

# IOM South Sudan



Ashley Hamer/IOM

## 2015 MIDYEAR CRISIS APPEAL



IOM • OIM

## I. OVERVIEW



2.1 million  
displaced due  
to conflict

On 15 December 2013, violence broke out in Juba, South Sudan's capital, and quickly spread throughout the country. Armed conflict has continued throughout 2015. Political negotiations throughout the first half of 2015 have stalled, and conditions on the ground are deteriorating. The humanitarian consequences of the ongoing crisis include massive population displacement including secondary displacement, a high rate of death, disease and injuries, food insecurity, disrupted livelihoods and wide scale malnutrition.



7.9 million  
projected to be  
food insecure

Over 2.1 million people have fled from their homes, with over 1.54 million people internally displaced. Over 144,000 individuals are seeking protection within United Nations Mission in South Sudan (UNMISS) bases, an increase of almost 50 per cent in the first six months of 2015 alone. This number is expected to increase as armed actions intensify and battle frontlines shift. Tension remains particularly high in Unity, Upper Nile and Jonglei states as control between the parties to the conflict continues to shift and the drivers of displacement deepen.



4.6 million  
people in need  
of Health  
assistance

The crisis triggered major public health risks and communicable disease outbreaks including cholera and hepatitis E. These risks remain high for displaced populations, host communities and those whose livelihoods are threatened by South Sudan's prolonged rainy season. The scale, length and brutality of the conflict has resulted in an urgent need to provide counselling and psychosocial assistance to affected populations.



6.4 million  
people in need  
of WASH  
assistance

The ongoing crisis has deepened food security, with displacement impacting many communities' ability to cultivate crops and care for livestock. Traders have fled fearing for their own safety, taking with them essential commodities for local economies. The April 2015 Integrated Food Security Phase Classification (IPC) analysis indicated a further deterioration in the number of people facing food insecurity with 7.9 million people facing stressed, crisis and emergency levels this rainy season. Malnutrition levels are increasing. Nutrition surveys in five states indicate global acute malnutrition levels in excess of the emergency threshold - one in three children are acutely malnourished and 250,000 children face starvation. This rise in malnutrition will affect overall health needs considerably.



1.5 million in  
need of shelter  
assistance

Seasonal flooding brought about by the rainy season from June to November will further complicate operations, as health risks and displacement increase while the ability of Humanitarians to respond is reduced by logistical constraints. Over 60 percent of the country becomes inaccessible by road during the rainy season, with those states where conflict is high - Upper Nile, Unity and Jonglei - the most difficult to reach.



144,000  
IDPs sheltering  
in PoC sites

These issues facing both the population of South Sudan and humanitarian respondents are compounded by an escalating economic crisis. Economic stress manifests in rising food, water and commodity prices, and reduced capacity for service delivery.

Due to the increasing needs of the displaced and vulnerable in South Sudan UNOCHA and the humanitarian community have revised the original 2015 Humanitarian Response Plan (HRP) published in December 2014. The 2015 Midyear Update was published on 12 June 2015. IOM's original funding requirement of USD93 million\* has increased to 122 million. The IOM Crisis Appeal is developed in line with the updated HRP and within the framework of the Cluster System. The appeal builds on IOM's existing capacity in South Sudan and is focused on the most urgent needs of the affected population.

In May 2015, the Integrated Inter-Agency Standing Committee (IASC) renewed the Level 3 (L3) emergency classification for South Sudan, the UN classification for the most severe, large-scale humanitarian crises. This reflects both the depth of the crisis and the continued need for Humanitarian agencies to further enhance capacities and resources. In 2014 IOM initiated an independent Real Time Evaluation (RTE) of the organization's humanitarian response to the South Sudan L3 emergency. Recommendations from this exercise have been integrated into 2015 programming. In May, the UN Security Council (UNSC) extended the mandate of UNMISS until 30 November 2015. The renewal reaffirmed the UNMISS mandate to protect civilians, monitor and investigate human rights abuses create the conditions conducive to the delivery of humanitarian assistance and support the implementation of the cessation of hostilities.

## II. IOM South Sudan

### IOM Integrated Multi Sectored Approach in South Sudan

The Mission in South Sudan implements an integrated multi-sectoral approach to the humanitarian response, providing a holistic response to the ongoing crisis. Within the framework of the Cluster Approach, IOM's humanitarian programs are focused within the Camp Coordination and Camp Management (CCCM), Coordination and Common Services, Health, Emergency Shelter and Non-Food Items (NFI), Water Sanitation and Hygiene (WASH), Protection and Logistics Clusters. IOM also continues to monitor the movements of South Sudanese returns.



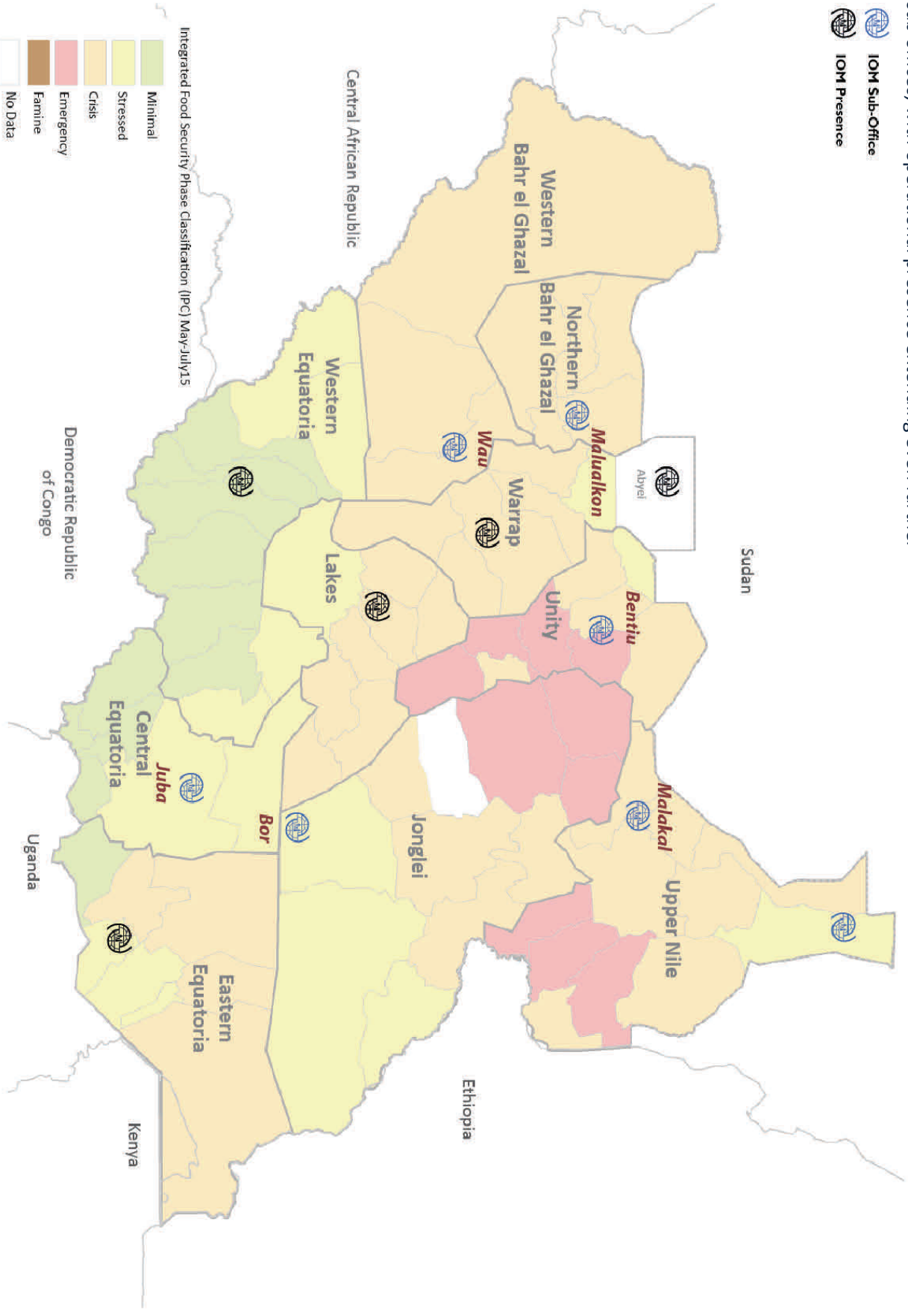
To protect development gains achieved in the years prior to the crisis, IOM continues to carry out peace-building and migration management programs in geographic areas where these interventions are possible.



### Presence and capacity in South Sudan and overall requirements for the year

IOM has had an operational presence in South Sudan since 2005, with the country office established in 2011 following South Sudan's independence. South Sudan is one of IOM's largest missions with an operational budget of over 100 million. Over 400 staff implement programming throughout the country across eight sub offices, with operational presence extending even further

-  IOM Sub-Office
-  IOM Presence



### III. IOM INTERVENTIONS BY CLUSTER

## CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)



The CCCM Cluster was activated in South Sudan following the crisis in December 2013. Over one year on 2.1 million people have been displaced from their homes, 1.54 million of whom are internally displaced. The May IOM Displacement Tracking Matrix (DTM) verified 534,461 IDPs across 98 sites - host communities, spontaneous settlements, PoCs and collective centers. People continue to arrive at PoC sites in large numbers, following increased hostilities, spreading food insecurity and the continued breakdown of already scarce service delivery.

The CCCM Cluster estimates that more than 1.9 million individuals will be internally displaced in 2015, including large influxes into PoC sites. As a result of the protracted displacement and increased need for humanitarian response, the CCCM Cluster needs to continue to scale up, and strengthen and coordinate the response of partners to provide lifesaving assistance to IDPs living in displacement sites. The Cluster has established camp coordination structures at the national and state level while continuing efforts to improve CCCM coverage at the county level. In 2015, IOM will maintain the national and state level coordination structures while expanding into counties with large displaced populations.



The objectives of the Cluster in 2015 are to continue coordinating the overall response of the CCCM cluster and to continue site development and expansion in key strategic locations. The Cluster will focus on improving living conditions for people living in PoCs, spontaneous settlements, and collective centers and monitor the conditions of people in host communities.

These objectives are necessary to expand the effective delivery of life saving services as IDP populations increase.



## IOM plans to continue to support the CCCM Cluster through:

**Overall Cluster Coordination** IOM aims to maintain its coordination structure at the National and State levels. Thus far in 2015, IOM has expanded coordination structure at the county level, increasing coverage and putting in place additional county focal points to address existing and emerging, critical gaps in coverage. More County Focal Points are needed, along with additional training and regular contact. Special efforts have already been made to incorporate aspects of gender and vulnerability into co-ordination mechanisms and information collection reports, which means specific needs of IDPS can be addressed across all sectors. Special emphasis will continue to be placed on building the capacity of partners to carry out CCCM activities.

**Information Management** In 2014, IOM rolled out the Displacement Tracking Matrix (DTM), the main information management tool of the Cluster. The DTM Unit tracks, collects and stores data on internally displaced populations whilst monitoring site conditions. DTM provides updated information on the conditions in IDP sites to the humanitarian community, and highlights sector specific gaps and achievements. IOM's biometric registration system ensures detailed and accurate demographic information on the displaced population is gathered during the registration process. In 2015, IOM continues to implement DTM and IDP registration activities to ensure that updated information is available to humanitarian partners to facilitate response planning and monitoring.

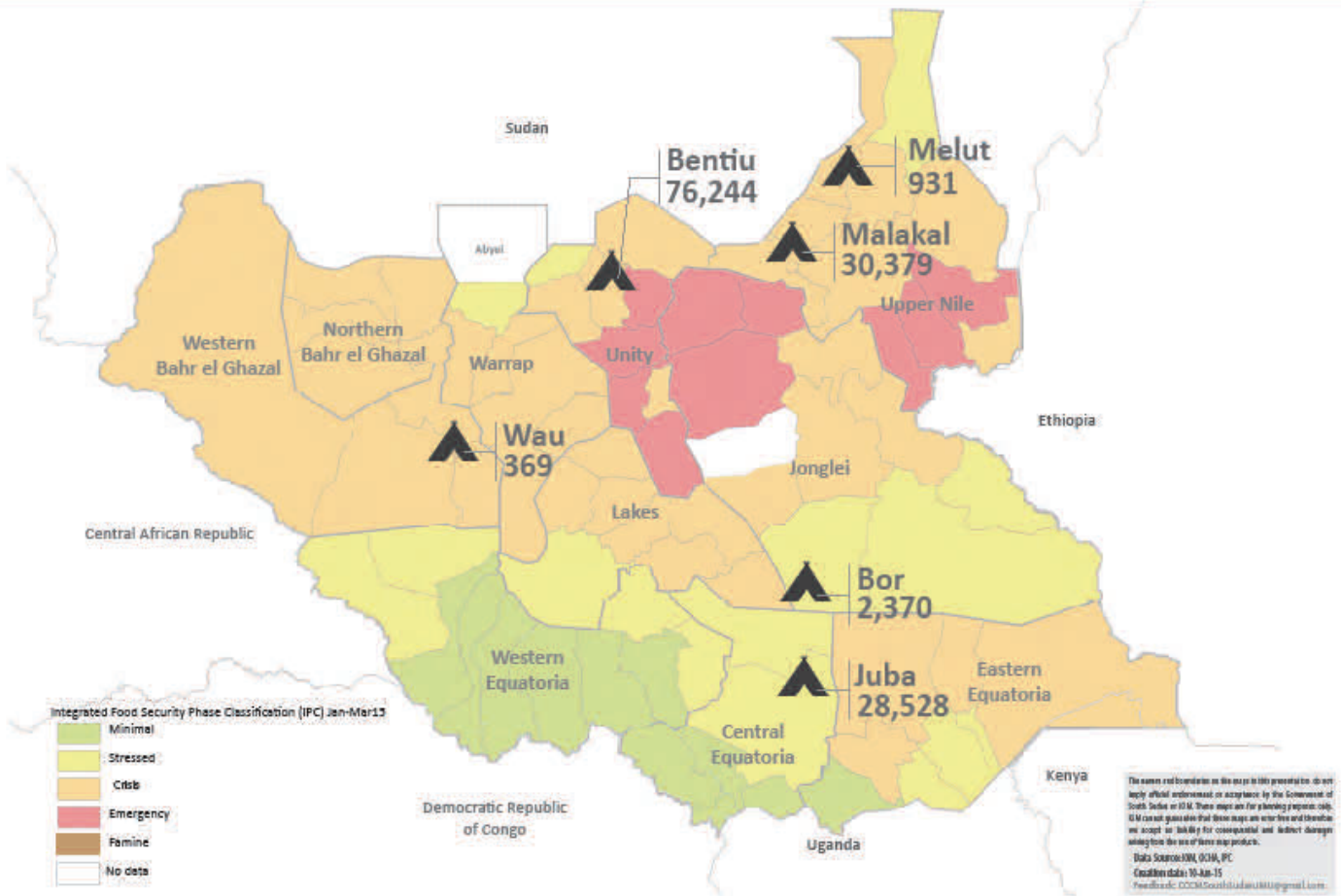


**Site Development and Expansion** IOM and partners are developing and rehabilitating the Bentiu and Malakal PoC sites, alleviating congestion and working to reduce the risk of health, sanitation, and protection concerns. This includes rehabilitating and developing an overall area of 1,493,435m<sup>2</sup> at the Bentiu PoC to mitigate the risk of flooding, which was crippling during the 2014 rainy season. PoC expansion works improve living conditions and enhance humanitarian service provision. The project includes the technical engineering assistance and direct implementation of site improvement works. Site plans are underscored by strategic placement of services, with partner agencies are developing infrastructure. Camp committees and CCCM county focal points are in place in all counties. The site planning process includes consultation with the community and vulnerable groups.

### CCCM PROGRAM REQUIREMENTS FOR 2015

CAP Code	Title	Budget (USD)
SSD-15/CSS/72412	Republic of South Sudan Camp Coordination and Camp Management (CCCM) Cluster Coordination	6,117,500
SSD-15/CSS/72414	Improving conditions in IDP sites through site development and expansion, upgrading of Humanitarian Hubs	32,382,455
<b>Total</b>		<b>38,499,955</b>

# UNMISS Protection of Civilian (PoC) Sites



## Malakal PoC site

After a rapid influx of IDPs to the Malakal PoC in April and May and tensions between communities, relocation activities to the new extension area were expedited. IOM and partners including UNMISS adapted quickly and worked in coordination to ensure over 22,000 people were protected and provided with services.



Before relocation activities



After relocation activities



## Coordination and Common Services (CCS)

The operating environment in South Sudan has become increasingly challenging, and humanitarian access is shrinking in key areas of need. Effective coordination is needed more than ever. After the December 2013 crisis, many humanitarian partners lost their offices or were unable to access them. IOM administers Humanitarian Hubs adjacent to or within IDP sites that provide safe and secure common humanitarian space to ensure the effective implementation of life-saving humanitarian activities for displaced populations. Hubs improve coordination and provide accommodation, communication services, security and office space for over 400 humanitarian workers. Usage of the Hubs has been growing through 2015. In Bentiu, between Oct – Dec 2014, 185 individuals across 17 agencies were hosted. This figure rose to 294 individuals across 20 Agencies in Jan – Mar 2015.

In 2015, IOM has been expanding and improving Hubs in Bentiu and Malakal through increasing accommodation pre-fabrications and tents, common kitchens and spaces, common meeting areas, latrine and shower facilities, electricity and water networks, footpaths, bunkers, parking space and related infrastructure.



As insecurity increases and Agencies experience considerable, additional constraints in implementing projects due to external factors, IOM on behalf of the humanitarian community aims to establish five new Humanitarian Hubs in Wau, Rumbek, Torit, Aweil and Juba. Additional upgrades are still needed for current hubs, and to cover running costs. Along with providing office and accommodation areas for the growing number of Humanitarian workers, Hubs serve as storage spaces which increases the availability of warehousing and leads to a better ability to pre-position stock. This program will go some way towards mitigating high costs of transporting staff from Juba and the issue of cancelled flights which impact service delivery and the ability to effectively and swiftly complete projects.

Humanitarian Hubs have previously been part of Camp Management activities, however as these spaces are shared by UN Agencies and Inter and Non Government Organisations, this intervention now falls under CCS.

### CCS PROGRAM REQUIREMENTS FOR 2015

CAP Code	Title	Budget (USD)
SSD-15/CSS/72409	Humanitarian Hubs Set-Up and Support for South Sudan	14,373,438
	<b>Total</b>	<b>14,373,438</b>





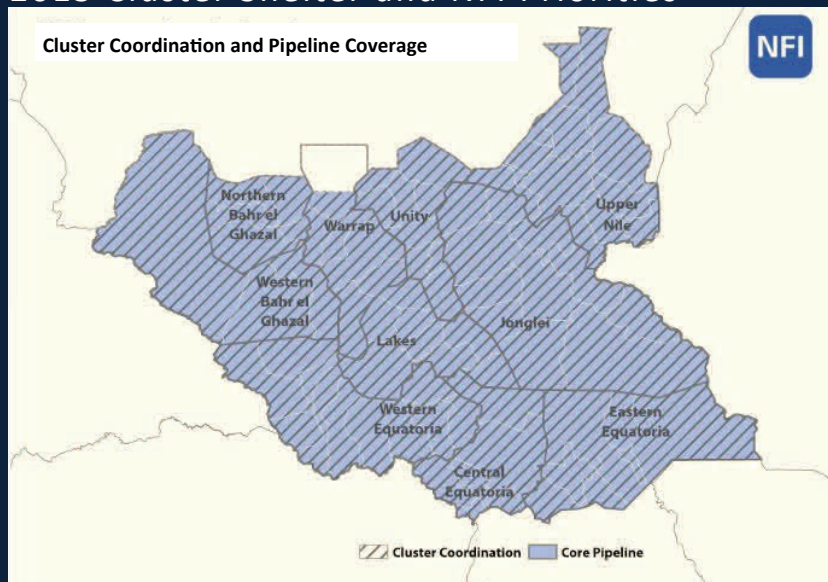
## SHELTER AND NON FOOD ITEMS (NFI)

Shelter assistance is highlighted by the humanitarian community as one of the main priorities in the response. It is essential that displaced populations are provided with shelter support during the rainy season as many have little or no access to adequate shelters or materials. While there are 1.5 million people in need, the Shelter and NFI Cluster have revised the number of people to be assisted with shelter to 152,500 and NFI to 772,500. This will result in greater focus on the areas of most urgent need and where there is capacity to deliver, and will include emerging caseloads of vulnerable communities increasingly unable to cope with the declining economy and failing markets. In 2015, Cluster Partners have already reached 77,295 individuals with shelter materials and 375,135 individuals with NFI. This represents 51% and 49% of the revised 2015 targets for Shelter and NFI assistance respectively.

The Cluster will remain flexible given the changing patterns of displacement and need, including through providing multi-sectoral survival kits for newly displaced people in extremely volatile areas. This will be followed up by robust assistance designed to enable affected populations to withstand the rainy season and to improve coping mechanisms. Beneficiaries include vulnerable host communities, displaced people, and families residing in or moving to PoCs and other settlements.

As the lead agency of the Shelter and NFI Cluster, IOM manages the Cluster's core pipeline, procuring and transporting shelter and NFI items for the overall humanitarian response. Items procured into the pipeline are made available to partners and IOM frontline teams, who are responsible for distributing materials to vulnerable populations.

### 2015 Cluster Shelter and NFI Priorities



1. Effective delivery of needs-based lifesaving non-food items and acute emergency shelter for conflict-affected people, with a focus on the most vulnerable.
2. The provision of locally appropriate and sustainable shelter solutions.
3. Procurement, transportation, pre-positioning and storage of shelter and NFI to ensure efficient delivery to those in need.

Since the start of the crisis, IOM have deployed mobile teams to over 50 locations to reach beneficiaries with shelter materials and NFI, including to the most remote and difficult to access areas. Additional activities such as assessments, verifications and registrations are ongoing. IOM’s Shelter NFI mobile rapid response team will continue to conduct distributions, provide support to and augment the capacity of partners, and carry out monitoring of ongoing and completed interventions.

IOM will continue to lead the Shelter NFI cluster and manage the Cluster’s core pipeline. As Cluster lead, IOM will ensure that the overall shelter and NFI response is supported by robust planning and coordination, and accurate information gathering and sharing on a timely basis. Already, 83 per cent of planned preposition locations have been stocked.

IOM will continue to preposition core pipeline materials, and ensure that distributions are well-coordinated and in line with Cluster standards and policies. Essential technical guidance and support will be provided to complement the capacity of partners and ensure that activities of over 20 partners are effective and efficient. Training and other capacity building exercises will also be provided to strengthen overall coordination and the quality of response.

### SHELTER AND NFI PROGRAM REQUIREMENTS FOR 2015

CAP Code	Title	Budget (USD)
SSD-15/S-NF/73065	Provision of Emergency NFIs and Shelter to Conflict-Affected People in the Republic of South Sudan	40,040,507
SSD-15/S-NF/73068	Republic of South Sudan Shelter and NFI Cluster Coordination	2,118,923
<b>Total</b>		<b>42,158,800</b>



IOM SOUTH SUDAN



## WATER SANITATION AND HYGIENE (WASH)



IOM/JACOB ZOCHERMAN

At the end of 2014, the WASH Cluster had anticipated a significant strain on existing WASH infrastructure. In 2015, this has manifested particularly in remote areas where IDPs are temporarily settling with host communities that already had little or no access to basic services prior to the crisis.

Additionally, the rising population in UNMISS PoC sites and large spontaneous settlements has necessitated rapid scaling up of emergency WASH services. Renewed insecurity in Unity and Upper

Nile has also reduced the capacity of WASH partners to respond. Shifting battlefronts have meant some populations have been cut-off, such as those in Melut, in Upper Nile State. With the onset of the rainy season, the humanitarian community anticipates an increase in waterborne diseases, such as cholera.

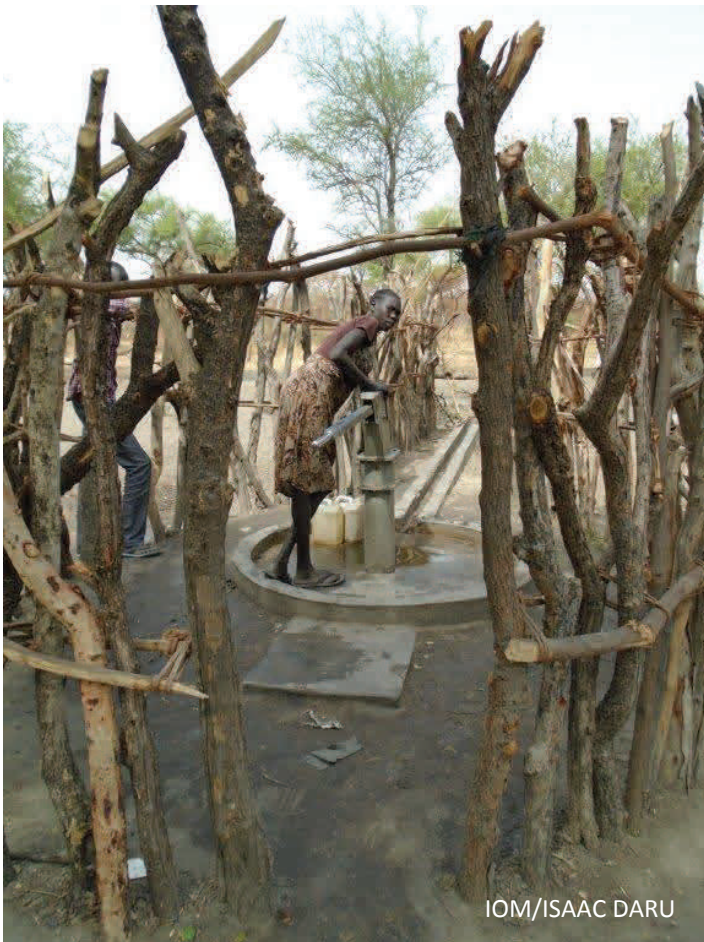
The WASH Cluster's main objectives are to assist 3.5 million people, out of a 6.4 million people in need. Assistance will be provided through ensuring that affected populations have safe, equitable, and sustainable water for drinking, cooking, and personal and domestic hygiene; ensuring affected populations have access to safe, sanitary and hygienic living environments through the provision of secure, gender-appropriate sanitation services; and reducing the risk of waterborne diseases through a strengthened focus on preventative activities, including a hygiene promotion strategy focused around behavior change. Responding to new displacements and access concerns in remote locations, WASH partners are collaborating on the development and delivery of multisectoral survival kits.

**IOM's Emergency WASH program for 2015 is designed to contribute to Cluster objectives. Specifically, the IOM WASH program will:**

1. Set up, rehabilitate and operate water systems in the PoCs and in other locations identified by the cluster to ensure that the crisis affected populations have sustainable access to safe water.
2. Establish and maintain emergency latrines, bathing facilities and other sanitation facilities.
3. Build the capacity of crisis affected community members to disseminate hygiene messages and the implementation of hygiene promotion events/campaigns.



IOM/PATRICK MUTONGA



Building on achievements from 2014, IOM continues to serve as a key WASH partner providing life-saving services in the Bentiu, Malakal and Melut PoCs. Throughout the second half of 2015, IOM will continue to work to build WASH standards within PoC sites to meet emergency standards, alongside collaborating with the Health Sector to both prevent and respond appropriately to disease outbreaks.

IOM is already working to implement longer-term, sustainable services, such as shared household latrines rather than communal toilets and boosting community participation in operation and maintenance of facilities. This is a major part of OCHA's adjusted overall WASH Strategy to better use available resources in sites.

IOM recognizes the increased need to provide emergency WASH services, in remote locations where IDPs have fled to avoid conflict and where existing WASH services are not able to meet the needs of the displaced population and the communities hosting them, such as old or poorly constructed boreholes. In the second half of 2015, IOM will continue to deploy its mobile rapid

response team to remote field locations in urgent need of emergency WASH services.

IOM will continue to support the WASH Cluster through the procurement and management of 12 per cent of the Cluster's core pipeline, enabling the provision of essential WASH items to help partners meet urgent needs. IOM continues to undertake the procurement, storage and transport of WASH items and ensure that the quality of supplies meet the required standards as set by the Cluster.

IOM is the Cluster State Focal Point for Upper Nile State. As State Focal Point, IOM supports the overall coordination of WASH activities, ensures that Cluster strategies and priorities are implemented at state level and that information is passed on to the national level to inform development of the overall Cluster strategy. IOM provides partners with technical support and refers urgent gaps to the WASH Cluster Coordinator for immediate advocacy and response.

## WASH PROGRAM REQUIREMENTS FOR 2015

CAP Code	Title	Budget (USD)
SSD-15/WS/72658	Provision of emergency WASH assistance for emergency affected populations in South Sudan	11,958,620
SSD-15/WS/72662	Procurement, prepositioning, and management of Core Pipeline WASH emergency supplies to support the enhancement of the WASH sector's preparedness and response in South Sudan.	4,900,000
<b>Total</b>		<b>16,858,620</b>



# HEALTH

Access to primary health care (PHC) services continues to elude the majority of the population. In the three most conflict affected states, 57% of health facilities are non-functioning, making it vital to provide life-saving care through mobile/semi-static clinics in areas highly populated with vulnerable individuals. There are 4.6 million people in need, with the Cluster aiming to assist 1.76 million. South Sudan has among the worst global health indicators; with a maternal mortality rate of 2,054/100,000 live births and an infant mortality rate of 102/1000 live births. Evidence shows that population displacement exacerbates poor health outcomes due to lack of access to preventive, curative and referral services, destruction of public health infrastructure, and disruption of continuity of care. A seasonal increase in waterborne diseases such as cholera leaves populations - especially those living in crowded settlements - at high risk during the next six months.



The cessation of provision of essential medicines through the Essential Medicines Fund will have humanitarian consequences, especially as it is unlikely to be replaced by government procured medicines. This will likely drive an accelerated spread of disease, rendering vulnerable populations in the most need and leading to increased pressure on health partners.

The rising populations in PoCs where IOM clinic are situated throughout early 2015 has created additional pressures on health human resources and consultation spaces.

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Health risk factors such as overcrowding, poor hygiene and sanitation practices, seasonal disease outbreaks, and chronic exposure to violence have made women, men, boys and girls more vulnerable to ill health. A rise in malnutrition has and will continue to affect overall health needs. These risk factors illustrate the criticality of ensuring that life-saving services are supported and scaled up during 2015.

IOM provides lifesaving PHC and referral services and comprehensive reproductive health care, as well as health education in Upper Nile and Unity States. IOM integrates capacity building of health workers and IDPs on HIV Counselling and Testing and has an active role in the WASH Cluster - synergistic programming ensuring that approaches to health and hygiene are harmonized and effective.

In 2015 IOM has conducted more than 14,566 consultations and over 1,700 reproductive care services in Malakal, and over 18,450 consultations in Renk County. In Bentiu, IOM has facilitated 250 midwife attended births in 2015 and over 2,070 consultations. Overall, IOM has vaccinated more than 12,350 children through routine vaccinations. The health rapid response team continues to provide services in remote areas, reaching 168,439 beneficiaries since July 2014.

In the last two months, consultations at the Bentiu clinic have increased by 97% from 448 in week 21 to 2069 in week 24. Population influx and IOM's reliability for medication and good service are contributing factors.

IOM's health response aims to contribute to the prevention, diagnosis and treatment of HIV and Tuberculosis among IDPs. Follow-up and treatment for TB is lagging behind other responses. IOM aims to integrate community based awareness on TB prevention while simultaneously working with the National TB Program and partners to identify appropriate interventions for diagnosis and treatment of TB, including co-infection with HIV.

**IOM's planned response for 2015 is in line with the priorities of the Health cluster:**

1. Improve access to and responsiveness of essential services including emergency health care and emergency obstetric care services.
2. Enhance existing systems to prevent, detect and respond to disease outbreaks.
3. Improve availability, access and demand for services targeting highly vulnerable people.



### HEALTH PROGRAM REQUIREMENTS FOR 2015

CAP Code	Title	Budget (USD)
SSD-15/H/72864	Sustaining Life-saving Primary Health Care Services and Provision of Rapid Response and Psychosocial Support for Vulnerable IDPs, Returnees and Affected Host Communities in Upper Nile, Unity, and Jonglei States	<b>5,200,000</b>
<b>Total</b>		<b>5,200,000</b>





The scale and brutality of the conflict has resulted in significant needs for counseling and psychosocial assistance. CCCM and Protection actors continue to report the high need for psychosocial support in displacement sites, since individual and collective uneasiness has been evident from the onset of the crisis. Fighting has stretched already vulnerable peoples' coping capacities to their limits. Denial of freedom of movement, forced recruitment and use of children, and high levels of gender based violence including conflict-related sexual violence affect the wellbeing of individuals, families and communities.

Separation from loved ones has caused significant distress and is highlighted as a concern by community leaders. Factors relating to distress can largely be attributed to the protracted crisis and long term repercussions for community life.

**The Protection Cluster aim to assist 2.2 million out of an estimated 4.6 million people in need. Objectives are for:**

- IDPs and conflict-affected populations facing protection risks and threats provided with timely protection response and prevention services.
- Protection needs of the most vulnerable IDPs and conflict-affected populations identified through effective protection monitoring, reporting and response, including promoting safe movement and durable solutions.
- Vulnerable persons affected by violence have the skills, opportunities and positive coping strategies required to return and reintegrate into their communities in safety and dignity.

While emotional and social tensions are a normal consequence of a prolonged displacement period, there is a urgent need to support non-clinical interventions that can manage negative emotional outcomes, preventing escalation of individual and social pathologies.

IOM South Sudan are one of few Agencies responding with psychosocial assistance. IOM is expanding current psychosocial awareness and identification programming to Bentiu PoC in Unity and strengthening existing programming in Bor PoC in Central Equatoria. 2,500 vulnerable individuals will be targeted for assistance through the immediate strengthening of family and community coping mechanisms and the provision of psychological counselling services. IOM intends to use a threefold approach:

- Alleviate distress by attaching a Mental Health and Psychosocial (MHPSS) expert to the CCCM Cluster. This expert will provide advice on how to mainstream MHPSS into camp design, set up and management, and carry out inductions on psychological first aid and ‘do no harm’ principles.
- Training for community members in basic psychosocial support and counselling activities, and facilitation of discussion groups by qualified professionals. Expertise gained will be kept within the community.
- Strengthening psychosocial capacity. To promote integration within local structures, the University of Juba will be involved in the development, implementation and follow up of the trainings and direct services.



IOM SOUTH SUDAN

## PROTECTION PROGRAM REQUIREMENTS FOR 2015

CAP Code	Title	Budget (USD)
SSD-15/P-HR-RL/72882	Enhancing the Psychosocial Well-being of Internally Displaced Persons and Conflict Affected Populations.	449,250
<b>Total</b>		<b>449,250</b>

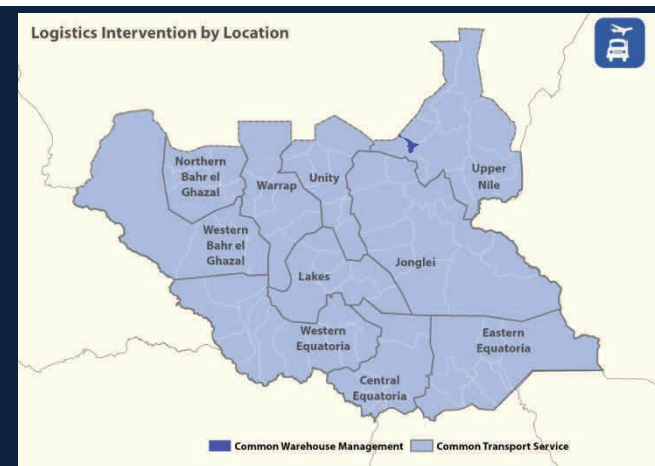




IOM/SHERIF AHMETAJ

South Sudan remains one of the most logistically challenging countries in Africa for the movement of humanitarian cargo, as routine transportation is both costly and labor intensive. South Sudan has one of the least developed road and transport networks in the world, with over 600,000 square kilometers of land to traverse and almost no paved roads. The rainy season makes much of the road network inoperative, and barge and air transportation unreliable. Regional insecurity makes the delivery of humanitarian aid an expensive and difficult exercise. Insecurity regularly restricts the ability of aid organizations to reach communities, meaning that partners often rely on helicopters and airplanes to deliver lifesaving assistance. Given the logistical complexity of the South Sudan operation due to scarce resources, poor infrastructure and lack of systematic information, coupled with the scale of the overall humanitarian response, a coordinated logistics response is required to ensure effective and efficient delivery of humanitarian assistance.

IOM operates the Common Transport Service (CTS), moving over 3,000 Metric tons of humanitarian cargo across South Sudan. The CTS program has been operational since 2008 and operates within the Logistics Cluster to provide partners with transport assistance through the movement of humanitarian cargo by road. IOM operates a fleet of 13 vehicles through the CTS program to ensure that essential humanitarian cargo is transported, warehoused and distributed appropriately.



In 2015, IOM will continue to focus on prepositioning humanitarian cargo, such as emergency shelter and WASH pipeline items, in strategic locations countrywide.

During the onset of the crisis, humanitarian assets were looted from offices and warehouses throughout the country. In many locations, commercial storage options are not available and insecurity limits options for humanitarian partners to maintain storage facilities.

IOM's program has increased the ability of humanitarians to procure and store necessary items during 2015. IOM has managed the Logistics Cluster's common warehouses in Malakal and Bor since 2014, serving 32 partners. In Malakal IOM has increased the Logistics Base and vastly upgraded and improved the warehouse facilities, providing a secure area to accommodate 20 storage units. In Bentiu, a common services platform is being developed, including space for 42 mobile storage units, perimeter fencing and lighting and a road network. The Logistics Base will also include a new workshop area, two bunkers, 32 office blocks and ablutions.

Common warehousing within the UNMISS bases must continue to operate. Clusters that are managing core pipelines are anticipating pre-positioning most items in UNMISS bases in 2015 as a result of continued unpredictability of the security situation. There is a need to ensure that common warehousing within the UNMISS bases continue to operate and, where necessary, scale up in order to facilitate effective pre-positioning and distribution of essential humanitarian items. The program needs to expand in order to ensure effective pre-positioning and distribution of humanitarian items. IOM will continue to manage the common warehousing service in Malakal on behalf of the logistics cluster, providing warehousing support to all humanitarian partners operating in Upper Nile State.



IOM/SHERIF AHMETAJ

CAP Code	Title	Budget (USD)
SSD-15/CSS/72409	Humanitarian Common Logistics Services in the Republic of South Sudan	4,806,440
<b>Total</b>		<b>4,806,440</b>



## IV. Overall Funding Requirements for Humanitarian Response in 2015

IOM's readjusted humanitarian program requirement for 2015 is 122 million.

Cluster	CAP Code	Title	Amount (USD)
CCCM	SSD-15/CSS/72412	Republic of South Sudan Camp Coordination and Camp Management (CCCM) Cluster Coordination	6,117,500
CCCM	SSD-15/CSS/72414	Improving conditions in IDP sites through site development and expansion, upgrading of humanitarian hubs and assistance to stranded foreign nationals	32,382,455
Coordination and Common Services	SSD-15/CSS/72409	Humanitarian Hubs Set-Up and Support for South Sudan	14,373,438
Shelter/NFI	SSD-15/S-NF/73065	Provision of Emergency NFIs and Shelter to Conflict-Affected People in South Sudan	40,040,507
Shelter/NFI	SSD-15/S-NF/73068	Republic of South Sudan Shelter and NFI Cluster Coordination	2,118,923
WASH	SSD-15/WS/72658	Provision of emergency WASH assistance for emergency affected populations in South Sudan	11,958,620
WASH	SSD-15/WS/72662	Procurement, prepositioning, and management of Core Pipeline WASH emergency supplies to support the enhancement of the WASH sector's preparedness and response in South Sudan.	4,900,000
Health	SSD-15/H/72864	Sustaining Life-saving Primary Health Care Services and Provision of Rapid Response and Psychosocial Support for Vulnerable IDPs, Returnees and Affected Host Communities in Upper Nile, Unity, and Jonglei States	5,200,000
Protection	SSD-15/P-HR-RL/72882	Enhancing the Psychosocial Well-being of Internally Displaced Persons and Conflict Affected Populations	449,250
Logistics	SSD-15/CSS/72409	Humanitarian Common Logistics Services in the Republic of South Sudan	4,806,440
<b>Total</b>			<b>122,347,133</b>

## V. Linking Humanitarian Response to Peace-building and Development: IOM's Transition and Recovery and Migration Management Programs

### Transition and Recovery: Peace Building and Community Stabilization

With an operational presence in South Sudan since 2005, IOM has extensive experience in post-conflict transition and recovery programming. Transition and Recovery programming utilizes community-based peacebuilding and conflict mitigation strategies to foster communication and accountability between all sectors of society. Programs promote dialogue and boost local economies through facilitating trade and income-generation, and construction or rehabilitation of key infrastructure and raising awareness through various media sources.

Programming stresses the importance of peace for development and the necessity of assuming responsibility for the sustainability of projects, within an overarching framework of cooperation with government institutions. Beneficiaries are active in programming development, leading to the continuity of humanitarian interventions and an effective, sustainable transition to recovery and development.

IOM's interventions focus on key geographic areas where peace-building and community stabilization interventions are possible and necessary, particularly in Jonglei State and the Abyei administrative area. Interventions include small scale infrastructure repair such as the rehabilitation of the Bor Market following destruction during the onset of the crisis. Representatives from different ethnic groups came on board to work together to repair the area, which lead to a successful restart for the traders. In Abyei, program beneficiaries

participate in literacy and business skills classes and vocational training, alongside efforts to build confidence and trust in local institutions.



#### IOM's Transition and Recovery interventions continue to:

- Build the capacity of community-based organizations to improve abilities to carry out peace-promotion interventions.
- Construct and rehabilitate community infrastructure to promote returns, where possible.
- Instigate livelihood and vocational training for at-risk youth and women.
- Develop and spread messaging on peace promotion and awareness raising.



The Transition and Recovery program requirement for 2015 is 16 million



## Immigration and Border Management

IOM has been implementing the Migration and Border Management program in South Sudan since 2010. Major achievements of the program include establishing and installing Border Management Information Systems at Juba International Airport and ten land borders, renovating three and constructing seven border points, constructing an immigration training center, and developing the immigration procedure manual and migration management training modules.

Immigration and law enforcement officers have benefitted from migration training led by IOM for the past five years. Trainings are conducted on migration related themes such as human trafficking and migrant smuggling, border security, migration data management and migration intelligence. In collaboration with the Government of the Republic of South Sudan, IOM has helped 264 foreign nationals apply for a Temporary Stay Permit, allowing those people to regularise their stay and work legally. 159 Somali's have applied for a Somalian passport through the program.

The Immigration and Border Management Program Requirement for 2015 is 3.5 million dollars

Mobile and migrant populations especially IDPs, women and children remain the most vulnerable during crisis. They are often exploited and abused and receive limited targeted assistance. It is important to reach out to these groups and reduce their vulnerability and offer possible solutions. IOM aims to undertake the following activities as part of the ongoing effort to contribute towards migration management:



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following activities as part of the ongoing effort to contribute towards migration management:

- Improve the government's capacity in border security while facilitating the movement of people to and from South Sudan, where appropriate. This includes assisting the government's effort to digitalize the alien registration system and supporting the legalization of foreign nationals in South Sudan.
- Build the capacity of the Government of the Republic of South Sudan in Humanitarian Border Management (HBM), enabling the government to respond to mass migration from and to South Sudan in time of crisis and emergencies, while ensuring border security is maintained.
- Protect vulnerable migrants from smuggling and trafficking, through awareness campaigns and outreach in PoC sites, IDP settlement areas, and selected cities. IOM will work with migrants from neighboring countries with no legal immigration status who are at risk and vulnerable.
- With UNICEF, the Child Protection Sub-Cluster and ICRC, explore durable solutions for migrant and mobile children especially unaccompanied and separated children (UASC) affected by the crisis.

**For more information please contact the IOM South Sudan  
Program Support Unit at [ssudanpsu@iom.int](mailto:ssudanpsu@iom.int)**

<http://southsudan.iom.int/crisis>

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