Nearly three years after the signing of the Comprehensive Peace Agreement, major humanitarian challenges remain throughout Sudan. While recovery and development activities are taking place across the country, large pockets of humanitarian need persist. The most notable is the ongoing crisis in Darfur. However, disease outbreaks, lack of basic services, natural disasters and intermittent conflict affect communities in every part of the country.

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<tr>
<th>Sector</th>
<th>Northern Sudan Area Programme</th>
<th>Southern Sudan Area Programme</th>
<th>Total</th>
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<td>Health and nutrition</td>
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<td>36,648,326</td>
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<td>Water, sanitation and hygiene</td>
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<td>16,463,500</td>
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<td>Education</td>
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<td>Child protection and mine action</td>
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<td>Non-food items and emergency coordination</td>
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<td>Communication &amp; advocacy</td>
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* The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

1. CRITICAL ISSUES FOR CHILDREN

Throughout 2007, the humanitarian environment in Darfur remained in the spotlight. With continued violence, insecurity and increasing fragmentation of the various rebel factions, the situation of children and women remained precarious. Sexual and gender-based violence was a critical concern throughout the year. Numbers of internally displaced persons (IDPs) continued to rise, with over 240,000 people newly displaced, or re-displaced. By the fourth quarter of 2007 there were an estimated 2.1 million IDPs in Darfur. IDP camps remained full to overflowing and aid agencies struggled to keep up with the needs. After four years of conflict, coping mechanisms have become seriously stretched and, for the first time since 2004, pockets of malnutrition above the emergency threshold have been reported.

The security of humanitarian personnel has also been a major problem, with numerous attacks on staff and repeated theft of agency assets. By end-September 2007, 5 aid workers had been killed, 11 injured and 53 others had been physically assaulted. During the course of the year, humanitarian personnel were relocated on more than 25 occasions, negatively affecting the delivery of aid to hundreds of thousands of beneficiaries. This has had a direct and tangible impact on the quality and quantity results for children. Despite the numerous difficulties, the many partners working in Darfur have continued to bring relief to an estimated 4.2 million people.

UNICEF continues responding to humanitarian need in the non-Darfur areas in the northern states of Sudan including the ‘Three Areas’ (Blue Nile state, South Kordofan and Abyei) – characterized by fragile networks for primary health care, limited access to nutrition services and overburdened systems for water, sanitation and hygiene – and to the situation in Eastern Sudan, which still experiences intermittent insecurity and marginalization leading to significant humanitarian need. Limited funding for response to these areas has exacerbated humanitarian need and stunted development progress.

While some recovery and development actions are taking place in Southern Sudan, the area is still thought to have one of the highest, if not the highest, maternal mortality ratio in the world, with only 10 per cent of births assisted by qualified personnel. Over 15 per cent of children under the age of 18 are orphans, with one in five children an orphan in some regions. Infant and neonatal mortality rates are amongst the highest in the world, and child malnutrition rates, although not a problem for under-one children, are of major concern. Recurrent drought and chronic food insecurity over the past four decades have contributed to both acute and chronic malnutrition, and stunting in children under the age of 14 is amongst the highest in the world, reflecting inadequate nutrition over a long period of time. Wasting is a major problem, with the worst cases in Western Bahr el Ghazal affecting 9 per cent of under-five children. Water, sanitation and hygiene is a critical issue with only 15 per cent of people drinking treated water and less than 7 per cent having access to a safe means of excreta disposal.

Despite the second anniversary of the Comprehensive Peace Agreement (CPA) in January 2007, over 1,000 children are still associated with armed groups. Sudan is one of the 10 countries most affected by landmines and unexploded ordnance. Mines are present in all 10 states of the south.

Education in Southern Sudan has been decimated by over 22 years of war and conflict. During the war period, only one child in five attended school and only one girl in a hundred completed primary education; literacy rates stood at 25 per cent, with that of females standing at 12 per cent. Schools were largely staffed by untrained volunteers and only 13 per cent of learners had access to learning materials.

Throughout the country, numerous humanitarian issues continue to require focused attention: the use of child soldiers, their demobilization, return home and reintegration; awareness and education about the dangers of landmines; support to the tens of thousands of people returning to their areas of origin; advocacy with governing bodies about protection of children, women and vulnerable groups; preparedness and response to emergencies such as flooding and outbreaks; and concerted support to the governing bodies working to address these various scenarios.

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1 All Southern Sudan data is taken from the Sudan Household Health Survey (2006) apart from education data which is from the Ministry of Education/UNESCO (2006).
2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

Health and nutrition interventions remained a humanitarian priority during 2007, with both preventative actions taking place as well as response to outbreaks and malnutrition. Work to prevent deadly measles outbreaks was a major component of the health response in 2007. A mass measles campaign in Southern Sudan, begun in late 2005, ensured that 3 million children have been protected against the disease (with 1.7 million vaccinated in 2007 alone). Response to outbreaks of measles, meningitis and acute watery diarrhoea were ongoing, together with training of emergency health personnel and other preventative activities. In Darfur, nearly 2.2 million conflict- and disaster-affected people were provided with essential and emergency primary health-care services, and primary health-care units were stocked and supported in numerous other areas in the country. In locations across Sudan with pockets of malnutrition, over 26,200 children and 600 women received nutritional support. Over 1.3 million under-five children received vitamin A supplementation.

Throughout Sudan, access to improved drinking water facilities increased, was re-established or was sustained for over 1.3 million IDPs, returnees and host communities or other vulnerable communities. In addition, access to safe means of excreta disposal increased, was re-established or was sustained for over 100,000 schoolchildren, internally displaced, returnees and host communities.

The provision of education, in spite of the changing humanitarian environment, continued to be one of the key successes in Sudan. Within the year, as a result of the ongoing ‘Go to School’ campaign, gross enrolment in Southern Sudan has increased to 1.2 million, with girls making up 30 per cent of those enrolled. Essential educational materials, including 80 tents for use as temporary learning spaces, have been procured and are being distributed to schools in Southern Sudan benefiting over 900,000 children. Thirty-two permanent schools are under construction, with an additional 250 being turned into child-friendly schools and 1,300 teachers have completed the fast-track teacher training, and intensive English language courses for an additional 1,100 teachers are ongoing. In the northern parts of the country, gross enrolment has increased by 141,616 children, of which 50 per cent are girls and 7 per cent newly enrolled nomadic children. A total of 520 classrooms have been constructed/rehabilitated and 416,119 children benefit from improved quality of basic education through the procurement of textbooks and training of 5,097 teachers in participatory child-friendly methodologies. In collaboration with the World Food Programme (WFP), 147,890 children in Darfur are receiving food at school.

Nearly 130,000 vulnerable children benefited from protection programmes in Darfur, Kosti, Khartoum squatter areas and camps and South Kordofan through child-friendly spaces, youth centres, recreational activities and vocational training. Child soldiers continue to be a key concern and an action plan was signed with the Sudan Liberation Movement/Army (SLM/A) for the release of over 1,500 children. Support was provided for the reintegration of over 275 children demobilized from armed groups and forces in the three transitional areas, Khartoum and the East. Family tracing and reunification is ongoing for an additional 500 children associated with armed groups in the East and Blue Nile. In Southern Sudan, more than 1,000 children have been demobilized since 2006. Mine-risk education continues in all affected areas, and more than 476,000 people in high-risk areas were reached with public information messages. Training on child rights and protection was provided for over 4,130 African Union Mission in Sudan (AMIS) troops.

During 2007, about 2 million people, including IDPs and returnees, were provided with information key to child survival and development, including essential messages on the control and prevention of cholera and meningitis. Messages about HIV and AIDS were also a critical part of humanitarian efforts during 2007.

3. PLANNED HUMANITARIAN ACTION FOR 2008

Coordination and partnership
The UN in Sudan maintains parallel ‘Country Teams’ in the north and south, reflecting the ‘one country, two systems’ formula of the Peace Agreement. UNICEF acts as the sector lead in water, sanitation and hygiene, nutrition and education, while it also supports the World Health Organization (WHO) in coordination of the health sector and the UN Mine Action Service (UNMAS) in protection issues. Close collaboration and partnerships continue with relevant government bodies and numerous international and national NGOs.
Health and nutrition (US$ 36,648,326)
In Northern Sudan, including the three states of Darfur, some 8.4 million people including 2.6 million IDPs, host communities and impoverished persons in Darfur will be reached with the following activities:

• Vaccination activities will reach 3.9 million children with one shot of measles vaccine and vitamin A supplementation (an additional 1.5 children will receive vitamin A supplementation); 1.9 million women of childbearing age with three doses of tetanus toxoid; 1 million Darfurian under-five children with two rounds of polio vaccination; and 1 million children with routine vaccination activities;

• One million families (7.4 million people) will receive long-lasting insecticidal nets to combat malaria and 4 million children will be reached with deworming treatment;

• About 8.4 million people will benefit from prepositioned emergency supplies, and outbreak response aimed at covering up to 50,000 people will be maintained;

• Some 200,000 pregnant women in three states will have access to reproductive services;

• Capacity will be built through training for up to 2,000 health staff and over 800 nutrition counterparts;

• About 200,000 children will benefit from the integrated management of childhood illnesses (IMCI) project;

• Nutrition supplies and equipment will be procured and distributed to 90 therapeutic feeding centres (TFC/OTPs) and 122 supplementary feeding centres in order to treat 6,125 severely and 51,000 moderately malnourished children, as well as rehabilitate 15 TFCs;

• Nutrition information systems (surveys, assessment and evaluations) will continue to be strengthened in order to identify and respond appropriately to areas of need;

• The integrated minimum nutrition package, addressing maternal and child nutrition issues, will be introduced and scaled up through health facilities;

• Support will be provided to regional- and state-level initiatives for flour fortification and salt iodization.

In Southern Sudan, 5 million vulnerable children and women will be reached through the following activities:

• Essential emergency drugs and equipment will be provided to 225 health centres and 2.4 million capsules of vitamin A and 2.4 million deworming tablets will target all under-five children;

• 75 county health workers and 225 health-facility and community-level vaccinators/health workers will be trained in immunization services and cold-chain management;

• Use of insecticide-treated mosquito nets (ITNs) will be promoted through the training of 250 community health workers and 750,000 ITNs will be distributed to 250,000 households;

• 500,000 sachets of oral rehydration salts (ORS) will be procured and distributed;

• 400,000 doses of meningitis vaccines and injection materials will be procured and distributed;

• Support will continue to 25 therapeutic feeding centres previously established and run by partners for 13,737 severely and an estimated 300,000 moderately malnourished children;

• Nutritional support will continue through the implementation of 20 nutritional surveys, assessments and evaluations and the training of 200 health staff in the treatment of severe malnutrition.

Water, sanitation and hygiene (US$ 39,058,500)
In Northern Sudan, including the three states of Darfur, over 2.3 million people will be reached with water, sanitation and hygiene support. Coordination and leadership will continue to be provided as part of UNICEF’s lead agency role in the sector. Activities will include:

• Access to improved water supply will be increased to within 1 km for over 719,000 people and access to sanitary means of excreta disposal will be increased for over 719,000, including 20,000 schoolchildren;
• In Darfur, the continuous availability of improved water supply and sanitation facilities will be ensured for about 2.3 million and 400,000 people respectively;
• Awareness on environmental sanitation and hygienic practices will be increased for over 2.3 million people.

In Southern Sudan, over 235,000 IDPs, with a focus on children and women, will be reached with the following activities:
• Rehabilitate/construct wells and sanitary facilities in 70 schools; equip 400 new and existing water points with handpumps to provide safe drinking water to some 200,000 individuals, including in areas of return; and 10,000 households and 182 institutions will benefit from latrines;
• Train 350 local water authority management teams and 20 county teams in water, sanitation and hygiene education and promote hygiene awareness in 70 schools and 350 local communities in order to complement existing water and sanitation services.

**Education (US$ 24,379,329)**

In Northern Sudan, including the three states of Darfur, about 350,000 children and youth will be reached through the following activities:
• A total of 245,000 children newly enrolled in Grade 1 will have increased access to school through 4,900 newly constructed classrooms (both permanent and temporary learning spaces); 30,000 out-of-school youth will have access to 750 learning centres for accelerated learning; 275,000 children will benefit from the school feeding programme and access to safe water and sanitation at school; and 550 parent/teacher associations will be established and trained to co-manage child-friendly schools;
• Ten resource teachers per state will be trained in gender-sensitive child-centred methodologies. They will in turn give in-service training to 5,500 teachers; 550 school heads will be trained in child-friendly school management in emergency contexts, including emergency response planning and impact mitigation, managing early childhood development (ECD) services in primary schools and assessing teachers’ on-job performance;
• Some 275,000 children in emergency environments will have greater access to education materials and 550 schools will receive recreational kits to improve psychosocial support to children in emergencies;
• A comprehensive assessment of learning spaces in emergency areas will be conducted including an assessment of the skills learning needs and facilities for adolescents out of school in collaboration with the UN Industrial Development Organization (UNIDO) and UNESCO;
• Accelerated learning classes will be offered to 30,000 adolescents (demobilized child soldiers, returnees, school drop-outs) in 90 learning centres linked to vocational training activities supported by UNIDO and UNESCO.

In Southern Sudan, a total of 1.6 million students, 17,000 teachers and 3,100 head teachers will be reached through the following activities:
• Supplies will be provided, including 17,000 Southern Sudan student kits, 17,000 teacher kits, 17,000 mobile blackboards, 250,000 schoolbags for children in lower primary school, and 3,100 recreational kits for 1.6 million schoolchildren in primary and accelerated learning programme (ALP) classes;
• Basic training will be provided for 20 government logisticians in the storage and distribution of educational materials;
• Training will be provided for 5,000 primary schoolteachers (2,900 in Intensive English for early recovery and 2,500 in fast-track teacher training), with particular attention to interactive methodologies, life skills for primary prevention of HIV and promotion of psychosocial development and peace;
• Access will be increased through the creation of 500 tented learning spaces and construction of 80 classrooms to accommodate 30,000 primary and ALP schoolchildren.

**Child protection, including mine action (US$ 24,593,200)**

In Northern Sudan, including Darfur, some 350,000 war-affected and displaced children and over 5 million vulnerable people will be reached with the following activities:
• Psychosocial support will be provided for an estimated 150,000 war-affected, displaced and returnee children, as well as 200,000 schoolchildren benefiting from improved psychosocial well-being;
• Awareness will be raised amongst 5 million people in nine states through campaigns on female genital mutilation/cutting (FGM/C), early marriage, children in conflict with the law, sexual abuse, and family-based care;
• 1,500 children will be released from armed groups and those in need will benefit from reintegration services. Systems to document and follow up cases of underage recruitment will be developed;
• Women and Children Protection Units in the Police in seven states will be established and social work capacity-building will be initiated in these states;
• Key issues such as abandonment of babies, FGM/C and early marriage will continue to be addressed and coordination and leadership through working groups and other fora will continue to ensure response, address gaps and ensure forward progress in the sector;
• Mine-risk education (MRE) will continue, reaching an estimated 300,000 people living/returning to mine/unexploded ordnance (UXO) affected areas; 500 teachers will be trained and will in turn reach 20,000 schoolchildren. Coordination of MRE efforts and capacity-building for five MRE partners will be strengthened; data collection/surveillance will be enhanced in three states in northern Sudan.

In Southern Sudan, nearly 120,000 people, including those in the dangerous process of return and children associated with armed forces in Southern Sudan, will be reached with the following activities:
• NGO staff and social workers will be trained on monitoring and responding to child protection issues, including sexual abuse and the needs of orphaned and separated children, and 1,000 vulnerable and at-risk children will be provided with psychosocial support by governmental social workers;
• Reintegration and rehabilitation services will be offered to 1,000 children and the situation of 10,000 returnee children will be monitored to ensure they are protected from abuse;
• A total of 1,000 children associated with armed forces in Southern Sudan will be removed and reintegrated into the community;
• At least 5,000 children and 100,000 adults living or returning to landmine/UXO affected areas will be reached with correct information about landmine and UXO risks and prevention methods, and at least 20 per cent of the 5,000 children will be trained on MRE to act as peer educators.

Non-food items (NFIs) and emergency coordination, preparedness and response (US$ 17,538,000)
In Northern Sudan, including the three states of Darfur, some 430,000 households will have increased access to basic non-food items and emergency shelter materials. In the north, UNICEF procures these materials on behalf of an inter-agency pipeline.

In Southern Sudan, some 20,000 displaced persons, host communities and impoverished persons will benefit from the procurement and distribution of NFIs. Supplies will be prepositioned to ensure rapid response. UNICEF does not procure for a common pipeline in Southern Sudan, but does work in close collaboration with inter-agency partners providing similar support.

HIV/AIDS (US$ 5,380,000)
In Northern Sudan, including the three states of Darfur, some 400,000 displaced persons, host communities and impoverished persons will be reached with the following activities:
• Awareness-raising activities will be organized reaching 250,000 out-of-school youth, equipping them with information and skills to reduce their vulnerability to HIV and AIDS;
• 1,000 teachers will be trained in the Greater Darfur region on a HIV curriculum using a life skills approach to reach 150,000 children in schools;
• Prevention of mother-to-child-transmission (PMTCT) services (including routine counselling and testing, treatments and follow-up care) will be offered to a minimum of 6,000 pregnant women;
• NFIs, recreational activities and psychosocial support will be provided for 300 children and households affected by HIV and AIDS.

In Southern Sudan:
• 100 medical providers will be trained on receiving and treating rape victims and 200 post-exposure prophylaxis (PEP) kits will be provided for use in emergency-affected areas.
Communication and advocacy (US$ 2,776,680)
In Northern Sudan, including the three states of Darfur, approximately 700,000 IDPs and returnees (including some 50,000 children) and people from the host and receiving communities will be reached with the following activities:

- Six geographic-specific video documentaries, radio programmes and printed information messages will be produced about areas of possible return in order to help IDPs, returnees and host/receiving communities make informed decisions about their return options and allow for effective reintegration. Various types of communication equipment will be distributed to assist in these efforts.
- Six national NGOs will be supported in their engagement with IDPs on key messages and 50 staff from NGO and government counterparts will be trained in working directly with IDPs on strategic communication planning and implementation skills.

In Southern Sudan, some 5 million displaced, host communities and impoverished persons will be reached with the following activities:

- Training will be provided for 50 facilitators in five focal states on communication skills to combat disease outbreaks, such as cholera, meningitis, avian influenza, and other communicable diseases, targeting returns and host communities;
- Culturally relevant information, education and communication (IEC) materials, radio programmes/spots and interactive community theatre for awareness-building and community mobilization will target 5 million people among the general population, returnees, IDPs and host communities;
- Stakeholder advocacy and media forums will be held to accelerate message dissemination about returns for peaceful and smooth reintegration in their area of return;
- Capacity-building will take place through community radio listening groups in five focal states to facilitate community-based outreach towards healthier and safer lifestyles;
- Faith-based organizations, youth, women and other community-based organizations will be engaged and trained in facilitating intensive community-based public education through drama/theatre and other culturally relevant channels.