# **Project Summary**

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| **Title of Proposal:** | South Sudan Conflict-Affected Children At-Risk: Water, sanitation and hygiene (WASH) and Child Protection in Emergencies Prevention and Response |
| **Country and Region(s)** | South Sudan |
| **Donor** | Belgium |
| **Total Proposed Budget** | 850,000 Euro |
| **Project Duration**  | 12 Months |
| **Project Outcome** | Improved emergency WASH promotion services for conflict affected people, vulnerable host communities and people in disease prone areas.Improved protection and well-being for children conflict-affected areas. |
| **Project Outputs** | **Output 1:** 12,500 affected people provided with basic WASH supplies (soap, buckets, jerry cans, household purification tabs and bulk water treatment supplies) and 25% (3125 people) of which also reached with basic access to water, sanitation and hygiene. **Output 2:** 5,000 extremely vulnerable children reached with Child Protection in Emergencies (CPiE) and Children in Armed Conflict (CAAC) interventions that are in line with child protection minimum standards. |
| **Focus****Population** | Internally displaced persons, host communities, returnees and children at risk in conflict-affected communities. |
| **Target areas** | Country wide |
| **Relevance to (country) 2019 HAC** | Directly reflects delivery of UNICEF Core Commitments for Children (CCC’s) in emergency humanitarian settings. |
| **Implementing Partners**  | World Vision; CMMB; Mercy Corps; and others to be determined |
| **Date Submitted** | May 2019 |
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# **List of Acronyms**

C4D Communication for Development

CAAC Children in Armed Conflict

CAAFAG Children associated with armed forces and groups

CCC Core Commitments for Children

CFR Case Fatality Rate

CPiE Child protection in emergencies

EVD Ebola Virus Disease

FSNMS Food Security and Nutrition Monitoring System

FTR Family tracing and reunification

GBV Gender Based Violence

HAC Humanitarian Action for Children

HRP Humanitarian Response Plan

IDP Internally displaced people

JMP Joint Monitoring Program

MRE Mine risk education

MRM Monitoring and reporting mechanism

NFI Non-Food Item

NGO Non-governmental organisation

OCV Oral Cholera Vaccine

POC Protection of Civilian Site

PSS Psychosocial support

SAM Severe Acute Malnutrition

WASH Water, sanitation and hygiene

# **Humanitarian Action for Children in South Sudan**

In 2019, in line with UNICEF’s Humanitarian Action for Children (HAC) and the inter-agency Humanitarian Response Plan (HRP), UNICEF continues to strengthen and expand its programmes. UNICEF will provide life-saving humanitarian assistance through a timely and effective integrated package of nutrition, health, WASH, child protection and education services delivered through interconnected, complementary responses. To ensure that support has a wide reach, services will be delivered through static operations, direct outreach and rapid response modalities. UNICEF’s operations will be led by its 13 field offices to enable wide coverage and quality programming across the country. UNICEF also leads the nutrition and WASH clusters and child protection area of responsibility and its co-leadership of the education cluster.

# **Situational Analysis**

The multidimensional crisis for conflict-affected populations is characterized by continued violence, severe food and nutrition insecurity, economic upheaval and disease outbreaks. Five years of the most recent conflict has forced almost 4.2 million people to flee their homes in search of safety, nearly 2 million[[1]](#footnote-1) people are internally displaced people (IDPs) and 2.2 million[[2]](#footnote-2) seek refuge outside the country. An estimated 1.5 million people are located in areas with extremely limited humanitarian access due to insecurity and operational interference.

While the intensity of conflict may have reduced recently, and clashes have been contained to certain regions, vulnerable people will continue to experience the impacts of the conflict throughout 2019. United Nations reports indicate that all parties to the conflict have repeatedly violated international humanitarian law and perpetrated serious human rights abuses, including rape, abductions, sexual slavery of women and girls, and recruitment of children as combatants. Over 2.2 million children across South Sudan are now out of school and about 6 million people require water, sanitation and hygiene (WASH) services. By early 2019, an estimated 5.2 million people are experiencing crisis levels (or worse) of acute food insecurity, and more than 220,700 children under 5 years will suffer from severe acute malnutrition (SAM). Malaria remains the main cause of morbidity and mortality among children.

# **WASH**

South Sudan has some of the worst rates of access to safe water and sanitation in the world. Only 50 per cent of the population has access to basic water supply and 10 per cent have access to basic sanitation (JMP, 2017). Open defecation is rampant, practiced by 61 per cent of the population. South Sudan also ranks worst in the world for safe and hygienic toilets per person. Underinvestment, scarce technical capacity and shortages of spare parts limit the maintenance of water and sanitation facilities. Contaminated water and poor sanitation and hygiene highly contributes to low absorption of micronutrients, malnutrition and cholera outbreaks and as such to high child mortality rates. More than one in ten children die in South Sudan before they reach their fifth birthday.

Data obtained through the Food Security and Nutrition Monitoring System (FSNMS) shows that only approximately 29 per cent of the population countrywide have access to an improved water source in 30 minutes or less without facing protection concern, in particular GBV concerns. This indicates that the remaining two thirds of the population are required to spend greater periods of time access water, are unable to access an improved water source and are reliant on surface water or water sources that are not protected. Data also indicated that less than 10 per cent of the population do not practice open defecation. This indicates that around 90% per cent of the population do not have access to or are not accustomed to using a basic sanitation facility when defecating. In combination with poor sanitation facilities, only 13 per cent of the population reported having access to WASH supplies. The interlinked impact on the well-being of the population from poor water, sanitation and low access to WASH supplies can be seen through the health and nutrition status of the population. Seventy-five per cent of the population reports that household members had been self-diagnosed with a water borne illness in the past two weeks.

# **Child Protection**

Nearly 20,000 children have been registered by the Child Protection Sub-Cluster as unaccompanied and separated. Family Tracing and Reunification (FTR) has reunified 6,000 children with their families. The broad impact of the armed conflict on children cannot be overstated. Each child’s resilience varies and in any affected population, there will be low, medium and high risk children as a result of their vulnerabilities and the particular risks they are facing including further displacement, separation from family, being forced out of school, laboring, sexual violence, forced recruitment in to armed forces and armed groups, discrimination, child marriage, underdevelopment, killing and maiming from the armed conflict operations, explosive remnants of war, and deprivation of access to basic needs as well as other risks and vulnerabilities affecting hundreds of thousands of children in South Sudan. Gender-based violence (GBV) is occurring at an alarming rate, with some 2,300 incidents reported to service providers during the first half of 2018, mostly affecting women and girls.

## **Background**

The 2019 Humanitarian Needs Overview illustrates that conflict and associated economic decline have eroded the Government’s ability to provide consistent basic services. Currently, one primary health center serves an average of 50,000 people. Only 40 per cent of nutrition treatment centers have access to safe water, a gap that puts more vulnerable people, particularly women, boys and girls, at risk of malnutrition and disease. Only about one in five childbirths involves a skilled health care worker and the maternal mortality ratio is estimated at 789 per 100,000 live births. Every third school has been damaged, destroyed, occupied or closed since 2013, and more than 70 per cent of children who should be attending classes are not receiving an education. [[3]](#footnote-3)

From 2014 to 2017, cholera epidemics have been declared every year in South Sudan, during which time the country reported 28,677 cases and 650 deaths due to cholera. The last cholera outbreak in South Sudan started in 2016 and lasted 1.5 years and recorded the highest number of deaths (over 400) in what was the largest outbreak in decades with a case fatality rate (CFR) rate of 2.38. In 2018, considerable attention was given to service provision on WASH and intense Communication for Development (C4D) activities on hygiene promotion as well as immunization with Oral Cholera Vaccine (OCV). No cholera cases were recorded and a cholera free period of one year has thus existed. The congestion and proximity of dwelling in the protection of civilian sites (POCs) exacerbate the risks associated with outbreaks, especially with the current threat of Ebola Virus Disease (EVD) in South Sudan.

By the end of 2018, the conflict in South Sudan became the largest source of displacement in Africa. By early 2019, more than 88,000 children had sought refuge in United Nations POC sites. This dramatic situation has been compounded by episodes of famine in parts of the country since 2016, and by the epidemics of cholera, malaria and other illnesses that exerted a heavy toll on children.[[4]](#footnote-4)

## **Justification**

The Core Commitments for Children in Humanitarian Action – the CCCs – are UNICEF’s central policy to uphold the rights of children affected by humanitarian crisis. The CCCs promote predictable, effective and timely collective humanitarian action, and clearly outline the areas in which UNICEF can best contribute to results.

Due to poor sanitation, shortages of safe drinking water, low immunization rates, breakdown in health infrastructure and mass movements, the potential for spread of infectious and vaccine-preventable diseases, such as cholera and measles, is large. South Sudan’s extremely poor access to safe water and adequate sanitation, coupled with poor hygiene practices, have a serious impact on the health of women and children. Furthermore, conflict has triggered extensive destruction and looting of WASH facilities, leaving an estimated 50 per cent non-functional. Access to water is often far, forcing children to walk more than 30 minutes to the nearest water source. The large influx of IDPs into urban areas has led to the over-utilization of existing water and sanitation facilities and forcing people to rely on contaminated water sources that are prone to outbreak of diseases. Reaching these people with WASH programming is an essential element in reducing young child and maternal mortality through addressing their rights to WASH.

The complex and high-threat environment for children in South Sudan demonstrates emergency needs for child protection in emergencies prevention and response interventions. According to the South Sudan 2019 Humanitarian Response Plan (child protection needs analysis) 1.9 million boys and girls are estimated to be in acute and severe need of protection[[5]](#footnote-5).  As a result of the armed conflict and overall reduced protective environment for children, boys and girls continue to be exposed to threats and risks of violence, abduction, sexual violence, forced out of school, at risk of recruitment, psychosocial distress, family separation, abuse, neglect, and exploitation. For example, under the Children and Armed Conflict (CAAC) agenda, since the 2013 outbreak of the current conflict, 3,558 reported incidents of grave violations have been verified, and shown affecting over 98,344 children (41,025 girls; 53,601 boys)[[6]](#footnote-6). As a result of the civil war, impoverishing and displacing communities and families, hundreds of thousands more children continue to experience lower realization of child rights while at the same time at increased risk to protection concerns.

# **Project Objective and Expected Results**

Twelve thousand five hundred (12,500) affected people will be provided with basic WASH supplies and 3125 people will also be reached with basic access to water, supply and sanitation. Five thousand (5,000) extremely vulnerable children (including children associated with armed forces and groups (CAAFAG)), identified as at high risk of violence, abuse, neglect and exploitation, in South Sudan will access Child Protection in Emergencies (CPiE) services to address specific protection needs and build resilience.

**Outputs and Expected Results**

**Output 1.1:** 12,500 affected people provided with basic WASH supplies

**Output 1.2:** 3125 people (25 per cent of those provided with basic WASH supplies) reached with basic access to water, supply and sanitation.

Under this output, emergency access to safe water, sanitation and hygiene will be provided for IDPs, host communities and returnees. Affected people will be provided with basic WASH supplies such as soap, buckets, jerry cans, household purification tabs (aquatabs and PUR) and also bulk water treatment supplies. Twenty-five per cent of those reached with based WASH supplies will also be provided access basic access to water, supply and sanitation.

**Output 2:** 5,000 extremely vulnerable children reached with CPiE and CAAC interventions that are in line with child protection minimum standards.

Under this output 5,000 children will be reached overall with a package of CPiE services. All children will receive psychosocial support (PSS), both focused and non-focused activities, within child friendly spaces in schools and communities. Amongst these beneficiaries, a smaller number of extremely vulnerable children will be identified for FTR and for comprehensive case management (including CAAFAG). Awareness raising on child rights, prevention of abuse and exploitation, prevention of family separation, PSS and mine risk education (MRE) will also be conducted.

Child Protection supplies, serving 5000 children, will also be procured, pre-positioned and issued to implementing partners. These supplies include child friendly space kits, recreation kits, reintegration kits (clothes and hygiene items for CAAFAG and other extremely vulnerable children) and adolescent kits as well as tarpaulins, mats and megaphones which are used for case management, PSS and awareness raising activities.

At least 80 staff from UNICEF’s Child Protection implementing partners will be trained on monitoring of the six grave violations of children’s rights (MRM) and on the principles of CAAC. There will be four training sessions conducted at Juba and at sub-national level.

The 2019 HAC is annexed to this proposal and also available here: [South Sudan Humanitarian Action for Children 2019](https://www.unicef.org/appeals/files/2019-HAC-South-Sudan.pdf)

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| **Project results framework** |
| **Output** | **Activities** | **Assumptions** |
| **Output 1:** 12,500 affected people provided with basic WASH supplies (soap, buckets, jerry cans, household purification tabs and bulk water treatment supplies) and 25% (3125 people) of which also reached with basic access to water, sanitation and hygiene.  | **Indicator(s):**  * 1. # of WASH supplies procured and prepositioned in UNICEF warehouses for affected people
	2. # of affected population with access to WASH services
 |
| * 1. **Activity**; Procurement of WASH supplies and prepositioning for distribution to identified vulnerable populations.
 | **Assumptions:** * Access to the targeted areas, including roads which are not drivable during the rainy season.
* May 2019 reformation of the Government of South Sudan occurs on time and without violence.
* Security remains calm in the targeted areas.

**Risks:*** Peace deal not respected, and violence breaks out.
* Supply chain pipeline breaks.
 |
| * 1. **Activity;** Maintain, rehabilitate, install water facilities for providing access to safe water.
 |
| * 1. **Activity;** Maintain, rehabilitate, install

water facilities for providing access to adequate sanitation. |
| **1.4 Activity:** Distribution of WASH supplies necessary for maintaining hygiene along with training on usage of those supplies (including household water quality treatment products).  |
| **Output 2:** 5,000 extremely vulnerable children reached with CPiE and CAAC interventions that are in line with child protection minimum standards. | **Indicator(s)** 2.1 # of children reached with child protection supplies2.2 # of children reached with CPiE interventions2.3 # of NGO protection officers trained on Children and Armed Conflict MRC |
| **2.1 Activity**Deliver child protection supplies in high priority areas. | **Assumptions:** * Access to the targeted areas, including roads which are not drivable during the rainy season.
* May 2019 reformation of the Government of South Sudan occurs on time and without violence.
* Security remains calm in the targeted areas.

**Risks:*** Peace deal not respected, and violence breaks out.
* Government military divisions and military opposition remained mobilized and impede access to conflict-affected communities, families and children.
 |
| **2.2 Activity**Conduct CPiE interventions in all conflict-affected areas including comprehensive case management/FTR, PSS and MRE. |
| **2.3 Activity**Under the CAAC MRM agenda, build capacity of the State/field level NGO partners on monitoring and responding to survivors of the six grave violations. |

# **UNICEF Strategy and Response**

This project aims at providing IDPs and other emergency affected populations, with core emergency WASH supplies through planning, procurement, prepositioning, distribution, and management of the supplies. This project fits within the overall WASH Cluster objectives for 2019 i.e. WASH for IDPs/host communities and returnees, mitigate WASH related GBV, WASH in Nutrition for famine prevention, and WASH in Health for outbreak control for the targeted affected population in all the states.

Throughout the project, UNICEF will procure Emergency WASH supply items, preposition in strategic locations throughout South Sudan, support distribution, and strengthen management, monitoring and reporting. UNICEF will work with local authorities and NGOs at various levels to streamline access to, and utilization of these supplies. UNICEF, in coordination with beneficiary partners, will conduct end user monitoring of the supplies to ensure that supplies procured address the real needs of the vulnerable populations.

This project will also provide lifesaving emergency water supply, sanitation and hygiene promotion services for conflict affected people, vulnerable host communities and people in disease prone (high global acute malnutrition and outbreak related) areas including protection related actions to mitigate GBV, strengthening of communities’ resilience to cope with the impact of emergencies and recurrent shocks. UNICEF will deliver emergency lifesaving support by providing access to WASH services as per Sphere Standards.

This project seeks further support in the continuation of delivery of a minimum package of CPiE response to children identified as at risk. In implementing UNICEF’s CCCs effectively and sustainably, UNICEF and partners look to deliver emergency programmes with the global standard of a ‘child protection systems-building in emergencies’ approach. Namely, delivering on emergency response to identified needs of children through rights-based and results-based programming toward ensuring the development of sufficiently protective environments for children at risk. For example, UNICEF and child protection partners support safeguarding and appropriate steps for individual children identified as unaccompanied and separated children, this includes CAAFAG.

UNICEF’s CPiE programme is delivered according to workplans that anticipate CPiE needs and structure the delivery of CPiE in a multi-sector, multi-partner approach across key response interventions of: interim care; individual case management for higher risk children; mental health and PSS; counselling, FTR; education; vocational training; and dedicated response to survivors of sexual and GBV.

The above core response interventions are delivered consistent with the CCCs as well as the UN Convention on the Rights of the Child core principle of all decisions concerning a child are taken with the child’s best interest in mind. The project contributes to the safety and well-being of children through extending prevention and response services in emergencies, and building a protective environment for each child, through building skills and capacities of National workforce on child rights, child protection in emergencies and social work in complex emergencies.

# **Monitoring and reporting**

UNICEF South Sudan implements field-level interventions through a range of NGO/INGO implementing partners. UNICEF technical staff at both national and sub-national level follow a structured workplan for monitoring and reporting on the partners delivery of activities, outputs and outcomes according to pre-defined goals and objectives. UNICEF will be responsible for ensuring regular monitoring activities, with a view to ensuring the efficient utilization of resources as well as the accountability to the affected population, transparency and integrity. The day to day supervision of the project will be conducted through competent staff at the targeted locations. UNICEF’s Country Office, tracks reporting requirements for donors and coordinates across UNICEF programme sections for timely reporting.

# **Budget**

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|  **Description** | **Amount[[7]](#footnote-7) (Euros €)** |
| **Output 1:** 12,500 affected people provided with basic WASH supplies (soap, buckets, jerry cans, household purification tabs and bulk water treatment supplies) and 25% (3125 people) of which also reached with basic access to water, sanitation and hygiene. |
| * 1. **Activity**; Procurement of WASH supplies and prepositioning for distribution to identified vulnerable populations.
 | 200,000 |
| * 1. **Activity;** Maintain, rehabilitate, install water facilities for providing access to safe water.
 | 60,000 |
| **1.3 Activity;** Maintain, rehabilitate, install  water facilities for providing access to adequate sanitation. | 50,000 |
| **1.4 Activity:** Distribution of WASH supplies necessary for maintaining hygiene along with training on usage of those supplies (including household water quality treatment products). | 17,932 |
| **Output 2**: 5,000 extremely vulnerable children reached with CPiE and CAAC interventions that are in line with child protection minimum standards. |
| **2.1 Activity*:*** Deliver child protection supplies in high priority areas. | 66,000 |
| **2.2 Activity:**Conduct Child Protection in Emergencies (CPiE) interventions in all conflict-affected areas including comprehensive case management, FTR, PSS and MRE. | 201,932 |
| **2.3 Activity:**Under Children and Armed Conflict (CAAC) MRM agenda, to build capacity of the State/field level NGO partners on monitoring and responding to survivors of the six grave violations. | 60,000 |
| **Programme Effectiveness**  |
| Cross sectoral support costs, including monitoring, reporting and support to operations, including Field Office Management, Logistics, Procurement, Vehicle Maintenance, Fuel, Security, ICT, Finance, Coordination, Donor Reporting and engagement, Communications and Visibility. | 131,173 |
| **Sub-Total programmable cost**  | **787,037** |
| Indirect cost recovery (8%) | 62,963 |
| **Total** | **850,000**  |

\* Note: The funding amounts per activity are indicative and for information purposes. UNICEF will provide financial reporting through its standard system-generated Donor Financial Statements.

# **Visibility and recognition**

UNICEF will ensure that the generosity of the Belgium Government is fully and visibly acknowledged. This will include traditional media channels, such as human-interest stories, and photo stories. Logo’s will be placed on supplies and other visibility materials, in order to ensure that end beneficiaries are aware of the generous contribution. UNICEF will also use its social media platforms (website, Facebook and Twitter) to disseminate information on the impact of this partnership.

1. HRP 2019 [↑](#footnote-ref-1)
2. HRP 2019 [↑](#footnote-ref-2)
3. UNICEF South Sudan Humanitarian Bulletin March 2019 [↑](#footnote-ref-3)
4. UN OSRSG-CAAC South Sudan Country Report 2018 [↑](#footnote-ref-4)
5. According to the HRP 2019 children in need in South Sudan are 3,789,989 million of which 1,900,000 million in acute and severe need of protection.  [↑](#footnote-ref-5)
6. UNICEF South Sudan Humanitarian Bulletin March 2019 [↑](#footnote-ref-6)
7. The EUR value will be converted into USD per UN Exchange Rate in effect on the date of receipt of disbursement. [↑](#footnote-ref-7)