UNICEF as WASH Cluster lead agency provides a comprehensive WASH response on multiple fronts, implementing an emergency response in and outside the PoCs, as well as responding to the demand for WASH services in other less-affected areas to prevent the water borne diseases. UNICEF manages the core WASH Cluster supply pipeline, with over 1.5 million people reached with WASH core pipeline supplies in 2015, including soap, buckets and water purification tablets.

**Access to water:** In 2015, UNICEF supported 540,328 people to access safe water through water trucking; drilling, repairing and rehabilitating boreholes; and providing household water treatment products. In collaboration with WASH Cluster partners, residents of the PoCs in Bentiu, Juba, Malakal, Bor and Wau and the IDP site in Mingkaman continue to access safe water based on agreed emergency standards. The Bentiu PoC water network system is now fed by nine UNICEF-drilled boreholes, ensuring at least 14 litres of safe water per person per day. In 2015, UNICEF also repaired or rehabilitated water points benefitting 55,520 people in the urban areas Bor, Rumbek, Aweil Centre, Torit, Yambio and Bentiu Town.

**Access to sanitation:** A total of 297,040 IDPs and host community members were provided with access to safe sanitation facilities in 2015. Sanitation facilities are designed to mitigate the risk of gender-based violence. Solid waste management continues in Bentiu, Bor, Malakal and Juba PoCs, with includes 1,000 latrines completed through UNICEF direct implementation in Bentiu PoC, serving almost 50,000 people; and an additional 500 latrines were constructed by UNICEF implementing partners.

**Community-Led Total Sanitation (CLTS):** UNICEF continues to support demand-driven approaches to sanitation and hygiene improvement, through CLTS which reached 26,628 people in 80 newly Open Defaecation Free villages with safe sanitation in 2015.

**Hygiene Promotion:** The 2015 Global Hand Washing Day reached an estimated two million people with key hygiene messages. UNICEF is aiming to continue sharing such messages on a continuous basis through popular media such as radio and through School WASH Clubs in 2016.

**Cholera Response:** There were 1,818 cases of cholera reported in 2015, including 47 deaths. UNICEF supported Cholera Treatment Centres and Oral Rehydration Points in Juba, Jonglei and Eastern Equatoria with WASH supplies (chlorine, buckets, soap, chlorine tablets etc.) and solid waste disposal. UNICEF also provided Juba City Council with chlorine to ensure all water tankers filling up along the Nile were selling clean water. Over 890,000 people were reached with lifesaving hygiene promotion messages during the outbreak.

**Guinea Worm Eradication:** In 2015 major progress was made in the final push towards the eradication of Guinea Worm. 245,785 people in affected areas were provided improved drinking water through the construction and installation of 73 new water facilities and rehabilitation of 60 non-functional water points. These efforts help reduce cases from 70 in 2014 to 5 in 2015.

**WASH in Schools and Health Centres:** Gender-sensitive latrines for girls and boys were constructed for 38,800 students in 53 schools in 2015. For girls, the latrine blocks included a shower/changing room for menstrual hygiene management, empowering girls to enroll, stay in school and complete primary education.

Additionally, 5,500 people benefitted from improved access to safe drinking water in Yambio State Hospital, Juba Teaching Hospital and Al Sabbah Children’s Hospital through the rehabilitation of the existing water facilities. In Juba Teaching Hospital, where there have been regular water shortages, UNICEF installed a submersible pump to pump water to an elevated tank for use during water shortages.
The Situation of Children

Providing expanded, improved and sustainable WASH services is crucial for all other development and humanitarian processes, and, as such, is a national priority. Despite the critical impact WASH services have on other development sectors, the overall budget allocation for WASH services is low. The current economic situation will further roll back gains in providing access to safe water if concerted efforts are not made to support the sector with adequate funding and capacity.

The conflict experienced from 2013 through 2015 worsened what was already some of the worst access to safe water in the world. Data available before the crisis showed that the national coverage for both water and sanitation was already very low at 41 per cent for water and 14 per cent for sanitation, while improved hygiene was negligible. As of December 2015, most of the urban water systems in affected areas were not functioning due to lack of maintenance and looting, leaving communities with few options to access safe water. Lack of accessible safe water across the country has put children at increased risk from water borne diseases such as diarrhoea, cholera and hepatitis E.

Over 86 per cent of the population in rural and urban areas practice open defecation, and the few existing sanitary facilities are in disrepair. Open defecation rates are high and have been exacerbated by the displacement of the 1.7 million IDPs, meaning that gains made in open defecation-free (ODF) villages have been reversed.

The worsening economic crisis has more than doubled the cost of delivering WASH services leaving the poor even more vulnerable to water borne diseases. Institutional capacity has fragmented and communities, unable to afford clean water, have reverted to using contaminated water sources. Rising fuel prices are also increasing the cost of water trucking, still required in IDP sites such as Juba PoC. The Wau Urban Water System was temporarily shut down due to lack of funds for fuel in early 2016, increasing the chance of disease outbreaks and cases of acute malnutrition. While UNICEF has provided fuel and water treatment chemicals, a long-term solution is still required.

Due to insecurity in Greater Upper Nile and Western Equatoria, WASH partners’ capacity on the ground is limited and access to those in need of WASH services has been constrained. Continued insecurity has also meant inflows of IDPs into PoCs and host communities, further constraining access to appropriate WASH facilities. In particular, the regular influxes of IDPs into PoCs such as Bentiu and Malakal and into Mingkaman IDP camp are exerting pressure on the WASH infrastructure making the operation and maintenance of such systems expensive due to the frequent breakdowns.

The Situation in Numbers

| 41% | 14% | <6L | 86% | 40% |
| coverage for water nationally | coverage for sanitation | of water per day available in most rural areas | of the population practice open defecation | WASH facilities in conflict-affected areas destroyed |
Priorities for 2016

Hard to reach areas, host communities and areas of return: UNICEF is increasing partnerships to expand WASH services in hard to reach areas, aiming to reach over 1,200,000 people. Partnerships will be expanded in areas reached through RRMIs, increasing the sustainability of the RRM. Special consideration will be given for areas of return where UNICEF will rehabilitate water supplies and undertake CLTS and hygiene promotion.

Response in PoCs and IDP sites: Existing water facilities will be upgraded to ensure sustainable and quality services taking in consideration gender specific needs. Hygiene promotion, water quality monitoring and outbreak preparedness, response and control will be implemented.

Community-Led Total Sanitation: CLTS will be scaled up in Western Bahr el Ghazal, Northern Bahr el Ghazal and Central Equatoria states. National and state-level strategies will be completed. In 2016, UNICEF will target 150 villages with 120,000 people living open defecation free areas.

Guinea Worm Eradication: UNICEF will continue upgrading water system in Guinea Worm-affected areas, aiming to reduce the total number of cases to zero by providing water to 75,000 people. Eighty-one new water points will be provided in 2016.

Key Flagship 2016: Rehabilitation of Urban Water Systems

Massive destruction and neglect of urban water systems during the conflict, combined with the displacement of trained water technicians, has meant that urban water systems will need to be reestablished. UNICEF will work with local authorities to rehabilitate water systems in Bentiu (to encourage returning residents), Bor and Pibor expected to benefit over 345,000 people. A more sustainable system is being designed for Juba UN House to reduce the cost of water trucking.

Funding required for 2016

US$ 38,500,000

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US$ 2,467,931

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More information on the situation in South Sudan and UNICEF response, including the latest situation reports, can be found at www.childrenofsouthsudan.info