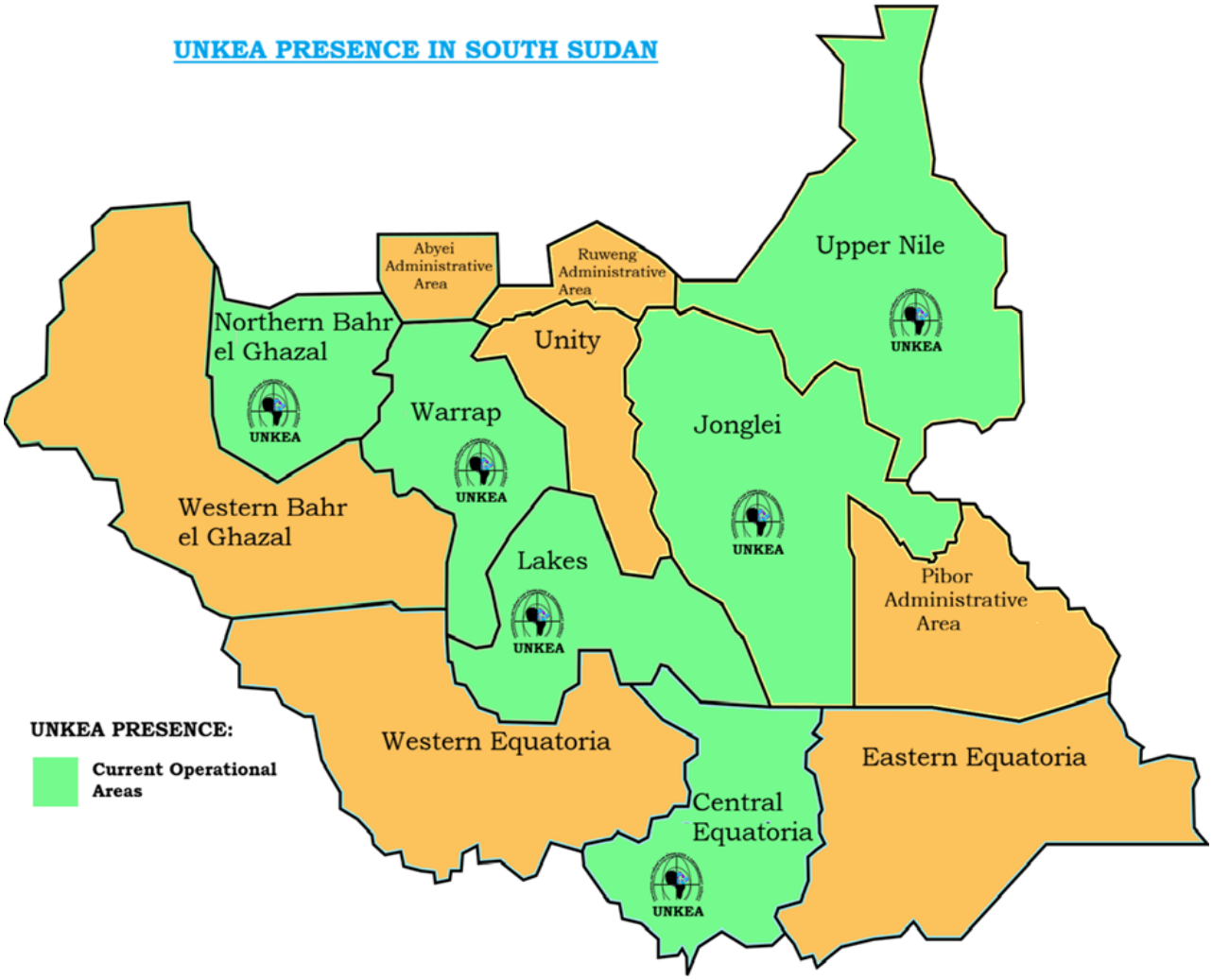
UNKEA ANNUAL REPORT 2025

UNKEA dedicated staff striving towards bringing hope and Development to the people of South Sudan

"Working to Bring Hope and Development to the People of South Sudan"



THEMATIC AREAS/FOCUS

- HEALTH AND NUTRITION
- EDUCATION AND PROTECTION
- FOOD SECURITY AND LIVELIHOOD
- WASH AND NFI
- GOVERNANCE AND PEACE BUILDING

Message from the Executive Director

The BOD, management and the entire family of Universal Network for Knowledge & Empowerment Agency (UNKEA) with great pleasure, extend their sincere gratitude to all the stakeholders which played significant roles in the realization of our vision and mission. Today, we are of this great height because of the magnificent contributions and support from government of South Sudan, our partners and the donor communities.

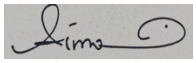
As I reflect on 2025 and set our sights on the future, I am guided by our mission which remains firm and inspiring: Helping our communities achieve sustainable and resilient livelihoods. It serves as our steadfast guide, especially as we navigate a rapidly evolving and increasingly complex world. Rooted in everything we do, our strategic objectives gloss through being there for our beneficiaries when and how they need us. Our Goal is the bedrock of our beneficiaries' impact strategy, underpinning our efforts and strengthening the trust that defines our brands.

Since our establishment in 2002, UNKEA has remained committed to promoting humanitarian and development services through provision of primary health care, nutrition, food security and livelihoods, water, sanitation and hygiene, education, social development of youth and women, economic development, access to Justice and peace building for affected communities in South Sudan. Our work was born out of the urgent need to respond to the need to fight the deadly **Kalaazar disease** which was highly prevalent in Upper Nile Region. With time, UNKEA's mandate expanded to include other interventions as mentioned above. Over the years, we have grown into a community-focused organization dedicated to empowering individuals and communities to shape their own futures. At UNKEA, we believe that lasting change begins with people. When communities are empowered with knowledge, skills, and opportunities, they are able to resolve conflicts peacefully, protect their environments, and build sustainable livelihoods. We work closely with communities, South Sudan Clusters, State/local authorities, Ministries, cultural and religious leaders, humanitarian and development partners to strengthen our systems and structures that support inclusive and resilient development as well as emergency interventions. Our approach is rooted in participation, accountability, and respect for human dignity.

Despite of the shrinking funding envelopes from international donor communities, UNKEA continues to expand its geographical coverage especially to new locations within South Sudan using the little resources available. This is because we are very passionate about serving people in dare conditions who need humanitarian assistance and support.

We invite you to learn more about our work and to partner with us in providing primary health care, nutrition, food security and livelihoods, water, sanitation and hygiene, education, social and economic development for youth and women, access to Justice and peace building for disease, conflict and floods affected communities in South Sudan.

Dr Simon Bhan Chuol



Date: 15th April 2026

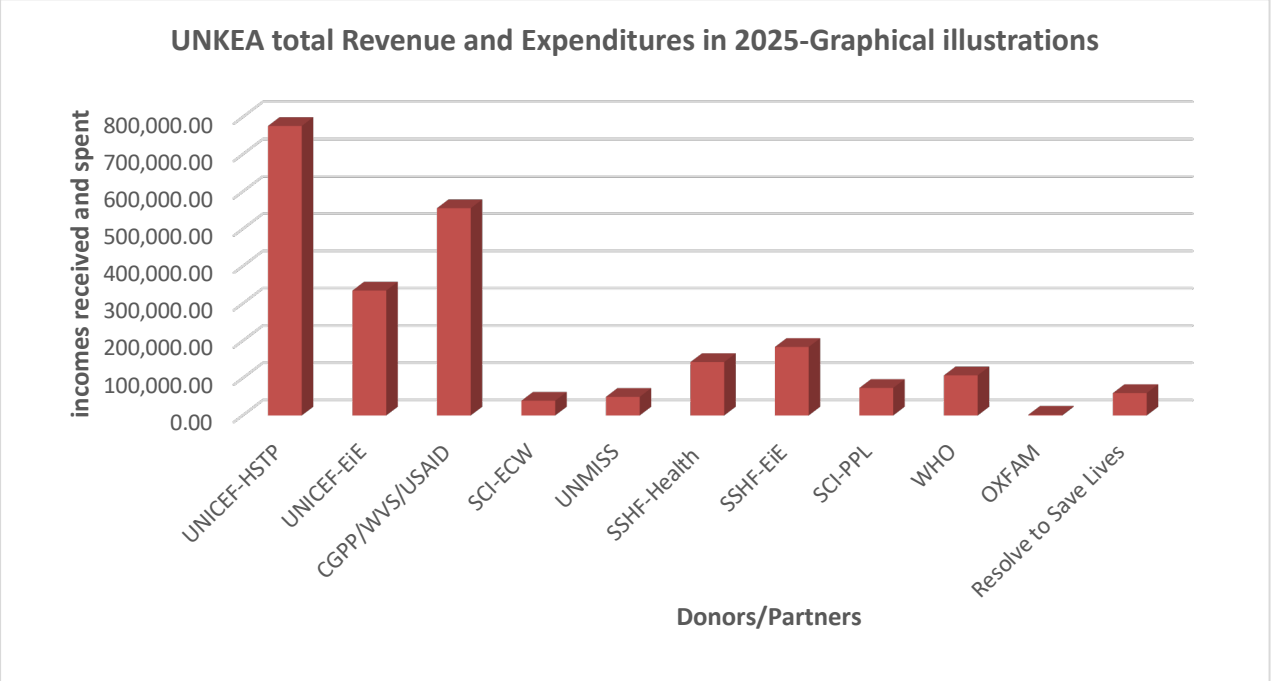
Executive Director – UNKEA.

Executive summary

UNKEA is a national non - governmental organization legally registered in South Sudan with Relief and Rehabilitation Commission-RRC, registration number ***178***. Our **Vision** is of "A God fearing, healthy, well-educated and economically advanced society enjoying a sustainable high standard of living in a secure environment". Our **Mission** is to "facilitate the improvement of the status of livelihoods in South Sudan through the creation of relevant and sustainable community initiatives in participatory and interactive processes"

Through our strategic partnership and funding from UNICEF, SSHF, WHO, CGPP/World Vision, 7.1.7 Alliance and SCI, UNKEA supported over 100,000 people (40,000 male and 60,000 female) in Upper Nile State (Longechuk, Ulang, Maiwut, Malakal and Nasir Counties), Warrap State (Gogrial West County), Jonglei State (Akobo West and Akobo East Counties) and Northern Bahr El Ghazal State (Aweil East County) through provision of primary health care and nutrition, food security and livelihoods, education in emergencies, governance and peace building for disease, conflict and floods affected communities. This has resulted in 80% of the crisis (recurrent floods and conflicts affected) children reported having access to safe and inclusive education services as well as increased enrollments across pre-primary, primary and secondary schools in the project locations. Significant reduction in morbidity and mortality rates especially in children under 1 year of age, pregnant and lactating women in the targeted locations. Increased access to clean and safe water, sanitation and improved hygiene for vulnerable IDPs, returnees and host communities in the targeted locations hence reduced morbidity and mortality rates. 85% of the targeted categories reported improved food security and income at household levels. They reported food secure in terms of accessibility, sufficiency (quantities and quality), balance and nutritious enough which can guarantee healthy living of the households. The improved incomes are indicated by households acquiring basics and productive assets (radios, phones, motorcycles, mattresses etc), paying for medical bills and schools fees among others. Communities in the targeted locations demonstrated increased gender equality and awareness of harmful behaviors and social norms against women and girls. Women reported participating and taking leadership roles in groups and communities. They are also able to engage in income generating activities to support the provision of household needs.

	Summary of Revenues and Expenditures for year 2025		
S/N	**Income**	**Donors**	**Amount Received and Spent**
1	Health Sector Tranformation Project(HSTP) - Lot 22	UNICEF	776,295.84
2	Strengthening Access to Education In Gogrial West County, Warrap State(EiE)	UNICEF	335,012.97
3	Core Group Partner Project-Community Based Surveillance-CBS	CGPP/WVS/USAID	555,771.80
4	Education Can Not Wait-ECW	Save the Children International	39,600.00
5	Enhancing Durable Solutions by strengthening Local Capacities for protection of civilians and livelihoods opportunities in Malakal, Makal County, Upper Nile	UNMISS	49,900.00
6	Emergency Health Response to the flood affected communities in Nasir County, Upper Nile State, South Sudan	SSHF	143,210.05
7	Increased access to safe, protective and inclusive education service for boys and girls age of childhood and primary education level in Aweil East County (EiE)	SSHF	183,722.91
8	Enhanced access to safe, protective and inclusive education service for floods and conflicts affected children under pre-primary, primary and secondary 3-17 years age group in Nasir County, Upper Nile State .	Save the Children International	73,815.80
9	Implementattion of Measles Follow up, PCV Catch-up, and two rounds of nOPV2 campaigns in Nasir, Ulang, Maiwut and Longechuk Counties of Upper Nile State.	WHO	107,615.50
10	South Sudan Education Cluster Co-coordination Project (SSECCP)	OXFAM	2,000.00
11	South Sudan 7-1-7 Alliance Phase 2	Resolve to Save Lives	60,030.20
	Grand Total		**2,326,975.07**



This Annual report outlines the interventions conducted, achievements realized, challenges, lessons learned and best practices during 2025, and it's presented by sectors.

Education Sector (Education in Emergencies)

The Education Sector reports highlight the progress/achievements realized in 2025 in supporting children and youths. Adolescent young men and women, teachers, parents and communities affected by humanitarian emergencies to have access to safe, quality and inclusive education services for improved learning outcomes in South Sudan. The education interventions were implemented in accordance with Inter-agency Network for Education in Emergencies (INEE) minimum standards, South Sudan Education Cluster strategies, Education Sector Plan 2023 - 2027, Education Act 2012, donor priorities and UNKEA's Mandate. The focus was on the provision of learner kits, teacher kits, capacity development/strengthening of teacher on Competency Based Curriculum Teaching and Learning methodologies including radio-based learning, classroom management, mental health & psychosocial support (for children and teachers), socio-emotional learning, child protection, referral pathways (including GBV) in education. Besides, capacity building/strengthening of communities, school management committees, and parents and teachers' associations on their role in promoting education in emergencies, disaster risk reduction, challenging harmful social norms including GBV prevention and conflict sensitive approaches. Moreover, construction of Climate Resilient Classrooms for learners was successful to increase learning spaces in the schools. Furthermore, capacity strengthening of the state, county and payam education personnel was crucial in the proposed interventions.

Achievements

1. (a) Project title: Access to Education, Livelihoods and Peace in Gogrial West County, Warrap State

The project ran for a period of 20 months from 22nd April 2024 to 7th December 2025, aiming at strengthening access to education, Livelihoods and Peace in Gogrial West County, Warrap State. The project supports components of formal and non-formal education systems in 17 schools and 4 ALP centers. However, this report highlights achievements made in 2025.

Outcome 1: Access to Education

Output 1.1: Enhanced access to protective, quality gender responsive formal and non-formal basic education services.

Activity 1.1.1: Support construction of classrooms (4 blocks of two classrooms each = 8 classrooms).

The construction of 4 Climate Resilient Classroom Blocks (8 classrooms) at Emmy Robbin, Gogrial, Majok Awan and Kunyuk Girl Primary Schools in Gogrial West County, Warrap State was successfully completed as planned. The classrooms provided additional spaces for children who were taking lessons under the trees or in the open-air ground.

Side view of a Climate Resilience Classroom Block constructed by UNKEA in Majok Awan Primary School, Gogrial West County, Warrap State

Front view of a Climate Resilience Classroom Block constructed by UNKEA in Majok Awan Primary School, Gogrial West County, Warrap State

Activity 1.1.2: Distribute teaching and learning materials and supplementary teaching aids [Gogrial W=5,000 primary, 1,000 ALP;]. (UNICEF)

Various teaching and learning materials were distributed to 15,173 (Boys-7908, Girls-7265) that ensured effective learning and improved academic performance among the learning. Teachers who received teaching materials were able to prepare adequately for class lessons.

Learners in Agok (left) and Alpha (right) Primary Schools, Gogrial West, Warrap State posed for photos after receiving learning materials & school bags

Activity 1.1.3: Establish peace clubs and a girl's mentorship programme in target schools (20 primary and 5 ALP student clubs)

Eight (8) Peace Clubs were established/formed in eight primary schools, with 79 (44 M 35 F) members and 5 patrons from Ammy Robbin, Alpha, Agok, Kunyuk Girls, and Majok -Awan primary schools. These peace ambassadors preached peace messages in schools and beyond, composed peace messages in local languages (Dinka, Juba Arabic) and effectively advocated not to dwell only on peace but support in mobilizing learners/children to attend schools.

Peace club members attending induction sessions at Majok Awan Primary School, Gogrial West County, Warrap State

<u>Output 1.2: Strengthened capacity of education institutions and community governance structures to provide education and protection services.</u>

Activity 1.2.1: Identify, mobilize and engage parents as PTA members, and provide training for school leaders, PTAs and SMC (50% female); Gogrial W=135 (UNICEF).

147 (59 F) Parents Teachers Association trained and played vital role in fostering a positive conducive learning environment, maintaining open communication with educators, and actively participating in school activities. Key responsibilities include supporting academic growth, nurturing emotional well-being, mentoring positive behavior, and advocating for their child's educational needs to ensure long-term success.

Activity 1.2.2: Provide target communities with critical information on social, economic, educational and health and nutrition information.

Critical information on social, economic, education, health and nutrition were provided to the communities through 7 radio campaigns messaging via Radio Talk shows on 99.9 Kuajok FM and reached at least 7000 people with significant messages. These included education policies, children enrolment, nutrition and health education, community participation in school development programs etc. Feedback from listeners was recorded as follows: there is need to support street children or establish specific Centers for them, establish women Centers for vocational skills building activities such as tailoring, handcraft, bakery, hair dressing, saloon etc. and Enhancing girls' enrolment in school by mitigating practices such as forced and early marriages among communities in Gogrial West County plus the entire State.

Output 1.3: Capacity of young people and women's groups strengthened to engage in and advocate for quality and inclusive education.

Activity 1.3.1: Build the capacity of mother's groups in target states/schools on education policy and budget processes so they can participate in these processes.

5 mothers' group were trained and later had engagements with their political leaders as one of the key drivers of provision of quality, protective and inclusive education services. This resulted in increased levels of commitment by communities and State leaders to improve quality, protect and provide inclusive education for all school-going age children in the County. The mothers' groups also advocated for reduced barriers for access to education and enhanced education policies, practices and implementation of presidential directive of February 2023 on free education in primary and secondary schools in South Sudan.

Activity 1.3.2: Young reporters training

15 (8 males. 7 females) Young Reporters were engaged and empowered to advocate for critical issues that affect life of children directly or indirectly. This was done to build the youth capacities and motivation by connecting young people as influential advocates on issues affecting children and youth, Co-create solutions and engage in advocacy initiatives and opportunities to accelerate impact in local communities across the Country and influence decision making, discover new advocacy tools, knowledge, training, and media platforms to succeed in their advocacy endeavors.

Young Reporters in Gogrial West County, Warrap State together with the duty bearers posed for a group photo after World Children's Day celebrations in Kuajok (theme: "My day, my right to inclusive education")

2. Outcome 2: Improve quality of learning

Output 2.1: Strengthened capacity of education institutions and community governance structures to provide education and protection services.

Activity 2.1.1: Train 160 (80 F) teachers on the new curriculum, participatory pedagogy, FLN, MHPSS, reintegration of returnees, peace building, gender, human rights.

Capacity building of 160 teachers (134 M, 26 F) to improve the teaching skills and well-being of learners as well as improving inclusivity of children with disabilities, mental health & psychosocial support enabled the capacity development of teachers, good understanding of new curriculum of South Sudan and this has led to the improved access to quality, protective and inclusive education service delivery in the targeted schools.

Activity 2.1.2: Support ALP and Community Girls Schools, where relevant, through the development of ALP schemes of work, training for ALP and CGS Management Committee.

This component enriches and strengthens Accelerated Learning Programme and Community Girls School functioning through capacity building of teachers and parents supporting, managing and supervising these Alternative Education System. In enhancing this, teachers training was conducted for 12 teachers (2 F) and 24 PTA/SMC for 10 days to reinforce the school teaching staff to build the capacity of the newly recruited senior 4 leavers who joined teaching to fill in the gaps created by those teachers who left for better opportunities in other institutions. 24 (6 F) PTA members also received training on school governance which resulted in improved collaborations and communication between homes and schools, fostering a strong school community within the project locations.

Activity 2.1.3: Provide training to 17 State and County Officials on monitoring, supervision, and planning for education services.

17 (3 F) State and County Officials training for Directors, Inspectors, Head teachers and School Leaders, and mentorship of teachers. The training focused on addressing key aspects of School Leadership, Educational Management, Quality Assurance, supportive supervision/Inspection, and Curriculum implementation in schools with a view of broadening participants' management and pedagogic experience to improve teacher efficiency, quality of teaching, school performance and pupil attainment levels.

(b). Aweil East County Project (Funded by Government of Japan through UNICEF):

Outcome 3: Capacity of young people and women's groups strengthened to engage in and advocate for quality and inclusive education.

Output 3.1: Strengthened capacity of education institutions and community governance structures to provide education and protection services.

Activity 3.1.1: Teaching training: Capacity of 71 (25 F, 46 M) teachers on approaches for teaching and learning in emergencies including radio-based learning, mental health, and psychosocial support, socio-emotional learning, child protection, referral pathways, basic gender-based violence in school and disaster risk reduction in education was conducted successfully. The training has enhanced the teaching and learning quality, modelled changes in children's behaviors and teaching methods on the part of the teachers and administration and shaping the curriculum to meet the local contextual needs. The 3 days in-service teacher training and followed by coaching improved teaching, classroom quality, and school readiness. Teachers are able to prepare lesson notes, plans and create conductive classroom learning environment. ***Teachers posed for a group photo after the training in Aweil East County, Northern Bahr El Ghazal State (above)***

Activity 3.1.2: Teacher incentives: 66 teachers (M 20 – constitutes 30%, F 46 – constitutes 70%) volunteer teachers received monthly incentives for the period of the project. The payment rate is guided by the standardized scale determined by the National Ministry of General Education and Instruction. Although female teachers gave up the teaching profession in Aweil East, the payment of incentives through this intervention encouraged some who turned up to teach in the supported school. The payment has impacted on increased retention of teaching staff hence increment of children. It also improved curriculum coverage and teacher effort in supported schools.

2. Project title: Provision of Integrated Emergency life-saving WASH, Education and Protection interventions to crisis-affected IDPs, Returnees and Host Communities in Aweil East County, Northern Bahr El Ghazal - SSHF

South Sudan Humanitarian Fund (SSHF) through OCHA supported the Provision of Integrated Emergency life-saving WASH, Education and Protection interventions to crisis-affected IDPs, Returnees and Host Communities in Aweil East County, Northern Bahr El Ghazal under the consortium of three partners comprised of Lakarmissionen International, UNKEA and ACDF. UNKEA implemented education component in Baac and Padhol payams targeting 12 primary schools. In Baac Payam, the schools which were supported included Majak Akoon, Adut Adhot, Lol Mading, Sabrino Majook, Malek Bol Akon and MayenAdhoot primary schools. In Madhol Payma, the schools included Madhol, Dokul, St Mary, Tarweng, Amerjal and Manual Dit primary schools, and the following were achieved:

Achievements

Outcome 1: Increased learning opportunities for children from IDP, returnees and host community by addressing exclusive barriers of access to education.

Output 1.1: Provision of learning and teaching materials to learners and teachers in schools to address exclusive barriers of access to education

Activity 1.1.1. Teaching and learning materials: Assorted teaching and learning materials were procured, prepositioned to the project site in readiness for distribution to schools. However, the distribution was put on hold by the state and county education department due to school closure because of heatwaves. A total of 13,870 learners (6414 boys, 7456 girls) received learning materials in 12 schools. 2810 teaching materials distributed to teachers. 2 Post Distribution Monitoring conducted by the MEAL team for this project, in this exercise the project registered successful implementation of the results as planned in the designed phase

Activity 1.1.2. Back to learning: It was a call for the community members, stakeholders, parents, school administration and PTA/SMC members to send all children to school without any segregation. 24 BTL campaigns were conducted to improve the enrollment, retention and transitioning of the children throughout the project cycle and after the project. It is to involve the parents and community to support children in different aspects including the children of disabled parents that are within the community. The campaign strengthens every community member to report any parent keeping children at home to county education administration.

Back to learning campaign session in progress in Aweil East County, Northern Bahr El Ghazal State

Activity 1.1.3. Household to household mobilization/campaigns to enroll learners: The household-to-household mobilization was aimed to spread messages on the importance of education, mobilization, identifying families that are not sending kids to school. It will involve psychosocial support and advise to the parents regarding children education. The 4 mobilisation campaigns resulted into increased number of learners, parents understood the importance of education, sent children to school including learners with disabilities, and transformed their mind set of seeing children as sources of income and work hard to give them a better future through education.

Outcome 2: Improved quality of education through teachers/PTA/SMC training and community education.

Output 2.1: Training of Teachers/PTAs/SMCs/learners on MHPSS, child safeguarding and school governance to strengthen school-community relationships, fostering accountability and safe learning environment.

Activity 2.1.1: Conduct teacher training to improve quality of learning and learning outcomes in the schools

It was a two-day training that brought 180 teachers (136 male and 44 female) from 12 UNKEA targeted schools in Baac and Madhol Pyams, Aweil East County. The training aimed at preparing teachers professionally to embark on teaching when the schools re-opened after holidays. The training included pedagogy, education in emergencies, lifesaving skills, child safeguarding, MHPSS etc. to empower teachers' participation in children's welfare in the schools.

Activity 2.1.2: Capacity building for teachers/PTA/School committees

Parent teachers' association training was conducted by UNKEA in County Agriculture Development CAD Hall in Wany-Jok - Aweil East County of Northern Bahar El Gazal State. The training that covered school governance, child protection/safeguarding, MHPSS, roles of PTA/SMC etc. was the first training conducted as the start of the project to engage PTA/SMC in school management and development activities to address the gaps and lack of PTA/SMC knowledge in supporting schools, the mobilization activities during the re-opening of schools. The PTA and SMC members were committed to developing their respective schools and assuming full responsibilities of their duties after the training. 59 PTA/SMCs (25 F, 34 M) trained. This resulted in the improvement of teachers-children-parents and community relationships and hence improved enrollment and learners' performance.

Activity 2.1.3. Cross-cutting themes

UNKEA integrated protection in the teachers' training such as mental Health and Psychosocial Support, child safeguarding and the teachers code of conduct. Also, the establishment of referral pathways in school is a significant move towards integration of protection in education. Lastly, UNKEA participated in the protection cluster coordination meetings to share updates and coordinated with other specific protection partners such as ACDF for joint planning, monitoring and implementation.

3) PL/Education Localization Fund – Funded by SCI South Sudan

UNKEA signed a partnership agreement for a five-month education project which went through November 2024, to March 2025. The project aimed at strengthening coordination and resilience in education institutions by promoting efficient, accountable, and timely education responses in emergencies in Nasir County, Upper Nile State. The initiative looked at improved access to safe, protective, and inclusive education services for children affected by floods and conflict, aged 3-17 years, across pre-primary, primary, and secondary levels in Nasir County, Upper Nile State. The project targeted three Payams: Nasir Town, Maker, and Koat, benefiting a total of 2,253 individuals (1,014 female and 1,239 male), including children, adults, and children with disabilities (CwDs). Interventions were implemented in three pre-primary and primary schools, one secondary school, and one Adult Learning Program center within the targeted Payams.

Achievements

Objective 1. Strengthened Coordination and Local Community Capacity Building: 36 teachers (32 male and 4 female) were trained on EIE subject matter including pedagogy to increase their self-efficacy, while boosting their teaching strategies. They were trained in mental health and psychosocial support (MHPSS) such as counselling, referral pathways, creation of safe spaces for children etc. to enhance their ability to deliver content and manage MHPSS cases within schools. The training provided the participants with knowledge and skills to support social and emotional learning of learners in schools, which in turn helped to develop skills to manage their emotions and build healthy relationships with one another. These programs will provide a foundation for positive mental health outcomes for students/pupils.

Teachers training sessions in Nasir County, Upper Nile State

Objective 2. Organizational Capacity Strengthening: A total of 7 UNKEA staff (2 female and 5 male) received a 5-day training on integration of financing and programming to ensure effective and efficient project implementation and quality assurance. The training included refresher on Quick Book accounting package including budgeting, bank reconciliations, expenditures verification and budget tracking.

Coordination and Collaboration: UNKEA participated in the monthly County Education Cluster Coordination Meetings, where the Education Officer shared the plans and achievements of this project. Participation in these coordination meetings facilitates information sharing, allowing other agencies to respond to sectoral gaps identified in the project.

Objective 3. Access to Quality and Inclusive Education:

Dykes Construction for Flood Mitigation: UNKEA, in collaboration with the community, successfully constructed dykes around five schools which are prone to floods in Nasir County. They included Wechdeng Primary School, Nasir Complex Secondary School, Maker Primary School, Latjor Primary School and Dr. Timothy Girl Primary Schools. This was done to reduce floods during the rainy seasons and ensure continuous access to safe and conducive learning spaces for children. This activity enhanced young children from Pre-School, children with diverse disabilities to have access to the learning facilities leading to school retention and increased enrollment.

Dyke construction in Maker and Wechdeng primary schools by community members.

Classroom Rehabilitation: UNKEA successfully completed the rehabilitation of two classrooms in Nasir Complex Secondary School. This has helped to reduce overcrowding and created additional learning spaces for students leading to school retention and increased enrollment.

Rehabilitated classrooms in Nasir Secondary School in Nasir County, Upper Nile State

Conduct dialogue meeting with relevant and likeminded stakeholders on education policy Two days dialogue meeting was held for 20 people (18 male and 2 female) participants drawn from NNGOs, INGOs and other relevant government stakeholders within the county. They were engaged and re-engaged to influence the implementation of education policies and best practice including lobbing and advocating for resources to support the education system in pre-primary, primary and secondary school.

Conduct Back to Learning campaign to enroll learners- ECD, Primary, secondary and ALP schools Two back to Learning campaigns to boost the enrolment in formal and non-formal schools in Nasir were conducted in three payams (Nasir, Koat and Maker) to ensure educational access in emergencies which is fundamental for literacy and numeracy to boost the enrolment of Out-Of-School children. Many people were

reached out from three payams including learners, teachers, PTAs, leaders, Church leaders, civil societies organization, youths, and women leagues, and Payam Supervisors through the coordination of County Education Officials. These campaigns were conducted while schools were closed due to heatwave. However, the impact was tracked through increased school enrolment after schools were reopened.

The procurement and distribution of assistive devices for Children with Diverse disabilities: The Assistive Devices comprised of wheelchairs, Adjustable Walkers, Plastic chairs, Adjustable Aluminum Medical Crutches, Adjustable Elbow Crutches were procured and distributed to 8 Children with Disabilities and this demonstrated child participation approach in EiE through inclusion and accessibility to learning premises.

The Assistive devices procured and distributed to children with disabilities in Nasir County, Upper Nile State

Dignity Kits for Female Learners: UNKEA purchased dignity kits for 112 female learners across five target schools. These kits include bathing soap, hair comb, bucket, underwear, shaver, slippers, kitting cloth bag, sanitary wipes, toothbrush, solar torch, re-usable pads, nail cutter, detergent powder, razor blade, toothpaste, towel, laundry soap, and kitenge to support adolescent girls in managing menstrual hygiene, thereby improving school retention rates and enrollment.

Provision of Teaching and Learning Materials: Assorted recreational, teaching, and learning materials were procured and delivered to six primary schools in Aweil East Counties in Northern Bahr El Ghazal using additional funds from SCI. The beneficiary schools included Madhol primary school, Amerjal primary school, Malualdit primary school, Adut Adhot primary school, Malek Bol primary school and Majak Akoon primary school. The assorted materials comprised of pens, exercise books, balls, rubbers, rulers etc. aimed at enhancing learning to promote active engagement and independent learning of children for improved comprehension and skills development.

4) South Sudan Education Cluster Co-coordination

The South Sudan Education Cluster (SSEC) is led by UNICEF and Save the Children and Co-led by UNKEA to represent NNGOs to ensure inclusion and capacity strengthening within the overall EIE humanitarian response. UNKEA jointly with the cluster lead agencies (CLAs), work's towards providing a coordinated response to education EIE needs to enhance resilience. This is done through joint planning, preparation and implementation of the humanitarian project cycle ranging from assessment to inform the needs, planning to inform implementation, resource mobilization for response, implementation, monitoring, and evaluation by EIE partners.

Throughout 2025, the South Sudan Education Cluster provided strategic coordination and leadership for Education in Emergencies (EiE), working closely with the Ministry of General Education and Instruction (MoGEI), UN agencies, donors, and humanitarian partners to support children affected by conflict, displacement, climate shocks, and disease outbreaks. The year unfolded under significant operational and funding constraints, worsened by the global humanitarian reset driven by funding cuts. This shift required clusters to adapt coordination approaches focusing only on essential, life-saving services.

Within this constrained environment, the Education Cluster prioritized support to the most vulnerable populations in Priority 1 and 2 counties, with a strong focus on lifesaving EiE interventions. Efforts centered on maintaining access to safe, inclusive, and quality education, improving the quality of EiE programming, and strengthening local and government capacity to support more sustainable education response systems.

Achievements

Throughout the year, the Cluster delivered on its core coordination functions, with a strong emphasis on service delivery coordination, strategic planning, advocacy, capacity strengthening, monitoring, and accountability to affected populations. Regular national and sub-national coordination platforms enabled partners to align interventions, reduce duplication, and jointly address gaps. Continuous technical support was provided to partners on proposal development, 5W reporting, and planning processes, ensuring that education responses remained evidence-based and aligned with agreed priorities.

Strategic inter-cluster engagement was a critical achievement in 2025. The Education Cluster actively participated in ICCG, HCT, and joint ICCG–HC meetings, contributing to discussions on humanitarian priorities, coordination efficiency, and the implications of the humanitarian reset. These engagements supported a collective shift toward responding to new shocks such as cholera outbreaks, flooding, and acute food insecurity, while navigating reduced emphasis on protracted emergency contexts. Priority locations were identified based on severity of needs, and education was consistently advocated for as an essential component of multi-sector responses. The Cluster also contributed to ad-hoc ICCG discussions to support emergency response planning in Upper Nile and Western Equatoria, ensuring that EiE was integrated into rapid response and reserve allocation strategies.

Planning and strategy development remained central to the Cluster's work. Early in the year, the Cluster revised the 2025 HNRP targets and financial requirements to reflect global funding reductions, reducing population targets and geographic coverage while prioritizing the most vulnerable learners. Despite these constraints, the Cluster finalized key strategic frameworks, including the Renk EiE strategy for the Sudan refugee response and the SSHF Allocation Strategy addressing cholera, conflict, and flooding in priority counties. In the second half of the year, the Cluster led the development and finalization of the 2026 HNRP education component, refining targets, costing, and prioritization to support evidence-based advocacy with the Humanitarian Coordinator and donors.

Monitoring, evaluation, and information management systems were strengthened across the year. The Cluster improved enrollment tracking tools, revised the incident reporting system to enable real-time updates on school disruptions, and supported partners to improve the quality and timeliness of 5W reporting. The Secondary Data Review was completed to inform 2026 HNRP preparedness planning, strengthening the evidence base for needs analysis. In addition, the Cluster conducted the Cluster Coordination Performance Monitoring exercise, generating partner feedback to inform coordination improvements in 2026.

Capacity strengthening remained a consistent priority. The Cluster delivered EiE fundamentals and 5W reporting trainings and supported a review of the EiE Fundamentals training package in collaboration with Save the Children. Feedback from implementing partners was used to contextualize the training to the South Sudan context, promoting standardized and quality EiE delivery. Participation in global learning initiatives, including webinars on learning assessment in emergencies, further strengthened knowledge exchange and program quality.

Advocacy was sustained throughout the year to elevate EiE within a constrained humanitarian space. The Cluster developed and disseminated advocacy briefs and key messages highlighting education gaps, funding shortfalls, and the risks of deprioritizing education. Close collaboration with UNICEF as the Cluster Lead Agency enabled joint advocacy, information sharing, and resource mobilization. A significant achievement was continued engagement with UNESCO and other stakeholders to support MoGEI in strengthening government leadership on EiE, including progress toward institutionalizing EiE within ministry structures and advancing discussions on establishing an EiE response unit.

Allocation of funds to EIE through the SSHF country-based pool funds. The South Sudan Education Cluster was able to secure approximately 800k for EIE actors to respond with lifesaving EIE needs in conflict affected areas.

Inter-sectoral collaboration remained critical in addressing compounded risks affecting education. The Cluster worked closely with the WASH Cluster to respond to cholera outbreaks in schools and advocated for CERF-supported WASH interventions in education facilities. Collaboration with the Child Protection Sub-Cluster strengthened education–protection linkages, particularly through advocacy for child-friendly spaces combining learning and psychosocial support. Engagement in flood preparedness planning ensured education was integrated into national and inter-sectoral disaster risk reduction frameworks.

Accountability to affected populations was embedded throughout coordination and planning processes. Community and child participation informed needs assessments and response design, while partner feedback mechanisms supported more responsive and community-informed education interventions.

Localization Focus. The Education Cluster continued to promote localization through inclusive coordination platforms and targeted capacity strengthening. National NGOs and education partners were actively engaged in cluster meetings, strategic planning processes, and the refining of the current 2023-2025 cluster strategy. Technical support on proposal development, reporting, and planning strengthened local partner participation in funding and coordination processes. Collaboration with the National Education Coalition further reinforced national-level ownership and alignment of humanitarian education priorities.

Food Security and Livelihoods/Governance and Peace Building

1. Enhancing Durable Solutions by strengthening Local Capacities for protection of civilians and livelihoods opportunities in Malakal, Makal County, Upper Nile State, South Sudan

Universal Network for Knowledge & Empowerment Agency (UNKEA) in partnership with United Nation Mission in South Sudan (UNMISS) has successfully completed the implementation of a project *"Enhancing Durable Solutions by strengthening Local Capacities for protection of civilians and livelihoods opportunities in Malakal County, Upper Nile State"*. The project aimed at creating peaceful and harmonious communities in Malakal County, Upper Nile State through:

-Enhancing protection through localized approaches by empowering communities with the tools, training, and structures to identify and address threats and continue to support UNMISS efforts towards sustainable, community-owned protection mechanisms.

-Supporting the stabilization in conflict-affected areas by fostering youth and women's participation and mediation skills on violence triggered activities such as animal grazing, fishing, cattle raiding, revenge killing/attack, intercommunal clashes and youth unemployment.

-Youth and livelihoods engagements to foster conflict prevention through vocational training (brick making, financial management, business skills), and provision of alternative pathways for non-violent livelihoods, reducing the risk of recruitment into armed groups, and enhancing local economic recovery.

The selection of project participants was community led based on credibility and vulnerability status within the targeted communities. The selection criteria were jointly agreed and applied by all project relevant stakeholders in Malakal. The implementation was also done closely with South Sudan project relevant Clusters within Malakal humanitarian hub, they included Health cluster, Protection cluster and FSL cluster to which the specialized expertise, skills, knowledge, and information relevant for successful project implementation and achievements were exploited. Standard operating procedures developed by local authorities, line ministries and government departments were followed to guide the successful implementation process.

The following activities were conducted during project implementation namely; project orientation, consultative meetings with project relevant stakeholders, inception meeting, training youth on brick-making skills, formation and training of Community Youth Peace Promoters (CYPPs) on dialogue and mediation skills to champion peaceful coexistence in Malakal County, community sensitizations on peaceful coexistence (through awareness meetings, radio talk shows and Jingles), distribution tree seeds and knowledge transfers, formation of a trauma healing discussion group to conduct at least 2 guided trauma healing discussion sessions and link traumatized youth, men and women to relevant service providers for counseling and rehabilitation, mapping existing community-based protection and referral mechanisms, facilitating formulation and dissemination of by-laws and ordinances for conflict-related activities and protection of civilians (cattle grazing, bush burning, wetland use, fishing activities, cultivation, tree cutting and marketing) and promote sports activities as a platform for consultations and collaborations for community peaceful coexistence.

Output (1): Strengthen capacities of 180 Shilluk, Dinka, and Nuer youths on vocational skills (Brick-making skills)

1.1.Youth trainees and Trainer's identification and selection

A total of 180 youth trainees (150 male and 30 female) across 6 payams in Malakal County have been identified and selected to benefit from brick making skills development. The youth are comprised of all the tribes living in the County that include Shiluk, Dinka, Nuer, Koma and Maban tribes. This was later followed by identification and selection of two (2) local trainers. The youth selection process was based on their credibility and influence within the community, and the process was community-led.

180 Selected Youth in Malakal County, Upper Nile State posed for group photo after project orientation

1.2 Sensitize trainees about the purpose and objectives of the project, registration of trainees, and conduct theoretical training on brick-making skills, peaceful co-existence.

(a). Distribution of tree seedlings

Following unavailability of tree seedlings within Malakal and transport related challenges, the project team discussed with the youth on the challenges and similar possible alternative which is the tree seeds distribution and knowledge transfers. This was well embraced by the youth than provision of tree seedlings because by building their skills on tree nursery bed preparation and management, would be a sustainable approach as well as an income generating venture to the youth. As a result, a total of 20 youthful households were selected and mobilized to receive seeds, potting materials and knowledge transfers. A total of 8kgs of Teak seeds and 20kgs of potting polythene papers were distributed, each group of 10 members received 4kgs of Teak seeds and 10kgs of potting polythene papers. After distribution and during knowledge transfers, a total of 1200 Teak seeds were planted to be raised by the youth compared to 200 seedlings initially planned. UNKEA will continue to monitor the process until the seedlings are raised and planted.

A group of youth actively participating in raising tree seedlings after distribution and during knowledge transfer sessions

1.3 Conduct practical training on brick-making skills, conduct practical and or role-play training on peaceful co-existence.

A total of 180 (126 men and 54 women). The practical kills building on brick making was given to ensure youth and livelihoods engagement to foster conflict prevention and provision of alternative pathways for non-violent livelihoods, reducing the risk of recruitment into armed groups, and enhancing local economic recovery. The production of bricks by these youth will also help to establish basic infrastructure that will accelerate return, reintegration, and transition to early recovery, stabilization, and development and potential reduction in the price of construction bricks in the Malakal. Local Artisans with vast skills and experience in brick making were hired to conduct brick making training for youth. All the training cycles were completed from site selection to firing/burning.

A total of 2000 bricks were produced by the trainees during the training and were witnessed by UNMISS

UNMISS staff participating in brick making activity

Burning of bricks taking place

1.4. Formation of brick-making associations

To ensure access to the youth and ease training facilitations, 180 youth have been grouped into 9 brick making associations. Each group are comprised of 20 members both men and women across all tribes in Malakal County. Grouping was done by considering the neighboring youthful households for easy access to the training sites and community interactions/information sharing. Each group has a leadership structure for easy communication, mobilization and management.

Output (2): Strengthen capacities of 30 youth Peace promoters to effectively operate and meaningfully participate in peace building processes.

2.1. Formation of Community Youth Peace Promoters (CYPPs)

A total of 30 CYPPs (24 male and 6 female) have been identified, selected and formed to be trained on peace building skills such as mediations, dialogues etc. The selection process was based on their credibility and

influence within the community. The same youth are part of 180 brick making skills building beneficiaries. After the formation, the youth were equipped with governance and peace building skills such as mediations, dialogues, forgiveness and reconciliations by the hired expert. By training and equipping them with peace building skills, they are expected to become the community peace building champions in Malakal County hence improved community co-existence and interactions.


CYPPs during peace building training in Malakal County, Upper Nile State

2.2. Conduct community sensitization on peaceful coexistence (at least 2 community awareness meetings and 2 radio talk shows, 1 radio jingle (in local languages) to reach about 10,000)

(a). Conduct radio talk shows to sensitize community on peaceful coexistence

A total of 2 radio talk shows has been conducted on community peaceful coexistence. The primary objectives of these radio talk shows include community awareness creation on different mechanisms of peaceful community co-existence such as mediations, dialogues, forgiveness and reconciliations, community awareness on youth and women's participation on leadership, decision making and community peace building processes on especially on violence triggered activities such as animal grazing, tree cutting, fishing, cattle raiding, revenge attacks etc. Positive feedback was received from the listeners across the County and this therefore indicated great commitments towards peaceful coexistence in the County.

Youth panelists at Voice of love FM in Malakal during radio talk shows on community peaceful coexistence

(b). Hiring a consultant to develop radio jingles

A radio jingle was developed by a specialized radio presenter within Malakal. It was developed in 2 languages commonly used in Malakal (i.e. English and translated into Arabic). The Radio Jingle aimed at creating peaceful and harmonious communities in Malakal County, Upper Nile State through: Enhancing protection through localized approaches by empowering communities with the tools, training, and structures to identify and address threats and continue to support UNMISS efforts towards sustainable, community-owned protection mechanisms. Supporting the stabilization in conflict-affected areas by fostering youth and women's participation and mediation skills on violence triggered activities such as animal grazing, fishing, cattle raiding, revenge killing/attack, intercommunal clashes and youth unemployment. Engagement of Youth and livelihoods to foster conflict prevention through vocational training (brick making, financial management, business skills), and provision of alternative pathways for non-violent livelihoods, reducing the risk of recruitment into armed groups, and enhancing local economic recovery.

(c). Running of radio jingles

The radio jingle is being run throughout the week at Voice of Love FM in Malakal. According to the feedback, the Radio talk shows and Running of Radio Jingle has reached an estimate of about 10000 people comprised of 6700 men and 3300 women. This indicates a significant effort towards peace building through our partnership with UNMISS.

(d). Conduct 9 community awareness meetings on peaceful coexistence campaigns.

A total of 9 community awareness meetings on peaceful coexistence campaigns were held in 9 different places. They included funerals, churches, Mosques, markets, water points among others. At least about 540 people (378 men and 162 women) were reached with sensitization campaigns. This was crucial in influencing attitudes, behaviors, and beliefs to achieve a specific goal of peaceful coexistence. It helped to increase visibility for issues, inspired individual actions, and built momentum for long-term social change by empowering people with knowledge and fostering Alternative Dispute Resolutions-ADR mechanisms such as

mediations, dialogues and forgiveness. It is also less costly compared to formally organized sensitization events where there is need for hall hire, transport refunds, refreshments, stationeries among others.

2.3. Form 1 trauma healing discussion group to conduct at least 2 guided trauma healing discussion sessions and link traumatized youth, men and women to relevant service providers for counseling and rehabilitation.

A total of 80 people (56 men and 24 women) were reached with trauma healing sessions. This included 10 people per session for 8 sessions. The sessions were led by 2 counseling facilitators with each conducting 4 sessions. The sessions included amongst others Peer-led, Shared Understanding and Emotional Relief, Coping Skills Development, Boosting Confidence. During the sessions client assessment was conducted and this was done to gather and understand a client's trauma history, symptoms, and relevant personal circumstances. Treatment Goals, this was done purposely for client's recovery such as emotion regulation or symptom reduction. Progress and Challenges, this was done to evaluate the client's progress toward their goals, as well as any difficulties encountered such as feelings of overwhelm or numbness. Safety Measures were provided throughout the sessions. Feedback sessions were also conducted to get clients' perspectives on their experience and any suggestions for improvement.

Trauma healing session in progress

<u>Output (3): Strengthen capacities of 30 relevant government stakeholders (State Ministry of Peacebuilding; State Ministry of Culture, Youth and Sports; State Ministry of Peace and Reconciliation Commission; among others) to support the Youth Peace Forums and community-based protection mechanisms.</u>

3.1. Map existing community-based protection and referral mechanisms

This involved identification and using the local structures and community members to identify, prevent, and respond to protection risks. Referral mechanisms were integrated into this project to ensure that individuals

facing protection concerns are linked with appropriate services. A total of 30 participants (21 men and 9 men) from different sectors within Communities in Malakal were trained on multiple protection risks being faced, including child abuse, SGBV, inter-communal disputes, neglect of vulnerable groups, and weak referral pathways. While local structures exist — such as chiefs, community health workers, child protection committees, and faith-based actors — coordination gaps often hinder timely and effective protection responses.

To strengthen collaboration, a two-day training workshop was conducted to map community-based protection (CBP) structures and referral mechanisms. The training brought together community stakeholders and service providers to identify existing systems, highlight gaps, and develop a joint action plan for improving protection and referrals in Malakal.

Participants during mapping of existing community-based protection and referral mechanisms in Malakal

3.2 Facilitate formulation and dissemination of by-laws and ordinances for conflict-related activities and protection of civilians (cattle grazing, bush burning, wetland use, fishing activities, cultivation, tree cutting and marketing)

Communities in Malakal Upper Nile State continue to experience recurring conflicts linked to natural resource use and community practices such as cattle grazing disputes, bush burning, misuse of wetlands, fishing competition, cultivation, tree cutting, and unregulated marketing. Weak enforcement mechanisms and lack of effective community by-laws exacerbate these conflicts. To address this, UNKEA, together with CYPPS and County duty bearers, facilitated a four-day engagement workshop aimed at strengthening community capacity to formulate and disseminate by-laws that regulate these conflict drivers and enhance civilian protection. A total of 50 participants (38 men and 12 women) participated in these engagement meetings/workshop, they included County duty bearers (local government officials, chiefs, administrators), Community stakeholders (youth leaders, women's groups, elders, and faith leaders), members of CYPPS (Community Youth Peace Promoters).


Engagement meeting/workshop in progress

Group Work Outcomes: Draft By-Law Proposals

Q1. Community Safety & Peaceful Coexistence – Group One

Awareness/Capacity Building: Land policies, marriage, court cases, cattle raiding.
Accountability & Transparency: Leaders accountable to policies; community communication; transparency in dispute resolution.
Feedback & Follow-up: Mechanism for informing communities of policies; regular review and amendment.

Q2. Inter-communal Violence – Group Two

Theft/Raiding – Offenders repay triple of stolen items.
Murder/Killing – Offender pays 50 cows and handed to higher authority.
Hate Speech – Fine of one cow + one week of community service.
Adultery – Fine of 7 cows (1 to community, 6 to husband).
Rape – Fine of 8 cows + offender pays medical treatment for victim.

Q3. Peaceful Coexistence & Environmental Management – Group Three

Hate speech → 6 months imprisonment.
Noise disturbance → Fine of 1 goat or 3 months imprisonment.
Neglecting responsibility (pregnancy) → Prison + 6 cows.
Cattle raiding → Return cows + fine of 500,000 SSP or 1-year imprisonments.
Environmental Management:
Cutting trees → 1-year prison + 1 cow fine.
Waste disposal violations → Fine of 100,000 SSP.

The engagement meetings/workshop concluded with action plan, emphasizing unity, accountability, local ownership in by-laws enforcement/formulation, role of faith leaders in supporting dissemination and ensuring compliance with by-laws.

3.3. Establish 1 inclusive county peace stakeholders' fora as platforms for consultation and collaborations (Sports/Football tournament)

A football tournament was held between Bam and Malakal league football clubs at Malakal stadium. The two teams were selected by Ministry of Youth, Cultures and Sports based on their performance and credibility and UNKEA provided them with tournament kits such as jerseys, balls, pumps, gloves and visibility materials (T-shirts, head caps and banners) including facilitations among others. A road drive was made with the radio jingle being played to help mobilize the communities as well as passing the message on community peaceful coexistence in the County. The event was attended by about 255 (178 men and 77 women) spectators including 2 people from UNMISS PTR Malakal base. Awards were presented to the winner of the tournament, looser, man of the match and this was officiated by Joel of UNMISS-one of the PTR team members in Malakal. Players from both teams expressed their gratitude and appreciated UNKEA and UNMISS for supporting the youth empowerment in promoting peaceful coexistence and encouraged UNKEA and UNMISS to continue engaging youth in peace building activities for sustainable peace in Malakal.

Players, Guests and Spectators during football tournament at Malakal stadium

Health (Primary Health Care Services)

1. Health Sector Transformation Project (HSTP)-World Bank

The Health Sector Transformation Project (HSTP) is a three-year government led project funded by World Bank through UNICEF as fund manager which started in July 2024 and will run till June 2027. The project is being implemented in the two counties of Nasir and Ulang (Upper Nile State) with the primary objective of expanding access to basic package of health and nutrition services, strengthening the health system, and enhancing health sector stewardship. The target population is 567,122 disaggregated as Nasir (Male=193,933 & Female=294,903) and Ulang (Male=78,286 & Female=84,809) according to South Sudan National Bureau of Statistics (NBS 2025) with more focus on women and children as the prime beneficiaries for the project. It supports 22 health facilities and 16 BHI sites across the two counties which include 1 County hospital, 9 PHCC and 12 PHCU as shown in the table below.

Project Goal:

Expand access to a basic package of health and nutrition services particularly for women and children while improving health sector stewardship and strengthening the overall health system

No	County	Health facility	Facility level
1	Luakpiny/Nasir County	Nasir County Hospital	County Hospital
2	Luakpiny/Nasir County	Jikmir PHCC	PHCC
3	Luakpiny/Nasir County	Mading PHCC	PHCC
4	Luakpiny/Nasir County	Kierwan PHCC	PHCC
5	Luakpiny/Nasir County	Mandeng PHCC	PHCC
6	Luakpiny/Nasir County	Dhekdhek PHCU	PHCU
7	Luakpiny/Nasir County	Homkor PHCU	PHCU
8	Luakpiny/Nasir County	Gurnyang PHCU	PHCU
9	Luakpiny/Nasir County	Wanding PHCU	PHCU
10	Luakpiny/Nasir County	Kierwanding PHCU	PHCU
11	Luakpiny/Nasir County	Dingkar PHCU	PHCU
12	Luakpiny/Nasir County	Lualeyak PHCU	PHCU
13	Luakpiny/Nasir County	Malek PHCU	PHCU
14	Luakpiny/Nasir County	Gaireng PHCU	PHCU
15	Ulang County	Ulang PHCC	PHCC
16	Ulang County	Rupboard PHCC	PHCC
17	Ulang County	Yomding PHCC	PHCC
18	Ulang County	Doma PHCC	PHCC
19	Ulang County	Kuich PHCC	PHCC
20	Ulang County	Ying PHCU	PHCU
21	Ulang County	Bimbim PHCU	PHCU
22	Ulang County	Dura PHCU	PHCU

Achievements

Output1. Frontline health and community workers demonstrate improved capacity to provide flexible, integrated services for the management of common childhood illnesses to young children in targeted emergency and non-emergency settings.

Activity 1.1 Number of health facility outpatient services utilization under five years.

A total of 41,482 children under five years received curative consultation from the health facilities out of the 68,124 annual targets translating to 61% percentage achievement. This is due to stock of essential medication at the health facilities. Conflict and community displacement also greatly affected service delivery.

Activity 1.2 Number of under five children seen through the boma health initiative (BHI) in the community.

From the 25,192 annual project target, 27,746 under five children were seen and managed in the community by the boma health workers giving a percentage of 110%. This indicates quite a significant achievement which is due to community movement to inland areas where BHI services are predominantly located.

Activity 1.3 Training of BHW/supervisors on integrated service delivery in zero dose county.

A total of 170 BHW/supervisors (Male=63 & F=107) were trained on integrated malaria case management in Kuetrengke (Nasir County)

Activity 1.4 BHWs activity engagement activities including defaulter tracing and referrals in the community.

Besides the primary activity of BHW which is mainly community case management of under five children for malaria (fever), diarrhea and pneumonia, they play key roles in EPI defaulter tracing, community mobilization, identification of pregnant/defaulter mothers and referring them to health facility for ANC services. A total of 11,635 children under five were treated for the common childhood illness malaria (3,852), pneumonia (9,111) and diarrhea (7,449). During screening of children for malnutrition, 24,951 presented with green MUAC, 859 with yellow MUAC and 334 with red MUAC making a total of 26,144 children screened. 1,182 immunization defaulters were identified in the community during the reporting period and 622 were referred to the health facility or immunization site for vaccination. 826 pregnant mothers were identified by BHWs in the community and referred to facility for ANC services. 359 of them were defaulters referred for ANC2+ while 447 had never attended ANC services before.

Activity 1.5 Distribution of drugs and medical supplies to health facilities.

Though towards the end of the year, all the 22 supported health facilities had essential medication following the delayed delivery of cycle 3 drug consignment to the respective counties, there had been significant stockout of most essential medications in the health facilities which was addressed through drug rotation practice that was put in place by the project staff to maximize utilization and minimize wastage in other health facilities.

Last mile delivery of drug supplies to Ying PHCU and Yomding PHCC in Ulang County, Upper Nile State

Activity 1.6 Number and percentage of health facilities with structured support supervision visit.

Cumulatively, on average 8 out of 22 supported health facilities were visited at least once in a quarter using a structure supervision checklist (QSC) by the project technical staff and CHD representatives representing 36% achievement. This was mainly attributed to the ongoing conflict and community displacement that greatly interrupted services delivery. However, a significant improvement was registered in the last quarter (October-December 2025) as the situation calmed down and the stakeholder's engagement meetings conducted provided relatively free access for humanitarian workers especially in Nasir County, to the health facilities.

Review of drug stock record during support supervision by UNKEA/CTG/CHD in Ulang PHCC

Data verification during support supervision by UNKEA PHC/BHI officer & CHD HMIS officer in Kierwan

Activity 1.7 Number and percentage of functional health facilities submitting standardized HMIS monthly reports into DHIS2 within one month of the reporting period.

The overall health facility reporting in DHIS2 for last year stands at 82%. This is because following the conflict that erupted March, most facilities were looted and vandalized couple with community displacement,

this affected facility reporting not until late July when security situation began normalizing and efforts were made by M&E officer together with rest of technical project staff to follow up outstanding reports and by the end of last year (December 2025,) HMIS reporting stood at 91%. The reason being 2 health facilities (Wanding and Kierwanding) didn't submit reports for December due to accessibility challenge.

Output 2. Frontline health and community workers demonstrate improved capacity to provide quality, essential maternal and neonatal care to pregnant women and adolescent girls and their babies, in emergency and non-emergency settings.

Activity 2.1. Maternal and Newborn health services enhance: ANC, SBA, PNC, Family Planning.

A total of 2,059 pregnant women received at least four antenatal visits out of the 3,298 annual target with a percentage achievement of 62%. This slightly lower performance is attributed to several challenges which include conflict and community displacement, seasonal flooding which affects accessibility to health facilities, lack of motivational packages like soap, basin, baby shawls etc. that were previously given to mothers delivering in the health facilities. A total of 846 live births were attended by skilled health personnel in the facility deliveries out of the 1,563 annual target making percentage achievement of 54%. The low performance was attributed to the conflict that caused massive population displacement, flooding affecting accessibility to health facilities and lack of facility-based delivery by skilled personnel in facilities like Jikmir PHCC due to lack of delivery room following relocation of the health facility to Torkech during the conflict where it's still operating.

Provision of ANC services by midwife in Kierwan

Midwife providing ANC services in Mading PHCC

A total of 1,156 women/newborn babies received postnatal visit within 2 days of childbirth compared to the 5,033 annual project targets representing (23%). This very low performance is directly linked to reasons for low facility-based deliveries following conflict that has displaced thousands of communities across the two counties.

Activity 2.2 Foster collaboration and coordination among stakeholders ensuring beneficiaries accountability and feedback. *Stakeholders' engagement meeting with local authorities in Ulang and Nasir*


Stakeholders' engagement and consultative meetings were conducted with key stakeholders (county local authorities, community leaders, members of the community, implementing partners and facility staff). The meeting focuses on building relationships and trust, understanding stakeholders' needs & concern, addressing issues related to restriction of staff movement proceeding conflict and insecurity in Nasir and Ulang county, stock out of medical supplies & vaccines and delay of incentives among others. The meetings took place in Ulang, Nasir town, Mandeng, Wanding and Kierwanding attracting 102 participants (M=74 and F=28).

Activity 2.3 Training frontline health care workers on integrated service delivery.

34 (M=28 & F=6) health care workers were trained on integrated management of newborn and childhood illnesses (IMNCI) & malaria case management, 48 participants (M=43 & F=5) received training on Immunization in practices (IIP) 44 of whom were facility based vaccinators and 4 being the CHD based vaccinators for zero dose counties Four of the participants were the zero dose aimed at scaling up immunization services. Integrated health facilities-based in-service training were conducted to staff based on identified knowledge gaps and desired need in a particular area.


In-services training of Jikmir facility staff in Torkech ***Inservice training of Nasir hospital staff on BEMONC***

Output 3. Government and other partners demonstrate improved capacity to deliver routine and supplementary immunization and respond to disease outbreaks. (Nasir & Ulang)

Activity 3.1: Conduct daily health facility based routine vaccination (static vaccination services) and outreach sessions in the community.

There was a significant reduction in the number of children vaccinated with only 7,763 children less than 1 year receiving DPT3/Penta3 vaccination out of 21,292 annual targets which translate to (36%) percentage achievement This was due to stock out of vaccines for quit long period of time in the field couple with lack of functional cold chain equipment (CCE) in most of the health facilities along the river corridor following vandalization that took place during the conflict in both Nasir and Ulang County. Also, removal of EPI outreach activities in the PD during the first year of HSTP project that extended till June 2025 contributed to the low performance.

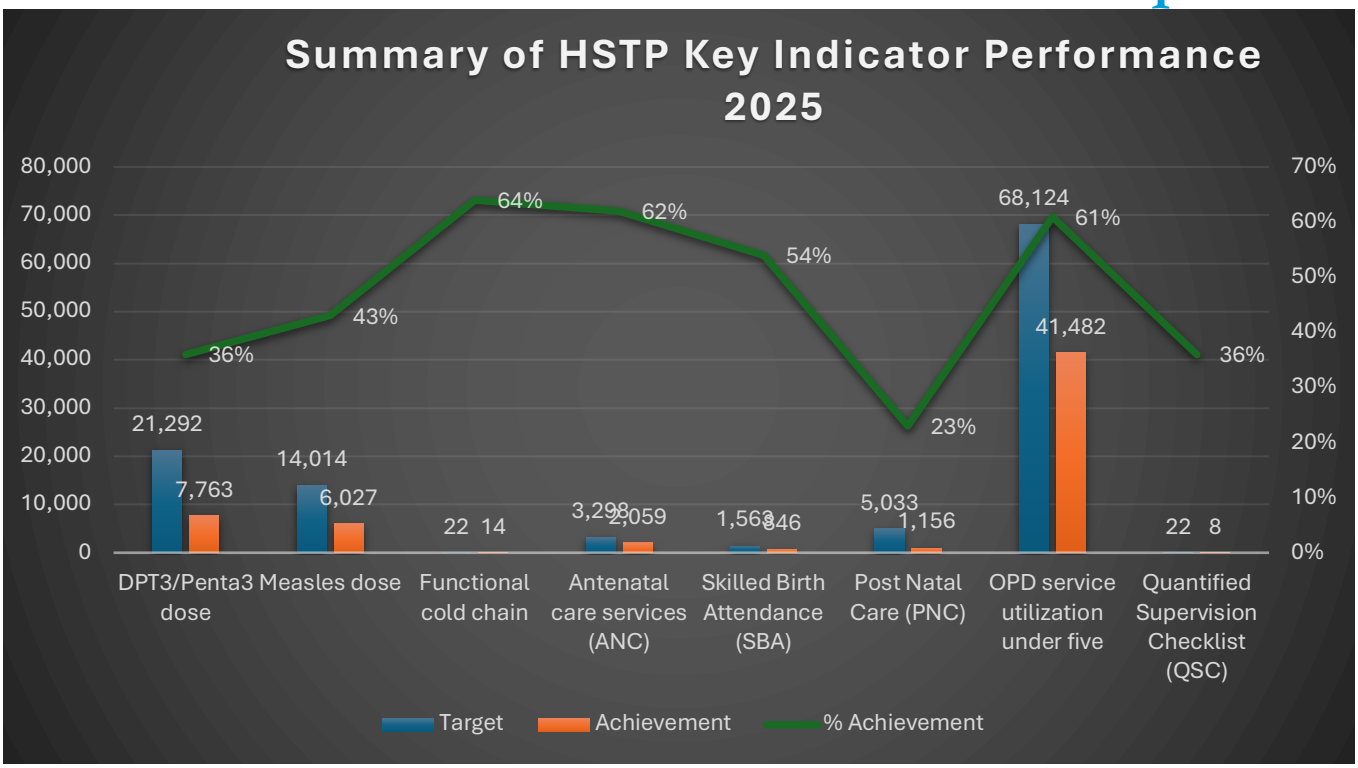
A dropout rate of 15% between DPT/Penta1 and DPT/Penta3 was realized of the 10% target (DPT 1 = 9,085, DPT3 = 7,763). This means that majority of the children who received DPT/Penta1 didn't complete the required doses and that could be attributed to community displacement following conflict, vaccine stock out and lack of functional cold chain equipment in 8 supported health facilities.

A total of 6,027 (F:4,033 M:3,752) children less than 1 year received measles vaccination. of the overall 14,014 annual target making a percentage of 43%. The low performance was attributed to vaccine stockout from other health facilities during the reporting period.

14 out of 22 supported health facilities representing (64%) have functional cold chain equipment. This reduction in the number of functional cold chain equipment is due to vandalization of cold chain equipment that took place during the conflict.

Vaccinator immunizing a child in Kierwan PHCC session

Yomding vaccinators coming back from outreach session



2. SSHF-Reserve Allocation-Emergency Health

The project supported one static Primary Health Care Unit in Maker Payam, A total of 6 health workers was recruited, trained and equipped to provide quality life-saving health care services that include maternal health, child health, immunization, surveillance, and referral services. The project supported one mobile Health Unit in Kuetrengke Payam, A total of 6 health workers was recruited, trained and equipped to provide quality life-saving health care services that include maternal health, child health, immunization, surveillance, and referral services.

Medicines and supplies were requested from the WHO, transported by charter to UNKEA county store in Nasir, Distribution was done using speed boats to the two health facilities (1 mobile clinic and 1 static facility). Drug consumption at facility level is monitored using drug consumption reports.

A total of 150/180 (83.3%) was provided ANC services at the static health facility and Mobile clinic.

The project reached 8945//9495 men, women, boys, and girls during the reporting period. This achievement was attributed to the availability of health workers and internally mobilized medical supplies at static sites. Uptake of services was hampered by the massive flooding and insecurity that made it difficult for the communities to access the health facilities

UNKEA technical team comprising of the health officer and the Program manager trained 12 (10 Male: 2 Female) health workers on Infection prevention control measures in Madeng Nasir County. The trainers used WHO/UNICEF IPC training slides.

A 5-day training course of 6 health workers (M = 4 & F = 2) in CMR was conducted at Madeng with the objective of building their capacity to provide Basic Emergency Obstetric & Newborn care.

The project reached 2737/17,935 men, women, boys, and girls during the reporting period which represents 15.2% achievement against the life of project target. This achievement is attributed to the availability of health workers and internally mobilized medical supplies at the static sites. Uptake of services was hampered by the massive flooding and insecurity that made it difficult for the communities to access the health facilities

1Immunization Activities at Mobile Clinic

Support Supervision of Maker PHCU by SSHF

3. WHO-CERF -Emergency Health

A total of 24 health workers were recruited for the two supported health facilities of Torpuot and Maker PHCUs in Nasir. Essential supplies were sourced from the World Health Organization adequate for 20,000 people every 6 months.

Conducted 5 days' orientation of the 24 (18 Male: 6 Female) recruited health workers in integrated response focusing on common causes of morbidity. The trainers adopted slides and extracts from WHO and the MOH South Sudan treatment guidelines and focused on the proper diagnosis and management of common causes of morbidity such as malaria, ARI, Measles, cholera and acute watery Diarrhea. As a result, this has promoted appropriate diagnosis and rational use of medicines during service provision. 3,599 persons were treated for malaria, 2,826 for Diarrhea and 1,044 for Acute respiratory infections.

Both health facilities provided routine immunization as part of the health package. The nurses and vaccinators screened all children seeking care for their immunization status and those found eligible are vaccinated. However, the challenge was accessing vaccines since both the two locations lack EPI fridges and the health worker are relying on the cold box and vaccine carrier that was provided by the CHD. During the reporting period, 640 children have been vaccinated with various antigens.

Routine screening of children under 5 years of age was conducted at the two supported health facilities, a total of 700 children were screened and referred to Jikmir PHCC and Mandeng PHCC for further management of these cases of malnutrition.

The project staff has conducted a total of 4 community engagement sessions with the affected populations. The BCC interventions are ongoing and are provided by both the health workers where 10,131 individuals were reached with BCC messages. The project has integrated Cholera Risk Communication using both interpersonal and IEC mediums to disseminate information on prevention.

Orientation of Health Workers in Mobile clinic

Mobile Clinic attending to patients

4. Community Based Surveillance (CBS)

Core Group Partners Project (CGPP), South Sudan, Community-Based Surveillance (CBS) funded by USAID. Areas of operations: Nasir, Maiwut, Ulang, Akobo, and Longechuk Counties, respectively.

Disease surveillance is an ongoing systematic collection, analysis, and interpretation of health data for action. CBS plays a critical role in strengthening effective and responsive management of public health threats, especially in fragile contexts like South Sudan, with devastated public health infrastructure, out-of-pocket health financing, mobile communities, and prolonged economic hardship. CBS helps improve disease surveillance sensitivity through early detection and reporting of diseases of public health importance. Over the years, from the parallel polio eradication initiative program, CGPP South Sudan expanded in scope and geographic coverage. CGPP South Sudan successfully leveraged the polio CBS infrastructure and integrated measles, Ebola virus disease, yellow fever, COVID-19, and adverse effects following immunization into the ongoing polio eradication interventions using the polio CBS networks.

In 2025, CGPP South Sudan integrated Global Health Security (GHS), focusing on selected zoonotic diseases for surveillance, risk prevention and community awareness (RPCA), partnership and coordination, and water, sanitation, and hygiene (WASH). To this, CGPP South Sudan has developed a more robust focus on WASH that includes programming in schools and health facilities, and in communities through hygiene promotion and behavior change communication. The project runs for one year and targets the five field locations, namely Nasir County, Ulang County, Maiwut County, Longechuk County, and Akobo County, with a network of

Community Key Informants (CKIs) of 1,190 CKIs, 119 HHPs, 4 Project Assistants, 6 Project Supervisors, and two Project Officers.

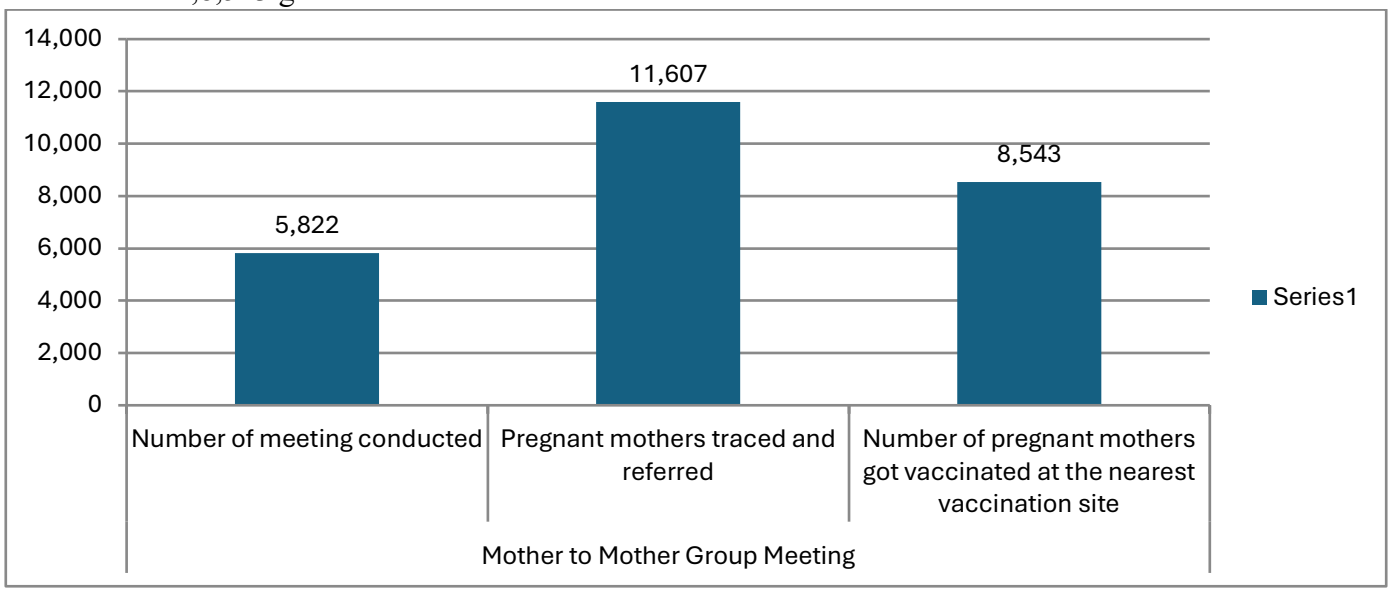
Project Goal:

Contribute to polio eradication by increasing population immunity and enhancing surveillance for Acute Flaccid Paralysis (AFP) and Priority Zoonotic Diseases.

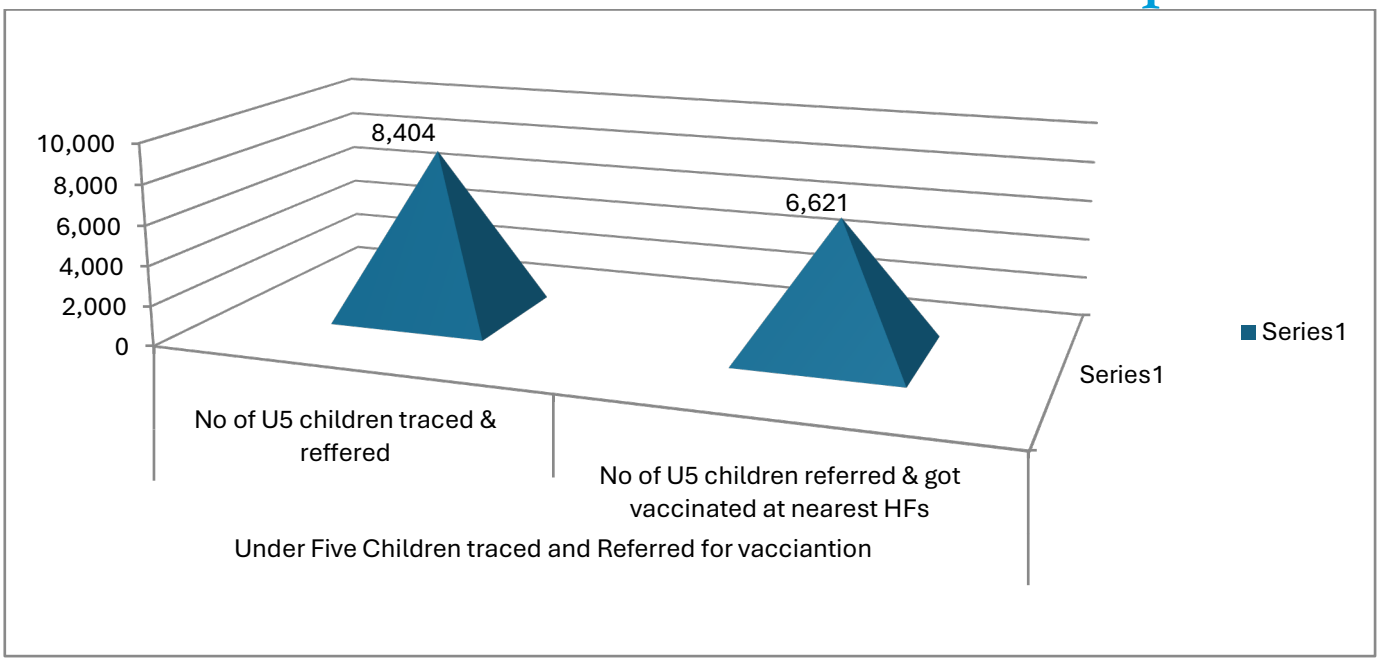
Achievements

Objective 1. Deliver essential lifesaving, community-based routine and emergency health services, including immunization, to advance polio eradication and to prevent and control other childhood and outbreak-prone diseases of public health importance.

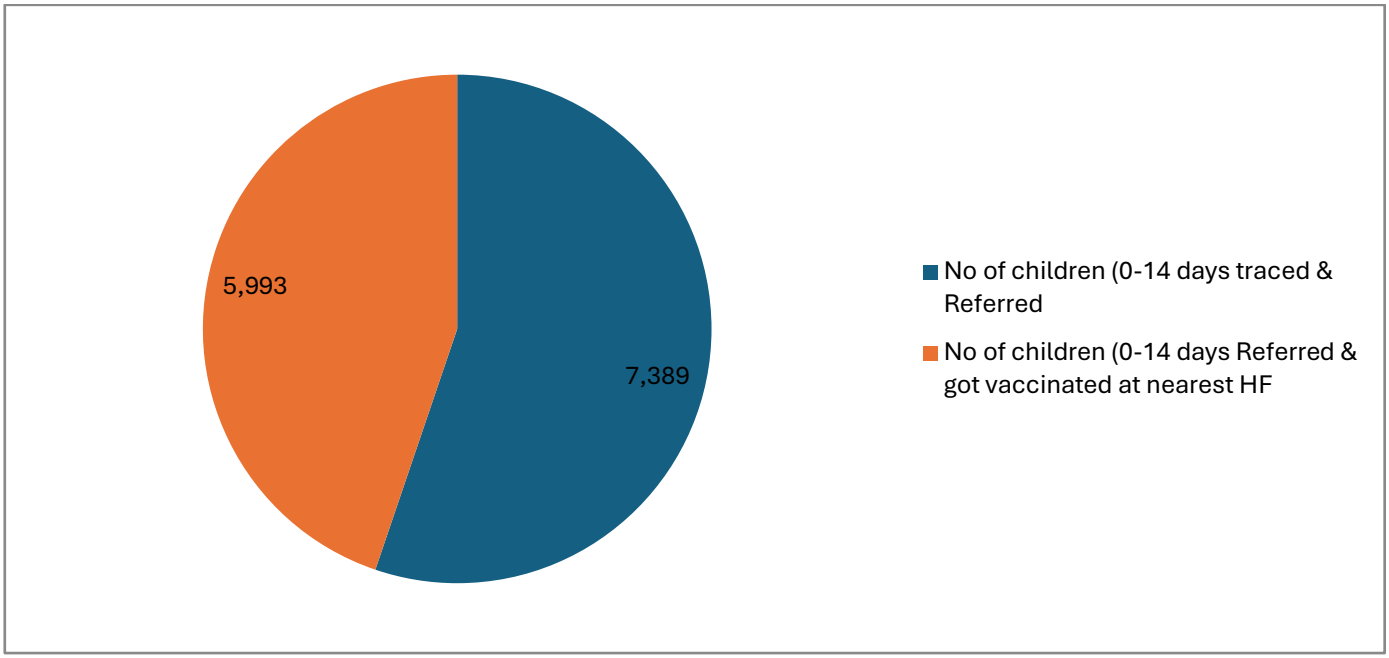
Activity 1.0: **Conducting of mother-to-mother group meeting to generate vaccination demand,5,822 meetings were conducted reaching out to 33,803**. There were 11,607 pregnant mothers traced and referred for vaccination,8,543 got vaccinated.



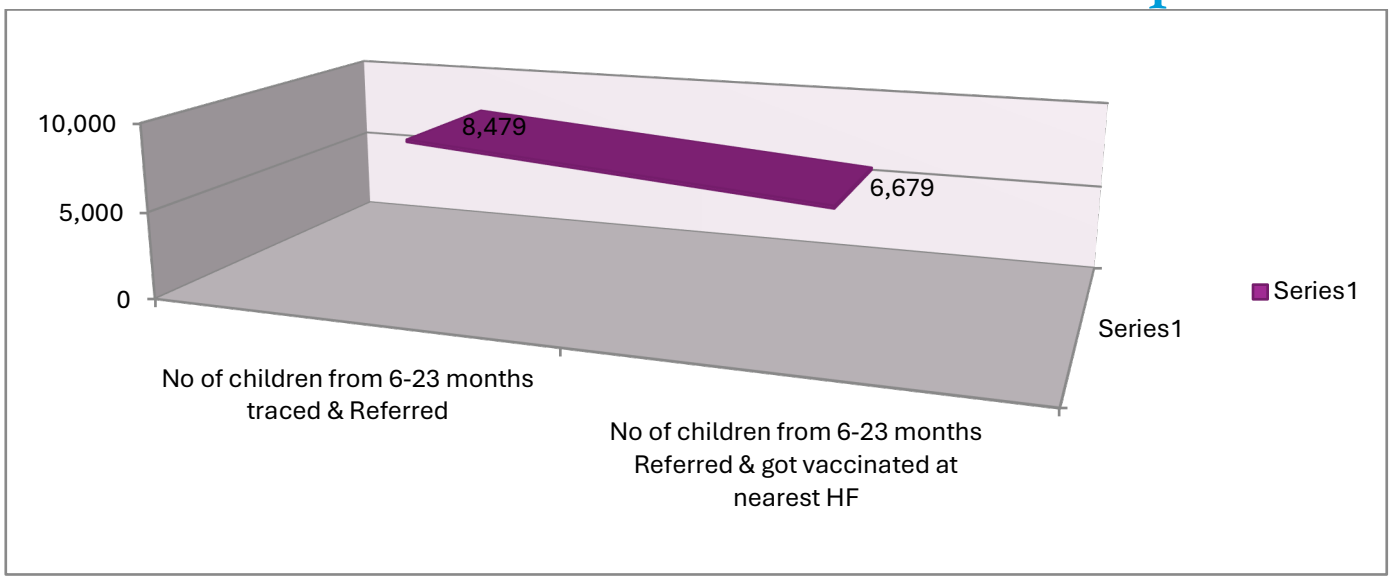
Activity 1.1: **Under Five Children tracking referring for vaccination**: 8404 under five children were traced and referred for vaccination to the nearest health facilities 6621 children get vaccinated.



Activity 1.2: **Tracking and referring children (0-14 days) for vaccination**: 7389 children 0-14days were traced and referred for vaccination 5993 were vaccinated.



Activity 1.3: **Tracking and referring children from 6-23 months**: 8,479 children 6-23 month were traced and referred for vaccination 6,679 got vaccinated.

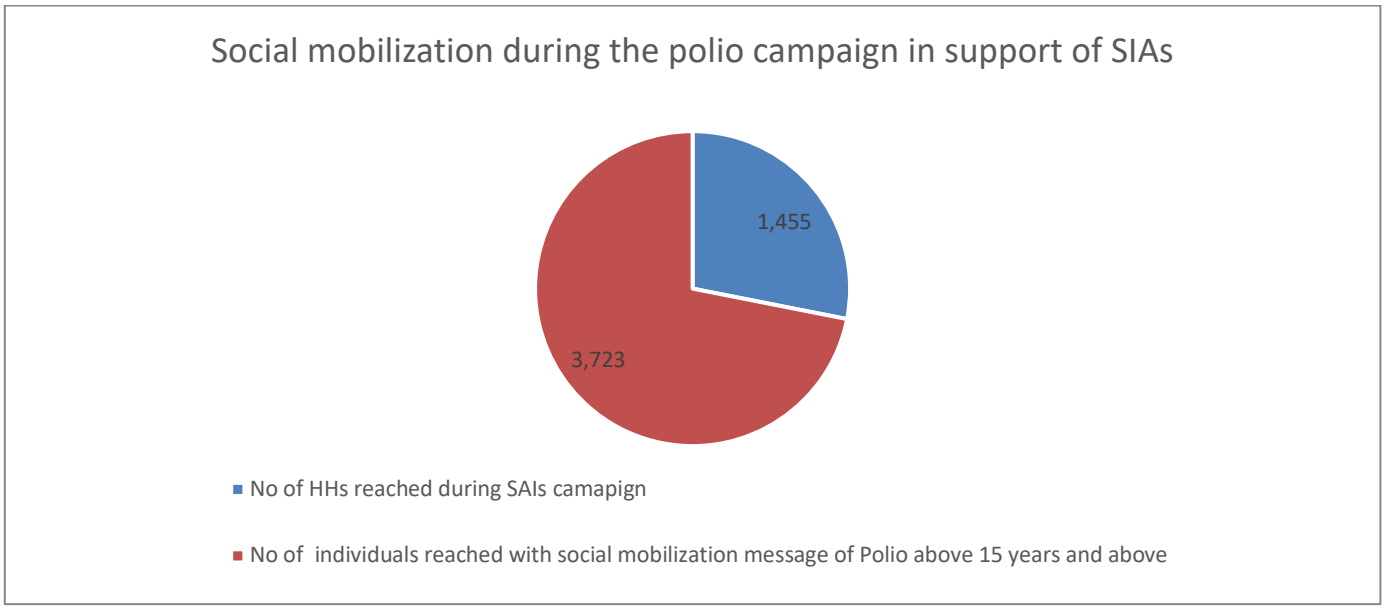


Activity 2: The Periodic Intensified Routine Immunization (PIRI) campaign conducted in Akobo West, Jonglei State, successfully vaccinated a total of 27,611 children, including 13,170 males and 14,441 females, using multiple vaccines. The primary aim of PIRI is to ensure that all children under five years of age receive essential immunization services. The campaign also emphasized active community participation in planning and implementation, as well as strengthening community-based surveillance for polio and other diseases. As a result, surveillance efforts were enhanced, contributing to a reduction in morbidity and mortality rates among children less than five years of age.

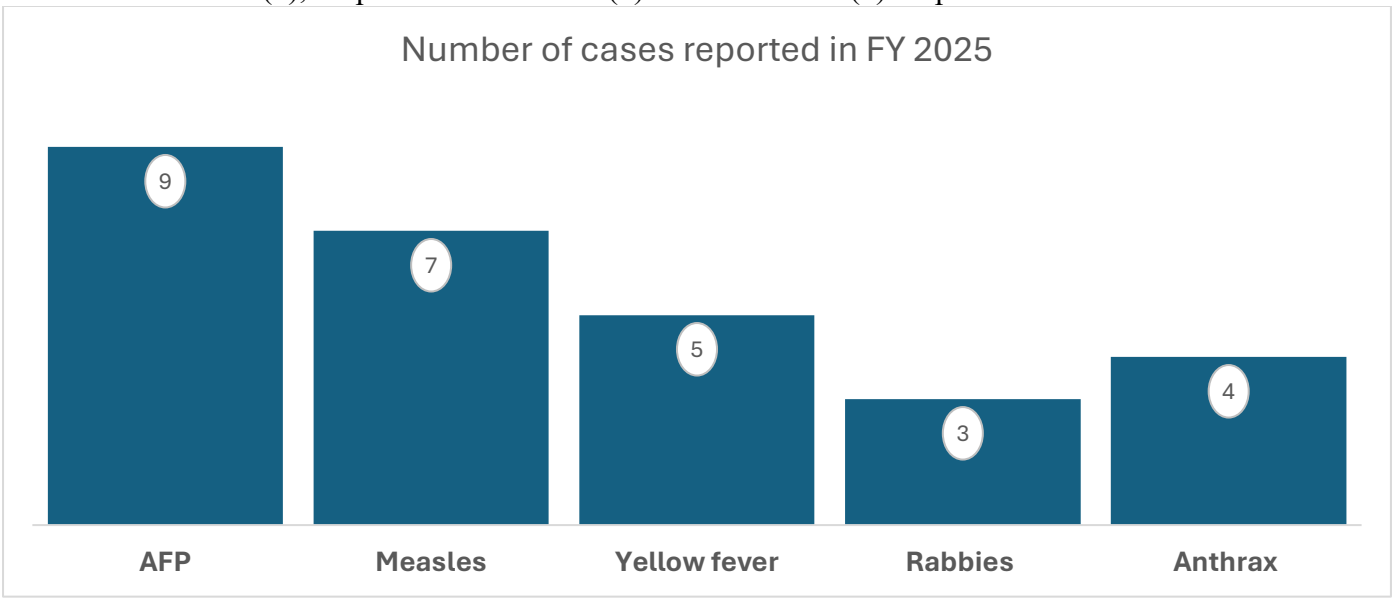
Vaccination Outreaches (PIRI) in Akobo West County, Jonglei State

<u>Objective 2. Enhance local outbreak readiness and rapid response capabilities for polio and other vaccine-preventable, endemic and emerging zoonotic infectious diseases.</u>

UNKEA supported the national campaign by participating in social mobilization in Nasir and Maiwut in which (HHPs) conducted the social mobilization during the polio campaign in support of SIAs, reaching out 1,455 household and 3,723 individuals aged 15 years and above were reached with messages

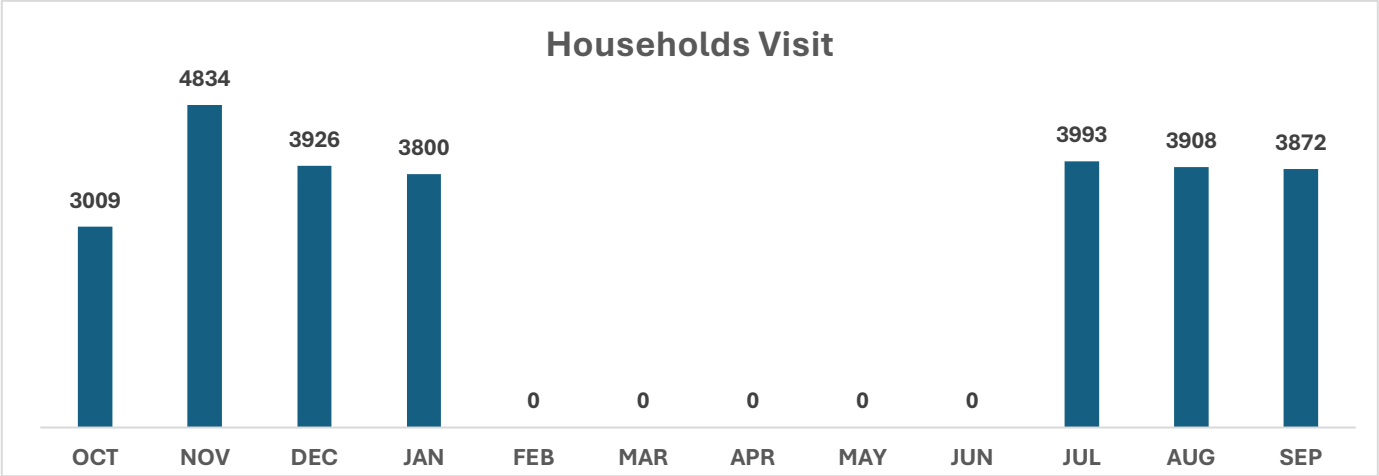


Activity 1: Through the network of community-based surveillance, we managed to detect, and report integrated diseases for example, suspected Acute Flaccid Paralysis cases (9), Measles cases (7), Suspected Yellow Fever cases (5), suspected rabies cases (3) in humana and (4) suspected Anthrax cases.



Objective 3 Detect and report cases of acute flaccid paralysis (the signal condition for polio) and other vaccine-preventable, zoonotic, and emerging infectious diseases.

Activity 1: The activity was carried out through the community-based network of Community Key Informants (CKIs), and Home Health Promoters (HHPs) during the household visits to identify the unvaccinated mothers, and children, especially the pregnant mothers, to visit the nearby health facilities and get vaccinated. The overall achievement of 5,822 meetings and reaching out to 33,803 mothers.



Activity 2: Risk prevention and community Awareness. Health education in social places. Carried out community in households' and public social places by the HHPs, as a routine to HHPs on weekly basis, the HHPs visited social places for example marketplaces, boreholes, and community gatherings, like weddings, church services and meetings to disseminate the health messages of integrated diseases, sanitation and animal health. It is important to note that the project suffered from setbacks, which made it very difficult to fully achieve its intended objective.

Social mobilization in Longechuk County, Upper Nile State to promote health behaviors, and encourage collective actions for improved health outcomes

7.1.7 Alliance (Health)

The project is supported by Resolve to Save Lives (RTSL) through the 7-1-7 Alliance, aimed to strengthening epidemic preparedness and response in the Republic of South Sudan by rolling out the 7-1-7 target framework. This framework promotes the detection of suspected disease outbreaks within seven days, reporting to public health authorities within one day, and completing effective response actions within another seven days. The initiative is a collaboration between the National Ministry of Health, various One Health line ministries, and implementing partner UNKEA. The project involves a phased approach, starting with national-level implementation and cascading down to the sub-national level, including states such as Warrap and Northern Bahr el Ghazal. The core of the project is to build the capacity of healthcare professionals, leadership, and technical teams on the 7-1-7 concept and its integration into their routine workflow. This is expected to improve the timeliness of responses to public health emergencies and build a more resilient health system in South Sudan.

Stakeholders Workshop (Leadership of Line Ministries)

Training of Core staff on 7-1-7 implementation

Achievements

Increased Awareness and Knowledge: Participants in the various workshops showed a significant improvement in their understanding of the 7-1-7 target, as evidenced by pre- and post-test results. For instance, in one training course, the average score increased from 56.9% to 70.7%.

Key challenges

Weather changes such as heavy rainfall and floods affected activities implementation especially practical training on brick making and sports and routine vaccinations. Brick making training sites were submerged by floods and 50% of the bricks produced during training were destroyed. The vaccinator had to walk through floods to reach hard-to-access areas with vaccines.

Delays in conducting brick making due to many layers of approval from the County authorities. Other delays were caused by the security situation in Upper Nile, leading to movement restrictions. Unfriendly directives from Ministry of land and housing such as land/site allocation for brick making, purchase of soil and transportation to the training sites significantly contributed to the delays in brick making training for youth.

Localization efforts were significantly constrained by reduced funding. Many national organizations such as UNKEA are heavily dependent on sub-grants from UN agencies and INGOs, and funding cuts limit their ability to sustain operations and scale responses. The humanitarian reset which has seen massive de-

prioritization of EIE and underfunding also risked weakening sub-national coordination platforms where local actors are most active, further constraining meaningful localization. Localization progress was also undermined by limited funding and reduced support to national partners.
Continued funding reductions significantly constrained EiE programming, with CBPF allocations declining compared to previous years (In 2024, EIE was funded 1.2 million dollars under SSHF whereas in 2025 it received approximately 800,000 dollars only).
The humanitarian reset further heightened the risk of education being marginalized, particularly as coordination structures were reviewed for potential deactivation or merging.
Conflict and insecurity affected service delivery and limited free access for humanitarian workers to all implementation areas

Lack of medical equipment (microscope, weighing scale, BP machine, patients' beds etc) and functional cold chain equipment in 8 health facilities following the looting and vandalization during the conflict

Inadequate infrastructure to support provision of BEMONC services, especially Jikmir PHCC that operates from a displaced location with limited structures.

Limited resources more especially inadequate fuel for patient's referral and provision of support supervision to health facilities and BHI sites

Low educational level of teachers hindered learning during the training and applying the knowledge received at the training

Lack of commitment by the communities that affected sustainability and taking over the ownership of the project in future

Poverty and economic deterioration negatively contributed to sending children to school, leading the children to join street for survival.

Charging children to pay registration at school had kept some children out of school

Lack of school feeding programme remains a challenge for school children, hence leaving early, some drop out, and majority stay with hunger during the school days.

Key lessons learned

- The experience of 2025 highlighted the importance of prioritization in constrained environments, especially where massive funding cuts are still ongoing.
- Strong inter-cluster engagement to protect education space, and early integration of education into emergency response planning.
- Government engagement and inter-sectoral collaboration proved essential in sustaining EiE gains amid shrinking humanitarian capacity.
- The year also reinforced the need for stronger links between humanitarian and development actors to support continuity and sustainability.
- Need for increased inclusion of local actors (50%) in coordination forum leadership for sustainability despite funding cuts.

Recommendations

- The Education Cluster recommends sustained government engagement to strengthen MoGEI leadership on EiE.
- Continued advocacy to recognize education as a lifesaving and resilience-building intervention, and stronger humanitarian–development linkages.
- Predictable, multi-year financing is essential to stabilize EiE programming, support localization, and protect gains in access and quality of education during emergencies.
- Strengthen engagement meetings with key stakeholders (County commissioner, RRC, local leaders) to address the issue of restricted staff movement and gain community support
- UNICEF/MOH to consider replacement of vandalized cold chain and medical equipment.
- Advocate for timely payment of incentives to encourage facility staff and boost performance
- Active community engagement in putting up strong dikes especially before onset of rains to prevent facility destruction resulting from flooding.
- Assessment of leaking facility roof and prioritizing renovation work when funds become available.
- Re-installation of destroyed and looted power system appliance by UNICEF/MOH when situation fully normalizes.
- Coordination and collaboration with other agencies (UNFPA, WHO,) for the provision of missing supplies like uterotonics

Conclusion

In 2025, UNKEA expanded its coverage to over 100,000 beneficiaries. This included IDPs, returnees and host communities with specific focus on children, pregnant/lactating mothers, GBV survivors, youth, persons with disabilities among others with special needs. This milestone reflects our deep passions, dedications, and the significant journey taken to achieve our mission in helping our communities achieve sustainable and resilient livelihoods. Despite of the shrinking funding envelopes from international donor communities and the competitive resource mobilization landscape, our dedication to transparency, accountability and results helped us move towards achieving our mission. Together with our stakeholders, partners and donors, we have built a stronger foundation in serving humanity, but this has not yet concluded. With your continued support, we are confident that the organization will continue to expand its geographical coverage and create significant impact on the lives of people in South Sudan

Our Partners in 2025