UNICEF SOUTHERN SUDAN
QUARTERLY REPORT JANUARY-MARCH 2006
EDUCATION

The Go To School Initiative was successfully launched in Juba on 1 April 2006. First Vice President of the Republic of Sudan and President of Southern Sudan, Salva Kiir Mayardit declared that 1 April would henceforth be known as ‘Education Day’ in Southern Sudan, while the First Lady committed herself to become a champion for girls’ education within the Go To School Initiative. The event was also attended by UNICEF Deputy Executive Director Rima Salah.

The goal of the Initiative – a UNICEF flagship programme for 2006-2007 – is to ensure that 1.6 million more children are enrolled in primary school and demonstrating core competencies in literacy, numeracy and life skills by the end of 2007. A total of 700,000 of these children are expected to enroll by the end of 2006. Currently, only about 22 per cent of an estimated 2.2 million school-age children are enrolled in primary school. There are four boys in school for every girl, and only about one per cent of girls complete primary education. Children in over half of existing schools do not have access to safe water and close to 70 per cent of schools have no latrines.

The launch of the Initiative has generated widespread interest from United Nations and NGO partners, members of the community and Southern Sudanese in the diaspora. A launch for Upper Nile State took place in Malakal on 5 April, led by the governor of Upper Nile, and further launches are planned for states throughout Southern Sudan.

Rapid Assessment of Learning Spaces (RALS)
The success of the Go To School Initiative depends on access to accurate data on the education system. A RALS exercise, supported by UNICEF, is currently underway to quickly collect and analyse data about existing schools and learning spaces. The project will provide information on locations of schools/learning spaces; access to schools; presence and condition of physical structures; access to water and sanitation facilities; enrolment numbers disaggregated by gender and grade; numbers of teachers, disaggregated by gender and qualification; availability of learning/teaching materials; and languages taught and used for instruction.

Training of RALS assessors is anticipated to be complete by early May, at which point teams will cover over 50 per cent of Southern Sudan. The exercise has been completed in the eight counties of Lakes State, where the geographical location of each school has been established with GPS to facilitate future planning.

As of early April, 65 GPS units have been received in Juba, 30 of which have been delivered to Malakal. Training of trainers for RALS recently took place in Malakal, covering trainers from Western and Northern Bahr el Ghazal, Jonglei and Upper Nile States.

School supplies
The Go To School Initiative includes a massive component of procurement and logistics. UNICEF with strong donor support has procured, packed and shipped:

- 21,000 educational kits (each containing classroom essentials for 80 students),
- 500,000 sets of textbooks in four core subjects for Primary 1-4 including teacher’s guides
- Recreation kits, teacher kits and headteacher kits
- Some Arabic textbooks books for Primary 1-3 classes in former Government of Sudan-controlled towns whose transition to English instruction will take time.

Textbooks for core subjects arrived in all states ahead of the 1 April launch and are being distributed at the county and school level.

Teacher training/development
The majority of teachers in Southern Sudan are untrained volunteers. Over 9,000 teachers are required if the Go To School Initiative is to meet its targets successfully. The recruitment and training of teachers and managers in the education sector is therefore a top priority.

A crash teacher-training programme is being planned and a teacher education thematic group meeting was held on 7-8 March 2006. The core team has since met and prepared an outline of the proposed practical training for the crash teacher-training course.

In March, three teams including government officials went on mission to Kenya, Uganda and Khartoum to recruit teachers for Southern Sudan. Unity and Lakes States have also begun internal recruitment drives. In Lakes State, an estimated
150 young returnees who completed high school in Kenya and Uganda have registered to teach and are awaiting the crash teacher-training course.

**Schools construction**

Only 10 per cent of schools in Southern Sudan are permanent buildings made of bricks or concrete. Plans are underway to construct 1,500 new classrooms (or 200-250 new schools) in 2006. UNICEF is committed to providing a water point and sanitation facilities at all newly-constructed schools, and will also aim, wherever possible, to add safe water and sanitation facilities at existing schools where these facilities are lacking.

Preparations are underway to begin construction of three model schools in April. Site selection for school construction has been completed in Lakes, Unity and Eastern Equatoria states.

School construction is an area that requires a great deal of material and financial support. Ideally, 40,000 classrooms are estimated to be necessary to meet enrolment targets. Options are currently being explored to develop schools and learning spaces through standardisation and partnerships with other agencies.

**Child participation**

GEM (Girls’ Education Movement) training took place in Rumbek from 18-23 March. Young people from Kenya and Uganda co-facilitated the workshop together with their Southern Sudanese counterparts. The young people shared their experiences in micro-planning and social mapping and presented their results to the government through the governor of Lakes State. Youth from Rwanda have also expressed their desire to be included in any future creative facilitation sessions. A total of 30 young people from five states were trained to mobilise their peers for GTS, while strategies were developed to form Go To School clubs; reach out to boys in cattle camps and children in isolated, remote and nomadic populations; and promote inclusion of all children, including orphans, children with disabilities, demobilized child soldiers, working children and others.

A programme for GEM training for the Go To School Initiative in Wau has been prepared and is expected to take place in early April. A core team of ten youth and ten teachers are expected to facilitate creative activities for 50 children from ten schools in the area (30 secondary school children and 20 primary school children). This team of young people, teachers and children will then support the GTS launch in Wau in April. The creative facilitators will further support the formation of Go To School clubs and other networks in Warrap and Western Bahr-el-Ghazal States.

**Planning/Partnerships**

On 8 February a planning meeting took place with staff from the Ministry of Education, Science and Technology; the Ministers of Education for Central Equatoria, Eastern Equatoria and Jonglei States; and the Government of Southern Sudan Minister of Education, as well as UNICEF staff and representatives from the Sudanese diaspora. UNICEF continues to engage with the World Bank and the GOSS to access resources for education from the Multi-Donor Trust Fund administered by the World Bank. In Rumbek, UNICEF supported the Ministry of Education of Lakes State to organise and conduct a two-day planning workshop to develop the 2006 state education plans and implement planning for the Go To School Initiative.
HEALTH

Mass Measles Campaign

In March, Maridi County was the latest area to be covered by the mass measles immunisation campaign (MMC), a joint effort between the Government of Southern Sudan, WHO, UNICEF and partners. Despite a challenging security situation on the ground, due to continued activity of the Uganda rebel Lord’s Resistance Army (LRA), a total of 83,663 children were vaccinated. Insecurity prevented access to Maruko payam in Maridi. This brings the total number of children reached so far in Southern Sudan to 537,107 in seven counties (Juba, Terekeka, Kapoeta, Budi, Tambura, Ezo and Maridi). A summary of all the areas covered to date is shown in the table below.

<table>
<thead>
<tr>
<th>County</th>
<th>Total population (estimate)</th>
<th>Target population (47%)</th>
<th>Children vaccinated</th>
<th>% coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tambura</td>
<td>106,086</td>
<td>49,860</td>
<td>51,546</td>
<td>103%</td>
</tr>
<tr>
<td>Ezo</td>
<td>79,347</td>
<td>37,293</td>
<td>39,321</td>
<td>105%</td>
</tr>
<tr>
<td>Maridi</td>
<td>203,892</td>
<td>95,829</td>
<td>83,663</td>
<td>87%</td>
</tr>
<tr>
<td>Budi</td>
<td>177,846</td>
<td>83,587</td>
<td>76,117</td>
<td>91%</td>
</tr>
<tr>
<td>Juba</td>
<td>281,928</td>
<td>132,507</td>
<td>98,345</td>
<td>74%</td>
</tr>
<tr>
<td>Terekeka</td>
<td>120,202</td>
<td>56,495</td>
<td>57,206</td>
<td>101%</td>
</tr>
<tr>
<td>Kapoeta</td>
<td>433,768</td>
<td>203,871</td>
<td>130,909</td>
<td>64%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,403,069</td>
<td>659,442</td>
<td>537,107</td>
<td>81%</td>
</tr>
</tbody>
</table>

The MMC is designed not only to vaccinate up to five million children, but simultaneously to improve measles surveillance and case management. Most importantly, it will boost routine immunisation in the long term. The expansion of the cold chain, training of 9,000 health personnel and development of detailed sub-county level micro plans for the campaign will dramatically boost routine immunisation coverage in the South - ultimately ensuring that children throughout Southern Sudan are protected from a whole range of other vaccine preventable diseases in the future. Capacity building for counterparts will lead to stronger primary health care services in general.
The map above shows the status of the campaign plans. Some areas in Equatoria remain outstanding, due to insecurity, but the campaign will next move into Lakes State (Rumbek and Cueibet Counties); Jonglei State (South Bor County), Bentiu/Rubkoana in Unity State and Aweil East in northern Bahr el Ghazal State. All supplies, logistics (including transport) and cold chain equipment needed for the next locations are available.

Social mobilisation
A multi-level, multi-channel social mobilisation strategy has taken off for the Mass Measles Campaign. The strategy includes calling parents and community members to action on the one hand; sensitisation of stakeholders, partners and NGOs to build effective partnerships on the other and also equipping the social mobilisation teams with effective tools to achieve their objectives.

Following audience research and community consultation across Equatoria and Lakes States, the campaign theme runs on the question “Are your children safe from measles? Immunize Now!” in multiple languages. Public service announcements started from April 11 in English and Dinka languages on Sudan Radio Service (on 11,805 KHz and 15,325 KHZ in the mornings and 17,660 KHz in the evenings.) even as several FM channels are being approached for support. Communication material and announcements in other languages such as Arabic, Nuer, Bari and Shilluk is being synchronized as the campaign moves along. Pre-recorded cassettes for use in vehicles and on megaphones have also been developed.

Linkage with polio campaigns
All resources of the MMC – transport, cold chain, personnel are routinely released to support the various rounds of the polio immunisation campaign national immunisation days. For example, MMC activities were suspended from March 31 up to 10 April to support the implementation of the second round of polio immunisation days this year.

Equipment and supplies
The MMC requires major inputs to manage the logistics of mounting the campaign in each area. Cold chain and other equipment sufficient to serve routine immunisation activities remains behind after the MMC completes its work. One of the prime achievements of the mass measles campaign is the strength it provides to the routine immunisation programme. The equipments and supplies for the campaign include vaccines, syringes and needles, safety boxes, generators, refrigerators, freezers, cold boxes, vaccine carriers, icepacks, thermometers, megaphones, bicycles and motorbikes. One million additional measles vaccines have been received in Lokichoggio during March. All 20 cars for the campaign are in place and are being re-deployed to various counties as needed. Twenty-one motorcycles and 1,604 bicycles are also available for deployment.

There is still a significant shortfall of funds for the campaign to cover transport, cold chain store construction, personnel costs, air transport, incentives, spare parts, vaccines and accessories. The total shortfall is about $2.1m including outstanding supplies and spare parts.
Routine immunisation

25 NGOs that collected vaccines from UNICEF in January, February and March have started to submit reports of their immunisation activities in 44 locations in Southern Sudan. A total of 15,934 children under one year have received BCG in the first three months of 2006 while 7,090 have received measles vaccination (in a routine setting). The reporting rate for the first quarter is 69%. The drop-out rate remains a major concern and is above 50%. With DPT for example, 12,058 infants received the first does but only 5,276 received the third.

<table>
<thead>
<tr>
<th>ANTIGEN</th>
<th>Q1 TOTALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>BCG &lt; 1 YR</td>
<td>15,934</td>
</tr>
<tr>
<td>DPT1 &lt; 1 YR</td>
<td>12,058</td>
</tr>
<tr>
<td>DPT3 &lt; 1 YR</td>
<td>5,276</td>
</tr>
<tr>
<td>MEASLES &lt; 1 YR</td>
<td>5,452</td>
</tr>
<tr>
<td>MEALS &lt; 5YRS</td>
<td>10,255</td>
</tr>
<tr>
<td>TT1</td>
<td>24,091</td>
</tr>
<tr>
<td>TT2</td>
<td>17,560</td>
</tr>
<tr>
<td>TT3</td>
<td>4,230</td>
</tr>
</tbody>
</table>

Other health activities in brief

Supplies distributed to partners and implementing projects included:
- 239 Primary Health Care Unit drug and supply kits
- 20 Traditional Birth Attendant kits
- 2,100 Insecticide-Treated Nets were distributed
- 10 cholera kits, various cholera supplies such as IV fluids, drugs, 285,000 ORS sachets were provided
- 90,000 doses of Meningitis AC vaccine were distributed for use by partners to respond to an outbreak in the northern part of Southern Sudan

NUTRITION

One of the strategies for improving child nutrition during 2006 is to mainstream nutrition monitoring and therapeutic treatment into the services offered by larger health institutions. Malnourished children could be treated without depending on the mobilisation of an external aid agency each time high rates of malnutrition are found or suspected.

Nutrition programmes in Western Bahr el Ghazal

Along these lines, UNICEF has supported the Ministry of Health to run nutrition programmes in Western Bahr el Ghazal (WBEG).

Therapeutic feeding programmes (TFP) have been set up in two hospitals, and are reducing nutrition-
related morbidity and mortality through sound treatment and community-based interventions.

In January, UNICEF ran a training and orientation programme at Raja civil hospital to enable it also to manage these services. The programme was also supported by WFP and the International Rescue Committee (IRC). Staff were trained on three modules: module one (understanding nutrition, screening, referral, health education, as well as patient care). Medical staff were trained on module two (therapeutic and supplementary feeding, routine medicine and management of complications). The third module was a practical session on anthropometry and treatment procedures. A disused ward was cleared out and prepared to accommodate the TFP.

Within a radius of two km of Raja hospital, a series of house to house visits found 13 severely malnourished children needing treatment who were screened and admitted to launch the service. The therapeutic feeding centre (TFC) in Wau Hospital is attached to the paediatric ward and managed since August 2005 by MOH staff in collaboration with UNICEF, WFP and Don Bosco Catholic sisters. UNICEF provides nutritional supplies. WFP provides support for the supplementary feeding programme (SFP) managed by the Don Bosco sisters.

Thanks to orientation given to the surrounding health centres in November 2005 on systematic nutritional screening of children seen in primary health care centres and their referral, plus nutritional education to the community, more malnourished children from the IDP camps are being diagnosed and sent for appropriate care. In the first week of January, 27 children were admitted for therapeutic feeding in Wau hospital. The underlying level of malnutrition in the area requires routine TFC services best hosted at the hospital.

Surveys and response
Concern and Tearfund received nutrition and medical supplies and related items such as mosquito nets from UNICEF to continue interventions following surveys which found unacceptably high levels of malnutrition in Aweil South, North and Central counties in Northern Bahr el Ghazal.

In Aweil North and South in February, Concern Worldwide found a global rate of acute malnutrition (GAM) of 17.9%, with a severe rate (SAM) of 1.6%. About one third of the children were reported to have had malaria recently. In Aweil South, Tearfund’s survey found a GAM rate of 20% and a SAM rate of 3.7%. BCG coverage was 21.7%. According to the report, 95% of under-fives eat less than twice a day. Community-based therapeutic care and other interventions will continue in response to the findings.

Nutrition coordination
The first nutrition coordination meeting of 2006 was held in Juba. Eighteen participants from MOH, Medair, WVI, Tearfnd, World Relief, MSF-CH, WHO, WFP, Italian Cooperation, OCHA, and UNICEF attended the meeting which was chaired by the MOH and facilitated by UNICEF. Some findings:

- There remains insufficient comparable nutrition data
- 2005 aggregate for acute malnutrition was 20%; for severe acute malnutrition, 2.7%
- 30-40% of households in Southern Sudan consume iodized salt
- Food insecure states that need close monitoring are: Northern Bahr el Ghazal, Eastern Equatoria, Jonglei, Warrap, Western Bahr el Ghazal and Unity.

Issues covered included: the need for interagency/GOSS rapid food security and nutrition assessments in the six food insecure states; an interagency process to identify gaps (structures, personnel etc); documentation of lessons learnt; WFP and UNICEF to clarify procedures for accessing food, special therapies and non-food items; funding shortfalls; monitoring tools; development of IEC nutrition materials and integration of nutrition into the health care system.

Data collection
UNICEF provided supplies and technical support for the Sudan Household Health Survey. About 150 assorted items of anthropometric equipment (weighing scales, length measuring boards, weighing pants and IDD testing kits) have been provided for the nutrition element of this major data collection effort (see IN BRIEF below.
HIV/AIDS

The magnitude of the HIV/AIDS crisis in Southern Sudan is not yet known. Many people have heard of HIV/AIDS, most do not know how it is transmitted and therefore how to protect themselves. Medical facilities in general are very basic so services such as Voluntary Counseling and Testing (VCT), antiretroviral (ARV) treatment, and assistance to people living with HIV/AIDS (PLWHA) are minimal or non-existent. The situation of children impacted by HIV/AIDS is hardly known at all.

UNICEF has played a major role in combating HIV/AIDS in Southern Sudan. In 2002, UNICEF was instrumental in assisting the Sudan People’s Liberation Movement (SPLM) to establish the New Sudan National AIDS Council (NSNAC). Working with NSNAC, UNICEF supported NGO partners to develop VCT services and now is providing HIV test kits to 16 VCT centres. In 2005, over 19,000 test kits were supplied by UNICEF. By 2004 UNICEF was investigating how to promote Prevention of Mother to Child Transmission of HIV (PMTCT). The Safe Motherhood Initiative (SMI), which combines antenatal care, routine counseling and testing for HIV, PMTCT and emergency obstetric care, was implemented in 2005. Eighteen pilot sites were established and closely monitored. Data collected from those sites will be used to design improved services for pregnant women.

The Government of Southern Sudan (GOSS) has placed NSNAC directly with the GOSS Vice President’s office, thereby elevating its importance and ensuring that its focus remains cross sectoral. Each line ministry will have an HIV/AIDS focal person who will promote HIV/AIDS programming within the policies and activities of his/her respective ministry.

Other activities

- UNICEF facilitated training on HIV/AIDS and human rights in an interagency protection training session held in Yirol (Lakes State) in February, and trained 50 community leaders on HIV/AIDS and human rights in Bentiu (Unity State) which included protection training organised by the protection working group.
- UNICEF supported a two week training of trainers for youth peer educators in Wau from March 19-30. This is the final phase of training for Malakal, Wau and Juba. UNICEF Southern Sudan has observed the training and will be meeting with the partnering agency (International Planned Parenthood) to determine the next steps to support youth peer education.

FAMILY SHELTER AND RELIEF

UNICEF is a major supplier of non-food family relief and shelter materials in Southern Sudan. Kits comprising a package of vital items from soap to blankets to cooking pots are procured and pre-positioned on standby in case of need. Emergency distributions through implementing partners have continued in 2006 - mainly for people newly displaced by local conflict, but also other people in particular need and vulnerable groups and individuals among returnees and host communities. About 30,000 people have benefitted from these kits so far this year.

Western Equatoria: 2,000 households who fled communal conflict in Nadiangere (north of Yambio) have been assisted in Yambio County. Distribution took place in March led by SRRC and with the support of UNHCR and GTZ.

Bahr el Jebel/Central Equatoria: 415 households who fled conflicts in Rajaf and Lobonic were assisted in Juba. Distribution took place led by ADRA. Also, UNICEF contributed shelter materials to the Lologo transit camp for Bor Dinka returnees.

Northern Bahr el Ghazal: 1,500 households in Aweil Central County received non-food item kits supplied by UNICEF. Distributions were led by SRRRC and WFP in April. Also 1,122 households in Aweil East (Baac and Yargot Payams) composed of vulnerable IDPs, host and returnee groups received NFIs supplied by UNICEF. Distributions were led by Tearfund in March.

Upper Nile: 616 returnee households (returnees) in Malakal town received NFIs from UNICEF, distributions were led by ADRA in January.

Western Equatoria: 200 groups of PLWHA -’s have been assisted with NFI’s in Nzara and Yambio town through Comboni Sisters, Christian Brothers and ACROSS.

Also, NFI supplies were given to health NGOs (Medair, MSF Holland, ADRA) and MOH in support of response to acute watery diarrhoea/suspected cholera outbreaks in Malakal and Juba.
WATER, SANITATION AND HYGIENE

Acute Watery Diarrhoea

A total of 9,050 cases and 245 deaths with an overall case fatality rate of 2.71% was reported by WHO from January 28 to 22 March from the outbreak of acute watery diarrhoea in Southern Sudan. The outbreak dominated the activities of the UNICEF Southern Sudan water, sanitation and hygiene team during February and March.

The first news of the outbreak came in late January with three deaths and 48 patients admitted in Yei health facilities. The disease then ripped rapidly through Yei, reaching outlying villages and Juba. From there it spread to dozens of locations with carriers moving from Juba to other towns, especially along the Nile.

UNICEF is supplying hospitals in Juba and Yei with medical supplies including IV fluid, soap as well as jerry cans, buckets, plastic sheeting, gloves and other equipment. UNICEF is also involved in strengthening and repairing water treatment and supply systems and public health education efforts. High energy nutritional food for children is being made available. UNICEF deployed emergency water and sanitation and health teams to Yei, Juba, Bor and Malakal and funded diarrhoea/cholera treatment facilities and water supply systems in Bor, Malakal and Torit.

In Juba, a specialised treatment centre was set up in the El Sabah Children’s Hospital by MSF-Spain with UNICEF support. In Malakal, MSF-Holland set up a treatment centre with UNICEF contributions. Local radio stations and mobile vans are broadcasting health education messages. Cleanup campaigns have been organised in the towns. Town water supplies are being chlorinated.

UNICEF has chartered cargo aircraft to airlift some of the supplies to Juba and Yei from stores in Yambio and Lokichoggio, as part of an expanded emergency response to the outbreak.

The population of Southern Sudan’s towns is swelling due to the return of displaced people and refugees, and increased economic activity. Urban infrastructure, battered by decades of war, is completely inadequate for the skyrocketing needs in water supply as well as in health services and education. Rural areas too are struggling to absorb the increased population.

As part of a coordinated response including UN agencies and local and international NGOs, and led by the Government of Southern Sudan’s health authorities, further UNICEF medical and water and sanitation stocks continue to be mobilised. A broad effort is being mounted to enhance access to clean water and sanitation as well as launch public awareness campaigns about the importance of good hygiene and clean water.

Clean water supply in Southern Sudan is generally lacking, with less than a third of the population having access to a safe source. Very limited sanitation facilities and a generally poor hygiene situation worsen the threat. Diarrhoea is a major killer of children and contributes to a very high under five mortality rate. Yei town is typical of Southern Sudan’s urban centres in having insufficient boreholes for its growing population, leading to many people taking water directly from rivers and ponds, which are used for drinking, bathing and watering livestock. Juba was largely dependent on untreated water from the Nile, while Bor had no functioning safe water point at all. The outbreak has provided a wake up call on urban water and sanitation and UNICEF has been able to make significant lasting improvements as part of emergency response.
Aweil Town water and sanitation
Aweil Town (Northern Bahr el Ghazal) has a very shallow water table. There are currently 44 drilled water points in Aweil, 26 of which are machine drilled and 18 are hand drilled. Six of the machine-drilled are reportedly not operational. There are about 29 unprotected hand-dug wells privately owned by individual households. The drilled water points were not evenly distributed in the town; most of them were located in and around the staff quarters of Ministry of Agriculture leaving the rest of the town with the shallow hand-dug water points. All of the shallow hand dug wells and most of the hand-drilled wells (average depth of 16 metres) dry up in the dry season.

Aweil’s precarious water situation is worsened by unsanitary excreta disposal systems, and open field defecation. A common method of excreta disposal is the use of bucket latrines which are removed and emptied on the outskirts of the town. These buckets are emptied every four days or so by carriers who charge about $2. Currently there are over 250 bucket latrines (privately owned). An estimated population of 30,000 and an average family size of six means 4,673 households do not have access to safe means of excreta disposal.

In response to this situation, the German group THW and UNICEF have concluded a technical assessment in Aweil Town and have set up an Emergency Water Supply System (Small Town Water Distribution System).

Other activities
In March, four counterparts from the Rural Water Department were trained on the job in Lakes State on borehole platform construction, while nine counterparts completed basic computer training as part of UNICEF capacity building.

The UNICEF-funded hospital sanitation enhancement project in Rumbek regional hospital, which includes a water supply system and 15 latrines and 12 shower rooms was completed by the contractor and handed over in February.

In January and February, 10 new water points have been successfully drilled in Leer, 1 in Koch and 1 in Aweil for a total of 12.

UNICEF-funded drilling campaigns – either contracted out by UNICEF or using UNICEF rigs and teams - are underway in Lakes, Unity State, Northern Bahr el Ghazal and Western Equatoria.

In January and February, major hand pump repairs have been performed at 203 water points in Leer, Panyijar, Aweil and Lakes, ensuring continued access to safe water for over 100,000 people.

An emergency water system for returnees has been installed in Bor in partnership with MEDAIR. This is one of the way stations for IDPs on the move to home. Another way station water system in Warawar (Northern Bahr el Ghazal) is underway.

UNICEF will begin to provide water points for new schools alongside the Go To School Initiative.

For further information on WASH activities, contact Leo Goulet (lgoulet@unicef.org).
CHILD PROTECTION

Child DDR
A team from the Southern Sudan DDR Interim Authority and UNICEF traveled to Bentiu to begin demobilisation of children in armed forces. The team joined up with field staff trained in December last year and introduced itself to the UN and agencies on the ground, as well as local authorities and the SPLA. The team identified and trained Identification and Verification Team members, who will carry out registration and demobilisation. The team received good support from the local authorities and military units. Children were also found in police units. The children who were identified, including some in police units, were all from the local communities, and many of them lived at home.

A child DDR team composed of staff from UNICEF and the Southern Sudan interim DDR authority visited Unity and Southern Kordofan states in February where they carried out sensitisation and demobilisation exercises. While the visit was a preliminary one to set up the modalities for child DDR, a number of other armed groups which have joined the SPLA recently were keen to have children removed from their ranks and subsequently 146 children in Unity State and 36 children in Southern Kordofan were released from armed forces and returned to their communities.

In Rumbek, 11 regional child DDR officers from the interim DDR authority were trained in February in the operational guidelines and policies of child demobilisation; the officers were from SPLA forces in Northern and Western Bahr el Ghazal and Upper Nile.

The third round of training for regional child DDR officers and senior SPLA commanders took place in Rumbek in March again with eleven participants. The purpose of the workshop was to train the child DDR officers, familiarize the SPLA officers about child DDR and to develop an action plan for the demobilisation of CAAFG from Abyei, Southern Blue Nile, Equatoria and Jonglei. By the end of the workshop an operational plan had been developed for each of the locations for the removal and demobilisation of children from armed forces.

Children’s legislation
UNICEF’s legal affairs officer was involved in the drafting process of the state constitutions; representatives of the states were given a model draft and the opportunity to include in the model constitution the changes they thought appropriate to their own state.

The Bill of Rights in the Interim Constitution was included in the states constitutions and the provisions on children were adopted unchanged although additional provisions included: the right to be protected from FGM; that government in the states should accord special protection to street children, amongst other vulnerable children; that children have the right not to be arrested or detained except as a measure of last resort; and that children have the right to be protected from sexual abuse and exploitation including child defilement and rape.

Mine Risk Education
In response to an increase in landmine incidents in Malakal, in March the Mine Risk Education Coordination Group organised a week of awareness raising activities on the theme “Learning to live with landmines – adopting safe behaviour.” The week included open forums with ministers, UNMAS, local landmine NGO SLIRI, ICRC and UNICEF, live radio interviews, songs and drama and a concluding march through the town. Many children and young people were actively involved in the preparation and delivery of the week’s events.

A three-day training of Mine Risk educators was carried out in Akot (Lakes State) in March; 118 participants from Yirol, Agany, Makuragaar, Panjiei, Alakabai and Mapodit who are currently receiving skills training took part. It is expected they will be able to educate their home communities on mine awareness on their return.

The first of the mine risk billboards was placed at Jebel Kujur near Juba during March and the other nine will go up on the Juba-Yei road upon completion of the mine survey in these areas.
More billboards are planned for the Torit to Juba road as well as roads within Malakal and Wau.

A MRE training of trainers was conducted in February for 76 primary school teachers who were taught how to use the MRE life skills materials in and around schools.

The UNICEF 2002 to 2006 mine action strategy was reviewed by an evaluation consultant who visited activities during February.

Building capacity

In Juba, UNICEF worked with the GOSS Ministry of Gender, Social Welfare and Religious Affairs to produce a draft training plan “Towards a South Sudan Child Protection Framework” which aims to develop the skills and knowledge of ministry staff on child protection principles, the methodology for a 10-state child protection baseline study and the identification of priority child protection policies.

In February, with support from UNICEF Southern Sudan, Enfants du Monde in Wau (Western Bahr el Ghazal) began the training of 90 teachers to help them meet the psychosocial needs of the children in their care. Three sessions of six days each were held with teachers from 30 schools and the Don Bosco Training Centre. Topics covered in the training included: child development, building a safe environment for children, learning and recovery and children under difficult circumstances. The teachers were from schools with a high number of children from IDP families. In the coming months the teachers will return to their institutions and assist in training their colleagues on the psychosocial needs of children in schools.

Islamic Relief Worldwide’s Child Protection Project in Upper Nile also conducted a week-long training for over 40 child protection promoters from 10 communities which included sessions on communicating with youth, mine risk education, special protection measures for girls, children associated with armed forces and groups, and HIV/AIDS prevention. In Padak, Bor County, additional training was carried out with community and youth groups in all the payams. Young people in the area emphasised that the lack of opportunities for education and employment were some of the most serious challenges they were facing but showed great enthusiasm for being involved. Spread over a wide geographical area but with good coordination, the youth networks in Bor are making a valuable contribution to the protection of children in their communities.

Social worker training course

Recent security incidents in Yambio have twice disrupted Southern Sudan’s first training course for social work. Despite serious setbacks, the course has remained open and the participants are hoping to complete the first part of their training by the end of April. Local staff and resource persons have contributed time and knowledge which has enabled the teaching to continue.

Birth registration

Birth registration can help to protect a child’s rights. Very few births are formally registered in Southern Sudan and birth certificates are a rarity. During February, UNICEF initiated consultations to identify ways to introduce birth registration in Southern Sudan. Meetings were held with traditional birth attendants and midwives from Rumbek Hospital, Malteser Clinic and Baptist Mission PHCC. Visits were carried out in the payams of Akot and Pachoung which included a focus group interview with 20 women and the acting payam administrator in Pachoung. Interestingly the understanding of the importance of birth registration varied widely among the women. Many of them said that proper healthcare, as opposed to birth registration, was of primary importance and should be the focus while others said they used the birth registration cards they received in hospital as a helpful form of identification for their children.
Other activities
In March, UNICEF participated in training 26 police officers in Rumbek (Lakes State). The training focused on the importance of the police in protecting children; duties, roles and powers of the police under the draft children’s bill; alternatives to arrest for child offenders and the role of the police in dealing with children in need of care and protection.

UNICEF also organised a family tracing workshop in Rumbek in January to coordinate the setting up of a network involving international and local agencies, partners and community groups for a country-wide community-based tracing and reintegration programme. Over fifty participants representing all areas of Southern Sudan took part.

A workshop to train SC-UK’s Community Care Committee and SCS’s Community Mobilizers on registration, tracing and reunification, as well as reception was successfully carried out at the SC-UK compound in Malual Kon (Northern Bahr el Ghazal). The objective was to enable those involved in registration, tracing, reunification, and reception of CEAWC returnees to understand basic concepts, tools and their role in the process.
QUICK START COMMUNITY BASED PROGRAMME

The war-affected people of Sudan have high expectations that peace will bring services to satisfy their basic needs as well as support to reconstruct and develop their communities. UNICEF’s Quick Start programme started in December 2003 and has been encouraging grassroots participation in the planning and implementation of community-based programmes. To date projects have been funded in the 10 states of Southern Sudan and the transitional areas of Abyei, Nuba and Southern Blue Nile.

To improve performance and monitoring, future partner project agreements will be handled through the seven UNICEF zonal offices (Wau, Juba, Aweil, Rumbek, Malakal, Bentiu/Nyal, Yambio).

Quick Start in Nuba Mountains/Southern Kordofan
Although Nuba Mountains/Southern Kordofan are no longer part of Southern Sudan, the UNICEF Quick Start programme funded activities in the area which are now completed.

Save the Children (USA) has been implementing a project in Kumo, Rashad County for the construction and curriculum adaptation for the Hakima Health Training School. The establishment of the Hakima Institute will address the need for trained nurses in the area. Upon completion of the first year of a modular training, graduates will support the services of 7 to 10 PHCCs, which will be providing services to a total population of 120,000. Access to quality services will be critical with the anticipated population growth resulting from returning IDPs. The Institute comprises of three classroom blocks, dormitories, dinning hall, resource centre, laboratory and administration block.

Norwegian Church Aid (NCA) in collaboration with the Joint Military Commission (JMC) completed the installation of the Kauda airstrip fuel station and the extension and improvement of the Kauda airstrip. The airstrip is a lifeline for the area and the purpose of the funding was to make it possible to land larger cargo aircraft, and improve the runway condition. The airstrip length was extended from 850 m to 1100 m and the width from 10 to 25 m and clearance work of 50-70 m was carried out along the sides of the airstrip.

Support had been given to the local education authorities for the print shop in Kauda, a UNICEF-supplied duplication and printing facility for the production of over 15,000 text books for primary 1-4 for English, Mathematics, Science and Social studies.

Through Quick Start funding, International Aid Services (IAS) supported the Nuba Community Water Supply Project in Lagowa and Dilling counties. The area has experienced numerous waves of conflict since early 1980s. Over 5,000 people now have access to clean water through the successful provision of ten boreholes.

Other Quick Start activities
A contract has been signed for the construction of five low cost schools (complete school, eight classrooms, office block, store, pit latrine and water facilities) in the locations of, Achumchum (Wau County), Aweil Centre, Gogrial, Alek (Gogrial West County) and Kuajok (Warap State).

Forty complete hand pumps are being transported to the South Sudanese Development Organisation (SSDO) based in Yei (Bahr el Jebel State). Once installed, these will provide 20,000 beneficiaries access to clean water and reduce family workload and time spent collecting for water. The project is especially timely given the outbreak of cholera which began in Yei.

A complete listing of the over 100 Quick Start projects is available on request from Edward Engels (eengels@unicef.org).
IN BRIEF

Visit of Sebastiao Salgado
UNICEF and UNEP facilitated an expedition by Goodwill Ambassador and award-winning photographer Sebastiao Salgado. Brazil-born Salgado is engaged on a major six-year project entitled “Genesis”, recording aspects of the unspoilt planet. His visit to Southern Sudan took him to the Dinka cattle camps in Lakes state, to record some of their unique social, cultural and livelihood activities.

Sudan Household Health Survey
The Sudan Household Health Survey (SHHS) will be the first Sudan national statistical survey for over 20 years. A stepping stone to a full census planned for 2007, it is implemented by two institutions: in southern Sudan, by the Southern Sudan Centre for Census, Statistics and Evaluation (SSCCSE) and in the north, by the Central Bureau of Statistics (CBS). The SHHS will survey over 20,000 households countrywide (1,000 in each of 10 southern states) on household characteristics, health, education, water, food security and nutrition. UNICEF has been among the agencies supporting the process with equipment, logistics and technical input. Planning, training of enumerators and procurement took place from January to March while data collection in the field begins in April 2006.

Yambio insecurity
Yambio, capital of Western Equatoria, and the UNICEF base for the area, suffered two attacks by armed forces suspected to be the Lord’s Resistance Army since the beginning of the year. The insecurity has severely disrupted operations in the area and caused new humanitarian needs among displaced people (UNICEF response is outlined elsewhere in this report). Unrelated clashes in the town in November 2005 left houses and shops burnt and looted, including the homes of UNICEF staff (see photo).

Wau peace dance
Every Sunday at dusk up to 5,000 people gather in Freedom Square in Wau. The sound of hundreds of drums and singing can be heard for miles. This is Ngara Salaam, the Drum of Peace – a cultural gathering supported by UNICEF. Some 18 tribes celebrate not only their own heritage but also those of others. One of the organisers, Abraham Chol Manyil says “We want our children to learn their history and traditions and also we want to make peace among the tribes who are living here”.

David Arop, 15, says “When I go there and I see some one who is old, he is like my father, and if I meet someone who is my age then they are like my brother. I think the Ngara Salaam has relaxed tension between the tribes in Wau.”
### FUNDING

#### ACTUAL RECEIVED CONTRIBUTIONS BY DONOR IN 2006 AS OF 21 APRIL 2006

<table>
<thead>
<tr>
<th>Donor</th>
<th>Programme</th>
<th>Project</th>
<th>Contribution (USD)*</th>
</tr>
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<tr>
<td>Denmark</td>
<td>Education</td>
<td>Basic Education</td>
<td>9,621,530.00</td>
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<tr>
<td>Multidonor thematic</td>
<td>Education</td>
<td>Emergency Education</td>
<td>3,910,000.00</td>
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<td></td>
<td>Health</td>
<td>Primary Health Care</td>
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<td>DDR</td>
<td>Child DDR (within IDDRP)</td>
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<td>WASH</td>
<td>Emergency WES</td>
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<td></td>
<td>Nutrition</td>
<td>Acute Malnutrition</td>
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<td>CDC</td>
<td>Health</td>
<td>Polio</td>
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<td>UN Foundation</td>
<td>Health</td>
<td>Mass Measles</td>
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<td>USAID</td>
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<td>Mass Measles</td>
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<td></td>
<td>Coordination and Common Services</td>
<td>Planning, Research, M&amp;E</td>
<td>250,000.00</td>
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<td>Switzerland</td>
<td>WASH</td>
<td>Institutional &amp; Policy Development</td>
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<td></td>
<td>Capacity building for partners and communities</td>
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<td></td>
<td>Operation &amp; Maintenance</td>
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<td>381,680.00</td>
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<td>Institutional &amp; Policy Development</td>
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<td>German UNICEF Committee</td>
<td>Education</td>
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<td>Netherlands UNICEF Committee</td>
<td>Child protection</td>
<td>Return &amp; Reintegration</td>
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<td><strong>Grand Total</strong></td>
<td></td>
<td></td>
<td><strong>23,877,188.56</strong></td>
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*excluding carryover

** Japan and UK DFID via Trust Fund

#### FUNDING OUTLOOK BY PROGRAMME INCLUDING FIRM PLEDGES AS OF 21 APRIL 2006

<table>
<thead>
<tr>
<th>Programme</th>
<th>Contributions* and firm pledges</th>
<th>Appeal amount</th>
<th>Shortfall</th>
<th>% funded</th>
</tr>
</thead>
<tbody>
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<td>66,732,800</td>
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<td>Health</td>
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<td>12,522,600</td>
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<td>Coordination and Common Services</td>
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<tr>
<td>Child protection</td>
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<td>Mine Action</td>
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<tr>
<td>Cross Sector Support for Returns</td>
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<td>483,600</td>
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<tr>
<td><strong>Grand Total</strong></td>
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<td><strong>174,247,820</strong></td>
<td><strong>140,700,631</strong></td>
<td><strong>19%</strong></td>
</tr>
</tbody>
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- including Common Humanitarian Fund and excluding carryover
- For further information, contact Debra Bowers (dbowers@unicef.org)