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Press Conference by

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“Humanitarian challenges in Southern Sudan”

UNMIS HQ, Khartoum

Opening Remarks

Humanitarian Storm: The best way to characterize the humanitarian situation in Southern Sudan is as a “humanitarian perfect storm”. What we mean by this is that we are seeing a convergence of factors in the south that are putting at least 40 percentage of the population at real risk. There are three main factors leading to this situation: 1) spiraling inter-tribal conflict, 2) a massive food gap and 3) the budget crisis.

Factor One: Spiraling Inter-tribal Violence: inter-tribal conflicts are increasing in number and intensity. Since January of this year, more than 2,000 people have died in inter-tribal violence and more than 250,000 people have been displaced across Southern Sudan. There have been four brutal massacres involving hundreds of victims, most of whom have been women and children: in March more than 450 people were killed in Pibor County in Jonglei; in April, more than 250 people were killed in Akobo County; at least 70 people were killed in Torketch in Upper Nile and just last week, more than 180 people were killed in Mareng in Jonglei. In June, a further 100 people were killed outside Nassir in Upper Nile and 735 MT of food destined for 19,000 people in Akobo was lost on barges.

What is most worrying is that one attack leads to another, resulting in a spiral of attack and counter-attack. The fact that these attacks are targeting civilians, mostly women and children, is a very disturbing trend.

In Western Equatoria, which borders the DRC, the Lords Resistance Army (LRA) continues to wreck havoc. Since late July, 181 people have been killed in LRA attacks and the numbers of refugees and displaced are rising steadily. Altogether since late 2008, over 230,000 have been internally displaced as a result of the LRA more than 25,000 people have entered Southern Sudan as refugees. The UN has mounted a major humanitarian operation involving 6 UN agencies and a large number of NGOs, targeting more than 190,000 people in Western and Central Equatoria. In terms of the future, however, the picture does not look very good - violence is continuing in the DRC and CAR, raising the concern of future displacements and increased numbers of refugees.

Factor Two: Food Deficits: The Southern Sudan is faced with a massive food deficit caused by a combination of late rains, high levels of insecurity and displacement, disruptions of trade and high food prices. WFP originally estimated that 1.2 million people in the south would need 96,000 MTs of food aid during 2009. In June, when it became clear that the rains were late, we started to see very worrying conditions in five states—Northern Bahr el-Ghazal, Warrap, Upper Nile, Jonglei and Eastern Equatoria. Most worrying was data which showed that in hard-hit areas like Aweil, severe acute malnutrition rates were twice the emergency threshold. It was because of this that the GoSS decided to reassess the food security situation. This process is now almost done.



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Although the results are still being analysed and will be announced at meeting the GoSS is convening this next Saturday some things are already clear.

The rains necessary for the first harvest have failed—which will extend the hunger gap from June all the way through October, when it normally ends in August. Although it is still too early to tell for sure the rains for the second and main harvest are likely to moderate, if not below average. Of the 96,000 MTs that WFP appealed for for 2009, it has already received 80,000 MTs. It anticipates that it will need 22,000 MT of additional food to respond the food gap. Half of this will be for Jonglei State alone, one of the states hardest-hit by insecurity.

Factor Three: Budget Crisis: Probably no other Government in the region has suffered as much from the global melt-down as Southern Sudan which has lost a staggering 40 percent of the revenues it expected. As a result many of the plans that the GoSS had made with the international partners, the UN agencies and NGOs have had to be shelved. The GoSS has taken on increasingly large parts of the social safety net, these are services that during the war were being provided by agencies. And the plan was that those services get transferred to the GoSS. That was supposed to start happening this year. But with the reduction of 40% in the GoSS budget that is not possible. Let me give you two examples. Let's take the health sector.

The Ministry of Health, for example, had intended to put 7,000 NGO health workers on the national budget. Then the global financial crisis hit and the price of oil plummeted leaving the GoSS with a massive budget gap. The Diocese of Torit, for example, the sole provider of health services in large parts of Eastern Equatoria State, was supposed to hand-over its services to the state Ministry of Health, which didn't have the funds to take this on. The Diocese was facing a close down its operations, but was saved last-minute by a small contribution from the Common Humanitarian Fund allowing them to continue to operate until the end of the year.

Scope: We're dealing with an overwhelming situation in humanitarian terms. Let me just try to put this in perspective: there are currently 27 major operations underway in eight states affecting 190,000 people. We had originally assumed that there might be ten for the whole of the year. Most states have one or two NGOs helping the government manage tens of thousands of IDPs.

As you can imagine, we are facing a number of problems in trying to manage an operation of this size: 1) we don't have the money—originally, partners in Southern Sudan requested **USD 412 million** in the 2009 Work Plan of which **USD 59 million** has been received thus far. (These figures do not include the requirements for WFP food assistance, which are calculated as one emergency project for the whole of Sudan.) In June, we went through an exercise of "drastic prioritization" and re-calculated our minimum requirements until the end of the year. We need **USD 115 million**. We went even further, however, knowing the global reduction in aid and calculated that the absolutely essential bare-bones needed simply to keep people alive in Southern Sudan is **USD 85 million**.

A word on capacity. There are many constraints in Southern Sudan but two of the most difficult are access and capacity. Let me start with access. At present there is probably less than 200 kilometres of paved road in all of Southern Sudan. At the best of times, we have access to only 40 percent of the areas we need to get to. During the rainy season, we lose even this. This remains the case for months. The people in these areas are absolutely cut-off. In terms of capacity, the point is that there isn't enough. The GoSS doesn't have enough—the UN agencies don't and neither do the NGOs. For instance, we need an estimated 10 NGOs per state to



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support the humanitarian operation yet there are on average only two per state working in the most remote areas.

Marginalisation: We need to understand that this situation comes on top of years of marginalization that has put Southern Sudan at the bottom of development indexes. The statistics are absolutely scary. Let me share just a few:

- More than 90% of the population lives on less than a dollar a day;
- 1.2 million people in Southern Sudan are food deficit and will need assistance during this year;
- One out of seven women who become pregnant will probably die of pregnancy related complications;
- There are only 10 certified midwives in all of Southern Sudan;
- 92% of women in Southern Sudan cannot read and write;
- Only 27% of girls are in school and there are 1,000 primary school pupils per teacher;
- 97% of the population has no access to sanitation;
- Polio, once eradicated from Southern Sudan has reemerged;
- Some of the deadliest diseases in the world are prevalent in Southern Sudan, including Cholera, Meningitis, Rift Valley Fever, Ebola, Haemorrhagic Fever and Guinea Worm; Polio has re-emerged.
- And perhaps the two statistics that capture it all: a 15 year old girl has a higher chance of dying in childbirth than of finishing school;
- The maternal mortality rate is the highest in the world and the child immunization rate the lowest.

In fact, I think the best way to look at this is to see the current humanitarian perfect storm as coming on top of a profound structural crisis that will take years for the South to overcome.

I know I have given you a lot of bad news, so let me try and give you some good news:

- Since January the UN Agencies and NGOs have been providing supplementary and therapeutic feeding to 45,000 children, which is about 50% of our target for 2009.
- Nearly 50% of children below the age of five have been vaccinated against measles, Vitamin A and distributed to thousands of households Long-lasting Insect Treated Nets (LLITN).
- There are now 10,000 water points throughout Southern Sudan, giving clean drinking water to thousands of needy people. This year alone, we have managed to set up 300 such water points.
- The Government is doing what it can. The Ministries of Education and Health and Water and providing what services they can despite the budget gap. The Southern Sudan Relief and Rehabilitation Commission (SSRRC) is helping IDPs and responding to emergencies. SSRRC has offices in all ten states, and is the main interlocutor for international partners in responding to the humanitarian crisis.



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What I'd like to do now is summarise my key messages: first, things are really tough in the South. Four years after the signing of the Comprehensive Peace Agreement (CPA), Southern Sudan is facing an almost unmanageable set of problems. Second, a lot of good work is being done, third, despite this, we just can't keep up. The GoSS is making herculean efforts, the NGOs are doing fantastic work, the UN agencies are operating around the clock, but all of us are stretched to the limit—we don't have enough money, we don't have enough staff and because of these constraints we are not moving out of the emergency fast enough. I know that there is a lot of attention to Darfur and this is deserved but the South deserves much more than it is receiving, particularly when the CPA itself is entering its critical stage.