



## OVERVIEW

- **The food security situation in South Sudan continues to deteriorate**, with 4.9 million (about 42% of population) estimated to be severely food insecure (IPC Phases 3, 4, and 5), from February to April 2017. This is projected to increase to 5.5 million people, (47% of the national population) at the height of the 2017 lean season in July. The magnitude of these food insecure populations is unprecedented across all periods.
- **In Greater Unity, some counties are classified in Famine or high likelihood/risk of Famine.** In the absence of full quantitative data sets (food consumption, livelihoods changes, nutrition and mortality), analyses were complemented with professional judgment of the Global IPC Emergency Review Committee and South Sudan IPC Technical Working Group (SS IPC TWG) members. The available data are consistent with Phase 5 (Famine) classification and include available humanitarian assistance plans at the time of the analysis. **In January 2017, Leer County was classified in Famine, Koch at elevated likelihood that Famine was happening and Mayendit had avoided Famine through delivery of humanitarian assistance. From February to July 2017, Leer and Mayendit are classified in Famine, while Koch is classified as Famine likely to happen.** Panyijiar was in Phase 4 (Emergency) in January and is likely to avoid a Famine if the humanitarian assistance is delivered as planned from February to July 2017. **With consistent, adequate, and timely humanitarian interventions, the Famine classification could be reversed with many lives saved.**
- **Acute malnutrition remains a major public health emergency in South Sudan.** Out of 23 counties with recent data, 14 have Global Acute Malnutrition (GAM) at or above 15%. GAM of above 30% is observed in Leer and Panyijiar while Mayendit had GAM levels of 27.3%. Similarly, a worsening nutrition situation atypical to the post-harvest season is observed in the Greater Equatoria region – particularly in Greater Central Equatoria – a deterioration associated with widespread insecurity, lack of physical access, disruption of the 2016 agricultural season and the ongoing economic crisis. Areas in the Greater Bahr el Ghazal show higher than usual levels of acute malnutrition expected for the post-harvest season, indicating a worsening situation; a SMART survey in Aweil North showed elevated levels of acute malnutrition (GAM of 28.2%). Insecurity, displacement, poor access to services, extremely poor diet (in terms of both quality and quantity), low coverage of sanitation facilities and deplorable hygiene practices are underlying the high levels of acute malnutrition.
- Humanitarian assistance throughout 2016 not only sustained but also improved food security in many areas. **It is of paramount importance that assistance not only continues in 2017, but scales up in the face of mounting food insecurity across the country.** The expected response to Famine-affected areas in former Unity must not sacrifice much needed assistance to the other severely food insecure areas of the country. There exists a narrow window of opportunity during the dry season to pre-position and deliver humanitarian assistance to prevent drastic increases in food insecurity through the lean season that peaks in July. The overstretching of current humanitarian resources and capabilities during the projected worsening of food insecurity is a distinct possibility, raising the risk of an insufficient response to further deterioration.
- Humanitarian access remains a major challenge in implementing lifesaving interventions and critical assessments of the situation in the worst affected areas. **It is imperative that unconditional humanitarian access from all parties involved in the ongoing political conflict is granted to facilitate delivery of assistance to the populations in need.** The most food insecure areas show high levels of insecurity, displacement, loss of livelihoods, market failure, and constrained humanitarian access for assistance delivery and monitoring. The key areas to monitor are central and southern Greater Unity, Greater Northern Bahr el Ghazal, drought-affected Greater Pibor and Greater counties of Kapoeta, Malakal, Fashoda, Manyo, Nasir, Kajo-Keji, Yei, Morobo, and Lainya.

<sup>1</sup> The IPC current and projected classifications are based on information available as of 24 January 2017. An IPC Update is scheduled for April 2017 to capture any changes occurring in the interim period.

## OVERVIEW OF FAMINE CLASSIFICATIONS

In January 2017<sup>2</sup>, in Greater Unity, Leer was classified as in Famine<sup>a</sup> (IPC Phase 5), Koch as having an Elevated Likelihood that Famine is Happening, and Mayendit as having avoided Famine only through the delivery of adequate humanitarian assistance (IPC Phase 4!)<sup>3</sup>. From February to July 2017, Leer and Mayendit are projected to be in Famine (IPC Phase 5) while Koch is expected to show an Elevated Risk of Famine. Panyijiar is also predicted to only avoid Famine through the continued delivery of humanitarian assistance (IPC Phase 4!). The total caseload of people in Famine/Humanitarian Catastrophe<sup>b</sup> (IPC Phase 5) is expected to peak at approximately 100,000 between February and April 2017<sup>c</sup>. **See Table 1 in Annex 1 for a summary of Famine classifications and Table 2 in Annex 1 for the estimated population distributions by phase for each county with any population in Humanitarian Catastrophe (IPC Phase 5) over the period February-April 2017.**

The situation of central and southern Greater Unity is characterized by destitution, extreme food consumption gaps and starvation, Extreme Critical (IPC Phase 5 for Acute Malnutrition)<sup>d</sup> levels of life-threatening acute malnutrition, and increased susceptibility to disease outbreaks. High levels of non-violent mortality are likely occurring as a result, particularly among the estimated one in three children with acute malnutrition in the Famine-affected and at-risk areas.

In the absence of access to collect sufficient quantitative and qualitative data to meet the minimum suite of IPC outcome indicators<sup>4</sup>, analysis of **Leer** and **Panyijiar** was complemented with the professional judgment of the Global IPC Emergency Review Committee (ERC)<sup>5</sup> and SS IPC TWG members. Utilizing data and results from the Food Security and Nutrition Monitoring System (FSNMS), Crop and Food Security Assessment Mission (CFSAM), partner assessments, recent South Sudan IPC Technical Working Group (SS IPC TWG) field missions, and planned humanitarian assistance, professional judgement was able to arrive at classifications for the two counties where the IPC criteria for Famine (IPC Phase 5) otherwise may not have allowed. Additional data gaps for **Koch** prevented a Famine classification from being either proved or disproved, resulting in a probabilistic classification of Elevated Risk of Famine.

Famine classification for **Leer** derives mainly from multiple Mass MUAC screenings of internally displaced person (IDP) and host community populations in various locations in the county, including within the Leer Islands, consistently showing proxy Global Acute Malnutrition (GAM) prevalence above 30 percent – including Severe Acute Malnutrition (SAM) prevalence over 11 percent –, significantly above the Famine threshold (IPC Phase 5 for Acute Malnutrition – Extreme Critical). While the full evidence thresholds for an IPC phase classification could not be met in this area, the ERC proceeded with a recommendation of Famine (IPC Phase 5) for both January (current) and the projections from February to July 2017. The SS IPC TWG concurred with this recommendation based upon its own expert knowledge of the context and recent field missions to the affected areas.

Utilizing qualitative livelihood change data for the area and the disaggregation of acute malnutrition and mortality data gathered by a recent SMART survey, **Mayendit** showed localized pockets of Humanitarian Catastrophe (IPC Phase 5), or Famine conditions, as of January 2017. A Mass MUAC screening reported a GAM prevalence of 23.2 percent, above the Famine (IPC Phase 5 for Acute Malnutrition – Extreme Critical) threshold. A SMART survey from a different organization showed GAM by Weight-for-Height z-score (WHZ) as 27.3 percent, below the Famine (IPC Phase 5 for Acute Malnutrition – Extreme Critical) threshold for GAM by WHZ, but GAM by MUAC as 25.8 percent, well-above the Famine threshold for GAM by MUAC<sup>6</sup>. The same SMART survey reported a Crude Mortality Rate (CMR) of 4.1 (CI 3.12 – 5.33; 95%), indicating significant loss of life in the area, though disproportionately affecting adult men more than any other demographic and attributed

<sup>2</sup> The IPC current and projected classifications are based on information available as of 24 January 2017. An IPC Update is scheduled for April 2017 to capture any changes occurring in the interim period.

<sup>3</sup> Phase deterioration prevented by humanitarian assistance is denoted by an exclamation point (!) after the phase number, e.g. Phase 4!

<sup>4</sup> For Famine (IPC Phase 5) classification, at least three pieces of direct and reliable evidence are needed, one piece of evidence each for acute malnutrition, mortality, and for either food consumption or livelihood change, with all of these being above Famine thresholds.

<sup>5</sup> The ERC consists of a 4–6 member team of leading international technical food security and nutrition experts, who are perceived as neutral to the IPC outcome and who have the relevant technical knowledge and experience in the specific crisis context. The committee reviews and debates the IPC evidence and results and then provides guidance and recommendations to the IPC Country Technical Working Group (IPC Country TWG) on this review. The ownership of the IPC results and responsibility of the release of the results remains with the IPC Country TWG and the Country Team.

<sup>6</sup> The upper limit of the confidence interval for GAM by WHZ was above the Famine (IPC Phase 5 for Acute Malnutrition – Extreme Critical) threshold (CI 21.4 – 34.4; 95 percent) and the entire confidence interval for GAM by MUAC (CI 19.6 – 34.2; 95 percent) was above the Famine threshold

predominantly to conflict. Though much of the observed excess mortality is not directly linked to food insecurity, this CMR is extremely high and also indicates massive livelihood disruption through armed conflict. The same survey gave an Under-Five mortality rate (U5MR) of 0.78 (CI 0.29-2.10; 95%), atypically low given the severely elevated CMR and further indicative of the predominant effect of conflict.

Location	Partner	Type of Assessment	Month	Total N. of children	Proxy SAM%	Proxy MAM%	Proxy GAM%
Panyijjar	IRC	Mass MUAC	Jan. 2017	2,350	11.8	25.9	37.7
Leer	CONCERN	Mass MUAC	Dec. 2016	1,611	11.5	20.9	32.4
Leer	CONCERN	Mass MUAC	Nov. 2016	1,617	14.1	27.7	41.8
Leer TPA	WHO, IOM, CONCERN	Mass MUAC	Nov. 2016	275	17.0	22	39.0
Leer	NILE HOPE	Mass MUAC	Sept. 2016	516	8.1	27.7	35.9
Mayendit South	SP	Mass MUAC	Jan. 2017	4,250	3.57	19.63	23.2
<b>Mass MUAC Cut off point for IPC Nutrition Phase 5</b>							<b>17%</b>
Mayendit	UNIDO	SMART Survey	Feb. 2017	517	5	22.4	27.4

Table: List of Mass MUAC surveys undertaken in Leer, Mayendit and Panyijjar

In consideration of the relative accessibility of Mayendit, it was believed that humanitarian assistance reached enough of the Humanitarian Catastrophe caseload to prevent Famine in the area (IPC Phase 4!). However, given the estimated caseload of individuals experiencing destitution and severe food consumption gaps, Emergency food insecurity (IPC Phase 4) persisted despite the food distributions that took place in December 2016. Planned humanitarian assistance as of the time of analysis was determined to be insufficient in preventing at least one in five households in the area, or at least 17,000 individuals, from shifting into Humanitarian Catastrophe over the period February-July thus resulting in a Famine classification for the entire county (IPC Phase 5) for the same period.

**Koch**, in the absence of recent acute malnutrition and mortality data, lacked sufficient direct evidence for a full area classification. However, based upon analysis of Koch in the previous seasons and of the surrounding areas, recent field missions to other Famine-affected areas, and the professional judgement of the SS IPC TWG, the ERC recommended a classification of Elevated Likelihood that Famine is Happening – it was highly likely that at least one in five households in the area were experiencing Humanitarian Catastrophe (IPC Phase 5) as of January 2017. The estimated caseload of individuals experiencing Humanitarian Catastrophe (IPC Phase 5) through the end of April 2017 is approximately 35,000, representing 25% of the projected population in the county in this period. The same lack of evidence also allows for only a projection of Elevated Risk of Famine through February-July - it is highly likely that at least one in five households in the area will be in Humanitarian Catastrophe (IPC Phase 5). This was the strongest extrapolation of limited data possible at the time of analysis. If access is granted to collect updated data, Koch may be reclassified at any time<sup>7</sup>.

**Panyijjar** was classified as Emergency (IPC Phase 4) in January 2017 because of relative stability of the area, slightly better access to markets and regular delivery of assistance; however it had Mass MUAC proxy GAM prevalence of 37.7 percent, including a SAM prevalence of 11.8 percent, more than double the Famine threshold (IPC Phase 5 for Acute Malnutrition – Extreme Critical) and an indicator of very high levels of food insecurity. High numbers of IDP's have been observed entering Panyijjar from Famine-affected counties to the immediate north, greatly increasing the number of severely vulnerable households in the area and likely contributing to Extreme Critical acute malnutrition levels. However, acute malnutrition and mortality data stratified by displacement status is lacking in Panyijjar – filling this gap would yield much greater insight into both Panyijjar and Famine-affected areas to the north. The estimated Humanitarian Catastrophe caseload for the period February-April 2017 is 8,000 individuals, or approximately 10% of the projected population in the county. Some population of this caseload is likely the IDP influx, though food consumption and livelihood change data for Panyijjar also showed a mix of Emergency and Famine levels of food insecurity (IPC Phases 4 and 5). With greater accessibility for humanitarians as compared to Koch, Leer, and much of Mayendit, it is expected that despite extremely Critical acute malnutrition levels and IDP inflow, Panyijjar will not deteriorate into Famine over the period February-July through humanitarian assistance (IPC Phase 4!), though it will remain an at-risk

<sup>7</sup> A country-wide IPC update for South Sudan is planned for 24-28, April 2017

area. **The SS IPC TWG emphasizes that a classification of IPC Phase 4! is intended to show the presence of severe food insecurity consistent with Famine (IPC Phase 5) and that humanitarian assistance is the primary mitigating factor preventing Famine.**

These classifications signal the earliest period in which Humanitarian Catastrophe caseloads were seen to cross the minimum population threshold for Famine (IPC Phase 5) and reflect the latest iteration of the global technical guidance for the classification of Famine within IPC. While Famine itself is a non-linear process of socio-economic decline, as seen across the spectrum of IPC phases, Famine classifications are intended to designate the point at which catastrophic food insecurity has begun to manifest itself in severe excess mortality. Timely identification of this point in a process of Famine (early detection), where minimum thresholds have been observed, should lead to a pro-active response *prior to the escalation of deaths*.

**The SS IPC TWG and the ERC urge all responsible stakeholders to immediately grant and maintain unrestricted humanitarian access and ensure the respect of humanitarian space in Greater Unity. Unconditional humanitarian access from all parties involved in the ongoing political conflict must be granted to facilitate the delivery of assistance to affected populations. With consistent, adequate, and timely humanitarian interventions – including food, nutrition, and health – classifications of Famine occurrence and elevated risk can be reversed and many lives can be saved.**

During January 2017, humanitarian assistance was successful once again in preventing Famine in South Sudan, as Mayendit remained in Emergency (IPC Phase 4!). Over the projection period, successful prevention is also expected in Panyijiar where the affected population is more accessible and IDP's from less accessible areas may be reached (IPC Phase 4!), while highly vulnerable areas of former Northern Bahr el Ghazal will continue to benefit significantly from humanitarian assistance. Further escalation of Famine, however, can only be prevented if humanitarian assistance is scaled up and reaches the intended beneficiaries immediately. Although the priority for humanitarian actors must be response, improved humanitarian access will also allow for additional assessment and monitoring to improve understandings of Famine magnitude, severity, and likely duration in affected areas and above all when affected areas get out of the Famine situation.<sup>8</sup>

## OVERALL FOOD INSECURITY IN SOUTH SUDAN

**3.8 million people** – approximately one out of every three households in South Sudan – were severely food insecure (IPC Phases 3, 4, and 5) as of January 2017, the highest levels of post-harvest food insecurity since the conflict began in 2013. Indicative of the substantial disruption to food production and trade across the country in the last six months, this represented a 35 percent relative increase from the same period last year. Between February and April 2017, an estimated **4.9 million people**, accounting for approximately 42 percent of the national population, will be severely food insecure. This is projected to increase to **5.5 million people**, or about 47 percent of the national population, at the height of the 2017 lean season in July. Within the overall estimations of severely food insecure populations across the current and projection periods, approximately 230,000 are urban poor in Juba, or roughly half of the capital's population. The latest round of FSNMS showed nearly three-quarters of all households with inadequate food consumption during the harvest period, an increase of one-fifth of all South Sudanese households from the same period last year. Household livestock ownership also declined by 37 percent year-on-year, severely reducing access to a vital source of food and income.

The interplay of insecurity and declining household food access continues to cause additional displacement, placing further strain on host communities and forcing many others to leave the country. This dynamic is most clearly seen in Greater Equatoria, where ongoing armed conflict disrupted both planting seasons in 2016 and displaced over half a million residents internally and externally. Historically a surplus-producing area, Greater Equatoria underwent a considerable drop in cereal production in 2016, the consequences of which will be felt through the first half of 2017 across the country. Concentrated heavily in the southern counties of Central Equatoria, continued displacement presents heightened risks of prolonged underproduction into 2018 if farmers are not able to safely return to these areas and receive adequate livelihoods support (seeds and tools) in time for the 2017 planting seasons.

While the deterioration of the food security situation from the harvest period to January follows seasonal patterns, overall numbers of food insecure households again show an unprecedented year-on-year increase. As

<sup>8</sup> The IPC Framework does not allow for classifying severity, or degrees, of Famine. Comparative analysis between Famine-affected areas will require additional data and analytical consensus.



the economic crisis and widespread insecurity further disrupt trade and livelihoods, previously resilient households are no longer able to cope with the cumulative effects of the protracted crisis. Household vulnerability is increasing as coping depletes assets, insecurity undermines livelihoods, and soaring price inflation hinders asset recovery, leading to dangerous food consumption gaps, low diet quality, and rising acute malnutrition.

Acute malnutrition remains a major public health emergency in South Sudan. Out of 23 counties with recent data, 14 have a GAM prevalence at or above 15 percent, while a GAM prevalence above 30 percent is observed in two counties of Greater Unity – Panyijiar and Leer. Similarly, a worsening nutrition situation atypical to a harvest season is observed in the Greater Equatoria region – particularly in former Central Equatoria. Also, some areas of Greater Bahr el Ghazal, particularly Aweil North, show higher-than-expected levels of acute malnutrition for the post-harvest season. A deepening nutrition crisis is resulting from the interaction of the effects of the protracted crisis, including armed conflict, displacement, and economic shocks, and chronic issues of poor Infant and Young Child Feeding practices (IYCF). The cholera outbreak running north along the White Nile, including in Juba, parts of former Unity and Jonglei, further exacerbated the situation. **The existence of an enduring cholera outbreak in close geographic proximity to Famine presents a heightened risk of more widespread outbreak and additional mortality, further highlighting the need for a multi-sectoral response to Famine.** The overall acute malnutrition situation is expected to deteriorate further in the upcoming months, peaking in the lean season.

A narrow window of opportunity exists at the beginning of the 2017 dry season to distribute both food and livelihood assistance in order to prevent drastic increases in food insecurity through July, which is projected to affect up to 5.5 million people. This projected food-insecure caseload is geographically diverse, ranging from western and southern former Upper Nile and western and northern former Jonglei to Greater Wau and southern former Central Equatoria. **In addition to central and southern Greater Unity, priority areas for immediate and continued assistance are former Northern Bahr el Ghazal, northern Jonglei drought-affected – Greater Kapoeta and Greater Pibor.** The expected response to Famine-affected areas in Greater Unity must not sacrifice much needed assistance to other severely food insecure areas of the country. Moreover, the overstretching of current humanitarian resources and capabilities during the projected worsening of food insecurity is a distinct possibility.

Humanitarian assistance throughout 2016 consistently prevented food security deterioration and it is of paramount importance that assistance not only continues in 2017, but scales up in the face of mounting food insecurity across the country. Humanitarian access is expected to see some improvement in the dry season as road conditions improve, but any hindrances placed on access will jeopardize assistance delivery to the most vulnerable, particularly in priority areas. Humanitarian access remains a major challenge in implementing lifesaving interventions and critical assessments in the worst-affected areas.

## FOOD INSECURITY – JANUARY 2017

Hyperinflation continued to erode household purchasing power and adversely affect Terms of Trade (ToT) for both casual labour and livestock, reducing food access for a wide range of both urban and rural populations reliant on markets for food even as trader flight<sup>9</sup> persisted. Regional drought severely affected large sections of the Greater Horn of Africa, adversely affecting the region's pastoralists and prompting forecasts of staple food commodity price increases through 2017. Pastoralists in the southeastern semi-arid pastoralist zone of South Sudan, including Greater Kapoeta and much of Greater Pibor, experienced significant drought-induced reductions in vegetation cover, resulting in earlier and more distant livestock migrations and the decreased availability of livestock products.

Informal cross-border livestock trading was hit with declining ToT<sup>10</sup>, thus eroding the benefits of trying to preserve capital in the form of livestock holdings. These challenges come as the overall number of households owning livestock in the country, including cattle, small ruminants, and poultry, continues to decline, dropping by a relative 37 percent compared to the same period last year. Relative decreases are spread across both conflict-affected and more stable areas, including decreases of 46 percent in former Eastern Equatoria, 47 percent in former Northern Bahr el Ghazal, 96 percent in former Central Equatoria, and 104 percent in former Warrap, as seen in the last round of FSNMS.

<sup>9</sup> Most traders are not willing to accept the higher level of risk of doing business in an economic crisis environment

<sup>10</sup> The amount of cereal one can purchase after selling livestock has drastically reduced as cereal prices rise faster than livestock prices

**55 percent of households in Greater Unity were severely food insecure, including 80,000 individuals facing Humanitarian Catastrophe (IPC Phase 5). Leer was classified as in Famine (IPC Phase 5), while Koch was classified as having an Elevated Likelihood that Famine Is Happening. Mayendit narrowly avoided Famine through the continued delivery of humanitarian assistance.** Severely disrupted agriculture, extreme levels of livestock and other household asset loss, and a near total reliance on fishing and the gathering of wild foods for most of the populations within these counties has resulted in an extreme lack of food, growing destitution, and the heightened possibility of death from starvation and morbidity. Panyijiar, though classified as Emergency, shows the potential to deteriorate into Famine if humanitarian assistance is interrupted or becomes insufficient for a rising IDP caseload. **Counties currently affected by Famine and contiguous to Famine-affected areas have shown Emergency (IPC Phase 4) levels of food insecurity 83 percent of the time on average, as measured by months in phase classification from May 2014 to January 2017 – the entirety of IPC reporting since the beginning of the current conflict. The maximum is Koch, with 94 percent, followed by Leer at 82 percent, Panyijiar at 79 percent, Mayendit at 73 percent, and Guit at 70 percent. This recurring Emergency food insecurity (IPC Phase 4), including populations in Humanitarian Catastrophe (IPC Phase 5), from mid-2014 to the present period has massively reduced, and in some cases eliminated, coping capacity for many households within Famine-affected and at-risk counties.**

Elsewhere in Greater Unity, humanitarian assistance prevented the deterioration of food security in both Rubkona (IPC Phase 2!) and Pariang (IPC Phase 2!), both of which have remained relatively accessible. In Guit, the food security situation deteriorated back into Emergency (IPC Phase 4) as insecurity and displacement also continue to affect the area. The area has faced Emergency classifications for much of the period mid-2014 to present and is expected to remain highly vulnerable.

The spread of armed conflict into the Greater Equatoria region, which includes the country’s most productive agricultural zone, contributed heavily to an estimated 40 percent year-on-year decline of South Sudan’s net cereals production in 2017 as compared to 2016. 93 percent of households in Western Equatoria and 52 percent in Central Equatoria reported in the last round of FSNMS that armed conflict was a main shock affecting them during the harvest period, compared to only 6 and 1 percent, respectively in the same period last year. Ongoing armed conflict and the resulting mass displacement and livelihood disruption atypically elevated food insecurity for numerous counties in the area into Crisis (IPC Phase 3). This deterioration has been observed in Greater Mundri in the west through the southern half of former Central Equatoria, ending in the east in the area of Magwi and Torit. Tambura, Nzara, Ibba, and Maridi remained relatively stable and food secure.

While Kajo-Keji showed normal surplus production, it faced significant IDP inflow of approximately 30,000 individuals from nearby conflict-affected areas and the outflow of an estimated 50 percent of its resident population, largely into Uganda<sup>11</sup>. The presence of IDPs in Kajo-Keji put pressure on the Stressed (IPC Phase 2) host community to share their surplus production. Further east, Lopa/Lafon and the state capital of Torit town exhibited significantly elevated rates of excess mortality as the result of an apparent health crisis, of which the linkages to food security remain empirically unclear. While Ikotos County showed Crisis (IPC Phase 3) while Budi County showed Stressed (IPC Phase 2) food insecurity, both continued to show mixed areas of Stressed (IPC Phase 2) and Crisis (IPC Phase 3) food insecurity despite surplus production in both valleys and highlands. This mix is largely attributed to ongoing severe food insecurity among populations in Kidepo Valley, where the two counties share a border. Greater Kapoeta was in Crisis (IPC Phase 3), a situation exacerbated by drought and high IDP inflow into Kapoeta town, the area’s primary market.

In Greater Upper Nile, former Jonglei underwent a 25 percent increase in the number of severely food insecure households from the October–December 2016 projection period to January 2017. Outside of the highland areas of Pochalla and portions of contiguous counties which remained in Stressed (IPC Phase 3) food insecurity, most of former Jonglei remained food insecure, with 40 percent of its population severely food insecure overall. In addition to low cereal harvests, food insecurity was aggravated by declining access to livestock products, poorly functioning markets characterized by unseasonably high food prices, and escalating inter-communal conflict across the state. Prone to natural hazards, counties in the north and west saw reduced harvests and household asset losses due to flooding, including Ayod, Nyirol, Fangak, and Canal/Pigi.

Akobo continued to experience population movements across the border into refugee camps in Ethiopia, with daily net outflow spiking in November-December 2016 and peaking in December around 110 per day. Most of

<sup>11</sup> IDPs are moving into Kajo Keji to escape insecurity in their areas of origin and majority of them cannot proceed to Uganda for lack of resources, whereas the residents, having some resources, are able to cross the border in search of food and safety

those leaving cited a lack of food and insecurity as their primary motivation for doing so. The proportion of severely food insecure households in former Upper Nile was 16 percent at post-harvest time, attributed to continued relative stability in the northeast and targeted humanitarian assistance and livelihoods support, facilitating normal engagement in livelihood activities and average cereal production. Renk continued to demonstrate potential as food security bright spot. Conflict on the western bank of the White Nile, particularly in the Greater Malakal area, and intermittent fighting around Nasir's Jikmir area, continued to disrupt livelihoods and force displacement.

Former Northern Bahr el Ghazal showed a drastic year-on-year deterioration in food security, with the severely food insecure population more than doubling from 20 percent to 52 percent. This was attributed to poor harvests, trade route disruptions, reduced household purchasing power, and high food prices in a region that is heavily dependent on markets for accessing food. Food assistance inflows continued to hold the food insecurity situation at Crisis (IPC Phase 3) levels, particularly in Aweil East. Former Western Bahr el Ghazal had approximately 16 percent of its population experiencing Crisis and Emergency (IPC Phases 3 and 4) food insecurity. While this was a marginal 4 percent increase compared to the same period last year, it was a considerable improvement from the 47 percent of households that were severely food insecure during the October-December 2016 projection period. Post-harvest cereals availability, decreased reliance on markets, and diets supplemented with fish and wild foods accounted for much of this improvement. Insecurity in Raga, however, continued to compromise food security due to disruptions to livelihoods and trade through displacement.

Former Warrap showed a slight improvement as compared to the October-December 2016 projection period, as nearly 4 percent of the population is no longer severely food insecure (IPC Phases 3 and 4), driven by continued stability, livestock availability, and successful local cereal production in much of Greater Gogrial and Greater Tonj. Overall, minimal population shifts occurred between phases (IPC Phases 3 and 4) from the previous period in former Lakes and the severely food insecure population stood at 24 percent of the total population (IPC Phases 3 and 4). Historically low cereal production continued, with several areas including Awerial hit by flooding. Inter-communal violence directly affected livelihoods for small concentrations of households throughout the area, while an IDP influx into Rumbek East and other areas strained local food availability, even as market-reliant populations continued to face difficulties in utilizing markets in Rumbek, Cueibet, and other areas.

## NUTRITION IPC CLASSIFICATION – JANUARY 2017

In addition to Extreme Critical (IPC Phase 5 for Acute Malnutrition) proxy GAM rates in Famine-affected areas of central and southern Greater Unity, SMART surveys conducted in Abiemnhom, Mayom, and Rubkona counties showed GAM above 15 percent, or Critical (IPC Phase 4 for Acute Malnutrition). Greater Unity is especially at risk from the ongoing cholera outbreak, especially in Panyijiar, Leer, and Rubkona, as well as the coincident interruption of health and nutrition services by armed conflict, particularly in Leer, Koch, and Mayendit. From July, a significant number of nutrition feeding centers have suspended their operations throughout the area, drastically reducing treatment coverage for acute malnutrition.

GAM in former Jonglei and Upper Nile was similar to that observed in the same season in previous years. Improvements were registered from the same season in 2016 in Maban, which moved from Serious (IPC Phase 3 for Acute Malnutrition) to Alert (IPC Phase 2 for Acute Malnutrition), and Nasir, which shifted from Critical (IPC Phase 4 for Acute Malnutrition) to Serious (IPC Phase 3 for Acute Malnutrition) as a result of sustained nutrition interventions. Pibor deteriorated from Serious (IPC Phase 3 for Acute Malnutrition) to Critical (IPC Phase 4 for Acute Malnutrition) in the same period.

Nutrition deterioration atypical of the region was ongoing in Greater Equatoria. GAM in former Central Equatoria deteriorated from Acceptable (IPC Phase 1 for Acute Malnutrition) in November 2015 to Alert (IPC Phase 2 for Acute Malnutrition) in November 2016. In former Eastern Equatoria, recent SMART surveys conducted in Ikotos and Lopa/Lafon showed GAM prevalence above the emergency threshold of 15 percent, or Critical (IPC Phase 4 for Acute Malnutrition). Kapoeta East and Kapoeta North and Torit town were classified as Serious (IPC Phase 3 for Acute Malnutrition), a decline from the same season in previous years. Budi worsened from Serious (IPC Phase 3 for Acute Malnutrition) to Critical (IPC Phase 4 for Acute Malnutrition) from the same period last year. In Juba city, GAM of 11 percent kept the nutrition situation at Serious (IPC Phase 3 for Acute Malnutrition). Improved coverage of public health and nutrition programs may have averted a worsening nutrition situation amid major shocks experienced by the urban population of Juba.

The nutrition situation in parts of former Northern Bahr el Ghazal remained very concerning, as a SMART survey in Aweil North showed elevated levels of acute malnutrition (GAM of 28.2 percent) for the post-harvest season. In Aweil East, West, and South, GAM prevalence remained at Critical (IPC Phase 4 for Acute Malnutrition). In an SMART survey, Aweil Centre registered the lowest GAM prevalence, showing 9.9 percent as of November 2016.

No timely acute malnutrition data was available for former Warrap, except in Gogrial West which continued to exhibit elevated GAM rates of 32 percent. The nutrition situation in former Lakes is similar to that in January 2016 while a lack of data prevented the classification of counties in former Western Bahr el Ghazal.

## FOOD INSECURITY – FEBRUARY TO APRIL 2017 PROJECTION

**As the lean season begins, an additional 1.1 million people across the country are projected to become severely food insecure.** With the national cereals deficit sharply rising by 31 percent<sup>12</sup> for 2017, a longer-than-average lean season<sup>13</sup> is expected. The early exhaustion of reduced household food stocks and increased market reliance, especially in the northwest, will likely exacerbate seasonal and inflationary pressure on the retail prices of staple foods. Lower production in former Western and Central Equatoria is further expected to result in additional decreases in trade flows through the western corridor, affecting western interior markets from Rumbek to Wau. **Stability will be key to ensuring humanitarian access, maintaining adequate trade flows and normal livestock movements, and preparing for the main planting season, including the distribution of agricultural inputs.**

Import flows of staple food commodities from Uganda into South Sudan will heavily rely on continued government and humanitarian imports as regional prices rise over 2017. South Sudan has become increasingly reliant on Uganda, and to a lesser extent Sudan, for food imports to cover its cereal deficits since 2013. While the dry season will alleviate seasonal challenges to transportation, the stability of the Nimule–Pageri corridor connecting Juba to Uganda and access at key points on the Sudan–South Sudan border will remain vital to trade in food commodities. Restrictions on food imports from Kenya are expected to further exacerbate the situation. The combined effects of the protracted domestic economic crisis and regional price increases will further erode the purchasing power of the average household through the 2017 lean season, with any food price relief unlikely until the 2017 early harvest in the Equatorias.

Across South Sudan, most of which experiences unimodal rainfall, this projection period will be the driest portion of the year and represent a pastoralist lean season as milk production declines, transhumant cattle migration occurs, and alternative sources of food such as wild foods and fish decline. Household food stocks of cereals and vegetables will also decline and market-purchased food will become increasingly important as the rainy season approaches. This period will be especially difficult for drought-affected Greater Kapoeta and Greater Pibor.

All former states are expected to see an increase in the proportion of severely food insecure households, with projected increases in former Western Bahr el Ghazal, Lakes, and Jonglei of 29, 17, and 13 percent, respectively. Greater Unity and Northern Bahr el Ghazal are expected to continue showing the largest proportions of severely food insecure populations at 61 and 57 percent, respectively.

**61% of households in Greater Unity are expected to face severe food insecurity in this period (IPC Phases 3, 4, and 5), including 102,000 individuals experiencing Famine conditions in Humanitarian Catastrophe (IPC Phase 5). Leer and Mayendit are projected to be in Famine (IPC Phase 5), with the Leer projection taking into consideration the professional judgement of the ERC. Koch is expected to remain at an Elevated Risk of Famine, given that the January classification could neither prove nor disprove Famine and provided a limited basis for extrapolation. Panyijiar is expected to avoid Famine only through the continued delivery of adequate humanitarian assistance (IPC Phase 4!), a projection which took into consideration the professional judgement of the ERC.**

**Sufficient, timely and sustained humanitarian access to all populations facing Famine and Elevated Risk of Famine is urgently required for both the unimpeded delivery of emergency assistance and continued monitoring of the food security and nutrition situation.** In Koch, Mayendit, Leer, and Panyijiar, it is imperative

<sup>12</sup> The net cereals deficit for 2017 is approximated at 499,000 MT, whereas it was 380,000 MT for 2016.

<sup>13</sup> In some parts of the country, the lean season will have started as early as January 2017.



to immediately deliver large volumes of humanitarian aid – including food, nutrition, and health assistance – through the first trimester of 2017 to reverse Famine classifications and prevent further deterioration.

Elsewhere in Greater Unity, humanitarian assistance is again expected to prevent further deterioration in food security in both Rubkona (IPC Phase 3!) and Pariang (IPC Phase 2!), counties which have remained relatively accessible. Rubkona is still expected to shift from Stressed (IPC Phase 2!) into Crisis (IPC Phase 3!), however. Guit is expected to remain in Emergency (IPC Phase 4) as insecurity and displacement continue to similarly affect the area.

Former Northern Bahr el Ghazal is not expected to have populations in Humanitarian Catastrophe, though it will remain an area to closely monitor as an estimated 63% of its population will be experiencing severe food insecurity (IPC Phases 3 and 4). Aweil West and Aweil South are projected to move into Emergency (IPC Phase 4) in this period with the exhaustion of household food stocks and growing dependence on financially inaccessible markets. Timely humanitarian assistance is expected to prevent additional deterioration of the already severe food insecurity in Wau and Aweil East counties (IPC Phase 3!). Populations turning to Rumbek, Wau, Aweil, and local markets along the western corridor will show increasing vulnerability to price volatility during this period.

Greater Equatoria is expected to see some increases in Crisis and Emergency (IPC Phases 3 and 4) food insecure populations, with former Eastern Equatoria recording the highest increase of almost 10 percent. Dry season stress experienced by pastoralists in Greater Kapoeta is anticipated to drive most of this increase as other counties largely remain in Crisis (IPC Phase 3). Disruptions to agricultural activities and population displacement throughout 2016 will lead to an earlier onset of the lean season and greater reliance on poorly functioning markets characterized by high food prices in this period. Supporting the first planting season will be essential to restoring normal crop production and livelihoods activity.

Former Jonglei and Upper Nile will likely see moderate increases in their severely food insecure populations as an additional 10 percent of individuals in former Upper Nile and 13 percent of individuals in former Jonglei shift into Crisis and Emergency (IPC Phases 3 and 4) food insecurity. Timely humanitarian assistance is anticipated in this period in northern former Jonglei and southern former Upper Nile, especially for Canal/Pigi and Malakal counties, preventing phase deterioration into Emergency (IPC Phase 4!) food insecurity. For households able to access rivers and swamps, fish, livestock, and vegetable farming will play a major role in supplementing diets during the lean season in these two former states.

## **NUTRITION – FEBRUARY TO APRIL 2017 PROJECTION**

The acute malnutrition situation is expected to deteriorate further during this period due to deteriorating food security, the economic crisis, poor maternal and child care, and a lack of public health services – all severely aggravated by conflict. Normal livestock migration during this period will reduce household access to milk and other animal products, adversely affecting diet quality for infants and young children especially.

Parts of northern Greater Unity will remain Critical (IPC Phase 4 for Acute Malnutrition) while central and southern Greater Unity is projected to be Extreme Critical (IPC Phase 5 for Acute Malnutrition). Improvement is expected in former Jonglei where data is available – the counties of Nyirol and Akobo are expected to move from Critical (IPC Phase 4 for Acute Malnutrition) to Serious (IPC Phase 3 for Acute Malnutrition) when compared to the same season in 2016. Bor South and Duk are also projected to be in Serious (IPC Phase 3 for Acute Malnutrition) while the counties of Fangak, Ayod, Uror, Twic East, and Pibor are likely to be in Critical (IPC Phase 4 for Acute Malnutrition). In former Upper Nile, the counties of Longochuk, Nasir, and Ulang are projected to be in Critical (IPC Phase 4 for Acute Malnutrition).

Former Western Bahr el Ghazal is projected to see Critical (IPC Phase 4 for Acute Malnutrition) levels of GAM due to continued fighting and dwindling household food stocks projected during this period. Similarly, former Northern Bahr el Ghazal is expected to remain Critical (IPC Phase 4 for Acute Malnutrition), as most of the area exhibited GAM rates above 15 percent in the post-harvest period. Former Lakes is projected to be in Serious (IPC Phase 3 for Acute Malnutrition), a phase that it has consistently maintained for a long time.

Deterioration as compared to the same period in 2016 is projected in Western Equatoria. Fighting in parts of former Western Equatoria is expected to adversely affect the nutrition situation. Former Central Equatoria is projected to deteriorate to its historical worst classification, Serious (IPC Phase 3 for Acute Malnutrition), for the same season as the result of ongoing insecurity and displacement. In former Eastern Equatoria, drought-

affected Greater Kapoeta is projected to mainly be in Serious (IPC Phase 3 for Acute Malnutrition), while of Lopa/Lafon and Ikotos are likely to be in Critical (IPC Phase 4 for Acute Malnutrition).

## FOOD INSECURITY – MAY TO JULY 2017 PROJECTION

**As the lean season peaks, an additional 600,000 people are expected to become severely food insecure across the country.** Exhausted household cereal stocks, rainy season disruptions to market systems, especially road networks, and additional expected price increases will be key drivers of this shift. Limited relief will come through the availability of a green harvest for regions with an early first harvest season, increased availability of fish and wild foods due to the onset of the rains, and the return of livestock as water and pasture become available near homesteads. **Stability will be key to ensuring humanitarian access, maintaining adequate trade flows and normal livestock movements, and preparing for the main planting season, including the distribution of agricultural inputs and other livelihoods support.**

With the onset of the lean season will also come very limited relief for small populations in Famine-affected areas, as rains will moderately increase the availability of wild foods and fish for populations able to access them. Nearly two of every three households in Greater Unity will face severe food insecurity (IPC Phases 3, 4, and 5), however. The population projected to be experiencing Famine conditions in Humanitarian Catastrophe (IPC Phase 5) will fall slightly from the previous projection period to 90,000 individuals. Leer and Mayendit are projected to remain in Famine (IPC Phase 5), with the Leer projection taking into consideration the professional judgement of the ERC. Koch is expected to remain at an Elevated Risk of Famine, given that the January classification could neither prove nor disprove Famine. Panyijiar is expected to avoid Famine only through the continued delivery of adequate humanitarian assistance (IPC Phase 4!), a projection which takes into consideration the professional judgement of the ERC.

**Sufficient, timely and sustained humanitarian access to all populations facing Famine and Elevated Risk of Famine is urgently required for both the unimpeded delivery of emergency assistance and continued monitoring of the food security and nutrition situation.** In Koch, Mayendit, Leer, and Panyijiar, it is imperative to continue delivering large volumes of humanitarian aid – including food, nutrition, and health assistance – through the end of the projection period, July 2017, to reverse Famine classifications and prevent further deterioration.

Elsewhere in Greater Unity, humanitarian assistance is again expected to prevent phase deterioration in both Rubkona (IPC Phase 3!) and Pariang (IPC Phase 2!), both of which have remained relatively accessible. Rubkona is still expected to shift from Stressed (IPC Phase 2!) into Crisis (IPC Phase 3!), however. Guit is expected to remain in Emergency (IPC Phase 4) as insecurity and displacement continue to similarly affect the area.

For both unimodal and bimodal zones in this period, the rainy season is predicted to begin normally and forecasts until May indicate that near-average levels of rainfall can be expected in most areas of the country. For pastoralists, particularly within Greater Kapoeta and Greater Pibor, the rains are expected to bring increases in pasture and water for livestock, leading to increased milk and meat availability as transhumant cattle herds return to homesteads. The exhaustion of most households' food stocks and further increased market reliance is expected to be partially alleviated by the increasing availability of wild foods, game and fish in some areas, and livestock products.

Greater Equatoria is expected to see minor improvements in both former Eastern Equatoria and Central Equatoria, with 7 and 3 percent of their respective populations moving below Crisis (IPC Phases 1 and 2) food insecurity as anticipated rainfall brings limited early harvests of short-term-sorghum and additional vegetation cover to drought-affected areas. Torit and Magwi are expected to remain in Crisis unless insecurity and trade disruptions are reduced. Former Western Equatoria is expected to see a shift of 4 percent of its population into severe food insecurity without prompt restoration of agriculture and trade.

Minor increases in the number of severely food insecure households in all areas of former Greater Bahr el Ghazal are expected at the height of the lean season, with 23 percent of households in former Warrap, 50 percent in former Western Bahr el Ghazal, 55 percent in former Lakes, and 62 percent in former Northern Bahr el Ghazal in Crisis and Emergency (IPC Phases 3 and 4) food insecurity. In Aweil North, Aweil East, and Aweil Centre, only the expected timely delivery of humanitarian assistance will continue to prevent phase deterioration into Emergency (IPC Phase 4!) food insecurity as household food access declines. A highly market dependent region, Greater Bahr el Ghazal food insecurity will be mainly driven by high food prices, the economic crisis, and the beginning of rainy season road deterioration.

Greater Upper Nile is anticipated to see moderate increases in severely food insecure populations, including an additional 14 percent of households in former Upper Nile and 12 percent of households in former Jonglei shifting into Crisis (IPC Phase 3) and Emergency (IPC Phase 4) food insecurity. Sustained humanitarian access and assistance delivery are expected to mitigate the seasonal increase in food insecurity and support food production, livestock movement, and livelihood recovery later in the year. The counties of Bor South, Urur, Pibor, Pochalla, Akobo, Ayod, Fangak, Malakal, and Maban will all see phase deterioration into Emergency prevented through humanitarian assistance (IPC Phase 3!), while phase deterioration into Crisis will likewise be prevented in Melut (IPC Phase 2!). Despite continued humanitarian assistance, Canal/Pigi will shift into Emergency (IPC Phase 4) while Nyirol will also see similar deterioration (IPC Phase 4).

## NUTRITION – MAY TO JULY 2017 PROJECTION

The acute malnutrition situation is expected to deteriorate further to its worst levels as households transition into the lean season as expected. Despite the seasonal return of animals to homesteads and the related increase in access to milk and other animal products, green vegetables, and wilds foods received in the rainy season, levels of malnutrition are likely to continue increasing as compared to the same season in previous years.

In Greater Unity, the situation is projected to remain in Critical (IPC Phase 4 for Acute Malnutrition) in the northern counties and Extreme Critical (IPC Phase 5 for Acute Malnutrition) in the central and southern counties. Southern Greater Unity shows a deterioration from Critical (IPC Phase 4 for Acute Malnutrition) in the same period in 2016. Former Upper Nile and Jonglei are expected to mainly remain at Serious (IPC Phase 3 for Acute Malnutrition), with some counties in Critical (IPC Phase 4 for Acute Malnutrition). Notably, a deterioration to Serious (IPC Phase 3 for Acute Malnutrition) in Pochalla from the same season in 2016 is noted while Maban is expected to improve from Critical (IPC Phase 4 for Acute Malnutrition) to Serious (IPC Phase 3 for Acute Malnutrition).

Former Northern Bahr el Ghazal will likely remain in Critical (IPC Phase 4 for Acute Malnutrition), although the situation in Aweil North is expected to worsen to a historical high as the current GAM prevalence is approaching 30 percent, the threshold for Famine (IPC Phase 5 for Acute Malnutrition – Extreme Critical). Former Western Bahr el Ghazal is also expected to be at Critical (IPC Phase 4 for Acute Malnutrition). The northern parts of former Warrap will mainly be in Critical (IPC Phase 4 for Acute Malnutrition) while southern areas of former Warrap and the entirety of former Lakes will be in Serious (IPC Phase 3 for Acute Malnutrition).

Former Central and Eastern Equatoria are expected to mainly be in Serious (IPC Phase 3 for Acute Malnutrition), with the counties of Lopa/Lafon and Ikotos in Critical (IPC Phase 4 for Acute Malnutrition). Deterioration in former Central Equatoria from Acceptable (IPC Phase 1 for Acute Malnutrition) in the same period in 2016 to Serious (IPC Phase 3 for Acute Malnutrition) in this period is noteworthy and attributed mainly to conflict. Former Western Equatoria is expected to be in Alert (IPC Phase 2 for Acute Malnutrition).

## ANNEX 1 – SUMMARY OF FAMINE CLASSIFICATIONS

**Table 1 - Summary of Current and Projected Famine Classifications: January, 2017**

County	Current (January, 2017)	Projection (February-July, 2017)
Koch	Elevated Likelihood that Famine is Happening (Possible IPC Phase 5)	Elevated Risk of Famine (High Probability of IPC Phase 5)
Leer	Famine (IPC Phase 5)	Famine (IPC Phase 5)
Mayendit	Famine Avoided through Humanitarian Assistance (IPC Phase 4!)	Famine (IPC Phase 5)
Panyijjar	Emergency (IPC Phase 4)	Famine Avoided through Humanitarian Assistance (IPC Phase 4!)

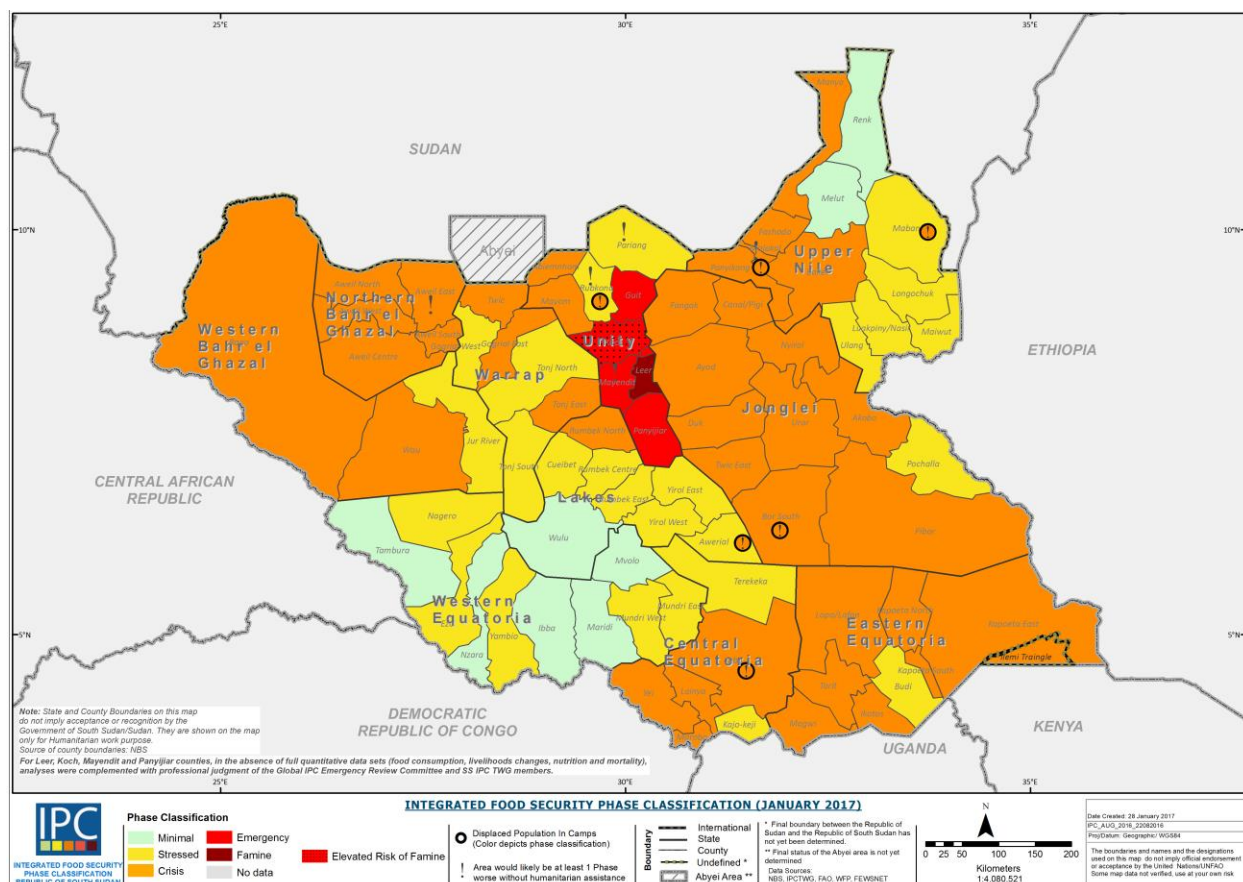
**Table 2 - Projected Caseload by IPC Phase: February-April, 2017**

County	Estimated Population (NBS Projection Mid-2017) <sup>14</sup>	Phase 1 Caseload – Minimal	Phase 2 Caseload – Stressed	Phase 3 Caseload – Crisis	Phase 4 Caseload - Emergency	Phase 5 Caseload – Humanitarian Catastrophe/Famine	Proportion of Population in Phase 5
Koch	140,056	-	14,000	42,000	49,000	35,000	25%
Leer	119,954	-	6,000	30,000	42,000	42,000	35%
Mayendit	83,340	4,000	13,000	25,000	25,000	17,000	20%
Panyijjar	78,830	8,000	16,000	24,000	24,000	8,000	10%
<b>Total</b>	<b>422,180</b>	<b>12,000</b>	<b>49,000</b>	<b>121,000</b>	<b>140,000</b>	<b>102,000</b>	<b>24%</b>

<sup>14</sup> IPC population figures are derived from South Sudan National Bureau of Statistics projections based on the 2008 Census and account for cumulative refugee outflow from 2013, including the departure of approximately 470,000 people since armed conflict escalated again in July, 2016. Refugee outflow was current as of 24 January 2017. Internal displacement is not currently factored into IPC population distributions, although Protection of Civilian (PoC) sites themselves receive distinct classifications.



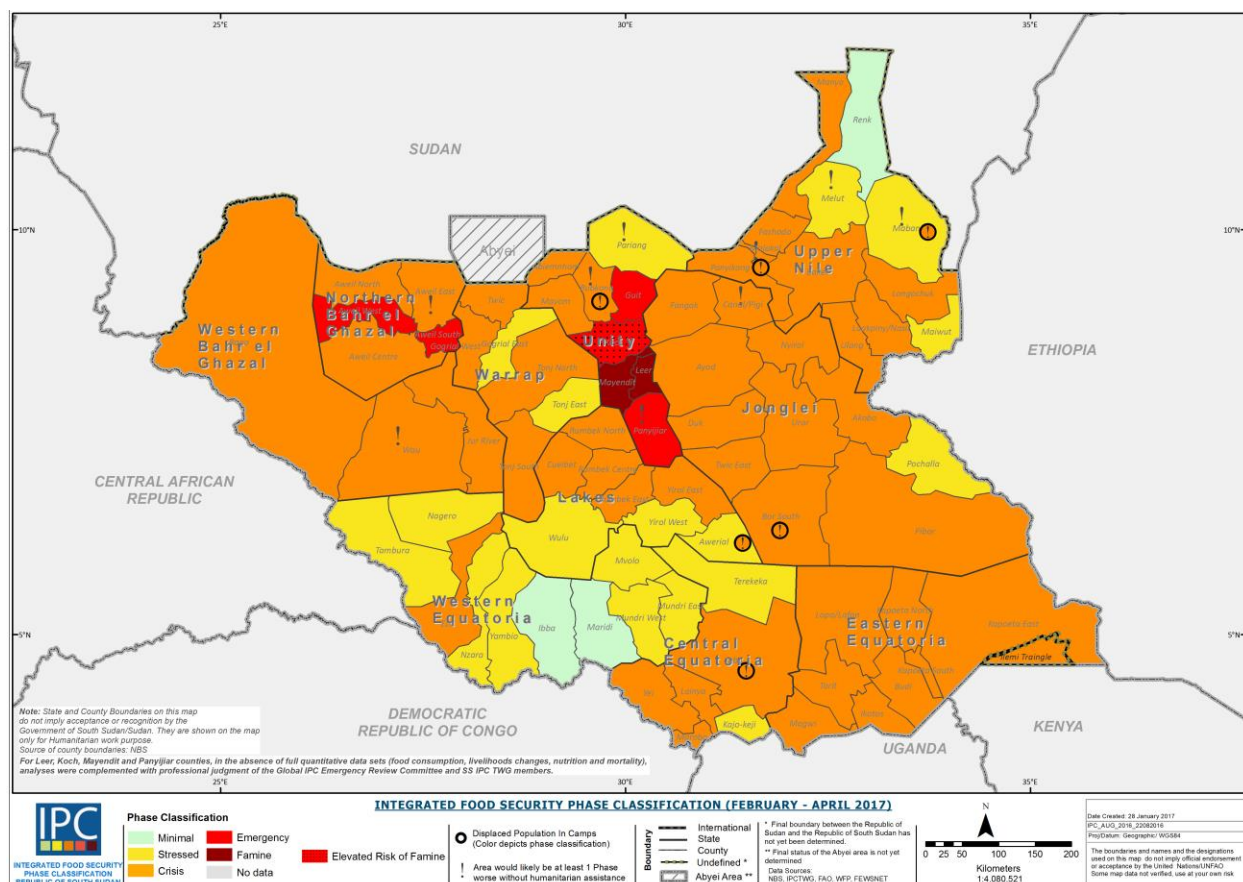
## ANNEX 2 – IPC CLASSIFICATION FOR SOUTH SUDAN FOR JANUARY 2017



**Disclaimer:** Former state and county boundaries on this map do not imply acceptance or recognition by the Government of South Sudan and/or its partners. They are shown on the map only for humanitarian purposes (Source: NBS). For Leer, Koch, Mayendit, and Panyijiar counties, in the absence of full quantitative data sets (food consumption, livelihoods changes, nutrition, and mortality), analyses were complemented with the professional judgment of the Global IPC Emergency Review Committee and SS IPC TWG members.

POPULATION DISTRIBUTION FOR JANUARY 2017							
Former States	Mid-2017 Population (NBS)	Phase 1 Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Famine / Humanitarian Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe
Central Equatoria	1,398,316	545,000	345,000	480,000	30,000	-	36.5%
Eastern Equatoria	1,010,188	280,000	365,000	285,000	75,000	-	35.6%
Jonglei	1,822,086	290,000	805,000	600,000	130,000	-	40.1%
Lakes	1,113,716	435,000	490,000	210,000	55,000	-	23.8%
Northern Bahr el Ghazal	1,418,111	230,000	440,000	560,000	180,000	-	52.2%
Unity	1,124,916	175,000	465,000	395,000	140,000	80,000	54.7%
Upper Nile	1,258,323	580,000	525,000	195,000	10,000	-	16.3%
Warrap	1,448,812	405,000	655,000	195,000	65,000	-	17.9%
Western Bahr el Ghazal	545,565	105,000	210,000	70,000	15,000	-	15.6%
Western Equatoria	705,821	460,000	190,000	55,000	-	-	7.8%
<b>Total</b>	<b>11,845,855</b>	<b>3,505,000</b>	<b>4,490,000</b>	<b>3,045,000</b>	<b>700,000</b>	<b>80,000</b>	<b>32.3%</b>

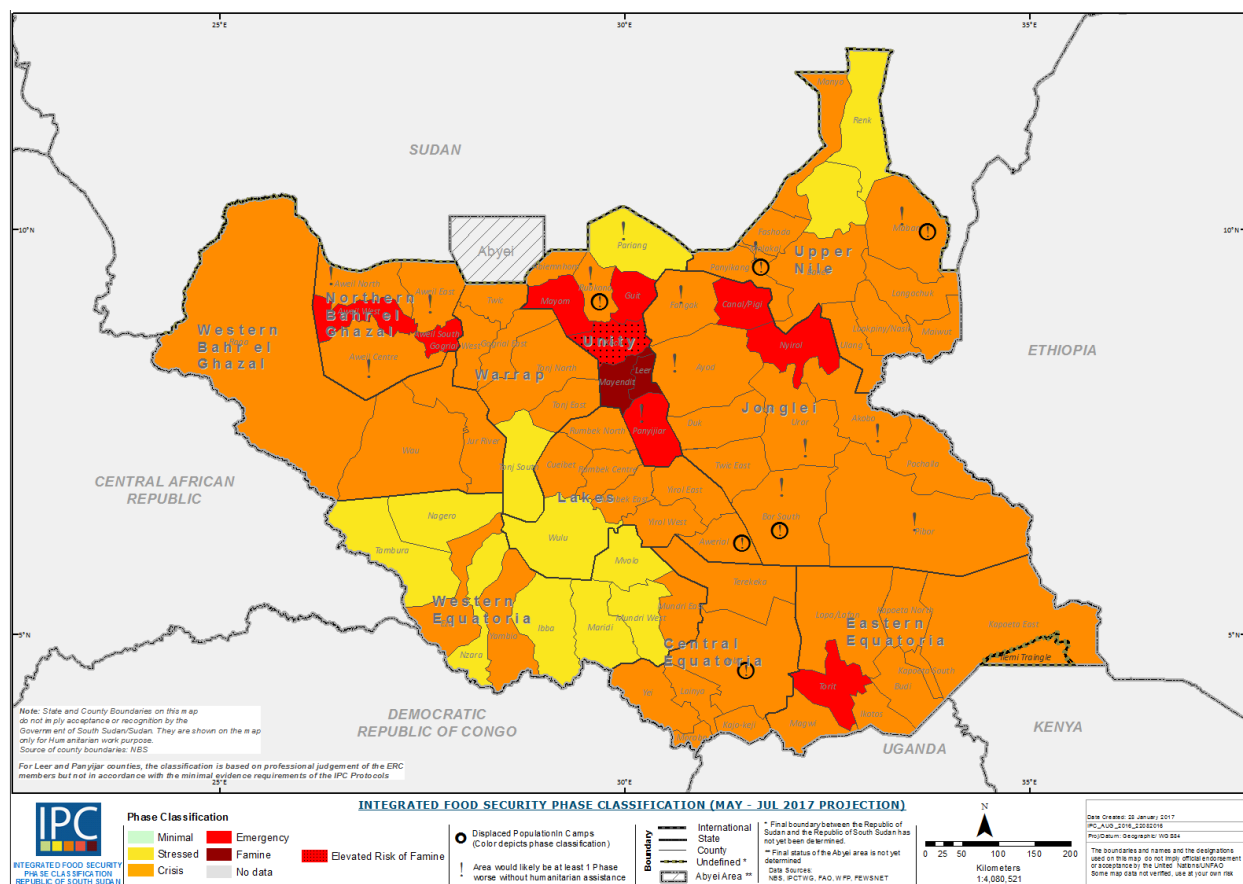
## ANNEX 3 – IPC CLASSIFICATION FOR SOUTH SUDAN FOR FEBRUARY-APRIL 2017



**Disclaimer:** Former state and county boundaries on this map do not imply acceptance or recognition by the Government of South Sudan and/or its partners. They are shown on the map only for humanitarian purposes (Source: NBS). For Leer, Koch, Mayendit, and Panyijar counties, in the absence of full quantitative data sets (food consumption, livelihoods changes, nutrition, and mortality), analyses were complemented with the professional judgment of the Global IPC Emergency Review Committee and SS IPC TWG members.

POPULATION DISTRIBUTION FOR FEBRUARY-APRIL 2017							
Former States	Mid-2017 Population (NBS)	Phase 1 Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Famine / Humanitarian Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe
Central Equatoria	1,398,316	475,000	385,000	495,000	45,000	-	38.6%
Eastern Equatoria	1,010,188	230,000	325,000	345,000	110,000	-	45.0%
Jonglei	1,822,086	205,000	645,000	755,000	220,000	-	53.5%
Lakes	1,113,716	320,000	450,000	355,000	100,000	-	40.9%
Northern Bahr el Ghazal	1,418,111	185,000	385,000	580,000	290,000	-	61.3%
Unity	1,124,916	140,000	390,000	420,000	170,000	100,000	61.3%
Upper Nile	1,258,323	495,000	470,000	270,000	60,000	-	26.2%
Warrap	1,448,812	385,000	665,000	210,000	65,000	-	19.0%
Western Bahr el Ghazal	545,565	85,000	200,000	235,000	10,000	-	44.9%
Western Equatoria	705,821	400,000	205,000	100,000	-	-	14.2%
<b>Total</b>	<b>11,845,855</b>	<b>2,920,000</b>	<b>4,120,000</b>	<b>3,765,000</b>	<b>1,070,000</b>	<b>100,000</b>	<b>41.7%</b>

## ANNEX 4 – IPC CLASSIFICATION FOR SOUTH SUDAN FOR MAY-JULY 2017



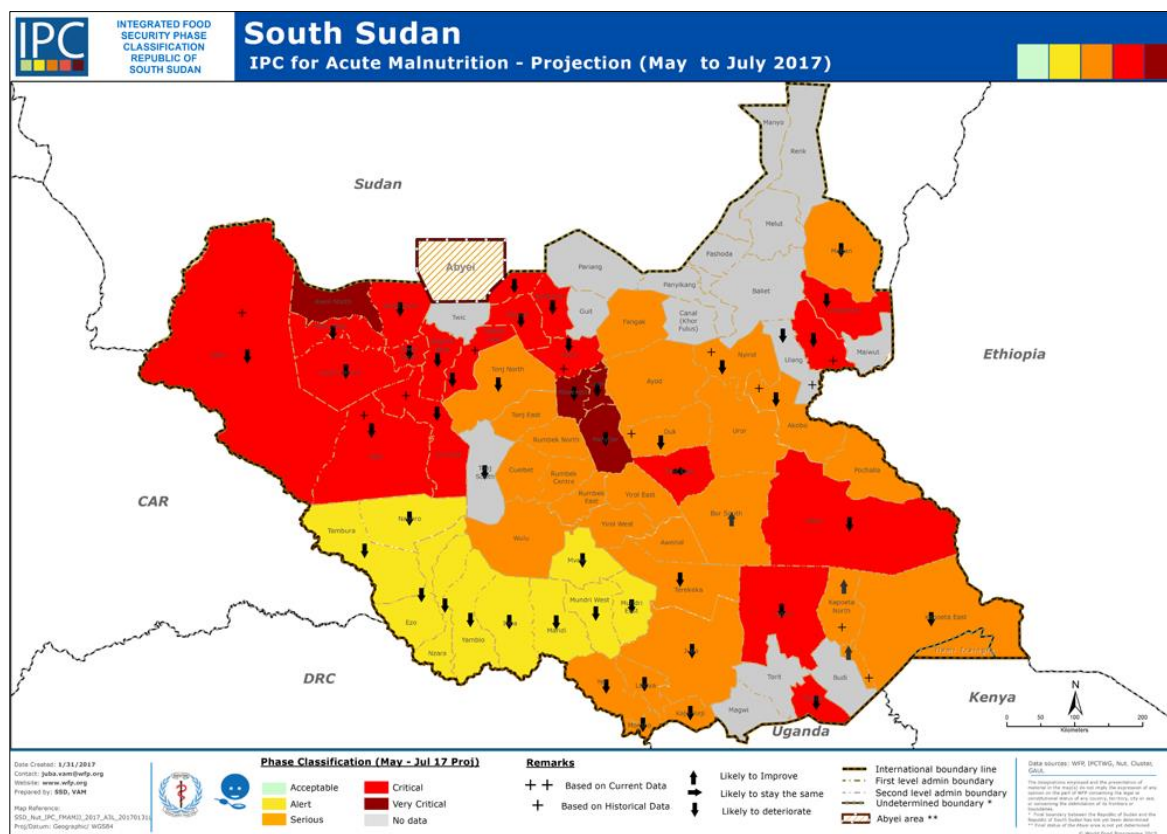
**Disclaimer:** Former state and county boundaries on this map do not imply acceptance or recognition by the Government of South Sudan and/or its partners. They are shown on the map only for humanitarian purposes (Source: NBS). For Leer, Koch, Mayendit, and Panyijar counties, in the absence of full quantitative data sets (food consumption, livelihoods changes, nutrition, and mortality), analyses were complemented with the professional judgment of the Global IPC Emergency Review Committee and SS IPC TWG members.

POPULATION DISTRIBUTION FOR MAY-JULY 2017							
Former States	Mid-2017 Population (NBS)	Phase 1 Minimal	Phase 2 Stressed	Phase 3 Crisis	Phase 4 Emergency	Phase 5 Famine / Humanitarian Catastrophe	% of Crisis, Emergency & Humanitarian Catastrophe
Central Equatoria	1,398,316	435,000	470,000	465,000	30,000	-	35.4%
Eastern Equatoria	1,010,188	300,000	325,000	310,000	75,000	-	38.1%
Jonglei	1,822,086	140,000	485,000	930,000	265,000	-	65.6%
Lakes	1,113,716	200,000	415,000	465,000	145,000	-	54.8%
Northern Bahr el Ghazal	1,418,111	145,000	410,000	465,000	420,000	-	62.4%
Unity	1,124,916	105,000	385,000	430,000	215,000	90,000	65.3%
Upper Nile	1,258,323	395,000	395,000	405,000	95,000	-	39.7%
Warrap	1,448,812	330,000	665,000	255,000	75,000	-	22.8%
Western Bahr el Ghazal	545,565	70,000	190,000	135,000	135,000	-	49.5%
Western Equatoria	705,821	340,000	245,000	120,000	5,000	-	17.7%
<b>Total</b>	<b>11,845,855</b>	<b>2,460,000</b>	<b>3,985,000</b>	<b>3,980,000</b>	<b>1,460,000</b>	<b>90,000</b>	<b>46.7%</b>









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## ENDNOTES

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<sup>a</sup> All classifications of Famine occurrence and risk strictly follow the IPC Famine Guidance Note v1.1, an addendum to the IPC Manual v2.0. For additional information, see <http://www.ipcinfo.org/>. For IPC, Famine exists in areas where, even with the benefit of any delivered humanitarian assistance, at least one in five households has an extreme lack of food and other basic needs. Extreme hunger and destitution is evident. Significant mortality, directly attributable to outright starvation or to the interaction of malnutrition and disease is occurring. Although further deaths can and should be prevented by urgent action, these actions will be, de-facto, a late response as many would have died by this point. By classifying Famine as situations where mass deaths have already taken place due to starvation, the IPC Famine area classification is only applied to a situation that is the outcome of a sequential and causal series of events between severe food deficits, acute malnutrition and the final expression of deaths.

<sup>b</sup> In IPC Phase 5 Humanitarian Catastrophe, households are experiencing Famine conditions, but the full geographic area may not be classified as in Famine if widespread deaths and acute malnutrition have not yet been expressed at the area level. The difference may result from the population facing Catastrophe being smaller than 20% of area population, relatively limited geographical coverage of Famine conditions, or the natural time delay expected between food deprivation and a collapse of livelihoods and the consequent increase in acute malnutrition levels and mortality rates.

<sup>c</sup> As a result of additional IPC protocols for Famine classifications, including Phase 5, Phase 4!, and Elevated Likelihood/Risk of Famine, only one 6-month projection period is used in describing projections involving Famine classifications.

<sup>d</sup> As of November 2016, IPC began utilizing area phase classifications for acute malnutrition – Acceptable (IPC Phase 1), Alert (IPC Phase 2), Serious (IPC Phase 3), Critical (IPC Phase 4), and Extreme Critical (IPC Phase 5) – which correspond to the acute malnutrition thresholds for GAM by WHZ used for area phase classifications of acute food insecurity. Provisional thresholds are given for GAM by MUAC when classifying acute malnutrition phases in IPC. The GAM by WHZ Famine (IPC Phase 5) threshold is  $\geq 30$  percent, while the provisional GAM by MUAC Famine (IPC Phase 5) threshold is  $\geq 17$  percent. IPC Acute Food Insecurity area classifications give preference to GAM by WHZ. For additional information, see <http://www.ipcinfo.org/>.