

SOUTH 20 SUDAN 20 ANNUAL 15 REPORT 15



A Promise Renewed

WHO WE ARE

World Vision is a Christian humanitarian organization dedicated to working with children, families and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. We serve close to hundred million people in nearly hundred countries around the world. Motivated by our faith in Jesus Christ, we serve alongside the poor and oppressed as a demonstration of God's unconditional love for all regardless of religion, race, ethnicity or gender.



OUR VISION

Our vision for every child, life in all its fullness;

Our prayer for every heart, the will to make it so.

OUR MISSION

World Vision is an international partnership of Christians whose mission is to follow our Lord and Savior Jesus Christ in working with the poor and oppressed to promote humanitarian transformation, seek justice and bear witness to the good news of the Kingdom of God.

OUR CORE VALUES

We are christian

We are commited to the poor

We are responsive

We value people

We are partners

We are stewards

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NATIONAL DIRECTOR'S MESSAGE



2015 was a big year for South Sudan, one of continued loss and mourning but also of resilience and hope.

A resurgence of violence in Upper Nile in early 2015 and insecurity in Jonglei and Unity had devastating consequences, killing and injuring civilians and causing many more to flee their homes. The violence has also affected access to essential food and water, and to services like health and education.

Within this context, World Vision's humanitarian work has grown, reaching over 700,000

displaced people with critical emergency relief.

Continued support from our partners, donors and World Vision Support Offices around the globe has allowed us to continue serving vulnerable children and their families, addressing their basic needs and providing psychosocial support and education in an emergency context.

Alongside our emergency response, we have continued working with communities in more stable areas to realise longer-term-development gains. More than 50,000 households have been equipped with the training and resources they need to effectively grow crops, farm fish, or rear cattle. This work not only helps the farmers involved to feed their families, but also contributes to desperately needed food production in the country.

Above all else, the events of 2015 gave us reason for hope. The peace agreement, signed in August, quelled the violence that had been raging in Upper Nile and established a way forward for this young Nation. As the parties work through the peace plan and come together as a unified government, we ask that you keep South Sudan in your hearts and in your prayers. Our prayer is not just for peace, but for a South Sudan that lives up to the hope and promise of 2011's Independence Day.

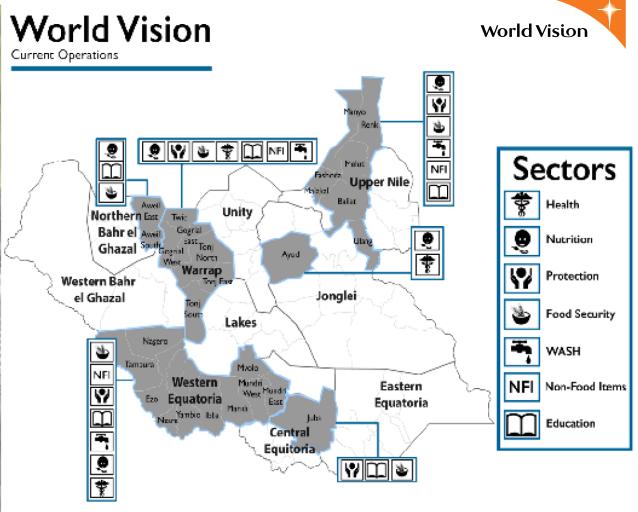
Thank you for your ongoing support as we look forward to 2016, where World Vision will work alongside the Government and people of South Sudan, as it works to leave conflict behind and build a country where all citizens can prosper and all children can flourish.

- Perry Mansfield, National Director South Sudan



Updated Cor. 13, 2015





WATER, SANITATION AND HYGIENE (WASH)

Protracted conflict in South Sudan during the last two years disrupted an already weak WASH service delivery system in Upper Nile State, one of the three states most affected by conflict. Multiple displacements of population and relocation of humanitarian agencies due to insecurity resulted in disrupted WASH services to an already vulnerable population. WASH situation in other areas that are relatively safe is better but not near perfect. WorldVision, is at the forefront in assisting conflict affected and vulnerable communities in our areas of operation, access to safe water and sanitation in addition to ensuring this is complemented with improved hygiene.

During 2015, World Vision WASH program reached 62,300 people of which 45,550 were in camps for (IDPs) Internally Displaced Persons in the conflict affected areas of South Sudan.

Access to safe water sources for drinking and domestic use: In 2015 WV interventions enabled 34,700 people to access safe water sources. This was through installation of 21 new water boreholes, rehabilitation of 12 boreholes, installation of two solar powered piped water schemes, installation of four emergency surface water treatment plants, and construction of Water 40,000cm³ for livestock support to community water supplies which otherwise had shut down due to curtailment of market routes for water treatment chemicals, livestock water pan.

Access to safe sanitation: Through interventions in Sanitation 18,320 persons had access to a toilet facility. This was through community interventions that enabled construction off our 158 latrines. In addition, through community sensitization, another 100 households constructed own latrines without subsidy from WV.



40,55 I benefited from WASH initiatives by World Vision during FY2015.

Improved hygiene practices:

World Vision complemented safe water and sanitation initiatives with hygiene promotion and awareness that benefited over 35,000 people. This was through hygiene campaigns and awareness, provision of WASH supplies and kits to targeted IDPs and vulnerable host population. During 2015, 25,700 people benefited from hygiene awareness.

"In a week i sell vegetables of about 16.3277USD,"

By Johnson Kwangware: WASH Project Officer

Dau Monyjock is a 26-year-old IDP staying in Dengtoma II in Melut. He is married and has one child. He came to Melut in 2014 fleeing the violence in his home town of Akoka in Baliet County. He said during the interview "One day in the month of May 2014 as I watched women and children fetching water from the tap stands Dengtoma, I noticed a lot of water going to waste from the trough. I said to myself this is an opportunity no one has taken note of. I saw an opportunity to plant vegetables for my family and sell some the community to sustain my family needs. The following day armed with a hoe and panga I cleared the area around the water point, dug the area and made furrows. Since then I grow maize, kudhura, hot pepper, okra and molinga trees in this garden irrigating the crops with excess water from the tap stands," said Dau. The produce from the garden is used for family consumption and sometimes he sells the tree seedlings at 10 pound each."In a week I sell vegetables of about 100 SSP,"(16.3385 USD) said Dau. In 2015 he sold seven trees for a total of 11.3952 USD. He uses the money to buy groceries for his family.

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HEALTH AND NUTRITION

Health Sector

Discrepancies in the level of service delivery have persisted between the conflict affected and more stable states while cholera outbreak placed more demand on humanitarian resources in 2015. Access to health care in the country has consequently remained as low as 44% while utilization rate is 0.6 (Humanitarian Response Plan [HRP] 2015). Primary healthcare services such as vaccination campaigns and cold chain capacity as well as secondary health services especially surgical, reproductive and mental health care remain in short supply especially in the conflict-affected areas (WHO July 2015). According to the Crisis Response Plan (CRP) 2015, there is only 10% of institutional deliveries with one obstetrician serving 200,000 individuals in the country. The rest of the deliveries are conducted in the villages by Traditional Birth Attendants and Spear Masters under some of the most unhygienic conditions possible. This has resulted in

multiple complications quite often leading to maternal or neonatal death or both.

In 2015 World Vision delivered primary health care through 110 health facilities including 87 Primary Health Care units, 22 primary health care centres and one Hospital in Warrap and Western Equatoria, having expanded to 14 new facilities in Gogrial East County. Safe motherhood services were brought even closer to women through training of 357 Home Health promoters, while four motor ambulances were provided to create a 24-

hour referral system. In 2015 emphasis was placed on quality of care through building capacity of 192 South Sudanese health care providers including midwives in Basic and Comprehensive Emergency Obstetric And New Born Care B/CEMONC in both Warrap and West Equatoria. WV registered a reduction in post-partum haemorrhage by using community volunteers to administer misoprostol to women after delivery at household level while increasing availability of oxytocin and essential supplies at facility level. Moreover introduction of District

Health Information System (DHIS) resulted in accessibility of quality data at County, State, and National Levels. Kuajok Hospital now conducts maternal death audits and causes of death can be used to inform training needs. Despite the declaration of a malaria outbreak in Warrap state, DHIS data showed substantial reduction in malaria case fatality in Warrap due to constant supply of antimalarial and other essential medicines. None of the health facilities reported stock out for a period exceeding three days.

Nutrition Sector

The WV Response interventions were supported by ECHO (\$562,500), IRISH AID (\$167,474) & DFATD (\$500,829) with a total budget of USD \$1,230,803 was committed during the period under review.



Nutrition continues to be an important area of work, both through regular programmes and particularly through humanitarian action. The WV Response implemented nutrition interventions in three states that were mostly affected by the crisis that erupted in South Sudan in 2013. The response reached a total of 112,842 (54,462 Male and 58,380 Female) children under five and 31,742 pregnant and lactating women with lifesaving nutrition interventions in the three states: Upper Nile, Jonglei and Unity. To ensure that every child has access to life-saving interventions, the response utilized both preventive and treatment strategies in addition to capacity development for the Ministry of Health (MoH). Lifesaving interventions were implemented despite the fact that the crisis escalated. The crisis exposed the most vulnerable population

(women and children under five) to an increased risk of malnutrition. The influx of people to the (POC) Protection Of Civilians showed the challenges that people faced - they risked their lives in search of food. The core nutrition programmes implemented in the response programme included promotion, protection and support of optimal Infant and young child feeding practices, community-based prevention and management of severe acute malnutrition and delivery of micronutrient supplements. The response ensured protection of the nutritional status of children in humanitarian situations through provision of supplementary food for all children under five through the Blanket Supplementary Feeding Programme. Besides the three response intervention States of Upper Nile, Jonglei and Unity, World Vision also has nutrition programs in Warrap and Northern Bahr el Ghazal



Children enjoy a nutritious meal at St. Joseph School in Kuajok, one of many World Vision "Food for Education" programs in Warrap State, South Sudan.



FOOD SECURITY AND LIVELIHOODS

Food Security

South Sudan in 2015 continued to experience significant food production and access challenges. According to the recent integrated food security phase classification report (IPC), released in September 2015, an estimated 3.9 million people are either in crisis or emergency, an equivalent of 34% of the population being classified as severely food and nutrition insecure. The main causes of food insecurity include the long-term effects of the conflict coupled with high food prices, erratic rainfall patterns, depleted livelihood options and limited humanitarian access. The areas majorly affected are Upper Nile, Jonglei and Unity States.

Conflict continues to adversely impact livelihoods. People have been displaced leading to small areas being cultivated, loss of livestock through looting or livestock diseases and limited economic opportunities. The Greater Upper Nile also has high numbers of internally

displaced people (IDPs) which increases pressure, burden and vulnerabilities of the host community, women, children, disabled and child-headed households. The South Sudan Humanitarian bulletin by OCHA (December 1, 2015) gives the number of IDPs as 1.66 million.

Achievements:

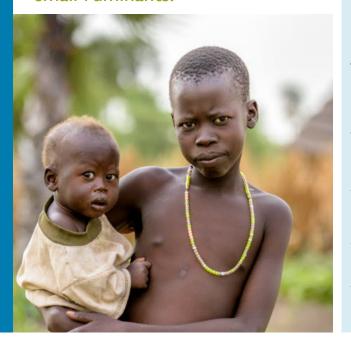
- 51,410 reached through FSL interventions
- 268 MT assorted crop and vegetable seeds distributed
- 8,987 people trained
- 2.58.620 Livestock vaccinated
- 57.927 Livestock treated
- 51,410 households were supplied with training, seeds, tools, fishing kits, animal health services and restocking with small ruminants.

Livelihoods

In 2015. World Vision South Sudan supported a total of 51,410 people with livelihood activities: 27433 men and 23.977 women with the provision of training on various agricultural methods, seeds, tools, livestock vaccination and treatment. Assorted seeds such as groundnuts, sorghum, sesame, okra, onions, tomatoes, and watermelon were distributed totalling 268 metric tonnes. This was made possible by the partnership between UN FAO and World Vision to increase food production among the vulnerable and conflict affected persons.

World Vision is also an active member of the Food Security and Livelihood (FSL) Cluster and the associated technical working groups to enhance partnership and information sharing.

51,410 households were supplied with training, seeds, tools, fishing kits, animal health services and restocking with small ruminants.



Milk provides calories and also contains essential vitamins such as vitamin B2 and vitamin BI2.

Food is fundamental to child survival and development. When nutrient-rich food is consistently available, children have a good chance of not only surviving, but also developing and thriving. According the Food & Agricultural Organisation (FAO), cattle are the main source of nutrition for children, adolescents and mothers of herding groups. This means that for pastoralists like the Falata, the best way to keep children well fed is to keep their livestock healthy.

Yet this can be a challenge in hot, dry climates and even more so in areas prone to conflict where people are often on the

move. Diseases not only decrease the size of the herd, but animals that die cannot be eaten. During periods of drought, pastoralists will migrate to find pasture and this exposes the animals to disease when they encounter other herds. To combat this and prevent the spread of diseases, World Vision conducts widespread vaccination campaigns. Funded by the CHF and with vaccines from FAO, World Vision vaccinated 258.620 animals and treated another 57, 927.

"I like milk so much," says Issa. He and all the

other children in the camp drink it every day. Milk is a great source of protein and calcium, which young children need for their bodies to

Childhood Nutrition

grow and to build strong bones.

At 11 million heads, cattle outnumber people in South Sudan and are central to the country's economy and society. The FAO estimates that at least 80 percent of South Sudan's population relies on cattle to some degree making the vaccination campaigns all the more critical for the wellbeing of children across South Sudan.

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Most of the population of the Greater Upper Nile had to rely on humanitarian assistance. Food Assistance itself was affected by conflict through various ways: disruption of the logistic pipeline through the closure of the river as food could not be easily delivered except by air and airdrop both being quite expensive. Access to the IDPs outside the POC was greatly hindered, as staff could not cross frontline to reach those in need.

Some 5.8 million people were estimated to be in some degree of food insecurity as of September 2014. This number was projected to increase to 6.4 million during the first quarter of 2015, the food requirements for

Further, areas outside the POCs such as Wau Shiluk, Kodok, Bethiang, Baliet and Renk were also reached with Food Assistance. These were covered under the General Food Distribution, Blanket Supplementary Feeding and Cash Vouchers in the Juba POC.



A World Vision South Sudan Food Distribution Point in Upper Nile

139, 165 IDPs were reached in 2015 with a total of 11,747 metric tonnes and an equivalent of \$638,831USD in cash distributed.



CHILD PROTECTION AND EDUCATION IN EMERGENCIES

The Child Protection program in Upper Nile State, supported vulnerable children with psychosocial support service in two child friendly spaces in the Protection of Civilians site (PoC) sector two. This came as a result of \$80,000 USD funding received from the East African Region Office. This funding aimed at contributing to improved protection and access to basic quality education for children affected by the conflict in Malakal PoC, Wau Shilluk and Kodok.

We received \$23,607 USD supplementary funding from World Vision Korea for the construction of eight temporary learning spaces (TLS), two teachers' offices, and fabrication of 15 teachers' chairs and tables and 100 classroom benches for children to sit on while attending the lessons. This initiative

was in response to an urgent need after Malakal PoC had seen an influx of more 4,466 IDPs from April 1st- to April 19th. 2015. This number of IDPs included 2,855 children from the age 3-17 years old.

Achievements:

- The number of children from age 3-17 reached with psychosocial support services (PSS) in three Child Friendly Spaces (CFS) in Malakal PoC and one in Wau Shilluk are 8462 (4222 boys and 4240 girls). The number of children registered and attending the Education in Emergency (EiE) program in Malakal PoC are 664(332 boys and 332 girls)
- The number of community volunteers/ animators in Malakal PoC and Wau

Shilluk who actively facilitated children with PSS activities are 29 (23 female and 6 male)

- The number of community capacity building facilitators who facilitated learning programs to the children in TLS in Malakal PoC is I3, all male
- We constructed nine TLS in Malakal PoC, two teachers' offices, one store for keeping CFS and Education materials, and fabricated 100 benches for children, 15 teacher tables and 15 teacher chairs
- We formed ten Parents and Teachers
 Association (PTA) committee member
 (six female and four male) and trained
 them in school management and
 community mobilization skills the
 importance of education in emergencies
 and girl-child education

Education in Emergencies

World Vision is also implementing the Education is Emergencies program in Melut County. According to the South Sudan Education Cluster, there are over 1.7 million children and adolescents in dire need of emergency education support since the start of the conflict in December 2013. Many of those are still unable to access learning due to displacement, while others are out of school due to the impact of conflict on their communities or are living in host communities where education resources are non-existent or overstretched.

- 3470 enrolled for primary education
- (PI-P8) I,214 children aged 3-6 attended Early Childhood and Development D2
- 3,320 (2,806 IDPs and 514 host community children) received educational materials like exercise books, pen pencil, ruler
- 23 Temporary Classrooms and three teacher's office constructed in three IDP camps
- 61 volunteer teachers recruited and trained & on class management, code of conduct and teaching methods

- 32 Early Childhood Development (ECD)
 Facilitators recruited and attended three days training on the concept of ECD, teaching methods, child care and support and code of conduct
- 41 Parents and Teachers Association (PTA)
 members trained on their roles, community
 mobilization and the importance of girl's
 education



One of the schools being supported by World Vision. It got new classrooms, desks and scholastic materials under the Education in Emergencies Programme





Children living in crisis in South Sudan

the report "Fear & Want: Children Living in Crisis in South Sudan". The report highlighted children's opinions of the risks that daily life holds for them since they were displaced by the conflict. The report focused on the urgency of addressing child protection needs. Across locations and age groups children articulated the same priorities: For the conflict to end, to be able to return home, to be protected from harm, and to return to school. The report focused on the need for expanded psychosocial support, addressing child labour and access to safe and free education, and minimizing the risks of physical harm to children. The research for this report was conducted in October 2014 in Juba and Upper Nile State and reflects the views of 160 children. The report was released in Juba and in global capitals - New York, Brussels, Washington DC and others - on the oneyear anniversary of the conflict. The report resulted in increased attention by donors to the protection needs of children.

In December 2014, World Vision released



The evidence presented in the report also enabled World Vision to successfully engage the UN Security Council to make changes to the mandate of the UN Peacekeeping Mission in South Sudan (UNMISS). This included strengthening response to child protection needs and requesting public reporting of violations committed by parties to the conflict, as well as engaging youth and faith leaders in the peace process.

In June 2015, World Vision participated in the Geneva Donor Conference for South Sudan and released a policy brief highlighting the needs of children based on the evidence from the children's report, the need for longer-term resilience programming to address the protracted nature of the crisis, and called for an end to the conflict. World Vision used the policy brief to engage donors and urge funding for the South Sudan Humanitarian Response Plan, particularly in the areas of longer-term resilience programming and child protection.

In 2015 WorldVision implemented a number of accountability activities, based on the recommendations of a 2014 accountability review of programming. Humanitarian accountability workshops, including communities, beneficiaries, staff and partners were conducted in Malakal, Kodok, Melut and Juba to understand community-preferred systems for managing food assistance and to develop action plans to improve accountability and community engagement.

As a result of these action plans, improvements have been made to communications at distribution points, with a review of posters, pre-distribution scripts and staff checklists.

Additional accountability mechanisms were also established to improve two-way communication between staff and communities World Vision worked with the camp management committee to select and train community members to participate in these activities.

The first of these, Food Management Committees, served as community

representatives, providing feedback and identifying issues in programming activities, helping to mobilise and organise communities for the appropriate collection and sharing of food at the distribution point.

The second accountability mechanism, Community Help Desks, were established in Juba and Malakal to address the turn-around time of existing feedback procedures, which was identified as an issue in the accountability workshops. The Community Help Desks ensured that feedback and complaints were heard, documented, resolved and responded to by World Vision, or it's relevant partner organisation.

In 2015 World Vision also rolled out addition training on humanitarian accountability, protection principles and principles of effective partnership to staff and partners. Increased coordination between partners has also been fostered through the establishment of a food assistance-working group. Already this has enabled more effective communication with communities, through joint community



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HUMANITARIAN EMERGENCY RESPONSE



joining in the distribution of food in

Malakal.

The conflict that began in December 2013 in South Sudan continues to affect the lives of millions of people. It has been marked by deepening suffering across the country. Insecurity and hostilities constrain civilians' freedom of movement. The major humanitarian consequences are widespread displacement due to the violence; high rates of death, disease, and injuries, severe food insecurity and disrupted livelihoods, and a major malnutrition crisis.

The crisis disrupted an already weak service delivery system, particularly in Jonglei, Unity and Upper Nile states. Many of the 1,200 schools in longlei, Unity and Upper Nile are closed due to the conflict. Water supply in towns, including major hubs such as Bentiu and Malakal, is no longer functioning or accessible to civilians. An estimated 184 health facilities in the three conflict states have been either destroyed, are occupied, or are no longer functioning.

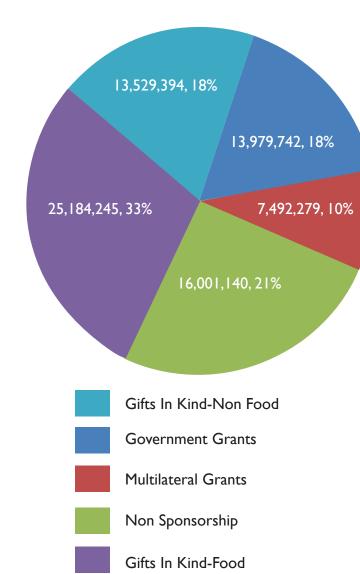
The general security situation within the response area, which covers Jonglei, Unity and Upper Nile, remained very fluid in the past year. An escalation of hostilities from April and through to September resulted in major fighting in the town of Malakal. A shift in allegiances also saw the conflict spreading to new areas, formerly unaffected by previous conflict, including Melut and Kodok, which had become havens for IDPs because of their relative peace. The attacks on Melut and Kodok forced World Vision and other agencies to relocate humanitarian staff for more than three months.

A peace deal, signed in late August 2015, led to a decrease in active conflict in Upper Nile, however other parts of the country, especially Unity State and the Greater Equatorial region, have seen an upsurge in

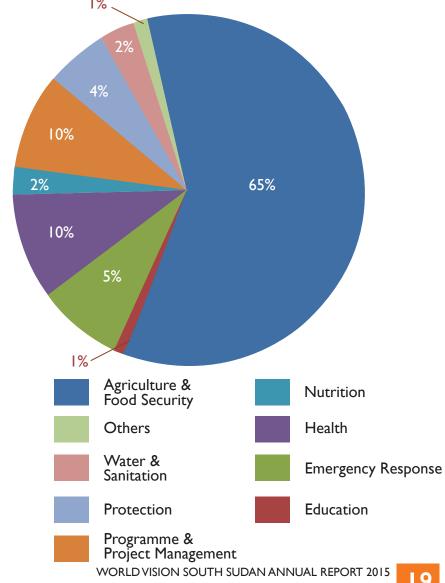
Response activities have continued despite these challenges. World Vision South Sudan has continued to receive support from ECHO, DFATD, Dutch Government, FAO, OFDA, WFP, UNICEF and World Vision Support Offices. Response operations cover WASH, Nutrition, Food Security and Livelihoods, Food Assistance, Protection, and Education in Emergencies. Highlights of the achievements have been indicated by each sector.

FINANCIAL OVERVIEW

Funding types



Sectors summary including Gifts In Kind





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