



unicef 

South Sudan

Humanitarian Situation Report

27 AUGUST – 2 SEPTEMBER 2014: SOUTH SUDAN SITREP #38

SITUATION IN NUMBERS

Highlights

- An integrated measles, polio and vitamin A campaign is underway in the three conflict-affected states. So far, 23,826 children have been vaccinated against polio and 23,570 against measles in and around Malakal while 2,802 children have been reached with polio vaccine and 2,504 with measles vaccine in Bor PoC and town.
- The Integrated Phase Classification (IPC) process is on-going in Yei County in order to classify the severity and magnitude of the nutrition and food insecurity situation in the country. The outcome of this process is expected on 12 September. According to the previous IPC exercise, four million people, or 34 per cent of the population, are experiencing food insecurity across South Sudan.
- UNICEF continued follow-up actions generated by rapid response missions in Gorwai, Jeich, Kaldak, Pochalla and old Fangak areas of Jonglei state, including the dispatch of supplies and rehabilitation of 27 boreholes benefitting over 4,000 people.
- Bentiu PoC remains flooded, with no major improvement expected in the near future. These floods are simultaneously deteriorating children's health, while slowing access to health, nutrition and WASH services. Latrines continue to collapse, reducing the ratio of sanitation facilities to one latrine for every 121 people. All learning spaces in Bentiu are flooded, with children sitting their exams in the open air.

1.3 million

People internally displaced since 15 December
(OCHA, SitRep #51 dated 28 August, 2014)

695,172*

Estimated internally displaced children under 18 years

Outside South Sudan

449,000

Estimated new South Sudanese refugees in neighbouring countries since 15 December 2013 (OCHA, SitRep #51 dated 28 August, 2014)

Priority Humanitarian Funding needs January - December 2014

US\$ 151.7 million**

** Disaggregated data is yet to be made available, as registration has not been completed across the country. Children under 18 years have been calculated based on census*
*** This is based on UNICEF's contribution to the revised South Sudan Crisis Response Plan (CRP) and for Cholera response.*

UNICEF's Response with Partners

Indicators	Cluster for 2014			UNICEF for 2014		
	Cluster Target	Cumulative results (#)	Target achieved (%)	UNICEF Target*	Cumulative results (#)	Target achieved (%)
WASH: # of target population provided with access to water as per agreed standards (7.5-15 litres of water per person per day)	3,790,000	646,294	17%	875,000	442,650	51%
Nutrition: # targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care	176,283	53,710	30%	176,283	53,710	30%
Health: # of children 6mo-15y vaccinated for measles				1,260,000	469,054	37%
Education: # of school-aged children including adolescents (aged 7 – 18) with access to education in emergencies, including supplies	223,048	131,388	59%	78,939	43,164	55%
Child Protection: # of children reached with critical child protection services	261,500	91,565	35%	122,500	60,238	49%

South Sudan SITUATION REPORT 2 September 2014
Situation Overview & Humanitarian Needs

Since the outbreak of fighting in December 2013, 1.3 million people have been displaced in South Sudan, including 102,470 sheltering in UNMISS sites. An additional 448,000 have taken refuge in neighbouring countries, including Ethiopia, Kenya, Uganda and Sudan.

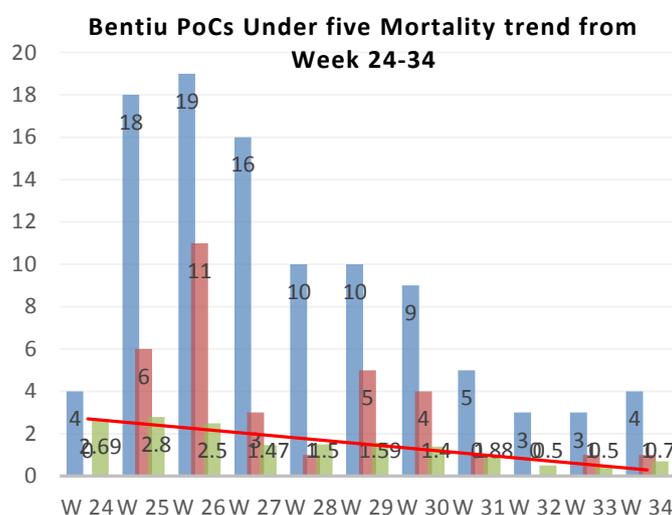
Following the recent signing of the “Protocol on Agreement Principals on Transitional Arrangement Towards Resolution of the Crisis in South Sudan” by the Government of South Sudan and leaders of the Intergovernmental Authority on Development (IGAD) which the SPLM in Opposition (SPLM-iO) refused to sign due to disagreement with some contents, reports have warned of “full-scale war”. This comes days after negotiations between the two rivals were adjourned by the East African regional mediators to 13 September; this, if executed, has the potential to derail all humanitarian efforts being made for the well-being of women and children in the country.

The crash of an UN-contracted helicopter near Bentiu, Unity State on 26 August resulted in the suspension of humanitarian flights to the area for two days. Although fighting has ceased for few days, mobilization of weapons and troops continued with an attack imminently expected. UNMISS is in talks with the parties to dissuade them from resuming fighting. Meanwhile, Bentiu PoC remains flooded, with no major improvement expected in the near future. These floods are simultaneously deteriorating children’s health, while limiting access to health, nutrition and WASH services, and continuing to collapse latrines.

Tensions remain high in Malakal. In spite of reduced activity in the Dolieb Hill areas, heavy shelling continues. The general security situation in Jonglei State remained calm but tense over fears of renewed conflict.

Due to the rainy season, malaria is on the rise and represented over 26 per cent of deaths recorded in health centres and displacement sites between 18 and 24 August.

Four children under 5 died across all PoCs this week, with one due to malnutrition. Though still below the emergency threshold, the mortality rate for children under 5 has slightly increased (0.7 deaths per 10,000 children under 5).



Note: Red line shows the declining trend of mortality among children under five

Humanitarian leadership and coordination

UNICEF actively participates in the Humanitarian Country Team and the Inter Cluster Working Group, which lead strategic and cross-sectoral coordination of humanitarian programmes. UNICEF leads the WASH, Nutrition and Education clusters as well as the Child protection sub-cluster. Within the Health cluster, UNICEF provides leadership on vaccination, communication and social mobilization. UNICEF also supports the core supply pipelines for the Education, WASH and Nutrition clusters, providing essential humanitarian supplies to all partners. While continuing to focus on the delivery of life-saving interventions, UNICEF is also investing in providing access to education and a protective environment for affected children.

Humanitarian Strategy: Rapid Response Mechanism

As part of the interagency rapid response teams, UNICEF continues to expand activities in remote locations together with WFP and partners. Multi-sector response teams (WASH, Health, Nutrition, Education and Child Protection) have already been deployed in 23 locations (Akobo, Melut, Nyal, Mayandit, Haat, Kodok, Pagak, Pochalla, Lankien, Old Fangak, Walgak, Jiech, Wau Shilluk, Lul, Leer, Koch, Nihaldu, Duk, Gorwai, New Fangak, Kaldak, Keich Kon and Ngop). Through the rapid response teams, UNICEF, WFP and partners have reached almost half a million people, including over 95,000 children under 5. Due to insecurity in targeted areas, there are currently no missions in the field, however, two missions are tentatively scheduled for this week.

A UNICEF rapid response team recently returned from Ngop, Unity state where they undertook a mission along with WFP, MSF and IAS. There are currently no humanitarian organizations working in Ngop; nor are there health centres, schools or markets. During the mission, 1,219 children were screened (MUAC), of which 11 (0.9 per cent) were identified as suffering from SAM and 77 (6.3 per cent) from moderate acute malnutrition (MAM). All 11 children with SAM were admitted into a SAM management programme while 1,007 pregnant and lactating mothers were reached with infant and young child feeding messages. Several households reported leaving the majority of their children at home as the swamps and rivers in the area make transport of children insecure or impossible. 520 people gained access to safe water through the repair of a hand pump during the mission. Twenty-four unaccompanied or separated children were registered, with tracing and reunification services on-going. Three temporary learning spaces, comprising six classrooms, were set up, and 645 children registered for school.



Community members supporting the transport of Ready-to-use therapeutic food (RUTF) to distribution site in Ngop.

Summary Analysis of Programme Response

HEALTH: The integrated measles, polio and vitamin A campaign is underway in the three conflict-affected states which were not reached during the nationwide integrated campaign in April due to increased insecurity. The campaign is targeting 1.8 million children under 15 in the three states. So far, 23,826 children have been vaccinated against polio and 23,570 against measles Malakal PoC, Wau Shiluk, Detang and Malakal town. In Bor PoC and town, 2,802 children have been reached with polio vaccine and 2,504 with measles vaccine. Some delays are expected in the roll out of the campaign outside of PoCs and main towns due to challenges in deploying supplies and partners on time to hard to reach counties, as well as adequate technical support to partners on the ground.

The campaign has been postponed for one week in Unity state, due to an ongoing nutrition survey as well as food distribution in Bentiu. Ten cases of measles were recorded this week at the MSF Holland hospital in the PoC. Out of this, 9 were children under 5. A refresher training has been conducted for vaccinators in Bentiu to start the integrated campaign by 1 September.

As of 24 August, 5,981 suspected cholera cases have been reported, including 132 deaths and a case fatality rate of 2.2 per cent. In week 34, four counties in Eastern Equatoria State (Torit, Lopa Lafon, Magwi and Ikotos) reported the highest number of cholera cases countrywide. UNICEF continued supporting 22 oral rehydration point (ORP) sites in Eastern Equatoria and Juba to ensure initiation of early treatment and rehydration of suspected cholera cases. During the current week a total of 706 acute watery diarrhea cases were treated in ORPs, of whom 245 were children under 5 years. This brings the total cumulative of the cases treated at the UNICEF supported ORP sites to 5,903.

Malaria cases have steadily increased during the reporting week, with 1,307 cases of malaria treated in PoCs and IDP sites during the reporting period. In Mingkaman alone, over 1,200 cases were reported this week, compared to 400-500 during week 30. This included two deaths due to severe malaria in Mingkaman. Ongoing prevention and control measures include spraying, distribution and promotion of long-lasting insecticide-treated net use and early case detection and treatment.

Total consultations in health facilities in Bentiu was 2,253 in week 34 compared to 2,553 in the previous week (a 12 per cent decrease in consultations); 632 (28 per cent) were children under 5. This decrease is attributed to flooding interfering with access to health. Acute watery diarrhoea, acute respiratory infection and malaria remain the main reasons for consultation. During the reporting week, UNICEF community volunteers visited 1,728 households with an integrated package of WASH, health and nutrition services. Eighty children were identified with diarrhoea were provided with ORS/zinc sulphate and referred to health facility for further management, as well as 51 children with cough and 41 children with fever for suspected pneumonia and malaria. A total of 563 children have been referred to health centres by community volunteers since the beginning of the project.

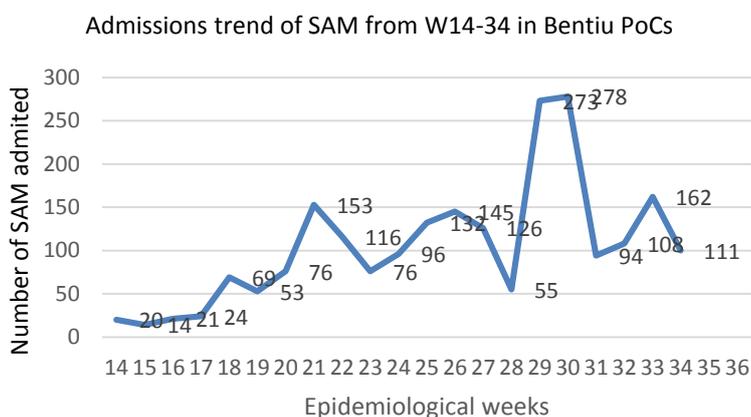
NUTRITION: The total number of reported new admissions to the therapeutic feeding programme for the management of SAM stands at 53,710 children aged 0-59 months from January 2014 to date. To date, 74.0 per cent of

South Sudan SITUATION REPORT 2 September 2014

all children have been discharged as cured against the recommended SPHERE standard of 75 per cent while the death rate is 1.3 per cent and defaulter rate is 20.5 per cent. This is an improvement from the previously-reported 67.5 per cent cured rate; the change is attributed to increased partner reporting, as well as improved quality of services.

This week the Integrated Phase Classification (IPC) process is on-going in Yei County with the participation of most Nutrition and Food Security and Livelihood Cluster partners, including UN lead agencies WFP, UNICEF and FAO. During the IPC process, experts will review and triangulate available food security and nutrition data (including food availability market prices, crude mortality rates and rates of acute malnutrition) in order to classify the severity and magnitude of the situation in the country. The outcome of this process is expected on 12 September.

In Bentiu PoC, Unity state, there were 111 new admission of children with SAM in UNICEF supported OTPs during the reporting period by Care and Concern. To date a total of 2,271 children with SAM and 3,589 children with MAM have been treated in Bentiu PoC. UNICEF supported Care to conduct SMART nutrition surveys in all six PoCs in Bentiu covering both infant and young child feeding (IYCF) and community management of acute malnutrition. Data collection and entry have been completed and preliminary data will be shared by Care next week.



Community and facility-based MUAC screening in Bentiu PoC conducted by ACF and Concern this week showed 6.3 per cent SAM and 13.4 per cent MAM.

	Boy				Girls				Total			
	Red	Yellow	Green	Tot	Red	Yellow	Green	Tot	Red	Yellow	Green	Tot
Concern	49	107	893	1049	43	112	814	969	92	219	1707	2018
ACF	35	5	304	344	41	6	274	231	76	85	473	634
Total	84	112	1297	1393	84	118	1088	1200	168	304	2196	2652
%	6%	8%			7%	9.8%			6.3%	13.4%	11.4%	

In Malakal, Upper Nile State, during integrated immunization campaign, 3,788 children under 5 received Vitamin A supplementation while 9,834 received deworming tablets. The mid upper arm circumference (MUAC) screening data in Malakal town of 246 children identified 2 children with SAM and 3 with MAM.

WASH: Rains and flooding continued collapsing sanitation facilities, reversing gains in access to sanitation in Bentiu PoC. The situation is also exacerbated by limited space and poor accessibility, including for desludging trucks. In Bentiu PoC, the current ratio of person per latrine is 1:121 for the over 40,000 residents, which requires an additional 475 latrines to reach the SPHERE standard of 1:50 latrines.

A drainage expert deployed by UNICEF in collaboration with the Government of the Netherlands completed an initial assessment of the Bentiu PoC and provided a list of short term and long term recommendations to improve the drainage system. UNICEF will be taking the lead to coordinate the implementation of the recommendations. Due to accessibility issues, little progress was made during the week on excavation of the drainage ditch, which remains at 2.5 of the required 4 km.

UNICEF and WASH Cluster partners supported safe water supply interventions in all major IDP locations with an average of 11 to 25 litres per person per day of safe water provided for IDPs in Bentiu, Bor, Juba, Malakal and Mingkaman. UNICEF-supported drilling operations in Bor town and surrounding areas are now complete, with a total of 20 boreholes drilled and equipped with pumping systems this year, benefiting over 18,000 conflict-affected people.

South Sudan SITUATION REPORT 2 September 2014

The ongoing rains have impeded garbage collection in different PoCs as mobilization of garbage trucks has become difficult in PoC sites. To address this, UNICEF, in collaboration with WASH Cluster partners, is conducting garbage collection campaigns to reduce the health risk as result of backlog of garbage in different locations.

UNICEF continued implementation of follow-up actions generated by RRM missions in Gorwai, Jeich, Kaldak, Pochalla and old Fangak areas of Jongeli state which include dispatch of the supplies, finalizing partnership agreements and rehabilitation of 27 boreholes completed benefitting over 4,000 people.

The UNICEF cholera WASH response continued in Eastern Equatoria state. As the cases are now reported mainly from rural areas outside of the state capital, UNICEF together with Save the Children International conducted a joint support mission to Lopa Lafon County for sensitization of health facility staff in the area. In addition, six boreholes were repaired benefitting over 3,000 people and WASH supplies distributed for over 6,485 people in cholera affected areas.

UNICEF partners in Mingkaman organized a training for 200 health and hygiene promoters on Guinea Worm surveillance and UNICEF is finalizing contracts to drill ten boreholes in Kapoeta and Mingkaman where high numbers of Guinea Worm cases have recently been reported.

Ebola preventive measures continue in collaboration with WHO and MoH, with the delivery of an average of 2,000L of clean water daily along with soap and chlorine at the Juba International Airport for hand washing and screening activities while water quality monitoring is ongoing both at the Juba airport and Isolation Centre at Juba Teaching Hospital. In addition, UNICEF will also be joining the assessment and training team being comprised of WHO, MoH and UNICEF to the main road entry points of Eastern, Central and Western Equatoria states to support local health offices to establish screening centres and provide required training.

EDUCATION IN EMERGENCIES: Overall, to date, UNICEF and implementing partners have supported emergency education, including supplies, for 43,164 students in conflict-affected areas of the country, with all Education Cluster partners reaching 131,388 to date. However, families continue to move to new areas in search of safety and basic services, interrupting their children's schooling. Absenteeism of teachers and lack of teaching capacity is also widespread. UNICEF and partners have trained 1,039 teachers in education in emergencies, including provision of psychosocial support in education, so far this year.

UNICEF continues to support students to progress in their studies by facilitating them to take the Primary Eight school examinations. Upon successful completion they will be awarded with a Ministry of Education, Science and Technology certificate which is a huge achievement in a country where only 11 per cent of students complete primary schools. Primary school examinations in Bentiu PoCs started on 25 August and are progressing well, despite all classrooms in the PoC being fully flooded, with children taking exams outside. 1,863 students (32 per cent girls) attended the first days of the exams. UNICEF also supported the County Education Director in Rumbek by collecting P-8 results and delivering them to Mingkaman for dissemination of results at the county level. These results have delayed for many months and were putting the students at risk of dropping out.

UNICEF is also continuing to expand access to learning. In Bentiu, UNICEF partner INTERSOS completed the construction of two new temporary classrooms using local materials in PoC 1 to accommodate the newly enrolled 192 pupils (89 girls).

CHILD PROTECTION: To date, UNICEF and partners have reached 60,238 children and adolescents with essential child protection services, including psychosocial support, case management and referrals. Mine risk education also continues, with 65 men, 73 women, 216 boys and 159 girls receiving mine risk education in Upper Nile State.

There have been 5,834 unaccompanied and separated children identified by UNICEF and its partners since the conflict began in December 2013, including an additional 215 children registered this week. The active caseload of registered children is now at 4,767 with 764 (41 per cent girls) unaccompanied; 2,575 (48 per cent girls) separated; and 1,428 (50 per cent girls) reported by their families as missing. According to the most recent data collected, the total number of children reunified with their families remains at 387 children, or 8 per cent of children registered; no new reunifications were reflected this week. UNICEF participated in a regional meeting to strengthen cross-border information sharing between South Sudan and neighbouring Sudan, Ethiopia, Kenya and Uganda.

South Sudan SITUATION REPORT 2 September 2014

UNICEF and partners continue to provide ongoing gender-based violence (GBV) prevention and response services in IDP sites in Malakal and Juba (Gumbo, Mahad and Lologo) as well the newly commenced programmes in Pochalal and Akobo in Jonglei State. In Malakal, a total of 854 people benefitted from GBV prevention and response services, including psychosocial support, awareness raising on GBV issues and women's centre activities during the report period. In Juba, 106 people received GBV prevention and response services, 288 households in Gumbo and 57 households in Lologo received solar lanterns from UNICEF and partners in response to the GBV risks that have been identified at night time. In Pochalla and Akono, a UNICEF partner has finalized a rapid GBV assessment to guide the newly established GBV prevention and response services in these areas – the first of its kind in this area since the eruption of conflict. The results will be reported in coming weeks.

COMMUNICATION FOR DEVELOPMENT (C4D): This week, C4D in partnership with the nutrition section began a series of trainings of 254 social mobilizers as a part of the UNICEF and Government of South Sudan integrated response to the nutrition emergency. The UNICEF-supported Social Mobilization Network will accelerate screening of children to identify severe and moderate malnutrition cases in non-conflict affected states, targeting, to start, 111,392 under five children in Juba County. Social mobilization was used this week to promote the importance of vaccination for the integrated vaccination campaign this week in Bor, Duk and Twic East in Jonglei state. A mix of communication intervention channels were applied including radio announcements and talk shows, house to house mobilization, church announcements, street announcements and a launch event attended by over 1,000 community members including high profile dignitaries.

UNICEF partners in Central Equatoria State targeted unreached pockets of Juba County with cholera prevention and treatment messages reaching a 25,071 people. As of 28 August, social mobilizers in Jonglei State have reached a total of 5,313 households with cholera prevention messages and education, distributing 625 soaps and 300 sachets of PUR. Although the caseload is decreasing in most parts of Eastern Equatoria, hot spots remain, as cultural practices of open defecation and drinking of local brews remain an impediment to behavior change communication. However, partners are working to address this noted gap by scaling the number of social mobilizers in hot spot areas for a concentrated response.

In Mingkaman IDP camp, cases of Hepatitis E are on the rise, currently standing at 65 cases. Health partners managing facilities are doing daily active case search of hepatitis E among patients who are seeking medical services at facilities with partners continuing house to house hygiene promotion messages. Radio Mingkaman FM100 is also continuously airing out key messages on Hepatitis E prevention and control in camp and host community. To date, 12 parishes with over 4,000 congregations have been reached with key messages on prevention measures. However, lack of local partners to mobilization the community to demand services from services providers.

SUPPLY & LOGISTICS: Two tons of WASH cargo was delivered from Rumbek to Bentiu before the helicopter crashed close to Bentiu, which, coupled with insecurity around Bentiu, temporarily suspended helicopter cargo deliveries for four days. Nutrition supplies, including 200 cartons of ready-to-use therapeutic food (RUTF) to treat an equal number of children with SAM were dispatched from Rumbek warehouse to Relief International for delivery to Maban. An additional 16,761 cartons were arrived at the UNICEF Juba warehouse – 3,000 of which were loaded on to trucks for delivery to UNICEF Wau warehouse, and 8,000 to the UNICEF Rumbek warehouse. Twenty one tonnes of assorted nutrition drugs and kits were received in to Juba warehouse this week. Nutrition supplies from UNICEF Wau warehouse were delivered to partners in Alek, Aweil, Wau, Malualkon, and Nyamlel from Malakal warehouse.

FUNDING:

Appeal Sector	Requirements in US\$**	Funds received in US\$*	Funding gap	
			US\$	%
Nutrition	43,700,000	24,739,724	18,960,276	43%
Health	24,184,673	9,814,458	14,370,215	59%
WASH	40,900,000	21,375,041	19,524,959	48%
Protection (CP, GBV & MRE)	12,374,652	11,886,778	487,874	4%
Education	10,319,775	7,052,678	3,267,097	32%
Multi-sector refugee response	2,675,290	0	2,675,290	100%
Cholera Response	17,630,680	5,448,837	12,181,843	69%
Total	151,785,070	80,317,515	71,467,555	47%

* 'Funds received' does not include pledges.

** The requirements noted above include the indirect cost recovery of 8% as per UNICEF's Executive Board decision. It also includes a cross-sectoral cost (covering fuel, security, ICT etc) to meet the high operating costs of working in South Sudan.

Next SitRep: 10 September 2014

UNICEF South Sudan Crisis: www.unicef.org/southsudan
 UNICEF South Sudan Facebook: www.facebook.com/unicefsouthsudan
 UNICEF South Sudan Appeal: <http://www.unicef.org/appeals/>



Who to contact for further information:

Jonathan Veitch
Representative
 UNICEF South Sudan
 Email: jveitch@unicef.org

Ettie Higgins
Deputy Representative
 UNICEF South Sudan
 Email: ehiggins@unicef.org

Faika Farzana
Resource Mobilization Specialist
 UNICEF South Sudan
 Email: ffarzana@unicef.org

South Sudan SITUATION REPORT 2 September 2014
Annex A - SUMMARY OF PROGRAMME RESULTS¹

	Cluster 2014		UNICEF and IPs 2014		
	Target (Jan-Dec) ^{*2}	Results (Jan- to 15 July)	Target (Jan-Dec) [*]	Results (Jan- to 15 July)	Change since last report
NUTRITION					
# of targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care	176,283	53,710	176,283	53,710	546
% of exits from therapeutic care- children who have recovered	75%	74%	75%	74%	-
# of children 6-59 months receiving vitamin A supplementation	1,980,069	77,974	1,980,069	77,974	-
# of children 12 - 59 months receiving de-worming medication	1,771,640	50,260	1,771,640	50,260	-
# of pregnant and lactating women in affected areas receiving multi micronutrient supplement (or iron and folic acid)	218,758	1,618	218,758	1,618	-
HEALTH					
# of children 6mo-15y vaccinated for measles			1,260,000	475,038	21,861
# of children below 15 years vaccinated against polio			1,316,000	378,539	24,182
# of households receiving 2 ITNs			116,667	80,377	-
# of pregnant women attending at least ANC 1 services			23,520	8,811	176
# of pregnant women attending ANC counselled and tested			6,300	4,149	51
WATER, SANITATION AND HYGIENE					
# of target population provided with access to water as per agreed standards (7-15 litres of water per person per day).	3,790,000	646,294	875,000	442,650	9,000
# of target population provided access to appropriate sanitation facilities (as per the Sphere Standards)	950,000	240,500	500,000	242,100	3,800
CHILD PROTECTION					
# of registered UASC receiving Family Tracing and Reunification services and family-based care/appropriate alternative care services ^{**}	4,390	5,834	3,512	4,667	17
# of children reached with critical child protection services	261,500	91,565	122,500	60,238	3,268
# of women, men, girls and boys receiving GBV prevention and response services [*]	400,000	23,976	30,000	13,512	1,941
EDUCATION					
# of pre-school children (aged 3-6) with access to play and early learning including supplies	48,962	36,292	19,735	7,001	930
# of school-aged children including adolescents (aged 7-18) with access to education in emergencies, including supplies	223,048	131,388	78,939	43,164	1,645
# of teachers trained to provide education in emergencies	1,993	2,116	1,020	1,039	75
# of other education personnel and Parent-Teacher Association members trained to support education in emergencies	997	4,300	306	459	45
# of classrooms established/rehabilitated	2,720	327	1,545	180	3
CHOLERA³					
# households in Outbreak States reached directly with messages on cholera prevention and control practices; and hygiene and health supplies ⁴			300,000	146,744	10,231
# of schools reached with cholera awareness campaigns			300	172	8
# of community volunteers, leaders, teachers, social mobilizers promoting cholera prevention and control at the community and HH levels			1,500	1057	227
# of operational Oral Rehydration Points supported by UNICEF	-	-	55	52	-

No change since last report is denoted by “-“

¹ Partner reporting rates remain below 100 per cent; UNICEF continues to work with its implementing partners to improve monitoring and reporting of results.

² These are the revised Targets for both Cluster and UNICEF as reflected in the revised Crisis Response Plan (Jan-Dec 2014).

³ Response Strategies are different for outbreak and unaffected states. In outbreak states, intensive community and social mobilization activities are being conducted.

⁴ Supplies include chlorine tablets, PUR, and ORS