Gender Assessment and Needs Analysis in the Context of the South Sudan Humanitarian Crisis

The Republic of South Sudan (RSS) was established on 9 July 2011 after five decades of near continuous war, and following the six-year interim period of the Comprehensive Peace Agreement (CPA). RSS was subsequently admitted into the United Nations General Assembly on 14 July 2011 and into the African Union (AU) on 15 August 2011. RSS is divided into ten (10) states. The country entered its independence status as one of the most under-developed countries in the world. Up to 60 per cent of remote locations are inaccessible during the rainy season. Many of these areas are insecure because they are inaccessible, and state structures, including law enforcement, have little if any capacity to access or intervene when conflict occurs. At least 80 percent of the population is income-poor, living on an equivalent of less than USD 1 per day. More than one third of the population is food insecure and even in a good year, 20 percent of households cannot support themselves. Less than 40 percent of the population has access to any form of health care.

1 The information in this section is extracted from the 2012-2013 UN Development Assistance Framework prepared by the Government of South Sudan and the United Nations Country Team in consultations with partners.
Up to 60 per cent of remote locations are inaccessible during the rainy season. Many of these areas are insecure because they are inaccessible, and state structures, including law enforcement, have little if any capacity to access or intervene when conflict occurs. At least 80 percent of the population is income-poor, living on an equivalent of less than USD 1 per day. More than one third of the population is food insecure and even in a good year, 20 percent of households cannot support themselves. Less than 40 percent of the population has access to any form of health care.

While some progress has been made in the area of immunization, the proportion of fully immunized children is only 5.8 percent. The maternal mortality rate is the highest in the world and gender based violence and rape devastates both individuals and communities. The conflict has undermined traditional social structures and community coping mechanisms and has had widespread psycho-social impact on affected communities. Inter-communal conflicts remain prevalent, resulting in large numbers of casualties and mass displacement, disproportionately affecting women. In 2011 alone, more than 3,000 people have died from violent conflict within South Sudan, and 350,000 people have been displaced. In the lead-up to independence, more than 300,000 Southerners who had been living in the north returned to the south, in addition to the more than two million who had already returned since 2005, often to rural communities lacking livelihoods, infrastructure, water, schools and health posts.

The Republic of South Sudan is richly endowed with mineral wealth including oil – currently the sole mainstay economy. The country is still engaged challenging negotiations with Sudan over sharing oil revenues that led to the shut-down of oil, outstanding border demarcation issues over which several battles have been fought since independence. With oil resources the country is also having to manage interests from global and regional state and non-state actors. It is in this context that the latest crisis and the extent of the vulnerabilities of the state and its people have to be understood.

**The current conflict and consequent humanitarian crisis**

The latest armed violence was triggered by a political dispute within the Sudan People’s Liberation Movement (SPLM) on December 15, 2013. It rapidly spread from Juba, Central Equatoria State to Jonglei, Unity and Upper Nile states, appearing to take on an ethnic trajectory. Lakes and Warrap states have been indirectly affected by the violence as people displaced from neighbouring states have arrived there seeking refuge. The armed violence has resulted in a humanitarian crisis, including but not limited to the loss of lives, widespread displacement within and outside of the country, rape, mass rape and other forms of gender based violence against women and girls, torture, destruction of property, and forced recruitment of boys and male youth.

UN Office for the Coordination of Humanitarian Affairs (OCHA) estimates that 738,000 civilians have been displaced by armed violence and insecurity. Of these, 74,800 have sought shelter and protection at bases of the United Nations Mission in the Republic of South Sudan (UNMISS). OCHA and United Nations High Commissioner for Refugees (UNHCR) also estimate that there are 130,400 new South Sudanese arrivals in Ethiopia, Kenya, Sudan and Uganda. OCHA and UNHCR indicate that those arriving consist of mainly children, women and the elderly.
The UN System Response

The UN system response has generally consisted of physical protection of civilians in UNMISS bases in Bentiu, Bor, Juba and Malakal. There has also been provision of healthcare including surgical and medical assistance to the wounded, provision of food, tent materials for shelter, water, and sanitation. Due to the security situation the UN services is largely targeted at IDPs in the UN compounds of Tomping and Juba 3 (UN House). Humanitarian agencies launched the South Sudan Crisis Response Plan on February 4, 2014 urgently appealing for USD 1.27 billion to assist 3.2 million persons affected by the humanitarian consequences of the political crisis. This funding will go towards meeting the most urgent needs until June 2014, as well as pre-position supplies for the duration of the year before the rains start in March/April, greatly complicating any future delivery of emergency relief supplies.

Cognisant that the crisis is still unfolding and its impact on communities still evolving, coupled with the lack of clarity around a political settlement, humanitarian actors anticipate further and protracted displacement and are preparing and planning accordingly. Based on needs assessments in accessible areas with displaced populations, government and humanitarian actors, the humanitarian country team has prioritised the South Sudan Crisis Response Plan as follows: nutrition, food security and livelihoods; assistance to refugees; and water, sanitation and hygiene.

The UN works with other humanitarian actors (mainly international NGOs) through a cluster system. The Clusters are lead and co-lead as follows:

- Camp Coordination and Camp Management (CCCM) is led by International Organisation for Migration (IOM) and United Nations High Commissioner for Refugees (UNHCR) and co-led by ACTED;
- Food Security and Livelihoods is led by Food and Agriculture Organisation (FAO) and World Food Programme (WFP) and co-led by VSF-B;
- Health is led by World Health Organisation (WHO) and co-led by International Medical Corps (IMC);
- Multi-Sector Response to Refugees is led by UNHCR and co-led by Danish Refugee Council (DRC);
- Non-Food Items, Emergency Shelter is led by IOM and co-led by World Vision;
- Nutrition is led by UNICEF and co-led by Action Against Hunger (ACF-USA);
- Protection is led by UNHCR and co-led by Norwegian Refugee Council (NRC);
- Child Protection Sub-Cluster is led by UNICEF and co-led by Save the Children;
- GBV Protection Sub-Cluster is led by United Nations Population Fund (UNFPA) and co-led by American Refugee Committee (ARC); and
- Water, Sanitation and Hygiene is led by UNICEF and co-led by Medair.

The humanitarian community is facing a number of challenges in delivering assistance to affected areas. Access remains a major constraint owing to persisting pockets of armed violence. Areas where hostilities have taken place may be contaminated with unexploded ordinance. Following the evacuation of international staff from non-governmental organisations (NGOs) and UN agencies and relocation of national staff based in violence hotspots, humanitarian actors are not operating at
optimum staffing capacity. Even at full staff capacity, the scale of the crisis requires significant external surge capacity. Humanitarian agencies’ assets, property and supplies have been partially or fully looted, vandalised and destroyed. For instance, World Food Programme (WFP) estimate 4,300 metric tonnes of pre-positioned food commodities looted. This food is enough to feed more than 257,000 people for a month.

In spite of the challenges, OCHA estimates that of the 738,000 IDPs, 299,400 have been reached with some form of assistance. It is important to note that this does not indicate that needs have been comprehensively met.

**Justification for a gender assessment**

This gender assessment is informed by the fact that women, men, girls and boys experience conflict-related crises differently. As a result their respective responsibilities and priorities are often different. Understanding how gender roles, power relations between women and men, and the positioning of women and girls determine women and men’s experiences of conflict, their coping methods, and needs. Appreciation of this reality is key to the design and implementation of gender responsive and rights-based humanitarian action. The Inter-Agency Standing Committee (IASC), a forum for coordination and policy making for UN and non-UN humanitarian actors explains that in crisis situations, mainstreaming a gender focus from the outset

- allows for a more accurate understanding of the situation;
- enables us to meet the needs and priorities of the population in a more targeted manner, based on how women, girls, boys and men have been affected by the crisis;
- ensures that all people affected by a crisis are acknowledged and that all their needs and vulnerabilities are taken into account; and
- facilitates the design of more appropriate and effective responses.”

United Nations Entity for Gender Equality and the Empowerment of Women (UN WOMEN) was established to assist countries to progress more effectively and efficiently toward achieving gender equality, women’s empowerment and upholding women’s rights; and to hold the UN system accountable for its own commitment towards gender equality. This report is prepared in the context of this mandate, and as part of the UN Women contribution to the overall UN System support to the government and people of South Sudan during this crisis. The assessment builds on current UN Women efforts including providing substantive input to data collection tools and platforms used by OCHA, IOM and International Rescue Committee in order to strengthen sex and age disaggregated data. The tools are currently in use for IDP registration, shelter needs assessment, and women’s needs assessment, including the GBV Protection Sub-Cluster Assessment tool/ minimum questions. UN Women has also provided technical support to the gender focal persons in the different clusters.

**Methodology and limitations of the assessment**

The gender assessment of the humanitarian situation and response consisted of a desk review of secondary data and information on the humanitarian crisis and response generated by UN humanitarian
actors. This was complimented by primary data and information gathered through focus group discussions and individual interviews with women and men, boys and girls from the displaced population in the two UNMISS sites in Juba - UNMISS Tomping and UN House. Interviews with some local and international non-governmental humanitarian actors on-site; and persons from various United Nations (UN) agencies were held.

The gender assessment was limited to the two UNMISS Protection of Civilian (PoC) sites in Tomping and UN House although some reference is made from secondary data, and analysis om other IDP sites in Juba and beyond, and refugee displacement tracking in Ethiopia, Kenya, Sudan and Uganda. Within the PoC sites, it was challenging to access IDPs in any organised manner owing to congestion of the sites, particularly UNMISS Tomping. Women in the PoC tend to go out of the site during the day in order to fend for their families. Arranging for the focus group discussions with the women was therefore a challenge. There was a lack of safe and private space at the UNMISS Tomping site, again due to overcrowding. Generally with the crisis still unfolding, it has been challenging to access humanitarian actors as they are seeking to respond as rapidly as possible to the complex emergency; undertake a systematic and detailed study in all the affected areas; and generate or access reliable data.

**UNMISS Tomping Site**

According to the IOM CCCM Crisis Response IDP Registration data map updated to January 30, 2014, the UNMISS Tomping population of 27,562 individuals consists of 13,395 females (49 per cent) and 14,167 males (51 per cent). In spite of the majority population being male, of the 10,752 households, 6,111 are women headed households (WHH) that is 58 per cent; and 4,641 male headed households that is 42 per cent. Thirty four (34) per cent of the households are incomplete, that is, missing one or more family members.

The site is 13 times denser than the recommended humanitarian minimum. It is housing 13 persons per 45 square metres, against the recommended humanitarian indicator of one person per the same. The site is located in an area that is considered to be a 1 in 5 year flood zone according to the Global Risk Data Platform. The annual rainy season starts from March/ April to October potentially placing this IDP population at risk.

**UN House**

According to the IOM CCCM Crisis Response IDP Registration data map updated to January 30, 2014, the UN House population of 15,920 individuals consists of 7,258 females (46 per cent) and 8,662 males (54 per cent). The MHH are 4,992 that is 54 per cent and the WHH 4,311 that is 46 per cent. Within this 10 per cent of the households are incomplete. The site is slightly less congested than Tomping but still 10 times denser than the recommended humanitarian minimum. It has 10 persons per 45 square metres against the recommended one per the same.

**Findings of the assessment**
Below is a summary of the findings from the rapid gender assessment focusing on the priority areas identified in the South Sudan Crisis Response Plan namely, nutrition, food security and livelihoods, assistance to refugees, and water, sanitation and hygiene.

1. Shelter

Response: In UNMISS Tomping this included setting up communal shelters, which are open spaces with a plastic cover on top but open sides and no partitions inside. There was no grouping of similar households, such as WHH and single women being housing together, as households and individuals came together hastily. This is because the population density in the site did not allow for household tents. However, as some IDPs have since been moved to UN House, and efforts begun to progressively distribute tents to replace the communal shelter.

Gender Gaps: The UNMISS Tomping site is 13 times denser than the recommended humanitarian minimum, which poses significant health and protection risks. Households and individuals find themselves housed in hastily assembled living quarters with WHH and single women housed with unknown males. Pregnant and lactating women have no privacy to deliver and breastfeed. It has also been a challenge to find secure women and child friendly spaces to meet, learn or play.

Shelter was presented as the most urgent need by the women in the focus group discussions (FGD), saying that all other issues were dependent on this factor. Families and individuals find themselves housed in hastily-assembled tents made of plastic sheets without doors, increasing security concerns, privacy issues, and thefts of property.

UN House on the other hand, is a little less dense at 10 times density than the requirements, with significantly less health and protection risks. It has one safe space for women, and is in the process of setting up child friendly spaces.

Gender Priorities:

i. Tents per household for privacy in UNMISS Tomping to restore some form of family cohesion, dignity and security.

ii. In the absence of tents, WHH and single women should be housed together in communal structures that are partitioned with a piece of cloth.

iii. Secure safe space for women’s and girls’ organising in UNMISS Tomping.

iv. Child friendly spaces in both UNMISS Tomping and UN House.

2. Nutrition

Response:

3. Food security, nutrition and livelihoods

Since the onset of the crisis, there have been two distributions of corn-soy blend, fortified with oil and dry skim milk (CSB++) and sugar in UNMISS Tomping and UN House. Each distribution includes two-week rations of 400 grams per person per day of CSB++ and 40 grams per person per day of...
sugar. The two distributions did not target the same households, and all households interviewed at UNMISS Tomping had only received one distribution.

The nutrition response has been focused on treating acute malnutrition in children under five years of age, pregnant and lactating women and other vulnerable groups by supplying protein-rich cereal (CSB++), vitamins and other micronutrients for children. The Nutrition Cluster has also just released an advocacy strategy promoting breastfeeding over milk alternatives and seeking the support of related humanitarian country actors on the same.

**Gender Gaps:** CSB++ is highly nutritious (it contains proteins and minerals) and is easy to cook into a porridge-like meal. It was the preferred food distribution, at onset as displaced persons did not have charcoal or kitchen sets. However, women and men IDPs consider it to be neither adequate nor appropriate for adults for breakfast, lunch and dinner, or known within the local culture. It is the role of women and girls to feed the family, and due to the security situation there is a perception that men are likely to be killed if they leave the protection sites. This has forced women and girls to leave the camp in search of food and other necessities thus exposing them to risks of sexual abuse including survival sex. Survival sex is also reported within the confines of the Tomping site.

**Gender Priorities:**

1. Better protection within the Tomping site or decongesting it by negotiating with government safe passage to other sites with UN protection;
2. Improving the quantity, type and quality of foods as to reduce the risks to women, particularly risks to sexual exploitation.
3. The commencement of some gender sensitisation programmes within the sites, to counter increased family or intimate partner violence. Women reported that men demand for any money earned outside the UN sites, and are subjected to violence if they refuse.

4. **Physical security including prevention of, and protection from violence against women**

**Response:** The protection of civilians response includes monitoring, advocacy and mitigating the effects of rising violence among IDPs. It has also sought to enhance protection for children, adolescents and women affected by the crisis with a focus on identifying separated, unaccompanied or missing children and family tracing and reunification. Provision of child and gender sensitive prevention and response to GBV services has started. UN Police (UNPOL) working together with the UN Department of Safety and Security (UNDSS), UNMISS Protection of Civilian section, the Protection Cluster actors and community leaders are working out a way to improve safety and security in the two sites.

**Gender Gaps and priorities**

1. Children separated from families;
2. Protection of women when they go out of the sites to seek livelihood and source for food;
3. Community safety and security management in the two PoC sites; almost all camp leaders are men.
iv. GBV case management, referral pathways and dissemination of information on the same to IDPs are not clear to the women and men in the CoP sites; and

**Gender Priorities:**

i. Trauma healing for survivors of GBV and direct armed violence that is cultural, gender and age sensitive.

ii. There is urgent need for a UN organisation to systematically monitor, document and respond tp sexual exploitation and abuse.

iii. The protection of women from sexual violence and exploitation was paramount in the needs articulated by the men during focus group discussions. They felt frustrated - they as men cannot go outside to fend for their families for fear of being captured.

iv. Initiatives that would keep men occupied in a meaningful way as a strategy for the prevention of violence within the community. Young men are always fighting, which leaves women, girls and children feeling unsafe.

v. Modify information dissemination within the sites to ensure that WHH and women have direct access to information;

vi. Fast track efforts to locate an alternate site that will be suitable to relocate the UNMISS Tomping IDPs;

vii. Implement child and gender sensitive community safety and security; and

viii. Upscale GBV case management, strengthen the referral pathways and disseminate the information on the same wider within the PoCs, especially UNMISS Tomping.

5. **Health**

**Response:** The initial response focused on preventing and controlling an outbreak of cholera and measles, the provision of emergency primary healthcare services for vulnerable people with limited or no access to health services. The UN and partners are also providing emergency response capacity for surgeries, including emergency obstetric care; preventing the spread of communicable diseases; and providing reproductive health care and medical services to GBV survivors. Over the site hangs a strong fetid stench of stagnant shiny black water in the drainage canal, open and exposed, with garbage and other rubbish stuck in the un-moving mess. The stench is even more pervasive in the extreme temperature of this season.

Women complain of a dire need of sanitary towels. In these circumstances, women and girls of childbearing age often are forced to just sit ‘in the soil during daylight and just let the blood seep into the soil’. This means for at least four days this category of women girls must be excluded from social, economic and public activities, in addition to the community knowing her cycle. There are serious risks of infections.

The sanitation situation is compounded by inadequate toilet and washing facilities. There is fear that with the onset of torrential rains in the next few weeks, diseases like malaria and cholera will engulf them, accompanied by floods all over the site.
Gender Gaps:

i. The women interviewed estimate two to three children are dying daily, but the cause is still unclear;

ii. UNMISS Tomping and UN House have not had a distribution of sanitary towels; and

iii. Information about access to reproductive health care.

Gender Priorities:

i. Improve drainage at UNMISS Tomping;

ii. Increase secure and well lit washing facilities and latrines with gender balanced guards/ guides to ensure apt segregation and use of facilities; and

iii. Fast track efforts to procure and distribute sanitary kits, ensuring a healthy pipeline for monthly distribution.

6. Water, sanitation and hygiene

Response: The WASH response has focused on the provision of emergency water points with safe drinking, emergency latrines and the promotion of good hygiene to IDPs. However the status of sanitation facilities is most worrying in the Tomping site with 113 persons sharing 1 latrine – compared to the recommended 20 persons! The figure below is adopted from the Camp Coordination and Camp Management (CCCM) crisis response map for the period 23 December 2013 – 31 January 2014.

Gender Gaps:

i. Initially UNMISS Tomping did not have sufficient latrines or any washing facilities owing to the site congestion. This is improving with washing facilities constructed and more latrines built.

ii. Latrine doors are flaps that are blowing open by wind, necessitating women and girls to go in twos to stand guard for each other. In some efforts have been made to secure them from the inside;
iii. The areas around the latrines and washing facilities are not well lit and therefore women and girls do not feel safe to use them at night. WASH Cluster has committed to look into solar lighting;

iv. Communal washing facilities, with some men and women electing to bath fully dressed to avoid exposing their nakedness; and

v. The UN House Community Safety Mapping undertaken by IRC found that girls and boys are afraid to use the latrines, as there are men present who beat and chase them away. This has implications for their personal and site hygiene; and

vi. The same mapping at UN House found that some men expressed fear for using latrines, as they do not want to be accused of sexual harassment.

Gender Priorities:

i. Fast tracking lighting the areas around latrines and washing facilities;

ii. Establish a roster of a gender balanced team of community volunteers to stand guard at latrines and washing facilities; and

iii. In consultation with the community, find a suitable waste management solution for sanitary towels.

Peace talks and mediation efforts

Multi-track diplomatic and political efforts kicked off soon after the outbreak of the current conflict in December 2013. Involved have been individual heads of state, the Intergovernmental Authority on Development (IGAD), and the African Union Commission, at the African level, as well as China, the European Union (EU), the Troika (Norway, United Kingdom and United States of America), and UN at the global level. These efforts culminated in UN Security Council Resolution 2132 of December 24, 2013 authorising an increase in UNMISS’s troop ceiling from 7,000 to 12,500 and the police ceiling from 900 to 1,323. Agreements on the cessation of hostilities (COH) and the release of political detainees were signed between the Government of South Sudan and the Sudan People’s Liberation Movement/Army (SPLM/A in opposition) on January 23, 2014. One on of the South Sudan negotiating parties had women representation in their team. The AU Peace and Security Council (PSC) appointed a Commission of Inquiry, to make recommendations on the best ways to ensure accountability, reconciliation and healing in South Sudan. Although an IGAD team is alleged to have commenced the process of setting up the monitoring and verification mechanism for the CoH agreement, there is scant information on the progress as well as the extent of women’s participation.

The second phase of the peace talks commenced in Ethiopia on 12 February 2014. Both sides are reported to have appointed three women to their respective delegations.

UN Security Council Resolution 1325 urges all actors to increase the participation of women and incorporate gender perspectives in all United Nations peace and security efforts. It also calls on all parties to conflict to take special measures to protect women and girls from gender-based violence, particularly rape and other forms of sexual abuse, in situations of armed conflict. Both the Republic of
South Sudan, and the members of the IGAD mediation panels, being members of the UN are obligated to take all necessary measures to fulfil, respect and promote the resolution 1325.

**Women’s Organising**
The protracted civil struggle for independence severely curtailed the emergence of civil society organisations including women’s rights organisations. The outbreak of the December 2013 conflict decimated the few small budding NGOs as most of their officials fled the country. However, there are signs that a women’s movement for peace is slowly emerging. The Sudan Women Leaders’ for Peace is a coalition of parliamentarians, faith-based and community women united by their commitment to advocate for peace in South Sudan. They continue to mobilise, reach out to those in IDP camps and in communities and open dialogue with political leaders. They have also reached out to senior women from other African countries, who have experience in mediation for peace and peace building for guidance and support. They have also called on government for the inclusion of women in the peace talks. UN Women has provided varied support to the women.

**Gender priorities**

i. Guided by the principles and objectives enshrined in UNSC Resolution 1325, UN agencies, in particular UN Women should support women of South Sudan to be fully involved in the process of resolution of the current and any residual conflict. They should also support women’s effort to participate in the current peace negotiations taking place in Ethiopia, under the aegis of IGAD.

ii. There is urgent need to support women to develop the necessary capacities and skills to effectively participate in peace talks, peace building and other nation building activities.

**Way forward for UN Women**

**Humanitarian Strategy**

In light of the gender assessment, UN WOMEN’s South Sudan Country Office humanitarian strategy in keeping with the Global Humanitarian Strategy is committed to the achievement of equality between women, men, girls and boys as partners and beneficiaries of humanitarian action; and to the integration of gender equality across humanitarian action. To this end, UN WOMEN adopting a modified approach to suit the context and developments as they unfold will broadly:

1. Build upon efforts initiated to support gender in the present humanitarian response;
2. Advocate for and mobilise significant external gender surge capacity, whilst strengthening in-country gender capacity for humanitarian action within the Country Office and other agencies;
3. Support women’s leadership and meaningful involvement in displaced person sites;
4. Support the generation, sharing and management of sex and age disaggregated data and gender analysis of the same; and
5. Engage in multi-track and -level evidence-based advocacy on key gender gaps and priorities.

**Early Recovery to Peace and Security**
UN WOMEN is uniquely positioned to bridge from humanitarian response to early recovery to peace building and development given its expertise and experience in women, peace and security. To this end, UN WOMEN will engage in the following:

1. “Narrative interruption” through a pilot in UNMISS Tomping to begin with. Given the rising tensions and fear within the PoC sites; rumours coupled by limited information; trauma – historical and triggered by the recent crisis and other factors, UN WOMEN will pilot an intervention that will work through existing community structures and influencers to interrupt narratives that deepen trauma, cause further ethnic schisms, heighten tension, and could ultimately contribute towards triggering armed violence. The intervention will be contextualised to the dynamics in UNMISS Tomping and to factor in other nuances of the displaced population.

2. Embedding trauma healing (and supporting the same) in the national conversation that will be initiated in the second half of the year by the National Committee on Healing, Peace and Reconciliation; and strategically supporting the implementation of the outcomes of this national conversation which are envisaged to be taken up by the South Sudan Peace and Reconciliation Commission and the Specialised Committee in the National Assembly on Peace and Reconciliation. There is a major niche here for UN WOMEN, as none of the above three entities nor peace building actors have solid trauma healing expertise or experience. Those who do, have it in trauma counselling, which has not worked well in fragile, conflict and post-conflict African contexts where large populations need to be targeted. Further, support women’s meaningful engagement right from displaced women and beyond, and a gender and child sensitive approach in the same.