Highlights

- UNICEF has taken a lead role in the emergency response since the outset of fighting in Malakal PoC – releasing supplies, deploying staff and supporting partners:
  - Two mobile clinics are fully set up and operational by UNICEF implementing partners IMC and IOM. In addition to mass casualty management, both centres are providing consultations for common illnesses, immunization, ANC, and delivery services. From 21-23 February, 1,332 consultations were conducted.
  - Nutrition services have resumed with 16 children newly admitted.
  - A confidential space has been created within the IMC’s temporary health facility for GBV survivors.
  - UNICEF provided the supplies for 48 latrines and is increasing hygiene promotion. UNICEF will lead the WASH response in Malakal Town; a SWAT is under construction.
  - A Child Helpdesk has supported 96 temporarily separated children. Psychosocial support activities are on-going.

- The Ministry of Education, Science and Technology with UNICEF support launched the Back to Learning (BTL) 2 Campaign in Juba with over 4,000 children in attendance. Speakers highlighted the need for massive investment in education sector to ensure that all children have access to quality education. BTL 2 will target 590,000 children in 2016.

UNICEF’s Response with Partners

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Cluster for 2016</th>
<th>UNICEF for 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cluster Target</td>
<td>Cumulative results (#)</td>
</tr>
<tr>
<td>Nutrition: # of children 6 to 59 months with severe acute malnutrition admitted for treatment</td>
<td>161,958</td>
<td>12,866</td>
</tr>
<tr>
<td>Health: # of children aged 6 months to 15 years in conflict-affected areas vaccinated against measles</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH: # of people provided with access to safe water as per agreed standards (7.5-15 litres per person per day)</td>
<td>2,300,000</td>
<td>352,433</td>
</tr>
<tr>
<td>Child Protection: # of children and adolescents reached with critical child protection services</td>
<td>721,218</td>
<td>49,113</td>
</tr>
<tr>
<td>Education: # of children and adolescents aged 3 to 18 years provided with access to education in emergencies</td>
<td>446,000</td>
<td>108,429</td>
</tr>
</tbody>
</table>

1.69 million
People internally displaced since 15 December 2013
(OCHA, Humanitarian Snapshot dated 10 February 2016)

907,447*
Estimated internally displaced children under 18 years

Outside South Sudan
631,693
Estimated new South Sudanese refugees in neighbouring countries since 15 December 2013 (UNHCR, Regional Refugee Information Portal, dated 19 February, 2016)

Priority Humanitarian Funding needs January - December 2016
US$ 154.5 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 25 FEBRUARY 2016

Situation Overview & Humanitarian Needs

Over 2.3 million people have fled their homes since December 2013, 1.69 million of whom remain displaced inside South Sudan. According to UNMISS, the estimated number of civilians seeking safety in six Protection of Civilians (PoC) sites is 197,689 including 119,476 in Bentiu, 27,950 in Juba UN House, 47,033 in Malakal, 2,289 in Bor, 700 in Melut and 234 in Wau.

Fighting which broke out in the Malakal PoC on the night of 17 February and continued intermittently throughout 18 February has had a wide-ranging impact on humanitarian operations, with health, nutrition, WASH and education services affected. UNICEF and partners have taken a lead role in the response to arising needs, as detailed throughout the report. Violence was also experienced in parts of Western Equatoria, Western Bahr el Ghazal and Jonglei States, after a month of relative calm.

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. To date, UNICEF has reached 974,723 people, including 191,989 children under 5, through 76 RRM missions. UNICEF has deployed six missions in 2016, all to Unity State where access to populations previously cut-off from humanitarian assistance is being re-established.

In Jazeera, Rubkona County, during the reporting period, a UNICEF RRM team screened 4,510 children for malnutrition, with a proxy global acute malnutrition (GAM) rate of 5.0 per cent (0.7 per cent SAM). Through other nutrition interventions, 2,720 children received Vitamin A supplementation and 2,194 were dewormed while 2,576 caregivers received messaging on infant and young child feeding best practices. Additionally, 5,926 children were vaccinated against measles and 5,939 against polio with 607 pregnant women receiving tetanus toxoid vaccine (200 of these women also received clean delivery kits). 273 primary healthcare consultations were provided, 28 per cent to children under 5. Fourteen missing children were reported and 456 children benefited from psychosocial support. WASH and other essential supplies were distributed to 2,000 households, reaching an estimated 10,000 beneficiaries. The supplies distributed included survival kits, soap and water purification tablets.

Summary Analysis of Programme Response

HEALTH: UNICEF continues support to its partners to deliver key integrated child and maternal health care services across the country. Interventions focus particularly on children under 5 and pregnant women. In the past two weeks, 44,066 consultations were provided in Bentiu, Malakal and Bor PoCs, Mingkaman IDP camp, Torit, Yambio and Aweil. Thirty-seven per cent of consultations were for children under 5.

After fighting erupted in Malakal PoC on 17 February, health partners in the PoC, including UNICEF and its operational partners IOM and IMC, conducted a quick assessment of the situation and rapidly established two emergency mobile clinics on 19 February in areas to which civilians had fled. UNICEF provided its partners with tents and medical supplies including primary health care centre kits, midwifery kits, resuscitation kits, anti-malarial drugs, rapid diagnostic malaria test kits, surgical kits, blankets and clean delivery kits. With the tents provided by UNICEF, a separate space was created to provide treatment to IDPs who sustained injuries as a result of the conflict, with 345 patients receiving daily wound care. Two delivery spaces were set up in containers, where an average of four deliveries are conducted each day. Tents have been set up in the two locations where post-partum care and observation are carried out. Clinics will be set up in Malakal Town as the security situation allows.

Outpatient consultations range between 150-200 patients per day in each of the two clinics. Common conditions are gunshot wounds and other trauma injuries, with malaria, acute respiratory infection (ARI) and acute watery diarrhoea
being the other major reasons for consultations. From 21-23 February, 1,332 curative consultations were carried out in the two outreach clinics with ARI as the leading reason for consultation, followed by AWD and malaria. In addition, 24 pregnant women attended ante-natal care (ANC) services and 20 deliveries were conducted under the supervision of skilled birth attendants.

Across UNICEF’s area of primary health care interventions, except in Jonglei, malaria continues to be the leading cause of morbidity in children under 5, representing 33 per cent of curative consultations at UNICEF-supported health facilities. In Jonglei, ARI accounted for the greatest number of consultations. UNICEF has stepped-up the fight against malaria by increasing the distribution of malaria test kits and drugs for the management of malaria cases as well as long-lasting insecticide treated nets (LLITNs). During this reporting period, over 2,097 LLITNs were distributed for malaria prevention.

Through the integrated community case management programme in Bor PoC and Mingkaman, UNICEF reached 922 children in their communities with lifesaving basic health care services in the last two weeks, a 48 per cent increase from the last reporting period. Fifty per cent of the children reached were girls. Sixty-four per cent of the children had high fevers, in line with the general trend of an increase in malaria. Nineteen children with danger signs were referred to health facilities.

UNICEF also continued to support partners providing high impact maternal and newborn health services including prevention of mother-to-child transmission of HIV (PMTCT). In this reporting period, 4,342 pregnant women were provided with ANC services, 28 per cent more than in the previous reporting period. During ANC visits, 2,041 pregnant women were provided with two or more doses of intermittent presumptive treatment for the prevention of maternal anaemia. The number of mothers delivering in the hands of skilled personnel was 1,029, a 27 per cent increase from the last two weeks. 1,527 mothers attended post-natal care for mother and child. In terms of PMTCT, 947 pregnant women were counselled on HIV. Ninety-seven per cent were tested and 14 (1.5 per cent) tested positive. Nine of the pregnant women who tested positive were enrolled on anti-retroviral treatment.

Thirty-one health workers were trained in Uror, Nyirol and Akobo counties of Jonglei State on the introduction of the Inactivated Polio Vaccine (IPV) into routine immunization, bringing the total to 90 health workers trained so far from 7 of the 11 counties in Jonglei State and 48 trained in Upper Nile (Maban and Malakal). The vaccine was already introduced throughout the Greater Equatoria and Greater Bahr el Ghazal States in December 2015 and its roll-out is ongoing in the conflict affected states as insecurity and inaccessibility allows.

Vaccination services are ongoing in Malakal, Juba, Bor and Bentiu PoCs and Mingkaman IDP site. UNICEF supports the provision of vaccines, cold chain equipment, social mobilization, supportive supervision and training of health workers in these locations. In the reporting period, 2,671 children were reached with Pentaivalent 3 vaccine; 2,860 with measles vaccine; and 2,409 pregnant women were reached with at least two doses of Tetanus Toxoid vaccine through routine immunization in the PoCs and IDP sites. UNICEF continues to provide technical support for implementation of routine immunization activities at national and state levels. UNICEF is currently exploring strategies for reaching children in cattle camps with routine immunization services through collaboration with FAO.

A total of 125 suspected measles cases have been reported this year, of which 14 cases have been confirmed from Mayendit, Rumbek Centre, Mangatain, Juba PoC, Gogrial West, Aweil Centre, Agok, Leer and Mankien. Under the leadership of the Health Cluster, UNICEF is supporting implementing partners with vaccines for outbreak response. Measles vaccination campaigns are ongoing in Mankien, Leer and Agok.
NUTRITION: In January 2016, 12,866 children were enrolled into programmes for the treatment of severe acute malnutrition (SAM) in South Sudan, 8 per cent of the annual target of 166,222. In Malakal PoC, fighting during the reporting period caused disruptions in nutrition treatment, including damage to the IMC clinic and nutrition facility and looting of key supplies, however, nutrition treatment has since resumed with 16 children newly enrolled.

Screening continued for children inside Bentiu PoC, new arrivals and children in areas surrounding the PoC. For the 5,141 children under 5 screened for malnutrition in Bentiu PoC, the proxy SAM rate was 3.3 per cent and proxy MAM rate was 5.6 per cent. A total of 651 children under 5 arrived into the PoC from Mayom, Guit, Rubkonka and Mayendit during the reporting period and the overall proxy SAM was less than 1 per cent. Screening was also conducted in Bentiu Town and Rubkonka County, reaching 1,687 children with a proxy SAM rate of 2.6 per cent and proxy MAM of 19.5 per cent. A total of 596 children were enrolled in outpatient therapeutic programmes (OTPs) in Bentiu PoC during the reporting period along with 51 admitted to the Stabilization Centre.

During the reporting period, partners in Koch started limited interventions including one OTP and a SMART survey. A SMART survey was also completed in Leer. There are now 229 OTPs functional in Greater Upper Nile along with 29 Stabilization Centres. In Jonglei State, there are Stabilization Centres in all counties except Pibor. Given the size and expansiveness of Pibor county there should be at least one Stabilization Centre.

In Jonglei, 30,065 children under 5 were screened for malnutrition with a proxy SAM rate of 7 per cent and proxy MAM rate of 12 per cent. A total of 569 children with SAM were admitted for treatment. Twenty cases of oedema were identified, which is of concern as these children are likely to have been identified quite late and have a higher chance of dying from malnutrition. Community mobilization efforts are being increased.

Social mobilizers are continuing door to door visits to identify children with malnutrition in the traditionally high-burden state of Warrap, with 87,535 children screened to date. During the reporting period, 12,884 children were screened with a 6 per cent proxy SAM rate and 26 per cent proxy MAM. Warrap’s six counties and Abyei Administrative Area have 10 Stabilization Centres and 89 OTPs to which children with acute malnutrition are referred.

In response to the rapidly deteriorating economic situation in the country, UNICEF continues multisectoral contingency planning with WFP and FAO. Focus interventions will include increasing the number of OTP treatment sites and increased community mobilization activities to identify children for treatment in affected urban areas. Around 5,800 children under five years have been forecasted to need treatment. Prevention of malnutrition will be done through WASH and IYCF themed prevention messages targeting caregivers of children under 5.
The fighting in Malakal PoC from 17 to 19 February resulted in the displacement of IDPs to the old PoC in UNMISS log-to hygiene promotion services. In 2016, 294,296 people have been provided access to safe water, 118,129 to improved sanitation and 101,403 one in Nyirol, providing safe drinking water to over 2,000 people in these communities. Twenty Hand Pump Mechanics Activities in Lekuangole, Boma, Pochalla and some counties of Northern Jonglei State have slowed due to insecurity. One hand pump was fixed during the reporting period to provide over 500 people with safe water. UNICEF has also started repairing hand pumps in Kadet in Guit County where pumps in Rubkona Town and completed construction of another in the IRC Primary Health Care Centre in Rubkona, is also complete as well as painting of the storage tanks with anti-rust. UNICEF supported the repair of three hand pumps in Rubkona and recently supplied 2,000 people with safe water. UNICEF, in partnership with Nile Hope, rehabilitated four broken boreholes including two in Akobo, one in Fangak and one in Nyirol, providing safe drinking water to over 2,000 people in these communities. Twenty Hand Pump Mechanics were trained in Nyirol County to facilitate repairs and maintenance of the water hand pumps in collaboration with village water management committees. In the Greater Pibor Administrative Area, 1,622 people were sensitized on total community led sanitation and another 700 people on good hygiene practices in Lekuangole. Soap was distributed to 1,800 people in the area as well as 250 school children Lekuangole Primary School. An additional 620 people took part in hygiene promotors and community volunteers that was supported by WASH partner Concern International is compete. Rehabilitation works for the Bentiu Water Treatment Plant are ongoing. Site clearance and cleaning of the compound is also complete as well as painting of the storage tanks with anti-rust. UNICEF supported the repair of three hand pumps in Rubkona Town and completed construction of another in the IRC Primary Health Care Centre in Rubkona, supplying 2,000 people with safe water. UNICEF has also started repairing hand pumps in Kadet in Guit County where one hand pump was fixed during the reporting period to provide over 500 people with safe water.

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In Mingkaman, UNICEF partner, RUWASA continues to provide safe water to the entire IDP camp population with 476,600 litres daily, thus at least 9 litres per person per day. In addition, 25,757 people were reached with key hygiene promotion messages.
In Lakes State, three hand pumps were rehabilitated in Wulu County and three in Rumbek Centre County providing access to safe water for over 3,000 people in these counties. Wau Town is currently experiencing an acute shortage of water as a result of shallow hand dug wells drying up at the peak of the dry season. At the same time, Wau Urban Water Corporation supply has been interrupted by high fuel prices. The influx of IDPs from three Wau County Payams (Baggeri, Bazi and Bassilia) into the Town as a result of skirmishes is also contributing to the water stress. UNICEF supported the Western Bahr el Ghazal State Directorate of Water and Sanitation in Wau to rehabilitate 15 water points in Massena (3), Hai Kosti (5) and Lokoloko (7), re-establishing access to safe drinking water to 7,500 IDPs and host community members. Three water points were also repaired in schools, re-establishing access to safe drinking water for 1,500 students and teachers. Soap was distributed to 3,070 people in Wau PoC, the IOM Way Station and Abuny Abuny IDP Camp.

**EDUCATION:** The 2016 academic session has now begun, with registration of children, which started in the middle of January, ongoing. During the fighting in Malakal PoC, two semi-permanent classrooms in Sector 2 which are managed by a UNICEF partner, Intersos, were burnt down, affecting 800 students (35 per cent girls). Three stores of education materials were also looted. Due to the exodus of families from the PoC, all the schools in Malakal PoC are closed, affecting more than 7,000 children (35 per cent girls). Plans are underway to re-open existing schools as soon as possible by rehabilitating the site lost in Sector 2 and advocating for additional space.

In response to the ongoing insecurity in Wau, the Wau County Education Department has announced on the radio that all IDP children can register at the County Education Office. The registration process started 8 February and will continue until the end of the month. So far, 1,018 (47 per cent girls) displaced school children have been registered and will attend schools in the host community. In Western Equatoria, registration still has not begun in Mundri East and Mundri West Counties which have been the most volatile in recent months.

In Pibor town the situation remained tense throughout the reporting period. This has adversely affected registration in six schools in Pibor town, which were forced to close on 22 February. Education materials (school-in-a-box and teacher’s kits) were distributed in 14 schools in Gumuruk and Vertet by UNICEF and its partners. Similar activities were reported in Bentiu Town and PoC where partners reported distribution of supplies in schools benefitting 1,300 children (35 per cent girls).

The Ministry of Education, Science and Technology (MoEST) launched the Back to Learning (BTL) 2 Campaign in Juba with over 4,000 children from six schools attending along with H. E. Martin Elia Lomuro, Minister of Cabinet Affairs, the Education Minister, partners, donors and embassy officials. The theme of the event was to work together to get all children into schools. Speakers highlighted the need for massive investment in education sector to ensure that all children have access to quality education. BTL 2 will target 590,000 children in 2016.

Following the event, launches will be held at state and county levels. A BTL campaign was held at Bentiu A Primary School and attended by 650 children, youth and adults. Training for teachers and Parent-Teacher Association (PTA) members was also carried out in Bentiu. Sixty teachers participated in a ten-day refresher training to enhance effective classroom management and mainstream peace education. Fifty PTA members were trained in school monitoring and management. UNICEF’s partner for training of teachers on Education in Emergencies, Windle Trust, has been continuing with a three month training for 100 teachers (27 per cent female) from Renk County. Similar training is going on in Maban for 75 teachers (24 per cent female). So far this year, 291 teachers and PTA members have been trained.

**CHILD PROTECTION:** So far in 2016, 42,608 children have been reached with critical child protection services, including psychosocial support, case management and prevention messaging, including an additional 22,813 new children reached in the past two weeks. An additional 1,940 beneficiaries (80 per cent children) have received mine risk education. Access and capacity constraints continue to affect the response in southern Unity State, while new challenges have arisen in Malakal, following the violence and destruction that occurred in the PoC. The subsequent
displacement has also affected partner agencies, whose staff were directly affected, and in some cases, are yet to report to work.

In response to the events in Malakal, UNICEF and its partners established a Child Helpdesk within the PoC to respond to temporary family separation. As of 23 February, 96 children temporarily separated from their parents have been assisted at the Helpdesk, all but one of whom have been reunified with their families. Partners are also seeking to follow up all children on the existing caseload of separated and unaccompanied children to ensure that they are located and safe, with 96 of the total 838 registered children located already. In Wau Shilluk, 80 mothers, separated from their children in Malakal PoC, were also registered, but as river access to Wau Shilluk is still blocked, reunifications are currently not possible. UNICEF and its partners have also scaled up awareness raising to prevent further family separation, and continue to work on verifying cases and tracing family members outside the PoC and to provide temporary overnight care to unaccompanied children whose parents could not be found on the same day. There also remains a significant population in Malakal town and whilst initial assessments are being carried out this week, the expansion of FTR (and other child protection services) is likely to be required to cover Malakal town and surrounding areas where some of the former POC populations are now living. Additional efforts are now also underway to scale up mine risk education and general mine risk awareness in the Malakal PoC and surrounding areas, in response to reports of bullets and other unexploded ordnance having been found in the aftermath of the recent fighting and destruction in the area.

Following the destruction of one (of three) women’s centres and the looting of supplies in Malakal PoC, UNICEF and its partners established a temporary health facility with a confidential space to provide psychosocial support and case management to GBV survivors. A complementary referral pathway was developed and UNICEF and partners have been reaching out to households within and outside of the PoC and broadcasting referral pathway details over the INTERNEWS radio network.

Over the last two weeks, conflict in the Greater Pibor Administrative Area has continued to escalate, resulting in displacement, the destruction of much of the marketplace and the cessation of livestock distribution. As a result, the total number of children receiving livestock remains unchanged (1,484 released children and 1,507 other vulnerable children in the community. Only minor gains were made in follow ups and vocational training. 1,288 children (71 per cent of the total caseload) have received follow-up visits, however, UNICEF is now supporting partners to re-prioritize follow up lists, taking the recent displacement and violence into account and ensuring that the children most vulnerable to re-recruitment are being prioritized. Brick-making training has started with 59 children, and other vocational training are scheduled to start in March. In the last two weeks, an additional 90 children have been allocated land for group farming in Pibor and Vertet by the local government, bringing the total to 250 children.

In the rest of the country, the number of registered unaccompanied, separated, and missing children increased by 141 cases in the past two weeks, bringing the total caseload to 12,048 children (47 per cent girls and 72 per cent unaccompanied and separated children). Of all the 12,048 cases, 72 per cent (8,689 cases) remain active and open, requiring regular monitoring visits, family tracing action, and/or post-reunification and reintegration support. As a result of increased follow-ups and greater emphasis on FTR case management processes, 3,765 children have been reunified with their families, of which 47 family reunifications were recorded over the past two weeks.

UNICEF and a partner have been providing clinical management of rape (CMR) training to increase availability of life-saving GBV response services such as CMR and psychosocial support services in areas with major gaps. During this period, two CMR trainings in Pariang and Akobo were conducted for 71 participants, bringing the total number of trained health workers to 188 in over 50 health facilities. Four more CMR trainings are planned for the first half of 2016.

UNICEF and partners continue to provide psychosocial support activities and GBV awareness sessions. In the last two weeks, 2,372 people received GBV services and lifesaving information. In Akobo, a baseline survey was conducted and the finding highlighted the limited access to services and referral pathways were subsequently reviewed, modified and updated to improve accessibility to services.

COMMUNICATION FOR DEVELOPMENT (C4D): The Ministry of Health, WHO, UNICEF and partners continue to prepare for the roll out of Meningitis A campaign, scheduled to take place from 15 - 25 March. The campaign will target 4.9 million people (1-29 years old) in the Greater Equatoria and Bahr el Ghazal regions. UNICEF is supporting the effort through social mobilization and communications activities that include a radio campaign with experts, and celebrities such as footballers and musicians; and engagement with community and religious leaders. In CES, UNICEF together
with state Ministry of Health, WHO and partners conducted a Meningitis A micro-plan and implementation approach training of trainers that involved 31 trainers, including county medical officers, EPI supervisors and social mobilizer supervisors, from six counties and one PoC.

**SUPPLY & LOGISTICS**: In response to the crisis in Malakal PoC, trucks loaded with health, nutrition and child protection supplies including Emergency Food (BP-5), hospital beds, blankets, medicines and tents were dispatched to Bor for onward air-lifting to Malakal by the Logistics Cluster. UNICEF is in the process of loading WASH supplies to send to Bor for airlift as part of the same crisis response. Education supplies are also being consolidated to form part of the package required to support affected children in the PoC.

Fifteen trucks with multi-sectoral supplies arrived in Bentiu this week and are in the process of being offloaded. An additional 200MT of multi-sectoral supplies will be loaded for Bentiu as part of the dry-season pre-positioning exercise.

Various nutrition supplies which included ready-to-use therapeutic food and therapeutic milk for malnourished children were dispatched to Nile Hope in Leer, Medair, AFD and Al Sabbah Hospital. Vaccines and related materials including carriers and syringes were delivered to Kuajok and Torit for immunization campaigns using chartered flights. The State Ministry of Health (SMoH) of Central Equatoria received ten of diarrheal kits and 30,000 oral rehydration salt sachets from UNICEF. The Logistics Unit also dispatched 40MT of supplies to Bor Teaching Hospital to replenish the drugs and medicines stored at the health facility for use by the population in and around the State.

**FUNDING**: Against the HAC requirement of US$ 154.5 million, UNICEF has received US$ 24.1 million (16 per cent funded). UNICEF would like to thank the Government of the United States for the generous contribution of US$ 4 million for the continued support of WASH interventions. A contribution of EUR 3 million has also been received from the Government of Germany to further scale up of maternal and child health interventions, UNICEF South Sudan is greatly appreciative of this generous support from Germany. In addition, a contribution of US$ 72,000 has been allocated to South Sudan against the global funding available from the Government of Belgium for children and armed conflict.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements in US$ **</th>
<th>Funds Received in US$*</th>
<th>Funding Gap</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>US$</td>
<td>US$</td>
<td>%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>30,095,196</td>
<td>8,356,778</td>
<td>21,738,418 72%</td>
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<tr>
<td>Health</td>
<td>22,869,759</td>
<td>6,081,842</td>
<td>16,787,917 73%</td>
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<tr>
<td>WASH</td>
<td>38,500,000</td>
<td>6,467,931</td>
<td>32,032,069 83%</td>
</tr>
<tr>
<td>Child protection</td>
<td>36,000,000</td>
<td>322,244</td>
<td>35,677,756 99%</td>
</tr>
<tr>
<td>Education</td>
<td>27,000,000</td>
<td>2,945,074</td>
<td>24,054,926 89%</td>
</tr>
<tr>
<td>Total*</td>
<td>154,464,955</td>
<td>24,173,868</td>
<td>130,291,087 84%</td>
</tr>
</tbody>
</table>

*The requirement for cluster coordination costs has been included in sub-costs for the nutrition, WASH, child protection and education sectors.

Next Sitrep: 10 March 2016

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

UNICEF South Sudan Facebook: [www.facebook.com/unicesouthsudan](http://www.facebook.com/unicesouthsudan)


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### Cluster for 2016 | UNICEF and partners for 2016
<table>
<thead>
<tr>
<th>Target (Jan-Dec)</th>
<th>Results (Jan)</th>
<th>Target (Jan-Dec)</th>
<th>Results (Jan)</th>
<th>Change since last report</th>
</tr>
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<tbody>
<tr>
<td># of children aged 6 to 59 months with severe acute malnutrition (SAM) admitted for treatment</td>
<td>161,958&lt;sup&gt;1&lt;/sup&gt;</td>
<td>12,866</td>
<td>166,222&lt;sup&gt;1&lt;/sup&gt;</td>
<td>12,866</td>
</tr>
<tr>
<td>% of children aged 6 to 59 months with SAM admitted for treatment recovered</td>
<td>&gt;75%</td>
<td>89.3%</td>
<td>&gt;75%</td>
<td>89.3%</td>
</tr>
<tr>
<td># of children 6 to 59 months having received vitamin A supplementation</td>
<td>2,066,708</td>
<td>6,855</td>
<td>2,066,708</td>
<td>6,855</td>
</tr>
<tr>
<td># of pregnant and lactating women reached with infant and young child feeding (IYCF) messages</td>
<td>567,366</td>
<td>74,656</td>
<td>567,366</td>
<td>74,656</td>
</tr>
<tr>
<td># of children aged 6 months to 15 years in conflict affected areas vaccinated against measles</td>
<td></td>
<td></td>
<td>1,117,904</td>
<td>24,139</td>
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<tr>
<td># of children under 15 years in conflict affected areas vaccinated against polio</td>
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<td></td>
<td>1,221,772</td>
<td>28,826</td>
</tr>
<tr>
<td># of children under 5 years, pregnant women and other vulnerable people receiving a long-lasting insecticide treated net (LLITN)</td>
<td></td>
<td></td>
<td>400,000</td>
<td>16,377</td>
</tr>
<tr>
<td># of pregnant women attending antenatal care (ANC) counselled and tested for HIV</td>
<td></td>
<td></td>
<td>520,011</td>
<td>63,923</td>
</tr>
<tr>
<td># of people provided with access to safe water as per agreed standards (7-15 litres per person per day)</td>
<td>2,300,000</td>
<td>352,433</td>
<td>560,000</td>
<td>294,296</td>
</tr>
<tr>
<td># of people provided access to appropriate sanitation facilities</td>
<td>1,100,000</td>
<td>107,742</td>
<td>345,000</td>
<td>118,129</td>
</tr>
<tr>
<td># of people reached with participatory hygiene promotion messages</td>
<td>800,000</td>
<td>101,403</td>
<td>35,574</td>
<td></td>
</tr>
<tr>
<td># of children and adolescents reached with critical child protection services&lt;sup&gt;5&lt;/sup&gt;</td>
<td>721,218</td>
<td>49,113</td>
<td>600,000</td>
<td>42,608</td>
</tr>
<tr>
<td># of unaccompanied and separated children (UASC) and missing children having received family tracing and reunification (FTR) services and family-based or alternative care since the beginning of the conflict</td>
<td>15,000</td>
<td>12,048</td>
<td>12,000</td>
<td>9,638</td>
</tr>
<tr>
<td># of children formerly associated with armed forces or groups and children at risk of recruitment enrolled in reintegration programmes</td>
<td>10,000</td>
<td>2,991</td>
<td>10,000</td>
<td>2,991</td>
</tr>
<tr>
<td># of people receiving gender-based violence (GBV) prevention and response services</td>
<td></td>
<td></td>
<td>80,000</td>
<td>13,097</td>
</tr>
<tr>
<td># of children, adolescents and other vulnerable people provided with knowledge and skills to minimize risk of landmines and explosive remnants of war (ERW)</td>
<td></td>
<td></td>
<td>300,000</td>
<td>10,228</td>
</tr>
<tr>
<td># of children and adolescents aged 3 to 18 years provided with access to education in emergencies</td>
<td>446,000</td>
<td>108,429</td>
<td>325,000</td>
<td>61,666</td>
</tr>
<tr>
<td># of temporary learning space (TLS) classrooms established</td>
<td>350</td>
<td>60</td>
<td>250</td>
<td>60</td>
</tr>
<tr>
<td># of teachers/educators/teaching assistants/parent-teacher association (PTA) members and school management committee (SMC) members trained</td>
<td>10,800</td>
<td>665</td>
<td>10,000</td>
<td>291</td>
</tr>
</tbody>
</table>

No change since last report is denoted by “-“

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1 Partner reporting rates remain below 100 per cent; UNICEF continues to work with its implementing partners to improve monitoring and reporting of results.
2 UNICEF annual targets for child protection and education are higher than those fixed in the Humanitarian Response Plan (HRP) as UNICEF requirements are higher than the inter-agency appeal.
3 The Nutrition Cluster target does not include refugee children who are covered under the Multi-Sector Refugee Appeal.
4 UNICEF’s nutrition response covers all children, including refugee children residing in the country.
5 Critical child protection services include psychosocial support delivered through Child Friendly Space (CFS) or community based mechanisms, case management and prevention messaging targeting children and adolescents at risk of recruitment, family separation or other child protection risks.