



Some of the Women registered for obstetric fistula treatment during the Campaign to End Fistula in Aweil taking their lunch at the treatment centre: Photo - UNFPA

Overall Humanitarian Needs in South Sudan





1. Situation overview

As the dry season sets in, tension is mounting in all parts of the country. In Lakes state, for example, insecurity mainly caused by inter-ethnic fighting is on the rise. During the last week 28 deaths were reported with sporadic shooting a continued occurrence in Hiyala Payam and on the Ikotos road in Torit, Eastern Equatoria. In Leer (Unity State), the high number of the armed actors in the area has increased the risk of violence against women and girls and this is exacerbated by lack of basic services and structural protections facilities. In Bentiu, there have been reports of community leaders extorting money from the community and this has been raised with the Protection Cluster. There are increasing numbers of people returning to Rubkona and GBV partners are trying to build up services in these locations and assess the needs among those returning.

Inside the PoCs, restless idle youth are also causing tension and increasingly turning to alcohol and occasional riots. In UN House, GBV service in PoC 1 were suspended due to the escalating tension between leadership structures in the past weeks. However, a GBV referral pathway session with the PoC for IDP residential focal points among multi-sectoral service providers was held to ensure timely and safe referrals in case of reduced access by non IDP staff due to insecurity.

In Tomping, the relocation of all IDPs to UN House is on-going. UNFPA continues to provide services through partner IRC, who will remain on the ground until the end of Dec 2014. As of Dec 31 2014, IRC will no longer work in Tomping.

Overall, thefts and carjackings have been increasing in Juba, with the setting in of the holiday season. With unpredictability of the security situation, many humanitarian workers are likely to take leave during the season.

2. Highlights of UNFPA Emergency Response

In Eastern Equatoria and Lakes States, Health Link continues to provide treatment to survivors of rape and physical assault (providing PEP, treatment of STIs, Emergency Contraceptive Pills to prevent pregnancies and treatment of injuries), offering psychosocial services (counseling) to survivors and follow up of all the reported cases to ensure survivors get all the help required (medical, psychosocial, legal, safety and security). In Warrap state, UNFPA through partner ARC and with other protection actors (GOAL, ACF, World Vision, RRC, county Health, IOM, ARC, MOSD) conducted an Inter-Agency coordination meeting to discuss activity update and determine a way forward on specific cases within IDP camps

In Awerial, UNFPA through IRC started the process of fixing doors to 50 female headed households in the relocation site 2 as a risk mitigation measure. Women leaders with the support of partner IRC and UNHCR had a round table discussion to update the Commission on issues affecting women in Mingkaman and advocated for the authorities to take action. The issues of concern included the lack of women centre in one of the IDP sites, no secondary

schools which is resulting in a gap for adolescent girls, and alcoholism which is contributing to violence in the community.

In Bentiu, 10,000 dignity kits were provided and female community members will be repackaging them for distribution. In Juba, there were ongoing GBV outreach activities with various groups in both PoCs at community meeting areas, schools, relocation and transit sites, health facilities, NGO operation areas and through door to door visits.

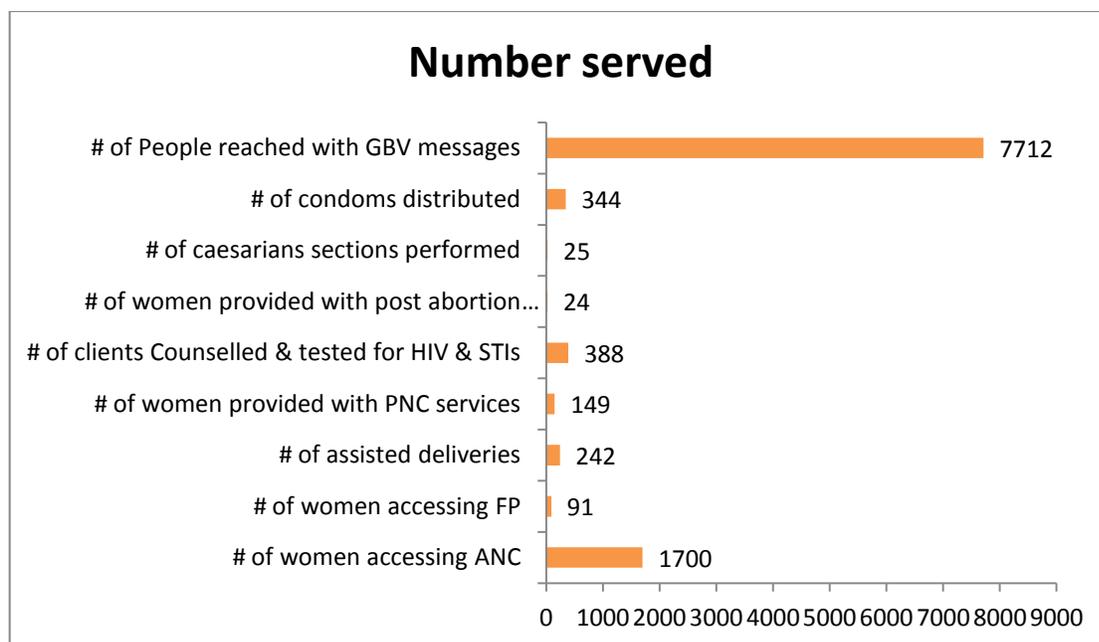
In Renk County, safe space tent, recreation kit, furniture and various consumables were donated to the Abayok Women’s Association on 10th December 2014 during the commemoration of the International Human Rights day, Another safe space was established in Pilieng, In Leer County where Psychosocial groups are beng held for with women and girls.

The Fistula Campaign ended in Aweil successfully with a total of 52 women registered for treatment. Of these 42 were fistula cases that were repaired and 10 were non fistula related cases that were discharged with appropriate prescribed treatment.

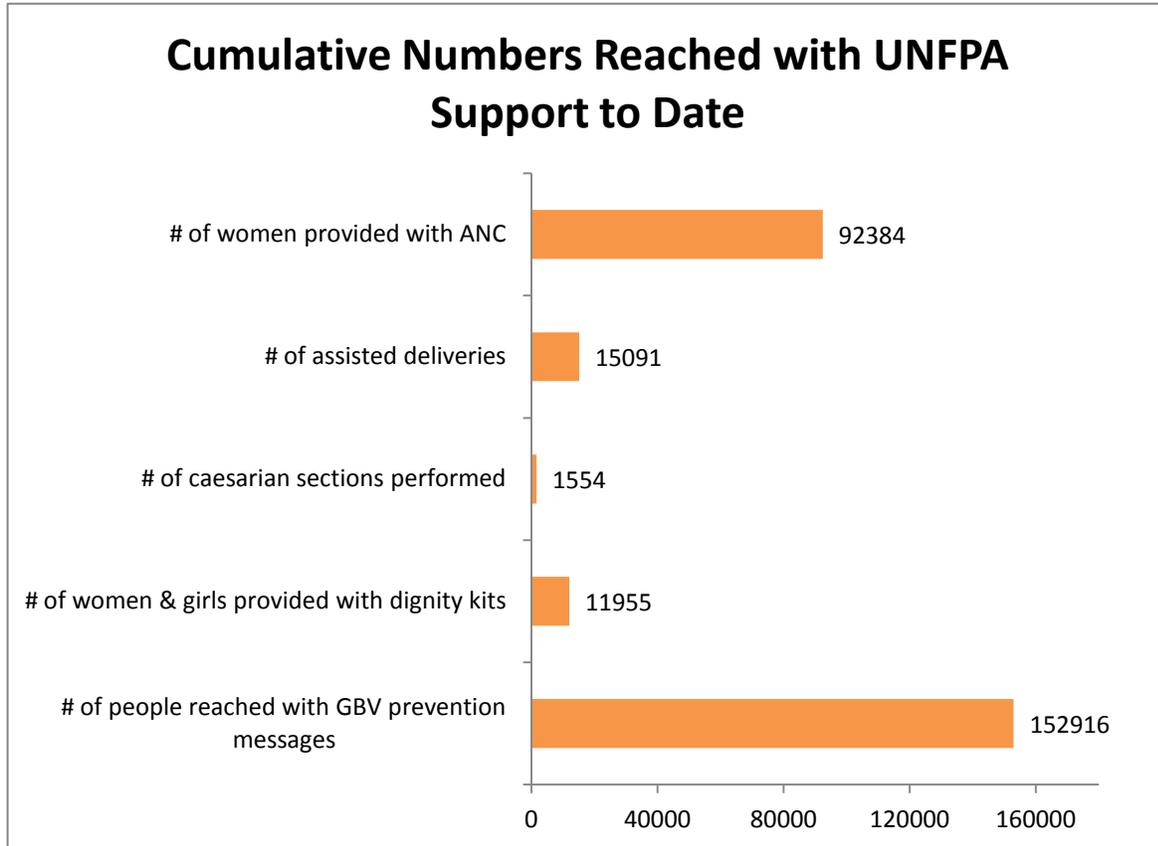
RH and GBV Service Delivery

The table below summarizes selected indicators of service delivery for the reporting week.

Figure 1: showing indicators and numbers of individuals served



Cumulatively, using selected core indicators, the status since 15 December 2013 is as summarized in Figure 2 below:



3. Resource

Over 90% of the funds allocated for humanitarian activities have already been utilised or committed.

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