SOUTH SUDAN

EXPENDITURE (IN KCHF)	
Protection	3,628
Assistance	25,260
Prevention	2,588
Cooperation with National Societies	2,054
General	-

33,531
of which: Overheads **1,992**

IMPLEMENTATION RATE	
Expenditure/yearly budget	134%

PERSONNEL	
Expatriates	53
National staff (daily workers not included)	255

KEY POINTS

In 2012, the ICRC:

- visited 17 Sudanese POWs, monitoring their welfare and acting as a neutral intermediary in the repatriation of 13 of them and of 19 South Sudanese POWs from Sudan back to South Sudan
- secured full access to people held in places of detention under the National Prisons Service
- with local health teams, provided surgical care to 221 weapon-wounded people and medical supplies for the treatment of some 900 injured patients
- apart from providing emergency relief, helped communities rebuild their livelihoods by enabling over 8,100 households to improve their harvests with agricultural inputs and 4,100 households to have their livestock vaccinated
- supported the "South Sudan Red Cross" in helping refugees and children restore contact and reunite with their families, including through a phone service that facilitated some 1,500 calls
- welcomed South Sudan's accession to the 1949 Geneva Conventions and their Additional Protocols and the adoption of the South Sudan Red Cross Act

The ICRC opened a delegation in newly independent South Sudan in mid-2011, although it has been present in Juba since 1980. It works to ensure that people affected by armed conflict are protected in accordance with IHL, have access to medical care, from first aid to surgery to physical rehabilitation, receive emergency relief and livelihood support, have access to safe water and can restore contact with relatives. It seeks to increase knowledge of IHL among the authorities and armed forces. It also works with and supports the "South Sudan Red Cross Society".

CONTEXT

In disputed areas between South Sudan and Sudan, military confrontations escalated into an international armed conflict between the Sudan People's Liberation Army (SPLA) and the Sudanese Armed Forces. A comprehensive agreement defining, among other things, a demilitarized border zone was signed in September; however, discord over its implementation remained.

Sporadic clashes erupted between armed groups and the SPLA, particularly in Jonglei, Unity and Upper Nile states. Intercommunal violence persisted, affecting mainly Jonglei and, to a lesser extent, Lakes, Northern and Western Bahr al-Ghazal, and Warrap states.

As a result, thousands of people were wounded, killed or displaced. Humanitarian needs were exacerbated by the heavy influx of refugees from Sudan's Blue Nile and South Kordofan states to South Sudan's Unity and Upper Nile states. Insecurity hampered civilian access to already meagre basic services, including health care.

Communities in Bahr al-Ghazal and Western Equatoria continued to cope with the consequences of past activities of the Lord's Resistance Army (LRA).

ICRC ACTION AND RESULTS

The ICRC expanded and adapted its operations in South Sudan, particularly in Northern Bahr al-Ghazal, Unity, Upper Nile and Western Bahr al-Ghazal states, aiming to protect and assist people suffering the effects of the armed conflicts and other situations of violence.

With its neutral, impartial and independent stance, the ICRC engaged in dialogue with the relevant parties to gain safe access to people in need and to promote respect for those not or no longer taking part in fighting. It monitored the detention conditions of Sudanese POWs and other detainees and facilitated the voluntary repatriation of 13 POWs to Sudan after their release. Following a high-level detention seminar, the Ministry of the Interior granted the ICRC full access to detainees under the jurisdiction of the National Prisons Service in December.

In spite of security- and climate-related difficulties, the "South Sudan Red Cross" and the ICRC responded, using a multidisciplinary approach, to both emergency and longer-term humanitarian needs, even in areas that few or no other humanitarian actors were able to reach. As the ICRC's main operational partner, the "South Sudan Red Cross" developed its capacities with training and material support and received guidance in its efforts to achieve recognition by the Movement.

Main figures and indicators PROTECTION	Total		
CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages (RCMs)		UAMs/SCs*	
RCMs collected	769	43	
RCMs distributed	271	15	
Phone calls facilitated between family members	1,520		
Reunifications, transfers and repatriations			
People reunited with their families	29		
including people registered by another delegation	5		
People transferred/repatriated	6		
Tracing requests, including cases of missing persons		Women	Minors
People for whom a tracing request was newly registered	164	25	7
People located (tracing cases closed positively)	54		
including people for whom tracing requests were registered by another delegation	9		
Tracing cases still being handled at the end of the reporting period (people)	219	13	43
UAMs/SCs*, including unaccompanied demobilized child soldiers		Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	30	18	9
UAMs/SCs reunited with their families by the ICRC/National Society	21	11	6
including UAMs/SCs registered by another delegation	5		
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	39	19	7
Documents			
People to whom travel documents were issued	17		
Official documents relayed between family members across borders/front lines	1		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)			
ICRC visits		Women	Minors
Detainees visited	61		
Detainees visited and monitored individually	61	1	
Detainees newly registered	61	1	
Number of visits carried out	22		
Number of places of detention visited	8		
Restoring family links			
RCMs collected	55		
RCMs distributed	1		
Phone calls made to families to inform them of the whereabouts of a detained relative	2		
Detainees released and transferred/repatriated by/via the ICRC	13		

* Unaccompanied minors/separated children

The "South Sudan Red Cross" and the ICRC responded to immediate needs arising from clashes. Tens of thousands of displaced persons and residents, mainly in the northern states, benefited from shelter materials and food that helped them survive, especially during the difficult rainy season. Casualties received first aid from "South Sudan Red Cross" personnel. A mobile ICRC surgical team based at the Malakal Teaching Hospital, along with the provision of medical supplies and technical support, helped hospitals cope with frequent influxes of patients. In Malakal, a newly deployed paediatric team attended to children afflicted with malaria, malnutrition or other ailments.

In view of the scale of humanitarian needs, the "South Sudan Red Cross" and the ICRC complemented efforts by other organizations to assist refugees in camps. Over 73,000 refugees in two camps in Maban county (Upper Nile), for example, benefited from improvements to water networks bringing safe water into their camps, while 97,200 people in all four camps received household items. The "South Sudan Red Cross" provided RCM and phone services to enable refugees to exchange news with relatives, mainly in Blue Nile and South Kordofan, Sudan. In Western Equatoria, children formerly associated with weapon bearers re-established contact and reunited with their families, including across the border in the Democratic Republic of the Congo.

Whenever possible, communities received assistance in rebuilding their livelihoods. The distribution of seed and tools led to better harvests for 8,100 households (49,100 people), while a seed multiplication programme encouraged farmers to produce more seed for their communities. Distributions of fishing kits and livestock helped improve food security for other households. Pastoralists preserved the quality of their livestock with enhanced veterinary services, including vaccination campaigns, organized in cooperation with the Ministry of Animal Resources and Fisheries. Rural and urban water committees built/repaired vital water infrastructure to ensure a reliable water supply for household or agricultural use.

The ICRC continued supporting the Physical Rehabilitation Reference Centre (PRRC) in Juba and began supporting a rehabilitation centre in Rumbek. Patients gained improved mobility and independence with prosthetic/orthotic devices and physiotherapy services provided by these centres.

The ICRC continued to foster relations with civil and military authorities to promote respect for IHL. Technical advice contributed significantly to South Sudan's accession to the 1949 Geneva Conventions and their Additional Protocols and its adoption of the South Sudan Red Cross Act. With ICRC support, the SPLA continued to work towards the integration of IHL into its doctrine and operations.

The ICRC continued to coordinate its activities with those of Movement partners and other humanitarian actors in order to identify unmet needs and maximize impact.

Main figures and indicators	ASSISTANCE		Total	Women	Children
CIVILIANS (residents, IDPs, returnees, etc.)					
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)					
Food commodities		Beneficiaries	74,934	37%	38%
of whom IDPs		Beneficiaries	23,979		
Essential household items		Beneficiaries	142,672	36%	43%
of whom IDPs		Beneficiaries	39,948		
Productive inputs		Beneficiaries	95,934	30%	48%
of whom IDPs		Beneficiaries	21,090		
Water and habitat activities		Beneficiaries	189,900	40%	30%
of whom IDPs		Beneficiaries	75,200		
WOUNDED AND SICK					
Hospitals					
Hospitals supported		Structures	11		
of which provided data		Structures	1		
Admissions		Patients	730	136	171
of whom weapon-wounded		Patients	221	55	6
(including by mines or explosive remnants of war)		Patients	5		
of whom other surgical cases		Patients	509		
Operations performed			816		
First aid					
First-aid posts supported		Structures	1		
Wounded patients treated		Patients	25		
Physical rehabilitation					
Centres supported		Structures	3		
Patients receiving services		Patients	2,114	434	147
New patients fitted with prostheses		Patients	76	11	8
Prostheses delivered		Units	212	41	14
of which for victims of mines or explosive remnants of war		Units	55		
New patients fitted with orthoses		Patients	33	7	14
Orthoses delivered		Units	91	25	25
Number of patients receiving physiotherapy		Patients	791	161	79
Crutches delivered		Units	883		
Wheelchairs delivered		Units	211		

CIVILIANS

Civilians' protection is monitored and family links restored

With the escalation of violence in areas bordering Sudan, regular meetings with civil and military authorities provided the ICRC with opportunities to promote IHL based on observations made by delegates on the humanitarian consequences of the armed conflicts. These authorities and the ICRC engaged in dialogue to address documented allegations of abuses, including those related to sexual violence, by weapon bearers near the border and around refugee camps. Measures to foster respect for those not or no longer taking part in fighting in accordance with IHL were discussed. Coordination with other humanitarian actors enabled victims to be referred for medical/psychological care. Reports of abuses from refugees provided background information for the ICRC's work in Sudan (see *Sudan*).

Having fled fighting in the South Kordofan or Blue Nile states of Sudan, people taking refuge in South Sudan (in Jamam and Yida camps, for instance) re-established links with their families at home using the RCM and phone services of the "South Sudan Red Cross", which established a new tracing office in Juba and expanded its network with ICRC support.

In Western Equatoria, children formerly associated with weapon bearers re-established contact with relatives. Twenty-one of them were reunited with their families, including across the border in the Democratic Republic of the Congo.

Communities receive relief and livelihood assistance

Amid difficult environmental and security conditions, the "South Sudan Red Cross" and the ICRC worked to provide conflict-affected civilians with timely emergency assistance and, whenever possible, livelihood support. To strengthen their capacities, 19 Red Cross emergency action teams participated in emergency-response and first-aid training. These teams, as well as local authorities in Juba and Malakal, also learnt more about the management of human remains and benefited from psychological support.

IDPs and residents, mainly in Agok, Jaac and the Shilluk Kingdom, met their immediate needs with emergency aid. Some 55,000 people received food supplies for up to one month, and over 45,400 people received tarpaulins, blankets, mosquito nets and other essentials. This assistance partly alleviated the burden on host communities and enabled displaced families, including those affected by floods in Aweil, to construct temporary shelters. Because of insecurity, only the "South Sudan Red Cross" and the ICRC were able to reach some of these people, such as around 17,500 displaced in Jaac in April.

Nearly 16,000 rural households (96,000 people) restored or maintained a degree of self-sufficiency with the help of livelihood support. Through crop and livestock farming and fishing, they were able to sustain themselves without foraging or hunting in the bush, thus reducing their exposure to violence-related risks. Beneficiaries included people in border villages in the Agok area, and in Jonglei and Upper Nile, and those affected by the activities of the LRA in Western Bahr Al-Ghazal and Western Equatoria.

Some 8,100 households (49,100 people), including returnees whose assets had been looted or destroyed, received seed and tools. Some of them benefited from a half-month food ration to ensure that the seed would not be consumed before being planted. A post-harvest survey in Agok showed that farmers found the harvest generally good, although better dissemination of information on cultivating different crop varieties was recommended. In Western Equatoria, the Ministry of Agriculture and Forestry and the ICRC organized seed multiplication farming groups tasked with producing locally adapted seed and recovering crops destroyed by conflict/violence. Seventy-two farmers planted 720 kg of maize during the second half of 2012. To ensure the sustainability of the programme, they were expected to return the same amount of maize out of their expected yield of about 3,600 kg. The returned seed would be distributed to other beneficiaries in 2013.

Within the framework of a tripartite agreement, the Vétérinaires Sans Frontières-Germany, the Ministry of Animal Resources and Fisheries, and the ICRC worked together to help pastoralists including in counties near the border with Sudan maintain the quality of their livestock. Forty community animal health workers updated their skills during refresher courses, while 36 new staff provided veterinary services after undergoing training. This enabled some 4,100 households (25,000 people) to have their animals (some 277,500 heads) vaccinated against fatal diseases. In response to livestock disease outbreaks, sick animals were given emergency treatment (as in Maban), and some affected households received sheep and goats and/or veterinary supplies. Over 1,900 households (11,200 people) pursued fishing activities with ICRC-supplied kits.

Displaced people and residents gain access to clean water

Over 189,900 people, mostly in remote and conflict-affected areas along the border with Sudan, accessed clean water following emergency and longer-term initiatives implemented by local water boards, the "South Sudan Red Cross" and the ICRC. These initiatives enabled people to avoid drinking from open ponds or walking several kilometres to obtain drinking water, thereby contributing to their improved health and safety.

Over 73,000 people in two refugee camps in Maban county, Upper Nile, gained access to clean water following emergency interventions carried out by the ICRC in coordination with other humanitarian organizations on the ground. In Batil, for instance, some 37,200 people had unrestricted access to safe water following the ICRC's reorganization of the camp's water production and distribution system, construction of 16 water points and training of local technicians. Upon the completion of the project, two NGOs, GOAL and Solidarités International, took over the maintenance of these structures, backed by manuals, equipment and spare parts from the ICRC. In Jamam, the installation of pumps and a 15-kilometre pipeline brought clean water to some 36,000 refugees. In addition, over 97,200 people in all four refugee camps in Maban county received hygiene items, helping prevent water contamination and the spread of water-borne diseases, such as cholera.

People in violence-prone areas also benefited from projects aimed at improving their long-term access to water. Some 40,500 people in Bentiu and Rubkona had access to clean water following the repair of water treatment plants. The repair of a water yard and hand pumps benefited some 37,200 people in northern Unity and Northern and Western Bahr al-Ghazal, while the construction of three solar water yards benefited some 37,000 residents and IDPs in Akobo county, Jonglei. The local water committee in Akobo better managed water systems and solar water yards following receipt of technical assistance, training and spare parts. Technicians in other regions likewise learnt to maintain their water facilities.

PEOPLE DEPRIVED OF THEIR FREEDOM

In eight military places of detention, 17 Sudanese POWs and 44 other detainees were visited according to the ICRC's standard procedures to help ensure that their treatment and living conditions complied with the Third Geneva Convention and other internationally recognized standards. After these visits, delegates reported their findings confidentially to the authorities and made recommendations as necessary. In the places visited, detainees received basic items, including clothes and hygiene kits, which contributed to healthier living conditions, and exchanged news with their families through RCMs. At their request, five foreign detainees had their embassies notified of their detention.

Upon their release, 13 POWs were repatriated to Sudan according to their wishes, under the auspices of the Egyptian government and with the ICRC acting as a neutral intermediary.

Nineteen SPLA soldiers were also repatriated from Sudan under ICRC auspices, and were visited to ensure they had contact with their families.

Following a seminar for high-level officials from various ministries, the Ministry of Interior granted the ICRC full access to detainees under the jurisdiction of the National Prisons Service. A first visit to Juba central prison was carried out after a dissemination session for prison officials in December.

WOUNDED AND SICK

Given the harsh environment (especially during the rainy season) and the lack of roads in rural areas, many people injured in clashes faced difficulties in accessing adequate medical care. To mitigate these difficulties, the Ministry of Health, humanitarian agencies and the ICRC concerted efforts to strengthen the response capacities of existing medical structures and local health teams.

With support from the Norwegian Red Cross and the ICRC, the "South Sudan Red Cross" developed its first-aid capacities and gave first-aid kits and training to emergency action teams (see *Civilians*) and weapon bearers (see *Armed forces and other bearers of weapons*), who were also urged to protect health services to ensure timely care of the wounded and sick.

Mainly in Unity, Upper Nile and Warrap states, some 900 weapon-wounded patients received timely medical care at 10 hospitals and one fixed and several temporary first-aid posts, which received supplies and direct support from the ICRC.

Some 220 weapon-wounded patients from different regions benefited from emergency surgery and/or trauma care from an ICRC surgical team. Based since June 2011 in Malakal Teaching Hospital (Upper Nile), which served a catchment population of about 3 million people, the team was called upon to help other medical facilities such as the Bentiu Civil Hospital (Unity) and the Comboni Hospital (Wau county, Western Bahr al-Ghazal) cope with influxes of patients during/following clashes. In all, the team performed 816 operations.

Operating in challenging environmental conditions, the Malakal Teaching Hospital (292 beds) continued to receive support. In addition to the wounded, children suffering from malaria, malnutrition or other ailments received life-saving care with the recent deployment of a paediatrician and a nurse, who also provided staff training. Patients stood to benefit from further improved conditions with the deployment of a hospital manager, the ongoing construction of an operating theatre and other infrastructure work.

Health workers enhanced their skills through training and coaching from ICRC staff. For instance, 23 medical professionals learnt war-surgery techniques during a seminar. Surgeons at Marial Lou Hospital treated patients injured during clashes in Warrap, with assistance from an ICRC team as well as additional supplies. Two orthopaedic technology students received funding for the first year of a three-year training course in United Republic of Tanzania.

People with conflict-related disabilities had access to prostheses, orthoses, wheelchairs and crutches, as well as physiotherapy services, contributing to their improved mobility and independence. Some 1,750 patients received treatment at the PRRC in Juba, run by the Ministry of Gender, Child and Social Welfare with ICRC support. The centre served patients in Juba and those referred from pre-selection sites in Malakal and Wau. Those living outside Juba had their transportation, food and accommodation covered by the centre. Some 360 patients were treated by a physical rehabilitation team from Juba during monthly week-long missions in Wau. Meanwhile, ICRC support to Rumbek Rehabilitation Centre commenced in November, and wheelchairs were prepared for donation to the national disabled basketball team.

AUTHORITIES

The South Sudanese authorities and the ICRC engaged in dialogue on humanitarian concerns such as: the protection of civilians under IHL; the need for safe access to conflict-affected populations for humanitarian workers, including medical personnel; and the ICRC's access to POWs. Local authorities in the Abyei area, Jonglei, and Northern and Western Bahr al-Ghazal enhanced, through briefings, their knowledge of their responsibilities under IHL.

The government of South Sudan drew on the ICRC's technical advice in acceding to IHL treaties. In July, it acceded to the 1949 Geneva Conventions and their Additional Protocols. The president also ratified the South Sudan Red Cross Act recognizing the "South Sudan Red Cross" as an auxiliary to the government. Prior to these developments, legislative assembly members and other officials participated in information sessions, deepening their understanding of IHL and its relevance in South Sudan.

To facilitate the implementation of IHL, plans to establish a national IHL committee were discussed, following the participation of two high-level government officials in a regional IHL seminar in South Africa (see *Pretoria*). A Ministry of Defence official increased his knowledge of IHL-related issues during a conference held in the context of the "Strengthening IHL" process (see *International law and cooperation*).

ARMED FORCES AND OTHER BEARERS OF WEAPONS

The SPLA chief of staff agreed to work with the ICRC in conducting training, developing doctrine and policy, and addressing protection-related concerns in accordance with IHL. As part of the SPLA IHL committee's plan to systematically integrate IHL into military training and operations, 20 instructors from different academies learnt to teach IHL. During workshops, SPLA commanders discussed the importance of integrating IHL into operations, focusing on command responsibility.

To enhance their ability to advise military officers, 17 legal officers from a recently created SPLA international law department attended an extended IHL course. In addition, a high-ranking military officer attended a workshop in Malaysia on IHL rules governing military operations (see *International law and cooperation*).

Meanwhile, some 3,700 members of the armed forces, including peacekeeping troops, as well as police officers in violence-prone areas such as Agok and Bentiu, continued to learn more about IHL and Movement activities through briefings, sometimes combined with first-aid training to enhance the availability of life-saving care on the ground (see *Wounded and sick*).

CIVIL SOCIETY

Over 500 community representatives, including traditional and religious leaders, enhanced their understanding of IHL and Movement activities during dissemination sessions. Local and foreign print, television and radio journalists reported on the humanitarian situation and the Movement's work with the aid of ICRC press releases. Some produced comprehensive reports following field visits with ICRC teams. During a seminar, 26 radio journalists, including those broadcasting in conflict-affected zones, deepened their awareness of IHL and the practical, ethical and legal challenges of humanitarian reporting.

The law faculty of the recently reopened Juba University started developing an IHL curriculum. Students and lecturers were able to consult a set of IHL reference materials donated to the library. To heighten understanding of IHL and related issues among students and civil society members, an IHL essay-writing competition was held in South Sudan for the first time, and the main daily newspaper published the winning entry.

RED CROSS AND RED CRESCENT MOVEMENT

With guidance and material assistance, the "South Sudan Red Cross" strengthened its organizational structure and increased its capacities as the ICRC's main partner in emergency response, first aid and restoring family links (see *Civilians* and *Wounded and sick*). Its staff and volunteers promoted IHL with the help of training and materials developed by the Swedish Red Cross and the ICRC.

The "South Sudan Red Cross" received support in its bid to achieve recognition by the Movement. During three regional workshops, it worked to establish its legal base and a draft constitution, with technical advice from the ICRC. Subsequently, it organized its first general assembly, adopted the constitution and elected a governing board.

All Movement partners met regularly to coordinate their activities in South Sudan.