

## South Sudan

### Update on the context and situation of children

Since independence, South Sudan has faced a deteriorating economic climate, a rupturing social fabric and deepening political challenges, constraining development and intensifying a complex humanitarian crisis. Children have borne the most impact.

South Sudan remains highly vulnerable to climatic shocks, and is second most vulnerable country globally to natural hazards. An estimated 95 per cent of the population depends on climate-sensitive livelihoods, while over 84 per cent of public revenues come from oil exports. The World Bank projects growth declining in Fiscal Year (FY)2023/2024 with oil production dropping by 7 per cent, and emphasizes macroeconomic, governance and transparency reforms as essential for sustainable economic recovery.

Globally, South Sudan has the lowest Human Development Index value of 0.385; 7 in 10 people living in extreme poverty which has been exacerbated by inflation, low agricultural production, rising food commodity prices and currency depreciation (for instance, there are now SSP1,050 to US\$1, compared to SSP500 in 2022). Meanwhile, sub-national violence, recurrent floods and deepening economic crisis have left 9 million people – including 5 million children, 2.3 million women and 1.4 million people with disabilities – in dire need of humanitarian assistance in 2023, an increase from 8.9 million people in 2022.

The Sudan crisis has triggered a wave of returnees and refugees who are mainly women and children. Most are highly vulnerable and arrive in critically underdeveloped areas exposed to severe protection concerns including sexual violence, gender-based violence (GBV), and abuse. As of 31 December, 477,547 individuals including 246,954 children were registered as either refugees or returnees. Moreover, UNHCR estimates that by the beginning of 2024, an estimated 520,000 returnees from Sudan will have arrived in South Sudan.

According to the September 2023 Integrated Food Security Phase Classification (IPC) report, acute food insecurity remains worrying: 46.3 per cent of the population are experiencing high levels of food insecurity classified as crisis or worse, particularly in Jonglei, Unity, Upper Nile and Lakes States. This is projected to deteriorate during the lean season between April to July 2024 when 56.3 per cent of the population is expected to be severely food insecure. Relatedly, severe and moderate acute malnutrition continued affecting about 1.65 million children, up 15 per cent from 2022. In context about 480,000 children are projected to have SAM in 2024, a 28 per cent increase from SAM figures in 2022. Child mortality remains at 98 per 1,000, the 7th highest in the world. Despite those dire social development indicators, the combined budgetary allocations for health, education, and the social and humanitarian pillar declined by 61 per cent from 27.9 per cent in FY2022/2023 to 10.8 per cent in FY2023/2024, far below the international standard. Education spending fell from 14 per cent to 8.3 per cent in the same period, with social and humanitarian spending falling from 1.2 per cent to 0.4 per cent; and health sector spending from 9.6 per cent to 2.1 per cent.

Humanitarian aid continued diminishing despite needs continued to increase. For instance, the funding gap increased from 25.7 per cent in 2022 to 49.8 per cent in 2023. More cuts are envisaged in 2024 and humanitarian response will be guided by robust prioritization.

South Sudan is not at pace to achieve any of the key 5 SDG goals linked to UNICEF programming; some indicators actually saw reverses in gains following the COVID-19 pandemic.

**SDG target 2(2) End all forms of malnutrition:** About 1.65 million children under five years are expected to suffer from wasting, (IPC report, 2023). Exclusive breastfeeding for infants below 6

months is at 60 per cent, but only 21 per cent of 6–23-month-olds receive minimum dietary diversity.

**SDG 3 Healthy lives and well-being for all:** One in ten children in South Sudan do not reach their fifth birthdays. Malaria is the leading cause of mortality, followed by pneumonia and diarrhoea. The maternal mortality rate is 1,223 per 100,000 – the highest in the world, characterized by a high rate of home deliveries and less than 20 per cent of births attended by skilled health personnel.

**SDG target 4(1) Ensure free, equitable and quality education:** More than half the school-age population (2.8 million children) remain out of school, of whom 53 per cent are girls. Despite a growing number of schools, enrolment rates are not progressing. The Gender Parity Index stands at 0.95 for pre- primary, 0.89 for primary, and worsening to 0.77 for secondary level (Annual School Census, 2021), given much higher risks and challenges in adolescence. In secondary education, only 43.5 per cent of those enrolled are girls. Over 60 per cent of teachers in South Sudan are not trained and less than five Teacher Training Institutes are operational.

**SDG 6 Water and sanitation for all:** In 2023, 39 per cent of South Sudanese had access to safe drinking water compared to 37 per cent in 2022, and 14 per cent had access to improved sanitation facilities compared to 10 per cent in 2022. Nevertheless, the overall WASH situation in South Sudan continues to be problematic, as much of the population remains without basic water and sanitation services.

**SDG target 16(2) End all forms of violence against children:** Violence against children is widespread in South Sudan as a consequence of decades of warfare and extreme vulnerability to climate related disasters, though reliable prevalence data are missing. In 2023, 91,926 children required child protection services because of violence, climate change and grave deprivations. However, corporal punishment affects almost all South Sudanese children, at home and at school. Armed conflict continues in much of the country, with around 400 child victims of grave violations in 2023. Child marriage threatens all South Sudanese girls. Over 100 youth gangs have emerged in the past 24 months involving thousands of children and youth in violent criminal behaviour including murder, rape, revenge killings, abductions and violent crime.

## Major contributions and drivers of results

### Goal 1: Every child survives and thrives

During 2023 UNICEF contributed to improving key maternal, newborn and child health indicators through strategic partnerships with the World Bank, the Global Fund, Gavi – the Vaccine Alliance and Light Foundation funding, a consortium of 12 non-governmental organizations (NGOs: 1 national and 11 international) and the Ministry of Health (MOH), through a network of 2,582 Boma Health Workers (BHWs) across 1,218 health facilities.

The MoH, Global Fund and UNICEF distributed 5,359,740 (103 per cent of target) and 127,480 long-lasting insecticide-treated nets (LLINs: target 1,639,711) to at-risk populations through mass campaigns and routine distribution respectively, while 601,893 children under five years (target 100,000) received rapid diagnostic tests (RDTs) for malaria and 106 per cent of confirmed malaria cases received first-line antimalarial treatment at public facilities. UNICEF trained 2,582 community health workers (CHWs: target 3,000) on Integrated Management of Childhood Illnesses (IMCI) and supported all 1,218 targeted health facilities. From January to October, 3,431,595 curative consultations were achieved (1,886,832 female; 1,745,532 under 5 years in health facilities and 740,933 through the Boma Health Initiative (BHI) in the targeted three states and two Administrative Areas (AA). The Malaria Indicator Survey 2023, commissioned in 2023, will illuminate the disease

and guide decision-making to accelerate the fight against it.

With direct service delivery and technical support in the three states and two AAs, 82 per cent of 83 health facilities (target 85 per cent) provided five signal basic emergency obstetric and newborn care (BEmONC) functions. Sixty-one per cent of health facilities assessed (154 of 254) provided 75 per cent of essential health services; 40,782 pregnant women (51 per cent of target) had four antenatal care visits, while only 26,870 (24 per cent of the target) benefited from skilled birth attendance. Furthermore, UNICEF trained 3,154 BHWs (target 3,000) to deliver quality health services in project areas, up from 2,499 in 2022.

UNICEF supported the MoH to implement a Measles Follow Up campaign integrated with Vitamin A supplementation, reaching 2.3 million children 6–59 months (92 per cent of target) with measles vaccines. Over 2.69 million adults were fully vaccinated against COVID-19, and 931,417 people received booster doses. Immunization supply chain management was strengthened with 309 solar refrigerators delivered to the country (target 203), of which 154 have been installed: now cumulatively 1,218 health facilities (89 per cent) have 100 per cent solar direct-drive refrigerated storage capacity for vaccines.

With partners, UNICEF led elaboration of the South Sudan National Nutrition Policy (2023-2033), now technically approved and awaiting endorsement. Further, UNICEF and the Iodine Global Network (IGN), supported the MoH to design the Universal Salt Iodization (USI) Strategic Plan, targeted at eliminating iodine deficiency disorders (IDD) in the country.

While sustaining the gains made in treatment of wasting, UNICEF deliberately made strategic shifts to expand the prevention of malnutrition in 2023. With UNICEF's sustained support to critical nutrition interventions, the dietary diversity rate for children aged 6-23 months improved to 21 per cent (target 20 per cent); the rate of exclusive breastfeeding is 60 per cent, and 71 per cent of children under 5 years of age with severe acute malnutrition were admitted for treatment. These milestones were enabled by optimal maternal, infant and young child nutrition (MIYCN) counselling services, benefiting 1,547,633 of a planned 1,761,340 primary caregivers of children aged 0-23 months (88 per cent). Also, in the first of two 2023 vitamin A supplementation campaigns, UNICEF and partners already reached 2,194,040 of the national 2023 target of 2,788,786 children aged 6-59 months (79 per cent).

UNICEF's technical and resource support as Nutrition Cluster Coordinator for 31 implementing partners (10 national and 21 international), contributed to lifesaving interventions for 252,509 of the planned 290,000 children aged 6-59 months with severe wasting admitted for treatment (87 per cent), of these 2,933 were returnees and refugees from Sudan. For the three Sphere Standards indicators (Cured, Death, Default rates), South Sudan achieved 92 per cent of a planned 96 per cent, the best result ever.

## **Goal 2: Every child learns, from early childhood to adolescence**

UNICEF supported development and dissemination of an early childhood education (ECE) policy providing strategic guidance on quality, access and curriculum for ECE. About 70,280 (target 125,000) children (35,458 girls) were reached with ECE services, 127 ECE teachers and caregivers (target 515) were equipped with basic pedagogical skills to deliver ECE in school and community centres, and 53 ECD centres were reached with integrated health, nutrition and play-based learning services.

Access to primary education was enhanced through constructing and rehabilitating 20 (of 26 targeted) permanent schools and 576 classrooms (target 686). This will provide 28,800 children with safe, clean and secure environments for learning. UNICEF facilitated provision of 11,215 individual teaching and learning materials, 11,318 dignity kits for adolescent girls, and 1,428 school-in-a-box kits reaching 560,782 children (224,313 girls) including children in humanitarian situations (target: 616,000). In

2023, with UNICEF support about 105,420 out-of-school children (42,168 girls) returned to school (target 145,500 children). UNICEF strengthened school governance structures and accountabilities by training 818 Parent Teacher Associations (PTAs) and School Management Committees (target 855), 874 supervisors, inspectors and headteachers on implementing the inspection policy for the new competency-based curriculum (target: 891). The training focused on the roles and responsibilities of these school governance structures, gender and social inclusion in education, barriers to girls' and boys' participation and safe and health learning environments. UNICEF provided incentives to 8,210 teachers (98.7 per cent of target) in hard-to-reach areas to improve morale and retention.

UNICEF also supported rehabilitation of Rombur and Maper National Teacher Training Institutes for pre-service teacher training, and rolled out Continuous Professional Development for 7,378 teachers (1,278 females) (target 6,080). UNICEF supported the development of female teachers' affirmative action policy and an implementation strategy to increase female teacher numbers, to act as role models and provide hands-on support for girls to enrol and remain in school.

### **Goal 3: Every child is protected from violence and exploitation**

Ongoing insecurity, crippling poverty and inter-communal violence affected 4.9 million children in South Sudan. The protective environment remains desperately weak and was exacerbated by returnees and refugees fleeing Sudan's conflict.

In 2023, UNICEF's Child Protection programme introduced a systems approach focusing on localizing and professionalizing service delivery through 18 local NGOs for all service delivery with the government (two international NGOs provide technical support). A social work professionalization programme with Juba University, upgrading certificate, diploma and degree programme curricula, is central to the approach. By 2027, all UNICEF partners will be obliged to ensure all their social workers are qualified, thus enabling transformation of case management and social norms change programming. Meanwhile, adolescents and youth formerly associated with armed forces and groups, gang members, street children, and survivors of grave violations will access evidence-based well-being programmes supporting community reintegration and eliminating harmful coping mechanisms and practices endangering themselves and their communities. Thirdly, UNICEF scaled up GBV programmes to all states, developed partnerships with six feminist women-led organizations to prevent GBV and strengthen the women's movement in South Sudan, and reinvigorated the Communities Care social norms change intervention.

These strategic shifts improved the cost effectiveness of programming, resulting in greater scale and quality. Resources returned to child protection programming doubled from US\$6.7 million in 2022, to over US\$13 million in 2023, enabling an increase from 7 partners in 4 states in 2022 to 23 partners in all 10 states and three administrative areas in 2023. Collectively, our partners recruited over 1,000 new social workers and exceeded our annual target of providing services to 85,000 people, reaching 91,926 children (45,351 girls) and 32,661 adults (21,627 women) with case management, family tracing and reunification, mental health and psychosocial support, explosive ordnance risk education, and GBV prevention and response. Ongoing GBV risk mitigation interventions implemented through the nutrition, WASH, health and education sectors also enhanced the protective environment for women and children.

### **Goal 4: Every child lives in a safe and clean environment**

State-level engagement, microplanning and reviews fostered a shift towards a sustainable development approach to WASH following the humanitarian-development-peace nexus, including establishing key technical committees and urban water utilities. Since January, 602,205 (40 per cent of targeted 1.5 million) people in humanitarian, and 170,937 (114 per cent of targeted 150,000) rural and 140,600 (target 30,000) urban people in non-humanitarian situations were provided with access to safe drinking

water, while 154,432 (34.3 per cent of targeted 400,00 in humanitarian and 50,000 in rural) people were empowered to access improved sanitation facilities, and 866,093 (43.3 per cent of targeted 2 million) people in humanitarian settings were provided with essential WASH supplies. Against a target of 500 villages, 172 villages (34.4 per cent) with 63,000 residents reached open defecation-free status. In addition, 31 health-care facilities (target 10) and 83 schools (target 35) were supported with WASH facilities. Furthermore, hygiene promotion reached an estimated 128,110 people, including 35,870 women, 30,746 men, and 61,494 children.

State-level microplanning across 10 states and mid-year reviews facilitated significant evolution of the WASH sector in South Sudan, marking a shift from a predominantly cluster-based approach to a more robust, sustainable, and long-term developmental framework. These efforts led to the establishment of two functional national and state WASH Technical Committees, and three functioning urban water utilities for Bor, Yambio and Yei water supply systems.

UNICEF's strategic initiatives significantly advanced sanitation and hygiene in rural communities, further strengthening the Community-Led Total Sanitation (CLTS) approach and integrating climate-resilient infrastructure into WASH programmes. In partnership with the Ministry of Water Resources and Irrigation, UNICEF effectively revitalized the CLTS Technical Working Group and delivered CLTS master training of trainers to 70 trainers across four states (of whom 29 were women), contributing crucially to development of the national Open Defecation Free strategy and roadmap. In addition, with the Ministry of General Education and Instruction, UNICEF supported the development of national WASH in Schools Guidelines and is establishing a WASH in Schools technical working group to coordinate and enhance the implementation of effective WASH programmes in educational settings.

Furthermore, UNICEF successfully implemented urban water supply projects in Yei, Yambio, and Torit towns, greatly improving the lives of 140,600 individuals (466.67 per cent of target 30,000). The overachievement is due to early access to safe water from ongoing construction that was originally scheduled to be opened in 2024. Notably, all the water supply systems were equipped with solar-powered water pumping systems, the transition to a solar-powered hybrid energy model has markedly reduced the plant's carbon footprint. The new system is anticipated to halve the operational costs.

Lessons from the urban water treatment plant in Juba highlighted the importance of establishing a water utility management structure before commencing construction. The absence of a water resource management policy and institutional arrangements for utility managing urban water supply systems in South Sudan has significantly impeded establishing the management structure for the Juba/Lologo water supply project. Furthermore, financial viability and sustainability should be major considerations in project planning. This includes strategies for service delivery, setting tariffs, and assessing the community's willingness and ability to pay for services. The unstable environment and high poverty levels in some areas may exacerbate these challenges. Consequently, some form of subsidy or start-up funding may be needed for the management entity until the system can generate sufficient revenue to cover operational costs.

### **Goal 5: Equitable chance in life**

Fifty national and subnational civil servants received training on Child Rights Toolkits and subsequently mainstreamed child rights into South Sudan's Second National Strategy for the Development of Statistics (NSDS2). Thus, the National Bureau of Statistics (NBS) applied a child rights lens in the South Sudan NSDS2 design process.

Thanks to UNICEF-enabled capacity building on the Seventh Multiple Indicator Cluster Survey (MICS7), three trained NBS staff facilitated the creation of MICS7 Committees, notably the Steering and Technical Committees, and steered finalization of the MICS7 Memorandum of Understanding.

A nine-member Abyei County Transfer Monitoring Committee (CTMC) trained five county and five payam administrators on basic public finance management (PFM) skills. Thirty-five civil servants

acquired PFM skills through the CTMC-led orientation sessions, thereby improving their capacities to deliver services across Abyei's five counties.

UNICEF's support continues to enable smooth functioning of the social protection coordination mechanism at national level. UNICEF continued supporting the Ministry of Gender, Child, and Social Welfare to develop a national social protection policy framework and implement the Social Protection Management Information System roadmap.

Through United Kingdom Foreign, Commonwealth and Development Office (FCDO) funds, UNICEF South Sudan piloted a Young Child Grant (YCG) in one county in Northern Bahr El Ghazal State, reaching 1,623 pregnant and lactating mothers and caregivers of children under two years of age with unconditional cash transfer alongside nutrition services. The YCG is a modelling pilot, intended for bringing to scale based on evidence generated and donor interest.

Through multipronged social and behavioural change strategies, UNICEF, the MOH, civil society, donors, United Nations agencies and other stakeholders provided an increasing number of South Sudanese with access to timely, accurate and integrated information. The UNICEF-supported Integrated Community Mobilization Network increased demand for services by engaging with communities around COVID-19; Ebola; hepatitis; measles; polio; routine immunization; education; and other themes. This helped increased year-on-year COVID-19 vaccination uptake from 34 per cent to 81 per cent, and routine immunization uptake from 84 per cent to 96 per cent.

UNICEF ran several integrated campaigns in 2023, including wide-reaching campaigns on education (teachers), child protection (child marriage), nutrition, and for World Children's Day. In 2023, 12,118,764 people were reached through UNICEF South Sudan digital channels. The UNICEF Young Reporters programme continued growing and evolving, with more focused activities around advocacy priorities such as education, mental health, climate change and child marriage.

### **Humanitarian action and other emergencies**

Humanitarian needs continued increasing in South Sudan with an estimated 9.4 million people – including 5 million children – needing humanitarian assistance. Since April the Sudan crisis has led to over 400,000 persons (over 80 per cent South Sudanese) returning to South Sudan and requiring assistance, putting additional strain on existing resources and communities. UNICEF reached 77 per cent of our Humanitarian Action for Children (HAC) target, (4,062,479 people) and 2,372,942 boys and girls, 15 per cent of whom had disabilities with humanitarian needs. Our Humanitarian Action for Children was 61 per cent funded.

The establishment of Geo-sight, a geospatial data platform, has enabled easy data visualization and analysis of humanitarian results, informed risk response, advocacy and evidence-based decision-making. Developed preparedness actions and plans for identified risks helped improve the timeliness and effectiveness of emergency responses. Emergency Preparedness and Response Plans were developed for flood response (four), acute watery diarrhoea / cholera outbreaks (three), and El Niño preparedness actions.

Conflict-sensitive training courses, for 81 staff and partners (11 female) in four target locations; and five reports exploring conflict dynamics (South Sudan Baseline, Rubkona, Unity State, Kordofan, Malakal, Upper Nile State, and Western Equatoria) were completed, enabling better-informed programme decisions and field staff capacity to understand and practice conflict sensitivity in programme implementation.

Field operations was strengthened with a revised Accountability Framework and state-level microwork plans, enabling efficient decentralized programme implementation.



UNICEF worked closely in partnership with United Nations system including WFP, IOM, and FAO, and submitting joint applications to United Nations-managed multi-donor mechanisms such as the Peacebuilding Fund. UNICEF collaborated with WFP to implement the KfW-funded joint resilience programme, including a project impact evaluation equally funded by both agencies. UNICEF actively participated in all United Nations coordination fora, cooperated closely on programming, advocacy, and coordination, leveraged United Nations expertise and increased its own impact:

**Health:** Through the H6-partnership, UNICEF benefitted from the collective strengths of UNFPA, UNICEF, UN Women, WHO, UNAIDS, and the World-Bank Group to advance the Every Woman Every Child Global Strategy and support country leadership and action for women's, children's and adolescents' health. Following successful engagement with the World Bank and other key donors in 2023, UNICEF will manage a new multi-donor trust fund for Health (the "Health Sector Transformation Project") in 2024, with an anticipated \$140 million annual budget.

**Nutrition:** With WFP, WHO, UNHCR, FAO, and OCHA, UNICEF strengthened the policy environment for nutrition, improving evidence generation and advocacy, and supporting increased access to critical nutrition interventions preventing and treating malnutrition among children and women. A Joint Action Plan signed with WFP further deepened cooperation.

**Education:** UNICEF and UNESCO facilitated education sector analysis and Education Sector Strategic Plan (2023-2027) development. UNICEF and WFP's joint programme on resilience building enhanced the complementarity of school-level interventions and the integrated capacity building of school governance structures.

**Child protection:** UNICEF collaborated with UNMISS and the wider United Nations on the Country Task Force on Monitoring and Reporting on ending grave rights violations against children, and is collaborating with UN Women, UNFPA and the government to end child marriage and pursue holistic services for women and children. UNICEF also partners feminist women-led organizations to strengthen South Sudan women's movement.

**WASH:** With UNDP and other United Nations agencies working on climate change, UNICEF is focusing on greening the environment and reducing its carbon footprint through energy-efficient interventions.

**Social Policy:** UNICEF, the government, UNDP, civil society and academia partnered on MICS7, Child Rights Toolkit and National Statistical Development initiatives. With the World Bank, African Development Bank and International Monetary Fund, UNICEF strengthened public financial management systems. UNICEF, the Ministry of Gender and WFP collaborate on social protection.

UNICEF in the field maintains positive relationships with multiple stakeholders including United Nations agencies, NGOs, CSOs, faith-based and government entities. UNICEF facilitated Area-based Coordination Structure establishment in three pilot states. Cooperation with government counterparts was close in all sectors. For example, preliminary support to the NBS on MICS7 was essential for re-establishing a stronger partnership for eventual initiatives to strengthen national statistical systems. Furthermore, UNICEF partnered with implementing partners, CSOs, faith-based organizations and the private sector to promote positive behavioural practices to mitigate and prevent disease outbreaks and other crises nationwide.

Strengthened engagement with technical and senior donor leadership strengthened fundraising and enhanced advocacy. The new Health Sector Pooled Trust Fund from 2024 results from UNICEF's strong engagement and investment in partnerships with donors.



## Lessons Learned and Innovations

### Lessons learned

**Integrated programming:** UNICEF and partners have recently completed endline data collection on the multi-year operational research study on GBV risk mitigation in nutrition programming. Overall, emerging findings demonstrate that women and girls feel increasingly safe at nutrition sites, access to services has improved and nutrition performance indicators are also better, thanks to GBV risk mitigation activities. A programmatic package including safety audits, consultations with women and girls, strengthening two-way referrals and coordination between nutrition and GBV partners and community engagement and awareness has been developed. UNICEF will work with GBV and nutrition partners with a view to replicating and expanding the GBV and nutrition risk mitigation package in 2024.

**Leveraging partnerships and prepositioning:** Leveraging pre-existing nutrition services, partnerships and community structures enabled a timely and seamless response to the increased humanitarian nutrition needs due to flooding and the Sudan crisis. In addition, the timely prepositioning of supplies and deployment of nutrition monitors intensified supervision and monitoring of service delivery, ensuring quality services, and resulting in good performance indicators in the treatment of wasting.

**Programme alignment:** Alignment of Global Partnership for Education, African Development Bank and European Union funding significantly deepened the reach of the education programme, and evidently led to an increase in the number of teachers trained and receiving incentives, which is a significant achievement.

**Engaging local actors and national NGOs:** With incessant violence that can erupt unanticipated among communities, disruption by flooding and other emergencies, engaging local actors and national NGOs is the best strategy to avoid delays in project implementation and timeliness. Of the current 122 UNICEF CSO partners, 66 per cent are national NGOs and 34 per cent are international NGOs.

**Promoting sustainability:** It is critical to include sustainability actions and investment planning when implementing urban water supply projects with the private sector. It is also evident that participatory methodologies are essential for ensuring programme sustainability and achieving ownership by the government and communities. Involving local communities in the planning and decision-making processes ensures that their needs and priorities are considered, leading to greater acceptance and utilization of the services. Time and resources must therefore be invested in participatory engagement to ensure that project gains are sustained in the long run.

**Data and evidence:** Risk analysis and improved data readiness and management through the Geosight platform have accelerated development of response plans, situation updates and improved reporting. While gains have been made in risk-informed humanitarian action, further awareness raising, capacity building and buy-in are needed across sections and field offices in 2024 to enable a common risk analysis to inform programme design and enhance humanitarian development nexus programming.

**Capacity development:** While various technologies were successfully rolled out to support programme implementation and monitoring, strengthened staff capacity for report writing and influencing use of monitoring data will be critical in 2024. Specifically, Country Office will explore how data collected by programme staff and third-party monitors can be synthesized and shared to inform programme adaptation.

## **Innovations**

The fact that only 5 per cent of children are accessing a minimum acceptable diet, demonstrates that more than nutrition counselling is needed to improve child feeding and caring practices. UNICEF worked on innovative approaches to improve access to quality foods by young children, including the integration of social protection and nutrition cash transfers targeting 1,600 pregnant and lactating mothers for proof of concept and using the Food Expo to build momentum to improve young children's diets with local foods.

With support from the internal UNICEF Communications Team, a campaign 'Accelerating Action to End Child Marriage in South Sudan' was developed. This includes a short dramatic music video, animated stories, an influencer video and child marriage health documentary exploring the effects of child marriage on girls' health and well-being in South Sudan. These products will be used in 2024 to support a community engagement campaign to address social norms surrounding child marriage and catalyse positive change.

To enhance climate resilience, UNICEF has modified water and sanitation infrastructure designs, introducing elevated, flood-resistant water facilities and raised platform toilets. These adaptations ensure uninterrupted operation and prevent environmental contamination. UNICEF aims to further develop and standardize these designs, seeking government approval to make them widely available to other partners and stakeholders.

For more effective and efficient delivery of services, an innovative deliverable-based contracting and partnership document development approach was adopted for the COVID-19 vaccination campaign to ensure value for money and high vaccination coverages. As a result of the competitive nature of the contracting and payment based on performance, over 4.9 million people were fully vaccinated against COVID-19, representing 36 per cent of all age groups or 81 per cent of the target population of over 18 years for COVID-19 vaccinations.

State-level microwork planning exercises significantly enhanced local government and partner ownership of the results achieved in the states. These, and consequent review meetings, informed specific state-level needs and local ownership. Local solutions also emerged to enable better programmatic convergence and effective and efficient resource use.