which saw multiple military offensives in Upper Nile, Jonglei, and the Greater Equatoria region.

Nearly 4 million people – about one in three South Sudanese - have been displaced, including more than 1.9 million internally displaced and over 2.0 million who have fled as refugees to neighbouring Uganda, Kenya, Ethiopia, Sudan and the Democratic Republic of Congo (DRC).

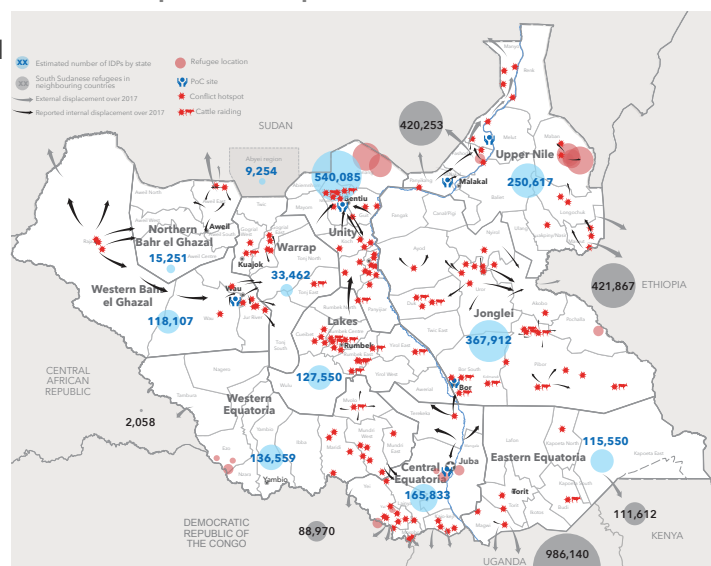
Tens of thousands crossed into Uganda in the first half of 2017 following increased hostilities in East, Central, and Western Equatoria. Uganda now hosts over one million South Sudanese refugees; of those more than 85 per cent are women and children. The number of South Sudanese living in six refugee camps in northern Uganda rose to 1.03 million in October, but dropped to 986,000 by the end of December.

Others crossed to Sudan, Ethiopia, Kenya, the Democratic Republic of the Congo (DRC) and Central African Republic (CAR), which are hosts to more than million South Sudanese refugees. Families crossing the border have cited the security situation, hunger, and disease as the primary driving factors. The number of South Sudanese forced to leave their country in 2017 is slightly lower than the 760,000 people who left in 2016.

According to partners in the region, security concerns were mainly fueled by fear of indiscriminate killings, ethnically motivated attacks, torture, looting and burning of homes, and forced recruitment of young people by armed groups in South Sudan. Many travelled on foot for several days through the bush, afraid of militant groups and roadblocks on main roads to the border.

The situation in South Sudan remains dire, over four years after fighting broke out in December 2013. Between February

Conflict hotspots and displacement trends in 2017

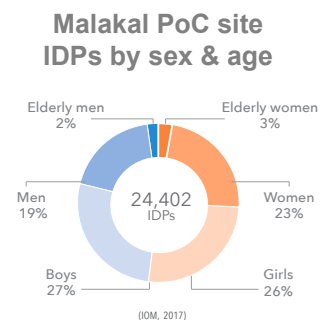


Data source: UNHCR and OCHA.

Map: OCHA.

and June 2017, famine was declared in parts of Unity, mainly driven by conflict and a collapsing economy, according to the Integrated Food Security Phase Classification (IPC). The food security analysis model projected in its October report that nearly half of the population – 5.1 million people – will not have enough to eat, between January and March 2018. The spread of diseases such as cholera, malaria, and kala-azar are compounding the situation.

Partners in joint action to address suicide cases in Malakal PoC site



Humanitarian partners working in Malakal Protection of Civilians (PoC) site in Upper Nile are stepping up response activities to address the incidence of people attempting suicide.

According to the World Health Organization, over 800 000 lives are lost globally due to suicide every year, and it is the second leading cause of death among people aged 15 to 29.



Malakal Protection of Civilians (PoC) site in Upper Nile. Photo: IOM

An assessment in Malakal PoC site, conducted in the last week of December 2017, found that two young men committed suicide, while 12 others made suicide attempts. In 2017 overall, a total of six people, five of whom were men aged 15 to 29, committed suicide, while 31, including 14 men aged 17 to 29, made suicide attempts. All survivors and their families received immediate and continuous medical and psychological support by various humanitarian agencies.

According to mental health experts, the negative impact of South Sudan's conflict on civilians' mental health has been staggering, as sections of the population have repeatedly been exposed to violence, intimidation, and abuses. Political, social and economic insecurity have taken their toll on the well-being of the population since the conflict began in December 2013.

The psychological impact on the displaced population is considered to be severe due to exposure to a series of traumatic episodes over a prolonged period. A common feeling expressed by IDPs is one of hopelessness about returning to their homes. Partners have identified this as one of the prime contributing factors for attempting suicide. The symptoms associated with post-traumatic stress disorder (PTSD), including irritability, depression and suicidal tendencies, are evident in the PoC site.

According to the assessment, cumulative psychological distress caused by limited livelihood opportunities, poor living conditions, unemployment, hopelessness, domestic violence, and congestion in the PoC site, manifested itself in suicidal behavior. It was reported that among the triggers of suicidal actions were family disputes, alcohol and drug abuse, and financial pressures, especially during the December festive season.

Suicide is a complex issue and therefore requires collaborative and multifaceted efforts among humanitarian partners. Partners in Upper Nile, led by the Mental Health and Psychosocial Support Working Group and the Protection Cluster, designed and implemented a set of interventions aimed at suicide prevention. In addition to immediate psychosocial support, new measures include a hotline, an awareness campaign on positive coping techniques, and training of community members to offer assistance.

Through the Communication with Communities (CwC) approach, partners are in the process of engaging youth in a multimedia awareness campaign, based on the positive theme of hope. Activities include sports competitions and cultural performances (dramas, traditional dance, music, and storytelling), to disseminate messages on positive coping

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strategies and stimulate young people to create their narratives about life and build resilience. All humanitarian organizations can participate in this awareness campaign which is led by Mental Health and Psychosocial Support Working Group and the Protection Cluster.

In the longer term, to better address the root causes of suicide attempts, the Malakal partners will support the creation of livelihoods opportunities for the IDPs, as one element of a comprehensive approach to suicide prevention.

Cholera: round of vaccinations launched as outbreak declines

As part of the ongoing cholera response, health partners have deployed cholera vaccines to complement traditional prevention strategies in several high-risk populations and locations. This is the latest step in ongoing efforts to end South Sudan's longest and deadliest cholera outbreak.

Since the start of the current outbreak on 18 June 2016, a total of 20,438 cases, including 436 deaths (CFR 2.14 per cent), have been reported from 27 counties. The most affected counties include Ayod, Tonj East, Yirol East, Fashoda, Kapoeta East, and Kapoeta South. Current response and prevention activities, as part of the second round of the oral cholera vaccination campaign, aim to both end the outbreak and address the underlying risks.

A consignment of 737,819 doses, requested by WHO from the Global Task Force on Cholera Control (GTFCC) stockpile, arrived in Juba on 11 December, 2017. The vaccines have been deployed to areas and counties with pending second round vaccination campaigns including Kapoeta South, Kapoeta East, Tonj East, Aburoc and Malakal town. The campaigns in Kapoeta South, Kapoeta East, and Tonj East took place from 12 to 17 December, 2017.

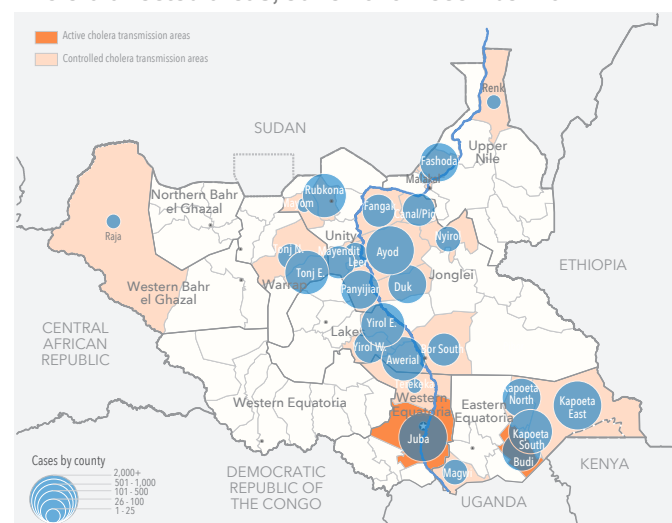
The success of the ongoing round of campaigns is attributed to collaborative efforts by joint teams in the field, including training of vaccinators and supervising the process to foster compliance to oral cholera vaccine protocols.

Cholera transmission has continued to decline significantly, with the last cases reported in Budi and Juba, out of 27 counties where cholera cases were confirmed during 2017.

In a medium- and long-term perspective, partners aim to scale up preventative measures, such as using vaccines for outbreak control, or rapid chlorination of the water sources, while also developing long-term water and sanitation interventions.

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Cholera affected areas, June 2016-December 2017



Data source: WHO.

Map: OCHA.

Humanitarian access incidents reach new high in 2017

In 2017, 1,159 humanitarian access incidents were reported by aid agencies in South Sudan. This is the highest number of incidents in a year, representing a significant increase, compared to 908 in 2016 and 909 in 2015. This trend is indicative of increasingly difficult times for aid workers in the country.

About 46 per cent of the total incidents reported in 2017 involved violence against humanitarian personnel and assets, which is a decrease compared to 69 per cent in 2016. These incidents included killing of aid workers, robbery, looting and threats or harassment, mostly affecting Juba, Rubkona and Wau counties.

Active hostilities and violence against personnel continued to impact humanitarian operations, with 612 aid workers relocated in 54 incidents from multiple locations.

At least 95 aid workers have been killed in South Sudan since the beginning of the crisis in December 2013, including 28 in 2017. These include the six aid workers killed in a single attack in Duk County, Jonglei in November. At least 61 looting incidents were reported in multiple locations in the country in 2017, with significant loss of supplies and assets. Other humanitarian access constraints – including active hostilities, bureaucratic/administrative impediments, operational interference and restriction of movement – increased in 2017.

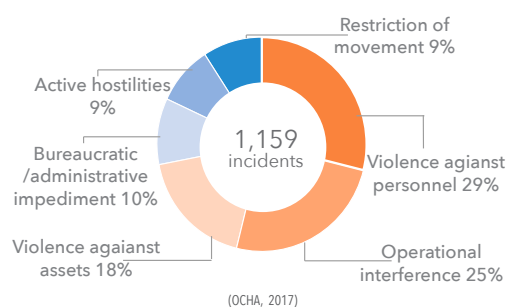
Active hostilities and violence against personnel continued to impact humanitarian operations, with 612 aid workers relocated in 54 incidents from multiple locations across the country in 2017. More than half of the relocations occurred in Koch, Leer and Mayendit (Unity) and Akobo (Jonglei), where over half a million people were in need of assistance and protection in 2017. December alone, 65 aid workers were relocated, following fighting and insecurity in Koch, Bieh (Unity), Raja (Western Bahr El Ghazal), Nasir (Upper Nile) and Pibor (Jonglei). Clashes in Unity on 24 December left 13 people dead and forced the suspension of health, WASH, nutrition, food security, and education activities benefiting thousands of people in need.

Bureaucratic impediments remained a predominant concern for the humanitarian community in 2017. The increase of work permit fees for foreigners introduced by South Sudan's Labour Ministry late in the year, implies that aid organisations may have to redirect funds meant for affected people. There were numerous cases of access denials of aid workers travelling from Juba airport to field locations related to work permits. Authorities at national, state and county levels also mounted pressure on aid organizations, in attempts to influence staff recruitment processes, including demands to nationalize specific NGO positions.

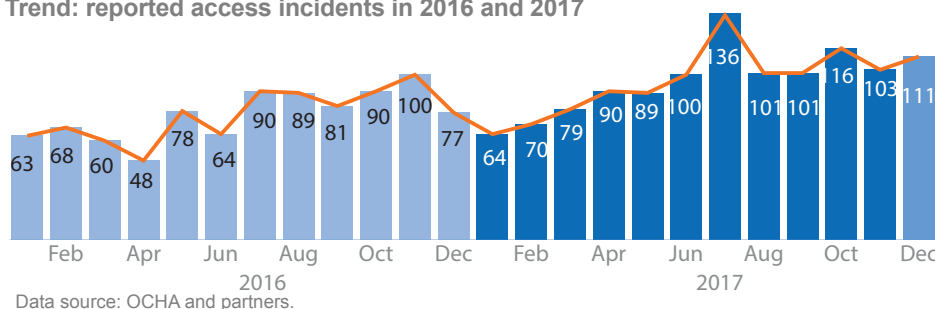
Charges at checkpoints continued throughout the year. For instance, in December, partners reported that there were 66 checkpoints on the Juba-Bentiu road, some of which demanded up to SSP 3,000 from motorists.

These trends continued even after the November Presidential order for free, unimpeded and unhindered movement of aid organizations in the country.

Access incidents by category in 2017



Trend: reported access incidents in 2016 and 2017



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OCHA humanitarian bulletins are available at: www.reliefweb.int