

The IRC in South Sudan

The International Rescue Committee (IRC) has been one of the largest providers of aid, delivering emergency relief and post-conflict assistance since 1989. Today, the IRC provides services for more than 1,000,000 people across the country, delivering lifesaving care and life-changing assistance, and economic well-being, targeting women, children, and other vulnerable groups. The IRC is operating in ten field sites, covering four of



the ten states. With five offices in Unity State (Bentiu, Koch, Mayendit, Ganyiel and Nyal), two offices in Northern Bahr el Ghazal- NBeG (Aweil East and South), one in the Ruweng Administrative Area (Jamjang) covering operations in the Ajuong Thok and Pamir Refugee Camps, one office in Rumbek town covering the whole of Lakes, and one field office in Central Equatoria (Juba)-urban programming together with the Country office.

IRC South Sudan Child Protection (CP) Program:

The IRC South Sudan Child Protection Program has been providing child protection services to the most vulnerable children and adolescents affected by the conflict and other crisis in Unity State (Panyijiar, Koch, Mayendit, and Pariang Counties), Northern Bahr el Ghazal State (Aweil East and Aweil South Counties) and Central Equatoria (Don Bosco IDP Camp, Juba). The program aims to protect children from abuse, exploitation, neglect, and violence in their homes, schools, and communities and to support those already harmed to heal, recover, and feel safe again. To ensure that child protection gaps are addressed comprehensively, the IRC collaborates with a broad range of stakeholders, including children, their families, community-based protection structures, national and state level inter-agency coordination mechanisms, and local government structures.

IRC's Child Protection Program focuses on prevention and response through static and mobile programming approach focusing on five CP area of interventions: (1) [Child Level Intervention](#), (2) [Family Level Intervention](#), (3) [School Level Intervention](#), (4) [Group Activities for Child Wellbeing](#), (5) [Community Level Intervention](#)

1. Child Level Intervention: Child Protection Case Management including FTR: The IRC South Sudan provides this service in emergency settings to address an individual child's (and their family's) protection needs in an appropriate, systematic and timely manner, through direct support by trained and supervised caseworkers and/or referrals to other services like health and livelihood. The CP Program offers CP case management services, including FTR to unaccompanied and separated children, and other

South Sudan Country Context

Humanitarian situations in South Sudan have worsened despite the country's having been independent for ten years and the revitalized peace agreement having been in place for four years. According to the findings from the humanitarian need overview, 9.4 million people are estimated to be in need of humanitarian assistance, of whom 2.96 million are children and adolescents, including those with disabilities, are at heightened risk of violence, abuse, and exploitation and need critical child protection services in 2023. This increase is largely driven by compounded shocks triggered by continued conflict, the COVID-19 pandemic, protracted displacement, widespread flooding, deepening food insecurity, inflation, high food prices, and lack of access to basic services, which continue to significantly affect the physical, mental, and social well-being of children, adolescents, and caregivers.

at-risk children eligible for case management in line with the national and global relevant standards including the South Sudan National Case Management SOP. The IRC supported **2,698 children (1265 girls, 1,433 boys)** in comprehensive case management service including children unaccompanied and separated, CAAFAG, children who have been experienced and/or at risk of sexual abuse, physical and emotional abuse, neglect, and child labour since 2019. An emergency fund also exists to support particularly vulnerable and urgent cases in need of non-food items, transportation to access medical services and payment of vital services. In addition, IRC CP reunified 99 UASC children with their parents or customary caregivers in coordination with the national UASC Working Group.



Figure 1: Reunification of separated children with their parents

2. Family Level Intervention: the IRC works to create protective environments in the home and community by adopting family and community-based approaches to identify and reduce risks to children's safety and promote opportunities for children's development. The IRC SS provides two components of family-oriented programs including parenting intervention and Brighter Future Model.

Parenting Interventions: Aims to reduce violence against children within the home by providing parents and caregivers with support to understand child development, stress management and using positive, non-violent discipline forms, the IRC SS provides the **Families make the Difference** curriculum training and **6127 (3977 female)** parents and caregivers benefited over since 2019.

Brighter Future: an integrated child protection and nutrition intervention that aims to improve developmental, behavioral and safety outcomes of children at-risk of malnutrition or children receiving treatment for acute malnutrition at the Stabilization Centers (SC) and Outpatient Therapeutic program (OTP).

3. School Level Intervention

The IRC SS supports school safety programs that aim to reduce violence in and around schools by reducing school-related safety factors, introducing and supporting positive behavior management practices in schools, and reducing physical and emotional abuse. IRC educates teachers and PTA/SMC members about child safety, psychosocial support in schools, and psychosocial first aid (PFA). Additionally, assist schools in developing child safeguarding policies and providing training on them. Child protection help desk and support for school clubs, as well as connecting students with CP service providers when protection concerns are identified.

4. Group Activities for Child Wellbeing

The IRC SS works to create protective environments for children, where they can interact with other children, engage in activities that are both physically and emotionally stimulating. A total of **64,114 (28,893 girls, 35,221 boys) children** received support in SHLS, SAFE and Group PSS since 2019.

Mental Health and Psychosocial Support (MHPSS): IRC's Child Protection Program seeks to strengthen families and communities to help prevent child protection violations and respond to them when they occur. While some of the following explained approaches may be classified as solely "preventive", others may be classified as "preventive and responsive when violence occurs".

Safe Healing and Learning Spaces (SHLS):

The SHLS is a secure, caring and predictable place where children and adolescents living in conflict and crisis settings can learn, develop and be protected. The IRC SS Program provides the social-emotional learning (SEL), Math and Reading skills to children 6-11 years using the trained community facilitators in semi-permanent and permanent structures.

Supporting Adolescents and their Families in Emergencies (SAFE): The IRC SS will be scaling up its adolescents programming model with the implementation of the SAFE which is a protection and

psychosocial support program model that aims to strengthen the capacity of the capacity of front-line actors so that adolescent girls and boys (ages 10-19) are safer, more supported, and equipped with positive coping strategies in acute emergencies.

5. Community Level Intervention:

Community Based Child Protection: supports the building of local capacities and solutions with community actors who are motivated to support, activate and expand the capacities of community members to prevent and respond to violence against children in their community. IRC SS CP Program support the Community Based Child Protection Committees (CBCPC) to facilitate community sensitization and implement early identification and referral for children at risk of or experiencing harm. Members of the committees are trusted individuals selected by the community to serve as focal persons on matters concerning children's safety and linkages to available services.

Community Awareness: The IRC SS provides that key child protection messages, available CP services, essential information related to health, outbreak prevention and other relevant emergency protocols are delivered in a way that is culturally appropriate, sensitive, in relevant languages and through communication channels that are preferred and accessible by affected populations.

IRC South Sudan Program Priorities:

- Improve the quality of CP Case Management Service delivery through continuous training and coaching of caseworkers.
- Contextualization of social-emotional learning curriculum, training of community facilitators and scaling up SEL interventions in conflict and flood affecting locations.
- Scaling up the positive parenting skills to prevent and respond to violence against children.
- Scaling up group activities for the wellbeing of children and adolescents through IRC's **SAFE** curriculum
- Scaling up brighter future intervention to support caregivers of children with Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) and their children at risk or experiencing child protection concerns.
- With available funding, launch the Now I am Stronger curriculum for adolescent's boys aged 12 to 17 who show increased signs of psychological distress to support positive coping and resilience capacities.

IRC's child protection programs at the global level aim to ensure that children are safe, can exercise their rights and are cared for, ideally in a family or family-like environment promoting their physical, social, emotional, cognitive and economic well-being. For more information on IRC's global child protection work, visit <https://childprotectionpractitioners.org>

Donors:



USAID
DU PEUPLE AMÉRICAIN



Sweden
Sverige



SSH F South Sudan
Humanitarian
Fund

BHA, PRM, SIDA, GFFO, and SSHF