



# South Sudan

## Humanitarian Situation Report

3 - 9 SEPTEMBER 2014: SOUTH SUDAN SITREP #38

SITUATION IN NUMBERS

### Highlights

- The total number of reported new admissions to the therapeutic feeding programme for the management of SAM stands at 54,573 children aged 0-59 months from January 2014 to date.
- The integrated measles, polio and vitamin A campaign continued in some counties of Jonglei and Upper Nile states and has started in Rubkona and Bentiu PoC. As of 6 September, a total of 116,201 children under 15 had been vaccinated against measles and 124,558 against polio. Additionally, 34,687 children under 5 had received Vitamin A supplementation and 12,172 were dewormed.
- Flooding and poor drainage in Bentiu Protection of Civilian (PoC) site continued to hamper efforts to construct additional sanitation facilities. UNICEF partners constructed an additional 48 latrines during the week which increased the sanitation coverage and reduced the ratio of latrines to people from 1:121 to 1:116.
- To date, 54,607 children (aged 3-18 years) have been provided with learning opportunities in conflict-affected area by UNICEF and its implementing partners, including education in emergency supplies. Schools are closed for this week as per official Ministry of Education, Science and Technology second term holidays, however learning is continuing in PoCs.

### 1.3 million

People internally displaced since 15 December  
(OCHA, SitRep #52 dated 4 September, 2014)

### 695,172\*

Estimated internally displaced children under 18 years

### Outside South Sudan

### 451,000

Estimated new South Sudanese refugees in neighbouring countries since 15 December 2013 (OCHA, SitRep #52 dated 4 September, 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 (%)
<b>WASH:</b> # 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	448,150	51%
<b>Nutrition:</b> # targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care	176,283	54,573	31%	176,283	54,573	31%
<b>Health:</b> # of children 6mo-15y vaccinated for measles				1,260,000	559,007	44%
<b>Education:</b> # of school-aged children including adolescents (aged 7 – 18) with access to education in emergencies, including supplies	223,048	138,211	62%	78,939	45,162	57%
<b>Child Protection:</b> # of children reached with critical child protection services	261,500	99,530	38%	122,500	65,587	54%

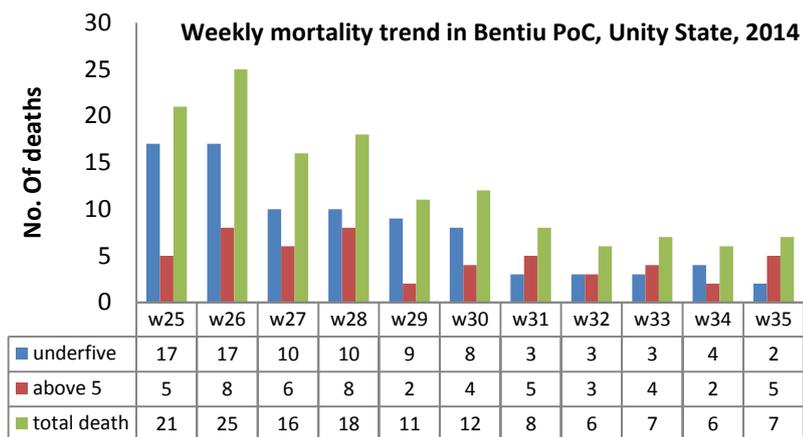
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**Situation Overview & Humanitarian Needs**

Since the outbreak of fighting in December 2013, 1.3 million people have been displaced in South Sudan, including 99,555 currently sheltering in Protection of Civilian (PoC) sites according to UNMISS. An additional 451,000 have taken refuge in neighbouring countries, including Ethiopia, Kenya, Uganda and Sudan.

The reporting period was relatively calm across country with reports of low level clashes in Malakal, though the situation remains tenuous. Following the 26 August helicopter crash in Bentiu, new safety measures have been introduced for approaches to and from Bentiu. UNHAS and UNMISS consequently resumed flights to Bentiu on 29 August, applying the advised measures. Investigations into the air crash are ongoing. The security environment in Jonglei State continued to improve and IDPs continued to return to Bor, mainly from Mingkaman. Approximately 500 IDPs per day are reported to be returning to Bor town.

While Bentiu PoC remains flooded, the first drainage channel has been completed by the WASH Cluster, with some water receding. A second channel is being constructed. This week seven people died in the community and health facilities in Bentiu PoC, including two children under 5, though neither of these deaths were due to malnutrition. The mortality rate for children under 5 in the PoC remained below the emergency threshold.

Over 1,400 cases of kala-azar, an endemic disease spread by sand flies which attacks the immune system, have been reported, particularly in Lankien, Upper Nile State.



On 3 September, the National Legislative Assembly of South Sudan ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) which defines what constitutes discrimination against women, and commits member states to setting up an agenda for action to end such discrimination. Forty per cent of South Sudanese girls between 15 and 19 are married; 79 per cent of people believe that it is justifiable for men to beat their wives; and even before the crisis, one in five women were affected by gender-based violence (GBV).<sup>1</sup> The conflict has increased the risk of GBV, with all parties to the conflict having committed acts of rape and other forms of sexual violence.

**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, Nihald, 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.

<sup>1</sup> South Sudan Household Survey, 2010



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While no new missions were undertaken during the reporting period, follow up continued to previous RRM mission locations. Supplies were delivered to UNICEF partners working in Gorwai in Jonglei state, including 100 cartons of ready-to-use therapeutic food to treat an equal number of children with SAM; antibiotics for the outpatient therapeutic centre; supplies to repair water pumps and establish latrines; and blackboards for the temporary learning spaces. The RRM mission to Gorwai registered over 21,000 people, including 5,000 children under 5. During that mission, 163 children were newly admitted into treatment programmes for SAM.

## Summary Analysis of Programme Response

**HEALTH:** The integrated measles, polio and vitamin A campaign, targeting 1.8 million children under 15 in the three conflict-affected states, has continued in some counties of Jonglei and Upper Nile states and has started in Bentiu PoC. As of 6 September, a total of 116,201 children under 15 had been vaccinated against measles and 124,558 against polio. Additionally, 34,687 children under 5 had received Vitamin A supplementation and 12,172 were dewormed. Supplies and funding have been dispatched to Renk and Fashoda counties to start training, and subsequently the campaign, next week. Security concerns and heavy military presence have undermined the implementation of the campaign in Bentiu and Rubkona towns in Unity State. In Bentiu PoC, seven measles cases were reported this week.

State	County	Target population	Antigen	Total reached	% coverage
Jonglei	Bor	168,616	Measles	<b>26,188</b>	16%
		176,110	OPV	<b>32,795</b>	19%
		78,687	Vit A	<b>13,206</b>	17%
		71,193	Deworming	<b>4,338</b>	6%
Unity	Rubkona	91,129	Measles	<b>6,366</b>	7%
		95,180	OPV	<b>6,484</b>	7%
		42,527	Vit A	<b>909</b>	2%
		38,476	Deworming	-	0%
Upper Nile	Malakal	114,200	Measles	<b>50,167</b>	44%
		119,276	OPV	<b>50,400</b>	42%
		53,294	Vit A	<b>7,945</b>	15%
		48,218	Deworming	<b>9,834</b>	20%
	Melut	29,088	Measles	<b>33,480</b>	115%
		42,085	OPV	<b>34,879</b>	83%
		12,997	Vit A	<b>12,627</b>	97%
<b>TOTAL</b>		11,384	Deworming	-	0%
		403,033	Measles	<b>116,201</b>	29%
		432,651	OPV	<b>124,558</b>	29%
		187,505	Vit A	<b>34,687</b>	19%
			Deworming	<b>14,172</b>	

Health and WASH partners continue activities in response to the cholera outbreak, which as of 7 September has reached 6,065 suspected cholera cases, including 139 deaths. During the reporting week, cases were reported in Ikotos and Torit counties in Eastern Equatoria as well as in Juba. UNICEF continued supporting over 22 oral rehydration sites in Eastern Equatoria and Juba. A total of 120,176 persons have received two doses of oral cholera vaccine in the PoCs in Bentiu, Bor, Malakal, Mingkaman, Tongping and Juba 3 so far this year.

Malaria cases are on the rise in the PoCs and in the non-conflict affected states. UNICEF has released rapid diagnostic tests, malaria drugs and mosquito nets to partners to scale up efforts to prevent and treat malaria cases during the peak season.

In collaboration with MoH, UNICEF conducted a six-day prevention of mother to child transmission/early infant detection of HIV training in Wau for 36 Health Care Providers (67 per cent female) representing 13 health facilities supported by State Ministries of Health (outside the conflict-affected areas) for a total of 150 Health Care Providers trained this year. UNICEF also supported Greater Yirou AIDS Awareness Programme who enhanced HIV knowledge by conducting awareness programmes with IDPs in Mingkaman where 1,605 IDPs (67 per cent female) were reached with HIV prevention messages.

**NUTRITION:** The total number of reported new admissions to the therapeutic feeding programme for the management of SAM stands at 54,573 children aged 0-59 months from January 2014 to date. To date, 71.0 per cent of all children have been discharged as cured against the recommended SPHERE standard of 75 per cent; the death rate

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stands at 1.3 per cent with 19.5 per cent of children defaulting from the programme. Partner reporting continues to be a challenge, though it has increased from 45 per cent in March to 75 per cent in August.

The Integrated Phase Classification (IPC) process was completed this week to classify the severity and magnitude of the situation in the country. Results will now be validated by both partners and line Ministries and are expected to be published before the third week of September.

The on-going integrated vaccination campaign is also being used as an opportunity to screen children aged 6-59 months for malnutrition and refer them to treatment programmes if not already enrolled. In Bentiu and Rubkona towns, of those screened, 73 had SAM (1.1 per cent) and 291 had MAM (4.6 per cent), showing that the situation remains of concern. During the campaign in Malakal and surrounding areas, 11,017 children aged 6-59 months were screened for malnutrition out of which 45 (0.4 per cent) had SAM and 225 (2.0 per cent) had MAM while one child was found with oedema and referred to the UNICEF MSF Stabilization Centre. In these locations, the low SAM and MAM rates may reflect that nutritional status of children has improved due to comprehensive nutrition package implemented by IMC, MSF, WVI and IOM with support from UNICEF and WFP over the past few months.

County/ Payam	Screening data for children 6-59 months in Jonglei						Total
	SAM <115mm		MAM 115 - 125mm		Normal >135mm		
	M	F	M	F	M	F	
Akobo East	77	83	118	137	135	165	<b>715</b>
Nassir	40	44	62	67	64	78	<b>355</b>
Nyirrol	23	29	28	30	397	474	<b>981</b>
Akobo West	13	18	31	40	541	613	<b>1,256</b>
Total	<b>153</b>	<b>174</b>	<b>239</b>	<b>274</b>	<b>1,137</b>	<b>1,330</b>	<b>3,307</b>
	<b>327 (9.9%)</b>		<b>513 (15.5%)</b>		<b>2,467 (74.6)</b>		<b>3,307</b>

In Jonglei State, the nutrition situation has improved in Bor PoC. This week, of 69 children 6-59 months were screened, with only seven identified with MAM and no SAM cases were found. However, the situation outside Bor PoC indicates that the nutritional status of children in Jonglei state is critical. A total of 151 children under five were newly admitted to nutrition programmes implemented by UNICEF partners in Akobo East, Akobo West, Nyirrol and Nassir.

In Northern Bahr El Garzel, UNICEF and Nutrition Cluster partners continue to scale up nutrition services, with two new outpatient therapeutic programmes established by Malaria Consortium in Aweil Centre and 20 additional centres expected to be operational in the next two months. To date, UNICEF and partners have treated 7,993 children for SAM in Northern Bahr El Garzel.

Nutrition activities also continued in Western Bahr El Garzel. An integrated rapid needs assessment (IRNA) was conducted among IDPs from Bentiu by the State MoH with UNICEF support. Of the 102 children screened for malnutrition, 8 suffered from MAM and one from SAM. The severe case was referred to Wau Teaching Hospital. High energy biscuits were distributed to children under 5 to help them cope until WFP general food distribution starts.

**WASH:** Flooding and poor drainage in Bentiu continued to hamper efforts to construct additional sanitation facilities. UNICEF partners constructed an additional 48 latrines during the week which increased the sanitation coverage and reduced the ratio of latrines to people from 1:121 to 1:116. In addition to the flooding, delayed supply delivery also slowed construction of sanitation facilities. Where possible, UNICEF recovered slabs from the latrines that were destroyed by flooding, following preventive contamination measures.

The drainage consultant supported by the Dutch Embassy completed the assessment and provided short term and long term recommendation to improve the flooded camp situation in Bentiu. As per the short-term recommendations, UNICEF is procuring six additional pumps for pumping the flood water out of the settlement area, reducing the damage as a longer-term solutions are implemented.

In Malakal, in addition to continued water trucking to the PoCs, UNICEF began water trucking for the Malakal town Teaching Hospital. In Bor, UNICEF continued the provision of water supply and sanitation services as per SPHERE standards in the PoC while 3 boreholes were rehabilitated outside the PoC benefiting 1,500 people.

In Mingkaman, the delayed of relocation of IDPs from old site to the new site with established WASH facilities continued to be the challenge for WASH partners. Of the 99,717 IDPs targeted for relocation, only 17,882 have relocated, meaning partners are providing WASH facilities in both the old and new camps, stretching their capacities. During the week UNICEF and partners constructed additional 60 latrine stances benefiting over 3,000 people.

The cholera response in Eastern Equatoria state continued and WASH supplies including household water treatment, soap and buckets were provided for over 20,000 people in Eastern Equatoria where high numbers of suspected cholera cases continue. In addition, UNICEF installed a surface water treatment system in Torit town to provide safe water for 3,000 people. UNICEF is supporting Cluster and Government partners to properly decommission sanitation facilities in cholera treatment centres which are being closed where no new cases are reported.

UNICEF also continued its support for Ebola preparedness. A WASH facilities assessment was completed for the Ebola isolation ward in Juba Teaching Hospital and maintenance plan finalized which will be started next week. UNICEF joined the team that travelled to Western Equatoria state to support the proposed screening centres along the main border crossings.

**EDUCATION IN EMERGENCIES:** To date, 54,607 children (aged 3-18 years) have been provided with learning opportunities in conflict-affected area by UNICEF and its implementing partners, including education in emergency supplies. Schools are closed for this week as per official Ministry of Education, Science and Technology second term holidays, however learning is continuing in PoCs across key affected areas.

Prior to schools resuming after the holiday session UNICEF and its partners will conduct a social mobilisation campaign in targeted areas to ensure children resume their attendance as well to enrol new students. This campaign will be launched in Mingkaman IDP site as a pilot, with it then rolled out more widely in conflict-affected areas.

UNICEF continues to provide training to Parent-Teacher Association (PTA) members to strengthen their knowledge and skills on psychosocial support to children and to support school management. An additional eight PTA members and other education personal have been trained bringing to a total of 467 PTA members trained to date in key conflict-affected locations since the crisis broke out. PTAs are critical in the current education context as significant areas of Jonglei, Unity and Upper Nile states are not currently being supported by the Ministry of Education. It is therefore up to the parents to operate and maintain temporary learning spaces.

In an effort to mitigate conflict and enhance peacebuilding and social cohesion among children from different backgrounds, training on the use of sports as a tool for community building has started and is ongoing for 75 teachers and 75 young persons in three locations (Juba, Tonj East and Wau). The project aims to empower a total of 15,000 young people to access sports for peacebuilding. A similar project is under implementation in two IDP camps in Juba targeting youth aged 15- 35 years through the mobilization of 32 sports teams (8 female teams) benefiting a total of 480 young people. The objective of organized play days and tournaments is to promote resilience, coping with distress, negotiation and mediation in young people who are key agents of change within their community

**CHILD PROTECTION:** To date, UNICEF and partners have reached 65,587 children and adolescents with essential child protection services, including psychosocial support, case management and referrals. UNICEF provided technical support to partners in Mingkaman to start an art-based community psychosocial support initiative for conflict affected children. During the trial last week, 30 girls and 45 boys participated in the development and delivery of artistic community awareness and messaging materials. The activities drew large crowds and based on the high levels of community interest, partners have agreed to continue to roll out similar activities to expand the reach of the critical psychosocial support programmes.

This week, mine risk education continued, with 60 men, 49 women, 83 boys and 65 girls receiving mine risk education in Upper Nile State. The risks of people sustaining injuries and dying as a result of landmines and accidents from other ERWs still remains a major threat for boys, girls, men and women in South Sudan. As a result of the previous conflicts, seven of South Sudan's ten states are affected by landmines and/or explosive remnants of war, and the ongoing conflict has resulted in the displacement of thousands of people who may move across contaminated areas. There are reports of new mines being planted, especially in Unity State.

There have been 6,088 unaccompanied and separated children identified by UNICEF and its partners since the conflict began in December 2013, including an additional 254 children registered this week. The active caseload of registered children is now at 5,110 with 772 (41 per cent girls) unaccompanied; 2,718 (48 per cent girls) separated; and 1,522 (48 per cent girls) reported by their families as missing. The number of children reunified with their families remains at 387 children, now 7.6 per cent of children registered.

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 as Pochalal and Akobo in Jongeli State. In Malakal, a total of 1,372 people (67 per cent female) 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 Pochalla, a rapid GBV assessment has been completed and 68 people were sensitised on GBV issues last week.

**COMMUNICATION FOR DEVELOPMENT (C4D):** UNICEF, MoH, WHO and partners are finalizing an Ebola preparedness national communication plan, with related materials and training packages. Communication will play a critical role in Ebola crisis, addressing harmful local practices which could further spread the virus; strengthening belief in health system; and destigmatizing Ebola patients and their families, in the event country reports cases. UNICEF will support MOH and partners in broadcasting radio messages across all stations in the country.

On the Nutrition Scale-Up initiative, UNICEF has trained 200 social mobilizers out of 254 as planned under UNICEF and Government of South Sudan integrated response to the nutrition emergency, with the remaining social mobilizers expected to be trained by next week. These social mobilizers will undertake mass screening, identification and referral starting from the end of September, paired with promotion life-saving behaviours, such as exclusive breastfeeding for infants under six months and use of latrines, to address the long-term underlying causes of malnutrition.

This week, a Cholera Communication Plan for Eastern Equatoria was developed by the State MoH with UNICEF support. The plan will use 280 social mobilizers in affected areas to reach out to communities with cholera prevention messages. This emergency response approach will be later linked to the longer term response, integrating development approach and working with the community health workers which will inform communities on preventive behaviours for Acute Water Diarrhoea.

**SUPPLY & LOGISTICS:** The roads from Juba to Rumbek, and also Juba to Yambio continue to be inaccessible with trucks unable to deliver supplies to Yambio, Rumbek and locations beyond Rumbek. Engineers from the government and WFP are working to make the roads accessible, though this is causing a delay in the pre-positioning supplies in the UNICEF warehouse in Rumbek. Helicopter flights have resumed from Rumbek to Bentiu, with a total of 27 tons of programme cargo delivered to Bentiu using the Logistics Cluster MI26 helicopter. This helicopter also delivered 12 tonnes of WASH and nutrition cargo to partners in Leer. Helicopters also delivered 4.5 tons of WASH cargo to Mayendit and 1.7 tonnes to Gorwai.

**FUNDING:** The funding level for the South Sudan Country Office is at US\$80.3 million (53 per cent funded against the requirement of US\$ 151.8 million).

UNICEF is deeply appreciative of the contributions received to date from all its donors to support its ongoing humanitarian interventions. As the crisis is in its ninth month, the high level of humanitarian needs against the crisis continues. UNICEF would like to advocate with all its public and private sector donors to continue their generous support for the coming months and in 2015 to ensure that critical assistance continues to be provided to the displaced populations and host communities affected by the current crises.

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%
<b>Total</b>	<b>151,785,070</b>	<b>80,317,515</b>	<b>71,467,555</b>	<b>47%</b>

\* '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.

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UNICEF South Sudan Crisis: [www.unicef.org/southsudan](http://www.unicef.org/southsudan)  
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 UNICEF South Sudan Appeal: <http://www.unicef.org/appeals/>

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Annex A - SUMMARY OF PROGRAMME RESULTS<sup>2</sup>

	Cluster 2014		UNICEF and IPs 2014		
	Target (Jan-Dec) <sup>3</sup>	Results (Jan- to 15 July)	Target (Jan-Dec) <sup>*</sup>	Results (Jan- to 15 July)	Change since last report
<b>NUTRITION</b>					
# of targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care	176,283	54,573	176,283	54,573	863
% of exits from therapeutic care- children who have recovered	75%	71.0%	75%	71.0%	-
# 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	-
<b>HEALTH</b>					
# of children 6mo-15y vaccinated for measles			1,260,000	559,007	83,969
# of children below 15 years vaccinated against polio			1,316,000	474,742	96,203
# of households receiving 2 ITNs			116,667	81,158	781
# of pregnant women attending at least ANC 1 services			23,520	8,949	138
# of pregnant women attending ANC counselled and tested			6,300	4,469	320
<b>WATER, SANITATION AND HYGIENE</b>					
# 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	448,150	5,500
# of target population provided access to appropriate sanitation facilities (as per the Sphere Standards)	950,000	240,500	500,000	245,100	3,000
<b>CHILD PROTECTION</b>					
# of registered UASC receiving Family Tracing and Reunification services and family-based care/appropriate alternative care services <sup>**</sup>	4,390	6,088	3,512	4,870	203
# of children reached with critical child protection services	261,500	99,530	122,500	65,587	5,349
# of women, men, girls and boys receiving GBV prevention and response services <sup>*</sup>	400,000	23,976	30,000	14,952	1,440
<b>EDUCATION</b>					
# of pre-school children (aged 3-6) with access to play and early learning including supplies	48,962	37,062	19,735	9,445	1,008
# of school-aged children including adolescents (aged 7-18) with access to education in emergencies, including supplies	223,048	138,211	78,939	45,162	1,998
# of teachers trained to provide education in emergencies	1,993	2,159	1,020	1,039	75
# of other education personnel and Parent-Teacher Association members trained to support education in emergencies	997	4,300	306	467	8
# of classrooms established/rehabilitated	2,720	327	1,545	180	3
<b>CHOLERA<sup>4</sup></b>					
# households in Outbreak States reached directly with messages on cholera prevention and control practices; and hygiene and health supplies <sup>5</sup>			300,000	157,694	10,950
# of schools reached with cholera awareness campaigns			300	178	6
# of community volunteers, leaders, teachers, social mobilizers promoting cholera prevention and control at the community and HH levels			1,500	1074	17
# of operational Oral Rehydration Points supported by UNICEF	-	-	55	52	-

No change since last report is denoted by “-“

<sup>2</sup> Partner reporting rates remain below 100 per cent; UNICEF continues to work with its implementing partners to improve monitoring and reporting of results.

<sup>3</sup> These are the revised Targets for both Cluster and UNICEF as reflected in the revised Crisis Response Plan (Jan-Dec 2014).

<sup>4</sup> Response Strategies are different for outbreak and unaffected states. In outbreak states, intensive community and social mobilization activities are being conducted.

<sup>5</sup> Supplies include chlorine tablets, PUR, and ORS