South Sudan SITUATION REPORT 5 MAY 2016

22 APRIL - 5 MAY 2016: SOUTH SUDAN SITREP #85

SITUATION IN NUMBERS

Indicators

<table>
<thead>
<tr>
<th>Cluster for 2016</th>
<th>UNICEF and implementing partners for 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UNICEF &amp; Target</td>
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<tr>
<td>Indicator</td>
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</tr>
</tbody>
</table>

**Nutrition**: # of children 6 to 59 months with severe acute malnutrition admitted for treatment

- Target: 161,958
- Cumulative: 53,775
- Target achieved: 33%
- Target: 166,222
- Cumulative: 53,775
- Target achieved: 32%

**Health**: # of children aged 6 months to 15 years in conflict-affected areas vaccinated against measles

- Target: 1,117,904
- Cumulative: 130,068
- Target achieved: 12%
- Target: 1,117,904
- Cumulative: 130,068
- Target achieved: 12%

**WASH**: # of people provided with access to safe water as per agreed standards (7.5-15 litres per person per day)

- Target: 2,300,000
- Cumulative: 594,265
- Target achieved: 26%
- Target: 2,300,000
- Cumulative: 397,902
- Target achieved: 71%

**Child Protection**: # of children and adolescents reached with critical child protection services

- Target: 721,218
- Cumulative: 89,186
- Target achieved: 12%
- Target: 600,000
- Cumulative: 88,062
- Target achieved: 15%

**Education**: # of children and adolescents aged 3 to 18 years provided with access to education in emergencies

- Target: 446,000
- Cumulative: 147,598
- Target achieved: 33%
- Target: 325,000
- Cumulative: 142,508
- Target achieved: 44%

Highlights

- The polio National Immunization Days (NIDs) of April 2016 have so far reached 2,601,535 children nationwide (87 per cent of the target), with delays in implementation in six counties in the conflict-affected states, namely, Pibor, Pochalla, Khorflu, Ulang, Mundri East and Mundri West. In addition, to implement the global switch from tOPV to bOPV, UNICEF supported transportation and distribution of 434,000 doses of bOPV to the seven stable states and 16 accessible counties out of 33 in the conflict-affected states.

- UNICEF and partners have admitted 53,775 children for severe acute malnutrition (SAM) from January to March 2016. This is a 40 per cent increase over the same period in 2015 and a third of the 2016 target. Over a third of the children were admitted from Northern Bahr el Ghazal, where the number of outpatient therapeutic programmes (OTP) sites has been increased to 180, providing treatment to children with SAM.

- In Unity State, the “Beyond Bentiu” strategy is progressing as UNICEF opened four primary schools in Guit County for the first time since fighting erupted in December 2013. So far 2,581 children (40 per cent girls) are attending the schools. With more Back-to-Learning 2 (BTL 2) campaigns taking place, the target of 5,000 children should be realized. Meanwhile, the majority of schools remain closed in Koch County as most people who fled the area have not yet returned.

1.69 million
People internally displaced since 15 December 2013
(OCHA, Humanitarian Snapshot 5 May 2016)

907,447*
Estimated internally displaced children under 18 years

Outside South Sudan
712,870
Estimated new South Sudanese refugees in neighbouring countries since 15 December 2013 (UNHCR, Regional Refugee Information Portal, dated 5 May, 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.

UNICEF’s Response with Partners

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South Sudan SITUATION REPORT 5 MAY 2016

Situation Overview & Humanitarian Needs
Over 2.4 million people have been displaced since fighting broke out in Juba in December 2013. This includes 712,870 people who have crossed into neighbouring countries. According to the UN Mission in South Sudan, the six Protection of Civilians (PoC) sites are currently sheltering 179,836 IDPs: 108,190 in Bentiu, 40,448 in Malakal, 27,990 in Juba, 2,289 in Bor, 700 in Melut and 219 in Wau.

Following the much awaited arrival of the first Vice President in Juba, the South Sudan Transitional Government of National Unity (TGoNU) was formed on 28 April in accordance with the Peace Agreement signed in August 2015. During the reporting period, the security situation remained relatively calm in most parts of the country except for some clashes in remote locations of Western Bahr el Ghazl and Western Equatoria States. However, the humanitarian situation has continued to deteriorate due to multifaceted reasons such as tribal conflicts, the decline of the economy, the disruption of livelihoods and a poor harvest resulting in displacement.

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 Rapid Response Mechanism (RRM) with WFP, UNICEF has reached 1,005,106 people, including 202,266 children under 5, through 82 RRM missions with 11 conducted in 2016. A RRM mission is currently deployed in Biil, Guit County in Unity State during 3-10 May. The RRM strategy is currently under review, assessing changes in the security, humanitarian and political context of the country. Through this mechanism, UNICEF continues to serve populations in hard-to-reach areas with urgent and lifesaving intervention with partners.

Summary Analysis of Programme Response

HEALTH: UNICEF continues to focus on health interventions that target diseases with the highest burden in terms of child health outcomes. The key activity areas are therefore immunization, control of malaria, preventive and curative consultations for children under 5, and care of pregnant women. For immunization, UNICEF supports the provision of vaccines and related supplies, cold chain equipment and social mobilization. In addition, resources and activities are also directed at diseases with epidemic potential that impact on children such as cholera.

The polio National Immunization Days (NIDs) of April 2016 have so far reached 2,601,535 children nationwide (87 per cent of the target), with delays in implementation in six counties of the conflict affected states, namely, Pibor, Pochalla, Khorflus, Ulang, Mundri East and Mundri West. In commemoration of African Vaccination Week (24-30 April), a scale-up campaign of routine immunization is ongoing from 1 May up to 7 May, through fixed and outreach sites in Old Fangak, one of the underserved counties in Jonglei State. Suspected measles cases this year have now reached 685, of which 73 cases have been confirmed by laboratory testing. To respond to the situation, a measles outbreak campaign is planned for in Malakal PoC site during 6-9 May, targeting 10,500 children under 5, while a national campaign is scheduled for October.

Through routine immunization services, during the reporting period, 1,627 children were vaccinated with at least 3 doses of pentavalent vaccine, 1,490 with Inactivated Polio Vaccine and 2,236 with measles vaccine, while 1,519 pregnant women received their second dose of Tetanus Toxoid. Meanwhile, supplemental doses of polio and measles are given to children under 15 years through RRM missions and at PoC entry points. During the reporting period, 28,106 children were vaccinated against measles and 63,931 children against polio.

UNICEF continues to provide cold chain and logistics support to the Ministry of Health (MoH) including installation, repair and maintenance of cold chain equipment. One solar fridge was recently installed and three were repaired in Pariang County. In addition, to implement the global switch from tOPV to bOPV, UNICEF supported transportation and
distribution of 434,000 doses of bOPV to the seven stable states and 16 accessible counties out of 33 in the conflict-affected states.

In the reporting period, 67,577 curative consultations were conducted, bringing the total number of health consultations with UNICEF support to 486,765 for this year. These consultations have been carried out across the country through static health facilities, community based care or RRM. Forty five per cent of the consultations were provided to children under 5 with acute respiratory infection (ARI) and malaria continuing to be the leading causes of morbidity and mortality (26 per cent each of the total consultations). Efforts to control malaria continue by providing insecticide-treated bed nets to women and children. An additional 7,743 nets were provided during the reporting period, bringing the total number distributed this year to 44,522. Indoor residual spraying (IRS) in Malakal PoC through UNICEF’s partner, Mentor Initiative, was completed with a 99.5 per cent coverage rate.

Optimal care during pregnancy remains UNICEF’s priority in light of its enduring consequences both to the mother and child. Since the beginning of the year, 10,040 pregnant women have had four recommended antenatal care (ANC) visits through UNICEF support, including 1,720 completed during the past two weeks. In addition, 1,947 pregnant and lactating women have been screened for HIV, of which 23 were positive and subsequently started anti-retroviral treatment (ART).

UNICEF provided three tents together with primary health care kits, antimalarial drugs and five hospital beds with mattresses to a health center in the Wau Shilluk IDP camp to be used for general consultations, maternity and paediatric units. In that safe and clean environment, a mother, 34 years old was able to give birth to her eighth child, a 3.5 kg baby born on 28 April. A total of 816 deliveries nationwide have been now been attended by skilled birth attendants for this reporting period.

As the rainy season approaches, activities are being undertaken both at facility and community levels to prepare for a possible cholera outbreak. These activities are being planned in an integrated manner across all relevant program sectors (Health, WASH and C4D) in coordination with the respective Clusters. UNICEF has contributed to the finalization of the National Cholera Preparedness and Response Plan and continuously engages with the Clusters and technical working groups. Critical supplies have been prepositioned around identified hotspots based on the 2014 and 2015 outbreaks. An assessment of readiness at Juba Teaching Hospital, where most cases were managed in 2015, was jointly conducted with WHO and other partners, which identified gaps in resources across all the three sectors. UNICEF is responding to requests in terms of supplies and training of frontline health workers. To enhance coordination especially with its field offices, UNICEF formed an internal Cholera Taskforce that holds meetings on a weekly basis.

**NUTRITION:** UNICEF and partners have admitted 53,775 children for SAM from January to March 2016. This is a 40 per cent increase over the same time period in 2015 and a third of the 2016 target. Over a third of the children were admitted from Northern Bahr el Ghazal, where the number of OTP sites has been increased to 180, providing the treatment to children with SAM.

In Bentiu PoC, 5,433 children under 5 were screened during the reporting period, resulting in 3.4 per cent and 12.3 per cent of proxy SAM and moderate acute malnutrition (MAM) rates. In areas surrounding the PoC, a significantly higher number of children under 5 were screened compared to the past as partners extended the activity at registration and
food distribution site in Bentiu town. Out of 4,702 children screened, 206 children were identified with SAM (4.4 per cent) and 503 children were identified with MAM (10.7 per cent). There is an observed decrease in the proxy GAM rate as the previous reporting period showed 18.1 per cent.

In Unity, a total of 53 OTP centers are operational, while 19 are currently suspended mainly in Mayendit (10) and Koch (6) with a few in Guit and Rubkona counties due to security reasons. During the past two weeks, 588 children were admitted for the treatment of SAM at OTP, while 79 SAM children with complications were referred to stabilization centers (SC) in Bentiu and surrounding areas. According to MSF, 12 deaths of children under 5 occurred with 3 deaths related to malnutrition. However the mortality rate is still below the emergency threshold at 0.42 deaths per 10,000 per day.

In Upper Nile, 25,688 children under 5 were screened for malnutrition during the past two weeks across different counties in the state. Among them, 375 children were identified with SAM (1.5 per cent) and 1,379 children were identified with MAM (5.4 per cent). Out of 82 OTP sites targeted in the state, 72 are currently operational. During the reporting period, a total of 1,512 children with SAM or MAM were admitted to an OTP, SC or target supplementary feeding programme (TSFP). Of these, 47.1 per cent of them were SAM cases while the others were MAM cases.

In Jonglei, 16,703 children under 5 (7,999 boys and 8,704 girls) were screened for malnutrition during the past two weeks. 857 children (438 boys and 419 girls) were identified with SAM and 3,124 children (1,615 boys and 1,509 girls) were identified with MAM. A proxy GAM rate is 23.8 per cent while proxy SAM and MAM rates are 5.1 per cent and 18.7 per cent respectively. A proxy GAM rate in Akobo was found to be above 30 per cent and indicates a very critical level of malnutrition. The recent SMART survey also indicated a GAM rate above the emergency threshold and there could be a worsening of the nutrition situation. Out of 105 OTP sites targeted, 99 are currently operational, and a total of 940 children with SAM were admitted during the past two weeks.

In Western Bahr el Ghazal on 21 April, UNICEF participated in an integrated response to IDPs in Mboro village, where an estimated 8,000 people are reportedly living in the bush. On the day of the response around 3,000 IDPs benefited from humanitarian assistance. A total of 307 children were screened with proxy SAM and GAM rates of 1.6 per cent and 8.8 per cent respectively. In Wau, 10 OTP centers are currently disrupted. UNICEF’s partner, PSI, has been working together with WFP at an IDP verification and registration site since 23 April, where active screening of children under 5 and pregnant and lactating women has been conducted. Malnutrition cases are referred to OTP centers in Bazia Jedit,
Jebel Kheir and Lokoloko, where PSI and SMoH are working in consortium. Severe cases with co-infections are referred to Wau Teaching Hospital.

In Warrap, social mobilization for scale up of nutrition response continued in all 6 counties and Abyei. There are 11 SC, 89 OTP and 88 TSFP sites currently functioning, including 8 TSFP sites recently established by partner GOAL in Abyei. In the reporting period, 11,880 children under 5 (5,885 boys and 5,995 girls) were screened, of which 725 children (360 boys and 365 girls) were identified with SAM and 3,234 children (1,672 boys and 1,562 girls) were identified with MAM. Similarly, 3,271 pregnant and lactating women were screened, of which 594 were identified with acute malnutrition.

The Nutrition Information Working Group has validated 10 SMART surveys in 2016, the majority of which had GAM rates above 15 percent, the WHO emergency threshold. Additionally, 10 survey proposals were reviewed. The IPC update scheduled for April could not take place. Therefore, partners agreed to conduct an integrated food security and nutrition analysis to be used internally for interventions, which started from 19 April amid interruptions due to security restrictions.

WASH: The onset of the rainy season in the greater Bahr el Ghazal region is recharging shallow aquifers, resulting in shallow wells that had been dry becoming productive again. Likewise, some hand pumps which were performing poorly during the dry season have been revitalized and are producing relatively better water yields. Consequently, a significant reduction in waiting time for water collection and efforts to pump water from boreholes is apparent. However, the looming hunger situation continues to force people in the northern region to migrate to the neighboring Republic of Sudan or other areas in search for food. This is hampering the sustainability of water user committees which also face challenges to collect fees. Community-led total sanitation (CLTS) activities are affected too as people are too weak to excavate latrine pits.

Safe water is available in Bentiu PoC at an average of 13.4 liters per person per day (L/p/d), an increase from 11 L/p/d of the last report. UNICEF is supporting installation of new pumps which are expected to further increase water supply to 21 L/p/d in Sector 4. Safe water supply activities are ongoing outside the Bentiu PoC site as well. For the new surface water treatment (SWAT) system in Rubkona town, a 2.2 km distribution pipeline was prepositioned and plans are underway to construct tap stands in order to supply water in high density areas. Rehabilitation of the water supply system at Bentiu Referral Hospital is continuing with a potential to supply 162,000 litres per day to the hospital and surrounding population in Biemrok village. During the past two weeks, 5 boreholes were repaired in Biemrok, Bilyang and Korbung villages.

In Malakal town, two SWAT systems keep operating normally with a daily production of 90,000 liters of treated water to support 5,000 IDPs, or 18 L/p/d. Ten latrine stances were completed to provide additional access to sanitation for 500 IDPs. In the past two weeks, 280 households were visited for hygiene promotion, reaching 1,485 people (936 females and 549 males) with key hygiene messages, and 800 grams of soap were distributed to 4,966 people during WFP’s general food distribution. Similarly in Wau Shilluk, 1,612 individuals (380 men, 452 women, 360 boys and 420 girls) were reached with hygiene promotion messages, and a cleanup campaign was organized, attended by 403 women and 97 men.
In Wau town, UNICEF supported the urban water system with fuel to allow it to continue to supply safe water to the ever growing population due to the influx of IDPs. In the meantime, the Wau State Water Corporation has endeavored to improve water tariff collection to extend its network to new residential areas so that the revenue is increased and fuel becomes affordable. An additional 5,000 people in Wau town and Jur River County, and 2,000 people in Agok and Twic Counties gained access to safe water through the repair of 10 water points and four water points respectively. An additional 250 people were provided with access to sanitation through the construction of two latrine blocks.

The WASH situation in Greater Pibor Administrative Area (GPAA) has seen a significant improvement with UNICEF’s implementing partners, Peace Corps, IAS and Nile Hope scaling up interventions both in the Pibor UNMISS base and surrounding counties of Vertet and Lekuangole. In Boma County, construction of two mini water yards has been completed and is awaiting the installation of solar system to make them operational. They have the potential to provide 4,000 people with safe water. To provide hygiene and sanitation services, seven latrine stances were constructed in Hai Matar and Vertet which are now serving over 350 people. Hygiene promotion messages reached approximately 750 people in GPAA. A total of six hand pumps were rehabilitated in Akoba for 3,650 people, in Fangak for 7,500 households, and in Pibor for 500 people.

In Tambura County, Western Equatoria State, Aquatabs®, PUR® and information, education and communication (IEC) materials on hand washing, prevention of cholera and protection of water from contamination were delivered to 320 households. In the same state, 50 families with malnourished children were supported with soap to combat water borne diseases such as diarrhea. Another 500 inpatients including pregnant women and people living with HIV also benefitted from soap distribution in Nzara County Hospital and St. Bakhita Home.

UNICEF is working with partners to prepare for a potential outbreak of cholera. Cholera Preparedness Taskforces have been established in hotspots based on the past experience. In Aweil County, UNICEF donated tools for water quality testing and reagents for 1,000 samples to implementing partner SNV. Bacteriological testing will commence immediately in warning areas of Chalek, Jaac and Werapei by collecting 50 samples from water sources and households in each location. Meanwhile, hygiene promotion focused on cholera prevention is ongoing, and 3,892 people were reached with key messages in Agok and Twic counties. To accelerate CLTS activities in Torit County, SNV carried out door-to-door awareness raising campaigns on the importance of using latrines to avoid cholera outbreaks. Prepositioning of WASH contingency materials has been made available in Torit and is ongoing in other locations. In Bentiu, trainings of hygiene promoters on cholera prevention and response is planned.

**EDUCATION:** So far this year, UNICEF and partners have reached 142,508 children (35 per cent girls) with Education in Emergencies (EiE) support, including trainings, supplies and technical assistance and operating costs to partners.

In Jonglei State, as in most states, schools are administrating end-of-term examinations. To date, with support of all Education partners, 192 schools have been provided with EiE interventions, effectively reaching 70,731 children (35 per cent girls) and 1,185 teachers (17 per cent females). UNICEF conducted monitoring visits to Duk and Twic East counties and found that classrooms in Poktap Boma were occupied by teachers as living quarters and those in Ayuel Dit and Padiet Primary Schools were used to provide health services. Advocacy efforts were immediately started for the occupants to vacate the premises for teaching/learning to take place there.

<table>
<thead>
<tr>
<th>Enrolment in GPAA</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pibor</td>
<td>579</td>
<td>269</td>
<td>848</td>
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<tr>
<td>Gumuruk</td>
<td>598</td>
<td>342</td>
<td>940</td>
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<tr>
<td>Lekuangole</td>
<td>748</td>
<td>178</td>
<td>926</td>
</tr>
<tr>
<td>Vertet</td>
<td>336</td>
<td>49</td>
<td>385</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,261</strong></td>
<td><strong>838</strong></td>
<td><strong>3,099</strong></td>
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</table>

In Pibor, about 250 households who sought shelter in the UNMISS base during the March/April tensions still remain; and children are going to school in town from there. All current schools are open in Pibor, Gumuruk, Lekuangole and Vertet with registration ongoing. Vertet is presenting a problem of low enrolment of girls. This is due to the fact that the only school has no latrines or water points, which discourages girls from attending. UNICEF is looking to engage with more partners to access Vertet and to improve the situation. To integrate children formerly associated with armed groups into education, life skills and livelihood opportunities, UNICEF, in partnership with Nile Hope, has facilitated accelerated learning programme (ALP) classes for 152 learners (7 girls), including 11 released children in three centres in Pibor Boys, Kondako and Langachot Primary Schools.

In Unity State, the “Beyond Bentiu” strategy is progressing as UNICEF opened four primary schools in Guit County for the first time since fighting erupted in December 2013. So far 2,581 children (40 per cent girls) are attending the
South Sudan SITUATION REPORT 5 MAY 2016

schools. With more BTL 2 campaigns taking place, the target of 5,000 children should be realised. Meanwhile, the majority of schools remain closed in Koch County as most people that fled the area have not yet returned. “Beyond Bentiu” is an inter-cluster strategy to expand service delivery and static humanitarian presence beyond the Bentiu POC, to areas where there are concentration of IDPs and humanitarian needs.

In Malakal PoC and Wau Shilluk, registration is continuing and efforts are being made to accommodate all children by re-opening schools destroyed during the incident in February as well as by advocating for more spaces allocated to establish temporary learning spaces (TLS). A request was submitted for spaces in PoC Sector 2 and 4, whilst Sector 5 is also being prepared as a new site. Making use of the presence of the Division of Gender and Social Welfare within the restructured State Ministry of Education (SMoE), Gender and Social Welfare, more synergies between education and gender interventions are being explored. This will be achieved through close collaboration with gender actors to include cross-cutting issues like gender-based violence (GBV), girls’ education etc. from the planning stage.

A launch of BTL 2 took place at Aweil National Primary School, Northern Bah el Ghazal State on 27 April. About 10,000 people attended the launch including students from 29 schools, their parents, teachers, community leaders and UN representatives. Ms. Siama Danga, Director of Gender of SMoE emphasized the need for parents to send their children to school, saying “A pen is not heavy like a gun. Let us leave guns and hold pens”.

Another BTL 2 launch took place in Yambio, Western Equatoria State on 5 May.

In Lakes, the long-awaited secondary school leaving examinations for both Sudan and South Sudan curriculums have been completed with 1,467 learners (250 girls) sitting the test out of 1,497 (252 girls) registered. This means 97 per cent of registered learners took the examinations, and that almost all the registered girls (99 per cent) participated. While in Central Equatoria State, UNICEF with implementing partner NRC, supported 739 students (67 girls) to sit the examinations.

In the Mingkaman IDP camp, 515 girls were presented with dignity kits in Roordit, Panhial, Tomrok and Thonachak Primary Schools with UNICEF’s support through NRC. These kits will contribute significantly to their regular school attendance and retention as well as their general well-being.

CHILD PROTECTION: Since the beginning of the conflict in December 2013, a total of 12,593 cases of unaccompanied, separated and missing children have been registered by UNICEF and other Child Protection actors, of which 47 per cent are girls. 8,884 cases or 71 per cent are active cases which require family tracing and reunification (FTR) services as well as follow-up visits while the other cases have been closed as a result of finalised family reunification or other causes such as children moving out of the country. Reunification flights remain a challenge. Although UNICEF is arranging between six to 10 flights a day, delays or cancellations happen for various reasons including poor weather and security constraints, but also due to disruptions caused by insufficient funds. These have impacted over 20 children in the past month. Without additional funds beyond June 2016, case management and family reunification will be reduced substantially, reaching only 25 per cent of the active caseload. This will leave over 6,500 children unable to access services, exposing them to greater protection risks due to prolonged family separation.

As a lead agency and coordinator for GBV interventions in Upper Nile State, UNICEF supported the SMoE, Gender and Social Welfare to organize the first coordination meeting in Malakal town since the start of the crisis. UNICEF, in collaboration with other protection actors, also trained 17 leaders from community watch groups in Malakal PoC on referral options for GBV survivors and the guiding principles of survivor-centred response. During the reporting period, 3,785 people were reached in Malakal PoC, Malakal town and Wau Shilluk with messages on the consequences of GBV,
services for survivors and the importance of timely reporting to access life-saving services. In addition, 1,109 women and girls accessed psychosocial support (PSS) and skills building courses in three women centers. In Fashoda County, where the GBV programme resumed in February as access was granted, 60 women and girls benefited from a newly opened women and girls’ center. Additionally, 901 community members (733 females and 168 males) were reached with awareness messages on gender roles, domestic violence, forced marriage and available GBV response services in Kodok. Case management and PSS services are ongoing in two women and girls’ centers in Mandeng and Jikmir; and the GBV referral pathway has been updated in Mandeng to facilitate GBV survivors to access available services.

Building on a model rolled out by the Communities Care programme, in Pariang County, four community engagement groups exploring GBV related social norms continue their 15 weeks of community dialogues. Ninety-one group members attended the meetings discussing traditional norms, beliefs, behaviours and rules related to sexual violence within their community. In Central Equatoria State, 183 people (49 women, 7 men, 93 girls and 34 boys) were reached with GBV awareness messages and 48 others benefited from PSS activities in women centers in Juba IDP sites. In Yambio, 1,349 people (1,013 women and 336 men) were reached with GBV awareness sessions conducted at three health facilities. A clinical management of rape (CMR) training was conducted in Leer County for 65 health workers.

Mine risk education (MRE) in temporary learning spaces, PoC and communities in Upper Nile (Ulang, Pagak, Melut, Kodok) and Unity (Nimni Payam, Guit County) were the focus of MRE efforts this fortnight, where approximately 11,025 people (3,773 boys, 3,380 girls, 2,055 men and 1,817 women) were reached. In an effort to scale up MRE in schools, UNICEF and the National Mine Action Authority (NMAA) have conducted a mapping of schools and is now working with other mine action partners to assign locations and encourage them to commence in areas where gaps are identified. A Memorandum of Understanding (MOU) was signed between NMAA, UNICEF and UNMAS, which sets a framework for the provision of assistance to strengthen MRE capacities and improve efficacy of MRE service in South Sudan.

A team comprising NDDRC, SPLA CPU, UNMISS and UNICEF is currently in Bentiu, preparing the ground for release of children from SPLA. Initial screening has identified 16 children who will be released later this month, with screening of Mankien and Mayom barracks expected to conclude this week. UNICEF is now working with partners to make the necessary preparations for interim care, PSS and FTR services. On the side of the SPLA in Opposition, child protection focal points have been formally assigned and a UNMISS and UNICEF team will travel to Pagak later this month to conduct the initial capacity building and then commence identification, screening and registration exercise for children associated with the forces based in the headquarters in Pagak.

At least 32 of the over 100 children abducted from Gambella Region in Ethiopia in April have reportedly been recovered in Lekuangole County. A UNICEF Child Protection Specialist is being deployed to assess how UNICEF and other agencies associated with the forces based in the headquarters in Pagak.

COMMUNICATION FOR DEVELOPMENT (C4D): In preparation for a possible cholera outbreak, MoH, WHO, UNICEF and partners are engaging with media organizations and telecom companies to disseminate messages on cholera prevention and control. A designated cholera hotline has been provide by Vivacell Telecom Company. The broadcasting key messages through bulk SMS will start shortly. With UNICEF support, 84 trained social mobilizers and team supervisors from SMoH of Central Equatoria State continue with focus group discussions, educating communities on cholera prevention and control in high risk residential areas of Juba city. On 23-27 April, the mobilizers conducted 62 sessions reaching 5,153 people including school children with critical messages in the areas of Nyakuron, Munuki, Northern Bari and Juba Block. Other high risk areas to be covered include Gondoroko Island, Rejaf and Kator.

UNICEF C4D and Health teams commemorated World Malaria Day on 25 April, conducted advocacy activities on inactivated polio vaccine (IPV) and supported vaccination and advocacy activities during African Vaccination Week on 24-30 April. In nine counties of Unity State, a team of 3,413 social mobilizers were trained on skills to educate communities on practices to prevent and control malaria and on the importance of IPV and immunization. In Jonglei State across almost all counties including Bor PoC, Northern Jonglei and Pibor, over 360 trained social mobilizers have reached 72,000 households with key messages on polio, malaria, hygiene and sanitation. In response to measles cases in Malakal, 25 social mobilizers from the PoC were trained on how to conduct social mobilization campaigns.

SUPPLY & LOGISTICS: During the reporting period, supplies valued at US$700,000 were dispatched to partners and various warehouses country wide for distribution. Over 100 MT of ready-to-use-therapeutic foods (RUTF), F-75 therapeutic milk and Vitamin A tablets were delivered to implementing partners for the management of malnutrition in their respective areas of operation. Delivery of the nutrition supplies in hard-to-reach areas such as Nyal was made
possible with the support of the Logistics Cluster using their air-assets. UNICEF also chartered flights for supply transportation to Pariang. Six trucks loaded with nutrition supplies consigned to Save the Children and education materials for BTL 2 were dispatched to Jonglei via a humanitarian road convoy. The total value of nutrition supplies dispatched amounted to US$400,000. 3,360 collapsible jerry cans for water collection and storage were received by UNHCR for programme implementation in Ajang Thok. Two trucks loaded with WASH supplies were dispatched to State Ministry of Housing and Public Utilities in Eastern Equatoria; 9,000 cartons of soap for improved hygiene in the PoC were transported to Bentiu for distribution by Concern World Wide. As part of BTL 2, 50 school-in-a-box kits for over 2,000 students were delivered to UNICEF implementing partner in Tonj East. The total value of WASH and Education supplies dispatched was US$250,000. As part of an effort to treat and prevent malaria, various malaria medicines and 2,500 mosquito nets were dispatched to SMoH in Juba. EPI ancillary supplies were delivered to SMoH in Jonglei to support campaigns in the state.

**FUNDING:** Against the Humanitarian Action for Children (HAC) appeal requirement of US$ 154.5 million, UNICEF has received US$ 47 million (30 per cent funded). UNICEF would like to thank ECHO for the generous contribution of EUR 8.5 million which will enable UNICEF and its partners to scale up the critical humanitarian interventions in the areas of nutrition, child protection, education and health. A contribution of $859K was also received from the CERF for nutrition activities which is also highly appreciated.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements in US$ **</th>
<th>Funds Received in US$*</th>
<th>Funding Gap US$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>30,095,196</td>
<td>14,227,681</td>
<td>15,867,515</td>
<td>53%</td>
</tr>
<tr>
<td>Health</td>
<td>22,869,759</td>
<td>8,739,825</td>
<td>14,129,934</td>
<td>62%</td>
</tr>
<tr>
<td>WASH</td>
<td>38,500,000</td>
<td>13,956,119</td>
<td>24,543,881</td>
<td>64%</td>
</tr>
<tr>
<td>Child protection</td>
<td>36,000,000</td>
<td>4,628,041</td>
<td>31,371,959</td>
<td>87%</td>
</tr>
<tr>
<td>Education</td>
<td>27,000,000</td>
<td>5,547,090</td>
<td>21,452,910</td>
<td>79%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>154,464,955</strong></td>
<td><strong>47,098,757</strong></td>
<td><strong>107,366,198</strong></td>
<td><strong>70%</strong></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: 19 May 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)

**Who to contact for further information:**

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Email: sasindua@unicef.org

Faika Farzana  
Resource Mobilization Specialist  
UNICEF South Sudan  
Email: ffarzana@unicef.org
### NUTRITION

<table>
<thead>
<tr>
<th>Cluster for 2016</th>
<th>UNICEF and partners for 2016²</th>
<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target (Jan-Dec)</td>
<td>Results (Jan-Apr)</td>
<td>Target (Jan-Dec)</td>
</tr>
<tr>
<td># of children aged 6 to 59 months with severe acute malnutrition (SAM) admitted for treatment</td>
<td>161,958⁴</td>
<td>53,775</td>
</tr>
<tr>
<td>% of children aged 6 to 59 months with SAM admitted for treatment recovered</td>
<td>&gt;75%</td>
<td>89.0%</td>
</tr>
<tr>
<td># of children 6 to 59 months having received vitamin A supplementation</td>
<td>2,066,708</td>
<td>35,829</td>
</tr>
<tr>
<td># of children 12 to 59 months de-wormed</td>
<td>1,087,741</td>
<td>27,084</td>
</tr>
<tr>
<td># of pregnant and lactating women reached with infant and young child feeding (IYCF) messages</td>
<td>567,366</td>
<td>244,140</td>
</tr>
</tbody>
</table>

### HEALTH

<table>
<thead>
<tr>
<th>Cluster for 2016</th>
<th>UNICEF and partners for 2016²</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Target (Jan-Dec)</td>
<td>Results (Jan-Apr)</td>
<td>Target (Jan-Dec)</td>
</tr>
<tr>
<td># of children aged 6 months to 15 years in conflict affected areas vaccinated against measles</td>
<td>1,117,904</td>
<td>130,068</td>
</tr>
<tr>
<td># of children under 15 years in conflict affected areas vaccinated against polio</td>
<td>1,221,772</td>
<td>122,321</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>400,000</td>
<td>44,522</td>
</tr>
<tr>
<td># of preventive and curative consultations provided to children under 5 years at facilities or through community-based care</td>
<td>520,011</td>
<td>190,067</td>
</tr>
<tr>
<td># of pregnant women attending antenatal care (ANC) counselled and tested for HIV</td>
<td>35,351</td>
<td>9,947</td>
</tr>
</tbody>
</table>

### WATER, SANITATION AND HYGIENE

<table>
<thead>
<tr>
<th>Cluster for 2016</th>
<th>UNICEF and partners for 2016²</th>
<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target (Jan-Dec)</td>
<td>Results (Jan-Apr)</td>
<td>Target (Jan-Dec)</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>594,265</td>
</tr>
<tr>
<td># of people provided access to appropriate sanitation facilities</td>
<td>1,100,000</td>
<td>486,669</td>
</tr>
<tr>
<td># of people reached with participatory hygiene promotion messages</td>
<td>800,000</td>
<td>463,038</td>
</tr>
</tbody>
</table>

### CHILD PROTECTION

<table>
<thead>
<tr>
<th>Cluster for 2016</th>
<th>UNICEF and partners for 2016²</th>
<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target (Jan-Dec)</td>
<td>Results (Jan-Apr)</td>
<td>Target (Jan-Dec)</td>
</tr>
<tr>
<td># of children and adolescents reached with critical child protection services²</td>
<td>721,218</td>
<td>89,186</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>12,593</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>
</tr>
<tr>
<td># of people receiving gender-based violence (GBV) prevention and response services</td>
<td>80,000</td>
<td>44,083</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>300,000</td>
<td>33,188</td>
</tr>
</tbody>
</table>

### EDUCATION

<table>
<thead>
<tr>
<th>Cluster for 2016</th>
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<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target (Jan-Dec)</td>
<td>Results (Jan-Apr)</td>
<td>Target (Jan-Dec)</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>147,598</td>
</tr>
<tr>
<td># of temporary learning space (TLS) classrooms established</td>
<td>350</td>
<td>127</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>2,373</td>
</tr>
</tbody>
</table>

* Nb. 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 WASH, Child Protection and Education Clusters validate cluster members’ results monthly. To provide up-to-date snapshot, UNICEF may report tentative results bi-weekly before validated by the Clusters.
3 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.
4 The Nutrition Cluster target does not include refugee children who are covered under the Multi-Sector Refugee Appeal.
5 UNICEF’s nutrition response covers all children, including refugee children residing in the country.
6 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.