



SOCIOECONOMIC ASSESSMENT

of the Impacts and Implications
of COVID-19 in **South Sudan**



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ANALYSIS FOR ECONOMIC DECISIONS

United Nations Development Programme

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Acknowledgments

The Covid-19 pandemic has been noted as having far reaching impacts on societies and economies beyond being a health crisis. As a result, UNDP is working in countries to assess the socioeconomic impact of Covid-19. This includes assessing the impact of the pandemic on the achievement of the SDGs. These assessments are being carried out to ensure government responses to the pandemic are informed by current analysis and data and that responses are tailored to the impact of the pandemic in the country. With a view to analyzing the impact of the pandemic on achievements of the SDGs, the assessments ensure that response actions are developed and implemented with a long term vision. The Covid-19 socio-economic assessments support UNDP's technical lead role for the socio-economic response to the pandemic complementing the health and humanitarian responses.

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Acronyms and abbreviations

AfDB	African Development Bank	OHCHR	Office of the High Commissioner for Human Rights
CSO	Civil Society Organisation	PFM	Public Financial Management
DG DEVCO	Directorate-General for International Cooperation and Development (European Commission)	R-TGoNU	Revitalized Transitional Government of National Unity
ECHO	European Civil Protection and Humanitarian Aid Operations (European Commission)	SGBV	Sexual and Gender-Based Violence
EIU	Economist Intelligence Unit	SPLM-IO	Sudan People's Liberation Movement-in-Opposition
FDI	Foreign Direct Investment	SSD	South Sudan
FEWS	Famine Early Warning Systems	SSOA	South Sudan Opposition Alliance
GBV	Gender-Based Violence	SSPDF	Sudan People's Liberation Army (SPLA), subsequently known as South Sudan People's Defence Forces
GDP	Gross Domestic Product	TGoNU	Transitional Government of National Unity
GIEWS	Global Information and Early Warning System	UNCTAD	United Nations Conference on Trade and Development
IDA	International Development Association	UNDP	United Nations Development Programme
IDP	Internally Displaced Persons	UNHCR	United Nations High Commissioner for Refugees
IEA	International Energy Agency	UNICEF	United Nations International Children's Emergency Fund
IGAD	Intergovernmental Authority on Development	UNMISS	United Nations Mission in South Sudan
IMF	International Monetary Fund	V-Dem	Varieties of Democracy
IOM	International Organization for Migration	WEF	Water-Energy-Food (Nexus)
IPV	Intimate Partner Violence	WFP	World Food Programme
JICA	Japan International Cooperation Agency		
NAS	National Salvation Front		
NGO	Non-Governmental Organisation		
OCHA	Office for the Coordination of Humanitarian Affairs		



1

Introduction

How COVID-19 may dramatically affect South Sudan even without infecting many

The world's youngest nation became independent from Sudan in 2011. It bears the scars of 42 years of civil war (1955-1972 and 1983-2005 were particularly traumatic), driven by deep-rooted grievances and a lack of trust. This led to one, if not two, lost generations with a future stolen from them. Patterns of authoritarian, violent and extractive governance characterised the pre-colonial, colonial and post-colonial (from 1956) periods, with political power highly concentrated at national level. The nation came together around the 2011 referendum on independence and it enjoyed strong international support between 2011 and 2013. But pre-independence patterns were hard to break. The failure to agree on a system for sharing power and resources (notably oil, which represents 90% of government revenues, and forests) is manifest in the deadly civil war that started in 2013, just two years after independence, and was still raging (at lower levels than in 2014, 2016 and 2017, thanks to ceasefire agreements) as COVID-19 hit¹.

COVID-19 hit the world when South Sudan was at a crossroads, attempting to negotiate a triple transition: from conflict to peace and stability; from humanitarian emergencies and humanitarian aid to development cooperation and recovery; and recently (22 February 2020) from Transitional Government of National Unity (TGoNU) to Revitalized Transitional Government of National Unity (R-TGoNU).

At the time of writing (3 July 2020), South Sudan has slightly over 2 000 confirmed cases of COVID-19. This may seem to be of limited significance against the background of 45 years of war which has caused 1.9 to 3.4 million casualties since 1955, including 6 years of civil war (of its 8 years as an independent country which alone led to 400 000 casualties and 1.9 million displaced persons. Conflict aside, COVID cases may also seem limited against the backdrop of the country's persistent humanitarian crisis (half the population, or 6 million people, are in acute food insecurity; famine was declared in parts of the country in 2017). **But while COVID-19 may cause few or many direct**

casualties, the global crisis it is creating is bound to cause many indirect ones because it risks derailing the peace process and tipping a humanitarian situation already on the brink. Indeed, South Sudan ranks third among countries worldwide as most vulnerable to the impacts of COVID² and at risk of famine³.

Prior to COVID and the R-TGoNU there were signs of South Sudan donor fatigue, but there is now a conjunction of opportunities ("a major step" in the peace process;⁴ the adoption of early measures to contain the pandemic; and the fact that systems are already in place for emergency responses). There is also an urgent need to avoid the country falling off the brink and **starting a new cycle of despair, poverty and violence**. Within a context of health, hunger, humanitarian and security challenges there are three alternative scenarios, based on two major variables: the quality of the South Sudanese leadership's response, and the quality of the international community's response (Annex 1):

- **Damage is controlled:** An effective humanitarian response that leads to control of COVID's direct and indirect effects.
- **A wake-up call:** A COVID response that takes into account pre-existing, entrenched challenges, builds on the early 2020 peace momentum and leads to a breakthrough in peace and stability.
- **A perfect storm:** of health, hunger, humanitarian and security crises leading to violence and hunger spiraling out of control.

In this context, this paper assesses both the direct and indirect effects of the pandemic and, weaving together the forementioned triple transitions, identifies implications for the donor community, including the UN System. First it looks at macroeconomic and fiscal prospects, noting a dearth of options in the absence of sustained structural changes (Section 2); then at the effects of COVID-19 on human development (Section 3); then at the virus' interplay with peacebuilding and state-building dynamics (Section 4); and lastly, assessments of possible ways forward are discussed (section 5).

¹ 400 000 casualties or 3% of the total population. International Crisis Group (2020), "A Major Step Toward Ending South Sudan's Civil War", Statement, 25 February, www.crisisgroup.org/africa/horn-africa/south-sudan/major-step-toward-ending-south-sudans-civil-war.

² Christian Aid (2020), *Tipping Point: How the COVID-19 pandemic threatens to push the world's poorest to the brink of survival*, May, www.christianaid.org.uk/sites/default/files/2020-05/tipping-point-COVID-19-report-May2020.pdf.

³ Anthem, Paul (2020), "Risk of hunger pandemic as coronavirus set to almost double acute hunger by end of 2020", Insight, World Food Programme, 16 April, <https://insight.wfp.org/COVID-19-will-almost-double-people-in-acute-hunger-by-end-of-2020-59df0c4a8072>.

⁴ Crisis Group, *A Major Step Toward Ending South Sudan's Civil War*, Statement, 25 February 2020, www.crisisgroup.org/africa/horn-africa/south-sudan/major-step-toward-ending-south-sudans-civil-war.

Epidemiological statistics (as of the 3rd of September 2020):

1. Number of confirmed cases: 2532
2. Number of recovered cases: 1290
3. Number of deaths: 47

Timeline of mitigation measures and key events:

20 March: schools and universities suspend classes, public events and gatherings are suspended for 6 weeks.

29 March: transportation is restricted as boda bodas (motorbikes) are banned from circulating and buses are only allowed to operate at half capacity. Businesses are ordered to cease operations except in the case of essential commodities such as food, medicine and fuel.

5 April: first case of coronavirus is detected in a UN worker who travelled from the Netherlands in February.

25 March: night-time curfew from 8 pm to 6 am is imposed.

March

April

24 March: closure of Juba's international airport to international passenger flights. Closing of border crossings except for cargo.

27 March: Northern Upper Nile region is placed in lockdown for 14 days following the escape from quarantine of 500 people in Sudan.

14 April: domestic air and land transportation is suspended.

Public health measures taken to improve the response capacity:

- The Dr. John Garang Infectious Diseases Unit in Juba is expanded from 24 to 82 beds.
- As of early May, 60 ventilators are ordered in addition to the existing 4.
- There is 1 functional PCR machine according to citizen accounts. 500 tests are conducted per week; currently there is a backlog of close to 6 000 tests.
- Current prevention, testing and treatment capacity are centralised in urban centers.

18-19 May: high-level officials including 3 out of 5 vice-presidents test positive for the virus. All members of the High-Level Task Force (HLTF) test positive. The HLTF is dissolved on 16 May over criticism of its handling of the pandemic and a new 13-member HLTF is created.

8-12 May: restrictions start being lifted despite rising number of cases; air transport resumes on 12 May.

27 May: appointment of the new transitional sub-committee to review the activities of the previous high-level task force/

3 June: COVID-19 negativity certificates are suspended until further notice

16 June: the addendum of the humanitarian response plan requests an additional US\$390 million

May

June

13 May: two confirmed cases are detected in the UN protection of civilians (PoC) site in Juba.

14 May: first COVID-19 reported death.

26 May: the National COVID-19 Task Force suspends some laboratory testing for people seeking voluntary testing to clear the backlog of samples.

27 June: MoH installed testing equipment and capacities in Eastern Equatoria (Nimule town) at the Ugandan border with the intention of facilitating testing of transport personnel and ease the movement of goods and services



2.

What prospects for
macroeconomic and
fiscal aspects

Few options in the absence of sustained structural changes

2.1. Overview

The International Monetary Fund (IMF) projections for global economic growth stood at 4.9% earlier this year due to signs of economic stabilisation and a return to growth in 2019 (3.2%), succeeding a 3.5% contraction in 2018.⁵ These results were due in part to the introduction of key public financial management (PFM) reforms such as the abolishment of fuel subsidies and the liberalisation of the fuel market.⁶ Nonetheless, **the socioeconomic impact of COVID-19 and the decline of global oil prices and trade have already impacted the already fragile economy of South Sudan and are likely to weaken it further.**

The decline in oil prices from US\$55 to an average of \$30 a barrel per day (Figure 1) during the March to July period is a major threat to public finances as around 90% of government revenue comes from oil exports which in turn account for 95% of total exports.⁷ This drop in prices is driven by the largest fall in global oil demand since 1960 (Figure 1), largely caused by the slowdown in global mobility, trade, demand and economic activity resulting from the pandemic and its related measures. More specific to South Sudan, China's oil imports also declined significantly during the period when it was badly affected by COVID-19 and the International Energy Agency (IEA) has estimated that this decline will continue in the second half of the year.⁸ China is the main importer of South Sudanese oil, accounting for over 90% of production

just prior to the pandemic. The second largest importer is India; so far this year its oil imports have declined by 26% year-over-year and it is set to have the lowest import level in 8 years.⁹ South Sudan's oil exports have therefore been severely affected in recent months due to this decline in addition to lower oil prices. Global prices have risen somewhat since June, yet they remain below \$55 a barrel (an average of around \$40 as of August). Even assuming that the budgeted 175 000 barrels per day were sold, rough estimates show that the gap in gross oil revenues between January and June (discounting 28 000 barrels owed to Sudan) represent a loss of over \$600 million (these daily gaps can be seen in Figure 1).¹⁰

South Sudan's economy depends on oil despite the fact that the country is well endowed in natural resources such as gold, sesame, gum arabic and fertile agricultural land.¹¹ The government had planned to reduce the budget's oil dependency for the FY 2019/20 to around 84% of government revenue¹² but South Sudan still owes oil debt obligations to Sudan, arrears on oil contracts and provides oil subsidies to Nilepet, which collectively absorb some 65% of government revenues.¹³ Moreover, non-oil revenues also declined by around 8-10% earlier this year; it is therefore difficult to predict how realistic the reduction of oil dependence will be for government revenues.¹⁴ Public expenditures will likely continue to depend on oil revenue receipts, and this poses fiscal difficulties given the global trends in oil prices.

⁵ IMF (2019), *South Sudan: 2019 Article IV Consultation-Press Release; Staff Report; and Statement by the Executive Director for the Republic of South Sudan*, IMF Country Report No. 19/153, June, www.imf.org/en/Publications/CR/Issues/2019/06/04/South-Sudan-2019-Article-IV-Consultation-Press-Release-Staff-Report-and-Statement-by-the-46965.

⁶ Ibid.

⁷ Mawejje, Joseph and Finn, Arden (2020), *South Sudan Economic Update: Poverty and Vulnerability in a Fragile Environment*, World Bank Group, February, <https://documents.worldbank.org/en/publication/documents-reports/documentdetail/893571583937198098/south-sudan-economic-update-poverty-and-vulnerability-in-a-fragile-environment>; FEWS NET (2020), "Poor macroeconomic conditions and COVID-19 to escalate Emergency (IPC Phase 4) outcomes by mid-2020", April, <https://fews.net/es/east-africa/south-sudan/food-security-outlook-update/may-2020>.

⁸ Xu, Mayu, Kelly, Stephanie and Obayashi, Yuka (2020), "China drives global oil demand recovery out of coronavirus collapse", Reuters, 3 June, www.reuters.com/article/us-global-oil-demand-analysis/china-drives-global-oil-demand-recovery-out-of-coronavirus-collapse-idUSKBN23A0XF

⁹ Financial Express (2020), "COVID effect: Crude oil import to fall 8.9% in FY21", 21 May, www.financialexpress.com/market/COVID-effect-crude-oil-import-to-fall-8-9-in-fy21/1965465/; NDTV Profit (2020), "India's oil imports in May sink to lowest in over 8 years: Report", 24 June, www.ndtv.com/business/coronavirus-COVID-19-impact-on-oil-market-india-oil-imports-in-may-sink-to-lowest-in-8-years-2251254.

¹⁰ Rough estimates were made, multiplying 147 000 barrels per day (budgeted 175 000 minus 28 000 barrels whose revenues go to Sudan) with the daily oil prices (from eia.gov); this sum was compared to the originally budgeted \$55 per barrel multiplied by 147 000.

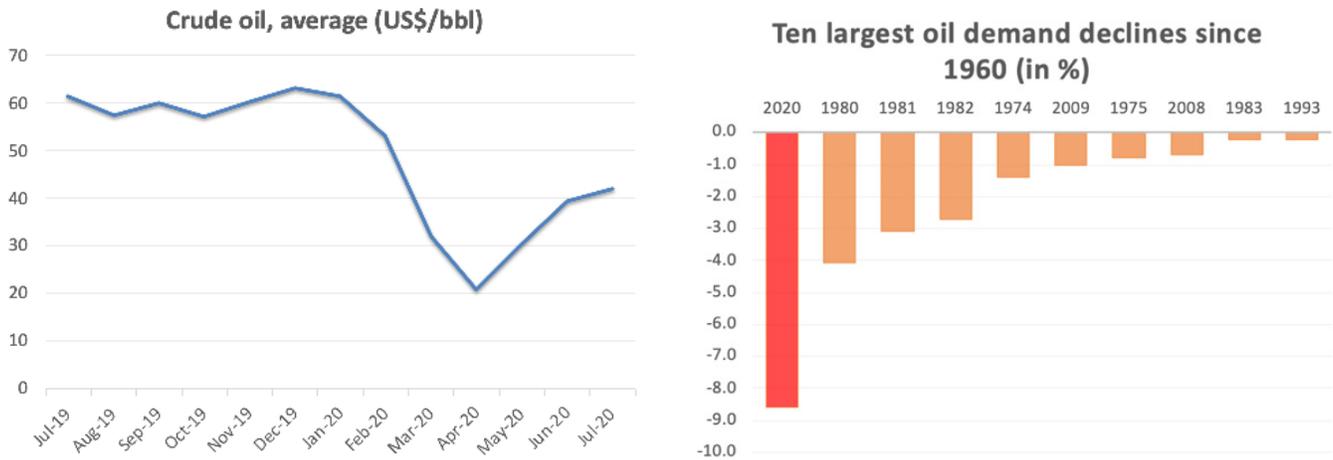
¹¹ AfDB (2019), *Republic of South Sudan. Update of the Extended Interim Country Strategy Paper (CSP) 2012-2018 to December 2021 and 2018 Country Portfolio Performance Review*, East Africa Regional Development and Business Delivery Office (RDGE), April.

¹² Ministry of Financing and Planning and UNICEF (2019), *South Sudan Citizens Enacted Budget 2019/20*, December, www.unicef.org/southsudan/reports/citizens-enacted-budget-2019-2020.

¹³ Mawejje, Joseph and Finn, Arden (2020), *South Sudan Economic Update: Poverty and Vulnerability in a Fragile Environment*, World Bank Group, February 2019.

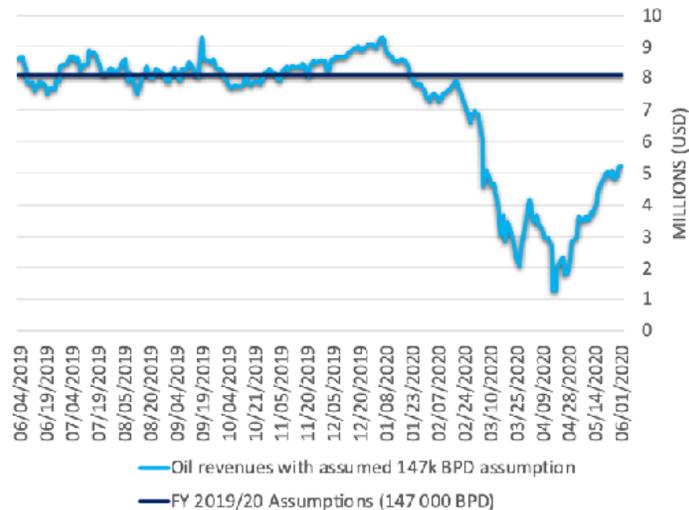
¹⁴ The government has planned to increase its tax revenue mobilisation and diversify its economy to harness the potential of other key sectors such as agriculture, other non-oil natural resources and services.

Figure 1. Oil price and demand fluctuations



Sources: World Bank Commodity Prices database; World Bank World Economic Prospects, 2020; draft Environmental Impact Assessment (EIA) 2020. Data for 2020 are IEA estimates.

Figure 2. Daily gap between budgeted gross oil revenues and estimated oil revenues given actual prices



Source: Approved budget tables FY 2019/20, Ministry of Finance and Planning; EIA.

The substantial expected reductions in household incomes resulting from the COVID-19 shocks – see below – will further reduce tax revenue, which is already extremely low. Revenue was estimated at 3.7% of GDP in 2018 (and is projected to account for 4.1% of GDP in 2019/20)¹⁵ which is far below the 12.75% GDP tipping point which allows for a meaningful contribution to economic growth.¹⁶ According to the London School of Economics’

Conflict Research Programme, little is understood about the country’s complex tax system¹⁷ which poses challenges in raising revenues. The government is seeking to reform the tax system by increasing personal income tax by 5% and taxing business profits at a rate of 22%.¹⁸ Yet this is unlikely to generate sufficient revenues to cover the costs currently faced by the country.

¹⁵ MF (2019), op. cit.

¹⁶ Gaspar, Vitor et al., “Tax Capacity and Growth: Is there a Tipping point?”, IMF Working Paper No. 16/234, 2016, www.imf.org/external/pubs/ft/wp/2016/wp16234.pdf

¹⁷ Benson, Matthew (2020), “Who is this Government Really?: South Sudanese Perspectives on Taxes and Public Authority”, *London School of Economics*, May, <https://blogs.lse.ac.uk/crp/2020/05/14/south-sudanese-perspectives-on-taxes-and-public-authority/>.

¹⁸ AfDB (2020), *African Economic Outlook 2020: Developing Africa’s Workforce for the Future*, African Development Bank.

This means that the fiscal space needed for investment in the response to the health and socioeconomic shocks from COVID-19 and the long-term economic development of the country is severely limited. **In February, the World Bank had estimated a financing gap of \$496 million for the FY 2019/2020 whilst other sources have predicted different gaps ranging from \$174 million to \$267 million for the coming months.**¹⁹

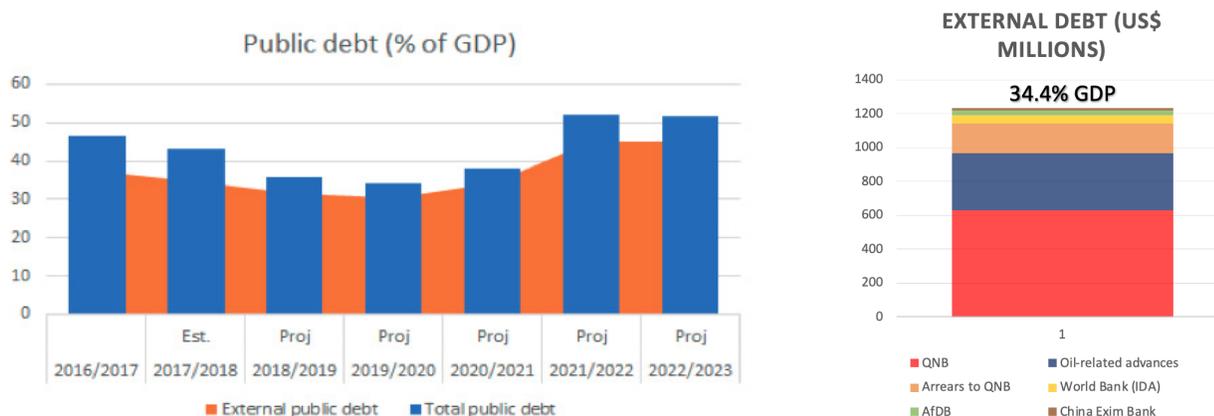
2.2. Limited fiscal space and weak public financial management

Not only does South Sudan have limited fiscal capacities but the country is also in high risk of debt distress, according to the Debt Sustainability Analysis (DSA) of 2020.²⁰ Most of this is external debt, amounting to 34.4% of GDP in 2019

This ambition was reflected in IMF projections made in 2019 (Figure 2). However, with a high risk of debt distress, South Sudan may find it difficult have favourable credit terms as creditors may be increasingly risk averse in the context of global economic uncertainty. This poses further constraints on the government’s capacity to widen its fiscal space for much-needed spending to address the pressing issues the country faces.

It is clear that the government does not have many financing options. The IMF suggested that only austerity and increased efforts towards domestic revenue mobilisation were the most workable options. However, the tax revenue base is minimal and the current health, socioeconomic and food security shocks have generated investment demands which require spending, not austerity. In addition, the economy needs to be diversified and

Figure 3. South Sudanese debt projections and disaggregation.



Source: IMF (2019), Republic of South Sudan, Article IV Consultation; IMF Country Report No. 19/153.

compared to a domestic debt of 7% of GDP. Nevertheless, recent discussions with the IMF indicate that the debt situation may ease if certain measures are implemented.²¹ **Given the limited fiscal space, the government may have to rely on external financing** to fund measures to tackle the health and socioeconomic impacts of COVID-19. The government indicated in its FY-2019/2020 budget planning that external financing plus greater oil revenues are the primary means by which it will seek to fill the financing gap.

domestic revenue mobilisation to be broadened over the medium and long term. In May, the government committed \$4 million to purchase a range of commodities such as gold and gum arabic in an attempt to diversify the economy. Nonetheless, this modest investment and the amount of time needed for the materialisation of potential returns mean that such efforts are unlikely to raise the vast sums required to address the country’s pressing needs. **These have to be financed through more immediate channels**

¹⁹ University of Juba (2020), *COVID-19 as a development challenge: An overview of the impacts, options and policy recommendations for South Sudan (draft)*, April.

²⁰ IDA and IMF (2020), *Republic of South Sudan: Joint Bank-Fund Debt Sustainability Analysis - Update 2019*, March, <http://documents1.worldbank.org/curated/en/778011561648036805/pdf/South-Sudan-Joint-Bank-Fund-Debt-Sustainability-Analysis-2019-Update.pdf> ; IMF (2020), Republic of South Sudan: Request for disbursement under the Rapid Credit Facility - Press Release; Staff report; Statement by the Executive Director for the Republic of South Sudan, November, <https://www.imf.org/en/Publications/CR/Issues/2020/11/16/Republic-of-South-Sudan-Request-for-Disbursement-Under-the-Rapid-Credit-Facility-Press-49895>

²¹ Ibid; Ministry of Financing and Planning and UNICEF, 2019.

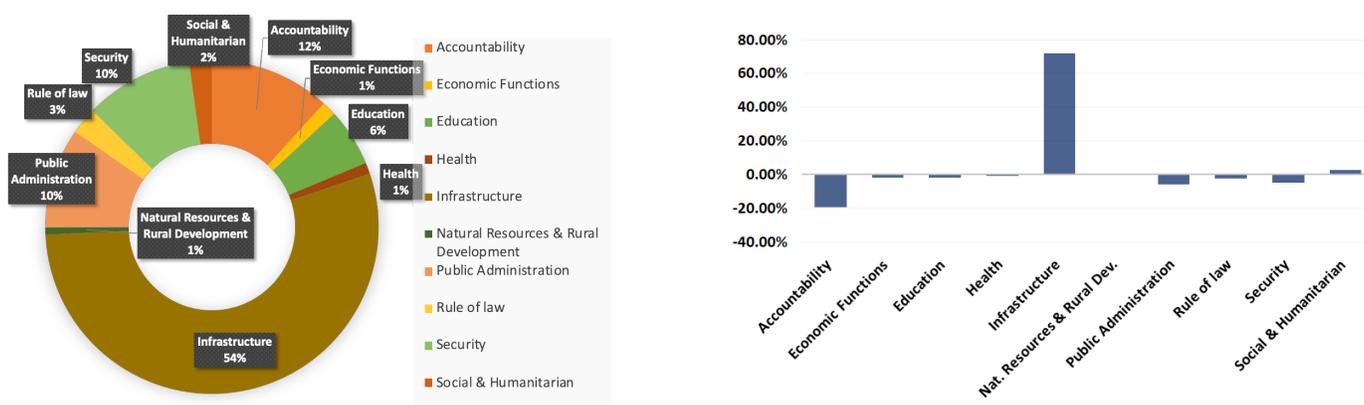
which can only realistically come from external financing and aid at this point in time. The global discourse on debt service suspension, and offering grants rather than loans, may offer an opportunity for South Sudan to take on external debt to finance its needs.

There may also be options to redirect finances from certain sectors in the approved FY 2019/20 budget. The Ministry of Finance and Planning had intended to increase expenditure on infrastructure projects by up to 72% from the previous year. This would have constituted 54% of the budget, while the sectors of health, social welfare/humanitarian action and education combined make up only 9%. Furthermore, allocations to these sectors except for the social sector, where there was a marginal increase

spending needed to alleviate the current needs of the population. 2019 was marked by discrepancies in budget execution with initial allocations: there was underspending in social sectors and overspending in security and off-budget expenditures.²³ Fiscal discipline must be observed to ensure that spending is directed at the immediate and pressing needs facing the country.

Overall, **South Sudan's public financial management needs to be made more transparent through improved disclosure.** The government provides little information with regards to their planned sources of financing, debt obligations and budget execution, which is conducive to corruption and financial mismanagement. Accountability is also lacking with regards to off-budget accounts and

Figure 4. FY 2019/20 South Sudanese budget: allocations to different sectors and change in allocations from previous budget.



Source: Approved budget tables FY 2019/20, Ministry of Finance and Planning.

- have actually decreased. This means that there is some leeway to prioritise these sectors, especially health and social welfare, by diverting resources from the infrastructure and security sectors. The government was planning to allocate 95.7% of infrastructure spending to the Ministry of Roads and Bridges. On the assumption that the \$1.3 billion FY-2019/20 budget is still relevant, this allocation amounts to just over \$707 million. The national COVID-19 response plan requires \$150 million.²² Even a 25% diversion of these funds could finance this national plan which would cover health, water, sanitation, hygiene and refugee responses.

Problems are compounded by fiscal discipline in the public sector which also threatens key socioeconomic

the means by which different ministries are spending money.²⁴ This makes it extremely hard to determine the true extent of budgeting gaps facing the government.

Transparency in domestic revenue mobilisation and public expenditure had improved in recent years. A National Revenue Authority (NRA) was created and headed by a commissioner general who assumed office in March 2018. This body helped to ensure a more systemic and transparent collection of revenues - an essential element to strengthen the social contract - through a single account, a first in South Sudan's short history. Progress in domestic revenue mobilisation was also noticeable beyond Juba, at state level: revenues collected at this level were used,

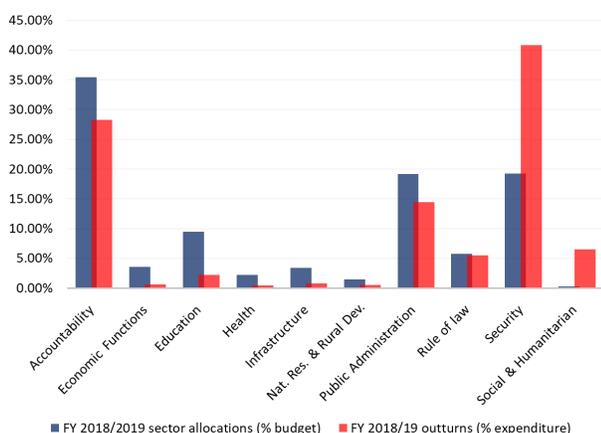
²² OCHA (2020), "South Sudan Covid-19 Addendum-at-a-glance infographic", 16 June, www.humanitarianresponse.info/files/documents/files/south_sudan_covid19_addendum_infographic.pdf

²³ Ibid

²⁴ Ibid; Kukutschka, R. Martinez B. (2017), "Sudan: Overview of corruption and anti-corruption", U4 Anti-Corruption Resource Center, Transparency International, <https://knowledgehub.transparency.org/helpdesk/sudan-overview-of-corruption-and-anti-corruption>.

for example, for bridge and hospital projects in Torit and Jonglei. There is no agreement across the government on the official amounts mobilised from non-oil revenues, but one source mentions that they soared from \$4 million to \$36 million between January and June 2019.²⁵ However, the Commissioner General and the board of the NRA were dismissed in August 2019, a gesture interpreted as a lack of political will to advance efforts in this area.

Figure 5. Sectoral budget outturns in FY 2018/19 budget.



Source: Approved budget tables FY 2019/20, Ministry of Finance and Planning.

2.3. Key short-term COVID-19 economic impacts

Inflation has picked up once again, currently at 80%, which threatens to erode the purchasing power of citizens who have already suffered a 70% decline in purchasing power since independence in 2011 due to persistent hyperinflation. This can be partially explained by cost-push inflation factors. Recently, trade has been impacted by border measures taken in response to COVID-19 and this has contributed to the rise in prices of essential commodity goods. South Sudan is a net importer of goods from Uganda, which include staple commodities used to supply local markets on which households depend. Out of \$371.59 million worth of trade between the two countries, 98% of it corresponds

to imports into South Sudan.²⁶ In March and April, the Ugandan government established screenings at its borders which hampered import flows into South Sudan. This increased transport and supply-related costs, thus pushing up prices of essential commodities like maize and sorghum (Figure 15).²⁷ Moreover, the South Sudanese pound has continued to depreciate, triggering additional inflationary pressures. It is however difficult to see how such a rise in inflation could be due to cost-push

Figure 6. Consumer price index (inflation).



Source: South Sudan Bureau of Statistics

factors alone. With inflation climbing and the economy collapsing, presumably money supply factors have a contributing role. The government must ensure that it does not repeat the same mistakes of the 2016-17 period when the unfettered increase in the money supply led to hyperinflation.

Many sectors of the economy are also heavily impacted by the movement restriction measures taken in response to COVID-19. This is threatening employment, incomes and livelihoods. The aviation industry is operating at 70-80% capacity with some operators having lost 100% of their business.²⁸ The transport sector has also suffered as it is only allowed to operate at 50% capacity.²⁹ As a result, transport costs have more than doubled³⁰ and people's movements have been limited to places of business and markets, as many depend on them, reducing incomes

²⁵ AfDB (2020), *African Economic Outlook 2020: Developing Africa's Workforce for the Future*, African Development Bank.

²⁶ Bank of Uganda, taken from: Mawejje, Joseph and Finn, Arden (2020) op. cit.; Ibid.

²⁷ FAO GIEWS (2020), "Country Briefs: South Sudan", Global Information and Early Warning System, FAO, 23 April, www.fao.org/giews/country-brief/country.jsp?code=SSD.

²⁸ University of Juba, *COVID-19 as a Development Challenge: An Overview of the Impacts, Options and Policy Recommendations for South Sudan*, manuscript dated April 2020.

²⁹ Ibid.

³⁰ University of Juba, 2020, op. cit.

and also decreasing demand for transport. Boda boda drivers are particularly hard hit, as are informal economy workers (estimated to make up 87% of the population).³¹ Many of the latter are women and they rely on day-to-day mobility and contact to conduct their businesses. Small and medium-size enterprises have also been operating at 70-100% below capacity, with many employees being laid off or furloughed due to restriction measures. Banks have also suffered due to the limits on their operating hours and a reduction in the demand for credit. There have been large withdrawals of deposits; meanwhile, banks have needed to keep paying their employees who have been furloughed. These are increasing the risks of liquidity constraints for financial institutions in the country which are already heavily undercapitalised.³²

The impact of lockdown measures and social distancing are all the more severe for countries with limited capacities for home working, such as South Sudan. Its service sectors are resorting to home working in order to continue business activities but with limited electricity, broadband and telecommunication infrastructures, such working arrangements are difficult to envisage. This is especially true for the large informal economy and related sectors for which home working is simply not possible. Given these factors, **the service sector is expected to decline by 12.8% in 2020 and 39% in 2021.**³³

The agricultural sector will also very likely be affected with a projected contraction of 3.8% in 2020,³⁴ due to the movement restrictions that have been imposed in response to COVID-19 as well as reduced markets and aggregate demand. Natural disasters such as locusts and floods are also expected to undermine the agricultural sector.

Foreign direct investment (FDI), which is crucial if the country's economy is to be weaned away from oil dependence, is expected to decline due to the pandemic and the global economic slowdown it triggered. It was reported that in 2019, 400 investors from various countries looked to invest \$1 billion in the country's oil, mineral and agricultural sectors.³⁵ However, according to the OECD

and UNCTAD, the onset of COVID-19 is expected to reduce FDI in Africa by as much as 30-40%.³⁶ This decline will hamper South Sudan's efforts to diversify and develop its untapped sectors with significant growth potential.

Ironically, forecasts made in 2019 and early 2020 were optimistic; it was thought that economic growth rates would reach close to 8%. These projections were largely based on forecasts of strong oil revenue growth. However, in light of the generalised economic slowdown described above, various international organisations have regularly **revised growth estimates and downgraded them as the pandemic persists**, reflecting the impact the crisis is having on employment, purchasing power, livelihoods and the economy at large. As a consequence, **private consumption is expected to be especially hard hit and projected to contract by 9.8% in 2020.**³⁷

In April, both the World Bank and the IMF projected growth for 2020 to be just over 4%, already a downgrade of 4 percentage points from earlier estimates. As the situation worsened and more research was done on the potential implications of the pandemic and its socioeconomic impacts on sub-Saharan Africa, the World Bank's June 2020 forecasts paint an even bleaker picture. **For South Sudan, they estimate a 4.3% contraction (a 12-percentage point decrease since February) in 2020 and a 23% reduction in 2021 (a 29-percentage point fall since February).** These forecasts are subject to great uncertainty in the context of global and national aggregate shocks; nonetheless, what is certain is that all these projections concur that South Sudan's economy will suffer from the impact of the pandemic as compared to baseline estimates made before COVID-19. It also seems that these contractions will be of greater magnitude in South Sudan than in similar and neighbouring countries (Figure 8).

Sources: World Bank, *Global Economic Prospects*, June 2020; World Bank, *Macro Poverty Outlook*, June 2020; IMF, *World Economic Outlook*, 2019 and 2020; World Bank, *South Sudan Economic Update*, 2020.

³¹ UNDP, *Human Development Reports data*, 2020, <http://www.hdr.undp.org/en/countries/profiles/SSD>.

³² FAO/GIEWS (2020), "Country Briefs: South Sudan", FAO, 23 April, <http://www.fao.org/giews/countrybrief/country.jsp?code=SSD>.

³³ World Bank (2020), *Macro Poverty Outlook*, www.worldbank.org/en/publication/macro-poverty-outlook. The economic forecasts released in April were updated on 8 June.

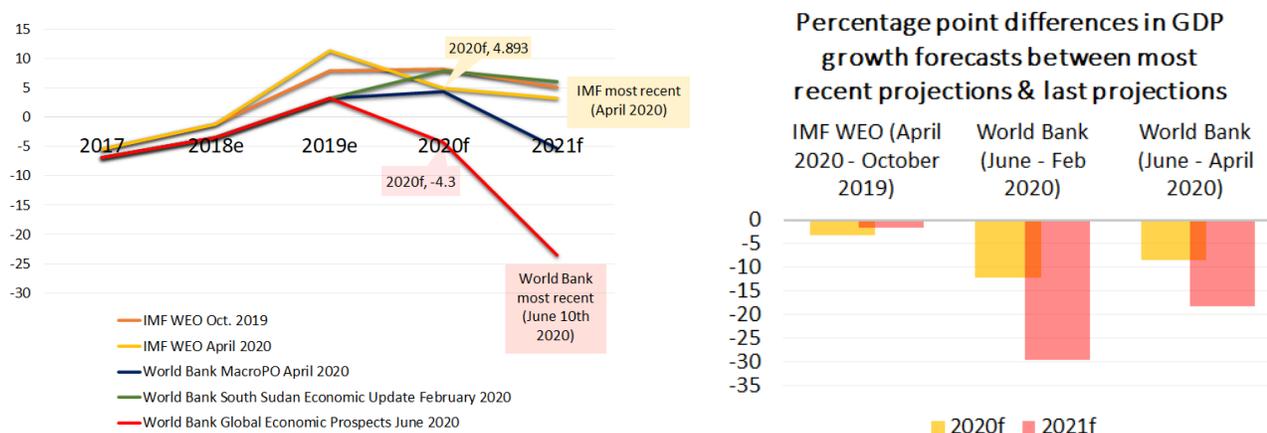
³⁴ Ibid.

³⁵ Francis, Okech (2019), "South Sudan Sees Foreign Direct Investment Rising to \$1 Billion", Bloomberg, 31 July, www.bloomberg.com/news/articles/2019-07-31/south-sudan-sees-fdi-rising-to-1-billion-as-crisis-recedes.

³⁶ OECD (2020), "-19", 4 May, https://read.oecd-ilibrary.org/view/?ref=132_132646-g8as4msdp9&title=Foreign-direct-investment-flows-in-the-time-of-COVID-19; UNCTAD (2020), *World Investment Report 2020: International production beyond the pandemic*, United Nations Publications.

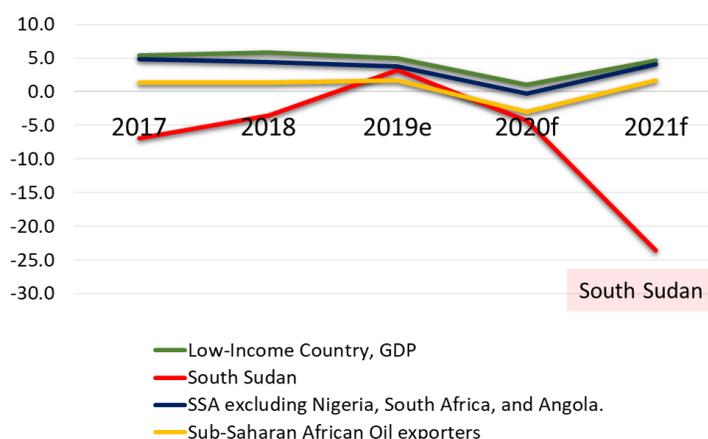
³⁷ World Bank (2020), *Macro Poverty Outlook*, op. cit.

Figure 7. Forecasted GDP growth revisions and differences.



Sources: World Bank, *Global Economic Prospects, June 2020*; World Bank, *Macro Poverty Outlook, June 2020*; IMF, *World Economic Outlook, 2019 and 2020*; World Bank, *South Sudan Economic Update, 2020*.

Figure 8. Forecasted GDP growth for South Sudan compared to similar countries.



Source: World Bank *Global Economic Prospects, 2020*

2.4. Building a virtuous cycle: priorities and constraints

Diversifying the economy is crucial for sustainable growth as the country's oil reserves will probably be depleted by 2030. **The financial sector also needs to be developed** in order to improve access to finance in the country which is currently severely limited: only 13% of the population own a bank account.³⁸ The lack of access to finance is a major inhibiting factor for the development of the private sector and entrepreneurship, both of which

are necessary to build long-term, sustained growth. The creation of mobile money services like m-GURUSH and Nilepay are positive steps towards lowering transaction costs and increasing access to financial services; however, the impact of these services is not to be overstated. There is also an issue of utilisation as access to electricity and technological devices in the country is extremely low.³⁹ This must be scaled up to reach a larger segment of the population for developments to be truly inclusive and effective. Moreover, the development of robust financial institutions requires laying the foundations of stability,

³⁸ Mawejje, Joseph and Finn, Arden (2020) *op. cit.*; Enterprise Surveys data.

³⁹ Only 14% of urban households and 1% of rural households have electrical connections. Source: Mawejje, Joseph and Finn, Arden (2020) *op. cit.*

peace, transparency and good governance; together they will allow for a growing business environment and, subsequently, innovation and investment.

The country should also continue developing the tourism sector, commercial agriculture and manufacturing and tap into its reservoir of non-oil natural resources. With over 90% of the population engaged in subsistence agriculture and more than 70% of its land suited for agriculture,⁴⁰ the development of commercial agriculture may be key to increase incomes and growth for the country. In addition to livelihoods, it would also contribute to increased domestic food production and reduce reliance on food imports. This would help ease the persistent food insecurity experienced in the country. As mentioned above, South Sudan is rich in minerals: gold, diamonds and copper, amongst other resources.⁴¹ The country therefore needs to exploit the huge potential of these resources by increasing the public and private commercialisation of the domestic mining industry. Planned government investment and FDI in this regard

are therefore a welcome step and efforts must be made to ensure that they continue, despite the expected decline in the latter.

A precondition for robust growth in these sectors is the effective development of the human capital stock; this requires extensive investment in education, health and social spending to alleviate poverty and foster equality of opportunity for development. Institutional governance, infrastructure development and the development of the business environment are also key factors for building the foundations for more long-term, inclusive growth.

The foregoing can only develop if the necessary pre-conditions of fiscal space, institutional capacities and peace exist. Given the population's most pressing needs, in the short term, resources should be devoted to addressing food security and poverty induced by the ongoing shocks, but such expenditure should also serve for long-term development. This requires investment in the diversification of the economy.

Key takeaways

- The decline in global oil prices and demand is a major threat to the revenues of the Transitional Government of National Unity. More than 80% of its budget is dependent on this revenue, meaning that the government's leeway to finance key sectors such as health, education and social spending will be greatly restricted.
- The government's fiscal space is very limited given the low tax revenue mobilisation and non-oil revenue mobilisation in general – but the situation seems to be improving.
- South Sudan is recognised as being in debt distress but the situation seems to be improving with the right measures.
- Inflation is rising once again, which puts extra pressure on household purchasing power. This threatens to worsen poverty and food insecurity.
- Many sectors have been impacted by COVID-19 related restriction measures. The services sector and the informal economy have been especially hard hit.
- FDI is expected to decline by as much as 30-40% which could significantly hamper efforts to wean South Sudan's economy away from oil.
- The economy is expected to contract by 4.3%, according to the most recent estimates.

Recommendations

1. In the short term, the only possible means of creating more fiscal space for human development financing is by re-directing resources from infrastructure spending and taking on more external financing. The global discourse on debt service suspension and shifting from loans to grants in response to COVID-19 may offer an opportunity to the government to seek external financing to broaden its fiscal space.
2. In the long term, the government should build capacity in domestic revenue mobilisation through a well-functioning tax system; it should also diversify its economy beyond oil dependence.
3. A precondition for this is the development of strong institutions, stability, transparency and good governance which should be the government's priority so as to foster long-term, sustainable growth in the country.

⁴⁰ IMF (2019), *op. cit.*

⁴¹ *Ibid.*

2.5. From economic to social issues: no safety nets

The extreme poverty headcount is based on \$1.90 a day (2011 PPP) and has risen from 51% in 2009 to an estimated 88% in 2019.⁴² What makes the current situation worrying from a human development and peacebuilding standpoint is that despite the government's recent efforts to implement a social protection system, the operational context of South Sudan has limited its implementation and coverage. The country lacks a coherent social protection framework capable of responding to widespread aggregate shocks like those currently facing the country.⁴³ The national social protection policy framework that was established under the South Sudan Development Plan and the National Development Strategy 2018-2021 has been a welcome step. Nonetheless, the government has only allocated about 0.06% of the 2018-2019 budget to the protection scheme. As a result, vulnerable households have had to rely on informal community social protection and ad-hoc donor-based humanitarian aid and cash transfers. These make up 99.7% of the current social safety net system.⁴⁴

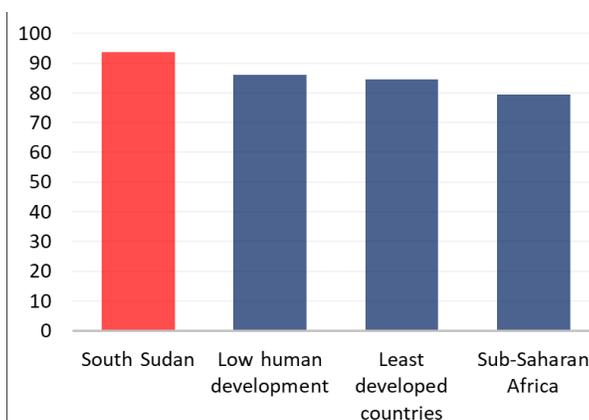
However, due to its ad-hoc, responsive nature, humanitarian aid does not guarantee a stable, long-term source of safety net income to respond to longer-term needs. In other words, the system is not geared towards

prevention and transformative social protection. The system also lacks national coverage. This is further compounded by the highly fragmented nature of the programmes and low levels of monitoring and evaluation. This means that exclusion and inclusion errors may be high, synergies between the programmes are low and efforts to ensure adequate coverage, efficiency and implementation are hampered.

There is also a high level of fiduciary risk involving state capture due to the lack of transparency and accountability in the allocation of social protection resources. South Sudan is ranked 179/180 on the Corruption Perception Index and thus considered extremely corrupt. This further amplifies the problem of coordination as various external actors are reluctant to push for a more centralised system.

The lack of fiscal space and the de-prioritisation of social spending in favour of security measures have also undermined efforts to build an effective, widespread social protection system. Financial pressure on public finances due to reduced state revenues will further compound the challenge of scaling up essential social spending. Hence, reliance on international organisations to provide much-needed relief will continue. The World Bank has given \$40 million for the South Sudan Safety Net Project (SSSNP) - a public works and unconditional cash transfer programme - in response to the pandemic, whilst other actors like the World Food Programme (WFP) and

Figure 9. Percentage of the population not covered by social protection



Source: UNDP Human Development Preparedness and Vulnerability Dashboard.

⁴² World Bank (2015-2017), waves 1-4 of the High Frequency Surveys, "South Sudan", <https://microdata.worldbank.org/index.php/catalog/2916>.

⁴³ South Sudan Ministry of Gender, Child and Social Welfare and UNICEF (2019), *Mapping and Analysis of Social Protection in South Sudan*, Ministry of Gender, Child and Social Welfare, Juba, July.

⁴⁴ Ibid; Ad-hoc here refers to reactive/responsive emergency social protection measures which reply to short-term shocks or necessities rather than transformative social protection which attempts to tackle foundational causes of deprivation allowing for long-term pathways out of poverty rather than just reacting to a shock.

humanitarian organisations are scaling up food aid and cash transfers. However, in order to reach out effectively and efficiently to those most in need, it is essential that there is greater coordination among actors and a better

integrated information management system to allow for synergies between programmes to meet the needs of the population.⁴⁵

Key takeaways

- Social protection coverage is minimal; most of it comes from donor-based humanitarian aid and/or cash transfers. There is limited government ownership and vision for a long-term transformative social protection system.

Recommendations

1. Domestic capacities should be developed to administer institutionalised, long-term social protection systems which can serve both as a safety net and as a means to develop human development through transformative social protection.
2. To achieve this, there needs to be enhanced cooperation between government and international actors, as well as increased domestic financing from the national budget.

⁴⁵ Ibid.



3.

Human development levels and effects: Urgent compounded and mounting hardships to address

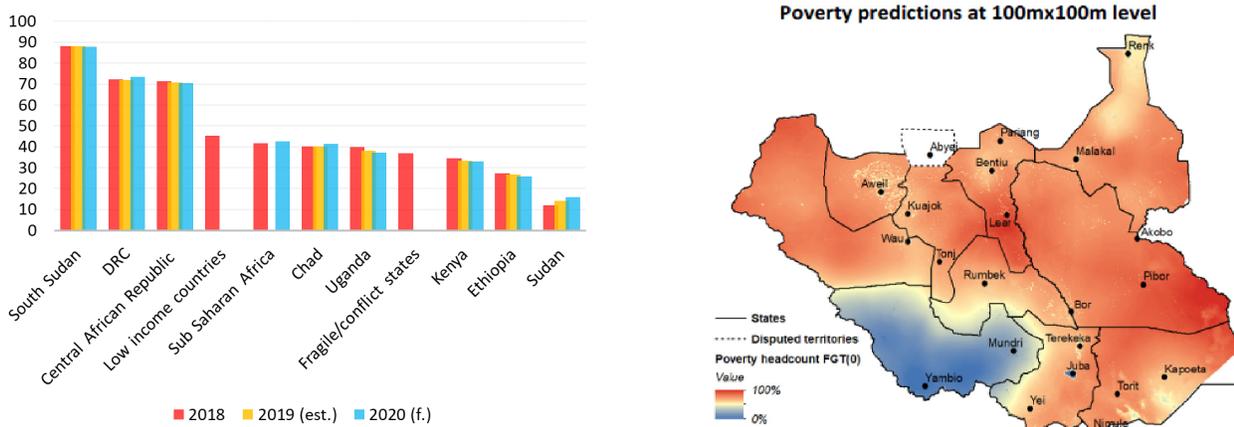
3.1. Multidimensional poverty and deprivation

Both the high incidence of poverty and its severity have markedly increased since 2009 as a consequence of the cumulative impacts of conflict, numerous climate-related shocks and hyperinflation which has eroded households' purchasing power. Extreme poverty increased by an estimated 37 percentage points since 2009, whilst the poverty gap increased from 23% to 47% of the poverty line. Poverty estimates stemming from both the HFS survey⁴⁶ and geo-spatial data show that poverty is scattered

across the country but seems to be most concentrated in the north and east (see also Figure 23 in Annex 2).

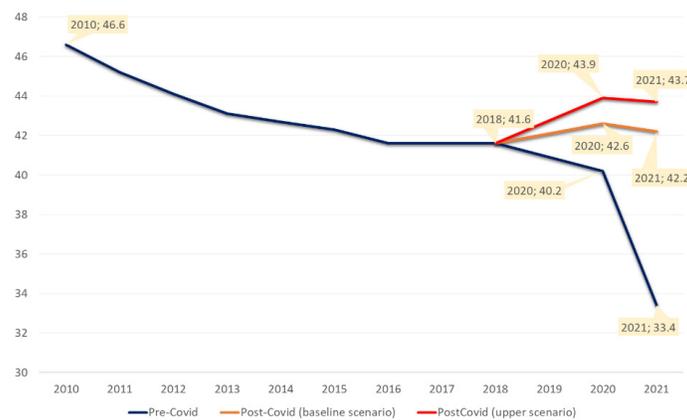
Poverty is expected to increase further due the combination of threats COVID-19 poses by exacerbating structural weaknesses already present in the country. The World Bank *Macro Poverty Outlook* (April 2020) initially forecasted a slight rise in poverty for South Sudan. However, this projection was based on the relatively conservative estimates of the expected decline in GDP per capita announced in the April *World Economic*

Figure 10. Left panel: poverty headcount at \$1.90 a day (2011 PPP) % of the population; Right panel: poverty mapping



Sources: World Bank (2020), *Macro Poverty Outlook*; World Development Indicators, Montes et al., 2020; Institute of Development Studies, 2019, based on HFS 2016 data and Flowminder / WorldPop.

Figure 11. Poverty rate forecast at \$1.90 a day (PPP) % of the population for sub-Saharan Africa



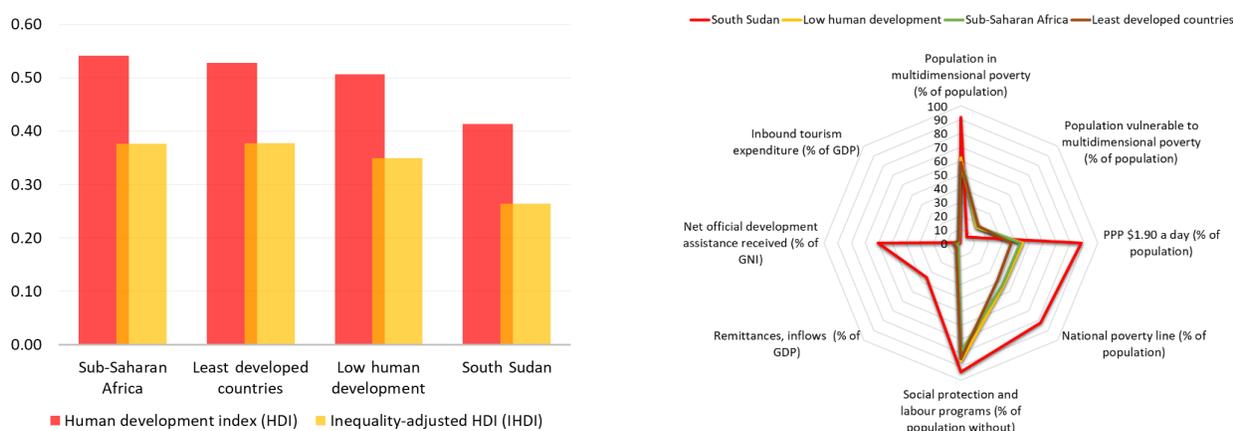
Source: World Bank, *Poverty & Equity Notes*, "How much will poverty rise in Sub-Saharan Africa in 2020?", June 2020.

⁴⁶ Pape, U. and Parisotto, L., "Estimating Poverty in a Fragile Context: The High Frequency Survey in South Sudan", World Bank Working Paper, 2019.

Outlook and World Bank forecasts. These downward revisions reflect greater expected declines in GDP per capita and poverty forecasts have been revised (in June) accordingly to show that even higher poverty rates are expected in sub-Saharan Africa. A two-percentage point increase in poverty is estimated for 2020 (Figure 10). Although these forecasts are subject to great uncertainty, it is not unreasonable to assume that the poverty rates in South Sudan are likely to reflect a similar trend given the current socioeconomic circumstances the country is facing. In fact, the International Food Policy Research Institute's MIRAGRODEP simulations estimated that in 2020 poverty in South Sudan will increase by as much as 13.9%.

3 in Annex 2).⁴⁷ Only one in three people has a mobile phone subscription and in 2018 only 200 000 people had a fixed broadband subscription (Figure 12). This is particularly worrying given that the main medium to receive COVID-related information is via electronic devices, according to a recent survey conducted jointly by various ministries and UN Women.⁴⁸ Access to adequate water and sanitation facilities is also extremely low: only 11% of households have access to such infrastructures and not surprisingly rural populations have even less access than their urban neighbours. This may be a major challenge to containing the virus if it spreads in the coming months.

Figure 12. Human development and socioeconomic vulnerability to COVID-19



Source: UNDP Human Development Reports data; UNDP Global Preparedness and Vulnerability Dashboards.

The multidimensional aspect of deprivation in South Sudan is also severe. The country is ranked 186th out of 188 countries in the Human Development Index rankings and its multidimensional poverty headcount concerns 91% of the population. Figure 12 illustrates that South Sudan is the most deprived country, all dimensions considered, in the multidimensional vulnerability to COVID-19 dashboard developed by UNDP.

3.2. Multidimensional deprivation: quality of living standards

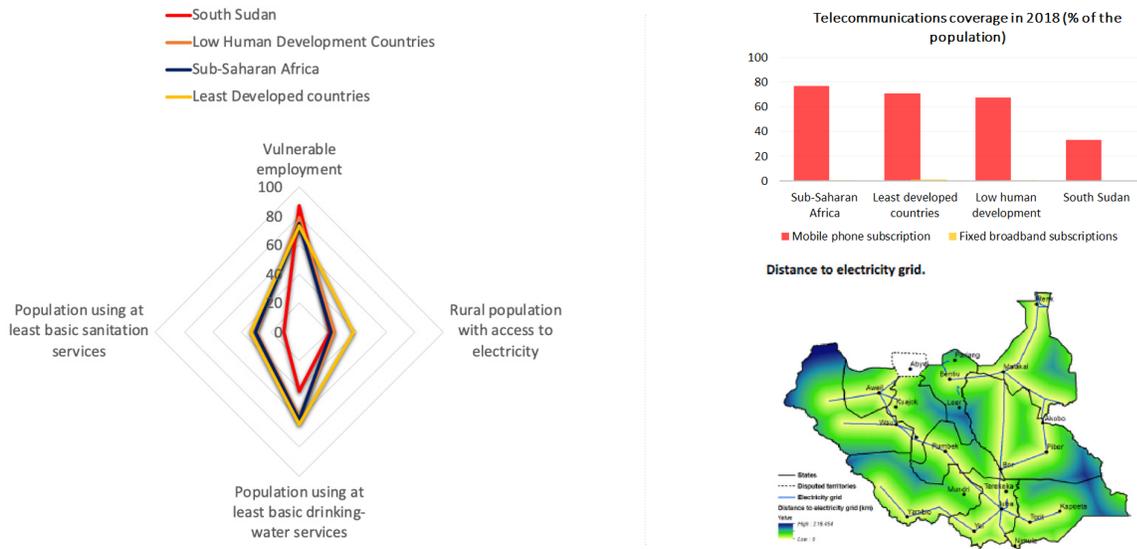
Access to electricity and sources of energy is extremely low as only 14% of urban households and 1% of rural households have electrical connections (see also Figure

The current challenges risk exacerbating structural multidimensional deprivations in terms of basic needs, infrastructures and the standard of living of the South Sudanese population, given that the economic, health and governance implications threaten to undermine efforts to develop such infrastructures due to the limited financial and administrative capacities of the government. Moreover, as the number of cases rise, the government may decide to impose lockdown measures once more which would significantly impact the informal economy and those in vulnerable employment (Figure 12) as evidenced by the University of Juba survey conducted during the lockdown.

⁴⁷ Mawejje, Joseph and Finn, Arden (2020) *op. cit.*

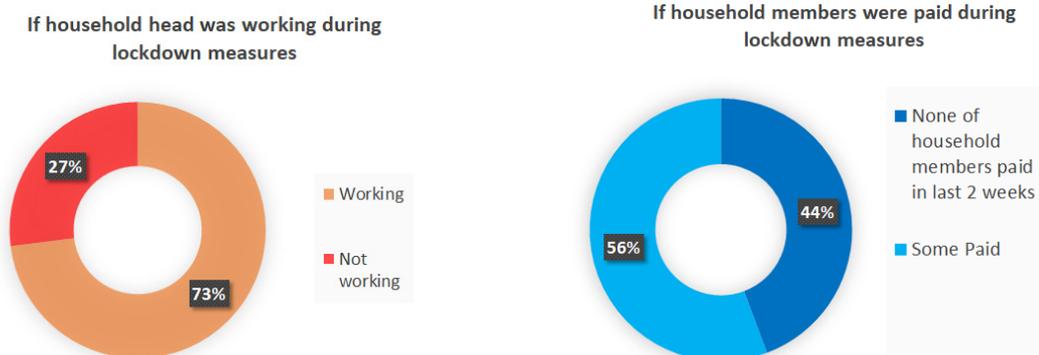
⁴⁸ The Ministry of Gender, Child and Social affairs, the Ministry of Humanitarian Affairs, Community Empowerment for Progress (CEPO) and Rural Women for Development South Sudan (RWDSS) (2020), *A Rapid Gender analysis on COVID-19*, UN Women, Juba, South Sudan.

Figure 13. Indicators of living standards and access to electricity and telecommunications



Source: : UNDP Preparedness and Vulnerability to COVID-19 Dashboard; Institute of Development studies 2019 based on HFS 2016 data and Flowminder/WorldPop.<

Figure 14. The impact of COVID-19 restriction measures on work and pay



Source: University of Juba, 2020.

Key takeaways

- Multidimensional deprivation in South Sudan leaves the country extremely vulnerable to the socioeconomic impacts of COVID-19.
- Much-needed investment for developing infrastructures, providing basic services and social spending will further decline due to the lack of domestic finances.
- Access to healthcare, education and essential services are restricted.
- Both monetary and multidimensional poverty is expected to increase further, reinforcing poverty traps and the cycle of deprivation.

Recommendations

1. Further lockdown measures must be weighed carefully as it may put livelihoods at risk by restricting income-generating activities. The measures should strike the right balance between health and livelihoods.

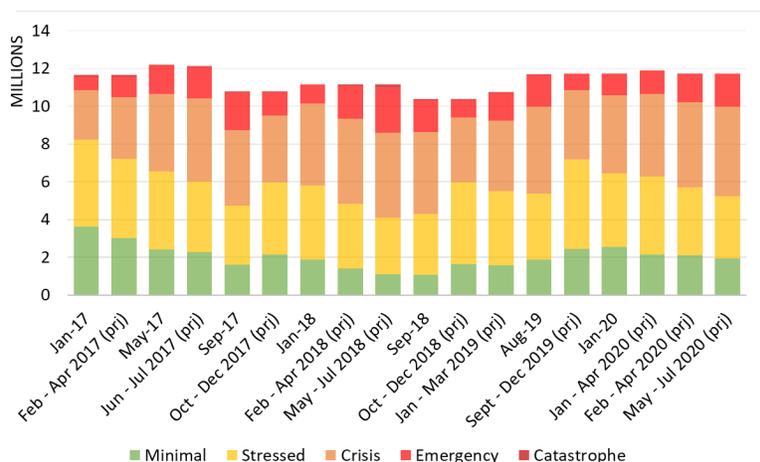
3.3. Food security and livelihoods

Food security is also a major concern as South Sudan is categorised as being in a crisis, emergency and catastrophe phase (IPC phases 3-5).⁴⁹ This state of affairs is expected to persist until the end of the year.⁵⁰ More than half of the population (i.e. 6.48 million) are estimated to be food insecure and the Famine Early Warning Systems (FEWS) network warns that this could be an underestimate given the current circumstances. This situation will likely exacerbate the prevalence of malnutrition in the country which is said to affect as many as 1.3 million people, including 860 000 children.⁵¹ The vulnerabilities of women and girls specifically vis-à-vis food security are amplified by harmful social norms which dictate that women and girls eat last and least in the household.

restrictions have complicated the matter by delaying the supply of pesticides.⁵³ These factors pose tremendous risks for the majority of the population which depend on subsistence farming and commercial agriculture for their livelihoods (85% according to UNICEF, 2019; and see Figure 4, Annex 2). If the 15% loss of production in 2019⁵⁴ is repeated, the food security problem will be worsened.

Livelihoods have been put under strain due to the erosion of purchasing power caused by the cumulation of years of hyperinflation and the continuous rise in prices of essential goods attributed to the impacts of COVID-19 and global trade dynamics. Already prior to COVID, real household consumption is estimated to have decreased by some 60-70% since independence.⁵⁵

Figure 15. IPC Food Security classification - 3-year trend



Source: Integrated Food Security Phase Classification (IPC).

South Sudan is extremely prone to climatic shocks with droughts plaguing Bahr el Ghazal and Greater Equatoria states, whilst floods caused havoc in the Greater Upper Nile state in 2019. Moreover, a second swarm of locusts, allegedly twenty times worse than in February, is threatening to ravage crops.⁵² COVID-related travel

Given that South Sudan is heavily import dependent, the restriction measures and border closures have fueled a situation of erratic supply chains leading to increased scarcity on markets of essential goods which are imported from neighboring Uganda and Sudan.⁵⁶ Data from April shows that imports of essential foodstuffs

⁴⁹ Integrated Food Security Phase Classification (IPC).

⁵⁰ FEWS NET (2020), *op. cit.*

⁵¹ OCHA (2020), South Sudan Humanitarian Response Monitoring Review (January to March 2020).

⁵² Mercy Corps (2020), "Desert locusts in East Africa: A plague of another order", Mercy Corps, 18 May www.mercycorps.org/blog/desert-locusts-east-africa.

⁵³ Yad, Wania (2020), "A Plague of Ravenous Locusts Descends on East Africa, Jeopardizes Food Security", New Security Beat, Wilson Centre, 18 May, <https://www.newsecuritybeat.org/2020/05/plague-ravenous-locusts-descends-east-africa-jeopardizes-food-security/>.

⁵⁴ FAO (2019).

⁵⁵ Mawejje, Joseph and Finn, Arden (2020) *op. cit.*

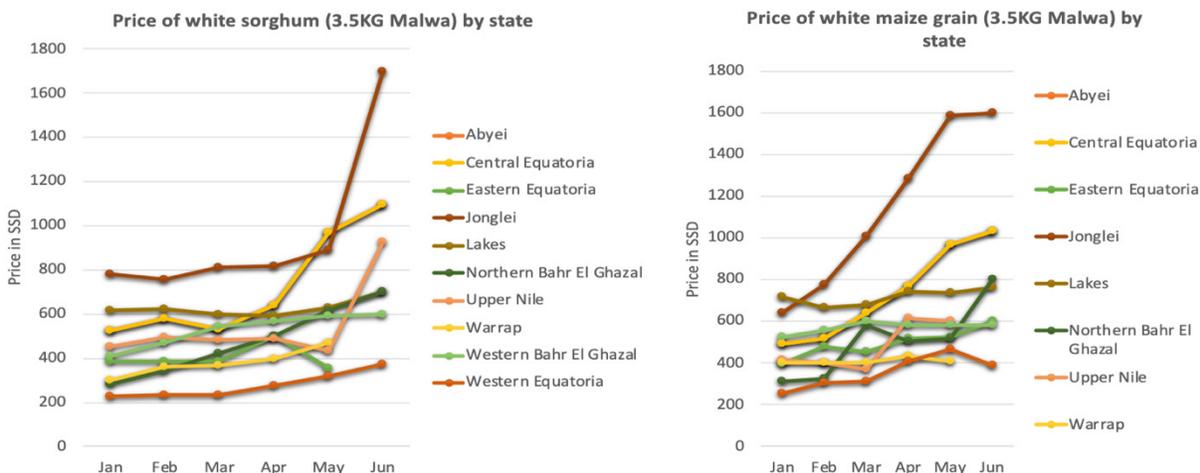
⁵⁶ WFP South Sudan (2020), *COVID-19: Potential impact on South Sudan: A WFP analysis of the market and food security implications of the pandemic, Vulnerability Analysis and Mapping Unit*, May, https://fscluster.org/sites/default/files/documents/covid-19_potential_impact_on_south_sudan_fsl_cluster.pdf.

like maize and sorghum have declined by 15-30%.⁵⁷ This has spurred upward pressure on prices which is mainly shouldered by the most vulnerable households who are heavily market-dependent in areas like Northern Bahr el Ghazal (73%), Central Equatoria (61%), Upper Nile (58%) and Eastern Equatoria (56%) (see Figure 23, Annex 2).⁵⁸ Certain areas are particularly hard hit by price increases such as Bor South, Rumbek, Wau and Juba where the price of sorghum has increased by 54-295% above the 5-year average (see Figure 24, Annex 2). Moreover,

ongoing inter-communal violence and hostilities between the government and certain groups are exacerbating pressure on food supply chains, increasing displacement and causing humanitarian bottlenecks. The UNHCR and WFP have reported challenges in transporting humanitarian food assistance and staff to areas in need.⁵⁹

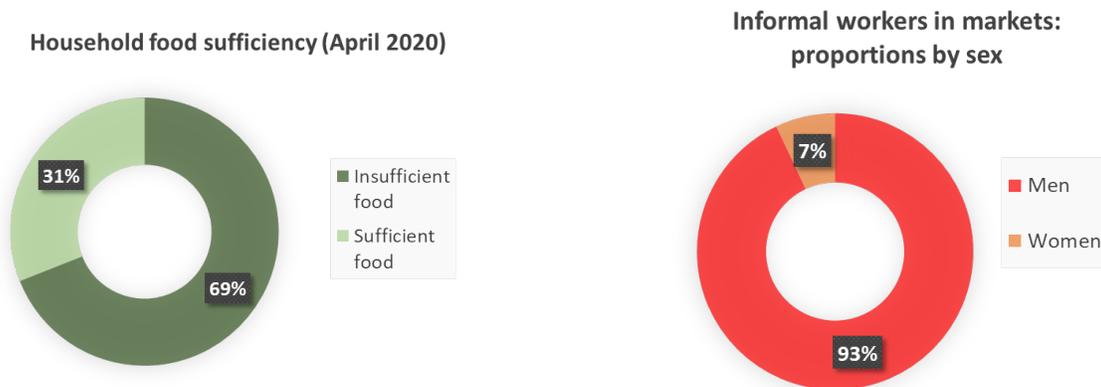
As discussed earlier, the price of transport has more than doubled since the onset of the COVID pandemic; this is doubtless further increasing expenditures in already

Figure 16. Price changes of white sorghum and white maize grain in 2020



Sources: CLiMIS South Sudan data.

Figure 17. (Left panel) Perception of household food sufficiency in Juba; (Right panel) Sex disaggregated data of informal workers in Juba Sources: CLiMIS South Sudan data.



Source: University of Juba, 2020.

⁵⁷ FEWS NET (2020), "South Sudan Food Security Outlook Update", April, https://reliefweb.int/sites/reliefweb.int/files/resources/FEWS%20NET%20South%20Sudan%20Food%20Security%20Outlook_Update_04_2020__final_05.05.2020.pdf.

⁵⁸ Percentages relate to those who are market dependent in these regions. WFP South Sudan, *COVID-19: Potential impact on South Sudan: A WFP analysis of the market and food security implications of the pandemic, Vulnerability Analysis and Mapping Unit*, May 2020.

⁵⁹ UNHCR (2020), "UNHCR warns of looming humanitarian crisis in South Sudan, amidst ongoing fighting and coronavirus threat", 30 April, www.unhcr.org/news/press/2020/4/5eaa991c4/unhcr-warns-looming-humanitarian-crisis-south-sudan-amidst-ongoing-fighting.html.

financially constrained, vulnerable households who have to travel to reach markets. This situation of suppressed purchasing power is exacerbated by the fact that workers' real incomes have declined substantially due to the cessation of income-generating activities imposed by the restriction measures. Estimates suggest that as many as 90% of total formal employees and a large majority of informal workers are affected in urban areas like Juba.⁶⁰ For instance, women vendors and *boda boda* drivers (transport services) are particularly hard hit.⁶¹ Most workers are also reportedly no longer paid. As a consequence, certain households have reduced food consumption, with some reporting going days without meals at all (Figure 16). The situation appears to have improved somewhat since the lifting of restrictions. However, prices remain high and still seem to be increasing, according to the latest CLiMIS data.

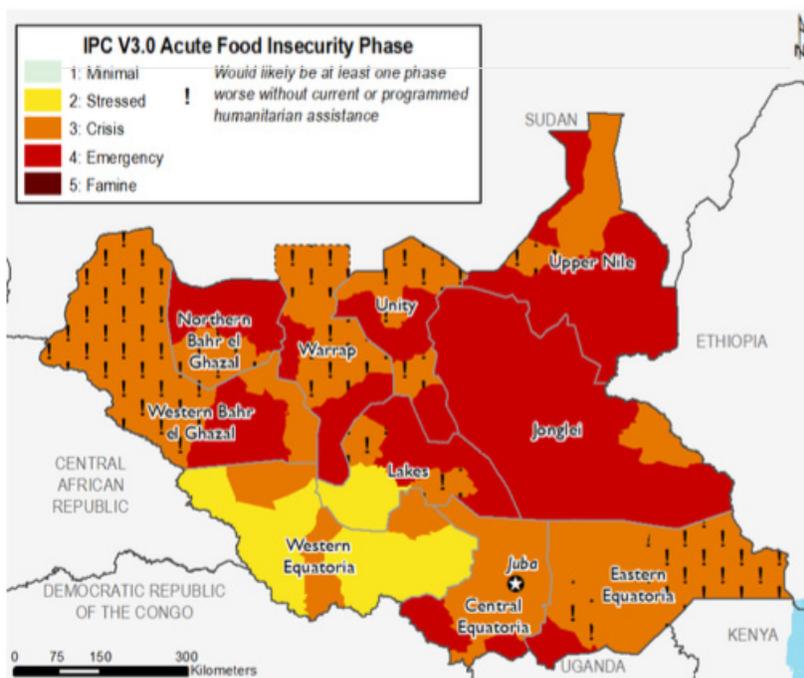
The World Bank has warned that remittances are expected to fall sharply due to global economic circumstances triggered by the COVID-19 pandemic. Overall, they have dropped by 23.4% in sub-Saharan Africa. Much of South

Sudan's population relies heavily on them: remittances are equivalent to 34% of GDP.⁶² This will place additional pressure on many households who have already seen their income decline due to the slowdown in economic activity and rising inflation.

Most poor rural households have reportedly already depleted their food stocks.⁶³ This means that these households are also increasingly reliant on markets.

- There is currently an estimated cereal deficit of 482 500 tons; the Food Security and Livelihoods (FSL) Cluster has predicted that up to 2 million people may be in food insecurity and in need of food aid (in addition to the previously estimated 6.5 million people).
- The most vulnerable regions are Jonglei, Upper Nile, Lakes and Northern Bahr el Ghazal states and parts of Greater Ekuatoria, whilst the areas at greatest risk are Akobo, Duk, Ayod, Nyirol and Pibor in Jonglei; Cueibet, Rumbek North, Rumbek Centre and Yirol East in Lakes; and Maban, Maiwut, Nasir, Longochuk and Ulang in Upper Nile.

Figure 18. Areas of high risk of food insecurity in the June-September 2020 period



Source: FEWS NET.

⁶⁰ University of Juba (2020), *op. cit.*

⁶¹ Ibid.

⁶² World Bank (2020), "World bank Predicts Sharpest Decline of Remittances in Recent History", World Bank press release, 22 April, www.worldbank.org/en/news/press-release/2020/04/22/world-bank-predicts-sharpest-decline-of-remittances-in-recent-history; Adegoke, Yinka,(2020), "Remittances from migrants to African countries will plunge by nearly a quarter this year", Quartz Africa, 24 April, <https://qz.com/africa/1844973/world-bank-remittances-to-africa-to-plunge-by-a-quarter/>.

⁶³ FEWS NET (2020), *op. cit.*

In light of the above, humanitarian agencies have estimated that there are some 7.5 million people in need of humanitarian aid, of which 3.5 million are currently reached (63%). Furthermore, there is a funding gap of \$1.3 billion out of an estimated \$1.5 billion required to address the current crises the country is facing.⁶⁴

and morbidity linked to existing diseases,⁶⁸ failure to implement appropriate measures to prevent its spread in the community and ensure provision of essential services could collapse the health system and devastate the young nation.⁶⁹

Key takeaways

There is a pressing need to alleviate the food security crises facing the country caused by:

- Rising food prices.
- Erratic food supply.
- Natural shocks (floods and locusts).
- Lower economic activity and investment.

Recommendations

1. Given the limited fiscal space, food insecurity can only be addressed in the short term through external funding and humanitarian aid.
2. In the medium and long term, investment and efforts are needed to develop the agricultural sector as it can boost domestic food production and reduce reliance on imports. This would render the country more resilient to food insecurity.

3.4. Health and well-being

The pre-COVID government budget allocation for health for FY2019/20 constituted 1.1%⁶⁵ (representing \$14 million) of GDP.⁶⁶ Current health expenditure (CHE) in 2017 was estimated to be 9.7% of GDP; domestic private expenditure made up 23.4% of the CHE, direct out-of-pocket expenditure amounted to 19.2% of the CHE and government expenditure 8.4%.⁶⁷ Years of neglect and underinvestment have resulted in a fragile health system lacking government ownership. Its survival depends on international donor funding; an estimated 90% of health services in the country are provided by NGOs. Although, currently, the number of registered infections and COVID-related deaths are significantly lower than the death toll from the ongoing intercommunal violence

The impact of the COVID-19 crisis on the health system of South Sudan can be identified in terms of direct and indirect mortality, as discussed below.

There is a significant risk of high direct mortality from COVID-19 in South Sudan, should there be widespread community transmission, due to its fragile health system and its limited capacity to respond (Table 1 and figure 19).⁷⁰ In 2016, close to 71% of the population lived more than 5km away from the nearest public health facility.⁷¹ Moreover, access is further compromised as 13% of existing primary care facilities were found to be non-functional. The general health service readiness to deliver basic health care services is estimated at 37% of international minimum standards.⁷² **South Sudan also faces a severe shortage of qualified medical practitioners.** The average

⁶⁴ OCHA (2020), *Monitoring Review: January to March 2020, "South Sudan"*, May, https://reliefweb.int/sites/reliefweb.int/files/resources/ss_20200508_q1_monitoring_report_final.pdf.

⁶⁵ Mawejje, Joseph and Finn, Arden (2020), *op. cit.*

⁶⁶ The target for health spending enshrined in the Abuja declaration was 15%, https://www.who.int/healthsystems/publications/abuja_declaration/en/.

⁶⁷ World Bank data (2017), "South Sudan", <https://data.worldbank.org/indicator/SH.XPD.GHED.CH.ZS?locations=SS>.

⁶⁸ On 21 May, 300 people were killed in intercommunal fighting between pastoralists and farmers, www.bbc.com/news/world-africa-52745377.

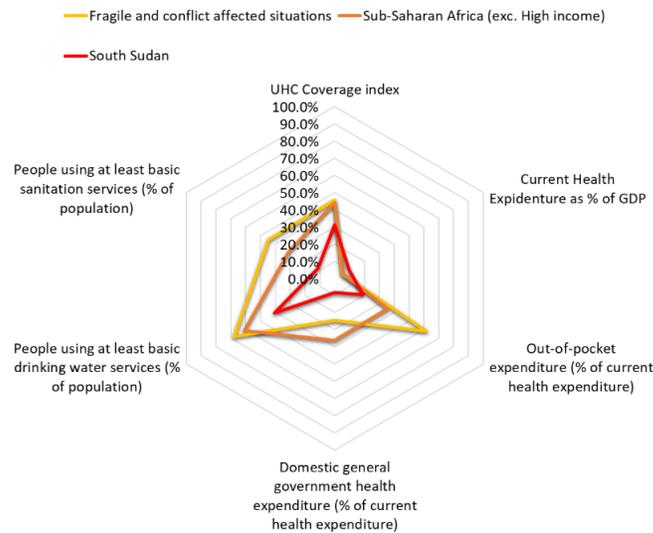
⁶⁹ Schlein, Lisa (2020), "UNHCR: COVID-19 Could Affect Millions in South Sudan", Voice of America, 30 April, www.voanews.com/COVID-19-pandemic/unhcr-covid-19-could-affect-millions-south-sudan; Wudu, Waakhe, Simon (2020), "South Sudan Official Warns of Major COVID-19 Outbreak If Citizens Don't Comply With Measures", Voice of America, 12 May, www.voanews.com/africa/south-sudan-focus/south-sudan-official-warns-major-covid-19-outbreak-if-citizens-dont-comply.

⁷⁰ A SARA survey, conducted by WHO, reports an average 1.43 healthcare facilities per 10 000 people; this is below the WHO standard of 2 facilities per 10 000 people. UNMISS/OHCHR (2020), *Access to Health for Survivors of Conflict-Related Sexual Violence in South Sudan*, May, www.ohchr.org/EN/Countries/AfricaRegion/Pages/SouthSudanReports.aspx.

⁷¹ Macharia, Peter et al., "Spatial Accessibility to Basic Public Health Services in South Sudan", *Geospatial Health*, Vol. 12, No. 510, May 2017, pp. 106–13.

⁷² UNMISS/OHCHR, *Access to Health for Survivors of Conflict-Related Sexual Violence in South Sudan*, May 2020. www.ohchr.org/EN/Countries/AfricaRegion/Pages/SouthSudanReports.aspx.

Figure 19. Structural health-related preparedness to face COVID-19



Source: World Bank, World Development Indicators.

ratio of physicians is approximately 1 per 65 000 people, and that of midwives is 1 per 39 000 people.⁷³ The spatial distribution of health workers and functioning healthcare facilities is found to be inequitable, both among the states and between urban and rural areas (where the majority of people live).⁷⁴ The main barriers for breaking the chains of viral transmission include limited access to WASH facilities (water, sanitation, hygiene)⁷⁵ and reported lack of personal protective equipment (PPE) in health facilities in all states.⁷⁶

Failure to maintain essential medical services during the COVID-19 epidemic will increase indirect COVID-19 mortality stemming from vaccine-preventable and treatable conditions. As health services continue to be stretched and human and capital resources shift to respond to the epidemic, already limited access to essential life-saving medical services, which include vaccines, will be further compromised.⁷⁷ Today approximately 3.6 million

people, including 521 000 internally displaced people (IDPs) and 300 000 refugees are in need of basic health care services.⁷⁸ **COVID risks worsening reproductive and neonatal health services, putting thousands of women and children at risk.** In particular, sexual violence survivors, who already suffer from a lack of adequate healthcare resulting in additional compounded trauma, long-term physical harm and mental health consequences,⁷⁹ risk further exclusion from life-saving services.

In addition to COVID-19, the burden of diseases with epidemic and pandemic potential is high: outbreaks of measles, hepatitis E and yellow fever are on the increase. Malaria remains one of the leading causes of morbidity and mortality. At the same time the risk of an Ebola outbreak spilling over from the neighboring DRC, where some new cases were recorded in April,⁸⁰ remains high due to porous borders.

⁷³ OCHA (2019), *Humanitarian Needs Overview: South Sudan*, November, p. 88, humanitarianresponse.info/en/operations/south-sudan; "South Sudan", Global Health Workforce Alliance, World Health Organization, 13 April 2012, www.who.int/workforcealliance/countries/ssd/en/.

⁷⁴ *Health Sector Development Plan 2011-2015*, Ministry of Health, Government of South Sudan, 1 March 2011.

⁷⁵ OCHA (2019), *Humanitarian Needs Overview: South Sudan*, November, p. 88, humanitarianresponse.info/en/operations/south-sudan; "South Sudan", Global Health Workforce Alliance, World Health Organization, 13 April 2012, www.who.int/workforcealliance/countries/ssd/en/.

⁷⁶ Ministry of Health: Public Health Emergency Operation Center, *South Sudan COVID-19 Weekly Situation Update Report*, 27 April-3 May 2020.

⁷⁷ For example, the second phase of the measles vaccination campaign led by UNICEF has been postponed due to COVID-19 mitigation measures. As a result, 787 000 children will not receive the measles vaccine as planned. Prior to the campaign, 42% of children in South Sudan were vaccinated against measles. www.unicef.org/southsudan/press-releases/world-immunization-week-hundreds-thousands-will-miss-out-measles-vaccine-south-sudan.

⁷⁸ OCHA (2019), *Humanitarian Needs Overview: South Sudan*, November, p. 88. See Footnote 34.

⁷⁹ UNMISS/OHCHR (2020), *Access to Health for Survivors of Conflict-Related Sexual Violence in South Sudan*, May.

⁸⁰ Médecins Sans Frontières (MSF) International (2020), "DRC Ebola Outbreaks: Crisis Update, 18 May, www.msf.org/drc-ebola-outbreak-crisis-update.

Table 1. Regional comparison of key health indicators, by country

Country	Neonatal mortality (per 1,000 live births)	Under-5 mortality (per 1,000 live births)	Maternal mortality (per 100 000 live births)	Live births attended by skilled personnel	TB incidence (per 100,000 people)	Malaria incidence (per 1,000 people)	HIV prevalence, adult (% ages 15-49)
South Sudan	40	99	1150	19.4%	146	141.7	2.4%
Sudan	29	60.5	295	77.7%	77	37.4	0.2%
Ethiopia	29	55.2	401	27.7%	164	37.4	0.9%
Kenya	20	41.1	342	61.8%	319	70.8	4.8%
Uganda	20	46.4	375	74.2%	201	200.7	5.9%
Dem. Rep. Congo	29	88.1	473	80.1%	322	307.6	0.7%

Source: UNICEF Country Statistics, data.unicef.org.

Mental health is a pressing issue with an estimated 99% of the population with humanitarian problems needing support.⁸¹ Decades of civil war, conflict, ongoing intercommunal and gender-based violence, displacement and deprivation have created severe physical and mental traumas in millions of people. Despite the acute needs, mental health issues are not prioritized and stigmatised. The country is in short supply of mental

health professionals.⁸² An estimated 7.5 million people are affected by the humanitarian emergency and this number is expected to increase due to the socio-economic shock of COVID. The incidence of mental health disorders will doubtless keep pace with these increases.⁸³ In 2018, there were an estimated 204 000 people with severe mental health conditions and 1 million people with mild to moderate mental health conditions.⁸⁴

Box 2. Effectiveness of the adopted COVID-19 mitigation measures

Evaluation of the effectiveness of the mitigation measures

1. Despite the fragility of the health system, a number of measures (information and awareness campaigns, movement restrictions, social distancing, public health measures) to prevent the community spread of the virus have been taken. Much of the country's capacity, facilities, detection equipment and standard operating procedures were prepared for a potential outbreak of the Ebola virus, but were repurposed to respond to COVID-19.
2. However, certain measures adopted in western countries such as strict lockdowns, social distancing and curfews are hard to implement in the context of South Sudan. This has been evidenced by non-respect of lockdowns, either due to not taking the dangers of virus seriously (due to a lack of information) or due to extreme poverty and the need to continue economic activity to sustain livelihoods.
3. Information and awareness about the virus among the population is insufficient; there is also much misinformation.
4. There has been insufficient community consultation and involvement in implementing or accompanying prevention measures. These could have increased community compliance and increased trust in the government.
5. Testing capacity is insufficient and contact tracing and isolation techniques create stigma which lead to negative consequences for the individuals who test positive.
6. There is a lack of coordination with international partners and NGOs operating in South Sudan, plus a lack of transparency in decision making and activities regarding the management of COVID-19.

⁸¹ Mogga, Joseph Lou K. (2019), "The Mental Health Treatment Gap in South Sudan." *South Sudan Medical Journal*, Vol. 12, No. 1, February, pp. 28–29, www.southsudanmedicaljournal.com/archive/february-2019/the-mental-health-treatment-gap-in-south-sudan.html.

⁸² Bauomy, Jasmin (2019), "In South Sudan, stigma and underfunding plague mental health care", *Mental Health, Al Jazeera*, 18 January, www.aljazeera.com/indepth/features/south-sudan-stigma-underfunding-plague-mental-health-care-190117180739562.html;

⁸³ According to WHO estimates, in humanitarian emergencies the rates of mental health disorders can increase up to 4% for severe conditions and up to 20% for mild to moderate disorders requiring care and support.

⁸⁴ Mogga, Joseph Lou K. (2019) *op. cit.*

In the context of COVID-19 the most vulnerable groups to suffer from mental health issues are:⁸⁵

- **Health workers** due to their direct exposure to the disease, pressures associated with caregiving and stress from fear of transmission. During the Ebola outbreak in Liberia, it was reported that female health workers suffered from mental health issues resulting from the fear of stigmatisation and potentially spreading it to their families.
- **People with pre-existing mental illnesses** due to their limited capacity to handle additional shocks. Mitigation measures and diversion of resources translates into reduced access to treatment and other essential services which further compounds vulnerabilities. For example, four collective centers in Wau operated by the International Organization for Migration (IOM) and providing mental health and psychosocial support (MHPSS) services through skills development to IDPs have closed due to the outbreak of COVID-19, forcing people to return to their places of origin or seek refuge in other UN protection of civilians (PoC) sites.⁸⁶
- **People living in poverty**, given the scarcity of resources and support mechanisms available to them to

withstand the effects of the pandemic and the current economic shocks. In South Sudan, with the extreme poverty headcount at 88% (2019), the majority of the population is at risk.

The COVID crisis risks severely aggravating the mental health situation by further limiting the ability of the most vulnerable to cope with stressors, limiting people's access to services (health, education, WASH and others) and compounding existing emergencies and vulnerabilities. It is therefore essential to safeguard, create and develop interventions that increase people's resilience and capacity to cope with stressors.

3.5. Education

COVID-related school closures and restriction measures are putting the new generation of learners at risk as the majority of children are now receiving no education. The pre-COVID baseline situation in South Sudan was marked by the same challenges as other social sectors: underinvestment, devastation following protracted years of violence, lack of infrastructure, teaching staff and government capacity. The national budget allocation for education in FY 2019/20 was close to 5.6% and the

Key takeaways

1. There is a high risk of direct mortality from COVID-19 if context-specific, conflict-sensitive measures to prevent community spread are not put in place.
2. Given the country's poor health indicators and already limited means and capacity, it is essential to maintain access to - and delivery of - life-saving health services, vaccinations and reproductive health services.

Recommendations

Short term:

1. Greater cooperation with the international NGOs present in the country to effectively coordinate and deploy assistance to the most vulnerable populations across the country, especially in the hard to reach and/or dangerous rural areas and IDP camps and settlements.
2. Leverage emergency financing to set up standardised procedures, case management, procure necessary testing and protective equipment, set up isolation centers.

3. Ensure the availability and accessibility to essential health services and vaccinations, including and emphasizing sexual and reproductive health and mental health services that increase capacity to cope with stressors.

Long term:

1. Increase the GDP share for the health sector.
2. Leverage new donor channels to build the organisational foundation and capacity for a well-functioning health system.
3. Put in place the necessary procedures for budget transparency prior to channeling ODA funding through the national budget in order to strengthen institutional capacity.
4. Develop a strategic vision for the national health system and work together with international partners and donors to implement and finance it.

⁸⁵ Mogga, Joseph Lou K. (2019) *op. cit.*

⁸⁶ Putsoa, Liatile (2020), "Mental Health and Psychosocial Support Brings Optimism to Women's Group in Wau, South Sudan", Medium, International Organization for Migration South Sudan, 24 June, medium.com/@UNmigration/mental-health-and-psychosocial-support-brings-optimism-to-womens-group-in-wau-south-sudan-401033082d39.

actual budget outturns on education are significantly less than budgeted (Figure 3).⁸⁷ An estimated 70% of primary schools and 47% of secondary schools are either partially or completely damaged and 40% of primary schools lack toilet facilities.⁸⁸ South Sudan has a very low rate of adult literacy at 27% and the female literacy rate is even lower: an estimated 16%. In 2020, 3.1 million young people were identified as in need of education services, a trend that has been increasing since 2015. In 2018, at least 2.2 million children were estimated to be out of school and thousands more at risk of dropping out.⁸⁹ The fact that only 200 000 people have access to fixed broadband means that distance learning programmes are inaccessible to the vast majority of children and the marginalized in particular.

The learning gap will widen and inequality will be perpetuated, as the most disadvantaged communities are not able to partake in distance learning programmes. While one such programme has been set up by the Ministry of General Education of South Sudan implementing digital teaching over radio and television, it remains inaccessible to millions of learners owing to a lack of access to radios,

television and electricity. On the supply side, the public sector will be subject to rising demand pressure as the economic shock affects private schools as well, and forces them out of business. The absence of teaching will undermine the quality of educational material and impose economic strain on teachers.

As food insecurity and economic distress deepen, more children are expected to drop out of what little schooling there is and be forced to engage in paid labor instead. The majority of out-of-school children are from the most disadvantaged and vulnerable groups such as IDPs, child soldiers, children with disabilities, girls and children from the poorest households. This inevitably will result in a further deterioration of children's rights and increase in child labour, which is already at the high rate of 45.6% (according to the limited data available from 2011).⁹⁰

The fact that school attendance has plummeted is further reinforcing the gender gap and harmful gender roles between boys and girls. Girls are even less likely to register for school and are more likely to drop out, compared to boys.⁹¹ The COVID rapid assessment study

Key takeaways

1. School closures are putting a new generation of learners at risk of receiving no education.
2. Distance learning programmes are inaccessible to the most marginalised and vulnerable populations, thereby increasing disparities (regional and between income levels) and contributing to the further increase in inequality.
3. Already high drop-out rates are expected to increase in a humanitarian setting exacerbated by COVID-19, leading to long-term poverty impacts and missed employment opportunities.
4. Girls are particularly affected by school closures as gender disparities and the literacy gap are widened; harmful gender roles dictated by social norms are reinforced (burden of housework falling on girls and preferential investment in boys' education).
5. School closures are putting millions of children at an even higher risk of child labour and child marriage.

Recommendations

1. Design and adopt emergency remote-learning programmes that are context sensitive and inclusive to ensure that the most disadvantaged populations can participate.
2. Special emphasis needs to be put on ensuring that policies are supportive of girls' learning.
3. Adopt policies to minimize drop-out rates through targeted financial assistance for at-risk students, especially girls and children in IDP settings.

⁸⁷ Mawejje (2020), *op. cit.*

⁸⁸ Humanitarian needs overview (2020), *op. cit.*

⁸⁹ Rabbani, Fazle, and Carolina Valenzuela (2020), "Education in Time of Conflict: South Sudan pursues quality education as peace moves forward", Global Partnership for Education, 27 February, www.globalpartnership.org/blog/education-time-conflict-south-sudan-pursues-quality-education-peace-moves-forward.

⁹⁰ U.S. Department of Labor (2018), "Findings on the Worst Forms of Child Labor: South Sudan", International Child Labor and Forced Labor Reports, Bureau of International Labor Affairs, www.dol.gov/agencies/ilab/resources/reports/child-labor/south-sudan.

⁹¹ According to estimates published in the 2012 *World Development Report*, there are 7 girls for every 10 boys in primary school and 5 girls for every 10 boys in secondary school.

conducted by researchers at the University of Juba⁹² found that during the lockdown, the burden of housework fell primarily on girls and that they do not engage in educational or recreational activities as much as boys of the same age.⁹³ Therefore, learning opportunities for girls at home are extremely limited compared to being at school. In addition to child labour, girls from disadvantaged groups are at a higher risk of child marriage and early teenage pregnancies.

In the absence of remedial action, school closures will reverse gains made in educational attainment and further worsen education outcomes. Dropping out - temporarily or permanently - and poor quality provision all have long-term effects. They reduce youths' chances of future employment - resulting in lower lifetime productivity and earnings - and contribute to the rise in inequality. These combined factors multiply long-term security risks as rising economic and social distress can lead to an increase in delinquency and criminality and fuel violence and social unrest.

3.6. Vulnerable groups: the impacts of COVID-19 on internally displaced people, women and children

IDPs, persons with disabilities, child soldiers, children and women are particularly vulnerable to the virus and its socio-economic effects. **The crisis is exacerbating existing gender inequalities by affecting women and girls disproportionately.** The UN Gender Development Index (GDI) ranks South Sudan 169th out of 188 countries in terms of disparities between women and men in health, knowledge and living standards.⁹⁴ Additionally, women face a higher risk of infection during the pandemic due to the triple care burden: women and girls are often the primary caregivers, are responsible for managing disease at household level and also constitute the majority of health workers on the frontlines.⁹⁵ The rapid assessment study conducted in Juba found that women represented 72% of illiterate heads of households. This low literacy

rate increases their vulnerability to misinformation and disinformation and may influence their awareness, adoption of safety and prevention measures and ability to access resources (if they are mostly disseminated through text-based media such as banners, posters, SMS, brochures, etc.).

People living in humanitarian emergency contexts such as IDPs and returnees, refugees and host communities were already exposed to numerous fragilities pre-COVID and are particularly vulnerable to the socio-economic impact of COVID. South Sudan has 6 UNMISS-operated PoC sites for IDPs fleeing conflict and fighting in their home villages. Extreme poverty affects 91% of IDPs and 70% of refugees. The country has currently around 1.5 million IDPs,⁹⁶ 300 000 refugees and 2.3 million South Sudanese refugees are in neighbouring countries.⁹⁷ There are close to 562 000 returnees from within South Sudan as well as refugees; 386 000 of them have been identified as people in need (PiN).⁹⁸ Many live in crowded camps that lack safe and adequate WASH facilities; they are unable to practice social distancing and meet minimal hygiene codes which would prevent community spread and contagion. Access to water, sanitation and hygiene services and facilities remains a major problem and is one of the causes of a high number of "IDPs in need" in 35 counties.⁹⁹ As returnees transit through urban areas or seek refuge in various IDP camps, the risk of virus transmission within densely populated areas and transfer to rural areas is high. Additionally, returnees might be going back to areas that have been decimated by violence and potentially lacking access to basic sanitation facilities and health services.

The protection of children and youth is a paramount priority and remains the biggest challenge as they continue to be recruited into armed forces despite the government action plan to end all grave violations against children. While exact numbers are hard to obtain, UNICEF estimates that some 19 000 children were exploited by armed forces and armed groups in South Sudan as of late July 2019. According to Amnesty

⁹² University of Juba (2020), *op. cit.*

⁹³ For example, 33.8% of girls surveyed (compared with 0.2% of boys) responded that after school, their primary activity is cooking for the household. Regarding activities they engage in after school, 10.2% of girls indicated "study" and only 4.4% of girls indicated "play", as opposed to 17.1% of boys who engage in "study" and 12.5% of boys who "play".

⁹⁴ UNDP (2015), *Human Development Reports: Gender Inequality Index*, <http://hdr.undp.org/en/composite/GII>.

⁹⁵ CARE rapid gender assessment.

⁹⁶ UNOCHA (2019), "New research finds 1.5 million internally displaced persons in South Sudan", 10 October, www.unocha.org/story/new-research-finds-15-million-internally-displaced-persons-south-sudan.

⁹⁷ USAID (2020).

⁹⁸ OCHA (2019), *Humanitarian Needs Overview: South Sudan*, 20 November, *op. cit.*

⁹⁹ *Ibid.*

International, only 53 have been released from barracks, bases and cantonment sites as of 7 February 2020.¹⁰⁰ These practices continue to aggravate the burden of mental health disorders (section 3.4) as, pre-COVID, psychosocial support and child protection services were accessible to only 6.5% of at-risk children.¹⁰¹

is the inability of aid workers and/or helpers to reach healthcare facilities if their mobility is restricted. Targeted context-specific measures to prevent the spread, limit the negative socio-economic impacts and protect children and women are crucial to prevent further exacerbation of the humanitarian crisis

Key takeaways

The COVID-19 health and socioeconomic crisis disproportionately affects the most vulnerable groups by:

- IDP, returnee and refugee populations are especially vulnerable given existing highly interrelated needs across various sectors, e.g. unequal access to health services and education; densely populated camps without proper WASH facilities and hand-washing stations; high risk of infection.
- School closures reinforce harmful gender roles at home and the gender gap in education between boys and girls. The economic crisis and loss of livelihoods and increased food insecurity puts girls at a higher risk of child marriage.
- Children's rights are further deteriorating with an upsurge in already extremely elevated rates of forced child labor and child marriage. The incidence of recruitment of children into armed forces, boys taken as soldiers and girls as wives, is dramatic.

Recommendations

- COVID-19 prevention measures need to take into account the vulnerabilities of these groups: women, children and IDPs.
- Targeted measures need to be devised to alleviate the socio-economic impacts of COVID on these groups.
- Safeguarding them from hunger, setting up WASH facilities, maintaining the provision of education and essential medical and psychosocial support services are the key intervention priorities.
- Protection of children and youth from recruitment into armed forces and violence should be of paramount priority.

It is crucial to take into account these vulnerabilities when designing and implementing COVID-19 mitigation policies and measures. These communities are extremely vulnerable both to the direct risks of COVID spread and mortality as well as the deprivation, morbidity and mortality stemming from socio-economic impacts of the virus. Measures such as curfews, restriction of mobility and strict lockdowns need to be evaluated against their potential negative consequences on vulnerable groups of population. For example, the supply of water tanks to the population often depends on informal workers selling the water and who could be grounded by the lockdown measures.¹⁰² Another example of a negative consequence

3.7. Sexual and gender-based violence

Sexual and gender-based violence (SGBV) in South Sudan is widespread, normalised and nearing epidemic levels.¹⁰³ While a significant decrease has been achieved since the signing of the peace deal in 2018, a staggering 65% of women and girls in South Sudan still report having experienced physical and/or sexual violence in their lifetimes. Up to 33% of women have suffered sexual violence by a non-partner¹⁰⁴ and 51%¹⁰⁵ of women report having been a victim of Intimate Partner Violence (IPV).¹⁰⁶ This exposes their extreme vulnerability during lockdown as they are confined in close quarters with the abuser.

¹⁰⁰Amnesty International (2020), "Amnesty International calls on the UN Security Council to renew its arms embargo on South Sudan, citing new evidence of violations on the ground", Amnesty International, 30 April, www.amnesty.org/en/latest/news/2020/04/south-sudan-evidence-of-violations-and-illlicit-concealment-of-arms-must-spur-un-to-renew-arms-embargo/.

¹⁰¹OCHA (2019), *Humanitarian Needs Overview: South Sudan*, 20 November, *op. cit.*

¹⁰²University of Juba (2020), *op. cit.*

¹⁰³UNICEF (2019), *Gender-Based Violence*, Briefing Note, South Sudan Country Office, December, www.unicef.org/southsudan/reports/gender-based-violence-briefing-note.

¹⁰⁴Ellsberg, Mary et al. (2017), *No Safe Place: A Lifetime of Violence for Conflict-Affected Women and Girls in South Sudan*, Summary Report 2017, The Global Women's Institute, GWU, Care and IRC, 29 November, www.rescue.org/press-release/levels-violence-against-women-and-girls-south-sudan-among-highest-world-reveals.

¹⁰⁵UNICEF, December 2019, *op. cit.*

¹⁰⁶IPV is the most commonly reported form of gender-based violence, meaning that women and girls suffer from violence from members of their households.

Many fear that violence against women and girls (VAWG) may increase due to the stress imposed by the pandemic, its socioeconomic impacts and the restriction measures put in place.

Restrictions on the movement of aid workers and a potential reallocation of resources would significantly reduce the already scarce medical, psychosocial and judicial support resources available to SGBV survivors.¹⁰⁷

There have already been reports of diminished support due to restrictions on the movements of aid workers.¹⁰⁸

Access to justice and awareness about support systems remain inadequate: close to half of women do not report violence or seek medical or psychological help, due to related stigma, limited available support services,

mistrust in the rule of law (as often, customary law and traditional judicial structures take over SGBV cases),¹⁰⁹ or unawareness of their rights and existing measures against such violence.¹¹⁰

Many, especially in IDP sites and poorer communities, fear a spike in child marriages if the economic crisis is protracted. Bride prices are often employed as a shock-coping mechanism to deal with financial hardships. According to UNICEF report, South Sudan has the seventh highest prevalence rate of child marriage in the world, with 52% of girls being married off before the age of 18 and 9% being married off before turning 15.¹¹¹ The risk of child marriage is a constant threat to the well-being and protection of young girls.

Key takeaways

- SGBV is an ongoing silent epidemic in South Sudan, and the lockdown measures increase the vulnerability of women.
- Violence against women and girls (VAWG) is likely to increase due to the stress imposed by the pandemic, its socioeconomic impacts and the restriction measures put in place.
- Restrictions on movement of aid workers and potential shifting of resources would significantly reduce the already scarce medical, psychosocial and judicial support resources available to SGBV survivors.

Recommendations

1. It is imperative to ensure that SGBV response services remain open and accessible.
2. SGBV services ought to be expanded to include shelters, health and psychosocial support and adapted to the specific needs and constraints of the at-risk populations.
3. Given the epidemic levels of SGBV, gender and SGBV considerations need to be a priority in the COVID-19 national response plan, specific sectoral responses as well as any post-COVID recovery strategy.
4. Women and other vulnerable groups (such as the elderly, PWDs etc.) need to be included in the decision-making processes. The needs of women, girls and other vulnerable groups need to be presented by these groups' representatives at the decision-making circle and involved in consultations for any programme / social protection system design.

¹⁰⁷UNMISS/OHCHR, May 2020. See Footnote 39.

¹⁰⁸Mednick, Sam (2020) "COVID-19 brings abuse and other fears to displaced women in South Sudan", The New Humanitarian, 6 May, www.thenewhumanitarian.org/feature/2020/05/06/coronavirus-south-sudan-women-abuse-gender-violence.

¹⁰⁹Ellsberg, Mary et al. (2017), *op. cit.*

¹¹⁰University of Juba (2020), *op. cit.*

¹¹¹Girls Not Brides (2019), "South Sudan - Child Marriage Around The World. Girls Not Brides." Girls Not Brides, 18 February, www.girlsnotbrides.org/child-marriage/south-sudan/.



4.

Peacebuilding
and state-building: fragile
gains to preserve

4.1. Peacebuilding and statebuilding, pre-COVID

As outlined in the introduction, COVID-19 hit South Sudan during a triple transition in the middle of the peacebuilding and statebuilding processes. The peace and power-sharing agreement signed in 2015 translated into a final agreement on a division of power in 2018. It was embodied in the 86-page Revitalized Agreement on the Resolution of the Conflict in South Sudan (R-ARCSS) and led to the formation of a Revitalized Transitional Government of National Unity (R-TGoNU) on 22 February 2020. Immediate challenges include the unification of the army, agreement on control over states and peace with rebel groups not party to these bargains.

Most scholars attribute the instability that has plagued the country since the war for independence to a fight among elite groups over power and resources. This has led to a system of patronage – a situation made worse by the prospect of diminishing oil reserves – it rewards supporters and excludes opponents, creating grievances. These elites have often waged the ethnic card and regional identities to create allegiances, thereby giving the conflict an ethnic dimension. In sum, South Sudan's fragility is structural and systemic, with an oil-based, undiversified economy, dominated by rent-seeking, ethnic-based factions that are shaping state institutions, as well as rebels in the provinces also seeking loyalty rents. The situation is to some extent compounded by South Sudan's partners, wary of important conflict and corruption issues: most have been shifting their attention to humanitarian support since the 2013 conflict, away from more ambitious and transformative development. Only a few are attempting to engage with state authorities, building on lessons from other fragile states: first, to break the cycle of poverty and conflict, national leadership and key state functions must be strengthened, starting if necessary, with small islands of integrity and efficiency in central ministries. Second, it means working with champions of change in sector ministries and local authorities, involving civil society and private sector actors to ensure tripartite dialogue (government, non-state actors, international partners) as long as the transition period lasts and international partners remain engaged.

4.2. Peacebuilding since COVID-19

What is COVID's impact on both peacebuilding and state-building? Is it accelerating, as hoped for and called for, by a range of leaders, including the UN Secretary General?¹¹² Or slowing down the peace process? Is the rise of violence at local level or COVID-19 itself preventing humanitarian access and disrupting supply chains, especially of food? Is COVID-19 undermining public administration and the rule of law? Will the international response, which is likely to be mostly humanitarian, support or undermine the restoration of trust between former enemies (peacebuilding), and a state that is more capable to carry out its key functions (statebuilding)?

COVID-19 is slowing down implementation of the peace agreement at both Juba and local levels but peace is still a prospect. The formation of a R-TGoNU on 22 February 2020 was a breakthrough. Non-signatories also agreed to the ceasefire, thanks to mediation by the Christian community Sant'Egidio – although it was interrupted by the coronavirus. The SSD leadership has been directly and heavily impacted by COVID and/or underlying health conditions.¹¹³ Limited funding for R-ARCSS implementation is reportedly being diverted to health priorities.¹¹⁴ Several of the R-ARCSS' trust-building measures are delayed: training of the unitary army is interrupted in part; the national conference is delayed and, more generally, the participation of the population in constitution making will be limited for the time being; the monitoring and verification of reports of violations of the permanent ceasefire and transitional security arrangements are limited by COVID-19; governance reforms are de-prioritised. But these measures remain on the table and may start again as the lockdown is lifted.

In short, peace is on the brink and there is urgency to preserve the recent breakthrough, be it through continued diplomatic activity, backed by coronavirus response packages that build cooperation and stability (rather than exacerbate tensions or become a new rent that makes government accountability a distant prospect). The Troika embassies (Norway, UK and USA), the Intergovernmental Authority on Development (IGAD) and Sant'Egidio will need to work together to ensure

¹¹²See: www.un.org/sg/en/content/sg/press-encounter/2020-03-23/transcript-of-the-secretary-generals-virtual-press-encounter-the-appeal-for-global-ceasefire, address to G7+ deputy Secretary General Habib Mayar; World Politics Review, www.worldpoliticsreview.com/articles/28734/making-sure-peace-isn-t-a-casualty-of-COVID-19-in-fragile-states.

¹¹³As of 4 June 2002: First VP Riek Machar; VP James Wani Igga; VP Hussein Abdelbagi; Defence Minister Angelina Teny; Information Minister Michael Makuei; East African Affairs Minister John Luk Jok.

¹¹⁴IGAD interviews with media, June 2020.

that the COVID-19 response takes into account the pre-existing, entrenched peacebuilding challenges.

At the local level, the peace and conflict picture is worse and keeping observers deployed is essential.

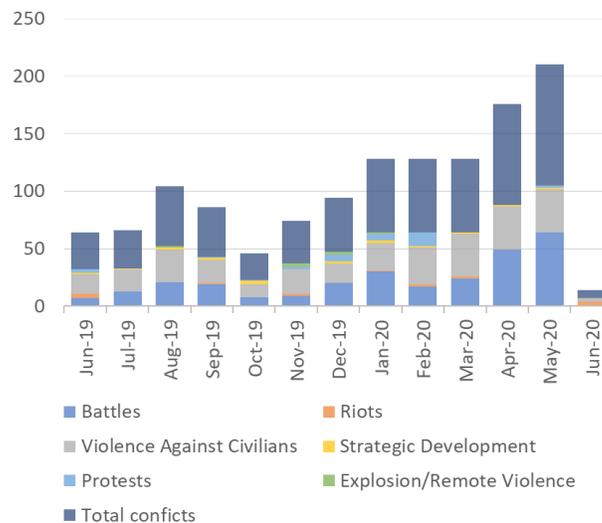
In addition to the current local power vacuum and in addition to power struggles that are part of any peace process, COVID-19 is leading to local violence because sanitary restrictions inevitably lead to both tensions and opportunity-driven grabs (for example land disputes, below); because security forces are in garrison or busy enforcing restrictions (lifted 7 May 2020) and because UN peacekeeper deployments have been delayed. Data on patterns of violence indicate, between 1 January and 10 June 2020:

- A drop in **protests** (from 18 events in Q1 2020 to 2 in Q2 2020) due to the lockdown imposed from 28 April to 7 May. But there were protests after the partial lift, ranging from violent in Juba and peaceful in Bor, for example. The lag in salary payments in both the public and private sectors, shortages in food, fuel and goods and a COVID-related anti-foreigner sentiment are liable to trigger further protests. The likelihood of an

“Arab spring”-like revolution is anyone’s guess (Annex 1, Possible scenarios).

- A drop in **violence against civilians perpetrated by rebel or government forces/militias** (there were 79 casualties in Q2 2020, against 93 in Q1 2020). This is possibly because the cease-fires agreed with SPLM-IO in 2016 and with SSOA, a splinter group of the National Salvation Front, in 2018 still hold (although obviously only in part); possibly one of the results of the 22 February breakthrough, when the R-TGoNU was formed.
- But a rise in April 2020 in **battles between armed groups** (rebel groups vs. government forces)¹¹⁵ spread across all of the country’s ten states. Amnesty International reports violations of the UN arms embargo (extended in June 2020) since the beginning of 2020.¹¹⁶ An increase in violence on the ground often precedes the conclusion of state allocation (a yet unresolved issue) and such peace-related deal making. It is clear that peace/conflict dynamics at local and at Juba levels are related, as far as the National Salvation Front (NAS) is concerned.¹¹⁷ Besides the NAS

Figure 20. Monthly occurrence of conflict and related fatalities in South Sudan



Source: ACLED.

¹¹⁵There were mainly clashes with the NAS. The International Crisis Group’s “CrisisWatch” of April 2020 indicates that i) the truce brokered in January 2020 between government and non-signatory armed groups broke down in Central Equatoria region after NAS attacked Machar’s SPLA-IO forces on 9 April; ii) SPLA-IO and South Sudan People’s Defense Forces reportedly clashed with NAS on 26 April.

¹¹⁶See www.amnesty.org/en/latest/news/2020/04/south-sudan-evidence-of-violations-and-illicit-concealment-of-arms-must-spur-un-to-renew-arms-embargo/.

¹¹⁷The NAS is not a party to the R-ARCSS nor, consequently, to the state allocation between the ruling party and SPLM-IO. The International Crisis Group’s “CrisisWatch” of April 2020 indicates that i) the truce brokered in January 2020 between government and non-signatory armed groups broke down in Central Equatoria region after NAS attacked Machar’s SPLA-IO forces on 9 April; ii) SPLA-IO and South Sudan People’s Defense Forces reportedly clashed with NAS on 26 April.

splinter force, at least one new armed rebel group has been created in recent weeks.¹¹⁸

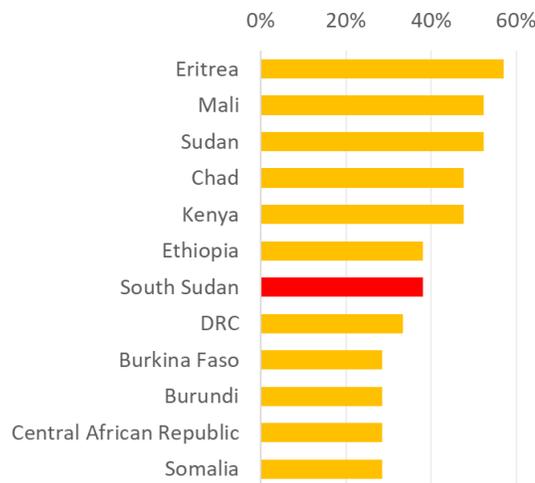
- An increase in **intercommunal violence**,¹¹⁹ for example between Lou Nuer and Murle groups, between ethnic Dinka and nomadic Misseriya herders, and most dramatically in Jonglei. This is related to Juba politics as it reflects the power vacuum at local level. One can imagine that competition over resources will increase the frequency and scale of clashes in areas suffering from the highest levels of food insecurity such as Greater Upper Nile, Greater Bahr el Ghazal, and within PoC camps. The United Nations Mission in South Sudan (UNMISS) notes 415 incidents of intercommunal violence over January-May 2020, up from 129 in January-May 2018, and an increasing presence of fighters in uniform, indicating that actors in intercommunal violence are increasingly structured and linked to organised armed groups.
- A rise in **tensions along borders** related to illegal crossings (there was a fatal exchange of gunfire on the SSD-Uganda border on 1 June 2020) and cattle raids by South Sudanese rustlers in Agago district (Uganda).

Since January 2020 a rise in violence has been afflicting South Sudan, the slow progress in the peace process being the main factor and COVID-19 a contributing factor.

In addition to the power vacuum and power struggles that are part of any peace process and the fact that, for example, in Jonglei “the vacuum created by the lack of governance has exacerbated cycles of intercommunal violence”,¹²⁰

The rise in violence is a direct determinant of access to food and humanitarian aid. OCHA has measured humanitarian access impacted by COVID-19 (Figure 20). The violence itself is restraining humanitarian access, as is violence against humanitarian workers.¹²¹ In May 2020, intercommunal fighting in Jonglei killed or wounded an estimated three hundred people (government estimate), including three Médecins Sans Frontières (MSF) workers caught in crossfire in Pieri. In Jonglei, two aid workers were also ambushed and killed in March 2020. Both MSF and ICRC had to suspend their activities in the Pibor administrative area. Humanitarian workers had also been caught in crossfire prior to COVID-19 (e.g. Yei River State, 2019).

Figure 21. Humanitarian access constraints due to COVID-19 identified by OCHA (percentages)



Source: OCHA, (medium?) 2020.

¹¹⁸See www.voanews.com/africa/south-sudan-focus/south-sudan-businessman-takes-arms

¹¹⁹ACLED database, accessed 19 May 2020, <https://acleddata.com/dashboard>; OCHA (2020), *January to March 2020 - Monitoring Review: South Sudan*, Humanitarian Programme Cycle 2020, May; Francesca Mold (2020), “COVID-19 and conflict threaten health system and ceasefire in South Sudan”, UNMISS, 23 June, <https://unmiss.unmissions.org/COVID-19-and-conflict-threaten-health-system-and-ceasefire-south-sudan>.

¹²⁰The Troika calls on the Government of South Sudan to Appoint Governors (2020), media note, 9 June, <https://www.state.gov/the-troika-calls-on-the-government-of-south-sudan-to-appoint-governors/#:~:text=In%20Jonglei%2C%20the%20vacuum%20created,exacerbated%20cycles%20of%20intercommunal%20violence.&text=Any%20further%20delay%20creates%20uncertainty,threatens%20the%20hard%2Dwon%20peace.>

¹²¹In farmer-herder conflicts in Nigeria, there were reports of humanitarian workers being chased by herders.

Experience with COVID elsewhere (e.g. Côte d'Ivoire) and with Ebola (West and Central Africa) show that populations can sometimes attack aid workers, seen as propagating the virus. The fact that the first four COVID cases in South Sudan were UN staff members (prompting anti-foreigner hate speech and government forces surrounding the UN compounds in Juba and Malakal) doubtless compounded the problem and hampered aid delivery. Kidnapping of foreigners may also become a growing problem as legitimate revenue streams dry up and criminality rises.

There is also the specific issue of IDP and refugee access to humanitarian aid. COVID cases inside camps have led the UN to encourage the return of over 19 000 camp dwellers to their communities, but security and humanitarian conditions outside the camps are equally daunting. Borders between South Sudan and neighbouring Uganda and Kenya are closed, leaving hundreds of would-be returnees and refugees in limbo.

Finally, besides COVID contributing to violence, violence itself is leading to COVID cases, creating a vicious circle. It has brought about further stresses on limited health capacities; created additional displacement, sending IDPs on roads and to camps in difficult health and sanitary conditions; and restricted humanitarian access, therefore leaving vulnerable populations even more vulnerable to diseases, including COVID. Together, COVID-19 and violence lead to a dramatic increase in "COVID-20", the nickname in South Sudan for an old and chronic killer, hunger.¹²²

4.3. Statebuilding since COVID-19

Besides slowing down the peace process, COVID-19 may chip away at already sparse and fragile statebuilding results. These must be preserved, if reforms are to have a chance to make a dent in the rent and patronage system and (relatedly) South Sudan's state of permanent humanitarian emergency. Government performance since independence in 2011 is not poor everywhere: there are improvements (albeit from a low

base, and concentrated in Juba) in access to water, education; child and maternal mortality was reduced, some infrastructure was built (Table 1) and, as mentioned above, domestic revenue mobilisation had improved in recent years.

How the international community will help South Sudan weather the COVID crisis (especially its health, food and peace process dimensions) will likely impact public expenditure management. Experience in post-conflict societies show that big cash injections over a short period of time after a peace agreement is signed or implemented leads to corruption¹²³ and elite capture, in the absence of sufficient absorptive capacity. South Sudan is such a post-conflict society and one of the most fragile states in the world (Figure 21). Aid would have a negative impact if it further shocks the system and a more positive impact if transparent and predictable over five years or more.

Justice and security are key state functions and are under further threat by COVID-19. Through the exacerbated economic pressures brought on by COVID, the disrupted supply of some essential foods and goods, the lack of presence, internal controls and professionalism of security forces, COVID is leading to an increase in crime, human rights abuse and civil claims linked to inheritance/family rights, land and labour disputes. A notable incident is the 3 June 2020 land dispute in Juba that led to unwarranted military intervention and five casualties, an incident that prompted a 1 000-people protest, followed by one killing, several injuries and arrests.¹²⁴ Killings and other harm resulting from use of excessive and lethal force against peaceful protestors was already an issue pre-COVID. There are also instances of access to information and freedom of expression being curtailed¹²⁵ as well as other human rights violations such as child exploitation and child marriage worsening, often undetected, since COVID. IDPs' rights are a particular concern. UNMISS records 73% more human rights incidents in Q1 2020 compared to Q1 2019, which represents about 275 incidents involving 1 767 victims.¹²⁶

¹²²The UN declared famine in parts in South Sudan in 2017.

¹²³Aggregate indicators on corruption in the public sector (V-Dem; EIU; WEF) and on corruption in government branches (V-Dem), respectively, show degradation since 2013. Corruption in the private sector (World Bank, WEF) has neither improved nor deteriorated. South Sudan has been ranked among countries with the highest perception of corruption (Transparency International).

¹²⁴Human Rights Watch, 9 June 2020, "South Sudan: Soldiers Kill Civilians in Land Dispute", www.hrw.org/news/2020/06/09/south-sudan-soldiers-kill-civilians-land-dispute.

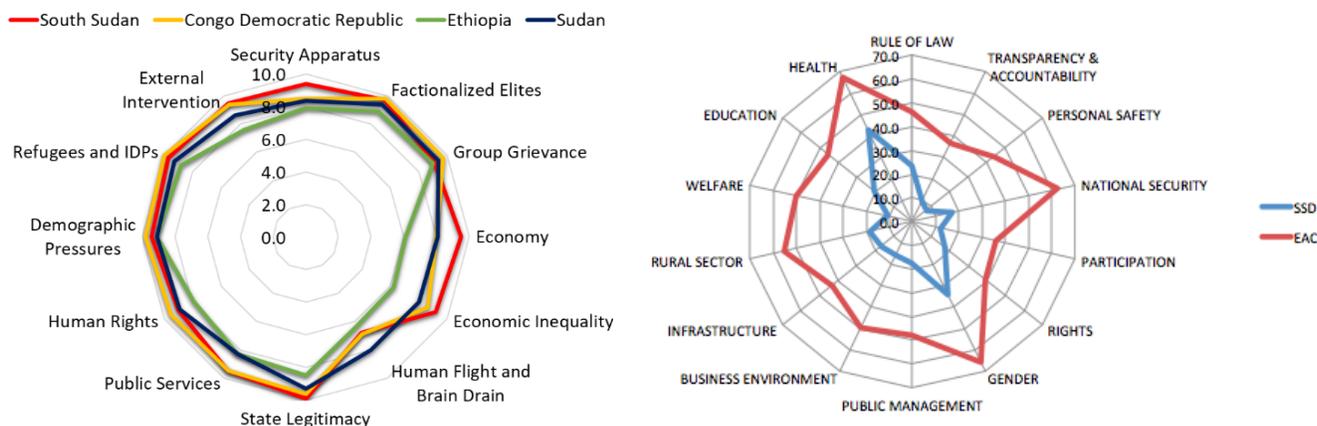
¹²⁵University of Juba, Interviews, 11 June 2020; EU High Representative declarations, e.g. https://eeas.europa.eu/delegations/south-sudan/80711/south-sudan-declaration-high-representative-behalf-european-union-delays-implementation-peace_en.

¹²⁶See www.ohchr.org/EN/Countries/AfricaRegion/Pages/SSIndex.aspx.

Access to justice was already limited pre-COVID: it started to deteriorate as of independence in 2011.¹²⁷ Access to formal justice both in Juba and at state level further constricted between March and April.¹²⁸ Advocates for the reduction in justice services (to reduce the risk of contagion) must also consider the health and social risks of a growing backlog in terms of crowded courts, prisons and police stations. Access to traditional justice (tribal and faith-based) may, or may not, be impacted by COVID, but there are instances of traditional justice having resolved

(both in Juba and in the states) and component groups. For most South Sudan observers, pre-22 February 2020, the country had reached a point where ethnic groups could not rely on the state to protect them and therefore had to take responsibility for their own security and mobilise.¹³³ The continued deployment of UN, IGAD and local CSO observers is crucial as - South Sudan no longer being in the international spotlight - such mobilisation would further weaken the rule of law and impunity as well as the networks of public servants, scholars and human

Figure 21. (Left panel) Fragile states index 2020; (Right panel) Governance indicators



Sources: The Fund for Peace (FFP) 2020; the Ibrahim Index of African Governance, South Sudan and East African Community, accessed 7 June 2020.

cases while courts were at a standstill.¹²⁹ As elsewhere, COVID is having the unexpected but welcome effect of de-congesting overcrowded prisons and detention centres: in South Sudan, 1 400 inmates were released to reduce prison overcrowding.¹³⁰ This included 85 minors¹³¹ and fast-tracking of juvenile cases is under way.¹³²

Regarding security, the training of the unitary army has been put on hold partially, but is an important foundation of any restoration of trust across South Sudan's leaders

rights defenders who try to uphold such standards (many of which are translated into South Sudan law).

The transitional government (TGoNU) showed a united front and its response to COVID was swift. The High-Level Task Force set up to respond to the pandemic, chaired by the first vice-president and former principal opposition leader Dr. Riek Machar, worked with the WHO and represented a credible and united response to the crisis but was dissolved on 16 May after criticism that

¹²⁷Varieties of Democracy (V-Dem) database (accessed 19 May 2020), www.v-dem.net or the Ibrahim Index of African Governance database (accessed 19 May 2020), <https://mo.ibrahim.foundation/iia>.

¹²⁸University of Juba (2020), *COVID-19 As a Development Challenge: An Overview of the Impacts, Options and Policy Recommendations for South Sudan*, April (FYI: NOT FOUND ON LINE); prisons currently hold over 120% of their authorised capacity, Human Rights Watch (2020), "COVID-19 threatens South Sudan's At-Risk Populations", 24 March, www.hrw.org/news/2020/03/24/COVID-19-threatens-south-sudans-risk-populations.

¹²⁹As a point of reference: customary chiefs in Liberia at the height of the Ebola crisis stepped in when formal institutions failed, and increased in activity and legitimacy.

¹³⁰International Crisis Group (2020), *Crisis Watch*, April, www.crisisgroup.org/crisiswatch.

¹³¹UNICEF (2020), UNICEF welcomes release of 85 children from detention in South Sudan, press release, 7 May, www.unicef.org/press-releases/unicef-welcomes-release-85-children-detention-south-sudan.

¹³²UNMISS (2020), "UNMISS supports national efforts to resolve juvenile court cases amidst COVID-19", 21 May, <https://unmiss.unmissions.org/unmiss-supports-national-efforts-resolve-juvenile-court-cases-amidst-COVID-19>

¹³³Interview, University of Juba School of Public Service professor, 18 May 2020.

it was politicised. Coincidentally, all 15 members of the Task Force tested positive during the week of 18 May. The lockdown was progressively imposed in March and was partially lifted on 7 May. It had been criticised by some, who found that the COVID narrative was being used to control the population and divide the opposition. It was also accused of capturing a new, COVID-related rent, on top of limiting citizen participation in peacebuilding and constitution making as envisaged in the R-ARCSS and slowing down justice and security.¹³⁴ Government accountability for its COVID response is being scrutinised: there were regular communications by the National Committee on COVID-19 (former High-Level Task Force) prior to recent changes, but stakeholders find a lack of transparency when it comes to resources available, allocated and spent.¹³⁵

In short, COVID is compounding multidimensional fragilities and particularly pre-existing peacebuilding, statebuilding and humanitarian challenges. In addition, most relationships between SSD fragilities are mutually reinforcing (Figure 21). Whether or not COVID ends up infecting many, its impact is already clear, present and growing. Options for the donor response are limited, but key principles for action, based on the experience in supporting South Sudan and other fragile states, could include:

- **Take into account the pre-existing peacebuilding, statebuilding and humanitarian challenges** so as to ensure that the COVID response does not create a wedge that further divides, but rather builds on the government-SPLM-IO's united front on COVID so far to promote transparency (which up to now has been lacking) and inclusion in the use of COVID resources. COVID may come and go but there are pre-existing, entrenched challenges. The UN calls for "more deliberate, concerted and predictable efforts, conducted jointly by humanitarian, development and peacebuilding actors" (the humanitarian-peace-development nexus). This pitch is particularly relevant in South Sudan.¹³⁶
- **Do not further undermine fragile statebuilding gains:** where possible - and while taking into account cases

and risks of human rights violations and corruption - involve local authorities (along with traditional leaders) and sector ministries in planning and implementing the response. Where there are no counterparts to work with, chose others. There are champions of change within government. Support their capacity and legitimacy.

- **Promote non-discrimination:** an OHCHR report published days before the formation of the transitional government on 22 February 2020 warns "deliberate starvation is clearly occurring along ethnic and political lines".¹³⁷ Donors should check that the COVID response is not biased or perceived as biased towards either side of such lines, and instead brings together communities to take part in the COVID response.

¹³⁴See, for example, Craze, Joshua and Pendle, Naomi (2020), "The Dangers of COVID-20: South Sudan's Political Dilemma", African Arguments, 14 May, <https://africanarguments.org/2020/05/14/the-dangers-of-COVID-20-south-sudans-political-dilemma/>; Ariik Kuol Ariik, "Why Government Should Prioritize R-ARCSS and Civilian Disarmament over COVID-19 in South Sudan", Paanluel Wel (blog), 13 May 2020, <https://paanluelwel.com/2020/05/13/why-the-government-should-prioritize-r-arcss-and-disarmament-of-civilians-over-COVID-19-in-south-sudan/>.

¹³⁵Interview, University of Juba, 11 June 2020; Hilary Mossberg (2020), "Targeted Network Sanctions in Africa and the COVID-19 Pandemic", The Sentry, 22 April, https://cdn.thesentry.org/wp-content/uploads/2020/04/TargetedNetworkSanctionsCovid_TheSentry_April2020.pdf.

¹³⁶See: www.undp.org/content/undp/en/home/news-centre/speeches/2019/development-and-hdp-nexus-addressing-forced-displacement.html.

¹³⁷See: www.ohchr.org/Documents/HRBodies/HRCouncil/CoHRSouthSudan/A_HRC_43_56.docx.

Key takeaways

- Pre-COVID, the world's youngest nation bears the scars of 42 years of fighting for independence then civil war. COVID hit (April 2020) just after there was a breakthrough in the peace process (February 2020).
- COVID-19 is slowing down this peace process but peace is still possible.
- At the local level, there has been a rise in violence since January 2020. The slow progress in the peace process is the main culprit and COVID a contributing factor. The rise in violence is a direct determinant of access to food and humanitarian aid.
- Besides slowing down the peace process, COVID-19 may chip away at already fragile statebuilding results, which must be preserved if reforms are to have a chance to make a dent in the rent and patronage system and (relatedly) South Sudan's state of persistent humanitarian emergency. In particular, public financial management, justice and security are key state functions and are under further threat by COVID.

Recommendations

1. The UN system, Troika, IGAD and Sant'Egidio should work together to preserve the February 2020 breakthrough. Keeping observers deployed is essential.
2. Ensure predictable funding over five years or more: avoid aid shocks (corruption, inflation, rent-seeking mentality).
3. An appropriate balance must be sought between the short-term humanitarian needs and the long-term sustainable development of the country: stay engaged on development issues, using successfully tested safeguards to ringfence development funding.
4. Do not undermine South Sudanese leadership, where it exists (national or local, government or CSO/private sector).
 - Where government is not willing or able to fulfill its key functions and deliver basic services, look for entry points and champions of change to engage with, and support local leadership and capacity (community leaders, diasporas who returned and the private sector are insufficiently tapped).
 - Communities should be empowered to drive development by adopting a bottom-up approach.
5. Promote transparency of COVID allocations.
6. Promote non-discrimination, bridges across communities (e.g. joint food for work, benefits for both host and IDP communities; small infrastructure such as markets, mills or river barges).



5.

Which way(s) forward?

Recommendations for an
inclusive, participatory and
unifying COVID-19 response

COVID is compounding pre-existing peacebuilding, statebuilding, humanitarian and developmental challenges, and most relationships between the fragilities in South Sudan are mutually reinforcing. The COVID-19 response needs to ensure that it is conflict-sensitive (i.e. takes into account the pre-existing peacebuilding and statebuilding challenges), inclusive of the most marginalised and vulnerable groups, trust-building (transparent and based on human rights), participatory (engages the community) and unifying (creates partnerships across the humanitarian-development-peace nexus).

In unrolling the COVID response, international coordination is central to ensure that:

- **The impact of the COVID response on the peacebuilding process is considered:** in line with the humanitarian-development-peace approach advocated by the UN, the COVID response could improve relations among South Sudanese leaders. It could also create affinities between citizens and the state and among communities (because of the need to go well beyond a simple ethnic group lens to include intra-group tensions). Alternatively, it could add fuel to these fires. Who are the likely winners and losers from the COVID response? What are possible COVID-19 scenarios and how do they impact on peacebuilding? What are possible peacebuilding scenarios and how do they impact on COVID? Particular attention will have to be paid to disenfranchised youth, particularly young males, often underemployed, often exposed to violence as victims or perpetrators. Gender should not only be understood as women’s empowerment but also the access of young men to social and economic opportunities.

In South Sudan how can the COVID response help support the R-ARCSS? The global examples below could provide a pathway:

- In Aceh, a province of Indonesia marred by decades of civil war and hit by the 2006 tsunami, post-tsunami aid was programmed and delivered in ways that support the restoration of trust among the warring parties.
- Other post-conflict or newly-independent countries with revenues from natural resources, such as Timor-Leste, have been “buying peace”, i.e. using the natural resource windfall to appease potential (or actual) spoilers, such as ex-combatants.

- **The impact of the COVID response on the statebuilding process is considered:** COVID money must not simply become a rent additional to the oil and forestry rents. Transparency on how it will be used will be vital. Hotlines must be in place to manage risks of corruption and work in tandem with existing safeguards. National ownership (by central and local authorities and by civil society at large) is of central importance, given that this country is still new, with limited institutional capacity, has been flooded with technical assistance (at least in its first years, up to 2016) and aid is increasingly humanitarian, i.e. not programmable by GoSS. Fragile results in better budgeting and PFM need to be preserved.

South Sudan’s leadership (national and local), the international donor community and civil society must form a united front working towards the shared objectives of responding to the urgent humanitarian needs, but also:

- **An appropriate balance must be sought between short-term humanitarian needs and the long-term sustainable development of the country.** Humanitarian needs corresponding to \$1.3 billion will have to be funded by external financing in the **short term** given the government’s tight fiscal space. International actors must however leverage this as a window of opportunity to set up the foundations for a **transformative** social system. The responding measures related to health, social protection and education must be designed in a way that serves as a platform for further development post-COVID. This should, as far as possible, be implemented with the collaboration of the government to build domestic institutional capacities. Such a system can then work as a mechanism to foster human development; this can ensure a more sustained graduation out of widespread poverty in the long term.
- Given the picture of aid before COVID,¹³⁸ most of it will likely be in non-programmable, humanitarian aid. **A developmental and conflict-sensitive approach** should underpin the massive humanitarian assistance being provided in order to progressively reduce, after the probable peak to come, the humanitarian caseload. Water and energy infrastructure, for example, are key to promoting resilience of people at the bottom of the pyramid and to keep businesses and key public offices operating. Although no international

¹³⁸ 71% of aid was humanitarian in 2017-2018 (OECD-DAC database, accessed 2 May 2020).

partner has considered budget support (given levels of corruption and that oil and forestry are already a windfall that is not well managed), even pre-COVID several agencies successfully tested **safeguards to ringfence their development funding** (use of separate accounts and parallel implementation units within international organisations, transparent recruitment of staff).

- While the situation seems dire given the fragile state of the health system and the numerous negative impacts on development gains, this **crisis presents an unprecedented opportunity to utilise existing and new channels of donor funding and technical and implementation assistance to create the capacity and set the foundation for a functioning health system.** As the example of the Ebola epidemic has shown and despite the challenging humanitarian context, South Sudan was able to make significant progress in Ebola preparedness by putting in place systems and plans, including early warning and disease surveillance systems, protocols, equipment supplies and facilities that were quickly repurposed and adapted to the COVID-19 response. The measures adopted by the government to counter the negative impacts of the current crisis should prioritise building long-term capacity in the health system and ensuring the inclusion of the most vulnerable groups.
- **Countering the harmful effects of the COVID-19 crisis on the instances and rates of VAWG and SGBV needs to take a central role and be prioritised in the GoSS' COVID-19 national response plan, specific sectoral responses as well as any post COVID-19 recovery strategy.** In coordination with the numerous development partners on the ground providing financial, medical, psychosocial and judicial support to women, children, SGBV survivors and other most vulnerable groups, a national gender and SGBV reduction strategy should put women and other vulnerable groups at the heart of the national decision-making processes. The needs of women, girls and other vulnerable groups need to be presented by these groups' representatives at the decision-making circle and involved in consultations for any programme / social protection system design.
- Where government is not willing or able to fulfil its key functions and deliver basic services, **international partners have been looking for entry points and champions of change to engage with** and help build (or rebuild) local leadership and capacity. In some countries, it starts with improving sector coordination,

for example in health or education, then involving the relevant sector ministry, then developing public policies and implementing them together, until finally the state is firmly in the lead. In other countries, when engaging with central government is not possible, international partners work with local authorities ("bottom-up"). In yet other countries, it is central ministries, notably Finance and Planning, that are prioritised and islands of efficiency and integrity are built within these institutions. In South Sudan, such islands of efficiency and integrity have been built (finance, water). Gains might be fragile and constantly under threat, but they are investments worth preserving. In the interest of not undermining the already weak capacity of government institutions and preserving hard-won results in statebuilding, it would be wise to involve central and/or local authorities, align with their plans and locate project implementation units within government – rather than explore direct service delivery, even if life-saving.

- **Reductions in the education budget must be reversed.** Investment in education (alongside health) is vital to capitalise on the demographic dividend and lay the foundations for human capital development. This is much needed to foster sustainable development in the country and provide the capacities and knowledge to achieve this.
- **Further mitigation measures must be weighed with care and ensure the protection of human rights.** The large proportion of households engaged in precarious employment are at high risk of falling deeper into poverty and food insecurity if their sole source of income is restricted. A fine balance must be struck between livelihoods and public health. All mitigation and lockdown measures in particular need to be designed through a gender lens to ensure that girls and women, other vulnerable groups such as youth, IDPs, the elderly, immunocompromised and the disabled are able to access protection and support services.

Engagement and empowerment of communities to lead the collective COVID-19 response and action is a must for long-term development:

- **South Sudan's institutional capacities are weak, but individuals' capacities are probably under estimated and under exploited.** The returning diaspora includes highly-trained professionals with both the education and professional experience needed to contribute to damage control and recovery.
- **Communities should be empowered to drive development by adopting a bottom-up approach.** The

TGoNU and international actors should involve local communities and community leaders in both the fight against COVID-19 and the long-term development of the country. This is especially true in fragile contexts like South Sudan where there exists a governance/institutional vacuum and a generalised lack of trust in the government. Communities can be financed

and provided information/knowledge to internalise awareness of the risks and preventive measures of COVID-19. This inclusive approach can then be harnessed for future collaboration between local communities, the state and international actors in rebuilding South Sudan.

Box 3. A glance at the COVID-related humanitarian-development-peace assistance in South Sudan

Most development assistance, in recent years, has been directed towards humanitarian interventions. Japan, the African Development Bank and UNDP are the main donor outliers, providing sizable amounts of development assistance. They support key state functions (in the case of the African Development Bank and UNDP) and infrastructure (in the case of Japan and the African Development Bank).

In response to the COVID crisis, most international partners are considering providing health, WASH and IDP/refugee assistance. While modalities are not yet defined, most seem to take the form of humanitarian aid. Little is developmental or focused on peacebuilding and statebuilding:

- USAID: humanitarian assistance, especially health, water, sanitation and hygiene programmes, refugees, IDPs and their host communities.¹
- EU: the Council of the EU adopted conclusions on 30 April 2020 that stress EU support to both the peace process (issues of cessation of hostilities; demobilisation of ex-combatants; arms embargo, elections and human rights violations) and the COVID response. Besides ongoing DG DEVCO and ECHO relief, an additional EU€5 million is provided through a geographic financial envelope (target unknown). The EU Emergency Trust Fund for Africa is topping up Health Pool Funds (€4 million).
- UK: GB£4 million for COVID preparedness, and statement re. Abyei.²
- World Bank: total COVID directed funding of \$47.6 million (\$7.6 million for maintaining essential health services and \$40 million for expanding access to safety nets).³

¹ <https://reliefweb.int/report/world/update-united-states-continuing-lead-humanitarian-and-health-assistance-response-0>

² www.gov.uk/government/speeches/the-governments-of-sudan-and-south-sudan-must-act-constructively

³ <https://www.worldbank.org/en/news/press-release/2020/04/09/south-sudan-world-bank-provides-76-million-in-support-of-coronavirus-emergency-response>; <https://www.worldbank.org/en/news/press-release/2020/04/28/south-sudan-to-benefit-from-world-bank-support-for-social-safety-net>.



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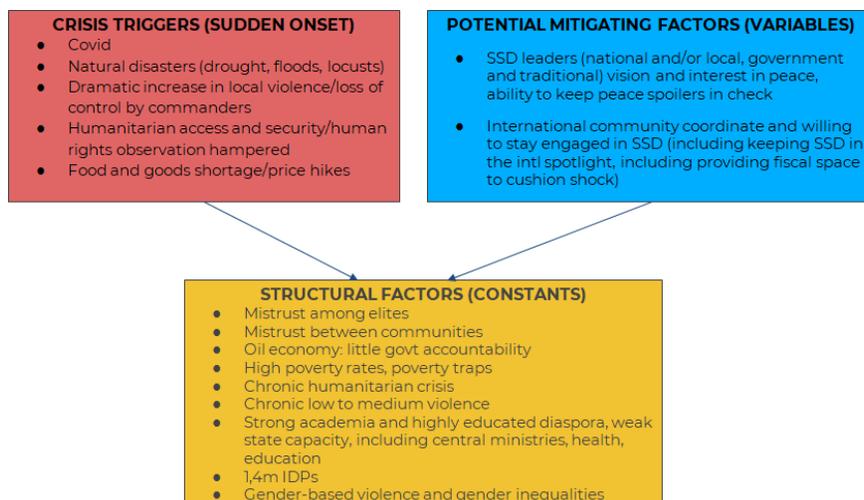


7.

Annexes

7.1. Annex 1. Possible scenarios

The aim of prospective analysis is not to predict the future but to help build it by thinking through possible scenarios. The aim of this annex, therefore, is to identify possible scenarios rather than restrict ourselves to the most probable scenarios. Such prospective analysis is built on attempts to identify key structural factors (constants) and key triggers impacting on these structural factors, negatively (“crisis triggers”) or positively (“mitigating factors”).



Main constants are as follows: tense and often violent relations among elites, who have often waged the ethnic card/regional identities to mobilise supporters and capture rents from oil and forestry; a legacy of violence and lack of inter-group trust; a chronically dire humanitarian situation; a rent-based economy with little diversification, leading to economic fragility and limited government accountability; weak state functions; low investment in human capital development.

Main crisis triggers (sudden-onset events, natural or man-made) include COVID but also natural disasters such as drought, floods and locusts.

Potential mitigating factors (variable rather than constant) include: a SSD leadership (national and local) that has the vision and interest in maintaining peace and the ability to keep spoilers in check; an international community that is influential and committed to a timely and effective humanitarian response but also to keeping SSD leaders at the negotiation table.

Based on these constants, triggers and potentially mitigating factors, and as is customary in prospective analysis, possible medium-term scenarios (2020-2025)

include a *status quo* scenario (not much change from the country’s trajectory since independence); a positive scenario that breaks from this trajectory, thanks to the clear vision and decisive action of key actors (and a favourable conjunction of other, often unpredictable factors); and a negative scenario that also breaks from the country’s trajectory so far, whereby South Sudan is embroiled in a perfect storm of health, hunger, humanitarian and security crises.

1. Status quo: DAMAGE CONTROLLED

In spite of an early COVID response by both the South Sudan leadership and its international partners, COVID starts a chain reaction that slows down the peace process, brings key state functions to a standstill and deepens the humanitarian crisis. The momentum for peace is broken. Discussions on state allocations reach a dead end. The unitary force in Juba was meant to be a trust-building measure but ends up creating more mistrust. Even if violence levels are lower than during the civil war, instability in Abyei and medium-level intercommunal violence continue. Civil rights are curtailed at times, but South Sudan remains in the international spotlight and government and security forces are reminded of the international standards that South Sudan has adhered to, especially by IGAD and Sant’Egidio. The economy remains oil-based and vulnerable to price fluctuations - and therefore world events. A food, fuel and financial crisis is raging, worse than in 2008. The international response is primarily humanitarian and is delivered through INGOs and UN agencies, working through local CSOs and local communities. Local chiefs, especially traditional and the state representatives that remain operational work together to organise communities effectively. Hunger is a

constant threat but is contained thanks to the preservation of humanitarian access and the recourse to primarily local CSOs. COVID cases and casualties are limited thanks to a new, turn-key approach to hospitals and treatment centers. IDPs leave PoCs and resettle in their home communities, or in other host communities, who are not so resentful given that aid to returnees target not only the returnees but also their communities of return.

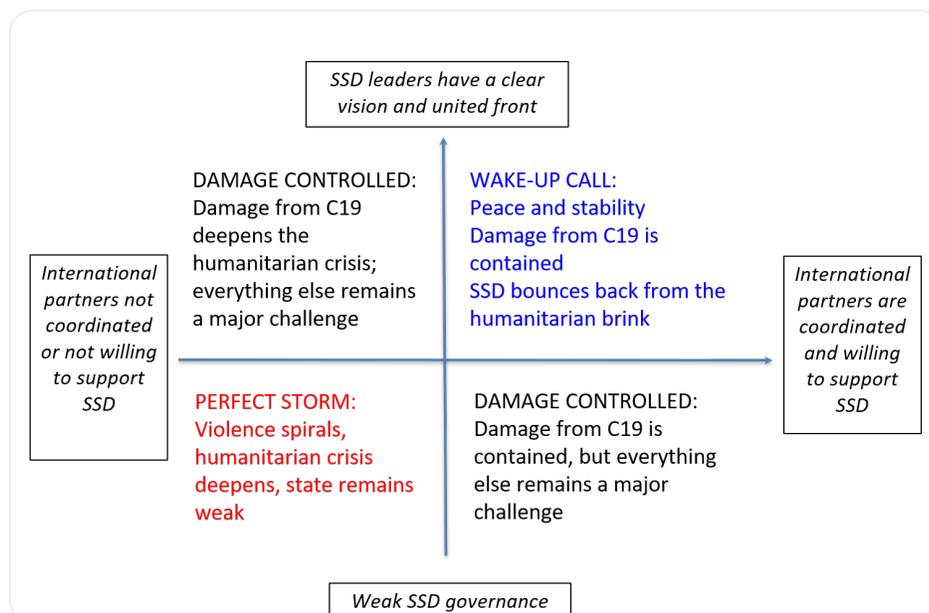
2. A downward spiral: PERFECT STORM OF HEALTH, HUNGER, HUMANITARIAN, AND SECURITY CRISES.

In spite of an early COVID response by both the South Sudan leadership and its international partners, COVID, in conjunction with shortages in food and goods and locust infestations, starts a chain reaction that throws the peace process off track and deepens the humanitarian crisis. A country chronically on the brink in humanitarian and peace terms is thrown off it. After a new outbreak of conflict, reminiscent in scale of the war from independence, warlords retake control of the states, some of which become a new haven for militant organisations from both the Sahel and Somalia. The UN arms embargo is tightened but violated in broad daylight. Conflict and criminality spill over to neighbouring countries. South Sudan's image continues to deteriorate. The few donors that invested in development (UNDP, JICA, AfDB...) switch to emergency stop-gap measures. Most expatriate staff leave the country and there is less and less international reporting on what is happening, including on the human rights front. A new famine is declared. Most humanitarian aid is re-routed to warlords and does not reach the most vulnerable communities, including PoCs that empty as some of the 1.4m IDPs leave, adding a burden on already starving communities.

3. A positive break: A SMART, PRO-PEACE COVID RESPONSE

As main donor countries manage to “flatten the curve” of COVID cases and casualties, they are able to focus on supporting a conflict-sensitive COVID response in South Sudan involving, rather than sidelining, government and traditional leaders and women's groups. The COVID response is transparent in both planning and implementation. Enough trust has been built with the main parties to the conflict, including non-signatories, to agree on the basic rules of the game, including which regions and PoCs to prioritise. On the issue of state allocation which was not resolved by the Kiir and Machar camps, both agreed on transitional governors for a 12-month period, allowing for a “cool-off period” with regards to political jockeying, which also brought some respite on the security front. Transparency prevented COVID money from being used as a new rent, and helped it grease the wheels of cooperation among former enemies. Protests that were growing when the lockdown was partially lifted (May 2020) subsided. Civil society leaders' grievances were heard and respected. South Sudan's image in the world changes, topped/boosted by a visit by the Pope in 2021, and the international focus on humanitarian aid shifts back to development. Security incidents remain frequent but progressively reduce in scale and number. Peacekeepers remain long enough to act as guarantors of peace while an increasing number of professional and accountable forces are being deployed.

In other words, SSD is at a crossroads: there could be a COVID response that is i) « too little, too late » or ii) « good enough and early enough » or, even better, iii) is a game-changer insofar as it contributes to peacebuilding.



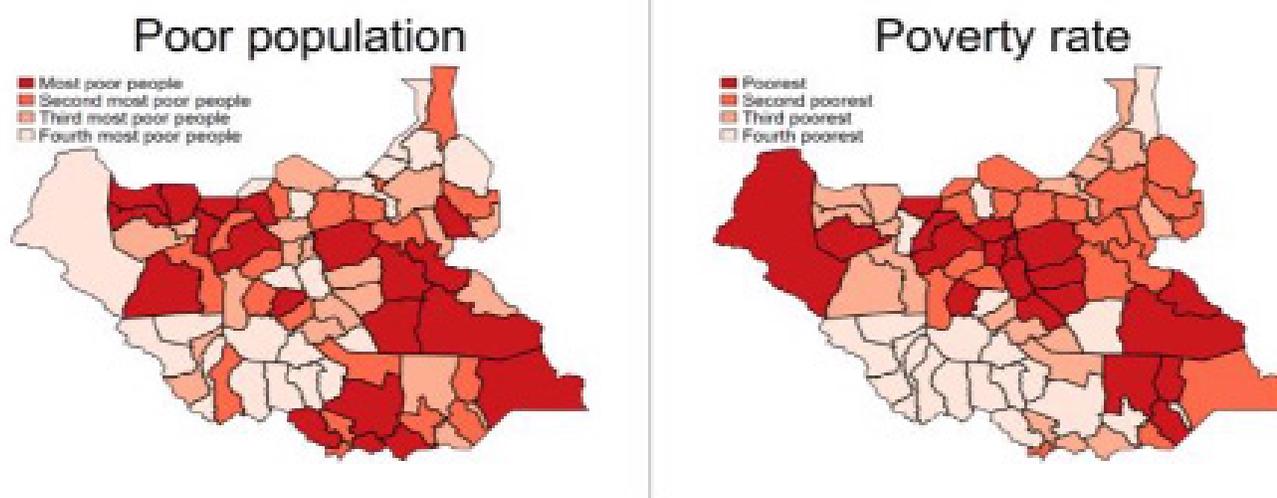
7.2. Annex 2. Figures

Table 2. Governance indicators since independence in 2011

	Score / 100		Rank / 54	
	2017	Δ	2017	Δ
OVERALL GOVERNANCE	19.3	-9.3	53	↔0
SAFETY & RULE OF LAW	14.2	-20.3	53	↓4
RULE OF LAW	23.2	-13.6	51	↓8
TRANSPARENCY & ACCOUNTABILITY	9.1	-3.0	52	↓3
PERSONAL SAFETY	7.3	-31.2	53	↓11
NATIONAL SECURITY	17.1	-33.3	53	↓3
PARTICIPATION & HUMAN RIGHTS	21.1	-7.5	52	↓5
PARTICIPATION	12.1	-14.8	53	↓8
RIGHTS	17.0	-9.8	50	↓5
GENDER	34.2	+2.1	49	↑1
SUSTAINABLE ECONOMIC OPPORTUNITY	17.1	-10.0	53	↓3
PUBLIC MANAGEMENT	17.6	-5.4	52	↔0
BUSINESS ENVIRONMENT	15.6	-12.7	50	↓2
INFRASTRUCTURE	16.9	+2.7	52	↔0
RURAL SECTOR	18.4	-24.5	52	↓14
HUMAN DEVELOPMENT	24.7	+0.6	52	↑1
WELFARE	10.7	-7.2	54	↓1
EDUCATION	20.6	+6.2	48	↑3
HEALTH	42.8	+2.6	52	↔0

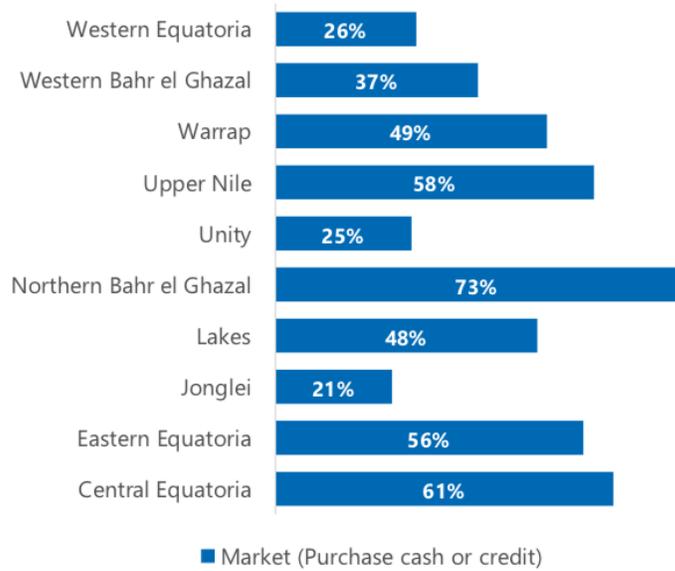
Source: Ibrahim Index of African Governance database, accessed 20 May 2020.

Figure 22. Poverty estimation by regions



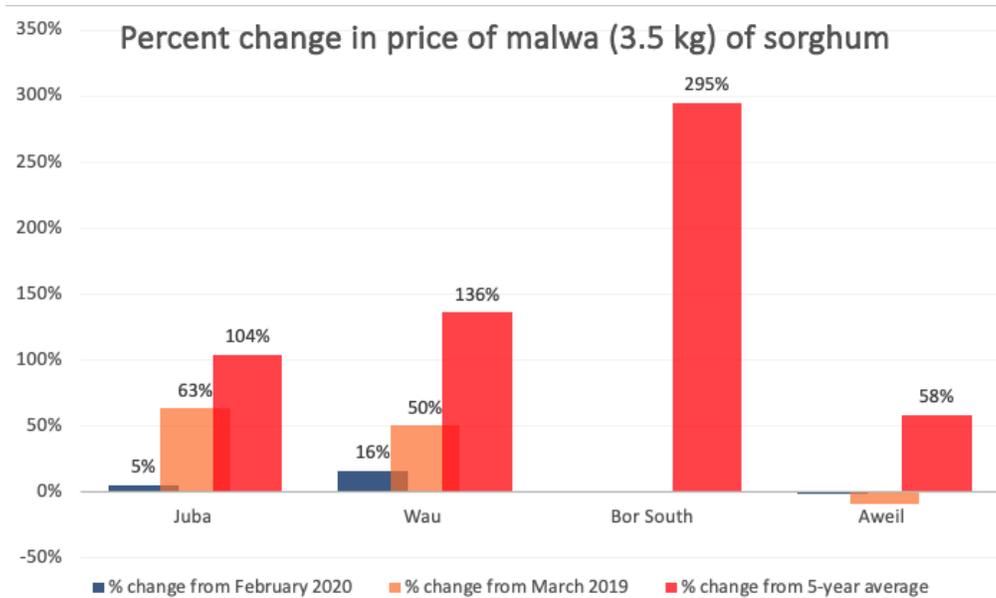
Source: World Bank (2019), "A targeting framework for operations in South Sudan", Washington, DC.

Figure 23. Household dependence on markets, by state



Source: WFP, 2020.

Figure 24. Per cent change in price of a malwa (3.5 kg) of sorghum grain



Source: CLiMIS South Sudan data.



SOCIOECONOMIC ASSESSMENT

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