Emergency Nutrition Response in *South Sudan*

Picture: UNICEF/WFP RRM activities in South Sudan

18 July 2017

Current situation in *South Sudan* and forecast

- An estimated 6.01 million (50% of the population) people are expected to be severely food insecure in June-July 2017, compared to 5.5 million (45% of the population) people in May 2017

- 16 of the 18 SMART surveys conducted during the first half of 2017 indicate critical levels of acute malnutrition (15% and above). 50% of the surveys having GAM 20% and above.

- MAM admission trend has been increasing between Jan and May 2017 and consistently higher than those reported in 2016.

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Nutrition Cluster

Forecast:

- The nutrition is likely to continue deteriorating in most parts of the country- due to
  - a) the spreading of the on going conflict/fighting fighting has been reported in Upper Nile, parts of NBeG, Jonglei, the equatorial and WBeG
  - b) food insecurity that is estimated to affect 50% of the population.
  - c) Continuing economic crisis (high prices of staple food and oil, continuing devaluation of SSP associated with decreasing purchasing power.
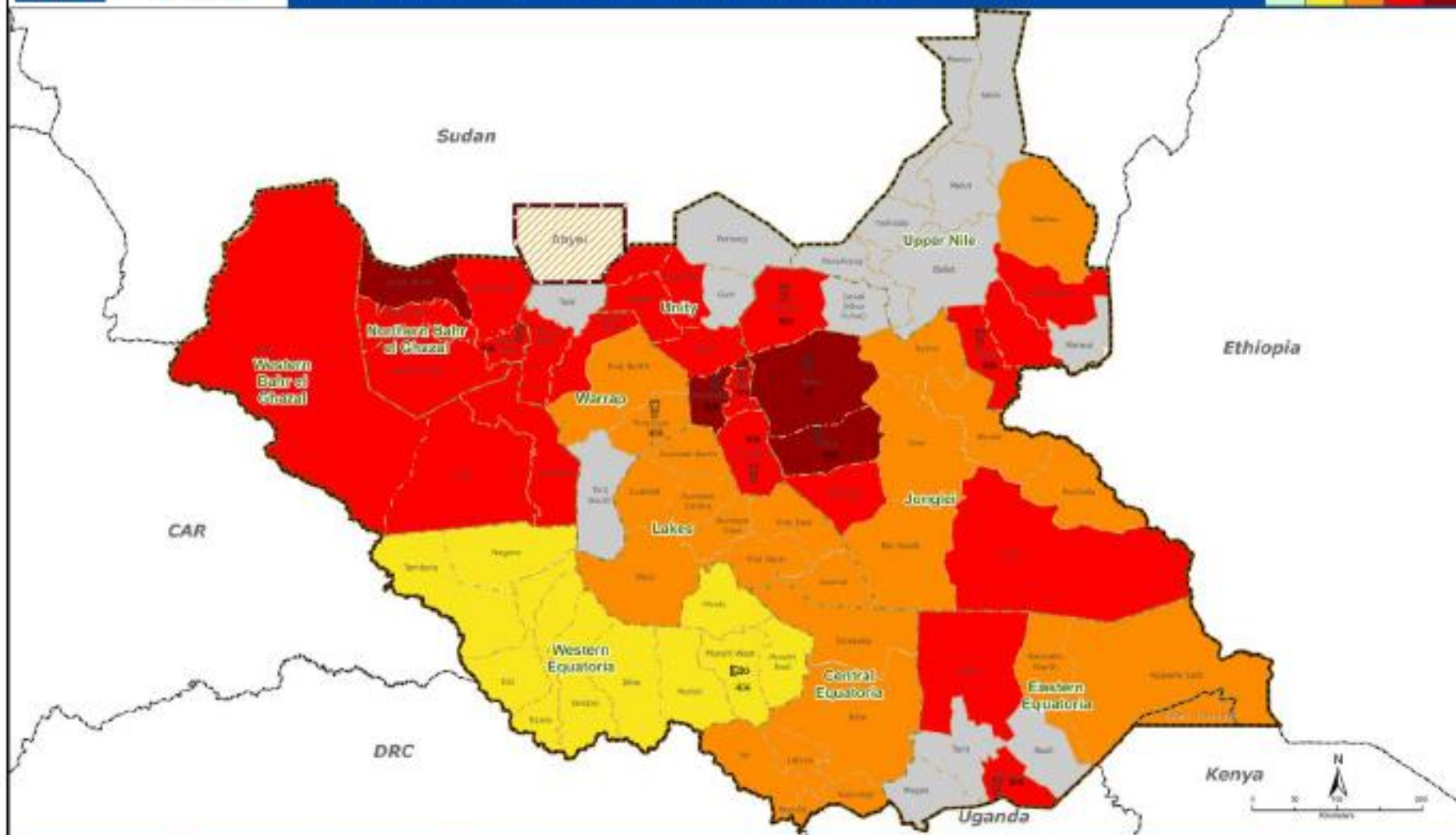
IPC FOR ACUTE MALNUTRITION MAP, JUNE-JULY 2017

South Sudan
IPC for Acute Malnutrition – Projection (June to July 2017)

INTEGRATED FOOD
SECURITY PHASE
CLASSIFICATION
REPUBLIC OF
SOUTH SUDAN

Phase Classification (Jun – Jul 17 Proj)

- Acceptable
- Alert
- Serious
- Critical
- Very Critical
- No data

Remarks

- ❄ Based on Current Data
- ❄ Based on Historical Data

- Likely to Improve
- Likely to deteriorate
- Likely to stay the same

- International boundary line
- First level admin boundary
- Second level admin boundary
- Undetermined boundary *
- Abyei area **

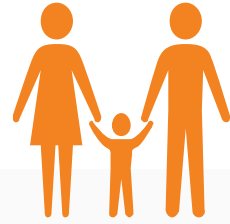# Dashboard for the nutrition *cluster* in *South Sudan*

PEOPLE IN NEED
Before the Crisis
1.45M
Million Children Under five (1.11M) and Pregnant and Lactating women (0.34M)

MTR of the people in need in the process, but there might be no changes

PEOPLE TARGETED
Before the crisis
0.91M
Million Children Under five (0.71 M) and Pregnant and Lactating women (0.2M)

MTR of people targeted in process but not there might be no changes

NUMBER OF PARTNERS
41

REQUIRMENTS (US$)

Primary evaluation:
159.3 Million USD

To known after the mid term review.
110 Million USD

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Strategic Nutrition Priorities

1. *Deliver quality* Life saving treatment of SAM and MAM for most vulnerable and at risk (<5s and PLWs)

2. Increased access to prevention services for acute malnutrition (IYCF, BSFP in GFD and TSFP sites) especially in areas with high level of acute malnutrition

3. Enhanced needs assessment, analysis, monitoring situation and emergency responses

4. Increased access to integrated health, WASH, FSL and nutrition services in areas with GAM ≥15%

5. Strengthening state level coordination in all the former 10 states.

Gaps in Resources *(Key gaps)*

- **Human Resources:** Limited capacity in terms of number and technical in providing quality nutrition programming (implementation, supervision and monitoring).

- **Financial Resources** :

Only 42% of the cluster requirements funded.

58% of funding still needed for responses.

- **Supplies**:
  - TSFP supplies gap: October to December 2017 (incountry and regional stock
  - RUTF enough supplies until end of 2017 with current consumption rate
  - Access and insecurity limiting timely delivery of SAM and MAM supplies in some of the sites especially in conflict affected areas.

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Challenges in achieving strategic priorities

- Limited capacity in terms of number and technical in providing quality nutrition programming (implementation, supervision and monitoring).
- Mandate of partners-limiting scale up or filling technical gaps
- Staff turn over among partners
- Access and insecurity limiting, implementation, monitoring and performance of the projects and suspension of projects and risking partners staff lives
- Increase risk of looting and theft of supplies especially in conflict affected areas.
- Increased project implementation cost (e.g having to deliver supplies in small amount to partners but frequently.

3 key asks from the GNC partners

1. Advocate to donors to continue funding for frontline nutrition activities-as the gap is still huge.

2. Support strengthening cluster coordination in states through capacity building and quality programming

3. Continue advocating for implementation of Rome call for action on integrated famine prevention responses famine in South Sudan

4. Continue advocating for cease fire as it as it worsens the nutrition situation (children can not complete treatment regimen-flee fighting, supplies can not be delivered in some of the locations