The violent unrest in South Sudan has displaced thousands of people whose health and humanitarian needs continue to grow. Andrew Green reports from the capital, Juba.

The shooting started late in the evening of Dec 15 when a simmering political dispute within South Sudan's ruling party turned unexpectedly violent. Fighting spread quickly from a military barracks to the streets of the country's capital, Juba.

The first displaced fled their homes at sunrise. Within 24 hours, more than 13,000 people had sought shelter inside the gates of the two UN bases in Juba. Thousands more hid out in the city's churches and mosques. It marked the start of the response to the world's newest humanitarian crisis.

Nearly 2 months of fighting between President Salva Kiir's government and rebels led by his former deputy, Riek Machar, has ravaged much of the country's northeast. Three state capitals have been destroyed. Despite a cessation of hostilities agreement signed on Jan 23, sporadic fighting continues. The dead and wounded, who number at least in the thousands, are still being counted.

“This crisis is a major one and it's going to be very, very difficult to respond to all the needs, just because it's too big”, Raphael Gorgeu, the head of mission for Médecins Sans Frontières (MSF) tells The Lancet. “Everybody's trying to do their best, but it will never be enough.”

In a country of roughly 12 million people, at least 723,000 people are internally displaced. Another 145,000 have fled into neighbouring countries. The World Food Programme (WFP) estimates 3.7 million people might not be getting enough to eat. To mount a response to all of these problems the UN says humanitarian groups need US$1.27 billion through June.

In the meantime, aid agencies are racing to provide emergency assistance with the resources they have, while simultaneously attempting to head off catastrophes. It is a nearly impossible task.

### Crowded camps

South Sudan was already contending with some of the worst humanitarian indicators in the world, exacerbated by a lack of health workers and scarce primary health-care facilities. Now, 2-5 years after the country's independence from Sudan, the conditions for hundreds of thousands of people have taken a step backward.

First there are the wounded—people who were shot in the fighting and others who were injured as they fled. There is still no overall figure, but of the 2700 people MSF hospitalised in the first 5 weeks of the crisis, 1250 were wounded in the fighting. The UN has reported more than 3000 gunshot patients. Those numbers are bound to swell as more people are able to reach treatment facilities.

Then there are the displaced. Most lack even the basics—food, clean water, and shelter—let alone access to medical facilities.

The nearly 75,000 people who fled to UN bases around the country have the benefit of being easily accessible to humanitarian agencies. But even as they try to be responsive, aid workers describe the level of acute need as overwhelming.
Emily Monaghan is an emergency nurse with non-governmental organisation (NGO) International Medical Corps (IMC). In the early days of the crisis, she was part of an IMC team that took over running a health-care centre at one of the UN camps in Juba. Another NGO had to pull out when it ran short of staff.

The camp—or civilian protection site in UN terminology—is tucked behind the headquarters for the UN Mission in South Sudan. More than 15 000 people are crowded into makeshift structures of untreated lumber and plastic sheets. Dirty water runs freely through low-lying areas.

“Our priority at the very beginning was just to get in and start providing any kind of health care”, says Monaghan. “That's kind of changed on a week-by-week basis” as new emergencies appeared.

After they identified four severely malnourished children with medical complications, IMC rushed to set up a stabilisation centre. They also opened a second medical centre and later cobbled together a maternity unit on the grounds of a former food storage hangar, using thick plastic sheets to partition rooms. The team can now do deliveries and provide prenatal and antenatal care and family planning.

These efforts are being replicated in at least seven other bases around the eastern half of the country. As fighting continues and numbers climb, it is unlikely to be enough.

Full-size image (83K) Andrew Green

The UN base at Malakal, the capital of South Sudan's Upper Nile state

“We're always playing catch up”, says Toby Lanzer, the UN humanitarian coordinator for South Sudan, during a press conference in early February. “When there's enough water, when there are enough latrines for 10 000 people, the numbers have gone up to 15 000. When we have enough for 15 000, the numbers have gone up to 20 000. To a certain extent, I'm surprised we've been able to contain the situation as well as we have.”

At the cramped UN base in Malakal, the capital of Upper Nile state, officials have run out of room to build more latrines for the 27 000 people who have crowded into the site. Donavan Naidoo, who heads the International Organization for Migration's office there, warned that it puts the entire base at risk. “Right now, due to the congestion in the camps, you would be finding cholera, hepatitis E, waterborne diseases”, he tells The Lancet. Though thankfully, he added, none have yet appeared.

Measles has already been diagnosed in both Juba camps, and an outbreak in Bor in late January killed 30 children. And with the rainy season approaching, health workers are preparing for a spike in malaria cases. “You have to look at it like, you need everything here”, IMC's Monaghan explains.
Difficult to reach

Most of the country's displaced—at least 650,000 people—did not end up at UN bases. Instead, they fled to remote areas, like the small town of Minkaman in Lakes state. Most face the same risks as the people in the camps, but must do so without the same level of humanitarian assistance, while competing with local communities for limited resources.

Minkaman lies across the Nile River from Bor, the capital of Jonglei state. That town changed hands four times in the fighting. By the time government forces recaptured it for a second time on Jan 16, at least 84,000 people had fled across the river to Minkaman, making it the largest known displacement site in South Sudan.

Food crisis

The scale of the need is larger than in any of the UN camps and in an area that is more difficult to reach. In early February, the International Committee of the Red Cross (ICRC) was finally able to deliver a month's worth of food to all of the people displaced in Minkaman. “It's been difficult for them”, says Mireille George, the head of ICRC in the area. “They have received half-ration for January. They have been sharing. It was not enough for sure.” They are able to deliver the food, says George, because ICRC was able to set up a near-daily convoy running between Juba and Bor. That is still not possible in other spots. Most aid agencies say access is still their biggest concern, either because of logistical difficulties, or—more often—because much of the country is still not secure. “The roads are not safe”, says Eddie Rowe, WFP's deputy country director. “A lot of checkpoints. Our transporters are being harassed.”

That, in combination with the looting of more than 4,700 tons of relief items during the fighting, “sort of strangled our immediate response to those who were initially displaced”, says Rowe. The result is that, in a place like Malakal, which the government reclaimed from the rebels on Jan 20, it took the UN more than 2 weeks to start providing relief to displaced people who were not living on the base.

And more people are about to become hungry. South Sudan's months-long rainy season will render more than half of the country impassable. The rains can start as early as April, which means WFP needs to be pre-positioning food supplies across the country now. Rowe warns that in some places it might already be too late. “We have 22 pre-position sites in Jonglei. Looking at the landscape now, if everything goes well, we probably might be able to pre-position food to less than ten of the pre-positioned sites.”
Meanwhile, the displaced need to start making their way home if they are going to plant any food during the upcoming growing season. Instead, the number of internally displaced people is rising. Rowe says the worst-case scenario is the current number of food-insecure people—3.7 million—could double by November or December. If fighting continues, it is certain other emergencies will arise. “For the people of South Sudan, there's no question that this is easily the most difficult time that they've had since independence”, the UN's Lanzer says. “But for many, many, many thousands of people this will be the hardest time they've ever had.”