



**South Sudan  
Red Cross**



**Strategic Plan 2022 - 2026**

## Fundamental Principles of the Red Cross and Red Crescent Movement

### 1. Humanity

The international Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life health and ensure respect of the human being. It promotes mutual understanding, friendship, co-operation and lasting peace amongst peoples.

### 2. Impartiality

It makes no discrimination as nationality, race, religious beliefs, class, or political opinions. It endvours to relieve the suffering of individual, being guided solely by their needs, and to give priority to the most urgent cases of distress.

### 3. Neutrality

In order to continue to enjoy the confidence of all, the movement may not take sides in hostilities or engage at any time in controversies of a political, racial religious or ideological nature.

### 4. Independence

The movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the movement.

### 5. Volunteer service

It is a voluntary relief movement not prompted in any manner by desire for gain.

### 6. Unity

There can be only one Red Cross or One Red Crescent Society in any one country it must be open to all. It must carry on its humanitarian work throughout its territory.

### 7. Universality

The international Red Cross and Red Crescent movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is world-wide.

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## List of Acronyms

<b>BHI</b>	Boma Health Initiative	<b>INGO</b>	International Non-Governmental Organization
<b>CBHFA</b>	Community Based Health and First Aid	<b>KAP</b>	Knowledge, Attitude, and Practices
<b>CBS</b>	Community Based Surveillance	<b>MCH</b>	Mother and Child Health
<b>CCA</b>	Climate Change Adaptation	<b>MNCH</b>	Maternal, Neonatal, and Child Health
<b>CEA</b>	Community Engagement and Accountability	<b>NDRT</b>	National Disaster Response Team
<b>CHAST</b>	Child Hygiene and Sanitation Transformation	<b>NDS</b>	South Sudan's National Development Strategy
<b>CLTS</b>	Community-Led Total Sanitation	<b>NFI</b>	Non-Food Item
<b>COD</b>	Council of Delegates	<b>NS</b>	National Society
<b>CVA</b>	Cash and Voucher Assistance	<b>NSD</b>	National Society Development
<b>DM</b>	Disaster Management	<b>OCHA</b>	UN Office for the Coordination of Humanitarian Affairs
<b>DRR</b>	Disaster Risk Reduction	<b>OSV</b>	Other Situations of Violence
<b>EAT</b>	Emergency Action Teams	<b>PGI</b>	Protection, Gender, and Inclusion
<b>EP&amp;R</b>	Emergency Preparedness and Response	<b>PHAST</b>	Participatory Hygiene and Sanitation Transformation
<b>EWS</b>	Early Warning System	<b>PMER</b>	Planning, Monitoring, Evaluation, and Reporting
<b>FA</b>	First Aid	<b>PNS</b>	Partner National Society
<b>HCiD</b>	Health Care in Danger	<b>PSEA</b>	Prevention of Sexual Exploitation and Abuse
<b>HD</b>	Humanitarian Diplomacy	<b>PSS</b>	Psychosocial Support
<b>HR</b>	Human Resources	<b>PWD</b>	Persons with Disabilities
<b>HQ</b>	Headquarters	<b>RCRC</b>	International Red Cross and Red Crescent Movement
<b>ICRC</b>	International Committee of the Red Cross	<b>RFL</b>	Restoring Family Links
<b>IDP</b>	Internally Displaced Person	<b>SDG</b>	Sustainable Development Goals
<b>IFRC</b>	International Federation of Red Cross and Red Crescent Societies	<b>SEA</b>	Sexual Exploitation and Abuse
<b>ICT</b>	Information and Communication Technology	<b>SGBV</b>	Sexual and Gender-Based Violence
<b>IGA</b>	Income Generating Activities	<b>SMCC</b>	Strengthen Movement Coordination and Cooperation
<b>IHL</b>	International Humanitarian Law	<b>SSRC</b>	South Sudan Red Cross
		<b>STI</b>	Sexual Transmitted Infections
		<b>HIV</b>	Human Immunodeficiency Virus
		<b>WASH</b>	Water Sanitation and Hygiene



## Foreword



On behalf of the South Sudan Red Cross (SSRC) Governance, I am pleased to celebrate with management the achievement of such a tremendous strategic document that will guide us in fulfilling our oversight role and support to management while delivering on the mandate of SSRC for the next five years. Furthermore, I appreciate the consultative process and participatory planning approach undertaken through the involvement of stakeholders at local, national, and international levels.

The approach creates a sense of ownership and hope for support towards the implementation of the strategy.

The board is committed to supporting the management to enhance localized resources mobilization to implement this strategy in partnership with all stakeholders successfully. We desire to see an institutional development to ensure a more robust National Society (NS) trusted and accountable with increasingly well-functioning and self-reliant structures throughout South Sudan.

That includes acknowledging the NS by partners and stakeholders including the public authorities through effective coordination, evidence-based communication, and advocacy efforts on behalf of vulnerable populations.

I thank the Secretary-General and his team for the tireless effort dedicated to developing this strategic plan 2022-2026. I thank all Movement Partners and stakeholders who are dedicated and will continue to support the work of SSRC with passion during this strategic period.

Thanks to my fellow members of the Governing Council, the branch governing boards, volunteers, and members for the support provided during the development of this Strategic Plan.

Therefore, this strategy has been reviewed and approved. We look forward to participating in the performance monitoring and inclusive stakeholder's effort towards attaining SSRC Mission; "Reduce suffering, build resilient communities, foster human dignity and social cohesion" including

the vision; "Healthy and resilient population of the most vulnerable affected by conflict, crises, and climate change."

**Joseph Dhuor Makuei**

President – SSRC



Members of SSRC Governing Council and Management



I am delighted to present South Sudan Red Cross society's third Strategic Plan 2022-2026 that builds on the ended 2018 -2021 strategy. This strategy considers the country's interconnected challenges and trends affecting beneficiaries and what they need. The strategy also determines the most effective and efficient ways and results possible to achieve the society's vision. It is an engaging framework for SSRC goals and expected accomplishments and indicators of achievement for each programme and enabling priorities contribution to respond in terms of triple nexus - humanitarian, development, and promoting peaceful co-existence in South Sudan.

The ended strategy, 2018-2021, focused on programming, collaboration, organizational development, and related enabling priorities, which served as a benchmark for measuring performance and holding the SSRC accountable. While SSRC's first strategic plan 2013 – 2017 focused on emergency response to meet the challenging humanitarian situation when the conflict broke out in the country on 15 December 2013.

As a new National Society (NS) established in 2011, the society prioritized developing systems, policies and building a solid network of volunteers, staff, and board at all levels. This marked the society's growth as the number of programs and projects increased while funding and staffing levels tripled.

SSRC strategic plan 2022 – 2026 is aligned with the International Federation of the Red Cross (IFRC) Strategy 2030, Africa Agenda for Renewal, the United Nations Sustainable Development Goals (SDG), and South Sudan National Development Strategy and Vision 2040.

Consequently, the strategy is preceded on three goals which seek for people to:

1. *Mitigate the effects of climate change and preserve the environment by performing risk reduction and preparedness initiatives and possess capacities to respond to disasters, conflicts, and other emergencies while ensuring food security and livelihood.*
2. *Live healthy lives with access to health care and WASH facilities and practice health promotion based on knowledge and changed attitudes.*
3. *People who are marginalized and vulnerable are included, protected, empowered, and actively engaged in their communities.*

I thank the Strategic Planning Steering Committee members, staff, volunteers, and stakeholders (Movement Partners and public authorities) for their commitment to the participatory planning process at the branch and national levels.

Special thanks go to the Movement Partners: IFRC, ICRC, Netherlands Red Cross, Swiss Red Cross, Swedish Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, Norwegian Red Cross, and Turkish Red Crescent for their significant financial and technical contributions towards the

development of SSRC Strategic plan 2022 – 2026.

Many thanks to SSRC Governance for their dedication and advice during the strategic planning and review process. Above all approval of this strategy will guide SSRC to realize its vision through partnership for a more robust national society endeavouring for healthy, resilient, empowered, and inclusive communities in South Sudan.

**John Lobor**

Secretary General – SSRC

## 1. Introduction

This is South Sudan Red Cross' (SSRC) third Strategic Plan. The Strategy draws on lessons learnt and recommendations from the first and second strategic periods covering 2013-2021, as well as assessment of SSRC's capacities, and South Sudan's current humanitarian context and perspectives to set the direction for SSRC for the period of 2022–2026.

The development of the Strategic Plan is a result of a participatory and inclusive process from community to national level. The process involved SSRC staff from HQ and all branches, volunteers, and SSRC governance. A review looking at recommendations and lessons learned of the 2018-2021 Strategic Plan has been carried out by the technical staff of SSRC and representatives of the PNSs, ICRC, and IFRC. Questionnaires have been shared with volunteers, staff, and governance from all SSRC branches. Workshops at the branch and national level were held. The latter with representatives

from HQ, branches, governance, PNSs, IFRC, ICRC, and line ministries. The Strategic Plan builds on an analysis of the existing and future needs in South Sudan with emphasis on the SSRC's auxiliary role in preventing and responding to the humanitarian and development challenges based on SSRC's strengths and competencies.

The new Strategic Plan 2022-2026 is also guided by South Sudan National Development Strategy 2018 – 2021 and Vision 2040, government policies, humanitarian and development priorities as outlined in the International Federation of Red Cross and Red Crescent Societies (IFRC) Strategy 2030 and International Red Cross and Red Crescent Movement (RCRC Movement) policies. SSRC aspires to contribute to the realization of the Humanitarian and Development Priorities of the Government of South Sudan, and the United Nations Sustainable Development Goals (SDG).

## 2. The South Sudan Red Cross

The South Sudan Red Cross (SSRC) was founded in 2011 and established by Parliament Act No 32 on the 9th of March 2012, recognized by the ICRC in June 2013, and admitted into the IFRC in November the same year.

Per Article 3 of the Red Cross Red Crescent Movement Statutes, National Societies are autonomous national organizations providing an indispensable framework for the activities of their voluntary members and their staff. They cooperate with the public authorities in the prevention of disease, the promotion of health, and the mitigation of human suffering by their own programmes in such fields as education, health, and social welfare, for the benefit of the community.

SSRC is governed by the Governing Council, led by the President, and currently has an estimated network of 17,467 volunteers (10,355 male and 7,112 female) and 4,234 registered members organized into 21 branches and 102 units.

As a volunteer and membership organization present in most of the country and encouraging diversity, and participation, SSRC has a unique

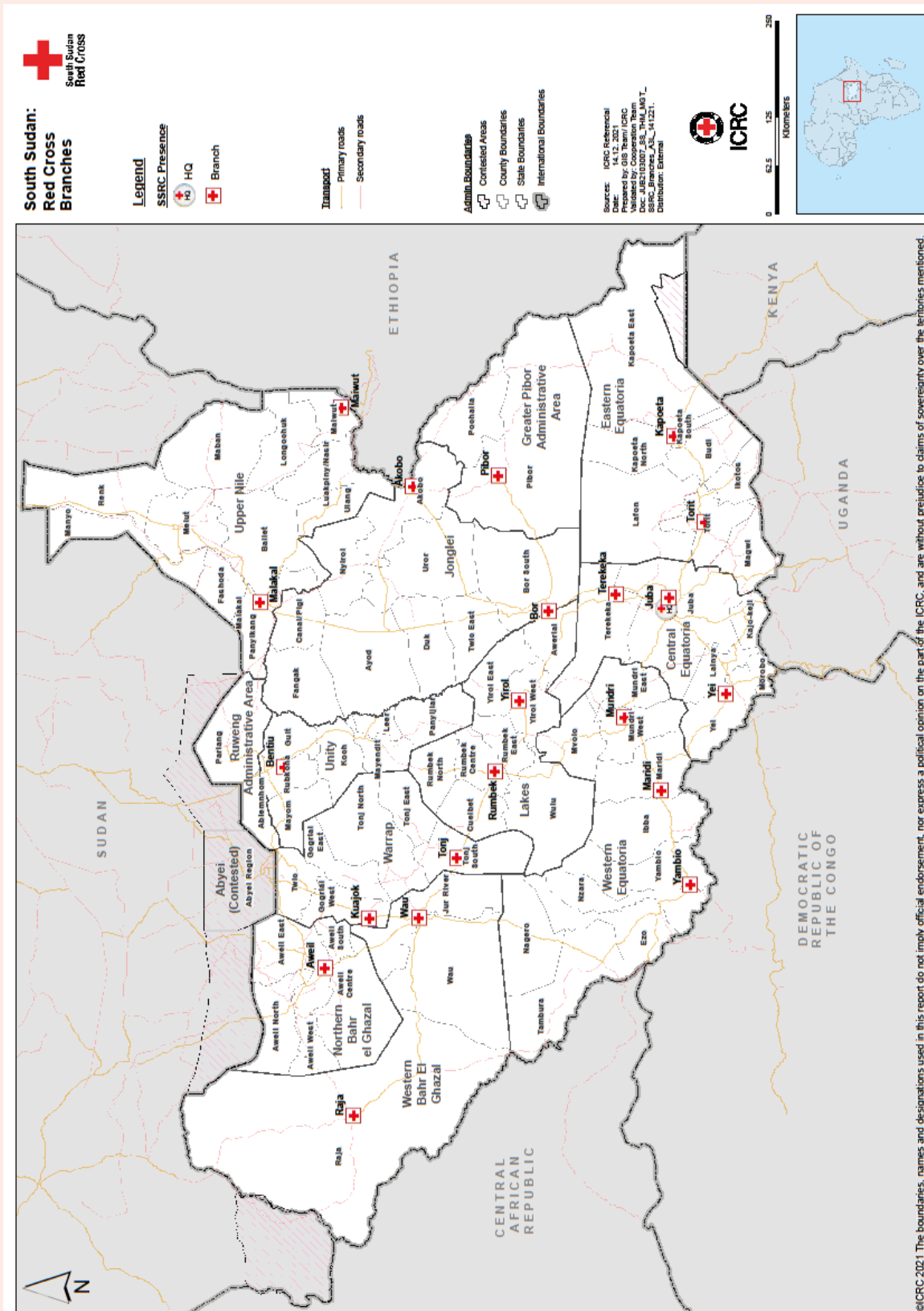
position being able at any time and with short notice to mobilize trained volunteers. As such, SSRC has an important advantage and is the largest humanitarian organization in South Sudan. Today (2021), SSRC covers most of the national territory and intends to be consistently delivering relevant countrywide services to vulnerable people through volunteers and staff, sustained for as long as needed before the strategic period ends in 2026.

The Headquarters is situated in Juba led by the Secretary General and employs 77 (59 male and 18 female) technical staff in the areas of intervention as well as support staff. The 21 branches (and unit) offices consist of 160 (137 male and 23 female) core staff and staff employed by ongoing projects.

SSRC is dedicated to the Grand Bargain and Localization of Aid commitments and plays an active part in the collaboration with other international and national actors in South Sudan. Since 2018, the SSRC is an observing member of the NGO Forum and technical SSRC staff participate regularly in Clusters for Protection, WASH, Health, and Disaster Management.



Map of South Sudan Showing SSRC 21 Branches



Programmes	Clusters / Working Groups
<b>Disaster Management</b>	<ul style="list-style-type: none"> <li>- Non-Food Items (NFI) and shelter Cluster</li> <li>- Cash Working Group</li> <li>- National technical working group on Early Warning systems</li> </ul>
<b>Health</b>	<ul style="list-style-type: none"> <li>- Health Cluster</li> <li>- Emergency Preparedness and Response (EP&amp;R)</li> <li>- Interagency Technical Working Group,</li> <li>- Nutrition Technical Working Group,</li> <li>- COVID-19 Technical Working Group</li> </ul>
<b>Protection</b>	<ul style="list-style-type: none"> <li>- Protection Cluster</li> <li>- Child Protection, Sexual Gender-based Violence</li> </ul>
<b>WASH</b>	<ul style="list-style-type: none"> <li>- WASH Cluster</li> <li>- Sanitation Technical Working Group</li> <li>- Menstrual Health Working Group</li> </ul>

Due to the importance of past interventions and gained experience, the SSRC was actively engaged in the development of South Sudan's Disaster Risk Management Framework, launched by the Ministry of Humanitarian Affairs and Disaster Management (MHADM). Furthermore, the SSRC has been an active player in the process of developing a National Disaster Response Law for South Sudan. SSRC is also a committed partner to the Boma Health Initiative (BHI) by the Ministry of Health. As an active member of several National Disaster Response Teams, SSRC is part of the immediate and coordinated response at any time in South Sudan. SSRC participates in OCHA Coordination Meetings.

### Red Cross Red Crescent Movement

SSRC is part of the International Red Cross and Red Crescent Movement

(RCRC Movement), which is the world's largest volunteer-based humanitarian network. The RCRC Movement comprises of the International Committee of the Red Cross (ICRC), the International Federation of Red Cross and Red Crescent Societies (IFRC), and 192 National Societies and is supported by more than 14 million volunteers worldwide.

The RCRC Movement has been preventing and alleviating human suffering, protecting lives and health and upholding human dignity especially during armed conflicts and other emergencies", for over 150 years.

All Movement components are working in close collaboration to contribute to the SSRC's overall strategic goals, direction, and program setting through strong Movement coordination and cooperation.

Each RCRC Movement component has its own legal identity and mandate, and they are all guided by the **Seven Fundamental Principles in all its work; Humanity, Impartiality, Neutrality, Independence, Voluntary Service, Unity, and Universality.**

Although the RCRC Movement is not itself an organization as such, every two years, the National Societies, the IFRC, and the ICRC meet in what is known as the Council of Delegates to discuss strategic issues of importance to the RCRC Movement. Every four years, the RCRC Movement meets with all States that are party to the Geneva Conventions in what is known as the International Conference of the Red Cross and Red Crescent to discuss humanitarian affairs.

The IFRC is the umbrella organization of the National Societies. In its Strategy 2030, the IFRC has set three strategic goals to be jointly achieved as Red Cross/ Red Crescent Movement and to guide the National Societies in their work:

1. People anticipate, respond to, and quickly recover from crisis
2. People lead safe, healthy, and dignified lives and have opportunities to thrive
3. People mobilize for inclusive and peaceful communities

The ICRC has worked in South Sudan since 1986. It responds to urgent, immediate humanitarian needs of communities affected by conflict and armed violence in South Sudan. The ICRC delivers its own programmes in complementarity with those of its primary partners in South Sudan the SSRC and in line with its mandate to ensure the protection of the civilian population affected by conflict; protection of health care workers, facilities, and equipment; improve the humane and dignified treatment of persons deprived of their freedom; and support the authorities to respond to the needs of the missing, the dead and their families as well as providing necessary support to the SSRC.

All Red Cross/ Red Crescent National Societies are committed to and have a responsibility to disseminate the principles of the International Humanitarian Law (IHL), known as the four Geneva Conventions and its three additional protocols, as well as consistently work to protect and uphold the correct use of the Red Cross Red Crescent emblems. The emblems of the Red Cross, Red Crescent and Red Crystal are internationally recognized, and their correct use is stipulated in and protected through the Geneva Conventions.

### 3. Strategic Direction 2022-2026

The SSRC Strategic Plan 2022-2026 puts forward a vision of **A healthy and resilient population of the most vulnerable affected by conflict, crises, and climate change** responding to the ever-present and growing humanitarian and development needs and social cohesion of the people of South Sudan.

The Strategic Plan provides a platform for the domestication of RCRC Movement resolutions and policies relevant for South Sudan and the international development agenda such as the IFRC Strategy 2030 and contributing to the Sustainable Development Goals (SDGs) among others in defining its priorities of the NS and builds on the lessons learnt from the first and second strategic periods covering 2013-2021 and the assessment of SSRC's capacities.

#### Key Lessons learned which have influenced the development of the Strategic Plan 2022-2026.

1. The strategic plan 2018-2021 was ambitious and well implemented, especially taking into consideration SSRC is still a young NS and the Covid-19 impacted significantly on operations in-country and globally in 2020 and

2021.

2. Effective measurement of progress and achievement of strategic plan requires the setting of realistic outcomes and indicators and that they are integrated into the ongoing and annual reporting to get a better understanding of progress and challenges.
3. To strengthen partnerships and attract new funding, there is a need to reflect national, regional, and global strategies to position and outline the contribution of SSRC to relevant agendas and challenges such as population Movements and the impact of climate change, Food Security and Youth Unemployment.
4. The Strategy should not build around departments – as the challenges are interconnected and should reflect the contextual challenges, the organogram should be adapted to the SSRCS strategic plan.
5. Capacity development of Staff, volunteers, and governance are key to delivering the strategic ambition of SSRC– focus on capacity development in various



areas worked well and should be further strengthened and emphasized across SSRC to ensure sustainability.

- More focus on Humanitarian Diplomacy in the sense of moving from “informing” to influencing”. E.g. Advocate for vulnerable people, influence policies and practices in a systematized and cross-cutting approach.

SSRC identifies and defines 5 context related challenges demonstrating the importance of intersectoral approaches and working in the spirit of the humanitarian, development, and peace triple nexus.

- Climate and Environmental Crisis
- Civil and intercommunal Conflict and Disasters
- Growing Gaps in Health and Well-Being
- Population Movements and Migration
- Social Inequality and Exclusion

To address these challenges, SSRC will be focusing on the 3 strategic goals with 4 programmatic priorities and 2 transformative goals with 4 enabling priorities to address the challenges and achieve its vision.

## The strategic alignment to global, regional, and National agenda

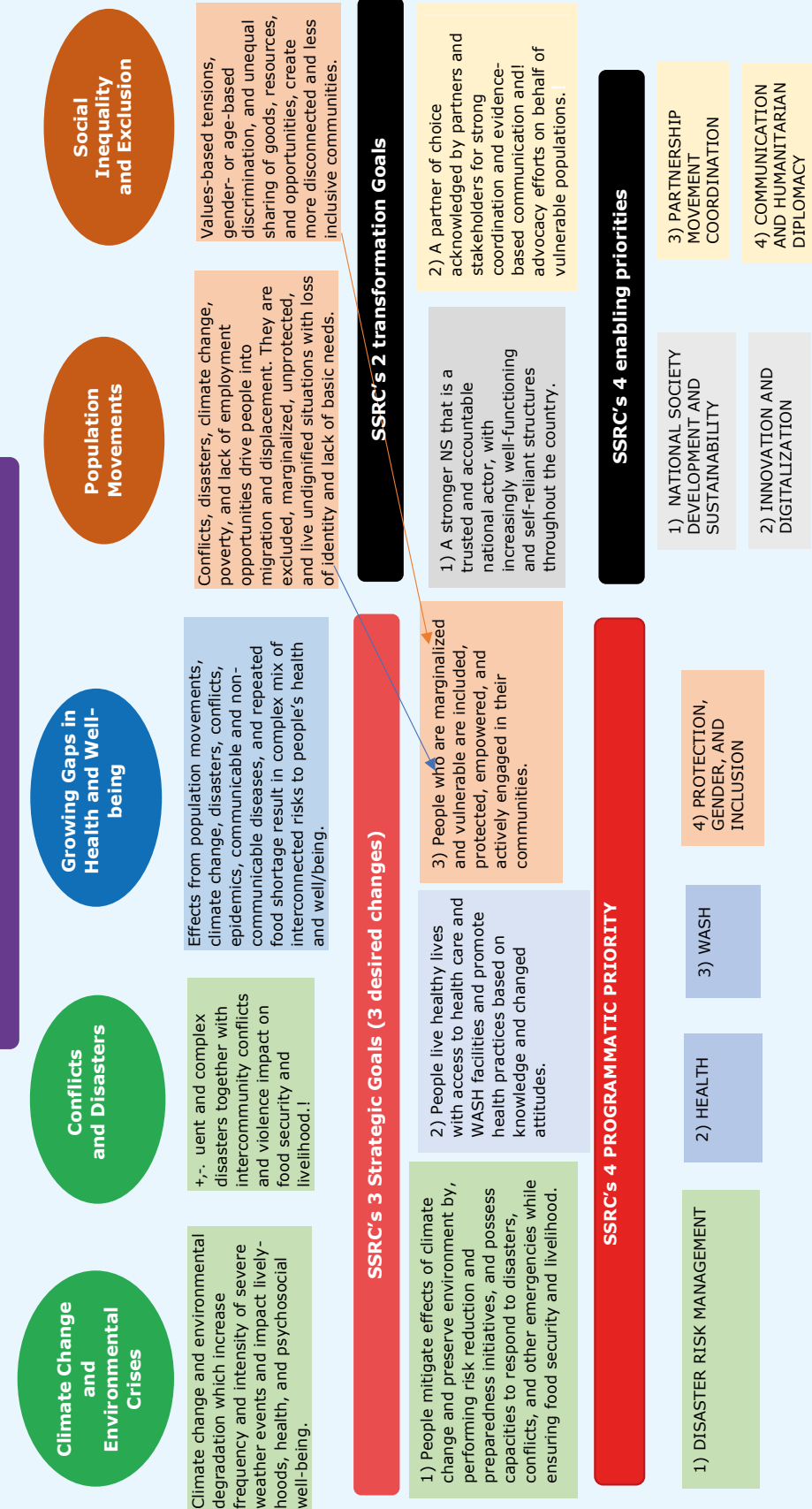
SSRC is inspired by the following strategies and reference documents:

- Through its activities, SSRC aspires to contribute towards the fulfilment of the:-



### STRATEGY OVERVIEW

#### CONTEXTUAL CHALLENGES IN SOUTH SUDAN



**SSRC Mission** : Reduce suffering, build resilient communities, foster human dignity, and social cohesion.

**SSRC Vision** : A healthy and resilient population of the most vulnerable affected by conflict, crises, and climate change.

2. Grand Bargain and Localization of Aid commitments
3. The strategy is aligned with IFRC's 2030 strategy and Africa Agenda for Renewal
4. The RCRC Movement resolution SMCC 2.0 initiative—Strengthening Movement Coordination and Cooperation
5. Furthermore, the strategic plan is in line with and aims at contributing to the South Sudan National Strategic Plan and South Sudan Vision 2040. Furthermore, and important to emphasize, SSRC's work aims to be complementary to the development initiatives carried out by the public authorities of South Sudan and, in designing its programs, SSRC aspires to align with and feed into relevant government strategies and policies. More specific, SSRC aligns with the objectives of South Sudan's National Development Strategy (NDS) which are to deliver basic services, consolidate peace and stabilize the economy, and strives to contribute within the following areas:
  - Provision of basic services within health, water and sanitation, and education with an emphasis on inclusion and quality.

- Resettlement and reintegration of displaced South Sudanese, returnees, and refugees as well as provision of reconstruction and recovery services to the general population countrywide.
- Secure access to adequate and nutritious food.

SSRC adheres to the NDS' attention on youth empowerment by addressing the unemployment challenge and consequently the priority of providing youth with skills and livelihood training.

Furthermore, SSRC will align with the NDS's objective of mainstreaming gender issues into all policy frameworks, programs, and strategic plans in public institutions and private sectors in South Sudan.

SSRC will work towards addressing the humanitarian challenges of South Sudan. In doing so, SSRC embarks on the IFRC vision that the National Societies' network brings people together for the good of humanity, driving the changes that will create a better future for all. The RCRC National Societies work should be locally defined, executed, and respond to the country's (South Sudan) relevant interconnected challenges

## 4. Vision, Mission, Strategic Goals 2022-2026, and Core Values



## 4.3 Strategic and Transformative Goals:

Specific for the time frame 2022–2026, SSRC will focus on **3 strategic goals and 2 transformative goals**.

### Strategic goals:

- 1). People mitigate the effects of climate change and preserve the environment by, performing risk reduction and preparedness initiatives, and possess capacities to respond to disasters, conflicts, and other emergencies while ensuring food security and livelihood.
- 2). People live healthy lives with access to health care and WASH facilities, and practice health promotion based on knowledge and changed attitudes.
- 3). People who are marginalized and vulnerable are included, protected, empowered, and actively engaged in their communities.

### Transformative goals:

1. A stronger, NS that is a trusted and accountable national actor, with increasingly well-functioning and self-reliant structures throughout the country.

2. A partner of choice acknowledged by partners and stakeholders for strong coordination and evidence-based communication and advocacy efforts on behalf of vulnerable populations.

## 4.4 Programmatic and Enabling priorities:

The present Strategy defines a set of programmatic and enabling priorities which will frame SSRC's work during 2022–2026.

### Programmatic Priorities:

- 1). Disaster Risk Management
- 2). Health
- 3). Water, Sanitation and Hygiene (WASH)
- 4). Protection, Gender, and Inclusion (PGI)

### Enabling Priorities:

1. National Society Development and Sustainability
2. Innovation and Digital Transformation
3. Partnership and Movement Coordination and Cooperation
4. Communication and Humanitarian Diplomacy

### SSRC Objectives:

The Society shall discharge its functions and duties to realize and achieve the following objectives as stipulated in South Sudan Red Cross Society Act, 2012, Act No. 32.

- a). Prevent and alleviate human suffering without any adverse discrimination based on nationality, race, ethnicity, gender, language, religious beliefs, social class, political opinions, or similar criteria;
- b). Provide humanitarian aid to civilian and military victims in times of armed conflicts, other situations of violence, natural disasters, and in peace time;
- c). Take part in national preparedness and plan for disaster and emergencies in support of the Government and its Institutions and act in all situations requiring a humanitarian response as a reference organization in the field of first aid and in providing support to communities in line with identified vulnerabilities.

- d). Manage an effective national network to trace and restore family links between people separated as a consequence of armed conflict, other situations of violence, natural or man-made disasters, or other situations requiring a humanitarian response;
- e). Provide community services to the general population of South Sudan through the programs of the Society in the fields of delivery of the basic social services
- f). Promote and disseminate international humanitarian law, the Society and Principles of the Movement and the spirit of volunteerism; and
- g). Assist the Government in the dissemination, promotion, and national implementation of international humanitarian law and the protection of the distinctive emblems of the Red Cross, Red Crescent, and Red Crystal following the Geneva Conventions and the additional Protocols



## 5. Contextual Challenges in South Sudan

The Republic of South Sudan became the world's newest nation and Africa's 54th country on July 9, 2011, following a peaceful secession from Sudan through a Referendum in January 2011. However, years of conflict have left South Sudan with limited investment in essential services (i.e., health, water, education), lack of opportunities for youth employment, and high levels of food insecurity holding people back from stability and sustainable development. Despite the signing of the "Revitalized Peace Agreement" in 2018, its implementation has neither addressed nor reduced the humanitarian needs of the South Sudanese people. 74% live in severe poverty and an estimated 80% live below the absolute poverty line<sup>1</sup>. 8.3 million people need humanitarian assistance<sup>2</sup>. South Sudan at the very bottom of the Human Development Index, ranking 185 out of 189 countries.

### 5.1 Climate Change and Environmental Crises

The climate change and environmental degradation are significant risks to humanity and decline of biodiversity. South Sudan ranks among the five countries in the world that are most vulnerable to the impact of climate change due to an increase

in the frequency, intensity, and unpredictability of severe climatic events marked by recurrent floods and erratic rainfall and drought. The floods events in 2019 and 2020 resulted in the displacement of 600,000 and 900,000 people respectively. From May - September 2021 more than 623,000 people were affected by flooding across eight of the country's 10 states continuing to cause large-scale displacement of people and cattle, damaging land under cultivation/crops, homes and property, infrastructure such as roads, health, and education facilities, and water sources. Such crises limit poor people's coping strategies and capacities to maintain sustainable livelihoods and resilience due to inadequate flood protection and irrigation infrastructure.

### 5.2 Civil and Intercommunal Conflict and Disaster

Multiple challenges such as conflict, Other Situations of Violence (OSV), insecurity in addition to recurrent natural shocks, lack of or deteriorated little infrastructure that exists, "The civil service is weak, severely limiting government's capacity to mobilize resources and deliver services to citizens", which keeps South Sudan among the poorest countries in the

world. The revenues are almost entirely based on oil and are heavily impacted by the dropping oil prices and low production levels due to insecurity.



Extreme levels of acute food insecurity persist across the country. As of September 2021, 7.24 million people are facing acute food insecurity (more than half of the population); of this 108,000 are threatened by famine, 2.4 million are in an emergency situation, and 4.6 million face crises, with 1.9 million acutely malnourished women and children<sup>3</sup>. Despite the country's vast potential for food production, the country covers one-third of its cereal needs through imports due to low level of food production related to population's limited access to agricultural land; food production capacities and cultural practices; displacement of people by conflict or floods and destruction of crops and

livestock by floods or drought. The economy also suffers from chronic inflation of the national currency.

### 5.3 Growing Gaps in Health and Well-being

People in South Sudan face interconnected risks to their health and well-being due to population movements, epidemics (i.e., COVID-19), non-communicable diseases and lack of functional and well-resourced local health services leaving more than half of the population without access to primary care. The health indicators of South Sudan are among the worst in the world. i.e. Life expectancy is 57,6 years, highest under-five mortality rates (98.6 deaths per 1,000 live births) in the world. Less than 20% of the children are fully vaccinated. Preventable communicable diseases and malnutrition are the most common causes of child morbidity and mortality. The maternal mortality is the highest in the world (estimated 1,150 per 100,000 live births)<sup>4</sup>. Only an estimated one-third of the South Sudanese population has access to basic health care services and 72% of the population lives outside of a 5 km radius of the nearest functional public health facility<sup>5</sup>.

<sup>4</sup> The Republic of South Sudan National Expanded Programme on Immunization Multi Measles Rubella Situational Analysis and 5 year plan 2021 to 2025

<sup>5</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/access\\_to\\_health\\_for\\_survivors\\_of\\_conflict-related\\_sexual\\_violence\\_in\\_south\\_sudan.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/access_to_health_for_survivors_of_conflict-related_sexual_violence_in_south_sudan.pdf)

<sup>6</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/south\\_sudan\\_2021\\_humanitarian\\_needs\\_overview.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/south_sudan_2021_humanitarian_needs_overview.pdf)

<sup>7</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/south\\_sudan\\_humanitarian\\_snapshot\\_august.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/south_sudan_humanitarian_snapshot_august.pdf)

<sup>1</sup> <https://reliefweb.int/sites/reliefweb.int/files/resources/South%20Sudan%20-%20Humanitarian%20needs%20overview%202020.pdf>

<sup>2</sup> <https://reliefweb.int/report/south-sudan/south-sudan-humanitarian-snapshot-may-2021>

<sup>3</sup> [https://fsccluster.org/sites/default/files/documents/wfp\\_situation\\_report\\_295\\_-\\_22\\_september\\_2021.pdf](https://fsccluster.org/sites/default/files/documents/wfp_situation_report_295_-_22_september_2021.pdf)

Water supply and sanitation are severely constrained. Only 41% of the population has an improved water source within 30 minutes round trip collection time, and only 11% of the population has access to a private improved sanitation facility. Open defecation is practiced by 75% of the population causing an increased probability of cholera outbreaks. Access to safe drinking water, sanitation, and good hygiene practices are fundamental to healthy living and development. Almost two-thirds of the population do not have access to clean water, and more than three-quarters of the population does not have access to basic sanitation and are at risk for waterborne diseases, epidemics, and other health hazards.

## 5.4 Population Movements and Migration

1.76 million people remain internally displaced and another 2.3 million South Sudanese are living as refugees, mainly in neighbouring countries, 63 percent of them are under the age of 18. There are approximately 306,000 refugees in South Sudan from Congo and Central African Republic and Sudan. Conflict, violence, and natural shocks force people to abandon farming, increasing food insecurity,

disruption of livelihoods, burden on host communities, and dependence on humanitarian assistance.

Displacements to urban settings cause a rise in urban poverty that is highly vulnerable to any adverse changes at local markets, with woman-headed households and those of disabled persons locally considered as particularly vulnerable. Secondly, the majority of those fleeing South Sudan are women and children.

The number of people on the move (IDPs, returnees, and refugees) keeps rising, notably due to conflict, poverty, and a lack of employment opportunities. Despite being rich in natural resources and having fertile lands, insecurity, lack of basic services, and unresolved housing, land and property issues prevent people from returning home in large numbers. South Sudan remains Africa's largest humanitarian and refugee crisis.

## 5.5 Social Inequality, and Exclusion

South Sudan is impacted by years of conflict, violence, and social exclusion, which are the cause of humanitarian challenges. Young people aged below 25 years make up 62.9% of the population.

High rates of unemployed young people (an estimated 18.8%<sup>8</sup>), and lack of access to education offer young people little hope and contribute to the high levels of violence, crime, and instability. Young people in are being disproportionately affected by the rapid and significant changes occurring in the world and around them: urbanisation, violence, substance abuse, high unemployment, sexual exploitation, and the global economic downturn,

with the increasing complexity and spread of health, environmental and social issues. Traditional gender roles and social norms deepen gender inequality, particularly around girls' and women education, restrictions of their mobility, limited decision-making power, and lack of access and control over resources. Gender-based violence affects 41% of South Sudanese people and 70% of people know someone who has been a victim<sup>9</sup>.

# 6. Programmatic Priorities, Objectives, Strategies, and Actions

## 6.1 Programmatic Priority 1. Disaster Risk Management

The goal of Disaster Risk Management is to ensure that **“People mitigate effects of climate change and preserve the environment through performing risk reduction and preparedness initiatives, and possess capacities to respond to disasters, conflicts, and other emergencies while ensuring food security and livelihood.”**

SSRC wants to contribute to disaster risk reduction and aims to be a leading emergency/crisis management actor to local, regional and international organizations. The strategic goal is in line with and aims at contributing to the **National Strategy for Disaster**

**Risk Management in South Sudan and Plan of Action (2019-2024)** by the Ministry of Humanitarian Affairs and Disaster Management by focusing on coherence and integration of **Disaster Risk Reduction (DRR), Climate Change Adaptation (CCA)** and mitigation, enhancing social cohesion and building resilience to disasters. The National Strategy for Disaster Risk Management emphasizes a special focus on the most vulnerable groups in the country, by promoting sustainable management of disaster risks in a way that contributes to the safety and wellbeing of the communities.

The fact that the country is increasingly affected and repeatedly hit by man-made and natural hazards related to

<sup>8</sup> [https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/-publ/documents/publication/wcms\\_737648.pdf](https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/-publ/documents/publication/wcms_737648.pdf)  
<sup>9</sup> Ministry of Humanitarian Affairs, South Sudan, Strategic plan

national and intercommunal conflict and violence, climate change (floods, dryspeltordrought)andenvironmental degradation crisis and interconnected effects such as population movement, food insecurity, and public health emergencies, such as epidemics and pandemics, emphasizes the need for:

- Strong collaboration with line ministries and other external stakeholders (INGOs, NNGOs and relevant UN agencies).
- Support the development of practical approaches and tools to contribute to the implementation of DRR & CAA and resilience-building programs and projects.
- Process of interdepartmental coordination in place.
- Strengthened preparedness and response capacity to ensure timely, efficient, integrated, and well-coordinated assistance to the affected communities.
- People's resilience increased with immediate recovery activities and long-term risk reduction and preparedness activities.
- Adequate humanitarian assistance to populations in movement in home and host communities.

- Climate change adaptation activities, including raising awareness and empowerment at a community level
- Increased food security and livelihood opportunities with special attention to youth. SSRC recognizes the key role that youth play in **tackling climate change** and works to support them to take up a leading role in advocating for actions towards and responding to climate change impact.

This complex situation calls for a holistic and multi-sectoral approach to humanitarian action, food security, and livelihoods to ensure the resilience of affected communities. SSRC will work across programmatic priorities (Health; WASH; Protection Gender and Inclusion) and with established branches, local Emergency Action Teams (EAT), and Community Disaster Reduction Teams (CDRT) across the country. Therefore, SSRC is well-placed to respond to disasters, as well as to work directly with communities to increase their resilience to common hazards and increase long-term and sustainable solutions, strengthening food security and employability opportunities for youth.

## Outcomes Programmatic Priority Disaster Risk Management

OUTCOMES	OUTCOME INDICATORS
1. SSRC with a strengthened preparedness and response capacity to shocks, including conflict, environmental, and climate change caused disasters.	<ul style="list-style-type: none"> <li>• # of branches with contingency plans</li> <li>• # of EHIs and food packages procured and pre-positioned to branches in disaster and conflict prone areas according to predicted needs.</li> <li>• # of high-risk communities with Early Warning Systems (EWS) established.</li> </ul>
2. Timely, efficient, integrated, and coordinated response.	<ul style="list-style-type: none"> <li>• # of integrated and coordinated response activities.</li> <li>• # of communities (counted in Bomas) in disaster-prone areas with preparedness plans.</li> <li>• # of HH reached with DRR, response and recovery program.</li> <li>• # of SSRC and volunteers participating in disaster response related training (EATs, NRDTs and other regional and global trainings)</li> </ul>
3. People affected by population movements provided with timely and adequate humanitarian assistance and protection in the home and host communities.	<ul style="list-style-type: none"> <li>• # of IDPs, returnees, and host communities assisted (CVA, non-food items and food, shelter, PSS, RLF).</li> <li>• # of IDP, returnees, and host communities taking part in livelihood and education programs.</li> </ul>
4. Communities in disaster-prone areas engaged in preserving the environment and adapting to climate change.	<ul style="list-style-type: none"> <li>• # of communities adopting climate-smart solutions (active in actions for preserving climate and environment).</li> <li>• # of youth and school clubs engaged in climate and environmentally friendly actions.</li> </ul>
5. Increased food security and livelihood opportunities for communities, in particular, youth.	<ul style="list-style-type: none"> <li>• # of communities taking part in actions for improving food security and livelihood.</li> <li>• # of youth and women engaged in livelihood initiatives (gardening, agriculture, food processing, and storage and marketing).</li> </ul>



## 6.2 Programmatic Priority 2 and 3 - Health and WASH

The programmatic priority 2 and 3, Health and WASH will strive to achieve strategic goal 2. to ensure that

**"People live healthy lives with access to health care and WASH facilities, and practice health promotion based on knowledge and changed attitudes".** To achieve this, SSRC will pursue improved health-seeking behaviours, prevention, and control of communicable diseases, and increased access to health and WASH service delivery to the affected population in South Sudan.

Thus, SSRC reaffirms the commitment to improve the health of the most vulnerable through Community-Based Health Services (CBHS) delivery and health system strengthening and WASH Initiatives. SSRC's health activities are guided by the **SSRC's Health Strategy from 2017** and are supporting the Boma Health Initiative (BHI), and the Ministry of Health's work towards strengthening community health structures in South Sudan. Concretely, SSRC contributes to BHI's thematic areas of intervention which are child health, safe motherhood, family planning, gender-based violence, communicable diseases, and first aid. This is done as suggested by the BHI by strengthening community structures that facilitate effective contact with communities

at the household level to promote improved health-seeking behaviour. Furthermore, SSRC adheres to the high importance that the BHI puts on statistics for documentation and as a tool for targeted planning and response.

SSRC will furthermore use the Community-Based Health and First Aid (CBHFA) approach to help build awareness on how to prevent the most common communicable diseases such as diarrhoea and malaria. SSRC also has extensive experience in responding to epidemics, such as cholera outbreaks, measles, Rift Valley Fever, Ebola, and Covid-19.



SSRC staff explains to ICRC Director General, Robert M. & SSRC President Joseph D. the process involved on the facemask production

Maternal, New-born, and Child Health (MNCH) is another area that needs strengthening in South Sudan, and SSRC will continue to implement activities aimed at building awareness around safe motherhood and strengthening MNCH systems and practices in South Sudan.

With protracted incidences of conflict, violence, pandemics, and accidents, readily available First Aid (FA) services will save lives. First Aid has been one of SSRC's flagship activities since the inception of the National Society, and specially trained Emergency Action Teams (EAT) will continue to operate across the country to provide FA in the communities, apart from the SSRC volunteers that also provide FA services in their communities and public events.

Recruitment of voluntary non-remunerated blood donors will continue as one of SSRC's important tasks.

SSRC's WASH activities are guided by the **SSRC's Water, Sanitation and Hygiene Strategy from 2014**, based on long-term experience and capacity in community-based implementation of WASH programs nationwide. This is intended to reduce incidences of water-borne diseases in targeted communities. SSRC WASH programs combine hardware and software components, which involves the construction and rehabilitation of water and sanitation facilities, coupled with community capacity building for sustainable maintenance of the facilities and the promotion of good hygiene practices through Participatory Hygiene and Sanitation Transformation (PHAST), Community-Led Total Sanitation (CLTS), and Children Hygiene Sanitation Training (CHAST) methodologies

to communities. Furthermore, the WASH program shall ensure access to dignified and safe sanitation facilities, provision of menstrual health kits to women and girls to enable them to manage their menstrual periods at schools to improve their attendance and ultimately their performance.

Another area of focus shall be to provide water for non-potable means such as kitchen gardening and small-scale irrigation systems to improve food production (see chapter 6.1). Finally, efforts shall be made to improve the WASH function in disaster management through prepositioning of WASH Response kits, training volunteers, simulation exercises, and refreshing the existing WASH NDRT for an effective response during emergencies/Disasters (see under 6.1).

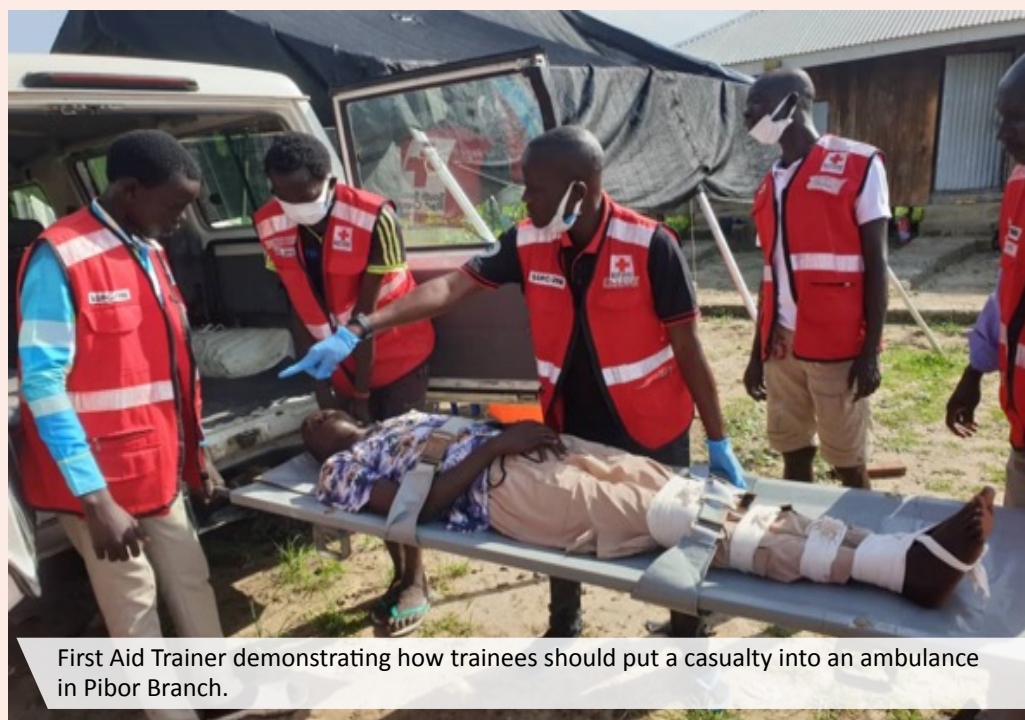
**A strong emphasis on voluntary services** will be promoted and focus will be on:

- Improve the access to sustainable, affordable, appropriate, and quality health, water, and sanitation services.
- Support for curative outreach campaigns (for example cataract, cleft lips, fistula) and rehabilitation of health facilities.
- Provision of health and WASH services in emergency situations, including epidemics/pandemics (cholera, Covid-19).
- Sensitization, dissemination, and demonstration of knowledge

and practices that constitute good health and hygiene practices.

- Community-Based Health Services (CBH) in support of the BHI: Improvement of Maternal, New-born and Child Health (MNCH), Sexual and Reproductive Health Rights (SRHR), nutritional support and support to immunization and any other health campaigns.

- Formal inclusion of SSRC in the national epidemic and pandemic preparedness and active participation in thematic fora.
- Prevention and control of non-communicable and communicable diseases.
- First Aid and road safety.
- Support menstrual health management services in schools and communities.
- Recruitment of voluntary non-remunerated blood donors.



First Aid Trainer demonstrating how trainees should put a casualty into an ambulance in Pibor Branch.

In the coming 5 years, the SSRC will explore the possibilities of strengthening the curative part of its health interventions.

## Outcomes Programmatic Priority 2: Health

OUTCOMES	OUTCOME INDICATORS
<b>1. Access</b> improved to sustainable, affordable, appropriate, and quality health services.	<ul style="list-style-type: none"> <li>• % of functional sexual, reproductive, maternal, neonatal, child, and adolescent/youth-friendly health facilities increased (e.g. equipment, supplies and capacity building of health staff, salary payment of key staff).</li> <li>• # of health outreach actions supported.</li> <li>• Improved and sustained engagement of SSRC in the dialogue with relevant Ministries and local authorities as appropriate.</li> </ul>
<b>2. The Health and dignity of communities in emergencies</b> and epidemic/pandemic crisis are maintained.	<ul style="list-style-type: none"> <li>• # of people directly affected by emergencies received timely health care.</li> <li>• % of community members who know key practices to prevent epidemic disease spread.</li> <li>• # of SSRS volunteers involved in epidemic response service.</li> <li>• % decrease in the incidence of selected communicable diseases in targeted communities.</li> <li>• SSRC Volunteers involved in CBS service and detection and response to infectious disease outbreaks (Protocols with Authorities).</li> <li>• # of outbreak/epidemic responded and prevented from the widespread response.</li> </ul>



3. Disease <b>preventing and health-seeking</b> behaviors among target groups are increased.	<ul style="list-style-type: none"> <li>• % increase of antenatal Care and Expanded Programs on immunization (EPI).</li> <li>• % decrease in incidences of non-communicable diseases.</li> <li>• % increase of people opting for and seeking conventional health care service when ill.</li> <li>• # SSRC volunteers mobilizing for MCH, vaccination campaigns, SRHR, STI, HIV/ AIDS.</li> </ul>
4. Quality <b>First Aid</b> (FA) education and services delivery increased to a diversified range of people, from vulnerable communities to private and public sector institutions.	<ul style="list-style-type: none"> <li>• # of people reached with FA services.</li> <li>• # of awareness sessions conducted on road safety.</li> <li>• Set-up for commercial FA in place and promoted.</li> </ul>
5. Voluntary <b>blood donation</b> increased.	<ul style="list-style-type: none"> <li># of blood units collected through Red Cross led activities.</li> <li># of voluntary and regular blood donors recruited.</li> </ul>

### Outcomes Programmatic Priority 3: WASH

OUTCOMES	OUTCOME INDICATORS
1. Access to safe and affordable water in the target communities and institutions increased.	<ul style="list-style-type: none"> <li>• # of people provided with safe drinking water.</li> <li>• % decrease in cases of waterborne/ water-related diseases.</li> </ul>
2. Access to improved sanitation facilities in the target communities and institutions increased.	<ul style="list-style-type: none"> <li>• # of people of targeted communities and institutions having access to improved, safe, and dignified sanitation facilities.</li> <li>• # of people of targeted communities and institutions using the available improved, safe and dignified sanitation facilities.</li> </ul>

3. Adoption of improved hygienic practices increased among communities and schools.	<ul style="list-style-type: none"> <li>• # of people adopting improved hygiene practices.</li> <li>• # of girls/women supported with menstrual hygiene kits.</li> </ul>
4. WASH capacity improved in disaster and emergencies in branches.	<ul style="list-style-type: none"> <li>• # of branches able to respond timely with WASH assistance to emergencies and disasters.</li> </ul>



### 6.3 Programmatic Priority 4: Protection, Gender, and Inclusion (PGI)

**Strategic Goal 3. People who are marginalized and vulnerable are included, protected, empowered, and actively engaged in their communities.**

SSRC affirms its commitment to the Minimum Protection Approach as

a core aspect of the Red Cross' role in addressing protection needs, respecting the principle of doing no harm, and referring to protection actors that fall outside its mandate. To increase a sense of safety, connectedness, and social cohesion, there is a need for SSRC to ensure that people who are marginalised and at risk, IDPs, refugees, and returnees are protected, and treated humanely and with dignity. The well-being of all people



both in-home and host communities is necessary to essential for integration and cohesion. This includes the aspects of gender and inclusion in all kinds of responses and activities and at any time. i.e. Value-based local tensions, gender- or age-based discrimination, and unequal sharing of goods, resources, and opportunities create (more) disconnected and less inclusive communities.

Consequently, SSRC will explore opportunities to support this groups of people through:

- Humanitarian assistance to populations at risk and in movement and need essential items such as food and shelter provided (see under programmatic priority 1).
- Referral of populations at risk and in the movement for serious health cases (medical care, physical and mental health).
- Protection, PSS, and RFL services focused on people at risk, refugees, IDPs, and returnees.
- Refugees, IDPs, and returnees are informed of their rights and aid services they are entitled to.
- Sensitizing sessions to reduce the stigmatization of refugees, IDPs, returnees, and host communities.
- Initiatives promoting inclusion and social cohesion and between IDPs/returnees and host communities.
- IGA and education support to

people at risk, IDPs, refugees, returnees, and host communities.

In South Sudan, young people aged below 25 years make up 62.9% of the population and the country has a high rate of unemployed young people. It is recognized that investing in youth and increased inclusion of women are means of changing people's attitudes to more cohesive and resilient communities. SSRC will focus on initiatives, such as life skills and livelihood training, that are **creating equal opportunities for youth** (girls, boys) women and men, and people at risk to have a meaningful life and hence contribute to an inclusive and peaceful society.

To SSRC, **Protection** should be understood as an umbrella term encompassing all activities aimed at fostering a culture of non-violence and peace through promoting social cohesion, community engagement, and psychosocial well-being and building on the principle of DO NO HARM.

SSRC will scale up the protection work through activities that aim to enhance the resilience of individuals and communities by reducing their exposure to threats such as SGBV, child abuse, **Sexual Exploitation and Abuse** (SEA), and intercommunal violence.

SSRC will continue being a leading actor in **Psychosocial Support** (PSS) and

**Sexual, and Gender-Based Violence** (SGBV) prevention in South Sudan, and these will remain key priority areas for the National Society during this strategic period. The approach will be mainstreaming the **Protection, Gender, and Inclusion** perspective across programming and response activities and continues to strengthen the caring for staff and volunteers

Furthermore, SSRC has strong expertise in **Restoring Family Links**

(RFL) and is uniquely positioned through its close partnership with the ICRC to provide RFL services to displaced communities.



#### Outcomes Programmatic Priority 4: Protection, Gender, and Inclusion (PGI)

OUTCOMES	OUTCOME INDICATORS
<b>1.</b> People on the move and displaced persons have access to humanitarian assistance and protection as well as access to durable solutions when appropriate.  <i>NB: Humanitarian assistance provided to people on the move (see under programmatic priority 1).</i>	<ul style="list-style-type: none"> <li>• # of MoU and guidelines on responsibilities, roles, and tasks for working with refugees, IDPs, and returnees are formulated and operationalized.</li> <li>• # of people accessing protection, PSS, SGBV and RFL services focused on host communities, refugees, IDPs, and returnees.</li> <li>• # of people reached by durable solutions (IGA and technical skills) identified and implemented in home and host communities (refugees, IDPs, returnees, and youth)</li> </ul>
<b>2.</b> Inclusion, participation, diversity, and social cohesion improved in communities, focusing especially on young people's knowledge, skills, employability, and behaviour.	<ul style="list-style-type: none"> <li>• # of SSRC initiatives targeting youth associations, school clubs, and promoting inclusion, participation, and diversity.</li> <li>• # of youth-led initiatives within Red Cross and Communities.</li> <li>• # of youth with improved life skills.</li> <li>• # of initiatives strengthening youth employability (vocational training etc.)</li> </ul>

3. Individuals, communities, and volunteers feel protected.	<ul style="list-style-type: none"> <li>• # of survivors assisted or referred for services.</li> <li>• # of SGBV and Child Abuse (including safeguarding) prevention strategies in sectoral projects put in place.</li> <li>• # of activities contributing to social cohesion.</li> <li>• # of Mechanism of reporting and responding to threats in place (for population and volunteers).</li> </ul>
4. Access to mental health and psychosocial well-being ensured for people at risk.	<ul style="list-style-type: none"> <li>• # of people accessing MHPSS services.</li> <li>• # of referrals for serious mental health cases to specialized institutions.</li> </ul>
5. Access to RFL services improved to communities, returnees, IDPs, and refugees.	<ul style="list-style-type: none"> <li>• # of people accessing RFL services.</li> <li>• # of people linked to family members.</li> <li>• # of Un Accompanied Minors (UAM), Separated Child (SC) vulnerable adults registered and in need of RFL and other protection services.</li> </ul>

## 7 SSRC Transformation Goals for a Stronger National Society

This transformative goal focuses on how SSRC is positioned as a principled and trusted partner and supported by members, Authorities, and partners. SSRC strives for mutually and respectful cooperation and coordination within the Red Cross Red Crescent Movement, as well as with external partners.

To achieve this, SSRC will work to strengthen partnerships, RCRC Movement Coordination and Collaboration. In addition, a strong emphasis on Communication and Humanitarian Diplomacy as enabling factors for SSRC to be trusted and accountable and to be in line with its mission and advance towards its vision.

### SSRC Transformative Goal no 1:

A stronger NS that is a trusted and accountable national actor increasingly well-functioning and self-reliant structures throughout the country

#### 7.1 Enabling Priorities:

- **National Society Development and Sustainability.**
- **Innovation and Digital Transformation.**

##### 7.1.1 Enabling Priority 1: National Society Development and Sustainability

To remain relevant, any organisation needs to constantly evolve and adapt to its local environment. Some organisational change can happen spontaneously, but often a deliberate approach is needed to achieve lasting change. SSRC has worked closely together with its Movement partners to strengthen organisational capacities at all levels and to build the capacity across SSRC. The 2017 National Society Development (NSD) review carried out in 2017 and the 2018-2021 NSD Framework have been guiding SSRC to improve its capacity to deliver services and to fully live up to its mandate and auxiliary role. In accordance with the aspiration of the NSD Compact 2019, SSRC has emphasized a structured and encompassing approach addressing lack of alignment, duplication, or inefficiencies, and promoting coherence and predictability of NSD

support across the RCRC Movement. Digital transformation is key in improving community engagement, communication, fundraising, data-driven decisions, reporting, and accountability. National Societies will establish relevant foundational IT infrastructure systems. SSRC will explore innovative and modern ways of developing the national Society through the approach and mindset of localization.

SSRC as a grassroots organisation relies on its strong volunteer base and network – supported by competent and well-managed staff – to implement programmes and deliver services to vulnerable communities. Consequently, building strong and increasingly self-reliant branches and units is key to a well-functioning National Society and implies that SSRC recognises the need to put communities at the centre of what SSRC does. SSRC will continue to focus on being a strong, accountable, trusted humanitarian actor to deliver services locally.

To maintain the network of volunteers, SSRC will continuously recruit new volunteers, offer trainings and refresher courses to all volunteers to maintain their motivation and engagement.

SSRC will ensure maintenance, and continuous updating of the volunteer database and use the database in the planning of interventions.

Capacity building of staff and board and branch members is important and the same is adequate working conditions (internet, computers, etc)

and tools (guidelines, manuals) to ensure quality and well-coordinated performance and timely response.

In addition to funds raised through partners, a special focus will be given to increase SSRS's capacity to mobilize resources directly at the national level.

## Outcomes Enabling Priority 1: National Society Development and Sustainability

OUTCOMES	OUTCOME INDICATORS
1. SSRC continuously assesses NSD needs and takes the lead in ensuring sustainable services through NSD strategic and development plans.	<ul style="list-style-type: none"> <li>• % of SSRC operations and programs aligned to priorities of the NSD Framework.</li> <li>• # of Movement partners actively contributing to the realization of the SSRC NSD priorities (NSD Framework), hence ensuring full coordination in all operations and programs.</li> <li>• Donor mapping is done and updated regularly.</li> <li>• # of successful resource mobilization activities implemented.</li> <li>• % of annual budgets supported by SSRC resources Mobilization activities.</li> <li>• # of branches whose capacity to resource mobilise have been strengthened.</li> <li>• # of branches that submitted financial reports to HQ in a more qualitative and timely manner.</li> </ul>

2. Accountability and leadership improved at all levels to ensure that people and communities, vulnerable to and affected by crises, are empowered to influence decisions affecting them and trust the SSRC to serve their best interest.	<ul style="list-style-type: none"> <li>• # of SSRC policies, strategies, and tools (including fraud and corruption policy, PSEA policy, non-discrimination, harassment, child safeguarding policy) developed/reviewed, disseminated at all levels, and adhered to in plans, responses, and programs.</li> <li>• # of members of governance at national and branch level inducted and trained to fulfil their role and responsibilities.</li> <li>• # of branches that submitted financial reports to HQ in a more qualitative and timely manner.</li> </ul>
3. Local presence countrywide with branches that consistently deliver, through volunteers and staff, relevant community-wide services to vulnerable people.	<ul style="list-style-type: none"> <li>• # of new volunteers trained and registered in the volunteer base.</li> <li>• # number of branches and units in place and trained to deliver services to vulnerable people.</li> <li>• # number of branches with a strong structure for youth and volunteers capable of supporting SSRC operations and response.</li> <li>• # of initiative for engagement of youth as change agents in their communities.</li> <li>• # of activities implemented by branches in which volunteers did not receive cost recovery or this cost was covered by own branch's income.</li> </ul>

## Desired Key Achievements

- Resource Mobilization structures and guidelines are developed and strengthened for successful Resource Mobilization at the branch, national level, and

international level

- Business development as core expertise in SSRC strengthened.
- PMER strengthened.
- Support Services strengthened.
- Staff and boards capacity built.
- Youths and volunteers' capacities



- and opportunities are strengthened.
- Branch Development and investment in infrastructure development.
- Gender, Diversity, and Inclusion included in all activities.
- Governance and leadership strengthened.
- Accountability strengthened (CEA).
- Policies and strategies developed and reviewed.
- The finance manual and Code of Conduct reviewed.
- Safer Access Enhanced.
- Radio telecommunication improved.

### 7.1.2 Enabling Priority 2: Innovation and Digital Transformation

SSRC will embrace digital technology and foster a culture where innovation and learning are key drivers for development and response.

#### Outcomes Enabling Priority 2: Innovation and Digital Transformation

OUTCOMES	OUTCOME INDICATORS
SSRC is continuously identifying and adapting innovative and transformative approaches to better anticipate, adapt to and change for complex challenges and opportunities.	<ul style="list-style-type: none"> <li>• # of programs/projects that have integrated development of innovative approaches, tools, etc. (e.g., use of RCRC mobile Apps, GIS, drones, chat boxes, interactive online training, advanced cash transfer, etc)</li> <li>• # of a project integrating Digital System for data collection</li> <li>• # of relevant core data are defined and system of collecting in place</li> <li>• # of projects, programmes, departments, and branches collect and provide data on regular basis to ensure evidence-based decisions.</li> </ul>

#### Desired Key Achievements

- SSRC's ICT plan and policy reviewed.
- Information management strengthened.
- Integration of innovative approaches across departments and operations.

## 7.2 Partnership, Coordination, Communication and Humanitarian Diplomacy

### SSRC's Transformative Goal no. 2

A partner of choice, acknowledged by partners and stakeholders for strong coordination and evidence-based communication and advocacy efforts on behalf of vulnerable populations.

#### Priorities:

- **Partnership and Movement Coordination and Cooperation.**
- **Communication and Humanitarian Diplomacy.**

#### 7.2.1 Enabling priority 3: Partnership and Movement Coordination and Cooperation

In a complex setting, such as South Sudan, the humanitarian challenges require new, collaborative multi-stakeholder approaches for effective action.

The SSRC and the RCRC Movement partners present in South Sudan are committed to constantly improving coordination and exploring complementarity, to find new models of collaboration in line with the existing RCRC Movement Statutes, Frameworks, and resolutions, such as the Movement Coordination Agreement, and to be in line with the Strategic Plan 2022-2026 and adhere to the One Country Plan to ensure internal connection, efficient

response, and greatest impact.

SSRC continues to work closely with all relevant public authorities in line with its auxiliary role and recognizes the need to coordinate activities with other stakeholders at the local and national level to avoid duplication and to ensure maximum impact of its interventions. Following on from this, it is SSRC's ambition to increasingly explore partnerships also with non-Movement actors.

By expanding its network, especially at the local level, SSRC can also strengthen its capacity to identify Humanitarian Diplomacy issues, develop evidence-based Humanitarian Diplomacy messages, and engage with relevant stakeholders to address vulnerabilities in a more targeted manner.

South Sudan has since 2016 been one of the five countries that are part of the Movement-wide initiative of Strengthening Movement Coordination and Cooperation (SMCC). Through this initiative, several best practices have been generated, shared, and are currently being implemented

by SSRC and its Movement partners. A new phase, SMCC 2.0, will integrate and consolidate innovations and tools. SSRC and its Movement partners will continue to adhere to and further strengthen the application of the SMCC principles. Priorities for SMCC 2.0 are Resource Mobilization, Interoperability, Capacities and Competencies, Readiness to respond, Local action, and Scaling up.

Furthermore, SSRC is committed to working towards realizing relevant resolutions from the 2019 Council of Delegates, such as Movement-wide commitments for community Engagement and accountability, International Red Cross and Red Crescent Movement policy on addressing mental health and psychosocial needs, and Restoring Family links strategy 2020-2025

### Outcomes Priority 3: Partnership and Movement Coordination and Cooperation

OUTCOMES	OUTCOME INDICATORS
1. Strengthened spirit of collaboration among Movement partners (SMCC 2.0).	<ul style="list-style-type: none"> <li># of initiatives aiming at Increased understanding and engagement between Movement components in South Sudan.</li> <li># of joint Movement/SMCC initiatives (One country Plan, joint contingency plan, one reporting template, etc).</li> </ul>
2. SSRC has widened the scope of actors and networks that they engage with and support.	<ul style="list-style-type: none"> <li># of joint fora/initiatives with public authorities and line ministries.</li> <li># of new partnerships with non-movement actors.</li> </ul>

### Desired Key Achievements

- SSRC programs aligned with the relevant resolutions from the 2019 Council of Delegates.
- Strong relationships with line ministries and other relevant public authorities built and maintained.
- Partnership opportunities with non-movement actors explored.
- Guidelines for external partnerships developed to be used by branches.



Red Cross leaders pose for a photo during the visit of the Secretary-General of the IFRC.

### 7.2.2 Enabling priority 4: Communication and Humanitarian Diplomacy

Communication and Humanitarian Diplomacy are enabling the SSRC to be trusted and accountable and to be in line with its **mission** and advance towards its vision.

To be able to fulfil its mission of *reducing suffering, building resilient communities, and fostering human dignity and social cohesion*, SSRC needs to increase the understanding and acceptance of humanitarian values and principles.

With the noble **vision** of *having healthy, resilient, empowered, and inclusive communities*, it is important to position SSRC as a respected and trusted voice of vulnerable populations and renew its influence by Humanitarian Diplomacy and communication.

SSRC will ensure trust and accountability by inviting the **communities to be in the lead (CEA)** and establish good feedback mechanisms and good **monitoring and evaluation** systems gathering **evidence and compiling experiences**.

Clear campaigns and communications initiatives that are built on evidence and experience and make an impact on policies and practices will be facilitated. SSRC will **move from an informing to an influencing approach** to fulfil the role of being the voice of the most vulnerable groups. In other words, SSRC is committed to standing up and speaking out in support of the most vulnerable communities and individuals.

To start with, effective communication is key to ensure that the public authorities, other humanitarian actors, and the people of South Sudan are aware of the life-saving activities carried out by SSRC volunteers and staff across the country, as well as the role and **unique mandate**

of the SSRC. Active and strategic dissemination of IHL, the significance and correct use of the emblem, and the **Seven Fundamental Principles** are crucial in building trust and gaining increased access in a complex environment such as South Sudan.

For SSRC to be a respected and trusted voice and humanitarian actor, it all depends on being close to the communities, listening, observing, and documenting needs and achievements. Therefore, the **PMER function** is very important and provides the evidence-based arguments to inform/furnish the Humanitarian Diplomacy process of influencing formal and informal

**decision-makers and opinion leaders** to always act in the interest of the most vulnerable people of South Sudan.

This does not question the SSRC as a neutral and impartial organization that does not take sides in hostilities or political matters. However, by the principle of Humanity, SSRC will always stand up to ensure respect for human rights and dignity.

For each of the programmatic priorities, SSRC will complement its service delivery activities with evidence-based Humanitarian Diplomacy or advocacy initiatives as needed.

## Outcomes Enabling Priority 4: Communication and Humanitarian Diplomacy

OUTCOMES	OUTCOME INDICATORS
1. Awareness on IHL, 7 Fundamental Principles, emblem, the mandate and auxiliary status of SSRC increased at all levels- government, population, and actors of influence.	<ul style="list-style-type: none"> <li># of people and communities that are informed on IHL and 7 Fundamental Principles</li> <li># of key representatives of humanitarian and development agencies, relevant government officials, and actors of influence that have acquired knowledge on the Movement principles, IHL, and the mandate and auxiliary status of SSRC</li> </ul>

OUTCOMES	OUTCOME INDICATORS
2. SSRC has a strong public profile and is an effective advocate, influencing both public behaviour and policy change at the local and national levels.	<ul style="list-style-type: none"> <li>The clear understanding of SSRC's auxiliary role (internally and externally).</li> <li>Stakeholders' perception and respect for the SSRC and trust in the SSRC.</li> <li># of evidence-based HD initiatives rooted in programs and responses across departments.</li> <li># of policies, strategies, and tools developed and disseminated.</li> </ul>
3. Clear campaigns and communications initiatives that are built on evidence and experience and make an impact on policy and practice (Humanitarian Diplomacy).	<ul style="list-style-type: none"> <li># of campaigns with clear goal/message.</li> <li># of communications built on evidence (results and changes obtained).</li> <li># of examples contributing to change in practices and/or policies.</li> </ul>
4. Transparency and accountability of SSRC's programs and operations improved.	<ul style="list-style-type: none"> <li># of projects and responses that feed information into SSRC's PMER dashboards to ensure availability of global evidence-based information.</li> <li># of dissemination of programs and operations annual reports and evaluation reports to various stakeholders.</li> <li># of communications on activities, events, and testimonies (tweets, postings, etc.)</li> </ul>

## Desired Key Achievements

- A cross-cutting and systematic approach to Humanitarian Diplomacy and communication with stakeholders.
- Relevant Humanitarian Diplomacy and communication capability available at branch level and HQ.
- Clear understanding of SSRC's auxiliary role (internally and externally).
- Communication and HD policy formulated and disseminated.



## 8. Monitoring and Evaluation

SSRC will continuously refine its monitoring system to measure progress towards outcomes and key achievements in the course of the implementation of the Strategic Plan 2022–2026.

The PMER Framework will guide the implementation of the Strategic Plan by monitoring outcome indicators and compiling relevant data from the various programs and projects. Annual reports will be generated that will indicate how the programs are contributing to the vision and mission of the SSRC. A digitally centralized system of data and information gathering will be instituted and developed to provide real-time information and reports as required.

Collected data and information will per the Data protection strategy be made available to external partners' sector-specific needs (Ministries and UN representations in South Sudan) as well to the RCRC Movement. The PMER unit will work in collaboration

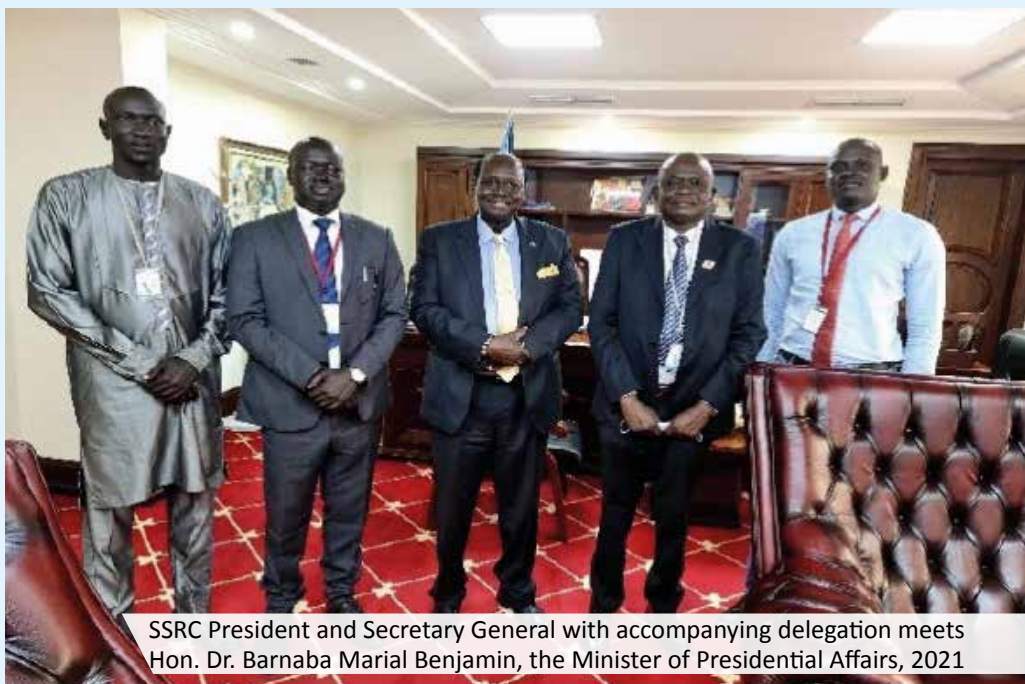
with Information, Communication, and Technology and communication departments to strengthen information sharing and knowledge management.

The Strategic Plan 2022–2026 is designed to cover five years, hence annual plans at the national and branch level will be developed in accordance with the Strategic Plan.

All SSRC programs and projects should make clear reference to and concretely feed into the priorities outlined in the Strategic Plan.

A mid-term review shall be conducted into the implementation of the Strategic Plan to establish whether the implementation of the plan is on course or if smaller amendments would be needed.

In 2026, an evaluation of the overall progress will be conducted and used to inform the development of the next strategic plan.



SSRC President and Secretary General with accompanying delegation meets Hon. Dr. Barnaba Marial Benjamin, the Minister of Presidential Affairs, 2021



Members of SSRC Governing Council and Management





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