

SOUTH SUDAN - CRISIS

FACT SHEET #9, FISCAL YEAR (FY) 2019

AUGUST 14, 2019

NUMBERS AT A GLANCE

7.2 million

Estimated People in South Sudan Requiring Humanitarian Assistance
OCHA Situation Report – August 2, 2019

7 million

Estimated People in Need of Food Assistance in South Sudan
IPC Technical Working Group – July 2019

1.9 million

Estimated Number of IDPs in South Sudan
UN – August 2, 2019

185,000

Estimated Individuals Seeking Refuge at UNMISS Bases
UNMISS – August 5, 2019

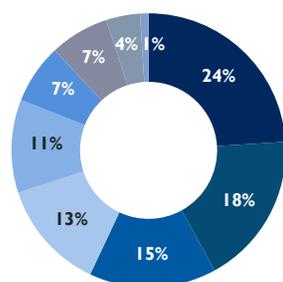
2.3 million

Estimated Refugees and Asylum Seekers from South Sudan in Neighboring Countries
UNHCR – July 15, 2019

296,000

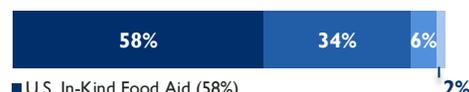
Estimated Refugees from Neighboring Countries in South Sudan
UNHCR – June 30, 2019

USAID/OFDA¹ FUNDING BY SECTOR IN FYs 2018–2019



- Logistics Support & Relief Commodities (24%)
- Water, Sanitation & Hygiene (18%)
- Health (15%)
- Nutrition (13%)
- Protection (11%)
- Agriculture & Food Security (7%)
- Humanitarian Coordination & Information Management (7%)
- Shelter & Settlements (4%)
- Other (1%)

USAID/FFP² FUNDING BY MODALITY IN FYs 2018–2019



- U.S. In-Kind Food Aid (58%)
- Local & Regional Food Procurement (34%)
- Complementary Services (6%)
- Cash Transfers for Food, Food Vouchers (2%)

HIGHLIGHTS

- Health actors in South Sudan scale up EVD preparedness efforts near DRC and Uganda borders
- Escalated insecurity hinders humanitarian access in Central Equatoria
- FEWS NET projects Crisis and Emergency levels of acute food insecurity will persist through January

HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FYs 2018–2019

USAID/OFDA	\$266,899,023
USAID/FFP	\$773,056,592
State/PRM ³	\$91,553,826

\$1,131,509,441⁴

TOTAL USG HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FYs 2018–2019

\$4,262,636,414

TOTAL USG HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FYs 2014–2019, INCLUDING FUNDING FOR SOUTH SUDANESE REFUGEES IN NEIGHBORING COUNTRIES

KEY DEVELOPMENTS

- Health actors are scaling up Ebola virus disease (EVD) preparedness activities in areas of South Sudan located near the Democratic Republic of the Congo (DRC) and Uganda amid ongoing concerns of possible cross-border EVD transmission, the Government of the Republic of South Sudan (GoRSS) Ministry of Health (MoH) reports. However, relief organizations report that persistent shortages of health supplies and humanitarian access impediments continue to complicate disease prevention and preparedness efforts. As of August 14, health actors had not confirmed any EVD cases in South Sudan.
- Insecurity continues to disrupt humanitarian activities across South Sudan. In Central Equatoria State, several incidents of violence have adversely affected EVD preparedness activities in recent weeks, relief actors report.
- Since June, heavy seasonal rains have triggered flooding in Jonglei State, prompting local authorities to request humanitarian assistance for affected populations. In response, USAID/OFDA partners are providing emergency health services and livestock support.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

⁴ This total does not include \$215.9 million in FY 2018 U.S. Government (USG) funding for South Sudanese refugees in neighboring countries, which increases total USG emergency funding for the South Sudan crisis in FY 2018 to more than \$840.9 million.

EVD PREPAREDNESS

- South Sudan remains at high risk for EVD transmission due to population movement over its borders with the DRC—where an EVD outbreak is ongoing—and Uganda, health actors report. Additionally, South Sudan’s health care system has limited capacity, and sporadic insecurity and bureaucratic impediments continue to limit health and humanitarian access to some areas.
- The GoRSS MoH reported three EVD alerts from July 29 to August 4, including in the capital city of Juba and in Western Equatoria State’s Yambio town and Maridi County. Health workers deployed to investigate the cases and collect samples; laboratory tests for the samples were negative. As of August 14, health actors had not confirmed any EVD cases in South Sudan.
- On July 15, a high-level delegation visited Central Equatoria’s Yei town, Yei County, to observe activities underway to prepare for—and respond to—a potential EVD outbreak. The delegation comprised GoRSS officials and representatives of UN agencies, non-governmental organizations (NGOs), donor countries, and the USG, including U.S. Ambassador to South Sudan Thomas J. Hushek and members of the USAID Disaster Assistance Response Team (DART) and the U.S. Centers for Disease Control and Prevention. The delegation visited an isolation site in the town and met with local government officials to better understand challenges to EVD preparedness programming in the area.
- In early July, USAID partner the International Organization for Migration (IOM) established a new point of entry (PoE) screening facility for EVD in Lujulu *payam*, located in Central Equatoria’s Morobo County. The new PoE screening point brings the total number of screening sites in South Sudan to 32; IOM manages 15 of the PoEs. Since August 2018, IOM, the GoRSS MoH, and other health actors have conducted more than 2.9 million EVD screenings at PoEs in South Sudan.
- IOM reports that heavy rainfall has restricted movement to PoE screening sites for EVD in Morobo, as well as sites in Khorijo and Bori in Central Equatoria’s Kajo-Keji County. Reporting delays—caused by movement restrictions as well as unreliable communication network connectivity—can hinder crucial response activities and resource mobilization aimed at minimizing the spread of the disease in the event that a positive case is confirmed, according to IOM.
- Relief organizations report that some EVD facilities do not have adequate waste disposal mechanisms in place to allow for the implementation of infection prevention and control activities. In addition, access to Kajo-Keji remains limited to air travel due to poor road conditions, increasing operating costs. A recent incident of insecurity near Central Equatoria’s Payawa village also led to the closure of a local health unit hosting EVD preparedness activities; as of early August, the facility remained closed.
- As part of its EVD preparedness efforts, the UN World Health Organization (WHO) pre-positioned a personal protective equipment (PPE) kit with specifications appropriate for EVD response in an isolation facility located in Yei town. WHO has identified two additional PPE stockpiles, which are available for dispatch to South Sudan within 72 hours of receiving reports of a confirmed EVD case in the country, if needed. PPE, used by health workers in laboratories, medical facilities, and isolation centers, is essential to containing the spread of the highly infectious EVD.
- USAID/OFDA partner Save the Children/U.S. (SC/US) conducted an EVD preparedness training for its project implementation staff in Juba during the week of July 29. In addition, national authorities granted the EVD Preparedness Consortium—consisting of SC/US and fellow USAID/OFDA partners Concern Worldwide and Internews—permission to travel to health facilities in Yei town to conduct EVD-related activities.
- Health actors conducted two drills for national rapid response teams and case management teams in Juba on July 26 to increase the teams’ operational capacity to respond effectively to potential EVD cases. The GoRSS MoH is planning to conduct similar trainings in August for teams based in four population centers in southern counties of Central Equatoria, Eastern Equatoria, and Western Equatoria states, which directly border DRC and Uganda.
- On July 19, WHO facilitated the delivery of 150 GenXpert cartridges—required to operate an EVD testing machine—to Juba, restoring in-country capacity to test suspect samples of the disease, according to the GoRSS MoH. Since late June, when local GenXpert cartridge stocks were depleted, health actors in South Sudan had depended solely on sample testing conducted by the Uganda Virus Research Institute, slowing confirmation and response times significantly due to associated shipping and logistics. Health and humanitarian actors are working to eliminate potential future supply gaps for materials required for EVD testing and response in labs in Juba and in screening and treatment facilities elsewhere in the country.

- On July 1, Internews, with support from Concern Worldwide and SC/US, launched an EVD preparedness and awareness project focused on strengthening community and health actor resilience in areas deemed at high risk for EVD transmission, including Central Equatoria’s Kajo-Keji, Lainya, Morobo, and Yei counties. The project, which follows similar Internews activities in Unity and Upper Nile states, will track rumors and misinformation related to EVD, health practices, and humanitarian response activities in the areas and engage with community leaders.

INSECURITY AND POPULATION DISPLACEMENT

- The frequency of ambushes and other security incidents reported along roads in and around Yei County increased from July 15–27, the UN reports. The heightened insecurity has negatively impacted health and humanitarian access to population centers in the county, and is likely to adversely affect EVD prevention activities in the region, according to the UN.
- On July 25, a multi-agency response team traveled to Yei County’s Ombasi and Wudabi villages to conduct a humanitarian needs assessment. According to the UN, residents of the villages reported that insecurity had displaced more than 1,700 households between April and July and that fear of additional violence has precluded many displaced individuals from returning to areas of origin. The assessment identified the need for emergency food assistance and relief commodities, as well as health, livelihoods, protection, and water, sanitation, and hygiene (WASH) support.
- More than 5,000 individuals have moved from Tali and Tindilo towns in Central Equatoria’s Terekeka County to Dor town in Lakes State’s Awerial County, citing food insecurity as the primary reason for their displacement, USAID/OFDA partners report. Humanitarian organizations are working to mobilize a one-month food ration and other support for displaced individuals in Dor and are following up with an assessment in Tali and Tindilo.
- On July 18, cattle raiders attacked Dongai, Kangui, and Makir villages in Western Equatoria’s Mvolo County, displacing more than 1,770 individuals to the neighboring Babe el-Giridi area of Mvolo, the UN reports. The attackers reportedly destroyed farms and looted food stocks and homes. Poor road conditions caused by seasonal rains, along with concerns over the potential presence of armed opposition group actors along roads in Mvolo, have prevented the UN Office for the Coordination of Humanitarian Affairs (OCHA) and other humanitarian organizations with staff presence in Yambio from accessing the area; however, the UN reports that individuals displaced by the cattle raiding in Mvolo have begun returning to their homes and the security situation has stabilized.
- On July 14, unknown armed actors ambushed a commercial vehicle along the Nhialdiu–Bentiu road in Unity, according to the South Sudan Relief and Rehabilitation Commission (RRC). The incident—the second ambush of a commercial vehicle along the road in two weeks—resulted in five deaths and the injury of nine individuals. Road insecurity in South Sudan continues to impact trade to, from, and within the country, in addition to hindering humanitarian access.
- Approximately 22,000 individuals have departed the UN Mission in South Sudan (UNMISS) protection of civilians (PoC) site in the area adjacent (AA) to the force’s facilities in Western Bahr el Ghazal State’s Wau town since early 2018, IOM reports. A biometric registration exercise conducted by IOM in late July found that only approximately 13,000 of the 35,000 individuals registered at the Wau AA PoC site remained at the site; individuals who had departed the site reportedly returned to Wau town and other locations. Humanitarian organizations plan to verify and register individuals who have returned to places of origin in Wau and provide assistance depending on needs and vulnerability.

HUMANITARIAN ACCESS AND BUREAUCRATIC IMPEDIMENTS

- Harassment of humanitarian staff in Juba and unexpected changes to regulations at Juba International Airport have impeded humanitarian operations in recent weeks, the UN reports. Significant operational interferences by security officials in Central Equatoria, including incidents impacting two UN EVD teams on mission in June, have also recently hindered preparedness and relief efforts.
- Humanitarian organizations operating in the Bazia area of Wau County reported incidences of intimidation and harassment perpetrated by Sudan People’s Liberation Army-In Opposition (SPLA-IO) soldiers at a checkpoint on July 28, according to the UN. SPLA-IO authorities are reportedly demanding that NGOs seek permission before implementing activities in areas controlled by the opposition group.

- On July 28, the RRC in Western Bahr el Ghazal's Raja town informed humanitarian organizations of new requirements and conditions related to their operations and presence in the area, the UN reports. The RRC threatened disciplinary action—including a fine of approximately \$350 or detention—if organizations failed to comply with the conditions. Humanitarian organizations have expressed concern that some of the conditions do not align with their policies and that the additional requirements would negatively affect their service delivery in the area, according to the UN. Seven NGOs currently provide health care, nutrition, food, and livelihoods support to approximately 27,000 people in Raja.
- A joint team of representatives of humanitarian organizations and the Relief Organization for South Sudan traveled to Jonglei's Old Fangak town on July 31 to meet with SPLA-IO authorities to discuss access challenges and bureaucratic impediments facing humanitarian organizations operating in the area, the UN reports. Authorities in Old Fangak recently requested that a USAID/OFDA partner in the town relocate its compound; however, as of August 6, the partner had yet to relocate staff.
- On July 16, alleged South Sudan People's Defense Forces (SSPDF) troops in Upper Nile's Canal County detained three humanitarian NGO workers, according to the UN.⁵ The staff members were travelling by boat as part of a humanitarian mission when assailants reportedly attacked the boat operator and sexually assaulted a female staff member before seizing cash intended for use on the mission.
- Incidents of violence against humanitarian personnel increased in June, with more than 20 incidents reported during the month, compared to 15 incidents in May and 17 incidents in April; a rising number of incidents in Central Equatoria contributed to the overall increase, the UN reports. Insecurity along main roads also continued to pose a challenge for humanitarian personnel in June, with the UN receiving reports of five ambushes of relief personnel—including one incident resulting in injuries to two humanitarian staff—compared to five ambushes in May and 11 ambushes in April.

FOOD SECURITY, LIVELIHOODS, AND NUTRITION

- Crisis—IPC 3—and Emergency—IPC 4—levels of acute food insecurity will persist in much of South Sudan through January, with food security levels improving slightly in some areas during the October-to-January main harvest season, according to the Famine Early Warning Systems Network (FEWS NET).⁶ Although ongoing or planned food assistance efforts are preventing food security conditions from deteriorating beyond Crisis levels in parts of South Sudan, FEWS NET reports that unmet food assistance needs remain high and that the most vulnerable households will likely face Catastrophe—IPC 5—conditions between July and August, the peak of the lean season when food is scarcest.⁷
- During the week of July 22, Executive Director of the UN World Food Program (WFP) David Beasley and U.S. Permanent Representative to the UN Agencies in Rome Kip Tom visited South Sudan to observe WFP food assistance air drops, food distributions, and other humanitarian operations. The delegation also visited a site where USAID/FFP partner WFP collaborates with IOM to provide biometric authentication of beneficiaries receiving WFP-provided food assistance.
- From January to June, WFP and partner organizations provided approximately 129,200 metric tons (MT) of humanitarian food assistance and cash-based transfers totaling nearly \$18.4 million to approximately 3.5 million beneficiaries in South Sudan. In June alone, WFP reached approximately 2.7 million individuals across South Sudan with in-kind food and cash-based assistance. To support WFP activities in South Sudan, USAID/FFP recently contributed an additional \$84.4 million to facilitate the distribution of an estimated 31,600 MT of locally and regionally procured food, 12,200 MT of U.S. in-kind food aid, and cash transfers for food.
- USAID/FFP is also providing an additional 7,520 MT of in-kind food assistance—with an estimated cost of approximately \$26.1 million—to Catholic Relief Services (CRS) to expand ongoing asset-building activities—through

⁵ South Sudanese President Salva Kiir officially changed the name of the Sudan People's Liberation Army to SSPDF on October 2, 2018

⁶ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of acute food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

⁷ A Famine classification applies to a wider geographical location, while the term Catastrophe—IPC 5—refers to an extreme lack of food at the household level even with full employment of coping strategies. Famine is determined when more than 20 percent of households in an area are experiencing Catastrophe, when global acute malnutrition levels exceed 30 percent, and when the crude mortality rate exceeds two people per 10,000 persons per day.

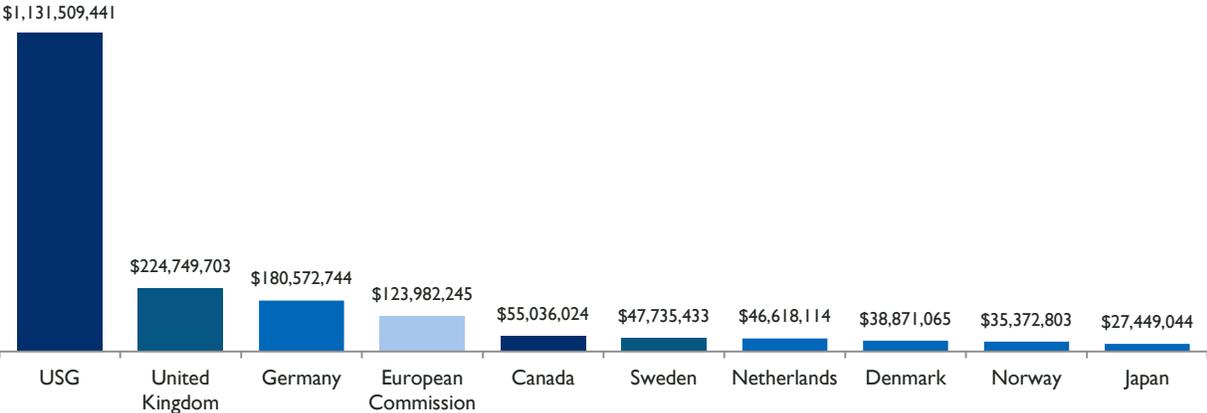
which participating households receive cereals, pulses, and vegetable oil in exchange for work repairing or creating community infrastructure—in Jonglei.

- In response to high rates of global acute malnutrition (GAM) recorded during a May Standardized Monitoring and Assessment of Relief and Transition (SMART) nutrition survey in Upper Nile’s Renk County, USAID/OFDA partner Medair commenced an urgent blanket supplementary food distribution for all children ages 6–36 months in the area on July 17. The May SMART survey reported a 32 percent GAM prevalence among host community members in Renk and a greater than 24 percent GAM prevalence among internally displaced person (IDP) communities in the area, prevalence percentages within or exceeding emergency levels. Medair attributes the levels of malnutrition in Renk to sporadic insecurity, limited access to health care and safe drinking water, and poor infant and young child feeding practices. The distribution of ready-to-use supplementary food rations will accompany malnutrition screening of all children ages 6–59 months and pregnant and lactating women in Renk.
- With support from USAID/FFP and other donors, the UN Children’s Fund (UNICEF) and its implementing partners supported the treatment of nearly 129,000 children ages 6–59 months suffering from severe acute malnutrition during the first six months of 2019, reaching approximately 58 percent of the UN agency’s yearly target of nearly 221,000 children. USAID/FFP recently contributed an additional \$2 million to UNICEF to support the air transportation of 400 MT of ready-to-use therapeutic food—sufficient to treat about 29,000 severely malnourished children—sourced in U.S. markets.

FLOODS IMPACT AND RESPONSE

- On July 12, authorities in Jonglei reported that flooding caused by seasonal rains in Jonglei’s Bor South County had affected more than 40,000 households, according to the UN. In light of reports that flooding had displaced households and damaged crops, the Jonglei State Minister of Health appealed to humanitarian organizations to provide emergency support. Jonglei authorities also reactivated the state’s Cholera Task Force to address the risk of waterborne disease in the wake of heavy rains and flooding. In response to the floods, USAID/OFDA partner IMA World Health is providing medical services to affected populations through mobile centers. In addition, USAID/OFDA partner Vétérinaires Sans Frontières/Germany (VSF/G) is providing supplementary veterinary pharmaceuticals to community animal health workers in all five payams of Bor South to prevent community livestock—an important household coping resource that can be sold or consumed during times of emergency or stress—from developing flood-related disease.

**2018–2019 TOTAL HUMANITARIAN FUNDING*
PER DONOR**



* Funding figures are as of August 14, 2019. All international figures are according to the OCHA Financial Tracking Service and based on international commitments to date in 2019, while USG figures are according to the USG and reflect publicly announced USG funding for FY 2018, which began on October 1, 2017 and ended on September 30, 2018, together with publicly announced figures for FY 2019 from the period between October 1, 2018 and August 14, 2019. The \$1.13 billion in FYs 2018–2019 USG humanitarian funding for the South Sudan response does not include support for South Sudanese refugees in neighboring countries.

CONTEXT

- The January 2005 signing of the Comprehensive Peace Agreement between the Government of Sudan and the southern-based Sudan People's Liberation Army officially ended more than two decades of north–south conflict during which famine, fighting, and disease killed an estimated 2 million people and displaced at least 4.5 million others within Sudan. In July 2011, South Sudan became an independent state following a referendum earlier in the year.
- On December 15, 2013, between factions within the GoRSS clashes erupted in Juba and quickly spread into a protracted national conflict, prompting displacement and humanitarian needs. On December 20, 2013, USAID activated a DART to lead the USG response to the crisis in South Sudan. USAID also stood up a Washington, D.C.-based Response Management Team to support the DART.
- On October 2, 2018, U.S. Ambassador Thomas J. Hushek redeclared a disaster in South Sudan for FY 2019 due to ongoing violent conflict, population displacement, restricted humanitarian access, and disruption of trade, markets, and cultivation activities, all of which have significantly exacerbated food insecurity and humanitarian needs.

USG HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FYs 2018–2019¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA			
Action Against Hunger/U.S. (AAH/US)	Agriculture and Food Security, Health, Humanitarian Coordination and Information Management (HCIM), Humanitarian Studies, Analysis, and Applications, Nutrition, Protection, WASH	Countrywide	\$8,776,000
Agency for Technical Cooperation and Development (ACTED)	HCIM, Shelter and Settlements	Countrywide	\$7,100,000
ALIMA	Health, Nutrition, WASH	Western Bahr el Ghazal	\$3,400,000
American Refugee Committee (ARC)	Protection, Shelter and Settlements, WASH	Central Equatoria, Eastern Equatoria, Upper Nile	\$5,960,487
CARE	Health, Nutrition, Protection	Eastern Equatoria	\$4,499,995
Concern	Agriculture and Food Security, Health, Multipurpose Cash Assistance, Nutrition, Shelter and Settlements, WASH	Central Equatoria, Northern Bahr el Ghazal, Unity	\$12,700,000
Danish Refugee Council (DRC)	HCIM, Protection, Shelter and Settlements	Jonglei, Unity, Upper Nile	\$5,314,353
Food for the Hungry	Agriculture and Food Security, Logistics Support and Relief Commodities, WASH	Jonglei, Upper Nile	\$3,400,000
IMA World Health	Health, Nutrition	Jonglei, Upper Nile	\$3,871,017
iMMAP	HCIM	Countrywide	\$574,000
International Medical Corps (IMC)	Health, Nutrition, Protection	Central Equatoria, Upper Nile	\$12,235,000
IOM	Agriculture and Food Security, Health, HCIM, Logistics Support and Relief Commodities, Nutrition, Protection, Shelter and Settlements, WASH	Countrywide	\$36,889,882

International Rescue Committee (IRC)	Economic Recovery and Market Systems, Health, Nutrition, Protection	Central Equatoria, Unity	\$7,226,454
Medair	Health, Nutrition, Protection, WASH	Northern Bahr el Ghazal, Unity, Upper Nile	\$14,000,000
Mercy Corps	WASH	Unity, Upper Nile, Western Equatoria	\$6,204,269
Nonviolent Peaceforce	Protection	Jonglei, Unity	\$6,433,603
Norwegian Refugee Council (NRC)	HCIM, Protection	Countrywide	\$2,323,699
OCHA	HCIM	Countrywide	\$6,975,282
Relief International (RI)	Health, WASH	Upper Nile	\$7,700,000
Samaritan's Purse	Agriculture and Food Security, Nutrition, WASH	Northern Bahr el Ghazal, Unity	\$8,303,419
SC/US	Health, HCIM, Nutrition, Protection, WASH	Countrywide	\$7,340,788
Tearfund	Agriculture and Food Security, Nutrition, WASH	Jonglei	\$4,260,000
UN Food and Agriculture Organization (FAO)	Agriculture and Food Security, HCIM	Countrywide	\$5,000,000
UN Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Countrywide	\$10,000,000
UNICEF	HCIM, Nutrition, Protection, WASH	Countrywide	\$20,404,800
VSF/G	Agriculture and Food Security	Jonglei, Unity, Upper Nile	\$3,400,000
WFP	HCIM, Logistics Support and Relief Commodities	Countrywide	\$40,000,000
World Relief International (WRI)	Agriculture and Food Security, Health, Nutrition, WASH	Jonglei, Unity	\$3,086,595
World Vision	Agriculture and Food Security, HCIM, Protection, WASH	Countrywide	\$6,850,000
	Program Support		\$2,669,380
TOTAL USAID/OFDA FUNDING			\$266,899,023
USAID/FFP²			
CRS	15,720 MT of U.S. In-Kind Food Aid	Jonglei	\$81,547,657
FAO	Complementary Services, Food Vouchers	Countrywide	\$40,000,000
	2,420 MT of U.S. In-Kind Food Aid	Countrywide	\$36,393,540
UNICEF	1,234 MT of Local and Regional Food Procurement, Complementary Services	Countrywide	\$20,802,593
	155,430 MT of U.S. In-Kind Food Aid	Countrywide	\$329,618,097
WFP and Implementing Partners	147,921 MT of Local and Regional Food Procurement	Countrywide	\$246,721,855
	Cash Transfers for Food	Central Equatoria, Jonglei, Lakes, Unity, Upper Nile, Western Equatoria	\$11,972,850

	Complementary Services	Countrywide	\$6,000,000
TOTAL USAID/FFP FUNDING			\$773,056,592
STATE/PRM ASSISTANCE IN SOUTH SUDAN			
ACTED	Livelihoods, Protection	Upper Nile	\$558,795
Africa Humanitarian Action (AHA)	Primary Health Care, Reproductive Health and Psychosocial Support	Unity	\$1,368,206
International Committee of the Red Cross (ICRC)	Multi-Sector Assistance	Countrywide	\$39,300,000
IMC	Health, Psychosocial and Maternal Health	Upper Nile	\$1,500,000
Internews Network	Protection, Communication	Unity	\$1,047,877
IRC	Protection, GBV, Reproductive and Primary Health Care	Unity	\$1,500,000
Jesuit Refugee Service (JRS)	Protection, Education and Psychosocial Support	Upper Nile	\$1,404,129
Lutheran World Relief	Child Protection, Education and Capacity Building	Upper Nile, Unity	\$1,445,039
MENTOR Initiative	Health and Protection	Upper Nile, Unity	\$1,453,060
Office of the UN High Commissioner for Refugees (UNHCR)	Multi-Sector Assistance	Countrywide	\$38,400,000
RI	Primary Health Care	Upper Nile	\$1,500,000
Save the Children Federation (STC)	Child Protection, Education and Capacity Building	Upper Nile	\$926,720
UNHAS	Logistics Support and Relief Commodities	Countrywide	\$1,150,000
TOTAL STATE/PRM FUNDING IN SOUTH SUDAN			\$91,553,826
TOTAL USG HUMANITARIAN FUNDING FOR THE SOUTH SUDAN RESPONSE IN FYs 2018–2019			\$1,131,509,441

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of August 14, 2019.

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ This total does not include \$215.9 million in FY 2018 USG funding for South Sudanese refugees in neighboring countries, which increases total USG emergency funding for the South Sudan crisis in FY 2018 to more than \$844.9 million.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org or +1.202.661.7710.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>