

Emergency appeal n° MDRSS001

GLIDE n° [OT-2012-00038-SSD](#)

Operation update n°1

18 June 2012

Period covered by this Operations Update: May – June 2012

This update covers the gap between the launch of the preliminary appeal and the full emergency appeal.

Appeal target (currently):
CHF 1,196,239

Appeal coverage: 87.6%
[< Click here to go directly to the updated donor response report, or here to link to contact details >](#)

Appeal history:

- The Emergency Appeal was launched on a preliminary basis on 11 May 2012 for CHF 1,197,839 for 12 months to assist 6,000 households.
- Disaster Relief Emergency Fund (DREF): CHF 250,000 was initially allocated from the IFRC's DREF to support the national society to respond.
- The [Sudan: Complex Emergency Appeal \(MDRSD011\)](#)¹ was launched on 1 July 2011 and will run until the end of 2012. It covered areas now part of South Sudan. Funding has been allocated and the new appeal will phase in, as the former finishes. The appeal activities do not overlap, with this new appeal is to support the new national society in formation in the South Sudan to respond specifically to the returnee influx that is accelerating.



Summary: Since the launch of the preliminary appeal on 11 May, a Regional Disaster Response Team (RDRT) was deployed to South Sudan, 28 May – 15 June, to assess the urgent needs of returnees, host communities and the capacity of the branches in four states to respond. Assessment findings are currently being compiled in preparation to launch the full Emergency Appeal around 3 July, 2012. South Sudan Red Cross volunteers have begun assisting returnees in various branches across the country. The Operations Manager has been recruited and is due to arrive in Juba on 21 June.

¹ http://www.ifrc.org/docs/Appeals/11/MDRSD011rea.pdf_3+0000000043110

The situation

The mass movement of returnees from Sudan to South Sudan started spontaneously after the January 2011 Referendum and the independence of the Republic of South Sudan on 9 July 2011.

A total of [387,511](#) people have crossed the border from the north to the south between October 2010 and May 2012, with another 100,000 expected in the near future. The highest returnee estimates stand at 500,000 returnees.

Returns are taking place both spontaneously and coordinated by the International Organization for Migration (IOM). The influx reached its climax in May 2012, following the Government of Sudan's announcement that ethnic South Sudanese should formalise their citizenship in the north or leave imminently. IOM subsequently airlifted 11, 813 stranded returnees from Kosti, Sudan to Juba, South Sudan via Khartoum over 22 days (completed on 6 June). SSRC, through its Juba Branch and supported by the headquarters, has been supporting these returnees at Kapuri Transit Camp, providing immunizations, basic first aid and tracing services.

Many returnees have the means, or relatives with the means, to manage in South Sudan. However, others and specifically the recent returnees are without even the basic means for survival and in urgent need of assistance. These returnees are assigned to transitional settlements from where most of them are flowing into the bigger urban centres, putting pressure on host communities that are already in a very vulnerable situation. Others are waiting for the authorities to allocate a piece of land for them to settle on. In the most affected states, the process is very slow and uncertain. In the transitional settlements, little support is provided and the infrastructure is already at maximum capacity.

Some South Sudanese returnees will face integration issues, as some have never lived in the South and do not speak the local language. The population movement increases the risk of epidemic diseases, such as measles, diarrhoea and HIV/AIDS. Returnees increase pressure on already limited resources, particularly in urban areas. In rural areas, where there is the potential of land access, people lack basic services such as health care, water, sanitation and education. Due to its fledgling status the Government of South Sudan is not in a position to provide these basic services at this point.

The rainy season has made the situation of those on the move and of those newly arrived in country, more difficult and will further complicate the delivery of assistance to the more remote areas.

The number of returnees per state according to OCHA² is as follows:

Returnees*				By type		
State	Previous total	New arrivals 30 May- 5 June	Updated total	Government assisted	Spontaneous	Un-specified
Unity	88,016	0	88,016	32,462	55,554	0
N. Bahr el Ghazal	72,606	0	72,606	24,986	46,229	1,391
Upper Nile	62,012	42	62,054	25,797	21,107	15,150
Central Equatoria	50,353	2,870	52,223	37,112	16,111	0
Warrap	34,715	84	34,799	17,579	7,963	9,257
W. Bahr el Ghazal	25,078	111	25,189	10,712	14,477	0
Jonglei	21,500	38	21,538	16,090	5,418	30
Lakes	17,475	0	17,475	15,704	1,501	270
Eastern Equatoria	13,198	445	13,643	11,822	1,821	0
Western Equatoria	2,595	82	2,677	1,955	673	49
Total	387,548	3,672	391,220	194,219	170,854	26,147

*since 30 October 2010. Contains only verified IOM data unless otherwise noted. Figures as of 5 June 2012.

Coordination and partnerships

South Sudan has many humanitarian actors, whose coordination is managed by the South Sudan Relief and Rehabilitation Commission (RRC) with clusters active in most areas. The Red Cross Movement presence in the country is broad, emphasizing the need for this operation to be coordinated and communicated well between Movement partners.

The clusters were set up in South Sudan in January 2012 and are currently active under the following set up and coordinated by the OCHA humanitarian country team. Most relevant are:

1. NFI & emergency shelter cluster: IOM lead, with World Vision as the co-coordinator. There is an NFI standard kit outlined by UNICEF and following to Sphere standards (with some optional additions), that will be used as the base in order to provide equal support to all targeted beneficiaries
2. Water and sanitation cluster: UNICEF lead, with Medair as the co-coordinator
3. Health cluster: WHO lead
4. Logistics cluster: WFP lead
5. Food security and livelihoods cluster: FAO/WFP lead

Since independence, INGOs and NGOs have been working with government, local authorities and communities to provide sustainable assistance and build local resilience. There are about 130 organisations currently operational and coordinated by an INGO Forum. Many of these organisations are currently responding to the returnee crisis, for example in Northern Bahr el Ghazal, Warrap and Unity States, and are providing assistance at both the transitional settlements (emergency health, water and sanitation, malnutrition treatment and screening, NFI distributions and shelter) and at the final destinations of these returnees (food security and livelihoods). SSRC will look to coordinate with INGO/NGO response in the areas in which it is working.

Within the Movement, SSRC will be leading the operation together with its partners. IFRC will provide technical support, management of the emergency appeal, start up funding from the Disaster Relief Emergency Fund (DREF) and reports on the evolving operation.

² United Nations Office for the Coordination of Humanitarian Affairs

Coordination within the Movement will be through the system already in place, based on the Movement Cooperation Agreement signed in August 2011:

- Movement platform meetings (monthly) with the Secretary General and Deputy Secretary General of SSRC, Head of Delegation and Cooperation Delegate of the ICRC, and Country Representative of the IFRC
- Movement coordination meetings (bi-weekly): chaired by the Deputy Secretary General of SSRC and attended by all country or other representatives of the PNS, IFRC Country Representative and National Society Development Delegate. Cooperation Delegate of the ICRC, as well as programme coordinators as relevant for the agenda and who are chairing the technical committees
- Technical committees (often weekly): all concerned persons from SSRC, ICRC, PNS and IFRC

ICRC is included in all coordination activities and information sharing, and will engage more fully in the operation should the security context change or need for tracing or protection activities arise. ICRC has established, trained and equipped SSRC Emergency Action Teams (EATs) in all ten branches, which will be utilized for the operation for maximum synergy. ICRC also supports the National Society through the following:

- Support to the infrastructure of SSRC through salary support to the Secretary General, all branch directors, and to the emergency preparedness and response (EPR), communications and tracing officers
- Significant support to EPR, communications and tracing programmes
- Support to emergency response of SSRC related to conflict

Partner National Societies (PNS) in South Sudan are included in coordination efforts as outlined above and are providing specific technical support as follows:

- German Red Cross has recently closed food security activities in Northern Bahr-el-Ghazal, and is still providing health and watsan in Western Equatoria with one Health Delegate and a Country Representative.
- Swiss Red Cross: has health programmes in Unity State (Leer), and intends to set up for a nutrition project in Malakal with one expatriate who has also representation function for the Swiss Red Cross.
- Danish Red Cross: is providing programmes support to the national disaster management programme, a health programme in Wau (Western Bahr-el-Ghazal), and support core positions at headquarters. Danish Red Cross has one expatriate delegate and is providing significant multilateral funding for core support in the long-term planning framework (LTPF) and for coordination through IFRC.
- Austrian Red Cross: is providing water and sanitation programme support to SSRC headquarters and has projects in Unity State. Austrian Red Cross has a water and sanitation and a general delegate in each location and considering providing water and sanitation kit 5 trainings for the kits already in country in support of the response to the returnee influx
- Canadian Red Cross: has a food security programme in Eastern Equatoria, a water and sanitation programme in Warrap. It is also planning a mother, newborn and child health (MNCH) programme in Warrap, with a delegate supporting each project
- Netherlands Red Cross: has health programmes in Central Equatoria, and is providing general core support to positions in the SSRC and to help develop the national society's capacities
- Norwegian Red Cross with support from Swedish Red Cross: is supporting finance development through the introduction of the Navision software, with support from a finance delegate and a country representative. It also has health and water and sanitation programmes in Lake State, and is providing community-based health and first aid (CBHFA) support for headquarters and in Lake State, Upper Nile and Unity through IFRC.

There are a number of PNS who are not based in South Sudan, but who are supporting the national society in various ways:

- British Red Cross is providing core support to National Society development, and intends to support one branch
- Finnish Red Cross is providing multilateral support through the IFRC to the core infrastructure of the SSRC, the CBHFA programme in Jonglei, and for NFI and in-country costs for returnees in 2011. It intends to continue that support in 2012
- Japanese Red Cross is supporting the MNCH programme in Mundri, Eastern Equatoria
- Swedish Red Cross is supporting National Society development and OD programmes through IFRC

Red Cross and Red Crescent action

Overview

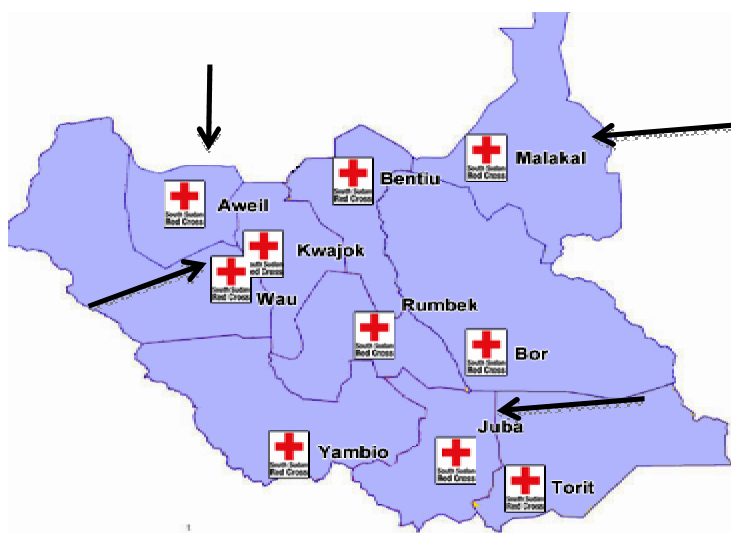
A two week assessment has been conducted to determine the immediate needs of South Sudanese returnees, host communities and the ability of the South Sudan Red Cross branches to respond in four states:

Aweil Branch, Northern Bahr el

Ghazal State

- *Wau Branch, Western Bahr el Ghazal State*
- *Malakal Branch, Upper Nile State*
- *HQ Juba Branch, Central Equatoria State*

Assessment findings are currently being compiled and will be circulated shortly. An Operations Manager has been recruited and will arrive in Juba towards the end of the week to begin the planning based on the new assessment.



Background

In their first year, SSRC has worked hard to build its capacity and disaster management department to support disaster response and preparedness work. It continues to work on setting up strong governance, conducting membership drives across the country, and working with a number of PNS to deliver services to vulnerable people in response to the current crisis and on a longer term basis.

Due to the relatively recent formation of the SSRC and the complex nature of the country context, any actions taken through this emergency appeal will aim to ensure the sustainability of activities and branch capacity.

SSRC has been responding to the growing returnee influx and is continuing to build on the activities in the [Sudan: Complex emergency appeal \(MDRSD011\)](http://www.ifrc.org/docs/Appeals/11/MDRSD011rea.pdf)³.

The preliminary emergency operations focus on **non-food distributions, first aid and public health, and water and sanitation and hygiene promotion**. The initial plan is to focus on

³ <http://www.ifrc.org/docs/Appeals/11/MDRSD011rea.pdf>

distributing non-food items to an initial 1,000 households in the three target regions and to provide some first aid and hygiene training to volunteers in the three target branches, so that they can immediately start providing that assistance to communities. A further amount of non-food items (enough for a 1,000 families) will also be sent to the target branches to be held as preparedness stocks and distributed to new groups of returnees as the numbers continue to grow over the coming weeks. This data may change, based on new assessment findings.

SSRC will focus on assisting three target regions in the first instance – Malakal, Aweil and Wau – and will then look through further assessment to expand on that assistance, and look to extend the operation to four further regions, resources permitting. The further four regions are Rumbek, Bentiu, Kwajok and Juba.

NFI distributions have been completed in Aweil and Bor and are being accompanied by trainings of volunteers in assessment, beneficiary selection, distribution and reporting. In terms of health, Wau branch has developed strong capacities under a CBHFA programme and capacity building support from the Danish Red Cross, and provides peer support both Aweil and Warrap/Kwajok. To support branch development, this appeal will also look to build some capacity through training and the provision of some material support, such as latrines and basic administrative facilities where none exist. Additionally, branches lacking a vehicle will be provided with one through the IFRC's leasing programme to support assessments and distributions.

The Movement aims to continue with capacity building efforts in support of SSRC and will use this appeal to provide further targeted support to SSRC to enable the involved branches to deliver more effective assistance to vulnerable communities. The IFRC's [Long-term planning framework](#)⁴ (LTPF) for South Sudan outlines the activities that are supporting SSRC but covered in this emergency appeal. The Annual Plan 2012 based on the LTPF is about to be finalized and will be synchronized with this appeal.

Progress towards outcomes

The recent assessments carried out by SSRC and supported by the IFRC are looking to further define the assistance needed (for example, in the areas of emergency health and water & sanitation) and will look to support efforts to strengthen the capacity of the branches involved in the response and included in this appeal.

The preliminary emergency appeal initially targets three states that are heavily affected by the returnee influx in their corresponding Red Cross branches - Malakal, Aweil and Wau – and supports SSRC to carry out further assessments in these three regions, and in four further regions - in Rumbek, Bentiu, Kwajok, and Juba.

The activities considered in this appeal build on the capacity of SSRC and will focus initially on the distribution of non-food items (NFI), the provision of hygiene promotion and of first aid services.

The current preliminary emergency appeal will be revised following the upcoming, RDRT supported assessment and a new version of the appeal will be issued in the coming few weeks. In carrying forward all aspects of the operation, the Federation will support the SSRC in relation to all aspects of security awareness and preparedness.

Relief distributions (basic non-food items)

Outcome: Up to 6,000 households are provided with appropriate and specific quantities and

⁴ http://www.ifrc.org/docs/Appeals/annual12/SP164SS_LTPF12.pdf

quality of relief items in the next two months	
Outputs (expected results)	Activities planned
Up to 6,000 households have received the basic means to cope and build their resilience to their current situation	<ol style="list-style-type: none"> 1. Conduct rapid emergency needs and capacity assessments 2. Conduct one training per branch on relief assessment, distribution and reporting for 10-20 volunteers in each of the affected branches 3. Develop a beneficiary targeting strategy and registration system 4. Coordinate the SSRC NFI package to match the country level sector and Sphere standards (the NFI package will consist of a kitchen set, laundry soap, jerry cans, sleeping mats, blankets, a tarpaulin, and mosquito nets) 5. Distribute 1,000 packages of NFIs in each branch and assist the movement of goods from point of dispatch to end user 6. Preposition approximately 1,000 packages of NFIs in each branch for distribution as returnee numbers grow 7. Monitor and evaluate the relief activities and provide reporting on relief distributions 8. Develop an exit strategy 9. Support relief efforts with an operations manager for four months 10. Recruit and train one programme manager for the operation

Emergency health and care

Outcome: The health risks of the emergency on the affected population is reduced through the provision of preventive and curative, community-level services for up to 6,000 households for the duration of this appeal	
Outputs (expected results)	Activities planned
Further mortality and morbidity of up to 6,000 households are prevented through a primary health care oriented programme.	<ol style="list-style-type: none"> 11. Conduct one training on CBFA / FA for 10-20 volunteers in each of the affected branches 12. Provide 10 sets of first aid backpacks for each branch to be used by the trained teams 13. Provide first aid and referral services for affected communities through 10 - 20 volunteers in each branch 14. Distribute 20 ORS to approximately 6,000 households 15. Train the beneficiaries on how to make ORS by local means

Water and sanitation

Outcome: Immediate reduction in risk of waterborne and water related diseases in target communities through the provision of safe water, sanitation and hygiene promotion	
Outputs (expected results)	Activities planned
Continuous assessment of water, sanitation, and hygiene situation is carried out	<ol style="list-style-type: none"> 16. Assess the water, sanitation and hygiene needs in each targeted community 17. Assess the requirements in terms of training and equipment needed to provide the support 18. Assess the appropriate water sourcing, including water trucking
The health status of the population is improved through behaviour change and hygiene promotion activities and through support to the provision of safe water to 6,000 target households	<ol style="list-style-type: none"> 19. Conduct one training on hygiene promotion for 10-20 volunteers in each of the affected branches 20. Initiate a hygiene promotion campaign within the affected population focusing on behaviour change and targeting an initial 6,000 households 21. Distribute water purification tablets to 6,000 households where no clean water source is yet available in connection to hygiene promotion activities

Logistics

Outcome: relief items are successfully transported into South Sudan and onto branch warehouses or containers and to distribution points in a controlled manner	
Outputs (expected results)	Activities planned
The coordinated mobilization, reception, and dispatch of all incoming goods supports the effective delivery of the response	22. Recruit and train one warehouse manager for each of the three branches 23. Set up one rub hall for storage in each of the branches 24. Recruit and train one driver for each branch 25. Work with the clusters to arrange logistics where local capacities are lacking 26. Monitor and evaluate the relief activities and provide reporting on relief distributions 27. Support logistics efforts with a logistics delegate

Communications – Advocacy and Public information

National communications

Objectives:

1. To profile the National Society in formation and its actions
2. To recruit new members and volunteers
3. To explain the auxiliary role/increase understanding of the special nature of the National Society as opposed to non-governmental organizations
4. To use share the achievements of SSRC through the national media as part of the operation
5. To improve the understanding of the Red Cross Red Crescent Movement and fundamental principles and values

Activities include conducting training on dissemination of fundamental principles for 15 to 25 volunteers in each of the affected branches. Up to 6,000 brochures will be printed and disseminated by incorporating sessions into the relief distribution activities and first aid services.

The National Society will also work with national media channels (including press, radio and television) to announce the start of operations and recruit support from members and volunteers. Regular updates will also be shared through national media to maintain awareness of the organization and its work, further utilizing these opportunities to mention special aspects of the National Society such as its auxiliary role as well as to share good hygiene practices.

SSRC also plans to undertake a road show of public meetings in areas affected by returnee influx to educate the populations about the South Sudan Red Cross, how it works, what it plans to do, and how it selects beneficiaries to support. The National Society is also considering organizing an SMS campaign to support either relief distributions or hygiene promotion activities

International communications: At international level, SSRC plans to work with and leverage on IFRC communications channels (website and social media) to promote the work of the South Sudan Red Cross through stories and pictures. SSRC will also update its website and social media tools regularly to promote its work and call for support in the form of volunteers, members and donations.

Contact information

For further information specifically related to this operation please contact:

- **South Sudan Red Cross:** Arthur Poole, Secretary General: +211 912 146 506/
info@southsudanredcross.org
- **IFRC Country Representation:** Peter Iseli, Country Representative: +211 955 977 258/
peter.iseli@ifrc.org
- **IFRC Zone:** Daniel Bolaños, Disaster Management Coordinator, Nairobi: +254 731 067 489/
daniel.bolanos@ifrc.org

- **IFRC Regional Logistics Unit (RLU):** Ari Mäntyvaara, Logistics Coordinator, Dubai: +971 50 4584872, Fax +971.4.883.22.12, ari.mantyvaara@ifrc.org

For Resource Mobilization and Pledges:

- **IFRC East Africa hub:** Douglas Masika, Senior Resource Mobilization Officer, Nairobi: +254 20 283 5000; email: douglas.masika@ifrc.org.

For Performance and Accountability (planning, monitoring, evaluation and reporting):

- **IFRC Zone:** Robert Ondrusek, PMER/QA Delegate, Nairobi; phone: +254.731.067.277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGOs\) in Disaster Relief](#) and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

www.ifrc.org

Saving lives, changing minds.



The IFRC's work is guided by [Strategy 2020](#), which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
 2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
-