



An adolescent girl sells tea in the Malakal PoC. She says she feels insecure walking home after dark.

Overall Humanitarian Needs in South Sudan





1. Situation overview

The security situation remains tense country wide.

Theft and car jacking are still happening in Juba as well as robberies of internationals who take rides on motorcycle taxis (boda bodas). A fuel shortage has added to tension and the potential for more violence as fuel stations become swarmed by crowds of people waiting for hours in the hope of obtaining fuel. Idle youth in the camps continue to pose security problems and inter communal violence also continues to escalate in all of the Juba PoCs. Tensions remain high between humanitarian actors and the IDPs in UN House and Topping PoCs. Movement of supplies to the field remains a major challenge constraining the distribution of dignity kits in the field.

In Malakal three UN staff members were forcibly abducted from the airport by unknown armed persons. Fighting also resumed in Upper Nile State, in Doleb hills near Malakal.

Sexual violence is still widespread and shows no signs of abating. Seventy six percent of GBV survivors seen at the Juba Teaching Hospital in the last 4 months have been under the age of 18. Abortion continues to be an issue in all of the PoCs, with an extremely high incidence in the worst affected areas such as Malakal and Bentiu where partners have shared distressing reports of treating up to 6 women a week experiencing abortion. Most of the women who show up at the clinics are between the ages of 17 and 25.

In Bentiu, the conditions are still extremely destitute, with one drainage system put in place to help get rid of the water from the most recent flooding, but the drainage is happening slowly and most of the tents are still at least partially submerged in water, putting the IDPs at risk of infection from water borne diseases.

South Sudanese opposition leaders have petitioned President Salva Kiir against signing a controversial security bill approved by the parliament, despite boycott, saying it contravenes the country's constitution. The bill gives authorities the right to arrest anyone without a warrant.

Since the peace talks adjourned last week the fresh fighting in Upper Nile has confirmed that neither side is serious about a resolution to the conflict. International monitors have accused both sides of violating the terms of the shaky agreement, although government and opposition forces have vehemently denied these accusations.

Cholera cases are declining. A total of 6,141 cholera cases including 139 deaths have been reported.

Ebola checks are ongoing at the Juba International Airport and the government has also recently announced a ban on handshaking as a preventative measure.



2. Highlights of UNFPA Emergency Response

A total of 4377 (2690 women, 527 men, 865 girls and 295 boys) were reached with GBV messages during the week. All the women's centers in Bentiu that were affected by last week's floods have been repaired and re-opened during this reporting period.

In response to high cases of sexual violence identified outside of the Bentiu PoC, a session was held by implementing partner IRC on the GBV referral pathway focusing on the dos and don'ts of service provision once a survivor identifies him/herself. Also in Bentiu, two safety audits were conducted by IRC in the most flooded areas of the PoCs.

In Malakal, in response to the high levels of sexual violence UNFPA in partnership with local NGO called Sobat Community for Peace and Development has submitted two proposals to UNMISS for projects to provide alternate activities for women and girls to help protect them from GBV. The two proposals have been shortlisted and submitted for final review and selection process in Juba. The title of the submitted projects are:

"Energy Saving Stoves to Households to protect women and girls from vulnerabilities associated with fetching firewood from the bush and preserving the environment"

"Integrated Project on income Generating Activities to women and girls to reduce their vulnerability to GBV and associated Physical Violence"

During the reporting period the GBV subcluster met at national level and worked on their subcluster response plan which is to guide partners in developing projects for the South Sudan 2015 strategic response plan.

In Reproductive Health, a Family Planning training was conducted by UNFPA in partnership with MSF and WHO. in Yambio and reached 15 community members. In Juba, 40 SRH mobilizers were trained on HIV in the Juba 3 PoC.

Also in Juba an afternoon learning session on UN CARES was held for UNFPA staff during the reporting period. The session was meant to sensitize staff on the issue of HIV in general but in particular the specific issues around the infection and the risks associated with working in a humanitarian context. Staff were informed about the causes and prevention of HIV, and correct use of both male and female condom. Voluntary Counseling and Testing was offered to all staff after the session. Education around HIV for UN staff is especially pertinent in South Sudan as it has the highest number of peacekeepers of any mission in the world, and is a non-family duty station.

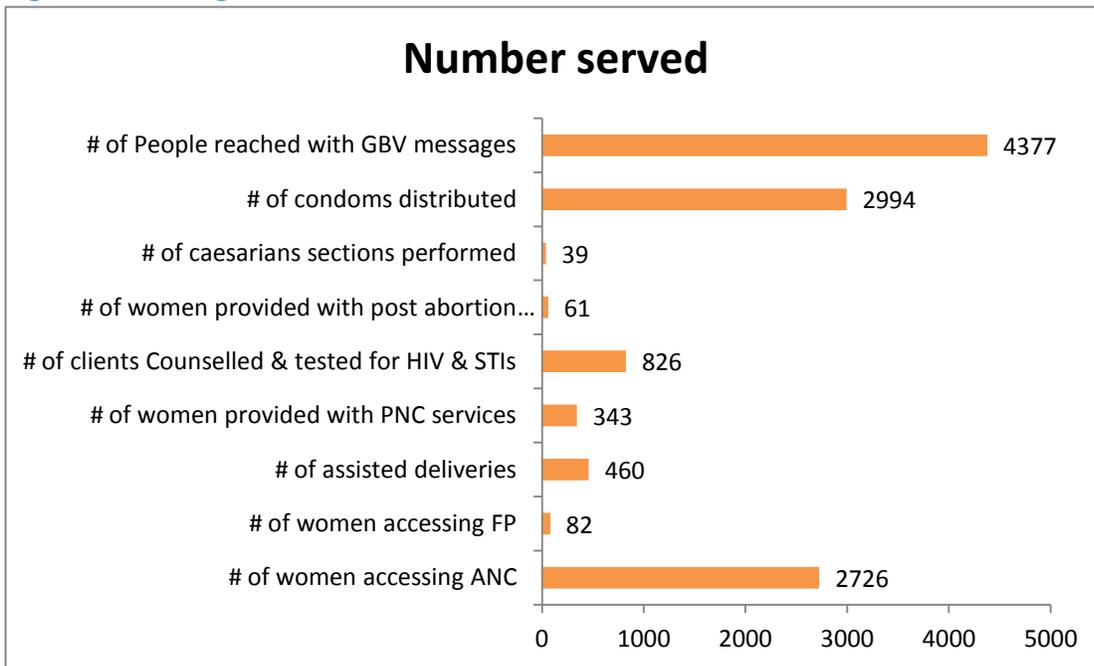


UNFPA staff receive a demonstration on how to properly use condoms during an HIV learning session.

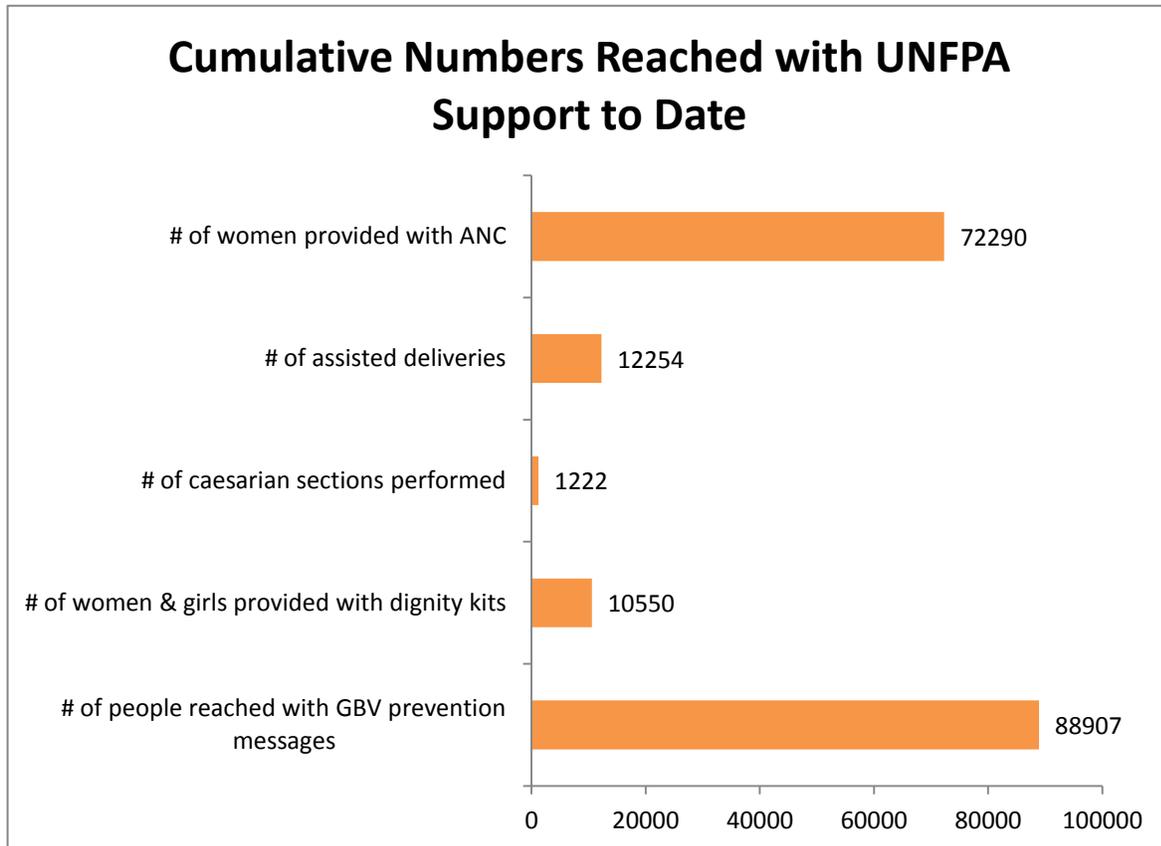
3. RH and GBV Service Delivery

The table below summarizes selected indicators of service delivery for the reporting week.

Figure 1: showing indicators and numbers of individuals served:



Cumulatively, using selected core indicators, the status since 15 December 2013 is as summarized in Figure 2 below:



4. Resource Mobilization

The CO has mobilised and invested US \$ 6,413,333. The funding is from the following sources CHF US \$1,400,000; Emergency Fund US \$ 850,000; Japan Government US \$ 1,200,000; CERF US \$ 887,000; Denmark Government US \$ 500,000. Additionally, the CO has also allocated slightly over US \$ 1,5 million from the core resources to respond to the humanitarian emergency. Over 85% of these funds are already utilised or committed. We have a gap of nearly US \$11 millions out of the US \$17 million.



5. Communication and Advocacy

Radio spots, jingles, talk shows and door to door visits to talk to young women about reproductive health issues continue as part of advocacy efforts.

Contact Information

Mr. Barnabas Yisa
UNFPA Representative
UN House Compound, Building No. 4, Yei Road
Juba, South Sudan
Tel: +211-956444486
Email: southsudan@unfpa.org
<https://twitter.com/UNFPASouthSudan>