

RESPONSE PLAN

South Sudan Crisis

January - June 2014



3 February 2014

Prepared by the Humanitarian Country Team

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SUMMARY

Violence broke out in Juba on 15 December, and quickly spread to other locations. During the first six weeks of the crisis, Central Equatoria, Jonglei, Unity and Upper Nile states saw heavy fighting between Government and opposition forces. Other states have been indirectly affected as displaced people have sought safety there. An agreement to cease hostilities was signed on 23 January, but its impact on the humanitarian situation is not yet clear.

Around 865,000 people have been displaced by the conflict so far, including some 740,000 people within South Sudan and 123,000 people who have fled to neighbouring countries. Thousands of people have been killed or wounded in the fighting. Hundreds of thousands have lost their livelihoods and access to basic services. Many civilians have been targeted based on political affiliation with ethnic undertones.

Aid agencies estimate that the impact of violence to date, and possible clashes in the future, could displace as many as one million people by June, and place over 3 million people at acute or emergency risk of food insecurity. Up to 7 million people are at some risk of food insecurity.

As the impact of the conflict and resulting needs become more protracted, partners are extending the Crisis Response Plan to June, to address the large scale humanitarian consequences of the conflict. So far, aid agencies have reached 300,000 people struck by the crisis. Humanitarians are scaling up the response to assist 3.2 million people by June 2014. This includes people displaced or otherwise impacted by the violence, the host communities receiving displaced families, refugees living in South Sudan, and other communities whose lives and livelihoods are threatened by the crisis. Assistance until June will continue to address immediate and life-threatening needs, ensure that people's rights are upheld, and protect and strengthen livelihoods wherever possible to mitigate against longer-term damage.

NGOs and UN agencies need US\$1.27 billion to meet the most urgent needs until June including vital pre-positioning of aid supplies needed throughout the year. The large increase in funding needs reflects the deterioration in the situation and the importance of securing sufficient supplies ahead of the rainy season.

7million

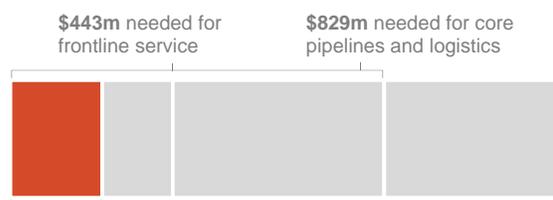
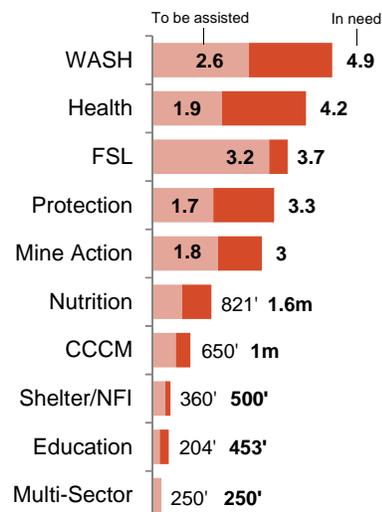
People at risk of population of 11.6m



3.2 million

People to be assisted by June 2014

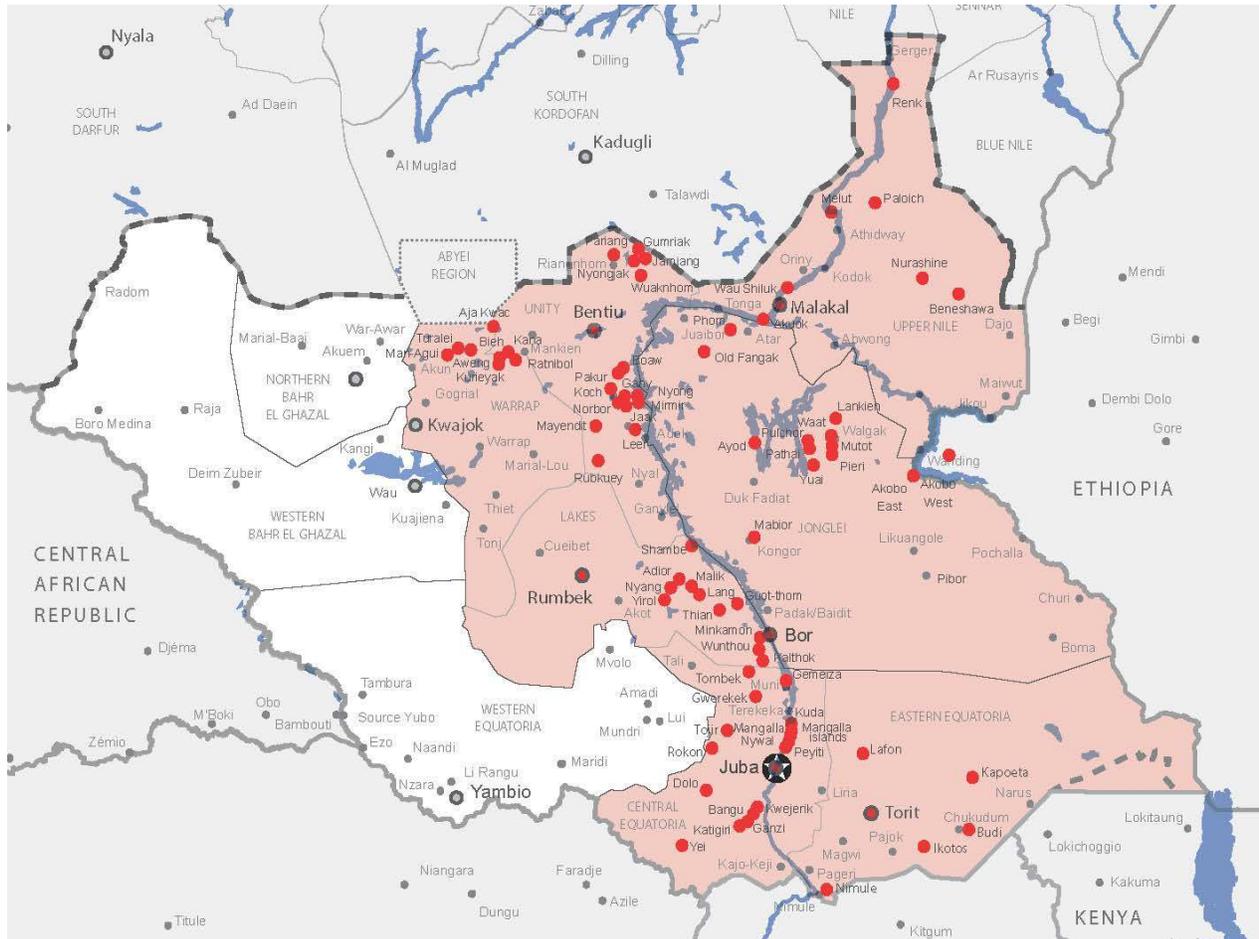
People in need and to be assisted by sector (million)



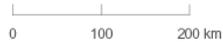
\$1.27bn
Needed until
June 2014

Est. \$246m in pledges and commitments received so far

OVERVIEW MAP



- ★ Country Capital
- State Capitals
- Populated place
- IDP locations
- Rivers
- Lakes
- Undetermined boundary*
- Abeyi region**
- International boundaries
- State boundaries
- States affected by violence



The information shown on this map does not imply official recognition or endorsement of and physical, political boundaries or feature names by the United Nations or other collaborative organizations. UN OCHA and affiliated organizations are not liable for damages of any kind related to the use of this data. Users noting errors or omissions are encouraged to contact inmsouth@un.org.

** Final boundary between the Republic of Sudan and the Republic of South Sudan not yet determined.
 ** Final status of Abeyi area not yet determined.

HUMANITARIAN NEEDS OVERVIEW

The current crisis comes on top of already large-scale humanitarian needs. South Sudan has one of the world's largest aid operations, tackling food insecurity, internal displacement, disease outbreaks, refugee and returnee movements, and a range of other needs across the country. These come against a backdrop of some of the worst human development indicators in the world.

The large-scale violence that has struck the country since 15 December has deepened needs, not least because the livelihoods of hundreds of thousands of people have been disrupted or destroyed. Up to 7 million people are now at some risk of food insecurity, both in areas struck by violence and in the country as a whole, where food insecurity is expected to rise. The modest gains made on the humanitarian front in 2013 – with the situation stabilizing or improving in some areas, including food security and livelihoods – are likely to be reversed, with a serious impact on people's health and nutritional status.

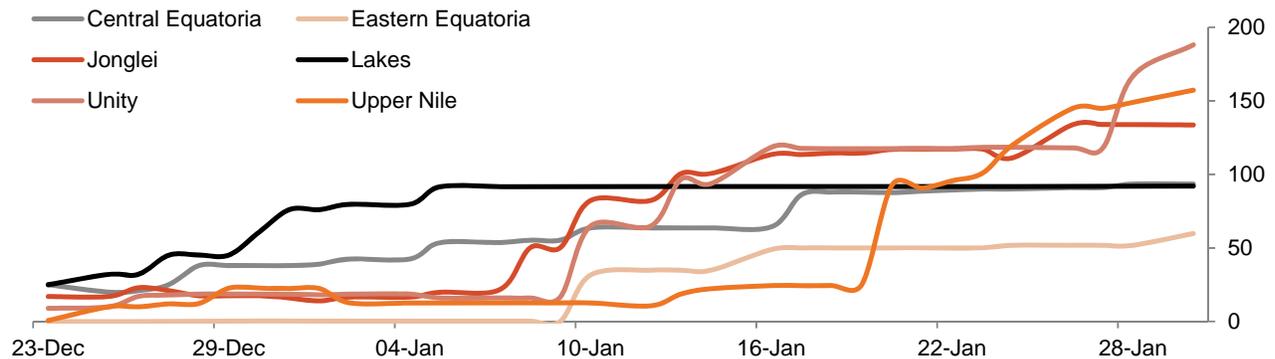
Making matters worse, this crisis has coincided with the period for pre-positioning essential supplies in deep-field hubs around the country ahead of the rains which begin in March and cut off two thirds of the country by June. With pre-positioning disrupted by the conflict, including significant looting of already pre-positioned supplies in some states, the humanitarian community's strategy for delivering consistent assistance to people in need in remote locations throughout the year is at risk.

In addition to the immediate impact of conflict and displacement, several other factors mean conditions are rapidly deteriorating for many communities, in particular for those most vulnerable – the elderly and women and children. Disrupted agricultural cycles, suspension of development programmes, and the potential economic implosion arising from disrupted economic systems, reduced oil revenues, and further austerity, may lead more people to need assistance and the country to become more fragile. Tens of thousands of children are at risk of having their education interrupted. In addition, the dry season may see an escalation of inter-communal violence such as cattle-raids which could further inflame the crisis. The threat to aid workers, especially South Sudanese; looting of aid assets; and insecurity due to hostilities, continue to challenge the aid operation.

Conflict-driven displacement

In only six weeks, violence and fear have driven close to 865,000 people from their homes. This includes an estimated 740,000 people displaced within South Sudan, and over 123,000 people who have crossed in to Ethiopia, Kenya, Sudan and Uganda.¹ Even more people could be on the move, given aid agencies' relatively limited information about conditions in some of the country's more remote and insecure areas. Already, the number of people displaced within the country is almost six times higher than what aid agencies had anticipated for all of 2014. Over 80,000 of those internally displaced have sought refuge in UN peacekeeping bases around the country, in particular in towns where fighting has been intense, such as Juba, Bentiu, Bor and Malakal.

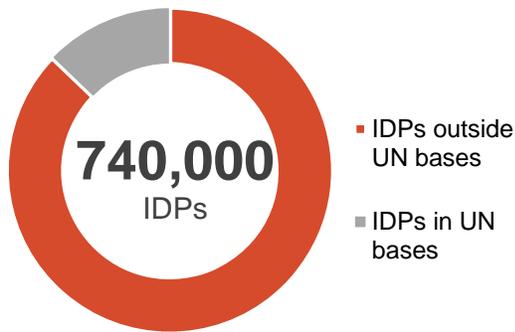
Internal displacement by state (in thousands)



Internal displacement between 23 December and 22 January. Source: OCHA

Patterns of displacement are fluid and change with the rapidly evolving security situation and depend on several factors including whether people fleeing are from urban or rural areas, the nature of the threats against the community, and people's capacity and options for seeking safety. For many, the cost or lack of transportation has

¹ OCHA and UNHCR, as of 31 January 2014.



Source: OCHA, as of 31 January 2014

homes, especially in Juba. Six weeks into the crisis, signs are however that people may stay displaced for longer. Towns such as Bentiu and Bor have seen fluid patterns of displacement depending on who is in control of the area. By mid-January, Bentiu, Bor, Malakal and parts of Juba, were almost empty of civilians with most people having sought refuge in UN bases, moved out of the country or to more peaceful areas, where some have been absorbed by host communities.

The majority of the people displaced – close to 90 per cent – are outside UN bases, including in places where aid organizations have limited access to assess protection and assistance needs.² Nevertheless, aid agencies have prioritized reaching these communities. Initial assessment findings from Central and Eastern Equatoria, Jonglei, Lakes and Warrap states indicate that a large proportion of displaced families have been absorbed by host communities, and are not living in concentrated groups. There are also movements back and forth across borders with neighbouring countries, particularly Uganda. In some areas, the influx of displaced people, particularly with their cattle, is aggravating existing tensions with pastoralists.

There have been some requests by local authorities to establish “IDP camps” in settings where displaced persons have primarily sought physical security. The humanitarian community views encampment as a last resort, and continues to develop a range of ways of providing assistance to people displaced in a variety of settings.

Massive crisis leads to acute protection needs

The crisis has been marked by wide-spread abuses against civilians, including women and children, committed by all parties to the conflict. Thousands of people – both civilians and combatants – are feared to have been killed, either in cross-fire or targeted violence. Health partners have treated nearly 5,000 patients with gunshot wounds since 15 December and rape and other forms of sexual and gender-based violence have been reported in several locations with active hostilities. There are widespread reports that civilians have been targeted based on their political and/or community affiliation, with displaced people from all communities sharing harrowing accounts of family members being killed or abused and homes destroyed. When fleeing their homes, many children have also been separated from their families, and aid agencies have received reports that some armed actors have children in their ranks. The ongoing threats to civilians and the widespread destruction of civilian property, including homes and markets, will likely lead to protracted displacements requiring a large-scale and sustained humanitarian response.

The re-arming of groups disarmed in the past years, increased proliferation of weapons, splintering of armed forces, and concerns as to command and control structures of all armed groups, give rise to significant protection concerns. The involvement of youth militia groups in the conflict should be seen against a history of inter-communal violence involving these groups, and greatly increases the risk of civilians being targeted. There are also risks associated with secondary displacement and occupation of land without consent by persons other than the original inhabitants, and dangers associated with mines and unexploded ordnance. As a result, civilians are and will be exposed to a range of protection threats.

For civilians sheltering inside UN bases there are specific issues related to the mixed composition of displaced communities, proximity of the protection of civilians (PoC) areas to active fighting, criminality and overcrowding. Public rhetoric against the PoC areas, and UNMISS’s role in protecting them has occurred. Despite this, current indications are that large numbers of people intend to stay in the bases for the time being, based on the actual or perceived security situation.

² Access can be hampered by a range of obstacles, including but not limited to active hostilities, logistical constraints, bureaucratic impediments or lack of safety assurances from relevant authorities or conflict parties.

A particularly vulnerable group affected by the crisis are the around 230,000 refugees living in South Sudan, the large majority of whom live in Unity and Upper Nile states after fleeing conflict in Sudan. Though not likely to be directly targeted in the fighting, this group risks being indirectly affected by sharing resources with the growing number of internally displaced people in areas hosting refugee camps. With weaker coping mechanisms and fewer livelihoods options than resident communities, refugees are also more vulnerable to disruptions in basic services and assistance.

Worsening food insecurity

The violence and displacement has worsened an already fragile food security situation. The most recent Integrated Phase Classification (IPC) was completed on the eve of the crisis in mid-December, forming a solid pre-crisis baseline.³ Food and livelihoods partners revised the IPC in mid-January to estimate the effects of the crisis on the livelihood and food security status of different communities. The new IPC approximate projections is based on a set of assumptions including patterns of displacement, deterioration of the food security status, expected food deficits, and market access adjustments.

According to this analysis, it is estimated that 3.7 million people are now at high risk of food insecurity, including 1.1 million people in the IPC emergency phase, 2.1 million in the acute IPC phase, and some 500,000 displaced people estimated to be at similarly high risk. Overall, up to 7 million people are at some risk of food insecurity. This compares to the pre-crisis estimate of 1 million people in acute and none in emergency phase classifications. Of those at high risk, some 2.5 million people are in Jonglei, Unity and Upper Nile states.

People at risk of food insecurity by state, per Integrated Phase Classification (IPC) phase⁴

State ⁵	Minimum	Stressed	Acute	Emergency	Famine
Central Equatoria	703,397	532,746	153,768	33,638	-
Eastern Equatoria	417,964	473,599	141,687	30,558	-
Jonglei	42,658	299,666	620,170	567,084	-
Lakes	682,493	275,006	69,393	2,411	-
N Bahr el Ghazal	576,615	555,175	170,194	17,874	-
Unity	112,098	164,446	413,543	273,199	-
Upper Nile	331,175	352,770	421,209	172,121	-
W Bahr el Ghazal	371,864	112,881	21,561	1,460	-
Warrap	865,366	366,675	110,635	6,663	-
Western Equatoria	635,952	108,502	11,612	578	-
Total	4,739,582	3,241,465	2,133,772	1,105,585	-

Source: Food Security and Livelihoods Cluster, January 2014

Equally worrying is the long-term impact of the conflict on food production and consumption throughout 2014 and into 2015. Unless security conditions improve significantly in the coming weeks, people displaced are likely to miss the planting season starting in March, impacting on their food security and nutritional status, and on their ability to produce food for markets and supply elsewhere in the country. In host communities, arrivals of displaced communities will strain already scarce food resources. With regard to livestock, past achievements in setting up a robust cold chain and livestock vaccination programme have suffered serious setbacks with vaccination programmes impacted. As a result, people are likely to suffer from an increase in disease and related deaths among their livestock assets.

The conflict has also had a major impact on markets in urban areas affected by the violence. With most foreign

³ The IPC is a global initiative to provide a common measurement for classifying the severity and magnitude of food insecurity and is used around the world to identify food security risks and the measures needed to address them. It is led by the world's leading aid agencies in the food security sector, including UN agencies and NGOs.

⁴ This IPC is considered to be valid until March 2014. Revisions will be undertaken as ongoing assessment results are made available, including after the results of the Food Security Monitoring Survey to be conducted in February/March 2014 are out and an effective beneficiary registration has been conducted.

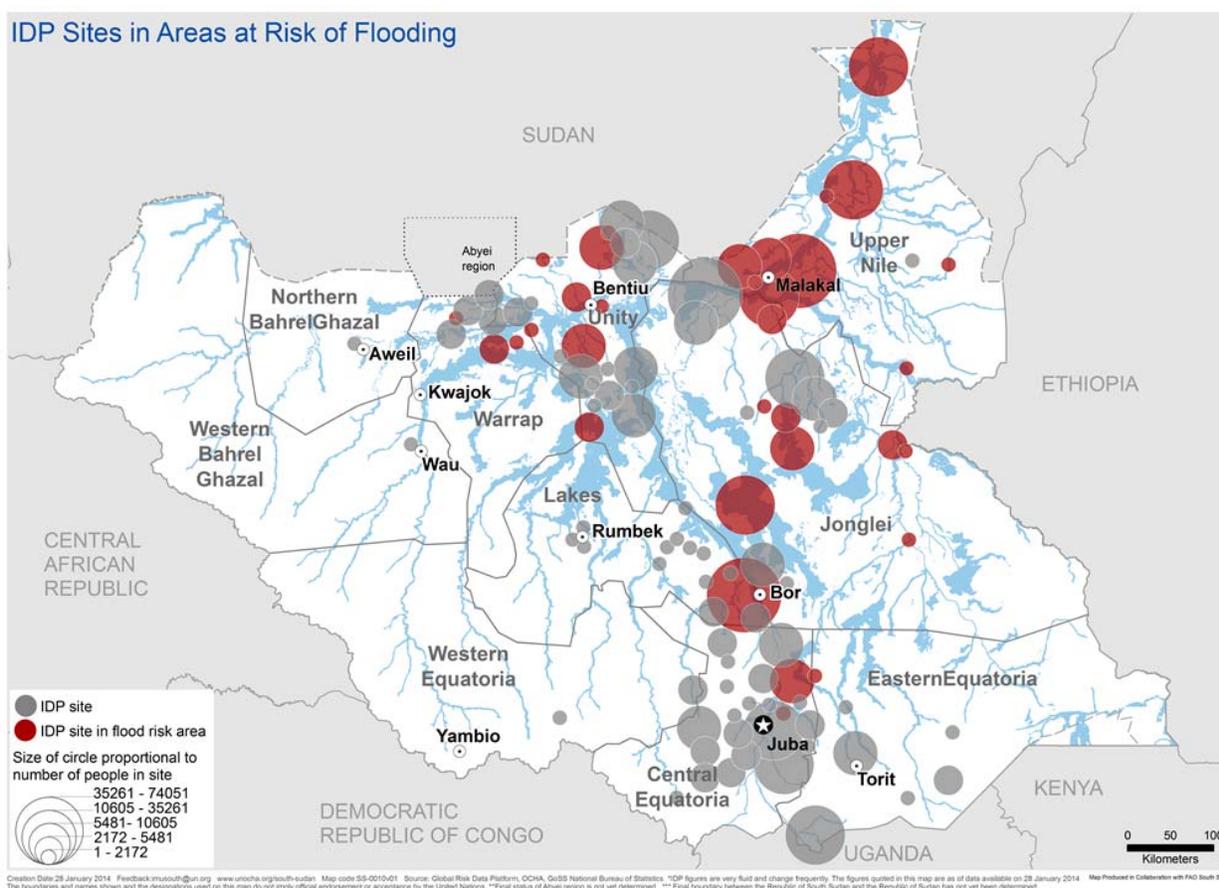
⁵ These figures refer to host communities, and do not include the 500,000 displaced people assumed to be in acute or emergency IPC phases.

traders gone and movement hampered by insecurity, availability of food and other supplies will be limited in several states. Oil production has reduced significantly due to the crisis, as fighting has largely taken place in the oil-producing states of Unity and Upper Nile. Combined with austerity measures already in place, stunted economic growth could also cause inflation and large-scale price rises, affecting access to food and other commodities. Increased economic pressures also include protection risks, including sexual exploitation and abuse, and other forms of gender-based violence.

In sum, South Sudan is facing a major food insecurity crisis due to the conflict. However, measures taken by partners in the first half of 2014 to ensure access to food, protection and support to livelihoods, and the boosting of resilience can mitigate against the possibility of the food security situation deteriorating further, and the risk of famine in 2015.

The approaching rainy season

The rainy season, which in some areas starts in March and is in full swing by June, will bring more hardship to displaced and other vulnerable communities. In 2013, over 350,000 people across the country were affected by seasonal floods, many living in areas now hosting large concentrations of displaced people. Areas along the Nile, including locations in Aweril County, which are hosting over 84,000 people displaced, are flood prone, posing serious health risks for communities sheltering there and increasing the likelihood of people being displaced several times. Partners estimate that nearly 300,000 displaced people are sheltering in flood-prone areas.

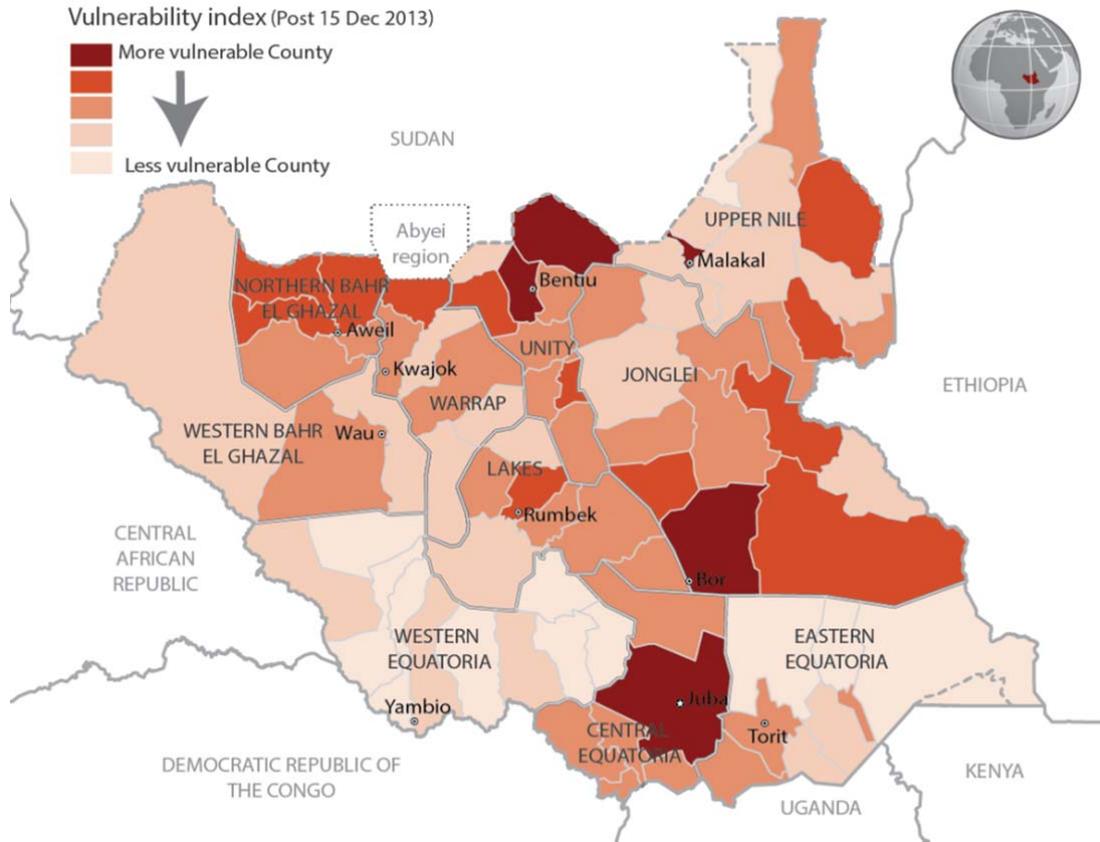


Heavy rains will also increase needs for adequate shelter and site management, including in crowded displacement sites inside UN peacekeeping bases, where living conditions will deteriorate rapidly once the wet season begins. Finally, seasonal floods will hamper aid workers' ability to reach people in need, with potentially devastating consequences for communities relying on assistance for their survival.

Patterns of vulnerability

The crisis has brought about new patterns of vulnerability in South Sudan. The map below shows vulnerability by county based on data since 15 December 2013, and highlights needs in some of the areas worst hit by violence. The mapping is based on several indicators, including levels of displacement, conflict incidents, access constraints, presence of refugees and returnees, and propensity of flooding.

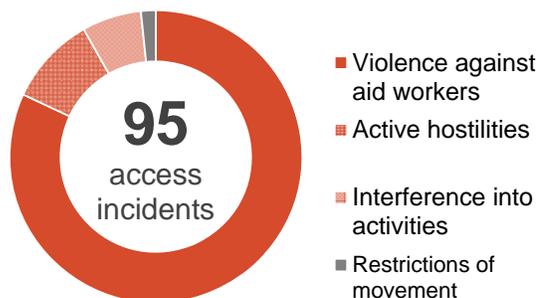
Vulnerability since 15 December 2013



OPERATIONAL CONSIDERATIONS

Access challenges

Aid organizations face a range of challenges in reaching and assisting people affected by the conflict. These include active hostilities, looting and commandeering of humanitarian assets, and interference in humanitarian operations by parties to the conflict. Between 15 December and 31 January, 95 access incidents were recorded, compared to 83 incidents between July and September 2013 and 68 incidents in the three months before that.⁶ 82 per cent of the incidents recorded since the start of the crisis were violence against personnel or assets and within this category 59 per cent involved looting or forcible seizure of access. At least three aid workers have been killed since the start of the crisis and at least 72 humanitarian vehicles stolen. These incidents have been committed in areas under the control of both parties to the conflict, with the majority occurring in Unity, Jonglei and Upper Nile states.



Access incidents 15 December – 31 January. Source: OCHA

Humanitarian property in Bor, Bentiu and Malakal has been vandalized, with initial estimates showing that more than 10 per cent of pre-positioned food in the country has been looted. 29 health facilities including hospitals in Bentiu, Bor, and Malakal have been looted or damaged in the fighting, depriving hundreds of thousands of people of health care, along with other humanitarian facilities. While humanitarians have continued to carry out flights into both Government and opposition-held areas, there are increasing concerns about air threats, especially near front lines, which require extensive negotiations for flight safety assurances from all conflict parties. The Government of South Sudan has introduced fast-track immigration and customs clearance processes that have facilitated delivery of humanitarian assistance so far.

The ongoing insecurity in many parts of the country is having a significant impact on the humanitarian community's ability to pre-position relief supplies in state capitals and deep field hubs before the onset of the rainy season. The strategy of pre-positioning underpins the humanitarian response country-wide for the entire year. Looting has increased the risk of storing assets such as food stocks and household items outside Juba. All riverine and commercial road movement in conflict-affected states has stopped. If pre-positioning cannot take place or is limited, the cost of the aid response during the rainy season will rise sharply due to the reliance on air assets to bring supplies to areas without stocks, and the need for additional storage capacity in secure areas with large amounts of supplies. Aid agencies are making both immediate and contingency plans to adjust their pre-positioning strategies to the evolving situation.

Scaling up operations

Scaling up capacity to respond to the crisis is a key priority for the response. Initially, many NGO and UN staff were relocated from deep field locations, or even from the country, when fighting broke out. Though many have returned, it has been challenging for organizations to redeploy to deep-field locations at full capacity due to the rapidly changing security conditions. Security is a particular concern for national staff, who are sometimes not able to operate in all parts of the country due to their identity. Some national staff have themselves become internally displaced or sought refuge outside South Sudan. Aid agencies are having to balance the need to widen the aid response with their duty to do their utmost to ensure the safety of their personnel. To help address this concern, the UN and most NGOs are establishing joint security arrangements, including for analysis of the situation and the deployment and relocations of personnel.

National capacity to deliver basic services, already severally strained before this crisis, has been badly damaged by the crisis. Many civil servants, including teachers, nurses and other key staff, have been affected by violence, and fighting has disrupted the flow of financial resources to the state and local levels to implement activities.

Mounting a successful multi-sector operation in such a complex situation requires partners to strictly maintain a neutral, impartial and independent operation in all areas of humanitarian need, while advocating that all parties to the conflict adhere to their obligations under international humanitarian law. The ability to stay and deliver, including scaling up operations will be underpinned by i) negotiated access, ii) timely and comprehensive security analysis and assessments (by UNDSS/NGO Forum/OCHA and others), and iii) a flexible approach that allows staff to be safely surged to and relocated from hotspots.

⁶ OCHA access database, January 2014. This number is considered to be an under-estimate due to reporting challenges.

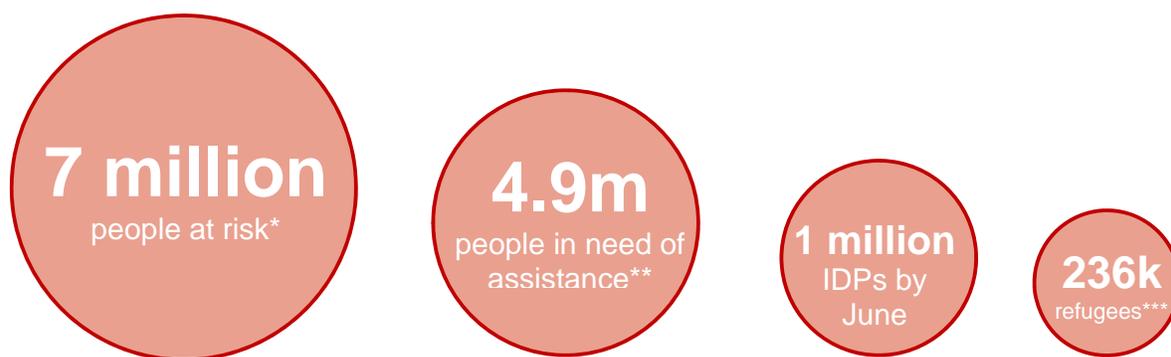
PLANNING SCENARIO

For the extension of the Crisis Response Plan, aid agencies are working on the following most likely scenario:

- Despite the cessation of hostilities agreement signed, the lack of longer-term political agreement could remain, possibly leading to renewed hostilities. A no peace/no war situation is the most likely outlook for the operating environment within an overarching environment of violence without accountability. Youth and other groups who have been mobilized in the conflict could continue to engage in violence, with an increasingly inter-communal dimension. The Greater Equatoria and Bahr el Ghazal regions remain outside the conflict, but are impacted to differing degrees by the arrival of people displaced.
- Oil production continues, although at about two thirds of the pre-crisis output. Austerity increases, as resources are redirected towards military expenditure. Public and private investments decrease sharply, affecting national plans for development and reconstruction. The departure of foreign traders from several towns seriously disrupts those urban economies.
- National capacity to deliver basic services at the local level deteriorates as a result of the crisis. As line ministry resources are redirected to security priorities, reliance on aid organizations increases.
- With the cessation of hostilities agreement, the military nature of the conflict subsides and lower intensity, irregular warfare ensues. The majority of fighting occurs in Jonglei, Upper Nile and the tri-state area of Lakes, Unity and Warrap states.
- The ongoing insecurity and low-intensity hostilities continue to displace communities (often multiple times) and leads to abuses of civilians, including with possible targeting based on ethnicity, use of children by armed forces and increased levels of gender-based violence. Destruction of civilian property and looting of humanitarian assets continue in areas with heightened tension or hostilities.
- Some displaced communities may fear urban areas and form new communities in remote locations, making it difficult to deliver services to them.
- Animal disease becomes more prevalent throughout cattle herds and crop production is severely impacted by the violence and displacement, impacting on livelihoods.
- The situation of displaced communities living along river banks deteriorates during the rainy season, as people are either cut off from assistance or displaced again due to floods.

Triggers for the most-likely scenario

- The cessation of hostilities agreement does not immediately trigger an end to clashes and insecurity.
- Lower-level violence between Government and opposition forces or other armed actors continues and displaced communitiies do not yet feel safe enough to return to their homes in large numbers.
- Urban economies around the country are severely impacted by the departure of foreign traders, leading to shortages in basic commodities.
- Oil production continues, though at lower levels then before the crisis.
- Rains occur at average levels resulting in flooding at normal levels and the normal time of the year.



*Number of people at some risk of food insecurity in 2014. **WASH figure for people in need. *** Estimated number of refugees in country by June 2014.

HUMANITARIAN STRATEGY

Four strategic objectives will guide the response to the crisis:

SO1 Provide a coordinated life-saving response to immediate humanitarian needs of conflict-affected people (internally displaced people, host communities and refugees in country). This will include (but not be limited to): preventing and responding to life-threatening diseases and malnutrition; distributing food, shelter and household items; providing healthcare, including care for wounded patients and mass vaccinations; and delivering water, sanitation and hygiene services.

Indicator	Target
Number of emergency-affected people (displaced persons, returnees, and host community) provided with safe water (based on standard SPHERE figures)	1,685,000
Number of outpatient consultations	1,172,000
Number of people assisted with food and conditional/unconditional cash transfers	1,600,000

SO2 Provide protection to conflict-affected communities and ensure access to services, including (but not limited to): protection of civilians, prevention and response to gender-based violence, access to gender, conflict, and age sensitive programming, prevention of recruitment and use of children by armed forces/armed groups, family tracing and reunification services, demining activities, and emergency education.

Indicator	Target
Number of field protection monitoring and assessment missions undertaken in all affected locations, as access permits, and advocacy/information initiatives undertaken, including with protection of civilians actors	45 assessment missions
Psychosocial well-being of children promoted through access to safe spaces and by association with networks of children, youth and women	Relevant individuals among up to 400,000 people in and around displacement sites

SO3 Support the resumption of livelihoods activities by affected communities as quickly as possible and building resilience by providing integrated livelihoods assistance.

Indicator	Target
Number of households assisted with livelihood support	550,000

SO4 Provide logistical support, including transport of personnel and goods, accommodation for aid workers and storage of assets in deep field locations to enable the humanitarian response.

Indicator	Target
Number of passengers served (humanitarian air operations)	25,000

The strategy to achieve these objectives will be three-fold: 1) addressing immediate life-saving needs; 2) securing country-wide operations for the year by ensuring a steady supply of relief goods through the core humanitarian pipelines and pre-positioning goods wherever security and access conditions permit; 3) taking every opportunity to improve food security, including by providing integrated livelihoods support. The overall aim is to prevent a long-term deterioration of the situation, including the risk of famine in 2015.

Humanitarian partners will establish mechanisms which enable rapid adjustments of the aid operation to different contexts and scenarios, minimising risks of attacks to aid workers and looting of relief stocks, and keeping the cost of transporting stocks within manageable margins. This will require different strategies such as light and mobile operations in volatile areas and a revised approach to pre-positioning, to include strong risk assessment and mitigation analysis.

Given the dramatic change in context since 15 December 2013, the Crisis Response Plan is replacing the South Sudan Strategic Response Plan 2014-2016 (SRP) as the overarching framework for humanitarian action in South Sudan up to June 2014. Aid organizations are currently focusing on the immediate need to save lives, alleviate suffering and protect livelihoods to prevent a further deterioration in food security. At mid-year, and if the situation

stabilizes, partners will revisit the elements of the SRP which are currently not possible to implement, including much of the focus on bolstering disaster preparedness and national capacity deliver basic services.

Assisting people worst affected by crisis

In light of the large-scale and deteriorating needs, the humanitarian community will focus on South Sudan's most vulnerable communities out of the high number of people at risk. This includes assisting at least 500,000 of the one million people expected to have been displaced by June 2014. It is not foreseen that all the people anticipated to be displaced will need assistance, or will need the full range of assistance, due to community coping mechanisms and the fluid nature of displacement. Assistance will prioritize those displaced communities who have not been absorbed by host communities, and who are congregating in rural areas, or inside UN bases. Aid will also be provided to the host communities receiving those displaced, including by bolstering basic services such as clean water, sanitation, healthcare and schooling. Out of the 7 million people at risk of food insecurity in 2014, aid agencies will aim to assist around 3.2 million people, including people in IPC acute or emergency phases.

Finally, humanitarian organizations will continue to respond to the needs of up to 236,000 refugees from neighbouring countries estimated to be living in South Sudan by June 2014, and South Sudanese returnees who have recently arrived back in the country from Sudan.

Within these parameters, each cluster has identified the number of people to be assisted by June. Though all clusters have included the 500,000 displaced people estimated to need assistance in their plans, the share of the general population to be assisted varies between clusters, depending on people's specific needs and cluster strategies. Targeting criteria within the overall analysis of vulnerable populations – has been based on a combination of vulnerability, access, and capacity to scale up.

Clusters have followed a rigorous prioritization process focusing on partners whose activities are most closely aligned to the strategic objectives of the CRP, are operational in the conflict affected states, and who have the capacity to deliver and scale up where needed.

Category of people to be assisted	Number
Displaced people	Varies by cluster (within the overall target of at least 500,000 displaced people to be assisted ⁷)
Refugees by June 2014	236,000
Returnees by June 2014	10,000
General population (including Abyei-affected)	Varies by cluster within the 3.2 million of the general population in acute and emergency food insecurity

The Government of South Sudan has also mobilized relief, and local authorities work closely with aid agencies in tracking population movements and assessing needs.

Reaching more people while keeping staff safe

Aid agencies have assisted over 300,000 of the around 740,000 people internally displaced since the start of the crisis. To reach more people, an access strategy is in place to expand operations while keeping aid workers safe. The strategy aims to improve humanitarian access by building trust and accountable relationships with conflict parties who hold power to unblock identified constraints.

In January 2014, the Humanitarian Country Team (HCT) adopted a set of ground rules to guide the humanitarian response, and serve as a basis for humanitarian negotiations with all conflict parties. The ground rules reiterate the commitment of the HCT to provide life-saving humanitarian assistance to all conflict-affected civilians in line with the principles of neutrality, impartiality and operational independence. They will seek to ensure that humanitarian workers, assets and premises are respected and protected, in the interests of those in need. Under the leadership

⁷ Partners assume that up to one million people will be internally displaced within South Sudan by June 2014. Not all displaced are thought to need assistance (due to established coping mechanisms) and access constraints as well as the mobility of displaced mean that partners will look to assisting at least 50 per cent (500,000 displaced) of the one million. The exact number may vary from cluster to cluster.

of the Humanitarian Coordinator, OCHA and other humanitarian actors have already begun to engage with stakeholders at all levels, especially on the ground where assistance is delivered, to promote adherence to the ground rules, and hold duty-bearers accountable for removing any constraints placed on humanitarian access.

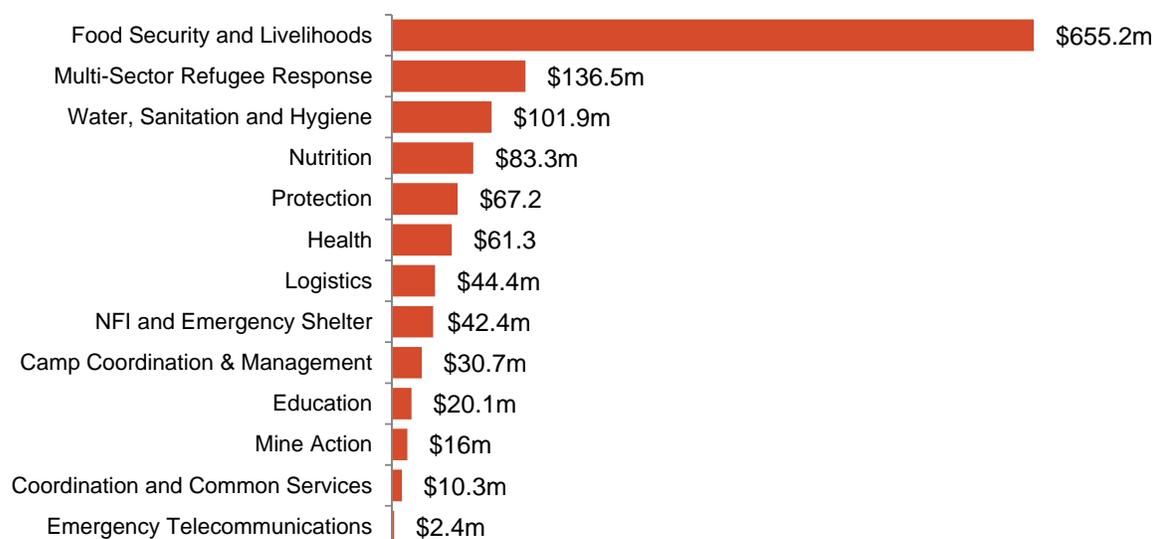
Concrete steps to ensure that the ground rules are implemented will include: i) identifying gaps in current power analysis and identifying which members of the humanitarian community will, at a tactical level, establish contact with stakeholders not yet reached; ii) ensuring balanced engagement by the humanitarian community with all conflict parties and relevant stakeholders from Government, opposition and other groups with power to facilitate humanitarian access; iii) sensitizing all conflict parties and other relevant stakeholders on the ground rules and principles contained within them, iv) building trust and strengthen the humanitarian community's ability to hold all conflict parties accountable for adherence to the ground rules, and v) monitoring and reporting to the HCT on adherence to the rules.

Securing sufficient funding early

Effective pre-positioning of aid supplies is key to the humanitarian community's ability to deliver assistance to people in need throughout the year. The window for pre-positioning is short, with the first rains starting in March and the rainy season properly underway by June. Funding is needed in the first months of the year to allow procurement and transport of all supplies needed for the whole year, to avoid ruptures in the aid response. The requirement of \$1.27 billion comprises funds needed to secure all the pipelines for the whole year. The pipelines represent 58 per cent of the total financial requirements, at \$741 million (an increase by 72 per cent vis-à-vis original 2014 requirements) due to: the need to replenish already pre-positioned supplies that have been looted (particularly for food and non-food items); increased needs to be covered through the pipelines due to the higher number of people displaced and different needs of those displaced; and the need to boost livelihoods in light of increasing food insecurity later in the year, to mitigate against longer-term damage. Furthermore, agencies are reviewing their pre-positioning strategies which may include consolidation of supplies in a smaller number of hubs in more secure areas but which will also incur additional transportation costs, especially for air assets, or in some cases pre-positioning in insecure areas but with additional security measures in place.

While the increase in the pipeline needs represents the largest proportion of the requirements, support to front-line services in conflict-affected states, where access is possible and presence can be scaled up, as well as to projects that ensure that services elsewhere in the country are maintained represent 35 per cent of the total requirements, at \$443 million. The deteriorated security and physical environment; significant destruction of humanitarian assets in towns such as Bentiu, Bor and Malakal; a higher reliance on international staff due to security concerns for national staff; and higher logistical and operating costs (including the need for additional air assets), have also led to higher requirements than originally foreseen. At \$88 million, the cost for logistics and common services represent 7 per cent of the total requirements.

Funding requirements by cluster until June 2014



COORDINATION ARCHITECTURE

The Humanitarian Country Team, which brings together NGOs, UN agencies, and donors, is responsible for setting out the strategy of the joint humanitarian response, and for taking policy decisions on the direction of the humanitarian operation.

The Inter-Cluster Working Group is responsible for enacting the strategy set out by the HCT, ensuring effective coordination between clusters, including on cross-cutting issues such as mainstreaming protection, gender considerations (including the collection of age and sex disaggregated data), and the prevention of and response to gender-based violence in the response and minimizing the environmental impact of operations. The Inter-Cluster Working Group is responsible for advising the HCT on operational matters. Cluster leads and co-leads are responsible for coordinating the operations of their cluster members. OCHA supports the HCT and the ICWG.

Coordination with the Government of South Sudan, including the Ministry of Gender, Child, Social Welfare, Humanitarian Affairs and Disaster Management, and the Relief and Rehabilitation Commission, is done at the national and state levels. Aid agencies are also coordinating closely with UNMISS in accordance with agreed guidelines, including on issues on protection of civilians, occupation of schools and on the humanitarian response to displaced people within PoC areas in UNMISS bases.

CLUSTER STRATEGIES AND COST



Camp Coordination and Camp Management (CCCM)

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Needs

Since the start of the crisis, people displaced have sought safety and shelter in open areas, UNMISS bases and collective centres. There is a need to ensure that assistance provided to these communities in displacement sites is well coordinated, that sites are structured in a way that allows provision of adequate services and protection, and that the aid response is closely monitored and incorporates cross-cutting issues.

\$30.7m
funding requirement

People affected and targeted

In addition to the one million people at risk of being displaced by the conflict, another 62,500 people are anticipated to be displaced due to flooding and inter-communal violence during the same period. Based on current trends and settlements of displaced people, the cluster assumes that: up to 6 per cent of the displaced population may settle in Protection of Civilians (PoC) sites inside UN peacekeeping bases; 5 per cent in collective centers, including school buildings, churches; and 50 per cent in spontaneous settlements with limited community support. The remaining 39 per cent will reside with relatives and host families. The cluster will aim to assist the estimated 61 per cent likely to settle in UNMISS bases, spontaneous settlements and collective centres, which comes to up to 650,000 people.

People in need ⁸			People targeted		
Female	Male	Total	Female	Male	Total
540,800	499,200	1,062,500	338,000	312,000	650,000

Strategy to respond to needs

The CCCM Cluster will aim to: establish and maintain effective camp management and monitoring structures; coordinate the delivery of humanitarian assistance while ensuring that protection concerns are taken into account; and advocate with aid organizations and other stakeholders to address the various needs of boys, girls, women and men. The cluster will also ensure that appropriate preparedness measures are in place in case more people become displaced.

Displaced people currently rely heavily on humanitarian assistance and have limited coping mechanisms. Working with other clusters and local authorities, the CCCM Cluster will support sustainable livelihoods initiatives to strengthen coping mechanisms and increase resilience to shocks. These programmes will also target host communities, whose needs have been compounded by having to share already limited resources with those displaced.

As some of the settlements are situated along river banks and other places prone to flooding, the cluster is working with local authorities and other technical partners to identify suitable sites where people who remain displaced into the rainy season can settle. This is part of the cluster's contingency plan.

To boost capacity to deliver services, the cluster is identifying organizations with site management capacity in all seven priority states. Internal displacement registration, tracking and monitoring is being rolled out throughout the country. The cluster is part of the inter-cluster site planning technical working group, and will support the establishment of humanitarian hubs in areas of displacement to provide aid workers with secure working and accommodation facilities in deep-field locations.

⁸ The breakdown of men and women is based on 2008 census data for all the clusters.

The cluster will continue to provide policy and strategic guidance on issues in relation to modalities of assistance in open site settings as well as in PoC areas in UNMISS bases, seeing encampment as a last resort option only. With regard to displacement sites within UNMISS bases, the cluster and UNMISS have clarified their respective roles and responsibilities. This may include the provision of force protection in support of aid workers providing humanitarian assistance as the need arises, in line with agreed guidelines.

To strengthen the overall response, a priority for the cluster is to build capacity among camp management partners and other stakeholders, including on camp management principles and good practice.

Cluster objectives and key outputs

- CO1:** Camp coordination and camp management structures in place to facilitate the effective and targeted delivery and monitoring of services to displaced people in displacement sites, and provision of durable solutions when possible⁹
- CO2:** Displaced person registration and profiling carried out in displacement sites, as needed, to facilitate site management, and the delivery of immediate humanitarian services and emergency response in IDP sites
- CO3:** Humanitarian partners, community leaders and other stakeholders involved in the humanitarian response have improved knowledge of camp management concepts and practices
- CO4:** Establish humanitarian hubs at key displacement locations affected by the crisis, including Bentiu, Malakal and Bor

Expected Output	Target
Percentage of displacement sites with established CCCM mechanisms	100%
Percentage of displacement sites where displaced people have access to basic services	100%
Percentage of displacement sites that regularly collect demographic information disaggregated by sex and age to an agreed reporting cycle	100%

⁹ UNMISS POC areas, spontaneous sites and collective sites.

Coordination and Common Services

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Needs

The humanitarian operation in South Sudan was already one of the largest in the world, with multiple crises affecting vulnerable communities in all ten states. The current crisis has further worsened the humanitarian situation. To ensure that aid organizations are able to effectively help people in need as the crisis unfolds, strong coordination is key. One million people are expected to be internally displaced by June; some 7 million people are identified as being at some risk of food insecurity with some 3.7 million people in acute and emergency food insecure categories; and some 236,000 refugees expected to be in the country by June 2014. Aid workers face an extremely challenging safety and security environment for - particularly in states affected by the conflict such as Jonglei, Unity and Upper Nile – where humanitarian actors often face constraints on their ability to operate freely and access communities in need. Furthermore, national capacity to provide basic services and respond to emergencies is severely challenged.

\$10.3m
funding requirement

Strategy to respond to needs

The cluster will ensure robust and strategic coordination through the humanitarian architecture of the HCT, Inter-Cluster Working Group (ICWG) and clusters. Coordination with Government counterparts will be strengthened to ensure the provision of humanitarian assistance based on assessed needs. Changes in the situation have already resulted in corresponding changes in the coordination architecture supporting the response. For example, the Camp Coordination and Camp Management (CCCM) Cluster was immediately activated to respond to the significant internal displacement. The cluster will also provide reliable, timely and where possible disaggregated information and analysis on trends relating to humanitarian assistance during the crisis. Strengthening emergency preparedness and response is another priority, including providing up-to-date data on needs, assessments and gaps in the response.

To facilitate a timely and flexible response to the crisis, the cluster will also coordinate humanitarian financing, including coordination with rapid funding mechanisms of key donors. The South Sudan CHF will ensure that pooled funding is directed towards priority needs of the crisis in a timely manner and that coordination is strengthened by supporting projects which contribute to the agreed objectives and strategies. Finally, the cluster will facilitate access for humanitarian partners.

The cluster will provide timely and accurate data on access constraints and a strong evidence base will underpin advocacy with all parties - particularly important in light of the number of incidents relating to interference in humanitarian action. The UN Department of Safety and Security and the NGO Secretariat will continue to contribute to an enabling operating environment.

Cluster objectives and key outputs

- CO1:** Strengthen coordination to support delivery of humanitarian aid
- CO2:** Support contingency planning, emergency preparedness and rapid response
- CO3:** Facilitate safe, secure and timely access to people in need

Expected Output	Target
Humanitarian coordination system functioning at national and state level	Coordination functional in all 10 states and capacity boosted in conflict- affected states
Percentage of supplies prepositioned on time over overall target	85%
Percentage of humanitarian incidents assessed by OCHA/partners within one week of incident report.	75%

Needs

The current wave of violence and displacement has aggravated an already difficult education situation, with low rates of enrolment, limited participation by girls in schooling and poor school infrastructure. The crisis has created an additional access challenge for state institutions to effectively prepare for and respond to critical education needs of the communities most affected by the conflict. There is now an urgent need to prevent a generation of children from losing the coming academic year, which starts in February. Education in Emergencies and development actors will need to work together to address issues affecting children and youths in emergency situations, as well as those in stable areas to maintain education gains made over the last three years.



Rapid needs assessments in Juba, Awerial County of Lakes State and Twic County of Warrap State have indicated that around 63,500 children – half of them girls – have been displaced and need emergency education services. This number is set to increase when assessments in other affected areas have been completed. Public buildings including schools are being used as shelter by affected communities. 19 schools in seven states are reportedly occupied by displaced people and armed forces and advocacy is required for these schools to be vacated. There is also a need for emergency education programmes to adopt a conflict-sensitive approach that meaningfully engages members of displaced and host communities. Such an approach will need to be tailored to local contexts to promote integration and peaceful coexistence of communities, both today and in the longer-term.

People in need and targeted

The cluster will target over 204,000 pre-school and school-age children, youths, teachers and other education personnel affected by the conflict between January and June, out of 453,000 people in need. Activities will target the most vulnerable affected children and youths residing in displacement sites and host communities in rural and urban areas. Cluster partners will work together with development partners to support the Ministry of Education, Science and Technology (MoEST) to disseminate information regarding the resumption of formal schooling and learning activities in areas where this is relevant. Specifically partners will assist in providing public service announcements to welcome students to return to their schools in safe areas. The resumption of formal schooling will allow the cluster to focus on those most in need of education in emergencies.

Category	People in need			People targeted		
	Female	Male	Total	Female	Male	Total
Refugees ¹⁰	51,802	56,118	107,920	25,901	28,059	53,960
IDPs	78,039	85,903	163,943	39,169	42,803	81,972
Returnees	9,664	10,636	20,300	4,850	5,300	10,150
Abyei affected	23,195	25,525	48,720	11,640	12,720	24,360
Host community	53,379	58,798	112,178	16,081	17,573	33,654
Total	216,080	236,981	453,061	97,641	106,455	204,096

¹⁰ Refugees within South Sudan originating from different countries (e.g. Sudan and CAR) will be provided with emergency supplies only.

Strategy to address needs

The overarching goal of Education Cluster is to provide access to safe, inclusive, protective and quality education, including recreation, life skills and psychosocial support in areas affected by or highly vulnerable to emergencies. Education builds community resilience, mitigates the psychosocial impact of conflict and disasters, and provides essential building blocks for future economic stability. This is particularly pertinent in the current crisis: without support to cope with acute distress, the impact of this emergency is likely to reverberate for generations to come. Education also saves lives by protecting against exploitation and harm, and providing the knowledge and skills to survive a crisis through the dissemination of lifesaving messages. In light of this, the Education Cluster will aim to implement the following activities:

- Cluster partners, including state and county education authorities, will establish or lightly rehabilitate emergency learning spaces for children including pre-schoolers and youths. These spaces also require provision of water, sanitation, health, nutrition, psychosocial and protection services.
- Emergency teaching and learning materials will be distributed and pre-positioned with partners.
- Cluster partners will conduct awareness raising activities on key lifesaving messages, including WASH, child protection, child marriage, girls' education, education of children with disabilities, GBV, HIV, and the environment. The awareness campaigns will also include life skills and peacebuilding messages involving children, youths and members of communities.
- Emergency training for teachers, PTA members and other education personnel to support emergency learning activities for affected learners in displacement sites and host communities.
- Joint advocacy with key stakeholders on the vacation (and prevention of non-education use) of school premises to ensure both host and displaced learners continue to access education services.

The cluster's response will be in line with South Sudan's INEE Minimum Standards for Education to ensure the quality of activities. Partners will link emergency responses with ongoing development programmes to ensure sustainability. Current pre-positioning of education supplies ahead of the rainy season will be enhanced by identifying strategic locations to respond quickly to immediate education needs of people displaced, specifically in Abyei and including refugees. Under the leadership of its Government counterparts, the cluster will continue to monitor and advocate against school occupation by armed forces, displaced communities, returnees, refugees and other actors in close collaboration with other clusters and UNMISS.

Cluster objectives and key outputs

- CO1:** In partnership with communities and local authorities, establish or rehabilitate inclusive, safe and protective emergency learning spaces for children and youth affected by or highly vulnerable to emergencies
- CO2:** Provide children and youth with basic learning supplies necessary for safe, inclusive, protective and quality education, including recreation, life skills and psychosocial support
- CO3:** Provide children youth and communities with life-skills, psychosocial support through emergency training for education actors and life-saving messages in areas affected by or highly vulnerable to emergencies

Expected Output	Target
Emergency learning spaces are established or rehabilitated	2,019
Girls, boys, women and men access inclusive, safe and protective emergency learning spaces	147,916 children (76,916 boys, 71,000 girls) 2,219 education actors (1,479 men, 740 women)
Emergency teaching and learning supplies distributed to partners (including local authorities) in areas affected by or highly vulnerable to emergencies	201,876 children (104,976 boys, 96,900 girls)
Education actors ¹¹ are trained in life skills and psychosocial support	2,219 education actors (1,479 male, 740 female)
Awareness campaigns on Education in Emergencies and life skills/lifesaving messages are conducted	200,000 children (100,000 boys, 100,000 girls) 100,000 adults (50,000 men and 50,000 women)

¹¹ Education actors include: teachers; volunteers; School Management Committee and Parent-Teacher Association members; school administrators; and relevant Government officials.



Emergency Telecommunications

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Needs

Emergency telecommunications equipment and structures in several locations, including Bentiu, Bor and Malakal have been badly damaged in the crisis, with assets looted or destroyed in fighting and some staff displaced or relocated from key operational hubs. In these areas, there is a need to restore services to pre-crisis levels. As the humanitarian response scales up, including in remote areas, needs for connectivity and other communications services will expand.

\$2.4m
funding requirement

Strategy to respond to needs

The cluster will security telecommunications services in areas that have been affected by the conflict, and will provide emergency data connectivity to partners in eight major operational hubs by deploying mobile data solutions. These data solutions will be powered through sustainable solar solutions, taking into account the lack of fuel in deep-field locations. The cluster will also work to integrate radio communications with data networks in deep-field coordination hubs to help monitor security incidents and allow for informed decisions and actions. Trainings will be provided to partners on emergency preparedness to increase capacity to respond to emergencies and maintain data and communications systems.

To mitigate against risks of looting and destruction of assets, and given that the conflict has compelled humanitarian partners in Bentiu, Bor and Malakal to relocate to UNMISS bases, the cluster will move emergency security telecommunications infrastructure to the UNMISS compounds in these towns. To enable a flexible humanitarian response, portable mobile data connectivity kits which can easily be transported between sites will be used in deep-field locations. A pool of trained mobile technicians will be made available in Juba to be deployed at short notice to operational areas which need ETC support.

To ensure stable support to partners in the field, the cluster will: invest in trainings of partners, maintain contingency stocks for at least three sites for quick deployment; and implement a sustainable cost-recovery system to meet the recurring and capital replacement costs over a longer period.

Cluster objectives and key outputs

- CO 1:** Provide sustainable telecommunications security, data and voice communication services through pooling optimization, and coordination of existing resources
- CO 2:** Deploy experienced technical teams to establish and maintain the installed systems
- CO 3:** Provide data connectivity, basic security telecommunications and ensure their 24/7 continuity in terms of electrical power

Expected Output	Target
Percentage of emergency areas covered	80%
Number of data connectivity kits positioned in response locations	8



Needs

The past six weeks of conflict have drastically impacted on food insecurity in the country. An Integrated Phase Classification (IPC) was completed on the eve of the crisis in mid-December, forming a solid pre-crisis baseline. Food and livelihoods partners revised the IPC in mid-January 2014 to estimate the effects of the crisis on people's livelihoods and food security status.¹³ The new analysis estimates that 3.7 million people are now at high risk of food insecurity, including 3.2 million people in emergency and acute IPC phases and 500,000 internally displaced people. Across the country, up to 7 million people are at some risk of food insecurity. Of the 3.7 million people at most imminent risk, some 2.5 million people are located in Unity, Upper Nile and Jonglei states. These figures compare to a pre-crisis estimate of 1 million people in the acute phase for the whole country, and none in the emergency phase.



Increasing access to food for people affected by displacement and food insecure households across the country is vital to combating malnutrition, disease and destitution. The current crisis has increased insecurity along commercial supply corridors, caused private sector actors to leave the country, and increased market fragmentation, food and fuel price inflation, risks of cattle raiding, limitations on mobility for migration related to livelihoods, and displacement. In addition, the crisis has directly affected the institutional capacity of food and livelihoods members and state institutions, as office, warehouses, vehicles and accommodation have been looted. The livestock disease control system has also been partially destroyed.

People affected and targeted¹⁴

Based on existing capacities, the cluster will aim to assist up to 3.2 million out of the 3.7 million most vulnerable people by June 2014, including by:

- Providing food assistance to those estimated in emergency phase, 1.1 million, as well as 500,000 displaced people.
- Supporting up to 3.2 million people - or 550,000 households¹⁵ - in displaced and most food insecure communities with new emergency livelihood assistance, protecting agricultural, livestock and fisheries production. In particular, most households will receive light and fast transportation kits with vegetable seeds and fishing gear.

While this represents a six-month operational response framework, given the nature of the drivers of food security, the seasonality of food insecurity in South Sudan, and humanitarian access constraints, operational planning for the cluster extends to a one year timeframe.

People in need			People targeted		
Female	Male	Total	Female	Male	Total
1,924,000	1,776,000	3,700,000	1,664,000	1,736,000	3,200,000

¹² 16 per cent of the pipeline supports the refugee response in-country.

¹³ The new IPC is based on a set of assumptions including patterns of displacement, deterioration of the food security status, food deficits based on the 2013/2014 CFSAM, and market access adjustments.

¹⁴ This plan is based on the revised IPC, considered to be valid until March 2014. Revisions will be undertaken as ongoing assessment results are made available, including after the results of the Food Security Monitoring Survey to be conducted in February/March 2014 are out and an effective beneficiary registration has been conducted.

¹⁵ 100% of the people in IPC emergency phase, 80% in acute and 15% in stressed including a significant portion of IDPs.

Strategy to respond to needs

The overarching priority for the cluster is to ensure and protect immediate access to food and prevent the collapse of livelihoods among the most vulnerable households, such as those headed by women or children. The cluster will also help crisis-affected communities to rebound as quickly as possible while protecting livelihood systems in areas that are indirectly affected by the crisis. A high percentage of people in acute and emergency food insecurity require multi-faceted support and will be assisted in collaboration with other clusters. Given the current security situation and a three-fold increase in people at risk of food insecurity since the start of the crisis, the cluster has developed the following strategy to provide assistance to up to 3.2 million people. The cluster will:

- Advocate with partners to surge staff to support scaled-up operations and identify new potential partners;
- Promote joint programming to combine emergency livelihood kits distribution with food and multi-sector emergency assistance;
- Activate an extremely flexible response approach, with the use of rapid assessment/delivery teams in insecure hotspots with limited or time-bound access;
- Maximize procurement of food and vegetable and crop production assistance through local producers;
- Partner with state institutions for joint operations in areas of government control;
- Advocate for the identification of counterparts in areas not in government control with high food insecurity and limited access. This includes the possible operational reliance on air assets.
- Implement strategies on nutrition, health ,HIV and other special needs, supported by gender-disaggregated data.

Partners will provide food assistance for 1.6 million people. This will include general food distributions for displaced people and blanket nutrition programmes for vulnerable children and pregnant and lactating women. The cluster is planning assessments to review the viability of implementing market-based assistance modalities.

The cluster will support the threatened livelihoods of 550,000 households – or 3.2 million people – by providing light emergency livelihood kits (vegetable seeds and fishing gear), delivering livestock disease protection and outbreak prevention (including by distributing animal diseases treatment and vaccination kits to community animal health workers and enhancing the cold chain capacity to store vaccines), and promoting rapid maturing crops. Support to food production will also be pursued to prevent further decline in overall food availability. In high HIV prevalence areas, food support will be provided to networks of people living with HIV to help avert morbidity and mortality.

The main strategy for supporting the food security of flood-affected people will be to ensure immediate access to food and to provide fishing equipment during the dry season as well as means to preserve their catch. Food for assets activities will include water harvesting schemes and small-scale flood prevention schemes. Vouchers for vulnerable households to purchase relief items will be implemented to the extent possible. To mitigate disease risks and reduce mortality among livestock, expanded efforts are required to identify and support community-based animal health workers in flood-risk areas, supply the necessary kits to prevent and control outbreaks of diseases, and ensure that the vaccine cold chain is reestablished and enhanced where possible. Lastly, flood recession agriculture is important for providing food sources in the transition from wet to dry seasons. Partners will distribute supplies for recession agriculture before the rains cut off access. Pre-positioning of stocks and transportation capacity will be a pre-condition for effective coverage. Unfortunately, the current security situation means that there is limited access to most of the locations and facilities where pre-positioning hubs are normally located, meaning that humanitarian deliveries will require the support of armed escorts, in line with agreed guidelines, or escalating costs due to elevated risk for transporters. If insecurity remains widespread, there will be a dramatic increase in costs due to a greater reliance on air transport – which is already anticipated given the nature of the rainy season.

Cluster objectives and key outputs

CO1: Enhance access to food to meet the immediate needs of people affected by crisis

CO2: Help communities rebound from crisis by enhancing access to livelihoods resources

Expected Output	Target
Number of people assisted with food and conditional/unconditional cash transfer	1,600,000 people
Number of households assisted with livelihoods support	550,000 households

Needs

With the ongoing crisis in South Sudan, access to essential primary health care services and facilities for surgical treatment has been severely curtailed due to insecurity, large-scale displacement, destruction or closure of facilities, and displacement or relocation of health workers. Over 60 per cent of health facilities in areas affected by the conflict are reportedly closed, or operating at limited capacity. The three major referral hospitals in Bentiu, Bor and Malakal are not operational. The most common health conditions among displaced communities are respiratory tract infections, malaria and acute watery diarrhea. Malnutrition among children has been reported across all displacement sites.



Trauma cases due to gunshot wounds have risen sharply since the start of the crisis. Nearly 5,000 people have been treated for gunshot wounds. Many more are believed to have been wounded, including some who may have received treatment in rural health facilities and others who have not received care. Providing reproductive health services are a challenge in most camps hosting people displaced. Though services are available for displaced women in Juba, there are still major gaps in other sites.

The displaced people living in open areas or inside UN bases are at high risk of contracting communicable diseases due to poor sanitation, shortage of water, crowded living conditions, malnutrition, and poor immunity. Cholera prevention, mitigation measures – including vaccination activities will be undertaken. Young children and pregnant women are particularly vulnerable. Measles outbreaks have been confirmed in several sites, and could spread to host communities. Polio also remains a major concern in South Sudan, as cases have been reported in the recent past in some of the neighboring countries including Kenya and Somalia. Malaria is endemic in the country, and most displaced people are particularly exposed to the disease. Among all infections of the upper or lower respiratory system, a major concern is acute lower respiratory tract infection (ALRI) in children under five. Gender-based violence is also aggravated by the crisis and survivors require appropriate medical services, including clinical management of rape and referral pathways for care and support.

Given the heightened risks and vulnerabilities associated with violence and displacement, it is vital that HIV prevention activities continue and that supplies for anti-retroviral treatment and Post-Exposure Prophylaxis are pre-positioned in displacement sites. The closure of hospitals and displacement of people on HIV treatment have serious consequences, including development of drug resistance, morbidity and mortality of people living with HIV.

There is a major disruption in the medicine supply chain in the country, including supplies for treatment of trauma, obstetric care, and infectious diseases. Supplies for primary health care are limited and the Ministry of Health is anticipated to face a stock-out of all essential drugs. There is an urgent need for health partners to mobilize additional emergency drugs stocks and vaccines to fill the expected gap.

People affected and targeted

Out of 4.2 million people at heightened risk, the cluster will target 1,908,000 people to be assisted in the coming five months, including an estimated 500,000 displaced people. Approximately 477,000 of the people assisted will be women of reproductive age. 15,000 trauma cases will access some form of surgical. Based on pre-crisis birthrates, there will be a projected number of 76,320 births during this period. Some 897,000 children under 15 years will benefit from vaccination campaigns. Of this number, nearly 363,000 children under five will receive vitamin A supplementation and de-worming in addition to vaccination campaigns.

Category	People in need			People targeted		
	Male	Female	Total	Male	Female	Total
Host community	1,632,000	1,568,000	3,200,000	718,080	689,920	1,408,000
Displaced persons	510,000	490,000	1,000,000	255,000	245,000	500,000
Total	2,142,000	2,058,000	4,200,000	973,080	934,920	1,908,000

Strategy to respond to needs

The health cluster partners will deliver critically needed services including emergency primary health care services, trauma management and referral, minimum initial service package (MISP), and mass vaccination campaigns (including against measles and polio) alongside supplemental immunization activities (SIAs). Mechanisms to follow up on patients on HIV and TB treatment and ensuring that treatment continues will be instituted within primary health care services.

There are currently 25-30 health organizations responding to the crisis. Currently health partners operating in the four states directly affected by the ongoing crisis have evacuated most of their key staff. Hence, the cluster is currently relying heavily on volunteers among people displaced, UNMISS medical teams and some Ministry of Health staff. Some partners have, however, already started scaling up to locations where access is possible. However, as Ministry of Health capacity is likely to remain limited, the capacity of national NGOs needs to be strengthened to enable them to be actively engaged in service delivery.

As the health cluster is currently constrained by a lack of air assets to conduct medical evacuations of patients who require emergency surgery, the cluster plans to have a dedicated air asset to ensure timely referrals to the appropriate level of care.

Pre-positioning of essential emergency supplies will be done to areas that are likely to be cut off during the rainy season and adequate training given to health service providers to continue the services delivery during the wet season. As the Ministry of Health supply chain is disrupted, partners will be encouraged to make provisions for buffer stocks to avoid ruptures.

Cluster objectives and key outputs

CO 1: Provide emergency primary health care services for vulnerable people with limited or no access to health services

CO 2: Provide emergency response capacity for surgeries, including emergency obstetric care

CO 3: Respond to health-related emergencies, including controlling the spread of communicable diseases, transmittable diseases such as HIV, reproductive health care and medical services to survivors of gender-based violence, including mainstreaming of gender and protection into health response activities.

Expected Output	Target
Number of outpatient consultations	1,172,000
Proportion of communicable diseases detected and responded to within 48 hours	90%
Number of measles vaccinations given to children aged 6months to 15 years in IDP setting	858,600
Number of direct beneficiaries from emergency drugs supplies (IEHK/trauma/RH kits etc)	1,237,000

Needs

South Sudan is one of the most physically challenging and costly operating environments globally. Only 300 kilometres of the 90,200 kilometres of roads across the country are sealed with tarmac, making South Sudan one of the least developed road networked countries in the world. On top of that, 60 per cent of all roads are inaccessible during the rainy season, which runs from about June to December.

\$44.4m
funding requirement

This makes delivery of aid a costly exercise, with relief organizations often reliant on expensive air assets for delivering lifesaving assistance. Insecurity further compounds an already challenging operating environment, with violence regularly restricting aid organizations' ability to reach communities in crisis. With regard to warehousing of aid supplies, there are extremely limited - or in many locations non-existent - commercial storage options available. Ensuring that large amounts of valuable humanitarian supplies are safe and accessible when needed during an emergency is difficult due to significant security concerns.

Strategy to respond to needs

The Logistics Cluster will provide logistic coordination, support and advisory services to the humanitarian community carrying out the emergency response, and provide complimentary transport services to humanitarian partners to address emergency needs. The cluster will provide efficient and timely logistics services to support the delivery of humanitarian assistance. It will assist in transporting humanitarian cargo by air, road and river in response to the crisis, free of charge to aid organizations. This will be done in close cooperation and coordination with IOM and WFP. Furthermore, the cluster will facilitate the movement of relief items by air and provide airlift capacity to aid organizations into locations which otherwise inaccessible due to physical or security constraints with WFP Aviation and UNHAS. This will be done by retaining air assets for areas inaccessible by other means.

With regards to warehousing, the Logistics Cluster will provide additional storage in emergency response locations for short-term storage of life-saving supplies, as well as storage of pre-positioned relief items. The cluster will procure eleven additional mobile storage units for locations where current capacity is unavailable or exhausted. Additional surge staff will be deployed to ensure the cluster has the capacity to mount an effective logistics response for effective delivery of humanitarian assistance during the crisis. This will include deploying additional Roving Logistics Officers to work closely with other humanitarian organization including OCHA in order to negotiate access to areas affected by conflict and/or insecurity. To improve physical access, the cluster will work with UNOPS' Emergency Response Unit to carry out spot repairs on roads and rehabilitate airstrips in key humanitarian operational areas. To enhance logistics information-sharing, the cluster will provide geospatial mapping and logistical information products to humanitarian organizations.

Cluster objectives and key outputs

CO1: Provide logistic coordination, support and advisory services to the humanitarian community carrying out the emergency response

CO2: Provide complimentary air, road and river transport services to humanitarian partners to address emergency needs

Expected Output	Target
Number of passengers served;	25,000
Percentage of evacuations successfully responded to	30MT light cargo on regular flights 100%
Number of organizations assisted	35
Number of requests	400 requests
Number of coordination meetings held	20
No. of bulletins, maps and other logistical information produced and shared	50 bulletins, maps and other logistical information produced and shared

Needs

Decades of conflict has left a legacy of landmines and other remnants of war, threatening the security of civilian and aid workers. While much work has been done to demine areas of the country, the continued use of munitions by armed actors during the current crisis has led to new contamination. Even prior to the current conflict, armed groups operating in Jonglei, Unity and Upper Nile states have mined areas in the recent past, imposing additional threats to civilians and access restrictions to aid workers.

\$16m
funding requirement

People affected and targeted

The cluster will target 1.8 million people of the around three million people identified in need in the most high-risk areas of the country.

State	People affected			People targeted		
	Female	Male	Total	Female	Male	Total
Central Equatoria	324,600	332,485	657,085	194,760	199,491	394,251
Jonglei	564,843	578,564	1,143,407	338,906	347,138	686,044
Unity	417,102	427,234	844,337	250,261	256,341	506,602
Upper Nile	173,582	177,799	351,381	104,149	106,679	210,829
Total	1,480,128	1,516,082	2,996,210	888,077	909,649	1,797,726

Strategy to respond to needs

The Mine Action Sub-Cluster will facilitate safe movement for civilians and aid workers through the clearance of landmines and explosive remnants of war. The cluster will provide emergency survey and clearance of roads/areas of unexploded ordnance, impacting humanitarian access in areas where heavy fighting and destruction of ammunition stockpiles has created contamination of explosive remnants. This includes at-risk areas where large concentrations of displaced communities are located, or where they wish to return.

The cluster will also provide emergency survey and clearance services for communities residing and travelling through areas where heavy artillery fighting and ammunition stockpiles has created contamination of explosive remnants of war. This includes clearing markets, roads and areas of high population density.

As of 30 December 2013, 320 suspected or confirmed minefields were recorded by the Mine Action Sub-Cluster. While these minefields were created during the Sudan civil war and do not relate to the current conflict, they prevent the safe use of land for farming and food production. The Sub-Cluster will continue clearing mine-fields and contaminated areas so that they can be used for agriculture, security permitting.

The cluster will maintain logistical and support bases in Bentiu, Bor, Juba, Malakal, Wau and Yei, to enable its partners to operate safely and response efficiently to reported unexploded ordnances.

The cluster will reduce the risk of injury from landmines and explosive remnants of war through mine risk education, and it will collect data and map new hazards and accidents. This all in close collaboration with the Education and Protection clusters.

Cluster objectives and key outputs

CO1: Facilitate safe movement for civilians and humanitarian actors through clearance of landmines and explosive remnants of war (ERW)

CO2: Reduce the risk of injury from landmines and ERW through mine risk education

Expected Output	Target
Kilometres of routes suspected of being mined surveyed, cleared and/or verified.	360 kilometres
Number of m ² of land cleared	1.2 million m ²
Individuals reached through mine risk education	50,000 persons



Multi-Sector Response to Refugees and Returnees

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Needs

South Sudan currently hosts just over 230,000 refugees. Over 200,000 of these are from Sudan’s Blue Nile and South Kordofan states, and live in Unity and Upper Nile states in South Sudan – two of the hotspot states in the current crisis. Other refugees are hosted in Central Equatoria and Jonglei states, where heavy fighting has also taken place. To meet the immediate needs of this vulnerable group and avoid losing the important gains made in the refugee response in 2012 and 2013, it is vital to continue to provide life-saving assistance and basic services in the different refugee sites.

\$136.5m
funding requirement

In addition, over 98,000 South Sudanese returnees arrived home from Sudan in 2013, the lowest number of arrivals since returns began in large numbers in 2007. Partners anticipate that the pace of returns will continue to slow down, especially with the current insecurity in South Sudan. A priority is to clear and prevent bottlenecks for returnees. In Renk in Upper Nile State, for example, over 9,000 returnees remain stranded in four transit sites. Another 700 returnees are waiting at way stations prior to the outbreak of the crisis. It is essential that the humanitarian community continues to provide services to these vulnerable groups.

People affected and targeted

The sector estimates that between January and June, 250,000 people will need assistance. This will include approximately 10,000 returnees who may have arrived in South Sudan, and 236,000 refugees expected to be hosted in the country by June and around 4,000 people affected by violence in Abyei.

People in need			People targeted		
Female	Male	Total	Female	Male	Total
130,000	120,000	250,000	130,000	120,000	250,000

Strategy to respond to needs

Aid agencies will prioritize access to critical humanitarian assistance for refugees and vulnerable host communities, and will provide protection and assistance to refugees and asylum-seekers. Partners will focus on the needs of 200,000 Sudanese refugees in Unity and Upper Nile states, some of whom have been there for over two years and are largely reliant on humanitarian assistance. Partners will focus on providing longer-term assistance to refugee communities, including durable shelter solutions and improved quality education programming.

Multi-Sector partners will ensure that stranded returnees have access to transport assistance and temporary humanitarian assistance. The Emergency Returns Sector does not anticipate a large influx of returnees arriving to South Sudan in the first half of 2014, because of the crisis. However, it is important to highlight that more than 9,000 returnees remain in four transit sites in Renk. Though majority of this caseload did not express willingness to leave Renk at the end of 2013, should insecurities in Upper Nile spread to Renk, these communities will be extremely vulnerable and exposed to armed actions as they reside in camp-like settlements in the area. Assistance to enable this group to move away from armed actions may be necessary, should the security situation deteriorate. Relocating the group to safer areas such as the way stations in Juba, Wau or the transit sites in Aweil will be taken into consideration, should security conditions in these areas remain stable.

The Emergency Returns Sector will ensure that emergency transport mechanisms are in place in the event that the most vulnerable returnees will need transport assistance. Key way stations will be maintained to ensure their ability to accommodate returnees until the security situation allows for onward movement to final destinations.

Returnees have developed coping mechanisms for income generation areas where they reside, including engaging in casual labor and running small businesses. The Emergency Returns Sector will therefore only provide emergency transport assistance as a last resort in the event of a major deterioration of security conditions.

Partners will provide information on returnee communities, the Abyei population and other communities displaced by the current crisis, including information on movement patterns. In order to continue to monitor and provide assistance to returnees in South Sudan, it is essential that the tracking and monitoring mechanism remains in place across the country to ensure that information on returnees is regularly available allowing for the immediate identification of urgent needs and referral to the appropriate clusters for response.

Cluster objectives and key outputs

- CO1:** Ensure that refugees and host communities have access to critical life-saving humanitarian assistance in established settlements
- CO2:** Provide protection and assistance to refugees and asylum-seekers
- CO3:** Ensure that stranded returnees continue to have access to critical life-saving humanitarian assistance

Expected Output	Target
Basic services and sustainable assistance provided to refugees in established settlements	236,000 refugees
Humanitarian services maintained for stranded returnee population and people affected by violence in Abyei	14,000 people assisted
Global acute malnutrition rate	<10%

Needs

Various forms of under-nutrition have been prevalent among vulnerable groups in South Sudan for many years, including among young children, and pregnant and lactating mothers. Levels of global acute malnutrition (GAM) range from 6.9 per cent to 35.6 percent and severe acute malnutrition (SAM) ranges from 1.3 per cent to 7.1 per cent in affected areas. Sub-optimal feeding practices of infants and young children are prevalent in many places with rates of exclusive breastfeeding being as low as 45 per cent before the crisis.¹⁶ The current large-scale displacement is exacerbating the pre-crisis nutrition situation. The disruption of livelihoods means people have reduced access to food, healthcare and other basic services, especially for those who have not been able to seek shelter in UN bases. This contributes to increased vulnerability to acute malnutrition, especially in sites and locations that are perennially endemic to high malnutrition in the eastern part of the country. With the current displacement patterns, there are high chances of compromised infant and young child feeding (e.g. late initiation of breastfeeding to new borns, mixed feeding, poor hygiene, and use of donated powdered milk to feed children), that increase vulnerability to malnutrition. Aggravating factors such as the likely rise in water-borne illnesses and other infections, prevalence of HIV, limited access to safe water and sanitation and high food insecurity also make a deterioration of the nutritional status of the affected population a high possibility.¹⁷ Nutrition data from previous years shows an increasing trend of new admissions for treatment of acute malnutrition that rises from January and peaks in June and July. This coincides with the current planning period and underscores the need for a regular and increasing supply of nutrition stock from now until June.



The rainy season will bring a host of communication and transportation challenges and will adversely affect the situation of vulnerable people. People in Jonglei, Lakes, Unity and Upper Nile states and part of Warrap will be most at risk. At the same time access to essential health and nutrition services has been seriously compromised, with about 70 per cent of health facilities in Bentiu, Bor and Malakal closed or functioning with limited capacity. This makes scaling up access to critical nutrition services to protect the nutrition situation of vulnerable people and prevent excess mortality a key priority.

People affected and targeted

The Nutrition Cluster estimates that 1,619,000 people need nutrition services by June 2014. This group is distributed across the country, with a high concentration in Central Equatoria, Jonglei, Lakes, Unity, Upper Nile and parts of Warrap, where malnutrition prevalency is high and where the recent conflict has had the highest impact.

Beneficiary categories	People in need			People targeted		
	M	F	Total	M	F	Total
SAM (3-4%)	20,079	18,534	38,613	16,063	14,827	30,891
MAM (8-11%)	64,159	59,224	123,383	32,080	29,612	61,692
BSFP (6-59 months)	650,185	600,171	1,250,356	325,093	300,085	625,178
PLW (TSFP)	0	78,185	78,185	0	39,093	39,093
PLW BSFP	0	128,447	128,447	0	64,224	64,224
Total	734,423	884,561	1,618,984	373,236	447,841	821,078

* The targeted population with SAM and MAM is based on 2013 nutrition surveys aggregated results using prevalence rates between 3 and 4% and 8% and 11% respectively across IPC population categories.

** BSFP targeted population makes 44.8% of the total population aged 6-59 months in targeted states

¹⁶ South Sudan Household Health Survey, August 2013.

¹⁷ 3.7 million people are now at immediate risk of food insecurity, Food Security and Livelihoods Cluster, January 2014.

On the basis of partner capacity and accessibility of locations, the cluster plans to deliver life-saving nutrition support to 821,000 people by June 2014. Among the people to be assisted are those displaced by conflict and members of the general population who are vulnerable to malnutrition, including food insecure or previously displaced communities, refugees and returnees. The different categories of vulnerable people will be assisted with management and prevention of acute malnutrition activities as shown in the table below.

Strategy to respond to needs

The Nutrition Cluster aims to manage and prevent acute malnutrition in children under five years, pregnant and lactating women, and other vulnerable groups. Scaling up activities will be done by protecting and promoting optimal infant and young child feeding in emergencies (IYCF-E). The cluster will work with key IYCF-E partners to initiate this in the locations they are covering. Public awareness and promotion of exclusive breastfeeding and support to breastfeeding mothers will be done, targeting people in displacement sites and other affected communities. Blanket supplementary food programmes will target the most nutritionally vulnerable groups (including people living with HIV, where appropriate) during the lean season in locations highly susceptible to malnutrition, especially in areas directly affected by the recent crisis. Implementation of targeted supplementary feeding to moderately malnourished boys and girls 6-59 months and pregnant and lactating women, and management of severe acute malnutrition in boys and girls 0-59 months will be prioritised. As part of the malnutrition prevention strategy the cluster plans to support micronutrient supplementation to pregnant women and boys and girls (6-59 months) to help prevent and control micronutrient deficiencies.

Services to manage acute malnutrition will be scaled up to protect vulnerable communities in locations that are most endemic to malnutrition. Priority locations have been identified in Jonglei (Bor, Pibor, Akobo, Pocailla, Ayod), Lakes (Awerial, Yirol), Unity (Bentiu, Leer, Guit), Upper Nile (Malakal, Fangak, Wau Shiluk, Pariang, Lankien) and Warrap (Abyei, served from Warrap, and Twic). As much as possible, the expansion of treatment and prevention activities will be done through existing nutrition partners. Partners will work with health organizations to integrate treatment of malnutrition into basic primary health services, including for people on chronic medication, for example for TB or HIV. This will enhance geographical coverage of nutrition programmes in the affected locations.

Nutrition education and sensitization of communities will be included alongside other activities. An integrated approach will be adopted that includes a wide range of livelihood activities, to achieve sustainability of nutrition activity outcomes. The people targeted by nutrition programmes will be linked to food security and livelihoods activities, with a view to addressing underlying causes of malnutrition.

Cluster objectives and key outputs

- CO1:** To ensure access to programmes that manage and acute malnutrition to at least 121,675 of vulnerable populations (boys and girls between 0-59 months, pregnant and lactating women)
- CO2:** To ensure access to programmes that prevent malnutrition through promotion and support of optimal infant and young child feeding practices in emergencies and control micronutrient deficiencies in at least 689,402 of vulnerable populations (children aged between 6-59 months)

Expected Output	Target
Severe acute malnutrition in children under five years old managed	30,891 boys and girls 0-59 months
Moderate acute malnutrition among children, pregnant and lactating women managed	61,692 boys and girls 6-59 months 39,093 PLW
Malnutrition among 6-59 months old children, pregnant and lactating women prevented (BSFP)	625,178 boys and girls 64,224 PLW

Needs

The current conflict has been marked by wide-spread abuses against civilians, committed by all parties to the hostilities. There are extensive reports that civilians have been targeted based on their ethnic identity or political affiliation, with displaced people from all communities sharing harrowing accounts of family members being killed or abused, increased levels of gender-based violence against women and girls, and homes destroyed. The re-arming of groups disarmed in the past years, increased proliferation of weapons, splintering of armed forces, and concerns as to command and control structures of all armed groups, give rise to significant protection concerns. The involvement of youth militia groups in the conflict should be seen against a history of inter-communal violence involving these groups, and greatly increases the risk of civilians being targeted. As a result, civilians are and will be exposed to a range of protection threats.

\$67.2m
funding requirement

For civilians sheltering inside UN bases there are specific issues related to the mixed composition of displaced communities, proximity of the protection of civilian (PoC) areas to active fighting, criminality and overcrowding.

The breakdown of services and community structures for displaced people, and pressures placed on host communities, increases the likelihood of further protection threats such as increased sexual and physical violence, and the denial of basic services. There are also risks associated with secondary displacement and occupation of land/homes without consent by persons other than the original inhabitants, and dangers associated with mines and unexploded ordnance.

People affected and targeted

The Protection Cluster will target 1,652,500 people, including 859,600 women and girls, between January and June 2014 with protection assistance. This will include a focus on women and adolescent girls, who are acutely affected by gender-based violence, the broader culture of violence against women caused by an inequitable distribution of resources, exclusion of women from decision-making processes, harmful traditional practices and early marriage. Young men are also considered vulnerable, on the basis that they are of fighting age and are at risk of recruitment into state and opposition armed groups, and at risk of gender-based violence. Due to the current crisis, many children have been separated from their families and continue to experience various forms of violence and psychological distress. Others have been drawn into armed conflict and will require protection, demobilization and appropriate reintegration services.

Beneficiary categories	People in need	People targeted
Internally displaced	1,000,000	500,000
Returnees (new arrivals) ¹⁸	10,000	10,000
Abyei affected ¹⁹	122,500	62,500
Broader community	2,159,000	1,080,000
Total	3,291,500	1,652,500

Strategy to respond to needs

The Protection Cluster strategy will focus on protection monitoring, advocacy and response services to mitigate the effects of the rise in violence and increased protection concerns for displaced people, host communities and returnees.

¹⁸ This figure is from the CAP 2014-2016 and has not been revised. It does not include South Sudanese now seeking refuge in neighbouring countries who may wish to return at a later date. This figure is the indicative planning figure until end of 2014.

¹⁹ This figure is from the CAP 2014-2016 and has not been revised, It doesn't include any new displacements out of/into Abyei

The cluster will also enhance the protection of children, adolescents, women and other vulnerable groups affected by crisis, with an emphasis on identifying separated, unaccompanied or missing children, and family tracing and reunification. The cluster will provide timely, safe and high-quality child and gender-sensitive prevention and response services to survivors of gender-based violence. Protection partners will provide psychosocial well-being of children through community-based support.

The Protection Cluster has established a system of prioritization which identifies a lead operational agency on the issue of general protection, child protection and gender-based violence in key states. Emphasis will remain on reinforcing protection monitoring and analysis to inform specific protection programmes and also protection mainstreaming across clusters.

Advocacy will be another key response, both reinforcing protection mainstreaming where other clusters are operating and also enhancing UNMISS activities. Outreach to international actors will be essential in the coming months, to highlight key protection issues and encourage appropriate response from humanitarian, political and military actors.

The primary focus of the coming months is to support initiatives which mitigate and/or respond to immediate protection of civilian, while appreciating the longer term risks. Within this, the Protection Cluster will support partners who address secondary displacement and housing, land and property threats which can both trigger additional conflict or impede durable solutions.

Cluster objectives and key outputs

- CO1:** Scale up protection monitoring, advocacy and response to mitigate the effects of the rise in violence and increased protection concerns for IDPs, host communities, and migrants
- CO2:** Enhance protection of children, adolescents and other vulnerable groups affected by crisis, with an emphasis on identification of separated, unaccompanied or missing children and family tracing and reunification, as access permits
- CO3:** Provide timely, safe, and high-quality child and gender-sensitive prevention and response services to survivors of GBV
- CO4:** Promote psychosocial well-being of children through community-based support

Expected Output	Target
Undertake field protection monitoring and assessment missions in all affected locations, as access permits, and undertake advocacy/information initiatives, including with protection of civilians actors and other stakeholders to address physical and other protection concerns	100 assessment missions 8 advocacy/information initiatives
Set up appropriate and maintain Family Tracing Referral systems in at least 7 locations, while seeking to identify and reunite or locate interim alternate care arrangements for separated, unaccompanied or missing children. All identified such children are reunited with their families/caregivers or placed in protective alternative care arrangements	Relevant individuals among up to 400,000 people in and around displacement sites
Set up and maintain appropriate GBV prevention strategies, GBV case identification, survivor-centres response, and referral mechanisms in seven locations, while providing safe and secure access for GBV survivors to essential health and case management as access permits.	Relevant individuals among up to 400,000 people in and around displacement sites
Psychosocial well-being of children promoted through access to safe spaces and by association with networks of children, youth and women	Relevant individuals among up to 400,000 people in and around displacement sites



Shelter and Non-Food Items

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Needs

Humanitarian partners estimate that 1 million people will have been displaced by the current conflict in South Sudan by the end of June 2014. Over 740,000 people have already been uprooted from their homes and forced to flee without many possessions, as of the end of January. Many remain reliant on aid organizations for shelter and basic household items like mosquito nets, blankets and kitchen utensils. The lack of shelter and mosquito nets contribute to high rates of malaria and other diseases in sites hosting displaced communities. Widespread violence has also led to significant destruction of homes and property in several key population centres, including Bentiu, Bor, Juba and Malakal. Even before the crisis, only 50 per cent of households in South Sudan owned a blanket or mosquito net.



Inter-communal violence and clashes between state and non-state actors were commonplace in parts of South Sudan prior to the current conflict, and seasonal flooding compounds the need to support people on the move with adequate temporary shelter and household items. South Sudanese returning home from Sudan are also supported with temporary shelter and non-food items under this strategy.

People affected and targeted

Aid agencies estimate that up to 700,000 people affected by the crisis will need emergency shelter and household items between January and June 2014, including those displaced in UN bases, those seeking refuge in other locations, and the most vulnerable host communities. Of these, under the current appeal, 400,000 will be targeted with NFI. 340,000 people from within these groups will also receive acute emergency shelter support.

People in need			People targeted		
Female	Male	Total	Female	Male	Total
364,000	336,000	700,000	208,000	192,000	400,000

Strategy to respond to needs

The Shelter and Non-Food Item (NFI) Cluster will ensure the timely provision of emergency shelter and basic household material for communities displaced in acute emergency situations. Displacement in the current crisis is characterised by a high degree of fluidity and insecurity, and in some situations extremely high density, therefore demanding in the first phase of response only the most basic of shelter provision and durable, essential household items, with which families are able to move.

Taking into account security and access constraints, the cluster expects to target 400,000 people in immediate need in the first half of the year. Basic NFI will reach all of these: acute emergency shelter support will be delivered in addition to 340,000 people. The cluster will encourage the response process to be inter-agency as far as possible to ensure transparency and accountability, as well efficient use of resources.

Emergency shelter solutions will be provided in two phases, and according to the types of settlement of people in need. The first phase, and the major focus of this plan due to resource constraints, will focus on a design that is feasible for the acute emergency response, taking into account key logistics considerations such as the need to airlift supplies. The second phase will supplement that distribution with more durable materials to achieve a shelter capable to endure the rainy season and meet humanitarian standards more closely.

Working with the CCCM and Protection clusters, the Shelter and NFI Cluster will focus its shelter activities on the following categories - protection of civilian sites in UN bases (12 per cent of all people displaced), collective centres (3 per cent of all people displaced), spontaneous sites (35 per cent of all people displaced) and displaced people residing in host communities (50 per cent of all people in need).

The cluster will deliver additional emergency shelter as needed, for people displaced who wish to return home and for the most affected host communities, though this phase is not covered extensively within the parameters of this plan. In these cases, using sustainable locally adapted shelter solutions will be prioritized. As resources among host communities are anticipated to be stretched, the cluster will provide transitional shelter and basic household items to the most vulnerable displaced people living in host communities. A vulnerability level of 10% is estimated. The cluster will seek the guidance of the Protection Cluster to confirm and determine actual vulnerability.

The cluster will also explore potential links with local livelihoods, including cash-for-work and vouchers, as an alternative to the in-kind provision of materials, in cases where it can be cost effective and supportive of local economies.

Cluster objectives and key outputs

CO1: Timely provision of basic NFIs to displaced populations in acute situations.

CO2: Timely and appropriate provision of emergency shelter solutions to displaced people

CO3: Appropriate provision of basic NFI and, if relevant, transitional shelter to the most affected host community

Expected Output	Target
Distribution of basic NFI kits to people in need (displaced people)	400,000
Provision of appropriate emergency shelter solutions to people in need (displaced people)	340,000



Water, Sanitation and Hygiene (WASH)

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Needs

The lack of safe drinking water, inadequate excretal disposal and poor hygiene practices leave a large proportion of South Sudan's population at persistent risk of preventable waterborne diseases. The 2010 Sudan Household Health Survey indicates that less than 23% of people can access safe drinking water (per Sphere standards), with coverage rates of adequate sanitation at just 12.7 per cent. About two thirds of the population has no access to sanitation facilities and only 10.5 per cent treat water to ensure it is safe to drink. These statistics are prior to the current crisis. The recent violence and large-scale displacement to sites and areas without sufficient access to clean water and proper sanitation has greatly increased the vulnerability of people displaced, with these above statistics likely worse for violence affected communities. In sites hosting displaced communities, for example, poor sanitary conditions pose a major public health risk, including potential cholera outbreaks.



People affected and targeted

Water and sanitation activities will target 2.6 million people over the first six months of the year. This includes an estimated 1.8 million people internally displaced by the crisis, refugees, returnees, Abyei displaced and vulnerable host communities. It will also include 825,000 million people identified as chronically in need of WASH support among the general population. Chronically vulnerable populations are targeted via assessments, noting provision of WASH services.

Meeting this demand will be a significant challenge, requiring heavy planning, increased coordination, and massive scale-up in terms of WASH staff, supplies and logistical support. WASH Cluster partners will operate for the next six months within an agreed Strategic Operational Framework, which is currently being developed.

Category	People in need			People targeted		
	Male	Female	Total	Male	Female	Total
Chronically vulnerable communities	858,000	792,000	1,650,000	429,000	396,000	825,000
IPC-Acute (minus 1.65M in chronically Vulnerable)	234,000	216,000	450,000	0	0	0
IDPs	480,000	520,000	1,000,000	240,000	260,000	500,000
Returnees	13,000	12,000	25,000	13,000	12,000	25,000
Abyei-affected	31,200	28,800	60,000	31,200	28,800	60,000
Host communities	524,200	560,800	1,085,000	276,200	293,800	570,000
IPC-Emergency (minus 585,000 in host communities)	267,800	247,200	515,000	267,800	247,200	515,000
Refugees (supplies only)	70,200	64,800	135,000	70,200	64,800	135,000
Total	2,478,400	2,441,600	4,920,000	1,327,400	1,302,600	2,630,000

Strategy to respond to needs

The immediate priority between January and June is to provide safe drinking water and emergency latrines to vulnerable communities, and to promote good hygiene that prevent the outbreak and spread of water-related disease.

Maximum humanitarian impact will be achieved by a robust provision of emergency core pipeline supplies. This will require immediate funding into the WASH Cluster Core Pipeline via IOM, Oxfam and UNICEF. The WASH Cluster core pipeline is managed by UNICEF, as Cluster Lead Agency, with input from the Cluster Coordinator. Agencies will provide supplies according to plan to WASH Cluster partners engaged in response. The scale-up of logistics

capacity will be needed, including warehousing, qualified emergency logistics staff and dedicated qualified pipeline support staff in each section. Pre-positioning strategy and implementation must be achieved prior to the rainy season. Immediate scale-up of air assets and common warehousing by the Logistics Cluster in Juba and appropriate field locations will also be required. WASH partners will continue to scale up their capacity, to provide a minimum package of emergency WASH services to those in need. The WASH Cluster will further strengthen its coordination with Health, Nutrition, Education, CCCM and Protection Clusters, to ensure proper planning of WASH facilities in health and nutrition clinics, child-friendly spaces and other sites for displaced people.

Public health risk is likely greatest in areas where high numbers of displaced people are concentrated. Therefore displaced people in IDP sites will be prioritized over people displaced that have integrated into host communities, and affected communities in areas of conflict. The WASH Cluster will continue to engage with health actors to address key infectious diseases through the Infectious Disease Working Group, initiated by the WASH Cluster in January 2014.

Cluster objectives and key outputs

CO1: Provide emergency water and sanitation, and promote good hygiene among displaced populations

CO2: Ensure provision of safe water supply and improved sanitation, and promote good hygiene within host and chronically vulnerable communities

Expected Output	Target
Emergency-affected people (displaced people, returnees, and host community) provided with safe water (based on standard SPHERE figures of 15 L/p/day, within 500m of residence)	1,655,000
Emergency-affected people (displaced people, returnees, and host community) provided with an improved sanitation facility (based on standard SPHERE figures estimating 1 latrine per 50 people ²⁰)	550,000
People in chronically vulnerable communities provided with safe water (based on standard SPHERE figures of 15 L/p/day, within 500m of residence)	825,000

²⁰This population is included within the population of emergency-affected people receiving safe water