Highlights

- 7,500 women and children will benefit from 15 boreholes drilled out of the planned 20 boreholes in Bidibidi settlement, Yumbe district.
- 3,465 caregivers of vulnerable children aged 0-23 months are accessing infant and young child feeding (IYCF) counselling in the refugee hosting districts.
- 20,296 and 40,192 children have been immunized against polio and measles respectively.
- During this reporting period, a total of 3,052 children (2,366 boys and 686 girls) benefited from psychosocial support by UNICEF partners Save the Children, Transcultural Psychosocial Organisation (TPO) and World Vision in Arua, Adjumani, Yumbe and Kiryandongo through participation in structured child friendly space activities.
- 1,528 children have been registered for the six functional early childhood development (ECD) centres in Bidibidi. UNICEF and partner Plan International are opening five more ECD centres in Bidibidi settlement.

UNICEF’s Response with partners

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>Cumulative since July 2016 influx</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Protection</td>
<td># of children in humanitarian situations benefiting from psychosocial support</td>
<td>48,216</td>
</tr>
<tr>
<td>Health</td>
<td># of children (6 months to 14 years) immunized against measles</td>
<td>40,192</td>
</tr>
<tr>
<td>WASH</td>
<td>Average litres of water per person per day accessed by children and women in refugee settlements</td>
<td>Yumbe: 10.7 Adjumani: 15.7 Arua: 8.6 Kiryandogo: 13.23</td>
</tr>
<tr>
<td>Education</td>
<td># of children (3-5 years) accessing ECD services</td>
<td>1,528</td>
</tr>
<tr>
<td>Nutrition</td>
<td># of children (1-14 years) dewormed</td>
<td>61,456</td>
</tr>
</tbody>
</table>

Source: UNICEF and partners field reports
Situation Overview and Humanitarian Needs
According to UNHCR and the Office of the Prime Minister (OPM), there has been an increase in the number of new refugee arrivals from 5 to 11 September 2016, with 24,814 arriving compared to 18,703 and 17,133 in the previous two weeks. Over 92,000 (64 per cent) of the new arrivals are children. Bidibidi settlement in Yumbe is now hosting 72,000 refugees, and the settlement has an estimated capacity for 100,000. Most of these refugees were relocated by OPM and UNHCR from Adjumani, Arua, Lamwo and Kiryandongo in order to decongest these camps.

UNHCR and partners conducted a mass nutrition (MUAC) screening in Bidibidi settlement over the past week. Data shows that 262 (5.6%) of the 4,683 children screened between the ages 6 to 59 months were found to be acutely malnourished. Of these, 54 (1.2%) were severely malnourished and 208 (4.4%) were moderately malnourished. 652 children were assessed at entry points of Oraba, Kuluba, Busia and Ocea, and among these, 20 children were diagnosed with malnutrition of which 13 were found to be suffering from Moderate Acute Malnutrition (MAM) and 7 with Severe Acute Malnutrition (SAM). The Global Acute Malnutrition (GAM) rate was low overall at 3.07%. Both the SAM and MAM rates were also low at 1.07% and 2% respectively.

Cumulatively, the number of cholera cases stands at 141 as of 11 September 2016 according to UNICEF field reports. Of these cases, 88 were discharged and 1 case is still admitted in the chola treatment center. The case was reported to have originated from Amuru District. No case fatality has been registered to date. The number of new cases is steadily declining. This is attributed to efforts by Water, Sanitation and Hygiene (WASH) and Health partners including the district health and water offices, UNHCR, UNICEF, Uganda Red Cross Society (URCS), Lutheran World Federation (LWF), Medicins Sans Frontieres (MSF), Medical Teams International and Danish Refugee Council (DRC) who are actively engaged in the containment of the cholera outbreak.

Humanitarian Needs
According to UNICEF field reports, challenges in Health and WASH still exist across the settlements receiving new refugees. For instance, Village Health Teams are unequipped with many members walking long distances to cover the ever increasing population. In addition, these teams have inadequate equipment and supplies available to support the Bidibidi hospital and there is a lack of staff to provide supervised dosing of water guards for people collecting water from unsafe sources. There is need to increase the number of health workers to manage the Cholera Treatment Units and supply of Cholera Rapid Diagnostic Kits. An additional tent for cholera case management in Yumbe Hospital is required.

In Child protection, there is a need to have children’s records safely transferred to Yumbe by the first identifying partner from the different settlements and entry points of Arua, Adjumani and Kiryandongo. Social norms that are hindering girls and host community children from accessing services at the child friendly spaces (CFS) need to be addressed and finally, partners need to determine adequacy of control measures between Uganda and South Sudan to prevent trafficking of children and women.

For Education, nutrition services need to be extended to all early childhood care and development (ECCD) centers for continued screening. The decongestion of Nyumanzi Reception centre is ongoing and approximately 8,000 children will need classroom space in settlements within Adjumani mainly Maaji, Ayilo and Boroli. Approximately 50,000 children (23,000 female) in refugee settlements in Adjumani, Yumbe and Arua lack access to education. In Yumbe (Bidibidi settlement), more than 30,000 school age children lack opportunities for education. Primary schools closed on 26 August for second term holidays but one feeder school in Pagirinya 2 which opened on 29 August continued to operate with over 3,000 learners attending classes daily to catch up with missed lessons.

Humanitarian Leadership and Coordination
The Refugee Department of the OPM and UNHCR continue to coordinate the national response to refugees. With respect to registration, daily arrival figures from July 2016 are being validated using emergency registration, head-counts or wrist-banding. Confirmed figures will only be available as the new arrivals undergo biometric registration. Within the current response, sector coordination arrangements include UNICEF playing a co-leadership role in Child Protection. The Government of Uganda’s refugee policy prioritizes integration into Ugandan communities, therefore UNICEF’s model of engaging directly with district governments is highly

1 UNHCR Uganda, Emergency Update on the South Sudanese Refugee Situation, Inter-agency daily No. 39, 10-14 September 2016.
relevant. UNICEF has technical specialists based in the Zonal Office covering the Northern Region of the country, including West Nile, where the refugees are hosted. Technical specialists participate in coordination efforts and work with the district and sector line ministries to provide health, nutrition, WASH and education support as required. Additional technical expertise supporting the response in education has been availed by Canadian Civilian Standby Support for UN Operations (CANADEM) as well as surge support in Child protection, WASH from Danish Refugee Council and C4D from Irish Aid.

Humanitarian Strategy

The UNICEF humanitarian support to refugees from South Sudan is based on strategic priorities agreed upon in the inter-agency planning sessions led by OPM and UNHCR. The priorities include the following: (1) Targeted protection and support services for specific needs (in particular GBV prevention and child protection), and Cholera response/prevention as cross-cutting priorities; (2) Cholera prevention and response; (3) Strengthening of protection and assistance efforts at temporary reception facilities, including increased child protection staffing and presence; (4) Expansion of Bidibidi settlement in Yumbe District, expansion of new settlement areas elsewhere; and (5) Implementation of the logistics operation to transfer refugees directly from border points to Yumbe, and decongestion of Adjumani temporary reception facilities. UNICEF has a dedicated team for emergency planning and response, and they are also part of the regular programme support to further strengthen the linkage between emergency and development programming.

Summary Analysis of UNICEF Programme Response

UNICEF and its partners at reception areas and settlements are providing services to women and children as outlined below:

Health

- UNICEF, through partners URCS and LWF, has distributed selective chemoprophylaxis and water treatment tablets in response to the cholera outbreak. Other activities include active case search and community sensitization.
- UNICEF is supporting dialogue between authorities of Uganda and South Sudan on cross-border management and control of cholera on the Nimule front.
- 20,296 and 40,192 children have been immunized against polio and measles respectively.

Nutrition

- To date, nutrition partners (Medical Teams International, Concern Worldwide & ACF) are collaborating at screening points for malnutrition. 24,353 children have been screened, of which 393 were severely malnourished, 384 were given appropriate treatment and 46 were cured.
- UNICEF is monitoring the utilization of Ready-to-Use Therapeutic Food (RUTF) at district level and at the regional referral hospital; currently there is enough stocks in country.
- 25,546 children received vitamin A supplementation.

WASH

- In Yumbe, construction of 3 motorised systems is ongoing and expected to be completed by the end of the month and will serve 15,000 people.
- UNICEF in partnership with DRC is supporting construction of communal and household latrines through distribution of 50 latrine digging kits, 4,000 hand washing facilities and 40 litres of liquid soap.
- UNICEF is supporting operation and maintenance of 13 motorised systems serving approximately 40,000 refugees and host population in refugee districts of Adjumani, Arua and Kiryandongo.

Education

- Cumulatively, 1,528 (787 boys & 741 girls) children have been registered for the 6 ECD functional centres in Bidibidi.
- With support from OPM, UNICEF has identified two additional sites in Zone two for possible ECD center establishment for the new arrivals in Bidibidi.
- UNICEF in support of hygiene provided 10 hand washing facilities to existing centres and 28 pieces of rakes for clearing the new sites for construction.
- UNICEF will supply 16 tents as temporary classrooms in 4 primary schools in Bidibidi.
UNHCR partner Windle Trust Uganda has started the process of recruiting 100 additional teachers in Adjumani and Yumbe to support expansion of education to refugee children.

Overall, the Education in emergency response remains underfunded. Hence, UNICEF is unable to meet the needs of an estimated 12,733 emergency affected refugee children (50% of the children are of school going age) with essential psychosocial and education support.

Child Protection

In Yumbe, the UNICEF implementing partners, World Vision, TPO and other SGBVWG/CPWG members are conducting awareness dialogues with communities on the risk of sexual violence. 231 people participated in three community dialogues that were conducted from 6-13 September 2016 in Bidibidi settlement. Child protection committee members were selected as community members volunteered to participate after the dialogues. The Child Protection Committee includes a core executive committee made of a president, vice president, a secretary and a mobilizer.

During this reporting period, a total of 3,052 children (2366 boys and 686 girls) benefited from psychosocial support through participation in structured activities organised by Save the Children, TPO and World Vision in CFSs in Arua, Adjumani, Yumbe and Kiryandongo. More efforts are being put in place to involve more girls by engaging parents in CFS activities.

Communications for Development (C4D)

UNICEF is supporting the containment of the cholera outbreak with social mobilization interventions in a response led by the Ministry of Health. This includes airing of radio spots and radio talk shows on signs and symptoms and prevention of cholera in the affected emergency districts of Yumbe, Arua and Adjumani. In partnership with URCS, C4D assessments at five sites have been carried out and the findings from these assessments have been integrated into URCS cholera outbreak response C4D interventions. These interventions include the following in five districts of Adjumani, Arua, Yumbe, Nebbi and Zombo:

- Revitalizing and training community groups on cholera prevention and hygiene promotion and home/camp/block improvement campaigns.
- Holding advocacy meetings and sensitization sessions for 80 local civic, religious and cultural leaders (including Local Councilors) on cholera prevention and control so as to equip them with knowledge to integrate the cholera prevention messages in their routine engagement with their respective communities.
- Holding advocacy meetings with district leaders, heads of department, heads of security organizations to equip them with knowledge on cholera prevention and control in order to sensitize their respective communities as well as remind them to commit critical actions and responsibilities i.e. enactment of by-laws, enforcement, supervision, Local Government sanitation budget appropriation etc.
- Sensitizing 40 school head teachers, heads of institutions (primary, secondary and tertiary institutions) to equip them with knowledge on cholera prevention and control (including effective hand washing with soap, cholera case identification, Oral Rehydration Therapy etc.) that will be integrated into routine morning parades and school-health activities.
- Orienting district-level partners on cholera prevention and control strategies (including effective hand washing with soap, food safety, cholera case identification, ORT, referral, etc).
- Orienting of 50 community-based volunteers in behavioral change communication for cholera prevention and control.
- Engaging 50 URCS community based volunteers to conduct house-to-house/block by block health & hygiene promotion activities and Cholera prevention & control messaging.

Funding

UNICEF is grateful to all Donors for their contributions to Uganda, including the Central Emergency Response Fund (CERF) and the Department for International Development (DFID), whose support to preparedness and response has, in addition to UNICEF core resources, supported timely humanitarian action to the renewed influx of refugees from South Sudan.

UNICEF’s original 2016 Humanitarian Action for Children (HAC) appeal for Uganda amounted to US$ 14.4 million. As at June 2016, US$ 9.8 million was required for the South Sudan refugee response. With the recent influx of refugees from South Sudan and other needs in the country, the 2016 HAC is currently being revised to approximately US$ 22.7 million to reflect the latest funding requirements. Provisional requirements for the South Sudan refugee response will increase from US$ 9.8 million to US$ 15 million, primarily to cover additional needs.
of women and children in WASH, Health and Child Protection sectors. The revision of the HAC will align with the revised August 2016 Regional Refugee Response Plan (RRRP) for South Sudan Refugees.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements*</th>
<th>Funds available</th>
<th>Funding gap</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH</td>
<td>900,000</td>
<td>3,467,794</td>
<td>-567,794</td>
<td>-63%</td>
</tr>
<tr>
<td>Education</td>
<td>1,500,000</td>
<td>591,781</td>
<td>908,219</td>
<td>61%</td>
</tr>
<tr>
<td>Nutrition and Health</td>
<td>3,688,000</td>
<td>2,375,870</td>
<td>1,312,130</td>
<td>36%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>2,000,000</td>
<td>1,777,940</td>
<td>222,060</td>
<td>11%</td>
</tr>
<tr>
<td>Programme Support</td>
<td>1,700,000</td>
<td>510,024</td>
<td>1,189,976</td>
<td>70%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>9,788,000</strong></td>
<td><strong>6,723,410</strong></td>
<td><strong>3,064,590</strong></td>
<td><strong>31%</strong></td>
</tr>
</tbody>
</table>

*The table indicates the 2016 HAC funding requirements for the South Sudan refugee response in Uganda as of June 2016.

More info on the South Sudan Crisis on:
http://www.childrenofsouthsudan.info/
www.facebook.com/unicefsouthsudan
http://www.unicef.org/appeals/

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