

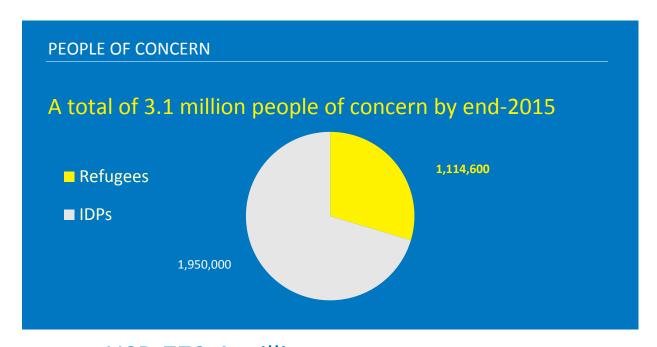




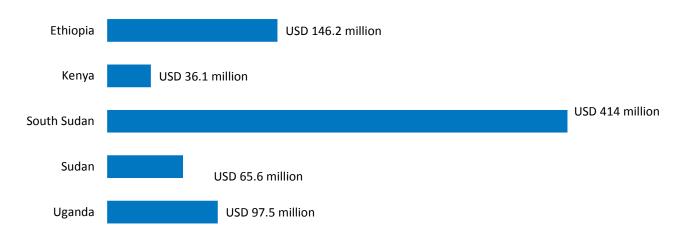
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AT A GLANCE



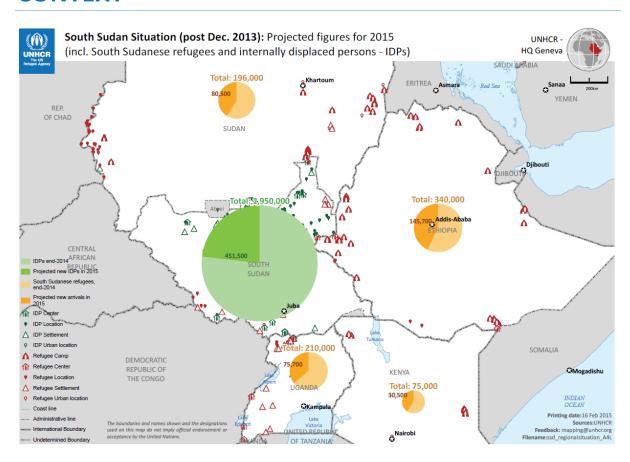
A total of USD 779.4 million in financial requirements* for the South Sudan Situation, including:



N.B. The initial focus of this supplementary appeal was on South Sudanese refugees and internally displaced South Sudanese (IDPs) whose displacement was the result of the conflict that began in South Sudan in December 2013. The financial requirements presented in the original supplementary appeal amounted to USD 587.3 million. The present revision includes the needs of all groups of people of concern to UNHCR who are currently affected by the South Sudan situation. The Financial Summary table on page 8 has therefore been adjusted to integrate the figure of USD 192 million, the ExCom-approved requirements for South Sudan for 2015, within the consolidated South Sudan situation budget of USD 414 million. The current overall financial requirements for the South Sudan situation therefore amount to USD 779.4 million.

^{*} This total includes USD 2.6 million for headquarters and regional coordination, and USD 17.4 million for support costs (7%).

CONTEXT



^{*} In addition to the people of concern to UNHCR presented in this map, at the end of 2014, South Sudan was itself hosting almost 247,000 refugees from other countries in the region. The projected new arrivals in 2015 number some 46,600 which brings the total 2015 planning figure for refugees in South Sudan to 293,600.

Introduction

The inter-agency South Sudan Regional Refugee Response Plan (RRP) for 2015 was issued in December 2014. Subsequently, UNHCR's requirements were presented in detail by operation in the original version of this supplementary appeal. Since the establishment of the budgets on which the RRP and the supplementary appeal were based, it has become clear that the scope of the needs of people affected by the emergency inside South Sudan has evolved considerably. While the initial focus was on South Sudanese refugees and internally displaced people in South Sudan fleeing the violence that began in December 2013, more than a year later, it is evident that many sectors of the population living inside South Sudan have equally critical needs: they include groups of refugees who had sought refuge in South Sudan prior to the outbreak of conflict at the end of 2013, as well as Sudanese refugees who continue to seek refuge from fighting in South Kordofan, and also people at risk of statelessness.

To date, a total of over 2 million people have been displaced inside and outside South Sudan as a direct consequence of the conflict that began in South Sudan in December 2013. As of 31 December 2014, some 1.5 million South Sudanese had been displaced internally, and 500,000 persons had sought asylum in the neighbouring countries of Ethiopia, Kenya, Sudan and Uganda. Currently, South Sudan is also hosting over 255,000 refugees.

In an effort to secure the financial resources required to respond to this emergency, UNHCR launched a Supplementary Appeal for the South Sudan situation in January 2014 to support internally displaced persons (IDPs) in South Sudan, and refugees in Ethiopia, Kenya, Sudan and Uganda.

For the refugee response, an inter-agency South Sudan Regional Refugee Response Plan (RRP) was released in March 2014 to cater for the needs of the refugees in the neighbouring asylum countries from January to December 2014. The dramatic evolution of the situation in South Sudan led to the upward revision of planning figures to almost double the original estimate and a revised RRP was launched in July 2014.

By December 2014, one year after the eruption of the conflict, the situation was no closer to peace. Based on recent trends and the likely escalation of insecurity with the onset of the dry season in early 2015, the new outflows of South Sudanese to neighbouring countries in 2015 are projected to total 270,000 individuals, while an estimated 450,000 South Sudanese will be internally displaced in their own country. Thus, by the end of 2015, the total number of refugees having fled South Sudan since the conflict began is forecast to reach 821,000, while the number of IDPs could reach 1.95 million.

In parallel, the refugee influx from Sudan into South Sudan is also expected to increase. UNHCR anticipates that the total number of refugees in South Sudan will increase to almost 294,000 by the end of 2015.

In this context, the 2015 inter-agency RRP was elaborated through a consultative process coordinated by UNHCR, with the involvement of UN agencies and non-governmental organization (NGO) partners, and launched on 17 December 2014 in Nairobi. Based on planning figures agreed upon by all partners, the 2015 RRP provides the framework for inter-agency interventions to assist and protect South Sudanese refugees.

Further to the release of the 2015 RRP, this UNHCR Supplementary Appeal presents UNHCR's planned response to the emergency from January to December 2015. The Appeal covers the needs of South Sudanese refugees in host countries, as well as IDPs within South Sudan and all affected populations within South Sudan including the Sudanese refugees, other (urban) refugees and people at risk of statelessness. It is designed to enable UNHCR to boost its response to the most critical operational gaps identified in the four asylum countries. In South Sudan, UNHCR will cater to the needs of the most vulnerable IDPs, focusing on delivering protection and camp management and coordination activities.

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¹ Please note that the refugee figures in the neighbouring countries have been updated from the population figures presented in the Regional Response Plan for the South Sudanese Refugee Emergency (December 2014), which used figures as of 24 November 2014. All population figures used in the current appeal, unless stated otherwise, are as of 31 December 2014.

Population data

South Sudanese refugees and IDPs (post-Dec. 2013) and all other affected populations* in South Sudan

	TOTAL DISPLACED POPULATION as at 31 December 2014	PLANNED ASSISTED POPULATION by 31 December 2015
Ethiopia		
South Sudanese refugees	194,300	340,000
Kenya		
South Sudanese refugees	44,475	75,000
Sudan		
South Sudanese refugees	115,451	196,000
Uganda		
South Sudanese refugees	134,271	210,000
South Sudan		
Refugees	246,952	293,600
IDPs	1,498,500	1,950,000
TOTAL		
South Sudanese refugees, IDPs and all other affected populations in South Sudan	2,233,949	3,064,600

^{*} UNHCR also pursues efforts to prevent statelessness as a result of the independence of South Sudan in 2011. The Office will assist people at risk of statelessness to confirm their identity and South Sudanese nationality through civil status documentation and/or information programmes.

Financial summary (USD)

UNHCR's original 2015 Executive Committee (ExCom) approved budget for the South Sudan Situation amounted to USD 322 million. To address the needs of the people of concern who have been displaced as a result of the recent violence in South Sudan, UNHCR established a supplementary budget for the requirements presented in this appeal, amounting to USD 265.3 million. In March 2015, it was decided to include in this Appeal the requirements for all people of concern affected within South Sudan. The total revised 2015 requirements for the South Sudan Situation were initially set at USD 587.3 million (as of 1 January 2015). However, with the inclusion of support activities for all persons of concern in South Sudan, the budget for the country now amounts to USD 414 million (excluding headquarters and regional coordination and 7% support costs). This brings the overall South Sudan Situation budget to some USD 779.4 million.

It should be noted that this supplementary appeal uses UNHCR's Results Framework, which is different from the sectoral approach used in the Inter-Agency Regional Refugee Response Plan (RRP). For this reason, there may be discrepancies in the budget for some of the activities. However, the overall country budget and total appeal amounts remain identical in the two documents.

OPERATION	REVISED	SOUT	H SUDAN SITUATIO)N	TOTAL REVISED
	EXCOM BUDGET excluding the South Sudan Situation	ExCom approved budget for the South Sudan Situation	Additional Requirements	Total	REQUIREMENTS FOR 2015
Ethiopia	161,786,814	45,093,266	101,067,561	146,160,827	307,947,641
Kenya	215,097,206	29,821,525	6,277,382	36,098,907*	251,196,114
South Sudan	-	342,603,054	71,449,082	414,052,136	414,052,136
Sudan	103,867,385	26,745,227	38,845,248	65,590,475	169,457,860
Uganda	111,336,773	69,777,427	27,728,964	97,506,391	208,843,164
HQs & regional coordination	19,771,753	-	2,613,129	2,613,129	22,384,882
Subtotal	611,859,931	514,040,499	247,981,366	762,021,865	1,373,881,797
Support costs (7%)	-	-	17,358,696	17,358,696	17,358,696
Total	611,859,931	514,040,499	265,340,062	779,380,561	1,391,240,492

^{*} In the 2015 South Sudan Regional Refugee Response Plan, the total UNHCR budget for Kenya amounts to USD 39.3 million. This includes USD 2.6 million for headquarters and regional coordination and USD 0.6 million in support costs (7%).

OVERALL STRATEGY AND COORDINATION

In 2015, South Sudanese refugees will require sustained support in the form of: basic protection services, such as border reception, registration and documentation; access to life-saving and life-sustaining assistance, including food and nutrition, healthcare, shelter and non-food items (NFIs); water and sanitation services; education services; and targeted protection support for the most vulnerable individuals. Interventions carried out during the emergency phase will need to be strengthened and complemented with programmes that respond to the refugees' longer-term needs and enhance their well-being, self-reliance, and resilience.

Refugee **registration** and profiling will continue as a key means to capture profiles, needs and vulnerabilities of the newly arrived populations. This will enable partners to provide targeted responses according to the specific needs of vulnerable persons or identified groups.

Since 15 December 2013, some 35,000 displaced children have been registered as unaccompanied or separated from family in South Sudan and countries of asylum. The large numbers of unaccompanied and separated children require a regional approach to harmonize and strengthen child-friendly programming, including information-management systems and capacity building. Strengthening education services will provide a protective environment and help foster a sense of normalcy for conflict-affected children, as well as facilitating integration and peaceful coexistence. As the situation on the ground continues to deteriorate and the likelihood of returns to South Sudan in the near future remains slim, there is a need to provide quality pre-primary and primary education for all refugee children, building on ongoing efforts by partners. Girls' enrolment remains low among refugees, and only a small proportion of youngsters currently have access to secondary education. Comprehensive education strategies are being developed with special attention to refugee girls and there is a need to increase opportunities for both formal and non-formal post-primary education.

As part of the overall life-saving assistance, **nutrition** services and **food assistance** will continue to be provided to address the significant rate of malnutrition found among new arrivals. Wherever feasible, cash-based interventions will be explored for the provision of food assistance to improve dietary diversity and to provide more dignity and choice for the refugees.

The availability of **shelter** is a major priority and a challenge in all asylum countries. Partners are actively working with local and central host governments and with host communities to identify suitable land to accommodate newly arriving refugees, and to decongest existing settlements and camps.

The hosting communities, home to some of the most vulnerable populations in the countries of asylum, have been the first to take on the added burden of the refugee influxes. The arrival of the refugees has put pressure on already overstretched services and infrastructure in some instances, generating tensions among communities. UNHCR and partners will therefore extend protection and service provision to host communities, and promote **peaceful coexistence** and peace-building initiatives among the different communities. Further action will be required at country and regional level, to advocate for enhanced development investment in host communities, to address the high levels of chronic vulnerability and to ensure that basic services, additional resources and infrastructure capacities are provided to benefit both the host and refugee communities.

Based on the Refugee Coordination Model, the humanitarian response to the refugee influx in the region continues to be coordinated by UNHCR, in collaboration with government counterparts in asylum countries, UN partner agencies, local and international NGOs, as well as local host communities. The initial six-month mandate of the Regional Refugee Coordinator (RRC) for the South

Sudan Situation has been extended until further notice. An RRC office has been established at the UNHCR Regional Support Hub in Nairobi to facilitate a permanent coordination presence. The RRC ensures inter-agency strategic coordination and acts as the interface between UNHCR Representatives in countries of asylum, regional partner agencies and donors.

In light of the continued need to draw greater media and public attention to the South Sudan Situation, UNHCR will produce several multi-media products focusing on the human aspects of the crisis. The purpose of these products is to raise empathy for the displaced population by mobilizing critical public and donor support. Furthermore, partners continue to expect UNHCR, in its capacity as RRC, to provide constant updates and visibility on the humanitarian situation and response.

With regard to IDPs, UNHCR, as part of the Humanitarian Country Team (HCT) in South Sudan, will lead or actively engage in the response efforts of the Protection, Camp Coordination and Camp Management (CCCM), and Shelter/NFIs clusters, targeting the most vulnerable IDPs including those displaced outside the United Nations Mission in the Republic of South Sudan (UNMISS) Protection of Civilian sites.

PLANNED RESPONSE

ETHIOPIA

Existing response

Since mid-December 2013, close to 200,000 South Sudanese refugees have arrived in Gambella. The majority of these new arrivals are women (80 per cent of the adult population) and children (70 per cent of total population), including some 13,700 unaccompanied or separated children.

UNHCR has worked closely with the Government of Ethiopia since the beginning of the refugee influx to ensure that asylum-seekers have unhindered access to asylum in Ethiopia on a prima facie basis and that the civilian character of asylum is maintained.

Most of the refugees who have arrived since December 2013 are currently assisted in three camps (Kule, Tierkidi and Leitchuor) which have now reached their full capacity. The rainy season, which started in August 2014, resulted in the flooding of (Nip Nip) and Leitchuor camps, Pagak reception centre and Mataar transit centre. A few thousand refugees have relocated by themselves to higher ground, including on roads in public buildings and amongst the local host community, which has welcomed. An operations continuity plan has been developed with the Government and all partners to sustain services to refugees in affected areas, and also to support the local communities that are sharing their limited resources with the refugees. In parallel, a joint relocation plan has been prepared, further to the announcement by the Government of its intention to close the Leitchuor camp and relocate the refugees to the alternative sites within the larger Gambella Zone, some 200 km east of Leitchuor, where new sites have been identified. As of mid-October, flooding of the roads had prevented any relocation, which is expected to begin in the first quarter of 2015.

Although the Administration for Refugee and Returnee Affairs (ARRA) approved in December 2014 the allocation of two camp sites in Gambella region - Koben and Cholan (43 kilometres and 18 kilometres from Gambella respectively) — the Government finally decided to allocate another site which is named Jewi and is 18 km away from Gambella. The Jewi camp officially opened on 15 March the relocation exercise of refugees from Leitchuor to Jewi will commence in early April. In this context, an accountability matrix has been developed to clearly delineate roles and responsibilities in camps and transit centres.

To confirm the nationality of those seeking protection and assistance as refugees and to identify any Ethiopian nationals among the displaced, a joint nationality screening has started in coordination with ARRA, the Government's refugee department, the regional authorities and the refugee community.

UNHCR has been providing leadership and guidance in the coordination of protection and humanitarian assistance since the start of the crisis through Inter-Agency Task Force meetings cochaired with ARRA. About 40 partners, including government agencies, national and international NGOs, UN agencies and IOM, are working closely with UNHCR to support the refugees.

An Inter-Agency Family Tracing and Reunification Task Force has been established in Gambella to focus on inter-camp tracing of unaccompanied minors and separated children between entry points/reception centres, camps and host communities. This new mechanism reports to the Child Protection/Sexual and Gender-Based Violence (SGBV) working group under the Protection cluster.

The full involvement of relevant regional and local authorities is critical, and regular consultations and field visits take place with ARRA zonal and area coordinators as well as sector specialists. Refugee issues, in particular those related to the South Sudan Situation, are a regular item for discussion and consultation within the Ethiopia Humanitarian Country Team and the UN Country Team.

Strategy and coordination

UNHCR will strengthen registration and work in collaboration with the Government to establish mechanisms for the issuance of individual documentation for refugees in the camps. Efforts will also focus on securing additional land.

Services will continue to be provided for persons with specific needs, including the elderly and people with disabilities. Priority will be given to intensifying SGBV in emergencies: prevention and response – particularly for the clinical management of rape and other life-saving activities; training of health providers; strengthening referral of pathways; and awareness-raising within the community.

Child-protection partners will establish basic services at entry points/reception centres to identify and document unaccompanied and separated children, and assist them with psychosocial support activities. Outreach child-protection activities and awareness-raising within the community on child rights will need further attention, in particular in spontaneous settlements. Interventions on family tracing and reunification will benefit from the regional information-sharing system that is being finalized. Efforts will be made to further strengthen the comprehensive capacity-building plan already in place for all social workers.

Coverage of primary education, and quality assurance of education delivered, will be consolidated through needs-based teacher training. The recruitment of female teachers will be enhanced to encourage enrolment and retention of girl students. Formal and informal gender-sensitive, conflict-sensitive education services for youth (secondary schooling, accelerated learning programmes, vocational training, literacy, and life skills) will be developed.

Primary health care will be provided in up to 12 new health centres. The capacity of Gambella hospital - the only referral hospital in the region - needs to be reinforced alongside control strategies for endemic diseases including malaria. Operational research into the epidemiological aspects of hepatitis E to devise better control measures is needed following the major floods of late 2014. Logistics demands are expected to increase in 2015 with the expansion or creation of new camps and related additional needs for transportation, storage, vehicles, core relief items (CRIs), road rehabilitation, etc. Road construction projects within camps will need to be implemented swiftly. Additional partners are encouraged to join the operation to assist with shelter and other camp infrastructure, such as markets, women-friendly spaces, child-friendly spaces and community centres.

Humanitarian partners will also work with the Government to address and mitigate the environmental degradation around camps, in order to preserve the fragile ecosystem and reduce possible tensions between refugees and host communities who are sharing their limited resources. Firewood as a source of energy has been supplied to 34,472 households in camps so far. In addition, 2,600 rocket stoves and 4,032 save stoves have been distributed to 6,632 households at Leitchuor camp.

The water, sanitation and hygiene (WASH) response will continue to focus on the provision of life-saving facilities for new refugees as well as the improvement of services in existing camps through permanent WASH facilities construction. Prepositioning of adequate WASH supplies to meet emerging and current needs (soap, jerry cans and water treatment kit/chemicals) has been reviewed and efforts made to collect baseline data for new camps through an inter-agency Knowledge, Attitudes and Practice (KAP) survey.

Planned activities

E	ir protection processes and decree-		
Fa	ir protection processes and documentation		
	Registration and profiling Individual documentation Family reunification	:	Undertake individual registration of all new arrivals in a timely manner, capturing bio data, biometrics and screening for specific needs. Issue documentation and birth registration certificates. Undertake registration and information-sharing on unaccompanied and separated children. Facilitate tracing, restoring, maintaining family links and reunification efforts. Identification of alternative care
			arrangements.
Se	ecurity from violence and exploitation		
	Freedom of movement & reduction of detention risk	•	Monitor and advocate for continued access to territory and asylum to all new arrivals.
	Protection from effects of armed conflict	:	Maintain civilian character of refugee camps and sites. Ensure physical protection of refugees, including referral
	Protection of children		of high-risk cases to more secure areas. Monitor grave child rights violations that children have survived and witnessed in South Sudan, with data to be fed back to the Monitoring and Reporting System (MRM) under the UN Security Council Resolution 1612. Ensure that all camp management processed take into account children's specific needs. Community awareness-raising on child rights including education, SGBV, persons with specific needs and where to receive support. Train all actors to mainstream child protection. Establish community-based child protection structures (including child-friendly spaces, case management systems and referral mechanisms for violence against children). Maintain inter-agency coordination, update child protection plans and strengthen child protection SOPs. Target, identify and support the most at-risk children (including provision of psychosocial support, education, core relief items). Prevent and address family separation. Implement Child Protection and SGBV Information Management Systems for reporting and programming, and link to regional mechanisms governed by
	Prevention of and response to SGBV		information sharing protocols. Draft SOPs on SGBV based on the Ethiopia National SGBV Guidelines. Establish SGBV community-based prevention and response mechanisms, including legal assistance, medical support, psychosocial counselling and safe spaces. Train health workers on clinical management of rape for SGBV survivors.
Ва	asic needs and essential services		
	Health		Provide emergency primary health care services to all

including emergency obstetric care. Provide community-based mental health services for refugees and referrals to clinics. Control the spread of communicable diseases (e.g. measles and polio) and provide immunization. Enhance disease surveillance system and laboratory investigation capacity for timely detection of epidemics Establish clear and strong referral mechanisms for treatment of endemic diseases and chronic diseases, including HIV. Provide essential and emergency reproductive health Reproductive health and HIV services care services. Undertake entry point nutritional screening to all Nutrition children and pregnant and lactating women. Provide High Energy Biscuits to new arrivals at entry points/reception sites. Provide blanket supplementary feeding to all children of 6-59 months and pregnant and lactating women. Establish community-based management of severe and moderate acute malnutrition. Provide supplementary food to moderately malnourished refugees. Conduct nutrition survey using SENS methodology. Provide potable water through emergency water Water trucking Construct temporary distribution and pumping pipeline. Construct permanent water system, including drilling of Ensure monthly provision of 250g of soap to each Sanitation and hygiene Ensure monthly provision of sanitary materials (sanitary pads, underwear, soap) to women in reproductive age. Construct sanitary facilities including family latrines, communal showers and laundry desk. Construct sanitary facilities in health centres and educational facilities Conduct community sensitization and hygiene promotion activities. Shelter and infrastructure Provide materials for the construction of transitional shelter. Construct communal shelter in the transit centres and reception centres. Construct additional way stations and reception centres. Provide emergency shelter. Construct access roads, in-camp roads and security parameter roads. Undertake bush clearing and demarcation of plots in the new camps. Provide alternative and/or renewable energy (e.g. bio Access to energy gas) to refugee households and communal kitchens that use electricity or kerosene. Provide solar lanterns and solar street lights for priority public facilities/areas. Basic and domestic items Provide CRI kits, including blankets, jerry cans, plastic sheets, kitchen sets, sleeping mats, water buckets and mosquito nets. Education Develop a comprehensive strategy for refugee education. Provide early childhood care and primary education to all the refugee children (based upon the existing population composition, the pre-primary pupils (3-6

refugees.

Provide emergency response capacity for surgeries,

		years old) would constitute 15% of the total refugee population – or 51,000 out of 340,000. Primary students (7-14 years old) would represent 21% - or 71,000). Develop accelerated learning programmes for out of school children and youth. Establish temporary and permanent learning spaces and schools. Recruit and train teachers from the refugee and local community. Provide teaching and learning materials and hygiene kits for teenage girl students. Set up monitoring system with baselines (Education Management Information Systems).
C	ommunity empowerment and self-reliance	
Co	community empowerment and self-reliance Community mobilization	 Establish/strengthen community leadership groups and complaint mechanisms, ensuring that age, gender and diversity is mainstreamed within the structures. Refugee participation in the distribution of both CRI and food items.
Co		complaint mechanisms, ensuring that age, gender and diversity is mainstreamed within the structures. • Refugee participation in the distribution of both CRI and

in/near the refugee sites.

Financial requirements for Ethiopia (USD)

	REVISED EXCOM BUDGET FOR THE SOUTH SUDAN SITUATION	ADDITIONAL REQUIREMENTS	TOTAL
Favourable protection environment	151,771	340,164	491,934
Public attitude towards persons of concern	151,771	340,164	491,934
Fair protection processes and documentation	4,768,890	10,710,749	15,524,784
Reception conditions	3,810,882	8,541,332	12,352,214
Registration and profiling	838,887	1,880,198	2,719,085
Family reunification	119,121	289,219	453,485
Security from violence and exploitation	2,470,704	5,537,590	8,008,293
Protection from crime	140,802	315,579	456,381
Risk of SGBV reduced	1,171,312	2,625,262	3,796,574
Protection of children	1,158,590	2,596,748	3,755,338
Basic needs and services	29,200,017	65,446,013	94,646,030
Health	2,013,593	4,513,067	6,526,661
Education	2,037,333	4,566,277	6,603,610
Access to energy	1,220,910	2,736,427	3,957,337
Basic domestic and hygiene items	3,475,134	7,788,819	11,263,953
HIV/ AIDS response	632,276	1,417,120	2,049,395
Services for groups with specific needs	951,894	2,133,480	3,085,374
Shelter and infrastructure	10,447,078	23,415,041	33,862,118
Sanitation	2,433,329	5,453,821	7,887,149
Water	5,078,890	11,383,319	16,462,209
Nutrition	909,580	2,038,643	2,948,224
Community empowerment and self-management	1,548,553	3,470,773	5,019,326
Community mobilization strengthened	273,704	613,453	887,157
Self-reliance and livelihoods	776,970	1,741,423	2,518,393
Natural resources and shared environment	497,879	1,115,897	1,613,777
Durable solutions	407,345	912,983	1,320,329
Resettlement	407,345	912,983	1,320,329
Leadership, coordination and partnerships	407,099	912,431	1,319,530
Partnership	407,099	912,431	1,319,530
Logistics and operations support	6,118,100	13,712,501	19,830,601
Logistics and supply	4,688,693	10,508,770	15,197,462
Programme management, coordination and support	1,429,407	3,203,731	4,633,138
Subtotal	45,093,266	101,067,561	146,160,827
Support costs (7%)	-	7,074,729	7,074,729
Total	45,093,266	108,142,290	153,235,556

KENYA

Existing response

By the end of December 2014, Kenya had received 44,575 refugees fleeing conflict in South Sudan. The majority of the new refugees are children under 18 years (65 per cent). Many are unaccompanied or separated, requiring targeted solutions in child protection, individual case management, alternative care solutions, nutrition and health, education and youth skills development. With 30,000 projected new arrivals in 2015, the planning figure of South Sudanese refugees in Kenya is expected to rise to 75,000 by the end of 2015.

The response to the humanitarian emergency has been pursued in all sectors, in cooperation with the Government of Kenya. UNHCR and partners have managed to boost the humanitarian response to receive and accommodate all new arrivals in the existing Kakuma camp.

In 2014, UNHCR supported the Government in constructing a transit centre at the border to receive and accommodate South Sudanese arrivals. Presently, Kakuma hosts 180,000 persons - 80,000 more than the number it is designed for. Sustaining the quality and effectiveness of the emergency response in an overpopulated and congested space like Kakuma camp is proving increasingly challenging, contributing to rising public health risks, recent breakdowns in law and order, and outbreaks of violence. Currently, the main operational challenge - an urgent priority in 2015 - is to secure adequate new land for refugees who arrived in 2014, and for those expected in 2015. The plan is to relocate some 80,000 persons from Kakuma. The establishment of a new camp will also contribute to the overall development of the area, including benefits for the host communities.

In education, there are two worrying trends: enrolment by over-age learners across all grade levels, and a high number of school-aged children who are not in the education system. The main reasons include inadequate facilities, classes, equipment, learning and teaching materials; crowded classrooms with a high student-to-teacher ratio; scarcity of WASH facilities; the absence of learning and educational programmes to cater for over-age learners; and an inadequate number of trained teachers and administrators.

In the healthcare sector, a major challenge is the inadequate number of qualified staff. The average daily consultation per clinician was 1:95 compared to the UNHCR standard of 1:<50. Health resources, including equipment, are overstretched. The continuous inflow of asylum seekers/refugees coupled with natural growth rate of both the refugees and the host community; the high turnover of qualified staff, especially doctors and nurses due to unfavourable working and living conditions; and a dilapidated health infrastructure, are all factors that further limit the capacity of the health response.

By the end of 2014, one out of every two households had an adequate shelter. After recent floods damaged part of the water infrastructure, parts of the distribution and storage facilities will have to be rebuilt and expanded, including at least two overhead water reservoirs. Other components of the basic infrastructure that require additional investments to sustain 2014 gains and to consolidate the response in 2015 are Kakuma's access roads, new hospital, schools and related water and sanitation systems.

Strategy and coordination

The 2015 emergency response for the South Sudanese refugees will continue to be co-led and coordinated by the Government of Kenya's Department of Refugee Affairs, supported by UNHCR. The implementation of planned priority interventions will be carried out together with the Government, host community representatives, UN agencies, nearly 15 NGO partners, and the support of the private sector. Coordination entails: i) biweekly coordination meetings in Kakuma with all partners, co-chaired by the Government of Kenya and UNHCR; ii) UNHCR monthly donor dialogue meetings; iii) WFP quarterly donor meetings; iv) monthly technical partners meetings; and v) Kenya Comprehensive Refugee Programme Task Force meetings.

The Operation's strategic priorities are to secure additional land and consolidate the ongoing coordinated humanitarian response in Kakuma. A 2015 priority is to provide adequate shelters for another 1,350 families in Kakuma, thus increasing the percentage of refugee households living in adequate dwellings from 52 to 65 per cent. In addition, 24 kilometres of access roads will need to be constructed and rehabilitated to enable the efficient movement of people, basic goods and services. Safe and orderly transport services for asylum-seekers arriving in Kenya via the Nadapal border and their transfer to Kakuma will continue.

2015 plans for enhancing the Government's border reception capacity include training immigration officials in basic refugee protection and laws, and joint border protection monitoring of admissions and reception conditions for asylum-seekers. The Department of Refugee Affairs (DRA) and UNHCR will also cooperate to improve the registration and documentation process of refugees and asylum-seekers.

Special attention and targeted protection will be provided to women and children who are often exposed to SGBV, and in particular rape, during their flight. Community support structures, SGBV interventions and processes related to child protection, including unaccompanied or separated children, are being reinforced to address the specific challenges.

The number of school-age children is projected to grow by over 30 per cent in 2015, which puts further pressure on available sector resources. To address the gaps, UNHCR and partners will set up additional learning spaces and equip them with adequate material and equipment. In addition, five fully equipped schools will be built and150 teachers will be hired and trained. These interventions aim to increase the primary level enrolment rate from 57 to 70 per cent. Education partners will update the Kakuma Refugee Education Strategy 2013 – 2016 to take into account the new influx and include the new emergency facilities in the overall education strategy. There is a need to sustain efforts to give access to education to all children in the camp. Similarly, youth should be offered formal and non-formal education, occupational skills training and job opportunities as an essential proactive protection solution and livelihoods opportunity.

In 2015, health care delivery will focus on prevention and responses to mental and physical illnesses; reproductive health and HIV/AIDS; disease surveillance and prevention. Additional health staff will be hired, and an isolation ward and theatre constructed in Kakuma. In 2015, health screening, case management and vaccination at the border entry point will continue, as will access to primary and secondary health care, nutrition and food security by refugees and host communities. In a situation with increasing malnutrition rates amongst the new arrivals, the nutrition and food security sectors will need to be further supported to expand. Sector priorities include: recruitment of nutrition and food security staff; expanded nutrition opportunities and solutions; and additional nutrition distribution points.

Planned activities

Fa	air protection processes and documentation		
	Registration and profiling		Improve reception facilities to provide secure and confidential space for registration and protection interviews, as well as supplies and facilities to ensure refugees live in dignified conditions before they are transferred to the settlement areas. Establish a joint registration facility for DRA and UNHCR to ensure expediency of registration processes for refugees and asylum-seekers.
	Family reunification	•	Register and share information on unaccompanied and separated children. Facilitate tracing, restoring, maintaining family links and reunification efforts. Identification of alternative care arrangements.
Fa	avourable protection environment		
	Administrative Institutions and practice	÷	Train government border officials and police officers. Maintain UNHCR presence at the border to monitor admission and reception of asylum seekers.
Se	ecurity from violence and exploitation		
	Protection of children Prevention of and response to SGBV		Improve information management systems and case management for child protection, particularly unaccompanied and separated children, and the MRM. Scale up SGBV interventions that will build on the resilience of survivors and their families (establishment of trauma counselling support at the border transit centre; the provision of adequate essential services including cash assistance; initiating livelihoods activities for survivors).
Ba	asic needs and essential services		
	Health		Support health sector partners to provide primary and secondary care to the refugees and host community populations. Ensure health care delivery including prevention and responses to mental and physical illnesses; reproductive health and HIV/AIDS; disease surveillance and disease prevention and control measures; medical screening of new arrivals at the South Sudan - Kenya border; hiring additional health staff; completion of the construction and start of operations of an isolation ward and theatre in Kakuma; and procurement of essential drugs, medical and other health commodities. Continue screening, case management and vaccination at the point of entry. Provide logistical inputs to the county health team and health partners to promptly investigate disease outbreaks.
	Nutrition Water, sanitation and hygiene		Procure therapeutic foods for severely malnourished children; complementary foods for targeted populations, especially medical cases; anthropometric equipment for stabilization centres and for the regular program. Hire additional nutrition staff. Promote appropriate mother, infant and young child feeding programmes. Rapid malnutrition screening of new arrivals children aged 6 - 59 months old and enrolling malnourished ones in appropriate feeding programme. Carry out vitamin A distribution campaign. Conduct the annual nutrition survey in Kakuma. Provide an additional 11,400 new latrines to cater for

	Shelter and infrastructure Access to energy Basic and domestic items Services for people with specific needs Education	80% of the projected total population of 75,000 inhabitants. Increase daily supplies of clean water by an additional 800 cubic meters to meet the projected demand. Provide new arrivals with transport assistance from the border to the reception centre. Provide adequate shelter to some 1,350 families to increase the percentage of refugee households living in adequate dwellings from 52% to 65%. Construct/rehabilitate 24 kilometres of access roads to facilitate the movement of people, goods and efficient service delivery. Supply 10kg of firewood per person per month for a period of six months. Provide some 2,900 energy saving stoves to increase coverage to 60%. Ensure needs for basic domestic and hygiene items by the projected 30,000 new arrivals are adequately met. Strengthen community support structures to support communities to take full responsibility for their children, women and other persons with specific needs. Establish and equip learning spaces including through basic teaching and learning materials and psychosocial support. Hire and train teachers and school managers, and support child friendly activities in line with the 2013 – 2016 Education Strategy. Increase participation at primary level from the current 57% to 70% through interventions including the construction of five additional schools (120 classrooms),
		recruiting an additional 150 teachers, continuing teacher training, acquiring teaching and learning materials, and equipping schools with latrines.
Co	ommunity empowerment and self-reliance	equipping serioois with latimes.
	Natural resources and shared environment	Pursue environmental conservation measures including
	Natural resources and shared environment	planting some 100,000 seedlings and rehabilitating degraded areas through establishment of 40Ha greenbelts. Finalize the Kenya Country Environmental Strategy to
		address all key issues and propose a set of key interventions that can be implemented in 2015.
Le	adership, coordination and partnership	
	Coordination and partnerships	Bring in new partners with expertise and resources in
		development to enable the sustainable integration of refugees into the county economy to ensure lasting benefits for the host communities and refugees.
Lo	gistics and operations support	
	Logistics and supply	Increase the capacity of warehouses and to purchase office and other equipment, as well as vehicles.

Financial requirements for Kenya (USD)

	REVISED EXCOM BUDGET FOR THE SOUTH SUDAN SITUATION	ADDITIONAL REQUIREMENTS	TOTAL
Favourable protection environment	231,995	-	231,995
Access to legal assistance and legal remedies	111,738	-	111,738
Access to the territory improved and risk of refoulement reduced	120,257	-	120,257
Fair protection processes and documentation	1,257,053	-	1,257,053
Reception conditions	474,887	-	474,887
Civil status documentation	55,869	-	55,869
Registration and profiling	726,298	-	726,298
Security from violence and exploitation	1,250,553	-	1,250,553
Protection from crime	418,104	-	418,104
Risk of SGBV reduced	441,365	-	441,365
Protection of children	391,083	-	391,083
Basic needs and services	22,763,775	5,148,092	27,911,867
Health	3,454,942	466,947	3,921,889
Education	4,370,396	822,994	5,193,390
Access to energy	761,641	-	761,641
Basic domestic and hygiene items	1,962,355	1,400,841	3,363,197
Services for groups with specific needs	111,738	-	111,738
Shelter and infrastructure	5,827,895	1,289,941	7,117,837
Sanitation	2,009,221	350,210	2,359,431
Water	2,477,646	350,210	2,827,856
Nutrition	1,787,941	466,947	2,254,888
Community empowerment and self-management	2,135,406	105,063	2,240,470
Community mobilization strengthened	22,348	-	22,348
Peaceful co-existence	1,676,071	-	1,676,071
Self-reliance and livelihoods	167,607	105,063	272,670
Natural resources and shared environment	269,380	-	269,380
Logistics and operations support	2,182,742	1,024,227	3,206,969
Logistics and supply	761,274	583,684	1,344,958
Programme management, coordination and support	1,421,468	440,544	1,862,012
Subtotal	29,821,525	6,277,382	36,098,907
Support costs (7%)		439,417	439,417
Total	29,821,525	6,716,799	36,538,324*

^{*} In the 2015 South Sudan Regional Refugee Response Plan, the total UNHCR budget for Kenya amounts to USD 39.3 million. This includes USD 2.6 million for HQs and regional coordination and USD 0.6 million in support costs (7%).

SOUTH SUDAN

Existing response

One year after the outbreak of the conflict in December 2013, some 1.5 million people remain displaced in South Sudan. Humanitarian needs of IDPs continue to be high across all sectors and protection concerns persist among the affected populations, including constraints to freedom of movement as well as the risk of violence, abuse and exploitation.

By the end of February 2015, South Sudan was hosting some 255,000 refugees. These include some 235,000 Sudanese refugees who depend mainly on humanitarian aid for their survival and the remaining groups of refugees originating from the Democratic Republic of the Congo (DRC) (over 15,000), Ethiopia (4,900) and the Central African Republic (CAR) (2,050).

The crisis has adversely affected the protection and wellbeing of refugees in South Sudan. The vulnerability of refugees, especially in conflict-affected Upper Nile and Unity States, increased following the crisis. The multiplicity of armed elements throughout South Sudan exacerbated the challenge of maintaining the civilian character of asylum. This also affected the protection environment, with the erosion of law and order in refugee settlements/camps, as well as in surrounding communities. Given the volatile security situation in conflict-affected states, refugees and humanitarian workers were at heightened risk. Further, tensions between refugee and local populations increased over scarce resources. Insecurity and seasonal factors have hampered regular access to refugee populations and derailed the timely delivery of critical aid supplies, including food.

Urban refugees and asylumseekers residing in Juba also remain vulnerable, as many of them have lost their properties and self-coping mechanisms as a result the crisis. Refugees from the CAR, the DRC and Ethiopia have not been exposed to the same violence and insecurity faced by the Sudanese refugees and the IDPs, although general protection concerns remain.

UNHCR, in cooperation with the Government, NGO and UN partners, continues to provide international protection and multi-sectoral assistance to meet basic needs of refugees. Despite the volatile operational environment, UNHCR has worked to ensure essential services remain operational in camps. Health, WASH, nutrition indicators have been kept largely within emergency thresholds with temporary deterioration during the first half of 2014. Interventions have also been made to enhance child protection, SGBV response and prevention and peaceful-coexistence between host and refugee communities.

Since December 2014, the number of Sudanese refugees arriving in Yida settlement, Unity State has sharply increased due to intensified fighting in South Kordofan. As of the end of March, over 8,400 new arrivals have arrived in Yida since late 2014. All new arrivals have been relocated to Ajuong Thok camp, which was established in 2013 as an alternative to Yida where protection concerns persist. An increasing number of refugees from Yida are also opting to relocate to Ajuong Thok. As a result, Ajuong Thok has surpassed its original capacity of 20,000, with a current population of over 23,400 persons. In response to the situation, the County authorities have approved the extension of Ajuong Thok camp (to double its capacity) as well as the opening of a new camp site in nearby Pamir. This is a welcome development which will not only improve reception conditions for refugees, but also contribute to the promotion of the civilian character of asylum. As new arrivals and relocation continue, there is an urgent need to scale up reception capacity and basic services in Ajuong Thok, as well as to set up initial structures for the establishment of a new Pamir camp.

On IDP response, in line with the common humanitarian objectives outlined in the Crisis Response Plan for South Sudan, UNHCR has undertaken a two-pronged approach to its engagement, focusing on: i) cluster leadership and coordination; and ii) protection and assistance delivery.

In South Sudan, UNHCR is the lead of the Protection cluster, co-lead of the Camp Coordination and Camp Management (CCCM) cluster and an active member of the Emergency Shelter (ES)/NFI cluster. In response to the crisis, UNHCR has scaled up its cluster leadership and coordination capacity. Protection cluster coordination has been strengthened at the national and state levels, contributing to the promotion of protection mainstreaming in the delivery of humanitarian assistance. CCCM cluster work has focused on Unity and Eastern Equatoria states, as well as in the Abyei Administrative Area where UNHCR is assigned as a State Coordinator. Further, UNHCR has contributed its core relief items (CRIs) in support of the work of the Emergency Shelter/Non-food items cluster.

In parallel to its cluster lead/coordination activities, UNHCR has assisted IDPs through enhanced operational engagements in selected counties of Central Equatoria, Eastern Equatoria, Unity, Upper Nile, Jonglei and Lakes states. Together with its partners, UNHCR has undertaken protection interventions and camp/settlement management services, as well as providing assistance for people with specific vulnerabilities through CRIs and emergency shelters. Specific focus has been placed on reaching IDPs outside the UNMISS Protection of Civilian (POC) sites.

UNHCR also has been supporting the Government to prevent statelessness by identifying at-risk persons and facilitating their access to nationality certificates. Focus has been placed on South Sudanese returnees, especially in border areas, who still lack documentation to identify them as South Sudanese. The December 2013 crisis also resulted into thousands of South Sudanese individuals losing their identity card.

Strategy and coordination

UNHCR will continue to encourage the Government of South Sudan to sign and ratify relevant international conventions and treaties related to the protection of refugees and the prevention of statelessness. UNHCR works closely with the Commission for Refugee Affairs, which has also established an active field presence. Close coordination will be maintained with NGO and UN partners engaged in refugee response.

In 2015, UNHCR's main focus in South Sudan will be to respond to the needs of Sudanese refugees in the camps. The overarching priority will be to upgrade emergency structures in all camps and enhance the shelter, health, education, water, sanitation and hygiene sectors to improve the current standards. Protection priorities will include: maintaining the civilian character of refugee settlements; improving access to and the quality of education, as a means of preventing child recruitment and child labour; enhancing the monitoring of sexual and gender-based violence (SGBV) and referral of cases; harmonizing access to assistance for individuals with specific needs; promoting peaceful coexistence among refugees and host communities; and strengthening the Government's capacity to respond to the protection needs of refugees.

Basic services, self-reliance and identification of durable solutions will be pursued also for non-Sudanese refugees remaining in camps and settlements, with an increased focus on improvement of self-reliance and protection, and basic services will also be continued for an increasing number of urban refugees. Together with the Government, UNHCR will promote the distribution of refugee

identity cards. Further, UNHCR will continue facilitating voluntary repatriation of refugees whenever possible.

In particular, efforts will continue to enhance the response capacity in Unity State for the influx from South Kordofan. Priority activities include: 1) expansion of Ajuong Thok camp, 2) facilitation of relocation from Yida, including road repair/maintenance and 3) initial site development in Pamir. The Office, together with partners, will work to ensure safe relocation and reception of refugees, as well as provision of protection and essential services, such as health, water, nutrition, NFIs and shelters, to newly arriving refugees in Ajuong Thok and beyond in Pamir. Also, greater attention will be paid to the needs of host communities which have been impacted by the significant presence of refugees. With the rainy season fast approaching, UNHCR needs to seize this window of opportunity to start required activities and ensure adequate reception conditions for a growing refugee population in Unity State.

For IDP response, UNHCR will maintain a two-pronged approach to deliver on cluster coordination and operational response, in accordance with the inter-agency 2015 South Sudan Strategic Response Plan.

UNHCR will continue to implement its designated coordination roles within the cluster system, acting as lead of the Protection cluster, and co-lead of the CCCM cluster with staff dedicated to the respective cluster activities. Close partnership will be maintained with NRC as a Protection cluster co-lead, and with IOM and ACTED as CCCM cluster co-leads. As the cluster lead, UNHCR will undertake advocacy, provide technical support and guidance to partners, and work to ensure coordinated responses to achieve the respective cluster objectives. In addition to strengthening cluster coordination at the national level, priority will be given to extending cluster activities further to field locations. Also, UNHCR will actively support the implementation of the Humanitarian Country Team's Protection strategy developed in 2014. Furthermore, UNHCR will continue to engage in the ES/NFI cluster, both as an operational agency and a contributor of CRIs to cluster members.

UNHCR's operational engagement will continue to focus on the six priority states (Unity, Upper Nile, Central Equatoria, Jonglei, Lakes and Eastern Equatoria) which experience continued population displacements/movements, and also host a considerable refugee population and/or have relevance to cross-border movements of South Sudanese refugees. In these states, UNHCR has a regular presence that predates the 2013 crisis and is able to leverage its existing operational setup and local experience for implementing the IDP response.

Ensuring a synergy with its cluster-lead responsibilities, UNHCR's IDP response will maintain a strong focus on protection and an emphasis on reaching IDPs in remote locations. Priority will be given to reinforcing protection monitoring and assessment, while providing timely protection response and prevention services to the affected populations (especially women and children at risk). Provision of material assistance, such as NFIs and shelters, will be undertaken in a protection-sensitive manner so that assistance reaches the most vulnerable. A rapid response team will be mobilized to undertake protection/needs assessments and distribution of assistance in hard-to-reach locations. Where possible and appropriate, UNHCR will pursue a solutions-oriented approach in its protection and assistance to IDPs, with a focus on improving their current situation, and setting a firm basis for long-term solutions, including through facilitation of access to services and documentation, provision of material assistance, and support for livelihood opportunities, including in areas of origin or choice of return. Under the leadership of the Special Representative of the Secretary-General (SRSG), specific focus has been placed on exploring temporary/transitional solutions for IDPs in Wau and Bor POC

sites. UNHCR has been tasked to lead the initiative for Wau POC, while IOM is taking the lead in Bor POC.

As an overarching strategy, UNHCR will promote stronger community engagement to address the needs of displaced populations. In this regard, UNHCR will expand CCCM structures in IDP settlements outside POC sites in order to facilitate the effective delivery and monitoring of assistance. Efforts will also continue to improve camp management knowledge and practices among community leaders and other stakeholders. UNHCR will also work to establish or strengthen community leadership/committees in a gender- and age-sensitive manner, while promoting community-based protection, including conflict prevention/resolutions, in areas of displacement or return. Further, in selected locations, UNHCR, in cooperation with partners, aims to support activities that will help improve the living conditions of IDPs and alleviate the burden on host communities, thereby creating conditions for peaceful coexistence among affected populations.

In addition, based on the request of the Government of South Sudan, UNHCR together with IOM will aim to identify appropriate options for a handful of foreign nationals who are currently stranded in POC sites across the country and who may have compelling protection needs. In this context, UNHCR is in the process of establishing their asylum claims.

Further, UNHCR will continue to support the Government in processing applications for nationality and identity documentation and identifying at-risk persons to prevent statelessness.

Planned activities

Fair protection processes and documentation	
Quality of registration and profiling improved or maintained Level of individual documentation increased	 In collaboration with other actors actively engaged in Protection and CCCM clusters, carry out profiling/registration of IDPs and IDP returnees, especially outside the POC sites, with age/gender disaggregated data to facilitate an informed and targeted Protection response. Conduct biometric registration of refugees and asylum seekers. In cooperation with the Commission for Refugee Affairs, distribute refugee ID cards.
Favourable protection environment	
Public attitude towards people of concern Law and policy developed or strengthened	 Organize public information campaigns/awareness activities for the promotion of IDP rights, targeting 6 priority states. Undertake up to 20 training and workshops to promote international principles and standards related to IDPs and advocate the rights of affected populations. Technical advice and capacity development support will be provided to the relevant authorities to help develop a national policy and legislative framework on IDPs. Provide technical support to the relevant Government authorities, in particular, to the Commission for Refugee Affairs and Directorate of Nationality, Passports and Immigration. Facilitate access to Nationality Certificates to prevent statelessness among at-risk populations.
Security from violence and exploitation	
Protection from effects of armed conflict	 Reinforce protection response by presence in priority IDP/IDP returnee locations with a focus on protection monitoring, assessment, documentation and accompaniment. Community-based initiatives to address

	Prevention of and response to SGBV		protection risks and promote conflict prevention/resolutions will be supported. Undertake child protection interventions, including for unaccompanied and separated children, to complement Child Protection sub-cluster activities. Provide child protection interventions for refugees including targeted program for children and youth at risk. Identify and conduct best interest assessment and follow up assistance for UASC/SC. Establish community based child protection network. Continue implementing activities for the prevention of and response to SGBV, including individual medical and psychosocial support for survivors, safe houses and safe areas, as well as consistent incident reporting by all funded partners. Strengthen SGBV prevention/response activities including case management and reporting, protection referral, provision of counselling/psycho-social support, and provision of solar lighting as a preventive measure. Organise awareness training and workshops targeting community members, national authorities and service providers.
Ва	sic needs and essential services		
	Shelter and infrastructure		Construct 35,000 transitional shelters and upgrade existing semi-permanent shelters for refugees, in addition to other infrastructural improvements such as access roads to camps. Undertake expansion of Ajuong Thok and development of a new camp site in Pamir in response to the new influx. Provide emergency shelters to new arrivals. Provide shelter materials to some 126,000 IDPs for the
	Basic and domestic items	•	establishment and maintenance of both emergency and transitional dwellings. Provide core relief item kits to new refugee arrivals, replace worn kits for those refugees already established, and distribute sanitary kits to female refugees of childbearing age. Provide NFIs, including sanitary/hygiene materials, to address basic needs of most vulnerable IDPs/IDP returnees (targeting 120,000 households). Deploy a rapid response team to reach IDPs in remote
	Services for people with specific needs	•	locations. Undertake vulnerability assessments and identification targeting people with specific needs, such as female-headed households, the elderly and persons with disabilities. Provide individual and community-based assistance as
	Health status of the population improved	•	per identified needs. Expand public primary health facilities to respond to new arrivals, improve health delivery services including availability of sufficient drugs, HIV/AIDS services as well reproductive health services.
	Population has optimal access to education		Improve access to and quality of education for refugee children through operation of primary / secondary schools, teacher training, provision of school materials, expansion of class rooms and upgrading of school facilities. Provide emergency education services to cater the increased education needs of refugees in the Unity
	Supply of potable water provided or		State. Maintain and upgrade water systems, including through

	maintained	solarisation, to ensure refugees' access to potable water Extend and establish water systems in new or recently extended camp areas.	er.
Co	ommunity empowerment and self-reliance		
	Coexistence with local communities	 Reinforce community mobilization. Activities include creation and support of leadership structures within the communities of populations of concern; support of community-based organizations, including on delivery conservices, and promotion of community-based protection. Extend refugee and IDPs support programmes to surrounding host communities in the areas of health, education, water and sanitation. 	of
	Self-reliance and livelihoods	 Implement community-based initiatives including QIPs aiming at promoting peaceful coexistence between hos and IDP communities. Provide targeted livelihood support/activities to increas self-reliance of refugees and IDPs, especially for the empowerment of women, including GBV survivors and female-headed households. 	
Le	adership, coordination and partnership		
	Coordination and partnerships	 Maintain dedicated teams to perform Protection and CCCM cluster responsibilities. The activities include: Protection and CCCM training, cluster coordination meetings, advocacy, and provision of technical advice and policy guidance; protection mainstreaming initiatives and resource mobilization support for cluster members. 	
	Camp management and coordination	 As a Cluster co-lead for CCCM, expand CCCM structures outside POC sites. Pursue community mobilization, sensitization and enhanced communication with IDP communities. Conduct CCCM training for community leaders and other stakeholders. Provide support to establish/strengthen community structures, including promotion of women's participation. Ensure effective camp management structures in refugee camps, with increased emphasis of refugee community engagement and self-management. Support community leadership structures with the promotion of women's participation and equitable representation by different refugee groups. 	
Lo	gistics and operations support		
	Operation management, coordination and support	 In coordination with the logistics cluster, ensure timely and effective delivery of NFIs and other assistance, including pre-positioning of relief items during the dry season. Activities include: establishment and maintenance of warehouses/rub-halls in Juba and key refugee/IDP field locations; transportation of relief items; and provision of workshop services for operational fleets in Juba and field locations for UNHCR and partners' vehicles. Provide training and other operational support to partner agencies, enabling them to implement intended assistance activities in a timely, efficient and effective manner. 	1

Financial requirements for South Sudan (USD)

	REVISED EXCOM BUDGET FOR THE SOUTH SUDAN SITUATION	ADDITIONAL REQUIREMENTS	TOTAL
Favourable protection environment	6,719,847	2,284,663	9,004,510
Law and policy developed or strengthened	6,617,850	1,226,165	7,844,015
Public attitude towards persons of concern	101,997	1,058,499	1,160,496
Fair protection processes and documentation	14,938,611	2,646,247	17,584,858
Reception conditions	1,616,398	ı	1,616,398
Registration and profiling	6,321,833	2,646,247	8,968,080
Level of individual documentation	7,000,380	ı	7,000,380
Security from violence and exploitation	29,568,506	8,659,806	38,228,312
Protection from crime	821,830	ı	821,830
Protection from effects of armed conflict	12,642,145	285,795	12,927,940
Risk of SGBV reduced	8,874,387	8,374,011	17,248,398
Protection of children	7,230,144	-	7,230,144
Basic needs and services	151,723,703	31,831,172	183,554,875
Health	12,324,538	-	12,324,538
Reproductive health and HIV services	5,697,135	-	5,697,135
Nutritional	6,090,513	-	6,090,513
Food security	1,129,360	-	1,129,360
Water	8,643,734	-	8,643,734
Sanitation and hygiene	9,067,648	-	9,067,648
Access to energy	2,271,278	-	2,271,278
Basic domestic items	36,724,545	-	36,724,545
Services for groups with specific needs	13,789,970	137,605	13,927,575
Education	16,795,295	-	16,795,295
Shelter and infrastructure	39,189,687	31,693,567	70,883,254
Community empowerment and self-management	59,182,236	-	59,182,236
Community mobilization	13,801,726	-	13,801,726
Peaceful co-existence	39,491,608	-	39,491,608
Natural resources and shared environment	1,739,583	-	1,739,583
Self-reliance and livelihoods	4,149,319	-	4,149,319
Durable solutions	1,695,449	7,938,740	9,634,189
Voluntary return	1,695,449	4,763,244	6,458,693
Integration	-	3,175,496	3,175,496
Leadership, coordination and partnerships	24,296,654	6,469,673	30,766,327
Donor relations and resource mobilization	2,180,992	-	2,180,992
Partnership	3,845,543	4,564,375	8,409,918
Camp management and coordination	18,270,119	1,905,298	20,175,417
Logistics and operations support	54,478,048	11,618,782	66,096,830
Logistics and supply	33,594,955	-	33,594,955
Programme management, coordination and support	20,883,093	11,618,782	32,501,875
Subtotal	342,603,054	71,449,082	414,052,136
Support costs (7%)	, ,	5,001,436	5,001,436
Total	342,603,054	76,450,518	419,053,572

SUDAN

Existing response

With conflict ongoing in South Sudan and deterioration in the overall environment for civilians (including growing food insecurity), there has been an upsurge in the number of weekly arrivals following the end of the rainy season. On average, 1,200 new arrivals are registered every week, and it is expected that this trend will continue into 2015. UNHCR and its partners are therefore planning humanitarian interventions for 126,000 South Sudanese refugees as of January 2015 and for an additional 70,000 refugees who are expected to arrive throughout 2015. In total, it is anticipated that up to 196,000 South Sudanese refugees will have sought safety in Sudan by the end of 2015, and the population will be largely composed of children. UNHCR and its partners do not exclude a possible upsurge in the number of arrivals to two or three times the current projected numbers, and therefore contingency plans are being developed. It is also anticipated that a number of Sudanese currently in South Sudan will return, requiring assistance upon arrival.

From the outset of the emergency, the Government of Sudan has maintained an open-border policy, allowing safe and unrestricted access to its territory for those fleeing the conflict. The President of Sudan has declared that South Sudanese should enjoy the same status as Sudanese citizens in Sudan, and that their stay should be governed under the Four Freedoms Agreement (movement, residence, work, property); however, negotiations between the two Governments are ongoing. The operational context in Sudan thus differs from that of other countries in the region where UNHCR and partners have been mounting traditional large-scale emergency response programmes.

In close coordination with the relevant government entities at federal, state and local levels, UNHCR coordinates the overall humanitarian response for South Sudanese refugees. Minimum operating standards have been approved by the Humanitarian Country Team to ensure a common, consistent and coordinated approach by all humanitarian actors. UNHCR, in line with the Refugee Coordination Model, is capitalizing on existing sectorial coordination mechanisms in place for internal displacement situations in Sudan to ensure more streamlined coordination. The existing refugee multi-sector model will remain the main forum through which humanitarian coordination for the UN and its partners for this emergency takes place, under UNHCR's leadership and in support of government efforts.

Further to the establishment of a joint working group at the federal level, led by the Humanitarian Action Committee set up during the early stages of the emergency, a steering committee was established in Khartoum to focus on preparations and response primarily in White Nile State. At the state level, a technical committee was created to ensure field coordination with all relevant partners. Partners involved in the response include UN agencies, NGOs, IOM, the Sudanese Red Crescent Society and government bodies. Joint assessments take place regularly to ensure cohesion and effective planning. The main government counterparts include the Humanitarian Aid Commission and the Commission for Refugees. The coordination of assistance in areas hosting new arrivals is being undertaken by State emergency committees.

Strategy and coordination

The overall strategy to respond to the needs of South Sudanese refugees in Sudan will be articulated around camp-based assistance for refugees living in relocation sites in White Nile State, as well as community-based interventions for those living in other settlements, including Khartoum. The

protection strategy will continue to aim at ensuring the refugees' safety, protecting their rights and addressing their vulnerabilities, as well as to start identifying durable solutions.

Preventing *refoulement* and ensuring safety through unhindered access to the territory for all South Sudanese refugees will be pursued through the establishment of adequate reception arrangements, and the rapid registration at household level for new arrivals to ensure they are provided with life-saving assistance. Basic services will be made available for a temporary stay of three-to-four days, including medical screening and nutritional support, before onwards transportation to established sites is organized.

Individual registration will be carried out to improve the identification of persons with specific needs, thereby ensuring effective protection planning and targeted responses. In addition, individual registration will be extended to new arrivals in urban areas. The provision of documentation is prioritized in this phase of the strategy as nationality documentation in Sudan is also a prerequisite to access a number of services, including education. Referral pathways will be strengthened to ensure appropriate medical, legal, psychosocial and other relevant protection services are available to refugees, in particular women and children.

Efforts are also required to reduce risk factors in the relocation sites and potential tensions with host communities and authorities, including interventions aiming at peaceful coexistence and the strengthening of self-reliance of refugees and host communities. Joint livelihood activities, such as agricultural and fisheries programmes, will help promote coexistence between refugee and hosting communities.

UNHCR will in parallel pursue its advocacy interventions on status-related issues, in particular to enhance documentation for the South Sudanese refugee population. This is particularly critical for children in light of the high ratio of unaccompanied and separated children arriving in Sudan. Learning facilities and child-friendly spaces are also prioritized given the vulnerability of children and the need to quickly re-establish a sense of normalcy.

In White Nile State, UNHCR and its partners will strive to guarantee access to WASH facilities, health care and education, in close cooperation with the relevant line ministries. Targeted assistance in food security, livelihoods and support to extremely vulnerable individuals, including unaccompanied and separated children, will be expanded. Host communities living near the sites will also benefit from these interventions. Community-based activities, in particular in Khartoum open areas and settlements in South Kordofan and West Kordofan States, will focus on enhancing the capacity of local infrastructures.

WASH interventions will focus on achieving the standard of 20 litres of potable water per person per day. The construction of latrines is a priority and the decongestion of existing sites will be critical to meet the standard of 50 persons per latrine in the sites. All WASH interventions will also target host communities.

Health interventions will continue to aim at ensuring better access to primary health care services for South Sudanese and host communities, as well as strengthening referral services. The health strategy foresees a close coordination with WASH and nutrition activities. Health facilities serving South Sudanese will be rehabilitated where required, appropriately staffed with qualified and trained health workers and equipped with instruments, drugs and medical supplies.

The nutrition response for new arrivals will continue aiming at addressing acute malnutrition through life-saving interventions. Screening and referral of malnourished children will be conducted

at reception centres and supplementary feeding programmes will be put in place, including for all newly arrived children and pregnant or lactating women. The prevention and treatment of acute malnutrition will be ensured through the provision of monthly nutrition supplements and therapeutic services.

A revised emergency shelter model will be used in 2015 as UNHCR's monitoring and evaluation of 2014 interventions showed that South Sudanese did not find the previous shelter options suitable. The new model will be more environmentally-friendly and cost effective. Communal shelters will be erected at reception sites as immediate shelter assistance. In addition, strategic pre-positioning and distribution of shelter materials and other NFIs will be ensured to respond to the needs resulting from the continuous influx.

In White Nile State, decongesting the existing sites will be a priority, and two new sites have been identified and prepared for hosting refugees. UNHCR will also support the Government of Sudan in assuring the physical security of refugee-hosting sites and peaceful coexistence with the surrounding communities.

In the stabilization phase of the response, the standards of assistance in the existing camps will be progressively improved with a transition from emergency standards to regular care and maintenance assistance. The engagement of refugees and host population both in the assessment and service delivery will help the community to build resilience and mutuality in the longer term, with a focus on livelihood interventions.

Planned activities

Re	dividual documentation egistration and profiling	 Issue documentation for all South Sudanese. Strengthen border reception arrangements through the establishment of reception centres in strategic key locations in White Nile State and South Kordofan. Undertake registration at the household level for new arrivals and individually for existing refugee population.
		establishment of reception centres in strategic key locations in White Nile State and South Kordofan. Undertake registration at the household level for new
	vil registration and civil status documentation	 Map birth registration services and procedures to ensure that children born in Sudan can be registered at birth and obtain standard birth notifications from health facilities. Where health facilities are not available, agreements are made with local authorities recognizing that the validity of these birth notifications in order to
Fa	amily reunification	 ensure refugee children can eventually receive birth certificates. Register and share information on unaccompanied and separated children. Facilitate tracing, restoring, maintaining family links and reunification efforts. Identification of alternative care arrangements.
Favo	urable protection environment	
In	ternational and regional instruments	 Build capacity of the Ministry of Social Welfare to better support protection deliverables.
Secu	rity from violence and exploitation	
de	reedom of movement & reduction of etention risk rotection from effects of armed conflict	 Enhance safety of refugee hosting sites through the implementation of physical security measures, such as the provision of adequate lighting in all waiting areas, and capacity building and equipment of law enforcement officials. Support the South Sudanese community to recover from trauma consequences and strengthen resilience using

			free cultural sensitive therapeutic approaches.
	Protection of children	٠.	Facilitate family tracing and reunification, psychosocial support and mine-risk education, targeting some
			conflict-affected children and unaccompanied and
			separated children. Establish, expand and renovate child-friendly spaces and
			commence consultative processes for children.
		•	Strengthen child protection systems (social welfare,
			police judiciary) to provide child-friendly procedures and
			ensure inter-departmental and community based prevention and response to child at risk building, upon
			existing government and civil society child protection
			structures and mechanisms.
	Prevention of and response to SGBV	•	Establish women- and youth-friendly spaces in White Nile State and Khartoum State.
			Train service providers on clinical management of
			survivors of violence, psychosocial support and legal aid.
Ba	asic needs and essential services		
	Health	•	Maintain and reinforce existing health facilities to ensure
			free access to primary health care, including maternal, neonatal and child care for refugees and host
			communities.
		٠.	Provide mental health counselling and care at health facilities.
		•	Complement sector partners' resources in provision of
			drugs, reagents, kits (primary reproductive, integrated
			management kits), emergency obstetric care equipment and medical supplies.
		•	Train health care providers in health facilities serving
			refugees.
		•	Collect epidemiological data and enhance detection of communicable diseases outbreaks.
			Establish new health outposts/ centres at new locations
		•	Strengthen medical referral systems.
		•	Increase availability of secondary health care in Al Gabalian, El Neem and Kosti.
		•	Support malaria prevention with long-lasting insecticide treated nets distribution.
			Support health promotion and health awareness
		i.	activities. Support health facilities with basic and comprehensive
			emergency obstetric care.
		•	Strengthen the capacity of blood donation units by provision of supplies and equipment to reinforce
			comprehensive emergency obstetric and new-born care
			services.
	Nutrition	•	Support and complementing the resources of the
			respective sector partners in establishing required stabilization centres, outpatient therapeutic sites and
			targeted supplementary feeding centres for the
			treatment of acute malnutrition.
		•	Facilitate MUAC screening of all new arrivals at border/entry when and where possible, and referral of
			cases of SAM to appropriate treatment centre.
	Water		Maintain water systems in existing camps and ensure
			the provision of potable water up to emergency
			standards in new sites, reception centres and the
			hosting communities accommodating refugees. Monitor and improve water quality through chlorination
			and purification tablets.

Sanitation and hygiene Shelter and infrastructure	 Construct latrines to meet UNHCR standards in existing camps and emergency standards in new sites. Construct drainage systems in existing camps. Procurement and distribution of hygiene kits to most vulnerable women and girls of reproductive age. Conduct site planning and development in locations designated as refugee relocation sites.
	 Construct two landing sites at the river in White Nile State to enhance accessibility during rainy season Procurement and pre-positioning of emergency shelter material for 55,000 new arrivals in camp-like situation.
Access to energy	In 2015, the operation is planning to provide energy efficient stoves to the refugees in the six sites.
Basic and domestic items	 Procurement and pre-positioning of NFIs for an estimated 146,000 people in need.
Services for people with specific needs	 Ensure targeted support to extremely vulnerable individuals including transport and allowances. Strengthening of community-based networks for the identification, referral and support of persons with special needs including women and children at risk or victims of violence.
Education	 Construction of new classrooms with separated latrines Rehabilitation of existing learning spaces and WASH facilities Support State-level line ministry in organizing and conducting annual and periodic examination Mobilize communities and build capacity of Parent and Teacher Associations (school management, social cohesion, child protection, girl's education etc.) Conduct education baseline surveys and schools mapping. Provide support with the school fees to vulnerable South Sudanese refugee families living in the host communities.
Community empowerment and self-reliance	
Community mobilization	 Community mobilization, health, nutrition and hygiene promotion through community health workers.
Self-reliance and livelihoods	 Pursue livelihood activities including for vulnerable groups from local host communities in line with UNHCR's peaceful coexistence strategy. Establish livelihood initiatives, particularly for women at risk and other extremely vulnerable individuals in both White Nile State and Khartoum State to mitigate existing vulnerabilities.
Logistics and operations support	
Logistics and supply	 Secure additional warehouse space and transport capacity. Enhance landing sites for access through the river banks if required for transportation of humanitarian cargo.

Financial requirements for Sudan (USD)

	REVISED EXCOM BUDGET FOR THE SOUTH SUDAN SITUATION	ADDITIONAL REQUIREMENTS	TOTAL
Favourable protection environment	53,490	-	53,490
Public attitude towards persons of concern	53,490	-	53,490
Fair protection processes and documentation	1,310,516	3,293,901	4,604,417
Reception conditions	534,905	1,055,704	1,590,609
Level of individual documentation	481,414	1,131,966	1,613,380
Registration and profiling	294,197	1,106,231	1,400,429
Security from violence and exploitation	1,059,111	1,595,764	2,654,875
Protection from effects of armed conflict	449,320	68,575	517,895
Risk of SGBV reduced	267,452	1,046,547	1,314,000
Protection of children	342,339	480,641	822,980
Basic needs and services	16,573,625	30,602,238	47,175,862
Health	2,300,090	2,019,005	4,319,095
Education	962,828	1,437,172	2,400,000
Basic domestic and hygiene items	2,326,728	6,733,660	9,060,388
HIV/ AIDS response	534,905	-	534,905
Services for groups with specific needs	1,341,096	280,447	1,621,542
Shelter and infrastructure	7,449,775	10,750,157	18,199,932
Sanitation	267,452	2,800,796	3,068,248
Water	1,390,752	2,981,000	4,371,752
Nutrition	-	3,600,000	3,600,000
Community empowerment and self-management	374,433	2,400,000	2,774,433
Peaceful co-existence	374,433	-	374,433
Self-reliance and livelihoods	-	1,876,104	1,876,104
Natural resources and shared environment	-	523,896	523,896
Leadership, coordination and partnerships	4,386,217	-	4,386,217
Partnership	320,943	-	320,943
Camp management and coordination	3,423,389	-	3,423,389
Emergency management	534,905	-	534,905
Donor relations & resource mobilization strengthened	106,981	-	106,981
Logistics and operations support	2,987,834	953,345	3,941,179
Logistics and supply	1,248,214	-	1,248,214
Programme management, coordination and support	1,739,621	953,345	2,692,965
Subtotal	26,745,227	38,845,248	65,590,475
Support costs (7%)	-	2,719,167	2,719,167
Total	26,745,227	41,564,415	68,309,642

UGANDA

Existing response

As of 14 January 2015, Uganda had been hosting some 138,000 South Sudanese refugees since the influx began in mid-December 2013. All South Sudanese new arrivals who came after December 2013 have been granted refugee status on a prima facie basis. With over 70,000 new arrivals expected in 2015, the planning figure of South Sudanese refugees in Uganda will reach some 210,000 individuals.

Humanitarian response to the refugee crisis is coordinated by the Office of the Prime Minister (OPM) and UNHCR. At Kampala level, an interagency meeting is now taking place on a monthly basis. The creation of a Solutions Alliance Uganda National Group is at early stages of conceptualisation. At the District level in Arua, Adjumani, and Kiryandongo, weekly inter-agency meetings and sectorial meetings are taking place.

Together with the OPM, UNHCR supports planning, implementation and coordination of the overall response for the South Sudanese refugees. The District Local Governments are also at the forefront of the emergency response providing technical support to partners. The main UN agencies and several international and national NGOs are part of the response mechanism, contributing their expertise to complement the overall effort. In addition, the UNCT is committed to working with UNHCR on an integrated solutions strategy named Refugee and Host Population Empowerment.

The OPM and UNHCR, with partner support, will continue to coordinate the maintenance of Nyumanzi transit centre, and Ocea and Kiryandongo reception centres, which have accommodated the majority of newly arrived South Sudanese refugees. The registration of new arrivals in Kampala continues on a weekly basis.

Mechanisms to identify separated and unaccompanied children, conduct Best Interest Determinations/Best Interest Assessments as well as conduct family tracing activities have been established. Some child-friendly spaces have been created for children below school age and Child Protection Committees have been formed and trained. SGBV referral pathways will continue to be strengthened and survivors are assisted with protection, medical and psychosocial support. Specialized assistance is being offered to people with specific needs, including the construction of shelters, counselling and inclusion in livelihood programmes.

Primary education enrolment has improved from zero per cent in January 2014 to 60 per cent in September 2014. More than 280 primary school teachers have been hired of whom 38 are refugees. A high number of out-of-school children, especially youths, was observed. The main reasons could be that there are negligible interventions targeting this category whereas in some locations there are still high levels of congestion, lack of desks, WASH facilities, insufficient availability of teaching and learning materials at primary level.

Sustainable livelihood interventions remain underfunded. The World Food Programme announced planned ration cuts across Uganda, commencing in February 2015 due to funding issues in the second part of the year and in order to preserve existing stock. Ration cuts will only affect South Sudanese refugees who arrived before mid-July 2013, but will not include people with specific needs, extremely vulnerable individuals and cash beneficiaries.

Five new refugee settlements and villages have been opened in Adjumani, Arua and Kiryandongo since the beginning of 2014. Additionally, two new sites have been assessed i.e. Latodo (new) and Maaji (existing) in Adjumani district, and two new sites have been assessed in Yumbe district to establish refugee settlements which would require more temporary shelters for collection and reception, schools, health, and water facilities.

Strategy and coordination

The strategic focus of the Uganda response plan for 2015 aims to: a) consolidate the achievements of the 2014 response and ensure that protection and services are available to the refugees in an equitable manner, taking into account age, gender and diversity; b) increase refugee access to farmland and enhance support to the host community in ways that ensure peaceful co-existence between the refugee and host communities; and c) prepare the new sites of Latodo settlement in Adjumani district, and the new sites in Yumbe District.

The refugee arrivals are expected to continue through the two main border crossing points and refugees will continue to be assisted in settlements and in Kampala. The response strategy does not foresee an expansion of the operational area beyond Yumbe District which will be the next location once Adjumani settlements reach their maximum capacity. The Government is committed to continue its negotiation for land to ensure that beyond the residential areas, additional land can be obtained to enhance food security and livelihood opportunities.

In 2015, with the relative stability of the current situation, the assistance focus is shifting from ensuring the minimum SPHERE emergency indicators to ensure service delivery for a stable situation, while avoiding it becoming a protracted situation. Each sector has established the standards which should be achieved during an onset of an emergency and also once the situation stabilizes. Considering the settlement environment, camp standards are not always applicable, and the humanitarian community in Uganda is utilizing the Government's rural development standards, especially for sectors such as water, health and education. The stable situation standards used are a combination of UNHCR global minimum standards for a stable situation and the Ugandan Government's rural development standards.

Planned activities

Fair protection processes and documentation Registration and profiling Undertake fair protection process and documentation through registration and profiling. Improve reception conditions, including through the provision of communal shelter and sanitation, food, road maintenance and access to safe water through transit/reception centre management. Family reunification Register and share information on unaccompanied and separated children to facilitate tracing and reunification efforts. Identify alternative care arrangements. Favourable protection environment Administrative Institutions and practice Mainstream age, gender and diversity in all refugee interventions and coordination mechanisms. Strengthen gender sensitive programming and implementation in all phases of emergency relief with particular emphasis on improved data and relief. Enhance access to legal assistance including through Law and policy training of legal staff and mobile court systems.

Security from	n violence and exploitation	
	of movement & reduction of	 Establish community policing in settlements and strengthen protection from crime. Build the capacity police (manpower, posts, logistics, training) and police monitoring of refugee settlement areas.
	n of children n of and response to SGBV	 Enhance identification, protection and care of unaccompanied and separated children and other children at risk (registration, Best Interest Determination/ Best Interest Assessment, material and psychosocial support). Establish child friendly spaces for children under 5 years. Implement awareness raising activities on chid rights (training, broadcasts, sensitisation, and development of IEC materials) with the host community. Support the monitoring and reporting of grave violations against children, under the South Sudan Regional MRM. Prevent and respond to SGBV through community sensitization activities, referral mechanisms, access to safe spaces, legal assistance and psychosocial support. Support community-based protection through the
Pasic poeds	and essential services	construction of functional women's spaces.
Health	and essential services	 Ensure access to comprehensive primary health care services including strengthened mental health and psychosocial support. Conduct systematic vaccination for all new arrivals under 5 years of age. Review disease preparedness plan of district (including procurement of cholera kit for new sites). Strengthen medical referral systems in the transit/reception centres and settlements. Reinforce support to existing UNHCR and government facilities and, including service delivery competencies and capacities. Provide essential drugs, medical supplies and equipment to health centres. Construct new health outposts/centres and rehabilitate existing health centres.
Reproduc	tive health and HIV services	 Ensure access to a continuum of HIV/AIDS prevention, care, treatment and social support. Review and increase reproductive health services capacity in health centres serving the refugees, including adolescent sexual reproductive health. Ensure optimal access to comprehensive reproductive health with emphasis to emergency obstetric and new born care.
Nutrition		 Establish nutritional surveillance and effective malnutrition prevention response capabilities. Implement community management of acute malnutrition programs. Establish nutrition screening and supplementary feeding programmes.
Food secu	ırity	 Ensure food security and diversification of food sources through increased access to agricultural land and the provision of seeds and agricultural tools in settlements. Establish and/or build capacity of livestock and disease surveillance mechanism/management. Provide micro-irrigation kits for vegetable production. Provide agricultural extension services. Conduct rapid awareness campaign on animal product hygiene.

Provide technical agricultural input support to implementing partners. Construct crop storage (communal) to minimize postharvest loss. Undertake water treatment, surveillance and quality Water Ensure 7 litres of safe water per person per day for drinking and household usage in settlements. Increase water supply across all settlements to 20 litres per person per day in the long term. Enhance easy access to water through reduction in distance to water access points and number of persons per usable water source for all households in settlements. Implement water trucking and water tank installation in new settlements. Construct lagoons in Adjumani and Arua. Explore other alternative long-term; cost-efficient water supply solutions e.g. spring fed gravity flow systems. Sanitation and hygiene Ensure institutional WASH services (latrines, bathing shelters, refuse pits and latrines in schools) to a minimum standard including through waste management in all settlements. Enhance sanitation through hygiene promotion and provision hygiene materials including soap, household sanitation kits, water storage containers and communal latrine excavation tool kits. Assess and plan new settlements (site planning to Shelter and infrastructure maximise access to services). Construct communal shelter in transit/reception centres and communal structures. Construct additional way stations; reception centres and transit centres; and food distribution centres. Procure and distribute standard shelter kits in settlements. Provide land compensation to Land Owners in West Nile. Construct and rehabilitate access roads to ensure safe delivery of assistance in all parts of the settlement Promote access to sustainable building materials, Access to energy firewood and energy saving devices, including for communal lighting Promote use of alternative energy source (e.g. briquettes) through pilot projects. Promote alternate energy sources for communal kitchens including through provision of training on energy efficient cooking practices. Services for people with specific needs Identify and provide comprehensive support to persons with specific needs, including material support and mental health and psychosocial support. Education Ensure continued availability of Universal Primary Education (UPE) to refugees in the settlements, including through provision of staffing and construction/ rehabilitation of facilities. Increase access, retention and performance of children at all levels of education. Increase access to post-primary education through support to secondary school, vocational training and tertiary education-through rehabilitation and construction of infrastructure.

Support community-based secondary schools in settlements including through construction of classrooms and facilities, provision of supplies and equipment and support through school bursary and

	vocational training scholarships.			
		 Provision of learning material to all schools. 		
		 Establish accelerated learning programs for adolescents. 		
Cc	mmunity empowerment and self-reliance			
Co	Community empowerment and self-reliance Community mobilization Co-existence with local communities Self-reliance and livelihoods Natural resources and shared environment	 Support to community outreach volunteers in providing assistance activities. Establish and strengthen inclusive leadership through civic information, elections and training. Provide material support to refugee leaders. Promote and enhance the peaceful coexistence initiatives/activities. Facilitate access to support resources (e.g. capital, skills building, market access) to start income generating activities. Provide cash for work and design cash transfer mechanism to encourage income generation activities. Provide vocational training and start up kits for income generation activities. Build entrepreneurship skills (e.g. training, leadership and organization development skills, formation of association, business plan, basic numeracy, literacy, accounting and life skills training). Provide value chain additions (e.g. equipment and materials including maize milling machine, maize Sheller, rice thresher, packaging materials). Sensitize communities on self-reliance, food utilization and entitlements. Develop community-based environmental action plan and establish networking with stakeholders. Ensure community sensitization on environmental protection. Establish and maintain tree nurseries and demarcation of protected areas in/near the settlements. Establish waste management system at household level. 		
		 Support to District Environment Departments in all locations. Institute tree marking and targeted tree planting on degraded land. 		
		 Promote fruit tree planting at the household level. Create woodlots on institutional lands (school, health 		
		facilities) and establish school gardens and junior farmer		
		schools.		
Lo	gistics and operations support			
	Logistics and supply	 Ensure timely transfer of refugees from transit centre to the settlements. Establish and manage warehouse. Procure and distribute standard basic CRI kits. 		

Financial requirements for Uganda (USD)

	REVISED EXCOM BUDGET FOR THE SOUTH SUDAN SITUATION	ADDITIONAL REQUIREMENTS	TOTAL
Favourable protection environment	980,818	846,776	1,827,594
Access to legal assistance and legal remedies	980,818	846,776	1,827,594
Fair protection processes and documentation	3,319,213	828,373	4,147,585
Reception conditions	1,513,992	377,822	1,891,813
Registration and profiling	1,805,221	450,551	2,255,772
Security from violence and exploitation	5,741,237	2,959,589	8,700,826
Protection from crime	1,999,295	1,221,410	3,220,705
Risk of SGBV reduced	1,179,711	776,021	1,955,732
Protection of children	2,562,231	962,158	3,524,389
Basic needs and services	38,952,419	12,091,899	51,044,318
Health	6,026,640	-	6,026,640
Education	10,577,994	8,925,960	19,503,954
Basic domestic and hygiene items	4,657,368	-	4,657,368
HIV/ AIDS response	1,446,151	-	1,446,151
Services for groups with specific needs	1,054,227	503,909	1,558,136
Shelter and infrastructure	6,677,501	2,662,031	9,339,531
Sanitation	2,642,448	-	2,642,448
Water	4,441,937	-	4,441,937
Nutrition	1,428,156	-	1,428,156
Community empowerment and self-management	10,378,929	6,689,939	17,068,869
Community mobilization strengthened	852,107	453,463	1,305,570
Peaceful co-existence	980,818	967,173	1,947,991
Self-reliance and livelihoods	5,581,520	4,005,146	9,586,666
Natural resources and shared environment	2,964,484	1,264,158	4,228,642
Logistics and operations support	10,404,811	4,312,387	14,717,198
Logistics and supply	4,048,042	2,154,631	6,202,673
Programme management, coordination and support	6,356,769	2,157,756	8,514,525
Subtotal	69,777,427	27,728,964	97,506,391
Support costs (7%)	-	1,941,027	1,941,027
Total	69,777,427	29,669,991	99,447,418



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