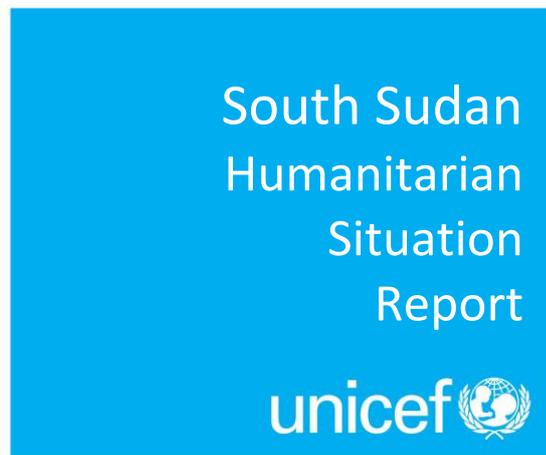


SitRep #5 – Issued on 15 January 2014



SITUATION IN NUMBERS

## Highlights

An estimated 413,000 people have been internally displaced by the current crisis in South Sudan and an additional 74,300 people have sought asylum in neighboring countries. The current situation has outstripped initial inter-agency planning assumptions for the January to March period which are currently under review. The newly reported concentrations of displaced people are in Central and Eastern Equatoria, Jonglei, and Unity states. A multi-sector response has been launched, though critical challenges remain in accessing some of those in need.

- About 51% of the IDPs have been reached with some aid. The humanitarian response remains extremely constrained due to on-going hostilities which severely limit access to populations in need. Looting of UN and NGO offices, vehicles and warehouses has further constrained humanitarian capacity.
- To date UNICEF has provided 87,500 displaced people with access to 15 litres of safe water per person per day.
- Through UNICEF support, 32,846 displaced children under the age of 15 years have been vaccinated against measles and polio in IDP camps in Juba, Bentiu and Aweril (including Vitamin A supplementation and deworming).
- 462 displaced learners are sitting for primary leaving certificate examinations in Juba organised by Ministry of Education, Science and Technology with the support from UNICEF and partners.

## UNICEF's Response with partners

	UNICEF		Sector/Cluster	
	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)
WASH: displaced persons provided with access to safe water (15l/per/day)	300,000	87,500	400,000	108,500
Nutrition Indicator ( No of children 6-59 month admitted for treatment of SAM )	7,536	30**	7,536	30**
Health: children between 6 and 15 years immunized against measles and polio (incl. Vit A & deworming)	178,600	32,846	178,600	32,846
Education Indicator: children including pre-school age provided with access to protective emergencies learning spaces	30,000	N/A	60,000	462
Child Protection: children reached with critical child protection services	100,000	283	100,000	N/A

Cluster targets are based on the inter-agency planning figure of 400,000 displaced persons between January and March 2014.

\*\*The report is incomplete and report received from one camp in Juba.

**413,000**

# of people internally displaced since 15 December  
(OCHA, 13 January, 2014)

**211,325\***

# of estimated displaced children under 18 years

### Outside South Sudan

**74,300**

# of estimated refugees in neighboring countries  
(OCHA, 13 January, 2014)

### 2014 Humanitarian Funding Requirements

**US\$ 74.1 million**

### Priority Humanitarian Funding needs to March 2014

**US\$31.9 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*

## South Sudan SITUATION REPORT 15 January 2014 Situation Overview & Humanitarian Needs

Fighting continued despite ongoing cease fire talks in Addis Ababa, with heavy fighting being reported in Bor (Jonglei State), Bentiu (Unity State) and Malakal (Upper Nile State) and intermittent clashes in Central Equatoria.

Overall it is estimated that 413,000 people have been displaced internally since hostilities began on 15 December, 2013, with an estimated 66,500 people taking refuge in UN premises.

The number of South Sudanese seeking asylum in neighboring countries is 74,300. This number will likely continue to grow, as some 4,000-5,000 people are crossing into Uganda daily, according to UNHCR.

Health partners have reported over 2,600 people with gunshot wounds had been treated in health facilities across the country since the start of the crisis. The total number of casualties is likely to be far higher and research by the International Crisis Group estimates that 10,000 people have been killed. The recent fighting in Bentiu forced some agencies to relocate their staff, leaving a gap in health services. UNICEF was able to continue to provide some health services.



Source: OCHA-South Sudan Crisis Situation Report, 13 January 2014



UNICEF Representative and staff loading WASH supplies to support IDPs in Malakal

The provision of water meets SPHERE standards in the 2 camps in Juba and the sanitation and hygiene is improving. There remain serious concerns about space with 400 new arrivals each day and the risk of waterborne diseases remains high despite on-going efforts to extend the site at UN House.

Integrated Education in Emergencies (EIE) interventions are critically needed so that affected children and youth are occupied with meaningful recreational activities and able to resume learning activities. In Juba, CCCM cluster has reported 7,814 children aged between 3 and 18 including 50 % girls are residing in UNMISS Topping. The immediate focus is to provide emergency learning spaces, education supplies, life skills and psychosocial support as well as lifesaving awareness campaigns.

In Juba, Malakal and Aweril, inter-camp and family reunification for separated and unaccompanied children remains a challenge. There are concerns related to vulnerability of children and women to the violence especially from young men during the night due to poor lightening system in the camps.

UNHAS flights are still not able to reach Bor and aid supplies are reaching critically low levels, especially water and food. The humanitarian response related to vaccination campaigns, WASH and Child Protection activities are on-going in Malakal but

situation remains tense with the fresh fighting started the early hours of 14 January, 2014.

### Humanitarian leadership and coordination

UNICEF leads the WASH, Nutrition, Education clusters as well as the Child protection sub-cluster and, supports the core supplies pipelines for Education, WASH and Nutrition. Within the Health cluster, led by WHO, UNICEF provides leadership in vaccination, communication and social mobilization. UNICEF participated in two Inter Agency Rapid Needs Assessments (IARNA) to the IDP camps in Bentiu (Unity State) on the 5-6 January 2014 and in Yirol East, Yirol West and Rumbek Centre Counties (Lakes State). In Bentiu, an estimated 7,000 to 8,000 civilians are currently living inside UNMISS

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compound in Bentiu and another 300 are reportedly in UNMISS Pariang camp. Civilian protection is a significant issue as most of the IDPs felt highly insecure inside the base. There is a continuing risk of familial and inter-communal violence. Women have also reported incidences of rape by armed forces. Measles, malaria, respiratory tract infections and diarrhea are leading causes of morbidity in the camps. Poor hygiene and limited sanitation facilities increase chances of diarrheal disease outbreak. Priority humanitarian needs identified include: health, protection, shelter/NFI and WASH.

In Yirol East, Yirol West and Rumbek Centre Counties there are 7,380 displaced people. The situation is likely to deteriorate in Yirol East and West and Rumbek Centre if there is no timely relief assistance provided. Relocation of Awerial IDPs to other parts of Lakes state is eminent due to congestion and the displaced populations' hope for better services elsewhere. Lack of water, sanitation facilities, civilian protection, poor hygiene, malaria and severe and moderate acute malnutrition need immediate attention. Priority humanitarian needs identified include: food security, health, protection, shelter/NFI, education and WASH.

## Humanitarian Strategy

UNICEF's response strategy continues to focus on addressing the needs of the displaced populations. Due to security and access constraints, the initial response focused on IDPs in UN bases and those in areas that are accessible. UNICEF has already started responding in UN camps in Bor, Bentiu, Malakal and Awerial, however access to Bor and Malakal is extremely limited UNICEF will collaborate with partners to enhance protection for displaced populations and civilian populations impacted by the conflict and continue to exploit windows of opportunities to reach affected populations. In light of the deepening crisis, aid agencies are continuing to scale up operations to respond to increased displacement. This also includes contingency planning for the coming rainy season, which could further impair access due to impassable roads, cause secondary displacement due to flooding and further heighten the risk of diarrheal disease outbreaks in the highly congested camps.

## Summary Analysis of Programme response

**Health:** UNICEF is supporting health responses in three areas: integrated immunization campaign for measles, polio, vitamin A and deworming; a cholera outbreak preparedness; and maternal, newborn and child health integrating prevention of mother to child transmission of HIV (PMTCT). The health response have been scaled-up in Bentiu and Awerial IDP camps and includes identification of potential implementing partners, micro-planning and mobilization of essential drugs, equipment and delivery of supplies.

To date, a total of 32,846 children (6 months to 15 years) were vaccinated against measles and 32,079 children (0-15 years) received polio vaccine in 4 IDP camps in Juba, Bentiu and Awerial. The integrated campaigns also reached 19,280 children (6–59 months) with vitamin A supplementation while 2,478 children (1–5 years) were provided a single dose of deworming tablet in these 4 IDP camps. The immunization campaign in Awerial IDP camps, to reach 37,000 children under 15 years, is ongoing but has been delayed due to challenges with recruiting vaccinators. UNICEF also continues to support the County Health Departments and NGO vaccinators in the implementation of routine immunization across the country and immunization campaigns in the IDP camps by ensuring the operation of 59 cold chain facilities with supplying fuel in collaboration with UNMISS.

On cholera preparedness, UNICEF is working closely with WHO and MSF to mobilize Cholera Therapeutic Care (CTC) kits for pre-positioning. UNICEF is also supporting preparations for an Oral Cholera Vaccination campaign in the IDP camps with provisions of cold chain facilities and logistical support including procurement of vaccines, pending agreement by Health Cluster.

In collaboration with WHO and UNFPA, coordinated through Health Cluster, support is being provided for Maternal, Newborn and Child Health services including essential drugs and equipment such as primary health care kits, diarrheal management kits, clean delivery kits and Insecticide Treated Nets (ITNs) for children and pregnant women.

**Nutrition:** In addition to reaching 18,928 children under 5 years with high energy biscuits and Vitamin A supplementation, mass screening of <5 children in the camps has started and will be done on a regular basis. The treatment of 30 children under 5 years of age with severe acute malnutrition has begun in Juba. Therapeutic milk (F75 and F100) has already been delivered to CWW for in-patient care while UNICEF is advocating with UNMISS for setting-up of a stabilization center in UNMISS IDP location in Juba. The treatment of severe acute malnutrition is on-going in Awerial (Lakes State) supported by a UNICEF partner CCM. The distribution of high emergency biscuits will be started soon in Awerial IDP Camp. Cases of malnutrition SAM/MAM will be referred to Wunrock, Aweng and Turalei OTP sites run by ACF-USA. The 100 cartons of high energy biscuits are being delivered to Malakal. In Twic IDP Camp (Jonglei State), nutrition screening (MUAC) showed that 3.5% & 7.4% have Severe Acute Malnutrition (SAM) and Moderate Acute

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Malnutrition (MAM) respectively. The nutrition cluster is working to mobilise partners to address the gaps in nutrition interventions in Bentiu and Bor.

**WASH:** As more humanitarian space becomes available WASH services are becoming critical for the survival of IDPs located in UNMISS bases around the country. Water trucking has become main the source of water to the IDPs in these locations making the cost of service delivery very high. UNICEF continues to work with NGO both in Juba and outside Juba, including Bor, Bentiu, Awerial, Katigiri and Malakal.

In Juba, a total of 15 litres of water per person per day is being delivered to IDPs at UN sites. 60 more latrines will be constructed to reach the target of 400 latrines ensuring WASH services are easily availed by 17,459 registered persons to date. UNICEF is working with NGO partner - Nile Hope to address drainage issues in Tongping which heighten disease risks. UNICEF will accelerate hygiene promotion and has entered into partnership with INTERSSOS to work in Tongping area.

In Awerial, UNICEF in partnership with RUWASSA has started latrine construction and hygiene promotion to reach 84,000 IDPs. So far 50 latrines have been built using manual digging. An excavator will be used to expedite the latrine construction to reach the target of 50 constructed latrines per day. WASH partners, OXFAM and AWODA are supported with core supplies such as squatting plates and chlorine.

In Bor, UNICEF in partnership with IAS has constructed 50 latrine under great difficulty while trying to provide water for the displaced population camping within the UNMISS base in Bor. Hygiene promotion is ongoing for 9,000 IDPs, and distribution of WASH NFI, (Soap, Water treatment products and buckets) has been completed.

In Malakal, UNICEF and implementing agencies IOM and UNMISS constructed 176 latrines and supported access to 12l/per/day of safe water for 12,000 IDPs at UNMISS camps. Hygiene promotion is being conducted by World Vision.

In Bentiu, lack of implementing partner's support is affecting the delivery of WASH services to 8,800 IDPs in the area. However, water supply has been installed by ICRC and has attained 15l/per/day. UNICEF has airlifted core WASH supplies (Hygiene kits, squatting plates and 2x 5m3 collapsible tanks). WASH team composed of Hygiene Promoter, PHP staff and WASH Specialist will be relocated to Bentiu to accelerate the response and increase the number of latrines.

**Child Protection:** In Juba, to date 189 children have been identified as unaccompanied, an increase of 9% this week and of which 30 children have been reunified with their families. A total of 76 cases of missing children have been documented, an increase of 5% since the last report, of which 14% (11 cases) have been reunified. Systems for individual case management for the unaccompanied children and foster care arrangement are working well. 73 children are in foster care. UNICEF is currently working to develop a psychosocial strategy for the two camps. IRC has set up a referral centre in the camp for child survivors of GBV and children continue to be referred to these services during this reporting period.

In Malakal, UNICEF has increased its presence and has set up a system for the identification and registration of separated and unaccompanied children with IOM. There has been report of rape during the fighting and UNMISS Human Rights is currently conducting investigation. Emergency Child Protection supplies have been prepositioned (6 recreation kits, 6 ECD Kits, 250 sleeping mats and 25 plastic sheets) for the provision of psychosocial activities in the camp, mainly for Child Friendly Space (CFS) and have identified Social Workers and community volunteers to facilitate psychosocial activities.

In Awerial, UNICEF and its partners have stepped up efforts to identify and document separated and unaccompanied children with Save the Children International since 8 January 2014. So far a total of 21 unaccompanied children have been identified, of which 8 children have been reported missing by their parents or regular care givers and 2 children have been reunified with their parents. Emergency supplies prepositioned include 10 recreational kits, 20 hygiene kits, and 20 CFS kits and a location to set up a Child Friendly Space to conduct recreational activities

**Education:** In Lakes and Warrap states, UNICEF and partners have made arrangements to conduct an assessment to identify and register displaced learners in the IDP camps. Options are considered to provide psychosocial support services and education that can build life skills and promote peace building messages to strengthen resilience and provide coping mechanisms to the affected children and youth in IDP camps across the country, UNICEF is engaging with Ministry of Education on the facilities that might be destroyed or occupied by the warring parties.

## Communications for Development (C4D)

The promotion of the behaviours and key survival practices covering Immunization, Nutrition, WASH, Separation of children, GBV, HIV/AIDS, are being implemented through sectors and cluster partners. C4D will support Child Protection

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section in developing psychosocial strategy for the Juba camps, including revision of appropriate messages for Psychosocial, prevention of separation, Mine Risk Education and GBV. Integrated behaviour training was conducted with Hygiene promoters for cross sectoral response in Juba camps. As the response is being scaled-up, IEC materials are being modified and additional quantities will be printed to support community dialogue and social mobilization initiatives in the camps. Sectors are expected to endorse the response plan this week. Work is in progress to formalize a partnership to promote conflict resolution and social cohesion with a national radio network in collaboration with organizations experienced in conflict mitigation. In collaboration with WHO, UNICEF has started supporting Internews on the daily Humanitarian Aid Radio Programme aimed at people displaced outside the camps.

## Supply and Logistics

The Logistics Cluster is establishing a prepositioning hub at the Juba airport including a cargo consolidation point for uplifting of supplies by helicopter. The humanitarian hubs are now set-up in Juba; with the two camps operational in the two UNMISS bases. Fuel is beginning to be an issue in the country. The fuel provision agreement that UNICEF has with UNMISS has been expanded to include sectoral needs and support initiatives to the Government.

## Media and External Communication

Over the past week, Sky News Arabia interviewed the Representative and visited Topping compound looking at UNICEF's work. Japan's Mainichi newspaper covered Child Protection issues at the UN House camp in Juba. Swedish Radio and Voice of America Television visited the Topping compound to do stories about people in the camps, including UNICEF work. Strategic Communications arranged a small media event at the holding of exams on the UN bases, at which UNICEF staff talked to Radio Miraya and UNMISS Television, AP, AFP, Irin and Australian ABC. Strategic Communications issued a press release about the exam; submitted a blog to the UK's Guardian newspaper about UNICEF's work in the Juba camps; and continues to support the UN Communication Group in documentation of UN and UNICEF support to communities, developing background information, key messages, human interest stories, photographs and social media.

## Security

The humanitarian crisis in South Sudan deepened between 8 and 10 January, with heavy fighting in Jonglei and Unity states and sporadic clashes in Central Equatoria and Upper Nile states. Thousands of people have been killed or injured in the fighting. Partners continued to receive troubling reports of civilians being targeted in killings, harassment and destruction of property, including based on ethnic identity. Meanwhile, Fresh fighting in Malakal as of 14 January will likely result in additional casualties. Looting of UN and NGO offices, vehicles and warehouses has further constrained humanitarian capacity

## Funding

In addition to the pledge of US\$ 4 million received from USAID/OFDA, UNICEF has received a contribution of US\$300,000 for WASH activities from the Republic of Korea and US\$162,000 in thematic funding from the United Kingdom Committee for UNICEF. UNICEF South Sudan greatly appreciates these contributions received from the donors. The current funding gap for this crisis stands at US\$ 31.5 million- a funding gap of 99 per cent against the required needs.

Funding Requirements for a period of 3 months (January-March 2014)			
Appeal Sector	Requirements in USD**	Funds received in USD*	Funding gap %
Nutrition	2,229,711	462,866	99%
Health	3,200,912		
WASH	16,517,805		
Child Protection & GBV	7,202,637		
Education	2,205,426		
Cluster Coordination	587,680		
<b>Grand Total</b>	<b>31,944,171</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: 22/01/2014

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