In 2024, South Sudan will face significant humanitarian needs alongside drastic cuts to aid budgets. In 2024, 9.4 million people, including 5 million children, 2.2 million women and 1.3 million people with disabilities will require humanitarian assistance.

Conflict and insecurity, health epidemics, influxes of returnees and refugees, climate change and flooding and high levels of inflation are exacerbating needs of the most vulnerable, particularly children. South Sudan expects to host its first election as a new nation in December 2024.

UNICEF’s humanitarian strategy prioritizes the most acute needs and complements development programmes and resilience-building. UNICEF works through community structures and partnerships with a localized, adapted response, strengthening feedback and accountability with communities. Action is risk-informed and evidence-based and embraces climate adaptation, conflict-sensitive approaches and anticipatory action to mitigate the impact of disasters.

Even though children in South Sudan are facing increasing levels of humanitarian need, the humanitarian response there has been significantly underfunded. In 2024, UNICEF will require $238.9 million for nutrition, health, WASH, education and child protection interventions.

HUMANITARIAN SITUATION AND NEEDS

South Sudan will face a complex year in 2024, with increasing vulnerability, growing humanitarian needs and severe aid budget cuts. The political environment is fragile, with attention focused on fulfilling the Revitalised Agreement on the Resolution of the Conflict in the Republic of South Sudan, and on elections in December. In 2024, 9.4 million people and 5 million children require humanitarian assistance and protection, 15 per cent of them estimated to have a disability.

Political instability, violence, widespread flooding, disease outbreaks and high inflation are compounding the complex, chronic needs of the most vulnerable people in the country, especially children. Livelihoods are severely impacted and access to education, nutrition, water, sanitation and health services hampered. Children are at a high risk of abuse, violence, exploitation and psychosocial distress; and 2.8 million children (52 per cent girls) out of school are especially vulnerable to risks. Women and children are the most vulnerable population to gender-based violence.

South Sudan is home to a displacement crisis: 2.3 million people are internally displaced, 148,000 existing returnees require durable solutions and 337,000 refugees from other countries are living in camps. Further, conflict in neighbouring Sudan has exacerbated the situation: in 2023, from April to September 281,129 individuals (including 67,826 girls and 67,286 boys) crossed into South Sudan in immediate need of assistance and protection. Displacements have further strained existing services; 46 per cent of health facilities are moderately operational, and less than 10 per cent of the population has access to improved sanitation. These conditions increase the risk of disease outbreaks, already contributing to record high rates of malnutrition, with more than 2.2 million people in need of nutrition assistance. In 2023, there was an increase in preventable childhood diseases, including 5,503 measles cases, a 52.5 per cent increase compared with 2022.

South Sudan is ranked the second most susceptible nation to the effects of natural hazards, including droughts and flooding, and recorded the most child displacements due to floods globally, at 11.8 per cent of the child population. Regional El Niño effects in late 2023 will worsen floods, which have already displaced more than 1 million people and hampered people’s access to services. Drought in neighbouring countries, as well as depreciation of the South Sudanese pound may further drive up food costs, which have increased by 122 per cent since 2022 for some staples, contributing to food insecurity. In 2024, more than 60 per cent of the population is expected to be acutely food insecure, and 2 million lactating women and children under age 5 are expected to suffer from wasting.

STORY FROM THE FIELD

Between mid-April and mid-June 2023, hundreds of thousands of women, children and their families fled to South Sudan to escape war in the Sudan. UNICEF deployed social workers and set up child-friendly spaces at border points to screen and identify extremely vulnerable children and those who were unaccompanied or separated from their families. UNICEF provided specialized services, family tracing and reunification.

One of these children was Juma, 12, who was separated from his family and had fled his home in Khartoum under shelling. He experienced a long, harrowing journey to find his mother in South Sudan. At a UNICEF-supported child-friendly space, Juma was registered, given counselling and support and reunited with his mother on the same day. “I didn’t know if he was alive or not,” said Nyambeng, his mother.

Read more about this story here

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UNICEF will assist the most vulnerable women and children in the hardest-to-reach areas, aligned to the country’s Humanitarian Response Plan. Innovative, multi-sector approaches to assistance are expected to save lives, alleviate suffering, maintain dignity and protect children’s rights. Priority will be given to programmes addressing the needs of children and women experiencing the most severe consequences of multiple vulnerabilities.

UNICEF will reinforce risk-informed approaches, promoting climate adaptation and strengthening the population’s resilience to shocks. At the same time, UNICEF will address underlying drivers of vulnerability and instability. Linkages between humanitarian, development and peace approaches will be enhanced by understanding the complex interrelatedness of compounding risks and by applying a critical conflict-sensitive lens to tailor interventions. A key focus, complementing the priority on acute needs, is to expand innovative, durable, community-led solutions that can reduce reliance on humanitarian assistance.

UNICEF’s risk-based preparedness promotes community-based anticipatory action to mitigate the impact of hazards and enable a timely, quality response. The organization will reinforce localization by strengthening local systems and capacities and expanding partnerships with local actors, prioritizing women-led organizations.

Services for protection from sexual exploitation and abuse and the reduction of gender-based violence will be scaled up in all interventions. Disability- and gender-sensitive approaches will ensure responses are targeted and designed to meet the distinct needs of women, men, girls, boys and persons with disabilities. Accountability to affected populations will be key, encompassing enhancing feedback and participation, again prioritizing children, women, youth and persons with disabilities.

WASH action includes climate-resilient, safe water supply and sanitation services with a focus on disease and malnutrition reduction. Education efforts will identify the most at risk out-of-school children and provide formal/non-formal education in the hardest-to-reach areas. With an expanded social work workforce, child protection interventions will provide tailored, specialized services for the most vulnerable children, youth and adolescents to break cycles of violence and trauma, provide gender-based violence support and risk reduction, and mental health and psychosocial services. To reduce childhood morbidity and mortality, nutrition and health efforts will focus on child survival, scaling up life-saving treatment and prevention for children with severe wasting and at high risk of moderate wasting, outbreak response, malaria prevention and immunization.

UNICEF’s strengthened field presence and monitoring, in partnership with civil society organizations and the Government, promotes quality, dynamic mobile responses that can adapt to rapidly changing needs. UNICEF is committed to strengthening coordination – with dedicated capacities – as lead agency of the WASH and Nutrition Clusters and the Child Protection Area of Responsibility, and as co-lead of the Education Cluster.

Progress against the latest programme targets is available in the humanitarian situation reports: [https://www.unicef.org/appeals/south-sudan/situation-reports](https://www.unicef.org/appeals/south-sudan/situation-reports)

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.

### 2024 PROGRAMME TARGETS

#### Health (including public health emergencies)
- 454,963 children vaccinated against measles, supplemental dose
- 832,393 pregnant women and children provided with insecticide-treated nets in malaria-endemic areas
- 720,000 people affected by health emergencies reached with primary health care services

#### Nutrition
- 1,692,386 children 6-59 months screened for wasting
- 350,000 children 6-59 months with severe wasting admitted for treatment
- 1,811,338 primary caregivers of children 0-23 months receiving and young child feeding counselling
- 2,844,362 children 6-59 months receiving vitamin A supplementation
- 40,964 children aged 5 to 59 months with high risk moderate acute malnutrition (HRMAM) admitted for treatment

#### Child protection, GBViE and PSEA
- 82,500 children, adolescents and caregivers accessing community-based mental health and psychosocial support
- 100,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 261,658 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- 4,950 children who have received individual case management

#### Education
- 574,088 children accessing formal or non-formal education, including early learning
- 5,741 teachers received training on EiE and child centered teaching
- 574,088 children receiving individual learning materials

#### Water, sanitation and hygiene
- 700,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 223,000 people accessing safe, gender sensitive sanitation
- 1,400,000 children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces
- 1,400,000 people reached with critical WASH supplies

#### Cross-sectoral (HCT, SBC, RCCE and AAP)
- 2,574,660 affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services
- 1,000,000 people engaged in reflective dialogue through community platforms
- 250,000 people sharing their concerns and asking questions through established feedback mechanisms
- 6,400 households reached with UNICEF-funded humanitarian cash transfers
FUNDING REQUIREMENTS IN 2024

In 2024, UNICEF will require $238.9 million to deliver life-saving assistance for women, men, girls and boys – especially those living in hard-to-reach places – who are impacted by multiple shocks, including conflict, flooding, disease outbreaks and displacement. Funds will enable UNICEF to protect child rights, alleviate suffering, deliver life-saving assistance and expand opportunities for children to reach their full potential.

The total ask also includes a three per cent commitment to support gender-based violence programmes, and the prevention of sexual exploitation across sectors. The largest requirements are for nutrition, WASH and education, a necessity due to escalating stressors, including floods and the crisis in the Sudan. Another factor is UNICEF’s inclusion of high-risk moderate wasting treatment. Requirements are also a reflection of the rising cost of materials and the cost of safely delivering supplies across the country while ensuring appropriate measures are in place during transportation and storage to mitigate the risk of diversion, especially in remote field locations. The strategic shift to expand durable and sustainable strategies to build resilience has also shifted resources, while at the same time protecting and maximizing aid contributions in a climate of reduced funding. The cost of full-time cluster coordinators and cluster information management specialists are included in the budget: these positions are essential to coherent, evidence-informed sector strategies and to avoiding duplication for nutrition, child protection, education and WASH sectors.

The 2023 Humanitarian Action for Children appeal for South Sudan was severely underfunded, particularly the education and health sectors. As a result, highly vulnerable children were excluded from education and exposed to severe protection risks, including child marriage. Additionally, without full funding of the appeal, UNICEF will be unable to sustain the achievements to date that have improved the lives of children, and will be unable to implement programmes designed to make positive changes enduring and to help children thrive.
A total of 51 million children (including 4.9 million children per the Humanitarian Response Plan 2023, and 180,000 child refugees) are estimated to need humanitarian assistance. This figure includes 2.4 million girls and 2.5 million boys. When the Humanitarian Response Plan 2024 is finalized, the figure will be revised.

3. The Humanitarian Needs Overview 2023. According to the most recent Humanitarian Needs Overview, the number of people in need includes 337,000 refugees, and excludes 212,000 people in need in Abyei Administrative Area. A total of 15 per cent of all people in need are estimated to have a disability, and 24 per cent of all people in need are women. UNICEF is committed to needs-based targeting, which means covering the needs of children and the most vulnerable. The breakdown of the target for 2024 is as follows: 3 per cent is allocated for children under 5 years of age; 30 per cent is for children aged 5–17 years; 40 per cent is for adults aged 18 years and over; and 27 per cent is for the elderly.

4. The target is subject to change when the August 2023 Food Security and Nutrition Monitoring Report is made available in October 2023.

5. There is no nationwide measles campaign planned for 2024, therefore targets are reduced compared with 2023. Targets is total surviving infants (<1Yr (4%)–Infant Mortality rate 102/1000) of total children in 2024. Target derived from 2024 population estimates from the 2008 population and housing census (+1Yr (95%)–508,440. Infant Mortality rate 102/1000 infant mortality rate 103).

6. The number of estimated people aged 5–99, and excludes 212,000 people in need in Abyei Administrative Area. A total of 15 per cent of all people in need are estimated to have a disability, and 24 per cent of all people in need are women. The breakdown of the target for 2024 is as follows: 3 per cent is allocated for children under 5 years of age; 30 per cent is for children aged 5–17 years; 40 per cent is for adults aged 18 years and over; and 27 per cent is for the elderly.

7. The number of estimated people aged 5–99, and excludes 212,000 people in need in Abyei Administrative Area. A total of 15 per cent of all people in need are estimated to have a disability, and 24 per cent of all people in need are women. The breakdown of the target for 2024 is as follows: 3 per cent is allocated for children under 5 years of age; 30 per cent is for children aged 5–17 years; 40 per cent is for adults aged 18 years and over; and 27 per cent is for the elderly.

8. Funding from the World Bank and health multi-donor trust funds will help support integrated health services (primary health care) and systems resilience efforts that complement the humanitarian response (estimated at $143.3 million for 2024, as of September 2023).

9. Includes $42,367,914 for education in emergencies, access to formal or non-formal education, including early learning, learning materials and teacher training, in addition $47,740,712 for cluster coordination technical assistance.

10. Includes $4,750,248 for radio communication and community engagement and social and behavioural change, $1,143,900 for accountability to affected populations, and $1,450,000 for social behavior change, and $42,367,914 for education in emergencies, access to formal or non-formal education, including early learning, learning materials and teacher training, in addition $47,740,712 for cluster coordination technical assistance.


13. Based on the Humanitarian Needs Overview 2023, the number of people in need of health services, an estimated 1.8 million children and 835,000 women, while 15 per cent are estimated to have a disability.

14. Includes $6,997,350 for child protection, an increase compared with from 2023 to cover critical gaps in the sector and meet increased needs due to the crisis in the Sudan; $4,920,000 for gender-based violence in emergencies (a 25 per cent increase compared with 2023 to respond to need growing needs of women and girls affected by the crisis in the Sudan and to expand gender-based violence response services at higher number of women- and girls-friendly spaces, gender-based violence prevention through social norms programming and an increased focus on gender-based violence risk mitigation in WASH, nutrition, health and education programming for 2023); $651,918 for prevention of sexual exploitation and abuse (an increase compared with 2023 to respond to need to strengthen action in this area), and $656,847 for the Child Protection Area of Responsibility technical assistance.


16. UNICEF is committed to needs-based targeting, which means covering the needs of children and the most vulnerable. The breakdown of the target for 2024 is as follows: 3 per cent is allocated for children under 5 years of age; 30 per cent is for children aged 5–17 years; 40 per cent is for adults aged 18 years and over; and 27 per cent is for the elderly.

17. The target is subject to change when the August 2023 Food Security and Nutrition Monitoring Report is made available in October 2023. Estimated number of children aged 5–99 days is based on the Humanitarian Needs Overview, 2024 mortality rate.

18. SMART survey data from 2020–2022 were used to calculate the prevalence of high-risk moderate wasting (1.4 per cent of total under-five population), with mid-upper arm circumference of 11.5–11.9 cm. A correction factor of 3.6 is projected under-five population mortality rate 2012.

19. The target will reach specific groups of children, prioritizing their unique needs with a 10 per cent increase compared with the 2023 target, to account for the influx of people fleeing the crisis in the Sudan. The target breakdown for this year is as follows: 3 per cent is allocated for children under 5 years old; 33 per cent is children aged 5–18 years. Additionally, 7 per cent of the overall target is allocated to address the needs of adults and 1 per cent the needs of people living with disabilities.

20. The 25 per cent increase in this target reflects the growing needs of women and girls affected by the crisis in the Sudan during transit and displacement, an expansion of gender-based violence response services at more women- and girls-friendly spaces, and more women and girls affected by sexual violence, the need for medical care, and 24 per cent of all people in need are women. The breakdown of the target for 2024 is as follows: 3 per cent is allocated for children under 5 years of age; 30 per cent is for children aged 5–17 years; 40 per cent is for adults aged 18 years and over; and 27 per cent is for the elderly.

21. Twenty per cent of people over 18 years of age of the social and behavior change target population is females (hep B virus, children) and new displacement (food, conflict, refugees) outside of regular health systems support.

22. Eighty per cent of all children aged 6–59 months (2,115,483) are targeted for malaria screening.

23. A 20 per cent increase in the burden of severe waste is estimated due to deteriorating food security and nutrition, floods and the impact of the crisis in the Sudan. This will be revisited after the integrated food security phase classification for 2024 is completed. An additional 40,964 children aged 5–59 months with high-risk moderate wasting are also targeted.

24. The target is subject to change when the August 2023 Food Security and Nutrition Monitoring Report is made available in October 2023. Estimated number of children aged 5–99 days is based on the Humanitarian Needs Overview, 2024 mortality rate.

25. This target includes $1,845,000 for humanitarian cash transfers, $4,750,248 for risk communication and community engagement and social and behaviour change, $1,143,900 for accountability to affected populations and $1,450,000 for social behavior change, and $42,367,914 for education in emergencies, access to formal or non-formal education, including early learning, learning materials and teacher training, in addition $47,740,712 for cluster coordination technical assistance.

26. Includes $42,367,914 for education in emergencies, access to formal or non-formal education, including early learning, learning materials and teacher training, in addition $47,740,712 for cluster coordination technical assistance.