UNICEF SOUTH SUDAN SITUATION REPORT

01 – 30 SEPTEMBER 2018: SOUTH SUDAN SITREP #125

SITUATION IN NUMBERS

Highlights

• On 12 September, the Transitional Government of National Unity, Sudan People’s Liberation Movement/Army-In Opposition (SPLM/A-IO), South Sudan Opposition Alliance, Former Detainees and Other Political Parties signed the final Revitalized Agreement on the Resolution of Conflict in South Sudan (R-ARCSS) during the 33rd Extraordinary Assembly of the Intergovernmental Authority on Development (IGAD) in Ethiopia.

• Coverage of health services significantly increased in September, including number of health facilities and partners supported, bolstered by the World Bank-funded Rapid Result Health Project in Jonglei and Upper Nile states and routine UNICEF partnerships. A total of 336,840 individuals were provided with primary health care consultations, including 144,966 children under the age of 5 years and 182,803 women.

• UNICEF has reached 99.8 per cent of its annual target for the number of children and adolescents aged 3 to 18 years provided with access to education in emergencies.

UNICEF’s Response with Partners in 2018

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Cluster for 2018</th>
<th>UNICEF and partners for 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition: # of children aged 6 to 59 months with Severe Acute Malnutrition (SAM) admitted for treatment</td>
<td>209,140</td>
<td>215,312</td>
</tr>
<tr>
<td>Health: # of children aged 6 months to 15 years in conflict-affected areas vaccinated against measles</td>
<td>1,514,734</td>
<td>703,037</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>800,000</td>
<td>444,170</td>
</tr>
<tr>
<td>Child Protection: # of children reached with psychosocial support (PSS)</td>
<td>250,000</td>
<td>179,234</td>
</tr>
<tr>
<td>Education: # of children and adolescents aged 3 to 18 years provided with access to education in emergencies</td>
<td>500,000</td>
<td>499,055</td>
</tr>
</tbody>
</table>

Funding Status

Carry-over from 2017:
US$ 64,843,099

Funding Gap: US$ 48,822,881

2018 Funding Requirement: US$ 183.3M

Funds Received: US$ 69,643,891

1.91 million
Internally displaced persons (IDPs)
(OCHA South Sudan Humanitarian Snapshot, 10 October 2018)

2.46 million
South Sudanese refugees in neighbouring countries
(UNHCR Regional Portal, South Sudan Situation 30 September 2018)

6.1 million
South Sudanese who are severely food insecure
(September 2018 Projection, Integrated Food Security Phase Classification)
Situation Overview and Humanitarian Needs

On 12 September, the Transitional Government of National Unity (TGoNU), Sudan People’s Liberation Movement/Army-In Opposition (SPLM/A-IO), South Sudan Opposition Alliance (SSOA), Former Detainees (FD) and Other Political Parties (OPP) signed the final Revitalized Agreement on the Resolution of Conflict in South Sudan (R-ARCSS) during the 33rd Extraordinary IGAD Assembly in Addis Ababa, Ethiopia. The Agreement establishes the commitments and implementation responsibilities associated with establishing the Revitalized Transitional Government of National Unity; permanent ceasefire and transitional security arrangements; humanitarian assistance and reconstruction; resource, economic and financial management; transitional justice, accountability, reconciliation and healing; the parameters of a permanent constitution; and a joint monitoring and evaluation commission. Though a positive step towards sustainable peace in the country, attention now turns to the process of implementation in the pre-transition period (eight months following signature) and in the transitional period (36 months following end of pre-transition period).

The Integrated Food Security Phase Classification (IPC) for September 2018 – March 2019 was released on 28 September. According to the IPC projection, an anticipated earlier than normal start of the lean season will result in an estimated 5.2 million individuals (49 per cent of the total population) being classified as severely food insecure in January-March 2019, with 34,000 in Catastrophe (IPC phase 5). At the peak of the lean season, populations in Catastrophe (IPC phase 5) existed in Leer and Mayendit (Unity), Yirol East and Yirol West (Lakes), Canal/Pigi (Jonglei), Panyikang (Upper Nile), and Greater Baggari in Wau County (Western Bahr el Ghazal). New emerging counties with populations in Phase 5 include Canal Pigi (Jonglei), Yirol East and Yirol West (Lakes), and Panyikang (Upper Nile).

According to OCHA’s September 2018 Humanitarian Access Severity Overview, humanitarian access continues to be affected and restricted across the country by all parties to the conflict, as well as by civilian authorities and criminal elements. Of the 7 million people in need of assistance in the country, approximately 1.5 million live in counties with high access constraints. The 18 counties with the highest reported access constraints are in Western Bahr el Ghazal, Western Equatoria, Upper Nile, Unity and Central Equatoria states. Of the five states most affected by high access constraints, Upper Nile, Western Bahr el Ghazal and Unity host the majority of people in need (87 per cent). Blanket access denials and restrictions of movement have persisted in Western Bahr el Ghazal, while continuous fighting and lack of safety assurances in central Unity greatly constrained humanitarian access in recent months. Worsening operational interference across the Greater Upper Nile region is restricting humanitarian access and compromising principled humanitarian action. Growing insecurity in the Equatorias has significantly reduced humanitarian space and safe access for partners, including a deterioration in safe road travel, which has seen a substantial increase in ambushes and detentions of aid workers.

Humanitarian Strategy

In 2018, in line with UNICEF’s Humanitarian Action for Children (HAC) and the inter-agency Humanitarian Response Plan (HRP), UNICEF will strengthen and expand its programmes through four modalities that will increase the capacity and reach of interventions: (1) static operations in stable areas; (2) outreach programmes; (3) mobile campaigns; and (4) integrated rapid response mechanism (IRRM) missions. These modalities will facilitate sustained service delivery in both secure and highly inaccessible locations. UNICEF will continue to invest in strengthening national partner capacities and improving accountability to affected populations by building on existing community-based networks.

This approach included 180 Days Scale-Up Plans (1 March to 31 August 2018), targeting 11 priority counties considering the expected significant deterioration of the food security and nutrition situation during the lean season. Efforts saw 12,230 children aged 6 to 59 months affected by severe acute malnutrition (SAM) admitted to therapeutic care and treated out of a target of 20,892, i.e. 59 per cent. This represents 56 per cent in the admission of children under 5 during the response period. Out of a target of 35,000, UNICEF reached 20,028 families with children and pregnant and lactating women (80 per cent) with Long Lasting Insecticide Treated Mosquito Nets (LLITN). Unfortunately, LLITNs were not distributed in Southern Unity due to conflict that forced health partners to leave the area. A total of 168,639 children aged 3 to 18 years accessed education and by reaching 78,130 children with psychosocial support services, UNICEF achieved 177 per cent of its target. Finally, 49 per cent of the targeted population gained access to safe drinking water from a targeted population of 176,250 in all counties.
Following the conclusion of the 180 Days Scale-Up Plan, UNICEF will be supporting populations facing catastrophic conditions through the development of micro response plans to scale up interventions. The micro plans are compatible with the South Sudan Country Office Integrated Workplan and Country Programme Document Results Framework and aim to reach the most vulnerable populations, targeting 102,000 beneficiaries. Specifically, areas targeted include Leer and Mayendit, Pibor and Canal/Pigi, Panyikang, Greater Baggari, and Cabel/Pigi.

UNICEF aims to conduct five IRRM missions per month as the situation permits. Since the beginning of 2018, 43 joint IRRM missions with the World Food Programme (WFP) were conducted in 15 counties: Ayod, Canal/Pigi, Fangak, Koch, Leer, Longochuk, Luakpiny/Nasir, Mayendit, Nyiroi, Panyijiar, Raga, Rubkon, Torit, Uror and Wau/Baggari. Since January 2018, these missions have reached 470,924 people, including 98,076 children under 5 years of age. In September, six RRM missions accessed hard-to-reach locations in Udo (Baggari), Boro Medina (Raja), Din Din and Padeah (Leer), with additional follow-up in Bieh, Koch town (Koch County), reaching 62,710 people, including 12,638 children under 5 years of age.

UNICEF is advocating at the national and local levels for increased and sustained humanitarian access. UNICEF is also facilitating coherent coordination through UNICEF leadership of the WASH, Education and Nutrition clusters, as well as the Child Protection sub-cluster.

**Summary Analysis of Programme Response**

**Health:** Due to the recent outbreak of Ebola Virus Disease (EVD) in the Democratic Republic of Congo (DRC), South Sudan is prioritizing enhanced operational readiness and preparedness. Seven states have been identified as high risk and priority sites for screening and preparedness activities. In support of the national operational plan, UNICEF is supporting EVD risk communication interventions at points of entry (e.g. Juba International airport) as well as engaging with communities living in identified at-risk areas through mass media and local mobilization networks. The office is also supporting the running of a toll-free hotline, which receives 200-300 calls per week with most callers seeking information on Ebola prevention and control. The national plan was recently revised and re-costed (US$ 13 million from US$ 4 million) and as such, UNICEF is reviewing and aligning its corresponding multi-sectoral preparedness and contingency plan. UNICEF continues to participate in bi-weekly national and state level taskforces that lead the coordination and is a member of weekly technical working groups addressing border health, access and security, case management, vaccines and therapeutics, and risk communication. Along with the deployment of 40 tents to support the establishment of 10 isolation units by health partners, WASH supplies are being transported and pre-positioned. Surge support is also being recruited to advance preparedness activities for WASH, Communication for Development (C4D) and Health.

Malaria remains the major cause of morbidity in the country accounting for 39 per cent of total morbidity (134,477 cases, 61,462 children under 5 years of age). A total of 19 per cent of total morbidity cases were attributed to acute respiratory infection, 9 per cent to diarrhoea, and 33 per cent to additional causes including urinary tract infection, typhoid and helminths. UNICEF has continued to manage these cases through community programming including integrated community case management, the fixed health facility programme, integrated outreaches and the IRRM. To prevent the spread of malaria, the Indoor Residual Spray campaign has been completed by the Mentor Initiative, through UNICEF support, in Malakal and Bentiu Protection of Civilian (PoC) sites. The campaign reached 17,919 of the targeted 20,049 households covering an estimated 107,515 (89 per cent) occupants. Additionally, 35,691 LLITNs were provided.

Maternal health packages such as antenatal care services, maternity and HIV counseling and testing among pregnant women remains a principle area of focus. In September, 11,872 pregnant women attended antenatal care first visits (ANC1) and 5,089 attended the recommended fourth (ANC4) visit. A total of 2,881 deliveries took place at health facilities, of which 1,779 were assisted by skilled birth personnel and 5,152 pregnant women were counselled and tested for HIV - 91 tested positive and 40 enrolled in anti-retroviral therapy.

UNICEF continued to support routine immunization through fixed and outreach activities - from January to July, a cumulative total of 181,747 children aged 0 to 11 months, out of the targeted 466,229, received Penta1, 142,419 received Penta3 and 156,266 children were vaccinated against measles. An additional 130,388 pregnant women...
received the tetanus toxoid (TT) vaccine against maternal and neonatal tetanus. The Cold Chain Equipment Optimization Platform to strengthen quality immunization services continued, with 108 new items of cold chain equipment installed. Vaccine supplies delivered for various interventions included 40,000 doses of TT for the Maternal and Neonatal Tetanus Elimination (MNTE) campaign delivered to Old Fangak targeting 31,404 women of reproductive age and 56,000 doses of measles vaccine for the measles follow-up campaign targeting 50,000 children aged 6 to 59 months. An additional 24,000 doses of bivalent oral polio vaccine (bOPV), 11,000 doses of measles vaccine and 1,800 doses of TT vaccine were administered to children in hard-to-reach areas of Koch and Leer counties through the IRRM.

Through supplementary immunization activities, 39,868 children aged 6 months to 15 years in humanitarian situations were vaccinated against measles and 71,094 women of reproductive age were vaccinated against tetanus in a strategy to achieve MNTE.

There have been no reported cases of cholera since the beginning of the year. Cholera prevention activities including the pre-positioning of supplies at all the field offices, continue to contribute to mitigating the risk of cholera outbreaks in hotspots. Vaccines for the second-round campaign in Yirol East, Yirol West and Torit have been requested from the Global Task Force for Cholera Control.

**Nutrition:** UNICEF and partners have admitted 146,538 children suffering from SAM into various outpatient therapeutic programme (OTP)/stabilization centre (SC) sites since January 2018, translating to 68 per cent of its 215,312 target for 2018 and 54.4 per cent of the 2018 SAM caseload (269,140).

UNICEF, WFP and partners have scaled up the deployment of RRM missions in 11 priority counties identified in the February 2018 IPC analysis to prevent further deterioration and boost nutrition services, especially where access is an issue. To date, 31 joint UNICEF/WFP and partners missions were conducted in Koch (4), Longechuk (2), Uror (4), Wau (3), Ayod (2), Fangak (3), Leer (5), Mayendit (2), Nyirol (5) and Panyijar (1). A total of 47,087 children aged 6-59 months were screened for malnutrition with 1,467 and 4,471 children respectively identified as suffering from severe and moderate acute malnutrition and provided treatment.

In the dry season plan, UNICEF plans to pre-position about 223,000 cartons of ready-to-use therapeutic foods (RUTF) to avoid high cost shipment and pipeline breaks.

The overall situation of acute malnutrition has slightly improved this year as compared to the same period last year with no county reporting extreme critical levels of acute of malnutrition (Global Acute Malnutrition – GAM - above 30 per cent) in 2018. A total of 31 counties in Warrap, Unity, Upper Nile, and Jonglei reported ‘Critical’ levels of acute malnutrition (GAM weight-for-height (WHZ) score 15.0 – 29.9 per cent), while 20 counties in Lakes, Jonglei, Unity and Upper Nile states reported ‘Serious’ (GAM (WHZ) 10.0-14.9 per cent) levels of acute malnutrition. Most counties for which county-level data was available in Central Equatoria and Western Equatoria states recorded ‘Alert’ (GAM (WHZ) 5.0-9.9 per cent) and ‘Acceptable’ (GAM (WHZ), <5.0 per cent) levels of acute malnutrition.

**Water, Sanitation, and Hygiene (WASH):** UNICEF continued to provide access to safe water and basic sanitation services in affected host communities, PoCs and internally displaced persons (IDP) collective sites. In September, UNICEF’s implementing partner, the United Nations Industrial Development Organization (UNIDO) resumed implementation of WASH interventions that had been interrupted in April 2018 due to protracted clashes in Leer and Mayendit counties, Unity state.

UNICEF provided access to safe water supply to a cumulative total of 444,170 vulnerable and conflict affected populations and 143,320 individuals gained access to improved sanitation facilities in Jonglei, Greater Equatoria and Greater Bahr el Ghazal states. Furthermore, 161,849 people receive ongoing water services with routine operation and maintenance of surface water and treatment systems, mini water yards and rehabilitation of boreholes/hand pumps across IDP and PoC sites. Similarly, 18,039 IDP and PoC site members were served with desludging and rehabilitation of communal sanitation facilities.
In September, an additional 14,995 new beneficiaries were reached with access to improved water supply through the construction of 12 new boreholes and the rehabilitation of 21 boreholes/hand pumps across host communities, IDP and PoC sites. Similarly, 7,521 new individuals were reached with improved sanitation facilities via the construction of 772 household latrines and 133 stances of communal/emergency latrines.

In response to the current IDP crisis in Mangateen, Central Equatoria, 4,879 IDPs have been provided with life-saving WASH interventions with support from implementing partners Islamic Relief Worldwide and Nile Sustainable Development Organization, including installation of a 40,000 litre water storage tank and the construction of 32 new emergency latrines. Hygiene promotion activities are ongoing to promote safe hygiene practices and proper disposal of solid waste.

**Education:** The new school term started on 17 September. Coinciding with this, UNICEF partners throughout the country were actively engaged in conducting various training and orientation sessions for teachers, early childhood development (ECD) facilitators, parent-teacher association (PTA) members, community leaders and others. In Bentiu, Unity state, 50 teachers (3 female) were trained in psychosocial support, life skills, risk management, lesson planning and peacebuilding. A total of 14 ECD teachers (4 female) and 5 new teachers (1 female) were trained in Fangak, Jonglei state. In Torit, Eastern Equatoria, a PTA and school management committee member training took place. These trainings contributed to enhancing the capacity and effectiveness of those involved in teaching and supporting schools, as well as encouraging community involvement and properly managed protective spaces for quality learning.

UNICEF has reached 99.8 per cent of its annual target for the number of children and adolescents aged 3 to 18 years provided with access to education in emergencies, as the formal enrolment process stops prior to the beginning of the third (and last) semester of the year, which began on 17 September. Children may enroll at any time during the year in order to access education, so this percentage may increase further.

During the last quarter of the academic year, UNICEF, through its implementing partners, is involved in monitoring education service delivery to provide support where needed, whether it is in terms of teaching and learning materials, continuous payment of incentives to volunteer teachers, preparing students to sit for their final exams at the end of the academic year or addressing urgent education needs.

Schools remained closed in Baggari, Western Bahr el Ghazal, due to insecurity, and UNICEF and partners are unable to reach the area to provide the necessary support. In Tambura, Western Equatoria, UNICEF and its partner, World Vision, are in the process of setting up new temporary learning spaces (TLS) for recently arrived IDP children. Following inter-communal fighting in Juba UNMISS PoC 3, over 1,000 additional children have been relocated to Mangateen site in Juba. Two existing UNICEF-supported schools are being strengthened to accommodate the new arrivals.

UNICEF, through its implementing partner in Pibor, ACROSS, facilitated the reopening of Pibor secondary school, following its closure in 2011. With the arrival of additional teachers from Juba, the number of students has increased from 52 to 62 with further increases expected.

In Ayod, Jonglei state, Christian Mission for Development (CMD) with support from UNICEF, established six new TLS in six primary schools, as well as one for ECD learning. CMD also rehabilitated two classrooms at Haat Primary School.

**Child Protection:** UNICEF and partners reached 22,983 children (12,475 boys; 10,508 girls) with psychosocial support (PSS) activities in child-friendly spaces, schools and other community-based interventions in all 10 states. An additional 101 unaccompanied and separated children (61 boys; 40 girls) were registered in Central Equatoria and Western Equatoria, Lakes, Jonglei, Unity, Upper Nile and Greater Bahr el Ghazal of whom 46 children (26 boys; 20 girls) were reunified by UNICEF and partners.

A total of 18,410 children (9,165 boys; 9,245 girls) living in high-risk mine areas were reached with life-saving mine risk education messages in Jonglei, Unity and Upper Nile states. In addition, 18,346 adults (6,473 men; 11,873 women) received life-saving child protection messaging, including on prevention of family separation, recruitment into armed groups and grave child rights violations.
The 149 children associated with armed forces/groups (98 boys; 51 girls) released on 7 August 2018 in Yambio have been receiving reintegration services. As part of the reintegration strategy, all children have been assigned social workers and are now eligible for a package of holistic social development and economic strengthening services to prevent re-recruitment and promote reintegration. To improve the resilience of affected communities and minimize stigmatization, UNICEF is implementing a community-based reintegration strategy, which will provide vital services to affected communities. UNICEF is also currently working with the National Disarmament, Demobilization and Reintegration (DDR) Commission to facilitate the release of the remaining caseload of approximately 215 verified cases of children associated with armed groups in Yambio in the coming months.

UNICEF and partners reached 8,558 individuals (3,997 women; 2,563 girls; 1,116 boys; 882 men) through gender-based violence (GBV) prevention and response services, including awareness raising on GBV and available services, individualized case management, PSS, knowledge and skills building courses, access to women and girl-friendly services and referrals for clinical management of rape, as well as other specialized services.

Communication for Development (C4D): UNICEF and partners continue to support EVD preparedness with risk communication, social mobilization and community engagement interventions focusing on high risk communities in states, counties, payams and villages along the South Sudan-DRC border. Through mass media, 13 radio stations continue to broadcast Ebola key messages in various languages. Over 2,000 radio messages and 14 talk-shows have been broadcast, reaching approximately 40 per cent of the population across the country. It is noteworthy that as part of the existing community perceptions and feedback mechanism through toll-free line 6666, 661 calls were received with callers requesting key information on Ebola prevention and control. The most common caller enquiries are for information on signs and symptoms, treatment, transmission and prevention. An alert of a suspected case was also reported through the hotline.

UNICEF C4D partners in Yambio, Tambura, Yei, Morobo, Juba, Torit and Nimule, undertook additional Ebola-related social mobilization activities including church and mosque announcements, streets announcements, school and water point awareness sessions, as well as at community and household level. The announcements focused on common signs and symptoms, modes of transmission and what people need to do to protect themselves including where to report, in case they know anyone suspected to have the disease. In Yei, 30 community leaders, 20 social mobilizers and 16 radio journalists were trained on the role of media during outbreaks and provided with information on what people need to know about Ebola. Contact numbers for reporters were also updated during the training. Five street announcements were conducted in Yei and over 200 refugees were reached with Ebola messages during verification exercises conducted by UNHCR, as well as the sensitization of 12 health facilities. In Yambio, community sensitization was undertaken in Gangura, Nabiapai, and Saura-1 community reaching approximately 800 individuals. In Ezo, Nzara, and Tambura, seven awareness sessions on Ebola prevention were conducted.

UNICEF is planning to undertake a quick formative assessment on health-seeking and burial practices in high-risk areas as part of the Ebola readiness plan. The assessment will also provide insights on the effectiveness of the interventions currently undertaken. Two consultants are being recruited to strengthen various aspects of risk communication, social mobilization and community engagement at national and state levels. In the interim, Ebola risk perception assessment tools have been developed and shared with partners on the ground.

In Yirol East and Yirol West, Eastern Lakes, UNICEF together with the State Ministry of Health, the World Health Organization (WHO), Doctors with Africa CUAMM and partners are conducting measles outbreak response vaccination. Seventy-five trained community mobilizers are conducting activities including information, education and communication (IEC) material displays, house-to-house mobilization, megaphone announcements, school engagement, church/mosque announcements and community leader orientation.

Supply and Logistics
Multi-sectoral supplies valued at US$ 1.7 million were dispatched directly to implementing partners country-wide and through warehouse-to-warehouse transfers.

A total of 23 haulage trucks were dispatched from Juba warehouse to Torit, Kapoeta, Bor, Rumbek, Wau, Aweil and Warrap states using the Logistics Cluster convoy. Sixty-four tents, of varying sizes were also delivered to Mangateen
IDP camp along with other humanitarian supplies. Approximately 50 per cent of all items dispatched to different locations were education supplies.

Ten trucks carrying humanitarian supplies were dispatched to Yambio (Western Equatoria) on 22 September, arriving and offloading 02-03 October. All ten trucks returned safely to Juba on 20 October. Supplies which were dispatched by barge arrived in Malakal.

**Media and External Communications**

UNICEF coordinated media for the 6 September mission to Yambio of the Special Representative of the Secretary-General for Children and Armed Conflict, Ms. Virginia Gamba, as well as for the follow-up 7 September press conference. A two-week donor visibility mission was also undertaken by a consultant photographer.

UNICEF took the opportunity to focus on local media and capacity building in September and, together with Journalists for Human Rights (JHR) and the United Nations Population Fund (UNFPA) held an ethical reporting workshop in Juba that was attended by over 30 South Sudanese media outlets. The workshop focused on reporting sensitively on GBV and vulnerable children, including children formerly associated with armed groups. Also in partnership with JHR, UNICEF travelled to both Malakal and Wau to present local journalists with UNICEF WASH and Health programmes, exposing them to the work of UN agencies while also providing local media coverage.

UNICEF also took part in a media interview with Al Jazeera which focused on Al Sabbah Children’s Hospital.

For the first time, UNICEF has been nominated as co-chair of the UN Communication Group, alongside UNDP.

**Security**

Despite the 12 September signing of the R-ARCSS, challenges to implementation remain from the outset, including some elements of the South Sudan Opposition Alliance, who oppose the agreement. The recent removal of several high-level officials by President Kiir may give rise to spoiler behaviour during the pre-transitional and transitional phase of the R-ARCSS. Former Chief of Army Staff, Paul Malong and Riek Machar’s former tactician, Peter Gatdet, have voiced opposition to the agreement and both command loyal militias. Riek Machar’s ‘house arrest’ status must also be reviewed to allow him freedom to implement his role in the peace process. Additionally, the peace agreement calls for an expanded UNMISS Regional Protection Force to include forces from Uganda, Sudan, Djibouti and Somalia. This has the potential of drawing the UN in South Sudan into the conflict as the additional forces are bound to face attacks by forces within the country that they fought against years earlier.

Despite the challenges, the parties involved have exhibited determination to see the implementation process through. On 24 September, the Ceasefire and Transitional Security Arrangements Monitoring and Verification Mechanism (CTSAMVM) held a two-day Permanent Ceasefire and Transitional Security Arrangements workshop that was attended by Government representatives and opposition groups. The President also issued a Republican Order #17 on 28 September ordering the immediate release of all political detainees among others.

**Funding**

At end of September, there is a funding gap of 27 per cent against UNICEF South Sudan’s 2018 HAC requirements of US$ 183.3 million. Funding available under HAC 2018 includes carry-forward from 2017, mainly due to multi-year funding, as well as substantial funding received in December 2017. UNICEF wishes to express its sincere gratitude to all public and private donors for the contributions received.
**UNICEF SOUTH SUDAN SITUATION REPORT**

**30 September 2018**

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### REPORT AS OF 30TH SEPTEMBER 2018

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds Available*</th>
<th>C/F from 2017</th>
<th>Funding Gap ($)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>26,669,780</td>
<td>5,527,698</td>
<td>5,887,710</td>
<td>15,254,372</td>
<td>57%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>48,185,091</td>
<td>26,592,964</td>
<td>17,465,326</td>
<td>4,126,801</td>
<td>9%</td>
</tr>
<tr>
<td>WASH</td>
<td>43,455,000</td>
<td>9,285,780</td>
<td>9,000,639</td>
<td>25,168,581</td>
<td>58%</td>
</tr>
<tr>
<td>Education</td>
<td>40,000,000</td>
<td>17,970,376</td>
<td>21,896,493</td>
<td>133,132</td>
<td>0%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>25,000,000</td>
<td>10,267,074</td>
<td>10,592,931</td>
<td>4,139,995</td>
<td>17%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>183,309,871</strong></td>
<td><strong>69,643,891</strong></td>
<td><strong>64,843,099</strong></td>
<td><strong>48,822,881</strong></td>
<td><strong>27%</strong></td>
</tr>
</tbody>
</table>

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*The figures indicated above are gross (including GR, but not programmable at CO level).
*HAC funded include substantial C/F funding from 2017, mainly due to multi-year funding as well as funding received in December 2017
*There are grants included in HAC Appeal SS. However, Business area are different to SS hence excluded from the table data, ex: SM180051(Denmark), KM180002(DFAM), SM180051(Kenya), SM180051(PD)
*SM180003, SM180010 and SM180011 income was part of 2017, so adjusted values have been taken for income received in 2018.

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**Next Situation Report: 31 October 2018**

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

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

**UNICEF South Sudan Appeal:** [http://www.unicef.org/appeals/](http://www.unicef.org/appeals/)

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**Who to contact for further information:**

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## Annex A

### SUMMARY OF PROGRAMME RESULTS 2018

<table>
<thead>
<tr>
<th>Cluster for 2018</th>
<th>UNICEF and partners for 2018</th>
<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target (Jan-Dec)</strong></td>
<td><strong>Results (Jan-Sept)</strong></td>
<td><strong>Target (Jan-Dec)</strong></td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of targeted children 6-59 months with severe acute malnutrition (SAM) admitted to therapeutic care</td>
<td>209,140</td>
<td>146,087</td>
</tr>
<tr>
<td>% of exits from therapeutic care by children 6-59 months who have recovered</td>
<td>&gt;75%</td>
<td>88%</td>
</tr>
<tr>
<td># of pregnant and lactating women with access to infant and young child feeding (IYCF) counselling for appropriate feeding</td>
<td>1,013,536</td>
<td>574,441</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children 6 months to 15 years in humanitarian situations vaccinated for measles</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of long-lasting insecticide treated nets (LLITN) distributed</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of preventive and curative consultations provided to children under 5 years of age</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WATER, SANITATION AND HYGIENE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of target population provided with access to safe water as per agreed standards (7.5-15 litres of water per person per day)</td>
<td>2,200,000</td>
<td>1,197,711</td>
</tr>
<tr>
<td># of target population provided with access to appropriate sanitation facilities</td>
<td>1,100,000</td>
<td>534,112</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children reached with psychosocial support (PSS)</td>
<td>271,000</td>
<td>194,479</td>
</tr>
<tr>
<td># of unaccompanied and separated children (UASC) and missing children registered</td>
<td>13,700</td>
<td>11,369</td>
</tr>
<tr>
<td># of children reached with life-saving mine risk education (MRE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached by gender-based violence (GBV) prevention and response services</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children and adolescents 3 to 18 years provided with access to education in emergencies</td>
<td>674,619</td>
<td>238,097 (female)</td>
</tr>
<tr>
<td># of teachers and members of parent-teacher association (PTA) and school management committee (SMC) trained</td>
<td>5,465</td>
<td>2,197 (female)</td>
</tr>
</tbody>
</table>

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1. The Nutrition Cluster target does not include refugee children who are covered under the Multi-Sector Refugee Appeal, while UNICEF’s nutrition response covers all children, including refugee children residing in the country.

2. The Child Protection target against the HAC 2018 differs slightly from the HRP 2018 target due to the reduced funding for the Child Protection Sub Cluster (CPSC). The HPM targets are based on the HAC funding needs.

3. UNICEF achievement is higher than CPSC achievement (national data base) – the national data base registration of cases take longer time as there are procedures to complete before registration.