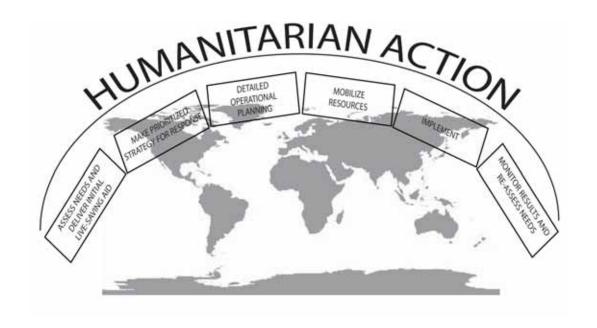
Republic of South Sudan



2011





SAMPLE OF ORGANIZATIONS PARTICIPATING IN CONSOLIDATED APPEALS

ACF	GOAL	MACCA	TEARFUND
ACTED	GTZ	Malteser	Terre des Hommes
ADRA	Handicap International	Medair	UNAIDS
Afghanaid	HELP	Mercy Corps	UNDP
AVSI	HelpAge International	MERLIN	UNDSS
CARE	Humedica	NPA	UNESCO
CARITAS	IMC	NRC	UNFPA
CONCERN	INTERSOS	OCHA	UN-HABITAT
COOPI	IOM	OHCHR	UNHCR
CRS	IRC	OXFAM	UNICEF
CWS	IRIN	Première Urgence	WFP
DRC	Islamic Relief Worldwide	Save the Children	WHO
FAO	LWF	Solidarités	World Vision International

TABLE OF CONTENTS

PREFACE	FO	REWORD		IV
Table I: Requirements and funding to date per cluster 4 Table II: Requirements and funding to date per priority level 5 Table III: Requirements and funding to date per organization 6 2. CHANGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE 9 2.1 CONTEXT 9 2.2 REVISED MOST LIKELY SCENARIO 13 2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 26 FOOD Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 36 Multi-Cluster 45 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 Early Planning For the 2012 C	PR	EFACE		v
Table II: Requirements and funding to date per priority level. 5 Table III: Requirements and funding to date per organization 6 2. CHANGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE 9 2.1 CONTEXT. 9 2.2 REVISED MOST LIKELY SCENARIO. 13 2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 COmmon Services and Coordination 23 Education 26 FOOD Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 36 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 Early Planning For the 2012 CAP 57	1.	EXEC	CUTIVE SUMMARY	1
Table III: Requirements and funding to date per organization 6 2. CHANGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE 9 2.1 CONTEXT 9 2.2 REVISED MOST LIKELY SCENARIO 13 2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 Early Planning For the 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60		Table I:	Requirements and funding to date per cluster	4
2. CHANGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE 9 2.1 CONTEXT 9 2.2 Revised MOST LIKELY SCENARIO 13 2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 45 Nutrition 45 Vater, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 Early Planning For The 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table VI: List of appeal projects (grouped by cluster), with funding status of each 60 Table VI: Total funding to date per donor to proje		Table II:	Requirements and funding to date per priority level	5
2.1 CONTEXT 9 2.2 REVISED MOST LIKELY SCENARIO 13 2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 56 Table VI:		Table III	Requirements and funding to date per organization	6
2.2 REVISED MOST LIKELY SCENARIO 13 2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 30 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 50 Table IV: List of appeal projects (grouped by cluster), with funding status of each 56 Table VI: Total funding to date per donor to projects listed in the appeal <t< td=""><td>2.</td><td>CHAI</td><td>NGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE</td><td> 9</td></t<>	2.	CHAI	NGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE	9
2.3 SUMMARY OF RESPONSE TO DATE 14 2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table VI: Total funding to date per donor to projects listed in the appeal 81 Table VIII: Humanitarian funding to date per donor to project		2.1	CONTEXT	9
2.4 UPDATED NEEDS ANALYSIS 16 2.5 ANALYSIS OF FUNDING TO DATE. 17 3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 36 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 48 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table V: Total funding to date per donor to projects listed in the appeal 81 Table VI: Humanitarian funding to date per donor (appeal plus other) 82 Table VIII: Requirements and funding to		2.2	REVISED MOST LIKELY SCENARIO	13
2.5 ANALYSIS OF FUNDING TO DATE		2.3	SUMMARY OF RESPONSE TO DATE	14
3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS 19 3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 30 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 46 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table V: Total funding to date per donor to projects listed in the appeal 81 Table VI: Total humanitarian funding to date per donor to projects not listed in the appeal 81 Table VII: Humanitarian funding to date per donor to projects not listed in the appeal 83 Table VIII: Humanitarian funding to date per donor to projects not listed in the appeal 83 Table VIII: Requireme		2.4	UPDATED NEEDS ANALYSIS	16
3.1 STRATEGIC OBJECTIVES 19 3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 30 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 48 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table V: Total funding to date per donor to projects listed in the appeal 81 Table VI: Total humanitarian funding to date per donor to projects not listed in the appeal 82 Table VIII: Humanitarian funding to date per donor to projects not listed in the appeal 83 Table VIII: Requirements and funding to date per gender marker score 84		2.5	ANALYSIS OF FUNDING TO DATE	17
3.2 CLUSTER RESPONSE PLANS 23 Common Services and Coordination 23 Education 26 Food Security and Livelihoods 30 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 48 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table VI: Total funding to date per donor to projects listed in the appeal 81 Table VII: Humanitarian funding to date per donor to projects not listed in the appeal 83 Table VIII: Requirements and funding to date per donor to projects not listed in the appeal 83 Table VIII: Requirements and funding to date per gender marker score 84	3.	PRO	GRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS	19
Common Services and Coordination 23 Education 26 Food Security and Livelihoods 30 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 48 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table V: Total funding to date per donor to projects listed in the appeal 53 Table VII: Total humanitarian funding to date per donor to projects not listed in the appeal 53 Table VII: Humanitarian funding to date per donor to projects not listed in the appeal 53 Table VIII: Requirements and funding to date per gender marker score 54		3.1	STRATEGIC OBJECTIVES	19
Education 26 Food Security and Livelihoods 30 Health 33 Logistics 36 Mine Action 39 Multi-Cluster 42 Non-Food Items and Emergency Shelter 45 Nutrition 48 Protection 51 Water, Sanitation and Hygiene 54 4. FORWARD VIEW 57 4.1 EARLY PLANNING FOR THE 2012 CAP 57 ANNEX I: LIST OF PROJECTS AND FUNDING TABLES 60 Table IV: List of appeal projects (grouped by cluster), with funding status of each 60 Table V: Total funding to date per donor to projects listed in the appeal 81 Table VI: Total humanitarian funding to date per donor (appeal plus other) 82 Table VIII: Humanitarian funding to date per donor to projects not listed in the appeal 83 Table VIII: Requirements and funding to date per gender marker score 84		3.2	CLUSTER RESPONSE PLANS	23
Food Security and Livelihoods			Common Services and Coordination	23
Health			Education	26
Logistics			Food Security and Livelihoods	30
Mine Action			Health	33
Multi-Cluster			Logistics	36
Non-Food Items and Emergency Shelter			Mine Action	39
Nutrition			Multi-Cluster	42
Protection			Non-Food Items and Emergency Shelter	45
Water, Sanitation and Hygiene			Nutrition	4 8
4. FORWARD VIEW			Protection	51
ANNEX I: LIST OF PROJECTS AND FUNDING TABLES			Water, Sanitation and Hygiene	54
ANNEX I: LIST OF PROJECTS AND FUNDING TABLES	4.	FOR	VARD VIEW	57
Table IV: List of appeal projects (grouped by cluster), with funding status of each		4.1	EARLY PLANNING FOR THE 2012 CAP	57
Table IV: List of appeal projects (grouped by cluster), with funding status of each				
Table V: Total funding to date per donor to projects listed in the appeal	AN			
Table VI: Total humanitarian funding to date per donor (appeal plus other)		Table V:	Total funding to date per donor to projects listed in the appeal	81
Table VIII: Requirements and funding to date per gender marker score		Table VI	: Total humanitarian funding to date per donor (appeal plus other)	82
ANNEX III: ACRONYMS AND ABBREVIATIONS				
	ΛKII	NEY II.	ACPONYMS AND ARRPEVIATIONS	0F

Please note that appeals are revised regularly. The latest version of this document is available on http://www.humanitarianappeal.net.

Full project details can be viewed, downloaded and printed from http://fts.unocha.org/.

FOREWORD

We stand at the juncture of a historic moment. In January 2011, the people of South Sudan voted overwhelmingly to become independent and on 9 July, the Republic of South Sudan became the world's 193rd country.

Through this first Consolidated Appeal for the new Republic of South Sudan, we have the opportunity to harness support at a time of unprecedented change to help save lives, mitigate crises and support the government and its people as they begin building their new nation.

The strategy outlined in this document concentrates on the emergency services that will be necessary during the next six months and how they can be delivered in the most efficient manner.

As a successor to the Sudan UN and Partners Work Plan, the Appeal includes an updated analysis of the humanitarian situation including the risks that the new country will face and the impact these are likely to have on the population.

The first six months of 2011 saw South Sudan faced with multiple crises. Armed conflict and political tensions have displaced 260,000 people, including 110,000 civilians from Abyei who fled their homes in May after the Sudanese Armed Forces (SAF) violated the Comprehensive Peace Agreement and militarily took over the town.

Inter-communal violence has continued and a number of rebel militia groups (RMG) have emerged, sparking a counter-insurgency campaign by the Sudan People's Liberation Army (SPLA). In a worrying trend, humanitarian space has contracted sharply, exposing vulnerable populations and humanitarian workers to violence and destruction of property.

Ready to help build their new country and concerned about their status in the north after secession, South Sudanese have returned home in large numbers, often to communities lacking basic services and economic opportunities. Since October last year more than 306,000 southerners have arrived and thousands more are expected in the next months.

Humanitarian partners have responded impressively during the first six months of 2011 to the deteriorating situation. At the time this Appeal is being launched, there are 34 separate emergency relief operations underway in 51 of the south's 79 counties.

Although all of us are hopeful for the new nation, the humanitarian situation is likely to remain precarious for the foreseeable future with conflict and natural disasters continuing, and access contracting due to military operations and logistical constraints.

The 103 humanitarian partners who have worked to produce this first consolidated appeal for the Republic of South Sudan are committed to working with the people and the Government of South Sudan to support the country as it launches into statehood. We look forward to embarking on this journey together.

Lise Grande

United Nations Resident and Humanitarian Coordinator

PREFACE

From the Government of South Sudan

This Consolidated Appeal for the Republic of South Sudan is the first such appeal which specifically targets the people of the South in their own right. The Consolidated Appeal concentrates on the immediate, priority needs of the people of the new Republic as we establish our new state and continue to face challenges on a number of sides. This Consolidated Appeal is the truly result of the humanitarian team work in South Sudan, being the result of consultations among all the partners.

On behalf of the Government of the Republic of South Sudan, I would like to extend my gratitude to our partners who have committed themselves to this important process and who will continue to work with us as we build South Sudan. The projects included in this Consolidated Appeal reflect the common priorities of government ministries, local communities, non-governmental organisations, and UN agencies. We work together to provide life-saving services and promote human dignity for our people that continue to suffer the effects of inter-communal violence, armed opposition, natural disasters and a heavy disease burden.

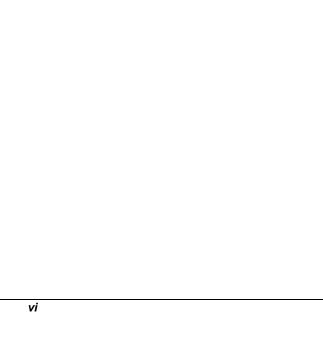
As the newly established Government of the Republic of South Sudan, we call upon our humanitarian partners and our friendly donors that have been with us during the years of the struggle for statehood to maintain their commitment with our people in a moment in which the challenges are not yet totally over. At the same time we commit ourselves to build our new nation in the full respect of the humanitarian principles internationally accepted.

The coordinated strategy presented here embodies the will and spirit of the Nation. Our people have high expectations for the future of our country. We count on the humanitarian community to work with the Government to manage those expectations and to ensure life-saving services and activities always reach the most vulnerable citizens of our nation.

His Excellency James Kok Ruea

Minister of Humanitarian Affairs and Disaster Management

Republic of South Sudan



1. EXECUTIVE SUMMARY

The first six months of 2011 brought historic changes to the territory that becomes the world's newest nation, the Republic of South Sudan, in July 2011. Some of these changes were foreseen and captured in the most likely planning scenario developed by humanitarian actors for 2011. Others have exceeded expectations, resulting in a deterioration of the situation more closely in line with aspects of the worst-case scenario.

The referendum balloting on southern independence began on 9 January 2011 as scheduled and passed peacefully. The plebiscite drew a 99% vote for independence, paving the way for the establishment of an independent nation at the end of the Comprehensive Peace Agreement (CPA) on 9 July 2011. Other CPA benchmarks, including border demarcation and the status of Abyei, remained unresolved, impairing relations between northern and southern Sudan. The military takeover of Abyei and the area north of the Bahr el Arab/Kiir River by the Sudanese Armed Forces in May and June and the displacement of over 110,000 people southwards constituted a major violation of the CPA.

Internal political tensions and armed opposition also spread during the period, with at least seven rebel militia groups beginning or scaling up attacks against the Sudan People's Liberation Army (SPLA) in areas of strategic importance in South Sudan. The insurgency has put civilians at grave risk. Extensive re-mining has been reported, security forces have arbitrarily detained people and destroyed property, gender-based violence has increased, and there have been numerous instances of forced recruitment. Inter-communal violence, including large-scale reprisal attacks, has affected various parts of the south by mid-June, authorities were reporting that more than 1,800 people had been killed in inter-communal and militia-related violence and more than 154,000 had been displaced. More than 20 separate attacks by the Lord's Resistance Army (LRA) in Western Equatoria killed 17 people and displaced over 7,000.

By mid-June 2011, more than 306,000 southerners had returned from the north since October 2010, including 128,000 since the January referendum. Although food security has improved in 2011 compared to 2010, 1.4 million people still require food assistance at some point during the March to August lean season. Increased displacement, additional returns from the north, a sharp reduction in the availability of foodstuffs and basic commodities and a sharp rise in prices have the potential to reverse gains in food security.

Humanitarian access and space contracted sharply in parts of South Sudan in early 2011. Humanitarian partners recorded 57 incidents in which state actors interfered with relief operations or restricted the movement of humanitarian personnel, assets or supplies during the first part of the year. Interference with humanitarian operations imposed serious costs on the relief effort in terms of delays, lost funds, lost supplies and by affecting the safety and security of humanitarian personnel.

In response to the precarious humanitarian situation in South Sudan, a consolidated appeal for the new republic has been prepared in full consultation with partners. During the interim period, humanitarian activities for the south were included in the Sudan UN and Partners Work Plan for 2011. This appeal includes revisions to the original 2011 projects as well as new projects which are introduced in order to address the deteriorating situation. The Consolidated Appeal (CAP) comprises 256 projects totalling \$\frac{1}{6}21\$ million. This is an increase of 24 projects and \$47 million over what was included for the southern elements of the 2011 Sudan Work Plan, for which \$211 million (34%) has been received so far this year². Several clusters, including Protection, Health, Water, Sanitation and Hygiene, Mine Action, Logistics, Non-Food Items and Emergency Shelter, remain seriously underfunded, having received between 2% and 29% of their requirements.

¹ All dollar signs in this document denote United States dollars. Funding for this appeal should be reported to the Financial Tracking Service (FTS, fts@un.org), which will display its requirements and funding on the current appeals page.

2 Unearmarked funding that has been contributed to all of Sudan during the first six month of this year is recorded on FTS against the 2011 Sudan Work Plan. It is important to note, however, that agencies can use this funding for activities in both North and South Sudan.

Abyei and other contested areas

Some of the border areas between Sudan and South Sudan remain contested. Given the prevailing security situation in these areas and uncertainties about the future, it has not been possible to provide a comprehensive strategy to address emerging and existing needs in these areas at this time. Despite this political challenge, the humanitarian community will continue to negotiate with the authorities on both sides to ensure that assistance to the people in need in these areas is provided on the basis of operational accessibility.

Basic humanitarian and development facts about South Sudan

		Most recent data
	Area	644,329 km ²
		Afghanistan x 0.988
Geography and	Area comparative	Haiti x 2,322
Demographics		Norway x 199
3	Population (% male, female)	8,260,490 (52%, 48%)
	Population under age 18	51%
	Rural population	83%
	Average household size	7
	Gross domestic product	n.a.
	Government revenue (2010)	\$1.68 billion (98% from
Economy	Annual inflation ⁵	oil) ⁴ 32%
	Daily crude oil production in South Sudan (est.) ⁶	350,000 barrels
	Amount of refined fuel imported from Sudan (as % of all fuel imported	
	into South Sudan) ⁷	99%
	Poverty line (Sudanese pounds ⁸ per month)	SDG 79.2 (\$26)
	Proportion of population living in poverty	51%
Poverty and	Average monthly consumption per conite	SDG100 / \$33 (79%
human	Average monthly consumption per capita	spent on food)9
development	Proportion of households that used cash in the previous seven days ⁸	53%
	Proportion of households that own a phone (urban, rural)	15% (59%, 8%) ⁸
	Youth ages 15-24 with comprehensive knowledge about HIV/AIDS ¹⁰	11%
	Infant mortality (per 1,000 live births) ¹²	84
	Under-five mortality (per 1,000 live births) ¹³	135
Health ¹¹		2,054 (1.5 x
licaitii	Maternal mortality (per 100,000 live births) (global comparison)	Afghanistan, 1.7 x
		Somalia)
	Community midwives deployed within the health care system ¹⁴	45
	Estimate of HIV/AIDS prevalence ¹⁵ among adults aged 15-49	3.1%
	Literacy rate above age 15 years (m, f)	27% (40%, 16%)
Education ¹⁶	Net enrolment rate, primary (m, f)	44% (51%, 37%)
	Average promotion rate, all primary grades	64%
	Primary school pupils per classroom	134
	2011 projected cereal deficit (2010 comparison)	291,000 MTs (410,000 MT)
Food Security	Proportion of arable land cultivated ¹⁷	4%
and Nutrition	Est. severely food-insecure population (% of households)	10%
	Est. moderately food-insecure population (% of households)	26%
	Children under five severely or moderately underweight ¹⁸	30%
Water,	Access to an improved water source (urban, rural) ¹⁹	55% (67%, 53%)
sanitation and	Access to improved sanitation (urban, rural) 20	20% (53%, 13%)
hygiene	Proportion of households using sanitary means of excreta disposal ²¹	15%
Displacement,	Cumulative internal displacement (1 Jan-15 June 2011)	264,143
refugees and	Cumulative internal displacement 2010	223,708
conflict	South Sudanese refugees abroad	95,000
	1	

³ Geography and demographic data from the 5th Sudan Population and Housing Census (2008).

⁴ Equivalent to 4.5 billion SDG (per official rates as of 1 June 2011). Source: Ministry of Finance and Economic Planning, as cited in the Southern Sudan Centre for Census, Statistics and Evaluation's Statistical Yearbook for Southern Sudan 2010.

⁵ As cited in the South Sudan draft Development Plan, 2011-2013.

⁶ Sudan produced an estimated 500,000 barrels per day, 70% of which came from southern Sudan. "Referendum Impacts on Market Flows and Livelihoods," the Famine Early Warning Systems Network and USAID, May 2011.

⁷ "Referendum Impacts on Market Flows and Livelihoods," the Famine Early Warning Systems Network and USAID, May 2011. 8 \$1 = 3 SDG.

⁹ National Baseline Household Survey (2009).

 $^{^{10}}$ Southern Sudan Household Health Survey, 2010, as cited in the 2011-2013 draft South Sudan Development Plan.

¹¹ Sudan Household Health Survey 2006 for all health indicators, except where noted.

¹² Southern Sudan Household Health Survey, 2010, as cited in the 2011-2013 draft South Sudan Development Plan.

¹³ Ibid.

¹⁴ GoSS MoH Mapping 2009-2010.

¹⁵ South Sudan AIDS Commission, MoH end of 2007.

¹⁶ Except where otherwise noted, all education statistics are from 2010 Education Statistics for Southern Sudan, GoSS, 22 February 2011.

¹⁷ Annual Needs and Livelihood Analysis, WFP, 2010-11.

¹⁸ Southern Sudan Household Health Survey, 2010, as cited in the draft 2011-2013 South Sudan Development Plan.

¹⁹ NBHS 2009, as cited in the draft 2011-2013 South Sudan Development Plan.

²⁰ NBHS 2009, as cited in the draft 2011-2013 South Sudan Development Plan.

²¹ Southern Sudan Household Health Survey, 2010, as cited in the 2011-2013 South Sudan Development Plan.

Table I: Requirements and funding to date per cluster

Republic of South Sudan Work Plan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Cluster	Original requirements			Unmet requirements	% Covered	Uncommitted pledges
-	(\$) A	(\$) B	(\$) C	(\$) D=B-C	E=C/B	(\$) F
COORDINATION AND COMMON SERVICES	3,530,055	37,604,081	23,449,930	14,154,151	62%	-
EDUCATION	26,982,675	39,570,939	16,174,415	23,396,524	41%	-
FOOD SECURITY AND LIVELIHOODS	40,889,172	118,376,343	70,085,062	48,291,281	59%	-
HEALTH	81,841,148	81,822,543	21,323,602	60,498,941	26%	-
LOGISTICS	22,417,604	92,933,095	13,333,384	79,599,711	14%	-
MINE ACTION	13,426,072	15,161,072	3,867,447	11,293,625	26%	-
MULTI-CLUSTER	32,555,479	60,273,510	1,698,984	58,574,526	3%	-
NFI AND EMERGENCY SHELTER	8,243,527	15,261,064	4,286,934	10,974,130	28%	-
NUTRITION	24,842,804	34,466,692	17,115,636	17,351,056	50%	-
PROTECTION	45,624,151	52,939,237	7,678,009	45,261,228	15%	-
WATER, SANITATION AND HYGIENE	65,071,352	72,361,457	19,155,989	53,205,468	26%	-
CLUSTER NOT YET SPECIFIED	-	-	12,657,906	n/a	n/a	-
Grand Total	365,424,039	620,770,033	210,827,298	409,942,735	34%	-

NOTE: "Funding" means Contributions + Commitments + Carry-over

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be

contributed.

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these

tables indicates the balance of original pledges not yet committed.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table II: Requirements and funding to date per priority level

Republic of South Sudan Work Plan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Priority	Original requirements	Revised requirements	Funding	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D=B-C	E=C/B	(\$) F
HIGH PRIORITY	276,308,512	500,167,201	174,407,353	325,759,848	35%	-
MEDIUM PRIORITY	89,115,527	120,602,832	26,262,039	94,340,793	22%	-
PRIORITY NOT SPECIFIED	-	-	10,157,906	n/a	n/a	-
Grand Total	365,424,039	620,770,033	210,827,298	409,942,735	34%	-

NOTE: "Funding" means Contributions + Commitments + Carry-over

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be

contributed.

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these

tables indicates the balance of original pledges not yet committed.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table III: Requirements and funding to date per organization

Republic of South Sudan Work Plan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Appealing organization	Original requirements	Revised requirements	Funding	Unmet requirements	% Covered	Uncommitted pledges
-	(\$) A	(\$) B	(\$) C	(\$) D=B-C	E=C/B	(\$) F
ACF - USA	6,575,073	6,575,073	2,440,000	4,135,073	37%	-
ACROSS	25,000	25,000	-	25,000	0%	-
ACTED	1,620,867	1,620,867	420,050	1,200,817	26%	-
ADRA Sudan	1,912,539	1,111,864	-	1,111,864	0%	-
AMURT International	888,841	1,276,397	530,000	746,397	42%	-
ARC	3,409,811	3,374,107	2,856,576	517,531	85%	-
ASMP	880,000	880,000	-	880,000	0%	-
AVSI	435,000	435,000	-	435,000	0%	-
AWODA	635,000	475,000	276,000	199,000	58%	-
BRAC	1,142,463	1,142,463	248,062	894,401	22%	-
CAFOD	933,146	933,146	627,350	305,796	67%	-
Care Sudan	3,310,956	3,310,956	201,933	3,109,023	6%	-
CARITAS	250,000	250,000	-	250,000	0%	-
Caritas Switzerland	1,300,000	1,300,000	-	1,300,000	0%	-
CCM	805,308	805,308	250,000	555,308	31%	-
CCOC	-	269,000	-	269,000	0%	-
CDoT	2,221,855	2,221,855	600,000	1,621,855	27%	-
CESVI	975,000	1,390,000	-	1,390,000	0%	-
CHF	-	-	-	-	0%	-
Chr. Aid	450,000	450,000	400,300	49,700	89%	-
CMA	1,300,000	1,300,000	200,000	1,100,000	15%	-
СММВ	-	239,183	-	239,183	0%	-
COSV	755,000	798,000	-	798,000	0%	-
CRADA	2,100,000	2,100,000	200,000	1,900,000	10%	-
CRS	2,792,991	3,012,182	-	3,012,182	0%	-
CW	-	477,000	-	477,000	0%	-
Danchurchaid	1,701,633	1,807,403	912,251	895,152	50%	-
DDG	3,746,000	3,746,000	-	3,746,000	0%	-
DRC	745,421	1,179,849	300,000	879,849	25%	-
ECS Rumbek	28,370	28,370	-	28,370	0%	-
EPC Sudan	175,000	175,000	-	175,000	0%	-
ERF (OCHA)	-	-	2,500,000	(2,500,000)	0%	-
FAO	15,878,300	15,878,300	1,950,000	13,928,300	12%	-
GADGET - Pentagon	390,000	390,000	-	390,000	0%	-
GOAL	874,999	1,266,028	405,000	861,028	32%	-
HI	997,406	997,406	-	997,406	0%	-
IAS	4,185,000	4,185,000	123,300	4,061,700	3%	-
IBIS	1,777,837	1,777,837	-	1,777,837	0%	-
IMC UK	1,094,083	1,094,083	594,083	500,000	54%	-

Appealing organization	Original requirements	Revised requirements	Funding	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D=B-C	E=C/B	(\$) F
IN	4,299,992	4,299,992	-	4,299,992	0%	-
Intermon Oxfam	5,930,756	5,930,756	740,741	5,190,015	12%	-
International HIV/AIDS Alliance	660,500	660,500	-	660,500	0%	-
INTERSOS	2,694,153	3,694,153	655,231	3,038,922	18%	-
Intrahealth	299,510	299,510	-	299,510	0%	-
IOM	13,392,040	35,083,510	7,386,655	27,696,855	21%	-
IRC	5,117,535	4,514,482	4,105,349	409,133	91%	-
IRD	2,103,990	2,103,990	-	2,103,990	0%	-
IRW	859,270	870,120	-	870,120	0%	-
JDF	271,097	271,097	-	271,097	0%	-
KCS	774,434	774,434	-	774,434	0%	-
LCEDA	58,650	58,650	-	58,650	0%	-
LHDS	582,000	582,000	-	582,000	0%	-
Malaria Consortium	3,369,430	3,369,430	822,160	2,547,270	24%	-
Malteser International	1,783,000	1,783,000	-	1,783,000	0%	-
MDM France	800,000	800,000	-	800,000	0%	-
MEDAIR	8,149,932	8,361,203	1,329,419	7,031,784	16%	-
Mercy Corps	-	740,999	-	740,999	0%	-
MERLIN	3,658,780	3,658,780	1,087,531	2,571,249	30%	-
MGH	529,410	529,410	-	529,410	0%	-
Mines Advisory Group	510,000	1,610,000	200,000	1,410,000	12%	-
MSI	1,279,495	1,279,495	-	1,279,495	0%	-
NCA	2,840,000	2,840,000	118,500	2,721,500	4%	-
Netherlands RC	914,000	914,000	-	914,000	0%	-
NHDF	2,083,000	2,726,000	-	2,726,000	0%	-
NPA	9,234,594	9,234,594	3,534,882	5,699,712	38%	-
NPP	-	319,825	-	319,825	0%	-
NRC	9,429,682	9,429,682	300,000	9,129,682	3%	-
OCHA	-	5,826,682	1,500,000	4,326,682	26%	-
OVCI	592,295	592,295	-	592,295	0%	-
OXFAM GB	4,996,454	4,996,454	3,123,949	1,872,505	63%	-
Pact Inc.	-	3,134,178	-	3,134,178	0%	-
PAH	2,107,540	2,107,540	-	2,107,540	0%	-
PCO	1,671,028	1,671,028	-	1,671,028	0%	-
PCPM	323,606	323,606	-	323,606	0%	-
PSI	-	2,949,471	-	2,949,471	0%	-
PWJ	480,000	480,000	-	480,000	0%	-
RI	1,930,585	1,930,585	200,000	1,730,585	10%	-
Samaritan's Purse	1,809,150	1,809,150	1,888,648	(79,498)	100%	-
SBHC	-	275,000	-	275,000	0%	-
SC	4,800,570	5,226,570	5,549,140	(322,570)	100%	-
Sign of Hope	212,500	212,500	-	212,500	0%	-
SIMAS	987,072	987,072		987,072	0%	-

Appealing organization	Original requirements	Revised requirements	Funding	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D=B-C	E=C/B	(\$) F
Solidarités	480,000	480,000	441,600	38,400	92%	-
SSLS	471,100	471,100	-	471,100	0%	-
Sudan RC	-	-	-	-	0%	-
SUDRA	778,600	778,600	325,000	453,600	42%	-
Switzerland RC	1,060,000	1,060,000	-	1,060,000	0%	-
TEARFUND	9,239,770	9,239,770	2,726,543	6,513,227	30%	-
THESO	1,677,947	1,677,947	-	1,677,947	0%	-
UNDSS	850,000	850,000	576,526	273,474	68%	-
UNESCO	813,010	813,010	-	813,010	0%	-
UNFPA	3,732,431	4,989,505	1,176,348	3,813,157	24%	-
UNHCR	68,841,085	83,184,116	11,709,444	71,474,672	14%	-
UNICEF	57,519,187	59,727,312	20,177,273	39,550,039	34%	-
UNIDO	-	377,532	-	377,532	0%	-
UNKEA	198,999	389,967	-	389,967	0%	-
UNMAS	2,291,000	2,926,000	2,642,480	283,520	90%	-
UNOPS	20,880,000	35,880,000	2,365,294	33,514,706	7%	-
VSF (Belgium)	820,000	820,000	820,000	-	100%	-
VSF (Germany)	1,420,000	1,420,000	-	1,420,000	0%	-
VSF (Switzerland)	465,196	465,196	-	465,196	0%	-
WFP	643,697	181,214,280	112,352,875	68,861,405	62%	-
WHO	16,682,285	16,682,285	4,180,626	12,501,659	25%	-
Windle Trust	1,575,410	1,575,410	-	1,575,410	0%	-
World Relief	805,953	805,953	805,953	-	100%	-
WVS	5,354,158	6,407,368	1,950,226	4,457,142	30%	-
ZOA Refugee Care	975,262	975,262	-	975,262	0%	
Grand Total	365,424,039	620,770,033	210,827,298	409,942,735	34%	-

NOTE: "Funding" means Contributions + Commitments + Carry-over

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

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2. CHANGES IN THE CONTEXT, HUMANITARIAN NEEDS, AND RESPONSE

2.1 CONTEXT

The first six months of 2011 brought historic changes to the territory that would become the world's newest nation, the Republic of South Sudan, in July 2011. Some of these changes were foreseen and captured in the most likely planning scenario developed by humanitarian actors for 2011. Others have exceeded expectations, resulting in a deterioration of the situation more closely in line with aspects of the worst-case scenario. Negotiations on several 2005 CPA benchmarks, including border demarcation and the status of Abyei, remain unresolved and internal armed opposition has spread, causing a deterioration of security that has become the most important factor impacting the humanitarian situation.

Preparations for statehood have continued amidst political tensions

The referendum balloting on southern independence began on 9 January 2011 as scheduled and passed peacefully. The plebiscite resulted in a 99% vote for independence, paving the way for the establishment of an independent nation - the Republic of South Sudan (RoSS) – at the end of the CPA on 9 July 2011. The Government of South Sudan (GoSS) has announced a commitment to forming a broad-based transitional administration, during which time a permanent constitution will be developed and democratic elections held. A Transitional Constitution for the RoSS has been drafted and includes key provisions on the territory of the state, citizen's rights and core functions of various arms of government.

Despite the peacefulness during the lead-up to the referendum, relations between northern and southern Sudan deteriorated sharply in the post-referendum period. Negotiations over the final aspects of the CPA and southern secession have been marred by mutual accusations. The status of Abyei remains a major source of friction, exacerbated by the military takeover of the area north of the Bahr el Arab/Kiir River in May by the Sudanese Armed Forces and the GoS' unilateral dissolution of the Abyei Area Administration. The south is set to secede with this and other major aspects of its relationship to the north – including debt management, wealth sharing and the demarcation of the border – undefined.

Internal political tensions have also deteriorated during the post-referendum period. Opposition parties have expressed concerns over the drafting of the Transitional Constitution and a number of rebel militia groups (RMGs), several of which were proxy forces for the north during the civil war, have emerged. Expectations among southerners that independence will bring an immediate improvement in living conditions remain high, raising the risk of increased popular frustration if inequities are not addressed in the first years of statehood.

A more complex dynamic of insecurity and violence has emerged after the referendum

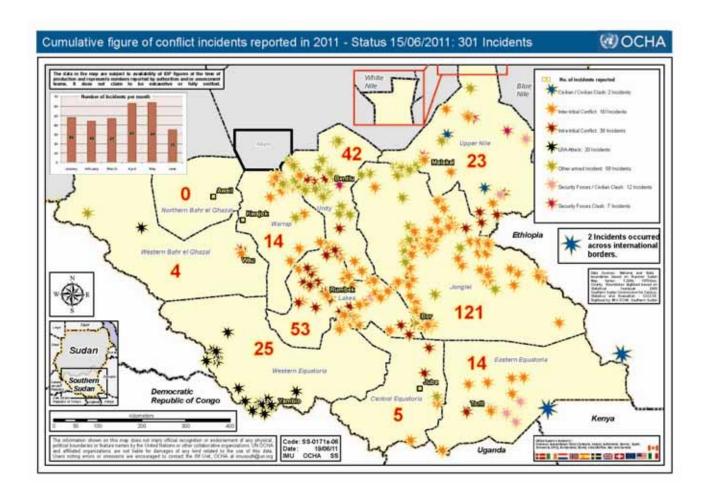
Despite the peaceful referendum, insecurity and violence increased significantly in the weeks following the historic referendum, with at least seven rebel militia groups (RMGs) beginning or scaling up attacks against the SPLA. RMGs are currently concentrated in areas of strategic importance in South Sudan, including Jonglei, Northern Bahr el Ghazal, Unity, Upper Nile states, as well as areas where internal fighting along ethnic lines was fiercest prior to the CPA. Efforts to combat the insurgency have put civilians at grave risk. Extensive re-mining along transport routes has occurred in Unity State and in parts of Jonglei State and security forces have arbitrarily detained people and destroyed property. Gender-based violence (GBV) has increased and there are numerous incidents of forced recruitment.

In early 2011, the Joint Defense Board ordered the disbanding of Joint Integrated Units (JIUs) by 30 April, except in locations near oil fields and in Abyei. On 3-5 February fighting broke out among soldiers within Sudanese Armed Forces' JIUs; although most of the JIUs in the south were dissolved peacefully. On 23 May, the Government of Sudan issued a directive for all SPLA members of JIUs in Southern Kordofan and Blue Nile states to move south of the 1-1-56 border by 31 May. At the same

time, the build-up of troops along both sides of the border by both parties raised the prospect of violence, particularly in disputed border areas.

Inter-communal violence has continued during the period. Conflict between the Lou Nuer and Murle tribes in Jonglei came to a head in April, with the start of large-scale reprisal attacks – involving up to several thousand attackers at a time. At least 10,000 Murle were displaced within Jonglei and some 20,000 Lou Nuer temporarily displaced across the border into Ethiopia. Conflict between the Dinka and Bel tribes along the border of Western Equatoria and Lakes states also erupted into more than two months of fighting which caused widespread destruction of villages and displaced more than 40,000 people from both communities. Focused on the referendum and lacking domestic law enforcement capacities, political leaders struggled to address ethno-political rifts, unresolved grievances, and a lack of opportunities for youth, all of which continue to drive local conflicts.

By mid-June, at least 1,800 people had been reported killed and more than 264,000 displaced by conflict incidents according to reports by local authorities and/or assessment teams including 110,000 people from Abyei into Agok and Warrap State after aerial bombardment by the Sudanese Armed Forces and the widespread looting and torching of villages in Abyei. The LRA continued to terrorize the people of Western Equatoria, conducting 20 attacks, killing 17 people and displacing more than 7,000.



Economic stability is threatened by commercial blockages and insecurity

The GoSS is entering statehood in a highly vulnerable economic situation dependent on oil revenue for more than 95% of its national budget. With the terms of wealth-sharing between the north and south still unresolved, there is considerable concern about the viability of the new state. South Sudan also remains highly dependent on the import of food and non-food goods from the north. In May, blockages along the four main north-south transport routes restricted the commercial imports of basic goods, causing shortages of fuel other key commodities. In major cities, fuel costs tripled. A study of 2011 markets released in May indicated that there had been a 40% decline in the volume of goods received from the north since January. Scarcity of goods and high prices increased the threat of food insecurity for millions, while the lack of fuel hindered humanitarian response in several areas.

Basic and life-saving services continue to be provided by humanitarian actors

The GoSS is elaborating its first South Sudan Development Plan covering the period from July 2011 to July 2013. The plan outlines key objectives and activities across four pillars: economic growth, governance, social and human development and security. However, with one of the largest capacity gaps in the continent, the Government is estimating that it will require a generation before it can begin direct provision of frontline social services. NGOs have continued to provide the majority of education, health, nutrition, and water, sanitation and hygiene (WASH) services during the first half of 2011 and will almost certainly have to continue doing so in the first years of statehood.

The 4,013 new cases of kala-azar (visceral leishmaniasis) recorded between January and April 2011²⁴ was a nearly fourfold increase from the same period in 2010 (1,118). A sharp decline in security and widespread displacement in northern Jonglei reduced patients' access to treatment by over 70% in March and April. A number of measles outbreaks in areas receiving high numbers of returnees occurred in early 2011, as well as an outbreak of meningitis in Northern Bahr el Ghazal.

Massive return movements from northern Sudan have occurred

South Sudanese returned from northern Sudan in large numbers in late 2010 and early 2011 following the start of GoSS' accelerated repatriation drive. By mid-June 2011, more than 306,000 southerners had arrived since October 2010 – including nearly 128,000 since 1 January – exceeding projections in the 2011 Sudan Work Plan. At the height of the influx, approximately 2,000 returnees arrived per day, though this has since slowed to an average of fewer than 1,000 per week due to lack of GoSS funding for transport and insecurity in Southern Kordofan and Abyei. A number of returnee convoys were attacked, returnees killed and luggage looted as convoys passed through these areas in January. Experts predict that the rate of return could rapidly increase in the lead-up to and after southern independence, due to a new initiative by the GoSS to facilitate returns and concerns about the status of southerners in the north after independence.

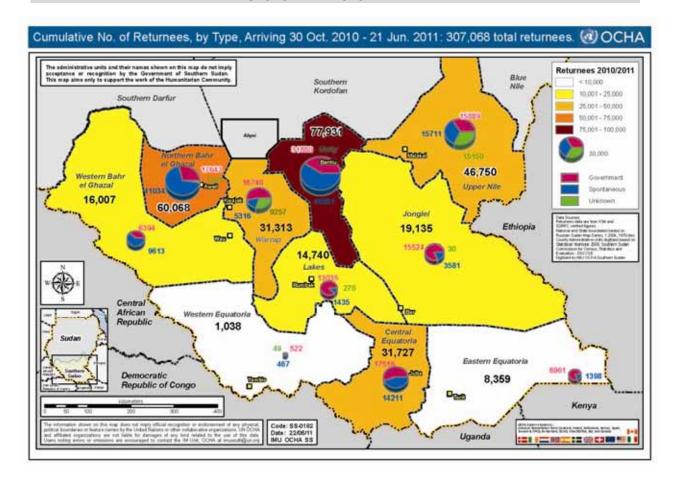
The majority of returnees are concentrated in the border states of Unity, Northern Bahr el Ghazal, Upper Nile and Warrap. Approximately 75% of the recent returnees have settled in rural areas, although many are choosing to settle in the main cities of South Sudan. While most people have been able to reach their final destinations at the county or village level, population build-ups have occurred in several locations, most notably in Aweil in Northern Bahr el Ghazal and Kwajok in Warrap. The sheer number of returns has placed a serious burden on the humanitarian operation. Increased insecurity in many areas of high return – including Mayom County in Unity State – has contributed to secondary displacement and disrupted reintegration. Unclear policies in some states and a slow pace of land allocation have also contributed to population build-ups, increase vulnerability, food insecurity, lack of livelihoods and protection concerns.

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²² For example, 98.9% of fuel was imported from northern Sudan in 2010.

²³ "Referendum Impacts on Market Flows and Livelihoods," a report by the Famine Early Warning Systems Network and USAID, May 2011

²⁴ Data were not available at the time of printing for May or June 2011.



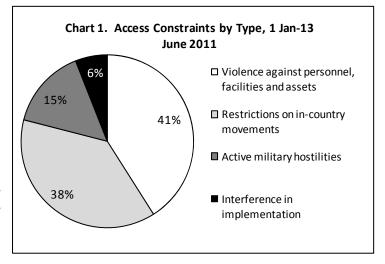
Prospects for food security have improved, but recent gains could easily be reversed

Despite indications that food security would improve in 2011 compared to 2010, experts have identified a growing number of risk factors in early 2011 that have the potential to reverse gains. The Annual Needs and Livelihoods Analysis, published in February 2011, estimated that 36% of the population – nearly three million people – will continue to be either severely or moderately food-insecure during 2011. Assessments show that 1.4 million people will require food assistance at some point during the March to August lean season. A number of developments since these analyses may increase this caseload, including large-scale displacement, additional returns from the north and insecurity. A sharp reduction in the availability of foodstuffs and basic commodities and a sharp rise in prices, particularly in northern border states, is also a major concern following blockages of commercial traffic from the north. By mid-year, cereal food prices in some areas were 35 - 200%

higher than the five-year average. ²⁵ Erratic and below-normal rainfalls in parts of the south are also a significant concern.

Humanitarian space is contracting

The rise in violence in early 2011 was accompanied by a worrying contraction in humanitarian access and space in parts of the south. Humanitarian partners recorded 57 incidents in which state actors interfered with relief operations or restricted the movement of humanitarian personnel, assets or supplies during the first part of the year.



²⁵ Prices in Wau were 35% higher and prices in Malakal were 200% higher than average price from 2006-2010. Source: "Referendum Impacts on Market Flows and Livelihoods," the Famine Early Warning Systems Network and USAID, May 2011.

In the most grievous incidents to date, one humanitarian aid worker was killed in an attack by armed assailants and another remains missing, feared dead, following the commandeering of six humanitarian vehicles by SPLA troops. Fresh mining of roads and agricultural areas by RMGs also constrained the ability of humanitarians to reach communities in need, particularly in northern Jonglei and Unity. Interference with humanitarian operations imposed serious costs on the relief effort in early 2011 in terms of delays, lost funds, lost supplies and by impacting the safety and security of humanitarian personnel.

2.2 REVISED MOST LIKELY SCENARIO

A broad range of partners consulted during the mid-year review (MYR) identified the need to adjust the planning scenarios for the latter half of 2011 to account for current and emergent risks. While aspects of the original most likely scenario remain relevant, it was agreed that political and security elements had deteriorated beyond original projections, as had humanitarian access, and that this pattern is likely to continue into late 2011. The revised scenario below elaborates these factors. With the state still lacking the capacity to respond fully to the needs of communities, humanitarian partners will be required to step up the relief effort just as access constraints have made it harder and more costly to reach at-risk populations.

Insecurity and political tension increase. The south secedes peacefully and is recognized by the Government of Sudan despite earlier threats to the contrary. Political tensions between Sudan and South Sudan remain high in the post-CPA period, fuelling mutual allegations of involvement in domestic unrest and the continued reliance on military approaches to solve the status of Abyei. Military from both sides remain heavily concentrated along the border, resulting in a 'hard' border and sporadic heavy clashes in contested or sensitive areas. Activity by RMGs continues at a high level, impacting heavily the northern border states, militarizing major transport networks and contributing to an 'in-land' security vacuum in other parts of the country. Efforts by the state to broker negotiated solutions with rebel militia leaders are rejected in favour of an intensifying military crackdown, resulting in some cases in the successful neutralization of militia groups and in others contributing to the hardening of rebel positions, alliance-building, and politicization of agenda. Civilians continue to bear the brunt of the violence, affected by re-mining, deliberate attacks and forced recruitment. Intercommunal clashes and cattle-raiding abate as the wet season progresses, except Eastern Equatoria where rains are erratic. Attacks by the LRA continue along the border areas of South Sudan, Democratic Republic of Congo (DRC) and Central African Republic (CAR), causing further displacements in Western Equatoria. Internal fracture lines - including among opposition parties frustrated at their perceived marginalization and among the wider population over the slow pace of social reform – deepen.

Access to basic services remains limited, and is further stretched by southerners returning from the north. Facing internal military threats and tension along the border, South Sudan focuses on defending its territory and negotiating outstanding aspects of the CPA. Social and development priorities are edged out and South Sudanese expectations for an immediate improvement in living conditions not realized. Pressure to create new counties grows in areas with long-standing intercommunal disputes, especially where land rights are contested. The economic status of the new country is precarious in its first months of statehood, as national economic policy continues to be dominated by short-term political and military priorities and the new currency is introduced with insufficient foreign reserves. Insecurity also continues to deter foreign investment and contribute to fluctuating oil revenues. The amount of basic commodities in the market continues to drop and the price of goods rises due to continuation of road blockages from the north, slow implementation of new customs procedures and the impact of RMG activity and seasonal rains. South Sudanese continue to return from the north, with the pace of arrivals increasing around the secession period and immediately after. Return convoys face insecurity as they transit through fragile zones along the border, which both governments struggle to protect adequately. As a result, the majority of returnees enter South Sudan via transport routes into Upper Nile State, causing large numbers to become stranded in Melut County and in ports along the river, as onward transportation becomes impossible

during the wet season. Stranded groups require significant emergency humanitarian assistance in the immediate term and onward transportation assistance and reinsertion support at final destinations after roads reopen in October.

Increased insecurity and displacement, the return of South Sudanese, and humanitarian access challenges impact negatively on the humanitarian situation. Continuing clashes between the army and rebel militia groups, inter-communal violence, and instability along the northern border results in 500,000 people cumulatively displaced by the end of the year. Communities and returnees living in border states, including Upper Nile, Unity State, Warrap, Jonglei and Northern Bahr el Ghazal, are most affected. Specific military tactics by rebel militia and the SPLA result in high levels of civilian deaths and casualties, and widespread displacement contributes to the spread of diseases including kala-azar. An improved 2010 harvest increases food security for some. However, the impact of insecurity starts to reverse progress late in the year, deterring trade by regional states and pushing up prices particularly in volatile border states. Erratic and below-normal rainfalls in parts of South Sudan also reduce agricultural production in the autumn harvest, driving malnutrition above emergency thresholds. A return to normal rainfall patterns late in the rainy season causes flooding in low-lying and other flood-prone areas. Frontline agencies struggle to respond to increased humanitarian needs, hampered by lack of funding and insufficient technical response capacity. Operating constraints continue to deteriorate as a result of SPLA violations of humanitarian principles, explicit government restrictions on access to certain conflict zones, insecurity, and the poor state of infrastructure. Access restrictions increase the costs of operation, creating additional delays, financial losses and security risks for humanitarian staff. The capacity of humanitarian actors to reach communities in need is also impeded, with several agencies having to restrict or temporarily close operations in insecure or logistically inaccessible areas.

Caseload for the revised most likely scenario (change at mid-year)

Internally displaced	Returnees	Refugees	Indirectly affected and others requiring assistance
Up to 500,000 people displaced by border clashes, inter-tribal violence and LRA attacks, including some 300,000 from mid-year to December	530,000 southern IDPs return from Sudan, including 400,000 from mid- year to December	Few South Sudanese flee to Uganda, Kenya, Ethiopia and other countries	1.2 million requiring food assistance

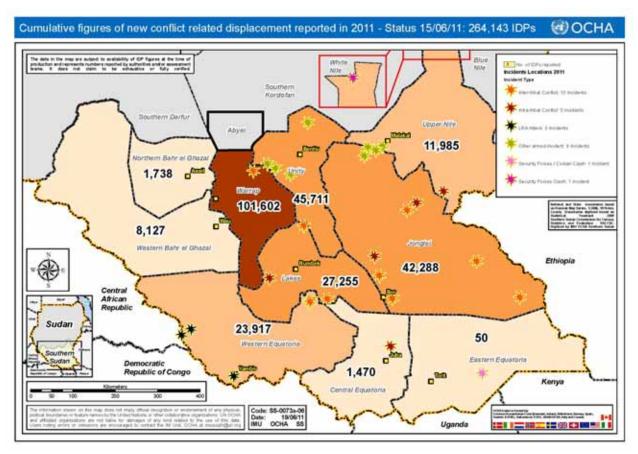
2.3 SUMMARY OF RESPONSE TO DATE

The deteriorating humanitarian situation in South Sudan resulted in 34 emergency operations in 51 of South Sudan's 79 counties by mid-year. The two single largest operations were the emergency response to the influx of more than 306,000 returnees since late 2010 and to the displacement of more than 110,000 people from Abyei in May.

In response to the influx of returnees, humanitarian partners provided short-term emergency assistance to returnees in transit or stranded and a reinsertion package in their final destinations, based on assessed needs. Returnees were provided three months of food and limited non-food items and emergency shelter, as needed, upon arriving in their final destinations. Returnees and receiving local communities were provided with access to an improved water source or hygienic latrines. Mobile clinics were launched in transit sites and other locations with high concentrations of returnees. At least three mass immunization campaigns were launched to respond to several outbreaks of measles among the returnee and local communities. Protection partners monitored vulnerable groups including unaccompanied minors and people returning to areas infested with landmines, raising critical issues to the attention of the Deputy Humanitarian Coordinator and the Protection of Civilians integrated-UN working group. An Emergency Returns Sector was established in Juba in November 2010, which provided policy guidance in support of partners providing emergency assistance to returnees across South Sudan. In collaboration with the clusters and the Office for the Coordination of Humanitarian Affairs (OCHA), the sector developed and released cluster-specific operational

guidelines to support emergency interventions. It also supported the GoSS in the development and dissemination of its Procedures on Returns, Reinsertion and Early Reintegration.

The sudden displacement of more than 110,000 people from Abyei in May resulted in the launch of a comprehensive emergency response that spanned more than 20 villages in four states, including Warrap, Unity, Northern Bahr el Ghazal and Western Bahr el Ghazal. Initial food rations, NFIs and emergency shelter were distributed within days of the onset of the crisis. By 15 June, the United Nations World Food Programme (WFP) had assisted more than 100,000 with food assistance, although insecurity hampered efforts to deliver large quantities of food to Agok. 2,818 households of internally displaced people (IDPs) in Agok have been provided with assorted farming inputs by the Food and Agriculture Organization of the United Nations (FAO). More than 1.800 fishing kits in Kwajok and Turalei were ready for distribution to displaced households and returnees for the fishing season, which stretches from July to September. NFIs were distributed to over 13,700 households (approximately 68,500 displaced people), though significant challenges remained in emergency shelter. Health partners increased the number of health workers in the affected areas, focusing on the treatment of surgical cases and as well as provision of primary health care (PHC). Nutrition partners have expanded screening and referral services to out-patient care and stabilization centres to reach out to displaced people. The Logistics Cluster began deliveries of fuel, which is in severely short supply in the affected area, and provided trucks to transport some of the relief supplies to distribution points. Child protection activities including family tracing and re-unification have started, targeting some 110 children separated from their primary caregivers.



A number of other operations have been conducted nearly continually in response to widespread intercommunal violence and RMG activity, most notably along the Western Equatoria/Lakes state border, in the Lakes-Unity-Warrap triangle area, and in Jonglei and Upper Nile. Approximately 150,000 people were displaced by this violence in the first half of 2011, causing an average of three interagency emergency assessments to be conducted per week. Based on assessment findings, humanitarian actors provided life-saving support to the displaced, including food, NFIs, health, protection and WASH services.

Other critical operations included the emergency response to the kala-azar outbreak and high levels of severe acute malnutrition (SAM). In response to the more than 4,000 new kala-azar cases admitted in 2011, dozens of partners worked to ensure better access to treatment services and to implement new treatment protocols. Partners also launched a health education campaign and a multi-sectoral approach involving nutrition, NFI, food, health and WASH Clusters. As a result, the case fatality rate (CFR) has been significantly reduced (2%) compared to previous outbreaks in 2003 and 1990 (CFR >30%). Severe and moderate acute malnutrition (MAM) continued to affect some 230,000 children in South Sudan. Malnutrition remained above emergency thresholds in much of South Sudan in 2011, as shown in Chart 2. In response, nutrition partners treated at least 18,094 children under five with SAM, or 23% of the estimated 78,000 severely malnourished children in South Sudan. At least 9,426 children under five and 6,740 children aged 6-24 months were treated for MAM through targeted and blanket supplementary feeding programmes, respectively.

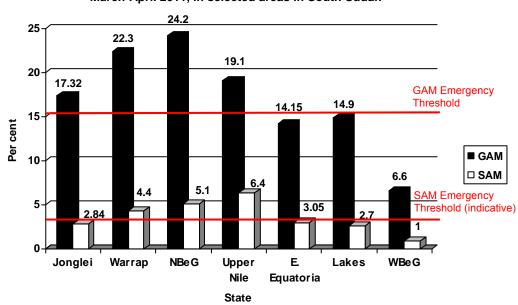


Chart 2. Prevalence of acute malnutrition in children under age 5 years, March-April 2011, in selected areas in South Sudan

Source: 2011 Pre-harvest SMART nutrition surveys conducted by Nutrition Cluster members in 17 counties in the above listed states

2.4 UPDATED NEEDS ANALYSIS

Devastated by decades of civil war, South Sudan suffers from extreme income poverty, a lack of basic services and numerous insecurity and environmental threats. Over half the population lives below the poverty line and more than 90% are income-poor. Decades of marginalization and one of the longest civil wars in Africa have left South Sudan with some of the worst humanitarian indicators in the world. Access to basic health services remains minimal and the number of trained health workers at the village level is insufficient. South Sudan is host to many of the world's most communicable – but preventable – diseases. The country has one of the highest maternal mortality rates in the world (2,054 per 100,000 live births²⁷), putting the lives of more than 2.2 million women of child-bearing age in grave jeopardy.

Fewer than half of South Sudanese children are enrolled in primary school²⁸ and only 64% of enrolled primary students were promoted to the next grade in 2009.²⁹ The water and sanitation situation in South Sudan is also bleak: just over half the population has access to improved sources of drinking

16

²⁶ Poverty in Southern Sudan: Estimates from NBHS, 2010.

²⁷ Southern Sudan Household Health Survey, 2006.

²⁸ 2010 Education Statistics for Southern Sudan, GoSS, 22 February 2011.

²⁹ Ibid.

water³⁰ and only 20% of people have access to improved sanitation.³¹ The population suffers from chronically high levels of food insecurity, with 47% of the population undernourished³² and an average of 816,000 people per month requiring emergency food assistance.³³ During the lean season, this will increase to up to 2.7 million people per month.³⁴ A significant proportion of the population (as high as 33% in the lean season) therefore continues to depend on food aid to ensure a minimum level of nutritional intake.

With such a high proportion of households living on or below the poverty line and unable to access basic services, the population can be quickly overwhelmed by basic hazards. This significantly reduces the capacity to absorb unforeseen shocks and presents an inability to cope with adverse affects. Over 90% of households surveyed in the 2009 National Baseline Household Survey (NBHS) reported suffering from shocks in the prior five years, with some of the most common including droughts and floods. With 78% of households dependent on crop farming or animal husbandry as their primary source of livelihood³⁵, natural disasters such as the annual floods or droughts affecting the country can have drastic consequences on households' coping mechanisms. A delay or inability of a household to plant may result in their reliance on food aid and other humanitarian assistance for a prolonged period.

With this fragile status as a baseline, the insecurity and violence threatening communities undermine the population's ability to cope. The spike in insecurity has caused the displacement of over 264,000 people since the start of the year. As a result, many communities are unable to participate in the productive cycle, further deepening their reliance on external aid. Displacement is placing additional pressures on local health, water, sanitation and education resources, which are already insufficient for host communities, overwhelming the coping mechanisms of both host and displaced communities. The situation is further complicated by the return of over 300,000 South Sudanese since October 2010 many of whom are settling in communities which have insufficient basic services. Competition over scarce resources increases the likelihood of inter-communal violence and further displacement.

The country's structural vulnerability and its population's low resilience to shocks are likely to continue, as will the Government's limited capacity to provide basic social services and respond to emergency needs. As a result, the humanitarian situation is expected to remain precarious in the foreseeable future. A robust humanitarian operation is necessary to save lives, promote human dignity and protect civilians, particularly in the face of increasing displacement, insecurity and natural disasters, but must also be complemented by significant investments in the development of South Sudan in order to foster a viable exit strategy for the humanitarian operation.

2.5 ANALYSIS OF FUNDING TO DATE

The 2011 Sudan Work Plan included a request from UN and NGO partners for \$621 million in support of 256 projects focused on southern Sudan. By 30 June, \$211 million - or 34% - had been secured, as compared to 42% funding received at the 2010 mid-year. This widening of the funding gap for humanitarian action in South Sudan has occurred during the most critical period in its history, underresourcing critical emergency actions. The Health, Logistics, Mine Action, Protection, Multi-Cluster, NFI, and WASH Clusters have received less than 30% of their requirements. Within the Food Security and Livelihood Cluster, non-food assistance such as agriculture/farm input support, veterinary services, and fisheries have received only 16% of funds required.

As shown in Table A below, of the projects that received funding, projects categorized as high priority received 35% funding whereas projects categorized as medium priority received only 22%.

³⁰ National Baseline Household Survey, 2009.

³¹ NBHS 2009, as cited in the 2011-2013 South Sudan Development Plan.

³² Central Bureau of Statistics (2010) Food and Nutrition Security Assessment in Sudan.

³³ GoSS, WFP and FAO Crop and Food Security Assessment Mission to Southern Sudan, 2011.

³⁴ Ibid

³⁵ Business Survey Listing, 2010.

Table A. South Sudan project funding by prioritization category, as at 2011 mid-year

# Projects	Priority	Original requirements \$	Revised requirements \$	Secured funding	Funding Level (%)
161	High	276,308,512	500,167,201	174,407,353	35
95	Medium	89,115,527	120,602,832	26,262,039	22
256	TOTAL	365,424,039	620,770,033	200,669,392	34

During the development of this first Consolidated Appeal for South Sudan, partners reviewed and updated their projects and requirements in light of the changed context and planning scenarios. In sum, this appeal presents a revised total requirement of \$621 million for 256 projects. (See Table B below.) A significant increase in funding for humanitarian actions will be critical to ensuring emergency response during the first months of South Sudan's statehood.

Table B. Summary of funding requirements and funding status, as of 30 June 2011

Cluster	Revised Number of Projects	Revised needs (\$, million)	Funding Received (\$, million)	Proportion Funded (%)	Sudan CHF funding to southern clusters, as percentage of cluster requirements	Total CHF allocation for southern Sudan, by cluster
Common Services and Coordination (Sector)	5	37.6	23.4	62	10%	3,723,122
Education	21	39.6	16	41	10%	3,999,984
Food Security and Livelihoods	36	118.4	70	59	3%	3,200,000
Health	62	81.8	21.3	26	11%	9,156,348
Logistics	9	92.9	13.3	14	3%	2,333,384
Mine Action	10	15.2	4	26	5%	819,945
Multi-Cluster36	4	60.3	1.7	3	3%	1,698,984
NFI and Emergency Shelter	15	15.3	4.3	28	25%	3,802,556
Nutrition	22	34.5	17.1	50	16%	5,635,195
Protection	29	53	8	15	8%	4,074,685
WASH	43	72.4	19.2	26	11%	8,290,895
Cluster no yet specified			12.7	n/a		
Total	256	621	211	34	15	46,735,098

^{**}Non-food assistance such as agriculture, veterinary services, and fisheries is a hidden factor. Only about 17% of the requirement has been funded to date

Funding by cluster and UN/NGO

Seven of the eleven clusters/sectors are less than 30% funded. The least funded are multi-cluster which now includes the Emergency Returns Programme (3%), Protection (15%), Health (26%) and WASH (26%). Only the Food Security and Livelihoods Cluster and the Common Services and Coordination Sectors are funded over 50%. However, within the Food Security and Livelihood Cluster, the food assistance component is funded at 83%, while non-food assistance such as agriculture/farm input support, veterinary services, and fisheries received only 16% of funds required. UN agencies are 41.3% funded, having received \$168.5 million of the requested \$408 million, while NGOs are only 19.8% funded, having received \$42.3 million of the requested \$212.8 million.

Projects not included in the CAP

There are ten projects that are not included in the CAP worth \$31,153,282 in four cluster/sectors: FSL (1), Health (2), Mine Action (2) and WASH (5). Most of this is Mine Action: projects worth \$28,805,666 are funded out of the assessed budget and multi-donor trust fund for Humanitarian Mine Action. Five non-CAP projects worth \$944,091 in the other three clusters are emergency response projects funded out of the Emergency Response Fund (ERF). One project in the Health Cluster was funded \$349,628 through the Common Humanitarian Fund (CHF) emergency reserve in late 2010.

³⁶ Includes projects classified under the Returns and Early Reintegration Sector in the 2011 Sudan Work Plan.

3. PROGRESS TOWARDS ACHIEVING STRATEGIC OBJECTIVES AND SECTORAL TARGETS

3.1 STRATEGIC OBJECTIVES

The Humanitarian Country Team (HCT) in South Sudan identified seven strategic objectives to guide the humanitarian operation in 2011. Achievement at the mid-year against these objectives is noted below. An eighth objective has been added at the mid-year to address the deteriorating operational environment.

Strategic Objective 1: Being ready to respond to any emergency by prepositioning pipelines, securing alternative supply routes, upgrading access routes, mobilizing early funding, mobilizing emergency response partners, strengthening humanitarian coordination structures particularly at the state level, and improving assessment methodologies.

• Achievements as at mid-year: Core pipelines were successfully prepositioned as planned by January 2011, in preparation for the referendum period and as an advance effort to prepare for the wet season. This was a major accomplishment for the humanitarian operation, and is a key to the successful response to the influx of over 300,000 returnees, more than 110,000 people from Abyei and another 140,000 IDPs. After North-South supply corridors closed, the Logistics Cluster began facilitating alternative supply sources for front-line humanitarian actors in the greater Bahr el Ghazal area through the Common Transport Services, a service provided free of charge to the humanitarian community.

Strategic Objective 2: Responding as quickly as possible to emergencies by rapidly assessing at-risk populations using standardized methodologies, drafting realistic action plans, mobilizing logistics support, synchronizing the delivery of core pipelines, deploying cluster teams at the state level and ensuring inter-cluster coordination at the Juba level.

 Achievements as at mid-year: the increased number of dedicated cluster coordinators in early 2011strengthened cluster leadership and inter-cluster coordination in Juba. OCHA developed a database to systematically track ongoing humanitarian response, as an accompaniment to its incident database. The NFI and Emergency Shelter Cluster reported a 35% improvement in response timeliness, reducing from an average of 14 days to nine days.

Strategic Objective 3: Providing emergency assistance and protection to South Sudanese returning from the north by identifying transit routes and establishing protection mechanisms along these, establishing reception centres south of the border, providing emergency and early reintegration support to returnees following their registration and providing returnees with information on reintegration opportunities.

• Achievements as at mid-year: Emergency response for returnees composed a major part of the humanitarian operation in 2011. Partners provided emergency food assistance and NFIs and emergency shelter to returnees upon arrival at final destination or, in exceptional cases, for those stranded in transit. Mobile health clinics were increased, nutrition services provided, and emergency water and sanitation capacities were set up. Protection partners have monitored returnees during their journey through insecure areas in Abyei and Southern Kordofan, and worked closely with UNMIS in the integrated UN working group on protection of civilians to ensure UNMIS support to returnees wherever possible.

Strategic Objective 4: Maintaining front-line services by ensuring that UN agencies and NGOs have sufficient funding and capacity to continue to provide life-saving health care, education and safe water services to millions of people.

 Achievements as at mid-year: UN agencies and NGO continued to provide the majority of front-line basic services in South Sudan, particularly in remote and conflict-prone areas. The

influx of returnees and increase in displaced people significantly increased the pressure on these basic services, causing agencies to further scale up to cope with the additional needs.

Strategic Objective 5: Helping households re-enter the productive cycle as quickly as possible by ensuring that seeds and tools and other livelihood inputs are delivered to populations as quickly as possible, helping to resolve land tenure issues, introducing and scaling up innovative safety nets to reduce food assistance in stable areas, and advocating stabilization activities and programmes in counties receiving or producing the largest number of IDPs.

• Achievements as at mid-year: As of mid-year, some 120,000 households have been provided supplies to re-enter the productive cycle and improve their food security, amounting to 80% of the targeted caseload. Returnees and other vulnerable households composed a significant portion of this caseload. Insufficient land allocation to returnees for agricultural use emerged as a major challenge to participation in the productive cycle, leaving a heavier demand on the already insufficient crop production in South Sudan.

Strategic Objective 6: Improving state level humanitarian coordination by establishing humanitarian state teams, reinforcing OCHA's presence, completing the roll-out of the cluster system at the state level and introducing standardized tools for assessments, action plans and monitoring that will be used by all state teams.

• Achievements as at mid-year: Humanitarian coordination at the state level was reinforced in early 2011 through the consolidation of OCHA's re-engagement in six states, as well as through the continuation of the roll-out of the cluster system at the state level. By mid-year, six of the ten clusters were functioning well in at least 60% of the states. Cluster coordinators identified the limited capacity of state-level cluster focal points – most of whom are NGO staff – to take on coordination functions in addition to their project management work as a key challenge to the function of clusters at the state level. An initial rapid assessment tool was also drafted by the cluster coordinators in Juba, was piloted and is undergoing further refinement.

Strategic Objective 7: Strengthening protection by prioritizing efforts to reduce SGBV, working to remove all children from barracks and prisons, advocating better physical protection of vulnerable communities, particularly in areas affected by LRA attacks and inter-tribal violence, and where forced disarmament in under way.

• Achievements as at mid-year: As the security and humanitarian situation deteriorated in early 2011, the HCT satellite in Juba increased its efforts to better protect civilians. Several members of the HCT satellite participated in a weekly protection of civilians UN-integrated working group with UNMIS and child protection partners re-launched the working group on Security Council Resolution 1612 to better monitor and report on grave violations of children's rights. The Protection Cluster conducted 36 assessments to document the protection needs and threats in communities across the South.

In response to the deteriorating operational context, the South Sudan HCT has added an eighth strategic objective: **Advocating an improved operating environment** by strengthening humanitarian access monitoring and reporting capacities, launching an access technical working group, assisting HCT members to advocate on all levels using coordinated messages, reinforcing relations with UN Department of Safety and Security to manage risks, and developing new ways of engaging with armed forces and groups in South Sudan.

Achievement against the indicators identified to measure progress on the South Sudan Strategic Priorities is noted below. The new Inter-Agency Standing Committee (IASC) standard indicators were reviewed for the strategic priorities matrix, and by the individual clusters, with several changes made at the cluster level.

2011 South Sudan Strategic Priorities Monitoring Matrix								
2011 Strategic Priority	#	2011 Indicator	2011 Target (change)	Achieved as of mid-year				
Being ready to respond to any emergency by prepositioning pipelines, securing alternative supply	1	Proportion of all pipeline supplies successfully prepositioned as planned	100%	100%				
routes, upgrading access routes, mobilizing early funding, mobilizing emergency response partners, strengthening humanitarian coordination structures, particularly at the state level, and improving assessment methodologies	2	Number of previously logistically inaccessible communities reached with emergency assistance	25	To be reported at end year				
2. Responding as quickly as possible to emergencies by rapidly assessing at-risk populations using standardized methodologies, drafting realistic action plans, mobilizing	4	Average length of time between new incidents of displacement and the completion of an inter-agency assessment and the provision of assistance (where necessary)	<1 week to complete assessment <2 weeks to provide assistance	To be reported at end year				
logistics support, synchronizing the delivery of core pipelines, deploying cluster teams at the state level and ensuring inter-cluster coordination at the Juba level	5	Proportion of displaced or flood- affected women, girls, boys and men verified to need assistance that actually receive humanitarian assistance	100%	To be reported at end year				
3. Providing emergency assistance and protection to southerners returning from the north by identifying transit routes and establishing protection mechanisms along these, establishing reception centres south of the border, providing emergency and early reintegration support to returnees following their registration and providing returnees with information on reintegration opportunities		Proportion of returnees who are secondarily displaced by the search for services	< 20%	Some secondary displacements were caused by increased insecurity, particularly in Mayom, Unity and northern Jonglei				
4. Maintaining front-line services by ensuring that UN	7	Percent coverage of DPT 3 vaccine (baseline 43%).	50% (↓)	40%				
agencies and NGOs have sufficient funding and capacity to continue to provide life-saving health care, education and safe water services to millions of people in the South	8	Estimated number of people provided with access to an improved water source (based on adapted standard of 500 people/water source or 20/L/person/day) ³⁷	1,000,000(↓)	269,552				
5. Helping households re-enter the productive cycle as quickly as		Percentage decrease of severely food-insecure households	33%	50%				
possible by ensuring that seeds and tools and other livelihood inputs are delivered to populations as quickly as possible, helping to resolve land tenure issues, introducing and scaling-up innovative safety-nets to reduce food assistance in stable areas, and advocating for stabilization activities and programmes in counties receiving or producing the largest number of IDPs	10	Percentage decrease of total projected cereal deficit	25%	29%				

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³⁷ Standard is adapted from SPHERE and agreed at cluster as 500 people per improved water source; where L/day measured, standard of 20 L safe water/person/day. Coverage figures of emergency affected require use of SSWICH on existing water sources. For each type of source (water points x 500 people) and water systems (capacity/20 L/day), the numerator = new + existing + previously repaired for emergency affected areas. Denominator = Estimated # of affected population in corresponding affected area (displaced, returnees, host) based on census data for affected payam or boma as relevant + estimates on displaced + returnees/payam or boma.

6. Improving state level	11	Proportion of clusters functioning	100%	60% ³⁸
humanitarian coordination by establishing humanitarian state		in at least 50% of states	10070	0070
teams, reinforcing OCHA's presence, completing the roll-out of the cluster system at the state level and introducing standardized tools for assessments, action plans and monitoring that will be used by all state teams		Proportion of emergency assessments that utilize the new multi-cluster rapid assessment too	100%	Tool undergoing further refining
7. Strengthening protection by prioritizing efforts to reduce sexual and gender-based violence, working		Percentage of people reached in flashpoint areas is higher than in 2010	80%	50%
to remove all children from barracks and prisons, and advocating for better physical protection of vulnerable communities, particularly in areas affected by LRA attacks and intertribal violence, and where forced disarmament in under way	14	Number of individuals (disaggregated by sex and age) reporting sexual assault to a trained health care provider, police working in the special protection units, social workers and/or GBV case managers	4,500 girls, 156 boys, 7,800 women and 225 men (25% of person age 10-49 years)	To be reported at end year
8. Advocating for an improved operating environment by strengthening humanitarian access monitoring and reporting capacities, launching an access technical working group, assisting HCT members to advocate on all levels using coordinated messages, reinforcing relations with UNDSS to manage risks, and developing new ways of engaging with armed forces and groups in South Sudan (new)	15	Steps taken by political and military leadership to secure an improved operating environment for humanitarian work (new)	At least two steps taken by end year	To be reported at end year

The cluster specific breakdown of the percent of the 10 states where the cluster self-rated its state-level clusters to be well functioning is: Education 60%, Food Security and Livelihoods 70%, Health 100%, Logistics 30%, NFI and Emergency Shelter 50%, Nutrition 60%, Protection 100%, WASH 60%.

3.2 CLUSTER RESPONSE PLANS COMMON SERVICES AND COORDINATION



Sector Lead Agency	OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS (OCHA)
Co-Lead	NGO Forum Secretariat
Implementing Agencies	MoHADM (SSRRC), OCHA, UNDSS, NGO Secretariat, IOM, RCSO
Number of Projects	5
Sector Objectives	 Facilitate effective emergency preparedness integrated humanitarian response. Provide quality information to humanitarian actors in South Sudan to ensure interventions are evidence-based. Facilitate safe access to populations in need.
Funds Requested	Original: \$3.5 million Revised at mid-year: \$37.6 million
Funds Requested per Priority Level	High: \$ 37.6 million
Funding to Date	\$23.4 (62% of requirements)
Contact	Thomas Nyambane, Sector Focal Point, nyambanet@un.org

Revised caseload estimates						
State	NGO Presence					
State	INGO	NNGO	Total			
Central Equatoria	16	122	138			
Eastern Equatoria	19	14	33			
Western Equatoria	13	23	36			
Lakes	15	17	32			
Jonglei	26	55	81			
Upper Nile	29	28	57			
Unity	13	51	64			
Warrap	12	8	20			
Western Bahr el Ghazal	16	32	48			
Northern Bahr el Ghazal	18	41	59			

Achievements and challenges. In the first half of the year, the sector strengthened preparedness for the referendum and independence periods by supporting the preparation and regular updating of an Inter-Agency Humanitarian Contingency and Preparedness Plan. The United Nations Department of Safety and Security (UNDSS) developed a security management plan to accompany the contingency plan and ensure humanitarian actors were supported to manage security risks and continue operations during this period. UNDSS security aircraft was readily available and remained tasked by the UNDSS professional level security officer on behalf of the Chief Security Adviser at all times to be used as primary means of relocation or medic vac from the field. The NGO Forum supported INGOs and NNGOs in South Sudan, including through the improved engagement with the GoSS. In early 2011, OCHA negotiated and facilitated a consultation procedure with the Ministry of Humanitarian Affairs and Disaster Management (MoHADM) to ensure NGO inputs into a draft bill on NGO affairs. The NGO Forum Secretariat provided a summary of best practices in NGO legislation to the MoHADM and SSRRC, also with a suggested regulatory framework.

Sector members helped HCT members to advocate unimpeded and safe humanitarian space and access, adopting commonly agreed core messages. Regarding pooled fund management, the Sudan CHF and the Emergency Response Fund (ERF) allocated resources amounting to \$47 million (representing 22% of total funds secured for the southern elements of the 2011 Sudan Work Plan) to critical, time-sensitive actions and emergency interventions. Two CERF applications were developed to address emergency response to the large influx of returnees and people displaced from Abyei area. Plans to boost capacity of selected state SSRRC offices to conduct assessments and coordinate humanitarian response in areas with limited NGOs presence, high returnees, and hot spot areas failed to take off due to lack of funding.

Significant changes in need. Humanitarian space and access were increasingly under threat during the last six months. There is need for the sector to support the HCT to strengthen and increase advocacy to secure humanitarian space and ensure unrestricted access by humanitarian actors to

populations in need. Humanitarian partners recorded 57 incidents in which state actors interfered with relief operations or restricted the ability of humanitarian actors to reach populations in need. Some 300 conflict incidents were also recorded, with civilians bearing the brunt of increased violence, contributing to the contraction of humanitarian space.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Common Services and Coordination Sector are \$37.6 million. The priorities of the sector remain broadly valid for the revised most likely scenario. For the remainder of the year, the sector will work to ensure common services that underpin the success of the humanitarian operation, such as coordination, security management, and provision of humanitarian flights, are able to meet the needs produced by the worsening context. Incidents that constrain humanitarian access will continue to be tracked, and regular analysis of the impact of those constraints provided. Several adjustments have been made to the **objectives and indicators** in order to reflect the work on access monitoring and advocacy, as well as the provision of humanitarian flights. The **sector caseload** remains accurate for the second half of 2011, as no new organizations have begun operating in South Sudan.

Linking relief to development. The cluster facilitates the monthly Humanitarian Coordination Forum (HCF) meeting which is lead by the GoSS Minister of Humanitarian Affairs and Disaster Management to ensure close alignment of human responses to government priorities.

Table: mid-year monitoring vs. objectives

	Sector Objectives	Supporting Activities	Indicator	Target	Achieved as of mid-year
1	. Facilitate effective emergency preparedness integrated humanitarian response	 Promote use of standardized intersectoral assessments Support humanitarian coordination mechanisms including HCTs-Juba, HCF, Inter-sector Working Group (ISWG), and cluster system at the state level Increase resource mobilization and advocacy, and support strategic use of humanitarian pooled funds 	 Average time to respond to assessed needs Level of funding for the 2011 HWP 	Less than two weeks65%	 OCHA launched database to track response times in June 2010; performance against indicator to be reported at end year Humanitarian work plan is 34% funded, lower than 2010 (42%). CHF contributed 19% of the secured funding
2	 Provide quality information to humanitarian actors in South Sudan to ensure interventions are evidence- based 	analysis tools, including public information reports and maps Conduct regular planning and review	 Percentage decrease in data gaps in county profiling exercise from 2010 to 2011 Number of maps distributed 	20% decrease20,000	 County profiling exercise not yet reconducted 5,000 maps were printed and distributed to humanitarian actors NGO forum provided information and policy analysis regularly, including meeting updates, Security Sit Reps, policy briefing papers, a security phone tree, and re-locatable staff planning
3	. Facilitate safe access to populations in need	 Provide relevant and independent advice and information to humanitarian actors on security issues Negotiate secure access to underserved areas for assessments and other interventions Support GoSS in the development of appropriate legislation and policy on humanitarian action 	 Percentage decrease in number of areas restricted to humanitarian partners Quarterly analysis of access constraints (new) 	 100% Two reports on humanitarian access 	 Areas restricted increased due to rise in insecurity. DSS supported the safety and security of staff through regular information sharing and the training of 400 (93 females) UN agency and NGOs staff on Safe and Secure Approaches in Field Environments, 4x4 driving and first aid at work To be reported at end year

EDUCATION



Cluster Lead Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)
Co-Lead	Save the Children (SC)
Implementing Agencies	ADRA, AED, AMURT, Caritas Switzerland, Christian Aid, Creative Associates International, CRS, EDC-SSIRI, Episcopal Church of the Sudan, FAWE South Sudan, Finn Church Aid, Food for the Hungry, IBIS, InterSOS, Mercy Corps NHDF, NCA, NRC, Oxfam Intermon, Plan International, Polish Center for International Aid, Relief International, Right to Play, SC, SNV, South Sudan Disabled Person Association, SSUDA, Stromme Foundation, SCBRS, Turath Organization for Human Development, UNESCO, UNHCR, WC-Holland, WFP, Windle Trust International, Winrock International, WVI
Number of Projects	21
Cluster Objectives	 Increase access to protective learning spaces for children and youth affected by emergencies. Train teachers and PTA members to ensure provision of quality and relevant education, including emergency-related lifeskills and psycho-social support. Provide essential teaching and learning materials to children, youth and teachers affected by emergencies.
Funds Requested	Original: \$27 million Revised at mid-year: \$40 million
Funds Requested per Priority Level	High: \$36 million Medium: \$4.0 million
Funding to Date	\$16.1 million (41% of requirements)
Contact	Marian Hodgkin, Education Cluster Coordinator: edclusterjuba@gmail.com Jess Shaver, Deputy Education Cluster Coordinator: dep.edclusterjuba@gmail.com

Original and revised caseload estimates, by state (January – December 2011)							
State	Original Cluster Caseload			Revised Cluster Caseload ³⁹			
	Female	Male	Total	Female	Male	Total	
Central Equatoria	14,682	18,135	32,818	7,217	7,217	14,435	
Eastern Equatoria	10,014	15,356	25,371	1,335	1,335	2,670	
Western Equatoria	10,275	12,581	22,856	7,268	7,268	14,537	
Lakes	12,639	38,382	51,021	9,843	9,843	19,686	
Jonglei	64,828	102,697	167,525	15,416	15,416	30,832	
Upper Nile	59,158	80,246	139,404	11,262	11,262	22,525	
Unity	39,446	72,269	111,715	19,250	19,250	38,500	
Warrap	29,126	99,202	128,328	27,922	27,922	55,844	
Western Bahr el Ghazal	4,426	7,181	11,608	3,560	3,560	7,120	
Northern Bahr el Ghazal	21,065	42,905	63,970	11,034	11,034	22,068	
Total Caseload	265,659	488,954	754,616	114,107	114,107	228,217	

Revised caseload by vulnerability	Female	Male	Total
IDPs	80,000	80,000	160,000 ⁴⁰
Returnees	32,608	32,608	65,217 ⁴¹
Refugees	1,500	1,500	3,000
Host/local communities	-	-	-
Total caseload	114,108	114,108	228,217

³⁹ Distribution by State based on returnee, IDP and refugee distribution in the first half of 2011. While girls' access to schooling even in non-emergency situations is low nationally in South Sudan (37.2%), the cluster will strive for equal access for emergency affected boys and girls given the particular protection risks faced by girls in emergencies and the opportunity to improve the status quo that emergencies can provide.

⁴⁰ Based on South Sudan population modelling of school-aged children 6-18.

⁴¹ Based on the IOM generated number of predicted stranded returnees of age 5-17.

Achievements and challenges. Established in late 2010, a main achievement of the Education Cluster to date has been the establishment of strong emergency coordination mechanisms at national and state levels and clearer focus on education in emergencies. In particular, the cluster has increased access to protective learning spaces for emergency-affected children and youth, with 6,019 children and youth able to now access education through 87 new temporary learning spaces, the distribution of 59 "School in Box" and 92 recreation kits, and training of 1,917 teachers in emergency-affected areas. Management of a pipeline to provide essential teaching and learning supplies to emergency-affected areas has been strengthened, resulting in the distribution of over 500,000 exercise books, 300,000 schoolbags and 5,322 blackboards and the set up of 35 school tents.

Several challenges continue to hinder swift education response to emergencies, including humanitarian access in northern Jonglei, Upper Nile, and Unity and the significant lack of emergency technical capacity and presence of education partners, with Unity and Warrap particularly underserved. The slow disbursement of CHF funds, which is relied upon by several key cluster partners, has delayed implementation of some emergency education projects.

Significant changes in need. An estimated 152,000 primary and secondary school-aged returnee children and youth returned to South Sudan in the first half of 2011, ⁴² putting increased pressure on an already overloaded education system where the national pupil to classroom ratio is 134:1. ⁴³ In states likely to see large numbers of stranded returnees and IDPs in the second half of the year, the absorption capacity of pre-existing schools will be limited, raising the urgent need for new temporary learning spaces. The occupation of schools both by IDPs and returnees as well as by armed forces has also had a serious impact on access to protective education. Seven schools were occupied by conflict-induced IDPs, 16 schools by returnees from the north, and seven by armed forces at some point during early 2011, disrupting the learning of over 25,000 students across eight states. ⁴⁴ Significant damage to already poor educational infrastructure and supplies resulted from these occupations. Teacher capacity in states most affected by emergencies is low, with the number of trained teachers falling below 50% ⁴⁵ and gender parity remained a serious challenge for the entire country, with states most affected by displacement and those bordering northern Sudan registering a gender disparity for primary school children disproportionately higher than the national average of 37%. ⁴⁶

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Education Cluster are \$40 million. The priorities of the cluster remains broadly valid, though the cluster has revised their strategic approach to more tightly focus on increasing the education response during acute emergencies. In the second half of 2011, a clearer differentiation will be made between early recovery/development programming and acute emergency response. The cluster will focus on the provision of education in response to acute emergencies in order to ensure that further damage to infrastructure is minimized and a new generation is not denied educational opportunity as a result of new conflicts or disasters. Several minor changes have been made to the **objectives and indicators** for the Education Cluster, to better reflect the tightened focus on education in emergencies.

The **revised cluster caseload** reflects the attempt to provide targeted assistance to communities directly impacted by current and future emergencies, with the number of beneficiaries revised significantly downward, from 754,614 to 228,217. Although children and youth in host communities will benefit from the cluster's work to provide education services to emergency-affected children and

⁴² This modelling is based OCHA returnee figures and the 2008 South Sudan census population figures where 31.7% of the population is estimated to be between 0-17 – Grades P1 to S4. It is likely to not totally accurately reflect returnee population distribution and does not take into account the likelihood that returnees may include greater numbers of women and children and over-aged youth.

⁴³ Education Statistics for Southern Sudan: National Statistical Booklet 2010 (Government of Southern Sudan, 2011), p.17.

⁴⁴ South Sudan Occupied Schools Monitoring (Education Cluster, 2011).

⁴⁵ Calculated from raw EMIS 2010 data.

⁴⁶ National averages cited from *Education Statistics for Southern Sudan: National Statistical Booklet 2010* (Government of Southern Sudan, 2011), p.15. Emergency affected data based on EMIS data for 2010, Warrap and Lakes both have significantly low numbers of girls attending primary school. Secondary school figures are even starker, with Northern Bahr el Ghazal (5.7%), Warrap (9.1%) Lakes (9.6%), Jonglei (13.7%) and Unity (17.3%) showing particularly poor percentages of girl's enrolment.

youth, they have not been included in the revised caseload numbers as they are not the cluster's primary target.

Linking relief to development. The Education Cluster works to improve the access and quality of the education system in emergency-affected communities in South Sudan. This is in line with the education component of the South Sudan Development Plan (SSDP), which focuses on increasing access through school construction and support to alternative education and higher education and on improving the quality of education through teacher training and teacher management.

Table: mid-vear monitoring vs. objectives

Cluster Objectives	Supporting Activities	Indicator	Target	Achieved as of mid year
Increase access to protective learning spaces for children and youth affected by	Establish or rehabilitate safe and protective learning spaces for boys and girls	Number of emergency-affected children accessing education in temporary learning spaces or rehabilitated schools (new) 47	50,000	6,019
emergencies	Construct safe water sources and separate sanitation facilities for boys and	Number of emergency-affected learners provided with water source at school (new)	50,000	To be reported at end year
	girls Provide school feeding programmes	Number of emergency-affected learners provided with gender-specific latrines at school (new)	50,000	7,750
		Number of emergency-affected learners accessing food for education (new)	375,000	122,195
Train teachers and PTA	Conduct rapid training or orientation of teachers and PTAs in emergency-related	Number of teachers trained (new ⁴⁸)	4,500	1,917
members to ensure provision of quality and relevant education, including emergency-related lifeskills and psycho-social support	lifeskills and psycho-social support Provide fast-track English teacher training to Arabic-pattern teachers, especially stranded returnee teachers	Number of PTA members trained (new)	4,500	1,265
learning materials to children, youth and teachers affected by	Procure and preposition essential teaching and learning materials in four key hubs (Juba, Malakal, Unity, Wau)	Number of emergency-affected children, youth and teachers provided with or benefiting from the following essential school supplies and recreation materials: ⁴⁹		
emergencies	Distribute essential teaching and learning materials	Teacher kits Student kits School in a box Recreation kits School tents Exercise books Textbooks Blackboards Schoolbags	4,500 20,000 (1:80) 1,000 (1:80) 2,000 (1:50) 500 700,000 (1:1) 20,000 (1:5) 10,000 (1:40) 700,000 (1:1)	895 11,981 59 92 35 516,950 12,500 5,322 315,910

 ⁴⁷ This indicator corresponds to the Global IASC Education Cluster Needs Assessment Indicators E2 and E3.
 ⁴⁸ This indicator corresponds to the Global IASC Education Cluster Needs Assessment Indicators E5 and E8.
 ⁴⁹ This indicator corresponds to the Global IASC Education Cluster Needs Assessment Indicator E6.

FOOD SECURITY AND LIVELIHOODS



Cluster Lead Agencies	FOOD AND AGRICULTURE ORGANIZATION (FAO) AND WORLD FOOD PROGRAMME (WFP)				
Co-Lead	Danish Refugee Council (DRC) and <i>Vétérinaires sans frontières</i> (VSF-Belgium)				
Implementing Agencies	ACF-US; CAFOD; Caritas; CMA; CRS; DanChurch Aid; DRC; FAO; WFP; Intermon; NPA; NRC; UNHCR; VSF Belgium; VSF Swiss; VSF Germany; WVI; AMURT; AWODA; BRAC; CARE; IOM; IRD; PHA; RI; Tear Fund; ZOA; Mercy Corps; IRW				
Number of Projects	36				
Cluster Objectives	 Reduce acute food insecurity among vulnerable populations of women, children, elderly and men by providing life-saving food assistance Help at-risk populations, including IDPs and returnees, re-enter the production cycle by providing livelihood inputs Help at-risk communities and/or small holders producers mitigate disaster risks, principally flooding Strengthen cluster coordination and joint assessments to support needsbased intervention 				
Funds Requested	Original: \$41 million Revised at mid-year: \$118 million				
Funds Requested per	High: \$109 million				
Priority Level	Medium: \$9 million				
Funding to Date	\$70 million (59% of requirements)				
Contact	Mtendere Mphatso, Cluster Coordinator, mtendere.mphatso@fao.org				

Original and revised caseload estimates, by state (January – December 2011)						
State	Origina	al Cluster Cas	seload	Re	vised Cluster C	aseload
State	Female	Male	Total	Female	Male	Total
Central Equatoria	94,062	84,438	178,500	48,090	39,340	87,430
Eastern Equatoria	170,251	161,249	331,500	71,540	58,530	130,070
Western Equatoria	52,475	49,525	102,000	55,890	45,730	101,620
Lakes	112,000	160,000	272,000	52,490	42,950	95,440
Jonglei	220,525	187,537	408,000	123,630	101,160	224,790
Upper Nile	180,585	150,853	331,500	65,040	53,220	118,260
Unity	78,419	74,581	153,000	59,560	48,730	108,290
Warrap	148,053	157,947	306,000	83,150	68,030	151,180
Western Bahr el Ghazal	72,152	63,848	136,000	38,430	31,450	69,880
Northern Bahr el Ghazal	160,159	171,341	331,500	65,480	53,560	119,040
Total Caseload	1,288,681	1,261,319	2,550,000	663,300	542,700	1,206,000

Revised caseload by vulnerability	Female	Male	Total
IDPs	123,747	101,253	225,000
Returnees	164,996	135,004	300,000
Refugees	11,450	9,370	20,820
Host/local communities	363,107	297,073	660,180
Total caseload	663,300	542,700	1,206,000

Achievements and challenges. In the first half of 2011, the Food Security and Livelihood Cluster provided approximately 928,237 people with food assistance, reaching 77% of the target caseload. The cluster provided food assistance to 77% households assessed to need it. Insecurity and the deteriorated operational environment were the primary obstacles to provision of food to the remaining households. Some 120,000 households received agricultural inputs such as crop and vegetable seeds assorted and hand tools and other livelihood support, such as fishing gears and veterinary services for their animals. Cluster members published several key assessments on food security, including the 2010-2011 Annual Needs and Livelihoods Analysis (ANLA), 2010-2011Crop and Food Security Assessment Mission (CFSAM), Emergency Food Security Assessment for Returnees

(February 2011) and the first phase of the Food Security Monitoring System. Cluster coordination and leadership has been strengthened in Juba and at the state level, with six of the ten states now functional. Progress on the objective "Help at-risk communities and/or small holders producers mitigate disaster risks, principally flooding" was limited by delays in getting required technical backstopping and insufficient funding.

Significant changes in need. Results from the ANLA and CFSAM, released in January 2011, indicated that approximately 10% of households in South Sudan were severely food-insecure and 26% were moderately food-insecure. This reflects a greatly improved situation from 2010 when 21% and 32% were severely and moderately food-insecure, respectively. The projected cereal deficit was lower compared the previous year as well (291,000 MTs compared to 410,000 MTs).

However, deteriorations in the context over the last six months could reverse these gains and further complicate the food security situation of most vulnerable households. Recent food security monitoring showed an appreciable increase in the number of moderately food-insecure due to blockage of commercial traffic along the North-South border, presence of returnees, high food prices, and increased insecurity. Affected communities are at risk of sliding into acute food insecurity if these risk factors intensify, particularly the blockage of commercial traffic along the North-South border, which has reduced the normal food supply to border states. Widespread displacement and inter-communal conflict are hindering preparations for the agricultural season due to displacement and lack of access to cultivation areas. Agro-meteorological analysis of rains in March-May indicates erratic rainfall performance, especially in eastern parts of Eastern Equatoria, which may affect food production and the food security situation among vulnerable communities. The influx of returnees to peri-urban settlements where access to agricultural land is insufficient underscores the need for improved urban livelihood support.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Food Security and Livelihoods Cluster are \$118 million. The cluster strategy, objectives and indicators remain broadly valid for the revised most likely scenario. The cluster caseload has been revised down at mid-year to reflect the final results of the ANLA and CFSAM which showed significantly higher level of food security than was predicted at the time of 2011 planning. The targeted number of beneficiaries has been revised downward by 28%, from a total of 2,550,000 to 1,844,500, out of which 1,206,000 are supported through the Food Security and Livelihood Cluster. ⁵⁰ Cluster members are closely monitoring the rapidly changing context and will revise this target beneficiary number as necessary.

Linking relief to development. The cluster has contributed to development of economic development pillar of the South Sudan Recovery and Development Plan. Key contributions are the findings of a Comprehensive Seed Systems Security Assessment (CSSSA); socio-economic impact of priority animal diseases in South Sudan; livestock epidemiology and surveillance reports; and livestock marketing value chain analysis of livestock, etc.; state level structures on cluster coordination in place are one of the significant fora drawing participation of key food security stakeholders including top government personnel, international and national organization. This forum can be a building block on policy discussion on food security in the recovery phase.

through the Nutrition and Education Clusters. WFP is finalizing caseload predictions for a worst case scenario for June-December 2011.

31

⁵⁰ The World Food Programme has set 1,844,500 as its revised total Emergency Operation (EMOP) caseload for all interventions in South Sudan. Out of this, 1,206,000 people consisting of IDPs, returnees, refugees and local/host communities and HIV-AIDS/TB/Kala-Azar/Leprosy patients and caretakers are assisted under the FSL cluster. The remainder of people requiring food assistance are covered

Cluster Objectives	Supporting Activities	Indicator	Target	Achieved as of mid year
Reduce acute food insecurity among vulnerable populations of women, children, elderly and men by providing lifesaving food assistance	 Provide food assistance to severely food-insecure populations Implement a food security monitoring system and periodic crop assessments 	Number of households receiving food aid Percentage of assessed households that receive food aid	 1.5 million vulnerable residents, returnees, IDPs and refugees 100% 	 928,237people supported (based on actual for January- May and projections for June) 77% of assessed population
Help at-risk populations, including IDPs and returnees, re-enter the production cycle by providing livelihood inputs	 Provide acute returnee and IDP caseloads with reintegration packages Provide agricultural inputs Provide access to essential veterinary services, support disease surveillance and cold chain management Provide fishery kits to vulnerable households 	 Percentage of returnees provided with reintegration package Number of households receiving production inputs Number of functional cold chain facilities Number of surveillance conducted 	 100% 900,000 most at risk people 30 Two surveillance in East Coast Fever-affected areas 	 50% of households receiving production inputs were returnees 120,000 households, or approximately 700,000 people 25 cold chain facilities installed and operational Two surveillance activities done
Help at-risk communities and/or small holders producers mitigate disaster risks, principally flooding	 Conduct disaster risk reduction assessments in specific locations Promote community preparedness to external shocks through conditional livelihood resource transfers and training 	 Number of people accessed during assessments Number of people provided with livelihoods transfers 	60,00060,000	Activities not yet conducted due to insufficient funding and technical support
Strengthen cluster coordination and joint assessments to support needs-based intervention	 Convene cluster coordination and technical working group meetings at state level Conduct food security and livelihood assessments and monitoring 	Percentage of states with functioning cluster coordination	• 100%	70% of the states have functioning cluster coordination structures. Seven states functioning: Central Equatoria; Eastern Equatoria; Warrap; Northen Bah el Ghazal; Upper Nile; Jonglei; Unity

HEALTH



Cluster Lead Agency	WORLD HEALTH ORGANIZATION (WHO)
Co-Lead	Malaria Consortium
Implementing Agencies	SC, Medair, Healthnet TPO, IMC, IMA, MERLIN, WVI, CCM, CRADA, ADRA, Concern, IRC,COSV, GOAL, ACRASS, ARC, BRAC, CARE, CDoT, CRS, ECS< EPC, John Dau Fountation, International HIV/AIDS Alliance, Intrahealth, IOM, IRD, Kimu Charitable society, World Relief, WHO, UNICEF, UNFPA, Swiss Red Cross, Tearfund, THESO, UNHCR, Upper Nile Kala-Azar Eradication Association, Sign of Hope, RI, Malaria Consortium, MSI, Netherlands Red Cross, NCA, MGH, OVCI, Polish Centre for International Aid
Number of Projects	62
Cluster Objectives	Maintain the existing safety net by providing basic health packages and emergency referral services Control the spread of communicable diseases Strengthen the capacity for response to emergencies including surgical interventions
Funds Requested	Original: \$82 million Revised at mid-year: \$ 81.8 million
Funds Requested per Priority Level	High: \$67.3 million Medium: \$14.5 million
Funding to Date	\$21.3 million (26% of requirements)
Contact	Eba Pasha, Cluster Coordinator, email: epasha@hotmail.com Mo Ali, Cluster Co-Coordinator, email: sshealthcoordination@gmail.com

Original and revised caseload estimates, by state (January – December 2011)						
State	Original Cluster Caseload		Revised Cluster Caseload			
	Female	Male	Total	Female	Male	Total
Central Equatoria	208,819	232,618	441,437	208,819	232,618	441,437
Eastern Equatoria	176,304	186,146	362,450	176,304	186,146	362,450
Western Equatoria	120,224	127388	247,612	120,224	127388	247,612
Lakes	131,892	146,399	278,292	131,892	146,399	278,292
Jonglei	249,710	293,731	543,441	249,710	293,731	543,441
Upper Nile	175,569	210,172	385,741	175,569	210,172	385,741
Unity	114,222	120,098	234,321	114,222	120,098	234,321
Warrap	200,878	188,294	389,172	200,878	188,294	389,172
Western Bahr el Ghazal	62,614	70,758	133,372	64,429	72,810	137,239
Northern Bahr el Ghazal	149,043	139,316	288,359	153,365	143,355	296,720
Total Caseload	1,589,275	1,714,920	3,304,197	1,595,412	1,721,011	3,316,425

Revised caseload by vulnerability	Female	Male	Total
IDPs	240,532	259,468	500,000
Returnees ⁵¹	336,745	363,255	700,000
Refugees			
Host/local communities	1,018,136	1,098,289	2,116,425
Total caseload	1,595,412	1,721,011	3,316,425

Achievements and challenges. During the first half of 2011, the Health Cluster conducted accelerated child survival campaigns in Western Equatoria, Unity, Warrap, Lakes and Upper Nile states. Measles vaccination campaigns were conducted in high-risk counties in Warrap and Unity states, with over 150,000 children vaccinated. Training on RH and safe delivery as well as clinical management of rape was conducted alongside community health worker training. 98% of disease

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⁵¹ The total number of returnees arriving since end October 2010 is targeted.

outbreaks were investigated and responded to within 72 hours and training to strengthen the surveillance system was conducted in all ten states. Despite these achievements, the health status of South Sudanese continues to be precarious. The DPT3 coverage fell to 40%, below the baseline of 43% by mid-year, and only 70% of key referral hospitals were able to undertake emergency surgeries. Increased insecurity has negatively affected the Health Cluster's performance, as operations and facilities in some areas had to be suspended. The unreliability of some data sources, methodological constraints, highly mobile populations and an influx of populations result in inconsistent population estimates, further challenging accurate assessment of disease trends, particularly among those most affected by emergencies.

Significant changes in needs. Preliminary results from the 2010 South Sudan Household Health Survey (SSHHS) showed that the baseline health status of the average South Sudanese may be lower than previously indicated. Although the full results of the 2010 survey have not yet been released, data cited in the South Sudan Development Plan state that only 13% of the population has access to healthcare and two percent of children ages 12-23 months are fully immunized. The infant mortality rate is 84 out of every 1,000 live births and maternal mortality remains among the highest in the world with 2,054 deaths per 100,000 live births. The kala-azar (visceral leishmaniasis) outbreak continued in early 2011, with 4,013 new cases recorded. A sharp decline in security and widespread displacement in northern Jonglei unexpectedly reduced patients' access to treatment by over 70% in March and April. A sharp rise of measles cases occurred in the first half of 2011, with over 600 suspected measles cases resulting in 19 recorded deaths (three percent CFR) across South Sudan. Some 75% of these cases occurred in counties with a high number of returnees. Fifty cases of meningitis were recorded across South Sudan but did not result in a confirmed meningitis outbreak.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Health Cluster are \$81.8 million. The cluster objectives remain adequate to respond to the revised most likely scenario. In the second half of 2011, the Health Cluster will concentrate on addressing humanitarian and emergency needs by supporting the delivery of a minimum level of health services, particularly in emergency-affected areas. Further strengthening of disease surveillance will also be a key priority for the remainder of the year, in order to address the needs of additional returnees and people displaced by conflict and floods. The **revised cluster caseload** includes a minor decrease in estimated beneficiaries due to a change in calculations. The target indicator used for routine immunization DPT3 coverage has been lowered from 60% to 50% to be in line with the GoSS target.

Linking relief to development. The South Sudan Development Plan focuses on four basic programme areas. Through the Health Cluster's efforts to ensure access to basic health services for communities affected by emergencies, the Health Cluster is working in line with the SSDP's goal to increase access to basic services for all South Sudanese.

Cluster Objectives	Supporting Activities	Indicator	Target (change)	Achieved as of mid year
Maintain the existing safety net by providing basic health packages and emergency referral services	Provide a basic package of health services in health facilities and affected communities including reproductive health, HIV/AIDS, and child survival packages Procure and distribute essential drugs, medical supplies, basic medical equipment, reproductive health and EPI supplies Improve capacity of medical personnel on management of common morbidities and safe motherhood, including emergency obstetric care Training on RH care	Number of outpatient department attendees at health facilities DPT3 coverage for South Sudan	1,817,308 (female: 943,206; male: 874,102) 50% (□)	To be reported at end year 40%
2. Control the spread of communicable diseases	 Train health staff on emergency preparedness, surveillance, case management and EWARN Pre-position essential supplies and vaccines for response to common outbreaks 	 Percentage of communicable disease outbreaks investigated and responded to within 72 hours of notification Percent of laboratory results for all collected specimens from suspected cases available within seven days of collection 	• 90% • 90%	• 90% • 90%
3. Strengthen the capacity for response to emergencies including surgical interventions	 Provide equipment, emergency drugs, kits and surgical supplies Train key health staff on key surgical and obstetric interventions Strengthen the capacity of key health staff on key surgical and obstetric interventions Support coordination of the Health Cluster 	 Percent of key referral hospitals able to undertake emergency surgeries Percentage of PHCCs providing basic EmNOC services 	• 80% • 60%	 70% No information at mid-year

LOGISTICS



Cluster Lead Agency	WORLD FOOD PROGRAMME (WFP)
Implementing Agencies	WFP, IOM, UNOPS, ACTED
Number of Projects	9
Cluster Objectives	 Coordinate and consolidate core pipelines. Expand physical access to basic service and markets by constructing, rehabilitating and maintaining transportation networks and improve humanitarian access to remote areas by constructing, rehabilitating and maintaining key air strips. Implement common logistics services, including common surface transport, air transport and warehousing and mobilize surge capacity if required. Monitor logistics capacity and provide adequate logistics information to support decision making processes and contingency planning efforts of the humanitarian community. Coordinate logistics activities to improve efficiency.
Funds Requested	Original: \$22.4 million Revised at mid-year: \$92.9 million
Funds Requested per	High: \$63.5 million
Priority Level	Medium: \$29.4 million
Funding to Date	\$13.3 million (14% of requirements)
Contact	Faheem Araie, Cluster Coordinator, faheem.araie@wfp.org

Achievements and challenges. The Logistics Cluster provided common services in support of partners responding to the deteriorating emergency context. Common transport services (CTS) moved more than 500 MTs free of charge for 16 agencies. Nine warehouses were set up in four states as part of common storage facilities. Twenty storage tents and warehouse equipment were procured and prepositioned and surge capacity staff members were pre-identified in preparation for the referendum and independence periods. The Rumbek to Yirol road project was completed on time and under budget. Airstrips in Alek, Rubkona and Pagak are under construction. An additional two airstrips have also been scheduled for emergency repair. A Logistics Capacity Assessment was conducted and regular updates on the logistical status of roads were provided on a weekly basis. Critical feeder roads, bridges and airstrips were rehabilitated. The planned procurement of fuel bladders, which were identified as a key contingency item, was cancelled due to the long delivery time. Alternate methods of supporting the provision of emergency fuel supplies have been identified, with fuel now being transported to emergency partners in border states through the CTS.

High insecurity, low capacity of contractors in field, seasonal weather changes, limited availability of quality construction materials have also been key issues leading to deviation of actual achievements. In the case of the Rumbek-Yirol (15km to 60km) road a reduction in scope of work was sanctioned by Ministry of Transport and Roads. Road rehabilitation in Raja County, Western Bahr el Ghazal State was delayed due to funding and challenges in recruiting qualified engineer, but remains on track for completion by year end. The Logistics Cluster has been pushed to the limits of its current capacity by the increase in need for logistics support and is urgently in need of more staff to ensure services continue to expand as the situation evolves.

Significant changes in need. The influx of IDPs from Abyei, blockage of commercial goods along the North-South border, widespread demining in Unity State and imminent arrival of the wet season have resulted in increased logistics support needs, including facilitation of access to fuel, provision of common transport and warehousing services, and an increase in the number and speed of road and air strip spot repairs and rehabilitation. The anticipated increased number of returnees and newly displaced people over the last half of 2011 is anticipated to further exacerbate these needs and require even greater support services from the Logistics Cluster. The deteriorated operational environment has led to significant increases in the cost of undertaking emergency infrastructure repairs.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Logistics Cluster are \$92.9 million. The cluster objectives remain valid for the revised most likely scenario. In the second half of 2011, the Logistics Cluster will continue to provide common services

where requested and monitor the flow of goods across all South Sudan borders and alternative supply routes (e.g. Djibouti Corridor) to ensure a continued supply chain to at risk areas. It will also seek to expedite the spot repairs in priority locations wherever viable during the wet season. The cluster will also establish priority river ports for repair increase the amount of common warehousing available for the Abyei IDPs and possible stranded returnees and will finalize modalities for accessing 50,000 litre emergency fuel reserve stored by WFP in Juba, Wau and Malakal. The cluster will aim to expand fuel procurement, transport and storage and to expand scope of existing emergency reserves to meet anticipated need, including through the procurement of a 32,000 litre fuel storage tank to be located in Wau. The Logistics Cluster does not deal with specific caseloads but provides a supporting capability to other clusters.

Cluster Objectives	Supporting Activities	Indicator	Target	Achieved as of mid year
Coordinate and synchronize the core pipelines	Coordinate with core pipeline managers and OCHA on a monthly basis	Number of pipeline reports given to HCT	24 reports, issued twice monthly	16 core pipelines reports have been submitted to the HCT in Juba
2. Expand physical access to basic services and markets by constructing, rehabilitating and maintaining transportation networks and improve humanitarian access to remote areas by constructing, rehabilitating and maintaining key air strips	 Conduct emergency repairs and rehabilitate key north - south transport corridors, feeder roads and rural roads Rehabilitate emergency airstrips 	 Number of km of road improved Number of bridges repaired Number of airstrips rehabilitated 	660 km One bridge of 24 meters Three airstrips	The Rumbek-Yirol road project was completed Three airstrips currently under repair and due to be completed by August. Emergency Repairs of an additional two airstrips will be completed by September
3. Implement common logistics services, including common surface transport, air transport and warehousing and mobilize surge capacity if required	 Coordinate and prioritize the common surface transport of emergency relief supplies, as per humanitarian priorities agreed by the HCT Provide Humanitarian Air Services Activate operational surge capacity 	 Proportion of requested common supplies and services provided Capacity and funding mobilized 	100%100% of funding needed	Nine storage tents in four states Five national staff and two international staff have been recruited
Provide logistics information to support coordination and contingency planning	 Conduct and update an Inter-Agency Logistics Capacity Assessment (LCA) in South Sudan Assess and monitor existing as well as new supply corridors from neighbouring countries into South Sudan Coordinate with Government counterparts on issues related to logistics activities Provide relevant logistics including maps information for the humanitarian community 	Inter-Agency LCA conducted and disseminated	Inter-agency LCA conducted and disseminated	LCA was finalized. It will be updated by August 2011

MINE ACTION

Mine Action is a sub-cluster of the Protection Cluster in South Sudan, but is presented separately in this document in order to accommodate other appeal tools, such as the Mine Action Portfolio.

Cluster Lead Agency	UNITED NATIONS MINE ACTION SERVICE (UNMAS)
Implementing Agencies	UNMAS, UNICEF, UNOPS, SSDA, FSD, MAG, NPA, G4S Ordnance Management, DDG, HI, Mechem, RONCO, MTI, BMDP, CMDP, Kenyan High Risk Demining Platoon, OSIL, SIMAS, SEM, ESAD, RFDCC, NAPO, CWEP, MCDI, OVCI <i>Ia Nostra Famiglia</i> , NAD
Number of Projects	10
Cluster Objectives	 To facilitate free and safe movement for humanitarian operations through clearance of landmines and ERW. To reduce the risk of injury from landmines and ERW and facilitate the reintegration of victims through targeted mine risk education and victim assistance interventions. To strengthen and support the management and operational capacities of the national authorities and implementing partners to enable them to address the socio-economic impact of landmine and ERW contamination in Sudan.
Funds Requested	Original: \$13.4 million Revised at mid-year: \$15.2 million
Funds Requested per	High: \$4.5 million
Priority Level	Medium: \$10.6 million
Funding to Date	\$3.9 million (26% of requirements)
Contact	Sarah Holland, Programme Officer, UNMAO, sarahh@sudan-map.org

Original and revised caseload estimates, by state (January-December 2011)						
	Original Clus	ter Caseload	Revised Cluster Caseload			
	No. of	Proportion by	No. of	Proportion by		
	beneficiaries	state	beneficiaries	state		
Central Equatoria	873,997	30%	862,407	29%		
Eastern Equatoria	582,665	20%	68,715	2%		
Western Equatoria	145,666	5%	527,283	18%		
Lakes			100	0%		
Jonglei	145,666	5%	967,000	32%		
Upper Nile	436,999	15%	350,200	12%		
Unity			194,050	6%		
Western Bahr el Ghazal	582,665	20%	50	0%		
Northern Bahr el Ghazal	145,666	5%	16,100	1%		
Total	2,913,324	100%	2,985,905	100%		

Achievements and challenges. Over 600 km of transport routes were assessed for and cleared of mines and other ERW to date in 2011. Nearly one million square miles of land was also cleared, paving the way for safe construction of homes and schools and for agricultural activities. Over 11,600 people received mine risk education (MRE) in areas that were known and suspected to be contaminated with landmines and ERW, while 167 landmine survivors and people with disabilities participated in socio-economic reintegration programmes. Capacity development of national mine action implementing partners was a top priority for Mine Action, with a total of eight South Sudan Demining Authority (SSDA) staff members working in Yei, Wau and Juba participating in field placements with two UN contractors.

Significant changes in needs. There are over 800 recorded hazards, including minefields, dangerous areas and suspected hazardous areas, in South Sudan. The use of landmines has led to the injury and deaths of approximately 4,290 people in the country over the past several years. In 2011, the UN Mine Action Office received reports of alleged re-mining by rebel militia groups and recorded 13 incidents caused by suspected anti-tank and anti-personnel land mines in Jonglei, Upper Nile and Unity states from 16 November 2010 to 2 June 2011. IDPs and returnees in these and other known or suspected dangerous areas are particularly vulnerable as they are less familiar than the local community with the surrounding environment. Nearly half of recent returnees have arrived in the three states that have seen a recent renewed threat of landmines. With the security situation

projected to remain volatile, the need for mine action services, including clearance, education and victim assistance, will remain high throughout the rest of 2011.

Revised cluster requirements, strategy and caseload. The 2011 requirements for Mine Action Sub-Cluster in South Sudan are \$15.2 million, an increase of \$1.7 million in order to expand activities for the deteriorating context. The sub-cluster's aim is to reduce the threat and impact of landmines and ERW through the provision of demining activities, MRE and victim assistance interventions and the development of national implementing partner capacity. The sub-cluster will place particular focus on the deployment of demining assets such as rapid response explosive ordnance disposal (EOD) teams along with multi-tasking teams (MTT) to address landmine and ERW threats as rapidly and efficiently as possible during the remainder of 2011. Furthermore, the provision of MRE interventions will be important in helping residents of landmine/ERW-affected communities, IDPs, returnees and humanitarian aid workers stay safe in such environments.

The Mine Action Sub-Cluster has revised its **beneficiary caseload** to focus on Central Equatoria, Jonglei, Upper Nile and Unity, in reflection of the increased threats in those states. The Sudan Mine Action Programme, previously run as a unified "all Sudan" programme, was separated at mid-year in reflection of the creation of South Sudan as an independent state. **New indicators and targets** specific to South Sudan have been established at mid-year, as shown on the chart on the following page.

Linking relief to development. The SSDP includes inputs reviewed and submitted by SSDA, based on the sector Multi-Year Work Plan developed by UNMAO. Therefore, mine action sector plans, including the provision of emergency response have formed the basis of the SSDP mine action activities and costs.

Cluster Objectives	Supporting Activities	Indicator	Target (change)	Achieved as of mid year
To facilitate free and safe movement for humanitarian operations through clearance of landmines and explosive remnants of war (ERW)	 Release of land through survey and clearance of minefields, dangerous and suspected hazardous areas as well as of routes in support of the UNMIS mandate and other humanitarian activities Remove threats from identified dangerous areas and minefields Support the movement of returnees, refugees and the process of reintegration Facilitate safe progress in the reconstruction and development of routes and roads 	 # km of roads assessed and/or verified # of dangerous areas (DA) released to local communities (new) 	 875 km of roads 140 DAs (new) 	 624.5 km of routes assessed and cleared To be reported at end year
2. To reduce the risk of injury from landmines and ERW and facilitate the reintegration of victims through targeted mine risk education and victim assistance interventions	 Deliver relevant and useful information on the situation and risks of landmines and ERWs to IDPs, returnees and other at-risk populations to promote safe behaviour among these target groups Provide training of trainer courses to teachers and/or health and community workers to establish local MRE capacity Organize needs assessment to collect current information on landmine and ERW survivors Increase technical knowledge of partners on victim assistance (VA) and disability-related issues Provide support to mine/ERW survivors in terms of social reintegration and economical empowerment 	# of at risk individuals reached through mine risk education, victim assistance interventions and landmine safety project	 180,500 people for MRE 600 VA beneficiaries 	 11,657 people for MRE 169 VA beneficiaries
3. To strengthen and support the management and operational capacities of the national authorities and implementing partners to enable them to address the socio-economic impact of landmine and ERW contamination in Sudan	 Strengthen the management capabilities of SSDA in the field of coordination, planning, priority setting, information management, supervision and quality assurance and reporting through on-the-job training, in view of transition to national ownership Assist the national authorities in fulfilling the obligations under the Mine Ban Treaty Provide technical and financial support to national NGOs operating in mine action sector to strengthen sustainable local capacity 	# of field placements and on- the-job trainings conducted as part of planning and quality management for mine action	• 35	• 8

MULTI-CLUSTER

The Multi-Cluster has been established as a new component of this six-month 2011 Consolidated Appeal for South Sudan and includes the Emergency Returns Programme as well as the response to refugees inside South Sudan.

Cluster Lead Agencies	INTERNATIONAL ORGANIZATION FOR MIGRATION AND UNITED NATIONS OFFICE OF THE HIGH COMMISSIONER FOR REFUGEES (IOM and UNHCR)
Implementing Agencies	InterSOS, GIZ, NRC, DRC, CRS
Number of Projects	4
Sector Objectives	 Support the voluntary, safe and dignified return of IDPs and refugees Support the early reintegration of returnees into communities Provide protection and multi-sector assistance to refugees
Funds Requested	Original:\$ 32.5 million Revised at mid-year:\$ 60.3 million
Funds Requested per Priority Level	High: \$60.3
Funding to Date	\$1.7 million (3% of requirements)
Contact	Gerry Waite, IOM, at: waite@iom.int and Mireille Girard, UNHCR, at: girard@unhcr.org

Original and Revised Cluster Caseload (January-December 2011)						
	Actual returnees	Projected Returnees	Revised Returnee		Refugees <i>(regis</i> (Jan-Dec 20	
State	Jan- June 2011	July-Dec 2011	Caseload (Jan-Dec 2011)	Female	Male	Total
Central Equatoria	16,919	43,586	60,505	4,310	4,030	8,340
Eastern Equatoria	6,786	9,607	16,393			
Western Equatoria	266	3,934	4,200	4,519	4,763	9,282
Lakes	11,958	20,461	32,419			
Jonglei	13,922	39,711	53,633	2,007	1,439	3,446
Upper Nile	14,131	52,499	66,630	135	214	349
Unity	22,442	64,555	86,997			
Warrap	7,911	47,733	55,644			
Western Bahr el Ghazal	9,116	30,365	39,481			
Northern Bahr el Ghazal	24,442	87,549	111,991			
Returnee Total and Refugee Subtotal	127,893	400,000	527,893	10,971	10,446	21,417
Non-registered refu		<u> </u>				5,065
Total refugee caseload					26,482	

Achievements and challenges. The IOM tracking and monitoring team has registered 303,788 returnees since end October 2010. Onward transportation assistance was provided to 9,525 returnees stranded within the South to county-level final destinations within two weeks or less, on average. In March and April, IOM assisted the SSRRC to provide return transport for some 7,000 South Sudanese who had been stranded in the overcrowded Kosti way station for up to three months. UNHCR provided reintegration packages to 507 refugees that returned home to South Sudan. UNHCR supported over 21,000 refugees from DRC, CAR and Ethiopia and worked to ensure protection against refoulement to the country of origin and access to basic services. One particularly noteworthy achievement was gaining the approval for Congolese refugee children to sit for primary school exams, according to DRC curriculum, on 2 June.

Poor road infrastructure, the deteriorating security environment and increased interference in humanitarian activities by security forces have been major challenges to sector partners. Severe shortages in funding – returns projects were funded at two% at mid-year - significantly constrained partners.

Significant changes in needs. South Sudanese returned home from the North in larger numbers than originally projected in the 2011 Sudan Work Plan. The first wave of returns saw over 300,000 GoSS-assisted and spontaneous returns reaching the South between October 2010 and end May 2011. South Sudanese refugees, however, returned home in smaller numbers projected, with just 507 refugees arriving this year to date; the planned refugee return figure for the year was 5,000. Continuing insecurity and clashes have caused a small number of South Sudanese refugees to register in neighbouring states.

A recent upsurge of inflammatory statements by political leadership in the North, continued unresolved CPA negotiations relating to citizenship, and excitement over the independence of the South on 9 July are predicted to result in a second wave of returns. With leadership in Khartoum indicating that the way station in Kosti may be closed, new returnees will require significantly greater emergency response than the first wave. Returnees will be rushed and less prepared, unable to sell household goods and items as they flee the oppression and violence likely to flash against them on or after 9 July. Returns will be out of sync with agricultural seasons and school schedules, delaying reintegration. Security problems will continue to restrict return access routes in Southern Kordofan and Abyei, making Upper Nile the main target destination for returnees, even for those whose origin are the western states of South Sudan. More returnees will become stranded *en route* for greater periods of time due to the seasonal rains, the lack of planning and limited resources, increasing the likelihood of high-concentration settlements in the border areas or in ports along the river.

Revised cluster requirements, strategy, and caseload. The 2011 requirements for the Multi-Cluster are \$60.3 million. The cluster objectives remain adequate to respond to the revised most likely scenario. In the next six months, partners will focus on the construction or expansion of transit sites in Melut, Tonga, Shambe, Bor and Juba and on increasing onward transportation assistance capacities in order to meet the specific needs of the second wave of returnees. An additional objective has been added at mid-year to reflect the inclusion of protection and multi-sector assistance to refugees as part the multi-cluster strategy. The **returnee caseload** has been revised up to 530,000 for the year, with the expected 2011 refugee caseload set at just over 26,000.

Linking relief to development. The partners within this sector have been active participants within the development of the SSDP, and have ensured that the interests of returnees are represented in the SSDP in line with the objectives and principles specified in this document. Emergency support to returnees and protection and multi-sectoral support to refugees is done in line with the broad principles of the SSDP and in close collaboration with the SSRRC.

	Sector Objectives	Supporting Activities	Indicator	Target (change)	Achieved as of mid year
1.	Support the voluntary, safe and dignified return of IDPs and refugees	Support an information campaign and protection monitoring to ensure informed decisions	Number of displaced people returned to their places of choice in Sudan, disaggregated by age and sex	• 530,000	127,893 displaced South Sudanese returning from Sudan and 507 returning from poighbouring
		Support the return of refugees by either organizing the return or providing cash grants for self-repatriation			from neighbouring countries since 1 January
		Provide logistics and transport services to stranded and vulnerable IDPs to facilitate their return			
		Provide integrated life-saving and livelihood support to spontaneous returnees			
2	Support the early reintegration of returnees into communities	Provide early reintegration support to returned refugees and IDPs (NFIs, food, emergency shelter and livelihood support)	Number of returnees reintegrated into communities	• 530,000	127,893 returning from Sudan and 507 returning from neighbouring
		Promote community-based interventions aimed at peaceful co-existence			countries provided with food, NFI and emergency shelter, health, water and
		Provide protection monitoring upon return to ensure a smooth reintegration process			sanitation and other assistance. (See cluster narratives for details)
3.	Provide protection and multi- sector assistance to refugees		 Number of refoulement of refugees Percent of refugee locations with GBV 	• 0 refugees • 100%	No refoulements recorded
		Conduct protection monitoring, including GBV prevention and referral	referral in place		• 80%
		Deliver multi-sector assistance in refugee settlements, according to sphere standard in all refugee settlements, while initiating self- reliance activities			

NON-FOOD ITEMS AND EMERGENCY SHELTER



Cluster Lead Agency	INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)					
Co-Lead	World Vision International (WVI)					
Implementing Agencies	CRS, DCA, IOM, IRW, LCEDA, MEDAIR, NCA, NHDF, OXFAM-GB, SCISS, UNHCR, UNICEF, WVS					
Number of Projects	15					
Cluster Objectives	 Preposition sufficient NFIs in key locations throughout South Sudan in timely manner. Improve the delivery of NFI and emergency shelter assistance beneficiaries. 					
Funds Requested	Original: \$8 million Revised at mid-year:\$15.3 million					
Funds Requested per	High: \$9 million					
Priority Level	Medium: \$6.3 million					
Funding to Date	\$4.3 million (28% of requirements)					
Contact	Miki Takahashi, Cluster Coordinator, email: mmtakahashi@iom.int					

Original and revised caseload estimates, by state (January – December 2011)						
-	Original Clu	Original Cluster Caseload		ıster Caseload		
	Estimated	Estimated	Estimated	Estimated		
	Number of	Proportion of	Number of HHs	Proportion of Total		
State	HHs	Total Caseload		Caseload		
Central Equatoria	6,500	5%	11,000	8%		
Eastern Equatoria	2,600	2%	2,800	2%		
Western Equatoria	26,000	20%	18,000	14%		
Lakes	15,600	12%	10,000	8%		
Jonglei	26,000	20%	20,700	16%		
Upper Nile	13,000	10%	21,000	16%		
Unity	10,400	8%	18,000	14%		
Warrap	19,500	15%	15,000	12%		
Western Bahr el Ghazal	3,900	3%	7,000	5%		
Northern Bahr el Ghazal	6,500	5%	6,500	5%		
Total Caseload	130,000	100%	130,000	100%		

Revised caseload by vulnerability	Female	Male	Total
IDPs	31,200	20,800	52,000
Returnees	42,900	28,600	71,500
Refugees	-	-	-
Host/local communities	3,900	2,600	6,500
Total caseload	78,000	52,000	130,000

Achievements and challenges. Members of the NFI and Emergency Shelter Cluster assisted 37,414 households (approximately 187,070 individuals) during the first half of the year. Returnees comprised the majority of the caseload (63%), followed by people newly displaced by conflict (30%) and floods (3%). Patients undergoing treatment for kala-azar (2%) were also assisted, as were a small number of vulnerable host community members and refugees (1% each). Cluster partners developed a pre-positioning plan, placed stocks in 24 regional and field hubs by the referendum, and regularly replenished field hubs. As a result, the delivery of NFI and emergency shelter assistance improved in terms of timeliness and coverage. Cluster performance also improved through the better identification of vulnerable households and matching of stocks to needs. Some 13 NFI-specific assessments were conducted to more precisely analyse needs and vulnerabilities among returnees and IDPs, resulting in a needs-driven approach, rather than supply driven. Assessments of returnees, for example, demonstrated that select items, such as plastic sheeting, mosquito nets, and blankets, rather than full kits were most appropriate. Protracted insecurity in parts of Jonglei and Unity have served as the major challenge, with cluster partners unable to assist an estimated 3,000 or more IDP and returnee households in these areas.

Significant changes in needs. The scale of people requiring assistance in 2011 has been broadly in line with the cluster projections initially developed for 2011. The nature of needs and the location, however, has changed. Emergency shelter issues came to the fore during the emergency response to

returnees and the Abyei IDPs, as some returnees and all Abyei IDPs were likely live in situations of displacement or transit for multiple months. With the standard approach – provision of one to two pieces of plastic sheeting per family – unlikely to ensure these vulnerable households have sufficient protection from seasonal rains, partners have had to adapt to this change in needs. The location of needs has also changed, due to the predictions that a second wave of returnees are likely to become stranded in Central Equatoria, Lakes, Upper Nile and Western Bahr el Ghazal states and the number of displaced households has increased in Unity due to the increase in insecurity.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the NFI and Emergency Shelter Cluster are \$15.3 million. The cluster objectives remain adequate to respond to the revised most likely scenario. In the second half of 2011, the NFI and Emergency Shelter Cluster will focus on improving its emergency shelter strategy and response capacities, in addition to continuing its focus on prepositioning and needs-based responses. The original total cluster caseload remains sufficient to cover the projected needs, with some state-specific caseloads adjusted in accordance with the revised most likely scenario.

Cluster Objectives	Supporting Activities	Indicator	Target	Achieved as of mid year
Preposition sufficient NFIs in key locations throughout South Sudan in timely manner		Percentage of pipeline that is prepositioned and available in field hubs (new)	95%	• 90%
Improve the delivery of NFI and emergency shelter assistance beneficiaries	Train partners how to better measure need for NFI assistance during in emergencies Distribute NFIs based on results	Average number of weeks required to respond to emergencies Percentage reduction in number of assessments that need to be repeated Percentage of responses involving kit distribution against loose item distribution (new)	< 2 weeks 30% 70%	 35% improvement (14 days to 9 days NFI cluster has conducted 13 NFI specific assessments out of 51 IA assessments 18% Kit distribution and 82% loose items.

NUTRITION



Cluster Lead Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)					
Co-Lead	Action Contre la Faim (ACF)					
Implementing Agencies	ACF, CARE, CRADA, COSV, Concern Worldwide, IMC, Malaria Consortium, Medair, MERLIN, SP, SCiSS, Tearfund, UNKEA, WVI					
Number of Projects	22					
Cluster Objectives	 Provide access to therapeutic and supplementary services for management of acute malnutrition in children under five. Provide access to services for prevention of acute malnutrition in children and women. Strengthen Nutrition Cluster coordination and response. 					
Funds Requested	Original: \$24.8 million Revised at mid-year: \$34.5 million					
Funds Requested per	High: \$29.1 million					
Priority Level (Original)	Medium: \$5.4 million					
Funding to Date	\$16.2 million (47% of original requirements)					
Contact	Vivienne Forsythe, Cluster Coordinator, vforsythe@unicef.org					

Original and revised caseload estimates (January – December 2011)									
	Original Caseload for Revised Caselo								
State	Sever	e Acute Malr	utrition	Severe Acute Malnutrition ⁵²					
	Female	Male	Total	Female	Male	Total			
Central Equatoria	667	743	1,411	534	594	1,129			
Eastern Equatoria	1692	1,786	3,478	2,073	2,189	4,262			
Western Equatoria	173	195	368	138	156	294			
Lakes	755	838	1,593	2,440	2,599	5,039			
Jonglei	6,475	7,751	14,226	4,041	4,578	8,619			
Upper Nile	2,000	2,394	4,394	4,719	5,649	10,369			
Unity	3,362	3,535	6,898	2,690	3,828	7,518			
Warrap	7,616	7,139	14,755	4712	4,480	9,192			
Western Bahr el	93	105	198	1,263	1,297	2560			
Ghazal	90	103	190	1,203	1,291	2300			
Northern Bahr el	7,795	7,286	15,080	4,193	3,984	8177			
Ghazal	1,195	7,200	13,000	,	3,904	0177			
Sub-total	30,627	31,773	62,400	21,804	23,354	64,159			
Returnees									
Treatment of moderate acute malnourished children 134									
Prevention of moderate a	Prevention of moderate acute malnutrition in children 227,000								
Pregnant and lactating w	Pregnant and lactating women 396,500								
Total caseload						827,551			

Achievements and challenges. Nutrition Cluster members have treated at least 18,094 children under five with SAM, reaching approximately 23% of the estimated 78,000 severely malnourished children in South Sudan. Some 51,442 children under age 6-59 months and 132,507 children age 6-24 months were treated for MAM through targeted and blanket supplementary feeding programmes, respectively. Some 40,129 pregnant and lactating women were treated for MAM through blanket supplementary feeding. The Nutrition Cluster developed a standardized Nutrition Initial Rapid Assessment Tool and guidelines on appropriate interventions for returnees, to improve the effectiveness of the partners' response. A standardized survey tool was developed and used to conduct surveys in 17 counties during the pre-harvest period (March/April). Nutrition Cluster members worked with health partners to develop guidelines for management of the nutritional status of patients with kala-azar.

The limited number of partners with nutrition technical capacity remains the largest challenge to the success of the Nutrition Cluster. A number of new partners have joined the cluster in 2011, however most are partners that traditionally focus on health rather than nutrition and require significant mentoring and technical support. Delays in funding, primarily through CHF, resulted in the late implementation of infant and young child feeding activities by partners, and surveys were not

⁵² IDP children with severe acute malnutrition are included in the state-specific figures below.

completed as fully as planned due to the technical capacity limitations of partners and insecurity in some states.

Significant changes in needs. Despite the improved harvest last year, 2011 pre-harvest SMART surveys conducted in 17 counties indicate no significant change in the malnutrition levels as compared to 2010. Global acute malnutrition (GAM) levels were as high as 24.2% (Aweil East, Northern Bahr el Ghazal) and SAM levels as high as 6.4% (Akobo East, Jonglei). Monthly reports from experienced nutrition partners in Northern Bahr el Ghazal and Warrap indicated an exponential increase in admissions in April and May 2011, even before the influx of IDPs from Abyei. The arrival of significant numbers of returnees and IDPs has placed additional stress on nutrition services, with returnees accounting for 25% of beneficiaries in some areas. The arrival of more than 100,000 displaced people from Abyei has significantly increased the pressure on existing nutrition services, particularly in Warrap and Northern Bahr el Ghazal. The population in Abyei was in poor nutritional status before displacement, with a January 2010 survey showing 17.6% GAM and 4.4% SAM and admissions to nutrition programmes in Abyei doubling in early 2011. Nutrition partners working in areas hosting the Abyei displaced population have noted a sharp rise in admissions to treatment centres. With the good results of the 2010 agricultural season undermined by the increased influx of returnees and IDPs and by food shortages and food price increases due to blockage of commercial traffic from Sudan, the nutritional status of the most vulnerable is likely to deteriorate in the second half of 2011.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Nutrition Cluster are \$34.5 million. The cluster objectives remain adequate to respond to the revised most likely scenario, though the cluster has further refined the two original objectives and activities to better reflect the importance of prevention. It has also added an additional objective on coordination to better highlight the vital importance of having a multi-cluster approach to address the multiple interrelated underlying causes of malnutrition. Several changes have been made to the **indicators** and targets. The target for pregnant and lactating women treated through blanket supplementary feeding was decreased due to the availability of nutrition commodities. The target for proportion of priority states having nutrition assessments conducted regularly was reduced to 60% to be more achievable, reflecting the limited capacity of cluster partners. The **revised cluster caseload** has been increased to include new returnees and to reflect the likely deterioration in nutritional status over next six months, signalled by the current increasing admission rates.

Linking relief to development. As GoSS MoH works towards building its capacity to provide baseline nutrition services, the cluster plays an important role in ensuring emergency nutrition services are provided in areas at high-risk of malnutrition rates above emergency thresholds, as well as in areas experiencing conflict and displacement. Although emergency nutrition was not included in the SSDP, the Nutrition Cluster works closely with the GoSS MoH to ensure all interventions are implemented in line with national nutrition standards and policies.

	Cluster Objectives	Supporting Activities	Indicator Target (change)	Achieved as of mid-year
1.	Provide access to therapeutic and supplementary services for management of acute malnutrition in children under five	 Manage severe and MAM in children under five and pregnant and lactating women 	Percentage of acutely malnourished boys and girls treated in therapeutic and supplementary feeding programmes in line with SPHERE Standards. • 80% of boys and girls und five with SAM* • 50% of boys and girls und five with MAM	• 19.1%
2.	Provide access to services for prevention of acute malnutrition in children and women (refocused)	 Provide micronutrient supplementation to children 6-59 months and pregnant and lactating women Provide fortified blended food to pregnant and lactating women Protect, promote and support appropriate infant and young child feeding 	Percentage of girls and boys 6-59 months supplemented with Vitamin A twice/yearly * Percentage of boys and girls 6-24 months provided with ready-to-use food (RUF) during seasonal hunger period in the seven priority states (new) Percentage of pregnant and lactating women supplemented with fortified blended food in the seven priority states Percentage of pregnant and lactating women receiving information on good IYCF practices *	 74% 58.4% (BSFP) 8.6% 2.8%
3.	Strengthen Nutrition Cluster coordination and response	 Convene Cluster coordination and technical working group meetings at state and national levels Conduct timely and quality nutritional assessments in communities/areas affected by humanitarian crisis 	Percentage of priority states in which monthly coordination meetings are held (new) Percentage of quality nutrition assessments conducted in seven priority states twice/yearly Number of nutrition surveys conducted in counties where surveys have not been conducted before (new) • 100% • 60% of county nutrition surveys conducted in Five	30%28.6%To be reported on at end year

^{*} denotes indicators in line with the IASC standard indicators.

PROTECTION

Cluster Lead Agency	OFFICE OF THE UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES
Co-Lead	Norwegian Refugee Council (NRC)
Implementing Agencies	ARC, InterSOS, IRC, SCiSS, UNICEF, GADET-Pentagon, UNFPA, WVI, NRC, UNHCR
Number of Projects	29
Cluster Objectives	 Enhance physical security of people in priority areas Prevent GBV and provide support to survivors Address specific threats to children, including abduction, recruitment and separation
Funds Requested	Original: \$45.6 million Revised at mid-year: \$53 million
Funds Requested per Priority Level	High: \$48 million Medium: \$5 million
Funding to Date	\$7.7 million (15% of requirements)
Contact	Hy Shelow, Cluster Coordinator, email: shelow@unhcr.org Greg Norton, Cluster Co-Coordinator, email: icla-pm@sudan.nrc.no

Caseload estimates ⁵³	Caseload estimates ⁵³					
State	Sector Caseload					
	Female	Male	Total			
Control Equatoria	GBV: 8%	GBV: 2%	GBV: 10%			
Central Equatoria	CP: 2,550 girls	CP: 2,450 boys	CP: 5,000 children			
Factors Equatoria	GBV: 3%	GBV: 2%	GBV: 5%			
Eastern Equatoria	CP: 2,040 girls	CP: 1,960 boys	CP: 4,000 children			
Western Equatoria	GBV: 6%	GBV: 4%	GBV: 10%			
Western Equatoria	CP: 1,785 girls	CP: 1,715 boys	CP: 3,500 children			
Lakes	GBV: 3%	GBV: 2%	GBV: 5%			
Lakes	CP: 3,187 girls	CP: 3,063 boys	CP: 6,250 children			
longloi	GBV: 8%	GBV: 5%	GBV: 13%			
Jonglei	CP: 4,080 girls	CP: 3,920 boys	CP: 8,000 children			
Upper Nile	GBV: 8%	GBV: 5%	GBV: 13%			
Opper Mile	CP: 2,550 girls	CP: 2,450 boys	CP: 5,000 children			
Unity	GBV: 8%	GBV: 5%	GBV: 13%			
Office	CP: 2.040 girls	CP: 1,960 boys	CP: 4,000 children			
Warrap	GBV: 8%	GBV: 5%	GBV: 13%			
vvariap	CP: 3,187 girls	CP: 3,063 boys	CP: 6,250 children			
Western Bahr el Ghazal	GBV: 3%	GBV: 2%	GBV: 5%			
Western Baril et Griazai	CP: 3,187 girls	CP: 3,063 boys	CP: 6,250 children			
Northern Bahr el Ghazal	GBV: 8%	GBV: 5%	GBV: 13%			
Northern Baril et Gilazai	CP: 3,187 girls	CP: 3,063 boys	CP: 6,250 children			
	General: 100%	General: 100%	General: 100%			
Total	GBV: 63%	GBV: 37%	GBV: 100%			
	CP: 25,243 girls	CP: 24,257 boys	CP: 49,500 children			

Achievements and challenges. The cluster has improved the information available on protection concerns, which has enabled better funding of response, more advocacy and better targeting of response. GBV response has improved, with two GBV capacity promoters identified and trained for each State and three nationally. In addition, 205 community counsellors are providing case management and psycho-social support to GBV survivors and 50 new medical personnel are providing clinical care to rape survivors. Some 250 separated and unaccompanied children have been identified to date. The majority have been assisted to be reunified with their families, except for 45 children who have been placed in interim care centres or under foster care while their families are being traced.

Continued shortfalls in funding are a challenge to the success of the cluster. The percentage of people in conflict-affected areas and areas with high levels of violence reached with protection services was lower than planned due to the contraction in humanitarian access and space. Success in the demobilization of children associated with armed groups remained limited, with only 65% of identified children demobilized and reintegrated, due to pervasive difficulties, including in accessing

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⁵³ The original caseload estimates were found to be sufficient for the revised most likely scenario.

barracks. The GBV information management system is not yet functional in most states as community case managers are struggling to use the case intake form due to having a low level of education. The creation of Special Police Units sensitized to GBV victim and other special needs issues continues to be problematic due to poor infrastructure, turnover of trained personnel and lack of follow up by key humanitarian actors.

Significant changes in needs. The sharp increase of insecurity in 2011 and use of harsh military tactics, such as re-mining, deliberate attacks on civilians, and forced recruitment, has increased the threats to the physical safety of people in South Sudan. In order to better document and analyse the changing needs in South Sudan, the Protection Cluster has conducted some 36 Rapid Needs Assessments of physical, legal and material safety in South Sudan since late 2010. Among other results, these assessments have shown that violence was targeted at vulnerable groups and tensions between communities, presence of armed groups and threats from generalized violence seriously restricted freedom of movement for 60% of respondents. Lack of access to identity documentation, profound dearth of services to support people with special needs, especially older people, and forced marriage of children are pervasive problems. In all payams assessed there are police present, and although the quality and effectiveness of policing varies greatly, communities almost universally want an increased civilian police presence. The assessments repeatedly showed a perception of the SPLA as a predatory force and the police as incompetent. In almost all payams there is enough land available to support the population but there is a "shortfall" in the capacity (and sometimes integrity) of the Government agencies responsible for allocating or administering ownership of land.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the Protection Cluster are \$53 million. The cluster objectives remain adequate to respond to the revised most likely scenario, with emphasis in the second half of 2011 continuing to be on targeted and coordinated interventions with particular attention to vulnerable groups, namely IDPs, refugees, returnees, women, children, elderly and people with disabilities. Increasing the capacity of state actors will remain the approach, although in the short term the cluster will have to prioritize direct implementation, particularly in response to GBV. No changes have been made to the **indicators**, targets or caseload.

Linking relief to development. The protection mainstreaming, assessment and documentation promoted by the Protection Cluster has had some, although limited, effect on development planning. The most successful efforts to date have come through seminars on protection for non-protection actors, such as development partners and Japan Platform agencies.

Cluster Objectives Supporting Activities		Innorting Activities	In	dicator	Тэ	arget		Achieved as of mid year	
1. Ei of ar	nhance physical security f people in border areas nd in areas with high		Advocate for action to meet the needs of the most vulnerable populations	•	Percentage of people in conflict-affected areas and areas with high levels of violence that can be reached		80%	•	50%
le	levels of violence	•	Report periodically and monitor trends on grave human rights violations	•	Percentage of conflict-affected people in border areas and areas with high levels of violence that receive protection services, including prevention and response to GBV	•	20%	•	40%
				•	Number of advocacy interventions carried out on basis of reports	•	8	•	6
SI	rovide assistance and upport to survivors of ender-based violence	•	Improve access to basic psychosocial and health services for women, children and men who	•	Number of individuals (disaggregated by sex and age) reporting sexual assault	•	25% of people of reproductive age	•	17% (13 counties) with access to services (defined as case management, psycho-social
ar	nd improve prevention	•	are survivors of GBV Improve prevention of GBV and	•	Percentage increase in the number of people, including survivors of GBV, having access to services	•	25%	•	support and CMR services) 50% of states currently with
		•	response services to survivors of GBV in priority areas GBV Standard Operating Procedures (SOP) and GBV IMS implemented and utilized in ten states of South Sudan	•	Percentage of states with adequate post-rape treatment and post-exposure prophylaxis	•	100		adequate post rape treatment and PEP kits
				•	(PEP) kits Number of states with an established community based safe network for survivors	•	All	•	One state (SPUs are functional in Yei and Juba only) SOPs have been contextualized
					• 1	Number of states the SPU is able to provide appropriate services to survivors	• All		in 5 States GBVIMS data collected in
				•	Number of SOPs contextualized	•	All		Jonglei and Western Equatoria No monthly or quarterly reports generated.
				•	Number of monthly and quarterly trend and incident analysis reports produced, based on the GBV IMS	•	12 monthly reports and four quarterly trend analysis reports		yenerateu.
al	eunify separated and bducted children with neir families and remove	•	Conduct family tracing and reunification of separated and abducted children	•	Percentage of identified children reunited with their families or alternative care arrangements		100%	•	80%
al w re	Il children associated vith armed forces and eintegrate them with their amilies	•	Demobilize and reintegrate children associated with armed groups are demobilized and reintegrated	•	Percentage of identified children demobilized and reintegrated	•	100%	•	65%

WATER, SANITATION AND HYGIENE



Cluster Lead Agency	UNITED NATIONS CHILDREN'S FUND (UNICEF)				
Co-Lead	Medair				
Implementing Agencies	ACF, ACTED, Alaska Sudan Medical Project, AMURT, ARC, AWODA, CAFOD, CARE, CARITAS, CESVI, CRADA, CRS, DCA, DRC, Goal, IAS, Intermon Oxfam, InterSOS, IOM, IRW, Medair, MWRI, MoH, NCA, NHDF, Oxfam GB, Pact, Polish Humanitarian Action, PCO, PWJ, PSI, RI, SP, Solidarites, Tearfund, UNHCR, UNICEF, WVI, ZOA				
Number of Projects	43				
Cluster Objectives	 Provide access to safe water for one million people through rehabilitation of existing water schemes, development of new water sources, and increase maintenance capacity at local level. Support up to one million IDPs and returnees through pre-positioning and distribution of WASH supplies, strengthening of response coordination systems, and emergency WASH interventions Increase access to improved sanitation facilities for 200,000 men, women, and children Reach one million men, women, and children with key hygiene promotion messages focused on effective water treatment and storage, hand washing with soap, and regular latrine usage 				
Funds Requested	Original: \$65.1 million Revised at mid-year: \$72.4 million				
Funds Requested per	High: \$35.9 million				
Priority Level	Medium: \$36.5 million				
Funding to Date	\$19.1 million (26% of requirements)				
Contact	Douglas Graham, Cluster Coordinator, dgraham@unicef.org				
Contact	Jesse Pleger, Cluster Co-coordinator, watsan-southsudan@medair.org				

Original and revised	caseload e	stimates (Ja	anuary-Decer	nber 2011)		
	Origir	al Cluster C	aseload	R	evised Cluster C	aseload
State	Female	Male	Total	Female	Male	Total
Central Equatoria	70,500	79,500	150,000	70,500	79,500	150,000
Eastern Equatoria	66,150	68,850	135,000	66,150	68,850	135,000
Western Equatoria	80,850	84,150	165,000	80,850	84,150	165,000
Lakes	49,350	55,650	105,000	49,350	55,650	105,000
Jonglei	69,000	81,000	150,000	69,000	81,000	150,000
Upper Nile	75,900	89,100	165,000	75,900	89,100	165,000
Unity	73,500	76,500	150,000	73,500	76,500	150,000
Warrap	85,800	79,200	165,000	85,800	79,200	165,000
Western Bahr el Ghazal	56,400	63,600	120,000	56,400	63,600	120,000
Northern Bahr el Ghazal	101,400	93,600	195,000	101,400	93,600	195,000
Sub-Total	728,850	771,150	1,500,000	728,850	771,150	1,500,000
IDPs			500,000			500,000
Returnees			400,000			530,000
Host Communities			250,000			350,000
Sub-total, Emergency	y Respons	е	1,150,000			1,450,000
GRAND TOTAL			2,650,000			2,880,000

Achievements and challenges. More than 425,000 IDPs and returnees were provided with access to an improved water source or hygienic latrines in the first six months of 2011. The cluster increased its focus on hygiene promotion, with two agencies running pilot programmes for community-led total sanitation. The cluster formed a technical-level working group to address systemic problems with the supply chain of spare hand pump parts. Coordination significantly improved, with the establishment of WASH Cluster Focal Points in all ten states as well as monthly reporting, with 60% of agencies reporting. WASH activity mapping was completed down to the county level. Despite the achievements, most outputs have fallen short of the original targets. With the heavy focus on returnees and IDPs, water interventions tend to become first priority causing sanitation and hygiene interventions to lag behind.

Significant changes in needs. The arrival of more than 300,000 returnees and high level of new internal displacement has placed significant pressure on already limited water and sanitation resources in local communities. The cluster has scaled up to address these increased needs, with cluster assessments showing the existing low level of water access becoming wholly insufficient to meet the increased demand. With no cushion for existing resources to absorb additional users, communities are unable to support returnees or IDPs, necessitating life-saving interventions from the cluster.

Revised cluster requirements, strategy and caseload. The revised 2011 requirements for the WASH Cluster are \$72.4 million. The cluster objectives remain adequate to respond to the revised most likely scenario, with emphasis on further increasing cluster members' capacity to undertake rapid emergency interventions, including to the second wave of returnees. Several changes have been made to three **indicator targets**, lowering the overall target for increase in access to water and sanitation services and the provision of hygiene messages to one million people, down from 1.5 million. The **revised cluster caseload** includes an increase in the number of returnee beneficiaries in line with the revised most likely scenario.

Linking relief to development. A key goal for the GoSS, as cited in the SSDP, is to increase the government delivery of water and sanitation services, which are public goods, to both urban and rural communities throughout the country. The WASH Cluster's efforts to ensure access of IDPs and returnees to basic water and sanitation services are in line with this development goal. A number of WASH Cluster members also conduct development activities, and as such, participated in the development of the SSDP. These actors, by virtue of their dual emergency/development roles, were able to ensure relief considerations were taken into account in the development of the SSDP.

	Cluster Objectives	Supporting Activities	Indicator ⁵⁴	Target (change)	Achieved as of mid year
1.	Provide access to safe water for one million people through rehabilitation of existing water schemes, development of new water sources, and increase maintenance capacity at local level	 Upgrade existing water points into water yards and harvest rainwater Construct surface water treatment Rehabilitate existing water supply systems and where necessary construct new systems Support point-of-use water treatment and storage Monitor water quality and support water purification Build capacity of community-based organizations to operate systems effectively Support and strengthen supply chain of hand pump spare parts 	Estimated number of people provided with access to an improved water source (based on SPHERE indicators of 500 people/hand pump or 15/L/person/day) Number of trained water technicians at community level, disaggregated by gender Number of water management committee members trained, disaggregated by gender	1,000,000 (↓) 2,000 mechanics caretakers, 25% of which are women 4,000 WASH Committee members, 60% of which are women	 269,552 196 mechanics trained 3,657 WASH Committee members trained
2.	Support up to one million IDPs and returnees through prepositioning and distribution of WASH supplies, strengthening of response coordination systems, and emergency WASH interventions	 Procure and pre-position WASH emergency supplies Strengthen sector-wide coordination and emergency response capacity within the sector Coordinate and manage the WASH pipeline Identify and mobilize emergency response teams deployable in all ten states for assessment and coordination of timely response 	Estimated number of IDPs and returnees provided with access to an improved water source, hygienic latrines (disaggregated by gender), or supplied with basic hygiene kit Number of AWD cases reported in the first 90 days of an emergency response	1,000,000 (↓) Target: 0	433,904 emergency- affected people provided with access to improved water source
3.	Increase access to improved sanitation facilities for 200,000 men, women, and children	 Rehabilitate existing sanitation facilities Provide new sanitation facilities in target locations/schools/health centres with separate units for males and females in coordination with the Health and Education Cluster Support community-led total sanitation approaches 	Number of people accessing toilets and washing facilities that are culturally appropriate, secure, sanitary, and user friendly, disaggregated by gender	• 200,000	17,383 people accessing improved sanitation facilities
4.	Reach one million men, women, and children with key hygiene promotion messages focused on effective water treatment and storage, hand washing with soap, and regular latrine usage	locations including schools Reproduce and disseminate information, education and communication (IEC) materials in target location	Number of people—men, women, and children—reached with key hygiene messages Percentage of adults/school children recalling three key hygiene messages (MOV-Statistical Survey e.g. MICS compared to baseline in South Sudan Household Health Survey / SSHHS)	1,000,000 (↓)80%	179,492 people reached with key hygiene messages

⁵⁴ The WASH Cluster indicators used in 2011 were formulated in consultation with external monitoring and evaluation experts. The Cluster will review these indicators again during the development of the 2012 CAP, with the assistance of global experts, to consider if IASC Global WASH Cluster indicators can be used.

4. FORWARD VIEW

4.1 EARLY PLANNING FOR THE 2012 CAP

A critical priority for the newly-established Humanitarian Country Team in South Sudan is to design a methodology for more precisely targeting humanitarian actions to those most in need, based on comparable data available. Initial efforts to improve the evidence base for humanitarian planning were taken in 2009 and 2010, with the elaboration of state humanitarian profiles for the 2010 Work Plan and the elaboration of county humanitarian profiles, through the State Humanitarian Action Planning process (SHAP), for the 2011 Work Plan. Although the SHAP documented a coherent and accurate view of humanitarian needs across counties and states, in a way that sought to maximize comparability of the data, the use of the data has not been high.

In preparation for the 2012 CAP, the HCT in South Sudan is analysing the possibilities for how to develop the evidence base in South Sudan, through a robust but practical methodology that takes into account the lack of government systems and conflicting data sets and sources in the country. Some early work is already being done through efforts to improve the reliability and comparability of initial rapid inter-agency assessments, through the development of better tools and capacity-building of front-line cluster members. The cluster will also continue to conduct field assessments to collect baseline county level data first hand in critical areas once the wet season has ended in November 2011.

1. Will there be a CAP in 2012? Yes

2. CAP 2012 Workshop dates: 10-11 August 2011

	ment Plan for the 2012 CAP: existing asset	ssments, identification of gaps in assessment in	formation, and planne	d assessments to fill gaps
	5	EXISTING NEEDS ASSESSMENTS	, 1	9 1
Cluster(s)	Geographic areas and population groups assessed	Organizations that implemented the assessment	Dates	Title or Subject
Education	Bor County, Jonglei	Save the Children	01/2011	Joint Education and Child Protection Assessment
Education	Lainya, Yei and Juba Counties, Central Equatoria	Plan International	04/01/2011 — 07/01/2011	Rapid Need Assessment of Returnees and their Host Communities in Lainya, Yei and Juba Counties of Central Equatoria State
Education	Ikwoto, Kapeota, and Magwi Counties, Eastern Equatoria	Plan International	17/01/2011 – 20/01/2011	Rapid Need Assessment of Returnees and their Host Communities in Ikwoto, Kapeota and Magwi Counties of Eastern Equatoria State, south Sudan
Food Security and Livelihoods	10 states of South Sudan	GoSS Food Security Technical Secretariat, South Sudan Centre for Census, Statistics and Evaluation, GoSS MoAF, MoARF, SSRRC and MoH, UN agencies FAO, WFP, UNICEF, OCHA and NGO partners FEWS NET, VSF-B and Catholic Relief Services with support from the NGO forum.	5/10/2010 – 15/10/2010	Annual Needs and Livelihood Analysis (ANLA)
Food Security and Livelihoods	Western Bahr el Ghazal, Northern Bahr el Ghazal, Unity, Jonglei, Warrap and Central Equatoria	SSRRC, SSCCSE, MoAF, FAO and WFP	7/2/2011 - 15/2/2011	Returnee Emergency Food Security Assessment (EFSA)
Food Security and Livelihoods	South Sudan	GoSS MoAF, SSRRC, SSCCSE, FEWS/NET, EC/JRC, FAO and WFP	18/10/2010 – 12/11/2010	Crop and Food Security Assessment Mission (CFSAM)

Food Security and Livelihoods	South Suda	n	FSTS, SSRRC,	MAF, MoH, WFP, FAO, UNICEF	02/2011	South Sudan Food Security Monitoring			
Food Security and Livelihoods	Akobo, Ayoo Jonglei Stat	d, Pibor and Twic East counties, e	WFP, local gove	emment, UNICEF	10/2010 – 11/2010	Akobo, Ayod, Pibor and Twic East county Emergency Food Security and Nutrition Assessment			
Health	South Suda	n	Ministry of Healt		2011	Health Facility Assessment			
Health	South Suda	n	Ministry of Healt	:h	2010	South Sudan Household Survey 2010			
Health	South Suda		Ministry of Healt	h		Lot Quality Assurance Survey			
Health	Northern Ba	hr el Ghazal	ADRA		March 2011	SSHiNe Assessment			
Health	Eastern Equ	uatoria	Merlin		March 2011	KBS			
Health	Northern Ba	hr el Ghazal	IRC		March 2011	Health Facility mapping			
Health	Northern Ba Ghazal, Wa	hr el Ghazal, Western Bahr el rrap	WHO		March and April 2011	State Health Cluster Assessment			
Nutrition	29 nutrition conducted f	surveys and assessments were rom October 2010 to April 2011, SMART surveys in seven states		CARE, Concern Worldwide, COSV, N, SP, SC, Tearfund, WVI with the	October 2010 – April 2011	SMART Nutrition Surveys			
Protection	Some 36 proconducted a September 2 Breakdown 3; EES 1; Jo Warrap 3; U	otection assessments were across the ten states from 2010 to 15 June 2011. of assessment locations is: CES onglei 5; Lakes 2; NBeG 2; Inity 2; UNS 5; WES 5; WBeG 2.	UNHCR, in colla Sudan Relief an of Social Welfar agencies and ei		September 2010 – June 2011	http://southsudanprotectioncluster.org			
Protection	Weekly prot were condu	ection monitoring assessments cted with returnee populations ober 2010 to May 2011	SSRRC, MoSW	aboration with counterparts in the , South Sudan Human Rights Nagencies and eight NGOs	November 2010 – June 2011	http://southsudanprotectioncluster.org			
Water, Sanitation and Hygiene	51 assessn covering all majority of a displaced ar assessment Jonglei 15; I	nents in the reporting period ten southern states. The assessments focused on conflict- nd returnees. Breakdown of t locations is: CES 2; EES 2; Lakes 3; NBeG 4; Warrap 2; S 10; WES 4; WBeG 1.	including UNICE international NG	ticipated in the WASH assessments, EF, other UN agencies, and local and OS, with SSRRC, the GoSS ural Water Supply and Sanitation.	January-May 2011	Rapid inter-agency assessments WASH rapid needs assessments			
			G	APS IN INFORMATION					
Ref. #	Cluster(s)	Geographic areas and popul			Issues of concern	1			
1	Education	Mvolo County, Western Equator		Access to protective education for IDP					
2	Education	Tambura County, Western Equa		Access to protective education for IDP					
3	Education	Warrap		Access to protective education for Aby	ei IDPs and host commun				
4	Education	Mayom County, Unity		Access to protective education for IDP	s and host communities, ir	npact of looting of education supplies			
5	Education	Pigi and Fangkak counties, Jong	glei	Impact of occupation of schools, acces					
6	Health	Women of reproductive age		Maternal mortality. The most recent f with Canadian International Development		the 2010 SSHHS did not address this. MoH e performing a national survey on this			
7	Health	Children under five		DPT3 coverage. Data collected in the SSHHS is thought to have a biased information					
8	Nutrition	North western part of Jonglei ar Nile children under five							
9	Nutrition	Unity, Western Equatoria and C children under five	·	ria Nutritional status and IYCF practices of IDPs, returnees and host communities					
10	Protection	Raja county, WBEG -Darfuris, II	DPs	Humanitarian access, general protection					
11	Protection	Abiemnon, Unity- civilians		Conflict-affected population, sexual vic					
12	Protection	Mayom, Unity – civilians		Conflict-affected population, sexual vic	lence, child recruitment				

13	Protection	Khor Fulus, Jonglei- civilia	ns		-affected population, sexual violence, child recruitme	
14	Protection	Fangak, Jonglei- civilians			-affected population, sexual violence, child recruitme	ent
			F	PLANNED NEE	DS ASSESSMENTS	
To fill info gap (ref. #)	Cluster(s)	Geographic areas and population groups targeted	Orgs. to implement assessment	Planned dates	Issues of concern	To be funded by
1	Education	Mvolo, Western Equatoria	ADRA	June	LRA-affected IDPs and host communities	UNICEF
2	Education	Mundri East, Western Equatoria	ADRA	June	LRA-affected IDPs and host communities	UNICEF
3	Education	Ezo, Western Equatoria	ADRA	June	LRA-affected IDPs and host communities	UNICEF
4	Education	Yambio, Ezo, Tambura, Western Equatoria	INTERSOS	TBD	Conflict-affected communities and IDPs	Funding not yet committed
5	Education	Akobo, Piji, Pibor, Jonglei	INTERSOS	TBD	Conflict-affected communities and IDPs	Funding not yet committed
6	Education	Counties TBD, Upper Nile	SSUDA	TBD	Conflict-affected communities and IDPs	UNICEF
7	Education	Mayom, Unity	Cluster partners	TBD	Conflict-affected communities and IDPs, looted school supplies	Funding not yet committed
8	Education	Twic, Warrap	Cluster partners	June	Conflict-affected communities and IDPs	Funding not yet committed
9	Food Security and Livelihood	Unity, Eastern Equitoria, Jonglei, Northern Bah El Ghazal, Upper Nile, Central Equitoria, Lakes	Cluster Partners	July-August	Role and Contribution of livestock and fisheries to household food security	FAO
10	Food Security and Livelihood	Country wide	Cluster Partners	August	Mid Year Rapid Crop Performance review	FAO, WFP
11	Food Security and Livelihood	Country wide	Cluster Partners	October	Annual Needs and Livelihood Analysis	WFP
12	Health	Countrywide	Health Cluster	June to August 2011	Health facility mapping	Health Cluster / CHF
13	Nutrition	Country wide	Nutrition Cluster	TBD	Mapping of nutrition services and capacity	GNC
14	Nutrition	Country wide	Nutrition cluster partners	TBD	IYCF practices	TBD
15	Nutrition	Country wide	Nutrition Cluster partners	Sept – November	Nutritional status of children	Various – sources of donor funding

ANNEX I: LIST OF PROJECTS AND FUNDING TABLES

Table IV: List of appeal projects (grouped by cluster), with funding status of each

as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
COORDINATION AND COMM	ION SERVICES							
SSD-11/CSS/38669/5146	NGO Secretariat Coordination in South Sudan	CRS	880,055	880,055	-	880,055	0%	HIGH PRIORITY
SSD-11/CSS/38675/298	Capacity-building for humanitarian relief response in South Sudan.	IOM	1,800,000	1,800,000	-	1,800,000	0%	HIGH PRIORITY
SSD-11/CSS/38686/5139	Security support to UN and implementing partners operating in South Sudan	UNDSS	850,000	850,000	576,526	273,474	68%	HIGH PRIORITY
SSD-11/CSS/42103/119	Humanitarian coordination and advocacy in South Sudan	OCHA	-	5,826,682	1,500,000	4,326,682	26%	HIGH PRIORITY
SSD-11/CSS/42215/561	United Nations Humanitarian Air Service	WFP	-	28,247,344	21,373,404	6,873,940	76%	HIGH PRIORITY
Sub total for COORDINATION	N AND COMMON SERVICES		3,530,055	37,604,081	23,449,930	14,154,151	62%	
EDUCATION								
SSD-11/E/36336/13215	Encouraging literacy and alternative education through provision of solar lighting at the household level	РСРМ	223,966	223,966	-	223,966	0%	MEDIUM PRIORITY
SSD-11/E/38721/120	Education for IDPs, returnees and host communities	UNHCR	1,305,672	1,305,672	342,918	962,754	26%	HIGH PRIORITY
SSD-11/E/38745/7981	Promotion of girls education through training and absorption of more female teachers into public schools system for continued improvement and sustainability of teaching and learning standards	AMURT International	283,529	283,529	200,000	83,529	71%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/E/38757/124	Support to Education Cluster Coordination	UNICEF	971,528	971,528	-	971,528	0%	HIGH PRIORITY
SSD-11/E/38763/124	Sustaining the pipeline for crucial teaching and learning materials for conflict-affected children	UNICEF	6,890,000	6,890,000	1,000,000	5,890,000	15%	HIGH PRIORITY
SSD-11/E/38767/124	Establishing safe/protective learning spaces in conflict-affected areas	UNICEF	3,645,190	3,645,190	3,555,665	89,525	98%	HIGH PRIORITY
SSD-11/E/38777/5103	Training teachers for emergency response	UNESCO	813,010	813,010	-	813,010	0%	HIGH PRIORITY
SSD-11/E/38783/5059	Supporting basic education and conflict prevention in South Sudan	Chr. Aid	450,000	450,000	400,300	49,700	89%	MEDIUM PRIORITY
SSD-11/E/38788/6723	Education and advocacy in situations of conflict and emergency -Terekeka County	IBIS	426,919	426,919	-	426,919	0%	HIGH PRIORITY
SSD-11/E/38793/6723	Accelerated Learning Programme in Central Equatoria	IBIS	810,700	810,700	-	810,700	0%	MEDIUM PRIORITY
SSD-11/E/38800/6723	Empowerment through education and advocacy	IBIS	540,218	540,218	-	540,218	0%	MEDIUM PRIORITY
SSD-11/E/38803/6079	Improving education for vulnerable children affected by emergencies in southern Sudan	sc	564,646	564,646	502,304	62,342	89%	MEDIUM PRIORITY
SSD-11/E/38818/8452	Improving educational quality and access in Pigi and Akobo counties of Jonglei State.	NHDF	1,000,000	1,000,000	-	1,000,000	0%	HIGH PRIORITY
SSD-11/E/38824/13010	Providing access to basic education	PCO	940,028	940,028	-	940,028	0%	MEDIUM PRIORITY
SSD-11/E/38831/13184	Integrated and quality education response in Koch County.	LHDS	582,000	582,000	-	582,000	0%	HIGH PRIORITY
SSD-11/E/38844/5660	Learning spaces rehabilitation, community services and youth empowerment in Pibor County.	INTERSOS	476,000	476,000	-	476,000	0%	HIGH PRIORITY
SSD-11/E/38852/5660	Meeting education needs for all in emergency in Jonglei State	INTERSOS	255,050	255,050	200,000	55,050	78%	MEDIUM PRIORITY
SSD-11/E/39754/5834	Alternative education systems in South Sudan	NRC	5,228,809	5,228,809	-	5,228,809	0%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/E/39755/7936	English language and teacher training for primary school teachers	Windle Trust	1,575,410	1,575,410	-	1,575,410	0%	HIGH PRIORITY
SSD-11/E/42211/561	Food assistance for school-age children affected by conflict and food insecurity	WFP	-	11,972,000	9,973,228	1,998,772	83%	HIGH PRIORITY
SSD-11/E/42285/13091	Emergency prepositioning for education in Western Equatoria and Warrap States.	ADRA Sudan	-	616,264	-	616,264	0%	HIGH PRIORITY
Sub total for EDUCATION			26,982,675	39,570,939	16,174,415	23,396,524	41%	
FOOD SECURITY AND LIVEL	HOODS							
SSD-11/A/36915/5587	Improved food security among vulnerable urban dwellers and IDPs through enhanced livestock production & fisheries support	VSF (Germany)	660,000	660,000	-	660,000	0%	HIGH PRIORITY
SSD-11/A/36917/5587	Food security and pastoralist livelihood asset protection through improved animal health services in conflict affected areas	VSF (Germany)	760,000	760,000	-	760,000	0%	HIGH PRIORITY
SSD-11/A/38635/7981	Enhancing self-reliance for the residents, returnees and IDPs in Northern Bahr el Ghazal State through interventions in the sectors of Food Security, Income Generation and Capacity Building	AMURT International	605,312	330,000	330,000	-	100%	MEDIUM PRIORITY
SSD-11/A/38639/5768	Improve food security and livelihood conditions for returnees and vulnerable groups in Ikwoto County through an integrated approach	AVSI	435,000	435,000	-	435,000	0%	MEDIUM PRIORITY
SSD-11/A/38642/13021	Improving food security and livelihood during return to NBeGS-Aweil	AWODA	335,000	175,000	-	175,000	0%	MEDIUM PRIORITY
SSD-11/A/38646/8477	Enhance food security and diversify livelihood strategies in the targeted communities in Western Equatoria, Central Equatoria and Upper Nile States	CAFOD	600,000	600,000	200,000	400,000	33%	HIGH PRIORITY
SSD-11/A/38651/6041	Jonglei State rural women food security project	Care Sudan	1,118,750	1,118,750	-	1,118,750	0%	MEDIUM PRIORITY
SSD-11/A/38653/7133	Emergency livelihood support for communities in Eastern Equatoria	CARITAS	250,000	250,000	-	250,000	0%	HIGH PRIORITY
SSD-11/A/38653/8769	Emergency livelihood support for communities in Eastern Equatoria	Caritas Switzerland	400,000	400,000	-	400,000	0%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/A/38657/6088	Enhancing food security and diversifying livelihoods	СМА	400,000	400,000	-	400,000	0%	HIGH PRIORITY
SSD-11/A/38659/5146	Community recovery for sustainable food security and improved livelihoods	CRS	362,700	200,000	-	200,000	0%	HIGH PRIORITY
SSD-11/A/38663/5328	Supporting environmentally sound food production for returnees and residents of Budi County.	Danchurchaid	630,317	630,317	200,000	430,317	32%	HIGH PRIORITY
SSD-11/A/38673/123	Livelihood support to at-risk populations, including IDPs, returnees and women-headed households	FAO	10,750,300	10,750,300	-	10,750,300	0%	HIGH PRIORITY
SSD-11/A/38681/120	Food security and livelihood support for IDPs, returnees, and host communities	UNHCR	3,212,898	3,212,898	-	3,212,898	0%	HIGH PRIORITY
SSD-11/A/38683/7854	Provision of agricultural inputs to vulnerable households (IDPs and returnees) in Warrap and West Bahr el Ghazal state	Intermon Oxfam	427,483	427,483	-	427,483	0%	HIGH PRIORITY
SSD-11/A/38691/5861	Restoring food security and livelihood in Budi County, Eastern Equatoria and Twic East County, Jonglei State	IRD	1,703,990	1,703,990	-	1,703,990	0%	MEDIUM PRIORITY
SSD-11/A/38693/6344	Sustainable income generating and agriculture opportunities for vulnerable population of northern counties of Jonglei state	PAH	495,000	495,000	-	495,000	0%	MEDIUM PRIORITY
SSD-11/A/38696/5157	Food Security and livelihood assistance to vulnerable populations	TEARFUND	1,083,059	1,083,059	-	1,083,059	0%	MEDIUM PRIORITY
SSD-11/A/38699/5654	Veterinary Intervention in Upper Nile and Jonglei states	VSF (Belgium)	820,000	820,000	820,000	-	100%	HIGH PRIORITY
SSD-11/A/38705/8435	Emergency food security and livelihoods project	wvs	335,310	335,310	-	335,310	0%	MEDIUM PRIORITY
SSD-11/A/38709/8435	Sobat food security and livelihood project	WVS	244,700	244,700	220,000	24,700	90%	HIGH PRIORITY
SSD-11/A/38712/5150	Food security and livelihoods project in Juba County	ZOA Refugee Care	335,680	335,680	-	335,680	0%	MEDIUM PRIORITY
SSD-11/A/38715/6422	Ensure food security through developing agricultural skills of IDP, returnees and widows	BRAC	382,600	382,600	-	382,600	0%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/A/38718/5181	Support to decrease in food aid needs in CES	DRC	360,841	360,841	300,000	60,841	83%	HIGH PRIORITY
SSD-11/A/38720/123	Food security through effective animal disease control and fish production	FAO	3,433,000	3,433,000	1,450,000	1,983,000	42%	HIGH PRIORITY
SSD-11/A/38736/5125	Emergency food preparedness and disaster risk mitigation	NPA	3,340,000	3,340,000	2,509,915	830,085	75%	HIGH PRIORITY
SSD-11/A/38762/5110	Sustaining and improving food security and livelihoods for agro-pastoral communities in NBEG, Unity and Warrap States	VSF (Switzerland)	465,196	465,196	-	465,196	0%	HIGH PRIORITY
SSD-11/A/38771/5834	Food security and livelihood improvement in Northern Bahr el Ghazal and Warrap States	NRC	1,000,000	1,000,000	_	1,000,000	0%	HIGH PRIORITY
SSD-11/A/38776/6971	Enhancing community resilience via improved food security (ECR)	RI	684,307	684,307	-	684,307	0%	MEDIUM PRIORITY
SSD-11/A/38786/123	Food security and livelihood cluster coordination mechanism for effective emergency planning and response	FAO	1,695,000	1,695,000	500,000	1,195,000	29%	HIGH PRIORITY
SSD-11/A/38843/14005	Strengthening agricultural production & income diversification, while protecting livelihoods in local communities and addressing the underlying causes of malnutrition	ACF - USA	2,065,729	2,065,729	-	2,065,729	0%	HIGH PRIORITY
SSD-11/A/38896/298	Rapid recovery of agricultural, livestock and fishery production of Vulnerable Groups in South Sudan	IOM	1,497,000	1,497,000	-	1,497,000	0%	MEDIUM PRIORITY
SSD-11/A/41994/5181	Enhancing food security for returnees and vulnerable hosts in urban and peri-urban areas around Juba	DRC	-	434,428	-	434,428	0%	HIGH PRIORITY
SSD-11/A/41995/8058	Improving the income of most vulnerable communities of Tonj North County while enhancing their resilience to the effects of drought and climate change through livestock restocking and support to local fishing industry	IRW	-	305,000	-	305,000	0%	HIGH PRIORITY
SSD-11/A/41996/8435	Introduction to wooden ox-plough techniques to Tonj North County	wvs	-	316,000	-	316,000	0%	MEDIUM PRIORITY
SSD-11/A/42013/5162	Emergency response to IDP and returnees in Twic County	Mercy Corps	-	740,999	-	740,999	0%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/A/42146/561	Food assistance to vulnerable populations affected by conflict and natural disasters	WFP	-	76,288,756	63,555,147	12,733,609	83%	HIGH PRIORITY
Sub total for FOOD SECURITY	AND LIVELIHOODS		40,889,172	118,376,343	70,085,062	48,291,281	59%	
HEALTH								
SSD-11/H/38644/6115	Community Based Health Care (CBHC)	ACROSS	25,000	25,000	-	25,000	0%	HIGH PRIORITY
SSD-11/H/38664/13091	Integrated primary health care support programmes in Terekeka County and support to reproductive health in Munuki SDA Clinic Central Equatoria State	ADRA Sudan	495,600	495,600	-	495,600	0%	MEDIUM PRIORITY
SSD-11/H/38671/6422	Basic health information dissemination and awareness building in local communities	BRAC	66,623	66,623	-	66,623	0%	MEDIUM PRIORITY
SSD-11/H/38672/6041	Emergency integrated primary health care project	Care Sudan	500,000	500,000	-	500,000	0%	HIGH PRIORITY
SSD-11/H/38676/6041	Unity primary health care project	Care Sudan	541,710	541,710	-	541,710	0%	HIGH PRIORITY
SSD-11/H/38678/6703	Support to provision of basic health services and emergency referral in the Counties of Twic ,Warrap State ,Awerial and Yirol East in Lakes State.	ССМ	805,308	805,308	250,000	555,308	31%	HIGH PRIORITY
SSD-11/H/38680/8434	Improving access to basic health care for sustainable post war community recovery and returnee reintegration in Eastern Equatoria State	CDoT	2,221,855	2,221,855	600,000	1,621,855	27%	HIGH PRIORITY
SSD-11/H/38698/6088	Sustaining primary health services for vulnerable communities	СМА	900,000	900,000	200,000	700,000	22%	HIGH PRIORITY
SSD-11/H/38706/5572	Provision of primary basic health services in South Sudan	cosv	440,000	440,000	-	440,000	0%	HIGH PRIORITY
SSD-11/H/38731/8918	Strengthening the provision and support of basic health package, in Pochalla county	CRADA	800,000	800,000	200,000	600,000	25%	HIGH PRIORITY
SSD-11/H/38738/5146	Provision of basic and emergency health services in Bor and Duk Counties	CRS	425,313	425,313	-	425,313	0%	HIGH PRIORITY
SSD-11/H/38740/14566	Provision of basic health services in ECS Rumbek Diocese	ECS Rumbek	28,370	28,370	-	28,370	0%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/H/38743/14567	Provision of primary & secondary healthcare in Central Equatoria State	EPC Sudan	175,000	175,000	-	175,000	0%	MEDIUM PRIORITY
SSD-11/H/38746/7790	Provision of sustainable and integrated primary health care services to vulnerable populations in Twic County (Warrap State) and Baliet and Ulang Counties (Upper Nile State)	GOAL	874,999	874,999	405,000	469,999	46%	HIGH PRIORITY
SSD-11/H/38775/8710	Supporting community response to Health and HIV/AIDS	International HIV/AIDS Alliance	660,500	660,500	-	660,500	0%	MEDIUM PRIORITY
SSD-11/H/38779/13107	Increasing Capacity of the Walgak PHCC in Akobo County, Jonglei State	IMC UK	500,000	500,000	-	500,000	0%	MEDIUM PRIORITY
SSD-11/H/38785/14568	The provision of HIV/AIDS awareness and prevention activities among the "other" uniformed forces in Central Equatoria.	Intrahealth	299,510	299,510	-	299,510	0%	MEDIUM PRIORITY
SSD-11/H/38789/298	Emergency health assistance in Western Equatoria State	ЮМ	515,000	515,000	-	515,000	0%	HIGH PRIORITY
SSD-11/H/38796/298	Emergency health assistance, Warrab	IOM	395,000	395,000	-	395,000	0%	HIGH PRIORITY
SSD-11/H/38799/5179	Basic and Emergency primary health care service provision in Northern Bahr el Ghazal	IRC	2,336,693	2,650,307	3,715,144	(1,064,837)	140%	HIGH PRIORITY
SSD-11/H/38808/13060	Community health and WASH services for Duk County, Jonglei State	JDF	271,097	271,097	-	271,097	0%	HIGH PRIORITY
SSD-11/H/38808/5861	Community health and WASH services for Duk County, Jonglei State	IRD	400,000	400,000	-	400,000	0%	HIGH PRIORITY
SSD-11/H/38809/14569	Provision of basic health packages and emergency referral services for returnee's and hosting communities in Juba and Kajokeji Counties - Central Equatoria State	KCS	774,434	774,434	-	774,434	0%	MEDIUM PRIORITY
SSD-11/H/38812/7607	Control of common communicable diseases for improved child survival in vulnerable populations	Malaria Consortium	1,154,530	1,154,530	300,000	854,530	26%	HIGH PRIORITY
SSD-11/H/38816/7607	Integrated interventions to maintain and expand Kala-Azar Control	Malaria Consortium	909,500	909,500	-	909,500	0%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/H/38819/7560	Provision of basic health services In Maridi & Rumbek North Counties	Malteser International	1,783,000	1,783,000	-	1,783,000	0%	HIGH PRIORITY
SSD-11/H/38821/8772	Medical aid for populations in Jonglei State, Payam of Old Fangak	MDM France	800,000	800,000	-	800,000	0%	HIGH PRIORITY
SSD-11/H/38823/5095	Support for MoH provision of primary health care in Upper Nile State and emergency response in South Sudan	MEDAIR	4,225,880	4,425,863	525,000	3,900,863	12%	HIGH PRIORITY
SSD-11/H/38827/5195	Provision and expansion of healthcare services in selected Counties of Eastern Equatoria and Jonglei states	MERLIN	2,838,162	2,838,162	575,000	2,263,162	20%	HIGH PRIORITY
SSD-11/H/38829/14570	Maternal newborn child survival initiative (MNCSI)	MGH	529,410	529,410	-	529,410	0%	MEDIUM PRIORITY
SSD-11/H/38830/8595	Maintaining existing safety nets in basic health service provision in Unity State and strengthening reproductive healthcare services in Central Equatoria State.	MSI	1,279,495	1,279,495	-	1,279,495	0%	HIGH PRIORITY
SSD-11/H/38833/5527	Support to basic health services in Eastern Equatoria	NCA	1,105,000	1,105,000	-	1,105,000	0%	HIGH PRIORITY
SSD-11/H/38839/8452	Improve the standard of basic primary health care service delivery in Pigi and Akobo Counties, Jonglei State	NHDF	508,000	508,000	-	508,000	0%	HIGH PRIORITY
SSD-11/H/38842/8449	Strengthening mother and child basic health care in Juba town and surroundings	OVCI	592,295	592,295	-	592,295	0%	MEDIUM PRIORITY
SSD-11/H/38845/13215	Enabling provision of 24-hour emergency health services in Northern Bahr El-Ghazal by installing solar lighting at the health facilities	PCPM	99,640	99,640	-	99,640	0%	MEDIUM PRIORITY
SSD-11/H/38847/6971	Developing and improving primary health care, providing emergency and nutritional services in Maban County, Upper Nile State, South Sudan	RI	448,850	448,850	200,000	248,850	45%	HIGH PRIORITY
SSD-11/H/38851/6754	Primary Health Care - nutrition programme	Sign of Hope	212,500	212,500	-	212,500	0%	HIGH PRIORITY
SSD-11/H/38853/14571	Improving health care services and emergency response capacity	SUDRA	778,600	778,600	325,000	453,600	42%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/H/38857/5480	Community based health care project in Unity State	Switzerland RC	1,060,000	1,060,000	-	1,060,000	0%	MEDIUM PRIORITY
SSD-11/H/38861/5157	Provision of life saving primary health care services	TEARFUND	4,653,178	4,653,178	1,407,407	3,245,771	30%	HIGH PRIORITY
SSD-11/H/38873/13035	Improving existing provision of basic package of health services, controlling communicable diseases and strengthening emergency response capacity of county health departments in Unity, Warrap, and Eastern Equatoria States.	THESO	1,218,117	1,218,117	-	1,218,117	0%	HIGH PRIORITY
SSD-11/H/38875/1171	Implementing the minimum initial service package (MISP) for reproductive health in emergencies	UNFPA	2,000,000	2,300,000	1,176,348	1,123,652	51%	HIGH PRIORITY
SSD-11/H/38876/120	Provision of health services to IDPs, returnees, and host communities	UNHCR	5,499,927	5,499,927	-	5,499,927	0%	MEDIUM PRIORITY
SSD-11/H/38883/124	Support for accelerated immunization services in South Sudan	UNICEF	5,660,704	5,660,704	950,000	4,710,704	17%	HIGH PRIORITY
SSD-11/H/38884/124	Maternal newborn care and preventing mother-to-child transmission of HIV	UNICEF	1,253,000	1,253,000	-	1,253,000	0%	MEDIUM PRIORITY
SSD-11/H/38888/14572	Community primary health care and nutrition awareness and prevention	UNKEA	198,999	198,999	-	198,999	0%	HIGH PRIORITY
SSD-11/H/38890/122	Health cluster coordination, emergency preparedness and humanitarian action	WHO	3,568,719	3,568,719	200,000	3,368,719	6%	HIGH PRIORITY
SSD-11/H/38892/122	Strengthening epidemic preparedness and response capacity at all levels in South Sudan	WHO	5,798,961	5,798,961	3,455,626	2,343,335	60%	HIGH PRIORITY
SSD-11/H/38893/122	Enhance capacity of referral hospitals to respond to critical medical, surgical and obstetrics emergencies	WHO	2,901,305	2,901,305	525,000	2,376,305	18%	HIGH PRIORITY
SSD-11/H/38895/122	Strengthen care and treatment of HIV/AIDS services for populations of humanitarian concern	WHO	1,020,009	1,020,009	-	1,020,009	0%	HIGH PRIORITY
SSD-11/H/38897/122	Capacity building of health workers in primary health care facilities in South Sudan	WHO	529,650	529,650	-	529,650	0%	MEDIUM PRIORITY
SSD-11/H/38900/122	Support Polio eradication and routine immunization programmes	WHO	2,863,641	2,863,641	-	2,863,641	0%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/H/38902/5926	Health and capacity-building project in complex humanitarian emergency	World Relief	400,053	400,053	400,053	-	100%	HIGH PRIORITY
SSD-11/H/38903/8435	Improved integrated diseases surveillance, control and response in Warrap State	WVS	503,000	503,000	446,594	56,406	89%	HIGH PRIORITY
SSD-11/H/38908/5586	Emergency reproductive health response and timely referral in Upper Nile State following the MISP	ARC	1,402,652	866,857	849,417	17,440	98%	HIGH PRIORITY
SSD-11/H/38911/5474	HIV prevention and care through integrated primary health care in Central Equatoria & Eastern Equatoria States South Sudan	Netherlands RC	914,000	914,000	-	914,000	0%	MEDIUM PRIORITY
SSD-11/H/38911/6634	HIV prevention and care through integrated primary health care in Central Equatoria & Eastern Equatoria States South Sudan	Sudan RC	-	-	-	-	0%	MEDIUM PRIORITY
SSD-11/H/38914/124	Delivery of basic health, nutrition and WASH services through the accelerated child survival initiative	UNICEF	5,035,420	5,035,420	2,203,271	2,832,149	44%	HIGH PRIORITY
SSD-11/H/38918/6079	Strengthening uninterrupted BPHNS delivery and emergency health response capacity in South Sudan	sc	1,500,000	1,500,000	1,544,368	(44,368)	103%	HIGH PRIORITY
SSD-11/H/39388/124	HIV prevention among young people in South Sudan	UNICEF	726,000	726,000	870,374	(144,374)	120%	MEDIUM PRIORITY
SSD-11/H/41920/13061	Provision of comprehensive health services to the people of Greater Yei Counties of Yei, Morobo and Lainya	SBHC	-	275,000	-	275,000	0%	MEDIUM PRIORITY
SSD-11/H/42299/8452	Improve the standard of basic primary health care service delivery in Pigi County	NHDF	-	468,000	-	468,000	0%	HIGH PRIORITY
SSD-11/H/42300/14826	Provision of basic and emergency primary health care services in Mayendit and Koch Counties.	UNIDO	-	377,532	-	377,532	0%	HIGH PRIORITY
SSD-11/H/42728/R/13091	Support to health reform and strengthening of primary health care in South Sudan	ADRA Sudan	1,416,939	-	-	-	0%	HIGH PRIORITY
Sub total for HEALTH			81,841,148	81,822,543	21,323,602	60,498,941	26%	
LOGISTICS								
SSD-11/CSS/39296/298	Humanitarian Common transport services in South Sudan	ЮМ	473,040	870,010	548,040	321,970	63%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/CSS/39314/561	Logistics cluster operations in South Sudan	WFP	643,697	643,697	-	643,697	0%	HIGH PRIORITY
SSD-11/CSS/39546/6458	Emergency feeder road repair at Khor Shaman and nearby areas of Raga County, Western Bahr el Ghazal	ACTED	420,867	420,867	420,050	817	100%	MEDIUM PRIORITY
SSD-11/CSS/39550/5767	Emergency repair and rehabilitation of key transport corridors North - South Sudan	UNOPS	9,730,000	9,730,000	1,725,582	8,004,418	18%	HIGH PRIORITY
SSD-11/CSS/39552/5767	Airstrips emergency rehabilitation	UNOPS	5,000,000	5,000,000	639,712	4,360,288	13%	HIGH PRIORITY
SSD-11/CSS/39553/5767	Rural road emergency repair and rehabilitation for improved access in Western Equatoria	UNOPS	6,150,000	6,150,000	-	6,150,000	0%	MEDIUM PRIORITY
SSD-11/CSS/42171/561	Logistics augmentation in support of the strategic grain reserve in South Sudan	WFP	-	32,225,133	-	32,225,133	0%	HIGH PRIORITY
SSD-11/CSS/42173/561	Feeder road construction in support of WFP activities in South Sudan	WFP	-	22,893,388	10,000,000	12,893,388	44%	MEDIUM PRIORITY
SSD-11/CSS/42415/5767	Basic infrastructure for humanitarian access, a proposal to secure humanitarian access post CPA	UNOPS	-	15,000,000	-	15,000,000	0%	HIGH PRIORITY
Sub total for LOGISTICS			22,417,604	92,933,095	13,333,384	79,599,711	14%	
MINE ACTION						,		
SSD-11/MA/38632/5182	Humanitarian mine action	DDG	2,746,000	2,746,000	-	2,746,000	0%	MEDIUM PRIORITY
SSD-11/MA/38641/5746	Mine risk education and dangerous area data collection in support of post referendum peace and stability in Greater Equatoria	Mines Advisory Group	385,000	385,000	200,000	185,000	52%	HIGH PRIORITY
SSD-11/MA/38645/5349	Support to people with disability and injuries in Jonglei	н	997,406	997,406	-	997,406	0%	MEDIUM PRIORITY
SSD-11/MA/38647/5746	Safer return and resettlement of returnees and internally displaced people (IDPs) during the post-referendum period in southern Sudan	Mines Advisory Group	125,000	125,000	-	125,000	0%	HIGH PRIORITY
SSD-11/MA/38652/7118	SIMAS national capacity-building and ERW clearance	SIMAS	987,072	987,072	-	987,072	0%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/MA/38660/5116	Landmine and explosive remnants of war (ERW) survey and clearance operations throughout South Sudan	UNMAS	1,045,000	2,090,000	1,664,945	425,055	80%	HIGH PRIORITY
SSD-11/MA/38661/5116	Mine risk education programme in South Sudan	UNMAS	506,000	506,000	555,000	(49,000)	110%	HIGH PRIORITY
SSD-11/MA/38665/5116	Victim assistance programme in South Sudan	UNMAS	740,000	330,000	422,535	(92,535)	128%	HIGH PRIORITY
SSD-11/MA/39737/5125	Land release and clearance in Equatoria and Jonglei regions	NPA	5,894,594	5,894,594	1,024,967	4,869,627	17%	MEDIUM PRIORITY
SSD-11/MA/42212/5746	Enhancing human security, peace and stability in the New South Sudan through humanitarian mine action activities	Mines Advisory Group	-	1,100,000	-	1,100,000	0%	HIGH PRIORITY
Sub total for MINE ACTION			13,426,072	15,161,072	3,867,447	11,293,625	26%	
MULTI-CLUSTER								
SSD-11/MS/39675/120	Operational Support to the return of people of concern to UNHCR (returnees and IDPs)	UNHCR	15,886,429	15,886,429	-	15,886,429	0%	HIGH PRIORITY
SSD-11/MS/39676/120	Protection of refugees and asylum-seekers in South Sudan	UNHCR	16,669,050	16,669,050	-	16,669,050	0%	HIGH PRIORITY
SSD-11/MS/42201/298	Transportation assistance for vulnerable and stranded returnees from Sudan to South Sudan	IOM	-	13,375,000	1,698,984	11,676,016	13%	HIGH PRIORITY
SSD-11/MS/42379/120	Return and early reintegration of IDPs and support to host communities in South Sudan	UNHCR	-	14,343,031	-	14,343,031	0%	HIGH PRIORITY
Sub total for MULTI-CLUSTER			32,555,479	60,273,510	1,698,984	58,574,526	3%	
NFI AND EMERGENCY SHELT	TER							
SSD-11/S-NF/39029/5146	Emergency NFI & ES assistance to vulnerable communities in, Unity, Upper Nile, Central Equatoria, and Warrap	CRS	196,057	127,703	-	127,703	0%	MEDIUM PRIORITY
SSD-11/S-NF/39031/5328	ACT Alliance sudan emergency preparedness and security appeal	Danchurchaid	19,230	125,000	-	125,000	0%	HIGH PRIORITY
SSD-11/S-NF/39166/298	Coordination of NFIs & ES in South Sudan	IOM	350,000	350,000	230,700	119,300	66%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/S-NF/39168/8058	Provision of NFIs assistance in Central Equatoria State.	IRW	69,820	185,120	-	185,120	0%	MEDIUM PRIORITY
SSD-11/S-NF/39169/8905	Distribution of NFIs to returnees, IDPs and other vulnerable groups affected by natural diseases in Mundri and Ibba Counties in Western Equatoria State.	LCEDA	58,650	58,650	-	58,650	0%	MEDIUM PRIORITY
SSD-11/S-NF/39171/5095	NFI emergency assistance to most vulnerable spontaneous and planned returnees, IDPs and host community members in Upper Nile and Central Equatoria states through the timely provision of NFI kits	MEDAIR	630,000	525,321	-	525,321	0%	HIGH PRIORITY
SSD-11/S-NF/39172/5527	Non-food items (NFIs) emergency preparedness and response Eastern Equatoria and Warrap State	NCA	155,500	155,500	-	155,500	0%	MEDIUM PRIORITY
SSD-11/S-NF/39173/8452	Provision of emergency shelter and NFIs to IDPs, returnees and vulnerable people in Akobo.	NHDF	90,000	90,000	-	90,000	0%	MEDIUM PRIORITY
SSD-11/S-NF/39175/6079	Emergency NFIs and shelter materials distribution in South Sudan	sc	683,924	683,924	350,000	333,924	51%	HIGH PRIORITY
SSD-11/S-NF/39176/120	Emergency shelter and NFIs support to returnees and IDPs	UNHCR	2,239,469	2,239,469	1,008,620	1,230,849	45%	MEDIUM PRIORITY
SSD-11/S-NF/39178/124	Emergency NFIs support to vulnerable displaced households (procurement, pre - positioning and distribution)	UNICEF	2,982,463	2,982,463	484,378	2,498,085	16%	MEDIUM PRIORITY
SSD-11/S-NF/39179/8435	World Vision South Sudan non-food items and emergency shelter distribution project	WVS	211,352	211,352	211,352	-	100%	HIGH PRIORITY
SSD-11/S-NF/39180/8435	Support to common pipeline project through distribution and warehousing of NFIs and emergency shelter	wvs	258,100	258,100	258,100	-	100%	HIGH PRIORITY
SSD-11/S-NF/39186/5120	Emergency provision of NFIs to disaster-affected population, IDPs, returnees and most vulnerable host community members in Lakes, Upper Nile and mobile distribution team for all other states	OXFAM GB	298,962	298,962	216,234	82,728	72%	MEDIUM PRIORITY
SSD-11/S-NF/42287/298	Emergency NFIs & ES to vulnerable populations in South Sudan	IOM	-	6,969,500	1,527,550	5,441,950	22%	HIGH PRIORITY
Sub total for NFI AND EMERG	total for NFI AND EMERGENCY SHELTER			15,261,064	4,286,934	10,974,130	28%	

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
NUTRITION		<u>'</u>						
SSD-11/H/38859/8435	Response to emergency nutrition needs for displaced and transitory food-insecure populations in Warrap State	WVS	1,860,696	1,860,696	814,180	1,046,516	44%	HIGH PRIORITY
SSD-11/H/38879/5926	Nutrition and capacity-building project in complex humanitarian emergency	World Relief	405,900	405,900	405,900	-	100%	HIGH PRIORITY
SSD-11/H/38885/6422	Nutritional assessment and support to children, and pregnant and lactating women	BRAC	693,240	693,240	248,062	445,178	36%	MEDIUM PRIORITY
SSD-11/H/38891/14005	Treatment of acute malnutrition in Warrap and Northern Bahr el Ghazal States	ACF - USA	2,518,615	2,518,615	1,980,000	538,615	79%	HIGH PRIORITY
SSD-11/H/38894/8918	Management of severe acute malnutrition for children under five in Pochalla county	CRADA	750,000	750,000	-	750,000	0%	MEDIUM PRIORITY
SSD-11/H/38899/6116	Nutrition programs in under-served parts of Bahr el Ghazal and Jonglei.	Samaritan's Purse	540,000	540,000	-	540,000	0%	HIGH PRIORITY
SSD-11/H/38905/13107	Mitigating malnutrition in Akobo County	IMC UK	594,083	594,083	594,083	-	100%	HIGH PRIORITY
SSD-11/H/38910/5157	Provision of integrated lifesaving nutrition services	TEARFUND	269,943	269,943	-	269,943	0%	HIGH PRIORITY
SSD-11/H/38912/6041	Unity State nutritional support project (USNSP)	Care Sudan	480,831	480,831	201,933	278,898	42%	HIGH PRIORITY
SSD-11/H/38915/5146	Strengthening provision of nutrition services in Bor and Duk Counties	CRS	193,281	193,281	-	193,281	0%	MEDIUM PRIORITY
SSD-11/H/38917/7607	Addressing emergency nutrition needs of vulnerable groups through community based structures	Malaria Consortium	1,305,400	1,305,400	522,160	783,240	40%	MEDIUM PRIORITY
SSD-11/H/38920/5095	Integrated provision of nutrition services through PHC in Upper Nile and response to nutrition emergencies in South Sudan	MEDAIR	767,052	736,010	330,135	405,875	45%	HIGH PRIORITY
SSD-11/H/38924/5195	Provision and expansion of nutrition services in selected Counties of Eastern Equatoria and Jonglei states	MERLIN	820,618	820,618	512,531	308,087	62%	HIGH PRIORITY
SSD-11/H/38992/8452	Improving the status of nutrition in the community living in pigi county	NHDF	200,000	200,000	-	200,000	0%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/H/38993/6079	Extending emergency nutrition assessment and response capacity in areas of emergency need	SC	1,200,000	1,200,000	2,555,556	(1,355,556)	213%	MEDIUM PRIORITY
SSD-11/H/38994/13035	Improving provision of Nutrition services through health facilities and community centres in Guit County (Unity State), Gogrial East (Warrap State), and Panyikwara Payam (Magwi County-Eastern Equatoria State	THESO	459,830	459,830	-	459,830	0%	MEDIUM PRIORITY
SSD-11/H/38995/5572	Support basic nutrition services in South Sudan	COSV	315,000	358,000	-	358,000	0%	MEDIUM PRIORITY
SSD-11/H/38996/124	Support to the nutrition pipeline for emergency therapeutic responses in South Sudan	UNICEF	9,111,115	9,111,115	500,000	8,611,115	5%	HIGH PRIORITY
SSD-11/H/39158/124	Expanding partnership for addressing emergency nutrition needs in underserved states in South Sudan	UNICEF	2,357,200	2,357,200	1,000,000	1,357,200	42%	HIGH PRIORITY
SSD-11/H/42154/14572	Capacity-building on nutrition practices and improvement on health status of children under five years and mothers	UNKEA	-	190,968	-	190,968	0%	MEDIUM PRIORITY
SSD-11/H/42159/8498	Improved access to comprehensive health and nutrition services for the malnourished children and women in Aweil West and North Counties of Northern Bahr El Ghazal State	CW	-	477,000	-	477,000	0%	HIGH PRIORITY
SSD-11/H/42167/561	Prevention and treatment of acute malnutrition in South Sudan	WFP	-	8,943,962	7,451,096	1,492,866	83%	HIGH PRIORITY
Sub total for NUTRITION			24,842,804	34,466,692	17,115,636	17,351,056	50%	
PROTECTION								
SSD-11/P-HR-RL/38677/5586	Strengthening community protection mechanisms for women and girls affected by GBV in South Sudan	ARC	535,947	535,947	535,947	-	100%	HIGH PRIORITY
SSD-11/P-HR-RL/38682/5182	Armed violence reduction	DDG	1,000,000	1,000,000	-	1,000,000	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/38697/1171	Mitigate life threatening consequences through improved access to basic services for survivors of Gender-Based Violence	UNFPA	1,257,897	1,257,897	-	1,257,897	0%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/P-HR-RL/38702/5660	Strengthening protection to the extreme vulnerable individuals in Western Equatoria and Jonglei State	INTERSOS	350,000	1,000,000	-	1,000,000	0%	HIGH PRIORITY
SSD-11/P-HR-RL/38707/1171	Harmonize GBV data collection and multi-sectoral referral pathway for survivors	UNFPA	474,534	474,534	-	474,534	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/38717/8435	Rajaf community-based protection and advocacy project	wvs	350,000	350,000	-	350,000	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/38719/5179	Strengthening systems to address GBV in emergencies	IRC	654,238	636,680	-	636,680	0%	HIGH PRIORITY
SSD-11/P-HR-RL/38722/5179	Emergency protection monitoring and training for durable solutions	IRC	2,126,604	1,227,495	390,205	837,290	32%	HIGH PRIORITY
SSD-11/P-HR-RL/38728/14011	Promote sustainable mechanism for community based protection network (PROSMEC)	GADGET - Pentagon	390,000	390,000	-	390,000	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/38737/5834	Information, counselling and legal assistance to returnees, IDPs and conflict-affected host communities in South Sudan	NRC	3,200,873	3,200,873	300,000	2,900,873	9%	HIGH PRIORITY
SSD-11/P-HR-RL/38748/8435	Unity State returnee reintegration and protection project	wvs	305,000	305,000	-	305,000	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/38753/8005	Mobile Interactive News Alerts (MINA)	IN	1,412,013	1,412,013	-	1,412,013	0%	HIGH PRIORITY
SSD-11/P-HR-RL/38758/8005	Radio for Peace and Reconcilliation	IN	2,887,979	2,887,979	-	2,887,979	0%	HIGH PRIORITY
SSD-11/P-HR-RL/38813/7330	Legal intervention to reduce land disputes in Eastern Equatoria State	SSLS	471,100	471,100	-	471,100	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/38909/6079	To ensure greater protection and response for children affected by violence and/ or conflict and natural disaster emergencies	SC	852,000	1,278,000	596,912	681,088	47%	HIGH PRIORITY
SSD-11/P-HR-RL/38919/124	Protection of children affected by armed conflict and other emergencies	UNICEF	4,653,874	6,861,999	4,043,717	2,818,282	59%	HIGH PRIORITY
SSD-11/P-HR-RL/39566/298	Return and reintegration protection monitoring	IOM	1,375,000	1,375,000	810,008	564,992	59%	HIGH PRIORITY
SSD-11/P-HR-RL/39567/298	Tracking of returnees and the newly displaced in Sudan	IOM	1,550,000	2,500,000	801,220	1,698,780	32%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/P-HR-RL/39569/120	Protection and mixed solutions for IDPs in South Sudan	UNHCR	21,777,092	21,777,092	200,000	21,577,092	1%	HIGH PRIORITY
SSD-11/P-HR-RL/41998/1171	Ensure rapid response to gender-based violence in humanitarian crisis	UNFPA	-	957,074	-	957,074	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42000/5586	Strengthening community protection mechanisms for women and girls affected by GBV in South Sudan	ARC	-	500,091	-	500,091	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42002/5146	Emergency church engagement in Greater Upper Nile	CRS	-	450,245	-	450,245	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42003/8435	Warrap family tracing and reunification project	wvs	-	489,000	-	489,000	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42016/8915	Protection against sexual eploitation and abuse and education for children without appropriate care	ссос	-	269,000	-	269,000	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/42017/13025	Prevention and response to GBV in war-affected communities of Western Equatoria State	СММВ	-	239,183	-	239,183	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42018/5660	GBV prevention, monitoring and response in remote areas of WES	INTERSOS	-	350,000	-	350,000	0%	MEDIUM PRIORITY
SSD-11/P-HR-RL/42019/8452	Responding to GBV in Jonglei and Upper Nile	NHDF	-	175,000	-	175,000	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42021/14100	Mitigating the impact of recent inter-communal violence across the Lakes State/Western Equatoria Border and reducing the possibility of its recurrence	NPP	-	319,825	-	319,825	0%	HIGH PRIORITY
SSD-11/P-HR-RL/42022/8435	Sobat child and youth reintegration and protection project	WVS	-	248,210	-	248,210	0%	MEDIUM PRIORITY
Sub total for PROTECTION			45,624,151	52,939,237	7,678,009	45,261,228	15%	
WATER, SANITATION AND HY	GIENE							
SSD-11/WS/38649/14573	Increasing access to clean water through bio-sand filtration in jonglei	ASMP	880,000	880,000	-	880,000	0%	MEDIUM PRIORITY
SSD-11/WS/38654/13021	Provision of improved sanitation, hygiene and washing promotion in Aweil Centre County (Aroyo) NBeGS	AWODA	300,000	300,000	276,000	24,000	92%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/WS/38658/8477	Improving water, sanitation services and increasing hygiene awareness among the targeted conflict affected populations in Western Equatoria State	CAFOD	333,146	333,146	427,350	(94,204)	128%	HIGH PRIORITY
SSD-11/WS/38732/14005	Addressing chronic and acute water and sanitation needs of the population for prevention of malnutrtion in South Sudan	ACF - USA	1,990,729	1,990,729	460,000	1,530,729	23%	HIGH PRIORITY
SSD-11/WS/38741/5586	Enhancing access to safe water and improved sanitation and hygiene practices in Magwi, Kapoeta South and Kapoeta East Counties in South Sudan	ARC	1,471,212	1,471,212	1,471,212	-	100%	HIGH PRIORITY
SSD-11/WS/38751/6041	Support of community efforts in the rehabilitation of rural water points	Care Sudan	669,665	669,665	-	669,665	0%	HIGH PRIORITY
SSD-11/WS/38752/8769	Water supply, hygiene and sanitation in Eastern Equatoria	Caritas Switzerland	900,000	900,000	-	900,000	0%	HIGH PRIORITY
SSD-11/WS/38756/5128	Provision of safe water and sanitation to Warrap State	CESVI	975,000	975,000	-	975,000	0%	HIGH PRIORITY
SSD-11/WS/38759/8918	Hygiene improvement programmes and support to the existing water facilities in Akobo west and Pochalla Counties	CRADA	550,000	550,000	-	550,000	0%	MEDIUM PRIORITY
SSD-11/WS/38766/5328	Improved access to safe water, sanitation and hygiene promotion in South Sudan	Danchurchaid	1,052,086	1,052,086	712,251	339,835	68%	MEDIUM PRIORITY
SSD-11/WS/38772/5181	Support to water and sanitation needs of Mundari People returning to Terekeka County, CEQ	DRC	384,580	384,580	-	384,580	0%	HIGH PRIORITY
SSD-11/WS/38781/5582	South Sudan humanitarian water intervention	IAS	4,185,000	4,185,000	123,300	4,061,700	3%	MEDIUM PRIORITY
SSD-11/WS/38790/7854	WASH - emergency response and early recovery in WBeG and Warrap	Intermon Oxfam	5,503,273	5,503,273	740,741	4,762,532	13%	HIGH PRIORITY
SSD-11/WS/38794/5660	WASH for LRA-affected IDPs in Western Equatoria State	INTERSOS	1,613,103	1,613,103	455,231	1,157,872	28%	MEDIUM PRIORITY
SSD-11/WS/38801/298	Provision of safe water to vulnerable people in areas affected by high levels of returns in South Sudan	IOM	1,655,000	1,655,000	-	1,655,000	0%	MEDIUM PRIORITY
SSD-11/WS/38807/298	Emergency provision of WASH supplies and services	IOM	3,782,000	3,782,000	1,770,153	2,011,847	47%	MEDIUM PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/WS/38811/8058	Provision of sustainable safe water and sanitaion services in Terekeka and Tonj North County-Warrap	IRW	789,450	380,000	-	380,000	0%	MEDIUM PRIORITY
SSD-11/WS/38815/5095	WASH provision in emergency and relief-South Sudan	MEDAIR	2,527,000	2,674,009	474,284	2,199,725	18%	MEDIUM PRIORITY
SSD-11/WS/38820/5527	Provision of water and sanitation services in Eastern Equatoria State	NCA	1,579,500	1,579,500	118,500	1,461,000	8%	MEDIUM PRIORITY
SSD-11/WS/38825/8452	Increased access to safe water, sanitation and hygiene facilities to the IDPS, returnees and vulnerable groups in Akobo and Pigi Counties	NHDF	285,000	285,000	-	285,000	0%	MEDIUM PRIORITY
SSD-11/WS/38836/6344	WASH emergency preparedness and response in Jonglei State	PAH	1,210,900	1,210,900	-	1,210,900	0%	HIGH PRIORITY
SSD-11/WS/38838/6344	Improvement of WASH in primary schools in Jonglei State.	PAH	401,640	401,640	-	401,640	0%	MEDIUM PRIORITY
SSD-11/WS/38841/13010	Improve acess to safe water, sanitation facilites and hygiene promotion	PCO	731,000	731,000	-	731,000	0%	HIGH PRIORITY
SSD-11/WS/38848/8081	Improvement of safe water provision in Jonglei state	PWJ	480,000	480,000	-	480,000	0%	MEDIUM PRIORITY
SSD-11/WS/38850/6971	Enhancing community access to durable services	RI	797,428	797,428	-	797,428	0%	MEDIUM PRIORITY
SSD-11/WS/38858/6116	WASH services in greater Bahr el Ghazal	Samaritan's Purse	1,269,150	1,269,150	1,888,648	(619,498)	149%	HIGH PRIORITY
SSD-11/WS/38863/5633	Water, sanitation and hygiene in Mayom County	Solidarités	480,000	480,000	441,600	38,400	92%	MEDIUM PRIORITY
SSD-11/WS/38866/5157	Basic water supply, sanitation and hygiene services	TEARFUND	3,233,590	3,233,590	1,319,136	1,914,454	41%	HIGH PRIORITY
SSD-11/WS/38868/120	Provide integrated WASH support for IDPs, returnees, and host communities	UNHCR	2,250,548	2,250,548	-	2,250,548	0%	HIGH PRIORITY
SSD-11/WS/38869/124	Improvement of health and dignity of vulnerable and emergency-affected communities through sustained and expanded access safe water supply, improved sanitation and hygiene practices	UNICEF	5,918,693	5,918,693	4,254,412	1,664,281	72%	HIGH PRIORITY

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/WS/38870/124	Strengthening cluster-wide emergency preparedness and capacity to respond to humanitarian situations and ensuring predictable leadership within the WASH sector	UNICEF	8,314,000	8,314,000	1,315,456	6,998,544	16%	HIGH PRIORITY
SSD-11/WS/38871/8435	Water and sanitation project for Fangak returnees	WVS	427,000	427,000	-	427,000	0%	MEDIUM PRIORITY
SSD-11/WS/38874/8435	Manyo County water and sanitation project	WVS	411,000	411,000	-	411,000	0%	MEDIUM PRIORITY
SSD-11/WS/38878/8435	Emergency water project for Tonj North and Tonj East Community	wvs	448,000	448,000	-	448,000	0%	MEDIUM PRIORITY
SSD-11/WS/38881/5150	Central Equatoria State humanitarian WASH project	ZOA Refugee Care	639,582	639,582	-	639,582	0%	MEDIUM PRIORITY
SSD-11/WS/39019/6458	Improved water and sanitation in rural communities of Jur River County, Western Bahr el Ghazal	ACTED	1,200,000	1,200,000	-	1,200,000	0%	MEDIUM PRIORITY
SSD-11/WS/39025/5146	Emergency WASH intervention in resettling/IDPs communities Jonglei Eastern and Central Equatoria	CRS	735,585	735,585	-	735,585	0%	HIGH PRIORITY
SSD-11/WS/39572/5120	Meeting basic needs: emergency water, sanitation and hygiene (WASH) response	OXFAM GB	4,697,492	4,697,492	2,907,715	1,789,777	62%	MEDIUM PRIORITY
SSD-11/WS/41923/5128	Provision of safe water and sanitation to returnees and IDPs in NBeG	CESVI	-	415,000	-	415,000	0%	MEDIUM PRIORITY
SSD-11/WS/41933/7981	improve access to safe drinking water and sanitation facilities for residents, returnees and IDPs in NBEG State	AMURT International	-	662,868	-	662,868	0%	MEDIUM PRIORITY
SSD-11/WS/42301/7790	Provision of essential WASH activities to communities in Abyei, Twic County and Baliet County	GOAL	-	391,029	-	391,029	0%	MEDIUM PRIORITY
SSD-11/WS/42302/6310	South Sudan WASH programmes	PSI	-	2,949,471	-	2,949,471	0%	MEDIUM PRIORITY
SSD-11/WS/42303/6536	Water for recovery and peace programme (WRAPP)	Pact Inc.	-	3,134,178	-	3,134,178	0%	MEDIUM PRIORITY
Sub total for WATER, SANI	TATION AND HYGIENE		65,071,352	72,361,457	19,155,989	53,205,468	26%	

Project code	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Priority
SSD-11/SNYS/38610/8487	South Sudan Emergency Response Fund - 2011 (projected needs \$2,500,000)	ERF (OCHA)	-	-	2,500,000	n/a	n/a	HIGH PRIORITY
SSD-11/SNYS/42726/R/120	Awaiting allocation to specific project/cluster	UNHCR	-	-	10,157,906	n/a	n/a	PRIORITY NOT SPECIFIED
Sub total for CLUSTER NOT YET SPECIFIED			-	-	12,657,906	n/a	n/a	

Grand Total	365,424,039	620,770,033	210,827,298	409,942,735	34%	
			1 '			

NOTE: "Funding" means Contributions + Commitments + Carry-over

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table V: Total funding to date per donor to projects listed in the appeal

Republic of South Sudan Work Plan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding	% of Grand Total	Uncommitted pledges	
	(\$)		(\$)	
United States	80,104,250	38%	-	
Other income	49,235,098	23%	-	
Carry-over (donors not specified)	22,029,127	10%	-	
Japan	19,496,171	9%	-	
Various (details not yet provided)	14,397,789	7%	-	
European Commission	11,927,863	6%	-	
Denmark	3,926,068	2%	-	
Sweden	2,142,900	1%	-	
Italy	1,676,744	1%	-	
Germany	1,341,990	1%	-	
France	1,200,543	1%	-	
Canada	1,019,368	0%	-	
New Zealand	786,100	0%	-	
Korea, Republic of	600,000	0%	-	
Spain	356,125	0%	-	
Switzerland	315,456	0%	-	
Norway	118,500	0%	-	
Estonia	118,206	0%	-	
Private (individuals & organisations)	35,000	0%	-	
Grand Total	210,827,298	100%	-	

NOTE: "Funding" means Contributions + Commitments + Carry-over

the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity. Contribution:

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be

contributed.

a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.) Pledge:

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table VI: Total humanitarian funding to date per donor (appeal plus other)

Republic of South Sudan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding**	% of Grand Total	Uncommitted pledges	
	(\$)		(\$)	
United States	111,000,055	36%	-	
European Commission	63,092,031	21%	-	
Other income	49,235,098	16%	-	
Carry-over (donors not specified)	22,029,127	7%	-	
Japan	19,496,171	6%	-	
Various (details not yet provided)	14,397,789	5%	-	
Switzerland	7,023,774	2%	-	
Germany	5,808,642	2%	-	
Denmark	3,926,068	1%	-	
Canada	2,548,420	1%	-	
Sweden	2,320,596	1%	-	
Italy	1,676,744	1%	-	
France	1,200,543	0%	-	
New Zealand	786,100	0%	-	
Ireland	641,025	0%	-	
Korea, Republic of	600,000	0%	-	
Spain	356,125	0%	-	
Norway	118,500	0%	-	
Estonia	118,206	0%	-	
Private (individuals & organisations)	35,000	0%	-	
Grand Total	306,410,014	100%	-	

NOTE: "Funding" means Contributions + Commitments + Carry-over

Contribution:

the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity. creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be Commitment:

a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these Pledge:

tables indicates the balance of original pledges not yet committed.)

Zeros in both the funding and uncommitted pledges columns indicate that no value has been reported for in-kind contributions.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Includes contributions to the Consolidated Appeal and additional contributions outside of the Consolidated Appeal Process (bilateral, Red Cross, etc.)

Table VII: Humanitarian funding to date per donor to projects not listed in the appeal

Other Humanitarian Funding to Republic of South Sudan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding	% of Grand Total	Uncommitted pledges	
	(\$)		(\$)	
European Commission	51,164,168	54%	-	
United States	30,895,805	32%	-	
Switzerland	6,708,318	7%	-	
Germany	4,466,652	5%	-	
Canada	1,529,052	2%	-	
Ireland	641,025	1%	-	
Sweden	177,696	0%	-	
Grand Total	95,582,716	100%	-	

NOTE: "Funding" means Contributions + Commitments + Carry-over

This table also includes funding to Appeal projects but in surplus to these projects' requirements as stated in the Appeal.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be

contributed.

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these

tables indicates the balance of original pledges not yet committed.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

Table VIII: Requirements and funding to date per gender marker score

Republic of South Sudan Work Plan 2011 as of 30 June 2011 http://fts.unocha.org

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Gender marker	Original requirements	Revised requirements	Funding	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D=B-C	E=C/B	(\$) F
0-No signs that gender issues were considered in project design	41,743,619	74,754,811	42,691,494	32,063,317	57%	-
1-The project is designed to contribute in some limited way to gender equality	187,607,479	352,203,990	135,311,447	216,892,543	38%	-
2a-The project is designed to contribute significantly to gender equality	130,025,891	183,714,392	31,112,062	152,602,330	17%	-
2b-The principal purpose of the project is to advance gender equality	6,047,050	10,096,840	1,712,295	8,384,545	17%	-
Grand Total	365,424,039	620,770,033	210,827,298	409,942,735	34%	-

NOTE: "Funding" means Contributions + Commitments + Carry-over

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be

contributed.

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these

tables indicates the balance of original pledges not yet committed.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 30 June 2011. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (fts.unocha.org).

ANNEX II: ACRONYMS AND ABBREVIATIONS

ACF Action Contre la Faim

ACROSS Association of Christian Resource Organizations Serving Sudan

ACT Alliance Action by Churches Together

ACTED Agency for Technical Cooperation and Development

ADRA Adventist Development and Relief Agency
AED Academy for Educational Development
AMURT International Ananda Marga Universal Relief Team
ANLA Annual Needs and Livelihoods Assessment

ARC American Refugee Committee
ASMP Alaska Sudan Medical Project

AVSI Associazione Volontari per il Servizio Internazionale

AWD acute watery diarrhoea

AWODA Aweil Window of Opportunities and Development Agency

BMDP Bangladeshi Military Demining Platoon

BoSS Bank of South Sudan

BPHS Basic Package of Health Services

BRAC Bangladesh Rural Advancement Committee

CAFOD Catholic Agency for Overseas Development

CAP consolidated appeal or consolidated appeal process

CAR Central African Republic

CARE Cooperative for Assistance and Relief Everywhere

CBHC community-based health care
CCM Comitato Collaborazione Medica
CCOC Confident Children out of Conflict

CCS Coordination and Common Services cluster

CDoT Catholic Diocese of Torit

CERF Central Emergency Response Fund

CES Central Equatoria State

CESVI Volontariato Internazionale per lo Sviluppo

CFR case fatality rate

CFSAM Crop and Food Security Assessment Mission

CHF Common Humanitarian Fund

Chr. Aid Christian Aid

CIDA Canadian International Development Agency

CMA Christian Mission Aid

CMDP Cambodian Military Demining Platoon CMMB Catholic Medical Mission Board

CMR crude mortality rate
COSV Cooperazione Sviluppo

CPA Comprehensive Peace Agreement

CRADA Christian Recovery and Development Agency

CRS Catholic Relief Services

CSSSA Comprehensive Seed Systems Security Assessment

CTS Common Transport Services

CWEP Christian Women Empowerment Program

DAs dangerous areas DCA DanChurch Aid

DDG Danish Demining Group DRC Danish Refugee Council

DRC Democratic Republic of the Congo

EC/JRC Executive Committee/Joint Research Centre

ECR Enhancing Community Resilience via Improved Food Security
ECS Episcopal Church of Sudan (part of the Anglican Communion)

EDC-SSIRI Education Development Centre – South Sudan Interactive Radio Instruction

EFSA Emergency Food Security Assessment
EMIS Educational Management Information System
EmNOC emergency neonatal and obstetric care

EMOP emergency operation

EOD explosive ordnance disposal
EPC Evangelical Presbyterian Church
EPI expanded programme on immunization

ERF Emergency Response Fund ERW explosive remnants of war

ESAD Equatoria State Association of Disabled EWARN Early Warning and Response Network

FAO Food and Agriculture Organization of the United Nations

FSD Swiss Foundation for Mine Action FSL food security and livelihoods

FAWE Forum for African Women Educationalists

GAM global acute malnutrition GBV gender-based violence

GIZ Deutsche Gesellschaft für Internationale Zusammenarbeit

GoS Government of Sudan
GoSS Government of South Sudan

HC Humanitarian Coordinator
HCF Humanitarian Coordination Forum
HCT Humanitarian Country Team

HealthNet TPO HealthNet International Transcultural Psycho-social Organization

HI Handicap International

HIV/AIDS human immuno-deficiency syndrome / acquired immuno-deficiency syndrome

IAS International Aid Services

IASC Inter-Agency Standing Committee

IBIS Education for Development (Danish member-based development organisation)

IDP/s internally displaced person/people

IEC information, education and communication

IMA Interchurch Medical Assistance

IMC-UKInternational Medical Corps, United KingdomInterSOSOrganizzazione Umanitaria per l'EmergenzaIOMInternational Organization for MigrationIRCInternational Rescue CommitteeIRDInternational Relief and Development

IRW Islamic Relief Worldwide ISWG Inter-sector Working Group

JDB Joint Defense Board JIU Joint Integrated Units

KBS knowledge-based survey KCS Kimu Charitable Society

LCA logistics capacity assessment

LCEDA Loudon County Economic Development Agency

LHDS Liech Holistic Development Service

LRA Lord's Resistance Army

MAG Mines Advisory Group
MAM moderate acute malnutrition

MCDI Medical Care Development International

MDM-F Médecins du Monde-France

MERLIN Medical Emergency Relief International MGH Massachusetts General Hospital MINA Mobile Interactive News Alerts MISP minimum initial service package MoAF Ministry of Agriculture and Forestry

MoH Ministry of Health

MoHADM Ministry of Humanitarian Affairs and Disaster Management

MoSW Ministry of Social Welfare
MRE mine risk education
MSI Marie Stopes International
MTI Mine Tech International
MTT multi-tasking team

MWRI Ministry of Water Resources and Irrigation

MYR Mid-Year Review

NAD Nile Assistance for the Disabled

NAPO National Authorities for Prosthesis and Orthotics

NBHS National Baseline Household Survey

NCA Norwegian Church Aid Netherlands RC Netherlands Red Cross

NFI non-food item

NFI&ES non-food item and emergency shelter NGO non-governmental organization NHDF Nile Hope Development Forum

NNGO national non-governmental organization

NPA Norwegian People's Aid NPP Non-Violent Peaceforce NRC Norwegian Refugee Council

OCHA Office for the Coordination of Humanitarian Affairs

OSIL Operation Save Innocent Lives

OVCI Organismo Di Volontariato Per La Cooperazione Internazionale

PCO Peace Corps Organization

PCPM Polish Centre for International Aid
PEP post-exposure prophylaxis
PHA Polish Humanitarian Action
PHC primary health care

PHCC primary health care centre

PROSMEC Promote Sustainable Mechanism for Community-Based Protection Network

PSI Population Services International PTA parents-teachers association

PWJ Peace Winds Japan

RCSO Resident Coordinator's Support Office

RFDCC Rapid Farmers Development Centre Cooperative

RH reproductive health
RI Relief International
RMG rebel militia group

RONCO RONCO Consulting Corporation
RoSS Republic of South Sudan

RUF ready-to-use food

SAF Sudanese Armed Forces
SAM severe acute malnutrition
SBHC school-based health clinics

SC Save the Children

SCBRS Sudan Catholic Bishops' Regional Secretariat

SCiSS Save the Children in South Sudan

SDG Sudanese pound

SEM Sudan Evangelical Mission

SFPs supplementary feeding programmes
SHAP State Humanitarian Action Planning Process
SIMAS Sudan Integrated Mine Action Service
SNV The Netherlands Development Organization

SP Samaritan's Purse

SPLA Sudan People's Liberation Army

SSCCSE South Sudan Centre for Census, Statistics and Evaluation

SSDA South Sudan Demining Authority SSDP South Sudan Development Plan

SMART Standardized monitoring and assessment of relief and transition (methodology)

SSDP South Sudan Development Plan SSHHS South Sudan Household Health Survey

SSRRC South Sudan Relief and Rehabilitation Commission

SSUDA South Sudan United Democratic Alliance
SUDRA The Sudanese Relief and Development Agency
SSWICH South Sudan Water Information Clearing House

UNDSS United Nations Department of Safety and Security

UNESCO United Nations Educational, Scientific and Cultural Organization

UNFPA United Nations Population Fund

UNHAS United Nations Humanitarian Air Service

UNHCR United Nations Office of the High Commissioner for Refugees

UNICEF United Nations Children's Fund

UNIDO United Nile Initiative and Development Organisation UNKEA Upper Nile Kala-azar Eradication Association

UNMAO United Nations Mine Action Office
UNMAS United Nations Mine Action Service
UNMIS United Nations Mission in Sudan

UNOPS United Nations Operation for Project Services

USAID United States Agency for International Development

Unity State Nutritional Support Project **USNSP**

VAvictim assistance

VSF Vétérinaires sans frontières

water, sanitation and hygiene Western Equatoria State WASH WES World Food Programme
World Health Organization
Water for Recovery and Peace Programme WFP WHO

WRAPP

WVI World Vision International WVS Worldwide Veterinary Service

ZOA ZOA Refugee Care (NGO)

Consolidated Appeal Process (CAP)

The CAP is a tool for aid organizations to jointly plan, coordinate, implement and monitor their response to disasters and emergencies, and to appeal for funds together instead of competitively.

It is the forum for developing a strategic approach to humanitarian action, focusing on close cooperation between host governments, donors, non-governmental organizations (NGOs), the International Red Cross and Red Crescent Movement, International Organization for Migration (IOM) and, United Nations agencies. As such, it presents a snapshot of the situation and response plans, and is an inclusive and coordinated programme cycle of:

- strategic planning leading to a Common Humanitarian Action Plan (CHAP)
- resource mobilization leading to a Consolidated Appeal or a Flash Appeal
- coordinated programme implementation
- joint monitoring and evaluation
- revision, if necessary
- reporting on results

The CHAP is the core of the CAP – a strategic plan for humanitarian response in a given country or region, including the following elements:

- A common analysis of the context in which humanitarian action takes place
- An assessment of needs
- Best, worst, and most likely scenarios
- A clear statement of longer-term objectives and goals
- Prioritized response plans, including a detailed mapping of projects to cover all needs
- A framework for monitoring the strategy and revising it if necessary

The CHAP is the core of a Consolidated Appeal or, when crises break out or natural disasters strike, a Flash Appeal. Under the leadership of the Humanitarian Coordinator, and in consultation with host Governments and donors, the CHAP is developed at the field level by the Humanitarian Country Team. This team includes IASC members and standing invitees (UN agencies, the International Organization for Migration, the International Red Cross and Red Crescent Movement, and NGOs that belong to ICVA, Interaction, or SCHR), but non-IASC members, such as national NGOs, can also be included.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal document. The document is launched globally near the end of each year to enhance advocacy and resource mobilization. An update, known as the Mid-Year Review, is presented to donors the following July.

Donors generally fund appealing agencies directly in response to project proposals listed in appeals. The **Financial Tracking Service (FTS)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of appeal funding needs and worldwide donor contributions, and can be found on https://fts.unocha.org.

In sum, the CAP is how aid agencies join forces to provide people in need the best available protection and assistance, on time.

OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS (OCHA)

UNITED NATIONS
NEW YORK, NY 10017
USA

PALAIS DES NATIONS 1211 GENEVA 10 SWITZERLAND