

# HUMANITARIAN **NEEDS** AND **RESPONSE PLAN** SOUTH SUDAN

HUMANITARIAN  
PROGRAMME CYCLE  
2024  
ISSUED NOVEMBER 2023



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# Foreword

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The Humanitarian Country Team (HCT) of South Sudan is committed to a future that sees people being self-reliant. Sadly, evidence-based needs remain high, and the people of South Sudan will continue to require significant support from the international community throughout 2024.

An estimated 9 million people, including refugees in South Sudan, will experience critical needs in 2024. As the HCT, we aim to target 6 million of these people with some form of humanitarian support, depending on the resources available. This means that some people will experience needs that humanitarians cannot respond to. An estimated 7.1 million people will require food assistance during the lean season from April to July 2024, as projected through the Integrated Phase Classification (IPC). Children remain at critical risk of malnutrition, and the IPC projection is that 1.6 million children aged 6 to 59 months are at risk of acute malnutrition, of which 480,000 are at risk of severe acute malnutrition.

The impact of the Sudan crisis resulted in the arrival of vulnerable population that require assistance, increased market costs, further stretching people's coping capacities.

Women and girls remain at risk of gender-based violence as they try to undertake their daily activities. Violence, displacement and high levels of deprivation is felt in some parts of the country. People in South Sudan suffer the consequences of development deficit characterized by chronic poverty, lack of livelihoods and limited access to basic social services. South Sudan is one the countries badly affected by climate change. Dry spell and flooding contribute to people's food insecurity situation.

It is vital that the Government of South Sudan upholds their responsibility to their citizens by providing basic services and protection for all civilians. Protection of civilians remains a concern for some, as the Revitalized Peace Agreement continues to be implemented with elections planned for December 2024.

To meet the needs of the 6 million people targeted in 2024, USD \$1.8 billion is required. Timely at scale funding is required to ensure that the humanitarian response meets

peoples' needs and priorities. Without this support, peoples' vulnerability risks further deterioration.

The HCT's two-year strategy, articulated in this document, seeks to maximise opportunities to address peoples' needs in a collaborative and cooperative way with peace and development actors, leveraging opportunities to address the root causes and drivers of peoples' needs. The strategy will be reviewed after one year or when the context changes. The HCT works through initiatives including the ERC Flagship Initiative, the UN Secretary General Agenda on Solutions to Internal Displacement, and the UNHCR-led Pockets of Hope among others.

I admire the ongoing commitment and dedication of humanitarians who support people in need. We engage with communities to understand and respond based on their needs and priorities in a people-centred approach, embodying the Centrality of Protection. We commit to a zero-tolerance approach, and commit to the prevention of sexual exploitation and abuse. We dedicate efforts on localisation including capacity strengthening and partnerships with local organisations. The humanitarian community will do everything possible to support the government to take leadership to meet people's needs as enshrined in the social contract with its citizens.

Finally, I acknowledge and appreciate the immense support and generosity of the international community towards the people of South Sudan. The people of South Sudan still require assistance and I call on the international community not to forget them. Your support saves innocent lives.

Thank you.



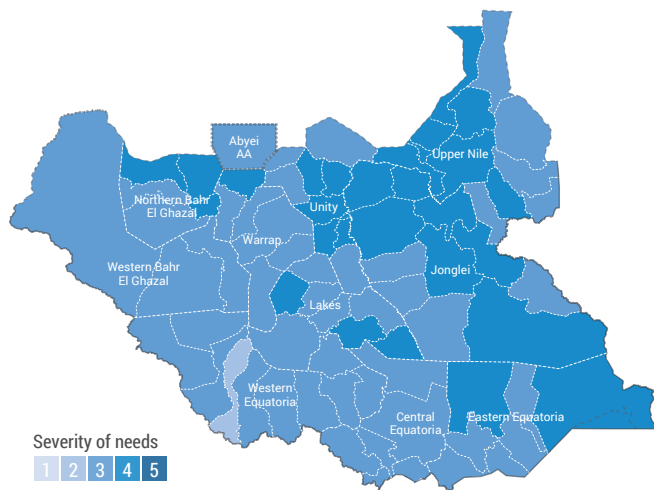
Marie-Helene Verney  
Humanitarian Coordinator ai

# At a glance

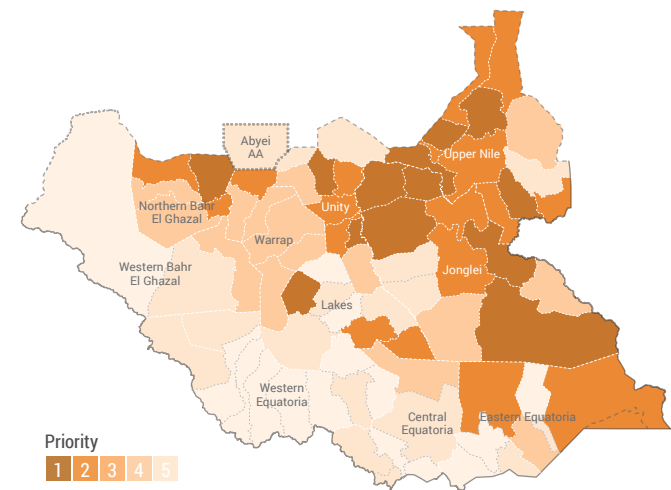
People in need and people targeted by sex, age and disability

		WOMEN	CHILDREN	THE ELDERLY	WITH DISABILITY	REQUIREMENTS (US\$)
PEOPLE IN NEED	<b>9M</b>	<b>24%</b>	<b>54%</b>	<b>7%</b>	<b>15%</b>	<b>\$1.8B</b>
PEOPLE TARGETED	<b>6M</b>	<b>24%</b>	<b>54%</b>	<b>7%</b>	<b>15%</b>	

Intersectoral Severity by County



Intersectoral prioritization by County



People in need and people targeted by sector/cluster (in million)

SECTOR / CLUSTER	REQUIREMENTS*	PEOPLE IN NEED	PEOPLE TARGETED	% OF PEOPLE TARGETED
Food Security and Livelihoods	\$588M	7M	4M	57%
Health	\$116.4M	6.3M	3.2M	51%
Water, Sanitation and Hygiene	\$102.7M	5.6M	2.6M	46%
Protection	\$120.9M	5.5M	2.2M	44%
Nutrition	\$209.9M	2.5M	1.8M	72%
Shelter and Non Food Items	\$46.8M	2.1M	1.4M	67%
Education	\$50.1M	2M	0.75M	40%
Camp Coordination and Camp Management	\$23.8M	1.6M	1.3M	81%
Refugees Response**	\$400.0M	0.45M	0.45M	100%
Logistics	\$79.5M	-	-	-
Coordination and Common Services***	\$50.7M	-	-	-

\*All cluster requirements include Phase one of the Sudan crisis response | \*\*At the time of issuing the HNRP, the RRP was being finalized. The PIN, target and requirements used here might slightly change when actual figures are finalized. \*\*\*CCS requirements includes onward transportation for Phase one of the Sudan crisis response.

# Part 1: Humanitarian Needs Overview

## 1.1 Country context

In their twelfth year of independence, the people of South Sudan are confronted by formidable challenges marked by conflict in 2013 and 2016, intensifying humanitarian, economic, social, and political crises. The 2018 Revitalized Agreement on the Resolution of Conflict in the Republic of South Sudan (R-ARCSS) continues to provide hope for peace. However, sub-national violence persists in some areas, leading to the displacement of people and loss of lives and livelihoods.

The World Bank's Fragile Situations list classified South Sudan as a medium-intensity conflict zone. It ranks 160 of 163 countries in the 2023 Global Peace Index, indicating significant internal conflict and low peace levels.<sup>1</sup> Traditionally rooted in tribal and pastoralist disputes, inter-communal conflicts persist in many parts of the country. Limited access to remote locations where these incidents occur hampers access to services for affected people. Explosive remnants of war (ERW) contamination, particularly in the southern Greater Equatoria Region, pose threats to safe returnee resettlement, agricultural activities, and the general safety of the civilian population.

South Sudan grapples with dire economic conditions marked by institutional fragility, economic policy distortions, and limited diversification. The effects of conflicts deepen extreme poverty and hamper private sector prospects and

livelihood improvements.<sup>2</sup> Despite hopes for an oil-led recovery after the 2018 truce and resumed oil production, COVID-19, sub-national violence, flooding, and structural hurdles significantly impacted economic progress.<sup>3</sup>

South Sudan relies on oil exports, which comprise 95 percent of its exports and are the primary national revenue source.<sup>4</sup> Inflation, currency depreciation, and limited diversification are significant economic challenges. The COVID-19 pandemic exacerbated these issues, causing a sharp oil price drop, income loss, severe currency devaluation, and soaring inflation, which the country has yet to recover from. In addition, global trends, including pandemic-induced supply shortages, rising United States dollar (USD) denominated commodity prices, and a stronger USD, impact the economy significantly.

South Sudan's reliance on imports for consumer goods faces a persistent balance of payments deficits and limited hard currency access beyond oil exports. As of 31 August 2023, the South Sudanese Pound (SSP) had depreciated against the US dollar by 50 percent since the beginning of 2023.

The timeline of events and season of events can be found here: [bit.ly/47pqXng](https://bit.ly/47pqXng)



### RUBKONA, UNITY STATE, SOUTH SUDAN

A young girl running past Bentiu-Roriak road, north of Rubkona County that has been damaged by floods and rendered impassable for vehicles. Heavy rains made physical access challenging for humanitarians to reach people with humanitarian assistance and move returnees to their final destinations by roads.

Photo: OCHA/Alioune Ndiaye

## 1.2 Shocks and impact of the crisis

**Protection of civilians:** Conflict and insecurity continue to be [significant drivers](#) of people's needs in South Sudan. Sub-national and intercommunal violence, crime, and impunity resulted in widespread displacement and hindered access to vital services.

The people of South Sudan, especially women and children, experience a severe protection crisis. Levels of violence, exploitation, and abuse are notably high, including conflict-related sexual violence, gender-based violence (GBV), and growing child protection concerns. The 2.2 million<sup>5</sup> internally displaced persons (IDPs) represent the world's fourth most neglected displacement crisis, including over 37,000<sup>6</sup> IDPs in the Malakal Protection of Civilians site. Concurrently, South Sudan grapples with Africa's largest refugee crisis, with over 2.2 million South Sudanese refugees hosted in neighbouring countries<sup>7</sup>. With the onset of the Sudan crisis in April 2023 and a combination of violence and the cessation of food distribution in parts of Ethiopia, thousands of people returned to South Sudan, many of whom are highly vulnerable and arriving in critically underdeveloped areas.<sup>8</sup> UNHCR estimates that by the beginning of 2024, an estimated 520,000 returnees from Sudan will have arrived in South Sudan since the outbreak of the Sudan crisis.<sup>9</sup>

These regional tensions have affected South Sudan's economy, resulting in a surge in food prices and other essential commodities. Furthermore, the already weakened coping capacities in many destination counties for returnees are likely to exacerbate protection risks, vulnerabilities, food insecurity, and acute humanitarian needs for both the local population and returning individuals.

**Food insecurity:** People's food security situation has deteriorated due to multiple shocks, including flooding, ongoing conflict, displacement, and a high cost of living. As per the Integrated Food Security Phase Classification (IPC) of October 2023, approximately 7.1 million individuals of South Sudan's total population of 12.4 million are projected to face crisis-level or more severe acute food insecurity during

the lean season from April to July 2024<sup>10</sup>. The most likely affected regions include Jonglei, Unity, parts of Upper Nile, northern Warrap, Eastern Equatoria, Lakes, and Northern Bahr el Ghazal states. Pockets of catastrophic food insecurity (IPC Phase 5) projected in Pibor in Jonglei State and Aweil East in Northern Bahr el Ghazal State are of particular concern.

Malnutrition rates remain high among children and women in South Sudan. The 2023 Food Security and Nutrition Monitoring System (FSNMS) and Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey findings estimate Global Acute Malnutrition (GAM) levels above the World Health Organization (WHO) emergency threshold of 15 percent in 46 out of the 79 counties, with over 2.5 million children and women at risk of acute malnutrition in 2024. Contributing factors to this include high food insecurity, poor water and hygiene conditions, high child morbidity rates, GBV concerns, and poor child feeding and caring practices. Eighteen counties experience extreme deprivation, further compounding the nutrition crisis.

**Climate change:** South Sudan faces severe climate vulnerabilities, ranking as the second most vulnerable country globally to natural hazards according to the 2023 [INFORM Risk Index](#). The country stands among the top five most climate-vulnerable countries.<sup>11</sup> An estimated 95 percent of the population depends on climate-sensitive livelihoods, increasing their risk of reduced access to water, sanitation challenges, and food insecurity due to climate change.<sup>12</sup> Climate-driven challenges increase competition and resource conflict, necessitating urgent adaptation measures to address long-term structural changes.

Alterations in rainy season patterns triggered severe flooding from 2019 to 2022, resulting in increased population vulnerability and infrastructure damage. In 2022 alone, over 1 million people were affected by flooding in South Sudan.<sup>13</sup> Climate-induced drought-like conditions strain rural communities reliant on subsistence farming and pastoralism, affecting their access to water resources and production.<sup>14</sup>

**Limited access to basic social services:** Only 7 percent of South Sudanese have electricity, 10 percent access improved sanitation, and 70 percent lack basic healthcare services.<sup>15</sup> The national budget allocation for health care is 8 percent, and only 35 percent of the population has access to potable water. About 60 percent of people practice open defecation, risking contamination of water sources.<sup>16</sup>



**RENK, UPPER NILE STATE, SOUTH SUDAN**

A truck departs with returnees from Renk transit center, Upper Nile State to final places of destination across the country. Thousands of people fleeing violence in Sudan into South Sudan waits for onward transportation at Renk transit center.

Photo: OCHA/Wilfred Iramaku Vundru

## 1.2.1 Sudan Crisis Response



Conditions here cannot be worse than what we experienced when fleeing.

- 13 year old girl arriving from Sudan

On 15 April 2023, conflict broke out between the Government of Sudan Armed Forces (SAF) and the Rapid Support Forces (RSF), an opposition militia group. Before the conflict, Sudan hosted some 1.1 million refugees and asylum-seekers, of whom 800,000 were registered South Sudanese nationals. Furthermore, many South Sudanese resided in Sudan and had not sought international protection. As of the beginning of November 2023, nearly 400,000 returnees had arrived South Sudan, with a further 420,000 anticipated in 2024.

People forced to flee Sudan face multiple protection risks during their flight as they seek safe pathways into South Sudan. Most people forced to flee have endured long, arduous journeys. Many are traumatized by the live experience of violence against civilians, and many—particularly women and girls have experienced or witnessed various forms of GBV. Onward transportation assistance remains a crucial priority in the returnee response. High arrival rates combined with existing limited transportation infrastructure and insufficient capacities of resident communities in border areas require increased support in onward transportation to prevent congestion in border areas and transit centers. Upon arrival, returnees need immediate life-saving assistance, including food, WASH, vulnerability and health screening, shelter, vaccinations for children, and psychosocial support.



I never thought I would be so happy to see my own town again, but here I am, smiling from ear to ear.

- 19 Year old boy, Manga Port, Unity State

Furthermore, many returnees arrive malnourished and in poor health and physical conditions. The inability to meet basic needs and food insecurity among new arrivals is anticipated to increase as returnees are forced to flee with few resources and arrive in areas with few resources or immediate livelihood opportunities. Due to disease outbreaks in Sudan, additional risks persist upon arrival, requiring proactive mitigation measures and preparedness.

The Sudan crisis adds more needs to the already dire humanitarian situation in South Sudan, requiring additional response capacity. People are arriving in areas of

destinations that already have huge deficits of services, and the coping capacities of communities have already been eroded. In addition, the conflict has heavily impacted markets in states bordering Sudan, leading to rapid increase in prices of essential commodities, including food.



Even with everything going on, being back in my own country feels like a weight has been lifted off my shoulders.

- Father of 4 boys and 2 girls, Unity State

Returnees require responsive onward transportation support to ensure that their journey, transition, and integration into their communities or final destinations of choice are quickly met to decongest border areas and reduce pressure on limited facilities in transit and border areas. Challenges with onward transportation from the border areas are expected to continue, prolonging the stay of returnees in transit, increasing protection and health risks and food, nutrition, WASH, shelter, and other needs. There will be a need to continue working closely with the authorities to facilitate people's onward movement from border crossing points to transit locations and onwards to final destinations by riverine, air, road, or a combination of modes of transport. While onward transport to final destinations is a priority, intermittent stoppages are expected due to security concerns, weather conditions, and availability of transport with estimated transit time at each location longer than a week. Considering the projected increased number of people arriving from Sudan and the prolonged transit period, existing transit centers must be maintained or expanded. Many services provided upon arrival for the most vulnerable returnees will need to be sustained, including specialized child protection services, responses to GBV, mental health and psychosocial support, and support for the elderly. Food and nutrition will remain a priority.

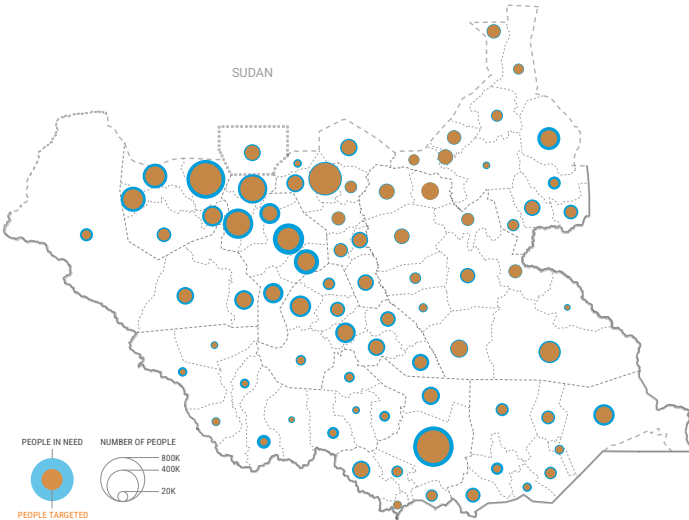


We only need help for a time to get set up, and then we can manage ourselves.

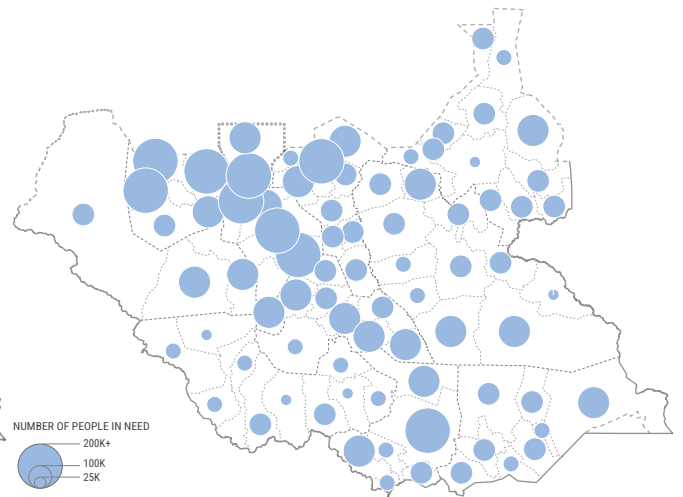
- 72 year old grandmother guiding her family, Bulakat centre for arrivals from Sudan, Malakal

# 1.3 PiN and Severity Maps

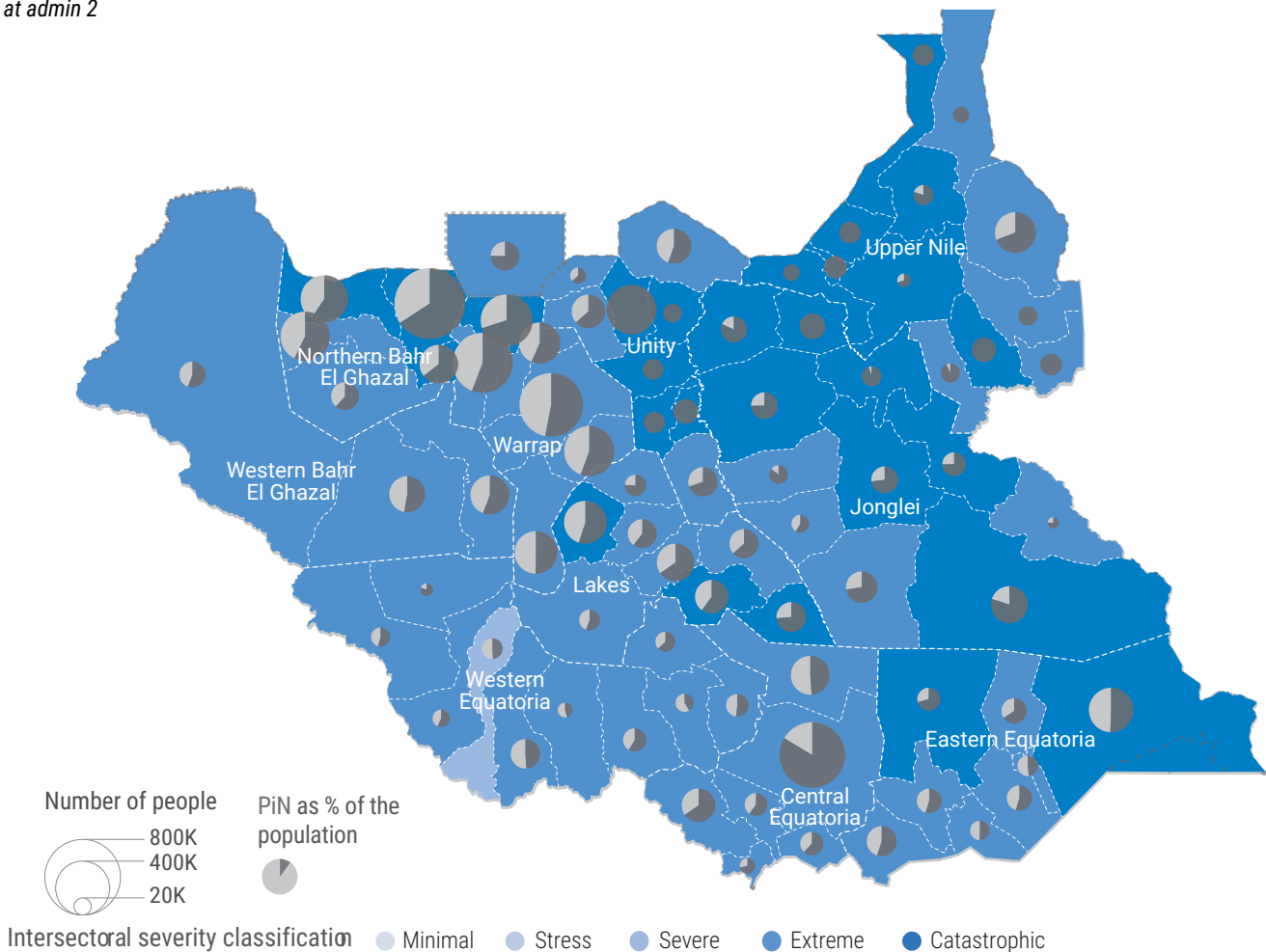
**Intersectoral People in Need and Target**  
by Admin 2



**Distribution of People in Need**  
by Admin 2



**Intersectoral severity of needs and distribution of people in need**  
at admin 2



The people in need breakdown by year and by county, can be found here: [bit.ly/3SXiDXC](https://bit.ly/3SXiDXC)



# Part 2: Humanitarian Response Plan

The Humanitarian Country Team (HCT) adopted a two-year vision and strategy for humanitarian action that ensures vulnerable crises-affected people of South Sudan are supported and empowered through innovative, inclusive, and solution-oriented responses that enable them to live with dignity in a self-reliant manner, achieved through the following strategic objectives:

## Strategic Objective 1

**Vulnerable crises-affected people have reduced morbidity and mortality through equitable, safe, and dignified access to life-saving assistance to meet their needs.**

Humanitarian partners are dedicated to ensuring timely, life-saving, multi-sectoral responses that enable the survival and reduction of morbidity among the most vulnerable populations. The collective response is to ensure that those affected by crises attain equitable access to high-quality, gender-responsive, and inclusive life-saving services.

## Strategic Objective 2

**Vulnerable crises-affected people's protection risks are mitigated as humanitarians uphold a commitment to the centrality of protection in humanitarian action informed by communities' priorities.**

Humanitarian partners will aim to improve the living and protection conditions of highly vulnerable IDPs, returnees, and resident population through equitable and safe access to assistance and protection. Partners will provide specialized protection and multi-sectoral services that are sensitive to gender, age, and disability among vulnerable groups, including survivors of GBV, neglect, and sexual exploitation and abuse (SEA). The response will ensure conflict and gender-sensitive access to safe housing, land, and property (HLP) for women, men, girls, and boys, including sufficient security of tenure to enhance access to essential HLP services and livelihoods such as access to dispute resolution mechanisms. The response will be delivered through a people-centered approach that ensures that crisis-affected people are consulted and engaged throughout the response. Their inputs are considered in decision-making to promote collective actions towards accountability to the affected population (AAP).

## Strategic Objective 3

**Vulnerable people's capacity to withstand the impact of shocks is increased, and nexus opportunities are optimized.**

Humanitarian partners will collaborate to enhance the resilience of affected communities and strengthen their capacity to withstand shocks. The collaboration will involve working closely with development and local actors, including the Government, non-governmental organizations (NGOs), civil society organizations (CSOs), and faith-based groups. The approach aims to create synergies among humanitarian, peace, and development actors to address the underlying causes of vulnerability.



The response plan's monitoring framework is available on [Humanitarian Action \(bit.ly/3uvt62j\)](https://bit.ly/3uvt62j). The monitoring framework includes the complete set of indicators attached to strategic objectives, specific objectives, cluster objectives and cluster activities.

## 2.1 Response strategy and approach



**US\$1.8B**

Required to support **6M people**

### Humanitarian boundary and prioritization

Cognizant of the reduction in humanitarian funding for South Sudan, the humanitarian response will be guided by robust prioritization, ensuring that assistance reaches those facing the greatest needs. The target population figure within this response plan is the outcome of rigorous analysis and the application of vulnerability criteria, establishing a clear boundary for the humanitarian caseload. To further enhance targeting, the Needs Analysis Working Group (NAWG) will align its analytical framework to the Joint Intersectoral Analysis Framework (JIAF) 2.0 and continue to conduct monthly analyses to inform prioritization in the most affected geographical locations based on severity ranking. In these locations, clusters will prioritize activities for those in acute situations.<sup>17</sup> These include IDPs in camps and camp-like settings requiring sustained assistance and protection for survival, returnees who arrived since January 2023 with high vulnerabilities, and highly vulnerable resident populations recorded under the lowest World Bank poverty band and surviving below US\$1.98 a day. The response aims to be multi-sectoral wherever possible, comprehensively addressing the needs in a principled and effective manner. **Please follow [bit.ly/49PbZbL](https://bit.ly/49PbZbL) to access the boundary setting Infographics**

**Please follow [bit.ly/47rYE7D](https://bit.ly/47rYE7D) to access the cluster prioritization table**

### A multi-year response strategy

In response to South Sudan's enduring crisis, the HCT has endorsed a forward-looking Humanitarian Response Plan (HRP) covering 2024 to 2025. This strategic approach coincidentally harmonizes with ongoing frameworks such as the [Flagship Initiative](#), the United Nations Sustainable Development Cooperation Framework (UNSDCF), and the Collective Outcomes for 2021-2025. While the primary objective remains the delivery of life-saving assistance and protection, humanitarian partners are embarking on collaborative efforts with development and peace partners to promote a unified strategy that enhances community resilience in the face of diverse shocks while ensuring lasting solutions for crisis-affected people. This approach will guide individuals and communities towards gradually reducing their reliance on immediate aid, necessitating advocacy efforts with donors and the Government to amplify support for long-term interventions and resilience measures. The strategic approach promotes meaningful community engagement,

enabling the implementation of context-specific interventions that bolster efforts on AAP.

### Centrality of protection

South Sudanese experience huge protection challenges. Collective efforts will focus on safeguarding communities from various risks, reinforcing referral systems to aid their recovery from harm, and fostering an environment conducive to their safety and security. Within this framework, clusters will embed protection principles into their programs and strategies, ensuring that the response remains centered on protection. The commitment aligns with the [HCT protection strategy \(bit.ly/3Go8hbu\)](#) emphasizing the core role of protection in the response. All actions taken by the HCT and its members will be guided by humanitarian and protection principles, including approaches that are conflict-sensitive and do no harm. Partners are dedicated to promoting and enhancing the mainstreaming of protection, AAP, and protection from sexual exploitation and abuse (PSEA) across all sectors of the humanitarian response. These actions underscore the unwavering commitment to ensuring the safety, dignity, and rights of affected people.

### Use of multi-purpose cash assistance

Cash and voucher assistance (CVA) played a pivotal role in the 2023 South Sudan humanitarian response, delivering approximately \$71.5 million to more than 6 million people as of August 2023, including \$31 million (43 percent) through multi-purpose cash assistance (MPCA).<sup>18</sup> MPCA empowered vulnerable families to address immediate life-saving needs, emphasizing dignity and freedom independently. In 2024, CVA will be integrated into social safety nets, focusing on disability inclusion and women's leadership. Market-based programs, including CVA, will become a common response strategy across clusters. Challenges include limited rural mobile network coverage, inflation, insecurity, and fluctuating exchange rates. Donor priorities and financial service provider fees are also concerns. The UN, NGOs, and the private sector will take a multi-sectoral approach to promote MPCA. Market monitoring will inform CVA programming to enhance financial access for vulnerable groups. Collaboration between the Cash Working Group (CWG) and clusters will build on past experiences to maximize efficiency and improve coordination.

**For more information about the CWG in South Sudan**  
**Please follow [bit.ly/3T1tGPp](https://bit.ly/3T1tGPp)**

## 2.2 Commitment to quality programming

### Accountability to Affected Population (AAP)

Humanitarian partners are dedicated to advancing AAP and conscious community engagement. Collaborating closely with the Inter-Cluster Coordination Group (ICCG), the Communication and Community Engagement Working Group (CCEWG) will focus on creating collective, streamlined, and contextually relevant AAP monitoring mechanisms. These include community engagement to understand their priorities, advising on trends, reporting, and ensuring that AAP remains a core aspect of humanitarian action. Systematic and routine perception monitoring will be conducted to reflect the priorities and preferences of affected communities. It considers variations in self-identified needs among diverse population segments, including gender, age, ethnicity, and ability. Affected populations will be placed at the forefront of decision-making processes. [Please follow bit.ly/49S9NAg](https://bit.ly/49S9NAg) to access the AAP Strategy for South Sudan

### Protection against Sexual Exploitation and Abuse (PSEA)

A PSEA task force is in place, and its core functions encompass engagement with affected populations, SEA prevention, establishment of reporting systems, victim assistance, referral for investigations, and coordination. The PSEA task force is a multi-agency body comprising UN entities, NGOs, the International Committee of the Red Cross (ICRC), and protection-related sub-clusters. PSEA is mainstreamed across various programs, including needs assessments, capacity building, community engagement, and awareness initiatives. To bolster PSEA efforts, a dedicated United Nations Country Team (UNCT) PSEA Coordinator supports senior leadership and strategy development.

New SEA referral mechanisms have been established in response to crises, complementing existing complaint channels. The task force follows standardized operating procedures for SEA prevention, reporting, response, and accountability. A 2023 deep-dive review and nationwide SEA risk assessment will inform the new systemwide PSEA strategy slated for completion in December 2023. The UNCT-HCT's 2024 action plan is centered on five key outcomes: staff awareness of conduct standards, secured reporting avenues, quality victim assistance, swift investigations, and strengthened senior management support. Priority actions include finalizing the 2024-2026 PSEA strategy, establishing SEA referral systems, enhancing risk management, mobilizing resources, and building capacity among NGOs. These efforts aim to strengthen accountability and effectively address SEA at national and sub-national levels.

For details, please refer to the PSEA workplan on the link here [bit.ly/47r9ESM](https://bit.ly/47r9ESM)

### Localization

The HCT is committed to localization, as articulated in its strategy. Prioritizing equitable partnerships, the HCT promotes robust and mutually empowering collaborations with local and national actors. The aim is to nurture equitable partnerships, leveraging local actors' unique strengths and insights to elevate humanitarian responses' quality and timeliness. The HCT will enable capacity-building initiatives, drawing upon indigenous knowledge and practices to empower communities and local/national actors to effectively identify and address their capacity gaps, fostering a more reciprocal and mutually beneficial relationship among diverse stakeholders. The HCT is committed to ensuring meaningful representation, participation, and leadership of various actors in humanitarian coordination. The HCT will seek to mirror the priority needs of communities, encompassing risk-sharing and support for local actors' core costs and organizational development. [Please follow bit.ly/3uz8wOz](https://bit.ly/3uz8wOz) to access the HCT Localization Strategy

### Gender

Emergencies and crises worsen gender disparities and vulnerabilities, resulting in a rise in GBV among women and girls. Factors such as gender, age, disability, health, social status, and ethnicity influence how individuals are affected by and respond to emergencies. To address this, a collaborative and agile response involving multiple stakeholders is vital, emphasizing gender integration and inclusion in rapid assessments and cluster response plans. Efforts have been made to engage with diverse groups, analyse their distinct needs and vulnerabilities, and use this evidence to shape responses. These efforts have identified the most at-risk population groups, including persons with disabilities, the elderly, and adolescent girls and boys who face unique challenges in humanitarian settings. This approach assists in prioritizing actions to align available resources with targeted interventions.

The ICCG is critical in integrating gender and inclusion into planning and responses. Disaggregated data collected through 5Ws reporting informs planning and response strategies across various clusters, focusing on households led by women or girls and addressing gender-related constraints, particularly in sectors such as Food Security and Livelihood (FSL). The GBV information management system contributes to the prevention and response to GBV by analysing vulnerabilities and drivers. Ongoing efforts are to integrate GBV services into other cluster activities, fostering a multi-stakeholder approach. Looking ahead to 2024, there is a commitment to prioritize and deepen the gender and inclusion approach in humanitarian action, including through the Flagship Initiative focusing on community engagement. The HCT compact remains instrumental in providing strategic leadership for gender equality, with the development of minimum gender commitments and an accountability framework to guide humanitarian planning and responses.

## 2.3 The Flagship Initiative

### The Flagship Initiative

South Sudan is one of the four countries globally piloting the Emergency Relief Coordinator's (ERC) Flagship Initiative. The [Flagship Initiative](#) is being piloted in Upper Nile, Unity, and Northern Bahr el Ghazal states since the beginning of 2023. The Flagship Initiative is facilitated by decentralization of coordination through Area-Based Leads (ABL) to ensure leadership is taking place as close to affected communities as possible and to leverage various areas of work, including humanitarian, peace, development, and working with affected communities and the local authorities for greater impact. The Flagship Initiative resonates with the HCT commitment and strategy on AAP that encourages humanitarian actors to ensure a people-centered approach that gives crises-affected people a voice in identifying and addressing their priorities and needs.

The Flagship Initiative addresses the pressing challenge of escalating humanitarian needs that outpace available resources. To effectively respond, the initiative emphasizes the importance of community engagement and resilience-building to prepare the affected communities for future shocks. The primary goal is to shift from a reliance on short-term humanitarian aid to fostering self-sufficiency, dignity, livelihoods, and independence to maximize impact among affected populations.

The initiative identifies four strategic focus areas that require attention: 1) Reducing food insecurity, 2) increasing returns of internally displaced persons and refugees, 3) delivering basic social services, and 4) mitigating the impact of climate change. The Flagship Initiative takes a holistic and community-centered approach to addressing humanitarian challenges in South Sudan. By fostering collaboration, empowerment, and resilience-building, the initiative aims to achieve sustainable durable solutions and to reduce dependency on humanitarian assistance.

## 2.4 Access, Operational Capacity and Costing

### Humanitarian Access

The humanitarian operating environment in South Sudan continues to be hindered by access constraints against a backdrop of inter-communal violence, armed groups mobilization, cattle raiding, national and regional political instability, economic fragility, and physical access challenges exacerbated by flooding and inadequate infrastructure. From January to October 2023, 339 incidents were reported related to these constraints, with 168 involving violence

against humanitarian personnel and assets. Bureaucratic impediments, including heavy procedures, excessive paperwork, and unclear registration processes, added extra costs and, at times, led to arrests and harassment. Illegal taxation and extortion at checkpoints further delayed aid delivery, increasing expenses and transportation time. South Sudan's limited infrastructure, including inadequate road networks, transportation options, and storage facilities, compounded the logistical challenges for delivering humanitarian supplies to remote areas, particularly during the rainy season.

The Access Working Group (AWG) remains the primary forum in South Sudan, through which operational coordination, analysis, and discussion of humanitarian access issues take place. In 2023, the AWG supported the capacity of state-level implementing partners and decentralization of access problem-solving by establishing Access and Civil-Military Working Groups (A/CMWG) in five locations (Bentiu, Bor, Juba, Malakal, and Wau). The purpose of the state-level A/CMWG is to support a more efficient, coordinated, and principled humanitarian response by contributing to humanitarian partners' efforts to establish and maintain principled humanitarian access, including through sustained engagement with all actors, humanitarian dialogue, monitoring, reporting, and analysis on humanitarian access. These efforts will continue in 2024 to empower sub-national access groups to deal with access issues as and when they arise.

### Operational capacity

In 2024, all humanitarian partners coordinating through the cluster approach will be considered Humanitarian Programme Cycle (HPC) partners and will contribute to achieving the South Sudan HNRP strategic objectives. Significant challenges related to humanitarian access are anticipated to persist in 2024, leading to a continuous escalation of humanitarian needs. Access to vulnerable populations in hard-to-reach areas will likely remain constrained, with limited access to essential services, assistance, and information flow. The [humanitarian community's capacity](#) to address these pressing needs will be stretched thin due to multiple factors, including the conflict in Ukraine, the ongoing Sudan conflict, a global food crisis, and inflation. These compounding challenges will place significant strain on available humanitarian funding, potentially hindering the ability to meet the most urgent needs of the population.

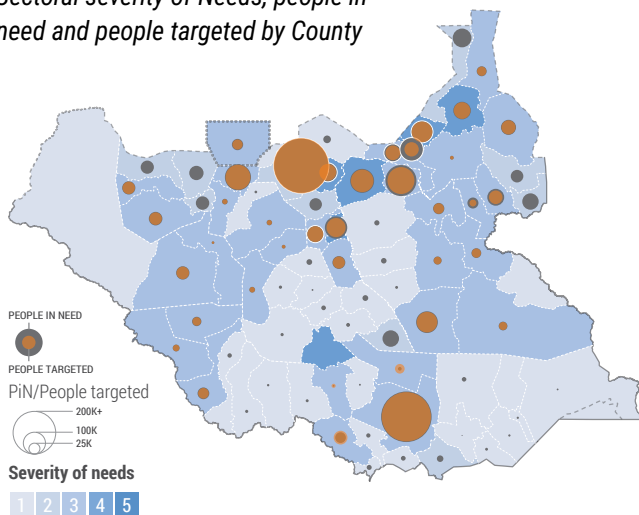
### Costing Methodology

A unit-based costing approach was used to estimate the total cost of the overall response. The cost per beneficiary is estimated by activity and sector and by geographical location where feasible. Each cluster/sector developed a unit cost based on a realistic rationale agreed upon by their members, including estimations required to ensure mainstreaming of cross-cutting priorities. The targeted population is multiplied by each cluster unit cost to develop the requirements. This includes the cost associated with in-kind support and CVA (where appropriate) at inter-sector (joint responses) and sector levels. The overall HNRP requirement is a total of all the cluster estimates.

# Part 3: Cluster Response Plan

## 3.1 Camp Coordination and Camp Management

*Sectoral severity of Needs, people in need and people targeted by County*



**Needs:** As of September 2023, over 908,800 people remain in 142 formal and informal displacement sites, predominantly in Unity, Upper Nile, and Central Equatoria states. These individuals face extreme vulnerability due to the lack of viable alternatives. Self-settled, unplanned IDP sites, often overlooked and underserved, pose an even greater risk of exclusion from essential services. In 2023, 58 percent of displacement sites (hosting over 327,000 people) did not receive Camp Coordination and Camp Management (CCCM) support. This resulted in limited access to coordinated services, community support, information, or site maintenance.

Additionally, over 400,000 projected returnees from Sudan in 2024 will need CCCM assistance in the transit and reception centers near the Sudan border. Based on monthly site verifications, the CCCM cluster anticipates that around 20 percent of these returnees will settle in existing IDP sites throughout the country. This highlights the critical role of CCCM support in addressing the needs of both IDPs and returnees to ensure their access to life-saving assistance and protection. Integrating these additional returnees in existing IDP sites will require significant efforts to provide decent living conditions, protection, and humanitarian assistance. Coordination and resources will play a pivotal role in addressing the challenges presented by this evolving situation.

**Response:** In 2024, the CCCM cluster is committed to addressing the needs of IDPs living in the most underserved sites, regardless of their geographical location. With the incorporation of Phase 1 of the Emergency Response Plan for the Sudan Crisis into the 2024 HRP, the scope of the response will expand to cover transit and reception centers near the Sudan border. If needed, this expansion includes

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
1.6M	1.3M	\$23.8M



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provisions for establishing new high-capacity transit centers in northwest locations. The cluster's primary focus remains ensuring safe access to services and protection for IDPs.

The cluster will employ area-based and roving response strategies to reach underserved sites, working through localized response and coordination structures to access hard-to-reach areas. This approach identifies common needs among sites in close proximity and links site populations with available services. Mobile response will continue to be a short-term emergency response approach to new displacements.

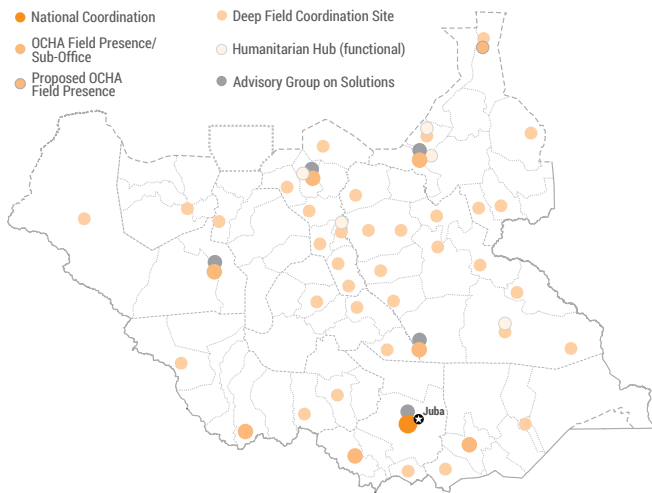
In sites where CCCM presence is already established, partners will explore strategies for transitioning site management responsibilities to community self-governance structures, such as Camp Management Committees and the Government Relief and Rehabilitation Commission (RRC).

Moreover, the cluster will leverage its role as an intermediary between service providers, IDPs, resident communities, and government authorities to facilitate effective and sustainable solutions. As a cross-cutting sector, CCCM is well-positioned to address the multidimensional needs of IDPs, promote comprehensive and durable solutions, and ensure that the needs and intentions of IDPs are integrated into planning, implementation, and decision-making processes. Regularly deploying the comprehensive site profiling tool will provide site-specific information essential for solutions programming, benefiting a range of partners working through the nexus approach.

**Monitoring:** The CCCM Cluster monitors the situation in IDP sites through its sub-national state focal points and network of partners. It interacts regularly with a wide range of stakeholders, including the ICCG, national actors, and the RRC. The cluster supports evidence-based response modalities through a robust information management and data collection system. Perception surveys related to key AAP outcome indicators, disaggregated by gender, age, and specific needs, will inform decision-making on priority needs, response, and implementation gaps.

The detailed cluster strategy can be found here [bit.ly/3QU3DXQ](https://bit.ly/3QU3DXQ)

## 3.2 Coordination and Common Services



**Objectives:** The Coordination and Common Services (CCS) primary goal is establishing an efficient coordination mechanism that promotes a strategic, principled, evidence-based, and prioritized humanitarian response. CCS partners will actively engage in inter-sectoral needs assessments and analysis to guide response planning, negotiate access, and overcome bureaucratic hurdles to ensure a secure and timely operational environment. The sector provides non-programmatic cash coordination support and helps integrate key cross-cutting priorities, including AAP and localization into humanitarian actions.

**Response:** To achieve these objectives, the CCS Sector will focus on five key areas: 1) Enhanced Coordination: This involves strengthening coordination through formal meetings, information sharing and joint needs analyses, driven by rigorous assessments that inform the humanitarian response; 2) Strategic Response Planning: The sector aims to improve strategic response planning, ensuring principled and well-coordinated humanitarian actions; 3) Monitoring Displacement: Timely monitoring of both new and historical displacement, return movements and the associated needs; 4) Programme Effectiveness: Enhancing program efficiency and effectiveness by integrating cross-cutting issues and providing non-programmatic cash coordination support; and 5) Humanitarian Transportation: Collaborating with authorities to facilitate onward transportation for incoming returnees from transit locations to final destinations, by river, air, road or a combination of modes.

A nationwide household-level Inter-Sectoral Needs Assessment (ISNA) will be carried out to facilitate evidence-based response planning in 2024. This assessment aims to understand people's needs and inform coordinated, multi-sectoral responses. Data will include sex- and age-disaggregated data and qualitative information. Rapid multi-sectoral assessments will be coordinated for emergencies, with data collected using appropriate methods, including smartphones and paper surveys.

REQUIREMENTS (US\$)

**\$50.7M**



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The CCS sector will continue to incorporate gender equality, age, disability, and conflict sensitivity across all stages of the response. Population movements, shocks (such as climatic, economic, and conflict-related), and biometric registration will inform the response. AAP will be central to the response, emphasizing systematic engagement with affected communities for a community-centered humanitarian approach. In line with a zero-tolerance approach to SEA, the sector supports advocacy for unhindered access to affected populations and the centrality of protection.

Advocacy will extend to the establishment of humanitarian hubs, which will serve as logistics bases, accommodations, and office facilities for humanitarian organizations, ensuring response coordination close to affected populations. Additionally, CCS partners will collaborate with authorities to facilitate the movement of incoming returnees from transit locations to final destinations using various modes of transport.

**Monitoring:** A broad range of multi-sector assessments, including rapid, agency-led, REACH Area of Knowledge, Emergency Response Mechanism, and sectoral and Displacement Tracking Matrix site evaluations, will be systematically compared to identify trends in underlying vulnerabilities. These analyses will enable ongoing trend monitoring to track changes in needs over time. These insights will be regularly shared with the NAWG for continuous needs assessment. Furthermore, disaggregated by demographics, perception surveys will guide the creation of information products such as situation reports and humanitarian dashboards, enhancing decision-making regarding priorities, response strategies, and implementation gaps. Consolidating all these assessments into a database will facilitate effective monitoring and response coordination.

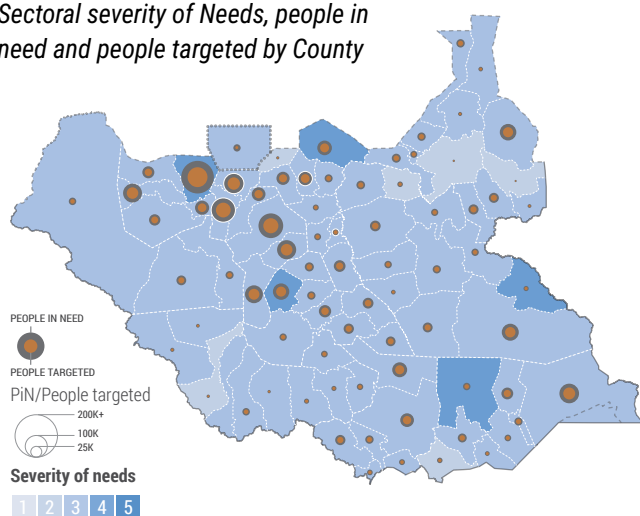


**We know that no-one should ask us for anything to receive assistance. I know what to do if someone approaches me in that way.**

- 20 year old women in Juba IDP camp

### 3.3 Education

Sectoral severity of Needs, people in need and people targeted by County



**Needs:** Approximately 2 million children and adolescents between 6 and 17 years old (53 percent are girls), along with 1 million children between 3 and 5 years old, encounter significant obstacles in accessing education, including early marriage and GBV, especially for girls. The primary focus for 2024 is to enhance access to safe and conducive learning environments for vulnerable groups, particularly IDPs and returnees. This includes catering for the educational needs of over 311,000 IDPs, 1,535,000 resident communities, and 189,000 returnees. Another critical issue is the scarcity of qualified teachers, with one-third of teachers lacking training, resulting in high pupil-teacher ratios with an average of 93:1. In 2024, nearly 41,000 teachers, primarily in hard-to-reach areas, will require support with teaching materials and life-saving incentives to ensure quality education.

Moreover, learning materials for students, including those in early childhood education, need to be increased, with textbook ratios at 8:1 for primary students, far below the recommended 1:1 guideline. Providing a secure and enabling learning environment and facilities, with a particular focus on gender-sensitive settings and segregated water, sanitation, and hygiene (WASH) facilities, remains a pressing concern. Notably, children with disabilities, especially those residing in crisis-affected areas, continue to receive inadequate support for quality education.

**Response:** The Education cluster is committed to enhancing equitable access to secure, protective, and high-quality education to empower individuals for more prosperous lives. This commitment is channelled through the cluster strategic objectives that promote accessibility, quality, and building robust local capabilities for sustainable education. The cluster employs a multi-sectoral approach, collaborating closely with other clusters such as WASH, Child Protection, GBV, and Nutrition to address diverse needs efficiently. Despite an anticipated funding cut of up to 50 percent, the cluster is dedicated to prioritizing the most vulnerable individuals, including 748,000 children and about 7,500 teachers out of over 2 million people in dire need of

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
2M	0.75M	\$50.1M



The digital version of this page is available on Humanitarian Action [bit.ly/47qtXzT](https://bit.ly/47qtXzT)



education services. A particular focus is directed towards the returnees from Sudan, aiming to provide them with life-saving educational services. The remaining target will be determined by the severity of needs, intersectoral prioritization, and geographical targeting, focusing on areas rated as IPC Phases 3 and 4.

Regarding response modality, the cluster primarily relies on in-kind support due to the scarcity of educational materials, mainly due to dysfunctional markets and the limited purchasing power of the population. However, when feasible, the cluster will explore cash-based modalities, particularly for teacher incentives and promoting girls' education through the Girl Education South Sudan program. The cluster will leverage the strengths of local Government, national organizations, and development actors to achieve all three strategic objectives. This will involve joint planning, prioritization, and implementation, fostering efficiency while maintaining a focus on the most vulnerable population groups.

**Monitoring:** The Education cluster, responsible for emergency education coordination, utilizes a robust monitoring approach. The 5W matrix and ActivityInfo tool offer insights into children's needs and challenges in crises. Real-time data is collected through sub-national cluster focal points and an online tool, facilitating prompt responses to emerging issues. The cluster maintains situational awareness when collaborating closely with key stakeholders, including the ICCG and national actors. Open dialogue with affected communities enhances humanitarian responses' overall quality and effectiveness. The cluster will ensure adaptability and strategy refinement through diligent information management, nationwide needs assessments, and an evidence-based approach to address evolving vulnerabilities among children.

The detailed cluster strategy can be found online here [bit.ly/3sMJhYz](https://bit.ly/3sMJhYz)

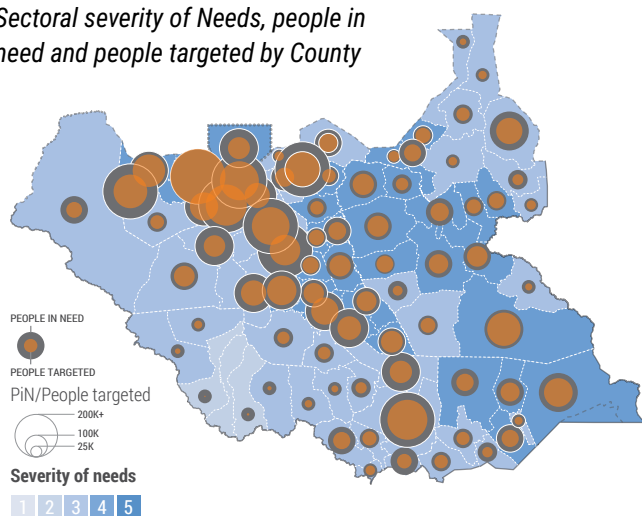


I am so happy that I can go to school here.

- 8 year old girl displaced to Malakal

### 3.4 Food Security and Livelihoods

Sectoral severity of Needs, people in need and people targeted by County



**Needs:** As per the IPC analysis of October 2023, approximately 7.1 million people of the total population of 12.4 million will face acute food insecurity at crisis levels or worse during the peak of the lean season from April to July 2024, necessitating humanitarian food assistance. The most severely affected regions will include Jonglei, Unity, parts of Upper Nile, northern Warrap, Eastern Equatoria, Lakes, and Northern Bahr el Ghazal States. Additionally, certain areas, particularly Pibor in the Greater Pibor Administrative Area and Aweil East in Northern Bahr el Ghazal State, are expected to experience catastrophic food insecurity at IPC Phase 5.

For more information about the IPC and key drivers of food insecurity, please follow [bit.ly/47pR6IU](https://bit.ly/47pR6IU)

**Response: Emergency Food Assistance (CO1):** Prioritizing counties historically affected by food insecurity due to conflict, climate shocks, and inequity, this component targets around 3.5 million individuals. It primarily involves distributing food rations and creating livelihood activities, strongly emphasizing areas facing emergency and catastrophic acute food insecurity. This approach seeks to reduce malnutrition, morbidity, and mortality rates, particularly among vulnerable groups such as children and pregnant or lactating women.

**Context-Specific Emergency Livelihood Support (CO2):** This component aims to provide livelihood support to approximately 650,000 households (focusing on displaced populations) across 78 counties and Abyei, based on community consultations and state profiles available on the FSL cluster website. CO2 initiatives in hard-to-reach areas complement CO1 efforts and help vulnerable populations transition towards self-sufficiency. Given the challenges in local markets, the response remains flexible, allowing for increased cash-based interventions when feasible and supporting local markets and community empowerment.

The response's impact is maximized through close coordination among FSL partners operating within the same

PEOPLE IN NEED    PEOPLE TARGETED    REQUIREMENTS (US\$)

7M    4M    \$588M

For updated information on food security, please refer to the South Sudan IPC reports.



locations and for the same beneficiaries. Partners involved in food assistance share beneficiary lists with those focusing on livelihood and resilience support to guide beneficiaries toward self-sufficiency. Additionally, plans for a joint intervention pilot in 2024, facilitated by WFP and FAO, focus on data sharing and geographic prioritization. Integration with other cluster interventions, including Health, Nutrition, WASH, and protection, remains a top priority.

**Resilience support (CO3):** Aims to strengthen the self-reliance of 1 million people by reducing their dependency on FSL assistance through improved livelihoods, fostering market development, and implementing anticipatory actions. Capacity-building and the creation of community infrastructure aim to promote sustainability, aligning with long-term development and peacebuilding goals in collaboration with relevant stakeholders.

**Monitoring:** Most output level indicators will be monitored through monthly 5Ws collected by partners. Cross-cutting indicators around GBV, child protection, and AAP will be monitored quarterly to track the progress of the humanitarian response. Quality standards, checklists, best practices, and other cross-cutting guidelines are shared with partners, along with periodic presentations on AAP, GBV, PSEA, and general protection to build greater AAP. Complaint and feedback mechanisms will be used to better engage with affected populations. Regular field visits and lessons-learned exercises will verify data accuracy and ensure that recommendations are fully considered in the response.

The detailed cluster strategy can be found here [bit.ly/3RfQcTq](https://bit.ly/3RfQcTq)

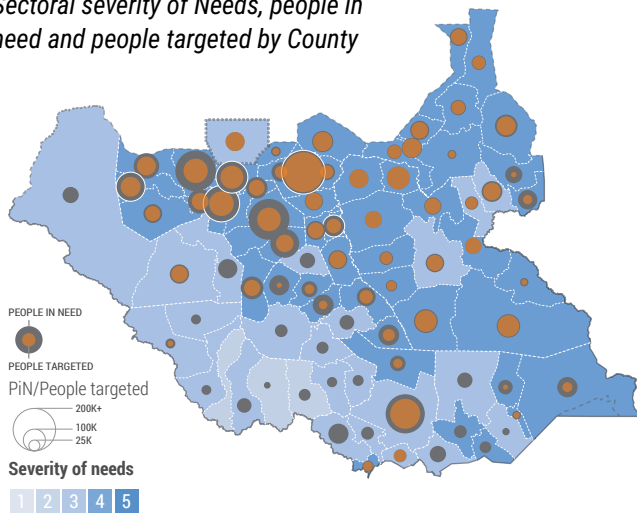
“ Our disability does not deter us from food production and hence we need land for farming.

- A 60 years old man in Jonglei state



### 3.5 Health

Sectoral severity of Needs, people in need and people targeted by County



**Needs:** South Sudan grapples with a severe health crisis affecting 8.9 million people, primarily in flood- and conflict-affected regions with population movements (displacement and returns) and disease outbreaks. The nation's health system, heavily reliant on international aid, faces staffing and resource shortages. Vulnerable groups, including women, children, the elderly, and persons with disabilities, have limited access to health care and face heightened risks of illness and mortality.

The current health landscape is grim, with malaria standing as the leading cause of death and illness, affecting half of the population. Low measles vaccination rates lead to frequent outbreaks, and cholera and Hepatitis E cases persist. Infant and child mortality is high, compounded by the 2022 floods, which affected over 900,000 people and displaced 140,000 across 29 counties. A 2022 national study revealed widespread violence against women, including physical, sexual, psychological, and economic abuse and forced marriages. Post-conflict communities also grapple with high depression rates.

**Response:** The health cluster aims to provide quality basic primary health care services and prevent health risks while strengthening the health care system. This aligns with the 2024 South Sudan HRP's goals of saving lives, reducing health risks, and enhancing resilience. The cluster will prioritize delivering life-saving health services and inter-agency health kits in line with humanitarian standards, considering disease patterns, seasonality, and trauma needs.

In 2024, the cluster aims to deliver life-saving health services to 3.2 million individuals, including returnees from Sudan. Collaboration with other clusters is crucial for more effective and integrated responses. However, private healthcare options are limited in many areas, making direct service delivery through partners and the Government the primary approach. The cluster plans to explore unified cash-based modalities with other clusters. The response will focus on a broad spectrum of health services, including maternal, child, and reproductive health, managing common and chronic

PEOPLE IN NEED | PEOPLE TARGETED | REQUIREMENTS (US\$)

**6.3M** | **3.2M** | **\$116.4M**



The digital version of this page is available on Humanitarian Action [bit.ly/46s4UuX](https://bit.ly/46s4UuX)



diseases, neglected tropical diseases, mental health and psychosocial support and GBV. Sexual and reproductive health services, family planning, prevention of mother-to-child transmission, clinical management of rape, and supplies for vulnerable women and girls are key priorities. A referral mechanism will be used for secondary and tertiary health care services.

The response will be guided by universal health coverage principles, focusing on prevention, preparedness, response, and mitigation for vulnerable groups. It also maintains a focus on Ebola Virus Disease (EVD) prevention, preparedness, and readiness, given the ongoing threat of EVD and other viral haemorrhagic fever in South Sudan. The plan will support health facilities and community-based systems, enhance coordination with partners and authorities, and strengthen disease surveillance, reporting systems, and pre-positioning medical supplies and equipment in areas affected by the Sudan crisis, displacement, and natural hazards.

**Monitoring:** The health cluster will monitor the response using data from various sources, such as Integrated Disease Surveillance and Response (IDSR), early warning, alert, and response system, District Health Information System 2 (DHIS-2), Initial Rapid Needs Assessment (IRNA), public health situation analysis, health service functionality, 5Ws, outbreak investigation, mortality and morbidity estimates. These data will be used to assess performance against indicators in the response plan on a quarterly basis, supporting decision-making and accountability. Feedback and satisfaction of affected communities regarding service provision will be tracked through health committees and joint support supervision visits. Additionally, monitoring will extend to tracking attacks on healthcare services and healthcare workers using the WHO's Surveillance System for Attacks on health care.

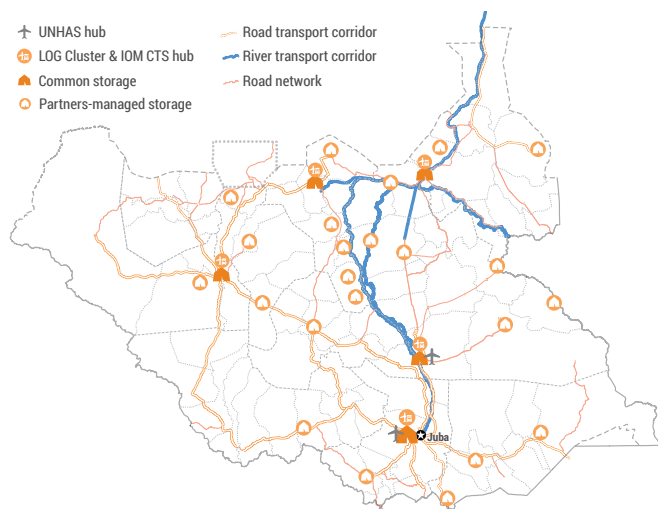
The detailed cluster strategy can be found online here [bit.ly/412bXti](https://bit.ly/412bXti)



I look forward to coming to the health clinic. They check my baby and be sure that my baby and I are doing well.

- 24 year old mother, Abyei Administrative Area.

### 3.6 Logistics



**Needs:** South Sudan poses complex humanitarian challenges due to its poor infrastructure, seasonal hazards, ongoing insecurity, demographic constraints, and limited aviation services. Inadequate and poor road networks create a significant logistical hurdle for affected populations seeking life-saving assistance and humanitarian organizations delivering assistance. The aviation sector remains under developed, with insufficient investment in infrastructure and capacity and a history of poor safety records among commercial carriers. Humanitarian needs are widespread across the country, and access barriers lead to delays in delivering essential relief supplies to hard-to-reach areas, resulting in increased costs. Climate variability, characterized by flooding and damage to major supply routes, limits transportation options and creates a shorter window for humanitarian agencies to pre-position vital commodities before the rainy season. Ongoing violence and insecurity further exacerbate challenges in providing life-saving services and hinder humanitarian organizations' ability to reach populations in need. Consequently, reliance on costly air transport has increased significantly. Moreover, the recent influx of returnees and refugees from Sudan following the Sudan crisis necessitates additional transportation of critical life-saving cargo for humanitarian responses, a trend expected to continue in 2024.

**Response:** The Logistic cluster will continue to provide reliable and readily available assets to assist affected people, including in Unity, Upper Nile, and Jonglei states as priority target locations. The four logistics projects will support approximately 300 humanitarian agencies representing all relevant clusters, with common transport and storage services, last-mile deliveries to field locations, road and dykes rehabilitation, and air transport service for humanitarian passengers, including off-schedule air transport service requests in support of emergency services, ICCG missions or charter flights.

To respond to the needs of the humanitarian community, WFP's logistics plan is to expand and enhance the road and river network routes to effectively transport aid to those most

REQUIREMENTS (US\$)

**\$79.5M**



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in need, lessen isolation, and connect communities. The Logistics cluster will facilitate access to common logistics services to move humanitarian cargo to reach vulnerable people. It will allocate a fixed-wing aircraft with one weekly rotation to ICCG priority locations. The pre-positioning of cargo by road during the dry season will be maximized to use the most cost-efficient transport method and help humanitarian organizations be prepared for emergencies with readily available stocks. In addition, the United Nations Humanitarian Air Service (UNHAS) will provide a fixed weekly flight schedule to 47 destinations. IOM will continue to position 17 trucks in Bor, Bentiu, Juba, Malakal, and Wau for last-mile delivery. With the ongoing Sudan crisis, the cluster will continue to support the humanitarian community with UNHAS-scheduled passenger flights to and from Renk and airlift of relief cargo and IOM with last-mile road deliveries to affected locations in support of the response.

**Monitoring:** Data for monitoring will be collected through IOM's smart sheet fleet management and internal tracking system, UNHAS Electronic Flight Management Application and Performance Management Tool, Logistics cluster Relief Item Tracking Application, and WFP logistics unit's rehabilitation tracker. User satisfaction with the services will be monitored regularly through the cluster's coordination meetings, UNHAS user group, and steering committee meetings and by conducting annual performance surveys to identify strategic and operational areas for improvement. To monitor performance, the cluster will report monthly on indicators contributing to achieving the sectoral objectives.

The detailed cluster strategy can be found here [bit.ly/3Gfk1wX](https://bit.ly/3Gfk1wX)

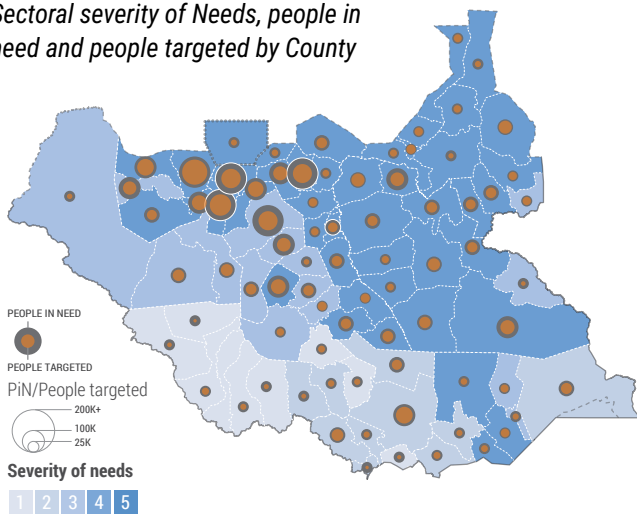


Thank you for bringing all these things here to support us. This morning, I was hungry and cold, now, I have received food items, blankets, a container for water..... I am so grateful to you. My family will sleep well tonight for the first night in a long time.

- 26 year old mother with 2 small children displaced to Malakal town following violence

### 3.7 Nutrition

Sectoral severity of Needs, people in need and people targeted by County



**Needs:** South Sudan faces a grave nutrition situation affecting its most vulnerable children and women. The 2023 FSNMS and SMART survey indicate that national Global Acute Malnutrition (GAM) levels surpass the WHO's 15 percent emergency threshold. This places 2.5 million individuals at risk of acute malnutrition in 2024, with 46 out of 79 counties exceeding the threshold. Contributing factors to this crisis include high food insecurity, with an estimated 5.8 million people facing acute food insecurity, inadequate access to safe water and sanitation, affecting over 50 percent of the population, and elevated child morbidity rates as a result of diseases such as diarrhoea, malaria or upper respiratory infections. Other factors include concerns over GBV and poor child feeding and care practices, with only 4 percent of children receiving the required nutrition. Furthermore, multiple deprivation analysis identifies 18 counties grappling with severe deprivation, further exacerbating the malnutrition crisis.

**Response:** The Nutrition cluster's primary goal is to deliver emergency nutrition assistance to 1.8 million children and women, collaborating with other clusters, including FSL, Health, Protection, WASH, and Education, to provide comprehensive multi-sectoral interventions. Nutrition sites will offer integrated services for malnutrition prevention and treatment. A people-centered approach will be adopted, fostering collaboration with other clusters to ensure safe, equitable, and dignified access to a comprehensive package of essential services. This may include CVA to benefit nutritionally vulnerable children and women.

Recognizing the importance of the humanitarian-development-peace nexus and localization, the cluster is dedicated to strengthening the capacity of communities and government personnel at the sub-national level. The goal is to foster resilience and advocate for substantial, long-term investments in addressing the root causes of malnutrition. The use of community nutrition volunteers and community platforms will be promoted to extend multi-sectoral services to households and communities.

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
2.5M	1.8M	\$209.9M



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Given the challenging context of reduced humanitarian funding and escalating needs, the cluster remains committed to ensuring the efficiency of its efforts. This includes optimizing partnerships, rationalizing the number and types of sites per county, and refining staffing per nutrition site. Integrating health and nutrition service delivery at mobile and static sites is a critical component of this strategy, along with ongoing monitoring to identify insecure and inaccessible areas that require rapid response mechanisms to enhance the timeliness of life-saving services.

Different strategies will be employed based on county priority. Counties facing severe deprivations and high levels of GAM will use diverse nutrition products for severely and moderately malnourished children. A new approach to managing waste will be implemented in counties with moderate deprivations and malnutrition rates. Counties with lower levels of deprivation and malnutrition will transition towards local government service provision, focusing on children with severe acute malnutrition (SAM) and high-risk moderate acute malnutrition (MAM).

**Monitoring:** The Nutrition cluster employs a multifaceted monitoring approach, combining field visits, routine data collection through the Nutrition Information System (NIF) and 5Ws, and surveys to understand and address the needs of affected populations. SMART surveys in priority areas gauge malnutrition prevalence and related factors. Biannual FSNMS surveys provide insights into acute malnutrition, service coverage, maternal, infant, and young child nutrition practices, and malnutrition drivers. Partners conduct mass mid-upper arm circumference screenings. Collaboration with inter-sector/multi-sector assessments enhances effectiveness.

The detailed cluster strategy can be found here [bit.ly/3SSDXNS](https://bit.ly/3SSDXNS)

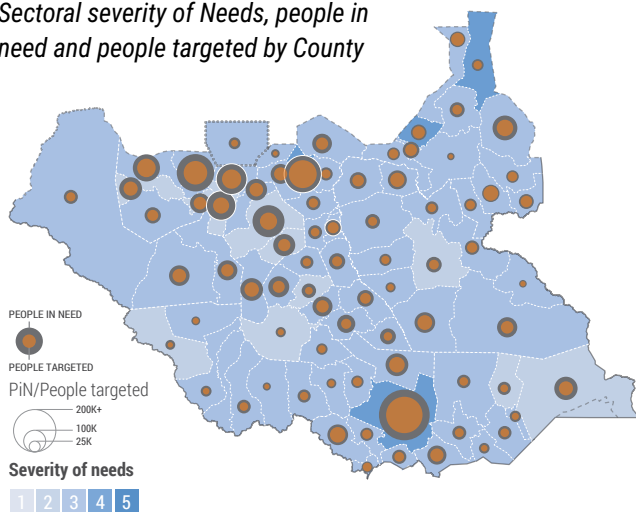


My little girl was sick and began to get thin. When they treated her infection, she got better, but was still thin. The nutrition team here helped her and look at her now playing and well.

- 31 year old mother of 3 year old girl, Naivasha IDP camp, Wau

### 3.8 Protection

*Sectoral severity of Needs, people in need and people targeted by County*



**Needs:** Prolonged conflict, insecurity, and climate change have had profound impacts on vulnerable populations in South Sudan. The Protection cluster's Protection Risk Assessment (PRA) conducted in August 2023 highlighted that GBV is a pressing issue with alarming prevalence rates. The 2023 ISNA findings also underscored the urgency for interventions focusing on GBV prevention, risk mitigation, and response. Children face significant risks of violence, exploitation, and abuse due to conflict, forced recruitment, displacement, family separation, and limited access to education, nutrition, and health care. Explosive hazards covering over 16 million square meters of land—particularly in Greater Equatoria, Upper Nile, and Jonglei pose a significant threat, limiting access to crucial humanitarian services. In 2024, conflict and severe climate events, including flooding and drought-like conditions, are expected to trigger additional displacement. The upcoming national election will likely bring a risk of election-related violence and instability. Conflict in Sudan has negatively affected South Sudan's economy, resulting in higher food and fuel costs and risks for sub-national violence. Diminishing humanitarian funding may further hinder access to vital services, exacerbating the existing vulnerabilities.

**Response:** The Protection cluster's comprehensive approach aims to address the multifaceted protection needs. This includes providing life-saving protection services such as monitoring, identifying, and referring people with protection needs to specialized psychosocial support, legal aid, shelter, and other targeted assistance for vulnerable individuals. The cluster's protection strategy aligns with the HRP strategic objectives (SO) to address complex humanitarian challenges in South Sudan. Under SO1, the cluster aims to reach more than 1.7 million people with life-saving and specialized protection services. The General Protection Area of Responsibility (GP AoR) targets 571,000 individuals, offering protection assistance through static or mobile means. The Child Protection (CP) AoR plans to provide life-saving services to 71,000 children, including case management and family tracing.

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
5.5M	2.2M	\$120.9M



The digital version of this page is available on Humanitarian Action [bit.ly/3sLyygQ](https://bit.ly/3sLyygQ)



Additionally, the CP AoR intends to offer community-based mental health and psychosocial support to 253,000 children and caregivers. The GBV AoR aims to reach 546,700 beneficiaries through GBV prevention, risk mitigation measures, life-saving specialized response services, and effective referrals. Additionally, the cluster will assist 420,000 South Sudanese returnees with life-saving protection services.

Under SO2, more than 288,000 people will be assisted with vital protection services, including support on issues related to housing, land, and property (HLP). This involves conducting key informant interviews, establishing or strengthening dispute resolution mechanisms for HLP issues, and training local institution staff to operate within these mechanisms. The GBV AoR and the CP AoR also aim to reach thousands of individuals with awareness activities and training for community leaders, humanitarian staff, and government personnel. The Mine Action (MA) AoR plans to reach 507,000 people with Explosive Ordnance Risk Education. Under SO3, the cluster plans to reach 10,000 community members and staff with training on GBV and child protection (including social norms change interventions) to achieve long-term effects. Some 250 community-based mechanisms will be strengthened to support PSEA, peacebuilding, and resilience activities. The plan includes strengthening child protection referral pathways across 79 counties.

**Monitoring:** The cluster will monitor the response through 5Ws, the Protection Monitoring System, and periodic protection risk assessments at the country level. The response will be continuously monitored in conjunction with state-level reports, recommendations, and assessments provided by the Protection Monitoring Working Group. External reports will consistently issue recommendations and updates, including protection analysis updates, monthly spotlights, advocacy notes, and ad hoc situation reports.

The detailed cluster strategy can be found here [bit.ly/3utmVW1](https://bit.ly/3utmVW1)



I have lost everything, including my dignity. Now, someone has to provide food for my family.

- Father of 3 on arrival from Sudan

## Child Protection

Data from the Protection Monitoring Working Group indicates that the situation in South Sudan constitutes a crisis primarily focused on child protection. The extended conflict, coupled with recurring climate-related challenges, has significantly affected 2.5 million boys and girls, exposing them to various forms of abuse, including recruitment, displacement, separation from caregivers, and exploitation, with child neglect and sexual violence among the concerning issues. While the needs across population groups remain similar, the CP AoR will focus on areas significantly affected by different types of child abuse, particularly areas hosting children fleeing the Sudan crisis.

Key focus areas entail providing psychosocial and mental health support, family tracing, case management for children, and community engagement to raise awareness about services guided by Child Protection in Emergencies (CPiE) minimum standards. The CP AoR aims to reach 29,000 children and caregivers with immediate life-saving and specialized protection services, emphasizing the reunification of unaccompanied and separated children. Moreover, it plans to enhance knowledge on accessing services and CPiE standards among 7,000 community members, facilitated by cash-based interventions, mobile units, and capacity-building of service providers.

To ensure the effectiveness of interventions, monitoring will occur through the 5W matrix, contributing to the monthly Protection cluster dashboard. The AoR will create a dedicated dashboard for more tailored monitoring. Regular situation reports will give better understanding on impacts, progress, and gaps. Moreover, the quality of case management for child survivors will be monitored using the Child Protection Information Management System, which will be the basis for ad hoc analysis (case conferences) and monthly strategic meetings (case management task force).



**We are so hopeful because now we are here, away from the guns**

- 15 year old boy, Renk

## Gender-Based Violence

Prolonged conflict and climate change have driven a considerable segment of South Sudanese into poverty, resulting in increased reliance on humanitarian aid. GBV is widespread, particularly affecting women and girls due to entrenched societal norms and practices that violate their rights. Intimate partner violence and conflict-related sexual violence are prevalent due to the prolonged nature of the conflict. A national prevalence study on violence against women and men conducted in 2022 revealed that 58 percent of women and girls experienced at least one form of GBV over the last 12 months. There is an urgent need for GBV prevention, risk mitigation, and scale-up of response services in 25 priority counties.

The GBV AoR will prioritize three strategic response priorities: addressing harmful social norms and systemic gender inequality to prevent GBV, integrating GBV into humanitarian action of clusters, and enhancing access to coordinated, multi-sectoral specialized response services. GBV coordination will be strengthened to bridge gaps and avoid duplication. Qualitative and quantitative data availability will be improved for evidence-based programming and advocacy.

Priority interventions for GBV prevention will include engaging men and boys through accountable practices, conducting "start, awareness, support, action" programs, and the Community Cares Programme. It includes economic empowerment, livelihood support, awareness sessions, and PSEA. Key interventions for GBV risk mitigation will involve collaborating with all clusters to integrate GBV into their programs, conducting multi-sectoral safety audits, providing dignity kits, distributing fuel-efficient stoves, and offering cash assistance. In the GBV response area, the AoR focuses on priority interventions, including GBV case management, psychosocial support, legal aid, safety and security, safe houses, women and girls' friendly spaces, and effective referrals for GBV survivors. Response approaches will utilize both static and mobile service delivery methods, involving the provision of front-line services, cash assistance, and in-kind support, with immediate response efforts prioritizing counties with severity classification levels of 3 and 4 as determined by the 2024 needs analysis. The GBV AoR aims to reach 546,700 beneficiaries, including 45 percent IDPs, 35 percent returnees, and 20 percent resident communities through GBV program interventions. The response will require \$36.45 million, including for the Phase 1 response to the returnees from Sudan.

The GBV response will be monitored through the 5W reporting mechanism to track the delivery of GBV interventions and their locations. Data analysis from the GBV Information Management System (GBVIMS) will inform program adjustments. Critical indicators for monitoring the GBV response plan include the number of people reached with GBV prevention initiatives, survivors receiving case management and referral services, beneficiaries of women and girls' friendly spaces, trained staff and community workers on GBV topics, individuals supported with legal aid and women and girls receiving dignity kits. Additionally, trends in reported GBV incidents will be tracked through GBVIMS. Regular field monitoring visits and GBV service mapping will be conducted to assess service availability and to identify gaps. The GBV AoR plays a crucial role in guiding partners toward a result-based management approach for effective program monitoring and evaluation.

The detailed GBV strategy can be found here [bit.ly/46Btp93](https://bit.ly/46Btp93)



**I don't feel safe, even here. I worry about what will happen during the the nights**

- 29 year old displaced mother following violence in the Malakal POC

## Mine Action

Landmines, cluster munitions and other ERW potentially contaminate an estimated 16 million square meters of land in South Sudan. The highest levels of contamination are located in the Greater Equatoria region (especially on highly productive agricultural land and along main supply routes) and in the Upper Nile and Jonglei states. These hazards severely affect critical activities for communities, inhibiting their access to essential services, including water, education, and health care. Furthermore, these remnants limit humanitarian organizations' efforts to provide life-saving assistance and protection, especially in conflict-affected areas. To ensure the safety and security of the population, it is essential to prioritize clearing hazardous areas, conducting comprehensive surveys, and providing tailored education and awareness to communities, especially the most vulnerable groups, to alleviate these threats.

Although the needs of different population groups are similar, IDPs and returnees are at heightened risk as they may lack local knowledge of contaminated areas and may traverse and settle in marginal and hard-to-reach lands that have previously not been assessed. At present, nearly 400,000 returnees, primarily South Sudanese, have sought refuge in South Sudan due to conflicts in neighbouring Sudan. Eastern Equatoria is also a primary destination for returnees from Uganda.

All community members, especially IDPs and returnees, require increased awareness regarding the dangers of ERW through the delivery of Explosive Ordnance Risk Education (EORE). The EORE must be tailored to be sensitive to gender, age, and contextual factors, particularly for children, as they make up the majority of casualties. The widespread presence and circulation of small arms and light weapons remain a concern, calling for comprehensive awareness programs to mitigate associated risks.

There is a need to assess further and conduct comprehensive countrywide surveys, particularly in regions such as Upper Nile and Jonglei states, where access challenges persist due to security concerns and past flooding events. There is also a need to clear high-impact areas, such as potential camps and resettlement locations. In light of the prevalent food insecurity, removing explosive ordnance on agricultural lands is also critical to enable cultivation and ensure safe passage for displaced individuals.



**I know you cleared this area for shelters, but now we can play football on it.**

- 9 year old boy playing with his friends in Malakal POC site.

## Housing, Land and Property (HLP)

HLP remains a critical protection concern in South Sudan, particularly for 1.68 million vulnerable people who need HLP services. The outbreak of the Sudan crisis in mid-April resulted in an influx of people seeking safety from the conflict. The regions most affected by HLP-related concerns are Central Equatoria, Upper Nile, and Unity states, where the demand for HLP assistance is among the highest. Across the country, HLP challenges have surged, particularly in areas of return due to illegal occupation, forced eviction, and grabbing of properties and land. The absence of dispute resolution mechanisms only compounds the risk of violence, potentially escalating community conflicts.

Violation of HLP rights is associated with weak HLP legal frameworks and institutions, inadequate implementation of HLP policies, repressive cultural norms coupled with a lack of documentation, limited knowledge of HLP rights, and lack of legal aid services. The vulnerability of women and girls to GBV contributes to the violation of their HLP rights. Climate change and environmental challenges significantly affect HLP rights, especially for populations in flood-affected areas, where recurring climate change-induced displacement compounds shelter needs in addition to conflict over natural resources.

There are similarities in the needs of different populations—returnees, IDPs, refugees, and resident communities. However, the lack of local HLP knowledge among resident communities, IDPs, and returnees can lead to community conflicts over settlements on disputed land. The HLP AoR will address HLP issues in South Sudan, using multi-sectoral, people-centered, conflict-sensitive approaches to address individual vulnerabilities and needs.

Priority interventions for the HLP AoR will include advocacy for HLP policy reform at national and state levels through roundtable dialogues and bilateral engagements with the relevant stakeholders; capacity-building of HLP actors (Government ministries, NGOs, CSOs, academia, media, etc.); assessments and research; provision of legal aid, including the security of tenure documentation; and provision of technical guidance in areas of due diligence and HLP in emergency. The AoR will fast-track HLP policies and coordinate HLP actors on lessons learned and knowledge-sharing.

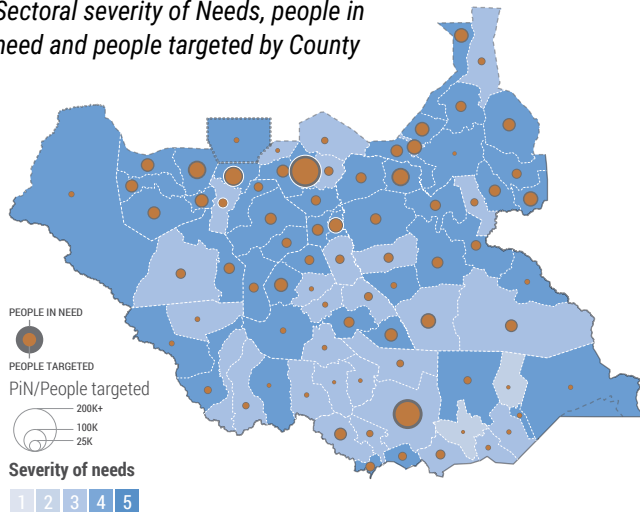


**I want to go home, but all the men in my family were killed. The land is in their name. I don't know how to claim the land of my father.**

- 43 year old displaced woman who wishes to return to Unity State

### 3.9 Shelter and Non-Food Items

Sectoral severity of Needs, people in need and people targeted by County



**Needs:** The Shelter and Non-Food Item (SNFI) cluster estimates that 2.1 million people, especially IDPs, will need urgent shelter and non-food items (NFIs) support in 2024. The cluster will target 1.4 million people, primarily in Upper Nile, Jonglei, and Unity states where communal violence, floods, and food insecurity are recurrent challenges.

The ongoing Sudan crisis and the upcoming elections are likely to increase needs in some states. Following its 2023-2025 strategy, the cluster will focus on ensuring shelter and NFIs for 1.4 million conflict- and disaster-affected individuals, improving housing conditions for 400,000 people, and enhancing the quality of assistance through feedback mechanisms. Additionally, it considers potential influxes of newly affected populations and their unique requirements, especially if they settle in camp-like settings. Considering the challenges in the supply chain and procurement processes, there is a need to pre-position contingency stocks in strategic locations to expedite responses.

**Response:** The SNFI cluster will target 1.4 million people based on its vulnerability criteria, with 25 percent being residents, 26 percent returnees, and 49 percent IDPs. The cluster strongly emphasizes the geographical prioritization of its response, focusing on areas with the most severe needs. The distribution of NFIs and shelter materials targets the most vulnerable due to sudden displacement, evictions, loss of household items, and protracted displacement. These include households headed by women, children, the elderly, persons with disabilities, and individuals with limited community connections. The cluster's activities are deeply rooted in accountability, community participation, and ownership, with a keen focus on persons with disabilities, women, and children and potential protection risks. Post-distribution monitoring (PDM) is integral to implementation, ensuring that services are efficient and holistic. Environmental considerations are also integrated, emphasizing sustainable materials and construction techniques to prevent environmental degradation.

Regarding response modalities, 70 percent of the planned response will be provided through an in-kind modality, while

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
2.1M	1.4M	\$46.8M



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the remaining 30 percent will involve CVA. In locations without functional markets, in-kind assistance will be deployed. However, CVA or a hybrid approach will be utilized where markets can support the intervention, and it aligns with protection guidelines.

In terms of logistics, the cluster manages a pipeline that procures and pre-positions stocks across the established hubs to facilitate front-line response. Mechanisms for stockpiling and pre-positioning will be further strengthened to ensure a timely and effective response. Collaboration and integration with other clusters is vital. The cluster will continue to conduct joint needs assessments and work closely with the Protection cluster and government authorities to enhance HLP issues, gender mainstreaming, addressing GBV, and the inclusion of persons with disabilities. Cooperation with the CCCM and WASH clusters will ensure the effective planning and maintenance of IDP sites and community infrastructure.

**Monitoring:** The SNFI Cluster will maintain rigorous monitoring of shelter needs and responses, utilizing partners' monthly reports, the 5W matrix, and PDM data. PDM helps capture beneficiary concerns, assess risks and barriers, enhance transparency, and evaluate intervention impact. Inter-sectoral and cluster in-depth needs assessments will be conducted to guide the response. The global shelter cluster's performance monitoring tool collects partner feedback to assess the cluster's overall performance and identify areas for improvement, fostering stronger collaboration among partners.

The detailed cluster strategy can be found here [bit.ly/47ur6G6](https://bit.ly/47ur6G6)

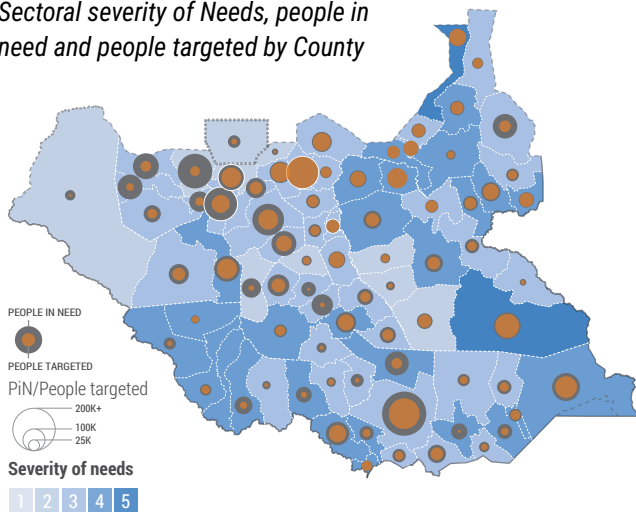


The shelter material I received was good the first year, but now it is raining every day and there are leaks. Cash support would help me rent a place to live with my family. I know places that are safer than here.

- 28 year old woman displaced into Abyei Town

### 3.10 Water, Sanitation and Hygiene

Sectoral severity of Needs, people in need and people targeted by County



**Needs:** Approximately 5.6 million people will require WASH assistance in 2024. The situation is particularly severe in Manyo, Upper Nile State, where the FSNMS data indicates alarming statistics of 99 percent of the population lacking access to improved water sources and 96 percent lacking improved sanitation facilities. More than 60 percent of women and girls in Manyo County feel unsafe when fetching water. Data also indicates that 28 counties have extreme WASH conditions while 40 are in severe conditions, often coinciding with high malnutrition rates. A significant portion of the population (41 percent) lacks access to improved water sources, and 37 percent need to travel over 30 minutes to reach their primary water source, posing particular hardships for persons with disabilities and making women and girls more vulnerable to GBV. Access to sanitation is even more limited with prevalent open defecation, as 88 percent of the population lacks access to improved latrines, according to the 2023 FSNMS data. The compounding challenges of displacement, insecurity, flooding, economic difficulties, and the influx of returnees from Sudan further strain the already limited resources.

**Response:** In 2024, the WASH Cluster's strategy will focus on integrated responses, particularly in high-priority counties experiencing acute vulnerabilities in both WASH and malnutrition, often compounded by high WASH-related GBV. These high-priority counties include Fangak, Fashoda, Rubkona, Melut, Panyikang, Luakpiny/Nasir, Leer, Canal/Pigi, Ayod, Cueibet, Akobo, Manyo and Pibor. Partners will collaborate with nutrition counterparts to extend sustainable access to safe WASH promotion in these communities and nutrition facilities.

The cluster aims to respond swiftly to sudden-onset disasters and will maintain integration with the health cluster to prevent WASH-related epidemics. Infection prevention and control measures are pivotal in both health facilities and communities. An immediate phase, lasting at least three months, will prioritize alleviating the suffering through minimal hardware interventions, rehabilitation of existing

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
5.6M	2.6M	\$102.8M



The digital version of this page is available on Humanitarian Action [bit.ly/3RfTYwg](https://bit.ly/3RfTYwg)



systems, water quality testing, distribution of WASH NFIs, and promoting safe hygiene practices. The core pipeline and rapid response teams will be used to respond swiftly to emergencies. Flood-prone or flood-affected areas will receive resilient WASH infrastructure. Rehabilitation projects will only be approved if flood-resilient designs are specified, with Manyo County in Upper Nile as a top priority due to catastrophic WASH infrastructure conditions. For IDP sites, an exit strategy involving semi-permanent solutions will be initiated within six months of site establishment, aiming for a complete exit within two years with a maintenance handover to IDPs. The cluster will support the response to returnees from Sudan in transit centers, addressing their immediate WASH needs.

Safety audits to address WASH-related GBV are compulsory in long-term projects. Disability inclusion is also mandatory, ensuring that individuals with disabilities have access to WASH services. These measures will contribute to a comprehensive and responsive approach to WASH needs in South Sudan, including the challenges posed by conflicts, displacement, and disasters.

**Monitoring:** In 2024, the WASH Cluster will enhance its monitoring efforts through the 5W reporting mechanism, monthly dashboards, and gap analysis to track HRP progress. A new accountability and quality assurance module, already piloted, will be integrated into the monitoring framework. This module includes questions on the quality of outputs, outcomes, and beneficiary satisfaction. Furthermore, the cluster will intensify project-level monitoring to identify any deviations from cluster standards, guidelines, and requirements. These measures will bolster accountability, quality, and compliance within the WASH cluster's operations.

The detailed cluster strategy can be found here [bit.ly/3N042H1](https://bit.ly/3N042H1)



Did you know that I can wash my hands well because of this water?

- 5 year old boy at a hand washing facility in Naivasha camp, Wau, Western Bahar al Ghazal



# Part 4:

## Refugee Response Plan

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
0.45M	0.45M	\$400M

*At the time of issuing the HNRP, the RRP was being finalized. The PIN, target and requirements used here might slightly change when actual figures are finalized.*

**Needs:** As of October 2023, South Sudan hosts around 350,000 refugees and asylum-seekers, of whom 93 percent are Sudanese and the rest are of other nationalities. About 98 percent of refugees reside in over 11 camps and settlements across the country, with the remaining 2 percent in urban locations. Since the onset of the conflict in Sudan in April 2023, over 40,000 new refugee arrivals have been recorded. In 2024, a further 80,000 refugees are anticipated, mainly from Sudan.

People forced to flee Sudan face multiple protection risks during their flight as they seek safe pathways into South Sudan, arriving exhausted after days of travel. Upon arrival, refugees and asylum-seekers require immediate emergency assistance before onward travel to refugee camps or settlements. Life-saving assistance includes food, WASH, vulnerability and health screening, shelter, vaccinations for children, and psychosocial support. In 2023, vulnerability screening revealed one or more vulnerable individuals in every third household. Existing refugee camps and settlements will require expansion to accommodate new arrivals.

An increase in the population of refugee camps and settlements will limit the availability of essential services and assistance, including education, health, shelter, and WASH, exacerbating protection risks for the most vulnerable and leading to the deterioration of the well-being of the refugee population. A significant increase in the population will place additional pressure on resident communities, which require further support to promote peaceful coexistence.

**Response:** The Refugee Response Strategy ensures that the critical needs of refugees and asylum-seekers are met with context-specific and targeted interventions in close collaboration with the Government and other partners to maintain an enabling protection and solution-oriented environment. The strategy will be premised on the 'whole of government' and 'whole of society' approach to maximize the limited resources.

The Refugee Response Plan includes two key strategic objectives:

- Strengthening access to international protection and life-saving emergency services and

- Supporting the resilience of refugees through development-oriented solutions in partnership with development and peacebuilding partners.

Partners have adopted a protection-centered approach in providing services and assistance to new arrivals from Sudan. The Government of the Republic of South Sudan will grant unimpeded access to its territory to people fleeing Sudan and maintain inclusive policies. Partners will support the Government in strengthening the civilian character of asylum, conducting border and protection monitoring, improving conditions of transit centers, ensuring proper documentation, providing emergency and life-saving services, assisting with onward transportation to refugee locations, and other multi-sectoral assistance.

Existing refugee camps and settlements will be expanded to accommodate new arrivals while increasing the capacity of the essential service providers to ensure humanitarian standards. This includes the provision of shelter, food, WASH, and health care. Emphasis will be placed on safeguarding the rights of the most vulnerable, including women, children, the elderly, and persons with disabilities. This will be achieved by preventing and responding to protection risks such as GBV and other forms of abuse and ensuring access to legal documentation, pathways, and systems.

Increased access to education opportunities for children and youth will promote self-reliance and long-term stability. Livelihood programs will be crucial for income-generating opportunities and reducing dependency on humanitarian aid. Partners will foster social cohesion and peaceful coexistence between refugees and resident communities.

UNHCR and its partners will promote the sustainable integration of refugees through enhancing policy and legal frameworks and supporting refugee resilience grounded on the humanitarian, development, and peace nexus. Partners will actively aim to shift the current assistance approach to empower refugees to fulfill their needs by building their resilience and community capacities.

**Monitoring:** The Refugee Response Plan includes a robust monitoring framework outlining key objectives, indicators, and data collection methods. Within the refugee coordination model, working groups will analyse the monitoring data to address gaps, and feedback mechanisms will guide response priorities. Data summarized from indicators will promote accountability and transparency, and partner training will improve data collection and reporting. Needs assessments and protection monitoring will consistently inform the response.

**Please refer to the regional Refugee Response Plan for more details.**

# Part 5:

## Abyei Administrative Area Response

### Summary of needs

The Abyei region remains a contested area between Sudan and South Sudan, with its political future and final status still unresolved. A proposed joint administration from a 2011 agreement still needs to be established, with separate administrations appointed by both Juba and Khartoum struggling to provide basic services. The region grapples with frequent violence from armed elements, climate change-induced disasters, and economic hardships driven by high inflation in Sudan and South Sudan. The international community serves as the primary provider of life-saving assistance and protection, although access challenges, limited resources, and unequal aid distribution persist.

In 2024, given the conflict in Sudan and strained resources, coordinated humanitarian efforts between South Sudan and Sudan will remain challenging. Humanitarian assistance will be extended from both countries to cover Abyei's entire area, accommodating around 280,000 individuals in need of humanitarian assistance. Conflict, loss of livelihood, and displacement compounded by the influx of returnees from Sudan, will continue to increase vulnerability in 2024. Climate change exacerbates these issues, with floods and livestock diseases disrupting the local economy and increasing food insecurity.

Humanitarian efforts in Abyei aim to alleviate suffering, reduce dependency on aid, and cover health, nutrition, WASH, agriculture, livestock, protection, and education. It considers conflict dynamics, returnees, refugees, climate, seasonal migration, and livestock's role in the local economy. Humanitarian and recovery agencies will focus on revitalizing economic activities and enhancing income-generating opportunities to improve livelihoods. This comprehensive response seeks to address the complex and interconnected challenges facing Abyei's population.

### Strategic Objectives

- Provide timely, life-saving assistance to crisis-affected vulnerable people.
- Enhance access to essential services and livelihoods for vulnerable communities.
- Strengthen emergency preparedness across sectors, including advocacy, contingency planning, and addressing logistical challenges.
- Facilitate a comprehensive humanitarian response by engaging with state governments, administrative authorities, traditional leaders, and non-state actors to secure the safety of humanitarian teams and facilitate cargo flights into Abyei.

### Response priorities

Response priorities will include life-saving humanitarian services to reduce morbidity and mortality by increasing access to quality health care, and nutrition interventions and strengthening health facilities. Nutrition response will aim to mitigate malnutrition risk in vulnerable populations through various programs, including treatment of acute malnutrition and infant and young child feeding support. WASH assistance will focus on improving access to safe drinking water and adequate hygiene and sanitation practices, particularly in areas affected by displacement and migration to prevent conflicts over shared resources and disease outbreaks. Protection will be mainstreamed in all interventions, with a focus on women, children, and the most vulnerable, while addressing the risks associated with landmines and ERW. In addition, partners will establish services for protecting girls and women, develop referral pathways, and enhance awareness and capacity among community leaders and partners. Education partners will focus on increasing access to primary education and vocational training for crisis-affected children. FSL interventions will provide food to vulnerable populations in crisis and extreme food needs. Some assistance will support livelihoods during the dry season and veterinary health services. Partners will promote synergies between humanitarian assistance, development, and peacebuilding efforts through complementarity between various initiatives, including the UN joint program and UNISFA projects.

# Part 6: Monitoring Framework

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The response plan's monitoring framework is available on [Humanitarian Action \(bit.ly/3uvt62j\)](https://bit.ly/3uvt62j). The monitoring framework includes the complete set of indicators attached to strategic objectives, specific objectives, cluster objectives and cluster activities.

# Part 7: Annexes

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The digital version of this response plan is available on [Humanitarian Action \(bit.ly/3sPouDF\)](https://bit.ly/3sPouDF)

# End notes

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9. [Sudan Emergency, Regional Refugee Response Plan](#), 4 September 2023
10. South Sudan: IPC Acute Food Insecurity and Acute Malnutrition Analysis September 2023 - July 2024: Published on November 6, 2023 - South Sudan | ReliefWeb
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16. Ibid
17. [Cluster activity prioritization table](#)
18. [South Sudan Cash and Voucher Dashboard](#), Cash Working Group, 2023

# How to Contribute

## Contribute to the Humanitarian Response Plan

To see the country's humanitarian needs overview, humanitarian response plan and monitoring reports, and donate directly to organizations participating to the plan, please visit:

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The South Sudan Humanitarian Fund (SSHF) is a country-based pooled fund. The SSHF is a multi-donor humanitarian financing instrument established by the Emergency Relief Coordinator (ERC) and managed by OCHA at the country level under the leadership of the Humanitarian Coordinator (HC). Donor contributions to each CBPF are un-earmarked and allocated by the HC through an in-country consultative process.

Find out more about the South Sudan Humanitarian Fund by visiting the website:

[www.unocha.org/south-sudan/about-ss-hf](http://www.unocha.org/south-sudan/about-ss-hf)

For information on how to make a contribution, please contact:

[ochasshf@un.org](mailto:ochasshf@un.org)

### PHOTO ON COVER

MALAKAL, UPPER NILE STATE, SOUTH SUDAN

A returnee woman who fled violence in Sudan standing in temporary shelter in a transit site.

Photo: OCHA/Alioune Ndiaye

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# HUMANITARIAN NEEDS AND RESPONSE PLAN SOUTH SUDAN

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[fts.unocha.org/countries/211/](https://fts.unocha.org/countries/211/)

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