

1. Summaryⁱ

7	10 million	111 MSEK	0 MSEK	0 MSEK	111 MSEK
Humanitarian crisis ranking (Sida's initial allocation analysis) ⁱⁱ	Number of people with humanitarian needs (Sida's initial allocation analysis) ⁱⁱⁱ	Initial allocation for 2026	Additional allocation in 2026	Flexible funding in 2026	Total Sida funding in 2026

South Sudan continues to face a complex humanitarian crisis driven by armed conflict, intercommunal violence, recurrent climate shocks, disease outbreaks, economic decline, and political instability, leaving three-quarters of the population in need of humanitarian assistance.¹ The political situation remains fragile, with a fear for the possible collapse of the 2018 Revitalised Peace Agreement that ended South Sudan's five-year civil war, heightening the risk of further violence and instability. Since December 2025, renewed conflict has resulted in casualties, injuries, and nearly 268,000 new displacements.² Extreme levels of acute food insecurity and malnutrition, including risk of famine, also makes South Sudan one of the most concerning food-insecurity situations globally.³ The health situation remains critical, with the country experiencing its largest cholera outbreak in history, while the ongoing crisis in Sudan continues to drive a large-scale influx of refugees and returnees, putting additional pressure on already limited resources and essential services.

Sida's humanitarian support to South Sudan focuses on integrated, multisectoral, life-saving assistance to populations most severely affected by the crisis, including displaced communities. Protection will remain a central priority, and cash- and voucher-based assistance will be prioritised whenever feasible. Sida will also support logistics and common services to ensure that humanitarian actors are able to reach remote, hard-to-reach areas, and will make use of flexible funding mechanisms to enable partners to operate effectively in this highly volatile context.

¹ OCHA, [Humanitarian Needs and Response Plan 2026 – South Sudan](#), February 2026 (accessed 2026-03-23).

² OCHA, [South Sudan: Conflict in Jonglei State - Flash Update No.13](#), March 2026 (accessed 2026-03-23).

³ FAO and WFP. (2025). Hunger Hotspots. FAO–WFP early warnings on acute food insecurity: November 2025 to May 2026 outlook. Rome. <https://doi.org/10.4060/cd7310en>. FAO and WFP, [Hunger Hotspots. FAO–WFP early warnings on acute food insecurity: November 2025 to May 2026 outlook](#), November 2025 (accessed 2025-12-11).

2. Humanitarian needs & affected population

Ten million people are in need of humanitarian assistance in South Sudan, up from 9.3 million people in 2025.⁴ Needs are particularly severe in areas affected by conflict, flooding, and mass displacement, especially in Upper Nile State, Jonglei, the Abyei Special Administrative Area, the Greater Pibor Administrative Area, and parts of Unity, Greater Equatoria, and Bahr el Ghazal states. For the first time, three counties – Nasir, Ulang, and Fangak – have been classified at inter-sectoral severity level 5, indicating severe deterioration in these areas.

A total of 4.5 million people from South Sudan remain displaced, this includes 2 million internally displaced persons (IDPs) and refugees in neighbouring countries,⁵ many of whom have been displaced for over a decade. In addition, conflict in Sudan has forced 1.3 million refugees and returnees into South Sudan,⁶ with more expected in 2026 as the situation in Sudan continues to deteriorate. Displaced populations face severe food insecurity, limited access to health and education services, poor living conditions, and heightened protection risks.

Food insecurity levels remain alarming, with nearly 6 million people experiencing acute food insecurity (Integrated Food Security Phase Classification (IPC) Phase 3 and above), including 1.3 million facing IPC Phase 4 and 28,000 in IPC Phase 5 conditions. The situation is expected to worsen by mid-2026, with more than 7.5 million people projected to experience IPC Phase 3 or higher during the lean season, including in Luakpiny/Nasir County, which remains at risk of famine in a worst-case scenario. Due to the conflict in Jonglei, there is also a risk that additional counties, including Ayod, Duk, Nyirol, Uror, Akobo, and Fangak, may face famine (IPC Phase 5).⁷ A total of 3.2 million children and pregnant or breastfeeding women are projected to be acutely malnourished, including 670,000 children expected to suffer from Severe Acute Malnutrition (SAM), with 70 per cent of cases concentrated in Jonglei, Northern Bahr el Ghazal, Unity, Upper Nile, and Warrap.⁸

Malnutrition levels are exacerbated by poor Water, Sanitation and Hygiene (WASH) conditions and disease outbreaks, including malaria, which remains the leading cause of morbidity and mortality. Flooding, affecting more than 1.3 million people in 2025⁹, continues to contaminate water sources and damage WASH systems, leaving 6.8 million people in need of WASH assistance. The health system remains fragile, with severe shortages of medical supplies and health workers, leaving 6.3 million people in need of acute health services, contributing to some of the worst health outcomes

⁴ OCHA, [Humanitarian Needs and Response Plan 2026 – South Sudan](#), February 2026 (accessed 2026-03-23).

⁵ UNHCR, [South Sudan Refugee, Returnee and IDP Population Map](#), October 2025 (accessed 2025-12-11); UNHCR, [Regional Bureau for Eastern and Southern Africa - IGAD Region | Population of concern to UNHCR](#), October 2025 (accessed 2025-12-11).

⁶ OCHA, [Humanitarian Needs and Response Plan 2026 – South Sudan](#), February 2026 (accessed 2026-03-23).

⁷ FEWS NET, [South Sudan: Food Security Outlook: Conflict escalation drives Emergency and risk of Famine in Jonglei and Upper Nile, February - September 2026](#), March 2026 (accessed 2026-03-23).

⁸ IPC, [South Sudan: Acute Food Insecurity Situation for September - November 2025 and Projections for December 2025 - March 2026 and for April - July 2026](#), November 2025 (accessed 2025-12-11).

⁹ OCHA, [South Sudan: Floods Snapshot](#), November 2025 (accessed 2025-12-08).

globally. Additionally, 65 per cent of South Sudan's school-aged children remain out of school,¹⁰ while education services for crisis-affected children remain insufficient to meet the scale of needs.

Civilians continue to face severe protection risks due to widespread human rights violations and alleged breaches of International Humanitarian Law (IHL), including attacks on civilians and civilian infrastructure, such as medical facilities, as well as killings, injuries from explosive weapons, theft, extortion, and forced evictions. Conflict escalation, including ground assaults and aerial bombardments, cattle raiding, and disputes over land and resources, has fuelled cycles of retaliatory violence and eroded the overall protection environment, leaving 4.9 million people in need of protection support. Gender inequalities and harmful social norms, exacerbated by decades of conflict, limit opportunities and access to services for women, girls, and marginalised groups and contribute to some of the highest rates of gender-based violence globally. Children face risks including early and forced marriage, family separation, and recruitment by armed groups, while elderly and persons with disabilities encounter specific risks, vulnerabilities, and barriers in accessing services. Communities often lack the resources and support necessary to reduce exposure to threats, especially during sudden hostilities or indiscriminate attacks, with limited options for preparedness or response.

3. The humanitarian response

Widespread poverty, limited state capacity, and chronic underinvestment in social sectors have left South Sudan heavily reliant on the international community, including on humanitarian partners, for the provision of basic

4.3 million	\$1.5 billion	19%
People targeted in the response plan (HNRP 2026)	Required to reach the target (HNRP 2026)	Of the funding secured (HNRP 2026)

services. Funding shortfalls have affected all sectors, driving spikes in food insecurity, record-low admissions for severe acute malnutrition, depriving hundreds of thousands of children of education, and reducing access to healthcare, including maternal and GBV services. Reductions have also disrupted supply chains, limited the pre-positioning of essential supplies, and weakened cluster coordination capacities. Consequently, humanitarian actors have had to hyper-prioritise assistance, leaving millions of people without support.

Of the ten million people in need, the 2026 Humanitarian Needs and Response Plan (HNRP) targets 4.3 million people, with 4 million urgently prioritised, requiring USD 1 billion in urgently prioritised requirements for life-saving assistance, protection, and resilience in high-priority counties (Severity Levels 1–3), while lower-priority counties are referred to recovery and development interventions.¹¹ In addition to the HNRP, the needs of refugees and asylum seekers are included in national and regional response plans.

¹⁰ UNICEF, [Humanitarian Action for Children Appeal 2026](#), December 2025 (accessed 2025-12-11).

¹¹ OCHA, [Humanitarian Needs and Response Plan 2026 – South Sudan](#), February 2026 (accessed 2026-03-23).

The Humanitarian Country Team (HCT) provides strategic direction and coordination. The South Sudan NGO Forum, the main platform for national NGOs, facilitates the representation of national NGOs at the HCT and donors are able to participate in HCT+ meetings. Despite funding reductions, the United States remains the largest humanitarian donor, followed by the European Union, the United Kingdom, Germany, the United Arab Emirates, Canada, Norway, and Sweden.¹²

Aligned with the Humanitarian Reset, HNRP priorities include scaling up cash and voucher assistance and enhancing locally led humanitarian action. National NGOs play a critical role in reaching people in need of humanitarian assistance in areas inaccessible to international partners. In 2026, 178 national NGOs participate in the HNRP, and the HCT is committed to further strengthening the influence, leadership, and ownership of local actors, in line with the HCT locally led humanitarian action strategy. South Sudan is one of four countries selected for OCHA's Flagship Initiative, which aims to redesign humanitarian response toward a nationally led system built around the priorities of crisis-affected communities rather than those of aid providers.

South Sudan remains one of the world's most dangerous and logistically challenging environments for humanitarian operations. Insecurity, poor infrastructure, seasonal flooding that renders many roads impassable, looting, bureaucratic impediments, and armed checkpoints collecting illegal fees and taxes severely compromise access, resulting in reliance on expensive delivery models, including airdrops. In Upper Nile, only 30 per cent of the targeted population was reached in 2025, despite the state having the highest number of counties in severe need of humanitarian assistance.¹³ The economic crisis, including inflation and currency depreciation, has further increased operational costs. Civil-military coordination with the United Nations Mission in South Sudan (UNMISS) takes place, but global funding cuts in 2026 risks limiting the UNMISS presence in conflict-prone areas, which might further undermine security, efforts to reduce protection risks, and humanitarian access.

4. Sida's humanitarian allocation

Sida's humanitarian assistance to South Sudan will prioritise integrated, multi-sectoral, life-saving interventions in response to conflict, intercommunal violence, climate shocks, and epidemics, with focus on the most vulnerable populations in areas most severely affected by humanitarian crises. The support aims to reduce morbidity and mortality by improving food security, nutrition, WASH, and health outcomes. It will also seek to reduce exposure to protection risks, while contributing to the safety of and access to basic needs among displaced populations.

Food security and nutrition will remain priority sectors. WASH, critical for addressing acute malnutrition, will continue to be prioritised, alongside improving access to healthcare. Given that the humanitarian crisis in South Sudan is also a protection crisis, centrality of protection must

¹² OCHA, Financial Tracking Service, [South Sudan 2025 | Financial Tracking Service](#), December 2025 (accessed 2025-12-12).

¹³ OCHA, [Global Humanitarian Overview 2026, Southern and Eastern Africa | Global Humanitarian Overview 2026 | Humanitarian Action](#), December 2025 (accessed 2025-12-11).

remain a core priority guiding the humanitarian response. Sida should support actions that address protection comprehensively, reducing exposure to risks and building the capacity of individuals and communities to mitigate threats. Continuous protection monitoring and analysis, in line with the HCT protection strategy, will be essential to improving the protection environment and ensuring that humanitarian actions do not cause harm to affected populations.

Support to displaced populations will remain a priority. While the needs of the most vulnerable, especially newly displaced people, will be prioritised, partners are encouraged, where and when feasible, to complement life-saving activities with sustainable approaches, including durable solutions for displaced populations.

Partners receiving Sida support should consider cash and voucher assistance, including multipurpose cash, as the default modality whenever appropriate, while managing associated risks. Sida will also encourage partners to strengthen cash coordination at national and sub-national levels, promote harmonisation among stakeholders, and address operational challenges to scale up cash-based assistance.

Sida will further support measures that enhance the effectiveness of humanitarian operations and improve humanitarian access, including strengthened logistics and common services in order to reduce operational costs and enable humanitarian actors to reach crisis-affected populations in remote and hard-to-reach areas.

To enable partners to respond effectively in South Sudan's highly volatile operational environment, including adapting to emerging needs or changes in context throughout the year, Sida will prioritise flexible solutions. This will include unearmarked and programme-based funding to partners, as well as funding through flexible mechanisms such as the South Sudan Humanitarian Fund (SSHF) and rapid response tools such as the Emergency Rapid Response Mechanism (ERRM).

PARTNER	INITIAL ALLOCATION
Action Against Hunger (ACF)	13,000,000
International Committee of the Red Cross (ICRC)	20,000,000
International Rescue Committee (IRC)	11,000,000
Norwegian Refugee Council (NRC)	14,000,000
South Sudan Humanitarian Fund (SSHF)	20,000,000
United Nations High Commissioner for Refugees (UNHCR)	18,000,000
World Food Programme (WFP)	15,000,000
TOTAL	111,000,000

ⁱ The 2026 initial allocation of humanitarian funding is based on Sida's humanitarian allocation analysis methodology. The analysis reflects the current humanitarian situation across crises and is being updated continuously with the latest

available data. The information in the HCA is based on reports, data, and information from partner organisations and other entities, as well as observations from field visits and dialogue with partners.

ⁱⁱ Sida's initial allocation analysis consists of three dimensions that are assessed for each crisis-affected country: 1) magnitude and severity of humanitarian needs 2) capacity of the humanitarian system to respond to needs and 3) capacity of the crisis-affected country to respond to needs. The qualitative and quantitative analysis produces an index scoring for each country, where the highest ranked country is found to have the greatest proportion of unmet severe humanitarian needs globally, based on available data. Sida's initial allocation for 2026 includes a total of 25 countries with the highest scores. For more information please see [Initial Allocation_Methodology](#).

ⁱⁱⁱ The number of people with humanitarian needs according to Sida's allocation analysis is based on the most inclusive estimate of humanitarian needs that is available from recent sources and supported by triangulation. For South Sudan, the selected source is GHO 2026.