




17 - 30 JULY 2015: SOUTH SUDAN SITREP #64

unicef  **South Sudan**  
Humanitarian Situation Report

SITUATION IN NUMBERS

### Highlights

- In Dablual, Mayendit County, Unity, WFP, UNICEF and Samaritans Purse provided assistance to IDPs affected by the on-going violence in the state. UNICEF screened 592 children, with very high levels of malnutrition seen within this small sample size. Sixty-two cases of severe acute malnutrition (SAM) and 163 cases of moderate acute malnutrition (MAM) were identified and provided with ready-to-use therapeutic food. Screening of 1,620 pregnant and lactating women also showed an extremely critical nutrition situation, with a proxy GAM rate of 40 per cent.
- To date, 1,411 cases of cholera, including 42 deaths, have been reported from in Juba and Bor. New cases are on the decline and the case fatality rate has dropped from 10 to three per cent. However, it is essential to continue to scale up prevention and awareness activities. To date, 546 social mobilizers and hygiene promoters have reached over 33,000 people with key cholera prevention messages and radio messages are believed to have reached 70 per cent of people in Central Equatoria.
- Follow up visits continue for children released from Cobra Faction, with no re-recruitment reported. Learning programmes have reached 6,200 children (see photo above) and vocational training has begun, with 85 released children having received training in dairy technology, solar technology, fish processing, baking and leather tanning. Distribution of livestock has also started in Pibor and Boma, with 150 children having each received two goats; this livestock programme will eventually reach 3,510 released and other vulnerable children.

### 1.6 million

People internally displaced since 15 December 2013 (OCHA, Humanitarian Bulletin dated 30 June, 2015)

### 855,596\*

Estimated internally displaced children under 18 years

### Outside South Sudan

### 623,943

Estimated new South Sudanese refugees in neighbouring countries since 15 December 2013 (UNHCR, Regional Refugee Information Portal, dated 30 July, 2015)

### Priority Humanitarian Funding needs January - December 2015

### US\$ 165.6 million\*\*

*\* Disaggregated data is yet to be made available, as registration has not been completed across the country. Children under 18 years have been calculated based on census*

### UNICEF's Response with Partners

Indicators	Cluster for 2015			UNICEF for 2015		
	Cluster Target	Cumulative results (#)	Target achieved (%)	UNICEF Target*	Cumulative results (#)	Target achieved (%)
<b>WASH:</b> # of target population provided with access to water as per agreed standards (7.5-15 litres of water per person per day)	3,500,000	1,394,092	40%	600,000	391,797	65%
<b>Nutrition:</b> # children 6-59 months with Severe Acute Malnutrition admitted for treatment	148,958	74,534	50%	148,958	74,534	50%
<b>Health:</b> # of children 6mo-15y vaccinated for measles				1,207,705	182,261	15%
<b>Education</b> # of children and adolescents (aged 3-18) with access to education in emergencies	446,748	232,593	52%	200,000	160,389	80%
<b>Child Protection:</b> # of children reached with critical child protection services	340,295	321,195	94%	275,280	212,631	77%

## Situation Overview & Humanitarian Needs

Since the current conflict began in December 2013, over 2.2 million people have been forced from their homes. This includes 1.6 million people who are displaced internally and a further 623,000 people who have sought refuge in neighboring countries. As of 23 July, the estimated number of civilians seeking safety in six Protection of Civilians (PoC) sites is 166,142 according to the UN Mission in South Sudan, including 103,913 in Bentiu, 28,663 in Juba, 30,410 in Malakal, 2,289 in Bor, 665 in Melut and 202 in Wau.

Renewed fighting over the past four months has cut over 750,000 people in Greater Upper Nile off from humanitarian assistance and forced over 150,000 people to flee their homes, many to extremely remote areas where they are struggling to survive. Insecurity has meant almost no humanitarian access to Southern Unity state. The increasingly dire situation is exacerbating already very high levels of food insecurity and malnutrition, with over 10,000 children with SAM estimated to have either defaulted from treatment programmes or not been able to access the treatment they need.

Humanitarian access also remains severely constrained in Upper Nile, in particular on the west bank of the Nile. UNICEF has not been able to access Wau Shilluk since late May 2015, with many IDPs from Wau Shilluk making the dangerous move to Malakal PoC or other less affected areas.

According to WHO, as of 28 July 2015, a total of 1,411 cholera cases including 42 deaths have been reported in Juba County, Central Equatoria and in Bor, Jonglei State for an overall case fatality rate (CFR) of 2.98 per cent. This includes 1,297 cases, including 41 deaths, in seven payams of Juba where a declining number of new cases are being reported. There have now been 114 cases including one death in Bor, where community transmission is also in decline. Case fatality rates have decreased from ten per cent at the initial declaration of outbreak to less than three per cent as of 28 July, however, this remains well above the emergency threshold of one per cent. Continued behaviour change communication efforts are required to ensure immediate health-seeking behaviour.

## Humanitarian leadership and coordination

UNICEF actively participates in the Humanitarian Country Team and the Inter Cluster Working Group, which lead strategic and cross-sectoral coordination of humanitarian programmes. UNICEF leads the WASH, Nutrition and Education clusters as well as the Child Protection sub-cluster. Within the Health cluster, UNICEF provides leadership on vaccination, communication and social mobilization. UNICEF also supports the core supply pipelines for the Education, WASH and Nutrition clusters, providing essential humanitarian supplies to all partners. While continuing to focus on the delivery of life-saving interventions, UNICEF is also investing in providing access to education and a protective environment for affected children.

## Humanitarian Strategy: Rapid Response Mechanism (RRM)

As part of the interagency rapid response teams, UNICEF continues to expand activities in remote locations together with WFP and partners. More than 792,500 people, including close to 179,000 children under 5, have been reached by UNICEF and RRM partners to date. In 2015 alone, 20 RRM missions have been conducted in Greater Upper Nile, reaching 248,000 people, including 51,700 children under 5.

In Dablual, Mayendit County, Unity, WFP, UNICEF and Samaritans Purse provided assistance to IDPs affected by the ongoing violence in the state. UNICEF screened 592 children, with very high levels of malnutrition seen within this small sample size. Sixty-two cases of severe acute malnutrition (SAM) and 163 cases of moderate acute malnutrition (MAM) were identified and provided with ready-to-use therapeutic food (RUTF). Screening of 1,620 pregnant and lactating women also showed an extremely critical nutrition situation, with a proxy GAM rate of 40 per cent. 588 children were provided with Vitamin A and 402 children were dewormed. Health interventions included the vaccination of 869 children against measles and 710 against polio, while 2,126 women were vaccinated against tetanus and 500 pregnant women received clean delivery kits. 211 primary health care consultations were conducted and around 1,800 households were provided with mosquito nets. In addition, 1,675 vulnerable households were reached with hygiene promotion messages and soap. Nine separated children were registered for family tracing.

UNICEF and WFP also deployed to Domma, Ulang County, Upper Nile State reaching 10,383 people, including 2,169 children under five. UNICEF screened 2,688 children for malnutrition with 6 cases of SAM and 97 cases of MAM identified and referred for treatment. In addition, 2,431 children were provided with Vitamin A and 2,182 dewormed. IYCF messages reached 2,449 women. Health interventions included the vaccination of 2,997 children against measles

and 3,558 against polio as well as 490 pregnant vaccinated against tetanus. Also, 800 vulnerable households were provided with mosquito nets and 264 pregnant women received a clean delivery kit. Additionally, 270 persons were reached with primary health care consultations and PHCU kits were handed over to the health facility. A further 900 vulnerable households received hygiene supplies and messages. Twelve separated children were registered for family tracing. UNICEF provided training on education in emergencies for 17 teachers as well education supplies to support the re-opening of the school.

## Summary Analysis of Programme Response

**HEALTH:** With provision of 14,000 sachets of Oral Rehydration Salts and on-going supportive supervision, UNICEF continued supporting 17 oral rehydration points (ORPs) to ensure initiation of early treatment and rehydration of any suspected cholera cases. From 23 June to 26 July, 116 cases of acute watery diarrhoea were treated in the ORPs.

While mortality rates for children under 5 remain below the emergency threshold, elevated numbers of deaths of children under 5 continue to be reported from Bentiu PoC. Over 19,000 long-lasting insecticide-treated nets (LLITNs) have been distributed, including 14,000 from UNICEF. UNICEF has also trained community health workers and partners and has increased its monitoring at clinics and for new arrivals. During the reporting period, UNICEF-supported community volunteers reached 8,605 households with key messages on hygiene promotion, prevention and prompt seeking of health care services. Over 1,787 children with diarrhoea were treated with ORS and 775 children with fever and difficulty breathing were referred for further treatment.

UNICEF and implementing partners IOM, Health Link, IMC and IRC continue to provide primary health care services in Bentiu, Juba and Malakal PoCs and Mingkamen IDP camp. During the reporting period, 12,560 individuals, of which 48 per cent were children under 5, accessed basic health care services for a cumulative number of 261,352 consultations provided this year with UNICEF support. Acute respiratory infection is the leading cause of morbidity and mortality followed by malaria and diarrhoea.

In Mingkamen, with support from UNICEF, Health Link continued the implementation of integrated community case management (iCCM). A total of 2,501 children were treated for malaria, pneumonia and diarrhoea. Since the launch of iCCM in Mingkamen, in March 2015, 11,158 children under 5 have been treated.

From January to July 2015, through RRM, 71,504 children were vaccinated against measles and 75,517 against polio. Additionally, 23,422 pregnant women received at least one dose of tetanus toxoid vaccine and 4,886 clean delivery kits were distributed. 7,252 people accessed basic health services with 19,400 people including women and children receiving LLITNs.

In response to the circulating vaccine derived polio virus (cVDPV2) outbreak, confirmed in October 2014, short interval additional dose (SIAD) campaigns targeting children under 15 in the three conflict affected states are being implemented. Three cases of cVDPV2 have been reported with the most recent notified on 11 June 2015. To date 1,303,878 children under 15 years have been reached with one round of SIAD in 29 counties; 893,293 with two rounds in 23 counties; and 560,110 with three rounds of the SIAD campaign in 15 counties, each round targeting 2,606,995 children under 15.

During the reporting period SIAD campaigns were run in six counties where 461,320 children under 15 were vaccinated against a target of 713,966 (64.6 per cent). The remaining rounds are being completed according to the security situation on the ground. Rounds in six counties targeting 583,393 children are scheduled for August 2015.

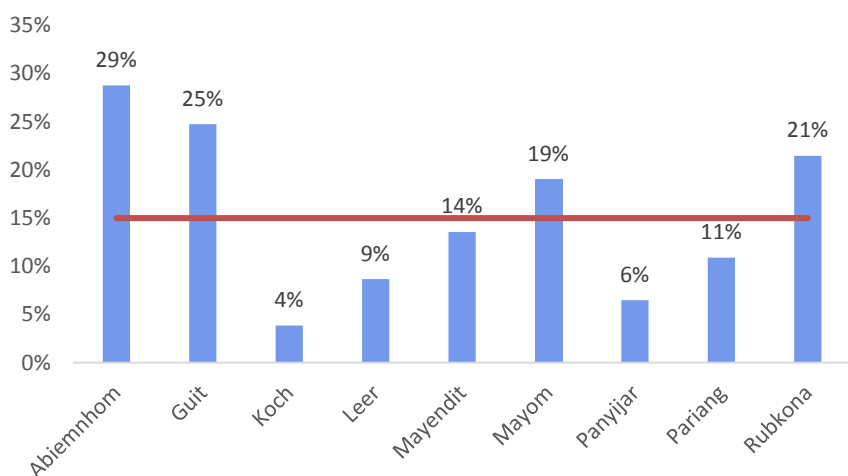
All children under 15 arriving at PoCs are vaccinated against polio and measles while routine immunization services continue to be offered for children under one year in the PoCs. In week 29, six new cases of measles were reported in Bentiu PoC. A measles and polio vaccination with deworming and vitamin A supplementation reached 13,053 (91.4 per cent) of targeted children in Malakal PoC. Vaccination of 1,800 children was delayed due to refusal from the community leaders. A resolution has been reached and vaccination began on 27 July.

UNICEF continues to support partners (IRC, IMC, Health link, UNHCR and IOM) to provide PMTCT services in nine IDP camps in Central and Eastern Equatoria, Lakes, Jonglei, Upper Nile and Unity States including Yida refugee camp. In the reporting period, 593 pregnant women attending antenatal care (ANC) were counselled and tested for HIV. One HIV

positive case was identified and provided antiretroviral drugs to prevent mother to child transmission of HIV. In 2015, the cumulative number of pregnant women attending ANC has reached 17,343, 53 per cent of women targeted the year. However, only 22 per cent attend four or more visits, showing a high dropout rate. Similarly, only half of women accept HIV testing mostly due to low knowledge of the importance of prevention of mother to child transmission (PMTCT) of HIV. Community mobilization and training of mentor mothers is ongoing in Bentiu and Mingkaman in an effort to increase awareness among communities and pregnant mothers. This is hoped to promote uptake, adherence and retention in maternal health and PMTCT care.

**NUTRITION:** To date, UNICEF and partners have admitted 74,534 children for the treatment of severe acute malnutrition (SAM). However, this number is lower than expected due to lowered admissions in Unity State. Unity State has also recorded a very high number of defaulters. According to SPHERE standards the defaulter rate should not exceed 15 per cent. As shown in both graphs below, defaulter rates in Abiemnhom, Guit, Mayom and Rubkona Counties exceed the 15 per cent Sphere standard. The highest defaulter rates were recorded in April in Abiemnhom (59 per cent) and Mayom in June (33 per cent).

Cumulative Defaulter rate in Unity: Jan-June 2015

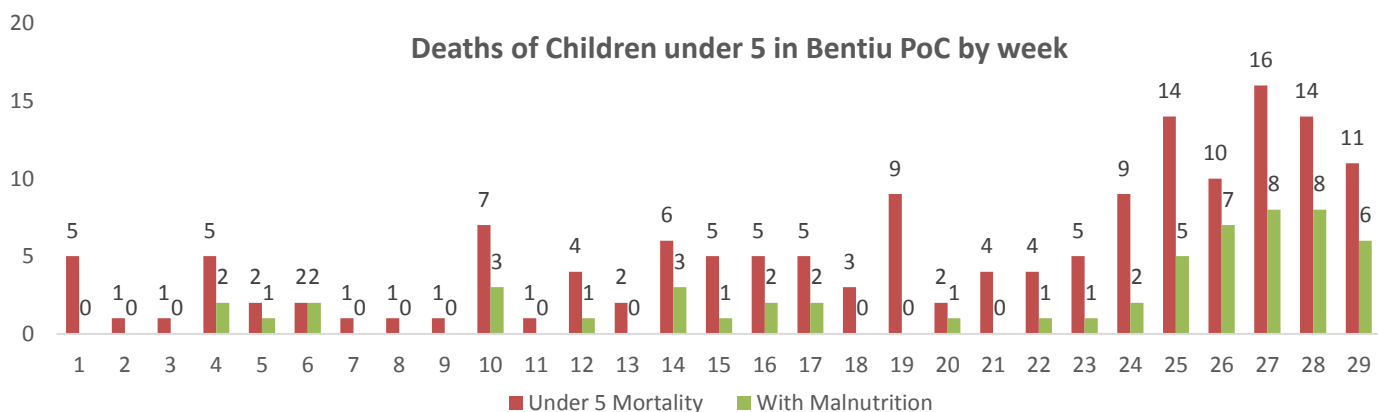


High rates of malnutrition continue to be registered amongst children in Bentiu PoC. The screening of children in the Bentiu PoC is done routinely both for new arrivals and children already in the PoC. Among the arrivals, few were identified as suffering from acute malnutrition. During the reporting period, 1,315 newly arrived children under 5 were screened. Only 6 children had SAM (0.6 per cent). However high proxy rates of GAM and SAM continue to be observed in children living in the PoC. During reporting period 11,063 children were screened, with 547 (4.9 per cent) identified with SAM and 917 (8.3 per

cent) with MAM. This is comparable to the previous reporting period. A SMART survey is planned to be undertaken in the first two weeks of August 2015 to provide a more accurate picture of the nutrition situation.

High admissions to OTPs in Bentiu PoC continue, with 943 admitted in the past two weeks. High numbers of deaths of children also continue to be reported, with 25 children dying over the past two weeks, 14 of which were due to reported as malnutrition-related. Harmonization of outpatient therapeutic programmes (OTP) and targeted supplementary feeding programme distribution days are also ongoing in order to avoid double registration as well as use of ink to identify children that have been enrolled. UNICEF and partners are currently working on community education through radio Miraya to raise awareness that RUTF and ready-to-use supplementary food (RUSF) is intended for children with acute malnutrition and should not be shared or sold. Further actions proposed include increasing the number of community outreach workers and supervisors to increase active case finding as well as improve the supervision of field work.

Deaths of Children under 5 in Bentiu PoC by week

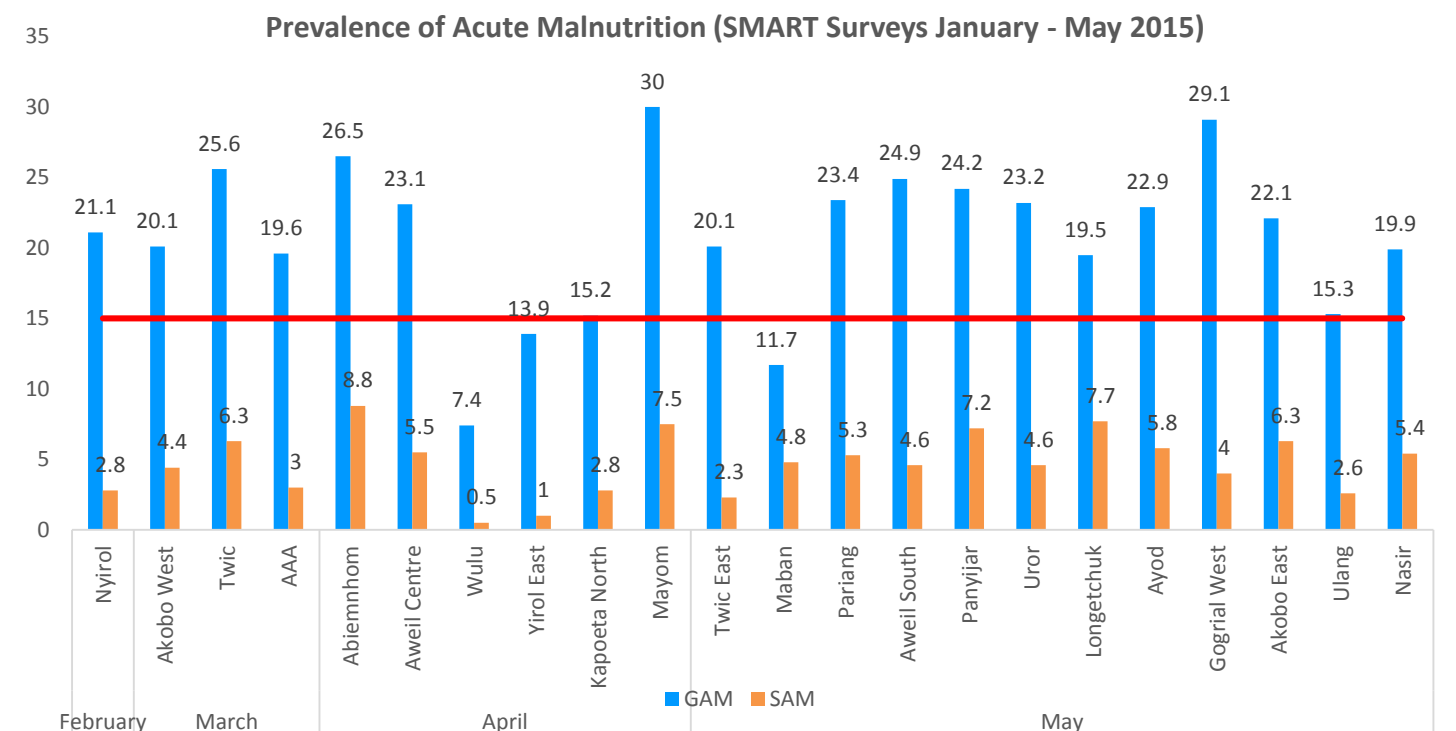


In Upper Nile, during the reporting period, 754 children under 5 were screened of which 2.1 per cent were identified with SAM. 249 children admitted to OTPs in the state. There were very low reporting rates for screening and admissions. Of the 120 children admitted into the OTP, 77 were new arrivals from Wau Shiluk. There continues to be no humanitarian access to Wau Shiluk. However, a mass movement of residents from Wau Shiluk to Malakal PoC has been reported. 374 children under 5 newly arriving to the PoC were screened. Among these, 1.1 per cent of the children had SAM and 8.8 per cent had MAM. The situation across Upper Nile will likely worsen as the movement of food and other supplies along the river Nile and to Malakal Airport have been suspended.

In Jonglei, the security situation has generally allowed programme activities to proceed with minimal disruption. A total of 9,775 children were screened in seven counties from which partners reported. The cumulative proxy GAM and SAM rates were 14.3 per cent and 6.0 per cent respectively. The highest proxy GAM was recorded from Ayod (39.3 per cent) and the lowest was Akobo (12.3 per cent). In Jonglei, a total of 239 and 412 children were admitted into the different OTP and TSFP services.

From 1 January up to 31 July 2105, the RRM nutrition team has deployed to a total of 20 missions to remote and hard to reach areas of Jonglei, Unity state and Upper Nile states. The team has screened 47,930 children under 5, identifying 689 (1.4 per cent) children suffering from SAM and 4,108 (8.6 per cent) children with MAM. All children identified with SAM have been provided with RUTF treatment. Additionally, 45,382 children have been reached with Vitamin-A supplementation and 37,318 children reached with deworming treatment, while 26,620 caretakers have been reached with key messages on best practices in infant and young child feeding.

The nutrition situation is dire with 19 out of the 22 surveys having GAM rates above 15 WHO emergency threshold. Mayom, Gogrial West and Abiemnhom recorded the highest GAM rates of 30 per cent, 29.1 per cent and 26.5 per cent respectively.



Food Security and Nutrition Monitoring System (FSNMS) data collection is progressing well for most the states. However, data was not collected in parts Central Equatoria due to insecurity; this data will be collected from 4 to 11 August. When all the data has been collected, analysis will proceed and subsequently results would be released.

The urban FSNMS training is in progress and data collection will commence immediately after the training in Juba. The survey is on track to be completed by the time of the IPC analysis. Discussions among partners are underway to bring more financial resources to support the programme. The need for the urban assessment was based on the current fluctuating and high exchange rates as well as the lack of adequate food and nutrition information in urban centres. The overall objective of the FSNMS urban survey is to assess food security and nutrition situation among urban populations living in the poorer payams of Juba town and provide information necessary for programming assistance.



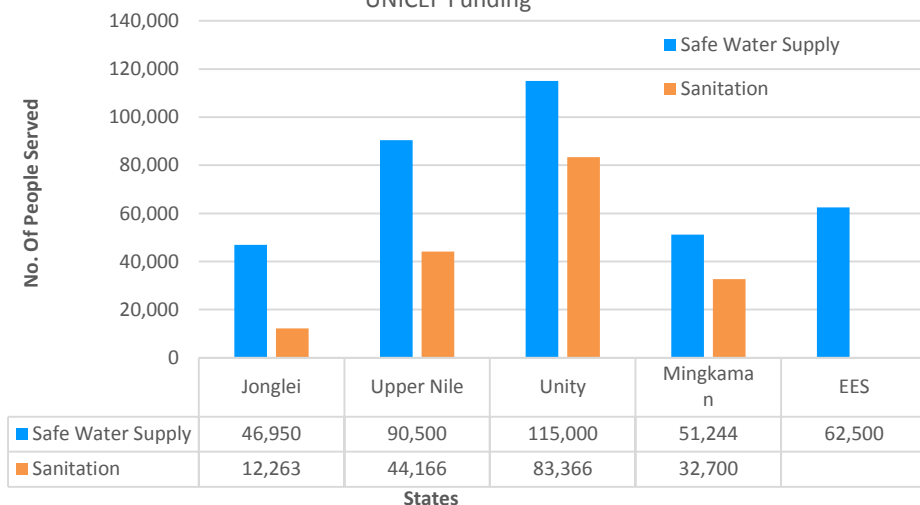
The assessment is expected to provide an in-depth comparative analysis of the main indicators of food security, nutrition and livelihoods in urban settings.

**WASH:** UNICEF continues to support the cholera treatment centre (CTC) at Juba Teaching Hospital with all the required supplies for safe water and sanitation along with disinfection control. UNICEF is also ensuring safe solid waste management. Seventeen UNICEF supported ORPs in Juba County have also been supported with a minimum WASH package.

In Bor, UNICEF and partners have been supporting cholera prevention and response activities in both the PoC and the Bor Hospital CTC, including provision of safe water and waste disposal. In Bor PoC, hand washing and foot disinfection spraying stations were installed at the entry and exit gates for all pedestrians to minimize cross contamination and transmission of infection. Two stances of communal latrines and one shower has been constructed in the PoC, ready for use in case of a cholera outbreak. Over 905 households in the PoC have been reached with cholera prevention messages and distribution of supplies such as soap and household water treatment supplies.

The population in Bentiu PoC is now reported to be over 115,000 IDPs. The ten operational boreholes are providing 1,100,000 L/day, or around 10L per person per day (L/p/d). This remains below the Sphere Standard of 15 L/p/d. An outbreak of Hepatitis E has been reported within the PoC, with nine cases including three deaths according to WHO. This further underscores the importance of safe drinking water and promotion of hand washing with soap to prevent the spread of the outbreak. The drilling of the new borehole in Sector 4 that will also be linked to the water distribution network is also ongoing. The construction of the new water distribution network is expected to be completed within two weeks and will cover all the sectors of the new PoC extension. Solid waste disposal activities are now continuing regularly, as access to the disposal site continues without any difficulties.

Number of People Served with Water Supply & Sanitation Services in the POCs and Vulnerable Communities in Different States through UNICEF Funding



In Malakal PoC, safe water is currently available at 11L/p/d; below Sphere Standard. With no fixed wing flights able to move from Juba to Malakal, essential water treatment supplies are running low. Without these basic water treatment supplies, the provision of safe water will be compromised. UNICEF continues to support desludging to ensure continuous safe use of the latrines, in addition to disposing of solid waste. Hygiene promotion is ongoing in Malakal PoC with the help of 40 hygiene promoters and announcements through a local radio station, with

special emphasis on cholera prevention. There continue to be no suspected cholera reported in Malakal PoC.

Currently there is no WASH partner on the ground in Wau Shilluk as there remains no humanitarian access to the site. Provision of safe water supply by Solidarities International has stopped as they are unable to replenish critical supplies such as fuel and Aluminum Sulphate which is needed to run their water supply systems. This situation has highly increased the risk of a cholera outbreak in the location.

In Mingkaman, UNICEF partner RUWASSA is providing safe water supplies through the operation and maintenance of the existing water systems and promoting good hygiene behaviour through hygiene promotion campaigns benefiting over 31,000 people. HELP is in the process of constructing additional 100 latrines in Mingkaman; while UNICEF has requested the community (through partners) to construct their own latrines with the provision of materials including slabs and plastic sheets to increase sustainability and community ownership.

To date, host and vulnerable communities outside PoCs and IDP camps continue to benefit from safe water supply (198,890), improved sanitation (25,650), hygiene promotion messages (57,520) and WASH supplies (135,506). In Wau PoC, UNICEF is supporting the State Directorate of Water and Sanitation to supply 115 households with safe water,

access to sanitation and hygiene promotion. In Aweil East, Northern Bahr el Ghazal, UNICEF partner IAS drilled three new boreholes that are now serving 1,050 households. In Yambio, ten non-functional boreholes were repaired benefitting 6,430 people with 1,596 people receiving WASH supplies including soap, buckets and water treatment supplies. Hygiene promotion activities in Yambio reached 6,807 people; including 4,099 children in several primary schools.

**EDUCATION:** To date as part of the Back to Learning (BTL) initiative, UNICEF has provided 160,389 children (36 per cent girls) aged 3-18 with Education in Emergencies (EiE) services through the provision of technical assistance, supplies and operating costs to partners as well as through RRM direct implementation. A total of 4,037 (21 per cent females) teachers, PTA members and other education personnel have been trained to effectively support EiE in conflict-affected areas.

UNICEF and implementing partners continue adapt the EiE response to displacement trends. In Bentiu and surrounding areas, 10,571 (37 per cent girls) school-aged children, including early childhood education students, are attending temporary learning spaces in Bentiu PoC, Rubkona and Bentiu town with a 78 per cent attendance rate reported by partners in the PoC. During this reporting period, an additional ten temporary classrooms were completed in the new extension sites of the PoC, bringing the total to 46 classrooms, which will benefit an additional 840 children (47 per cent girls). In the run up to the BTL campaign starting 29 July, UNICEF distributed Education in Emergencies kits for use by 1,200 school-age children and primary school teachers.

In the Bentiu PoC extension sites, a total of 321 (44 per cent) children participated in arts, cultural dance, sports and focus group discussions in the youth-friendly centre. Youth-led awareness sessions reached 486 young people with life-saving messages on cholera preparedness, importance of education and children rights, and peace messages.

UNICEF conducted a three-day workshop on conflict sensitive programming in the Greater Pibor Administrative Area (GPAA) for 30 representatives from SPLA, Cobra, religious leaders, GPAA officials, law enforcement and UNICEF staff. The group carried out a conflict analysis exercise in Pibor Town which resulted in a Conflict Analysis document that is being shared with all relevant stakeholders for validation. This will help inform UNICEF programming in GPAA across all sectors, ensuring that present and future interventions are conflict-sensitive and adequately address the existing conflict drivers, such as unequal access to social services, trauma and lack of governance. The most central conflict issue, age-set conflict, must be addressed by all sectors. UNICEF partner, Community Aid for Development (CAD), completed the construction of four temporary learning spaces in Pibor County which enrolled a total of 1,131 learners (10 per cent girls).

UNICEF and partners are scaling up the prevention of cholera response in schools and temporary learning spaces in order to ensure preventive lifesaving information is quickly disseminated in all learning spaces and teachers are trained to provide hygiene promotion and key health messages in all targeted sites. So far, 63 teachers have been trained in Juba County with another 300 teachers planned to be trained to provide hygiene promotion and key health messages to reach 15,000 children total.

In Warrap, UNICEF partner, ACROSS loaded seven Digital Audio Players (DAPs) with learning content on life skills, agriculture and peacebuilding to train pastoralists in cattle camps on holistic peacebuilding, social development and life skills. These were distributed to 13 schools and two cattle camps and used in listening groups, reaching 2,843 children (30 per cent female). The project aims to reduce intra-inter-conflicts, increase social cohesion and build resilience within the community.

UNICEF is also working with youth to establish community dialogue forums to discuss key issues that may lead to violence and affecting communities. In Malakal PoC, UNICEF partner War Child Canada, supported 25 youth (40 per cent female) to conduct outreach activities addressing the culture of violence and to find sustainable ways to resolve conflicts peacefully and mitigate conflict triggers within and between communities. The outreach session was attended by 87 community members (63 per cent female). At the same time, the youth are trained and empowered to lead these forums, increasing their constructive participation in society. To date 150 community members (30 per cent female) have been reached through this intervention.

In Nassir, Upper Nile, ADRA has been supporting youth centres to conduct sessions to address incidents of GBV and conflicts over forced marriage. A total of 483 (48 per cent female) adolescents and youth participated in these key discussions to increase mutual understanding as well the opportunity to be a part of the solution to end the problems.

The youth centre also worked with Peace Ambassadors to conduct life skills and awareness raising sessions on hygiene and peacebuilding reaching 361 (56 per cent female) children and adolescents.

**CHILD PROTECTION:** So far in 2015, UNICEF and partners have reached 212,631 children with critical child protection services. Building on the progress achieved to date in scaling up community-based psychosocial support, an intensive four week onsite coaching and mentoring programme started this week in Bentiu, Rumbek, Minkaman and Juba, during which partners will be supported to implement new community based methodologies. Partners in these areas will have the knowledge and skills to meet the target of 50 per cent of all psychosocial support activities being delivered through community based strategies (currently at 30 per cent). Mine risk education (MRE) has also continued with 5,436 persons (2,587 boys, 1,503 girls, 880 men and 466 women) reached during the last two weeks. One of the six teams supported by UNICEF was non-operational during this reporting period as teams remain relocated due to insecurity in Upper Nile State. In the second half of the year, UNICEF is now supporting MRE teams to shift their focus towards MRE activities in schools, Child Friendly Spaces and Temporary Learning Spaces, in addition to the ongoing community based MRE. This will both increase the reach of the MRE but also begin the transition of MRE into a more sustainable and cost effective model.

The number of registered missing children grew by 268 cases during the last two weeks, and an additional 31 new unaccompanied and separated children were identified. The total caseload of unaccompanied, separated and missing children is now 9,064 (49 per cent girls), who are being supported with critical family tracing and reunification assistance. Fifty-six per cent of the total caseload consists of separated children, 29 per cent are children reported as missing, and 15 per cent are unaccompanied children. A total of 1,545 children have been reunified with their families, with 71 of these reunifications taking place this reporting period. Documented follow-up visits are gradually increasing, with 133 follow-up forms entered into RapidFTR this reporting period (bringing the total to 248 for the month, the highest monthly rate of documented follow ups since the beginning of the current conflict). Increasing unrest, violence, and displacement continue to have detrimental effects on children, with at least 1,000 registered children in Unity State alone (37 per cent of the total caseload in Unity) at risk of secondary separation and having no access to case management services. Access in Upper Nile also remains a challenge and will require rapid action when these constraints are alleviated to ensure that the registered children are located.

Follow up visits also continue in the Greater Pibor Administrative Area (GPAA) for children released from the Cobra Faction to ensure that children are not recruited back into armed groups and to monitor their transition back to their families. No re-recruitment has been reported. To date, 1,016 children have been followed-up in their homes after reunification at least once. Follow ups remains challenging as children return with their families to remote villages, requiring partner staff to travel, often on foot, long distances. Scaling up of socio-economic programmes is also underway. Vocational training has begun, with 85 released children having received training in dairy technology, solar technology, fish processing, baking and leather tanning. As the market for individual trades in GPAA remain limited, UNICEF and partners are working to diversify vocations in which children will be trained. In terms of livelihoods, distribution of livestock has begun in Pibor and Boma, with 150 children having each received two goats this will eventually reach 3,510 released and other vulnerable children.

UNICEF and partners have reached 55,424 women, men, girls and boys with GBV prevention and response services in Malakal, Wau Shiluk, Fashoda and Nasir Counties in Upper Nile; Pochalla and Akobo Counties. In Malakal, this includes door-to-door awareness raising on how GBV survivors can access lifesaving services, psychosocial support activities such as knitting, beading and literacy classes were conducted in the women-friendly space and information sessions held in the Level-II hospital and IMC clinic to promote the importance of timely healthcare following an incident of sexual violence.

In the IDP camps in and around Juba, group life skills sessions were conducted on livelihoods, reproductive health, hygiene promotion, and HIV/AIDS transmission, prevention and treatment; and GBV awareness raising activities. In Akobo, 73 community leaders were trained on GBV, psychological first aid and survivor-centred skills.

**COMMUNICATION FOR DEVELOPMENT (C4D):** Cholera prevention activities continued in almost all states targeting families and communities in high-risk areas including PoCs. As most cholera cases have been registered in and around Juba and Bor, social mobilization and communication efforts have as well increasingly focused on these areas. In addition, social mobilization activities started in Mingkaman. To date, 546 social mobilizers and hygiene promoters have been trained and reached 9,010 families (over 33,000 people) with key cholera prevention messages. Additionally, UNICEF in partnership with the Ministry of Health and WHO trained 365 master trainers in cholera prevention and



control. Among them are health workers, teachers, city councilors, religious leaders and public health officers, who are responsible to provide further training in their respective communities and organizations.

UNICEF continued supporting local and national radio networks to broadcast key information and messages in eight languages (English, Arabic, Bari, Dinka, Madi, Acholi, Lotuko and Nuer), disseminating information on new treatment centres and hotline numbers. Overall, 24 radio stations in Central Equatoria (19), Eastern Equatoria (2) and Upper Nile (1), Jonglei (1), Mingkaman (1) are broadcasting key messages. In Central Equatoria, radio spots have been played over 4,800 times and over 20 talk-shows have been broadcasted. It is estimated that radio messaging has reached over 70 per cent of the state's population.

Other C4D activities included social mobilization for completion of SIAD polio vaccination in Jonglei and Unity with focus on Nyirol, Fangak, Uror, Pigi, Ayod, Mayom, and Abiemnom counties as well as C4D technical support to preparing micro-planning for measles mop up campaign in Mingkaman. UNICEF is also supporting a national training on Inactivated Polio Vaccine and Reaching Every Community (Immunization Approach) and the participants are from all states representing government, UN agencies and line agencies. IPV introduction opens another opportunity for social mobilization and advocacy to strengthen health care system for routine immunization and improve knowledge and health-seeking behaviours among caregivers to prevent their children from vaccine-preventable diseases.

**SUPPLY & LOGISTICS:** In response to the increased caseload in Bentiu PoC; UNICEF chartered a flight to deliver 45m<sup>3</sup> of WASH supplies. Nutrition training materials were also sent for the PoC via UNHAS in a bid to combat the rise in malnutrition levels. While 150kgs of aluminium sulphate was dispatched from Rumbek to Malakal, additional supplies awaiting urgent dispatch to Malakal due to lack of Flight Safety Assurance. The level of critical supplies in Malakal has dramatically reduced and the location is in urgent need for replenishment.

In response to the cholera outbreak, 500 boxes of water treatment supplies and 400 cartons of soap were collected from the UNICEF warehouse by Medair and Solidarites respectively. WASH supplies were delivered to Health Link along with community engagement materials to Oxfam, IOM and UNHCR. Further cholera supplies for health, WASH and social mobilization supplies were provided to Health Link and 12 primary health care centres.

Meanwhile, 5.3MT of education supplies were airlifted to Gorwai and 2MT to Kuwai through the Logistics Cluster. A 40MT truck delivered education supplies to Kwajok and Cueibet while two trucks with further education supplies along with one of health commodities were dispatched from Juba to Bor. The supplies prepositioned in Bor are in readiness for airlifting to Pibor. Eight trucks loaded with LLITNs were delivered to partners and Ministry of Health facilities in Bor, Aweil, Kwajok, Wau and Yambio, as malaria rates increase.

**FUNDING:** Against UNICEF's 2015 revised requirement of US\$ 165.6 million, US\$ 54.9 million has been received leaving an unmet requirement of US\$110 million. UNICEF South Sudan would like to thank the Government of the United States for the contribution of US\$ 5.6 million comprising of a cash contribution along with an in-kind contribution of 52,500 cartons of RUTF for the emergency nutrition interventions. Such funding is greatly appreciated in ensuring a secure nutrition supply pipeline. Funding of \$ 1.3 million has also been received from the Central Emergency Response Fund (CERF) to support the survival kit operation that is ongoing in the remote locations of Unity and Upper Nile states.

Appeal Sector	Requirements in US\$ **	Funds Received in US\$*	Funding Gap	
			US\$	%
Nutrition	34,207,267	15,003,011	19,204,256	56%
Health	22,958,021	8,242,629	14,715,392	64%
WASH	44,900,000	17,168,905	27,731,095	62%
Child Protection	33,974,176	7,911,308	26,062,868	77%
Education	29,588,149	6,623,720	22,964,429	78%
<b>Total</b>	<b>165,627,613</b>	<b>54,949,572</b>	<b>110,678,041</b>	<b>67%</b>

\* 'Funds received' does not include pledges. \*\* The requirements noted above include the indirect cost recovery of 8% as per UNICEF's Executive Board decision. It also includes a cross-sectoral cost (covering fuel, security, ICT etc) to meet the high operating costs of working in South Sudan.

Next SitRep: 13 August 2015

UNICEF South Sudan Crisis: [www.unicef.org/southsudan](http://www.unicef.org/southsudan)

UNICEF South Sudan Facebook: [www.facebook.com/unicefsouthsudan](https://www.facebook.com/unicefsouthsudan)

UNICEF South Sudan Appeal: <http://www.unicef.org/appeals/>



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Annex A - SUMMARY OF PROGRAMME RESULTS<sup>1</sup>

	Cluster 2015		UNICEF and IPs 2015		
	Target <sup>2</sup> (Jan-Dec)	Results (Jan-July)	Target (Jan-Dec)	Results (Jan-July)	Change since last report
<b>NUTRITION<sup>3</sup></b>					
# of children aged 6 to 59 months with Severe Acute Malnutrition admitted for treatment	148,958	74,534	148,958	74,534	6,890
% of children 0-59month with SAM admitted for treatment recovered	75%	88.2%	75%	88.2%	
# of children 6-59 months receiving vitamin A supplementation	1,712,944	184,649	1,712,944	184,649	4,277
# of children 12 - 59 months receiving de-worming medication	1,226,107	147,040	1,226,107	147,040	3,149
# of pregnant and lactating women reached with infant and young children feeding messages	288,496	179,918	288,496	179,918	23,299
<b>HEALTH</b>					
# of children 6 months-15 years vaccinated for measles <sup>4</sup>			1,207,705	182,261	1,802
# of children below 15 years vaccinated against polio			1,259,097	724,147	12,172
# of households receiving ITNs			300,000	61,038	15,123
# of pregnant women attending at least ANC 1 services			47,013	17,343	8,219
# of pregnant women attending ANC counselled and tested			32,909	7,084	593
# of pregnant women receiving clean delivery kits in conflict-affected areas			19,271	1,725	-
<b>WATER, SANITATION AND HYGIENE</b>					
# of target population provided with access to water as per agreed standards (7-15 litres of water per person per day).	3,500,000	1,394,092	600,000	391,797	21,319
# of target population provided access to appropriate sanitation facilities (as per the Sphere Standards)	1,700,000	1,098,786	250,000	176,856	1,591
<b>CHILD PROTECTION</b>					
# of children reached with critical child protection services <sup>5</sup>	340,295	321,195	275,280	212,631	46,918 <sup>6</sup>
# of former children associated with armed forces or groups and children/minors at risk of recruitment enrolled in reintegration programmes	4,000	1,907	4,000	1,755 <sup>7</sup>	-
# of registered UASC receiving Family Tracing and Reunification services and family-based care/appropriate alternative care services	8,800 <sup>8</sup>	9,064	6,880	7,251	239
# of women, men, girls and boys receiving GBV prevention and response services			80,000	58,857	3,433
# of children, adolescent and other community members provided with knowledge and skills to minimise the risk of landmines/ERWs			257,500	75,406	5,436
<b>EDUCATION</b>					
# of children and adolescents (aged 3-18) with access to education in emergencies	446,748	232,593	200,000	160,389	16,587
# of teachers other education personnel and Parent-Teacher Association members trained to provide education in emergencies	8,416	5,951	3,450	4,037	144
# of classrooms rehabilitated/constructed	900	432	475	347	55

No change since last report is denoted by “-”

<sup>1</sup> Partner reporting rates remain below 100 per cent; UNICEF continues to work with its implementing partners to improve monitoring and reporting of results.

<sup>2</sup> These are the revised targets for both Cluster and UNICEF as reflected in the revised Strategic Crisis Response Plan (Jan-Dec 2015). UNICEF annual targets for Health, Child Protection and Education are higher than those of the 2015 SRP, as UNICEF requirements are higher than the inter-agency appeal.

<sup>3</sup> Following the inter-agency decision, Multi-Sector Refugee Cluster will be responsible for the results of nutrition intervention for refugees. UNICEF and partners will continue to assist refugee population, and all nutrition actors in South Sudan will benefit from UNICEF's SAM treatment supplies. Nutrition results for refugees will be updated by UNHCR on a monthly basis.

<sup>4</sup> Targets and results of vaccination against measles and polio only reflects the campaign numbers in order to avoid double counting with the routine EPI results.

<sup>5</sup> Critical child protection services include psychosocial support delivered through CFS or community based mechanisms, support to access other basic services, case management for the most complex cases and prevention messaging targeting children at risk of recruitment, family separation or other child protection risks.”

<sup>6</sup> Includes back reporting

<sup>7</sup> This includes 1,755 children released from Cobra Faction in Pibor as well as 2 children who escaped another armed group who were supported by UNICEF through the DDRC. Additionally, this includes 150 other vulnerable children in the community reached with socioeconomic integration along with the released children, as per the Paris Principles.

<sup>8</sup> This target includes 7,020 unclosed cases that have been identified in 2014 but still require FTR services and family-based care/appropriate alternative care services in 2015. The discussion on this indicator is still ongoing among Child Protection Sub-cluster.