WORLD VISION
AND
WAR CHILD HOLLAND

Education in Emergencies and Protection
Joint Needs Assessment Report

Baliet and Malakal Counties
Upper Nile, South Sudan

Assessment Dates:
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A. Acknowledgments

Diverse teams provided unwavering support leading to a successful joint rapid needs assessment in Baliet and Malakal counties of South Sudan:

● Special thanks to World Vision and War Child Holland staff and technical teams from Headquarters and South Sudan offices who were jointly involved in the assessment design, data collection, analysis and reporting;
● Sincere appreciation to the Global and National Education and Protection Cluster coordinators who provided access to education and protection assessment tools for contextualization and adaptation based on assessment objectives;
● Special gratitude to key partners in the field locations, notably Ministry of General Education and Instruction (MoGEI) and International Medical Corps (IMC) who provided relevant information; and
● Sincere appreciation to the community representatives, boys, girls, men, women, community leaders and teachers from Internally Displaced Populations (IDPs), returnees and host communities who made time to provide responses to assessment questions.
B. Introduction

World Vision International South Sudan (WVI SS) and Stichting War Child/War Child Holland (WCH) have been providing life-saving assistance to Internally Displaced Persons (IDPs), returnees and host communities in South Sudan for the last three decades and two decades respectively.

Specifically, WVI SS has been implementing relief, recovery and development projects in South Sudan since 1989. Implementing integrated programmes in Education in Emergencies, School Feeding Program, Child Protection, Food Security and Livelihoods, WASH, Health, Nutrition, Safeguarding and Peacebuilding. WV’s programmes in Upper Nile State are aligned to the Upper Nile Solution Strategy which anticipates the return of the displaced population from within and outside South Sudan targeting communities impacted by the conflict both in the formal (Malakal POC) and informal camps as well as in the host communities. The current operational area is served by a static office in Malakal, Rapid Response Mechanism (RRM/Outreach) and through partnerships with other organizations in the hard to reach, very insecure areas. WVI SS is currently implementing integrated education and protection interventions in 7 schools in Baliet and has a well-established relationship with Education Cluster, CP Cluster and SGBV Sub Cluster and other stakeholders in Baliet. WVI SS has local staff on ground in Baliet supporting current interventions in EiE and Child Protection, and other sectors (WVI SS Project reports, January 2021).

WCH has been in South Sudan since 1998, with five years in Upper Nile State where it has been working with children and communities on interventions in child protection, psychosocial support and education. In the context of ongoing conflicts, emergencies and general structural dysfunction, WCH focuses on supporting individual children, families and communities in addressing and preventing violence, abuse, exploitation and neglect of children, by providing services that are practical, pragmatic, supportive of indigenous coping mechanisms whilst benefiting from evidence-based innovations, and promoting people’s dignity through active and meaningful participation of the affected persons. WCH has static field offices in Upper Nile State (Malakal), Jonglei and Eastern Equatoria states. In Upper Nile, WCH has been providing community-based CP and PSS services in the Protection of Civilian (PoC) site and communities/payams in Malakal County as well as the hard-to-reach west bank of the Nile.
comprising of Fashoda, Canal Pigi and Panyikang counties. WCH coordinates with relevant national ministries and their Upper Nile State counterparts, particularly the Ministry of Gender, Child and Social Welfare (GoGCSW), MoGEI and the state government (WCH Project reports, January 2021).

In response to the 2021 ECHO call and in consultations with key actors in Baliet and Malakal counties (see map on Annex 1 of this report), WVI SS and WCH commissioned a joint assessment in both counties from 21st to 24th January 2021 (see attached target location map in Annex 1 below). The objective of the joint assessment was to ascertain the latest needs of IDPs, returnees and host communities with regard to EiE and Protection (CP and GBV) so as to inform future programming, build synergies between existing and future programming as well as ensuring complementarity of interventions for broader impact to the community. The assessment aligned with Inter-Agency Network for Education in Emergencies (INEE) standards, Child Protection Rapid Needs Assessment Toolkit and reference made the GBV Rapid Needs Assessment Toolkit. Through purposive sampling, 5 schools and their surrounding locations were visited, three in Baliet and two in Malakal counties of Upper Nile.

The report was compiled based on diverse secondary data reviewed as well as primary data collected from host, IDP and returnee communities. For secondary data, the main sources consulted included: UNOCHA 2021 Humanitarian Needs Overview (HNO) for South Sudan, IOM Service Mapping, WCH Security Audit, WVI SS Good Enough Online Context Analysis for Rapid Response (GEOCARR) 2020, OCHA’s Partner Presence Mapping in South Sudan as at October 2020 on 3 W (Who does What, Where), Danish Refugee Council (DRC) Malakal PoC Headcount as at September 2020, Danish Refugee Council (DRC) Malakal Payams Headcount as at December 2020, WVI SS project reports and WCH project reports. Primary data was collected from women, men, boys, girls and adolescents of various age groups as well as key stakeholder representatives [Ministry of General Education and Instruction (MoGEI), International Medical Corps (IMC). A total of 68 interviews were conducted [44 Key Informant Interviews (KII) with head teachers, community leaders, MoGEI, and IMC, and 24 Focus Groups Discussions (FGDs)] with a minimum of 6-8 participants per FGD in line with COVID-19 regulations were held with community leaders, teachers, children and adolescents in school and out of school. In addition, relevant secondary data available in the form of plans and reports was also consulted. Based on this, the assessment report highlights context analysis from consulted secondary data and primary data key findings by sector (EiE, CP and GBV) as well as short-term and long-term recommendations for programming.
C. Assessment methodology

**Sampling:**
Purposive sampling was done based on the following criteria:

- IDP presence in host communities
- IDP presence in camps including Protection of Civilian (POC) sites
- Returnees
- Host communities
- Organizational presence and capacity (WVI SS and WCH Presence)
- Areas where WVI SS and WCH will implement when proposal is funded
- Temporary settlement sites of IDPs in communities (in towns and IDP camp)
- Existing projects by other partners that promote complementary of efforts in communities and schools
- Formal schools where IDPs and host communities are benefiting from
- Formal schools with Accelerated Learning Programs where IDPs and host communities are benefiting from
- Non-formal schools where IDPs and host communities are benefiting from (including cattle camps)
- Presence of and lack of protection services where IDPs and host communities are benefiting from
- Mix of Urban, Peri-urban and Rural locations

Consequently, five primary schools and their communities were engaged in primary data collection as indicated in the following table.

**Table: Schools Visited**

<table>
<thead>
<tr>
<th>County</th>
<th>Names of Primary Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baliet</td>
<td>Adong Girls Primary school</td>
</tr>
<tr>
<td>Baliet</td>
<td>Adong Boys Primary school</td>
</tr>
<tr>
<td>Baliet</td>
<td>Mijok Primary school</td>
</tr>
<tr>
<td>Malakal</td>
<td>Malikia Primary School</td>
</tr>
<tr>
<td>Malakal</td>
<td>Salam 2 Primary School</td>
</tr>
</tbody>
</table>

**Methods of Data Collection and tools:**
Primary and Secondary methods of data collection were used in this assessment. Primary data were gathered through adaptation of education rapid assessment tools from the Global Cluster and Country level clusters. In addition, contextualization was adapted for the Child Protection Rapid Needs Assessment Toolkit and the GBV Rapid Needs Assessment. The tools were administered at school level, community level and with key stakeholder representatives notably
the Ministry of General Education and Instruction (MoGEI) and International Medical Corps (IMC).

The following table provides a summary of the primary methods of data collection, tools used and number of sessions conducted with the various stakeholders.

<table>
<thead>
<tr>
<th>Main method of data collection</th>
<th>Tools (see report Annex 2 for details on each tool)</th>
<th>Target respondents (from IDP and Host communities)</th>
<th>Number sessions conducted</th>
</tr>
</thead>
</table>
| Key Informant Interviews (KII) | Key Informant Interview tool | -Head teachers  
-Community leaders  
-Minister of Education and Instruction (MoGEI)  
-Organizations working in target locations | 24 KII with head teachers/their representatives, community leaders, MoGEI and International Medical Corps |
| Focus Group Discussions | Focus Group Discussion tools (including separate tools on GBV) | -Teachers teaching in primary school and Accelerated Learning Programs (ALP)  
-Children (In school by gender for ages 6-10 years, 11-14 years, 15-17 years)  
-Children (Out of school by gender for ages 6-10 years, 11-14 years, 15-17 years)  
-Men and women in the community (18-49 years, and 50 years and above) | 44 FGDs held with teachers, Children in School, out of school children, men and women |

Relevant secondary data relevant contextual information was consulted from sources such as UNOCHA 2021 Humanitarian Needs Overview (HNO) for South Sudan, IOM Service Mapping, WCH Security Audit, WVI SS Good Enough Online Context Analysis for Rapid Response (GEOCARR) 2020, OCHA’s Partner Presence Mapping in South Sudan as at October 2020 on 3 W (Who does What, Where), Danish Refugee Council (DRC) Malakal PoC Headcount as at September 2020, Danish Refugee Council (DRC) Malakal Payams Headcount as at December 2020, WVI SS project reports and WCH project reports. For a full list of references, kindly see report Annex 3.

**Data Collection Team**

The primary data collection team consisted of 16 staff (15 males and 1 female); 10 World Vision staff (9 males and 1 female), 7 War Child Holland staff (7 males) from field locations and communities in Bariet and Malakal. The team was provided with virtual and face-to-face training and an opportunity to test the tools leading to minor revisions/contextualization of the tools. The team was briefed to ensure COVID-19 regulations are adhered to during the primary data collection.
collection process. An additional 10 staff, 6 from WV (4 males and 2 females) and 4 from WV (2 males and 2 females) were involved in secondary data analysis and technical oversight of the entire assessment process.

Data analysis
To pave way for data analysis, data collection was done using tablets belonging to WVI SS and WCH. Both organizations agreed to jointly use WVI SS ONA mobile data collection platform which was accessible offline during data collection and uploaded into the server following connectivity to internet connection. Data was analyzed through a mix of Microsoft Excel, SPSS and content analysis to generate findings and discussions based on key themes focusing on EiE and Protection (CP and GBV).

D. Findings
D.1 Context Analysis from secondary data

There is a history of violence and conflict in Baliet County that pre-dates the outbreak of conflict in 2013. Much of the violence has been sparked by land and border disputes in the south of the county, which borders Nuer communities, as well as along the White Nile between Padang Dinka and Shilluk communities along the Fashoda County border (CSRF, South Sudan - undated). Baliet County was severely affected by nearby fighting during the civil war that began in December 2013. The county has been significantly affected by violence and conflict, which has led to the destruction of homes, as well as the looting of cattle, affecting the livelihoods of the local communities. According to IOM DTM Village Assessment Survey - Baliet County in April 2017, 28 out of 43 assessed villages were deserted. In 2019, approximately 3,300 IDPs returned to the area from other parts of Upper Nile State, with the assistance of humanitarian actors. Also, noted was the fact that Humanitarian actors mostly concentrated their response on WASH, health and food distribution in Baliet.

OCHA’s Partner Presence Mapping in South Sudan as at October 2020 on 3 W (Who does What, Where) indicates that 15 organizations had emergency operations in Education while 39 organizations had emergency operations in Protection. Of these, only WVI SS was implementing education projects in Baliet and Malakal while Danish Refugee Council (DRC) was implementing protection in Baliet and only DRC and WCH were implementing protection and child protection respectively in Malakal. The lack of numerous education and protection actors in Baliet resulted to undocumented and unmonitored child and gender based violence issues and concerns. In 2019 and 2020, WVI SS implemented an EiE project in Baliet that focused on rehabilitation of education infrastructure that was destroyed during the fighting and provided education support to teachers, learners and communities. Currently, WVI SS through Japan Platform Fund (JPF) in
Baliet and in Malakal is supporting infrastructure development in 7 schools, working with School Management Committees (SMC) and Parents Teachers Associations (PTAs), integration of PSS activities in school and home-based learning in the context of COVID-19. WVI SS through Education Cannot Wait (ECW) Multi-Year Resilience Programme (MYRP) is also implementing in Baliet County and currently supports provision of teacher incentives, teaching and learning materials, dignity kits and teacher training in MHPSS. Although, WCH does not have a static office in Baliet, they will be hosted in WVI SS static office and build synergies with existing DRC programming to deliver Child Protection programming (including gender mainstreaming).

In 2013, conflict forced most of the population in Malakal town and surrounding areas to flee their homes, with some seeking shelter in the UNMISS protected site in Malakal. The site population peaked at just under 48,000 individuals in August 2015 and has since reduced to some 30,000 people, per the population headcount conducted by humanitarians at the end of September 2019. Nearly 52 percent (52%) of the people currently sheltering in the site are women who face risks of violence daily. Women and girls who must leave the camp in search of firewood are particularly at risk (MHPSS Cluster Document on Rising Concern About Unmet Needs of MHPSS in South Sudan - undated). According to Danish Refugee Council (DRC) September 2020 headcount for Malakal PoC, there were 33,137 IDPs and 5,545 households with age group populations as follows:

![Malakal PoC Headcount as at September 2020](image)

**Source:** Danish Refugee Council (DRC) September 2020 headcount for Malakal PoC
Consequences of conflict continue to have far reaching consequences to IDPs, returnees and host populations. The alarming increase of psychosocial distress, including suicidal behaviour, ideation and symptoms of traumatic or profound stress developed great concern within the humanitarian community. Protection and MHPSS actors committed to identify supportive measures to promote positive coping mechanisms and improve the psychosocial wellbeing of children and adults. The need for additional technical support has been discussed and agreed at state level among the Child Protection Working Group, Mental Health and Psychosocial Support actors, the Protection Cluster and OCHA. Several assessments and security audits in Upper Nile on Child Protection, GBV and MHPSS have been conducted in the past and present which are aimed at a comprehensive understanding of factors leading to dysfunctional coping strategies and to identify protective elements to be strengthened within communities and the humanitarian response to prevent and respond to the severe psychosocial distress especially for people living inside PoCs.

Outside the PoC, according to December 2020 DRC Population headcount for Malakal Payams, there were 26,246 individuals, 3,031 households representing 14,405 host community, 8,332 returnees and 3,510 IDPs disaggregated by age and gender as follows:

Source: Danish Refugee Council (DRC) December 2020 headcount for Malakal Payams
WVI SS Good Enough Online Context Analysis for Rapid Response (GEOCARR) for Upper Nile state conducted in December 2020 and specifically targeting Malakal, Melut, Fashoda, Baliel and Kodok further confirmed the following:

- Youth in Upper Nile face specific vulnerabilities with frustration most recently directed towards humanitarian agencies over their employment policies, is cited to be because of perceived marginalization compared to other states, notably lack of education and employment opportunities. This has led to Mental Health challenges leading to a high number of suicides especially in Malakal PoC.

- Education provision is already weak including challenges of infrastructure and equipment, language of the curriculum and training of teachers and paying incentives to retain them. It has been further disrupted by COVID-19 closing schools and/or them being occupied by IDPs due to the flooding. Although some schools have partially re-opened many children have not returned, prompting fears of child labour. Parental support has not been forthcoming and remote learning in some places is not feasible. Education is sadly not seen for many as an immediate priority, and although some education in emergencies support is available, it does not fully fill the gap, meaning high levels of illiteracy continue. Some children have separated from their families and gone unaccompanied to seek education opportunities in other countries/states.

- Girls may drop out of school due to pressure for marriage, including early or forced, reflecting gender dynamics where girls can be seen as a means of financial exchange. For boys, the pressure to marry, high bride prices and limited income is also a factor that may push them to get involved in risky activities such as violence, cattle raiding and crime. There is also a concern about youth resorting to increased substance abuse with any income they receive. Children, who are orphans, run households or are in foster care lack parental support and face increased vulnerability. The numerous protection risks for youth, due to violence and displacement, result in compounded trauma. There are also concerns about the vulnerability of children due to exposure to pollution from nearby oil refineries, with some birth defects being reported (Xinhuanel, “South Sudan's oil firm plans to build 500 mln USD oil refinery”, October 2020).

- Those who are displaced face unique challenges. The Protection of Civilians (PoC) site>IDP camp in Malakal is overcrowded and living conditions are difficult in terms of free space, water and sanitation, fire hazards, rising rates of domestic violence and psychological strain (IOM DTM South Sudan Displacement Site Flow Monitoring: June 2020). Despite this, funding available is limited and the uncertainty over the safety of returning to Malakal town is a concern for IDPs (New Humanitarian, “Return pressure builds as COVID-19 hits South Sudan displacement camps”, June 2020):

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1 This exercise included input from 16 WV staff working across Upper Nile and Juba via a staff survey, and key informant interviews with 18 community representatives, and 8 externals (including donors, local NGOs, and UN agencies). There was also a virtual scenario planning workshop with 22 WV South Sudan participants representing a range of different functions.
Those displaced due to flooding face challenges of shelter, water borne diseases, snake bites, access to food and disrupted livelihoods. Whilst many would wish to return home, there are concerns about new vulnerabilities, they may face in these locations, due to lack of basic service provision.

Economic hardship, illiteracy and poverty continues to divide communities, as have COVID restrictions in terms of reducing community’s ability to move around. Tensions surface frequently between displaced populations and host communities in some areas over stretched resources. Communities also remain frustrated that there has not been a re-investment of oil profits in the local areas (VOA, “South Sudan Residents Protest Oil Facilities”, August 2020).

In the latest OCHA Humanitarian Needs Overview (HNO) for South Sudan, 8.3 million South Sudanese remain in need in 2021 compared to 7.5 million in 2020 with approximately 2.4 million children being out of school in 2020 majority being girls. Girls have also registered 19% literacy rates (age 15+) compared to boys at 35% literacy rates (age 15+). Furthermore, only 25% of girls received secondary level education and 50% early marriage remains rampant with half the girls being married before 18 years. In addition, 97% of reported GBV incident survivors are female (OCHA, HNO, 2021, pg. 21). Access to basic services continue to be compromised due to a myriad of factors such as poverty, conflict, flooding and COVID-19. Economic challenges have led to parents having limited income meaning they cannot send their children to school but instead have their children engaged in child labour or girls forced into early marriage. Temporary COVID-19 school closures have reduced children’s access to school feeding programmes, which have contributed to hunger and starvation. Children have been left at home and are exposed to Gender Based Violence especially girls and children with disabilities (OCHA, HNO, 2021).

An estimated 35,300 people in Baliet County are considered to have significant humanitarian needs (OCHA, HNO 2021). This represents 20% of the estimated population of the county reported in the HNO. Baliet is assessed to have one of the lowest resilience capacities in the country (OCHA, HNO 2021). This is partly because sporadic clashes and insecurity have hindered consistent humanitarian access to the area, leaving many needs unmet. Additionally, access is a challenge during the rainy season when road conditions deteriorate (VOA, “South Sudan Residents Protest Oil Facilities”, August 2020).

Amidst the COVID-19 pandemic, gender based violence compounded by devastating loss of livelihoods inequalities continue to take a staggering toll on the lives of South Sudanese women and girls (WCH Security Audit Assessment, 7-18 August 2020). The same security audit assessment indicates that the ongoing closure of schools is even making it much worse, girls have been left at a greater risk of defilement, harassment, Child marriages, teenage pregnancies and disproportionate burden of domestic work. Similarly, according to the United Nations Security
Council report dated 14 December 2020, children have continued to be victims of the six grave violations committed by all parties to the conflict in South Sudan.

Further to the secondary data above, WVI SS and WCH commissioned a joint assessment in Baliet and Malakal counties of Upper Nile in South Sudan County to determine the latest needs among IDP, returnees and host communities specifically with regard to EiE and Protection sectors (Child Protection and GBV). These latest needs among the target population remain crucial in informing future programming, building synergies between existing and future programming and ensuring complementarity of interventions among existing partners working in the locations for broader impact.

D.2 Key findings from primary data
Below is a highlight of key findings by sector (EiE, CP and GBV):

D.2.1 Education in Emergencies

▪ Seventy-five percent (75%) of Children out of school in Baliet and 67% in Malakal attributed inability to pay school fees as the greatest barrier to accessing schooling.

▪ Fifty percent (50%) of Children out of school in Baliet and 29% in Malakal prioritized teaching and learning materials provision in and out of school as the greatest form of support they require to access learning. This was closely followed by creation of learning spaces at 29% in Malakal and 25% in Baliet.

▪ Due to COVID-19 school closure, the only children in school were candidates (Primary 8) and aged 11-14 years and 15-17 years meaning that a majority of the children of school going age were not accessing learning in the communities visited.

▪ Sixty-seven percent (67%) of children in school who are in Primary Level 8 mentioned they attended up to 5 lessons a day as per the timetable in Baliet and 33% attended up to 4 lessons in Malakal. These are fewer than the required 7 lessons for upper classes (Primary level 5 to 8) in a day based on their school timetable.

▪ Eighty-three percent (83%) children in school did not access books or reading materials outside school in Baliet while in Malakal this was the case for 75% of the children. KII with head teachers further confirmed that their schools did not have adequate teaching and learning materials.

▪ Children in school mentioned that they did not receive support in terms of being read to or being helped with homework with a higher percentage recorded in Baliet (67%) compared to Malakal (58%).

▪ Children in school appreciated that the best thing about school for them was learning/attending classes which was ranked at 83% in Baliet and 75% in Malakal.

▪ Children in school prioritized better teaching as one thing that would make their school better by ranking this 58% in Malakal and 50% in Baliet.

▪ Children in school provided the following reasons as to why some children are more vulnerable than others: Conflict/war, lack of livelihoods among families due to loss of jobs,
some children are orphans, parents are unable to pay school fees and buy school uniform, some parents refuse their children to go to school, lack of teaching and learning materials and lack of food.

- With some similarities to children’s voices in schools mentioned above, teachers in both Baliet and Malakal noted the following barriers that prevent children from accessing schooling opportunities: parents refuse them to go to school, long distances to schools, COVID-19, lack of school fees, lack of dignity kits for girls, insecurity, early marriage and poverty. In addition, teachers in Baliet specifically mentioned that girls and children with disabilities (sight challenges, hearing impairment and physical disabilities) were most vulnerable hence not attending school regularly, which was similar to the views presented during KII with Education officials in Baliet. The Education officials also mentioned that children from pastoralist communities in Baliet did not attend school.

- While teachers appreciated the crucial role they play in building their children’s future through education, they were discontent that they lacked incentives, textbooks, teaching aids, regular trainings and often had poor working conditions making teaching very difficult. Furthermore, most teachers mentioned that they did not receive regular curriculum support and support supervision by MoGEI. This was further confirmed during KII with head teachers who mentioned that there was irregular curriculum support provided by MoGEI and NGO staff. 83% of respondents in the KII with head teachers confirmed that teachers did not receive monthly incentives compromising their morale to deliver lessons to children both in school and at home during COVID-19 school closures.

- COVID-19 temporary school closures have affected teachers in various ways: Some stopped teaching due to lack of incentives, others lacked Personal Protective Equipment and movement was restricted. As a result, some teachers in Baliet began engaging in agriculture and fishing.

- During COVID-19 temporary school closures, teachers in Baliet and Malakal witnessed that girls registered more cases of early marriage, early pregnancy among girls whereas boys were heavily involved in criminal cases and some joined armed groups. KII with education officials re-iterated that COVID-19 had majority of the girls of school going age became married and others married off.

- Some teachers in Baliet indicated that the school had provided them with some textbooks so they were able to teach some children Mathematics or all subjects at home and others were able to help children access learning through radio programmes. However, majority were unable to continue teaching. Thirty three percent (33%) respondents in the KII with head teachers further confirmed that teachers were able to support learning sessions to children at home during COVID-19 with a majority 67% mentioning that teachers were unable to provide any support. In order to cope with future school closures, teachers suggested that teaching and learning materials be provided to teachers and children so that learning can continue at home, provision of radios and mobilization of schools to allow non-candidate classes/learners to resume school while observing COVID-19 regulations.
In the last six months, some teachers in Baliet confirmed having received training from WVI SS in Psychosocial Support through an Education Cannot Wait project, COVID-19 awareness, Code of Conduct training, lesson planning and classroom management through Japan Platform Fund project. In Malakal, teachers had received support in mentoring, CP and GBV prevention training.

Although teachers in all schools visited did not report engagement with any digital learning platform, in one school in Baliet (Mijok Primary School) teachers reported exposure to use of radios during learning.

KII with head teachers in all schools visited revealed that learners were not using any electricity requiring gadgets for their learning. If such gadgets were to be provided, all head teachers expressed the need to ensure safe storage for the gadgets.

Sixty-seven percent (67%) of KII with head-teachers indicated that there were no children clubs in communities as opposed to 33% who mentioned that some had been established at school level but were not active especially following temporary COVID-19 school closure.

Education officials highlighted various challenges affecting children of school going age: lack of scholastic materials, dignity kits for girls, limited support from parents, lack of school fees and lack of clean water in schools. In terms of priorities, the Education officials proposed a focus on provision of scholastic materials, PSS for affected children in and out of school, dignity kits for girls, school fees and clean water in schools. The officials also indicated that provision of Accelerated Learning Program (ALP) and linkages to formal education remains important due to over-age learners. In addition, since recreational activities for children and youth had promoted reintegration of returnees into communities, the officials proposed that these activities should be continued.

Seventy-one percent (71%) of respondents during KII with community leaders in Baliet and Malakal indicated that teaching and learning materials were not available in markets especially those disrupted by conflict and flooding. However, 29% of the respondents indicated that the materials were available.

Seventy-one percent (71%) of respondents during KII with community leaders in Baliet and Malakal indicated that parents were struggling to provide teaching and learning materials to their children without much support from any organization. However, 29% of the respondents indicated that some parents received limited support in the provision of teaching and learning materials to their children.
Summary of children’s voices at a glance:

**FGD with children out of school**

![Bar chart showing reasons why school-going age children are not able to go to school every day.]

- 75% Cannot pay school fees
- 25% Worried about safety/security
- 5% Early Pregnancy

![Bar chart showing how children can be best helped to access education in school or out of school.]

- 50% Provide learning materials
- 25% Create more learning spaces
- 25% Provide uniforms
- 10% Provide alternative education

**FGD Children in School**

![Bar chart showing lessons children are attending per day based on school daily timetable.]

- 17.5% 2 lessons
- 5% 3 lessons
- 8% 4 lessons
- 17% 5 lessons
- 9% 6 lessons

![Bar chart showing children’s access to books or reading materials outside of school.]

- 17% Yes
- 83% No

![Bar chart showing children supported with reading or help with homework.]

- 42% Yes
- 58% No

![Bar chart showing children’s engagement with reading activities outside of school.]

- 8% Yes
- 92% No
D.2.2 Child Protection

- Eighty-three percent (83%) of children in Baliet and 92% in Malakal feel safer when they are at school.
- In Malakal and Baliet, payment of school fees tops the list of reasons why children are not going to school and this was followed by security and safety concerns and early pregnancy amongst adolescent girls.
- Although 78% of the in school children in Baliet and Malakal responded that they were given instruction and know where to go during emergency, 61% responded that they are not given instruction on what to do if they experience, hear or see incidents of violence.
- Corporal punishment ranked highest as reasons why children are afraid to go to school and dropping out of school. Key informant respondents also identify severe corporal punishment as well as sexual violence as the most harmful/risk factor that affects the lives and mental well-being of children and adolescents in Baliet, Malakal PoC and Malakal Town.
- Baliet and Malakal key informant respondents affirmed that there are unaccompanied and separated children (UASC) in their community; The list of reasons given for the cause of separations are the following: Losing caregivers including due to death during migration; losing caregivers/children due to medical evacuation, parents and caregivers voluntarily sending their children to institutions or to extended family in other states, county, payams (district level) or boma (community level), sending their children to work to help the daily sustenance of the family, disappearance of children/caregivers during emergency fleeing. 50% of the respondents were unable to distinguish if there are more boys than girls UASC, though 36% answered that there are more boys than girls UASC.
- Respondents were equally divided when asked about children being in armed forces and armed groups. Fifty (50) percent said they have knowledge that children are being recruited and used by armed forces and groups and 50% said that they have no knowledge about this topic. Out of the total respondents said that 36% of children involved with armed forces and groups are mostly boys and being trained as combatants and doing risky tasks, while girl child and adolescents usually work as cook, errands, courier and for sexual purposes of the armed men.
- Children help seeking behavior was reflected in their response to the questionnaire on where to go when facing challenges and difficulties. Most children opted to seek help from their
parents (70%), followed by teachers and older brothers / sisters and only 5.6% Malakal children responded that they considered seeking help from the police. Only 57.1 % of out of school children said that they received support when they are seeking help, and 88.9 % of school children received support from their parents and teachers

- In Baliet, 66% in school children reported having knowledge of Child Friendly Spaces (CFS) and attended CFS activities, while 75% out of school children do not have knowledge of CFS. In Malakal, 100% of out of school children and 92% of school children responded that they have knowledge about CFS. Sixty-seven percent (67%) of the out of school youth and 58% of school children in Malakal responded that they attended CFS activities. Mostly adolescent respondents both in and out of school stated that the reason for not attending CFS was because they thought that CFS are just for younger children and not for adolescents.

- Environmental hazard (i.e fire, snake bites), sexual violence, severe corporal punishments, harmful traditional practices, children engaged in conflict and criminal acts are the top lists given as causes of death/injury among children in Malakal and Baliet. For girl child, environmental hazard like snake bites, harmful traditional practices and sexual violence are the prevalent cause of injury and death while engaging in armed conflict, criminal acts, harmful traditional practices and environmental hazard are among the top harmful reasons that affects boys in the community.

- On the way to the market and in the market were considered as top high-risk place for children, going to school and at home are also listed amongst the top 3 high-risk places for children.

- An observation from community leaders indicated that there are changes in the behavior of children after emergency. Children showed signs of distress like more aggressive behavior, adolescents engaged in substance abuse (alcohol and illegal drugs), withdrawn, having trouble in sleeping, more clingy to their parents, unusual crying and screaming.

- Marriage, tension within the family, separation from families, lack of food, sexual violence, lack of shelter/privacy and not being able to go to school and not being able to return home are the top list in causing distress for girl children. While lack of food, marriage, not being able to go to school, being separated from their families and extra hard work are among the top list of causing stress to boys.

- Reasons given for community and individual vulnerability are due to disability, being an IDP and returnees, lack of interest, understanding of language, tribe and fear of revenge. Community coping relied more on the support coming from United Nations agencies International Non-Governmental Organization (INGOs), national organization, community based interventions, and support from the government.

- The Joint assessment team consisting of WVSS and WCH also observed that in Baliet, there are some abandoned structures mostly damaged during the 2013 conflict and this is considered as high risk place for children since some remnants of the conflict like Unexploded Ordnance (UXO) are still visible in Baliet.
The CP observation tool administered in Baitel and collaborated with IOM mapping of services in Baitel County confirmed that there is no presence of institutions/agencies that caters for the needs of children with child protection and PSS issues or concerns.

There is a presence of existing community structures in Baitel like Disaster Risk Response Team, DRR Contingency and Response Plan as stated by the community leaders and teachers but no community based child protection network.

COVID-19 was reported to have increased the risk and vulnerability factors impacting on women, girls and children in general in terms of protection concern arising from prolonged school closure, lack of livelihoods, lack of basic provisions, loss of jobs and death of loved ones all which affects individuals, families and communities in Baitel and Malakal counties.

D.2.3 Gender Based Violence

An estimated 28.6% of the respondents said that there is an increase of sexual violence for the past one year, this data is also supported by the joint protection safety audits findings conducted recently on the effects of COVID-19 to Malakal PoC and Town. Occurrence of sexual violence frequently happened while women were collecting fire wood in the bush and forest, while working in the fields, during armed attacks, while collecting water, during population movement, common places like toilet and common bathroom in the camps, while at home and on their way to the market, town, and schools.

The assessment confirmed that most affected by GBV are adolescents between ages of 12 years to 17 years old, followed by children under age of 12 then women adult over the age of 18 years old.

The assessment shows that in Malakal and Baitel the type of GBV expressed by the respondents are child/early marriage including forced marriage due to kidnapping/abduction, sexual violence, denial of resources or neglect due to gender, verbal, emotional and physical abuse.

Mostly women, elderly, children especially girls are the most excluded sector based on the assessment findings in terms of community participation in meetings and decision-making, control of resources and in humanitarian aid response.

The joint assessment team in Baitel noted that girl child over 14 years old are observed to accompany their mother travelling by foot going from Baitel to Malakal or other payams, and girl child under the age of 14 years old are tasked to gather fire woods in the bushes and forested areas of Baitel.

In Baitel, the community used a common toilet for everybody and due to scarcity infrastructure, there is no specific toilet allocated for women and girls used only.

During the joint assessment, IMC staff was available for KII in both Baitel and Malakal. Based on responses, it was noted that IMC was active supporting the Health Sector, a member of Protection cluster and had worked longer in the PoC in Malakal (6 years) compared to Baitel (2 years). In Malakal, most of IMC’s programming was focused on GBV case management, GBV
outreach activities, GBV messaging in PoC schools, PSS activities at women centers and livelihood activities for women. In addition, it was noted that IMC had not carried out a recent assessment in Baliet and Malakal. Although IMC had stopped large group protection awareness events during COVID-19, they were continuing with GBV case management, safety audit in the community, provision of dignity kits and PSS at the women centers. Based on context and challenges associated with education and protection, IMC staff noted that COVID-19 temporary school closures led to increased pregnancy among girls as well as a rise in physical and sexual violence. The IMC staff proposed the following priorities for programming consideration: teacher training, provision of scholastic materials to children, provision of dignity kits for girls, and provision of incentives for adolescent girls to go to school, regular GBV awareness and community mobilization on the importance of education.

With regard to exclusion from humanitarian assistance, KII with community leaders in Baliet and Malakal indicated that girls and boys aged 5 years and below were most excluded from humanitarian assistance followed by girls and boys aged 6-10 years and boys of 11-14 years. In addition, KII with the same community leaders indicated that men over 50 years are better placed to cope with disasters followed by men and women aged 18-49 years.
On the overall, during primary data collection involving diverse KII and FGDs with various stakeholders, there was acknowledgement that there were children and persons living with disability in the community who were perceived to be most vulnerable from accessing services such as education, referral/specialized services, employment and income generating activities. However, data on the exact numbers by type of disability, gender and age was not readily available thus indicating a data gap that would require a further assessment as part of effective targeting.

Based on the detailed findings above, the following key short term and long term interventions are recommended:

### E. Recommendations

#### E.1 Short term interventions:

<table>
<thead>
<tr>
<th>Theme</th>
<th>Short-term interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education in Emergencies</strong></td>
<td><strong>Addressing barriers to schooling during COVID-19 and beyond</strong></td>
</tr>
<tr>
<td>▪</td>
<td>Create small group learning spaces in and out of school to ensure enhanced safe access to education during ongoing school closures.</td>
</tr>
<tr>
<td>▪</td>
<td>Undertake community awareness raising sessions on the importance of education and parental support to education so that parents can send their children to community safe spaces for learning and schools.</td>
</tr>
<tr>
<td>▪</td>
<td>Carry out enrolment drives targeting primary school children so that they can access community based home learning during school closure and Primary 8 learners in school based on current MoGEI protocols.</td>
</tr>
<tr>
<td>▪</td>
<td>Support children who have never been to school access Accelerated Learning Programs in schools and community safe spaces.</td>
</tr>
</tbody>
</table>
▪ Apply cross-sectoral integrated Safe Back to School Guide in the context of COVID-19 to ensure schools and community spaces supporting home learning communities are safe for access by primary school children.
▪ Consider viable cash programming modalities to support most vulnerable children access learning and schooling in safe spaces and schools with prioritization of orphans, survivors of GBV, girls in need of dignity kits and referral for specialized services for children with disabilities.

**Promoting Quality of education**
▪ Establish viable cash programming modality to facilitate access to school for out of schoolchildren e.g. for purchase of scholastic materials and dignity kits.
▪ Supply teaching and learning materials in and out of school to promote access to education.
▪ Liaise with MoGEI and teachers to ensure that children access required lessons (7 lessons for upper classes for Primary level 5 to 8 and 4 to 5 lessons for lower classes for Primary level 1-4) in a day based on their school timetable.
▪ Offer Teacher in Crisis Context (TiCC) package contextualized for South Sudan to promote improved teaching methodology by teachers as well as psychosocial well-being among teachers.
▪ Liaise with Education cluster partners and MoGEI to ensure that teachers are provided with incentives, textbooks, teaching aids, prioritized regular trainings and support supervision by MoGEI.
▪ Liaise with the Education cluster, MoGEI and education partners to complement/support provision of regular incentives to teachers to facilitate lessons in schools and out of school during COVID-19 temporary school closures.
▪ Consider cash incentives to support most affected teachers so they can resume teaching.
▪ Pre-position teaching and learning materials for use at community safe spaces and homes in-case of future school closures.
▪ Consider provision of digital learning platforms and radio programs to most vulnerable communities to promote access to learning among children of school going age. Where gadgets of this kind are provided, ensure safe storage facilities.
▪ Revamp existing children clubs and starting new children clubs at community level to promote accountability among children to promote regular access to learning in and out of school during COVID-19 school closures and beyond.
Prevention of all forms of child-abuse

- WCH and WV to lead discussions with all stakeholders in the community and schools on how to improve and intensify prevention initiatives tackling child recruitment, forced marriage, early pregnancy and other widespread forms of child abuse.
- Increase awareness of teachers and parents on the effect of corporal punishment and help them apply positive disciplines. Build their knowledge and skills in psychosocial support.

Psychosocial Support (PSS) and Psychological First Aid (PFA)

- Enhance and expand psychosocial programs to groups mostly in need such as adolescents, women and youth in the community.
- Train frontline staff, teachers on CP/PSS and PFA and create community awareness on how to effectively cope with hardship and distress and where to seek help in case of need.

Unaccompanied and Separated Children (UASC)

- WCH together with protection agencies to continue advocating with the government to allow the free and safe movement of children and caregivers in support of reunification.

Referral pathways and services

- WCH to coordinate and collaborate with clusters like protection, GBV, MHPSS and CP Working group and government line ministry MOGCSW to update CP, MHPSS referral pathway, making it contextualized to recent COVID-19 pandemic.
- Establish a more systematic dialogue with vulnerable groups to improve services and keep groups engaged.
- Establish a Child Help Desk in schools (for Primary School 8 children currently in school) and communities (for all children), as safe points where issues affecting schools and out of school children and pupils’ well-being can be safely reported and addressed.
- Establish and strengthen Community based Child Protection Networks in Baliet and Malakal respectively.
- Effectively set up or complement a referral pathway that is utilized by all actors operating in Upper Nile especially in the PoC.
- Facilitate effective monitoring of new/existing referral pathways to ensure that beneficiaries are timely supported to access integrated and coordinated services.
### Gender Based Violence

#### Securing camps and communities for girls, women, boys and men
- Reinforce girls and women safety and freedom of movement especially at night in Malakal town and within the camp e.g. for women who venture out to look for firewood.
- Facilitate additional consultation with women and men on the best security measures to put in place at community level during COVID-19 and any anticipated conflict.
- Make provisions for repair and inside lock at latrines and bathrooms especially for the side for females in order to prevent harassment and sexual abuse against girls and women.
- Support girls with basic needs including dignity kits including shoes and clothing.

#### Enhanced decision making opportunities
- Collaborate with other GBV focused NGOs for the awareness raising on Gender and Social inclusion to increase participation of women and children to community activities and decision making that affects women and children.

#### Increasing livelihood opportunities
- Support to more women in Income generation activities (Women).

#### Referral pathways and services
- WCH to coordinate and collaborate with GBV Cluster, and government line ministry MOGCSW to update GBV referral pathway, making it contextualized to recent COVID-19 situations
- WV and WCH to share this rapid assessment results with the Protection cluster and actively liaise with IMC during CP interventions in Malakal PoC so as to ensure complementarity of GBV services.

### Disability inclusion

#### Addressing data gap
- Undertaking a disability mapping (as part of baseline) among children in and out of school on type of disability and support viable referral services through cash programming so that children receive required assistance.

### Synergies with existing actions

#### Complementarity with ongoing programming
- Complement existing interventions supported by WVI SS through Japan Platform Fund (JPF) in Baliel and in Malakal which is currently supporting infrastructure development in 7 schools, working with School Management Committees (SMC) and Parents Teachers Associations (PTAs), integration of PSS activities in school and home-based learning in the context of COVID-19. For example, utilize the infrastructure to offer learning spaces to children through a shift system, offer teacher training, providing support to ALP, provision of teaching and learning materials and
support of community/home-based learning given the ongoing COVID-19 pandemic.

▪ Complement existing interventions supported by WVI SS through Education Cannot Wait (ECW) Multi-Year Resilience Programme (MYRP) ongoing in Baliet County and currently supporting provision of teacher incentives, teaching and learning materials, dignity kits and teacher training in MHPSS. For example, focus on most vulnerable children (GBV survivors and those with disability) and volunteer teachers with similar interventions.

▪ Complement existing Protection interventions supported by WCH in Malakal and DRC in Malakal and Baliet. E.g. regular provision of recreational materials in Child Friendly Spaces and strengthening monitoring and utilization of existing referral pathways.

E.2 Long-term interventions:

<table>
<thead>
<tr>
<th>Theme</th>
<th>Long-term interventions</th>
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<tbody>
<tr>
<td><strong>Education in Emergencies</strong></td>
<td><strong>Community based reading programs</strong></td>
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<tr>
<td></td>
<td>▪ In liaison with MoGEI and Education cluster partners, establish reading clubs in community safe spaces so that children can have regular access to reading materials.</td>
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<tr>
<td></td>
<td>▪ Conduct basic reading awareness sessions with literate parents/caregivers so they can support community based reading activities for children and help children with homework.</td>
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<tr>
<td><strong>Contextualized training in Teacher Training Colleges (TTC)</strong></td>
<td>▪ Liaise with MoGEI, teacher training colleges and Education Cluster so that teachers receive regular standardized contextualized pre-service and in-service teacher training courses.</td>
</tr>
<tr>
<td><strong>System strengthening to deliver curriculum implementation support to teachers</strong></td>
<td>▪ Support MoGEI in regularized teacher support in curriculum implementation through timely provision of text books, subject matter trainings and support supervision.</td>
</tr>
<tr>
<td><strong>COVID-19 new waves of infection</strong></td>
<td>▪ Undertake policy advocacy to ensure that Government and partner budgets include Personal Protective Equipment (PPE) for school personnel and children accessing safe home-based and in school learning and regular fumigation of learning spaces.</td>
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</tbody>
</table>
**Behavioural Change Programming**

- Initiate awareness and behavioral change programs to help adults become aware of the consequence of denying children’s rights (such as making them drop-out from school) and abusing and neglecting children, as well as the importance for boys and girls to feel understood and cared for by their family.
- Intensify the campaign against corporal punishment and public shaming and other violent disciplinary measures.
- Engage leaders and existing community committees to monitor the trend of domestic violence and child abuse within the community and report them to protection actors.

**Integration of PSS with other sectors**

- Integrate Psychosocial Support (PSS) with education, peacebuilding, livelihood and awareness initiatives to reach more beneficiaries and have a stronger impact.
- Build more community PSS based on voluntary initiatives which evidence engagement and support of existing active groups, liaison with leaders, churches groups and other community mobilizers so as to create opportunity for girls, boys, youth and caregivers to be engaged in fulfilling activities and projects, based on their interests and needs.
- Enhance the capacity of teachers to identify children with distress and/or affected by protection concerns and refer them to Child Protection actors.
- Continuously build teachers’ knowledge and skills in PSS. This might be done through a combination of actions:
  - Provision of integrated training to teachers and Parents Teachers Associations on psychosocial support, Psychological First Aid and identification and referral, using existing tools (such as the checklist to identify signs of distress included in the national Education training curriculum and the **PSS Referral form** developed by the national PSS Task Force).
  - Creation of frequent opportunities for further mentorship and coaching of the trained groups. Regular focus group discussions with teachers and PTAs would allow WCH and WV actors to monitor trends of perceived distress and the extent of dysfunctional copying mechanisms among children.
- Continue strengthening coordination and collaboration with Ministry of General Education and Information (MoGEI) as a follow up to the WCH Training of Trainers (TOT) to MoGEI personnel and Teachers Trainers in different states, amongst them Upper Nile, on the mainstreaming of CP and PSS to Schools so that training, coaching and mentoring is available to teachers on how to conduct PSS in schools.
### Gender Based Violence

- Continue to actively advocate for a protective and safe environment for all children in South Sudan at all levels (National, State, County, Payams and Bomas).
- Build capacity of frontline workers to provide PSS including mental health services particularly in the COVID-19 response and beyond.

### Coordinated GBV prevention and services

- WCH and WVI SS, in coordination with GBV and CP Working Groups, to create more opportunities of community-sharing and support dedicated programs for boys and girl survivors of GBV and female adolescents at risk of abuse or violation. This would include creation of psychosocial opportunities could help girls and boys to gain new skills, building a supportive relationship among themselves and with trusted adults and increasing the knowledge of their rights and how to seek help.
- Continue to provide timely support to GBV survivors.
- Increase efforts of integrating GBV risk mitigation into other sectoral programmes and in clusters’ initiatives and actions.

### Disability inclusion

- Undertake regular mapping of GBV survivors with disabilities in schools and communities to ensure timely accesses to required services.
- Liaise with other partners supporting disability inclusion to provide cash assistance for specialized services (assessment and referrals as well as provision of assistive devices for children with special needs).

### Synergies with other actions

- WVI SS and WCH to continue liaison with Government line ministries, education and protection cluster and partners working on disability inclusion so that best practices in disability inclusion can be scaled up in multiple states, counties, payams and bomas.

### F. Conclusion

As evidenced in the secondary data and primary data collected as part of this rapid assessment, communities in Baliet and Malakal counties of Upper Nile continue to suffer recurrent health, economic, political and social challenges. In the midst of COVID-19 temporary school closures, EiE and Protection services remain crucial. WVI SS and WCH aim to jointly design projects which take into consideration the short term and long term recommendations highlighted in this report. This will be done by complementing existing projects in Baliet and Malakal as well as working with other partners in these locations to ensure synergies leading to enhanced quality access to EiE and Protection services and greater impact of humanitarian assistance provided by existing donors such as Education Cannot Wait, Japan Funding Platform among others.
G. Annexes

G.1 Map of target locations (Baliet and Malakal counties) in Upper Nile State
G.2 Data collection tools

To access the detailed list of data collection tools, kindly click this link:

https://drive.google.com/file/d/1zgpz6a3UlyPW5oOBXWEunP-FFlk9ALsJ/view?usp=sharing

G.3 List of references
1. CSRF, South Sudan - undated
2. Danish Refugee Council (DRC) September 2020 headcount for Malakal PoC
3. Danish Refugee Council (DRC) December 2020 headcount for Malakal Payams
5. IOM DTM South Sudan Displacement Site Flow Monitoring: June 2020
6. MHPSS Cluster Document on Rising Concern About Unmet Needs of MHPSS in South Sudan - undated

8. OCHA, Humanitarian Needs Overview for South Sudan (HNO) 2021


10. WCH Project Reports, January 2021.


12. WVI SS Good Enough Online Context Analysis for Rapid Response (GEOCARR) for Upper Nile state, December 2020


16. Xinhuanet (October 2020), “South Sudan’s oil firm plans to build 500 mln USD oil refinery”.