

# Youth Voices Situational Analysis, South Sudan

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## Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CAPI	Computer-Assisted Personal Interview
CPA	Comprehensive Peace Agreement
FEWSNET	Famine Early Warning Systems Network
FGD	Focus Group Discussion
GoSS	Government of South Sudan
HFIAS	Household Food Insecurity Access Scale
HIV	Human Immunodeficiency Virus Infection
ICC	Intra-Cluster Correlation
KAP	Knowledge, Attitudes and Practices
KP	Key Point
LLIN	Long Lasting Insecticide Net
MWRI	Ministry of Water Resources and Irrigation
PoC	Protection of Civilians
PSU	Primary Sampling Unit
PPS	Probability Proportionate to Size
SDG	Sudanese Pound
SSP	South Sudanese Pound
TLS	Time-Location Sampling
UN	United Nations
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WB	World Bank



## Executive Summary

The objective of this Youth Voices Situational Analysis is to offer a purposive snapshot of the opinions, perspectives, attitudes, and practices of South Sudanese youth aged 10 to 24 years on a wide range of contemporary issues. In order to ensure a diversity of perceptions, qualitative and quantitative data was collected in Juba County in Central Equatoria State; Bor South County in Jonglei State; Budi County in Eastern Equatoria State; and Kapoeta South County in Eastern Equatoria State. The following provides a brief overview of major findings and recommendations.

### Education

Access to education is a major challenge for South Sudanese youth, and particularly constrained in pastoralist contexts. While 77.1% (n=269) of respondents with no cows have received some education, this is the case for 49.1% (n=125) of respondents with over 20 cows. Meanwhile, girls' education is undermined by early marriage and childbirth. Only 55.2% (n=98) of female respondents who have given birth have received education, compared to 65% (n=206) of those with no children.

### Skills and Livelihoods

Livestock and cultivation represent the primary sources of livelihoods in South Sudan. Due to the focus of the population on subsistence activities, income is generally low, and predominantly spent on food. Although lack of money to buy materials is a major barrier to business, respondents would be interested in learning a new trade, or receiving training in order to maximise their existing livelihoods. Given the importance of livestock, animal healthcare is among the top three training aspirations in Bor South, Kapoeta South, and Budi Counties.

### Food Security and Nutrition

Crop production represents the major food source in all four counties. However, food security is threatened by insecurity, displacement, and lack of money/assets. Unreliable weather patterns and crop diseases or pests represent further threats to food security. In Kapoeta South, 79.9% (n=266) of respondents do not have enough food to meet their households' needs. Respondents in Juba, who are least dependent on crop production, have the most positive outlook regarding the food situation.

### Water, Sanitation and Hygiene (WASH)

66.4% (n=221) of respondents in Kapoeta South acquire water for human consumption from open water sources. However, few treat their water prior to consumption. Meanwhile, a major sanitation concern across all counties is the lack of sufficient latrines/toilet facilities, leading many to practice open defecation. In Kapoeta South, 87.1% (n=290) of respondents do not have a toilet or latrine in their household. Education correlates with better WASH practices: 92.2% (n=525) of those who have accessed education think handwashing is important after using the latrines/toilet facilities, compared to 68.9% (n=363) of those with no education.

## Health

Malaria is a major cause of morbidity in South Sudan; in Bor South, 95.9% (n=325) of respondents report that malaria has affected a member of their household in the past year. However, knowledge of causes and prevention mechanisms are limited. In Budi, only 33% (n=97) of respondents know that malaria is caused by mosquitoes. Awareness of HIV/AIDS is relatively high. In particular, in Juba, 96.9% (n=283) of respondents have heard of HIV/AIDS. However, not all transmission routes are well understood.

## Child Protection

Conflict threatens the lives and well-being of youth, exposing them to traumatic experiences such as violence, family separation, and death of family members. Early marriage is another major child protection concern, exposing young girls to HIV/AIDS and early childbirth. 10.5% (n=37) of all female respondents between the ages of 10 and 16 were found to have already given birth, including one ten year old.

## Recommendations

- Review existing strategies for the education of pastoralist youth in order to compile and implement best practices. Provide educational alternatives which are compatible with and relevant to the pastoralist way of life.
- Combine enhanced educational opportunities for girls with sensitization of families on the harmful effects of early marriage and childbirth. Provide economic support and incentives for families to keep their daughters in school.
- Provide training related to existing livelihoods in order to improve production and increase income generation, while offering parallel opportunities for livelihood diversification.
- Implement microfinance and/or credit groups to facilitate business creation.
- Build well lit, weather-resistant pit latrines with cement slabs, using local labour and materials.
- Use the radio to raise awareness on the importance of water treatment and appropriate WASH practices, alongside the causes and prevention methods of major causes of morbidity.
- Offer contextually appropriate and culturally sensitive psychosocial support to address stress and trauma and promote mental health.

# 1 Introduction

## 1.1 Background on South Sudan

After decades of civil war, the Government of Sudan and the Sudan People's Liberation Army (SPLA) signed the Comprehensive Peace Agreement (CPA) in 2005. As stipulated by the Agreement, a referendum on independence took place in 2011, culminating in the birth of South Sudan as the world's youngest nation.<sup>1</sup> However, independence has yet to bring peace and stability to South Sudan.<sup>2</sup> A political crisis broke out in December 2013, rapidly escalating into a conflict which remains on-going at the time of writing.

Although the conflict is frequently portrayed in the international media as a result of ethnic tensions, the conflict is primarily due to the politicisation of ethnicity by the country's elites.<sup>3</sup> The current conflict is in fact the result of tangible socio-political and economic realities. Competition over resources such as water and grazing lands is a key conflict trigger, fuelled by resource scarcity, poverty, food insecurity, and climate change.<sup>4</sup>

While Unity, Upper Nile, and Jonglei States are the worst affected by violence, the country as a whole has suffered from the repercussions of conflict. As of June 2015, the current conflict in South Sudan has caused the internal displacement of over 1.5 million people.<sup>5</sup> While no precise death toll is available, the United Nations estimated that tens of thousands of lives have been lost as a direct result of conflict.<sup>6</sup> However, if one takes into account the related decrease in agricultural production, or the destruction of health facilities, the human cost is likely much higher.

Approximately half of the population of South Sudan live below the national poverty line, and the current conflict is further undermining the country's already poor human development indicators.<sup>7</sup> Children and youth are particularly vulnerable. With an estimated sixty percent of South Sudan's population under the age of 24, the country's youngest generation is confronted with a number of key development concerns. These concerns, which are further developed below, are some of the major themes of this report.

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1 United Nations in South Sudan, "About South Sudan," 2011. <http://ss.one.un.org/country-info.html>

2 UNICEF South Sudan, "Vision and Planning Assumptions for 2015-2016," 2014.

3 The Sudd Institute, "South Sudan's Crisis: Its Drivers, Key Players, and Post-Conflict Prospects," August 3, 2014. <http://www.suddinstitute.org/assets/Publications/South-Sudan-Crisisfinal.pdf>

4 UNDP, SSPRC and BCSSAC, "Community Consultation Report: Upper Nile State, South Sudan," 2012. <http://www.undp.org/content/dam/southsudan/library/Documents/CSAC%20Reports/UNDP-SS-UpperNile-consult-12.pdf>

5 IDMC, "South Sudan," accessed August 6, 2015. <http://www.internal-displacement.org/sub-saharan-africa/south-sudan/>

6 Kelly, N., "Why the World Ignores South Sudan's Killing Fields: Part II – Nameless, Numberless and Dead in South Sudan," War is Boring, June 2015. <https://medium.com/war-is-boring/why-the-world-ignores-south-sudan-s-killing-fields-5b813bfe19f4>

7 UN, "South Sudan Statistics," January 2014; see also UNICEF South Sudan, "Annual Report," 2014.

## 1.2 Key Development Concerns for Youth in South Sudan

Key development concerns for youth in South Sudan include education, livelihoods, nutrition and food security, water, hygiene and sanitation, health, and child protection. The following provides a brief overview of how these interrelated topics affect the lives of youth in South Sudan.

Education is a major development concern for South Sudanese youth: only 10 percent of children and youth complete primary education, and as a consequence almost three quarters of the population over the age of 15 are unable to read or write. The quality of education in South Sudan is generally poor and educational facilities are often inadequate. Access, enrolment and retention, for many students, are also limited due to socioeconomic and cultural factors.<sup>9</sup> Indeed, school fees are often prohibitively expensive because many households are subsistence farmers generating little to no income. Moreover, youth's contributions to household activities are sometimes considered indispensable to subsistence, with male youth engaged in cultivation and work in cattle camps, and female youth collecting water and undertaking household chores as well as partaking in cultivation. As a result, education is often not considered a priority; girls' education in particular is undervalued given the emphasis on marriage and domestic responsibilities.<sup>10</sup> The current conflict has further undermined education in South Sudan: in 2014 alone, approximately 400,000 children left school due to conflict.<sup>11</sup>

Meanwhile, with regards to livelihood opportunities available to youth in South Sudan, "up to 95 percent of the country's population relies on herding, farming or fishing to meet their income and food needs."<sup>12</sup> Nevertheless, while South Sudan is considered to have significant agricultural potential, as of 2010, only 4 percent of its arable land was cultivated and livestock production was estimated at only 20 percent of its capacity.<sup>13</sup> Moreover, in the conflict-affected states of Jonglei, Unity and Upper Nile, roughly 80 percent of people were unable to cultivate crops during the last agricultural season, mainly due to insecurity, displacement or lack of access to seeds.<sup>14</sup> Given these threats to traditional livelihoods, many households are now settling in

8 United Nations in South Sudan, "About South Sudan," last accessed August 5, 2015. <http://ss.one.un.org/country-info.html>; See also World Bank, "South Sudan Overview," last accessed August 5, 2015. <http://www.worldbank.org/en/country/southsudan/overview>

9 UNICEF South Sudan, "Annual Report," 2014.

10 UNICEF, "A report of the study on socioeconomic and cultural barriers to schooling in Southern Sudan," November 2008. [http://www.unicef.org/sudan/socio-economic\\_and\\_cultural\\_barriers\\_to\\_schooling\\_in\\_southern\\_sudan.pdf](http://www.unicef.org/sudan/socio-economic_and_cultural_barriers_to_schooling_in_southern_sudan.pdf); See also Edward, J. K., "A Strategy for Achieving Gender Equality in South Sudan," The Sudd Institute, January 28, 2014. <http://www.suddinstitute.org/assets/Publications/Gender-EqualityfmtSR.pdf>

11 UNICEF South Sudan, "Annual Report," 2014.

12 FAO in Emergencies, "South Sudan," last accessed August 14, 2015. <http://www.fao.org/emergencies/countries/detail/en/c/147627/>

13 Maxwell, D. Gelsdorf, K. and Santschi, M. "Livelihoods, basic services and social protection in South Sudan," Feinstein International Centre, July 2012. <http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/7716.pdf>

14 WFP, "South Sudan", last accessed August 5, 2015. <https://www.wfp.org/countries/south-sudan>; FAO, "South Sudan," last accessed August 5, 2015. <http://www.fao.org/emergencies/countries/detail/en/c/147627/>; See also FAO, "Food crisis escalates in South Sudan," 6 February 2015. <http://www.fao.org/news/story/en/item/276874/icode/>

urban and peri-urban areas to seek alternative employment and income generating opportunities.<sup>15</sup> However, employment opportunities are limited by lack of education. The government and development partners have introduced training programs aimed at improving youth skills and providing alternative sources of livelihoods, but there is limited knowledge of the local demand and existing market opportunities.<sup>16</sup>

In parallel to the conflict-related decrease in cultivation, inflation and depreciation of the local currency have resulted in higher food prices, further limiting households' access to food.<sup>17</sup> As such, food security, namely access to sufficient, safe and nutritious food, is currently of great concern in South Sudan.<sup>18</sup> Approximately 4.6 million people were believed to be severely food insecure between May and July 2015.<sup>19</sup> Malnutrition in turn affects the immune system, rendering youth more vulnerable to disease, and can negatively impact brain development, leading to learning disabilities and poor school performance.<sup>20</sup>

Malaria is a leading cause of morbidity in South Sudan, but poor water, sanitation and hygiene (WASH) practices also lead to serious health concerns.<sup>21</sup> Only 34 percent of the population has access to safe drinking water, and just 14 percent has access to improved sanitation: 70 percent of the population in fact practices open defecation.<sup>22</sup> The on-going conflict has resulted in the destruction of up to 40 percent of WASH facilities in conflict-affected states, and has caused displacement to areas without appropriate facilities, increasing the risk of water-borne diseases.<sup>23</sup> As a result of poor sanitation, in particular in protection of civilians (PoC) camps, a cholera outbreak occurred in 2014, with 6,065 suspected cases and 139 deaths. A second outbreak occurred in 2015, accounting for 1,464 suspected cases and 42 deaths in Juba and Bor South Counties of Central Equatoria and Jonglei States, respectively.<sup>24</sup>

In addition to the above-mentioned challenges, children and youth, in particular those separated from their families as a result of the conflict and forcible displacement, are

15 Maxwell, D. Gelsdorf, K. and Santschi, M. "Livelihoods, basic services and social protection in South Sudan," Feinstein International Centre, July 2012. <http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/7716.pdf>

16 Mercy Corps, "Youth at the crossroads: pursuing a positive path in South Sudan," 2014. [https://www.mercycorps.org/sites/default/files/South%20Sudan,%20Through%20Youth's%20Eyes%20-%20Youth%20Assessment%20%20\(2014\).pdf](https://www.mercycorps.org/sites/default/files/South%20Sudan,%20Through%20Youth's%20Eyes%20-%20Youth%20Assessment%20%20(2014).pdf)

17 Integrated Food Security Phase Classification, "South Sudan," last accessed August 5, 2015. <http://www.ipcinfo.org/ipcinfo-detail-forms/ipcinfo-map-detail/en/c/288396/>

18 WHO, "Food Security," last accessed August 5, 2015. <http://www.who.int/trade/glossary/story028/en/>

19 Integrated Food Security Phase Classification, "South Sudan," last accessed August 5, 2015. <http://www.ipcinfo.org/ipcinfo-detail-forms/ipcinfo-map-detail/en/c/288396/>

20 Orphan Nutrition, "Impact of Malnutrition on Health and Development," last accessed August 16, 2015. <http://www.orphannutrition.org/understanding-malnutrition/impact-of-malnutrition-on-health-and-development/>

21 UN, "South Sudan Statistics," January 2014; See also Prado, E. and Dewey, K. "Nutrition and Brain Development in Early Life," Alice and Thrive Technical Brief, Issue 4, 2014. <http://www.cmamforum.org/Pool/Resources/Nutrition-brain-development-early-life-A-T-Technical-Brief-2012.pdf>

22 UNICEF South Sudan, "Vision and Planning Assumptions for 2015-2016," 2014.

23 UNICEF South Sudan, "Annual Report," 2014.

24 Ibid; See also WHO, "Situation Report #45 on Cholera in South Sudan," August 5, 2015. [http://www.who.int/hac/crises/ssd/sitreps/south\\_sudan\\_cholera\\_juba\\_5august2015.pdf?ua=1](http://www.who.int/hac/crises/ssd/sitreps/south_sudan_cholera_juba_5august2015.pdf?ua=1)

particularly vulnerable to physical and psychological abuse. An estimated 7 percent of South Sudanese girls are married before the age of fifteen, and 45 percent before the age of 18 – in a context of instability, bride-wealth represents a strong incentive for early marriage, offering a source of income to families with daughters.<sup>25</sup> Meanwhile, since December 2013, close to 13,000 children have allegedly been forcibly recruited into armed groups on both sides of the conflict.<sup>26</sup> Moreover, in June 2015, according to UNICEF Executive Director Anthony Lake, as many as 129 children were killed in Unity State, with boys bleeding to death as a result of castration, and girls being gang raped and murdered.<sup>27</sup>

UNICEF’s mission is “to advocate for the protection of children’s rights, to help meet their basic needs and to expand their opportunities to reach their full potential.”<sup>28</sup> In South Sudan, the rights of children and youth are at risk, their basic needs are often unmet, and opportunities to reach their full potential are limited. In order to enable comprehensive and targeted interventions, UNICEF has commissioned this in-depth situational analysis.

## 2 Purpose of Assessment & Methodology

### 2.1 Aim of Assessment

Given the challenges faced by youth in South Sudan, the objective of this Youth Voices Situational Analysis is to gather information on the opinions, perspectives, attitudes and practices of youth aged 10 to 24 years on a wide range of contemporary issues, including:

- Nutrition
- Food security
- Youth skills and livelihood opportunities
- Water, sanitation and hygiene
- Education
- Child protection
- Health
- The current situation of the country

The analysis reflects on the realities of South Sudanese youth in different contexts, capturing perspectives of youth residing in urban, peri-urban and rural regions, those working in pastoral and agricultural economies as well as of those in conflict-affected areas. The objectives of this assessment are to understand the different situations of youth in South Sudan, as well as their perspectives on the personal and professional challenges which they face. This assessment also seeks to determine current and future youth activities and engagements. Overall, the situational analysis will present a detailed overview of the knowledge, attitudes and practices of youth in South Sudan, informing future programming. In order to better target the analysis, quantitative and qualitative indicators have been identified in collaboration with UNICEF. A full list of indicators can be found in Annex 1.

25 UNICEF in South Sudan, “Child Protection,” last accessed August 9, 2015. [http://www.unicef.org/southsudan/Child\\_Protection.pdf](http://www.unicef.org/southsudan/Child_Protection.pdf)

26 UNICEF, “Unspeakable violence against children in South Sudan,” June 17, 2015, last accessed August 9, 2015. [http://www.unicef.org/media/media\\_82319.html](http://www.unicef.org/media/media_82319.html)

27 Ibid.

28 UNICEF, “UNICEF’s Mission Statement,” last accessed August 16, 2015. [http://www.unicef.org/about/who/index\\_mission.html](http://www.unicef.org/about/who/index_mission.html)

## 2.2 Methodology

The Youth Voices Situational Analysis Study is comprised of quantitative and qualitative data collected in Juba County in Central Equatoria State; Bor South County in Jonglei State; Budi County in Eastern Equatoria State; and Kapoeta South County in Eastern Equatoria State. These counties were purposefully selected based on criteria including conflict affectedness, economy, urban/rural settings and UNICEF presence, in order to include a wide range of situations and perceptions among youth. The selected locations do not represent a representative sample of South Sudan; findings cannot as such be generalised to all South Sudanese youth. However, the study is representative of the four different counties, which together comprise a purposive snapshot of variability across South Sudan.<sup>29</sup> Table 1 summarizes the key characteristics of the counties included in this study.

*Table 1. County Characteristics*

State	County	Population (2008 Census)	Conflict Affected	Economy	Urban/Rural	UNICEF Interventions
Central Equatoria	Juba	368,436	Yes	Service	Urban/ Peri-urban	Comprehensive
Jonglei	Bor South	221,106	Yes	Pastoral	Rural	Unknown
Eastern Equatoria	Budi	99,234	No	Agro-pastoral	Rural	Youth Centre and Training
Eastern Equatoria	Kapoeta South	79,470	No	Pastoral	Rural	Youth Centre and Training

In addition to qualitative and quantitative research, a comprehensive desk review of available documents was conducted, including UNICEF and Forcier Consulting Partnership Agreement; UNICEF Youth LEAD Report; UNICEF Global Trends Paper; UNICEF Additional Data Employment Figures for Budi, Nyirol & Ulang; UNICEF South Sudan Annual Report 2014; and UNICEF South Sudan Vision and Planning Assumptions for 2015-2016.

### 2.2.1 Qualitative Research

Qualitative data consists of four focus group discussions (FGDs) per county for a total of 16 FGDs. In each location, FGDs were held with males and females between the ages of 10 to 24. Whenever possible, in order to enhance participation, FGDs were held with participants of the same gender and age group (10 to 16 or 17 to 24). These age groups were selected based on the assumption that youth aged 10-16 will have different outlooks and perspectives from youth aged 17-24. Indeed, younger youth are likely influenced by the realities of their domestic and school lives, while youth aged

<sup>29</sup> Note: Given that the study aims to provide a purposive snapshot of variability across South Sudan, the report regularly refers to “youth in South Sudan” or “South Sudanese youth.” Please note, however, that the sample is not representative of all South Sudanese youth.

17-24 are assumed to be more heavily engaged in income-generating activities and more focused on their responsibilities to their families, households and communities more broadly.

In order to address the challenge of collecting high-quality data from children and youth, the focus groups techniques employed for this study were specifically adapted, including role playing, game formats (word games, charades/miming activities), visual polling and interactive storytelling. Such techniques are considered helpful in order to maintain the attention of the group, and are also considered more appropriate when dealing with sensitive topics.<sup>30</sup> In order to ensure that the four researchers undertaking the qualitative research were familiar with these focus group techniques, alongside research ethics and the logistics of data collection, a two-day training was held prior to fielding, including pre-testing of the data collection tools. Training also included how to effectively recruit and train local enumerators for successful quantitative research.

## 2.2.2 Quantitative Research

Quantitative interviews were administered using computer-assisted personal interview (CAPI) technology to enhance efficiency in data collection and extraction, as well as to ensure data security. The quantitative tool was designed by Forcier Consulting, and subsequently reviewed and approved by UNICEF. Forcier Consulting then scripted the interviews onto smartphones that were used to conduct data collection. Prior to data collection, six enumerators were hired in each county, and trained on the use of smartphones and the content of the survey.

Given the focus on youth, the sample frame is limited to children and adolescents between 10 and 24 years of age. The sampling strategy is comprised of time-location sampling (TLS), by which enumerators are positioned at key points (KPs). These KPs are the primary sampling unit (PSU) and are essentially approached as geographic clusters along routes that are frequently travelled by the target population. Using a predefined interval contingent on frequency of people passing by, enumerators solicited every Nth individual to take part in the survey.<sup>31</sup> If the individual was between the ages of 10 and 24, he or she was asked to participate.

For each county, twenty (20) KPs were drawn at boma level according to the probability proportionate to Boma size (PPS with replacement). Forcier researchers liaised with UNICEF staff on the ground to purposively identify the most appropriate locations for the KPs along key routes. In order to strive for optimal gender representation in the survey, half of the KPs were positioned along routes more frequently travelled by boys (e.g. routes to the cattle camps) and the other half positioned along routes more frequently travelled by girls (e.g. routes to water points or markets). For all KPs situated along a predominantly male-travelled route, the interval of respondents was adjusted to enforce a gender quota of 66% male and 33% female (male – male – female); for the KPs situated along a predominantly female-travelled route, the inverse

30 Colucci, E. "Focus Groups Can Be Fun: The Use of Activity-Oriented Questions in Focus Group Discussions," *Qualitative Health Research*, 2007, 17:10.

31 Note: If, in the five minutes following arrival at the KP, more than 10 people pass by, enumerators subsequently interview 1 out of every 10 people passing by; if 5-9 people pass by, enumerators interview 1 out of every 7 people passing by; if 2-5 people pass by, enumerators interview 1 out of every 5 people passing by; if less than 2 people pass by, another KP is selected.

gender quota of 66% female and 33% male (female – female – male) was enforced. At each KP, the enumerators conducted 15 interviews, which allows for a minimum detectable difference on selected quantitative indicators between locations of 15%, yielding a confidence of 95% with 0.8 power based on intra-cluster correlation (ICC) of 0.05. Collected observations per county are reported in Table 2.

*Table 2. Quantitative Data Collection*

County	Observation Quota	Collected Observations
Bor South	300	339
Budi	300	294
Juba	300	292
Kapoeta South	300	333
<b>Total</b>	<b>1,200</b>	<b>1,258</b>

## 2.2.3 Data Cleaning and Statistical Analysis

Following the data collection process, the quantitative data was cleaned with the assistance of the quality assurance officer, who removed duplicates, errors and test cases from the dataset. Subsequently, STATA statistical software was used to analyse relevant trends in the data. Chi Squares and t-tests were used to determine statistical significance; as such, all findings presented in this report are statistically significant at the 95 percent level. Where relevant, confidence intervals were also examined to assess statistical differences between findings. Throughout the report, quantitative findings are presented as percentages, with the number of observations in parenthesis (n=#).

### 2.2.3.1 Composite Indicator: Food Insecurity

In order to be considered severely food insecure in the context of this analysis, respondents had to answer “yes” to at least one of the following three questions, understood to be indicative of severe food insecurity given their association with the Household Food Insecurity Access Scale (HFIAS):

- In the past 4 weeks (30 days), was there ever no food to eat of any kind in your house because of lack of resources to get food?
- In the past 4 weeks (30 days), did you or any household member go to sleep at night hungry because there was not enough food?
- In the past 4 weeks (30 days), did you or any household member go a whole day and night without eating anything because there was not enough food?

Given that other HFIAS questions were not asked as part of the survey, it is impossible to give a precise estimate of overall levels of food insecurity. The numbers presented here thus represent the minimum known number of respondents affected by severe food insecurity – in practice, numbers are likely higher.

## 2.3 Limitations

A number of logistical issues impacted the data collection process for this assessment. The most notable challenge faced by the research team was transiting from one area to another due to the poor condition of the roads in the counties under study. In many areas, rains further undermined road conditions. In Budi County, the terrain is mountainous and flooded roads were impassable, which forced enumerators to walk long distances in order to gather data for the analysis. As a result, in some cases the batteries of the phones used for data collection died before enumerator survey quotas were achieved. Moreover, in Kapoeta South County, the lack of reliable mobile phone network and the resulting communication challenges complicated the coordination of enumerators on the ground.

Data collection was further complicated by difficulties in confirming the age of participants. A number of participants were unaware of their age, which undermined the ability of survey enumerators to strictly restrict participation to youth between 10 and 24 years of age. As a related issue, while FGDs were supposed to be gender and age-specific (male and female groups between the ages of 10 to 16 and 17 to 24), difficulties in gathering participants of the same age group and gender resulted in some FGDs including a mix of ages and genders.

In addition, a number of participants complained that both the quantitative survey and focus group discussions were too long and time-consuming. Pre-testing suggested that FGDs were within the recommended two-hour mark (including a short break). However, while all questions of the quantitative survey, developed in partnership with UNICEF, were deemed essential for the collection of sufficient information on youth, the length may have impacted the quality of the data gathered, prompting respondents to answer briefly towards the end of the survey.

With regards to data analysis, one key limitation relates to the entry of misspelt or incorrect boma names by enumerators. Indeed, in order to appropriately weight the quantitative data using STATA statistical software, it is necessary to define the KPs as the PSU. However, this first requires identifying the unique KPs, which in turn is dependent on appropriate identification of the bomas. Given the data entry challenges, it is possible that some KPs may have been incorrectly identified, and some observations dropped entirely from the analysis.

### 3 Findings

#### 3.1 Population Background

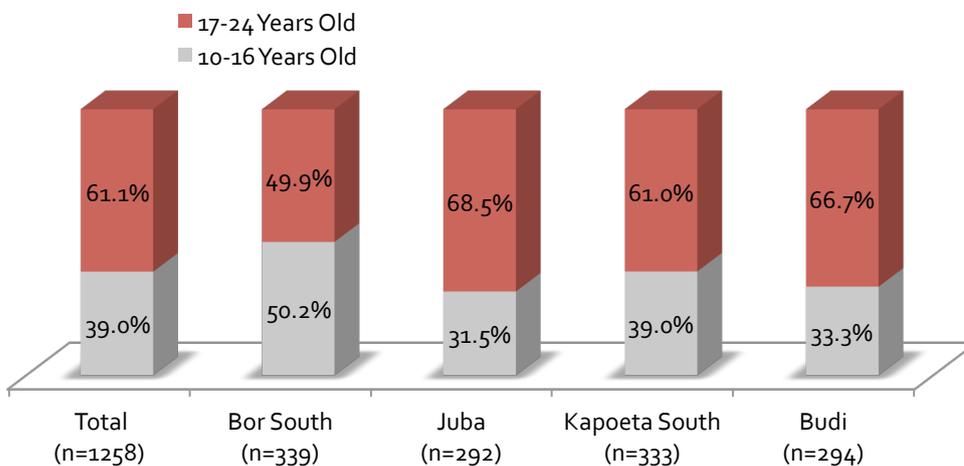
In order to contextualize the subsequent analysis, it is necessary first to briefly examine the population surveyed. A total of 1,258 youth were surveyed for this situational analysis, with regional divisions as follows:

- 339 in Bor South;
- 333 in Kapoeta South;
- 294 in Budi;
- 292 in Juba.

Gender representation is relatively balanced, with 47.7% (n=600) male respondents and 52.3% (n=658) female. Gender representation is least even in Budi County, where 57.8% (n=170) of respondents are female.<sup>32</sup>

Meanwhile, 61.1% (n=768) of respondents are between the ages of 17 and 24 years old; respondents age 10 to 16 account for the remaining 39% (n=490) of respondents.<sup>33</sup>As illustrated by figure 2, age distribution is most even in Bor South County, with approximately half of respondents between the ages of 10 and 16, and half between the ages of 17 and 24. In other counties, youth age 10 to 16 account for a lower percentage of respondents.

Figure 1. Age Ratios



32 Note: See Methodology for more information regarding the percentage of males and females. The survey sought specific gender quotas.

33 Note: See Methodology for more information regarding the age of respondents. The survey only included respondents between 10 and 24 years of age.

In addition to gender and age distribution, it should also be noted that:

- Only 47.8% (n=601) of youth surveyed have received any education.<sup>34</sup>
- 33.7% (n=222) of female participants have already given birth.<sup>35</sup>
- 41.2% (n=518) of respondents' households own between one and twenty cows, and 26.5% (n=333) own over 20 cows. Only 32.4% (n=407) do not own any cows.
- At least 53.26% (n=670) of respondents are severely food insecure.<sup>36</sup>

The analysis finds that these aforementioned factors (food insecurity, childbirth, livestock, etc.) influence respondents' perceptions, access to livelihoods and education, as well as other important areas of interest. The findings presented in this report are disaggregated not only by gender, age and county, but also by factors such as childbirth status and education. In doing so, this report is better able to highlight points of difference or similarity that are essential to fully understand the situation of youth in South Sudan.<sup>37</sup>

## 3.2 Education

Education represents a major development challenge for youth in South Sudan. The following section discusses school attendance and educational attainment in Bor South, Juba, Kapoeta South and Budi Counties. Subsequently, it examines youth perceptions with regards to education, and assesses major barriers to education in all four counties.

### 3.2.1 Attendance and Attainment

According to UNICEF's 2014 Annual Report, nationwide, 58 percent of primary school-aged children are out of school, and less than 10 percent complete primary school.<sup>38</sup> Of the youth surveyed in the context of this situational analysis, 64% (n=601) have received some education, and 34.8% (n=438) are currently in school.<sup>39</sup> Education varies substantially by county, as demonstrated by figure 2. Indeed, while 80.3% (n=233) of respondents in Juba and 63.4% (n=211) of respondents in Bor South report having received education, this is the case for 43.9% (n=126) of respondents in Budi and only 10.1% (n=31) of respondents in Kapoeta South, where education is

34 Note: 48.9% (n=615) have not received any education, and a further 3.3% replied "don't know" or refused to answer.

35 2% refused to answer.

36 Note: See Methodology.

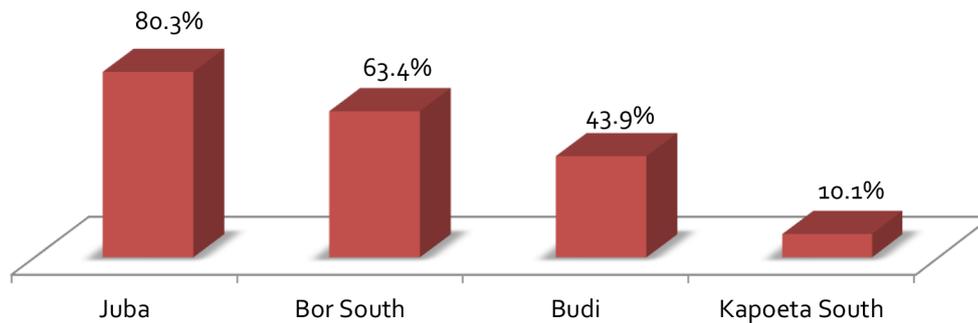
37 Note: Given that the study aims to provide a purposive snapshot of variability across South Sudan, the report regularly refers to "youth in South Sudan" or "South Sudanese youth." Please note, however, that the sample is not representative of all South Sudanese youth. See Methodology for additional information.

38 UNICEF South Sudan, "Annual Report," 2014.

39 Note: Level of education is unspecified. This finding reflects positive responses to: "have you received any education?"

considered very difficult to access, as will be discussed below. Education received is predominantly formal, from public government schools or private schools.

*Figure 2. Percentage of Respondents Having Received Education, by County*



Overall, a higher percentage of youth between the ages of 10 and 16, at 70.2% (n=261), report having received some education than youth between 17 and 24, at 60.2% (n=340), possibly reflecting a scale-up of education interventions in recent years.<sup>40</sup> This trend is also apparent at the county level:

- In Bor South, 73.2% (n=123) of respondents 16 and under have received some education, compared to 53.3% (n=88) of older respondents.
- In Juba, 89.1% (n=82) of respondents 16 or under have received some education, compared to 76.3% (n=151) of older respondents.<sup>41</sup>

With regards to gender, in Bor South, there is substantial gender imbalance in access to education, with 72.3% (n=115) of male respondents having received some education, compared to 55.2% (n=96) of female respondents.<sup>42</sup> Gender disparities in education can be partly attributed to early marriage and pregnancy. Indeed, among female respondents across all counties, only 55.2% (n=98) of those having given birth have received any education, compared to 65% (n=206) of those with no children. Moreover, marriage is often cited by female respondents as a reason for curtailed education, as will be further discussed below. A female FGD participant in Budi explained that girls often had to cut short their schooling because “parents force us to accept early marriage.”<sup>43</sup>

In parallel, as illustrated by figure 3, there is a negative relationship between the number of livestock owned by respondents’ households and education: while 77.1% (n=269) of respondents with no cows have received some education, this is the case for 56% (n=207) of those with 1 to 20 cows, and 49.1% (n=125) of those with over 20 cows. This finding suggests that education is complicated in a pastoralist context: it has indeed been documented that work in cattle camps often takes precedence over education, and the value of formal education is poorly recognized.<sup>44</sup> Giving further weight to this theory, one FGD participant in pastoral Kapoeta South argued “you don’t

40 UNICEF South Sudan, “Annual Report,” 2014.

41 Note: Results for other counties are not statistically significant when disaggregated by age.

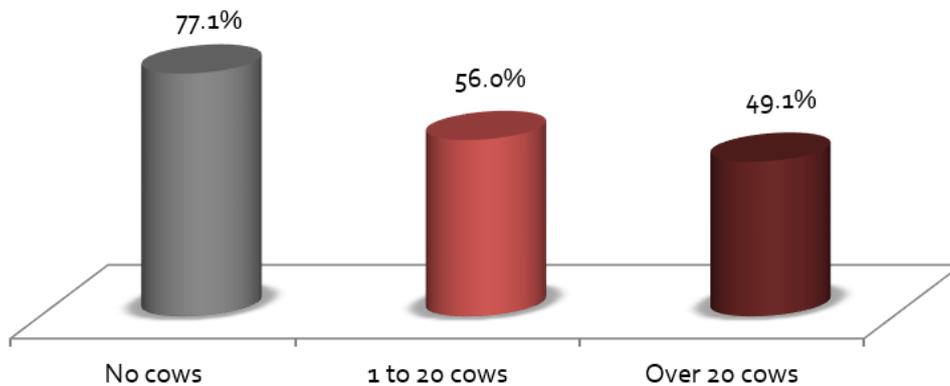
42 Note: Results for other counties are not statistically significant when disaggregated by gender.

43 FGD in Budi on July 31, 2015.

44 ILO, “Child labour and education in pastoralist communities in South Sudan,” 2013.

need to go to school to be a cattle keeper.”<sup>45</sup> As such, there is a strong need to identify contextually relevant and culturally appropriate forms of education for pastoralists.

*Figure 3. Percentage of Respondents Having Received Any Education, by Number of Cows Owned by the Household*

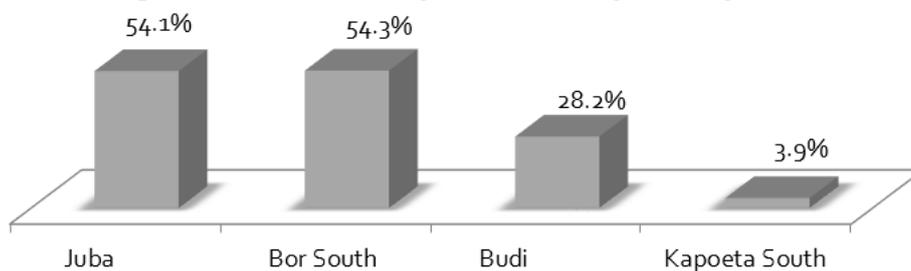


Overall, as figure 4 illustrates, respondents in Bor South and Juba are more likely to be in school compared to their counterparts in Kapoeta South and Budi:

- 54.3% (n=184) of respondents in Bor South and 54.1% (n=158) in Juba are currently in school;
- In contrast, 28.2% (n=83) of respondents in Budi and only 3.9% (n=13) in Kapoeta South are currently in school.

Notably, in Bor South, 87.2% (n=184) of youth having received some education are currently in school despite the insecurity affecting the county, this is the case for 41.9% (n=13) of those in Kapoeta South, which has been little affected by conflict. This difference may be due to the high presence of NGOs in Bor South. In fact, a map of field presence published by the UN Office for the Coordination of Humanitarian Affairs illustrates that Bor South has a relatively high concentration of NGOs compared to the relatively low concentration of NGOs in Budi and Kapoeta South.<sup>46</sup>

*Figure 4. Percentage of Youth Currently in School, by County*



Of youth who report having received some education, 77.7% (n=224) of males and 67.8% (n=214) of females are currently in school. In Bor South and Juba, among youth having received some education, a higher percentage of males than females are currently in school:

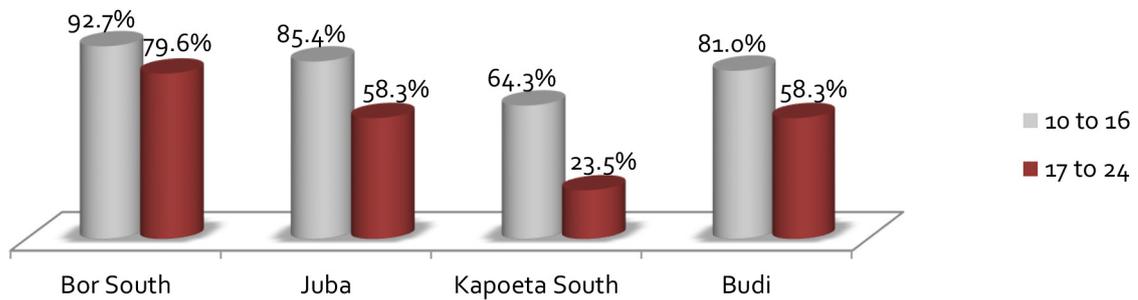
45 FGD in Kapoeta South on July 23, 2015.

46 OCHA, “South Sudan Crisis: Field Presence Office locations of national NGOs, international NGOs, international organizations and UN agencies,” 5 May 2014. <http://www.refworld.org/docid/537c62304.html>

- of male youth having received some education, 92.2% (n=106) in Bor South and 74.1% (n=86) in Juba are currently in school;
- of female youth having some education, 81.3% (n=78) in Bor South and 61.5% (n=72) in Juba are currently in school.

In contrast, in Budi, this finding is reversed, with 75% (n=57) of females having received some education currently in school, compared to 52% (n=26) of males.<sup>47</sup> Of respondents having received some education, in all counties, a higher percentage of younger youth are currently in school than older youth (see figure 5).

Figure 5. Percentage of Youth Having Received Education Currently in School, by Age and County



Literacy levels reflect education levels. Kapoeta South, which has the lowest percentage of respondents having received any education, has the highest illiteracy rate, with 78.7% (n=262) unable to read or write. In contrast, in Juba County, where access to education is highest (as discussed previously, see figure 2), only 18.8% (n=55) of respondents are unable to read or write. Figures 6 and 7 respectively illustrate illiteracy rates and levels of literacy by county.

Figure 6. Illiteracy Rates by County

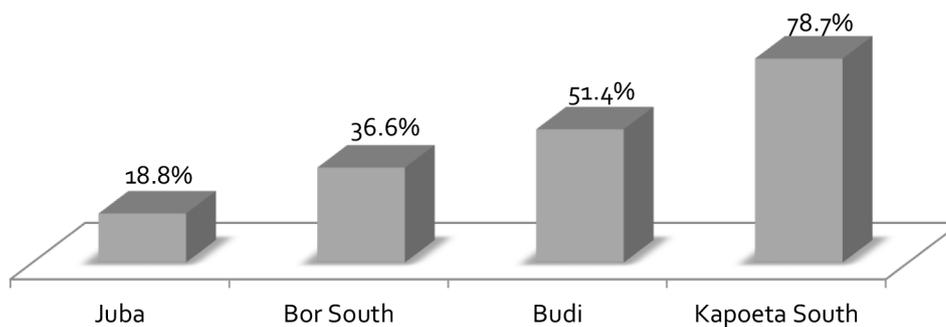
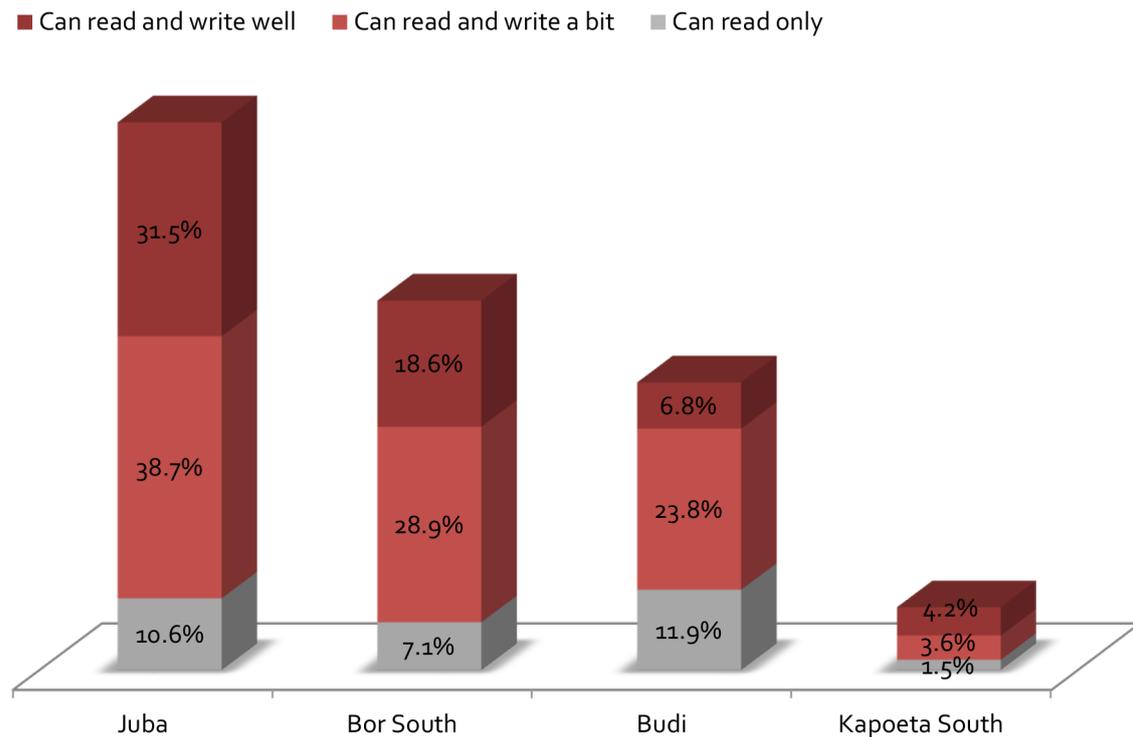


Figure 7. Levels of Literacy, by County



### 3.2.2 Perceptions

Education was highlighted in nearly all FGDs as key to having a good life, with one respondent stating, “education is key to success.”<sup>48</sup> Overall, youth highlighted that school makes them hopeful about the future, although conversely, the lack of education is a major concern.<sup>49</sup> Most FGD participants agreed that school teaches information and skills that will be useful in the future, such as English, literacy, maths, communication skills, computer skills, hygiene and sanitation. FGD participants also indicated that they were taught more technical skills, including business, carpentry, mechanic, and agricultural skills, suggesting that they may have received vocational trainings in addition to traditional schooling.

All youth who took part in the FGDs agreed that they like school or would like to go, with the exception of the one respondent in Kapoeta South who argued that education is unnecessary for cattle keepers.<sup>50</sup> Other FGD participants in Kapoeta South did not share this perspective, demonstrating that most youth in pastoralist contexts are eager to receive an education. However, this once again underlines the need for an alternative form of education relevant to the contextual needs of pastoralists.

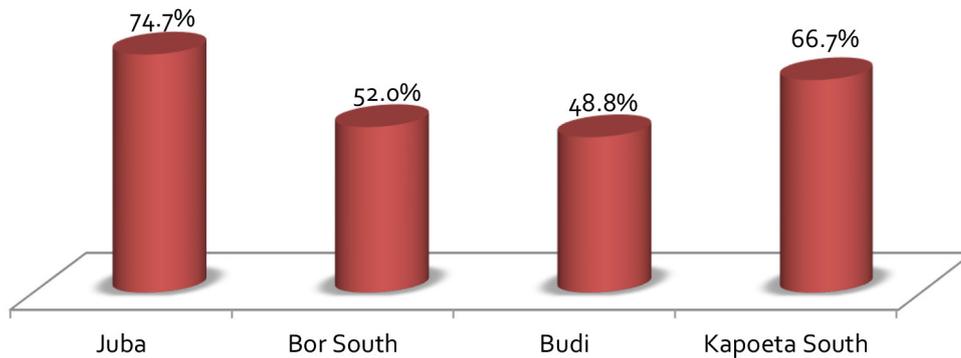
Indeed, in Kapoeta South, 66.7% (n=12) of the surveyed youth who have received education but are not currently in school would like to continue their schooling, as demonstrated by figure 8. Desire to continue schooling is highest in Juba (74.7%, n=56); in Bor South and Budi in contrast, only 52% (n=13) and 48.8% (n=21) of youth who have received education but are not currently in school respectively wish to continue schooling.

48 FGD in Juba on July 29, 2015.

49 Note: Type of education is unspecified but can be understood to include school and vocational training.

50 FGD in Kapoeta South on July 23, 2015.

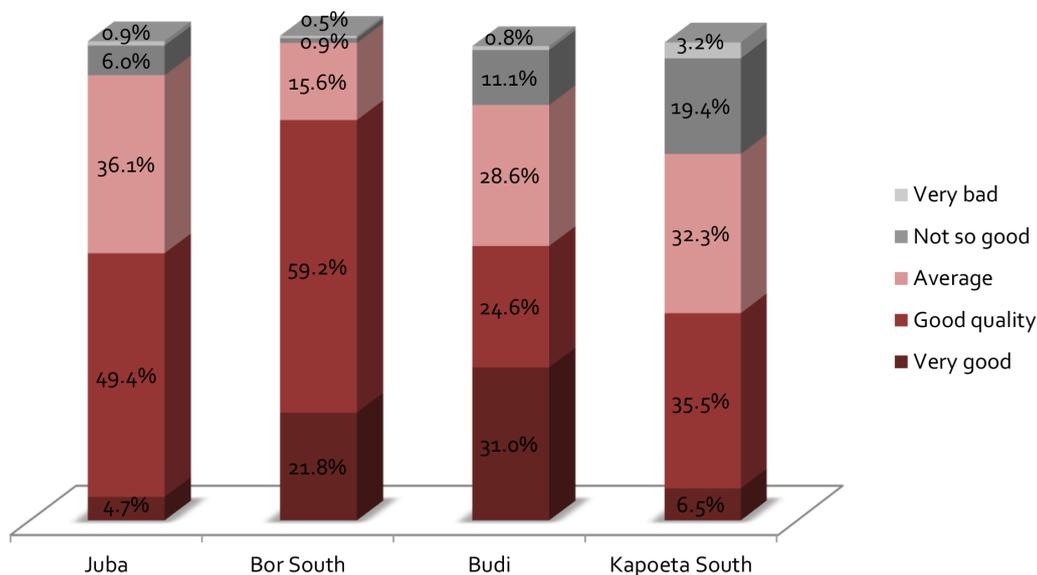
Figure 8. Youth Having Received Education Who Are Not Currently In School But Wish to Continue Their Education



Broadly, a majority of respondents having received some education perceive the education they received to be of relatively good quality, as shown in figure 9.<sup>51</sup> Youth in Kapoeta South appear least satisfied with the quality of the education they received, which contrasts with Bor South, where youth appear to be very satisfied with their education quality, despite insecurity:

- 19.4% (n=6) and 3.2% (n=1) of youth having received education in Kapoeta South respectively perceive it to be ‘not so good’ or ‘very bad’.
- 59.2% (n=125) and 21.8% (n=46) of youth having received education in Bor South respectively perceive it to be of ‘good quality’ or ‘very good quality.’

Figure 9. Perceived Quality of Education, by County<sup>52</sup>



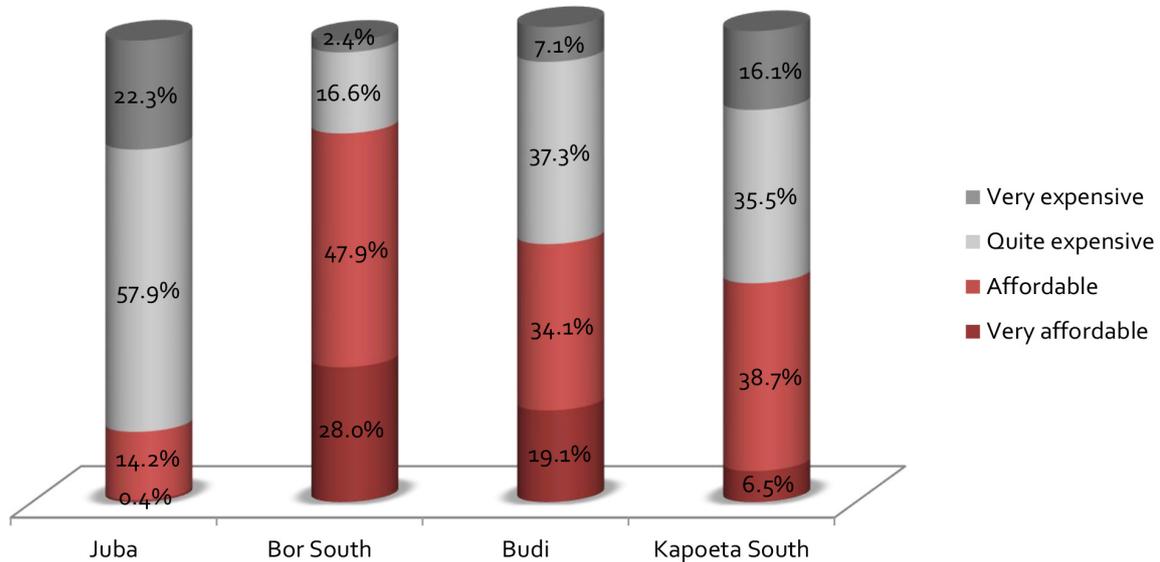
In line with the perceived high quality of education in Bor South, 47.9% (n=101) and 28% (n=59) of respondents in this county consider education ‘affordable’ and ‘very affordable’ respectively (see figure 10). However, in Juba, 22.3% (n=52) and 57.9%

51 Note: Survey respondents having received some education were asked to rate the quality of that education on a Likert Scale, designed to measure subjective perceptions of quality and not actual quality of education.

52 Note: Not included in this graph are the small percentages of respondents who reported not having accessed education despite their positive response to the initial question on education, those who responded ‘don’t know’, and those who refused to answer.

(n=135) of respondents respectively consider education to be ‘very expensive’ or ‘quite expensive.’ According to the quantitative survey, youth in Juba are more likely than youth in other counties to have received education from private schools.<sup>53</sup> However, in addition, public primary school fees are allegedly higher in urban areas.<sup>54</sup>

Figure 10. Perceived Value for Money of Education, by County<sup>55</sup>



By age, it appears that youth between the age of 17 and 24 perceive education to be more expensive than their younger peers: 66.6% (n=190) of youth age 17-24 having received some education consider the education they have received to be quite expensive or very expensive, compared to 48.9% (n=109) of youth age 10-16. Indeed, while basic education is free in South Sudan (although students generally have to pay for materials), secondary and higher education incur more costs: as of 2009, it was estimated that primary education cost on average 1.6 SDG per student per year, while secondary and higher education cost 5 SDG and 7 SDG respectively. <sup>56</sup>School fees as such represent a major barrier to education, as will be discussed in the following section.

53 Note: 62.7% (n=146) of youth having received some education in Juba received education from a private school, compared to 43.6% (n=92) in Bor South, 30.2% (n=38) in Budi and 16.1% (n=5) in Kapoeta South. Note that this was a multiple choice question – as such, of youth having received some education, a further 67% (n=156) in Juba, 90.1% (n=190) in Bor South, 88.1% (n=111) in Budi and 74.2% (n=23) in Kapoeta South indicated having received education from a public school.

54 World Bank, “Education in the Republic of South Sudan: Status and Challenges for a New System,” Africa Human Development Series, 2012, p.107.

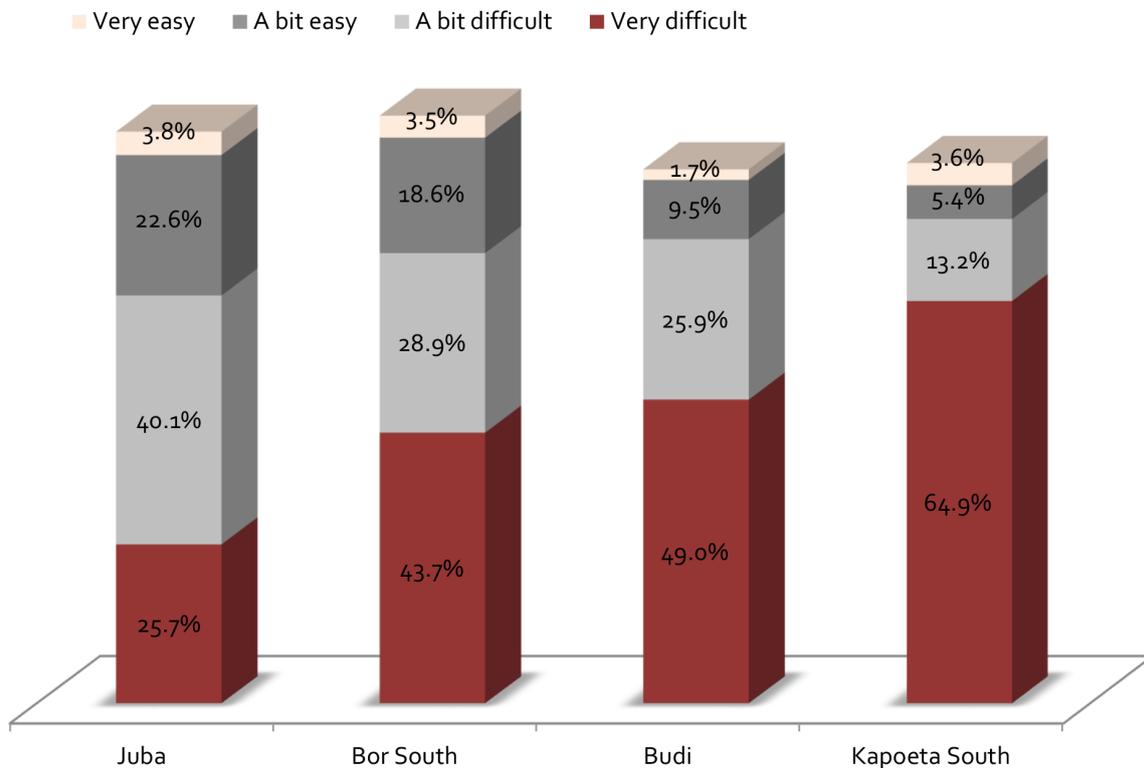
55 Note: Not included in this graph are the small percentages of respondents who reported not having accessed education despite their positive response to the initial question on education, those who responded ‘don’t know’, and those who refused to answer.

56 World Bank, “Education in the Republic of South Sudan: Status and Challenges for a New System,” Africa Human Development Series, 2012, p.108.

### 3.2.3 Barriers to Education

While education is perceived to be important, it is also considered to be difficult to access, as illustrated by figure 11 below. Access to education is particularly challenging in Kapoeta South, where 64.9% (n=216) of respondents indicate that education is ‘very difficult’ to access – lack of access to education in Kapoeta South is one likely explanation for the low levels of education and poor literacy rates experienced in that county. In contrast, in Juba, only 25.7% (n=75) of respondents perceive education to be ‘very difficult’ to access, highlighting the urban/rural divide in access to education: indeed, “children in urban areas are much more likely to be enrolled in any level of education than rural children.”<sup>57</sup>

Figure 11. Ease of Access to Education, by County



Reflecting the perceived costs of education above-mentioned, lack of school fees are a major barrier to education, featuring in the top three explanations for discontinued education in all four counties alongside family problems (see figure 12).<sup>58</sup>FGD participants concur that the primary barrier to education is cost, in particular for orphans, with youth finding themselves unable to pay school fees or buy school materials like books or pens.<sup>59</sup> Despite South Sudan’s policy of free primary education, it would as such appear that the associated costs, including books, materials and uniforms, are often prohibitive.<sup>60</sup> Notably, youth in Juba are more likely than in other counties to have left school as a result of prohibitive school fees, reflecting the perceptions of high cost

57 World Bank, “Education in the Republic of South Sudan: Status and Challenges for a New System,” Africa Human Development Series, 2012, p.4.

58 Note: While no examples of family problems were given, these could be understood to include parents unwilling or unable to send their children to school, caring for younger siblings, etc.

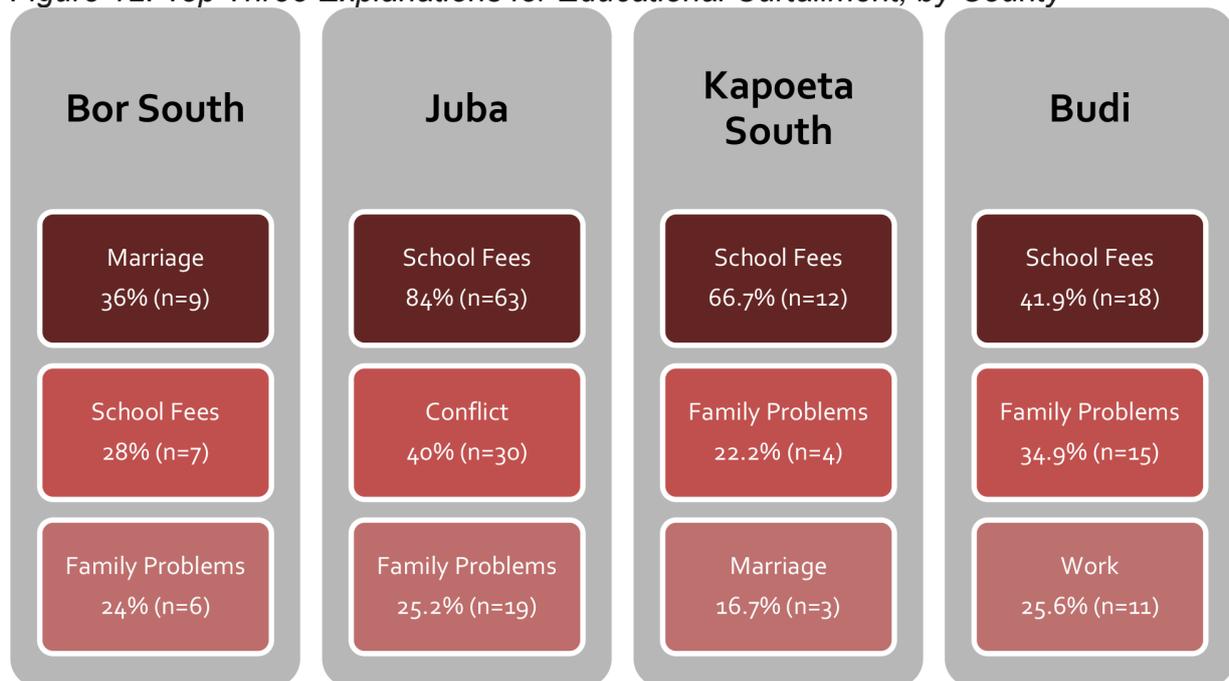
59 FGDs in Juba, Bor South, Kapoeta South and Budi, July 2015.

60 World Bank, “Education in the Republic of South Sudan: Status and Challenges for a New System,” Africa Human Development Series, 2012, p.107.

in that county and confirming that school fees may indeed be higher in urban areas.<sup>61</sup> Meanwhile, in Juba, conflict explains 40% (n=30) of cases of discontinued education. In parallel, in Bor South, FGD participants argue that long distances to school in a context of insecurity also represent a barrier to education.<sup>62</sup> Countrywide, UNICEF estimates that 400,000 children have been forced out of school due to the current conflict.<sup>63</sup>

Finally, marriage is the primary explanation for curtailed education in Bor South, cited by 36% (n=9) of respondents who had received some education but are no longer in school. In aggregate, marriage particularly affects older youth, reported as a reason for curtailed education by 24.2% (n=31) of youth age 17 to 24, but 12.1% (n=4) of younger respondents. However, marriage disproportionately impacts the education of girls: 32.6% (n=30) of female respondents no longer in school discontinued their education as a result of marriage, compared to only 7.3% (n=5) of males. According to FGD participants, young girls are often forced into early marriage by their parents against their will.<sup>64</sup> A case study of Budi County undertaken by UNICEF highlights that early pregnancies and forced marriage indeed represent a major barrier for the education of girls.<sup>65</sup> Given the negative relationship between childbirth and education afore-mentioned, married women have little chance to continue their schooling.

Figure 12. Top Three Explanations for Educational Curtailment, by County <sup>66</sup>



61 Note: 84% (n=63) of youth having discontinued their education in Juba cited school fees as an explanation, compared to 66.7% (n=12) in Kapoeta South, 41.9% (n=18) in Budi and 28% (n=7) in Bor South.

62 FGDs in Bor South, July 2015.

63 UNICEF South Sudan, "Annual Report," 2014.

64 FGD in Budi on July 31, 2015; FGD in Bor on July 27, 2015.

65 UNICEF, "Youth LEAD Baseline Assessment," 2012.

66 Note: While 'marriage' does not feature in the top three explanations for educational curtailment in Juba and Budi, it is however the 4th most common explanation in both counties, at 21.3% (n=16) and 16.3% (n=7) respectively.

**Summary of Findings:**

- There is a negative relationship between cattle ownership and education, highlighting challenges of education in a pastoralist context. Indeed, pastoralist Kapoeta South has very low levels of education, with only 10.1% (n=31) of respondents having received any education. Education is perceived as 'very difficult' to access by 64.9% (n=216) of youth surveyed in Kapoeta South.
- Despite the conflict and insecurity affecting the county, 63.4% (n=211) of respondents in Bor South have accessed education, and 87.2% (n=184) of these are currently in school. Education in Bor South is perceived by the respondents to be affordable and of relatively good quality.<sup>67</sup>
- While access to education is easier in urban areas, cost of education is also higher. Private schools are more popular in urban areas than in rural areas; additionally, public primary schools incur higher school fees in urban settings than in rural setting, though more research is needed on schools fees in South Sudan.
- Gender disparities exist, with female youth often obliged to curtail their education for marriage and childbirth as well as domestic chores, or simply as a result of the lack of value attached to girls' education. 32.6% (n=30) of female respondents no longer in school discontinued their education as a result of marriage.

### 3.3 Skills and Livelihoods

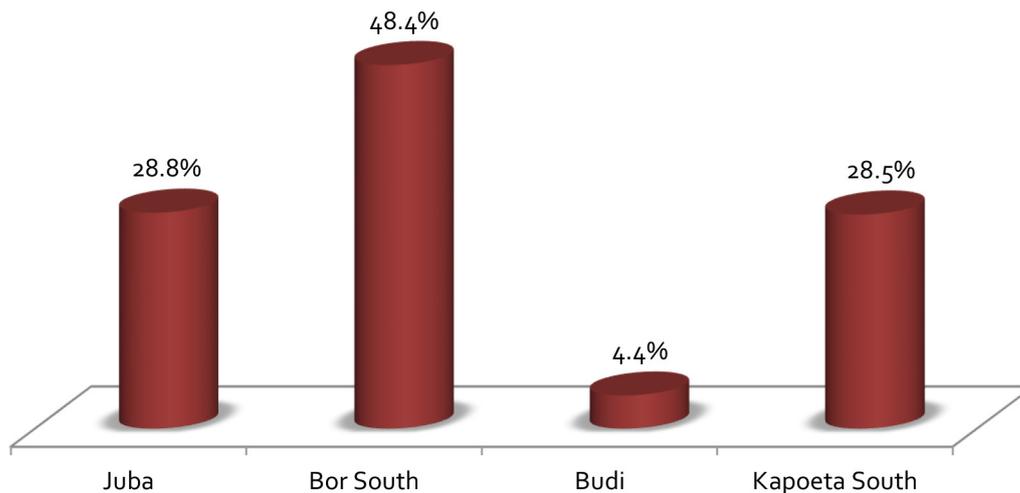
Leading on from the discussion of education, this section focuses on the skills and livelihoods available to youth in South Sudan. Existing employment and livelihood opportunities are examined alongside income generation and spending; subsequently, youth skills and training needs are discussed, in line with their livelihood aspirations and prevailing barriers to employment and income generation.

#### 3.3.1 Employment and Livelihood Opportunities

In total, 40.2% (n=197) of youth between the ages of 10 and 16 and 20.7% (n=159) of youth between the ages of 17 and 24 have no source of income. Disaggregated by county, the percentage of youth with no source of income is highest in Bor South, at 48.4% (n=164), and lowest in Budi, 4.4% (n=13). These findings are represented in figure 13 below. When disaggregated by gender, slightly more female than male respondents have no source of income: 26% (n=156) of male respondents, but 30.4% (n=200) of female respondents. As will be discussed later in this chapter however, many of the youth with no source of income are in fact in school.

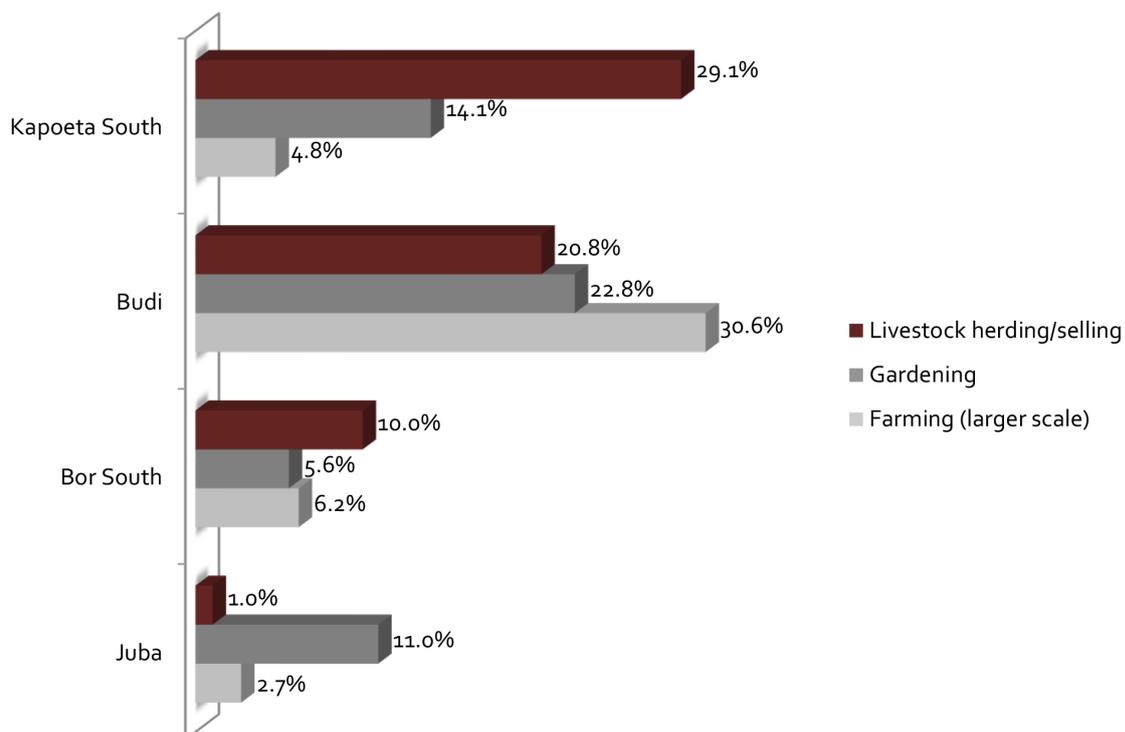
<sup>67</sup> Note: As noted previously, this reflects subjective perceptions of quality and not actual quality of education.

Figure 13. Percentage of Respondents with No Source of Income, by County



Livestock and cultivation represent major sources of livelihoods for youth, in particular in Budi and Kapoeta South, which are more rural than the other two counties. More respondents engaged in pastoralist activities in Kapoeta South (29.1%, n=97) than Budi (20.8%, n=61), where gardening and farming are more prevalent (see figure 14). Likewise, 10% (n=34) of respondents in Bor South are engaged in pastoralism – given that nearly half of respondents in Bor South do not have a source of income, this in fact accounts for a large portion of livelihoods in Bor. As Juba is an urban area, livestock herding/selling and large-scale farming are uncommon. However, given the high prevalence of pastoralism throughout South Sudan, adapting education to the specific needs of pastoralists is critical.

Figure 14. Prevalence of Livestock and Cultivation as Sources of Livelihoods among Respondents, by County



Livestock ownership is lowest in Juba, where respondents' households own on average 6.3 cows and 7.4 goats, reflecting the urban/peri-urban nature of the county. In contrast, the county with the highest mean number of livestock appears to be Budi, with respondents' households owning on average 37.9 cows and 49.3 goats – more than households in pastoralist Bor South and Kapoeta South. However, as demonstrated by figures 15 and 16, confidence intervals often overlap, indicating that there is no statistically significant difference between the counties under study on the issue of livestock ownership.

Figure 15. Mean Number of Cows Per County, With 95% Confidence Intervals

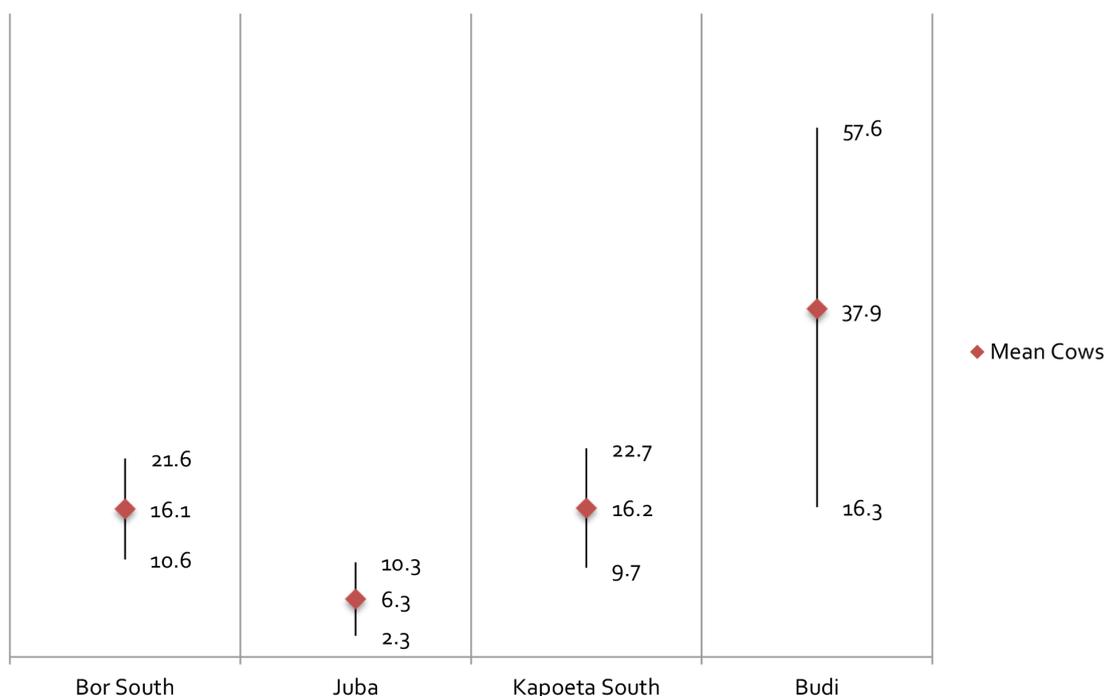
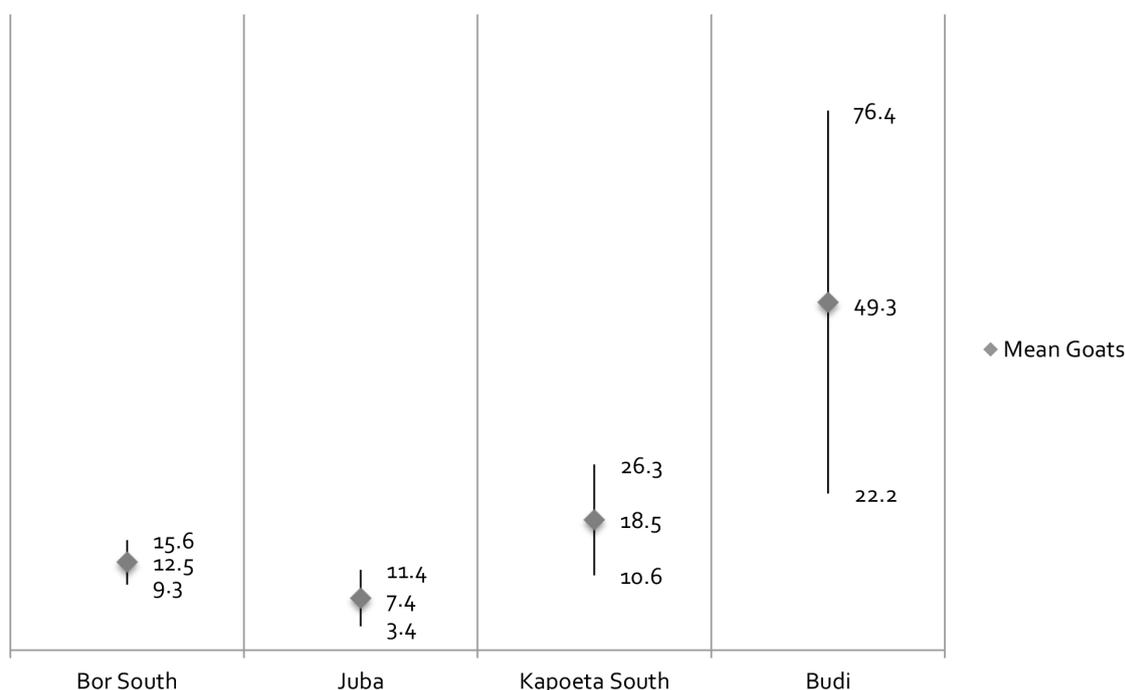


Figure 16. Mean Number of Goats Per County, With 95% Confidence Intervals



Non-agricultural or pastoral sources of income are rare in Kapoeta South and Budi. In the other counties surveyed, occupations include:

In Juba:

- Beautician or hairdresser (20.9%, n=61)
- Laundry services (18.8%, n=55)
- Carpentry (14.7%, n=43)
- Selling tea (14%, n=41)

In Bor South:

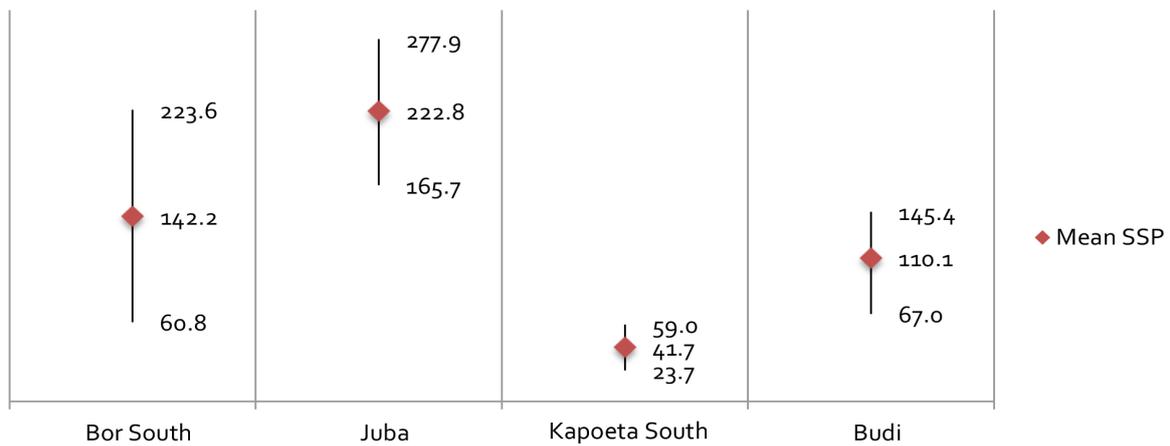
- Beautician or hairdresser (12.4%, n=42)
- Carpentry (10.9%, n=37)
- Construction site labourer (10%, n=34)

At the aggregate level, 24.7% (n=148) of male youth are engaged in livestock herding/selling and 12.3% (n=74) in gardening. Meanwhile, 12.7% (n=90) of female youth are engaged in gardening and 12.5% (n=82) in farming; a further 12.6% (n=83) of female respondents work as beauticians/hairdressers.

### 3.3.2 Income Generation and Spending

Among respondents with a source of income, there is a strong variation in mean weekly income between counties, as demonstrated by figure 17. Indeed, while the mean weekly income in Juba is 222.8 SSP, the mean weekly income in Kapoeta South is only 41.7 SSP.

Figure 17. Mean Weekly Income by County, with 95% Confidence Intervals

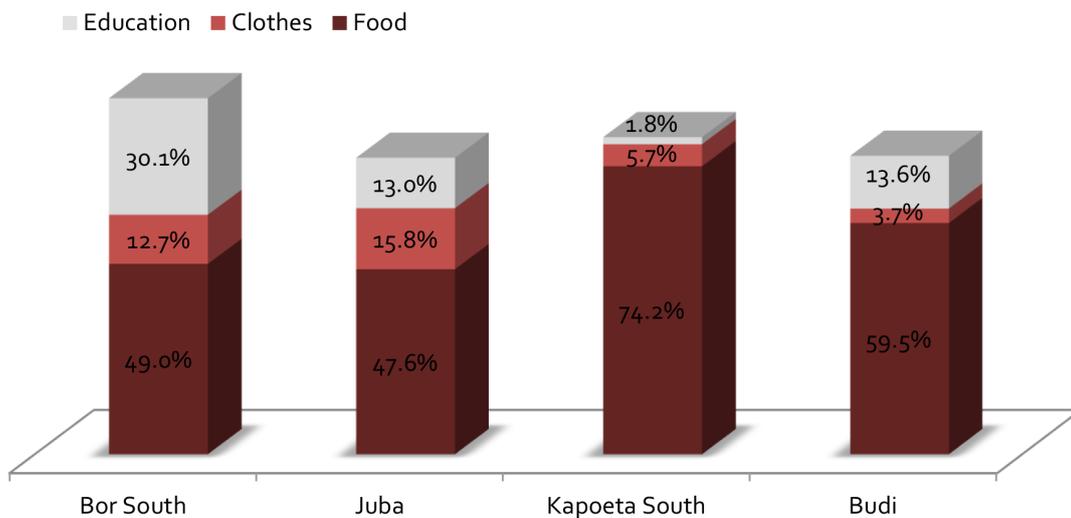


The large confidence for Bor South indicates that while the mean weekly income is different from the other counties under study, there is also a much higher degree of income inequality. The wide variation in reported incomes may be a result of a wider range in the incomes being earned in Bor South and potentially a larger range of employment opportunities. In Juba, Kapoeta South and Budi by contrast there is significantly less variance in income and income inequality suggesting that there are more uniform opportunities for employment and income generation.

A majority of respondents from all counties report spending most of their money on food, whilst education and clothes are also popular expenses. Spending on food, education and clothes by county is represented in figure 18. Notably, 3.8% (n=17) of respondents in agro-pastoralist Budi also indicate spending most of their income on agricultural tools and supplies.

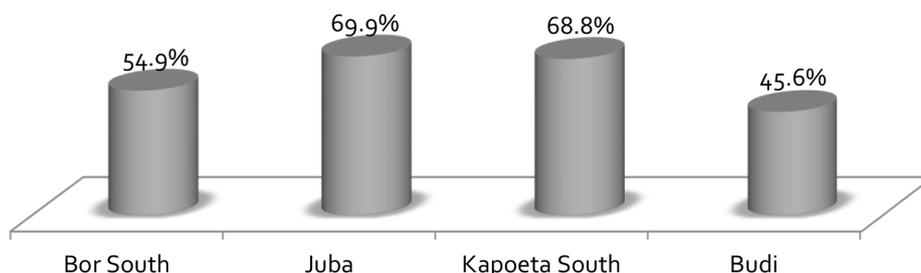
With regards to gender, while a majority of both male and female respondents indicate spending most of their money on food (54% [n=356] and 50.7% [n=371] respectively), the second most commonly cited expense is clothes for female respondents at 15.6% (n=76), but education for male respondents at 19% (n=93).

Figure 18. Percentage of Respondents Spending Most of their Money on Food, Education and Clothes



Most respondents are not able to earn enough money to make savings for future emergencies.<sup>68</sup> In particular, 69.9% (n=204) of respondents in Juba and 68.8% (n=204) in Kapoeta South report not earning enough money to save for emergencies (see figure 19). In Kapoeta South, 35.8% (n=34) of unemployed youth in fact report not making enough money to meet their basic needs.<sup>69</sup>

Figure 19. Percentage of Respondents Unable to Make Savings for Emergencies, by County



68 Note: It is uncertain whether respondents are aware of possible means of savings, and whether they have alternative contingency plans.

69 Note: Compared to 3.6% (n=3) in Juba, 1.2% (n=2) in Bor South, and none in Budi.

Contrasting with these findings, it emerges that respondents in Budi are nonetheless more likely than respondents in other counties to have to borrow money or buy on credit, at 50% (n=147).<sup>70</sup> In Bor South, Kapoeta South and Budi, respondents appeal to relatives when they need to borrow money; while many respondents also appeal to relatives in Juba, a higher percentage appeal to friends. Meanwhile, a majority of respondents with no source of income get money and food from their parents, and others also receive help from relatives or friends.

### 3.3.3 Youth Skills and Training

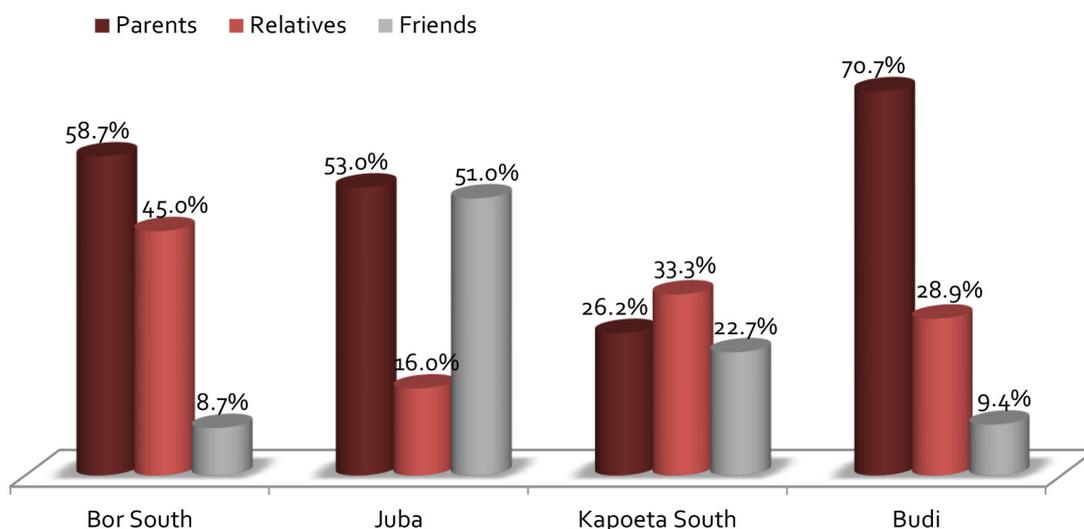
#### 3.3.3.1 Existing Skills

FGD participants report having acquired a number of useful skills through education and training, including:<sup>71</sup>

- Literacy
- English
- Math
- Communication skills
- Business skills
- Computer skills
- Hygiene and sanitation
- Carpentry
- Masonry
- Driving
- Mechanic skills
- Agricultural skills

Meanwhile, surveyed youth with an existing source of income most frequently acquired the skills they use to make money from parents, relatives and friends – suggesting that orphans may face additional obstacles. As illustrated by figure 20, 70.7% (n=174) of employed youth in Budi report having learned their trade from their parents, as do 58.7% (n=89) of those in Bor South and 53% (n=106) of those in Juba; in Kapoeta South, this figure is slightly lower at 26.2% (n=59), with slightly more employed youth having acquired their skills from relatives (33.3%, n=75).

Figure 20. Parents, Relatives and Friends as Sources of Skills Among Income Generating Youth, by County

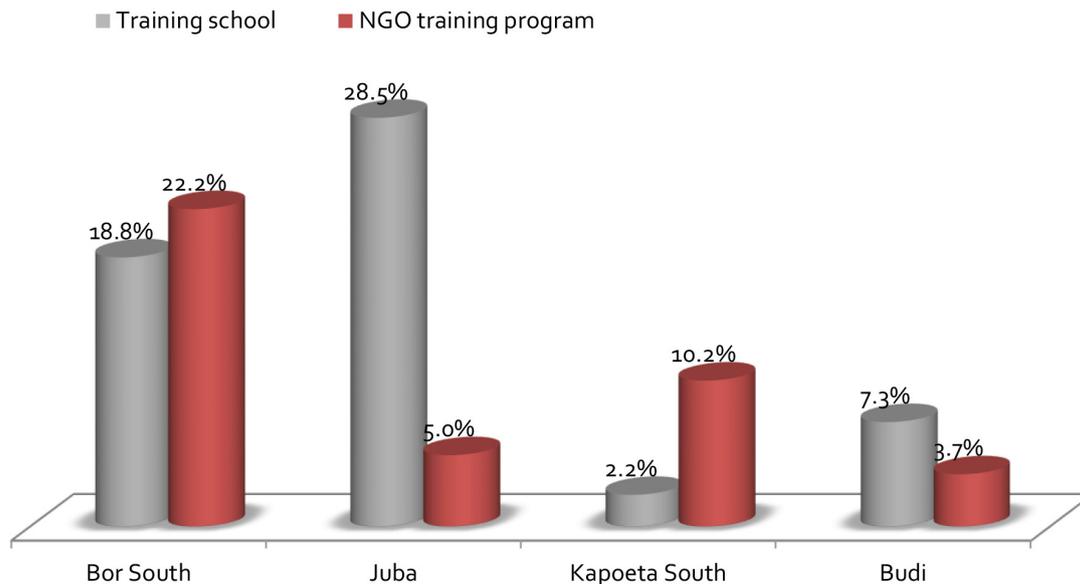


70 Note: Compared to 30.5% (n=89) in Juba, 23.4% (n=78) in Kapoeta South, and 18% (n=61) in Bor South.

71 FGDs in Juba, Bor South, Kapoeta South and Budi, in July 2015.

Employed youth also report having acquired their skills through other means, including through training schools and NGOs (see figure 21). In Bor South, 22.2% (n=33) received training from NGOs – however, it is unclear whether NGOs have continued to provide training since the onset of the conflict in December 2013, which has badly affected the county. Few respondents reported having received training from training schools or NGOs in Kapoeta South or Budi, suggesting lower levels of intervention in those counties compared to urban Juba or conflict-affected Bor South.

*Figure 21. Employed Youth Having Acquired Skills Through Training Schools and NGO Training Programs, by County*



Among those who received training from NGOs, it is relevant to note that many trainings appear to have focused on existing livelihoods:

**Animal healthcare:**

- 90.9% (n=30) in Bor South;
- 21.7% (n=5) in Kapoeta South.

**Livestock herding/selling:**

- 42.4% (n=14) in Bor South;
- 26.1% (n=6) in Kapoeta South.

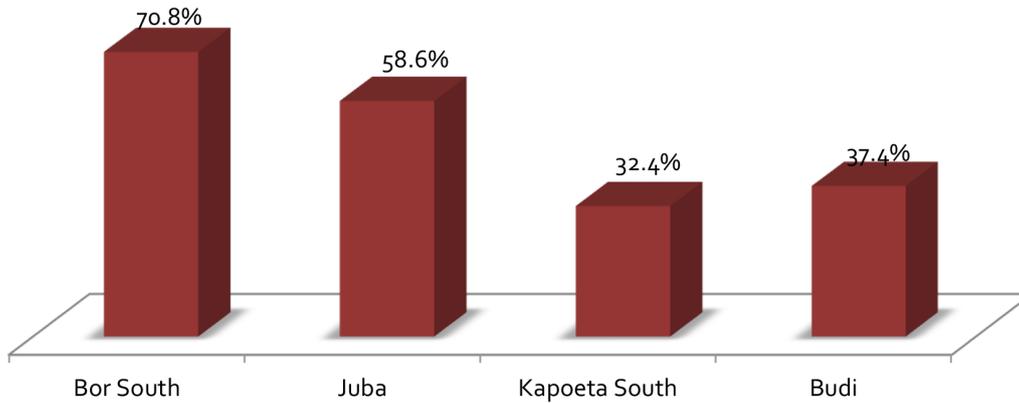
**Gardening:**

- 26.1% (n=6) in Kapoeta South.

Other relatively common types of training received from NGOs in Bor South include brewing, food preparation, blacksmith and beautician/hair; in Juba, options appear to be more limited, with trainings primarily focusing on tailoring (70%, n=7) and beautician/hair (60%, n=6). In aggregate, animal healthcare is the most commonly received type of training for both male and female youth having received training by NGOs (51.3% [n=20] and 50% [n=18] respectively); however, the second most commonly received training is livestock herding/selling for males (28.2%, n=11), and food preparation for females (44.4%, n=16).

Overall, most respondents having received training from NGOs are relatively satisfied with the quality of the training provided (see figure 22). Respondents were however less satisfied in Budi and Kapoeta South.<sup>72</sup>

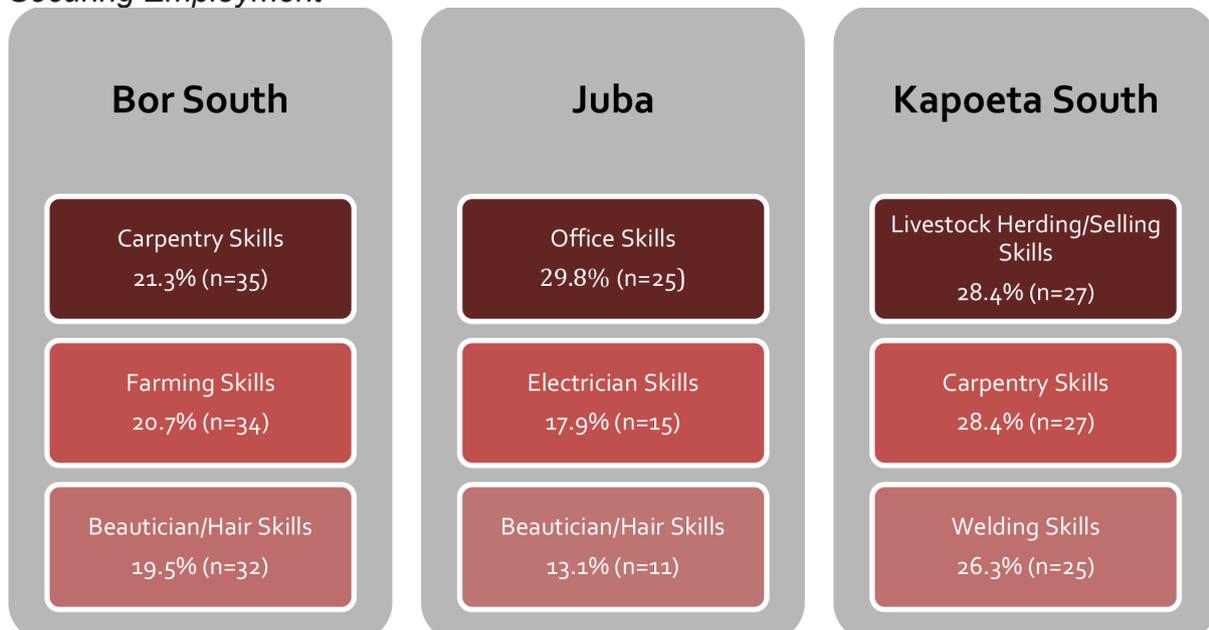
Figure 22. Percentage of Respondents Having Received NGO Training Who Found it of Good/Very Good Quality, by County



### 3.3.3.1 Training Needs

Although respondents with no source of income are often uncertain what skills are needed in order to secure employment or successfully enter the labour market, others are able to identify potentially useful skills. Figure 23 highlights the top three skills identified by unemployed respondents.

Figure 23. Top Three Skills Perceived by Unemployed Respondents as Useful for Securing Employment<sup>73</sup>



72 Note: Reasons for satisfaction or dissatisfaction are unspecified.

73 Note: As discussed previously, very few respondents have no source of income in Budi. Beautician, Carpentry and Office Work were identified as useful trainings by 2 respondents each.

Gender breakdown suggests that, in aggregate, males most commonly identify carpentry as a useful skill for securing employment (28.1%, n=44) while females identify office skills (21.5%, n=43) and beautician/hair skills (21%, n=42), reflecting stereotypes on socialisation. Annex 2 illustrates what type of skills male and female respondents from each county believe would help them get a job.

With regards to starting and running a successful business, perceived necessary skills vary by county, as demonstrated by figures 24 to 27. While agriculture training and marketing are perceived to be important across all counties, skills such as finance and computer skills are perceived to be much more important in Juba (and to some extent in Bor South) than in Kapoeta South and Budi, likely reflecting the urban/rural divide. Indeed, while 43.2% (n=126) of respondents in Juba perceive financial skills to be necessary, as do 17.7% (n=60) in Bor South, this is the case for only 8.4% (n=28) and 2% (n=6) in Kapoeta South and Budi respectively.

Figure 24. Perceived Necessary Skills for Business in Bor South

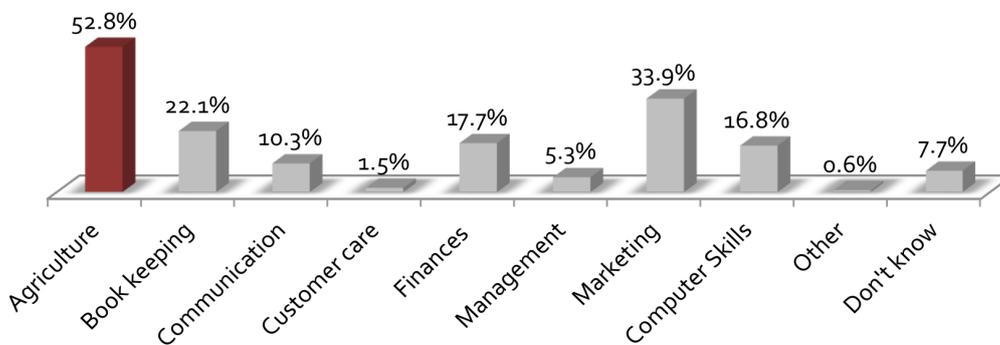


Figure 25. Perceived Necessary Skills for Business in Juba

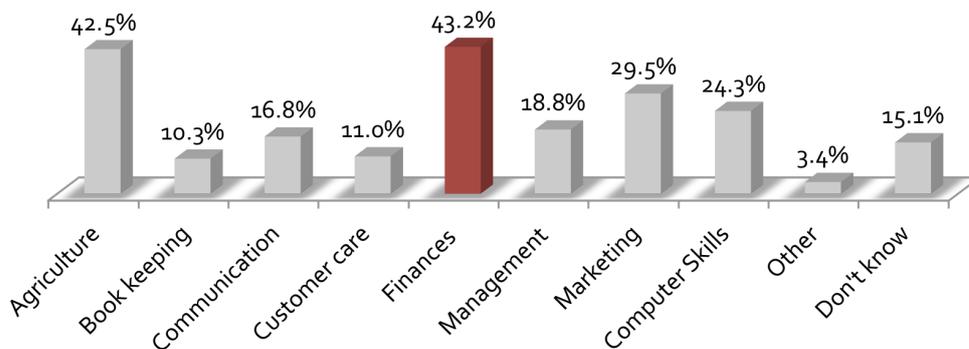


Figure 26. Perceived Necessary Skills for Business in Kapoeta South

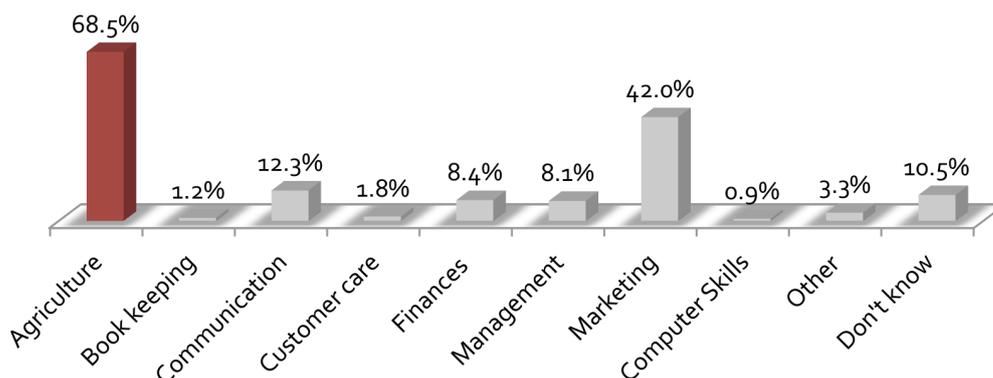
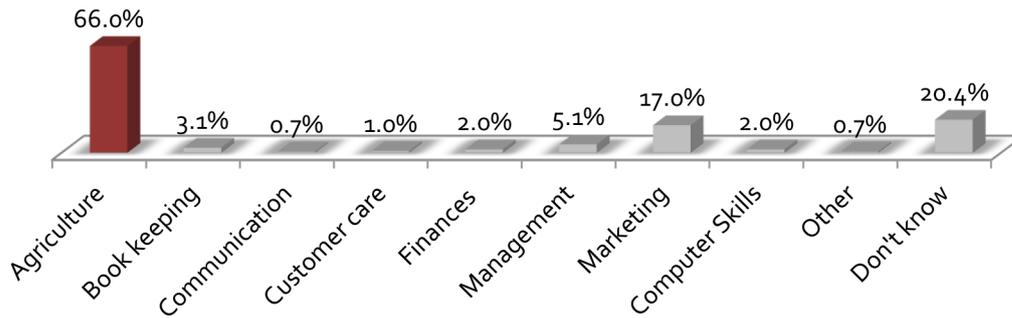


Figure 27. Perceived Necessary Skills for Business in Budi

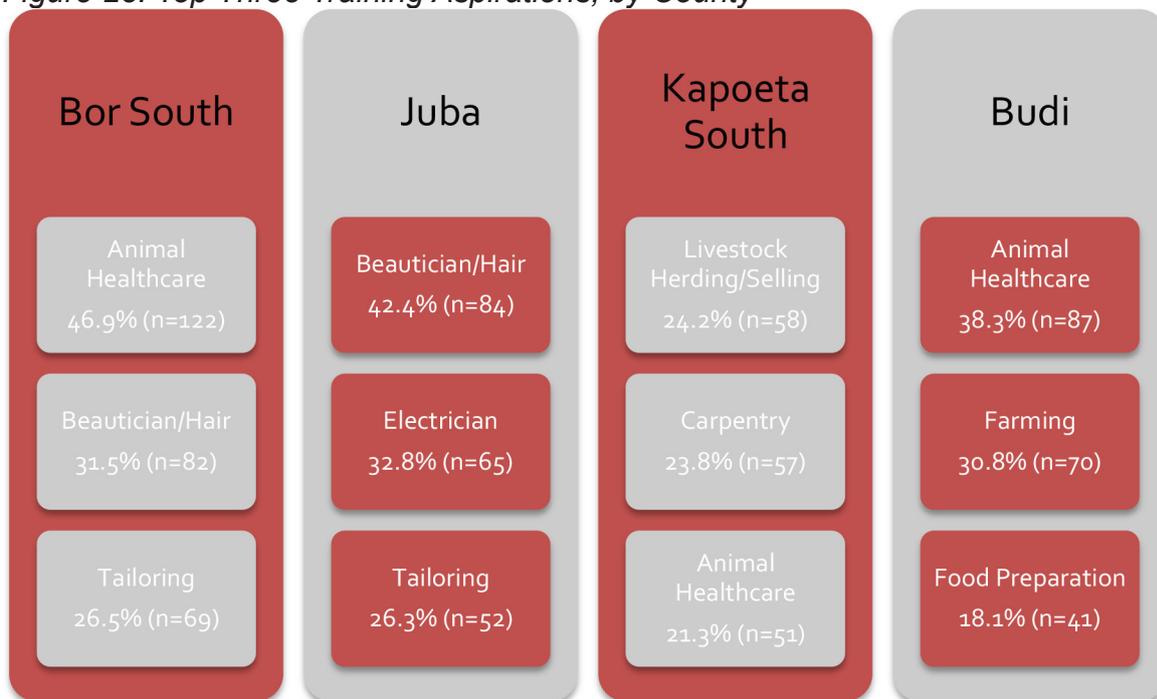


Youth age 17-24 are keener to undertake training than younger youth, at 77.4% (n=595) compared to 62.9% (n=330). However, a majority of respondents in each county would be interested in doing training to learn a new trade:

- 76.7% (n=260) in Bor South;
- 67.8% (n=198) in Juba;
- 72.1% (n=240) in Kapoeta South; and
- 77.2% (n=227) in Budi.

Types of training desired vary by county – the top three most popular types of training for each county are outlined in figure 28.<sup>74</sup>

Figure 28. Top Three Training Aspirations, by County



When disaggregated by gender, animal healthcare is the most popular training aspiration for male respondents, highlighted by 43.5% (n=192) of male respondents. This reflects the importance of pastoralism among male youth in South Sudan. Meanwhile, the most popular type of training for female respondents is beautician/hair training, highlighted by 34.1% (n=165) of female respondents.

74 Note: Respondents selected their training aspirations from a list of 30 possible types of trainings, including the option to specify another type of training. Only 11 respondents specified 'other' training aspirations.

### 3.3.4 Livelihood Aspirations

Many employed youth with an existing source of income aspire to have an alternative source of livelihood. In Bor South, employed youth eager to diversify their source of livelihood wish to become blacksmiths, or work as beauticians/hairdressers. In Juba, while many employed youth in would also like to become blacksmiths, others wish to become office workers or aspire to be electricians. Among employed respondents in Kapoeta South and Budi, aspirations reflect the counties respective economies: 35.2% (n=31) in Kapoeta South wish to work in livestock herding/selling, while 50% (n=64) in Budi would like to work in large scale farming. Figure 29 highlights the top three alternative livelihood aspirations of employed youth, broken down by gender and age.

*Figure 29. Top Three Alternative Livelihood Aspirations Among Employed Youth, by Gender and Age*

#### Male

- Livestock Herding/Selling: 21% (n=42)
- Carpentry: 17.5% (n=35)
- Farming: 13.5% (n=27)

#### Female

- Farming: 25.2% (n=52)
- Beautician/Hairdresser: 23.8% (n=49)
- Food Preparation: 23.3% (n=48)

#### 10 to 16

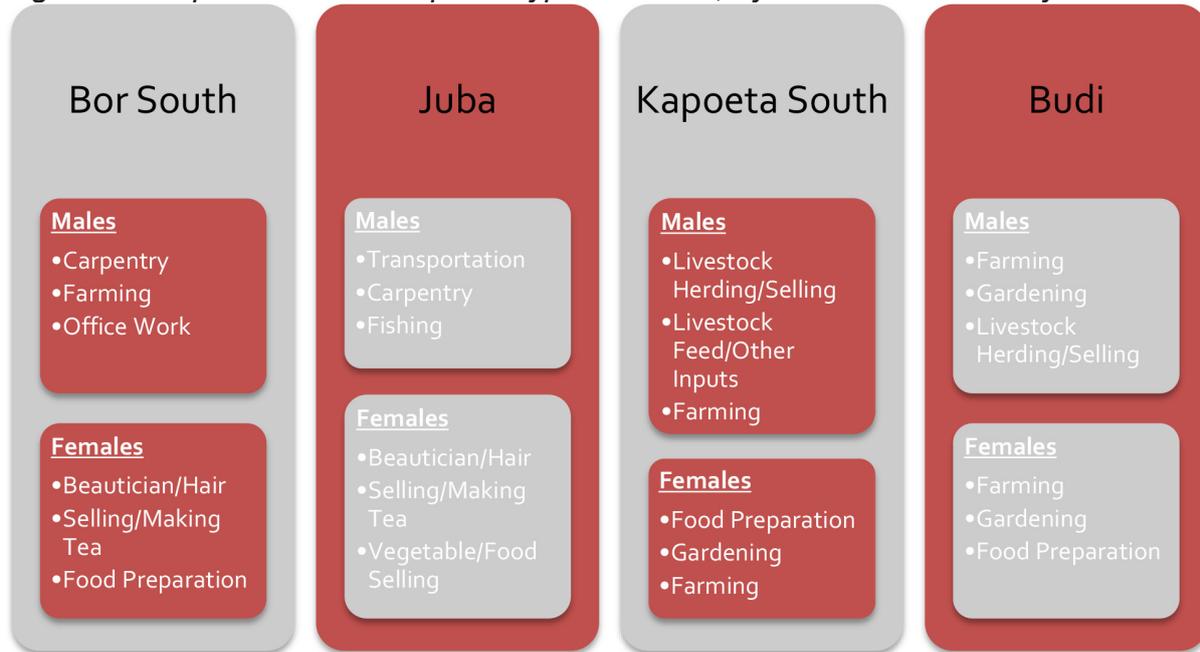
- Food Preparation: 22.3% (n=29)
- Farming: 20.8% (n=27)
- Carpentry: 16.2% (n=21)

#### 17 to 24

- Farming: 18.8% (n=52)
- Beautician/Hairdresser: 18.1% (n=50)
- Livestock Herding/Selling: 15.9% (n=44)

Meanwhile, figure 30 highlights perceived popular types of work for males and females from each county. Although farming and gardening are perceived to be popular occupations for both genders, other types of employment appear very gender specific: for example, catering (including food preparation and/or making tea) and work as a beautician/hairdresser are listed as exclusively female occupations.

Figure 30. Top Three Most Popular Types of Work, by Gender and County



FGD participants identified different types of livelihood aspirations to those highlighted in the quantitative data, with many participants wishing to engage in education (as teachers, but also school directors), health (as doctor and nurses) and government (including president). The education, health and government sectors were in fact mentioned in most FGDs. The livelihoods aspirations of FGD participants often appear to be based on a communitarian desire on behalf of youth to help develop the welfare of their country and/or community: to provide education for children, or to treat the sick. Likewise, young girl who expressed desire to become a lawyer explained she could enforce “fair justice in order for the community to respect laws and orders.”<sup>75</sup>

### 3.3.5 Barriers to Employment and Income Generation

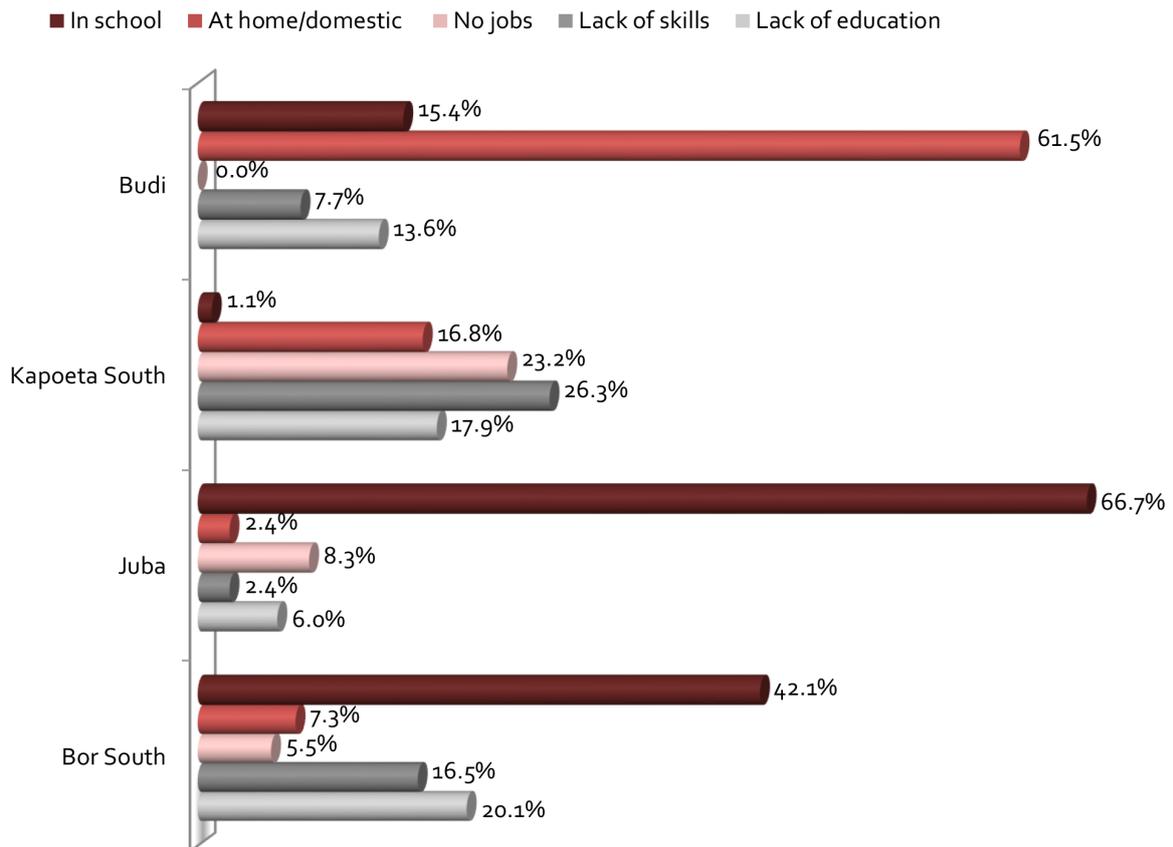
While the majority of unemployed respondents in Juba and Bor South are not working because they are in school,<sup>76</sup> other factors also represent barriers to employment and income generation: major reasons for lack of employment include lack of jobs, lack of skills, lack of education and domestic work, as illustrated by figure 31. For example, in Bor South, lack of education is perceived to be the reason for the unemployment of 20.1% (n=33) of respondents; in Kapoeta South, lack of skills is the cause for 26.3% (n=25) of cases of unemployment. FGD participants, who are worried by unemployment, similarly identify lack of education, qualifications or training as barriers to employment and income generation.<sup>77</sup>

75 FGD in Budi on July 31, 2015.

76 Note: In aggregate, the majority of youth between the age of 10 and 16 who do not currently have a source of income are in school: 58% (n=89), compared to 36.2% (n=39) of youth aged 17-24.

77 FGDs in Juba, Bor South, Kapoeta South and Budi, July 2015.

Figure 31. Major Reasons for Lack of Employment/Income Generation, by County

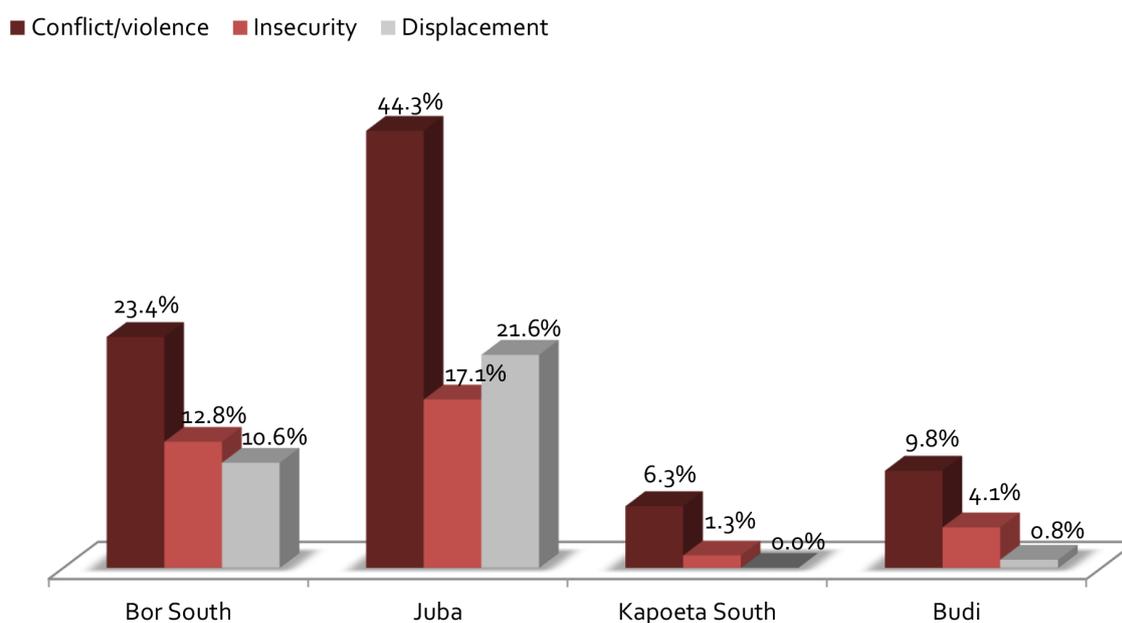


Furthermore, while large numbers of respondents with an existing source of income indicate that they have additional skills, which could enable them to engage in alternative forms of livelihoods, a number of factors prevent them from doing so. Lack of money to buy materials is a major barrier highlighted by high percentages of respondents with untapped additional skills:

- 84% (n=79) in Bor South;
- 68.2% (n=60) in Juba;
- 68.8% (n=55) in Kapoeta South; and
- 70.5% (n=86) in Budi, where 45.9% (n=56) are also unable to find necessary materials.

Lack of business understanding is also perceived as a barrier, for example by 47.5% (n=38) in Kapoeta South. Meanwhile, in conflict-affected Juba and Bor South in particular, conflict, insecurity and displacement also represent key barriers to alternative livelihood opportunities, as demonstrated by figure 32.

Figure 32. Conflict-related Barriers to Alternative Livelihoods, by County



Meanwhile, self-employed respondents identify a number of barriers to increasing their income, the most important of which is once again the lack of money to buy materials. The top three barriers to additional income generation in each county are highlighted in table 3.

Table 3. Top Three Barriers to Increased Income Generation, by County

Bor South	Juba	Kapoeta South	Budi
Lack of money to buy materials: 69.6% (n=55)	Lack of money to buy materials: 62% (n=62)	Lack of money to buy materials: 49.2% (n=94)	Lack of money to buy materials: 63.5% (n=120)
Lack of education: 17.7% (n=14)	Conflict/violence: 41% (n=41)	Lack of education: 47.1% (n=90)	Lack of materials: 30.7% (n=58)
Conflict/Violence/No place to make goods: 16.5% (n=13)	Lack of business understanding: 32% (n=32)	Lack of business understanding: 27.8% (n=53)	Lack of education: 20.1% (n=38)

Setting up a business is also viewed as a challenge, in particular in Bor South where 85% (n=288) of respondents consider it difficult to start working for themselves. Working for oneself is perceived as easiest in Kapoeta South, where 46.9% (n=156) consider it easy to set up a business. Barriers to working for oneself are similar to the barriers to increased income generation above-mentioned, in particular with regards to lack of money to buy materials. The top three barriers are highlighted in table 4.

**Table 4. Top Three Barriers to Working for Oneself, by County**

Bor South	Juba	Kapoeta South	Budi
Lack of money to buy materials: 74.7% (n=215)	Lack of money to buy materials: 77.8% (n=147)	Lack of money to buy materials: 50% (n=60)	Lack of money to buy materials: 56.5% (n=104)
Lack of materials: 24% (n=69)	Lack of materials: 28% (n=53)	Lack of education: 37.5% (n=45)	Lack of materials: 39.7% (n=73)
Insecurity: 19.8% (n=57)	Conflict/Violence: 42.9% (n=81)	Lack of business understanding: 21.7% (n=26)	Lack of education: 27.7% (n=51)

**Summary of Findings:**

- 40.2% (n=197) of youth between the age of 10 and 16 and 20.7% (n=159) of youth age 17 to 24 have no source of income. However, many of these youth are in fact in school.
- Livestock and cultivation represent major sources of livelihoods in Bor South, Kapoeta South and Budi Counties.
- Respondents spend most of their money on food, and are not able to make savings for future emergencies.
- Most respondents would be interested in doing training to learn a new trade. Animal healthcare is among the top three training aspirations in Bor South, Kapoeta South and Budi Counties. While many youth in Juba aspire to beautician/hair training, it is already the source of income of 20.9% (n=61) of respondents in that county, suggesting potential oversaturation of the market.
- Lack of money to buy materials is a major barrier to employment, income generation and business.

## 3.4 Nutrition and Food Security

The overview of household spending presented in the previous section reveals that youth in the counties of interest spend most of their income on food. Food insecurity is currently a major concern for South Sudanese youth: FEWSNET estimates that nearly a third of the population is currently experiencing crisis or emergency food insecurity.<sup>78</sup> After a discussion of breastfeeding practices, this chapter highlights major food sources, and assesses the current food security situation. It also examines the food security outlook, and discusses potential threats to food security.

### 3.4.1 Breastfeeding Practices

Breastfeeding is recognized to have significant impacts on child survival. Indeed, “an exclusively breastfed child is 14 times less likely to die in the first six months than a non-breastfed child.”<sup>79</sup> Breastfeeding also enhances children’s health, nutrition and development. For optimal breastfeeding practices, UNICEF and WHO recommend:

- “Initiation of breastfeeding within the first hour after the birth;
- Exclusive breastfeeding for the first six months; and

78 FEWSNET, “South Sudan: Some households face Catastrophe as food aid delivery remains blocked and prices spike,” June 24, 2015, accessed August 26, 2015. <http://www.fews.net/east-africa/south-sudan/alert/june-24-2015>

79 UNICEF, “Breastfeeding,” accessed August 23, 2015. [http://www.unicef.org/nutrition/index\\_24824.html](http://www.unicef.org/nutrition/index_24824.html)

- Continued breastfeeding for two years or more, together with safe, nutritionally adequate, age appropriate, responsive complementary feeding starting in the sixth month.<sup>80</sup>

However, these optimal breastfeeding practices are rarely carried out. As shown in figure 33, 34.5% (n=29) of the mothers surveyed in Budi who breastfed their baby did not start breastfeeding until the day after the birth – a much higher proportion than in Bor South, where this was the case for only 11.1% (n=5). Similarly, in Kapoeta South, only 14.6% (n=7) of breastfeeding mothers report having started to breastfeed their infant immediately after birth.

Figure 33. Time Before First Breastfeed After Birth, by County

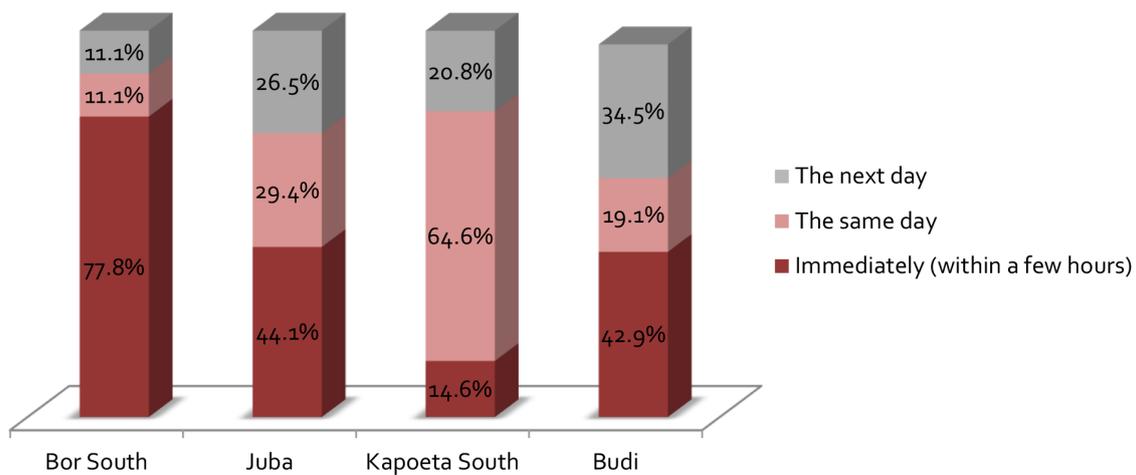
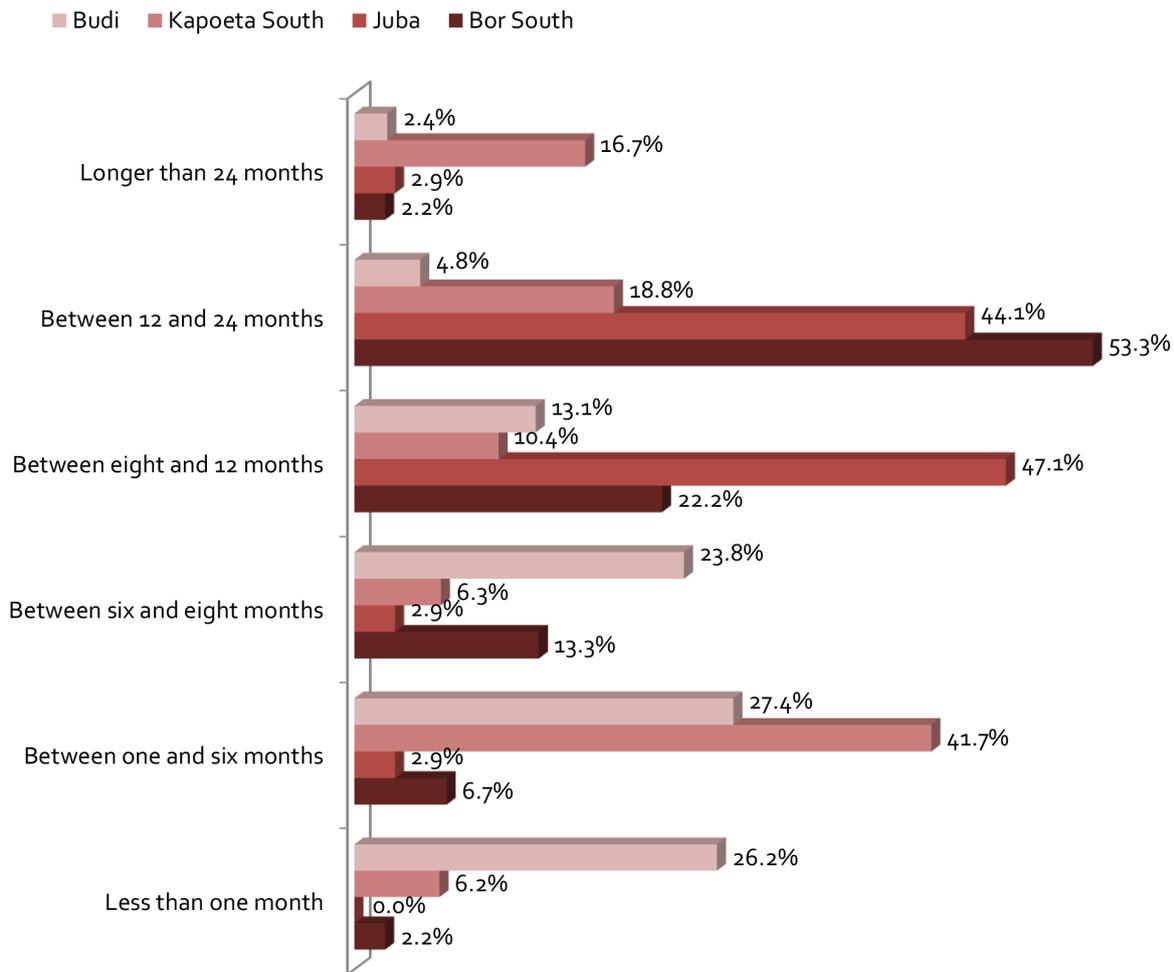


Figure 34 shows that the period for which a child is breastfed also varies by county, rarely meeting the recommended two years of breastfeeding, highlighting the need for further focus on life skills training programmes for young mothers. In Budi, 26.2% (n=22) of surveyed mothers who breastfed their baby did so for less than a month; in contrast, in Bor South and Juba, 53.3% (n=24) and 44.1% (n=15) respectively breastfed their baby between 12 and 24 months. Kapoeta South has the highest percentage of surveyed mothers breastfeeding their baby longer than 24 months, at 16.7% (n=8).

In aggregate, findings indicate that younger mothers breastfeed for shorter periods of time: while 25% (n=11) of mothers between the age of 10 and 16 breastfeed for less than a month, this is the case for only 5.2% (n=15) of mothers age 17 to 24. Similarly, 36.3% (n=49) of mothers from the older age group breastfeed their babies between 12 and 24 months, compared to 18.6% (n=3) of younger mothers. Younger mothers, it appears, are less aware of optimal breastfeeding practices, and should be particularly targeted by training programmes and awareness campaigns.

80 UNICEF, "Breastfeeding," accessed August 23, 2015. [http://www.unicef.org/nutrition/index\\_24824.html](http://www.unicef.org/nutrition/index_24824.html)

Figure 34. Length of Breastfeeding, by County



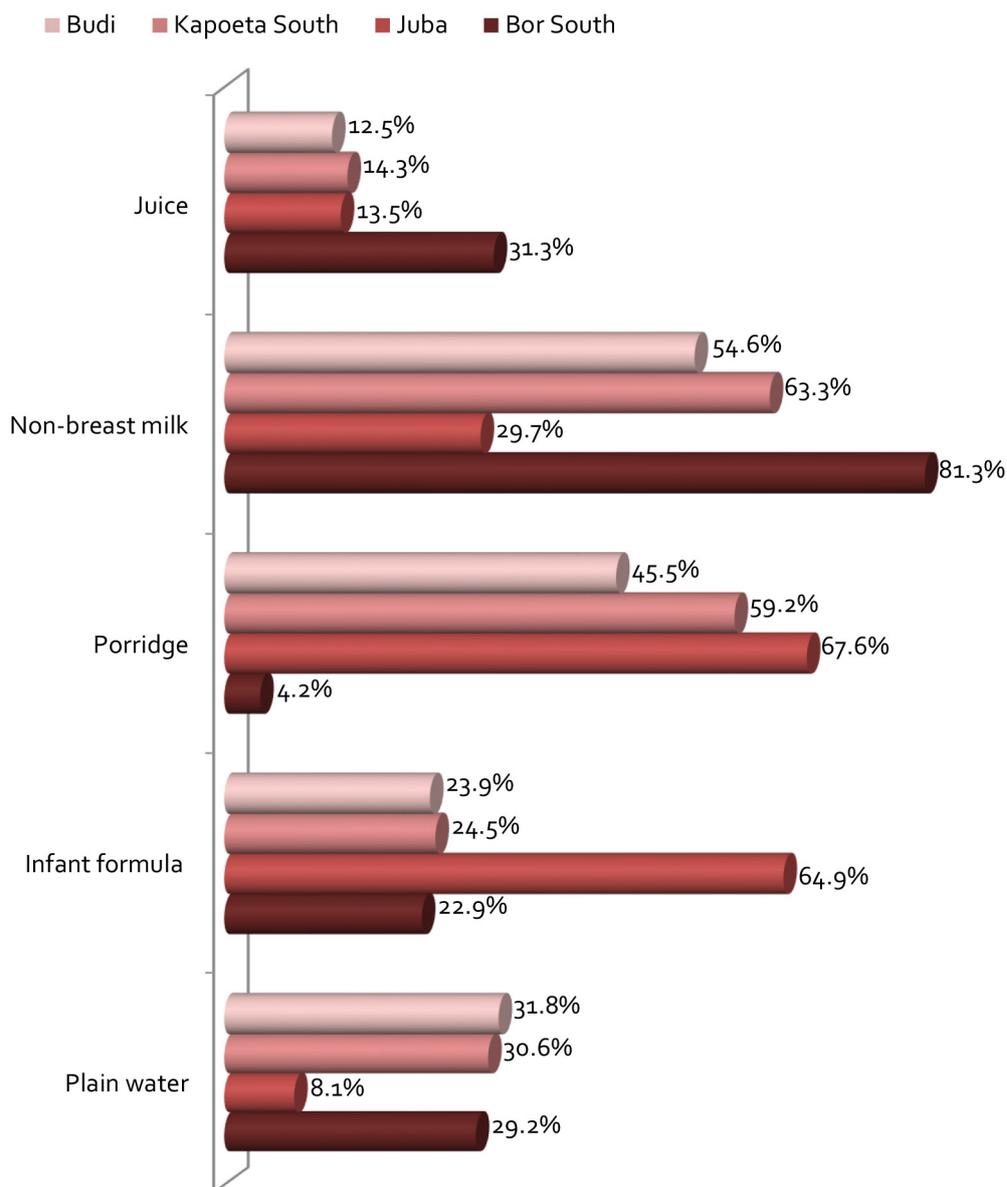
In addition to breast milk, a variety of other foods are fed to babies in their first year of life, as displayed in figure 35. Non-breast milk such as tinned, powdered or fresh animal milk is a common food, in particular in Bor South where 81.3% (n=39) of surveyed mothers feed their babies non-breast milk during their first year. Infant formula is particularly popular in Juba, where it is used by 64.9% (n=24) of the mothers surveyed – it would seem likely that infant formula is more readily available in Juba than in the other more rural counties.<sup>81</sup>

Mothers surveyed in Juba, at 8.1% (n=3), have a lower tendency to feed their babies plain water than in other counties. Given that water may be untreated and unsafe to drink, its prevalence in the diet of infants in Budi, Kapoeta South and Bor South is concerning as it could lead to water-borne diseases and diarrhoea.<sup>82</sup> Notably, by age, of mothers surveyed, those between the ages of 10 and 16 appear more likely to feed their babies plain water than those aged 17 to 24, at 46% (n=17) compared to 23.2% (n=43). This appears once again to reflect a possible lack of knowledge of good infant feeding practices among younger mothers, further reinforcing the need for education programmes for young mothers.

81 Note: The reasons for the use of infant formula in Juba is unclear. It is possible that it could be related to advice by health practitioners. However, exclusive breastfeeding is overwhelmingly considered the safest option, including for mothers with HIV. See SSMJ, "Feeding Infants Whose Mothers are HIV-Positive," 2009. <http://www.southsudanmedicaljournal.com/archive/2009-05/feeding-infants-whose-mothers-are-hiv-positive.html>

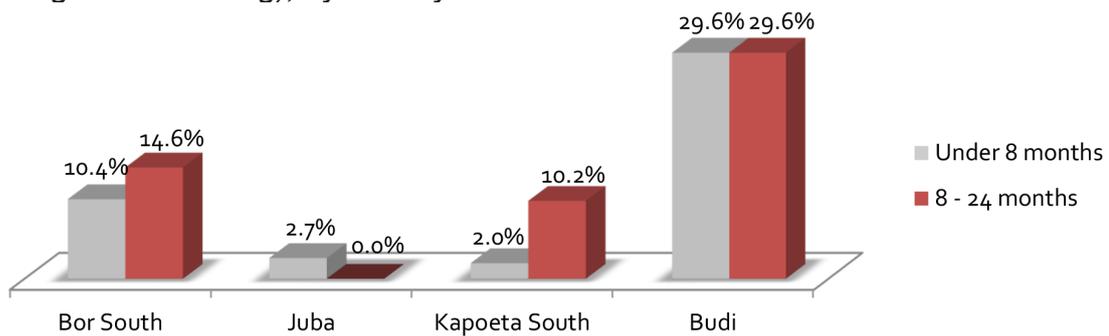
82 Note: Only 60.2% (n=603) of survey respondents attempt to treat water prior to consumption. As such, it is likely that 'plain water' is often untreated.

Figure 35. Feeding of Babies in Their First Year of Life, by County



Mothers surveyed in Budi appear to feed their babies, excluding breast milk, less regularly than in other counties. Indeed, figure 36 shows that 29.6% (n=26) of mothers interviewed in Budi feed their babies less than once a day, regardless of the baby’s age. In contrast, in Kapoeta South, 63.3% (n=31) feed their babies under the age of 8 months more than 3 times a day. It is unclear whether this is a factor of food shortages, since both Budi and Kapoeta South are badly affected by food insecurity, as will be discussed later in this report.

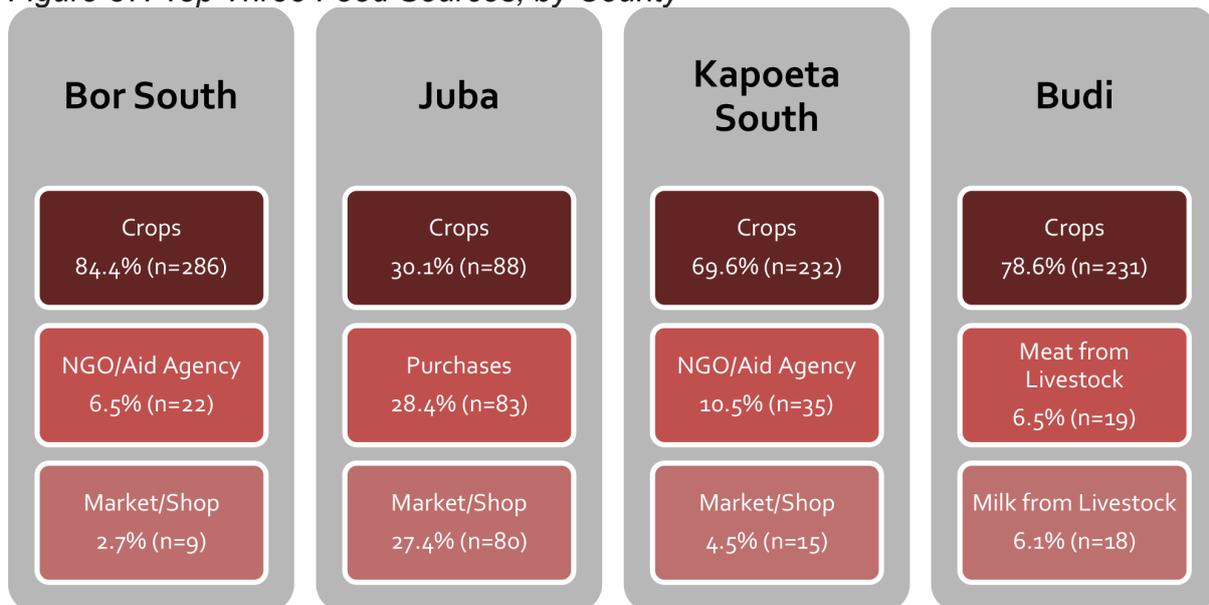
Figure 36. Percentage of Mothers Feeding Their Babies Less Than Once a Day (Excluding Breastfeeding), by County



### 3.4.1 Major Food Sources

Regarding nutrition and food access of those surveyed, crops are the major food source for respondents in all counties, as shown in figure 37. Notably, in Juba, while crops are still the major food source, purchases and market/shops are also identified as major food sources.<sup>83</sup> Meanwhile, NGO/Aid agencies are important sources of food in Bor South and Kapoeta South, suggesting that some households are aid dependent.

Figure 37. Top Three Food Sources, by County



According to FGD participants, youth contribute to their household’s food security by cooking, fetching water or firewood, helping with cultivation, caring for livestock or going to the market. If there is not enough food, youth borrow from neighbours, beg, do casual work (e.g. construction), sell firework or charcoal, gather wild foods, or even migrate. In addition, a female FGD participant in Bor South highlighted the importance of bridewealth: “we girls help our parents by being a source of income.”<sup>84</sup> In particularly in contexts of poverty and food insecurity, bridewealth represents a further incentive for parents to force their daughters into early marriage, leading to a number of child protection concerns and undermining girls’ access to education.

83 Note: ‘Purchases’ and ‘Markets/Shops’ were two different response options, but it is unclear how they differ.

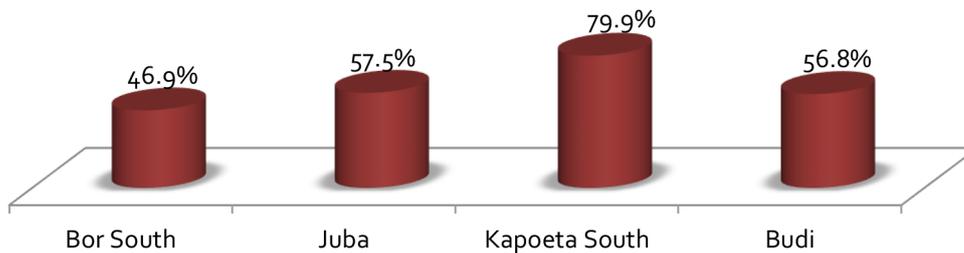
84 FGD in Bor South on July 27, 2015.

### 3.4.2 Food Insecurity

#### 3.4.2.1 Current Food Situation

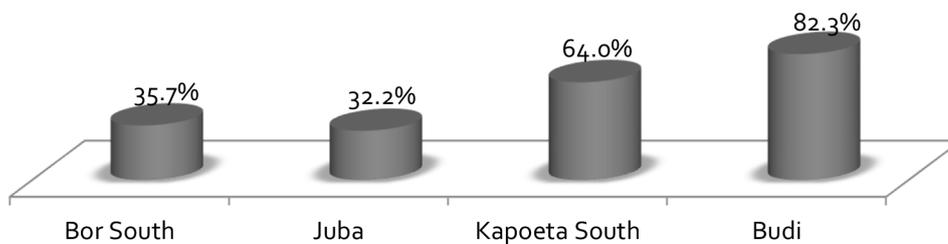
Quantitative data suggests high levels of food insecurity in the counties surveyed. Many respondents do not have enough food to meet their households' needs, as illustrated by figure 38. Older youth appear to be more affected, with 61.9% (n=491) of respondents between the ages of 17 and 24 indicating that they do not have enough food to meet their households' needs, compared to 48.1% (n=269) of youth aged 10 to 16.

Figure 38. Percentage of Respondents Who Do Not Have Enough Food To Meet Their Households' Needs, by County



Meanwhile, based on the creation of a composite indicator of severe food insecurity (see methodology), further analysis suggests that at least 82.3% (n=242) of respondents in Budi and 64% (n=213) of respondents in Kapoeta South are severely food insecure (see figure 39).

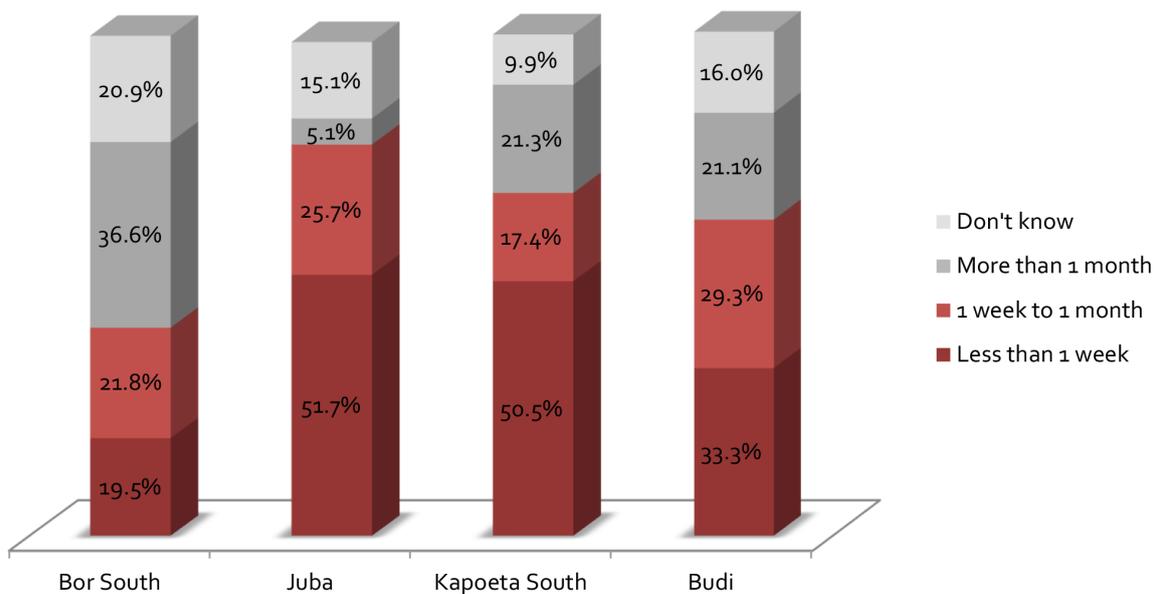
Figure 39. Percentage of Respondents Identified as Severely Food Insecure, by County <sup>85</sup>



Respondents in Bor South appear to have the most food stocks, as demonstrated by figure 40. Indeed, 36.6% (n=124) of respondents in Bor South believe that their current food stock will last more than one month. In contrast, in Juba, this is the case for only 5.1% (n=15) of respondents; 51.7% (n=151) of respondents in Juba in fact believe their current food stock will last less than a week. Notably, there is a relatively high amount of uncertainty regarding the durability of food stocks, with many respondents indicating that they do not know how long their current food stocks will last.

85 Note: See Methodology.

Figure 40. Projected Durability of Current Food Stocks, by County



In Bor South, female respondents appear to harbour more positive perceptions of their food stock than male respondents: 41.5% (n=73) believe their food stock will last more than a month, compared to 31.3% (n=51) of males.<sup>86</sup> Meanwhile, among all respondents, older youth hold more negative perceptions of current food stocks: 46.6% (n=323) of youth age 17 to 24 believe their food stock will last less than a week, compared to 29% (n=160) of youth between 10 and 16.

In terms of difficulties getting enough food to eat, orphans and people with disabilities are consistently identified among the top three most vulnerable groups in all counties; in Bor South, widows are also perceived to be particularly vulnerable, while the host community is perceived to be vulnerable in Kapoeta South and Budi, and returnees in Juba.

86 Note: Results for other counties are not significant at the 95% confidence level when further disaggregated by gender.

### 3.4.3 Threats to Food Security

Figure 41. Major Barriers to Food Security, by County<sup>87</sup>

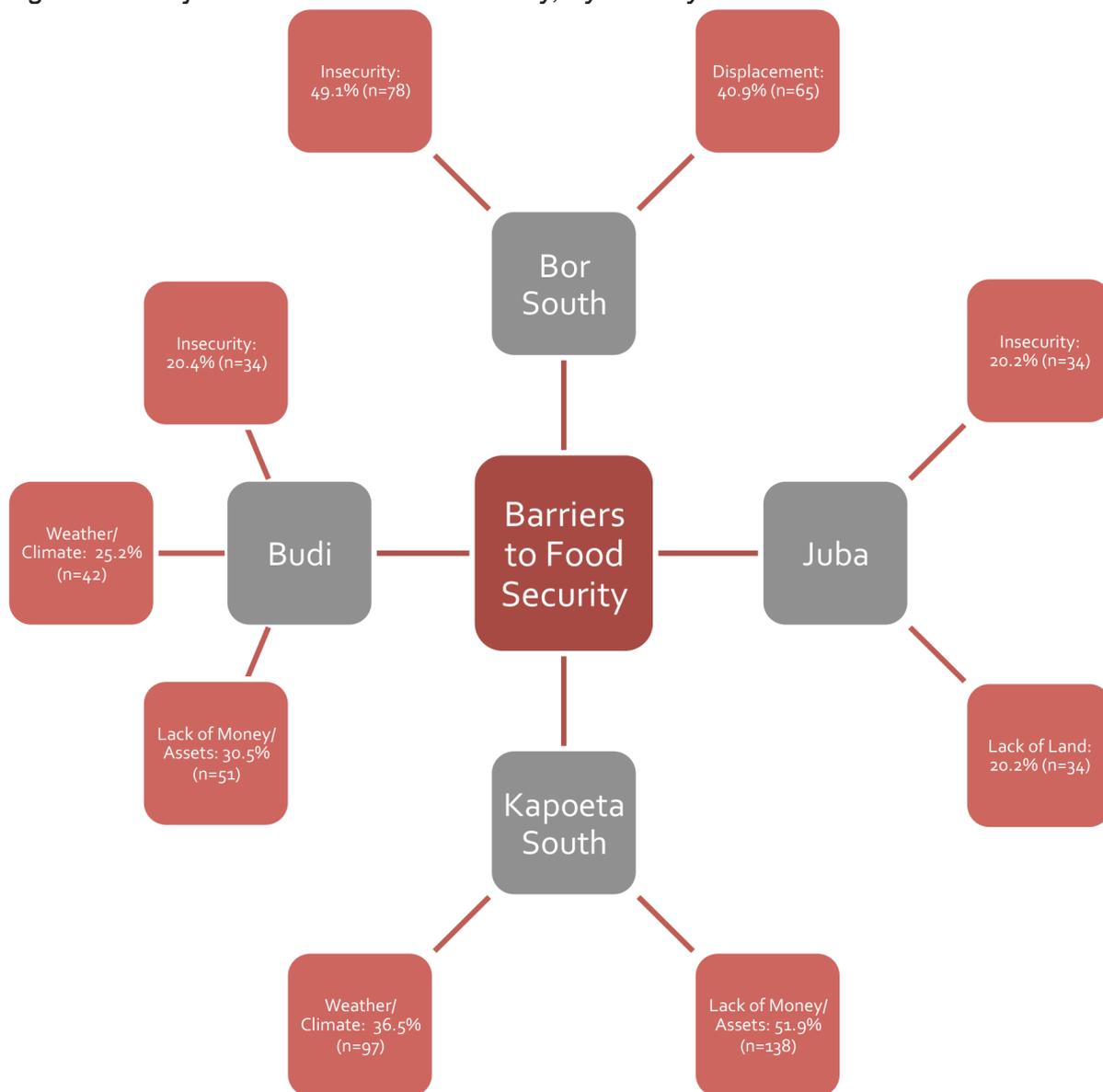


Figure 41, above, identifies major barriers to food security in each county. Given that Budi is not directly affected by the current conflict, it is surprising that insecurity is identified as a reason for food shortages. However, a case study of Budi conducted in 2012 highlighted the prevalence of armed robberies and small arms proliferation; similarly, cattle raiding leads to significant security concerns.<sup>88</sup> Men and women perceive barriers to food security differently in Budi: male respondents identify insecurity as the major barrier at 39.5% (n=30), while the main barrier identified by female respondents is the lack of money or assets at 35.3% (n=32).<sup>89</sup>

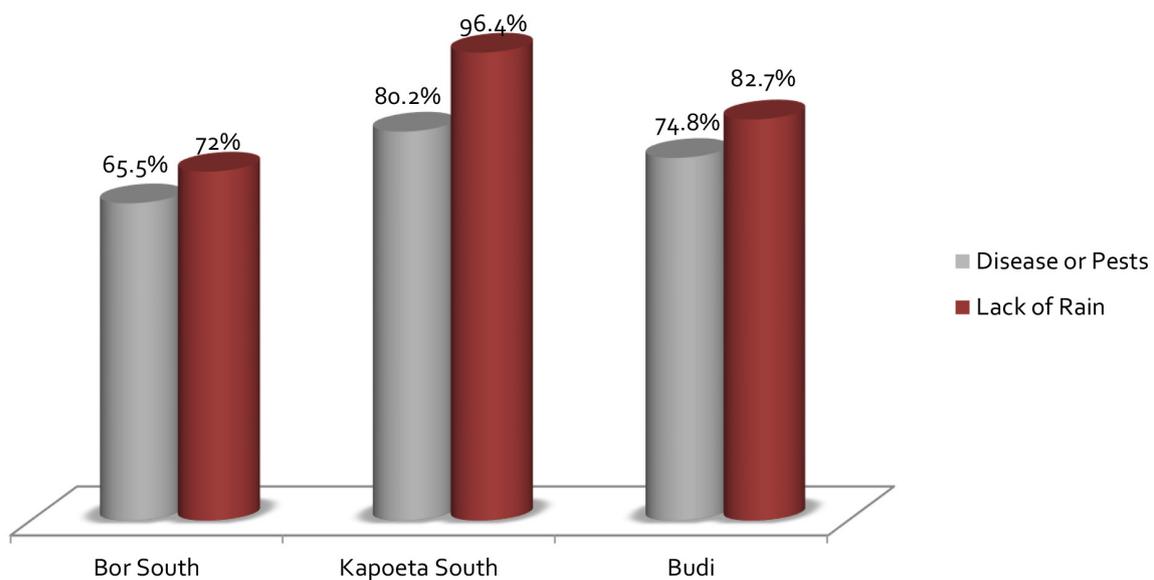
87 Note: Figure based on responses to “what is the main barrier to providing food to your family?”

88 UNICEF, “Youth LEAD Baseline Assessment,” 2012; See also UNDP, “Community Consultation Report, Eastern Equatoria State, South Sudan,” 2012.

89 Note: Results for other counties are not significant at the 95% confidence level when further disaggregated by gender.

Crop diseases and pests represent a further possible threat to food security, having affected a majority of respondents in rural areas in the past year. Moreover, a majority of respondents in those areas argue that there has not been enough rain this year. Based on information gathered in the FGDs, cultivation is highly dependent on the rains during the wet season, which also provides good pastures for livestock. In contrast, FGD participants associate drought with crop failures, death of livestock and food shortages. Figure 42 displays the percentage of respondents in Bor South, Kapoeta South and Budi who have been affected by crop diseases and pests and/or lack of rain in the past year.

*Figure 42. Percentage of Respondents Affected by Crop Diseases and Pests and/or Lack of Rain in the Past Year*<sup>90</sup>



Finally, it is relevant to note that, partly as a result of the drop in cultivation resulting from conflict, staple food prices have increased throughout the country. Indeed, prices of sorghum have nearly doubled: in Juba, in May 2015, sorghum prices had increased from an average of approximately 3.5 SSP/kg to over 6 SSP/kg.<sup>91</sup>

### 3.4.4 Food Security Outlook

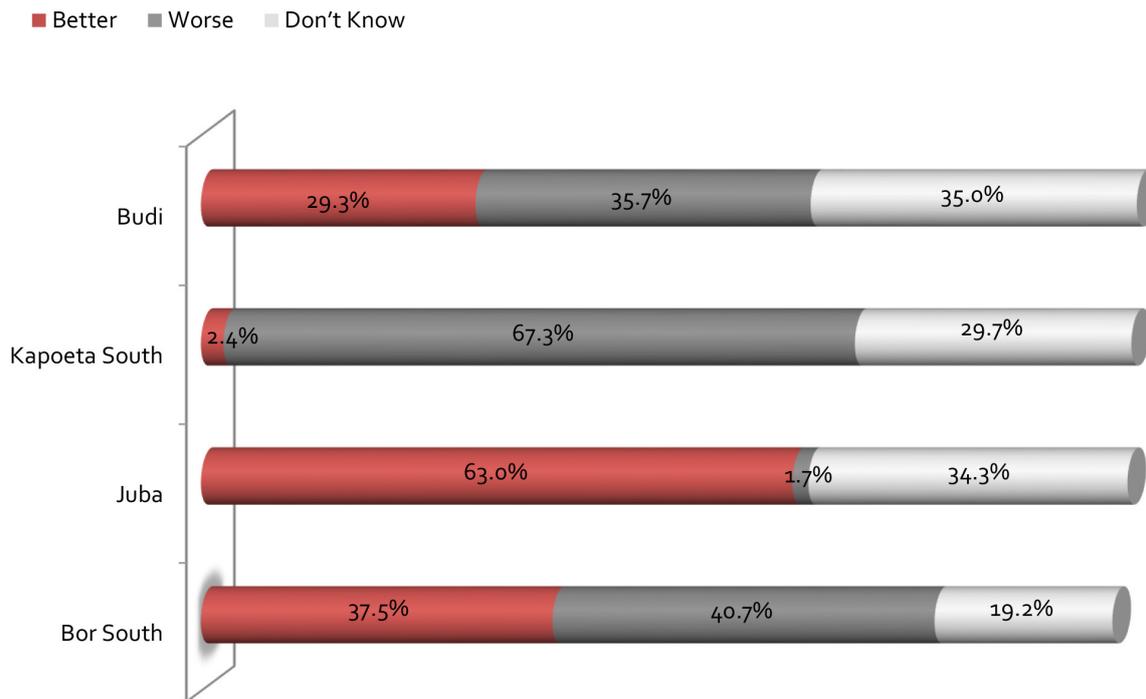
The Famine Early Warning Systems Network (FEWSNET) estimates that food insecurity in Bor South County will remain stressed between July and September 2015; in contrast, food insecurity is projected to be minimal in Juba, Budi and Kapoeta South Counties.<sup>92</sup> However, as shown in figure 43, 67.3% (n=224) of respondents in Kapoeta South think the food situation will be worse next year – a belief mirrored by 40.7% (n=138) of respondents in Bor South and 35.7% (n=105) in Budi. Respondents in Juba have a more positive outlook, with 63% (n=184) believing that the food situation will have improved. Uncertainty remains high, with large portions of respondents in all counties unsure what the situation will be in the coming year.

<sup>90</sup> Note: Given that few respondents engage in cultivation in Juba, results for this county are not representative and thus not presented in this graph.

<sup>91</sup> FEWSNET, "South Sudan Price Bulletin," July 2015. [http://www.fews.net/sites/default/files/documents/reports/South%20Sudan\\_2015\\_07\\_PB.pdf](http://www.fews.net/sites/default/files/documents/reports/South%20Sudan_2015_07_PB.pdf)

<sup>92</sup> FEWSNET, "Emergency (IPC Phase 4) likely in Unity, Jonglei, and Upper Nile states in May," 2015. <http://www.fews.net/east-africa/south-sudan/food-security-outlook/april-2015>

Figure 43. Food Security Outlook: Predicted Situation in One Year, by County



Overall, respondents aged 17 to 24 have a slightly more positive outlook than their younger peers, with 49% (n=260) believing that the food situation will improve (compared to 38.5% of younger respondents). Differently, respondents between 10 and 16 are more uncertain than their elder peers, with 34.9% (n=162) unsure how the situation will evolve (compared to 26.3% of older respondents).

**Summary of Findings:**

- Suboptimal breastfeeding practices are reported, in particular among mothers between 10 and 16 years old.
- Crops represent the major food source in all four counties; in Juba however, purchases and markets/shops also play an important role.
- Food insecurity is highest in Kapoeta South and Budi Counties. In Kapoeta South, 79.9% (n=266) of respondents do not have enough food to meet their households' needs; this is the case for 56.8% (n=167) in Budi. Meanwhile, it is estimated that at least 64% (n=213) of households surveyed in Kapoeta and 82.3% (n=242) in Budi are severely food insecure.
- Insecurity, displacement and lack of money/assets are the primary threats to food security.
- Respondents in Juba have the most positive outlook regarding the food situation, with 63% (n=184) believing that it will be better in the coming year. Respondents in other counties, however, are less optimistic.

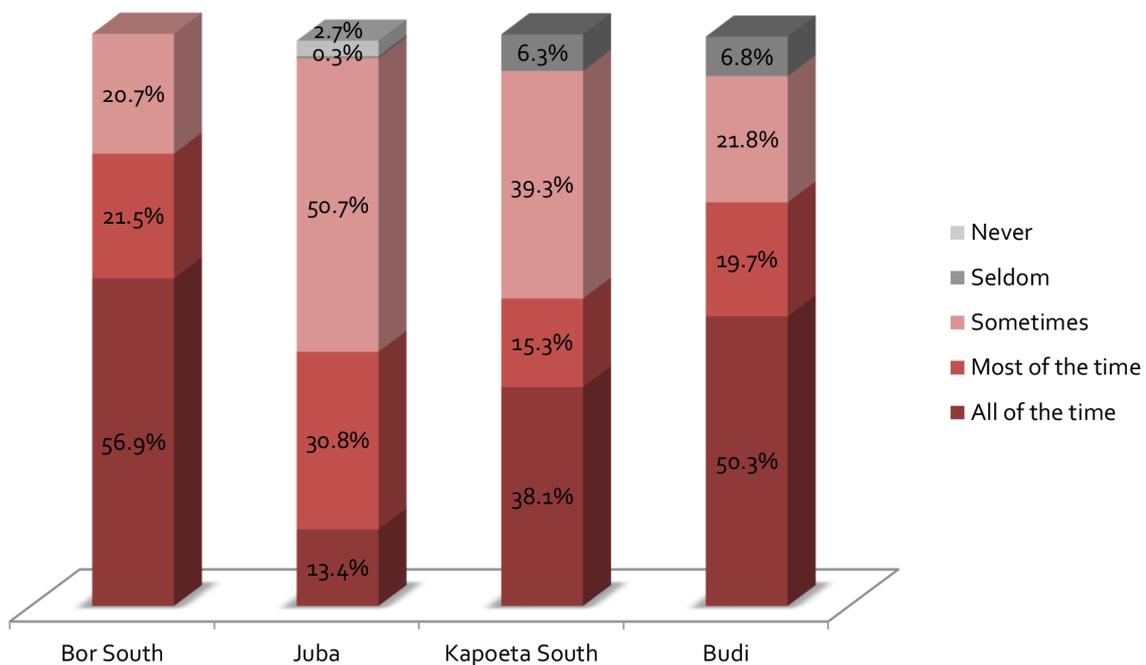
### 3.5 WASH

This chapter examines water, sanitation and hygiene, specifically detailing knowledge, attitudes and practices regarding safe drinking water, human waste disposal and hand washing. Given the impact of WASH on health and the particularly vulnerability of youth, as illustrated by the recent cholera outbreak, it must be included in any holistic development endeavour.

#### 3.5.1 Water

Although water is critical to survival, with one FGD participant describing water as “the source of life for all living things,” survey respondents do not always have enough water to drink (see figure 44).<sup>93</sup> In Juba in particular, only 13.4% (n=39) of respondents always have enough drinking water; 2.7% (n=8) in fact report that they never have enough water to drink. Juba town has been recently affected by shortage of drinking water, with bottle water in short supply or unavailable.<sup>94</sup> Water sufficiency appears to be highest in Bor South and Budi, with 56.9% (n=193) and 50.3% (n=148) reporting that they always have enough to drink respectively.

Figure 44. Drinking Water Sufficiency, by County



In aggregate, younger respondents more commonly report always having enough water to drink, at 39.6% (n=224), than respondents between the ages of 17 and 24, at 29.3% (n=283). Given that younger respondents also appear less food insecure than their older peers, as mentioned previously in this report, it would appear likely that younger youth benefit from increased parental support. Meanwhile, in Bor South, male respondents more commonly report always having enough water to drink than female respondents, at 63.2% (n=103) versus 51.1% (n=90). Similarly, while 26.7%

93 FGD in Kapoeta South on July 23, 2015.

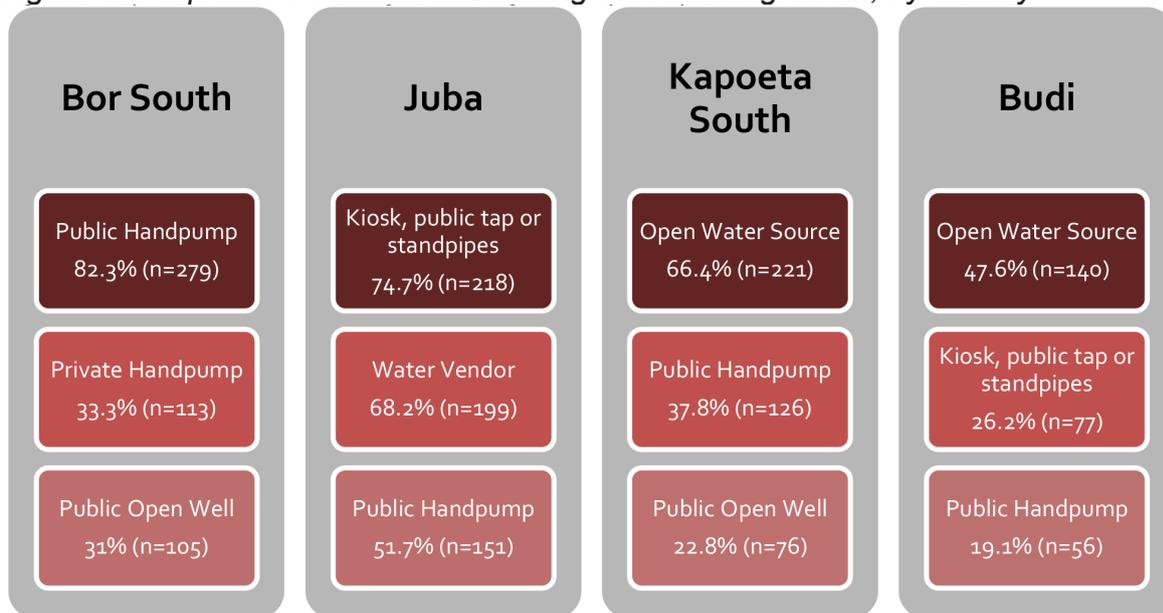
94 Radio Tamazuj, “Drinking Water Shortage in Juba Suburbs,” May 1, 2015. <https://radiotamazuj.org/en/article/drinking-water-shortage-juba-suburbs>

(n=47) of female respondents in Bor South seldom have enough to drink, this is the case for 14.1% (n=23) of male respondents, suggesting that female youth may be discriminated against in access to drinking water.<sup>95</sup>

Despite apparent water insufficiency in Juba, a majority of respondents (43.2%, n=126) believe that their access to water has improved in the past year. Access to water is reported to have stayed the same in Bor South and Budi (by 43.4% [n=147] and 42.2% [n=124] of respondents respectively), but deteriorated in Kapoeta South, where 54.1% (n=180) of respondents perceive that access to water has gotten worse in the past year.

Public handpumps are in the top three sources of drinking and cooking water for each county (see figure 45). In Bor South, public handpumps represent the major source of drinking and cooking water, utilized by 82.3% (n=279) of respondents. In Juba, kiosks, public taps or standpipes are the primary water source for drinking and cooking. In contrast, in Kapoeta South and Budi, water for human consumption is primarily gathered from open water sources.

Figure 45. Top Three Sources of Drinking and Cooking Water, by County



The use of open water sources in Kapoeta South and Budi is concerning given that, in those counties, drinking water is treated less commonly than in the other counties. Indeed, while FGD participants are broadly aware that water can be polluted by open defecation, dead animals or rubbish, water is treated prior to consumption by:

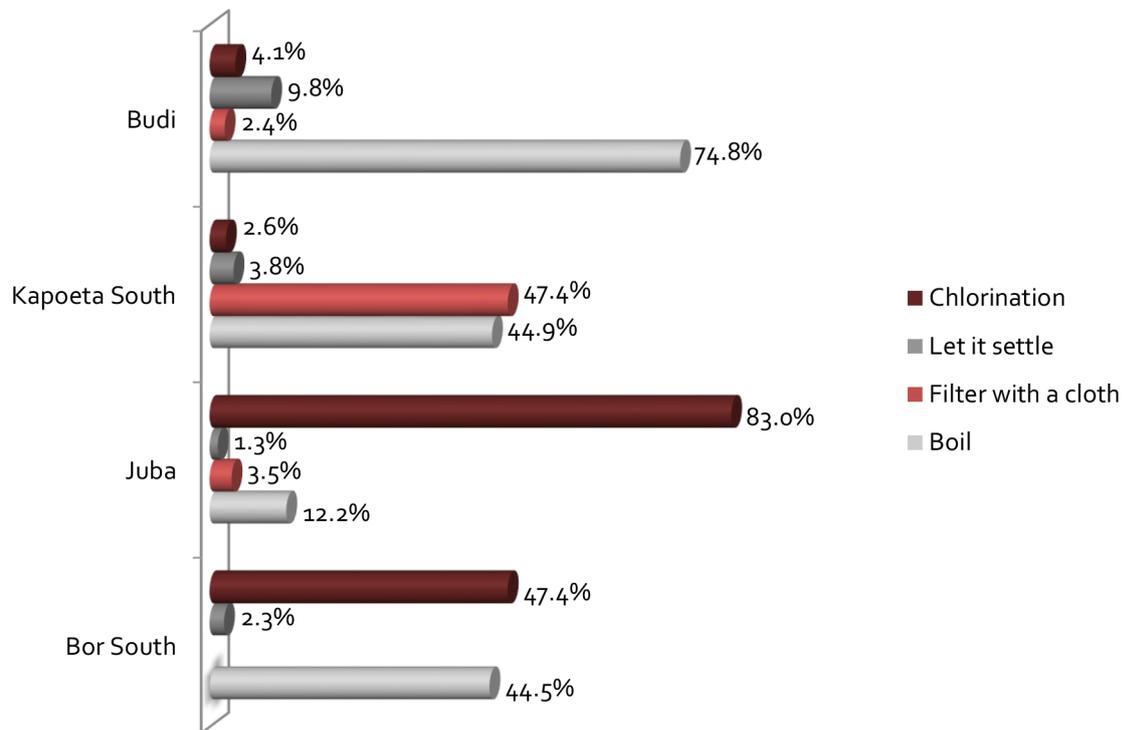
- 23.4% (n=78) in Kapoeta South;
- 41.8% (n=123) in Budi;
- 78.4% (n=229) in Juba ; and
- 51% (n=173) in Bor South.

Based on quantitative data, older youth appear to be more aware of the need to treat water prior to consumption: 64.2% (n=384) of respondents between 17 and 24 do something to the water to make it safer to drink, compared to 53.6% (n=219) of

95 Note: Results for other counties were not statistically significant when disaggregated by gender.

younger respondents. Popular water treatment methods include chlorination, boiling, and filtering (see figure 46). Chlorination is the major water treatment mechanism in both Bor South and Juba; boiling is the most popular option in Budi. Meanwhile, in Kapoeta South, a majority of those who attempt to treat water filter it with a cloth – a technique which has been proven to be effective in Bangladesh, if the cloth is sufficiently folded and regularly washed.<sup>96</sup>

Figure 46. Breakdown of Major Water Treatment Practices, by County



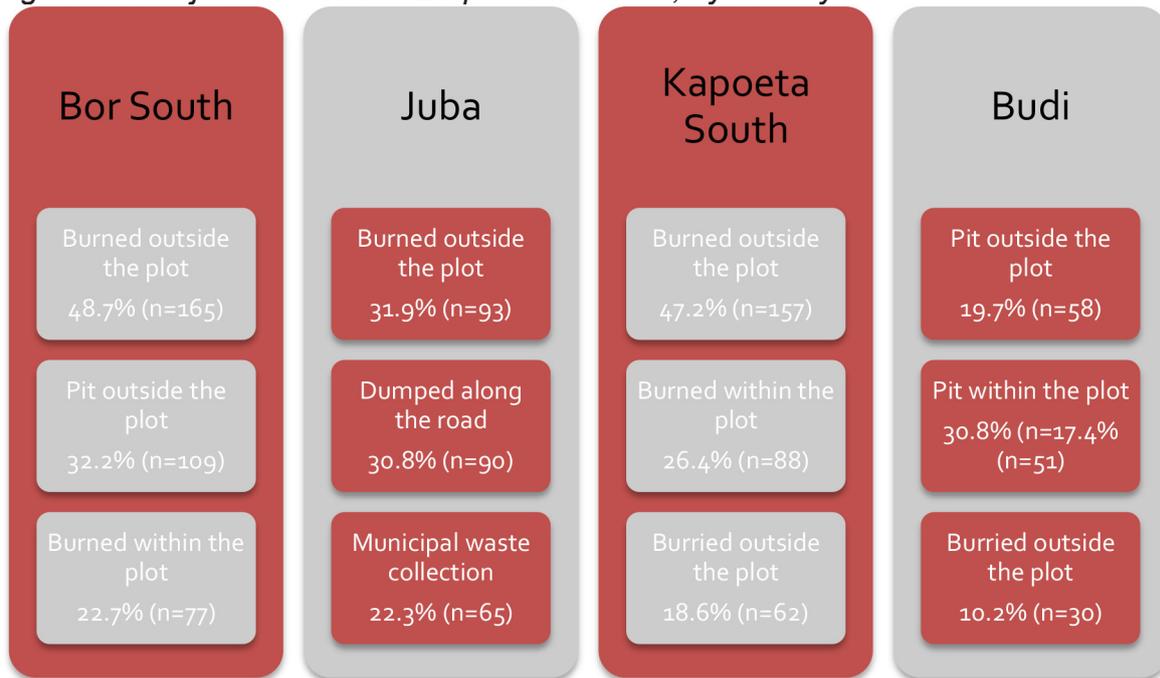
### 3.5.2 Sanitation

#### 3.5.2.1 Solid Waste Disposal

FGD participants identified rubbish as harmful for the environment, and quantitative data indicates that a majority of participants attempt to dispose of their solid waste in a variety of ways. As shown in figure 47, respondents generally burn their solid waste, bury it, or dispose of it in a rubbish pit. In Juba however, 30.8% (n=90) of respondents indicate that waste is dumped along the road. While municipal waste collection is used by 22.3% (n=65) of respondents in Juba, it appears to be virtually unavailable in other counties. Efforts to education on waste management and collective responsibility should thus remain high on the life skills agenda.

96 Colwell, R. et al. "Reduction of Cholera in Bangladeshi Villages by Simple Filtration," Proceedings of the National Academy of Science of the United States, 100:3, 2003. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC298724/>

Figure 47. Major Solid Waste Disposal Methods, by County

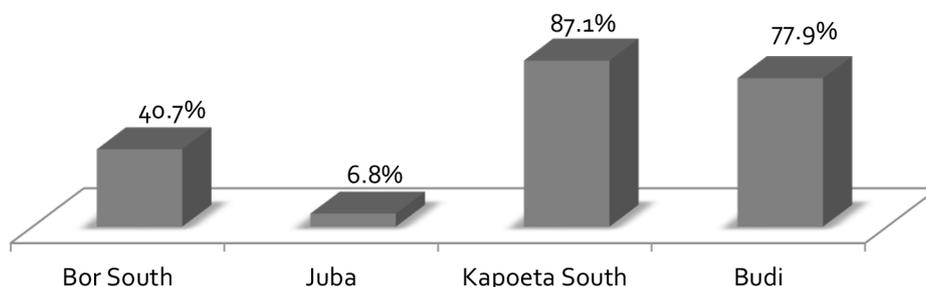


### 3.5.2.2 Toilets and Latrines

Although a majority of FGD participants argue that clean latrines contribute to a healthy environment, limiting faecal waste due to open defecation, many survey participants do not in fact own a latrine. As illustrated by figure 48:

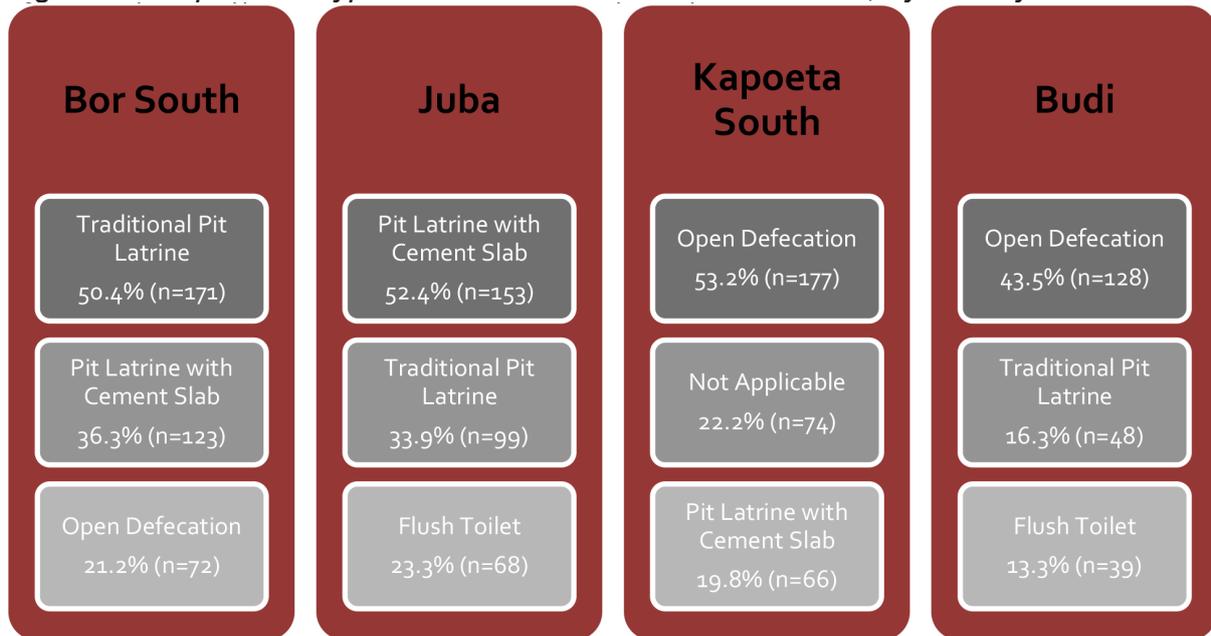
- 87.1% (n=290) of respondents in Kapoeta South;
- 77.9% (n=229) of respondents in Budi;
- 40.7% (n=138) of respondents in Bor South; and
- 6.8% (n=20) of respondents in Juba have no toilet or latrine.

Figure 48. Percentage of Respondents with No Toilet Facilities, by County



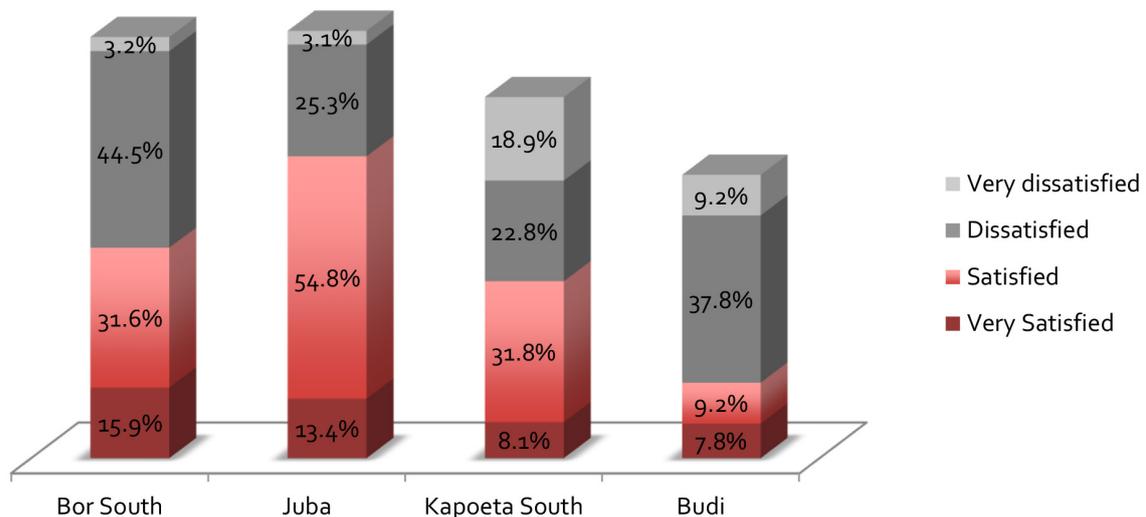
By county, open defecation is widely practiced in Bor South (21.2%, n=72), Kapoeta South (53.2%, n=177) and Budi (43.5%, n=128), but by less than 1% (n=3) of respondents in Juba, where 52.4% (n=153) use pit latrines with cement slabs. The top three types of toilets or sanitation practices by county are displayed in figure 49. Notably, 43.3% (n=266) of respondents with no education report that their household practices open defecation, compared to 17.1% (n=103) of respondents having received at least some education, suggesting that education correlates with improved sanitation practices.

Figure 49. Top Three Types of Toilets or Sanitation Practices, by County<sup>97</sup>



While a majority of interlocutors in Juba are satisfied or very satisfied with the latrines/ toilet facilities, dissatisfaction is greater in the other counties, as illustrated by figure 50. Indeed, in Kapoeta South, 18.9% (n=63) are very dissatisfied.

Figure 50. Satisfaction with Latrine/Toilet Facilities Used, by County<sup>98</sup>

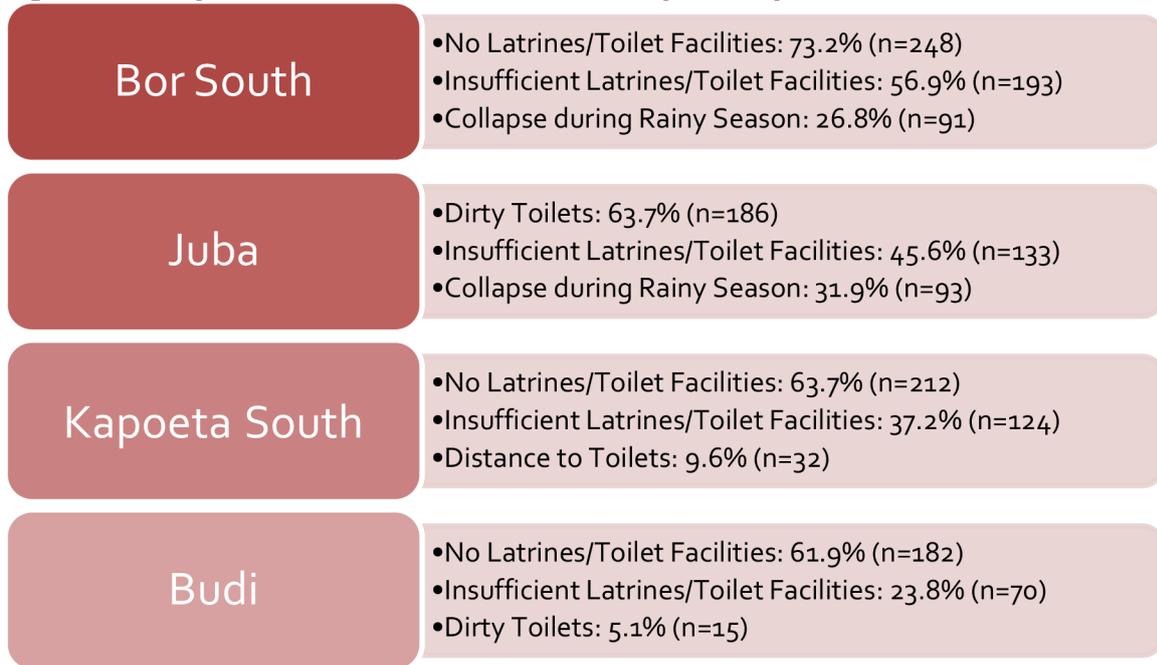


With regards to sanitation, the major problem in Bor South, Kapoeta South and Budi is perceived to be the lack of latrines/toilet facilities, which are either non-existent or in insufficient quantity. In contrast, in Juba, the insalubrity of toilets is perceived as the primary sanitation concern. In both Juba and Bor South, respondents also highlight the collapse of facilities during the rainy season as problematic for sanitation.

97 Note: Although 22.2% (n=74) of respondents in Kapoeta South responded 'not applicable', it is uncertain what this corresponds to in terms of sanitation practices.

98 Note: The remaining respondents replied 'don't know' or 'refuse to answer'. In Budi in particular, 23.5% (n=69) replied 'don't know', and 12.6% (n=37) refused to answer.

Figure 51. Major Three Sanitation Concerns, by County



Ideally, a plurality of respondents in all counties would prefer to use pit latrines with cement slabs. Figure 52 illustrates the top three preferences, by county. In Bor South, Juba and Budi, respondent preferences are primarily based on how easy the facility would be to clean; in Kapoeta South in contrast, affordability is the major factor.

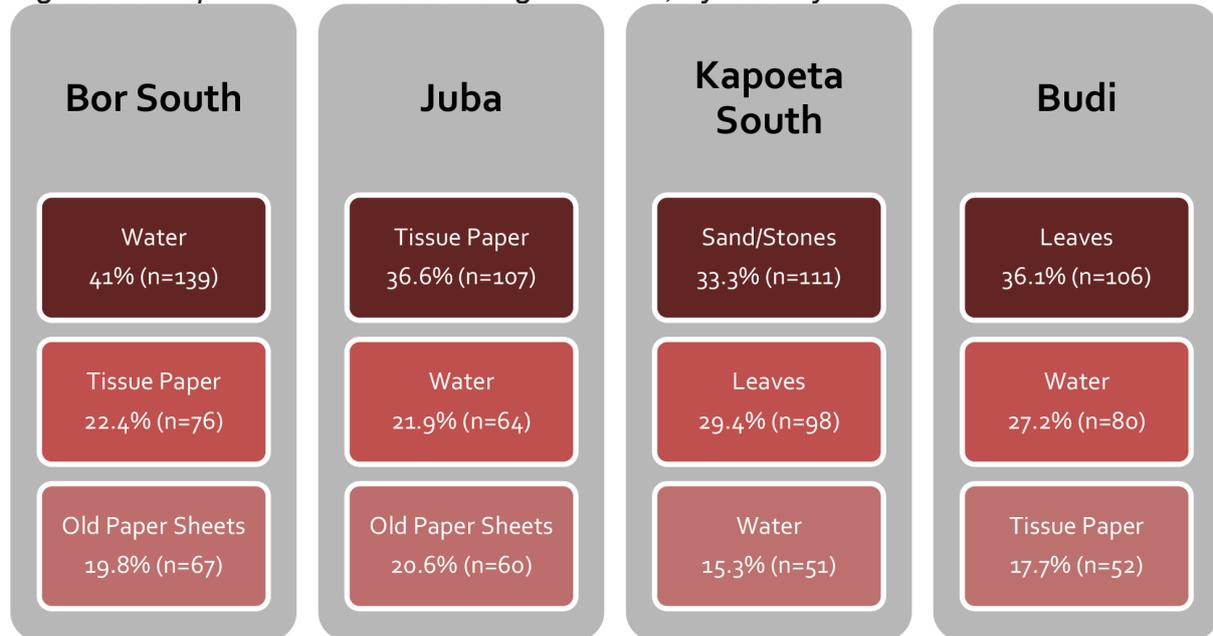
Figure 52. Top Three Latrines/Toilet Facilities Preferences, by County



### 3.5.3 Hygiene

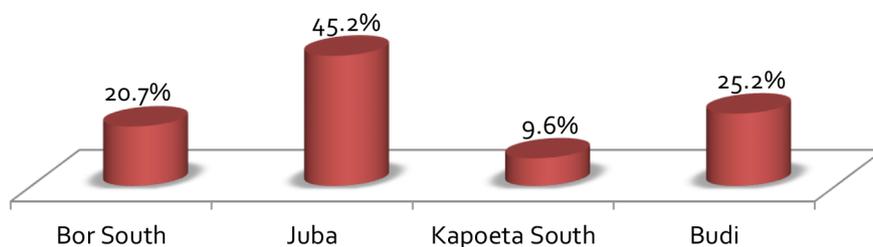
The top three anal cleansing methods per county are displayed in figure 53. Tissue paper is the most common option in Juba, used by 36.6% (n=107) of respondents; in Bor South, 41% (n=139) of respondents use water. In contrast, respondents in Kapoeta South and Budi predominantly use natural materials: 36.1% (n=106) of respondents in Budi cleanse with leaves, while 33.3% (n=111) of respondents in Kapoeta South use sand/stones.

Figure 53. Top Three Anal Cleansing Methods, by County



Handwashing, meanwhile, is limited by the availability of handwashing facilities. While 45.2% (n=132) of respondents in Juba indicate that their latrines/toilet facilities are equipped with handwashing facilities, this is the case for 20.7% (n=70) of respondents in Bor South, 25.2% (n=74) of respondents in Budi, and only 9.6% (n=32) of respondents in Kapoeta South (see figure 54).

Figure 54. Percentage of Respondents with Handwashing Facilities at Latrine/Toilet Facilities, by County

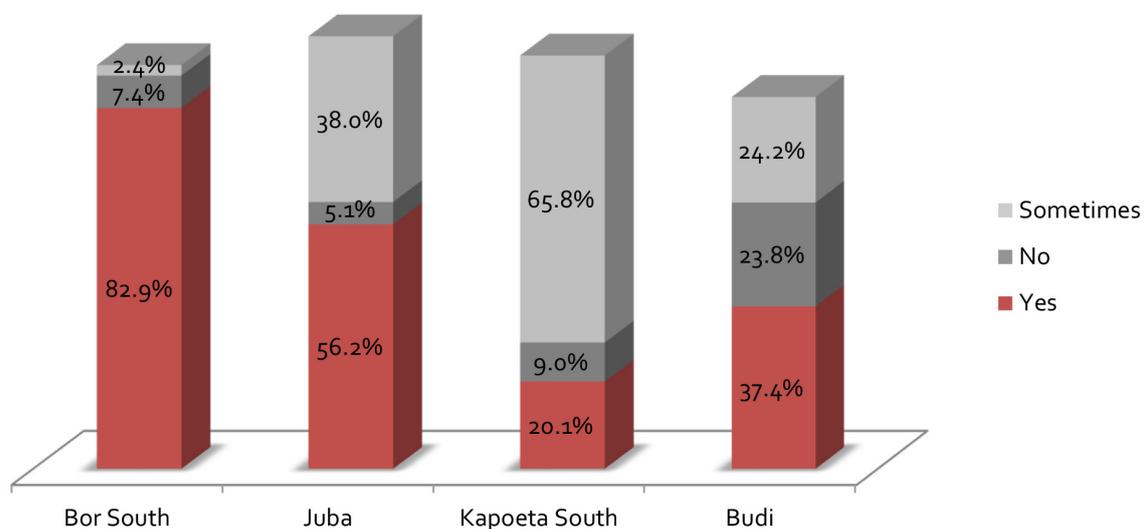


More positively, a large majority of respondents with handwashing facilities across all counties indicate that soap or ash is currently available for handwashing. However, the use of water and soap varies strongly by county; respondents indicate that water and soap is used by:

- 88.4% (n=258) in Juba;
- 73.5% (n=249) in Bor South;
- 26.9% (n=79) in Budi; and
- 21.9% (n=73) of respondents.

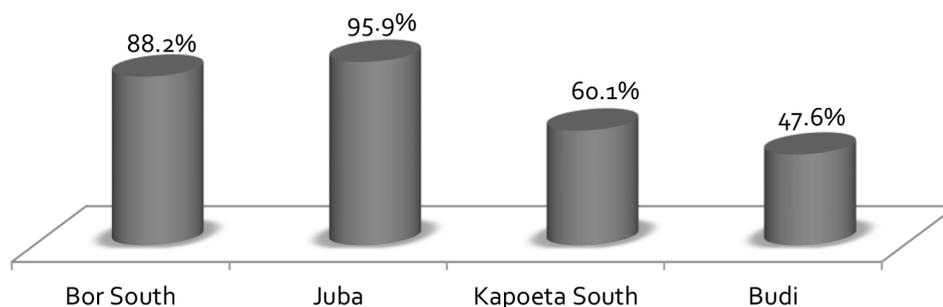
While a majority of respondents wash their hands after defecating in Bor South (82.9%, n=281) and Juba (56.2%, n=164), handwashing is less consistent in Kapoeta South and Budi (see figure 55). In particular, in Budi, 23.8% (n=70) indicate not washing their hands after defecation. Age has little impact on handwashing practices, with 8.7% (n=52) of respondents ages 10 to 16 and 8.5% (n=88) of older respondents reporting that they do not wash their hands after using the toilet. As such, there is a need to reinforce the emphasis on handwashing in schools and within the community.

Figure 55. Prevalence of Post-Defecation Handwashing, by County



While the lack of handwashing facilities and inadequate water supply are common explanations among respondents for the failure to wash hands after defecation, it is relevant to note that 26.7% (n=8) of respondents in Kapoeta South who do not wash their hands after defecation and 40% (n=28) of those in Budi do not in fact know why handwashing is important. Reflecting this finding, it emerges that only 47.6% (n=140) of respondents in Budi and 60.1% (n=200) of respondents in Kapoeta South believe it is important to wash their hands after using the latrine/toilet facilities (see figure 56).

Figure 56. Percentage of Respondents Who Think Handwashing Important After Using the Latrine/Toilet, by County



Although there is little variation in the perceived importance of handwashing among older or younger respondents, youth who have accessed some education are much more aware of the importance of handwashing: 92.2% (n=525) of respondents having accessed some form of education believe it is important to wash their hands after using the latrine/toilet facilities, compared to 68.9% (n=362) of those with no education. Overall, those who do think that handwashing is important predominantly highlight the importance of handwashing to prevent the transmission of diseases and prevent the contamination of food.

#### Summary of Findings:

- Water insufficiency is concerning in Juba, where only 13.4% (n=39) always have enough water to drink.
- In Kapoeta South and Budi, water for drinking and cooking is acquired in open water sources by 66.4% (n=221) and 47.6% (n=140) of respondents respectively. Yet in those two counties, few treat their water to make it safer prior to consumption (23.4% [n=78] in Kapoeta South and 41.8% [n=123] in Budi).
- Lack of sufficient latrines/toilet facilities is a major sanitation concern. In Kapoeta South, 87.1% (n=290) of respondents do not have a toilet or latrine in their household.
- Education correlates with better sanitation practices. 43.4% (n=266) of those with no education report that their households practice open defecation, compared to 17.1% (n=103) of respondents with education. Likewise, 92.2% (n=525) of those who have accessed education think handwashing is important after using the latrines/toilet facilities, compared to 68.9% (n=363) of those with no education.

## 3.6 Health

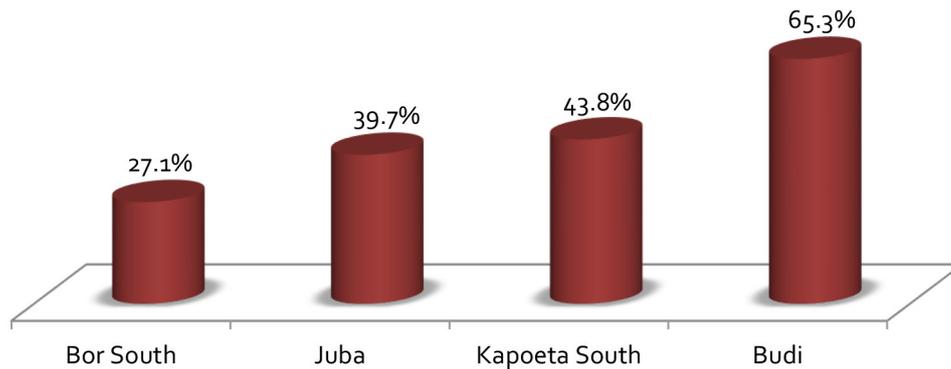
Intrinsically tied to WASH, this section aims to explore the major health concerns affecting youth in South Sudan. Morbidity is examined through an analysis of major diseases. Subsequently, knowledge of causes and prevention mechanisms is assessed, alongside a discussion of major sources of information on healthcare. The chapter concludes with youth perceptions of healthcare in the four counties surveyed.

### 3.6.1 Morbidity

Linked to poor WASH practices, diarrhoea is a recurrent concern in South Sudan. In 2010, 34% of children under 5 were estimated to have had diarrhoea in the past two weeks.<sup>99</sup> Many respondents suffer from diarrhoea on a monthly basis. Notably, the prevalence of diarrhoea appears to reflect the handwashing practices above-mentioned: in Budi, which has the highest number of respondents not washing their hands after defecation, 65.3% (n=192) of respondents are affected by diarrhoea at least once a month, as shown in figure 57.

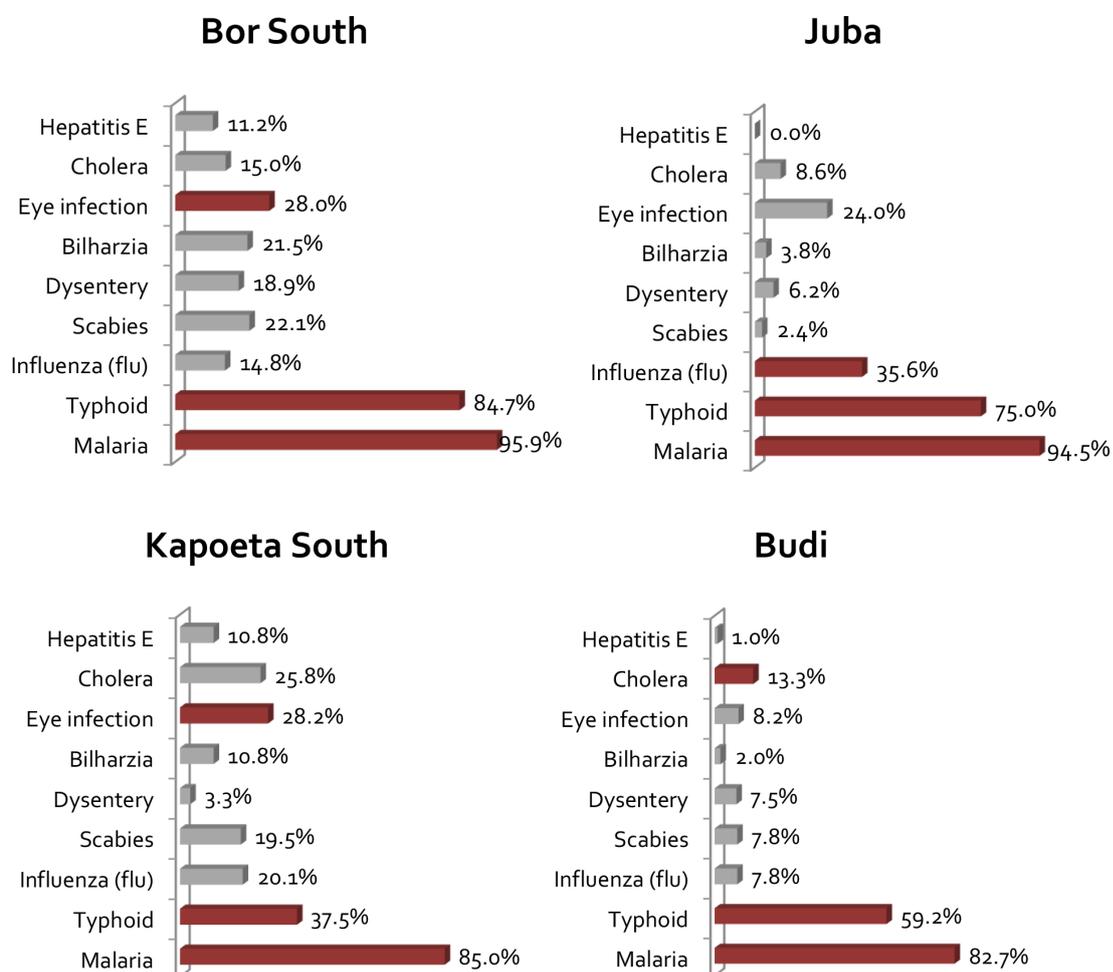
99 NBS, "South Sudan Statistical Yearbook," 2011.

Figure 57. Percentage of Respondents Suffering from Diarrhoea at Least Once a Month, per County



Meanwhile, figure 58 displayed the illnesses experienced by respondents' household members in the past year. In all counties, malaria is the primary illness reported by survey respondents and FGD participants. Countywide, malaria is a leading cause of mortality, responsible for approximately 25% of deaths.<sup>100</sup> Typhoid is the second most common disease in all counties, while the third most commonly reported illness is cholera in Budi, influenza in Juba, and eye infections in both Bor South and Kapoeta South.

Figure 58. Morbidity of the Past Year Among Respondents' Household Members, by County



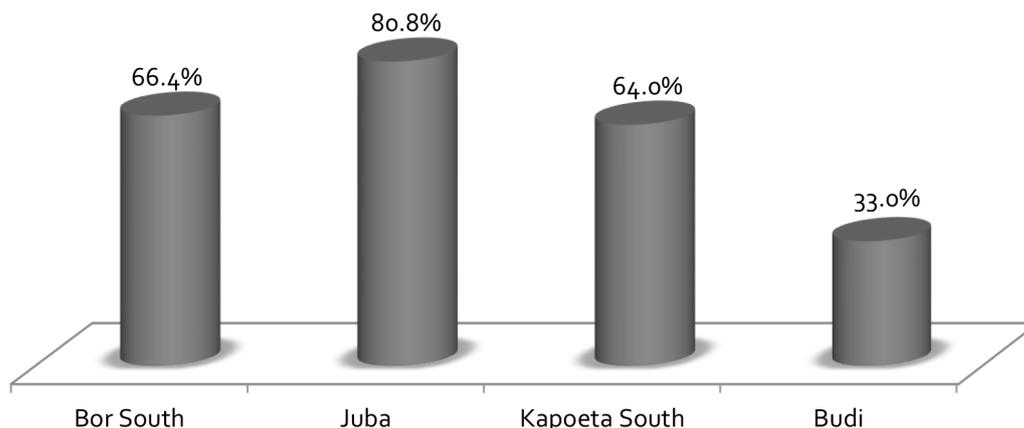
Recently, cholera has also been a major concern in South Sudan. Indeed, due to poor sanitation, in particular in PoC camps, a cholera outbreak broke out in 2014, with 6,065 suspected cases and 139 deaths; in 2015, a renewed outbreak has led to 1,464 cases and 42 deaths in Juba and Bor South.<sup>101</sup> As such, it is curious that cholera does not feature more prominently among the diseases reported by respondents in those counties.

## 3.6.2 Knowledge of Causes and Prevention Mechanisms

### 3.6.2.1 Malaria

Education is linked to better understanding of major diseases, and correlates strongly with better understanding of malaria: 77.9% (n=437) of respondents who have received some education correctly identify mosquitoes as the main cause of malaria, compared to 53.6% (n=307) of respondents with no education. By county, awareness is highest in Juba and lowest in Budi (see figure 59). Indeed, in Budi, 26.9% (n=79) report not knowing the main cause of malaria, and 16.3% (n=48) believe dirty food to be the primary cause.<sup>102</sup>

*Figure 59. Percentage of Respondents Aware that Malaria is Caused by Mosquitoes, by County*



A majority of respondents in Bor South and Juba believe that the best way to prevent malaria is to use spray or chemicals on their bodies (30.4% [n=103] and 55.1% [n=161] respectively); in Kapoeta South, 39.3% (n=131) believe the best prevention mechanism is to clear stagnant water.<sup>103</sup> However, in Budi, 32.3% (n=95) of respondents report not knowing the best way to prevent malaria. Figure 60 highlights the three most commonly cited prevention mechanisms by county. By gender, while using spray/chemicals is the most commonly cited prevention mechanism among both male and female respondents, it is more popular among males, at 41.8% (n=153) compared to 30.2% (n=126). Lack of education correlates with lower understanding of malaria

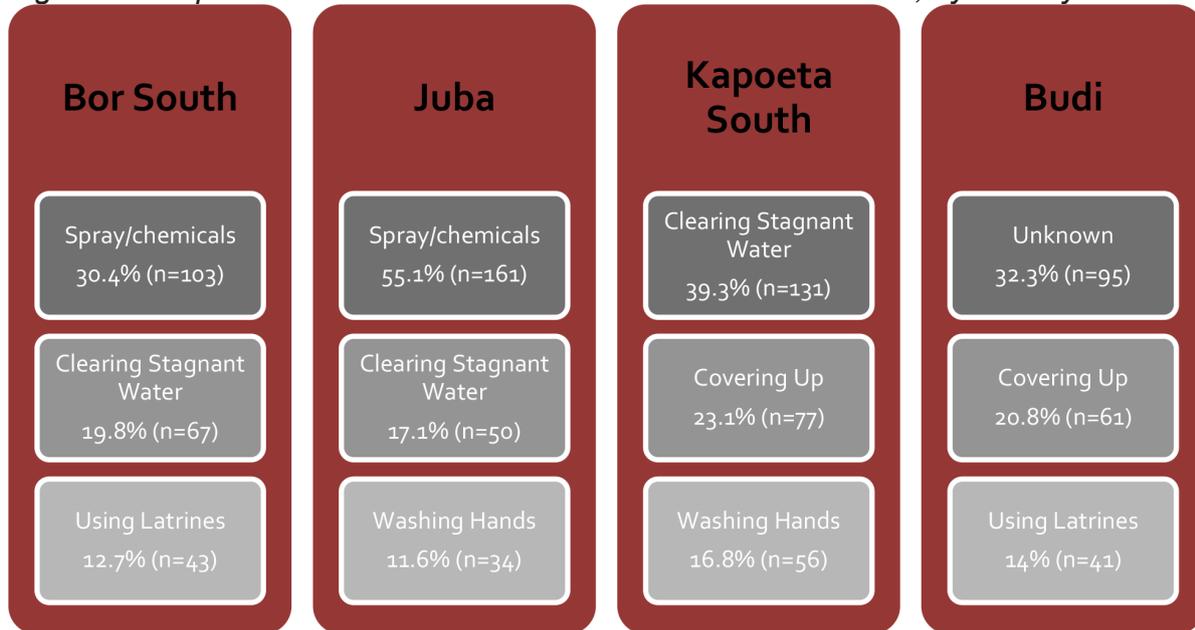
101 UN, "South Sudan Statistics," January 2014; See also WHO, "Situation Report #45 on Cholera in South Sudan," August 5, 2015. [http://www.who.int/hac/crises/ssd/sitreps/south\\_sudan\\_cholera\\_juba\\_5august2015.pdf?ua=1](http://www.who.int/hac/crises/ssd/sitreps/south_sudan_cholera_juba_5august2015.pdf?ua=1)

102 Note: Dirty food is also perceived as the main cause of malaria by 15.4% (n=45) of respondents in Juba and 12.9% (n=43) in Kapoeta South; in Bor South, 12.1% (n=41) of respondents blame dirty hands.

103 Note: Mosquito nets were not an available response option.

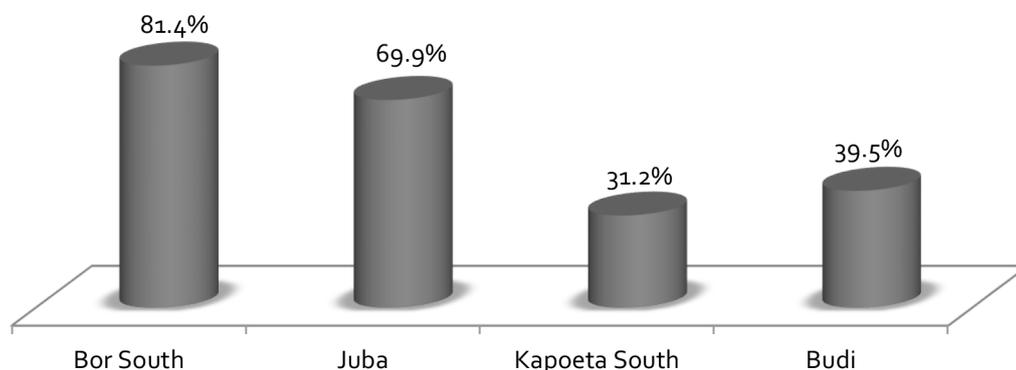
prevention: while 9.2% (n=61) of respondents with no education report that using latrines can help prevent malaria, this is the case for 3.9% (n=40) of respondents with some education.

Figure 60. Top Three Perceived Prevention Methods for Malaria, by County <sup>104</sup>



In terms of malaria prevention, it is estimated that 66% of households in South Sudan own a mosquito net or Long Lasting Insecticide Net (LLIN). <sup>105</sup> A majority of respondents in Bor South and Juba indicate owning a mosquito net; however, this is the case for only 31.2% (n=104) in Kapoeta South and 39.5% (n=116) in Budi (see figure 61). In this way, mosquito net ownership correlates with education: 71.7% (n=420) of respondents with some education own a mosquito net, compared to 55.2% (n=270) of respondents with no education. A majority of respondents with mosquito nets sleep under them at night.

Figure 61. Mosquito Net or LLIN Ownership, by County



104 Note: Mosquito nets were not an available response option.

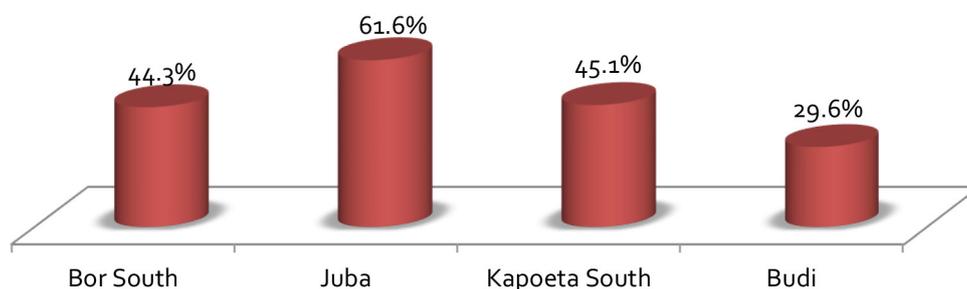
105 UN, "South Sudan Statistics," January 2014.

### 3.6.2.2 Diarrhoea

Across all counties, most respondents identify dirty food as the primary cause of diarrhoea (see figure 62). Other commonly reported causes include dirty hands, dirty water, flies, and germs – but 25.5% (n=75) of respondents in Budi are uncertain of the main cause of diarrhoea.

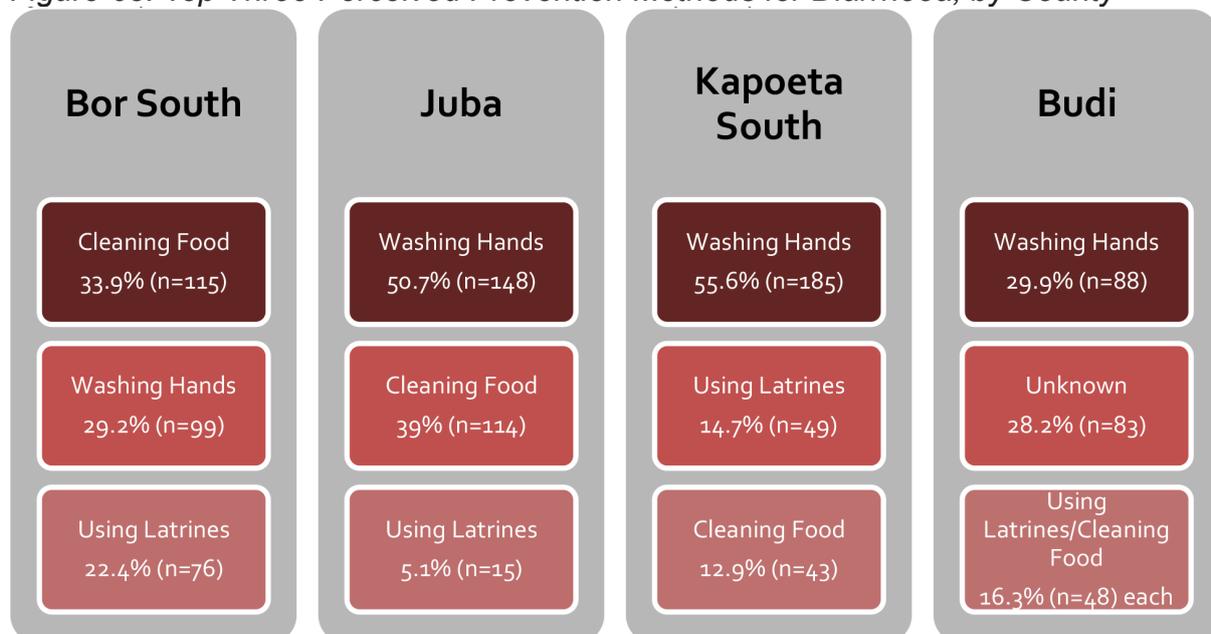
One FGD participant, meanwhile, associated diarrheal diseases with the rainy season, which does indeed undermine water and sanitation conditions and increase risk of disease.<sup>106</sup>

Figure 62. Respondents Believing Dirty Food to be the Main Cause of Diarrhoea, by County



As illustrated by figure 63, handwashing, cleaning food and using latrines are perceived to be the best ways to prevent diarrhoea in all counties. However, 28.2% (n=83) of respondents in Budi are once again unaware of the best way to prevent diarrhoea, highlighting the need for health-related sensitization campaigns in that county.

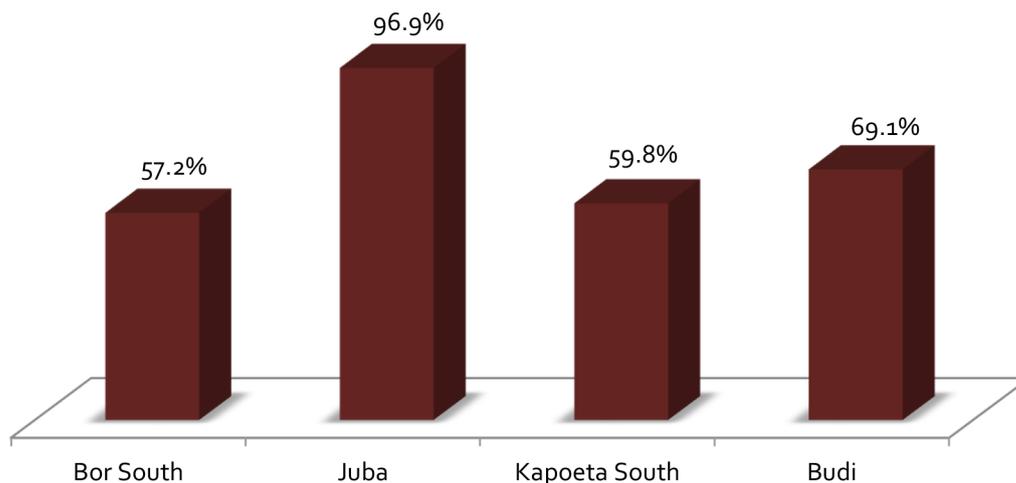
Figure 63. Top Three Perceived Prevention Methods for Diarrhoea, by County



### 3.6.2.3 HIV/AIDS

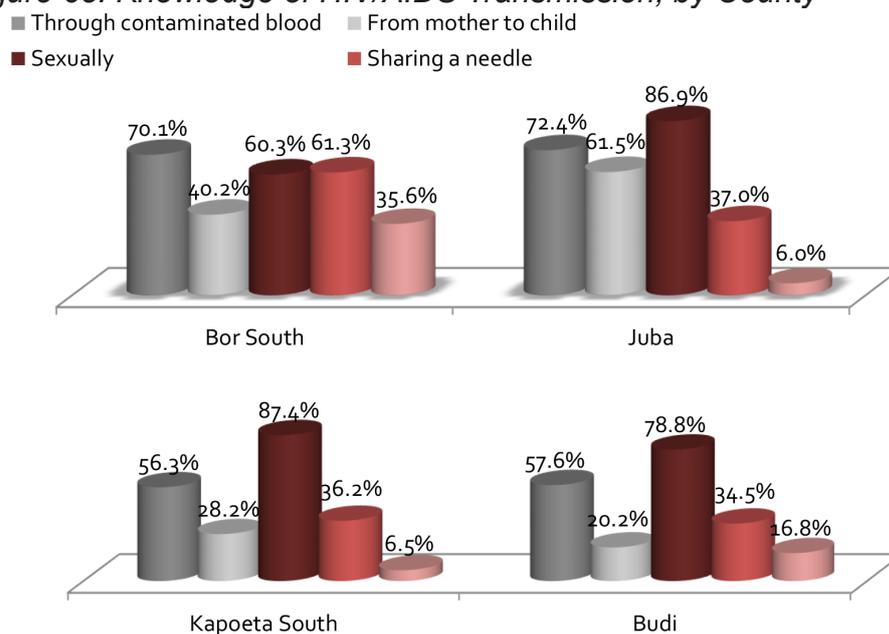
HIV prevalence among 15-49 year olds in South Sudan is estimated at 2.6%.<sup>107</sup> A case study of Budi County in 2012 suggested very little awareness of HIV/AIDS, with HIV rapidly spreading among youth.<sup>108</sup> Based on the results of this survey however, a majority of respondents in all counties have heard of HIV/AIDS, with knowledge being highest in Juba, where 96.9% (n=283) have heard of HIV/AIDS (see figure 64). Older youth are more commonly aware of HIV/AIDS than younger respondents, at 83.5% (n=576) of respondents age 17 to 24 but 69.2% (n=303) of younger respondents.

Figure 64. Percentage of Respondents Having Heard of HIV/AIDS, by County



Those who have heard of HIV/AIDS display relatively good understanding of transmission, with a majority of respondents in each county aware that HIV/AIDS is transmitted sexually, and many aware of the risk posed by contaminated blood (see figure 65). However, some youth also hold erroneous beliefs, with 6% (n=12) in Kapoeta South believing that HIV/AIDS can be contracted by sharing food.

Figure 65. Knowledge of HIV/AIDS Transmission, by County



107 UN, "South Sudan Statistics," January 2014.

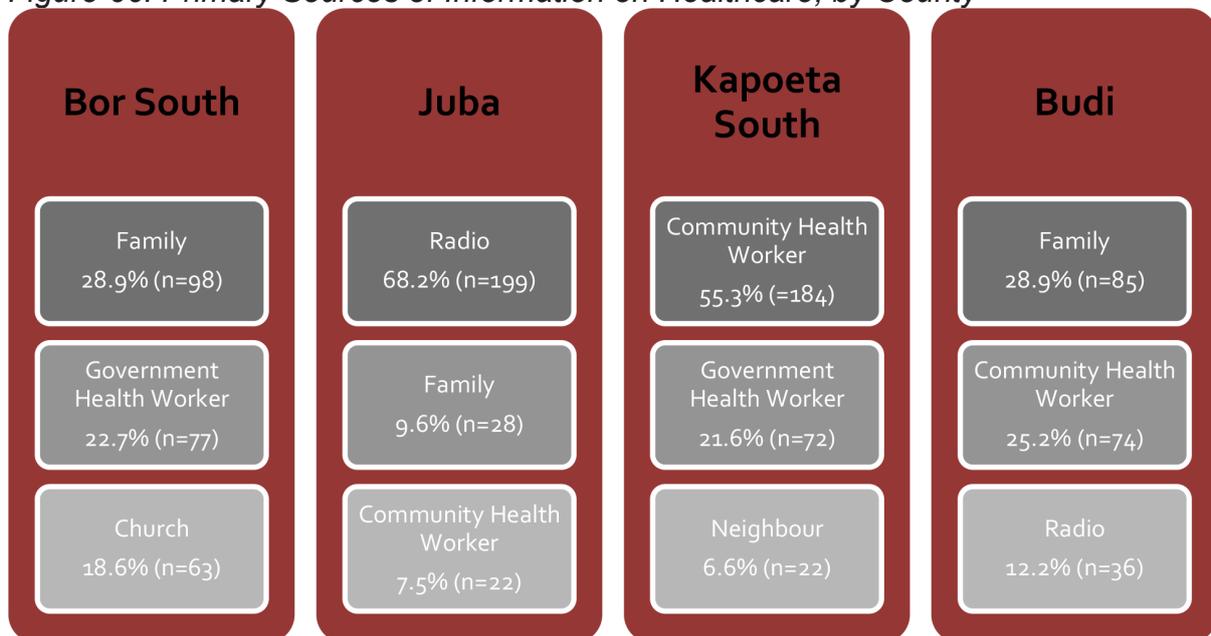
108 UNICEF, "Youth LEAD Baseline Assessment," 2012.

Overall, female respondents appear slightly less aware of how HIV/AIDS is transmitted, with only 75.8% (n=350) of female respondents who have heard of HIV/AIDS aware that it can be transmitted sexually, compared to 83.2% (n=347) of males. Similarly, with regards to age, while 82.3% (n=474) of respondents between the ages of 17 and 24 who have heard of HIV/AIDS know that it can be transmitted sexually, this is the case for 73.6% (n=223) of younger respondents.

### 3.6.2.4 Sources of Information on Healthcare

Youth gather information on healthcare from a variety of sources, as shown in figure 66. In Juba, the radio is the primary source of information on healthcare for 68.2% (n=199) of respondents; in Kapoeta South, 55.3% (n=184) depend on community health workers for information. Meanwhile, in both Budi and Bor South, most information on healthcare is provided by the family.

Figure 66. Primary Sources of Information on Healthcare, by County



Radio is the most common source of information on healthcare for both male and female respondents, although it is more popular among males than females, at 42.8% (n=149) and 34.9% (n=141) respectively. The radio is also more popular among older youth, with 44.2% (n=196) of respondents ages 17 to 24 highlighting radio as a source of information on healthcare, but 29.7% (n=94) of younger respondents. Indeed, an estimated 37% of households throughout the country are thought to own a functioning radio, and numerous radio stations raise awareness on matters of health in South Sudan.<sup>109</sup>

Sources of information more popular among female than male respondents include family (highlighted as the main source of information by 18.2% [n=127] of female respondents, but 15.8% [n=97] of males), and government health workers (15.5% [n=117] of female respondents but 11.1% [n=85] of males). Younger youth are also

109 Forcier Consulting, "South Sudan National Audience Survey : A Nationally Representative Assessment on Radio Listening Habits with Key Findings in Five Booster Areas for Interviews Stations," September 2013.

more likely than older respondents to get information on healthcare from their family, at 20.2% (n=95) of respondents ages 10 to 16, but 15.2% (n=129) of older respondents.

Information on HIV/AIDS is acquired from slightly different sources – friends are a source of information on HIV/AIDS for 73.2% (n=142) of respondents in Bor South, and 71.9% (n=146) in Budi.<sup>110</sup> Radio, however, remains the primary source of information on HIV/AIDS in Juba. Among male respondents, the three most popular sources of information on HIV/AIDS are, in order, friends, radio, and doctors/health clinics; among female respondents, friends and radio remain the top two sources of information on HIV/AIDS, but school is a slightly more important source of information than doctors/health clinics.

### 3.6.3 Perceptions of Healthcare

While most respondents, when feeling ill, go to a pharmacy, health centre or hospital, some respondents continue to resort to traditional medicine. In Budi in particular, 20.8% (n=61) of respondents indicate that they sometimes get treated by traditional medicine (see figure 67). Others, meanwhile, receive treatment from NGOs/Aid organizations, although this, in contrast, is more prevalent in Juba and Bor South than in Budi and Kapoeta South (see figure 68).

Figure 67. Percentage of Respondents Receiving Treatment from Traditional Medicine, by County

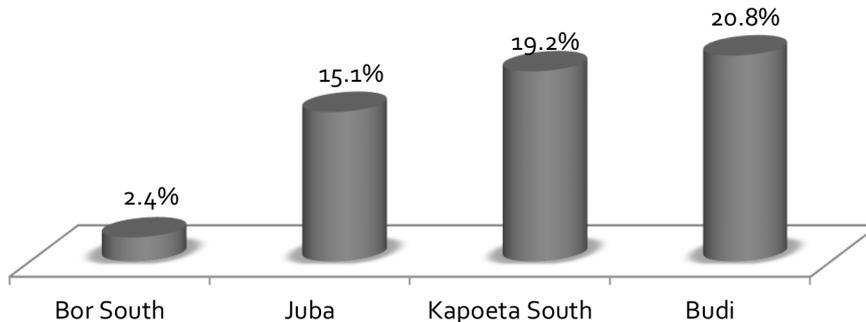
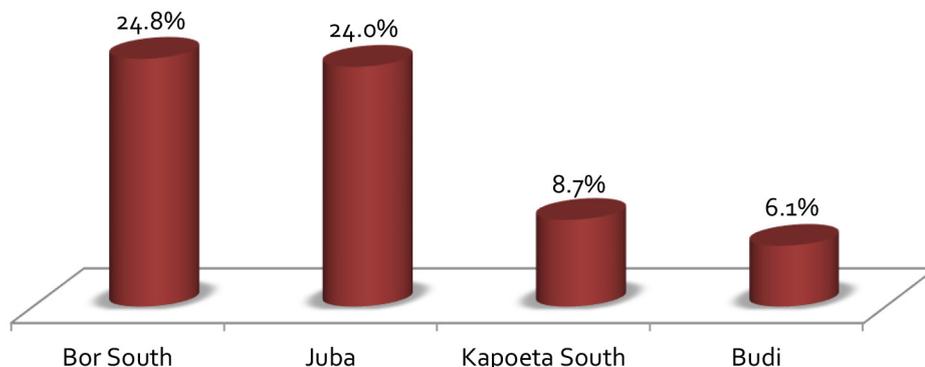


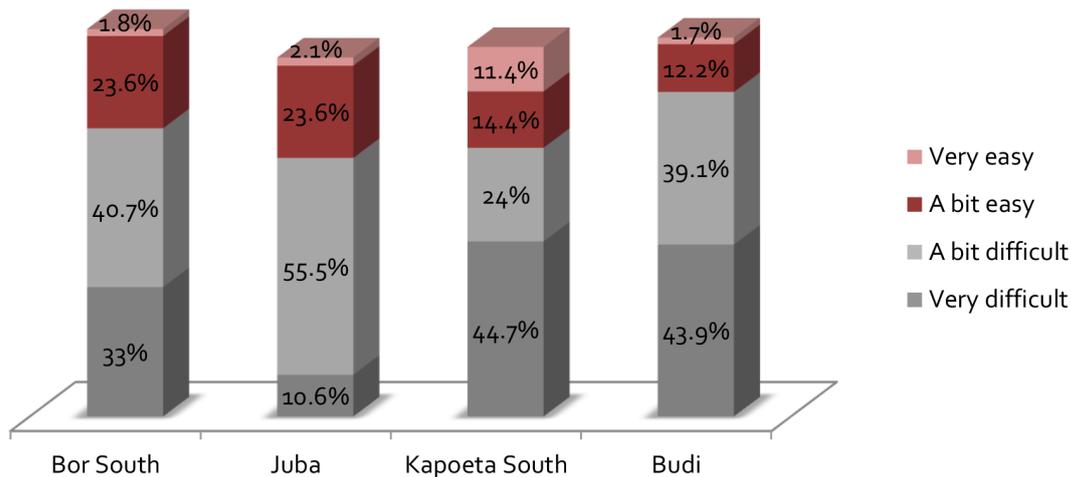
Figure 68. Percentage of Respondents Receiving Treatment from NGOs/Aid Organizations, by County



110 Note: In contrast, friends are a source of information on HIV/AIDS for 18.4% (n=52) of respondents in Juba, and 42.2% (n=84) in Kapoeta South.

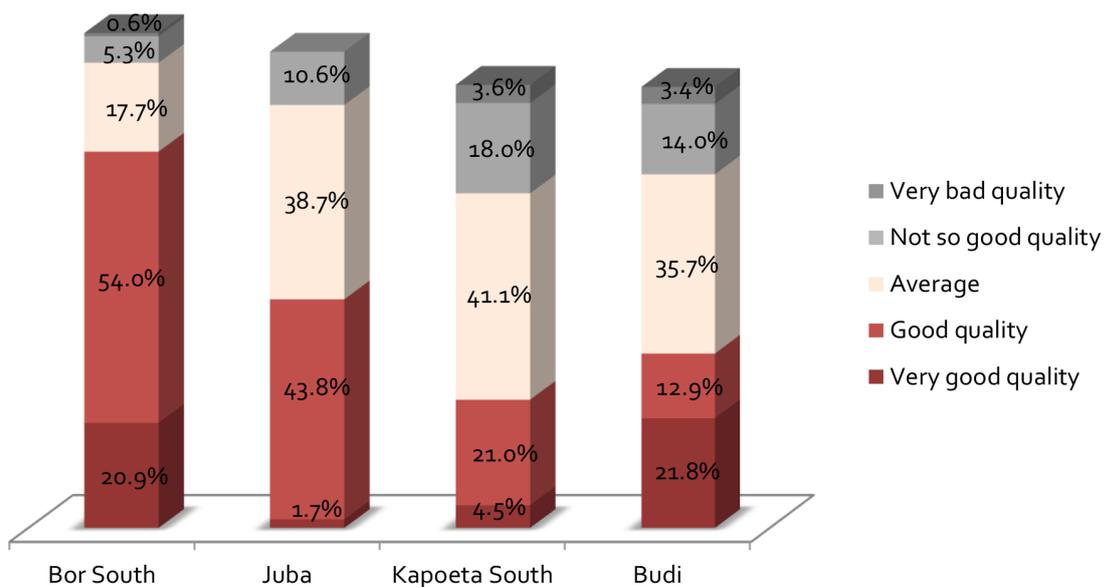
In all counties, a majority of respondents indicate that healthcare is either very difficult or a bit difficult to access (see figure 69). Juba displays the lowest percentage of respondents perceiving healthcare to be very difficult to access, at 10.6% (n=31); while Kapoeta South displays the highest percentage of respondents perceiving healthcare to be very difficult to access, at 44.7% (n=149). Even so, Kapoeta South also has the highest percentage of respondents perceiving healthcare to be very easy to access, at 11.4% (n=38).

Figure 69. Perceived Ease of Access to Healthcare, by County <sup>111</sup>



In parallel, the perceived quality of healthcare varies, with 21.8% (n=64) of respondents in Budi indicating that healthcare is of very good quality, compared to only 1.7% (n=5) in Juba. Bor South has the highest percentage of respondents who perceive healthcare to be of either good or very good quality; in contrast, Kapoeta South has the least (see figure 70).

Figure 70. Perceived Quality of Healthcare, by County <sup>112</sup>

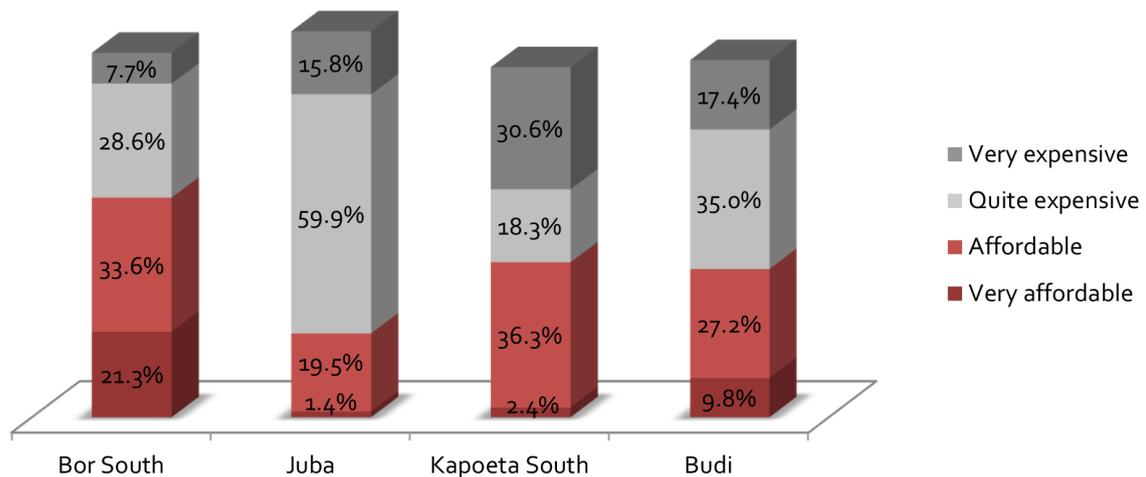


111 Note: Remaining respondents replied 'don't know' or refused to answer.

112 Note: Remaining respondents replied 'don't know', refused to answer, or reported never having received healthcare, which was the case for 8.7% (n=29) of respondents in Kapoeta South and 4.8% (n=14) in Budi.

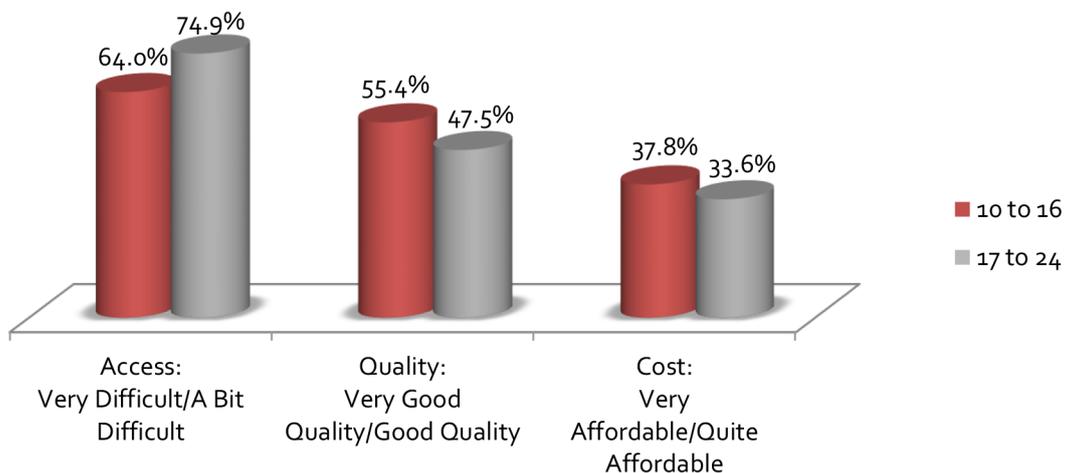
Finally, cost also varies by county (see figure 71). Bor South has the highest percentage of respondents perceiving healthcare to be affordable or very affordable, once again suggesting more positive perceptions of healthcare in that county; in contrast, Juba has the lowest, but Kapoeta South has the highest percentage of respondents perceiving healthcare to be very expensive, at 30.6% (n=102).

Figure 71. Perceived Cost of Healthcare, by County <sup>113</sup>



Overall, respondents aged 10 to 16 have more positive perceptions of healthcare than older youth: they find healthcare easier to access, of better quality, and more affordable (see figure 72).

Figure 72. Youth Perceptions of Healthcare, by Age



113 Note: Remaining respondents replied 'don't know', refused to answer, or reported never having received healthcare.

**Summary of Findings:**

- Diarrhoea is common, with 65.3% (n=192) of respondents in Budi suffering from diarrhoea at least once a month.
- Malaria and typhoid are prevalent in all counties. In Bor South, 95.9% (n=325) report that malaria has affected a member of their household in the past year.
- Knowledge of causes of diseases and prevention mechanisms is particularly limited in Budi. Indeed, only 33% (n=97) know that malaria is caused by mosquitoes, and 32.3% (n=95) have no idea how to prevent it; similarly, 25.5% (n=75) do not know what causes diarrhoea.
- Knowledge of HIV/AIDS is highest in Juba, where 96.9% (n=283) have heard of HIV/AIDS. While most respondents know it can be transmitted sexually or through contaminated blood, not all transmission routes are well understood, suggesting a need for intensified focus on HIV/AIDS in life skills training and education.
- While friends are the primary source of information on HIV/AIDS, the radio is a popular source of information on healthcare in general, and the second most important source of information on HIV/AIDS.
- Healthcare is difficult to access in all counties. Perceptions of healthcare are generally more positive in Bor South, and among younger respondents.

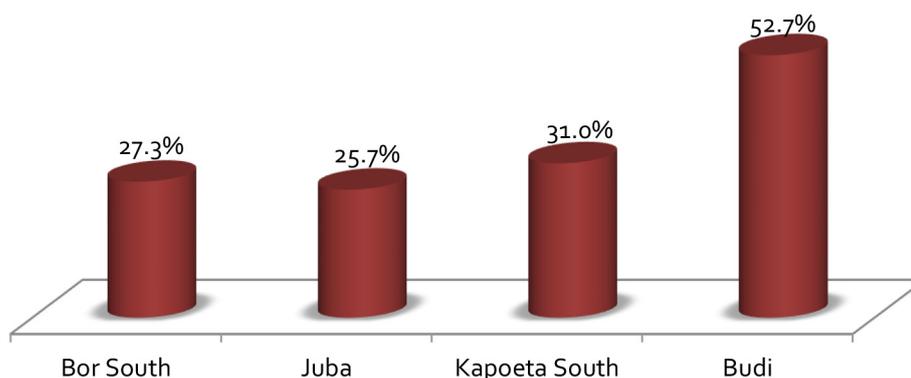
### 3.7 Child Protection

This final section aims to examine some of the major child protection concerns threatening youth in South Sudan in order to better understand how to prevent and respond to violence, exploitation and abuse. In particular, early childbirth is considered, alongside perceptions of the current conflict and awareness of justice mechanisms.

#### 3.7.1 Early Childbirth

FGD participants highlight early/unprotected sex as a source of concern for youth. Unprotected sex heightens vulnerability to HIV infection. In parallel, it leads to early childbirth, a major protection risk for female youth in South Sudan. In Budi in particular, 52.7% (n=88) of female respondents have already given birth (see figure 73). Notably, 10.5% (n=37) of all female respondents between the ages of 10 and 16 have already given birth, including one ten year old and four eleven year olds.

Figure 73. Percentage of Female Respondents Having Given Birth, by County



Early childbirth raises a number of concerns. First, the health of the mother and the child are at risk. According to WHO, pregnancy and childbirth complications are an important cause of mortality for young mothers; moreover, “in low- and middle-income countries, babies born to mothers under 20 years of age face a 50% higher risk of being still born or dying in the first few weeks versus those born to mothers aged 20-29.”<sup>114</sup> In addition to a range of nutritional and health issues related to early childbirth, early childbirth also has a range of socio-economic consequences. As has been discussed earlier in this report, there is a negative correlation between education and childbirth, with only 55.2% (n=98) of those having given birth having received any education, compared to 65% (n=206) of those with no children.

### 3.7.2 Perceptions of the Current Situation in South Sudan

Discussion of the current situation in South Sudan prompted FGD participants to talk of war, hatred, disunity, violence and tribal conflict. Coupled with the death of family members, these factors combine to make youth worried about the future. When asked to think of a scenario in which youth were scared – fighting, violence and/or conflict were mentioned in 13 of 16 FGDs. In pastoralist Kapoeta South, FGD participants also spoke of cattle raiding.<sup>115</sup> As a result of conflict and insecurity, FGD participants identify a number of protection risks including armed crimes, theft, and movement at night.

In addition to conflict and insecurity, FGD participants also spoke of inflation and the related rise in food prices and fuel shortages.<sup>116</sup> However, in Budi, which has been little affected by the conflict since 2013, some FGD participants had positive perceptions of South Sudan, mentioning peace, independence and education.<sup>117</sup> Indeed, FGD participants in Budi spoke of positive changes, including more NGOs, more health centres and improved schools.

### 3.7.3 Dispute Resolution and Justice Mechanisms

From the FGDs, it would appear that a majority of youth would appeal to their parents for help in case of disputes (12 of 16 FGDs), followed by the police (8 FGDs) and the chief or sub-chief (8 FGDs). FGD participants in Juba appear to have a negative perception of the police, who are associated with corruption and bribery.<sup>118</sup> However, local chiefs are thought to be able to provide advice, solve problems through dialogue, pass rulings on cases and punish guilty parties. Given their role in dispute resolution, it is important to integrate local chiefs as empowered and credible governance modalities.

The government is perceived as best placed to make important decisions regarding the situation of the country (mentioned in 11 of 16 FGDs). Given the opportunity, youth having participated in FGDs would like to ask for:

114 WHO, “Adolescent Pregnancy,” Fact Sheet N°364, 2014. <http://www.who.int/mediacentre/factsheets/fs364/en/>

115 FGD in Kapoeta South on July 23, 2013.

116 FGD in Juba on July 29, 2013; FGD in Juba on July 30, 2015.

117 FGD in Budi on July 30, 2015; FGD in Budi on July 31, 2015.

118 FGD in Juba on July 29, 2013.

- Peace;
- Justice;
- Disarmament; security;
- More schools (in particular for women and girls);
- More jobs; and
- Cheaper food.

### 3.7.4 Outlook for the Future

FGD participants in Budi have a positive outlook for the future: in five years, according to participants, there will be peace, with peace dividends including more hospitals, more schools, boreholes, and good roads.<sup>119</sup> However, in other counties, the outlook for the future is more uncertain: some believe that conflict and insecurity will continue.<sup>120</sup>

According to one FGD participant, “the situation may be better if they sign agreement in Addis Ababa.”<sup>121</sup> While a peace agreement was signed on August 26, 2015, sporadic violence continues.<sup>122</sup> Given that one FGD participant said “when there is peace, automatically the younger generation will have hope for their future,” youth outlook may evolve if the peace agreement is effectively implemented.<sup>123</sup>

#### Summary of Findings:

- Early childbirth is a major child protection concern, affecting 10.5% (n=37) of all female respondents between the ages of 10 and 16.
- FGD participants have broadly negative perceptions of the current context, predominantly highlighting conflict, violence and disunity. As a result, youth are uncertain about the future.
- In Budi, FGD participants are more optimistic, highlighting positive changes including better healthcare and education.

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119 FGDs in Budi in July 2015.

120 FGDs in Juba, Bor South and Kapoeta South in July 2015.

121 FGD in Juba on July 29, 2015.

122 Leihead, A. “South Sudan’s Men of Dishonour,” BBC News, September 28, 2015. <http://www.bbc.com/news/world-africa-34357358>

123 FGD in Bor South on July 26, 2015.

## 4 Conclusions and Recommendations

### 4.1 Education

- Education is limited in pastoralist contexts, but pastoralist youth are for the most part eager to receive education. Existing strategies for the education of pastoralist youth (such as the Pastoralist Education Programme) should be reviewed, and best practices compiled and implemented.<sup>124</sup> In particular, education in pastoralist contexts should strive to be compatible and relevant to the pastoralist way of life.
- Gender disparities undermine education for girls. Reducing early marriage and childbirth will increase education for girls, which will in turn contribute to further reducing early marriage and childbirth. A concerted effort is needed, combining enhanced educational opportunities for girls with sensitization of families on the harmful effects of early marriage and childbirth. Moreover, efforts should be made to reduce the dependency of households on their daughters' bridewealth, providing economic support and incentives for families who keep their daughters in school.
- School fees are a major barrier to education, including in urban areas where, despite better access to education, school fees are higher than in rural settings. While South Sudan guarantees free, universal primary education, these additional fees, including the cost of materials and books, undermine access to education. Subsidized or donated materials would lower the cost of schooling and contribute to enhancing attendance.

### 4.2 Skills and Livelihoods

- Lack of skills and education represent barriers to employment, and youth are as such eager to receive training to learn a new trade. In particular, there is a lack of training opportunities in Budi and Kapoeta South. Trainings should target existing livelihoods in order to improve production and increase income generation, but also diversify livelihoods based on a thorough market assessment and good understanding of consumer demand and market opportunity.
- Lack of money to buy materials prevents youth from setting up businesses, and prevents self-employed youth from increasing their income. Business training should include focus on the availability and cost of raw inputs; in parallel, microfinance and/or credit groups should be developed in order to enable entrepreneurial youth to start their own business.

### 4.3 Nutrition and Food Security

- In order to enhance child survival and improve the health, development and nutrition of children, female youth should be trained on optimal breastfeeding practices and infant nutrition.

124 ILO, "Child labour and education in pastoralist communities in South Sudan," 2013.

- Food insecurity is particularly high in Budi and Kapoeta South. In order to avoid dependency on crops, which are regularly threatened by changes in weather patterns, pests and diseases, youth should be encouraged to move away from subsistence farming and diversify their sources of income. In particular, training should be provided on sustainable farming techniques in order to increase production and enable the sale of surplus, alongside business training and microfinance opportunities.

#### 4.4 Water, Sanitation and Hygiene

- Many youth in Budi and Kapoeta South gather the water they use for consumption from open water sources. In order to limit the spread of waterborne diseases, there is a need for awareness raising on the importance of water treatment. Given that chlorination is not always an available option, and that boiling requires the collection of sometimes scarce fuel, filtering water with an appropriate, clean cloth is a viable option. However, in order for the filtering to be effective, standards should be strictly adhered to, including regular washing of the cloth and sufficient number of folds.<sup>125</sup>
- Sanitation is undermined by the lack of sufficient latrines/toilet facilities. In order to improve sanitation, well lit, weather-resistant pit latrines with cement slabs should be built.
- There is a positive relationship between education and WASH practices, with youth having received education less likely to practice open defecation and more likely to realize the importance of handwashing. Enhancing access to education will contribute to improving WASH practices among youth. In order to access those for whom access to education remains limited, short messages on appropriate WASH practices should be aired on the radio.

#### 4.5 Health

- There is a lack of understanding of the causes and prevention methods of major diseases, in particular in Budi. While improvement in WASH practices will limit the spread of waterborne diseases, the radio should be used to raise awareness of the causes and prevention methods of major causes of morbidity, including malaria. The radio should also be used to increase awareness of HIV/AIDS transmission routes.
- Few households own a mosquito net in Budi or Kapoeta South, leaving households particularly vulnerable to malaria. Mosquito nets should be made more readily available, and population sensitized as to their importance.

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125 Colwell, R. et al. "Reduction of Cholera in Bangladeshi Villages by Simple Filtration," Proceedings of the National Academy of Science of the United States, 100:3, 2003. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC298724/>

## 4.6 Child Protection

- As a result of the recent conflict, many youth have experienced traumatic events, including violence, displacement and the death of family members. Once hostilities have ceased, Truth and Reconciliation Commissions should be held countrywide in order to facilitate the healing process.
- Contextually appropriate and culturally sensitive psychosocial support should be offered to address stress and trauma and promote mental health, alongside holistic and multi-disciplinary support for communities. This support should include the promotion of security and the provision of basic services.<sup>126</sup>
- Resilience should be enhanced by building upon and strengthening existing assets and resources, including self-help, peer group support, and family reunification efforts.<sup>127</sup>

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126 Wessels, M. "Do No Harm: Toward Contextually Appropriate Psychosocial Support in International Emergencies," *American Psychologist*, 2009.

127 Ibid.

## Annex 1: Analysis Indicators

### Quantitative Indicators:

- Education
  - Level of (formal and informal) education
  - Academic aspirations
  - KAP regarding primary and secondary school attendance
  - Perceptions on access, quality and cost of education
- Livelihoods and Youth Skills
  - KAP regarding existing employment/livelihood opportunities
  - Youth skills development
  - Aspirations
- Nutrition and Food Security
  - KAP regarding (seasonal) food insecurity
  - Youth contributions to household food security
  - Coping mechanisms for seasonal food insecurity
- WASH
  - KAP regarding Safe drinking water
  - KAP regarding Human waste disposal
  - KAP regarding Hand washing
- Health
  - KAP regarding causes and prevention of common diseases (including malaria and HIV/AIDS)
  - Use of LLNs and prophylactics
  - Access to information about health
  - Perceptions on access, quality and cost of healthcare

### Qualitative Indicators:

- Youth aspirations (urban/rural)
- Youth contributions to household food security situation
- Satisfaction with educational services
- Child Protection
  - Determinants of participation in conflict
  - Attitudes towards violence
  - Access to justice
  - Risks for children including health
- KAP regarding Environment (nexus with health and food security)
- Current political situation (issues of interest and outlooks)

## Annex 2: Trainings Perceived as Helpful for Securing Employment Among Unemployed Youth, by Gender and County

	Bor South		Juba		Kapoeta South		Budi	
	Male	Female	Male	Female	Male	Female	Male	Female
Beautician / Hair	2.9% (n=2)	31.9% (n=30)	8.1% (n=3)	17% (n=8)	0	4% (n=2)	0	22.2% (n=2)
Blacksmith	0	0	0	0	2.2% (n=1)	0	0	0
Carpentry	40% (n=28)	7.4% (n=7)	8.1% (n=3)	2.1% (n=1)	24.4% (n=11)	32% (n=16)	50% (n=2)	0
Construction site labourer	1.4% (n=1)	0	10.1% (n=4)	6.4% (n=3)	0	0	0	0
Crafts	0	0	0	2.1% (n=1)	0	2% (n=1)	0	0
Dobbi	0	0	0	0	0	0	0	0
Electrician	11.4% (n=8)	10.6% (n=10)	21.6% (n=8)	14.9% (n=7)	0	0	0	0
Farming	15.7% (n=11)	24.5% (n=23)	0	2.1% (n=1)	2.2% (n=1)	2% (n=1)	0	0
Fishing	4.3% (n=3)	0	5.4% (n=2)	0	0	0	0	0
Food preparation/processing	8.6% (n=6)	25.5% (n=24)	2.7% (n=1)	4.3% (n=2)	2.2% (n=1)	10% (n=5)	0	11.1% (n=1)
Gardening	4.3% (n=3)	2.1% (n=2)	5.4% (n=2)	0	4.4% (n=2)	14% (n=7)	0	0
Generator repair	2.9% (n=2)	0	5.4% (n=2)	0	0	2% (n=1)	0	0
Government	10% (n=7)	3.2% (n=3)	0	4.3% (n=2)	2.2% (n=1)	2% (n=1)	0	0
House or shop cleaning	1.4% (n=1)	18.1% (n=17)	0	2.1% (n=1)	2.2% (n=1)	4% (n=2)	0	0
Livestock herding/selling	14.3% (n=10)	1.1% (n=1)	2.7% (n=1)	0	44.4% (n=20)	14% (n=7)	25% (n=1)	0
Livestock feed and other inputs	10% (n=7)	0	0	0	8.9% (n=4)	2% (n=1)	0	0
Masonry	1.4% (n=1)	0	0	0	0	0	25% (n=1)	0
Mechanic - Auto	1.4% (n=1)	0	5.4% (n=2)	2.1% (n=1)	4.4% (n=2)	2% (n=1)	25% (n=1)	0
Mechanic - Bicycle	0	0	0	0	0	0	0	0
Mechanic - Boda	1.4% (n=1)	0	8.1% (n=3)	0	0	2% (n=1)	0	0
Making/selling tea	0	20.2% (n=19)	0	2.1% (n=1)	6.7% (n=3)	4% (n=2)	0	0
Office worker	11.4% (n=8)	21.3% (n=20)	18.9% (n=7)	38.3% (n=18)	0	6% (n=3)	0	22.2% (n=2)
Police	0	2.1% (n=2)	2.7% (n=1)	0	0	0	0	0

Porter (carrying loads)	0	0	0	0	0	0	0	0
Restaurant/Bar	4.3% (n=3)	3.2% (n=3)	0	2.1% (n=1)	2.2% (n=1)	4% (n=2)	0	0
Shop Owner/Retailer/Trader	0	2.1% (n=2)	0	0	4.4% (n=2)	0	0	0
Teaching	4.3% (n=3)	1.1% (n=1)	5.4% (n=2)	14.9% (n=7)	0	4% (n=2)	0	11.1% (n=1)
Transportation	10% (n=7)	2.1% (n=2)	0	0	4.4% (n=2)	6% (n=3)	0	0
Vegetable/Food Seller	2.9% (n=2)	12.8% (n=12)	2.7% (n=1)	4.3% (n=2)	6.7% (n=3)	10% (n=5)	0	0
Welding	0	0	0	0	26.7% (n=12)	26% (n=13)	25% (n=1)	0
Other	0	1.1% (n=1)	8.1% (n=3)	6.4% (n=3)	4.4% (n=2)	6% (n=3)	0	0
Don't know	22.9% (n=16)	31.9% (n=30)	27% (n=10)	23.4% (n=11)	28.9% (n=13)	22% (n=11)	25% (n=1)	55.6% (n=5)
Refuse to respond	10% (n=7)	6.4% (n=6)	8.1% (n=3)	6.4% (n=3)	4.4% (n=2)	2% (n=1)	0	11.1% (n=1)
Total Cases	70	94	37	47	45	50	4	9

## About UNICEF

UNICEF works in 190 countries and territories to help children survive and thrive, from early childhood through adolescence. The world's largest provider of vaccines for developing countries, UNICEF supports child health and nutrition, good water and sanitation, quality basic education for all boys and girls, and the protection of children from violence, exploitation, and AIDS. UNICEF is funded entirely by the voluntary contributions of individuals, businesses, foundations and governments. For more information about UNICEF and its work visit: [www.unicef.org/southsudan](http://www.unicef.org/southsudan)

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