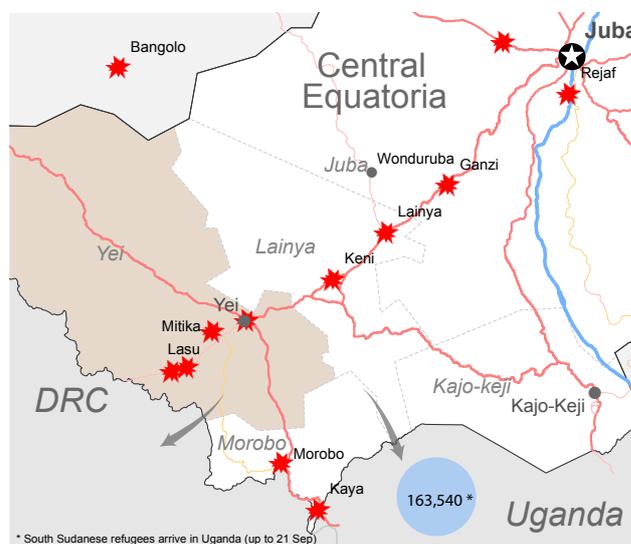


Inter-agency Rapid Needs Assessment Report: Yei, Central Equatoria (6-8 September 2016)



Background

Tensions in Yei began in late 2015 with the arrival of new security forces to the area. Tensions were exacerbated between the local community and security forces following the killing of a Catholic nun and medical doctor who was shot by SPLA forces at a checkpoint on 16 May 2016, and later died from her injuries. Following the July fighting in Juba, Yei Town and areas south of Yei in the Lasu Payam and towards the Yei - Kaya road have seen intense fighting and insecurity. Large numbers of civilians have fled across the border to Uganda and Democratic Republic of Congo, while thousands are reported to remain trapped in areas outside of Yei town where clashes are ongoing. Targeting of civilians -including killings, abductions, sexual violence, forced recruitment and mistreatment by armed groups- has been reported. On 6-8 September, an inter-agency rapid needs assessment and response mission travelled to Yei to assess the humanitarian needs.



Key overview of findings

Yei Town and surrounding areas are facing a protection crisis. Fighting and continued insecurity in Yei has resulted in the displacement of around 60-70 percent of the population. The team noticed the emptying of most neighbourhoods, with locked homes visible in all communities. Only those without the resources for transport or other means to leave town remain. In interviews conducted by the team, civilians reported that neighbours had fled and many cited that the isolation felt them fearful. Protection was the most cited need amongst all those interviewed followed by food and medicines.

Violent attacks - including killings of civilians using machetes (pangas) and guns, abductions, sexual violence, forced recruitment and mistreatment by armed actors - were reported to the assessment team, and civilians expressed fears of 'retaliation attacks' when armed groups were attacked outside of town. It was reported in several interviews that individuals feel that they are in the middle of armed groups both inside and outside of town and fear attacks from all groups. They live in constant fear and are unsure of where the threat will come from.

Access outside of Yei town remains difficult due to the presence of checkpoints and armed actors. Civilians report that villages and crops have been damaged and, in some instances, destroyed. Most people no longer have access to their farms. However, some are still undertaking the risky journey to bring subsistence produce to markets and their families.

The markets in Yei town are functioning, but at a considerably reduced capacity. The price of goods has increased notably due to the combination of supply shortages, depreciation of the South Sudanese Pound, and impact of the economic crisis. Due to highly insecure road routes, trucks have not been travelling on the roads since early July. While the food security situation is not currently at crisis levels, it could rapidly deteriorate if the protection crisis, restrictions on movements and insecurity continue, the situation could deteriorate to a humanitarian emergency.

CRISIS TIMELINE

- Nov 2015 Tension reported around Yei between security forces and local civilians.
- May-June 2016 Shooting and death of a Catholic nun/medical doctor in Yei increased tensions.
- June 2016 On 3 June, a community leader was reportedly shot dead in Yei by unknown armed men.
- July 2016 Following fighting in Juba, clashes broke out in Mitika Payam. A significant proportion of Yei town population fled between 10-12 July to border areas and nearby villages.
- July 2016 Significant deterioration of security along the main roads around Yei, with fighting reported along the Yei-Morobo road in Mugwo Payam, armed clashes in Lasu payam and the vicinity of Kor Bun, and lootings on the Yei-Kaya road.
- August 2016 On 11 August, a UN truck carrying 15 tons of relief food from Juba to Lasu refugee settlement was attacked at Mitika and looted by armed men. Insecurity and road conditions has prevented UNHCR from accessing Lasu camp since then.
- August 2016 On 25 August, an attack by 10 armed individuals on a house in Komuoi village, killed a mother and a 3-year-old child, and left a baby and three men injured. This increased the civilians' fears that they are at risks of attacks.
- Sep 2016 People continue to flee to Uganda and DRC.

Civilians who remained in Yei town were living in their homes and non-food items (NFIs) and shelter items were available in the market. However, many people reported that looting was a concern. The water network remains functional, although at a reduced capacity due to lack of fuel. There are over 180 boreholes in town, which are sufficient to provide water to the reduced population in town. During the assessment, the team was able to visit a few of the schools. Previously, Yei had one of the highest functioning education systems in the country. The schools had just restarted when the team was on ground and it was noted that there was a significant drop in the numbers of students attending. One school visited cited that only 74 students out of its 400-student population were attending classes (19 per cent).

The Yei hospital had not received a resupply of drugs in over four months, due to insecurity on the Juba-Yei road, and was depleted in essential medicines. Daily consultations have greatly decreased to less than 50 per cent of pre-crisis levels due to the exodus of the population. However, the hospital has treated multiple survivors -both military and civilian- of attacks. Health partners were able to resupply the hospital with medicines during the assessment mission.

While the assessment focused on Yei town, reports from authorities and civilians indicate that the humanitarian situation for those that remain outside of town is deteriorating. The roads around Yei town remained too insecure at the time of the assessment to travel to groups outside of town.

Population Movements

The team estimated that only 30-40 per cent of the population of Yei Town remain, leaving an estimated population of between 46,000 - 61,300 individuals (based upon the census data projected population for 2016). Indications suggest that significant movement to Uganda, DRC and Juba began in mid-July, following the events of insecurity that started around Yei town. Throughout the assessment, all people interviewed noted that they wanted to leave town, but did not have the money for transport or were unable to travel for other reasons (e.g. pregnancy). Over 163,000 people have crossed to Uganda since 8 July and the first week in September saw over 4,000 people arriving every day. Nearly, 15,700 refugees have arrived in DRC in August and September.

Shelter arrangements	People are sheltering in their own compounds, with their own shelter
Top three community needs	<ol style="list-style-type: none"> 1 Protection 2 Food 3 Medicines
Est. remaining population	46,000 - 61,300
Pre-event population	<div style="display: flex; align-items: center;"> <div style="text-align: center; margin-right: 20px;"> <p>153,305</p> </div> <div style="margin-right: 20px;"> <p>% female</p> <div style="display: flex; width: 30px; height: 10px; background-color: #ccc; border: 1px solid #000;"> <div style="width: 50%; background-color: #0070c0;"></div> </div> <p>52%</p> </div> <div> <p>% children, Youth, Adult*</p> <div style="display: flex; width: 30px; height: 10px; background-color: #ccc; border: 1px solid #000;"> <div style="width: 45%; background-color: #0070c0;"></div> <div style="width: 35%; background-color: #00a6d1;"></div> <div style="width: 20%; background-color: #0070c0;"></div> </div> <p>45 35 20%</p> </div> </div>

Note: At the time of the assessment, there were no IDPs reported in collective sites apart from 200 IDPs who had previously arrived from Mundri and Maridi sheltering in the old UNMISS compound.

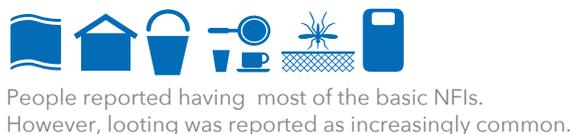
Assessment Data

EMERGENCY SHELTER & NFI

Shelter situation



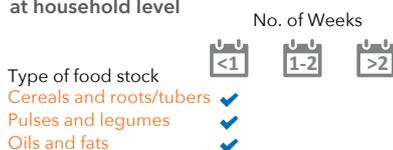
Availability of NFIs



People lack plastic sheeting.

FOOD SECURITY AND LIVELIHOODS

Number of weeks food stocks will last at household level



Livestock available



Main preferred foods

1 Maize / cassava / sweet potatoes	Source Market
2 Beans	Market
3 Oil	Market

Coping strategies at household level

- Rely on less preferred and less expensive food
- Reduce number of meals eaten per day
- Limit portion size at meals / reduce number of meals
- Do not eat the whole day
- Restrict consumption by adults in order for small children to eat

- Within Yei town, there are approximately 200,000 *feddans*, which are accessible and will supply 100mt of food.
- High quantity of food used to flow from the periphery of town, where there are 700,000 *feddans*. These *feddans* have been planted, they have reportedly good harvest and high yield, but access to them is limited due to insecurity and attacks. There are also reports that some of these *feddans* have been burnt/damaged.



Functionality of health facilities

	EPC PHCC	Yei Civil Hospital	Martha Clinic (ECS)	ST Bakita
Type of health facility	PHCC, PHCU Cold chain functioning	Hospital Cold chain not functioning	PHCC Cold chain functioning	PHCC Cold chain functioning
Health facility staff	6 (3 nurses, 1 vaccinator, 1 medical doc, 1 medical ass. and 1 staff trained on clinical rape management)	57 (<30 nurses, 1 medical doc, 5 medical ass., 2 vaccinators, < 9 midwives, 5 lab tec., 1 staff trained on clinical rape management and 1 surgical capacity)	5 (1 nurse, 2 medical ass., 1 midwives, 1 lab tec.,)	5 (8 nurses, 1 medical ass., 2 vaccinators, 3 midwives, 2 lab tec., 2 lab tec., 2 staff trained on clinical rape management and 1 surgical capacity)
Availability of medicines	PEP kits, anti-retroviral, contraception, anti-rabies anti TBC, Blood Product and Plasma substitute, Oxytocic and anti-oxytocic anti-D	PEP kits, anti-retroviral, contraception, anti-rabies, Psychiatric medications, Blood Product and Plasma substitute, Dermatological medications, Anti-allergy, Anti-convulsant, Oxytocic and anti-oxytocic anti-D	Anti-retroviral, anti-rabies, anti TBC, Psychiatric medications, Blood Product and Plasma substitute, Oxytocic and anti-oxytocic anti-D	PEP kits, contraception, anti TBC, Blood Product and Plasma substitute

Legend:

Available medicine

Unavailable medicine

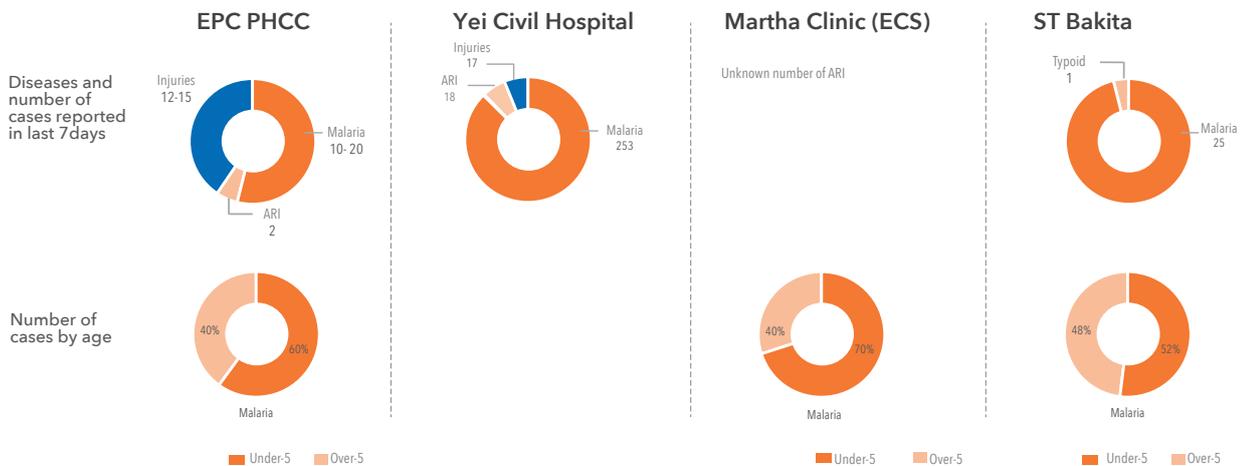
Legend:

Facility functional

Facility not functional

Main health concerns

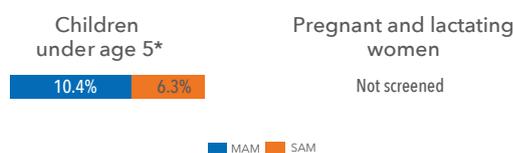
Top 3 main health concerns: **1** Malaria **2** ARI **3** Injuries



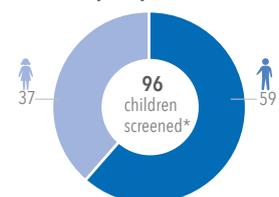
Existing nutrition capacity

- 1 Management of SAM: OTP programme implemented in Morobo, Lainya, Lasu and Otoy.
- 2 Management of MAM: Not available.
- 3 Micronutrient supplementation: Not available.
- 4 Other nutrition programs: Implemented in Martha PHCC

Malnutrition rates (Preliminary proxy MUAC screening)



Total people screened



Legend:

- Girls 0-59 months
- Boys 0-59 months

*Children screened where those admitted at the hospital because of other reasons, and the proxy GAM is therefore likely to be artificially elevated by the nature of the sample.



PROTECTION

- Reports of abductions, sexual violence, forced recruitment and mistreatment by armed groups.
- Restricted freedom of movement.
- Women, children and men reported fear of revenge attacks at night and prevalence of gunshots at night. Panga attacks were reported.
- Destruction of villages and crops by armed groups, particularly outside town, was reported.
- People reported a general break-down in the rule of law and a sense of being trapped and vulnerable between multitude armed actors.
- Some reports were received of the presence of separated children. The majority of the respondents reported that families that moved to Uganda brought their children with them. The schools reported that children were collecting paperwork that would allow them to enrol in Uganda, indicating that children are not being left behind.



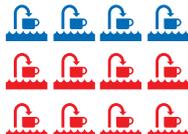
WASH

Functional sources of water

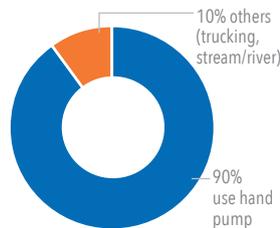
Hand pump  **approx 180 within town**

Hand-dug well 

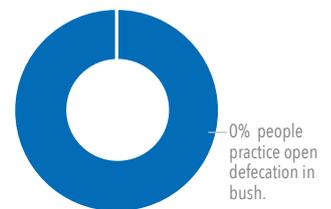
Stream / river  Used for cleaning clothes and utensils.

Piped water systems 
4 out of 12 kiosks are operational

Water sources used by the population



Percentage of people that practice open defecation



ACCESS TO INFORMATION



- Availability of radio handsets.
- Radio stations received: Miraya FM (Spirit 99.5 FM went off air due to lack of fuel)



- Access to mobile phones
- Network: MTN, Vivacell (only working when there is power)



- Trusted sources of information: immediate family

- People mainly communicate through mobile network to understand the general situation outside of Yei. Most individuals interviewed felt that with no phone network they did not have the information that they needed to make important decisions.

For the full dataset of the Yei IRNA, please visit:
<http://bit.ly/2d2LDcC>

Participant organizations

AAH-International	Plan International
Medair	UNHCR
Nonviolent Peaceforce	UNICEF
OCHA	WFP
PAH	



An IRNA team member during the assessment in Yei. Photo: OCHA