This Emergency Appeal seeks a total of **2.35 million** Swiss francs by the International Federation of Red Cross and Red Crescent Societies (IFRC) to support the **South Sudan Red Cross (SSRC)** to deliver assistance and support the recovery of **96,000 people** / **16,000 households** for **12 months**, with a focus on the following areas: **Shelter and essential household items (S/EHIs)**, **Health, Water, sanitation and hygiene promotion (WASH)** and **Disaster risk reduction (DRR)** complemented by National Society strengthening activities. The planned response reflects the current situation and information available at this time of the evolving operation and will be adjusted based on further developments and more detailed assessments.

At the request of the National Society, this Emergency Appeal comes out of a strong process of cooperation and coordination at a country level, from the assessment of the initial reports and extensive planning discussions between all Movement partners, leading to an agreed plan in support of the SSRC-led flood response operation. As the geographic range for this operation is widespread and the flooding has affected both conflict and non-conflict areas, the Movement has clearly defined and agreed upon operational modalities, roles and responsibilities to ensure an inclusive and coordinated response. The SSRC takes the full lead in the implementation of this operation with the support of its partners in line with the different mandates of the Movement components. The International Committee of Red Cross (ICRC) is leading Movement coordination on security management country-wide and will focus on conflict areas with logistics and technical support. The IFRC will support SSRC by providing coordinated technical expertise with partners in the Areas of Focus (AOF) of the response plan, and ensuring National Society development support, especially at branch level, throughout the operation.

The disaster and the Red Cross Red Crescent response to date

- **June 2019**: The Northern Bahr-el Gazal main counties of Aweil West, Aweil centre and Lol were severely affected by floods, leading to the launch of a response operation supported by DREF (22 June - 22 November 2019, [link](#)).

- **October 2019**: In late October, several parts of the country were further severely devastated with floods, leaving 900,000 people displaced in (32) areas of the former states of Upper Nile, Warrap, Jonglei, Unity, Eastern Equatoria and Northern Bahr-el Gazal.

- **October 29, 2019**, South Sudan President declared a state of natural emergency following the catastrophic flooding and called for national and international solidarity.

- **Early November 2019**: Inter-agency multi-sectorial assessments conducted in Akobo, Maban, Warrap and Jonglei in areas severely affected by the floods. The SSRC participated in the assessments in Akobo and Warrap.

- **November 6, 2019**: For prompt SSRC response to initial verified Branch assessments and distributed 2,000 EHI to 04 affected branches (Bor, Torit, Tonj, and Kuajok) with support of ICRC.

- **November 25, 2019**: IFRC launches an Emergency Appeal following the request from the National Society in coordination with Movement partners (SSRC, IFRC, and ICRC).
The operational strategy

Summary of the Red Cross Red Crescent response to date
Since the onset of the floods, the South Sudan Red Cross through its branches network in the affected areas has conducted rapid needs’ assessments in Jonglei (Bor South), Warrap (Tonj North) Upper Nile (Mawuit) and Equatoria (Torit). Each branch did its own assessment, with the report to be consolidated during the finalization of the EPoA.

In the Northern Bahr-el Gazal counties of Aweil Centre, Aweil West (Nyamlel) and Gokmachar, the SSRC were already responding to floods that hit in June, and have reached 49,560 people with multi-sectorial assistance supported by the IFRC Disaster Relief and Emergency Fund (DREF), Danish Red Cross, ICRC and Austrian Red Cross. The operation was ending when the new floods hit in late October. For a brief update on actions achieved through the DREF operation, please refer to Annex 1, attached to the Appeal.

Coordinated response
The Movement engagement to date clearly reflects the commitment to the Strengthening Movement Coordination and Cooperation (SMCC) process in South Sudan. In line with the component mandates, and existing Movement coordination mechanisms and agreements, Movement partners will support the implementation of this SSRC led operation technically and financially.

The IFRC, ICRC and partner National Societies (PNSs) have been providing input to the development of this Emergency Appeal in the various areas of technical expertise. Going forward, the IFRC and PNSs will continue to provide support in the assessment through deployment of in-country human resources and, if needed, surge capacity. All IFRC members staff are under ICRC security umbrella and security management processes are in place under this set-up.

During the implementation phase, IFRC will provide operational support and ensuring a strong element of National Society Development and Branch Development. PNSs will contribute with technical expertise in Disaster Management coordination together with the IFRC, and in the interventions listed below. The IFRC will also play a key role in coordinating the support from the different Movement components and ensuring effective communication internally within the Movement in South Sudan. All other needed support to the NS operations will be given through the IFRC. This will be elaborated in the full EPoA.

ICRC supports SSRC’s in national emergency management forums together with other partners. Particularly in conflict areas ICRC will be:
- Providing situational analysis of the conflict areas to ensure a Red Cross principled action.
- Providing to the extent possible, emergency technical advice at national and field level.
- Managing the security situation as per the existing Security Management Agreement for Federation and PNS movements in support of SSRC as per the country-wider security agreement under ICRC.
- Offering logistical support for areas accessible to ICRC’s reach and capacity to the extent possible.
- Supporting the SSRC communications department in close coordination with the IFRC in line with the existing communications agreement.

Needs assessment and targeting
As of late October 2019, substantial floods have affected large areas across South Sudan, with more than 620,000 people who required immediate humanitarian assistance, according to authorities and recent reports from UNOCHA.
Further inter-agency assessments findings indicate that most of the affected areas are in the Upper Nile, Warrap, Northern Bahr-el Ghazal, Jonglei and Eastern Equatoria. Basic social amenities such as latrines, hand pumps, health facilities, farms and nutrition centres have been severely destroyed, leaving women, children and the elderly at risk to water-borne diseases such as diarrhoea, malaria and kala-azar. Access is limited due to water, conflict, and deplorable infrastructure. The affected population are critically in need of access to safe drinking water, anti-malarial and other basic drugs, and plastic sheets to be used as temporary shelters for families with damaged or destroyed houses. The current devastating flood effect comes on the backdrop of dire humanitarian situation where thousands remain internally displaced and millions seeking refuge in the neighbouring countries. It is likely that the degraded or loss of crops and other sources of livelihoods can cause longer-term humanitarian needs and reduce food security in 2020. The scale of the impact on the late-2019 harvest needs to be determined. The table in Annex 1 reflects areas that are severely affected.

**Shelter:** It is obvious that, due to limited access to community shelters, many of the affected population have moved to higher lands such as embankments and roads where they are living in the open with minimum cover. Most of the houses are either totally collapsed due to the use of poor construction materials, filled with thick mud and debris that dwellers are finding difficulty to clean and return to. Most of the houses in rural South Sudan are constructed from local materials (mud, grass, sticks, bamboo and rope). The temporary shelters will be constructed in new temporary locations and when families return to their original land as the water recedes.

According to the findings of the rapid needs’ assessment, emergency shelter support is one of the most urgent needs. Most of the areas are still inundated and waterlogged. These emergency needs will be addressed during the immediate phase and it will continue providing support if there is still a need.

**Health:** With a large number of displaced families living in the open or with family in crowded conditions without access, in many cases, to safe drinking water or adequate sanitation facilities, it is anticipated that waterborne and vector borne diseases are likely to rise. This will also exacerbate any pre-disaster health and nutrition issues. As a result of the floods, access to public health services is now severely limited in the flood affected districts due to damages to medical facilities and roads. The recent floods have exerted pressure on already fragile health systems in the country. With already destroyed basic social amenities such as latrines, hand pumps, health facilities, farms and nutrition centres, affected population are critically in need of access to safe drinking water, anti-malarial and other basic drugs.

1 Also known as visceral leishmaniasis, marked by emaciation, anaemia, fever, and enlargement of the liver and spleen.
drinking water, anti-malarial and other basic drugs, and plastic sheets to be used as temporary shelters for families with damaged or destroyed houses.

**WASH:** The floods have destroyed water facilities, also contaminating some water sources, leaving the majority of the population at risk to water related diseases such as diarrhoea or cholera. Due to the fact that families have lost most of their properties they will require basic items for water handling (transport, safe storage, and possibly treatment on household level) and personal hygiene products. As it cannot be assumed target population is completely aware of the health risks and proper use of the products (e.g. treatment options and safe storage), there is need to give proper instructions. Sanitation facilities have also been affected both at household and institutional (schools, health facilities, etc.) level.

The needs for 16,000 households/ 96,000 individuals (calculated at six people per household) will be addressed. Through this response, SSRC will provide to the 16,000 flood affected households with access to safe drinking water through repair of water points (including ensuring water quality) and providing means for household water treatment and safe storage (water treatment chemicals, buckets with taps, filter cloth as per standard practice in South Sudan WASH response activities). Other types of assistance (e.g. surface water treatment) may be considered an option depending on the local condition. This includes water treatment chemicals per household, 02 standby purification units which uses both chemical and filters and will be deployed based on need. Elaborations on technical details will be done in the full EPoA.

The in-kind assistance will also include hygiene articles ((buckets, PUR, jerry cans, filter cloth and soap). Household water treatment methods will be taught, and hygiene promotion conducted with follow-up monitoring. Upon return of the affected people to their homes, repairs of water facilities need to be conducted with a priority rating (e.g. water points that serve schools or health facilities). Water quality testing will be an important factor with testing contamination of water points and on-spot checks in households on water treatment effectiveness.

**Protection, Gender and Inclusion:** As floods intensify in most parts of the country, families, communities and more, women and girls continue to bear the brunt leading to disruptions in families, separation and increased mental health and psychosocial burden. The food insecurity situation witnessed in the better part of the year has added burden to already stressed populations, particularly elderly and people with disability and has left young girls and women in all affected locations with the responsibility to feed their families, hence exposing them to Protection risks. These risks include psychosocial distress, risk of SGBV including rape, early marriage, sexual exploitation and abuse and likelihood of unaccompanied children. Due to the breakdown in community protection mechanism, cases of rape and intimate partner violence have been reported to be on the increase hence need for provision of medical care and referral for other SGBV services. SSRC through the Protection Department and through the technical support of the Danish Red Cross and Netherlands Red Cross have the capacity to respond to the protection needs through provision of Psychosocial first aid to the affected, family reunification, linkages to needed and available services and ensuring there is mainstreaming of Protection services into other sectors such as WASH, Health and Livelihoods. Mainstreaming will be done using the minimum standards for protection, gender and inclusion in emergencies. The Protection department will also work towards the transfer of technical skills to branches and volunteers in the target areas.

**Community engagement and accountability (CEA):** SSRC will ensure that the already developed CEA tools (global but adjusted to the South Sudan context) are adopted and used to collect data relevant for planning CEA approaches and activities during the detailed needs assessment, gather community feedback and make sure of the feedback to generate ownership within the community during this operation. The community will initially be accessed and informed through the community leaders, before planning with them on how to engage the wider community including all components including vulnerable groups. A feedback mechanism will be put in place to get the necessary feedback from community members on issues related to the overall response. The community members in the target areas will be involved as fully as possible throughout the response phase to increase their ownership of the response.

**Security:** The country is undergoing a political transition process as per the Revitalized Agreement on the Resolution of Conflict and the way forward proposed towards forming a Transitional Government of National Unity. The risk of resumption of fighting is very low. The following risks which are not directly related to the conflict remain relevant to Red Cross Red Crescent (RCRC) operations in South Sudan. The dwindling economic situation with the declining value of the South Sudanese pound (SSP) and rising cost of living has led to the risk of criminality to continue to increase across the country and in big urban cities like Juba. Cattle rustling is also a major risk that could impact RCRC movements and presence in South Sudan especially in areas inhabited by pastoralist communities. In Equatoria region and central, there is the risk of occasional fighting between government and opposition groups present in some locations. In Bahr-el Ghazal region, there is the risk of intercommunal violence associated with cattle rustling and presence of opposition groups in the area.
The recent dynamics between opposition and government in areas in Upper Nile could impact humanitarian access. In greater Unity state, the risks of clashes, cattle raiding, and intercommunal violence remain of a concern.

Regular risk assessments are being conducted by ICRC who is taking the lead in terms of RCRC security management whereby mitigation measures are implemented, and security advisories are being provided to the respective RCRC partners operating in the said areas. All field movements involving RCRC are notified to the respective parties and are only allowed following the receipt of reliable security guarantees.

To reduce the risk of RCRC personnel falling victim to crime or violence, active risk mitigation measures are adopted. This includes situation monitoring and implementation of minimum-security requirements. All RCRC personnel actively involved in the operations must have completed the respective IFRC security e-learning courses (i.e. Stay Safe Personal Security, Security Management, or Volunteer Security). Related to safer access concern, one of the main benefits of the SSRC is the nationwide recognition of the National Society. This has rendered ease and facilitation with community heads, leaders and most importantly the community themselves. The South Sudan Red Cross is well accepted by the community and trusted.

**National Society strengthening and development:** As part of capacity development of its preparedness and response team, through this response, 300 Emergency Action Team volunteers (EATs) will be provided relevant refresher training on Participatory Hygiene and Sanitation Transformation (PHAST), Psychosocial Support (PSS) and Sexual and Gender Based Violence Prevention, including Prevention of sexual exploitation and abuse (PSEA). In addition, through this response, the capacities of the respective branches involved to respond to emergencies will be strengthened, thus better positioning the national society as first responder to humanitarian disasters. Through this appeal, NSD will be embedded through the following mechanisms:

- Strengthening coordination and management structure for this operation. SSRC already has an established coordination mechanism, through the Emergency Operation Centre which aids in information management and coordination.
- Branch Development through consolidation of existing EATs, activation of contingency plans at branch level and support to enhance branch capacity to conduct assessments and develop response plans.
- Deploy sectorial NDRT (Protection, WASH and Shelter/NFIs) to support the respective branches during operations and assessment.
- Strengthening the capacity of the existing Emergency Action Teams (EATs) through refresher trainings on relevant response sectors.
- Deployment of regional surge support (Cash and Shelter Experts).
- Building the capacity of the local volunteers and communities on DRR components, including early warning systems.

NS preparedness has been supported through bilaterally programming under Canadian Red Cross and Danish Red Cross. DRC support is on-going. Full elaboration on the connectedness with NS, PER findings and Disaster Preparedness activities and programming in general. BOCAs have been done and a roadmap is in place. This will be specified in the full EPoA.

**Coordination and partnerships**

**Red Cross Red Crescent Movement**

Strengthening Movement Coordination and Cooperation (SMCC) remains the key priority to improving the way Movement partners work together and enhance coordination and cooperation, especially in response to this floods Emergency in South Sudan.

During this operation, coordination will be ensured at multiple levels through existing, and ad hoc, coordination mechanisms, including:

1) Strategic coordination will take place at Movement Platform level (SSRC SG, ICRC HoD, and IFRC HoCO)
2) Operational Coordination at SSRC HQ level will be ensured through the Emergency Operations Centre, which holds regular meetings with technical staff from all Movement components in country. The mechanisms will be elaborated in the full EPoA.
3) Coordination at SSRC HQ between relevant technical departments will be led by the SSRC DM Manager and ensured through regular meetings and active involvement of all Heads of Departments including support services.

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Movement partners including the Canadian RC, Danish RC and ICRC have been engaged in long term capacity building of the NS preparedness and response activities including the EAT.
4) A new coordination mechanism will be set up through weekly meetings (on skype) between SSRC/IFRC/ICRC in Juba and ICRC sub-delegations in the affected areas. Where technically possible, SSRC branches will also participate in these meetings.
5) Movement partners will be provided with regular updates on the response status and lessons learnt by the IFRC Operations Manager during the weekly PNS/ICRC/IFRC coordination meeting.

Non-Movement Coordination and Partnership
The South Sudan Red Cross, with the support of IFRC, will scale up on its coordination efforts at National level by engaging actively in the mechanisms set up by UNOCHA. The SSRC will maintain active presence and engagement in relevant cluster meetings at national and local level to ensure an effective response and avoid duplication. Coordination with the following actors involved in the on-going response will also be required: line Ministries, specifically the Ministry for Humanitarian Affairs and Disaster Management, International Humanitarian Organizations, National Non-Governmental Organizations (NGOs) and UN agencies. Additionally, coordination with local authorities will be the responsibility of the branches with its headquarters, in close cooperation with ICRC in particular conflict areas.

Proposed Areas for intervention

Overall Operational Objective: This Emergency Appeal aims to provide immediate basic assistance to address the most acute needs of flood-affected households and reach them with critical early recovery assistance.

The design and implementation of the Appeal is guided by assessed needs identified in the initial and rapid needs’ assessment and within SSRC Response Strategy. Further in-depth needs’ assessment will be conducted while at the same time and through this Plan of Action, SSRC will serve the vulnerable women, men, girls and boys through the provision of specialized and integrated services covering Shelter and EHIs, Health (including psychosocial support), WASH, protection, and RFL.

Proposed strategy
SSRC through its sectorial themes will ensure collective response to most severe needs of the flood affected population; linking the response to durable solutions where people can achieve some stability; and the centrality of gender-sensitive and protection in all programming, which includes actions on prevention of sexual exploitation and abuse, gender-based violence, psychosocial support, RFL services, community engagement and accountability to affected people. The EPoA will specifically address the needs in line with following SSRC pillars of intervention:

Water, Hygiene and Sanitation (WASH): Through this response, SSRC will provide 16,216 flood affected households with improved access to safe drinking water through minor rehabilitation of hand pumps, conduct mass chlorination on contaminated drinking water points, reinforced with provision of domestic hygiene kits (buckets, and chlorine sachets), digging tools for opening water channels and hygiene promotion and awareness sessions, with more emphasis on household chlorination method.

Relief: Through this response, SSRC aim is to ensure that households severely affected by the flood can live in safety and dignity through access to Essential Household Items/shelter services thereby strengthening their self-reliance and positive coping mechanism. SSRC will prioritize to respond in Jonglei (Bor South and Twic-500 HHs), Eastern Equatoria (Torit/Lafon-500HHs), and Warrap (Tonj North-1,000 HHs). All targeting and distribution will be ensured through setting and communicating selection criteria to the branch team and the local authorities in target locations. The EHIs kits are a combination of WASH and Shelter intervention and are based on the recommended SPHERE standards and will be acquired through ICRC under the Emergency Preparedness and Response project. Replenishment will not be required.

Protection: While continuing to support flood-affected and displaced people in the three locations, SSRC will ensure integration of its Restoring Family Links activities, psychosocial support to families who have lost their beloved ones during recent flooding and those whose livelihoods have been severely destroyed. This will be supported and guided by deployment of a protection NDRT member to provide technical support to the selected branches and units (Bentiu, Bor, Mawuit, Torit and Warrap).
Areas of Focus

**Shelter, settlements and household items**

**People targeted:** 30,000  
**Male:** 14,000  
**Female:** 21,000  
**Requirements (CHF):** 235,000

**Proposed intervention**

Through this response, SSRC aim is to ensure that 5,000 households severely affected by the flood can live in safety and dignity through access to essential household items/shelter services, thereby strengthening their self-reliance and positive coping mechanism. A total of 5,000 EHIs are in-kind contribution from ICRC to the SSRC (without request for replenishment), this appeal will procure an additional 1,000 EHIs to be pre-positioned as contingency stock). All targeting and distribution will be ensured through setting and communicating selection criteria to the branch team and the local authorities in target areas. The following are the key response modalities:

**Distribution of Essential Households Items (EHIs) to 5,000 HHs:** The ICRC has already allocated an initial 2,000 EHIs as an immediate assistance to the displaced families in highly affected areas in Warrap, Eastern Equatoria (Lafon) and Jonglei (Bor South). The SSRC is leading the distribution of these items in coordination with local actors in the respective areas. Meanwhile, ICRC has further earmarked 3,000 EHIs to enable SSRC to reach wider households severely affected. Prior to distribution, beneficiary’s identification and verification exercise will be enhanced through the branch staff and volunteers in consultation with local authorities and community level project steering committees who will support in the identification of the most vulnerable. During distribution, SSRC will ensure that its volunteers and staff adhere to basic humanitarian principles, including “DO NO HARM” by serving the most vulnerable and setting distribution sites in secure environment, easily accessible by the beneficiaries. A post distribution monitoring will be carried to gather community feedbacks and enhance accountability to the affected populations.

**Provision of shelter tool kit combined with conditional cash grant for emergency shelter construction to 1,500 HHs:** Through this response, the most vulnerable categories in the affected areas, especially single mothers with < 3 children, households with separated children, households headed by people with disabilities and the elderly will be supported through provision of 750 shelter tool kits complemented with conditional cash grant to support construction of semi-temporary shelters. The remaining 750 HHs will be supported with shelter tool kits only. Prior to this, feasibility assessment will be conducted to determine market capacity to supply the local materials and labour combined with analysis of environmental, protection and security risks, beneficiary and community preferences, organisational capacity, especially the staff and volunteers to be engaged in the monitoring of community level shelter construction. During implementation, SSRC will ensure local authorities and beneficiaries contribute to the shelter design process from the start and focus on locally available materials and community-led shelter designs.

**Shelter Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.**

**Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.**

**Activities planned include:**

- Assessment of shelter needs, capacities and gaps.
- Identification of caseloads and verification of beneficiaries in different target groups – inclusion factors integrate gender, diversity and disability in the response.
- Provision of emergency shelter materials and essential household items (EHIs) for the most vulnerable and affected households.
- Market assessments will be conducted to inform the conditional cash grants.
- Selection of target households for conditional cash grants per set criteria (i.e. based on vulnerability and house damage assessment).
- Provision of shelter assistance to households with damaged and/or partially damaged house (which includes the procurement of shelter materials, shelter tool kit, and conditional cash grants) with technical assistance from IFRC Nairobi Regional Office. Shelter software activities will also be included in the full EPoA.
Monitoring of the use of distributed shelter and household items and/or cash.
Awareness raising of beneficiaries on safe shelter techniques.

Water, sanitation and hygiene
People targeted: 96,000
- Male: 38,400
- Female: 57,600
Requirements (CHF): 705,000

Proposed Intervention
Through this response, SSRC will provide flood affected population, both at household and community levels, with improved access to safe drinking water through minor rehabilitation of hand pumps, reinforced with provision of household water treatment and storage kits (buckets, PUR sachets, jerrycans, filters cloth=1mx1m), digging tools for opening water channels and hygiene promotion and awareness sessions.

Improving access to clean and safe drinking water to the target population: The SSRC will enhance access to clean water for the affected population through rehabilitation of water points, provision of water treatment chemicals and buckets for water collection and storage. Prior to this, assessment of non-functional water points (hand pumps and water towers) will be conducted in the target locations to determine the scale of the intervention. Meanwhile SSRC will consider installation of Surface Water Treatment system in locations with limited or non-existing hand pumps or wells. The local communities’ capacity will be strengthened to ensure adequate management of the water points through establishing and training of water management committees (WMCs-composed of 12-15 members per water point) on minor operations and maintenance. Some WMCs exist but where the facilities non-functional or damaged the WMC will require re-organization and capacity strengthening. This will be done in close collaboration with other partners if present.

Provision of sanitation facilities to the affected population: The operation will support community level construction of latrines through training of local sanitation artisans who will further train the local communities in the construction of locally and cultural appropriate latrines. To support the local communities, SSRC will procure and distribute latrine digging tools that will be owned and managed by the local community sanitation committees, supported by the branch staff and volunteers.

Promoting safe hygiene and sanitation knowledge, attitude and practices: SSRC will provide refresher training to (40) volunteers per nine (9) locations to carry hygiene awareness among the targeted communities to prevent water related diseases, with anticipated high risk of diarrheal diseases. SSRC will use participatory methods and approaches such as Participatory Hygiene and Sanitation Transformation in Emergency Responses (PHASTER) and Child Hygiene and Sanitation Training (CHAST) in the communities and schools combined with Knowledge, Attitude and Practices (KAP) survey.

WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities.

WASH Output 1.2: Daily access to safe water which meets Sphere standards in terms of quantity and quality is provided to target population.

WASH Output 1.3: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.

Activities planned:
- Conduct training for RC volunteers on carrying out water, sanitation and hygiene assessments.
- Conduct initial assessment of the water, sanitation and hygiene situation in targeted communities.
- Conduct household awareness on basic water treatment techniques.
- NFI procurement process (buckets, PUR, Jerrycans, filter cloth and Soap).
- Distribute for 16,000 households water treatment and Storage kits (PUR, Buckets, Jerrycans and filter cloth) sufficient for 1 month including soap, to 6 people per HH.
- Train volunteers to monitor water quality in the target populations.
• Procuring spare parts and materials for hand pump repair and chlorination.
• Train volunteers on hand pump repair.
• Monitor water treatment through household surveys and water quality tests.
• Conduct repair and chlorination of hand pumps in the target locations.
• Develop a hygiene communication plan.
  Raise awareness in target communities on safe hygiene and sanitation practices.
• Conduct Hygiene and Sanitation Knowledge, Attitude and Practices (KAP) Survey

### Health

**People targeted:** 96,000  
**Male:** 38,400  
**Female:** 57,600  
**Requirements (CHF):** 215,000

**Proposed intervention**  
With a large number of displaced families living in the open or with family in crowded conditions without access, in many cases to safe drinking water or adequate sanitation facilities, it is anticipated that waterborne and vector borne diseases are likely to rise. This will also exacerbate any pre-disaster health and nutrition issues. As a result of the floods, access to public health services is now severely limited in the flood affected districts due to damages to medical facilities and roads. SSRC will deploy two (2) Health NDRT members to provide surge support to the identified locations, working closely with the responding branches – EATs and volunteers. The team will focus on the dissemination of health messages, first-aid services and referrals to the nearest hospital where required. The ECV trained volunteers will also work with government medical teams during the emergency period.

**Health Outcome 1: The immediate risks to the health of affected populations are reduced**

**Health Output 1.1:** The health situation and immediate risks are assessed using agreed guidelines

**Activities planned:**
- Carry out rapid rollout of National Society trainings in Epidemic Control for Volunteers.
- Conduct a three-day training for 30 volunteers per locations on ECV.
- Conduct a three-day training / refresh for 20 volunteers on first aid per location.
- Identify and activate CBHFA volunteers for integration into emergency response.
- Conduct health education session on prevention of communicable diseases by 30 volunteers working 5 days a week for 10 months reach to 16,000 households (estimated 96,000 people).
- Distribute 24 stretchers from warehouse and procure 240 first-aid kits to support community level first-aid response.
- Conduct CBHFA activities to promote community-based disease control and health promotion.
- Support social mobilisation regarding water-borne diseases (health promotion sessions).

### Disaster Risk Reduction

**People targeted:** 6,000  
**Male:** 2,400  
**Female:** 3,600  
**Requirements (CHF):** 80,000

**Proposed intervention**  
At the end of the emergency phase, SSRC with support of the in-country partners will carry out a more in-depth needs’ assessment on flood risks in the selected operational areas (approx. after 3 months). Red Cross volunteers with communities’ members will be trained to apply community-based disaster risk reduction (CBDRR) initiatives in affected communities. This operation plans to organize a basic training in CBDRR with practical sessions in the field. Further, through the CBDRR in the target communities, each Boma (group of villages) will have an operational Community Disaster Response Team comprised of 15-20 members. The
trained local facilitators will accompany the communities in the realization of the CBDRR initiatives in their respective communities, including the development of the risk maps, the setting up of the early warning system.

**DRR Outcome 1: Communities in high risk areas are prepared for and able to respond to disaster**

**DRR Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.**

**Activities planned**

- Develop and implement a community plan of action for CBDRR
- Develop early warning and early action systems linked with local or national meteorological systems
- Develop contingency plans and improve them through simulation drills
- Raise community awareness of risks and appropriate actions through dissemination of the Public Awareness and Public Education DRR key messages
- Form and train community disaster response teams
- Form a community DRR/DM committee with a Terms of Reference (ToR)
- Facilitate mitigation and preventive activities for risks identified
- Develop and disseminate targeted messages and communication assets (social media material) for media, volunteers, local and traditional leaders, churches, schools and other stakeholders to trigger community preparedness actions (using PAPE/What Now).

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**Protection, Gender and Inclusion**

**People targeted:** 36,000  
**Male:** 14,400  
**Female:** 21,600  
**Requirements (CHF):** 115,000

**Proposed intervention**

The operation will ensure the promotion and participation of men and women of different age groups through trainings and consultation and conduct a gender and diversity analysis to understand and respond to individual and groups based on their specific needs, risks and concerns. Sex, age and disability disaggregated data (SADDD) will be collected and analysed and will be informing the emergency response. A continuous dialogue among the different stakeholders will be fostered to ensure programmes mainstream DAPS (Dignity, Access, Participation and Safety) approach and Minimum Standard on Protection, Gender and Inclusion, based on the identified needs and priorities of humanitarian imperatives on the ground.

**Protection, Gender & Inclusion Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.**

Protection, Gender & Inclusion Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.

Protection, Gender & Inclusion Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.

**Activities planned:**

- Support sectorial teams to include measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning to ensure mainstreaming of the minimum standards on PGI in emergencies to all sectors throughout the emergency response
- Hold basic ½ day training with IFRC and NS staff and volunteers on the Minimum Standards on PGI (or integrate a session on Minimum Standards in standard/sectorial trainings).
- Support sectorial teams to ensure collection and analysis of sex-age and disability-disaggregated data (see guidance in Minimum Standards)
- Establish a system to ensure IFRC and NS staff and volunteers have signed the Code of Conduct and have received a briefing in this regard
• Provide essential services (including reception facilities, RFL, and access to education, health, shelter, and legal services) to unaccompanied and separated children and other children on their own.

Strategies for Implementation
Requirements (CHF): 1,000,000

Strengthening National Society capacities
National Society Development is a key priority for the Red Cross Red Crescent Movement in South Sudan in line with IFRC Strategy 2020. Over the past few years, the Movement has supported the development of a new Strategic Plan 2018-2021, and the development of a comprehensive National Society Development (NSD) Framework outlining key development priorities and focus areas for South Sudan Red Cross. The organizational capacity assessment and certification (OCAC) was done in 2015 and since 2018, the branch organizational capacity assessment (BOCA) has been conducted in 16 out of 17 branches. It is expected that all branches will have undergone BOCA by the end of 2019. Building on this, this appeal will continue to support this process in an endeavour to build branches as centres for resilience in South Sudan.

Activities planned include:
• Activation of Emergency Action teams including refresher training
• Enhanced capacity to conduct needs’ assessments and planning for a response
• Support to SSRC volunteer management and capacity building
• Training, coaching and mentoring of staff and volunteers on various sector technical aspects
• Cash-based interventions capacity building for the branches
• Logistics development support for the NS
• Minor rehabilitation of office of local branches, including equipment
• Active application of the Safer Access Framework

Note that all SSRCS activities volunteers are covered by existing annual volunteer insurances supported by other Movement partners in country though long-term programmes.

Ensure effective international disaster management
SSRC has been supported by Movement partners to strengthen its response capacity since 2015, building and enhancing the SSRC staff and volunteer capacity in key sectors of disaster management programming to ensure that the National Society (NS) is better prepared and positioned to scale-up its disaster response and preparedness to the growing humanitarian needs in South Sudan. SSRC established several emergency response teams and those teams will be deployed during this response.

Activities planned include:
• IFRC coordination support, including working closely with the SSRC emergency response team in implementation as needed and in close collaboration with PNS (specifically Danish Red Cross DM Delegate) and the ICRC
• IFRC HR surge support as required and requested
• ICRC and IFRC logistics department support to the National Society’s logistics unit for coordinating supply chain activities, replenishment and other procurements.
• SSRC will coordinate closely with Public Authorities and other humanitarian actors and relevant clusters on a regular basis to be complementary and facilitate in filling humanitarian gaps. If needed IFRC will provide support.
• Coordination with ICRC on security context and situational analysis of the affected areas.

Influence others as leading strategic partners
Humanitarian diplomacy is one of four enabling actions in the SSRC 2018-2021 Strategic Plan. Some milestones have been achieved in recent years, including IFRC-supported policy work on a National Disaster Law and a National Disaster Management policy. SSRC is now systematically including Community Engagement and Accountability in all of its projects or initiatives. During the implementation of this appeal, the NS will be looking to scale up its communication efforts and the IFRC will support this, in close coordination with the ICRC given the fragile context of the country and in line with the 2017 Communications Agreement.

Activities planned include:
• The SSRC with the support of ICRC and IFRC communications team is ensuring that Red Cross response
efforts are effectively communicated amongst its key public audiences and maintaining active online media engagement throughout the emergency operations.

- A composite team of SSRC, ICRC, and IFRC communications officers will work together to generate high quality photos, video clips, and news stories for use across relevant platforms.
- Identification of community participation modalities in programme design and implementation.
- Ensure that the plan developed meets identified needs of affected people and that any adjustments to initial plans are informed by continuous assessment of needs.
- Ensure continuous monitoring of implementation by South Sudan Red Cross with the support of Movement Partners if required.
- Lessons learned workshop for operation, taking into consideration the strong SMCC approach.
- SSRC to ensure effective reporting, accountability to communities, community engagement and accountability - A Red Cross Red Crescent Guide to Community Engagement and Accountability (CEA).
- Produced evidence-based information (evaluation report, case study, survey).

**Ensure effective IFRC**

Based on the need for technical and coordination support required to deliver in this operation, the following programme support functions will be put in place by the SSRC with support from Movement partners as required to ensure an effective and efficient technical coordination: human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration. Surge support will be requested as per need, alongside with support from existing in-country resources. The specifics will be elaborated in the Emergency Plan of Action.

A key complementary action will be increasing the awareness of SSRC and IFRC staff and volunteers on the Fraud and Corruption Policy for Red Cross personnel and stakeholders (especially suppliers and local government units) as well as awareness on Prevention of Sexual Exploitation and Abuse (PSEA) for all personnel.
# Funding Requirements

**International Federation of Red Cross and Red Crescent Societies**

## EMERGENCY APPEAL

**South Sudan - Floods**

*Funding requirements - summary*

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
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<td>Disaster Risk Reduction</td>
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<td>Shelter</td>
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<td>Health</td>
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<td>Water, Sanitation and Hygiene</td>
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<td>Inclusion, Gender and Protection</td>
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<td>Strengthen National Society Capacities</td>
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<td>Ensure Effective Inter’l Disaster Management</td>
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<td>Influence Others as Leading Strategic Partners</td>
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<td><strong>Total Funding Requirements</strong></td>
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</table>

*all amounts in Swiss Francs (CHF)*

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*Elhadj As Sy*

Secretary General
How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO’s) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable. The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.
Annex 1

In the newly affected areas in Greater Upper Nile and Warrap, SSRC through its branches is assessing the situation on the ground as it evolves to determine the best way to respond, with priority sectors including provision of water purification tablets combined with hygiene kits, rehabilitation of water points, hygiene promotion, distribution of shelter/EHI materials and provision of psychosocial support to flood victims.

Despite the on-going efforts, the current intervention is yet to link relief with early recovery support as the affected population requires opportunities for re-settlement, livelihood recovery and resiliency. The table below shows the different activities achieved through the DREF operation:

<table>
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<tr>
<th>Sector of Intervention</th>
<th>Planned (Key indicators)</th>
<th>Planned targets</th>
<th>Key achievements</th>
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<td># people provided with access to clean drinking water</td>
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<td># of people reached with key hygiene promotion messages</td>
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## Annex 2

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<th>Previous NAWG Rec.</th>
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<th>IPC Phase FSL</th>
<th>FSL (INT)</th>
<th>NUTRITION (INT)</th>
<th>WASH (INT)</th>
<th>HEALTH (INT)</th>
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</table>

**<1,000 Individuals reportedly affected**
The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Sources: GADM, OCHA, South Sudan Red Cross, IFRC.

South Sudan - Floods
Emergency Appeal

Glide no: FL-2019-000062-SSD
25 November 2019

Legend
- Country capital
- Targeted areas