In July, 59,469 individuals (including 29,942 children) fled the conflict in Sudan, and entered into South Sudan. 91 per cent of those arriving are South Sudanese (54,116). 1

1,526 suspected measles cases were reported in July, a 140.3 per cent increase as compared to June 2023, and a 663 per cent increase as compared to July 2022.

Malnutrition worsened amongst children under 5 years with 27,574 severely malnourished children admitted for treatment, the highest admissions were recorded in Jonglei State (19 per cent). There is an overall 7 per cent increase in admissions in 2023 as compared to 2022.

As of July 2023, UNICEF received $93.9 million against the 2023 Humanitarian Action for Children (HAC) appeal, with a funding gap of $123.3 million (57 per cent).

**SITUATION IN NUMBERS**

- **5,000,000** Children in need of humanitarian assistance
- **9,400,000** People in need of humanitarian assistance
- **2,200,000** Internally Displaced People
- **1,400,000** Children expected to suffer acute malnutrition

**FUNDING STATUS (IN US$)**

- **$58.8M** UNICEF Appeal 2023
- **$123.3M** US $217.2M
- **$35M** 2022 carry over

* UNICEF response % is only for the indicator, the funding status is for the entire sector.
**FUNDING OVERVIEW AND PARTNERSHIPS**

In 2023, UNICEF requires US$ 217.2 million to meet the critical needs of 5.3 million people, including 3.5 million children affected by multiple shocks in South Sudan. The funds will enable UNICEF, with the Government and partners, to deliver integrated services in WASH, Nutrition, Education, Child Protection, Health, and Social Behavior Change (SBC) services to protect children’s rights and to deliver on the Core Commitments to Children in Humanitarian Action.

As of July 2023, UNICEF South Sudan received US$ 58.9 million (27.1 per cent of the total ask) against the 2023 Humanitarian Action for Children (HAC) appeal. An additional US$ 35 million was carried over from 2022 (16 per cent of the ask). Overall, US$ 93.9 million was made available for January – July 2023, resulting in a 57 per cent funding gap for the HAC appeal. The Nutrition sector is the most funded sector with a total of US$ 71.8 million (94 per cent of their overall ask), followed by WASH with US$2.99 million (67 per cent funded), and Child Protection with US$ 4.9 million (53 per cent funded). The three least funded sectors are Education with US$ 2.25 million received (96 per cent funding gap), Health with US$ 1.48 million received (89 per cent funding gap) and WASH with US$ 10.4 million (81 per cent funding gap).

In response to the ongoing Sudan crisis which commenced in April 2023, UNICEF South Sudan extended the Sudan Crisis Response plan (May-July 2023) for an additional five months, covering May - December 2023. UNICEF’s response to the Sudan crisis requires a total of US$ 19.9 million to meet the needs of 394,000 individuals with life-saving assistance, including 198,000 children. So far, US$ 6.8 million have been committed for these efforts.

UNICEF is thankful for the contributions of donors that help provide services to support South Sudan’s vulnerable children and women. Nonetheless, South Sudan remains one of the most complex humanitarian environments in the world, and there is an urgent need for flexible, multi-year funding to deliver integrated packages of support for children’s survival, protection, and education while building community resilience.

**SITUATION OVERVIEW AND HUMANITARIAN NEEDS**

Between 1 – 31 July, 59,469 individuals crossed the border from Sudan to enter South Sudan across multiple points of entry. 91 per cent of these new arrivals are South Sudanese (54,116), 8.7 per cent are Sudanese (5,173) and .3 per cent are third party nationals. Of those who arrived in July, there are 13,700 women, 15,827 men, 14,684 girls and 15,258 boys. The highest number of arrivals, 87.5 per cent, (52,055 people) entered through Upper Nile, whilst the least (560) were recorded in Western Bahr el Ghazal. There was a 10.2 increase in the overall number of arrivals in July (59,469) compared June (53,952) was noted. In Unity however, there was a 69.5 per cent decrease in arrivals in July (3,247) as compared to June (10,664). This can be explained by the shifting conflict dynamics, greater insecurity on routes of transit, as well as reports of high fees for transportation due to insecurity and increased fuel costs, that make the journey more challenging through Unity port of entry.

With the rainy season quickly approaching, it’s expected that population movements will become more dynamic and unpredictable, with some crossing routes becoming blocked, creating risks of increased congestion as well as increasing displacement. Given the treacherous traveling conditions and the lack of food and clean water that people must endure to reach points of entry and transit sites, most arrive in a critical condition which necessitates immediate support upon arrival. As populations live in close proximity to one another and must share common spaces and facilities, the risk of disease outbreaks (such as cholera and measles) is high. Furthermore, the price of food has been increasing, making it even more difficult for populations to buy the necessary commodities they need. The price of Sorghum is the highest recorded, having risen to a national average of 2,992.03 SSP in July 2023, from 1,667.48 SSP in July 2022, representing a 79.4 per cent increase in one year.

Across several parts of South Sudan, conflicts and insecurity remain a driver of humanitarian needs, as well as access impediments. In July, high community tensions in The Greater Pibor Administrative Area (GPAA) following threats of attacks from neighboring communities, resulted in displacement of women and children from their villages. Furthermore, as a result of the rumours and tension, several humanitarian organizations temporarily relocated to Pibor Town for safety and prevention. Suspected age-set groups were reported to have taken advantage of the tensions and gained illegal access to humanitarian compounds, where theft of humanitarian items was reported.

In Central Equatoria the highest number of humanitarian access incidents were recorded in July, linked to bureaucratic access constraints (OCHA, July, 2023). The result of incidences was fees on humanitarianists, and reports of harassment and detention of humanitarian personnel in Juba. In July, Central Equatoria State also implemented a disarmament exercise to improve security, which was reported as successful in Terekeka county, especially in the Payams of Nyori, Terekeka, and Moni, due to the involvement of the chiefs of the Mundari cattle camps.

**SUMMARY ANALYSIS OF PROGRAMME RESPONSE**

**Health**

A 20-year-old mother who had just delivered her third child at UNICEF’s supported hospital in Twic County, Warrap State.

In July 2023, UNICEF continue to provide routine healthcare services through the implementing partners mostly in world bank funded states of Jonglei, Upper Nile and Unity including Ruweng and Pibor Administrative areas. Within July 2023, 274,985 people were provided with primary healthcare services among which, 152,099 were female and 104,859 were children under the age of 5 years. The most common illness was malaria which accounted for 28
percent of total curative consultations, this was followed by diarrhoea which accounted for 14 percent, pneumonia accounted for 11 percent and other communicable and non-communicable diseases account for 45 percent. To curb continue infection of malaria among population, UNICEF is prepositioning of long-lasting insecticide mosquito nets for mass distribution across the country under the Global Fund funding. To avert other diseases, UNICEF started distribution of quarterly medical supplies to world bank supported states and administrative areas.

In July 2023, UNICEF Continue to respond to Sudan crises by providing healthcare services at the returns transit centers in Renk, Melut, Malakal, Juba and Bentiu. In these locations of returnees from Sudan due to the crises, a total of about 7,700 outpatient consultations were provided, about 200 children under 1 year were vaccinated against measles and other antigens. In Northern Bahr El Ghazal and Abyei, the returnees are being integrated into the community, however, UNICEF provided PHCC and PHCU kits to the catchment health facilities to meet the increasing demand for healthcare services in these locations. In July 2023, a total of 1,329 suspected measles cases were reported, of which 325 (24%) were returnees, 25 (1.9%) refugees and 26 (1.95%) were IDPs from Renk, Maban, Juba, Aweil Centre, Malakal, Melut, Awerial, Gogrial West, Rubkonka and Twic camps. The cases continued to increase despite the Nationwide Measles Follow up campaign conducted in May 2023. The independent post campaign evaluation was conducted in July 2023, the result shows a coverage of 85 percent against the administrative coverage of 92 percent. Both results (post campaign evaluation and administrative coverages) were lower than expected target of at least 95 percent. The increase in number of measles cases were mainly attributed to low campaign coverage, influx of returnee and refugee in South Sudan, UNICEF through MoH, WHO other health partners continue to respond to measles outbreak.

During the month of July 2023, a total of 9,267 eligible people 18 years of age and above were fully vaccinated against COVID-19, and 2,542 received Booster doses through regular fixed and outreach immunization services in health facilities across the country.

Nutrition

Despite the efforts made so far in 2023, the malnutrition situation among children in South Sudan continued to worsen in July. The key drivers of malnutrition in the country remain the same, namely the increase in cost of living (due to the deteriorating exchange rates of the South Sudanese Pound relative to the US Dollar), ongoing conflict/insecurity, floods and disease outbreaks.

In July, 27,574 severely malnourished children were admitted for treatment. Overall, From January to July, 61 per cent of the annual target has been reached. The highest number of admissions was reported in Jonglei State (19 per cent) Northern Bahr el Ghazal (15 per cent) and Unity State (14 per cent). As compared to the same period in 2022, there is an overall seven per cent increase in admissions this year. Increases in admission rates were also noted in Central Equatoria State (49 per cent), NBeG State (40 per cent) and in Warrap and Unity States (35 per cent). A 14 per cent reduction in admission rates were noted in three states (Eastern Equatoria, Jonglei, WBeG). Overall, 96.4 per cent of children under treatment were cured, 0.4 per cent died, 1.8 per cent defaulted, and 1.4 per cent did not respond to treatment. 170,511 pregnant women and caregivers of children 0-23 months were reached with infant and young child feeding (IYCF) counselling services.

Of all the children under five who were screened for severe acute malnutrition (SAM), 11,857 (43 per cent) of them were screened for malaria, of whom 3,201 (27 per cent) tested positive. 92 per cent of severely malnourished children (2,945) who tested positive for malaria received treatment.

As a continuation to the ongoing Sudan crisis response, 10,190 children under five and 3,206 pregnant and lactating women (PLW) were screened for malnutrition at reception, entry points and transit centers in Upper Nile, Unity Abyei AA, Northern Bahr El Ghazal and Western Bahr El Ghazal States during July. Among the screened children, 910 were suffering from SAM while 1,605 were suffering from moderate acute malnutrition (MAM). All of these children received treatment on-site and were later referred to the nearest treatment facility for further support. Of the screened Pregnant and Lactating Women (PLW), 597 were moderately malnourished and also received support through the targeted supplementary feeding program (TSFP) supported by WFP.

There are several key constraints that have made it more difficult to provide the necessary nutrition support. The flooding and insecurity in some counties have led to inaccessibility of four nutrition sites in Aweil North and nine in Malakal. These elements have also led to the temporary closure of some nutrition facilities including the Minga Primary Health Care Unite (PHCU) in Mundri East, thus impacting our ability to provide crucial nutrition services to the populations who need them the most. As a result of the ongoing conflict, food prices increased. In addition to this, the limited delivery of food commodities from Sudan to areas that are dependent on these supplies (especially Abyei Administrative Area) has put a serious strain on the food supply, further dampening the section’s ability to assist incoming refugees and returnees. High operational cost for the delivery of nutrition supplies and the transport of water to project areas (including Renk) has also added an additional pressure on the nutrition service provision.

![TREND OF SAM ADMISSION BY MONTH, 2021-2023](image)

In July 2023, UNICEF and partners reached 3,534 children (1,840 girls and 1,694 boys) and 260 adults (135 women and 125 men) in child-friendly spaces, schools, and communities with psychosocial social support (PSS) activities including, i) positive parenting and awareness raising sessions on child protection issues and ii) focused and non-focused mental health and psychosocial social support (MHPSS).

A total of 28 children (13 girls and 15 boys) including unaccompanied and separated children (UASC) were registered and received comprehensive case management services (including identification and registration, comprehensive assessment, case plan, implementation, follow-up, and case closure) according to their personal vulnerability criteria. In Jonglei State, 12 children (five girls, six boys and one woman) were recovered and reunified with their families.

1,999 individuals (796 girls, 420 boys, 676 women and 107 men) were reached with gender-based violence (GBV) prevention and response messages (including those on social norms), individualized case management, PSS and referrals to other specialized services. In Yei County, 605 children (294 girls and 311 boys) were reached with key messages on Explosive Ordinance Risk Education (EORE).

In Juba, Malakal and Pibor, UNICEF and two partners (Community in Need Aid (CINA) and Grassroots Empowerment and Development Organization (GREDO) are piloting an adolescent and youth program with the aim of improving the wellbeing of children living in difficult and dangerous conditions. Through the Youth and Adolescent centers, young people are assisted in building pro-social peer-to-peer and adult-to-peer relationships. Services provided within the centers include focused and innovative MHPSS and case management services. Activities have been ongoing and further efforts are being made to improve indicator collection.

Child Protection section has signed six new partnerships in July with national NGOs in five states and three administrative areas and an additional three partnerships will be signed in August. This will improve the volume and quality of data provided in the upcoming months.

During the reporting period, a total of 51 UNICEF staff and implementing partners were trained on PSEA in Wau, Rumbek and Juba focusing on having a better understanding of sexual exploitation and abuse and other sexual misconducts; PSEA policies and standards of conduct; and reporting allegations of SEA. A mission to Malakal was conducted to support the UNICEF response to current emergencies throughout the area, raise the awareness of partners in PSEA, and strengthen the functioning of Community-Based Complaint Mechanisms (CBCM) at the State level which receives SEA allegations and survivors referred to the appropriate service provider for further support and management using the referral pathways in place. In addition, several PSEA assessments for new implementing partners were conducted to assess their organizational capacities and systems to prevent and respond to SEA and identify gaps and areas of improvement before any partnership can proceed. One challenge has been having PSEA IEC materials available and in local languages. Together with SBC section, key PSEA messages have been developed and currently being translated for use in all response areas. Trainings are being planned for UNICEF staff in August and for field office partners in September.

The two main challenges facing the child protection sector in July was the lack of sufficient active Child Protection partners across the country to cover the widespread needs.

**Education**

Access to education remains a far-fetched dream for most children with nearly all pre-school-aged children and 60 per cent of the primary and secondary school-aged children being out of school. During the month of July, education interventions continued to focus on improving access to equitable quality education for the most marginalized school-aged children (3-17 years) including those living in emergency and crisis affected areas. The main activities focused on expanding access, improving quality of educational services, and strengthening community engagement. UNICEF and partners continued efforts to expand learning spaces by completing the construction of 27 semi-permanent learning spaces in Lakes State (three), Western Bahr el Ghazal State (10), Northern Bahr el Ghazal State (eight), Warrap State (two), Abyei Administrative Area (AA) (four) as well as three mobile child friendly spaces in Abyei AA. The expansion of classroom spaces provided access to 4,677 learners (2,077 girls).

Providing access of quality education is affected by many factors including critical shortage of qualified, motivated and adequately paid teachers and limited availability of teaching and learning materials. UNICEF and partners provided training to 179 teachers (71 women) across Western Bahr el Ghazal (65), Northern Bahr el Ghazal (48), Warrap (23), Abyei AA (43) in basic teaching pedagogies, education in emergencies and classroom management. In July, UNICEF provided incentives to 3,806 teachers (including those in hard-to-reach places) in Jonglei (977), Western Bahr el Ghazal (686), Northern
provision of teaching and learning materials. More partnership agreements will be signed to respond to the growing needs of returnees especially in areas of high influx of people such as in Upper Nile and Unity States, and engagement with national and state level education authorities will continue to ensure the inclusion of these interventions in national and state level education priorities.

Water, sanitation and hygiene

A girl carries water to her home in Bieh IDP camp in Bentiu, Unity State.

In July, 57,410 individuals (26,477 women, 14,628 men, 9,761 girls and 6,544 boys) were granted access to safe water. 7,480 people (4,579 women, 2,045 men, 99 girls and 757 boys) were provided with access to appropriate sanitation services. 13,101 people (3,931 women, 1,310 men, 5,240 girls and 2,620 boys) were reached with key hygiene promotion messages. A daily average of 180,000 litres of clean and safe water were provided at water points. Critical WASH supplies were distributed to a total of 14,616 individuals.

Six boreholes were repaired, and four surface water treatment systems were maintained through partners World Vision and Relief International. To respond to the critical water needs of displaced individuals (including returnees) in Malakal, regular water quality testing was carried out at all existing tap stands in an effort to provide better quality drinking water that is free from water contaminants. In Upper Nile State, UNICEF provided 17,041 children (9,797 girls and 7,244 boys) with access to safe and appropriate WASH facilities, and hygiene services.

The key challenge facing implementation this month was the lack of agreed, safe space at the transit site in Malakal for the construction of additional blocks of latrines.
South Sudan continues to receive an influx of refugees and returnees from Sudan through different points of entry in Northern Bahr el Ghazal, Western Bahr el Ghazal and Upper Nile States. In July, UNICEF through the Social and Behaviour change (SBC) section deployed over 3,000 community mobilizers to participate in community engagement activities. Key interventions in the month of July 2023 included responding to the Sudan Crisis in Renk and Malakal (Upper Nile State), Aweil (Northen Bahr el Ghazal State), Unity State, Raja (Western Bahr el Ghazal State) and Jonglei. An additional 60 social mobilizers were deployed and trained to deliver community engagement activities on key integrated life-saving messages at transit sites and in the host communities using a mix of approaches and channels including house-to-house interpersonal communication, community meetings and dialogues, radio talk shows and broadcast of radio spots/jingles. Messaging on integrated nutrition, Nutrition, WASH, Child Protection, Education and Gender Based Violence (GBV) were shared to inform the population about available social services and promote the adoption of positive practices.

To continue responding to the ongoing Sudan Crisis, SBC activities were conducted to support the UNICEF sector response and to catalyze effective utilization of UNICEF services in affected communities through activation of community platforms, community engagement and capacity building through the Integrated Community Mobilization Network (ICMN). 60 additional ICMN mobilisers were deployed and trained to conduct Risk Communication and Community Engagement (RCCE) activities for 16,196 individuals (8,421 women and 7,775 men) in the Wedwell transit site in Aweil (NBeG), Renk and Malakal (Upper Nile State).

These activities included engaging with and sensitizing returnees on cholera, malaria and COVID-19 prevention, personal hygiene and the prevention of sexual exploitation and abuse (PSEA). Returnees also were reached with messaging on the availability of WASH, Nutrition, Education, Health, Child Protection services to promote the adoption of positive practices and to positively influencing social norms for the well-being of the population, especially for children and their families.

To facilitate communication with Arabic-speaking refugees, anintegrated key message bank in classic Arabic was developed and disseminated. 12,650 integrated information, education and communication (IEC) materials and emergency booklets were distributed in Upper Nile, Jonglei, Northern el Bahr Ghazal, and Unity States. Four community engagement activities were conducted with local leaders on personal hygiene to prevent watery diarrheal diseases and on the consistent use of bed nets for malaria prevention. Two meetings to discuss the rumors of cholera cases were conducted with local leaders in Alihya Camp in Sudan (located at Sudan-South Sudan border).

200 solar radios were delivered to Aweil (100) and Renk (100) and will be distributed in August to refugees to sensitize them on integrated lifesaving key messages on (Health, WASH, Nutrition, Education and Child protection). 10 Megaphones and 100 pairs of batteries were delivered to Aweil for August distribution to the Wedwill Refugee Camp to be used for announcements and community mobilization activities. Radio talk shows on the Akolyam Radio station disseminated integrated lifesaving key messages on (Health, Nutrition, WASH, Education and Child Protection) and reached an estimated 1,800 individuals.

UNICEF have also responded to health emergencies such as COVID-19. Cholera and Hepatitis E. A robust media mix was used to disseminate factual and timely integrated health messages including Cholera, Ebola, Hepatitis E and COVID-19 vaccination messages as well as back to school campaign messages which were aired in Arabic, English and ten local languages. 15 local radio stations in Wau, Yambio, Juba, Nimule, Rumbek and Aweil broadcasted positive breastfeeding messages in preparation for World Breastfeeding Week which is planned for the first week of August under the theme of “Making a Difference for Working Parents”. These radio programs reached an estimated 1.2 million people within those locations.

To support the resilience KFW project, which aims to provide better access to primary education, health and food to populations facing humanitarian crises, 2,430 solar radios were delivered to Yambio, Aweil, Tirt and Juba. A variety of IEC materials (including banners, posters, 33 billboards and leaflets) was also disseminated in strategic points within the states and public places to increase access to information on the availability of social services. At least 1,011,625 individuals (56 per cent female) participated in RCCE activities for emergency response. Of those, 252,338 people (131,820 women and 120,518 men) were repeatedly reached with key messages on Health, Nutrition, Protection, Education, WASH and Gender-Based Violence (GBV). 1,084 community sensitization meetings, 83 focus group discussions and 162 advocacy meetings were conducted for diverse community members including adolescents, youth networks, and community and religious leaders.

Communities continued to provide feedback through the UNICEF supported hotlines 6666 (MOH) and 2222 (South Sudan Council of Churches). In July, a total of 6,950 calls (3,636 calls through the 6666 hotline and 3,314 calls through the 2222 hotline) were received. Most callers wanted to receive information on health services, hear alerts on diseases and conflicts and share requests for personal or family assistance.

In July, there were several challenges facing the successful implementation of activities. One challenge was the delay in the prepositioning of cholera IEC materials (fliers and posters in Arabic) to the State Ministry of Health (SMOH) in Aweil for distribution at the refugee transit site which led to a slow distribution of the materials to the refugees. Other challenges were the rains and insecurity in returnees transit camps (including Renk) which made program implementation more difficult. There was an inadequate number of social mobilizers to cover hotspots where returnees and refugees are located. Persistent religious, cultural and social norms have been difficult to change thus hindering the adoption of positive practices especially on child marriage, toilet use and infant young child feeding practices (YCF), religious beliefs hindering uptake of COVID 19 vaccination, routine immunization and early antenatal care (ANC) appointments.

The key activities for August include conducting a rapid Knowledge,
Attitudes, Practice and Behaviour (KAPB) assessment to better understand the behavior, knowledge and social norms of the affected communities and thus, inform SBC planning. Radio listener groups will be established in Renk and Awell to support RCCE activities. State focal persons will be trained on the Inter-agency Community Feedback Mechanism data collection system and reporting. Youth and women’s groups will be established to build social cohesion between host and affected communities.

**HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY**

UNICEF South Sudan participates in the inter-agency protection of sexual exploitation and abuse (PSEA) taskforce and actively advocates for improved protection of children against sexual exploitation and abuse (SEA). Additionally, UNICEF has been actively involved in the Partnerships for Peace, Resilience, and Recovery (PPRR), including area-based coordination platforms and the South Sudan Multi-Partner Trust Fund for Reconciliation, Stabilization, and Resilience (RSRTF). Furthermore, UNICEF teams actively participate in the Ministry of Health Public Health Emergency Operation Coordination to better mitigate against, prepare for and respond to public health emergencies.

In 2023, UNICEF co-led three Clusters for WASH, Nutrition, Education, and the Child Protection Area of Responsibility (AoR). The Education Cluster is co-led with Save the Children. Nutrition Cluster with International Medical Corps (IMC), Action Against Hunger (ACF), and the World Food Programme (WFP). The WASH Cluster with the Norwegian Refugee Council (NRC). UNICEF-led clusters effectively led coordinated emergency preparedness and response actions ensuring all minimum requirements were in place, including partner mapping, contingency planning, and advocacy. Furthermore, all clusters have completed the cluster coordination performance monitoring (CCPM) exercise to inform collective action plans with cluster partners.

UNICEF continued to play a key role in the education sector by co-leading the education cluster, participating in Inter Cluster Coordination Groups across all states and leading planning efforts for more coordinated and efficient humanitarian response especially addressing needs of returnees fleeing the conflict in Sudan.

**HUMAN INTEREST STORIES AND EXTERNAL MEDIA**

In July 2023, Stories about children and their families were published by UNICEF on its website and social media platforms such as Facebook, Twitter, Youtube, and Instagram. These stories, posts and tweets highlighted the role that UNICEF and its implementing partners play to save the lives of vulnerable children and women in South Sudan.

Stories included highlights on the use of youth centers as a tool to renew the hope of young people and the Azande King’s support for children’s rights and partnerships. Another story features the partnership between UNICEF and ForAfriKa which has launched an integrated health and nutrition program in order to curb high rates of common illnesses and malnutrition in Boma County.


**HAC APPEALS AND SITREPS**

- South Sudan Appeals [https://www.unicef.org/appeals/south-sudan](https://www.unicef.org/appeals/south-sudan)
- South Sudan Situation Reports [https://www.unicef.org/appeals/south-sudan/situation-reports](https://www.unicef.org/appeals/south-sudan/situation-reports)
- All Humanitarian Action for Children Appeals [https://www.unicef.org/appeals](https://www.unicef.org/appeals)
- All Situation Reports [https://www.unicef.org/appeals/situation-reports](https://www.unicef.org/appeals/situation-reports)

**NEXT SITREP: 30 SEPTEMBER 2023**
## ANNEX A - PROGRAMME RESULTS

### Consolidated Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and IPs response</th>
<th>Cluster/Sector response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Disaggregation</td>
<td>Total needs</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6 to 59 months vaccinated against measles</td>
<td>Total</td>
<td>2.7 million</td>
</tr>
<tr>
<td>Pregnant women and children provided with insecticide-treated nets in malaria-endemic areas</td>
<td>Total</td>
<td>605,028</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6 to 59 months with severe acute malnutrition admitted for treatment</td>
<td>Total</td>
<td>353,606</td>
</tr>
<tr>
<td>Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling</td>
<td>Total</td>
<td>1 million</td>
</tr>
<tr>
<td>Children 6-59 months receiving Vitamin A supplementation</td>
<td>Total</td>
<td>2.8 million</td>
</tr>
<tr>
<td><strong>Child protection</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions</td>
<td>Total</td>
<td>80,000</td>
</tr>
<tr>
<td>People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers</td>
<td>Total</td>
<td>78,910</td>
</tr>
<tr>
<td>Children who have received individual case management</td>
<td>Total</td>
<td>29,349</td>
</tr>
<tr>
<td>Children, adolescents, and caregivers accessing community based mental health and psychosocial support</td>
<td>Total</td>
<td>1.3 million</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children accessing formal or non-formal education, including early learning</td>
<td>Total</td>
<td>3.3 million</td>
</tr>
<tr>
<td>Children receiving individual learning materials</td>
<td>Total</td>
<td>3.3 million</td>
</tr>
<tr>
<td>Teachers received training on education in emergency and child centered teaching.</td>
<td>Total</td>
<td>41,838</td>
</tr>
<tr>
<td><strong>Water, sanitation and hygiene</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People accessing a sufficient quantity of safe water for drinking and domestic needs</td>
<td>Total</td>
<td>6.1 million</td>
</tr>
<tr>
<td>Children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces</td>
<td>Total</td>
<td>3 million</td>
</tr>
<tr>
<td>People reached with critical WASH supplies</td>
<td>Total</td>
<td>3 million</td>
</tr>
<tr>
<td>People accessing appropriate sanitation services.</td>
<td>Total</td>
<td>876,670</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, C4D, RCCE and AAP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>People reached through messaging on prevention and access to services</td>
<td>Total</td>
<td>-</td>
</tr>
<tr>
<td>People sharing their concerns and asking questions through established feedback mechanisms</td>
<td>Total</td>
<td>-</td>
</tr>
</tbody>
</table>

*Progress in the reporting period 1 July to 31 July*
## ANNEX B — FUNDING STATUS

### Consolidated funding by sector

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Humanitarian resources received in 2023</th>
<th>Resources available from 2022 (carry over)</th>
<th>Funding gap (US$)</th>
<th>Funding gap (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>13,160,710</td>
<td>103,008</td>
<td>1,377,106</td>
<td>11,680,596</td>
<td>89%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>76,167,990</td>
<td>43,956,087</td>
<td>27,865,922</td>
<td>4,345,981</td>
<td>6%</td>
</tr>
<tr>
<td>Child protection, GBVIE and PSEA</td>
<td>9,235,500</td>
<td>3,927,110</td>
<td>968,164</td>
<td>4,340,226</td>
<td>47%</td>
</tr>
<tr>
<td>Education</td>
<td>60,538,200</td>
<td>958,542</td>
<td>1,290,120</td>
<td>58,289,538</td>
<td>96%</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>53,616,420</td>
<td>8,035,972</td>
<td>2,396,691</td>
<td>43,183,757</td>
<td>81%</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, SBC, RCCE and AAP)</td>
<td>4,451,541</td>
<td>1,860,601</td>
<td>1,124,803</td>
<td>1,466,137</td>
<td>33%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>217,170,361</td>
<td>58,841,320</td>
<td>35,022,806</td>
<td>123,306,235</td>
<td>57%</td>
</tr>
</tbody>
</table>

Who to contact for further information:

Hamida Lasseko  
Representative, South Sudan  
T +211921220445  
hramadhani@unicef.org

Verity Rushton  
Chief of Field Operations  
T +211920498802  
vrushton@unicef.org

James Maiden  
Chief of Communications for Development  
T +211912162888  
jmaiden@unicef.org
ENDNOTES
1. UNHCR/IOM Dashboard – Population Movement from Sudan to South Sudan
2. UNICEF South Sudan 2023 Humanitarian Action for Children (HAC) Appeal (revised)
3. Humanitarian Needs Overview 2023
4. Humanitarian Needs Overview 2023
5. OCHA Humanitarian Snapshot 2023
6. UNICEF South Sudan 2023 Humanitarian Action for Children (HAC) Appeal (revised)
7. 20 points of entry: Abyei Administrative Area (Abyei Amiet), Northern Bahr el Ghazal (Gokmachar, Jaach, Kiir Adem, Majokinythiou), Unity (Jau, Panakuach), Upper Nile (Aburoc, El kuek, Elfoj, Kaka, Magenis, Shatta, Tonga, Wunthow, Yabous), Western Bahr el Ghazal (Bordamina, El-Fau, Raja Town, Timsah)
8. UNHCR/IOM Dashboard – Population Movement from Sudan to South Sudan
9. World Food Programme – Food Security Analysis Dashboard