**WATER, SANITATION & HYGIENE (WASH)**

**The Crisis in SOUTH SUDAN**

*The current crisis is exacerbating already low access to safe water and sanitation, increasing the risk of water borne diseases, including cholera.*

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**SITUATION FOR CHILDREN**

The current crisis has worsened what was already some of the worst access to safe water in the world. Even before the crisis, the national coverage for both water and sanitation was already very low at 41 per cent for water and 14 per cent for sanitation, while improved hygiene was negligible. In 2014, 70 out of the remaining 122 Guinea Worm global cases were in South Sudan. Open defecation is practiced by 86 per cent of the population and urban water systems are barely operational, putting children at risks from oral faecal transmission of water borne diseases such as diarrhoea, cholera and hepatitis E.

In the conflict-affected states, 40 per cent of water and sanitation facilities have been destroyed, with worsening economic crisis the cost of WASH activities has more than doubled; institutional capacity fragmented; and communities have reverted to using contaminated water sources. On a positive note, the 2015 cholera outbreak is currently in decline, with few cases over the past two weeks. A total of 1,814 cholera cases in Juba and Bor, including 47 deaths have been reported this year. Twenty-four per cent of deaths are children under 5.

Providing expanded, improved and sustainable water, WASH services is crucial for all other development and humanitarian processes and is recognized as a national priority in the South Sudan Development Plan. The total budget allocation for WASH services is low, while the current conflict has reduced the gains made in providing access to safe water to the majority of the South Sudanese population.

**UNICEF & PARTNER RESULTS**

UNICEF provides a comprehensive WASH response on multiple fronts, implementing an emergency response in and outside the PoCs, as well as responding to the demand for WASH services in other none conflict affected areas to prevent the water borne diseases such as cholera outbreak and in Guinea Worm endemic villages using appropriate approaches such as direct implementation through the Rapid Response Mechanism (RRM) as well as in collaboration with partners. UNICEF is also the manager of the core WASH Cluster supply pipeline.

Over 1.5 million people have been reached with WASH core pipeline supplies in 2015, including soap, buckets and water purification tablets, ensuring timely implementation of life saving activities.

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**Funding required for 2015:**

US$ 45,900,000

**Funding received for 2015:**

US$ 20,299,696
UNICEF & PARTNER RESULTS

Access to water: So far in 2015, UNICEF has supported 498,211 people to access safe water through water trucking; drilling, repairing and rehabilitating boreholes and household water treatment products to reduce cases of water borne disease. Residents of the PoCs in Bentiu, Juba, Malakal, Bor and Wau and the IDP site in Mingkaman continue to access safe water based on agreed emergency standards.

In Bentiu PoC, the Sector 1, 4 and 5 water supply systems are now complete and litres per person per day has increased to 12.9. In Bentiu Town and Rubkona, UNICEF completed rehabilitation of 17 hand pumps of boreholes, benefitting over 8,500 people. In Malakal PoC, water supply remained at 9L/p/d, within the Sphere Standard of 7.5-15 L/p/d. In Mingkaman, UNICEF through its implementing partner RUWASSA continued providing 700,000 litters of water per day for 53,183 People with an average of 13.2 L/p/d.

<table>
<thead>
<tr>
<th>No. Of People Served</th>
<th>Safe Water Supply</th>
<th>Sanitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Juba UN House</td>
<td>28,000</td>
<td>28,000</td>
</tr>
<tr>
<td>Jonglei</td>
<td>60,616</td>
<td>15,805</td>
</tr>
<tr>
<td>Upper Nile</td>
<td>101,500</td>
<td>70,171</td>
</tr>
<tr>
<td>Unity</td>
<td>126,000</td>
<td>145,150</td>
</tr>
<tr>
<td>Lakes State</td>
<td>73,700</td>
<td>32,724</td>
</tr>
</tbody>
</table>

Access to sanitation: A total of 284,611 IDPs and host community members have been provided with access to safe sanitation facilities by UNICEF and partners this year. Sanitation facilities are designed to mitigate the risk of gender-based violence. Solid waste management continues in Bentiu, Bor, Malakal and Juba PoCs. To overcome the challenge of poor ventilation of communal latrines, which is affecting their proper use, UNICEF is piloting “beneficial micro-organisms” (BMO) in pit latrines, especially in PoCs and school latrines in Mingkaman, Juba and Wau IDP sites. BMO are bacteria grown on fermenting starch solution and applied into pit latrines with the effect of immediately eliminating odours.

Cholera Response: UNICEF is continuing to support Cholera Treatment Centres and Oral Rehydration Points in Juba, Jonglei and Eastern Equatoria with WASH supplies (chlorine, buckets, soap and chlorine tablets etc.) and solid waste disposal. Juba City Council continues to be supported with chlorine to ensure all water tanker trucks are chlorinated after filling up along the Nile in Juba city. This chlorination is providing safe water to over 100,000 people. UNICEF and teams from ACF and Oxfam GB monitor free residual chlorine (FRC) in water supplied by water tankers around Juba.

Intensive community awareness campaign was launched in Juba, Bor, Torit and Kajo-keji through radio messages, house-to-house visit and street announcements. In Juba and Bor, 280 social mobilizers have reached 116,000 households with Cholera prevention and control key messages through demonstrations on Oral Rehydration Salt (ORS), water treatment and proper hand-washing. Also, 5,652 community leaders, 41,000 children and 920 teachers were reached.

Community-Led Total Sanitaiton (CLTS): In stable states, UNICEF continued to use the CLTS model to create sustainable change in terms of access to sanitation. A total of 150 villages including 52,800 households, have been declared open defecation free, 91 of which were declared in 2014. Twenty-five per cent of households in CLTS programme counties have hand washing facilities.

WASH in schools: So far in 2105, WASH facilities, including gender-disaggregated latrines and handwashing facilities have been constructed at 47 schools.
Guinea Worm Eradication: UNICEF has drilled 48, and rehabilitated 56 boreholes, and upgraded 2 water systems serving endemic villages in Mogos and Kauto. Drilling of ten additional emergency boreholes to stop the spread of Guinea Worm to the Mingkamen IDP camp is in process, as are boreholes for an additional 45 endemic villages. So far in 2015 there have been no cases of Guinea Worm, with hopes of eradication by the end of 2016.

CHALLENGES

- Due to insecurity in most of the areas of the emergency response, WASH partners’ capacity on the ground is limited and access to those in need of WASH services has been constrained;
- Forty per cent of WASH facilities in conflict-affected areas were destroyed;
- There are a large number of IDPs competing for limited WASH facilities in and outside the PoCs;
- Logistical challenges of reaching remote areas poor road infrastructure in most of the country;
- High cost of project implementation and weak private sector base;
- WASH supplies, pre-positioned for rainy season and outbreak activities were looted during the conflict.

SCALE UP IN 2015

**Flagship: Sustainable WASH Services in Rural and Peri-Urban Areas**

Massive destruction and neglect of urban water systems during the conflict, combined with the displacement of trained water technicians has meant that these systems will need to reestablished. UNICEF will work with local authorities to rehabilitate water systems in rural and small towns including Bentiu (once civilian populations return), Bor and Pibor expected to benefit over 345,000 people.

WASH interventions will include situation analyses, preparedness, frontline emergency WASH response and strengthening partner capacity. UNICEF will deliver emergency lifesaving support in hard to reach areas through the RRM which includes the delivery of high impact activities to save lives through household water treatment innovations, WASH supply distribution and minor repair of existing water points to provide safe water. UNICEF will strengthen community operation and maintenance; government capacity at national and state levels; and overall coordination in the WASH sector.

Hard to reach areas, host communities and areas of return: As the dry season begins, UNICEF is increasing partnerships to expand WASH services in hard to reach areas, including locations where there continues to be little coverage for WASH services. These partnerships aim to reach over 1,200,000 people in Jonglei and Upper Nile. Such partnerships will be expanded in areas reached through RRM missions, increasing the sustainability of the RRM modality. UNICEF will aim to ensure that basic WASH services are provided as per global standards and minimize the suffering of the displaced populations and vulnerable host communities. Special consideration will also be given for areas of return where UNICEF will rehabilitate water supplies and undertake CLTS and hygiene promotion.

Response in PoCs and IDP sites: Existing water facilities will be upgraded to ensure sustainable and quality services for the vulnerable population taking in consideration gender specific needs. In IDP sites and some PoCs, there will be a shift to household sanitation facilities instead of trench latrines currently in use. Hygiene promotion and scaling up of volunteer systems, water quality monitoring, piloting of WASH innovations, outbreak preparedness, response and control will be some of the activities implemented.

Community-Led Total Sanitation: The CLTS model will be scaled up in Western Bahr el Ghazal, Northern Bahr el Ghazal and Central Equatoria states. National and state-level strategies will be completed. In 2015, UNICEF will target 150 villages with 120,000 people.

Guinea Worm Eradication: UNICEF will continue upgrading water system in Guinea Worm-affected areas, aiming to reduce the total number of cases to zero by providing water to 75,000 people. Eighty-one new water points will be provided in 2015.

**Priorities for 2015:**

- **600,000** people provided with access to water as per agreed standards (7-15 liters of water per person per day).
- **250,000** people provided access to appropriate sanitation facilities.
- **1,000,000** people reached with hygiene promotion messages.
- **100,000** children provided access to WASH in school’s and child friendly spaces.
- **20,000** mothers of malnourished children provided emergency WASH supplies and hygiene messages.
- **150** Open defecation free villages.

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