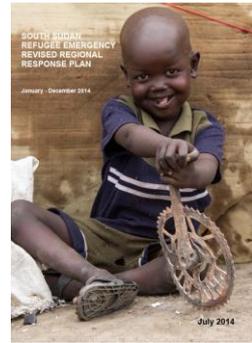


**South Sudan Refugee Emergency
Revised Regional Response Plan
January – December 2014**



Consequences of underfunding

Despite generous contributions from donors to the South Sudan Refugee Emergency, the revised Regional Response Plan (RRP) is only **24** per cent funded. The lack of funding for the critical needs assessed is causing further hardship and risks for the South Sudanese refugees. In all of the countries receiving South Sudanese refugees, namely, Ethiopia, Kenya, Uganda and Sudan, more and more refugees who arrive are extremely undernourished and in poor health, suffering from varying degrees of psychological trauma, and in dire need of basic survival items, shelter, water and sanitation.

What this means for the refugees and our humanitarian efforts:

Physical presence of humanitarian workers for border monitoring and screening procedures remains a critical need. Lack of funding will mean less staffing capacity to monitor borders and carry out identification procedures.

- ***Access to food*** remains the most critical need in all the countries of asylum. New arrivals who have travelled for days in extreme conditions without adequate food desperately need immediate support. Given the importance of food- both for ensuring refugees' survival and well-being as well as for maintaining security and stability in the camps - food assistance is a top priority. In the event of a funding shortfall, WFP will not be able to deliver enough food rations for the refugees.
- Children and pregnant and lactating women, in particular, are affected by ***acute malnutrition***. The food and nutrition situation continues to deteriorate in South Sudan, and it is anticipated that the rates of malnutrition amongst new refugee arrivals in surrounding countries will increase. This requires a robust response capacity, including nutrition screening and referrals, as well as the provision of critical services for the prevention and treatment of acute malnutrition, and supplementary feeding.
- In all refugee-receiving countries, children constitute a very high percentage of the total refugee arrivals - ranging from 65 to 73 per cent; and the majority of the adult refugee populations are women, making them a very vulnerable group. The children include more than 14,000 unaccompanied and separated children across the region some of whom require alternative care and individual case management as well as regionally coordinated tracing and reunification with their families. Without adequate funding, ***individuals with specific needs will not be properly***

identified and supported, leaving an increased number of *women and children at risk of violence, exploitation and abuse*.

- Local health facilities at the border entry points are rarely equipped to deal with the increasing influx of refugees in very poor health; this results in critical challenges in meeting the needs not only of the refugees but also of the local host communities. Insufficient support for national systems to help sustain *primary and secondary health services* is likely to further limit access and availability of health services for refugees and local people (including reproductive health and mental health through psycho-social support).
- *Poor sanitary conditions* in the refugee sites pose a major public health risk. They include potential *communicable disease outbreaks, such as cholera, which has spread significantly inside South Sudan in recent weeks*. The water and sanitation situation for the host communities has also been adversely affected. Inadequate funding will have a serious impact on the *provision of potable water*, critical hygiene promotion and cholera prevention activities, as well as on the construction of communal and family latrines which are critical to avoid the spread of diseases.
- Funding shortages will affect timely procurement, pre-positioning and transportation/distribution of *immediate life-saving emergency shelters, shelter support materials and other non-food items*, exposing the refugees to further hardship.
- A funding shortfall will force humanitarian actors to *prioritize life-saving interventions at the expense of providing access to quality education. Education is critical in providing a protective environment for children, promoting peace-building among children and young people, and providing a platform to reach children with a range of essential services*. These include: the need to establish and maintain temporary learning spaces with gender-sensitive WASH facilities; the distribution of essential teaching, learning and recreational supplies; the identification and recruitment of teachers; and the consolidation of arrangements for access to formal education, including the rehabilitation of existing schools to serve both refugees and host communities.
- The *hosting communities are* bearing the brunt of the South Sudanese refugee influx. Inadequate support for local structures and service delivery will cause gaps in the delivery of assistance and services to South Sudanese refugees, straining local services and impacting on the host communities. It is a priority for all programming to incorporate a host-community component from the onset of the emergency to ensure that a protective environment can be provided, promoting social cohesion for the refugees and the host communities.

9 July 2014